# THE WORKFORCE DISABILITY EQUALITY STANDARD ANNUAL REPORT 2021-2022

#### 1 Purpose

The purpose of this report is to meet our compliance requirement under the NHS Workforce Disability Equality Standard. This report provides an analysis of the Trust's workforce data relating to disabled and non-disabled staff. This data driven annual self-assessment provides the opportunity for the Trust in line with the Equality Diversity and Inclusion Agenda to consistently improve, to fulfil its commitment to diminishing inequalities experienced by staff with disabilities within the workforce. The collection of this data was carried out in accordance with the WDES guidance provided by NHS England for the period 1st April 2021 to 31st March 2022. The summary report provides the organisational narrative and strategic actions to be taken forward in the WDES Action plan.

The WDES Annual Report measures the progress as well as actions adopted to fulfil its objectives against all 10 metrics under WDES while identifying areas for improvement. The key areas of improvement that emerged from the 2021-2022 WDES Data around inequalities experienced by colleagues with disabilities included: shortlisting in employment, harassment and bullying, opportunities for learning and development, and presenteeism. These specific areas requiring improvement mirror the expectations set out in the NHS People Plan, the <u>People Promise</u>, and <u>NHS</u> Long Term Plan and are part of the Trust's Strategic Objectives as well as the Equality, Diversity and Inclusion Agenda. The Trust consistently seeks to improve in all 10 metrics of the WDES. This is really important for us as we aim to achieve our objective of being an Employer of Choice, who is inclusive and actively supports staff with disabilities and long term health conditions. Furthermore, we are bound to ensure compliance with the Equality Act, 2010. Discrimination under any form is not tolerated and the Trust has been actively working with its ESNable Staff Disability Network to further develop the WDES action plan and has taken progressive steps to improve employee experience for staff with disabilities or underlying health condition, most notably:-

- Supporting the ongoing establishment of the ESNable Staff Disability Network with staff campaigns currently under design
- Membership of <u>PurpleSpace</u> a global professional development hub for disability provided for employees, leaders, networks, allies and advocated driving change on disability from the inside out
- Successfully attained Disability Confident Level 2 (March 2022) and pushing to achieve Level 3 by January 2023
- New Recruitment and Selection Training mandated for all recruiting managers with sections on writing roles for inclusion and interviewing for inclusion (commencing Autumn 2022)

The WDES provides the opportunity for the Trust in line with the Equality, Diversity and Inclusion Agenda to act upon the learning we can take from the data. It is instrumental to fostering the understanding within the Trust that we all have a part to play in cultivating an inclusive and compassionate culture where all feel a sense of belonging and empowerment that they can reach their highest potential and to thrive within the organisation. The Trust will continue to push forward its robust WDES Action Plan (Appendix 2) to ensure not only representation of employees with disabilities in the workforce, equal opportunities but also to safeguard the wellbeing, rights, choices

and freedoms of all staff while recognising and valuing the diverse pool of talents, skills and knowledge to deliver the best possible care to our patients.

We recognise the requirements set out in the DRAFT Code of Governance for NHS Provider Trusts (Published May 2022), where significant attention is paid to the requirement for Boards to reflect the diversity of the workforce and the communities it serves. The action plan focusses on

the importance of disclosure so that the Trust is able to accurately understand the diversity of its workforce in respect of disability as well as ensuring training and scrutiny of recruitment panels and encouraging applications from a diverse background.

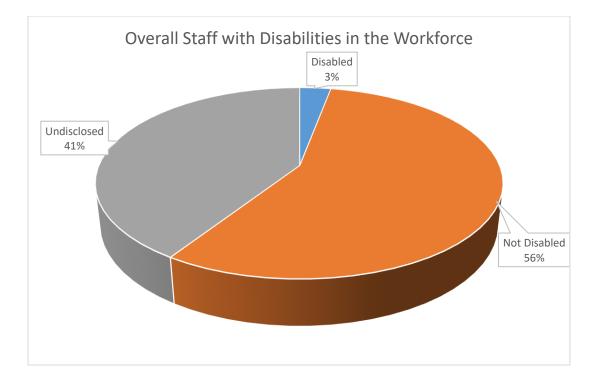
### 2 Background - Workforce Disability Equality Standard (WDES)

The NHS Workforce Disability Equality Standard (WDES) is designed to improve workplace experience and career opportunities for people with disabilities or long term health conditions working for or seeking employment within the NHS. The WDES follows the NHS Workforce Race Equality Standard (WRES) as a tool and an enabler of change. The Workforce Disability Equality Standard (WDES) is a set of ten specific measures that enable NHS organisations to compare the experiences of disabled and non-disabled staff. The ten Workforce Disability Metrics are:

