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# NHS Equality Delivery System 2024

## The Royal Orthopaedic Hospital

31 January 2025

# Contents

Equality Delivery System for the NHS	2
Completed Actions	6
Rating and Score Card	11
Domain 1 – Commissioned or provided services	12
Domain 2 – Workforce Health and Wellbeing	22
Domain 3 – Inclusive Leadership	41
Action Plan	45

# Equality Delivery System for the NHS

## *The EDS Reporting Template*

Implementation of the Equality Delivery System (EDS) is a requirement on both NHS commissioners and NHS providers. Organisations are encouraged to follow the implementation of EDS in accordance EDS guidance documents. The documents can be found at:

[www.england.nhs.uk/about/equality/equality-hub/patient-equalities-programme/equality-frameworks-and-information-standards/eds/](http://www.england.nhs.uk/about/equality/equality-hub/patient-equalities-programme/equality-frameworks-and-information-standards/eds/)

The EDS is an improvement tool for patients, staff and leaders of the NHS. It supports NHS organisations in England - in active conversations with patients, public, staff, staff networks, community groups and trade unions - to review and develop their approach in addressing health inequalities through three domains: Services, Workforce and Leadership. It is driven by data, evidence, engagement and insight.

The EDS Report is a template which is designed to give an overview of the organisation's most recent EDS implementation and grade. Once completed, the report should be submitted via [england.eandhi@nhs.net](mailto:england.eandhi@nhs.net) and published on the organisation's website.

<b>Name of Organisation</b>		<b>The Royal Orthopaedic Hospital</b>		<b>Organisation Board Sponsor/Lead</b>	
				Sharon Malhi Chief People Officer	
<b>Name of Integrated Care System</b>		BSol			
<b>EDS Lead</b>	Clare Mair			<b>At what level has this been completed?</b>	
				<b>*List organisations</b>	
<b>EDS engagement date(s)</b>	Staff Experience &OD sub board committee update, February 2025 Executive meeting February 2025 – Update Staff networks – December 2024 and January 2025 Feedback session with colleagues – January and February 2025 ICS EDI Lead meeting November 2024 ICS EDI Lead meeting December 2024 ICS EDI EDS meeting December 2024 ICS EDI EDS meeting January 2024 ICS EDI EDS meeting February 2024 OD and Inclusion monthly team meetings Update meeting (December 2024) Staff side representative and UNISON representative (February 2025) Update at Trust Consultative Committee – January 2025 Progress updates from colleagues (see list at the end of this document) Final review with Deputy Chief Nurse February 2025			<b>Individual organisation</b>	The Royal Orthopaedic Hospital  Ongoing work with ICS EDI Leads for Domain 1  Partnering with University Hospital Birmingham

			<b>Partnership* (two or more organisations)</b>	Staff side representative UNISON
			<b>Integrated Care System- wide*</b>	EDI Leads, BSol
<b>Date completed</b>	February 2025		<b>Month and year published</b>	February 2025
<b>Date authorised</b>	February 2025		<b>Revision date</b>	

## Actions from 2024

<b>Key completed actions in the previous year aligned to each area (including actions completed from EDS 2023 plan</b>	
<b>Action/activity</b>	<b>Related equality objectives</b>
New Chair and Deputy Chair appointed to Women's network, New Chair and Deputy Chair appointed to Multi Minority Group, and a new Chair for Mankind network	Giving colleagues and patients a voice ongoing
Patient Participation Group was started in September 2024 and continues to run forums for patients and staff	Giving colleagues and patients a voice ongoing
Healthwatch Birmingham continues to work closely with the Trust to respond to reviews and support individually led conversations	Giving colleagues and patients a voice ongoing
Increased diversity for volunteer members with focus on increasing representation for age, neurodivergence and technical backgrounds	Giving colleagues and patients a voice ongoing
Staff listening sessions have taken place through the previous twelve months to ensure staff can give key feedback on topics. Current areas of discussion include Cost of Living and Staff Retention, supporting staff through the riots and colleague safety	Giving colleagues and patients a voice ongoing
Awareness sessions are run throughout the year including International Women's Day, Black History Month, Professional Nurse Advocate, Learning Disability awareness, Domestic abuse awareness, Mental Health Awareness, Stress Awareness and International Day for Persons with Disabilities which include a range of activities include presentations, book clubs	Giving colleagues and patients a voice ongoing
The OD and Inclusion Team continue to chair the Network Chairs meeting to provide clarity and give direction on purpose of staff voice. The meeting also offers support and collaboration across all the different networks to hear staff and patient voice and to highlight intersectionality	Giving colleagues and patients a voice

Further Freedom to Speak up (FTSU) champions have been recruited to support staff and patients co-ordinated by the Freedom to Speak up Guardian (FTSUG). A dedicated email and telephone line has also been set up	Giving colleagues and patients a voice
Wellbeing weeks are run for colleagues and patient's twice a year and focus on the Trust key areas of focus in the 5 ways to wellbeing.	Giving colleagues and patients a voice
Youth Patient Forum continue to be run and developed to hear the voice of patients	Giving colleagues and patients a voice
The 'Many Cultures One' ROH photo exhibition continues to be displayed outside the hospital for both staff and visitors to learn more about diversity at the Trust <a href="#">Royal Orthopaedic Hospital - The Royal Orthopaedic Hospital Launches Many Cultures One ROH Exhibition</a>	Giving colleagues and patients a voice
The 'Beyond the Stigma' exhibition has been evaluated by University of Canterbury with the review highlighting the outstanding approach achieving diversity awareness through an art medium	Giving colleagues and patients a voice
The OD and Inclusion team and ABLE network has launched the new ROH Disability (Reasonable adjustments Health) passport. This was funded by a successful bid from the Workforce Disability Equality Standard (WDES) Innovation Fund	Giving colleagues and patients a voice
Engagement sessions have been run with staff through the People Promise work which had focussed on Flexible working, Civility and respect, upskilling managers and engagement	Giving colleagues and patients a voice
Progress continues to be made on the EDI Improvement plan	Creating an inclusive and healthy ROH culture
The Trust Charities team have run a number of projects to support patients during their stay at the Trust e.g. sensory room to support patients and their families	Creating an inclusive and healthy ROH culture
The first fully accessible adult toilet and changing facilities has been set up to support patients and their families	Creating an inclusive and healthy ROH culture

