





Trust Board

Title of the paper:	Workforce Disability Equality Standard (WDES) 2022/2023						
Agenda Item:	<i>Leave blank for admin</i>						
Presenter:	Andrew McMenemy, Chief People Officer						
Author(s):	Alex Paice, Associate Director of OD & Culture						
Purpose:	<p><i>Please tick the appropriate box</i></p> <table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 33%;"><i>For approval</i></td> <td style="width: 33%;"><i>For discussion</i></td> <td style="width: 33%;"><i>For information</i></td> </tr> <tr> <td>X</td> <td>X</td> <td></td> </tr> </table>	<i>For approval</i>	<i>For discussion</i>	<i>For information</i>	X	X	
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Executive Summary:	<p>The purpose of this report is to inform Trust Board of the results of Trust performance on the ten Workforce Disability Equality Standard (WDES) metrics for 2022/2023. It also provides assurance that the Trust is actively striving to reduce inequalities in the workplace.</p> <p>Notable positives in the WDES figures include:</p> <ul style="list-style-type: none"> • Indicator 1: Since 2019, we have seen year on year improvement (+ 3.2%) in the number of colleagues sharing their disability status; • Indicator 3: Relative likelihood of disabled colleagues entering the capability process compared to non-disabled colleagues has significantly decreased; • Indicator 4b: The percentage of disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from Managers has decreased; • Indicator 4d: The percentage of disabled staff reporting experience of bullying and harassment when they occur have increased and is higher than the national average; • Indicator 8: 4% increase in disabled colleagues having reasonable adjustments; implemented since 2022 and is higher than the national average. <p>Areas where metrics have significantly deteriorated in comparison to 2022 include:</p> <ul style="list-style-type: none"> • Indicator 6: Disabled staff are 11.3% higher than those who are non-disabled to feel pressure from their manager to come to work, despite not feeling well enough to perform their duties; • Indicator 7: The level of satisfaction with the extent to which their organisation values their work is 10% lower for disabled staff. With a year-on-year decrease of 2.2%. <p>With smaller negative variances being seen in indicator 4c – bullying and harassment from colleagues as well as indicator 9a - staff engagement.</p> <p>The action plan focuses on the majority of the 10 WDES indicators, under the themes of:</p> <ul style="list-style-type: none"> • Advance equality of opportunity; • Foster good relations between those who share a protected characteristic and those who do not, and; • Eliminate unlawful discrimination, harassment and victimisation. 						

	Many aspects of the priorities align with the People Strategy, recruitment and HR practices to support the wide scale cultural transformation needed to make the Trust a truly inclusive and positive place to work.					
Trust strategic aims: <i>(please indicate which of the 4 aims is relevant to the subject of the report)</i>	Aim 1 Best care 	Aim 2 Great team 	Aim 3 Best value 	Aim 4 Great place 		
	<i>Objectives 1-4</i>	<i>Objectives 5-8</i>	<i>Objective 9</i>	<i>Objective 10-12</i>		
		X		X		
Links to well-led key lines of enquiry:	<input type="checkbox"/> Is there the leadership capacity and capability to deliver high quality, sustainable care? <input type="checkbox"/> Is there a clear vision and credible strategy to deliver high quality, sustainable care to people, and robust plans to deliver? <input type="checkbox"/> Is there a culture of high quality, sustainable care? <input type="checkbox"/> Are there clear responsibilities, roles and systems of accountability to support good governance and management? <input type="checkbox"/> Are there clear and effective processes for managing risks, issues and performance? <input type="checkbox"/> Is appropriate and accurate information being effectively processed, challenged and acted on? <input type="checkbox"/> Are the people who use services, the public, staff and external partners engaged and involved to support high quality sustainable services? <input checked="" type="checkbox"/> Are there robust systems and processes for learning, continuous improvement and innovation? <input type="checkbox"/> How well is the trust using its resources?					
Previously considered by:	<table border="1" style="width: 100%;"> <tr> <td style="background-color: #e0e0e0;">Committee/Group</td> </tr> <tr> <td>PERC</td> </tr> </table>				Committee/Group	PERC
Committee/Group						
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Action required:	The Trust Board is asked to receive this report for information and approve this report for publication on the Trust in line with statutory requirements.					

Please keep this report concise, i.e. no more than 4 pages. If necessary, signpost to further sources of information, but do not embed documents

Agenda Item: *To be left blank*

Trust Board

Title of paper Workforce Disability Equality Standard (WDES) 2022/2023

Presented by: Andrew McMenemy, Chief People Officer

1. Purpose

There is an annual requirement for NHS Trusts to assess their performance against ten specified indicators of workplace experience in order to identify areas where further development is required and provide the opportunity to implement robust action plans to support meaningful improvement.

Implementing the Workforce Disability Equality Standard (WDES) is one of the mandated evidence-based standards that is a requirement under the NHS standard contract.

The main purpose of the WDES report is:

- to enable the Trust to review their workforce data against ten specific metrics to compare the workplace and career experiences of disabled and non-disabled colleagues;
- to track progress in reducing disparities and identify areas for further improvement;
- to support the development of specific, meaningful action plans to further reduce the disparities in workplace experience between disabled and non-disabled colleagues;
- improve disabled representation throughout the organisation and obtain an executive champion.

