

# **Workforce Disability Equality Standard (WDES)**

# Trust Report 2023 & Action Plan for 2023-24



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#### **EXECUTIVE SUMMARY**

This report contains the Trust's fifth annual WDES performance and our associated action plan in compliance with the NHS Standard Contract. This will be published on our website and shared with NHS England and our local commissioners, as well as being reviewed as part of any CQC inspection processes as may be required. Performance against the 10 WDES indicators is illustrated in chart, table & narrative form. Overall, the Trust has seen a general improvement in its WDES data on an annual basis, from a relatively strong base position, since the WDES was introduced. The Trust has recently received information from the NHS England WDES Team stating a rank position of 7<sup>th</sup> nationally (of 212 Trusts ie Top 4%) for our overall WDES performance. We were in the Top 10% of Trusts for 8 of the WDES measures, including (all Top 2% nationally):

- 3<sup>rd</sup> nationally for belief (of staff with disabilities) in equal opportunities for career progression,
- 4th nationally both for satisfaction with reasonable adjustments, & Board disability representation

#### What's Improved:

- Improved our workforce disability representation again to best yet rate (7.6%) and increased board disability representation.
- Improved our WDES recruitment score to 0.94 (1.0 is equitable; <1.0 starts to redress the balance)

#### What's Worse:

- Increase (worse) in rates of Harassment, Bullying and Abuse (HBA) from both managers and colleagues for differently abled staff
- Increase in presenteeism by differently abled staff and lower perceptions of feeling valued at work for staff in this group

#### Key Messages / What new data is telling us,

- 1 in 3 disabled staff are experiencing harassment, bullying and abuse from service users and the public
- 1 in 5 staff with disabilities is experiencing harassment, bullying or abuse from their colleagues and 1 in 10 from managers
- 1 in 5 staff with disabilities reports feeling pressure to attend work when not feeling well enough

#### What we've done -

Working to advance disability inclusion has continued to be a high priority for the Trust and 2023 saw the creation of a new Combined People Plan with *Inclusive and Representative* at its very heart. We have continued to take a high-profile and multi-faceted approach to delivering on this specific agenda, including commencing our Differently Abled Buddy Scheme and a wide-ranging programme of education and development on inclusion

#### What we'll do as a result

This report sets out a high-level action plan built around the 3 strategic priorities from the NHS Long-term Workforce Plan 2023 (Train-Retain-Reform). Our WRES priorities for 2023-24 are to:-

- 1. Debias our people processes
- 2. Deliver significant progress towards equitable workforce representation across all pay bands and staff groups (Directorates and services to work to close disability reporting gap (to target 10% in year))
- 3. Take steps to end disproportionate harassment, bullying and abuse against staff with disabilities
- 4. Make EDI and disability inclusion everyone's business

Contents	Page
1.0 Introduction	3
2.0 Trust WDES Performance Summary 2023	O .
2.1 Trust (Versus National) Year On Year WDES Performance	4
2.2 Trust Year-on-Year Performance (Staff Survey Based Indicators)	5
2.3 National WDES Results (Staff Survey Based Indicators)	6
3.0 Trust Performance Breakdown by the 10 WDES Indicators	7
Indicator 1: Workforce Profile: Trust Workforce Disability Profile	7
Indicator 2: Recruitment: Relative Likelihood of Disabled Applicants being appointed from Shortlisting across all posts	10
Indicator 3: Capability Process Measure: Relative Likelihood of Disabled Staff Entering The Formal Capability Process	11
Indicator 4a: Harassment Bullying and Abuse (HBA): Service Users and the Public	12
Indicator 4b: Harassment, Bullying & Abuse: Managers	12 13
Indicator 4c: Harassment, Bullying & Abuse: Colleagues Indicator 4d: Harassment, Bullying & Abuse: Reporting	13
Indicator 4d. Harassment, Bullying & Abuse. Reporting Indicator 5: Career Development: Staff Belief that Organisation Provides Equal Opportunities for Career Progression & P	
Indicator 6: Presenteeism (Pressure to Attend Work Despite Not Feeling Well Enough)	14
Indicator 7: Feeling Valued	15
Indicator 8: Satisfaction with Workplace Adjustments	15
Indicator 9a: Staff Engagement	16
Indicator 9b: Disabled Voices: Measures to hear Disabled Staff Voice	16
Indicator 10: Trust Board Membership	17
4.0 What have Combined been doing to Advance the WDES over the past 12-18 months?	18
5.0 WDES Action Planned For 2023-24	19
6.0 Conclusions and Recommendations	20
APPENDIX 1: Listening to and Engaging with Disabled Staff 'Voice'	21
APPENDIX 2: Key work programmes to support delivery of progress against the 10 WRES indicators Report	22
APPENDIX 3: NSCHT WDES ACTION PLAN 2022-23 - End of Year Progress	23

# **NSCHT Workforce Disability Equality Standard (WDES) Report 2023**

## 1.0 INTRODUCTION

The Workforce Disability Equality Standard (WDES) is mandated annually as part of the NHS Standard Contract since 2019, feeding into NHS England, the Care Quality Commission (CQC) and our local commissioners monitoring processes.

The WDES supports us to develop our Trust ambition to provide **outstanding inclusion** for all of our workforce as set out in our <u>Combined People Plan 2023-28</u> (Figure 15, section 4), and in the <u>NHS EDI Improvement Plan</u>. It also enables our performance on disability inclusion (as measured by the 10 indicators of the WDES to be monitored and benchmarked against comparator NHS organisations nationally.

This report contains the Trust's fifth annual WDES performance and our associated action plan. This will be published on our website and shared with NHS England and our local commissioners, as well as being reviewed as part of any CQC inspection processes as may be required. Section 2 of this report sets out a summary of Trust performance each year since 2019, together with a summary of national progress against the 10 WDES indicators. Section 3 holds more detailed analysis of Trust performance in comparison to national performance, indicator by indicator.

#### 2.0 TRUST WDES PERFORMANCE SUMMARY 2023

Overall, the Trust has seen a general improvement in its WDES data on an annual basis, from a relatively strong base position, since the WDES was introduced. We are delighted to learn that the Trust has ranked highly across a number of the WRES indicators, and 7<sup>th</sup> nationally (of 212 Trusts) for our overall WDES performance in 2023 and in the Top 10% of Trusts for 8 of the WDES measures.

This year, generally the Trust has either improved or maintained an already strong position in the 4 core workforce measures of the WDES, sometimes against the national trend. We are delighted to see a significant increase in staff declaration of disabilities, suggesting that increasingly colleagues with disability, neurodiversity or long-term health conditions are feeling more confident to share this information and trusting that leaders and colleagues will value and support them fully for who they are and what they can do.

Performance in the indicators drawn from the NHS Staff Survey is more mixed. While we have seen an increase in reporting rates when harassment, bullying and abuse is experienced, we have seen an increase in HBA from manages and colleagues in a period when these measures improved nationally. HBA from service users and the public remained unchanged at a rate broadly comparable to the national figure.

Presenteeism and feeling valued worsened slightly, while satisfaction with workplace adjustments and belief in equal opportunities increased slightly. Staff engagement for staff with disabilities remained unchanged against a national backdrop of worsening in this aspect.

