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Welcome

We are delighted to present this report highlighting our progress on equalities in 2014.

During 2014, Croydon CCG’s second year of establishment, staff have worked tremendously hard to commission and deliver services that are appropriate and increasing in quality for the borough’s diverse communities. Through our commissioning we are committed to improving health outcomes, reducing inequality and reducing health inequalities. In 2014, the CCG successfully completed the NHS Equality Delivery System, an equality assessment tool-kit that helps NHS organisations to identify good practice and identify gaps or areas that require improvement.

NHS Croydon Clinical Commissioning Group (CCCG) as a public body, an employer and commissioner of services has been implementing statutory requirements and in doing so has been improving its performance in the area of equality.

This report brings together evidence, activities and recommendations that demonstrate how Croydon CCG is meeting the statutory duties under the Equality Act 2010.

Whilst the CCG is proud of what it has achieved, we acknowledge that we want to go further to evidence that we integrate human rights, equality and diversity into the way we commission health services for the people of Croydon.

There is clear demonstration of the steps already taken to continually improve performance in the area of equality, and CCCG is committed to building on successes and addressing gaps, in recognition that:

- People can experience inequalities, discrimination, harassment and other barriers in organisations our culture is to ensure this is not the practise seen in CCCG;
- Patients should be at the centre of our decision making, and in partnership we can deliver high quality, accessible services that tackle inequalities and respond to personal needs;
- An environment where dignity, tolerance and mutual respect is experienced by patients, staff and members should be created and maintained.

The contents covered describe how key business functions have taken into account equalities requirements, evidenced by relevant documentation and supporting information where required. Key areas for development and recommendations are cited in Appendix 1 of this report by way of our Equality Objectives Action Plan.

We have already delivered much of the goals of the action plan and will embark upon a new set of Equality Objectives in 2015.

Dr Tony Brzezicki

Clinical Chair
Croydon Clinical Commissioning Group
1 Introduction

1.1. Background

The Equality Act 2010 provides a legal framework to strengthen and advance equality and human rights. The Act consists of general and specific duties:

The general duty requires public bodies to show due regard to:

- Eliminate unlawful discrimination
- Advance equality of opportunity
- Foster good relations

There are nine ‘protected characteristics’ covered by the Equality Act: race, disability, sex (male/female), age, religion or belief, sexual orientation and gender reassignment, marriage and civil partnership and pregnancy and maternity.

The specific duties require public bodies to publish relevant, proportionate information showing how they meet the Equality Duty by 31 January each year, and to set specific measurable equality objectives by 6 April every four years starting in 2012. Both general and specific duties are known as the Public Sector Equality Duties (PSED).

As a statutory public body, the NHS Croydon Clinical Commissioning Group must ensure it meets these legal obligations and intends to do so by publishing information demonstrating how the organisation has used the Equality Duty as part of the process of decision making in the following areas:

- Service delivery - evidence of equality impact analysis that has been undertaken
- Information - details of information taken into account when assessing impact
- Consultation - details of engagement activity that has taken place

With the introduction of the Equality Act 2010, Equality Impact Assessments have been abolished. A new tool has been developed and adopted to assess the impact of documents and services known as ‘Equality Analysis’.

1.2. Organisational context

Croydon Clinical Commissioning Groups (CCG) assumed statutory responsibilities from 1 April 2013.

GPs in Croydon have come together as the Croydon Clinical Commissioning Group. Croydon CCG is responsible for assessing the healthcare needs for the population of Croydon and coordinating and paying for services to meet those needs through hospital, community and mental...
health services. As a membership organisation, our GP member practices work in 6 GP networks, to address problems that are arising, and to see how local services can be improved and better co-ordinated. Croydon CCG’s constitution commits the organisation to work towards meeting the public sector equality duties and reduce health inequalities.

We recognise that, as commissioners of services, we must account for not only our own organisational equality performance but also that of the providers of services that we commission.

The CCG purchases a range of services from the South East Commissioning Support Unit (including Equality and Diversity service), which supports the CCG to discharge its statutory responsibilities, including those within the Equality Act 2010.

NHS England provides strategic policy guidance and performance monitoring through its national Equality and Health Inequalities team.

This report will focus on the period January 2014 – January 2015, covering the following core business areas:

- Commissioning Plans
- Quality Innovation Productivity and Prevention (QIPP)
- Partnerships
- Patient and Public Engagement
- Commissioned Services
- Contracts, Tenders and Performance Monitoring
- Serious Incidents
- Safeguarding
- Complaints / Patient Advice and Liaison Service (PALS)
- Summary of Equality and Diversity progress in 2014

1.3. CCG Leadership

Croydon CCG has identified a clinical equality lead that along with the executive team is actively supporting the development and delivery of equality work streams.

All Governing Body members have a collective and individual responsibility to ensure compliance with the public sector equality duty, which will in turn secure the delivery of successful equality outcomes for us, both as a commissioner and an employer.

The Governing Body provides strategic leadership to the equality and diversity agenda, which is in part achieved by establishing and embedding the Equality and Diversity Strategy, and also by:

- Agreeing the organisation’s objectives for improving its equality performance
- Ensuring that equality is a core consideration in Governing Body discussions and decisions
- Leading by example by actively championing the equality and diversity agenda and attending staff forums and meetings of patient and community groups
A Lay Member has been appointed to the CCG’s Governing Body to lead on patient and public involvement. The Lay Member has oversight responsibility for ensuring that the voice of the local population is heard in all aspects of the CCG’s business, and that equal opportunities are created and protected for patient and public involvement and engagement.

Croydon CCG’s Governing Body profile is included below demonstrating a broad representation across select protected characteristics.

<table>
<thead>
<tr>
<th>Age Band</th>
<th>30-35</th>
<th>41-45</th>
<th>46-50</th>
<th>51-55</th>
<th>56-60</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>8</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>4</td>
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<tr>
<td>Ethnicity</td>
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<tr>
<td>White British</td>
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<tr>
<td>Asian or Asian British</td>
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<td>Any other White Background</td>
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<td>Mixed White Asian</td>
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<td>Chinese</td>
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<td>Not Stated</td>
<td>2</td>
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</tbody>
</table>

The Chief Officer has responsibility for ensuring that the necessary resources are available to progress the equality and diversity agenda within the organisation and for ensuring that the requirements of this framework are consistently applied, co-ordinated and monitored. The Chief Officer is actively engaged in leading the CCG’s responsibilities for PSED.

