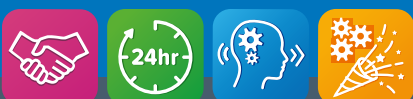


Equality, Diversity and Inclusion

Annual Report 2022



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1. A welcome from our Chair and Chief Executive

At Worcestershire Acute Hospitals NHS Trust (WAHT) we continue to strive to build a culture of inclusion, understanding, kindness and respect towards all staff and people who use our services, their relatives, carers and the wider general public. Over the last year we have made some progress through our Equality, Diversity and Inclusion 7 Priority Plans. However, we are not yet in a position whereby we can be confident that all of our colleagues feel that they can truly be themselves at work and achieve their fullest potential.

As a Board we have lent our full support to our staff inclusion networks - empowering them to change and improve the way we do things in the Trust – and we are committed to the respect for people, kindness, compassion, courtesy and civility which are among the ‘golden threads’ which run through our Strategic Pyramid.

Those golden threads help to bind our vision of ‘leading and supporting our teams’ to our strategic objective of ‘best people’ as well as to our 4ward behaviours, our 4ward improvement system and our Behavioural Charter which was launched in 2022 and sets out our zero tolerance approach towards bullying, harassment, discrimination, violence or aggression of any kind.

Our LGBTQ+ staff network attended both Birmingham and Worcestershire PRIDE events, and has worked tirelessly in the implementation of the Rainbow Badge programme - a scheme aimed at increasing inclusivity for our staff and decreasing health inequalities for our LGBTQ+ community.



Anita Day
Chair



Matthew Hopkins
Chief Executive

Our Disability staff network has ensured that disability leave is now fully embedded in our Staff Sickness Absence Policy and they were also successful in a bid for funding to revolutionise the way we recruit staff with disabilities.

We are particularly proud of all of the members of our Staff Inclusion Networks who represent the very best of our Trust. They are passionate, courageous, honest and relentless in advocating for change.

But it is not just up to our networks to do the hard work of championing inclusion and diversity. Role modelling the right behaviours must happen at all levels and in all corners of our Trust.

This is vital if we are really to create an organisation where the principles of equality and fairness are built-in to everything we do. By making our Trust an even better place to work, they make our hospitals even better places in which to be cared for. That helps us all work together even more effectively towards our purpose of putting patients first.

Publishing our annual Equality, Diversity and Inclusion report provides an opportunity to step back and consider how we are doing in our efforts to achieve this.

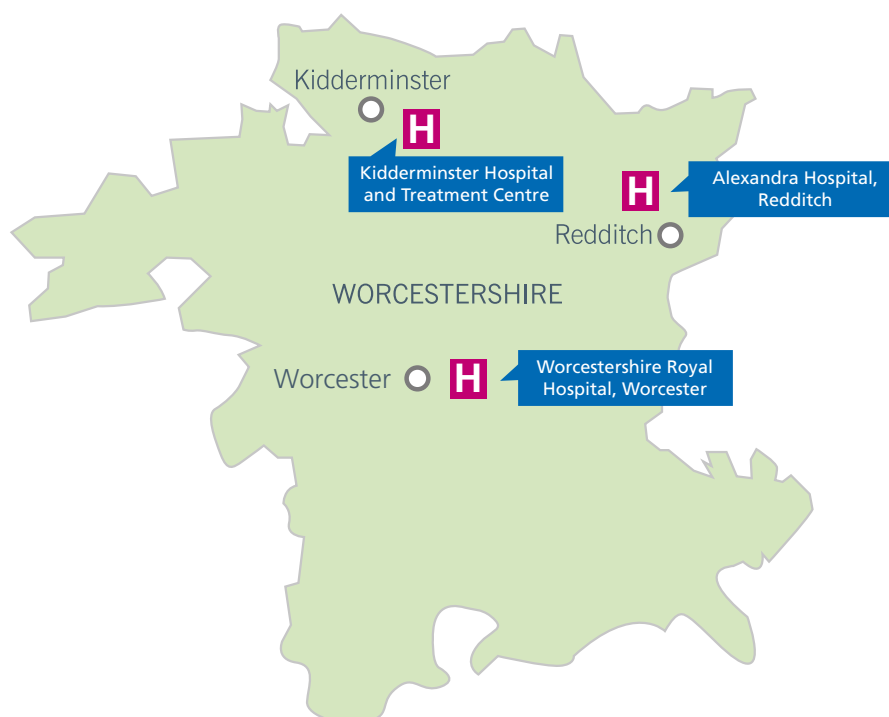
This report highlights our activity against the general equality duty as outlined in the Equality Act 2010, and provides an overview of our activity during 2022 and will support us in reviewing our priorities over the next 12-24 months and ensuring 'better never stops'.



Anita Day
Chair

Matthew Hopkins
Chief Executive

2. Introduction



As at 31 March 2022, the Trust employed 6,806 members of staff over three main sites.

Worcestershire Acute Hospitals NHS Trust is committed to promoting equality of access, experience and outcomes for people who use our services, their carers and our workforce. We understand that everybody's journey through life is unique and individual to them, and value the importance of diversity and inclusion across our services, our workforce and the wider Worcestershire community.

Our actions to improve staff experience in relation to Equality Diversity and Inclusion align with the Trust's wider organisational strategic goals, specifically our People and Culture Strategy.

They also support our commitments to the NHS People Plan and the People Promise: 'We are compassionate and inclusive'.

The information in this report represents the actions and progress undertaken throughout 2022 in compliance with our public sector duties to:

1. Eliminate unlawful discrimination, harassment, victimisation and other conduct prohibited by the act.
2. Advance equality of opportunity between people who share protected characteristics and those who do not.
3. Foster good relations between people who share protected characteristics and those who do not.

It provides information about the work we have undertaken as a Trust with our EDI 7 Priority Plans and within our core services, and outlines our priorities and plans for the year ahead.

3. How we use equality data

Throughout this report, we refer to important equality monitoring information about the people who use our services, our workforce and the Worcestershire population.

When people join our organisation, either for care and treatment or employment, we ask questions about personal details, including protected characteristics such as age, ethnicity and sexual orientation. This is known as equality monitoring information.

We want to ensure that people consistently receive high quality, effective services that meet their individual needs. To do this, we need to ensure we continue to understand what that range of needs is across our population so we can enhance and develop our services in order to meet growing and changing needs.

The Data Protection Act 2018 sets out strict rules in managing and using people's personal information. Any information people provide to the organisation is held securely and confidentially on our electronic patient or staff record systems. When data is extracted for analysis in reports such as this one, it is anonymous. We analyse the anonymised information to identify and respond to any issues affecting groups of patients or staff which share certain protected, or other characteristics, or identify as part of certain groups.

We use this data and information to comply with a range of national standards relating to workforce equality that as part of our standard contract we are required to meet annually. These are currently:

- ▶ Workforce Race Equality Standard (WRES) report and action plan.
- ▶ Workforce Disability Equality Standard (WDES) report and action plan.
- ▶ Gender Pay Gap (GPG).

We are also using this data to work towards the new Equality Delivery System report (EDS2022) for NHS England.

4. Behavioural Charter, 4ward refresh, engagement and inclusive recruitment

Organisational Behavioural Charter

Our Staff **MUST** be able to come to work without fear of violence, abuse, harassment or discrimination from colleagues, patients or visitors.

The original concept for the Charter was as an anti-racism charter and was proposed by our BAME staff network prior to their annual conference in May 2021; the Charter has then been further developed into an Inclusion and Anti-Discrimination Charter to incorporate all protected characteristics.

Further development included input from clinical divisions and teams to develop the behavioural charter that we have today which includes all types of inappropriate behaviour towards staff, patients and visitors.

The Charter itself lays down the commitment from the Trust that any member of staff experiencing or reporting violence, aggression, bullying, harassment and discrimination from patients, visitors and colleagues will be fully supported to speak up and ensure that appropriate action is taken and sanctions applied where necessary.

The development of this charter initiated a programme of work covering four key areas within WAHT.



1. Zero Tolerance Statement

As a Trust we believe that everyone should be treated equitably. This means that we fully support and encourage anyone staff, patient or visitor who is experiencing/has experienced, or has witnessed, any form of discrimination, harassment or bullying to come forward and tell us and to receive support and advice; no act is considered too small to be addressed.

Our Zero Tolerance statement will be displayed in all prominent areas of the Trust and provides all staff, patients and visitors with examples of behaviours that will not be tolerated.

2. Charter and Behaviours

The Charter sets out the organisational commitment to fully support staff who experience violence, aggression, bullying, harassment and discrimination and take appropriate action when required.

Behind our Charter are examples or inappropriate behaviours and ways in which staff, patients and visitors can report these appropriately.

3. Safe to Speak Up

The Freedom to Speak Up Guardian has worked closely with the internal incident reporting team on two major projects over the last 12 months:

1. To identify and implement ways in which reports of violence, abuse, harassment or discrimination can be made anonymously when required.
2. Upgrade the FTSU reporting system to identify a protected characteristic when all Freedom to Speak Up reports are submitted.

4. Legislation and Policy

The Charter development prompted a programme to update and develop new policy and strategies to complement the Charter. The HR team have worked to ensure that our internal grievance, disciplinary and Dignity at work policies can support managers to fulfil their requirements.

The Health and Safety Team have updated their Violence Prevention, Reduction and Management of Violence and Aggression policy and developed a new Violence Prevention and Reduction Strategy.

The work in these 4 key areas has allowed us to lay the foundations of a culture of safe to speak up where we can monitor reports of violence, abuse, harassment or discrimination and identify when these have may have been of a discriminatory nature.



4Ward Behaviours Refresh and Engagement

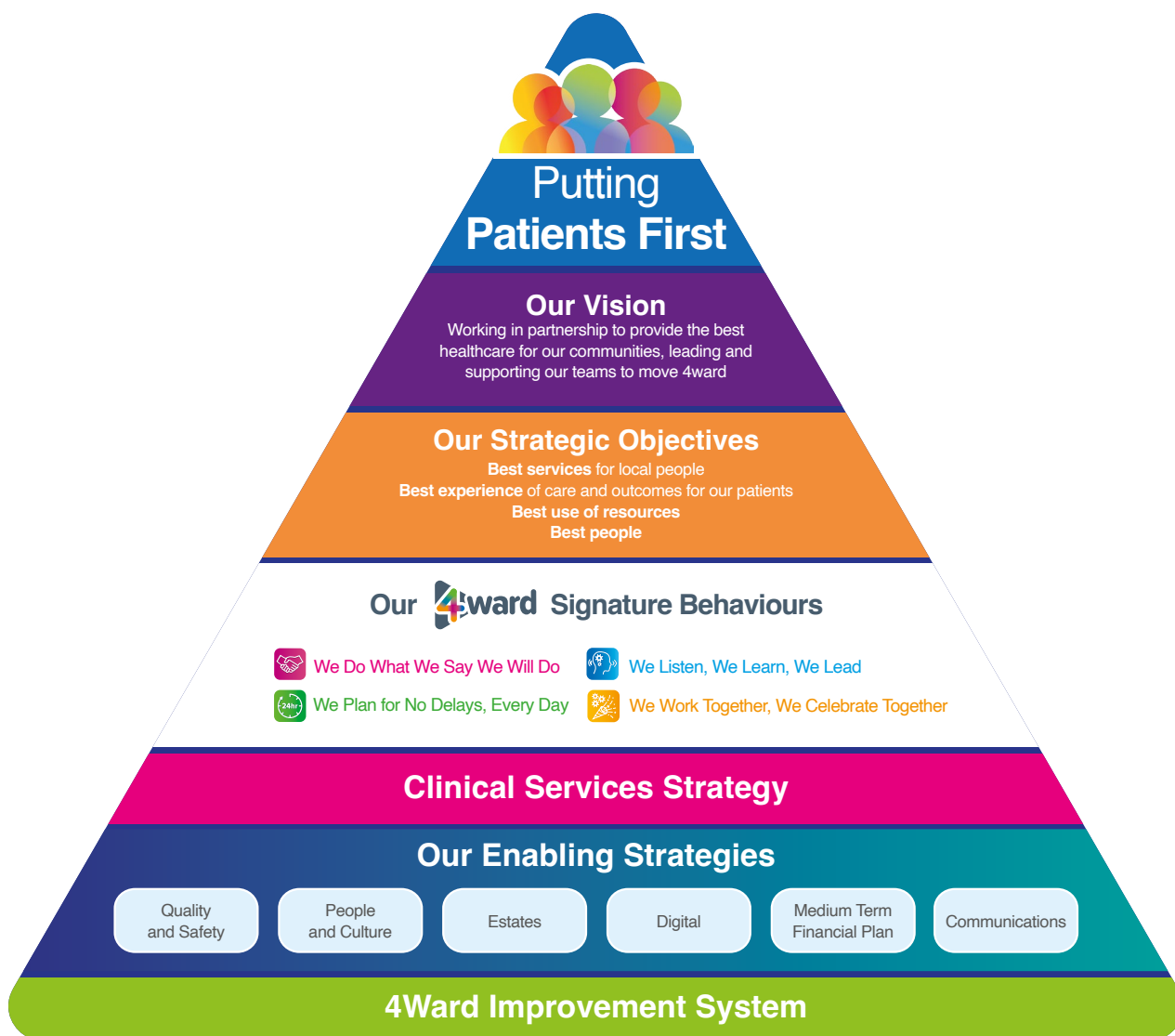
Our 4Ward behaviours have been in place now for a number of years and at the start of 2022 we began an extensive engagement across the Trust over a period of four months, meeting with more than 500 colleagues to test whether our 4ward behaviours are still relevant and valuable.

More than 200 individual pieces of feedback, including stories of colleagues' lived experiences were received. Demonstrating strong engagement and commitment to ensuring that our 4ward behaviours continue as a cornerstone of our Trust and at the centre of our Trust strategic pyramid.

In the consultation many emphasised the importance of civility, respect and kindness – and the impact when those things are missing. There was powerful input from our Staff Networks and strong links to our Behavioural Charter.

At the same time there was continued support for established behaviours, including the principle of No Delays Every Day.

