Diversity and Inclusion Action Plan 2022/ 23 – UPDATED 01/09/22

To enable every person working in Solent NHS Trust to bring their authentic self to work each day, ensuring we all feel visible and our identity and contribution is validated and valued, our Diversity and Inclusion Team has agreed on two themes for 2022/23:

Ensure inclusive recruitment and that opportunities for growth are available for all

We will be known as an employer of choice; recognised for inclusive recruitment and for opportunities for growth.

Develop an inclusive culture and sense of belonging for all

We will be accountable and take action so that measurable processes and systems are in place to make things happen.

We will begin the journey to ensure everyone has a sense of belonging and anti-discrimination action is the norm.

People Focused Priority People Strategy

We will make easy for people with disability and Long-Term Conditions (physical and mental health) to get the access and support needed at the earliest opportunity.

Further strengthen our engagement with and support for Staff Networks to ensure that the voices of people from diverse groups influence the way the People Strategy is implemented.

Priorities to support *belonging in the NHS*	Develop a programme to complete access audits accompanied by improvement plans across Solent in collaboration with our staff networks and estates team to ensure we provide an inclusive and accessible environment for our staff.
	Triangulate disparate strands of evidence into annual culture assessment which takes information from the staff survey, FTSU reports, complaints and compliments incidents, quality, metrics, HR metrics, FFT and Alongside Community feedback to formally assesses and provide assurance of culture beyond the staff survey.
	Ensure our attraction and recruitment processes are equitable and inclusive.
	Proactive review of human resource policies to ensure they are fully inclusive and accessible.
	Support targeted professional development for colleagues from under-represented groups to support career progression.
	Support colleagues across the organisation to have a deeper understanding of inclusion and belonging.

Action/ Deliverable	Owner	Timescales	Strategic Links and Drivers	Key Success indicators Outputs and outcomes	UPDATE
Work Stream 1 – Attraction, Recruitment and Onboarding					

Re – design the attraction, recruitment and onboarding process to increase diversity and improve inclusion	Penny Smee – Resourcing
	
	Debbie Robinson and Elton Dzikiti
		June 22-Dec 22	• Nation 6 Actions
			• People Promise
			• WRES 1,2,3
			• MWRES 1,2,3
			
			• WDES 1,2,3
			
			Links to TTOB
				• Working with community partners to access underrepresented communities
				• Working with Networks for co-production
				• Redesigning Job adverts and JDs
				• Implementing Oli system
				• Redesign of assessment process
				• Development and implementation of a diverse Bank of Inclusion Ambassadors *(LH)
				• Implementation of comply and explain
				• Increase of shortlisted and successful applicants from diverse back grounds
				• Train the trainer scalable inclusive recruitment workshop to embedded new ways of working / recruitment
				• Improved more accessible volunteering pathways to recruitment (Community Engagement)
				• Positive impact on WRES, WDES, MWRES indictors
					• Community conversations booked for September 22
					
					• Oli has now been implemented
					
					• A working group has been established to look at volunteer pathways
					
					• We have not appointed to FTC inclusive resourcing partner this work will now be delivered through the existing team– the impact of this is that we have yet to implement:
					  o Inclusion Ambassadors
					  o Comply and explain
					  o scalable inclusive recruitment workshop
					
					• WRES WDES indicators have confirmed progress

Work Stream 2 – People Development and People Practise					

Review of People Practise/ Policies to ensure inclusive language	Vicky Butler and People Partners	August 22	• People Promise/ Plan
			• WRES 3,4,6,8
			• MWRES 3,5,6,8,
			• WDES 3,4a&b,6,7,8
			
			Links to TTOB
				• Positive impact on WRES, WDES MWRES indictors
				• Networks and staff side involved
					• This is being delivered in 2 phases:
					  1. Review current processed and policies. An overarching People Practices policy has been created that will replace all current ER policies, this outlines the Trust commitment to EDI, just culture and a starting position of positive intent
					  2. Create and develop and improve SOP to
					• Subject to ratification The Kind Life Business proposal is now complete and will provide a set

