

**The North West BAME Assembly**

**Anti-Racist Framework**

**Bronze Status Assessment**

**Submission Guidance**

The Submission Template has been developed to support organisations carrying out a full review of how they have delivered the framework.

The template allows organisations to identify key evidence to demonstrate that they have fully met each of the framework’s key deliverables.

This stage of the assessment should be carried out when an organisation is confident that they have made significant progress against all the requirements listed in the Anti-Racist Self-Assessment Tool.

Once an organisation is confident that they have delivered against each of the antiracist framework’s key deliverables and have identified robust evidence of their delivery utilising the self-assessment tool, a submission can be made to the North West BAME Assembly Review Panel for recognition.

Should your organisation wish to submit evidence in an alternative format, please contact us at [england.nwbame\_assembly@nhs.net](mailto:england.nwbame_assembly@nhs.net).

**Submissions should be sent to** [**england.nwbame\_assembly@nhs.net**](mailto:england.nwbame_assembly@nhs.net) **for assessment no later than 5pm on the closing date.**

**How To Complete the Assessment**

Narrative should be brief and supported by good evidence.

The best and most appropriate evidence should be used to demonstrate any statements of compliance against the key deliverables expected for each principle of the framework.

No more than three pieces of evidence should be submitted for each key deliverable.

Organisations can provide the same evidence in more than one section if relevant.

**Scoring**

Evidence submitted will be scored using the following system:

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| **SCORE** | |
| **-1** | not achieved/ no or insufficient evidence |
| **0** | achieved with supporting evidence |
| **+1** | exceeded standard with supporting evidence |

**Submission of evidence**

**Bronze Status**

For each of the deliverables, confirm whether you have achieved with a ‘YES’ or ‘NO.’ Each deliverable achieved, should be supported with evidence.

**When submitting documents or links to support your application, please clearly label the attachments and reference the documents or links in your supporting information. Please only include the relevant pages of a document if the document is more than 5 pages long**.

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| The appointment of an executive or director level EDI sponsor with a commitment to advancing antiracism within the organisation. |
| **Acceptable evidence:** Name of the sponsor, role, or title, when appointed or role agreed. |

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| Evidence of how the organisation has acted to make antiracism work mission critical in the past year. |
| **Acceptable evidence:** project plan/ outline, policy paper, board meeting notes, etc that details how antiracism work has been prioritised within your organisation. Progress updates on the status of the work and the impact up to submission should be included. |

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| An organisation must have set and published at least one stretch goal that goes beyond legal or NHS assurance frameworks compliance. |
| **Acceptable evidence:** link or copy of document detailing stretch goal, background information, progress updates, plans to sustain or increase progress in future. |

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| The organisation can demonstrate progress over the last 12 months of reducing an identified health inequality. |
| **Acceptable evidence:** project plan/ outline, policy paper, board meeting notes, etc that provides details of the health inequalities and the actions taken to reduce them. Progress updates on the status of the work and the impact up to submission should be included. |

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| The organisation must have communicated clearly that it takes a zero-tolerance approach to racist abuse from service users or staff members. |
| **Acceptable evidence:** link or copy of document detailing zero tolerance policy or actions, instances of racist abuse over the time-period covered, actions taken to address, and future plans to further reduce racist discrimination in the organisation. |

For each deliverable please outline how the work will be continued past submission. This is to ensure that actions taken to achieve Bronze status are embedded into the practices, processes, policies, and culture of your organisation.

**Narrative**

An overarching narrative of the organisation’s journey towards Bronze status, including details around the support from leaders, teams and partners, staff feedback, challenges faced, lessons learned, and key successes. This narrative should include how you embedded the 5 antiracist principles in your work.

**Stakeholder review**

To ensure that the impact of the antiracism work is consistent across all levels of the organisation, stakeholders are required to provide their comments to support your submission.

**Board review**

The Board should review your application before submission and provide a short narrative detailing how they supported the adoption, implementation, and actions to achieve Bronze status.

**Staff network review**

The Race/ Ethnicity Staff Network should review your application and provide feedback outlining how they were involved in the development of the action plans as well as the impact that the work has made.

**Patient group review**

If your organisation has patient/carer/ service user groups, these groups should review your application and provide feedback outlining how they were involved in the development of the action plans and the impact that the work has made.

**Silver Status Action Plan**

To ensure continuity of the work, we suggest submitting your draft action plan for the next level of achievement with your submission. A sample action plan can be found in the Antiracist Framework document found [here](https://www.england.nhs.uk/north-west/nhs-north-west-bame-assembly/anti-racist-framework/).



