

Patient and Carer Race Equality Framework: Workshop Pack

Instructions:

The contents of this pack will be referenced throughout the PCREF workshop. It includes information about the PCREF, as well as resources and further Trust information relating to equity, diversity and inclusion.

To prepare for the workshop, please ensure that you have read through this document, as we will be using it throughout.

Contents	Page Number
Legislative and Statutory Duties	2
PCREF Governance Structure	3
Cultural Competencies	4-11
PCREF Checklist	12-13
Positive Practice	14
Previous Research and Learning	14
Equality Impact Assessment Guidance	15
Action Plan Guidance	15
QI Project Information	15
People Participation Information	16
Staff Network Details	16
Trust Wellbeing Contacts	16
Organisations and Resources	17-19
Glossary	20-22

Legislative and Statutory Duties

NHS England and the PCREF:

NHS England has launched its first ever anti-racism framework: the Patient and Carer Race Equality Framework (PCREF), for all NHS mental health trusts and mental health service providers to embed across England. This mandatory framework will support trusts and providers on their journeys to becoming actively anti-racist organisations by ensuring that they are responsible for co-producing and implementing concrete actions to reduce racial inequalities within their services. It will become part of Care Quality Commission (CQC) inspections.

For more information: <https://www.england.nhs.uk/mental-health/advancing-mental-health-equalities/pcref/>

Mental Health Act 1983:

The Mental Health Act (1983) is the main piece of legislation that covers the assessment, treatment and rights of people with a mental health disorder.

Read more about the Mental Health Act here:

<https://www.legislation.gov.uk/ukpga/1983/20/contents>

Public Sector Equality Duty (PSED):

The Public Sector Equality Duty came in to force in April 2011 (s.149 of the Equality Act 2010) and public authorities like the NHS are now required, in carrying out their functions, to have due regard to the need to achieve the objectives set out under s149 of the Equality Act 2010.

Access to the PSED: <https://www.legislation.gov.uk/uksi/2011/2260/contents/made>

