

Board of Directors

Item

Subject: Annual Equality, Diversity, Inclusion & Belonging (EDIB) Update
Date of Meeting: 29th May 2024
Prepared by: Rachael McDonald, Deputy Director of HR and L&D
 Peter Cook, Head of Resourcing.
Presented by: Jane Royds, Chief People Officer
Purpose of Report: To Note

BAF Reference	Impact on BAF
BAF 4, 5 & 6	No change to assigned risk rating in BAF – belonging to the NHS is a key component of the People Plan 2021 and pillar of the People Strategy

Level of assurance (please tick one) To be used when the content of the report provides evidence of assurance					
✓	Acceptable assurance Controls are suitably designed, with evidence of them being consistently applied and effective in practice	<input type="checkbox"/>	Partial assurance Controls are still maturing – evidence shows that further action is required to improve their effectiveness	<input type="checkbox"/>	Low assurance Evidence indicates poor effectiveness of controls

1. Executive Summary:

This paper provides a summary of the key workforce and patient developments in relation to the Trust's Equality, Diversity, Inclusion and Belonging (EDIB) strategy and to provide assurance on the Trust's demonstration and compliance with national requirements.

This report includes key highlights for the committee in relation to the WRES and WDES metrics as taken from the 2023 staff survey results which will be used for our full WRES/WDES submission on 31st May 2023.

2. Equality, Diversity, Inclusion & Belonging Strategy (EDIB) 2022-2025

The Trust refreshed its EDIB Strategy in 2022 which was incorporated into the wider People Strategy. The strategy set out our ambition to have a culture of belonging and trust, and to understand, encourage and celebrate diversity in all its forms.

The EDIB strategy was supported by an operational action plan with a number of thematic actions designed to support delivery of the strategy. The year 2 (2024) action plan (**Refer Appendix 1**) demonstrates the current progress against the plan and the actions to complete in Year 2.

An update will be presented to the People Committee on 3rd June 2024. This update will include additional assurance and evidence to support progress against the strategy, EDI Improvement Plans and Anti-Racism Framework

3. National Requirements

3.1 Workforce Equality/Disability Equality Standard (WRES/WDES)

The actions associated with improving the experiences of both our ethnic minority and disabled workforce are set out within the operational EDIB action plan (**Appendix 1**).

The deadline for the 2024 WRES/WDES data collection is 31st May 2024 and will be met. Full analysis of the WRES/WDES results will be provided to the People Committee in September 2024.

A summary and early insight of the WRES/WDES 2024 indicators and results has been provided (**Refer Appendix 2 & 3**). Overall, there has been some positive improvements in our WRES and WDES results, whilst also highlighting some key areas of focus over the next 12 months.

The tables provide a comparison of results on the WRES/WDES metrics as taken from the 2023 national staff survey and include: - *(NB this is only based on the staff survey indicators and not the full WRES/WDES submission due on 31st May)*

- Comparison against previous year's results
- Results of the average (median) for Acute Specialist Trusts
- Results for the Walton Centre
- Results for Clatterbridge
- Results for the Women's Hospital

WRES Results – Key Highlights

The Trust has improved in 3 of the 4 WRES indicators from the previous year.

The results also show that LHCH fared better in comparison to the average of all acute specialist trusts and some local Specialist Trusts, apart from the indicator of percentage of staff experiencing harassment, bullying or abuse from patients, relatives or public in the last 12 months.

The **improved scores** are set out below:

1. *Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months*
2. *Percentage of staff believing that the organisation provides equal opportunities for career progression or promotion*
3. *In the last 12 months have you personally experienced discrimination at work from manager / team leader or other colleagues*

The Trust has seen a **decline** in 1 of the 4 indicators a set out below.

4. *Percentage of staff experiencing harassment, bullying or abuse from patients, relatives, or the public in last 12 months.*

WDES – Key Highlights

There has been promising progress in our WRES results with the trust performing better in 6 of the 9 WDES indicators from the previous year.

