

Diversity and Inclusion Annual Report
2016 / 2017



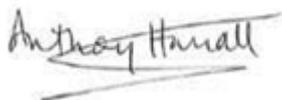
Foreword

Salford CCG has a vision to commission high quality services which will enable our population to live longer healthier lives. We know from evidence that this vision will never become a reality without advancing equality and tackling health inequalities.

As an organisation, we regard all members of our population with equal worth and therefore believe that the celebration of diversity and principles of inclusion are fundamental if we are going to make progress in achieving our Equality Objectives.

We strive to ensure that diversity and inclusion are never regarded as standalone functions, but that our workforce understand, recognise and value the principles of inclusion so that they are embedded throughout all behaviours and within all commissioning activity.

This is Salford CCG's fifth Equality and Inclusion Annual Report and I am delighted with the efforts that have gone into making progress against our Equality Objectives over this year.

A handwritten signature in black ink that reads "Anthony Hassall". The signature is written in a cursive style and is underlined with a single horizontal line.

Chief Accountable Officer

Anthony Hassall

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1.0 Introduction

The purpose of this report is to provide information on how Salford CCG met its legal and mandated duties in its functions with regards to diversity and inclusion over the time period 1st September 2016 – 31st August 2017.

Since its inception in April 2013, Salford CCG has undertaken considerable work to meet its moral and legal obligations to promote equality and address health inequalities to improve access to services, patient experience, and health outcomes for the population of Salford.

In July 2017 NHS Salford Clinical Commissioning Group (CCG) was rated as 'outstanding' for the second year running. The CCG achieved the top rating against the CCG Assurance Framework for 2016/17, making it one of only six CCGs in the north of England to receive the highest national rating for performance, and one of 21 CCGs nationally.

As an organisation continually striving to better itself, Salford CCG believes that by developing a stronger, more inclusive culture – it will be better placed to achieve its organisational vision and aims.

The CCG is working towards becoming a truly inclusive employer and commissioner; in creating an environment and culture that celebrates inclusion and diversity, dignity and respect, which values, nurtures and harnesses difference for the benefit of patients, service users, their families, carers, members of the public and our employees.

Salford CCG is committed to the elimination of discrimination, the reduction of health inequalities, the promotion of equal opportunities and the commissioning of services which ensure and provide dignity and respect for all patients, service users, their families and carers.

1.1 Salford - Our City

Overall Salford has a younger population than England. One in five (48,000 people) of everyone living in Salford is aged under 16 and one in every 15 (16,000 people) is aged over-75.

Half of every one in Salford is aged under 35 years old, this is called the median age. Worsley has the oldest population in Salford, half of everyone in this ward is aged over 44 years. Four other wards have a median age of 40 years or higher (Claremont, Eccles, Boothstown and Ellenbrook and Walkden South). The youngest ward is Irwell Riverside with half its population aged under 28 years. Three other wards have a median age no greater than 30 years, all in the East of the city (Ordsall, Broughton, Kersal).

As life expectancy increases the proportion of older people will also increase. It is projected that the number of over-75s will increase by two-thirds over 25 years.

Levels of disability and poor health are high in Salford. The proportion of people reporting day-to-day activities limited a lot is around a third higher than the national level. Similarly the proportion of people reporting bad or very bad health is over a third higher in Salford. Little Hulton, Langworthy and Broughton have the highest levels of disability and poor health. Boothstown and Ellenbrook, Worsley and Ordsall have the lowest levels.

The gender breakdown in Salford is similar to the national picture. Children and working age adults are evenly split between males and females. Older populations have proportionality more women, 59% of over-75s are women.

Applying national prevalence rates of people who had sought medical care for gender variance to Salford, gives an estimated figure of 47 individuals, with 60% (28 individuals) having undergone transition. 80% were assigned as boys at birth (now trans women) and 20% as girls (now trans men). The same source also notes an upward trend of people seeking treatment, which represents a doubling every 6.5 years.

