

Diversity and Inclusion

Our Strategic Framework 2018-2022



“Respect, dignity, compassion and care should be at the core of how patients and staff are treated – not only because that is the right thing to do, but because patients’ safety, experience and outcomes are all improved when staff are valued, empowered and supported.”

NHS Constitution, 2015

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Foreword

We are delighted to introduce Diversity and Inclusion – Our Strategic Framework 2018-2022. This framework builds upon much of the excellent work that is already in place and demonstrates our commitment to diversity and inclusion for our workforce, the way we manage our business and our influence with stakeholders.

This framework is a living document, which will be regularly reviewed to ensure that it remains current in regards to any future changes that take place within Health Education England and the wider healthcare system.

Promoting and supporting diversity in the workplace is an essential aspect of good people management. We recognise that we must give our colleagues a powerful reason to stay and grow within the organisation, and this comes from a sense of belonging. We will reap the benefits of a diverse workforce through fostering an inclusive culture that embraces different perspectives and celebrates diversity.

We recognise the critical importance of diversity and inclusion to our business and are determined to be ambitious. The framework will exist as a tool to help Health Education England remain focused on what matters and better understand what it can, and should, do to support the diversity and inclusion agenda; whilst it delivers upon its prime purpose of ensuring that the healthcare system has the right staff, with the right skills, values and behaviours. We are committed to ensuring the best possible experiences and outcomes for patients, service users and the public in England.

We have worked to ensure that the framework is aligned to our existing national and corporate objectives, priorities and values as well as the principles set out in the NHS Constitution. This framework also demonstrates our appreciation that diversity and inclusion should be used to advance organisational development and behaviour and culture change. We will look to ensure a close relationship between this framework and our organisational development plan.

The framework sets out our ambitions and priorities at an organisation-wide level. Through the governance and accountability structure (referenced in this framework) we will ensure that our strategic commitment is translated into measurable outcomes at national, regional and local level.



Ian Cumming
Chief Executive



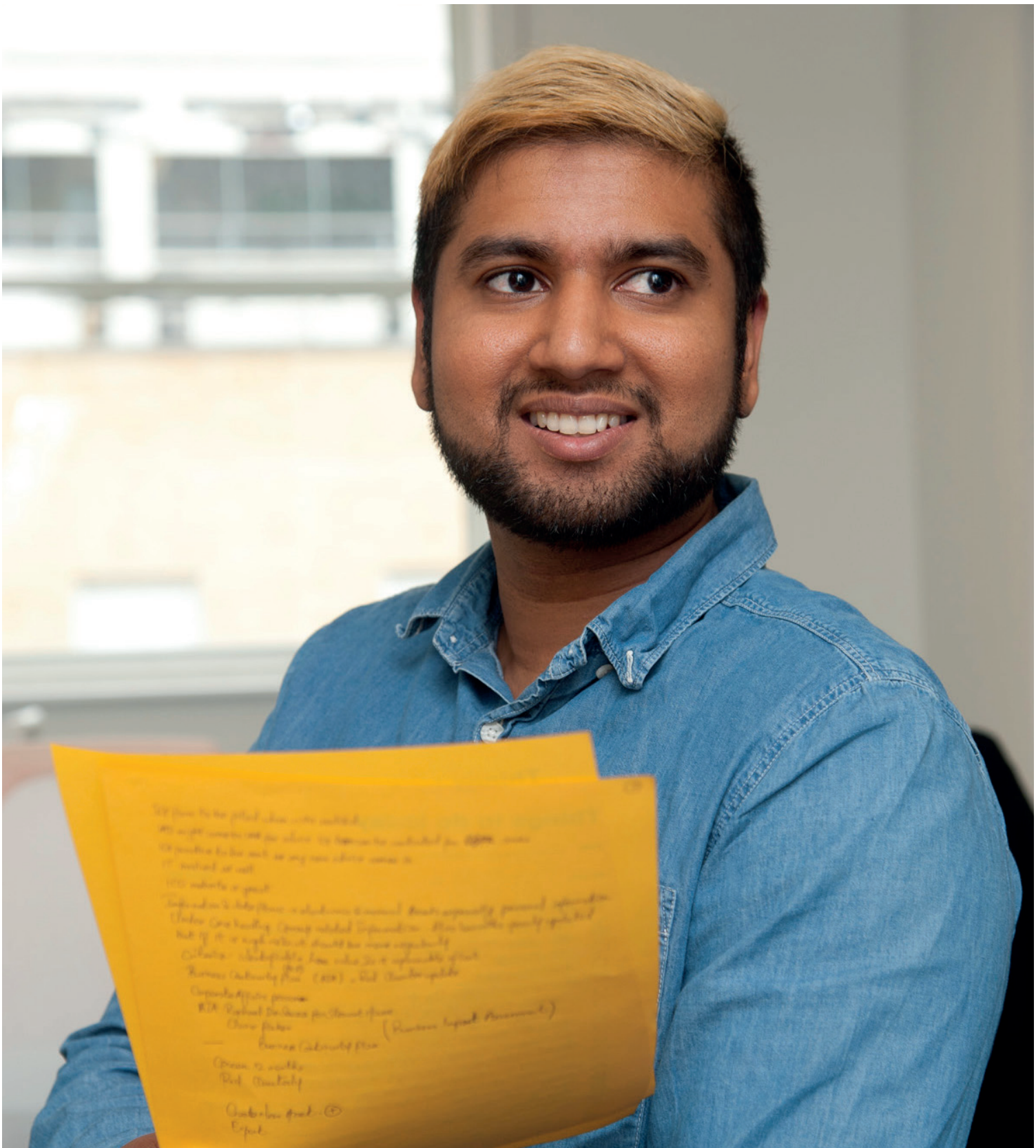
Jacynth Ivey
Associate Non-Executive Director



Sir Keith Pearson
Chair



Lisa Bayliss-Pratt
Chief Nurse



Why diversity and inclusion matters

Health Education England exists for one reason only: to support the delivery of excellent healthcare and health improvement to the patients and public of England by ensuring that the workforce of today and tomorrow has the right numbers, skills, values and behaviours, at the right time and in the right place.

This framework is structured around the key themes of: our people; our business; and our influence. Within each section we have highlighted 'Diversity in Practice' case studies which illustrate examples of how we have considered diversity and inclusion in our work. We are committed to building on this existing good practice.

Our people

Health Education England recognises the importance of valuing diversity and inclusion in the workplace and understands the benefits that can be achieved through building an inclusive and representative workforce.

It is important that colleagues feel supported, acknowledged and able to be themselves at work, supporting them to get the most from their careers working with Health Education England. The organisation is committed to delivering systemic change that will enable an inclusive culture which recognises differences and celebrates diversity.

Our influence

Health Education England is responsible for ensuring that the future workforce is available in the right numbers and has the necessary skills, values and behaviours to deliver high-quality care. The evidence is clear that building a healthcare workforce that is representative also has benefits for patients and service users.

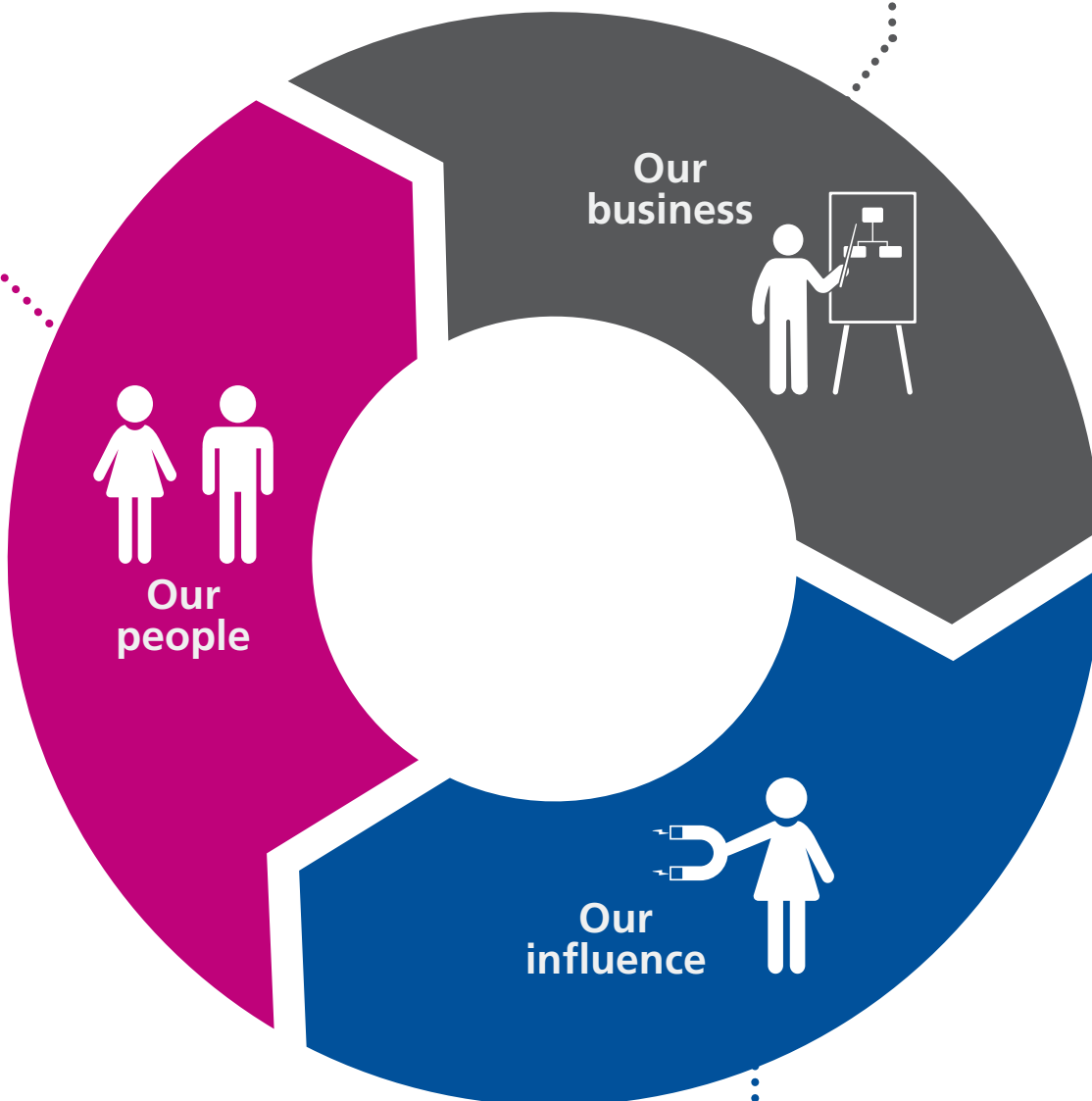
Health Education England has a crucial role to play, within the healthcare system, in supporting a world-class approach to education and training that creates ladders of opportunity for people in every setting and from every background. We will use our influence with stakeholders to further diversity and inclusion in the wider healthcare system and within medical and clinical education.

