

# **Trust Board**

Title of the paper:	WDES Report for 2021/22								
Agenda Item:	-								
Presenter:	Alex Paice, Associate Director of People – OD and Culture								
Author(s):	Tamzin Doggart, EDI Lead								
Purpose:	Please tick the appropriate box								
	For approval For discussion For information								
	\ \forall \ \forall \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \								
Executive	The purpose of this report is to provide PERC with the ten Workforce Disability								
Summary:	Equality Standard (WDES) metrics for 2021/22 as well as provide assurance								
	that the Trust are actively striving to reduce the inequalities in workplace								
	experience between Disabled and non-Disabled staff to ensure staff have the								
	opportunity to achieve their full potential.								
	WDCC (Markforms Disability Forgolity Chandord) is a regulatory requirement								
	WDES (Workforce Disability Equality Standard) is a regulatory requirement that prompts best practice. One requirement is to publish the WDES by 31								
	October 2022.								
	October 2022.								
	The figures from March 2022 show the percentage of staff sharing their								
	disability status has continued to rise, from a constant baseline of 1% and								
	since the Diversability staff network has been created by the Trust this rose to								
	just over 3%. This demonstrates that we are developing an open culture that								
	promotes psychological safety. While the numbers of staff who have yet to								
	share their disability status on ESR has reduced (23% to 20%), further work is								
	still necessary to encourage and support individuals to do so.								
	This year, disabled shortlisted job applicants are nearly twice as likely to be								
	appointed than non-disabled applicants (0.59, where 1 is equal likelihood).								
	While harassment, hullying and abuse has continued to decrease (329/ to								
	While harassment, bullying and abuse has continued to decrease (33% to 32%) work is needed to be undertaken to make more significant reductions.								
	5270) WORK IS HEEGED TO DE UNDERTAKEN TO MAKE MOTE SIGNIFICANT TEUDCHOTS.								
	The plan for 2022/23 focuses on working towards the Disability Confident								
	Level 3. The Trust will also focus on promoting and embedding the								
	Reasonable Adjustments Plan, developing our disabled workforce, and further								
	supporting the staff network, Diversability.								
	Without dedicated funding to promote awareness as well as implement								
	fundamental and tangible support, the Trust runs the risk of not fulfilling its								
	ambitions to be a fully inclusive employer. Disabled staff will continue to face								
	unnecessary barriers in the workplace, which will negatively impact their								
	experience, performance and wellbeing, which in turn will negatively impact the aims of the Trust, including patient outcomes.								
	the aims of the Trust, including patient outcomes.								
	The EDI Steering Group has been established and will give a regular forum								
	with two Chief Officers and all staff networks, including Diversability.								
	The time of the state and an elast rectioned, moraling procedurity.								