Disability Confident Level 3 – Leader is in place at the Trust is currently going through a revalidation process to renew by March	Creating an inclusive and healthy ROH culture
Youth Mental Health First Aid programme and workshops are ongoing for key staff members	Creating an inclusive and healthy ROH culture
The Oliver McGowan Mandatory Training (an e learning package about Patients with Learning Disabilities and Autism has been rolled out across the Trust with support from the Learning Disabilities Nurse and the Education and Training Team. Part 2 of the training launched in September 2024 asking staff to complete the next phase which for non clinical staff involves a 1 hour online workshop and for clinical staff a 1 day face to face session. The Trust is working with the ICS to deliver this mandatory requirement.	Creating an inclusive and healthy ROH culture
Additional physiotherapy locations have been set up in the community to enable patient access to services	Creating an inclusive and healthy ROH culture
Safeguarding training has been updated to support key diverse groups including LGBTQ+ patients and colleagues. Safeguarding Adults at risk policy has been updated to reflect Care Act	Creating an inclusive and healthy ROH culture
Project Team is currently working on flexible working programme as part of the People Promise project work	Creating an inclusive and healthy ROH culture
People Promise Manager has been appointed for one year to progress key projects in Civility and Respect, Working flexibly, engagement and upskilling managers	Creating an inclusive and healthy ROH culture
Jointcare patient pathways continues to support patients and their supporters in an innovative way to accelerate recovery	Creating an inclusive and healthy ROH culture
Inclusive Companies (IC) has increased the ranking at the Trust to 8 out of their Top 50 rankings (a move from 26 <sup>th</sup> place in 2023). This is following a rigorous assessment with organisations from different sectors (not just the NHS). Work included to achieve ranking includes running webinars and awareness sessions for IC members on topics such as Wellbeing and Menopause	Being recognised as a Top Inclusive Employer

Reports have been implemented to benchmark feedback from Learning Disability patients on comments and also compliments. The information is now reported to the Safeguarding committee	Tackling and removing any forms of discrimination
Successful career progression from colleagues who undertook the Mentoring programme launched for Multi Minority Ethnic Group (MMEG) colleagues as part of the WRES Action Plan.	Tackling and removing any forms of discrimination
Open Day recruitment events have been successful run to attract and reach candidates from a more diverse background	Tackling and removing any forms of discrimination
Human Factors Development programme including a Trust conference has been designed and continues to be rolled out across the Trust with access to all colleagues	Ensuring our leaders, managers and colleagues role model in a compassionate and Inclusive Way
Completion of key development opportunities for staff including (1) Enabling a Productive and Inclusive Culture (EPIC) masterclasses open to colleagues across the Trust. (2) Me as a Manager awareness session to support managers in employee lifecycle (3) Mandatory inclusion training (4) Senior Leadership programme with Inclusion element included	Ensuring our leaders, managers and colleagues role model in a compassionate and Inclusive Way
Two staff members successfully enrolled on the second cohort of the Birmingham and Solihull ICS “Possibilities Beyond Limits Programme” aimed at middle management level staff aiming for senior roles and particularly for ethnic minority and disabled/neurodiverse colleagues who continue to be underrepresented at senior levels.	Ensuring our leaders, managers and colleagues role model in a compassionate and Inclusive Way

<p>Senior Leaders presented at National Orthopaedic Alliance (NOA) conference on staff wellbeing and the power of networks</p>	<p>Ensuring our leaders, managers and colleagues role model in a compassionate and Inclusive Way</p>
<p>OD and Inclusion team regularly run regular wellbeing trolley walkabouts with Executive Directors and Trust Board members to engage with staff and patients (where appropriate) and hear feedback</p>	<p>Ensuring our leaders, managers and colleagues role model in a compassionate and Inclusive Way</p>
<p>Objectives are confirmed for the Executive Team members as part of the High Impact EDI Improvement Action plan</p>	<p>Ensuring our leaders, managers and colleagues role model in a compassionate and Inclusive Way</p>

## EDS Rating and Score Card

Please refer to the Rating and Score Card supporting guidance document before you start to score. The Rating and Score Card supporting guidance document has a full explanation of the new rating procedure, and can assist you and those you are engaging with to ensure rating is done correctly

Score each outcome. Add the scores of all outcomes together. This will provide you with your overall score, or your EDS Organisation Rating. Ratings in accordance to scores are below