The Director of Quality and Governance has operational responsibility for:

- Developing and monitoring the implementation of robust working practices that ensure that equality and diversity requirements form an integral part of the commissioning cycle
- Working with the South East Commissioning Support Unit (SECSU) to ensure that equality and diversity considerations are embedded within their working practices
- Ensuring that the Governing Body, staff and member practices remain up to date with the latest thinking around diversity management and have access to appropriate resources, advice, and informal and formal training opportunities

All line managers have responsibility for:

- Ensuring that employees have equal access to relevant and appropriate promotion and training opportunities.
- Highlighting any staff training needs arising from the requirements of this framework and associated policies and procedures.
- Support their staff to work in culturally competent ways within a work environment free from discrimination
Croydon Clinical Commissioning Group
Commissioning Plans

2.1 Commissioning Plans / Integrated Strategic and Operating Plan

When making decisions about the services to be commissioned Croydon CCG ensures that equality and diversity intelligence informs its decisions by routinely using the Joint Strategic Needs Assessment (JSNA) and by carrying out Equality Analysis. Croydon CCG has prepared commissioning plans which look carefully at population needs based on demographics, health inequalities and access to services. At the heart of these strategies is a key objective to reduce health inequalities, improve outcomes for patients ensuring services are accessible and responsive to patients.

In 2013 Croydon CCG produced a 3 Year Integrated Strategic Plan 2013-2016. Whilst developing the Plan, the CCG worked in partnership with the Health and Wellbeing Board to align its priorities and its vision of ‘Longer, Healthier Lives for all the People in Croydon’. The plan can be found here: [http://www.croydonccg.nhs.uk/SiteCollectionDocuments/CRO%20-%20ISOP%20-%20FINAL%20VERSION[1].pdf](http://www.croydonccg.nhs.uk/SiteCollectionDocuments/CRO%20-%20ISOP%20-%20FINAL%20VERSION[1].pdf)

2.2 Joint Strategic Needs Assessments

The purpose of JSNAs is to improve the health and wellbeing of the local community and reduce inequalities. JSNAs assess the current and future health and social care needs of the local community. These are needs that could be met by the local authority, Clinical Commissioning Groups (CCGs), the wider NHS or the voluntary and community sector. This analysis of needs is used to help to determine what actions local authorities, the local NHS and other partners need to take to meet health and social care needs, and to address the wider determinants that impact on health and wellbeing.

The summary of the Croydon JSNA combines a key dataset, highlights areas where Croydon’s performance relative to the rest of England is better/improving over time or worse/deteriorating over time. The information is intended to give an overview of comparative data for Croydon to inform strategic prioritisation and commissioning decisions. Areas highlighted in the report should be investigated further in the context of other local intelligence.

The summary of the JSNA Key Dataset

The JSNA Key Dataset contains a wealth of information that can be used to inform strategic prioritisation, commissioning decisions and the refresh of the Joint Health and Wellbeing Strategy.
There are areas where Croydon’s performance is better than other local authorities/CCGs and the trend is improving. However, the JSNA asks all in the health and social economy to focus on the areas below where there are challenges and/or emerging issues:

<table>
<thead>
<tr>
<th>Challenges</th>
<th>Emerging Issues</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Giving our children a good start in life</strong></td>
<td><strong>Giving our children a good start in life</strong></td>
</tr>
<tr>
<td>o Childhood immunisations</td>
<td>o Preventing illness and injury and helping people recover</td>
</tr>
<tr>
<td>o Youth offending</td>
<td>o Preventing illness and injury and helping people recover</td>
</tr>
<tr>
<td>o Excess weight in 10-11 year olds</td>
<td>o Preventing illness and injury and helping people recover</td>
</tr>
<tr>
<td><strong>Preventing premature death and long term health conditions</strong></td>
<td>o Preventing premature death and long term health conditions</td>
</tr>
<tr>
<td>o Gap in life expectancy between deprived and affluent areas for women</td>
<td>o Preventing premature death and long term health conditions</td>
</tr>
<tr>
<td>o NHS Health Checks</td>
<td>o Preventing premature death and long term health conditions</td>
</tr>
<tr>
<td><strong>Providing integrated, safe, high quality services</strong></td>
<td><strong>Providing integrated, safe, high quality services</strong></td>
</tr>
<tr>
<td>o People entering talking therapies</td>
<td>o Preventing premature death and long term health conditions</td>
</tr>
<tr>
<td>o Diagnosis rate for dementia</td>
<td>o Preventing premature death and long term health conditions</td>
</tr>
<tr>
<td><strong>Wider determinants of health</strong></td>
<td><strong>Wider determinants of health</strong></td>
</tr>
<tr>
<td>o Adult re-offending</td>
<td>o Preventing premature death and long term health conditions</td>
</tr>
</tbody>
</table>

**Challenges** *(Areas where Croydon's performance needs to improve)*

- Giving our children a good start in life
  - Childhood immunisations
  - Youth offending
  - Excess weight in 10-11 year olds

- Preventing illness and injury and helping people recover
  - HIV, sexually transmitted infections and reproductive health
  - Flu vaccination
  - Drug and alcohol treatment

- Preventing premature death and long term health conditions
  - Gap in life expectancy between deprived and affluent areas for women
  - NHS Health Checks

- Supporting people to be resilient and independent
  - Homelessness
  - Carers’ satisfaction with services

- Providing integrated, safe, high quality services
  - People entering talking therapies
  - Diagnosis rate for dementia

- Improving people’s experience of care

- Wider determinants of health
  - Adult re-offending

**Emerging Issues** *(Areas that will become challenges if current trends continue)*

- Giving our children a good start in life
  - Educational attainment at key stage 2

- Preventing illness and injury and helping people recover

- Preventing premature death and long term health conditions
  - Life expectancy for men (including gap between deprived and affluent areas)
  - Cancer incidence and deaths

- Supporting people to be resilient and independent
  - Emergency readmissions within 30 days of discharge

- Providing integrated, safe, high quality services
  - Emergency admissions for chronic ambulatory care sensitive conditions

- Improving people’s experience of care

- Wider determinants of health
  - Adult re-offending
The Key Dataset is part of Croydon’s annual approach to Joint Strategic Needs Assessment (JSNA). The full 2013/14 JSNA, including four key topic chapters on homelessness, domestic violence, alcohol, and healthy weight can be found at http://www.croydonobservatory.org/2013-2014_JSNA

This data, along with feedback from clinicians and the public, has helped CCG to develop its commissioning intentions for 2014/15

2.3 Croydon CCG Commissioning Intentions 2015/16

This year the CCG’s Commissioning Intentions are drawn from the CCGs Operating Plan, and the SWL intentions are drawn from the joint SWL 5-Year Strategic Plan.

