

# **NHS Equality and Diversity Council**

## **Annual Report 2016/17**

Providing national leadership to shape and improve  
healthcare for all

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# 1. Foreword from the joint Chairs

The NHS Equality and Diversity Council (EDC) works to bring people and organisations together to help ensure a personal, fair and diverse health and care system. In 2016/17 the EDC has focused upon inclusive workplaces, equality across the NHS, work on promoting workforce equality, and work to support inclusive healthcare.

Our work programme for 2017/18 sets out how we will continue to deliver upon our vision and purpose, working in partnership within, and beyond, the EDC. Our aim is to play our full part in delivering further continuous progress towards achieving our strategic objectives.

The EDC's ability to deliver on its work programme will be strengthened by implementing the recommendations from the recent review of its function, form and remit. This will help the EDC focus upon maximising its strategic influence and impact to deliver against the many challenges facing health and social care.

We will be supporting the delivery of the *Next Steps on the NHS Five Year Forward View*, that sets out how the NHS will continue to deliver key improvements in areas such as cancer, mental health and GP access, while transforming the way that care is delivered. These measures will help to put the NHS on a more sustainable footing for future generations.

The EDC relies on the continuing hard work of the individuals and organisations that make up the Council. As co-chairs of the EDC, we would like to thank them all for their hard work and expertise over the past year.

**Joan Saddler and Simon Stevens**  
Co-Chairs, NHS Equality and Diversity Council  
September 2017

## 2. About the NHS Equality and Diversity Council

The NHS Equality and Diversity Council (EDC) is an advisory body that provides visible leadership on equality issues across the NHS. This annual report endeavours to provide the public, patients, service users and staff working across the NHS with an overview of the work undertaken by the EDC during 2016/17.

The purpose of the EDC is to help shape the future of the healthcare system from an equality, diversity and inclusion perspective; focussing upon improving access, experience, and health outcomes for all patients, service users, carers and the NHS workforce.

To achieve this strategic vision, the EDC undertakes the following:

**Commissions** strategic pieces of work that support NHS organisations in fulfilling their responsibilities on promoting equality, diversity and inclusion.

**Seeks** to raise ambition at every level of the health system by inspiring strong leadership, removing barriers to change, celebrating success, and bringing the NHS Constitution to life.

**Empowers** health care providers, commissioners, regulators, the NHS workforce, patients and the public to achieve an NHS where “everyone counts”, by supporting continuously improving performance.

**Describes** what success looks like, and will advise on evidence-based priorities for promoting equality, diversity and inclusion.

**Influences** to ensure equality, diversity and inclusion are embedded within key health care policy, strategy, and in the delivery of services.

**Ensures** that as individual member organisations, we continuously improve performance on equality, diversity and inclusion, and support the wider health system in this respect.

Whilst the EDC supports the NHS to improve on their equality performance, meeting the requirements of the Public Sector Equality Duty of the Equality Act (2010) is the responsibility of individual NHS organisations. In summary, these responsibilities are to have due regard to the need to:

- eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act;
- advance equality of opportunity between people who share a protected characteristic and those who do not;
- foster good relations between people who share a protected characteristic and those who do not.

### 3. Members of the NHS Equality and Diversity Council

Membership of the EDC reflects its purpose and vision to provide visible and robust leadership on equality issues across the NHS. During 2016/17, representation on the EDC included:

- National healthcare organisations;
- NHS provider organisations;
- Commissioning organisations;
- Patients;
- People with lived experience;
- Staff-side and trade unions;
- Community and voluntary sector;
- Academia.

The organisations represented on the EDC during 2016/17 are listed at Annex A.

## 4. Our work during 2016/17

Our work during 2016/17 comprised two key elements: work to deliver our three strategic priority areas; and actions to ensure that the EDC is an effective and efficient system-wide partnership.

### 4.1 Our strategic priorities: delivery highlights

The past year has seen the EDC set its ambition to focus attention on areas where we could add maximum value in tackling some of the most pressing challenges on this agenda. We did this through influencing NHS organisations to deliver continuous improvement, and by expanding our reach by working in partnership with local and national stakeholders.

We brought forward a number of strategic priorities and work areas which we had set out in 2015/16 – priorities that remain relevant today and a number of which will continue to underpin our work in the coming year.

The 2016/17 EDC work plan outlined three strategic priorities:

- **Inclusive workplaces** – longstanding equality issues across NHS workplaces;
- **Workforce equality** – continuous equality improvements;
- **Inclusive healthcare** – spearheading best practice for disadvantaged groups.

