

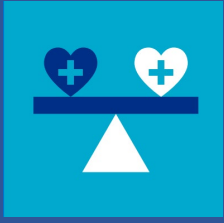


# NHS equality, diversity, and inclusion improvement plan



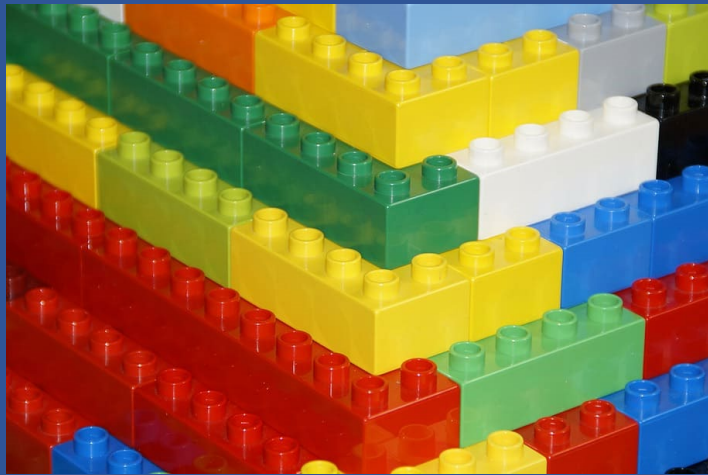
[NHS equality, diversity, and inclusion improvement plan \(england.nhs.uk\)](https://www.england.nhs.uk/equality-diversity-and-inclusion-improvement-plan/)

“This EDI improvement plan supports the long term workforce plan by improving the culture of our workplaces and the experiences of our workforce”



# Key principles – EDI is everyone's Business

1. Achieving equality of health outcomes requires;
  - identification of barriers and biases,
  - targeted action to overcome specific inequalities, discrimination and marginalisation.
  - Understanding that multiple forms of inequality or disadvantage sometimes combine to create obstacles that cannot be addressed through the lens of a single characteristic in isolation.
2. Aim of the plan;
  - Improve equality diversity and inclusion,
  - Enhance the sense of belonging for NHS staff to improve their experience.
  - Impact positively on protected groups as defined in the Equality Act 2010 and individuals beyond these definitions.
  - To be intersectional, recognising that people have complex and multiple identities.



NHS built on the values of:

- Everyone counts,
- Dignity and respect
- Compassion
- Improving lives
- Working together for patients
- Commitment to quality.

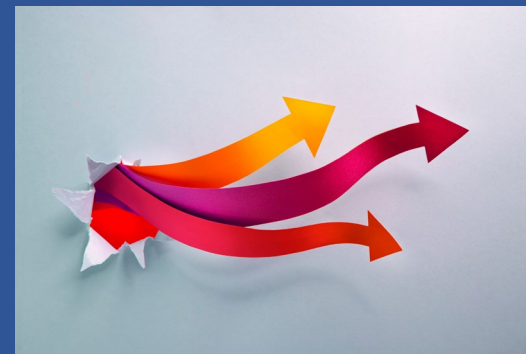


“Staff are at the heart of everything the NHS does and always will be”

- To build for the future, we must inspire new staff to join and encourage existing staff to stay.



Staff work in an environment where they feel they belong, can safely raise concerns, ask questions and admit mistakes  
**= essential for staff morale**



**Leads to improved patient care and outcomes.**

# Context

- “The NHS must welcome all, with a culture of belonging and trust. We must understand, encourage and celebrate diversity in all its forms”

*NHS People Plan 2020*

- “An inclusive culture improves retention, supporting us to grow our workforce, deliver the improvements to services set out in our Long Term Plan, and reduce the costs of filling staffing gaps”.

Amanda Pritchard, Chief Executive, NHS England

# High-impact actions

This plan prioritises the following six high impact actions to address the widely-known intersectional impacts of discrimination and bias.

**Measurable objectives on EDI for Chairs Chief Executives and Board members.**

## Success metric

1a. Annual Chair/CEO appraisals on EDI objectives via Board Assurance Framework (BAF).