NHS Croydon CCG faces significant challenges including an ageing population, rising demand for services and high public expectations of those services.

In addition to this Croydon Clinical Commissioning Group also faces significant financial challenges during 2015/16 and in future years with the consequence that funding will not be able to match the increasing demand for NHS services.

Croydon CCG will commission health services for its population, based on patient need, current performance, the 2 Year Operating Plan and South West London 5 Year Strategy and the current definition of CCG commissioning responsibilities.

The Commissioning Intentions should also be read in the context of the South West London Collaborative 5 Year Commissioning Strategy, Better Care Fund and the London Standards that recognises that that services will no longer be focused on secondary sector acute provision, but instead the whole health economy.

South West London 5 Year Strategic Plan

In June 2014, the South West London Collaborative Commissioning Group produced the South West London 5 Year Strategic Plan. The SWL five plan is being developed by the six Clinical Commissioning Groups (Croydon, Kingston, Merton, Richmond, Sutton and Wandsworth) working with commissioning colleagues from NHS England and in partnership with local authorities, NHS providers, patients, local people and key stakeholders.

The SWL Commissioning Strategy sets out initiatives across eight areas of work:

- Children’s services
- Integrated services
- Maternity
- Mental Health
- Planned Care
- Primary Care Transformation
- Urgent and Emergency Care
• Cancer Care

All 6 SWL CCGs support the clinical case for change and will commission to London Quality Standards, 7 day working and Keogh Review recommendations. The CCGs want to be clear about the standards they expect for patients and to work with the local providers of care to determine the best way to achieve that change. The CCGs also want to set clear standards for mental health, community services and primary care.

South West London 5 Year Strategic Plan can be found here:


2.4 Transformational Commissioning

During 2014, the CCG has continued implementing its Transformation Programme, to improve quality outcomes, to release efficiencies and reduce an over reliance on hospital services.

We are determined that by implementing our transformation programme through better care and by working closely with our commissioning partners, NHS England, South West London Collaborative, the London Borough of Croydon, neighbouring Clinical Commissioning Groups and our Providers, alongside our increases in resource allocations, that we will maximise the resources available to us to ensure that we can continue to deliver high quality services and improve outcomes for the populations we serve.

To ensure that there is choice available in settings other than hospital we aim to transform the way we deliver services at the intermediate, primary and community level. There are several key strategies which are part of the wider transformation programme:

- Prevention, Self-Care and Shared Decision Making Strategy
- Primary and Community Strategy
- Long-term conditions
- Urgent Care
- End of Life Care
- Making best use of medicines
- Planned Care
- Children and Young people

The strategies and key work streams we expect providers working together to be proactive in shaping their services to ensure greater integration and to meet the strategic priorities identified in these strategies.
The route we have taken to develop our commissioning options is one of partnership, engaging as much as possible with our members and clinical leaders so that all service improvements are truly needs based and clinically driven.

In order that we demonstrate the impact of these commissioned improvements, the CCG will be looking to use outcome measures to monitor the success of each initiative. Outcome based commissioning will use a rich variety of data and “softer” information and views to demonstrate how our new services will have improved the lives and experience of Croydon residents.

The Two Year Operating Plan for NHS Croydon Clinical Commissioning Group (CCG) is to be read in conjunction with the South West London 5 Year Strategic Plan and the Integrated Better Care Fund.

Highlights of the two year Operating Plan include:

- National Priorities
- South West London Priorities
- NHS Croydon CCG Priorities
- Our Population
- Our Challenges over the next 2 Years
- Our Successes in 2013/14
- Our Priority Programme Areas
- Our Financial Position
- Our Quality Enablers

The 2014-2016 Operating Plan can be found here:


**2.5 Quality Innovation Productivity and Prevention (QIPP) programme**

QIPP is a national programme for the NHS aiming to make efficiency savings while delivering Quality, Innovation, Productivity and Prevention outcomes.

The general equality recommendation across all work streams is that each project undergo an Equality Analysis screening assessment, with a full Equality Analysis undertaken where indicated.
The main objective of Croydon CCG is to improve the quality of healthcare commissioned and provided for the population of Croydon. There is a Quality, Improvement, Productivity and Prevention (QIPP) programme running which has 6 significant or “high impact” areas of service transformation.

The key initiatives are:
- Learning Disabilities – Continuing Care
- Mental Health – Continuing Care
- TACS (Transforming Adult Community Services)
- Adult Continuing Care
- Paediatrics – Asthma
- Prescribing
- Diabetes
- Gynaecology
- Urology
- Cardiology
- Musculoskeletal Services
- Mental Health
- Urgent Care (UCC)
- Falls and Bone Health

3. Partnerships

As a commissioning organisation it is vital for Croydon CCG to work closely with other local commissioners, monitors, evaluators and enforcers. We have spent time developing local relationships to ensure that we do not duplicate work, that the needs of all patients are known and provided for and that there is a good “strategic fit” to our work.

3.1 Integrated Commissioning Unit with Croydon CCG and Croydon Council Commissioners

In 2013 Croydon Clinical Commissioning Group and the London Borough of Croydon established an Integrated Commissioning Unit that plans together as relevant; to meet the needs of the populations and through the Health and Social Care portal will together monitor progress against expected outputs and outcomes.

The Integrated Commissioning Unit progresses jointly agreed initiatives, including, for example:
- Children and young people
- Transformational Strategy for Long Term Conditions / Older Frail People
- Mental health

The CCG and the Council have developed joint commissioning intentions that will focus on:
• **Transformation / Community Services** – out of hospital care, commissioning wide-range of community-based services to reduce the need for unplanned hospital activity/admissions
• **Urgent Care** – demand and capacity whole across the whole system
• **Effective Transition** – Children’s to Adult services
• **Rebalancing Mental Health Acute and Community Services**
• **Enhancing Mental Health Care in Primary Care**
• **Improved capacity in Psychological Therapies** in primary and secondary care
• **Re-commission Mental Health Older Adults and Dementia services**
• Have in place **requirements and actions from Winterbourne View Concordat.**

### 3.2 Public Health

From April 2013, the London Borough of Croydon became responsible for commissioning most public health services.

