



Equality and Diversity Strategy 2017 - 2020

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NHS Ashford Clinical Commissioning Group and
NHS Canterbury and Coastal Clinical Commissioning Group

Forward

NHS Ashford and NHS Canterbury and Coastal Clinical Commissioning Groups (the CCG) are pleased to launch our second Equality and Diversity Strategy for our CCG. This document sets out our commitment to taking equality, diversity and Human Rights into account in everything we do whether that's commissioning services, employing people, developing policies, communicating with or engaging local people in our work.

This strategy and action plan (see appendix five) will help the CCG to tackle current health inequalities, promote equality and fairness and establish a culture of inclusiveness that will enable health services in the CCG to meet the needs of all.

We will monitor our progress and report regularly and openly on the developments in this Strategy.

We acknowledge and accept our roles in supporting the strategy and will play our full part in making its aims a reality.



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1. Introduction

The CCG is committed to equality of opportunity for all people and to eliminating unlawful discrimination. We recognise and value the diversity of the local community and believe that equality is central to the commissioning of modern, high quality health services.

This strategy sets out our overall approach to equality, diversity and human rights as both an employer and a health commissioner. This includes how the CCG will:

- Develop a governance structure for equality and diversity;
- Ensure all staff have the necessary skills to commission services in line with the Equality Act 2010 and the associated Public Sector Equality Duty
- Complete Equality Analysis and Assessment of Impact to identify potential risks to the outcomes for patients as part of decision making and commissioning processes
- Ensure that communications and engagement activities effectively reach people from all protected groups, including carers and marginalised communities
- Work with statutory and voluntary sector partners on equality issues and to tackle health inequalities
- Ensure Human Resources policies are fair and transparent, and work in partnership with staff to improve working lives
- Monitor complaints, comments and compliments by protected characteristic
- Make sure commissioned providers, including NHS NEL Commissioning Support Unit (NEL CSU), are complying with the Equality Act 2010, including the carrying out of access audits to ensure services are accessible.

The approaches set out here relate to all of the 'protected characteristics' of equality as defined by the Equality Act 2010 (Appendix 1). These are:

- Age
- Disability
- Gender reassignment (transgender)
- Marriage and civil partnership
- Pregnancy and maternity
- Race
- Religion or belief
- Sex (gender)
- Sexual orientation

The practical effect of the Act is the CCG is legally required to consider how its policies, plans, procedures, projects and decisions will affect people (patients, carers, communities and employees) with the protected characteristics.

2. The CCG Vision, Mission and Values

The vision and mission statement set the direction for the CCG

The CCG's vision is the aspiration for the organisation:

“The highest quality health and well-being for our communities”

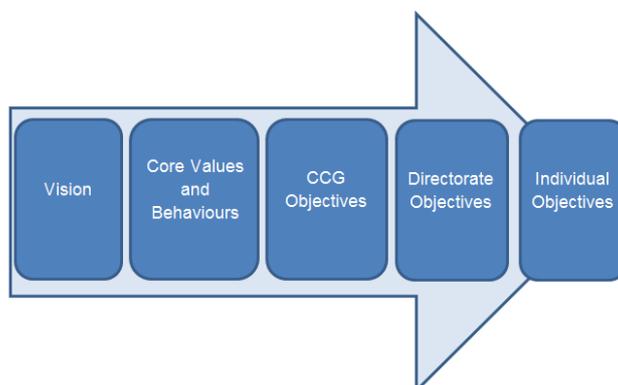
The CCG's mission statement guides the actions of the organisation. What is done, where, with whom and why:

“To work collaboratively with partner organisations, locally led by clinicians, to commission and monitor the highest quality cost effective and compassionate care as close to home for patients as possible to deliver the best quality outcomes for all”

The CCG's values provide the principles to undertake that work:

“Caring, Population Focussed, Reliable, Respect and Transparency”

This is the golden thread from the vision at an organisational level to behaviours at an individual level



Further information about the work of the CCG is available on their website (please see links below). This includes details of the health inequalities in Kent that have informed our commissioning priorities.

NHS Ashford CCG: <http://www.ashfordccg.nhs.uk/#>

NHS Canterbury and Coastal CCG: <http://www.canterburycoastalccg.nhs.uk/#>

3. Meeting Our Duties

We are making a clear commitment from the outset of the CCGs establishment to valuing diversity and achieving equality through the publication of this strategy and developing an associated action plan. We believe that any modern organisation has to reflect all the communities and people it serves, and tackle all forms of discrimination. We need to reduce health inequality and ensure there are no barriers to health and wellbeing.

