Equality, Diversity, Inclusion and Human Rights Skills: General Awareness

Mandatory and Statutory Training (MaST)
Mandatory and Statutory Training is an essential part of how we fulfil our commitment to patients and the public, as well as complying with our legal responsibilities. All staff, including Off Payroll Workers, are obliged to complete the modules on ESR.

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Please note: Some links in this pack may be directed to the NHS England SharePoint, due to this you may not have access if you are a CSU, Trust or external member.

Completing the assessment – Once you have completed the module using the accessible offline version, in the first instance you can continue to complete the multiple-choice assessment online. If you are experiencing difficulties with the online assessment, you can complete the assessment by using the accessible offline version. If you are completing the assessment offline, then you would need to contact our helpdesk at contacthrandod@england.nhs.uk indicating the course name and date of completion in order to have your records updated. If you would like further assistance, please contact our helpdesk at contacthrandod@england.nhs.uk

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Link and template reference:

Voicing your concerns

- [Respect at Work Policy and Anti-Bullying and Harassment Policy](#)
- [Voicing Your Concerns for Staff (Whistleblowing Policy)](#)
- [Staff network groups](#)
- [Employee Assistance Programme (EAP)](#)
- [Trade union representatives](#)
- [local HR and OD Business Partner teams](#)
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Feel empowered and resilient

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Instructions

Welcome to our mandatory training e-learning course on Equality, Diversity, Inclusion and Human Rights: General Awareness. This course has been updated in collaboration between NHS England colleagues and colleagues from legacy Health Education England and NHS Digital.

Learning Outcomes

The business case for good Equality, Diversity and Inclusion (EDI) practice in the workplace is compelling. Employing and engaging with people who have a range of different backgrounds, experiences and ideas increases creativity and leads to better problems solving and decision-making. We recognise that a diverse, equitable, inclusive culture means a more productive, creative and innovative workforce which is fundamental to supporting the NHS.

The aim of this training is to:
- Explain what we mean by equality, diversity, inclusion and human rights and why they are important
- Explain how policies and the law can help us create a more inclusive workplace
- Explain what we mean by 'health inequalities' and how they can be reduced
- Explain why we need to know about people's different backgrounds and why it is important not to make assumptions about individuals
- Describe what you can do to challenge prejudice and discrimination

If you wish to discuss any of the content in this module, for example inclusion of representation of identities, then please contact england.odhelpdesk@nhs.net

We are committed to 'high quality care for all, now and for future generations.' Alongside this values based commitment, sit our legal duties to advance equality, diversity and inclusion as required by the equality act 2010.

We want to ensure that all individuals that work for us are treated fairly and with respect, irrespective of age, disability, gender confirmation/Reassignment, marriage or civil partnership, maternity and pregnancy, race/ethnicity, religion or belief, sex and sexual orientation. At NHS England Equality, Diversity and Inclusion are not just words, they are principles that are fundamental to our vision such as.

If we value and promote equality and diversity during the course of our work, we will recognise the strengths of differences between individuals. We believe this will bring great advantage to the workforce, the wider NHS and the population we serve, and in doing so:

- Promote equality of opportunity to attract, motivate and retain staff
- We can help to remove barriers and improve patient care
- Human rights refer to the basic rights and freedom that belong to every person in the world.

- Ensure resources are targeted effectively to deliver the services that patients need.
- Increase flexibility and the ability to respond to different needs
- Inclusion means a culture where everyone respects and accepts differences, and everyone can feel valued for their contributions and be themselves at work, without needing to hide aspects of their identity out of fear. A safe and inclusive culture enhances the way we all work.
- Enable a workforce that represents the diverse community of England and is better able to understand the needs of patients and their communities

Everyone Counts:

"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 for England 26 March 2013.

As a significant commissioner of NHS services in England, we believe our workforce should reflect the diversity of the wider population in order that we can better understand the population we serve and commission services accordingly.

'Everyone counts' is a core value.

We want to create and maintain an inclusive and supportive environment, which respects and values the right to be different, that is free from discrimination and in which opportunities are open to everyone. It is this core value that links with and recognises our commitment to achieving our equality and diversity aims:

Although sometimes used interchangeably, the terms 'equality' and 'diversity' are not the same.

Definition of Equality

Equality recognises that:
- Inequality exists and that discrimination needs to be tackled
- Employment and services should be accessible to all
- Everyone should be treated fairly
- Everyone has individual needs and the right to have those needs respected.

