

NHS Equality Delivery System 2022

EDS Report and Action Plan

Dorset County Hospital

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Introduction to the Equality Delivery System for the NHS

The EDS Reporting Template

Implementation of the Equality Delivery System (EDS) is a requirement on both NHS commissioners and NHS providers. Organisations are encouraged to follow the implementation of EDS in accordance EDS guidance documents. The documents can be found at: www.england.nhs.uk/about/equality/equality-hub/patient-equalities-programme/equality-frameworks-and-information-standards/eds/

The EDS is an improvement tool for patients, staff and leaders of the NHS. It supports NHS organisations in England - in active conversations with patients, public, staff, staff networks, community groups and trade unions - to review and develop their approach in addressing health inequalities through three domains: Services, Workforce and Leadership. It is driven by data, evidence, engagement and insight.

The EDS Report is a template which is designed to give an overview of the organisation's most recent EDS implementation and grade. Once completed, the report should be submitted via england.eandhi@nhs.net and published on the organisation's website.

NHS Equality Delivery System (EDS)

Name of Organisation	Dorset County Hospital	Organisation Board Sponsor/Lead		
		Emma Hallett		
Name of Integrated Care System	NHS Dorset			

EDS Lead	Ebi Sosseh	At what level has this been completed?		
			*List organisations	
EDS engagement date(s)	Nov 2022-Feb 2023	Individual organisation	Dorset County Hospital	
		Partnership* (two or more organisations)	Not for this reporting cycle	
		Integrated Care System-wide*	Not for this reporting cycle	

Date completed	10/03/2023	Month and year published	24/03/2023
Date authorised	21/03/2023	Revision date	01/03/2024

Completed actions from previous year	
Action/activity	Related equality objectives
n/a as EDS not previously carried out	

EDS Rating and Score Card

Please refer to the Rating and Score Card supporting guidance document before you start to score. The Rating and Score Card supporting guidance document has a full explanation of the new rating procedure, and can assist you and those you are engaging with to ensure rating is done correctly

Score each outcome. Add the scores of all outcomes together. This will provide you with your overall score, or your EDS Organisation Rating. Ratings in accordance to scores are below

Undeveloped activity – organisations score out of 0 for each outcome	Those who score under 8 , adding all outcome scores in all domains, are rated Undeveloped
Developing activity – organisations score out of 1 for each outcome	Those who score between 8 and 21 , adding all outcome scores in all domains, are rated Developing
Achieving activity – organisations score out of 2 for each outcome	Those who score between 22 and 32 , adding all outcome scores in all domains, are rated Achieving
Excelling activity – organisations score out of 3 for each outcome	Those who score 33 , adding all outcome scores in all domains, are rated Excelling

Domain 1: Commissioned or provided services

Domain	Outcome	Evidence	Rating	Owner (Dept/Lead)
Domain 1: Commissioned or provided services	1A: Patients (service users) have required levels of access to the service	<p>An Equity and Equality action plan has recently been developed with service users and staff, the plan focuses on needs identified from local data and feedback. Patients from all protected characteristic groups are seen and treated equitably For those who need additional support specialist teams are in place and tailor care to make sure it is personalised.</p> <p>To allow all patients to access information available the Dorset Maternity Matters website has translations, easy read and audio options. At Dorset County Hospital, extra appointment is provided to ethnically diverse mums when required.</p>	Achieving activity	<p>Ellie Venton</p> <p>Dorset ICS Maternity Programme Lead</p>
	1B: Individual patients (service users) health needs are met	<p>Both trusts (Dorset County Hospital and University Hospitals Dorset) have High risk consultant clinics which include caring for those with protected characteristics where this affects their medical needs. Women with poor mental health receive a bespoke service from a multi-professional team, including a limited amount of caseloading.</p>	Achieving activity	<p>Ellie Venton</p> <p>Dorset ICS Maternity Programme Lead</p>

