Equality, Diversity and Human Rights (EDHR) Framework Strategy

2021 to 2026

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20. **Acknowledgement**

The Bedfordshire Hospitals NHS Foundation Trust would like to thank all those who gave their time and expertise to contribute to the development of this strategy, and who continue to help us move towards providing a fully inclusive and comprehensive service for people in Luton, Bedfordshire, Hertfordshire and parts of Buckinghamshire.

If you would like this document in another format that would better suit your needs, or in another language, or if you have any comments about our strategy or would like to get involved, please contact our **Equality Lead** **Bedfordshire Hospitals NHS Foundation Trust BHFT**, **Trust Offices, Lewsey Road, Luton, LU4 0DZ**

## Enquiries about this Strategy or accessibility requests: (If you need to request this information in alternative formats or languages):

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**WRITE TO OUR PALS SERVICE at:**

Luton and Dunstable University Hospital, Lewsey Road, Luton, LU4 0DZ

**OR**

Bedford Hospital, Kempston Road, Bedford, MK42 9DJ

1. **Foreword**

We are pleased to share our Equality, Diversity and Human Rights Strategy Framework with you. The strategy sets out our vision, commitment and responsibilities for delivering an effective programme for this agenda across the Bedfordshire Hospitals NHS Foundation Trust BHFT.

The Trust is firmly committed to taking in to account, protecting and promoting equality, diversity and human rights in everything we do. It is only by achieving equality, celebrating diversity and ensuring that human rights are upheld that we can provide the highest quality services and continuously improve patient and staff experiences.

The Trust values reflect our strong intention to embrace this agenda and to promote behaviours that demonstrate our commitment.

This strategy provides a clear picture in terms of what we want to achieve in relation to equality, diversity and human rights. Much of the work will be on-going. The equality objectives and action planning attached to the strategy are living documents and may change with feedback from interested stakeholders and changing priorities.

Our Trust Board commits to monitoring our progress, set out in the action plan and reporting regularly and openly on the developments.

Making sure the action plan in our strategy happens is the responsibility of everyone in the Trust. We look forward to the work ahead, facing the challenges, making our aims reality, and meeting the actions we have set ourselves.

Fiona MacDonald

Director of Culture and Chair of the Equality Diversity Human Rights Committee

1. **Introduction**

We recognise the growing diversity of the population we serve and employ and the importance to all of this Diversity and Inclusion Framework Strategy for Bedfordshire Hospital NHS Foundation Trust (BHFT).

Sharing our strategy as a Trust, and within the Luton and Dunstable, and Bedford Hospitals makes public our framework for our continued commitment to this agenda both as an employer and as a service provider.

Our framework strategy is about our commitment and how we will deliver our Equality, Diversity and Human Rights EDHR responsibilities and agenda. The development of this strategy has been supported by the data, consultations and feedback we have from our staff, partner agencies, patients and other stakeholders to our services and workforce.

We value the contribution of those who have helped us to develop a strategy that moves the Trust closer towards providing a more fully inclusive and comprehensive service for people in Luton, Bedford, Bedfordshire, Hertfordshire and parts of Buckinghamshire.

The strategy sets out our approach to all forms of Equality, Diversity and Human Rights. **It includes Fair Treatment, Access, Inclusion, Respect and Dignity (FAIR),** as the key things to get right for everybody in meeting this agenda. This includes how we recognise the differences between people, and aim to ensure that (as far as possible) any gaps and inequalities are identified and addressed.

The strategy also details how we plan to convey and embed this agenda into our **organisational values** in order to meet the expectations and needs of our workforce and staff and also our legislative duties for equality. **You can find our organisational values in Appendix 1.**

The strategy is a “living” document that will be regularly reviewed and strengthened. Ongoing work is also taking place to explore how best to allow stakeholders to hold the Trust to account for the commitments made, and to increase involvement and ownership in this agenda and strategy.

4. About us and this Agenda

The Bedfordshire Hospital Foundation Trust **BHFT** provides medical and surgical services including acute and specialist health care services.

**Patient Considerations –** The catchment area for Luton and Dunstable Hospital **L&D** is circa 300,000 people in Luton, South Bedfordshire, other parts of Bedfordshire and Hertfordshire. For Bedford Hospital **BHT** it is 270,000 across Bedfordshire and the surrounding areas, Bedford Borough (160,000) and Central Bedfordshire (260,000), also with a 900,000 catchment for vascular services.