WDES Metrics	Metric description
Metric 1	Percentage of staff in Agenda for Change 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.
Metric 2	Relative likelihood of disabled staff compared to non-disabled staff being appointed from shortlisting across all posts.
Metric 3	Relative likelihood of disabled staff compared to non-disabled staff entering the formal capability process, as measured by entry into the formal capability procedure
Metric 4	Percentage of disabled staff, compared to non-disabled staff, experiencing harassment, bullying or abuse from: patients/service users, their relatives or other members of the public, managers and other colleagues. 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.
Metric 5	Percentage of disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.
Metric 6	Percentage of disabled staff compared to non-disabled staff saying that they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties.
Metric 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 (Data taken from the national staff survey results)
Metric 8	Percentage of disabled staff saying that their employer has made adequate adjustments to enable them to carry out their work.
Metric 9	The staff engagement score for disabled staff, compared to non-disabled staff and the overall engagement score for the organisation. Has your trust taken action to facilitate the voices of disabled staff in your organisation to be heard? (Yes) or (No)
Metric 10	Percentage difference between the organisation's Board voting membership and its organisation's overall workforce, disaggregated by: Voting membership of the Board Executive membership of the Board

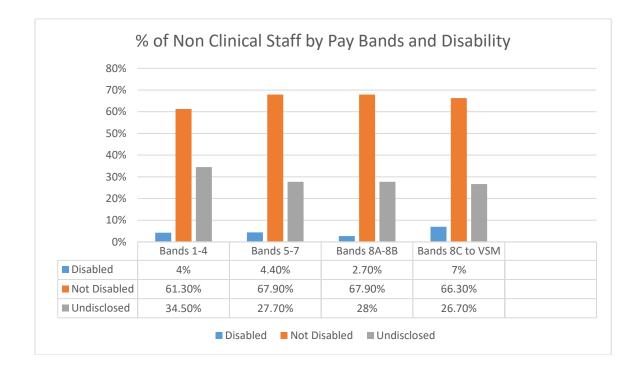
#### 3 Key issues – Data analysis

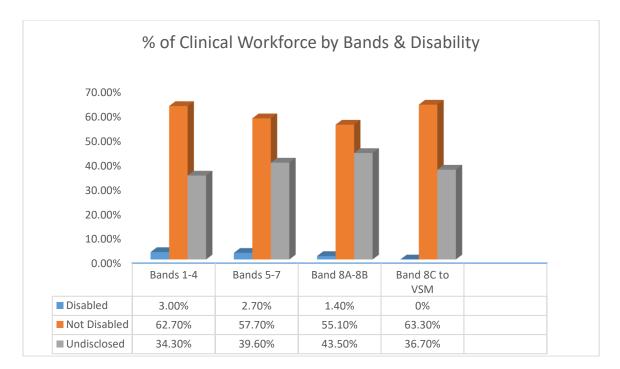
Our workforce data indicates that we have a significant proportion of our staff where their disability status remains unknown (41%). Only 3% of the workforce disclose a disability which is equivalent to only 349 out of a workforce of 11,635 staff. This has improved from last year where disclosures were at 1.61%. We have achieved this improvement through continued communications to encourage disclosure across all protected characteristics by the Workforce Information Team.



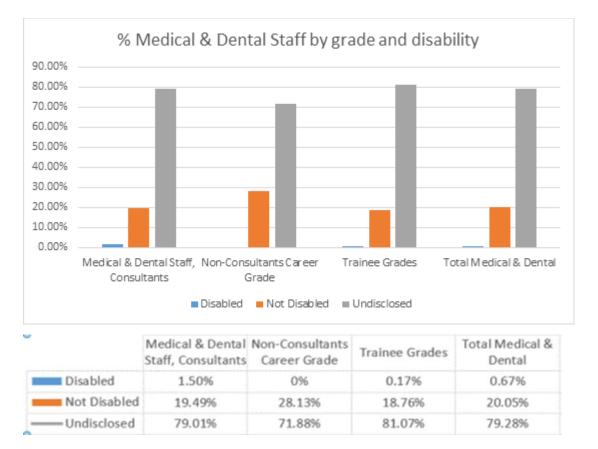
# 4 Data Analysis – Comparison Data

**Metric 1**: Percentage of staff in Agenda for Change 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.





**Analysis**: Due to the higher rates of disclosure as outlined in point 3, the data compared to last year, although still showing a disproportionate rate of disclosure of disability across all pay grades has improved compared to the 20/21 Annual Report (Non Clinical Band 5-7 showed as 1.64% staff disclosing a disability and 57.92% as undisclosed). This means in 2021/22 undisclosed data has reduced by 16.92% as a direct result of the ongoing disclosure reminder communications.



Unknown disclosure for this staff group is also an area of concern and will be included in the targeted work planned.

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

The table below shows the relative likelihood of disabled applicants compared to non-disabled applicants being appointed from shortlisting across all post. The data shows that staff with no disabilities are 0.24 times more likely to be appointed compared to staff with disabilities.

	Disabled	Non-disabled	Disability Unknown
Number of shortlisted applicants	461	5342	168
Number of appointed applicants	99	1420	57
Likelihood of shortlisting / appointing	0.21	0.27	0.34
Relative likelihood of Non-Disabled staff	1.24		
being appointed vs Disabled staff			

**Metric 3**: Relative likelihood of Disabled staff compared to non-disabled staff entering the formal capability process.

