

# The Equality and Diversity Council (EDC) and the role of lived experience: Proposal for the EDC meeting on 28 April 2015

### **Background**

The NHS belongs to the people and everyone has a right to high quality services. It is therefore essential that we place patients and people with lived experiences central to what we are trying to achieve in the NHS, and that the values of the NHS Constitution are lived out daily through the commitment, care and compassion of our staff.

The Equality and Diversity Council (EDC) aims to provide robust system leadership on equality. The current refresh of its work programme and membership provides a timely opportunity to embed lived experience and patients at the heart of the Council's work.

## NHS Values Summits and lived experience

NHS Values Summits bring together a diverse range of people and perspectives to foster greater understanding of how people's differences, social status and cultural expectations can affect their experiences of health and care. To date, four NHS Values Summits have been held across the country. Each summit promotes values-based ways of working and explores a different theme relating to equality, health inequalities and human rights.

The Summits provide a setting to celebrate shared learning and partnership working with patients and the public, representatives from health and social care, and stakeholders from the private and voluntary and community sectors. The Summits are not one-off events, but lead to legacy groups that continue the meaningful and sustained engagement to progress the topics of concern for that particular area. The Summits provide a great forum from which to select the two EDC members for this category of membership.

#### **Proposal**

#### 1. Work priority

A proposed work priority for the EDC going forward is to advance equity in access to, experience of, and outcomes from, health care for the most disadvantaged groups, drawing upon the expertise of people with lived experience. The potential outcome of this proposal will help to support a health care system that listens to and places patients and communities at the heart of its policies, processes and behaviours, and provides equity of access to safe, effective, caring, responsive, and well-led services.

### 2. Membership

Form needs to follow function; hence it is proposed that the refreshed Council has two lived experience members, with a rolling shadow (support) group of 3 people, to attend the main Council meetings as core members, with additional lived experience membership at Council subgroup level.