

Trust Board Committee

COVER SHEET

Agenda Item (Ref)	<i>Secretary to complete</i>		Date: 13/03/2023	
Report Title	Equality Objectives 2023 – 2027			
Prepared by	Rachel Cowley, Head of Culture and Employee Experience			
Presented by	Rachel Cowley, Head of Culture and Employee Experience			
Key Issues / Messages	<p>We gather Equality Information about the 9 protected characteristics and other relevant information to help to analyse our positioning, to inform our decisions and to help develop our Equality Objectives related to Equality, Diversity and Human Rights.</p> <p>This process helps us in our quest for securing fair treatment, inclusion and access to our services and employment, and to fulfil our requirements under the Equality Act 2010 and the Public Sector Equality Duty (PSED). Most importantly, under the Duty, we need to demonstrate that the Trust and our objectives, work towards becoming one of the most inclusive NHS organisations.</p> <p>The current Equality Objectives for the Trust expire on 31 March 2023.</p> <p>This paper outlines the trusts proposed Equality Objectives for 2023-27.</p>			
Action required	Approve <input checked="" type="checkbox"/>	Receive <input type="checkbox"/>	Note <input type="checkbox"/>	Take Assurance <input type="checkbox"/>
	<i>To formally receive and discuss a report and approve its recommendations or a particular course of action</i>	<i>To discuss, in depth, noting the implications for the Board / Committee or Trust without formally approving it</i>	<i>For the intelligence of the Board / Committee without in-depth discussion required</i>	<i>To assure the Board / Committee that effective systems of control are in place</i>
	<i>Funding Source (If applicable): n/a</i>			
	<i>For Decisions - in line with Risk Appetite Statement – Y/N If no – please outline the reasons for deviation.</i>			
	The Committee are asked to consider and support the Equality Objectives and approval for publication by 1 st April 2023.			
Supporting Executive:	Michelle Turner, Chief People Officer			

Equality Impact Assessment (if there is an impact on E,D & I, an Equality Impact Assessment **MUST** accompany the report)

Strategy Policy Service Change Not Applicable

Strategic Objective(s)

To develop a well led, capable, motivated and entrepreneurial workforce	<input checked="" type="checkbox"/>	To participate in high quality research and to deliver the most effective Outcomes	<input type="checkbox"/>
To be ambitious and efficient and make the best use of available resource	<input type="checkbox"/>	To deliver the best possible experience for patients and staff	<input checked="" type="checkbox"/>
To deliver safe services	<input checked="" type="checkbox"/>		

Link to the Board Assurance Framework (BAF) / Corporate Risk Register (CRR)

<p>Link to the BAF (positive/negative assurance or identification of a control / gap in control) <i>Copy and paste drop down menu if report links to one or more BAF risks</i></p> <p>1.1 Failure to be recognised as the most inclusive organisation in the NHS with Zero discrimination for staff and patients (zero complaints from patients, zero investigations)</p>	Comment:
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Link to the Corporate Risk Register (CRR) – CR Number: no suitable matching risks reported	Comment:
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REPORT DEVELOPMENT:

Committee or meeting report considered at:	Date	Lead	Outcome

EXECUTIVE SUMMARY

We gather Equality Information about the 9 protected characteristics and other relevant information to help to analyse our positioning, to inform our decisions and to help develop our Equality Objectives related to Equality, Diversity and Human Rights.

This process helps us in our quest for securing fair treatment, inclusion and access to our services and employment, and to fulfil our requirements under the Equality Act 2010 and the Public Sector Equality Duty (PSED). Most importantly, under the Duty, we need to demonstrate that the Trust and our objectives, work towards becoming one of the most inclusive NHS organisations.

The current Equality Objectives for the Trust expire on 31 March 2023. This paper outlines the trusts proposed Equality Objectives for 2023-27 for Workforce and Patients.