The **improved scores** are set out below:

1. *Percentage of staff experiencing harassment, bullying or abuse from managers in last 12 months*
2. *Percentage of staff experiencing harassment, bullying or abuse from patients / service users, relatives, or the public in last 12 months*
3. *Percentage of staff who believe that their organisation provides equal opportunities for career progression or promotion*
4. *Percentage of staff who have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties*
5. *Percentage of staff satisfied with the extent to which their organisation values their work*
6. *Percentage of staff with a long-lasting health condition or illness saying their employer has made adequate adjustment(s) to enable them to carry out their work*
7. *Staff engagement score (0-10)*

The indicators that the trust has seen a **slight decrease** are:

8. *Percentage of staff experiencing harassment, bullying or abuse from other colleagues in last 12 months*
9. *Percentage of staff who believe that their organisation provides equal opportunities for career progression or promotion*
10. *Percentage of staff saying that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it*

LHCH scored better in 7 out of 9 indicators when benchmarked against the average for Acute Specialist Trusts.

3.2 Equality Delivery Standard (EDS2)

LHCH is committed to the implementation of the Equality Delivery System (EDS) process, which is a requirement of both NHS commissioners and provider organisations. The EDS is an improvement tool for patients, staff and leaders of the NHS. It supports NHS organisations in England in active conversations with patients, public, staff, staff networks, community groups and trade unions, to review and develop their approach in addressing health inequalities. This is through three domains: Services, Workforce and Leadership and is evidenced by engagement feedback, insight, and data.

The EDS Report is designed to give an overview of LHCH's most recent EDS implementation and assessment. The report is currently being reviewed by the ICB and will be published on the internet once grading has been confirmed. This year, the EDS2 assessment focussed on a review of the Targeted Lung Programme, aligned for Core 20 plus 5. A national NHS England programme designed to support the reduction in health inequalities at a national and system level.

Overall, the C&M TLHC programme has continued to make excellent progress. The programme maintains a positive incident reporting culture where lessons can be learned and receive positive feedback from patients. Whilst there have been several standards which were not being achieved earlier in the year, by year end there was only one metric which is still to be consistently achieved. The programme maintains its strong position and will strive to continue to achieve these standards in 24/25.

3.3 Gender Pay Gap Report

The gender pay gap report was presented to the Board in March 2024 and published in line with the legal requirement to publish our data annually by 31st March. The report highlighted improvements in our gender gap compared to the previous year, however, there is further work to be done, specifically in relation to the gender ethnicity gap.

The report and results were taken to the EDIB steering group for discussion and actions are being formulated to support the EDIB action plan.

3.4 Equality Monitoring Report

The purpose of this report is to demonstrate the Trust's compliance with the Equality Act 2010 and public sector specific duties. The report is refreshed and published annually and summarises equality monitoring data for the workforce at Liverpool Heart and Chest Hospital for the period 1st April 2023 to 31st March 2024, using data taken from the Electronic Staff Record (ESR) and the recruitment system. This report is in its final stages of development and will be presented to the EDIB steering group before publication.

3.5 Anti-Racism Framework

A response to the Anti Racism Framework was shared with the People Committee and Board of Directors in September 2023. The initial actions being taken to support the implementation have been completed.

The wider framework doesn't set out specific delivery timescales, but we have aligned our action plan to the lifecycle of our strategy. An assurance update against delivery of our actions plan will be provided to the People Committee in June 2024.

Work is ongoing to support an application for the Northwest Anti-Racism Bronze Award. Bronze is the first stage in a series, which spotlights organisations committed to driving race equality.

4. Patient Agenda

EDI updates relating to patients are report to the Quality and Patient Family Experience committee on a bi-yearly basis. In this report the trust demonstrates that it is monitoring, reporting, and publishing equality data in line with the public sector equality duties.

5. Conclusion:

This paper provides a summary of EDIB activity over the last 12 months as outlined in the EDIB Action Plan and provides early insight into our WRES/WDES performance based on the 2023 staff survey results. The paper is intended to demonstrate that good progress has been made against delivery of the EDIB strategy and we have complied with our national requirements and public sector duty under the Equality Act.

Development of a new integrated action plan does help drive this work forward, but as the agenda remains significant, capacity is likely to become a challenge with the strategic EDI role currently being an added responsibility to a substantive role and with an additional risk of single point of failure which will be monitored.

The monitoring and review of equality related activities for both our patients and workforce is undertaken through the Trust's established EDIB Steering Group and assurance on activity and progress against the EDIB action plan will be provided to the People Committee on a quarterly basis.

7. Recommendations:

The Board is asked to note the contents of this report and supporting appendices

8. Appendices

Appendix 1	EDIB Operational Action Plan
Appendix 2	WRES Results and Comparison
Appendix 3	WDES Results and Comparison