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TITLE of PAP	ER	Workforce Di Standard 202		lity Equality	PAPER R	PAPER REF5.1.2					
KEY PRIORIT	IES	Attract, devel workforce	lop a	nd retain a highl	y skilled, en	gaged an	d diverse				
PURPOSE OF	THE PAPER			ut the Trust subr Workforce Disal	•		•				
For Approval			F	or Assurance		\boxtimes					
For Decision			D)iscussion/Info	mation						
AUTHOR / LEAD	Nabila Ayub, He and Inclusion Suzanne Harts Director of Peop	horne, Deput	D	CCOUNTABLE DIRECTOR		and O	Director of rganisational				
13th September 19 th October 20	22 - Trust Manager er 2022 - Diversit 022 – Trust Mana AGREED AT: oup: TMG	y and Inclusio		ering Group	Date: 3/08/22						
RECOMMEND	DATION(S)	1. Note	19/10/22 It is recommended that the Board 1. Note the contents of the paper; and								
		2. Sup	port	the action plans	as set out in	Append	ix 2.				
RISK ASSESS	-					Yes	No				
-	k Register and/ nd in Section 4. /			ce Framework	amended						
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Board of Director Meeting (held in Public)

1 November 2022

NHS Workforce Disability Equality Standard 2022

Report of the Director of People and Organisational Development

1. PURPOSE/AIM

This paper sets out the Trust submission against our progress towards the NHS Workforce Disability Equality Standard (WDES).

2. BACKGROUND/CONTEXT

- 2.1 The Workforce Disability Equality Standard (WDES) came into force on 1st April 2019 and is a set of ten specific measures (metrics) that enable NHS organisations to compare the experiences of disabled and non-disabled staff. A full breakdown of the indicators is included in Appendix 1.
- 2.2 The WDES was commissioned by the Equality and Diversity Council (EDC) during 2019 and is mandated through the NHS Standard Contract. This is our fourth year of publication.
- 2.3 Working towards the WDES is important as it enables Trusts to better understand the experiences of their disabled staff to support positive change for employees. The ultimate aim is to provide a more inclusive environment for disabled people working in the NHS. Like the Workforce Race Equality Standard, on which the WDES is in part modelled, it will also identify good practice and compare performance regionally and by type of Trust.

3.0 2022 WDES DATA SUBMISSION

- 3.1 The Trust's WDES data submission was submitted in accordance with the statutory deadline of 31st August 2022. The full data set is enclosed in Appendix 1.
- 3.2 In addition to the data submission, there is a requirement for the Trust to publish action plans, to indicate how we aim to close the gaps in parity, on the Trust's website no later than 31st October 2022. Our action plans, as set out in Appendix 2, have been developed in collaboration with our Staff Networks, Trade Unions and other stakeholders.

4.0 DATA ANALYSIS – ISSUES OF SIGNIFICANCE

- 4.1 Appendix 1 shows the data with an indication on whether the Trust progress against the standards has positively or negatively moved towards parity for our staff living with disabilities. Unfortunately, 8 out of the 10 metrics show parity has reduced and the following areas are highlighted for TMG's attention.
- 4.2 **Metric 1** Percentage of staff in each of the AfC bands 1 9 or medical and dental subgroups and VSM (including executive board members) compared with the percentage of staff in the overall workforce.

This metric has positively increased over the last two years; staff living with disabilities now represent 4.3% of workforce, compared to 3.3% last year. However, our National Staff Survey results indicate that approximately 8% of the Trust's workforce is living with a disability/long-term condition.

Having accurate data about our workforce enables us to be able to focus our efforts to improve staff experience, hence, a need to encourage staff to share their disability status with the Trust. To support this, the diversity census was launched in June 2022. It is acknowledged that this initiative will need a multi-dimensional approach to reflect improvements in our workforce data, therefore a hard copy return will be sent out to staff in January 2023.

Further actions planned to support the increased diversity of staff population at YAS include a review of our recruitment and selection practices to ensure they are inclusive for example a re-design of the ECA & Call Handler selection processes. This also includes deep dive analysis of the candidate's recruitment pathway and an introduction to diverse recruitment panels targeted at Band 7 and above.

