



**North East and  
North Cumbria**

# **Developing the right approach to Equity, Diversity and Inclusion...**

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**A one year interim ICB EDI strategy 2023-2024**

# Current context and background...

- This document explains the current context of statutory responsibilities for the ICB, the staff demographics with a small snapshot of background EDI and data, for our patients and workforce in the NENC ICB and the wider NENC ICS.
- This builds a compelling narrative to why we need to deliver against our EDI objectives, to retain and develop our workforce, to attract the best and brightest talent into the Health and Social Care sector and to build a more representative workforce at all levels and in all professions, in line with our local working age population.
- We have a legal duty to deliver on various statutory duties including the Equality Act, Public Sector Equality Duty, and Health and Care Act, to reduce Health Inequalities.

# Underpinning legislation...

Health and Care Act 2022, specifies that ICBs have a general duty to:

**Reduce inequalities between patients in relation to access to services and outcomes; promote the integration of health services where this would improve quality; and reduce inequalities of access and outcomes for individuals.**

**Promote the involvement of patients and carers and representatives in decisions that relate to prevention or diagnosis of illness in the patients, or their care or treatment.**

The Public Sector Equality Duty came into force across Great Britain on 5 April 2011.

It means that public bodies have to consider all individuals when carrying out their day-to-day work – in shaping policy, in delivering services and in relation to their own employees.

It also requires that public bodies have due regard to the need to:

- **Eliminate discrimination**
- **Advance equality of opportunity**
- **Foster good relations between different people when carrying out their activities**



# The ICB itself has specific responsibilities to fulfil...

The **EHRC** advises that a board; set strategic direction, review performance and ensure good governance of the organisation.

The **Messenger** report also states: “There is widespread evidence of considerable inequity in experience and opportunity for those with protected characteristics, of which we would call out race and disability as the most starkly disadvantaged.”

The **Messenger** report (2022) states: “A step-change is needed in the way the principles of equality, diversity and inclusion (EDI) are embedded as the personal responsibility of every leader and every member of staff.”

We have further strategic commitments as part of:

**The NHS Workforce plan**  
**The NHS EDI improvement plan**  
**The NHS People Promise**

# What does the data tell us?

The following six slides demonstrate our data, and where we are as a baseline for our ICB and ICS.



# Our current ICB workforce make up looks like...

Data gathered from NHS Electronic Staff Record (ESR) - NENC ICB, circa 800 staff July 2023. We gather and publish this data anonymously in line with the Public Sector Equality Duty.

## Disability:

Yes **4%**

No **52%**

Not declared/  
Prefer not to  
answer/Unspecified **44%**



## Marital Status:



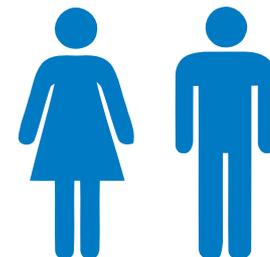
- 63%** Married/  
Civil Partnership
- 9%** Divorced/Separated
- 22%** Single
- 5%** Unknown/unspecified
- 1%** Widowed

## Ethnicity:



- 89%** White
- 3%** Asian
- 0.4%** Black
- 0.4%** Chinese
- 1%** Mixed
- 0.3%** Other
- 6%** Not stated/unspecified

## Gender:\*



**77%** **23%**

## Age range:

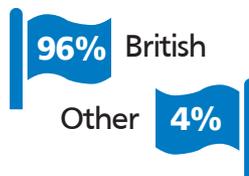
**6%** Under 30 yrs

**43%** 51-65 yrs

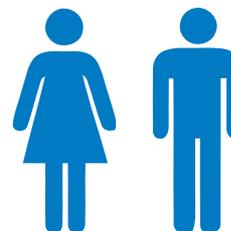
**47%** 31-50 yrs

**3%** 66-70+ yrs

## Nationality:



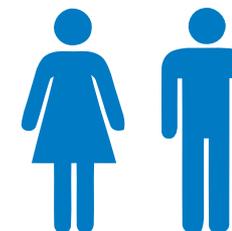
## Pay band / Gender:\*



**Bands 2-7**  
**41%** **4%**

**Bands 8-9 / Other**  
**36%** **18%**

## Employee contract / Gender:\*



**Part time**  
**30%** **9%**

**Full time**  
**48%** **14%**

## Sexual orientation:



Hetrosexual



LGBTQIA+



Not disclosed  
/unspecified/  
not listed

## Religion:

- 31%** Christianity
- 12%** Atheism
- 52%** Not disclosed/  
unspecified
- 5%** Other