Nationally just under half of the adult population is married (47%), in Salford the figure is lower (37%). The range across the city shows a strong link to age with younger populations in Ordsall and Irwell Riverside having a lower marriage rate (18%) and older populations in Worsley and Boothstown and Ellenbrook a higher rate (56% and 57% respectively). Rates of same sex civil partnership are between 0.1% and 0.6% with higher rates in the younger areas.

There were 3,528 maternities in Salford in 2015. The general fertility rate (GFR) measures the number of births per 1000 women aged 15 to 44. Salford had a higher GFR (68) than England (62) and Greater Manchester (65) in 2015. Within Salford the highest GFR is in Kersal with a rate of around 100. The lowest rates were seen in Ordsall and Irwell Riverside with a GFR of around 40. Teenage conceptions have fallen significantly over recent years but remain above the national average.

During the period 2001-2011 the number of people in black and minority ethnic (BME) groups almost tripled, although the BME population remains smaller than in England & Wales in relative terms, but the gap is closing. Salford's largest BME group in 2011 was 'White Other' (10,300), followed by 'Black African' (5,400), 'Asian Indian' (2,600) and 'Asian Chinese' (2,500). There are a further 4,600 people who described their ethnicity as mixed.

At the last census 64% of people in Salford described their faith as Christian compared to 59% nationally. Those with no religion or who declined to say made up 28.5% of the population. The next largest group was those identifying as Jewish with 3.3% most of whom live in East Salford. Within Kersal ward 41% of the population identify as Jewish.

There is no definitive national or local data on the proportion of the population which is LGBT. A recent local needs assessment used a number of sources to estimate the number of LGBT over-18's in Salford at between 1,855 and 8,146 (although it may be higher). This is a higher proportion of the population than estimated for England as a whole, which is likely to be made up of a similar percentage of lesbian and bisexual women and a higher proportion of gay and bisexual men than nationally.

The average household income in Salford is almost £29,000, around £9,500 lower than the national average. Salford has a higher proportion of children living in low income households (26.5%) than England (19.9%). Across the city there is a considerable variation in the rate of children in low income households from 3% (Worsley) to 45% (Irwell Riverside). Around one in eight working age adults claim out of work benefits. The figures range from 3% in Worsley to almost 20% in Little Hulton and Langworthy. Fuel poverty affects one in nine households within the city. This ranges from 5.9% in Boothstown and Ellenbrook to 14.4% in Langworthy.

1.2 Health Inequalities in Salford

Male life expectancy in Salford is 76.7 years compared to 79.5 years in England (*Public Health England (PHE) 2011-13*)

21% of Salford's population have a limiting long term condition compared to 18% in England (*Census 2011*)

24% of Salford residents smoke compared to 18% in England (*PHE 2014*).

The rate of hospital admissions episodes for alcohol related conditions in Salford (954/100,000) is almost 50% higher than the rate for England (645/100,000) (*PHE 2010-2014*)

For neighbourhood profiles please visit www.salford.gov.uk

2.0 Our Legal and Mandated Duties

2.1 Public Sector Equality Duty (PSED)

The public sector Equality Duty as set out in the Equality Act (2010) requires public authorities, in the exercise of their functions, to have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act
- Advance equality of opportunity between people who share a protected characteristic and those who do not
- Foster good relations between people who share a protected characteristic and those who do not.

The duty has a key role to play in making sure that fairness is at the heart of public bodies' work and that public services meet the needs of different groups.

The Act explains that having due regard for advancing equality involves:

- Removing or minimising disadvantages suffered by people due to their protected characteristics
- Taking steps to meet the needs of people from protected groups where these are different from the needs of other people
- Encouraging people from protected groups to participate in public life or in other activities where their participation is disproportionately low.

The duty covers the nine protected characteristics: age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation and marriage. Salford CCG have also made a local decision to regard those with the characteristics; veterans, carers and people living in poverty with the same consideration as the nine official groups listed above.

