# EMBEDDING THE PRINCIPLES OF EQUALITY, DIVERSITY & INCLUSION ACROSS THERAPY SERVICES – WHY?

Creating working
environments and cultures
where every individual can
feel safe, a sense of
belonging and is empowered
to achieve their full potential.

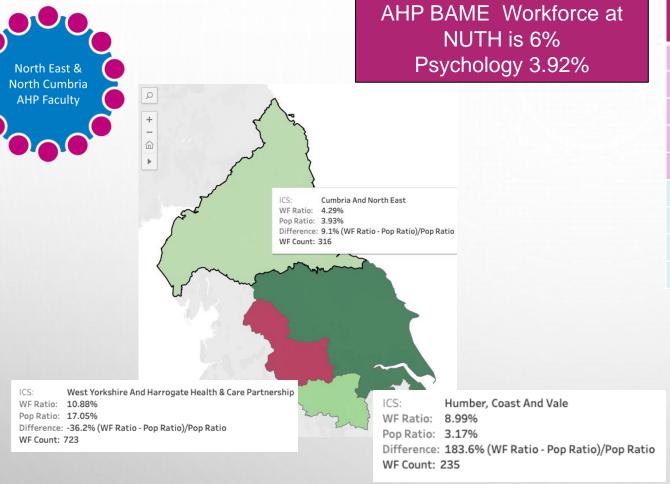
Apportioning equal value & worth to all regardless of their protected characteristics or socio economic status

Understanding the principles of Social justice and it's impact on individual health and wellbeing.

Moral case: It's the right thing to do.

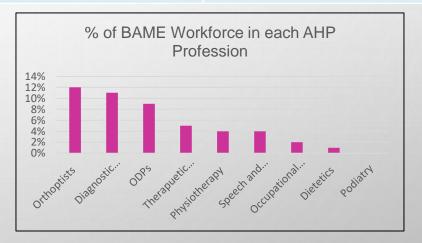
Economic: Improved patient care, Creativity, sustainability, Better problem solving....

#### **REGIONAL & TRUST BAME AHP WORKFORCE RATIOS**



Ethnicity	Ethnicity %
ВМЕ	13.38%
White	84.91%
Not recorded	1.71%

AHP Profession at NUTH:	% of BAME Workforce
Podiatry	0%
Dietetics	1%
Occupational Therapy	2%
Speech and Language Therapy	4%
Physiotherapy	4%
Orthoptics	12%
Diagnostic Radiography	11%
Therapeutic Radiography	5%
ODPs	4%





#### THREE KEY AREAS OF FOCUS

#### WORKFORCE

OUR EXISTING BME WORKFORCE

UNDERSTANDING CULTURAL DIFFERENCES

**RECRUITMENT & RETENTION** 

TALENT MANAGEMENT AND
DEVELOPMENT

**ALLYSHIP** 

## PARTNERSHIPS & COLLABORATION

**PATIENTS** 

MDT COLLEAGUES

OTHER STRATEGIC PARTNERS

HEALTH INEQUALITIES AND POPULATION
HEALTH

DEVELOPING CULTURAL INTELLIGENCE

## PIONEERING & INNOVATION

OPINIONS

UNDERSTANDING THE CULTURAL
IMPLICATION OF OUR INTERVENTIONS

HARNESSING THE POWER OF CREATIVITY
IN QUALITY IMPROVEMENT.

## OUR ROLE IN TACKLING POPULATION HEALTH AND HEALTH INEQUALITIES

- 'THOSE LEADING DEEP-REACHING AND MEANINGFUL CHANGE EFFORTS
   OFTEN REPORT THAT IT IS THE RELATIONSHIP WITH THE COMMUNITIES
   THEMSELVES THAT MATTER FOR POPULATION HEALTH AND TACKLING
   HEALTH INEQUALITIES' THE KINGS FUND
- CO-PRODUCTION WITH LOCAL COMMUNITIES
- UNDERSTANDING THE FACTORS THAT SHAPE HEALTH INEQUALITY
- UNDERSTANDING HIGHER HEALTH RISK BEHAVIOURS AND ACCESS TO CARE.

## NEXT STEPS

Positive change requires everyone to play their part

Every member of staff is accountable for their own behaviours, for calling out poor behaviours & practices, creating safe spaces, embedding the principles of EDI in their interactions with patients and colleagues.

What are you going to do?