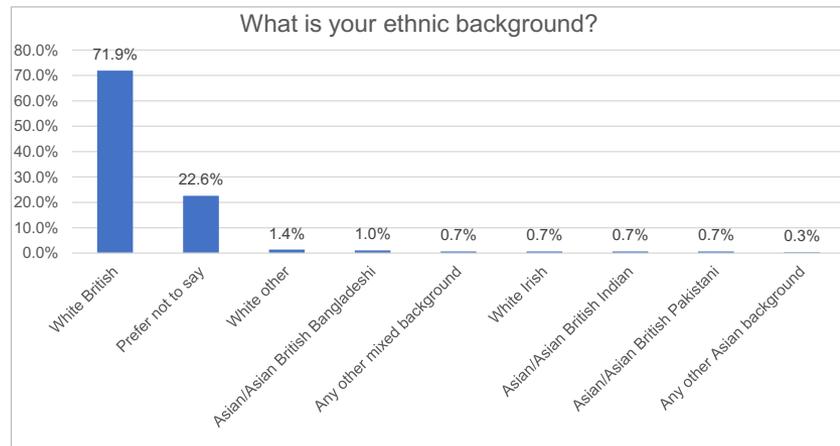
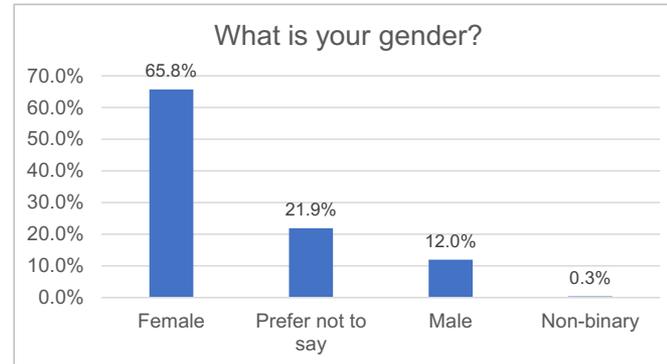
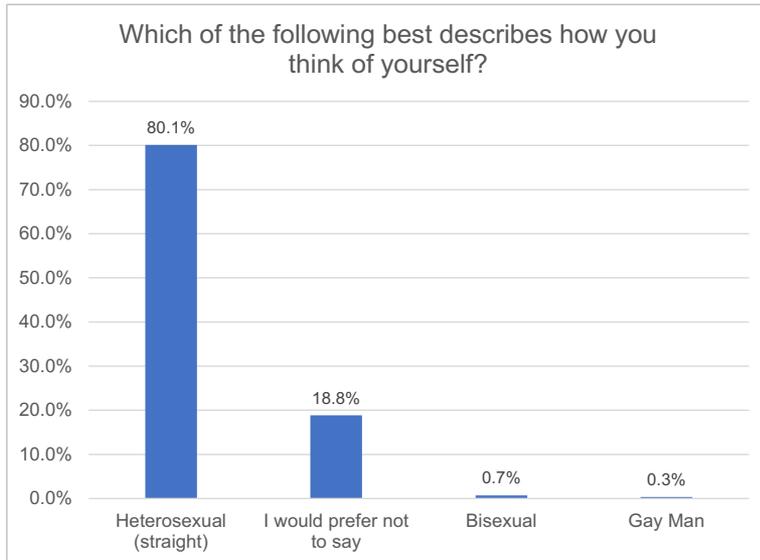
V1. Aug 23

Alternative versions of this document available on request.

\*NHS ESR used to collect data only allows for male or female categories, limiting our ability to gather data on other gender identities.

