

# Promoting equality and valuing diversity

## Our equality statement



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## **1. Introduction**

- 1.1 NHS Gloucestershire Integrated Care Board (NHS Gloucestershire) is responsible for planning and buying services to meet the health needs of local people. It also brings partners together to ensure the county's NHS provides the best possible care. Alongside our communities, we want to improve health, improve access to high quality care and support when needed and make Gloucestershire a better place for the future.
- 1.2 Our vision<sup>1</sup> of "Making Gloucestershire the healthiest place to live and work – championing equity in life chances and the best health and care outcomes for all" is underpinned by three strategic priorities, or 'pillars':
- Making Gloucestershire a better place for the future;
  - Transforming what we do;
  - Improving health and care services today
- 1.3 Our Constitution includes a commitment to "tackling inequalities in outcomes, experience and access" and sets out how we will fulfil our statutory duties under the Public Sector Equality Duty.
- 1.4 This Statement sets out the expectation that all NHS Gloucestershire staff will take responsibility for promoting equality; commissioning accessible services that respond to the diverse needs of communities in Gloucestershire. The Statement also establishes our commitment as an employer; celebrating the diversity of our workforce and ensuring staff feel they work in an environment that is fair, open and free from discrimination.
- 1.5 In the context of this Statement, the following definitions apply:
- Equality is ensuring individuals, or groups of individuals, are treated fairly and provided with equity of access to services and opportunity to participate.
  - Diversity aims to recognise, respect and value people's differences, creating an environment or culture where everyone can participate and thrive.

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<sup>1</sup> NHS Gloucestershire's Vision & Values - <https://www.nhsglos.nhs.uk/about-us/who-we-are-and-what-we-do/our-visions-and-values/>

- Inclusion means ensuring that everybody has a voice and a means to participate, which may involve making reasonable adjustments to our usual processes.
- Health inequalities are differences in health status, access to care, treatment and outcomes between individuals and across populations that are systematic, avoidable, predictable and unjust.

- 1.6 The NHS Gloucestershire Board is responsible for overseeing equality and diversity compliance within NHS Gloucestershire and throughout its work. We are currently reviewing the governance arrangements in place to provide the Board with the assurances it needs to discharge these responsibilities. One proposal is the establishment of an Equality and Health Inequalities Oversight Group<sup>2</sup> which could be accountable to the Quality Committee.
- 1.7 NHS Gloucestershire is committed to upholding the NHS Constitution and, specifically in relation to equality, diversity and human rights, the principle which requires us to provide “a comprehensive service, available to all irrespective of gender, race, disability, age, sexual orientation, religion or belief, gender reassignment, pregnancy and maternity or marital or civil partnership status”.
- 1.8 We recognise that Gloucestershire has a diverse population and that individuals may have multiple identities which can cut across more than one protected characteristic; e.g. we all have an age and a racial identity. Some of our characteristics may change over the course of our lives, e.g. we may acquire a disability, some of us may change our religion.
- 1.9 In light of this, NHS Gloucestershire is committed to understanding the needs of our diverse community and our aim is to treat everyone as an individual, with dignity and respect, in accordance with their human rights.

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<sup>2</sup> Further information on the role of this group is included in Section 9: Monitoring and Evaluation. The Terms of Reference are available at [How-we-meet-our-duties/equality-and-diversity/](#)

## **2. Public Sector Equality Duty**

- 2.1 The Public Sector Equality Duty (PSED) requires authorities, in the exercise of their functions, to have due regard to the need to:
- eliminate unlawful discrimination, harassment, victimisation and any other unlawful conduct prohibited by the act;
  - advance equality of opportunity between people who share and people who do not share a relevant protected characteristic;
  - foster good relations between people who share and people who do not share a relevant protected characteristic.
- 2.2 There is no standard legal definition of 'due regard', but NHS Gloucestershire needs to ensure that the organisation is aware of the requirements of the PSED and is putting this knowledge into practice. In doing so, we will strive to:
- remove or reduce the disadvantage people face because of their protected characteristics;
  - meet the health needs of people with different protected characteristics;
  - encourage people with different protected characteristics to participate fully in their own health care and the work of the ICB, ensuring that we hear from people who have been under-represented.
- 2.3 We will take action to reduce prejudice and increase understanding between different groups of people living across Gloucestershire.
- 2.4 In addition, NHS Gloucestershire will publish accessible information which demonstrates our compliance with the PSED general duty. We will publish equality objectives, information about the protected characteristics of people accessing health and care services in Gloucestershire and equality data about our employees, including gender pay gap information.