2.2 Equality Delivery System (EDS2)

Salford CCG is committed to implementing the EDS2. The main purpose of the EDS2 is to help local NHS organisations review and improve their performance for people with characteristics protected by the Equality Act 2010. This is done in discussion with local partners including local communities.

The four EDS2 goals are:

Goal 1) Better health outcomes

Goal 2) Improved patient access and experience

Goal 3) A representative and supported workforce

Goal 4) Inclusive leadership.

Salford CCG did not undertake an EDS2 public grading during this reporting period. It is expected that the next public grading will take place in Spring / Summer 2018 and will look at Goal 3.

3.0 Partnerships

3.1 NHS Employers

In January 2017, Salford CCG was hugely privileged to have been selected as one of NHS Employers Equality and Diversity Partners. This has provided the organisation with a fantastic opportunity to work with NHS Employers, other NHS, public, private and third sector organisations from across the country to learn best practice, consider new approaches and to provide us with support to put theory into practice.

This partnership has been invaluable in supporting us to further embed and integrate a culture of inclusion and diversity at Salford CCG. Furthermore, it has provided the opportunity for us to be involved in system wide efforts to improve Inclusion and Diversity across the NHS.

3.2 NHS Leadership Academy

In the summer of 2017, the CCG supported two members of staff to complete the NHS Leadership Academy's Stepping Up Programme. This is an innovative and inspirational positive action course which looks to take officers from a BME background on a transformational learning journey, helping them to realise their potential and to take that next step up to a more senior role, to the boardroom and beyond.

Efforts to encourage applications from Salford staff will continue over the upcoming period.

3.3 Greater Manchester Shared Services (GMSS)

Throughout this reporting period, the majority of transactional Equality, Diversity and Human Rights (EDHR) work undertaken by Salford CCG were delivered by a Business Partner contracted from GMSS. This contractual relationship has been beneficial in allowing us to share resources and learn from work being done in other GM CCGs.

3.4 Salford City Council

Salford CCG is an active member of the Salford Equalities Forum run by Salford City Council. The CCG is committed to the Citywide Equality Strategy developed by the Salford City Partnership.

4.0 Progress against Equality Objectives

4.1 Improve health and narrow the gaps in access, experience and outcomes

4.1.1 CCG Strategic Aims

Although Salford CCG has been ranked an 'outstanding' organisation, the fact remains that health inequality is still a massive issue and health outcomes remain poor for many Salford residents. Available data shows that there are still significant inequalities in access, health outcomes and service experience which have endured over time despite substantial investment in healthcare. These inequalities are clearly evident between groups of people with different characteristics and from across the city's neighbourhoods / wards.

The CCG's Equality Objectives link in firmly with organisation's four overall strategic aims. All planning and priority setting undertaken by the CCG during this reporting period can be directly linked back to these overall aims.

The CCG's Strategic Aims include;

Prevent ill health: We will help people make healthy choices to reduce health inequalities associated with lifestyle and we will direct our resources towards prevention. This will result in a reduction of the number of people who smoke, reduce the impact of alcohol related harm, and reduce levels of obesity across all age groups.

Reduce health inequalities: We will commission services that are tailored to local needs, provide additional support to vulnerable people, and ensure that health services are equitable. This will lead to an increase in life expectancy, a reduction in health inequalities experienced by many people in Salford, and reduce the rate of teenage pregnancy.

Improve healthcare quality: We will commission high-quality value-for-money services that are delivered in line with best practice and safety standards; not only providing the best clinical 'outcomes' for patients, but also providing an improved patient experience.

Improve health and wellbeing outcomes: We will buy those services that are best designed to maximise health and wellbeing outcomes and locate services in the most appropriate settings that where possible are closer to people's homes.

4.2 Improve collection and use of data / evidence for all protected groups

4.2.1 Equality Impact Assessments (EIA)

Efforts have been made this year to improve the CCG's approach towards the internal Equality Impact Assessment process. In order to get a better understanding of what could be done to devise a framework which would be well used and provide added benefit to the workforce, a focus group was established to work with the Diversity and Inclusion Lead to co-produce a new EIA framework for the organisation.

