



*Wigan Borough
Clinical Commissioning Group*

**Equality & Diversity Strategy
2016 - 2019**



DOCUMENT CONTROL PAGE	
Title	Equality and Diversity Strategy 2016 - 2019
Supersedes	Equality and Diversity Strategy 2012 - 2016
Minor Amendments	
Author	Quality Improvement Manager
Ratification	Senior Leadership Team Corporate Governance Committee WBCCG Governing Body
Application	All staff and stakeholders
Circulation	All staff and public
Review	June 2019
Date Placed on the Intranet/Sharepoint: Following Approval	EqlA Registration Number: 77/19

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Foreword

As the Director of Quality and Safety for Wigan Borough Clinical Commissioning Group (WBCCG) I am delighted to announce the Equality and Diversity Strategy for 2016 - 2019.

WBCCG is led by local clinicians in partnership with communities. We commission quality services that ensure value for money and the best possible outcomes for our local resident population.

This strategy demonstrates our vision and continued commitment to achieving equality in health and care; and aims to improve the way we commission services.

Our previous and first Equality & Diversity Strategy was introduced at the time of WBCCG's inception in April 2013 and much has been achieved in the period since, particularly around engagement with local stakeholders and importantly patient representatives.

This new strategy builds on those successes however, we are fully aware that the strategy alone does not mean we have done all that we need to do regarding this challenging agenda.

We will continue to work with all of our service providers to improve the health of our local community, by ensuring health needs are appropriately assessed and that both existing and developing services are able to respond to these identified health needs.

WBCCG is dedicated to developing an organisational culture that puts equality and diversity at the forefront of our planning, which promotes inclusion and embraces diversity ensuring that the focus on equality is maintained and strengthened across the local NHS.

Julie Southworth
Director Quality and Safety

1. Introduction

- 1.1. WBCCG is the statutory body responsible for commissioning local health services for the 320,000 patients of Wigan Borough.
- 1.2. This Equality and Diversity strategy sets out how we will undertake our duties in line with the Equality Act 2010 and supporting guidance.
- 1.3. WBCCG has a statutory responsibility for ensuring compliance with Equality and Human Rights legislation, in particular the Equality Act 2010 and the Human Rights Act 1998, which provide an important legal framework to promote equality and protect people from discrimination.
- 1.4. The Equality Act protects people from discrimination, harassment and victimisation on the basis of nine 'protected characteristics'. The protected characteristics are: age, disability, gender-reassignment, marriage & civil partnership, pregnancy & maternity, race, religion or belief, sex and sexual orientation. The Human Rights Act sets out fundamental rights and freedoms that all individuals in the UK have access to.
- 1.5. Health inequalities remain a key challenge for Wigan Borough. Inequalities, discrimination and social exclusion can create an environment where some people experience greater health inequalities than others. Life expectancy is 10.0 years lower for men and 9.7 years lower for women in the most deprived areas of Wigan than in the least deprived areas, and this is something that as an organisation we are committed to working with all stakeholders to address.

Please see appendix 1 for further information.

- 1.6. Socio-economic and environmental factors play a key part in health and well-being. Some areas of Wigan experience greater levels of poverty and deprivation, (11,400 children live in poverty) and higher levels of ill health. Some groups of people within the community experience greater levels of inequality than others, for example due to age, ethnicity, gender, disability, sexual orientation, socio-economic status.
- 1.7. People in our community have different needs and qualities. Our diversity is a remarkable asset and its value needs to be embraced. Understanding the diversity of our population can help us to plan and deliver services better.
- 1.8. Since authorisation in 2013, one of WBCCG's principle goals has been to improve health outcomes and address health inequality in the way we commission. We want to continue this work and build on our achievements.
- 1.9. We have refreshed our Equality and Diversity Strategy with the aim of advancing equality for all our service users and staff. This strategy will guide the work WBCCG undertakes and will help strengthen our governance and leadership.

