Buckinghamshire Healthcare NHS Trust

Meeting the general equality duty

Which of the three aims is this information relevant to?

Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.

Advance equality of opportunity between people who share a protected characteristic and those who do not.

Foster good relations between people who share a protected characteristic and those who do not.

How does this information help us to show we are paying due regards to advancing equality?

This information is relevant to all three aims. Staff engaged in the business planning process are reminded that:

- An Equality Quality Impact Assessment (EQIA) should be undertaken before any service changes or developments are made
- Equality Quality Impact Assessments help us to promote equality and assess the impact on any particular groups because of proposed changes and so helping us to check for and prevent disadvantage or discrimination.
- It is equally important that when making service changes, the views of the patients, service users, the public, and stakeholders are taken into account and this document highlights the need for patient engagement and involvement to be taken into consideration before any decisions are made.

Business Planning

The Trust's strategy reflects the NHS Long Term Plan published in early 2019 and is aligned to the Buckinghamshire Joint Local Health and Wellbeing strategy: Healthier, Happier Lives developed by the Buckinghamshire Health and Wellbeing Board.

The Buckinghamshire Health and Wellbeing Board comprises of representatives from our Trust, Buckinghamshire Council, Oxford Health NHS Foundation Trust, Buckinghamshire, Oxfordshire and Berkshire West ICB and voluntary and community sectors. Healthier, Happier Lives focuses on improvements throughout life so that residents start well, live well and age well. Together we are committed to improving health and social care in the long term and to reducing health inequalities for those living in areas with greater need and groups with poorer health.

As part of the new health and care integration arrangements for the Buckinghamshire, Oxfordshire and Berkshire Integrated Care System, we have worked with partners to establish a place-based partnership for Buckinghamshire. Formalising existing informal arrangements, this will assist senior leaders across health and social care to oversee and tackle key strategic issues for health and care integration in Buckinghamshire and support the delivery of the Buckinghamshire Joint Local Health and Wellbeing Strategy. The place-based partnership, known as the Buckinghamshire Executive Partnership (BEP) started meeting April 2023. It is chaired by the Trust's Chief Executive Officer with representatives from Buckinghamshire Council, Oxford Health NHS Foundation Trust (which provides mental health services in Buckinghamshire), Buckinghamshire General Practice Provide Alliance and the voluntary sector. The role of the BEP is to look at things that can only be achieved if all partners collaborate and work closer together. One of the three priorities for 2023/24 was tackling health inequalities experiences by those from social deprived areas and ethnic minority groups in.

Each year the Trust undertakes annual business planning to set the priorities for the year ahead. This takes account of national requirements, our Trust Strategy and the requirements of the Buckinghamshire, Oxfordshire and Berkshire West (BOB) Integrated Care System (ICS).

A key part of business planning is the agreement of our 'areas of focus' for the year ahead – these are a small set of organisation-wide priorities which are understood and owned by everyone. They provide a shared focus around which to energise teams to drive improvements and support the achievement of our medium-term goals. These 'areas of focus' for 2023/24 are set out below.

Vision	Outstanding Care	Healthy Communities	Great Place to Work
What we want to ACHIEVE by 2025	We will **see people as early as possible** when they need our services, to improve outcomes. We will continuously improve our services and use of resources to **deliver value for our residents.**	We will **prevent people dying earlier than they should**, with a particular focus on addressing inequalities in access and outcomes.	Our people will feel **motivated, able to make a difference and be proud** to work at BHT. We will attract and retain talented people to build **high performing teams with caring and skilled people.**
How we'll MEASURE progress	Eliminate corridor care. Improve productivity to be in the top quartile nationally.	Play our part in ensuring that more children in the most deprived communities are ready for school Increase proportion of people over the age of 65 years who spend more years in good health. Improve outcomes in cardiovascular disease.	Improve staff engagement score to be in the top quartile in the National NHS Staff Survey. Improve overall Trust vacancy rate to be no more than 8%.
Our FOCUS for next year 2023/24	**Improve waiting times**, with less than 4% of patients waiting more than 12 hours in the Emergency Department (ED). **Improve safety**, with 80% of acute and community services having a clinical accreditation assessment by 1 April 2024, and 40% of those assessed achieving silver accreditation. **Improve productivity** in every service, with overall Trust improvement of at least 5%.	**Improve access** and effectiveness of our services **for communities experiencing the poorest outcomes**, with priorities to: • **Reduce smoking in pregnancy**, with less than 5% of women smoking at the time of delivery. • Increase % of people being referred to **cardiology services** from the most deprived areas. • Improve the **early identification of frailty**, with more than 30% of patients in ED having a documented frailty score.	**Improve the experience of our new starters**, with the number of people who leave in the first year less than 12% (improvement also measured through quarterly pulse surveys). **Develop operational and clinical management and leadership skills in key roles**, so 300 managers are equipped with enhanced technical, management and leadership skills (impact measured by quarterly pulse surveys and national staff survey).

