



# Diversity and Inclusion Annual Report



2022-2023



Mohammed Ramzan, Head of Diversity & Inclusion

West Midlands Ambulance Service University NHS Foundation Trust

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The following reports and action plans will be uploaded onto the organisational webpage once they are approved by the governance committees:	
➤ WMAS GENDER PAY GAP REPORT	
➤ WRES ACTION PLAN	
➤ WDES ACTION PLAN	

**Please note:** If you have trouble accessing the documents and need these in alternative formats, we may be able to assist you.

Please email: [pressoffice@wmas.nhs.uk](mailto:pressoffice@wmas.nhs.uk) Tel: 01384 246 496

EXCELLENCE



INTEGRITY



COMPASSION



INCLUSIVITY



ACCOUNTABILITY



### OUR CULTURE

As a WMAS employee, student or volunteer you will be treated with compassion. We are kind, empathetic, supportive, non-judgmental and appreciative. We are curious about what makes us unique, and about what we have in common.

We will respect each other's boundaries and always be honest, truthful and respectful. We focus on excellence in all we do so that our patients, service users and partners have the best possible outcomes and experiences. We will hold ourselves to account for our behaviours and will not shy away from holding others to those same standards and behaviours.

## FOREWORD

This report outlines the challenges we have faced and our achievements for 2022-23. We are particularly proud of the progress we have made in embedding the Workforce Disability Equality Standard (WDES), Workforce Race Equality Standard (WRES), and Gender Pay Gap action plan. In the last year we have started to collect the Ethnicity Pay Gap data which will also inform the WRES action plan. Our Board membership continues to be representative of the population and staff it serves. We have expanded our Chaplaincy service and welcomed Imam Asad to join Rev. Vanessa in March 2023 to support our staff, recognising the diversity of staff needs. We are hopeful of increasing the chaplaincy service to include new membership in 2023/24

The Trust serves a population of 5.6 million people covering an area of more than 5,000 square miles made up of Shropshire, Herefordshire, Worcestershire, Staffordshire, Warwickshire, Coventry, Birmingham, and Black Country conurbation.



The West Midlands is full of contrasts and diversity. It includes the second largest urban area in the country (Birmingham, Solihull and the Black Country) yet over 80% of the area is rural. We are the second most ethnically diverse region in the country after London which makes it vital that we work closely with the many different communities we serve. Ensuring we listen and respond to their suggestions and comments ensures that our service meets the needs of everyone in the region.

As the region's emergency ambulance service, we respond to around 4,000 '999' calls each day. To manage that level of demand, we employ approximately 7000 staff and operate from 15 new fleet preparation hubs across the region, and three 999 Emergency Operations Centres. The West Midlands 111 service is no longer hosted by the Trust. Around 4509 staff transferred under TUPE (Transfer of Undertakings (Protection of Employment) Regulations 2006) regulations across to the new provider, which will have had an impact on the demographics of some staff groups within the Trust. We also provide non-emergency patient transport services across some parts of the region for those patients who require non-emergency transport to and from hospital and who are unable to travel unaided because of their medical condition or clinical need. Our staff complete approximately 1 million non-emergency patient journeys each year.

Many people still think ambulance services only take patients to hospital. In fact, only just over 50% of our patients end up going to an emergency department with the rest either being treated at the scene or in their home, given advice over the phone or taken to another service such as a GP or minor injuries unit. We have achieved that by investing heavily in the skills that our staff have. We are the first Trust in the country to have a paramedic on every vehicle and continue to operate this delivery model.

Our Diversity and Inclusion vision is centered around three pillars:

1. to build a diverse pipeline of people into WMAS as well as valuing diversity of thought and experience of our existing staff.
2. to create an inclusive workplace for all and
3. to reflect diversity in the delivery of our service to the diverse communities we serve.

Building and valuing a diverse and inclusive workforce takes purpose and dedicated action, but the benefits are substantial, both to ourselves and those we serve.

We have robust governance processes in place to ensure strategies, policies, procedures and major service changes are regularly assessed for impact on equality issues and our Board, Committees, Diversity & Inclusion Steering Group and staff networks help us to understand those needs. The Trust continues to progress and embed, Diversity and Inclusion into everything we do.

People Director



Carla Beechey

A handwritten signature in black ink, appearing to read 'C. Beechey'.

Chief Executive



Professor Anthony Marsh

A handwritten signature in black ink, appearing to read 'A. C. Marsh'.

Head of Diversity & Inclusion



Mohammed Ramzan

A handwritten signature in black ink, appearing to read 'Mohammed Ramzan'.



This Annual Report will highlight our achievements during the past year. The Trust has a statutory responsibility to publish an annual Equality report. This report provides information about the work we are doing and what we have achieved over the previous year. The report demonstrates the compliance with the Public-Sector Equality Duty [PSED]. Further, the report will highlight some of the key achievements over the year and include information and progress on projects including Equality

Delivery System 3 report and grading, the Workforce Race Equality Standard (WRES) data and action plan, the Disability Workforce Equality Standard (DWES) and the Gender Pay Gap.

The report also provides a brief on our performance in regulatory compliance and our commitment to promoting a culture of inclusion for patients and staff through our vision for the future. This report will provide evidence on our commitment in meeting the Public-Sector Equality Duty (PSED) in the need to give due regard to eliminate discrimination, advance **equality** of opportunity and foster good relations between different people when carrying out our activities.

Some elements of the report are mandatory in relation to workforce data under the Specific Duty and Equality Objectives.

The Trust also understands the importance of a workplace that reflects the communities we serve, which is known to provide better quality patient care.

## CORE SERVICES

WEST MIDLANDS AMBULANCE SERVICE UNIVERSITY NHS FOUNDATION TRUST PROVIDES THE FOLLOWING:

### EMERGENCY AND URGENT

This is the most-known part of the Trust and deals with the emergency and urgent patients. The Emergency Operations Centre (EOC) answers and assesses calls for 999. EOC will identify the most appropriate ambulance crew or responder to the patient or reroute the call to our Clinical Validation Team staffed by experienced clinicians (paramedics or nurses) who are able to clinically assess and give appropriate advice. Over the past few years, the EOC has expanded considerably to manage the volume of calls, especially in response to the COVID pandemic. Where necessary, patients are conveyed by ambulance to an Accident and Emergency Department or other NHS facility for further assessment and treatment. Additionally, they can refer the patient to their GP where appropriate.

### NON - EMERGENCY PATIENT TRANSPORT SERVICE (PTS)

As well as dealing with '999' emergency calls, West Midlands Ambulance Service plays a key role in getting thousands of patients to and from their out-patient appointments and take people home from hospital. We complete in the region of one million non-emergency Patient Transport Service (PTS) journeys each year. We have contracts in Birmingham, Black Country, Coventry & Warwickshire as well as throughout Cheshire, Warrington and Wirral. The majority are commissioned by Clinical Commissioning Groups and tendered on a competitive commercial contract basis.



The Trust employs nearly 900 PTS staff using more than 350 vehicles to get patients to and from their hospital appointments throughout the region and beyond, 24 hours a day, seven days a week. The journeys are booked and coordinated by dedicated control rooms based in Stafford, Coventry, Brierley Hill, Warrington and Frankley.

### EMERGENCY PREPAREDNESS

This part of the organisation deals with the Trust's planning and response to significant and major incidents within the region as well as coordinating a response to large gatherings such as football matches, festivals and this year the hosting of the Commonwealth Games in Birmingham. It also aligns all the Trust's Specialist assets and Operations into a single structure. Examples of their assets include the staff, equipment, and vehicles from the Hazardous Area Response Team (HART), Air Operations, Decontamination staff and the Mobile Emergency Response Incident Team (MERIT).

The Trust constantly arranges training for staff and ensures the Trust understands and acts upon intelligence and identified risks to ensure we keep the public safe in terms of major incidents. The Trust is supported by a network of Volunteers. More than 500 people from all walks of life give up their time to help.



## COMMUNITY FIRST RESPONDERS

Community First Responders (CFRs) are always backed up by the Ambulance Service but there is no doubt that their early intervention has saved the lives of many people in our communities. WMAS is also assisted by voluntary organisations such as BASICS doctors, water-based Rescue Teams, and organisations.





The Trust continues to implement its diversity & inclusion vision statement with staff and the community. We continue to implement positive action measures in our recruitment to better represent the communities we serve, and in the way we engage with more 'seldom heard' community groups. It means bringing in new voices, backgrounds and experiences into our service which we have demonstrated in our EDS work and with greater engagement with our staff and networks.

The journey means we want to listen, be courageous and think outside the box. Being inclusive only comes from working together with each other and our stakeholders.

We believe in fairness and equity, and value diversity in our role as both a provider of services and as an employer. WMAS aims to provide accessible services that respect the needs of each individual and exclude no-one. We are committed to eliminating discrimination based on the Equality Act 2010.

We recognise that discrimination can be direct or indirect and takes place within organisations and at a personal level. Such discrimination is unacceptable and unlawful. We have a zero-tolerance approach towards behaviour that amounts to harassment or the exclusion of any individual.

We expect all WMAS employees to fulfil their responsibilities and to challenge behaviour or practice that excludes or is offensive to service users, suppliers, or colleagues. WMAS continues to develop a healthcare workforce that is diverse, non-discriminatory, and appropriately skilled to deliver modern healthcare services to all.

Alongside our vision statement, we are required under the Equality Act 2010 to demonstrate that we are meeting our equality and diversity legal duties.

The **PUBLIC-SECTOR EQUALITY DUTY (PSED)** is part of the Equality Act 2010 and came into force in April 2011. This duty requires NHS organisations and other public bodies to:

- Comply with the General Equality Duty
- Comply with the Specific Duty
- Publish Equality Objectives every four years.

The **GENERAL EQUALITY DUTY** has three aims and requires us to have 'due regard' to:

1. Eliminate unlawful discrimination, harassment and victimization and other conduct prohibited by the Act.
2. Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.
3. Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

Our staff and patients are all different, and 'one size does not fit all'. In WMAS we aim to make sure our work and the services provided are fair and meet local needs. The Trust has a legal duty to promote equality and ensure services are accessible for all.