### **3. Equality Objectives**

- 3.1 This Statement sets out how we will ensure that promoting equality and valuing diversity is embedded in the planning, commissioning and delivery of local health services. It also recognises our commitment to, and legal obligations under, the Equality Act 2010 and Public Sector Equality Duty; Health and Social Care Act 2022; Human Rights Act 1998 and the FREDA<sup>3</sup> principles; Convention on the Rights of the Child; NHS Constitution and NHS Workforce Equality Standard (a synopsis and references for further reading on each of these is included in Appendix 2).
- 3.2 We are keen to build upon the work that is already underway across our Integrated Care System. Following its establishment in 2022, NHS Gloucestershire has adopted a set of high-level Equality Objectives. These have since been refined to ensure that they are specific and measurable:
- To develop an Equality Statement and robust action plan for promoting equality, diversity and inclusion, which sets out clear objectives which ensure good practice across our organisation and link to wider health inequalities work that is being undertaken in our Integrated Care System.
  - Build a detailed understanding of our population and their health needs, through published data sets, improvements in the quality of our data recording and robust use of Equality and Engagement Impact Assessments.
  - To reduce the percentage of staff experiencing discrimination at work from a manager/team leader or other colleagues in the last 12 months by at least 2% per annum over the next 3 years.
- 3.7 An action plan, included as Appendix 1, sets out specific and measurable ways NHS Gloucestershire will ensure that these objectives are met.
- 3.8 This Statement links to other strategies and plans which, when combined, fully document how we will work in partnership to achieve our vision for Gloucestershire.

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<sup>3</sup> FREDA - There are five principles of human rights which are: fairness, respect, equality, dignity and autonomy, called the FREDA principles, which also form part of the NHS Constitution.

#### **4. Working with People and Communities**

- 4.1 Our [Working with people and communities Strategy](#) sets out our principles, how we will work, and the mechanisms in place to ensure we are putting the people and communities of Gloucestershire at the heart of everything we do. The strategy outlines how we will ensure we meet NHS Gloucestershire's duty to involve people and communities in our work.
- 4.2 The strategy sets out the approach we will take towards:
- Involving people and communities (governance)
  - Involving you
  - Working with people and communities to tackle inequalities
  - Working with Healthwatch Gloucestershire and with voluntary and community organisations and groups
  - Communicating with you
- 4.3 In Gloucestershire we honour and respect the diversity of our communities. It is important to us that we listen, respond, and make every effort to involve individuals from all protected characteristic groups for example young people, old people, people from black and other ethnic minorities and lesbian, gay, bisexual, transgender, and questioning (LGBTQ+) groups.
- 4.4 Involving people and communities often referred to as 'seldom-heard' so we can understand and reduce barriers and identify opportunities to enhance access, experience and outcomes, supports our ICS priority to reduce health inequalities.
- 4.5 We will design and target involvement at a locality level via local community leaders and influencers; making the most of our collective community channels, especially the valuable skills and networks of the voluntary, community and social enterprise sector and Healthwatch Gloucestershire.



## 5. Joint Forward Plan

- 5.1 Our [Joint Forward Plan 2023-2028](#) sets out how health and care organisations in Gloucestershire aim to deliver and improve services to meet the needs of people in our county. It incorporates ten Strategic objectives, together with more detailed short-term operational plans. This includes work to ensure that we improve equity of access, experience and outcomes across health and care.
- 5.2 We have adopted an integrated and holistic approach to understanding the health care needs of Gloucestershire's population, commissioning services to meet these needs. We have developed a strong clinical and multi-professional focus with significant involvement of patients, carers, staff and the public in all our work. Health outcomes and patient experience are therefore key considerations in all our commissioning decisions.
- 5.3 Reducing health inequalities is viewed as a key factor in all our decision-making, with particular regard to the nine protected characteristics as outlined in the Equality Act 2010: age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion or belief; sex and sexual orientation. Our aim is to include equalities considerations as an integral part of commissioning business and not as an after-thought. Whilst we have developed our approach to assessing how different groups experience and access care, we know we have much more to do to develop our capability.
- 5.4 Our One Gloucestershire Integrated Care System brings together NHS, social care, public health and other public, voluntary and community sector organisations. We know that by working together we can build a healthier Gloucestershire; supporting people to live well and providing high-quality joined-up care when needed. The [Integrated Care System Strategy 2022](#) and [Health and Wellbeing Strategy](#)<sup>4</sup> will underpin our service development and design. We also use other population health data to understand who is accessing care.

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<sup>4</sup> Gloucestershire Health & Wellbeing Strategy 2020-2030 focuses on those areas where a collective, system wide approach can help to improve the health and wellbeing of our population.

- 5.5 Our commissioning continues to be informed by the [Joint Strategic Needs Assessment<sup>5</sup>](#) (JSNA) for Gloucestershire and other relevant research and policy.
- 5.6 The ICB has adopted a Clinical Programme approach to developing and improving health and care services across Gloucestershire. This approach brings together:
- clinical input from across primary, community and secondary care;
  - information and statistics from local needs assessments;
  - insight from patient experience and engagement;
  - and service specific /financial data

to provide a clear picture of the current situation and projections of future need, ensuring that we develop, deliver and maintain robust health care services.