Work is also underway with the Community Engagement Team linking to the Trust's Engagement Strategy to increase the level of engagement in educational institutions and local community groups to attract a diverse workforce.

4.3 **Metric 3** - Relative likelihood of disabled staff compared to non-disabled staff entering the formal capability process, as measured by entry into the formal capability procedure.

This ratio increased from 0.0 in 2021 to 8.56 in 2022 i.e., staff living with disabilities are 8 ½ times more likely to enter a capability process (performance management). Whilst this figure may look alarming, the small numbers involved (7 overall Trust cases, over 2 years, with 2 staff living with disabilities) have resulted in this.

Inclusive and Compassionate Conversation training will be continued for managers, as will the Employee Relations review process which assesses the merit of progressing cases to a formal capability process.

A review of the Performance Management Policy will also be undertaken to ensure all reasonable adjustments have been implemented to support staff performance and certainly prior to the initiation of any formal performance management.

4.4 **Metric 4 -** Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public, colleagues, and managers in last 12 months. (Originates from NSS)

Unfortunately, half of our staff living with disabilities experience bullying from patients; an increase of 3.7% from 2021 to 51.2% in 2022. However less than half of staff, (47.2%) report the unwanted behaviour. Likely factors of abuse could be the levels of demand and increase in waiting times and therefore, staff living with disabilities have received a higher volume of public frustration. It is also likely that bullying, and harassment is not reported as staff feel insufficient action has been taken in previous instances.

Actions to support this metric include a review of the current messaging and approach to 'abuse' against staff, whilst encouraging staff to report abuse. This includes the continuation of data flags on addresses where abuse has occurred. The continued roll out of body worn cameras, with footage used to prosecute, and the addition of fields on DATIX, to enable monitoring of all protected characteristics, is being considered.

The 'Restorative Culture' work is to be rolled out and included in the HR policy, aimed at enhancing the Trust's approach to reporting of bullying, harassment, and abuse at work, ensuring that processes are transparent, and setting out the key routes to reporting incidents.

4.5 **Metric 6** - Percentage of disabled staff compared to non-disabled staff saying that they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties.

Metric 6 shows a negative increase from previous years (29.7% in 2021 to 32.8% in 2022) in comparison to non-disabled staff. It is likely that extreme operational pressures and Trustwide increasing staff absence levels will have impacted on this metric, with our staff living with disabilities feeling more pressure to come to work when unwell.

Work to support this includes a review of the Reverse Mentoring pilot (originally for people from diverse ethnic backgrounds) with a plan for this to be rolled out to other protected groups including those staff living with disabilities. This will support with developing a learning culture in terms of sharing lived experience.

In addition, a programme to launch the micro-behaviours and allyship programme is being planned. The educational approach aims to increase awareness of subtle and often unintentional prejudicial behaviour.

4.6 **Metric 7** - Percentage of disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their organisation values their work.

There has been a disappointing decrease in staff feeling valued at the Trust (21.5% from 34.6% in 2021). Unfortunately, the National Staff Survey indicated that all staff are generally not feeling valued, it is not purely those living with disabilities.

Staff engagement remains a key priority for the Trust with continued work with our Staff Networks and Trade Unions. The targeted culture work supports engagement and recognition as does the programme to develop the YAS way which has a clear focus on staff engagement.

4.7 **Metric 8** - Percentage of disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work. (Reported in the National Staff Survey)

There was a significant negative decrease in this metric with only 60.9% of disabled staff reporting adequate adjustments were provided, a 12% (73.1%) decrease since 2021.

Actions to continue supporting staff with requirements for adequate adjustments include a relaunch and refresh of the Health Passport, which aimed to enable support for adjustments to be offered, as unfortunately the original launch was in December 2021, i.e., just after the National Staff Survey closed. The passport and accompanying guidance will also be signposted in appraisal documentation, for managers to continue supporting conversations. The continued training on Inclusive and Compassionate Conversations will encourage discussion regarding access to adequate adjustments, flexible working and support from wider staff networks.