# Personal characteristics...

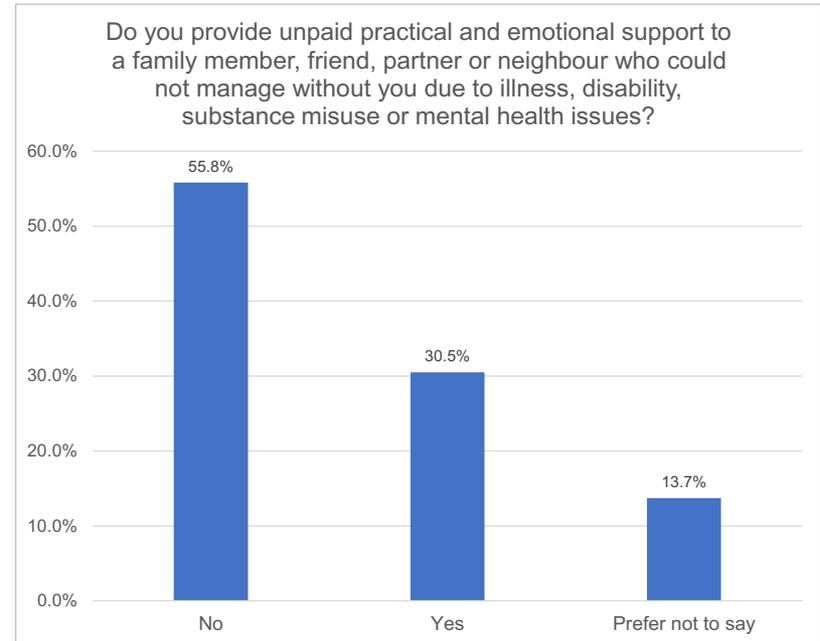
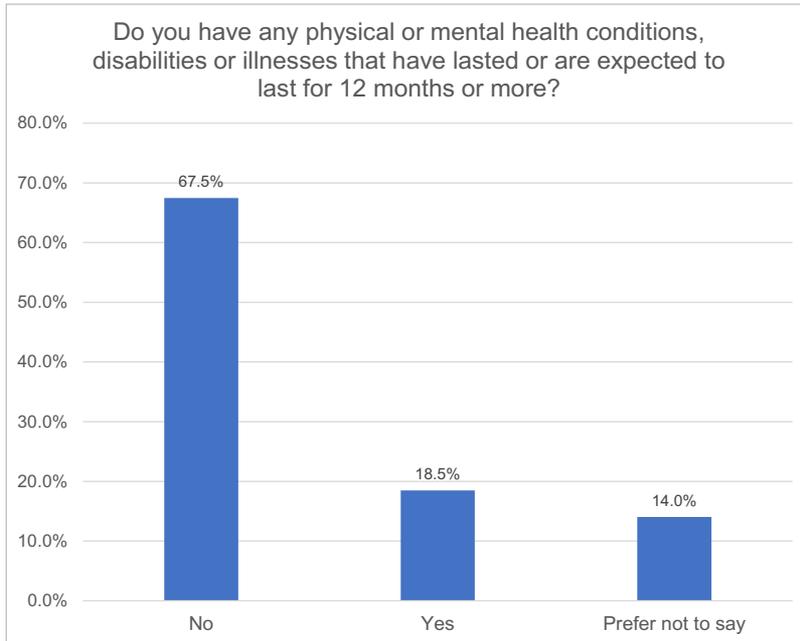
Internal survey of our ICB staff shows hesitancy in reporting personal characteristics



