

Report Cover Page						
Meeting Title:	Trust Leadership Team					
Meeting Date:	13 May 2024	Agenda Reference:	To be completed by TBO			
Report Title:	Workforce Race Equality Standard (WRES) & Workforce Disability Equality Standard (WDES)					
Sponsor:	Zoe Lintin, Chief People Officer					
Author:	Kirby Hussain, ED&I Lead Zoe Lintin, Chief People Officer					
Appendices:	Appendix 1: 2023-24 WRES data Appendix 2: 2023-24 WDES data					
Report Summary						
Guidance for Executive Summary	To provide the Trust Leadership Team with the Workforce Race Equality Standard (WRES) data and the Workforce Disability Equality Standard (WDES) data for the reporting period 2023-2034, prior to circulation to the People Committee and submission by 31 May 2024.					

The information below summarises the DBTH workforce data for the Workforce Race Equality Standard (WRES) and Workforce Disability Equality Standard (WDES) submissions. The data was collected on 19 April 2024, covering the period 1 April 2023 to 31 March 2024.

This summary highlights the areas of positive change in comparison with last year's data whilst recognising there is still work to do in order to see continued improvements, with key areas of focus outlined below.

WRES Highlights

• There has been a significant increase in the number of BME colleagues in clinical roles, with 245 more employees stepping into such roles, together with an increase of 15 colleagues in nonclinical roles across bands 2, 4, 5, 6, 7, and 8A within our workforce. This positive trend underscores our commitment to diversity and inclusion.

Areas of improvement were:

- Clinical band 2 increased by 11 employees
- Clinical band 5 increased by 163 employees aided by internationally educated nurse recruitment
- Clinical band 6 increased by 17 employees
- Medical & dental consultants increased by 11 employees
- Non-consultant career grade increased by 36 employees
- Slight increase in proportion of colleagues being appointed and the number of appointed BME employees increased slightly

WDES Highlights

• There has been a notable rise in the number of employees in clinical roles reporting as having a disability, with an additional 60 individuals taking up such positions or declaring their disability. There has also been an increase of 18 colleagues in non-clinical roles across bands 2, 4, 5, 6, 7, and 8A within our workforce.

Areas of improvement were:

- Clinical band 2 with a disability increased by 19 employees
- Clinical band 3 with a disability increased by 2 employees
- Clinical band 5 with a disability increased by 18 employees
- Clinical band 6 with a disability increased by 8 employees
- The number of Medical & dental consultants with a disability and non-consultant career grade with a disability stayed the same
- Medical & Dental Trainee grade with a disability has decreased by 2
- There has been a notable rise in the appointments of 60 individuals with disabilities to clinical positions, along with an additional 18 appointments to non-clinical roles.

Key areas of continued focus across both WRES and WDES and actions being taken include:

- BME Clinical band 3 decreased by 27 employees
- Number of shortlisted BME applicants decreased by 11 and with a disability decreased by 21
- There continues to be no Board representation from either BME or Disabled colleagues.
- The Board Development Delegate Programme has been designed to support a more diverse talent pipeline at a senior level, with the third cohort recently commencing with three delegates. Four delegates have already completed the programme with positive feedback on their experiences of the programme and the impact on their personal development. The third cohort of the Reciprocal Mentoring Programme is also underway, to support aspiring leaders and provide learning for established leaders.
- There has been only a slight decline (1 employeee) in the overall representation of colleagues from a BME background in medical trainee positions. The diversity within these cohorts is mainly shaped by the pool of individuals enrolled in university medical programmes and trainees are allocated to each of the Trusts. The ED&I Lead has made contact with counterparts at Sheffield University and Sheffield Hallam University to explore ways of enhancing support and retention for students. Trust EDI Leads work with ED&I representatives from both Universities.
- Increasing the membership and robustness of staff network groups and promoting this in our recruitment offers locally and internationally. There have been some changes in chair roles in some networks over the course of the year which has impacted on progress.
- Cultual Competence training has started to provide support in areas with communities of internationally educated colleagues. Consideration is being given as to how this training can be shared more widely.
- Work to continue to encourage reporting of disability status, including seeking views of the Ability Network on what may assist with this.
- The staff survey results have been analysed by breakdown of ethnicity and disability, with the results shared with the EDI Committee and relevant staff networks.

These actions and others are included within the overarching Equality, Diversity and Inclusion action plan which also incorporates the NHSE High Impact Actions. The action plan is monitored through the EDI Committee with regular reporting and oversight at People Committee.

Recommendation:	The Trust Leadership Team is asked to approve the information provided in the			
	report and its appendices, to be published on the Trust webpage and as part of			
	mandated EDI reporting by 31 May 2024.			
	The information will also be shared with the EDI committee, People Committee and Board.			

Action Require:	Approval	Review and discussion/ give guidance	Take assurance	Information only			
Link to True North	TN SA1:	TN SA2:	TN SA3:	TN SA4:			
Objectives:	To provide outstanding care and improve patient experienc	Everybody knows their role in achieving the vision e	Feedback from colleagues and learners is in the top 10% in the UK	The Trust is in recurrent surplus to invest in improving patient care			
We believe this paper is aligned to	South Yorl	shire & Bassetlaw ICS	NHS Nottingham & Nottinghamshire ICS				
the strategic direction of:		Yes	Yes				
Implications							
Board assurance framework:	No char	No changes					
Risk register:	-						
Regulation:	The WRES & WDES data are mandated EDI reports						
Legal:	Equality Act						
Resources: -							
		Assurance Route					
Previously considered by: The re		e report will be shared with	port will be shared with People Committee				
Date: -							
Any outcomes/next steps N/A							
Previously circulatedN/Areports to supplement thispaper:		J/A					