REPORT

1. Introduction

In establishing our Equality Objectives we by utilising all the available evidence of our equality performance and then analysing shared themes from a number of information sources, including:

- Reviewing NHS information and stakeholder feedback from the Equality Delivery System (EDS 2022)
- Reviewing data from other statute workforce reports; Workforce Race Equality Standards (WRES), Workforce disability Equality Standards (WDES) and Gender Pay Gap reports
- Considering the Trust’s Strategic objectives and intentions in relation to EDI
- Internal (staff) feedback regarding performance of, and priorities for the organisation, and feedback from the Staff Survey
- External (patients, partner organisations etc.) feedback regarding performance and priorities as part of the EDS engagement process and Feedback from previous patient surveys and from patient experience tools

Whilst there are many potential objectives, the Trust is keen to focus its efforts on a number of key priority areas, based on these providing the most benefit across all of the protected groups for our People, our patients/service users and workforce.

Our Equality objectives contribute to a wider goal for the Trust Strategic objective to drive towards becoming one of the most inclusive organisations in the NHS.

2. Workforce Equality Objectives

We have proposed a set of three workforce Equality objectives and three Patient Equality Objectives which cover the period April 2023 to March 2027. Each of these equality objectives is supported and strengthened by associated targets and actions.

In summary the proposed Equality objectives are:

- 1) We will focus on recruitment into the organisation and increasing diversity in entry level roles through targeted pre-employment programmes aimed at women in the L8 area and attraction of staff already in the NHS who want to progress in their careers
- 2) We will focus on supporting existing staff from racially minoritised backgrounds to progress into leadership roles through targeted career conversations, career plans and development programmes
- 3) We will focus on staff experience for all staff, particularly those from minoritised groups currently employed at LWH, ensuring these staff are retained within our teams
- 4) We will improve access to all services for the population that we serve
- 5) We will work in Partnership with People and Communities
- 6) We will reduce Health Inequalities of our Racially Minoritised people

A more detailed draft version of the objectives and associated actions to address these objectives are outlined within appendix 1 of this report.

3. Summary / Actions

There is a requirement for Equality Objectives for a five year period to be approved and published on the Trust website in order to fulfil our requirements under the Equality Act 2010 and the Public Sector Equality Duty (PSED), demonstrating that the Trust and our objectives, work towards three key aims of eliminating discrimination; advancing equality and fostering good relations.

4. Recommendations

The Committee are asked to consider and support the Equality Objectives and approval for publication in April 2023.

Appendix 1: Equality Objectives 2023-27

Overall Objective 1: We will focus on recruitment into the organisation and increasing diversity in entry level roles through targeted pre-employment programmes aimed at women in the L8 area and attraction of staff already in the NHS who want to progress in their careers						
Objective	Actions	Link to other Indicators	Responsible Manager	Timescale	Measures	Status
<p>Improved engagement with community groups: Development of pre-employment programme / Volunteer to Career programme</p>	<p>Link with new Patient Experience and Engagement Facilitator and work collaboratively to agree which specific community groups we will work with to develop Widening Participation and Volunteers to Careers opportunities and through targeted programmes we will focus on attracting people from L8.</p> <p>Partner with local Refugee groups and charities to consider volunteer and working opportunities, offering functional skills qualifications and work experience opportunities</p>	<p>Trust Strategy / PPF Strategy</p>	<p>EDI Manager</p>	<p>August 2023</p>	<p>Audit of the number of people on widening participation and volunteers cohorts, including monitoring of protected characteristics, postcode and where they heard about the programmes (which community group).</p>	

<p>Advertise more widely in local community groups and remove practical barriers to applying for a job at the Trust</p>	<p>Accepting paper applications rather than online</p> <p>Introduce double tick for racially minoritised applicants and positive action at interview decision making stage</p> <p>For all new jobs develop accessible easy read 1-page summary of role descriptor with detailed job description attached</p> <p>LWH currently advertises roles on NHS jobs, Granby, Liverpool Combined Region and with Inclusive Companies recruitment platform. Continue to expand where we advertise roles within the L8 community and how we advertise</p>	<p>WRES / WDES / Trust Strategy / PPF Strategy</p>	<p>Head of Culture and Staff Experience / EDI Manager</p>	<p>September 2023</p>	<p>Quarterly Recruitment audits to monitor</p> <ul style="list-style-type: none"> - where vacancies have been advertised - where applicants saw vacancy advertised - postcode of applicants - protected characteristics of applicants and whether they were successful in securing the post. <p>Trust ambition to increase numbers of racially minoritised staff by 25% by 2025.</p>	
<p>Ensure we have diverse interview panels for bands 8A and above</p>	<p>Connect with the North West Equality Diversity Representative process</p> <p>Offer training opportunities to become a diverse panel member through staff Inclusion network</p>	<p>n/a</p>	<p>Head of Culture and Staff Experience / EDI Manager</p>	<p>March 2024</p>	<p>Achieve 100% diverse interview panels for band 8A and above roles and Medical roles, through Divisional reporting at EDI Committee</p>	