We need to ensure that we treat this large number of people with respect, involve them in their care, and ensure that the treatment and support we provide meets their needs.

**Workforce Considerations -** The Trust is a major employer with a very diverse workforce of more than 8300 employees at March 2022. The staff at LDH, (the second largest employer in the Luton area) reached 4730 plus in January 2020. The staff at BHT (the largest employer in Bedford) reached 2500 plus.

Whilst we need to ensure that staff support the Trust in providing an exemplary service, we also need to ensure that their individual needs and aspirations are met, that their differences are valued and that they are treated with respect.

**Funding Considerations -** The turn-over in 2019 was £364m for the L&D and £225m for BHT. We need to ensure that future funding and resources allocated are fairly and proportionately used, with equality analysis and impact assessment to support informed decision making about the right services etc.

**This agenda is the responsibility of everyone**. Each person’s individual circumstances and characteristics vary and their service or employment with us must not be affected by race, disability, gender, age, religion or belief, pregnancy and maternity, marriage and civil partnership, gender reassignment or by sexual orientation.

**Our Key Aspirations for all are:**

**F**air Treatment

**A**ccess

**I**nclusion

**R**espect and Dignity

The greatest impact on services will only be experienced if the values and actions on this agenda are embraced by everyone within or using the Trust.

**Conduct and Values -** The Trust values its service users and its staff, and recognises the importance of ensuring both their health and safety, and their ability to be in a safe, comfortable, and non-threatening environment. To achieve this, there will be no tolerance of any disrespect or unacceptable behaviour towards staff, patients or other stakeholders of the Trust.

1. Overview of the Strategy Framework

This strategy and action plan provides a framework for all areas of the Trust to own and develop further. It describes:

* **Our duties and requirements** under Equality, Human Rights and Health Inequalities Legislation including the **equal treatment** of people of 9 different **protected characteristics** as listed in section 5
* **The need for fairness, respect, dignity, autonomy** in our treatment of others and the encouragement of i**nclusion and access** to services or employment
* **The principles, goals and aims for our strategy**
* **The NHS Equality Delivery System (EDS**) which has 4 goals and 18 expected outcomes (see page 13) that inform our **Equality Objectives** and action plans
* How our **Annual Equality and Diversity Progress Reports** support performance against our objectives
* How we necessarily use **Equality Information** (such as quantitative or qualitative data) to help inform our progress reports, and to provide data for analysis to better inform decisions about policy or service changes
* The **Governance, implementation, monitoring, and reporting measures in place - including the role of Care Quality Commission and Clinical Commissioning Group** which all work to secure actions and evidence of real improvement and of the benefits and values of continuing to take into account the needs, and expectations of our population.
1. Meeting our duties and requirements

As for all employers and service providers, the Trust has to meet the requirements of the Equality Act 2010 (which superseded all previous Equality Legislation). The Act identifies and provides for 9 personal characteristics that need legal protection to ensure equality, fair treatment. These **protected characteristics** are:

* **Age**
* **Disability**
* **Gender/Sex**
* **Transgender / Gender Reassignment**
* **Marriage or Civil Partnerships**
* **Pregnancy or Maternity**
* **Race/Ethnicity**
* **Religion or Belief**
* **Sexual Orientation**

The Trust is required to consider how its plans, procedures, policies, projects and decisions will affect our patients, carers, communities, employees and other stakeholders with the characteristics above.

Also since 2011, the Trust has adhered to the requirements of the Public Sector Equality Duty. This Duty was devised to assist public bodies in delivering Equality requirements and holds a general and a specific duty.

**Our General Duty is to have due regard to the need to:**

* **work to eliminate harassment, discrimination, victimisation or other prohibited conduct**
* **to foster good relations, tackle prejudice and promote understanding**
* **advance equality of opportunity between the different protected characteristics**

This means that we must ensure that access to our services and employment is equal, fair and inclusive to all with due regard to the needs and different characteristics of people. We must also ensure dignity and respect for all whilst demonstrating how we will promote equality and address any areas of inequality or discrimination.

