Meeting title:	Trust Board			Public Trust Board paper N	
Date of the meeting:	3rd November 2022				
Title:	WRES and WDES Update / Development of Action plans				
Report presented by:	Sandy Zavery / Joanne Tyler-Fantom				
Report written by:	Sandy Zavery, Head of EDI, Joanne Tyler-Fantom Deputy Chief People Officer				
Action – this paper is for:	Decision/Approval	x	Assurance	x	Update	
Where this report has been discussed previously	The report has been discussed at EDI Board on 13th October 2022, EPCG on 18th October and PCC on the 27th October 2022.				

To your knowledge, does the report provide assurance or mitigate any significant risks? If yes, please detail which
WRES and WDES – Compliance with Equality, Diversity and Inclusion reporting and monitoring national reporting requirements.   Links to Strategic theme 3 - Looking after our people, developing workforce capacity and capability and a compassionate and inclusive culture.

Impact assessment
The impact would be on staffing, staff moral and ultimately leading to poor service delivery, with potentially having financial, reputation and legal implications.

Acronyms used: WRES – Workforce Race Equality Standard / WDES Workforce Disability Equality Standard. Equality, Diversity and Inclusion Board (EDI), EPCB – Executive People and Culture Board, People and Culture Committee (PCC)

Purpose of the Report

To provide update on the development of the WRES and WDES action plans, following submission of the WRES and WDES data submitted to EPCB in August 2022.

NHSE&I require all Trusts to submit annually their WDES and WRES datasets and action plans. The data has been submitted onto the national portal. The data provides an overview of BAME and Disabled staff data against key criteria and indicators.

It was agreed that a further 'deep dive' on data would be undertaken to inform action plans, seeking to define and develop targeted actions for 2022/23, working collaboratively with key stakeholders.

It was agreed progress would be presented at the EPCB October in meeting, prior to publication of action plans, which is required by the end of October 2022.

Recommendation

The committee is asked to:

- Receive the update on the progress of the WRES and WDES action planning.
- Comment on the WRES and WDES draft action plans.
- Be assured that further work will be undertaken to continue to develop these: actions, interventions, and measures for improvement in targeted areas, through the network chairs and our governance in place.
- Note the action plans are required to be published by end of October 2022

Summary

The Trust is committed to ensuring Equality, Diversity and Inclusion (EDI) agenda, sits as the golden thread for all activity. Our host of initiatives aim to improve staff and service user experiences, that enables them to enhance their careers, that deliver services that meet the needs of our patients and staff.

The Trust monitors its workforce profile against the indicators outlined in the WRES and WDES. As part of the NHS England contract, UHL has a requirement to report their position, year on year. The focus of the WRES and WDES is to improve the differential experiences of BAME and Disabled staff. The Trust must undertake proactive work that closes the gaps in disparities.

This year, the Trust has undertaken a deep dive into the data. The analysis of the data has shown that although we have improved our overall representation across the organisation, further analysis demonstrates disparities. For example; an increase in BAME staff overall, however when analysed by banding in clinical areas, there is a dramatic drop in representation within AHP, Nursing and Midwifery.

This is much to do across EDI to improve the experiences for some of our staff, we have sought to theme priority work areas for our WRES and WDES plans. Further work is identified in the action plans, including further data analysis to enable targeting of actions across priority areas, interventions and measures required, working collaboratively with others to deliver positive change.

Main report detail

The action plans are in line with our People Services Strategic Priorities; Strategic Priority 5: Improve EDI Governance, define and agree priorities and enhance support to staff networks.

Development of action plans has been undertaken through our network chairs, professional leads and other key stakeholders to ensure a wide engagement and ownership of the plans. Reporting and monitoring will be through the people services governance in place.

Our aim will be to place EDI at the heart of everything we do, to help reach outstanding care for our patients by attracting and developing a diverse workforce reflective of the communities we serve. We are seeking to improve outcomes for BME and Disabled staff where we have identified any disparity.

Importantly, there are indicators aligned to the NHS survey outcomes (indicators 5-8) within the WRES and WDES and separate commitments have been developed and communicated to make positive improvement across these areas.

The priority areas of work for our WRES and WDES action plans have been themed to four key areas to enable us to develop and further define targeted actions for improvements across the 9 WRES indicators, seeking to drive positive changes and address disparity.

These four key themes are focussed around:

- Developing Equality Data Capability
- Developing and embedding EDI within Recruitment and Selection

- Developing and delivering on programmes and interventions that enhance staff career progression
- Developing an Inclusive Culture that embraces and celebrates diversity

The committee can be assured that further work and more detailed plans are in development, aligned to our people services priorities, working with staff network chairs and other key stakeholders.

Plans will be monitored and tracked through the refreshed People Services governance in place and the EDI Board.

A further update will be provided at a future Executive Culture and People Board.