	<p>groups, Inclusion Forum and Great Place to Work Group. Deliver training and develop internal diverse interview panel group</p> <p>Refresh current recruitment training for all managers to ensure this includes inclusive elements of the recruitment process e.g. role of inclusive panel member, inclusive questions (to be asked at <u>all</u> interviews regardless of banding), additional assurance paperwork to be completed by inclusive panel member</p>					
<p>Offer of coaching and mentoring from our Executive Directors to NHS staff wanting to progress in their careers</p>	<p>Train all members of the inclusion networks in reciprocal mentoring and partner with Executive Director / Deputy Director</p> <p>Offer reciprocal mentoring to all staff with protected characteristics through the Great Place to Work Group</p> <p>Set up Quarterly learning sets to ensure positive elements</p>	<p>WRES / WDES</p>	<p>Head of Culture and Staff Experience / Assistant Director of Workforce</p>	<p>March 2024</p>	<p>Achievement of each Executive Director and their Deputies having at least 1 reciprocal mentoring relationship by March 2024.</p>	

	discussed within mentorship relationships have been captured and are acted upon					
Engage with staff and local community groups to develop and embed Anti-Racist Strategy	<p>Engage with staff and local community groups to develop and embed Anti-Racist Strategy ensuring that co-design and local community needs are met.</p> <p>Ensure Anti-racism statement of intent is included in all adverts, and once developed the Strategy documents to be accessible to candidates at application</p>	WRES / Staff Survey	EDI Manager	September 2023	<p>Website publication of Anti-racist Strategy following workforce and community engagement.</p> <p>Quarterly audit of adverts to ensure antiracism statement is included in 100% of job adverts.</p>	
Make changes to internal recruitment processes	<p>Survey of all candidates from minoritised backgrounds both successful and unsuccessful (every 8 weeks) to establish how the recruitment process could be improved</p> <p>Consider alternatives to interview process, allowing more practical evidence of competencies at recruitment stage</p> <p>Offer all candidates the interview questions that will be asked in</p>	WRES / WDES	Head of Culture and Staff Experience / Assistant Director of Workforce And Divisional leaders (EDI Committee members)	September 2023	Annual audit the recruitment process and type of interview offered.	

	<p>advance of interview e.g. emailed out to candidates 24 hours prior to interview</p> <p>Offer all minoritised candidates positive action mock interview in advance of their actual interview date</p> <p>Engage with the NHS E work in relation to racially minoritised recruitment.</p>					
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Objective 2: We will focus on supporting existing staff from racially minoritised backgrounds to progress into leadership roles through targeted career conversations, career plans and development programmes

Objective	Actions	Link to other Indicators	Responsible Manager	Timescale	Measures	Status
Ensure Career conversations happen for all staff and ensure racially minoritised staff have access to places on the leadership development programme	<p>Offer individual mentorship from the Director and Deputy Director of Nursing and Midwifery</p> <p>All racially minoritised staff who have identified in their career conversation during have ring fenced places on to relevant leadership programmes.</p> <p>Monitoring annual figures of racially minoritised staff accessing</p>	WRES / Staff Survey / Trust Strategy/ PPF Strategy	Head of Culture and Staff Experience / Assistant Director of Workforce And Divisional leaders (EDI)	March 2025	<p>Audit the number of completed number of career conversations for racially minoritised staff through PDR reporting function.</p> <p>Achievement of 75% of staff stating that</p>	

