Equality, Diversity & Inclusion

Workforce Disability Equality Standard (WDES)

2023

Introduction by Sharon Woma
Equality, Diversity and Inclusion Lead

It is an honour to present this year's Workforce Disability Equality Standard (WDES) report. I was delighted to find that there are a number of initiatives underway that will have a positive impact on the working life experience of our workforce.

Last year's action plan, in response to the data at the time, included initiatives that would focus on the disparities linked to recruitment and retention, harassment, bullying and abuse and discrimination. This included working with partners across the system to jointly review our recruitment pages, engaging with different communities to reach candidates that might not typically apply for NHS roles and developing recruiting manager training to reduce bias in the recruitment process. I am proud to announce that the Trust has achieved its disability confident employer award this year, this is the highest level of accreditation and a recognition that the Trust is increasing and challenging attitudes toward disability, removing barrier and providing opportunities for disabled people to realise their potential

Assessing our performance is an important part of this work and the WDES framework enables us to measure progress (see below and page 3) that builds a picture of the impact our initiatives are having and helps us to identify new opportunities in what is an 'ever changing' cultural landscape.

- Percentage of staff who experienced bullying and harassment from managers improved ⬆ 1.7%, from 16.9% to 15.2% (national avg. 17.1%)
- Percentage of staff who felt the Trust has provided reasonable adjustments improved ⬆ 1.8% 70.5% to 72.3% (national avg. 71.8%)
- Increased the number of disabled staff in the organisation from ⬆ 2.42% to 2.98%
- Percentage of staff who experienced bullying and harassment from colleagues worsened ⬇ 1.3% from 27.5% to 28.8% (national avg. 26.9%)
- Percentage of staff who felt the Trust valued their work worsened ⬇ 3.3% from 31.3% to 28% (national avg. 32.5%)

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Progress is slow because change takes time, however, we remain committed to creating an environment where all our staff feel included and empowered and are able to contribute towards the success of the Trust, and this includes looking after our staff's welfare.

The Trust now has an opportunity to refocus its attention and work much closer with staff to identify what matters to them so that we can tailor our EDI offer. As I said, change takes time, but we also want to capitalise on some quick wins and there will be some exciting initiatives in-year that will help us to mobilise staff across the Trust who want to make a difference in our efforts to improve Equality Diversity and Inclusion.

As an Integrated Care System, BSW Together EDI Leads work together to address workforce and patient disparities. Over the past year collectively on implementing methods that improve inclusive employment and work experience opportunities targeting under-represented communities; reviewed and benchmarked workforce data such as WRES and WDES across the system with corresponding collaborative sharing of best practice and recovery plans and we jointly delivered support for staff networks.

Over the coming year, the system EDI group will work together to strengthen our staff networks; develop shared resources to deliver EDI-related staff training; and collaborate to improve the recruitment processes. I have recently accepted the role of co-chair of this group, working closely with this group will mean that I have regional influence and will be able to share best practice externally, as well as bring best practice into the Trust; increasing collaboration, when possible, will also mean that we can use our limited resources more effectively. Nationally, NHS England have recently launched the NHS Equality Diversity & Inclusion Improvement Plan, the plan, which sets out six high impact actions has been welcomed by the Trust. The Trust's EDI action plan which includes WRES actions, will be informed by the national plan.

I am proud of the work of our Differently Abled Staff Network, which is led by strong chairs and their voice and influence is instrumental to this work, the network has worked with the Trust to improve accessibility for both patients and staff.

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Not all our staff declare they have a disability, and this can sometimes mean that we are not allocating the right amount of resources for them or they are potentially not being supported. We will continue to promote the importance of sharing this information in 2023/24 and to raise awareness about the issues faced by disabled staff and patients.

If you would like to find out how you can support the Trust to improve disability inclusion please get in touch.

Sharon Woma
Equality Diversity & Inclusion Lead

Equality, diversity, and inclusion improvement plan – NHS England

NHS England has recently launched an improvement plan which will be adopted nationally, this plan heralds a more consistent approach to tackling inequalities in our workforce. The Trust is committed to implementing the plan and we will indicate where our 2023/24 action plan responds to the High Impact Actions highlighted opposite.

The aim of this plan is to improve equality, diversity and inclusion, and to enhance the sense of belonging for NHS staff to improve their experience. The high impact actions are intended to be intersectional, this recognises that people have complex and multiple identities, and that multiple forms of inequality or disadvantage sometimes combine to create obstacles that cannot be addressed through the lens of a single characteristic in isolation.

The NHS EDI Improvement Plan will also provide greater opportunities to collaborate at system and regional level. The Trust is building a profile as 'change agents' and we have recently become hosts to a national network of EDI practitioners who are keen to transform inclusion work. We will work more closely with regulators and partner organisations to identify and implement best practice; and work with our staff with lived experience and wider workforce to make 'Inclusion' everyone's business.

The following action plan is referenced throughout the document:

1 Chief executives, chairs and board members must have specific and measurable EDI objectives to which they will be individually and collectively accountable.	**4** Develop and implement an improvement plan to address health inequalities within the workforce.
2 Embed fair and inclusive recruitment processes and talent management strategies that target under-representation and lack of diversity.	**5** Implement a comprehensive induction, onboarding and development programme for internationally-recruited staff.
3 Develop and implement an improvement plan to eliminate pay gaps.	**6** Create an environment that eliminates the conditions in which bullying, discrimination, harassment and physical violence at work occur.

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What is the Workforce Disability Equality Standard (WDES)

The NHS Workforce Disability Equality Standard (WDES) helps NHS commissioners and NHS healthcare providers (including independent organisations) achieve workplace parity between their disabled (see Equality Act definition below) and non-disabled staff. It aims to achieve this by reviewing data against a number of key performance indicators, and obliges organisations to produce action plans to close identified gaps in career and workplace experiences. The 10 WDES indicators are:

1	Percentage of staff in each of the AfC Bands 1-9 and VSM
2	Relative likelihood of staff being appointed from shortlisting across all posts
3	Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal capability investigation
4	a) Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse b) Percentage of staff who reported bullying and harassment
5	Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion
6	Percentage of Disabled staff compared to non-disabled staff saying that they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties
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	a) The staff engagement score for Disabled staff, compared to non-disabled staff and the overall engagement score for the organisation 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

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A WDES return is completed annually. As well as requiring comparative information on workforce indicators for disabled and non-disabled staff, it also compares national NHS Staff Survey data for these groups. Progress is measured against the WDES indicators, and we compare our present position with results from previous years.

Aims of this report are to:

- Compare the workplace and career experiences of our Disabled and Non-Disabled staff using data drawn from our Electronic Staff Records as at 31.03.2023 and NHS Staff Survey results in 2022
- Highlight key findings in the data
- Provide a detailed analysis of the metrics data at Trust level and this is benchmarked against organisations of a similar size
- Provide a year-on-year comparison with available results from earlier years
- Highlight some of the work the Trust and Differently Abled Staff Network (our staff network for disabled staff) have done during the year to support disability inclusion and improve accessibility
- Raise awareness of disability equality within the NHS workforce and outline some of the challenges that Disabled staff collectively experience at work.

The Equality Act 2010 defines disability as: A physical or mental impairment that has a 'substantial' and 'long-term' negative effect on your ability to do normal daily activities.

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Summary of WDES indicator scores

Our findings in the remainder of the report indicate that we maintained our performance with small improvements in reducing bullying and harassment from managers and staff felt reasonable adjustment were made. However there is room for improvement and when viewed against our benchmark (scores of Trusts of a similar size), we have scored worse in a few areas including bullying and harassment from patients and colleagues, disabled staff sense of feeling valued by the Trust and making workplace adjustments, but better than the benchmark average for career progression.

There has been an improvement in two metrics – representation (number of disabled staff in the workforce) and the Trust making adequate adjustments for staff to do their work (albeit lower than the national average). There has been a small decline in three metrics including 'appointment from shortlisting', 'percentage of staff who feel the Trust provides equal opportunities' and percentage of staff who felt pressure to come to work despite not feeling well enough to do so.

The largest deterioration was in staff who feel satisfied with the extent to which the Trust values their work, which fell by 3.3 percentage points from 31.3 to 28%. Relative likelihood of entering formal a capability process also increased from 0 to 3.63 however the data was skewed by non-disclosures, only one disabled member of staff entered a capability period (compared to seven non-disabled staff and one unknown) in a two year period. Disabled staff are over-represented in Bands 1-5 (68.5%) and under-represented in senior roles, Band 8A and above (4.14%), and there are no recorded board members with a disability.

The Trust has undertaken over the past twelve months, including the improvements made that qualified the Trust for the Disability Confident Employer Leader status. We have taken steps to improve recruitment process to attract more job applicants from diverse backgrounds, including providing disability awareness mandatory training and enhancing our recruiting manager training to help them to make adequate/reasonable adjustments. We have a disabled staff network, the Differently Able Network who are instrumental in driving organisational change and raising awareness and all networks represent the voice of staff at the Equality Diversity and Inclusion strategic group meeting (EDI Group).

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Much of our efforts over the past year has focussed on inclusive recruitment, and the focus must now shift to addressing some of the enduring challenges highlighted above which are faced by existing staff.

