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NHS England Equality Objectives Programme

The future objectives report

Developing equality objectives and targets for 2023/24 and 2024/25

Version 1, May 2023

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1. About this report

1.1 Meeting our obligations under the PSED/SEDs

This report proposes equality objectives and targets for NHS England for 2023/24 and 2024/25. It also demonstrates how we intend to continue to meet our obligations under the Equality Act 2010, the [Public Sector Equality Duty \(PSED\)](#) and the [Specific Equality Duties \(SEDs\)](#). These duties require us to publish one or more equality objectives, at intervals of not more than four years since the previous objectives were published. These objectives must address one or more of the three equality aims in the Public Sector Equality Duty and one or more of [the protected characteristics set out in the Equality Act 2010](#).

By setting equality objectives and targets, our aim is to meet our legal obligations while driving strategic and demonstrable equality improvements, by reference to relevant protected characteristics in the Equality Act 2010, for the people we serve, the people that we employ, in our wider functions and in all that we do.

1.2 Building on the Review and Engagement reports

This is one of three linked reports. The other two reports are the [Review Report](#) [[See the Review Report](#)] and the [Engagement Report](#) [[See the Engagement Report](#)].

The Engagement Report explains the external consultation and engagement activities undertaken during 2022/23 to inform the development of the new equality objectives.

The Review Report assesses key progress made against the equality objectives and targets that we set for 2022/23 and provides wider equality information as required by the SEDs. It also overviews the complex legislative frameworks, provided by the Equality Act 2010, the PSED and the SEDs on the one hand and on the other hand by the health inequalities duties.

Please do read the Review Report if you need to understand why the SED framework for addressing the equality objectives **does not** address the wider requirements of the health inequalities duties.

2. Developing our equality objectives and targets for 2023/24 and 2024/25

2.1 The creation of the new NHS England and its impact on our equality objectives

2022/23 was a year of significant change for NHS England with the passage and commencement of the Health and Care Act 2022, which formally created the new NHS England. With the ongoing transformation programme, described in the Review report, we are proposing to retain the existing eight equality objectives set for 2022/23 and 2023/24 with amendments informed by the Review Report and key developments during 2022/23.

As NHS Improvement ceased to exist as a separate legal entity on 1/7/22, references to NHS Improvement have been removed from the equality objectives and targets for 2023/24 and 2024/25. A new target is signified by the letter N so EO1 NT1 would signify Equality Objective 1 new target (NT)1.

The Health and Care Act 2022 formally created the new NHS England. As the transformation programme, described in some detail in the Review Report, is still continuing at pace into 2023/24, we are proposing to retain the existing eight equality objectives set for 2022/23 and 2023/24 with some changes minor changes. The proposed targets for 2023/24, and where appropriate 2024/25, have been informed by: the Review Report; the consultation and engagement undertaken in 2022/23; and key developments including in the regulatory approach to Integrated Care Boards (ICBs) being developed by the Equality and Human Rights Commission (EHRC).

In the [report](#) published in May 2022, we identified areas where stakeholders had asked for new equality targets in 2023/24. The calls for new targets focused on EO5 [Patient access and communication] and included: long Covid; community languages and translation; pregnancy and maternity; and mental health. Our approach to the call for targets is covered in section 4 of this report. New targets for/related to long Covid and pregnancy and maternity have been proposed under EO5 (see section 3 of this report).

2.2 Design principles, our equality objectives and targets

We continue to operate within the design principles set out in [NHS England and NHS Improvement's Equality Objectives for 2022/23 –2023/24](#) published in May 2022 and key questions posed about measuring impact. Our design principles have also been informed by our review and engagement activities during 2022/23 and have informed the development of the proposed equality targets for 2023/24 and 2024/25.

The design principles are:

- Each equality objective should enable progress to be made across relevant protected characteristics.
- The targets underpinning each equality objective should provide the focus for specific action, including where required for individual protected characteristics.
- Use of targets meets the requirement in the legislation and the [EHRC Technical Guidance](#) that equality objectives should be specific and measurable.
- Equality objectives should be either patient or workforce-focused unless separation would be impractical or make no sense.
- Equality objectives need to be as specific and measurable as possible.