It is proposed that this new EIA framework will be implemented over 2017/18.

During the reporting period 2016/17, EIAs were undertaken for;

- Relocation of all Central Manchester Foundation Trust and Royal Bolton Foundation Trust Ante-natal / Post-natal Clinics
- Expanding GP Provision in South Ordsall
- Personal Health Budgets
- Community Consultant led Ophthalmology Services

These EIAs are available in full upon request.

4.2.2 Provider Assurance

During this reporting period, a more robust and meaningful Diversity and Inclusion Provider Assurance has been created to roll out in all of the 2018/19 contracts. As Salford Royal NHS Foundation Trust (SRFT) are our biggest contract holders from a financial and service delivery perspective, the topic of Diversity and Inclusion Assurance has also now been added on to the annual programme for SRFTs monthly contract performance meetings. On these occasions, the Diversity and Inclusion Lead from Salford Royal is required to deliver a presentation with relevant evidence around how the Trust has been achieving their contractual requirements around equality and diversity.

4.3 Communicate and engage with all protected groups

Diversity and Inclusion is highlighted within the CCG's Communication and Engagement Strategy (2016-18). The strategy sets out the organisation's commitment in ensuring continuous effective consultation and engagement of local people from all backgrounds and communities in its decision making processes and in care decisions.

4.3.1 Accessible Information Standard (AIS)

The AIS requires a specific, consistent approach to identifying, recording, flagging, sharing and meeting individuals' information and communication support needs, where those needs relate to a disability or sensory loss.

The AIS reinforces NHS England's commitments to increasing personalisation and patient empowerment, reducing health inequalities and enabling people to be equal partners in their own care. It also supports specific commitments to improving the care of people with a learning disability, to amplify their voices and to enable them to take more control of their own lives

The AIS was published in July 2015 with the mandate that all providers of NHS and / or adult social care must follow the Standard in full by 31 July 2016.

Throughout this reporting period, Salford CCG have been facilitating quarterly meetings with representatives from all of the provider organisations in Salford, allowing them the opportunity of sharing best practice around their AIS implementation journey, learn lessons from each other and work through common / shared issues.

4.3.2 Equality Engagement Forums

Over this reporting period, we have established, managed and maintained several mechanisms for vulnerable and marginalised groups to have a voice. These groups are supported by the integrated health and social care engagement team and involve service users with shared experience and interests. These groups and their involvement are described below;

4.3.2.1 Black, Asian and Minority Ethnic (BAME) Health and Social Care Ambassadors

The CCG recognised that it needed to do more to improve engagement with BAME and faith communities and understand what barriers they face to enable us to commission more culturally appropriate and accessible services. Following engagement with over 300 members of the community and voluntary sector organisations, Salford CCG established a peer led ambassador group made up of people from a range of cultural backgrounds and refugees and asylum seekers.

This group is involved in helping raise awareness of services and choices to their respective communities and providing a link between commissioners, providers and citizens. The group are currently involved in receiving talks and information from various services including Welfare Rights and complaints and in co-producing an health and social care event for BAME communities.

4.3.2.2 Dementia Champions

The Dementia Champions Group (DCG) consists of up to 10 members of the public with dementia and their carers. The group formed in January 2013 to help Salford City Council and the CCG improve the delivery of dementia services and support in Salford for those with dementia and their carer.

4.3.2.3 Listening to People (Learning Difficulties)

The 'Listening to People' group is a speaking out and self-advocacy group for local adults with learning difficulties. The group has membership of around 50 local people with an average of 25 attending any given monthly meeting. The group networks with other local, regional and national groups for people with learning difficulties. Listening to People provides an opportunity for local commissioners and providers of services to present information and ask questions and advice of the local learning difficulties community in an environment where they feel confident, safe and supported. Members share information about opportunities available with each other and encourage and support members through peer support and role modelling.