2. Purpose

- 2.1. This strategy sets out how WBCCG will meet the equality duties, as set out in the Equality Act 2010, by putting the patient at the heart of everything we do.
- 2.2. This will be achieved via effective engagement and involvement of local people in decision making and commissioning of services, and by working in partnership with

local people, our local authority and health care providers to improve health outcomes for the protected groups, as identified under equality legislation.

- 2.3. WBCCG will ensure that all its policies and services and those of local providers will be subject to Equality Impact Assessments (EqIAs) to ascertain any differential impacts on groups with specific protected characteristics and propose actions to address them.
- 2.4. This strategy has been developed to move beyond legal compliance and to support WBCCG to initiate best practice and to improve service conditions and health outcomes while reducing wasted resources.
- 2.5. The intention of our Equality and Diversity Strategy is to:

Recognise that diversity is everyone's business and that diversity is an asset to our Borough

Understand and strengthen the way in which the diversity of our staff, service users and clinical leads enhances WBCCG's abilities to effectively commission services and make notable differences to health outcomes.

Ensure that principles of good equality and diversity practice inform and shape our, learning, research and employment approaches for the benefit of all

3. Definitions

- 3.1. Equality and diversity is a term used in the United Kingdom to define and champion equality, diversity and human rights as defining values of society. It promotes equality of opportunity for all, giving every individual the chance to achieve their potential, free from prejudice and discrimination.
- 3.2. UK legislation requires public authorities to promote equality in everything that they do, also making sure that other organisations meet their legal duties to promote equality while also doing so themselves.

4. Roles & Responsibilities

- 4.1. **Accountable Officer and Governing Body:** A fundamental role of WBCCG's Accountable Officer and Governing Body members is to promote equality, challenge discrimination and foster good relationships as set out in the Equality Act 2010.
- 4.2. **Director with Lead for Equality and Diversity:** It the responsibility of the Director with the lead for equality and diversity to review and implement the strategy with the equality and diversity lead.
- 4.3. **Corporate Governance Committee:** It is the responsibility of the Corporate Governance Committee to review and approve the strategy. Ratification of the strategy will ultimately sit with the Governing Body.

4.4. Equality and Diversity Lead: It the responsibility of the Equality and Diversity Lead to review and implement the strategy with the Assistant Director.

4.5. All Staff: It is the personal responsibility of all staff to follow WBCCG policies and procedural documents.

5. Our Equality Aims

5.1. The Equality Strategy is based on the vision of WBCCG to work with local people and partners to deliver the best possible healthcare for the local population and empower people to be in control of their own health and healthcare services.

5.2. WBCCG shall use its expertise to improve the health & wellbeing of the people of Wigan Borough through the progressive development of integrated, quality led health care commissioning and responsible utilisation of our financial resources.

5.3. To improve the knowledge and skills of the workforce to understand the needs of all our services users to support the delivery of WBCCG health priorities, in accordance with statutory requirements.

5.4. To develop meaningful engagement with patients, carers and their communities to improve the health of all the people in our community.

5.5. To develop equality champions to support the development of the Wigan Borough Locality Plan, to ensure equality is embedded within this development.

5.6. To ensure the Equality Delivery System (EDS2) is incorporated into all WBCCG activity.

5.7. To ensure Equality and Diversity Leadership is included in workforce objectives, personal roles and responsibilities.

6. Our Equality Objectives

6.1. The Equality Act 2010 requires public sector organisations to publish equality objectives at least every four years and share its progress in achieving those objectives. Our equality objectives have been shaped by our local commissioning priorities and stakeholder feedback.

WBCCG objectives will be:

- Establishing a robust evidence base to inform commissioning for better health outcomes.
- Reducing barriers to accessing services
- Embedding patient and stakeholder involvement in commissioning
- Developing inclusive leadership and ensuring staff recruitment and development will be fair, flexible and provide positive experience.