In addition, we cannot be wholly confident about our findings due to the disparity in number between our staff who self-declare a disability on our recording system, and our staff who declare a disability via the NHS Staff Survey.

We have developed an action plan that builds on work we have done in previous years and this responds to the areas where we currently need to improve and where relevant to the High Impact Actions set out by NHS England. We will also continue to engage with Equality, Diversity and Inclusion (EDI) leads and staff networks across the Bath, Swindon and Wiltshire Integrated Care System, to share best practice and resources and to build a shared action plan. The range of issues are consistent across our organisations (although key steps to achieve the actions and completion dates may differ). Finally, we will continue to work with our network for disabled staff who act as an important source of advice, support and awareness-raising for staff in the Trust and partner with them to understand the lived experience behind the data in this report.

The following tables overleaf provide a five year trend of all the metrics.

The data below has been collected since 2019. The data is based either as a snapshot 'as at' 31 March (in each year, for metrics 1 and 10), the year running to 31 March (for metrics 2 and 9b) or the average (mean) of the two years to 31 March (for metric 3).

Note: the staff survey was used to inform this report indicates that we have more disabled staff, than is recorded in our electronic record system which also is referenced in this report. 713 staff (22.6%) who completed the staff survey declared they had a disability or long term health condition, compared to 169 staff (2.98%) who have declared a disability via ESR.

RAG rating 2022 to 2023 comparison:

- Improvement for staff (green) / Similar findings (amber) / Deterioration for staff (red)

WDES metric based on NHS Staff Survey data (part 1)		Year					Direction of Travel 2022 – 2023
Metric	Description	2018/19	2019/20	2020/21	2021/22	2022/23	
1	Percentage of Disabled Staff	1.35%	1.40%	1.51%	2.42%	2.98%	⬆
2	Relative likelihood of non-disabled staff applicants being appointed from shortlisting across all posts compared to Disabled staff	1.66	1.52	1.12	0.98	1.44	⬇
3	Relative likelihood of Disabled staff entering the formal capability process (performance management rather than ill health) compared to non-disabled staff	2.62	2.83	0.00	0.00	3.63 Skewed by non-disclosure	⬇
10	No of Disabled voting board members	0.00	0.00	0.00	0.00	0.00	⬅➡

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WDES Metric based on NHS Staff Survey data (part 2)		Year						
Metric	Description	Disability Status (Y/N)	2018-19 %	2019-20 %	2020-21 %	2021-22 %	2022-23 %	Direction of Travel 2022 to 2023*
4	Percentage of staff experiencing harassment, bullying or abuse in the last 12 months (average of all categories)	Yes	29.5	25.0	22.2	27.4	27.0	↔➔
		No	17.1	16.6	17.8	20.5	18.4	⬆
5	Percentage of staff believing that Trust provides equal opportunities for career progression or promotion	Yes	46.2	52.7	50.0	55.3	54.0	⬇
		No	55.1	61.6	58.4	56.2	57.3	⬆
6	Percentage of staff saying that they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties	Yes	37.9	27.4	32.7	29.4	30.7	⬇
		No	23.2	18.4	23.0	23.9	21.2	⬆
7	Percentage of staff saying that they are satisfied with the extent to which their organisation values their work	Yes	28.7	30.8	41.8	31.3	28.0	⬇
		No	44.8	43.4	46.2	38.2	40.1	⬆
8	Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work	Yes	75.0	82.4	81.4	70.5	72.3	⬆
9a	Staff engagement score (a composite of nine questions)	Yes	6.4	6.6	6.7	6.3	6.3	↔➔
		No	7.0	7.0	7.0	6.7	6.8	↔➔

*Directional arrows refer to changes in reporting between 2022 and 23; metrics 4-8 (staff survey) - movement is partly due to an increase in the number of staff feeling confident to respond to questions about their perception or experience.

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The national and regional picture 2021

2021 data shows an increase of 0.3 percentage points to **3.7%** of the total workforce. 59% of Trusts have five or fewer disabled staff in bands 8c and above, including medical staff.

Southwest: 4%
GWH: 2.98%

Non-disabled applicants were **1.11** times more likely to be appointed from shortlisting compared to Disabled applicants; this is lower than 2020, when the ratio was 1.20 and 1.18 in 2019.

Southwest: 1.12
GWH: 1.44

Disabled staff were **1.94** times more likely to enter the formal capability process as their non-disabled colleagues. By capability, we mean capability on the basis of performance, not ill-health.

Southwest: 2.21
GWH: 3.63

25.3% of disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse in the last 12 months. Average of all metrics (from patients, line managers and staff).

Southwest: 21.11%
GWH: 27%

78.4% of disabled staff believed that they had equal opportunities for career progression or promotion. This is 6.6 percentage points lower than the figure for non-disabled staff.

Southwest: 52.4%
GWH: 54%

Notes:

There are no disabled board members according to the Trust records.

This information is compared with the national data of 2020/21, the most up-to-date available data.

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31.1% of disabled staff say that they have felt pressure from their manager to come to work, despite not feeling well enough. There was an increase of presenteeism for both disabled and non-disabled staff in 2020.

Southwest: 27.10%

GWH: 30.7%

39.4% of disabled staff say that they are satisfied with the extent to which their organisation values their work. Compared to half of Non-disabled staff.

Southwest: 35.1%

GWH: 28%

76.6% of disabled staff said that their employer has made adequate adjustment(s) to enable them to carry out their work.

Southwest: 75.1%

GWH: 72.3%

Disabled staff continue to feel less engaged than non-disabled staff. The engagement score for disabled staff was **6.68**, compared to 7.15 for non-disabled staff.

Southwest: 6.5

GWH: 6.3

Overall, **3.7%** of board members have declared a disability, the same figure as the overall workforce.

Southwest: 3.1%

GWH: 0%

Notes:

There are no disabled board members according to the Trust records.

This information is compared with the national data of 2020/21, the most up-to-date available data.

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Indicator 1: Workforce representation

The following graphs show the changing proportions of Disabled staff in movement between pay bands over the last 2 years, for clinical and non clinical staff.
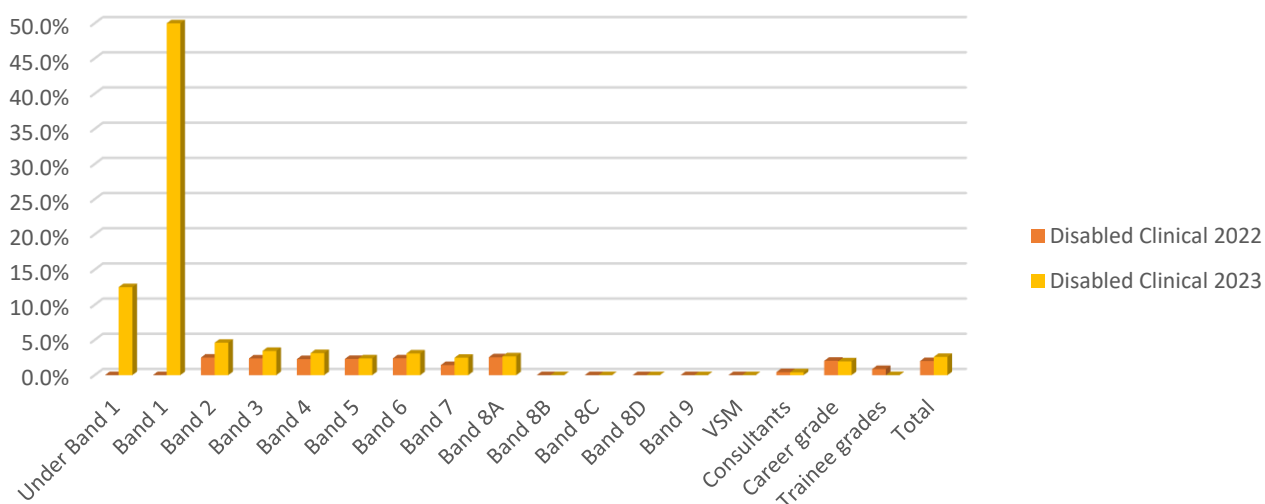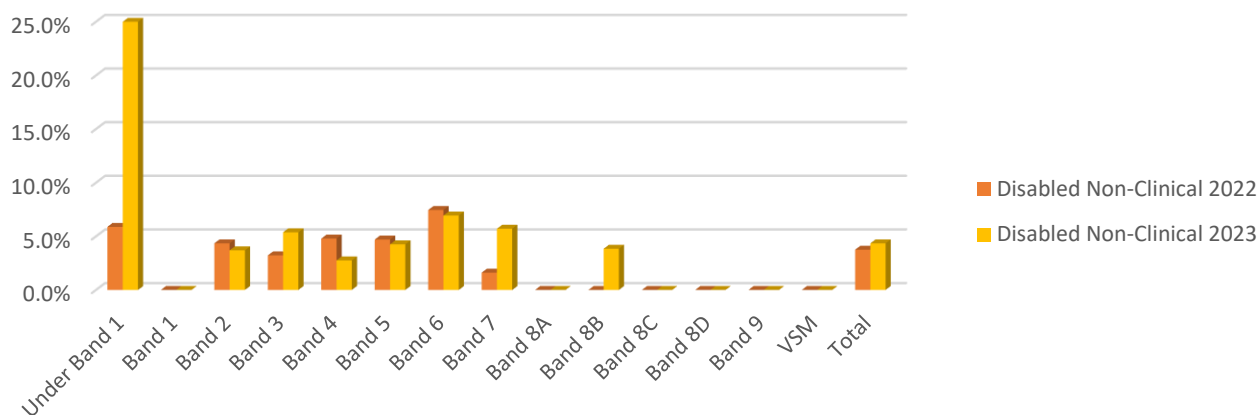
Key points:

- Changes in WDES statistics appear more marked, given the small numbers of disabled staff at each Banding.
- Band 1 Clinical staff increased from zero to one member of staff and Non-clinical Band 1 staff increased from one to two members of staff
- Non-clinical Band 7 has increased from one staff (1.6%) to four staff (5.7%)
- The greatest reduction was in 2 percentage points, Non-clinical Band 4 roles reduced from 7 staff (4.8) to 4 staff (2.8%)

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Workforce representation 2019-2023

169 (2.98%) staff have recorded a disability on their NHS Electronic Staff Record (ESR) as at 31 March 2023, an increase of 36 since 2021/22 and our records indicate there were 4300 (75.77%) non-disabled staff as at 31 March 2023. The trend remains positive and the number of Disabled staff has increased incrementally over the past five years (see graph). Our data confirms there has been an increase in applications from disabled people, this will be influenced by an increase in people feeling more confident about self-disclosure at the interview stage and our recruitment efforts to promote jobs to different communities to attract a more diverse candidate pool.

The Trust is committed to increasing representation at all levels of the organisation, continuing to improve the recruitment process will support this, particularly addressing any shortlisting to appointment disparities.

Year	Disabled Staff	Growth since previous year	Non-disabled staff	Unknown status	Total	Percentage of total workforce		
						% Disabled	% Non-disabled	% Unknown
2019	64		3298	1366	4728	1.35%	69.75%	28.89%
2020	73	↑ 14.06%	3720	1418	5211	1.4%	71.39%	27.21%
2021	83	↑ 13.7%	3999	1421	5503	1.51%	72.67%	25.82%
2022	133	↑ 60.24%	4133	1239	5505	2.42%	75.08%	22.51%
2023	169	↑ 27.07%	4300	1206	5675	2.98%	75.77%	21.25%

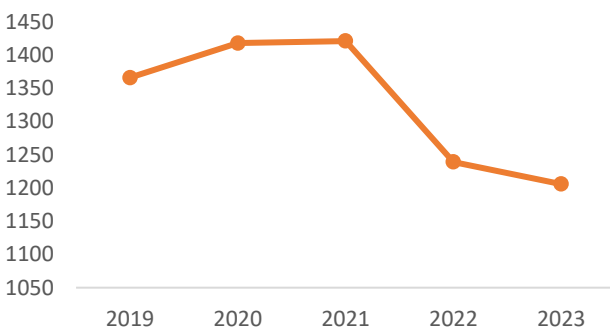**Workforce Disability Equality Standard | 2023**

No. of disabled staff
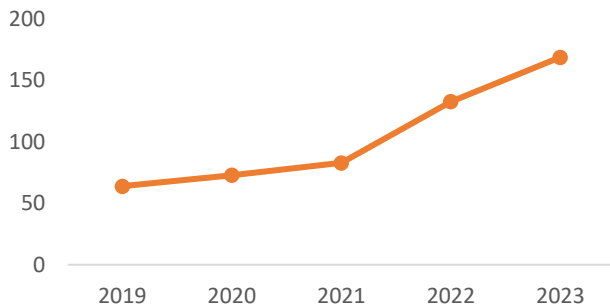
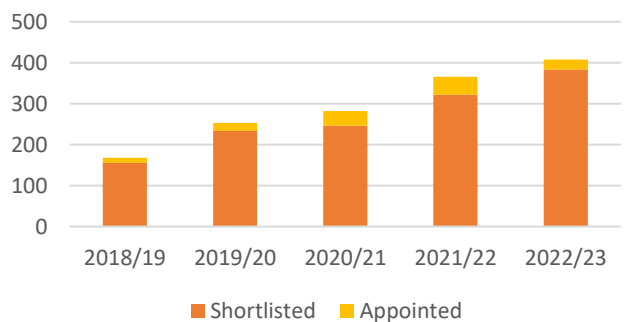## Growth since previous year
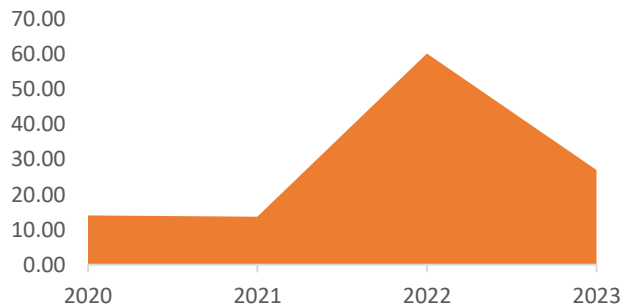
No. of staff where status is unknown

Shortlisting to appointment

0.56%   Increase in percentage of disabled staff in total workforce, 2.42% to 2.98%

116 Disabled staff are employed in clinical roles and 53 in non-clinical roles.

There is one disabled member of staff in Band 8A above in a non-clinical role, 3 in clinical roles and 3 in medical roles including one consultant.

68% of Disabled staff are below Band 5.

The table overleaf highlights that disabled staff are over-represented in Bands 1 to 5, and under-represented in Bands 8a and above, compared to non-disabled staff.

Reducing the number of staff who have not disclosed their status (unknown) would help to build a more accurate picture.

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Percentage of disabled staff in each of the Agenda for Change (AfC) bands 1 – 9, VSM (including executive board members), medical/dental and other staff, compared with the percentage of non-disabled staff in these categories:

2023	Non-Clinical						Clinical, Medical & Dental					
	Disabled	Non-Disabled	Not Known	Total	Disabled %	Non-Disabled %	Disabled	Non-Disabled	Not Known	Total	Disabled %	Non-Disabled %
Under Band 1	2	4	2	8	25.0%	50.0%	1	7	0	8	12.5%	87.5%
Band 1	0	1	0	1	0.0%	100.0%	1	1	0	2	50.0%	50.0%
Band 2	13	279	60	352	3.7%	79.3%	10	162	45	217	4.6%	74.7%
Band 3	20	289	63	372	5.4%	77.7%	29	657	156	842	3.4%	78.0%
Band 4	4	99	42	145	2.8%	68.3%	8	147	100	255	3.1%	57.6%
Band 5	4	75	15	94	4.3%	79.8%	23	722	218	963	2.4%	75.0%
Band 6	5	52	15	72	6.9%	72.2%	27	661	188	876	3.1%	75.5%
Band 7	4	55	11	70	5.7%	78.6%	11	322	111	444	2.5%	72.5%
Band 8A	0	36	10	46	0.0%	78.3%	3	86	23	112	2.7%	76.8%
Band 8B	1	25	0	26	3.8%	96.2%	0	17	8	25	0.0%	68.0%
Band 8C	0	10	5	15	0.0%	66.7%	0	7	0	7	0.0%	100.0%
Band 8D	0	4	1	5	0.0%	80.0%	0	10	0	10	0.0%	100.0%
Band 9	0	7	0	7	0.0%	100.0%	0	2	0	2	0.0%	100.0%
VSM	0	6	0	6	0.0%	100.0%	0	1	0	1	0.0%	100.0%
Consultant							1	200	47	248	0.4%	80.6%
Non-consultants Career Grade							2	82	18	102	2.0%	80.4%
Trainee Grades							0	274	68	342	0.0%	80.1%
Other												
Total	53	942	224	1219			116	3358	982	4456		

Representation in Lower- Upper Banding	Disabled	Non-Disabled	Unknown
Lower Bands (1-5)	68.05%	56.81%	58.13%
Middle Bands (6-7)	27.81%	25.35%	26.95%
Upper Bands (8a and above)	4.14%	17.84%	14.93%

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Our role as an Anchor Institution

The impact the NHS has on people's health extends well beyond its role as a provider of treatment and care. As large employers, purchasers, and capital asset holders, health care organisations are well positioned to use their spending power and resources to address the adverse social, economic and environmental factors that widen inequalities and contribute to poor health.

We have worked with local partners in a number of ways to address the social determinants of health, here are just a few examples:

Harbour Project

Providing volunteering opportunities for refugees. We recently welcomed 15 members of the Harbour Project as hospital volunteers. The Harbour Project in Swindon, which supports people seeking asylum or who have recently been granted refugee status in Swindon. The Harbour Project provides opportunities for those who cannot currently gain employment to do something fulfilling with their time and grow in confidence.

Project Search

Nine students with disabilities will join the Trust in September 2023, where they will gain valuable skills and experiences to help prepare them for employment. Project search is run by New College Swindon and the Trust is hosting the students.

Promoting apprenticeship opportunities

We are working closely with five secondary schools in more deprived areas of Swindon to promote careers and apprenticeship opportunities.

Read more about the NHS's role as an anchor institution here.

Building healthier communities through employment, partnerships, procurement and commissioning, reducing our carbon footprint.

