



Office for Health  
Improvement  
& Disparities

# **A toolkit for Equity, Diversity and Inclusion initiatives for the South East's public health workforce**

**OHID South East Workforce Development Team**

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# Background

This toolkit was developed in response to the regional workforce plan's objective to collate and share Equity, Diversity and Inclusion (EDI) initiatives for the South East's public health workforce

Equity, Diversity and Inclusion good practice initiatives are essential for a fair, representative and effective public health workforce. Yet, significant gaps remain, particularly in recruitment and training, where candidates from underrepresented backgrounds are still less likely to be appointed than White candidates (Lacobucci, 2020).

There is growing recognition that strong EDI action plans enhance organisational performance, foster innovation and improve health outcomes (Kelly et al., 2022). Many public health organisations have implemented strategies to reduce inequities in recruitment, though challenges remain in ensuring inclusion across recruitment, retention and development (Local Government Association, 2021).

The public health profession across England is committed to reducing inequalities by actively supporting diverse communities to improve their health and wellbeing (Faculty of Public Health, 2025). Fostering an inclusive workforce leads to improved staff morale, greater innovation and improves health outcomes.



# Methodology

A desk-based research of 91 documents of EDI (sometimes referred to as DEI) within public health delivering teams and organisations were reviewed.

Five unstructured interviews took place with those who have led on EDI initiatives which have had a direct impact on the public health workforce.

A working group representing the South East's public health professionals, educators, workforce leads and registrars was established to support the development of the toolkit. Their role included:

- Collating and sharing case studies
- Providing guidance on the language, look and accessibility of the toolkit
- Informing the development of the five key principles, [see slide 6](#)
- Advocating for the use of 'equity' over 'equality'

## Why we use the term 'equity'

The working group advocated for the use of the term 'equity' to ensure that organisations consider the specific needs of individuals to be able to thrive in a work setting. Many of the case studies referenced also refer to 'equity'.

**Equality** means giving everyone the same support or resources, however we acknowledge that not everyone has the same needs or faces the same barriers.

**Equity** means giving people the support they need to have fair access to opportunities and acknowledges that different people may need different levels of support to achieve the same outcome.

You can read more on [slide 29](#).



# How to use this toolkit

- The aim of this toolkit is to provide the reader with examples of good practice taking place across the region and beyond to share how public health teams can embed EDI principles and good practice.
- This toolkit is intended for you to use, share, adopt and champion, to better reflect the communities you serve.
- Each case study sets out the organisational context; what they did and most importantly the outcome on the public health workforce.
- Examples included in this toolkit were determined by availability and their relevance to the public health workforce in England which highlight positive outcomes and lessons learned. This limits the depth and range of EDI case studies available for the reader.
- This toolkit aims to be an **iterative document** which will be refreshed annually, up until 2027, which is the lifespan of the regional public health workforce development plan.
- To contribute to this toolkit, please email [ohidsoutheastworkforce@dhsc.gov.uk](mailto:ohidsoutheastworkforce@dhsc.gov.uk)



# The five key principles of embedding EDI in workforce practice:



# Implementing principles into everyday practice



## Commitment from leaders

- Demonstrate that the promotion of EDI principles and practices are a business priority, clearly outlining the importance of EDI. EDI to be weaved across all business planning processes and embedded across recruitment, retention and development processes.
- Promote the implementation of organisational EDI strategies across their team's recruitment, retention and development processes.
- Lead their team to develop their own local strategy or action plan that further enhances EDI practices across recruitment retention and development, with clear metrics and reporting.



## Inclusive recruitment policies and practices

- Embed inclusive recruitment practices across teams and modelling behaviours for growing a workforce that is representative of the local population.
- Actively consider alternative entry routes that provide greater equity of access to a public health career and thus eliminating discrimination e.g. apprenticeships.
- Provide opportunities to improve recruiting managers' ability to embed inclusive recruitment practices as well as providing clear guidance for recruiting managers.



## Inclusive staff retention policies and practices

- Deliver regular training on EDI principles, cultural competency and anti-racism to embed knowledge and skills which can be implemented across team processes.
- Actively create safe space for staff with protected characteristics where discriminatory behaviour is clearly unacceptable and active promotion of processes to raise concerns. In addition, encourage staff to engage in staff networks which have been set up for staff who identify with a minority group to embed a sense of belonging.
- Ensure that all staff members have clear progression routes and development opportunities.
- Promote and implement development programmes available to public health staff.
- Ensure EDI principles are rooted in development programmes provided internally.



