



NHS

West Midlands Ambulance Service

University NHS Foundation Trust

Equality Delivery System 2023

Domains 1,2 & 3

Evidence scoring, feedback and Action Planning.

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Background

'Everyone counts' is a key principle that applies to everyone served by the NHS and is at the heart of the NHS Constitution. The main purpose of the Equality Delivery System is to help local NHS organisations, in discussion with local partners including local people, review and improve their performance for people with characteristics protected by the Equality Act 2010. By using EDS3, NHS organisations can also be helped to deliver on the Public Sector Equality Duty (PSED).

The EDS provides a way for the organisation to show how it is doing against the three domains (they are called goals in the EDS2 framework). The EDS Technical Guidance document is available at: <https://future.nhs.uk/EHIME/view?objectID=119804773>

All NHS organisations are expected to use the system to help them improve their equality performance for patients, communities and staff, as well as help them to meet the requirements of the PSED.

In 2022/2023, the EDS assessment framework was refined to be a more robust assessment, aligned with the evolving NHS landscape and the Workforce Race Equality Standard (WRES), Workforce Disability Equality Standard (WDES) and NHS People Plan. Subsequently, the EDS2022 framework comprises 11 specific outcomes that are grouped across the following three domains:

Domain 1: Commissioned or Provided Services - This focuses on patient access and experience, reducing inequalities and enabling better health outcomes.

Domain 2: Workforce Health & Wellbeing - This focuses on ensuring that all workforce members are fully supported in relation to health and wellbeing.

Domain 3: Inclusive Leadership – This domain explores how leadership at WMAS demonstrates a commitment to equality and how it works in a way that identifies equality issues and manages them.

Each of the above domains has set outcomes that are evaluated and scored against the set criteria, and experiences of stakeholders. It is these ratings that provide assurance and/or provide direction for further improvement.

The purpose of this report is to:

- Summarise the Trust process undertaken to deliver on the EDS for this reporting year.
- Report on the EDS ratings that have been achieved, along with stakeholder feedback.
- Outline actions that will be taken to improve on EDS ratings.

Equality, Delivery System (EDS) Key Information:

Organisation	West Midlands Ambulance Service	Organisation Board Sponsors	Director of People
Integrated Care System (ICS)	Black Country ICS		
Equality Delivery System (EDS) Lead:	Mohammed Ramzan Head of Diversity and Inclusion		
Domain 1 Lead:	Name Mohammed Ramzan Position EDI Lead		
Domain 2 Lead:	Name Mohammed Ramzan Position EDI Lead		
Domain 3 Lead:	Name Mohammed Ramzan Position EDI Lead		
Domain 1 engagement dates:	22/09/23 – 31/10/2023 (Face to face supplier engagement took place on 16/11/2022)		
Domain 2 engagement dates:	16/11/2023		
Domain 3 engagement dates:	11/10/2023 & 16/11/2023		
Date Completed:	27 Nov 2023	Month & Year published:	Jan 2024
Date authorised:		Revision Date:	

Equality Delivery System Rating and Score Card Overview

<p>Undeveloped activity - organisation score out of 0 for each outcome.</p>	<p>Those who score under 8, adding all outcome scores in all domains, are rated Undeveloped.</p>
<p>Developing activity - organisation score out of 1 for each outcome.</p>	<p>Those who score between 8 and 21, adding all outcome scores in all domains, are rated Developing.</p>
<p>Achieving activity - organisation score out of 2 for each outcome.</p>	<p>Those who score between 22 and 32, adding all outcome scores in all domains, are rated Achieving.</p>
<p>Excelling activity - organisation score out of 3 for each outcome.</p>	<p>Those who score 33, adding all outcome scores in all domains, are rated Excelling.</p>

Trust Approach to the Equality Delivery System (EDS) Implementation

It was agreed in 2022 that the Trust would only assess Domain 1 of the framework which was also supported by Black Country ICB due to the transition from EDS2 to the new revised framework. It has also been acknowledged at the development phase of the revised EDS3 2022 framework that not all of the outcomes of the domains apply so readily to the Ambulance service so a more pragmatic approach would be taken in its implementation. For 2023/24 reporting year all three Domains of the EDS have been assessed.