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

## Domain 1 – Commissioned or provided services

Domain	Outcome		Rating	Owner (Dept/Lead)
<b>Domain 1: Commissioned or provided services</b>	1A: Patients (service users) have required levels of access to the service	<p><b>Service 1 – Chaplaincy</b></p> <p>The chaplaincy lead is Catholic and from the local nun community. They works at the hospital each week and will visit any patient who asks for spiritual or religious support.</p> <p>There is also a network of colleagues from different religions and faiths who support patient including:</p> <ul style="list-style-type: none"> <li>- Church of England</li> <li>- Muslim</li> <li>- Hindu</li> <li>- Jehovah Witness</li> <li>- Sikh</li> <li>- Judaism</li> </ul> <p>Leaflets and posters are available across the Trust to ensure patient (and staff) are aware of the support available and access to quiet spaces. This is also information available on the ROH website for visitors to review before appointments</p> <p>Faith and religion options are on every medical records and information is available from GP notes. Patients are also able to</p>	1.5	NB SL

		<p>update their records at any stage of the patient pathway</p> <p>All wards work with the chaplaincy and catering teams to ensure patients are able to access food specific to upholding their religion or beliefs e.g. cultural menus to support vegetarian and halal etc</p> <p>There is a multi-faith room with 24 hour access with any access support required provided by the portering team. There are religious artefacts for the following faith groups:</p> <ul style="list-style-type: none"> <li>- Church of England</li> <li>- Muslim</li> <li>- Hindu</li> <li>- Jehovah Witness</li> <li>- Sikh</li> <li>- Judaism</li> </ul> <p>Staff will also help to source any further artefacts needed e.g. a recent patient needed a specific version of the bible which was sourced by the PALS Team</p> <p>Staff and ward staff members are able to provide information on access for patients and families</p>	3	NB KH
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		<p>The Patient Access Group has supported with the improvements to signage for the faith room and other quiet spaces at the Trust. Information is available in different languages to support patients</p> <p>Pre operative and theatre staff will support patient before procedures with any questions about religion or faith</p> <p>The chaplaincy lead goes to every ward except in cases where there is a high Infection prevention where alternative ways to support are identified e.g. phone calls</p> <p><b>Service 2 - Oral Health</b></p> <p>Elective patients for admission to ROH complete a pre-operative synopsis questionnaire. This includes questions regarding teeth and gums and space for any specific remarks. Any further questions will be asked based on the answers to the questionnaire; if it is deemed that oral health may have a negative impact on the patient's treatment pathway.</p> <p>The anaesthetist chart includes an examination section entitled teeth where</p>		
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		<p>anaesthetists document any relevant issues identified which may impact incubation and any other medical procedures</p> <p>Clinicians may advise patients to seek further medical advice (which should include seeing a GP) if issues are raised as a follow up after treatment, but it is not possible for staff to refer patients</p> <p>An oral care patient information leaflet is being sourced to raise patients' awareness of the importance of good oral hygiene.</p> <p><b>Service 3 – Transport</b></p> <p>As an elective Trust most, patients plan their own transport to and from ROH.</p> <p>The patients do have access to a free bus pass with WMAS but this would need to be organised by the patient and not the Trust</p>	1.5	NB SL KH
	1B: Individual patients (service users) health needs are met	<p><b>Service 1 - Chaplaincy</b></p> <p>There has been one complaint since Sept 2023 about Chaplaincy services at the Trust. This was regarding the version of the bible that was available for a patient. This issue</p>	1.5	NB SL

		<p>was resolved quickly and different copies were sourced for any future requests</p> <p>Patients are able to arrange a visit from the chaplaincy lead before they are admitted and there is no restriction on when support is provided on the patient journey. The Patient Liaison Team (PALS) will also contact local faith organisations through the multi faith networks to ask for support from any other faiths that the Trust is not able to support.</p> <p>University Hospital Birmingham chaplaincy team will also offer support in emergency situations for a faith or religion that the Trust is not able to support patients with.</p> <p><b>Service 2 - Oral Health</b>  There have been no complaint received in the PALS team linked to oral health and care and it should be noted that the level of service is different to acute Trusts as the ROH is an elective orthopaedic surgical hospital.</p> <p>The Trust have a Speech &amp; Language Therapist who is part of the Task &amp; Finish Group and available to support both patients and staff should any concerns be identified.</p>	2	NB KH
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		<p>The Trust utilises Clinical Skills net as a training resource and our Education Team will support with any specific identified training needs.</p> <p>As part of the guideline approval process an implementation plan will be agreed which will include dissemination and awareness. This will be achieved through: ROH existing Comms channels, Infection Prevention Control (IPC) staff information letters, Leader’s forums, IPC and Nutrition &amp; Hydration links.</p> <p>As an elective Trust there is no on-site dental service therefore patients requiring such would be sign-posted back to their GP or to other dental services. If an in-patient urgently required dental intervention, the ward team would liaise with neighbouring Trusts.</p> <p><b>Service 3 – Transport</b></p> <p>Non-Emergency Patient Transport can be arranged in accordance with the NHS eligibility criteria. Staff members can give information on this when required</p> <p>A Hardship is (up to £500 within 12 months) available via Royal Orthopaedic Charity</p>	1.5	NB KH SW BS
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		<p>towards travel to and from hospital/place of treatment or accommodation for long distance patients/carers in financial hardship. The funding is allocated by a hardship committee who looks at application criteria to make decisions</p> <p>SWIFT West Midlands 4-week travel vouchers are available which support patients to attend appointments. Use of these in the Children's OPD supports reduction of 'Was Not Brought' due to the financial impact of attending appointments</p>		
	<p>1C: When patients (service users) use the service, they are free from harm</p>	<p><b>Service 1 - Chaplaincy</b> Any issues are raised with Chaplaincy lead on a regular basis by the Head of PALS. This is to ensure a good balance of faith and duties with physical and emotional health needs</p> <p>The Chaplaincy lead keeps a log of all the visits made to patients which includes information on the type of support needed, duration and any other information. This information is reviewed to understand if any additional support is needed and also if patients are identified a gap in chaplaincy support available</p>	2	NB SL

