

# NHS Equality Delivery System 2022 **EDS Report**

Norfolk & Waveney Integrated Care  
Board & System

21 February 2023

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# Equality Delivery System for the NHS

## *The EDS Reporting Template*

Implementation of the Equality Delivery System (EDS) is a requirement on both NHS commissioners and NHS providers. Organisations are encouraged to follow the implementation of EDS in accordance EDS guidance documents. The documents can be found at: [www.england.nhs.uk/about/equality/equality-hub/patient-equalities-programme/equality-frameworks-and-information-standards/eds/](http://www.england.nhs.uk/about/equality/equality-hub/patient-equalities-programme/equality-frameworks-and-information-standards/eds/)

The EDS is an improvement tool for patients, staff and leaders of the NHS. It supports NHS organisations in England - in active conversations with patients, public, staff, staff networks, community groups and trade unions - to review and develop their approach in addressing health inequalities through three domains: Services, Workforce and Leadership. It is driven by data, evidence, engagement and insight.

The EDS Report is a template which is designed to give an overview of the organisation's most recent EDS implementation and grade. Once completed, the report should be submitted via [england.eandhi@nhs.net](mailto:england.eandhi@nhs.net) and published on the organisation's website.

<b>Name of Organisation</b>	Norfolk & Waveney Integrated Care Board	<b>Organisation Board Sponsor/Lead</b>		
		EDI Board Champion to be agreed as part of wider review of NHSE guidance for board level champion roles		
<b>Name of Integrated Care System</b>	Norfolk & Waveney Integrated Care System			

## NHS Equality Delivery System (EDS)

<b>EDS Lead</b>	Mark Burgis - Executive Director of Patients and Communities - (Domain 1) and Ema Ojiako – Executive Director of People (Domain 2 & 3)	<b>At what level has this been completed? ICB &amp; ICS</b>		
				<b>*List organisations</b>
<b>EDS engagement date(s)</b>	Throughout January 2023	<b>Individual organisation</b>	Norfolk & Waveney ICB (formerly CCG) Norfolk & Waveney ICS	
		<b>Partnership* (two or more organisations)</b>		
		<b>Integrated Care System-wide*</b>	Norfolk Community Health and Care, East of England Ambulance Service, James Paget University Hospitals, Norfolk and Norwich University	

				Hospitals, The Queen Elizabeth Hospital Kings Lynn, East Coast Community Healthcare, Norfolk and Suffolk Foundation Trust
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<b>Date completed</b>	Jan – Feb 2023	<b>Month and year published</b>	March 2023
<b>Date authorised</b>	20 <sup>th</sup> February 2023	<b>Revision date</b>	February 2024

Completed actions from previous year	
Action/activity	Related equality objectives
<p>The ICB is a statutory partner of the two Safeguarding Adult Boards within its footprint and is committed to the requirement of the Care Act 2014 to work with partner agencies and the services it commissions, to ensure it protects a person's right to live in safety, free from abuse and neglect. It does this by having a dedicated team of professionals, working in a strategic, multidisciplinary approach. For example, the safeguarding team strongly advocate for the person's voice to be included within our forums/projects which could include those people who have experienced sexual abuse/violence/domestic abuse or have conditions which make them at greater risk of safeguarding. They are also starting to offer safeguarding supervision for staff across the ICB who work with patients. The team use a restorative supervision approach, aiming to support staff in managing difficult, potentially traumatic events, in a person-centred manner. The main aim being to support the staff to understand good practice and relevant legislation to promote best possible practice for people who access services.</p> <p>The ICS is committed to ensuring safe and effective services for local people. There is a programme of work in the ICS currently underway to develop a Quality Management Approach (QMA) across the whole system to join up good practice especially around quality improvement. The new Patients and Communities Committee meets every other month in public and the agenda includes reporting about complaints and enquiries. This committee provides assurance to the ICB Board that the concerns and experiences of local people are listened to and acted upon.</p>	<p>When people use NHS services their safety is prioritised, and they are free from mistakes, mistreatment and abuse.</p>

