

Classification: Official

Publication approval reference:



**York and Scarborough
Teaching Hospitals**
NHS Foundation Trust

Appendix 1

NHS Equality Delivery System 2022

EDS Reporting Template 2025-2026

**York and Scarborough Teaching Hospitals Foundation
Trust**

Version 1, 15 August 2022

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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		York and Scarborough Teaching Hospitals NHS Foundation Trust	Organisation Board Sponsor/Lead	
			Director of Workforce and Organisational Development and Interim Chief Nurse	
Name of Integrated Care System		Humber and North Yorkshire		
EDS Lead	Head of Equality, Diversity and Inclusion	At what level has this been completed?		
		*List organisations		
EDS engagement date(s)	D1, 3 September, 7 & 4 December 2025 D2, 10 December 2025 D3, 23 January 2026	Individual organisation	York and Scarborough Teaching Hospitals NHS Foundation Trust D1 & D2	
		Partnership* (two or more organisations)	D3: Harrogate and District Teaching Hospitals D1: Patients, Healthwatch York, Healthwatch North Yorkshire, local VCSE sector.	
		Integrated Care System-wide*	D1: Local VCSE health and wellbeing sector.	
Date completed	January 2026	Month and year published	April 2026	
Date authorised		Revision date	February 2027	

Completed actions from previous year

Action/activity

Related equality objectives

Domain 1

Sexual Health and HIV Service:

- New patient record system, allowing patients to include their demographical information.
- Friends and family tests now capture demographical information.
- Launched a feedback initiative.
- Service continues to incorporate patient voice in service design and delivery.
- Employed a dedicated outreach worker.
- Partnership and outreach working.
- Hold incident reviews and collate staff feedback on needed changes.
- The new website launched on 1 September 2025.
- Secured executive support to launch HIV Confident within the organisation

Ophthalmology:

- Friends and family tests include standardised demographic questions allowing for analyses between experiences.
- Promotion of transport options via the Trust's website.
- Display public boards showing actions taken based on patient feedback.
- Mandatory Oliver McGowan.
- Information session on assistance animals.
- Reasonable adjustment requests are recorded within the new patient records system.

Endoscopy:

- Friends and family tests include standardised demographic questions.
- Information on patient transport options are promoted on the Trust website.
- Staff have been made aware of the 'No Excuse for Abuse' campaign.

The main aspects of the EDS framework are now included in the Terms of Reference for Care Group Patient Experience Groups, making EDS a part of everyday practice.

Public Sector Equality Duty (PSED)

Ensure the Trust's systems can capture equality monitoring information in order to provide insight to improve access, experience and outcomes of our patients.

Develop a plan that encompasses the overall Trust's Inequality Strategy to address and mitigate health disparities within the Trust's catchment area. Implement the plan through Task and Finish groups.

<p>Domain 2 – Improvement Plan 2024-2025 – completed actions</p> <ul style="list-style-type: none"> • Staff communication through a variety of sources. Wellbeing Booklet available on Staffroom and promoted through internal communications. • Line Manager Toolkit was developed and commenced roll out in 2024, with Line Manager Development training open to all managers across the Trust. • Ward visits are ongoing, with a 66% increase in the number of visits from 2024 to 2025. • No Excuse for Abuse campaign – Campaign ongoing and anonymous reporting tool launched in March 2025. • Sexual Misconduct Policy launched in March 2025, and training is available to all staff. • Implemented the Civility, Respect & Resolution Policy. • Implemented the Managing Violence and Aggression Policy. • Implemented the Conduct and Disciplinary Policy. • Violence Reduction Training launched on Learning Hub. • New Conduct and Disciplinary Policy launched in January 2025. • The continuation of Our Voice, Our Future, a 2-year continuous improvement programme. 	<p>Ensure all areas of EDI compliance are met and action plans are implemented to improve experience. NHSE EDI Improvement Plan. EDS 2022, Workforce Race and Disability Standards, Accessible Information Standard, Sexual Orientation Monitoring Standard, Gender Pay Gap.</p> <p>Develop a plan that encompasses the overall Trust Inequality Strategy to address and mitigate health disparities within the Trust's catchment area. Implement the plan through Task and Finish groups.</p>
<p>Domain 3 – Improvement Plan 2024-2025 – completed actions</p> <ul style="list-style-type: none"> • Executive Director Staff Network Sponsors to use their position as a network sponsor to question and challenge reports and discussions at Committee and Board meetings. • Communications Team to create an annual communication timetable plan. • Upon analysis of the 2025 WRES and WDES data, track and report on the progress of the top three priority metrics. • Gender Pay Gap (GPG), continue to report on the year-on-year progress made. (Increase in GPG for 2025.) • Progress made in complying with the Accessible Information Standard reported through the Equality Objectives Annual Report and the assigned steering group. • Menopause support included in the Wellbeing report presented to the Executive Committee. • The Trust has menopause support built into the wellbeing offer, and this will continue to be highlighted, including being a focal point for one of the awareness weeks each year. • The Trust is an accredited menopause friendly employer, and there are training and guidance documents available to all staff. Under the new Employment Rights Bill, the Trust will also begin work on a Menopause Action Plan. This is voluntary from Spring 2026, and mandatory from Spring 2027. 	<p>Ensure all areas of EDI compliance are met and action plans are implemented to improve experience. NHSE EDI Improvement Plan, EDS (2022), Workforce Race and Disability Standards (WRES & WDES), Accessible Information Standard (AIS), Sexual Orientation Monitoring Standard and Gender Pay Gap (GPG).</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