**Bronze Status Submission**

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| **Submission date** | **10 May 2024** |
| **Name of Organisation** | **East Lancashire Hospitals NHS Trust** |
| **Submission completed by** | **Emma Dawkins** |
| **Role** | **Associate Director of OD** |
| **Contact details** | [**emma.dawkins@elht.nhs.uk**](mailto:emma.dawkins@elht.nhs.uk) |

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| **BRONZE STATUS** | | |
| **DELIVERABLE** | **ACHIEVED**  **YES/ NO** | **SUPPORTING INFORMATION**  **Supporting information should be 2**  **300 words max.** |
| The appointment of an executive or director level EDI sponsor with a commitment to advancing antiracism within the organisation. | Yes | ELHT’s approach to anti-racism is through the clinical quality academy programme which is a system approach to quality improvement. Martin Hodgson, Chief Executive is the executive sponsor for the programme as of September 2023.  The Board is fully committed to becoming an active, visible, and intentionally anti-racist organisation, as part of the development of a compassionate and inclusive culture to deliver safe, personal and effective care.  Led by our Chair, Shazad Sarwar, a member of the NW BAME Assembly, the Board have committed to **Anti-Racism** as a Board Objective and Trust strategic improvement priority for 2023/2024.  In addition:   * CEO Chairs the BAME Staff Network (since 2021) * Chief Nurse Chairs Health Inequality Committee (since 2024) * Chair is the new chair of the Inclusion Group (June 2024) * Director of Integration, Strategic Partnerships and Resilience chairs the Healthcare Alliance for Pennine (since 2022) * Director of People Culture has specific objective around anti-racism (2024/2025) * Eight diverse staff networks drive the agenda to ensure we take an intersectional approach to anti-racism work * Ther Board is representative of the wider community. (WRES Metric). * All the Board have taken part in empathy interviews as part of the Anti-Racism project and are committed to leading anti-racism and in developing as intentional, visible and actively anti-racist role models. Board development plans for 2024-25 support this further. * Board members have previously participated in Reverse Mentoring. * The People and Culture Committee oversees progress on our anti-racist journey as a sub-committee of Board.   Evidence to support this:   * Evidence 1 – Network sponsorship * Evidence 2 - Aarushi Team structure * Evidence 3 - Board Objectives   Plans for continuity:   * Review of Inclusion Group to expand membership and chair arrangements * Culture and Belonging dashboard development to report to the People and Culture Committee * Further progression of board development * New programme of reverse / reciprocal mentoring |
| Evidence of how the organisation has acted to make antiracism work mission critical in the past year. | Yes | The commitment to anti-racism is embedded within our strategic improvement priorities (evidence 5) board objectives (evidence 3) and People and Culture plan for 2024/25.  In collaboration with our BAME Network and Anti-Racism CQA Project Team (Aarushi), we have cocreated and launched our anti-racism statement and charter. These documents signal our commitment to racial equity, both internally and externally, demonstrating our dedication to fostering an inclusive environment where everyone feels valued, respected, and have a sense of belonging.  The Aarushi Team have carried out data gathering, questionnaires and empathy interviews to inform the programme of work that is summarised in the slide pack as evidence. The project has set quality improvement targets linked to a range of workforce data, patient experience and outcome data.  Recognizing the challenges faced by internationally educated nurses, we have taken proactive steps to provide them with comprehensive support through recruiting two pastoral care nurses, establishing an International and Overseas Staff Network and bespoke career development support with cultural competence training for their line managers.  In addition, we have also prioritised education and awareness-building through engaging events and initiatives. Nova Reid, (anti-racism thought leader/ author) was keynote speaker at our Festival of Inclusion and ‘The Mighty Pen’ dedicated a book club session to "The Good Ally." This session allowed staff to delve deeper into the principles of being an active bystander and explore practical strategies for recognising, and challenging racism. By leveraging the expertise of thought leaders and providing platforms for discussion and education, we are empowering our staff to actively engage in anti-racism efforts and contribute to meaningful change within our ELHT and beyond.  In summary, our evidence speaks volumes about ELHT's unwavering commitment to anti-racism. From strategic alignment to tangible actions and support structures, we are actively working towards creating a more inclusive and equitable workplace for all.  Evidence:   * Evidence 4 - Anti-racism statement and charter launched in February 2024 * Evidence 5 - 2024/25 Trust strategic priorities * Evidence 6 – Aarushi project overview   Plans for continuity:   * Divisional dashboards disaggregated by ethnicity to build divisional accountability * Full programme of inclusive leadership, anti-racist and allyship development |
| An organisation must have set and published at least one stretch goal that goes beyond legal or NHS assurance frameworks compliance | Yes | ELHT’s commitment to anti-racism extends far beyond mere compliance; it's about driving real transformation and making a significant impact on the inequalities that persist. This ethos is vividly reflected in the breadth and depth of our initiatives, all geared towards effecting meaningful change.  At the forefront of our anti-racism efforts is the Anti-Racism Clinical Quality Academy (CQA) improvement program. With four key aims, this program embodies our commitment to driving tangible improvements in racial equity within our clinical settings.  