By Autumn 2022, a preferred option was identified. The refreshed behaviours refine our four established behaviours with some minor amends, including “We plan for no delays every day”.



Our Strategic Pyramid

There is a strong emphasise on the importance of respect, civility, diversity and inclusion and the links to our Behavioural Charter. With the introduction of behavioural indicators for each behaviour to support more consistent 'We Do This By' for teams and leaders, and to improve recognition of poor behaviour as well as promoting good behaviour.

Inclusive Recruitment

Individuals from minority groups are disadvantaged in their search for employment. Data from the Trust WRES (Workforce Race Equality Standard) 2020 reported that white applicants were 1.52 times more likely to be appointed than BAME (Black, Asian and Minority Ethnic) applicants so in April 2022 we introduced a new inclusive recruitment approach for senior leadership roles at Afc Band 8a and above within the organisation. To ensure consistency throughout the organisation managers were provided with a new toolkit explaining the new requirements of this programme of work.

The tool kit provides guidance to managers on how to craft and inclusive job advert using supportive language and ensuring that essential and desirable criteria are not seen as discriminatory.

To encourage applicants from BAME, Disabled and LGBTQ+ backgrounds the Trust have expanded the scope of the guaranteed interview scheme to include applicants from these demographic who meet the essential criteria of the role.

A new role of recruitment champions has been introduced at shortlisting and interview stage to ensure that these processes are evidence based free from bias. Their role is to identify and explore further issues of culture, behaviour,

where staff may be being treated less favourably, potential discrimination and unconscious or conscious cultural bias. All of which could be present, observed and ignored during informal or formal processes. The Recruitment Champions role is to be curious about these issues, make them transparent and create dialogue to establish the potential impact on the outcome. Inclusive Interview Questions and specific questions for Leadership roles have been developed to be asked at interview in support this new initiative.

This programme of work will assist us in:

- ▶ Increase confidence in the formal process for staff and applicants with a protected characteristic.
- ▶ Improve the quality of opportunities for staff with protected characteristics within the workplace.
- ▶ Increase our representation in Leadership roles.
- ▶ Help the Trust in its programme to improve our WRES, WDES and staff survey data.

5. Staff Inclusion Networks

Disability Network

Donna Scarrott Network Chair

The aim of the Staff Disability Network is to encourage contact, support and friendship among all staff who self-identify with a disability whether visible or invisible. The network seeks to foster an environment where issues of disability can be discussed in confidence and where advice and information can be sought. The Network is committed to raising the profile of disability in the workplace and actively seeks to improve the disabled experience at the Trust. The Network is built around best practice on disability in the workplace and will build upon members' lived experience to better inform us on how disability inclusion can benefit organisational goals and foster good employee relations.

Over the last 12 months the Network has built lasting relationships with managers who have sought support to ensure they do the "right thing" for their staff who identify as having a disability, this includes making reasonable adjustments and managing the absence levels of members of staff with disabilities. The Network has been instrumental in ensuring that Disability leave is fully embedded into the organisational sickness absence policy.

Our biggest achievement this year has been our successful bid to the Workforce Disability Innovation fund for funding to look at innovative ways we recruit staff with disabilities. Work has already commenced with a disability specific recruiting platform who will advertise roles on our behalf directly to potential applicants with a disability, and in the new year we will be holding disability confident job fairs. The Network also

continues to support staff with a disability to enhance their experience at WAHT.

In 2023 we will continue our work to actively increase the number of applications we receive from people with a disability and work with the Trust to look at innovative ways we can engage staff that have a disability to update the staff record accordingly. We plan to look at the development and implementation of health ability passports to ensure staff and managers have the required support when to different departments in the organisation. We will also continue our work to further the Trust Disability Confident status with the Disability Confident scheme.

LGBTQ+ Network

Dr Luke Simonds (He/Him) Network Chair

The network aims to provide LGBTQ+ Staff and their allies a voice to influence and support the Trust board and Executive to make positive changes to improve patient care and create a psychologically safe and flourishing work environment for all staff.

Our LGBTQ+ network assist the Trust Board to tackle some of the key barriers to healthcare for LGBTQ+ patients whilst also promoting a more diverse and inclusive workplace for the trust's LGBTQ+ staff and allies, aligning with the Trust 4Ward behaviours 'Listen, Learn and Lead'.

2022 was a very successful year for the LGBTQ+ network. After a re-launch in January, membership to the network has increased which has helped us to complete our key objectives.

Much of the year was spent working on the NHS Rainbow Badge project, for which the Trust was awarded an 'Initial Stage' status. Whilst the report highlighted many areas for improvement, it was reassuring to see that many of the action points were already in progress. The network secured some initial training for staff on gender identity with Dr Jamie Willow from Sussex Partnership Trust. Other work has included completing the Healthwatch 2020 action plan. The Network has worked closely with the Trust to promote the use of pro-nouns and help to educate staff on its importance. We are pleased to have developed a new intranet site for our staff with educational resources on and a new internet site for our patients, highlighting what the Trust does to help our LGBTQ+ patients.

2023 will begin with the launch of the NHS Rainbow Badge in February, to link in with LGBT History Month. We will be encouraging our staff to sign up to the scheme, which will involve attending an LGBTQ+ Awareness training session. Our focus will then turn to the recommendations made in the NHS Rainbow Badge assessment, which will include developing new mandatory training, ensuring that all Trust wide policies use inclusive language and have appropriate equality impact assessments and that facilities across our three sites are inclusive for all of our staff and patients.

BAME Network

We are an active network of BAME colleagues and allies working together with the aim of helping create a culture where all staff and patients - regardless of their race or ethnicity - feel supported, cared for, and are treated with dignity, kindness and respect.

The BAME Network meets weekly to progress three key areas:

- ▶ Support and Advocacy
- ▶ Training and Education
- ▶ Recruitment and Retention

2022 has been a very busy year for our network. Network members have been providing ongoing support to the key organisational work streams for the Trust Behavioural charter, our new organisational approach to Inclusive recruitment and the cultural ambassador and women advancing in leadership programmes.

In 2023 we will be providing further contributions to the key work streams, inclusive policy development and review and work we will begin on a new initiative to link the network to our international nurse colleagues.

Our Network priorities for 2023 are:

- ▶ Work with the Trust to understand legitimate discrimination.
- ▶ Producing an EDI newsletter for staff in conjunction with our other Networks
- ▶ Racism awareness events throughout the year.

The Faith and Spirituality Network

The Revd. David Ryan, Network Chair

The network is the newest of the staff inclusion networks, having started this Summer, and now into a regular monthly pattern of meetings on Teams.

Our network aims to provide staff with a "Safe space" where individuals can express their

beliefs and concerns without discrimination, harassment and victimisation. It is there as well to enable staff to communicate with patients and colleagues appropriately, and to provide advice and guidance on how patients' religious and philosophical beliefs can be met by all members of staff, aligning with the Trust 4Ward behaviours, including we 'listen, learn and lead'.

As we develop, we are raising our profile and awareness. This has so far included hosting a "Mitzvah" event at the Alex with Worcestershire Interfaith Forum and strengthening our partnerships with leaders across the faiths through Chaplaincy.

For the future our short term objectives include:

- To work within the Trust's Equality and Diversity structure, including collaborating with other networks, committees and groups in the Trust to achieve its aims.
- Provision of educational opportunities for the network to allow further education of Trust colleagues, and to work with community faith leaders to this end.
- To introduce a structure for the Network, with Terms of Reference, a steering group, and a plan for meetings through the year
- For the long term beyond 2023:
- Assist in formulating new and reviewing existing policies and procedures to ensure that colleagues and patients are not disadvantaged.
- Support the organisation to attract, recruit and retain staff of all faiths and none, in line with the Trust's inclusive and diverse values.

- Provide learning and development opportunities within the Trust's training and education offer, available for all staff.
- To encourage Trust volunteers with a faith or belief to be part of and become members of the Network.

6. EDS, WRES and WDES

Equality Delivery System

The Equality Delivery System (EDS) is a system that helps NHS organisations improve the services they provide for their local communities and provide better working environments, free of discrimination, for those who work in the NHS, while meeting the requirements of the Equality Act 2010. The EDS was developed by the NHS, for the NHS, taking inspiration from existing work and good practice nationally.

A review of the EDS2 was undertaken to incorporate changes at a system level and take account of the new system architecture. Through collaboration and co-production and taking into account the impact of COVID-19, the EDS has been updated and EDS 2022 is now being live tested prior to its full reporting year from April 2023.

Implementation of EDS 2022 is a requirement of both NHS commissioners and NHS provider organisations. In light of the inclusion of EDS 2022 in the NHS standard contract, NHS organisations should use the EDS 2022 reporting template to produce and publish a summary of their findings and implementation.

The reporting template for EDS 2022 requires us to score ourselves against 3 Domains which are broken into 11 separate outcomes. Domain 1 focuses on how Trust services meet our population needs. Goal 2 and 3 focus on the Trust workforce.

Domain 1 – Commissioned or provided services

Outcomes:

- ▶ 1A- Patients (service users) have required levels of access to the service
- ▶ 1B- Individual patients (service users) health needs are met
- ▶ 1C -When patients (service users) use the service, they are free from harm
- ▶ 1D- Patients (service users) report positive experiences of the service

Domain 2 – Workforce Health and Wellbeing

Outcomes:

- ▶ 2A- When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions
- ▶ 2B- When at work, staff are free from abuse, harassment, bullying and physical violence from any source
- ▶ 2C- Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source
- ▶ 2D- Staff recommend the organisation as a place to work and receive treatment

Domain 3 – Inclusive Leadership

Outcomes:

- ▶ 3A- Board members, system leaders (Band 9 and VSM) and those with line management responsibilities routinely demonstrate their understanding of, and commitment to, equality and health inequalities
- ▶ 3B- Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed
- ▶ 3C- Board members and system leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients.

By working closely with our system partners to collect the required evidence, the EDS will allow us to fully understand the connection between the outcomes of the EDS and the health and wellbeing of staff members. This will support us to build a healthier and happier workforce by recognising the physical impact of discrimination, stress and inequalities, which will in turn increase the quality of care provided for patients, service users and broader populations. The evidence gather phase of EDS will be completed by February 2023 and contribute to the wider Equality, Diversity and Inclusion assurance process.

Workforce Race Equality Standard (WRES)

The 2020 Workforce Race Equality Standard (WRES) report is the sixth publication since the WRES was mandated, and it covers all nine indicators.

WRES Indicators:

- ▶ 1 to 4 Workforce Indicators
- ▶ 5 to 8 Staff Survey Indicators
- ▶ 9 Board Representation Indicator

NHS providers are expected to show progress against the WRES indicators and publish their specific reports and action plans on their website as part of the National Contract.

The report has the following key roles:

- ▶ To enable organisations to compare their performance with others in their region and those providing similar services, with the aim of encouraging improvement by learning and sharing good practice.
- ▶ To provide a national picture of WRES in practice, to colleagues, organisations and the public on the developments in the workforce race equality agenda.

Our Current WRES data shows:

- ▶ There is still a significant under-representation of BAME staff from Band 8a to VSM (199 for 2085 posts)
- ▶ There has been a significant increase since 2021 in the relative likelihood of BAME staff entering a formal disciplinary process from 0.49 to 1.11 times more likely.
- ▶ The likelihood of White staff being appointed after shortlisting when compared with BAME staff has increased from 1.45 to 1.15.
- ▶ 28.3% (103 BAME staff) have experienced harassment, bullying or abuse from service users, an increase of 3% from Staff Survey 2020.

- There has been a slight increase in the number of BAME staff experiencing harassment, bullying or abuse from staff from 24.9% (93 staff) to 26.6% (97 staff) in 2021.

- The gap between BAME and White staffs' perception of equal opportunities for career progression is 15.6% lower than white colleagues and 3% below the BAME national average.

	WRES Data Comparison 2020 - 22								
	2020			2021			2022		
	White	BAME	Ethnicity Unknown	White	BAME	Ethnicity Unknown	White	BAME	Ethnicity Unknown
Representation B1 - 5	3250	535	22	3367	614	22	3226	749	19
Representation B6 - VSM	1760	175	17	1832	194	15	1877	119	4
Relative likelihood of staff being appointed from shortlisting across all posts	28.03%	19.15%	8.98%	29.09%	20.01%	8.33%	27.54%	18.28%	14.14%
Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation	0.19%	0.11%	0.00%	0.18%	0.09%	0.00%	0.27%	0.30%	3.23%
Relative likelihood of staff accessing non-mandatory training and CPD	70.75%	78.56%	70.45%	98.20%	95.46%	95.35%	93.94%	93.60%	96.77%
Total Board Members	16	1	0	16	3	0	15	3	0

Our WRES report and action plan can be found www.worcsacute.nhs.uk/our-trust/corporate-information/equality-and-diversity/workforce-race-equality-standard

Workforce Disability Equality Standard (WDES)

The Workforce Disability Equality Standard (WDES) is a set of ten specific measures (metrics) which enables NHS organisations to compare the workplace and career experiences of disabled and non-disabled staff. NHS organisations use the metrics data to develop and publish an action plan. Year on year comparison enables NHS organisations to demonstrate progress against the indicators of disability equality.

WDES Indicators:

- ▶ 1 to 3 Workforce Indicators
- ▶ 4 to 8 Staff Survey Indicators
- ▶ 9 Staff Survey Engagement Indicator
- ▶ 10 Board Representation Indicator

NHS providers are expected to show progress against the WRES indicators and publish their specific reports and action plans on their website as part of the National Contract.

The analysis of our data and published annual reports will enable us to benchmark ourselves across all trusts and national healthcare organisations.

Our current WDES Data shows

- ▶ 51.8% of staff with a Long Term Condition or illness perceived that the Trust offers equal opportunities for career progression compared to 55.9% of staff without an LTC of illness.
- ▶ Disability disclosure rates within ESR are as low as 1.8% and work needs to be done

to increase confidence for staff to feel able to share information about their long term health condition or disability.