Please refer to Appendix 2 - Equality Objectives Action Plan.

7. Statutory Responsibility

7.1. We will comply with legislative requirements to meet the needs of people with protected characteristics.



7.2. We will be improving healthcare services for the other protected groups such as veterans and carers over the next three years to meet the national requirements of the Equality Delivery System.

7.3. Equality Act (2010) Section 149: Public Sector Equality Duty

We will:

- Remove or minimise disadvantages connected with a relevant protected characteristic.
- Take steps to meet the different needs of persons who share a relevant protected characteristic.
- Encourage persons who share a relevant protected characteristic to participate in public life or any other activity in which they are under-represented.
- Publish information to show that we are complying with the Equality Act 2010 on an annual basis.
- Publish workforce information about persons who share a protected characteristic who are its employees and its service users.
- Prepare and publish equality objectives to identify what we can do to meet the requirements of the Equality Act 2010. We will review our objectives every four years.

7.4. We acknowledge that organisations that are not public authorities are also required to have 'due regard' to the needs listed above whenever they carry out public functions. Therefore we will ensure this is part of our contractual agreements in our commissioning plans. [Public Sector Equality Duty 2016](#)

7.5. NHS Act 2006, Section 242 / Health and Social Care Act 2012, Section 25

We will:

- Engage with people from or representing protected groups from our local community to develop the services we provide to the local population.
- Require evidence of engagement from the service providers we commission that identifies the most vulnerable protected groups for each service based on ratified research and how they have improved access, experience and health outcomes for those groups.

Please refer to Appendices 3, 4 and 5 for further statutory information.

8. Commissioning Services

- 8.1. In order to identify the priority areas, WBCCG has analysed data from the health needs assessments; population data; national policy and WBCCG existing strategy and strategic aims and clinical engagement.
- 8.2. WBCCG has identified priority clinical areas within The Wigan Borough Locality Plan for Health and Care Reform which has been developed to ensure there is a clear correlation between improving quality for all service users by using evidence-based practice and redesigning care pathways to reduce waste and improve quality.
- 8.3. By 2020 we will see a transformed, sustainable health and care system in Wigan Borough. It will be a system that is focused on what keeps people well and in control of their lives and where the barriers that prevent joined up care have been broken down.
- 8.4. At the heart of community based integrated care will be a new model of GP services focused on place-based clusters. We will work in partnership across the health and care system, and with other services to ensure these new multi-disciplinary teams work effectively to support patients and reduce demand on acute services.
- 8.5. Everything WBCCG do is about improving the quality of services and maintaining high standards. We believe that by delivering high standards of clinical safety, quality and safeguarding and by reducing clinical variation we are building a sustainable system.
- 8.6. The ethos of quality is embedded in all of our work. WBCCG will ensure that this is maintained during the transition required for a transformational programme of this scale [Wigan Borough Locality Plan](#)
- 8.7. We will procure, monitor and evaluate the services we commission and deliver in line with the strategy to improve patient access, experience and health outcomes for all the people in our community; specifically those who identify with protected characteristics in line with the Equality Delivery System.

9. Further Information

- 9.1. Our Equality Strategy is linked to all other plans to ensure that equality, diversity and human rights are embedded within everything we do.

- 9.2. Our structure has the capacity we need to undertake the national and legislative requirements and make year on year improvements for the health and wellbeing of our community.
- 9.3. Our systems will improve equality monitoring that will identify any gaps in service provision so that we can improve our commissioning of those services.
- 9.4. Workforce will reflect personal, fair and diverse practices in our employment, and for commissioning and service provision.
- 9.5. Shared values are incorporated into the way we run WBCCG to ensure equity in the delivery of patient care.
- 9.6. Strategic decisions are based on the information in the Governing Body papers and equality analysis from directorates that identifies the needs of our population, specifically for people with protected characteristics.
- 9.7. Equality analysis takes place during the appropriate stages of the commissioning cycle to reduce any negative impacts on people with protected characteristics, when developing/redesigning services.
- 9.8. Bi-monthly collaborative meetings take place and are supported by local representatives for people with protected characteristics.
- 9.9. The Equality and Diversity Lead works with others on consultations ensuring equality analysis is undertaken.