These original questions about measuring impact remain valid:

- How should we measure meaningful change – and how can this be reflected in the objectives and targets and any associated performance framework?
- For each equality objective and associated targets, which metrics will best enable us to drive change?
- How should we ensure that the targets support an improvement approach with a greater focus on measuring "how much", "by when", the metrics and the frequency of measurement and how should this be fed back and to whom?
- How should we be held to account for the achievement of the equality objectives and targets?

The additional design and engagement principles and questions are:

- Equality targets must take account of the new NHS England operating framework.
- Equality objectives and targets must be fit for the new system landscape.
- The approach adopted must avoid introducing dual reporting under the PSED/SEDs and the health inequalities duties unless this would lead to clear, significant and demonstrable benefits.
- The equality targets should identify effective ways to support ICBs to meet the developing regulatory approach and priorities articulated by the EHRC in February 2023.
- The approach must lead to a sustainable and proportionate review framework to enable review at least every four years.
- How can the engagement process better include those who are often not engaged with the NHS?
- How can we ensure that engagement is meaningful and proportionate?
- This process is inherently complex and so much is in flux as a result of: the Health and Care Act 2022; mergers with NHS England; and the transformation of NHS England combined with up to 40% staffing reductions across the new single organisation and financial constraints. Looking beyond 2023/24, when and how should we engage in external consultation around equality objectives for 2024/25 or future years?

2.3 Key themes emerging for consultation and engagement

We received rich feedback from the engagement forums and the questionnaire sent to members of the FutureNHS Equality and Health Inequalities Network and others (see the [Engagement Report](#)). [\[See Engagement Report\]](#)

The qualitative input from this work was important and provided a range of insights. We wish to express our thanks for the input. There were some recurrent issues and themes which fit under five key headings: capability, training and understanding; inclusive language and communication; representation and leadership; issues not clearly covered by the equality objectives and targets; and improving future engagement.

We have considered how to address these themes as part of developing our equality objectives and targets for 2023/24 and 2024/25. This information was used to inform the discussions with current and potential target leads (see section 2.5 below). We are also exploring what else can be done with the information. The key themes from the consultation and engagement are replicated below because we want to ensure that readers are aware of the central themes and issues raised.

Capability, training and understanding

Some of the key themes from the forums and the questionnaire responses related to issues of capability, training and understanding within NHS organisations and staff members' understanding of the issues faced by groups and individuals sharing particular protected characteristics. This was summed up as "cultural competency", with concerns expressed about how well NHS professionals understood the lived experience of particular groups and the ability of staff and managers to hear, see and identify discrimination. In addition, there were a number of questions and insights about how [equality] training was delivered and some questioned the quality and effectiveness of such training.

Questions also related to how NHS England and NHS organisations analyse the quality and effectiveness of staff training. For example, is there 100% compliance across organisations and if not, why not.

Inclusive language and communication

Another repeated theme was about inclusive language. It was pointed out that poor use of language sends a message that the NHS does not really care about particular groups and communities.

A number of the forums raised questions about the accessibility of NHS communications, particularly about how consistently and well organisations are implementing the Accessible Information Standard (AIS). Some also identified challenges for particular groups such as individuals with hearing loss or where digital information is not sufficiently accessible.

Representation and leadership

Several of the groups underlined the importance of having the NHS workforce and the NHS leadership reflect the diversity of the communities served. This was partly summarised by the comment that "people from any protected characteristic would feel more valued if staff were more diverse".

Issues not clearly covered by the equality objectives and targets

The consultation and engagement process sought to identify communities and groups who have crucial equality issues which were not sufficiently addressed by the existing equality objectives and targets. A number of responses identified the Gypsy, Roma and Traveller community as one group facing particular challenges (though precise issues were not identified). Some other responses raised the challenges faced by the trans community. We received a number of responses identifying groups/issues that sit outside the Equality Act 2010's protected characteristics. For example, socioeconomic deprivation or geographic variation, do not fit within the framework provided by the health inequalities duty but stand outside the Equality Act 2010's protected characteristics. This feedback has been shared with relevant teams and is covered in the Engagement Report.