5.0 NEXT STEPS

- 5.1 As approved by TMG, the action plans were published on our website on the statutory deadline of 31st October 2022.
- 5.2 The action plans will be monitored by the Diversity and Inclusion Steering Group (DISG) on a bi-monthly basis then through the Trust Management Group and Quality Committee for end of year assessment and evaluation. Also the Trust Board will receive a bi-annual progress report on the combined diversity and inclusion action plan which will include these actions.

6.0 **RECOMMENDATIONS**

It is recommended that the Board:

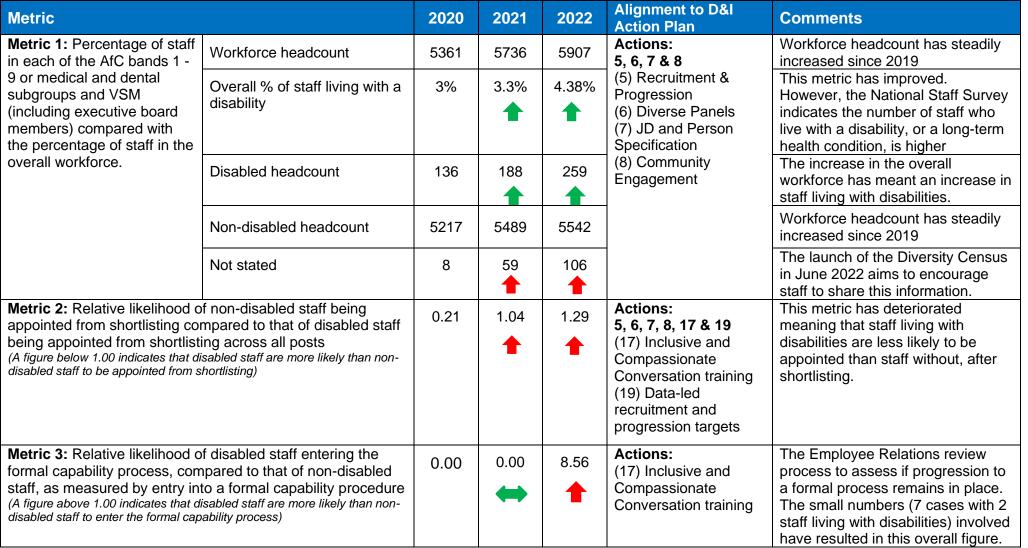
- 1. Note the contents of the paper; and
- 2. Support the action plans as set out in Appendix 2

7.0 APPENDICES

Appendix 1	WDES data
Appendix 2	WDES Action Plan 2022/23







Metric			2020	2021	2022	Alignment to D&I Action Plan	Comments	
Metric 4: Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public,	% of staff experiencing harassment, bullying or abuse from	Disabled	52.3%	47.5%	51.2%	Actions: 1, 2, 3, 4 & 9 (1) Targeted culture work (2) Allyship &	A deterioration for all staff with a slightly larger increase for staff living with disabilities. Some explanation could be levels of demand and increase in waiting	
relatives of the public, colleagues and managers in last 12 months.	patients/service users, their relatives or other members of the public in the last 12 months	Non- Disabled	40.1%	37%	39.5%	Microaggressions (3) Say Yes to Respect (4) Resource for targeted and bespoke	times, potentially staff living with disabilities have received the result of more public frustrations.	
	% Of staff experiencing harassment, bullying or abuse from	Disabled	16.2%	19.2%	19.2%	work on behaviours (9) Staff Networks, FTSU and leader's intelligence	This has remained the same for staff living with disabilities and slightly increased for staff without disabilities.	
	managers in the last 12 months	Non- Disabled	9.1%	10.3%	11.1%			
	harassment, bullying	Disabled	25.9%	24.5%	28.0%		This figure unfortunately has deteriorated this year. During times of extreme pressure, relationships may have been strained and	
	or abuse from other colleagues in the last 12 months	Non- Disabled	14.4%	16.7%	16.6%		declined as a result.	
	% Of staff saying that the last time they experienced harassment, bullying	that the last time they experienced	Disabled	44.4%	47.8%	47.2% ➡		A slight deterioration in reporting, despite encouragement for staff to report such instances. Staff may have decided that insufficient action has been taken previously and
	they or a colleague reported it in the last 12 months	Non- Disabled	39.2%	46.1%	42.5%		hence choose not to report.	
Metric 5: Percentage of disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.			41.1%	47.3%	43.8%	Actions: 5, 6, 17, 18 & 19	A disappointing deterioration this year and potentially connected to Metric 2. This could also be connected to the HEE CPD budget	
		Non- Disabled	47.7%	53.8%	52.0%		available to professionally registered staff.	