Our business

Through this framework and our organisational development plan Health Education England will work to achieve a cultural change that leads towards consistent consideration of inclusion in business and delivery of key functions.

In developing this framework examples have been identified that showcase that positive progress has been achieved. But there is more that Health Education England can do to spread this good practice across the organisation, so that the values of the NHS Constitution are embedded within ways of working and business.

Health Education England will ensure that diversity and inclusion is being furthered through the setting of organisational, directorate, team and individual objectives, as well as business planning and performance management processes.



Transformational change

The commitments to diversity and inclusion in respect of our people; our business; and our influence, should be viewed as collaborative themes that will contribute to the transformational change required for Health Education England to achieve its diversity and inclusion ambition.

Building a diverse workforce will bring with it people with diversity in lived experience. Through recognising workforce diversity as an asset, Health Education England will utilise that diversity in taking a more inclusive approach to business and key functions.

Whilst taking this inclusive approach will help demonstrate that the organisation is showing due regard to the aims of the Public Sector Equality Duty, it is also equally important to acknowledge that advancing diversity and inclusion can lead to improved health outcomes and staff experiences.

Through delivering on the commitment to a diverse workforce, and an inclusive approach to business, Health Education England will develop its capacity and capability to lead by example, building its influence in advancing diversity and inclusion in the healthcare system.

Diversity

When we talk about **'diversity'**, we mean making sure that we recognise, respect, value and celebrate the differences that everyone has, as well as leveraging the opportunities that different people bring to the work that we do.

Inclusion

We define **'inclusion'** as taking an approach to our work where we consider people, their diversity, their preferences and their abilities. It is about creating a workplace where everyone can be themselves and feel that they can contribute their views, which will be valued.



Health Education England – The journey so far

January 2009 – **NHS Constitution** is published. The NHS belongs to the people and is founded on a common set of principles and values that bind together the communities and people it serves – patients and public – and the staff who work for it. This is called the **NHS Constitution**.

April 2010 – the **Equality Act 2010** receives Royal Assent.

June 2012 – Health Education England is established as a Special Health Authority.

April 2013 – The ‘**Advancing Health Education England Equality and Diversity**’ (AHEAD) Group is established.

June 2013 – Health Education England signs up to the **Stonewall Diversity Champions Programme**.

July 2014 – The **NHS Equality and Diversity Council** announces action to ensure NHS employees from black and minority ethnic (BME) backgrounds have equal access to career opportunities and receive fair treatment in the workplace.

October 2014 – Publication of the **NHS Five Year Forward View**.

April 2015 – The NHS Equality and Diversity Council announcement leads to the introduction of the **NHS Workforce Race Equality Standard**, which is mandated through the **NHS Standard Contract**.

February 2017 – The Board at Health Education England formally approves the introduction of a Diversity and Inclusion Committee and regional AHEAD groups, that will take forward the organisational commitment to diversity and inclusion.

December 2016 – **Developing People – Improving Care** is launched as a national framework for action on improvement and leadership development in NHS-funded services

December 2016 – Health Education England appoints a Diversity and Inclusion Manager, who is accountable to the Board and Executive champions for diversity and inclusion.

August 2016 – NHS England introduce the **NHS Accessible Information Standard**.

April 2016 – Health Education England launches the **Quality Framework**, which sets out the expectations for quality within the work-based learning environment.

Autumn 2015 – Health Education England begins to publish data showing its performance against the **NHS Workforce Race Equality Standard** metric indicators.

April 2015 – Health Education England obtains the status of a Non-Departmental Public Body under the provisions of the **Care Act 2014**. Through the Care Act, Health Education England is added to the Equality Act 2010 (under **Part 1 of Schedule 19 – public authorities subject to the Public Sector Equality Duty**).

April 2017 – Health Education England takes on accountability for the **NHS Leadership Academy**.

Summer 2017 – Health Education England and its **e-Learning for Healthcare programme** lead a refresh of the **statutory and mandatory modules on equality, diversity and human rights** aligned to the **UK Core Skills Training Framework** for all health and social care staff.

July 2017 – The Health Education England Rainbow Organisation (HEEROs) is launched for lesbian, gay, bisexual and trans (LGBT+) colleagues and allies. Health Education England also participates in Pride season for the first time, in London and Leeds.

August 2017 – Health Education England achieves Level 1 accreditation of the **Disability Confident** employer scheme.

October 2017 – The Government publishes the first **Race Disparity Audit**. The report presents an overview of disparities that have most impact across all aspects of people's lives.

October 2017 – NHS Digital publishes the **NHS Sexual Orientation Monitoring Information Standard**. The Standard provides a consistent mechanism for recording the sexual orientation of all patients and service users (aged 16 years and over) across health services in England.

July 2018 – 70th anniversary of the establishment of the NHS.

June 2018 – 70th anniversary of the arrival of SS Empire Windrush

March 2018 – Health Education England, along with other employers with a workforce of 250+, **publishes data on its gender pay gap**.

January 2018 – Health Education England moves 36 places up the **Stonewall Workplace Equality Index** (compared to its ranking in January 2017).

December 2017 – Health Education England submits its latest data to highlight the progress made against the **NHS Workforce Race Equality Standard** performance indicators. NHS England subsequently publishes a **data analysis** of Health Education England and the other national health bodies.

December 2017 – Facing the Facts, Shaping the Future, is **published for consultation**. This document sets out the current workforce landscape and describes an approach to shaping the face of the health and social care workforce for the next two decades.

Autumn 2017 – The Government announces proposals to reform the **Gender Recognition Act 2004**, which allows trans people to apply for legal recognition of the gender in which they have lived without undergoing either gender reassignment surgery or other medical treatment.



Developing our strategic framework

This framework has been developed to give Health Education England direction in delivering its commitment to a diverse workforce; the effective mainstreaming of inclusion into business and functions; and the utilising of its influence to advance diversity and inclusion at a system-level.

This document has been developed from a range of sources. These include:

- quantitative information we collect including NHS Workforce Race Equality Standard and gender pay gap data
- analysis of Health Education England staff survey data
- feedback from Stonewall Workplace Equality Index
- a review of policies and procedures to explore how diversity and inclusion values are considered across Health Education England

- involvement and engagement with colleagues and external stakeholders
- a review of national drivers of best practice and benchmarking.

Health Education England commissioned an impartial expert to conduct a baseline review, which was delivered through a blended approach of interviews with colleagues and stakeholders, desktop research and observation.

Using that baseline review as a starting point, we have undertaken further consultation with colleagues and senior leaders to develop this framework. Consultation activities have included:

- 20 March 2018 – Workshop session with Diversity and Inclusion Committee and AHEAD chairs.
- 17 April 2018 – Board development workshop session.
- 27 April 2018 – Board, Diversity and Inclusion Committee, AHEAD chairs, and Patient Advisory Forum invited to comment on draft framework.

The national context

The healthcare system is undergoing a period of significant transformation to address the NHS Five Year Forward View triple aims of improving care experience and outcomes while closing the funding gap. The development of a culture in which diversity and inclusion are valued is crucial to meet these challenges effectively.

The national drivers that are most relevant to Health Education England, and give a clear direction on delivery and compliance, are:

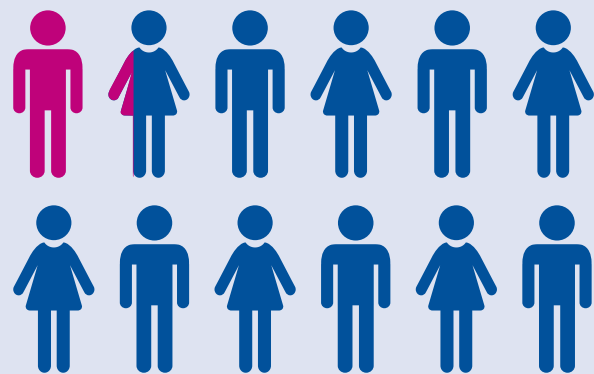
- NHS Constitution
- Equality Act 2010
- Public Sector Equality Duty
- Gender pay gap reporting
- NHS Five Year Forward View
- Health Education England Quality Framework
- Health Education England Strategic Framework 2014-2029
- NHS Workforce Race Equality Standard
- NHS Workforce Disability Equality Standard

Developing People – Improving Care The NHS Constitution establishes the principles and values of the NHS in England. It sets out rights to which patients, public and staff are entitled, and pledges which the NHS is committed to achieve, together with responsibilities, which the public, patients and staff owe to one another to ensure that the NHS operates fairly and effectively. Health Education England has developed a NHS Constitution values hub providing further information.

