

COVERSHEET	
Meeting	Board of Directors' meeting in PUBLIC
Paper Title	Equality, Diversity and Inclusion Strategy incl. 1. Workforce Disability Equality Standard (WDES) Annual Report 2020 2. Workforce Race Equality Standard (WRES) Annual Report 2020
Date of meeting	8 October 2020
Date paper was written	28 September 2020
Responsible Director	Rhia Boyode, Acting Workforce Director
Author	Kal Parkash Equality, Diversity & Inclusion Lead
Presented by	Rhia Boyode, Acting Workforce Director
Executive Summary	
<p>We are delighted to publish our new Equality, Diversity and Inclusion Strategy for the next three years. This strategy builds on our work in this area over the last 6 months and is underpinned by our people strategy and our values. It provides a blueprint for creating an inclusive environment for all our staff, and also provides a framework to ensure that we deliver an appropriate and inclusive service to patients on each and every contact.</p> <p>To deliver excellent care to the communities we serve is at the forefront of everything we do at The Shrewsbury and Telford NHS Trust and as an inclusive organisation, we benefit greatly from the creativity and talents of all our people. The principles of equality, diversity and inclusion must be embedded in our day to day practice, so we no longer think of it in isolation but as an integral part of what we do.</p> <p>We want our services to be fair, accessible and appropriate for our patients, their carers' and visitors, and we wish to demonstrate the strides we are making not only to embed equality within our world class care values, but also equity.</p> <p>The WDES standard (Appendix 1) and WRES (Appendix 2) is a set of specific measures (metrics) which enables NHS organisations to compare the workplace and career experiences of Disabled and non-disabled staff and BME and White staff. NHS trusts use the metrics data to develop and publish an action plan which is within each appendix.</p> <p>Year on year comparison enables trusts to demonstrate progress against the indicators of disability and race equality. We have had to submit our data on line and develop our action plans in response to the analysis and findings.</p> <p>The Board is asked to note the annual report and approve the strategic approach to promoting Equality, Diversity and Inclusion for publication.</p>	
Previously considered by	Workforce Assurance Group

The Board (Committee) is asked to:

Link to CQC domain:				
<input checked="" type="checkbox"/> Safe	<input checked="" type="checkbox"/> Effective	<input checked="" type="checkbox"/> Caring	<input checked="" type="checkbox"/> Responsive	<input checked="" type="checkbox"/> Well-led

Link to strategic objective(s)	<input checked="" type="checkbox"/> PATIENT AND FAMILY Listening to and working with our patients and families to improve healthcare <input checked="" type="checkbox"/> SAFEST AND KINDEST Our patients and staff will tell us they feel safe and received kind care <input checked="" type="checkbox"/> HEALTHIEST HALF MILLION Working with our partners to promote 'Healthy Choices' for all our communities <input checked="" type="checkbox"/> LEADERSHIP Innovative and Inspiration Leadership to deliver our ambitions <input checked="" type="checkbox"/> OUR PEOPLE Creating a great place to work
Link to Board Assurance Framework risk(s)	BAF 423 IF we do not have positive staff engagement THEN we cannot support a culture of safety and continuous improvement.

Equality Impact Assessment	<input checked="" type="radio"/> Stage 1 only (no negative impact identified) <input type="radio"/> Stage 2 recommended (negative impact identified and equality impact assessment attached for Board approval)
Freedom of Information Act (2000) status	<input checked="" type="radio"/> This document is for full publication <input type="radio"/> This document includes FOIA exempt information <input type="radio"/> This whole document is exempt under the FOIA
Financial assessment	No financial impact

<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Receive	<input type="checkbox"/> Note	<input checked="" type="checkbox"/> Take Assurance
To formally receive and discuss a report and approve its recommendations or a particular course of action	To discuss, in depth, noting the implications for the Board or Trust without formally approving it	For the intelligence of the Board without in-depth discussion required	To assure the Board that effective systems of control are in place

Main Paper
Situation
<p>This purpose of the strategy and the annual report is to bring you the, current position and planned work on Equality, Diversity and Inclusion within the Trust and the wider NHS, in line with our People Strategy.</p> <p>The Trust's commitment to Equality and Diversity and Inclusion underpins all our activities, within service delivery, employment and our involvement with the wider community. For us, it is respect for the individual person which is our key belief. We recognised that individuals have a range of needs and identities and we aim to take a broad and inclusive approach.</p> <p>We are committed to eliminating discrimination and promoting equality of opportunity in all we do.</p>
Background
<p>The Equality, Diversity and Inclusion Strategy addresses the Trusts approach to ED&I and the provisions of the Equality Act 2010 as part of the People Strategy 2019-2022</p> <p>In developing this strategy we have engaged with managers, staff and external stakeholders, both face to face and virtually, to test our ambition and to ensure that the objectives we set are realistic and relevant.</p> <p>This strategy has been developed using a range of sources, resources and activities, including:</p> <ol style="list-style-type: none"> 1. Quantative data and qualitative information we collect and monitor for our patient and workforce 2. Feedback through our engagement, involvement and survey activities with patients, the public and other stakeholders 3. Our assessment and progress against national frameworks and requirements such as the NHS Equality Delivery System and the NHS Workforce Race Equality Standard 4. The monitoring and review of our previous objectives 5. Feedback through the annual staff survey and our local staff engagement activities 6. National drivers, good practice guidance and benchmarking with other NHS organisations <p>We recognise, achieving the culture change required to deliver our ambition will take time. The early years will be about building the foundations to facilitate this change.</p>
Assessment
<p>The Trust strives to deliver safe, accessible and fair services to the diverse populations that we serve, and ensure that they are treated with dignity and respect.</p> <p>The Trust values its workforce and wants to create environments in which everyone is able to reach their full potential, thrive and deliver equitable services. There is also a link between the level of staff engagement and positive patient outcomes.</p> <p>The Trust recognises that some people may face unintended barriers presented by our working practices and in accessing our services. People have the right to be treated fairly</p>

by having their needs met as much as possible and where appropriate, therefore, some people may need support.

The Trust is committed to creating a culture of openness and transparency. As a requirement of the Public Sector Equality Duty, the Trust must capture a range of equality related information and report on it.

Recommendation

The Trust recognises the importance of embedding Equality, Diversity and Inclusion principles and practices throughout the organisation. The Trust wants our service users, the local population and our workforce to be confident about our commitment to eliminating discrimination, bullying, harassment, victimisation and promoting equality, whether they are service users or part of the workforce providing those services.

The Board is asked to note the annual report and approve the strategic approach to promoting Equality, Diversity and Inclusion for publication.

Equality, Diversity & Inclusion Strategy



Equality, Diversity & Inclusion Strategy

The Shrewsbury and Telford Hospital NHS Trust is the main provider of district general hospital services for nearly half a million people in Shropshire, Telford & Wrekin and mid Wales. Our main service locations are the Princess Royal Hospital in Telford and the Royal Shrewsbury Hospital in Shrewsbury.

Both hospitals provide a wide range of acute hospital services including accident & emergency, outpatients, diagnostics, inpatient medical care and critical care.

The Trust has a workforce of over 6,000 clinical and non-clinical professionals, working across a variety of roles, in Shropshire, Telford and Wrekin which is the largest landlocked rural county in England.

The Equality, Diversity and Inclusion strategy sets out our key objectives as well as our governance structure to ensure we deliver our objectives. It will be our **'everyday behaviours'** of all people which will drive work and make the difference. In delivering against the statutory duty we will broaden our thinking, recognising that society is constantly changing and we have an imperative to ensure we are responsive to issues such as **intersectionality, gender fluidity and neuro-diversity and closing the gender and ethnicity pay gap.**

Good health and wellbeing of our staff is vital and we support all of our staff to be as well as they can be, ensuring that they feel able to bring their **'whole self'** to work.