Metric		2020	2021	2022	Alignment to D&I Action Plan	Comments
Metric 6: Percentage of disabled staff compared to non-disabled staff saying that they have felt pressure from their manager to come to work,	Disabled	36.1%	29.7%	32.8%	Actions: 1, 2, 3, 9, 10, 11 & 17 (11) Reverse	This figure has deteriorated this year. The extreme operational pressures the Trust has faced for
despite not feeling well enough to perform their duties.	Non- Disabled	23.6%	22.0%	23.6%	Mentoring roll-out	the last couple of years will have impacted on this metric.
Metric 7: Percentage of disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their	Disabled	29.0%	34.6%	21.5% –	Actions: 1, 2, 3, 9, 10, 11 & 17	This has decreased for all staff in the Trust. Staff engagement remains as a key priority for the
organisation values their work.	Non- Disabled	38.9%	41.6%	30.9%		Trust.
Metric 8: Percentage of disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work.		67.7%	73.1%	60.9% ↓	Actions: 14, 15, 16 & 17 (14) Reasonable Adjustment Guidance (15) Health Passport (16) Neurodiversity Guidance	A reduction for all staff. Unfortunately, the launch of the reasonable adjustment passport came after the national staff survey and extreme pressure may have led to less support for staff with disabilities
Metric 9a: The staff engagement score for disabled staff, compared to non-disabled staff and the overall engagement score for the	Disabled	6.2	6.3	5.5 🖊	Actions: 10, 11 & 17 (10) Staff Equality	Whilst this metric has significantly deteriorated, it is worth noting that the staff engagement score in the
organisation.	Non- Disabled	6.8	6.8	6	Conference	National Staff Survey deteriorated for all staff, likely due to extreme pressure.
Metric 9b: Has your Trust taken action to facilitate the voices of disabled staff in your organisation to be heard? (yes) or (no)		Yes	Yes	Yes	Actions: 2, 9 & 10 Strengthen relationships between Staff Networks, FTSU and Cultural Ambassadors (9)	Yes. Diversity & Inclusion Steering Group, Disability Support Network (check-ins etc), Joint Steering Group, Cultural Ambassadors, Employee Voice Network
Metric 10 - Percentage difference between the organisations' board membership and its overall workforce disaggregated:	Disabled	8%	11%	18.18%	Actions: 6	The percentage of staff living with disabilities on the Trust Board is higher than that declared by staff
	Non- Disabled	92%	89%	81.82%		on the Electronic Staff Record.



Workforce Disability Equality Standard Action Plan 2022/23

Date Approved:

Developed in collaboration with



Disability Support Network



Pride@YAS (LGBT+) Staff Network





Culture and Leadership

"Through effective leadership develop a positive and inclusive culture"



Workforce Disability Equality Standards - Action Plan 2022/23

Yorkshire Ambulance Service NHS Trust is passionate about ensuring our services and employment practices are accessible and inclusive for the diverse communities we serve and the people we employ or volunteer with us. This commitment is reflected in the Trust's vision and values with equality, diversity and inclusion at the heart of these.

