



Equality Delivery Standard 2025 Report

Name of Organisation	City Health Partnership CIC	Organisation Board Sponsor/Lead		
		Yvonne Elliott Chief Executive (Designate)		
Name of Integrated Care System	Humber and North Yorkshire			

EDS Lead	Miriam Sykes	At what level has this been completed?		
			*List organisations	
EDS engagement date(s)	04/02/2026 Domain 2	Individual organisation	EDS 2 engagement session facilitated to the Supporting Disability and Wellbeing Staff Network group, at which members discussed and agreed the scores.	
		Partnership* (two or more organisations)	Humber NHS Trust	
		Integrated Care System-wide*		

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FOREWORD

This Equality Delivery Standard22 (EDS22) Report details the activities carried out regarding the review process. It discusses the current rating of the organisation and identified actions within the improvement plan.

The report will be shared and agreed by the Chief Executive as the Executive Board representative and will be referred to in the CEO Board update and published on the organisation's web site.

CONTENTS

Section	Item	Page
1.	Introduction	3
2	Background	3
3.	Evidence <ul style="list-style-type: none"> • Domain 1 • Domain 2 • Domain 3 	4 10 15
4.	Scoring and Rating	19
5.	Implementation Plans	20
6.	Appendices: <ol style="list-style-type: none"> 1. Improvement Plan 	21



1. Introduction

The EDS22 is an improvement tool for both NHS commissioning and NHS providing organisations to use to review and develop services, workforce, and leadership and plays a key role in addressing health inequalities. It is to be used to encourage better evidence insight across the range of people with a protected characteristic and inclusion health groups and supports organisations to meet the requirements of the Public Sector Equality Duty (PSED)

The toolkit comprises eleven outcomes spread across three Domains:

1. Commissioned or Provided Services
2. Workforce and Health and Wellbeing
3. Inclusive Leadership

The outcomes are evaluated, scored, and rated giving an organisational outcome of:

- 0 - Undeveloped Activity
- 1 - Developing Activity
- 2 - Achieving Activity
- 3 - Excelling Activity

Following which improvements plans are developed and monitored to support future improvements.

2. Background

Domain 1, commissioned or provided services suggests reviewing three different services each year against the criteria:

- Data indicates doing well
- Data indicates not doing so well
- Performance is unknown

Following presenting the EDS22 process to the FREDIE steering group it was agreed that the three services to review for City Health Care Partnership CIC would be:

- Community Dental
- Smokefree Liverpool & Knowsley
- Frailty

Each of these three services identified key members to lead on collecting and presenting evidence against the specified criteria. This evidence was discussed with the FREDIE lead and an outcome reached for each of the sections against the scoring matrix.

For Domain 2, the strategic lead for FREDIE worked with the HR Project lead (Wellbeing) to pull together the evidence and identify where improvements were required. An engagement event then took place at the Supporting Disability and Wellbeing Staff Network group on the 4th of February 2026, where members discussed the criteria and agreed the scores.



For Domain 3, the strategic lead for FREDIE working with the Chief Operating Officer as the Executive Lead (FREDIE) and the Director of Corporate Development and People agreed the evidence, then linked in with Humber Foundation Trust for an independent review.

3. Evidence

The 2025 review considered three services: Smokefree Liverpool & Knowsley, Community Dental and Frailty The scores have been taken from each service and an average provided.

The table shows the findings and scores against each three domains and eleven outcomes.