The table below shows data relating to staff who have entered the formal capability process:

	Disabled	Non-Disabled	Disability
			Unknown
Number of Workforce	341	6539	4755
Number of entering formal capability process	1.5	37.5	2.5
Likelihood of staff entering formal capability	0	0.01	0.00
process			
Relative likelihood of Disabled Staff entering for	0.77		
capability			

**Analysis:** The data shows there are no disabled staff entering formal capability process. The data is taken from Employee Relations (ER) spreadsheet (July 22). [A figure above 1 would indicate that disabled staff were more likely to enter formal capability process].

**Metric 4**: Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse in the last 12 months

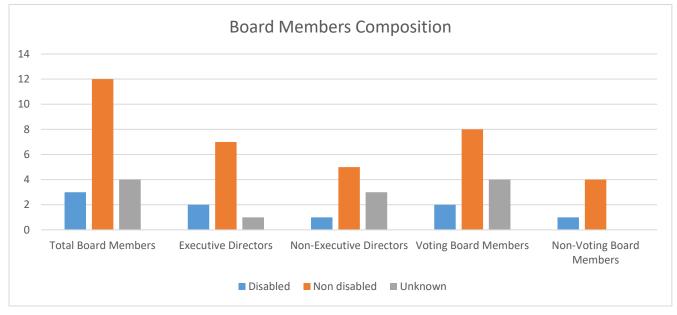
\*Please note metrics 4 to 9a are sourced from the latest publication of the NHS Staff Survey, March 2022. The followings are included by the Trust to provide a more comprehensive data set concerning experiences as well as representation of staff with disabilities within ESNEFT.

Metrics 4-9	Staff Survey Results <sup>1</sup> - 2021 Staff with Disabilities Non-disabled	Staff Survey Results <sup>1</sup> - 2020 Staff with Disabilities Non-disabled	Analysis
Metric 4a: % of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse in the last 12 months	36.7% 28.7%	29.1% 26.6%	Of the respondents, the data shows an increase in cases when compared to last year. Disabled staff continue to experience a slightly higher proportion of bullying, harassment and abuse from patients and service users than non-disabled colleagues. The data illustrates there is a rise generally across the organisation.
Metric 4b:	20.0%	21.1%	Of the respondents to this question, this declined by 1.1% from the previous year. Our

<sup>1</sup> Local results for every organisation | NHS Staff Survey (nhsstaffsurveys.com) Page 5 of 17

% of staff experiencing	12.4%	13.0%	leadership development pathway continues
harassment, bullying or abuse			to address bullying and harassment in
from managers in last 12			various modules.
months			
Metric 4c:			Of the respondents to this question, this rose
% of staff experiencing	28.5%	25.1%	by 3.4% for disabled staff compared to last
harassment, bullying or abuse	18.5%	17.7%	year.
from other colleagues in last			y ou
12 months			The data shows that disabled staff
			experience a higher level of discrimination in
			terms of bullying, harassment and abuse from
			other colleagues than their non-disabled
			colleagues.
Metric 4d:			Of the respondents, although this has
	41.4%	44 50/	
% of staff saying that the last		44.5%	dropped by 3% the data shows that disabled
time they experienced	40.6%	40.2%	staff were slightly more likely to report
harassment, bullying or abuse			experiences of bullying, harassment or
at work, they or a colleague			abuse than non-disabled colleagues.
reported it			
	to believe that their organ	nisation provides equal op	pportunities for career progression or
promotion			
Staff with Disabilities	49.2%	47.3%	Of the responders of this question, there is a
Staff with No Disabilities	53.3%	54.0%	4.1% gap between disabled staff and non-
			disabled staff believing that the Trust
			provides equal opportunities for career
			progression or promotion, compared to a
			6.7% gap last year
Metric 6: Percentage of staff wh	no have felt pressure from	their manager to come	to work, despite not feeling well enough to
perform their duties	•	U	· · · · · · · · · · · · · · · · · · ·
Staff with Disabilities	31.0%	31.8%	Of the responders for this question, there is a
Staff with No Disabilities	21.6%	26.4%	gap of 9.4% where disabled staff feel more
			pressure to come to work by their manager
			when unwell than non-disabled staff.
Metric 7: Percentage of staff sa	tisfied with the extent to v	which their organisation v	
Staff with Disabilities	28.8%	33.6%	Of the responders of this question, staff with
Staff with No Disabilities	39.8%	43.3%	disabilities felt the organisation valued their
Stan with No Disabilities	00.070	+0.070	work less than staff with no disabilities.
Metric 8: Percentage of staff with	th a long lasting health or	podition or illness saving	their employer has made adequate
adjustment(s) to enable them to		indition of infess saying	anon ompioyor has made adequate
Staff with Disabilities	71.6%	76.8%	Of the responders to this question, the
Stall with Disabilities	/ 1.0 /0	10.0 /0	
			percentage dropped from 76.8% in 2020 to 71.6% in 2021 this is a decline of 5.2% from
			the previous year. As part of the Equality
			Act 2010 the Trust must ensure reasonable
			adjustments are provided to all staff as
			required either through Occupational Health
			or Access to Work (DWP).
Metric 9a: Staff engagement sc			
Staff with Disabilities	6.3	6.5	Of the responders to this question, the
Staff with No Disabilities	6.8	7.0	percentage decreased from previous year for
			both groups of employees, with disabled staff
			still showing slightly less level of engagement
			within the workforce. The results remain
			consistent over the past 2 years.
	•	•	· · ·

**Metric 10**: Board representation - Percentage difference between the organisation's board voting membership and its organisation's overall workforce.