2 Indicator 2: Recruitment

Non-disabled candidates are relatively 1.44x more likely to be appointed from shortlisting. During the year 384 disabled candidates were shortlisted following a job application, and 24 (6%) were appointed. During the same period 5018 non-disabled candidates were shortlisted and 452 (9%) appointed.

255 candidates who applied for roles did not declare their status, 78 people (30.6%) from this group were appointed. Reducing the level of non-disclosure will help the Trust to build an more accurate profile of our job applicants and better provide for their needs. The Trust will continue to encourage applicants to provide this information.

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

If disabled candidates were equally as likely to be appointed from shortlisting as non-disabled candidates, then the figure would be 1.

Year	Relative Likelihood
2018/19	1.66
2019/20	1.52
2020/21	1.13
2021/22	0.98
2022/23	1.44

National average for 2020/21 (latest figures) was 1.11.

The reader is advised to note the small sample size of disabled candidates, when making any statistical comparisons between both groups.

The Trust has taken steps to diversify where we advertise jobs and standardised adverts to ensure applicants from under-represented groups feel welcomed and we have also introduced training for recruiting managers to address bias in the interview room.

What action are we taking

The Trust will continue to promote the need to share demographic information with candidates and existing staff. We will also continue to work at a wider system level to address issues with recruitment and implement the national NHS equality, diversity, and inclusion improvement plan – High Impact Action 2: Embed fair and inclusive recruitment processes and talent management strategies.

4 We are a Disability Confident Employer

The Disability Confident Employer scheme encourages employers to think differently about disability and take action to improve how we recruit, retain and develop disabled people.

The Trust is a Disability Confident Employer and we are delighted to announce that we achieved Level 3: Leader Status in May 2023. As a Disability Confident Leader, our organisation is now recognised for the work we do to ensure disabled people have the opportunities to fulfil their potential and realise their aspirations.

We do this via a number of ways including supporting work experience via Project Search, apprenticeships and using the guaranteed interview scheme to support those wanting to join the Trust. Alongside this we ensure all staff complete relevant disability awareness mandatory training, as well as managers receiving enhanced recruitment and selection training to better prepared on interviewing candidates who might require reasonable adjustments, this is facilitated alongside unconscious bias training.

We will continue to improve our recruitment processes and engage with our staff to understand more about their recruitment experience. The Trust will relaunch its new starter survey to support this work.

We know that people do not declare their disability for a number of reasons, however, we will continue to promote the importance of disclosure and provide information to staff so that they are able to update their Electronic Staff Record and we will partner with the Differently Able Staff Network to engage with the Trust to understand the lived experience behind the data.

Indicator 3: Capability

The 2022/23 relative likelihood is 3.63, indicating disabled staff are more than three times as likely to enter the capability process as their non-disabled colleagues. By capability, we mean capability on the basis of performance, not ill health. This metric is based on data from a two-year rolling average of the current year and the previous year (April 2021 to March 2022 and April 2022 to March 2023).

The relative likelihood has increased since last year, previously the likelihood was 'zero' for a period of two years. Although this year's figure is the highest it has been since we started capturing the data, there was one disabled member of staff (compared to eight unknown or non-disabled staff) who entered the capability process in the current two year period (an average 0.5). The low number of disabled staff (due to non-disclosure) is compounding the figure.

A figure above 1 indicates that disabled staff are more likely than non-disabled staff to enter the formal capability process.

National average 2020/21 1.94.

Year	Relative Likelihood
2018/19	2.62
2019/20	2.83
2020/21	0
2021/22	0
2022/23	3.63

Despite the relative likelihood increasing since we last reported, this is not indicative of a significant increase in staff entering a formal capability process, one disabled member of staff entered a process over the two year period under review. However, the Trust is keen to ensure that there are no unnecessary measures for staff.

What action are we taking
The Trust is embedding a Restorative Just Learning Culture approach, which moves away from a punitive culture towards restoration and organisational learning; the Trust will also appoint Cultural Ambassadors who will sit on performance-related panels to ensure bias is avoided and support inclusive behaviour, a small group of staff are currently undergoing training.

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Indicator 4: Harassment, bullying or abuse from patients, relatives & public

37% of disabled staff have reported that they have experienced harassment, bullying or abuse from a patient, their relative or a member of the public. This is above the Trust's benchmark average for Disabled staff of 33%. There has been a slight decrease since last year's reported figure of 37%.
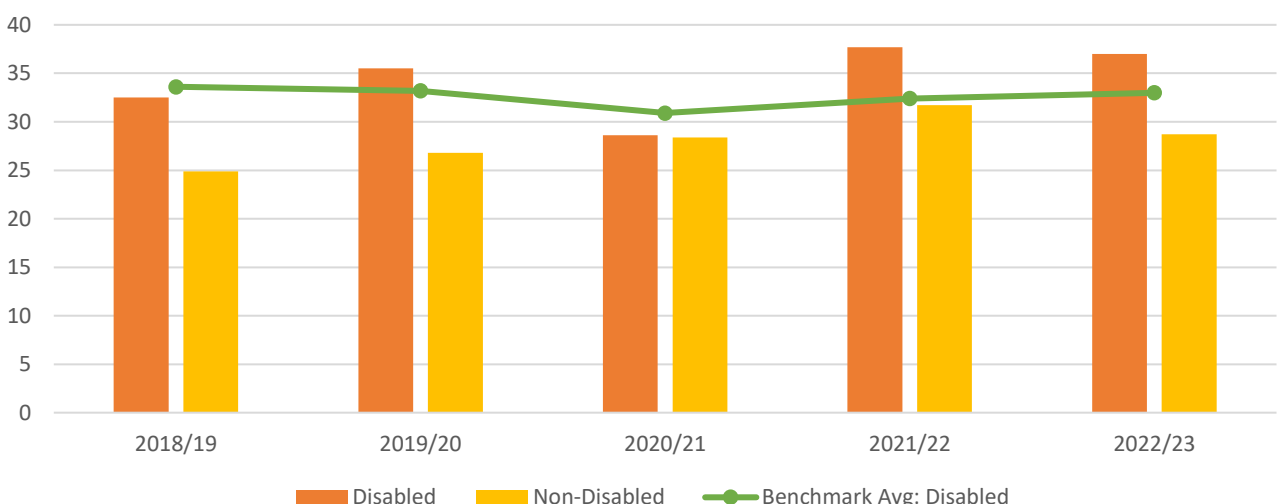
In contrast, 28.7% of Non-Disabled staff have reported this experience, which is slightly above the benchmark average for Non-Disabled staff of 26.2%.

The Trust has a bullying and harassment policy and will continue to promote this and provide advice and guidance for staff and managers who are patient facing. The Trust's EDI Lead, EDI Lead Nurse and Security Management Specialist meet quarterly to monitor any reported data and take action as necessary, including providing advice and guidance to staff.

The Trust will promote resources to help staff understand routes to support including line managers, mental health first aiders, Freedom to Speak Up Guardians, Staff Networks, EDI Lead and trade union representatives and utilisation of the Trust's reporting system (Datix).

NHS National Average (2020): Disabled staff 31.9%, Non-Disabled staff 25.5%

Percentage of disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse in the last 12 months

Workforce Disability Equality Standard | 2023

Indicator 4: Harassment, bullying or abuse from line managers

NHS
Great Western Hospitals
NHS Foundation Trust

15.2% of Disabled staff have reported that they have experienced harassment, bullying or abuse from their line manager. This is below the Trust's benchmark average for Disabled staff of 17.1%. There has been a slight decrease since last year's reported figure of 16.9%.
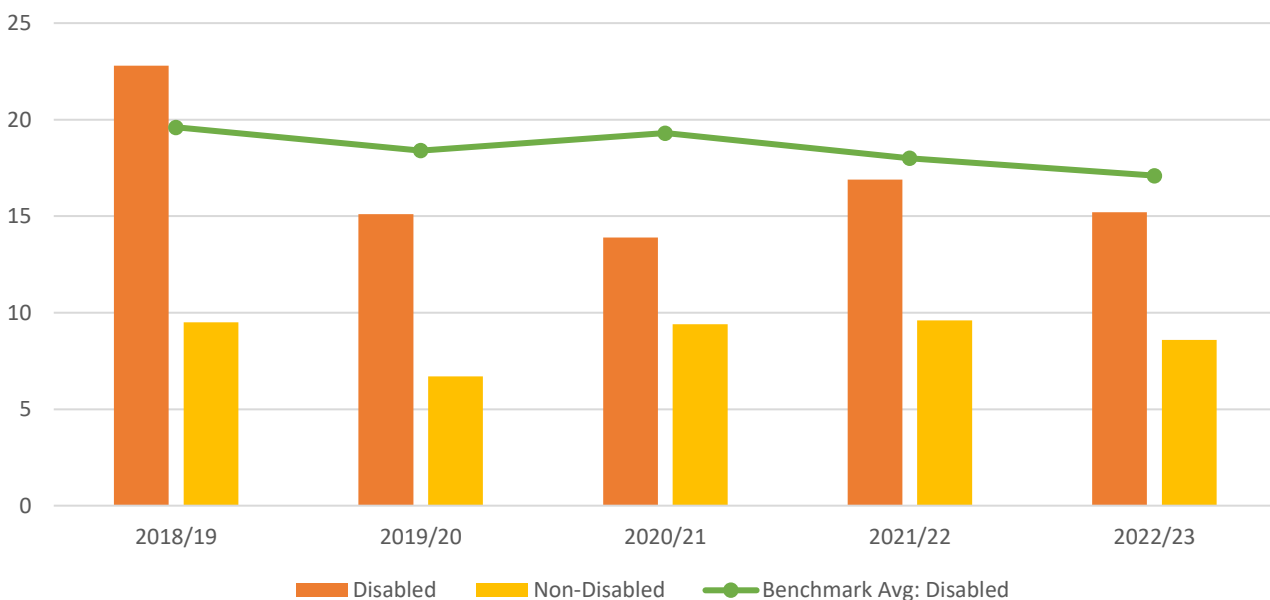
In contrast, 8.6% of Non-Disabled staff have reported this experience, which is slightly below the benchmark average for Non-Disabled staff of 9.9%.