		<p>Religious and faith events are recognised and celebrated at the Trust by staff networks and the OD and Inclusion. This is extended to patients e.g. booklets to explain festivals and ensuring bottle of water are placed in the faith room during Ramdan and Eid.</p> <p><b>Service 2 - Oral Health</b></p> <p>As an elective orthopaedic Trust patients must bring their toothbrushes and toothpaste in with them and are able to self-care. The Trust provides toothbrushes and toothpaste to those who require it and staff support with toothbrushing if required.</p> <p>In June 2024 a small task and finish group commenced development of a Mouth care guideline. This is currently being finalised prior to going through sign off processes.</p> <p>A mouth care assessment tool is available within our electronic Patient Information &amp; Communication System (PICS) which will be utilised once the guideline is launched. Risk assessments and actions required information is included within the guidelines and will be available at the point of care for staff to utilise for patients assessed as requiring additional interventions or support.</p>	3	NB KH
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		<p>For patients with specific identified communication needs Interpreters and written information in different languages/formats can be provided. The Trust also has a vulnerabilities team who can support patients for example with Dementia, Learning Disabilities or Autism.</p> <p>Oncology has specific protocols in place e.g. Prescribing and Administration of Denosumab. The role the Advanced Nurse Practitioner/Clinical Nurse Practitioner is too assess for signs of osteonecrosis.</p> <p><b>Service 3 - Transport</b></p> <p>There is no data available on patient transport and the PALS have confirmed that no complaints have been received for transport</p>	1	NB KH
	1D: Patients (service users) report positive experiences of the service	<p><b>Service 1 – Chaplaincy</b></p> <p>Feedback is also monitored through Friends and Family survey.</p> <p>As mentioned above the Chaplaincy lead keeps a log of all the visits made to patients which includes information on the type of</p>	1.5	NB SL

		<p>support needed, duration and any other information. Any feedback from patients and visitors is noted and discussed with the Head of PALS from the information provided in the log</p> <p><b>Service 2 – Oral Care</b></p> <p>Any feedback from patients from the Friends and Family test will be shared with specific staff members. There are no recent specific points that have been raised by patients in the last 12 months</p> <p><b>Service 3 – Transport</b></p> <p>There is no data available on patient transport and the PALS have confirmed that no complaints have been received for transport</p>	1.5	NB KH
			1	NB KH
<b>Domain 1: Commissioned or provided services overall rating</b>			1.5	

## Domain 2: Workforce health and well-being

Domain	Outcome	Evidence	Rating	Owner (Dept/Lead)
<b>Domain 2: Workforce health and well-being</b>	2A: When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions	<p>Wellbeing information which includes health information and mental health support is shared with staff in a number of ways including:</p> <ul style="list-style-type: none"> <li>• Information packs in each department</li> <li>• Wellbeing noticeboards across the Trust</li> <li>• Wellbeing information shared with all departments</li> <li>• Weekly Wellbeing email</li> <li>• Monthly Managers Calls</li> <li>• MHFA champions across the trust</li> <li>• Wellbeing Champions</li> <li>• Wellbeing Conversation Training</li> <li>• Library of support – Five Ways to Wellbeing</li> </ul> <p>Bi annual Wellbeing week highlights health issues and support available e.g. exercise bicycle to monitor heartbeat, Wellbeing trolleys</p> <p>As part of the wellbeing events exercise classes are available for staff to attend e.g. yoga and Pilates and Zumba.</p> <p>The Trust runs monthly Craft Sessions.</p> <p>The Trust runs weekly Knit and Natter group.</p>	2	SM LTH

		There are a number of Mental Health First aiders (MHFA) across the Trust from a diverse background who are able to support where appropriate	2	NB EOK
		Staff have access to Therapies services treatment through self-referral and occupational health to support MSK, weight and other health issues	2	MP NM
		The Learning Disability team is able to advise and signpost individuals with a learning disability and/ or autism diagnosis and their line manager	2	NB EOK
		Occupational Health services are available to support staff with health screening or health checks	2	SM & MD
		Staff have access to the NHS Regional Staff mental health Hub with funding that has been extended to March	2	SM LTH
		Staff have access to Citizen's Advice Birmingham, a direct line for help and support.	2	SM MD
		Staff have access to counselling for help and support.	2	SM LTH

		<p>Staff have access to Relate counselling for help and support.</p> <p>Staff can join listening sessions and have access to support for Cost of Living issues including the impact on Mental Health conditions</p> <p>Cost of living support, free out of hours meals, ROH Pantry (foodbank), Period Dignity, the Blue Bag Project, free sanitary products, free porridge and £1 meals in the Café.</p> <p>Support to Post Graduate Doctors with twice a year inductions, providing support specifically for them. Support also provided in their rest room.</p> <p>Staff networks are growing and help to support the sharing of information as well as giving colleagues a voice: Mankind, Menopause, Equality and Diversity, MMEG, Able, Women’s Network and LGBTQ+ Colleagues are able to raise key issues at the start of each Staff network meeting. This can be colleague from the community or as allies. Each network has a Chair or representation and some also have a deputy chair. Each network is supported by an Executive Board members who attend the network meetings. In addition, each network has full support from the OD and Inclusion team including administrative support.</p>	2.5	SM MH
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		Sickness data is shared at key meetings to understand links and agree support needed in different areas for staff members	2	SM MD
	2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source	<p>Staff survey results show that progress is being made in terms of supporting staff. The results are comparable to higher performing Trusts across the NHS</p> <p>For the Staff survey (2023) results, the key staff questions are</p> <p>Staff who were 'Free from abuse, harassment, bullying from staff was 81.9% which is a positive increase from 2022 at 79.4%</p> <p>In 2023 99.05% of staff were free from physical violence from other colleagues which was a positive improvement from 2022 at 97.95</p> <p>Comparing these scores for WRES and WDES are:</p> <p>WRES</p>	2	SM MH