- ▶ 11 % fewer disabled staff still feel that their work is valued by the Trust than Non-disabled staff.
- ▶ Disabled staff are more likely to have experienced bullying, harassment or abuse from service users and from staff, however 43.6% reported it.
- ▶ Disabled staff are more likely to feel pressure to attend work despite feeling unwell to perform their duties.

Our employee data also shows us that 113 (1.8%) of staff have shared that they consider themselves to be disabled or long term health condition within their self-service staff record. However, In the staff survey the WDES questions were answered by an average of 615 (9.03%) of staff who identify as having a disability / long term condition.

Our WDES report and action plan can be found www.worcsacute.nhs.uk/our-trust/corporate-information/equality-and-diversity/workforce-race-equality-standard

	WDES Data Comparison 2021 - 2022					
	Snapshot Data 31 Mar 2021			Snapshot Data 31 Mar 2022		
	Disabled	Non-Disabled	Disability Unknown	Disabled	Non-Disabled	Disability Unknown
Representation B1 - 5	71	2666	1257	71	2666	1275
Representation B6 - VSM	10	1219	777	37	1271	777
Relative likelihood of staff being appointed from shortlisting across all posts.	0.20	0.20	0.19	0.2	0.2	0.19
Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation.	0.00	0.00	0.00	0.00	0.00	0.00
Percentage of Disabled staff compared to non-disabled staff believing that their organisation provides equal opportunities for career progression or promotion.	81.70%	85.70%		51.80%	55.90%	
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.	31.50%	24.40%		33.60%	25.70%	
Percentage of Disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their organisation values their work.	35.30%	47.20%		29.30%	40.00%	
Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work.	79.10%			72.50%		
The staff engagement score for Disabled staff, compared to non-disabled staff and the overall engagement score for the organisation	6.6	7.0		6.4	6.8	
Total Board Members	0	15	4	0	15	3

Gender Pay Gap

Through analysis of the report's findings the challenge in our organisation and across Great Britain is to eliminate any gender pay gap. However, the gender pay gap should not be confused with equal pay.

Equal pay deals with the pay differences between male and females who carry out the same jobs, similar jobs or work of equal value. It is unlawful to pay people unequally because of their gender and we support the fair treatment and reward of all staff irrespective of gender or any other protected characteristic.

The gender pay gap shows the difference between the average (mean or median) earnings of men and women. This is expressed as a percentage of men's earnings e.g. women earn 15% less than men. Used to its full potential, gender pay gap reporting is a valuable tool for assessing levels of equality in the workplace, female and male participation, and how effectively talent is being maximised.

The snapshot March 22 Gender Pay Gap data for the Trust is:

- ▶ The Trust's mean gender pay gap is **30.8%**
- ▶ The Trust's median gender pay gap is **18.28%**
- ▶ The Trust's mean bonus gender pay gap is **45.24%**
- ▶ The Trust's median bonus gender pay gap is **35.63%**
- ▶ The proportion of males receiving a bonus payment is **4.57%**
- ▶ The proportion of females receiving a bonus payment is **0.44%**

The Trust do not offer a bonus scheme to staff. However, some of our clinicians are entitled to apply for a Clinical Excellence Award, this accounts for the bonus section of our report.

Worcestershire Acute Hospitals NHS Trust Gender Pay Gap Comparison Data			
Snapshot Date	31st March 2020	31st March 2021	31st March 2022
Mean Gender Pay Gap	31.70%	31.70%	30.80%
Median Gender Pay Gap	15.80%	16%	18.28%
Mean Bonus Gender Pay Gap	42.80%	39.70%	45.24%
Median Bonus Gender Pay Gap	52.50%	40.10%	35.63%
Males Receiving Bonus Payments	6.30%	5.90%	4.57%
Females Receiving Bonus Payments	0.50%	0.50%	0.44%



7. Our Trust Workforce Data

Our aim is to ensure our staff create a positive working environment and promote a culture of trust where our people work together, and feel motivated and confident to challenge and be innovative. A key objective is to recruit and retain a workforce which is representative of the communities we serve, and to provide an environment that values the differences people bring with them, where they feel safe and supported throughout their career.

As at 31 March 2022, the Trust employed 6,806 (headcount) members of staff.

The profile of our staff, across the protected characteristics, is shown in the charts below, noting that we have no data on Gender Reassignment.

Our data is double that of our local area, the BAME population within Worcestershire is 7.6%, according to the 2011 Census data from National Online Manpower Information System (NOMIS) provided through the Office for National Statistics (2021 Census data is being released over a 2-year staggered period).

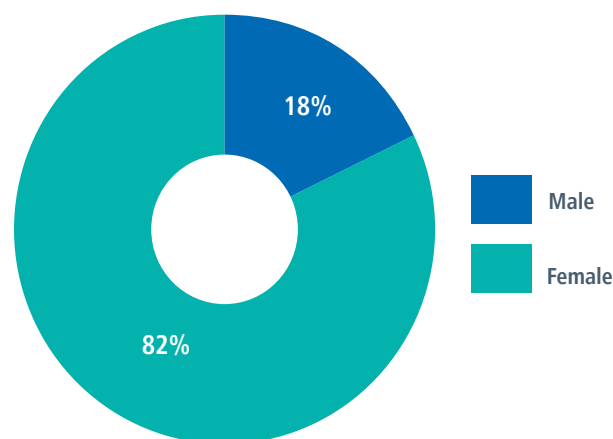
The workforce data below and the data from our Staff Survey, WRES and WDES reports supports conversations within, amongst others,

the Equality and Diversity (IDEA) Committee and People and Culture Committee, and help us to further investigate and address any areas of concern as well as celebrate areas of success for inclusion and diversity.

Our Trust staff have the right to leave equality and diversity data categories unspecified if they wish to.

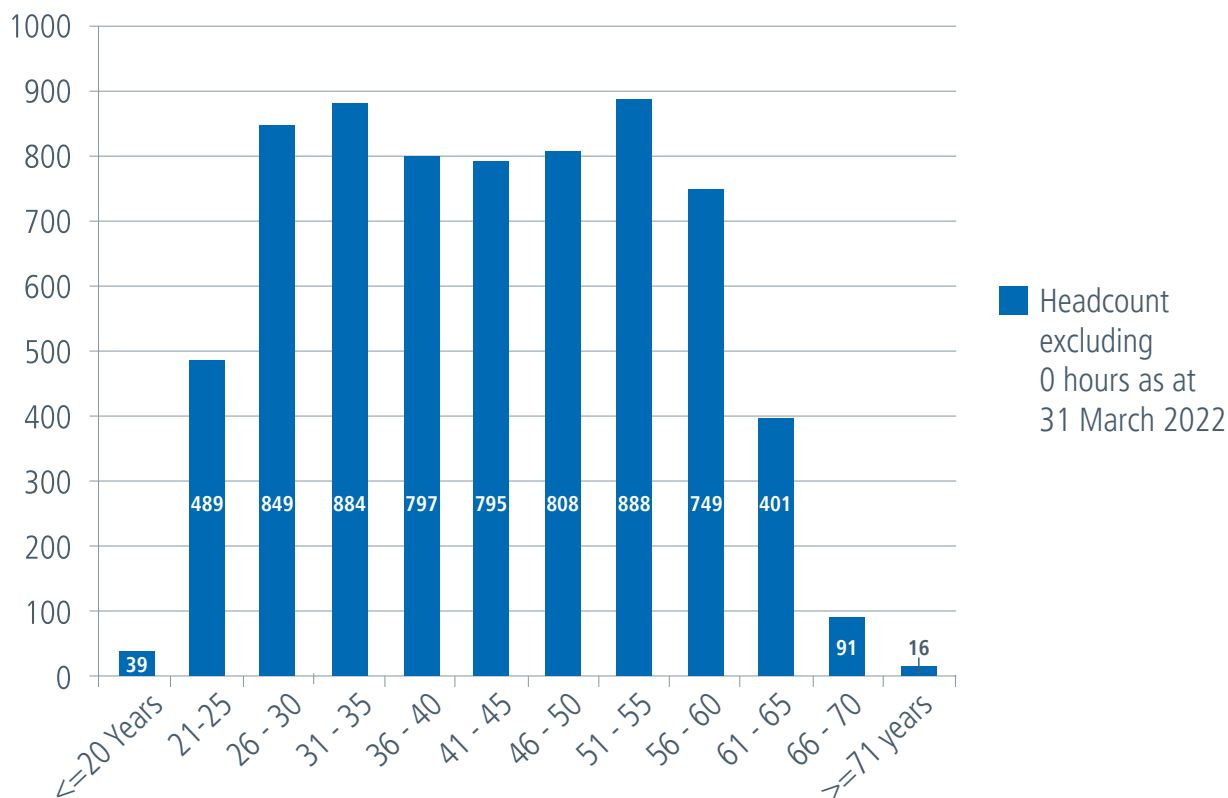
Gender Profile

Our gender profile shows that our workforce is predominantly female.



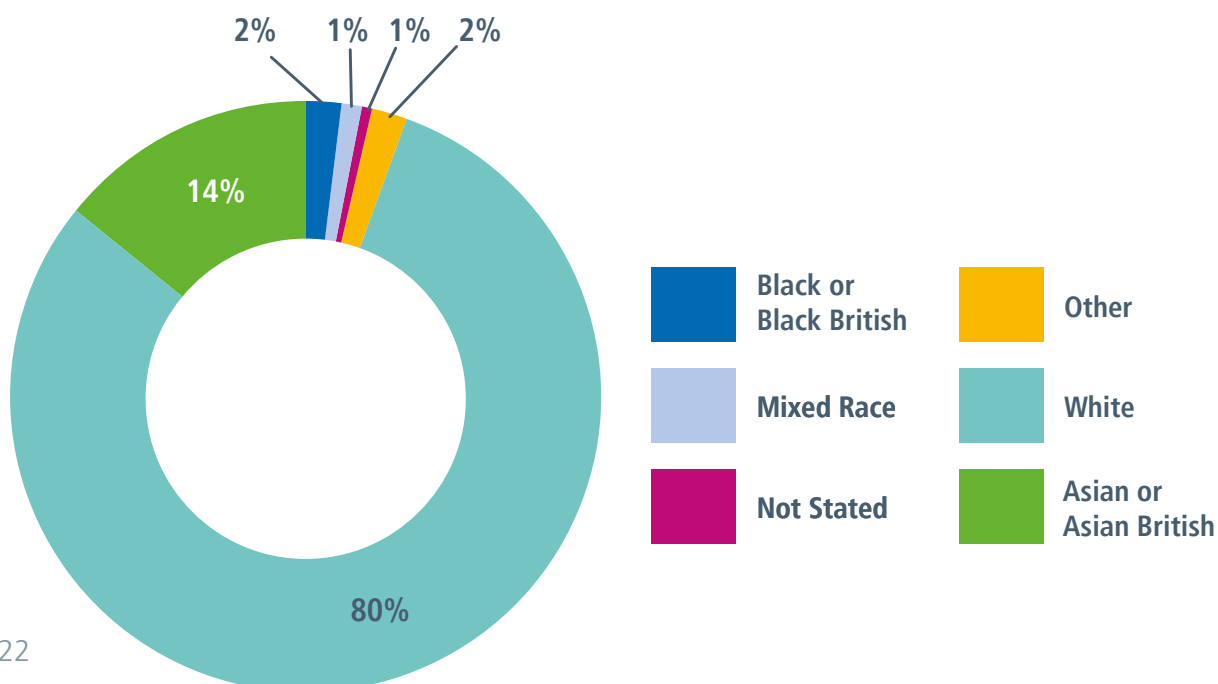
Age Profile

Our age profile shows that are staff range in age from late teens to over 71 years of age.



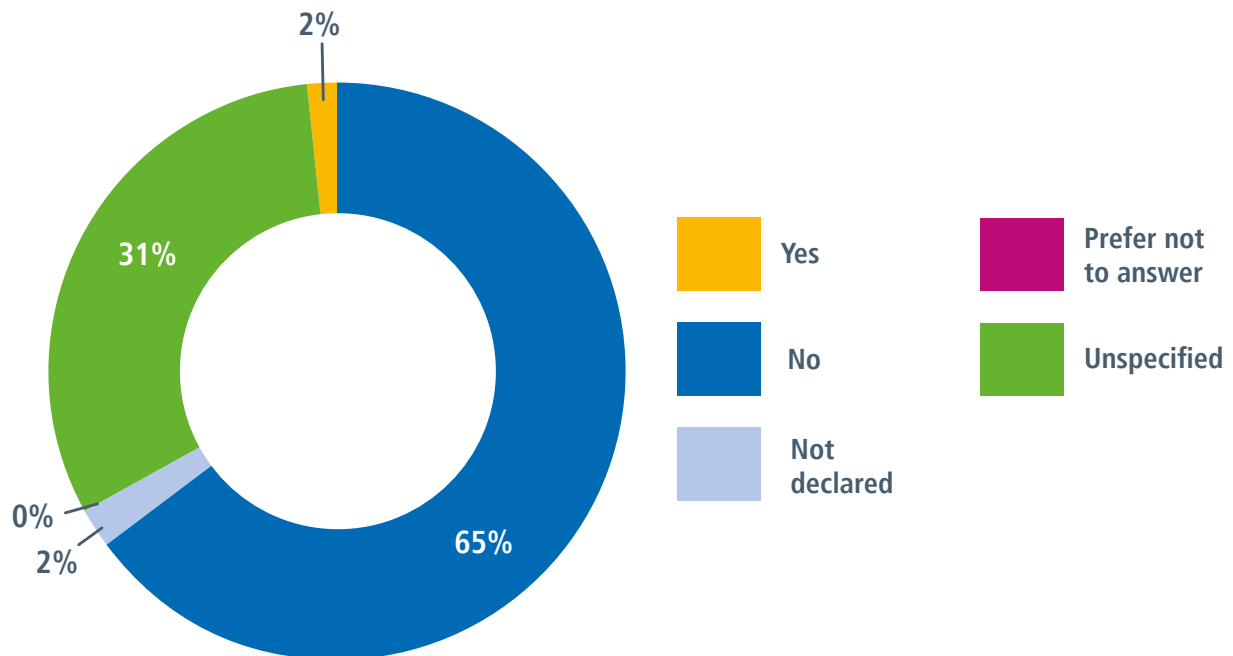
Ethnicity Profile

White British staff make up the highest percentage of our workforce.