## Using data to inform decisions

- Access to good quality data will be a key driver in delivering real change. It is important for all organisations to identify data available within their systems that can be shared at a team level. It is recommended that alternative methods are explored to address gaps in data collection.
- Collect and analyse data to monitor workforce and staffing action plans



## Continuous monitoring and improvement

- Ensure governance arrangements are in place to review team policies and practices, so they remain effective and relevant for the needs of the workforce, both current and future. The process can aim to align with organisational policy, embed updates from organisational changes, and incorporate any new government policy.
- Regular evaluation processes can aim to be established as a core element of any EDI initiative. This may include collecting information on the impact on staff and the wider team, as well as lessons learnt. All learning can be embedded into the diversity of current and future programmes. Outcomes and insights from all initiatives can be encouraged to be shared widely with stakeholders to promote continuous learning from good practice

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# **Summary of EDI initiatives for the public health workforce**

# Summary of examples used – South East

Geographical area	Lead organisation/s	Initiative name	Principle	Overview
South East: all areas	South East School of Public Health and Local Authorities	<a href="#">Public Health Practitioner Graduate Trainee Programme</a>	Inclusive recruitment	Public Health graduate development training programme to grow a diverse public health practitioner workforce, representative of the local population
South East: all areas	South East School of Public Health and employers	<a href="#">Public Health apprenticeships</a>	Inclusive recruitment	Embedding a new entry route into a public health career across the South East
South East: all areas	South East CPD working group	<a href="#">Enhancing inclusive recruitment understanding</a>	Inclusive staff retention	Accessible learning opportunity for public health workforce to improve their inclusive recruitment practices
South East: Kent, Surrey and Sussex	Registrar led – KSS School of Public Health	<a href="#">Reducing differential attainment in public health specialty training - buddy scheme</a>	Inclusive recruitment	Providing structured support for applicants from Black or Asian backgrounds applying for the Public Health Speciality Training Programme across the region
South East: Kent, Surrey and Sussex	Registrar led - Kent, Surrey and Sussex School of Public Health	<a href="#">Kent, Surrey, Sussex Racial Equity and Cultural Competency Action Plan 2025 – 2028 - cultural competence training</a>	Inclusive staff retention	Implement cultural competence training to develop registrars as culturally competent and anti-racist leaders
South East: Portsmouth and Buckinghamshire	South East School of Public Health, Portsmouth City Council and Buckinghamshire County Council	<a href="#">South East Public Health Social Mobility Project</a>	Inclusive recruitment	Provide opportunities for people from global majority groups affected by inequalities to enter and/or progress a career in public health, supporting their social mobility.
South East: Oxford	University of Oxford	<a href="#">Athena Swan Charter   Advance HE</a>	Continuous monitoring and improvement  Using Data to Inform Decisions	Learn how the Nuffield Department of Population Health used the Athena Swan Charter’s framework to support gender equality in Higher Education with a focus on women in science, technology, engineering, maths and medicine.

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# Summary of examples used – other regions and national

Geographical area	Lead organisation/s	Initiative name	Principle	Overview
London: all areas	UCL Medical School, OHID London region	<a href="#">Exploratory research project: Removing structural barriers to representation in recruitment, progression, and retention</a>	Continuous monitoring and improvement	Results of a research project to understand the structural barriers in the health and care workforce, focusing on recruitment, progression, and retention. It aimed to identify metrics and interventions to improve equity and diversity.
London: all areas	UK Health Security Agency (UKHSA) regional Health Protection Team	<a href="#">Understanding equity, diversity and inclusion in public health teams: A case study of Health Protection Practitioners in the UK Health Security Agency (UKHSA)</a>	Continuous monitoring and improvement	Understanding career entry, recruitment processes, and progression points in a public health team, with a focus on equity, diversity and inclusion (EDI), focusing on health protection practitioners in the London Health Protection Team.
West Midlands: Nottingham	Nottingham City Council	<a href="#">Creating a valued and professional Public Health Team for Nottingham - Public Health Team</a>	Commitment from leaders	A public health workforce strategy centred on structure, responsibility, remuneration, and opportunity to grow a public health team to address the communities' needs.
London: all areas	ADPH London	<a href="#">ADPH London communities action plan</a>	Commitment from leaders	Action plan developed by London's Association of Directors of Public Health to tackle racism and inequality.
UK: all areas	Faculty of Public Health	<a href="#">Fairer training</a>	Inclusive recruitment	Results of the Faculty of Public Health's commissioned report to investigate differential attainment in recruitment to public health specialty training. Results identified many groups which are under-represented by the end of the recruitment process

# **EDI initiatives across South East England**

# Public Health Practitioner Graduate Trainee Programme

## Context

The South East Public Health Practitioner Graduate Trainee Programme is a regional programme funded by the School of Public Health. The Programme supports the School's commitment to take an equity-driven approach to grow a public health workforce which is diverse and representative of the local communities being served.

## How we did this

- Commitment to an equity-driven approach, using [positive action](#) to enable people from marginalised racial groups to manage or overcome the barriers they face in healthcare careers.
- 8 local authority public health teams hosted graduate trainees
- 12 graduate trainees were successfully employed on 2.5-year, fixed-term contract from local communities and those working and living within the local area particularly targeting those from global majority backgrounds, using positive action.
- All graduate trainees come with a public health or public health related qualification or post graduate level, with no prior experience of working in public health.
- The programme was a mix of a formal educational development alongside hands-on practical experience creating the opportunity to develop a cohort of early-career Public Health Practitioners who are confident, skilled, and capable of practising as a registered practitioner.