Aim 1 Best care  Aim 2 Great team  Aim 3 Best value  Aim 4 Great place  Objectives 1-4  Objectives 5-8  Objective 9  Objective 10-12  Links to well-led key lines of enquiry:    State   State
(please indicate which of the 4 aims is relevant to the subject of the report)  Cobjectives 1-4  Cobjectives 5-8  Cobjective 9  Cobjective 10-12  Cobjective 9  Cobjective 9  Cobjective 9  Cobjective 9  Cobjective 9  Cobjective 9  Cobjective 10-12  Cobjective 10-1
which of the 4 aims is relevant to the subject of the report)  Objectives 1-4  Objectives 5-8  Objective 9  Objective 10-12  Links to well-led key lines of enquiry:  Is there a clear vision and credible strategy to deliver high quality, sustainable care to people, and robust plans to deliver?  Is there a culture of high quality, sustainable care?
which of the 4 aims is relevant to the subject of the report)  Objectives 1-4  Objectives 5-8  Objective 9  Objective 10-12  U  Links to well-led key lines of enquiry:  Is there a clear vision and credible strategy to deliver high quality, sustainable care to people, and robust plans to deliver?  Is there a culture of high quality, sustainable care?
aims is relevant to the subject of the report)  Objectives 1-4  Objectives 5-8  Objective 9  Objective 9  Objective 9  Objective 9  Objective 9  Objective 10-12  U  Links to well-led key lines of enquiry:  Is there a clear vision and credible strategy to deliver high quality, sustainable care to people, and robust plans to deliver?  Is there a culture of high quality, sustainable care?
the subject of the report)  Objectives 1-4 Objectives 5-8 Objective 9 Objective 10-12  Links to well-led key lines of enquiry:  Sustainable care?  Subjective 9 Objective 9 Objective 10-12  Use there a clear vision and capability to deliver high quality, sustainable care?  Subjective 9 Objective 10-12  Use 1
Dbjectives 1-4  Objectives 5-8  Objective 9  Objective 10-12  U  Links to well-led key lines of enquiry:  Sustainable care?  Sustainable care to people, and robust plans to deliver?  Sustainable care?  Sustainable care to people, and robust plans to deliver?  Sustainable care?
Dbjectives 1-4  Objectives 5-8  Objective 9  Objective 10-12  ✓  Links to well-led key lines of enquiry:  □Is there the leadership capacity and capability to deliver high quality, sustainable care?  □Is there a clear vision and credible strategy to deliver high quality, sustainable care to people, and robust plans to deliver?  □Is there a culture of high quality, sustainable care?
Links to well-led key lines of enquiry:  □ Is there the leadership capacity and capability to deliver high quality, sustainable care? □ Is there a clear vision and credible strategy to deliver high quality, sustainable care to people, and robust plans to deliver? □ Is there a culture of high quality, sustainable care?
Links to well-led key lines of enquiry:  □ Is there the leadership capacity and capability to deliver high quality, sustainable care? □ Is there a clear vision and credible strategy to deliver high quality, sustainable care to people, and robust plans to deliver? □ Is there a culture of high quality, sustainable care?
Links to well-led key lines of enquiry:  □ Is there the leadership capacity and capability to deliver high quality, sustainable care? □ Is there a clear vision and credible strategy to deliver high quality, sustainable care to people, and robust plans to deliver? □ Is there a culture of high quality, sustainable care?
key lines of enquiry:  □ Is there a clear vision and credible strategy to deliver high quality, sustainable care to people, and robust plans to deliver?  □ Is there a culture of high quality, sustainable care?
sustainable care? □Is there a clear vision and credible strategy to deliver high quality, sustainable care to people, and robust plans to deliver? □Is there a culture of high quality, sustainable care?
sustainable care to people, and robust plans to deliver?  □Is there a culture of high quality, sustainable care?
sustainable care to people, and robust plans to deliver?  □Is there a culture of high quality, sustainable care?
□ Are there clear responsibilities, released everyone of accounts bility to
— Are there olear responsibilities, foles and systems of accountability to
support good governance and management?
☑Are there clear and effective processes for managing risks, issues and  ☐ The processes are also as a second content of the processes for managing risks, issues and the processes for managing risks.  ☐ The processes for managing risks is the processes for managing risks is the processes for managing risks.  ☐ The processes for managing risks is the processes for managing risks is the processes for managing risks.  ☐ The processes for managing risks is the processes for managing risks is the processes for managing risks.  ☐ The processes for managing risks is the processes for managing risks is the processes for managing risks.  ☐ The processes for managing risks is the processes for managing risks is the processes for managing risks.  ☐ The processes for managing risks is the processes for managing risks is the processes for managing risks.  ☐ The processes for managing risks is the processes for managing risk
performance?
☑Is appropriate and accurate information being effectively processed,
challenged and acted on?
☐ Are the people who use services, the public, staff and external partners
engaged and involved to support high quality sustainable services?
☐Are there robust systems and processes for learning, continuous
improvement and innovation?
⊠How well is the trust using its resources?
Previously
considered by:  Committee/Group  Date
Diversability Chair 4 August 2022 and
9 August 2022 PERC 25 August 2022
Action required: Board is asked to receive this report to review and to approve for publication
L <b>AVIOLITEURITEU.</b> EL DOGLA 19 GOVERTA LA LECENE MISTEDOLLAS LEMEN GUATA ACOMOVETAL DUCINCAMON



Agenda Item: To be left blank

### **Trust Board Meeting:**

Title of paper: WDES Report for 2021/22

Presented by: Alex Paice – Associate Director of People – OD and Culture

## 1. Purpose

1.1 Implementing the Workforce Disability Equality Standard (WDES) is a requirement for NHS commissioners and healthcare providers through the NHS standard contract.