As disclosure has improved, the Board level representation of members with a disability remains higher in comparison to the rest of the organisation.

## 5 Next Steps

The data provided in this report will be submitted online to NHS England no later than the 31<sup>st</sup> August 2022 (Appendix 1). In addition to the WDES data submission to NHS England the Trust is required to submit the WDES Summary report. The WDES Action Plan 2021/2022 has been reviewed and updated in collaboration with our Disability and Carer Staff Network (ESNAble – ESNEFT and Able) see Appendix 2. This will help to support the organisation to steer the disability equality agenda forward.

Alongside the network we have identified the following priorities and will work with the Equality, Diversity and Inclusion leads to ensure our revised WDES Action Plan focuses activity on:

- Improving staff disclosure of disability
- Addressing stigma associated with disability disclosure and widen understanding of what constitute as a disability
- Enabling disabled staff voices to be heard and valued at ESNEFT
- Supporting the engagement activities for disabled staff and non-disabled staff to learn about barriers
- Promotion and rollout of PurpleSpace
- Rollout of new EDI focused learning and development
- Continuation of work to support Level 3 Disability Confident status

The Trust is then required to publish our Board ratified 2021/22 WDES Annual report and WDES Action Plan on our website by 30 October 2022. This will be further defined by the Cultural Audit commencing in August 2022 which will enable operational areas to better understand their workforce profile in terms of disability.

## APPENDICES:

Appendix 1 WDES Data Submission Appendix 2 WDES Action Plan Page 7 of 17

## **APPENDIX 1 - WDES Data Submission**

				1			81 Mar.	#	%	
Metric	Indicator		Measure	# Disabled	% Disabled	# Non- disabled	% Non- disabled	Unknown/Nu	Unknown/Nu	Total
						disabled	disabled	II	II	
		1a) Non Clinical Staff	Uppedopunt			0		0		0
		Under Band 1 Bands 1	Headcount	0	0.0%	42	30.2%	97	69.8%	139
			Headcount	45	4.5%	42 599	59.7%		35.9%	1004
		Bands 2 Bands 3	Headcount	45	4.5%	393	68.6%	360	27.7%	573
		Bands 4	Headcount	21	5.8%	294	65.2%	139	29.0%	451
		Bands 5	Headcount	18	6.6%	174	63.7%	81	29.7%	273
		Bands 6	Headcount	4	3.0%	96	71.6%	34	25.4%	134
		Bands 7	Headcount	4	2.2%	132	71.4%	49	26.5%	185
		Bands 8a	Headcount	4	4.0%	73	72.3%	24	23.8%	101
		Bands 8b	Headcount	1	1.2%	52	62.7%	30	36.1%	83
		Bands 8c	Headcount	1	3.3%	23	76.7%	6	20.0%	30
		Bands 8d	Headcount	3	11.1%	15	55.6%	9	33.3%	27
		Bands 9	Headcount	0	0.0%	6	100.0%	0	0.0%	6
		VSM	Headcount	2	8.7%	13	56.5%	8	34.8%	23
		Other (e.g. Bank or Agency) Please specify in notes.	Headcount	0	0.774	0	50.576	0	34.07	0
		Cluster 1: AfC Bands <1 to 4	Auto-Calculated	92	4.2%	1328	61.3%	747	34.5%	2167
		Cluster 2: AfC bands 5 to 7	Auto-Calculated	26	4.4%	402	67.9%	164	27.7%	592
		Cluster 3: AfC bands 8a and 8b	Auto-Calculated	5	2.7%	125	67.9%	54	29.3%	184
		Cluster 4: AfC bands 8c to VSM	Auto-Calculated	6	7.0%	57	66.3%	23	26.7%	86
		Total Non-Clinical	Auto-Calculated	129	4.3%	1912	63.1%	988	32.6%	3029
		To Chincal Staff								
	Percentage of staff in AfC paybands or medical and dental	Under Band 1	Headcount	0		0		0		0
	subgroups and very senior managers (including Executive	Bands 1	Headcount	0		0		0		0
	Board members) compared with the percentage of staff in the overall workforce.	Bands 2	Headcount	36	2.94%	772	63.12%	415	33.93%	1223
	the overall workforde.	Bands 3	Headcount	15	2.34%	409	63.81%	217	33.85%	641
		Bands 4	Headcount	20	4.18%	287	59.92%	172	35.91%	479
		Bands 5	Headcount	45	2.24%	1223	61.00%	737	36.76%	2005
		Bands 6	Headcount	59	3.48%	946	55.84%	689	40.67%	1694
		Bands 7	Headcount	25	2.37%	575	54.40%	457	43.24%	1057
		Bands 8a	Headcount	3	1.30%	127	55.22%	100	43.48%	230
		Bands 8b	Headcount	1	1.82%	30	54.55%	24	43.64%	55
		Bands 8c	Headcount	0	0.00%	9	69.23%	4	30.77%	13
		Bands 8d	Headcount	0	0.00%	7	58.33%	5	41.67%	12
		Bands 9	Headcount	0	0.00%	2	50.00%	2	50.00%	4
		VSM	Headcount	0	0.00%	1	100.00%	0	0.00%	1
		Other (e.g. Bank or Agency) Please specify in notes.	Headcount	0		0		0		0
		Cluster 1: AfC Bands <1 to 4	Auto-Calculated	71	3.0%	1468	62.7%	804	34.3%	2343
		Cluster 2: AfC bands 5 to 7	Auto-Calculated	129	2.7%	2744	57.7%	1883	39.6%	4756
		Cluster 3: AfC bands 8a and 8b	Auto-Calculated	4	1.4%	157	55.1%	124	43.5%	285
		Cluster 4: AfC bands 8c to VSM	Auto-Calculated	0	0.0%	19	63.3%	11	36.7%	30
		Total Non-Clinical	Auto-Calculated	204	2.8%	4388	59.2%	2822	38.1%	7414
		Medical & Dental Staff, Consultants	Headcount	7	1.50%	91	19.49%	369	79.01%	467
		Medical & Dental Staff, Non-Consultants career grade	Headcount	0	0.00%	36	28.13%	92	71.88%	128
		Medical & Dental Staff, Medical and dental trainee grades	Headcount	1	0.17%	112	18.76%	484	81.07%	597
		Total Medical and Dental	Auto-Calculated	8	0.67%	239	20.05%	945	79.28%	1192
		Number of staff in workforce	Auto-Calculated	341	2.93%	6539	56.20%	4755	40.87%	11635

