



## Our Vision

To provide every patient with the care we want for those we love the most



Norfolk and Norwich University Hospitals  
NHS Foundation Trust

# Equality, Diversity and Inclusion Workforce focused action plan

	<b>ACTION for Workforce focused Objectives</b>	<b>LEAD responsibility (and support)</b>	<b>Next review date</b>	<b>Action taken</b>	<b>Additional/ specific links</b>
1	We will improve the capture of data in respect of our workforce. Areas of immediate development - recruitment, staff profile, misconduct, training and development. We will analyse the data in order to inform appropriate responses.	Amy Knights (Mark Wall)	Completed May 2019	<p><u>Update 22/03/19</u> Data discussed. Recruitment data to be produced to one decimal point.</p> <p><u>Update 25/04/19</u> Staff in post E&amp;D profile and applicant success rate reports have been updated and are being reviewed to determine the gaps and consider improvements.</p> <p><u>May 2019 Summary</u> EDI data on protected characteristics is produced for serving staff and for recruitment on a quarterly basis.</p>	WRES indicators 1,2,3,4,9 WDES Metric 1 and 10 EDS2 Goal 3
2	Support the establishment (and development) of support groups for protected characteristics where there is demand and interest to do so.	Amy Knights	Completed May 2019	<p><u>Update 13/3/19</u> Networks for BAME and LGBT+ (note names for the networks) are developing. The HEDGE on 22/3/19 will consider a need for a Disability/ Ability Group in the light of WDES.</p> <p><u>Update 08/05/19</u> Discussions have been made to launch a Diverse Ability Staff Network.</p>	WRES indicator 1,6,8 WDES indicator 1,4,9 EDS2 Goal 3

Equality, Diversity and Inclusion Workforce Focused Action Plan Jan 2019 – Jan 2020

Version: CQC inspection summary



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				<p>Promotional activities and other actions are being undertaken to establish the working group.</p> <p>Arrangements for Norwich Pride have begun. Liaising with our LGBT+ Staff Network to include their thoughts and ideas for the event.</p> <p><u>May 2019 Summary</u> Staff networks are established for:</p> <ul style="list-style-type: none"> <li>• BAME</li> <li>• LGBT+</li> </ul> <p><u>August 2019 Summary</u> Our Diverse Ability Staff network launched on 31/07/19 where staff shared their thoughts and experiences and suggested improvements.</p>	
3	Encourage the participation of BME staff in leadership development programmes with a view to preparing BAME staff for roles in more senior roles.	Jeremy Over (Execs/ CODs/ HODs)	Completed May 2019	<p><u>Update 13/3/19</u> Enquiries being made with the Leadership Academy by EC to see if any applications received.</p> <p><u>Update 03/04/19</u> No applications received by the Leadership Academy from NNUH.</p>	WRES indicator 1 EDS2 Goal 4



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				<u>May 2019 Summary</u> BAME leadership opportunities are actively promoted. BAME network is also source of promoting awareness.	
4	Create a mechanism for management intervention whenever there is a resignation for a BME member of staff.	HRBPs (Division Triumvirates)	Completed August 2019	<p><u>Update 18/2/19</u> HRBPs to feedback on interventions through their LEDGes and HEDGE.</p> <p><u>Update 06/05/19</u> Awaiting confirmation that all Divisions have this mechanism in operation.</p> <p><u>August 2019 Summary</u> There is an understanding in every LEDGe in support of this and has been communicated. However, we accept the challenges to make it real. A new mechanism has been created where leavers data will be reviewed on a bi-monthly basis and BME resignations will be raised with HRBP's.</p>	WRES indicator 7 EDS2 Goal 3
5	Promote and encourage nominations for awards for BME staff, most notably for the Annual Staff Awards and PRIDE Awards. <b>Supplementary action (27/2/18) – for monitoring</b>	Jeremy Over (Execs/ CODs/ HODs)	Completed September 2019	<p><u>Update 12/3/19</u> HEDGE and LEDGes to consider how to promote applications.</p> <p><u>Update 08/05/19</u> Increasing engagement into the</p>	WRES indicator 7 EDS2 Goal 3