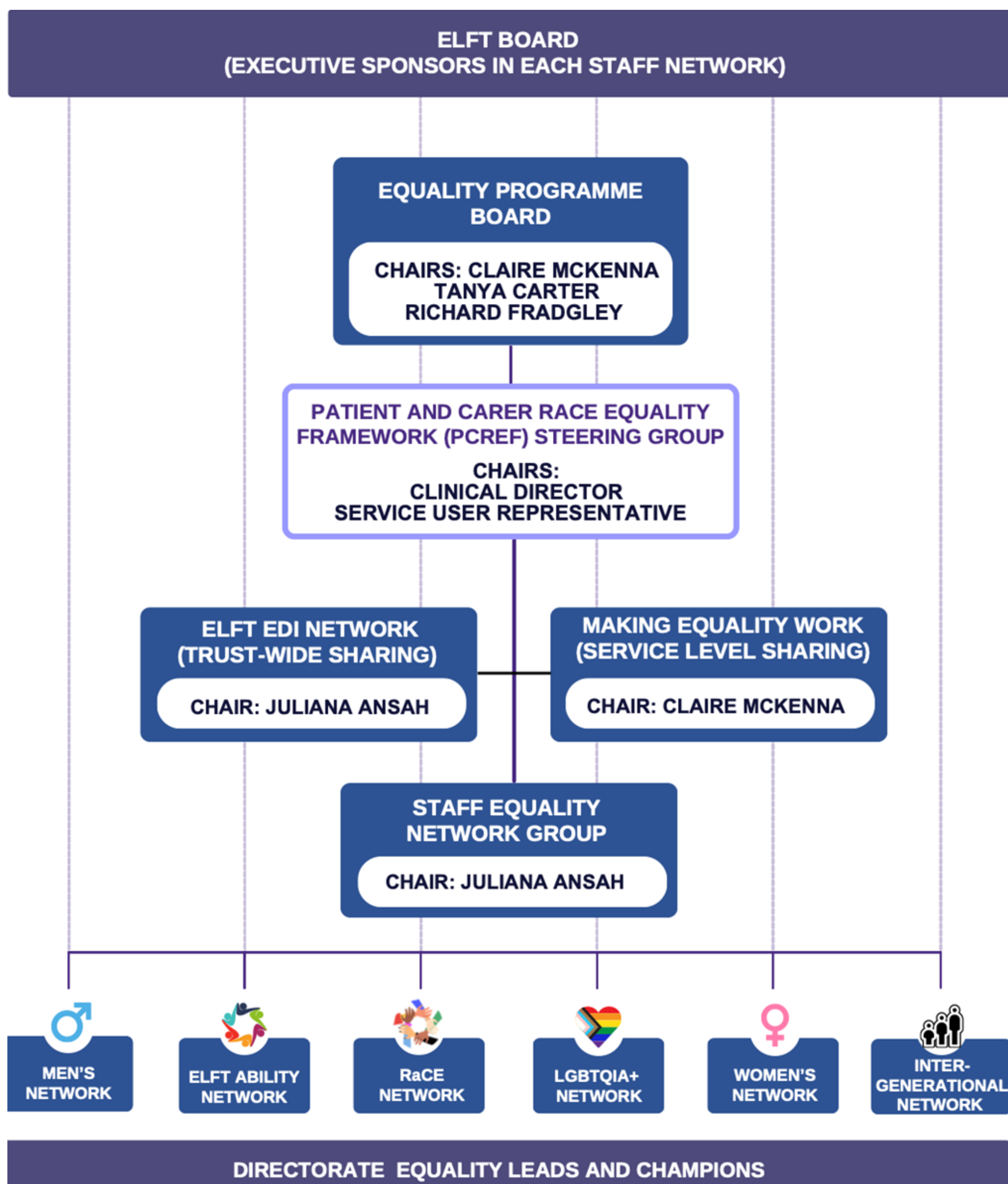
PCREF Governance Structure

PCREF Leads attend the PCREF Steering Group and are responsible for cascading PCREF to a service level.

Trust PCREF Leads:

- Claire McKenna (Interim Chief Nurse, PCREF Executive Lead for the Trust)
- Juliana Ansah (Head of EDI, PCREF Strategy Lead)
- Robert Sykes (EDI People Participation Lead, PCREF Patient and Carer Engagement Lead)

Trust Leads will produce quarterly Trust-Level reports, to be submitted to the Equality Programme Board and NHS England.



Cultural Competencies

Through national stakeholder engagement and co-production, it has been agreed that improving the following cultural competencies will help to achieve the aims above.

National Competencies:

- Cultural Awareness
- Staff Knowledge and Awareness
- Partnership Working
- Co-production
- Workforce
- Co-Learning

Local Competencies:

- Trauma-Informed Care
- Intersectionality

Cultural Awareness (National)

Definition: **Cultural awareness** is about recognising and understanding the needs of the diverse cultural backgrounds of the communities a Trust serves. This encompasses awareness of and sensitivity to socioeconomic issues faced by local populations, to ensure services are more inclusive.

<ul style="list-style-type: none"> • Understanding the diverse needs of the community you serve, particularly less visible or vocal communities. • Co-design culturally appropriate services that reflect the needs of the community you serve. • Collect and monitor evidence to assess cultural competence and embed improvements that is an anti-racist and anti-oppressive approach, including clinical practices and equality, diversity and inclusion practices across the Trust workforce. 		
Developing	Good	Outstanding
<p>Services have some awareness of the diverse communities they serve.</p> <p>Services consult with local diverse communities about how to make services more culturally appropriate.</p>	<p>Services have a comprehensive understanding of the diverse communities they serve and their differing needs; and actively seek out and include less visible or vocal communities.</p> <p>Services recognises the gaps in knowledge turn to people with lived experience to better understand these needs, and develop more holistic understanding of mental health, including cultural and religious beliefs.</p> <p>Services have access to a designated group of service users and carers of diverse backgrounds that co-designs services alongside clinicians.</p>	<p>All staff attend regular coproduced, co-delivered training that enhances understanding the needs of local diverse communities.</p> <p>Services have adapted to accommodate less visible or less vocal local communities.</p> <p>Staff with lived experiences from a range of diverse backgrounds are included in decision making.</p> <p>Services regularly monitors data to ensure that their practices are making a positive impact.</p>

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Partnership Working (National)

Definition: **Partnership working** is about mental health services working more closely with racialised and ethnically and culturally diverse communities, leaders and other organisations beyond the NHS, such as religious groups, ethnic led VCSE organisations, social care and others to support wellness in the round.