We recognise our:

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- Legal duties around equality and human rights - not simply to be compliant, but to promote cultural change. This includes our commissioning and procurement processes which must ensure health providers also meet the legal requirements.
- The moral case for equality and diversity - health inequalities are unacceptable and must be tackled. Society cannot improve while people are treated unfairly because of their race, gender, sexual orientation, age, religion or belief, or because they are disabled.
- The business case for any organisation to seek to excel in its equality policies and practice is more likely to attract people from a wider pool of talent if it is explicit in its commitment to diversity and is demonstrating this through how it operates. Staff and volunteers are more likely to perform well, feel motivated, committed and therefore be retained if they feel valued and respected in their working environment.

3.1 The Equality Act 2010

The general equality duty (Section 149 of the Equality Act 2010) states that public authorities must, in the exercise of their functions, have due regard to the need to:

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

These are the three aims of the general equality duty. To comply with the general duty, a public authority needs to have due regard to all three of these aims in relation to the 9 protected characteristics (Appendix 1). Health bodies are covered by the general equality duty in relation to all their functions.

The CCG have developed this Equality and Diversity Strategy to ensure compliance with the Act as we work towards establishment as a commissioning organisation.

In addition we must comply with the specific duties of the Public Sector Equality Duty (Appendix 2) as set out in the Equality Act 2010 (Specific Duties) Regulations 2011:

- To publish equalities information to demonstrate its compliance with the general equality duty at least annually
- To prepare and publish one or more equality objectives that it needs to achieve to further any of the aims of the general equality duty. This must be done every four years.

3.2 The Human Rights Act 1998

This confers a range of rights (Appendix 3) which have implications for the way the CCG commissions services and manage our workforce. In practice this means that we must:

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- Act compatibly with the rights contained in the Human Rights Act in everything we do;
- Recognise that anyone who is a 'victim' under the Human Rights Act can bring a claim against the CCG (in a UK court, tribunal, hearing or complaints procedure);
- And wherever possible existing laws that the CCG as a public body deals with, must be interpreted and applied in a way that fits with the rights in the Human Rights Act 1998.

The Department of Health suggests that a good way to understand human rights is to see them as a vehicle for making fairness, respect, equality, dignity and autonomy (the FREDA principles) central to everyone's lived experience as human beings.

We recognise human rights underpin the aims of the Equality Act 2010, and lay at the heart of the NHS Constitution. As an organisation we have stated our commitment to integrating these principles in our policy making, as well as the day to day running of the CCG.

3.3 The NHS Equality Delivery System

The NHS Equality Delivery System (or EDS) is designed to help both current and emerging NHS commissioners and providers to deliver better outcomes for patients and communities and better working environments for staff. The EDS is a framework to review performance on equality and diversity, and to identify future priorities and actions. It is designed to be used in partnership with patients, the public, staff and staff-side organisations, and offers local and national reporting and accountability mechanisms.

At the heart of the EDS is a set of 18 outcomes grouped into four goals (Appendix 4). These outcomes focus on the issues of most concern to patients, carers, communities, NHS staff and Boards. It is against these outcomes that performance is analysed, graded and action determined. The four EDS goals are:

- Better health outcomes for all
- Improved patient access and experience
- Empowered, engaged and included staff
- Inclusive leadership at all levels.

We have decided to adopt the NHS Equality Delivery System because:

- This builds on the EDS work completed during 2011/12 by our predecessor NHS Kent and Medway and NHS providers operating across Kent and Medway;
- Meaningful engagement with patients, carers and communities from all protected groups is an underpinning principle of the NHS Equality Delivery System, and as such, adopting the EDS strengthens our evidence for authorisation;

- The EDS helps us to identify local needs, particularly unmet needs of seldom heard communities;
- The EDS helps us to meet the requirements of the Equality Act and the specific public sector equality duties, and to embed equalities in the way that we work.

4. Leadership and Governance

The CCG is putting in place proper constitutional and governance arrangements with the skills, competencies and capacity to deliver all our duties and responsibilities, including the delivery of statutory functions like equality and diversity.