Improving future engagement

We heard that we needed to improve future engagement to enhance links and insight from seldom-heard-from groups. The engagement forums and a number of questionnaire responses stressed the importance of working with and through community and VCSE organisations as 'trusted partners' especially to reach less-well engaged groups. As a result, an external review was commissioned from a VCSE HWA member to support and inform future engagement activities.

3. Our proposed equality objectives and targets for 2023/24 and 2024/25

3.1 Updating the equality objectives and targets

As NHS Improvement ceased to exist as a separate legal entity on 1 July 2022, references to it have been removed from the equality objectives and targets for 2023/24 and 2024/25. Where new targets have been proposed this is signified by the letter N so EO1 NT1 would signify Equality Objective 1 new target 1. Where possible, we have noted the years for which the targets should apply.

3.2 Equality Objective 1 [COVID-19 and Recovery]

EO1 To ensure that the equality and health inequality impacts of COVID-19 and key lessons learnt are fully considered and that clear strategies are developed and implemented for the NHS workforce and patients of all ages as the NHS continues to move beyond the recovery phase. To ensure that patient and workforce focused strategies reflect this and make an effective contribution to advancing equality for people of all ages by reference to protected characteristics and to reducing associated health inequalities.

EO1 T1 To ensure that operational, planning and associated guidance to systems considers how to address and reduce the adverse equality impacts of COVID-19 and provides strategic guidance to the NHS. [2023/24 and 2024/25]

EO1 T2 To work to ensure that key NHS England patient and workforce strategies consider the lessons learned from COVID-19 and how to address and reduce the adverse equality impacts of COVID-19. [2023/24 and 2024/25]

EO1 T3 To develop and implement strategies in elective recovery, including for people of all ages, in order to reduce the adverse equality impacts of COVID-19 as the NHS moves further into the recovery phase. [2023/24 and 2024/25]

Rationale for approach

We are proposing that the existing wording of the equality objective is maintained with minor changes. Minor changes are also proposed to the wording of target 3 to reflect the transition from the acute stages of the COVID-19 pandemic.

3.3 Equality Objective 2 [Capability]

EO2 To improve the capability of NHS England to understand and address the PSED’s legal obligations and the interface with the separate health inequalities duties

EO2 T1 To improve the capability of NHS England’s teams to understand and address the PSED’s legal obligations. [2023/24 and 2024/25]

EO2 T2 To continue to respond to the priorities identified by NHS England’s Board to address patient equalities. [2023/24 and 2024/25]

Rationale for approach

We are proposing a minor change to the equality objective wording to reflect the disestablishment of NHS Improvement. We are proposing minor changes to the wording of the targets with a greater focus on the PSED and we will continue to work in partnership to develop the guidance for the system on the new health inequalities duty.

3.4 Equality Objective 3 [Information]

EO3 To improve the mapping, quality and extent of equality information to better facilitate compliance with the PSED in relation to patients and NHS service-users of all ages, NHS service delivery, and the NHS workforce.

EO3 T1 To work with the DHSC, ONS, NHS arm’s length bodies, and other government bodies to identify how best to carry forward and oversee the work of the UISPC Project. [2023/24]

Rationale for approach

We are proposing that the existing wording of the equality objective is maintained. We have removed old target 1 as the UISPC PSG was established during 2022/23. The delivery of the revised target 1 will determine what targets should be set for 2024/25.

3.5 Equality Objective 4 [Internal workforce]

EO4 To improve, by reference to protected characteristics, the recruitment, retention, progression, development, and experience of the people employed

by NHS England to enable the organisation to become an inclusive employer of choice.

EO4 T1 To maintain the 19% aspirational target of BME representation at all levels of our organisation. [2023/24 and 2024/25]

EO4 T2 To continue increasing declaration rates of under-represented groups in our workforce including disabled colleagues. [2023/24 and 2024/25]

EO4 T3 To undertake a change programme on our recruitment and promotion, further enabling the organisation to become an employer of choice and a workforce that reflects the communities we serve. [2023/24 and 2024/25]

EO4 T4 To reset our EDI strategy, for the new NHS England, creating opportunities to refresh our targets to ensure they are reflective of our EDI values, local labour markets and accommodating the rapid growth of a merged workforce. [2023/24 and 2024/25]

EO4 T5 To seek to improve our diversity representation through organisational change. [2023/24 and 2024/25]

Rationale for approach

We are proposing a minor change to the equality objective wording to reflect the disestablishment of NHS Improvement. We are proposing a new target 5 to reflect the organisational change programme. The current external recruitment freeze will impact on this target particularly in sections 1 and 5. The take up of the voluntary redundancy scheme offered may also have an impact. We are mindful of the levels of change and uncertainty our workforce is experiencing, and we will continue to monitor this objective, build on insights and engage with our key stakeholders throughout the transition.