## West Sussex County Council

- 2 Graduate Public Health Practitioners recruited from the local area.
- Mentors from the team were identified and trained to support personal and professional growth and development.
- The team were honoured with a LGA award ['Best Equality, Diversity and Inclusion Employer' award at the Local Government Chronicle \(LGC\) Workforce Awards 2024](#).

## Buckinghamshire Council

The team have seen an immediate impact in successfully recruiting from the local population and encouraging the trainees from ethnic minority communities, enabling diversification of their team.

## Outcome

- This programme has been an effective initiative to support teams to provide greater opportunities for their local population with a significant impact on trainees' development as well as the wider team.
- From year one, trainees stated that they have had valuable learning experiences with a diverse range of training project opportunities.
- An evaluation process of the programme will take place at the end of the cohort to share learning and to inform the development of future cohorts.

## One key take away

Provide inclusive recruitment and positive action training for Human Resource teams.

## Key contacts:

[england.publichealthschools.se@nhs.net](mailto:england.publichealthschools.se@nhs.net)

# Public health apprenticeships - growing a local diverse workforce and supporting staff progression

## Level 6 Public Health Practitioner apprenticeship

### Context

A series of [apprenticeship standards were developed following Public Health England's engagement with employers](#) to provide greater opportunities for people to pursue on-the-job vocational training across academic levels in public health (GOV UK, 2021).

A [suite of apprenticeship standards available for public health](#) can be used to recruit to a team as well as develop existing employees.

Significant efforts have been put in place to support the implementation of the 'Level 6 Public Health Practitioner (integrated degree) apprenticeship' programme across the South East.

The three-year apprenticeship provides the opportunity to create new positions in a public health team by recruiting individuals from the local community who would not previously have had access to university education which is typically a barrier for many accessing a public health career.

### How we did this

- The School of Public Health successfully bid to secure NHSE capacity building funding (ETAP) to subsidise salaries to create apprenticeship posts
- Established employer engagement forums to support and advise employers in the recruitment process of apprentices.
- To gain salary support funding, employers were required to demonstrate inclusive recruitment / selection strategies to engage under-represented groups and where possible to recruit from their local population. This promoted more inclusive recruitment processes to ensure greater opportunities for all.

### Outcome

- The Level 6 Public Health Practitioner apprenticeship has become an integral part of developing practitioners across the South East, with it now being one of the established entry routes in the region.
- As of August 2025, four cohorts are running across the region

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# 30\*

Level 6 apprentices  
across the South  
East

### One key take away

Use inclusive recruitment principles to increase applications from the local community

# Public health apprenticeships - growing a local diverse workforce and supporting staff progression

## The Level 7 Health and Care Intelligence Specialist Apprenticeship

### How we did this

A fully salary supported apprenticeship was launched in the South East for the Level 7 Health and Care Intelligence Specialist Apprenticeship to support employers to recruit an apprentice for the 22-month programme.

Employers had to run their standard recruitment processes to recruit to this apprentice post and provide the learning and development opportunities that supports intelligence professionals to develop their statistical knowledge and influencing skills and to utilise systems thinking techniques to understand complex situations and apply ethical standards. The SE School of Public Health provided additional support to access an apprenticeship provider and to understand requirements of the apprenticeship to support the recruitment process.

### Outcome

By providing salary support to employers to recruit to The Level 7 Health and Care Intelligence Specialist Apprenticeship further enhanced efforts to diversify the public workforce, with greater opportunities for those to progress into postgraduate level training which they would previously would not access. The School has supported salaries for apprentices from Oxford Health NHS Foundation Trust, Oxfordshire County Council, Portsmouth City Council and Southampton City Council.

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# 9

L7 apprentices across  
the South East

# Enhancing inclusive recruitment understanding - Buckinghamshire

## South East CPD programme - session on inclusive recruitment and positive action

### Context

The South East ADPH requested a learning programme which would bring the South East public health family together following reforms across the system. The South East CPD programme was launched in 2023 providing a virtual CPD programme for the South East public health workforce to complement local CPD programmes. The programme is co-chaired by OHID South East and NHSE WT&E South East where yearly CPD programmes are developed with a working group which represents all public health organisations. The programme is co-produced and delivered by the regional public health community of members.

### How we did this

- Training was delivered via webinar to enhance participants' knowledge and understanding of what inclusive recruitment and [positive action](#) mean in practice
- Practical demonstration of how to apply these principles in recruitment processes
- Sharing reliable information to support effective implementation.

### Outcome

The training provided clarity on recruitment processes where many myths were surfaced and could be corrected. Results were shared from organisations which had incorporated inclusive practices including:

- accessing a wider talent pool
- enhancing fairness
- fostering innovation and creativity
- reflecting the diversity of the community
- strengthening the employer brand and
- improving employee engagement and retention.

More support is needed to provide greater understanding and application of the relevant legislation.