2. Background

Enabling our diverse workforce to be healthy, motivated and feel both included and valued is crucial to delivering high quality patient care, increased patient satisfaction and improved patient safety.

Since 2019, all NHS healthcare providers have been required to publish WDES reports to support organisations to better understand the experiences of their disabled colleagues and enable positive change for all through creating a more inclusive environment for disabled people working, or seeking employment, within the NHS.

This provides the Trust with an opportunity to review progress against workforce equality indicators year on year and build on progress achieved through developing further plans to support employees with a disability or a long-term health condition (LTC). It also enables the opportunity to compare performance on a national and regional level.

The WDES was developed and continues to be underpinned by the ethos of 'Nothing about us without us'. This means that any decisions that impact on Disabled people, must involve Disabled people. Consequently, in 2018 the role of Disability Champion, whereby the postholder has lived

experience of disability, was created in order to ensure Equality, Diversity & Inclusion provisions and associated support are tailored to the needs and requirements of employees with a disability or a long-term health condition (LTC).

Furthermore in 2019, the staff network Diversability was formed and provides a pivotal route in the organisation for colleagues with all forms of disabilities or LTCs to come together, share experiences and enable voices to be heard in a psychologically secure environment.

Members work with the organisation to improve staff experience and help shape and deliver organisational priorities and developments. Key examples of this include contributing to the development of HR policies to support achieving a just and compassionate culture and being part of job matching panels to ensure job descriptions do not preclude people who may have a disability or LTC.

3. Analysis of Performance

As of the 31st March 2023, 3.4% (189) of colleagues have shared on ESR their disability or long-term health condition (LTC), this is a small increase (0.2 %) on the year before and tracks similarly to NHS average of 3%. Equally, to last year 20% of the workforce remain having an 'unknown' disability status on ESR.

From the 2022 National staff survey, where 50.3% of our colleagues participated, 17.9% indicated that they have any physical or mental health conditions or illnesses lasting or expected to last for 12 months or more. This remains lower than the national average of 23%. There are several potentially contributing factors that include:

- The majority of demographic information is obtained via the onboarding process, yet it is considered that the majority of disabilities are acquired during employment over the lifespan attributing the proportionally low figures;
- Those with disabilities still remain more likely to face discrimination in society and so individuals do not feel able to share for fear of it having negative implications;
- Do not recognise the significance of sharing their disability with the organisation.

WHTH continues to reassure and encourage all colleagues to self-share their disability status through:

- Undertaking regular communication including staff stories;
- Promoting ESR Self-service capability: where colleagues can be empowered to directly update information around their protected characteristics.

Moreover, to help support the cultivation of a psychological safe environment where colleagues who have a disability or LTC feel heard, valued and supported members of WHTH:

- The Chief People Officer, Andrew McMenemy has become the executive staff network guardian for Diversability working closely with the Disability Champion;
- Frequent safe spaces are run and themes are anonymously shared to provide insights and feedback to the HR team in order to address concerns raised and support in making meaningful changes to approaches and procedures;
- Regular support coffee mornings are facilitated for colleagues who wish to discuss disability or LTC matters in an informal environment with our Disability Champion or wider EDI team. This helps us to understand the individuals' needs and to identify which areas for improvement would be most salient to them;
 - Where appropriate these are attended by senior leaders or HR representatives.
- Raising awareness around the sunflower 'hidden disability' lanyards;
- Providing opportunities to present and share lived experiences with the Board and the senior leadership team.

From looking at ESR by staff group, it is apparent that there are variabilities in sharing disability status. As can be seen in Table 1 below the total of non-clinical colleagues sharing their status (6.4%) is higher than clinical (2.8%) and medical (1.05%) colleagues. This is a pattern that is seen nationally and as such moving forward more bespoke work with individual staff groups is required.

Overview of Indicator Performance

Reviewing the Workforce Disability Equality Standard (WDES) Data for 2022/ 2023 against each of the metrics has highlighted several notable improvements:

- **Indicator: 1: Percentage of staff in AfC pay-bands or medical, dental or VSM subgroups (including Executive Board members)**

Since 2019, we have seen year on year improvement (+ 3.2%) in the number of colleagues sharing their disability status. While increases have been seen across all staff groups, there needs to be a further focus on clinical and medical staff to understand the reason for their lower levels of sharing their status and to constructively support them to share moving forward.

- **Indicator 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 (calculated over 2 years).**

Reviewing the data from the last two years, 0 individuals who have shared their disability status have been through the formal capability process, that was not in relation to ill health.

The WDES calculation doesn't consider cases on the grounds of ill health of which there were 9 relating to those who had shared their disability status. While the relative likelihood score within this metric demonstrated that there is no increased chance of disabled colleagues going through capability processes, caution must still be taken as the low levels of sharing disability statuses may be masking a higher number.

- **Indicator 4b: Percentage of disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from Managers**

A reduction has been seen in the number of disabled staff experiencing bullying and harassment from managers by 1.4% and is in line with the national average (17.1%). Although this figure remains higher than for non-disabled colleagues by 6.5%.