		<p>Dorset is part of the Wessex Maternal Medicines network for those needing more specialist care. For those with additional needs, extra appointments and checks will be scheduled and their care will be personalised around their needs.</p> <p>Training provided by Birth rights will be conducted in the Spring for a multi-professional group of staff and this includes listening and supporting patients individual needs.</p>		
	<p>1C: When patients (service users) use the service, they are free from harm</p>	<p>Maternity safety leads support and encourage the reporting of all incidents and near misses. Dorset Local Maternity and Neonatal system (LMNS) review cases and share learning across the system and with a neighbouring 'Buddy' ICB. The recording of protected characteristics in the reports is being promoted and checked so data can be used to identify trends or risks. Safety reports identifying trends or learning are also taken to Trust Safety Boards/Quality Committee and reported to the regional maternity team. This reporting structure follows the Ockendon report Immediate and Essential Action framework.</p>	<p>Achieving activity</p>	<p>Ellie Venton Dorset ICS Maternity Programme Lead</p>

	<p>1D: Patients (service users) report positive experiences of the service</p>	<p>The LMNS work closely with the Maternity Voices Representatives (MVP) to gain service user feedback as well as VCSE, friends and family test and CQC results. Action plans are in place based on feedback and service users are invited and encouraged to contribute to these actions.</p> <p>The MVP have recently conducted a through survey which was open and promoted to all. This provided detailed feedback for them to prioritise improvement work with the trusts.</p>	<p>Achieving activity</p>	<p>Ellie Venton Dorset ICS Maternity Programme Lead</p>
<p>Domain 1: Commissioned or provided services overall rating</p>			<p>8</p>	

Domain 2: Workforce health and well-being

Domain	Outcome	Data Sources	Evidence	Rating	Owner (Dept/Lead)
Domain 2: Workforce health and well-being	2A: When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions	<p>National Staff Survey (NSS) 2022</p> <p>NSS Question 9d “My immediate manager takes a positive interest in my health & wellbeing”</p> <p>NSS question 11a “Organisation takes positive action on health & wellbeing”.</p> <p>Q11a My organisation take positive action on health and well-being.</p>	<p>The Trust’s Occupational Health Service provides a wide range of support with physical and psychological health & wellbeing, including:</p> <ul style="list-style-type: none"> - In-house referrals to Occupational Health specialists - Workplace counselling - Trust-wide staff vaccination programmes - Menopause support service - Foot health service - Signposting to smoking cessation service <p>We have no current concentrated work on staff for diabetes but we are about to purchase YourCare, a supplementary package of support from our Employee Assistance Programme (EAP) provider, which focuses on</p>	<p>Developing activity-1</p> <p>Can become Achieving & Excelling if health monitoring data is collated by Occupational Health and other places of referral (e.g. EAP) and made available anonymously by all protected characteristics.</p>	<p>Chief Nursing Officer</p> <p>Chief Operating Officer</p>

			<p>staff holistic health and covers all of these areas.</p> <p>57% of NSS respondents said that the trust takes positive action on health and wellbeing, which is down 2% from the previous year but also 2% above average.</p> <p>Our triaged counselling service through the EAP provider Vivup which offers support to deal with stress, anxiety and low level depression.</p> <p>Vivup is a leading provider of professional counselling, information and advice offering support for issues arising from home or work. They employ professionally qualified Counsellors and Information Specialists, who are experienced in helping people to deal with all kinds of practical and emotional issues.</p> <p>A Clinical Psychologist has been working directly with the Organisational Development (OD) Team to develop evidence-based approaches to</p>		
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			<p>health and wellbeing. These approaches have informed development of a 'wellbeing continuum' and assessment tools to help with self-assessment and triage approaches for more efficient signposting to appropriate support.</p> <p>A new staff portal on the staff intranet has been developed where staff can access the assessment tools and be directed to relevant resources and a range of support options.</p>		
	<p>2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source</p>	<p>NSS Q14a In the last 12 months how many times have you personally experienced physical violence at work from...? Patients / service users, their relatives or other members of the public.</p> <p>NSS Q16c.1 On what grounds have you experienced discrimination? - Ethnic background.</p>	<p>The Trust has a commitment to zero tolerance around bullying and harassment. This is underpinned with EDI/Speaking Up sessions at a range of Induction events (general, Preceptorship, Junior Doctors) and onboarding programmes.</p> <p>There is a small decrease in levels of incivility across the trust except from experiencing</p>	<p>Developing activity-1</p> <p>In particular, it will be necessary to demonstrate that the Trust takes action to penalise those staff who abuse, harass,</p>	<p>Chief People Officer</p>

			<p>physical violence from colleagues which has seen a 0.2% rise according to the 1388 that responded to NSS Q13c.</p> <p>Ethnicity seems to be the highest basis for discrimination in the trust according to the 151 respondents in the 2022 staff survey</p>	<p>bully or in rare circumstances, use physical violence against other staff.</p> <p>Anonymised data on the outcomes of reports will be key to this.</p>	
2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source	<p>NSS Q13b In the last 12 months how many times have you personally experienced physical violence at work from...? Managers.</p> <p>NSS Q13c In the last 12 months how many times have you personally experienced physical violence at work from...? Other colleagues.</p>	<p>The Trust staff have access to a number of Speaking Up functions, which includes the Freedom To Speak Up Guardian, who is a major source of advice and support. Staff are given confidential advice and support and provided with guidance and opportunities to resolving their issues. The Inclusion and Wellbeing Leads are also a support of support for tackling incivility and emotional distress.</p> <p>The Union reps from BMA, HCSA RCN and Unison are on</p>	<p>Achieving activity-2</p> <p>To reach Excelling: The organisation facilitates pooling union representatives with partner organisations, to encourage independence and impartiality.</p> <p>Appropriate resourcing to</p>	Head of organisational Development	

			<p>hand to offer independent advice and support as well.</p> <p>38 staff Health & Wellbeing Coaches (HWCs) has been recruited to help signpost colleagues to appropriate support. The HWCs have volunteered to support and publicise events and initiatives which benefit the health and wellbeing of staff and provide a way for staff to feedback their experiences. This network is a rebranding and strengthening of Wellbeing Champions which had previously only been partially implemented across the Trust. The HWCs form an internal Community of Practice, with opportunities to join system-wide Networks and further development opportunities including Mental Health First Aid and Suicide Awareness.</p> <p>The four Staff Network chairs and their committee provide support to their members at their respective meetings and networking events. The networks meet monthly.</p>	<p>be in place to enable this reporting with data from multiple sources. Also, support from Divisions to secure robust follow-up of incidents and sharing of outcomes.</p>	
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			<p>The WRES/WDES data around bullying and harassment have resulted in planned campaigns around 'Bystander to Upstander' as a way of promoting a proactive approach to zero tolerance.</p> <p>The Trust has 2 in-house Mental Health First Aid (MHFA) Instructors qualified to deliver Mental Health First Aider (MHFA) 2 day, 1 day Champion and half-day Awareness sessions to our staff and partners. We currently have 75 MH First Aiders and continue to recruit from all teams, targeting particularly vulnerable groups such as junior doctors. Many MH First Aiders have opted to become Health & Wellbeing Coaches to develop wider awareness and skills to enhance the HWB support they can provide to colleagues.</p> <p>Equality impact assessments are applied when amending or creating policy and procedures</p>		
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			<p>for reporting abuse, harassment, bullying and physical violence, as they are with all HR and other policies and procedures across the Trust.</p> <p>Support is provided for staff outside of their line management structure through all of the above sources, and in addition, the Employee Assistance Programme (EAP) is available 24/7, free of charge, in complete confidence for support, advice and counselling. It is provided by an external provider, Vivup.</p>		
	<p>2D: Staff recommend the organisation as a place to work and receive treatment</p>	<p>NSS Q23c I would recommend my organisation as a place to work</p>	<p>61% of respondents from our 2022 staff survey says that they would recommend DCH as a place to work. 66% would be happy with the standard of care provided by this organisation if a friend or relative needed treatment. Our trust collates and compares the experiences of</p>	<p>Developing activity-1</p>	<p>Chief People Officer</p>

			BAME, LGBT+ and staff with a disability/long-term health condition against other staff members in the annual staff survey to understand levels of discrimination and identify areas to improve.		
Domain 2: Workforce health and well-being overall rating				5	

Domain 3: Inclusive leadership

Domain	Outcome	Evidence	Rating	Owner (Dept/Lead)
Domain 3: Inclusive leadership	3A: Board members, system leaders (Band 9 and VSM) and those with line management responsibilities routinely demonstrate their understanding of, and commitment to, equality and health inequalities	<p>The Trust Board undertook a journey of self-discovery to deepen their understanding of the ways in which racism negatively impacts the lived experiences of staff from ethnic minority communities.</p> <p>Board members and senior leaders have at least yearly/twice yearly engagement with staff networks – for example, by attending network meetings as executive sponsors or Board leads, by supporting “History month” events.</p> <p>170-plus Senior Managers participated in an Inclusive Leadership programme focusing on ‘Seeing Differently, Responding Differently and Leading Differently’. The programme was aimed at supporting our managers to develop ‘pro-equity’ approaches within the teams they manage & lead.</p> <p>Members of our Ethnic Diversity Staff Network worked with Trust Executives to kickstart a project of Transforming People Practices. New Disciplinary Policy inspired by the Lived Disciplinary Experiences Report.</p>	<p>Achieving activity-2</p> <p>To achieve Excelling: Both equality and health inequalities are standing agenda items in all board and committee meetings. Board members and senior leaders meet frequently with staff networks.</p> <p>Board members hold services to account, allocate resources, and raise issues</p>	Trust Board

		<p>The front sheet template that is required to be completed for any Board or Committee paper, includes an impact section that highlights EDI elements to be considered.</p> <p>The Board received the WRES, WDES, Gender Pay Gap, and Staff Survey Reports for review and approval and therefore have oversight of the Trusts current progress and challenges.</p> <p>Workforce Race Equality Standard (WRES) Dorset County Hospital</p> <p>Workforce Disability Equality Standard (WDES) Dorset County Hospital</p> <p>Gender Gap Report Dorset County Hospital</p> <p>The Trust has defined executive leads for EDI and health inequalities, being the Chief People Officer and Executive Medical Director respectively.</p> <p>The Trust does not have a defined non-Executive Director for EDI matters – the Board aims to retain collective ownership and responsibility for this area. The Trust has a non-executive director (NED) Wellbeing Guardian and a NED Freedom to Speak Up champion, both of which incorporate inequalities in the scope of their role.</p>	<p>relating to equality and health inequalities on a regular basis.</p>	
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		<p>The Chief People Officer is the Chair of the EDI steering group and is accountable for EDI at Board Level.</p> <p>Exception reports around EDI are shared cascaded to the board.</p> <p>There is Mandatory EDI training for all staff, including senior leaders. 170 Band 7+ leaders participated in an Inclusive Leadership Programme. EDI related issues are discussed through EDI Steering Group, People & Culture Committee and Board.</p> <p>The Trust has recently developed executive sponsorship for the staff networks. Each network has been given an executive director who can support them to champion ideas and assist in the removal of any barriers that might be in place.</p> <table border="0"> <thead> <tr> <th data-bbox="663 1018 831 1046">Staff Network</th> <th data-bbox="898 1018 1126 1046">Executive Sponsor</th> <th></th> </tr> </thead> <tbody> <tr> <td data-bbox="663 1050 853 1107">Ethnic Diversity Executive</td> <td data-bbox="898 1050 1061 1078">Nick Johnson</td> <td data-bbox="1155 1050 1312 1078">Interim Chief</td> </tr> <tr> <td data-bbox="663 1110 837 1168">Without Limits Officer</td> <td data-bbox="898 1110 1061 1139">Emma Hallett</td> <td data-bbox="1155 1110 1402 1139">Interim Chief People</td> </tr> <tr> <td data-bbox="663 1171 846 1228">Overseas Staff LGBTQ+ Director</td> <td data-bbox="898 1171 1048 1200">Chris Hearn</td> <td data-bbox="1155 1171 1406 1200">Chief Finance Officer</td> </tr> <tr> <td></td> <td data-bbox="898 1203 1133 1232">Alastair Hutchinson</td> <td data-bbox="1155 1203 1319 1232">Chief Medical</td> </tr> </tbody> </table> <p>The Chief Executive and Board Chair have participated in an internal Reciprocal Mentoring</p>	Staff Network	Executive Sponsor		Ethnic Diversity Executive	Nick Johnson	Interim Chief	Without Limits Officer	Emma Hallett	Interim Chief People	Overseas Staff LGBTQ+ Director	Chris Hearn	Chief Finance Officer		Alastair Hutchinson	Chief Medical		
Staff Network	Executive Sponsor																		
Ethnic Diversity Executive	Nick Johnson	Interim Chief																	
Without Limits Officer	Emma Hallett	Interim Chief People																	
Overseas Staff LGBTQ+ Director	Chris Hearn	Chief Finance Officer																	
	Alastair Hutchinson	Chief Medical																	

		<p>Programme and are keen to continue this in order to understand the lived working experiences of the workforce which may influence both strategic and leadership dynamics.</p> <p>EDI content is embedded within the Trust's Future Hospital strategy and within the People Plan - including more staff and teams being empowered in a compassionate, inclusive and open culture, and improved equality, diversity and inclusion and wellbeing for all.</p> <p><u>Health Inequalities</u> In April 2022, the trust Health Inequalities lead provided a report to the Finance and Performance Committee (FPC) delivered a brief overview of activities to address Health Inequalities within Dorset County Hospital and across the Dorset ICS, progress to date and the plan for 22/23.</p> <p>There is a monthly Health Inequalities meeting to look at how to raise awareness across the organisation, look at service provision, improve data collection and diversity monitoring across the protected characteristics.</p> <p>Developed information postcards to raise awareness what health Inequalities are, to our staff. Conducted a review of waiting times for elective care by ethnicity.</p>		
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	<p>3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed</p>	<p>The board's and People and Culture Committee annual workplans have all of the EDI frameworks such as WRES, WDES, Gender Pay Gap and EDS 2022 listed and discussed at times of compliance and implementation.</p> <p>The annual EDI report as well as the recent review of the EDI Strategic plan has been fully discussed at PCC.</p> <p>The Social Value Programme reports also provide EDI-relating information that identifies outputs that shows impact. Funding networking events for Overseas staff to reduce isolation and enhance emotional wellbeing is such an example.</p> <p>Quality and Equality Impact Assessments of major policies and strategies form a strong part of the assurance process and this is reflected in the front sheets of our reporting templates as well as being an agenda item for discussion.</p> <p>BME staff risk assessments are completed as part of the employee risk assessment especially in regard to Covid 19. Findings are analysed and forms the decision making around workforce planning.</p>	<p>Achieving activity-2</p> <p>To achieve Excelling Both equality and health inequalities are standing agenda items in all board and committee meetings.</p> <p>Staff risk assessments, specific to those with any protected characteristics, are completed and monitored where relevant</p>	<p>Trust Board</p>
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	<p>3C: Board members and system leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients</p>	<p>The annual cycles for People Committee and Quality and Safety Committees ensure that staff EDI and public health inequalities are considered as part of the annual cycles by the respective lead committees.</p> <p>Annual Staff Survey results are produced and published. These are broken down by ethnicity, sexuality, gender, age, religion and disability, which impact internal action plans in relation to changes in data as a result of staff demographics and opinion.</p> <p>Campaign resumed to implement the Accessible Information Standard to support patients with communication needs around hard of hearing and/or sight impairment through posters, leaflets and briefings.</p> <p>WRES/WDES and Gender Pay Gap report and action plans agreed prior to submission and upload by the People and Culture Committee.</p>	<p>Developing activity-1</p> <p>To reach Achieving – Board members, system and senior leaders ensure the implementation and monitoring of the relevant tools below.</p> <p>Interventions for unmet goals and objectives are present for the relevant tools below.</p> <p>Organisations are able to show year on year improvement.</p> <p>Board members, system and senior leaders monitor the implementation</p>	<p>Trust Board</p>
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			<p>and impact of actions required and raised by the below tools: -</p> <p>WRES (including Model Employer)</p> <p>WDES - Impact Assessments –</p> <p>Gender Pay Gap reporting</p> <p>Accessible Information Standard</p> <p>End of employment exit interviews,</p> <p>EDS 2022</p>	
Domain 3: Inclusive leadership overall rating			5	

Third-party involvement in Domain 3 rating and review

Trade Union Rep(s):

Not within this reporting cycle.