Croydon CCG works collaboratively with the public health commissioners in Croydon Council to deliver joint priorities as set out in the health and wellbeing strategy and ensure the best health outcomes for local people.

This includes working together to:

- Reduce the prevalence of smoking through primary prevention focused on schools and youth settings, enforcing tobacco control measures, and providing a range of services to help people quit
- Tackle overweight and obesity through promoting physical activity and a healthy diet across the life course and ensuring that appropriate weight management and treatment services for obesity are in place
- Improve sexual and reproductive health by provision of advice, prevention and promotion, testing and treatment (including promotion of opportunistic testing and treatment in healthcare settings), and provision of high quality termination of pregnancy services.

The council is also responsible for commissioning adults’ and children’s social care services.

In July 2014 the Director of Public Health published the Croydon Health and Wellbeing Annual Public Health Report 2014. New Addington and Fieldway have been chosen as the focus for this year’s Annual Public Health Report. This provides an opportunity to showcase these areas and some of the ways in which individuals, communities and businesses are working together to maintain and improve their health and wellbeing.

### 3.3 Health and Wellbeing Boards

Croydon Health and Wellbeing Board (HWBB), is a partnership of local councillors, officers of the council, CCG clinicians and executive managers, public health consultants, Croydon HealthWatch and representatives from the voluntary sector.
The Joint Health and Wellbeing Strategy 2013 - 2018 sets out 3 strategic goals;

- increased healthy life expectancy and reduced differences in life expectancy between communities
- increased resilience and independence
- a positive experience of care

3.4 Community, Voluntary and Faith Sector Organisations (including Carers support)

We believe that by embedding performance and quality improvement in our commissioning processes and communicating and engaging with the public and patients who use our commissioned services, Croydon Clinical Commissioning Group can facilitate an honest dialogue about health, health services and patient needs and views – critical to effective and responsive care. In the way that we work, Croydon Clinical Commissioning Group embodies the principles of accountability, putting the patient first in everything we do as championed by the Francis Report Recommendations.

Croydon CCG has a programme of listening and acting on patients and public feedback. Themes from the workshops currently held are highlighted section below:

**Involving Our Public and Patients in Work streams**

3.4.1 Prevention, Self-Care and Shared Decisions Making

Healthwatch and Croydon Voluntary Action (CVA) are members of the steering group. All members of the group bring their expertise and there is a commitment to streamline work efforts by working within communities with high deprivation to empower them to help themselves where appropriate to do so.

3.4.2. Diabetes

Lay people have critiqued ideas and made recommendations for service delivery throughout the planning phase. Representatives from the local branches of Diabetes UK joined the CCG work group at this phase. Working together they have developed a range of ideas to be incorporated into the new service specifications and service delivery. One example where patient involvement will continue in delivering the service is an initiative with Diabetes UK locally to use volunteer Diabetes UK “ambassadors”. These are volunteers working through Diabetes UK, but will liaise with the CCG / GP networks to target specific groups and communicate particular information at community events or stalls in a local supermarket, for example.
3.4.3 Cardiology
A cardiology action group including patients, lay representatives from the British Heart Foundation, Voluntary Sector and Healthwatch was set up to advise and approve recommendations on future services. The vision for providing more cardiology services to patients in community settings was presented to patients at Croydon CCGs first Patient Forum in September. Feedback from the Forum will inform the cardiology service design. Further patient engagement is planned comprising patient focus groups and a large scale survey for patients with heart conditions, so that we meet the specific needs of patients experiencing the current service.

3.4.4 Older People & Physical and Sensory Impairment Partnership Group
This group is newly established and aims is to develop, monitor and evaluate strategies, policies and commissioning plans to meet identified needs of older people and people with physical and sensory impairment.

3.4.5. Mental Health
The Mental Health Strategy was tested with a wider range of service users and voluntary sector reps. The themes that emerged and need to be addressed include:

- Barriers to care in primary care
- Systemic / organisational barriers to accessing care
- The need for alternatives to medical treatments
- Ideas for service models and designs
- Quality of Inpatient care
- Frustration with continuing inequality in access to services

3.4.6. Urgent and Emergency Care Steering Group
There is lay representation with the role of developing strategy and service redesign. The lay representative has also been involved with procurement processes to ensure that the patient voice is heard in service redesign and delivery.

3.5 Croydon Healthwatch
Croydon Healthwatch was officially launched on 28th November 2013. Croydon Healthwatch is the independent champion of local people working to improve health and social care services. Croydon Healthwatch:

- wants everyone in Croydon to have the best local care and listens to patients, service users, carers and staff to gather their views and experiences of local health and social care services.
- uses those views to report on what services are doing well and if needed make recommendations on how they can be improved.
- works with people who plan and run services so that local voices are part of decision making.
provides Croydon residents with information and signposting about their choices and what to do when things go wrong.

Croydon Healthwatch has the power to enter and view health and social care services across Croydon as well as produce reports and recommendations to influence the way services are designed and delivered.

Croydon Healthwatch has consistently represented the views of local people during the year and taken part the CCG’s Patients and Public Reference Group and the CCG’s Equality Delivery System process.

3.6 Safeguarding - Croydon Safeguarding Adults and Children

The CCG is committed in taking all reasonable steps to promote safe practice and to protect children and adults at risk within Croydon from harm, abuse and exploitation. It recognises the strength in working collaboratively to address this safeguarding agenda with our providers and in partnership with our Local Authority & Croydon Safeguarding Children and Adult Boards. The Chief Nurse is a member of both these boards and designated safeguarding leads are members of either the adult or children boards. The CCG’s Safeguarding strategy sets out how Croydon CCG will work with others to safeguard and promote the welfare of children and adults at risk of harm.

Safeguarding is everyone’s responsibility, therefore Croydon CCG’s responsibility is to ensure that its staff, providers and contractors are aware and understand their responsibilities to safeguard and promote the welfare of children and vulnerable adults at risk. These responsibilities take effect during the course of their employment/ providing services regardless of whether they have direct or indirect contact with children and families and vulnerable adults at risk.

