Overarching Objectives	Specific Objectives	Action	Timescale	Responsibility	DH Measurement of achievement/objectives	EHRC Reporting Requirements
ACTION 1 **Strengthen policy making by increasing the use of equality evidence in DH and wider sector policy development**	1.1 Improved data collection, analysis and use of evidence 1.2 Evidence that future evaluation of policy will be able to assess the effectivenes s of the policy in reducing inequalities 1.3 Evidence that previous evaluations feed into and guide policy developme nt	Launch and continuous development of Health Equality Research Base (repository) as primary source of supporting equality evidence for DH policies	October 2010, with expanded HERB available by March 2011	Director General (DG) P&SD	HERB populated with data across all protected characteristics Use of evidence and impact criteria from the RAG ratings used s a proxy for evidence based inclusive policy – measured at six monthly and annual reviews of key policies and practices	Report on baseline data availability and gaps across all strands Report on baseline level of use of equality data in EIA and policy making To see evidence of impact on policy making and design of anticipated delivery mechanisms as elicited by six-monthly review of EIA process To see evidence of improved quality impacts of policy implementation, evidenced through reports on the monitoring and review of key individual EIAs
	1.4 Develop the system through	Deliver Portal Access Deliver outline governance structure	October 2010	DG NHS Workforce	Collect and collate equality data, analyse and share this with DH (and the wider	Evidence of improved collection, analysis and use of equality data within the

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	which improvements in the collection, quality and utilisation of public facing E&D information will occur 1.5 To provide oversight of analysis of current key performance data in order to identify key equality issues	for Data Improvement Project being led by NHS Info Centre and APHO on behalf of EDC			NHS). Provide NHS guidance that sets out: • The importance of equality and need to collect appropriate data • Communicates this to the NHS Workforce, patients and to service users	NHS, disaggregated by strand where available Evidence of routine use of equality data in mainstream policy making Evidence of DH use of equality data and evidence to provide leadership to the sector e.g. disaggregation of vital signs Evidence of progress within the establishment of new Health Information Centre as main repository, analyser and distributor.
	1.6 Ensure that analysis of key equality issues is built into future outcomes framework	Disaggregate relevant indicators (currently Vital Signs data) to support NHS Outcomes Framework(s) Address data gaps at source via refresh of Equality Monitoring Guide for the NHS	31 March 2011	DG P&SD	• Guide is published in a way that is accessible to NHS service providers	Key parts of the outcomes framework include specific equality outcomes identified on the basis of an analysis of key health inequalities. These to reflect key health inequalities evidenced in the EHRC Triennial review

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						and to be identified by January 2011 Evidence of work underway within the wider sector to achieve the equality outcomes identified in the outcomes framework Number of indicators that are disaggregated by all equality characteristics improves over baseline with progress sufficient to demonstrate that over time all equality characteristics will be included All PROMS indicators are disaggregated by equality characteristic by the end of the reporting period Evidence that the equality evidence has fed into NICE work on pathways, including evidence of appropriate messages at a senior level as to its priority and relevance Evidence of improvements in data monitoring systems

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						and practice Evidence of increased availability of data across all characteristics Evidence of use of data by sector to set equality priorities
ACTION 2 **DH produces more inclusive policy for health and social care through embedding equality into the mainstream policy process**	2.1 Improved timeliness and quality of Equality Impact Assessments	DH will consider equalities when finalising the outcomes framework and in how outcomes are measured and demonstrated. Develop integrated approach to policy scrutiny by: • Developing new tools and guidance for EIA (internal to DH and external guidance for the sector) • Developing new checklists for better policy scrutiny	31 March 2011	DG P&SD	Publication of outcomes framework and future reporting mechanisms (tba) EIAs assessed via RAG ratings, with main focus of assessment on each EIA's • how policies are identified for EIA • how EIA is integrated into policy development/review • that the appropriate people (including senior decision makers) are involved in the EIA • details of	Key parts of the outcomes framework include specific equality outcomes identified on the basis of an analysis of key health inequalities. These to reflect key health inequalities evidenced in the EHRC Triennial review and to be identified by January 2011 Reports of EIAs undertaken during the reporting period, including details of operation of the quality assurance system.