An EDS working group has been developed to oversee Trust implementation. The group members consist of the following stakeholders: EDI and Well-being Team, OD, HR, Staff Network Leads, and Staff Side/Trade Union representatives.

Under Domain 1, it was agreed to focus on one service area focusing on Procurement – a reassessment following assessment 2 years ago which found the service to be at a **Developing** stage. A 12-month action plan was developed which was monitored at DISAG for progress. At WMAS, the EDS framework is utilised so meaningful, positive and transformational change can take place with tangible improvements and services chosen will be revisited, if appropriate, every two years. At WMAS we have taken a more pragmatic approach in the utilisation of the EDS2 2022. The work does not stop at the conclusion of the assessment and grading phase. The reports are presented, action plans developed which are then monitored at the Diversity, and Inclusion Steering Group (DISAG) and the People Committee. Both of these governance mechanisms receive quarterly progress reports on progress on Equality related action plans including EDS action plan.

A separate evidence pack was compiled for each Domain. Compilation of evidence packs largely utilised already existing data and reports. Service leads were contacted where required to provide specific input on their service. Stakeholder grading sessions were conducted face to face and over Microsoft Teams where they were asked to provide a score of 0, 1, 2, or 3 against each outcome, using the EDS Ratings and Scorecard Guidance 2022.

Finally, the grading assessment at WMAS acknowledges areas of work which are achieving and doing really well whilst identifying gaps and service improvements for which an action plan is developed. An action plan will accompany this years EDS report.

Domain 1: Commissioned or provided services.

At WMAS we have taken a more pragmatic approach in the utilisation of the EDS2 2022 for Domain 1 especially as not all the outcomes apply so readily to the Ambulance service. In 2022/23) the PALs service was assessed and graded as a joint collective between Black Country ICB and the local Trusts including WMAS. For this year's report (2023/24) WMAS has revisited the Procurement service which was assessed in 21/22 and which was graded '**Developing**' Under the previous EDS2 framework. An action plan was developed to improve the service, so the assessment reviewed the action plan and progress made. An

action plan for 2023-25 for the PALS service will be developed for progress and re-assessed and graded for the 24/25 reporting year.

Health inequalities are realised in access, experience, and outcome. How we reduce health inequalities requires system commissioning and delivery across multiple partners and over the course of a long-term strategic plan.

We actively engaged with our sub-contractors and providers of services in a face to face meetings in 2022 which helped shape the way forward as part of supplier contract management and procurement services.

Feedback from evidence review sessions:

The procurement service was assessed under the old EDS2 framework which is now redundant, however we have taken the learning which is still relevant for the assessment to take place under the new EDS3 2022 framework. The evidence in 2021/22 found that the procurement service was in the **Developing** phase so an action plan was developed (see attachment below) to make service improvements. Changes to the Contract Management policy, the Interim Procurement Strategy took place as informed by the EDS procurement action plan. In addition the procurement service, along with wider participation from the Trust, organised a round table discussion with a sample of the Providers which further brought in fresh ideas for improvement to the procurement service overall. The procurement service was assessed using the action plan developed as a benchmark to identify what grading to give the service in 2023/24 reporting framework. The procurement service, after the implementation of the action plan and assessment has been graded **Achieving**.

Procurement action plan:



Action Plan - Procurement EDS2 Or

Internal Scoring table:

Agreed scores for all areas of the Domain (if applicable as not all outcomes will be readily applicable to all service areas in the Ambulance service:	1A: 2	1B: 2	1C: 2	1D: 2
Collective grade for Domain 1 (only for procurement service: is ACHIEVING	ACHIEVING (progress from 2021/22 when it was graded as Developing)			

Domain 2: Workforce Health & Wellbeing

Enabling our diverse workforce to be healthy, with a sense of well-being is crucial to high-quality patient care. Therefore, a fundamental part of WMAS's ambitions is strengthening and building on the available health and well-being support.