	Relative likelihood of non-Disabled staff compared to Disabled staff being appointed from shortlisting across all posts.	Number of shortlisted applicants	Headcount	461		5342		168		
	Note: i) This refers to both external and internal posts.	Number appointed from shortlisting	Headcount	99		1420		57		
	<ul> <li>ii) If your organisation implements a guaranteed interview scheme, the data may not be comparable with organisations that do not</li> </ul>	Likelihood of shortlisting/appointed	Auto-Calculated	0.21		0.27		0.34		
	operate such a scheme. This information will be collected on the WDES Online Survey to ensure comparability between organisations.	Relative likelihood of non-disabled staff being appointed from shortlisting compared to Disabled staff	Auto-Calculated	1.24						
	discription of a standard st	Average number of staff entering the formal capability process over the last 2 years. (i.e. Total divided by 2.)	Headcount	1.5		37.5		2.5		
		Likelihood of staff entering the formal capability process	Auto-Calculated	0.00		0.01		0.00		
	of the current year and the previous year (April 2019 to March 2020 and April 2020 to March 2021).	Relative likelihood of Disabled staff entering the formal capability process compared to Non-Disabled staff	Auto-Calculated	0.77						
	<ul> <li>b) Has your organisation taken action to facilitate the voices of your Disabled staff to be heard? (yes) or (no)</li> <li>Note: For your response to b):</li> <li>If yes, please provide at least one practical example of current action being taken in the relevant section of your WDES annual report. If no, please include what action is planned to address this gap in your WDES annual report. Examples can be found in the WDES 2019 Annual Report.</li> </ul>	Has your organisation taken action to facilitate the voices of your Disabled staff to be heard? (yes) or (no)	(yes) or (no)	Yes	•					
	Percentage difference between the organisation's Board voting	Total Board members	Headcount	3	15.79%	12	63.16%	4	21.05%	19
	membership and its organisation's overall workforce,	of which: Voting Board members	Headcount	2	14.29%	8	57.14%	4	28.57%	14
	disaggregated:	: Non Voting Board members	Auto-Calculated	1	20.00%	4	80.00%	0	0.00%	5
40	Dull the merchantic of the Densel	of which: Exec Board members	Headcount	2	20.00%	7	70.00%	1	10.00%	10
10	By Voting membership of the Board	: Non Executive Board members	Auto-Calculated	1	11.11%	5	55.56%	3	33.33%	9
	By Executive membership of the Board	Difference (Total Board - Overall workforce )	Auto-Calculated		13%		7%		-20%	
	,	Difference (Voting membership - Overall Workforce)	Auto-Calculated		11%		1%		-12%	
	This is a snapshot as of at 31st March 2020.	Difference (Executive membership - Overall Workforce)	Auto-Calculated		17%		14%		-31%	