<p>The ICB's Communication and Engagement Strategy outlines our organisational commitment in this area and will be further supported by the people and communities plan for the ICS. For example, patient feedback was gathered and reflected in the change to provider for non-spoken interpreting services for Norfolk and Waveney primary care services, including developing a programme of training to raise awareness and educate staff working in GP practices about making reasonable adjustments under the Accessible Information Standard.</p> <p>The Norfolk and Waveney People and Communities Approach was presented as part of the evidence pack to become an ICS in July 2022. <a href="https://www.improvinglivesnw.org.uk">Working with people &amp; communities - Norfolk and Waveney ICS (improvinglivesnw.org.uk)</a> This continues the commitment to support and inform local people who wish to become more involved in decisions about their care. Information is also being developed on the ICS website to support people with PHBs Personal Health Budgets - <a href="https://www.improvinglivesnw.org.uk">Personal Health Budgets - Norfolk &amp; Waveney Integrated Care System (ICS) (improvinglivesnw.org.uk)</a></p>	<p>People are informed and supported to be as involved as they wish to be in decisions about their care</p>
<p><b>In our 2021 National Staff Survey results the ICB were statistically higher than our comparator average for the following;</b></p> <p>Q15. Does your organisation act fairly with regard to career progression /promotion?  16b. Experience of discrimination at work from a manager/team leader or other colleagues?  Q18. I think that my organisation respects individual differences</p> <p>We were the same as the comparable average for;  Q16a Experience of discrimination at work from patients/service users, their relatives or other members of the public?</p> <p>Many of the percentages in the survey for Norfolk and Waveney ICB are too small to compare for staff experiencing physical violence, verbal abuse and</p>	<p>Staff report positive experiences of their membership of the workforce</p>

<p>discrimination, however our view is that 1 is too many so the organisation is working hard to ensure that actions are taken in response to staff feedback to these questions.</p> <p>The ICB is implementing the East of England regional anti racism strategy and using feedback from the local pulse survey to regularly measure staff experience. The organisation is also working with the Staff Involvement Group, Freedom to Speak Up Guardians and staff champions to ensure the staff voice is heard and we are working collaboratively to address issues raised.</p> <p><b>The 2022 national staff survey results are due to be published at the end of February 2023 and we will be developing an action plan to respond to staff feedback.</b></p>	
<p>The ICB's Governing Body act in accordance with the NHS Constitution to promote the provision of an NHS that is available to all. Members of the Governing Body have all undergone relevant training that includes Equality and Diversity.</p> <p>Governing Body members and senior ICB staff demonstrate the importance of engaging with patient and communities across protected groups in their service review and require the same in all parts of the organisation.</p>	<p>Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations</p>
<p>The ICB Executive Management Team has an important role in developing the organisation's culture - this commitment is illustrated by having a range of policies to support its staff to work in an environment that is free from discrimination, bullying and harassment.</p>	<p>Middle managers and other line managers support their staff to work in culturally competent ways within a work environment free from discrimination</p>



The ICB requires all its staff to complete mandatory training, which includes Equality and Diversity. Equality Impact Assessment (EIA) training is available to Transformation/project leads to assist them with completing EIAs as part of the commissioning cycle.

The ICB has signed up and pledged to the Norfolk and Suffolk Pride and is committed to the delivery of the East of England Anti-Racism Strategy. The Training Hub purchased 300 licenses for staff to access BSL training with British-Sign. 300 staff have enrolled and have 24 months to complete the online training at their own pace. Dedicated slots at weekly staff briefings on EDI led by staff from our organisation with personal experiences or as subject matter leads. Slots are used to raise awareness of all 9 protected characteristics, provide an opportunity for staff to ask questions related to subject matters, promote opportunities for people to engage and learn more (i.e. CPD), highlight ongoing work taking place internally and across the system.

Cultural calendar for 2022 - awareness days and promotion of positive differences e.g. Black History Month.