Over the past year, we have continued to build the reputation and outcomes-focused impact of the EDC, delivering work that is beginning to have a positive effect on people's lives. Below, we highlight just some of our key successes.

#### 4.1.1 Promoting inclusive workplaces across the NHS

##### *NHS Learning Disability Employment Programme*

Two of our member organisations, NHS England and NHS Employers, took the lead to support and encourage NHS organisations in developing local and national solutions to remove barriers and increase the employment of people with a learning disability. This programme builds upon work that is already underway across England, and which is seeing an increase in people with a learning disability being employed in the NHS.

To support NHS organisations, in delivering this work, a set of tools and guidance were published, with the aim to:

- raise awareness;
- highlight good practice;
- breakdown barriers that both employers and potential employees may face; and
- create a culture that welcomes people with a learning disability.

A suite of resources were made available on the NHS Employers' website. This included real-life case studies showcasing examples from across the NHS of employment of people with learning disabilities, alongside the benefits to organisations. Peer-to-peer learning was facilitated and a three-step pledge was introduced for organisations to demonstrate their commitment to employing people with learning disabilities.

To help support delivery NHS engagement events were held across the country.

*The NHS has contributed much to progressing equality for patients, staff and the public. However there is still much more we must do. The NHS Equality and Diversity Council is playing an active role in encouraging all NHS organisations to further increase employment opportunities for people with learning disabilities. The Learning Disability Employment Programme will help our local communities, and also ensure that the NHS is the best employer in any given locality.*

Danny Mortimer  
Chief Executive, NHS Employers

### ***Supporting work on bullying and harassment***

The EDC supported the system-wide response to bullying issues, work that is being led by the Social Partnership Forum and the NHS Staff Council. Partnership work with these two groups commenced in 2016/17, in order to scope:

- a series of good practice case studies/models where organisations have gathered robust data on this issue;
- a central repository to access sharing of good practices and processes.

### ***Supporting Lesbian Gay Bisexual and Transgender Staff***

The Lesbian Gay Bisexual and Transgender (LGBT) Task and Finish Group developed a number of key objectives which include developing and promoting a central source of good practice, advice and guidance in relation to workforce policies and procedures which support and encourage an inclusive approach and promoting clear, visible leadership and engagement across the system on LGBT issues. There is an agreed work plan with key actions identified under each objective.

## **4.1.2 Promoting workforce equality**

### ***NHS Workforce Race Equality Standard***

Overseen by the EDC, the NHS Workforce Race Equality Standard (WRES) was made available to the NHS in 2015 as the best means of helping NHS organisations to improve their workforce race equality performance.

The main purpose of the WRES is three-fold:

- to help national, and local, NHS organisations (and other organisations providing NHS services) review their performance against nine WRES indicators of staff experience and workforce representation;



- to support the production of robust action plans to close the gaps in workplace experience between white and Black and Minority Ethnic (BME) staff; and
- to improve BME representation at senior management and board levels within NHS organisations.

The WRES is designed to provide real impetus, not just on workforce race equality, but on equality in general, for all those who experience unfairness and discrimination within the NHS workforce. For sustained improvement in this area, the focus is not just upon compliance with implementing the WRES, but also upon using it as an opportunity to help improve the wider culture of NHS organisations for the benefit of all staff and patients. The link between a diverse and supported workforce and better outcomes for all patients is well-documented.

The WRES has been welcomed across the country as a positive step forward to help support the NHS' responsibilities under the wider equality and inclusion agenda. The past year has seen further strengthening of the architecture to support WRES implementation across the NHS.

During 2016/17, work on the WRES has included:

*Publication of the first baseline WRES data report* for NHS trusts across England, presenting the performance against four (staff experience) of the nine WRES indicators for every NHS trust in England.

*Embedding the WRES into key policy levers* for NHS providers and NHS commissioning organisations including: Care Quality Commission's inspections of hospitals; NHS standard contract; CCG Improvement and Assessment Framework and within the Next Steps on the NHS Five Year Forward View.

*Establishing a pool of specialist CQC inspectors* across the country to help inspect against the WRES (and equality in general) as part of the wider CQC inspection of the 'well-led' domain. Providing CQC inspectors with informative WRES reports in preparation for forthcoming hospital inspections

*Delivering the first national WRES conference* in June 2016 hosting the NHS Windrush celebration event – a means of highlighting good practice and initial outcomes from WRES implementation, as well as celebrating the achievements of BME staff across the NHS

*Working with the boards of NHS organisations*, within specific sectors, for example the ambulance and the independent healthcare sector, to provide concerted focus on WRES implementation and culture change on this agenda.