Through our equality, diversity and inclusion work we will look to promote our values at every opportunity and specifically to:

- Engender a **sense of belonging** for all by creating an environment where we value unique differences.
- Improve our service proposition by **listening and engaging better** with our patients and communities and developing 'diversity of thought' in our service delivery.

This strategy will be closely aligned to our new People strategy and our Organisational Development Strategy and will have a key focus on enhancing staff engagement to maximise on the power and added value of staff networks to help drive and shape the organisational culture.

Why we need an equality, diversity and inclusion strategy

- To ensure all staff live and breathe the **Trust values** and are valued for their unique difference
- To demonstrate equitable and **fair processes** and that all staff feel valued and able to challenge discrimination
- To support the mechanisms in place to create, maintain and sustain a diverse and **talented workforce.**
- To ensure all patients receive the **best quality care** regardless of their protected characteristics

This new strategy will outline our new way of thinking and embracing equality, diversity and inclusion



Equality, Diversity & Inclusion Strategy

Our Values

These values are at the core of everything we do. They help shape our behaviours and thinking, leading to better outcomes for our patients and staff.



Equality, Diversity and Inclusion – the legal and regulatory requirements

Under the Equality Act 2010, the Public Sector Equality Duty (PSED) requires all public bodies to consider all individuals when carrying out their day-to-day work - in shaping policy, in delivering services and in relation to their own employees. We must demonstrate **'due regard'** to the three aims of the general duty of the Equality 2010 which are

- eliminate unlawful discrimination, harassment or victimisation
- advance equality of opportunity between people who share protected characteristics and people who do not share them
- foster good relations between people who share protected characteristics and people who do not share them

Links to our new People Strategy

At the heart of our work is our commitment to make SaTH a better and fairer place for all staff - whatever their background or needs.

Equality, diversity and inclusion are at the center of the People Strategy, with a clear focus as a priority, on the Year 1 actions outlined in relation to attraction, engagement, and development of staff as well as ensuring that the needs of our patients are better understood and met. We have established a new Black and Minority Ethnic staff network for the Trust and will work with our staff to establish our Disability and LGBTQ+ Networks

This strategy also underpins the activities outlined in the new Recruitment and Retention strategy, with a particular focus on recruitment and retention of our International Nurses. We have initiated some key work via our On-Boarding team to ensure our international nurses feel valued, supported and able to integrate into their new communities, in and out of work

The Equality Act 2010 protects anyone who falls into a 'protected characteristic':

- Age
- Disability
- Gender re-assignment
- Marriage & civil partnership
- Pregnancy and maternity
- Race
- Religion & Belief
- Sex
- Sexual orientation

Equality Delivery System (ESD2)

NHS organisations are required to complete the Equality Delivery System (NHS2) framework and assessment and to review it annually. This provides a comprehensive approach to demonstrating commitment to, and compliance with, legal requirements and continuing improvement in genuine involvement and participation of our service users and staff in the equality and diversity agenda.

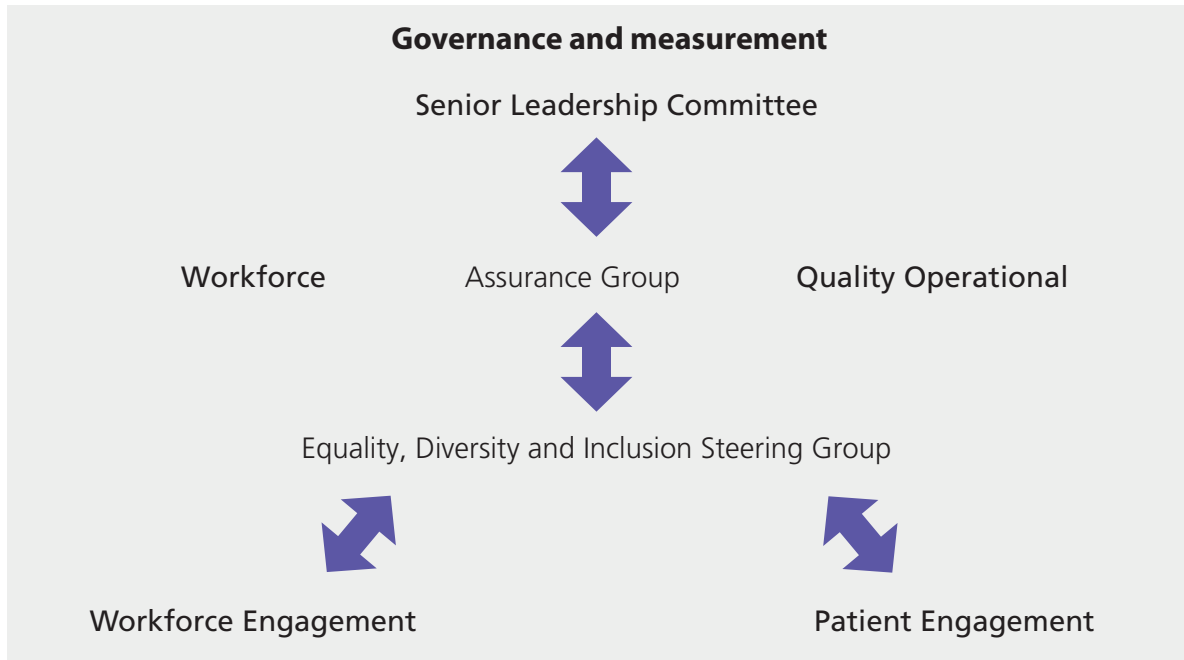
EDS 2 Aims

- Better health outcomes for all
- Improved patient access and experience
- Empowered, Engaged and Well-Supported Staff
- Inclusive Leadership at All Levels

In line with EDS (2), we will embed a robust governance structure to map our journey and drive performance and positive outcomes. We will also enhance our stakeholder and patient participation to reflect the diversity of our patients and service users, developing inclusive and accessible communication and engagement tools.

Equality, Diversity & Inclusion Strategy

We also are required to report annually on our Workforce Disability Standard and Workforce Race Equality Standard to provide an overview of our implementation and progression plans



Equality, Diversity and Inclusion Steering Group

The new **Equality, Diversity and Inclusion Steering Group**, will drive this area of work and ensure that it is working alongside our Sustainability Transformation Partnership (STP) to make our E, D & I work cut across the wider services.

This group will provide oversight of progress against the equality objectives to the Trust Board via the Workforce Committee and the Quality and Safety Committee and it will focus on the distinct areas outlined below:

Workforce - aim is to ensure our staff create a positive working environment and promote a culture of trust where our people work together, and feel motivated and confident to challenge and be innovative. A key objective is to recruit and retain a workforce which is representative of the communities we serve, and to provide an environment that values the differences people bring with them, where they feel safe and supported throughout their career

Patients - aim is to ensure that we are working with our key partners to provide the best possible service to our communities, ensuring everyone has fair access to all services and treating everyone with respect at all times. The group will engage across Shropshire and Telford in order to deliver a service which meets the needs of communities, especially those that are seldom heard

Equality, Diversity & Inclusion Strategy

Steps to success:

Step 1 - Evaluate and review our current position, including our structures and resources for E,D & I

Step 2 - Strategic E, D & I Group will develop the action plan attached, based on recommendations from the CQC inspection, our Workforce Race Equality and Workforce Disability Equality action plans, Staff Survey, Patient feedback and internal feedback such as the Freedom to Speak Up Guardians

Step 2 - We will set out a clear E, D & I communication and engagement strategy for our workforce

Step 3 - Refresh and publish our Equality Objectives

Step 4 - We will establish regular reporting cycle to the Workforce Committee and the Trust Board

Measures of Success:

Measure 1 - Positive CQC Inspection findings

Measure 2 - Improved annual Staff Survey feedback

Measure 3 - Positive Patient/Carer feedback

Measure 4 - Better workforce representation/retention

Measure 5 - Upward trend to reduced Pay & Ethnicity Gap

Our Equality Objectives (draft)

Engage to create inclusive healthcare

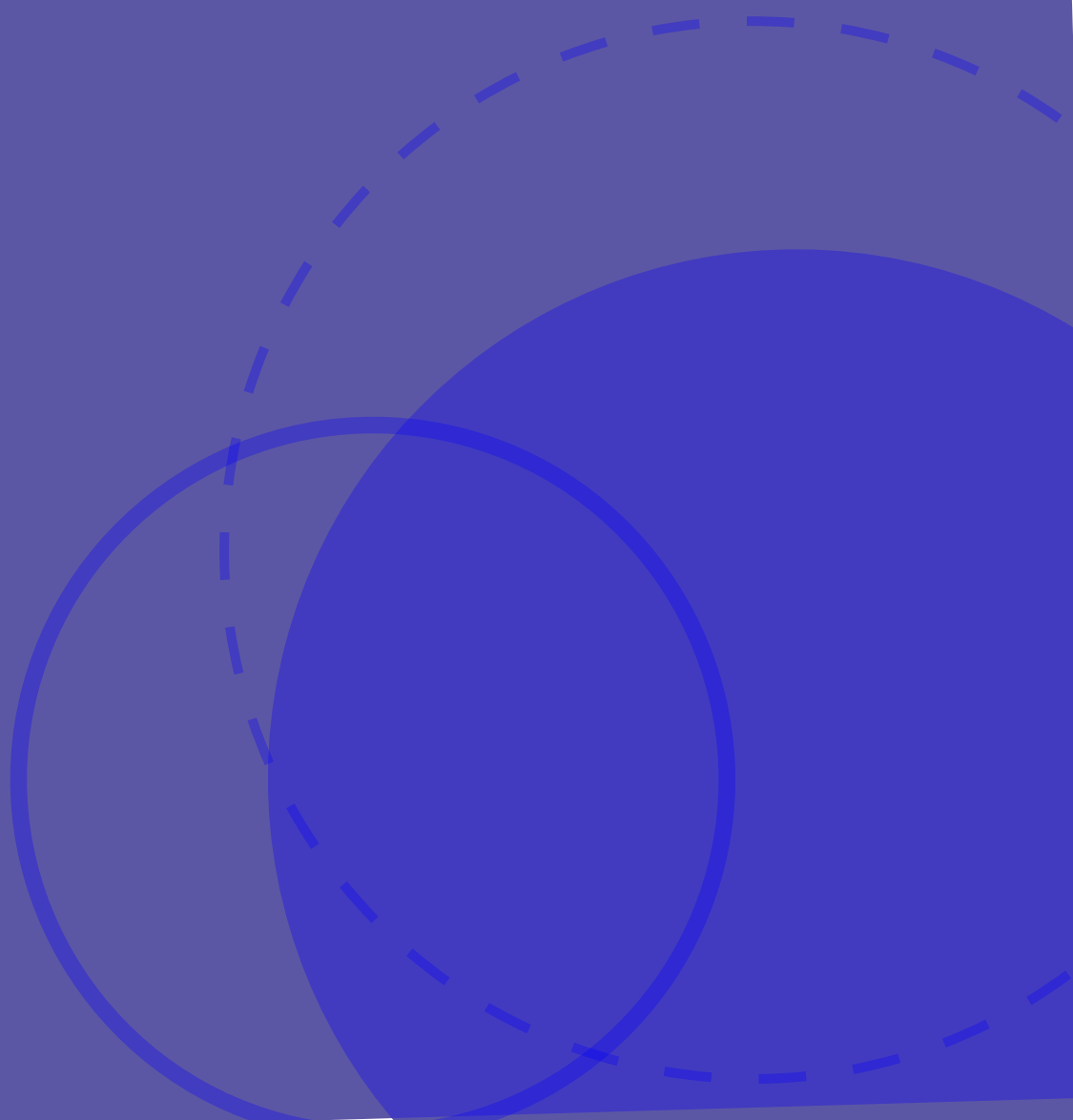
- Develop our Trust Board and Senior Leadership as E, D & I champions.
- Meaningful and targeted patient engagement and data collection, driving service improvement to reduce health inequality.
- Establish our staff networks and patient group to help shape our services and culture.

Empower to achieve

- Engender of culture where staff feel a shared sense of belonging
- Culturally enrich our organisation by reflecting the diverse communities we serve.
- Enrich our Organisational Development offer, so staff are informed and empowered.

Embed and celebrate

- Develop an E,D & I Reward and Recognition framework for the Trust
- Seek external accreditation to demonstrate continuous improvement (e.g. Stonewall, Disability Confident)
- Annual E,D& I conference



NHS WORKFORCE DISABILITY EQUALITY STANDARD (WDES)

ANNUAL REPORT 2020



WDES ANNUAL REPORT 2020

INTRODUCTION

The WDES is a set of ten specific measures (metrics) which enables NHS organisations to compare the workplace and career experiences of Disabled and non-disabled staff. NHS trusts use the metrics data to develop and publish an action plan. Year on year comparison enables trusts to demonstrate progress against the indicators of disability equality.

This report is produced from the SaTH data returns submitted from the Trust ESR data in March 2020 and from the 2019 Staff Survey. It is produced in a nationally mandated format as submitted to NHS England and covers data and report-ed experience from 2019-20.

The WDES demonstrates our clear commitment in developing the SaTH to be an exemplar employer and in supporting the UK Government's aims of increasing the number of Disabled people in employment.

Attached to this report as appendices, is data and the online report we have submitted.

EXECUTIVE SUMMARY

We are committed to developing our Equality, Diversity and Inclusion work programme and recognise that during 2018-2019, the period to which this report relates, that the lack of a dedicated lead to drive this area of work, has impacted upon the pace of change and our ability to embed our work.

We want SaTH to be a workplace where staff feel a sense of belonging and are encouraged to bring their whole self to work, without fear or feeling unsafe or unsupported.

It is reassuring to see that our workforce demographic is changing. We appreciate that sharing information about a disability, seen or hidden, or any health condition can be difficult but we want to encourage more staff to do so. As a responsible employer, we want to support and enable our staff to be the best they can be at work.



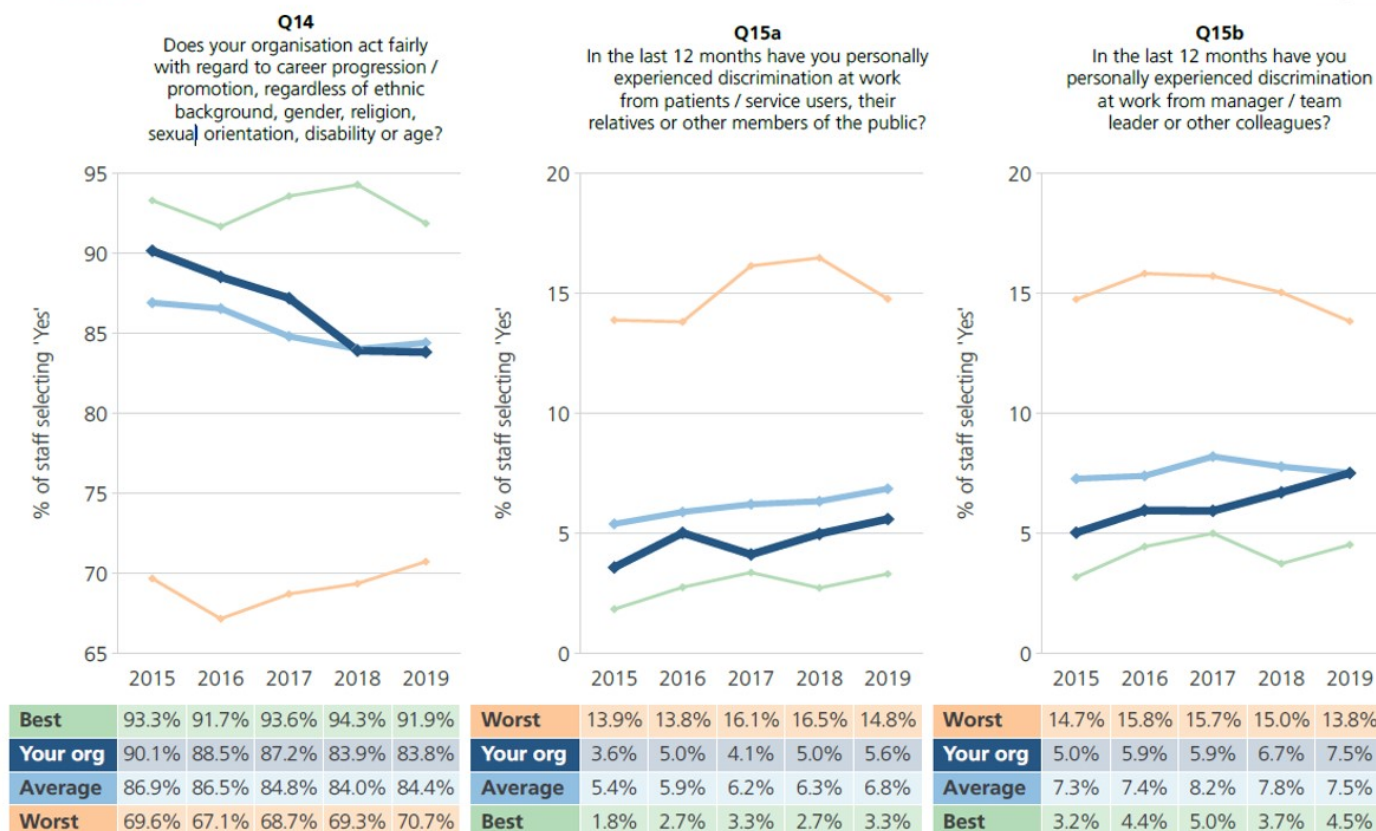
WDES PROGRESS IN 2019/20

Staff Survey Findings:

Survey
Coordination
Centre

2019 NHS Staff Survey Results > Theme results > Detailed information > Equality, diversity & inclusion 1/2

NHS
England



WDES FINDINGS

Positive staff survey feedback: WDES

- Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months has **decreased from 37.3% to 29.2%**
- Percentage of staff who have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties has **decreased from 34.8% to 30.2%**

- Percentage of staff satisfied with the extent to which their organisation values their work **increased from 29% to 37%**

Areas of special concern identified relate to the experience of colleagues with disabilities include:

- harassment and bullying internally
- shortlisting and appointment of disabled applicants

CONCLUSION AND NEXT STEPS

Having a dedicated lead has allowed us to identify key priorities and make some genuine progress at SaTH, our new staff network being a great example.

During COVID-19 pandemic, our staff have had to adopt new ways of working, meeting and delivering our services and the health and wellbeing of our staff is at the fore front of our minds. We are very conscious that staff have been feeling vulnerable, unsettled and concerned for themselves, their family and friends.

Staff engagement is a priority and communicating clearly and in ensuring messages are accessible for all staff has been a real focus.

Working with our staff, and in line with our new People Strategy, we are developing a new behaviours framework linked to our new vision and values. We will continue to listen to our staff and address the issues concerning bullying and harassment and review our recruitment selection processes to identify and implement improvements.

Using the findings of the staff survey and our ESR data, we will work with our new staff network to deliver the agreed actions detailed in our action plan.



WDES ANNUAL REPORT 2020

APPENDIX 1: WDES METRICS REPORT

Detailed below is the organisation's WDES data which was submitted in August 2020 covering the period April 2019- March 2020.

Metric 1 Percentage of staff in AfC pay bands or medical and dental subgroups and very senior managers (including executive board members) compared with the percentage of staff in the overall workforce.

(Data source: ESR).

1a. Non-clinical workforce

	Disabled staff in 2019	Disabled staff in 2020	Disabled staff in 2019/2020	Non-disabled staff in 2019	Non-disabled staff in 2020	Non-disabled staff in 2019/2020	Unknown/null staff in 2019	Unknown/null staff in 2020	Unknown/null staff in 2019/2020	Total staff in 2019	Total staff in 2020
	Percentage (%)	Percentage (%)	% points difference (+/-)	Percentage (%)	Percentage (%)	% points difference (+/-)	Percentage (%)	Percentage (%)	% points difference (+/-)	Headcount	Headcount
Cluster 1 (Bands 1 - 4)	3%	3%	-	78%	80%	-2%	19%	17%	-2%	1144	1178
Cluster 2 (Band 5 - 7)	3%	3%	-	78%	80%	-2%	19%	17%	-2%	271	296
Cluster 3 (Bands 8a - 8b)	1%	2%	+1	84%	85%	-1%	15%	13%	+2%	68	73
Cluster 4 (Bands 8c - 9 & VSM)	-	5%	+5%	91%	91%	-	9%	4%	+5%	41	49

1b. Clinical workforce

	Disabled staff in 2019	Disabled staff in 2020	Disabled staff in 2019/2020	Non-disabled staff in 2019	Non-disabled staff in 2020	Non-disabled staff in 2019/2020	Unknown/null staff in 2019	Unknown/null staff in 2020	Unknown/null staff in 2019/2020	Total staff in 2019	Total staff in 2020
	Percentage (%)	Percentage (%)	% points difference (+/-)	Percentage (%)	Percentage (%)	% points difference (+/-)	Percentage (%)	Percentage (%)	% points difference (+/-)	Headcount	Headcount
Cluster 1 (Bands 1 - 4)	3%	3%	-	80%	82%	+2%	17%	15%	-2%	1512	1658
Cluster 2 (Band 5 - 7)	3%	3%	-	78%	82%	+4%	19%	15%	-4%	2277	2379
Cluster 3 (Bands 8a - 8b)	1%	1%	-	76%	80%	+4%	23%	19%	-4%	136	156
Cluster 4 (Bands 8c - 9 & VSM)	0	0	-	92%	87%	+5%	8%	13%	+5%	26	22
Cluster 5 (Medical and Dental staff, Consultants)	0	0.3%	-	84%	85.7%	+1%	16%	13.92%	+3%	256	273
Cluster 6 (Medical and Dental staff, Non-consultant career grade)	0	1.69%	-	96%	94.38%	-2%	4%	3.93%	-	156	178
Cluster 7 (Medical and Dental staff, Medical and Dental trainee grades)	7%	3.02%	-4%	91%	94.7%	+3%	2%	2.01%	-	190	199

WDES ANNUAL REPORT 2020

Metric 2 – Relative likelihood of Disabled staff compared to non-disabled staff being appointed from shortlisting across all posts

(Data source: Trust's recruitment data)

	Relative likelihood in 2019	Relative likelihood in 2020	Relative likelihood difference (+/-)
Relative likelihood of non-disabled staff being appointed from shortlisting compared to Disabled staff	1.92	1.36	-0.32

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.

(Data source: Trust's HR data)

	Relative likelihood in 2018/19	Relative likelihood in 2019/20	Relative likelihood difference (+/-)
Relative likelihood of Disabled staff entering formal capability process compared to non-disabled staff	Not Collected	1.95	

Metric 4 – Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse.

(Data source: Question 13, NHS Staff Survey)

	Disabled staff responses to 2018 NHS Staff Survey	Non-disabled staff responses to 2018 NHS Staff Survey	% points difference (+/-) between Disabled staff and non-disabled staff responses 2018	Disabled staff responses to 2019 NHS Staff Survey	Non-disabled staff responses to 2019 NHS Staff Survey	% points difference (+/-) between Disabled staff and non-disabled staff responses 2019
	Percentage (%)	Percentage (%)		Percentage (%)	Percentage (%)	
4a) Staff experiencing harassment, bullying or abuse from patients/ service users, their relatives or other members of the public in the last 12 months	37.3%	26.7%	+10.6%	29.2%	24.8%	+4.4%
4b) Staff experiencing harassment, bullying or abuse from managers in the last 12 months	24.6%	11.9%	+12.7%	24.8%	12.6%	+12.2%
4c) Staff experiencing harassment, bullying or abuse from other colleagues in the last 12 months	25.5%	18%	+7.5%	32.6%	18.6%	+14%
4d) Staff saying that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it in the last 12 months	41.4%	39.1%	+2.3%	39.4%	41.3%	-1.9%

WDES ANNUAL REPORT 2020

Metrics 5 – 8

(Data source: Questions 14, 11, 5, 28b, NHS Staff Survey)

	Disabled staff responses to 2018 NHS Staff Survey	Non-disabled staff responses to 2018 NHS Staff Survey	% points difference (+/-) between Disabled staff and non-disabled staff responses 2018	Disabled staff responses to 2019 NHS Staff Survey	Non-disabled staff responses to 2019 NHS Staff Survey	% points difference (+/-) between Disabled staff and non-disabled staff responses 2019
	Percentage (%)	Percentage (%)		Percentage (%)	Percentage (%)	
Metric 5 - Percentage of Disabled staff compared to non-disabled staff believing that the trust provides equal opportunities for career progression or promotion.	76.2%	85.4%	-9.2%	75.9%	85.4%	-9.5%
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.	34.8%	21.3%	+10.5%	30.2%	22.4%	+7.8%
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.	29%	41%	-12%	37%	41.6%	-4.6%
Metric 8 - Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work.		N/A	N/A		N/A	N/A

Metric 9 – Disabled staff engagement

(Data source: NHS Staff Survey)

	Disabled staff engagement score for 2018 NHS Staff Survey	Non-disabled staff engagement score for 2018 NHS Staff Survey	Difference (+/-) between disabled staff and non-disabled staff engagement scores 2018	Disabled staff engagement score for 2019 NHS Staff Survey	Non-disabled staff engagement score for 2019 NHS Staff Survey	Difference (+/-) between Disabled staff and non-disabled staff engagement scores 2019
a) The staff engagement score for Disabled staff, compared to non-disabled staff.	6.1	6.7	-.6	6.2	6.7	-.5

b) Has your trust taken action to facilitate the voices of Disabled staff in your organisation to be heard? (Yes)

Please provide at least one practical example of action taken in the last 12 months to engage with Disabled staff.

Example 1: New Staff with Disabilities Network established to help shape and drive the work programme for SaTH

Example 2: Disability /Health Passport to support Health and Wellbeing of our staff and assist with any reasonable adjustments required.

WDES ANNUAL REPORT 2020

Metric 10 – Percentage difference between the organisation's board voting membership and its organisation's overall workforce

(Data source: NHS ESR and/or trust's local data)

Data not held by SaTH ESR at present

	Disabled Board members in 2019	Non-disabled Board members in 2019	Board members with disability status unknown in 2019	% points difference (+/-) between Disabled Board members and Disabled staff in overall workforce	Disabled Board members in 2020	Non-disabled Board members in 2020	Board members with disability status unknown in 2020	% points difference (+/-) Between Disabled and non-disabled Board members in 2020
	Percentage (%)	Percentage (%)	Percentage (%)		Percentage (%)	Percentage (%)		
Percentage difference between the organisation's Board voting membership and its organisation's overall workforce, disaggregated by Exec/non-exec and Voting/non-voting.	Exec =	Exec =	Exec =	Total Board =	Exec =	Exec =	Exec =	Total Board =
	Non-exec =	Non-exec =	Non-exec =	Overall workforce =	Non-exec =	Non-exec =	Non-exec =	Overall workforce =
	Voting =	Voting =	Voting =	Difference =	Voting =	Voting =	Voting =	
	Non-voting =	Non-voting =	Non-voting =		Non-voting =	Non-voting =	Non-voting =	Difference = percentage points

WDES ANNUAL REPORT 2020

APPENDIX 2: WDES ACTION PLAN 2020/21

WDES Action Plan 2020-2021

Objective	Intention	Responsibility	By
<p>Develop the new Staff with Disabilities staff network and seek Chair/Co -Chair from within the network.</p> <p>Ensure members feel supported and encouraged to participate.</p> <p>Develop a robust communications and marketing plan for the networks and highlight that not all disabilities are visible</p>	To increase staff voice and engagement from key staff groups	Equality, Diversity & Inclusion Lead	Dec 2020
Conduct confidential survey and Listening Events of Staff with Disabilities in conjunction (FTSU) Guardians.	To increase staff voice and engagement from key staff groups and understand the harassment and bullying figures	Equality Diversity & Inclusion Lead & FTSU Lead	February 2021
Embed the new 'Health Passport' and ensure provide guidance for managers	To improve the experiences of our staff with disabilities	Head of Employee Relations	April 2021
<p>Campaign to raise awareness of Hidden Disabilities:</p> <p>Workforce messages and displays</p> <p>Training for staff</p>	To increase awareness and be more supportive of colleagues	Equality ,Diversity & Inclusion Lead & Communications Lead	Dec 2020
Statutory and Mandatory Training to be developed to support staff who have Special Educational Needs	To improve understanding and awareness, creating a more inclusive organisation	Head of Workforce Transformation, ODU and Workforce Equality, Diversity & Inclusion Lead	April 2021
To review Level 1 of the Disability Confident Scheme and draft action plan with new Network, to move to Level 2	Demonstrate commitment to inclusive workplace and supporting our workforce	Head of Recruitment & Equality Diversity & Inclusion Lead	Aug 2021
Review Implement Diversity elements of Leadership Academy and Manager Training.	To ensure our managers and Leaders are skilled and trained in diversity management.	Head of Workforce Transformation, ODU and Workforce Equality, Diversity & Inclusion Lead	April 2021



NHS WORKFORCE RACE EQUALITY STANDARD (WRES)

ANNUAL REPORT 2020



WRES ANNUAL REPORT 2020

INTRODUCTION

The WRES is a set of specific measures (metrics) which enables NHS organisations to compare the workplace and career experiences of our black, Asian and minority ethnic (BAME) and White staff. NHS trusts use the metrics data to develop and publish an action plan. Year on year comparison enables trusts to demonstrate progress against the indicators of race equality.

This report is produced from the SaTH data returns submitted from the Trust ESR data in March 2020 and from the 2019 Staff Survey. It is produced in a nationally mandated format as submitted to NHS England and covers data and reported experience from 2019-20.

The WRES demonstrates our clear commitment in developing the SaTH to be an exemplar employer and in supporting the UK Government's aims of increasing representation in the workplace to ensure employees from Black, Asian and minority ethnic backgrounds have equal access to career opportunities and receive fair treatment in the workplace.

EXECUTIVE SUMMARY

We are committed to developing our Equality, Diversity and Inclusion work programme and recognise that during 2018-2019, the period to which this report relates, that the lack of a dedicated lead to drive this area of work, has impacted upon the pace of change and our ability to embed our work.

We want SaTH to be a workplace where staff feel a sense of belonging and are encouraged to bring their whole self to work, without fear or feeling unsafe or unsupported.

At SaTH, we do not tolerate any form of discrimination or harassment from colleagues, patients or the public and will ensure that our staff feel confident to report any issues so that they can be supported.

It is reassuring to see that our workforce demographic is changing and that now over 13% of our workforce is from a BAME background. We are delighted to welcome our International nurses from India who will be a tremendous support.



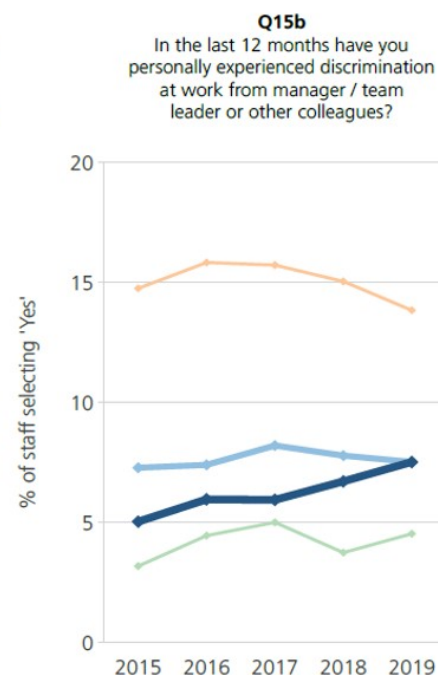
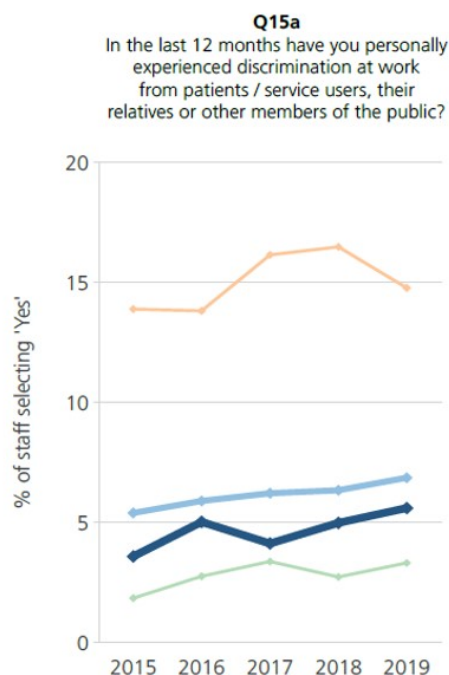
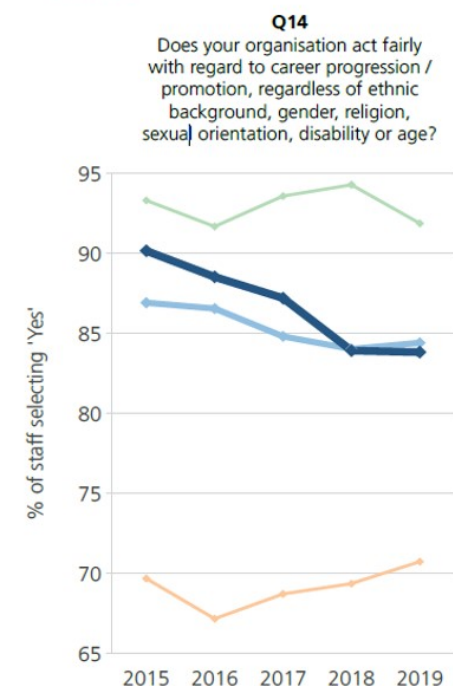
WRES PROGRESS IN 2019/20

Staff Survey Findings:

Survey
Coordination
Centre

2019 NHS Staff Survey Results > Theme results > Detailed information > Equality, diversity & inclusion 1/2

NHS
England



WDES FINDINGS

Positive staff survey feedback: WRES

- Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months has **decreased from 32.4 to 30.6%**

Areas of especial concern identified relate to the experience of BAME colleagues include:

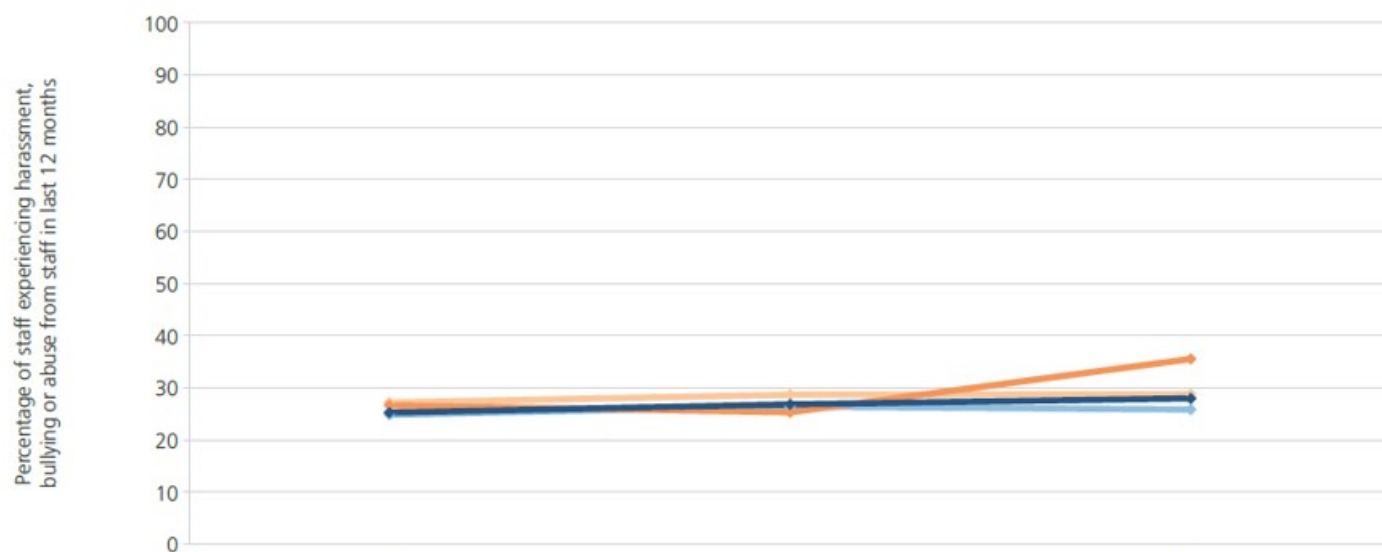
- bullying and harassment by staff
- career progression
- discrimination by line managers
- appointment from shortlisting

WRES ANNUAL REPORT 2020

Survey
Coordination
Centre

2019 NHS Staff Survey Results > WRES > Percentage of staff
experiencing harassment, bullying or abuse from staff in last 12 months