Equality is about 'creating a fairer society, where everyone can participate and has the opportunity to fulfil their potential' (DoH, 2004). By eliminating prejudice and discrimination, the NHS can deliver services that are personal, fair and diverse and a society that is healthier and happier.   For the NHS this means making it more accountable to the patients it serves and tackling

discrimination in the workplace. (DoH 2011). **Equality is about fair treatment**.
Diversity recognises that:

- Everybody is different
- We need to understand, value, and respect those differences

Diversity literally means difference. When it is used as a contrast or addition to equality, it is about recognising individual as well as group differences, treating people as individuals, and placing positive value on diversity in the community and in the workforce.

Employers and services have ignored certain differences such as background, personality and work style. However, individual and group diversity needs to be considered in order to ensure that everybody's needs and requirements are understood and responded to. This is particularly true within employment practice and service design and delivery. These approaches recognise that in order to provide accessible services, and to ensure we promote inclusive working environments, then organisations need to respond differently to both individuals and to groups.

Diversity is about respecting difference.

There is no single way of treating people. Equity recognises that each person has different circumstances and allocates the exact resources and opportunities needed to reach an equal outcome.

- Everyone has their own personal needs, values, and beliefs.

- It means that a "one size fits all" approach to services, employees, patients / service users will exclude some and so won't work.

- We have to be flexible and creative in the way that we provide employment opportunities and services.

- We have to be prepared to adapt what we do to be an inclusive employer and commissioner.

Language and Banter
The language we use at work can make a real difference to how safe and welcome people feel. What one person may consider as harmless banter could exclude and marginalise another. Here are some tips from our diversity staff networks:

- Check assumptions about the diversity of our staff identities, including culture, faith and abilities.
- If you are unsure how someone identifies, then use neutral language. Use the term a person uses to describe themselves (like 'he' or 'she' or 'they'). Be mindful that some people don't like pronouns being mentioned.

- Ensure you ask how to pronounce a name correctly and consider adding pronunciation tips in your email signature.
- When people have changed their name as part of their gender transition, do not refer to them by their previous name - this is known as 'deadnaming' and can devalue their transition.
- There are lots of other ways that people might describe their own families, partners, sexuality, feelings, or relationships.

Here are some top tips to challenge inappropriate banter from our It's Not Banter If... campaign, created by our LGBT+ Staff Network:

- Know what humour is acceptable.
- Don't encourage harmful, unfunny banter.
- Don't be a passive bystander- challenge inappropriate comments if it is safe to do so.
- Avoid using ableist words and phrases.
- Keep a professional tone and don't let bullying banter become normal.

Voicing Your Concerns

Bullying and harassment have no place in the NHS. The NHS Constitution provides the framework for the principles and values of the NHS in England. The NHS People Plan reminds us to ensure that staff must feel valued, supported and empowered to carry out their work. Therefore, we must address levels of bullying and create compassionate and inclusive cultures to better support the staff health and wellbeing, staff engagement and ultimately patient care.

If you witness bullying, harassment, or discrimination it is important to respectfully challenge it in the moment, if it is safe to do so. It is important to actively support colleagues by offering compassion and space to be themselves and being a voice of reason and allyship when fear and hate come to the surface.

On the next page are further resources to support you with voicing your concerns.

We'll look at other case studies later in this module and whilst education, openness and acceptance are the ultimate answer there are several routes available to get support and report any bullying, discrimination, or harassment incidents.

In many circumstances, the easiest way to get your concerns resolved will be to speak to your line manager. If this does not resolve matters, you can get support from the below resources:

- You can access the Respect at Work Policy and Anti-Bullying and Harassment Policy which outlines the expected behaviours of all employees
- You can access the Voicing Your Concerns for Staff (Whistleblowing Policy) to find out how to seek support and report concerns
- You can contact colleagues within the staff network groups or your diversity and inclusion team
- You can access our Employee Assistance Programme (EAP) which provides free, confidential support services 24 hours a day 7 days a week
- You can contact trade union representatives in your area

- You can contact your [local HR and OD Business Partner teams](#) and other areas of HR support

Finally, we recommend looking at the educational resources available on [our learning platform](#) that includes "15 to 1" a series of informative videos to build awareness around Equality, Diversity and Inclusion as well as information about upcoming workshops and webinars.

