

Greater Manchester Integrated Care Partnership Board

Date: 29th May 2026

Subject: GM Health and Care Anti Racism Programme Update

Report of: Evelyn Asante-Mensah, Independent Chair, NHS North West Race Equity Assembly.
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Majid Hussain, Director of Equality and Inclusion, NHS GM
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PURPOSE OF REPORT:

This report provides an update to the Integrated Care Partnership (ICP) Board following the March 2026 meeting. It builds on the *No Space for Racism* campaign update received in March and sets out progress in embedding within the wider GM Anti-Racism Framework. The report summarises delivery to date, outlines how the campaign is being translated into sustained system change through defined workstreams, and highlights the next steps requiring ICP leadership, advocacy and alignment.

RECOMMENDATIONS:

The GM Integrated Care Partnership Board are requested to:

- Note progress made since March 2026 in translating the No Space for Racism campaign into the wider, structured GM Health and Care Anti Racism Programme.
- Reaffirm support for the three connected programme workstreams (communications campaign, health and care sector actions, and wider system alignment).

- Champion consistent adoption of the programme principles and campaign assets across partner organisations.
- Support the establishment and resourcing of the programme board and underpinning delivery arrangements.
- Advocate for alignment between the GM Race Equity Framework and the North West Race Equity Assembly Anti Racist Framework to ensure a coherent whole system approach.

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1. CONTEXT AND MARCH ICP UPDATE

1.1. At its meeting in March 2026, the ICP Board received an update on the launch of the *No Space for Racism* campaign and endorsed the need for a visible, system-wide response to the rising incidence of racist and discriminatory behaviour experienced by health and care staff across Greater Manchester. Board members recognised that while a public-facing campaign is an important statement of intent, it must be underpinned by sustained organisational and system change if impact is to be meaningful and lasting.

1.2. In response, partners agreed to progress a single GM Anti-Racism Programme, bringing together public communications, workforce and organisational change, and wider system alignment¹.

¹ [nhs-gm-icb-july-2023-item-7-antiracist-framework.pdf](#)

2 GM HEALTH AND CARE ANTI RACISM PROGRAMME – OVERVIEW

2.1 The GM Anti Racism Programme provides the delivery vehicle through which the No Space for Racism campaign is embedded into routine practice. It aligns health and care action with the GM Race Equity Framework and the North West Race Equity Assembly Anti Racist Framework, ensuring consistency with wider public service reform and community cohesion work.

2.2 The programme consists of three workstreams:

- Public facing communications campaign: *No Space for Racism*
- Health and care sector actions, led through NHS Greater Manchester
- Wider system alignment, coordinated with GMCA and system partners

2.3 Together, these workstreams aim to name and challenge racism, protect all who work in, use, or come into contact with health and care services, and address the structural conditions that allow harm to persist.

3 PROGRESS SINCE MARCH 2026

No Space for Racism Communications Campaign

3.1 'Phase 1' of the *No Space for Racism* campaign was launched in March and featured a campaign website as a central statement of intent and information hub. A phased release approach is being adopted to maintain visibility and momentum over time, supported by a system wide communications toolkit.

3.2 Campaign messaging is being tested to ensure it reinforces clear behavioural expectations, public empathy, mutual respect, and a sense of shared responsibility, while aligning with agreed organisational policy and practice

3.3 This meeting marks the launch of 'phase 2' of the No Space for Racism campaign, including a new public-facing film focused on experiences of racism faced by health and social care staff across Greater Manchester. The campaign sends a clear message: racism and abuse in all its forms including antisemitism, Islamophobia, and racial discrimination of any kind are never acceptable and have no place in health and care settings

3.4 The short film, featuring health and care workers, aims to build empathy and understanding by sharing how racism affects people at work and beyond. It invites patients, families, visitors and colleagues to reflect on their behaviour, challenge racism when they see it, and stand alongside staff.

3.5 The campaign is designed to raise awareness, reinforce shared expectations of dignity and respect, and show visible system-wide leadership in support of staff. It will be shared across digital and social media channels and used by partner organisations in both public and internal communications.

Health and Care Sector Actions

3.6 NHS GM has confirmed its role in convening and leading health and care delivery in line with the North West Race Equity Assembly Anti Racist Framework.

3.7 Work has begun to:

- Strengthen reporting and visibility of racist incidents, including commitment to the introduction of an enhanced Datix system at the ICB.
- Align approaches to active bystander training via existing equality and HR networks.
- Raise awareness and consistency around the Right to Withdraw, ensuring staff safety and dignity are prioritised.
- Embed anti-racism expectations into leadership objectives, development offers and assurance processes.
- Build on the inclusive recruitment workshop programme already delivered, which addressed bias and discrimination with race as a central theme.
- Deliver a series of anti-racism leadership workshops in partnership with external providers for the extended leadership team.
- Establish an Inclusive Leadership Steering Group comprising colleagues with lived experience, senior leaders, and Non-Executive Directors to co-produce the culture and behaviours the organisation wants to see.

3.8 A system ambition has been set to champion all health and care organisations to achieve at least Bronze level accreditation against the Anti-Racist Framework by December 2026.