# 2.1 TRUST (VERSUS NATIONAL) YEAR ON YEAR WDES PERFORMANCE

# **Core WDES Workforce Measures**

Indicator	<u>Detail</u>		<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	Trust WDES Performance Yr on Yr 2019 2020 2021 2022 2023	Trust / National 2-yr trend
	W/F disability profile (compared to staff reporting long term condition (LTC) in staff survey (29.3% - indicated by line ————————————————————————————————————	Trust	2.5%	4.3%	6.6%	6.1%	7.6%	35.0 ————————————————————————————————————	Improving
1	Trust ranked <b>19th</b> of 212 organisations nationally i.e. <b>TOP 10</b> %	National	3.1%	3.4%	3.7%	4.2%	4.9%	15.0 — — — — — — — — — — — — — — — — — — —	Improving
		Trust	1.90	1.06	0.85	1.01	0.94	2	Improving
2	Recruitment measure	National	1.18	1.20	1.11	1.09	0.99	0 —	Improving
		Trust	n/a	0.00	0.00	0.00	0.00	1	Neutral
3	Capability process measure	National	n/a	1.53	1.94	2.01	2.17	.1 —	Worsening
	Board Membership (compared to staff reporting long term condition (LTC) in staff survey (29.3% indicated		0.0 %	7.7 %	14.3%	20.0%	23.1%	25.0	Improving
10	by line ——)  Trust ranked 4 <sup>th</sup> nationally (of 212)	National	2.0%	3.0%	3.7%	4.6%	5.7%	0.0	Improving

<sup>\*2023</sup> national data not yet available

---- (1.00) denotes 'equal treatment' {except when no cases}

Figure 1: Trust year on year WDES core workforce metric performance compared to national performance 2019-2023

# 2.2 TRUST YEAR ON YEAR PERFORMANCE (STAFF SURVEY BASED INDICATORS)



KEY: \*\*denotes indicators where a low score is better disabled staff rate non-disabled workforce rate

Figure 2: Trust year on year WDES performance in NHS Staff Survey derived indicators, 2019-2023

2.3 NATIONAL WDES RESULTS (STAFF SURVEY BASED INDICATORS)

<u>Metric</u>	<u>Label/ National Scores</u>	Category	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2-year trend</u>
		Disabled	33.0%	34.1%	34.2%	31.9%	33.0%	
4a	Harassment, bullying or abuse from the public Trust ranked 149 ie bottom 30% for this measure	Non-disabled	26.9%	27.1%	27.4%	25.5%	25.7%	
		Difference	6.2%	7.0%	6.8%	6.4%	7.3%	Worsening
	Harassment, bullying or abuse	Disabled	19.4%	19.4%	18.5%	18.5%	17.0%	
4b	from a manager	Non-disabled	11.2%	11.5%	10.8%	10.6%	9.6%	
	Trust ranked 48 i.e. top 25%	Difference	8.2%	7.9%	7.8%	7.9%	7.4%	Improving
	Harassment, bullying or abuse	Disabled	24.9%	26.4%	26.3%	25.6%	25.0%	
4c	from other colleagues Trust ranked 56 i.e. much better than average	Non-disabled	16.3%	17.2%	17.3%	16.7%	16.4%	
		Difference	8.6%	9.2%	9.0%	8.8%	8.6%	Improving
		Disabled	48.2%	48.2%	49.7%	49.8%	49.9%	
4d	Harassment, bullying or abuse being reported  Trust ranked 6th nationally – TOP 3%	Non-disabled	48.0%	47.3%	48.5%	48.2%	48.6%	
		Difference	0.2%	0.8%	1.2%	1.6%	1.2%	Neutral
	Career progression Trust ranked 3 <sup>rd</sup> nationally – TOP 2%	Disabled	51.7%	50.9%	51.9%	51.5%	51.3%	
5		Non-disabled	60.0%	57.6%	57.9%	57.7%	57.2%	
		Difference	-8.3%	-6.7%	-6.1%	-6.1%	-5.9%	Worsening
		Disabled	32.8%	32.1%	30.6%	31.1%	29.9%	
6	Presenteeism Trust ranked 40 nationally i.e. TOP 20%	Non-disabled	22.9%	22.4%	21.2%	22.9%	22.1%	
	Trust ranked 40 hadionally i.e. 10F 20 %	Difference	9.9%	9.6%	9.4%	8.2%	7.9%	Improving
		Disabled	34.7%	37.3%	39.1%	39.4%	35.1%	
7	Feeling valued Trust ranked 9th nationally - TOP 5%	Non-disabled	44.9%	48.5%	50.4%	50.7%	44.9%	
	Trust ranked 9. Hationally - TOP 3%	Difference	-10.2%	-11.2%	-11.3%	-11.3%	-9.8%	Worsening
8	Workplace adjustments Trust ranked 4th nationally – TOP 2%	Disabled	73.8%	73.3%	73.8%	76.6%	72.2%	Worsening
		Disabled	6.6	6.6	6.6	6.7	6.5	
9a	Staff engagement Trust ranked 9th nationally – TOP 5%	Non-disabled	7.0	7.1	7.1	7.2	7.0	
	Trust failed 5 Hationally - TOP 5%	Difference	-0.4	-0.5	-0.5	-0.5	-0.5	Worsening

Figure 3: National year on year WDES performance in NHS Staff Survey derived indicators, 2019-2023 [Courtesy of the NHS England WDES Team]

#### 3.0 TRUST PERFORMANCR BREAKDOWN BY THE 10 WDES INDICATORS

# Indicator 1: Workforce profile: Trust Workforce Disability Profile

Our aim at Combined is to be equally representative of our overall workforce reporting disabilities through all bands (clinical and non-clinical), and also to have a culture in which all workers feel valued, and where colleagues with health conditions, neurodiversity and disability ('differently abled') feel comfortable and supported in sharing this information. The Trust's overall disabled workforce (bank excluded) has increased to 7.6% in 2023 and we are delighted to learn that we are **ranked 19**<sup>th</sup> **nationally (ie top 10%)** on this measure. The national 2023 rate of disability declaration is 4.9%. This is our best rate ever and a significant increase on our 2022 rate of 6.1%. However, this falls significantly short of the self-reported (anonymous) NHS Staff Survey results suggesting **29.3%** of Trust staff have a long-term health condition, neuro-difference or disability.

Figure 4 below provides a breakdown of our Trust Disability data for 2023 by WDES 'Cluster', compared to the 2022 results (whole workforce, excluding bank only workers). The shows that we are more representative of disability in the lower 2 clusters (bands 5-7, and particularly bands 1-4) than in senior clusters and medical roles. All clusters are significantly under the rate suggested by the Trust's NHS Staff Survey data, suggesting 29.3% of workers with a long-term health condition / neuro-difference / disability.

The charts in Figure 5 overpage provide the detail by band for our 2023 non-clinical workforce compared to our clinical workforce. There is slightly higher disability representation in non-clinical roles (8.5%) compared to clinical roles (7.5%) on average. There is mixed representation of disability through non-clinical bands, whilst there appears to be more equitable representation in lower banded clinical roles and less representation in higher banded clinical roles.

• Whole Trust Workforce Disability (excluding bank):

Trust Non-Clinical Disabled Workforce:

• Trust **Clinica**l Disabled Workforce (excluding medical):

**7.6%** (up from 6.1% in 2022)

**8.5%** (up from 6.4% in 2022)

**7.5%** (up from 6.2% in 2022)

		2022		2023		
		Non-			Non-	
	Disabled	Disabled	Unknown	Disabled	Disabled	Unknown
1: <1-4	6.7%	69.3%	24.0%	8.5%	73.6%	17.9%
2: 5-7	6.5%	82.9%	10.6%	7.8%	83.6%	8.6%
3: 8a:8b	3.1%	79.4%	17.6%	5.2%	80.7%	14.1%
4: 8c-VSM	6.4%	83.0%	10.6%	4.4%	84.4%	11.1%
Other	0.0%	88.0%	12.0%	4.5%	95.5%	0.0%
Medical	3.1%	78.5%	18.5%	4.4%	75.0%	20.6%
TOTAL	6.1%	77.4%	16.5%	7.6%	79.3%	13.0%

Figure 4 Whole Workforce WDES Summary data 2023 - by WDES 'cluster'