Case Studies

In this section, you'll work through case studies to show that Equality & Diversity issues are not always obvious.

Case Study 1: Computer Superstar

You work in an open plan office and notice some people loudly joking around. You hear one say to a younger colleague "Here he is, our computer superstar! Saw the photos of your marathon run on Twitter, loved those shorts! You got any more pictures like that for us gorgeous?"

You notice that the young man tries to pass it off as meaningless banter, but looks uncomfortable...

You've noticed this type of behaviour before from the same group and on occasions it has been much more direct.

What do you think, is this an example of discrimination?

If your answer is yes then you are correct, this could be deemed as discrimination. The conversation, as well as being potentially damaging to the individual, is a form of bullying. It's worth noting that equality is not just about the rights of women in the workplace - equality means being treated equally for everyone and not just one specific group.

If you witness or learn about inappropriate behaviour or bullying and harassment, there are several options to raise your concerns:

- Talk to a Respect at Work Contact
- Talk to your line manager about the Respect at Work and Anti-Bullying and Harassment Policy
- Talk to your Trade Union
- Discuss the issue in confidence with one of our Staff Networks
- Seek advice from HR

This applies to all protected characteristics.

Case Study 2: Community Nurse Prayers

A community nurse carries out home visits. After treating a female patient, and shortly before she left, she had asked the patient if she would like a prayer said for her. The patient politely declined and the nurse said that she had only offered

to pray for her because "I was concerned about her welfare and wanted her to get better."

What do you think? Was it OK for her to offer to pray?

If think the answer is no, you are correct. The statement from the Trust stated that the community nurse showed a failing to demonstrate a "personal and professional commitment to equality and diversity". Their statement also said "we are keenly aware of the importance of an individual's spiritual belief, and we recognise that the nurse felt that she was acting in the best interests of her patients. It is acceptable to offer spiritual support as part of care when the patient asks for it, however, for nurses whose principal role is giving nursing care the initiative lies with the patient and not with the nurse." This is based on a real case study involving a community nurse working for an NHS employer.

Case Study 3: Maternity Leave promotion

Hannah is a project manager and currently enjoying maternity leave following the birth of her second child and is due to return to work at the end of January. During a 'keeping in touch' day she is made aware of a 12 month secondment opportunity at a higher grade within the same team.

Hannah calls her manager and is pleased to hear that she has both the skills and experience necessary to apply.

During the call Hannah asks when the secondment is expected to start and is informed that the secondment is to commence at the beginning of January. Hannah then states that she is not due back from mat leave until the end of January and asks if the start date is flexible?

Her manager advises that they need someone in January and therefore Hannah isn't eligible to apply. Her manager also adds that perhaps that isn't a bad thing as the secondment would be a step up for Hannah in terms of responsibility and she would likely find it too much to cope with alongside her new family.

Is this response acceptable?
If you think the answer is no you are correct. Sarah's response was not acceptable. Hannah has been denied the opportunity to apply for a promotional secondment because she is on maternity leave. It is also highly inappropriate for her manager to suggest that Hannah is unlikely to be able to cope with the secondment and her new family. 'Maternity and Paternity' is one of the 9 protected characteristic under the Equality Act 2010. In this scenario Hannah has been directly discriminated against on the grounds of 'Maternity' as she is on statutory maternity leave. Reasonable consideration should have been given to the potential of negotiating a revised return to work date for Hannah or to deferring the secondment start date by a few weeks, rather than an automatic refusal. Also think about whether the comment about the young family would have been said to a new father?

Case Study 4: Homophobic Colleague

In a one-to-one meeting a colleague expresses a concern to you. They have recently shared that they are a lesbian to another member of the team who they have always got on well with. Their colleague was surprised and stated that they have a strong moral objection to lesbians and gay men. They recognised the need to treat others with respect regardless of their sexuality, so while they felt it was not acceptable to be a lesbian, they nevertheless wanted to maintain a positive relationship with their colleague. They requested that the lesbian colleague should help in this by not referring greatly to their sexuality again.

What do you think? Was this person's response acceptable?

