Grading rating	Meaning
3	Excelling
2	Achieving
1	Developing
0	Undeveloped

NHS Cambridgeshire Community Services NHS Trust

Equality Delivery System 2022 (EDS 2022)

Domain 3: Inclusive leadership		
Name of organisation	**Organisation Board Sponsor/Lead**	
Cambridgeshire Community Services NHS Trust	Anita Pisani – Deputy Chief Executive (Trust EDI Lead)	
Name of Integrated Care System(s)	**Selected Services for 2022-23**	
Cambridgeshire and Peterborough ICS Norfolk and Waveney ICS Bedfordshire and Milton Keynes ICS	1. 2.	
EDS Lead (Domain 3) and role	**At what level has this been completed? –** *list organisations**	
Sam Carr, Assistant Director Systems and Organisational Development Mercy Kusotera, Trust Secretary and Freedom to Speak Up Guardian.	**Individual organisation**	Cambridgeshire Community Services NHS Trust
EDS Engagement Dates	**Partnership* (two or more organisations)**	n/a
	Integrated Care System-wide*	n/a
Date completed		**Month and year published** February 2023

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Date authorised		Revision date	

Completed actions from the previous year	
Action/Activity	**Linked to Equality Objectives (2022/23)**
Trust Board signed off anti-racism pledge	2
Trust Board members signed off their personal anti-racism pledges	2
Further cultural ambassadors were trained	2
Additional Diversity Mentors have been trained and linked to senior leaders in the Trust	2
Trust Board and Sub-committee template updated to include new EDS objectives	2
Trust Board development session held on health inequalities	2

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Domain	Outcome	Evidence	Rating	Lead/Owner/Dept.
Domain 3: Outcome 3A 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**	- Trust Board pledge and individual Board members pledges for anti-racism. - Cultural diversity network newsletter includes Board member personal pledges and how they are delivering them. - Trust Board development session on Health Inequalities. - Trust Board refreshes their equality and diversity training every 3 years. - Trust Board are exploring ways to have representation at the board from more diverse backgrounds including: - Had a member of the NHS NEXt scheme co-opted on to the board. - Have now appointed an Associate NED from a BAME background. - Senior leadership team and Trust Board Chair undertook unconscious bias training. - People Participation Committee chaired by a NED and includes 4 other board members. - Senior leaders attend Staff Network meetings. - The Trust's leadership behaviours cover ALL staff and include competencies around behaviour which is culturally sensitive and practices equality and diversity. - Diversity mentoring - Cultural Ambassadors introduced to ensure bias is challenged at and illuminated from formal	2	Deputy Chief Executive/Medical Director

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		management procedures seem to have had a factor, is now embedded in the Trust. • Positive feedback on support from managers in Staff Opinion Survey. • Patient stories linked to protected characteristics discussed at Trust Board • Mentoring for BAME staff introduced in 2016 continues with mentors from senior BAME staff. • The responsible officers for Diversity and Inclusion (Staff and Patient) are part of regional diversity networks to share best practice. • The Trust has built the NHS Equality and Diversity principles into the staff behaviours and into specific equality & diversity objectives for anyone who manages staff within the Trust. • Equality and diversity is part of the induction for all staff and for the skills development programme for line managers on Management training. • Cultural awareness information is available to all staff. • Equality impact assessments are undertaken on ALL changes, policies and procedures within the Trust. • The Trust supports staff on the national Stepping Up programmes for the leadership development of BAME staff. • The Trust supports the annual Women's Day, Black History Month and other Diversity and Inclusion initiatives. • Board blogs – Lead Execs and NEDs personal stories and Staff side Chair		

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Domain	Outcome	Evidence	Rating	Lead/Owner/Dept.
		• The CEO regularly writes articles in staff communications prompting diversity and supporting staff that may be experiencing discrimination, including personally appearing in a Zero Tolerance poster for Trust sites. • Robust Bullying and Harassment Policy which specifically addresses robust line management and bullying and harassment. • Agreed Outcomes Policy introduced in 2018 to support resolution to issues and minimise negative outcomes. • Freedom to Speak Up Champions to support staff to raise issues. • Wider Executive Team have agreed to "no more tick boxes" and widening diversity on interview panels. • Leadership Forum have discussed health inequalities. • Numerous examples of service changes made to meet health inequalities. • Care Quality Commission 'outstanding' rating for Trust and 'well led domain'		

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Domain	Outcome	Evidence	Rating	Lead/Owner/Dept.
Domain 3: Outcome 3B Inclusive Leadership	**3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed**	• The template for Board (and Committee) papers includes a section to indicate how the equality and diversity objectives are met (where relevant) by the paper. It lists each equality and diversity objective and asks how the report supports achievements of each objective. • All board papers have this section completed. • Quality Impact Assessment (QIA) and Equality Impact Assessment (EIA) policy and process in place. • EIA standard operating process reviewed and amended as required. • QIA and EQIA for service changes/improvements in place • Integrated Governance report identifies how we are meeting our local EDS objectives.	2	Director of Corporate Affairs

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Domain 3: Outcome 3C Inclusive Leadership	**3C: Board members and system leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients**	• Workforce policies
		• Co-production work
		• Patient Participation Committee
		  ○ Disparity metrics that have been agreed
		  ○ WRES and WDES reporting and action plans
		  ○ Gender pay gap reporting and action plans
		• Trustwide Working Together Group
		  ○ Focused work on particular gaps/low take up of services e.g. breastfeeding for South Asian ladies
		  ○ MSK
		  ○ Diabetes
		• Bi-annual workforce review to Trust Board – delivery of the People strategy which includes EDI performance.
		• Annual Trust Objectives have measures and indicators linked to EDI and discussed at Trust Board on a regular basis.
		• Integrated Governance report includes report on Excellent employer objectives and measures/indicators.
			2	

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Domain	Outcome	Objective	Action	Completion Date
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**	To continue to work towards achieving the Trust Board's anti-racism pledge.	Board members, system leaders and those with line management responsibilities to role model behaviours that support the Trust's ambition to be an anti-racist organisation.	March 2024
	3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed	Ensure that all Trust Board/Sub-committee papers/reports detail how they are addressing health inequalities.	Board template updated to include the following question: 'Describe how this report/paper addresses health inequalities.'	September 2023

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	3C: Board members and system leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients			