1. Introduction

The Sheffield Safeguarding Children Board (SSCB) produced a comprehensive Equality and Diversity Guidance and Checklist in 2011. It had been developed to be used alongside the SSCB Child Protection Procedures, and all associated protocols and related documents.

The SSCB Child Protection Procedures and associated protocols are a large and constantly evolving body of work. We developed guidance and a checklist to accompany the procedures and protocols, to offer practical support to professionals working with children and families, to help them understand some of the issues that exist for different groups of people in Sheffield by being a reference guide for specific equalities issues.

Inevitably, any guidance can quickly become out of date, whether due to organisational changes, legislation or new and emerging issues.

Therefore, the updated Equality, Diversity and Inclusion Guidance 2016 became a portal to key sources of information on equality, diversity and inclusion. This not only reduced duplication, it also ensures that the most up to date information is always available.

The Equality, Diversity and Inclusion Guidance has been updated in 2019.

2. Sheffield's Population

The City of Sheffield is England’s third largest metropolitan authority. At its peak, in 1951, Sheffield’s population was 577,050. The population has been increasing again since 2001 and has grown at the same rate as the national average and above that of the City Region, rising from 513,100 in 2001, to 552,700 at the time of the 2011 Census, and 577,790 by 2017. This is projected to increase to around 588,000 by 2020. This has resulted from increases in births, net inward migration, and longer life expectancy.

In 1991 Sheffield’s Black Asian and Minority Ethnic (BAME) population (anyone not describing themselves as ‘White British’) made up 7% of the overall population. The proportion of residents classifying themselves as BAME has grown from 11% in 2001 to 21% in 2017. BAME adults make up 18% of the population and BAME children 32%.
The age group that has increased the most from 2011 to 2017 is the 25-34 group; 14.9% of our population is in this group and a further 18.1% is under 16. The factors which are having the most impact on this changing city profile are increasing numbers of university students and the inward migration of households with young families.

Sheffield has a geographical pattern of communities that experience differing levels of deprivation and affluence. Generally, the most deprived communities are concentrated in the north and east of the city whilst the most affluent are located in the south and west.

Fuel poverty is slightly higher than the national average in Sheffield, at 12.2% of households, thereby impacting 28,700. National statistics suggest that this rises to 28% of unemployed households and 22% of lone parent households with dependent children.

Issues which cannot be separated from experiences of financial exclusion and poverty include age, ethnicity, sexuality, disability and domestic abuse etc.

People within some groups can be disproportionally affected by disadvantage and inequality. For example, children are more likely to live in poverty if they are from a BAME background; 40.4% of Somali, 42.1% of Yemeni and 50.5% of Roma children in Sheffield are eligible for Free School Meals compared to 29.9% of all children in Sheffield. Children with SEN are also more likely to live in poverty; 34.6% of children with SEN Support, EHC Plan or Statement in Sheffield are eligible for Free School Meals compared with 18.0% of those without support (School Census 2018).

There are 100,000 people with a long term limiting illness, equivalent to 19% of the population, with 9% saying this limits their activity a lot. This is the closest estimate it’s possible to reach of disabled people living in the city.

For further information
2011 Census
Sheffield Facts and Figures
State of Sheffield
Community Knowledge Profiles

3. Black and Asian Minority Ethnic (BAME) People

Inevitably, the UK’s increasing ethnic and cultural diversity is being reflected in Sheffield. In 1991 Sheffield’s Black and Asian Minority Ethnic (BAME) population (anyone not describing themselves as ‘White British’) made up 7% of the overall population. In 2001 BAME groups made up around 11% of the City’s population and the 2011 Census identified that around 19% of Sheffield’s population was BME.

The largest of those groups is the Pakistani community, but Sheffield also has large Caribbean, Indian, Bangladeshi, Somali, Yemeni and Chinese communities. More recently, Sheffield has seen an increase in the number of overseas students, in those seeking asylum, refugees as well as economic migrants from within the enlarged European Union.

The ethnic diversity of the city will continue to change significantly in the future. This reflects both the higher proportion of BAME people who are in the child-bearing age groups, increased in-migration and higher age specific birth rates among some groups.

To help increase knowledge of Sheffield’s diverse population in 2006, Sheffield City Council commissioned the production of BAME community profiles as a tool to help services. Demographic changes since 2006 as well as new legal duties meant that profiles needed updating.