**Our Specific Duty: We must gather and use Equality Information and have Equality Objectives.** This means using:

**(1) Equality Information - to inform what we do, such as to**

* Gather, analyse and use equality data
* Engage, consult and involve service users and staff
* Use Equality Analysis to analyse and assess impact
* Publish annual equality information (accessibly)

**(2) Equality Objectives**

* Which have been informed by equality information so that we know what we need to do
* That are published along with progress reports annually
* That are reviewed along with our approach every 4 years

The focus is more about the importance of engaging people in this agenda. This means demonstrating and evidencing the benefits and values of equality, diversity, inclusion, access and human rights for all - The Trust’s **Equality Diversity and Human Rights** **Framework Strategy (this document)** addresses this change.

1. Human Rights

The Human Rights Act 1998 contains a range of rights that serve to respect, protect and fulfil people’s human rights and that also have an impact on how our service is provided and our workforce managed. To help in the understanding of these rights the Department of Health describes these as the FREDA principles:

**Fairness Respect Equality Dignity Autonomy**

The Trust recognises that these underpin and are integral to both Equality and Diversity and NHS requirements. For this reason the Trust is committed to integrating these into this Diversity and Inclusion Framework Strategy and into all the Trust does.

The Trust’s EDHR values are similar – these are **FAIR**

**F**air Treatment, **A**ccess, **I**nclusion and **R**espect and Dignity

On the basis that if the Trust can get these right for everyone, our EDHR commitments will have been delivered.

1. Health Inequalities

**The provision for improvements in health inequalities** is embedded in the Health and Social Care Act 2012 and is also relevant to this strategy and agenda. We are tasked with helping to reduce inequalities in our patients in respect to;

* Their ability to access health services,
* the health outcomes achieved for them
* promoting the involvement of patients and their carers’ in decisions,
* enabling them to make a choice about health services provided to them.

**The NHS focus for health inequalities** previously was based on socio- economic factors known to have a strong impact on health. It includes now the inequalities that patients from the nine protected characteristics face and how fair services and health outcomes are for these groups.

**The NHS Business Plan from 2020** focusses both on **prevention** and on **management of health inequalities** and so this area is now taking a proactive precedence in future service planning

1. NHS Accessible Information Standards

In line with NHS England guidance from 2016 we have been improving on the NHS Accessible Information Standard to help ensure support for patients with communication access needs due to a disability or sensory loss. This includes looking at information in large print, braille, easy read, or via email or via a British Sign Language Interpreter. **See also Appendix 6**

1. Website Accessibility and Assistive Technology
* The Trust website is a first port of call for many and aims to help ease of viewing for patients. From national data it is known that circa 20% struggle on line, 10% have dyslexia, 8% have English as a second language, 2 million have visual impairment, 23 million over 50 in an ageing population, 18% with low literacy. Many of these factors are much higher locally. Also some patients may have assistive technology at home (which can rely on website standards)
* The new Trust website at April 2020 meets **Web accessibility standards** with AA compliance and greater access for people with disabilities such as in text, font, images, sound, formatting, presentation, etc*.*

An assistive user friendly toolbar **see also Appendix 6** is now available for both hospitals giving instant access to information on-line in other formats such as:

* **text to speech** with sound controls, voice speed etc. and foreign languages
* **making text easier to read by**:
	+ a magnifier, ruler or highlighting to text being read whilst the rest of the content is masked
	+ increasing font size or type, or the contrast by changing the colour of the font or background e.g. for ease of users with dyslexia
* **Easy read -** translates page into easy read for basic need to know options
* **make an MP3 audio recording** of a webpage to listen to when needed, issue to a patient or upload to the relevant website area
* **translate text to different languages** with ability to print off in large print.
1. Interpretation Provision

As part of access to services and of meeting requirements of the NHS Accessible Information Standard, the Trust covers the needs of patients who do not have English as a first language. As one of the more diverse Trusts, the Trust is aware that these patients may also have a disability or sensory loss.

The Trust had circa 6750 interpretation requests for 54 different languages in 2019. Each year the number of requests increase by 15 to 20% so this is higher now. The top 4 languages at 75-80% of requests are Polish, Romanian, Urdu and Bengali. For Asian Languages (counting in Urdu and Bengali) in 2019 14 Asian Languages formed 41.3% of all requests (2660).

