

# **Equality Delivery System Review**

2025





The NHS Equality Delivery System is a selfassessment framework designed to help NHS organizations review and improve our performance in promoting equality and diversity and ensuring fair and inclusive healthcare services.

It provides a set of objectives and outcomes we use to measure our progress in delivering equality across all aspects of our operations, from patient care to workforce management. EDS consists of three Domains:

- Commissioned and Provided Services:
  - Better Health Outcomes: Ensuring equitable health outcomes for all patients, regardless of their background.
  - Improved Patient Access and Experience: Making sure that all patients have equal access to services and receive respectful and responsive care.
- A Representative and Supported Workforce: Ensuring that the NHS workforce is diverse and that staff from all backgrounds feel supported and valued.
- Inclusive Leadership: Promoting leadership that is diverse and inclusive at all levels of the NHS.

There are 18 specific and measurable outcomes across the three domains including reducing health inequalities in the population and workforce; improving patient feedback mechanisms and leadership engagement and governance in relation to the inclusion and health inequalities agenda.

Stakeholders are invited to come along and score a range of evidence under each domain, and all group scores are totalled to give an overall score.

Currently, commissioned and provided services are scored at system level alongside partner organisations in the BSW Integrated Care System. Workforce and leadership domains are scored internally. The Trust will continue to widen participation in this process annually.

Score	Rating
Under 8	Undeveloped
8 to 21	Developing
22 to 32	Achieving
33	Excelling

Overall, the Trust scored 17.5 out of a possible 21 points, achieving a rating of 'Developing'.

#### **Domain one**

The BSW Integrated Care Board (ICB) reviewed Maternity and Neonatal Services in 2023 and the Patient Advice and Liaison Service (PALs) in 2024. In response to the review the departments have undertaken work to improve equity in these areas.

### Maternity and Neonatal Services review 2022-23: Developing

Maternity and Neonatal Services were evaluated as part of the EDS process in the spring of 2023, the resulting actions included implementing a three-year plan and this progress report highlights work to date.

In 2024-25, two years since the review, addressing health inequalities continues to be a priority within the Perinatal service and progress is monitored against the NHS England Three-Year plan for Maternity and Neonatal Services.

In the new financial year 2025/26, the department will implement the recommendations made in the 'Patient safety healthcare inequalities reduction framework' published in May 2025 (NHSE).

Since the evaluation, bespoke EDI training has been delivered to maternity staff which is done collaboratively with the Maternity Voice Partnership and Trust EDI lead. The last cycle had a focus on neuro-divergence and meeting the needs of LGBTQIA+ families with a cultural competency thread woven throughout. Perinatal staff at all levels are encouraged to attend the 'Black Maternity Matters' training provided by NHS Health Innovation West of England.

A key component to the training is the development of a QI project to support Black families using perinatal services. These have included the introduction of silk theatre bonnets, to provide better

head coverage, for colleagues and service users who choose to use them as well as engagement with the Resuscitation Council UK to ensure language used in teaching is representative of all service users. Oliver McGowan training remains mandatory for all maternity and neonatal nursing staff.

To improve access to maternity triage for women who do not speak English, a "passport" has been created. Passports are provided by the community midwives and support women to present to triage without calling ahead, removing a communication barrier and ensuring timely assessment. Within the antenatal outpatients service a 'Little Box of Calm' is now available containing sensory objects/puzzles. This is provided for neurodivergent birthing people who may find the hospital environment unsettling. The 'Patient Communication Toolkit' is a pictorial resource that is available to support clear communication for deaf families, those with learning difficulties or those who do not speak English.

The service is currently running a pilot with "Flashcard" communication tools put together by the MNVP (Maternity and Neonatal voices Partnership) and funded by the LMNS (Local Maternity and Neonatal System). The flashcards communicate common problems and requests using visual images and contain translations in six common languages used by perinatal service users.

The neonatal team are working with the Southwest Neonatal Network on a project to improve the inclusivity of images in the neonatal unit. They have also produced posters specifically for Black mothers inviting feedback and signposting to relevant groups and networks.