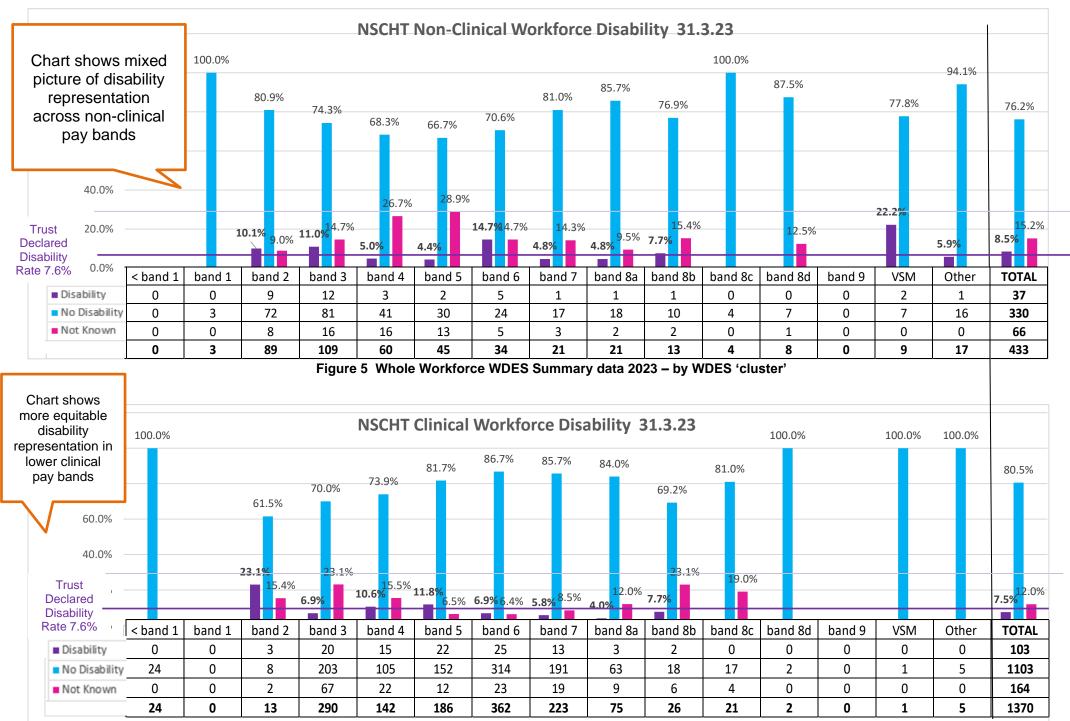


Figure 6: Charts illustrating Trust Disability Profile by band : Non-Clinical and Clinical workforce

Trust Non-Clinical and Clinical (non-medical) Workforce as at 31 March 2023 (headcount and percentages)

	iioai aii		-	ilouioui,	110110			ich 2025 (neadcount and percentages)						2022		
Headcount			2022			20	23			%		2022			2023	
1a) Non-Clinical Workforce	Disabled	Non Disab	Unknown	Total 2022	Disabled	Non Disab	Unknown	Total		1a) Non-Clinical Workforce	Disabled	Non Disab	Unknown	Disabled	Non Disab	Unknown
under band 1	0	0	0	0	0	0	0	0		under band 1	0.0%	0%	0%	0.0%	0.0%	0.0%
band 1	0	3		3	0			3		band 1	0.0%	100.0%	0.0%	0.0%	100.0%	0.0%
band 2	9		10	88	9	_	8	89		band 2	10.2%	78.4%	11.4%	10.1%	80.9%	9.0%
band 3	7		20		12		16	109		band 3	6.5%	75.0%	18.5%	11.0%	74.3%	14.7%
band 4	2		18	57	3	41	16	60		band 4	3.5%	64.9%	31.6%	5.0%	68.3%	26.7%
band 5	1			40	2		13	45		band 5	2.5%	65.0%	32.5%	4.4%	66.7%	28.9%
band 6	2		5	29	5	24	5	34		band 6	6.9%	75.9%	17.2%	14.7%	70.6%	14.7%
band 7	1	18		23	1		3	21		band 7	4.3%	78.3%	17.4%	4.8%	81.0%	14.7%
band 8a	1	15		18	1			21		band 8a	5.6%	83.3%	11.1%	4.8%	85.7%	9.5%
band 8b	1	9		13	1	10		13		band 8b	7.7%	69.2%	23.1%	7.7%	76.9%	15.4%
	0	_			0											
band 8c				6				4		band 8c	0.0%	83.3%	16.7%	0.0%	100.0%	0.0%
band 8d	0			5	0		1	8		band 8d	0.0%	100.0%	0.0%	0.0%	87.5%	12.5%
band 9	0			1	0			0		band 9	0.0%	0.0%	100.0%	0.0%	0.0%	0.0%
VSM	3			15	2			9		VSM	20.0%	80.0%	0.0%	22.2%	77.8%	0.0%
Other	0		3	16	1	16		17		Other	0.0%	81.3%	18.8%	5.9%	94.1%	0.0%
Total	27	315	80	422	37	330	66	433		Total	6.4%	74.6%	19.0%	8.5%	76.2%	15.2%
1a) Clinical										1a) Clinical						i
Workforce (Non-	Disabled	Non Disab	Unknown	Total 2022	Disabled	Non Disab	Unknown	Total		Workforce (Non-	Disabled	Non Disab	Unknown	Disabled	Non Disab	Unknown
Medical)										Medical)						
under band 1	0	20	0	20	0	24	0	24		under band 1	0.0%	100.0%	0.0%	0.0%	100.0%	0.0%
band 1	0	0	0	0	0	0	0	0		band 1	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
band 2	3	15	1	19	3	8	2	13		band 2	15.8%	78.9%	5.3%	23.1%	61.5%	15.4%
band 3	20	181	89	290	20	203	67			band 3	6.9%	62.4%	30.7%	6.9%	70.0%	23.1%
band 4	4	59	23	86	15	105	22	142		band 4	4.7%	68.6%	26.7%	10.6%	73.9%	15.5%
band 5	17	153	14	184	22	152	12	186		band 5	9.2%	83.2%	7.6%	11.8%	81.7%	6.5%
band 6	24	306	31	361	25	314	23	362		band 6	6.6%	84.8%	8.6%	6.9%	86.7%	6.4%
band 7	10	171	22	203	13	191	19	223		band 7	4.9%	84.2%	10.8%	5.8%	85.7%	8.5%
band 8a	2	63	12	77	3	63	9	75		band 8a	2.6%	81.8%	15.6%	4.0%	84.0%	12.0%
band 8b	0	17	6	23	2	18	6	26		band 8b	0.0%	73.9%	26.1%	7.7%	69.2%	23.1%
band 8c	0	14	3	17	0	17	4	21		band 8c	0.0%	82.4%	17.6%	0.0%	81.0%	19.0%
band 8d	0	3	0	3	0	2	0	2		band 8d	0.0%	100.0%	0.0%	0.0%	100.0%	0.0%
band 9	0	0	0	0	0	0	0	0		band 9	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
VSM	0	0	0	0	0	1	0	1		VSM	0.0%	0.0%	0.0%	0.0%	100.0%	0.0%
Other	0		0	9	0		0			Other	0.0%	100.0%	0.0%	0.0%	100.0%	0.0%
Total	80		201	1292	103		164			Total	6.2%	78.3%	15.6%	7.5%	80.5%	12.0%
Total	- 50	1011		1232	100	1100	104	1370		- Ottai	0.270	70.570	13.070	71370	00.570	12.070
Medical Workforce	2									Medical Workforce						
consultants	1	18	7	26	1	19	7	27		consultants	3.8%	69.2%	26.9%	3.7%	70.4%	25.9%
non consultant	<u> </u>									non consultant	0.075	33.2,3	20.070	3.7,3	7 0. 1,3	20.075
career grade	1	17	4	22	2	15	5	22		career grade	4.5%	77.3%	18.2%	9.1%	68.2%	22.7%
trainee grades	0	16	1	17	0	17	2	19		trainee grades	0.0%	94.1%	5.9%	0.0%	89.5%	10.5%
TOTAL Medical	2	51	12	65	3	51	14	68		TOTAL Medical	3.1%	78.5%	18.5%	4.4%	75.0%	20.6%
TOTAL IVIEUICAL		21	12	05	3	21	14	00		TOTAL Wieulcal	3.1%	70.570	10.5%	4.470	75.0%	20.0%

Figure 7: Data Tables for Trust Disability Profile by band : Non-Clinical and Clinical workforce

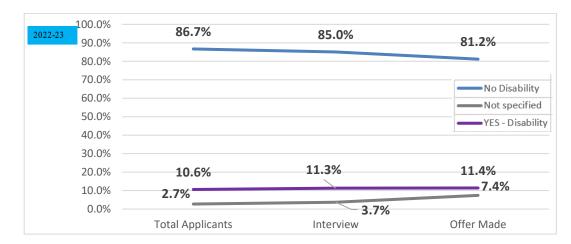
## Indicator 2: Recruitment: relative likelihood of disabled applicants being appointed from shortlisting across all posts



Figure 8: WDES recruitment scores 2019 – 2023 (Trust scores compared with national average)

The above score is calculated from the shortlisted and appointed data from Trust recruitment and selection activities over the period April 2022 – March 2023. A more complete analysis of our recruitment activities (including applications stage) is included below for 2022-23 (& 2021-22).