- **Indicator 4d: Percentage of disabled staff compared to non-disabled staff saying that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it**

There has been an increase in the number of disabled colleagues who reported their experiences of bullying and harassment. This is higher not only in comparison to the national average (by 4.1%) but also higher (by 6.7%) than non-disabled colleagues at the Trust.

- **Indicator 8: Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work.**

Percentage of disabled staff with reasonable adjustment(s) implemented to enable them to carry out their role has increased by a further 4% and as such is higher than the national

average. To further support facilitation of reasonable adjustments, the passport and supporting guidance has been redeveloped to make it more effective, with further work currently being undertaken to embed it into standard practice and ensure quality implementation;

- **Indicator 9b: Has your Trust taken action to facilitate the voices of Disabled staff in your organisation to be heard?**

WHTH continues to develop methods in which to facilitate the voices of Disabled staff as highlighted earlier in the report. Membership of the staff network Diversability continues to grow and be representative across a variety of LTC and disabilities. Since the last report membership has increased approximately by 25% to 109 members and in addition has 12 allies. Work continues to further increase members involvement in reviewing and developing key practices and processes to ensure that a truly inclusive work environment is cultivated.

While there is undoubtedly further work required to further improve the indicators above, the results regarding the below indicators have highlighted a need for particular focus moving forward.

- **Indicator 2: Relative likelihood of non-disabled staff compared to Disabled staff being appointed from shortlisting across all posts.**

Disabled applicants are significantly less likely to be appointed following shortlisting than non-disabled applicants across all posts. This is 1.8 higher than the national average and moreover is in stark contrast compared to 2022.

One explanation for this significant variation could be in part due to historical inaccuracies with the data collection. As in 2022 all shortlisting and appointment data was drawn from Trac however it is important to note VSM, doctors and executive posts along with all international recruitment, of which there are significant numbers, do not go through this system. Consequently, to support with mitigating this and to obtain a more accurate picture 2023 data was obtained from TRAC for shortlisting and ESR for appointments. In addition, it is possible that those who share their disability at the point of application may not share at the point of onboarding, as such information is not carried over, but rather new starters will need to 'reshare' the information to be recorded on ESR.

While, the guaranteed interview scheme is in place whereby all applicants are encouraged at point of application, interview and offer to request any reasonable adjustments further work is significantly needed in this area.

- **Indicator 4a: Percentage of disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from patients or other members of the public as well as indicator 4c: Percentage of disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from Other Colleagues.**

While results for the bullying and harassment questions broadly align with the national average, it still equates to over one in four colleagues (all statuses) experiencing such behaviour. Developing an environment of understanding and respect is a key priority following on from the staff survey 2022 and the EDI agenda forms a significant component in achieving this.

- **Indicator 5: Percentage of disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.**

While a small incremental improvement has taken place since last year in regard to disabled staff, the percentage of staff (of all statuses) believing that the Trust provides equal opportunities for career progression or promotion is lower than national average. For disabled colleagues this is 3% lower than the national average and 6.7% lower compared

to nondisabled WHTH colleagues. This difference between Disabled and non-disabled staff experience tracks with the national picture.

- **Indicator 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.**

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 has increased since 2022 by 0.7% and is 0.3% higher than the national average. While the variance is not statistically significant, there is a considerable compared to non-disabled colleagues of 11.3%.

- **Indicator 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.**

The level of satisfaction with the extent to which their organisation values their work is 10% lower for disabled staff. With a year on year decrease of 2.2%. Moreover, percentage of staff (of all statuses) is under 50% and as such is very concerning.

- **Indicator 9a: The staff engagement score for Disabled staff, compared to non-disabled staff.**

Staff engagement scores for both disabled and non-disabled staff have seen year on year decreases. A pattern that can be seen across a number of NHS trust however compared to 2022 the engagement score for disabled staff has dipped by 0.1%.

- **Indicator 10a: Percentage difference between the organisation's Board voting membership and its organisation's overall workforce (voting membership of the Board).**

Of the voting membership of the Board 8.33% (1 member) have shared their disability status. This representation is 5% higher than the overall workforce average. However, due to small numbers of roles that comprise this group the figures are extremely sensitive to small changes. Therefore, following on from 2022, the total number of board members sharing disability statuses has decreased by 1, negatively impacting the overall percentages in regard to both overall board membership and voting members.

- **Indicator 10b: Percentage difference between the organisation's Board voting membership and its organisation's overall workforce (Executive membership of the Board)**

Looking exclusively at executive colleagues, there are no individuals who have shared their disability status and so disabled colleagues are underrepresented by 3.4% compared to the overall workforce.

