



Equality Delivery System 2022 Case Study

Domain 1: Commissioned or provided services

Organisation Details			
Name of organisation(s)		The Christie NHS Foundation Trust	
Type of organisation(s)		NHS	
Senior Responsible Officer (SRO)		Eve Lightfoot	
SRO organisation and contact details		The Christie MHS Foundation Trust	
SRO contact details		Eve.lightfoot@nhs.net	
Name of Organisation	Last EDS2 publication date	Name of Organisation	Last EDS2 publication date
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Responsible Officer(s) – please list one for each NHS organisation			

Domain 1: Commissioned or provided services – Engagement

<p>Please explain how you engaged with your patients and services users, their carers and representatives?</p> <p>Was this different to previous engagement?</p>	<p>Non-Binary patient with Autism</p> <p>Regular 1:1s with the patient and key staff members involved in the patients care</p> <p>Development of an individualised care plan that was revisited and agreed with the patient and admitting ward at each admission before being shared with the Multi-disciplinary team.</p> <p>Each engagement had similarities in approach however plans of care may have slightly differed depending on patient needs identified at each revision of the care plan outlined above.</p>
<p>When did you start engagement with your patients and services users, their carers and representatives?</p> <p>Was this different to previous engagement?</p>	<p>At the point of admission to the Ward and on a regular basis, usually each day for an hour each time to discuss the plan of care and ensure needs were being met accordingly.</p> <p>Each episode of engagement differed depending on needs identified on the day.</p>
<p>Who was part of your engagement?</p> <p>How did you decide who to engage with?</p>	<p>The full Multi-disciplinary team involved in the patient's care including regular updates with the ward staff.</p> <p>The decision and timings of who to engage with were driven by the engagement each day and also with respect to the patient's most updated revised individual care plan.</p> <p>Eg, Meals were often a cause or trigger for anxiety due to specific dietary needs/preferences and food preparation/presentation therefore the chef made a weekly visit to sit and discuss the meal plans for the week with the patient and agree choices ahead of time to help to alleviate anxiety.</p>

<p>Please describe any issues or barriers you experienced during the delivery of your engagement</p>	<p>Time was a particular challenge as episodes of engagement could become quite lengthy and for the nursing staff who had other competing time sensitive priorities, this would often cause a trigger of anxiety for the nursing team allocated to care for the patient. This was mitigated by allocating a smaller workload to the patients named nurse for the day and due to the complexities and meticulous care requirements, more senior nurses/managers would often be assigned to care for the patient each day.</p>
<p>If you have delivered your engagement differently to your last EDS submission, what impact has it had on your process and outcomes?</p>	<p>NA- No previous submission</p>
<p>Please provide any other comments</p>	

Domain 1: Commissioned or provided services – Evidence

<p>Please describe the sources you have used to collate your evidence.</p> <p>Why have you used these sources?</p>	<p>Patient notes-CWP</p> <p>Staff accounts</p>
<p>Have you identified any new sources of data and information?</p> <p>What type of impact has this made?</p>	
<p>Please provide any information on difficulties and/or barriers you experienced whilst collating evidence?</p>	<p>This type of qualitative evidence is difficult to collate as it is reliant on staff accounts and documentation rather than a form of structured or formal data collection</p>
<p>Please provide any other comment</p>	