		<p>Free from abuse, harassment, bullying from staff is had a positive increase from 72.2% 77.83%</p> <p>WDES Free from abuse, harassment, bullying from staff is a positive increase in 2023 from 71.1% to 76.83%</p> <p>The results for NHS Staff Survey 2024 are not yet published but the information will be used once the national embargo is lifted in March 2025.</p> <p>Staff listening group and focus groups have continued to give colleagues the opportunity to share any feedback and issues. These sessions are open for all staff.</p> <p>The Trust is continuing to develop staff networks to support colleagues and give staff a voice. There has been increased participation from staff as mentioned above</p> <p>Network chairs meetings take place on a monthly basis to share ideas, offer support and discuss how collective work links back to the Inclusion Strategy and Action plan</p>	<p>2</p> <p>2</p>	<p>SM Workforce and OD Team</p> <p>SM MH</p>
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		<p>Awareness projects to support diverse staff groups - e.g., Beyond the Stigma, LGBTQ+ History Month, South Asian Heritage Month and Black History Month</p> <p>The Executive team actively support that no colleague should be a victim of harassment and bullying. The Chief Nurse has endorsed new posters around the Trust to showcase a zero approach to Harassment and Bullying of any kind.</p> <p>The MMEG network has showcased the ROH Many Cultures One ROH exhibition to show colleagues and patients that the Trust supports and employs colleagues from various cultural, ethnic backgrounds.</p> <p>The Trust is part of the Taskforce as a response to the Birmingham and Lewisham African Caribbean Health Inequalities Review (BLACHIR) report</p> <p>Continue the development of further staff networks through staff feedback</p> <ul style="list-style-type: none"> <li>• Building networks through the EPIC Masterclasses to allow staff to speaking up and supporting other staff members.</li> </ul>	2	MMEG Network
			2	NB ES
			2	SM MH

		<ul style="list-style-type: none"> <li>• The Trust attends the ICS network calls to discuss best practice regarding any form of harassment or bullying.</li> <li>• Projects undertaken in networks include Disability (Reasonable Adjustments) passport, Breastfeeding project, Menopause champions</li> </ul> <p>The Trust continues to roll out the Oliver McGowan Tier 1 Mandatory Training in Learning Disability and Autism. The e-learning went live in April 2023 for all staff. Part 2 of the training has been promoted September 2024 and by April 2026 all staff should be compliant with both Part 1 and Part 2.</p> <p>The lead has undertaken training to facilitate the Oliver McGowan training Part 2, Tier 2</p> <p>Further develop work to enable staff with protected characteristics to be supported to report and refuse treatment to patients who verbally or physically abuse. Work to be linked to Link to the violence reduction framework and health and safety forum</p> <p>Work has been completed by the nursing colleagues on the Sexual Safety Charter standard and the introduction of the charter is completed</p>	3	NB FD SM CF
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		<p>The Education and Training team and the learning disability and autism clinical nurse specialist attend regular stakeholder meetings. Whilst this training is predominantly focussed on patient interaction, it also highlights support required for any person with a learning disability or autistic person.</p> <p>Bespoke training is provided to departments to raise awareness of learning disability and autism and how to support colleagues</p> <p>Safeguarding (SG) training is undertaken to raise awareness on and to support colleagues</p> <ul style="list-style-type: none"> <li>• Roadshow and awareness events</li> <li>• SG Champions Day is held quarterly to support and help further educate staff</li> <li>• Full support from initiatives from Staff side and union support</li> </ul> <p>SG Champions Day are run quarterly to support and help further educate staff.</p> <p>The Royal Orthopaedic Hospital has a Domestic Abuse Lead for the Trust who is the Senior Named Safeguarding Nurse for Children and Adults which is recognised by the ICB. As per of the role she delivers annual training to the 52 clinical and non-clinical domestic abuse champions</p>	<p>3</p> <p>3</p> <p>3</p>	<p>NB EOK RF SM CF</p> <p>NB EOK</p> <p>NB EOK</p>
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		<ul style="list-style-type: none"> <li>• There are two domestic abuse policies in place which supports staff, patients, visitors, and families which is reviewed and updated in accordance with local and national guidance yearly</li> <li>• The domestic abuse lead has designed an internal domestic abuse care pathway which supports staff and patients with assessing the risks of victims and their children.</li> <li>• Three areas within the ROH ask the routine enquiry (domestic abuse question) to all patients accessing our services (Physiotherapy, POAC and ADCU)</li> <li>• All staff who complete level 3 safeguarding training receive DASH risk checklist training and are provided with an internal “we are here to help” domestic abuse card which assist staff with internal and external domestic abuse procedures</li> <li>• The domestic abuse lead attends and contributes to regional domestic abuse meeting hosted by NHS England bi-monthly</li> <li>• The domestic abuse lead completes an annual domestic abuse audit which is shared with the safeguarding committee to provide assurance to the Trust.</li> <li>• All staff domestic abuse disclosures are managed by the domestic abuse lead and</li> </ul>		
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		<p>support is provided by the staff members line manager and HR</p> <ul style="list-style-type: none"> <li>All departments within the Trust have access to the ROH domestic abuse signposting cards which provides contact details of domestic abuse services. The domestic abuse services are inclusive to the victims culture, sexuality and gender</li> </ul>		
	<p>2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source</p>	<p>Nine FTSU Champions from various background and qualifications has been recruited to help maximize effectiveness and visibility across the Trust. Their role facilitates patients and staff having a positive voice and helping to imbed an inclusive and healthy culture. They understand the values of the Trust and with guidance and support from the FTSU Guardian, deal with concerns in a compassionate manner.</p> <p>The Trust benchmark well against other Organisation FTSU Culture and this is shared with the Trust Board. The FTSU Team ensure that October FTSU Campaign is impactful across the Trust and used as a time of celebration, education and awareness and to embed a culture where staff are encouraged to speak up about anything that prevents them from providing the highest standard of care and promote an environment that is fit for purpose for staff</p>	2	SGL & CJ