Scoring table:

Name	Position	2A	2B	2C	2D
Mohammed Ramzan	EDI Lead				
Lucy Mackcracken	HR Lead				
Manjeet Malhi	Health & Well-being Manager				
John Eames	DCA staff network Chair				
Keeling Hutton	ONE (BME) Network Co-Chair				
Karina Graham	ONE (BME) Network Co-Chair				
Lucy Butler	FTSU Guardian				
Jacqueline Murphy	Staff Side				
Jason Kirkham	Staff Side				
Agreed Scores for all areas of the Domain:					
Total Score for Domain 2:		5			

Outcome 2A: When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions

Trust evidence presented:

Outcome	Evidence Supplied	Agreed Rating	Owner for Domain
2A: When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions.	<ul style="list-style-type: none"> • HWB Website – WMAS Wellbeing Health and Wellbeing - promoting physical health, mental wellbeing, slimming world, cycle to work, smoking & alcohol support • HWB Champions, • Diversity Champions • Menopause Champions • QWELL • Health & Wellbeing Manager in post • Mental Wellbeing Practitioner Service • Health checks at roadshows - 25 sites visited 2023 to 	Achieving 2	Mohammed Ramzan: EDI Lead supported by People Directorate, Lucy Mackcracken, Manjeet Malhi, Barbara Kozlowska

	<p>promote health and wellbeing of staff</p> <ul style="list-style-type: none"> • NHS health checks available on sites • Blood & Transplant awareness visits to Academy and Navigation Point • Network events – South Asian Heritage awareness, disability awareness events, including cultural day • TASC including Crisis Line • SALS • Stress Policy support • Slimming World voucher scheme • Cycle to Work scheme • Health and Carer Passport Schemes • Occupational Health • HR and management support • Listening Centre – counselling support • Climbing out charity • Trade Union support • Statutory and Mandatory Training for all staff, covers HWB support • Induction covers HWB support • Cancer champions • HWB conversation as part of PDCs • Flexible working policy and training package for managers. 		
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Feedback from evidence review sessions:

There have been several initiatives which have been championed over the past couple of years and especially in 2023/24 with the establishment of the Diversity Champions which has enhanced the support to staff in terms of their health and well-being. The health and well-being team have visited 25 sites, reaching out to staff from different demographics and all backgrounds which has been a huge success. It can be stated with a great degree of confidence that diverse staff from most protected characteristics have had access to health and well-being initiatives due to the close collaboration of the team with staff networks.

The Chaplaincy service has also been expanded to include chaplains from multi faiths which also feeds into the health and well-being offer to staff

Whilst the guidance states that the organisation should monitor the health of staff from different protected characteristics, which is open to interpretation of how this is achieved, it can be reported that staff members who disclose health conditions to their line managers, that these are managed in an appropriate manner with flexible working an option where appropriate. Generically, health checks have been undertaken as part of the health and well-being roadshows

Outcome 2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source.

Trust evidence presented:

Outcome	Evidence Supplied	Agreed Rating	Owner for Domain
<p>Outcome 2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source</p>	<ul style="list-style-type: none"> • Rebranded Resolutions Procedure (Grievance) with greater emphasis on resolving concerns at an early level • Relaunch of Trust values and behaviours framework that all staff are expected to adhere to • Dignity at work and Resolution Manager training package • Diversity champions • Trained mediators in place across the Trust • Sexual safety and awareness workstream • All areas of the Trust have an allocated HR Advisor and HR Manager to provide advice and support • FTSU • Weekly briefing articles raising awareness of successful prosecutions of violence and aggression experienced 	<p>Developing: 1</p>	<p>Mohammed Ramzan: EDI Lead supported by People Directorate, Lucy MacCracken, Manjeet Malhi,</p>

	<ul style="list-style-type: none"> • Domestic Abuse and Sexual Assault WMAS Wellbeing • WMAS Wellbeing Health and Wellbeing • Online Domestic Abuse Workshop by Samantha Billingham @sodahq.uk • ER54 process • Encouraging calling out of inappropriate behaviours observed 		
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Feedback from evidence review sessions:

Whilst initial assessment was graded as in the Achieving category, additional scrutiny by the assessment team deemed it to be at the **Developing** stage acknowledging that more needs to be done which is then reflected in the 2024 staff survey. However it was reported that the Trust has a robust reporting process called the ER54 where staff can report physical and verbal abuse, - where everyone is supported to report incidents and appropriate actions are taken. Data is collected for ethnicity, age and gender and looking forward there are discussions in place to collect Disability data too. Staff are supported to report incidents to the police where this is an appropriate course of action.

There is also appropriate support for staff and staff are signposted to a dedicated page in the Health and Wellbeing Website and our external website

The WRES data along with staff survey suggests that there is still much to be done in regard to staff experiencing harassment and discrimination from fellow members of staff which reflected this outcome to be a **Developing stage**.

It was therefore recommended that an action plan is developed to address some of the concerns identified at the assessment and grading event as follows:

- ER54s not always filled in so work and promotion around this
- Need to separate ER54 data for internal incidents and separate for external incidents in respect of bullying and harassment and discrimination.
- Moving to the Datix system so need to ascertain whether appropriate information is captured with appropriate information

Outcome 2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying, harassment, and physical violence from any source.

Trust evidence presented:

Outcome	Evidence Supplied	Agreed Rating	Owner for Domain
<p>Outcome 2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying, harassment and physical violence from any source</p>	<ul style="list-style-type: none"> • QWELL • Mental Wellbeing Practitioner Service • Listening centre – counselling support • Suicide lite and MHFA courses for staff • Stress policy support including Stress Risk Assessment Tool • HWB Website – WMAS Wellbeing Health and Wellbeing - promoting mental wellbeing support • Climbing out charity • Domestic Abuse and Sexual Assault WMAS Wellbeing • HR and management support • SALS • TASC including Crisis Line • Trade Union support • Occupational Health • FTSU Ambassadors • HWB Champions • Diversity Champions • Freedom to Speak Up guardians are embedded in the organisation. • Relevant staff networks are active and accessible 	<p>Achieving: 2</p>	<p>Mohammed Ramzan: EDI Lead supported by People Directorate, Lucy MacCracken,</p>

Feedback from evidence review sessions:

Achieving 2

There are a number of support mechanisms for staff to tap into when support and advice is needed.

Equality Impact Assessment process is in place and EIAs are completed on policy development and review and the expectation would be that when any amendments are

made to harassment and bullying policy that the EIA process would be utilised to ascertain any impacts

WMAS has and supports Union representatives who are impartial. FTSU guardians are embedded within the organisation with FTSU champions support across the organisation supported by 2 staff. WMAS has 5 staff networks which are accessible and active for staff to seek support and are staff led.

Outcome 2D: Staff recommended the organisation as a place to work and receive treatment.

Trust evidence presented:

Outcome	Evidence Supplied	Agreed Rating	Owner for Domain
<p>Outcome 2D: Staff recommend the organisation as a place to work and receive treatment:</p>	<p>(1) Staff Survey 2022 (2760 responses) (2) Pulse Survey 2022 (590 responses) I would recommend my organisation as a place to work: (1) 41.8% (2) 32.2% I would NOT recommend my organisation as a place to work: (1) 32.7% (2) 43.5% If a friend or relative needed treatment I would be happy with the standard of care provided by this organisation: (1) 51% (2) 43.4% If a friend or relative needed treatment I would NOT be happy with the standard of care provided by this organisation (1) 22% (2) 31.1% National Quarterly People Pulse Survey 2022 (590 responses) Underdeveloped</p>	<p>Under-developed: 0</p>	<p>Mohammed Ramzan, EDI Lead supported by: People Directorate Barbara Kozłowska</p>

Feedback from evidence review sessions:

Under-developed - 0

In the Staff survey Only 41.8% of the staff would recommend WMAS as a place to work and 32.7% Would NOT. In the Pulse survey these figures are much worse with 43.5% of staff NOT recommending WMAS as a place of work.

