

## Board of Directors' Meeting: 8 February 2024

Agenda item		020/24	
Report Title		Equality Delivery System Annual Reports	
Executive Lead		Rhia Boyode, Director of People & OD	
Report Author		Rhia Boyode, Director of People & OD	
CQC Domain:		Link to Strategic Goal:	Link to BAF / risk:
Safe	√	Our patients and community	√
Effective	√	Our people	√
Caring	√	Our service delivery	√
Responsive	√	Our governance	√
Well Led	√	Our partners	√
Consultation Communication		People & OD Assurance Committee 2024.02.06	
Executive summary:		The following papers are attached for Board approval: 1. Gender Pay Gap Annual Report 2. EDS 2022  The Board's attention is drawn to: <ul style="list-style-type: none"><li>Gender Pay Gap Annual Report: the progress made in the last year on our Equality, Diversity and Inclusion agenda in relation to reducing the pay gap. The report remains an important part of our improvement agenda, offering inclusive, fair and equitable career opportunities at all levels.</li><li>EDS 2022: The purpose of this report is to provide an overview of the Equality System review conducted in 2023. The EDS is a framework that assesses NHS providers against 3 domains in workforce and service delivery.</li></ul>	
Recommendations for the Board:		<ul style="list-style-type: none"><li>The Board is asked to approve the Gender Pay Gap information to be published and made public in March 2024.</li><li>The Board is asked to receive the Equality Delivery System findings for 2022/23 and approve for publication on the Trust website in line with statutory requirements and made public by the 28 February 2024.</li></ul>	
Appendices:		Appendix 1: Gender Pay Gap Annual Report Appendix 2: EDS 2022	

# Gender Pay Gap Report 2023



## Introduction

We have 7,487 substantive colleagues, increasing to 8,821 with the inclusion of bank workers, making us one of the largest employers locally. We endeavour to reflect the diversity of our local communities and continue to strengthen partnerships with system partners.

We are committed to attracting and retaining employees from all the communities we serve by promoting the benefits of working at the Trust and highlighting the many career opportunities available to them across all professional groups, and at all levels.

We value reviewing our gender pay gap information as it enables us to address any areas of inequality which may be identified, supporting us to improve and recognise the causes and to develop and monitor solutions.

## Background

### Pay Gap reporting terms

Equal pay concerns differences between the actual earnings of male and female employees doing like work, or work of equal value.

The gender pay gap is the average earnings difference between all male employees and all female employees in an organisation, regardless of the nature of their work. It is important to distinguish between the gender pay gap and equal pay.

### Legislative duty

The Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017 set out a public authority's gender pay gap reporting duties, which form part of its public sector equality duty (PSED) under the Equality Act. This report is calculated using the approach required by the legislation, which compares the pay of males and females.

These duties mean that we are obliged to publish information about:

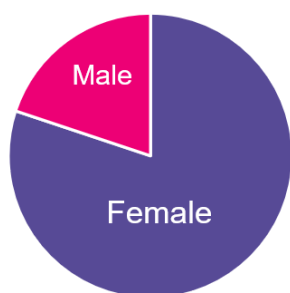
- The gender split of our workforce
- The differences in mean and median hourly pay rates between genders
- The gender profile of the organisation split into quartiles
- The differences in bonus pay between genders

Salaries here at the Shrewsbury and Telford Hospital NHS Trust (SaTH) for most posts up to band 9 (VSM) are determined through a job evaluation scheme called Agenda for Change (AfC). This evaluates the job and not the post holder, making it a fair, transparent and consistent process for job evaluation.

### Calculating the gender pay gap

The date for this report is 31 March 2023, with data based on the relevant pay periods of April 2022 to March 2023 for ordinary pay. For bonus pay, the period of the 12 months to 31 March 2023 is included. Therefore, this report summarises the data submitted for Gender Pay Gap Reporting, based on 2023 data compared with the same data for 2021 and 2022.

## Gender Breakdown:



Gender	Headcount	Percentage
Female	5916	79.02%
Male	1571	20.98%
Total	7487	100%

AfC Band Name	Female	Female %	Male	Male %	Total
Band 1	8	72.73%	3	27.27%	11
Band 2	1417	78.59%	386	21.41%	1803
Band 3	720	86.12%	116	13.88%	836
Band 4	468	89.50%	55	10.50%	524
Band 5	1130	84.96%	200	15.04%	1330
Band 6	1018	87.08%	151	12.92%	1169
Band 7	530	83.33%	106	16.67%	636
Band 8a	178	82.41%	38	17.59%	216
Band 8b	82	79.61%	21	20.39%	103
Band 8c	26	74.29%	9	25.71%	35
Band 8d	8	72.73%	3	27.27%	11
Band 9	9	69.23%	4	30.77%	13
Non AfC	321	40.13%	479	59.88%	800
<b>Grand Total</b>	<b>5916</b>	<b>79.02%</b>	<b>1571</b>	<b>20.98%</b>	<b>7487</b>

Trust Gender Mix: Overall, 79.02% (5,916) of Trust employees are female, while 20.98% (1,571) are male. These percentages relate to the 7,487 staff included for the purposes of this calculation.

**Table 1: Average Rates of Pay - all staff (Snapshot date 31/03/2023)**

Average hourly rates of pay are calculated at the specific pay point of 31 March 2023.

The hourly rate is calculated based on “ordinary pay”, which is made up of basic pay, allowances and shift premium.

Our pay rates are above the national living wage.

Group/Year	Average Hourly Rate of Pay (all staff)			Average Bonus Pay		
	2021	2022	2023	2021	2022	2023
<b>Male</b>	£21.73	£22.23	£22.13	£11,594.26	£11,871.78	£11,999.51
<b>Female</b>	£15.97	£16.62	£17.46	£7,347.09	£7,650.42	£6,612.43
Percentage Variance/Pay Gap %	26.50%	25.24%	21.07%	36.6%	35.56%	44.89%

This data shows that there is a difference of 21.07% between the mean hourly rate of pay for male employees and mean hourly rate of pay for female employees, with men earning £4.67 per hour more on average. However, we see a pattern of continued narrowing of the average hourly rate of pay over the last three years.

**Table 2a. Median Rates of Pay - all staff**

Median hourly rates of pay are calculated at the specific pay point of- 31 March 2023.

The median hourly rate is calculated by selecting the mid-point for each gender group. Table 2a, below, conveys the difference between the median hourly rate of pay of male full-pay relevant employees and female full-pay relevant employees.