**Overhaul recruitment processes and embed talent management processes.**

## Success metric

2a. Relative likelihood of staff being appointed from shortlisting across all posts

2b. NSS Q on access to career progression and training and development opportunities

2c. Improvement in race and disability representation leading to parity

2d. Improvement in representation senior leadership (Band 8C upwards) leading to parity

2e. Diversity in shortlisted candidates

2f. NETS Combined Indicator Score metric on quality of training



**Eliminate total pay gaps with respect to race, disability and gender.**

## Success metric

3a. Improvement in gender, race, and disability pay gap



**Address Health Inequalities within their workforce.**

## Success metric

4a. NSS Q on organisation action on health and wellbeing concerns

4b. National Education & Training Survey (NETS) Combined Indicator Score metric on quality of training

4c. To be developed in Year 2



**Comprehensive Induction and onboarding programme for International recruited staff.**

## Success metric

5a. NSS Q on belonging for IR staff

5b. NSS Q on bullying, harassment from team/line manager for IR staff

5c. NETS Combined Indicator Score metric on quality of training IR staff



**Eliminate conditions and environment in which bullying, harassment and physical harassment occurs.**

## Success metric

6a. Improvement in staff survey results on bullying / harassment from line managers/teams (ALL Staff)

6b. Improvement in staff survey results on discrimination from line managers/teams (ALL Staff)

6c. NETS Bullying & Harassment score metric (NHS professional groups)



# High Impact Action 1



Chief executives, chairs and board members must have specific and measurable EDI objectives to which they will be individually and collectively accountable.

## Actions:

1. Every board and executive team member must have EDI objectives that are specific, measurable, achievable, relevant, and timebound (SMART) and be assessed against these as part of their annual appraisal process (by March 2024).
2. Board members should demonstrate how organisational data and lived experience have been used to improve culture (by March 2025).
3. NHS boards must review relevant data to establish EDI areas of concern and prioritise actions. Progress will be tracked and monitored via the Board Assurance Framework (by March 2024).

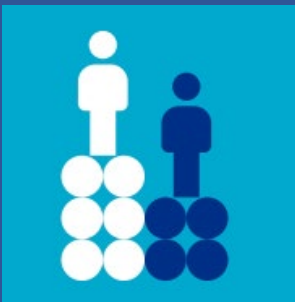


# High Impact Action 2

Embed fair and inclusive recruitment processes and talent management strategies that target under-representation and lack of diversity.

## Actions:

1. Create and implement a talent management plan to improve the diversity of executive and senior leadership teams (by June 2024) and evidence progress of implementation (by June 2025)
2. Implement a plan to widen recruitment opportunities within local communities, aligned to the NHS Long Term Workforce Plan. This should include the creation of career pathways into the NHS such as apprenticeship programmes and graduate management training schemes (by October 2024). Impact should be measured in terms of social mobility across the integrated care system (ICS) footprint.



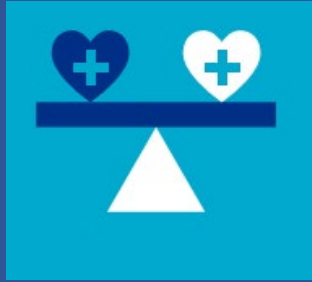
# High Impact Action 3

Develop and implement an improvement plan to eliminate pay gaps

## Action:

1. Implement the Mend the Gap review recommendations for medical staff and develop a plan to apply those recommendations to senior non-medical workforce (by March 2024).
2. Analyse data to understand pay gaps by protected characteristic and put in place an improvement plan. This will be tracked and monitored by NHS boards. Reflecting the maturity of current data sets, plans should be in place for sex and race by 2024, disability by 2025 and other protected characteristics by 2026.
3. Implement an effective flexible working policy including advertising flexible working options on organisations' recruitment campaigns. (March 2024)





# High Impact Action 4

Develop and implement an improvement plan to address health inequalities within the workforce.