We also recognise that, with increasing globalisation and movement of people around the world, a diverse mix of ethnicities and cultures lives and works in England. Given that large proportions of the UK workforce are made up of EU citizens, we are also mindful of the potential impact of the exit from the European Union on this cultural diversity.

According to Office for National Statistics data (published April 2017);

11% of the UK labour market are non-UK nationals;



EU nationals contributed **7%**
and non-EU nationals **4%**

Our ambition

Health Education England will continue its journey towards developing a culture, co-produced by colleagues and our senior leaders, that upholds the values of diversity and inclusion as enablers for achieving the organisational aims and objectives, and the overarching principles of the NHS Constitution.

“The NHS is founded on a common set of principles and values that bind together the communities and people it serves – patients and public – and the staff who work for it.”

NHS Constitution, 2015

Governance and accountability for furthering our ambition

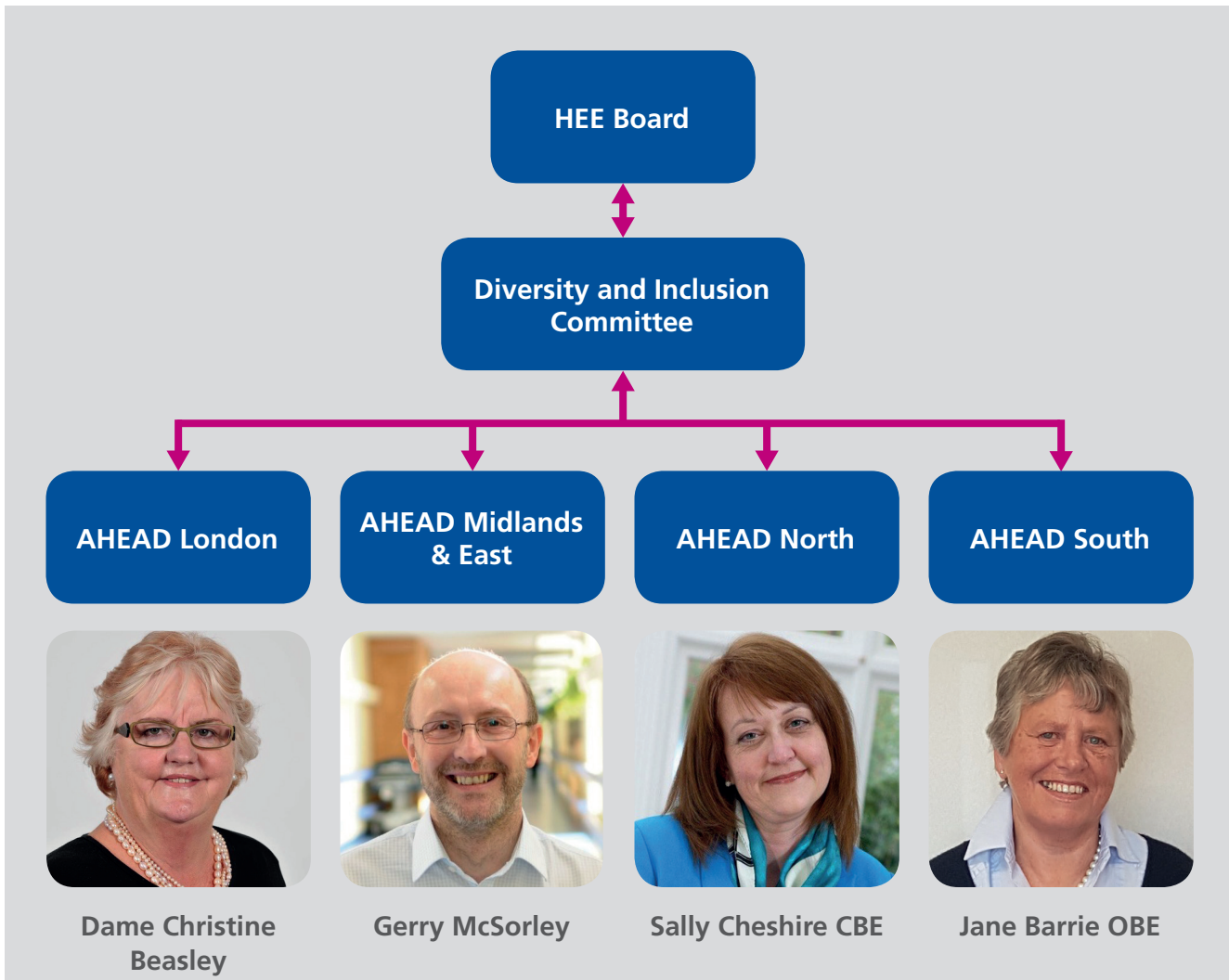
In 2017 the Health Education England Board approved the establishment of a revised governance and accountability structure to support the ambition of further advancing diversity and inclusion, both within the organisation as well as within the healthcare system.

The Diversity and Inclusion Committee was established as a formal sub-committee accountable to the Health Education England Board. It is chaired by Jacynth Ivey, Associate Non-Executive Director. The Committee holds the organisation to account for its commitment to diversity and inclusion.

The Diversity and Inclusion Committee works in collaboration with four regional AHEAD (Advancing Health Education England’s Equality and Diversity) groups, led by the chairs of the local education and training boards (LETBs) and supported by our regional directors.

The Committee and AHEAD groups have membership from across the organisation, as well as ‘staff side’ representation, members of the Patient Advisory Forum, LETBs, postgraduate deans, and NHS Leadership Academy colleagues.





Diversity and Inclusion – beyond compliance

Health Education England will look to move beyond compliance with equalities legislation and view building capacity and capability on diversity and inclusion as a quality improvement journey for the whole of the organisation.

There is strong evidence that when an organisation gets diversity and inclusion right staff feel valued and their wellbeing improves. Importantly, we know that for employers in the healthcare system, there is clear evidence of the positive impact this can have on health outcomes and inequalities.

No matter their specific role or responsibility, everyone working for Health Education England will be expected to consciously consider the values of

diversity and inclusion in their work. We will support those who feel that they have may gaps in their knowledge and understanding.

We will utilise the opportunities we have, such as the learning and development offer from our Human Resources and Organisational Development colleagues, and our relationship with the NHS Leadership Academy, and NHS Employers, to raise the level of understanding across Health Education England.

Through the action plans developed through our AHEAD groups, we will set out clear measurable outcomes that ensure the organisation is making sustained improvement. This will enable us to evidence the impact we are having, and better understand where Health Education England must focus its attention.



Our people

Our people

Health Education England employs over 2,500 staff, who work at locations across England. Diversity across our workforce can increase our efficiency through greater creativity, but this requires individual potential to be identified, realised and celebrated.

Valuing and supporting the diversity of people's skills, knowledge and lived experiences will be a key asset in maximising the workforce's contribution to improving organisational performance.

We are now in the position of having three generations of people working side by side across the UK. These are 'Gen-X' (born between 1965 and 1980), the 'Baby Boomers' (born between 1946 and 1964), who make up 33% of the population, and 'Millennials' (born between 1981 and 2000), who currently account for 25% of the UK population, predicted to rise to 50% by 2020. We need to better understand and respond to the differing motivations across the generations if we are to recruit and retain the best staff and provide us with a real opportunity to align support to meet individual needs. The age profile of the Health Education England workforce is currently (as of 31 March 2018): 15% aged under 30, 53% aged between 31 and 50, and 32% over the age of 51.

Although we acknowledge that there are gaps in our workforce data, we have begun to build a better understanding of the staff demographics within Health Education England. But we know that we must do more to achieve a workforce that represents the diversity of the national, regional and local communities we serve.

Leadership and culture

Inclusive leadership is key in leading an organisation through any change, including cultural. Our leadership value the importance of being compassionate and paying close attention to all the people they lead, understanding the situations they face, responding empathetically and taking thoughtful and appropriate action to help. We will ensure that our senior leaders continue to demonstrate the values of diversity and inclusion in their leadership competencies and behaviours.

"We ensure that compassion is central to the care we provide and respond with humanity and kindness to each person's pain, distress, anxiety or need. We search for the things we can do, however small, to give comfort and relieve suffering. We find time for patients, their families and carers, as well as those we work alongside. We do not wait to be asked, because we care."

NHS Constitution, 2015

Senior leaders at Health Education England will ensure that all staff feel safe, empowered, valued and enabled to deliver high-quality outcomes for the benefits of patients, service users and the public. They will continue to take action to address discrimination and harassment in the workplace.

By inclusive leadership we mean leading by example, demonstrating a commitment to progressing equality, valuing diversity, and providing challenge where needed if staff are experiencing bullying, harassment or any other form of negative experience.

We also know there is more progress we need to achieve in building greater diversity at very senior and Board level positions within Health Education England. We will undertake data analysis to inform actions that will improve senior level representation.

Boards must be able to use the talents of everyone who sits round the table, capitalising on their diversity in leading an organisation's culture for the benefit of staff, patients and service users. NHS England have produced a report that looks into the challenges of Board representation and their effectiveness for promoting the values of diversity and inclusion.