10. Staff Development

- 10.1. Staff equality, diversity and human rights training is integral to the Equality and Diversity Strategy to enable them to support service users to access and improve their experience of services and improve health outcomes for our community.

11. Communications and Engagement

- 11.1. WBCCG is committed to transparency and openness and recognises that individual members of the public and sections of the community may experience barriers in accessing information and services. Transparency in decision-making increases the credibility of decisions and the trust between health organisations and patients which starts to break down barriers.
- 11.2. Our Communications and Engagement strategy encourages the use of a wide range of communication methods to promote access to information and will ensure the engagement process is open and accessible to all.
- 11.3. The Communications and Engagement strategy sets out how WBCCG has or will establish mechanisms for:
 - Engagement with, and listening to, service users, carers, diverse groups and other stakeholders.
 - Having a means of ensuring that service user experiences are taken into account when commissioning decisions are made.

- Communicating with stakeholders to ensure that people are kept informed of developments and have access to information they need, when they need it.

11.4. The WBCCG Consultation Protocol sets out the process we will follow to decide whether we should consult and how a consultation should be delivered. Consultation uses a mixture of engagement, market research, feedback and data and information-giving to make sure it is robust.

11.5. When communicating, engaging and consulting, we will have due regard to the equality duty. Having due regard means consciously thinking about the three aims of the equality duty as part of the process in decision-making. This means that consideration of equality issues must influence how our decisions are reached on how services are commissioned. [Communications and Engagement Strategy 2016-18](#)

12. Equality, Diversity & Human Rights Impact Assessment

12.1. To enable the CCG to meet its legislative duties and regulatory guidance, all new and revised procedural documents, services and functions are to undertake an impact assessment to ensure that everyone has equality of access, opportunity and outcomes regarding the activities.

13. Consultation & Approval Process

13.1. This strategy will be reviewed by the Senior Leadership Team of WBCCG.

13.2. This strategy will be approved by WBCCG's Corporate Governance Committee and ratified by the Governing Body. The Corporate Governance Committee is a committee of the Governing Body and has a Clinical Chair and Lay representation.

14. Dissemination & Implementation

14.1. Following approval and ratification, this strategy will be placed on the CCG external website and internal SharePoint. It will be shared at appropriate meetings, and with all staff.

15. Monitoring Compliance

15.1. The Assistant Director of Governance is responsible for monitoring compliance with the Document Control Policy. This will be completed on an annual basis and reported to the Corporate Governance Committee.

15.2. This document will replace the previous equality and diversity strategy and all previous versions will be removed from the website and SharePoint.

16. Standards & Key Performance Indicators

16.1. This strategy will be monitored for effectiveness by self-assessment against any external accreditation that is applicable and may be subject to review by internal audit.

17. References & Bibliography

17.1. Equality Act 2010

17.2. WBCCG Public Sector Equality Duty.

17.3. The Wigan Borough Locality Plan for Health and Care Reform

17.4. Equality Delivery System (EDS2)

17.5. Communication and Engagement Strategy

18. Associated CCG Documents & Useful Contacts

18.1. Document Control Policy

18.2. Equality, Diversity and Human Rights Policy

18.3. See all WBCCG HR Policies available on SharePoint

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Appendix 1

Health Inequalities Data

Health in summary

The health of people in Wigan is varied compared with the England average. Deprivation is higher than average and about 19.5% (11,400) children live in poverty. Life expectancy for both men and women is lower than the England average.

Living longer

Life expectancy is 10.0 years lower for men and 9.7 years lower for women in the most deprived areas of Wigan than in the least deprived areas.