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	of nominations and success rates, even if limited to ethnicity and gender.			<p>applications of the CEA's. Data has been gathered in terms of ethnicity and gender for applications. Success rate to be compared once outcome of CEAs announced.</p> <p><u>September 2019 Summary</u> We have captured data of the nominations and winners of our PRIDE Awards for this year. We will continue to monitor nominations/ winners and promote and encourage nominations for BME staff.</p>	
6	To increase the knowledge, experience and awareness of good recruitment practices for all recruiting managers – particularly in respect of race and disability.	Amy Knights (Neil Fisher)	Completed August 2019	<p><u>Update 12/3/19</u> Proposal for unconscious bias training shared with the HR Management Team on 12/3/19. To be shared with DoW and update with HEDGE on 22/3/19.</p> <p><u>Update 11/06/19</u> UBT proposal has been taken to People and Culture Committee for approval. Delivery proposed by 31/12/19.</p> <p><u>August 2019 Summary</u> Unconscious Bias Training will be</p>	WRES indicator 2 WDES metric 2 EDS2 Goal 3 and 4



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				delivered from Sept – Dec 2019. From Jan 2020 managers will not be able to recruit if they have not attended the training.	
7	Develop the web page which promotes NNUH as an <u>inclusive</u> employer of choice.	Amy Knights (Neil Fisher)	Completed June 2019	<p><u>Update 02/04/19</u> New recruitment website will go live by end of June 2019. CEO has agreed to promote at June's Viewpoint. Also note promotion of social media platforms including Instagram and Facebook.</p> <p><u>May 2019 Summary</u> Continuing to develop our Equality, Diversity and Inclusion intranet pages. Ensuring resources, data and other useful information is accessible to all staff. EDI will also be incorporated onto the new recruitment website as noted above.</p> <p><u>June 2019 Summary</u> Team NNUH website to be launched in June 2019.</p>	WRES indicator 2 WDES metric 2 EDS2 Goal 3
8	Introduce a process to ensure that all potential	Amy Knights (Marianne Lingwood)	Completed June 2019	<p><u>HEDGE update 17/1/19</u> Misconduct Policy has been well</p>	WRES Indicator 3 EDS2 Goal 3



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	cases of misconduct in respect of BAME staff are highlighted to a more senior manager. To be read in conjunction with actions #9 and #16.			<p>received and numbers of formal investigations have reduced. Awareness of historic/ legacy of disproportionality for BAME staff continues to be highlighted.</p> <p><u>Update 19/2/19</u> Part of discussion at PC Committee on 12/2/19 and HMB on 19/2/19. Disproportionality a priority. Seek education on unconscious bias for senior leaders.</p> <p><u>Update 13/3/19</u> Please also see action 9. Reassurance may be required that interventions are taking place through awareness of HR Ops (centrally) or through divisional management teams.</p> <p><u>Update 06/05/19</u> Awaiting confirmation that all Divisions have this mechanism in operation.</p> <p><u>June 2019 Summary</u> Interventions are taking place through HR Ops (centrally) where misconduct cases in respect of BAME staff are escalated to HRBP's.</p>	

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9	Conduct an analysis (quantitative and qualitative) of the data available in respect of misconduct by protected characteristics. To be read in conjunction with actions #9 and #16.	Amy Knights (Marianne Lingwood and Mark Wall)	<b>Completed May 2019</b>	<p><u>Update 19/2/19</u> Part of discussion at PC Committee on 12/2/19 and HMB on 19/2/19. Disproportionality a priority. Seek education on unconscious bias for senior leaders.</p> <p><u>Update 13/3/19</u> Review of misconduct cases (EDI and pace of investigations), including investigations and sanctions since new Misconduct Policy to be shared with HEDGE on 22/3/19.</p> <p><u>May 2019 summary</u> Data reviewed and to be reflected within the WRES return.</p>	WRES Indicator 3 EDS2 Goal 3
10	Establish effective monitoring for access to non-mandatory training and professional development, particularly in respect of BAME staff.	Sarah Pask	<b>Completed November 2019</b>	<p><u>Update 08/05/19</u> ML will discuss with SP to consider options for monitoring access to non-mandatory training and how we may be able to promote this better to all staff including BAME. Update at HEDGE on 11/06/19.</p> <p><u>Update 10/09/19</u> JS is looking into new data and will update EDGE accordingly.</p>	WRES Indicator 4 EDS2 Goal 3