The Safeguarding Team sits within Croydon CCG and works closely with partners across the health economy and the local authority. This includes the Croydon Safeguarding Children Board and the Croydon Safeguarding Adult Board.

The Croydon Safeguarding Adult Board makes strategy decisions in response to national and local policy developments, suggestions and any problem issues that arise. It ratifies terms of reference and work plans for its sub groups, endorses work carried out by them, and oversees the implementation of subsequent developments. Croydon CCG is represented on the CSAB.

Croydon Safeguarding Adults Board Priorities for 2014/15

The following priorities have been identified to support on-going progress with the business plan:

- Further develop links with the Safeguarding Children Board and the Health and Wellbeing Board.

- Develop quality assurance of the work of organisations and of the partnership in safeguarding adults.

- Strengthen service user involvement in safeguarding enquiries in line with
making Safeguarding Personal and develop regular service user feedback to inform practice.

- Develop the involvement of people who use services in practice and in strategic development.

- Embed and develop the progress made in commissioning and contracting.

- Strengthen transparency and appropriate sharing of information across the partnership, particularly in respect of quality of care issues and any organisational learning that is capable of informing improvement across the whole partnership.

- Develop clear guidance and standards on workforce issues for application across the partnership.

- Develop a common approach to identification, assessment and management of risk across the partnership.

- Facilitate improvement in the context of the Mental Capacity Act: understand where there is need for improvement in practice and policy and then plan to make those improvements in 2015/16; manage the changes in Deprivation of Liberty Safeguards in the light of the recent ruling in the Supreme Court.

- Ensure that safeguarding adults’ activity is consistent with the requirements of the Care Act.

The Croydon Safeguarding Children Board (CSCB) is a statutory multi-agency organisation that brings together local agencies that work to safeguard and promote the welfare of children and young people up to the age of eighteen in Croydon. The Board meets regularly throughout the year to discuss a wide range of issues.

The CSCB is designed to help ensure that children are safeguarded properly by agencies working effectively together. Membership includes senior representatives from Croydon Council, all Croydon health bodies, Croydon Metropolitan Police teams, schools and voluntary organisations. Croydon CCG is represented on the CSCB and lead on or participate in a number of work streams including the chairing/membership of sub groups.

Croydon Safeguarding Children Board Strategic Objectives 2014-15

- In the light of the summer 2014 needs assessment, to keep under review agencies’ responses to a growing, and more deprived, population and greater demand, in the context of public finance restraint, and to ensure any required mitigating actions are in place.

- Embed growing strengths in quality assurance and ensure it drives further improvement in safeguarding practice.
• Embed growing strengths in learning, training and development and the lessons from SCRs

• Further strengthen partnerships and a whole system approach in early help

• Further embed improvements in missing children and children who have being sexual exploited

• Review the partnerships approach to safeguarding under the age of one

• Develop a strategy for female genital mutilation.

• Further strengthen ‘think family approach, particularly in relation to children with parents who have mental health problems, domestic violence and substance misuse issues

• Strengthen engagement with local communities and develop the use of feedback from children and parents.

4. Procurement and Commissioning

Procurement and commissioning form our core functions with respect to:

• Hospitals
• Community services
• Mental Health
• Ambulance
• Medicines Management
• Voluntary sector

In order to have due regard to equality impacts in our procurement and commissioning we make use of our equality analysis at the time we make decisions. This is especially important with respect to Any Qualified Provider (AQP). The CCG cannot delegate its responsibilities and duties for equality but where another provider is being procured or commissioned to deliver services on behalf of the CCG they will be required to comply with the relevant equality duties. If such a provider is already subject to the Public Sector Equality Duties (PSED) the CCG will seek evidence of their fulfilment of the Duty as part of its assessment of their procurement.

The Department of Health national contract is routinely used by Croydon CCG. This follows a review of contracts which showed wide variation in use of contract templates. The national contact includes provider requirements around ‘equity of access, equality and no discrimination’ and ‘pastoral, spiritual and cultural care. Further evidence will need to be gathered to demonstrate how providers meet these requirements.
5. Croydon Mental Health Strategy

Croydon’s Integrated Mental Health Strategy sets out the Croydon Council and the CCG’s plan for adult mental health, which includes older adults with functional mental illness. The strategy outlines the fact that mental ill-health has a broad impact across many aspect of society, not only health and social care services, but also on, education and employment and criminal justice including, police. The strategy covers the financial years 2014 – 2019, in line with the CCG’s 5 year strategy. It will be refreshed and/or reviewed on an annual basis as appropriate. In addition to this strategy, yearly work plans will be developed which detail the work that Croydon CCG and social care commissioners will take forward. Croydon Integrated Mental Health Strategy for Adults 2014-19 can be found here: http://www.croydon.gov.uk/democracy/dande/policies/health/imh-strategy

Why it was commissioned:
If Croydon’s mental health services are going to be fit for purpose over the next three years and beyond, changing how we do things is of paramount importance. In meeting this challenge we will need to redesign our services in order to reduce our reliance on more expensive secondary and specialist mental health services. This will require more to be done in primary care and within community settings. There will also need to be more clarity about service outcomes, as well as us knowing what interventions are most effective. Putting services users and carers at the heart of the system can help develop an integrated approach to delivering mental, physical health and social care services.

A broad range of stakeholders were engaged in the production of the strategy ongoing engagement continues with the production of the action plan.

6. Outcomes Based Commissioning for over 65s

Croydon CCG and Croydon Local Authority are exploring whether commissioning for outcomes is the right approach for care of older people in particular, many of whom will need a wide range of services delivered in a coordinated way. We have developed our local Outcomes Framework for measuring outcomes in a way which places emphasis on the patient experience and clinical outcomes, but still takes account of the process of service delivery.

Providers will be expected to deliver integrated pathway services for older people and adult community services in line with core contract standards including national and local quality standards and NHS Constitution principles. In addition, an outcomes-based commissioning approach could be employed to shift the emphasis from what services will be provided to also consider what outcomes will be achieved.

7. Learning Disabilities

The Joint Commissioning of health services for people with Learning Disabilities continues to be an important priority for the CCG. The health and well-being of people with a learning disability is
paramount and this is ensured by the commissioning and delivery of good quality general and specialist healthcare as well good support for people with learning disabilities.