Group/Year	Median Hourly Rate of Pay			Median Bonus Pay		
	2021	2022	2023	2021	2022	2023
<b>Male</b>	£15.65	£16.13	£16.68	£9,048	£9,048	£9,048
<b>Female</b>	£13.96	£14.64	£15.59	£6,032	£6,032	£5,289
Percentage Variance/Pay Gap %	10.82%	9.24%	6.51%	33.33%	33.33%	41.54%

These data show that there is a difference of 6.51% between the median rate of pay for male employees compared to female employees, with men earning on average £1.09 more an hour at the median hourly rate of pay. The data from the last three years show a pattern of decrease in the median hourly rate of pay between male and female employees.

Tables 1 and 2 above show that in respect of 'the gender bonus gap' there is a 44.89% variance in average bonus pay between male and female employees, in favour of male employees. Similarly, there is a 41.54% variance in median bonus pay between male and female employee, again in favour of male employees. The data on bonus pay is further expatiated in tables 2b below.

**Tables 2b. Gender bonus pay summary (including Bank workers)**

Gender	Employees Paid Bonus	Total Relevant Employees	% of employees paid bonus
<b>Male</b>	78	1894	4.12%
<b>Female</b>	32	6927	0.46%

#### **Average and Median hourly earnings – Medical and Dental Staff only**

Gender	Avg. Hourly Rate	Median Hourly Rate
<b>Male</b>	£39.63	£39.58
<b>Female</b>	£35.29	£31.05
Difference	£4.34	£8.53
Pay Gap %	10.96%	21.54%

### Male and female employees in each quartile – Medical and Dental staff only

Quartile	Female	Male	Female %	Male %
1	88	94	48.35%	51.65%
2	71	111	39.01%	60.99%
3	69	114	37.70%	62.30%
4	56	127	30.60%	69.40%

The 'Relevant Employees' information drawn from the pay elements of ESR indicates that 0.46% of the Trust female workforce were in receipt of bonus pay in comparison to 4.12% of the male workforce who received bonus pay. This could be reflective of schemes such as the Clinical Excellence Award round for eligible consultants. This recognises and rewards individuals who demonstrate achievements in developing and delivering high quality patient care over and above the standard expected of their role.

More so, in considering the gender profile across the Medical and Dental quartile pay bands it is evident that as of 31 March 2023, according to their average hourly earnings, women are less well represented from the first to the fourth quartile. This may contribute towards the reflection from the bonus data where there is a significant difference in the male to female ratio of employees paid bonus.

**Table 3. Average hourly rate of pay - excluding Medical and Dental**

Group/Year	2022 Av. Hourly Rate of Pay	2023 Av. Hourly Rate of Pay
Male	£14.83	£15.64
Female	£15.65	£16.59
Percentage Variance/Pay Gap %	5.24%	6.12%

Excluding Medical and Dental staff, the percentage variance (the pay gap) favours female staff (representing approximately 79.02% of the workforce) by 6.12%.

Table 3 shows that when Medical and Dental staff are excluded from the data, there is a variance in favour of female employees of 6.12%. This has increased by 0.88% since the data were last reported in 2022. The pay gap in average hourly rates of pay between men and women in 2022 was £0.82 in favour of women, and £0.95 in 2023, again favouring women and increasing the gender pay gap by £0.13 from 2022 to 2023.

**Table 4: Median hourly rate of pay – excluding Medical and Dental**

Group/Year	Median Hourly Rate of Pay 2022 (excl. Medical)	Median Hourly Rate of Pay 2023 (excl. Medical)
Male	£12.72	£13.48
Female	£14.18	£15.15
Percentage Variance/Pay Gap %	10.29%	12.39%



Excluding Medical and Dental staff, the median percentage variance (the pay gap) favours female staff by 12.39%, this is a 2.1% increase from 2022.

## Quartile Reporting

The NHS pay system is a sequence of nationally negotiated pay scales. There is a single pay scale divided into pay bands for non-medical staff, including nursing and allied health professionals, as well as administrative and clerical staff. There are separate scales for consultants and doctors and dentists in training. While this pay system safeguards against equal pay issues, there is a gender pay gap owing to the distribution of male and female employees.

### Staff split by Quartiles (Snapshot Date: 31/03/2023)

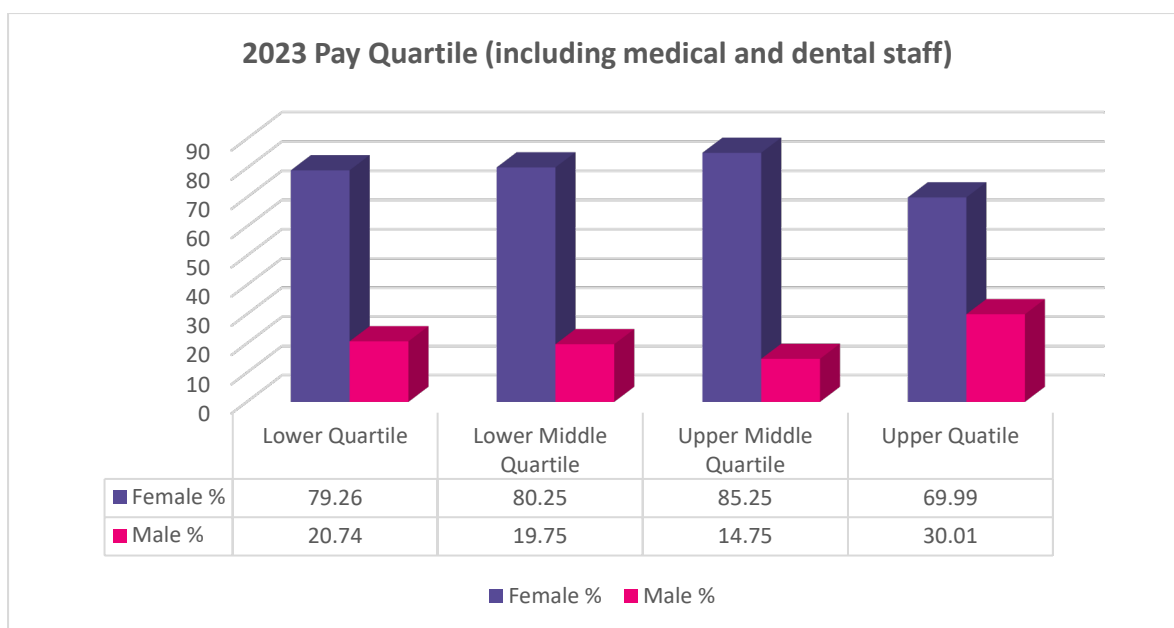
This method splits the proportions of male and female full-pay relevant employees in the lower, lower middle, upper middle and upper quartile pay bands (Quartiles 1, 2, 3 and 4).

#### Tables 5a. Male and female employees in each quartile - including Medical and Dental staff

Note: 1st Quartile = lowest. 4th Quartile = highest.

Quartile	Female (number)			Male (number)		
	2021	2022	2023	2021	2022	2023
1	1450	1395	1532	339	311	401
2	1477	1707	1552	311	332	382
3	1538	1472	1647	251	211	285
4	1254	1203	1355	536	527	581

Quartile	Female %			Male %		
	2021	2022	2023	2021	2022	2023
1	81.05%	81.77%	79.26%	18.95%	18.23%	20.74%
2	82.61%	83.72%	80.25%	17.39%	16.28%	19.75%
3	85.97%	87.46%	85.25%	14.04%	12.54%	14.75%
4	70.06%	69.54%	69.99%	29.94%	30.46%	30.01%



Like the overall NHS workforce, the workforce at our NHS Trust is predominantly female, with 79.02 % female and 20.98% male staff. The gender split for the lower and middle pay quartiles are very similar to gender split across the workforce, however the upper quartile has the highest proportion of male employees at 30.01%.

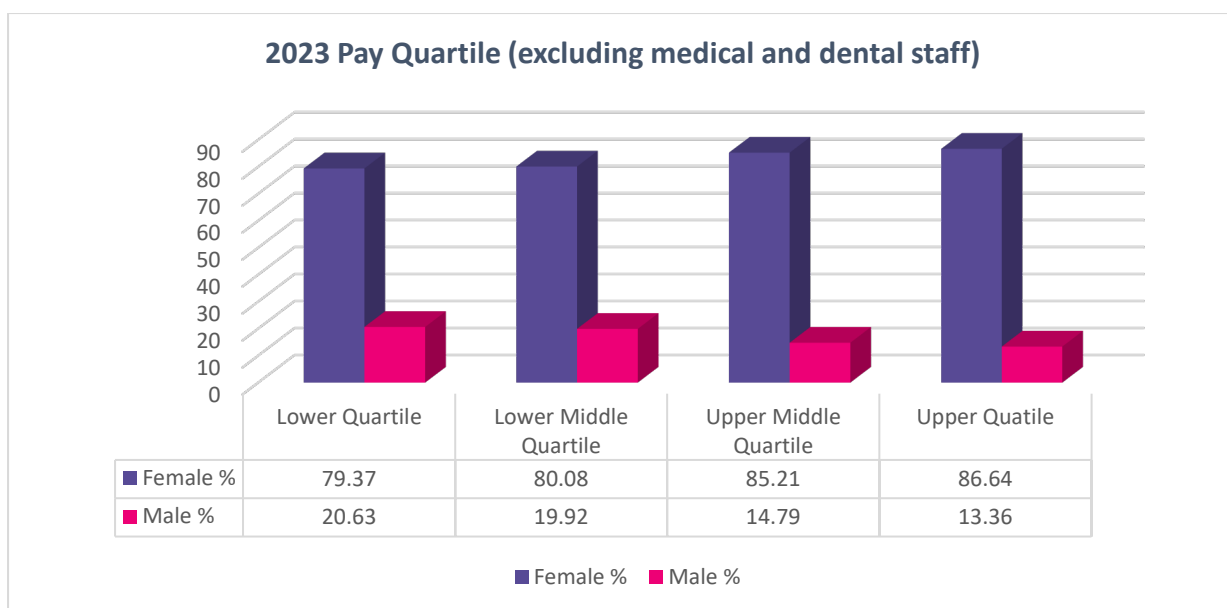
We observe a change to the proportions of male and female employees in each quartile for all staff, with an increase seen in the proportion of female employees in the uppermost quartile (quartile 4) from 69.54% last year to 69.99%; and a greater increase in male employee percentage in the lower middle quartile (quartile 2) from 16.28% to 19.75% in this year's report.

**Tables 5b. Male and female employees - excluding Medical and Dental staff**

Quartile	Female (number)			Male (number)		
	2021	2022	2023	2021	2022	2023
1	1079	1262	1389	243	276	361
2	1364	1235	1403	280	293	349
3	1292	1327	1492	191	202	259
4	1293	1337	1518	192	192	234

Quartile	Female %			Male %		
	2021	2022	2023	2021	2022	2023
1	81.61%	82.05%	79.37%	18.38%	17.95%	20.63%
2	82.96%	80.82%	80.08%	17.03%	19.18%	19.92%
3	87.12%	86.79%	85.21%	12.87%	13.21%	14.79%
4	87.07%	87.44%	86.64%	12.92%	12.56%	13.36%





In considering the gender profile across these quartile pay bands, it is evident that as of 31 March 2023, according to their average hourly earnings, men are less well represented in the upper quartile. This also partly explains the gender pay gap in the average hourly rate of pay for all staff as seen in tables 1 and 3.

## Conclusion

A trend of positive improvements can be seen in relation to the average gender pay gap for all staff over the last three years. The difference in average hourly rate of pay between men and women continues to narrow from £5.76 (2021) to £5.61 (2022) and £4.67 (2023). This narrowing gender pay gap trend is also reflected in the median hourly rate of pay for all staff.

The difference in average hourly bonus pay and the median bonus pay gap show an increase from 35.56% in 2022 to 44.89% in 2023, and 33.33% in 2022 to 41.54% in 2023. The Trust continues to see a gap between the earnings of men and women with a higher percentage of the male workforce receiving bonus pay than the female workforce.

Two overarching themes that stand out is the overrepresentation of male staff in the highest earnings quartiles in spite of their underrepresentation in the total workforce. Moreover, if the Medical and Dental workforce is excluded from the calculation, the gender pay gap becomes one which favours female staff.

The data excluding Medical and Dental staff indicates a wider gender pay gap as seen in tables 3 & 4.

## Cultural Dashboard

In alignment with our Vision and support for the overall cultural transformation of the Trust, our cultural dashboard shows six key themes with data taken from our annual staff survey results. The results have shown growth in the right direction in all six themes of Visions and Values; Health and Wellbeing; Learning and Innovation; Compassion; Goals and Performance; and Teamwork.

### Visions and Values

Our Vision is to embed our Values in everything sphere of our organization in order for our Values to be at the core of everything we do. Our Values help shape our behaviours and thinking, leading to better outcomes for our patients and colleagues.

Our Values and Behaviours Framework explains what our values mean for us in the Trust, and how we put our values into action. They are a key part of everything that we do, how we interact with one another, respect each other and work in an inclusive way together. They also underpin our leadership development framework and are integrated into all development activity including: inductions, our approach to talent management and the new talent conversation guidance and documentation.

We recognise that creating a sense of belonging will help remove or reduce the impact of barriers and support greater representation in senior roles. We are committed to working collaboratively across our staff networks to progress our work on promoting and shaping our education, training and development opportunities, including leadership, and apprenticeship programmes, and supporting our staff through effective and improved People and OD policies.

Last year we undertook another weeklong engagement session on Values and Behaviour with a refresh from an EDI lens, over 300 colleagues took part around the Trust which further supported the development of local plans.

### Health and Wellbeing



Creating a healthy and positive working environment supports the delivery of the people strategy and aligns to the Promise theme 'We are Safe and Healthy'. It is essential that we **all** put staff health and well-being at the heart of our work. Our Health and Wellbeing offer has significantly grown, and the wellbeing offer now consist of a comprehensive range of support for colleagues including psychological, physical, emotional, lifestyle and financial.

The staff survey 2022 results showed an improvement in question 11a which is positive.

11a. My organisation takes positive action on health and well-being.	2021		2022		Comparator	
Strongly disagree	182	6.2%	187	5.6%	10,524	5.2%
Disagree	449	15.2%	431	12.9%	22,176	10.9%
Neither agree nor disagree	973	32.9%	1,072	32.0%	58,425	28.8%
Agree	1,127	38.2%	1,364	40.7%	88,429	43.5%
Strongly agree	222	7.5%	296	8.8%	23,620	11.6%
Missing	58		42		2,472	
<b>Positive Score</b>	<b>45.7%</b>		<b>49.6%</b>		<b>55.1%</b>	
<b>Negative Score</b>	<b>21.4%</b>		<b>18.4%</b>		<b>16.1%</b>	
<b>Base</b>	<b>2,953</b>		<b>3,350</b>		<b>203,174</b>	

The People Pulse results also shows an improvement in Health and Wellbeing over the past year, seeing us above national average in a number of areas.

As a recognition of a high number of our workforce experiencing burnout due to an extremely busy and physically and emotionally challenging roles and environment, the Trust launched the Staff Psychology Service in March 2023 to help meet the psychological needs of our staff.

## Staff Psychology Service

**NHS**  
The Shrewsbury and  
Telford Hospital  
NHS Trust

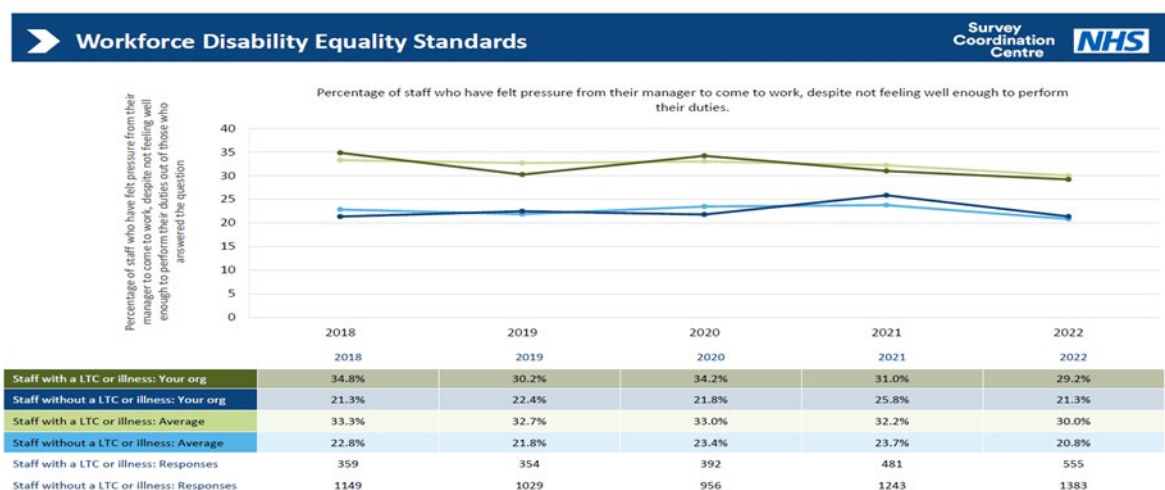
### September Achievements

- Attended Critical Care Away Days
- Held Psychology Service Away Day
- Continued training and development within the team including the STEP programme, PRINCE2 course, EMDR and neurodiversity for managers training
- Continued to develop the Hot Debrief Tool
- Supported Staff Culture, Resilience and wellbeing workstream in ED
- Filmed information about our service for the Staff Survey video
- Presented at the Medical Directors CPD Event
- Met with the Lighthouse Team
- Attended ICS EDI event
- Hot debrief teaching
- Welcomed Eloise Lea, part-time Principal Psychologist to the Team
- Attended Chaplaincy/Psychology/OD Team/FTSU meeting to develop collaborative ways of working

### Looking forward

- ED teaching – trauma awareness and hot debrief
- Cancer Alliance mapping session
- Delivering Psychological Safety session for F2SU ambassadors
- World Mental Health Day events
- Attending PAC Away Day
- Presenting at new Consultant/GP welcome
- Team Tree of Life sessions for Neonatal Nurses
- Welcoming Vanessa Tobin, part-time Principal Psychologist and saying goodbye to Laura Frost, Senior Applied Psychologist
- Peer Support review
- Information Governance Audit and Asset Management training
- Team Tree of Life Facilitator training
- Schwartz Round attendance
- Developing a resource for staff following hot debriefs and psychological debriefs
- Handover of the Hamar Centre to the Psychology Lead

Within the 2022 staff survey indicators, there is data used in the WRES and WDES, and the below graph indicates the percentage of staff with LTC or illness who have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties, decreased from 31.0% to 29.2%, which is encouraging to see.



The implementation of reasonable adjustments for staff with long term health conditions remain a priority and we continue to work towards seeing further improvements. In June 2023 the NHS Launched the NHS EDI Improvement Plan, 6 High Impact actions and this links to High Impact Action 4 to develop and implement a plan to address health inequalities within

the workforce.

## Team Work

Staff networks play an important part in creating and promoting this along with a positive working environment, highlighting areas for improvement and areas of success. They are essential to enhancing a culture of inclusivity and ensuring our people are the best version of themselves at work. We are committed to work closely with our staff networks and across the organisation to influence decision making. These networks include:

- Disability, Ability and Wellbeing Network (DAWN)
- Race, Equality and Inclusion Network
- Pride (LGBTQIA+) Network
- Multi-Faith and Belief Network

## Learning and Innovation

We provide a variety of ways for our people to engage, learn and develop on matters related to equality, diversity and inclusion including:

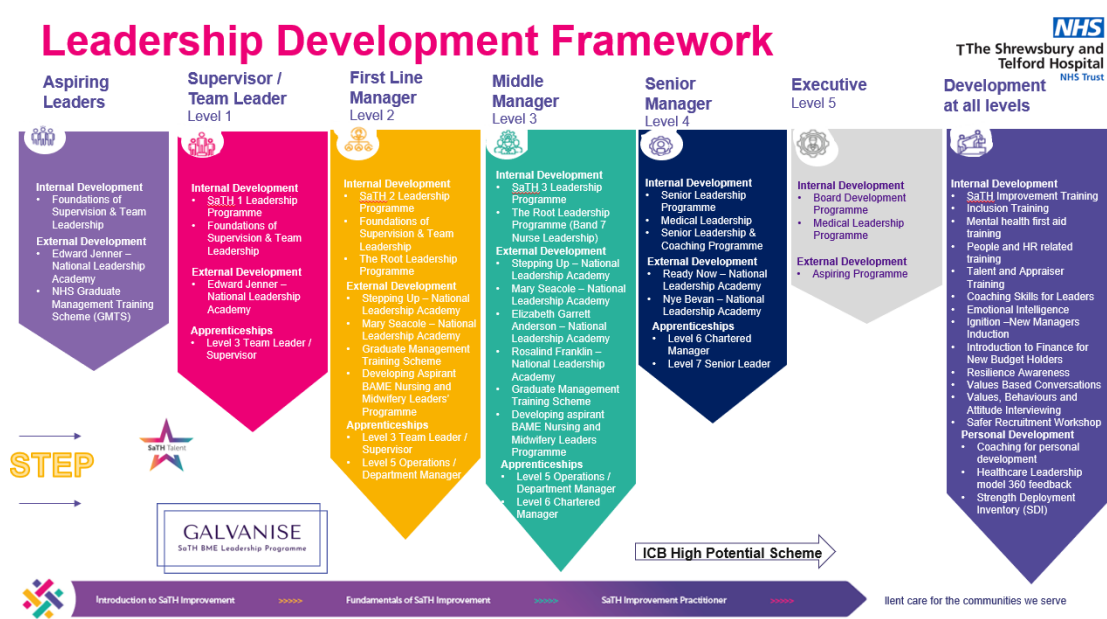
- training and workshops to advance staff understanding
- inclusive recruitment practices
- civility and respect training
- embedding inclusivity in all our policies, practices and decision making
- Schwartz Rounds

Open and honest conversations are vital to create awareness and culture change. We will continue to hold specific themed conversations where a learning or engagement gap has been acknowledged.

## Developing our people

We are committed to developing our people to grow and reach their full potential. We offer a number of programmes aimed at supporting staff to develop their leadership skills and reach their career aspirations.

**Our Leadership Framework is underpinned by our improvement methodology**



Our Leadership Development Framework above includes a pathway for all managers and leaders. Our Strive Towards Excellence Programme (STEP) provides our managers with the fundamental management and technical skills needed to be an effective manager.

Our STEP programme is underpinned by a management competency framework aligned to the core themes of a) people, b) finance, c) governance, safety and assurance and d) operations and now includes the NHS line manager fundamentals.

We are currently working with the operational leaders around aligning all our leadership programmes and competencies to proud to be ops campaign.

We also have a new Foundations of Supervision and Team Leadership Programme including High Potential Scheme (HPS).

## **Compassion**

Our 'Galvanise' leadership programme is aimed at colleagues from BME backgrounds, and we are currently part way through our second cohort. The programme has been designed to improve representation of BME, particularly from band 7 upwards. The programme involves action learning, psychometric assessments, reciprocal mentoring, coaching and observing Trust Board meetings.

Our Leadership Masterclasses continue to cover topics such as compassionate, inclusive and effective leadership, courageous conversations, situation leadership, ownership, supply and demand, creativity, appreciative inquiry, change and resilience. These are monthly and continue to be developed with topics delivered by subject matter experts.

We also deliver a range of leadership modules to leaders and aspiring leaders at all levels including values-based interviews, values-based conversations, talent briefings, flexible working, coaching skills for leaders, resilience, and emotional intelligence.

Our new talent and career platform supports our framework and provides career planning tools, self-assessments, and hundreds of online learning modules on topics such as leadership and management, diversity, confidence building, career planning, application and CV preparation, interview preparation.

We have over 25 ILM qualified coaches who support with 1:1 coaching, and we provide team-based coaching via our Affina Team Based Coaches. We also provide psychometric testing such as DiSC, SDI and MBTI as well as 360 feedback using the NHS Healthcare Leadership Model.

## **Providing high-quality apprenticeships**

Apprenticeships can be used to attract new recruits into the NHS or to develop existing employees within their current role or into new roles to underpin service development and transformation.

We've seen continued success in the number of Trainee Nursing Associates (TNA) who have taken breaks in learning but returned to learning through an apprenticeship and have now achieved their apprenticeship. The age profile to commence on the TNA programme ranges between 19 – 54 years of age. A proportion of these have progressed on to the Registered Nurse Apprenticeship with the first cohort achieving this year. Last year, we celebrated National Apprenticeship Week with focus on a diverse group of people following a variety of apprenticeship pathways. We have seen the completion of long programmes in areas such as Medical Engineering, Radiotherapy Physics and Pathology, as well as having new cohorts just starting their programs.

We utilise Apprenticeships to 'grow our workforce of the future' accessing a wide variety of diverse Apprenticeship pathways including for example: Physiotherapist, Radiographer, Occupational Therapist, Operating Department Practitioner and Advanced Clinical Practitioner. We are encouraging more young people, both male and female to apply for entry



level programmes such as Customer Service and Business Administrator roles. Where young people have joined our organisation in these roles many have progressed their careers to higher level roles, often accessing higher level apprenticeships to support their further development. Currently we have our people undertaking apprenticeship on over 50 different programmes covering a wide variety of occupational roles and supporting the development of their leadership and management skills.

The first edition of our SaTH Education Prospectus was released this year, and it sets out some of the work in progress which has embraced cultural dimensions, improvement, information technology, research and innovation, technical and scientific discoveries. This aligns with the agenda of 'Reform' within the *NHS Long term Workforce Plan* for working and training differently. Our education prospectus is accessible on the Trust intranet website:- [SaTH Education Prospectus by The Shrewsbury and Telford Hospital NHS Trust - Issuu](#)

## Goals and Performance

We are currently in the process of reviewing the Trust's Recruitment and Selection Policy, our current practices, including the 6 high impact actions and best practice. We are also reviewing our onboarding arrangements for all new starters, as part of our retention work. This is to ensure that as a Trust we are all working together to provide the best possible start for our new joiners.

Inclusive recruitment practices are fundamental in how we attract and recruit staff. We are committed to enable people with disabilities, long term health conditions and or are neurodivergent to receive equitable access and opportunities from the point of recruitment throughout their employee lifecycle. Adjustments include changes to our processes and practices, installation of adaptable software. We continue to develop fair recruitment practices to ensure equal access to employment opportunities for all, including a trial in sending out the interview questions before the interview. We aim to work more closely with our partners to support, train and provide resources for our people and managers such as Autism, ADHD, and Dyslexia.

## Learning and Innovation

We are dedicated to attracting and retaining a diverse and productive workforce. This requires our information to be helpful including adaptations to meet the needs of the different groups of staff, which could include style and format of our information. This is important to ensure everyone has access to development and training opportunities we offer. The launch of our new learner-centric Learning Made Simple (LMS) will bring together all elements of our learning, leadership and careers offer in to one place providing improved access that supports all our people in reaching their potential. Understanding barriers and working through different ways to engage and connect, we have been able to develop programmes of work such as our Galvanised programme.

## Our Flagship programmes

Our flagship programmes continue to make progress:

### Key Flagships - Fostering a Culture of Continuous Improvement



**NHS**  
The Shrewsbury and  
Telford Hospital  
NHS Trust



#### Our Flagship Staff Survey Programme Updates



##### How it feels to work at SaTH- Civility Respect & Inclusion

- Our civility and respect sessions focus on behaviours, interaction and cultural change.
- Nearly 500 of you, across 30 sessions, have taken part in one of these face-to-face workshops
- 30 Voices – lived experience of racism at SaTH'
- FTSU – supporting managers and supporting change in process
- Psychological HuB – Launched
- Bereavement and Menopause

2021 Figure 6.76 2022 Figure 6.84



##### Our mindset to approaching Flexible Working

- Comms plan developed linked to Staff Survey promotion in September.
- Flexible Working Toolkit masterclass and We work Flexibly masterclass developed to coincide with comms launch in September.
- Working with Theatres PRH to understand the barriers to flexible working.
- Launching the promotion of flexible working success stories in Sept and monthly in Chatterbox.

2021 Figure 5.57 2022 Figure 5.77



##### Reviewing Appraisal process and Talent Conversations

- Talent Conversation launched in May 2023
- 13 staff briefings took place updating colleagues on the new process attended by 213 staff.
- E-Learning currently being developed to support appraisers.
- Working group reviewing feedback from the appraisers and appraisees to update the Talent Conversations document with improvements in September 2023.

2021 Figure 4.87 2022 Figure 5.06

## Compassion

Over 1000 people have participated in our Civility Saves Lives workshops as part of our Cultural /transformation Programme, supporting the embedding of our core values.

Our mindset to approaching flexible working is to support all staff to achieve an effective balance between work and life's other needs, while continuing to meet the needs of our services. We have recently updated our flexible working policy and home working policy in accordance with guidance from NHS Employers. All our job adverts have a statement outlining our commitment to flexible working. We have also implemented flexible working masterclasses for employees and managers, at which the benefits of flexible working and the different options open to staff are discussed. There is more momentum on flexible working, and we are on a journey to develop Team Based Rostering, which is being trialed in one ward with another ready to start the process. We recognise that for many of our staff this flexible approach to working and learning will provide additional opportunities to contribute, and for some this could see them take-up opportunities that might have previously been out of reach or sight.

## Goals and Performance

We have reviewed and updated our appraisal process and have launched our new talent conversations guidance and documentation, following feedback from staff focus groups and the staff survey. Our approach to talent management recognises that all of our people have talents with a focus on having a quality conversation to provide feedback on performance, agree work objectives for the coming year, identify development needs and thoughts about future aspirations. There is an opportunity to gather 360 feedback as part of the process.

There is a further opportunity to have a career conversation with either a line manager or a coach to discuss career aspirations. We have used our experience from being involved in the NHS Scope for Growth pilot to develop our career conversation approach.

Our talent and career platform also supports talent conversations and provides managers and staff with useful signposting either during or after a talent conversation.



## Next Steps

This data will be reviewed and used to:

- Inform the SaTH Equality, Diversity and Inclusion Group and to update our EDI strategy, objectives and action plans for improvement.
- Raise awareness of shared parental leave entitlements and flexible working opportunities through communications.
- Provide support for women returning to work through shared parental leave, job sharing, part-time, and term-time only opportunities, as well as additional flexible working approaches.
- Encourage men to take advantage of arrangements which enable them to fulfil their caring responsibilities, such as shared parental leave, part time working and compressed hours.
- Value equality, diversity and inclusion through equitable and fair processes
- Develop an environment where staff feel valued and able to speak up.

We are committed to:

- Collating evidence for the six High Impact Actions Plan to eliminate pay gaps with respect to race, disability and gender in line with the 'Mend the Gap' review recommendations.
- Embed recommended actions into other relevant EDI Action Plans, such as WRES (Workforce Race Equality Standard) and WDES (Workforce Disability Equality Standard) and the 6 High Impact Actions where there is crossover in actions identified.
- Set up a Gender Pay Gap Working Group to meet following 2023 Staff Survey results and submission of 2023 Gender Pay Gap data to sense-check actions and identify any new actions.
- Job review for bands 2 and 3 Clinical Support Workers to ensure job roles are accurately recorded and correctly paid through the job evaluation process.

The past year has seen much progress on our Equality, Diversity and Inclusion agenda as outlined above with regards to reducing the pay gap. Each month we have been involved with a significant number of engagement and reward and recognition events, and continue to work hard to empower colleagues to speak up, promote our culture and leadership programme and embed EDI in everything we do. We recognise there is more to be done with and for our people and the communities we serve.

The Gender Pay Gap Report is also an important part of our improvement agenda, and we will continue to strive to make SaTH a great place to work by attracting and retaining employees from all the communities we serve, offering inclusive, fair and equitable career opportunities at all levels in line with our NHS People Promise.

## Definitions for gender and ethnicity pay gap reports

Key Word	Definition
<b>Gender pay gap:</b>	The difference between the average earnings of men and women, expressed relative to men's earnings. This is a broad measure of the difference in the average earnings of men and women, regardless of the nature of their work.
<b>Equal pay:</b>	A legal requirement that within an organisation, male and female staff members who are engaged in equal or similar work or work of equal value must receive equal pay and other workplace benefits. This definition is included for clarification purposes as this report relates to the gender pay gap, and not equal pay.
<b>Ordinary pay:</b>	Basic pay, paid leave, including annual, sick, maternity, paternity, adoption or parental leave (except where an employee is paid less than usual or nothing because of being on leave), high-cost area and other allowances, shift premium pay, and pay for piecework. This would include on call framework and banding supplement in doctors' pay, for example.
<b>Agenda for Change:</b>	This pay system covers all staff except doctors, dentists and very senior managers. Each of the nine pay bands has a number of pay points. Staff will normally progress to the next pay band after the required number of years until they reach the top of the pay band. In addition to basic pay, there is also extra pay for staff who work in high-cost areas such as around London. (Reference: <a href="#">Agenda for change - pay rates   Health Careers</a> )
<b>Bonus pay:</b>	'Bonus pay' is defined as any remuneration that is in the form of money, vouchers, securities or options and relates to profit sharing, productivity, performance, incentive or commission. For the purposes of this report, the relevant bonus pay relates to Consultant Clinical Excellence Awards (CEA) and Long Service awards, in line with guidance from NHS Employers.