4.1 What we have already done:

- Identified the Head of Corporate Services (on behalf of the Accountable Officer) as Lead for Equality and Diversity.
- Identified the lay member (Patient and Public Engagement) on our Governing Body as our lay person lead for equality and diversity as set out in our Constitution
- Arranged equality and diversity training for Governing Body so that they understand the implications of the Equality Act 2010 and the associated Public Sector Equality Duty.
- Ensuring commissioning support services to the CCG meet the equality duties required of us as a public sector organisation.
- Published our Equality and Diversity Strategy and Action Plan on our website.
- Adopted the NHS Equality Delivery System as the framework to help us improve outcomes for patient's year on year, and comply with the Public Sector Equality Duty.

4.2 What we plan to do:

- Publish annual equality data and information to meet the requirements of the specific Public Sector Equality Duty
- Publish one or more equality objectives to meet the requirements of the specific Public Sector Equality Duty
- Report on performance of the CCG against our equality objectives and NHS Equality Delivery System (EDS) grades at least annually
- Put in place a robust equality analysis and assessment of impact process which is carried out as part of the decision making process from the beginning and enables the CCG to have a full understanding of the equality risks to patients of any decisions they make.

5. Equality Analysis

Equality analysis or equality impact assessment is designed to allow public authorities like CCGs to identify the impact or effect (either negative or positive) of their policies, procedures and functions on various sections of the population, paying particular regard to the needs of protected groups and minorities. Where negative impacts are identified the organisation then needs to take steps to deal with this. Statutory authorities are required to carry out equality analysis under the Equality Act 2010.

All functions or activities of the CCG are relevant at some level to the general or specific duties set out in the equality legislation. Therefore all strategies, policies, action plans and projects we undertake must be assessed for equality impact. This includes Human Resources policies and procedures.

5.1 What we have already done:

- Adopted and adapted the Equality Impact Analysis template of NHS Kent and Medway, the CCGs predecessor organisation.
- Our CCG is committed to increasing the number and quality of equality analyses completed across the organisation. In response the CCG has developed an equality analysis template and guidance for members and staff.

5.2 What we plan to do:

- Arrange training for CCG staff with responsibility for completion of equality analysis.
- Ensure that North East and London Commissioning Support Unit (NEL CSU) support our Equality and Diversity Strategy so that the CCG can be assured that commissioning work undertaken on their behalf complies with equalities legislation.
- Work with the NEL CSU to develop a data resource to underpin and facilitate the completion of equality analysis.

6. Communications and Engagement

It is essential that the CCG work with local people, staff and partner organisations to ensure they have a voice which will influence the planning and commissioning of local health services. Ensuring that minority groups and the 'seldom heard' have their say is also important.

The CCG understands that high quality, accessible communications and engagement activity is a key domain for authorisation.

6.1 What we have already done:

- Completed an equality analysis of our Communications and Engagement

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Strategy to identify the provision of reasonable adjustments we will need to employ in communicating and engaging effectively, and ensure this work complies with the Equality Act 2010.

- Working to establish, develop and maintain dialogue with communities through grass-root networks, patient, partnerships, and the voluntary sector.

6.2 What we plan to do:

- The CCG have a duty to ensure that we can communicate information to our patients, service users and communities in a way that is appropriate to their particular requirements – for example large print and Braille information is available on request or documents are translated into different languages as required. We intend to have this service in place prior to establishment and will publicise that it is available.
- The CCG will work towards implementing actions identified in our Communications and Engagement Strategy and undertake Equality Analysis.
- Having adopted the NHS Equality Delivery System we will engage protected groups each year in order to grade the CCG against the NHS EDS goals and outcomes.

7. Workforce and Training

The CCG are committed to working in line with current employment legislation, including the Equality Act 2010. This means the CCG aims to provide a working environment free from discrimination, victimisation, and harassment, whether on an individual or institutional basis on the grounds of age, disability, gender reassignment, marriage and civil partnerships, pregnancy and maternity, race, religion or belief, sex (gender), sexual orientation, or any other grounds that infringe on Human Rights.

The CCG also aims to recruit a representative workforce from all sections of the community in order to commission healthcare services that respect and respond to the diverse needs of the people of Kent and Medway.