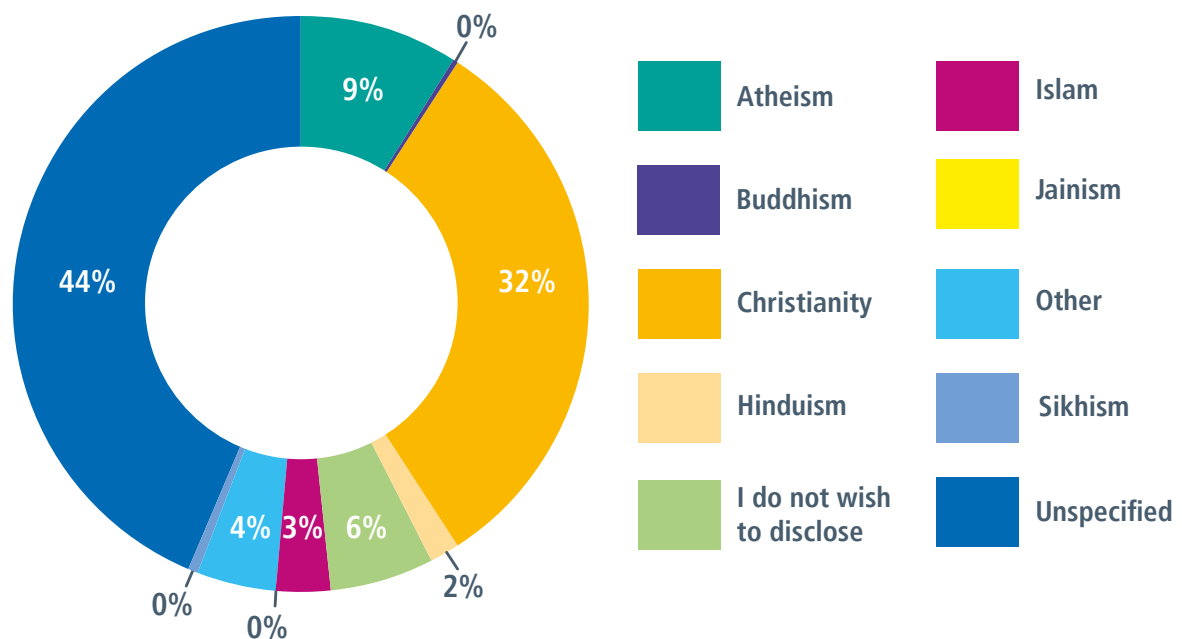


Disability Profile

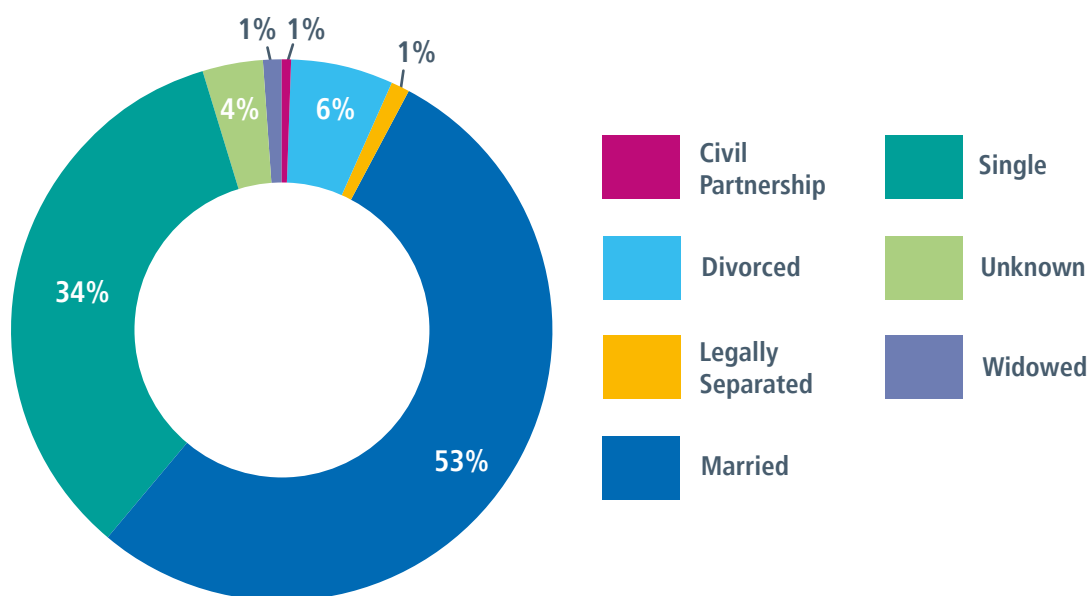
Whilst the majority of our staff have informed us that they do not have a disability, a large percent (31%) have decided not to specify.



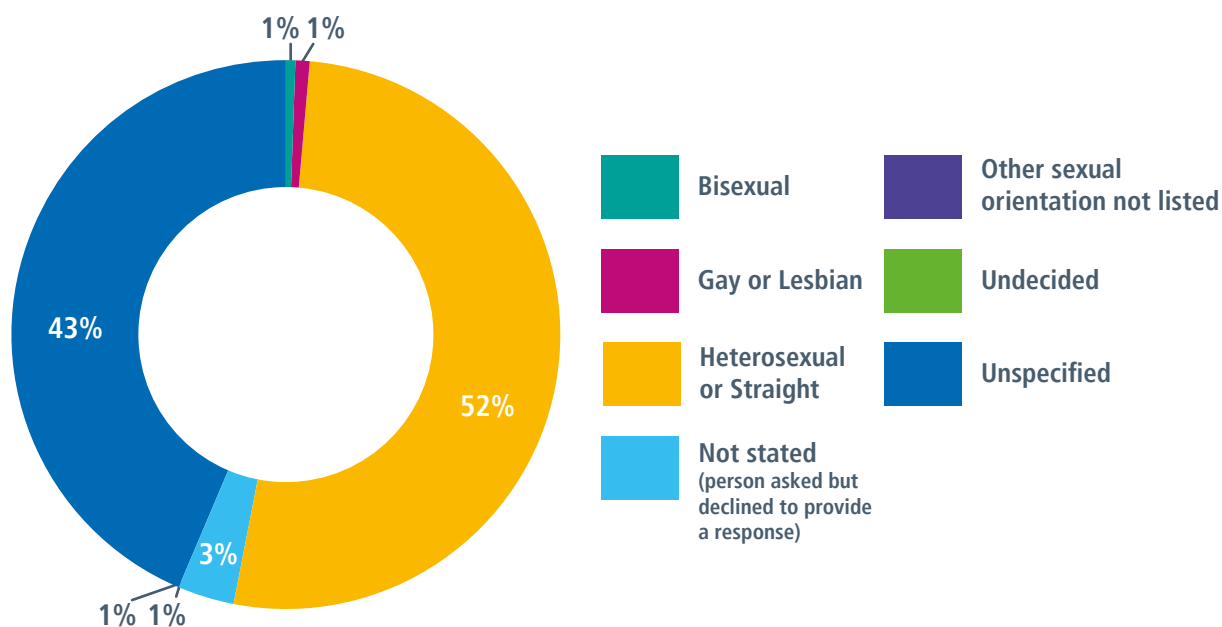
Religious Beliefs Profile



Marital Status



Sexual Orientation Profile



Starters and Leavers Data

Starters

Gender	Women 954 (77%)			Male 287 (23%)		
Age	30 and under 525 (43%)		31-50 543 (44%)		51 and over 164 (13%)	
Disability	No 712 (58%)		Yes 21 (2%)		Unspecified 487 (40%)	Not declared 12 (0%)
Ethnicity	White 817 (66%)	Asian/Asian British 288 (23%)	Black/Black British 59 (3%)	Other 32 (3%)	Mixed 31 (3%)	Unspecified 5 (0%)
Religion/ Belief	Christianity 538 (44%)		Other religions 392 (32%)		Atheism 257 (21%)	Unspecified 45 (4%)
Sexual Orientation	Heterosexual 1093 (89%)		LGBTQ+ 98 (8%)		Unspecified 41 (3%)	

Leavers

Gender	Women 937 (78%)			Male 265 (22%)		
Age	30 and under 419 (35%)		31-50 473 (39%)		51 and over 310 (26%)	
Disability	No 856 (71%)		Yes 16 (1%)		Unspecified 309 (26%)	Not declared 21 (2%)
Ethnicity	White 934 (78%)	Asian/Asian British 158 (13%)	Black/Black British 52 (4%)	Other 30 (3%)	Mixed 23 (2%)	Unspecified 5 (0%)
Religion/ Belief	Christianity 383 (32%)		Other religions 227 (23%)		Atheism 157 (13%)	Unspecified 384 (32%)
Sexual Orientation	Heterosexual 744 (62%)		LGBTQ+ 26 (2%)		Unspecified 432 (36%)	

Recruitment Data

	Number of Applications	As % of Total Applications	Number Shortlisted	As % of Total Shortlisted	Number Appointed	As % of Total Appointed
Ethnicity (White)	7748	40.25	4627	64.76	1363	74.52
Ethnicity (All Other)	11227	58.32	2435	34.08	449	24.55
Ethnicity (Undisclosed)	276	1.43	83	1.16	17	0.93
Total Ethnicity	19251		7145		1829	
Gender (Female)	12899	67.00	5413	75.76	1487	81.30
Gender Male)	6308	32.77	1716	24.02	340	18.59
Gender (Undisclosed)	44	0.23	16	0.22	2	0.11
Total Gender	19251		7145		1829	
Age profile (Under 30)	6690	34.75	2142	29.98	617	33.73
Age profile (30 - 49)	10315	53.58	3739	52.33	918	50.19
Age profile (51 and over)	2176	11.30	1230	17.21	278	15.20
Age Profile (Undisclosed)	70	0.36	34	0.48	16	0.87
Total Age Profile	19251		7145		1829	
Disability (Yes)	18510	96.15	6736	94.28	1726	94.37
Disability (no)	222	1.15	109	1.53	23	1.26
Disability (Undisclosed)	519	2.70	300	4.20	80	4.37
Total Disability	19251		7145		1829	
Sexual Orientation (Heterosexual)	17738	92.14	6564	91.87	1701	93.00
Sexual Orientation (LGBTQ+)	903	4.69	393	5.50	82	4.48
Sexual Orientation (Undisclosed)	610	3.17	188	2.63	46	2.52

	Number of Applications	As % of Total Applications	Number Shortlisted	As % of Total Shortlisted	Number Appointed	As % of Total Appointed
Total Sexual Orientation	19251		7145		1829	
Religion (Christianity)	9910	51.48	3426	47.95	868	47.46
Religion (All Other)	5889	30.59	1852	25.92	364	19.90
Religion (Atheism)	2043	10.61	1222	17.10	408	22.31
Religion (Undisclosed)	1409	7.32	645	9.03	189	10.33
Total Religion	19251		7145		1829	

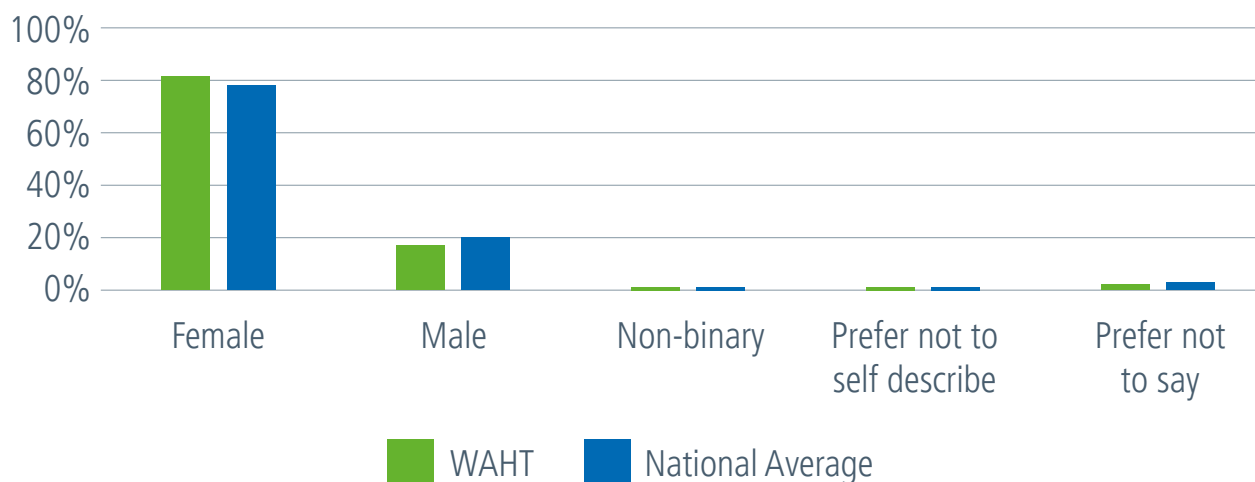
Employee Relations Data

Topic	Total number of cases	Ethnicity: White (all)	Ethnicity: Non-white	Ethnicity: Not stated	Age: Under 30	Age: 31-50	Age: 50+	Age: Not stated	Gender: Female	Gender: Male	Gender: Not stated
Disciplinary	30	24	6	0	7	7	16	0	22	8	0
Grievance	21	14	3	4	2	4	12	3	11	7	3
Dignity at work (incl. harassment)	24	22	2	0	1	13	10	0	21	3	0
Capability (Medics)	4	1	3	0	0	1	3	0	1	3	0