Policies and practices

We know diversity comes in different guises, often not visible and never as single issues – we all have abilities or disabilities, an ethnicity, a gender, a sexual orientation, a religion or belief (including respecting those who may have no faith), a work pattern, and responsibilities outside work, which together are particular to each of us.

Health Education England has a range of employment-related policies and practices, and these affect individuals in different ways. We will review our policies to ensure that they do not discriminate against colleagues, are fit for purpose and reflective of a 21st century employer.

Health Education England will continue to ensure that recruitment practices are fair and inclusive. To help us on our journey to build a workforce that is representative we will advertise recruitment vacancies through a broader spectrum of channels.

We will also ensure that we promote our commitment to an inclusive workforce through promoting our engagement with Stonewall (the LGBT+ campaign organisation) and Inclusive Employers (which offers organisations consultancy and training to help create inclusive workplace cultures).

Health Education England will continue to take a values based approach to recruitment, ensuring that the staff that are appointed can demonstrate that their individual values and behaviours align with the values of the organisation and NHS Constitution. We will also aim to have at least one member who has received inclusive recruitment training on every panel.

Data shows that disabled people continue to experience challenges in getting into employment. As a demonstration of our support to the Government's commitment to supporting disabled people into employment, Health Education England has signed up to the Disability Confident employer scheme. Our participation in this scheme will support our commitment to employ, support and promote disabled people in the workplace. Data shows that 5% of the Health Education England workforce has declared a disability (source: ESR; 2017).

Engagement

We all have multiple and intersectional identities that we bring with us to the workplace and shape our ways of working. However, some of those differences are more likely than others to have an effect on our workplace experiences.

One of the aims of the regional AHEAD groups is to provide a platform for colleagues to be involved in work to advance our commitment to diversity and inclusion. We know that we must do more to build representation within the membership of these groups. This is important not only to make sure all our business functions are engaged, but also to ensure that colleagues feel that their individual experiences will be recognised and valued.

Health Education England will develop effective engagement mechanisms so that the diverse thoughts and views of all colleagues are heard and respected. The work to involve staff will be underpinned by recognition of the importance of diverse and inclusive approaches to engagement, demonstrating an appreciation that we each have individual preferences.

Health Education England will also continue to demonstrate its support to a wide range of diversity celebration days that take place during the year. We are keen to continue to promote these dates and our AHEAD groups and staff networks will have an important role to play in this regard.

“We value every person – whether patient, their families, or carers, or staff – as an individual, respect their aspirations and commitments in life, and seek to understand their priorities, needs, abilities and limits. We take what others have to say seriously. We are honest and open about our point of view and what we can and cannot do.”

NHS Constitution, 2015

Capacity and capability

We will ensure that all leaders and colleagues have the capacity and capability to contribute to the delivery of Health Education England’s commitment to diversity and inclusion. We recognise that, depending on their individual roles and responsibilities, we may need to tailor different types of training or guidance to support leaders and colleagues develop their understanding on how they can demonstrate and promote the values of diversity and inclusion.

We know that by April 2018, 84% of our staff had completed the equality, diversity and human rights module that is part of the statutory and mandatory e-learning suite all NHS staff are required to undertake. While this is a good completion rate, we want to be ambitious and push it towards 100%. We see the equality, diversity and human rights e-learning as part of a blended approach to building knowledge and understanding.

We will commit to honest and reflective discussions about the capacity and capability of our own leaders. With our colleagues at the NHS Leadership Academy, which is part of Health Education England, we will invest in the development of inclusive leadership behaviours, recognising the benefits that such behaviours can bring to staff, learners, patients and service users.

Health Education England will also continue to seek the expertise and advice from our external partners, Stonewall and Inclusive Employers, in identifying ways in which to build corporate capacity and

capability. We will investigate examples of inclusive practice that may exist within the wider healthcare system, as well as within other sectors.

Following the launch of HEEROs (further information below), we are keen to support colleagues establish other staff networks at our locations across England. We will look to our AHEAD groups to engage with those colleagues who may be keen to set up such networks.

Health Education England will use the data available, such as through staff surveys and the NHS Electronic Staff Record (ESR), to build a more informed understanding of the demographics and lived experiences of colleagues and focus on the work that is required to achieve a workforce that is representative at all levels of seniority.

Health Education England has participated in the NHS Workforce Race Equality Standard for the past four years. Our latest data shows that we perform comparatively well against the NHS average and other national bodies for some of the metric indicators.

We have a better than average figure (1.05) for the relative likelihood of BME staff being appointed to NHS average of 1.60. We also achieved a better relative likelihood (1.00) of BME colleagues entering non-mandatory training and career progression development opportunities than the NHS average of 1.22.

‘Relative likelihood’ compares the likelihood of something occurring in one sample/population of people compared to a different sample/population. For example, if in trust Y, the likelihood that a member of staff entered the disciplinary process is 12%, then the relative likelihood that a member of staff at trust Y entered the disciplinary process compared to a member of staff trust X is 2.0. In other words, a member of staff at trust Y is twice as likely to have entered the disciplinary process compared to a member of staff at trust X.

But the data also shows areas where Health Education England must improve performance. For example, as at March 2017, 13.5% of our workforce were BME (Black and Minority Ethnic), (77% White and 9.5% Unknown), compared to NHS average of 16.3%. The performance metrics also indicate that we must build representation at senior levels, with 0% (rounded) at pay bands 8d and 9.

In March 2018, Health Education England published gender pay gap data for the first time, showing the size of the pay gap between male and female employees as at 31 March 2017. This complies with new legislation introduced by the Government, making it a statutory responsibility for organisations with 250 or more employees to report annually on their gender pay gap. For public bodies, like Health Education England, the Equality Act 2010 (Gender Pay Gap Information) Regulations 2017 also underpin the Public Sector Equality Duty.

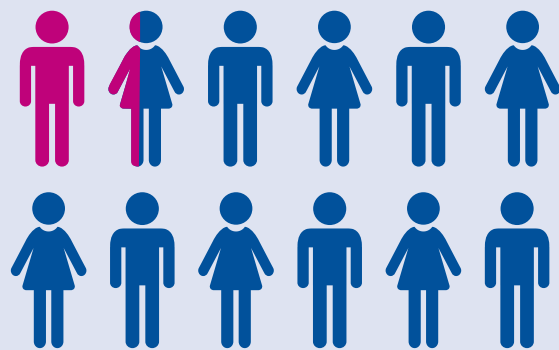
The reporting requirements for the gender pay gap report require employers to split the organisation into four 'quartiles', essentially dividing staff into groups based on their pay, from the lowest paid in the first quartile to the highest in the fourth quartile. Whilst Health Education England ensures that women and men are paid the same for doing the same job, via the NHS nationally agreed Agenda for Change pay scales, we do have a gender disparity when considering our four pay quartiles. While we employ a smaller number of men overall (65.5% female compared to 34.5% male, as at March 2017), 77.2% of those in the lower quartile are female, compared to 43.7% in the upper quartile and, therefore, in our most highly paid positions.

Did you know that:

13.5% of our staff are from a black and minority ethnic (BME) background whilst

9.5% have not declared their ethnicity.

Source: ESR 2017



22% of BME colleagues say they have experienced bullying or abuse from other staff

Source: staff survey 2016



there is similar under-reporting for other protected characteristics that are monitored through the NHS Electronic Staff Record (ESR), such as disability and religion

Diversity and inclusion in practice

Diversity Advantage programme – NHS South West Leadership Academy

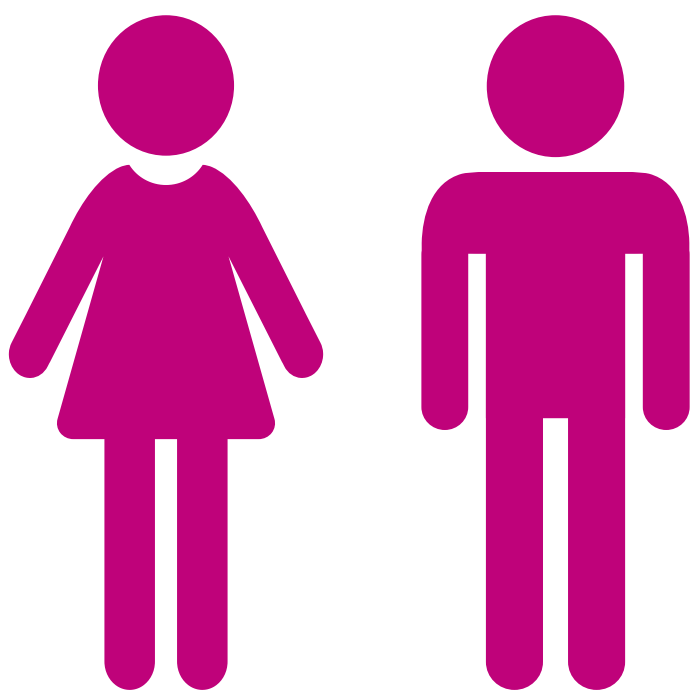
The Diversity Advantage programme was commissioned by NHS South West Leadership Academy (SWLA) and delivered by Bristol Business School (part of the University of the West of England), for talented participants from diverse backgrounds aspiring to be non-executive directors (NEDs) on NHS boards. It took the form of a six-day programme of workshops and masterclasses, supported by two sessions in a 'coaching circle', and mentoring support from a current board member. This programme sought to better prepare participants with the skills necessary to take up a NED role, and give them greater confidence to apply for such roles. It also aimed to show mentors, and their boards, that they would benefit from the Diversity Advantage programme and the introduction of more diversity of thinking.