The CCG acknowledges the need to support those with a Learning Disability to access services within the acute hospital, the funding of an ‘acute liaison nurse’ has resulted in improvements in the quality and delivery of services and the patient experience.

There is an effective and identifiable strategic presence within the CCG via the Integrated Commissioning Unit which actively informs the commissioning and delivery of accessible, high quality health care for people with Learning Disability.

Commissioned services have inbuilt requirements to ensure the emotional and physical wellbeing of people with a Learning Disability are met:

- Specialist learning disability staff that both support mainstream practice and directly serve those with the most complex needs
- Specialist learning disability health services that promote safe, person-centred support and evidence based practice.
- Integrated planning and the development of care pathways that promote individualised services that are closer to home.
- Support to people and families when needed through swift access to the services of specialist professionals including medical, nursing and allied health professionals.
- Investment in training and development provided to specialist professionals; families and for front line support staff to enable them to better support people where they live.
- Ensuring that the ‘voice’ of people and families is heard and there is evidence of appropriate representation, including independent advocacy.

There is an emphasis on receiving feedback about the experience of people with a learning disability and their carers/families via the LDPB. This is co-chaired by a Director of Adult care commissioning and the Director of Croydon People First who has a learning disability- provides the oversight and governance of the completion of Croydon Joint Health and social care Assessment Framework. This is an annual process coordinated by the Learning disability Health Observatory which uses the experiences and the performance of health and social care services to rate the performance and identify areas for improvement. The results are ratified and published via NHS London. In 2013/14 – Croydon were the best performing borough in London achieving 25 green ratings and 2 ambers. One of the ambers was about access to screening programs and the other about employment. The reported uptake of annual health checks was in excess of the national average of 65%.

The process for 2014/2015 commenced with an LD Health day on November 7th 2014 which focussed on whether people feel that they are treated with compassion, dignity and respect in health and social care services and also to focus on carers and whether they feel they get the support they need when they need it. 95 people attended and there was a consensus vote that for Croydon people agreed with both statements.
8. Patient and Public Engagement

Legal Duties - Section 242 of the NHS Act 2006, places a statutory duty on NHS organisations to involve and consult patients and the public in the planning of service provision, the development of proposals for change and decisions about how services operate. Section 24A of the NHS Act 2006 places a statutory duty on NHS organisations to report on consultations and the influence on commissioning decisions.

Patient Engagement and Experience is reported quarterly to the Governing Body via the Quality Sub Committee. We aim to continually improve the ways in which we involve local people – including those from diverse groups – in decision making, working with clinical commissioners to ensure Croydon CCG continues to develop engagement in the future.

An essential part of our role is ensuring engagement is meaningful. We do this by listening to patients, members of the public, local communities, carers, health professionals and local groups and organisations, and using information they share with us to inform the work we do. Giving local people the opportunity to influence decision making (and most importantly communicating just how they have influenced) is vital if meaningful engagement is to continue.

During 2013/2014, we successfully included Patient and Public Involvement in a number of our proposals for service redesign.

We formed working groups or steering groups aligned to specific projects, to ensure our service users were given a genuine opportunity to influence the redesign of services they use. We invited people to join the Groups on the basis that they are ‘experts by experience’ i.e. they all had used the services directly, or indirectly - in the capacity of carer, relative or friend. We also hosted larger events which concentrated on broader themes like ‘improving services for older people’, self-care, and shared decision making.

There are many benefits to establishing these groups, most notably, to enable integration of the service user perspective in the planning and development of future services.

This benefits us as commissioners as it helps ensure our service redesign proposals are relevant and appropriate for its service users, their families and carers.

It benefits patients, their families and carers as they are more likely to use services appropriately and have better patient outcomes, if they are given the opportunity to help shape services around their needs.

We have developed a diversity monitoring form, to record the diversity of participants actively engaged in our events; the data collected is based on the nine protected characteristics, as specified in the Equality Act 2010, as well as collecting borough postcode data.

The data collected over the last year shows that the majority of participants are white, Christian and in the 40+ age groups. Our work plan for 2014/2015 (attached as Appendix 2) identifies the actions we will put in place to help ensure we routinely engage with a more representative cross section of our population.
Examples of how we have met the Collective Duty are shown below

- Borough Partners and Patients Workshop
- Quarterly Patient and Public Forum
- Patient Participation Group Workshop
- Mental Health Strategy
- Services for older people (Outcomes based commissioning)
- Older People and Physical and Sensory Impairment Partnership Group
- Urgent and Emergency Care Steering Group

The Croydon CCG Patients and Public Reference Group was established in 2014. The Group is made up of representatives from Health Watch, PPGs, Local Authority, Third Sector and other stakeholders and chaired by the Board Lay Member for PPI. The group’s remit is to test the CCG’s decisions, critique the quality of engagement activity and act as a conduit to local communities.

9. Complaints / Patient Advice and Liaison Service (PALS)

The CCG purchased these services from the South East Commissioning Support Unit (SECSU). The PALS and the Complaints Service deal with queries, concerns and formal complaints relating either to the commissioning of services or to services commissioned by Croydon CCG.

Since October 2013, Equality and Diversity monitoring forms were sent with acknowledgment letters to complainants. As numbers of complaints and received by the SECSU for Croydon CCG were low, it was not possible to analyse data to provide any meaningful conclusions.

Equality monitoring is undertaken as part of evaluation of these services, and the information gathered will be analysed, bought together in Quality reports so trends and themes can be identified and addressed.

The challenge in the future is how the SECSU and CCG colleagues work together and with their communities to empower a more diverse pool of complainants to give feedback and actively seek information about CCG services.

The Complaints and PALS policy sets out the process for accessing Complaints and PALS services to ensure flexibility, access and increase provision of patient information.

Information on PALS and Complaints is available on the CCG website.

Information on PALS and Complaints is available on the CCG website [http://www.croydonccg.nhs.uk/CONTACT/Pages/Comments,complimentsandcomplaints.aspx](http://www.croydonccg.nhs.uk/CONTACT/Pages/Comments,complimentsandcomplaints.aspx)

Advocacy - independent advocacy is available to all patients. The ICAS (Independent Complaints and Advocacy Service) provider will ensure that any other support e.g. interpreters is also available to our patients.
10. Interpreting service

This service enables those with interpreting needs to access and increase knowledge of local health services, improving the health and wellbeing of marginalised communities and supporting community cohesion. The CCG re-procured interpreting services in early 2013 against a new improved service specification, with associated cost efficiencies.