Child health

In Year 6, 20.2% (633) of children are classified as obese. The rate of alcohol-specific hospital stays among those under 18 was 59.0*, worse than the average for England. This represents 40 stays per year. Levels of breastfeeding and smoking at time of delivery are worse than the England average.

Adult health

In 2012, 27.0% of adults are classified as obese. The rate of alcohol related harm hospital stays was 873*, worse than the average for England. This represents 2,716 stays per year. The rate of self-harm hospital stays was 378.4*, worse than the average for England. This represents 1,217 stays per year. The rate of smoking related deaths was 371*, worse than the average for England. This represents 595 deaths per year. Estimated levels of adult physical activity are worse than the England average. Rates of sexually transmitted infections, people killed and seriously injured on roads and TB are better than average.

Appendix 2

Equality Objectives 2016/2019

NO	Objective	LEAD (s)	TIME FRAME	Actions	DATE COMPLETED
1	Establishing a robust evidence base to inform commissioning for better health outcomes	T.S	2016/19	<p>Explore contracting mechanisms that enable us to hold our providers to account.</p> <p>Use assurance frameworks with providers.</p> <p>Analyse provider performance to assess impact of commissioning decisions on patients from diverse backgrounds.</p> <p>To embed the equality agenda into the day to day practices to position WBCCG as the local expert body commissioning health service.</p>	
2	Reducing barriers to accessing services	T.S	2016/19	<p>Work with primary care to improve appointments and timely referrals for all patients.</p> <p>Analyse provider performance to assess impact on patients from diverse backgrounds.</p> <p>Ensure providers collate and publish information about patient satisfaction by equality groups.</p>	

				<p>Work with public health to assess the needs of minority groups, new migrants and vulnerable patients to inform commissioning plans.</p> <p>Ensure reasonable modifications for disabled patients.</p> <p>Ensure effective interpreting and translation service for those whose first language is not English.</p> <p>Develop greater awareness among clinical and non-clinical staff about sexual orientation (LGBTQ), dignity and respect of vulnerable patients and older people.</p> <p>Uphold the Older People's Dignity Code and ensure providers arrange for quality interpreters.</p> <p>Improve online GP appointments for young and working people.</p> <p>Work with primary care services to raise mental health awareness amongst staff.</p> <p>Commission targeted initiatives to improve access by all groups.</p> <p>Engage patients and carers from all backgrounds in mental health commissioning.</p> <p>To improve the health outcomes for people with protected characteristics by improving access to services, patient engagement and experiences of accessing the services we provide and commission.</p>	
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				<p>To engage and involve member practices regularly and appropriately to ensure equitable services are delivered across Wigan Borough.</p> <p>To explain our commissioning plans so that all members of our community can understand them, specifically those with Learning Disabilities.</p>	
3	Embedding patient and stakeholder involvement in commissioning	T.S	2016/19	<p>Carry out timely equality analysis of care pathways, commissioning plans and strategies.</p> <p>Monitor equality information of participants who attend engagement events.</p> <p>Publish update and progress reports on engagement.</p> <p>To reassure patients and stakeholders about our plans through stakeholder engagement events and public information notices that will be provided in different formats, such as posters, leaflets, electronic, media, easy read etc in line with the Accessible Information Standards.</p> <p>To improve the experience of all service users, especially those with protected characteristics; and use their experiences to inform, influence and develop services.</p> <p>To involve the public, patients and stakeholders at the appropriate states of the commissioning cycle.</p>	