If you think the answer is no, you are correct. We always want to respect the values and perspective of others. However, in this context there are certain 'non-negotiables' we need to consider. Employees are required to treat all people with dignity and respect. This includes and extends to colleagues, visitors, and patients, regardless of any aspect of their identity. It is not acceptable under any circumstances to discriminate on any aspect of identity including sexual orientation. Refusing to acknowledge their colleague's sexual orientation could be considered discriminatory. The Equality Act 2010 prevents an individual directly treating someone less favourably on the grounds of their sexual orientation. The organisation has a zero-tolerance approach to discrimination, bullying and harassment. For more information see the Respect at Work policy and Anti Bullying and Harassment Policy. A proven case of harassment or discrimination would likely be considered as gross misconduct and/or lead to dismissal under the disciplinary policy and procedure.

Case Study 5: Transphobic Colleague

David has recently joined your team. During his induction, David confidentially disclosed to his immediate line manager that, although he was assigned as a girl at birth, he identifies as a man. David and his line manager look at our organisation's Trans Equality Policy together. David makes a decision to use the male toilet facilities while at work, supported by his manager.

Yesterday, David visited the male toilet nearest to his workstation and – whilst at the sink washing his hands – recognised and said hello to Simon (a colleague based in his wider department).

When Simon returned to his desk, he asked for a meeting with his own line manager, where he stated that it was unacceptable for David to be using the male toilets, given that he was born a female. Simon also stated that he refused to use the male toilets at the same time as David. Simon suggested that, as a compromise, David should be asked to use the disabled toilet located on the same floor.

What do you think? Is Simon's suggestion acceptable?

If you think the answer is no, you are correct. Simon's suggestion was not acceptable. David is entitled to use the toilets of the gender that he identifies with

and suggesting that he should use the disabled accessible toilet under these circumstances is an example of illegal harassment because it creates a hostile and potentially unsafe environment for David.

In this scenario, the line manager should clarify this to Simon. If Simon continues to insist that David is wrong to use the male facility, the line manager should address this as a harassment issue in line with the Respect at Work and Anti-Bullying and Harassment Policy.

In some offices, gender neutral and accessible toilet options are available, which anyone is welcome to use. However, it is always an individual's choice to use whichever facilities match how they identify.

Bullying and harassment
If a colleague reported an incidence of bullying, harassment or discrimination to you, or you saw an incident yourself, what action would you take to ensure you dealt with the issue in a sensitive manner and also followed NHS England approach?

How to raise an issue with confidence
The 'Cup of Coffee' conversation- one of the best tools for managing potential conflict- confront the behaviours early on, focus on learning, not blame. Useful tips:
- Pick a neutral private location, office or virtual team call and ask to share an observation.
- Be prepared the receiver might not agree, like the feedback or react in a way you would prefer.
- Keep it short, but don't rush it, you're just giving the receiver the 'heads up' that the behaviour has been noticed and close the conversation.
- Feedback in a constructive, non-confrontational and non-judgemental way and thank to receiver for their time.

Feel empowered and resilient

If you experience unwanted behaviours, you may feel fearful, and this is natural. Here are some useful tips to help you feel confident to deal with the situation:

- **Work on your own reactions** - this way you can feel empowered. If you change your reactions to the person, then you can change the reality as you see it. Take positive steps and actions, practice self belief and prepare yourself to feel empowered.

- **Become resourceful -** on challenging unwanted behaviour. Find out more on how to have confident conversations, be assertive and become resilient.

- **Keep on track-** remain tolerant, respectful, and kind when you experience incivility at work it's easy to fall into the trap of engaging in uncivil behaviours as well.

- **Ask for support-** Ask a peer, colleague, or HR advice on how to handle informal resolutions or whether a formal resolution is more appropriate.

You can also speak to your line manager, your line manager's manager or a Director in the first instance to discuss. If you prefer you can speak to someone in HR instead. Another option is a trade union representative or peer support via staff networks. You can also contact your Freedom to Speak up Guardian.

The Equality Act 2010

It is important to have a general understanding of the legal framework regarding equality, and that you can relate this framework to your everyday role.

The UK framework has two elements to it: the anti-discriminatory framework (which gives individuals a route to raise complaints of discrimination around employment and service delivery) and the public duties (which place a proactive duty on organisations to address institutional discrimination). These principles are embedded within the Equality Act 2010.

Thinking back to the start of the module, we talked about how Equality and Diversity was not a "one size fits all" approach and whilst it's important not to put people into boxes, the law - through the Equality Act - does say that we have to look at equality in terms of certain headings or 'protected characteristics'. There are nine of these protected characteristics that we'll look at in turn on the next page.

