



Workforce Disability Equality Standard Report

2023-24

Report to	PC CiC			
Date of Meeting	23rd September 2024			
Report Title	Workforce Disability Equ	uality Standard (WDES) Report		
	2024			
Prepared By	Jan Wagner, EDIB Lead & Julie Barber, Head of OD			
Accountable Executive	Nicola Plumb			
Previously Considered By	Emma Hallett, Deputy C	PO		
Action Required	Approval			
	Assurance			
	Information			

Alignment to Strategic	Does this paper contribute to our strategic objectives					
Objectives						
Care	Yes					
Colleagues	Yes					
Communities	Yes					
Sustainability	Yes					
Implications	Describe the implications of this paper for the areas below					
Board Assurance Framework	Demonstrates development of fair and inclusive leadership, practice and culture & contributes to the 'Well Led' CQC Domain. Inclusive workplaces report better staff health and wellbeing, which is linked to markedly higher patient satisfaction and better patient outcomes, meaning that there is potential for progress in EDI work to positively contribute to all CQC Domains.					
Financial	Non-compliance with the PSED would create risks for the organisation in terms of reputation and potential fines.					
Statutory & Regulatory	The general equality duty is set out in section 149 of the Equality Act 2010. Public organisations including NHS Trusts are subject to the general duty and must have due regard to the need to: eliminate unlawful: discrimination, harassment and victimisation. The Public Sector Equality Duty (PSED) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity and foster good relations between different people when carrying out their activities.					
Equality, Diversity & Inclusion	The WDES Report 2024 signals our intention to truly value our disabled staff. Our people are our most important asset, and we want them to feel valued, welcomed, respected, they belong and matter. We recognise the link between high levels of staff satisfaction and improving patient experience and outcomes.					
Co-production & Partnership	Championing Equality, Diversity and Inclusion is a key ambition of the Trust's Social Value pledge. Supports delivery of equitable services that are informed by engagement and involvement.					

Executive Summary

The Workforce Disability Equality Standard (WDES) is mandated by the NHS Standard Contract and applies to all NHS Trusts and Foundation Trusts. The data and narrative will be published on our public website, along with our action plan, in line with regulatory requirements.

The WDES is a data-based standard and uses a series of ten measures (metrics) to improve the experiences of disabled staff in the NHS. The ten key metrics comprise workforce metrics (1-3), Staff Survey metrics (4-9a), narrative evidence of actions taken (9b) and a metric based on Board representation (10).

Annex A of attached report provides detail of the WDES National Metrics and **Annex B** is the Action Plan. The WDES actions and associated timescales have also been included in the overarching Inclusion & Belonging Strategy Action Plan.

Overall, we have seen improvements in SEVEN metrics (including metric 4a's 3 sub-sections metric 4b) and declines in TWO metrics (around career opportunities & reasonable adjustments). It has not been possible to fully analyse metric 10 (percentage difference between the organisation's Board voting membership and overall workforce) due to the introduction of joint roles across the federation, resulting in incomplete ESR information.

Action is already underway to target areas of concern and details are provided in **Annex B**.

PC CiC is recommended to note and approve the Workforce Disability Equality Standard Report 2024.

Recommendation

The PC CiC Committee is requested to:

- Receive the report for **information**
- Approve Workforce Disability Equality Standard (WDES) Report 2024

Introduction

The Workforce Disability Equality Standard (WDES) Report for the year 2023-24 provides an overview of our organisation's progress and performance in fostering an inclusive and equitable working environment for staff with disabilities. This report marks a continuation of our commitment to transparency and accountability, adhering to the WDES framework mandated by the NHS Standard Contract.

The WDES is a tool designed to drive improvements in the workplace experiences and career prospects of disabled staff within NHS Trusts and Foundation Trusts. It consists of ten metrics that draw upon data from various sources, including local recruitment and HR data, staff records, and the annual NHS Staff Survey. Additionally, metric 9b asks for narrative evidence of actions taken, to be written into the Trust's WDES annual report. These metrics enable us to evaluate our performance systematically, identify areas of concern, and implement targeted actions to enhance the working conditions for our disabled employees.