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					of resource to support inclusive culture and respectful resolution • A review of our policies and procedures to ensure a Just Culture language and approach is being followed will be undertaken as part of the 22/23 people partnering strategic priorities – Networks colleagues will be part of this review and cocreating new people policies to ensure they are inclusive. • Regular supervision of employee relations cases and participation in learned experience reviews and lessons learnt exercises is being undertake
Induction of Dignity and Civility framework	Vickie Butler / Pauline Jefferies	Augusts 22	• People Promise • WRES 5,6,8 • MWRES 6,8 • WDES 4a&b 6,7,8 Links to TTOB	• Positive impact on WRES, WDES MWRES indictors • Networks and staff side involved • Improved staff survey feedback	• Framework created. Update and finalisation pending subject to confirmation of A kind life proposal so this can be incorporated so that up to date content outlining commitment and support is streamlined and cohesive. On track to finalise by August.
Improved staff action planning as result of staff survey outcomes with explicit focus on improving belonging	People Partners and Service lines	Spring – Dec 22	• People Promise / Plan • MWRES 10 • WDES 7 Links to TTOB	• Improved staff survey feedback and engagement • Positive impact on WRES, WDES MWRES indictors • People Partners actively and regularly working with service lines to improve staff experience through the application of inclusive people practices	• We have revised the action planning templates for 2021, which includes specific space for consideration of how teams are good and celebrating belonging and inclusivity, but also what they can improve on. The format uses the words; "celebrate, sustain and grow"

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Rollout of coaching for colleagues with protected Characteristics	Michela Tarrant / Emma Lampard	May 22	• National 6 Actions • WRES 7 • MWRES 7 • WDES 5 Links to TTOB	• Well engaged coaching offer rolled out • Impact evaluation demonstrates effectiveness	• 9 BAME colleagues on pilot, built in coaching offer AND additional workshop/ support on career progression. Due to finish in November 2022 with a Success Presentation.
Training/ Induction for Inclusion Ambassadors	Debbie Robison / Elton Dzikiti Emma Lampard / Resourcing Partner	May 22 **Revised date September 22**	• National 6 Actions • WRES 1,2 • WDES 1,2 • MWRES 1,2 Links to TTOB	• Diverse pool of Inclusion Ambassadors that are supported and importantly trained to be used at interview and assessment for band 2-3 admin and band 7 roles where under representation currently exists	• Draft coms have been design • Draft JD for Inclusion ambassador has been written • Recruitment to pool is required • Training design is required
Introduction of Talent pools and process for colleagues with protected characterises including coaching for colleagues with protected characteristics	Emma Lampard	Sept 22	• National 6 Actions • WRES 7 • WDES **5** • MWRES 7 Links to TTOB	• Development of a talent pool and Talent development / support framework • Career conversations linked to development • Feedback from staff survey indicates colleagues feel more supported to access development opportunities • Coaching programme for colleagues with protected characteristics and managers training	• ESR report run to identify target population • Pilot group selected for BAME • Contacted all staff and Managers to advise of newly designed Level 2 leadership Programme – cohort of 9 have commenced programme. • To do – signpost further to the group to highlight academy offering • Available: Career conversations and coaching available – this will be tracked and monitored
Supportive frameworks to	Anna Rowen	May 22	• People Promise	• Framework and Organisational Development programme rolled out to	• Subject to Ratification A kind life proposal will deliver this framework

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Action/ Deliverable	Owner	Timescales	Strategic Links and Drivers	Key Success indicators Outputs and outcomes	UPDATE

improved speak up culture and psychological safety	and Beth Carter		• MRES 10
			
			Links to TTOB
				support and improve speak up culture and compassionate candidate feedback loops
				• Cultural review mechanism(s) indicate more confidence to speak up
					Big conversation at service line levels have been undertaken
					
					• Working with a range in relation to **Big Conversation QIP** – around *Supporting Trust systems to recognise and understand discriminatory behaviours.* Service lines including:
					
					   • MPP/MSK- 105 Colleagues attended
					   • MH Crisis Service – dates confirmed (13/09/22)
					   • Dental Service – dates confirmed
					   • New Nurses who have been internationally recruited
					
					Key messaging around belonging, WRES, WDES, LGBTQ+ and Faith, Religion and Belief, Solent Hate Crime incident & sub-cause reporting and support processes, Reciprocal Mentoring and D&I's Learning and Development platform.
					
					Transgender inclusion Sessions to:
					
					   • Integrated Community Children's Nursing Service
					   • People Partner Team
					
					Module delivered via Zoom by Stonewall facilitator for 2 blended online facilitation and breakout spaces to provide interactivity.