Our most recent Staff Survey

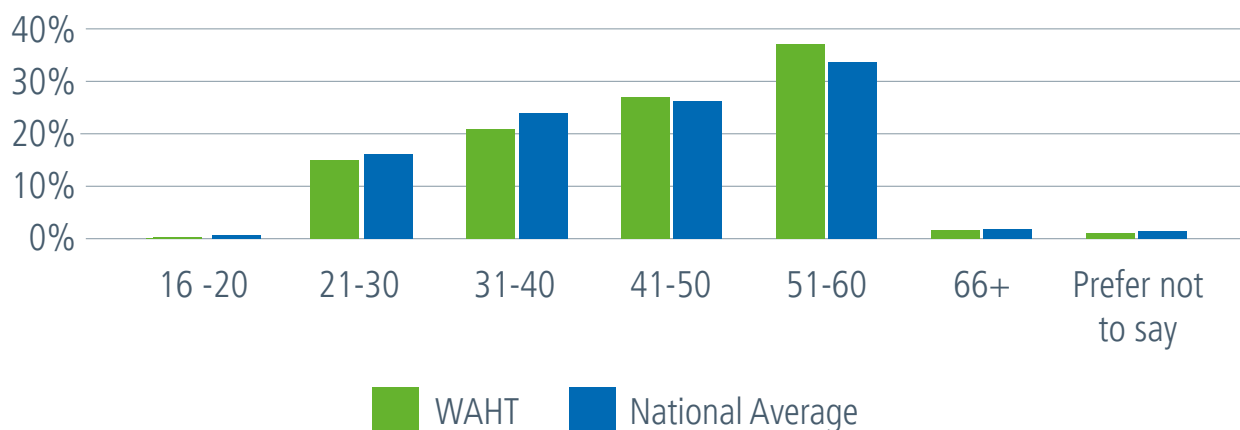
Demographic Data (Average Question Response 2845 staff)

Staff Demographic by Gender



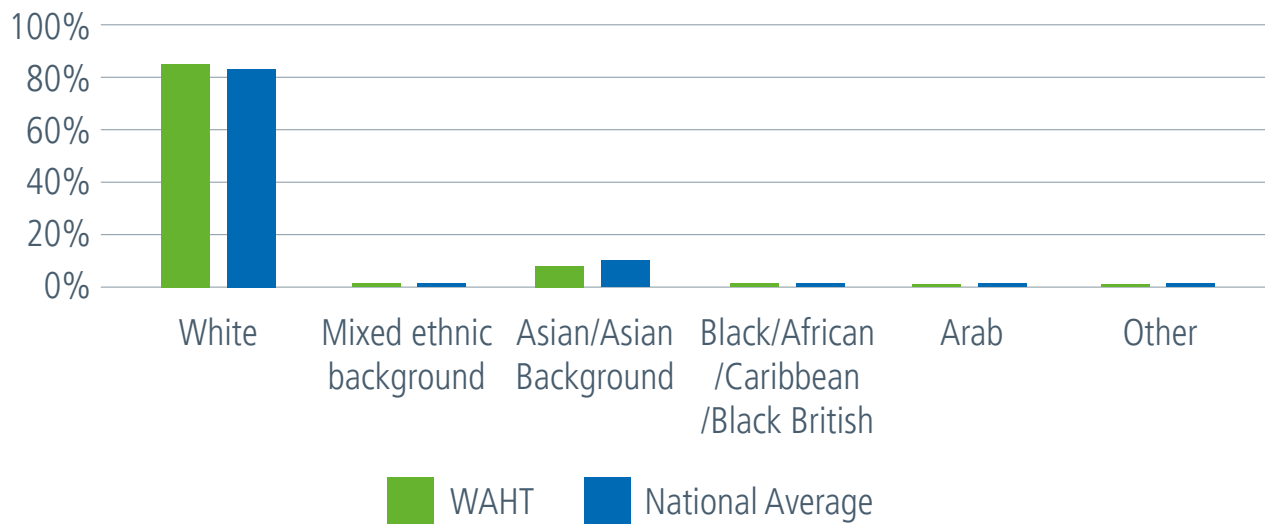
WAHT	81.20%	16.80%	0.10%	0.10%	1.80%
Average	77.80%	19.60%	0.10%	0.20%	2.30%

Staff Demographic by Age



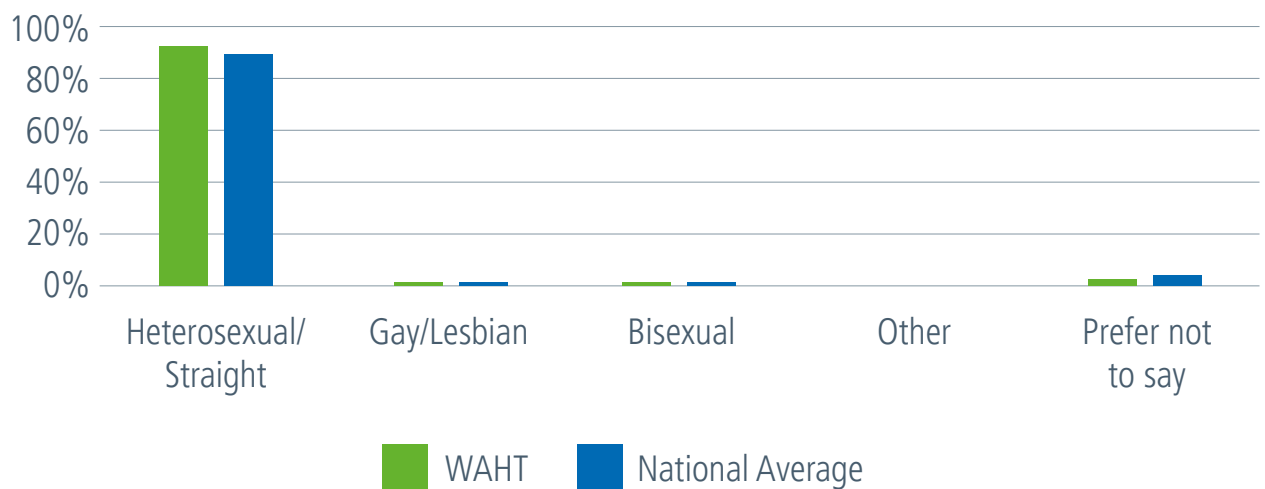
WAHT	0.20%	15.10%	20.40%	26.20%	36.60%	1.40%
Average	0.40%	15.80%	23.30%	25.60%	32.80%	1.50%

Staff Demographic by Ethnicity



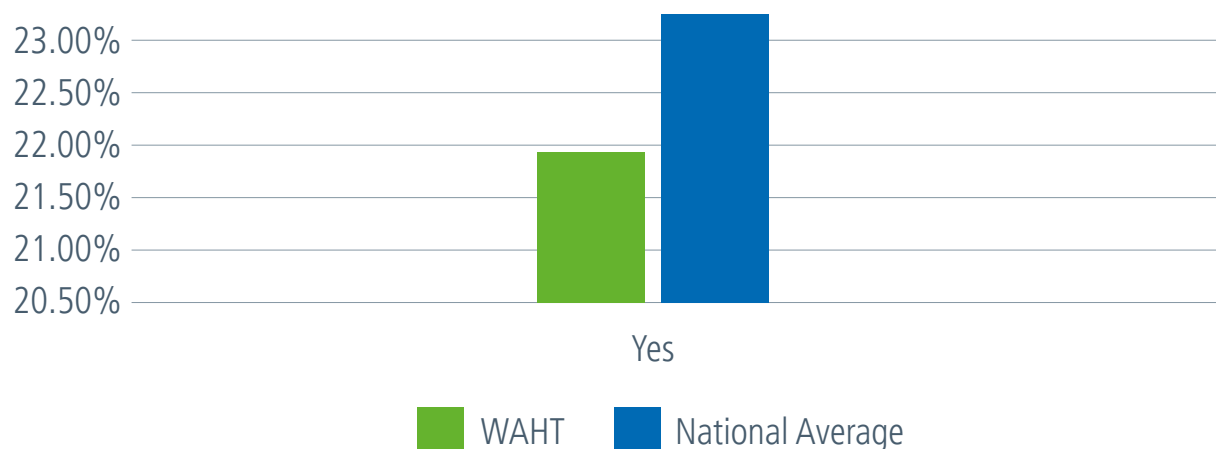
WAHT	87.00%	1.30%	9.10%	1.60%	0.40%	0.60%
Average	84.70%	1.80%	10.30%	2.40%	0.40%	0.70%

Staff Demographic by Sexual Orientation



WAHT	92.50%	1.50%	1.40%	0.30%	4.20%
Average	90.90%	2.00%	1.40%	0.50%	5.10%

Staff Demographic by Disability or LTC



WAHT	21.90%	Average	23.90%
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Data from our Annual Staff Survey helps us understand the experience our staff have in working here. Below are 3 key areas of focus for us as a Trust.

Discrimination: "in the last 12 months, have you personally experienced bullying, harassment or abuse at work"?				
	By patients, service users or relatives	National Average	By Staff	National Average
Total Staff Responses	3429 (50.38%)		3440 (50.54%)	
BAME (WAHT)	30.10%	28.80%	29.30%	28.50%
White (WAHT)	28.30%	26.50%	26.60%	23.60%
Staff with LTC (WAHT)	36.30%	32.40%	30.30%	26.60%

Discrimination: "in the last 12 months have you personally experienced discrimination at work?"		
	By Manager / Team Leader	National Average
Total Staff Responses	3424 (50.30%)	
BAME (WAHT)	17.70%	17.30%
White (WAHT)	6.30%	6.70%
Staff with LTC (WAHT)	16.00%	18.00%

Discrimination: "in the last 12 months, do you believe that the organisation provides equal opportunities for career progression and promotion?"		
	Yes	National Average
Total Staff Responses	3435 (50.47%)	
BAME (WAHT)	41.60%	44.60%
White (WAHT)	57.20%	58.60%
Staff with LTC (WAHT)	51.80%	51.40%

8. Priorities

Trust Board and the Staff Inclusion Networks have been central to setting our ambition to improve workforce diversity and inclusion.

Our WRES, WDES and staff survey data has shown that staff with protected characteristics are still at a disadvantage whilst working for and or applying for roles within the organisation.

We took the negative data from our WRES, WDES, Rainbow Badge and Staff Survey data and collated it into 7 Priority areas and from this we produced a 7 Priority plan to drive forward this agenda at both an overall organisational level and within the divisions.

The priority areas are:



The 7 Priority plans set out the organisational priority actions and outcomes, these have been further developed into Divisional priority actions and outcomes.

To ensure we are making progress against our outcomes each Division will be provided with a dashboard which links into the organisational dashboard. The organisational and Divisional dashboards are monitored on a quarterly basis through the IDEA Committee.

Currently the KPIs have been set to align to the model employer expectations and the targets within the WRES, WDES, Rainbow Badge feedback and Staff Survey reports to bring us in line with the best performing Trusts nationally.

During the last 12 months we have continued to work closely with, and to engage our Divisional management teams to agree their priorities and to develop a programme of work for 2023/24 to achieve their outcomes.

To enable the organisation to achieve the outcomes, work has commenced in 4 of our 6 Divisions with the appointment of members of the Divisional management boards as Senior EDI Reporting officers (SROs) who will work with the HR Team to generate “As a Division We Will” statements and lead the work at a local level. The SRO from each Division attends the Trust IDEA committee and acts as a conduit for Equality Diversity and Inclusion. This will ensure that the Divisions are aware of the current projects and priorities of the Staff Inclusion Networks and the wider IDEA committee. The SRO provides a monthly update the committee with the programme of work taking place within the Division in regard to the plans and provide a quarterly update on progress against their Divisional dashboard.

Increase staff engagement score from 6.7 to 7.4 by Staff Survey 2023.

Increase the staff survey score - My organisation acts on concerns raised by patients/service users from 68.7% to 71.0% in line with the staff survey national average by Staff Survey 2025.

Increase the % of staff responding positively to the staff survey question - I feel safe to speak up about anything that concerns me in this organisation from 45.5% to 47.9% national average by 2025.

Building confidence to speak up

99% of B8a interviews will use specific questions related to race, equality and inclusion by 2023.

99% of B8a and above recruitment to have interview guarantee by April 23.

Improve the score for staff survey question - My organisation acts fairly with regard to career progression/promotion, regardless of ethnic background, gender, religion, sexual orientation, disability or age from 55% of staff to 65% staff by 2025.

Recruitment and Talent Development

90% of managers and Leaders Trained in providing Health and Wellbeing conversations by 2025.

We will improve the staff survey score for BAME, Disabled and LGBT colleagues saying the "Trust takes positive action on health and well-being" (from 52.1% today to 56.4% by 2025).

Staff Health and Wellbeing

Increase the Organisational Staff Survey score for Compassionate Leadership from 6.6 to 7.5 in line with the best organisations by April 2025.

Work to increase the Staff Survey score for My immediate manager is interested in listening to me when I describe challenges I face from 65.2% to 68% by Staff Survey 2023

Increase our score for the Staff Survey question I think that my organisation respects individual differences (e.g. cultures, working styles, backgrounds, ideas, etc.) from 65.1% to 68.8% by Staff Survey 2023

Leadership with compassion and inclusivity

Reduce likelihood of BAME staff entering the formal disciplinary process from 0.49 to 0.18 in line with white staff by WRES Report 2023

Work to eliminate the gap in relative likelihood of staff with a protected characteristic being recruited or entering a disciplinary process by utilising the Recruitment Champion programme and staff network representatives at short listing stage or during the ER process.

Tackling the ethnicity gap in Employee Relations cases

90% of Managers and Leaders will have completed the Enabling a Productive and Inclusive Culture (EPIC) Training package by 2025.

90% of managers to have completed the Unconscious Bias training package by 2025.

Increase the relative likelihood of BAME, LGBTQ+ and Disabled staff accessing non mandatory training and CPD from 95% to 98% by 2023 in line with white staff.

Information and Education

Ensure that Staff Networks are formally constituted as part of the governance structure and be financially supported with executive sponsorship.

Increase the declaration rate for staff with a Disability or LTC from 1.19% to 9.1% in line with staff answering the WDES staff survey questions by 2025..

Strengthening Staff Networks

Achievements so far and work areas for 2023/24

Priority 1

Building confidence to speak up

What have we acted on:

- We have launched the organisational Behavioural charter to provide staff, patients and visitors to our organisation a framework of acceptable behaviour and.
- Improved our mechanisms for reporting unacceptable incidents.
- Produced an Organisational Zero tolerance statement.