Key stretch targets:   * Increase Visibility of Trust leadership commitment to becoming an active, intentional and visible antiracist organisation by 20% by end of 2024 * Increase BAME representation among Midwifes across band 6 and above by at least 4% by end of 2024 and implement a Trust wide EDI dashboard for robust governance through developing an accountability and assurance framework * Increase staff wellbeing and belonging median scores by at least 3 points in periodic pulse survey by end of 2024 * Enhance patient experience and positive FFT feedback equitably by ethnicity by 10% by end of 2024 * Positive disruption to wider system with anti-racism summit   In addition to being the pilot area for the anti-racism programme, Maternity and Neonatal services have a 3-year delivery plan to support their ongoing culture work and to reduce disparities.  Our commitment to transparency and accountability is evident in our rigorous monitoring and reporting mechanisms. WRES data, staff survey reports, and workforce data disaggregated by ethnic groups are regularly presented at the People & Culture Committee, ensuring that racial disparities are not only monitored but actively addressed in line with the EDI Improvement Plan.  Evidence:   * Evidence 7 - Aarushi Anti-racism QI Project Driver Diagram * Evidence 8 – Maternity and Neonatal 3 Year Delivery Plan * Evidence 9 - EDI Integrated Action Plan   Plans for continuity:   * Anti-racism strategy * Wider system partners anti-racism summit. * Health inequality committee – project scoping and agreement of metrics |
| The organisation can demonstrate progress over the last 12 months of reducing an identified health inequality. | Yes | The Trust is committed to reducing health inequalities and approaches this through the wider lens of promoting health equity. Furthermore, by leveraging its role as an anchor institution and working in partnership with other public sector bodies, the Trust seeks to purposely influence the wider determinants of health and play an active role in the prevention agenda.  Key actions include, but are not limited to:   * Progressing its ambition through a bespoke, co-created Health Equity strategy. * Nurturing strong relationships with placed-based partners. Focus centres on an ‘East Lancashire-wide Anti racism’ campaign, where each of the member groups adopts a similar stance on racism. * A ‘Health Inequalities Committee’ (HIC), where clinical and non-clinical staff have been brought together to tackle issues at the Trust. * Co-creating priorities covering health language, anti-racism and inclusive leadership. * Developing its own logic to screen Referral to Treatment list for inequalities, in accordance with index of multiple deprivation quintile and ethnicity. * At present there are specific projects being conceptualised through the HIC, which focus on BAME communities: * Within maternity services, a focus on *‘birth without bias’*, is designed to pre-emptively address health inequalities is included in ELHT’s future, operational plans. * Clopidogrel: a medication used to prevent clots, is found to be ineffective in ≈15% of European patients, ≈18% of African, American and Caribbean patients, and ≈28% of Asian patients. This ineffectiveness is attributed to a genetic variant affecting the metabolism of Clopidogrel, potentially leading to second strokes or TIAs before the issue has been identified. * ELHT have also implemented a proactive translation and interpretation training programme where 100-staff have been trained since January 2024. * Initiatives are being developed, where screening BAME communities at greater risk of developing diabetes and breast screening, is the central focus.   Evidence:   * Evidence 10 - Minutes of health inequalities meetings * Evidence 11 - Strategy for health inequality work across Pennine. * Evidence 12 – Projects – e.g. translation and interpretation or maternity   Plans for continuity:   * Stroke care project * Review of all Health Inequality programmes of work * Targeted health checks * EDS 22 |
| The organisation must have communicated clearly that it takes a zero-tolerance approach to racist abuse from service users or staff members | Yes | ELHT’s stance on racism is unequivocal. We understand that being anti-racist demands more than passive non-engagement—it requires active intervention to combat the harm caused. We are implementing a comprehensive strategy to communicate and enforce our approach to not tolerating racist abuse, both from service users and staff members.  Central to this strategy is a targeted campaign, aimed at educating and empowering both our staff and the public. Through this campaign, we make it abundantly clear that racist behaviour will not be tolerated in any form within our Trust.  We have dedicated Freedom to Speak Up Guardians and Ambassadors (including from the BAME workforce) providing support to individuals experiencing incidents of racial discrimination, ensuring that voices are heard, and appropriate action is taken.  Our Early Resolution policy further demonstrates our commitment to swiftly addressing instances of racial discrimination through intervening early, we aim to prevent escalation and mitigate the harm caused.  Importantly, we recognise the importance of prevention through education and awareness. That's why we're working upstream to incorporate EDI and cultural competence training for panels, investigators, and staff. By equipping our teams with the necessary knowledge and skills, we aim to foster a culture where racist abuse is not tolerated.  Continuous improvement activities, including ongoing ER case work and best practice sharing, ensure that we're constantly evolving and refining our approach to tackling racist abuse.  Finally, our commitment to eliminating inequalities and discrimination was further underscored at our 2023 festival of Inclusion. Facilitated workshops, such as the one led by Roger Kline, focused on embedding anti-racist principles into our policies, systems, culture, and processes.  In summary, ELHT leaves no room for ambiguity when it comes to racism. Through clear communication, robust policies, and ongoing education, we're actively working to create a culture where racist abuse is not just condemned but actively combated at every turn.  Evidence:   * Evidence 4 - Anti-racism statement and charter (An open and visible commitment to zero tolerance clearly communicated in this). * Evidence 13 - Early resolution policy * Evidence 14 - Staff Guardians and champions (BAME Representative Ambassadors)   Plans for continuity:   * Focus group with HR, investigators, staff side, MHPS * Targeted and specific support for those that have experienced racial discrimination * Development programme specific for HR and investigators. * Full anti-racism campaign plan and evaluation of impact * Review of policies |