2022-23 R&S			
Headcount	Applications	Shortlisted	Appointed
No disability	3883	1861	547
Not specified	122	81	50
YES - Disability	475	247	77
Total Applicants	4480	2189	674
Percentages	<b>Total Applicants</b>	Interview	Offer Made
No Disability	86.7%	85.0%	81.2%
Not specified	2.7%	3.7%	7.4%
YES - Disability	10.6%	11.3%	11.4%



[Note: Ineligible application data has been removed from figures]

Figure 9: Trust Recruitment Data by Disability Category 2022-23

Figure 10: Disability through the Trust R&S Process 2022-23

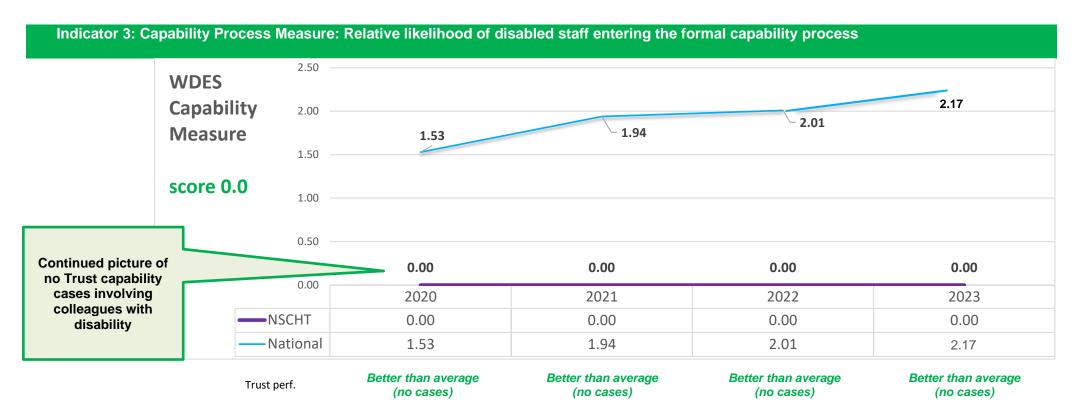


Figure 11 WDES Capability Procedure Measure, year-on-year performance compared to the national position

As there were no disciplinary cases involving disabled colleagues in the 2023 WDES reporting period, our **disciplinary measure score** is **0.00.** Our 2022 score (and in all previous WDES years) was also 0.00.

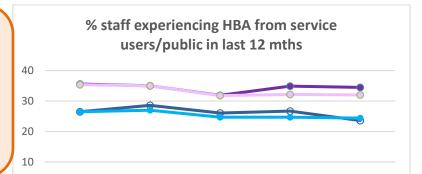
This measure is potentially easily skewed, however, due to the relatively low proportion of staff with declared disability, whereby just one capability case involving a colleague with a disability could create a high score, therefore complacency on this measure should be guarded against.

	Capability cases 2021-2022	Capability cases 2022-2023	2 year rolling average (for WDES calculation)
No Disability	7	0	3.5
Disabled / Differently Abled	0	0	0
Disability Status not known	1	5	3
TOTAL CASES IN YEAR	8	5	6

Figure 12 Trust Formal Capability Procedure Cases 2021-2023

## Indicator 4a: Harassment Bullying and Abuse (HBA): Service Users and the Public

- HBA by service users & the public remained broadly constant for both staff with and without disabilities.
- Both Trust groups experienced more than average than the national average



WDES Year	2019	2020	2021	2022	2023
NSCHT Disability, LTC or illness %	35.6	35.0	31.9	34.9	34.5
NSCHT Non-Disabled %	26.5	28.6	26.1	26.7	23.6
National Disability, LTC or illness %	35.4	35.0	31.8	32.2	32.0
National Non-Disabled %	26.5	27.0	24.7	24.7	24.4
NSCHT Disability, LTC or illness responses	174	203	232	284	354
NSCHT Non-disabled responses	601	573	694	753	853

In 2023 WDES (2022 Staff Survey), we saw a negligible improvement (0.4% points) in the measure of disabled colleagues experiencing harassment, bullying and abuse from services users, relatives and the public. In this period, the corresponding figure for non-disabled staff also improved by 3.1% points.

Of concern, the rates declared by disabled and nondisabled staff remain significantly higher than the national average by approximately 10 percentage points. We continue to encourage staff to report incidents of abuse and bullying of all kinds. We continue to promote our Freedom to Speak Up access routes, in addition to the usual employee relations processes for raising of such concerns.

We are extremely disappointed to rank in the **bottom** 30% nationally for this measure.

# Indicator 4b: Harassment, Bullying & Abuse: Managers

It is very disappointing to see the reported incidents of bullying and abuse of disabled staff by managers has seen an increase (worse) of 1.5% since 2022. This trend is also reflected in the non-disabled Trust staff experience too, with an increase (worse) of 0.9%

Nationally, the rate of HBA by managers for both groups has reduced. This means that the Trust rate for staff with disabilities is not equal to the corresponding national score (just 0.1 percentage points difference) and the Trust score for non-disabled staff is 1.7 percentage points lower (better) than the national rate.

The Trust ranked 48 ie top 25% nationally on this

- Increase in HBA from managers for disabled Trust staff
- Corresponding national figure fell (improved)
- Trust & national scores are now equal



WDES Year	2019	2020	2021	2022	2023
NSCHT Disability, LTC or illness %	8.8	10.4	9.6	10.7	12.2
NSCHT Non-Disabled %	6.7	9.4	7.5	4.4	5.3
National Disability, LTC or illness %	17.6	16.8	15.2	13.4	12.3
National Non-Disabled %	9.4	9.4	8.5	7.1	7.0
NSCHT Disability, LTC or illness responses	171	202	230	281	353
NSCHT Non-disabled responses	594	564	692	750	850

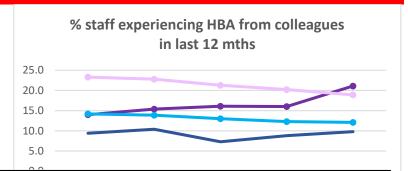
## Indicator 4c: Harassment, Bullying & Abuse: Colleagues

Harassment, bullying & abuse by colleagues for colleagues with a disability has very sadly increased significantly from 16.0% in 2022 to 21.1% in 2023. This is a worrying increase which is also 3.8% more than the national average of 18.9%.

Effectively 1 in 5 staff with disabilities is experiencing harassment, bullying or abuse from their colleagues.

Conversely for Trust non-disabled staff, there is also an upward trend (worsening) since 2021, although at 9.8% it remains lower (better) than the national average of 12.1%.

