



Equality, Diversity and Inclusion Staff Network Bulletin June 2022

Overview

British Journal of Healthcare Management

[Diversity as an independent driver of change in the NHS](#)

Available via [journal article request](#)

Consultant physician Maria-Nina Williams explores growing diversity as an independent driver of change in the NHS and emphasises the need for healthcare managers to recognise and adapt to cultural diversity in order to promote cohesion and staff wellbeing in the workplace.

Department of Health and Social Care

[Health and social care review: leadership for a collaborative and inclusive future](#)

Independent report from General Sir Gordon Messenger and Dame Linda Pollard into leadership across health and social care in England.

NHS Confederation

[The unequal impact of COVID-19: investigating the effect on people with certain protected characteristics](#)

How health and care systems are devising innovative approaches to mitigate the direct effects of COVID-19.

NHS Employers

[Tackling health inequalities through inclusive recruitment](#)

Information and prompts for NHS workforce leads to consider local approaches.

[Understanding intersectionality and engaging with diverse staff and communities](#)

As part of Equality, Diversity and Human Rights Week, Dr Shamaila Anwar talks about intersectionality and creating psychological safety.

Personnel Today

[Diversity versus inclusion: why the difference matters](#)

The terms “diversity and inclusion” are so often used together that it’s easy to think that they mean the same thing. However, diversity and inclusion are distinct concepts, and they are not interchangeable. It’s possible for an environment to be diverse, but not inclusive.



Armed Forces Staff Network

Cabinet Office, Office for Veterans' Affairs, and Veterans UK

[Veterans' Strategy Action Plan: 2022 to 2024](#)

This Action Plan outlines the steps the government will take to support veterans from 2022 to 2024.

NHS Employers

[Armed Forces reservists toolkit](#)

Your guide to understanding and supporting Armed Forces reservists in your NHS workforce.

[How my NHS organisation supports me as an Armed Forces reservist](#)

Pharmacy technician and Army reservist, Lorna Shadbolt, shares her experiences.

[Supporting Armed Forces reservist staff to benefit your trust](#)

Hear how Manchester University NHS Foundation Trust embraces the military commitments of its reservist staff.

Step into Health

Through [Step into Health](#), members of the Armed Forces community can connect to NHS organisations to set up training opportunities, clinical and general work placements, insight days and receive application support. The programme provides a dedicated pathway into a career in the NHS.

Black, Asian and Minority Ethnic (BAME) Staff Network

ADAPT: South Asian Dementia Pathways

[An online toolkit of enhanced interventions](#)

Roughly 25,000 people from ethnic minority communities live with dementia in the UK. The largest single grouping are people whose origins are South Asian countries. People from these communities are at greater risk of developing dementia. However, they are less likely to access support at all points of the dementia care pathway, so are more likely to seek help in a crisis or at a later stage in the condition.

Birthrights

[Inquiry into racial injustice in maternity care](#)

Birthrights' year-long inquiry into racial injustice has heard testimony from women, birthing people, healthcare professionals and lawyers outlining how systemic racism within maternity care – from individual interactions and workforce culture through to curriculums and policies – can have a deep and devastating impact on basic rights in childbirth. This jeopardises Black and Brown women and birthing people's safety, dignity, choice, autonomy, and equality.



BMA

[Delivering racial equality in medicine](#)

This report is the latest stage in BMA's programme of work aimed at understanding the causes of racial inequality in the medical profession. It proposes effective solutions to address racial inequality to ensure a future NHS that is equitable, fair, and inclusive for all healthcare workers and patients.

[Racism in Medicine](#)

This report presents the findings of the BMA racism in medicine survey, which ran from October to December 2021. The survey sought to gather evidence of the racism experienced by doctors and medical students working in the NHS, and the impact of these experiences on their working lives and their career opportunities. All doctors and medical students in the UK, from all ethnic backgrounds, were invited to participate. The survey received 2030 responses in total, making it one of the largest of its kind. We found a concerning level of racism in the medical profession, stemming from fellow doctors, other NHS staff, and patients. These experiences of racism present in a variety of forms in the institutions and structures of the medical profession.