### Key contacts:

[ohidsoutheastworkforce@dhsc.gov.uk](mailto:ohidsoutheastworkforce@dhsc.gov.uk)

### One key take away

Critically appraise your recruitment processes against the appropriate legislation

## Local case study - Buckinghamshire Council Public Health Team

### Context

Staff in Buckinghamshire's public health team are actively encouraged to attend CPD sessions on inclusive recruitment and positive action to further enhance their knowledge and understanding of inclusive recruitment practices.

### How we did this

Staff attended the South East CPD session on inclusive recruitment and have delivered internal knowledge and share sessions to cascade and promote inclusive recruitment and positive action principles and processes.

### Outcome

- The promotion of this training in the team has led to a better understanding of how the team can make recruitment more inclusive.
- Several changes have been implemented to enhance inclusive recruitment, including strengthening the interview shortlisting template to ensure consistency and fairness in moderation, providing copies of the interview questions for candidates to refer to and providing constructive feedback to unsuccessful candidates.

### Key contacts:

[lucie.smith@buckinghamshire.gov.uk](mailto:lucie.smith@buckinghamshire.gov.uk) Workforce Development Lead

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# Adopting inclusive recruitment - West Sussex Local Authority

## Context

Following the success of recruiting two public health practitioner graduate, the public health team looked at further opportunities to improve recruitment processes across the team

## How we did this

- Changed the language we used in job adverts
- Expanded where we advertise positions by promoting via local communities / universities /colleges as well as social media
- Increased our support we give to applicants prior to interview, including webinars to explain the application and interview process
- Provide constructive feedback following interview
- Sharing and explaining our expectations around values and behaviours
- Giving examples of what good looks like

## Action plan:

Working in partnership with Human Resources and recruitment colleagues to create effective joint strategies

Share learning and good practice across the council

Continue to learn and celebrate the diversity of our workforce and community

Listen to our staff about their needs and embed this into every-day practice

Embed a learning culture including embracing individual strengths to achieve as a team

## Outcome:

- Doubled number of applications to specialist roles in public health
- Increased the number of candidates invited to interview from global majority background from 27% to 29%
- Increased number of people hired from global majority background from 5.8% in 2022/3 to 37% in 2023/4
- Increase in the number of people recruited who have a disability from 3.73% in 2022/23, to 7.3% in 2023/24.

## Key contact:

[Karen.dennison@westsussex.gov.uk](mailto:Karen.dennison@westsussex.gov.uk)

# Reducing differential attainment in public health specialty training

## Context

Kent Surrey and Sussex (KSS) School of Public Health established an initiative aimed at addressing the disadvantages faced by Black and Asian applicants in the national public health specialty training recruitment process, following research on differential attainment in the speciality training recruitment process.

## How we did this

The buddy scheme aimed to provide structured support by pairing applicants from Black or Asian backgrounds with existing registrars. The registrars offered encouragement and advice from the pre-application stage through to the selection centre stage. The primary objective was to increase the number of successful applicants from these backgrounds, thereby enhancing the diversity of the future consultant workforce in KSS. The support provided by buddies included discussions about the application process, assessment centre preparation and selection centre preparation. This support amounted to less than five hours of work per buddy. Buddies received a briefing to ensure consistent information was provided. Applicants received additional support such as assessment centre revision sessions, mock virtual interviews and a WhatsApp group for peer support.

## Outcome

Following the first year of the buddy scheme six applicants were either invited to interview or on the waiting list of which one was offered a post. Due to the positive impact the scheme has had in the KSS speciality training programme, it is now being provided across all three South East local Schools of Public Health (KSS; Thames Valley and Wessex) in which five applicants were invited to interview of which three were offered posts.

Feedback was overwhelmingly positive from the applicants of the buddy scheme. Following an evaluation process, feedback on the expanded South East scheme was provided by buddies and applicants. The key outcomes from this process found that buddies did not feel equipped to deal with unsuccessful outcomes. Buddies also struggled with contacting their applicant and felt there was a lack of clarity in whose responsibility it was to follow up if lack of engagement. The scheme was adapted to meet these challenges. This included the development of a resource pack to support the continued development of applicants and commitment to public health.

This includes:

- Signposting to CPD opportunities, short courses, and relevant roles
- Guidance on alternative pathways into public health
- Advice on reflection, reapplication, and staying connected to networks

In addition, the following products are being developed to provide further support for those taking on the buddy role:

- Clear guidance and expectations for buddies and applicants
- Optional pre-scheme training sessions
- Tools for setting boundaries and managing time
- A buddy code of conduct

# 3

participants were offered a specialty training placement

# 5

reached selection centre

Participants on the buddy scheme (29) were nearly twice as likely to receive an offer, compared to national statistics

## One key take away

Clear guidance needed for participants and mentors

## Key contacts:

[england.ksspublichealthschool.se@nhs.net](mailto:england.ksspublichealthschool.se@nhs.net)

# Kent, Surrey, Sussex Racial Equity and Cultural Competency Action Plan 2025 – 2028

## Context

The Kent, Surrey and Sussex (KSS) School of Public Health is committed to developing culturally competent, anti racist and inclusive leaders. It aims to promote racial equity and empower registrars to proactively address racism through public health policies and practice.