- 1.2 The main purpose of the WDES is:
  - to enable the Trust to review the data against the ten mandatory metrics in order to track progress and identify areas for improvement;
  - to develop specific action plans to further reduce the disparities in workplace experience between disabled and non-disabled staff;
  - improve disabled representation throughout the organisation and obtain an executive champion.

#### 2. Background

- 2.1 From 2019, all NHS healthcare providers have been required to publish their WDES Report. It is designed to improve workplace experience and career opportunities for Disabled people working, or seeking employment, in the NHS. Therefore, NHS providers are expected to show progress against workforce equality indicators.
- 2.2 This provides the Trust with an opportunity to review progress against workforce equality indicators and further develop plans to support employees with a disability or a long-term health condition.
- 2.3 The WDES has been 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. To help achieve this, the report was developed in conjunction with the Disability Champion. This role was created in November 2018, reporting into the EDI Lead, and the postholder has lived experience of disability. The Disability Champion set up a staff network for people with disabilities and long-term health conditions called Diversability in December 2019 and has been Chair of the network since.

## 3. Summary of Performance

- 3.1 The number of staff who have shared their disability on ESR has continued to rise in the last year from 2% in 2020/21 to 3.2% (175 people) as of March 2022. This is in line with the NHS average of 3%.
- 3.2 This trend is in line with the formation and development of the of Trust's disability network, Diversability, due to their work on:
  - Encouraging and supporting staff to update their disability status in ESR;
  - Highlighting the importance of sharing this information with the Trust;
  - Promoting awareness in relation to invisible disabilities.

The annual staff survey shows around 17% of staff identify as having a physical or mental health condition or illness, lower that the national NHS average of 23%. One potential explanation for this could be due to the majority of ESR data being collated as part of the recruitment process, whereas as many disabilities are acquired during employment.

## 3.3 Workforce Disability Equality Standard (WRES) Data 2021/22

		202	20/21	202	1/22	2021/22		Comment
1	Percentage of staff in AfC pay-bands or medical and dental subgroups and very senior managers (including Executive Board members) compared with the percentage of staff in the overall workforce.	(number and 1 (number and 1		(number and averages				
	Non-medical Cluster 1 (up to Band 4)	33	4%	43	5%		<b>↑</b>	
	Non-medical Cluster 2 (Bands 5-7)	14	4%	21	7%		<b>↑</b>	
	Non-medical Cluster 3 (Bands 8a-8b)	2	2%	2	2%		$\leftrightarrow$	Overall the percentage of staff
	Non-medical Cluster 4 (Bands 8c-9 and VSM)	7	11%	6	9%		$\downarrow$	sharing their disability status has continued to rise. This
	Medical Cluster 1 (up to Band 4)	30	3%	30	3%		$\leftrightarrow$	helps us to plan and shows an
	Medical Cluster 2 (Bands 5-7)	43	2%	58	3%		<b>↑</b>	open culture. The number of
	Medical Cluster 3 (Bands 8a-8b)	4	2%	5	3%		<b>↑</b>	ESR records showing disability
	Medical Cluster 4 (Bands 8c-9 and VSM)	1	6%	2	12%		<b>↑</b>	status as 'unknown' has
	Cluster 5 (Medical/dental consultants)	0	0%	0	0%		$\leftrightarrow$	reduced from 23% to 20%.  However further work is
	Cluster 6 (Medical/dental, non-consultants)	2	1%	0	0%		$\downarrow$	needed.
	Cluster 7 (Medical/dental, trainees)	3	2%	8	3%		<b>↑</b>	
	Totals	139	2.6%	175	3.2%	3.7%	<b>↑</b>	
2	Relative likelihood of non-disabled staff compared to Disabled staff being appointed from shortlisting across all posts.	1.52		0.59		1.2	<b>↓</b>	These figures vary year by year and 2021/22 demonstrated a positive shift
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).	1.92		1.68		1.94	<b>\</b>	for Disabled applicants. Trust figures compare very favourably to national averages.