1. General Principles that support this Agenda

The Trust Strategy undertakes that this agenda is not simply about compliance but the need to reflect all the communities and people we serve or employ. We need to promote inclusion, diversity and cultural change such as working towards reducing health inequalities or any barriers to health and well-being and also to identify the business case for diversity in our Equality Information and Equality Objectives.

To help with this agenda and our strategy we have defined five general principles and areas of actions linked to them:

* **Fairness and Consistency** - Act fairly and consistently towards all patients, staff and communities. This involves identifying and removing barriers that prevent people from being treated equitably and as individuals with their own experiences and needs
* **Culture and Environment** - Provide a hospital environment which is safe, inclusive and welcoming. This involves treating everyone with dignity and respect and using everyday language when we communicate with people
* **Engaging People** -Engage with people in the development and improvement of services. This involves working creatively with patients, carers, families and staff from across all sections of the community
* **Partnership Working** – drawing upon the expertise and skills of partner organisations and this involves identifying and developing new partners
* **The right infrastructure –** putting equality, diversity and inclusion at the heart of all we do and central to all functions across the Trust. This involves learning from what we do well and from where we can improve.

**Strategic Partnership**

**Bedfordshire, Luton and Milton Keynes (BLMK)**

This is an initiative where NHS organisations and Councils are working together to transform public local health and care services. This includes community and social care, GP services, hospital and specialist care and support services.

This will help with the NHS Plan to achieve the aim for **Prevention** and for **management of Health Inequalities.**

**We aim to meet these principles by:**

* Becoming a leading organisation for the promotion of equality, diversity, inclusion and respect, in service delivery and employment
* Recognising the contribution and valuing the diversity of all staff and service users
* Being supportive, fair and challenging discrimination
* Ensuring that Bedfordshire Hospitals NHS Foundation Trustis regarded as an exemplary employer and service provider.

**Our general approach to this includes working to ensure that we:**

* + Have Governance, accountability and delivery from the top and a thorough approach to mainstreaming what we do
	+ Keep our strategy and objectives relevant and deliverable with monitoring, reporting and publishing to demonstrate and support our progress
	+ That all our activities from corporate procurement to human resource policies and from partnerships to individual treatment, recognise, understand, and adhere to the needs of this agenda
	+ Seek to use both influence and resources to make a difference to the life opportunities and the health of the local community especially of those who are disadvantaged
	+ Ensure that contracts and service level agreements are awarded only to organisations which can demonstrate compliance to equality legislation or who have an equalities policy
	+ Undertake an equality analysis on all policies, strategies, services, functions and business plans
	+ Seek to involve the community and workforce in the development and improvement of services.
	+ Respond to any concerns or complaints as speedily, effectively, and fairly as possible through both formal and informal processes, within a clear framework and timescales
	+ Actively seek to engage with minority groups through a range of methods to hear of their experiences of our services. Also to develop new ways to attract feedback from patients reflective of all the ‘protected characteristic’ groups listed.
1. Equality Delivery System (EDS2)

The Trust uses the principles from an NHS wide framework and system called the Equality Delivery System (EDS2) which was devised to help NHS organisations to deliver on this agenda. EDS2 provides the following **four** **overarching goals**:

* Better Health Outcomes for All
* Improved Patient Access and Experience
* Empowered, Engaged and Well Supported Staff
* Inclusive Leadership

EDS2 is a generic tool for the NHS. It defines **18 generic expected outcomes** from these four goals. We adapted these outcomes for the Trust to better reflect our service, role and responsibilities and so that they are bespoke to what we do. Below are the 4 overarching goals with our 18 bespoke outcomes.

**Goal 1: Better Health Outcomes for All**

* 1. Services are commissioned, procured, designed, and delivered to meet the health needs of local communities, promote well-being, and reduce health inequalities
	2. Individual patients’ health needs are assessed, and resulting services provided, in appropriate and effective ways
	3. Changes across services for individual patients are discussed with them, and transitions are made smoothly with everyone well informed
	4. The safety of patients is prioritised so that there is freedom from mistakes, mistreatment or abuse from other patients, staff or visitors
	5. Public health, vaccination, screening programmes and health promotion services reach and benefit all local communities and groups as appropriate are targeted where appropriate.