A three-year action plan has been launched to embed racial equity and cultural competence throughout the public health specialty training programme, supporting equitable access to specialty training and inclusive experiences for all registrars.

## How we did this

A 12-month racial equity programme, supported by an EDI specialist, guided the development of this action plan.

This included:

- A confidential cultural competency survey, completed individually by members of the school and analysed at a peer group level to identify key strengths and gaps.
- Facilitated engagement sessions explored lived experiences and identified priorities for an inclusive training environment.
- Insights from survey and engagement sessions informed tailored training and set clear EDI objectives.

The KSS Racial Equity Working Group, comprised of members from across the school, provides oversight and leads the implementation of the action plan.

## The action plan focuses on 6 key areas

Expand the role of the racial equity working group

Increase EDI awareness and promote inclusivity

Address differential attainment in access to and outcomes from the training programme

Enhance support for international registrars

Develop and improve cultural competency training

Strengthen support for new and existing registrars

## Outcome

The action plan is currently in the implementation stage; a full evaluation process will take place following this stage. Achievements include expansion of the KSS Buddy Scheme to a regional level, introduction of Confidential Guardian role for registrars, creation of a racial equity resources repository, embedding EDI in registrar meetings, and reviewing competencies to highlight where work on race and health can meet learning outcomes.

The action plan has provided a clear direction for the KSS School of Public Health to address racial equity and enhance cultural competency.

# South East Public Health Social Mobility Project

## Context

NHS England South East's School of Public Health, in partnership with the public health teams from Portsmouth City Council and Buckinghamshire County Council, aimed to develop and implement an intervention which would:

- Provide opportunities for people from global majority groups affected by inequalities to enter and/or progress a career in public health, supporting their social mobility.
- Support widening participation and the development of a diverse local authority public health workforce that represents the communities served.

The focus is primarily on people from global majority groups, however, intersectionality with other characteristics can be considered.

## How we did this

A two-phase participatory study was commissioned by NHS England WT&E South East in partnership with Buckinghamshire Council and Portsmouth City Council. Phase 1 involved qualitative research with individuals from ethnic minority backgrounds on their experiences of public health careers. Phase 2 comprised co-production workshops with community researchers to develop potential interventions. Data was thematically analysed and synthesised into potential models for workforce diversification.

The research study above was used to inform the next stage of the project where pilot interventions were established to address key findings.

## Buckinghamshire Council pilot

### Context

Buckinghamshire Council's intervention sought to develop and pilot a 'volunteer' pathway for local BSc public health students (from the global majority) to volunteer alongside public health professionals within Buckinghamshire.

### Outcome

Proposed intervention was unable to fully address the findings and recommendations from the research and co-production from Phase 1.

The intervention will continue in Buckinghamshire outside of the Social Mobility project. The intervention will seek to:

- Provide an annual Public Health Career session as part of the students' curriculum.
- Explore formal volunteer options across the public health system, to provide students with insights into different job roles.

## Portsmouth City Council pilot

### Context

Portsmouth aimed to work with local education providers and career services to develop and pilot an outreach programme for college students, including awareness raising, opportunities to gain practical experience and to increase employability skills.

### Outcome

Proposed intervention was unable to fully address the findings and recommendations from the research and co-production from Phase 1.

The intervention will continue in Portsmouth outside of the Social Mobility project. The development, engagement and commitment to deliver this intervention has been as a result of the Social Mobility project.

### Key contacts:

[england.publichealthschools.se@nhs.net](mailto:england.publichealthschools.se@nhs.net)

# Athena Swan Charter – Nuffield Department of Population Health (Oxford Population Health), University of Oxford

## Context

The Athena Swan Charter is a global framework, established in 2005, to support gender equality in Higher Education (HE) with a focus on women in STEMM (science, technology, engineering, maths and medicine).

Nuffield Department of Population Health (NDPH), have had membership of the Athena Swan award scheme, resulting in support to further enrich the department's capability for more inclusive processes to enhance opportunities for career progression and the work experience of both academic and support staff.

## How we did this

By obtaining the Athena Swan award, NDPH have used the targeted self-assessment framework to identify areas for positive action as well as recognise and share good practice.

An Athena Swan Self-Assessment Team was established along with an EDI committee and working groups which supports the establishment and delivery of the Athena Swan action plan. The action plan has outlined core workstreams which supports their commitment to a more equitable workforce.

Embedding and progressing Athena Swan activity across the department

Supporting career development for students and enhancing progression for researchers

Improving induction and line manager training  
Creating a supportive environment for those with caring responsibilities

Improving communication and transparency of decision-making within NDPH, with increased visibility and accessibility of senior staff

Strengthening communication and transparency in decision making

Fostering an inclusive culture where all staff feel valued and able to be themselves.