**Executive EDI Lead:** Rhia Boyode - Director of People and OD

**Author:** Marian Owoniyi Head of EDI (Job Share)

For any inquiries, please contact Equality, Diversity and Inclusion (EDI) team by emailing [sath.edi@nhs.net](mailto:sath.edi@nhs.net)

## **Equality Delivery System (EDS 2022)**

## **1.0 Introduction**

This report provides an overview of the Equality Delivery System (EDS) review conducted in quarter three in 2023 and outlines areas for further development moving forward. This will enable the Trust to further develop and meet the EDS requirements in future reviews and progress its journey towards achieving an inclusive culture, that fosters compassion, respect and learning.

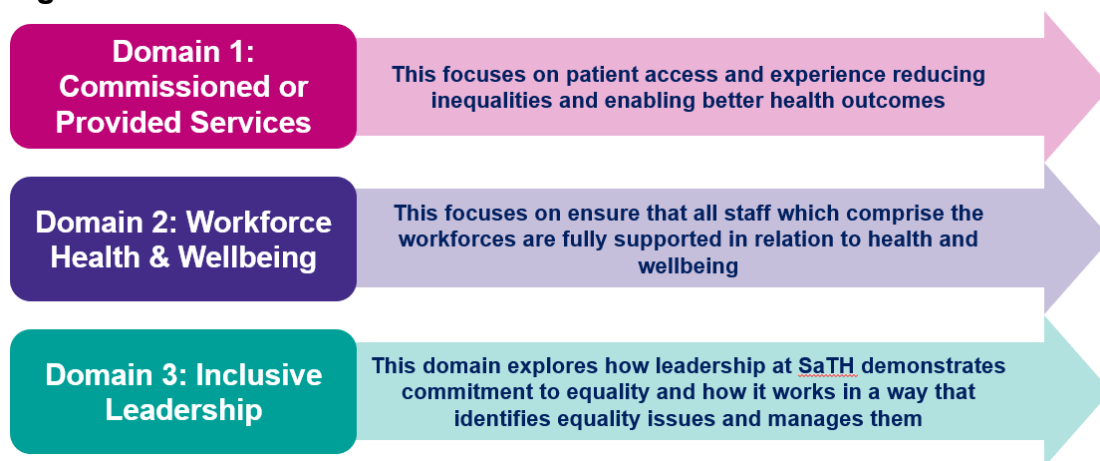
## **2.0 Background**

The NHS Equality Delivery System (EDS) is the foundation of equality improvement within the NHS, acting as an accountability and improvement tool for NHS organisations - in holding active conversations with patients, public, staff, staff networks and trade unions - to review and develop their services, workforce and leadership.

Supporting the development and implementation of meaningful equality objectives, enacting demonstrable change in a balanced and incremental way, to improve experiences and outcomes for those who use our services and those who deliver and support it.

In 2022/2023 the EDS assessment framework was refined to be a more robust assessment method, aligned with the evolving NHS landscape as well as with the Workforce Race Equality Standard (WRES), Workforce Disability Equality Standard (WDES) and NHS People Plan. Subsequently, the EDS2022 framework became comprised of 11 specific outcomes that are grouped across the following three domains:

**Figure 1 – 3 Domains**



Each of the above domains have set outcomes that must be evaluated and scored against set criteria (See Appendices) using available evidence as well as insight and experiences of the depicted stakeholders. It is these ratings that provide assurance and/or provide direction for further improvement.

**Table 1 Key Stakeholders for Domains:**

Domain 1 - Provided Services stakeholders	Domain 2 - Workforce health and wellbeing stakeholders	Domain 3 Inclusive leadership stakeholders
Patients and Service Users Carers Local members of the public Community groups Chaplaincy Voluntary, Community	Staff members Staff networks Trade unions Chaplaincy Freedom to Speak Up Guardians	Patients and Service Users Carers Local members of the public Community groups Chaplaincy Staff members Staff networks Trade unions Chaplaincy Freedom to Speak Up Guardians Independent Evaluators or Peer Reviewers

Each of the outcomes are scored from 0 – 3. Once all stakeholders have provided their scores, an average of all scores for each outcome are calculated to get a representative score for of each outcome. These are added together for the overall domain ratings.

**Figure 2 EDS Scoring System**



Total domain scores are added together to provide the EDS Organisation Rating, which is out of 33 with a maximum score of 12 in Domain 1, 12 in domain 2 and 9 in Domain 3. Organisation Ratings that score:

- Under 8 are rated Undeveloped;
- Between 8 and 21, are rated Developing;
- Between 22 and 32 are rated Achieving;
- 33 are rated Excelling.

Robust implementation of the framework will support with achieving just and inclusive culture for protected groups described in the Equality Act (2010) as well as complement the work being undertaken in regard to:

- Public Sector Equality Duty;
- NHS Workforce Race Equality Standard (WRES);
- NHS Workforce Disability Equality Standard (WDES);
- Gender and Race Pay Gap.

All NHS Providers are required to implement the EDS, as part of the NHS Standard Contract and from 2023/2024 annual reviews and reports are required to be undertaken in a collaborative fashion with fellow NHS organisations and commissioners, within their Integrated Care Board (ICB) domain.

Overall responsibility for the EDS sits with the Executive Board within each organisation.

The Senior Responsible Offer for the implementation is the Director of People and OD.

In addition, each of the domains had an operational lead for the 2023 review these were:

- Domain 1 was overseen and Deputy Director of Nursing, Patient Safety Team and in conjunction with EDI Nurse Lead.
- Domain 2 and 3 was overseen by the Assistant Director of People, Leadership and OD and Culture in conjunction with the Head of Leadership and wellbeing Lead.

### **3.0 Shrewsbury and Telford Hospital's EDS 2022**

SaTH last completed the EDS assessment in 2019, however this was the first year we have used the revised framework. A commitment to undertake this piece of work utilising and the more robust means of assessment from 2022 was taken, (albeit late in the expected timeline), as it is dedicated to advancing the Equality, Diversity and Inclusion (EDI) agenda and understands the importance of developing a healthier and happier and more engaged workforce, which will in turn increase the quality of care provided for patients.