		<p>The FTSU Guardian is working to further develop the number of FTSU Team to ensure that speaking up is a part of everyday business. The FTSU Guardian is also working with managers and leaders within the Trust to develop a system to triangulate information to be able to improve better support and outcome for staff members</p> <p>Self-referral Counselling service through the Trust Employee Assistance Programme (EAP) in addition to a local counselling service. Access to the NHS mental hub</p> <p>Colleagues are encouraged to use the Birmingham &amp; Solihull Waiting Room for health and wellbeing support.</p> <p>Other support includes:</p> <ul style="list-style-type: none"> <li>• ICS Staff Mental Health hub</li> <li>• Bi annual Wellbeing weeks to share information with all staff across the Trust on ways to access support</li> <li>• Listening Sessions on key topics</li> <li>• Network of Mental Health First Aiders (MHFA) Staff attending Schwartz Round</li> <li>• Support from Workforce and OD team to help with signposting to the correct solutions</li> <li>• Network of Health and Wellbeing champions</li> </ul>	2	SM MD LTH
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		<ul style="list-style-type: none"> <li>• Sessions run at departmental meetings to cover support available</li> <li>• Awareness sessions run at various events</li> <li>• Tea trolleys used as an additional way to promote support in all areas</li> <li>• Occupational Health support</li> <li>• Employee Assistance Programme support (EAP)</li> </ul> <p>There is also ongoing partnering with union representatives and staff side to keep them updated on key work, any issues and support available</p> <p>Equality Impact Assessments are used for all Trust policies, projects and some patient pathways.</p>	3	SM Workforce and OD Staff side
	2D: Staff recommend the organisation as a place to work and receive treatment	<p>National survey results and Pulse results show positive scores from staff with scores listed below.</p> <p>Staff who would “Recommend my organisation as a place to work” the results are: National Staff Survey (2023) 72.9% which was an increase from 72.32% in 2022</p> <p>Staff who said if a friend or relative needed treatment that they would be happy with the standard of care provided by this organisation</p>	2.5	SM Workforce & OD Team

		<p>2023 85.4% which was an increase from 84.72% in 2022</p> <p>In addition, the scores for the 7 NHS People Promise Themes (rated out of 10) for 2023 were:</p> <ul style="list-style-type: none"> <li>○ We are compassionate and inclusive: 7.47</li> <li>○ We are rewarded and recognised 6.09</li> <li>○ We each have a voice that counts 6.88</li> <li>○ We are safe and healthy 6.56</li> <li>○ We are always learning 5.57</li> <li>○ We work flexibly 6.47</li> <li>○ We are a team 6.78</li> </ul> <p>Further the scores for the 2 other Staff Survey Themes (also rated out of 10) for 2023 were:</p> <ul style="list-style-type: none"> <li>○ Staff Engagement 7.18</li> <li>○ Morale 6.28</li> </ul> <p>Information from the National Staff Survey is used to inform of key priorities to support staff engagement</p> <p>Staff networks include on every agenda a ‘check in’ section to allow all participants to raise concerns or points of interest. Focus Groups and listening sessions continue to be run to get feedback on ways to improve retention of staff</p> <p>The Trust has a ROH onboarding programme which includes a 100 day programme led by the Executive Directors. This includes future learning</p>		
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		<p>opportunities. Every new starter is asked to feedback on their experience on their first 100 days There is a feedback session to understand staff feedback and any learnings</p> <p>A People Promise Manager has been working on a number of projects aligned to the NHS People Promises. The projects include civility and respect and working flexibly.</p> <p>Ongoing external company review – Inclusive Companies awarded ranking 8<sup>th</sup> in Top 50. This was an improvement from 26<sup>th</sup> in 2023 Improvement in Stonewall index</p>	2	SM MH
<b>Domain 2: Workforce health and well-being overall rating</b>			2	

## Domain 3: Inclusive leadership

Domain	Outcome	Evidence	Rating	Owner (Dept/Lead)
<b>Domain 3: Inclusive leadership</b>	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	<ul style="list-style-type: none"> <li>• Equality &amp; Diversity data is shared with finance colleagues and other staff responsible for service procurement, in order to support decisions making</li> <li>• Equality and Diversity data now available in an Integrated Performance Dashboard for those responsible for managing and procuring services.</li> <li>• Staff networks include Executive and senior leader sponsors</li> <li>• Executive and senior leaders support inclusion awareness sessions</li> <li>• Executive and Non-Executive Directors (NEDs) work with other organisations to network and raise awareness</li> <li>• All Leadership programmes include an element of Inclusive and Compassionate Leaders</li> <li>• Trust Board members regularly meet colleague and patients at Trust Board and sub committees to understand different lived experiences</li> <li>• Trust Board members and senior leaders regularly visit different</li> </ul>	2	SGL SM CM