<ul style="list-style-type: none"> • Actively engage and develop meaningful and sustainable partnerships at multiple levels ensuring the parity of relationship with your partners are equitable. • Promote community champions to build trust and allyship. 		
Developing	Good	Outstanding
<p>Trusts connect with local communities which include ethnically and culturally diverse VCSE (Voluntary, Community, Social Enterprise) organisations.</p> <p>Services are developing meaningful, sustainable partnerships with local diverse communities.</p> <p>Trusts actively seek community champions in order to start to build trust with local communities.</p>	<p>Diverse communities are actively involved in service design, testing and development, lending their specialist cultural knowledge, local knowledge and expertise.</p> <p>Opportunities are created for mutual learning with partnership organisations to develop a more holistic understanding of experiences of mental health.</p> <p>Services collaborate with partnership organisations to signpost service users and carers to community spaces.</p>	<p>Services have established sustainable, equitable partnerships with their local community groups and have codeveloped community spaces to support service users.</p> <p>Services and their community partners, including VCSE organisations share a single vision statement.</p> <p>Services demonstrate the collective impact of each partner's involvement by routinely monitoring and evaluating progress.</p>

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Co-production (National)

Definition: **Co-production** is ensuring ethnically and culturally diverse patients and carers are treated as equal partners in decision making on their care and treatment plans, and actively involved in the design, development and review of care pathways. When describing a service, project or piece of work as coproduced, this must mean power-sharing from design to delivery.

<ul style="list-style-type: none"> • Create a space for patients and carers from racialised and ethnically and culturally diverse communities to have shared decision making. • Ensure patients and carers from racialised and ethnically and culturally diverse communities are actively involved in the end to end process of designing and delivering culturally competent and patient-centred services. 		
Developing	Good	Outstanding
<p>Racialised and ethnically and culturally diverse patients and carers are consulted when designing and delivering services.</p>	<p>Services are co-producing quality improvement projects with culturally diverse patients and carers.</p> <p>Services have identified and involved less visible or less vocal local communities.</p>	<p>Multiple opportunities are available for service users and carers to be involved in services at coproduction, codesign and codelivery.</p> <p>Service users, carers, and community groups are involved and represented from concept to design to delivery.</p> <p>The patients and carers involved are of various cultural, religious and racial backgrounds, with intersectional identities and knowledge of the same.</p> <p>There is an equal partnership between service users, carers and staff, including at the decision-making level.</p>

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Staff Knowledge and Awareness (National)

Definition: **Staff Knowledge and Awareness** is about recognising and understanding the racialised experiences of the communities a trust serves, and overcoming biases and prejudices by acting upon them.

<ul style="list-style-type: none"> Think about how your training standards, policies and practices support staff to respond to the diverse needs of ethnic communities and make improvements where necessary. 		
Developing	Good	Outstanding
<p>Service leadership is inclusive of service user views, with ad hoc service user presence at board meetings.</p> <p>Support is available to the workforce to improve staff wellbeing.</p> <p>Managers use prompts in appraisals/supervision that consider the knowledge and awareness skills related to working with diverse communities.</p>	<p>Services draw upon directorate-level workforce equity plans (such as the FLAIR: Racism in the workplace Plan) in collaboration with ethnically and culturally diverse workforce to improve equality of outcomes.</p> <p>Leadership Teams consistently include patients and carers with lived experience of accessing services at meetings for decision-making.</p> <p>Staff attend multiple and frequent learning opportunities, whether on the Intranet or through Communities of Practice, specifically about cultural competence so learning can be shared trustwide.</p>	<p>Services are actively engaged with local and Trust-wide networks for ethnically and culturally diverse staff.</p> <p>Recruiting managers have actively identified and implemented initiatives to improve the recruitment and retention of its diverse staff as well as their career progression.</p> <p>Services have regular learning opportunities for staff which are budgeted for in advance, and involve service users, carers and community groups.</p>

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Workforce (National)

Definition: A culturally competent and diverse **workforce** that has a positive impact on patient and carers from racialised and ethnic minority communities; and creates a safe space where the workforce champions inclusive leadership, shares learning, intentionally embeds anti-racist approaches, and tracks progress.

<ul style="list-style-type: none"> • Champion inclusive leadership and embed 'Cultural Peer Support'. In particular, raise the profile of ethnic minority staff to enable them to share their lived experiences in the workforce to reduce racial bias from occurring. • Support the workforce to improve on staff wellbeing to meet the specific needs of racialised and ethnic minority patients and carers. 		
Developing	Good	Outstanding
<p>Trusts submit the annual WRES report as required and show progress against the agreed indicators of workforce equality.</p> <p>Services raise the profile of their ethnically and culturally diverse staff, enabling them to share their lived experience within the workforce.</p>	<p>Trusts engage with their ethnically diverse and underrepresented workforce and draw up plans to bring about equality of outcomes. This may include agreeing a local level indicator that measures mental wellbeing.</p> <p>Trusts and services monitor the wellbeing of staff from ethnically and culturally diverse groups, with support clearly provided, and appropriate safe spaces to share experiences.</p>	<p>Trust has a well-established equality network for ethnically diverse and underrepresented staff.</p> <p>Equality network(s) is actively involved in identifying and implementing initiatives to improve recruitment, retention, career progression.</p>