We want to be an employer of choice for individuals regardless of their age, disability, gender identity/gender transition phase, sexual orientation, religion and belief, race, maternal or and pregnancy status, marriage/civil partnership status, social economic background or any other distinction. Our inclusive workforce will support our delivery of high-quality services and provision of compassionate care to all our patients and service users. Therefore, our approach to equality, diversity and inclusion needs to go beyond legal compliance and be central to the Trust's core business.

One of the Trust's strategic aims is to "Attract, develop and retain a highly skilled, engaged and diverse workforce". This area is being implemented through the Trust's People Strategy where through effective leadership we aim to: develop a positive and inclusive culture; celebrate and support difference in our workforce and embrace diversity and promote inclusivity to be an inclusive organisation and representative of the communities we serve.

Trust wide representation at the Diversity and Inclusion Steering Group enables partnership working on many key priority areas for equality, diversity and inclusion including inclusive practices, dignity and respect, supporting our staff who live with disabilities, creating an LGBTQ+ friendly environment and providing a voice for every member of staff regardless of their characteristics. Our connections with other NHS organisations and the ICS will ensure best practice, innovation and learning is applied in all that we do.

We are committed to ensuring parity between our colleagues living with, or without, a disability; hence this action plan aims to move the Trust forwards to meet these standards. Our plan has been developed following a number of stakeholder events, which has included our Staff Networks, Trade Union colleagues, Board Members and Operational colleagues. The plan is aligned with our over-arching Equality, Diversity, and Inclusion Plan as we purposely want to focus our attention on a small, but impactful and measurable, number of objectives to ensure these are delivered and actioned, regardless of our going operational pressures.

Our plan is linked directly to the five strategic aims of the People Strategy: Culture & Leadership, Recruitment, Retention & Resourcing, Employee Voice, Health & Wellbeing and Education & Learning. This connection enables joined up working within our strategic and operational workforce and OD plans for 2022/2023. The objectives also closely link to expectations as outlined in the NHS People Plan.

We specifically acknowledge, and thank, our Staff Networks for their support, guidance, and insight in the production of our plan.

Monitoring and Evaluation

The action plan will be monitored by the Diversity and Inclusion Steering Group (DISG) on a bi-monthly basis and through the Trust Management Group, Quality Committee and Trust Board for end of year assessment and evaluation.

Note – The numbering relates to actions on the approved Equality, Diversity, and Inclusion Action Plan. Some actions have been removed as they are specific to either gender or race, therefore the numbering is not sequential



	WORKFORC	E	DISABILITY EQUAL	ITY STANDAR	RD - ACTION PLAN 202	2 - 2023	
Aim	Objective		Actions to meet objective	WDES Metric	Measures / Baseline data (Red) Annual: A Quarterly: Q Monthly: M	Completion by	Lead and Partners
Our culture is inclusive and compassionate	Every department has a diverse and inclusive culture, where staff can bring their true self to work with differences embraced and celebrated.	1	To undertake targeted culture work in areas where diversity and inclusion is of particular concern.	Metric 4: Bullying & harassment Metric 6: Pressure to attend work although unwell Metric 7: Feeling valued	Staff survey engagement score 2021 (A): 5.9 FTSU: Decrease in cases regarding treatment associated with protected groups (Q) Dignity and Respect cases: 8 cases during 2021/22 (A)	Ongoing	Lead: Associate Director of Education & Learning Partners: OD/ER ED&I Teams, FTSU
	All leaders and staff are more cognisant of behaviours that can have harmful effects on marginalised groups	2	Through the staff networks launch and promote a micro-behaviours and allyship programme that enables education of subtle and often unintentional prejudicial behaviour.	Metric 4: Bullying & harassment Metric 6: Pressure to attend work although unwell Metric 7: Feeling valued Metric 9b: Voices for staff living with disabilities	Turnover at 31/3/22: 11.9% (M) Stay/Exit interview data	31 December 2022	Lead: Head of EDI Partners: ED&I Team
Bullying, harassment, and abuse against staff is prevented and tackled to create a culture	To reduce, year on year bullying harassment and abuse against staff	3	Devise and rollout plan for the 'Say Yes to Respect' Campaign with targeted action/training for identified areas to improve culture and behaviours.	Metric 4: Bullying & harassment Metric 6: Pressure to attend work although unwell Metric 7: Feeling valued	Year-on-year improvement to: <u>National Staff Survey 2021</u> Q13b In the last 12 months how many times have you personally experienced harassment, bullying or abuse at work from managers? 13.9% (A)	31 March 2023	Lead: Head of OD Partners: HR / OD BP Teams ED&I Team

