



race for health



NHS LEEDS RACE FOR HEALTH PEER REVIEW:

How can NHS Leeds embed Race Equality into its commissioning processes?

2-3 February 2010

Focus areas of the Review

Peer Reviews are used within the Race for Health programme as a learning tool, providing an opportunity for PCTs to demonstrate their progress and gain constructive challenge and advice, at the same time as offering peers the chance to learn from the experience of their colleagues from the host PCT and from Review Team members.

This paper provides some background information on the forthcoming peer review hosted by NHS Leeds, so that Race for Health Programme Leads can identify the most suitable people within their PCTs to join the Peer Review Team.

About Leeds

Leeds is the third largest city in the UK with a population of around three quarters of a million. In recent years, life expectancy within Leeds has increased for both men and women; early death rates from heart disease, stroke and cancer has decreased, and low birth weight is decreasing faster than the regional and national averages.

However, the health of Leeds' residents is generally worse than the England average, particularly when compared against 24 key public health indicators which include: all age all cause mortality; male life expectancy; prevalence and mortality from circulatory and respiratory disease; alcohol related admission rates; infant mortality rates; incidence of and mortality from cancer and emergency admissions from chronic illnesses.

Further, Leeds demonstrates significant inequalities in health with the current JSNA confirming significant differences in health and wellbeing within the city. Key priorities highlighted included addressing the lifestyle issues of alcohol misuse, smoking, weight management and the wider influences of worklessness, housing and poverty, and mental health and access issues in relation to key vulnerable groups such as Travellers and Asylum Seekers (NHS Leeds Operational Plan 2009-10).

In terms of the ethnicity of the local population, 89.16% of the population of Leeds is classified as 'White British' (NHS Leeds Single Equality Scheme, 2009-12). Black and Minority Ethnic (BME) communities currently make up 8.15% of the Leeds population. Current figures show that the largest BME groups are Pakistani (2.11%) Indian (1.72%) and White Other (1.49%).

The Single Equalities Scheme (SES) states that Leeds is becoming a more diverse place and is now a city of many cultures, languages, races, religions and lifestyles. Leeds has a strong history of welcoming people, supporting independence and integrating asylum seekers, refugees, people from overseas joining families, students and others. The SES acknowledges that Migration enriches the local diversity but raises challenges for creating and sustaining a sense of belonging amongst all communities.

Despite the success in Leeds there exist vast inequalities in many areas especially in the field of health. Many of the inequalities people encounter can be attributed to people's race, faith, age, disability, gender, sexual orientation, lifestyle or economic situation. In partnership with organisations across the city, the PCT is working hard to improve the many inequalities experienced by communities in Leeds¹.

¹ NHS Leeds Fairness Scheme (Single Equality Scheme) 2009-12

Theme of the Review

The theme of NHS Leeds' peer review will be:

'How can NHS Leeds embed Race Equality into its commissioning processes?'

The Peer Review team will be asked to explore this research question by comparing two of the PCT's current commissioning models for Coronary Heart Disease and Mental Health services. The peer team will be asked whether adopting a flexible and intelligent approach to commissioning is the right approach for the PCT in order to embed Race Equality across the board.

Key Questions

The key questions for the review are as follows:

1. To what extent have some of the PCT's **current commissioning practices taken its diverse communities into account?**
2. How well do PCT **Commissioners understand and systematically utilise Equality & Diversity systems and tools** in commissioning practices?
3. What more needs to be done to **ensure that Race Equality is truly embedded** in all commissioning practices within the PCT?

There will be opportunities for members of the Peer Review team to visit services, meet with key players and review key documents in order to help answer the research questions of the Review.

Focus Areas

The Peer Review team will be split into three working groups during the Review and will be asked to explore the research questions through three focus areas of work. Two groups will explore different commissioning models and how Race Equality has been taken into account within these models. The third group will explore with Commissioners their understanding of the systems that the PCT has in place to embed equality and diversity in commissioning practices.

Focus area 1: Commissioning Model for Coronary Heart Disease

The key question for peers to explore within this group will be: To what extent has the PCT take into account its diverse communities through the commission of Cardiac Rehabilitation Services?

Day 1 will include a presentation to the peer team and subsequent Q and A around this particular commissioning model.

Day 2 will consist of a discussion with staff from the Cardiac Rehabilitation Services about the review processes and look at referral pathways into Cardiac Rehab Services, with a view to exploring how the PCT could increase uptake of the service from all communities in the city.

Focus Area 2: Commissioning Model for Mental Health

The key question for peers to explore within this group will be: How effectively has the PCT take into account its diverse communities through the commission of Improving Access to Psychological Therapies (IAPT) services?

Day 1 will include a presentation to the peer team and subsequent Q and A around this particular commissioning model.

Day 2 will consist of a discussion with service users and service providers at Touchstone, to explore users' experience of the process and service to date and service providers' understanding on race equality expectations of the commissioner.

Focus Area 3: Making it Happen

The key question for peers to explore within this group will be: How well do the PCT Commissioners understand and systematically utilise E&D systems and tools in commissioning practices? The group will be asked to review commissioning processes and tools and look at how practices, knowledge and experiences are shared across the organisation.

Day 1 will provide peers with an overview of organisational structure, culture, commissioning systems and processes.

Day 2 will take the shape of a discussion group with relevant NHS Leeds staff to explore their thoughts of current culture, mechanisms, tools (such as Equality Impact Assessments) and how these are fed into the commissioning process, and how learning and good practices are shared within the organisation. A key

development opportunity will come from exploring new opportunities as a result of NHS Leeds organisational review.

Who should attend?

NHS Leeds invites Peer Reviewers with an interest, or experience in the issues to be explored in the review. Ideally, the peer review team will have around 8 - 9 members. In particular, the PCT is keen to work with a team with relevant knowledge and experience and therefore encourage expressions of interest from:

- Commissioners
- Public Health Directors/Managers
- Equality and Diversity Leads
- Public Patient Involvement Leads
- Organisational Development Managers
- Those with experience of working within an area with high % of BME communities, particularly where they have been successful in increasing the uptake of cardiac rehabilitation services.

Each member of the Peer Review Team makes a significant contribution to the Peer Review Programme and the final outcome for NHS Leeds. As such, we would ask that when people sign up, they have a nominated person ready to step into their place if necessary, as cancellations can impact upon the success of the peer review.

Practical details

A programme and background paper for the review will be circulated to members following confirmation of the team. However, some preliminary details are as follows:

- The review will begin at **11.45am on Tuesday 2nd February 2010** and will finish at 4pm the following day.
- There will be an introductory session on participating in a Peer Review, followed by the afternoon working session and an informal dinner in the evening. The programme will begin again at 9am the following morning.
- **Accommodation** will be arranged for Review Team members. The cost of accommodation will be covered by Race for Health.
- The team will work in both plenary and smaller groups during the main review day, with **facilitation and support** from Learning Programme advisors Shared Intelligence.

How to register your interest

Please note that peers will be chosen for this review on the basis of relevant skills/experience. We are therefore inviting expressions of interest initially, to enable us to put together a team with the most relevant blend of knowledge, skills and experience for this particular peer review. Please register your interest via this link: <http://www.eventbrite.com/event/512523973>

The closing date for expressions of interest is Friday 15th January 2010. The peer review team will be confirmed on Monday 18th January, and further practical details will follow.

For more information, please contact Jackie Harrison; email Jacqueline.Harrison@sharedintelligence.net or tel: 020 7756 7608.