3.9 Alongside the anti-racism programme, Greater Manchester has delivered a number of targeted health and care workforce initiatives that demonstrate a

practical commitment to equity, inclusion and support for internationally recruited and migrant staff, who may also be at risk of discrimination. These include a system-wide response to changes in UK immigration rules, providing coordinated assurance, data insight and support mechanisms across organisations; a collaborative international recruitment programme strengthening governance, pastoral care and experience for internationally educated nurses; and the Medical Support Worker programme, which enabled internationally trained doctors to access supervised roles, gain NHS experience and transition into substantive posts. Tangible outcomes from this work include strong system responsiveness to policy change, the establishment of enduring cross-system networks and support infrastructure, and high progression rates for participants, such as a majority of Medical Support Workers securing GMC registration and onward employment in medical roles. Collectively, these initiatives highlight a proactive, system-led approach to reducing structural barriers, improving workforce experience, and supporting progression for diverse staff groups.

Wider System Alignment

- 3.10 GMCA colleagues are supporting alignment with the GM Race Equity Framework and other system-wide initiatives on cohesion, hate crime and inclusion. ICP colleagues have been invited to join the GM Race Equity group of political and organisational leads to enable greater collaboration.
- 3.11 Early engagement has taken place within GM structures including colleagues from local authorities, workforce and equality networks, and voluntary and community sector partners to ensure the campaign and programme resonate beyond health and care settings. Opportunities are being identified to connect messaging and activity to existing civic moments and movements and other GM-wide campaigns.
- 3.12 This programme will also be aligned systemically to the GM Workforce Inclusion Programme and future GM Workforce Collaboration Programmes being led via the Greater Manchester Combined Authority and focuses on the remit and scope of workforce across the 10 Local Authorities, GMCA, GM Fire and Rescue Service and Transport for Greater Manchester.

4 PROGRAMME GOVERNANCE AND OVERSIGHT

4.1 The former 'Engine Room' group has transitioned into a Programme Board, providing cross-system leadership, coordination and sign-off across all workstreams. A Terms of Reference is under development. The Programme Board will bring together senior leaders from NHS GM, GMCA and key partners, with co-chairs drawn from the existing group.

4.2 A wider reference group, drawing on lived experience and equality expertise, will support the programme by advising on tone, content and direction. Programme governance aligns with existing ICP, GMCA and race equity structures to reduce duplication and strengthen accountability.

5 OUTCOMES AND MEASURES

5.1 The programme is moving toward a shared outcomes framework, drawing on existing system measures where possible, including:

- Workforce experience indicators (e.g. WRES measures on harassment, bullying and confidence in reporting).
- Uptake and progression against recognised anti-racism frameworks.
- Learning from incident reporting, complaints and qualitative staff insight.
- Digital reach and public engagement with campaign materials.

5.2 There is recognition of the need to complement annual data with more frequent intelligence to track progress and variation across the system.

6. KEY RISKS AND MITIGATIONS

6.1 The programme carries a number of risks, typical of large-scale, cross-system change. There is a risk of fragmented delivery or inconsistent messaging without strong coordination; this is being mitigated through a single Programme Board, aligned governance and a clear communications plan. There is also a risk that public-facing messages could run ahead of organisational readiness, particularly around consequences of potential increases in reporting of incidents and what this will mean for consistency in responses following reporting. This is being managed

through a phased campaign approach, ensuring underpinning policy, guidance and leadership support are in place before more challenging messages are introduced.

6.2 Variation in capacity across partners may affect pace and consistency, which is being addressed through shared system networks and collective development offers rather than reliance on individual organisational capability. Finally, the risk of duplication with existing race equity activity is mitigated by positioning the programme as an accelerator of the GM Race Equity Framework and North West Race Equity Assembly Anti Racist Framework, rather than an additional layer of work.

7. PROPOSED NEXT STEPS

7.1 This ICP meeting marks another significant milestone for the programme, with the public-facing *No Space for Racism* video campaign launched at this meeting as a clear, collective statement of intent. Following launch, the immediate focus will be on ensuring consistent and visible use of the campaign assets across partner organisations, reinforcing shared expectations of behaviour and signalling unequivocal support for staff.

7.2 Alongside the campaign rollout, attention will turn to strengthening the underpinning delivery infrastructure. This includes confirming and resourcing programme management capacity, finalising governance and reporting arrangements, and ensuring clear links between the Programme Board, ICP structures and existing GMCA and race equity oversight mechanisms. A specific focus will be placed on strengthening the mechanisms through which racist incidents are reported, recorded, and responded to ensuring victims and witnesses have clear, accessible routes and that organisations are held to account for their response.

7.3 Over the coming months, partners will work together to agree minimum system-wide expectations for how racist incidents are reported, responded to and followed up. In parallel, existing equality, workforce and HR networks will be used to accelerate adoption of shared development offers, including active bystander training and inclusive leadership development, with the aim of reducing unwarranted variation across the system.

7.4 Progress against agreed actions, framework uptake and emerging insight from workforce and public feedback will be kept under review, with learning used to inform subsequent phases of the campaign and programme. A further update will be brought back to the ICP Board later in the year, providing assurance on delivery, impact and areas requiring continued system leadership.

8. RECOMMENDATIONS:

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