Equality Delivery System for the NHS - EDS2 Domain 3 Summary Report

The Robert Jones and Agnes Hunt Orthopaedic Hospital
NHS Foundation Trust

Implementation of the Equality Delivery System - EDS2 is a requirement on both NHS commissioners and NHS providers. Organisations are encouraged to follow the implementation of EDS2 in accordance with the '9 Steps for EDS2 Implementation' as outlined in the 2013 EDS2 guidance document. The document can be found at http://www.england.nhs.uk/wp-content/uploads/2013/11/eds-nov131.pdf

This *EDS2 Summary Report* is designed to give an overview It is recommended that once completed, this Summary Report is published on the organisation's website. of the organisation's most recent EDS2 implementation .

NHS Organisations Name:
The Robert Jones & Agnes Hunt Orthopaedic Hospital NHS Foundation Trust
Organisation's Board lead for EDS2:
Denise Harnin, Chief People & Culture Officer
Organisation's EDS2 lead (name/email):
EDI & OD Team rjah.edi.od@nhs.net
Level of stakeholder involvement in EDS2 grading and subsequent actions:
Regular agenda item at Joint Consultative Group (staff) Consultation with staff network members takes place for requests for recommendations for actions to help achieve objectives. Staff feedback is obtained every year via the staff survey.

Organisations Equality Objectives 2023-2026
Tackle and remove all forms of discrimination in our workplace and for our patients Create an inclusive and healthy RJAH culture through our values Give the workforce a voice to speak up through Staff Network Groups Ensure all our leaders, managers and colleagues can role model in a compassionate and inclusive way Ensure the Equality and Diversity Action Plan delivers on the objectives and outcomes
Headline good practice examples of EDS2 outcomes.
Executive Sponsors of each Staff Network. Active Celebration Calendar widely communicated. Buddy visits in place with Executives.

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Goal	Outcome	2025 Grade and reasons for rating	2024 Grade and reasons for rating	Outcome links to an Equality Objective
Inclusive Leadership	3A	**Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations.** Grade: ● Underdeveloped ○ Developing ● Achieving ● Excelling **Evidence drawn upon for rating** Weekly bulletins from the Communications Team distributed to staff. Monthly Managers Briefing to share updates with staff. Executive Buddy system across the Trust. Question Time open to all staff with an opportunity to ask questions and raise concerns.	**Underdeveloped** Improvements have been made from our 2024 assessment where staff feel **Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations.**	✓
	3B	**Papers that come before the Board and other major Committees identify equality-related impacts including risks, and say how these risks are to be managed.** Grade: ● Underdeveloped ○ Developing ● Achieving ● Excelling **Evidence drawn upon for rating** Public Board papers published on the Trust website and the meeting open to attend. AGM open for all staff to attend. Christmas message sent to all staff from our CEO.	**Developing** We have maintained within this area, although further evidence and inclusion of agendas and development days may have improved the score to identify the inclusion of EDI in discussions, and actions being taken to risks.	✓
	3C	**Middle managers and other line managers s … environment free from discrimination.** Grade: ● Underdeveloped ○ Developing ● Achieving ● Excelling **Evidence drawn upon for rating** EDI Policy. People Promises information. PSED Report / Ethnicity Pay Gap Report / Gender Pay Gap Report. Mental Health First Aiders – Accessed through Percy or Ourspace.	**Developing / Achieving** A decrease within this area, which from feedback received from staff links to a lack of evidence of discussions and agenda items. Linked with above comments.	✓

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Following the completion of the assessment of Inclusive Leadership within the Trust, it was noted that there was a lack of evidence of discussions within meetings, and development days to offer assurance to staff that Equality, Diversity, Inclusion and Health Inequalities are items on the Trust' agenda.

Further communications and visibility of leaders in the form of visits to departments was suggested with positives being taken from:

- Good Comms linked to the celebration calendar.
- Policies in place to support Accessibility i.e accessible information policy.
- Staff network engagement is improving.

The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust achieved a Domain 3 rating of Developing Activity for the reporting time frame, July 2024 – March 2025.

Actions to be implemented following outcome results.

Action Log No.	Topic	Action	By Whom	By When	Comments/ Updates Outside of the Meetings	Status
17	**Outcome 3A**	Further engagement from Executive sponsors at staff networks to encourage attendees and to support in staff feeling listned to.	Exec Sponsors	On-going		ONGOING
18	**Outcome 3A, 3B and 3C**	Provide more evidence of meetings to highlight EDI items discussed; Submitt agenda's from all meetings and committees and include profiles of facilitators of Board Development sessions.	EDI Team	01/03/2026	Further evidence will be gathered in readiness for the next EDS2 assesment	ONGOING
21	**Outcome 3C**	Improve Exit Interview process - An effective exit interview process is more than a formality; it is a strategic opportunity to learn, adapt, and enhance the employee experience. By implementing these best practices, organisations can turn departures into valuable insights and drive meaningful change.	CNL	16/01/2026		ONGOING
22	**Outcome 3C**	Executive Buddy List by Department to be shared with all staff for awareness.	MB	Time frame to be allocated following Board review of Well Lead report in November.	Buddy Posters are in each department. A report is presented to Execs for any actions to be delegated correctly. Forming part of the actions following the Well Lead report.	ONGOING
23	**Outcome 3C**	"Timetable of Board Walkabouts" to be shared for staff to be aware.	MB	Time frame to be allocated following Board review of Well Lead report in November.	Review of Buddy Visits, Pateint Safety visits and Board walkabouts are under review following the Well Lead Review.	ONGOING