Table.1 Workforce Disability Equality Standard (WDES) Data 2022/23

		2021/22		2022/2023				Comment
1	Percentage of staff in AfC pay-bands or medical, dental or VSM subgroups (including Executive Board members)	Disabled (number and %)		Disabled (number and %)		National average		
	Non-clinical Cluster 1 (up to Band 4)	43	5%	42	4.9%		↔	Overall, the percentage of staff sharing their disability status has continued to rise in the majority of groups. The area for future focus is the medical staff who have the lowest levels of sharing their status across the clusters. The number of ESR records showing disability status as 'unknown' remains at 20% demonstrating further work is needed to cultivate a psychological safe environment.
	Non-clinical Cluster 2 (Bands 5-7)	21	7%	37	10.3%		↑	
	Non-clinical Cluster 3 (Bands 8a-8b)	2	2%	4	3.6%		↑	
	Non-clinical Cluster 4 (Bands 8c-9 and VSM)	6	9%	4	5.2%		↓	
	Total Non-clinical			87	6.2%			
	Clinical Cluster 1 (up to Band 4)	30	3%	35	3.3%		↑	
	Clinical Cluster 2 (Bands 5-7)	58	3%	51	2.4%		↓	
	Clinical Cluster 3 (Bands 8a-8b)	5	3%	5	2.7%		↓	
	Clinical Cluster 4 (Bands 8c-9 and VSM)	2	12%	3	16.7%		↑	
	Total Clinical			94	2.8%			
	Medical - Consultants	0	0%	0	0%		↔	
	Medical - Non-consultants career grade (SAS)	0	0%	0	0%		↔	
	Medical - Training grades	8	3%	8	2.25%		↓	
	Total Medical			8	1.05%			
	Overall Total	175	3.2%	189	3.4%	3.7%	↑	
2	Relative likelihood of non-disabled staff compared to Disabled staff being appointed from shortlisting across all posts.	0.59		2.96		1.11	↑	Significant decreases have been seen in the likelihood of disabled staff being appointed compared to non-disabled staff following shortlisting. The data indicates that potentially disabled candidates are 3x less likely to be appointed, which is a lot higher than the national average.
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 (calculated over 2 years).	1.68		0.00		1.94	↓	There were no incidents whereby a disabled member of staff went through formal capability that was not related to ill health.

		2021/22 Disabled / Non D		2022/23 Disabled / Non D		2022/23 National averages Disabled / Non D			Comment
4a	Percentage of disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from patients or other members of the public	32.3%	27.8%	35%	29.3%	33%	26%	↑	2.7% increase can be seen since last year and is above the national average. Moreover, increases in non-disabled staff have also been seen (1.5%) within this metric
4b	Percentage of disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from Managers	18.5%	9.6%	17.1%	10.6%	17.1%	9.9%	↓	Figures from disabled staff have decreased and are broadly in line with the national averages.
4c	Percentage of disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from Other Colleagues	26%	18.4%	26.1%	18.7%	26.9%	17.7%	↑	Figures from disabled staff have slightly increased by 0.1% but remains within one percentage below the national average.
4d	Percentage of disabled staff compared to non-disabled staff saying that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it	50%	46.1%	52.5%	45.8%	48.4%	47.3%	↑	Figures from disabled staff are increasing and are higher than the national average.
5	Percentage of disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.	48.2%	55.8%	48.4%	55.1%	51.4%	57.3%	↑	A small incremental improvement from last year but still 3% lower than the national average and 6.7% lower compared to nondisabled WHTH colleagues
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.	29.6%	22.7%	30.3%	19%	30%	20.8%	↑	The 30.3% from disabled staff is an 0.6% increase from last year though approximately aligns to the national average. Nevertheless, this is 11.3% higher than those who are non-disabled.
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.	35%	46%	32.8%	43.1%	32.5%	43.6%	↓	The 32.8% from staff with a disability is 2.2% decrease from last year, though broadly aligns with the national average.
8	Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work.	70%	n/a	74%	n/a	71.8%	n/a	↑	74% is above the national average and further improve from the previous year.

		2021/22 Disabled / Non D		2022/23 Disabled / Non D		2022/23 National averages Disabled / Non D			Comment
9a	The staff engagement score for Disabled staff, compared to non-disabled staff.	6.3	6.9	6.2	6.8	6.4	6.9	↓	The 0.1 decrease has been seen across disabled and non-disabled colleagues.
9b	Has your Trust taken action to facilitate the voices of Disabled staff in your organisation to be heard?	Yes		Yes		n/a	n/a	↔	Diversability staff network is further developing, with membership and activities increasing.
10a	Percentage difference between the organisation's Board voting membership and its organisation's overall workforce (voting membership of the Board)	15%		4.9%		n/a	n/a		Of the voting membership of the Board 8.33% (1 member) have shared their disability status. This representation is 5% higher than the overall workforce average. However, these figures are sensitive to one senior person joining or leaving. 1 individual has left the board since the last data capture.
10b	Percentage difference between the organisation's Board voting membership and its organisation's overall workforce (Executive membership of the Board)	-3.3%		- 3.4%		n/a	n/a		Looking exclusively at executive colleagues, there are no individuals who have shared their disability status and so disabled colleagues are underrepresented by 3.4% compared to the overall workforce.

4. 2021/2022 Action Plan & Progress Review

The action plans developed last year were built on the progress made in previous years and was aligned to the Public Sector Equality Duty themes of:

- To advance equality of opportunity;
- To foster good relations between those who share a protected characteristic and those who do not, and;
- To eliminate unlawful discrimination, harassment and victimisation.

Appendix A provides details on each individual action identified last year. A good proportion of the actions have been completed, although the extent of progress with some have been impacted by the changes within the EDI team. Moreover, two actions have extended over this reporting period due to the size of the body of work involved and to align with their 'launch' dates. These are:

- The Trust-wide inclusive recruitment processes;
- Embedding key EDI topics throughout the leadership programmes.

All outstanding aspects will be incorporated into the 2023/2024 plans.

Beyond the specified actions there has been a variety of relevant activities that align to the aims of the WDES report. These include but not limited to:

Raising Awareness

There has been a number of events and campaigns to support raising awareness. One example is Disability History Month 2022 which was celebrated through regular articles being shared Trust wide. Topics covered:

- The advantages of completing a Reasonable Adjustment Plan;
- The value in sharing information about Disability or LTC with line managers;
- Key messages from the Disability Summit 2022;
- 'Staff Stories' from a variety of members of Diversability.

More recently, a focus has been on actively encouraging those with Invisible Disabilities to wear the Sunflower Lanyard or the Sunflower Badge as well as inform the wider workforce of its meaning and importance. This was achieved through an EDI focused senior leadership staff forum, trust wide communications that highlighted colleagues' personal stories, including a senior leader, and lastly bespoke MS team backgrounds were created in order to enable lanyard users to easily share with colleagues their sunflower 'status' in MS team meetings.

Supporting attendance

The supporting attendance policy has been redeveloped to be more person-focused to enable a more supportive rather than punitive approach. The new version has been developed collaboratively with staff side, staff networks and our disability champion and includes greater provision for people with disabilities and LTCs as well as greater clarity for managers in terms of applying the policy.

Moreover, work continues to promote government funding that will benefit colleagues and patients, such as Access to Work scheme and funding travelling costs related to hospital appointments.

Facilitating the voices of Disabled staff and actioning feedback

Since the last report, a variety of different opportunities for disabled colleagues to share their experiences, views and thoughts have taken place including:

- Diversability celebration event;
- 8 coffee mornings;
- 7 Business meetings;
- 7 safe spaces.

Safe spaces indicated that there were a number of estates issues that were having a significant impact on individuals working lives. Consequently, monthly meetings have been scheduled with the Environment division to support departments resolve accessibility issues for service users and staff members, enable those with limited mobility to access alternative car parking provisions as well as ensuring key areas are safe for all. Moreover, the network is contributing to hospital redevelopment work to ensure the build is accessible and approach to people's needs.

5. Priorities for 2023/2024

To help embody the principles of 'Nothing about us without us', the actions identified have been developed in conjunction with the Disability Champion and network members. Moreover, many of the actions depicted, transect across the entirety of the HR division and as such a collaborative approach will be essential to ensure a transformational impact. Therefore, the actions have also been discussed with each of the Associate Directors of People and a WDES working group will be created in order for operational leads to discuss progress on their assigned actions and work more cohesively.

Objective	Indicator and Action	Lead/s	Timeline
To advance equality of opportunity	Indicator 1: Continue to raise awareness of the importance/ significance of updating ESR demographic information and how to do this: <ul style="list-style-type: none"> - Bi-annual 'Staff Diversity Census' ensuring we reach all staff groups - Bespoke focus on medical and clinical staff groups - Continue to publish and promote lived experience stories 	EDI Lead	June 2024
To eliminate unlawful discrimination, harassment and victimisation	Indicator 2: Review recruitment data and develop a more robust reporting methodology utilising Trac, ESR and off trac appointments	Head of Workforce Information/ Head of Recruitment/ EDI Lead	November 2023
	Indicator 2: Explore in more detail the potential reasons for the significant decrease in the likelihood of disabled applicants being appointed following shortlisting.	Head of Recruitment/ Associate Director of People – OD & Culture	November 2023
	Indicator 2: Actively promote 'guaranteed interview' scheme for those applicants with a disability who meet the minimum job specification via: <ul style="list-style-type: none"> - on recruitment website - in our adverts - recruitment open days - within guidance sent to managers As well as to commence reporting the number of candidates taking part in the scheme each month.	Head of Recruitment	January 2024
	Indicator 2: Increase awareness with local community and charities through candidate attraction and recruitment events	Head of Recruitment + Disability Champion	March 2024
	Indicator 2: Incorporate recruitment and selection training, with a focus on EDI related topics, into line manager development programmes.	Head of Learning and Development + Head of Recruitment	October 2023

Objective	Indicator and Action	Lead/s	Timeline
To eliminate unlawful discrimination, harassment and victimisation	Indicator 2: Update Recruitment and Selection Policy, being more explicit around selecting and appointing procedures in line with EDI best practice principles.	Head of Recruitment + EDI Lead	January 2024
	Indicator 2: To implement outstanding Disability Confident level criteria in regard to Recruitment	Associate Director of Recruitment & Associate Director of OD and Culture	April 2024
	Indicators 2 & 3, 9b: Ensure member(s) of Diversability are involved in relevant future improvement projects and process developments <ul style="list-style-type: none"> • Conduct ‘themed’ listening events with HR colleagues; • Involved in key working groups; • Provide feedback on initiatives prior to launch. 	EDI Lead	July 2024
	Indicator 3: To implement a more robust process to capture data for Capability Processes	HRBP – Corporate & Emergency Medicine	November 2023
	Indicator 3: Review the formal capability policy and associated processes with reference to disability in order to more supportive and enable a more compassionate application.	Associate Director of People – Operational HR	April 2024
	Indicator 3: Develop training on managing capability for line managers	Head of L&D HRBPs	April 2024
	Indicator 3: Review and redevelop the redeployment process in order to ensure it enables a compassionate approach to those being redeployed, identifying an appropriate role promptly. <ul style="list-style-type: none"> - Utilising feedback from safe space sessions - Working with the Disability Champion and other network members 	Associate Director of People – Operational HR	February 2024
To eliminate unlawful discrimination, harassment and victimisation To foster good relations between those who share a protected characteristic and those who do not	Indicator 4b, 4c & 5: Conduct a series of ‘themed’ safe spaces to discuss: <ul style="list-style-type: none"> • Their experiences of harassment, bullying or abuse • Their experience of career development opportunities and progression • Identify what changes/developments would be beneficial to them 	EDI Lead	July 2024
	Indicator 4b & 4c: Increased focus on civility in the workplace including; <ul style="list-style-type: none"> • Roll out of a Trust wide campaign on Civility in the Workplace; • Implement findings of the NHS England Civility and Respect diagnostic tool; 	Associate Director of People – Operational HR Associate Director of People – OD + Culture	August 2024