[Refugee and asylum seeker patient health toolkit](#)

This guidance will provide you with the key legal, ethical and practical considerations you need to take into account when treating a patient who is a refugee or asylum seeker, and signposts to other sources of support and information.

BMJ Leader

[Interviews: Asking the wrong questions by Roger Kline](#)

The NHS is awash with Action Plans to create more diverse recruitment and career progression and melt the snowy white peaks of the NHS which still symbolise the failure of the NHS to tackle race discrimination. Post Gorge Floyd, such efforts increased but I suggest progress will be glacial unless employers (and unions) pay more attention to the evidence on what actually works.

The Centre for Ageing Better

[Ethnic Inequality in Ageing](#)

This set of downloadable 'evidence cards' highlights the contributions of and shocking inequalities experienced by Black, Asian and Minority Ethnic groups approaching retirement age.

Centre for Mental Health

[Tackling mental health disparities](#)

Mental health inequalities mean that while it is true that anyone can experience mental ill health, the risks are much higher for certain groups who experience structural discrimination and disadvantage.



Civitas: Institute for the Study of Civil Society

[A Response to the Race and Health Observatory \(RHO\) rapid evidence review into ethnic inequalities in healthcare](#)

This report looks at the NHS Race and Health Observatory (RHO) as a case study and its work to 'identify and tackle ethnic inequalities' in health. Central to its recent report was the role of racism – those who are not white are treated worse, given the wrong treatment, and avoid getting help for 'fear of racist treatment from NHS healthcare professionals'. This report analyses the rapid evidence review and questions the assumptions and conclusions contained in this work.

Equality and Human Rights Commission

[Experiences from health and social care: the treatment of lower-paid ethnic minority workers](#)

This is a report of the findings of an inquiry to assess the treatment and experiences of lower-paid ethnic minority workers in health and social care, particularly during the pandemic. It found: incomplete data on lower-paid ethnic minority workers, particularly in adult social care; different treatment and experiences at work; commissioning and outsourcing leading to poor pay and insecure work; low awareness of employment rights; and fear of raising concerns and a lack of mechanisms to do so.

The Fawcett Society / The Runnymede Trust

[Broken Ladders: The myth of meritocracy for women of colour in the workplace](#)

Women of colour across the UK already know that experiencing racism at work is the norm. That's why we've partnered with the Fawcett Society to produce our ground-breaking research, Broken Ladders: The myth of meritocracy for women of colour in the workplace.

National Institute for Health Research

[NIHR Research Design Service Equality, Diversity and Inclusion Toolkit](#)

This resource has been developed to support researchers to better understand how to embed EDI in research design and to meet the NIHR's EDI requirements. The toolkit advocates for best practice which goes beyond the NIHR's current requirements.

NHS Confederation

[Shattered hopes: black and minority ethnic leaders' experiences of breaking the glass ceiling in the NHS](#)

This report from the BME Leadership Network spotlights the findings from a recent survey and engagement on the experience of senior black and minority ethnic leaders in the NHS.

[Shifting the dial on mental health support for young black men](#)

A programme addressing mental health needs in young black men highlights key learning for system leaders and commissioners of mental health services.



NHS Employers

[Supporting religious identity in the NHS to improve staff and patient wellbeing](#)

Read the recommendations from a report published by Surrey University Business School on supporting religious identity in the NHS.

NHS England

[Workforce Race Equality Standard 2021](#)

This year's report shows the number of BME staff at very senior manager level has almost doubled between 2020 to 2021 – up from 153 to 298. The analysis also shows the number of BME board members across all NHS trusts has increased by a quarter between 2020 and 2021, and is up by three quarters on 2018 when the data was first published. The survey also showed the NHS workforce is more diverse than at any point in NHS history with more than 300,000 staff from a BME background.

NHS Race Health Observatory

[Ethnic Inequalities in Healthcare: a Rapid Evidence Review](#)

This report presents the findings and recommendations of a rapid review of ethnic inequalities in healthcare and within the NHS workforce, conducted by academics at The University of Manchester, The University of Sheffield and The University of Sussex.