3.6 Equality Objective 5 [Patient access and communication]

EO5 To improve access and reduce communication barriers experienced by individuals and groups of people of all ages, by reference to protected characteristics, who need NHS services.

EO5 NT1 To publish the updated Accessible Information Standard (AIS). [2023/24]

EO5 NT2 To publish the updated AIS self-assessment framework, e-learning resources and supporting documentation. [2023/24 and 2024/25]

EO5 NT3 To provide a quantitative summary that includes an assessment of accessibility to Post COVID services by IMD levels of deprivation and ethnicity. [2023/24]

EO5 NT4 Through the evaluation of the [Equity & Equality Guidance](#) and implementation of Local Maternity and Neonatal Systems (LMNS) equity & equality action plans, in furtherance of [pledge 4](#), NHS England will measure progress in relation to reducing inequalities in perinatal mortality rates for babies from Black, Asian and mixed ethnic groups and identify how good practice can best be shared and spread. [2023/24 and 2024/25]

Rationale for approach

We are proposing that the existing wording of the equality objective is maintained. The AIS was reviewed in 2022/23 and will be published in 2023/24. Target 2 is now more specific and identifies the need to update the suite of e-learning resources developed to support previous iterations of the AIS. A new target is proposed on long Covid, with this area identified for target development in the 2022/23 Equality Objectives report. In 2022/23, it was suggested that a new target for pregnancy and maternity should be considered and that this should consider the findings of the [Ockenden report](#); a new target has been developed which draws on the wider [Equity and equality: Guidance for local maternity systems](#).

3.7 Equality Objective 6 [System workforce]

EO6 To improve, by reference to protected characteristics, the recruitment, retention, progression, development and experience of staff in the NHS workforce.

EO6 NT1 To publish and implement the high impact actions (and their associated success metrics) included in the national NHS Equality, Diversity and Inclusion (EDI) improvement plan seeking by 2024/25 to develop improvement trajectories for this programme. [2023/24 and 2024/25]

EO6 NT2 To launch 14 new supported internship programmes during 2023/24 and maintain the remaining 28 programmes launched before 2023/24 to enable NHS organisations to offer supported internship places to young people, aged 18 to 24,

targeted at those with a learning disability and/or autistic people, as part of the DFN Project SEARCH programme funded by NHS England. [2023/24]

EO6 NT3 To implement a framework for monitoring the number of volunteers across the NHS by reference to protected characteristics and any other relevant characteristics. [2023/24 and 2024/25]

Rationale for approach

We are proposing that the existing wording of the equality objective is maintained. We are proposing a new integrated equality target, focusing on the NHS EDI improvement plan to replace previous targets 1 to 4. The implementation of this plan in 2023/24 and beyond will be tracked and measured through the metrics identified and presented via an EDI dashboard, which will in due course incorporate improvement trajectories. The success metrics for this new target will be anchored in existing regulatory frameworks such as the [CQC well-led framework](#), NHS England's quality training framework and the [NHS Oversight Framework](#).

The accountability framework will be aligned to the NHS operating framework to ensure that systems and organisations are clear on their roles and responsibilities in implementing the NHS EDI improvement plan. Work is ongoing to also anchor the metrics within the professional registration process of the GMC, NMC and other professional bodies. This will be tracked through existing data collections and returns such as the WRES/WDES/ NHS staff survey / NHS ESR to avoid placing an additional burden on NHS trusts and ICBs. The EDI dashboard is currently being developed with the Model Health System colleagues to highlight how to collect and analyse the metrics and integrate this information into decision-making.

We are proposing that targets 5 and 6 from 2022/23 (now NT2 and NT3) are retained but updated to reflect developments during 2022/23.