All findings can be seen in the appendices.

**Figure 3 Overall Trust Scoring for 3 Domains**



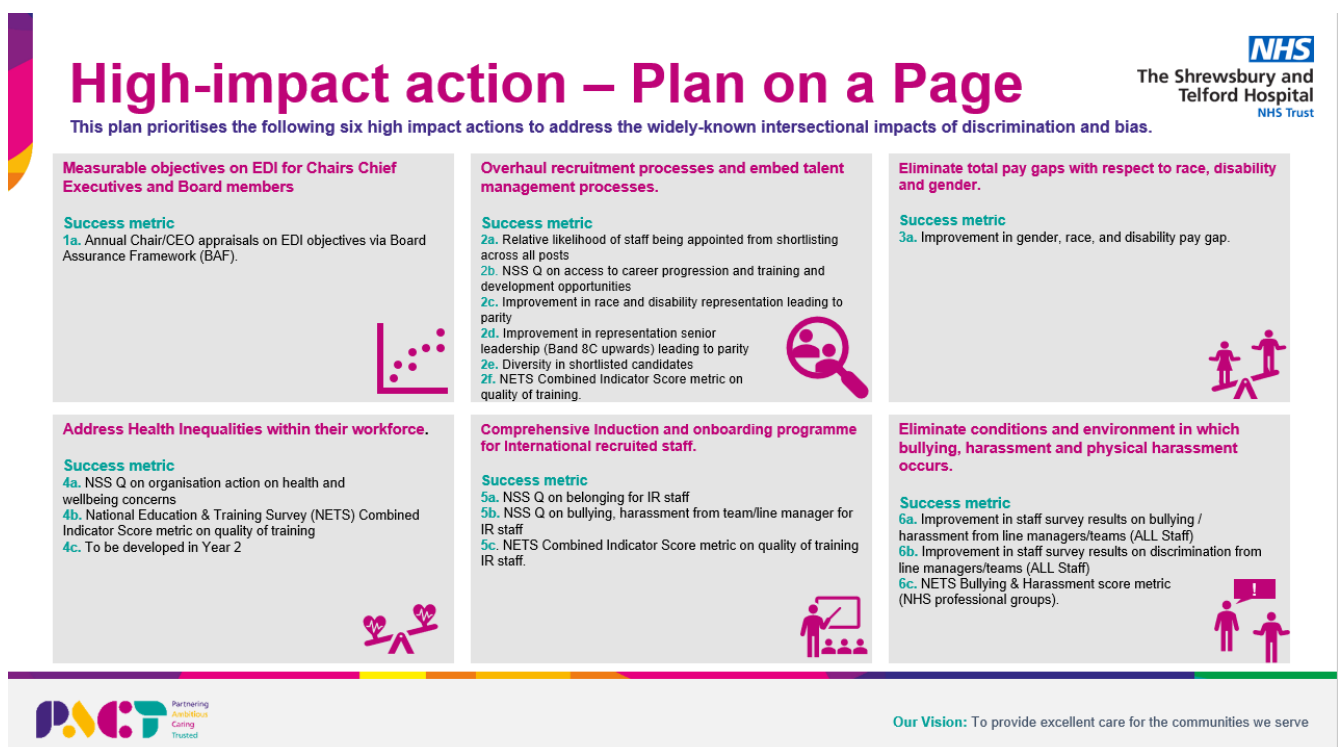
### **3.1 EDS Organisation Rating**

Overall, with the prospective scores for Domain 1 and stakeholders scores within Domain 2 and 3 the Trust is working at an 'Developing' activity level. As this is the first year the new EDS framework has been implemented it cannot be compared to previous scores achieved and will become our baseline in which to build on and move forward.

## 3.2 Action Plans for 2023/2024

Significant emphasis is needed on supporting the health of the workforce and the importance of equality, diversity and inclusion in developing staff experience. On that basis the Trust is reviewing its EDI strategy and aligning the EDI Improvement Plan 6 high impact actions (6HIA), to ensure full alignment. Further Divisional People plans will be required to ensure not only Staff Survey actions are captured but those outlined in the EDI 6HIA, EDS2022, WRES, WDES, GPRP, Health and Wellbeing to further nurture and support a psychological safe culture.

Figure 4 EDI 6 High Impact Actions (6HIA)



In addition, specific action items have been aligned with other relevant strategic frameworks such as Staff Survey, Wellbeing Framework, WRES, WDES, Pay Gap and EDI 6HIA, in order to have a cohesive approach to staff experience, improving a 'great place to work and receive care'.

For Domain 2 and Domain 3, the majority of identified actions (Appendices 2&3) will be progressed collaboratively through the relevant working groups. The EDI working Group is in its infancy comprising of both transformational and operational HR colleagues, staff network representatives and subject matter experts, to discuss the other strategic frameworks. A detailed piece of work is being carried out to ensure a robust timeline is in place for all EDI priorities, to ensure incremental progress is achieved and maintained, regular updates will be provided to key stakeholders by the EDI leads and retention lead.



## **4.0 Risks**

<b>Risk</b>	<b>Mitigating action</b>
Risk of reputational damage if EDS is not planned accordingly with yearly timeline. This can stop the Trust being an employer of choice, demotivate current staff and increase vacancies.	By proactively and fully engaging in the EDS process it allows the Trust to assess the impact of discrimination, stress and inequality and provides an opportunity for the Trust to support health inequalities, inclusion and as an outcome have a healthier and happier workforce, which will in turn increase the quality of care provided for our patients
This is first year of the EDS 2022 framework being implemented, prior to this EDS2 was last completed in 2019. Risk that not enough time was planned and a limited range of stakeholders took place which may have impacted on the outcomes and scoring undertaken.	By listening and engaging with staff it enables the trust to identify where they are through their key stakeholders, which enables more clearly how we need to further develop. The changes mean that it cannot be compared to previous scores achieved and in affect a baseline in which to build on.
Domain 3 has been reviewed internally by People and OD Directorate and our Staff Side Chairs	Staff Side Chairs independently reviewed and agreed with scoring. Next year this will need to be assessed more widely and to include an independent evaluator.
EDI to have sufficient time to plan governance arrangements for all their priorities and produce a full timeline to ensure that as much evidence and insight as possible has been gathered and analysed.	This approach has proved successful with Staff Survey however it will require collaboration and ownership across areas.

## **5.0 Recommendations**

The Board is asked to receive the Equality Delivery System findings - 2022/2023 and approve for publication on the Trust website, in line with statutory requirements and make public by the 28th February 2024.

**January 2024**