7.1 What we have already done:

- The NHS Kent and Medway HR Framework for Transition which includes recruitment to clinical commissioning groups includes an equality impact assessment.
- The CCG as an employer has built in to all employees' job descriptions Equality and Diversity.
- Adopted the NHS Equality Delivery System as the framework to help us achieve year on year improvement in working lives for employees, and to comply with the workforce elements of the Public Sector Equality Duty
- Committed to ensure our employees undertake statutory and mandatory training, including equality and diversity (every three years as a minimum).

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- Committed to collect and analyse data and information to inform us about the impact of its employment policies and decisions
- Having adopted the NHS Equality Delivery System, the CCG will engage staff from protected groups and staff side organisations in the process of grading the CCG against the NHS EDS goals and outcomes each year

7.2 What the CCG is planning to do:

- Arrange training in equality analysis for relevant staff and members as part of our commitment to increase the number and quality of equality analyses undertaken.
- Ensure that equality analysis has been carried out on all new human resources policies and procedures, and assess the impact on all nine protected characteristics as existing employment policies come up for review

8. Commissioning and Procurement

The CCG are required by law to make sure that when we buy from another organisation to help us provide health services, that organisation will comply with equality legislation. Therefore we aim to ensure all contracts and Service Level Agreements contain clauses and performance measures around duties and responsibilities under equality and diversity legislation (including access to services and information in appropriate formats).

The robust collection of quantitative and qualitative data is central to the CCG's ability to commission high quality health services. Performance data should be disaggregated by the nine protected characteristics wherever possible, in order for us to monitor the impact of our commissioned services on the corresponding population groups.

8.1 What we have already done:

- Adopted the NHS Equality Delivery System as the framework to help the CCG gather and analyse equalities information against patient and workforce related goals and outcomes.
- The CCG are currently able to disaggregate performance data by age, sex (gender), race, some disabilities, and pregnancy and maternity.

8.2 What we plan to do:

- Undertaking an equality analysis of our Commissioning Plan.
- Write specific equality and diversity clauses into provider contracts.
- Work to improve the use of existing performance data disaggregated by age, sex, race, disability and pregnancy and maternity.
- Explore the potential for disaggregation of performance data by gender reassignment, religion or belief, marriage and civil partnership, and sexual orientation

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9. Complaints, Concerns and Compliments

Complaints, concerns and compliments are an important measure of people's satisfaction with NHS services and help us to make sure there is continuing improvement in services.

Our aim is to respond to any complaints or concerns as speedily, effectively, and fairly as possible through both formal and informal processes, within a clear framework and timescales. Complaints are also an important source of information for monitoring impact on equality and can support the identification of potentially unlawful discrimination and taking action to promote equality.

We are committed to ensuring that minority communities know how to raise concerns, and that our processes are culturally sensitive and accessible to everyone in overall and practical terms.

9.1 What we have already done:

- Arranged a complaints and concerns service through KMCS.

9.2 What we plan to do:

- At least twice a year, receive a report on complaints, concerns and compliments. Reporting will include equalities monitoring of service access, and exploration of any equality related themes identified from complaints and concerns received, and the actions taken to prevent issues reoccurring.

Appendix 1 - The Protected Characteristics

The Public Sector Equality Duty 2010 (protected characteristics)	
1 Age	By being of a particular age/ within a range of ages.
2 Disability	A physical or mental impairment which has a substantial and long-term adverse effect on day to day activities. This includes people with mental health problems, learning disabilities and long-term or serious illnesses such as heart disease, cancer or HIV/ AIDS.
3 Gender (sex)	Being a woman or a man.
4 Gender reassignment (transgender)	A person has the protected characteristic of gender reassignment if the person is proposing to undergo, is undergoing or has undergone a process (or part of a process) for the purpose of reassigning their sex by changing physiological or other attributes of sex.
5 Pregnancy and maternity	If a woman is treated unfavourably because of her pregnancy, pregnancy related illness or related to maternity leave.
6 Race	People who have or share characteristics of colour, nationality, or ethnic or national origin can be described as belonging to a particular racial group.
7 Religion or belief or lack of belief	The full diversity of religious and belief affiliations in the United Kingdom.
8 Sexual orientation	A person's sexual preference towards people of the same sex, opposite sex or both.
9 Marriage and Civil Partnership	This is relevant in relation to employment and vocational training; the CCG will need to ensure that it considers this protected group in relation to employment.