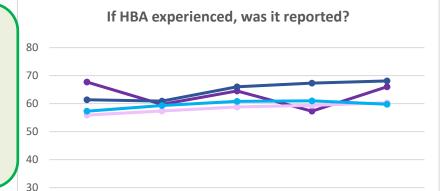
- HBA from colleagues increased (worse) for Trust disabled staff
- Trust position now worse than national average for disabled colleagues, but better than average for non-disabled staff



WDES Year	2019	2020	2021	2022	2023
NSCHT Disability, LTC or illness %	14.0	15.4	16.1	16.0	21.1
NSCHT Non-Disabled %	9.4	10.4	7.3	8.8	9.8
National Disability, LTC or illness %	23.3	22.8	21.3	20.2	18.9
National Non-Disabled %	14.2	13.9	13.0	12.3	12.1
NSCHT Disability, LTC or illness responses	172	201	230	282	351
NSCHT Non-disabled responses	595	567	682	747	845

# Indicator 4d: Harassment, Bullying & Abuse: Reporting

- Reporting of HBA incidents increased significantly for Trust disabled staff
- HBA reporting rates much greater than national average for both Trust groups



WDES Year	2019	2020	2021	2022	2023
NSCHT Disability, LTC or illness %	67.7	59.7	64.5	57.3	66.0
NSCHT Non-Disabled %	61.4	60.9	66.0	67.3	68.1
National Disability, LTC or illness %	55.9	57.4	58.8	59.4	60.3
National Non-Disabled %	57.3	59.3	60.8	61.0	59.8
NSCHT Disability, LTC or illness responses	62	77	93	110	156
NSCHT Non-disabled responses	171	184	212	217	210

It is good to see that the reporting mechanisms in place within the Trust are generally being used equitably by all staff with and without disabilities to record, report and tackle incidents of harassment bullying and abuse.

There was a pleasing improvement of just over 8% in the rate of reporting HBA when it occurred for Trust staff with disabilities, bringing this score broadly in line with the rate for Trust staff without disabilities. The Trust ranked 6<sup>th</sup> **nationally** for this measure ie **Top 3%.** 

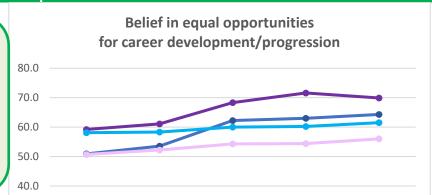
For both Trust groups, approximately two thirds of staff reported HBA when they experienced it. This is better than the national picture by 6-7 percentage points.

# Indicator 5: Belief that organisation provides equal opportunities for career progression & promotion

There was a further increase in the perception of Trust disabled staff that the Trust provides equal opportunities for career progression (up a further 1.3%). This marks a continuing trend since the WDES began. This further improvement brings the figure for staff with disabilities closer to the Trust rate for non-disabled staff, but the gap remains at just over 5%.

Almost 7 in 10 Trust staff (both with or without disability) now believe that the Trust offers equal opportunities, a positive picture given the pressure on the NHS since the start of the Covid-19 pandemic. The perception of Trust staff (both with and without disabilities) is more favourable than the corresponding rates nationally – a continuing trend since 2020.

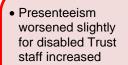
- Further improvement in Trust disabled staff believing the Trust offers equal opportunities
- Score for both groups BETTER than national average
- Still lower by 5% than the rate for non-disabled Trust staff



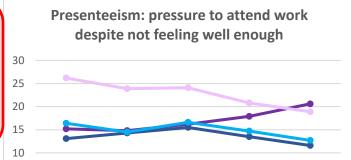
TOP 3 nationally

WDES Year	2019	2020	2021	2022	2023
NSCHT Disability, LTC or illness %	50.9	53.5	62.2	63.0	64.3
NSCHT Non-Disabled %	59.2	61.1	68.3	71.6	69.9
National Disability, LTC or illness %	50.7	52.2	54.3	54.4	56.0
National Non-Disabled %	58.1	58.3	60.0	60.2	61.5
NSCHT Disability, LTC or illness responses	175	200	233	284	365
NSCHT Non-disabled responses	598	573	694	751	854

# Indicator 6: Presenteeism (pressure to attend work despite not feeling well enough)



 Trust slightly worse than average for disabled staff



WDES Year	2019	2020	2021	2022	2023
NSCHT Disability, LTC or illness %	15.2	14.8	16.2	17.9	20.6
NSCHT Non-Disabled %	13.1	14.3	15.5	13.5	11.6
National Disability, LTC or illness %	26.2	23.9	24.1	20.8	18.9
National Non-Disabled %	16.4	14.5	16.6	14.7	12.7
NSCHT Disability, LTC or illness responses	125	135	142	184	253
NSCHT Non-disabled responses	290	265	278	319	387

There was a concerning increase in reported presenteeism (feeling pressure to attend work, despite not feeling well enough) by disabled Trust staff in 2023, with over 1 in 5 disabled colleagues saying they experienced this (slightly worse than in 2022). The national corresponding rate improved (lower) leaving a gap between Trust and national performance of just under 2% (i.e. Trust score slightly worse than average). Conversely, there was lower presenteeism for Trust employees without disability compared to national average.

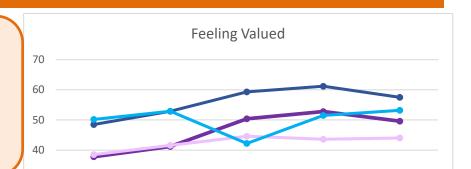
The difference in reported experience between Trust disabled and non-disabled staff in relation to presenteeism increased (to almost 9%). Trust differently abled colleagues are almost twice as likely to feel pressure to attend work when not feeling well enough, compared to colleagues without disability). Despite worsening performance on this measure, the Trust ranked 40<sup>th</sup> nationally, ie in the **Top 20%** of Trusts

# Indictor 7: Feeling Valued

Trust scores for feeling valued have remained higher (better) than the national average for both disabled and non-disabled staff. Both groups reported a drop in feeling valued between 2022 and 2023, a period in which there was a slight improvement for both groups nationally.

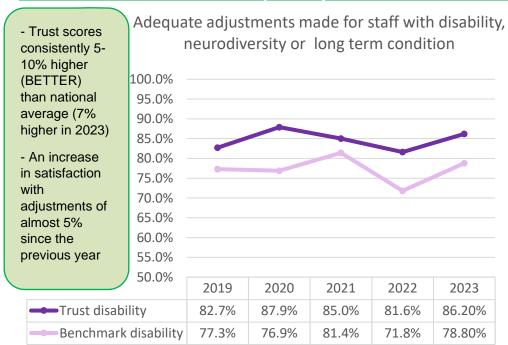
The Trust ranked 9<sup>th</sup> nationally, putting us in the **Top 5%.** Despite this, it is of concern that 50% of differently abled Trust staff and 40% of non-disabled staff report not feeling valued, given the implications for staff engagement and desire (or not) to stay with and perform the best for the organisation (i.e. ultimate impact on patient care and bottom line finances).

- Trust rates of feeling valued remain BETTER than national averages, but gap reduced (top 5% nationally)
- Trust Disabled staff feel significantly less valued than non-disabled staff
- Trust & national rates equal



WDES Year	2019	2020	2021	2022	2023
NSCHT Disability, LTC or illness %	37.8	41.2	50.4	52.8	49.6
NSCHT Non-Disabled %	48.5	52.9	59.3	61.2	57.5
National Disability, LTC or illness %	38.5	41.6	44.6	43.6	44.0
National Non-Disabled %	50.2	52.9	42.2	51.5	53.2
NSCHT Disability, LTC or illness responses	172	199	234	284	353
NSCHT Non-disabled responses	596	575	696	753	851

# Indicator 8: Satisfaction with workplace adjustments



It is pleasing to see that Trust colleagues with disability (differently abled) have consistently rated 5-10% higher (BETTER) satisfaction with reasonable adjustments made to help them perform their roles, compared to the national average since the WDES began. At 86%, this was 7% greater satisfaction in 2023 and placed the Trust 4th nationally (i.e. TOP 2%) on this measure. It is also pleasing that this rate of satisfaction at the Trust increased by almost 5% over the previous year. It is likely that some of this improvement can be attributed to the increased focus on disability and neurodiversity across the Trust over the past 2 years, particularly linked to the increasing impact of our Combined Ability Network and our Differently Abled Buddy Scheme.