The data and insights presented in this report cover the period from 1st April 2023 to 31st March 2024, reflecting the most recent analysis of our workforce demographics. The data will be published on our public website, along with our action plan, in line with regulatory requirements.

The NHS Workforce Disability Equality Standard Metrics

The ten key metrics comprise workforce metrics (1-3), Staff Survey metrics (4-9a) and a metric based on Board representation (10).

	The NHS Workforce Disability Equality Standard Metrics							
1	Percentage of staff in each of the AfC Bands 1-9 or Medical & Dental subgroups and VSM (including Executive Board members) compared with the % of staff in the overall workforce							
2	Relative likelihood of non-Disabled staff compared to Disabled staff being appointed from shortlisting across all posts							
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.							
4	Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse I. From patients/service users, their relatives or other members of the public II. From Managers III. From other colleagues							
5	Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression and promotion							
6	Percentage of Disabled staff compared to non-disabled staff saying they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties							
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							
8	Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work							
9	NHS Staff Survey and the engagement of Disabled Staff Part (a): The engagement score for Disabled staff, compared to non-disabled staff Part (b): Has your Trust taken action to facilitate the voices of Disabled staff in your organisation to be heard?							
10	Percentage difference between the organisation's Board voting membership and its organisation's overall workforce, disaggregated: (a) By Voting Membership of the Board (b) By Executive membership of the Board							

The 2023-24 WDES data for Dorset County Hospital is based on staff disability information recorded in the Trust's Electronic Staff Records (ESR). Our latest data indicates that **4.88%** of our workforce has disclosed a disability (an increase in 0.5% from last year). There are ongoing efforts to improve transparency and disclosure rates among staff.

- Indicator 1 is based on data recorded on ESR as of the snapshot date of 31st March 2024.
- Indicators 2 and 3 rely on HR records covering the period from 1st April 2023 to 31st March 2024.
- **Indicators 4 through 9** are informed by the NHS Staff Survey, conducted over a two-month period from early October to early December 2023, with the survey results published on 30th March 2024.
- Indicator 10 is similarly based on ESR data as of 31st March 2024.

Our organisation remains committed to creating an environment where all staff, regardless of disability status, can thrive and contribute meaningfully to our shared mission. This report not only outlines our achievements but also highlights the challenges we continue to face in our journey towards full inclusivity.

Overview of changes since 2022/23 data

Fostering an inclusive culture at Dorset County Hospital (DCH) remains a central focus of our new Inclusion and Belonging Strategy (jointly launched with Dorset Healthcare with whom we have a federated alliance). Over the past year, our efforts to support this goal have seen some progress, particularly through the initiatives led by our disability staff support network, Without Limits. The network has played a vital role in raising awareness of disability issues, contributing significantly to the development of a Health Passport and Reasonable Adjustment Guidance. Additionally, we have delivered targeted training for line managers to better equip them in supporting staff with disabilities, including those with autism.

Despite these positive steps, there is a pressing need to enhance the experience of our staff with disabilities. Encouraging greater disclosure of disabilities remains a priority, as our current data shows that only a small percentage of staff have shared their disability status. This disclosure is crucial for accurately tracking our progress and identifying areas where further improvements are necessary. In response, we are committed to implementing a comprehensive Reasonable Adjustment Policy and are actively discussing the establishment of a centralised, trust-wide budget to better support department leaders and staff requiring adjustments.

While we have observed an encouraging improvement in the relative likelihood of disabled staff being recruited compared to non-disabled staff, our recent engagement survey results reveal ongoing challenges. Disabled staff continue to report a need for better career development opportunities, a stronger sense of being valued, and more accessible workplace adjustments. Additionally, there is a clear need to amplify the influence and visibility of our disability and neurodiversity networks. Addressing these areas will be critical as we strive to create a genuinely inclusive environment for all staff at DCH.

Narrative - the implications of the data

The data is attached at Annex A and the WDES Action Plan is shown at Annex B. These actions and associated timescales have been incorporated into the EDI Action Plan which supports the implementation of our Joint Inclusion & Belonging Strategy.