4.3.2.4 Lesbian, Gay, Bisexual and Transgender (LGBT) Engagement

Salford CCG is part of a multi-agency forum to reduce inequalities for LGBT communities in Salford. Salford CCG contributes funding as part of this work to enable LGBT communities to deliver projects to support their community. This year, the project has supported the development of an awareness raising tool for service providers 'Walk in My Shoes', this is a series of vox pop messages recorded by LGBT members to tell their story.

Salford CCG was a key sponsor at Salford Peel Park Pink Picnic in July 2017 and engaged with several hundred members of the LGBT communities around suicide prevention to help shape the Salford Suicide Prevention Strategy.

Pride in Practice has also been rolled out to GPs in Salford and we are currently working with Manchester Lesbian, Gay Foundation to ensure that the majority of GPs are part of this programme to improve experience for LGBT communities.

4.3.2.5 Salford Autistic Spectrum Condition (ASC) Forum

We have recently established an engagement and support group for people with conditions on the autistic spectrum. This group feeds into the Salford Autism Implementation Group which is responsible for developing the Salford Autism Strategy and action plan and will help to determine priorities for the future.

4.3.2.6 Salford Deaf Gathering

The Salford Deaf Gathering is an inclusive network for Deaf people (people whose first language is British Sign Language). The network works with partners towards ensuring the social inclusion of Deaf people in all aspects of community life. The gathering meets on a social basis in order to provide social activities whilst offering peer support and raising awareness of the needs of Deaf people. The Gathering aims to improve the availability of information in a form that is accessible to all Deaf people by linking with other organisations such as Salford City Council, Deaf Health and social housing.

4.3.2.7 Young Person's NHS Reference Group

This 12 month pilot is a group of representatives from proactive groups across the city (Salford Youth Council, Fight for Change - looked after young people and Salford Young Carers). The focus of the 12 month pilot group is to be a 'critical friend' to health and social health care partners, helping them to improve existing provisions and services within Salford. Over the past eight months, the group have met on a monthly basis and have advised the CCG and our partners to ensure young people's voices are being considered when developing or changing services.

The group have co-produced a workshop to support primary school children on the transition to secondary school. This involved sharing their own stories and alleviating some of the concerns of the younger children about to move to secondary school. The group are now supporting a campaign to be taken to all primary schools, namely 'goodbye primary, hello high'.

4.3.3. You said; we did - Case Studies

This section demonstrates how we have ensured the voice of people within the protected characteristic groups have been heard with regards to service planning, service changes or care decisions over this reporting period and how things have changed as a result of their feedback.

4.3.3.1 Carer's Strategy Engagement

As part of the development of Salford's Carer's Strategy, over 500 carers were engaged via face to face discussion and surveys. A Carer's Event held in June 2017 celebrated the input from carers across the city and to demonstrate how we have used their feedback to develop actions for change.

Priorities in the strategy directly resulting from carers feedback included;

- Better access to information
- Training for front line staff to recognise and signpost carers
- Better access to support groups
- More flexible and informative training for carers
- Access to the right professionals and support
- Easier access to a carer's assessment

4.3.3.2 Community Children's Nursing Team (CCNT)

An engagement project was undertaken to better understand the experience of children and young people and their families using CCNT. The engagement included attendance at three clinics (triage, sleep and behaviour), home visits to gather the views of eight patient stories from children and families using the home based service and attendance at 'Salford Parent Voice'.

Overall there was positive response to questions about the CCNT and parents' expressed how much they valued the service. The level of satisfaction had grown with increased input from the service, reflecting the difference the team makes to the lives of the children and families. However, participants suggested improvements to the service in relation to waiting times and level of service to meet the demand of children and families in need in the city.

As a result of the above feedback, the following actions were put in place:

- Creation of a single point of access for 2-18 year olds
- Triage and weekly clinics to help clear the backlog of new referrals
- Text reminders to reduce the number of non-attendances
- More home based support and interventions programmes.

4.3.3.3 Engaging with Black, Asian and Minority Ethnic (BAME) Communities

This year we have made a considerable effort to engage with some of the most marginalised BAME communities including refugee and asylum seekers and people whose first language is not English to raise awareness of the health and social care system in Salford and better understand their needs.