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	<p>York Emergency Department:</p> <p>The Emergency Department addresses access barriers by providing appropriate personalised support, which covers equipment, the environment, communication and information. Actions have been highlighted to improve access for all, including those with protected characteristics and at risk of health inequalities.</p>	Developing 1	York ED/ Matron
		<p>Musculoskeletal Outpatients and community days:</p> <p>The MSK Outpatient Clinic offers multiple access routes: self-referral, GP/FCP, Occupational Health, internal and out-of-area referrals. Services are delivered across various sites. Community Appointment Days, partnerships with VCSEs, and locality-based rehabilitation enhance accessibility. Barriers addressed include geography, language, and social factors. The service is committed to EDI principles, developing accessible websites, easy-read materials, and responding to patient feedback to address access barriers.</p>	Achieving 2	Associate Chief AHP
		<p>Scarborough Community Children’s Speech and Language Therapy:</p> <p>The service has transformed access by replacing paper referrals with a helpline triage system. Clinics are held in community settings. Telephone reminders and targeted support for areas of deprivation will improve attendance and inclusivity. Interpretation is provided, and access needs are recorded at first contact. The service actively identifies and addresses barriers, ensuring tailored support for disadvantaged groups and those with protected characteristics. Patient feedback is regularly sought and acted upon.</p>	Developing 1	Children's Therapy Team Manager

	<p>1B: Individual patients (service users) health needs are met</p>	<p>York Emergency Department:</p> <p>The department uses a variety of Reasonable Adjustment Alerts and personal care plans. Partnership working with Learning Disability and Autism Services, Mental Health, and Safeguarding teams ensures holistic support. There are ongoing efforts to personalise care for those at higher risk.</p> <p>Musculoskeletal Outpatients and community days:</p> <p>The MSK team collaborates with internal and external partners to meet complex health needs. Initiatives include recruiting Community MSK Champions, trialling non-attendance SOPs, and re-establishing community appointment days. The service adopts a health coaching approach, personalising care and signposting to relevant services, with continuous feedback informing improvements.</p> <p>Scarborough Speech and Language Therapy, Community</p> <p>Clinical leads have completed insights training and health inequalities analyses, informing a service review to restructure care around individual needs. The team partners with schools, nurseries, local councils, families, and the voluntary sector to reach seldom-heard groups. Care plans are personalised, and interventions are tailored to each child's interests and circumstances. Feedback highlights the team's responsiveness and adaptability, with staff providing advice for home and school settings. The service supports EHCPs and uses social prescribing, ensuring that those at higher risk due to protected characteristics receive care that works for them.</p>	<p>Developing 1</p> <p>Achieving 2</p> <p>Achieving 2</p>	<p>York ED/ Matron</p> <p>Associate Chief AHP</p> <p>Children's Therapy Team Manager</p>
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1D: Patients (service users) report positive experiences of the service	<p>York Emergency Department:</p> <p>Patient experience data is collected and analysed. Action plans are developed in response to feedback. The department engages with patients and carers to improve services. The new Friends and Family Test shows a difference in the felt experience between those with a self-reported disability, and those without. The department is looking to work with VCSE partners to improve signposting to support services.</p>	Developing 1	York ED/ Matron
	<p>Musculoskeletal Outpatients and community days:</p> <p>Patient experience is measured through feedback from Community Appointment Days. The service actively engages with patients with protected characteristics, using feedback to inform action plans and improvements. Data-driven approaches ensure patient voices influence service delivery.</p>	Achieving 2	Associate Chief AHP
	<p>Scarborough Speech and Language Therapy, Community:</p> <p>Positive feedback regarding inclusive, accessible sessions and tailored support.</p> <p>“You said, we did” boards in clinics demonstrate that feedback is reviewed and acted upon. The service collaborates with VCSE organisations to ensure all voices are heard, and data-driven action plans are developed in response to feedback. Patient experience data informs ongoing improvements and innovative interventions.</p>	Excelling 3	Children's Therapy Team Manager
Domain 1: Commissioned or provided services overall rating		22	