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| **NARRATIVE**  **(250 words)** |
| East Lancashire Hospitals Trust is proud to provide services to a diverse population. As a Trust we aim to deliver safe, personal and effective care and consider ourselves to be the ‘ELHT Family’ where we foster a deep sense of belonging. However, the Trust is still on a journey when it comes to becoming an anti-racist organisation. Becoming anti-racist is a positive intervention to develop a more compassionate and inclusive culture, through compassionate and inclusive behaviours in action.  Since the pandemic and the death of George Floyd, there has been increased focus on race and the impact of racism in society and in the Trust. There is acceptance that racism is a social construct, a public health issue and a systemic challenge.  The Trust is committed to several improvements related to fair and inclusive recruitment and career development, health equity, experience, wellbeing and belonging.  The Aarushi project (a Clinical Quality Academy programme) has been established to address this issue using QI approaches to understand the lived experience of our patients and colleagues through questionnaires, empathy interviews and patient groups and codesign solutions.  Importantly, our BAME staff network and chairs are playing a key role in leading this work with allies and senior leaders using their position and power to make changes and influence others.  Whilst the project is part of a time limited programme, this has helped to galvanise support and gather momentum, there will need to be a longer work plan, which this framework helps to provide. |

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| **BOARD REVIEW**  **(250 words)** |
| Whilst there is much to celebrate at ELHT in terms of dedication to service, we live and work in a society that is harmed by racism, both physically and psychologically, in the NHS nationally and in our organisation. We know that our racially and ethnically diverse colleagues and patients too often have worse experiences than their white counterparts.    At ELHT we are not only determined but WILL change that. It’s the RIGHT thing to do. The ELHT Board is COMMIITTED to this.    Our Anti-Racism plan has been designed in collaboration with a diverse group of colleagues and is fully supported by the Board, who welcome being held ACCOUNTABLE for its realisation. This plan is not an initiative, tick box exercise or the sole concern of minority groups – It is the responsibility of ALL of us at ELHT.    This plan is part of the golden thread across everything we do and will play fundamental role in us becoming a truly inclusive organisation. As the Chair of the Trust, I recognise this is our first step, but it reflects our commitment as an organisation to our collective stance against racism, discrimination in all its form, and inequitable treatment.  **Shazad Sarwar**  **Chair** |