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				<u>November 2019 Summary</u> We have created a mechanism to monitor access to non-mandatory training in respect of BAME staff. We will monitor this data regularly.	
11	Review the results for specific NHS Staff Survey Key Finding 25 (harassment, bullying or abuse <u>from patients</u> ) by BAME/ white staff – and break down by Division, Staff Group and Bands – to be shared across all areas to underpin local actions.	Amy Knights (HRBPs)	Completed May 2019	<u>Update 19/2/19</u> Staff survey results for 2018 will be reviewed and analysed.  <u>Update 13/3/19</u> Results shared with HEDGE attendees for discussion at HEDGE on 22/3/19.  <u>May 2019 Summary</u> Results shared with BAME/ LGBT+ Networks and Fran Dawson (LFTSUG).	WRES Indicator 5 EDS2 Goal 3
12	Review the results for specific NHS Staff Survey Key Finding 25 (harassment, bullying or abuse <u>from staff</u> ) by BAME/ white staff – and break down by Division, Staff Group and Bands – to be shared across all areas to underpin local actions.	Amy Knights (HRBPs)	Completed May 2019	<u>Update 19/2/19</u> Staff survey results for 2018 will be reviewed and analysed.  <u>Update 13/3/19</u> Results shared with HEDGE attendees for discussion at HEDGE on 22/3/19.  <u>Update 03/04/19</u>	WRES Indicator 6 EDS2 Goal 3





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				Results shared with the BAME and LGBT+ Staff Networks.  <u>May 2019 Summary</u> Results shared with Fran Dawson (LFTSUG). Continuing to promote awareness of our Communicating with PRIDE resources throughout the trust to ensure our staff feel empowered to resolve issues themselves or with support from their colleagues.	
13	Relaunch the Speak Up Policy and the Zero Tolerance expectations.	Jeremy Over (Amy Knights)	Completed April 2018	<u>HEDGE update 27/2/18</u> Re-launch and promotional posters throughout February 2018 and included within Viewpoint.  <u>April 2018 Summary</u> Speak Up Policy re-launched.	WRES Indicator 6 EDS2 Goal 3
14	Review the results for specific NHS Staff Survey Key Finding 21 (equal opportunities for career progression or promotion) by BAME/ white staff – and break down by Division,	Amy Knights (HRBPs)	Completed April 2019	<u>Update 19/2/19</u> Staff survey results for 2018 will be reviewed and analysed.  <u>Update 13/3/19</u> Results shared with HEDGE attendees	WRES Indicator 7 EDS2 Goal 3



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	Staff Group and Bands – to be shared across all areas to underpin local actions.			for discussion at HEDGE on 22/3/19.  <a href="#">April 2019 Summary</a> Results shared with the BAME and LGBT+ Staff Networks.	
15	Review the results for specific NHS Staff Survey Q17 (personally experienced discrimination from managers/ colleagues) by BAME/ white staff – and break down by Division, Staff Group and Bands – to be shared across all areas to underpin local actions.	Amy Knights (HRBPs)	Completed April 2019	<u>Update 13/3/19</u> Results shared with HEDGE attendees for discussion at HEDGE on 22/3/19.  <a href="#">April 2019 Summary</a> Results shared with the BAME and LGBT+ Staff Networks.	WRES Indicator 8 EDS2 Goal 3
16	Ensure that any allegations of discrimination are progressed thoroughly and swiftly. To be read in conjunction with actions #8 and #9.	Amy Knights (HRBPs)	Completed June 2019	<u>HEDGE update 17/1/19</u> Misconduct Policy appears to be having a positive impact for all staff and staff groups – assessment required once policy further embedded.  <u>Update 19/2/19</u> Part of discussion at PC Committee on 12/2/19 and HMB on 19/2/19. Disproportionality a priority. Seek education on unconscious bias for	WRES Indicator 8 EDS2 Goal 3