Domain	Outcome	Evidence	Rating
1. Commissioned or provided services	1.A patients (services users) have required levels of access to the service	<p>Across Smokefree, Community Dental, and Frailty services, patients benefit from multiple access routes (face-to-face, phone, virtual), adjusted environments, including assessment and treatment in patients own homes (frailty), interpreting support including BSL, and accessible facilities. All services demonstrate proactive mitigation of barriers across age, disability, language, culture, and clinical complexity. Smokefree offers flexible access, tailored support, and inclusive practice across all protected group. The feedback from service users is positive with 100% reporting 'very good or good'. Frailty currently provides inequitable access across Hull and East Riding however there is work being undertaken working with the Integrated Care Board to remove commissioning inequity. All patients accessing this service score either moderately (with other conditions) or severely frail, as access is dependent on patients being registered with a GP, potentially excluding some of the protected characteristic groups, arrangements are in place with the local hospital trusts for patient referral. Dental services provide highly specialised access pathways with sedation/General Anaesthetic options, extensive accessibility adjustments, and proactive transport solutions. Currently paediatric patients who require comprehensive care under General Anaesthetic are being referred to Leeds Dental Hospital, this presents difficulties of access to some families. Provision is currently being sought to offer this service locally. All patients that attend the Community Dental Service have specialised needs therefore General Dental Practice is not suitable for the. Evidence supports that all services work collaboratively with other health and social care providers to support patients/service users to access appropriate care.</p> <p>Within CHCP there is a dedicated Accessible Information Standard team who take a responsibility to support all services to meet the bespoke needs of patients/service users. This service has carried out audits within Smokefree and Dental, giving advice around accessibility and any suggestions for improvements. There are also various training packages in place to provide awareness around neurodiverse conditions, mental health and other health conditions and disabilities, supporting colleagues to gain an understanding of some of the challenges that people from protected groups may experience when accessing services.</p>	<p>2 Achieving</p>

<p>1B. Individual patients (service users) health needs are met</p>	<p>All services demonstrate personalised, tailored care aligned to the needs of people at higher risk due to protected characteristics. Smokefree provides age-, disability-, gender-, and culturally sensitive quit, they support and integrate social prescribing and co-produce services, engaging with the public/community groups. Community Dental Services offer highly structured tiered care for complex physical, cognitive, and medical needs, supported by robust safeguarding and consent processes. Frailty services use comprehensive geriatric assessments, social needs evaluation, MDT working, translation/communication support, and care planning shared across partners.</p> <p>Training and development are a key function with staff being offered the right level of training and education across all services to enable them to understand the needs of the patients/service users.</p>	<p>3 Excelling</p>
<p>1C. When patients (service users) use the service, they are free from harm</p>	<p>All services demonstrate strong safety cultures with staff demonstrating compliance with mandatory training including safeguarding.</p> <p>Smokefree follows safeguarding legislation, equality law, clear incident reporting via In Phase, and person-centred risk assessments. Community Dental Services operate daily safety huddles, clinical audits, safeguarding board participation, infection prevention compliance, and structured learning systems. Frailty incorporates clinical supervision, team huddles, lone-worker risk management, PTL learning, MDT risk discussions, and an advanced AI medical scribe system designed to generate accurate documentation.</p> <p>Collectively, the three services provide strong evidence with consistent themes of continual learning, no-blame culture, and equality-informed risk reduction.</p> <p>The organisation has a Safeguarding team with safeguarding practitioners being available to provide advice, guidance and support.</p>	<p>3 Excelling</p>
<p>1D. Patients (service users) report positive experiences of the service</p>	<p>Across all services, patient experience is consistently positive. Smokefree embeds inclusive communication, choice of access routes, continuous feedback cycles, and a 'you said, we did' approach. All services receive extensive positive feedback, some of the quotes have been included below for reference:</p> <ul style="list-style-type: none"> • Dentist & Nurse were very caring, gentle and listened and understood my needs and worked with me. Very encouraging. 	<p>3 Excelling</p>

- Greeted straight away by **Receptionist**, was a friendly atmosphere. I got a new dentist today who was super friendly - had my procedure done, **Dentist** explained everything that was going to happen and kept checking in with me that all was ok, a pleasant visit:)
- My daughter has learning disabilities, **Dentist** has worked wonders in building her confidence and accepting treatment. Thank you
- The team were very professional, understanding with my dental anxiety. Sedation was smooth and pain free. Couldn't have asked for more! Amazing, Thank you!
- **Dentist** - I wanted to just say thank you for your understanding and patience. The adjustments, time and planning that you are willing to put in for my son is outstanding. By far the best reasonable adjustments I have seen personally, and in my professional role. Your colleague was fantastic too.
- Very caring, supportive and knowledgeable team. Listened to all the questions, answered in a sensitive + appropriate way. outcome very positive - thank you very much
- I have been extremely impressed with the care and attention given to my daughter, she has anxiety when it comes to visiting the dentist, but she was put at ease immediately and I have seen a huge difference in her - thanks you for everything
- "I cannot stress enough the professionalism and courteous behaviour given towards myself and my wife and for that I am eternally grateful"
- "Just a few words to inform you that I have made a donation of £1000 to the foundation on behalf of our late mum, XXXXX XXXXX who in her hours of need your team gave her some comfort. So, I would like to thank you from the whole of the family and keep up the sterling work
"How nice and helpful your staff truly are
- Everything was good, excellent service was very helpful giving advice