Workforce I	Workforce Data and Representation – Metrics 1, 2, 3 and 10							
What actions do we need to take and why?	The actions within this section of the WDES action plan are focused on improving the workforce data, specifically staff declaration rates. These actions will also focus on supporting the organisation to understand the data which reflects the differences in experience for disabled and nondisabled staff. The data we have indicates that we need to focus on improving the disclosure rates of our disabled staff and representation of disabled staff across the organisation. We will be using our internal governance mechanism to monitor performance and manage any identified risks.							
Reference	Action to be taken	Responsible owner(s)	Due by date	Outcomes /KPI's				
1.1	Ensure that the WDES action plan is embedded into the POD Committee Assurance Framework	Director of People & OD	September 2022 – then bi-annual	• Twice-annual progress updates to be received by POD, risks identified and mitigation provided by the EDI Steering Group				
1.2	Develop performance data dashboard of WDES indicators for EDI Steering Group with quarterly updates presented to POD	Associate Director of OD and Culture/Head of EDI	September 2022 – then quarterly thereafter	<ul> <li>Quarterly progress updates to be received by POD Committee for assurance – with a clear analysis of data for WDES metrics undertaken by the EDI Steering Group</li> </ul>				
1.3	Develop a communications and engagement plan for WDES which is monitored by the EDI Steering Group	Associate Director of OD & Culture/Head of EDI/Associate Director of Comms/Chairs ESNAble	November 2022	<ul> <li>Clear organisational communication and engagement plan around disability and hidden disabilities as well as disclosure:</li> <li>Increased visibility on disability equality themes – e.g. communications on Mental Health Awareness, Autism, hidden disabilities</li> <li>Awareness and increase imagery of disabled people on internal external communications (e.g. Team ESNEFT News to feature regular updates on the WDES work underway)</li> <li>Intranet and Internet webpages update with Trust position on WDES</li> <li>Ensure that once the WDES Report is shared, that Head/Senior managers within each Unit have an active role, ie. return with suggested areas for improvement based on the learning taken from the current WDES findings.</li> </ul>				

What actions do we need to take and why?	actions will also focus on supporting nondisabled staff. The data we have i	the organisation to indicates that we n	understand the eed to focus on i	nproving the workforce data, specifically staff declaration rates. These data which reflects the differences in experience for disabled and mproving the disclosure rates of our disabled staff and representation of ernance mechanism to monitor performance and manage any identified
Reference	Action to be taken	Responsible owner(s)	Due by date	Outcomes /KPI's
Reference	Action to be taken	Responsible owner(s)	Due by date	Outcomes /KPI's
1.4	Align WDES communications with ESR awareness campaign to encourage staff to update personal data	Associate director of OD and Culture/Head of EDI/Workforce team/Associate Director of Communications	December 2022	<ul> <li>As per Action 1.3 above, arrange:</li> <li>Monthly campaign encouraging staff to update their personal information encouraging them to disclose disabilities</li> <li><u>Intended Plans</u></li> <li>Staff stories of diverse disabled staff across different disabilities captured, outlining positive experiences</li> <li>Increased visibility and awareness of disability equality across the Trust</li> </ul>
1.5	Introduce a three-year Reverse Mentoring programme for Senior leaders (Trust Board) in partnership with University of Nottinghamshire Phase 3 of the programme will focus on those colleagues with disabilities Reverse Mentoring - pairing a colleague with senior member of staff to provide insight to their experience and help senior staff understand what they can do to support all aspects of equality.	Trust Board Chair CEO and HR Director/ Associate Dir of OD & Culture/Head of OD/Head of EDI	, Autumn 2022	<ul> <li><u>Update:</u></li> <li>First cohort of the Reverse mentoring programme rolled out in March 2022*.</li> <li>Feedback from both Mentors and Mentees is captured during peer support and reflection sessions. Actions will be agreed at the end of the programme for the first cohort.</li> <li><u>Intended Plans/outcomes for future:</u> Senior Leaders who can confidently speak on key issues regarding inequalities and lived experiences. The programme will target senior leaders and middle managers</li> <li>*The long term plan with Reverse Mentoring is to continue it as a sustainable programme for all staff promoting real understanding of staff lived experience from ward to Board, visibility of issues across the</li> </ul>

What actions do we need to take and why?	actions will also focus on supporting nondisabled staff. The data we have	the organisation to indicates that we n	understand the eed to focus on	improving the workforce data, specifically staff declaration rates. These e data which reflects the differences in experience for disabled and improving the disclosure rates of our disabled staff and representation of vernance mechanism to monitor performance and manage any identified
Reference	Action to be taken	Responsible owner(s)	Due by date	Outcomes /KPI's
				organisation and better communication. Trained Mentors will then be supported through a Mentoring Network to provide "A Day in the Life of" opportunities to promote other careers and opportunities across the Trust.
1.6	<ul> <li>Bi-annual WRES / WDES report on the workforce data in relation to race by:</li> <li>Applications/ Shortlisting/ Recruitment</li> <li>Promotion/career progression/</li> <li>Secondment</li> <li>Employee relations case work</li> <li>Access to training &amp; development (non- Mandatory)</li> <li>Leavers/Turnover</li> <li>Sickness (short-term and long- term data)</li> </ul>	Head of Recruitment/ Head of Employee Relations/Head o EDI	f	<ul> <li>Update:         <ul> <li>EDI themed questions to be included in the values based questions for interview panels.</li> <li>Workforce EDI data is routinely reported, reviewed and appropriate actions undertaken Support with applications, interview preparation</li> </ul> </li> <li>Intended Plans/outcomes for future:         <ul> <li>In collaboration with Workforce Team and Assistant Director of Workforce Planning build a robust report covering widely recognised metrics for reporting on a monthly basis including those highlighted in the NHS People Plan and where possible including last month's/year's position</li> <li>Ensure that a CA or a Staff Networks Lead is part of the interviewing Panel.</li> </ul> </li> </ul>