NHS
England



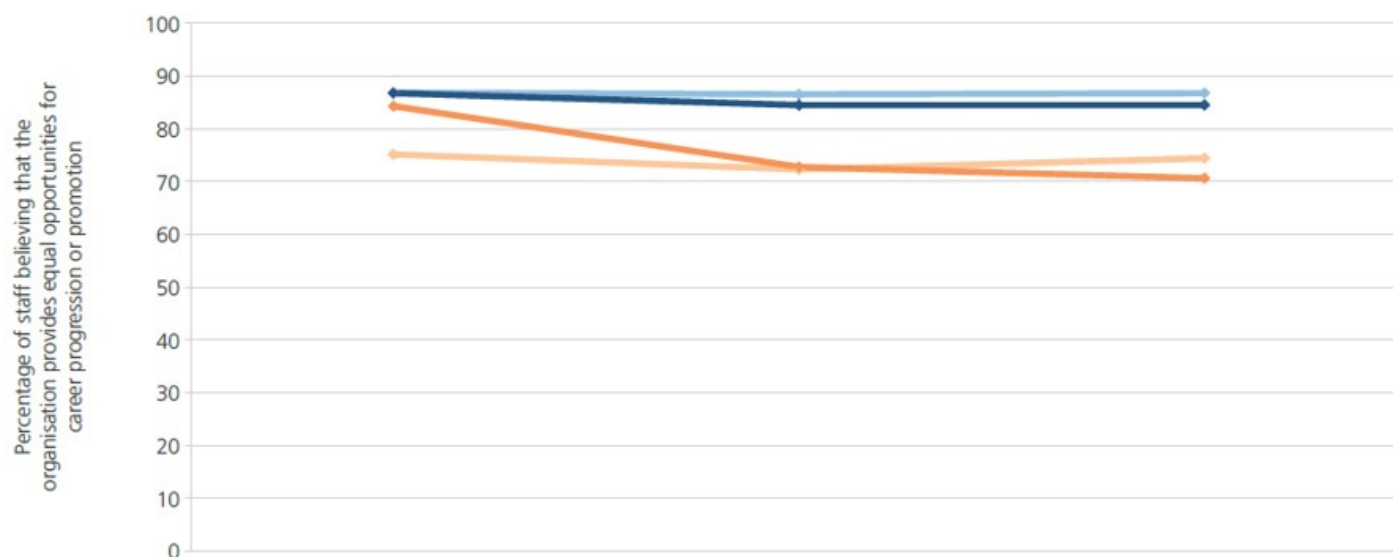
White: Responses	2,090	2,319	2,207
BME: Responses	188	182	169

Average calculated as the median for the benchmark group

Survey
Coordination
Centre

2019 NHS Staff Survey Results > WRES > Percentage of staff believing that
the organisation provides equal opportunities for career progression or promotion

NHS
England



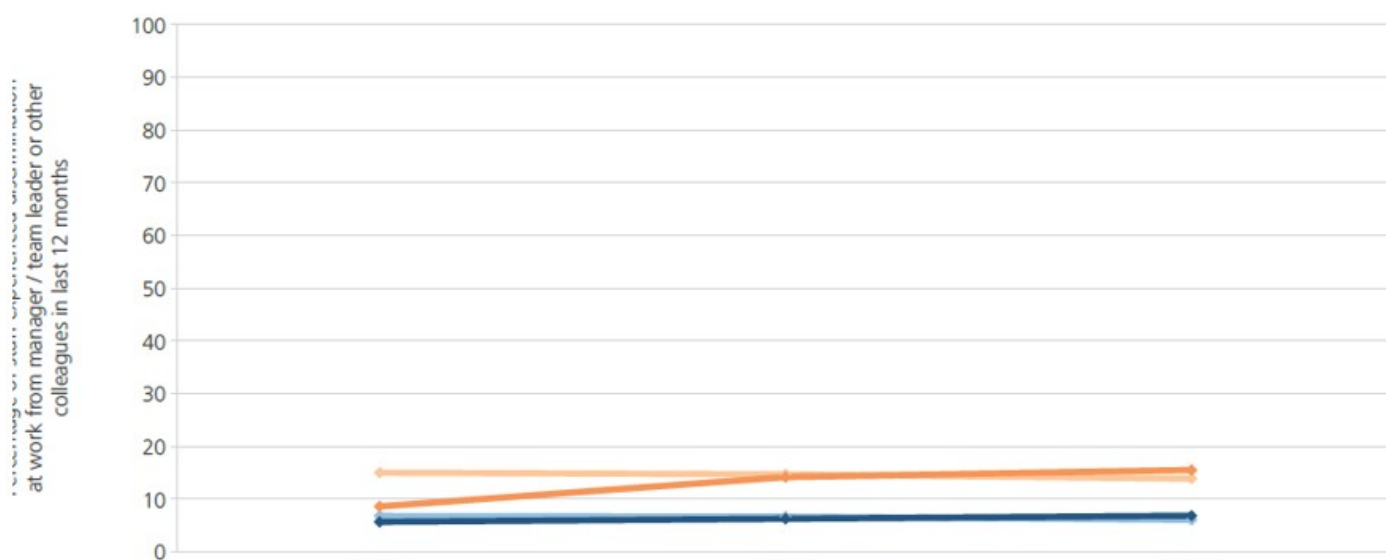
White: Responses	1,378	1,486	1,409
BME: Responses	108	121	102

WRES ANNUAL REPORT 2020

Survey
coordination
Centre

2019 NHS Staff Survey Results > WRES > Percentage of staff experienced discrimination at work from manager / team leader or other colleagues in last 12 months

NHS
England



	2017	2018	2019
White: Your org	5.6%	6.2%	6.8%
BME: Your org	8.6%	14.1%	15.5%
White: Average	6.7%	6.6%	6.0%
BME: Average	15.0%	14.6%	13.8%

White: Responses 2,091 2,314 2,207
BME: Responses 187 177 168

Percentage calculated as the median for the benchmark group

CONCLUSION AND NEXT STEPS

The proposed initial action plan is attached to this document and has been drafted in partnership with our new staff network and will be developed in more detail through Equality Diversity Inclu-sion Lead for SaTH and progressed by our Equality, Diversity and Inclusion group, once established.

As part of our response to COVID-19 pandemic, which evidenced that people from a BAME background to be more vulnerable to the virus, we wrote out to all our BAME colleagues to reassure them and also offer appropriate support and guidance. The risk assessments were introduced and completed by all BAME staff, including Bank and Agency staff. This has been the catalyst to our progress and we are developing a robust framework via our EDI Lead to support our BAME colleagues.



WRES ANNUAL REPORT 2020

APPENDIX 1: WRES METRICS REPORT

Detailed below is the organisation's WRES data which was submitted in August 2020 covering the period April 2019- March 2020.

Metric 1 **Percentage of staff in AfC pay bands or medical and dental subgroups and very senior managers (including executive board members) compared with the percentage of staff in the overall workforce.**

1a) Non-Clinical workforce	2019 White	2020 White	2019 BME	2020 BME	2019 not Declared	2020 Not Declared
Under Band 1	#DIV/0!	%	#DIV/0!	%	#DIV/0!	0.00%
Band 1	89.92%	89%	10.08%	11%	0.00%	0.00%
Band 2	95.79%	93%	3.93%	7%	0.28%	0.0%
Band 3	94.16%	95%	4.67%	41%	1.17%	0.36%
Band 4	96.59%	96%	2.73%	3%	0.68%	1%
Band 5	99.24%	99%	0.76%	1%	0.00%	0.00%
Band 6	98.67%	99%	1.33%	1%	0.00%	0.00%
Band 7	96.88%	96%	3.13%	4%	0.00%	0.00%
Band 8A	91.11%	91%	8.89%	9%	0.00%	0.00%
Band 8B	95.65%	100%	4.35%	0.00%	0.00%	0.00%
Band 8C	86.67%	89%	13.33%	11%	0.00%	0.00%
Band 8D	100.00%	100.00%	0.00%	0.00%	0.00%	0.00%
Band 9	100.00%	67%	0.00%	33%	0.00%	0.00%
VSM	93.75%	84%	6.25%	11%	0.00%	5%

1b) Clinical workforce of which Non-Medical	2019 White	2020 White	2019 BME	2020 BME	2019 Not Declared	2020 Not Declared
Under Band 1	0%	0%	#DIV/0!	0.00%	#DIV/0!	0.00%
Band 1	92.86%	0.00%	5.71%	0.00%	1.43%	0.00%
Band 2	91.06%	91%	8.27%	8%	0.67%	1%
Band 3	93.07%	75%	4.38%	22%	2.55%	3%
Band 4	91.38%	91%	8.62%	9%	0.00%	0.00%
Band 5	83.94%	80%	14.4%	18%	1.66%	2%
Band 6	91.91%	92%	6.15%	6%	1.94%	2%
Band 7	95.16%	94%	3.69%	5%	1.15%	1%
Band 8A	97.09%	96%	1.94%	3%	0.97%	1%
Band 8B	91.43%	90%	5.71%	8%	2.86%	2%
Band 8C	100.00%	100%	0.00%	0.00%	0.00%	0.00%
Band 8D	100.00%	100%	0.00%	0.00%	0.00%	0.00%
Band 9	0.00%	50%	100%	50.0%	0.00%	0.00%
VSM	50.00%	100%	50%	0.00%	0.00%	0.00%
Total	87.2%	85.19%	11.6%	13.77%	1.2%	1.01%

The implications of the data and any additional background explanatory narrative

The Trust's overall BAME representation has increased from 11.16% to 13.77%. We have seen the greatest increase in our nursing staff with the arrival of our international nurses from India. We have also seen an increase Clinical Band 5 – 8B. Indeed progression for BAME staff is not observable in non-clinical grades.