Appendix 2 - Equality Act 2010: Section 149 General Duty

Equality Act 2010 Section 149 General Duty	
General Equality Duty	Due Regard
1 Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010	Conduct prohibited by the Act. To comply with the general duty, a public authority needs to have due regard to all three of the aims.
2 Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it	The Equality Act explains that the aim of advancing equality of opportunity involves, in particular, having due regard to the need to: Remove or minimise disadvantages suffered by people due to their protected characteristics. Take steps to meet the needs of people with certain protected characteristics where these are different from the needs of other people. Encourage people with certain protected characteristics to participate in public life or in other activities where their participation is disproportionately low Meeting different needs includes (among other things) taking steps to take account of disabled people's disabilities – for example making reasonable adjustments.
3 Foster good relations between persons who share a relevant protected characteristic and persons who do not share it	Fostering good relations is described as tackling prejudice and promoting understanding between people from different groups.
Note: Organisations that are not public authorities are also required to have due regard to the needs listed above whenever they carry out public functions. This could include, for example, a private company or voluntary organisation with a contract to provide certain public services. This means that as commissioner the CCG will need to assure that an organisation they intend to commission can comply with the general equality duty.	
Specific Equality Duties Created by secondary legislation – The Equality Act 2010 (Specific Duties) Regulations 2011	
Publication of equalities information Each public authority is required to publish equalities information to demonstrate its compliance with the general equality duty. This needs to be no later than 31 January 2012, and at least annually after that, from the first date of publication. This information must include, in particular, information relating to people who share a protected characteristic who are: Its employees People affected by its policies and practices. Public authorities with fewer than 150 employees are exempt from the requirement to publish information on their employees. This is likely to be the case for local CCGs.	

Appendix 3 – Human Rights Act 1998

The Human Rights Act 1998

The Human Rights Act came fully into force on 2 October 2000.

It gives further effect in the UK to rights contained in the European Convention of Human Rights.

The Act:

Makes it unlawful for a public authority to breach Convention rights, unless an Act of Parliament meant it could not have acted differently

Means that cases can be dealt with in a UK court or tribunal, and

Says that all UK legislation must be given a meaning that fits with the Convention rights, if that is possible.

The 15 rights contained in the Human Rights Act are:

- The right to life*
- The right not to be tortured or treated in an inhuman or degrading way*
- The right to be free from slavery or forced labour
- The right to liberty and security*
- The right to a fair trial*
- The right to no punishment without law
- The right to respect for private and family life, home and correspondence*
- The right to freedom of thought, conscience and religion
- The right to freedom of expression
- The right to freedom of assembly and association
- The right to marry and found a family
- The right not to be discriminated against in relation to the enjoyment of any of the rights contained in the European Convention*
- The right to peaceful enjoyment of possessions
- The right to education
- The right to free elections

*Particularly relevant to work of NHS organisations

Appendix 4 – NHS Equality Delivery System: Goals and Outcomes

Goal	Narrative	Outcome
1. Better health outcomes for all	The NHS should achieve improvements in patient health, public health and patient safety for all, based on comprehensive evidence of needs and results	1.1 Services are commissioned, designed and procured to meet the health needs of local communities, promote well-being, and reduce health inequalities
		1.2 Individual patients' health needs are assessed, and resulting services provided, in appropriate and effective ways
		1.3 Changes across services for individual patients are discussed with them, and transitions are made smoothly
		1.4 The safety of patients is prioritised and assured. In particular, patients are free from abuse, harassment, bullying, violence from other patients and staff, with redress being open and fair to all
		1.5 Public health, vaccination and screening programmes reach and benefit all local communities and groups
2. Improved patient access and experience	The NHS should improve accessibility and information, and deliver the right services that are targeted, useful, useable and used in order to improve patient experience	2.1 Patients, carers and communities can readily access services, and should not be denied access on unreasonable grounds
		2.2 Patients are informed and supported to be as involved as they wish to be in their diagnoses and decisions about their care, and to exercise choice about treatments and places of treatment
		2.3 Patients and carers report positive experiences of their treatment and care outcomes and of being listened to and respected and of how their privacy and dignity is prioritised
		2.4 Patients' and carers' complaints about services, and subsequent claims for redress, should be handled respectfully and efficiently
3. Empowered, engaged and well-supported staff	The NHS should increase the diversity and quality of the working lives of the paid and non-paid workforce, supporting all staff to better respond to patients' and communities' needs	3.1 Recruitment and selection processes are fair, inclusive and transparent so that the workforce becomes as diverse as it can be within all occupations and grades
		3.2 Levels of pay and related terms and conditions are fairly determined for all posts, with staff doing equal work and work rated as of equal value being entitled to equal pay
		3.3 Through support, training, personal development and performance appraisal, staff are confident and competent to do their work, so that services are commissioned or provided appropriately
		3.4 Staff are free from abuse, harassment, bullying, violence from both patients and their relatives and colleagues, with redress being open and fair to all
		3.5 Flexible working options are made available to all staff, consistent with the needs of the service, and the way that people lead their lives. (Flexible working may be a reasonable adjustment for disabled members of staff or carers.)
		3.6 The workforce is supported to remain healthy, with a focus on addressing major health and lifestyle issues that affect individual staff and the wider population
4. Inclusive leadership at all levels	NHS organisations should ensure that equality is everyone's business, and everyone is expected to take an active part, supported by the work of specialist equality leaders and champions	4.1 Boards and senior leaders conduct and plan their business so that equality is advanced, and good relations fostered, within their organisations and beyond
		4.2 Middle managers and other line managers support and motivate their staff to work in culturally competent ways within a work environment free from discrimination
		4.3 The organisation uses the "Competency Framework for Equality and Diversity Leadership" to recruit, develop and support strategic leaders to advance equality outcomes