Aim	Objective		Actions to meet objective	WDES Metric	Measures / Baseline data (Red) Annual: A Quarterly: Q Monthly: M	Completion by	Lead and Partners
of civility and respect.		3a	Restorative culture work to be rolled out and included in DAW policy to enhance the Trust's approach to reporting of bullying, harassment, and abuse at work, ensuring that processes are transparent, and set out the key routes to reporting incidents.		3c. In the last 12 months how many times have you personally experienced harassment, bullying or abuse at work from other colleagues? 20.7% (A) Dignity and Respect cases: 8 cases during 2021/22 (A)	31 March 23	Lead: Head of Employee Relations Partners: OD Team
	Staff feel safe and have confidence to and know how to raise issues of concern and/or bullying	4	Secure a resource to do bespoke and targeted work with teams on dealing with and recognising unacceptable and bullying behaviour.	Metric 4: Bullying & harassment (patients/staff and managers)		31 March 2023	Lead: Head of OD Partners: HR/ODBP/ ED&I Teams
		4a	Review the current messaging and approach to 'abuse' against staff.			31 March 2023	Lead: Head of Communication Partners: ED&I Teams
		4b	Encouraging staff to report abuse leading to potential data flags on addresses, where abusive behaviour has occurred.			31 March 2023	Lead: Head of Communication Partners: ED&I Teams
		4c	Body worn cameras rollout with footage used to prosecute.			Ongoing	Lead: Head Safety Partners: H&S Committee
		4d	Request if fields, to enable monitoring all Protected Characteristics, can be added on DATIX.			31 March 2023	Lead: Head of Safety Partners: ED&I Teams

Aim	Objective		Actions to meet objective	WDES Metric	Measures / Baseline data (Red) Annual: A Quarterly: Q Monthly: M	Completion by	Lead and Partners
Our recruitment and selection practices are inclusive for staff and prospective applicants	Our workforce profile represents and is comparable to the communities we serve.	5	Through a series of targeted workshops (mass recruitment exercises), undertake a review of our recruitment and selection practices to ensure they are inclusive i.e., re-design ECA & Call Handler. This includes deep dive analysis of the candidate's recruitment pathway.	Metric 1: Increasing the diversity of the workforce Metric 2: Recruitment of candidates living with disabilities Metric 5: Equal opportunities for career progression or promotion.	Year-on-year improvement to: As at 31/3/2022: 6.92% of the workforce are people from diverse ethnic backgrounds staff (Q) Attraction from people from diverse ethnic backgrounds communities is increased: BME v White Applicants	31 March 2023	Lead: HRBP (EOC/111) Partners: ED&I Team Recruiting Managers YAS Academy
		6	From October 2022 introduce diverse recruitment panels for leadership roles (Band 7+) through training more staff from all groups in R&S who can support panels for senior leadership roles to be diverse by March 2023.	Metric 1: Increasing the diversity of the workforce Metric 2: Recruitment of candidates living with disabilities Metric 5: Equal opportunities for career progression or promotion. Metric 10: Trust Board representation	AppliedShortlistedAppointed18.61%14.34%10.81%	31 January 2023	Lead: Head of EDI Partners: OD Team Staff Networks Recruitment Manager
	All roles have job descriptions/person specifications to set out the minimum / essential criteria, reducing possible discrimination	7	Developing a new job description and personal specification template/guidance to ensure criteria are inclusive	Metric 1: Increasing the diversity of the workforce Metric 2: Recruitment of candidates living with disabilities		31 December 2022	Lead: Head of Employee Relations Partners: Recruitment Manager, ED&I Team
	To improve the numbers of applications, and subsequent appointments of, candidates from	8	Linking to the Trust's engagement strategy, where possible, with other emergency services, hold a series of outreach / engagement events with	Metric 1: Increasing the diversity of the workforce Metric 2: Recruitment of	As at 31 st March 2022: (A) BME: 6.92% Sexual Orientation: Heterosexual 79% Disability: 4.29%	31 March 2023	Lead: Head of Comms & Engagement Partners: Community Engagement