**Goal 2: Improved Patient Access and Experience**

* 1. Patients, carers and communities can readily access services, and should not be denied access on unreasonable grounds
	2. Patients are informed and supported to be as involved as they wish to be in their diagnoses and decisions about their care, with choice about treatment and place of treatment
	3. Patients, carers and visitors report positive experiences of their treatment and care, being listened to, respected and a mindful approach to their privacy and dignity
	4. Patient, carer or other service complaints are handled respectfully and efficiently including those related to conduct with any remedial actions being fair to all.

**Goal 3: Empowered, Engaged and Well Supported Staff**

* 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
	2. Levels of pay and related terms and conditions are fairly determined for all posts, and our commitment to ensuring equal pay for work of equal value, is evident and monitored
	3. All staff have access to and receive support, training, personal development and a work appraisal. This is evaluated to ensure staff are confident, competent and positive about their learning and work
	4. All staff are free from abuse, harassment bullying, and violence from patients, carers, visitors or colleagues in their work, with any remedial action being fair and open
	5. Flexible working options are available to all staff, consistent with the needs of the service, and the way that people lead their lives
	6. Staff are supported to remain healthy and sustain their wellbeing. Major health and lifestyle issues that affect individual staff and the wider population are addressed.

**Goal 4 - Inclusive Leadership**

* 1. Boards and senior leaders demonstrate their commitment by embedding and making equality integral in how business is planned and conducted and promoting this internally and externally so that equality and good relations are advanced
	2. Equality Analysis is integrated into the initial and further stages of decision making for new policy, practices and services, and within reports. Staff competently undertake Equality Analysis, evaluating impact for informed decision making and management of risk
	3. Line managers support and motivate their staff to work in culturally competent ways within a work environment free from discrimination. Leadership competencies are used to develop and support strategic leaders to advance equality outcomes.
1. EDS2 Grading

The EDS2 system has a four grade, grading system which can be used by the Trust to help in evaluating and grading the Trust’s performance. The highest grade in the criteria is “excelling’ and the lowest ‘underdeveloped’.

* **Excelling** - People from all the protected groups fare as well as people overall
* **Achieving** - Most people from the protected groups fare as well as people overall
* **Developing** - People from only some of the protected groups fare as well as people overall
* **Underdeveloped** - That people from all or many of the protected groups fare poorly compared with people overall or the evidence is not available

However, the Trusts performance reports (published on the Trusts website) also enable staff and external bodies to monitor progress against the goals listed each year. This strategy and annual action plans take into account areas highlighted as needing improvement.

The principles of EDS2 are included in Care Quality Commissions **CQC inspections – see the briefing appendix 2.**

1. Equality Analysis and Impact Assessment (EAIA)

Equality analysis of data and impact assessment is designed to help the Trust to identify the impact or effect (either neutral, negative or positive) of their policies, procedures activities and functions across the population, and with particular regard to the needs of protected groups and minorities. If any negative effects are identified, steps can then be taken to address this.

This is not just a duty requirement, it also has benefits and value for the Trust and individuals, in that better informed decisions can be made, and, if necessary objectively justified. The Trust has a formal approach which uses an Equality Analysis template with guidance provided to staff. This template, and a list of policies already analysed can be found on the Trust’s website.

1. Implementation and Responsibilities

**Strategic Priority**

The strategic implementation and commitment to our Diversity and Inclusion Framework Strategy (including the approach to Equality, Diversity and Human Rights) is captured in the Trust’s key strategic priorities.

**Governance - Our Chief Executive and Trust Board**

The Chief Executive has ultimate responsibility for compliance and delivery on the Diversity and Inclusion Agenda in conjunction with the Executive team. Board members are directly accountable for all actions and omissions related to the agenda.

**Executive and Non-Executive Directors Champion EDHR areas**

From 2021, Executive and Non- Executive Directors have been allocated one of the nine protected characteristics to champion within the Trust and on the Board.

**Governance Structure**

This takes account of the new Workforce Committee. The Patient and the Workforce Committee now share the same Chair so that EDHR areas across the Patients and workforce are amply covered.