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Co-Learning (National)

Definition: **Co-Learning** is a two-way process that strengthens collaborative knowledge sharing beyond co-production principles, and focuses on how trusts can raise awareness of early intervention support amongst racialised and ethnically and culturally diverse communities, and learn more about community concerns and barriers in return

<ul style="list-style-type: none"> • Champion 'Reciprocal' and mutual co-learning – an environment where everyone can be both a teacher and a learner. • Trusts work with community champions or undertakes active outreach to raise awareness of early intervention services cultural needs. 		
Developing	Good	Outstanding
<p>Services identify gaps in staff, service user and community knowledge and begin consulting about how to rectify this.</p>	<p>Service leads attend directorate-level strategic groups comprising service users, carers and community groups to design and facilitate co-learning processes.</p> <p>Services acknowledge barriers identified by existing research and consultations, and work with local community leaders to ensure referral routes for early interventions are clearly communicated to diverse communities.</p>	<p>Services work cross-directorate to embedded and established Trust-wide co-learning in a reciprocal way.</p> <p>These comprise service users, carers and community groups that represent the local population and include people of intersecting identities.</p> <p>Services have a clear log of recommendations made based on barriers identified with service users and carers, and regularly demonstrate improvements with a "You Said, We Did" system.</p>

ELFT's Cultural Competencies

Trauma-Informed Care (Local)

Definition: Trauma-Informed Care is an approach to health and care interventions which is grounded in the understanding that trauma exposure can impact an individual's neurological, biological, psychological and social development.

<ul style="list-style-type: none"> • Honour the six principles of trauma-informed care, which all play a part in cultural competence: <ul style="list-style-type: none"> ◦ Trustworthiness and transparency ◦ Empowerment, voice and choice ◦ Cultural, historical and gender issues ◦ Peer support ◦ Collaboration and mutuality ◦ Safety • Understand the multifaceted and complex nature of trauma and its impact on mental and physical health, ensuring that services endeavour to help and not retraumatise service users – not just through individual practice but through systems. 		
Developing	Good	Outstanding
<p>Services commit to being trauma-informed, including this in their annual equality performance plan.</p> <p>Services understand and promote awareness of the broader impact of trauma beyond the clinical definition.</p> <p>Services are involved in social media campaigns to promote their commitment to being trauma-informed.</p>	<p>Staff are attending Trauma-Informed Care training via the ELFT Learning Academy and external agencies. Trauma-Informed Care training is completed by all staff within the service.</p> <p>Service users are supported to access advocacy services. Services locate and partner with advocacy services that are culturally appropriate and accessible to service users and carers.</p>	<p>Trauma-informed is integrated into clinical supervision and performance reviews. Systemic changes have been made from the top down, with special sensitivity to the necessity of police involvement and a concerted effort to reduce the disproportionate impact of restrictive practice on racialised communities.</p> <p>In-person training is fully coproduced and co-delivered with a diverse range of service users and carers in roles within the Trust.</p> <p>Services provide spaces to service users and carers for increased accessibility of information on medication, side-effects, and legislation.</p>

ELFT's Cultural Competencies

Intersectionality (Local)

Definition: **Intersectionality** is understanding the unique needs of people with multiple marginalised identities, such as Black LGBTQ people or disabled people of faith.

- Within the Trust, this means going beyond basic understanding of protected characteristics under the Equality Act 2010 and considering where those characteristics intersect, for instance marginalisation through race and gender for a South Asian woman.
- It also means awareness that certain communities may be less vocal than others, particularly those that are invisible within a larger marginalised or minoritised community (such as LGBTQ Jewish or Muslim people).
- This approach should be taken not only by staff with marginalised identities but across the board, with recognition of privilege and biases where applicable.