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					Introduction to LGBTQ+ Allyship (1 hour recording available to Solent workforce via the D&I Learning & Development Platform) Dates TBC **Anti-discrimination Taskforce** Hate Crime Incident & Sub-cause reporting • Solent NHS Trust has embarked on an innovative project in relation to embedding hate crime reporting strands within Solent's incident & sub-cause reporting system. • Staff to report assaults & abuse they experience • This presents excellent opportunities to maximise the benefits of this work through robust analysis of existing/future datasets; evaluation of existing reporting & recording structures; the identification of best practice; or the creation of a template for future action. • This would have significant benefits in terms of ensuring patient safety & staff wellbeing, repeat victimisation & violence risk reduction measures. • The process is designed to empower staff to make changes and be part of their case investigation and outcome This work also links to supporting WRES indicators: 5 – Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months

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					6 – Percentage of BME staff experiencing harassment, bullying or abuse from staff in the last 12 months • Further work is currently taking place between Solent's Security Management Specialist & Quality Systems team to ensure we have the most fluid & comprehensive reporting system is in place. New reporting process is now live but more comprehensive work is required in the COMMS space to ensure staff are aware of how to use the process. Building support pathways in partnership with Solent's occupational health service & Police crime commissioned services such as Victim Support's (Victim Care Service) & Restorative Justice Solutions including bespoke support resources & service line drop-in surgeries.
Embedding of Just Culture and early resolution principals	People Partners	March 22 -Ongoing	• People Promise • WRES 3 • MWRES 3 • WDES 3 Links to TTOB	• Decrease in formal Employee Relations case • More colleagues trained in mediation and early resolution •	• Cases per month reflect a trend line showing a decrease in formal resolution cases and an increase in early resolution cases over a 12 month period from May 2021. • This is as a result of asking curious questions on why situations have arisen, using the decision trees and adopting the Just Culture approach on impact vs intent to diagnose the problem and to identify appropriate interventions. • Add learning framework, supervision

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					• We are in the process of considering a succinct resolution hub
Reciprocal Mentoring and Mentoring for marginalised Colleagues	Debbie Robinson	May 22 **Revised deadline December**	• National 6 Actions • WRES 7 • MWRES 7 • WDES 5 Links to TTOB	• Implementation of reciprocal Mentoring Pilot • Collaborate with HIOW mentoring pilot programme • Evaluation demonstrates impact and confirms and scalable model to roll out wider	• This is now been co designed with Southern Health and will form part of the wider ICS mentoring programme and partners from the SW region
NEW : Develop a programme to complete access audits accompanied by improvement plans across Solent in collaboration with our Staff Networks to ensure we provide an inclusive and accessible environment for our staff.	Debbie Robison/ Elton and estates and People Partners and networks	April 2023	• WDES	• Review current levels of current accessibility across locations within the Trust • Review, simplify and centralise guidance and funding for accessibility arrangements • Introduced and implement new reasonable adjustment policy	• Clear and accessible reasonable adjustment framework in place • Clear and accessible centralised funding process in place • Clear links and collaboration with ICS Neuro DAS • Managers guidance and training in place
Work Stream 3 - Education, Awareness, Allyship and Engagement					
Increased membership and profile of Networks	Elton Dzikiti and Debbie	May 22 on going	• People Plan/ Promise • WDES	• Improved engagement at networks • Improved and more efficient outcome focused actions for change driven by	• Two new staff networks – 50+ and Carers • Membership has increased by 48% across all six networks (BAME, Multifaith and 50+ seeing the biggest increases)

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	Sommerville		7 • WRES 8 • MWRES 10 Links to TTOB	networks – reduction of gate keepers and empowered networks • More streamlined assurance, accountability, and action • Improved awareness and support and understanding of purpose of networks	• Detailed action tracker has been created which each network chair has access to view and edit accordingly – 58% of actions generated have either been completed or are in progress • Several internal events held – CEO email during Neurodiversity Celebration Week increased • DisAbility Network by 31%, • Multifaith coffee and chat Teams event increased membership by 62% • Article in Shine newsletter promoting the networks • Secured Executive Sponsorship for all 6 networks – chairs have met with their respective sponsors and outlined their roles and expectations • Increased level of comms and promotion of events leading to well attended meetings/events • Calendar of events 2022 agreed with all networks to aid in the planning and promotion of events • Each network has chosen approx 5 events they would like to focus on throughout the year which has been put in to this calendar and shared with networks. It is also on our D&I Solnet page
Planned and well promoted Network Events	Elton Dzikiti and Debbie Sommerville	April 22 ongoing	• People Plan/ Promise	• Well communicated and well-planned events cycle • Increased engagement	• See above info

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Annual delivery plan for learning, development, and awareness programmes	Emma Lampard and L&D team Pascal Matthias, Debbie Robinson Anna Rowen	May 22 **Revised date June**	• People Plan/ Promise • WDES 7 • WRES 8 • MWRES 10 Links to TTOB	• Well communicated, well planned annual programme • Mixed media approach to design and delivery • Increased reach of engagement • Robust impact evaluation framework in place • New 'Belonging' area on LMS as a on stop shop for training and resources	• The L&D team to create Neurodiverse Hub on the LMS. • Matt and Simon to look at Learning Management System (LMS) / Technology Enhanced Learning (TEL) accessibility. • The LD Team create a Neurodiversity session for staff to promote awareness, the benefits of working with, and being Neurodivergent. • New LMS tab go live end of July – content and resources **Roadshow to raise awareness** Results from post session D &I Roadshow feedback: • 91% felt that the briefing from Anna on Inclusion Diversity and Belonging had raised their awareness. • 89% felt they had a better understanding of how privileges affect them and others. • 86% felt they had a better understanding of what it is to be an ally. • Overall, colleagues felt that the video clips were effective and very powerful • Colleagues took away from the briefing: knowledge, understanding and awareness of the need to support different cultures. • Improvements – longer sessions to go into more specific detail/key topics. Extra time for open discussion to share experiences • 14% asked for follow up calls **Service Line Big Conversation Sessions feedback:** • 57% felt the briefing raised their awareness

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					• 57% felt they had a better understanding of how privilege affect them and others • 57% felt they had a better understanding of what it is to be an ally. • Overall, the sessions expanded awareness/knowledge of D& I and where to go for help when faced with uncomfortable conversations. • Improvements suggested: challenge inequality. Be more aware of inclusivity. More meetings of how to move forward with conversations. • 100% would not like a follow up call to discuss anything further.
Refresh of Solnet D&I Pages	Julie Marley and Debbie Sommerville	May 22 and ongoing	• Well led • People Promise	• Accessible up to date information available on solnet • Increased 'clicks' and hits/ visits to pages on sol net and social media	• Monthly/weekly updates continue with new links and information added. • New pages and links added • Advised not to change too much of the layout/design as full migration from Solnet 1 to Solnet 2 cannot take place. • Final stage is still with third party.However, we have created the D&I link within Solnet 2 ready for migration.
Communications and Engagement Plan to raise profile, understanding and collective ownership to improve belonging and reduce discrimination	Tanja Roberts and D&I Team	May 22 and on going	• Staff Survey outcomes- Trust wide action plan • Well led • People Promise • WDES 9	• Consistent and streamlined process in place to ensure all comms routes and social media platforms are maximised – both internally and externally • Increased use of infographics and creative comms • Process in place to measure and monitor impact of comms activity •	• Shared blog on Big Conversation from staffs survey that appeared in HSJ and survey infographics on comms channels • Also shared our participation in the whole self-campaign with MHFA for blog on their website and due to success of this was asked to be a case study for MHFA • Created inclusive language poster campaign to drive belonging and stand up against discrimination which will be shared on all comms channels once approved

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Impact evaluation framework implemented for all activity	Julie Marley and Debbie Sommerville	April 22 and ongoing	• Well Led	• Accessible and live data available reporting activity and impact of activity	Feedback was taken feedback Results from **Level 7 Organisational Belonging Delivery** (5 sessions) The sessions have dealt with Awareness and four pillars…Education, Empowerment, Engagement and Empathy. These core pillars will enable greater understanding of inequalities and systems for success in healthcare. • 90% felt it had raised their awareness on Inclusion, Diversity & Belonging • 60% felt that they had a better understanding on how Inclusion, Diversity & Belonging affects them and others. • 80% felt slightly more confident around speaking up and having conversation around Inclusion Diversity & Belonging • *What went well overall:* Listening to different viewpoints; expanded knowledge, confident in asking awkward questions. • *What they took from the session:* Need to support colleagues better in speaking up. How to help colleagues when patients are being judgemental or perhaps racist against clinicians. • *Improvements*: challenge inequality within service lines. Challenge inappropriate

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					language or behaviour. Regular meetings/conversation. More sessions. More case studies and how to manage situations and the correct terminology to use. A pause at the end for quiet reflection. **MH & Crisis Team Meeting - Awareness Sessions (5 sessions planned)** Decisions arose from a request to speak to the NHS and crisis team regarding complaints of discrimination. The sessions are aimed to explore and better understand how discrimination is counterproductive to both staff and patients. The HEART values and pathways too enabling greater accountability and awareness are explored. **Evaluation to follow** **MPP/MSK Big Conversation Planning meeting for 04.05.22 Session (1 Session)** - This session was requested by the MPP and MSK service line. The request was a follow-up from the Big conversation which was presented across the trust in 2021. - The follow-up look to explore and investigate the lessons that had been learned from the big conversation and how practical and measurable actions would lead to greater job satisfaction and cultural and organisational harmony within service lines. - The session was coordinated with the EDI team which used polls and questionnaires