Supporting Documentation

Appendix 1 – Draft WRES and WDES action plans

Draft WRES and WDES Action Plan October 2022 to September 2024

The WRES and WDES Action Plans have been developed in line with our People Services Strategic Priorities; Strategic Priority 5: **Improve EDI Governance, agree EDI priorities and support staff networks, transforming the way we celebrate diversity.**

Our key aim is to place Equality Diversity and Inclusion at the heart of everything we do, to help reach outstanding care for our patients by attracting and developing a diverse workforce reflective of the communities we service.

Our priority areas of work for our WRES action plan will be themed to four key areas to enable us to develop and further define targeted actions for improvements across the 9 WRES indicators :

- **Developing Equality Data Capability** – to drive development of the right priorities, development of targeted actions and interventions and to enable tracking and reporting of improvements with greater visibility and oversight.
- **Developing and embedding EDI within Recruitment and Selection** – to ensure our processes are inclusive for diverse groups of people.
- **Developing and delivering on programmes and interventions that enhance staff career progression** – to ensure our programmes support us to achieve our EDI ambitions and address disparity across all levels of our workforce.
- **Developing an Inclusive Culture that embraces and celebrates diversity -** initiatives that enhance our cultural understanding and support development of an inclusive culture.

WRES	Indicator	UHL – current position
1	Percentage of Staff in each of the AfC bands 1-9 or Medical and Dental and VSM compared to overall workforce	40.65% BME staff as a proportion of overall WF / Disparity evident across higher levels of the organisation through breakdown – 29% - band 6 / 21% - band 7 / 19% - 8A / 15% - 8B/ 10% - 8C / 14% - 8D / 18% -9/ VSM - 4%
2	Relative likelihood of staff being appointed from shortlisting across all posts	2.04 – White twice as likely to be appointed - Requires more detailed analysis
3	Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary process	0.89 BME Less likely than white counterparts
4	Relative likelihood of staff accessing non-mandatory training and CPD	0.97 BME Less likely than white counterparts
5	Percentage of staff experiencing harassment, bullying or abuse from patients, relatives of the public in the last 12 months	Staff Survey 2021 White 24.3% BME 19.4% / 2020 White 24.6% BME 20.7%
6	Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months	Staff Survey 2021 White 22.2% BME 24.1% / 2020 White 23.9% BME 28.7%
7	Percentage of people believing that the Trust provides equal opportunities for career progression or promotion	Staff Survey 2021 White 59.2% BME 41.7% / 2020 White 60.7% BME 41.7%
8	In the last 12 months have you personally experienced discrimination at work from Manager / team leader or other colleagues	Staff Survey 2021 White 7% BME 15.3% / 2020 White 5.3% BME 15%
9	Percentage difference between the organisations Board membership and its overall workforce	2022 White 95.7 % BME 4.3% / 2021 white 90% BME 10%

1	Developing Equality Data Capability – to drive the interventions, reporting, tracking and decision making				1
	Action	**Progress**	**Lead**	**By When**	**WRES indicator**
1	Provide 'deep dive' across our WF data to provide further analysis against key WRES metrics to inform priorities, initiatives, and development of action plans	2022 WRES / WDES data shared across staff networks to agree further analysis required and target areas	WF and EDI team	Oct /Nov 22	1-9
2	Identify target groups for focussed intervention on career progression and define trajectories	Target group identified: Staff at Band 5, 6, 7 and above within: AHP & Nursing and Midwifery	WF and EDI team, plus staff network	Oct /Nov 22	1,7
3	Further analysis of non mandatory training data to ensure equity and ease of access that is representative of our workforce	In progress	WF and EDI team, plus staff network	Oct /Nov 22	4,7
4	Compare UHL performance against national data (expected Dec 22) to ascertain where we are an outlier and set targets for improvement.	National data set expected Dec 22 for comparison.	WF and EDI team Professional Leads	By Jan 23	1-9
5	Development of the EDI Dashboard to provide greater visibility, drive development of the right actions and track progress at 6 monthly intervals.	In development, scoped to include: • Disciplinary; • Sickness; • grievances; • bullying and harassment; • Performance management; • Non-mandatory training by protected characteristics, staff groups, employee and NI number.	WF and EDI team	By March 23	1-9

2	Developing and embedding EDI within Recruitment and Selection				
	Action	**Progress**	**Lead**	**By When**	**WRES indicator**
1	Review recruitment and attraction process to ensure that we embed EDI best practice.	Completing National overhaul of recruitment programme – Jan 23	Recruitment and EDI Team	Jan 23 Feb 23	1,2
2	Define further specific deliverables as part of review work and planning.	Review of Consultant recruitment approach – Feb 23 Development and implementation of an Attraction and Recruitment social media strategy – March 23		March 23	