Protected Characteristics

There are nine protected characteristics.

Age

Age discrimination can affect anyone, old or young. The Equality Act protects people of all ages.

Disability

A person has a disability if they have a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities.

The Act puts a duty on the employer to make reasonable adjustments for people to help them overcome disadvantage resulting from an impairment (for example, by providing assistive technologies to help visually impaired staff use computers effectively).

Gender Confirmation/Reassignment

The Equality Act (2010) refers to 'Gender Reassignment' as one of the protected characteristics under the law, so you will see this when looking online or at references to the act. We use the terms 'Gender Reassignment' and 'Gender Confirmation' interchangeably.

The law protects people from direct and indirect discrimination and harassment if they are not the same gender as the one they were born as. This includes discrimination by association and discrimination against people perceived to have this protected characteristic.

Marriage and civil partnership

The Act protects people who are married or in a civil partnership against discrimination.

Pregnancy and maternity

People are protected against discrimination on the grounds of pregnancy and maternity during the period of their pregnancy and any statutory maternity leave to which they are entitled. During this period, pregnancy and maternity discrimination cannot be treated as sex discrimination. Breastfeeding is explicitly protected.

Race

For the purposes of the Act `race´ includes colour, nationality and ethnic or national origins.

Religion or belief

Religion includes any religion. It also includes a lack of religion (people are protected if they do not follow a certain religion). Belief includes religious and philosophical beliefs including lack of belief (e.g. Atheism). Generally, a belief

should affect your life choices or the way you live. This characteristic does not include political or scientific beliefs.

Sex
Both men and women are protected under the Act.

Sexual orientation
The Act protects a person's sexual orientation towards:
- persons of the same sex,
- persons of the opposite sex, or
- persons of either sex.

Intersectionality
So far in this module, we've looked at case studies highlighting issues that can arise in different situations and also the protected characteristics from the Equality Act. We've looked at these as separate topics, however, in real life they are never separate, there's always an intersection between at least two of these areas.

The term 'intersectionality' was coined in the late 80's by Kimberle Crenshaw, a law professor and civil rights activist, when describing the overlapping workplace discrimination experienced by Black women. In 2015, the term was included in the Oxford Dictionary to explain how multiple forms of discrimination (gender, race, class etc.) can overlap and combine. In recent years, the term has become more prevalent, especially with the Black Lives Matter movement.

Identifying as belonging to more than one protected group or characteristic means individuals can experience multiple discrimination, especially when a protected characteristic is non-visual. There is a case study on the next page that describes the effect this can have on an individual.

Case Study
My disability is not visual, and neither is my sexual orientation. I'm a gay man with a disability, a gay man who has children and a gay man whose husband is neuro-diverse - I'm also a carer for two elderly relatives. In my case I've developed my disability more recently and I've had to adapt to reduced driving, using speech-to-type software and taking regular breaks.

Increased virtual working means we are quicker to make decisions about people based only on what we see. My experience of discrimination is less blatant than in the earlier years of my career. Assumptions are often made rather than obvious discrimination, but these still do have a negative, if unintentional, impact on me, for example:

"If you're Gay how do you have children?" or recently "What does your wife do" and "You don't look Gay". In previous roles when I experienced "real" homophobia it included being called a "batty-boy" by a patient and of course "queer or poof" by my manager who then justified it saying she didn't understand how people could be gay, and it didn't happen in her country of origin, and she didn't mean to offend me.

People from protected groups talk about weathering - this for me is the constant awareness of my difference as gay man with a disability. I regularly have to "out" myself to justify the adaptions I've made to continue with my job role as well as my sexual orientation. I aim to be a role model and leader for others, giving comfort and assurance to colleagues that it is OK to Be Gay in our organisation and to progress. However, this does have an impact on my self and my wellbeing.

Support for our working carers

There are many of us amongst NHS staff who provide care and support to a family member or friend due to their disability, health condition, frailty, mental health problem, addiction or other health and care need. Whilst 'carer status' is no protected under the Equality Act it is recognised that people with caring responsibilities may need specific support.