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					• to anonymously gather data on the perspectives of over 100 (see evaluation above)
Community Conversations	Anna Rowen / Sarah Balchin	June 22 and on going	• Alongside communities • Core 20+ • WRES • WDES • MWRES • People Plan	• Increased activity with community partners, that results in greater understanding of barriers to accessing employment in Solent – feedback to drive future action planning – to increase diversity and inclusion •	• These are planned for September • These are now being replace by the People first Strategy conversations
Design and implementation of D&I Metrics Dashboard	Anna Rowen and Team Ian Ralph and Sorrelle Ford	May 22 **Revised Date December**	• WRES • WDES • MWRES • People Plan • Well led Links to TTOB	• Accessible and up to date D&I dashboard that can be used to measure impact of actions, progress against WRES, WDES and MWRES indicators • Data intelligent is used to review current action planning and inform future activity	• Due to staff vacancy this has been delayed – WF business analyst now appointed • A basic work document and readably assessable data is in place – that aligns to deliverables in plan and WRES/ WDES Indictors • Dashboard to be developed one WF Analyst in post • WRES AND WDES Annual submission on track
Other Key Activity and Workstreams					
EDS 3	Elton and relevant service lines	Summer 22 and ongoing	• Well Led • Core 20 plus, Links to TTOB	• Assurance around the D&I plan and Equality Delivery System (EDS) and Public Sector Equality Duty (PSED) requirements	This EDS Test Period Guidance document is for organisations who wish to take part in the test period for the updated NHS Equality Delivery System (EDS). It sets out the requirements for those wishing to use the updated documents during 2022/23.

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					Next Steps – meeting with Community Engagement Team scheduled for 27/06/22 to start pulling together a working group/delivery plan which cuts across Patients, Staff & Leadership, start assembling relevant data & current survey information available etc. Identify service lines - TOR drafted.
Systems Collaboration	Anna Rowen And comms	Ongoing	• People Plan, LTP • Links to TTOB	• Ensure systems drivers and collaborations result in meaningful and timely actions for Solent	• Hate Crime as per above Anti-discrimination summary has been adopted as a ICS workstream by the Race Equality Programme Lead. Work to commence imminently. • TTOB have discussed minoritized temporary staffing as part of the BAME Talent Management workstream –more awareness and understanding needed around this significant part of our NHS HIoW workforce and our minoritized staff experiences within it. • Valuing our NHS temporary workers (specifically individuals whom solely hold a zero hours contract in the NHS e.g. bank only workers) presents a unique opportunity for TTOB and HIOW ICS BAME Talent Management Workstream to explore. • Design and delivery of Bank staff Inclusion programme is now in early phase of discussion – will be informed by staff survey results – to be delivered over the next year

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					NB There is still no nationally reliable ESR data that can be shared on this at present, however the anticipated bank WRES (Indicator 1) will bring this information to the NHS post its role out. From recent discussions with colleagues in National WRES team this approach would directly bolster bank WRES work in the future. Inequalities – 5 Priority Areas 1. Restore services inclusively 2. Mitigate against digital exclusion 3. Ensure data sets are timely & complete 4. Accelerate prevention programmes 5. Core 20+5 (designed to support integrated Care Systems to drive targeted action in health inequalities improvement.
Cultural Review Cycle	Shahana Ramsden / Anna Rowen		• Well Led • Links to TTOB	• Building on outcomes from The Big Conversation and staff survey ensure review cycle is in place to follow up, take action and loop back. • Positive impact of Hate Crime Incident & Sub-cause reporting to track data, themes, trends – links to repeat victimisation, violence risk reduction & support pathways & restorative justice where applicable. •	• Action plan and feedback has taken place • As above too early – further discussions with D&I AD. • Further Rapid Insights now available from MPP/MSK services on experiences of discrimination in the workplace following Big Conversation 2021. Links to wider D&I Big Conversation QIP • A Trust cultural review tool is being decided for implementation Oct 22

- The above action plan will be delivered and underpinned by action trackers and other assurance frameworks owned by relevant task group, network group.

- The above actions consider and are underpinned by the insights from the Big Conversation, staff survey and other staff voice mechanisms such as the networks in terms of areas to focus action on over the next 12 months.

