

## EQUALITY AND DIVERSITY COUNCIL MEETING

**Date/Time:** Wednesday, 19 April 2017 - 14.30-16.00

**Location:** Rooms 102A & 124A, Skipton House, London

### MINUTES

<b>RECORD OF MEETING</b>
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**1. Welcome, Introductions and Apologies**

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| <ul style="list-style-type: none"> <li>i. The Co-Chair welcomed everyone to the meeting.</li> <li>ii. There were the following apologies for absence: Elham Atashkar, Lisa Bayliss-Pratt, Henry Bonsu, Saffron Cordery, Wendy Irwin, Alistair Lipp, Paul Martin, Stephen Moir, Ruth Passman, Iman Rafatmah, Jon Restell, Lucy Wilkinson.</li> </ul> |
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**2. Minutes of the last meeting and actions**

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| <ul style="list-style-type: none"> <li>2.1 The minutes of the meeting held on 24 January 2017 were approved with one amendment: the hashtag for EDC communications should read: #InclusiveNHS</li> <li>2.2 The actions had been taken forward.</li> <li>2.3 The Co-Chair made people aware that EDC member, Stewart Moors, had sadly passed away. A tribute was paid to Stewart’s input into the work of the EDC and his leadership in helping to develop the patient-facing leaflet for asylum seekers and refugees was outlined.</li> </ul> |
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**3. EDC Summary Performance Report. Quarter 4: January 2017 – March 2017**

<p>3.1 The Co-Chair said that the format for the EDC summary performance report would change. In future, the report will highlight agreed objectives and key milestones, and RAG ratings will also better reflect progress. Members welcomed this development and suggested the need to improve risk reporting.</p>
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**4. The Equality and Diversity Council: Next Steps on the NHS FYFV**

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| <ul style="list-style-type: none"> <li>4.1 The Co-Chair introduced the paper and said it set out a proposal to progress the recommendations agreed by the EDC in January 2017 to update its form and function.</li> <li>4.2 AS said it was a sense check for members following the EDC workshop session in October 2016. The paper set out the proposed strategic vision and its operational expression. A key strategic driver was the Next Steps in the NHS Five Year Forward View; aligning the EDC strategically and operationally to the national policy was critical.</li> <li>4.3 Members supported the proposals in the paper with the following key points identified during discussion: <ul style="list-style-type: none"> <li>• It was important to establish to whom the EDC was accountable.</li> <li>• The role of the EDC is to set the strategic direction and to agree the principles on how programmes are implemented - including the involvement of local communities. The EDC’s role is to hold colleagues to account for undertaking work to deliver against priorities and workplans.</li> <li>• The paper did not address the issue of resources for the EDC and what to do about them. The EDC needed real resources to help meet its priorities, and clarity as to what resources existed and how they would be utilised was needed.</li> <li>• It was important that the EDC membership included people who were actually working in the NHS, workforce representatives, and people with a lived experience.</li> <li>• The EDCs ambitions should link to the system ambitions set out in the Next Steps of the NHS FYFV.</li> </ul> </li> <li>4.4 Concluding the discussion, the Co-Chair said that greater clarity on these issues would be</li> </ul> |
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discussed at a planned workshop style session on the development of the EDC. The work from this workshop will then be presented to the EDC at its July meeting for ratification.

## 5. EDC Draft Annual Report: 2016/17

5.1 The Co-Chair introduced the draft NHS EDC Annual Report and highlighted the importance of signalling what the EDC had achieved during the last year.

5.2 Comments had been received from people who were not able to attend the meeting e.g. CQC.

5.3 The following suggestions on how the annual report could be improved were:

- Where possible, include comments and personal stories or statements from charities or groups representing protected characteristics and inclusion health groups.
- Highlight the challenges faced – not just the successes.

5.4 The Co-Chair asked members to submit any further comments within the next two weeks so that work on the annual report could be concluded before the next meeting. The Secretariat would send a form to secure feedback and comments. **ACTION:** EDC Secretariat.

## 6. Workforce Race Equality Standard

6.1 RK and YC introduced the second annual WRES data report, the first to cover all nine WRES indicators. They reported that a 100% return from Trusts and more confidence this year re: data quality.

6.2 The report which was published today ([Workforce Race Equality Standards \(WRES\) annual report](#)), highlighted a number of key findings including:

- White shortlisted job applicants are 1.57 times more likely to be appointed from shortlisting than BME shortlisted applicants, who remain noticeably absent from senior grades within Agenda for Change (AfC) pay bands.
- BME staff in the NHS are significantly more likely to be disciplined than white staff members.
- An increase in numbers of BME nurses and midwives at AfC Bands 6 to 9 is observed for the period between 2014 and 2016.

6.3 JC welcomed the finding regarding BME nurses and midwives. It was important to concentrate on the delivery and to look at organisations, other than NHS Trusts, for example the ALBs.

6.4 It was acknowledged that more work needed to be undertaken with Ambulance Trusts, where improvements were needed. IH offered to work with the WRES Team on this as she had connections with an ambulance trust in Yorkshire. **ACTION:** IH and WRES Team.

6.5 In relation Ambulance Trusts, the Co-Chair suggested offering targeted support to the Ambulance Trusts. YC noted that the WRES Team was working closely with the Association of Ambulance Chief Executives and work was commencing to help make improvements across this sector.

6.6 It was important for the EDC to influence the system, for example, in relation to the composition of Trust Boards. This was something which could possibly be discussed at the proposed EDC workshop.

6.7 RK said that work on the link between staff experience and patient satisfaction was being updated and would be made available by the WRES Team.