		<ul style="list-style-type: none"> • The staff are friendly and non-judgemental • Excellent service always very polite helpful and they go out of there way all of the time especially if I have problems with the surgery not getting my tablets on time excellent all round always very happy I am. • The 2 ladies who I meet with are very knowledgeable, courteous, encouraging and friendly. I can't think of anything to improve the service <p>Dental have implemented PREMs/PROMS for sedation pathways, and personalised adjustments highly valued by patients and families. Frailty demonstrates outstanding satisfaction (100% good/very good across a full year), evidence from independent research (PACE study), national recognition via Panorama and GIRFT, and numerous unsolicited positive testimonials.</p> <p>The weekly CEO blog captures qualitative comments that celebrate services that have provided patients with dignity and respect. There are also processes in place to review any negative experiences to ensure we learn lessons from these and use this as a quality improvement mechanism.</p>	
Overall scores for Domain 1 taking into consideration all three services			11
2. Workforce Health and Wellbeing	2A. when at work staff are provided with support to manage obesity, diabetes, asthma, COPD, and mental health conditions	<p>CHCP offers a programme of open access Mental Health/Training/Awareness Sessions available for staff and managers to attend. A recently updated Colleague Health & Wellbeing Support Guide signposts staff to a range of services that are provided and designed to support them and encourage a healthy lifestyle both at work and outside of work this includes a list of free apps to support mental health and wellbeing. Additionally, managers guidance is in place to support/signpost staff to national offers in relation to any health-related concerns. Talk Suicide Training has been promoted, and managers are encouraged to complete Wellness Action Plans to support staff with Mental health concerns.. Career conversations are carried out regularly giving the opportunity for any staff with a protected characteristic to discuss their concerns regarding their health conditions and their working environment and managers are encouraged to hold wellbeing conversations as part of supervision meetings and development reviews. There is a flexible working toolkit in place which is a practical guide for staff to use to support conversations with their managers regarding their work life balance, it gives some useful tips to consider when considering requesting flexible working. We have embedded Health & Wellbeing Champions across CHCP and have 98 colleagues signed up to this role, the aim is to have Champions in each service area/team across the organisation as a go to person for support and signposting for all staff in relation to any health and wellbeing concern, this is being supported by our Wellbeing Guardian . The supporting Disability and Wellbeing staff network groups (SDAW) meets monthly and is a good opportunity for peer support for staff who identify with a disability or long-term conditions. There is a programme called EMPOWER which is offered across the organisation, there are 12 sessions and cover the topics: Stress and Mindful Breathing, Communication, Time Management, Unhelpful Thinking, Pain and Fatigue Management, the</p>	3 Excelling

		<p>benefits of healthy eating and exercise, Problem solving, how to set achievable goals in the form of action planning, Keeping a Pain and Mood Diary. CHCP also have an Employee Assistance Programme in place which offers all colleagues access to free confidential, around the clock support, access to professional support services, both emotional and practical, Support for family members and an online wellbeing portal with a catalogue of resources and access to live chat.</p> <p>There is a dedicated Health & Wellbeing inbox where monthly Health & Wellbeing Flyers are shared to promote various support and resources to all colleagues. During Mental Health Awareness Week where the theme was community, CHCPs NHS Hull Talking Therapies Let's Talk service facilitated a lunch and learn session for all staff to join focussing on mindfulness based cognitive behavioural therapy (MBCT). Colleagues were also encouraged to wear green to help raise awareness during World Mental Health Awareness week and for those who need a bit of extra help support and advice services were promoted.</p> <p>Staff are supported to amend working patterns to support conditions where practical and possible.</p> <p>In August CHCP introduced colleagues to The Everything App. This gives colleagues and their families free access to fitness, mindfulness and wellbeing support anytime, anywhere. CHCP colleagues can also access discounted gym memberships and CHCP social has started a running and walking group to help provide opportunities for staff to exercise.</p> <p>The organisation uses data to support the workforce in making healthy lifestyle choices for example, reporting on national statistics when considering what initiatives to offer staff such as Liver Health and Blood Pressure checks, staff uptake on these initiatives are recording with the OccWellbeing service Lunch and learn sessions which promote different lifestyle choices keep a record of numbers of attendance, although not names etc.</p> <p>Through discussion and consideration of the evidence presented the Supporting Disability and Wellbeing group members agreed that a score of 3, Excelling Activity was appropriate for this section.</p>	
2B. When at work staff are free from abuse, harassment, bullying and physical violence from any source		<p>CHCP has a zero-tolerance policy for verbal and physical abuse towards staff from any source with posters in clinical environments advising patients of this.</p> <p>The FREDIE vision encourages all staff to be Fair, Respectful, and Inclusive to everyone considering diversity and equity to colleagues. Any incident raised through the Datix system are monitored with investigations taking place to support staff members linking in with the Occupational Wellbeing Service and signposting to external agencies where appropriate. Expert advice from our safeguarding team is</p>	3 Excelling