3.8 Equality Objective 7 [Integrated Care Boards]

EO7 To work with Integrated Care Boards (ICBs) to support their compliance with the Equality Act 2010's Public Sector Equality Duty (PSED) and the associated Specific Equality Duties (SEDs)

EO7 NT1 To work in partnership with Equality and Human Rights Commission (EHRC) to ensure clear guidance is produced for ICBs on the development of equality information and equality objectives. [2023/24 and 2024/25]

EO7 T2 To identify the best ways to support ICBs to meet PSED/SED requirements. [2023/24]

Rationale for approach

We are proposing that the existing wording of the equality objective is retained. We propose amending the wording of targets 1 and 2 to recognise the role of the EHRC in oversight and enforcement around the PSED and SEDs and the benefits of exploring how to enable ICBs to share good practice in this area.

3.9 Equality Objective 8 [System landscape]

EO8 To ensure that the equality objectives for NHS England address the relevant statutory functions, duties, powers and responsibilities of NHS England created by the Health and Care Act 2022. [2023/24 and 2024/25]

EO8 T1 To harmonise the arrangements for PSED and SED compliance across the new NHS England. [2023/24 and 2024/25]

EO8 T2 To review and assess how best to incorporate the Equality Objectives, developed for NHS Digital and Health Education England, into the work to develop revised Equality Objectives for the new NHS England. [2023/24 and 2024/25]

Rationale for approach

We are proposing a minor change to the equality objective wording to reflect the disestablishment of NHS Improvement. We are proposing changes to the wording of targets 1 and 2 to reflect the work that will be needed as the transformation programme progresses during 2023/24 and is embedded in 2024/25.

4. Moving forward – our approach

4.1 Internal engagement during 2023/24

The PSED and the SEDs require the equality objectives and targets for the new NHS England to relate to its roles and functions and they must be specific, measurable and outcome-focused.

The programme to create the new NHS England will continue well into 2023/24 and its roles and functions will not be settled until the programme is completed. However, we will proceed with planning and preparation for internal engagement, initially with key teams from former NHS Digital and HEE, with equality briefs and/or policy briefs. The Review Report highlights work that was possible without directly engaging with NHS Digital and HEE colleagues to have meaningful discussions about any equality objectives or targets that they will lead on. However, during 2023/24, we will need to identify relevant colleagues within the new NHS England structure and engage with them. Given the transformation programme timetable, we currently envisage that this engagement will take place between quarters 2 and 3 of 2023/24.

4.2 Areas identified for consideration during 2023/24

A number of areas for further consideration during 2023/24 were identified as a result of: issues raised in relation to the SED reports published in May 2022; the review process during 2022/23; the consultation and engagement during 2022/23; and EHRC's letter to all ICB chief executives in February 2023.

Community languages

The introduction of ICBs further complicates an already complicated picture. We therefore need to clarify the responsibilities and roles of NHS England, ICBs and NHS providers in relation to community languages, taking account of the new framework and requirements introduced by the Health and Care Act 2022, and the health inequalities duties in particular. The Healthcare Inequalities Improvement Programme's 2023/24 Business Plan includes developing and publishing a scoping document on the community languages and interpretation provision across the NHS.

Digital

NHS Digital exercised a range of statutory functions and these were transferred to NHS England. However, until the transformation process is more advanced it will not be possible to properly consider how NHS England will exercise these powers. We recognise the increasing importance of digital technologies in engaging with patients, people and communities, but note the challenges of digital exclusion, particularly due to its close correlation with a number of protected characteristics. In exercising these powers and duties, consideration will need to be given to a range of issues including the PSED. The Director for Healthcare Inequalities is NHS England's SRO for Digital Inclusion. This is consistent with the Laura Wade-Gery report, [Putting data, digital and tech at the heart of transforming the NHS](#). NHS England's Board fully accepted the [recommendations](#) in this report. The Healthcare Inequalities Improvement Programme will publish a Digital Inclusion Framework as per the commitment in [NHS England's 2022/23 Business Plan](#) and [DHSC's A plan for digital health and social care](#).

Education, training and capability

The new workforce, training and education directorate will incorporate key roles, teams and functions previously exercised by HEE; we will want to explore the variety of issues raised during the engagement process and documented in the Engagement Report. Consideration will be given to the extent to which key issues raised on capability, understanding, inclusive language and communication and representation could be addressed as part of implementing the national NHS EDI improvement plan. [\[See Engagement Report\]](#).