		2020/ Disabled /		202 <sup>2</sup> Disabled		National	21/22 averages d / 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	33%	27%	32%	28%	33%	26%	<b>↓</b>	Figures from disabled staff are decreasing and are similar to national
4b	Percentage of Disabled staff compared to non- disabled staff experiencing harassment, bullying or abuse from Managers	24%	12%	19%	10%	17%	10%	<b>\</b>	averages.
4c	Percentage of Disabled staff compared to non- disabled staff experiencing harassment, bullying or abuse from Other Colleagues	25%	17%	26%	18%	25%	17%	1	Figures from disabled staff are within one percentage point of national averages.
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	46%	44%	50%	46%	50%	48%	1	Figures from disabled staff are increasing and match national averages.
5	Percentage of Disabled staff compared to non- disabled staff believing that the Trust provides equal opportunities for career progression or promotion.	47%	54%	48%	56%	51%	57%	1	The 48% from staff with a disability is increasing but still 3% lower than the national average of 51%.
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.	32%	22%	30%	23%	30%	22%	ļ	The 30% from staff with a disability matches the national average.
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.	34.7%	51%	35%	46%	35%	45%	1	The 35% from staff with a disability matches 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.	68%	n/a	70%	n/a	71%	n/a	1	The 70% from staff with a disability is similar to the national average.
9a	The staff engagement score for Disabled staff, compared to non-disabled staff.	6.4	7.0	6.3	6.9	6.5%	7.0%	↓ ·	The 6.3% from staff with a disability is very close to the national average.

		2020/ Disabled /	202 Disabled	1/22 / Non D	National	21/22 averages d / Non D		Comment
9b	Has your Trust taken action to facilitate the voices of Disabled staff in your organisation to be heard?	Yes	Yes		Yes = 97%		$\leftrightarrow$	Diversability staff network. Membership is growing.
10a	Percentage difference between the organisation's Board voting membership and its organisation's overall workforce (voting membership of the Board)	16%	15%				<b>↓</b>	These figures are sensitive
10b	Percentage difference between the organisation's Board voting membership and its organisation's overall workforce (Executive membership of the Board)	-3.0%	-3.3%		-3.7%		<b>→</b>	to one senior person joining or leaving.

#### 3.4 Notes on data sources:

- Indicators 1 and 10 are produced via the Electronic Staff Record (ESR) system;
- Indicator 2 from TRAC, the recruitment system which is used for the majority of recruitment;
- Indicator 3 is provided by the HR team;
- Indicators 4-9a are from the NHS Staff Survey Benchmark Report West Hertfordshire Hospitals NHS Trust 2021 (pages 124-133).

## 3.5 National averages are based on:

- 2021 data collection (metrics 1, 2, 3, 9b and 10) therefore a year behind the Trust;
- 2021 NHS Staff Survey (metrics 4 to 9a) so comparable to the Trust.
- 3.6 Comparative data from 2016-2019 is in the West Herts Workforce Race Equality Standard Report 2019-2020

#### 4. Analysis

- 4.1 Overall, there are a lot of positives in the WDES figures, demonstrating that we are moving in the right direction. Notable positives include:
  - Indicator 1: Number of people sharing a disability has increased from 139 to 175 (2.6% of staff to 3.2%). This means numbers of people sharing a disability has grown in most staffing groups but there still are not many doctors who have shared their disability;
  - Indicator 2: This year shortlisted Disabled staff are more likely to be appointed than Non-Disabled applicants;
  - Indicator 4d: The percentage of Disabled staff stated that the last time they experienced
    harassment, bullying or abuse at work, they or a colleague reported it has increased and is
    above the national average;
  - Indicator 6: percentage of Disabled staff saying that they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties is lower than national averages;
  - Indicator 9b: Membership of Diversability is growing; in August 2022 it had increased to 60 people (of 175) and work is underway to develop this further;
  - Indicator 10a: the percentage of the Trust's voting membership of the Board sharing a disability remains well above the Trust's overall workforce.
- 4.2 The main areas for further development are:
  - 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.
    However, it is noted that this is calculated over 2 years, it is going in the right direction and
    may be let down by an unusual year;
  - Indicators 4a-c: although the number of staff experiencing harassment, bullying or abuse is similar to national averages the Trust has prioritised it for the Staff Survey action plan; it is one of the top three themes;
  - Indicator 5: Percentage of staff (all statuses) believing that the Trust provides equal opportunities for career progression or promotion is lower than national averages;
  - Indicator 7: the level of satisfaction with the extent to which their organisation values their work is 11% lower for disabled staff.

