NHS England

NHS Equality Delivery System 2022
EDS Reporting Template

Version 1, 15 August 2022

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/

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 and published on the organisation's website.

NHS Equality Delivery System (EDS)

Name of Organisation		**Newcastle upon Tyne Hospitals NHS Foundation Trust**	**Organisation Board Sponsor/Lead**
			Rachel Carter, Director of Quality and Safety, and Ian Joy, Executive Director of Nursing
Name of Integrated Care System		North East and North Cumbria	

EDS Lead	Ilisha Purcell, Equality, Diversity and Inclusion Manager (patients)		**At what level has this been completed?**	
				***List organisations**
EDS engagement date(s)	EDI Working group 19/08/2025 Experience of Care Group 15/09/2025		**Individual organisation**	
			Partnership* (two or more organisations)	NuTH, Newcastle Disability Forum, Deaflink, Elders Council of Newcastle, HAREF, Skills for People, PALS, Be: Trans Support & Community, Crisis Skylight Newcastle, Sexual Health Service 4 Newcastle
			Integrated Care System-wide*	

Date completed	05/09/2025	**Month and year published**	October 2025
Date authorised	15/09/2025	**Revision date**	Annual review – 09/2026

Completed actions from previous year 2022-2025	
Action/activity	**Related equality objectives**
Continue BSL Health Navigator pilot and funding secured until April 2027.	Support patients who face language barriers to access health services
Engagement with the HAREF network (Health and Race Equality Forum) revealed that lack of awareness to interpreting rights when accessing healthcare was a hurdle to accessing care. HAREF have developed a community resource that requires further consultation with the network before translating and distribution.	Support patients who face language barriers to access health services
Engagement with local communities and underrepresented groups to understand access barriers to services has included the Health Navigator pilot and engagement with Deaflink, patient involvement as part of the Mental Health Strategy, working in partnership with Newcastle Carers, and engaging with Be North.	Engage with local communities and underrepresented groups for service developments and improvement work
Attendance and nonattendance data has been broken down into Index of Multiple Deprivation (IMD) quintile and ethnicity.	Engage with local communities and underrepresented groups for service developments and improvement work
Charity bid for partnership work with Skills for People was successful. This included the production of 20 Easy Read leaflets which are currently being developed and reviewed before being circulated across the Trust.	Support patients to be involved in their healthcare needs and support shared decision making
New Equality Impact Analysis process implemented.	Support staff caring for patients and visitors from protected characteristic groups
Outpatient activity dashboard allows for analysis by patient demographic.	Establish a better picture of inequalities in waiting lists

A strategy was produced through working with the charity Olovus (previously known as We Are Stand). The strategy is being renamed to the “Experience of Care Strategy” and is currently in final draft form.	Reach diverse communities for patient engagement activities
Annual report created that breaks down complaints by service user protected characteristics.	Reach diverse communities for patient engagement activities
Right time patient feedback is a partnership with Patient Perspective, a Care Quality Commission approved contractor to follow up with patients through a text survey after care. Feedback is received on inpatient, outpatient, emergency care and maternity services. A report analysing responses by patient demographics was produced and shared.	Reach diverse communities for patient feedback

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

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

Domain	Outcome	Evidence	Rating	Owner (Dept/Lead)
Domain 1: Commissioned or provided services	1A: Patients (service users) have required levels of access to the service	- Tender exercise for interpretation contract completed. Contract has been given to Language Empire. Interpretation and translation budget has been increased. - BSL Health Navigator pilot has continued with funding extended until April 2027 - Engagement work with HAREF to understand patient awareness of interpreting services - Engagement work with Deaflink and Skills for People to understand barriers to accessing services - Carers Network meetings continued and carer information packs produced	2	Experience of Care team
		- Attendance and nonattendance data has been broken down and analysed by ethnicity and index of multiple deprivation (IMD)		Information Services/ Performance and Governance/ Outpatient Transformation Board

		- Funding for AccessAble to produce detailed access guides and guidance documentation extended until July 2028		Experience of Care team
	1B: Individual patients (service users) health needs are met	- Updated “Your stay in hospital” document produced in partnership with the Health Literacy team. Awaiting review before circulation.	2	Experience of Care team
		- Co-production of a Mental Health Strategy in partnership with patients and staff		Psychiatric Associate Medical Director
		- Development of sensory friendly areas for children with sensory differences		Children’s
		- Multi-faith chaplaincy team		Chaplaincy
	1C: When patients (service users) use the service, they are free from harm	- Schwartz Rounds to support trust wide learning - Equality analysis on policies and service developments - Communication assessment on electronic admission form - Reasonable adjustment pilot led by the Learning Disability and Liaison team - Learning from incident guides produced	2	Trust wide
		- Specialist lead nursing roles created		Trust wide