Domain 1: Commissioned or provided services

Domain 2: Workforce health and well-being


Domain	Outcome	Evidence	Rating	Owner (Dept/Lead)
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	<p>Obesity and Diabetes</p> <ul style="list-style-type: none"> • Free access to the Step into Health course. • National week-long awareness events run throughout the year at all Trust sites, several of which target obesity. • Know your numbers week for BMI, weight, waist measurements, BP etc. • Nutrition and Hydration week. • Be Active/On your feet Britain week the importance of activity for physical health/weight management. • On-site gyms at Scarborough and Bridlington Hospitals. • Discounted gym memberships. • Cycle to work scheme. • Physical activity grant. • Online course – Learning Curve Group (Understanding Nutrition and Health). • Free 30-minute virtual health checks. • Virtual workshops, including Eat Well and Weight Management. • Be Active. • Free access to a library of 20-30-minute activity. 	Achieving 2	Head of Occupational Health and Wellbeing
		<p>Asthma and COPD</p> <ul style="list-style-type: none"> • The Occupational Health (OH) team check for occupational acquired asthma and perform lung function tests and complete Pre-Employment Health Questionnaires (PEHQ). • Advice provided during Management Referrals. • Tobacco Dependency Advisers support colleagues. • The OH team conduct Health Surveillance in areas where there are known respiratory sensitisers. • During Management Referrals, the OH team ask about individual health conditions, treatment etc, and advise their line manager about adjustments to role, to reduce the impact of their health condition in the workplace. 		

		<p>Mental health conditions</p> <ul style="list-style-type: none"> • The Trust currently has 116 trained Mental Health First Aiders. • Time 2 Talk Week (mental health focussed). • Mental Health Awareness Week. • Menopause Week (strong focus on women’s mental health) (October) – all Trust sites visited. • Men’s Health Week (strong focus on men’s mental health) (November) – all Trust sites visited. • Wellbeing apps promoted e.g. Headspace, Unmind, Stay Alive etc. • Menfulness (male mental health charity) promoted in the Trust. • Employee Assistance Programme (EAP), which now has an online platform, Ele, the digital wellbeing. platform, with thousands of video resources. • Staff Health and Wellbeing room openings - Bridlington Hospital July 2025, Scarborough Hospital December 2025 and York Hospital March 2026. • The Trust has a Staff Support Psychology Team. • The Staff Psychology Team also offer: <ul style="list-style-type: none"> ➤ 30-minute signposting and support sessions. ➤ Workshops and webinars e.g., sleep, burnout etc. ➤ Ward/department support and group sessions. ➤ Post Event Pathway. ➤ Schwartz Rounds. 		
	<p>2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source</p>	<p>In the 2024 Staff Survey results the Trust was below average in comparison to other Acute and Acute and Community Trusts in relation to staff reporting negative experiences.</p> <ul style="list-style-type: none"> • No Excuse for Abuse launched August 2024. • No Excuse for Abuse anonymous reporting tool available for colleagues. • Launch of new Civility, Respect and Resolution Policy. Refreshed December 2025 based on staff feedback. • Launch of Just and Learning Assessment to ensure a fair process for all, everyone is accountable for their own behaviours. <p>Signed up to the Sexual Safety Charter, Sexual Misconduct Policy launched, training available to all staff members. Sexual misconduct working group established with union</p>	<p>Achieving 2</p>	<p>Head of Employee Relations</p>