Feedback included the following:

- Lack of understand around service provision/access and different expectations
- Lack of the means to follow healthy lifestyle advice
- Lack of Independent Interpretation Service
- Insufficient time at GP appointments
- Difficulties in accessing phone based health services
- Lack of awareness around raising complaints/issues.

As a result of this feedback, the following actions have been taken by the CCG:

- Attendance at the Winter Warmer Event in December 2016 with key partners in the city to raise awareness with BME groups
- Establishment of a BAME Health and Social Care Ambassadors, group made up of local citizens from different cultures that will help develop local solutions to some of the issue above and will support the CCG and partners to communicate with their respective communities
- Co-production of a BAME Event in partnership with the BAME Ambassadors to raise awareness of loneliness and the importance of being connected
- Inclusion in the Salford Standard for GPs of standards for asylum seeker services including longer appointment times and use of professional interpreters.

4.3.3.4 Learning Difficulties – ‘Big Health Day Does Cancer’

On 20th September 2016 the 7th annual ‘Big Health Day’ for people with learning disabilities, their carers and staff took place at St George’s Social Club. This year the event was themed

as 'The Big Health Day Does Cancer' because of the prevalence of cancer in the city and the health inequalities people with learning disabilities experience in relation to cancer and cancer screening. The event was very well attended. The information and tools provided at the event were appropriate and accessible e.g. the Healthy Communities Collaborative Team brought along knitted breasts and testicles, as opposed to written information, to help people understand the best way to examine their bodies. We also developed an easy to use quiz to encourage people to visit and engage with the stalls and opportunities for people to share their experiences of using services.

Participants' feedback included lack of understanding about the needs of people with learning disabilities, access services and lack of support to keep healthy. Services are now considering how they can use the feedback gathered during the event.

4.3.3.5 Maternity and Antenatal Services

Engagement took place as part of the redesign of maternity and ante-natal services in Salford to understand the priorities of service users (what matters most) and help shape plans for future services. This included face-to-face interviews with 85 service users accessing ante-natal care at Salford Royal NHS Foundation Trust.

Service users expressed their priorities as below:

- Salford based service
- Quality of customer service and comfortable atmosphere
- Staff to be approachable and friendly and have time for you
- Good quality of care and monitoring of the mother and baby
- Access to appropriate advice and information via telephone
- Short waiting times for appointments
- Parking and accessibility

As a result of this feedback, the CCG has identified a provider for the new service and we are now working with Salford City Council and local citizens to develop a 'state of the art' facility in a local venue. This will include continued conversations with citizens to co-produce a top class freestanding midwifery unit that meets the needs of service users.

4.3.3.6 Older People's Engagement

The CCG is a key partner in a number of older people's initiatives across the city to improve the lives of older people in Salford and prevent inequalities. This includes the development of actions for Salford as an Age Friendly City and projects to support Ambition for Ageing. The CCG works with older people to shape priorities of these developments including engaging with older people around falls prevention and flu.

4.4 Develop equality and diversity competent and well supported staff

4.4.1 Key Skills for Managers Training

The Key Skills for Managers training has been reviewed in order to ensure diversity and inclusion is embedded throughout all modules and not delivered as a standalone module as it was previously.

4.4.2 Joint Team Away Day

In July 2017 the Service Improvement Team and the Communications and Engagement Team had a joint team away day. The aim of the session was for both teams to get a better understanding of their obligations around considering diversity and inclusion through all of their work. The topics of EIA and unconscious bias were also covered.

4.4.3 Diversity Learning Lunches

A calendar of monthly Diversity Learning Lunches have been rolled out since spring 2017 with topics including; dementia, refugee and asylum seekers, homelessness and Hinduism. The aim of these sessions is to invite in external speakers to upskill the workforce and to provide them with a better understanding of the wants, needs and issues of the people from within the city of Salford they are commissioning health services for.