## Outcome

- NDPH successfully renewed its Athena Swan Silver Award in 2024
- Evidence based actions informed by staff surveys and focus groups (2021-2023)
- Athena Swan now embedded in departmental strategy, supported by a Data Monitoring Group

# -3%

The department's gender pay gap is currently the lowest in the University, and the department is working to eliminate this entirely

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# **EDI initiatives across regions in England**

# Exploratory research project: Removing structural barriers to representation in recruitment, progression, and retention

## UCL Medical School, OHID London region

### Context

The London Public Health Workforce Collaborative commissioned an [exploratory research project which included a report](#) on the exploration of structural barriers in the health and care workforce, focusing on recruitment, progression, and retention. It aimed to identify metrics and interventions to improve equity and diversity, particularly for ethnic minorities and other protected characteristics.

### How we did this

The report highlighted significant pay gaps and underrepresentation at senior levels for ethnic minorities and disabled staff. It found ethnic minorities are less likely to be appointed from shortlisting and identified disparities in accessing training and promotion opportunities. There were also higher rates of discrimination and lower job satisfaction among ethnic minorities and disabled staff. Public Health-specific findings show ethnic minority representation among trainees varies by region and professional registration, and women earn less than men in local government roles.

Within the report, the effectiveness of interventions to improve race equity within a workforce was reviewed. Interventions were mapped against the four areas of metrics, including leadership development programs, inclusive recruitment practices, mentoring, career development programs, cultural ambassadors, staff networks, and anti-harassment policies. Effectiveness of interventions varies, with conventional diversity training having limited impact and goal-setting programmes being more effective.

### Outcome

The report recommended that EDI be a business priority for all organisations, embedding EDI in all systems/processes. It detailed that shifting communication about EDI importance would be more effective, linking it to productivity and business success.

More data is required from organisations, ensuring they have accurate and comprehensive data with a robust and intersectional analysis on all work processes and staff experiences to better understand the reasons for disparities. It was also recommended that the learning from the evaluation be incorporated across all initiatives that address inequalities to better understand the impact it has had. It is recommended for interventions to be co-designed and to encourage the sharing of good practice across organisations.



### Key contacts:

[OHIDLondonworkforce](#)  
[@dhsc.gov.uk](#)

Figure: conclusions and recommendations from report

# Understanding equity, diversity and inclusion in public health teams: A case study of Health Protection Practitioners

## UK Health Security Agency (UKHSA), London region

### Context

To gain a deeper understanding of the London Public health workforce, the Public Health Workforce Collaborative alongside the Transformation Partners in Health and Care (TPHC) designed and tested a method for understanding career entry, recruitment processes, and progression points in a public health team, with a focus on equity, diversity and inclusion (EDI). The aim was to gather insights about a public health team below specialist level and develop an approach which other public health teams or organisations could implement themselves to better understand their workforce and systems.

### How we did this

The aim was to understand the London HPP workforce, including how people enter HPP roles, changes in recruitment processes during and after COVID-19, the impact on diversity, internal progression opportunities, and how well the workforce reflects the community it serves.