March 2023 survey data

# Disability and carer responsibilities...

**Internal survey of our ICB staff shows nearly a fifth declare they have a disability and a third are carers**



**March 2023 survey data**

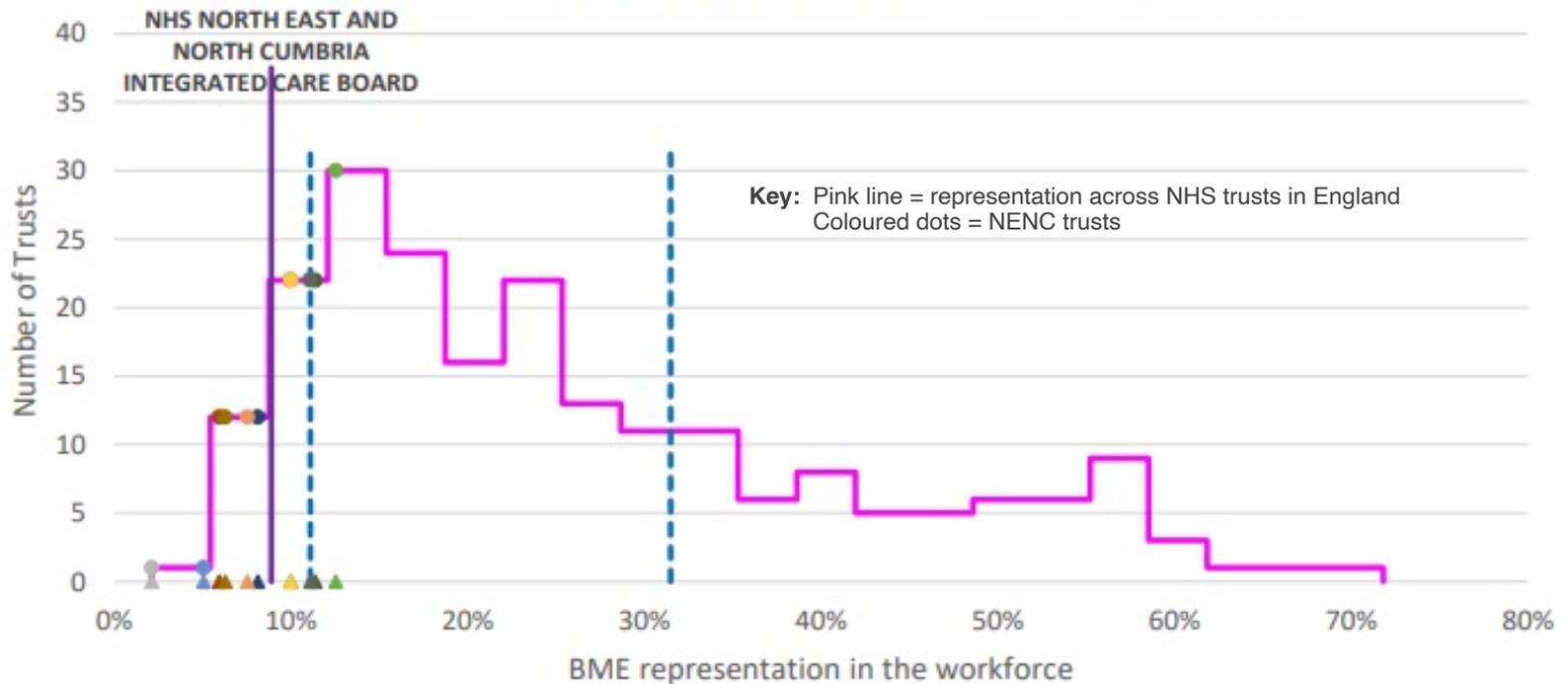
**What does the wider Equity,  
Diversity and Inclusion  
landscape look like for our  
patients and workforce?**



# Low representation...

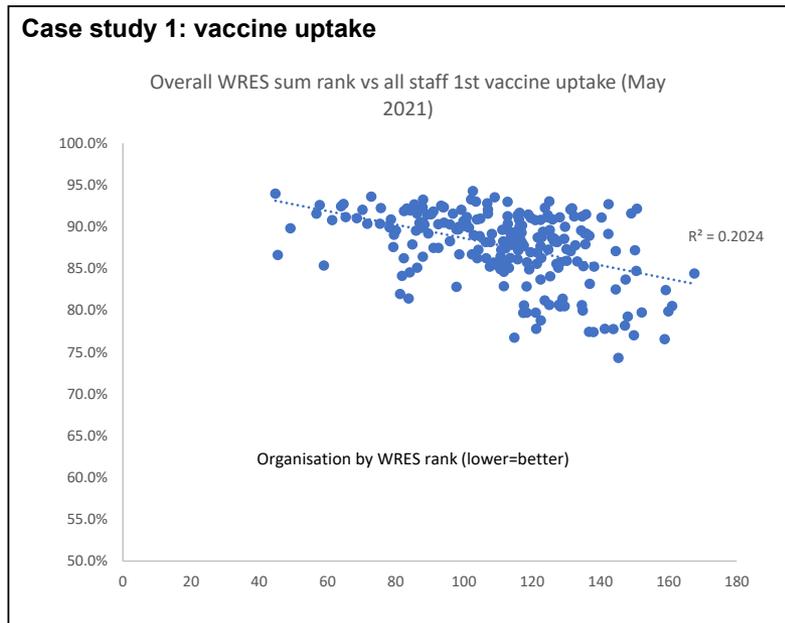
Black, Asian and Minority Ethnic workforce representation in NENC ICS is well below national average – one foundation trust in NENC is the lowest in the country.

