**Patient and Carer Race Equality Framework**
**Action Planning Tool**

The purpose of this tool is to support the action planning for NHS Patient and Carer Race Equality at Service and Directorate level.

This tool can be used by teams of any size. Action planning for PCREF requires your data, and consultation with service users and carers. PCREF metrics can be found in the [**PCREF data reporting template.**](https://www.elft.nhs.uk/sites/default/files/2024-04/elft_pcref_reporting_template.pptx)

Please use this document as a guidance.

**Stage 1 Identify Priority Areas**

**Assessment and Analysis:**

* Analyse local PCREF data to identify disparities and areas of inequity in healthcare access, treatment, and outcomes among different racial and ethnic groups.
* Conduct an assessment of current practices, policies, and outcomes related to race equality in patient and carer experiences.

**Stakeholder Engagement: People Participation**

* Engage patients, carers, community organisations, and staff from diverse racial and ethnic backgrounds to gather insights and perspectives on race equality issues.
* Establish a PCREF focus in all People Participation Working Together Groups (WTGs) to ensure ongoing input and participation from key stakeholders throughout the action planning process.

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| **PCREF Priority Areas**As we move away from terms such as ‘BAME’, we ask that teams identify specific ethnic groups where possible. Such as South Asian, rather than ‘Asian’; or African, rather than ‘Black’. |
| **Example** | *Improve access rates for South Asian men in IAPT services* |
| **Priority 1** |  |
| **Priority 2** |  |
| **Priority 3** |  |
| **Ensure that you have consulted with the communities identified in your priority areas** |

**Stage 2 Goal Setting**

The ELFT Quality Improvement approach can guide working through this stage. When registered as a QI project, resources and support will be assigned to the work including registration on ‘life QI’, an assigned QI coach and sponsor, who will ensure representation from stakeholders who affect and are affected by the issue from across the Trust and wider community. <https://qi.elft.nhs.uk>.

**Goal Setting:**

Develop clear and measurable goals and objectives for advancing race equality in patient and carer experiences within the NHS Trust.

Ensure that goals are aligned with national equality standards and guidelines, such as the NHS Workforce Race Equality Standard (WRES) and best practice in care for racialised and ethnically and culturally diverse communities, such as the NHS Talking Therapy [Positive Practice Guide for Black, Asian and minority ethnic Service Users.](https://babcp.com/BAME-Positive-Practice-Guide)

Goals should be SMART:

* Specific
* Measurable
* Achievable
* Relevant, and
* Time-Bound

**Cultural Competencies**

The 8 Cultural Competencies below are evidence-based practices intended to support services in addressing identified disparities and promoting race equality.

1. **Cultural awareness**

Engage in cultural competency training to better understand diverse cultural beliefs and practices, thereby enhancing communication and rapport with patients from different backgrounds.

1. **Partnership working**

Develop partnerships with community organisations and cultural groups to co-design and provide culturally sensitive services that meet the unique needs of diverse patient populations.

1. **Workforce**

Promote diversity and inclusion in the workforce by implementing recruitment, retention, and wellbeing strategies for staff, aligning to the Workforce Race Equality Standard (WRES).

1. **Staff knowledge and awareness**

Provide ongoing education and resources to staff on cultural competence and diversity issues, empowering them to deliver patient-centred care that respects and values cultural differences.

1. **Co-learning**

Provide opportunities for staff and patients to engage in mutual learning and exchange of knowledge. This will create a collaborative approach to care that recognises the expertise of both parties in achieving positive health outcomes.

1. **Co-production**

Involve patients and carers from diverse backgrounds in the co-design and evaluation of healthcare services, ensuring that their voices and perspectives are central to decision-making processes, so that services are more responsive to their needs.

1. **Trauma-informed care**

Implement trauma-informed approaches that recognise and respond to the impact of past trauma on patients' health and well-being, creating a safe and supportive environment for healing and recovery.

1. **Intersectionality**

Recognise and address the intersecting identities and social determinants of health that influence patients' experiences and outcomes. Use inclusive approaches that consider factors such as race, gender, age, socioeconomic status, and sexual orientation.

**Stage 3 Implementation**

**Implementation Plan:**

* Create a detailed implementation plan outlining specific actions, responsible owners, timelines, and resource allocations for each intervention strategy.
* Ensure that the implementation plan includes mechanisms for monitoring progress, tracking outcomes, and adjusting strategies as needed.

To ensure that your action plan is more than just a list of proposals and good intentions, the following should be considered:

* How can PCREF be embedded into your current action plans?
* Each action be attributed to a key person who is responsible for its completion.
* An achievable timescale that is also reasonable
* Relevant and appropriate activities and progress milestones
* Any cost implications and how these will be addressed.

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| --- | --- | --- | --- | --- | --- | --- |
|  | **Priority area** | **Actions required for improvement** | **How will impact/progress be measured?** | **Expected****Outcome** | **Timescale**To - From | **Lead** |
| 1 |       |       |       |       |       |       |
| 2 |       |       |       |       |       |       |
| 3 |       |       |       |       |       |       |
| 4 |       |       |       |       |       |       |
| 5 |       |       |       |       |       |       |

**Stage 4 Monitor and Evaluate**

**Monitoring and Evaluation:**

* Regularly evaluate the effectiveness of interventions and initiatives, using feedback from patients, carers, and staff to inform continuous improvement efforts.
* Reporting progress in PCREF actions back to DMT, PCREF steering groups, and Working Together Groups.

For further guidance, please visit the [**ELFT PCREF web page**](https://www.elft.nhs.uk/information-about-elft/equity-diversity/patient-and-carer-race-equality-framework-pcref)