However, 14% of differently abled staff did not feel satisfied that their reasonable adjustments were adequate and we would wish to improve further on this level of satisfaction. The key purpose of reasonable adjustments is to optimise the ability of the staff member to perform their best, overcoming or avoiding barriers to performance; recognising and valuing the individual and their specific abilities, whilst assisting with any support needs.

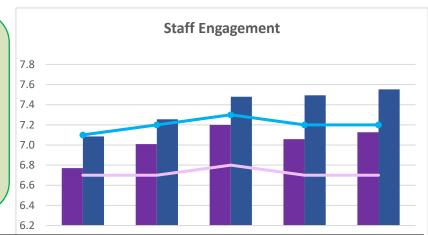
# Indicator 9a: Staff Engagement

Our overall Trust staff engagement scores have remained steady and strong at 7.4 over the last 3 years. In 2023, Combined Healthcare ranked 9<sup>th</sup> nationally on the WDES staff engagement measure, placing us in the Top 5% of Trusts. Staff engagement scores for staff with disabilities have been consistently higher than the national rate for people with disabilities, but lower than those for Trust non-disabled colleagues.

Our 2023 Trust staff engagement score for differently abled staff remained steady at 7.1 (from a high of 7.2 in 2021), while the corresponding national rates have remained steady at around 6.7. Our Trust engagement rate for staff with disabilities is close to that nationally for non-disabled staff.

Whilst our comparative performance is good, improving staff satisfaction for our colleagues with disability offers an opportunity to substantially improve overall staff engagement and with it service user experience and outcomes and organisation financial performance.

- Trust consistently better than average scores for staff engagement for both disabled and nondisabled staff
- Trust disabled staff engagement remains lower than that for nondisabled staff



WDES Year	2019	2020	2021	2022	2023
NSCHT Disability, LTC or illness %	6.8	7.0	7.2	7.1	7.1
NSCHT Non-Disabled %	7.1	7.3	7.5	7.5	7.6
National Disability, LTC or illness %	6.7	6.7	6.8	6.7	6.7
National Non-Disabled %	7.1	7.2	7.3	7.2	7.2
NSCHT Disability, LTC or illness responses	175	203	234	285	356
NSCHT Non-disabled responses	602	577	698	757	857

# Indicator 9b: Disabled Voices: Measures to hear Disabled Staff Voice

The Trust has continued to work to listen to and engage with colleagues with disabilities, long term health conditions and neuro-difference in a variety of ways through 2022-23 and beyond. *Appendix 1* provides further detail of some of the key ways in which we have been doing this. Key to this have been our Combined Ability Staff Network (CAN) and our Differently Abled Buddy Scheme.

Our Combined Ability Network has grown significantly in terms of the visible engagement of its membership, who regularly share enthusiastic support, ideas and learning opportunities, not only as part of network meetings, but also between meetings on the group chat (via MS Teams). We were successful in securing funding to extend our Differently Abled Buddy Scheme system (ICS)-wide in 2023 and look forward to seeing the benefits of this innovative approach extending further through Combined and through our ICS partner organisations. We have additionally consulted with our CAN members regarding our Combined People Plan, regarding development of our ICS Differently Abled Toolkit, and in relation to development of Trust policies.

## Indicator 10: Trust Board Membership

2023	Non- Disabled headcount	Disabled headcount	Non- Disabled %	Disabled %
Executive Directors	5	2	71.4%	28.6%
Of which: Voting members	5	1	83.3%	16.7%
Non-Executive	5	1	83.3%	16.7%
Of which: Voting members	4	1	80.0%	20.0%
Total board members	10	3	76.9%	23.1%

Figure 13: Trust Board Disability Profile 2023

- Trust ranked 4<sup>th</sup> nationally for Board Disability Representation ie TOP 2%
- Trust Board now has 3 members who have declared a disability (up from 2 in 2022)
   Of these, 2 are execs & 1 non-executive
- One exec and 1 non-exec with a disability have voting positions (one exec with a disability is non-voting)

NOTE: The above 2023 data does not include executive roles (x2) seconded to the Integrated Care Board (ICB).

		<u>2019</u>	<u>2020</u>	<u>2021</u>	2022	<u>2023</u>
Differently Abled	National WDES report	2.0%	3.0%	3.7%	4.6%	5.7%
Board membership	NSCHT performance	0.0%	7.7%	14.3%	20.0%	23.1%
		Worse than average	Better than average	Better than average	Better than average	Much better than average

Figure 14 Trust Board Membership Disability over time

The Trust is proud to have a diverse Trust Board (including ethnicity and LGBT+). It is pleasing to see that 2 of our executive team and one of our non-executive team have declared that they identify as differently-abled. This means that the rate of declared disability in the executive team broadly matches the rate stated in our latest NHS Staff Survey of 29.3% of the workforce having a long-term health condition. Whilst the rates within the overall board and the voting board are a little lower than this, they are none-the-less very much higher than the latest national rate of differently-abled board representation.

#### 4.0 WHAT HAVE COMBINED BEEN DOING TO ADVANCE THE WDES OVER THE PAST 12-18 MONTHS?

Inclusion is increasingly key to how we work at Combined. It is no coincidence that the first section of our new Combined People Plan 2023-28 is devoted to being **Inclusive and Representative** (see Figure 15), specifically stating our ambition to be inclusively representative of our communities through:-

- Celebrating & recognising diversity
- Developing a culture of justice, belonging & inclusivity
- Representative of our diverse communities at every level

Working to advance disability and neurodiversity inclusion has continued to be a high priority for the Trust and we have continued to take a high-profile and multifaceted approach to delivering on this specific agenda. Key work programmes to advance race inclusion through 2022-23 were as below (for detail, see *Appendix 2*).

- Inclusion Council
- Inclusion School
- Inclusive Talent Management
- Inclusive Leadership Development
  - o High Potential Scheme
  - o Connects leadership programme
  - Trust Leadership Academy
- Combined Ability Network
- Inclusive Trailblazers Project (Specialist Directorate)
- Differently Abled Buddy Scheme
- Menopause and Hormonal Health Policy and Support

Further detail on our WRES action plan 2022-23 progress at *Appendix 3.* 



Figure 15: Combined People Plan 2023-28 at a glance summary

5.0 WDES ACTION PLANNED FOR 2023-24
Key areas for action facilitating continued improvement across the 10 WDES indicators in 2023-24 are outlined below.