The Trust has a bullying and harassment policy and will continue to promote this and provide advice and guidance for staff and managers. Staff have several routes to support including H.R., mediation, Freedom to Speak Up Guardians, staff network chairs and union representatives.

The Trust will promote resources to help staff understand routes to support including line managers, mental health first aiders, Freedom to Speak Up Guardians, Staff Networks, EDI Lead and trade union representatives.

National Average (2020): Disabled staff 18.5%; Non-Disabled staff 10.6%

Percentage of disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse in the last 12 months

Workforce Disability Equality Standard | 2023

Indicator 4: Harassment, bullying or abuse from colleagues

28.8% of Disabled staff have reported that they have experienced harassment, bullying or abuse from a colleague. This is higher than the Trust's benchmark average for Disabled staff of 26.9%. There has been a slight increase since last year's reported figure of 27.5%.

In contrast, 17.8% of Non-Disabled staff have reported this experience, which is reflective of the benchmark average for Non-Disabled staff of 17.7%.

The Trust has a bullying and harassment policy and will continue to promote this and provide advice and guidance for staff and managers.

The Trust will promote resources to help staff understand routes to support including mental health first aiders, Freedom to Speak Up Guardians and utilisation of the Trust's reporting system (Datix).

The Trust is currently undertaking engagement with staff to understand their experiences of discrimination, which has multiple attributes that mirror the experience of staff who experience harassment, bullying or abuse. Initiatives to address discrimination will have a positive impact on this metric also. In addition, the Trust is committed to implanting a Restorative Just Learning Culture model which will help us to move away from a punitive culture to one of restoration, justice and fairness – staff have attended training to implement and support roll-out. This is supported by staff development including Civility training and we are currently developing Cultural Ambassadors who will share good practice across the Trust.

National Average (2020): Disabled staff 25.6%; Non-Disabled staff 16.7%

Workforce Disability Equality Standard | 2023

Percentage of disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse in the last 12 months


Legend: Disabled | Non-Disabled | Benchmark Avg: Disabled
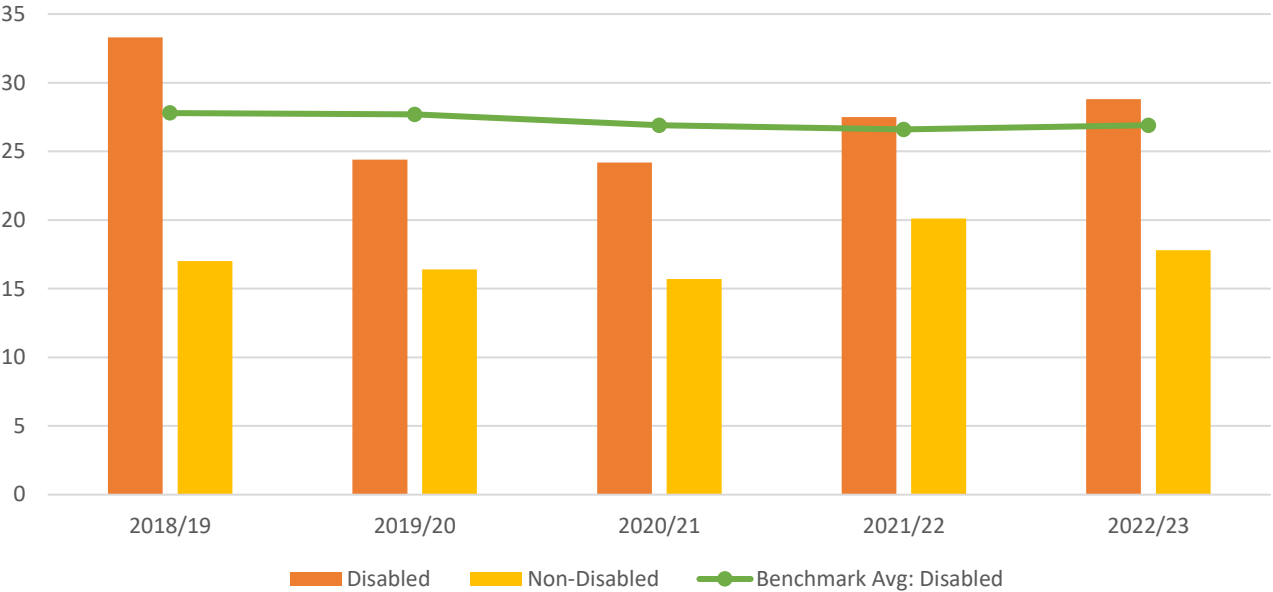
Indicator 4: Reporting incidents

50.1% of Disabled staff said that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it. 45.5% of Non-Disabled staff agreed with the statement. The national average for Disabled staff is 48.4% and Non-Disabled 47.3%.

**Percentage of staff who reported harassment, bullying or abuse the latest time it happened:**
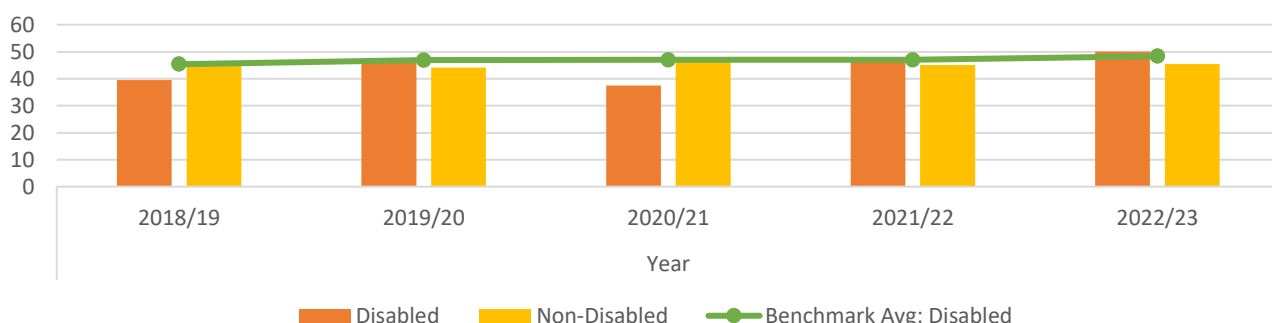
Bullying, harassment or abuse from patients, their relatives or members of the public has gradually increased over the past five years, the percentage reduced during the pandemic, and this was likely because there was less patient contact. The Trust will relaunch its campaign to address abusive behaviour from patients and the public and promote routes to support for staff.

Bullying, harassment or abuse from colleagues has fluctuated during the five year period, over the past year the percentage decreased. Staff engagement shows that there are similarities between bullying and harassment and discrimination and initiatives to address discrimination will positively impact this metric. A Restorative Just Learning Culture philosophy will compliment these initiatives.

Year	From Public		From Manager		From Colleague	
	Disabled	Non-Disabled	Disabled	Non-Disabled	Disabled	Non-Disabled
2018/19	32.5	24.9	22.8	9.5	33.3	17.0
2019/20	35.5	26.8	15.1	6.7	24.4	16.4
2020/21	28.6	28.4	13.9	9.4	24.2	15.7
2021/22	37.7	31.7	16.9	9.6	27.5	20.1
2022/23	37.0	28.7	15.2	8.6	28.8	17.8

Workforce Disability Equality Standard | 2023

6 Freedom to Speak Up Guardians

We aim to ensure everyone working within the Trust feels safe and confident to speak up. When a concern feels serious because it might affect patients, people receiving care, colleagues or the whole organisation, it can be difficult to know what to do, therefore having someone to turn is important to our staff and leadership.
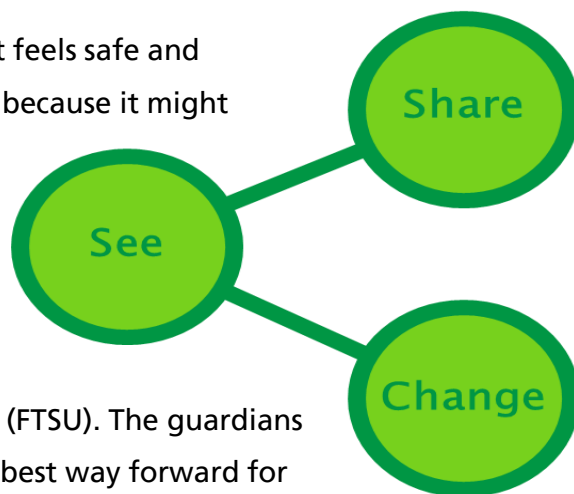
The Trust has seven Freedom to Speak Up Guardians (FTSU). The guardians listen to staff concerns, support them and agree the best way forward for their concerns.