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The Trust has an **Equality, Diversity and Human Rights Committee** withTerms of Reference to assist in implementation including being accountable to the Trust Board for the development, monitoring and review of this strategy and agenda. The committee also oversees delivery and monitors progress in action plans and equality objectives with regular reports to the Board.

The Committee is **chaired by an** **Executive Director** with **an Associate Director or Non-Executive Director as Deputy Chair** and is attended by other front line, senior staff, governors, and representatives from the Patient Experience Council, the Workforce Committee, Trade Unions and Staff networks. The **Equality, Diversity and Human Rights Committee** **EDHR** is also supported by the Trust’s Equality and Diversity Lead.

**The Executive Team Directors** help ensure that all areas of the Trust are actively engaged in this agenda and that structures are in place throughout their Directorates to enable positive actions to be taken to bring equality, diversity and human rights alive and central to everything we do. Their **Directorates** must ensure that agreed actions are taken and monitored to improve services and regular reports made to the Trust’s EDHR Committee to demonstrate agreed actions have been taken.

**The Equality & Diversity Lead** is responsible for ensuring that a Trust-wide co-ordinated approach is taken to deliver an effective equality, diversity and human rights programme. This will include ensuring systems are in place to meet all legislature requirements.

Our **Equality, Diversity and Human Rights Committee** **has:**

* **Staff members** who are a group of staff working at all levels across the Trust who have expressed a commitment in promoting equality and diversity through their day to day work. They are the ears and eyes of equality and diversity across the Trust. The Trust wants to develop and promote these members so that in celebrating their achievements and the work they do it will have a positive influence on changing attitudes and culture across the organisation
* **Governors Representation**

The Committee is attended by 2 and up to 5 Public, Council and Staff Governors with an interest in actively supporting this agenda. A Governor has responsibility for reporting back to the Board of Governors the key details of the meeting, and the progress and actions underway

* **Patient / Service User Representation**

The Committee is attended by a **Patient representative** and members of the **Patient Experience Council.** However, much of the patient contribution is both qualitative and quantitative, not only through the Patient Experience Councilitself which is attended by key patient stakeholders but also from the type of information that is captured and shared across the Trust. For instance, within the Annual Patient Equality and Quality reports, the complaints and compliments, Friends and Family Test or patient surveys

* **All Members of Staff**

Ensuring that everyone is treated fairly with dignity and respect is the responsibility of all staff in the Trust. Everyone must challenge discrimination and stigma whenever they become aware of it or at the very least, seek support to ensure that discrimination is removed. **It is also the responsibility of all who use our services.**

1. Monitoring of Progress and Reporting

The actions from this strategy will be monitored via the Board, internal management systems and by the Equality, Diversity and Human Rights Committee. This includes:

**Publishing Equality Information:**

Annually[[1]](#footnote-1) for our:

* Workforce Equality Information Report
* Patient Equality Information Report
* NHS Workforce Race Equality Standard Report from 2015 (see Appendix 3 for more details)
* NHS Workforce Disability Equality Standard Report from 2019 (see Appendix 4 for more details)
* Gender Pay Gap Report statutory from 2017
* Preparing for the Ethnicity Pay Gap Report and the relevance of gender to this.

As created or reviewed for our: Equality Analysis of, and changes to, our Policies, Publishing our strategy and framework including our:

* WRES and WDES Actions plans and progress reports
* Equality, Diversity and Human Rights Policy
* Equality Objectives from the Committee – with Annual Progress Report on these Equality Objectives
1. The Care Quality Commission CQC

The CQC have added their Approach to this Agenda and have included this in their inspection criteria. Find out more in Briefing Appendix 2.

1. BLMK Clinical Commissioning Group

The Trust works closely with the NHS Bedfordshire, Luton and Milton Keynes CCG which was formed from the merger of three area CCGs on 1st April 2021. The CCG is a statutory clinically led NHS body responsible for the planning and commissioning of health care services for our area.

1. **All Annual Equality Reports can be viewed on our website here:** [**https://www.bedfordshirehospitals.nhs.uk/corporate-information/equality-and-diversity/annual-reports-and-relevant-documents**](https://www.bedfordshirehospitals.nhs.uk/corporate-information/equality-and-diversity/annual-reports-and-relevant-documents) [↑](#footnote-ref-1)