11. Serious Incidents (SI)

The SECSU’s SI management service ensures that appropriate management systems are in place across CCG commissioned providers to:

- Meet nationally identified standards;
- Report all SIs in a timely fashion and without prejudice;
- Have systematic measures in place to robustly and effectively manage SIs;
- Ensure actions are taken to improve quality and safety and to minimise the risk of future reoccurrences;
- Share the learning.

Croydon CCG has purchased this service from the SECSU.

The CCG reviews the performance of all commissioned providers on behalf of Croydon residents and intelligence gained from is used to influence contract monitoring, quality and safety standards for care pathway development and service specifications.

12. Main Provider Organisations

Croydon CCG has in place mechanisms to meet its duties to ensure that key provider organisations comply with their equality duties, working in partnership with main provider organisations to include equality, diversity and human rights clauses within its contract. This also requires the CCG to monitor workforce and service delivery activity in relation to the Public Sector Equality Duty (PSED).

12.1 Croydon Health Services NHS Trust

Croydon Health Services NHS Trust is one of the main providers of hospital and community services in Croydon. Croydon CCG is the lead commissioner for this organisation and ensures that it meets its legal duties in relation to equality, diversity and human rights by including clauses within its contract. This also requires the Trust to monitor workforce and service activity in relation to the Public Sector Equality Duty (PSED).

Croydon Health Services NHS Trust published its objectives in 2012. The Trust is currently implementing the Equality Delivery System (EDS) to help progress its objectives and to specifically
help review its equality information, generate greater engagement with patients and staff and plan its equality priorities.

Equality, Diversity and Human Rights is now part of the Trust’s Mandatory and Statutory training programme and staff are able to complete an on line module. To help achieve full compliance, the Trust is also holding a number of group sessions.

In accordance with PSED the Trust has published workforce data regarding the protected characteristics of its staff in regards to recruitment activity, employee relations and PDRs/appraisals.

The latest Annual Equality Reports for Croydon Health Services NHS Trust can be accessed by following the link:

12.2 South London and Maudsley NHS Foundation Trust

South London and Maudsley NHS Foundation (SLaM) Trust provides mental health services in Croydon.

The Trust delivers specialist mental health and substance misuse inpatient services to Lewisham’s population. They provide services for adults, as well as specialist services for young people. These include daycare, inpatient care and community services.

SLaM has been building fairness and equality into the way that everyone works whilst delivering their Single Equality Scheme during 2010-2013. During 2012-2013 SLaM has built on what they have achieved by continuing to work with service users, staff, partners organisations and local communities. And they have been doing this by using the Equality Delivery System as a framework to identify where they need to focus their attention to improve their on equality.

The Trust held two equality Partnership Time Events in June and November 2014. The events have been an opportunity to take stock, highlight progress made in achieving their equality objectives and to consider where to focus their attention over the next twelve months to continue to improve the experience and outcomes for service users and carers. The results will be published in 2015.

The latest Annual Equality Reports South London and Maudsley NHS Foundation Trust can be accessed by following this link.
13 Equality and Diversity Progress

13.1 Equality and Diversity Strategy and Objectives

Croydon CCG developed an Equality and Diversity strategy to support delivery of their legislative responsibilities as a public body, an employer and a commissioner of services. The Strategy was designed in response to the requirements of the Equality Act 2010 and builds on the previous actions and objectives that were contained in the former Single Equality Scheme. It is also designed to meet the requirements the Human Rights Act and the NHS Equality Delivery System (EDS).

The action plan supports the implementation of the strategy/equality objectives and outlines how the CCG proposes to meet its equality duties. Key objectives are focused around: putting appropriate governance arrangements in place, providing equality and diversity training, ensuring Equality Analysis assessments are conducted on all documents and services, development of patient participation groups to represent communities, utilising the JSNA and other data sources to identify gaps in service provision and ensuring Human Resources (HR) and employment policies are in line with the Equality Act 2010 and implementing the Equality Delivery System (EDS).

13.2 Equality Objectives

The following equality objectives have been grouped into the following key objective areas that will support Croydon CCG’s vision:

Croydon CCG is committed to:

I. Promoting equality and diversity
II. Ensuring that all commissioned and contracted services deliver better outcomes for our population as a whole and those with protected characteristics.
III. Empowered, engaged and included staff

An Equalities Objectives Action Plan was developed in November 2013 with internal and external stakeholders.

During 2014 Croydon CCG and SECSU staff have steadily worked together to achieve success in delivering the Equality Objectives and Action Plan. The Action Plan can be found at Appendix 1.

13.2 Equality Delivery System (EDS)

In 2011, the Department of Health introduced a new tool for monitoring equality outcomes called the Equality Delivery System.

The EDS enables the CCG to:
- Analyse its performance against the EDS Goals and Outcomes
- Identify any gaps or areas that require improvement
- Identify any high risk areas as priorities for setting objectives

The EDS has four Goals:

1. Better health outcomes
2. Improved patient access and experience
3. A representative and supported workforce
4. Inclusive leadership

During 2014, engagement was carried out with local stakeholders and staff in order to verify the process, and the overall results of the assessment are included below:

**Fig. 1 Croydon CCG Equality Delivery System (EDS) Grading for 2013-14**

<table>
<thead>
<tr>
<th>EDS2 Goal</th>
<th>Grading achieved 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 – Better Health Outcome</td>
<td>DEVELOPING</td>
</tr>
<tr>
<td>2 – Improved patient access and experience</td>
<td>DEVELOPING</td>
</tr>
<tr>
<td>3 – A representative and supported workforce</td>
<td>ACHIEVING</td>
</tr>
<tr>
<td>4 – Inclusive leadership</td>
<td>ACHIEVING</td>
</tr>
</tbody>
</table>

Overall Croydon CCG is assessed as **DEVELOPING** for EDS2 for Goals 1 and 2. This means that the patient data broken down into protected characteristics the CCG was able to access shows that overall, the majority of people in three to five protected groups fare well when accessing and experiencing Croydon CCG commissioned services compared with those who do not share any protected characteristics.