Black, Asian and ethnic minority carers are more likely to be struggling financially. At the beginning of the pandemic, over half (58%) of unpaid carers from Black, Asian and minority ethnic groups said they were worried about their finances, compared to 37% of White carers (Carers UK, The Experiences of Black, Asian and minority ethnic carers during the COVID-19 pandemic, 2022). LGBT carers are more likely to more likely to feel lonely. 48% of bisexual carers and 45% of lesbian and gay carers often or always feel lonely, compared with 33% of heterosexual carers (Carers UK, The Experiences of lesbian, gay and bisexual carers during the COVID-19 pandemic, 2022).

NHS England is committed to supporting all working carers. With almost 7 million carers in the UK, carers make a critical contribution not only to loved ones, but to society and the NHS itself. As an organisation, we understand that this is the case and have a number of resources in place to help manage care and work.

NHS England support:
- Colleagues can join the Carers Network
- You can receive complimentary online membership to Employers for Carers.
- Please use the unique Access Code #EFC545 to gain free access to the service. For more information, you can contact the staff network on england.carers@nhs.net.
- Seek further support from the **Employee Assistance Programme**.

If you have any questions about these supportive resources for carers, please email ContactHRandOD@england.nhs.uk

Line manager resources: As a line manager, to help support colleagues who are carers, please use our dynamic conversation framework to discuss their health and wellbeing openly and honestly, as well as making sure they are able to balance their work with their caring responsibilities.

You can also see our Flexibility Working Policy, as this may be helpful for colleagues who are carers to balance their time.

The [Working Carer's Passport](#) is also a helpful resource we'd encourage you to use with your colleagues with caring responsibilities and can be discussed during your dynamic conversations.

Support from charities: [Carers UK](#) provide an expert telephone advice service if you want to talk about caring. Their website also has brilliant online information to help answer your questions.
[Carers Trust](#) can help you find local support services available to you, simply by entering your postcode.

Our resources

Protected characteristic: Belonging to a protected characteristic group does not in itself mean you will experience health inequalities. However, distinct groups are more vulnerable or at risk, particularly in certain circumstances, for example, older people with learning disabilities and cultural and ethnic minority communities or people who are LGBTQIA+.

Socioeconomic deprivation: We know that poverty is the greatest indicator of health inequality and that this can also impact on education, employment, housing and access to services. Protected characteristics groups who live in deprived neighbourhoods are at increased risk or vulnerability of experiencing health inequalities.

Access and discrimination: People with a protected characteristic can often experience discrimination based on their identity, such as their age or sex. Some more than others and especially people from minoritised groups. This may have a negative impact on health and well-being, and access to, and experience of using, health and social care services. This can result in poorer health outcomes and further health inequalities.

Risk of vulnerability: The more sides of the triangle that come into play, the greater the risk or vulnerability to health inequalities.

Public Sector Equality Duty
The public sector equality duty is a duty on public authorities to consider or think about how their policies or decisions affect people who are protected under the Equality Act.

The Public Sector Equality Duty came in to force in April 2011 (s.149 of the Equality Act 2010) and public authorities are now required to have due regard to the need to achieve the objectives set out:
   a. eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;
   b. advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
   c. foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

As we saw in the health inequalities vulnerability triangle, there are lots of factors that lead to health inequalities. Public organisations like the NHS can advance equal opportunities under the Public Sector Equality Duty by gathering and using information. This can help to identify groups that might be disadvantaged. The organisation can then make plans to remove or minimise these disadvantages. This helps to reduce inequalities.

- Social determinants of health
- Anchor institution
- Tackling inequalities

Examples of health inequalities

The following are examples of health inequalities:
- People living in deprivation die younger than people living in better-off neighbourhoods
- People with mental health problems are more likely to be physically ill than other people
- Black women accessing maternity services have mortality rates four times higher
- Evidence shows higher rates of mental health problems amongst lesbian, gay and bisexual (LGB) people, compared with heterosexual people. There is also evidence that discrimination in society contributes to the higher incidence of mental health problems among LGB people
- British people of Asian heritage are less likely to have a good experience when using NHS services than color: black British people.

Influencing multi-agency action to address social determinants of health: The role of integrated care systems (ICSs) working with local authorities and local communities is particularly critical here. Nationally NHS England will continue to work alongside the Government and the Office for Health Improvement and Disparities. We can also forge new international partnerships such as that between the NHS Race and Health Observatory.

The NHS is a significant economic actor in its own right: The choices we make as an employer, a purchaser and a local 'anchor institution' can help moderate inequalities.