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		• Expanding the repository (HERB) to include examples of good quality EIA • Assessing staff awareness via focus groups, Champions and other engagement			involvement and consultation • details of how data and evidence have been used • details of how the policy design has changed as a result of EIA • Details of how the implementation planning has changed as a result of EIA • Details of how the quality assurance system has operated • Details of review planning • Action plans of the above EqIAs	Detailed reporting on the EIA of: - Equity and Excellence: Liberating the NHS - Commissioning for patients/ - Increasing Democratic Legitimacy in Health - Transparency in outcomes – a framework for the NHS - Public Health White Paper - Mental Health policy Revised tools and guidance for EIA that meet the standards of the EHRC guidance Evidence of robustness of gateway process in ensuring EIAs are of a high quality and are used in policy design and decision making DH policy on inequalities set out in Public Health White Paper

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	2.2 Ensure that the leadership function of health and social care sector is built into new governance arrangements	Processes for governance and quality control/assurance built into new systems	Ongoing		Evidence of the availability of, and use of, the guidance by the sector to produce better quality assessments of the impact on equality and outcomes.	Evidence of the use of the guidance by the sector to produce improved EIA and equality outcomes. (systems leader)evidence) Evidence from PROMS etc to check back that factors Raised in EIA's are being factored into policy design, and back into resulting service quality assurance.
ACTION 3 **Improved staff capacity, confidence and capability in embedding equality**	3.1 Improved staff capability and confidence in conducting equality impact assessments leading to more inclusive policy development	Provide real time coaching and support to five policy areas for undertaking equality impact assessments (as indicated in action 2) Roll out training across DH	October 2010 - ongoing	DG P&SD	Staff have greater understanding of why, when and how to conduct assessments of the impact on equality Assessment of staff awareness via focus groups, Champions and other engagement.	Survey of staff (baseline May/June 2010) demonstrates increased confidence and understanding. Survey of stakeholders' perception of DH confidence and capability on equality Directorates have individual action plans for local improvements. How many staff have attended the training, disaggregated by seniority.

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						How many senior staff have equality related objectives as part of performance management Training evaluation data Plans for revision and improvement of training following evaluation Plans for roll out of training
	3.2 Establish DH Network of Equality Champions to help mainstream equality into DH, and support better policy making by increasing colleagues' capacities to produce better quality impact assessments	Phase 1 of Network established with ongoing support, training and development Evaluate, refine and roll out Phase 2 Complete roll out of Network across DH	October 2010	DG P&SD	Improved awareness of equality issues and embedding of equality into policy development, measured as • Improved response to SES monitoring • Using current levels as a baseline, more policies cleared first time at Gateway as a result of improvement in volume and quality of EIAs produced.	Survey of staff (September) demonstrates increased confidence and understanding Survey of stakeholders' perception of DH confidence and capability on equality Training evaluation data Plans for revision and improvement of training following evaluation Plans for roll out of training
ACTION 4	4.1 Enhanced	Roll out a programme	September	DG P&SD	Involvement and	Copies of involvement

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Improved partnership and involvement of external organizations in policy development	involvement of external organisations in the policy development and evaluation process to check and assure relevance of equality input	of supported engagement and listening events targeted at equality external organisations during 2010/11 financial year EDC shows leadership/development for health sector	2010 to end of framework ongoing		engagement criteria of the traffic light ratings (against DH standards) for the assessments of the impact on equality • impact on policy • impact on outcome • consideration of each aspect of the duties • appropriate use of external organisation input. Two all-Strategic Partner monitoring events by end March 2011	event reports, feedback forms (as the qualitative measure) Details of the response to the results of involvement, e.g. use in EIA, influence on strategic priorities, generation of new guidance etc
	4.2 New commissioning processes to show involvement of equality groups in development		November 2010 to end of framework		Appropriate involvement of external organisations is recognised within the wider sector	Evidence of appropriate involvement of equality groups in wider health and social care sector (or if evidence cannot be gathered in time, evidence of actions, guidance etc that is likely to achieve this within the medium term)
ACTION 5	5.1 Introduce equalities as	Use information and indicators from equality	January 2011	All DGs/EHRAG to monitor	Clear performance measures on equality in	Provide evidence of different Directorate

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Leadership of DH and Health and Social Care System	part of the DG stocktake process within DH	policy assurance (monitoring system) and DH performance scorecard as performance monitoring of DGs			place and reported to CMB/EHRAG to hold DGs to account	improvement plans following the DG stocktakes. DH performance scorecard Equality policy assurance (monitoring system) details of operation
	5.2 Effectively prepare the Health and Social Care sector for the new single equality duty	Disaggregate Vital Signs data (or equivalent under new system – NHS Outcomes Framework) DH will consider equalities when finalising the outcomes framework and in how outcomes are measured and demonstrated EDC to work with EHRC to prepare joint guidance for the NHS Address data gaps at source via refresh of Equality Monitoring Guide for the NHS EDC to work to produce	31 March 2011	DG P&SD	Information is provided to the NHS that is appropriate and sufficient to enable NHS to understand its responsibilities regarding equality.	Evidence that key NHS bodies are using the information (ex SHAs inclusion on website etc) Evidence of how the assurance framework is built into mainstream quality assurance, such as the outcomes framework

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		Assurance framework for Equalities, subject to changes in performance regime	January 2011			