For further information
Community Knowledge Profiles
The BAMER Hub is part of Sheffield City Council’s Equality Hub Network. Its focus is on Black and Asian Minority Ethnic and Refugee people’s equality issues and is open to anyone interested in BAMER issues. Further information and contact details can be found https://equalityhubnetwork.org/

Ultimately, the diversity within BAME groups means that it is impossible to create a tool giving “all” the answers to questions and scenarios that practitioners will come across. However, there is a sizable body of information available online.

4. Disabled People

Attitudes towards disability affect the way people think and behave towards disabled people and also impact on outcomes for disabled people in the way they are treated and able to participate in society.

There are two main models of how disability is considered:

- The social model
- The medical model

Whilst models are a useful tool to help us think about and discuss a topic, they can be simplistic and make things appear more clear cut than they are in reality.

Social Model of Disability: The social model was created by disabled people and looks at the barriers erected by society in terms of disabled people being able to participate fully in day to day life. The model seeks to remove unnecessary barriers which prevent disabled people participating in society, accessing work and living independently. It recognises that attitudes towards disabled people create unnecessary barriers to inclusion and requires people to take proactive action to remove these barriers.

The 'social model' defines 'impairment' and 'disability' as very different things:

- **Impairment** is an injury, illness, or congenital condition that causes or is likely to cause a long-term effect on appearance and/or limitation of function of the individual.
- **Disability** is the loss or limitation of opportunities to take part in society on an equal level with others due to social and environmental barriers. It is the actions of people and organisations that can prevent people with impairment from taking a full and active part in society. It is up to organisations to do all we can to remove the 'barriers' that disable people face.

The social model of disability also focuses on people’s attitudes towards disability and recognises that attitudes towards disability can present barriers for disabled people in the same way as the physical environment can. These attitudes are many and varied, ranging from prejudice and stereotyping, to unnecessary inflexible organisational practices and procedures and seeing disabled people as objects of pity / charity.

Medical Model of Disability: The medical model looks at a person’s impairment first and focuses on the impairment as the cause of disabled people being unable to access goods and services or being able to participate fully in society. The medical model has informed the development and structure of the legislation and is reflected in people’s attitudes and associated negative outcomes. The medical model focuses on the impairment and what can be done to 'fix' the disabled person or provide special services for them as an individual.

The Equality Act 2010 defines disability as a physical or mental impairment which “has a substantial and long-term adverse effect on a person’s ability to carry out normal day-to-day activities”. Aspects of the Equality Act 2010 in relation to disability discrimination, follow the medical model of disability as they focus on what a person is unable to do.
Increasingly, disabilities that fall within the Equality Act definition are invisible and/or hidden to others while being completely debilitating to those affected.

Often not immediately apparent, invisible disabilities include chronic pain disorders, chronic fatigue conditions and mental illnesses. By their nature, these conditions can be difficult for others to recognise, acknowledge and/or understand simply because the symptoms are not always immediately apparent.

A Profile of the disabled community in Sheffield is available and is part of a series of Community Knowledge Profiles about different communities in Sheffield. The profile can be downloaded from.

**Community Knowledge Profiles**

We have a legal duty to remove the barriers which hinder or stop people accessing our services. Information is also available about [http://intranet/managers/equality-diversity/reasonable-adjustments-for-disabled-people](http://intranet/managers/equality-diversity/reasonable-adjustments-for-disabled-people)

Sheffield City Council worked with national organisation AccessAble (formerly Disabled Go Disability Sheffield and The AccessCard to support an online Accessible Sheffield Guide.

[https://www.accessable.co.uk/organisations/sheffield-city-council](https://www.accessable.co.uk/organisations/sheffield-city-council)

The Disability Hub is part of Sheffield's Equality Hub Network. Its focus is on disabled people's equality issues. The Disability Hub is open to anyone interested in disability issues. Further information and contact details can be found [https://equalityhubnetwork.org/](https://equalityhubnetwork.org/)

### 5. People of all Ages

The population age profile varies substantially across Sheffield, with age group sizes being heavily influenced by the number of students, migration, births and increasing life expectancy.

In the main, Sheffield population trends mirror national changes. However, there are interesting variations, particularly within the city. Whilst family size has been gradually reducing locally and nationally, patterns within Sheffield are not uniform, due to:

- Birth rates are higher for some BAME groups.
- Migrants tend to move to older established inner city areas where housing costs are lower. They also tend to have a younger population profile which can in turn lead to a higher birth rate.
- Housing developments can influence the age profile of an area as younger families are more likely to move into new developments than older age groups.