	Leadership development programmes through OD reports		Committee members)		the organisation acts fairly with regard to career progression / promotion, regardless of ethnic background, gender, religion, sexual orientation, disability or age (2021 = 57.6%, 2022 = 61.1%)	
Ensure racially minoritised staff are developed ready to step into roles identified through succession planning	<p>Offer leadership shadow opportunities for racially minoritised staff, to showcase different career leadership opportunities e.g. clinical / non-clinical leadership roles and learning about what these roles entail on a day-today basis</p> <p>Develop succession planning for roles where there are flight risks, and create developmental opportunities for racially minoritised staff for projects. Allowing the racially minoritised staff to be released from their existing roles for a percentage of the week to focus on personal development and exposure so</p>	WRES / WDES / Trust Strategy / PPF Strategy	Head of Culture and Staff Experience / Assistant Director of Workforce And Divisional leaders (EDI Committee members)	March 2023	Annual audit of talent management through L&OD reporting.	

	they are ready when a role opportunity arises					
Objective 3: We will focus on staff experience for all staff, particularly those from minoritised groups currently employed at LWH, ensuring these staff are retained within our teams						
Objective	Actions	Link to other Indicators	Responsible Manager	Timescale	Measures	Status
Develop an in-house EDI training programme for all staff	<p>Annual reports to be prepared from OD showing which groups of staff have accessed training in the previous quarter by protected group. This information to be correlated with the equality information disclosed by staff on ESR</p> <p>Ensure LD&A Awareness training is delivered to all staff</p> <p>Develop programme of training for all staff, considering alternative methods to ensure that staff have access through different methods that suit them and the demands on their time</p>	<p>Trust Strategy/ PPF Strategy</p>	<p>Head of OD / Head of Culture and Staff Experience / EDI Manager</p>	<p>August 2023</p>	<p>Twice annual audit from L&OD compliance data (in line with the L&OD Strategy for racially minoritised staff accessing training).</p> <p>100% Compliance with essential EDI training.</p>	

	<p>Continue to develop Resources for Inclusion, expanding on the Resources for Race Inclusion to include other protected characteristics e.g. Resources for Embracing Difference and Neurodiversity, Resources for Pride Inclusion</p>					
<p>Develop and deliver Anti-Racism training to all staff</p>	<p>Deliver workshops and book club with the Executive Directors to continue the learning and conversation in relation to Anti-Racism</p> <p>Develop and deliver workshops for Senior Leadership Forum</p> <p>Regular messaging to staff to introduce what anti-racism is and why its important at LWH, considering support to staff in relation to racial trauma as we progress with communication and development of becoming an Anti-racist organisation</p> <p>Devise a programme and commence roll out of introductory training sessions with all teams</p>	<p>WRES/ Trust Strategy / PPF Strategy</p>	<p>EDI Manager</p>	<p>March 2024</p>	<p>Audit training and ensure 100% compliance for Leaders by March 2024.</p> <p>Achievement of 100% compliance for all staff across the Organisation by March 2025.</p>	

<p>Review of current reasonable adjustment process and how our staff access this</p>	<p>Ensure better understanding of what Access to Work can offer to staff and managers and how to support staff through this process</p> <p>Review of experience and support offered to staff with disabilities and long-term conditions in relation to reasonable adjustments process and make recommendations on how to improve this</p> <p>Develop a new stand-alone reasonable adjustments policy</p> <p>Include in all offer letters how candidate can apply to Access to Work to receive support with reasonable adjustments and specialist equipment in advance of commencing in post</p>	<p>WDES / Trust Strategy / PPF Strategy</p>	<p>Head of Culture and Staff Experience</p>	<p>March 2024</p>	<p>Development of new policy for Reasonable Adjustments.</p> <p>Audit effectiveness through new starter questionnaire and achievement of 90% in staff survey for question Has your employer made reasonable adjustment(s) to enable you to carry out your work (2022 = 69.4%)</p>	
<p>We will enhance our staff wellbeing offer, with a focus on engagement with our workforce to identify key areas</p>	<p>We will use quantitative and qualitative information gathered from our staff surveys, Great Place to Work Groups, Staff Inclusion Networks and our Health and Wellbeing Conversations to develop a programme of Health and</p>	<p>Staff Survey / Trust Strategy / PPF Strategy</p>	<p>Head of Culture and Staff Experience Plus Divisional leaders (members of EDI Committee)</p>	<p>March 2024</p>	<p>Audit Staff Survey Engagement scores (2022 = 7.1) achieving a score of 7.6 by March 2025.</p> <p>Audit of ESR compliance with</p>	

