

WDES Disability Action Plan

	Action	Please specify which actions are:			Please specify KPIs and timelines for monitoring the actions		How will actions be made sustainable
		Current Practice	Continuation	Different	2022/23	2023 - 2025	
Actions around WDES Indicator 1: Workforce Representation	Implement effective policies to improve attraction to UHL and develop retention initiative to encourage career progression and a healthy work life balance. Actions are as follows: a. Recruitment and retention lead to review and where appropriate amend recruitment and retention strategies to ensure that flexible working opportunities are promoted through recruitment campaigns with uptake tracked and reported to ensure access by all staff groups and evaluation of impact. Review and amendments to take place by December 2023 with monitoring and evaluation evident from April 2024.	Action d: The EDI team are already involved in schemes of this nature, but this action supports input into the overarching plan to embed good practice Action f: The recruitment team have signed up to the Two Tick Symbol to meet the requirement for disabled people.	Action b: We are already engaged with the 6 national ED&I high impact areas and are progressing implementing of these. This action provides an opportunity to validate progress and adjust plans where necessary.	Action a: Whilst we have recruitment and retention strategies in place, we do not confidently track impact. The need for this has been highlighted through the work with local diverse communities who have expressed a desire for non-traditional shift patterns or employment contracts to better meet their personal and cultural needs.	Indicator 1: Current Improve workforce representation Overall: 4.95% (up by 0.35%) 8c & above: 2.4% (up by 0.2%)	Indicator 1: Future Improve of workforce representation. KPI Overall: 6.5% KPI 8a & above: 4.0% By: August 2025	Annual WDES reporting, EDI Board, PCC, Trust Board and Governance arrangements
Actions around WDES Indicator 2: Appointment from shortlisting	b. EDI team to carry out an independent assessment of recruitment activities linked to key 6 national ED&I high impact areas recruitment and promotions, including overseas nurses and consultants' recruitment and work with recruitment services to develop an action plan by April 2024 to support compliance. c. Disability staff network and recruitment team to develop an approach to strengthen disabled staff representation on interview panels for senior posts by June 2024. d. EDI team to provide an equality lens to support the development of a recruitment plan by September 2024 outlining opportunities for career pathways, apprenticeships and graduate management program, including monitoring and evaluation. e. EDI and ESR team to ensure that our data is accurate and complete by improving our declaration rates on ESR system through the design, development and promotion of short video for ESR self-service portal. Campaign to commence in January 2024. f. We will continue to sign up to the Two Tick symbol and improve our practices to move our position from Level 2 to Level 3 by March 2025.			Action c: We will encourage disabled staff representation on interview panels and put in place a mechanism to monitor and report this. This action will formalise our position and ensure that we can clearly evidence our adherence to best practice. Action e: At UHL our use of ESR is primality limited to access to pay slips. This action provides an opportunity to promote the ownership of personal information through the use of ESR. We will be able to monitor impact in terms of the number of changes made to ensure that our comms and engagement approach was effective. This will be supported via Staff Networks. Action f: The Recruitment and EDI Team alongside the Disabled Staff network group will work together to align practices to meet requirements under Level 3 of the Two Tick symbol by March 2025.	Indicator 2: Appointment from shortlist - 1.07 (drop of 0.2%)	Indication 2: Appointment from shortlist KPI: 2.5% By: August 2025	Annual WDES reporting, EDI Board, PCC, Trust Board and Governance arrangements
Actions around WDES Indicator 3: Performance Management & Capability	a. People Services to develop and approach to the use of Cultural Ambassadors who are available to support employee relations cases. Model to be developed by June 2024 with a current ambition to have in place by April 2025. b. Staff support team to complete an annual campaign to outline our current health and wellbeing offer and access to staff support. Campaign to form part of our annual cycle of business with completion by March 2024. c. Health and wellbeing team to develop a business proposal by March which considers the introduction of a pilot buddying program to support staff through the Wellbeing offer. d. People Services to develop a dashboard by March 2024 which tracks and monitors employee relations activity by protected characteristic and progression through the disciplinary process.	Action b: UHL already has a comprehensive support offer which is current practice. The action will promote what is already there rather than provide additional support. The only difference may be in the way the campaign is delivered e.g. is the language used, branding, images supportive of access from colleagues from all backgrounds	Action d: The dashboard is a continuation of the reporting we already provide. A key focus of the dashboard will be to understand parity of treatment once in a formal performance and capability process.	Action a and c: These are new initiatives for UHL which will take learning and best practice from other areas.	Indicator 3: performance management and capability - 0.00% (no change)	Continue to improve the experiences of Disabled staff.	Annual WDES reporting, EDI Board, PCC, Trust Board and Governance arrangements

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Action around WDES Indicator 4: Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from patients, public or staff	Develop inclusive and safe culture and environment by: a. Launch of the 'No Excuse for Abuse' campaign by March 2024 (including policy, communication, training from both an internal and external lens) b. Develop a process by March 2024 to review data by protected characteristics on grounds of bullying and harassment, discrimination and violence and report at a service area to support rapid intervention. c. By March 2024, we will strengthen our psychological support offer for all staff and develop mechanisms to evidence impact. d. Launch of the new Freedom to Speak Up process in October 2023.	Action b: UHL already has a comprehensive support offer which is current practice. The action will promote what is already there and assess the impact to support continual service improvement. Action d: The Freedom to Speak Up service has been in existence across UHL, but this action relates to the relaunch of the service to offer a 24/7 service through an independent service.	Action b: There is already some reporting, but this is limited in nature so needs to be extended and embedded into business as usual.	Action a: These are new initiatives.	Indicator 4: Bullying, harassment and abuse: - Patient/service user, relatives & public: 32.3% - Managers: 16.5% - Other colleagues: 27.6% - Reported: 44.1%	Indicator 4: Bullying, Harassment and abuse: - Patients/service users, relatives and public: 25% - Managers: 5% - Other colleagues: 15% - Reported: 55%	Annual WDES reporting, EDI Board, PCC, Trust Board and Governance arrangements
Action around WDES Indicator 5: Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.	a. By March 2024 we will complete an analysis of our pay data by protected characteristics and CMG area by Sex and race, Disability, etc. b. By September 2023 we will engage in the Developing Diverse Leadership Program to improve staff opportunities (B5 - B7). c. By March 2024 we will increase the numbers of UHL colleagues who have completed the Active Bystander program by 10%.		Action a: We have already carried out some analysis of pay data as part of the gender pay gap return but would like to explore this for other protected characterises so that we can identify any improvement initiatives. Action c: 66 colleagues have already completed the active bystander program and 10 colleagues have completed the train the trainer program.	The Trust engaged in the Developing Diverse Leadership Program. - 29 staff - 27 managers - 4 promotions	Indicator 5: career progression and promotion: Overall: 50.9%	Indicator 5: career progression and promotion: Overall: 55%	Annual WDES reporting, EDI Board, PCC, Trust Board and Governance arrangements
Action around WDES Indicator 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.	a. Develop Reasonable Adjustment Guidance and Forms by March 2023. b. Give voice to our Disabled (visible and non-visible) staff through our staff networks. c. Promote health and wellbeing support to our disabled staff through our staff networks. d. Develop disability awareness training to improve understanding by September 2024. e. To promote and communicate a wide range of information and provide opportunities for feedback from staff. f. Develop a Human Library of shared staff experiences and stories by March 2025. g. Design and develop communication information that is accessible for all by December 2024. h. Wellbeing discussion to be included as part of the appraisal process by March 2025.		Action a, b, e. This is already taking place within the Trust; however, we understand that further promotional activity needs to take place to raise awareness about the availability of Reasonable Adjustment#, information and Staff Networks at UHL.	Action c. To promote health and wellbeing initiatives that improve the wellbeing of Disabled staff. Action d. To design, develop and implement disability awareness training for managers and staff by September 2024. Action f. Design and develop a platform for staff to share stories and experiences by March 2025. Action g. Design and develop communication that demonstrates UHL as an inclusive employer by December 2024. Action h. Design and develop wellbeing questions that are included as part of the Staff Appraisal process by March 2025.	Indicator 6: pressure to return to work: Overall: 33.2%	Indicator 6: pressure to return to work: Overall: 28%	Annual WDES reporting, EDI Board, PCC, Trust Board and Governance arrangements
Action around WDES Indicator 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.					Indicator 7: values my work Overall: 29.4%	Indicator 7: values my work Overall: 35%	Annual WDES reporting, EDI Board, PCC, Trust Board and Governance arrangements

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Action around WDES Indicator 8: Percentage of Disabled staff saying that their employer has made reasonable adjustment(s) to enable them to carry out their work.					Indicator 8: make Reasonable Adjustments Overall: 71.1%	Indicator 8: make Reasonable Adjustments Overall: 80%	Annual WDES reporting, EDI Board, PCC, Trust Board and Governance arrangements
Actions around WDES Indicator 9: The staff engagement score for Disabled staff, compared to non-disabled staff.					Indicator 9: staff engagement Overall: 6.2%	Indicator 9: staff engagement Overall: 6.5%	Annual WDES reporting, EDI Board, PCC, Trust Board and Governance arrangements
WDES Indicator 10: Board Representation	a. By March 2024 we will ensure that every Board and executive team member have EDI objectives that are SMART included as part of their appraisal and reviewed year on year. b. By December 2024 our organisational development and EDI teams will develop a talent management program to increase diversity at Board level, with year-on-year monitoring systems in place to identify potential staff. c. By September 2024 we will embed a reverse mentoring program for executives, direct reports and members of the Leadership Team. d. By April 2025 we will improve experiences of disabled staff by developing a Shadow Executive Board with membership of a range of roles, professionals, locations and backgrounds.		Action b: This happens informally but we need to extend into a formal process with monitoring	Action a: Whilst this happens in some instances this will be a new requirement for all board and executive team members Action c: Whilst this happens in some instances this will be developed into a formal offer Action d: This is a new concept which has been successfully implemented at another Trust	Indication10: Board representation - 0.00%	Indicator 10: Board Representation KPI: 1.0% By: August 2025	Annual WDES reporting, EDI Board, PCC, Trust Board and Governance arrangements