## Actions:

1. Line managers and supervisors should have regular effective wellbeing conversations with their teams, utilising resources such as the national NHS health and wellbeing framework. (by October 2023).
2. Work in partnership with community organisations, facilitated by ICBs working with NHS organisations and arm's length bodies, such as the NHS Race and Health Observatory. For example, local educational and voluntary sector partners can support social mobility and improve employment opportunities across healthcare (by April 2025).



# High Impact Action 5

Implement a comprehensive induction, onboarding and development programme for internationally-recruited staff.

## Actions:

1. Before they join, ensure international recruits receive clear communication, guidance and support around their conditions of employment ; including clear guidance on latest Home Office immigration policy, conditions for accompanying family members, financial commitment and future career options (by March 2024).
2. Create comprehensive onboarding programmes for international recruits, drawing on best practice. The effectiveness of the welcome, pastoral support and induction can be measured from, for example, turnover, staff survey results and cohort feedback (by March 2024).
3. Line managers and teams who welcome international recruits must maintain their own cultural awareness to create inclusive team cultures that embed psychological safety (by March 2024).
4. Give international recruits access to the same development opportunities as the wider workforce. Line managers must proactively support their teams, particularly international staff, to access training and development opportunities. They should ensure that personal development plans focus on fulfilling potential and opportunities for career progression (by March 2024).



# High Impact Action 6

Create an environment that eliminates the conditions in which bullying, discrimination, harassment and physical violence at work occur.

## Action:

1. Review data by protected characteristic on bullying, harassment, discrimination and violence. Reduction targets must be set (by March 2024) and plans implemented to improve staff experience year-on-year.
2. Review disciplinary and employee relations processes. This may involve obtaining insights on themes and trends from trust solicitors. There should be assurances that all staff who enter into formal processes are treated with compassion, equity and fairness, irrespective of any protected characteristics. Where the data shows inconsistency in approach, immediate steps must be taken to improve this (by March 2024).
3. Ensure safe and effective policies and processes are in place to support staff affected by domestic abuse and sexual violence (DASV). Support should be available for those who need it, and staff should know how to access it. (By June 2024)
4. Create an environment where staff feel able to speak up and raise concerns, with steady year-on-year improvements. Boards should review this by protected characteristic and take steps to ensure parity for all staff (by March 2024).
5. Provide comprehensive psychological support for all individuals who report that they have been a victim of bullying, harassment, discrimination or violence (by March 2024).
6. Have mechanisms to ensure staff who raise concerns are protected by their organisation.

# Measurement and Accountability

- NHS Oversight Framework
- CQC – Well Led Domain, single assessment framework which is being refreshed to include review of EDI in organisations.
- Progress measured at organisation and system level to inform delivery and will be monitored by NHS England to inform the support provided.
- A national EDI dashboard enabling benchmarking.

## Providers

- ✓ Delivery of high impact actions and interventions by protected characteristic at trust level.
- ✓ Measure progress against success metrics consistently within the organisation.
- ✓ Engagement with staff and system partners to ensure that actions are embedded within the organisation.
- ✓ Effective system working and delivery to ICS strategies and plans
- ✓ Compliance with provider licence, Care Quality Commissions standards and professional regulator standards.

# Next Steps for BDCFT

1. Assessment of current position against the actions
  - What is already happening which will support the implementation?
  - Where do we have gaps?
  - How can we fill those gaps?
  - What do we need, to do that effectively?
2. What data is already available and / or measured and monitored from the success metrics?
  - What is not available and how can it be collected?
  - Where do we need to report the information and how often?
3. Engagement and co-production of our local priorities and interventions.
  - Staff networks and forums, staff side representation.
  - Bradford and Craven Health and Care Partnership and West Yorkshire Integrated Care System liaison.
4. Alignment of strategy to the EDI Improvement Plan.
  - BDCFT Equality Objectives 2024 – 2028
  - Revision of the Belonging and Inclusion 2021 – 2024
  - BDCFT Trust Strategy Refresh