NHS Equality Delivery System
Domain 3 DRAFT Self Assessed Grades 2025

Domain	Outcome	Evidence	Rating	Owner (Dept/Lead)
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	• Executive Board members have EDI goals in place. These are monitored via supervisions and appraisals. • All Staff Broadcasts are planned, designed and led by Executives and feature regular EDI lived experience themes. • Board Committee structures have regular discussions about EDI workforce data through Belonging and Inclusion Plan updates and dashboards, WRES and WDES reports, Gender Pay Gap reports, staff network updates and reports. • Exec and Non Execs are sponsors of the Trusts Staff Networks. There are at least two for each staff network. • Staff Networks are members of the People and Culture Committee and the Strategic Staff EDI Partnership. • Executives and senior leaders are leading the implementation of the Patient and Carer Race Equality Framework. • All Board papers include a section on equality. • The Equality and Quality Impact Assessment is used for business case appraisal. • Health inequalities are discussed regularly within the Quality and Safety Committee structures a Health Equity Approach is being drafted. • Board members and senior leaders engage regularly in EDI related events, campaigns and celebrations. • Belonging and Inclusion commitments are embedded throughout the Trusts Strategy – Ambition to Action.	3	• Senior Leadership Team • Trust Board • People Matters Directorate • Corporate Governance • Staff Networks

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		• Senior leaders are leading on EDI and Health Equity priorities at place and across the system. • A Health Equity Sharepoint page has been established holding policy information, priorities, good practice case studies and learning resources. • The Trust Board and EDI Influencers have undertaken the Reducing health inequalities: A guide for NHS trust board members assessment. • The Strategic EDI Staff Partnership approved the Trust taking part in the Autistica Neurodiversity Employment Index to guide further work to be a neurodiversity friendly employer. • The 2024 CLEAR Conference organised by the Trust was themed around Health Equity. A wide range of different projects being led across the organisation were showcased to promote evidence based practice. CLEAR 2024 - BDCFT		
	3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed	• A Health Equity Approach has been drafted setting out the Trusts intentions aspirations around tackling health inequalities. • All board papers require authors to document the equality relevance and there is a section for risk management and mitigation. • Paper and policy templates are being reviewed to strengthen focus and capture on health equity priorities. • Actions relating to equality and health inequalities are captured within action logs and updated on in matters arising at the following meeting. • AAA+D reports are used to share information between committees, subgroups and with the Board.	2	• Trust Board • Senior Leadership Team • People Matters Directorate • Corporate Governance

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		• Equality and Quality Impact Assessments are completed for some projects and signed off at a senior level. • Equality impact assessment policy is in place and training has been rolled out in 2024 for services to learn and be supported to implement the policy in their service areas. EIA's are being completed and evidence saved as good practice. • All staff workplace assessments are in place to discuss health and wellbeing, risks and the role. These were formally BME Staff Risk Assessment established during the pandemic. Wellbeing checks are embedded into the supervision and huddle structures. • Systems have been established to monitor sexual safety incidents separately from all other incidents, these are being monitored monthly to identified themes and trends. A programme of work was undertaken with the signature of the Sexual Safety Charter to mitigate and minimise risks. • An organisational approach to racial and other types of discrimination from patient and the public to staff is in place with a policy, training, campaign and support plan.		
	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	• Systems are in place for regular analysis of data and the outcome descriptors for level 1. • The Trust uses the WRES, WDES, Gender Pay Gap, Ethnicity Pay Gap and Disability Pay Gap tools annually to identify performance and agreed priorities for improvement. • The Accessible Information Standard and Sexual Orientation Monitoring Standard are embedded into the Belonging and Inclusion Plan activity and progress is monitored at the Trust Board via the relevant committee.	1	

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		• Demographic employment data is reported and analysed every 6 months across 7 protected groups and used to inform practice and priorities. • Key performance indicators have been identified and are reported monthly with quarterly reports being received around Belonging and Inclusion at the People and Culture Committee. • A Belonging and Inclusion Dashboard is reported on alongside subject matters focus and staff stories at the People and Culture Committee. • The Patient and Carer Race Equality Framework is being implemented with a direct reporting route for governance and accountability to the Quality and Safety Committee. • The EDS22 is being utilised to assess performance in 2024. The EDS2 has been used prior to this over the last 10 years. • The organisation is reflective of the whole workforce in relation to ethnicity in bands 8a and above. Work is underway to increase representation at 8c and above now. • A reciprocal mentoring programme has been in operation for three cohorts. The programme is aimed at ECD staff in and pairs staff in 8a and above with staff in bands 5 – 7 for mutual learning and development. The programme continues in 2025 with a graduate community being launched and a broadening of the eligibility criteria to engage all protected groups in the workforce. • An inclusive recruitment project is underway to increase the likelihood scores of minoritised groups being appointed after shortlisting.		
Domain 3: Inclusive leadership overall rating			6	EDI

Third-party involvement in Domain 3 rating and review	
Trade Union Rep(s): Staff Side Partnership Meeting and Questionnaire 28.11.24. Staff Side representatives also engaged at the Strategic Staff EDI Partnership.	**Independent Evaluator(s)/Peer Reviewer(s):** West Yorkshire Mental Health Collaborative + Sheffield Health and Social Care peer review 21.10.24.

Further evidence is available here SharePoint and Equality and diversity reports - Bradford District Care NHS Foundation Trust