Objective	Indicator and Action	Lead/s	Timeline
	<ul style="list-style-type: none"> Develop and embed new behavioural framework; Encourage staff to report instances of discrimination and micro-aggression; Implement a clear zero-tolerance approach to bullying through the delivery of actions plans, guidance and a Trust wide 'Big Conversations' 	People Promise Manager	
	Indicator 4b, 4c, 6: Implement effective EDI training to support understanding across EDI outcomes, through <ul style="list-style-type: none"> Refreshed online modules; Further awareness sessions; Embedded EDI + Wellbeing sessions for managers including reasonable adjustments. 	Head of L&D & EDI Lead	January 2024
To eliminate unlawful discrimination, harassment and victimisation	Indicator 6, 7, 8 & 9: Increasing awareness across all colleagues and managers of the key provisions that can support disabled colleagues: <ul style="list-style-type: none"> Special Leave Policy Utilising flexible working options Temporary reduction in hours Access to work scheme Reasonable adjustments Passport 	EDI Lead	June 2024
	Indicator 6, 7 & 8: Facilitate 6- weekly drop-in sessions, to provide the opportunity for both managers and those living with disabilities or long-term conditions to discuss and ask questions around the provisions available. This will help normalise dialogue around health, wellbeing, longer term conditions and disabilities and in turn an increased awareness and usage of the 'supporting you passports'.	EDI Lead	February 2024
	Indicator 6 & 8: Design and implement 1-1 templates to support managers to initiate wellbeing conversations and prompt discussions around flexible working	People Promise Manager	October 2023
	Indicator 8: Continue to proactively ensure reasonable adjustments are made at all parts of the recruitment process for applicants who need them	Head of Recruitment	January 2024
	Indicator 8: Investigate separate budget for reasonable adjustments, as recommended by WDES	EDI Lead	April 2024
	Indicator 9 & 1: To request all board members to review their demographic ESR data	Associate Director of People – OD + Culture	December 2023

6. Conclusion

While it is important to recognise the achievements that have been made over the period of this report, it is important to note that there is still a great amount of work needed to be undertaken to achieve the Trust's strategic goals and truly embed EDI throughout the organisation.

Further progressing the elements identified in the people strategy alongside strengthening values-based recruitment and HR practices will be fundamental in achieving the wide scale cultural transformation needed to make the Trust a truly inclusive and positive place to work

7. Risks

The above paper supports meeting the requirements of the standard NHS contract. The developed action plan for 2023 / 2024 help support mitigating the following risks:

- Risk of not attracting and appointing a diverse range of individuals with the right skills and personal values that align with the Trust;
- Risk of being unable to develop an inclusive and equitable organisation. As demonstrated by the gender/race pay gap, the workforce race and disability equality reports, disparities remain and whilst some progress has been made, it has been slow and is not consistent across all areas of the workforce;
 - This in turn could negatively influence the perceptions of prospective and current employees;
- Risk in the ability that the Trust will be able to comprehensively support its diverse workforce, impacting staff experience/moral and ultimately negatively impacting turnover;
- Risk in the Trust being able to meet the depicted Equality Delivery System criteria satisfactorily;
- Risk that the Trust is unable to demonstrate to employees a serious commitment towards EDI, engagement and wellbeing.

8. Recommendation

Trust Board is asked to receive this report for information and approve this report for publication on the Trust website in line with statutory requirements.

Name of Director Andrew McMenemy, Chief People Officer

Title Workforce Disability Equality Standard (WDES) 2022/2023

Date: 31 August 2023

Appendix A - Workforce Disability Equality Standard (WDES) – 2022/2023 Action Plan

Appendix A - Workforce Disability Equality Standard (WDES) – 2022/2023 Action Plan