*Initiating the identification of replicable good practice* on WRES implementation – including upon processes and practices that will help to close the gap in white and BME experiences and representation within the workplace.

*Making contributions towards national reviews and reports* on workforce race equality, including within the McGregor-Smith review of race in the workplace.

*Supporting WRES implementation* by local and national NHS organisations across the country by making available a suite of WRES resources, communications and guidance.

*Enabling local NHS organisations*, and national healthcare Arm's Length Bodies, to incorporate workforce race equality within their corporate policies, processes and objectives.

*The leadership of Mersey Care NHS Trust is committed to workforce race equality. Research and evidence suggest that diverse workforce representation improves teamwork, innovation and productivity. The WRES supports our organisation on this important agenda. It helps us to evaluate performance against indicators of workforce race equality and to produce robust action plans for continuous improvement over time.*

Beatrice Fraenkel  
Chair, Mersey Care NHS Trust

### ***NHS Workforce Disability Equality Standard***

Drawing upon the learning from WRES, the EDC agreed on the development of a Workforce Disability Equality Standard (WDES). It was agreed for the WDES to be included in the NHS standard contract from April 2018, with 2017/18 being the preparatory year.

The EDC is committed to tackling inequality in the workplace, wherever it is found. Taking the learning from the WRES, the new WDES will help the NHS to fully realise the potential of all staff, and ensure individual experiences contribute towards improving the care for all patients.

During 2016/17, a programme of work commenced to lay the foundations for the pending implementation of the standard across the NHS in England, including:

- the formation of a WDES Strategic Advisory Group (SAG) and a WDES Technical Advisory Group (TAG) to oversee the strategic and operational development of the WDES;
- initiating an extensive programme of communications to raise the profile of the initiative;
- developing draft WDES metrics which were the subject of detailed consideration by both the WDES SAG and the WDES TAG;
- the WDES SAG co-ordinating a series of events to seek feedback on the draft WDES metrics in October 2016 from across the NHS;
- alongside the development of the WDES metrics, initial work commenced on the concept of 'Disability As An Asset' and how this work can support the roll-out of the WDES.

The WDES SAG was co-chaired by NHS England and Disability Rights UK, representatives from disabled staff networks, in accordance with the principle of 'Nothing About Us Without Us', others with expertise in this area. The WDES TAG was co-chaired by NHS Employers and involved NHS HR specialists. Together the WDES SAG and TAG shaped the development of iterations of the WDES metrics.

### ***Equality Delivery System for the NHS – EDS2***

The Equality Delivery System (EDS2) is a facilitative tool that helps NHS organisations to continuously improve their equality performance for all patients, service users and the NHS workforce. Organisations assess their equality performance against the EDS2 outcomes in collaboration with their local stakeholders. EDS2 work underpins all of the strategic priorities outlined in the EDC work plan.

To help the NHS perform well on equality, the EDC oversaw the design, roll-out of the Equality Delivery System for the NHS in 2011. Following the changes in the health and care system in 2012/13, the tool was refreshed and launched as EDS2 in 2013. EDS2 supports NHS organisations across England to continuously improve their equality performance across all nine protected groups, and helps NHS organisations to respond to the Public Sector Equality Duty of the Equality Act (2010).

EDS2 arises from the EDC's commitment to an inclusive NHS that is fair and accessible to all – its focus across all characteristics given protection by the Equality Act 2010, built-in focus on sustained and meaningful engagement with stakeholders, and alignment with the specific and general duties of the Act, are its strengths. As such, 2016/17 saw EDS2 as being further embedded as a permanent feature in the day-to-day activities of NHS organisations across the country.

During the past year, the following key outcomes were achieved with regard to EDS2, including focused work to improve its use and impact across the NHS:

- a Community and Voluntary Sector Guide for EDS2 was produced by the Race Equality Foundation, LGBT Foundation, and Disability Rights UK, on behalf of the EDC;
- NHS Employers delivered a series of EDS2 workshops across the country to hear from organisations about their experiences of implementing EDS2. This will feed into the planned (phase two) independent evaluation of the impact of EDS2 during 2017/18;
- EDS2 is included in the 2017/18 to 2018/19 NHS Standard Contract, and features within the Care Quality Commission's inspection programme for hospitals.

Work to help support NHS organisations to continue with their implementation and effective use of EDS2 will continue in the year ahead.

