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To: Chief executives of NHS trusts and  
foundation trusts  
Chairs of NHS trusts and foundation trusts and  
CCG Accountable Officers  
Chairs of ICSs and STPs

NHS England and NHS Improvement  
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Copy to: NHS Regional Directors

19 May 2020

Dear colleagues

## **Diverse representation in decision making and workforce equality**

Firstly, we would like to thank you for all that you and your colleagues are doing to respond to COVID-19 in these incredibly challenging times – we sincerely appreciate the continued dedication and commitment of all **our NHS people** working in organisations across the country.

On Wednesday 29 April, Sir Simon Stevens and Amanda Pritchard wrote to you regarding the second phase of the NHS response to COVID-19. As noted in that letter, there is emerging evidence that the virus is having a disproportionate impact on our black, Asian and minority ethnic (BAME) colleagues.

**One of the areas we are focusing on is representation in decision making**, which will ensure that BAME and disabled staff have influence over decisions that affect them. Data collections, including those which contribute to the Workforce Race Equality Standard (WRES) and Workforce Disability Equality Standard (WDES), had to be paused as part of the initial response to COVID19, however, **WRES and WDES implementation** including associated data collections is now resuming

Organisations are also being asked to **review COVID-19 command** and governance structures, for levels of diversity representation in leadership and decision-making.

We know that chairs and non-executive directors are expected to lead internal scrutiny and assurance at all levels, but we would strongly encourage you to tap into the immense talent and resource that already exists within our organisations. This includes equality, diversity and inclusion leads and, where they exist, trained WRES experts.

Classification: Official

On Thursday 30 April, we hosted a webinar for more than 240 **BAME staff network leads** from across the NHS. Key themes included:

- **better resourcing of staff networks**
- **giving more power to the networks**
- **ensuring robust connections between staff networks and their boards**

We also hosted a virtual meeting of over 200 disabled staff network chairs and disabled leaders. We will be following up with attendees as a priority to identify what we can all do – both individually and as a collective. Annex A summarises some of the actions that are being taken following this session.

These networks, along with others, are critical to our organisational and system-wide response to the virus. We encourage you to engage and fully utilise the vast wisdom that they hold – and to develop such forums where they do not exist.

By embracing and implementing the key recommendations cited above – as well as our collective passion and commitment to health equality for all, we will be better able to respond to the virus – now and in the months to come.

Over the coming days, the WRES and WDES Implementation teams will be in touch with your organisations regarding the collection of this years' data, as well as obtaining data for your virus response structures.

In the meantime, please accept once again our personal thanks and support for the remarkable way in which you and all **our NHS people** have risen to this exceptional health challenge.

Best wishes,



Prerana Issar  
Chief People Officer for the NHS



Dido Harding  
Chair of NHS Improvement

## Annex A

<b>Actions arising from the BAME staff network webinar 30.04.20</b>	
<b>Theme</b>	<b>Actions (undertaken or planned)</b>
<b>Health and wellbeing of BAME Staff</b>	<ul style="list-style-type: none"> <li>• Webinar reaching out to over 1000 staff to explore health and wellbeing needs was hosted - data will be used to tailor and improve the current offer.</li> <li>• A tailored bereavement service for colleagues in the Filipino community will be established within next 10 days.</li> </ul>
<b>Disproportionate impact of COVID-19 on BAME community</b>	<ul style="list-style-type: none"> <li>• Liaising with multidisciplinary group of experts on practical risk assessment tool; considering ethnicity as a factor in conjunction with other conditions (w/c 4 May)</li> <li>• PHE's review of COVID-19's impact on BAME communities commission by Chief Medical Officer (ongoing)</li> <li>• Work is underway to bring together race and health work, research and practice (ongoing)</li> <li>• Webinar with academics on the impact on BAME community scheduled (12/5)</li> </ul>
<b>Staff networks and support</b>	<ul style="list-style-type: none"> <li>• Letter from NHS England and NHS Improvement to NHS organisations highlighting the importance of staff networks (w/c 4 May)</li> <li>• Sharing of resources from the staff network webinar and generally about staff networks, with NHS organisations (w/c 4 May)</li> <li>• NHS England and NHS Improvement to link with Equality and Diversity Council (EDC) to focus on regional BAME staff networks for the purpose of sharing good practice (w/c 4 May)</li> </ul>
<b>Data, research and evidence</b>	<ul style="list-style-type: none"> <li>• Work is underway to bring together race and health work, research and practice (ongoing)</li> </ul>
<b>Diversity in decision making</b>	<ul style="list-style-type: none"> <li>• WRES and WDES implementation (including data submission and publication) will continue in 2020 – letter to the system outlining this (w/c 4 May)</li> </ul>

	<ul style="list-style-type: none"> <li>• Extension of WRES and WDES data collections to include data on the make-up of COVID-19 response structures (goal command and Nightingale hospitals) – letter to the system outlining this (w/c 4 May)</li> </ul>
<b>Board diversity</b>	<ul style="list-style-type: none"> <li>• WRES implementation (including data submission and publication, and implementation of the Model Employer strategy) will continue in 2020 – letter to the system outlining this (w/c 4 May)</li> </ul>
<b>Protection of BAME Staff</b>	<ul style="list-style-type: none"> <li>• NHS Employers risk assessment guidance published (29/4)</li> <li>• Liaising with multidisciplinary group of experts on practical risk assessment tool (w/c 4 May)</li> <li>• Examining evidence from 2 trusts on fit testing processes to inform how to update risk guidance further (w/c 4 May)</li> <li>• Will continue to update guidance as further evidence emerges including PHE’s review of COVID-19’s impact on BAME communities (ongoing)</li> </ul>
<b>Listening and engaging with BAME staff</b>	<ul style="list-style-type: none"> <li>• Importance of BAME staff networks – letter to the system (w/c 4 May)</li> <li>• Sharing of staff network resources to attendees of the webinar (w/c 4 May)</li> <li>• Collaborative work between WRES team and the FTSU Guardians Office (5 May)</li> </ul>
<b>Board leadership and advocacy</b>	<ul style="list-style-type: none"> <li>• NHS England and NHS Improvement to link with ongoing NHS Confederation and NHS Providers work re: the role of boards, leadership and advocacy (w/c 4 May)</li> </ul>
<b>Comms and media</b>	<ul style="list-style-type: none"> <li>• Comms and media strategy developed</li> <li>• Proactive pieces now on social media, BAME leaders, influencers, radio, television and communication channels</li> <li>• Thank-you video to our BAME workforce, blogs by senior BAME leaders and a range of webinars.</li> </ul>