	<p>Wellbeing support tailored to the needs of our workforce.</p> <p>We will have 100% compliance with Health and wellbeing conversations ensuring that all staff receive appropriate support and signposting to remain well at work</p> <p>We will develop our internal Staff Support Service, securing substantive health and wellbeing coach roles that will work across the organisation, to ensure our workforce is well equipped in relation to mental health and trauma support</p> <p>We will continue to support our staff with women's health developing the work in relation to supporting all staff (men and women) with education and support available through our policies and procedures.</p> <p>We will explore opportunities available within the hospital where we can better support our workforce with easier access for women's health matters e.g. smear tests, gynae clinics, etc</p>				<p>wellbeing conversations, achieving 100% by March 2023.</p> <p>Also monitor through EDI Committee divisional reporting and Partnership forum</p>	
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	<p>We will continue to develop the Menopause Club to ensure support is accessible for all staff in relation to the menopause and signposting for those who are experiencing symptoms that are impacting on them (both men and women)</p> <p>We will develop our support to staff in relation to physical fitness and nutrition by promoting existing opportunities e.g. walking and running clubs, and developing new opportunities e.g. community dance in L8 for all staff and their families and LWH's L8 community friends. We will research weight management support opportunities for our workforce. We will also develop our staff pantry - location and items available with healthy and nutritious recipe ideas.</p> <p>Continue to improve staff facilities.</p> <ul style="list-style-type: none"> - Staff room upgrades will continue to be considered and new equipment purchased as identified 					
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	<p>e.g. microwaves, fridges and kettles</p> <ul style="list-style-type: none"> - Review number of showers/changing facilities and lockers available and any upgrades required. - The staff conservatory and outside space will be refreshed and upgraded. 					
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Equality Objective 4: We will improve access to all services for the population that we serve

Objective	Actions	Link to other Indicators	Responsible Manager	Timescale	Measures	Status
The organisation will promote equality for people with “protected characteristics” in ensuring the environment is fit for purpose by making necessary	The organisation will achieve this objective by conducting an assessment of the physical environment to identify any barriers that may hinder accessibility for people with “protected characteristics”. The organisation will then take	This objective is in line with the organisation's commitment to promoting equality and ensuring that the physical environment is accessible and fit	Head of Estate ad Facilities/Head of Patient Experience	The organisation will achieve this objective within the next 12 months by conducting the accessibility audit, identifying barriers, and making necessary adjustments to the physical environment. The effectiveness of the objective will be reviewed regularly to ensure that the	The organisation will measure the effectiveness of this objective by conducting an accessibility audit and	

<p>adjustments to the physical environment to remove any barriers that hinder accessibility and inclusivity.</p>	<p>necessary measures to remove those barriers, such as providing wheelchair ramps, installing lifts, improving lighting, and ensuring signage is clear and easy to understand.</p>	<p>for purpose for all service users, regardless of their protected characteristics.</p>		<p>physical environment remains fit for purpose for people with “protected characteristics”.</p>	<p>collecting feedback from people with “protected characteristics”. The aim is to achieve a minimum score of 80% on the audit and receive positive feedback from service users.</p>	
<p>The organisation will ensure that the Accessible Information Standard is implemented Trust wide by creating and implementing policies and procedures that promote accessible communication for people with disabilities.</p>	<p>The organisation will achieve this objective by providing training to staff on the Accessible Information Standard, developing policies and procedures to ensure compliance with the standard, and providing accessible information to service users, such as easy-read information, braille, large print, and audio formats.</p>	<p>This objective is in line with the NHS's commitment to providing equitable healthcare services for all service users, regardless of their disability status, and ensuring that they have equal access to healthcare information.</p>	<p>Head of Patient Experience/Access Manager</p>	<p>The organisation will achieve this objective within the next 12 months by implementing policies and procedures that promote accessible communication and providing training to staff. The effectiveness of the objective will be reviewed regularly to ensure that the organisation remains compliant with the Accessible Information Standard.</p>	<p>The organisation will measure the effectiveness of this objective by conducting regular audits to ensure that all service users are aware of their right to accessible information and that staff are</p>	