		<p>departments in the Trust to meet colleagues (and patients) as part of the Trust wellbeing initiatives</p> <ul style="list-style-type: none"> <li>• Equality impact used on projects and patient pathways and policies (approach currently being updated)</li> <li>• Senior Leaders continue to attend upskilling sessions for colleagues</li> <li>• Each staff network is supported by an Executive sponsor</li> <li>• The Staff Experience and OD committee meeting is undertaken bi monthly to be give assurance on the Equality and Health Inequalities work.</li> <li>• The Chair of Trust Board and Executive Directors have equality objectives as part of the EDI Improvement Plan which are tracked for progress</li> <li>• Executive Directors and NEDs directly support with listening sessions on topics including Cost of living, and Menopause</li> <li>• Board placing a particular focus on Race Equality and steps to broaden this work are currently being scoped</li> <li>• The Trust is currently implementing the RACE Equality Code sponsored by Trust Board members; with the work</li> </ul>		
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	<p>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</p>	<ul style="list-style-type: none"> <li>• Integrated Health and Equalities dashboard is reported to senior leaders on a quarterly basis</li> <li>• Model hospital is used to share information across the Trust</li> <li>• Information on EDI metrics is shared regularly with Senior and Executive leaders at all Board meetings</li> <li>• Information on WRES, WDES, EDI Improvement plan and other key reporting are presented and discussed with Board meetings to show progress and provide assurance</li> <li>• Feedback from work with external partner including Inclusive Companies and Stonewall is regularly discussed with Board members</li> </ul>	<p>2</p> <p>2</p>	<p>SGL Senior Managers</p> <p>SM CM</p>
<b>Domain 3: Inclusive leadership overall rating</b>			2	
<b>Third-party involvement in Domain 3 rating and review</b>				
<b>Trade Union Rep(s):</b>		<b>Independent Evaluator(s)/Peer Reviewer(s):</b>		
2		2		

EDS Organisation Rating (overall rating): 2  
February 2025

Organisation name(s): The Royal Orthopaedic Hospital

Those who score **under 8**, adding all outcome scores in all domains, are rated **Undeveloped**

Those who score **between 8 and 21**, adding all outcome scores in all domains, are rated **Developing**

Those who score **between 22 and 32**, adding all outcome scores in all domains, are rated **Achieving**

Those who score **33**, adding all outcome scores in all domains, are rated **Excelling**

EDS Action Plan 2023/2024	
EDS Lead	Year(s) active
Clare Mair, Head of OD and Inclusion	8
EDS Sponsor	Authorisation date
Sharon Malhi, Chief People Officer	February 2025

Domain	Outcome	Objective	Action	Completion date
Domain 1: Commissioned or provided services	1A: Patients (service users) have required levels of access to the service	Increased patient engagement from diverse groups to access areas for improvement (2024)	<p>Further engagement with patient groups (including Youth Forum) to obtain feedback on access to services and overall patient experience</p> <ul style="list-style-type: none"> <li><b>Update:</b> Patient participation group has been set up bimonthly with clear actions</li> </ul>	<b>Completed</b>
		Support access for patients in line with Equality and Health Inequalities (CORE20PLUS5) (2024)	Continue to work with regional colleagues to facilitate positive change in access for patient services as a result of the BLACHIR report. To deliver on key objectives including better diversity data for patients	February 2026 <b>Ongoing</b>
		Review Faith room facilities and resources and ensure this is well communicated to patients (2025)	Form Task and Finish Group to review religious and faith facilities	February 2026

1B: Individual patients (service users) health needs are met	Ensure needs are met for higher risk patients in line with Trust's work on Health Inequalities and CORE 20 PLUS 50 (2024)	A new health and inequalities group to be developed with workstreams to reduce health inequalities. For learning disabilities this will be a more streamlined pathway ensuring robust collection and sharing of data. This covers notification, planning and handover to GP including prompting of annual health check.	February 2025 <b>Completed</b>
	Improved notification of and information about patients with learning disabilities when they attend the ROH.(2025)	Implement new mandatory training package on learning disabilities and regularly reviewed. The updated package to covers autism in line with LeDeR Policy (2021, The NHS Long Term Plan (2019), and 'Right to be heard' (2019). Training sessions are running face to face once monthly. Ensure Mandatory e-learning sessions in autism and learning disabilities are also available.	<b>Completed</b> – with rollout of training underway
	Work with regional partners to review options for patient transport (2025)	Ensure WMAS review into patient transport incorporates service need at the ROH	October 2025 (dependent on project timings)

	1C: When patients (service users) use the service, they are free from harm	Ensure patients have the correct opportunities to feedback and to report incidents if necessary (2024/2025)	<p>Review different options for patients to report any issues and viewing data for protected characteristics. Linked to work on Health Inequalities at Trust and with ICS colleagues</p> <p>Review method of collecting information and feedback on patients experience of chaplaincy service</p>	<p>February 2025 Ongoing</p> <p>December 2025</p>
	1D: Patients (service users) report positive experiences of the service	Ensure that the feedback from patient with protected characteristics (and also stakeholders) is reviewed and monitored to support a continued positive experience	<p>Review of options to collect patient information and feedback by protected characteristics in line with Health Inequalities (linked to BLACHIR programme)</p> <ul style="list-style-type: none"> <li>• <b>Update:</b> There have been 3 complaints raised based on protected characteristics over the last 12 months</li> </ul>	<p>July 2025 Ongoing</p>