sought when appropriate. It is recognised that a person experiencing domestic violence can be at risk both in the personal space and in the workplace and the organisation has developed a domestic Abuse Guidance which includes a record of conversation template to help assist conversations and identify how we can support the employee and access support appropriate to their experiences. A White Ribbon and more Domestic Violence working group has been established and they created a colleague survey to identify any gaps in the support available. This has resulted in emergency vouchers being available for staff, dedicated DAP practitioner sitting with the safeguarding team and the creation of a dedicated inbox. At the time of preparing this report it was recorded that there are 49 White Ribbon Champions and 14 White Ribbon Ambassadors across the organisation. Clinical Staff have additional support in the form of professional nurse advocates where they can discuss clinical, wellbeing and learning concerns through a restorative supervision process.

CHCP expect all staff to consistently demonstrate the principles of FREDIE. However, as part of professional and other standards set out in the CHCP People Promise there is also an expectation that staff take action and ownership to challenge inappropriate behaviour and compassionately address concerns, and that our organisation and its leaders create an environment where people feel safe to speak up and have the confidence that concerns will be addressed.

As an initiative to support our racially diverse workforce, we have introduced the See ME First toolkit which recognises the whole person, values lived experience and creates a safe space for everyone to raise their voice and be heard. To date we have received 119 pledges from staff members who pledge to support this scheme and their colleagues.

CHCP has internal services that can support colleagues and are used, however should the staff member refuse to be referred to an internal service, we are aware of how to link in with the VCSE and have in the past referred through to MIND and Pauls Brain, however due to confidentiality we would not be in a position to share the details of these referrals.

CHCP recognise that a positive working environment and good working relationships support colleague wellbeing and engagement. This can also lead to better performance, improved retention, and reduced stress related sickness absence. Focusing on resolution is good for our organisation, it is good for our colleagues, and it is good for our patients and service users.

		<p>A comparison of results from the colleague survey was undertaken looking at the top line results for 2024 and the top line results for 2025, in respect of the questions around bullying, harassment and abuse and discrimination, the results are as below:</p> <p>Both results show a positive decline in the number of staff reporting against these two areas, however the bullying and harassment questions between the two years differ somewhat so for the purpose of this report haven't been include. Discrimination by patients/service users has halved with 2024 reporting at 4% and 2025 reporting at 2%.</p> <p>The Supporting Disability and Wellbeing staff network group members, discussed the evidence in relation to this section, the conversation leaned towards the colleagues survey responses and that the number of discrimination cases in respect of managers had increased, on further exploring and breaking this down into percentages against responses the evidence actually demonstrates that this has remained the same since the previous year. Therefore taking into consideration the actual numbers across the three areas had seen a significant decrease the group agreed to score this section as level 3.</p>	
	<p>2C. Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source</p>	<p>We have 98 Health & Wellbeing Champions across CHCP who a team of volunteers from across the organisation are that are available for colleagues to contact for support and signposting appropriately.</p> <p>Our Occupational Health Service provides a wide range of services, including signposting to self-help information, and making onward referrals to talking therapies. The Colleague Health & Wellbeing Support Guide shares links to the various wellbeing Apps, information on the CBT workshops, Empower in the workplace programme, financial wellbeing and a wide range of other services and resources. We have a Managers Guide and Toolkit to Supporting Employee Attendance in place to provide line managers with clear guidance in relation to supporting employees and covers topics e.g. support with Stress related absences, Mental Health concerns and Domestic Abuse.</p> <p>CHCP are White Ribbon accredited and we currently have 49 Champions and 14 Ambassadors</p> <p>CHCP now have an Employee Assistance Programme in place which offers all colleagues access to free confidential, around the clock support, access to professional support services, both emotional and practical, Support for family members and an online wellbeing portal with a catalogue of resources and access to live chat.</p>	<p>3 Excelling</p>