**Sources of further information**

The Sheffield Futures Young People’s Involvement Team works with young people aged 11 to 19 (up to 25 years for those with additional needs) to give them a voice at a local, city, regional and national level. They coordinate:

**Sheffield Young Advisors**

Young Advisors is a national charity working to improve the life of young people across the country. Sheffield Young Advisors are a diverse team of trained young consultants aged 16 to 25yrs who are commissioned to support organisations and local services improve their products and delivery and to make them more young people friendly. They are employed and co-ordinated by Sheffield Futures
and use a variety of methods to ensure that young people are given the chance to be meaningfully involved in service design, delivery and evaluation. All organisations who commission Sheffield Young Advisors have a different journey, as they tailor their services to individual needs. Email sarah.stevens@sheffieldfutures.org.uk.

Sheffield Youth Council

The Youth Council is made up of 30 young people from across Sheffield, of different ages, background and abilities. 12 elected Youth Councillors represent their peers at a citywide level for a 2 year term. There are also 12 special interest seats to ensure that all young people are represented within the city. This is made up from young people who associate themselves as: disabled, lesbian, gay, bisexual and transgender, young carer, with care experience, young refugees and asylum seekers and black minority ethnic. Email emma.hinchliffe@sheffieldfutures.org.uk.

Sheffield UK Youth Parliament (UKYP)

Are a group of 6 young people from across the city, elected every 2 years by their peers, to represent their concerns and issues to decision makers locally, regionally and nationally and to campaign on their behalf to influence change. They sit within the wider Youth Cabinet as well on regional Youth Voice boards. Sheffield UK Youth Parliament website. Email emma.hinchliffe@sheffieldfutures.org.uk

Children and Young people’s Engagement Project (CHILYPEP)

Chilypep works alongside children and young people aged 8-25 to find creative ways of involving them in decisions that affect their lives. Chilypep aims to ensure that children and young people can be meaningfully involved in decisions affecting their lives. http://www.chilypep.org.uk

The Age Hub is part of Sheffield's Equality Hub Network. The Age Hub is intergenerational and open to anyone interested in issues related to age and aging. Further information and contact details can be found https://equalityhubnetwork.org/

6. People of Different Religions / Beliefs No Beliefs

There are many different faith communities resident in Sheffield as well as people of no faith. It is also very difficult to offer definitive guidance around this strand due to the diversity of belief and opinion found in all faiths.

The 2011 Census identified Sheffield’s faith population for the city and by each Ward. This provides useful background information about religious diversity in Sheffield. http://www.sheffield.gov.uk/content/sheffield/home/your-city-council/population-in-sheffield.html

The BBC had produced a helpful introductory guide to religious diversity covering a number of faiths. Though no longer updated, the page continues to remain a very useful resource

http://www.bbc.co.uk/religion/religions/

http://www.bbc.co.uk/religion

The Religion/Belief Hub is part of Sheffield's Equality Hub Network. Its focus is on equality issues of people with a religious belief and people with no belief. Further information and contact details can be found https://equalityhubnetwork.org/
7. Gender

Men and women are not homogenous groups; experiences continue to differ according to factors such as age, disability, sexual orientation or race.

We also tend to think of gender as a binary (the idea that people are men or women). In reality, things are more complicated. A non-binary person is someone who identifies as something other than entirely a man or entirely a woman. They may feel more like a combination of both (androgyne); or that they feel like a man on some days, a woman on others, and/or a combination of the two at other times (genderfluid); or that they simply have no gender at all (agender). Some non-binary people consider themselves transgender (or trans), and others do not. However, non-binary people face similar challenges to binary transgender people when compared to their cisgender counterparts.

Despite anti discriminatory legislation being in place for over 40 years, outcomes and experiences for men and women continue to differ in many key ways.

- Women are still the primary carers of children and make up around 90% of all lone parents. Household Labour Force Survey 2010.
- Many parents struggle to balance work and family life: 62% of fathers surveyed thought that fathers should spend more time caring for their children. Working better 2009. In 2009, the gap between full-time men and women’s hourly rates of pay was 12.2%. The gap when part-time employees are included was 22.0%. ONS Annual Survey on Hours and Earnings 2009.
  While the pay gap between men and women has been reducing on average, there is still evidence that, on average, men are paid more than women; the average gender gap in median incomes in Sheffield was £8,675 in 2017.
- In 2018 male full time workers in Sheffield earn £557.50 per week and women £472.50 per week (gross pay).
- In 2009/10, women were the victims of nearly three quarters (73%) of incidents of domestic violence. In four out of five (81%) incidents, the offender was male. British Crime Survey 2009/10.