Key themes and issues raised by the EHRC

The EHRC's February 2023 letter to ICB chief executives set out ICBs' responsibilities under the public sector equality duty (PSED) and the specific equality duties (SEDs). The letter also highlighted 3 key EHRC priorities over the coming two years:

- considering equality within the NHS workforce, including [the experience of low paid ethnic minority staff](#)
- tackling [disproportionate rates of detention of ethnic minority people](#) under the Mental Health Act 1983

- tackling the [inappropriate detention of people with a learning disability and autism](#) (as defined by the EHRC).¹

The letter also explained that the EHRC intends to monitor progress made by ICBs later in 2023/24 and to engage directly with individual ICBs to confirm their approach. We have built in the need to identify what appropriate support can be provided by NHS England to support ICBs under equality objective 7 with respect to publishing equality objectives and equality information. On the employment of low-paid ethnic minority staff, mental health detentions and people with a learning disability and/or autistic people, the issues raised with ICB chief executives by the EHRC have been referred to relevant directorates, policy and clinical teams to consider any relevant matters for NHS England.

Black maternal health

On 18 April 2023, the Women and Equalities Committee (WEC) published [Black maternal health](#). This report makes recommendations for government, NHS England and others. NHS England will provide information to DHSC to support their response. NHS England will also consider whether any further action to tackle health inequalities is needed.

Specialised commissioning, public health commissioning and vaccinations

Initial discussions were held with the commissioning teams, however given the significant programme of change with the respective commissioning responsibilities of NHS England and ICBs, and further delegation of specialised services to ICBs, the relevant teams will need to consider during 2023/24 whether a commissioning equality objective is required.

4.3 Recommendations on future external engagement

PET commissioned an independent report on how to improve future engagement activities. The Race Equality Foundation, a member of the VCSE Health and Wellbeing Alliance (VCSE HWA), is leading this work. Central to this work is engagement with other members of the Alliance. The aim is to provide guidance on how we should develop an engagement plan and framework to enable appropriate

¹ As defined by the EHRC: By “inappropriate detention” the EHRC is referring to “situations where someone does not need inpatient care but is detained due to lack of community provision, is subject to physical restraint/long-term segregation, and/or suffers from the absence of an effective mechanism to challenge prolonged detention.”

engagement, consultation and evidence gathering activities in 2023/24 and beyond. The guidance considered the issues listed below.

- The target audiences for engagement on NHS England's equality objectives and information during 2023/24 or beyond.
- What engagement should be undertaken in 2023/24, identifying the most effective ways for NHS England to engage and how this should be timetabled.
- How the VCSE HWA could most effectively be involved in consultation and engagement activities both as a forum and as individual organisations.
- How we can ensure that the engagement activities hear from those who are seldom heard from while balancing the need for engagement to be meaningful.

The report also considered how to gather expert evidence from VCSE HWA members to identify the most pivotal reports, research or evidence on equality by reference to protected characteristics that should inform the equality objectives and targets for 2024/25. As part of this the Engagement Plan has considered whether a further call for evidence should be undertaken during 2023/24 and if so how it should be conducted.

Appendix A: Our equality objectives and targets for 2022/23 and 2023/24

This section sets out the wording of the original equality objectives, approved in May 2022 by NHS England's Board. These equality objectives were set for 2022/23 and 2023/24 and the targets were set for 2022/23. Progress made during 2022/23 is assessed in the Review Report. The updated equality objectives and targets for 2023/24 and 2024/25 are set out in part 3 of this report.

Equality Objective 1 [COVID-19]

Equality objective for 2022/23 and 2023/24

To ensure that the equality and health inequality impacts of COVID-19 and key lessons learnt are fully considered and that clear strategies are developed and implemented for the NHS workforce and patients of all ages as the NHS moves into and beyond the recovery phase. To ensure that patient and workforce focused strategies reflect this and make an effective contribution to advancing equality for people of all ages by reference to protected characteristics and to reducing associated health inequalities.

Targets for 2022/23

EO1 T1 To ensure that operational, planning and associated guidance to the Systems considers how to address and reduce the adverse equality impacts of COVID-19 and provides strategic guidance to the NHS.