They can also act as an escalation point for people who want to speak up, have concerns, including those who have been unable to raise the issue through usual line management channels or have felt their concerns at this level have not been acted on.

In addition, the Trust provides Speak Up: Core training for all workers including volunteers, students and those in training, regardless of their contract terms and covers what speaking up is and why it matters. It helps learners understand how to speak up and what to expect when they do. There is separate training for line managers and leaders which is more focussed on listening up and the barriers that can get in the way of speaking up and there are a number resources available to staff on the Trust's Intranet.

Workforce Disability Equality Standard | 2023

Indicator 5: Career progression

54% of our disabled staff believe the Trust provided equal opportunities for career progression or promotion. The number was marginally higher for Non-Disabled staff at 57.3%. The Trust is similar to the national average for both its Disabled and Non-Disabled staff.
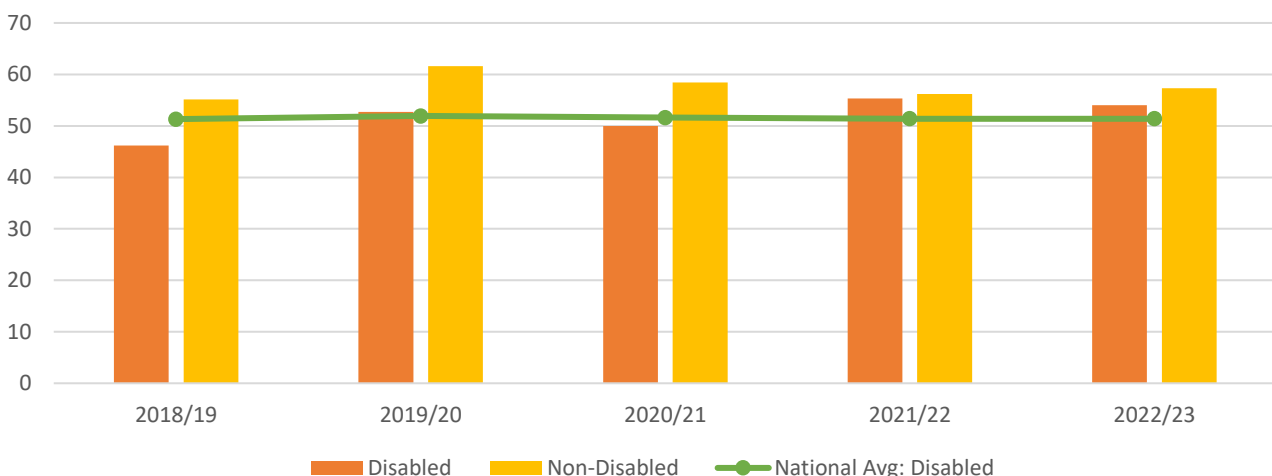
During the year the Trust has taken steps to develop a more inclusive recruitment process, including standardising how internal opportunities are promoted; refreshing the internet job's page to ensure it is more welcoming for candidates from diverse backgrounds and introduced compulsory 'Licenced to Recruit' training for recruiting managers.

All staff have access to CPD training, including internal and external (NHS England and HEE) online programmes including leadership development. The Trust has encouraged Disabled staff to attend training and regularly promotes opportunities via internal communications and the Differently Abled Staff Network.

The Trust will pilot an Independent Inclusion Recruitment Champions programme, and IRCs will sit on interview panels to support inclusive recruitment best practice.

National average Disabled staff 51.4%, Non-Disabled staff 57.3%.

Percentage of disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion

	2018/19	2019/20	2020/21	2021/22	2022/23
Disabled					
Non-Disabled					
National Avg: Disabled					

Workforce Disability Equality Standard | 2023

Indicator 6: Presenteeism

30.7% of disabled staff reported that they felt pressure from their manager to come to work, despite not feeling well enough to perform their duties. This is reflective of the benchmark average of 30.0%.
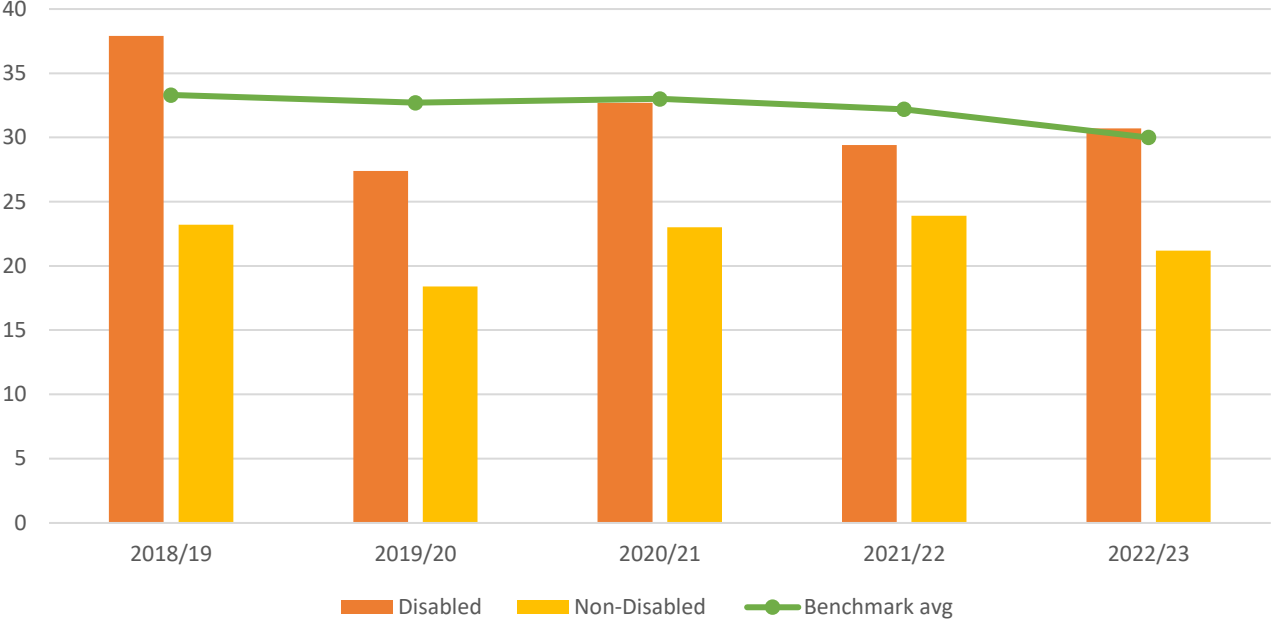
In contrast, 21.2% of Non-Disabled staff reported the same; which is also reflective of the benchmark average of 20.8%.

The Trust is supporting line managers to improve health and wellbeing conversations between them and the staff they manage and this is built into one-to-one conversations, and line managers have access to training. There is a robust health and wellbeing offer across the Trust including the provision of Mental Health First Aiders and Health and Wellbeing Champions and staff can access Occupational Health services. Last year the Trust introduced the NHS Health Passport, which is an editable document that has been designed for individuals working in the NHS with a disability, long term health condition, mental health issue or learning disability/difficulty. It allows individuals to easily record information about their condition, any reasonable adjustments they may have in place and any difficulties they face.

The Health & Wellbeing team have a programme for 2023/24 to promote physical and mental health. The Trust has also launched its 12 Leadership Behaviours which sets out expected behaviours including 'compassion and civility' and 'active listening and coaching', underpinning these behaviours are Equality, Diversity & Inclusion and Restorative Just Learning Culture principles. The Trust also has a Health Inequalities Steering Group whose remit is to also take into consideration health inequalities within the workforce.

National average Disabled staff 31.1%, Non-Disabled staff 22.9%.

Workforce Disability Equality Standard | 2023

Percentage of Disabled staff compared to non-disabled staff saying that they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties ("presenteeism")

Indicator 7: Feeling valued

28% of Disabled staff reported that they were satisfied with the extent to which the Trust valued their work. This is 4.5% points less than the Trust's benchmark average of 32.5%. In contrast, 40.1% of Non-Disabled staff felt the Trust valued their work, the benchmark average is 43.6%.

The Trust has improved its appraisal process and is rolling out the Improving Together methodology, a change management approach that empowers staff from across the Trust, irrespective of role to have increased influence and control over their work and their department. We will also launch our Allyship programme that will empower staff to get involved in initiatives that will improve Inclusion in the Trust.

National average Disabled staff 39.4%, Non-Disabled staff 50.7%.

Disabled staff are considerably less likely to feel they are satisfied with the extent to which the Trust values their work. Over the past year we have taken steps to improve access to opportunities and to improve the appraisal process, which is one route to progression. However, more work can be done to reduce the disparity of experience between Disabled and Non-Disabled Staff.

What action are we taking
Embedding the Improving Together methodology – watch here.