- 5.7 An Equality and Engagement Impact Assessment (EEIA) is undertaken to assess the impact of service review, design and delivery and ensure our services are non-discriminatory. The EEIA also identifies particular communities who may be disadvantaged by any proposals for change and allows us to target our engagement activity, support and information to help mitigate against this risk. Our governance arrangements ensure that an EEIA is integral to our service review and project management procedures.
- 5.8 We work with provider organisations to ensure that access to health services is equitable across Gloucestershire. Contracting arrangements enable us to ensure that, as a health community, we are working together to reduce health inequalities in the county.
- 5.9 We work with voluntary and community sector (VCS) organisations, in particular network organisations such as the VCS Alliance and Healthwatch Gloucestershire, to ensure that the assets and diversity of our communities informs local developments in services.

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<sup>5</sup> The Joint Strategic Needs Assessment (JSNA) is a strategic planning tool which brings together the latest information on the health and wellbeing of people who live in Gloucestershire and who use public services.

## **6. Health Inequalities**

- 6.1 Health inequalities are systematic, unfair, and avoidable differences in health across the population, and between different groups within society. Tackling inequalities in outcomes, experience and access is one of the four key purposes of Integrated Care Systems, and as such it is essential that we have a good understanding of our local population, identifying those groups at risk of poor access, experience or outcomes and delivering targeted action to reduce these risks.
- 6.2 Our [Gloucestershire Health Inequalities Information Review 2023-24](#) is our first annual report of health inequalities, enabling us to monitor progress against metrics by deprivation and ethnicity, in line with the [NHS England Statement on Health Inequalities](#). Work is ongoing to develop ways to monitor variation in uptake of services and identify progress in reducing inequalities in healthy life expectancy.
- 6.3 The Review highlights inequity in:
- the disproportionate detention of people from ethnic minorities under MH Act
  - disparities in maternity care, cardiovascular disease, support with diabetes and smoking cessation for people from ethnic minority communities.
- 6.4 It references targeted interventions to address these inequities, improving health and removing barriers to accessing health care, but recognises that in some of our data sets a significant amount of demographic data is not stated, unknown, or missing. Our long-term ambition is to improve our data quality and completeness, routinely present analysis by ethnicity and deprivation, as well as aim to consider wider protected characteristics and vulnerable groups.

## **7. Digital Inclusion**

- 7.1 We recognise that the better use of digital technologies and data provides significant opportunities for transforming health and care. We are working with ICS partners to develop a digital strategy which sets out our priorities and commitment to embracing the latest technologies.

- 7.2 In the interim, work continues to ensure that we support people in our communities to access digital technologies to support their health and wellbeing. In collaboration with voluntary sector partners, we aim to improve the take up of digital service and reduce digital exclusion.

## **8. Equality in our workforce – People Strategy**

- 8.1 The [One Gloucestershire People Strategy](#) was approved in November 2023 and has a foundation theme of equality, diversity and inclusion, which means it is an underpinning theme for a number of our strategic priorities and programme of work.
- 8.2 The ICB has over 400 employees and each year we set out our performance against areas such as the Workforce Race Equality Standards, the Workforce Disability Standards and gender pay gap. Information regarding our workforce is included on the [Workforce Equality](#) section of the ICB website.

## **9. Monitoring and Evaluation**

- 9.1 The Quality Committee is responsible for overseeing equality and diversity compliance across the system and throughout its work. We are currently reviewing our governance arrangements so as to provide the Board and its committees with the assurances they need to discharge these responsibilities. We are considering establishing an Equality and Health Inequalities Oversight Group to support this.
- 9.2 The purpose of the Equality and Health Inequalities Oversight Group could be to ensure that the ICB is meeting its strategic objectives regarding avoidable health inequalities, diversity, human rights, and equality of access, opportunity and voice. This would be done by actively promoting equality and supporting partnership working to reduce health inequalities across Gloucestershire.
- 9.3 NHS Gloucestershire ICB will ensure that the equality performance of all providers is monitored alongside overall contract management. This will include implementation of contractual and legislative requirements such as EDS, WRES and the Accessible Information Standard.

- 9.4 Our monitoring and evaluation work of both ICBs equality performance, and that of our providers, will be informed by engagement with our local communities. Implementation of EDS will play an integral part in this work.
- 9.5 The ICB Annual Report is one of the ways we demonstrate how we fulfil our obligations under the Public Sector Equality Duty (PSED). This includes examples of good practice from across Gloucestershire.

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## Appendices

**Appendix 1: Equality Action Plan**

**Appendix 2: Our legal obligations in relation to Equality, Diversity and Human Rights**

**Appendix 3: The NHS Equality Delivery System (EDS)**

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