In 2023/24 we will:

- Work towards reducing the number of incidents of Discrimination, violence and aggression towards staff through the implementation of our Behavioural Charter and Zero Tolerance statements.
- Increase the confidence with staff to report incidents of Discrimination, violence and aggression by fully investigation all reported incidents, taking appropriate action when required and feeding back the outcome of the investigations to staff.

This will help us increase the percentage of staff feeling confident that the organisation acts on concerns raised, increase the number of staff saying that they feel safe to speak up and raise concerns and reduce the number of staff experiencing bullying, harassment, violence, aggression and discrimination at work.

Priority 2

Recruitment and talent development

What we have acted on:

- We have introduced a new inclusive recruitment approach for senior roles within the organisation.
- We have developed and commenced delivery of Recruitment Champion Training sessions as part of the inclusive recruitment approach.
- We have acquired a number of places for staff to attend the RCN cultural ambassador training programme through our system partners.

In 2023/24 we will:

- Continue to embed the inclusive recruitment programme for senior roles and expand to all leadership roles within the organisation by 2025.
- Increase our staff representation in leadership roles in line with the model employer guidance by 2025.

This programme of work will assist us in increasing the likelihood of BAME staff being appointed from shortlisting and increase our representation in leadership roles as part of our WRES responsibilities.

Priority 3

Staff health and wellbeing

What we have acted on:

- Embedded Wellbeing Conversations and the new Wellbeing Conversation Facilitator role

- ▶ Introduced a Financial Wellbeing Hub to support staff with cost of living crisis
- ▶ Introduced a Meal Vouchers initiative to support staff
- ▶ Re-established fast track Musculoskeletal Physio service for staff
- ▶ Staff access to Mental Health and Wellbeing Hub
- ▶ Staff access to Clinical Psychologists (Staff Wellbeing) and Mental Health First Aiders
- ▶ Introduced Menopause Toolkit and support package for staff
- ▶ Introduced Working Carers support package for staff
- ▶ Staff access to Happy Café's and monthly Wellbeing Webinars showcasing a variety of topics

In 2023/24 we will:

- ▶ Delivering a Wellbeing Matters Day for 100 staff in March 2023
- ▶ Providing dedicated wellbeing spaces for staff on all Trust sites
- ▶ Access to basic necessities (hydration & nutrition) for staff
- ▶ Providing preventative and timely Psychological support for staff
- ▶ Providing virtual MSK support for staff
- ▶ Providing healthy food initiatives
- ▶ Providing appropriate changing facilities for staff on all Trust sites
- ▶ Embedding healthy leadership behaviours into all Leadership Job Descriptions

This will increase the organisations overall staff survey score for staff agreeing that their manager takes a positive interest in my health and well-being and BAME and LGBTQ+ members of staff feeling that the Trust takes positive action on health and wellbeing in line with the best performing trusts.

Priority 4 Leadership with compassion and inclusivity

What have we acted on:

- ▶ We have sourced, trained members of staff to deliver and launched the Franklin Covey Leadership programme including 7 Habits and 4 Essential roles and Unconscious Bias. This training will be offered to all managers and leaders.
- ▶ We have upskilled staff to deliver the Enabling a productive and inclusive culture (EPIC) training package.
- ▶ We have developed an Equality Impact training package for all staff who develop policy, strategy and business and service plans.

In 2023/24 we will:

- ▶ Continue to fund and deliver more licences for the Franklin Covey Leadership programmes.
- ▶ Increase the delivery of the EPIC programme.
- ▶ Increase delivery of the EIA training sessions.

This will lead to an increase our overall staff survey score for compassionate leadership in line with the best performing trusts nationally. The work will also increase in the organisational score for the Staff Survey question I think that

my organisation respects individual differences (e.g. cultures, working styles, backgrounds, ideas, etc.) in line with the national average.

Priority 5

Tackling the ethnicity gap in employee relations

What have we acted on:

- Identified the number of BAME, Disabled and LGBTQ+ staff applying, being shortlisted and being offered senior roles within the organisation.
- We have started work with our divisions to identify staff with a protected characteristic entering the formal disciplinary process.
- Started a programme of work to take effective action against managers and leaders who make decisions that have subsequently been deemed bias or discriminatory.

In 2023/24 we will:

- Continue to work to gain a truer understanding of our staff profile within the Organisation and understand the concerns linked to declaration rates for BAME, LGBTQ+ and Disabled colleagues.
- Continue our work to eliminate the gap in relative likelihood of staff with a protected characteristic being recruited or entering a disciplinary process by developing and implementing a positive action process where appropriate.

This will help us reduce the relative likelihood of a member of staff with a protected characteristic entering a formal disciplinary process and work towards reducing the relative likelihood of this

within our WRES and WDES reports.

Priority 6

Strengthening staff networks

What have we acted on:

- We have supported the LGBTQ+ Staff Network in completing the first phase of their work towards the Rainbow badge accreditation.
- Agreed protected time for Staff Network Chairs to carry out Network business.
- Successful bid to improve the recruitment offering for applicants with a disability through the Workforce Disability Innovation Fund.

In 2023/24 we will:

- Continue to support our Networks to provide a safe space for any member of staff.
- Ensure that all of our staff who wish to play an active role in Staff Inclusion Networks are given the appropriate time and support at a local level.
- We will continue to support and champion all action plans that are generated by Network activity.
- Engage with our staff networks to support the Organisation to make the right decisions first time.

By formally constituting our staff inclusion networks as part of our governance structure we will send a positive message to staff that we are an inclusive organisation who respect diversity and equality for all. This will enable us to build up the confidence with staff to declare a

protected characteristic.

Priority 7

Information and education

What have we acted on:

- ▶ Through our 7 Priority Plans we have maintained compliance with national EDI mandatory training.
- ▶ We have introduced a number of new training programmes to raise awareness of Equality, Diversity and Inclusion within our leadership structures.
- ▶ Taken positive action to promote national and regional training opportunities to staff with a protected characteristic.

In 2023/24 we will:

- ▶ Ensure that all managers and leaders have the skills required to lead with compassion and create an inclusive culture within their areas of responsibility.
- ▶ Continue to Promote opportunities for staff with a protected characteristic to access non-mandatory CPD and education.

This will lead to an increase in staff with a protected characteristic accessing non-mandatory training and CPD and increase our overall staff survey score for compassionate leadership in line with the best performing trusts nationally. The work will also increase in the organisational score for the Staff Survey question I think that my organisation respects individual differences (e.g. cultures, working styles, backgrounds, ideas, etc.) in line with the national average.

9. Freedom to Speak up and 4Ward Behaviours



By Melanie Stinton – Freedom to Speak Up Guardian and Lead 4Ward Advocate

Following the failings at Mid-Staffordshire NHS Hospital Trust, the subsequent inquiry led by Sir Robert Francis

determined that each and every Trust in England should have a Freedom to Speak Up Guardian who staff could speak to in confidence and without risk of detriment. This Guardian would not be a part of the formal organisation of each Trust but should be part of the National Freedom to speak up network.

I was appointed as the Trust's Freedom to Speak Up (FTSU) Guardian in 2020. I have worked in the Trust for over 24 years - most recently in a clinical capacity as Matron in Maternity, I am now full-time in my FTSU role and this now incorporates Lead 4ward advocate, staff experience and Civility and respect Lead. I am also Mental First Health trained, professional workplace mediator, a professional midwifery advocate and currently completing my apprenticeship in workplace coaching.

My role is supported by FTSU champions spread across our three sites, and all divisions, and together we promote the Freedom to Speak Up programme and listen attentively to any member of staff who has any concern about any form of inappropriate behaviour within our Trust. This is soon to be incorporated into the 4ward advocate role so that we have a wider group of staff that have a knowledge of FTSU.

The key benefits for staff are principally two-fold. The first is the therapeutic support of the Guardian or Champion who, as an independent person, is pro-actively listening and supporting the staff member's concern. Staff can often find it difficult to raise a concern and to have someone who can share and understanding it is a major help.

The second benefit is that the Guardian will agree with the member of staff a process to support resolution of their concern. This may entail obtaining support and assistance from relevant senior managers. The obvious result here is to seek to resolve the issue and enable the staff member to return to a more stable and enjoyable work environment.

We have had over 350 cases raised in the last three years and we endeavour to continually update each member of staff raising the concern on the progress and the resolution of their concern. Some cases can be resolved quite quickly; others - particularly if there is a link into an existing investigation - can take more time.

We launched our Freedom to Speak up portal in October 2020 that has given staff greater accessibility and ease to report concerns and have recently added this to the staffing app and produced a QR code. This has seen an increase in reporting and enables staff to confidentially raise their concerns and track the progress of them via a unique code. We have also recently added protected characteristics to the portal at the request of the staff networks which enables us a deeper dive and gives greater intelligence. We are now in the process of adding a feedback form to the portal so that we can capture any improvements that we can make to give us

assurance that the FTSU process is robust and the staff feel safe raising concerns. This will hopefully build upon our fantastic achievement of becoming the third most improved Trust at speaking up in the country as reported in the Freedom to Speak up Index report by the National Guardians Office in 2020 and short-listed for HSJ FTSU organisation of the year in 2021.

4Ward

Putting Patients First



Our 4ward behaviours are a proven, evidence-based methods to help us all behave at work in ways which will support more effective team working, build a shared sense of purpose and empowerment and promote a more positive working environment – for the benefit of colleagues, our patients and the community that we serve. The programme is supported by an increasing number of 4ward advocates – colleagues from across the Trust who have already made a commitment to positively demonstrate our 4ward behaviours in their day to day work. But we want every member of staff to become an advocate and champion 4ward in our hospitals.

The re-launch of the 4ward advocate training early next year will incorporate education on all the staff networks, this will enable the promotion and signposting to these to promote the inclusion and equality agenda. It will insure that the 4ward behaviours are the golden thread running through everything we do and underpinned with civility and respect promote a positive culture.

10. Patient Experience

Putting Patients First

Some people do not have the same access to services and outcomes and we aim to ensure that everyone who needs to use our services is able to, in a dignified and supported way that is based on individual need. Good access to healthcare provision can improve quality of life and it is important to us that we provide accessible services for all members of our local community regardless of age, disability, race, religion or belief or sexual orientation for example.

We have continued to build on our ability to provide equality of opportunity across our local community for everyone to access and use our services. Our focus has been to achieve this by focusing on person-centred care in collaboration together with our patients and carers, to inform services which meet local need and provide good experiences of care.

In this year's annual report, we begin with an overview of the year, sharing some of the ways that we have worked on co-produced projects with our community to supporting lasting and positive change. This approach is underpinning the way we work across our hospitals.

An overview of our year, engaging with our communities with a focus on equality and diversity:

Learning Disability: we raised awareness in June 2022 as part of Learning Disability Week, of our partnership with Learning Disability Liaison Nurses. We have also revised our staff training beginning with our induction process.

We have a hospital passport to support communication and preferences for our patients and to support our staff to deliver individualised care.

Learning Disability: We have started to engage at a local PLACE level as a member of the Learning Disability Partnership Board, we engaged with a countywide strategy survey to support Worcestershire's New Learning Disability Strategy which will help to set out what people with learning Disabilities and their families in Worcestershire want and need to support them in their everyday lives.

We have designed new posters with our community partners through our Learning Disability Steering group, to support patients and carers in our hospitals.

Partnership: Staff from across Divisions and Departments, Patient and Public Forum members and community representatives came together to x6 Patient, Carer and Public Engagement steering group meetings from August 2021-2022 to focus on what feedback is telling us, how we are sharing good practise and to discuss areas of development.

AccessAble partnership: more than 4000 users used our accessible guides in the first 4 months following our launch of these guides; detailed improvement guides have been shared with our Estates teams to inform future building works.

“The steering group is useful and interesting; it’s somewhere we create real space to discuss but importantly it’s also about action”.

Lili staff member

Voice: The Patient and Public Forum (PPF) also met together and with our staff at x9 meetings from August 2021-2022. Agendas are co-produced with the Trust and provide opportunities for ongoing conversation about a range of topics including a focus on equality, inclusion and accessibility. We held an Away Day and delivered new 4ward Single Improvement methodology training to members.

“It has been great being back together again and the sessions were very good. It can be a lot of information from a lot of different people on a lot of different subjects but it is very helpful and informative.”

PPF member

Engagement: The PPF have engaged with lots of different projects and some members joined staff to visit the new Emergency Department at Worcestershire Royal Hospital. Members are invited to our new Emergency Department planning meetings and have assessed the new environment for patients and carers. One member fed back that improvements the group had advised on years ago had been put in place for the new build. Engagement is ongoing.



Informing Our Priorities: we widened our reach, inviting engagement from across the community with our annual survey called The Big Quality Conversation. The results inform our Quality Priorities. We created films in multiple languages and members of the d/Deaf community created videos in British Sign Language supported by Action Deafness who also held a local coffee morning to support community engagement

Driving improvement together: we have worked alongside stakeholders to secure a contract with Word360 to deliver sign language at our Trust. We have also developed an ongoing programme of engagement to support and work with our local d/Deaf community with the aim of improving access to healthcare and a positive patient and carer experience.

Word360 work with CommPlus to provide British Sign Language interpreters locally who can support with a range of non-spoken solutions.

We continue to work in partnership with AA Global Language Services Ltd to provide interpreting, translation and specialist language support for our patients and carers. We developed video relay to support alternative access for language support for our patients and provided webinar training session opportunities for staff.



WORD360

Cancer Care: we have facilitated support groups for patients and we have attended and supported Colorectal cancer group for both older and younger adult groups. These groups provide important peer support which can provide patients with valuable space to share personal experiences, reduce feelings of isolation, depression and anxiety.

Cancer Care: we are currently running the 4th HOPE Course since restarting post the Covid19 pandemic. The course is for cancer patients and is run by Macmillan. The course provides a safe space for patients and covers any areas participants would like to explore including inequality, discrimination and hidden disabilities in the workplace.