Theme	Indicator and Action	Lead/s	Timeline	Update	RAG
Advance equality of opportunity	Indicator 2: Work towards the Disability Confident Level 3	Disability Champion & EDI Lead	Summer 2023	Criteria for level 3 have been identified and a gap analysis has taken place to inform areas where further work is required. The majority of the remaining actions align with the value-based recruitment project being embedded in Autumn.	To be completed with 23/24
Advance equality of opportunity	Indicator 5: Explore and promote external talent programmes that target Disabled staff	Talent Manager	Jan 2023	<p>The Trust has launched a new development programme to support personal and career development. This is being conducted at three different cohorts: Bands 2-4, 5-7 and 8a-8c, each comprising of 20 delegates. These were advertised through our support networks directly in the first instance. 6.3% of delegates shared their disability status. Future cohorts being advertised now.</p> <p>ICS Career Development course for underrepresented (BAME and Disabled) have been promoted (3 cohorts, bands 2-4, 12 spaces for West Herts delegates), working with ICS for details around the next programme for bands 5 -7 colleagues.</p> <p>Additional external offerings both targeted for disabled staff and more widely targeted programmes are shared by the talent team with the network through the disability champion.</p>	Completed – Business as Usual
Advance equality of opportunity	Indicator 5: Proactively offer coaching sessions and Leadership Development to the Trust's Disabled staff	EDI Lead & Head of L&D	November 2022	<p>Career coaching is Trust a wide initiative however bespoke communications have been shared with the network to encourage further uptake from this group of staff. Of those who have enrolled to the coaching service 3.6% have a disability.</p> <p>On a quarterly basis both L&D and Talent teams to attend the staff network meetings to enable career information to be shared on a regular basis.</p>	Ongoing bespoke communication is needed with this cohort
Advance equality of opportunity	Indicator 6: Strengthen the links with the Wellbeing team and look for	Wellbeing Lead & EDI Lead	Ongoing	Inclusion and Engagement Advisor Role commenced in April which is supporting in bringing these two services together. Joint projects have been launched including Menopause awareness, reviewing engagement events to support accessibility and developing robust	Completed – Business as Usual

Theme	Indicator and Action	Lead/s	Timeline	Update	RAG
	opportunities for collaborative working			support passports. Further plans are being implemented to further bring the structure and workstreams of these two teams together.	
Advance equality of opportunity	Indicator 8: Continue to promote and embed Reasonable Adjustments Plan to ensure increased use, quarterly briefings	AD of HR Ops, Disability Champion & EDI Lead	Quarterly	<p>The Reasonable Adjustments Plan document was reviewed and updated over the Autumn of 2022 and sessions were delivered to provide managers and HR team with insight to the revised documentation.</p> <p>Individuals who have utilised the documentation have been identified and arrangements being made for videos to be developed to share their story in and raise awareness.</p> <p>To make the document more impactful and user friendly for both individuals and their managers, a 'Supporting You' passport has been developed. This interactive document covers general health & wellbeing/ menopause and working carers in addition to reasonable adjustments.</p> <p>Positive feedback has been received by staff networks and members of the wellbeing and engagement steering committee. Plans being finalised to communicate across the Trust.</p>	Development of support documents complete and is yet to be launched, and so will be part of 2023/2024 action plan
Advance equality of opportunity	Indicator 8: Investigate separate budget for reasonable adjustments, as recommended by WDES	EDI Lead	Autumn / Winter 2022	Working with finance to establish next steps to obtain a central reasonable adjustment budget as it was agreed at the March EDI steering group that this should sit independently from the £45,000 non-pay budget that was agreed for 23/24.	Outstanding
Advance equality of opportunity	Indicator 8: Develop a business case for the EDI and Staff Network budget, in addition to staffing costs.	EDI Lead	Autumn / Winter 2022	<p>A substantive increase in EDI establishment has been secured via a business case – 1 full time band 6 and 1 fulltime band 4. Both roles have been recruited to with the band 4 postholder to start in 4th September.</p> <p>Non-pay budget of £45,000 was approved and will be governed by the EDI steering group. Budget utilisation has been developed and</p>	Completed

Theme	Indicator and Action	Lead/s	Timeline	Update	RAG
				approved following further refinement after EDI steering group discussions.	
Advance equality of opportunity	<p>Indicator 9b: Implement agreed actions from the Safe Space sessions, including:</p> <ul style="list-style-type: none"> - Review and champion flexible working - Buddying as part of Redeployment process 	AD of HR Ops	Winter / Spring 2023	<p>AD of HR Ops attends safe spaces regularly to feedback concerns and comments to inform HR practices.</p> <p>The network has been involved in reviewing and developing a number of policies to ensure they are developed with an EDI lens and is particularly inclusive of those with disabilities and LTCs. In particular the supporting attendance policy has been extensively reviewed and now includes greater provision for people with disabilities or LTC as well as greater clarity for managers in terms of applying the policy. To support the policy, template letters and forms have been collaboratively developed with softer, more compassionate tone as well as implementing more meaningful support measures.</p> <p>In November, a new flexible policy was implemented. Originally there where two policies, one for hybrid working and one for flexible working. These have now been combined and refreshed. A working group with representation from across the trust was involved and reviewed the policy before being ratified. Further updated version to be released imminently.</p> <p>New website has been developed that provides further information around the types of flexible working, highlighting the benefits of supporting colleagues to undertake flexible working. This also incorporates guidance and useful documents to further enable the facilitation of flexible working across the organisation and to engage with managers. The staff survey highlighted the need to do much more work in this area and as such a Trust wide working group has been launched, base line figures are being established and education/communication plan is being actioned.</p> <p>Redeployment process is being reviewed, with feedback being taken into account to inform best practice. This is however still outstanding and will be added to the action plan for 2023/24</p>	Progress being made, redeployment action to be incorporated into 2023/2024 action plan