What actions do we need to take and why?	The actions within this section of the WDES action plan are focused on improving the workforce data, specifically staff declaration rates. These actions will also focus on supporting the organisation to understand the data which reflects the differences in experience for disabled and nondisabled staff. The data we have indicates that we need to focus on improving the disclosure rates of our disabled staff and representation of disabled staff across the organisation. We will be using our internal governance mechanism to monitor performance and manage any identified risks.							
Reference	Action to be taken	Responsible owner(s)	Due by date	Outcomes /KPI's				
1.7	Undertake a data capture and analysis on disabled staff subject to ER interventions - specific focus on capability and sickness	Head of ER/Head of EDI /HRBPs	December 2022	<ul> <li>Reported and monitored on a monthly basis via the Workforce Performance Report to Performance Committee.</li> <li><u>Intended Plans</u></li> <li>Monthly reporting to divisions in order to improve organisational and divisional understanding of impact on disabled staff subject to these interventions through enhanced data regarding the type of disability and ER intervention</li> <li>Monitoring of key performance indicators for WDES and WRES</li> </ul>				
1.8	Quarterly analysis of shortlisted disabled applicants to appointment – vs non-disabled applicants Trust wide	Head of Recruitment/Hea of EDI	January 2022 d Quarterly review from Oct 22	<ul> <li>The following are now embedded as BAU however quarterly audits are recommended to identify any additional support:</li> <li>Interview training sessions provided in the community with guaranteed interview for all applicants.</li> <li>Inclusive job descriptions around role requirement and skills needed provided</li> <li>Search widened to include diverse groups and pools of talent</li> <li>Working group to ensure inclusive design of application process to make it as easy as possible for diverse range of applicants</li> <li>Trac system used to ensure shortlisting is unbiased</li> <li>Interviews process allows for reasonable adjustments</li> <li>Wherever possible Staff Networks included in interviews; inclusive interviews; set right tone; ask right questions. Trust to see support in assessing current bank of interview questions</li> <li>Understand the conversion rate from shortlisting to appointment for disabled candidates</li> </ul>				

Workforce D	Workforce Data and Representation – Metrics 1, 2, 3 and 10								
What actions do we need to take and why?	The actions within this section of the WDES action plan are focused on improving the workforce data, specifically staff declaration rates. These actions will also focus on supporting the organisation to understand the data which reflects the differences in experience for disabled and nondisabled staff. The data we have indicates that we need to focus on improving the disclosure rates of our disabled staff and representation of disabled staff across the organisation. We will be using our internal governance mechanism to monitor performance and manage any identified risks.								
Reference	Action to be taken	Responsible owner(s)	Due by date	Outcomes /KPI's					
				<ul> <li>Identify appropriate, targeted interventions including flexible working, job carving etc.</li> </ul>					

Staff Survey Indicators & Staff Engagement – Metrics 4, 5, 6, 7, 8, 9					
What actions do we need to take and why?	The actions in this part of the WDES action plan involve working to understand and explore the experience and perceptions of our disabled staff through wider staff engagement. This will also involve reviewing systems and processes to ensure that they improve disability equality. The WDES data indicates statistically significant variances (5% or more) for certain indicators between disabled and non-disabled staff.				
Reference	Action to be taken	Responsible owner(s)	Due by date	Outcomes /KPI's	
2.1	Support Disability & Carers' Staff Network(ESNABLE) through targeted support to: Develop an annual plan Promote active engagement with members and disabled staff	Head of EDI/ESNABLE Leads	February 2023	<ul> <li>Fully establish ESNABLE Network Meetings</li> <li>Attend Network Meetings once established</li> <li>EDI Steering Group to determine support required and best approach to engagement</li> <li>Support Network to agree Terms of Reference, role profiles for Chairs, recruitment drive for co-Chair, Deputy Chairs and other key members of Network Committee</li> <li>Vice Chair already confirmed, currently awaiting for approval to the new suggested Chair for ESNable.</li> </ul>	

