

Providing national leadership to shape and improve healthcare for all

Equality and Diversity Council Meeting Paper 10th May 2016

Inclusion Health and Lived Experience Subgroup Update

Purpose and context

The subgroup has a vision to tackle health inequalities and advance equality for all. Its purpose is to assist the shaping of the future of the NHS from an equality, health inequalities and human rights perspective, working to improve equity of access to services and improved outcomes for the most disadvantaged groups, people with Lived Experience of stark inequalities and those with protected characteristics, by 2017. The establishment of the subgroup was proposed as part of the EDC Review in April 2015.

EDC Theme and objective (s) the paper links to

The group has established a work plan as agreed by EDC July 2015 comprising of the three key elements below. The group are now in the process of refining the detailed actions and have commenced delivery

- 1. Ensuring people with lived experience have a voice throughout the Equality and Diversity Council and an influence in all its work.
- 2. Working to improve equity of access to services and improved outcomes for protected groups and people with lived experience of stark inequalities by 2017 (the "Quick Wins" programme).
- 3. Strengthen workforce and organisational capability for identifying and addressing Equality and Health Inequalities impacts across EDC member organisations.

Key Summary Milestones

- Agreed named leads for Quick Wins work streams and agree the focus of the work
- EHI Unit capability programme engagement
- Presenting at Faculty for Inclusion Health Conference in March 2016

Actions taken to date

The Inclusion Health and Lived Experience subgroup met in February. The following has been achieved:

- 1) Members have worked with E&HI Unit to inform the layout and contents of the newly launched joint NHS England and PHE equality and health inequalities web portal. This will include capturing good practice case studies on co-producing solutions to promoting equality and reducing health inequalities with people of lived experience, a link to NHS Values Groups, and key data and reports relating to inclusion health and reducing health inequalities
- 2) Members have been designing a web page for NHS Values Groups with links to the above and will to be hosted on the NHS England website
- 3) Agreed named leads for Quick Wins work streams and agreed the focus of the work.
- 4) EHI Unit are rolling out a capability programme and will share materials and outcomes with other EDC organisations
- 5) Lived experience member Iman Rafatmah presented at, and shared his experiences of asylum-related homelessness at the national UK Faculty for Homeless and Inclusion Health's annual symposium on health, homelessness and multiple exclusion in March, at a plenary session chaired by Ruth Passman. Podcast can be viewed: http://www.homelessnessandhealth.co.uk/events/event-01/seminar-stream-d2/
- 6) Lynn Berry and Ruth Passman have met with Manchester Action on Street Health (MASH) about how to include sex workers - to discuss the most suitable method of engagement.
- 7) Lived experience member Iman Rafatmah presented at, and shared his experiences of asylum-related homelessness and mental health at the launch of the Guidance for commissioners on commissioning mental health services for vulnerable migrants, a coproduced document with MIND, supported by NHS England, on the 15th March 2016.
- 8) Members have been invited to present a webinar with PHE on reducing health inequalities for Inclusion Health groups and 'user driven commissioning'
- 9) The quick wins programme has been progressed by allocating named leads and being more specific on actions and areas of focus.

Current Position

The Inclusion Health and Lived Experience Subgroup is beginning to position itself to take advantage of, and influence strategic work streams.

We would like to record our thanks to the former co-chair, Lucy Wilkinson who has stepped back from this responsibility and to one of our lived experience members David O'Brien who has stepped back from all voluntary responsibilities, including membership of the EDC. We will inform the EDC of chairing and membership arrangements in our next update.

Next steps

- Continue delivery of the quick wins work plan
- Discuss how EDC subgroups can also involve people with lived experience
- Case studies from the lived experience/ inclusion health sub group to be placed on the EHI hub and disseminated
- Ask the data subgroup for:
 - a baseline position on what data information is available in key areas of health inequalities as it relates to inclusion health groups
 - lead a discussion to include powerful qualitative work to supplement the data and knowledge gaps to support commissioning to reduce health inequalities

Recommendation and action requested

The EDC to note the actions carried out to date.	

Co- Chairs: Ruth Passman (NHS England) and Lived Experience member by rotation.

Inclusion Health and Lived Experience Subgroup Members:

Lived Experience members Stewart Moors, Lynn Berry, Elham Atashkar, Iman Rafatmah, and Ruth Passman (NHS England) Caroline Humphreys (NHS England), Bernd Sass (Disability Rights UK), Stan Burridge (Pathways), Jabeer Butt (Race Equality Foundation and Strategic Partner), Dr. Amir Hannan (Haughton Thornley Medical Centres), Clenton Farquharson (Community Navigator Services and Healthwatch), Dr. Alastair Lipp (Deputy Regional Medical Director Midlands and East, NHS England), Gail Elkington (Department of Health).