Metric 1: Percentage of staff in each of the AfC Bands 1-9 or Medical & Dental subgroups and VSM (including Executive Board members) compared with the % of staff in the overall workforce

The proportion of staff identifying as having a disability has **risen** from 4.28% in 2022/23 to **4.88%** in 2023/24, marking an overall increase of 0.5%. Among clinical staff, the percentage identifying as having a disability has similarly **increased**, from 3.9% in 2022/23 to 5.2% in 2023/24.

Due to low ESR disclosure numbers, no conclusions can be drawn from this data. A breakdown of workforce data for 2023-24 is shown at Annex A.

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

The relative likelihood ratio of non-disabled staff being appointed from shortlisting compared to disabled staff has **decreased** from 1.14 in 2022/23 to 0.56 in 2023/24. However, we have yet to return to the figures seen in 2020/21, when the ratio stood at 0.38.

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.

The relative likelihood of disabled staff entering the formal capability process has **decreased** from 4.24 in 2022/23 to **2.83** in 2023/24.

It is important to note that high relative likelihoods can be influenced by the small proportion of the workforce who have declared a disability on the Electronic Staff Record (ESR). If the number of disabled staff in the capability process is small (for instance, fewer than 10 cases), it is unlikely to indicate any systemic issues. This year, there was only one case within the Trust involving a member of staff identifying as disabled.

Note on Metrics 4a- 9a

It is important to note that while the ESR records show that **4.88%** of staff have a disability, Metrics 4-9a are derived from our Staff Survey, where **29.83%** of staff have identified themselves as disabled or having a long-term condition. These figures represent a significant portion of our staff who have responded to the 2023 Staff Survey.

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

(i) From patients/service users, their relatives or other members of the public

The data indicates a 6% **reduction** in the number of disabled staff reporting harassment, bullying, or abuse from patients, their relatives, or the public, with 22.8% of disabled staff reporting such behaviour. However, the disparity between disabled and non-disabled staff has **increased** by 1.4% to 5.7%, due to non-disabled staff reporting an even greater reduction on this metric.

(ii) From Managers

There was a 1.5% **decrease** from the previous year in the percentage of disabled staff who reported experiencing harassment, bullying, or abuse from managers, with 14.5% of disabled staff affected. The disparity between disabled and non-disabled staff **increased** by 1.0% to 7%.

(iii) From other colleagues

The data shows a 4.6% **decrease** from last year, with 24.2% of disabled staff reporting harassment, bullying, or abuse from other colleagues. The disparity gap between disabled and non-disabled staff **decreased** by from 9.9% to 6.2%.

These metrics remains a critical area for ongoing attention to reduce staff experiences of harassment, bullying or abuse from all perpetrators.

Metric 4b: Percentage of Disabled staff compared to non-disabled staff saying the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it

53.6% of disabled staff said that they reported incidents of harassment, bullying, or abuse—a 1.6% **increase** from the previous year, continuing the positive trend over consecutive years. All staff will continue to be encouraged to report such incidents, allowing us to target action more effectively.

Metric 5: Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression and promotion

55.3% of disabled staff reported on this metric, reflecting a 3.8% **decrease** from the previous year. However, the Trust's Staff Survey results for both disabled and non-disabled staff remain above the national average for Acute Trusts. The disparity gap between disabled and non-disabled staff **increased** by from 0.5% to 4.0%.

Metric 6: Percentage of Disabled staff compared to non-disabled staff saying they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties

The data reveals a 4.1% **decrease** for disabled staff, with 24.5% indicating they felt pressured to work despite not feeling well enough. The disparity gap between disabled and non-disabled staff has **reduced** from to 10.5% to 6.5%.

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

Satisfaction among disabled staff slightly **increased** by 0.3%, with 36.8% expressing satisfaction. Additionally, the gap between disabled and non-disabled staff **increased** from 9.9% to 11.6%, with non-disabled staff reporting a bigger increase in feeling valued.

Metric 8: Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work

This metric shows a further **reduction** of 1.6% from the previous year, in contrast to the national average, which has increased by 1.6%.

Metric 9: NHS Staff Survey and the engagement of Disabled Staff

Part (a): The engagement score for Disabled staff, compared to non-disabled staff

This year, the engagement score for disabled staff has slightly **improved** to 6.71 likewise for non-disabled staff (to 7.19), with the disparity remaining 0.5% between the two staff groups.