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				<p>senior leaders.</p> <p><u>Update 13/3/19</u> Review of misconduct cases (EDI and pace of investigations), including investigations and sanctions since new Misconduct Policy to be shared with HEDGE on 22/3/19.</p> <p><u>Update 06/05/19</u> Awaiting confirmation that all Divisions have this mechanism in operation.</p> <p><u>June 2019 Summary</u> Interventions are taking place through HR Ops (centrally) where such cases will be escalated to HRBP's.</p>	
17	Continue to ensure that any Board recruitment draws a diverse set of candidates.	Jeremy Over	Completed March 2019	<p><u>Update 19/2/19</u> Part of discussion at PC Committee on 12/2/19 and HMB on 19/2/19. Board level (NED and Executive) recruitment is embracing diversity and out-reaching to BAME specifically.</p> <p><u>March 2019 Summary</u> Recruitment for new Chair and 3 NEDs will embrace/ encourage attracting applicants with a diverse background.</p>	WRES Indicator 9 WDES Metric 10 EDS2 Goal 4

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18	Prepare for the data collection and publication requirements for Gender Pay Gap Reporting.	Amy Knights (Mark Wall)	<b>Completed March 2019</b>	<p><u>Update 19/2/19</u> The GPGR return for March 2019 has been through WESB (15/2/19) and is subject to final scrutiny prior to publication in March 2019.</p> <p><u>Update 12/3/19</u> Data is scheduled for publication on 22/3/19.</p> <p><b><u>March 2019 Summary</u></b> <b>Data published on government website and is accessible on our NNUH website.</b></p>	EDS2 Goal 3
19	Improve/ enhance the understanding and awareness of Equality, Diversity and Inclusion for senior managers and bring to the forefront of thinking and decision making.	Jeremy Over (Ashley Judd/ Amy Knights)	<b>Completed August 2019</b>	<p><u>Update 19/2/19</u> EDI was a significant part of discussion at PC Committee on 12/2/19 and HMB on 19/2/19. Disproportionality a priority. Little doubt that EDI is part of the senior leadership agenda.</p> <p>Board members are participating in the EDI Board Survey as part of the NHS Employers Partners Programme.</p> <p><u>Update 13/3/19</u> EDI Board Survey results will be shared at the NHS Employers ED Partners</p>	WRES indicators 2,3,4,9 WDES Metrics 2,4,5,10 EDS2 Goal 3

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				<p>Programme on 4/4/19.</p> <p>Proposal for unconscious bias training shared with the HR Management Team on 12/3/19. To be shared with DoW and update with HEDGE on 22/3/19</p> <p><u>Update 08/05/19</u> Board Survey results from ED Partners Programme were anonymous however, it was discovered that 41 trusts were invited to participate – 22 participated. Results can be found in HR/ Equality and Diversity folder.</p> <p><u>August 2019 Summary</u> Unconscious Bias Training will be delivered from Sept – Dec 2019. From Jan 2020 managers will not be able to recruit if they have not attended the training.</p>	
20	Annually publish qualitative workforce information (broken down by each protected characteristic where available) on the intranet and website.	Amy Knights (Mark Wall)	Completed May 2019	<p><u>Update 12/3/19</u> The EDI workforce plan, goals and objectives, supplemented by the EDI action plan, provides the all-embracing response to the PSED, EDS2, WRES and WDES (in due course).</p> <p><u>May 2019 summary</u></p>	EDS2 Goal 3



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				Relevant data is accessible on the intranet and internet.	

## NHS Equality and Diversity Reference Points

### Equality Delivery System (EDS2)

<b>The Goals and Outcomes of Equality Delivery System (EDS2)</b>		
<b>Goal</b>	<b>Number</b>	<b>Description of outcome</b>
<b>Better health outcomes</b>	1.1	Services are commissioned, procured, designed and delivered to meet the health needs of local communities
	1.2	Individual people's health needs are assessed and met in appropriate and effective ways
	1.3	Transitions from one service to another, for people on care pathways, are made smoothly with everyone well-informed
	1.4	When people use NHS services their safety is prioritised and they are free from mistakes, mistreatment and abuse
	1.5	Screening, vaccination and other health promotion services reach and benefit all local communities
<b>Improved patient access and experience</b>	2.1	People, carers and communities can readily access hospital, community health or primary care services and should not be denied access on unreasonable grounds
	2.2	People are informed and supported to be as involved as they wish to be in decisions about their care
	2.3	People report positive experiences of the NHS
	2.4	People's complaints about services are handled respectfully and efficiently
<b>A representative and supported workforce</b>	3.1	Fair NHS recruitment and selection processes lead to a more representative workforce at all levels