Sources of further information

A women’s profile in Sheffield is available and is part of a series of Community Knowledge Profiles about different communities in Sheffield. The profile can be downloaded from.

Community Knowledge Profiles

The Women’s Hub is part of Sheffield's Equality Hub Network and its focus is on women’s issues. Attendance at Hub meetings is only open to self-identified women. Further information and contact details can be found https://equalityhubnetwork.org/


http://www.fawcettsociety.org.uk/?gclid=CJOC4dmx9cwCFdEy0wod3v4HHQ


http://learnsheffield.co.uk/Partnerships/Healthy-Minds?id=swr&pid=downloads

8. Lesbian, Gay, Bisexual and Transgender Plus (LGBT+)

Lesbian Gay and Bisexual (LGB) people come from all walks of life: they could be old or young, black and asian minority ethnic (BAME) people, men, women, non binary, disabled, from any social class, from any faith group or of no faith.
Young LGB people and adults can be vulnerable due to people’s reactions to their identity, particularly if their parents or other family members are not supportive as well as the wider community. Many young people know they are LGB or have feelings of being different at an early age. However, some young people do not come out until they are 15 or 16, or even in later adulthood. The period of 11 to 16 years old has been described the isolation years; therefore it is a critical time for providing support and information wherever possible.

Homophobic and biphobic bullying is increasingly visible in schools and in communities. Evidence suggests that LGB young people, and those perceived to be LGB, are at greater risk of homophobic and biphobic bullying.

Young people with LGB parents or carers sometimes experience bullying. Such issues can be exacerbated if an adult dismisses their sexual orientation. Some young people report that adults, including professionals, state that the young person is too young to know whether or not they are LGB. Many people are still reluctant to disclose their sexual orientation to their healthcare worker because they fear discrimination or less equal treatment.

- In comparison with their heterosexual peers, young LGB people are 4 times more likely to suffer major depression and 3 times more likely to be assessed with generalised anxiety disorder.
- In comparison with their heterosexual peers, young gay and bisexual men are 7 times more likely to have attempted suicide and 3 times more likely to have suicidal intent.
- In comparison with heterosexual young women, lesbian and bisexual girls are almost 10 times more likely to smoke at least weekly and twice as likely to have consumed alcohol in the past month.
- In comparison with their heterosexual peers, young gay and bisexual men may be more likely to use recreational drugs.
- In comparison with their heterosexual peers, LGB young people are at increased risk of verbal and physical abuse.

Society divides us into categories at birth - boy or girl - depending on our male or female appearance. Our reproductive organs, as well as our brains, have distinctly different male and female characteristics. These physical differences define our sex, whereas gender identity describes the inner sense of knowing that we are men or women, and gender role describes how we behave in society.

Trans An umbrella term to describe people whose gender is not the same as, or does not sit comfortably with, the sex they were assigned at birth. Trans people may describe themselves using one or more of a wide variety of terms, including (but not limited to) transgender, non-binary, gender queer

Estimates from an Equality and Human Rights Commission survey, put the number of transgender people in the UK at around 1%. However, it is likely that the number of transgender people is actually much higher than this.

The gender Identity Research and Education Society (GIRES) predicts that because of growing public awareness, that a school of 1,000 pupils should expect around 10 pupils to be questioning their gender to some degree.

Research studies with transgender adults have asked when they first become aware that they were transgender; on average over 80% realised before they left primary school but did not disclose their transgender until they were older.

Transgender people of all ages remain a particularly vulnerable group. Transgender children and young people are a particularly vulnerable group, research and surveys have identified a picture of isolation, transphobic bullying and hate incidents, mental health concerns, self harm, substance misuse and high rates of attempted suicide.
Trans is an emerging area for organisations as increasing numbers of children and young people identify themselves as trans.

Sources of further information

Stonewall is a charity working for equality for lesbian, gay, bisexual and trans (LGBT) people at home, at work and at school.  
www.stonewall.org.uk

Mermaids National Service for transgender children and their families.  
www.mermaidsuk.org.uk

Tavistock and Portman clinic - Gender Identity Development Service  

Gender Identity Research and Education Society (GIRES)  
www.gires.org.uk

The Gender Trust www.gendertrust.org.uk provides support and information for transgender people and their families.