**Indicator 1: Percentage BME representation in the workforce (frequency distribution)**

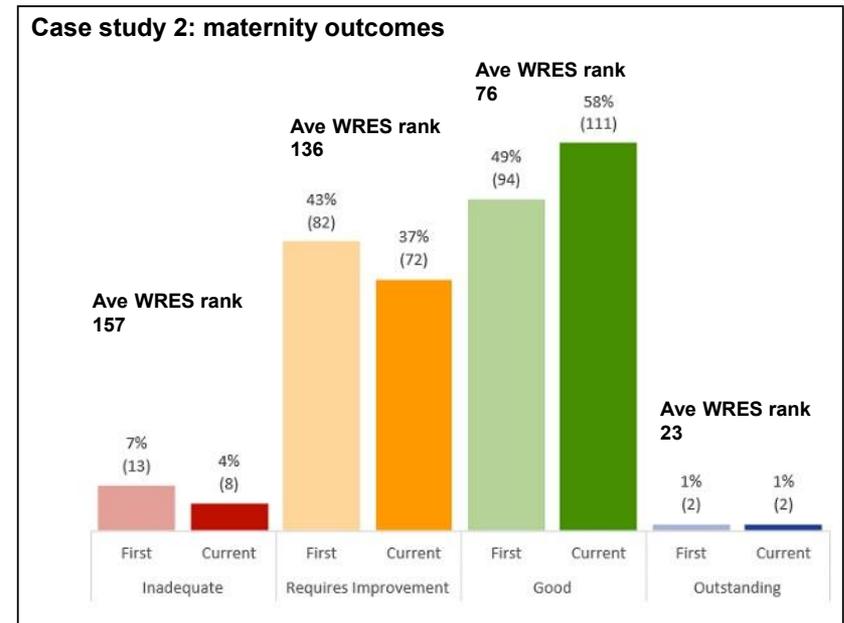


# Data outcomes...

What does the Workforce Race Equality Standard (WRES) data tell us?  
Staff and patient outcomes:



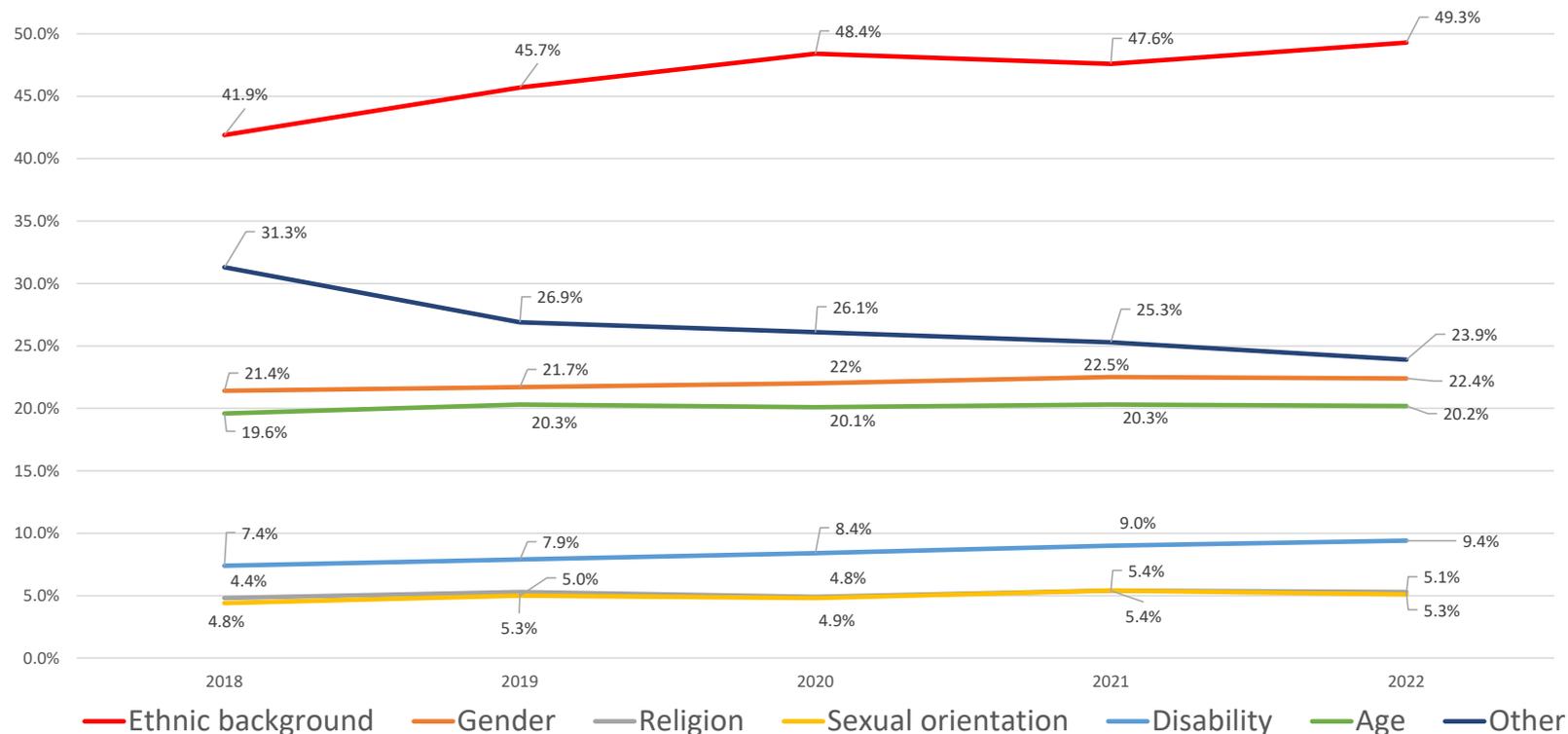
Organisations with better WRES metrics have better all-staff vaccine uptake