Appendix 5 - Action Plan 2017/2020

Category	Action	Target Date
1. Leadership and Governance	<p>Publish annual equality data and information to meet the requirements of the specific Public Sector Equality Duty</p> <p>Publish one or more equality objectives to meet the requirements of the specific Public Sector Equality Duty</p> <p>Report on performance of the CCG against our equality objectives and NHS Equality Delivery System (EDS) grades at least annually</p> <p>Put in place a robust equality analysis and assessment of impact process which is carried out as part of the decision making process from the beginning and enables the CCG to have a full understanding of the equality risks to patients of any decisions they make.</p>	Annually Ongoing
2. Equality Analysis	<p>Introduce new templates for undertaking Equality Analysis</p> <p>Arrange training for CCG managers with responsibility for completion of equality analysis.</p> <p>Ensure that NEL CSU supports our Equality and Diversity Strategy so that the CCG can be assured that commissioning work undertaken on their behalf complies with equalities legislation</p> <p>Work with the NEL CSU to develop a data resource to underpin and facilitate the completion of equality analysis.</p>	<p>When Required</p> <p>On-going</p>
3. Communication and Engagement	<p>We will ensure that we can communicate information to our patients, service users and communities in a way that is appropriate to their particular requirements – for example large print and Braille information is available on request or documents are translated into different languages as required.</p> <p>We will work towards implementing actions identified in our Communications and Engagement Strategy as part of ensuring our compliance with the Equality Act 2010.</p> <p>Having adopted the NHS Equality Delivery System we will engage protected groups each year in order to grade the CCG against the NHS EDS goals and outcomes.</p>	<p>When Required</p> <p>On-going</p>
4. Workforce and Training	<p>Arrange training in equality analysis for relevant staff as part of our commitment to increase the number and quality of equality analyses undertaken.</p> <p>Ensure all new human resources policies and procedures, and assess the impact on all nine protected characteristics as existing employment policies come up for review.</p> <p>Having adopted the NHS Equality Delivery System, the CCG will engage staff from protected groups and staff side organisations in the process of grading the CCG against the NHS EDS goals and outcomes each year.</p> <p>The CCG will implement the use of the NHS Competency Framework for Equality and Diversity Leadership.</p>	<p>Online training required every 3 years</p> <p>On-going</p> <p>On-going</p>
5. Commissioning and Procurement	<p>Write specific equality and diversity clauses into provider contracts</p> <p>Work to improve the use of existing performance data disaggregated by age, sex, race, disability and pregnancy and maternity</p> <p>Explore the potential for disaggregation of performance data by gender reassignment, religion or belief, marriage and civil partnership, and sexual orientation</p>	<p>When Required</p> <p>On-going</p>
6. Complaints, concerns and Compliments	<p>Receive quarterly report on complaints, concerns and compliments.</p> <p>Reporting will include equalities monitoring of service access, and exploration of any equality related themes identified from complaints and concerns received, and the actions taken to prevent issues reoccurring.</p>	<p>On-going</p> <p>On-going</p>

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