		<p>A Freedom to Speak Up Guardian is embedded within the organisation, offering support outside of staff members management structure.</p> <p>There are several staff networks forums available for staff from protected groups which offers a safe space to come together and get peer support, the organisation also works closely and in partnership with a number of trade unions representatives external to the organisation.</p> <p>CHCP currently has three staff network groups: Race Diversity, Disability and LGBTQ+ the meetings held are dual purpose, they offer peer support whilst also providing members the opportunity to be part of organisational discussions and decision making.</p> <p>It was discussed with the Supporting Disability and Wellbeing Network group that there were no significant changes to this section, therefore it was agreed to keep the score as 3, excelling.</p>	
	<p>2D. Staff recommend the organisation as a place to work and receive treatment</p>	<p>The values of the organisation ‘Be a provider of excellent health care services’ and ‘Be an employer of choice’ speak for themselves when it comes to the positive response from the workforce within the colleague survey results key results included:</p> <ul style="list-style-type: none"> • 79% of employees agree that CHCP takes a positive approach to health and wellbeing • 80% recommend CHCP as a place to work • 91% would recommend CHCP to friends/family for care • 89% believe that CHCP is an inclusive employer <p>CHCP believes a happy/healthy workforce plays a critical role in contributing towards positive patient experience/outcomes.</p> <ul style="list-style-type: none"> • 95% were likely to recommend CHCP clinics/services to friends and family if they needed care/treatment? • 94% felt CHCP clinicians understood their symptoms and involved them in decisions • 97% felt they were treated with care and respect <p>The organisation proudly promotes its achievements demonstrating that CHCP is a great place to work such as accreditation of: Investors in Diversity, Mindful Employer, Disability Confident Leader, Foster Friendly and Menopause Friendly employer. The Colleague Health & Wellbeing Support Guide highlights the support and resources that is available for staff to access, and the newly created Perks and Rewards</p>	<p>3</p>

		<p>Booklet showcases what is on offer to CHCP colleagues. We celebrate the contributions and achievements of our employees through our recognition and reward programme, including</p> <ul style="list-style-type: none"> • Long Service Award - honouring employees' dedication to CHCP and the wider NHS • CHCP's Top 200 scheme - led by our Chief Executive, acknowledges outstanding employees on a quarterly basis • Celebrating Excellence Staff Awards - an annual event where colleagues are nominated and recognised for their exceptional work. <p>Exit interviews discuss reasons for leaving and the data from these is used to look at areas where improvements are required. A quarterly report is published which highlights data such as absence and recruitment & retention, these are shared through business group forums which have management representation from across the organisation.</p> <p>Where surveys are carried out, the data is analysed considering experiences of those who identify with a protected characteristic (particularly ethnic minorities, LGBTQ+ and Disability) in comparison to the staff that don't identify with any of these groups.</p> <p>At the engagement event with the Supporting Disability and Wellbeing staff network members, the discussions focused on the criteria which states that over 85% of staff would recommend the organisation as a place to work and as in previous years the colleague surveys responses were slightly below this (80%). The group looked at the responses to the questions, recommending CHCP to family/friends for care (91%), positive approach to health and wellbeing (79%) the organisation is inclusive (89%) also considering the patient survey responses, recommend CHCP if they needed treatment (95%), treat with care and respect (97%) and agreed that as a collective CHCP was excelling in this domain.</p> <p>There were some discussions from the OccWellbeing representative that disclosed they see unhappy people through their services, however they also see a lot of support being put in place when there has been some communication with the line managers, therefore it was agreed that the organisation continues to be excelling and a score of 3 was agreed.</p>	
Overall scores for domain 2.			12
3. Inclusive Leadership	3A: Board members, system leaders (Band 9 and VSM) and those	CHCP Board and leadership team demonstrate their understanding of and commitment to Equality and Health Inequalities through a number of routes including regular board and committee meetings, held both quarterly and annually, where FREDIE and Health Inequalities are agenda items with reports being	3