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	3.2	The NHS is committed to equal pay for work of equal value and expects employers to use equal pay audits to help fulfil their legal obligations
	3.3	Training and development opportunities are taken up and positively evaluated by all staff
	3.4	When at work, staff are free from abuse, harassment, bullying and violence from any source
	3.5	Flexible working options are available to all staff consistent with the needs of the service and the way people lead their lives
	3.6	Staff report positive experiences of their membership of the workforce
<b>Inclusive leadership</b>	4.1	Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations
	4.2	Papers that come before the Board and other major Committees identify equality-related impacts including risks, and say how these risks are to be managed
	4.3	Middle managers and other line managers support their staff to work in culturally competent ways within a work environment free from discrimination

### Workforce Race Equality Standard (WRES) indicators

#### WRES indicator 1

Percentage of staff in each of the AfC Bands 1-9 OR Medical and Dental and VSM (including executive Board members) compared with the percentage of staff in the overall workforce.

#### WRES indicator 2

Relative likelihood of staff being appointed from shortlisting across all posts.

#### WRES indicator 3

Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation.

#### WRES indicator 4

Relative likelihood of staff accessing non-mandatory training and CPD.

#### WRES indicator 5

KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.

#### WRES indicator 6



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KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.
<b>WRES indicator 7</b>
KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion.
<b>WRES indicator 8</b>
Q17 - In the last 12 months have you personally experienced discrimination at work from any of the following? (b - manager/team leader or other colleagues).
<b>WRES indicator 9</b>
Percentage difference between the organisations' Board voting membership and its overall workforce.

### Workforce Disability Equality Standard (WDES) Metrics

<b>WDES Metric 1</b>
Percentage of staff in AfC paybands or medical and dental subgroups and very senior managers (including Executive Board members) compared with the percentage of staff in the overall workforce.
<b>WDES Metric 2</b>
Relative likelihood of Disabled staff compared to non-disabled staff being appointed from shortlisting across all posts.
<b>WDES Metric 3</b>
Relative likelihood of Disabled staff compared to non-disabled staff entering the formal capability process, as measured by entry into the formal capability procedure.
<b>WDES Metric 4</b>
Q13 – Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from patients/ service users or other members of the public, managers or other colleagues.
<b>WDES Metric 5</b>
Q14 – Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.
<b>WDES Metric 6</b>
Q11 – Percentage of Disabled staff compared to non-disabled staff saying that they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties.
<b>WDES Metric 7</b>
Q5 – Percentage of Disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their organisation values their work.
<b>WDES Metric 8</b>
Q28b Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable to carry out their work.





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#### WDES Metric 9

Staff engagement scores for Disabled, non-disabled staff and the overall Trusts score and evidence of facilitating voices of Disabled staff.

#### WDES Metric 10

Percentage difference between the organisations Board voting membership and its organisations overall workforce.

### CQC Well Led domain

All key EDI Key Line of Enquiry (KLOE) – collectively they amount to a “thread” starting from well-led.

9 common factors	CQC health key lines of enquiry
Leadership enthusiastic and committed to Equality and human rights (E&HR)	W3.8
E&HR runs as a thread	W3.8, W7.1, W7.2, S1.3, E1.2, R1.1,R2.1, R2.4, R2.5, R2.9
Equality culture for staff	W3.8, W1.4
Apply E&HR thinking to Quality Improvement issue	W2.5
People who use services at the centre	E5.3, C1.1, C1.5, C2.5, R2.7, R2.8, W7.1, W7.2
Staff as improvement partners	W7.3, W8.4
Linked to outside	W7.4
Courageous and bold	W8.1, W8.4, W8.5
Curious and humble	W7.1, W7.2, W8.3, W8.4