Tackling inequalities in healthcare provision: This is our direct responsibility and must be the prime focus of our action. The enduring mission of the NHS is high quality care for all. That means tackling the relative disparities in access to services, patient experience, and healthcare outcomes

The NHS contributes to tackling inequalities in health in three distinct ways.

For more info, please see Our approach to reducing healthcare inequalities.

Questions for reflection
Now it's time to reflect on what you learned using the questions below to check your knowledge and understanding of some of the issues raised in this module. Answers are further below.

Question 1
A young woman, who works in the cleaning department, has transferred to a new team in another part of the building. The new team is all male and you have observed them frequently making jibes about her not being able to do a "man's job". How should you approach this?

1) Set up a meeting with the team to explain that the male staff are behaving inappropriately and contravening the Sex Discrimination Act ☐

2) It is not your place to get involved as this denies the woman in question the opportunity to handle it herself ☐

3) Talk to your manager about the situation, expressing your concerns ☐

4) Get in touch with an external agency such as Acas or Citizens Advice ☐

Question 2
Who is responsible for Equality, Diversity, and Inclusion within NHS England?

1) The Staff Networks ☐

2) Everyone in NHS England has a responsibility ☐

3) The senior management of NHS England ☐

Question 3

You are working as part of a large project team involving members of staff from across the organisation. The project team meets on a fortnightly basis for a full day, and you have been told by the project lead that during these meetings Sharon, a 54-year-old trans employee, is not allowed to use the female bathrooms. What kind of discrimination has been displayed here?

1) Age ☐
2) Sexual Orientation ☐
3) Gender confirmation/Reassignment ☐

Question 4

Abdul works as a call handler in a contact centre. He is employed on a full-time contract and has asked for some flexibility with his work pattern to fit in with his religious commitments. Specifically, Abdul has asked for an extended midday break on a Friday to enable him to attend mosque to perform the congregational prayer. He has offered to work later a Friday to make his hours up. Other members of the team work flexibly to accommodate studies and childcare; however, Abdul's manager has refused his request on the basis that lunch times are busy.

In your opinion, is this a reasonable refusal?

Question 5

The Equality Act states it is against the law to discriminate against someone because of a protected characteristic. Can you fill in the gaps of the 9 protected characteristics below?

Age ☐

Sex ☐

Religion / Belief ☐

Pregnancy / Maternity ☐

Disability ☐

Gender Confirmation/Reassignment ☐

Race ☐

Marriage / Civil Partnerships ☐

Sexual Orientation ☐

Question 6
Discrimination is always intentional.

True or False? _____

Question 7
Prejudice and exclusion is primarily concerned with race.

Question 8
When thinking about gender discrimination, this only applies to women.

True or False? _____

Question 9
Unfair treatment is always the result of discrimination.

True or False? _____

Question 10
Gerry is 63 years old with substantial experience in senior administration roles. He was recently interviewed for an Administrative Assistant position and during his interview was asked how he would cope reporting to a younger manager and taking orders from younger team members.

Gerry was unsuccessful in his application and when he challenged the decision was told that he was too experienced for the position, and that the panel had offered the post to a younger candidate that they felt would be a better team fit.

Has Gerry been a victim of discrimination?

Answers:

Question 1 - The correct answer is 3. Whilst it's important that this issue is raised, a team meeting is not the most appropriate forum. It is also important to note that the legislation underpinning sexual discrimination is the Equality Act 2010. By ignoring even a hint of discriminatory behaviour, your team and individuals within it, could suffer. Low morale, employee conflict, ill health and legal action are all possible consequences of failing to act. Finally, whilst ACAS or Citizen's advice are excellent sources of advice, both organisations will encourage you to talk to your employer first to try and sort out the matter informally to minimise the negative effects on all parties concerned.

 Question 2 - The correct answer is 2. We all have a responsibility for Equality, Diversity, and Inclusion in the workplace**.**

Question 3 - The correct answer is 3. Regardless of whether Sharon has completed a process to have her gender legally recognised, or even if she is under medical supervision, she is still protected by the Equality Act 2010. The action displayed to Sharon in this scenario would be seen as a violation of her dignity and the creation of a degrading and humiliating situation. Gender identity is one's own internal sense of self and their gender, whether that is man, woman, neither or both. Unlike gender expression, gender identity is not outwardly visible to others.