#### 5. Action since last year

- 5.1 The majority of the 2021/22 action plan has been completed and will become business as usual. Outstanding actions will be incorporated in the 2022/2023 actions plan. For more details see Appendix 1.
- 5.2 Headline successes include:
  - The Trust was assessed under the Disability Confident scheme and received Level 2 accreditation;
  - The Disability Champion plays an active role in the Policy Advisory Group;
  - The EDI Steering Group has been established and will give a regular forum for disability related issues with two Chief Officers;
  - The appraisal form encourages and enables conversation around highlighting the importance as well as normalise dialogue around health, wellbeing, longer term conditions and disabilities;
  - The increase in people sharing their disability status;
  - More people are joining Diversability, which gives employees with a disability or long term condition a collective voice. In turn this supports the Trust in their aim to reduce the inequalities in workplace experience between Disabled and non-Disabled staff, to ensure staff have the opportunity to achieve their full potential.
- 5.3 In the last year the Diversability staff network has:
  - Been nominated for a prestigious Star of Herts Award;
  - Shared videos and podcasts, such as Shielding, Multiple Sclerosis:
  - Hosted Safe Space sessions, which raise issues such as compliance rate of staff wearing face masks;
  - Created and circulated training, such as Deaf Awareness to Board and new starters;

- Contributed to conversations around the built environment, such as the new hospital, improving parking for staff and patients as well as uneven surfaces;
- Promoted government funding that will benefit staff and patients, such as Access to Work and funded costs of travelling to hospital appointments.

#### 6. Action for the coming year

- 6.1 This action plan builds on the progress made in 2021/22, to further improve experiences of Disabled colleagues at the Trust and aligns with 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.

Theme	Indicator and Action	Lead/s	Timeline
Advance equality of opportunity	Indicator 2: Work towards the Disability Confident Level 3	Disability Champion & EDI Lead	Summer 2023
Advance equality of opportunity	Indicator 5: Explore and promote external talent programmes that target Disabled staff	Talent Manager	Jan 2023
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
Advance equality of opportunity	Indicator 6: Strengthen the links with the Wellbeing team and look for opportunities for collaborative working	Wellbeing Lead & EDI Lead	Ongoing
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
Advance equality of opportunity	Indicator 8: Investigate separate budget stream for reasonable adjustments, as recommended by WDES	EDI Lead	Autumn / Winter 2022
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
Advance equality of opportunity	Indicator 9b: Implement agreed actions from the Safe Space sessions, including:  - Review and champion flexible working  - Buddying as part of Redeployment process	AD of HR Ops	Winter / Spring 2023
Eliminate unlawful discrimination, harassment and victimisation	Indicator 2: Review recruitment practices and embed proposed changes into updated Recruitment Policy:  Review training for current and new panel members  Trial Inclusion Ambassadors  Focus on recruitment to Band 8a and above.	AD of Recruitment & Retention and EDI Lead	Winter 2022
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

Theme	Indicator and Action	Lead/s	Timeline
	such as an Inclusion Advisor in all disability-related cases.		
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
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
Foster good relations	Indicator 7: Investigate funding for 4-6 awareness sessions on a range of disabilities	EDI Lead	Autumn / Winter 2022
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