*North East London NHS Foundation Trust's board and senior leadership is committed to EDS2 implementation. EDS2 has supported the trust in responding to the public sector equality duty and in embedding the equality and diversity agenda into its mainstream business planning. It has helped to improve our systemic structures and has supported the trust's Equality and Diversity Team in addressing key issues for patients and staff. EDS2 is about all staff, patients, carers and the communities we serve. It is about the people that people that rely on, and work in, our NHS. The Equality and Diversity Council has shown clear and essential leadership in supporting NHS organisations with their implementation of EDS2.*

Harjit Kaur Bansal  
Equality and Diversity Manager  
North East London NHS Foundation Trust

### ***Information standards for the collection of equality information***

An agreed priority of the EDC was to focus upon ensuring the availability of, and access to, the data and tools required to measure progress in advancing equality and diversity. During 2016/17, there was further onward development of work to ensure system-wide improvements in understanding of how people's differences can affect their access to services, experiences and health outcomes.

Work in this area has focussed upon the development of an information standard for sexual orientation monitoring (SOM); and an initial scoping exercise towards the possible development of a unified information standard that will bring together the monitoring of patient and staff data for all characteristics given protection under the Equality Act (2010).

### ***Sexual Orientation Monitoring (SOM) Standard***

There is a strong evidence base that Lesbian, Gay and Bisexual (LGB) people are disproportionately affected by a range of health inequalities, including poor mental health, higher risk of self-harm and suicide, increased prevalence of sexually transmitted infections, increased use of alcohol, drugs and tobacco with a higher likelihood of dependency; increased social isolation and vulnerability in old age.

A lack of sexual orientation monitoring (SOM) of patients means that these inequalities and related specific patient needs are often not acknowledged or addressed in mainstream service provision. One of the goals of the SOM standard work is to enable health and social care organisations to utilise sexual orientation information to help contribute to the improvement of healthcare providers' understanding of the impact of inequalities on health and care outcomes for different populations in England.

A key outcome during 2016/17 was the approval at the Standardisation Committee for Care Information (SCCI) Board of the specification for the SOM information standard. Working closely with key stakeholders including NHS Digital, the LGBT Foundation led the work to develop the SOM information standard on behalf of NHS England and supported by the EDC. The development of the standard, which is due for publication during 2017/18, identified key learning that will inform future work.

*A lack of patient sexual orientation monitoring across health and social care services leads to a serious lack of evidence about LGB people, their health needs and experiences of services. Monitoring sexual orientation is a proven way to address this gap in the evidence. The NHS Equality and Diversity Council is championing sexual orientation monitoring as a first step in improving the monitoring of all equality characteristics of staff and patients. LGBT Foundation is proud to be working with the NHS EDC, the National LGBT Partnership and other system partners to develop an Information Standard for sexual orientation monitoring in health services and Local Authorities with responsibilities for Adult social care in England. This work will be an essential step in improving the experiences of all patients and service users, whilst also helping to reduce the health inequalities that exist between groups.*

Paul Martin OBE  
Chief Executive, LGBT Foundation

In addition, the scoping of a community languages information standard was also completed during 2016/17 led by the Race Equality Foundation and NHS England – in collaboration with NHS Digital.

### 4.1.3 Promoting inclusive healthcare

#### *GP registration leaflets*

During the past year, work of the EDC with people with a lived experience continued. The work to help improve access to, and experience of, healthcare services for patients – especially for the most disadvantaged groups – resulted in co-production between the EDC and people with lived experience on three patient-facing leaflets on registering with a GP. The leaflets were launched in March 2017 at the International Homeless and Inclusion Health Symposium.

The leaflets are designed to assist people overcome barriers to healthcare registration and are accessible on the NHS Choices website. The dedicated work of the EDC lived experience members and the Inclusion Health and Lived Experience subgroup of the Council in bringing this work to fruition must be acknowledged.

It should be noted that EDS2 also has areas that impact upon patient care, and so has a role in promoting inclusive healthcare.

*The development and roll-out of GP registration leaflets have been essential in communicating information to groups such as Gypsies and Travellers, asylum seekers and refugees and people who are homeless, on how to register with a doctor. We know that inequalities in access, care and outcome still exist and there are instances when people from diverse backgrounds do not always receive the respect that they deserve. In helping to improve access to healthcare services, this intervention will help contribute towards the reduction of health inequalities that often exist amongst these groups within society – in this regard, monitoring its effectiveness will be important. This work also highlights the value of co-production between the NHS Equality and Diversity Council and people with lived experience.*

Jabeer Butt  
Deputy Chief Executive, Race Equality Foundation

### 4.1.4 Other work of the EDC

Alongside its set work programme for 2016/17, the EDC also undertook proactive work on equality matters. This work was in response to issues that emerged during the 2016/17 period. In particular, this included work on the response to Brexit and the impact on European Union (EU) and BME staff in the NHS, and in relation to the emergence of Sustainable and Transformational Plans (STPs) across the NHS.