Part (b): Has your Trust taken action to facilitate the voices of Disabled staff in your organisation to be heard?

We answered 'yes' to this question. The 'Without Limits' Staff Support Network plays a pivotal role in advocating for its members, ensuring they receive the necessary adjustments and a supportive work environment. The network chair has a standing agenda item on the Equality, Diversity, and Inclusion (EDI) steering group.

The network has already made commendable progress in enhancing the experience of disabled staff, including: (a) Supporting the development of Reasonable Adjustment Guidance (b) Co-designing a Health Passport available to all staff

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

This year, it was not possible to extract reliable data for comparison purposes on this metric due to the introduction of new joint roles and lack of access to the ESR data for members on the DHC ESR system. The submitted data can be found in Annex A.

Next steps

With the board's approval of the new joint **Workforce Inclusion & Belonging Strategy**, our next steps will focus on aligning the following activities with the WDES indicators, with the aim of achieving measurable improvements over the next 12-18 months:

- Develop and implement a Reasonable Adjustment Policy, ideally supported by a centralised trust budget for reasonable adjustments.
- Participate in the NHS Employers Diversity in Health and Care Partners Programme.
- Enhance awareness around supporting colleagues with disabilities and making reasonable adjustments, incorporating this into the induction process for new managers.
- Strengthen support for neurodivergent staff, enabling them to excel in their roles.
- Collaborate with staff networks to improve the diversity of panel compositions and interview questions.
- Review and refine the system for making Reasonable Adjustment requests.

Further details can be found in Annex B.

Our Workforce Inclusion & Belonging strategy and action plan are regularly reviewed and refined, with progress measured using both quantitative and qualitative data as part of the monthly People Dashboard.

The WDES findings will be shared with the 'Without Limits' Staff Network and the EDI steering group to ensure that our Action Plan fully addresses the needs of disabled staff and identifies any additional areas for improvement across the Trust.

Annex A - WDES National Metrics Report

Detailed below is the organisation's WDES data which was submitted in May 2024 covering the period 1 April 2023 – 31 March 2024.

Where data is available, year-on-year comparisons have been made.

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)

Note: Due to the low percentage of staff recorded as having a disability on the ESR (4.88%), it has not been possible to draw meaningful conclusions from this data. Additionally, this low percentage raises concerns about potentially identifying individuals at specific grades. As a result, the majority of the data for Metric 1 has been presented in aggregate form.

	NON-CL	INICAL						
	DISABLED	NOT DISABLED	UNSPECIFIED	TOTAL				
Below Band 1	0	0	0	0				
Band 1	0	8	4	12				
Band 2	21	322	41	384				
Band 3	11	180	21	212				
Band 4	9	109	23	141				
Band 5	4	85	10	99				
Band 6	1	60	7	68				
Band 7	5	46	8	59				
Band 8 - Range A	2	46	4	52				
Band 8 - Range B	0	20	4	24				
Band 8 - Range C	0	10	2	12				
Band 8 - Range D	0	2	0	2				
Band 9	1	6	1	8				
All other	0	4	4	8				
Total	54	901	129	1084				

CLINICAL								
	DISABLED	NOT DISABLED	UNSPECIFIED	TOTAL				
Below Band 1	0	0	0	0				
Band 1	0	0	0	0				
Band 2	46	514	40	600				
Band 3	28	484	57	569				
Band 4	13	154	19	186				
Band 5	30	576	65	671				
Band 6	30	477	71	578				
Band 7	11	279	52	342				
Band 8 - Range A	1	60	19	80				
Band 8 - Range B	0	18	3	21				
Band 8 - Range C	1	6	1	8				
Band 8 - Range D	0	1	1	2				
Band 9	0	2	0	2				
VSM	0	1	0	1				
All other	1	8	1	10				
Total	161	2580	329	3070				

CLINICAL									
DISABLED NOT DISABLED UNSPECIFIED TOTAL									
Consultant	2	137	61	200					
Non-Consultant Career									
Grade	5	118	22	145					
Trainee Grade	14	276	51	341					
Total	21	531	134	686					

WORKFORCE TOTAL	236	4012	592	4840

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

(Data source: Trust's recruitment & ESR data)