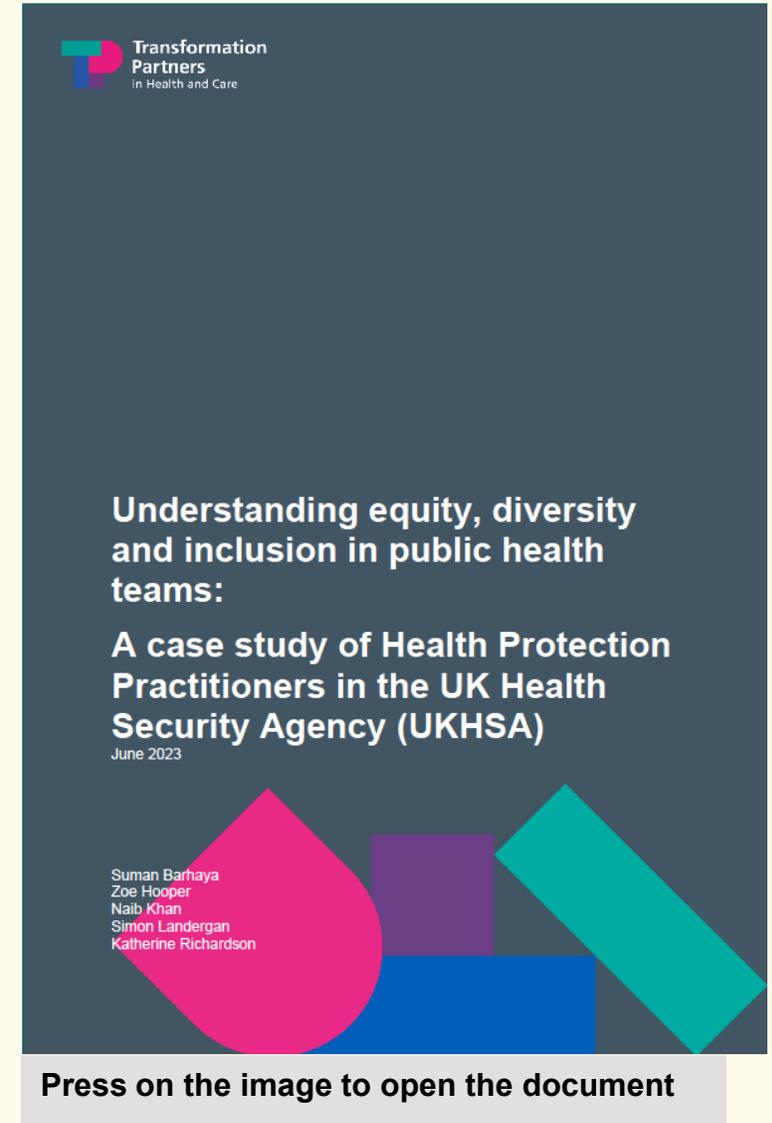
### Outcome

This process was able to identify the need for increased diversity within the workforce and addressing barriers to entry and progression. Findings were also made on the difficulties in the recruitment process and concerns about diversity and unconscious bias.

Recommendations include developing an action plan in collaboration with the organisation's diversity and inclusion team and sharing the report with the staffing group that were analysed. Further recommendations include senior leaders visibly championing EDI, regularly sharing organisational and team-level data from the UKHSA diversity and inclusion dashboard with all staff and gathering their feedback. There was also an opportunity to embed the use of the organisation's diversity and inclusion dashboard with team leaders to better understand diversity gaps and inform recruitment processes and training opportunities. Addressing the identified challenges and actively monitoring diversity gaps are crucial for fostering a more inclusive and representative HPP London workforce.

### Key contacts

[OHIDLondonworkforce@dhsc.gov.uk](mailto:OHIDLondonworkforce@dhsc.gov.uk)



# Creating a valued and professional Public Health Team for Nottingham

## Nottingham City Council's Public Health Team

### Context

The Public Health team at Nottingham City Council identified key challenges faced within the team. This included staffing shortages, burnout and the need for better training and support for staff. It understood that the team was not a reflection of the needs of the population it served. An opportunity arose to address the long-standing recruitment and retention issues through the creation of an attractive offer to attract and retain staff. This is part of the team's public health workforce strategy centred on structure, responsibility, remuneration, and opportunity.

The strategy aims to develop a highly respected and professional public health workforce. It envisions a career path from apprenticeship to the Director of Public Health within the organisation, emphasising continuous professional development (CPD) and recruitment based on potential.

### How we did this

The strategy focuses on several key areas.

- outlined the process of revising the team structure to ensure clear career progression and balance of opportunities. New roles such as Deputy Director of Public Health (DDPH) and Public Health Principal have been introduced to support career ambitions for consultants and aspiring consultants. Professionally recognised titles were used for job roles and the entry level roles which do not require skills or experience were established. Additionally, commissioning and public health intelligence have been embedded within the team, and apprenticeship roles have been developed.
- A comprehensive CPD programme was developed as part of strategy to support team re-professionalisation. It encourages UK Public Health Register (UKPHR) registration and collaborates with the University of Nottingham for teaching and learning opportunities. Staff are supported to undertake public health qualifications.
- The strategy focuses on recruiting for potential by identifying public health values and approach rather than just skills and experience depending on the professional qualifications and experience required. The team is engaged in the recruitment process to ensure it aligns with the team ethos, and job roles are made more accessible at point of application with clear guidance provided to candidates.

### Outcome

- Since the implementation of the new structure in 2022, there has been significant internal development and progression.
- The public health team has twice the corporate rate of being very satisfied with their job and rates higher on every measure.
- Feedback from interview candidates and team members has been positive, enhancing the reputation of the public health team and improving engagement and confidence in appointments.
- The strategy has been recognised for the best retention strategy in the Local Government Chronicle (LGC) Workforce Awards 2023.

- **SIGNIFICANT INCREASE IN VOLUME AND QUALITY OF APPLICATIONS –**
  - OVER 100 ATTENDED THE Q&A
  - 150 APPLIED FOR OUR MOST RECENT RECRUITMENT
- **LOOKING FOR POTENTIAL NOT JUST EXPERIENCE MEANS WE ARE RECRUITING COLLEAGUES FROM OUR LOCAL COMMUNITIES WITH A MORE DIVERSE RANGE OF SKILLS, KNOWLEDGE AND BACKGROUNDS**
- **WE HAVE A TEAM THAT BETTER REPRESENTS THE COMMUNITY IT SERVES AND IS BETTER PLACED TO UNDERSTAND THE NEEDS OF THOSE LIVING IN OUR CITY AND HOW TO ENGAGE WITH THEM**

# 82.6%

feel listened  
(2022 staff  
survey)

Click on the image for  
more information



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# ADPH London action plan 2021-2026: Supporting Black, Asian and Minority Ethnic communities during and beyond COVID-19

## Context

In February 2021, ADPH London released a position statement in supporting Black, Asian and minority ethnic communities during and beyond the COVID-19 pandemic. This statement highlights racism as a public health issue, given the immediate and structural factors that have impacted them, and highlights the following five themes for action plan development:

- Trust and cohesion
- Improving ethnicity data collection and research
- Diversifying the workforce and encouraging systems leadership
- Co-production with communities
- Embedding public health work in social and economic policy

A set of actions were agreed to be delivered and / or influenced over the next five years.