Question 4 - The correct answer is no. This could be unlawful direct discrimination against Abdul because of religion or belief. Abdul could claim less favourable treatment particularly when other members of the team have got flexible arrangements.

Question 5
A g e

S e x

R e l i g i o n / B e l i e f

P a r e n t i n g / M a t e r n i t y

D i s a b i l i t y

G e n d e r C o n f i r m a t i o n

R a c e

M a r r i a g e / C i v i l P a r t n e r s h i p

S e x u a l O r i e n t a t i o n

Question 6
The correct answer is **False.**

Question 7
The correct answer is **False.**

Question 8

The correct answer is **False**. Gender discrimination is when someone is treated unequally or disadvantageously based on their gender but not necessarily in a sexual nature. This includes harassment of discrimination based on sex, gender identity, or gender expression.

Question 9
The correct answer is **False**. Not all unfair treatment is unlawful discrimination under the Equality Act. It's only unlawful discrimination if you're treated differently because of a protected characteristic. It doesn't matter if the person treating you differently didn't mean to discriminate against you or if they didn't know they were discriminating. If someone treats you differently because of a protected characteristic, it's direct discrimination.

Question 10
The correct answer is **Yes**. The Equality Act 2010 makes it unlawful to discriminate against employees, jobseekers and trainees because of their age. This poorly conducted interview has left the candidate with an unfavourable impression of the organisation that they are likely to share. Whilst Gerry was not advised directly that he wasn't appointed due to his age, this experience in terms of the question asked and interview feedback would suggest that his age had a part to play in the panel decision making.

Summary
Avoid using inappropriate and disrespectful language relating to social identity or social situations

Recognise that your own social identity may impact on others in different ways

Avoid stereotyping or making assumptions based on social identity

Try to increase our knowledge and understanding of aspects of social identity that may be different from our own

Respect all regardless of their protected characteristic or social situation

Understand that treating people fairly does not mean treating people in the same way – we need to recognise difference and respond appropriately

Recognise that we need to treat everyone as individuals and respond to them, and their social identity, in an individual manner

To ensure that we value diversity and consider the individual's identity appropriately in your work, the following principles may be useful. **Social identity** refers to the ways that people's self-concepts are based on their membership in social groups. Examples include religions, nationalities, occupations, sexual orientation, ethnic groups, and gender.

Promoting equality, diversity and inclusion are at the heart of the values of NHS England and NHS Improvement – ensuring that everyone counts. The organisation exercises fairness in all that it does and that no community or group is left behind in the improvements that will be made to health outcomes across the country.

The aim of this training was to highlight how equality and diversity issues are all around us, be aware of when and how they occur and signpost you to some sources of help which are show opposite.

A question to leave you with is...

"If a colleague reported an incidence of discrimination to you, or you saw an incident yourself, what action would you take to ensure you dealt with the issue in a sensitive manner and also followed NHS England's approach?"

Staff Networks

There are [several diverse staff networks](#) that staff can join to access peer support to staff. These networks also work with our internal teams to influence corporate policy development.

Reasonable adjustments

Our organisation has a legal duty to provide reasonable adjustments for staff with a disability or disabilities, within the meaning of the [Equality Act 2010](#). We are fully committed to supporting all staff with a disability or long-term health condition to identify and implement the reasonable adjustments we need to carry out our roles. The organisation subscribes to the social model of disability. This means we have a collective commitment to removing barriers and providing appropriate support when the need becomes apparent.

Our Reasonable Adjustments request form is live in our [Service Now portal.](#) This is a single sign on application and can be accessed by entering your Microsoft Office365 email address ending @england.nhs.uk and associated password.

For a Reasonable Adjustment request linked to a Disability or Long Term Health Condition, please ask your manager to complete our [Reasonable Adjustments and Accessibility Request Form- Service Now Portal](#) and we will be in touch to discuss and progress your request.

Support for all colleagues

All our policies are available to support all colleagues and their line managers. For more information, please visit our [dedicated 'Policies One Stop Shop' page on the Hub.](#)

Links to our Staff Networks
[Our Staff networks](#)

Our Policies and Procedures
[Policies 'one stop shop'](#)

Other Useful Links
[Equality human rights](#)
[Discrimination your rights, types of discrimination](#)
[Equality Act 2010 guide for employers](#)

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