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• Actions whereby metrics are used to measure impact will do so using quantifiable baseline and targets - this data will ultimately be managed within the D&I dashboard and reported annually through the WRES WDES and EDS and will ensure that we fulfil our statutory requirements as outline in the Public Sector Equality Duty, to achieve the objectives set out under s149 of the Equality Act 2010. • Assurance and accountability for delivery of this plan will be managed through network group action trackers, People Forum, People Committee and Trust Board meetings. • Actions and points for escalation to be feedback and reported through the above meeting structures and accountability frameworks. This will be managed in a continuous loop i.e. networks Via Network Partner – people committee – board – networks Via Network Partner – people committee – board. •					

WRES, WDES MWRES Indicators – Submitted AUGUST 2022

Workforce Race Equality Standard 2021

NHS Solent NHS Trust

↑ Areas of improvement   ↓ Areas that have worsened

Relative likelihood of white staff accessing non-mandatory training and continuous professional development compared to BAME staff
1.06

10.7% Percentage of BAME staff

0.94 Relative likelihood of white applicants being appointed from shortlisting across all posts compared to BAME applicants

57.7% Percentage of staff believing that trust provides equal opportunities for career progression or promotion

18.7% Percentage of staff experiencing harassment, bullying or abuse from patients, relatives, or the public in last 12 months

STOP BULLYING

16.4% Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months

BAME Board membership
16.7% BAME Board members
20% Voting BAME Board members

Percentage of staff personally experiencing discrimination at work from a manager/team leader or other colleagues
9.6%

WRES Indicator

Data from ESR		
1	Percentage of BAME staff **Target: Increase by 2% (total 11.3%) by July 2022.**	

2019	2020	2021
9.2%	9.3%	**10.7%** Over halfway to target This will have increased partially due to the proactive recruitment of colleagues from overseas whom are BAME. Last year positive action was taken on the back of last year's survey results to increase representation – this was specifically undertaken with targeted work within the Adults Southampton and Portsmouth and Primary care service line. A pilot was undertaken and as of December 2021 the following was reported: - The percentage of BAME staff in Adults Southampton has increased from 11.47% in June 2021 to 14.1% in December 2021. This brings their BAME workforce in line with the local BAME population of Southampton which was 14% in the 2011 census. - Although there may have been fluctuations, the number of BAME staff in Adults Portsmouth has increased from 9.75% to 10.04% from June to December 2021 - Data obtained from the workforce team shows that the number of BAME staff in Primary Care has increased from 9.19% (33) to 9.55% (36) from June to December 2021. We continue to take proactive positive action to increase diversity have implemented a new recruitment system and process that ensure the process is debiased.

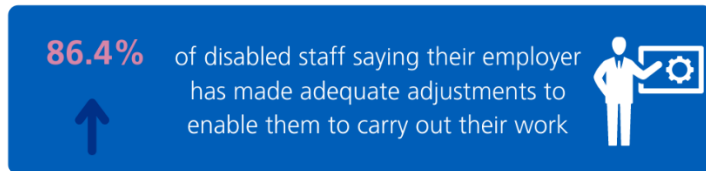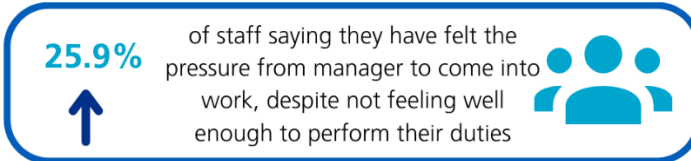| 2	Relative likelihood of white applicants being appointed from shortlisting across all posts compared to BAME applicants		
	Target: decreased to 1.2 by July 2022		
2019	2020	2021	
1.40	1.36	**0.94**	
		This is a significant improvement and is a result of the proactive work that has taken place to debias the recruitment process.	
3	Relative likelihood of BAME staff entering the formal disciplinary process compared to white staff		
	Target: Decrease 1.5 by July 2022		
2019	2020	2021	
1.55	2.64	No BAME staff entering the formal disciplinary process in FY22, so not index calculated	
4	Relative likelihood of white staff accessing non-mandatory training and continuous professional development (CPD) compared to BAME staff		
	Target: decrease to 1 by July 2022. *(A figure below "1" would indicate that white staff members are less likely to access non-mandatory training and CPD than BME staff.)*		
2019	2020	2021	
1.22	1.02	**1.06**	
		This figure has gone in the wrong direction – but over the past 2 years due to the impact of covid all staff have seen a reduction in accessing no mandatory CPD due to the workload pressures and demands.	
Data from staff survey			
5	Percentage of staff experiencing harassment, bullying or abuse from patients, relatives, or the public in last 12 months		
	Target: Decrease percentage to below 20% by September 2022.		
2019	2020	2021	
25.5%	24.3%	**18.7%**	