3	Developing and delivering on programmes and interventions that enhance staff career progression				
	Action	**Progress**	**Lead**	**By When**	**WRES indicator**
1	Communicate the availability of reverse mentoring, coaching, shadowing and mentoring programmes to include; • raise awareness through targeted promotion; • supporting attendance; Evaluate effectiveness and any understand gaps to improve outcomes.	Consideration of target staff groups. LLR programme for Reverse Mentoring has run 3 cohorts – total 32 UHL attendees	Deputy Chief Nurse, Clinical Leads in Nursing and AHP, OD and EDI Leads	March 23	1,4,7
2	Support successful implementation of **Diverse Leadership Programme** to include; • Increase participation and access • Data collection and analysis to track progress by protected characteristics and level of achievement; • Evaluate to identify gaps;	LLR programme -32 participants from with UHL – programme launching Oct 22 aimed at Nursing and AHP bands 5-7 positions	Chief Nurse, EDI team, LLR, AHP lead	On-going	1,7

	• targeted leadership modules to enhance career opportunities.				
3	Set trajectory for improvement and develop plans for identified priority staff groups with professional leads (link to 1.2 above)	In progress	EDI team, professional leads	March 23	1,7

4	**Developing an Inclusive Culture that embraces and celebrates diversity**				
	Action	**Progress**	**Lead**	**By When**	**WRES indicator**
1	Promote and support **Cultural Competency Programme** which aims to include: • Ways of building mutual respect; • Ways to understand and appreciate diversity, its values and inclusivity. Review the outputs of the diagnostic stage to feed into development of next steps.	Diagnostic phase due to complete in Dec 2022 20 Cultural competency enablers recruited from UHL as part of LLR programme 418 UHL participants identified including Trust Board, Senior and Mid Level leaders on the programme	EDI team / LLR	Dec 22	1-9
2	To strengthen, build and embed collective working across **staff networks** • to improve staff experiences; • to promote and raise awareness of BAME Staff Network, ED BAME Council Staff Network, Disability	Established working group with network chairs: agreed deep dive data required and further work around disparities.	EDI team, Network chairs	March 23	1 - 8

	Staff Network, Invisible Disability Staff Network, LGBTQ+ staff Network and Womens Staff Network.				
3	Promote **Active Bystander Programme** that includes; • opportunities to safely and constructive challenge; • empower to collectively embed positive behaviours; • evaluate to understand gaps and outcomes.	LLR programme accessible Cohort 1 – 7 UHL staff – commences Oct 22	EDI team, LLR	On-going	4,5,6,8
4	**Celebrating activities** that raise awareness, build understanding and opportunities to share staff experiences. Celebrate diversity of workforce – monthly awareness raising campaigns to be scheduled.	Schedules in place for monthly campaigns for the next 3 months • Black History Month -Oct 22; • Transgender Day of Remembrance - Nov 22; • World Aids Day -Dec 22	EDI Team, Comms Team	March 23	
5	Commission **Trust Board development** programme to enhance Boards EDI understanding in respect of; • legal and moral duties; • accountability and responsibility; • embedding positive support to promote EDI agenda.	Seeking external support to be commissioned.	Chief People Officer, EDI team	Jan 23	
6	Embed EDI best practice into the **Employment relations case work improvement** and Just and Learning Culture approaches review	Review of all case work activity has commenced and deliverables being defined as part of work programme	EDI team, ER case work team	March 23	3

WDES Action Plan October 2022 to September 2023 – building an inclusive workplace that has an appreciation of different cultures.

No	Action	Lead	By when	Progress	WDES indicator
1.	To improve staff declaration rates by encouraging completion of ESR records to include: • promotion at CMG meetings; • article through our communication teams; • raise awareness through short staff stories/clips; • Use of ESR self-service portal.	Workforce Team	March 23		
2.	To review, gather and record employment data to improve decisions, leading to positive outcomes.	Workforce and People Services Team	March 23		
3.	Design and develop reasonable adjustment guidance to include: • Access to Work assessment; • Adaptations for staff requiring support in their role such as car parking; • Awareness workshops that provide guidance to managers on DDA and reasonable adjustments;	Staff Network chair & EDI Team	March 23		
4.	To strengthen, build, embed and collectively work to improve staff experiences by promotional awareness that entails: • celebration of events;	Staff Network chair & EDI Team	On-going		

	• Improvement of access to support mechanisms; • sharing staff stories that enhances awareness and builds understanding; • development of initiatives that enhance staff experiences; • cross working between different staff groups.				
5.	To improve the capture of non-mandatory training (as indicated in 1.3).	Workforce & L&D Team	March 23		
6.	To improve our understanding and awareness of Invisible Disabilities by campaigning and promoting activity that raises awareness such as: • sunflower lanyards for people with hidden disabilities; • informal network activity; • sunflower pin for allies.	Health & Wellbeing, Staff Network chairs & EDI Team	March 23		