Although 51% of staff would be happy with standard of care, this falls to 43.4% in the pulse survey. Currently there is no evidence that experiences from BAME, Disability and LGBT+ are compared with other staff. Action plan to be developed to address.

This outcome was deemed to be under-developed and work needs to be done to address low morale of staff. Action plan to pick this up

Domain 3: Inclusive Leadership

To truly create the conditions for high quality, compassionate and continually improving healthcare, leaders must understand and better nurture inclusiveness, promote equity and value diversity. The Board understand this and are committed to creating a culture of compassion whereby diversity is encouraged and celebrated, enabling an environment where all staff are empowered and have a positive experience.

Scoring table:

Name	Position	3A	3B	3C
Mohammed Ramzan	EDI Lead			
Lucy Mackcracken	HR Lead			
Manjeet Malhi	Health & Well-being Manager			
John Eames	DCA staff network Chair			
Keeling Hutton	ONE (BME) Network Co-Chair			
Karina Graham	ONE (BME) Network Co-Chair			
Lucy Butler	FTSU Guardian			
Jacqueline Murphy	Staff Side			
Jason Kirkham	Staff Side			
Agreed Scores for all areas of the Domain:				
Total Score for Domain 2:		5		

Outcome 3A: Board members, system leaders (Band 9 and VSM) and those with line management responsibilities routinely demonstrate their understanding of, and commitment to, equality and health inequalities.

Trust evidence presented:

Outcome	Evidence Supplied	Agreed Rating	Owner for Domain
<p>Outcome 3A: Board members, system leaders (Band 9 and VSM) and those with line management responsibilities routinely demonstrate their understanding of, and commitment to, equality and health inequalities.</p>	<ul style="list-style-type: none"> • Both equality and health inequalities are standing agenda items and discussed in board and committee meetings. • Board members and senior leaders meet staff networks at least 3 or more times a year. Staff networks have a senior sponsor. • Board members hold services to account, allocate resources, and raise issues relating to equality and health inequalities on a regular basis. • Board members and senior leaders engage in religious, cultural or local events and/or celebrations. 	<p>Achieving: 2</p>	<p>Mohammed Ramzan: EDI Lead supported by People Directorate, Carla Beechey</p>

Feedback from evidence review sessions:

Equality, diversity, inclusion, and Health Inequalities form part of the cover sheet which is attached to reports and reminds Board members of the duties under the Equality Act 2010 and consider those where relevant.

Board members, and senior leaders have attended events such as the women’s network event, South Asian Heritage Month celebration, culture event and Chaplaincy event in Birmingham all in 2023/24. All promotions and attendance has featured in the weekly brief which goes out to all staff.

In addition Board members & senior leaders have signed up to the inclusion pledge. WRES, WDES, GPG, and associate action plans are monitored through appropriate governance mechanisms (DISAG steering group, The People Committee) which are chaired by Board or senior management.

More work needs to be done in respect of line manager commitment to equality, diversity, and which needs to be reflected in the action plan

Each Staff Network has an Executive sponsor, although it needs to be clear what support they provide.

There is mandatory equality training for all staff, including senior leaders.

Outcome 3B: Board/Committee papers (including minutes) identify equality-related impacts and risks and how they will be mitigated and managed.

Trust evidence presented:

Outcome	Evidence Supplied	Agreed Rating	Owner for Domain
<p>Outcome 3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed.</p>	 <p>Cover Report With Values Refresh.docx</p> <ul style="list-style-type: none"> • Both equality and health inequalities are discussed in some board and committee meeting. Actions associated with equality and health inequalities are recorded and reported on. • Equality and health inequalities impact assessments are completed for some projects and policies and are signed off at senior level. BME staff risk assessments are completed. 	<p>Developing: 1</p>	

Feedback from evidence review sessions:

Developing 1

-Equality impact Assessments (EIA) template are embedded into the policies for when they are developed or reviewed.