Human Library – Health Education England North West and Bolton NHS Foundation Trust

The Human Library™ movement, founded in Denmark in 2000, aims to promote social inclusion while challenging prejudice and stereotyping. The methodology and language of a library are used as frameworks to enhance respectful conversations ('loans') between people of different backgrounds (acting as 'books' and 'readers'). In a 30-minute 'loan' conversation, the 'books' and 'readers' are permitted to ask each other any question they like, as long as it is consent based.

Human Library events were hosted by the Bolton NHS Foundation Trust in collaboration with the Health Education England North West team. 'Books' were recruited who represented the full spectrum of legally recognised protected characteristics and other factors, such as stigmatised professions.

The most challenging aspects of these events were deciding the 'titles' the 'books' wanted to be called. Many, if not all, of the 'books' had multiple identities and were reluctant to pigeonhole themselves with one 'title'. For instance, an older black woman preferred her 'title' to be 'Spiritual Person', and a deaf woman chose 'Mental Health Problems', among others such as 'Transgender Catholic' and 'Gay Autistic'. Across the two days of the Human Library events, a total of 25 'books' were recruited and 78 'loans' were documented.





Staff networks – Health Education England Rainbow Organisation (HEEROs)

As a Stonewall Diversity Champion we are committed to ensuring all lesbian, gay, bisexual and trans (LGBT+) staff are accepted in the workplace, and were proud to see the introduction of the Health Education England Rainbow Organisation (HEEROs) in July 2017.

HEEROs is a staff network (based in our London office) that aims to raise LGBT+ awareness and support LGBT+ colleagues. Interventions such as HEEROs demonstrate that we want to achieve a workplace culture within Health Education England that is supportive of all staff.

HEEROs aims to have a positive impact on colleagues who identify as LGBT+ and those looking for support and advice. What HEEROs can offer includes:

- a networking and support group
- confidential support to all employees on LGBT+ issues
- support to enable employees to report homophobic, biphobic and transphobic bullying and harassment
- promote learning of LGBT+ issues through a programme of lunch time seminars which are open to all staff
- support to develop policies and practices.

Opportunity Café

Located in Newcastle, the Opportunity Café was opened in summer 2017. The site has over 300 NHS employees, including colleagues from Health Education England.

The North East and Cumbria Learning Disability Network team took the opportunity to re-open the cafe with a focus on creating much needed jobs for people with learning disabilities.

The Café now employs 11 staff as catering assistants, working between 10 and 25 hours a week, welcoming people to the restaurant, ordering stock, preparing food, taking food orders, working on the till and serving customers.

Aaron, who is 19 and lives in Newcastle:

“This job means so much to me as it makes me feel valued and that I have achieved something. I love meeting new people and helping people, so I know I am going to really enjoy working in the café”.

This initiative supports the aims of the NHS Learning Disability Employment Programme that aims to develop local and national solutions to remove barriers and increase employment of people with learning disabilities in the NHS.



Our business

Our business

Leadership and culture

Each year, Health Education England receives a Mandate from the Government that looks at how the healthcare workforce can be developed to improve care for patients through education and training. The most recent Mandate contains clear objectives pertinent to how we consider diversity and inclusion in our business and programmes of work.

Reporting to the Board, the Diversity and Inclusion Committee is responsible for holding the organisation to account and seeking assurance that the values of diversity and inclusion are being advanced across the work and business of Health Education England.

Health Education England's four regional AHEAD groups also have a critical role to play. They will develop action plans that build on this framework and embed the NHS Constitution and values of diversity and inclusion throughout our regional and local business and functions.

Leaders need to consider how diversity and inclusion is being furthered through their respective areas' organisational, directorate, team and individual objectives, and to direct their teams in thinking collectively and individually to support the organisational commitment to advancing diversity and inclusion.

In 2017, Health Education England launched a revised set of broad corporate objectives. These objectives recognise the developing role of Health Education England in the context of place-based planning emerging from the NHS Five Year Forward View, now taking shape as Sustainability and Transformation Partnerships and Local Workforce Action Boards.

Health Education England Corporate Objectives

- **Thinking and leading** – we will lead thinking on new workforce policy solutions in partnership with the Department of Health and Social Care and other stakeholders to support high-quality and sustainable services.
- **Analysing and influencing** – we will use high-quality data, evidence, advice and workforce expertise to influence the delivery of NHS priorities.
- **Changing and improving** – we will design and respond positively to innovative recruitment, retention, development and transformation initiatives locally, regionally and nationally that change and improve NHS services and quality of care.
- **Delivering and implementing** – we will deliver high-quality education and training, implement the Government's mandate to us, and support partner-led programmes to improve the quality of care and services.
- **Focusing on tomorrow** – we will strategically focus on the future, including new roles and pathways to the professions and helping the NHS workforce embrace new technology.



Policies and practices

We recognise the importance of an inclusive approach to our way of working and the decisions we make. We know that processes, such as equality impact assessments, can be a useful tool in demonstrating that we have shown due regard to the aims of the Public Sector Equality Duty. However, we know that we can make better use of high-quality equality information and analysis, at the right time, as part and parcel of all of our business functions.

For the benefits of diversity to be felt in the way we do our business, Health Education England will create an environment where differences of thought and outlook are not only respected but expected. Harnessing these differences will help us to recognise the diversity that exists among those individuals and groups that we serve.

Health Education England is also keen to better understand experiences of the trainees that will become the health workforce of the future. Gathering data, such as that collectible through student surveys, will enable us to gather opinions about higher education and provide students with a powerful collective voice to help shape the future for current and prospective students.

Alongside our commitment to promoting quality, another important business lever we have is our procurement power. Health Education England annually invests approximately £4bn in education and training programmes for the current and future workforce.

The Equality and Human Rights Commission (EHRC) highlight that the purchasing power of public authorities can be used as a way to advance equality and, where appropriate, achieve wider social benefits, such as creating training or employment opportunities.

Health Education England will use its financial influence to ensure that those competing to tender for our contracts are actively making a positive impact on diversity and inclusion.

“We maximise our resources for the benefit of the whole community, and make sure nobody is excluded, discriminated against or left behind. We accept that some people need more help, that difficult decisions have to be taken – and that when we waste resources we waste opportunities for others.”

(NHS Constitution, 2015)

Capacity and capability

We know that achieving cultural change in how we conduct our business at Health Education England is dependent on shifting and changing a large number of interlocking tools, processes, attitudes, assumptions, values, and objectives.

As highlighted in this framework, there are good examples of where colleagues have taken due care to reflect the values of diversity and inclusion in their business planning. However, we recognise that more work is needed to generate and promote inclusive practices and cultures across the organisation. The Diversity and Inclusion Committee and AHEAD groups will have an essential role to play in facilitating this.

We will support our leaders so that they have the insight to provide leadership in setting diversity and inclusion objectives for directorates, teams and colleagues. The purpose of the NHS Leadership Academy is to work with partners to deliver excellent leadership across the NHS to have a direct impact on patient care. They have a leadership role to play in identifying, harnessing and disseminating emerging good practice in the areas of inclusion and innovation.

Did you know that:

- Health Education England is subject to the Public Sector Equality Duty and must give due regard to the Duty's aims in the business decisions that it makes.
- The Public Sector Equality Duty also applies to all contracts and contractors carrying out public functions.
- Each year Health Education England receives a mandate that sets out the Government's expectations in regards to healthcare education and training.
- The work of Health Education England covers more than 100 programmes from planning and commissioning, to recruiting and developing healthcare staff in a range of healthcare and community settings.

Engagement

The Diversity and Inclusion Committee will undertake thematic reviews to analyse how national programme leads have considered how they can advance diversity and inclusion. The Committee will identify how best practice can be scaled across other programmes and will report recommendations to the Health Education England Board.

At local and regional level, Health Education England will expect the AHEAD groups to hold accountability and monitor how effectively those colleagues with decision making responsibilities understand the importance of building diversity and inclusion values into their areas of work. The AHEAD groups will report progress into the Diversity and Inclusion Committee.