Domain	Outcome	Objective	Action	Completion date
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	Enabling staff members to have access to health information and services to provide a healthy and supported workforce (2024)	Further work to expand the information provided to staff on health issues through Health and Wellbeing initiatives. Ensure interventions are targeted in line with Wellbeing Plan and NHS Health and Wellbeing framework <ul style="list-style-type: none"> <li><b>Update:</b> Training programme currently being planned for Managers on Mental Health support for teams</li> </ul>	February 2025 <b>Ongoing</b>
			Delivery annual Wellbeing priorities add to achievements	March 2025 <b>Partially completed</b>
			Deliver focussed two wellbeing weeks events per year to support staff in current additional work pressures	November 2025

	2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source	Working to reduce abuse, harassment bully and physical violence across protected characteristics (2024)	<p>Ensure information from the staff survey data, sickness and absence data is used to identify positive action to reduce negative behaviours and improvements measured.</p> <p>Further work to enable staff with protected characteristics to be supported to report and refuse treatment to patients who verbally or physically abuse. Work to be linked to the violence reduction framework and health and safety forum Sexual safety charter implemented. Improvement in sexual reporting</p>	<p>December 2025 <b>Ongoing action</b></p> <p>February 2025 <b>Ongoing - Improvement in staff survey questions linked to patients</b></p>
	2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source	<p>Ensure staff have different options to access support (2024)</p> <p>Ensure staff have different options to feedback and have a voice (2025)</p>	<p>The FTSU Guardian is working to further develop the number of FTSU champions to ensure that speaking up is a part of everyday culture. The FTSU Guardian is also working with managers and leaders within the Trust to develop a system to triangulate information to be able to improve better support and outcomes for staff with support across the Trust</p> <p>FTSU increased champion numbers</p> <p>Introduce a Wise Council at the Trust to support with staff networks and staff voice</p>	<p>December 2024 <b>Completed – regular updates at Trust Board</b></p> <p>December 2025</p>

	<p>2D: Staff recommend the organisation as a place to work and receive treatment</p>	<p>Improve the experience of staff members and aid retention (2024/2025)</p>	<p>Clear actions plans identified with National staff survey results and other survey data Staff survey information used across the Trust with You Said We did in place</p> <p>Review of staff networks to ensure all colleagues have access to staff voice initiatives</p> <p>Continue to work with external partners to benchmark through accreditation with Thrive at Work, Inclusive companies and Stonewall</p>	<p>February 2025 Completed results –You Said We Did and action plans. Ongoing work for 2024 results</p> <p>May 2025</p> <p>January 2025</p>
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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	Board members and managers at all levels are well engaged with Equality and Health Inequalities work across the Trust (2024)	<p>Develop work with the Board members on implementing the Leadership Framework for Health Inequalities Improvement.</p> <p>Objectives confirmed for Trust Board chair and Executive Team members on High Impact EDI Improvement Action plan add to achievements</p> <p>Health Inequalities Group formed and led by Chief Nurse with regular updates to the Trust Board</p> <p>Adoption of RACE code with sponsorship for Trust Board</p>	<p>February 2025 Ongoing</p> <p>September 2025 Completed for 2024, review for 2025</p> <p>completed</p> <p>September 2025</p>
	3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed	Equality and health inequalities (HI) impact assessments are well embedded and understood across all the work at Trust	<p>Develop work to ensure Equality and health inequalities are well reflected in the organisational strategy and business plans</p> <ul style="list-style-type: none"> <li>Update: Good progress with EIA and work aligned to BLACHIR will support Health Inequalities I assessment</li> </ul>	February 2025
	3C: Board members and system leaders	Ensure effective monitoring of Equality and Health Inequalities for staff and patients	Report format established and presented to senior leaders to include all NHS metrics	February 2025

	<p>(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"><li>• <b>Update:</b> Reporting now provided by new Health Inequalities group</li></ul>	
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<p>Work supported by colleagues including:</p> <p>Chief People Officer  Deputy Chief People Officer  Head of OD and Inclusion  Engagement and Wellbeing Officer  OD and Inclusion Manager  OD and Inclusion Administrator  Director of Strategy  Deputy Director of Finance, Chair Able  Deputy Chief Nurse  Head of Nursing, Division 1  Education Lead, Nursing  Matron, Safeguarding  Clinical Nurse Specialist Infection Control,  Senior Named Nurse for Safeguarding Children, Adults and Domestic  Abuse Lead  Learning Disabilities and Autism Clinical Nurse Specialist  Dementia and Mental Health Practitioner - Social Worker  Matron, Wards  Head of Therapies Services  Head of Patient Experience  Freedom to Speak up Guardian, Chair of Equality and Diversity  Multi Minority Ethnic Group (MMEG) network  Staff side  Charity Team  Executive Team  Workforce and OD Team  Staff networks</p>	<p><b>Example Evidence</b></p> <ul style="list-style-type: none"> <li>• Information from Senior Nursing team</li> <li>• Information from PALS Team</li> <li>• Information from Chaplaincy Lead</li> <li>• Information from IPC reporting</li> <li>• National Staff Survey (NSS) result 2023</li> <li>• Information for the WRES Indicator 2023</li> <li>• Information from WDES indicators 2023</li> <li>• Information from Equity Monitoring tool</li> <li>• Information from EDI Improvement plan</li> <li>• Meeting and updates with colleagues across the Trust</li> <li>• Patient data</li> <li>• Information from external organisations including Thrive at Work and Inclusive companies</li> </ul>
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