## EDS Rating and Score Card

Please refer to the Rating and Score Card supporting guidance document before you start to score. The Rating and Score Card supporting guidance document has a full explanation of the new rating procedure, and can assist you and those you are engaging with to ensure rating is done correctly

Score each outcome. Add the scores of all outcomes together. This will provide you with your overall score, or your EDS Organisation Rating. Ratings in accordance to scores are below

<b>Undeveloped activity</b> – organisations score out of 0 for each outcome	Those who score <b>under 8</b> , adding all outcome scores in all domains, are rated <b>Undeveloped</b>
<b>Developing activity</b> – organisations score out of 1 for each outcome	Those who score <b>between 8 and 21</b> , adding all outcome scores in all domains, are rated <b>Developing</b>
<b>Achieving activity</b> – organisations score out of 2 for each outcome	Those who score <b>between 22 and 32</b> , adding all outcome scores in all domains, are rated <b>Achieving</b>
<b>Excelling activity</b> – organisations score out of 3 for each outcome	Those who score <b>33</b> , adding all outcome scores in all domains, are rated <b>Excelling</b>

## Domain 1: Commissioned or provided services

Domain	Outcome	Evidence (Maternity Services and Cancer Care Services have been selected for review at an ICS level as per national guidance)	Rating	Owner (Dept/Lead)
<i>Domain 1: Commissioned or provided services</i>	1A: Patients (service users) have required levels of access to the service	<p><b>Cancer:</b> No gaps from a cancer perspective, other than a late effects service for chemotherapy patients.</p> <p><b>Maternity:</b> The <a href="#">Norfolk and Waveney Local Maternity and Neonatal System (LMNS)</a> programme is underpinned by the Better Births Vision for Maternity Services: to become safer, more personalised, kinder, professional and more family-friendly; where every woman has access to information to enable her to make decisions about her care; and where she and her baby can access support that is centred around their individual needs and circumstances.</p> <p><b>System:</b> NHS Norfolk and Waveney is promoting the use of <a href="#">Equality Impact Assessments (EIAs)</a> as part of day-to-day planning and transformation to ensure all patients have access to services regardless of any protected characteristics. There is an</p>	<b>1</b> (Developing)	ICS Patient Experience and Engagement Leads

		aspiration to introduce a single system across the ICS.		
	1B: Individual patients (service users) health needs are met	<p><b>Cancer:</b> Health inequality needs assessment (HEAT) completed in each local hospital and shared with primary care colleagues to identify cohorts of patients who may encounter inequity in access to services</p> <p><b>Maternity:</b> The Norfolk and Waveney LMNS undertook an <a href="#">Equity and Equality needs assessment</a> of local maternity services. It identified two aims for maternity and neonatal care: 1) Equity for mothers and babies from Black, Asian and Mixed ethnic groups and those living in the most economically deprived areas and 2) Race equality for staff.</p> <p><b>System:</b> To support carers experience when their cared for person is in hospital N&amp;W ICS undertook a <a href="#">co-production project</a> to produce carers ID passports and increase carers awareness training for staff.</p>	1 (Developing)	ICS Patient Experience and Engagement Leads
	1C: When patients (service users) use the service, they are free from harm	<p><b>Cancer:</b> Each hospital has a robust cancer clinical harm process, which is linked into the system quality team and is reported on a six-monthly basis into the system cancer programme board.</p> <p><b>Maternity:</b> The Norfolk and Waveney LMNS is taking part in the <a href="#">Maternity &amp; Neonatal Safety Improvement Programme</a>.</p>	1 (Developing)	ICS Patient Experience and Engagement Leads