EO1 T2 To work to ensure that key NHS England and NHS Improvement patient and workforce strategies consider the lessons learned from COVID-19 and how to address and reduce the adverse equality impacts of COVID-19.

EO1 T3 To continue to develop and implement strategies in elective recovery, including people of all ages, in order to reduce the adverse equality impacts of COVID-19 as the NHS moves into the recovery phase.

Equality Objective 2 [Capability]

Equality objective for 2022/23 and 2023/24

To improve the capability of NHS England's and NHS Improvement's teams to understand and address the PSED's legal obligations and the separate health inequalities duties and associated requirements as they develop.

Targets for 2022/23

EO2 T1 To improve and develop the in-house capability programme to NHS England and NHS Improvement staff.

EO2 T2 To respond to the priorities identified by NHS England's and NHS Improvement's Boards in relation to addressing patient equalities and associated health inequalities.

Equality Objective 3 [Information]

Equality objective for 2022/23 and 2023/24

To improve the mapping, quality, and extent of equality information in order to better facilitate compliance with the PSED in relation to patients and NHS service-users of all ages, NHS service delivery, and the NHS workforce.

Targets for 2022/23

EO3 T1 To establish a Unified Information Standard for Protected Characteristics (UISPC) Publication Steering Group to identify which of the UISPC's recommendations should be taken forward.

EO3 T2 To work with the UISPC Publications Steering Group to identify how best to carry forward and oversee the work of the UISPC Project.

EO3 T3 To identify what the options there are for the UISPC programme to inform how to undertake mapping by reference to health inequalities.

Equality Objective 4 [Internal workforce]

Equality objective for 2022/23 and 2023/24

To improve, by reference to protected characteristics, the recruitment, retention, progression, development, and experience of the people employed by NHS England and NHS Improvement to enable the organisations to become inclusive employers of choice.

Targets for 2022/23

EO4 T1 To maintain the 19% aspirational target of BAME representation at all levels of our organisation.

EO4 T2 To continue increasing declaration rates of under-represented groups in our workforce including disabled colleagues.

EO4 T3 To undertake a change programme on our recruitment and promotion, further enabling the organisation to become an employer of choice and a workforce that reflects the communities we serve.

EO4 T4 To reset our EDI strategy, for the new NHS England, creating opportunities to refresh our targets to ensure that they are reflective of our EDI values, local labour markets and accommodating the rapid growth of a merged workforce.

Equality Objective 5 [Patient access and communication]

Equality objective for 2022/23 and 2023/24

To improve access and reduce communication barriers experienced by individuals and groups of people of all ages, by reference to protected characteristics, who need NHS services.

Targets for 2022/23

EO5 T1 To complete the review of the Accessible Information Standard (AIS) and publish the revised standard together with guidance to support compliance.

EO5 T2 To ensure that the expectations placed on key stakeholders are clear and processes are in place to assure compliance with the AIS at a local and provider level.

EO5 T3 To ensure relevant NHS England and NHS Improvement policies use language that is inclusive of LGBT+ people.

Equality Objective 6 [System workforce]

Equality objective for 2022/23 and 2023/24

To improve, by reference to protected characteristics, the recruitment, retention, progression, development, and experience of staff in the NHS workforce.

Targets for 2022/23

EO6 T1 To increase the proportion of staff in senior leadership roles who a) are from a BME background b) are women c) disabled in line with the Long Term Plan commitments.

EO6 T2 To publish a workforce EDI strategy for NHS staff, including LGBT+ staff, aimed at establishing areas of focus for systems and organisations to improve the experience of LGBT+ staff in their workplace.

EO6 T3 To increase the representation of Disabled people on NHS Trust and Foundation Trust Boards, in line with the Long Term Plan commitments.

EO6 T4 To continue the rollout of the 6 High Impact Actions to progress Inclusive recruitment and promotion practices across the NHS.

EO6 T5 To launch 38 new supported internship programmes over 2022/23 and 2023/24 with NHS organisations in England offering between 304 - 380 new supported internship places for young people aged 18 – 24 as part of the funded DFN Project SEARCH programme funded by NHS England and NHS Improvement and Health Education England.