					<p>trained to provide accessible communication. The aim is to achieve a minimum score of 90% on the audit.</p>	
<p>The organisation will ensure equality of access to all Trust services for people who experience communication barriers because their first language is not English by providing interpretation and translation services in a timely manner.</p>	<p>The organisation will achieve this objective by identifying service users' language needs, providing trained interpreters and translators, ensuring staff are aware of their duty to offer interpretation and translation services, and providing translated information about Trust services.</p>	<p>This objective is in line with the NHS's commitment to providing equitable healthcare services for all service users, regardless of their language or cultural background, and ensuring that they have equal access to healthcare information.</p>	<p>Head of Procurement/Head of Patient Experience</p>	<p>The organisation will achieve this objective within the next 12 months by implementing a system to identify language needs of service users, providing training to staff, and providing interpretation and translation services in a timely manner. The effectiveness of the objective will be reviewed regularly to ensure that the organisation remains compliant with the objective.</p>	<p>The organisation will measure the effectiveness of this objective by conducting regular audits to ensure that all service users who require interpretation and translation services are provided with them in a timely and efficient manner. The</p>	

					aim is to achieve a minimum score of 95% on the audit.	
Equality Objective 5: We will work in Partnership with People and Communities						
Objective	Actions	Link to other Indicators	Responsible Manager	Timescale	Measures	Status
The organisation is to build positive and enduring relationships with communities to improve services, support, and outcomes for people by identifying key community stakeholders and	The organisation will achieve this objective by identifying key community stakeholders, establishing regular communication channels, and conducting regular engagement activities, such as community events, focus groups, and outreach programs.	This objective is in line with the NHS's commitment to building and maintaining positive relationships with communities to ensure that healthcare services are responsive to the needs of local populations.	Head of Patient Experience	The organisation will achieve this objective within the next 24 months by establishing communication channels with key community stakeholders, conducting regular engagement activities, and reviewing the effectiveness of the objective through regular surveys. The effectiveness of the objective will be reviewed annually to ensure that the organisation remains committed to building positive and	The organisation will measure the effectiveness of this objective by conducting regular surveys to assess community satisfaction with the services provided and	

engaging with them on an ongoing basis.				enduring relationships with communities.	the support offered by the organisation. The aim is to achieve a minimum score of 80% on the survey.	
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Equality Objective 6: We will reduce Health Inequalities of our Racially Minoritised people

Objective	Actions	Link to other Indicators	Responsible Manager	Timescale	Measures	Status
The organisation will ensure that systematic differences in health between social groups are continuously reviewed and acted upon by implementing a regular review	The organisation will achieve this objective by establishing a health inequalities review group, providing training to staff on identifying and addressing health inequalities, conducting regular health needs assessments, and developing and implementing action	This objective is in line with the NHS's commitment to reducing health inequalities and ensuring that all people have access to equitable healthcare services, regardless of their	EDI Manager/Head of Patient Experience	The organisation will achieve this objective within the next 12 months by establishing a health inequalities review group, conducting regular health needs assessments, developing action plans to address health inequalities, and reviewing the effectiveness of action plans through regular audits. The effectiveness of the objective will	The organisation will measure the effectiveness of this objective by conducting regular audits to assess the effectiveness of action plans	

<p>process that identifies health inequalities and creates action plans to address them.</p>	<p>plans to address health inequalities.</p>	<p>social status or background.</p>		<p>be reviewed annually to ensure that the organisation remains committed to reducing health inequalities.</p>	<p>developed to address health inequalities. The aim is to achieve a minimum score of 90% on the audit.</p>	
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