An integral part of our Trust vision is to work with partners to build healthy communities and tackle healthy inequalities; which is directly linked to our equality objective to '*reduce inequalities for patients with protected characteristics'.*

In 2023/24 our priorities for Healthy Communities were focused on

- *Reducing smoking in pregnancy, with the aim of less than 5% of women smoking at the time of delivery*
- *Increasing the percentage of people being referred to cardiology services from the most deprived areas*
- *Improving the early identification of frailty, with more than 30% of patients in our Emergency Department having a documented frailty score to enable better management of support of frail patients*

Reducing smoking in pregnancy

Core20PLUS5 (NHS England 2022) identifies smoking as a key clinical area of health inequality. Smoking in pregnancy is the single most modifiable factor that can reduce preterm births and stillbirths. Women from deprived backgrounds are more likely to be smokers when they become pregnant. They are less likely to stop smoking during their pregnancy or after the birth of their baby Smoking in pregnancy increases the risk of:

- miscarriage
- stillbirth
- premature birth

- a baby born smaller than it should be
- sudden infant death syndrome (cot death)
- asthma

One of the Trust's key priorities in 2023/24 was to reduce the number of pregnant women smoking at the time of delivery. We launched our smoking cessation service to support pregnant women to give up smoking, increasing engagement with the Trust's smoking cessation service from 25% to 70%. As a result, less than 5% of women now smoke at time of delivery meaning that 226 babies were protected against the negative impacts of smoking in pregnancy – 90 more than the previous year. This was against a national target of 6% and compared to c.7% at the end of 2022/23.

We also monitor carbon monoxide levels during pregnancy and have increased the number of women screened for carbon monoxide levels from 20% to 95%. This monitoring is for all pregnant women, not just those who smoke, as they may be exposed to carbon monoxide because other family members smoke or from faulty boilers. High levels of carbon monoxide are potentially fatal for pregnant women and their unborn babies.

The Trust's smoking cessation team is now also referring other family or household members who smoke to Be Healthy Bucks to provide babies with the best possible start in life.

Cardiology referrals

The evidence base and NHSE guidance identifies that to significantly improve cardiovascular outcomes we need to focus on improving access to preventative healthcare, with proactive interventions. In Buckinghamshire, as nationally[i], people from more deprived areas have worse access to primary care and lower funding rates per patient within primary care for GP practices in Opportunity Bucks areas, as well as some of lowest patient experience within BOB.

In response to these challenges, we have prioritised the cholesterol management of cardiovascular patients from the most deprived areas.

As part of a collaborative working agreement with Novartis UK, the Trust has created the Buckinghamshire Lipid Optimisation Programme. The programme seeks to proactively reach out to patients with a history of cardiovascular disease and high cholesterol, offering them cholesterol lowering therapies which reduce their overall cardiovascular risk. The programme has also ensured the pioneering innovative medication Inclisiran (a 6-monthly cholesterol lowering injection) is available to all eligible patients in Buckinghamshire.

The programme uses an innovative, novel population healthcare tool (developed alongside Graphnet) which allows BHT clinicians to identify patients from information within their shared care record. The shared care record is a cloud-based platform that combines health and social care data from multiple disciplines, including acute hospitals and GP practices. It allows clinicians to expertly search and identify eligible patients across Buckinghamshire based on several clinical parameters, including cardiovascular history, cholesterol levels and their current lipid lowering medications (including compliance and start dates). Additionally, patient equality data can support prioritising those at greatest risk of health inequalities.

This search tool has identified over 2,100 patients across Buckinghamshire with a history of cardiovascular disease and high cholesterol levels. These patients are proactively contacted to

attend a virtual medical appointment, where a BHT clinician discusses ways to optimise their cholesterol management and reduce their cardiovascular risk. Patients are then offered a range of cholesterol lowering medications, which include the novel injectable medication 'Inclisiran', where appropriate.

So far over 700 patients have been seen in virtual clinics within the first five months of the programme. Prior to the launch of this programme, the BHT lipid service would see four new patients a week. Over 230 patients have been offered the injectable medication Inclisiran, with over 65% of patients having their cholesterol medication adjusted and guidance provided to their GP.

Cardiovascular disease (CVD) is also one of the conditions most strongly associated with health inequalities, with people living in England's most deprived areas being almost four times more likely to die prematurely of CVD than those in the least deprived area. The Trust has prioritised patients from the most deprived areas of Buckinghamshire.

Building on the breakthrough metric in 2023/24, the objective for 2024/25 commits the Trust to a prevention-first approach, with a focus on blood pressure management through our outpatient services. Evidence tells us that better identification and management of high blood pressure (hypertension) can improve cardiovascular outcomes.