		<p><b>System:</b> Norfolk and Waveney is adopting a system wide <a href="#">Quality Management Approach (QMA)</a> to provide safe, effective, accessible, sustainable and responsive care. QMA includes the aspiration to improve outcomes for people with lived experience through quality feedback loops, and by using patient reported quality feedback to improve services across the system.</p>		
	<p>1D: Patients (service users) report positive experiences of the service</p>	<p><b>Cancer:</b> Local hospitals analyse the National Cancer Patient Experience Survey annually with trust-based action plans developed for each tumour site pathway. Primary care feedback shared via local Primary care touchpoint meeting and GP webinars. Local system cancer patient experience survey in place on the <a href="#">ICS website</a>. Findings shared with the local hospitals and primary care on a six-monthly basis. Continuous feedback on patient experience via the new cancer care navigator roles. Three cancer service user groups in place which link into the system cancer programme board.</p> <p><b>Maternity:</b> The Norfolk &amp; Waveney LMNS works closely with the three <a href="#">Maternity Voices Partnerships (MVPs)</a> in the ICS to gather feedback and work on systemwide improvement projects.</p> <p><b>System:</b> Patient Experience &amp; Engagement Leads from across the ICS meet weekly to</p>	<p><b>1</b> (Developing)</p>	<p>ICS Patient Experience and Engagement Leads</p>

		share learning and promote a systemwide response patient feedback, including engagement projects as well as e.g. complaints and PALs.		
<b>Domain 1: Commissioned or provided services overall rating</b>			<b>4</b>	

## Domain 2: Workforce health and well-being

Domain	Outcome	Evidence	Rating	Owner (Dept/Lead)
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<p style="text-align: center;"><b>Domain 2: Workforce health and well-being</b></p>	<p>2A: <b>When</b> at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions</p>	<p>There is a dedicated health and wellbeing page on the ICB staff Intranet site where staff can find information and advice on mental wellbeing, keeping active, staying healthy at work and healthy eating. We also have staff activity clubs including running and yoga. Also, menopause cafés.</p> <p>Staff have access to occupational health, and we are launching our Employee Rewards Programme with Vivup on 1 Feb 2023 which will provide support for staff wellbeing across mental, physical, financial, and family wellbeing.</p> <p>There is a health and wellbeing section on the ICS <a href="#">EDI Resource Hub</a> for all staff to access.</p> <p>Staff have access to the Mental Health Hub established during the CV19 pandemic led by our mental health Trust.</p> <p>Staff are also provided with information, signposting to, and vouchers for annual flu jabs and CV19 boosters.</p>	<p style="text-align: center;"><b>2</b></p> <p style="text-align: center;">(Achieving)</p>	<p>HR / OD</p>
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	<p>2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source</p>	<p>The EDI policy for the ICB has recently been reviewed by the EDI staff group including procedures for dealing with complaints. This is in line with the Dignity at Work policy.</p> <p>The staff survey results will provide an updated insight into any abuse, harassment, bullying and physical violence when they are published in February. An action plan will be developed alongside the ICB WRES plan to implement changes to ensure staff feel safe when at work.</p> <p>The ICB is committed to the delivery of the East of England Regional anti racism strategy and as part of this has created a system wide micro-aggression portal to allow all staff the opportunity to informally and anonymously log incidences of bullying, harassment. The responses on the portal are being used to identify themes and address these through training and support for line managers to be more inclusive leaders.</p> <p>The portal will also enable perpetrators to be held accountable for poor behaviours.</p> <p>Portal can be accessed <a href="#">here</a> on the ICS website, and a <a href="#">blog</a> has been written to feedback to the respondents what action has been taken as a result of their submissions.</p>	<p>1 (Developing)</p>	<p>HR / OD / EDI</p>
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		<p>The ICB also works closely with staff champions, the Staff Involvement Group and Freedom to Speak Up Guardian to collaboratively address issues and improve staff experience.</p>		
	<p>2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source</p>	<p>The ICB has a mental wellbeing section on the staff intranet with accessible information on various support packages such as Every Mind Matters, Crisis Support.</p> <p>Regular slots at our all Staff Briefing to promote speaking up and the support available for those that need it</p> <p>We also have the formal staff support telephone helpline which includes finance etc which help with Mental Health and access to Occupational Health and Counselling support if needed.</p> <p>Users of the micro-aggression portal are also signposted to support through HR, Trade Union or <a href="#">NSFT first response</a> in addition to Freedom to Speak Up Guardians</p>	<p><b>2</b> (Achieving)</p>	<p>HR / OD</p>