NHS Providers

[Race 2.0: Time for Real Change](#)

NHS Providers four-year strategy has made race equality a priority. We have embarked on two closely-related workstreams as a result. Our internal workstream intends to ensure we are tackling racial injustice and structural racism through all our influencing and support activity, and in our culture and processes. Our second member-facing workstream focuses on supporting provider boards to address race inequalities impacting staff, patients and service users within their organisation.

Nuffield Trust

[Chart of the week: What is the scale of the race equality challenge in the NHS?](#)

The recent workforce race equality standard report described how staff from a Black and minority ethnic background are less well represented at senior levels of the NHS, and that they have worse day-to-day work experiences and face more challenges in progressing their careers. In this chart, Billy Palmer shows how stark some of the differences are.

[The over-representation of Black people as restricted patients in secure hospitals](#)

People with severe mental health problems who are in contact with the criminal justice system can be held as restricted patients in hospitals if they have been assessed as needing treatment. Miranda Davies takes a closer look at new data that shows that 16% of restricted patients in hospital are Black or Black British, despite only making up 3% of the general population.



People Management

[Highlighting race and privilege has been key to wellbeing for East London NHS Foundation Trust](#)

Sharing employees' experiences of bullying and harassment has also enabled the trust to foster a culture where staff feel empowered to call out unacceptable behaviour.

The Runnymede Trust

[It's not just hair, it's a tool to navigate society and relationships](#)

Former Runnymede Trust Unbound Trainee, Bowale Fadare, reflects on her visit to the Horniman Museum's exhibition, Hair: Untold Stories. What is the cultural and political significance of hair, and how can we unlearn discriminatory norms, starting with hair?

UK Civil Service

[Why we've stopped using the term 'BAME' in government](#)

Richard Laux and Summer Nisar explain why the UK Civil Service has scrapped the label 'BAME' in referring to different ethnic minority groups within society.

UK Parliament Post Note

[Mental Health Act Reform - Race and Ethnic Inequalities](#)

The Government plans to bring forward legislation to reform the Mental Health Act 1983. Proposals include approaches to reduce the disproportionate number of individuals from Black, Asian and minority ethnic communities subject to compulsory detention and treatment. This POSTnote outlines research on race and ethnic inequalities in relation to the Act, summarises proposals for reform and stakeholder views.

MAPLE Staff Network

Acas

[Supporting disabled people at work](#)

Nobody has to tell their employer – or potential employer – they're disabled. But when they do, the employer has a legal responsibility to support them. Employers should do all they reasonably can to create an environment and recruitment process where people feel safe and comfortable to talk about disability.

BMJ

[What Your Patient is Thinking: Seeing me as high functioning masks my difficulties](#)

Helen Wolfe explains the challenges of navigating the health system as an autistic person



Medical Schools Council

[New guidance published to support medical school applicants with disabilities](#)

The Medical Schools Council (MSC) has published new guidance on supporting applicants with disabilities. Two resources have been released, the first focuses on how medical schools can encourage and support those with disabilities through the application process while the second offers guidance to disabled applicants by sharing measures they can take to ensure they receive the support they need from medical schools. Both frameworks complement the General Medical Council's (GMC) [Welcomed and valued guidance](#), which supports disabled students and doctors throughout their medical education and training. The MSC guides use the principles from Welcomed and valued and apply them to selection.

NHS Employers

[Making NHS organisations more accessible environments](#)

As part of Deaf Awareness Week 2-8 May, Carol McIndoe shares tips for making NHS environments more accessible for both disabled staff and patients.

NHS England

[Workforce Disability Equality Standard: 2021 data analysis report for NHS trusts and foundation trusts](#)

This Workforce Disability Equality Standard (WDES) annual report is the third since the launch of the WDES in 2019. It is based on analysis of data collected from NHS trusts and foundation trusts in 2021. It provides a summary of the 2021 national data analysis and presents key findings and recommendations for continued improvement. The WDES metrics data analysis highlights the collective experiences of Disabled NHS staff, and provides a tool for local trusts to work with Disabled staff to examine and benchmark their own data, using the evidence as a springboard for action. The data in this report shows that there has been some progress over the last three years of the WDES, but it also shines a light on areas where disparities between Disabled and non-disabled staff continue to exist.