4.4.4 Internal communications

Over this period, the CCG has proactively used internal communication and engagement methods, such as staff e-bulletin, air and share, screensavers, social media and formal and informal cascade processes to raise awareness of cultural events and communicate developments in relation to diversity and inclusion to staff across the organisation.

4.4.5 Workforce Race Equality Scheme (WRES)

From 1 April 2015 all NHS organisations have been required to demonstrate how they are addressing race equality issues in a range of staffing areas. The WRES helps us to achieve this. All NHS organisations are required to demonstrate through the nine-point WRES metric how they are addressing race equality issues in a range of staffing areas. Salford CCG's WRES report and action plan for this period is published on the organisation's website.

4.4.6 Workforce Profile

The Workforce Profile is available on the Salford CCG website.

4.5 Develop leadership, corporate commitment and governance arrangements

4.5.1 Engagement and Experience Management Group (EEMG)

Progress against the Diversity and Inclusion Annual Work Plan is scrutinised by the EEMG. This is a strategy group which meets bi-monthly reports in to the Executive Team as part of the CCG's overall governance structure.

4.5.2 Governing Body session

In February 2016, a session took place with the CCG's Governing Body to assess the current commitment towards Diversity and Inclusion and to formally gain their buy-in to prioritise and increase the efforts being made by the organisation towards the agenda. Since this approval, the CCG has seen a significant increased amount of resource given (both financially and in terms of staff time) against the area of diversity and inclusion.

4.5.3 Service Leadership

In February 2016, the strategic leadership of the CCG's Diversity and Inclusion agenda moved to be part of the wider communications, engagement and OD team. This tactical move ensured that the work being delivered by the GMSS EDHR Business Partner on behalf of Salford CCG) around diversity and inclusion was more suitably aligned with the extensive public involvement work being undertaken by the health and social care Engagement Officers (working on behalf of the CCG and City Council). It also provided more seamless opportunity to promote the agenda internally and streamline the approach to embed the agenda in all CCG activity.

5.0 Conclusion

A significant amount of work has taken place over this reporting period to upskill staff, embed a culture of diversity and inclusion throughout the organisation and engage with seldom heard groups to make sure they have a voice in the system and are not inadvertently discriminated. However, as health inequalities are still a massive problem for Salford, it is recognised that much more needs doing to bring equilibrium to the city and so we continue to ensure diversity and inclusion is prioritised over the next twelve months.

5.1 Going forward

Proposed diversity and inclusion actions for the next reporting period include;

- Refreshing the CCG's Equality Objectives through extensive stakeholder engagement
- Re-launch a revised Salford CCG Diversity and Inclusion Strategy, complementing the Citywide Equality Strategy
- Revise the EEMG Terms of Reference to be more reflective of the work being done on diversity and inclusion
- Hold an EDS2 public grading in summer 2018
- Launching the new Provider Assurance Framework
- Training a cohort of CCG staff to become Personal, Fair, Diverse (PFD) Champions and embed a culture of diversity and inclusion across the workforce (in line with the NHS Employers campaign)
- Continue to roll out the new EIA framework internally
- Commission the community and voluntary sector to do more engagement around health and care with the hard to reach groups in Salford
- Work with the council to determine the focus of future Health Needs Assessments
- Co-produce a new programme of staff diversity and inclusion mandatory training with the PFD Champions
- Work with Salford City Council to assess how we can work together more collaboratively
- Support the development work plan of the Equality Advisory Panel and make best of use of the group to scrutinise and advise on equality issues relating the the Salford health and care system

- Support the development and work plan of the North West Sector Equalities and Experience Reference Group and make best use of them to advise on engagement and equalities issues in relation to the work being undertaken across Bolton, Salford and Wigan to make better use of the hospital services
- Continue to deliver the monthly Diversity Lunchtime Learning sessions to staff and wider partners
- Re-align the Diversity and Inclusion Annual Publication reporting period to be at the same time as the CCG's Engagement Annual Publication.

For more information (or to request full EIAs) please contact salCCG.involve@nhs.net or telephone 0161 212 6318.