	<p>2D: Staff recommend the organisation as a place to work and receive treatment</p>	<p>The ICB only participated in the national staff survey from 2021 so we have yet to have sufficient data to map any 'trends' however as soon as the 2022 results are published, we will compare to 2021.</p> <p>In 2021 organisational result was 72% of our staff agreeing that they would recommend as a place to work, the national comparator was 67%</p> <p>Our Staff Involvement Group has been in place for 2 years, meeting monthly. Members represent their directorates and teams bringing discussions to the group to improve the way in which our staff work. Through SIG we have implemented a new staff support and benefits system with Vivup and have a T&amp;F group in place to improve out working environments.</p> <p>We recognise the importance of staff networks aligned to protected characteristics to create those psychologically safe spaces for staff and provide peer support. Our EDI Staff Group is in place and its remit is to 'support and empower all staff to achieve their potential through creating positive change'. Through our EDI Network we have asked our staff which groups they would like to be established specifically relating to protected characteristics. The ICB needs to support the development of staff</p>	<p><b>2</b> (Achieving)</p>	<p>HR / OD (Head of OD &amp; LD) / EDI</p>
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		<p>networks and give staff the protected time to engage in them. This could be through internally established networks, or through invitation for ICB staff to join networks at larger employers where peer membership will be higher.</p> <p>The Senior Management team are committed to implementing the recommendations of the 'Improving Staff Equity Networks through partnership Working - NHS Employers' recommendations and are currently discussing the detail.</p> <p>In addition, we have a Green Group, Activities &amp; Fundraising Group, and links to the Norfolk County Council Sport and Social Club through our shared office space at NCC in Norwich.</p> <p>More work is being done around exit interviews and improving the quality and monitoring of these. Regular 1:1s and line manager/employee relationships should provide the opportunity for staff to receive support from the organisation, personally and professionally. We are committed to staff experience and retaining staff within the organisation.</p> <p>Coffee connections have been run successfully throughout the year, encouraging staff to</p>		
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		<p>virtually meet someone new in the organisation and talk about anything from work to social</p> <p>We have recently appointed a lead for apprenticeships who is developing a SOP for access to apprenticeships for the ICB. We have also undertaken work in the last 12months to review our appraisal and progression approach, with support for line managers provided to have more effective discussions with team members.</p>		
<b>Domain 2: Workforce health and well-being overall rating</b>			<b>7</b>	

## Domain 3: Inclusive leadership

Domain	Outcome	Evidence	Rating	Owner (Dept/Lead)
<b>Domain 3: Inclusive leadership</b>	3A: Board members, system leaders (Band 9 and VSM) and those with line management responsibilities routinely demonstrate their understanding of, and commitment to, equality and health inequalities	There is a Board development plan underway, and within this is a plan for raising awareness and understanding of diversity and inclusion. We are working with external partner to support Board development and planning	<b>1</b>  (Developing)	OD (Head of OD & LD)

	<p>3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed</p>	<p>All the public Board papers are on the website. There is a section on EIA at the end of every Board paper that presenters ensure is completed.</p> <p>Work on addressing health inequalities across our commissioning sits with the patients and communities committee. This has been delegated to this committee by the Board.</p> <p>The equality agenda is overseen by the People and Culture committee as part of the broader people agenda. The People and Culture committee is chaired by the NED who is also the Board wellbeing Champion and the board Freedom to Speak Up Champion is also in attendance of the committee.</p> <p>Board champion role for EDI to be reviewed in line with the revised NHSE guidance for board oversight.</p> <p>A review of the EIA process is underway to ensure that the process is effectively followed for all projects and programmes of work in future.</p>	<p><b>1</b>  (Developing)</p>	<p>OD (Head of OD &amp; LD) / EDI</p>
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	<p>3C: Board members and system leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients</p>	<p>Appraisal process is in place</p> <p>Refresher training and support for line managers and individuals to deliver effective being rolled out across all managers / individuals who deliver appraisals. To support valuable appraisal conversations for managers, individuals and the ICB</p> <p>Mentoring and coaching support is in place for system leaders and Board members. A dedicated offer was made during the pandemic, and at the commencement of the ICB for senior leaders (individual and team). This offer continues to ensure our leaders have support for resilience, professional development and to undertake the requirement of their role.</p> <p>Directorates should have relevant performance dashboards to review and monitor progress against performance</p> <p>We have dashboard reporting in place to measure key metrics relating to PHM and patient outcomes which are presented to Board regularly.</p>	<p><b>2</b></p> <p>(Achieving)</p>	<p>OD (Head of OD &amp; LD) / EDI</p>
<p><b>Domain 3: Inclusive leadership overall rating</b></p>			<p><b>4</b></p>	