The CCG grade for EDS2 Goal 3 was agreed as ‘**ACHIEVING**’ which means that the data available to the CCG supplied data for most of the protected characteristics therefore, overall most staff members from most protected groups fare as well as the overall workforce.

**EDS2 Grading – Goal 4: Inclusive Leadership**

Goal 4 was assessed internally as ‘**ACHIEVING**’ which means that Croydon CCG has achieved some success in leading the way on commissioning inclusive health services which meet the specific and general health needs of all people in Croydon, in particular by focusing on getting services right for those who experience the greatest need and barriers due to sharing one or more protected characteristic. In part, the CCG has done this through its Governing Body and Senior Directors strong and sustained commitment to promoting, equality, within and beyond the CCG.
and they have regularly taken account of and managed equality related risks. An action plan for improvements in Goal 4 will be developed. A full report on the EDS process can be found at Appendix 3.

13.3 Workforce information

The Public Sector Equality Duty highlights that information on the make-up of the workforce must be published where public authorities have 150 or more employees. Croydon CCG has a total of 45 employees and additionally purchases an extensive range of commissioning support services from the Commissioning Support Unit.

The workforce is the major factor in delivery of Croydon CCG business. A quarterly workforce report is submitted to the CCG including workforce information relating to numbers of staff in post, turnover and sickness absence and an equalities profile relating to six of the nine protected characteristics. Monitoring will continue to identify any priority areas to address.

Croydon CCG Workforce Equalities profile

Although we have no legal duty to publish our workforce data as we employ less than 150 staff we have chosen to do so as part of our good practice. The following tables are a snapshot profile of the organisation (by percentage), relating to six of the nine protected characteristics as at 30th September 2014. Monitoring will continue to identify any priority areas to address.

<table>
<thead>
<tr>
<th>Gender %</th>
<th>Ethnicity %</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>A White - British</td>
</tr>
<tr>
<td></td>
<td>C White - Any other</td>
</tr>
<tr>
<td></td>
<td>P Black or Black</td>
</tr>
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<td></td>
<td>F Mixed</td>
</tr>
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<td></td>
<td>N White &amp;</td>
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<tr>
<td></td>
<td>M Black or Black</td>
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<td></td>
<td>H Asian or Asian</td>
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<tr>
<td></td>
<td>R Chinese</td>
</tr>
<tr>
<td></td>
<td>L Asian or Asian</td>
</tr>
</tbody>
</table>
The following policies have been approved by the CCG:

- Disciplinary policy
- Sickness & Absence policy
- Flexible Working policy
- Capability Policy
- Whistleblowing Policy
- Organisational Change
- Bullying and Harassment Policy
- Grievance Policy
In terms of training and development, we have agreed a training package with the SECSU to provide and monitor mandatory and statutory training including Equality and Diversity training. Further training may be commissioned following a training needs analysis.

Staff Forum
The CCG has agreed to implement a local staff consultative/engagement forum. There are a number of positive reasons to establish a local forum.

Summary of Croydon CCG Equality and Diversity progress in 2014

<table>
<thead>
<tr>
<th>Embedding Equality and Diversity into Business</th>
<th>Protected Characteristics</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Equality Delivery System2 completed for 2013-14</td>
<td>• Diabetes Community Services – reconfiguration of services in consultation with local Diabetes UK.</td>
</tr>
<tr>
<td>• Equality Objectives Action Plan delivered in 2014.</td>
<td>• Musculoskeletal services whole system review in consultation with local people and patients.</td>
</tr>
<tr>
<td>• 40% CCG Staff undertaken Dignity and Respect at Work training</td>
<td>• Croydon Learning Disability Self-Assessment Framework 2013-14 highlighted good practice, both in specialist and universal services. Croydon were the best performing borough in London.</td>
</tr>
<tr>
<td>• Key staff from Croydon CCG have undertaken Equality Analysis training (provided by SECSU)</td>
<td>• Outcomes Based Commissioning for over-65s engagement with a range of protected characteristics.</td>
</tr>
<tr>
<td>• Equality Analysis carried out for o Human Resources Policies</td>
<td>• Mental Health Strategy – engagement with a range of protected characteristics.</td>
</tr>
<tr>
<td>o CCG Strategies</td>
<td>• Leading Maternity Clinical Decision Group (part of South West London Collaborative Commissioning Group) with a remit to improve maternity services and improve outcomes.</td>
</tr>
<tr>
<td>o CCG Procedures</td>
<td>• Share Decision Making</td>
</tr>
<tr>
<td>• Equality and Diversity updates reported to Quality quarterly.</td>
<td>• Created the Reducing Primary Care Variation strategy to ensure consistency of quality of services across the borough and ensure that specific needs of local populations are responded to when planning and implementing improvement plans. E.g. language, religion, culture and mobility.</td>
</tr>
<tr>
<td>• Equality Analyses are being completed and used for decision making.</td>
<td></td>
</tr>
<tr>
<td>• Public Sector Duty Equality Report published in January 2014</td>
<td></td>
</tr>
<tr>
<td>• Extended and sustained engagement with local communities</td>
<td></td>
</tr>
<tr>
<td>• Staff Engagement Forum established</td>
<td></td>
</tr>
</tbody>
</table>

Working with partners/stakeholders

- Integrated Commissioning Unit commissioned range of services to improve health outcomes and patient experience.
- Joint Commissioning (with Croydon Council) of Outcomes Based Commissioning for over-65s
- Joint Commissioning of Mental Health Strategy.
- Share Decision Making

Working with GP Practices

- Created the Reducing Primary Care Variation strategy to ensure consistency of quality of services across the borough and ensure that specific needs of local populations are responded to when planning and implementing improvement plans. E.g. language, religion, culture and mobility.
Appendices

Appendix 1 - Croydon CCG Equality Objectives 2013-14 Action Plan

Appendix 2 - Croydon_CCG_Participation_Duties_Report_2014_2015_Appx A

Appendix 3 - Croydon CCG Equality Delivery System2 Report

Other useful information:

<table>
<thead>
<tr>
<th>Name of document</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Croydon Health Profile</td>
<td><a href="HealthProfile2014Croydon00AH%5B1%5D.pdf">HealthProfile2014Croydon00AH[1].pdf</a></td>
</tr>
</tbody>
</table>