What actions do we need to take and why?	The actions in this part of the WDES action plan involve working to understand and explore the experience and perceptions of our disabled staff through wider staff engagement. This will also involve reviewing systems and processes to ensure that they improve disability equality. The WDES data indicates statistically significant variances (5% or more) for certain indicators between disabled and non-disabled staff.				
Reference	Action to be taken	Responsible owner(s)	Due by date	Outcomes /KPI's	
				• Support Network to present a Business Plan on the upcoming initiatives and events, which are to be included in Diversity Calendar for coming year to EDI Steering Group	
2.2	Develop an Action Plan to achieve Disability Confident Leader	Head of EDI/ Head of Recruitment/Head of Communications and Engagement	January 2023 ongoing	<ul> <li>Disability Confident Employer status Level 2 attained –</li> <li>Set up a working group of key stakeholders from across the Trust including relevant external engagement to start the work towards attaining Disability Confident Leader Level 3</li> <li>Regular updates provided to EDI Steering Group</li> <li>Divisions to provide positive stories to the EDI Steering Group and POD Committee on the recruitment and career progression of disabled staff for internal and external communication</li> </ul>	
2.3	Design & deliver Disability Awareness training	Assistant Director of Training and Development/Head of EDI	January 2023	<ul> <li>Staff trained across the organisation to be Cultural Ambassadors capturing all protected characteristics</li> <li>Capture feedback from local community organisations to improve future programme of work</li> </ul>	
2.4	Identify a Board level Executive and Non-Executive sponsor for Disability to champion WDES and support the Disability Staff Carers' Network	Director of People & OD	January 2023	<ul> <li>Board Executive SRO was sought and met regularly with the ESNAble</li> <li>Network leads. Interim SRO to be identified for the period of September</li> <li>2022 to February 2023 to oversee the further work underway to support:</li> <li>Senior leaders to demonstrate visible commitment to disability</li> <li>equality through internal and external communications</li> </ul>	

What actions do we need to take and why?	y Indicators & Staff Engagement – Metrics 4, 5, 6, 7, 8, 9 The actions in this part of the WDES action plan involve working to understand and explore the experience and perceptions of our disabled staff through wider staff engagement. This will also involve reviewing systems and processes to ensure that they improve disability equality. The WDES data indicates statistically significant variances (5% or more) for certain indicators between disabled and non-disabled staff.				
Reference	Action to be taken	Responsible owner(s)	Due by date	Outcomes /KPI's	
				• Senior leaders trained and competent to discuss and promote inclusion for disabled staff at Board and other senior-level committees in the Trust	
2.5	Deliver a series of FTSU/Wellbeing Listening Events for staff to discuss disability, carer's concerns	FTSU Guardian, Head of Wellbeing, Head of EDI and Head of Communications & Engagement, ESNable Staff Network Chairs	March 2023	<ul> <li>Long Covid Support Group commenced</li> <li><u>Intended Plans</u></li> <li>Webinars commenced to gain:-</li> <li>Greater understanding of the challenges our disabled staff and those that are carers are experiencing</li> <li>Improved staff experience and capture of staff stories to share with Trust Board, the POD Committee and the EDI Group</li> </ul>	
	Align ESNEFT FTSU policy with revised National Guardian Strategy	Freedom to Speak Up Guardian	December 2022	ESNEFT FTSU policy is now being reviewed to ensure alignment with National policy which was published in July 2022.	
	Ensure that within ESNEFT every member of staff, whatever geographical location, knows how to access Freedom to Speak Up Guardian	Freedom to Speak Up Guardian	Completed and embedded as BAU	<ul> <li>FTSU intranet page refreshed with contact details of the 7 Assistant FTSUs</li> <li>Poster campaign targeting all departments with contact details and related support agencies</li> <li>Regular input through ESNEFT News will continue</li> </ul>	
	Identify a recording tool allowing input from multiple agencies protecting confidentiality for	Associate Director of OD & Culture, Head of Wellbeing,	Completed and	• Reviewed as part of monthly MDT meeting including OH to ensure we are identifying trends, hotspots and any links to Sis, etc.	

Staff Survey Indicators & Staff Engagement – Metrics 4, 5, 6, 7, 8, 9					
What actions do we need to take and why?	d to data indicates statistically significant variances (5% or more) for certain indicators between disabled and non-disabled staff.				
Reference	Action to be taken	Responsible owner(s)	Due by date	Outcomes /KPI's	
	individuals to allow oversight of use of service as well as identify hotspots and triangulation with other risk tools (Datix/Greatix)	Head of EDI, Freedom to Speak Up Guardian	embedded as BAU	<ul> <li>Data now being collated across MDT which is reviewed and discussed with identified actions at monthly MDT meetings</li> </ul>	
2.6	Provide better access to the Department of Work Access to Work: Workplace Accommodations (previously Reasonable Adjustments) programme	AD of Culture and OD, Head of Occupational Health, Head of EDI, AD of Communications, ESNable Staff & Carers' Network	March 2023 December 2023	<ul> <li>Intended Plan</li> <li>Process designed and communicated for provision of workplace</li> <li>accommodations and associated support mechanisms (e.g. Flexible</li> <li>working)</li> <li>Targeted training to be provided to HRBPS and Managers to support</li> <li>staff with reasonable adjustments in the work place and signposting</li> <li>staff with disabilities to provisions provided by DWP</li> <li>Reviewing pilot role with ICS for Reasonable Adjustments Lead</li> </ul>	