**Third-party involvement in Domain 3 rating and review**

**Trade Union Rep(s):**

Peter Passingham (Unison Rep) 10 Feb 2023

**Independent Evaluator(s)/Peer Reviewer(s):**

Equality Diversity & Inclusion Group (ICB) January 2023

EDS Organisation Rating (overall rating): 15 (Developing)

Organisation name(s): Norfolk & Waveney ICB, Norfolk & Waveney ICS

Those who score **under 8**, adding all outcome scores in all domains, are rated **Undeveloped**

Those who score **between 8 and 21**, adding all outcome scores in all domains, are rated **Developing**

Those who score **between 22 and 32**, adding all outcome scores in all domains, are rated **Achieving**

Those who score **33**, adding all outcome scores in all domains, are rated **Excelling**

EDS Action Plan	
EDS Lead	Year(s) active
TBC	April 2023 - March 2024
EDS Sponsor	Authorisation date
Ema Ojiako	

Domain	Outcome	Objective	Action	Completion date
Domain 1: Commissioned or provided services	1A: Patients (service users) have required levels of access to the service	Patients are able to access services regardless of protected characteristics, socio-economic factors or caring responsibilities	Implementation of systemwide overview of equality and inclusion, including system E&I lead  Easy Read documents and resources continue to be updated to ensure accessibility: <a href="https://improvinglivesnw.org.uk/our-work/equality-diversity-and-inclusion-resource-hub/easy-read-resources/">https://improvinglivesnw.org.uk/our-work/equality-diversity-and-inclusion-resource-hub/easy-read-resources/</a>	System lead in place by May/June 2023? Ongoing development of system approach
	1B: Individual patients (service users) health needs are met	Patients have personalised experience of care built around their needs and caring responsibilities	Link EDS2 with the ICB personalisation team	August 2023 And Ongoing

	1C: When patients (service users) use the service, they are free from harm	Quality and safety feedback loops are built into all services	Link EDS2 with the Co-production in Quality Improvement work within the QMA	March 2024
	1D: Patients (service users) report positive experiences of the service	Work as a system to monitor and act upon patient feedback to improve services	ICS Patient Experience & Engagement Leads group to develop specific subgroup to deliver EDS2 going forward, including a detailed action plan Report regularly to patients and communities committee	April 2023 And Ongoing

Domain	Outcome	Objective	Action	Completion date
Domain 2: Workforce health and well-being	2A: When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions	Effective communication of Health & Wellbeing offers to staff	<p>Continue to promote activities, workshops and resources through the Intranet, In House magazine, staff Teams channel, Staff Involvement Group and Staff briefings</p> <p>More signposting around asthma and diabetes in our occupational health resources. Work up a FAQs or 'you need to know' for newly diagnosed people and for line managers. Led by Raj Todd &amp; Evelyn Kelly</p> <p>Staff briefings will continue to have focus on H&amp;WB</p>	<p>On-going</p> <p>Summer 2023</p>