-EIA process is completed for projects and the ones completed are featured in the Equality annual report. All reviewed policy documents did have a full equality impact assessment, although discussion of health inequalities in these assessments was still limited. There was some evidence of actions being identified to mitigate and manage risks.

Workforce Race and Disability Equality Standards (WRES/WDES) and the Gender Pay Gap, and other data have been used to develop action plans with monitoring via the Diversity and Inclusion Steering Group (DISAG). The annual Public Sector Equality Duty (PSED) report

will include information on how we as a Trust are meeting our duties under the Equality Act 2010

A dedicated Equality Steering group (DISAG) is monitoring progress on all the Equality action plans and the EDS 2023-25 action plan will form part of the progress reports tabled at these meeting on a quarterly basis and an update shared with the People’s Committee.

Outcome 3C: Board members, system and senior leaders (Band 9 and VSM) ensure.

Trust evidence presented:

Outcome	Evidence Supplied	Agreed Rating	Owner for Domain
<p>3C: Board members, system and senior leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients</p>	<ul style="list-style-type: none"> • Board members, system and senior leaders ensure the implementation and monitoring of the relevant below tools. Interventions for unmet goals and objectives are present for the relevant below tools. • Organisations are able to show year on year improvement using Gender Pay Gap reporting, WRES and WDES. Board members, system and senior leaders monitor the implementation and impact of actions required and raised by the below tools: • WRES (including Model Employer), WDES, Impact Assessments, Gender Pay Gap reporting, Accessible Information Standard, end of employment exit interviews, PCREF (Mental Health), EDS 2022 	<p>Achieving 2</p>	

Feedback from evidence review sessions:

-WRES, WDES, and GPG data is collected, action plans developed. implemented and submitted to commissioners within the timeframe set.

-Equality Impact Assessment process developed and utilised in policy development. The EIA template is also on the intranet for staff to use and the EDI lead provides additional support and guidance and training.

Overall Scores and Rating for Organisation:

Domain 1 score:	Domain 2 score:	Domain 3 score:
8	5	5
Total Score for 3 Domains: 18		
Overall Rating: Developing		
According to the guidance (please see page 5 of this report) the total assessed score, is 18 which would class the organisation to be at the Developing phase . There are a number of areas which have been assessed as Achieving with one area as Under-developed		

Conclusion

According to the guidance (please see page 5 of this report) the total assessed score, is 18 which would class the organisation to be at the **Developing** phase. There are a number of areas which have been assessed as Achieving with one area as under-developed. Whilst the Trust's overall rating was **Developing**, there were many outcomes that the Trust was assessed to be as **Achieving**.

An action plan has been developed to further improve the service and it is believed that the Trust is in a strong position to improve EDS performance in upcoming years.

The EDS assessment and action plan will be presented to the Diversity, and Inclusion Steering Group (DISAG) for monitoring going forward and also shared at the quarterly Peoples Committee for assurance.

Appendix 1: EDS Outcomes

Below you will find the EDS domains and their 11 outcomes

Domain	Outcome
Domain 1: Commissioned or provided services	1A: Patients (service users) have required levels of access to the service
	1B: Individual patients (service user's) health needs are met
	1C: When patients (service users) use the service, they are free from harm
	1D: Patients (service users) report positive experiences of the service
Domain 2: Workforce health and well-being	2A: When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions
	2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source
	2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source
	2D: Staff recommend the organisation as a place to work and receive treatment
Domain 3: Inclusive leadership	3A: Board members, system leaders (Band 9 and VSM) and those with line management responsibilities routinely demonstrate their understanding of, and commitment to, equality and health inequalities
	3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed
	3C: Board members, system and senior leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients

Appendix 2: Equality Delivery Standard Actions 2023/24

Action plan is presented in a separate document