## How we did this:

As part of the diversifying the workforce and encouraging systems leadership, the plan highlighted the need to address the following areas:

- Address the lack of diversity of the public health workforce, particularly at senior level
- Dismantle norms and go beyond unconscious bias training



Supporting Black, Asian and  
Minority Ethnic communities during  
and beyond COVID-19

Action Plan  
2021-2026

## Further information:

[ADPH London Action Tackling Racism and Inequality Plan | ADPH London](#)

# **EDI initiatives for national recruitment**

# Developing a Fair Training Culture in Public Health Specialty Training

## Faculty of Public Health

### Context

A [2020 BMJ article](#) reported that, among all the medical specialties, public health recruitment showed the largest gap between the proportion of candidates deemed appointable to training posts from ethnic minority backgrounds (15%) compared to white backgrounds (36%) (Lacobucci, 2020). This sparked the [FPH Fair Training programme](#), a multi-phased programme of work aiming to identify and address differential attainment in the specialty training programme.

### Method

The FPH [Equity, Diversity and Inclusion Committee](#) and [Special Interest Group](#) initially oversaw this work, providing strategic direction for initiatives aimed at identifying and addressing disparities in training and career progression.

### Fair Recruitment

The FPH [commissioned a report](#) in collaboration with Imperial College London and Health Education England to investigate differential attainment in recruitment to public health specialty training. This report identified that candidates from ethnic minority backgrounds, older age groups, international medical graduate backgrounds and multi-professional backgrounds are materially under-represented by the end of the recruitment process.

### Fair Exams

Using its own exam data, the FPH published [a report on differential attainment in public health speciality training exams \(DFPH and MFPH\)](#). The analysis of 10 years of data indicated that older candidates, those from Black, Asian, or White Other ethnic backgrounds, and those from multi-professional or non-UK public health specialty training backgrounds had lower odds of passing their examinations on first attempt.

### Outcomes

The FPH continues to use the recommendations from the reports to tackle the attainment gaps identified. Examples of action taken to date include:

#### Fair Recruitment

The Work Psychology Group has been externally commissioned to review the Assessment Centre tests. Meanwhile, Assessment Centre scores have been separated from Selection Centre scores to avoid carry through of biases. Information hub resources have been centralised and further resources developed to support all candidates in their preparation. A wider range of people have been invited to develop the Situational Judgement Test (SJT) to provide diversity of thought and opinion.

#### Fair Exams

A Fair Exams steering group has been established to lead on implementing the recommendations from the report. Additional DFPH practice questions and marks schemes have been released in keeping with the latest exam style. A strategic assessment review group has been formed to examine the methodology of the DFPH and MFPH exams. A qualitative research study led by Imperial College is underway to identify the range of factors perceived to contribute to the DFPH attainment gap by relevant stakeholders. The group is mapping the existing preparation and formative feedback offers against [AoMRC principles](#).

#### Fair Training Strategy and Next Steps

Future stages of this work will examine training experiences, ARCP outcomes and career progression after completion of training. An EDI expert review panel is being formed to offer independent reviews of the groups progress, and the EDI SIG continues to support the development of this work and promote equity, diversity and inclusion in the public health workforce.

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## Further reading:

### Why we use 'Equity' over 'Equality'

The development of this toolkit was shaped by a working group representing public health professionals, educators, workforce leads and registrars across the South East.

The working group advocated for the use of the word 'equity' over 'equality', particularly as many of the case studies referenced in this toolkit use the term 'equity'.

- Equality means giving everyone the same support or resources, however we acknowledge that not everyone has the same needs or faces the same barriers.
- Equity means giving people the support they need to have fair access to opportunities, and accurately acknowledges that different people may need different levels of support to achieve the same outcome-
- Equity-driven approaches help remove unfair barriers to create a level playing field for everyone. They focus on fairness and outcomes, not just treating everyone the same.
- In public health, an equitable approach helps build and support a workforce which better reflects and serves our communities.

#### Equality Act 2010

The Equality Act 2010 protects people from discrimination based on nine characteristics such as age, disability, race, sex and religion (Equality Act, 2010). It applies to; work, education and services, bans harassment and requires public bodies to promote equality. The Act also supports positive action to help disadvantaged and underrepresented groups access opportunities fairly.

#### NHS England

In response to the Messenger Review, NHSE developed the NHS's first equality, diversity and inclusion (EDI) improvement plan.

The plan sets out targeted actions to address the prejudice and discrimination – direct and indirect – that exists through behaviour, policies, practices and cultures against certain groups and individuals across the NHS workforce (NHS England, 2023).

#### Faculty of Public Health

In March 2025, the FPH's 'Equality, Diversity, and Inclusion Committee' was renamed 'Equity, Diversity & Inclusion Committee'.

The role of the committee is to provide oversight to all the equity, diversity and inclusion work of the Faculty of Public Health, internally and externally. The committee reports to the FPH board twice per annum.