Diversity and Inclusion in practice

Building Leadership for Inclusion

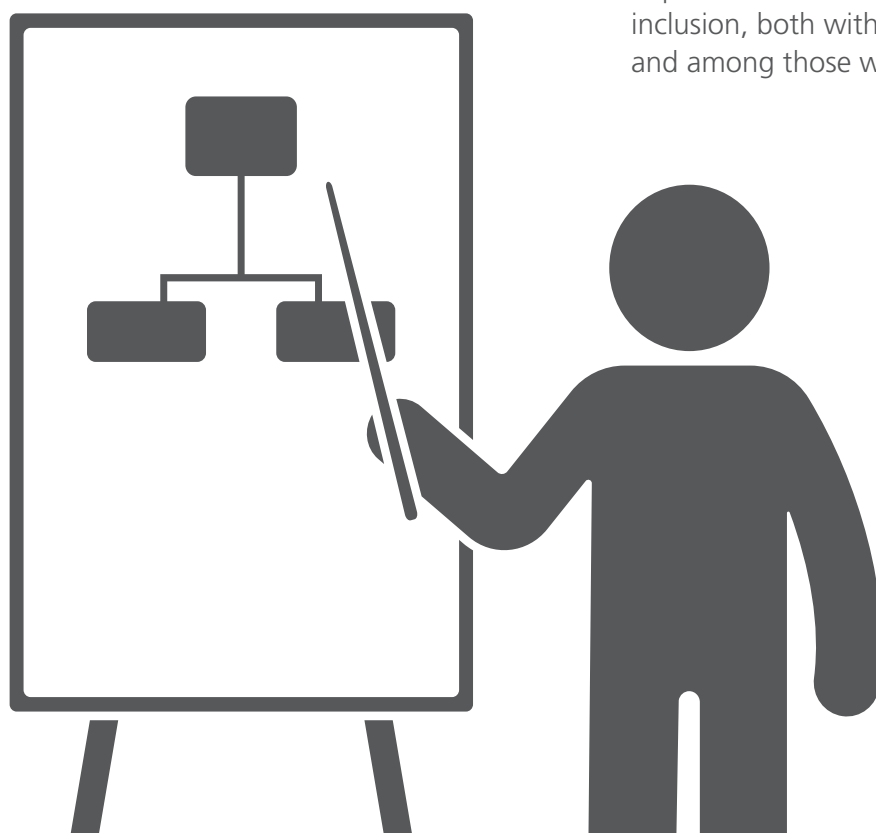
The NHS Leadership Academy has designed Building Leadership for Inclusion (BLFI) to develop, facilitate and create inclusive and compassionate leaders and leadership cultures across the healthcare system. It is a multi-faceted, multi-level programme of learning, action-based research, engagement, and challenge aiming to create a fundamental shift in the way that leaders and leadership work across the NHS to create inclusive cultures for all.

Health Careers – schools programmes

There are more than 350 different careers in the NHS and there is a job role to suit anyone, no matter what their interests and skills. The Health Careers team works to promote this role diversity to primary and secondary schools. Health Careers is piloting work with primary schools to increase awareness of the NHS as an employer and to challenge gender stereotypical views of health professions.

Teachers will deliver curriculum-based learning using Health Careers' resources and students will enter a competition by creating a piece of work celebrating the NHS that will be exhibited in hospitals, GP surgeries and libraries as part of the #NHS70 celebrations in July 2018.

Another key programme delivered by the Health Careers team is the annual Step into the NHS schools competition. Aimed at Years 8 and 9, it encourages young people to think about the breadth of opportunities open to them in the world of work, and more specifically the NHS, so they are inspired and motivated to fulfil their potential. The Health Careers team recognises the importance of visually promoting diversity and inclusion, both within the range of professions and among those who work in the NHS.





Health Education England Midlands and East – BME Paramedic Diversity Project

Health Education England was aware of data that indicated that only 4.3% of learners on paramedic development programmes, and 7.4% of the paramedic workforce, were from a BME background. This compares to 14% of the UK population being identified as BME in the 2011 national census. A particular level of under-representation was recognised in the Midlands and East region where only 3% of those in paramedic training were identified as BME.

In response, Health Education England developed the Paramedic Diversity Project. Working with regional partners, including ambulance trusts and higher education institutions, Health Education England in the Midlands and East undertook community engagement activities that included developing role model case studies and producing videos that showcased existing BME paramedics. Over 4,000 people were reached through active community engagement and the percentage of BME learners on paramedic training has increased to 6%.

Health Education England North West – Breaking Barriers in Medical Education

Each year Health Education England North West holds a Spring Educator's Conference. In 2017 they decided to address some of the common barriers that trainees would face. The afternoon of the first day was devoted to workshops involving trainees who shared a variety of backgrounds and characteristics, some protected (as defined under Equality Act 2010), and some that were not. A framework of six groupings were used, including LGBT+ trainees, International medical graduates, women in training, ill health and disability, Non-traditional background and balancing career and family.

Via a secure survey software trainees were asked to send stories of their experience of training in one or more of the six themes, either anonymously or identified. 42 responses were received from the trainees. The trainees, who had indicated that would they like to share their experiences with senior educators, were contacted. 100 delegates participated in the two-day conference. After listening sessions, planning was organised to address what actions could be taken, at Trust/Programme/School and local level within Health Education England, to support trainees in the six groupings.



Our influence

Our influence

Leadership and culture

Health Education England is responsible for ensuring that the future health workforce is available in the right numbers and has the necessary skills, values and behaviours to meet patient needs and deliver high-quality care.

With our leverage – the ability we have to influence situations and people – we are determined to be ambitious about how we can affect the advancement of diversity and inclusion within the wider healthcare system.

Supporting the delivery of integrated health and care requires a world-class education and training system that creates ladders of opportunity for people in every setting and from every background. The evidence is clear that considering the values of diversity and inclusion, and building a healthcare workforce that is representative of diverse local communities, has benefits for patients, service users, staff and society.

Health Education England's first integrated workforce strategy for England, titled *Facing the Facts, Shaping the Future*, was published for consultation in December 2017. This document sets out the current workforce landscape and describes an approach to shaping the face of the NHS and social care workforce for the next two decades.

The responses to the consultation (which ended in April 2018) will be used to inform our work in developing a comprehensive system-wide understanding of workforce needs for the future. Diversity and inclusion will be integral in how we look to influence the healthcare system. When we think about the workforce we will look beyond just counting the numbers and commit to achieving greater representation and social mobility.

In 2016, Health Education England launched its Quality Framework. The framework sets out the expectations for quality within work-based learning environments. We are working with placement providers and higher education institutes to drive quality improvement and ensure that innovation and best practice is celebrated and shared across the country. The Quality Framework makes clear that education and training opportunities should be based on principles of diversity and inclusion.

We will continue to influence a values based approach to recruitment so that the healthcare system recruits the right workforce not only with the right skills and in the right numbers, but with the right values to support effective team working in delivering excellent patient care and experience.

Our national Values Based Recruitment (VBR) framework will ensure that all students recruited to NHS funded training programmes are recruited for the values of the NHS Constitution. The framework will also continue to encourage NHS employers to do the same when recruiting employees to help bring about a standardised approach to recruitment. Any organisation implementing VBR is required to do so with consideration to diversity and inclusion.

Through our Talent for Care and Widening Participation teams, we will continue to support an improvement in and focus on diversity and inclusion at pre-employment and all subsequent levels of employment. Recognising the low representation of disabled people within NHS apprenticeships, Health Education England will work with other national health bodies, government departments and sector experts to increase both the number and proportion of individuals with disabilities accessing apprenticeships in the NHS. This forms part of a broader aim to ensure equality of opportunity and access across work experience, work-related learning, employability programmes and apprenticeships at all levels (2-7) within the NHS.

Policies and practices

In thinking about how we can influence the healthcare system we have referred to our Strategic Framework 2014-2029 (known colloquially as Framework 15). This framework is primarily intended to act as a guide to inform decisions by those tasked with planning education and training the future workforce.

Within Framework 15 we highlight that those currently in training will still be working as healthcare professionals until 2060 and beyond. Therefore, we need to invest long term into interventions that will help maintain and grow a healthcare workforce that is representative of society today and in the future.

Health Education England continues to be an active supporter of the NHS Workforce Race Equality Standard and we are pleased that NHS England has published a report showing our performance against the Standard's metric indicators. We are committed to being a transparent organisation when it comes to our work on advancing workplace inclusion.

We will work with the NHS Workforce Race Equality Standard team, the NHS Equality and Diversity Council, and partner organisations, as we know there is overwhelming evidence showing that a valued, included and supported workforce delivers high quality patient care, improves patient satisfaction and patient safety. We also know that ultimately an engaged and included workforce saves lives and money.

Health Education England will also champion the forthcoming NHS Workforce Disability Equality Standard. We have been involved in the development of that Standard as a member of the strategic advisory group. Whilst we will not be mandated to respond to the NHS Workforce Disability Equality Standard, in a similar fashion to the NHS Workforce Race Equality Standard, we recognise that it will be important for us to show our support as a national health body.

We will ensure that our commitment to diversity and inclusion within the healthcare system is aligned with our programmes advancing widening participation and diversity in apprenticeships.

Engagement

At a national level we will continue to sit on the NHS Equality and Diversity Council, recognising the influential leadership role it has on furthering diversity and inclusion across the healthcare system. Its purpose is to shape the future of healthcare – to help improve the access, experiences and health outcomes for all patients and communities, and to support the NHS to become a more inclusive employer by making full use of the talents of its diverse staff and the communities it serves.

Alongside NHS England and other national health bodies, we will also take on joint secretariat responsibility for the Council. We will use this as an opportunity to strengthen our influence within the healthcare system.

At regional and local level, it is widely accepted that working collaboratively to deliver health and social care is the way forward. This will be achieved through the development of Sustainability and Transformation Partnerships and Integrated Care Systems.

There is now a clear need for Health Education England to work closer together with these partnerships and systems as the centres of expertise on workforce intelligence and data, with the potential to act as a catalyst for, and a co-ordinator of, the cross-system changes required.

We will expect the regional AHEAD groups to engage with partners, such as those involved in our local workforce action boards, to drive forward progress in how the diversity and inclusion elements of workforce challenges are solved across the healthcare system.

“Patients come first in everything we do. We fully involve patients, staff, families, carers, communities, and professionals inside and outside the NHS. We put the needs of patients and communities before organisational boundaries. We speak up when things go wrong.”

(NHS Constitution, 2015)

Capacity and capability

Health Education England will build its reputation as an organisation that has the capability and capacity to play a system-wide leadership role on diversity and inclusion.

In identifying where we should dedicate our focus on supporting diversity and inclusion in the healthcare system we will build our understanding of the evidence. For example, the Race Disparity Audit, published by the Cabinet Office, which examines how people of different backgrounds are treated across areas including health, education, and employment.