		This is an encouraging result as benchmark has remained stable- so not only have we met our target we have done better than those Trusts that we have been benchmark against. The Diversity and inclusion action plan has 3 workstreams. Workstream 2 and 3 has a series of specific deliverables that have been put in place to ensure that staff come to work and are not subjected to experiencing harassment, bullying or abuse from patients, relatives, or the public in last 12 months.
6	Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months **Target: Decrease percentage to below 15% by July 2022.**	
2019 18.2%	2020 18.1%	2021 **16.4%** (Managers 7.9%, Colleagues 11.4% **from tables)** The Diversity and inclusion action plan has 3 workstreams. Workstream 2 and 3 has a series of specific deliverables that have been put in place to ensure that staff come to work and are not subjected to experiencing harassment, bullying or abuse from colleagues.
7	Percentage of staff believing that trust provides equal opportunities for career progression or promotion – NB the data collection and calculation formula have been changed by the national team, to now includes 'don't know' in the base – new figure in brackets for 2019/2020. **Target: Increase percentage to 85% by July 2022. Revised target – proportional increase – 60%**	
2019 82.4% (47.9%)	2020 80.3% (56.1%)	2021 **57.7%** Looking at the trend data, 2019 looks like the anomaly in an otherwise stable trend This is an area that we are focusing this year and taking positive action on. We are piloting a leadership and coaching programme specifically for BAME colleagues and we are in the process of establishing a reciprocal mentoring programme. This lunch in may 2022so the impact of this will not show In this year's data. There are specific deliverables within workstream 2 of the D&I plan that are designed to have a positive impact on this indicator over the next year.

8.	Percentage of staff personally experiencing discrimination at work from a manager/team leader or other colleagues		
	Target: Decrease percentage to below 10% by June 2022.		
2019	2020	2021	
9.5%	13.8%	**9.6%**	
		The benchmark trend has remained stable, so positive result for Solent as we have significantly improved in this area.	
Data from ESR			
9.	BAME board membership - Percentage difference between the Board's voting membership and its overall workforce		
	Target: Increase diversity of board membership when vacancies arise.		
2019	2020	2021	
15.4% BAME Board members	21.4% BAME Board members	**16.7%** BAME Board members	
18.2% Voting BAME Board members	18.2% Voting BAME Board members	**20.0%** Voting BAME Board members	

Workforce Disability Equality Standard 2021/22

NHS Solent NHS Trust

↑ Areas of improvement   ↓ Areas that have worsened

Relative likelihood of non-disabled staff compared to disabled staff being appointed from shortlisting across all posts
1.06 ↓

54.3% ↑ of disabled staff that arew satisfied wih Trusts's valuing of their workacross all posts

25.9% ↑ of staff saying they have felt the pressure from manager to come into work, despite not feeling well enough to perform their duties

7.1/10 ↑
Staff engagement score for disabled staff

86.4% ↑ of disabled staff saying their employer has made adequate adjustments to enable them to carry out their work

7.14%
Board members with a disability
1 disabled member, 11 non-disabled members and 2 unknown

86.7% of staff believing Solent will provide equal opportunities for career progression ↓

% of staff experiencing harassment, bullying or abuse

- from patients/service users, their relatives, or other members of the public in the last 12 months

27.2% ↑

- from managers
13.9% ↓

- from other colleagues
16.7% ↓

58% ↓
staff reported harassment, bullying or abuse at work

WDES Indicators		
Data from ESR		

1	The 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.
	
	Target
	
	    a. **Increase disability declaration rates on ESR across** Solent to 60% by July 2022 – **revised target 90%**
	    b. **Increase the number of staff with a disability in bands 8a or above to 4% by July 2022**		

2019	2020	2021
Unknown	Disability status not declared 20.64%	Disability status not declared 18.7% (**81.3% declared**) 524 staff in 8A or above out of those 15 are disable= **2.8%** n.b 3.9% of total WF have a disability Engagement work was undertaken with the network to encourage declaring and understanding the barriers to declaring – this has had a positive impact. However there is further work that is being undertaken to ensure greater psychological safety around declaring disability as well as better and more inclusive leadership and management support and process being in place.

2	Relative likelihood of non-disabled staff compared to Disabled staff being appointed from shortlisting across all posts **Target:** • **Equal likelihood of non-disabled staff being appointed from shortlisting across all posts by July 2022**		

2019	2020	2021
1.20	1.06	**1.22** It is possible the 2020 the anomaly. Work stream one of the Diversity and inclusion plan aims to ensure the recruitment process is more inclusive is and free of bias. The creation of the new Disability and advisory service that was an idea generated form the Disability Network ins Solent is underway. This will remain an area of improvement for this year.