				<p>To be clear about our intentions how we made decisions based on community engagement and plan to achieve them.</p> <p>To manage the implications of difficult commissioning decisions by undertaking equality impact assessments / analysis which will be supported by stakeholder engagement that challenges and ensures good practice.</p>	
4	Developing inclusive leadership further staff recruitment and development will be fair, flexible and provide positive experience	T.S	2016/19	<p>Governing body members and senior managers at WBCCG demonstrate good practice.</p> <p>Provide equality and diversity training to staff that are involved in recruitment.</p> <p>Embed equality and inclusion in Governing Body members' training.</p> <p>Create mentoring and career development opportunities for all staff.</p> <p>Develop positive actions to attract applicants from diverse backgrounds for jobs.</p> <p>Revise performance and set objectives by using EDS2.</p> <p>Use Workforce Race Equality Standards to monitor and improve race equality in the workforce.</p> <p>Monitor equality analysis and action plans.</p>	

				<p>Assure that all our providers comply with the requirements of the Equality Act 2010; seek assurance on the implementation of the WRES, EDS2 and Accessible Information Standards.</p> <p>Develop a calendar of events to celebrate diversity.</p>	
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Appendix 3

LEGAL AND STATUTORY RESPONSIBILITY

The focus of WBCCG is to ensure we commission best quality care, drive better clinical outcomes for our patients and improve performance of our providers. The requirements contained in current legislation underpin policies and initiatives developed by WBCCG.

The Health and Social Care Act 2012: The Health and Social Care Act, states that each commissioning group must, in the exercise of its functions, have regard to the need to:

Reduce inequalities between patients with respect to their ability to access health services

Reduce inequalities between patients with respect to the outcomes achieved for them by the provision of health services

Promote the involvement of patients and their carers in decisions about provision of the health services to them;

Enable patients to make choices with respect to aspects of health services provided to them

The Equality Act 2010

The Equality Act 2010 replaced previous anti-discrimination laws with a single Act. The Act provides a legal framework for service users, patients and employees to seek redress where discrimination has occurred. The Act places key duties on statutory organisations that provide public services. To be compliant, BCCG must meet the General and Specific Duty. The equality groups (protected characteristics) identified in the Act are listed in the table below.

PROTECTED CHARACTERISTICS	
AGE	By being of a particular age/within a range of ages
DISABILITY	A physical or mental impairment which has a substantial and long term adverse effect on day to day activities
GENDER (SEX)	Being a man or woman
GENDER REASSIGNMENT	Transsexual people who propose to; are doing or have undergone a process of having their sex reassigned
PREGNANCY AND MATERNITY	If a woman is treated less favorably because of her pregnancy, pregnancy related illness or related to maternity leave
RACE	Includes colour, nationality, ethnic origins and national origins
RELIGION OR BELIEF	The full diversity of religious and belief affiliations in the United Kingdom
SEXUAL ORIENTATION	A person's sexual preference towards people of the same sex, opposite sex or both
MARRIAGE AND CIVIL PARTNERSHIP	This is relevant to employment and training

Public Sector Equality Duties (PSED)

A key measure in the Equality Act 2010 is the public sector equality duties (section 149 of the Act). The PSED applies to all public bodies and others carrying out public functions. BCCG will ensure that all its policies and practices carried out within the organisation or on behalf of the CCG will make informed decisions based on equality analysis and assessment of impact that has identified, particularly in relation to the protected characteristics as listed above.

There are three main general duties:

EQUALITY ACT GENERAL DUTIES	
Duties	Due Regard
Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010	<p>Undertaking Equality Impact Assessments before commissioning/planning new services or changing services.</p> <p>Remove or minimise disadvantages connected with a relevant protected characteristic (e.g. address the problems that non clinical BME staff have in accessing senior positions in the workplace)</p> <p>Take steps to meet the needs of persons who share a relevant protected characteristic (e.g. ensure that the needs of Muslim staff are met during the month of Ramadan, in terms of prayer facilities)</p> <p>Encourage persons who share a relevant protected characteristic to participate in public life or any other activity in which they are under-represented (e.g. encourage more disabled people to apply for senior posts).</p>
Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.	Tackle prejudice (e.g. tackle hate incidents/crime for people with protected characteristics)
Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.	Promote understanding (e.g. promote an understanding of different faith groups and the impact of these in service delivery)

Equality Act Specific Duties

Publication of information

Each public authority must publish information to show that it is complying with the s.149 duty by 31st January 2012 and at least on an annual basis after that. Authorities must include information about persons who share a protected characteristic who are its employees and its service users.