		<ul style="list-style-type: none"> • colleagues to review effectiveness of policy. • Anti-bullying, harassment and victimisation training available on Learning Hub. • Review of the Trust's exclusion policy and associated training. • Managing Violence and Aggression Policy launched. • Enhanced Conflict Management Training available for patient facing colleagues. • Partnership working with external agencies such as the Police and Crown Prosecution. • Single points of contact for York and Scarborough sites in North Yorkshire Police. • Area specific violence and aggression risk assessments are available. • Reduction in Violence and aggression incidents across the Trust. 		
	<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>The Trust has a range of support available to staff:</p> <ul style="list-style-type: none"> • Union Representatives. • Freedom to Speak up Guardian. • Fairness Champions. • Staff networks. • Chaplaincy. • Mental Health First Aiders. • Health and Wellbeing Booklet. • Psychological support. • Occupational Health and Wellbeing. • Due Regard Impact Assessments on all policies. • No Excuse for Abuse reporting form. <p>Actions taken by the Trust in support:</p> <ul style="list-style-type: none"> • Review and relaunch of the Civility, Respect and Resolution Policy working in collaboration with trade union colleagues. • Equality Impact Assessment completed through policy development. • Development of Just and Learning Assessment. • Policy review engagement with the Staff networks. • Relaunch of the Fairness Champions. • Continuation of Our Voice Our Future. • Union representatives as independent members on CRR panels. • Implementation of the Sexual Safety at Work Charter and launch of the Sexual Misconduct Policy. • No Excuse for Abuse Campaign. • Development of an Anti-Racism statement. 	<p>Achieving 2</p>	<p>Head of Occupational Health and Wellbeing and Head of Employee Relations</p>

	<p>2D: Staff recommend the organisation as a place to work and receive treatment</p>	<ul style="list-style-type: none"> • Our Voice Our Future, a multi-year cultural change programme is running in the Trust. The Change Makers are taking forward actions based on staff feedback, for example the 'Kindness in Communication' campaign. • Promotion and collation of exit interview data which now includes protected characteristics. • Implementation of Line Management Development and Fundamentals training through 2024/25. • Revised categories at the 2025 Celebration of Achievement awards increased the number of nominations. • Wellbeing rooms being opened across the main Trust sites. • Careers conferences in 2025, professional leads developing career progression pathways. • Dedicated section on Staffroom for development opportunities, with links to free courses and information on funding. • An incentive offered with the 2025 staff survey to try and increase participation to amplify the employee voice. • Ongoing work to ensure colleagues rosters are published 6-12 weeks in advance. • Expanding the opportunities for self-rostering. 	<p>Under-developed 0</p>	<p>Head of Employee Relations</p>
<p>Domain 2: Workforce health and well-being overall rating</p>			<p>6</p>	

Domain 3: Inclusive leadership

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	EDS Domain 3 Evidence 25-25  Evidence table 2025.docx	Achieving 2	Head of EDI and Director of Workforce and Organisational Development
	3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed	As above	Achieving 2	Head of EDI and Director of Workforce and Organisational Development
	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	As above	Achieving 2	Head of EDI and Director of Workforce and Organisational Development
Domain 3: Inclusive leadership overall rating			6	
Third-party involvement in Domain 3 rating and review				
Trade Union Rep(s):		Independent Evaluator(s)/Peer Reviewer(s):		
		Stakeholders from Harrogate and District Hospitals Foundation Trust		

EDS Organisation Rating (overall rating):

*Score 20, rating Developing

*Calculated using the Trust's method

Organisation name(s): York and Scarborough Teaching Hospitals

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

EDS Lead	Year(s) active
Head of Equality Diversity and Inclusion	2026
EDS Sponsor	Authorisation date
Director of Workforce and Organisational Development and Interim Chief Nurse	

Domain	Outcome	Objective	Action	Completion date
Domain 1: Commissioned or provided services	1A: Patients (service users) have required levels of access to the service	<ul style="list-style-type: none"> • Improve accessibility of services for those with sensory loss/differences. • Utilise technology to improve efficiencies and health outcomes. • To reduce DNA's. • To address health inequalities in accessing services. 	<p>York Emergency Department, Responsible Officer, York ED/Matron:</p> <ul style="list-style-type: none"> • Re arrange seating within the waiting area to allow for colour contrasting, enabling people with vision loss to better navigate the waiting area. • Create dedicated quiet spaces with features like dimmable lighting for those who need them. 	December 2025 January 2027
			<p>Musculoskeletal Outpatients and community days, Responsible Officer, Associate Chief AHP:</p> <ul style="list-style-type: none"> • Explore digital solutions to support MSK practice. 	June 2026
			<p>Scarborough Community Children's Speech and Language Therapy, Responsible Officer, Children's Therapy Team Manager:</p> <ul style="list-style-type: none"> • Explore the use of telephone reminders. across the services. • Complete the review of appointment letters, addressing health literacy barriers. • Further explore some of the reasons for DNAs. • Invest in tablet devices to increase access to communication programmes. • Increase awareness of SLT services across high deprivation areas, where referral rates are below what's expected. 	August 2026 June 2026 September 2026 October 2026 February 2026 ongoing