Aim	Objective		Actions to meet objective	WDES Metric	Measures / Baseline data (Red) Annual: A Quarterly: Q Monthly: M	Completion by	Lead and Partners
	diverse backgrounds.		schools, colleges, universities and local communities to attract a more diverse range of people into health and care careers.	candidates living with disabilities	Gender: Male 44.9% Female 55.1% Religion: Christianity 41.6% Undisclosed 24.1% Nationality: 90.6% British Age: 38% staff are aged 46+		ED&I Team Recruitment Team
Staff from diverse backgrounds have a voice regarding issues they face to improve working experience.	Evidenced intelligence on cultural concerns is available for management to act and resolve	9	Strengthen relationships between Staff Networks, Freedom to Speak Up and leaders to provide intelligence regarding issues of cultural concern via a refresh of the Cultural Ambassadors Network.	Metric 4: Bullying & harassment Metric 6: Pressure to attend work although unwell Metric 7: Feeling valued Metric 9b: Voices for staff living with disabilities	Staff survey engagement score 2021 (A): 5.9 Staff Survey 2021 (A): Staff thinking of leaving: 5.6 FTSU: Cases regarding treatment associated with protected groups (8 B&H in Q4) (Q)	31 March 2023	Lead: Head of OD Partners: ER Team, ED&I Team, FTSU Guardian, Staff Network Chairs
	Awareness and involvement in Staff Equality Networks is increased and staff feel confident to raise issues	10	Make arrangements for a Staff Equality Networks conference that is open to all levels of the organisation to provide insight into inclusion issues faced by staff.	Metric 6: Pressure to attend work although unwell Metric 7: Feeling valued Metric 9a: Staff engagement scores Metric 9b: Voices for staff living with disabilities	Dignity and Respect cases: 8 cases during 2021/22 (A) Turnover at 31/3/22: 11.9% (M) Improvement in Exit interview data: Departmental morale Attendance at Staff Network meetings: Abstraction requests to	31 March 2023 (Event in May 2023)	Lead: Head of EDI Partners: Staff Networks Comms Team
	Improve our senior leaders understanding of the issues and barriers faced by our people from diverse ethnic backgrounds staff	11	Review the Reverse mentoring (people from diverse ethnic backgrounds) pilot and roll out to other protected groups for them to learn from one another in terms of lived experience.	Metric 6: Pressure to attend work although unwell Metric 7: Feeling valued Metric 9a: Staff engagement scores	attend staff network meetings are increased Year-on-year improvement to: Staff Turnover is sector average (A) (M) Turnover at 31/3/20 was 11.9%	31 December 2022	Lead: Head of OD Partners: ED&I Team Staff Networks