EO6 T6 To implement a framework for monitoring the number of volunteers across the NHS by reference to protected characteristics and any other relevant characteristics.

Equality Objective 7 [ICBs]

Equality objective for 2022/23 and 2023/24

To work with Integrated Care Boards (ICBs) to support their, and their systems, compliance with the Equality Act 2010's Public Sector Equality Duty (PSED) and the associated Specific Equality Duties (SEDs).

Targets for 2022/23

EO7 T1 To publish guidance on compliance with the PSED and the specific equality duties.

EO7 T2 Working in partnership with the National Healthcare Inequalities Improvement Team to identify a named Executive Board level lead with oversight for meeting the requirements of the PSED and the SEDs.

EO7 T3 To deliver a programme for ICBs to support PSED compliance using the Equality Delivery System and other relevant tools, as part of a wider offer from NHS England and NHS Improvement.

Equality Objective 8 [System landscape]

Equality objective for 2022/23 and 2023/24

To ensure that the equality objectives for NHS England and NHS Improvement address the relevant statutory functions, duties, powers and responsibilities of NHS England created by the Health and Care Act 2022.

Targets for 2022/23

EO8 T1 To identify the existing arrangements within HEE and NHS Digital for securing compliance with the PSED and the SEDs and agree how to harmonise the differing arrangements.

EO8 T2 To establish a process for reviewing whether the equality objectives developed for NHS England and NHS Improvement for 2022/23 and 2023/24 appropriately address the overall statutory functions of the new 'NHS England'

Appendix B: Acronyms used in this report

AIS	Accessible Information Standard
ALBs	Arm's Length Bodies
BME	Black and Minority Ethnic
BAME	Black, Asian and Minority Ethnic
BSL	British Sign Language
CCG	Clinical Commissioning Groups ²
CPO	Chief People Officer
CQC	Care Quality Commission
DAWN	Disability and Wellbeing Network
DHSC	Department of Health and Social Care
EDI	Equality, Diversity and Inclusion
EHIA	Equality and Health Inequalities Impact Assessment
EHIN	Equality and Health Inequalities Network
EQIA	Equality Impact Assessment
EHRC	Equality and Human Rights Commission
EO	Equality Objective
ESR	Electronic Staff Record
GEO	Government Equalities Office
GP	General Practitioner (Family Doctor)
HEE	Health Education England ³
HIA	High Impact Action
HR	Human Resources
HRD	Human Resource Development

² CCGs ceased to exist as separate legal entities on 1/7/22

³ HEE ceased to exist as a separate legal entity on 1/4/23

ICS	Integrated Care Systems
ICB	Integrated Care Board ⁴
LDEP	Learning Disability Employment Programme
LeDeR	Learning Disabilities Mortality Review
LGB	Lesbian, Gay and Bisexual
LGBT	Lesbian, Gay, Bisexual and Transgender
LGBT+	Lesbian, Gay, Bisexual and Transgender plus ⁵
NECS	North of England Commissioning Unit
NHS	National Health Service
NHS CAG	NHS Citizen Advisory Group
NHSD	NHS Digital ⁶
NHS EDC	NHS Equality and Diversity Council
NT	New Target
OD	Organisational Development
PET	Patient Equalities Team
PSED	Public Sector Equality Duty
RT	Revised Target
SED	Specific Equality Duty
SEND	Special Educational Needs and Disability
SME	Subject Matter Expert
SMI	Serious Mental Illness
SOP	Standard Operating Procedure
UISPC	Unified Information Standard for Protected Characteristics
UISPC PSG	UISPC Publication Steering Group

⁴ ICBs became formal legal entities on 1/7/22

⁵ LGBT+: LGBT stands for lesbian, gay, bisexual and transgender/transsexual people. However, it is recognised that those four letters do not necessarily include all those whose sexuality is not heterosexual, or whose gender identity is not based on a traditional gender binary (Council of Europe definition) <https://www.coe.int/en/web/gender-matters/lgbt+>

⁶ NHS Digital ceased to exist as a separate legal entity on 1/2/23

VCSE HWA	Voluntary Community and Social Enterprise Health and Wellbeing Alliance
WDES	Workforce Disability Equality Standard
WRES	Workforce Race Equality Standard

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