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| **STAFF NETWORK REVIEW**  **(250 words)** |
| ELHT’s BAME network recognises the pivotal role it plays in supporting and promoting inclusivity and belonging for its BAME staff and aligning appropriate allies across the organisation. Chaired by the Chief Executive Officer, the network welcomes all staff of colour, as well as facilitating non-BAME staff who are interested in supporting the network.  The Trust continues to evolve the agenda, extending the invite and making sure the BAME staff network is a conduit where BAME staff and allies are able to drive the antiracism campaign across every area of the Trust.  As such three of the co-chairs of the Network lead the Aarushi Project – Dr U Krishnamoorthy (Clinical Lead), Arif Patel (Health Equity) and Nazir Makda (EDI Lead) along with a wider team. This ensures that our Anti-Racism programme is informed by the voice of lived experience.  Importantly this builds on qualitative review carried out during the Pandemic (Evidence 15) which initiated this important work setting out the priorities based on the very real experience of our staff and patients.  The BAME Network will continue to provide input, advice and challenge to the programme and were proud to develop the Anti-Racism Charter.  **Arif Patel**  **Co-Chair of BAME Network** |

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| **PATIENT GROUP REVIEW**  **(250 words)** |
| ELHT’s Public Participation Panel provides a patient and public voice for continuous improvement of the services that ELHT delivers to its patient population. We do this by ensuring that the views of service users are sought, co-ordinated and fed back to the Trust. The Panel always strives to demonstrate an inclusive approach ensuring that the views of service users are representative of the local population.    The panel recognises the diverse nature of the patient population, and we work hard to ensure that we are able to adequately represent as much of this population as possible, in particular our BAME patients.    As such we are extremely supportive of this project to intentionally become an anti-racist organisation, and we will offer any assistance possible to ensure that this project is successful.    We have introduced a proactive recruitment campaign and are reaching out to our partner networks and organisations in the community, for example Health Watch, to ensure that we build a panel which is as diverse and representative as possible.    This is a vital aspect of our development, as we learn and understand what specific requirements these patient groups have when it comes to the delivery of Safe, Effective and Personal care. We work with charities and organisations across the East Lancashire region, and our own BAME members are also active.    The panel looks forward to working with the team on this ground-breaking initiative, and an invitation to present to the panel on this is already in the mail.    **Christopher McIlveen**  **Chair – ELHT PPP** |

**Draft Silver Status Action Plan**

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| **Action** | **Person/**  **Team** | **Timescale** | **Progress** | **Comments** |
| Set up a local Black, Asian and Minority Ethnic leadership council within your organisation. | **Head of EDI / BAME Network Chairs** | **Q3 2024** |  | BAME Assurance Group in place. Plans to review and refresh Group to oversee the progress. |
| All leaders at Band 8A and above must have a personal development plan goal agreed around equality, diversity and inclusion, and a process to report annually the percentage of these goals that have been met. | **Associate Director of OD** | **Q2 2024** |  | All staff have been advised to have EDI objective. This is stated in the appraisal checklist on the Learning Hub. Process to report on the % of goals met needs to be established. |
| Evidence of inclusive leadership education for all executive directors. | **Associate Director of OD** | **Q2 2024** |  | All executives and board members will participate in Board development on Inclusive Leadership. NHS Providers offer and NHS NW Leadership Academy offer to be circulated. Reciprocal mentoring to be established across the system from September 2024. |
| An executive director must attend Black, Asian and Minority Ethnic staff network meetings at least four times a year. | **Chief Executive** |  |  | This is already in place. Martin Hodgson, CEO attends the BAME staff network. Whilst there are several cochairs with lived experience he was asked to chair the meeting by the members. |
| WRES data and workforce data disaggregated by ethnic groups to be presented at board meetings to ensure that racial disparities are monitored and addressed as a part of the business as usual. | **Executive Director of People and Culture** | **Q2 2024** |  | Development of culture and belonging dashboard to be finalised in Q2 2024 providing quarterly data.  Schedule of reporting to People and Culture Commitee and Board to be reviewed in line with new governance reporting. |

**Next Steps**

We anticipate that organisations will commit to an on-going journey towards the other levels of recognition in this framework.

Anticipated timelines for the achievement of each level after adoption.

**Bronze:** 9 months

**Silver:** 18 months

**Gold:** 36 months

These are the minimum timelines and are a guide to help with your action plans.

Assessment will be open twice a year between April and May and September and October.

The Assembly will continue to support organisations working on the framework through drop-in sessions, one-to-one meetings, Board sessions, and other offers. Please contact us at [**england.nwbame\_assembly@nhs.net**](mailto:england.nwbame_assembly@nhs.net)**.**