My story in my words

We provide opportunities for patients and carers to share their experiences and stories in their own way. We have continued to share of these stories at our Trust Board monthly meetings which are streamed live on the internet and which are available to watch as recordings via

our website to provide space for reflection, discussion, shared learning and understanding – it is also an opportunity to showcase and champion innovation and good practise. We have included two different stories below that we took to the Trust Board during 2022.

Spiritual and Pastoral Approaches and Support

Pastoral and spiritual care is an important part of an authentic, holistic health care service.

The Chaplaincy team provides religious services and bedside prayer when requested and they also provide spiritual, pastoral and bereavement support for all patients, relatives, carers and staff irrespective of religion, belief or faith background. The team has strong links across departments including the Dementia and Stroke Teams. In April 2022 members of the Chaplaincy team shared at the Trust Board meeting, how they have worked with a staff member to support innovation and widen access for comfort and reassurance for patients by fundraising and distributing 250 Quran Cubes. Quran Cubes are small, portable devices that play recitations and prayers from the Quran, which enables patients on wards to listen personally to the sacred Scripture of Islam.

Quran Cubes have been introduced and distributed across all wards in our hospitals and are providing welcomed emotional support, comfort and spiritual healing for our Muslim patients. Having prayers and Quran recitation played next to inpatient beds, particularly for those patients who are at the end of their life, during the pandemic and who are perhaps too weak to pray for themselves, can make a significant difference for both the patients and their families.



The Chaplaincy team are exploring how to share enthusiasm for innovation by inviting staffing teams to work with them to bring in new initiatives which support a variety of cultures in a sustainable way – inviting patients, carers, families and staff as equal partners in care and improvement.

Care delivered by the Chaplaincy team extends beyond our hospital walls and the Chaplaincy team have an ambition to increase their volunteers over the next 12 months, which will be supported by a Trust volunteering staff team.

Living with and Beyond Cancer

To mark Stand Up to Cancer Day, we created a short film to share experiences of some of our patients and their cancer journeys, to take to our September Board meeting. The story below has been shared by one of our patients who appeared in this film called Jo.

Jo has given us permission to share her story in this report.

I was diagnosed with breast cancer in November 2020. I am married with a grown up daughter and I'm a schoolteacher. My treatment has included chemotherapy, followed by radical mastectomy and radiotherapy. Treatment finished for me in February 2022 following a third round of 'mop up' chemo which lasted 8 months and was tablet based.

Before my cancer diagnosis I lived life at 100 miles per hour but post treatment I knew I needed support to get back to living my life. I was very fatigued, I had low self-esteem and I had body image worries as a result of my mastectomy. I also struggled with the demands of being a teacher and with this I had the added stress of Covid lockdown. I trusted my medical team and believed, in fact I told the nurses at the chemo unit, that they 'would' cure me or I would just keep on going until they did. There was no other outcome that I would accept!

My breast care nurse had referred me to the Trust's Macmillan Psychology team and they suggested I attend the HOPE course. The HOPE course has been run by the Trust's Cancer Services for 5 years for patients living with and beyond cancer and it's a 6 week course where the facilitators and the participants discuss issues such as fatigue, stress, body image, concerns for the future and resilience. As a group the participants share experiences of their individual cancer journeys and help each other overcome problems collectively.

As a result of attending HOPE I felt that sharing my experience in a safe, confidential environment with people who truly understood how I was feeling was invaluable. As a result of this I want to become a Trust volunteer to help deliver the HOPE course to other people.

Engaging with our Local Communities and Widening Accessibility



Our partnership with AccessAble

In our 2021-21 annual report we said that we will embrace technology and launch accessible guides. We have worked with AccessAble to create Detailed Access Guides to facilities, wards and departments across our hospitals. The guides and photographs aim to help patients, carers, visitors and staff plan their journey to and around the hospital, covering everything from car parking and hearing loops, to walking distances and accessible toilets.

- In February 2022 we launched our new detailed Accessibility Guides for patients, carers, visitors and staff in partnership with AccessAble.

Our detailed access guides are available in:

- Multiple
- As visual data
- Fully integrated audio feature

We invited patients, patient representatives, volunteers, community organisations, local health providers and staff to meet with us at a Virtual Event to launch our new guides and to support raising awareness. Our guides are detailed, factual and user driven.

From February-August 2022 we have received over 14,100 users downloading our accessibility guides.

- We worked with patient representatives and volunteers to gain feedback about our guides, testing out the audio and visual features to ensure that the site was clear to navigate and use, to support as many people as possible to access our services.

Members of our community have continued to download and access our guides. We have developed an engagement programme to continue to raise awareness with the public and we will review all guides in early 2023.

Supporting and working with our local D/deaf community

In our 2021-22 report we reported that we will increase our engagement specifically with those who are d/Deaf and hearing impaired to better understand how current service provision meets local needs and we will develop co-produced projects to deliver quality improvements from this learning. We have included in this report an overview of some of our work.

Empowering and giving confidence to our patients and carers and at the same time empowering and giving confidence to our staff:

- We delivered training sessions for staff online and face to face which are now available on a rolling basis for all new staff members to attend. The sessions focused on d/Deaf awareness and how to book a British Sign Language Interpreter.



Guide Usage – 1 July '22 to 30 September '22

- Users during the last quarter - **7,515**
- Page views during the last quarter – **11,907**
- Users during the previous quarter – **5,605**
- Page views during the previous quarter – **8,273**



Guide Usage – 1 Feb '22 to 31 Aug '22

- Users - **14,100**
- Page views –**21,322**



100% of the staff attending the event said that the training was very beneficial.

One staff member said:

"I would definitely recommend the training to staff trust wide as it was beyond helpful for all different staffing groups; for example, anyone who is clinical as well as anyone who is non clinical".

Another staff member said:

"Thank you for putting on training on different days – I feel confident booking an interpreter and the new online resources for staff are really supportive too".

Feedback received after a training event included:

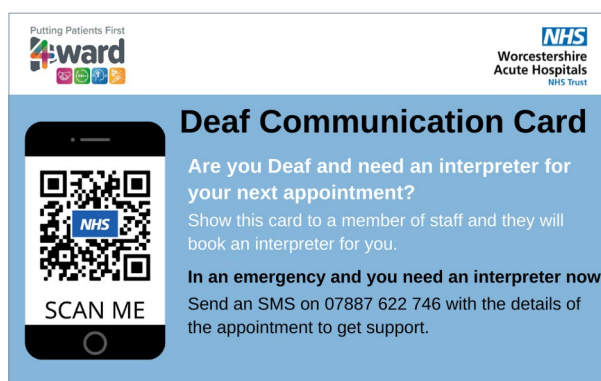
"Due to the vast amount of knowledge we learnt during that session we were able to create a poster of information for the Speciality Medicine and Urgent Care teams and we sent to all Ward Managers and Matrons. I believe that the Divisional Directors of Nursing are also aware of this".

8 key steps taken:

- ▶ We invited a member of our local community to one of our Trust Board meetings to highlight hearing impairments and actions that we can take to support ongoing development.
- ▶ As part of our learning and to aim for continuous improvement, we have included an audit as part of the annual PLACE inspections (Patient Led Assessment of the Care Environment) to check that hearing loops are switched on and that they carry a medical device sticker. An action plan will be developed in response to the audit findings in late 2022. PLACE is carried out by volunteers, patient representatives, community organisations and staff.
- ▶ We have worked with members of our local d/Deaf community to secure a new contract for sign language interpretation provision at our Trust and from June 2022 we began working with Word360
- ▶ Feedback from our local d/Deaf community, PALS concerns and informal conversations, supported a training package which we have started to deliver to staff on a rolling basis to ensure every member of staff understands how to book a sign language interpreter. We have as part of this work developed a new internal staff support resource tool

so that any staff member can easily access interpreters at any time of day or night

- ▶ We will also be using new technology to support our d/Deaf patients and carers and we aim to launch a new App in 2022-23 to support this
- ▶ Word360 created "Top Tips" awareness flyers for our staff
- ▶ We have worked with our local community and with Word360 to create posters for Deaf patients and carers coming into our hospitals. We have created these in response to feedback from our local community. We have also created cards for the local community to bring into hospital with them to support communication. We were asked to create these cards at a local Signing Café Club.



We showcased some of our work and our approaches in International Week of d/Deaf People in September 2022 some of which we have illustrated below:

Putting Patients First
4ward
4ward logo with icons for hearing, vision, touch, and smell.

NHS
Worcestershire
Acute Hospitals
NHS Trust

Are you Deaf and need an interpreter for your next appointment?



If you or someone you know is in need of a British Sign Language interpreter for an appointment, please make a member of staff aware, so we can assist.

How to check an interpreter has been booked

Go to: word360.co.uk/check-a-booking and enter your appointment information. If no interpreter has been booked, the hospital will book one for you.

In an emergency and you need an interpreter now

Send an SMS on 07887 622 746 with the details of the appointment to get support.

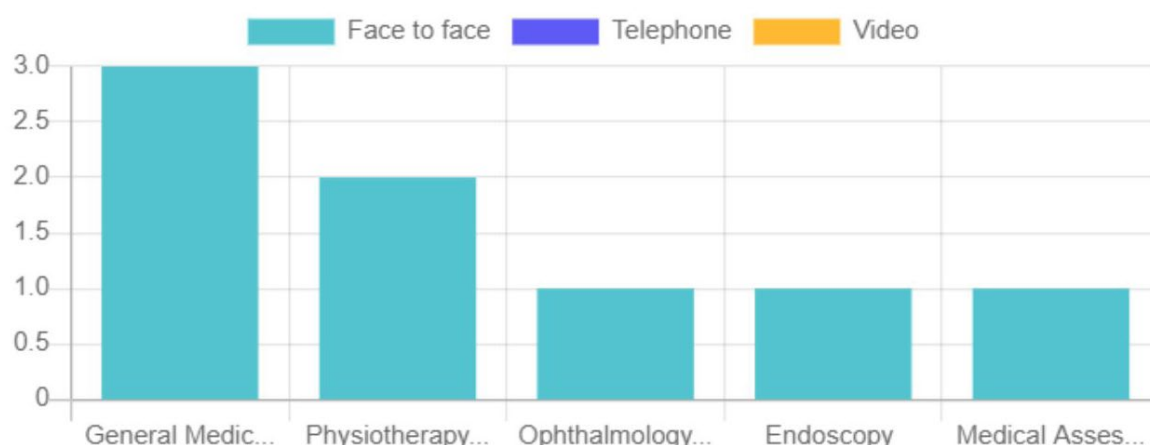


We have created posters to empower our Deaf patients and we have flyers to empower our staff to support our deaf patients. These resources are aimed at providing confidence and clarity to ensure that any Deaf patient can access services across our hospitals.

Demonstrating support for our local community

In June 2022 we started our partnership with Word360 (a Language and Accessibility service) and bookings can be seen in the graph below. These were all face to face as chosen by the patient. We will monitor the number of bookings and assignments completed alongside patient and staff satisfaction and report on performance in our internal quarterly reports.

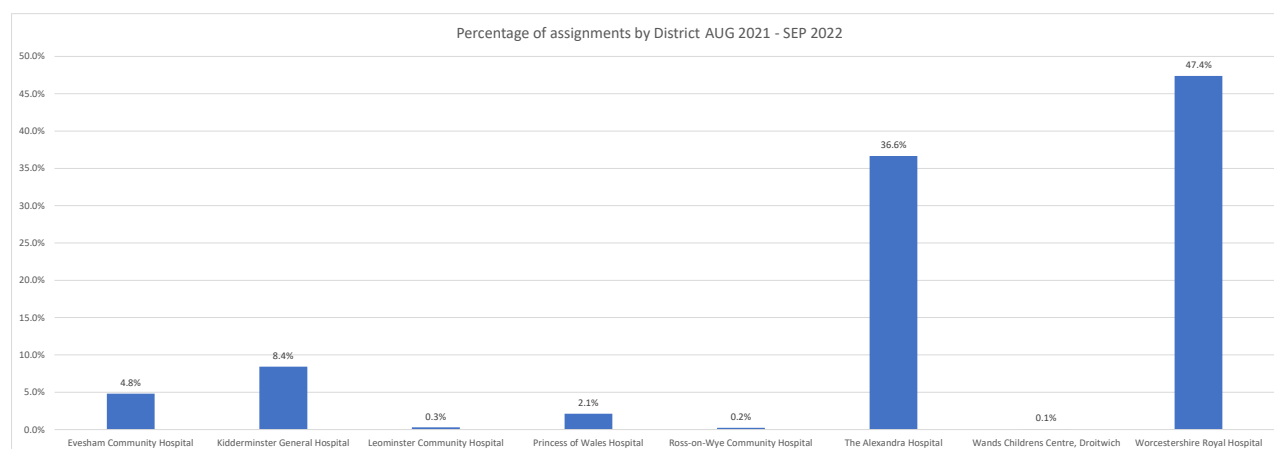
Bookings by department [Download CSV](#)



We continued to provide some services with our previous supplier until the end of September 2022 to offer continuity for our d/Deaf community.

We continued to support patients with language interpretation and translation across our hospitals in 2021-22:

The top 5 languages accessed during 2021-22 were Polish, Romanian, Portuguese, Urdu and Arabic.



A spotlight on 4 ways we have worked to support accessibility for our local communities this year:



1. Members of our local community engaged in x3 PLACE inspections:

We invited members from our local community to assess the non-clinical environments at our hospitals. We included audits on hearing loops and #CallMe as part of this process. Actions will be tracked and monitored through Trust steering groups and in discussion with our volunteers and patient representatives into 2023.

"We have the opportunity to speak with patients about their environment, cleanliness, quality of furnishings, food choice and any suggestions for improvement. In order to ensure that all patients are treated with the dignity that they deserve. Very worthwhile!"

Volunteer during PLACE inspections 2022

2. We welcomed Therapy Dogs back to our hospitals at Worcester and now Redditch for the first time. Therapy dogs can support our patients with anxiety, isolation, relieve stress, lower blood pressure and provide a comforting source of healing.

Patient and staff feedback is 100% positive.