The Race Disparity Audit has highlighted that more work is required to address the race equality challenges that exist within health and social care. For example, the Audit reported that the boards of many NHS trusts do not reflect the diversity of the NHS workforce, with 93% of NHS board members in England declaring their ethnicity as White. We will work with our stakeholders and partners across the healthcare system to understand how we can achieve greater representation at board level.

Across health and care, the workforce is increasingly diverse – for example, nearly 20% of the 1.3m people who work in the NHS are from BME backgrounds – yet the same people are significantly under-represented in senior management roles.

The NHS Leadership Academy became part of Health Education England in April 2017. With this collaboration, we took on responsibility for system-level positive action diversity and inclusion programmes and thought leadership.

We will look to utilise the expertise of our colleagues at the Academy in considering how we can achieve greater representation in leadership and support the development of inclusive leadership skills across the healthcare system, recognising the importance of advancing the values of diversity and inclusion for the benefit of patients, staff and the public.

In the work we undertake to support the aims of this framework we will consider the aims of the Developing People – Improving Care. Health Education England is a sponsor of this national framework, which aims to guide local, regional and national action on developing NHS-funded staff. The framework aims to equip and encourage people in NHS-funded roles to deliver continuous improvement in local healthcare systems and gain pride and joy from their work. To that end, Developing People – Improving Care will guide team leaders at every level of the NHS to develop a critical set of improvement and leadership capabilities among their staff and themselves.

Did you know that:

the NHS spends **65%** of its overall £120bn budget on staff costs



our workforce strategy (Facing the Facts, Shaping the Future) is a powerful lever as it sets out the ambition for an integrated workforce over the next 10 years.

Sustainability and Transformation Partnerships and Integrated Care Systems cover the whole of England
www.england.nhs.uk/systemchange

Diversity and inclusion in practice

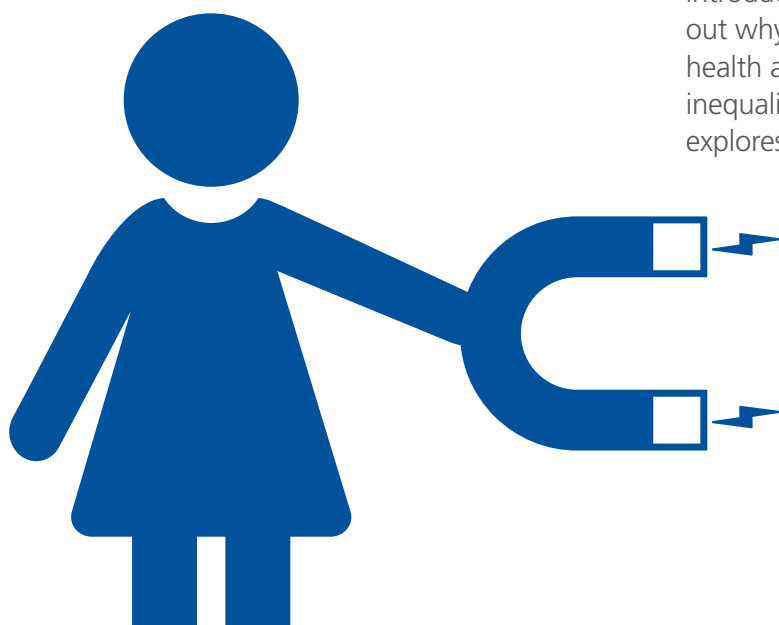
Widening Participation: It Matters strategy

The Widening Participation: It Matters strategy sets out how Health Education England will drive widening participation through strategic partnership working and using our workforce and education levers. The aim is to ensure the NHS workforce is representative of our communities and that NHS career development and progression is based on merit, ability and motivation, not social background, privilege or the extent and effectiveness of someone's social networks.

Building on our work to promote widening participation, 'What comes next?' sets out the national strategic framework for engagement with schools and communities. The framework looks at how organisations can create a diverse workforce through sustained partnerships with schools and community organisations. It showcases best practice from across the NHS and outlines an approach that organisations can adopt to more strategically align their priorities.

Sexual Orientation Monitoring Information Standard e-learning

Health Education England has been working with Stonewall and the LGBT Foundation to develop an e-learning programme to support health and social care staff in understanding the Sexual Orientation Monitoring Information Standard, which was introduced in October 2017. The programme sets out why the standard was introduced in adult health and social care services, explains the health inequalities experienced by LGBT+ communities and explores the benefits of monitoring.





NHS Workforce Disability Equality Standard

Health Education England has been an active member of the strategic advisory group leading the development of the NHS Workforce Disability Equality Standard (WDES). The WDES is a set of specific measures (metrics) that will enable NHS Trusts and Foundation Trusts to better understand the experiences of their disabled staff. It will support positive change for existing employees, and enable a more inclusive environment for disabled people working in the NHS. Like the NHS Workforce Race Equality Standard, on which the WDES is in part modelled, it will also allow the healthcare system to identify good practice and compare performance regionally and by type of trust.

Developing leaders and recognising talent

Health Education England aims to encourage individual potential through initiatives such as the NHS Leadership Academy Ready Now Programme. This is designed for those looking to move into a board level position, or a significantly more senior role. The year-long programme takes senior leaders from a BME background on a transformational learning journey, helping individuals to realise their potential.

Over the past 70 years the NHS has relied on talent and workforce from around the world. The contribution of BME individuals was recognised at the NHS England Windrush 70 awards. Health Education England was delighted to sponsor the 'research and policy development' and 'top leadership' award categories. All categories recognised a range of achievements and breakthroughs, as well as unsung heroes who under normal circumstances would perhaps be overlooked.

Another demonstration of our commitment to recognising talent is through sponsorship of the Mary Seacole Leadership and Development Awards. The awards provide opportunities for nurses, midwives and health visitors to work on a specific project or activity, which must evidence the benefit to the health outcomes of people from BME communities and reduce health inequalities. Further information about the awards can be read at www.nhsemployers.org/maryseacole

Monitoring progress

In order to successfully embed Diversity and Inclusion – Our Strategic Framework 2018-2022, Health Education England will monitor progress through:

- developing a dashboard that will help us to measure progress against achieving greater diversity at all levels of the Health Education England workforce, and in regards to our performance against the NHS Workforce Race Equality Standard and gender pay gap, both nationally and by region
- continuing to participate in external best practice accreditation and standards, including Stonewall Workplace Equality Index and Disability Confident
- analysing results of the annual staff survey
- reviewing performance against metrics relating to mandatory training, appraisal rates and access to training opportunities
- analysing feedback from exit interviews and surveys
- benchmarking against other NHS organisations
- ensuring that the objectives that are developed to implement this strategic framework are patient focused through engaging with members of the Patient Advisory Forum.

Achieving and measuring impact

The delivery of Diversity and Inclusion – Our Strategic Framework 2018-2022 will be overseen by the Diversity and Inclusion Committee.

The Diversity and Inclusion Committee is responsible for:

- holding Health Education England to account for delivery and implementation of Diversity and Inclusion – Our Strategic Framework 2018-2022
- approving an annual plan that sets out Health Education England participation in national and regional celebrations
- senior accountability and reporting to the Health Education England Board
- agreeing a clear communication strategy for implementing commitments within the framework
- acting as diversity and inclusion champions
- reviewing progress, such as in regards to Health Education England performance against NHS Workforce Race Equality Standard metrics, the gender pay gap and Stonewall Workplace Equality Index
- receiving reports on progress against regional implementation plans
- ensuring that diversity and inclusion are proactively considered in any Health Education England restructuring and development of new priorities and business plans between 2018 and 2022.



At a regional level this work will be led and overseen by the AHEAD groups. These will:

- provide regional direction and agree local plans to implement and deliver the ambition set out in this Framework
- approve an annual plan that sets out regional participation in celebrations
- act as diversity and inclusion champions
- review regional metrics and implement local action plans
- endorse a local communication strategy to support implementation
- embed diversity and inclusion in business planning and priorities.

Communications

Health Education England will regularly communicate progress against the commitments set out in this framework. The communications strategy will involve:

- Team and directorate meetings
- Stakeholder involvement and engagement events
- CEO and leadership webinars
- Blogs by the CEO and Senior Leadership team
- Health Education England' Patient Advisory Forum
- HEE Matters
- HEE Connect
- Health Education England website <https://hee.nhs.uk>
- Social Media
- Articles in diversity publications
- Presentations at key events
- Preparation and promotion of a diversity and inclusion calendar

Appendix: Further information

We have referred to the following legislation, organisations, resources and programmes within the framework. For further information please use these links (listed alphabetically).