	<p>2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source</p>	<ol style="list-style-type: none"> <li>1. Sign up to the Race at Work charter and put adequate resource / capacity behind delivering against the 7 commitments – This includes ICB commitment at Board level to zero tolerance of harassment and bullying and review of this within the Dignity at Work Policy</li> <li>2. Continue to maintain the Micro-aggression portal</li> <li>3. Develop an anti-bullying campaign</li> <li>4. Respect and Civility Framework Training</li> <li>5. Review information from Staff Survey</li> </ol>	<ol style="list-style-type: none"> <li>1. Papers already prepared for this to be agreed and approved at EMT. Form part of wider resourcing of EDI function and bringing HR function within Workforce team</li> <li>2. EDI work currently under review and sustainability of existing work areas will form part of this, including ongoing maintenance of the micro-aggression portal and related interventions such as micro-aggression awareness sessions and ‘Let’s Talk About Race’ sessions</li> <li>3. “We are the ICS” digital and print anti-bullying campaign to be launched in 3 phases: <ul style="list-style-type: none"> <li>• Phase 1: Stop the abuse (more direct and hard hitting)</li> <li>• Phase 2: Respect (softer feel around inclusion and seeing the person behind the uniform)</li> <li>• Phase 3: World class workforce (introducing people to our global workforce)</li> </ul> </li> </ol> <p>Underlying message across all three phases of the campaign would be ‘No excuse for abuse’</p>	<p>April 2023</p> <p>March 2023</p> <p>Phase 1 from April 2023</p> <p>Phases 2 &amp; 3 need to be agreed</p>
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			<p>4. Continue roll out of the Just and Restorative Culture training</p> <p>5. Review findings from Staff Survey and develop action plan to respond to issues raised</p>	<p>Ongoing throughout 2023</p> <p>March 23 onwards</p>
	<p>2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source</p>	<p>Access to pastoral support through Freedom to Speak Up Guardians &amp; Mental Health Support</p> <p>Training on mental resilience</p>	<p>Continue to promote activities, workshops, and resources, including offering masterclasses and webinars through <a href="https://www.shapestoolkit.com/">https://www.shapestoolkit.com/</a> - subjects include 'How to manage stress and anxiety in challenging times', 'How to stay productive and beat virtual fatigue', 'How to stay resilient'</p>	<p>February and March 2023</p>

	<p>2D: Staff recommend the organisation as a place to work and receive treatment</p>	<p>Improve the working environment for all staff – giving them a sense of belonging, value and opportunities to feel psychologically safe and to thrive</p>	<p>Paper taken to SMT on 5 Jan 2023 recommending the following:</p> <ul style="list-style-type: none"> <li>• Agree revised Terms of Reference of the N&amp;W ICBICB EDI Staff Group – which includes giving protected time to staff who support this group</li> <li>• Consider or escalate as appropriate the recommendations of 'A Sense of Belonging and Voice – A Guide for Establishing Staff Networks' and how we can implement it.</li> <li>• Escalate the lack of capacity in the EDI agenda, where strategic leadership sits and where activities outside of staff EDI will take place.</li> </ul> <p>T&amp;F Group in place to improve office environments and make them more welcoming to staff</p>	<p>From April 2023 onwards</p> <p>May 2023</p>
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Domain	Outcome	Objective	Action	Completion date
Domain 3: Inclusive leadership	3A: Board members, system leaders (Band 9 and VSM) and those with line management responsibilities routinely demonstrate their understanding of, and commitment to, equality and health inequalities	Improve mandatory training offer around EDI to include compassionate leadership	Work with NCHC to develop online e-learning training module including facilitators guide for face-to-face training modules. Look to include as part of all Corporate Induction and at 6 month intervals in order to stay current.  Inclusion Board Development programme planned	Throughout 2023  August 2023
	3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed	High Impact Action 4 of National EDI Strategy – develop and deliver an improvement plan to address health inequalities within our workforce in order to positively impact patient outcomes and patient experience	Look to review as part of wider EDI structure / governance and accountability review for ICB – across both workforce and population health management and health inclusion workstreams	Spring 2023
	3C: Board members and system leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients	Deliver against High Impact Action 1 of National EDI Strategy where Chief Exec, Board Members and Chairs have personal and collective accountability for organisational progress around EDI.	Await National mandate around what specific, measurable personal EDI objectives will be and then look to build this into an induction and appraisal, rolling programme	Summer 2023



Patient Equality Team  
NHS England and NHS Improvement  
[england.eandhi@nhs.net](mailto:england.eandhi@nhs.net)

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