### *Impact of Brexit on EU and BME staff in the NHS*

The EDC discussed emergent issues facing health and social care following the decision in 2016 for the UK to leave the European Union (EU). The EDC agreed a series of recommendations that were adopted, including:

- NHS Employers approaching relevant governmental departments to express issues facing health and social care and potential long-term implications upon the recruitment and retention of staff following leaving the EU;
- approaching relevant national bodies to monitor the specific levels of EU and BME staff employed and reported race-related harassment and abuse;
- an on-going campaign to support EU and BME staff across health and social care, and the identification of good practice and process in this area.

### *Sustainability and Transformation Plans (STPs) and equality*

The EDC undertook a proactive examination on the degree to which emerging STPs were considering equality and diversity, including how such matters could be integrated into decision-making.

Systematic and logical equality and health inequalities analyses for implementation plans were highlighted, including drawing upon:

- **Local expertise** – Voluntary and community sector, Equality and Diversity leads, patient and public involvement leads, Foundation Trust members;
- **Existing data and analysis** e.g. EDS2, Joint Strategic Needs Assessments (JSNAs), WRES, RightCare data;
- **National support** e.g. the Five Year Forward View engagement guidance.

It was agreed that going forward, the EDC would focus its attention upon the following key areas:

*Engaging with STPs* where equality is not identified as a priority, and recognising and celebrating STPs which have a strong equality focus.

*Sharing good practice* and learning nationally across all STPs.

A blog on the above issue was published during 2016/17 setting out why a focus on equality is important in STP work and how STPs can consider equality in their work including key questions to ask and resources available.

The blog has been well-read and can be found at:

<https://www.england.nhs.uk/blog/lucy-wilkinson/>

## 4.2 Ensuring the EDC is an effective and efficient system-wide partnership

Since its establishment in 2009, the EDC has undergone a refresh of its form and function every three years. The refresh exercise serves to ensure that the EDC: (i) is aligned to the current legal and healthcare architecture, and (ii) is operating efficiently and with agility to deliver against the challenges presented by this agenda.

During the past year, a review of the EDC's function, form and remit took place. A number of recommendations emerged from the review and were agreed upon by EDC members. The recommendations are outlined below:

- The primary focus of the EDC would be upon equality and diversity. EDC will deal with issues that can help to address health inequalities, but this is not the core purpose of the EDC.
- The EDC will further develop its narrative and aims based upon the core values of the NHS Constitution, across its remit, and develop and agree its future work programmes with these underpinnings.
- The operating structure of the EDC will be made up of a core strategic EDC membership representing strategic leadership, with operational subgroups, that will deliver upon the strategic direction, reporting back to the core EDC.
- EDC membership will be streamlined to aid strategic focus, agility and to reflect the operating structure described above.
- EDC governance structure will be reviewed; an annual report and event will take place to support the communication of its work widely across the NHS.

During 2017/18, the above agreed recommendations will be undertaken and put into place. These will help the EDC to focus upon maximum strategic engagement, influence and impact to deliver against the opportunities and challenges of this agenda within the current healthcare architecture.

# 5 Annex A: Members of the Equality and Diversity Council in 2016/17

Academy of Medical Royal Colleges

British Medical Association

Cambridge University Hospitals NHS Foundation Trust (on behalf of NHS providers)

Care Quality Commission

Department of Health

Houghton Thornley Medical Centres (on behalf of NHS clinical commissioners)

Health Education England

Healthwatch England

Hertfordshire NHS Foundation Trust (on behalf of NHS providers)

Lesbian, Gay, Bisexual and Trans Foundation (on behalf of the Strategic Partners Programme)

Lived experience representatives

Managers in Partnership

Middlesex University

National Institute for Health and Clinical Excellence

NHS Confederation

NHS Digital

NHS Employers

NHS England

NHS Improvement

NHS Leadership Academy

NHS Lewisham CCG (on behalf of NHS clinical commissioners)

NHS Providers

Patients Association

Public Health England

Race Equality Foundation (on behalf of the Strategic Partners Programme)

Royal College of Nursing

Unison