Developing	Good	Outstanding
<p>Services understand intersectionality, and have considered social impacts beyond the 9 protected characteristics of the Equality Act 2010.</p> <p>Services are involved in awareness campaigns promoting intersectional approaches to equity, diversity and inclusion.</p> <p>Services are regularly collating feedback which highlights the intersectional experiences of staff, service users, and carers.</p>	<p>Services have identified intersectional groups that access their services and are able to adapt services to meet their cultural needs.</p> <p>Services are engaged with communities where intersectionality may impact their service access and outcomes, looking at the experiences of ethnically diverse communities who also represent LGBTQ, faith, and disabled groups.</p>	<p>Intersectionality underpins service strategies and leadership and is a core element of clinical supervision and formulations.</p> <p>Services work with a diverse group of staff, services users, carers and voluntary organisations to scrutinise decisions through an intersectional lens.</p>

PCREF Checklist

1	2	3	4	5	6	7	8
Cultural awareness	Staff knowledge & awareness	Partnership working	Co-production	Workforce	Co-learning	Intersectionality	Trauma-Informed Care

No	Category	Actions to improve organisational competencies	Cultural competencies							
			1	2	3	4	5	6	7	8
1	Governance & Leadership	Directorates to have a PCREF Lead who attends PCREF Steering Group and responsible for cascading PCREF to service level. Trust PCREF Leads: <ul style="list-style-type: none"> Claire McKenna, (Interim Chief Nurse, PCREF Executive Lead) Juliana Ansah, (Head of EDI, PCREF Strategy Lead) Robert Sykes, (EDI People Participation Lead, PCREF Patient and Carer Engagement Lead) 	✓	✓	✓	✓	✓	✓		
2		Directorates to collate and report on PCREF Metrics disaggregated by ethnicity, with regular reporting at DMT. Trust leads will produce quarterly Trust-Level reports, to be submitted to Equality Programme Board and NHSE.	✓	✓			✓			
3		Racialised and ethnically and culturally diverse community representatives included at Directorate level and are inducted/equipped with the skills/training to participate meaningfully in discussions.	✓	✓	✓	✓	✓	✓		
4		Trust to ensure an independent mechanism i.e. advisory board (where applicable) is in place for oversight on the implementation of the PCREF, consisting of local community leaders, patients/carers and voluntary sector organisations	✓	✓	✓	✓	✓	✓	✓	✓
5	Policy & Practice	Directorates commissions cultural awareness training with organisations/ representatives that understand racialised and ethnically and culturally diverse communities' experiences	✓	✓	✓	✓		✓	✓	✓
6		Embed specific development goals relating to inequalities related to race in staff personal development plans	✓	✓		✓	✓			✓
7		Trust co-develops clear policies on addressing racism, whether experienced by patients or staff	✓	✓		✓	✓	✓		✓

Action for Trust Leads

Action for Directorate and Service Leads

PCREF Checklist

1	2	3	4	5	6	7	8
Cultural awareness	Staff knowledge & awareness	Partnership working	Co-production	Workforce	Co-learning	Intersectionality	Trauma-Informed Care

No	Category	Actions to improve organisational competencies	Cultural competencies							
			1	2	3	4	5	6	7	8
8	Policy & Practice	Trust co-develops and implement reciprocal mentoring programme, which focuses on improving understanding of cultural differences	✓	✓	✓	✓	✓	✓	✓	✓
9		Frontline workers are aware of and implement 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' patients	✓	✓	✓	✓	✓	✓	✓	✓
10		Services identify a diverse range of champions which act as specialist advisers representing the racialised and ethnically and culturally diverse communities and supporting the Trust on anti-racism activities.	✓		✓	✓		✓	✓	✓
11		Directorates to review patient and service user feedback mechanisms.	✓	✓	✓	✓	✓	✓	✓	✓
12		Trust to update PREMs, PROMs, and other Patient and Carers feedback mechanisms to include a racialised question.	✓	✓		✓			✓	✓
13		Services to look into existing data including patient outcome data through the equity lens	✓	✓				✓		
14		Trust to use intelligence from research, quality improvement, data analysis and co-production initiative in service planning, design and delivery	✓	✓		✓		✓		

Action for Trust Leads

Action for Directorate and Service Leads

Positive Practice Guides

Title	Organisation(s)	How to access
IAPT Black Asian and Minority Ethnic Service User Positive Practice Guide	British Association for Behavioural and Cognitive Psychotherapies (BABCP)	https://babcp.com/BAME-Positive-Practice-Guide
Innovative ways of engaging with (BME) communities to improve access to psychological therapies	National Institute for Health and Care Excellence (NICE) Birmingham Healthy Minds	https://www.nice.org.uk/sharedlearning/innovative-ways-of-engaging-with-black-and-minority-ethnic-bme-communities-to-improve-access-to-psychological-therapies
Advancing Mental Health Equity	Royal College of Psychiatrists National Collaborating Centre for Mental Health	https://www.rcpsych.ac.uk/docs/default-source/improving-care/nccmh/amhe/amhe-resource.pdf
RightCare physical health and severe mental illness scenario	NHS England	https://www.england.nhs.uk/long-read/rightcare-physical-health-and-severe-mental-illness-scenario/
NICE and health inequalities	National Institute for Health and Care Excellence (NICE) Birmingham Healthy Minds	https://www.nice.org.uk/about/what-we-do/nice-and-health-inequalities