"How lovely, you've really made my day"

"I feel much calmer now and my anxiety is less"
(patient feedback)



We reviewed our Learning Disability, Interpreting and Translation and Volunteering Policies with patients, carers, volunteers and staff to support our commitment to accessible services, hospitals and experiences for our community.

Volunteer recruitment: we continue to actively encourage volunteers of all ages and backgrounds. Our volunteer team has supported 96 volunteers to complete 15 training modules including new face to face support sessions and 4 new induction training days. We currently have 70 volunteers at Worcestershire Royal Hospital and 26 volunteers at The Alexandra Hospital, Redditch. We are exploring how to increase engagement from volunteers with a physical or hidden disability and how we can work together to provide a rich experience that supports our patients as well as our volunteers themselves.

Overview of our work in Care of Older People and our support for those living Dementia

Education

We have focused on equipping the workforce with the appropriate education and skills to deliver consistent and compassionate care to people with Dementia. More than 6000 of our staff across the Trust have completed Health Education England Tier 1 Dementia Awareness

training. We are now focusing on Tier 2 focused Dementia Training which we will be delivering in face to face workshops for staff who provide direct Dementia care.

Communication – Yellow Badges

Charitable funds have been secured to introduce yellow patient friendly ID badges, already worn by some staff for all patient facing staff Trust wide. While this promotes good communication between patients and staff we will also be offering staff the option of adding pro-nouns.

Person-centred Care

There continues to be excellent examples of person-centred care across the Trust. Occupational Health colleagues working in Frailty have led initiatives to better understand people's wishes and preferences, using the established 'About Me' booklets to individualise their care in hospital.

The Emergency Department at the Alexandra Hospital are looking to work with the Dementia Team to promote "West Midlands Police Herbert Protocol", which is a national scheme which encourages carers, families, friends and/or neighbours to hold information about the person with dementia that can help police find them if they go missing. We are also working as a partner in the 'Message in a Bottle' campaign which encourages people to keep their basic personal and medical details in a specific place where it can be easily found in an emergency – this allows the emergency services to access vital personal and medical information if someone suffers from an accident or illness at home. Personal and medical information is stored in a clearly labelled plastic container and kept in the person's fridge. The container holds two labels, known to the emergency services, which can be displayed in the person's home, one on the

fridge door and the other at eye level on the inside of the main entry door. The datalink pots were kindly provided by the Redditch Lions Club.

Inpatient falls prevention and avoidance of hospital acquired functional decline is a continued high priority topic. Two wards have had the Rambeguard installed, which alerts staff to patient movement and falls, allowing them to attend to the patient promptly. While the system is evidenced to reduce falls, it also allows patients the freedom of safer movement and reduces the need for more restrictive measures such as staff supervision.

Dementia Care/Commitment to carers

The 5th round of the Royal College of Psychiatrists National Audit of Dementia is underway. This is a prospective audit of Dementia care in hospital and includes a carer questionnaire. The audit is in two parts which concludes in the spring next year. Results in previous surveys have been used to identify key performance indicators to improve Dementia care.

ICS Commitment to Carers



- We were involved in the local tender to find the best provider for the Adult Carer's Hub across Worcestershire and we look forward to working with the provider into 2023 and beyond to work together on creating resources that meet local need and to ensure we are Carer Aware across our hospitals.

- ▶ We have joined conversations at a Place level – meeting with Carers and other organisations who work with Carers to have conversations together about issues affecting some of our local carers.
- ▶ We welcomed the Worcestershire Association of Carers into our hospitals to raise awareness with the public. We have also included joint messaging on our website and in our social media messaging to support effective signposting of supportive resources for carers.
- ▶ We report on our Commitment to Carers annually to local partnerships and reference groups – and we continue this conversation at local meetings to help us understand where we are meeting local need and where we need to develop our approaches.

Formal Complaints Overview

The Trust received 578 formal complaints in 2021-22. This was a 32% increase from 2020-21 when we received 438 formal complaints in 2020-21. The numbers however were equivalent to pre-Covid19 pandemic levels.

In the financial year 2021-22, five formal complaints related to discrimination and equality.

This breaks down to:

- ▶ Three complaints were received about disability discrimination.
- ▶ One complaint was received about racial discrimination.
- ▶ One complaint was received about age discrimination.

We report on Themes and Learning from complaints in Divisional reports (areas across our hospitals) and these reports are shared at our Patient, Carer and Public Engagement Steering Group. This provides the space to discuss themes and learning and highlight good practice. Learning is also shared in local area meetings.

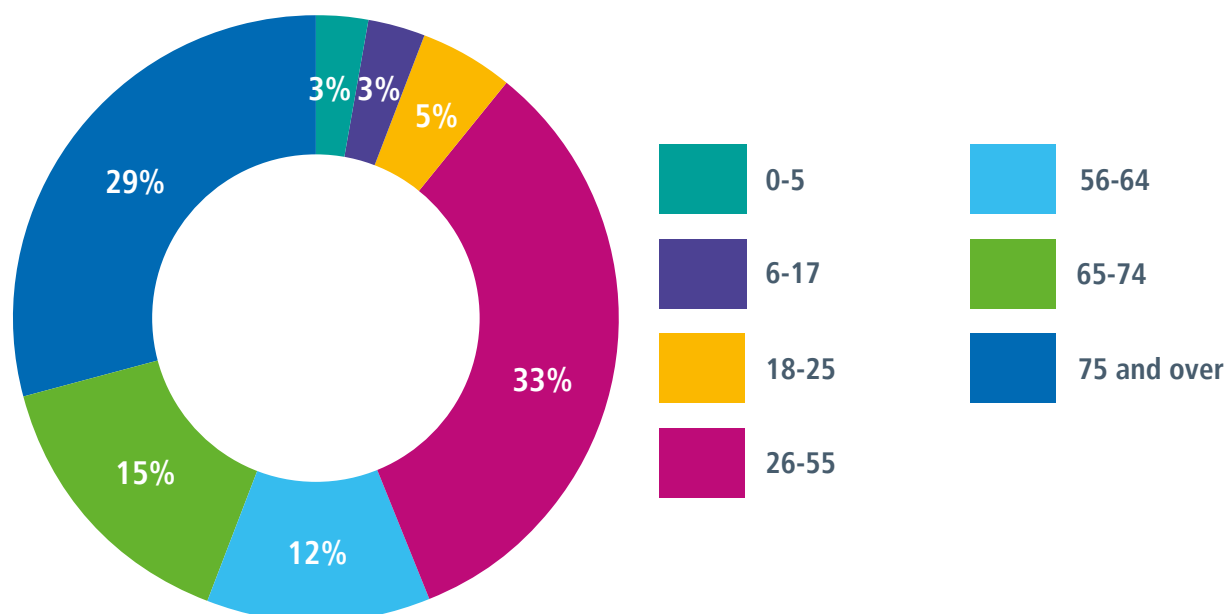
Ethnicity of Patients

Ethnic origin codes are recorded on the Trust's Patient Administration System; for complaint cases this is added to Datix to capture the ethnic diversity of patients who are the subject of complaints. The ethnicity of the complainant (if they are not the patient) is not recorded. We have compared the percentage of complaints against the census data for Worcestershire from 2011 for comparison:

Ethnicity Grouping	Percentage of Complaints	Worcestershire Census Data
White Category Total	95.46%	95.80%
Asian or Asian British	1.20%	2.40%
Other Ethnic Group	0.48%	0.10%
Black or Black British	0.24%	0.40%
Mixed Multiple Ethnic Group	0.24%	1.30%
Not Stated	2.39%	

The large majority of people who contacted us with a formal complaint in 2021-22 were White-British or White-Other White/White-Irish, reflecting the county's demographic profile. Aside from patients who did not state their ethnicity, 2.16% of complaints related to patients from other ethnic backgrounds.

Age Band of Patients



In 2021-22 the majority of complaints were from patients aged between 26-55 and aged 75 and over, each making up approximately 30% of the total number of complaints received; this is consistent with 2019-20 and 2020-21, shown above.

This is a similar picture nationally – these two groupings were also largest when compared with national data.

It should be noted that Worcestershire does have a larger proportion of people over 75 compared to the national average.

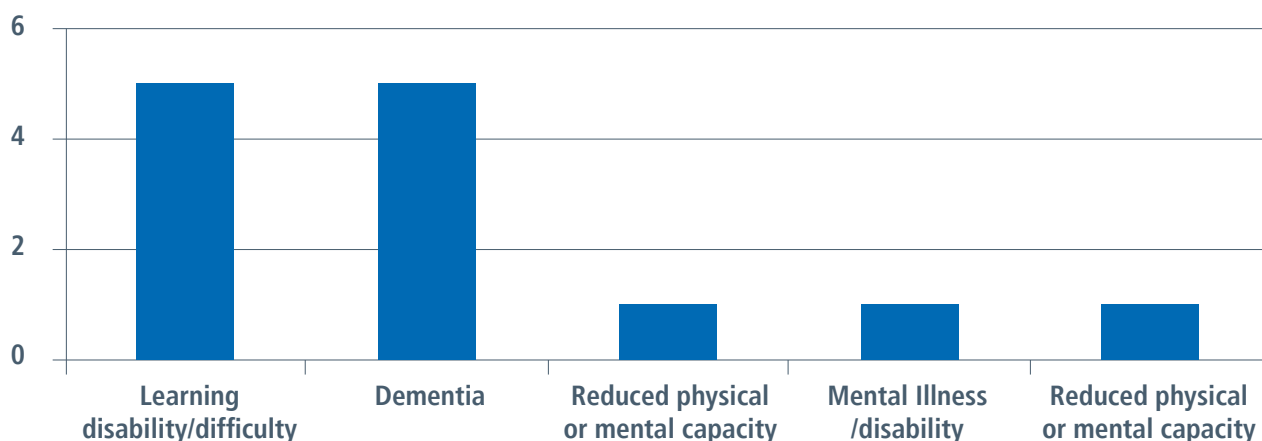
Information is available across the Trust inviting patients, their carers, friends and family to share concerns or complaints; this includes posters in Children's departments about Young People's Rights which are displayed in clinics and on wards to ensure that everyone is aware that they have the right to share a concern or complain about their experience or treatment, regardless of age.

Vulnerable Adult code for person who is subject of a complaint

Complaints regarding vulnerable adults are shared with the Trust's Learning Disability Steering Group for further discussion and learning.

Informal Resolution

The Trust continues to support, train and equip staff with the skills to resolve concerns locally where possible. It has been crucial for all staff around the Trust to resolve as many concerns informally or via the Patient Advice and Liaison Service (PALS) process; the Patient Services Team supported Trust staff to resolve 16% of complaints informally across the year (consistent with 18% in 2020-21). Staff awareness of the PALS and actively engaging with patients and carers for feedback via the Friends and Family Test also supports open communication and learning from concerns.



The Complaints and PALS Annual Report for 2021-22 has been published on the Trust website and can be viewed here: [Complaints and PALS \(Patient Advice and Liaison Service\) Annual Report: 2021-22 - Worcestershire Acute Hospitals NHS Trust \(worcsacute.nhs.uk\)](https://www.worcsacute.nhs.uk/pals)

What is next for us into 2022-23

Delivering good outcomes is at the forefront of our purpose across our hospitals and to support our ability to put our patients first we will create spaces for open communication and conversation to ensure that we can continue to learn from the lived experiences of our patients into 2023 and beyond.

We aim to do this in different ways including creating opportunities for our patients and their carers to work with us in partnership to continue with approaches we have developed in 2022.

Our commitment to listening to and providing space for patient voice and patient feedback will be supported in the following ways:

- ▶ Developing our partnership with carers across the county, working with system

partners to support us to continue to play an active part in the delivery of a countywide Carer's Strategy and to deliver on a series of pledges we made in our Integrated Care Services Commitment to Carers.

- ▶ We will develop our 3 Year Plan together with our local system partners and community groups to explore themes and challenges and importantly how effective partnerships can help us get the basics right across healthcare, improving access for all, in line with integrated working. This will help us provide safe and effective care into the future.
- ▶ Cancer Care: we will hold our first Health and Wellbeing event to bring together our cancer patients, we will develop our partnership with the Integrated Care Board on inequalities projects and we will continue to run our successful HOPE courses for patients. We aim to bring back volunteers to support across our Macmillan Pods.
- ▶ We will ensure that we promote our partnership with AccessAble by having a full scale review of our detailed accessible guides and raising awareness and promotion through a variety of ways including

promotion on the back of our Outpatient letters and a series of “pop up” stalls with publicity banners across our hospitals – we will continue to raise staff awareness through engagement sessions and supported communications.

- ▶ We will develop opportunities to meet with community partners to have joined up conversations to highlight areas of health inequalities and where we can work together to support the needs of the local community.
- ▶ We will develop our volunteering offer by increasing the number of our volunteers and the roles available with a focus on attracting a diverse volunteer team, working with a range of people from different backgrounds to support our core purpose and support an experience of good and excellent care for our local community.
- ▶ We will further support our local Deaf community by increasing the number of patient posters across our departments and we will install a “Check an Interpreter Booking” feature on our website. We will continue our conversations and find new ways to work together and continue staff awareness.
- ▶ As part of our actions to support our local LGBT+ community, we will create patient posters and resources to share our commitment to be an inclusive place where any patient or staff member is feel safe to be themselves without fear of discrimination.
- ▶ We will continue to widen the ability for as many diverse voices to inform our Quality Priorities through our engagement with The

Big Quality Conversation and we will explore how we can feed back our progress to our local community and how we have taken feedback and ideas on board.

- ▶ We will explore how we can increase engagement with The Friends and Family Test and how we can ensure this is as accessible as possible – by doing this we can provide an ongoing way for anyone to feed back to us directly about their experiences of using our hospitals and services.
- ▶ We will continue to bring together staff, patient representatives and community organisations at a quarterly steering group to share where we are working well and together work on improvements.

If you have a, experience or a patient story to share and you would like to work with us to help us continue to develop accessibility, inclusion, diversity and equality for our patients and carers, please contact us via Anna Sterckx, Head of Patient, Carer and Public Engagement: anna.sterckx@nhs.uk

www.worcsacute.nhs.uk



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