Relative likelihood of non-	Relative likelihood	Relative likelihood	A figure below 1.00
Disabled staff compared to	in	in	indicates that Disabled staff
Disabled staff being	2022-23	2023-24	are more likely than non-
appointed from shortlisting	1.14	0.56	Disabled staff to be
	1.1-7	0.30	appointed from shortlisting

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 of	Relative likelihood	Relative likelihood	A figure above 1.00
Disabled staff compared to	in	in	indicates that Disabled staff
non-Disabled staff entering	2022-23	2023-24	are more likely than non-
	4.24	2.83	Disabled staff to enter the
	4.24	2.03	formal capability process

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

(Data source: Q.13a-d, NHS Staff Survey)

4a: % of		2021			2022			2023	
Disabled staff	Disabled	Non-	% points	Disabled	Non-	% points	Disabled	Non-	% points
compared to	staff	disabled	difference	staff	disabled	difference	staff	disabled	difference
non-disabled		staff	(+/-)		staff	(+/-)		staff	(+/-)
staff									
experiencing									
harassment,									
bullying or									
abuse from:									
(i)									
Patients/service									
users, their	32.4	23.4	-9	28.8	24.5	-4.3	22.8	17.1	-5.7
relatives or	02.4	20.4	J	20.0	24.0	7.0	22.0	17.1	0.7
other members									
of the public									
(ii) Managers	17.2	9.2	-8	16.0	9.9	-6.1	14.5	7.5	-7

(iii) Other colleagues	26.5	20.4	-6.1	28.8	18.9	-9.9	24.2	18.0	-6.1
4b: % of Disabled staff compared to non-disabled staff saying the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it	50.8	44.2	-6.6	52.0	42.0	-10.0	53.6	51.6	-2

Metric 5: Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression and promotion (*Data source: Q.14, NHS Staff Survey*)

2021	2021			2022			2023	
Disable d Staff	Non- disable d staff	Differenc e (+/-)	Disable d Staff	Non- disable d staff	Differenc e (+/-)	Disable d Staff	Non- disable d staff	Differenc e (+/-)
60.7	61.7	-1	59.1	58.6	0.5	55.3	59.3	-4

Metric 6: Percentage of Disabled staff compared to non-disabled staff saying they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties. (Data source: Q11e, NHS Staff Survey)

2021			2022				2023	
Disable d Staff	Non- disable d staff	Differenc e (+/-)	Disable d Staff	Non- disable d staff	Differenc e (+/-)	Disable d Staff	Non- disable d staff	Differenc e (+/-)
27.8	19.6	- 8.2	28.6	18.0	-10.6	24.5	18.0	-6.5

Metric 7: Percentage of Disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their organisation values their work (*Data source: Q5f, NHS Staff Survey*)

2021			2022				2023		
	Disable d Staff	Non- disable d staff	Differenc e (+/-)	Disable d Staff	Non- disable d staff	Differenc e (+/-)	Disable d Staff	Non- disable d staff	Differenc e (+/-)
	39.8	47.0	-7.2	36.5	46.4	-9.9	36.8	48.4	-11.6

Metric 8: Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work

(Data source: Q.26b, NHS Staff Survey - this question only includes the responses of Disabled staff)

2021	2022	2023
74.1	71.9	70.3

Metric 9: NHS Staff Survey and the engagement of Disabled Staff

Part (a): The engagement score for Disabled staff, compared to non-disabled staff. The score for disabled staff has **increased** again this year with disparity remaining at -0.5%.

2021			2022				2023	
Disable d Staff	Non- disable d staff	Differenc e (+/-)	Disable d Staff	Non- disable d staff	Differenc e (+/-)	Disable d Staff	Non- disable d staff	Differenc e (+/-)
6.9	7.2	-0.3	6.6	7.1	-0.5	6.7	7.2	-0.5

(Data source: NHS Staff Survey)

Part (b): Has your Trust taken action to facilitate the voices of Disabled staff in your organisation to be heard? **Yes.**

We were asked to provide at least one practical example of current action being taken in the last 12 months to engage with Disabled staff: We have a 'Without Limits' Staff Support Network who meet regularly to advocate for their members to have the necessary adjustments and supportive environment at work. The network chair has a standing agenda item at the EDI steering group.