Previous Research & Learning

Project	How to access
Let's Talk Report: Improving the Experience of Community Mental Health Services for Black, Asian and Minority Ethnic People in ELFT's London boroughs. Key themes were cultural awareness; empathy; compassion; accountability; holistic understandings; accessibility and community spaces.	https://www.elft.nhs.uk/sites/default/files/2022-02/BAME%20Let%27s%20Talk%20Report%202021.pdf
ARIADNE: AddReSSing the ImpAct of coviD-19 paNdEmic on the access to and experience of mental health care of people from BAME groups. Long-standing ethnic inequalities in access and mental healthcare were worsened by the COVID-19 pandemic. This study explores how codesign can tackle these inequalities.	https://mentalhealth.bmj.com/content/ebmental/26/1/e300709.full.pdf
Co-PACT: Experience based investigation and Co-design of approaches to Prevent and reduce Mental Health Act Use. Service users from diverse ethnic backgrounds use photography to capture their experiences under the Mental Health Act, with the goal of coproducing new approaches to reduce compulsory admission.	https://www.psych.ox.ac.uk/research/chimes/co-pact https://www.youtube.com/watch?v=CCrI6oPCVxQ

Equality Impact Assessment (EIA) Guidance



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What is it?

An equality impact assessment (EIA) is an evidence-based approach designed to help ensure that our policies, practices, events and decision-making processes are fair and do not present barriers to participation or disadvantage any protected groups. The process will help to identify differential Impact and look at how we can avoid disadvantage or further improve the delivery of our services.

The guidance document aims to make the process of completing an equality impact assessment easier to understand. It is also intended to provide a sensible and proportionate approach that ensures the Trust gives due regard to the requirements to promote equality alongside other competing requirements such as Health & Safety.

Where is it?

You can find the EIA guidance [here](#).

Action Plan Guidance

The real value of completing the PCREF workshop comes from the actions that will take place and the positive changes that will emerge after. Your action plan is more than a standalone list of proposals and good intentions, and to help you, we have created a template for you to document these changes, including to your practice and policies.

[Download the PCREF Action Planning tool here.](#)

Quality Improvement (QI) Information

We aspire to provide care of the highest quality, in collaboration with those who use our services.

ELFT is an organisation that embraces continuous improvement and learning. Achieving this will mean we have to think differently, be innovative, and give everyone, at every level, the skills they need to lead change. It will not be easy to build this culture, but focusing on what matters most to our service users and staff, and improving access to evidence-based care will make our services more effective, give more power to our staff and improve patient experience and outcomes.

Get involved

As an integral part of Quality Improvement, we need to include the people who receive our services. This will enhance our QI projects as we can then measure improvements for staff, service users and carers/families as a whole. If you know a service user or carer interested in helping us improve quality, they might like to join a QI project, or even start a new one!

[Contact ELFT QI here](#) or email the team at elt-tr.qi@nhs.net

People Participation Information

We want our service users and carers to get the very best services. We can only do this by listening and working with them.

Who can get involved?

Service users who are currently using East London Foundation Trust services and carers who are caring for someone who is using the service.

How do service users or carers get involved in People Participation?

Contact the People Participation Leads for Psychological Therapies at elft.ntt-peopleparticipation@nhs.net / elft.peopleparticipation@nhs.net or [complete this form to register your interest](#).

Robert Sykes, robert.sykes5@nhs.net | People Participation Lead for Equity, Diversity and Inclusion

Staff Network Details

RaCE Network: elft.raceleadssupport@nhs.net

LGBTQIA+ Network: elft.lgbtq@nhs.net

ELFT Ability Network: elft.ability@nhs.net

Women's Network: elft.womens.network@nhs.net

Intergenerational Network: elft.intergenerational_network@nhs.net

Men's Network: elft.mensnetwork@nhs.net

Trust Wellbeing Contacts

Freedom to Speak Up

Freedom to Speak Up Guardians help:

- Protect patient safety and the quality of care
- Improve the experience of workers
- Promote learning and improvement by ensuring that staff are supported in speaking up.

FTSU guardians ensure that barriers to speaking up are addressed, a positive culture of speaking up is fostered and issues raised are used as opportunities for learning and improvement.