Equality objectives

Each public authority must prepare and publish one or more objectives it thinks it should achieve to have due regard to the need to eliminate discrimination and harassment, to advance equality of opportunity or to foster good relations. The objective must be specific and measurable.

Appendix 4

HUMAN RIGHTS

The Human Rights Act (1998) places a legal obligation on BCCG to adhere to the fundamental human rights of individuals, as patients and staff, in its care or employment.

This Act incorporates the European Convention on Human Rights into UK law. A human rights based approach is at the heart of the NHS constitution and is about putting the patient, his/her carers and families first and foremost in decision making.

Adopting a human rights based approach will set out the patient's rights, around access to healthcare provision, the quality of care he/she will receive, the treatments and programmes available, confidentiality and the right to redress if things go wrong.

The implementation of a human rights based approach will strengthen the evidence of the organisation's commitment to the Public Sector Equality Duty.

Areas of human rights particularly relevant to health and social care are:

The Right to Life (Article 2) e.g.

- Refusing to give life-saving treatment on the basis of someone's age or disability
- Avoidable patient deaths, for example, due to dehydration or lack of nutrition
- Failing to take steps to protect a member of staff from a known and immediate risk from a patient

Freedom from inhuman and degrading treatment (Article 3) e.g.

- Patients (particularly the most vulnerable – e.g. children and the elderly) being abused physically or mentally either by staff, other patients, or visitors; failing to take steps to protect vulnerable groups from such treatment
- Patients being left without personal care
- Patients suffering from dehydration or malnutrition
- Staff using unreasonable and disproportionate force to restrain a patient
- Patients not being given relief from severe pain when it is reasonable to do so
- Victimising patients for making complaints
- Painful or humiliating treatment for which the patient has not given *informed* consent to

The right to liberty (Article 5) e.g.

- Not discharging patients in a timely manner or unlawfully detaining them (holding them against their will); failing to pay due consideration to patient welfare on discharge
- Excessive or unreasonable restraint without lawful authority

Respect for private and family life (Article 8) e.g.

- Lack of privacy on wards, including respect for medical records
- Lack of dignity and respect in personal care
- Patients not being informed of their treatment or care or ignoring their wishes

- Inadequate arrangements for patients to stay in contact with family members (e.g. very restrictive visiting times)
- Reading patient's private correspondence/communications without legal consent to do so

The right not to be discriminated against (Article 14) e.g.

- Bullying or harassment
- Providing a lower standard of care for some groups (e.g. the elderly) compared to other groups; making unreasonable, prejudicial, assumptions about someone because they are a member of a certain group (e.g. ethnic groups, disabled people, Gay people)
- Failing to meet the reasonable specific needs (e.g. for food/diet, interpreters) of certain groups.

Appendix 5

NHS EQUALITY DELIVERY SYSTEM (2)

Meaningful engagement with patients, carers and local communities is also an underpinning principle of the National Health Service (NHS) Equality Delivery System (EDS) which has four goals:

Better health outcomes for all
Improved patient access and experience
Represented and supported staff
Inclusive leadership at all levels

The EDS is designed to support NHS Commissioners and providers to deliver better outcomes for patients and communities and better working environments for staff.

The EDS is all about making a positive difference and as a tool has its foundation based fundamentally upon a partnership approach with patients, the public, staff and staff-side organisations in order to review equality performance and identify future priorities and actions. It also offers local and national reporting and accountability mechanisms.

WBCCG has agreed to follow the EDS as it applies to us as Commissioners, as opposed to the deliverer, of NHS services: particularly in the way we commission/procure services.