WDES Action Priorities 2023-	24 Train	Retain	Reform
To further extend our work to debias our employee relations and talent management processes to achieve position where differently abled work are as likely to access development a advancement as their non-disabled counterparts	rs recruitment lead – attendance or	Creating a culture of inclusion & belonging:     Roll out Inclusive Just and Fair Culture of Civility & Respect change programme	<ul> <li>Review &amp; overhaul R&amp;S, disciplinary and speaking up processes based on learning in 'No More Tick Boxes' (Kline 2023) from differently abled / intersectional perspective</li> <li>Reinvent our diverse and inclusive portrayal of the organisation to the public to include disability focus</li> </ul>
2. Seek opportunities to understand, engage, develop and progress our differently abled talent at every level (including bank workers) to achieve a equitable workforce profile across lev and staff groups by 2025-26.		<ul> <li>All Directorate and service leads to review their disability workforce profiles and engage with disabled workers about how experience could be improved.</li> <li>Talent management plan for board and snr teams to address lack of diversity / intersectionality</li> </ul>	'Inclusive by design' R&S and talent management processes
End disproportionate harassment, bullying and abuse against our differently abled workforce	<ul> <li>Ongoing leadership development and education in support of our culture of inclusion</li> <li>Wider development and awareness raising on inclusion</li> </ul>	<ul> <li>Project to deliver 10% improvement in HBA incidents against our differently abled colleagues in year</li> <li>Further extend visibility re Differently Abled Buddy Scheme &amp; disability</li> </ul>	Directorates to plan to highlight and target key services for action on reduction of violence, aggression and HBA (applying 80:20 rule) including disability focus
Make EDI and disability inclusion everyone's business – and make it demonstrable and sustainable	Continue to educate on inclusion:  Inclusion School  Weekly Newsround  Trust / system leadership programmes and positive action programmes  Inclusion awareness days and events celebrated and used as education opportunities	<ul> <li>Enhance our Flexible Working offer with specific focus on staff in minoritized groups, linking with Health Passport</li> <li>Board members to demonstrate improvements in culture through data and lived experience.</li> <li>Further embed role and impact of CAN network and other staff networks and the Differently Abled Buddy Scheme (seek long-term funding)</li> </ul>	<ul> <li>Implement and embed the NHS EDI High Impact Actions over a period of 2 years and review and re-consider extending application of the Disability Confident framework</li> <li>Introduce quarterly Trust &amp; Directorate EDI metrics to show progress in disability inclusion (RAG rated) from Q3 – based on NHS EDI Improvement Plan metrics – build in accountability</li> </ul>
Directorates and services to work to close the gap between declared disability in ESR and the rate sugges by the NHS Staff Survey	Leaders & colleagues at every level to understand WHY we should ask about disability, health and neurodiversity and HOW to ask in an appropriate & sensitive way	Line managers to ensure they have regular conversations on inclusion & wellbeing with team, group and individual staff members, demonstrating compassionate inclusive leadership.	Plan and prepare to analyse and publish 1st Trust Disability Pay Gap and action plan in 2024-25

# 6.0 CONCLUSIONS AND RECOMMENDATIONS

With almost 30% of Trust staff anticipated to have some form of disability, long term health condition or neurodiversity (based on our Staff Survey feedback), it is clear that creating an organisation culture in which people who are differently abled are valued and supported to thrive is essential. All our people need a compassionate and inclusive culture of fairness, civility and respect; an organisation where all colleagues feel looked after, valued and have a sense of belonging.

The Trust has made significant strides to progress our inclusion agenda (and specifically on our differently abled inclusion programme) during the past 12-18 months. Tangible progress has been made as demonstrated in this report. However, collectively as individuals, as an organisation and working as a system we need to continue our journey with passion and impact to address the societal and organisational factors which contribute to our differently abled workforce continuing to experience poorer employment prospects and experiences than their non-disabled counterparts on a range of indicators (particularly experience of harassment, bullying and abuse and discrimination at work).

We have been building on and educating for our culture of inclusion as a Trust and leading on much of this work on behalf of our system. Specifically, our Inclusion School approach, our inclusive and compassionate leadership approach and our ambitions for inclusive recruitment, development and talent management. Many of these will continue in 2023-2024.

Our Differently Abled Buddy Scheme has gained local, regional and national recognition and is now making an impact at system (ICS) level as well as within Combined. Our sustained focus and drive for continuous improvement on inclusion for all will take us to the next stage in our ambition of delivering outstanding inclusion in 2023-24. Increased Directorate accountability for improving inclusion through monitoring of evidence-based measures known to elevate equity.

Board members, the Trust Senior Leadership Team (SLT) and members of the People and Culture Development (PCD) Committee are asked to:-

- 1. Note the progress with our 2022-23 WDES actions and journey.
- 2. Approve this 2023 WDES report and Action Plans for 2023-24 for publication with the WRES Team, on the Trust's website and sharing with our lead commissioners.
- 3. Note that personal and team action will follow from the broad action plans outlined in the report and undertake to take personal responsibility for delivering against these within own area of responsibility as these actions emerge.
- 4. Continue to act as active ambassadors of disability inclusion and to champion an inclusive culture where people with diverse ability thrive and grown in their careers.

#### **END**

#### APPENDIX 1: LISTENING TO AND ENGAGING WITH DISABLED STAFF 'VOICE'

The Trust has continued to work to listen to and engage with colleagues with disabilities, long term health conditions and neuro-difference in a variety of ways through 2022-23. Some of the key ways in which we have been doing this are listed below.

- Continuing to enhance and embed the role and impact of our Combined Ability Network (CAN)
- CAN Network Lead part of Inclusion Council and now part of the Trust's Partnership Working Group at which the contents of new and
  updated Trust workforce policies is debated and agreed. The CAN is seen as a source of experts by experience opinions on all matters
  related to disability and neurodiversity. Consulted on policy development, such as our new Menopause and Hormonal Health Policy.
- The powerful impact of Microsoft Teams chat facility, enabling our CAN members to contact each other collectively to seek help, make comments and influence practice with ease.
- Our CAN lead continues to supplement regular meetings (via MS Teams) with email updates on matters disability and neurodiversity related to all members.
- Encouraging and supporting CAN members to attend and contribute to our system (ICS) Disability and Neurodiversity Staff Network also.
- Reaching out to our CAN members to consult on the Combined People Plan and the Employee Toolkit for Differently Abled Colleagues which is in development currently, led by our system Psychological Wellbeing Hub.
- One-to-one contact and support with the Differently Abled Buddy Scheme Project Manager.
- Through individual appraisal discussions and line management discussions, particularly in relation to the Health Passport or 'This is Me: This is Who I am' form as it is now known in the Trust.
- By holding Inclusion School and other development events with a focus on disability inclusion and ensuring that Staff Network members are specifically invited to attend.
- The Trust has also worked to develop a diverse group of Freedom to Speak Up Champions, including colleagues who are differently
  abled, who are able to be contacted for advice and to raise concerns through the Freedom to Speak Up process.

#### APPENDIX 2: KEY WORK PROGRAMMES TO SUPPORT DELIVERY OF PROGRESS AGAINST THE 10 WRES INDICATORS

- **Differently Abled Buddy Scheme** our innovative scheme to support new (and existing) staff who are differently abled to gain buddying support to help them to get settled into the organisation and to arrange reasonable adjustments, where appropriate. This scheme has been immensely successful in raising understanding on disability and disability inclusion through the Trust and now through the system since funding and approval was gained to widen the scope of this important change programme.
- Inclusion Council Chaired by the Chief Executive, this diverse group meets bi-monthly to discuss and develop inclusion practise across the Trust. Our Inclusive Recruitment and Development Project which includes a focus on creating neurodiverse inclusion and wider disability inclusion and oversight of WDES progress are areas overseen by this group.
- Inclusion School Led by the Trust for the local ICS, Inclusion School aims to influence and change behaviours through a 'show not tell' approach, based on powerful personal stories and conversation. Our Inclusion School journey continued through 2022-23, with an intersectional approach built into all sessions. Our session in May 2022 with John Amaechi OBE specifically focussed on Inclusion and Intersectionality.
- Inclusive Talent Management: programme of developments to enhance inclusive progression for all our employees, including a specific focus on supporting development and performance of ethnic diverse colleagues at every level. Dual focus on providing support to ethnic diverse colleagues whilst supporting the wider development of the organisation to create an appropriate environment in which our ethnic diverse colleagues can thrive and progress.
- Inclusive Leadership Development
  - High Potential Scheme the Trust is leading on the delivery of the second cohort of this scheme for aspirant NHS directors. Inclusion has been built in by design through this programme at every stage, with a target of 15% of participants going through the second cohort having differently abled identity (achieved 25% in cohort 1 and 6% for cohort 2).
  - Connects leadership programme as with the HPS, inclusion is built in by design through this local first-line general leadership development programme for junior - middle managers. Includes module on Creating Inclusive Cultures and Inclusive Recruitment.
  - Trust Leadership Academy continued focus on inclusive leadership within our regular Leadership Academy sessions to keep Trust leaders updated and engaged on important topics
- Combined Ability Network (CAN) The Trust has worked to further embed and increase the impact of our CAN Network and also to encourage and support participation at our ICS Disability and Neurodiversity Staff Network. Our Chief Nurse acts as Executive Sponsor to this network.
- Inclusive Trailblazers Project (Specialist Directorate) A senior leader in our Specialist Directorate is working in conjunction with People Team colleagues to develop and deliver a project on becoming a trailblazer on inclusive recruitment, talent management and disciplinary processes. Includes a focus on disability and neurodiverse recruitment and selection.