	<p>with line management responsibilities routinely demonstrate their understanding of, and commitment to, equality and health inequalities</p>	<p>presented to demonstrate current and planned FREDIE initiatives. FREDIE encompasses the principles of 'Fairness, Respect, Equality, Diversity, Inclusion and Engagement'. The chief Executive for the organisation shows their commitment through their statement of internal control which demonstrates the organisation's systems for managing risk that impact on the delivery of safe quality care. The statement of internal control is presented to and agreed by the Audit Committee.</p> <p>Health inequalities remain a priority for CHCP and will form part of the company's strategic reset in 2026. Health Inequality and Equality Impact assessments are a requirement for planning service change and transformation, equally they are a requirement for policy and strategy development, all assessments are signed off by senior managers within the service.</p> <p>There are several initiatives in place which contribute to the health inequality agenda which are supported by the executive and senior leadership team, these include:</p> <p><i>Armed Forces Covenant</i> <i>Race at Work Charter</i> <i>Disability Confident</i></p> <p>CHCP contributes to improving health inequalities from a system approach and has senior representation on the East Riding Population Health Community of Practice Group.</p> <p>CHCP's health inequalities strategy, which can be found on our website: https://www.chcpic.org.uk has been developed to support the organisation monitor health inequalities across the many services provided, we are currently working on the delivery of the strategy through a service led approach. Reporting of risk will feed through our governance frameworks.</p> <p>The organisation employs an executive lead for FREDIE who is a member of the Executive Board and Safe Quality Services committee, taking regular updates on the progress of both FREDIE and Health Inequalities. They also commit to supporting the staff network group chairs/vice chairs through peer review meetings and are themselves a member of the Race Diversity Group. All three staff network groups, LGBTQ+, Disability and Wellbeing and Race Diversity have senior members in attendance as either members identifying with a protected character or as sponsors/allies.</p>	
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		<p>The FREDIE steering group is chaired by a Deputy Chief Officer and is attended by staff from across the organisation who take on the role of FREDIE Champions, these representatives are all decision makers who can contribute to and manage change, the chairs/vice chairs of the staff network groups are also active members to the group. The Steering group reports progress and or risks to the Safe Quality Services Committee.</p> <p>Social Value has clear connections to the social determinants of health inequalities with the four focus points being community, sustainability, wellbeing and diversity, CHCP are exploring current understanding and how to build our knowledge within this area which will contribute to developing a strategy, which may be a combined strategy with environmental, Social and Governance incorporated.</p> <p>A copy of our recently approved social accounts can be found on our website City Health Care Partnership</p> <p>All financial planning whether looking at cost improvement programmes or procurement for service delivery require a quality impact assessment, these assessments consider any health inequality impact on service users.</p> <p>City Health Care Partnership have accreditation from the National Centre for Diversity with a silver award and have received 8th place in the 2025 top 100 UK most inclusive organisations. The Director team and other Senior Managers took part in the assessment by attending interviews to discuss the progress of FREDIE within the organisation, re-assessment of this accreditation will take place in 2026. Progression to gold award will be driven by the commitment demonstrated by the senior leaders across the organisation.</p>	
	<p>3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed</p>	<p>The organisation reports to the executive board on progress and actions plans regarding the Workforce Race Equality Standard (WRES), the Workforce Disability Equality Standard (WDES) the Gender Pay Gap (GPG), and the Equality Delivery Standard (EDS).</p> <p>FREDIE is an agenda item on the Safe Quality Committee meetings, where any impacts can be addressed and discussed.</p> <p>The FREDIE Steering group meets quarterly; there is a comprehensive action plan in place which is monitored through the group with any risks being discussed and escalated to the safe quality services committee.</p>	<p>3</p>