#### 7. Risks

#### 7.1

Risk	Mitigation
Non-compliance with WDES would lead to	The above action plan, and other work in place
a breach of the standard NHS contract.	around the Trust, shows we are managing the risks.
Risk of talent management missing out on	Changes in recruitment and talent management
staff with greater potential. Q4 of 2021/22	practices.
saw higher turnover than usual, especially	Equal opportunities for development and promotion
retirements. There is a cost of recruitment.	is registered as a risk on the Trust's corporate risk
There is a risk to patient outcomes.	register and therefore evaluated and actioned
	regularly.
Risk of Employment Tribunal case/s,	Staff networks' safe space discussions and their
including financial and time implications.	Chairs provide support for employees to raise issues
	at a less formal stage so they are resolved more
	easily.
Risk of reputational damage. This can	Staff networks' safe space discussions and their
stop the Trust being an employer of	Chairs provide support for employees to raise issues
choice, demotivate current staff and	at a less formal stage so they are resolved more
increase vacancies.	easily.
As 20% of staff have not shared their	A culture of openness; encouraging people to share
disability status on ESR, our workforce	their disability status at several stages; an
data states 'unknown' for more than a	established and supportive staff network.
thousand employees.	

## 8. Recommendation

7.1 Board is asked to receive this report to review and to approve for publication on the Trust website by 31 October 2022, in line with statutory requirements.

Name of Director Andrew McMenemy Title Chief People Officer Date: 25 August 2022

#### **APPENDICES**

Appendix 1 WDES Action Plan 2021/22

## Appendix 1 WDES Action Plan 2021/22

Theme	Action	Lead	Timeline	Update August 2022
BHA & Discrimination	Continue to schedule safe space events/channels for staff with hidden/invisible disabilities.	Disability Champion	Quarterly	Completed. Two were scheduled for March/May 2022 but due to low/no interest both sessions were cancelled. Safe Space question regular part of the Diversability Agenda. Next session booked Sept 2022.
BHA & Discrimination	Engage with the Disabled staff network to review BHA data in more detail.	Freedom to Speak Up Guardian	August 2022	Due Oct 2022.
BHA & Discrimination	Promote the Civility and Respect toolkit.	Freedom to Speak Up Guardian	June 2022	Completed. Referenced in all FTSU staff engagement material and training for new champions.
BHA & Discrimination	Continue to increase the diversity of FtSU     Champions to support speaking up in the organisation and specifically assign a FtSU     Champion to Diversability.	Freedom to Speak Up Guardian	Ongoing	Completed. FtSU Champion assigned to Diversability and plans to recruit more Champions with lived experience.
BHA & Discrimination	5. Continue to engage with Diversability staff network to find out about their experiences and develop any relevant actions.	EDI Lead	Ongoing	Completed. Safe space feedback discussed with Head of HR, with actions.  EDI Lead attends Diversability meetings.
Governance	6. Continue to work with the Diversability staff network to introduce a Disability policy/guideline.	Disability Champion	TBC	Changed. The Trust has decided against having a separate disability policy but will incorporate disability into appropriate polices.
Governance	7. Establish an ongoing review process for policies/processes as part of the formal ratification process.	Diversability	Summer 2022	Completed. Members of the Diversability Steering Group receive policies directly from the HR Operations Team.
Governance	Promoted Disabled staff completion of staff survey.	Diversability	Autumn	To do Autumn 2022. (Completed for Autumn 2021).
Governance	Review governance arrangements and support for staff networks.	EDI Lead	September 2022	Part completed. Regular Chairs meetings. EDI Steering Group established with Execs. Funding still remains an issue for staff networks.