Maternity units with best CQC ratings had better overall WRES rankings, and vice versa

# Worsening discrimination...

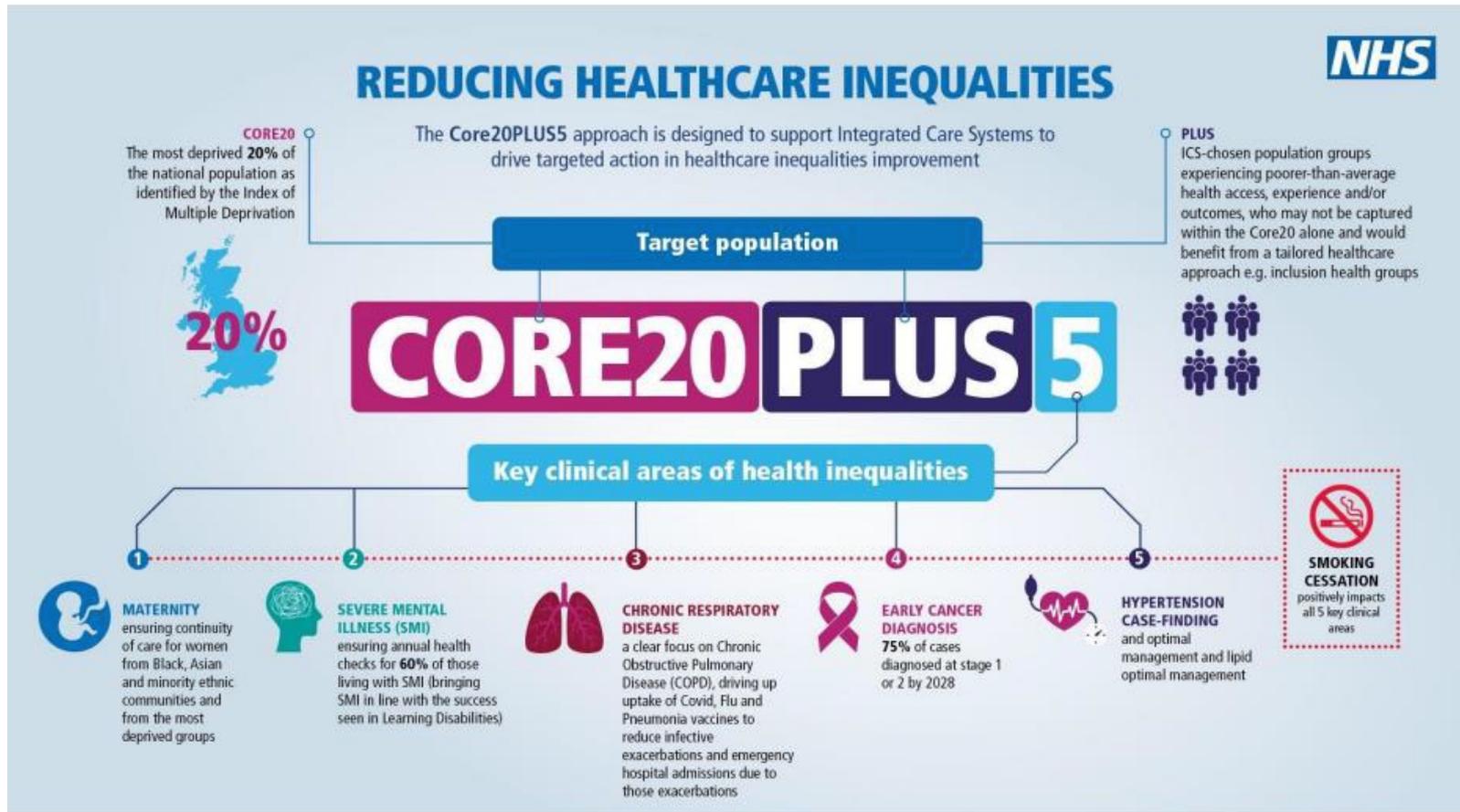
NHS staff experience of discrimination is getting worse:



Source data: public facing NHS National Staff Survey 2022

# Staff impact...

The ICS high level of health inequalities impacts our staff across the system - not only as care providers, but also in their own workforce's health experience



The North of England, particularly the North East (NE), has worse health (e.g. 2 years lower life expectancy) and higher health inequalities compared to the rest of England.

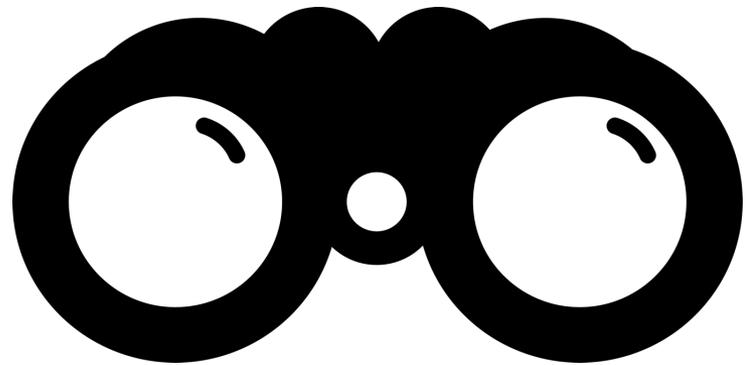
# Introduction to ICB interim strategy...

- This document represents an interim Equity, Diversity and Inclusion (EDI) Strategy for the North East and North Cumbria Integrated Care Board (ICB), covering the period 2023 – 2024
- It consciously focuses on putting the foundations for EDI in place within our ICB first, to build a credible and functioning EDI environment for the ICS
- During this time, alongside of the delivery of the actions outlined in this paper, a further long term EDI strategy will be consulted on and co-created with our partners in the ICS, Charity, Community sectors and Local Authorities within the ICP
- The result of that long term EDI Strategy will be a data rich, evidence led and KPI driven product, which will focus on the views and the voice of our people
- Our EDI strategy will speak to the High Impact Actions, from the new NHS England EDI strategy

# So what's next ?

## Vision...

NENC ICB becomes the most equitable and inclusive, Integrated Care Board in the Health and Social Care sector, creating fairer outcomes for all.



# Mission...

- NENC ICB creates an environment, workplace and system, where our people feel; that they belong, are listened to, invested in, and are valued. They receive equity of treatment, opportunity and see representation, in their work and at all levels of the ICB. We will embed and weave EDI into the fabric of the ICB, creating a golden thread flowing through the organisation, its delivery and policies to become the best place to work in health and care in England.
- The ICB will provide expertise, to encourage collaboration across the system with partners and stakeholders providing leadership and strategic direction on EDI, with a focus on:
  1. Evaluation and assessment of EDI, implementation and improvement across the system
  2. Data analysis, deep dives and sharing in line with GDPR at the right time.
  3. Ownership of an evidence based, best practice interventions and positive action toolkit
  4. A focal point for EDI comms and engagement

# Objectives...

## **Objective One: Improved EDI capability and knowledge**

We will improve NENC ICB EDI Capability and knowledge; by providing our people with opportunities for learning, experiences and development at all bands and professions.

## **Objective Two: Legally compliant and confident**

We will focus our attention to becoming compliant with the statutory and mandatory elements of being part of the Health and Social care system. We will set out to will exceed expectations beyond legal compliance.

## **Objective Three: Consciously inclusive**

We will listen and work with our People to build psychological safety, improve their lived experience, to create the best workplace environment, providing them with the opportunities to perform at their best.