		<p>Health inequalities remain a priority for CHCP and will form part of the company's strategic reset in 2026.</p> <p>Health Inequality and Equality Impact Assessment are completed for policies, projects and service change and are signed off by the Assistant Director/Head of Service.</p>	
	<p>3C: Board members and system leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients</p>	<p>The FREDIE steering group which is chaired by the Deputy Chief Operating Officer meets quarterly and monitors performance and progress against the clear organisational FREDIE objectives, through a comprehensive action plan. The group which is attended by senior managers from across the organisation also review the action plans identified through the national standards, i.e. WRES/GPG. Progress is fed into the board by the executive lead who presents an annual report. In addition to the annual FREDIE report there are quarterly FREDIE updates included in executive board papers and safe quality services committee papers. Where progress stalls against the objectives the steering group would be accountable for managing and reporting any risk that may come from this. Any risk would be escalated to the safe quality services committee</p> <p>The full senior management team meet weekly, the meeting is chaired by the chief executive office and provides an opportunity for open discussion regarding service delivery, workforce concerns, lessons learnt. Minutes are taken with actions being reviewed and monitored.</p> <p>CHCP continues to aim to attract a diverse workforce and the figures below show there has been improvement in respect of ethnic minorities and disabilities in relation to the numbers within the organisation that report these demographics.</p> <p>WRES 2025 reports 5 BME staff in Senior and VSM roles, an increase of 4 from the previous year which reported 1.</p> <p>WDES 2025 reported 12 staff in bands 7 and above as disabled an increase of 2 from the previous year.</p> <p>CHCP is committed to increasing the numbers of staff in band 7 and above roles over the next year and will continue to monitor this through its reporting processes.</p>	<p>3</p>
<p>Total for Domain</p>			<p>9</p>
<p>Overall organisational Score</p>			<p>32</p>



4. Scoring and Rating

On adding the scores from each of the outcomes together the organisation scores 32 which is a rating of **Achieving Activity**. This is a significant increase since the previous year, where the score was 27.

The improved areas are in respect of domain 1 and 2, however when considering domain 1 it is recognised that as there are three different operational services reviewed annually, this figure can go up or down, therefore the chances of scoring Excelling Activity is questionable.

Domain 1a, Patients (services users) have required levels of access to the service was scored at 2 'achieving activity' due to a couple of points that had been raised in respect of access from the perspective of dental and frailty. These have been incorporated into the improvement plan (appendix 1).

5. Improvement Plan

The Improvement Plan (appendix 1) shows the agreed actions required to support the services reach 'excelling activity' these actions will be monitored through the FREDIE steering group.

On behalf of the FREDIE steering group, I agree that this report is complete. A summary of the report will be submitted through the CEO update at the Executive Board. The report and its improvement plan will be monitored and actioned through the corporate governance framework. Updates will be taken through the people plan update to the Safe, Quality Services Committee and uploaded to the organisation's website.

Name: Yvonne Elliott

A handwritten signature in black ink on a light-colored rectangular background. The signature appears to read 'Y. Elliott'.

Signature:

Title: Chief Executive Officer

Date: 27th April 2026



Appendix 1 Improvement Plan

EDS Domain	Action	Service/workforce/leadership
Commissioned or provided services		
1a Patients (service users) have required levels of access to the services	Provide provision for those children who require full comprehensive dental care under General Anaesthetic to be seen locally at Hull Royal Infirmary opposed to travelling to Leeds Dental Hospital. Develop a business case for equality of access for residents of the East Riding.	Community Dental Frailty
1b Individual patients (service users) health needs are met		
1c When patients (service users) use the service they are free from harm		
1d Patients (service users) report positive experiences of the service		
Workforce Health and Wellbeing		
2a when at work staff are provided with support to manage obesity, diabetes, asthma, COPD, and mental health conditions		Workforce
2b When at work staff are free from abuse, harassment, bullying and physical violence from any source		Workforce
2c Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source		Workforce
2d Staff recommend the organisation as a place to work and receive treatment		Workforce
Inclusive Leadership		



3a Board members, system leaders (Band 9 and VSM) and those with line management responsibilities routinely demonstrate their understanding of, and commitment to, equality and health inequalities	Look at what is needed to move the Investors in Diversity award to gold level, considering the commitment from senior leaders and return on investment.	Leadership
3b Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed		Leadership
3c Board members and system leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients	Continue to review dataset within the WRES, WDES and GPG to assess those holding roles at Band 7 and above are reflective of the population we serve.	Leadership