Aim	Objective		Actions to meet objective	WDES Metric	Measures / Baseline data (Red) Annual: A Quarterly: Q Monthly: M	Completion by	Lead and Partners
All staff are able to bring their trueAll staff with disabilities/long- term health conditions have adequate	disabilities/long- term health	14	Signpost the Reasonable Adjustments Guidance and Health Passport Scheme in the new appraisal documentation / guidance.	Metric 8: Reasonable Adjustments	Year and year improvement: <u>National Staff Survey 2021</u> "Has your employer made adequate adjustment(s) to enable you to carry out your work?" 58.6% (A) Increase of staff with a long- term condition recorded as	31 December 2022	Lead: Head of OD Partners: D&I Team
differences are celebrated and supported	differences are celebrated and supported are adjustment(s) to enable them to carry out their work, where they are	15	Raise staff awareness of the Health Passport to enable support for adjustments to be offered.	Metric 8: Reasonable Adjustments		31 December 2022	Lead: Head of Employee Relations Partners:
	required	15Flexible working options offered to support staff with reasonable adjustments.having a Health Passport (C (30 staff as at 31/5/22)			Disability Support Network		
		guidance on Neuro which encompasse	Develop and launch guidance on Neurodiversity which encompasses the	Metric 8: Reasonable Adjustments		31 March 2023 31 March	Lead: Head of Employee Relations
			lifecycle of employment.				Partners: Disability Support Network RAW Group
Managers are conscious of EDI issues and challenges and enable all our staff, to flourish at work	All leaders have completed the training to conduct Inclusive and Compassionate appraisals and other conversations	17	Continue the rollout of the training on Inclusive and Compassionate conversations to enable staff to flourish at work.	Metric 2: Recruitment of candidates living with disabilities Metric 3: Entry into a formal capability investigation. Metric 5: Equal opportunities for career progression or promotion.	National Staff Survey 2021Organisation acts fairly with regard to career progression / promotion, regardless 69.8% (A)Metric 7 - Percentage of staff believing that Trust provides equal opportunities for career progression or promotion. (A)WhiteBME 49.7%42.7%	31 March 2023	Lead: Head of OD / Head of YAS Academy Partners: Staff Networks

Aim	Objective		Actions to meet objective	WDES Metric	Measures / Baseline data (Red) Annual: A Quarterly: Q Monthly: M	Completion by	Lead and Partners
		17 a	Continue with Employee Relations review process to assess merit of progressing to a formal process.	Metric 6: Pressure to attend work although unwell Metric 7: Feeling valued Metric 8: Reasonable		Ongoing	Lead: Head of Employee Relations Partners: Staff Networks
		17 b	Review Performance Management Policy to ensure all reasonable	Adjustments Metric 9a: Staff engagement scores		31 August 2023	Lead: Head of Employee Relations
			adjustments have been implemented to support performance.				Partners: Disability Support Network
	The Trust supports progression for people from diverse backgrounds within the Trust and beyond	18	Where possible, support applications for, and placements on, NHS Leadership Academy Programmes and exploration of internal targeted accelerated development initiatives.	Metric 5: Equal opportunities for career progression or promotion.		Ongoing	Lead: Head of OD Partners: Staff Networks
We have accurate data that supports focus on diversity and inclusion	Our leaders have access to robust diversity data that enables them to monitor the workforce diversity profile and areas of focus can be identified	19	Introduction of data led recruitment and progression targets for service areas to increase the diversity of the workforce utilising an enhanced Diversity Dashboard incorporating external geographical and demographical data so that targets are representative and realistic.	Metric 2: Recruitment of candidates living with disabilities Metric 5: Equal opportunities for career progression or promotion.	Our diversity data is accurate, and reduction of 'undefined' is reduced. Ethnicity: 0.83% Sexual orientation: 13.24% Disability: 32% NSS v 4.29% on ESR Religion & Belief: 2% Marriage & Civil Partnerships: 4.25%	31 March 2023	Lead: Head of EDI Partners: Staff Networks Comms Team People Systems Business Intelligence

Aim	Objective		Actions to meet objective	WDES Metric	Measures / Baseline data (Red) Annual: A Quarterly: Q Monthly: M	Completion by	Lead and Partners
	All staff feel able to share their equality data with us to enable the Trust to understand where our efforts towards inclusion are needed most	20	Continue to undertake a diversity census of the Trust to help us to understand where we need to focus our priorities to support our staff to care for our patients	Metric 2: Recruitment of candidates living with disabilities Metric 5: Equal opportunities for career progression or promotion. Metric 8: Reasonable Adjustments	Year-on-year improvement to: <u>National Staff Survey 2021</u> Our ESR data matches the data in the NHS Staff survey – "Do you have any physical or mental health conditions, disabilities or illnesses that have lasted or are expected to last for 12 months or more? 32% of respondents v 4.29% on ESR (Q). 8% of staff	28 February 2023	Lead: Head of Employee Relations Partners: Staff Networks Comms Team