Gendered Intelligence works predominantly with the trans community and those who impact on trans lives; and specialise in supporting young trans people aged 8-25.  
http://genderedintelligence.co.uk/

SAYiT is the LGBT+ youth group for Sheffield  
https://sayit.org.uk/

http://sayit.org.uk/trans-support-pack-for-sheffield-schools/

http://learnsheffield.co.uk/Partnerships/Healthy-Minds?id=swr&pid=downloads

There is little knowledge around intersex, the following links are a useful source of information.

https://www.nhs.uk/conditions/disorders-sex-development/  
https://en-gb.facebook.com/intersexuk/

A Profile of the LGBT community in Sheffield is available and is part of a series of Community Knowledge Profiles about different communities in Sheffield. The profile can be downloaded from  
Community Knowledge Profiles

The LGBT Hub is part of Sheffield's Equality Hub Network. Its focus is on LGBT (Lesbian, Gay, Bisexual and Trans) equality issues. The LGBT Hub is open to anyone interested in LGBT issues. Further information and contact details can be found https://equalityhubnetwork.org/

9. Carers

Carers come from all walks of life, cultural backgrounds and age groups. Carers look after a relative, friend or neighbour, who cannot manage without help because of illness, age or disability. There are
about 7 million carers in Britain, that’s one in every seven adults. Therefore in Sheffield there are approximately 61,000 adult carers.

Those under the age of 16 are classed as young carers who are looking after a parent or member of their family who needs support. This may be because they have a mental health problem, misuse drugs or alcohol or have a disability or other health problem. There are over 2,000 young people under 16 years old providing care in Sheffield.

With so many adult responsibilities young carers often miss out on opportunities that other children have to play and learn. Many struggle educationally and are often bullied for being ‘different’. They can become isolated, with no relief from the pressures at home, and no chance to enjoy a normal childhood. They are often afraid to ask for help as they fear letting the family down or being taken into care.

Sources of further information


Carers UK - the voice of carers The Carers' Hub is part of Sheffield's Equality Hub Network. Its focus is on carers' equality issues. Further information and contact details can be found https://equalityhubnetwork.org/

10. Community Cohesion

The term ‘community cohesion’ is not new and has widely been used to describe a state of harmony or tolerance between people from different backgrounds living within a community. In recent years cohesion has become an important goal of public policy starting from the 2001 disturbances and the emergence of extremism, particular from the far right amongst radical Islamists. In these circumstances there has been an increased emphasis on how we create a sense of belonging and place, based on a more inclusive set of identities, contributing to Britishness, citizenship, mutual respect and trust.

The concept is captured quite clearly in the definition used by the Local Government Association (LGA) in two guides written in 2002 and 2004 respectively:

"A cohesive community is one where:

- there is a common vision and a sense of belonging for all communities;
- the diversity of people’s different backgrounds and circumstances is appreciated and positively valued;
- those from different backgrounds have similar life opportunities; and
- strong and positive relationships are being developed between people from different backgrounds and circumstances in the workplace, in schools and within neighbourhoods."


Community cohesion overlaps with the Equality Act Public Sector Equality Duty to have due regard to the need to foster good relations, the PREVENT Duty as well as Fundamental British Values for schools.

Sources of further information

http://www.cohesionsheffield.co.uk/
11. PREVENT

PREVENT is a strand of the Government’s Counter Terrorism Strategy. The Counter Terrorism and Security Act 2015 made PREVENT a statutory duty for public bodies, including local authorities, schools and colleges, the police and health services.

The PREVENT strategy aims to stop people becoming terrorists or supporting terrorism by:

- Challenging extremist ideologies (that might be promoted through internet propaganda or extremist speakers).
- Safeguarding Individuals who are at risk of being drawn into terrorism.
- Supporting institutions (including schools, councils, universities, faith organisations, etc.) to implement the Prevent Duty.

PREVENT is a safeguarding issue and seeks to support individuals before they get involved in criminal activity. It is concerned with all forms of terrorism, including that driven by extreme Islamist ideology, extreme right wing groups, animal rights extremism, etc.

Terrorist groups often draw on extremist ideology which seeks to justify or promote terrorism or encourage others to commit terrorist acts.