<p>1B: Individual patients (service users) health needs are met</p>	<ul style="list-style-type: none"> • Improve how we identify and address complex needs to improve health outcomes. • Providing personalised support to improve health outcomes • Incorporating patient voice within service design/delivery 	<p>York Emergency Department, Responsible Officer, York ED/Matron:</p> <ul style="list-style-type: none"> • Equip staff to ask the right questions to better identify and support complex needs. • Provide leaflets and VCSE info in waiting areas to signpost support services. <p>Musculoskeletal Outpatients and community days, Responsible Officer, Associate Chief AHP:</p> <ul style="list-style-type: none"> • Consider how MSK services can further empower individuals to take ownership of their own health and wellbeing • Monitor FFT following recent roll out of new provider 	<p>January 2026 - October 2026</p> <p>October 2026</p> <p>December 2026</p> <p>Ongoing</p>
<p>1C: When patients (service users) use the service, they are free from harm</p>	<ul style="list-style-type: none"> • Improve how we identify and address complex needs to improve health outcomes • Providing personalised support to improve health outcomes. • Strengthen MSK practice via development and supervision. 	<p>York Emergency Department, Responsible Officer, York ED/Matron:</p> <ul style="list-style-type: none"> • Collect wider health determinants to support with signposting and discharge. • Enhance electronic patient records to better capture and address these requirements. <p>Musculoskeletal Outpatients and community days, Responsible Officer, Associate Chief AHP:</p> <ul style="list-style-type: none"> • Continue to explore advanced practice opportunities for MSK physiotherapists. • Review how clinical supervision compliance is captured. <p>Scarborough Community Children’s Speech and Language Therapy, Responsible Officer, Children’s Therapy Team Manager:</p> <p>All compliance areas met. Continue to monitor.</p>	<p>January 2027</p> <p>April 2026 – January 2027</p> <p>Ongoing</p> <p>April 2026</p> <p>Ongoing</p>

	<p>1D: Patients (service users) report positive experiences of the service</p>	<ul style="list-style-type: none"> Incorporating patient voice within service design/delivery. 	<p>York Emergency Department, Responsible Officer, York ED/Matron:</p> <ul style="list-style-type: none"> Continue to review FFT feedback, looking at disparities between experiences. <p>Musculoskeletal Outpatients and community days, Responsible Officer, Associate Chief AHP:</p> <ul style="list-style-type: none"> Review FFT following recent roll out of new provider. <p>Scarborough Community Children’s Speech and Language Therapy, Responsible Officer, Children’s Therapy Team Manager:</p> <ul style="list-style-type: none"> Review FFT following recent roll out of new provider. 	<p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p>
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Domain	Outcome	Responsible Officer	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	Head of Occupational Health and Wellbeing	<ul style="list-style-type: none"> To continue to raise awareness of the current support and how it is accessed. Utilise the monthly wellbeing roadshows to target specific. Targeted health support. 	Ongoing throughout 2026 December 2026 June 2026
	2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source	Head of Employee Relations	<ul style="list-style-type: none"> Full review of the CRR policy. Review of the Sexual Safety Charter Assurance Framework. Delivery of management fundamentals training. 	December 2026 April 2026 Quarterly, 2026
	2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source	Head of Occupational Health and Wellbeing and Head of Employee Relations	<ul style="list-style-type: none"> Retrain outstanding Mental Health First aiders. Continue to distribute Health and Wellbeing booklets. Continue to raise the profile of the Staff Psychology and Occupational Health Services. Due Regard Assessment on all policies. Review and relaunch of the Civility, Respect and Resolution Policy. 	Ongoing throughout 2026 Quarter 2 2026 Ongoing throughout 2026 2026/27 December 2026

	2D: Staff recommend the organisation as a place to work and receive treatment	Head of Employee Relations	<ul style="list-style-type: none"> Continuation of OVOF. Implementation of a continuous improvement programme. 	July 2026 2026/27
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		No action plan is required as the 2026 peer review was to assess if the Trust remained within the Achieving Activity category for D3 as there was one. There is one action left to implement demonstrate the Trust is working towards the Excelling Category.	
	3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed	Provide a sample of completed EqHIA for policies and projects which are signed off at the appropriate level where required.	Implement the draft new Equality and Health Impact Assessment process for the Trust. (Action on the 2024/25 Improvement Plan to move towards 'Excelling Activity'). Responsible Officer, Head of EDI	June 2026
	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	Actions implemented.	Non-required. Assessment in 2026 was to determine if the Trust remained in the Achieving Activity category.	

Documentation to support

EDS Domain 3 Evidence 2025/26



EDS Domain 3 Y&S
's evidence 2025-20