Theme	Action	Lead	Timeline	Update August 2022
Presenteeism and reasonable adjustments	<ol><li>Review flexible working policy and options for Disabled staff.</li></ol>	EDI Lead	2021/22	Completed.
Presenteeism and reasonable adjustments	11. Identify new ways to promote the Reasonable Adjustments Plan (RAP) for new and current staff, such as the Wellbeing Toolkit.	Disability Champion	February 2022	Completed. RAP promoted to all with Disability status on ESR and to Diversability new members.
Presenteeism and reasonable adjustments	12. Identify methods to evaluate take up of the Reasonable Adjustments Plan.	Disability Champion	June 2022	Planned. Meeting with HR Ops due late summer 2022.
Presenteeism and reasonable adjustments	<ol> <li>Review and share information about the Trust's current process for managing Reasonable Adjustments and Access to Work requests.</li> </ol>	Disability Champion	July 2022	Part completed. Presented to the Divisional Management and Governance meeting for Surgery. Training/meetings planned with HR Ops and quarterly for employees and managers.
Presenteeism and reasonable adjustments	<ol> <li>Equip managers and empower staff to discuss disability or long term health conditions in health and wellbeing conversations.</li> </ol>	EDI Lead	April 2022	Completed. The first appraisal question is on wellbeing and appraisal training is highly popular.
Presenteeism and reasonable adjustments	<ol> <li>Regular disability awareness training and liaison with Diversability to understand lived experiences for Occupational Health</li> </ol>	Head of OH & Disability Champion	January 2022	Completed. Regular ad hoc meetings between Head of OH & Disability Champion. Head of OH invited to Diversability meetings. OH Team trained Oct 2021.
Recruitment, development and engagement	Continue to increase ESR disability data in line with staff survey averages via communications	Disability Champion	Quarterly	Completed. DC continues to meet new members of Diversability with a request to update their disability status on ESR.
Recruitment, development and engagement	17. Continue to procure and promote Sunflower Lanyard's for staff who wish to discreetly identify that they may need support, help, or just a little more time in certain spaces.	Disability Champion	Ongoing	Completed. 1 Nov 2021 – 31 July 2022 fifteen Sunflower Lanyards have been sent out. All with Disability status on ESR were offered a lanyard.
Recruitment, development and engagement	<ol> <li>Continue to run disability awareness sessions, including as part of the Trust's induction programme, and promote lived experience case studies.</li> </ol>	Disability Champion	Ongoing	Completed. From Feb 2022 Deaf Awareness training was made mandatory for all new starters, as part of their induction programme. Links to the lived experience case studies are on the Diversability Intranet page.

Theme	Action	Lead	Timeline	Update August 2022
Recruitment, development and engagement	<ol> <li>Participate in the Disability Confident Pilot (which includes support from Indeed with internal policy and procedural audit) to ensure a more thorough Disability Confident re-accreditation.</li> </ol>	EDI Lead	January 2022	Completed. Pilot finished in March 2022 and Trust received Level 2 accreditation.
Recruitment, development and engagement	<ol> <li>Ask leaders with visible and/or hidden/invisible disabilities if they are content to share their lived experience stories.</li> </ol>	Chief People Officer	March 2022	Rolled over to 2022/23.
Recruitment, development and engagement	21. Establish whether the Guaranteed Interview Scheme is leading to Disabled applicants regularly getting shortlisted but not appointed.	Head of Recruitment	June 2022	Completed. The figures for 2022 show that a higher proportion of Disabled people are getting appointed compared to Non-Disabled people.
Recruitment, development and engagement	<ol> <li>Review recruitment practices by December 2021 and embed proposed changes into updated Recruitment Policy.</li> </ol>	Head of Recruitment and EDI Lead	June 2022	Rolled over to 2022/23.
Recruitment, development and engagement	23. Discuss equality, diversity and inclusion as part of a health and wellbeing conversation every staff member should receive - as per NHS People Plan.	Wellbeing Lead	Spring 2022	Completed. The first appraisal question is on wellbeing.
Recruitment, development and engagement	24. Explore talent programmes that target Disabled staff.	Head of L&D	Feb 2022 (explore) April 2022 (implement)	Part completed. ICS Career Development programme for under-represented groups promoted to Diversability members.
Recruitment, development and engagement	<ol><li>Proactively offer coaching sessions to the Trust's Disabled staff.</li></ol>	Head of L&D	January 2022	Completed. Offered to Diversability.
Recruitment, development and engagement	Continue to input monthly updates on equal opportunities and inclusion across all protected characteristics via the Trust's Risk Register.	EDI Lead	Monthly	Ongoing. Regularly updated by the HR team.