Theme	Indicator and Action	Lead/s	Timeline	Update	RAG
Eliminate unlawful discrimination, harassment and victimisation	<p>Indicator 2: Review recruitment practices and embed proposed changes into updated Recruitment Policy:</p> <ul style="list-style-type: none"> • Review training for current and new panel members • Trial Inclusion Ambassadors • Focus on recruitment to Band 8b and above. 	AD of Recruitment & Retention and EDI Lead	Winter 2022	<p>The policy will be reviewed later this year – extension obtained in order to ensure all the developments to the Value Based Recruitment process is incorporated and is accurate. This will include enabling diverse representation for recruitment of all posts. However, this will not be in the form of an inclusion advisor/ambassador, as this doesn't always add value and other trusts have reported a lack of divisional ownership. Instead to embed EDI practices, recruiting managers will need to seek a diverse panel from their area whether that be internally or externally. As part of this there will be an element of scrutiny from the recruitment team to work with divisions to ensure it is as inclusive as possible.</p> <p>Moreover, the aim is to make training mandatory for all recruiting managers which would focus on supporting to reduce bias further.</p> <p>Currently, 8b and above posts have panels which compositions are diverse and stakeholder panels are also strongly encouraged.</p> <p>Pilots of VBR practices have been conducted for health care support workers, roles within clinical support and new EDI team members. Recruitment plan this out more widely after the process is further refined shortly.</p>	Progress being made so will be part of 2023/2024 action plan
Eliminate unlawful discrimination, harassment and victimisation	Indicator 3: Explore the reasons for significantly higher likelihood of disabled staff entering the formal capability process, and put changes in place to mitigate this	AD of HR Ops	November 2022	<p>Ops HR team are in the process of reviewing and the formal capability process in order to provide more support for all including more supportive provisions for disabled colleagues.</p> <p>The team have been working with managers to support distinguishing between poor performance due to conduct/capability, poor performance relating to a health condition or disability, and any personal factors that may be influencing the employee's performance at work.</p> <p>A change in duties or working pattern to remove or reduce the effect of an employee's disability or another mitigating factor, to allow them to fulfil their job role to the best of their ability, is strongly advocated by the</p>	Outstanding will be part of 2023/2024 action plan

Theme	Indicator and Action	Lead/s	Timeline	Update	RAG
				operational HR team who work on an individual basis to ensure individuals have access to relevant support.	
Eliminate unlawful discrimination, harassment and victimisation	Indicators 1 and 10: Continue to increase ESR disability data with the aim of exceeding national staff survey averages. Aim to increase the numbers of Doctors sharing their disability status.	Disability Champion & EDI Lead	Ongoing	<p>All new members of the network are asked to check and up to date ESR records.</p> <p>Orange banners around EDI now, where feasible, encourage sharing status and include signposting to how to update ESR status – This will run quarterly moving forward.</p> <p>Signposting to encourage updating ESR is being reincorporated to the refreshed appraisal documents.</p> <p>EDI team are now part of the monthly Junior doctor induction programme, encouraging doctors to share status on ESR as well as part of the support sessions for clinical and non-clinical staff joining the Trust.</p>	BAU
Foster good relations	Indicator 5: Ask leaders with visible and/or hidden/invisible disabilities if they are content to share their lived experience stories	Chief People Officer & EDI Lead	Autumn 2022	To support developing an understanding and inclusive culture an EDI focused senior leader session took place which included senior leaders sharing their own personal experiences. One of these individuals was our Deputy Chief Nurse who has a hidden disability, they shared their career journey and the impact that their disability has on their day to day work experiences. This was then communicated, with other colleagues lived experiences stories, Trust wide as part of Pride Disability month.	Ongoing
Foster good relations	Indicator 7: Investigate funding for 4-6 awareness sessions on a range of disabilities	EDI Lead	Autumn / Winter 2022	<p>In May, as part of Deaf Awareness week a Deaf Awareness workshop was facilitated.</p> <p>In June the senior leadership forum was focused on EDI covering aspects such as unconscious bias and incorporated staff stories including those with a disability and LTCs.</p> <p>In October, as part of National Arthritis Action week, Arthritis Action are providing a workshop to increase awareness and understanding as well as signposting the support available.</p>	Ongoing - Further sessions scheduled, with a more long-term provision being implemented.

Theme	Indicator and Action	Lead/s	Timeline	Update	RAG
				<p>A speaker is booked for Disability history month and the 4th anniversary of Diversibility.</p> <p>Moreover to further support disability awareness, EDI section of Acorn has been developed to easily find EDI related videos and recorded sessions will be added. Access to the resources Skill Boosters has been renewed and these resources can be utilised to support education colleagues through Acorn as well.</p> <p>We are also working with Project Choice to roll out Trust wide sessions on disability awareness more generally facilitated by specialist speakers.</p>	Completed
Foster good relations	Indicator 9b: Find an Executive Sponsor, ideally with lived experience of, or a close family member with, a disability	EDI Lead & Disability Champion	Autumn 2022	Chief People Officer has become the Executive sponsor.	