To improve their ethnicity data, they have embedded an ethnicity requirement for Patient Safety events reportable via Datix, the incident management system, with a safety net to ensure 100% compliance. The outcomes of patient safety events by ethnicity are reported monthly through the governance process.

A one-year review of ethnicity data for all patient safety incidents during 24/25 in comparison to booking data is planned to explore over representation of ethnic minority groups. This will be presented in the Q1 25/26 Quarterly Safety Report. Representation of ethnic minority women in the 2024 National Maternity Survey is representative of the local population. This provides assurance of improving equity in patient engagement.

## Patient Advice & Liaison Services (PALs) Review 2023-24: Developing

The PALs EDS review took place in spring 2024. Since then, the PALs team have worked to improve access to healthcare, including providing all Interpreting and Translation services across the trust. They have added additional software to enable creation of easy read documents and translated material and routinely promote accessible communication options and reasonable adjustments.

The team also facilitate the provision of the Carers Support Passport to improve how we support unpaid carers. The team attend EDI-related training including Oliver McGowan training (autism awareness) and they have appointed an EDI Champion (a member of staff who helps promote inclusion and provides local support).

PALs are instrumental in helping the Trust to understand the experience of our patients and the public, through multiple feedback mechanisms, and they work with key stakeholders to support in the identification of themes and driving improvements.

The Head of Patient Experience and Engagement has developed a library of lived experience videos to help share direct patient stories and raise awareness amongst staff. These videos include reflections from seldom heard groups such as those living with disability.

To help improve EDI-data quality, the team have recently introduced a trial to capture protected characteristics data during the feedback process, which is shared on a voluntary basis. This includes asking about age, gender, ethnicity, language, sexual orientation, disability and religion with a clear explanation of how the data is to be used.

Both services can be re-evaluated at a future date to gauge the impact of their improvement initiatives.

### Treating Tobacco Dependence & Mental Health Detentions 2024-25

The BSW Integrated Care Board is leading the Domain 1 (Commissioned and Provider Services) review; this work will be completed and reported on by the end of summer 2025 – the three services under review are:

- Maternity treating tobacco dependence service
- Acute inpatients tobacco dependence service
- Mental health detentions.

Domains Two and Three Review 2024-25 In March 2025 the Trust undertook an internal review of Domain 2 (workforce health and wellbeing) and Domain 3 (Inclusive Leadership), the results of which are reported below.

A diverse group of staff including staff network representatives met at the Inclusion and Health Inequalities
Subcommittee meeting to review and score evidence across domain 2 and 3 categories. Scoring has improved for both domains, moving the Trust from 'Developing Activity', to 'Improving Activity'. The facilitator highlighted initiatives which have been undertaken since the 2024 review which has helped to improve the scores:

#### **Workforce health and wellbeing:**

Introduction of Cultural Competence training; the inaugural EDI conference which focussed on building allyship; recruitment, training and deployment of EDI champions and Inclusion Recruitment Champions; staff involvement in developing EDI initiatives; implementation of the Sexual Safety Charter; a review of speaking up processes, with further work in 2025-26 with staff to shape a behavioural framework; workshop with key staff to learn from important legal cases; roll out of Expectation of Line Management training; increased staff engagement, including meetings with Trust Board representatives, and a suite of health and wellbeing interventions to support staff welfare.

Inclusive Leadership: The Trust Board made EDI-commitments in 2024-25, including meeting with members of staff to understand their lived experience, findings from this listening events have been shared with People Services to help inform future actions; an EDI budget has helped to improve the impact of

initiatives; the board have increased their visibility and support a wide range of diversity awareness days and events and are involved in programmes like mentorship; and their visible endorsement and sponsorship of the EDI agenda helps to send a positive and progressive message across the Trust. The Board approved the three year EDI Strategic Plan 2025-28 with a commitment to an improved evidence-base for EDI initiatives.

Improvements to the EDS process, which has been streamlined to make reviewing a substantial amount of information and scoring easier, has also had a positive impact on the scoring – the information is presented in a more transparent and easily digested format.

Staff, volunteers, patients and members of the public who would like to get involved in future reviews should contact the Head of EDI – <a href="mailto:gwh.inclusion@nhs.net">gwh.inclusion@nhs.net</a>.