Agenda for Change pay scales www.nhsememployers.org/your-workforce/pay-and-reward/agenda-for-change/pay-scales/annual

Care Act 2014 www.legislation.gov.uk/ukpga/2014/23/contents/enacted

Department of Health and Social Care mandate to Health Education England: April 2017 to March 2018 www.gov.uk/government/publications/health-education-england-mandate-2017-to-2018

Developing People – Improving Care <https://improvement.nhs.uk/resources/developing-people-improving-care>

Disability Confident www.gov.uk/government/collections/disability-confident-campaign

e-Learning for Healthcare www.e-lfh.org.uk/about

Equality Act 2010 www.legislation.gov.uk/ukpga/2010/15/contents

Equality Act 2010 (Gender Pay Gap Information) Regulations 2017 www.legislation.gov.uk/ukdsi/2017/9780111152010

Equality Act 2010: Part 1 of Schedule 19 – public authorities subject to the Public Sector Equality Duty www.gov.uk/government/publications/equality-act-2010-schedule-19-consolidated-april-2011

Equality and Human Rights Commission, Guidance on procurement www.equalityhumanrights.com/en/advice-and-guidance/guidance-procurement

Facing the Facts, Shaping the Future consultation <https://consultation.hee.nhs.uk/welcome-page> due to publish July 2018

Gender pay gap reporting <https://gender-pay-gap.service.gov.uk>

Gender Recognition Act 2004 www.legislation.gov.uk/ukpga/2004/7/contents

Health Careers www.healthcareers.nhs.uk

Health Education England, BME Paramedic Diversity Project <https://hee.nhs.uk/our-work/paramedics/ethnic-diversity-paramedic-education>

Health Education England, Board approval of new governance and accountability structure www.hee.nhs.uk/about/how-we-work/board-meetings-papers/hee-board-meeting-28-february-2017

Health Education England, The NHS constitutional values hub <https://hee.nhs.uk/about/our-values/nhs-constitutional-values-hub-0>

Health Education England, Gender Pay Gap Report 2017/18 www.hee.nhs.uk/about/corporate-information

Health Education England, local workforce action boards www.hee.nhs.uk/our-work/local-workforce-action-boards

Health Education England, Our Work <https://www.hee.nhs.uk/our-work>

Health Education England, Patient Advisory Forum <https://hee.nhs.uk/our-work/patient-advisory-forum>

Health Education England, Quality Framework <https://hee.nhs.uk/our-work/quality>

Health Education England, Rainbow Organisation (HEEROs) <https://hee.nhs.uk/our-work/equality-diversity/stonewall-diversity-champions-programme>

Health Education England, Strategic Framework 2014-2029 ('Framework 15') <https://hee.nhs.uk/our-work/strategic-framework>

Health Education England, Values Based Recruitment <https://hee.nhs.uk/our-work/values-based-recruitment>

Health Education England, Workforce Strategy www.hee.nhs.uk/our-work/workforce-strategy

House of Commons Library Briefing Paper – People with disabilities in employment <https://researchbriefings.parliament.uk/ResearchBriefing/Summary/CBP-7540>

Human Library™ <http://humanlibrary.org>

Inclusive Employers www.inclusiveemployers.co.uk

King's Fund – Making the difference: Diversity and inclusion in the NHS www.kingsfund.org.uk/sites/default/files/field/field_publication_file/Making-the-difference-summary-Kings-Fund-Dec-2015.pdf

LGBT Foundation <https://lgbt.foundation>

Mary Seacole Awards www.nhsememployers.org/maryseacole

NHS Accessible Information Standard www.england.nhs.uk/2016/08/accessible-information-standard

NHS Constitution www.gov.uk/government/publications/the-nhs-constitution-for-england/the-nhs-constitution-for-england

NHS Electronic Staff Record (ESR) www.electronicstaffrecord.nhs.uk/home

NHS Employers www.nhsememployers.org/your-workforce/plan/building-a-diverse-workforce

NHS Equality and Diversity Council www.england.nhs.uk/about/equality/equality-hub/edc/

NHS Five Year Forward View www.england.nhs.uk/five-year-forward-view

NHS Leadership Academy www.leadershipacademy.nhs.uk

NHS Leadership Academy, Ready Now www.leadershipacademy.nhs.uk/programmes/the-ready-now-programme

NHS Learning Disability Employment Programme www.england.nhs.uk/about/equality/equality-hub/ld-emp-prog

NHS Standard Contract www.england.nhs.uk/nhs-standard-contract

NHS Workforce Disability Equality Standard www.england.nhs.uk/about/equality/equality-hub/wdes

NHS workforce race equality: A case for diverse boards www.england.nhs.uk/wp-content/uploads/2018/03/nhs-workforce-race-equality-a-case-for-diverse-boards.pdf

NHS Workforce Race Equality Standard www.england.nhs.uk/about/equality/equality-hub/equality-standard

NHS Workforce Race Equality Standard - data analysis report on national health bodies (2017) www.england.nhs.uk/about/equality/equality-hub/equality-standard/2017-data-analysis-report-for-national-healthcare-organisations

Office for National Statistics - International immigration and the labour market, UK: 2016 www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/internationalmigration/articles/migrationandthelabourmarketuk/2016

Opportunity Café <https://www.england.nhs.uk/publication/the-opportunity-cafe/>

Public Sector Equality Duty www.equalityhumanrights.com/en/advice-and-guidance/public-sector-equality-duty

Race Disparity Audit www.gov.uk/government/publications/race-disparity-audit

Sexual Orientation Monitoring Information Standard www.england.nhs.uk/about/equality/equality-hub/sexual-orientation-monitoring-information-standard

Statutory and Mandatory module on Equality, Diversity and Human Rights www.e-lfh.org.uk/programmes/statutory-and-mandatory-training

Step into the NHS www.stepintothens.nhs.uk/schools

Stonewall Diversity Champions programme www.stonewall.org.uk/diversity-champions-programme

Stonewall Workplace Conferences www.stonewall.org.uk/stonewall-workplace-conferences

Stonewall Workplace Equality Index www.stonewall.org.uk/workplace-equality-index

UK Core Skills Training Framework (CSTF) www.skillsforhealth.org.uk/services/item/146-core-skills-training-framework

What comes next? National strategic framework for engagement with schools and communities to build a diverse healthcare workforce <https://hee.nhs.uk/sites/default/files/documents/Strategic%20Framework%20-%20What%20Comes%20Next.pdf>

Widening Participation: It Matters <https://hee.nhs.uk/our-work/talent-care-widening-participation>

Windrush 70 awards <https://windrush.crowdicity.com>

Work, health and disability: improving lives www.gov.uk/government/consultations/work-health-and-disability-improving-lives

Appendix – Glossary

An explanation of the terminology used within this framework and other terms that may be encountered within diversity and inclusion.

Age

If the reference is made to a person who has a particular protected characteristic, it is a reference to a person of a particular age group; If reference is made to persons who share a protected characteristic it is a reference to persons of the same group.

Ally

A (typically) straight and/or cis person (someone whose gender identity is the same as the sex they were assigned at birth) who supports members of the LGBT+ community.

Bi

Bi is an umbrella term used to describe an emotional, romantic and/or sexual orientation towards more than one gender. Bi people may describe themselves using one or more of a wide of terms, including, but not limited to, bisexual, pansexual, bi-curious, queer and other non-monosexual identities.

BME

Black and Minority Ethnic (BME), or Black, Asian and Minority Ethnic (BAME), refers to individuals from ethnic backgrounds other than White.

Disability

It is a physical or mental impairment which has a substantial and long-term adverse effect on an individual's ability to carry out normal day-to-day activities. A person has the protected characteristic of disability if s/he is disabled.

Gay

Refers to a man who has an emotional, romantic and or/sexual orientation towards men. Also a generic term for lesbian and gay sexuality- some women define themselves as gay rather than lesbian.

Gender

Often expressed in terms of masculinity or femininity, gender is largely culturally determined and is assumed from the sex assigned at birth

Gender expression

How a person chooses to outwardly express their gender, within the context of societal expectations of gender. A person who does not confirm to societal expectations of gender may not, however, identify as trans.

Gender identity

A person's innate sense of their own gender, whether male, female or something else (such as non-binary), which may or may not correspond to the sex assigned at birth.

Gender reassignment

Another way of describing a person's transition. To undergo gender reassignment usually means to undergo some sort of medical intervention, but it can also mean changing names, pronouns, dressing differently and living in their self-identified gender. Gender reassignment is a characteristic that is protected by the Equality Act 2010.

Intersectionality

The term intersectionality was first coined by legal scholar Kimberle Crenshaw in 1989. It defines the notion that social identities such as age, class, gender, marital status, race and sexuality overlap and intersect in ways that shape each individual. It captures the complexity of the human experience accurately and illustrates that every individual has one more than one social identity.

LGBT+

The acronym for lesbian, gay, bi, trans and other sexual and gender minorities. The Plus (+) ensures that the term is inclusive to all other related communities.

Lesbian

Refers to a woman who has an emotional, romantic and/or sexual orientation towards women.

Marriage and civil partnership

A person has the protected characteristic of marriage and civil partnership if the person is married or is a civil partner.

Non-binary

An umbrella term for a person who does not identify as only male or only female, or who may identify as both.

Pregnancy and maternity

A woman has the protected characteristic of pregnancy and maternity if she is treated unfavourably because of the pregnancy or because of illness suffered by her as a result of it. Protection extends from the beginning of the pregnancy to the end of statutory maternity leave: or (if earlier) when she returns to work after pregnancy; or (if she does not have that right) two weeks after the end of the pregnancy.

Race

The term includes colour, nationality, ethnic or national origins. A reference to a person who has a particular protected characteristic is a reference to a particular racial group.

Religion or Belief

Religion means any religion and a reference to religion includes a reference to a lack of religion. Belief means any religious or philosophical belief and a reference to belief includes a reference to a lack of belief. Religion or belief are one of the protected characteristics of the Equality Act.

Sex

Assigned to a person on the basis of primary sex characteristics (genitalia) and reproductive functions. In relation to the protected characteristic it protects a man or a woman.

Sexual Orientation

A person's sexual attraction to persons of the same sex, persons of the opposite sex or persons of either sex. It is one of the protected characteristics of the Equality Act.

Trans

An umbrella term to describe people whose gender is not the same as, or does not sit comfortably with, the sex they were assigned at birth.