PREVENT is a safeguarding issue. Children, young people and vulnerable adults can be drawn into violence or they can be exposed to the messages of extremist groups by many means: through the influence of family members or friends and/or direct contact with extremist groups and organisations or, increasingly, through the internet. This can put a young person or a vulnerable adult at risk of being drawn into criminal activity and has the potential to cause significant harm. Children, young people and vulnerable adults are at risk of exposure to, or involvement with, groups or individuals who advocate violence as a means to a political or ideological end.

It is very rare that individuals, including those who have been exposed to extremist ideologies, become drawn into terrorism or supporting terrorist organisations. However, risks and vulnerabilities can still be present. Numerous factors can contribute to and influence an individual’s vulnerability or susceptibility to extremism. It is important to consider these factors as part of a wider safeguarding approach. It is also necessary to understand those factors that build resilience and protect individuals from engaging in violent extremist activity.

Safeguarding children, young people and vulnerable adults from radicalisation is no different from safeguarding them from other forms of harm.

Sources of further information


www.educateagainsthate.com http://www.ltai.info/ http://www.preventforfeandtraining.org.uk/ are comprehensive resources for professionals

http://www.preventtragedies.co.uk/ http://learnsheffield.co.uk/Partnerships/Healthy-Minds?id=swr&pid=downloads

12. Gender Based Violence (Child Sexual Exploitation, Female Genital Mutilation/Honour Based Violence/ Forced Marriage)

This section is a brief overview of links around key areas of gender based violence.
Sources of further information

http://www.endviolenceagainstwomen.org.uk/

https://www.gov.uk/government/policies/violence-against-women-and-girls


http://www.bbc.co.uk/ethics/forcedmarriage/introduction_1.shtml

https://www.gov.uk/stop-forced-marriage


http://learnsheffield.co.uk/Partnerships/Healthy-Minds?id=swr&pid=downloads

13. Equality Act 2010

The Equality Act 2010 simplified anti-discrimination laws by having a single Equality Act. This makes it easier for people to understand and comply with the law. The 2010 Act also strengthened protection in some situations.

The act covers nine protected characteristics, which cannot be used as a reason to treat people unfairly. Every person has one or more of the protected characteristics, so the act protects everyone against unfair treatment. The protected characteristics are:

- age
- disability
- gender reassignment
- marriage and civil partnership
- pregnancy and maternity
- race
- religion or belief
- sex
- sexual orientation

The Equality Act made it unlawful to treat someone differently, through direct and indirect discrimination, harassment, and victimisation and by failing to make a reasonable adjustment for a disabled person.

Since 6 April 2011 all public bodies including:

- local authorities
- Schools, colleges and other state-funded educational settings
have been bound by the Public Sector Equality Duty. Age applies to a school as an employer, but not with regard to the treatment of pupils and prospective pupils.

We are bound by the Public Sector Equality Duty to have due regard to the need to:

(a) eliminate unlawful discrimination, harassment, and victimisation
(b) advance equality of opportunity; and
(c) foster good relations

The general duty is supported by specific duties, these are to:

- Publish information which demonstrates our compliance with the duty to have due regard for the three aims of the general duty and to annually repeat this.
- Prepare and publish our specific and measurable objectives to achieve the three aims of the duty and undertake this no later than in four years time.

The below is an easy read introduction to the Equality Act 2010: https://www.gov.uk/government/publications/easy-read-the-equality-act-making-equality-real

More detailed information about the Equality Act is available from:

http://learnsheffield.co.uk/Partnerships/Equality-Documents

14. Student Wellbeing Resource

The Student Wellbeing Resource has been developed by Learn Sheffield, Sheffield City Council and a range of providers to support schools to meet the needs of vulnerable pupils. The resource provides information about a wide range of barriers that children and young people may face.

Each section of the online resource provides an overview of the barriers, examples of best practice advice and links to available resources and local provision.

For further information:

http://learnsheffield.co.uk/Partnerships/Healthy-Minds?id=swr&pid=downloads

15. People Staff and Equality Inclusion Network Carers

Our Strategic Equality and Inclusion Network (SEIN) is open to all employees interested in equality, diversity and inclusion (EDI).
Our vision is for EDI to become so embedded in the portfolio and its partners’ cultures and value systems, that they become ‘Business as Usual’.

For further information:

http://intranet/employment/equality-diversity/staff-equality--inclusion-networks