Frailty

Frailty is now understood to be a long-term condition rather than a word that is often applied to people purely because of their age. The clinical symptoms associated with the frailty are commonly fatigue, weight loss, change in memory, increased vulnerability to functions and incontinence. Significant life events can also impact on a person's frailty. The early identification of frailty coupled with targeted support can help older people living with frailty to stay well and live independently for as long as possible.

The **Clinical Frailty Scale (CFS)** is an evidence-based tool which we use to assess frailty in elderly individuals. It prompts clinicians to consider how a person has changed from their previous ability to function in daily tasks. Although the CFS is a score it is a mechanism that leads to decision making about what tests, treatments and clinical teams should input into the patient's care plan.

At the start of 2023/24 the Trust had an objective of improving the early identification of frailty using the CFS, with a target of more than 30% of patients in our Emergency Department having a documented frailty score by the end of the year.

During the year, there have been several initiatives to raise awareness of the importance of recording the Clinical Frailty Score, including 'frailty at the front door workshops' for our Emergency Department clinical colleagues and the availability of the Clinical Frailty Score app to support staff in calculating the score. As a result, over 90% of patients aged over 65 presenting in the Emergency Department have had a Clinical Frailty Score documented during the year.

2024/25 Priorities

Building healthy communities and tackling health inequalities remains a core focus for us in 2024/25, with our priorities set out below.

Vision	**Outstanding Care, Healthy Communities, Great Place to Work**		
Mission	***Personalised, compassionate care every time***		
	Outstanding Care	**Healthy Communities**	**Great Place to Work**
Strategic Goals 2025	We will **see people as early as possible** when they need our services to improve outcomes We will continuously improve our services and use of resources to **deliver value for our residents**	We will **prevent people dying earlier than they should**, with a particular focus on addressing inequalities in access and outcomes	Our people will feel **motivated, able to make a difference and be proud** to work at BHT We will attract and retain talented people to build **high performing teams with caring and skilled people**
Outcome Measures 2025	Eliminate corridor care Improve productivity to be in the top quartile nationally	Play our part in ensuring that more children in the most deprived communities are ready for school Increase proportion of people over the age of 65 years who spend more years in good health Improve outcomes in cardiovascular disease	Improve staff engagement score to be in the top quartile in the National NHS Staff Survey Improve overall Trust vacancy rate to be no more than 8%
Focus 2024/25	Improve waiting times in our Emergency Department, with fewer than 10 patients a day waiting more than 12 hours Improve safety, with all inpatient and outpatient services achieving clinical accreditation, and at least 40% being awarded the silver standard Improve productivity by a further 5%, ensuring every patient is seen within a year, improving patient outcomes	Give children living in the most deprived communities the best start in life by increasing the proportion who have a 12-month review to at least 85% Tackle the biggest driver of cardiovascular disease by ensuring at least 75% of outpatients have their blood pressure checked	Improve everyone's experience of working at BHT by taking a zero tolerance approach to bullying, becoming best in class in the staff survey within 2 years

Further to delivering these priorities we are also working with our key partners across the county to develop a five-year strategy for which will aim to support people to live healthier and more independent lives for longer.

Equality and Quality Impact Assessment (EQIA)

The Equality Act 2010 protects everyone in Britain against discrimination. As a public healthcare service, the Trust is required to evidence the impact of our functions, policies, processes and decisions on those with protected characteristics. Filling out an EQIA ensures that the Trust is legally compliant with the Equality Act 2010 and the Public Sector Equality Duty. The public sector equality duty is a duty on public authorities to consider or think about how their policies or decisions affect people who are protected under the Equality Act.

The key purpose of an Equality Quality Impact Assessment is to:

- Promote all aspects of equality
- Identify whether certain groups are excluded from any of our services
- Identify any direct or indirect discrimination
- Assess if there are any positive or negative impact on particular groups
- Promote good relations between people of different equality groups
- Act as a method to improve services

In planning and prioritising service changes, the Trust undertakes an Equality Quality Impact Assessment (EQIA) before any service changes or developments are made.

Equality Quality Impact Assessments help us to promote equality and assess the impact on any particular groups because of proposed changes and so helping us to check for and prevent disadvantage or discrimination. It is a way to make sure individuals and teams think carefully about the likely impact of their work on service users, both positive and negative, and take action to improve activities, where appropriate.

EQIA's make sure we meet our legal equality duties through assessment of the likely (or actual) effects of our policies, functions, or services on the diverse communities we serve. This includes identifying benefits for different groups, looking for opportunities to promote equality that have been previously missed, as well as negative impacts that can be removed, mitigated or justified.

A panel of representatives within the Trust meet regularly to review each EQIA presented to approve or request more information about the change.