Percentage of disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their organisation values their work

Workforce Disability Equality Standard | 2023
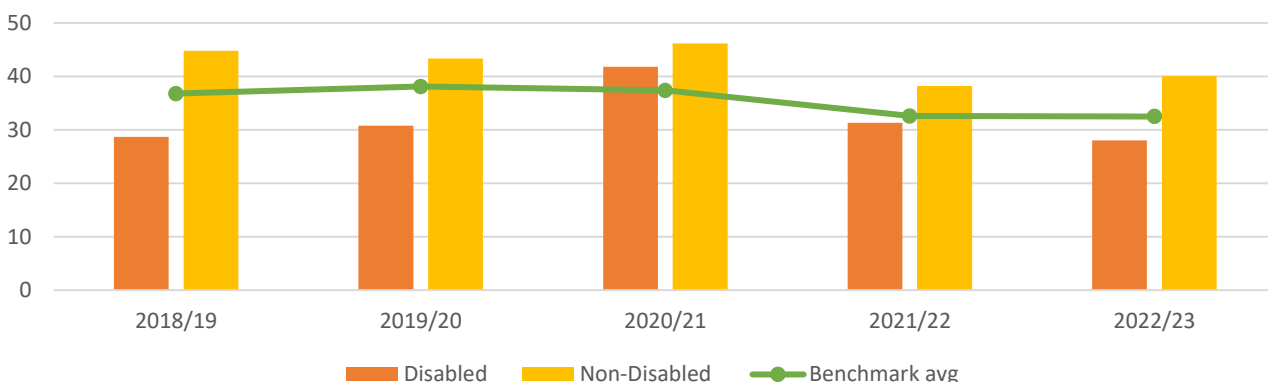
Indicator 8: Workplace adjustments

72.3% of Disabled staff have reported that the Trust has made adequate adjustment(s) to enable them to carry out their work. This is a slight improvement from the 2021/22 figure of 70.5%. But remains lower that then 2019/20 percentage of 82.4%, the highest recorded since the Trust started capturing this data.

Resources are made available for line managers to help them understand reasonable adjustment and line managers can also receive advice and guidance from H.R., the EDI Lead and the Differently Abled Staff Network (DAN).

This year a new Dyslexia pathway was introduced which support reasonable adjustment supported by Occupational Health and the National Dyslexia Association.

National Average (2020): Disabled staff 76.6%.

Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work
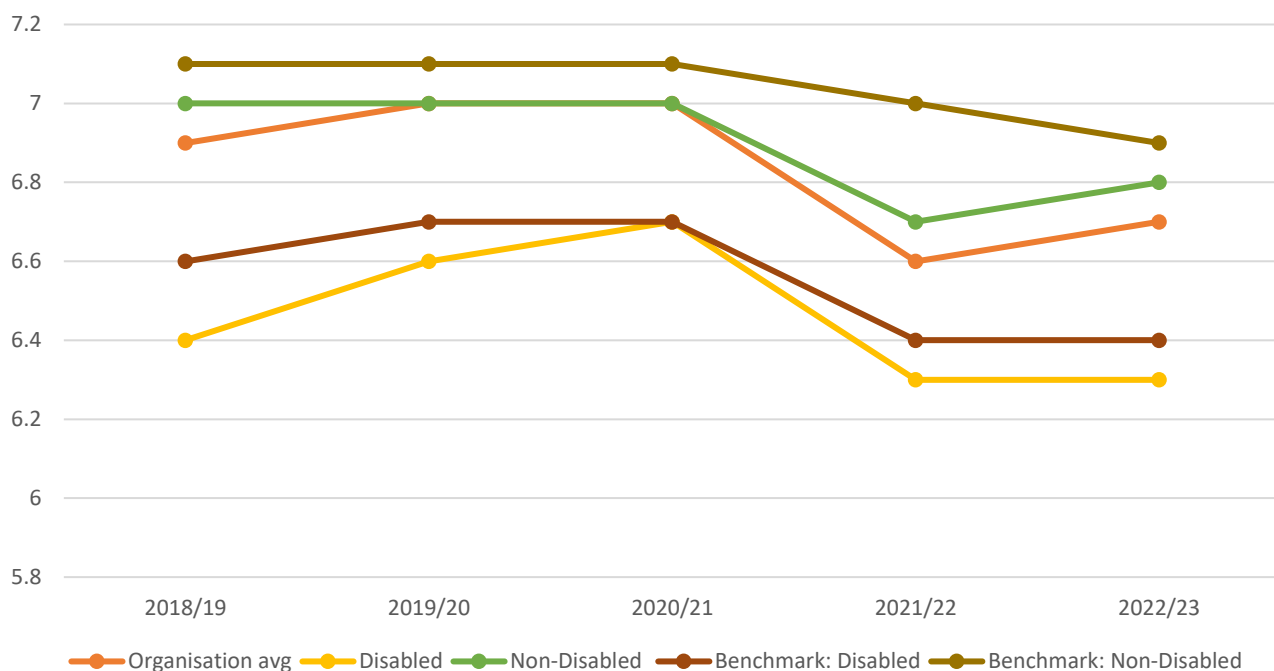
Year	Workplace adjustments
2018/19	75.0%
2019/20	82.4%
2020/21	81.4%
2021/22	70.5%
2022/23	72.3%

Note: non-disabled staff are not asked this question.

Indicator 9: Staff engagement score

a) The staff engagement score for Disabled staff, compared to non-disabled staff and the overall engagement score for the organisation

The engagement score for Disabled staff is 6.3, which is marginally lower than the Non-Disabled staff of score of 6.8 (giving a Trust average of 6.7). The Trust averages closely mirrors the benchmark average of 6.4 for Disabled staff and 6.9 for Non-Disabled staff. This score is made up of a composite of nine questions concerning motivation, involvement and advocacy (empowered to speak up and be involved in decision-making). See here for more information.

The Trust has launched the Improving Together change management methodology, which is having a positive impact where this is being trialled and this could potentially improve the engagement score in these areas. The Trust has a robust health and wellbeing offer; an educational programme through it's Leadership Academy and our networks offer an array of opportunities for staff to engage, socialise and raise awareness centred around Equality Diversity & Inclusion dates like Disability Awareness Month, Pride of Black History Month.

National average Disabled staff 6.7%, Non-Disabled staff 7.1%.

Workforce Disability Equality Standard | 2023

b) has your Trust taken action to facilitate the voices of Disabled staff in your organisation to be heard?

2021 launched Differently Abled Staff Network, network membership continues to grow. Network chair sits on the EDI strategic committee

2022 Executive Sponsor appointed to Networks; sponsors represent the network strategically

Differently Abled Network members are able to influence improvements in patient care – Network took part in Fifteen Steps challenge* in 2022

Trust facilitates Networks to host a range of events across the year to raise awareness about issues that disabled people encounter

The Trust and Staff Partnership Forum engages with staff via the networks across a range of issues and to review policies

We host periodic Listening Events to enable staff to engage with leadership around key issues and recently launched Change the Narrative Storytelling event

A message from Justin Sysum

Previous Chair of the Differently Abled Network

"Having been the Chair of our Differently Abled Network since its inception, I have been incredibly proud to see the network grow and continue to provide insight, support, and guidance for staff in the Trust.

A lot of what the network has discussed over the past year has influenced Trust strategy for staff retention and recruitment, communication, and engagement. The group should feel incredibly proud of their input. We also welcomed our Executive Sponsor, Simon Wade, who has not only added his voice to the group but has also been receptive to the discussion topics.

Unfortunately, I had to step down from my role as Chair for the network but continue to be a supporter and ally for all of our staff networks. I wish my successor all the best, and they have my full support."

Staff networks

The Trust has four staff networks; Differently Abled Network, Race Equality Network, LGBTQ+ Network and the Women's Network. The networks host meetings for their members, raise awareness in the organisation, provide advice and guidance on a number of issues and sit on the organisation's strategic EDI group which is chaired by the Trust's CEO.

The Trust also has an Armed Forces Network for staff who are serving within the Armed Forces, are veterans, or have a family member in the Armed Forces. Armed Forces personnel are not a protected characteristic but face unique challenges that can lead to health inequalities. We're committed to improving NHS care for veterans, reservists, members of the armed forces and their families and provide job opportunities for reservists and veterans.

All networks welcome Allies who might not share the same protected characteristic or experience as those with lived experience.

Indicator 10: Board representation

Our data indicates that there are no board members with a disability.

During the year 2022/23 the Trust had 18 Board members – comprising of 15 voting members and three non-voting members; eight of these board members are Execs and 10 Non-Execs.

The Board has recently recruited new Non-Executive Directors and an increased effort was made to attract a diverse range of candidates.

2022/23 Board Membership						
	Total	**Voting**	**Non-Voting**	**Exec**	**Non-Exec**	**Overall workforce**
Disabled	0%	0%	0%	0%	0%	2.98%
Non-disabled	93.75%	93.33%	100%	88.89%	100%	75.77%
Unknown	6.25%	6.67%	0%	11.11%	0%	21.25%

Conclusion

It is clear from the data that there is still more to be done to improve inclusion and accessibility for our disabled staff. There have been improvements in two metrics, an increase in number of disabled staff to 2.98 (national average 3.7%, Southwest average 4.0%) – the largest marked increase being Non-clinical Band 7 (increase from 1 to 4) - and the percentage of disabled staff who feel the Trust has made adequate adjustments to enable them to carryout their work which increased from 70.5% to 72.3% (national average 76.6%, Southwest average 75.1%). There has been a slight deterioration in 3 metrics as stated in the summary section and a larger deterioration in staff perception around the organisation valuing their work, which reduced from 31.3% to 28.0%.