To get in contact, you can email their direct confidential inbox at elft.freedomtospeakup@nhs.net or call the FTSU guardian at 07436 027388 or alternatively, [you can fill out this form](#).

Complaints/feedback:

You can fill out [this feedback form](#) to express anything from positive feedback to suggestions, comments and complaints. However, if you would like to make a formal complaint, please contact the complaints services by telephone at 0800 085 8354 or email them at elft.complaints@nhs.net

Organisations & Resources

This is a list of resources and external organisations who serve various communities, both nationally and locally, which may be helpful to you when working with specific communities. Inclusion in this list does not constitute endorsement of any of the below organisations. This is not an exhaustive list, nor does it cover all intersections or every identity. We will continue to add to it. Please contact the EDI team if you have specific suggestions.

Resources	How to access
<p>General</p> <p>Equality Act 2010: Guidance</p> <p>Equality and Human Rights Commission</p> <p>Health Foundation</p>	<p>https://www.gov.uk/guidance/equality-act-2010-guidance</p> <p>https://www.equalityhumanrights.com/</p> <p>https://www.health.org.uk</p>
<p>Age</p>	<p>http://www.ageuk.org.uk</p>
<p>Religion & Belief</p> <p>JAMI - Jewish Mental Health Charity</p> <p>British Islamic Medical Association</p> <p>Hidayah UK - LGBTQ+ Muslim Charity</p>	<p>https://jamiuk.org</p> <p>https://britishima.org</p> <p>https://hidayahlgbt.com/</p>
<p>Gender</p> <p>NAWO – National Alliance of Women’s Organisations</p> <p>The UK National Committee for UN Women</p> <p>Andy’s Man Club - Men’s Peer Support</p> <p>Movember - Men with Mental Health and Physical Health Struggles</p>	<p>https://nawo.org.uk/</p> <p>https://www.unwomenuk.org/</p> <p>https://andysmanclub.co.uk/</p> <p>https://uk.movember.com/</p>
<p>Sexual Orientation</p> <p>Stonewall – lesbian, gay, bi, trans, queer, questioning and ace (LGBTQA+)</p> <p>Galop - LGBT+ people who have experienced abuse and violence</p> <p>MindOut - LGBTQ Mental Health Charity</p>	<p>https://www.stonewall.org.uk/</p> <p>https://galop.org.uk/</p> <p>https://mindout.org.uk/</p>

Organisations & Resources

Resources	How to access
<p>Gender Reassignment</p> <p>GIRES - Gender Identity Research and Education Society</p> <p>Gendered Intelligence - Trans-led and trans-involving charity</p>	<p>https://www.gires.org.uk/</p> <p>https://genderedintelligence.co.uk/</p>
<p>Disability</p> <p>Scope - Equality for Disabled People</p> <p>Purple Space - supports employers with good practice around disability</p> <p>Health and Safety Executive - information about health and safety at work</p>	<p>https://www.stonewall.org.uk/</p> <p>https://galop.org.uk/</p> <p>https://www.hse.gov.uk/index.htm</p>
<p>Learning Disabilities</p> <p>Mencap - Learning Disability Charity</p> <p>BILD - British Institute for Learning Disabilities</p>	<p>https://www.mencap.org.uk/</p> <p>https://www.bild.org.uk/</p>
<p>Hearing Impairments</p> <p>RNID - Royal National Institute for Deaf People</p> <p>BDA - British Deaf Association</p>	<p>https://rnid.org.uk/</p> <p>https://bda.org.uk/</p>
<p>Visual Impairments</p> <p>RNIB - Royal National Institute of Blind People</p> <p>Sight Research UK</p>	<p>https://www.rnib.org.uk/</p> <p>https://www.sightresearchuk.org/</p>
<p>Mental Health</p> <p>Mental Health Foundation</p> <p>Together for Mental Wellbeing - Service User Leadership</p> <p>Wellcome - Mental Health Research</p>	<p>https://www.mentalhealth.org.uk/</p> <p>https://www.together-uk.org/</p> <p>https://wellcome.org/what-we-do/mental-health</p>

Organisations & Resources

Resources	How to access
<p>Race</p> <p>Race Equality Foundation</p> <p>Race Equality First</p> <p>Black Leaders in Healthcare</p> <p>ADHD Babes - Black women and nonbinary people with ADHD</p>	<p>https://raceequalityfoundation.org.uk/our-work/</p> <p>https://raceequalityfirst.org</p> <p>https://blackleaders.org.uk/</p> <p>https://www.adhdbabes.com/</p>