As one of its EDS Equality Objectives, the Trust had sought to establish if there was an appetite for a BAME group. We now have established a new BAME and Allies network which began to help shape our priorities and work programme.

Also, responding to the staff survey findings, we are looking at targeted development programme for BAME staff. The Cultural Ambassadors programme will be a development opportunity for BAME staff but also provide learning for the organisation in relation to unconscious bias and cultural competence.

WRES ANNUAL REPORT 2020

Metric 2 – Relative likelihood of BAME staff compared to White staff being appointed from shortlisting across all posts

(Data source: Trust's recruitment data)

	Relative likelihood in 2019	Relative likelihood in 2020
Relative likelihood of White staff being appointed from shortlisting compared to BAME staff	1.34	1.61

The implications of the data and any additional background explanatory narrative:

Action taken and planned.

The recruitment process in both medical and non -medical recruitment has been reviewed and streamlined. The Trust uses an applicant tracking system to record all applicants and the outcomes of their application. When shortlisting the recruiting manager does not see any personal identifiable data to stop unintentional bias. A recommendation from a recruitment audit has led to the changes in the recruitment process to ask for two people to do all shortlisting and a robust training package is being developed to train recruiting managers, this package includes a module on bias.

The Trust will be working with an external agency to improve all recruitment materials to appeal to the population that the Trust serves.

WRES ANNUAL REPORT 2020

Metric 3 – Relative likelihood of BAME staff compared to White staff entering the formal disciplinary process, as measured by entry into the formal procedure.

(Data source: Trust's HR data)

	Relative likelihood in 2018/19	Relative likelihood in 2019/20
Relative likelihood of BAME staff entering formal capability process compared to White staff	1.07	0.44

The implications of the data and any additional background explanatory narrative:

These figures show a consistent reduction from the 2016 data of BAME staff being over 4 times more likely to enter the formal disciplinary process than white staff. In line with the Dido Harding Recommendations in 2019 the Trust has taken steps to avoid formal processes wherever possible and is committed to a restorative approach. We have also reviewed our decision making processes to ensure plurality in decision making at all stages of formal disciplinary processes.

Metric 4 – Relative likelihood of staff accessing non-mandatory training and CPD

	Relative likelihood in 2018/19	Relative likelihood in 2019/20
Relative likelihood of White staff accessing non-mandatory training and CPD compared to BAME staff	0.93	1.02

The implications of the data and any additional background explanatory narrative:

The implications of the data and any additional background explanatory narrative:

There has been a reduction in the proportion of BAME staff recorded as accessing non-mandatory training during 2019/20. A number of non-mandatory training events were cancelled or reduced during 2019-20 as a result of increasing performance pressure on the Trust. Staff attendance at non-mandatory training external or medical events is not recorded centrally on ESR/OLM, so the true statistics could be very different once ESR/OLM self-service is implemented during 2021 when staff would be able to record their own learning.

Consultation will take place with our BAME network group to understand barriers to accessing non-mandatory and CPD training. We have increased our recording on ESR, but it has not been possible to capture medical non-mandatory training from Equiniti Appraisal System where a significant proportion of BAME staff non-mandatory training is recorded for revalidation purposes (a high proportion of SaTH BAME staff are in medical roles). We will explore ways of formally recording this data during 2020-21 to improve the robustness of our data.

WRES ANNUAL REPORT 2020

Metrics 5 – 8 (Data source: Questions 14, 11, 5, 28b, NHS Staff Survey)

	BAME staff responses to 2018 NHS Staff Survey	White staff responses to 2018 NHS Staff Survey	% points difference (+/-) between BAME staff and White staff responses 2018	BAME staff responses to 2019 NHS Staff Survey	White staff responses to 2019 NHS Staff Survey	% points difference (+/-) between BAME and White staff responses 2019
	Percentage (%)	Percentage (%)		Percentage (%)	Percentage (%)	
5) Staff experiencing harassment, bullying or abuse from patients/ service users, their relatives or other members of the public in the last 12 months	32%	28%	+4%	30%	27%	+3%
6) Staff experiencing harassment, bullying or abuse from staff in the last 12 months	25%	27%	-2%	35%	28%	+7%
7) Percentage believing that trust provides equal opportunities for career progression or promotion.	72%	84%	-12%	70%	84%	-14%
8) In the last 12 months have you personally experienced discrimination at work from any of the following? Manager/team leader or other colleagues	14%	6%	+12%	16%	7%	+9%

Metric 9 – Percentage difference between the organisations' Board voting membership and its overall workforce.

(Data source: NHS ESR and/or trust's local data)

	BAME Board members in 2019	White Board members in 2019	BAME Board members in 2020	White Board members in 2020
	Percentage (%)	Percentage (%)	Percentage (%)	Percentage (%)
Percentage difference between the organisation's Board voting membership and its organisation's overall workforce, disaggregated by Exec/non-exec and Voting/non-voting.	Voting 2.4%	Voting 1.2%	Voting +0.2%	Voting -1%

The figures are automatically calculated on the WRES template and show a decline in BME Board representation.

WRES ANNUAL REPORT 2020

APPENDIX 2: WRES ACTION PLAN 2020/21

WRES Action Plan 2020/2021

Objective	Intention	Responsibility	By
Develop the new BAME staff network and seek Chair/Co-Chair from within the network. Ensuring members feel supported and encouraged to participate. Develop a robust communications and marketing plan for the networks and encourage Active Allies	To increase staff voice and engagement from key staff groups	Equality, Diversity & Inclusion Lead	Dec 2020
Review Staff survey findings for Harassment and bullying by staff colleagues	Improve on figures 2019 35% 2018 25.3%	Head of Employee Relations/ Equality, Diversity & Inclusion Lead	Jan 2021
Conduct confidential survey and Listening Events of BAME staff in conjunction with (FTSU) Guardians.	To increase staff voice and engagement from key staff groups	Equality Diversity & Inclusion Lead & FTSU Lead	March 2021
Embed the Cultural Calendar develop a programme of events to mark: -Holocaust Memorial Day -South Asian History Month -Gypsy and Traveller Month -Black History Month	To create an inclusive workplace, valuing diversity and creating a sense of belonging	Equality, Diversity & Inclusion Lead & Head of Communications	Jan 2021
Introduce a BAME Development Programme 'Cultural Ambassadors Programme'	To support career development and progression and develop organisational learning	Head of Workforce Transformation and OD and Workforce Equality Lead	Oct 2020
Develop Positive Action recruitment activity such as: -targeted media and publicity campaigns -Improve representation in publicity and marketing materials -develop positive case studies of existing employees	To increase representation in the Trust of underrepresented groups	Head of Recruitment & Equality, Diversity & Inclusion Lead	March 2021
Review Implement Diversity elements of Leadership Academy and Manager Training and include Unconscious Training and Cultural Competence	To ensure our managers and Leaders are skilled and trained in diversity management.	Head of Workforce Transformation and OD and Workforce Equality Lead	March 2021