(Data source: WDES Submission, May 2024)

Part (b): Has your Trust taken action to facilitate the voices of Disabled staff in your organisation to be heard? **Yes.**

We were asked to provide at least one practical example of current action being taken in the last 12 months to engage with Disabled staff: The Without Limits staff network group have been co-creating a Health Passport and Reasonable Adjustment Guidance for staff to be able to declare any support needs that they may have.

(Data source: WDES Submission, May 2024)

Metric 10: Percentage difference between the organisation's Board voting membership and its organisation's overall workforce, disaggregated).

This year, it was not possible to extract reliable data for comparison purposes on this metric due to the introduction of new joint roles and lack of access to the ESR data for members on the DHC ESR system.

Snapshot as at 31/3/24	Disabled %	Non-disabled %	Disability unknown %	
Total Board members	6.67	66.67	26.67	
By Voting Membership of the Board	7.14	71.43	21.43	
By Non-Voting Membership of the Board	0.00	50.00	100	
By Executive Membership of the Board	0	50	50	
By Non-Executive Membership of the Board	14.29	85.71	0	
Difference (Total Board – Overall Workforce)	2	-16	14	
Difference (Voting membership – Overall Workforce)	2	-11	9	
Difference (Executive membership – Overall workforce)	-5	-33	38	

(Data source: WDES Submission, May 2024)

Annex B – WDES Action Plan (EDI Plan and Priorities)

Conscious Inclusion and Collective Responsibility

1. Zero Tolerance for Bullying, Harassment, and Discrimination (WDES Metric 4):

We will enforce a measurable zero-tolerance approach to bullying, harassment, and discrimination, directly addressing WDES Metrics 4a, 4b, 4c, and 4d, which focus on the experiences of disabled staff with these behaviours. This will be supported by a clear statement from our Chief Executive and the development of a staff-on-staff reporting system in collaboration with the Freedom to Speak Up Guardian (FTSUG) to improve data quality and support timely action.

2. Active Bystander Training (WDES Metric 4):

 To further address WDES Metrics 4a through 4d, we will roll out Active Bystander training across the Trust, empowering all staff to challenge inappropriate behaviours and support colleagues who may be experiencing harassment or discrimination.

3. Task and Finish Groups (WDES Metric 4):

 Establish Task and Finish Groups to ensure that incidents of harassment, bullying, or abuse, particularly those affecting disabled staff, are promptly reported and effectively addressed.
 This initiative aligns with WDES Metrics 4a to 4d, focusing on improving the reporting and support mechanisms for affected staff.

4. Respect and Resolution Policy (WDES Metric 4):

 We will develop and implement a new Respect and Resolution policy, which will contribute to WDES Metric 4b by ensuring a cohesive approach to resolving conflicts and supporting disabled staff who experience harassment, bullying, or discrimination.

Inclusive Resourcing and Talent Development

1. Diverse Panel Compositions and Recruitment Training (WDES Metrics 2 and 5):

To support WDES Metric 2 (related to the likelihood of disabled staff being appointed from shortlisting) and WDES Metric 5 (concerning equal opportunities for career progression), we will improve the diversity of recruitment panels, particularly for roles at Band 6 and above. Additionally, we will redesign recruitment and selection training to include unconscious bias, reasonable adjustments, and gender awareness.

2. Positive Action Programmes (WDES Metric 5):

 We will expand positive action programmes, such as Beyond Difference, specifically targeting WDES Metric 5 by supporting the career progression of underrepresented and marginalised groups, including disabled staff.

3. Career Conversations and Transparency (WDES Metric 5):

Embedding structured career conversations as part of the annual performance appraisal process, we will also introduce greater transparency in promotion, pay, and reward processes. These actions are directly aligned with WDES Metric 5, which measures perceptions of equal opportunities for career advancement among disabled staff.

Equity by Design (Policy, Processes, Practices)

1. Review and Revise Equality Impact Assessments (EIA) (WDES Metrics 1, 3, and 5):

We will review and enhance our EIA framework to ensure it is fully embedded as a decision-making tool, impacting WDES Metric 1 (workforce representation), Metric 3 (entry into the formal capability process), and Metric 5 (career progression), by systematically removing barriers that disproportionately affect disabled staff.