3	Relative likelihood of Disabled staff entering the formal capability process compared to non-disabled staff
	Target: Equal likelihood of disabled staff entering the formal capability process by July 2022

2019	2020	2021
No disabled staff disciplinary process	2.88	**0.82** n.b Such low numbers this metric will always be erratic

Data from staff survey

4a	i.	Percentage of staff experiencing harassment, bullying or abuse from patients/service users, their relatives, or other members of the public in the last 12 months
		• **Target: Decrease percentage to below 25% by September 2022**
	ii.	Percentage of staff experiencing harassment, bullying or abuse from managers in the last 12 months
		o **Target: Decrease percentage to below 10% by September 2022**
	iii.	Percentage of staff experiencing harassment, bullying or abuse from other colleagues in the last 12 months
		• **Target: Decrease percentage to below 12% by September 2022**

2019		2020		2021	
i.	29.1%	i.	27.2%	**i.**	**25.8%**
ii.	12.6%	ii.	13.9%	**ii.**	**9.2%**
iii.	15.8%	iii.	16.7%	**iii.**	**15.9%**
				Bucking the trend as benchmark has increased slightly – overall there has been improvement in this however we continue to focus on raising awareness and understanding to ensure that we see a positive progression in the % staff experiencing harassment, bullying or abuse from other colleagues in the last 12 months.	

4b	Percentage of staff saying that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it in the last 12 months **Target: Increase percentage to 75% by September 2022**	
2019 59.7%	2020 58%	2021 **65.3%** This is a notable increase and also goes against the benchmark trend which is pretty stable.
5	Percentage of staff believing that Solent provides equal opportunities for career progression or promotion. NB the data collection and calculation formula have been changed by the national team, to now includes 'don't know' in the base – new figure in brackets for 2019/2020. **Target: Increase percentage to above** 90% by July 2022 **- revised proportional target – above 63%**	
2019 87.7% (64.9%)	2020 86.7% (60.4%)	2021 **65.6%** Another metric that bucks the benchmark trend which has remained stable – good progress has been made here – we taken positive action to support managers to have health and wellbeing conversations with colleagues as part of appraisals and this may have had a positive influence on this indicator.
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 **Target: Decrease percentage to below 20% by July 2022.**	
2019 27.8%	2020 25.9%	2021 **20.3%** We have taken positive action to support managers to have health and wellbeing conversations with colleagues as part of appraisals and this may have had a positive influence on this indicator. There has been significant investment and promotion of the HWB plan to support colleagues in staying healthy and well at work.

7	Percentage of staff saying that they are satisfied with the extent to which their organisation values their work
	Target: Increase percentage to over 60% by July 2022

2019	2020	2021
48.3%	54.3%	**54.6%**
		Further work is being as part of the Diversity inclusion and belonging plan and wider People Strategy to ensure that colleagues have a greater sense of belonging whilst at work. Service line action planning has been revised this year to specifically support this improvement. Covid has had significant impact on the moral and HWB of colleagues and the HWB plan has specific deliverables to support induvials feeling valued at work.

8.	Percentage of disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work
	Target: Increase percentage to over 90% by July 2022

2019	2020	2021
83.3%	86.4%	**81.2%**
		This is an area that remains a priority for this year – a plan to tackle and address this is currently being worked up. This is informed by staff voice and an engagement activity that has been lead and coordinated through the Disability network. The neuro diverse and Disability advisory (that stemmed from the network) is currently being modelled out and aims to positive address this.

9.	Staff engagement score for Disabled staff
	Target: Increase percentage to 8/10 by July 2022

2019	2020	2021
7/10	7.1/10	**7.1/10**

Data from ESR		

10.	Board membership **Target: Increase diversity of board membership when vacancies arise.**

2019	2020	2021
1 disabled member, 11 non-disabled and 1 unknown last year	7.14% - disability 1 disabled member, 11 non-disabled members and 2 unknowns	No disabled board members 9 non-disabled and 3 unknown

MWRES Indicator – **TO BE ACTIONED ONCE WF ANALSYT IS IN POST**	
1	Percentage of staff in each of the Agenda for Change (AfC) Bands 1–9 and VSM (including executive board members) compared with the percentage of staff in the overall workforce
2	Relative likelihood of white applicants being appointed from shortlisting compared to BME applicants
3	Relative likelihood of BME staff entering the formal disciplinary process compared to white staff
4	Relative likelihood of white staff accessing non-mandatory training and continuous professional development (CPD) compared to BME staff
5	Percentage of BME staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months
6	Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months
7	Percentage of staff believing that their trust provides equal opportunities for career progression or promotion
8	In the last 12 months have you personally experienced discrimination at work from a manager, team leader or other colleagues
9	Percentage difference between the organisation's board voting membership and its overall workforce
10	Staff feeling 'involved': the extent to which individuals are given (and take) the opportunity to contribute ideas and make changes at work
11	Percentage of BME doctors on royal college council, compared to the BME percentage of the overall workforce