#### **APPENDIX 3:** NSCHT WDES ACTION PLAN 2022-23 - END OF YEAR PROGRESS REPORT

WDES	Action		<u>Person</u> Responsible
1	1	Strong, visible and personal Trust Board & senior leadership on disability inclusion, using positive language and a focus on ability and overcoming societal barriers	Board & SLT members
1	2	Continuing Inclusion School journey, including further disability-focussed sessions to run in 2022/23	Chief People Officer , OD & Inclusion D&I Lead
1	3	Consider Hidden Disability Badge scheme	D&I Lead with Inclusion Council
1	4	Extending the focus on the appointment, retention and advancement of differently abled people at every level, including student, bank, preceptor and substantive roles and developing the talent pipeline at every step through optimising use of apprenticeships and new roles (such as Nursing Associate roles etc).	Chief People Officer

**Progress** 

(carry forward for 2023-24 in purple text)

#### **ACHIEVED**

Visible leadership from our Executive Team on Disability Inclusion, including the work of our People Directors, Shajeda Ahmed then Paul Draycott and our CEO Buki Adeyemo. Ben Richards, Director of Operations, leadership re AccessAble Launch; Kenny Laing re exec sponsorship for Combined Ability Network; People Director re neurodiversity and disability

For 2023-24

Continue to increase this and seek visible leadership from across the Trust Board portfolio on race

#### **ACHIEVED**

Further to disability focussed Inclusion School in October 2021, successful Inclusion school held on Inclusion & Intersectionality: The Big Questions with John Amaechi, May 2022. Staff Network event showcasing neurodiversity and sensory loss held in Disability History Month, Dec 2022. Changes made to Trust e-learning approach as a direct result.

# Not vet decided

Reconsider in 2023-24 in conjunction with Inclusion Council and Combined Ability Network and system counterparts

Specific actions have included:-

- A target of 14% declared disability in our workforce to be reached during 2022-23, recognising the national population with disability and the high level of non-disclosed disabilities evident via Staff Survey data - not yet achieved - 7.6% as at end Q4 2022-23 (proposed target for 2023-24 to achieve 10% disability declaration rate))
- Educating leaders and the wider workforce on what constitutes a disability / differently abled and how to self-report protected characteristics - achieved and ongoing
- Promoting our inclusive culture ensuring that colleagues feel psychologically safe to declare that they are differently abled, including embedding the 'The This is me, This is who I am' Health Passport into Trust relevant Trust policies (including capability policy) and practise as an enabler facilitate better discussions about reasonable adjustments and workplace support - achieved and ongoing
- Further developing our recruitment platforms and Trust website information to promote the Trust as a disability-supportive employer, and of our recruitment and selection processes to ensure these allow people across the spectrum of disability to shine and show their full potential - achieved and ongoing (Roger Kline inclusion school 20 April)
- Inclusive, values-based recruitment advertising, appealing to people from across the protected characteristics, and with specific campaigns to recruit more diversely to more senior positions. Ongoing

- Continue with our Trust and system efforts to develop and educate on more inclusive recruitment and selection processes, bolstered by our developing wider
- Progress a project in conjunction with CAN network to achieve Disability Confident Leader status over next 1-2

Trust inclusive culture and practise.

vr

- Seek to invest in a project lead to review job documents (as proposed in Inclusion Council, July 2022)
- Further develop and extend our application of 'Restorative Just and Learning Culture' principles in line with the NHS's collective goal of a fair and compassionate culture, including through a project led and monitored by our Inclusion Council. Focus on applying restorative just and learning culture principles throughout all our ways of working in the Trust.

Continue to develop and embed the role and impact of our Trust staff networks (specifically our Combined Ability Network) as well supporting and contributing to the development of our system level networks. This includes 2 days dedicated time for Network Leads, and Executive Sponsorship.

- Funding and embedding our Differently Abled Buddy Scheme work programme into our usual business / ways of working, as well as seeking funding to go system-wide – achieved, funding gained to extend ICS-wide (4 days a week from 3) to end March 2024

- Developing improved induction resources for new staff to include a Welcome magazine, ensuring our new colleagues are aware of all the help and information available to them on disability inclusion and support in progress
- Educating on all aspects of disability inclusion, using the opportunity of Disability History Month (Nov-Dec) and also throughout the year, including deeper understanding of disabilities and how to access support and adjustments (for individuals, colleagues and managers) *achieved and ongoing*
- Continue to develop flexible working opportunities through both specific flexible working recruitment campaigns and general recruitment and retention good practise, balancing individual needs and preferences with service delivery needs *achieved and ongoing*

ACHIEVED AND ONGOING

Rect Lead

Progress not yet reviewed – reconsider in 2023-24

Commenced as part of Inclusive Trailblazers Project - continuing into 2023-24

Project commenced and key deliverables being mapped out for 2023-24 - continuing into 2023-24

Head of Education (SS)

D&I Lead with

Network

Leads

#### **ACHIEVED**

- Dedicated (paid) time 2 days per month per network of network lead throughout 2022-23 for first time; Executive sponsorship for each network
- Regular CAN meetings (held bi-monthly)
- System Disability and Neurodiversity Network meetings held bimonthly in addition For 2023-24
- Review arrangements for 2023-24 Network sponsors undertaking development re their network roles

D&I Lead with CAN

Rect Lead

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24

7	Continue the role of the Trust's Inclusion Council. Complete review and refresh of Inclusion Council projects for 2023 (inclg Culture of Civility & Respect and Inclusive Recruitment projects)
8	Continue our High Potential Scheme, supporting the development of a diverse cohort of aspirant senior leaders through the first 2 cohorts of this flag-ship programme
9	Continue promoting development opportunities, coaching and mentoring, talent management and support, with specifically focus on those with ethnic diverse heritage
10	Deliver second cohort of Reverse / Reciprocal Mentoring including differently abled as a key characteristic for reverse mentors, ensuring appropriate

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Reciprocal as a key ng appropriate reflection on organisational / system lessons learned and implementation of action based on these learnings

Develop core action on the WDES in conjunction with system partners as a local Integrated Care Board.

Director of People, OD & Inclusion D&I Lead

Associate

Director of OD

(JR)

Education

Lead, D&I Lead. Talent

Mgt Lead

Director of

People, OD &

Inclusion (via Baz Kaur, for

system)

#### **ACHIEVED**

- Review of Inclusion Council projects complete
- Bi-monthly meetings continued throughout 2022-2
- Still chaired by CEO / People Director

#### **ACHIEVED**

- Diverse 2023 cohort selected
- Inclusion again a core feature of the application and selection approach For 2023-24
- Delivery of programme for 2023 cohort
- Ongoing support, devt. & tracking (both cohorts) via leadership alumni

#### ACHIEVED / ONGOING

- Regular sharing of development opportunities (vacancies, secondments, acting up etc) via CAN distribution and Newsround
- Sharing of leadership development opportunities via staff networks Feb 2023

# **DELAYED**

Now due for delivery in 2023-24 due to issues with provider capacity

# PART ACHIEVED

- Increasingly greater partnership working on EDI
- Shared work on: system networks, Inclusive Recruitment, disability-related awareness dates, Differently Abled Buddy Scheme and much more

For 2023-24 – shared core plan within first 9 months of financial year

D&I Lead with system colleagues

(Note: many of the above actions are additionally anticipated to have positive impact across the full range of WDES indicators and across our wider Trust Inclusion programme and equality groups)