In order to transform this data we will commit to working much closer with our disabled staff to understand their working life experience so that future initiatives reflect 'what matters to them' and we will start to respond to the national NHS EDI Improvement Plan highlighted in the first part of this report. To accomplish this, we will engage with the wider workforce with a disability or living with a long-term health condition to understand their lived experience and provide a voice for staff to influence the decisions we make that affect them through staff networks and other channels. We will also take positive action to improve equitable access to opportunities – including reviewing the recruitment process and piloting Inclusion Recruitment Champions; address discrimination in all its forms, which is our pillar metric for the year and we will support staff to challenge poor behaviour, and encourage them to speak up when they experience or see behaviours that are contrary to the Trust values.

Our Allyship programme that will be launched in September 2023 is vital to this work, if we are to impact an organisation of this size, we need staff across the Trust to be part of this transformation. The EDI Lead is currently working closely with the Differently Abled Network whilst they recruit a new chair and will continue to work with the network to develop strategic plans. Our efforts to increase the number of disabled staff will benefit from the Trust's work to strengthen our role as an anchor institution and there are a number of work placement schemes that will support our commitment to having a representative workforce.

The Trust is delighted to adopt the Restorative Just Learning Culture approach over the coming months and introduce Cultural Ambassadors and launch our Leadership Behaviours, all of which will positively impact behaviours, policy, practice and culture in the Trust. To help to align our efforts across the Trust, an EDI framework has been designed which will help our teams of staff to work together towards a common aim. A copy of the framework is on the next page.

We end this report by inviting our leaders, staff, governors, volunteers and patients to stand with us to build an inclusive workplace culture and to reduce health disparities in our workforce and population.

If you would like to explore how you can get involved in our EDI work contact our EDI Lead sharon.woma@nhs.net.

An action plan that sets out our ambition for the year ahead follows overleaf

Workforce Disability Equality Standard | 2023

Achieving organisation-wide alignment to embed inclusion

The Equality Diversity & Inclusion (EDI) leadership focus for 2022/23 will be to create a stronger inclusive culture. We can only achieve this by making 'Inclusion' everyone's business and throughout the year we will encourage teams to set their own EDI priorities. We believe if we encourage inclusive behaviour, improve awareness, develop a common understanding of EDI matters and enable staff to apply inclusive principles to their area of work this will lead to better team cohesion and performance, better patient-centred care and therefore better patient outcomes.

The framework will also support the Trust to meet its legal duty under the Equality Act 2010 and support compliance. This will lead to a positive outcome for the mandated and statutory standards:

- Workforce Race Equality Standard (WRES) & Workforce Disability Equality Standard (WRES)
- Equality Delivery System
- Gender Pay Gap (GPG) reporting
- NHS EDI Improvement Plan

Vision | Mission | Goals
We will deliver joined up services for local people at home, in the community and in the hospital helping them to lead independent and healthier lives

S.T.A.R. Values
Service | Teamwork | Ambition | Respect

EDI Objectives
Inclusive & Compassionate Leadership

Inclusive & Compassionate Leadership | Represented & Supported Workforce | Support our Patients & Communities – better life outcomes | Let every Voice be Heard

Improving Together | Pillar Metrics

Division & Team Action Plans

Governance & Support: Line Manager | EDI-OD-HR-FTSU-PFS-ERGs | EDIG | TMC | P&C | Board

Performance: EDS | WRES | WDES | GPG | Staff Survey

Workforce Disability Equality Standard | 2023

WDES action plan 2023 – 2024

Category Key action	Key Action	Steps to achieve action	Due by	Desired outcome
Health & Wellbeing	Reduce discrimination, bullying, harassment and abuse in the workforce	Equity data walk – engage with staff to explore their lived experience and take action to support positive change based on findings Promote the NMC 'Combatting Racial Discrimination' toolkit	Nov 2023	• Improved Indicator 4: Experiencing discrimination at work from staff
		Launch Allyship programme – Promote everyday allyship and build a programme for volunteers to encourage staff to advocate for others and to challenge behaviour that is not in line with Trust values Re-launch of Reciprocal Mentoring programme	Sep 2023	• Improved Indicator 4: harassment, bullying or abuse from managers and colleagues
		EDI Masterclass Series to be developed in-house to improve cultural competence and raise awareness around key issues including 'making adequate adjustments', training to be aligned with 'Civility', 'Restorative Just Learning Culture' and 'Improving Together' approaches to ensure a consistent message is delivered	Nov 2023	• Improved Indicator 4: harassment, bullying or abuse from managers and colleagues • Improved Indicator 6: presenteeism • Improved Indicator 8: making adequate adjustments
	Reduce discrimination, bullying, harassment and abuse from patients, relatives or the public	Revise and relaunch campaign to promote zero tolerance and encourage civility and respect towards staff	Oct 2023	• Improved Indicator 4: harassment, bullying or abuse from patients, their family or the public

Workforce Disability Equality Standard | 2023

Category Key action	Key Action	Steps to achieve action	Due by	Desired outcome
Health and wellbeing	Improve provision of workplace adjustments	Apply for external funding/grants (e.g. WDES Innovation Fund) to support education and implementation of workplace adjustments	Nov 2023	• Improved Indicator 8: provide adequate adjustment(s) to enable disabled staff to carry out their work
		Disability Confident Employer annual review	May 2024	
	Increase Health & Wellbeing Services	Deliver a new 4-hour training package for line managers - 'Mental Health Skills for Managers'	Oct 2023	• Improved Indicator 6: Presenteeism – reduce episodes of staff work despite not feeling well enough to do so and sickness absence
		Health & Wellbeing (HWB) conversations to be added to the Electronic Staff Record system to improve the recording of this data and to facilitate HWB conversations	Aug 2023	
	Address Health Inequalities within our workforce	Provide in-reach physical health checks available for all staff – to include cholesterol, blood sugar levels and provide general advice	Ongoing	• Improved Indicator 6: Presenteeism – reduce episodes of staff work despite not feeling well enough to do so and sickness absence
Progression & Development	Inclusive Leadership training	GWH managers and leaders to participate in system-wide leadership training, training opportunity actively promoted to minoritized staff	Sep 2023 (cohort 2)	• Improved Indicator 7: improve perceptions around 'feeling valued'

Workforce Disability Equality Standard | 2023

Category Key action	Key Action	Steps to achieve action	Due by	Desired outcome
Progression & Development	Inclusive Leadership training	EDI conference to be hosted by Trust to support leaders to understand how to lead 'Inclusion' in their work areas, to manage cultural change and support an increasingly diverse workforce	Jan 2024	• Support overall improvement across all aspects of EDI
Equal Opportunities	Reduce shortlisting to appointment disparity	Launch Inclusion Recruitment Champions programme in June 2023. Volunteer champions will be trained in August and will be available to support interviews for Band 8A above roles	Jun 2023	• Improved Indicator 1: Workforce representation • Improved Indicator 2: Relative likelihood of being appointed from shortlisting
	Work experience placements	Provide work experience placements for young people with special education needs and those not in employment or training		• Improved Indicator 1: Workforce representation
	New College Swindon partnership	Trust to commence programme with New College Swindon and Swindon Borough Council in Oct 23, supporting young adults from disadvantaged areas of Swindon, looked after children and young carers. This would be an additional development programme supporting them into an apprenticeship	Oct 2023	• Improved Indicator 1: Workforce representation • Improved Indicator 2: Relative likelihood of being appointed from shortlisting
	Project Search launch	Trust to initiate Project Search – national programme providing work experience opportunities for young adults within the SEND community	Sep 2023	• Improved Indicator 1: Workforce representation • Improved Indicator 2: Relative likelihood of being appointed from shortlisting
Inclusive Leadership	EDI to be embedded in all in-house leadership training	EDI Lead and Organisational Development (OD) Leads to review and revise all internal leadership training	Sep 2023	• Support overall improvement across all aspects of EDI

Workforce Disability Equality Standard | 2023

Category Key action	Key Action	Steps to achieve action	Due by	Desired outcome
Inclusive Leadership	EDI to be embedded in all in-house leadership training	EDI Lead and Organisational Development (OD) Leads to review and revise all internal leadership training	Sep 2023	• Support overall improvement across all aspects of EDI
	Set Board objectives	Board to develop collective and individual EDI objectives linked to their appraisal. This will align with the national High Impact Action 1.	Mar 2024	• Support overall improvement across all aspects of EDI
Workforce engagement	Support staff networks to deliver a range of initiatives	EDI function to support staff networks across a range of initiatives including events and learning opportunities	Ongoing	• Support overall improvement across all aspects of EDI • Improved Indicator 7: improve perceptions around 'feeling valued'
	Deliver a series of Workforce Listening Events	Host a series of 'Change the Narrative' Storytelling events throughout the year to help to raise awareness and to challenge stereotypes	Ongoing	• Support overall improvement across all aspects of EDI • Improved Indicator 4: harassment, bullying or abuse from managers and colleagues
	Provide access to regular EDI support across workforce	Launch 'Inclusion Café' to provide an opportunity for staff to regularly engage with EDI Lead, the café will be a forum for bite-size learning, support and advice and guidance		• Support overall improvement across all aspects of EDI

Workforce Disability Equality Standard | 2023