		- Dedicated safeguarding policies for adults, children and maternity		Safeguarding/ Children's/ Maternity
		- Rapid review panels to review incidents and events and share learnings		Clinical governance
	1D: Patients (service users) report positive experiences of the service	- Patient feedback through engagement with Skills for People, Deaflink, and patient involvement with the mental health strategy - Complaints analysed by protected characteristics and offering flexibility in the complaints process - Working with local community organisations to gather insight and feedback into services and develop improvement work - Equality monitoring on surveys	2	Experience of Care team
		- Experience of care Group to review patient feedback to services and establish action plans and share learnings		Trust wide
		- Local services have dedicated patient engagement forums e.g. Maternity Voices Partnership/YPAG		Women's, Children's
Domain 1: Commissioned or provided services overall rating			8	

EDS Action Plan	
EDS Lead	**Year(s) active**
Ilisha Purcell, Equality, Diversity and Inclusion Manager (patients)	2025-2029
EDS Sponsor	**Authorisation date**
Rachel Carter, Director of Quality and Safety, and Ian Joy, Executive Director of Nursing	

Domain	Outcome	Objective	Action	Completion date
Domain 1: Commissioned or provided services	1A: Patients (service users) have required levels of access to the service	Support patients who experience language barriers to access services	- Pilot CardMedic in Maternity services - Language empire - staff training - Promotion of English Unlocked online training - Promotion of Deaflink online training	April 2026

			- Continue partnership working with Deaflink and regional trusts on supporting BSL users and Health Navigator Pilot	Funding secured until April 2027
	1A: Patients (service users) have required levels of access to the service	Support the positive experience of unpaid and paid carers	- Continue partnership working with Newcastle Carers - Pilot Triangle of Care in preassessment - Update protocol and policy for paid carers - Explore the use of carer lanyards and carer identification cards	June 2026

	1A: Patients (service users) have required levels of access to the service	Improve access to services for patients with reasonable adjustments	- Analyse feedback and implement any improvements identified by the Quality Checker reports in Emergency Department, Paediatric ED, Antenatal, Urology – ward 1 and 2, Pharmacy, Outpatients (RVI), Radiology (RVI), Plaster room, Endoscopy - Sighted guide training which has been co-produced by a patient with lived experience and the charity Guide Dogs. Three sessions will be delivered which are open for all staff members and a bespoke Ophthalmology session - Explore the opportunity of creating communication support boxes for patients in collaboration with Northumbria	August 2026

			- Support the health inequalities strategy aim to identify and implement Reasonable Adjustments for 100% of patients with additional needs	December 2028

		Support patients experiencing health inequalities to access services	- Support the Health Inequalities strategy objective to reduce DNAs/ WNBs by 3% among patients from IMD 1 and 2, and ethnically minoritised persons - Understand the experience of children waiting for dentist appointments and adults on orthopaedic waiting lists - Support the Health Inequalities strategy objective that by December 2026*, 10% of patient letters will meet the Accessible Information Standard, and a reading age of 9 years. (* 100% by December 2029)	December 2027 December 2026

	1B: Individual patients (service users) health needs are met	Support staff caring for patients and visitors from protected characteristic groups	- Develop and implement the email correspondence policy - Conduct an audit of the EPR to better understand process of flags for patients who require reasonable adjustments under the Accessible Information Standard - Work with medical records to explore how to improve the administrative process for patients who want to update their gender and pronouns on their medical records - Positive partnership working with chaplaincy team and local community organisations to improve the experience of patients from a global majority background and religious groups	December 2026

	1C: When patients (service users) use the service, they are free from harm	Develop improvement ideas in response to feedback from diverse backgrounds	- Support ongoing work within maternity to improve experience for global majority patients and those who do not speak English - Explore the feedback received about disparity in receiving of pain medication - Continue to promote the HIV stigma reporting portal and the HIV Confident online staff training - Review interpretation resources, training, and staff awareness, particularly in relation to unplanned admissions	December 2026

			- Support the Health Inequalities Strategy objective to measure clinical outcomes, such as safety incidents, among 100 % ethnically minoritised persons; people with learning or physical disabilities; and autistic people; and co-design quality and safety improvement programmes with affected patient groups	December 2028
		Involve and engage Patient Safety Partners in line with the requirements of the Patient Safety Incident Reporting Framework	- Provide training and ongoing support for newly recruited Patient Safety Partners - Identify opportunities within clinical boards for Patient Safety Partners to be involved	April 2026 Ongoing

	1D: Patients (service users) report positive experiences of the service	Obtain more feedback from a diverse range of patients to ensure feedback is representative of the communities that we support	- Large scale measurement of patient experience broken down by protected characteristic - Analyse compliments received by protected characteristics and celebrate success through case stories	April 2026