6.8 On behalf of the EDC, the Co-Chair thanked the WRES Team for their excellent work.

## 7. EDC subgroup updates

7.1 The Co-Chair asked for comments by exception to the EDC Subgroup papers. The following points were noted:

- EDS2 Subgroup: the subgroup wanted to acknowledge SM contribution to the work of the group.
- Leadership and Workforce subgroup: It was important to make sure medical staff would be covered by the WDES.
- NHS Learning Disability Programme: this programme transferred to the NHS England Equality and Health Inequalities Team from 1 April 2017. Tribute was paid to the excellent work undertaken by the Programme, e.g. in relation to the Pledges led by LK. EDC members were encouraged to Pledge and to employ people with a learning disability. The Co-Chair also made people aware that Health Education England was now an approved training provider for supported internships across the NHS and has been allocated up to £1.2m by the Education Funding Agency to support up to 120 interns with a learning disability. Delivery will commence in the North East in September 2017. Secondly, the NHS had been designated by DfE as a “Pacesetter” to increase the proportion of people with LDD doing apprenticeships. HEE will be leading this work and several trusts have expressed an interest in being involved.
- Data Measurement Subgroup: an indicative date of the 27 April 2017 was planned for the publication of the Sexual Orientation Monitoring Standard but was subject to the Specification going through the NHS England Gateway process.
- Communications Subgroup: the programme of blogs was on track. It was noted that a blog on the achievements of the LD Programme should be included. A key objective was to co-ordinate communications across the system with EDC members. **ACTION:** IF.

## 8. Any other business

None.

### Agreed as an Accurate Record of the Meeting

<b>Date:</b>	18 July 2017
<b>Signature:</b>	Joan Saddler – EDC Co-Chair
<b>Name:</b>	Simon Stevens Joan Saddler
<b>Title:</b>	EDC Co-Chairs

**EDC MEMBERS:**

<b>First name</b>	<b>Surname</b>	<b>Organisation</b>
<b>Elham</b>	<b>Atashkar</b>	<b>Lived Experience Greater Manchester NHS Values Group</b>
<b>Dame Sue</b>	<b>Bailey</b>	<b>Academy of Royal Medical Colleges</b>
<b>Lisa</b>	<b>Bayliss-Pratt</b>	<b>Health Education England</b>
<b>Lynn</b>	<b>Berry</b>	<b>Lived Experience Greater Manchester NHS Values Group</b>
<b>Henry</b>	<b>Bonsu</b>	<b>Broadcaster</b>
<b>Sally</b>	<b>Brett</b>	<b>British Medical Association</b>
<b>Jabeer</b>	<b>Butt</b>	<b>Strategic Partners (Race Equality Foundation)</b>
<b>Saffron</b>	<b>Cordery</b>	<b>NHS Providers</b>
<b>Jane</b>	<b>Cummings</b>	<b>Chief Nursing Officer</b>
<b>Andrew</b>	<b>Dillon</b>	<b>National Institute for Clinical Excellence</b>
<b>Scott</b>	<b>Durairaj</b>	<b>NHS England</b>
<b>Alan</b>	<b>Farmer</b>	<b>NHS Improvement</b>
<b>Sara</b>	<b>Gorton</b>	<b>NHS Staff Council, Unison</b>
<b>Dr Amir</b>	<b>Hannan</b>	<b>Haughton Thornley Medical Centres, Hyde</b>
<b>Isabel</b>	<b>Hunt</b>	<b>NHS Digital</b>
<b>Wendy</b>	<b>Irwin</b>	<b>Royal College of Nursing</b>
<b>Tracie</b>	<b>Jolliff</b>	<b>NHS Leadership Academy</b>
<b>Alistair</b>	<b>Lipp</b>	<b>NHS England</b>
<b>Paul</b>	<b>Martin</b>	<b>Strategic Partners (LGBT Foundation)</b>
<b>Liz</b>	<b>McAnulty</b>	<b>Patients Association</b>
<b>Stephen</b>	<b>Moir</b>	<b>Head of Profession: Human Resources</b>
<b>Danny</b>	<b>Mortimer</b>	<b>NHS Employers</b>

<b>First name</b>	<b>Surname</b>	<b>Organisation</b>
<b>Anthea</b>	<b>Mowat</b>	<b>British Medical Association</b>
<b>Ruth</b>	<b>Passman</b>	<b>Head of the Equality and Health Inequalities Unit</b>
<b>Iman</b>	<b>Rafatmah</b>	<b>Lived Experience Greater Manchester NHS Values Group</b>
<b>Jon</b>	<b>Restell</b>	<b>Managers in Partnership</b>
<b>Joan</b>	<b>Saddler</b>	<b>NHS Confederation</b>
<b>Liz</b>	<b>Sayce</b>	<b>Healthwatch</b>
<b>Anu</b>	<b>Singh</b>	<b>NHS England</b>
<b>Simon</b>	<b>Stevens</b>	<b>NHS England</b>
<b>Tony</b>	<b>Vickers-Byrne</b>	<b>Public Health England</b>
<b>Ray</b>	<b>Warburton</b>	<b>NHS Lewisham CCG</b>
<b>Lucy</b>	<b>Wilkinson</b>	<b>Care Quality Commission</b>

**IN ATTENDANCE:**

Cassie Absolom	NHS England
Yvonne Coghill	NHS England
Paul Deemer	NHS Employers
Iain Fletcher	NHS England
Caroline Humphreys	NHS England
Roger Kline	NHS England
Lela Kogbara	NHS England
Stuart Moore (attending on behalf of Lisa Bayliss-Pratt)	Health Education England
Leander Neckles	NHS England
Habib Navqi	NHS England
Tracey Thomas (shadowing Isabel Hunt)	NHS Digital
Paul Wallace	NHS Employers