NHS Project Futures

[Neurodiverse people need better access to apprenticeships](#)

Mark Capper, Mencap's Head of Development: "We have the opportunity to make a very subtle change to an already existing policy that will allow for tens of thousands of people to access apprenticeships. At a time when the UK is suffering significant labour shortages, we urge the Minister for Apprenticeships and Skills to think differently about the requirements needed for people with a learning disability".



People Management

[Two in five disabled workers not receiving reasonable adjustments, research finds](#)

There is value in checking whether anyone needs reasonable adjustments as a standard part of your process – whether this is recruitment, onboarding, or day-to-day management. By asking everyone, we normalise the process and help to remove the stigma, making it easier for disabled colleagues to request what they need. A significant proportion of managers did not feel confident supporting employees with disabilities or health conditions. Only half said their knowledge about supporting disabled employees was from training provided by their organisation.

Royal College of Nursing

[Neurodiversity Guidance for employers, managers, staff and students](#)

Neurodiversity acknowledges that each person's brain is unique. Our brains work and interpret information differently and we all bring individual experience, strengths, and assets to a situation. This guidance has been developed for staff and students who are neurodiverse and for the managers and employers who support them. It is intended for the health and care sector but its overarching principles will be helpful in other settings.

Trainingzone

[How to ensure training is inclusive for neurodiverse learners](#)

Effective training may take into account employees' cultural differences, but what about neurodiversity? Here are some considerations to adapt learning so that everyone benefits.

PRIDE+ (LGBTQ+) Staff Network

More in Common

[Britons and Gender Identity: Navigating common ground and division](#)

An in-depth analysis of the British public's attitudes to gender identity and trans equality. Results find that most people are aware of the issues involved, a quarter know someone who is transgender, and for most the starting points are compassion and common sense. More agree (46%) than disagree (32%) that a trans man is a man and a trans woman is a woman.

NHS Confederation

[What experience do LGBTQ+ people have in the NHS these days?](#)

The NHS Staff Survey highlights the inequalities faced by LGBTQ+ staff and is a measure of how our healthcare system cares for those who care for us.



Women's Staff Network

Alzheimer's Research UK

[The Impact of Dementia on Women](#)

Dementia devastates the lives of everyone it touches, but our analysis shows that women are bearing a disproportionate weight of the impact.

NHS Employers

[Domestic violence](#)

The negative impact of domestic abuse can be huge for staff wellbeing, with large financial costs for employers. Domestic abuse has been around well before the COVID-19 pandemic, although the Office for National Statistics has reported an increase in domestic-violence cases during lockdown and working from home. It is important to have the right precautions in place for staff to feel safe and supported at work.

[Flexible working common myths](#)

Allowing your staff to work flexibly is an important part of creating a modern and appealing employment culture across the NHS. It has been raised by our staff side and employer colleagues that there is a lot of misrepresentation around flexible working within in the NHS, regarding who can and cannot work flexibly. Through engagement with Flex NHS, the NHS Staff Council has identified a range of common flexible working myths and facts that employers in the NHS should share with their people to encourage a more flexible workforce.

NHS England and NHS Improvement

[New flexible working guides for line managers and staff](#)

Two new guides to support line managers and staff work flexibly.



Library and Knowledge Services

Library Services

Would you like to keep up to date with the latest evidence on topics of your choice? Sign up for a current awareness alert: <https://www.nhslincslibrary.uk/knowledgeshare-request/>

Can't find the information you need? We can do literature searches for you:

<https://www.nhslincslibrary.uk/page/search-request/>

We can provide training on how to search healthcare databases and resources as well as showing you how to appraise the information that you find:

<https://www.nhslincslibrary.uk/page/training/>

Online Resources

BMJ Best Practice is a clinical decision support tool that provides step-by-step guidance on diagnosis, prognosis, treatment and prevention of a wide variety of conditions:

<https://bestpractice.bmj.com/oafed>

ClinicalKey is a database which supports healthcare professionals by providing access to the latest evidence across specialties: <https://www.clinicalkey.com/>