Independent Evaluator(s)/Peer Reviewer(s):

Not within this reporting cycle.

EDS Organisation Rating (overall rating): 18

Organisation name(s): Dorset County Hospital

Those who score **under 8**, adding all outcome scores in all domains, are rated **Undeveloped**

Those who score **between 8 and 21**, adding all outcome scores in all domains, are rated **Developing**

Those who score **between 22 and 32**, adding all outcome scores in all domains, are rated **Achieving**

Those who score **33**, adding all outcome scores in all domains, are rated **Excelling**

EDS Action Plan	
EDS Lead	Year(s) active
Ebi Sosseh (Inclusion Lead)	March 2023-March 2024
EDS Sponsor	Authorisation date
Emma Hallett (Interim Chief People Officer)	21/03/2023

Domain	Outcome	Objective	Action	Completion date
Domain 1: Commissioned or provided services	1A: Patients (service users) have required levels of access to the service	Increase availability of clinic locations to include areas of deprivation	Continue to establish family hubs with local authority partners making sure maternity clinics are hosted here	Q4 23/24
	1B: Individual patients (service users) health needs are met	Personalised care and support plans and available to all women	Increase local access to specialist clinics where needed. Maternal meds network clinics to be established locally.	Q4 24/25
	1C: When patients (service users) use the service, they are free from harm	The LMNS has oversight of all Sis and HSIB reports through the safety meeting, these reports will consider the impact of culture, ethnicity and language	Continue to develop buddy arrangements with Somerset LMNS to share learning. Birthrights training to be held in both trusts.	Q2 23/24

	1D: Patients (service users) report positive experiences of the service	Ensure that the Maternity Voices feedback is reviewed and actioned appropriately to improve services	Work with MVPs and trusts on themes from the MVP survey	Q2 23/24
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Domain	Outcome	Objective	Action	Completion date
Domain 2: Workforce health and well-being	2A: When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions	The Trust will be an employer of choice which recruits and develops staff fairly, taking appropriate action whenever necessary so that talented people choose to join, remain and develop within the Trust.	Equalities data to be collated by Occupational Health and other places of referral (e.g. EAP) and made available anonymously by all protected characteristics, on a collective Trust-level basis to avoid identifying any individual.	2023/24
	2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source		Further develop line manager knowledge, skills and confidence in the inclusion agenda by providing developmental opportunities to support inclusion	2023/24
	2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source	Dignity and respect will underpin our civility agenda.	Visible campaign for zero tolerance to all forms of discrimination, bullying, harassment and victimisation, supporting a safe and caring environment for staff	2023/24

	2D: Staff recommend the organisation as a place to work and receive treatment		Continue to report on the WRES and WDES metrics and develop action plans that tackle the main issues of concern	2023/24
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Domain	Outcome	Objective	Action	Completion date
Domain 3: Inclusive leadership	3A: Board members, system leaders (Band 9 and VSM) and those with line management responsibilities routinely demonstrate their understanding of, and commitment to, equality and health inequalities	To demonstrate compassionate and inclusive leadership. We will create a culture where staff feel valued and recognised for their important and individual contributions.	Every board member and executive leader to have an EDI-related workstream	2023/24
	3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed	We will promote an environment where health inequalities can be identified in a safe and transparent way and for the organisation to learn and improve as a result.	Each Executive Management Team to sponsor or initiate an EDI-related project or activity around staff retention, improvement in services, civility or health and wellbeing	2023/24
	3C: Board members and system leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients		Develop a shadowing scheme for the board and governors around increasing visible ethnic diverse representation in the future Complete WRES and WDES board related actions	2023/24