2. Support for Staff with Disabilities (WDES Metrics 7 and 8):

 Occupational Health will continue to support staff who have disabilities or long-term health conditions, ensuring they receive the necessary reasonable adjustments, directly addressing WDES Metric 8. We will also promote Access to Work, further supporting the ability of disabled staff to perform their roles effectively.

3. Just and Learning Culture (WDES Metrics 4 and 6):

Launch an awareness campaign to foster a Just and Learning Culture, addressing WDES Metrics 4 (bullying and harassment) and 6 (pressure from managers to work despite not feeling well enough) by ensuring that our policies and practices promote an inclusive and supportive environment.

Inclusive Leadership

1. Conscious Inclusion and Leadership Training (WDES Metrics 5 and 9):

To enhance WDES Metric 5 (career progression) and Metric 9 (engagement), all line managers and HR team members will undergo Conscious Inclusion and Inclusive Leadership training, ensuring they are equipped to support diverse teams effectively and foster an environment where disabled staff can thrive.

2. EDI Objectives for Leaders (WDES Metric 9):

 Including specific, measurable Equality, Diversity, and Inclusion (EDI) objectives in the annual appraisals of all leaders will directly contribute to WDES Metric 9 by holding leaders accountable for fostering an inclusive culture and improving engagement among disabled staff.

3. Engagement with Staff Networks (WDES Metric 9):

Senior management and Board members will engage regularly with staff networks,
 supporting WDES Metric 9 by actively listening to and addressing the concerns of disabled staff, ensuring their voices are heard at the highest levels of decision-making.

These actions are strategically aligned with the Workforce Disability Equality Standard (WDES) metrics and are designed to create a more inclusive environment, addressing specific areas where disabled staff have reported challenges, and ensuring continuous improvement across the Trust.

Measures of Success

Our progress in Equality, Diversity, and Inclusion (EDI) will be systematically evaluated against realistic and achievable targets, allowing us to continuously learn, develop, and improve. By cross-referencing our action plan with data and key documents, we will ensure all initiatives are effectively implemented and their impact is measurable. A comprehensive dashboard of inclusion metrics will be established for ongoing monitoring of progress.

Evidence of success will be demonstrated through the following outcomes:

- Leadership Commitment: Board members and leaders at all levels will visibly and consistently
 demonstrate their commitment to equality, diversity, and inclusion, as evidenced by their
 participation in training, strategic initiatives, and the integration of EDI objectives into their
 performance appraisals.
- **Inclusive Governance**: Board and Committee papers will routinely include assessments of equality-related impacts, with clear strategies for mitigation and management, ensuring that EDI considerations are embedded in all decision-making processes.
- Safe and Supportive Work Environment: Staff will report feeling safe from abuse, harassment, bullying, and physical violence at work, as reflected in data from the Staff Survey, quarterly staff surveys, Employee Relations data, and WRES & WDES metrics.
- Fair Career Progression: Staff will express confidence in the Trust's provision of equal opportunities for career progression and promotion, supported by improvements in shortlist-to-hire data, particularly for underrepresented groups.
- **Positive Workplace Culture**: The Trust will be recommended by staff as a great place to work and receive care, as indicated by the Staff Survey, quarterly surveys, and qualitative feedback.
- **Diverse Leadership**: There will be a marked increase in the diversity of senior management and leadership structures, with demonstrable progress in workforce demographics, particularly at Band 8a and above, in line with a clearly defined trajectory of progress.
- **Improved Staff Experiences**: Disabled staff and those from other underrepresented groups will report improved experiences in the workplace, evidenced by increased engagement scores, satisfaction with reasonable adjustments, and a reduction in negative outcomes as per WDES and WRES metrics.
- Positive Service Feedback: Patients and service users will consistently report positive experiences
 of the Trust's services, as reflected in Friends and Family Test (FFT) results and other patient
 feedback mechanisms.

These measures of success will guide our EDI efforts, ensuring that we not only meet our WDES obligations but also foster a truly inclusive and supportive environment for all staff and service users.