Glossary

Term	Definition
Age (protected characteristic)	A person belonging to a particular age (e.g. 32-year-olds) or a range of ages (e.g. 18- to 30-year-olds).
BAME/BME (Black, Asian and Minority Ethnic/Black and Minority Ethnic)	BAME/BME refers to collective ethnic minority populations. These include Black, Asian and minority ethnic (BAME), Black and minority ethnic (BME), and racialised minorities. This is not an endorsement of the term, but it has been used in previous research into racial inequities within the NHS, including within this Trust.
CQC (Care Quality Commission)	Independent regulator of health and social care in England.
Co-Learning	Enabling a reciprocal learning process between staff, service users, carers and communities about the needs of ethnically and culturally diverse communities.
Coproduction	Ensuring ethnically and culturally diverse patients and carers are involved in developing and shaping services, by working together with staff from design to delivery.
Cultural awareness	Recognising and understanding the needs of the diverse cultural backgrounds of the communities a Trust serves.
Disability (protected characteristic)	A physical or mental impairment that has a substantial and long-term negative effect on your ability to do normal daily activities.
Equality vs Equity	Equality simply means everyone is treated the same exact way, regardless of need or any other individual difference. Equity, on the other hand, means each individual is provided with the resources they need to succeed.
FFT (Friends and Family Test)	A feedback tool that asks for feedback on overall experience of using an NHS service.
Gender reassignment (protected characteristic)	Where a person has proposed, started or completed a process of transitioning from one sex to another.
Intersectionality	Understanding the unique needs of people with multiple protected characteristics, such as Black LGBTQ people, or disabled trans communities.
LGBTQIA+ (Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual)	An umbrella term for those whose gender identity and/or sexual orientation is not cisgender and heterosexual.
Marriage and civil partnership (protected characteristic)	A person who is married or in a civil partnership.

Glossary

Term	Definition
Pregnancy or maternity (protected characteristic)	Protection against discrimination on the grounds of pregnancy and maternity. Regarding employment, this protection covers the period of pregnancy and any statutory maternity leave. It is unlawful to discriminate against women breastfeeding in a public place.
PALS (Patient Advice and Liaison Service)	This offers confidential advice, support and information on health-related matters. They provide a point of contact for patients, their families and their carers.
Partnership working	Mental health services working other organisations beyond the NHS, such as religious groups, VCSE organisations, social care, police and others.
PCREF (Patient and Carer Race Equality Framework)	NHS England's first antiracism framework, piloted by ELFT in 2021 and launched nationally in November 2023.
PSED (Public Sector Equality Duty)	The public sector equality duty is a legal requirement for public authorities and organisations carrying out public functions.
Protected characteristics	These are the nine characteristics that are protected under the Equality Act 2010, meaning it is against the law to discriminate based on: <ul style="list-style-type: none"> • Age • Gender reassignment • Marriage or civil partnership • Pregnancy or maternity • Disability • Race • Religion • Sex • Sexual orientation
PREMs (Patient-Reported Experience Measures)	A tool to measure patients' perceptions of their experience when receiving care.
PROMs (Patient-Reported Outcome Measures)	A tool to measure patients' views of their health status.
QI (Quality Improvement)	A methodology when tackling complex problems that healthcare services have struggled to solve.
Racialised question	This refers to a question in patient and carer feedback mechanisms that ask if their race has played a part in the care that they have received.
Race (protected characteristic)	Race refers to a group of people defined by their nationality, heritage, ethnicity, national origin and citizenship.

Glossary

Term	Definition
Religion or belief (protected characteristic)	Religion refers to any religion, including a lack thereof. Belief refers to any religious or philosophical belief and includes a lack of belief. Generally, a belief should affect your life choices or the way you live for it to be included in the definition.
Sex (protected characteristic)	Assigned to a person on the basis of primary sex characteristics (genitalia) and reproductive functions. Sometimes the terms 'sex' and 'gender' are interchanged to mean 'male' or 'female'.
Sexual orientation (protected characteristic)	A person's sexual attraction towards their own gender, another gender or to all genders (whether someone is heterosexual, or part of the LGBTQIA+ community).
Staff knowledge and awareness	Staff recognising and understanding racialised experiences, overcoming biases and prejudices.
FFT (Friends and Family Test)	A feedback tool that asks for feedback on overall experience of using an NHS service.
Trauma-informed care	An approach to health and social care that recognises the widespread impact of trauma and adversity on communities and individuals served.
Workforce	Staff, students and volunteers who work for the NHS.

Do you have any questions about this pack?

Contact the Equity, Diversity and Inclusion team at elft.edi-team@nhs.net