## OUR WORKFORCE

WMAS is a dynamic organisation with over 6,879 staff as of 13<sup>th</sup> June 2023. The full breakdown of workforce data is attached to this report in the appendix section. The organisation has robust policies and procedures in place which ensure that all staff are treated fairly and with dignity and respect. The Trust is committed to promoting equality of opportunity for all current and potential employees. The Trust is aware of the legal equality duties as a public sector employer and has equality and diversity training, at induction, in place for all staff.

The Trust opposes all forms of unlawful and unfair discrimination and will ensure that barriers to accessing services and employment are identified and removed, and that no person is treated less favourably on the grounds of their race, ethnic origin, sex, disability, religion or belief, age, sexual orientation, transgender status, marital or civil partnership status, pregnancy or maternity, domestic circumstances, caring responsibilities, or any other relevant factor.

The organisation realises that staff need to be representative of the local population. Therefore, continued briefing and training for recruiting managers, in partnership with human resources personnel, will be crucial to address this gap and will form part of the equality action plan for 2023/24.

## EQUALITY IMPACT ASSESSMENTS – DUE REGARD

Due Regard (diversity & inclusion analytics) is the mechanism by which the Trust seeks to ensure that its functions, policies, processes and practices do not have an adverse impact on any person in respect of their protected characteristics as described in the Equality Act 2010.

Due Regard means thinking about the aims of the PSED in the decision-making process. This means that consideration must be given to equality issues such as:

- How the Trust acts as an employer
- How the Trust develops, evaluates, and reviews policy
- How the Trust designs, delivers and evaluates services
- How the Trust commissions and procures from others

The EIA process has been embedded into the governance mechanism of the Trust and the framework is available for staff to use when developing or reviewing business activity. Training on how to utilize the EIA framework was delivered to appropriate staff in 2022/23, as well as being promoted in the weekly brief and is available on the intranet for staff to download. Further advice and guidance has been developed on the EIA process and the equality lead has provided one to one support on completion of the forms when needed.

## COMMUNICATIONS & ENGAGEMENT

### **Partner Stakeholder Survey**

WMAS undertook its third annual stakeholder survey towards the end of 2023 where we asked our key stakeholders, such as commissioners, regulators, hospital trusts, local authorities, health-watch, universities and others what WMAS is like as a partner to work with. The survey had ten questions and enabled respondents to provide free text replies.

We had responses from a wide range of stakeholders who were very supportive of the Trust but did provide feedback on how we could further strengthen partnership working in what is a complex challenging environment.

The results of the survey have been shared with executive management board and Trust board, so the leadership team can see how we are progressing with regard to partnership working, communications and engagement.

## Integrated Care Systems

The Chair, CEO and Strategy and Engagement Director have undertaken a rolling series of engagement sessions with the Chairs and CEOs of each of the 6 ICS WMAS works with. This has helped WMAS build relationships and share knowledge with new partners and served as a forum to discuss areas of mutual interest.

## EQUALITY OBJECTIVES 2021-2025

The Trust is required under the “Specific Duties” to prepare and publish one or more specific and measurable equality objectives which will help to further the three aims of the Equality Duty. The objectives must be published every four years. Despite the challenges of the COVID 19 pandemic, we have made meaningful progression and will continue to work on areas over the course of the Equality Strategy 2021-2025.

### Objective 1 Equality Standards

Our commitment to meeting the Equality Standards set by NHS England will be demonstrated by the implementation and monitoring of the following standards:

- Workforce Race Equality Standard
- Workforce Disability Equality Standard
- Gender Pay Gap Reporting
- Accessible Information Standard
- Equality Delivery System

Over the last year we have done this through:

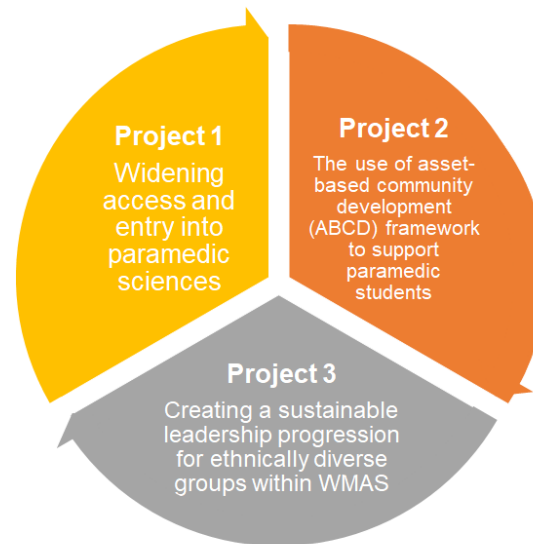
- Implementing and strengthening our approach to the NHS Equality Delivery System by working with Black Country ICB on a joint assessment on Domain 1 of the new framework. Please see below for further information.
- Monitoring of the Workforce Race and Disability Equality Standards and the Gender Pay Gap action plans.
- Investigating the experiences/satisfaction of staff through further surveys (Winning-Temp survey platform) and focus groups
- Supporting the staff equality networks to ensure they are aligned with our strategic equality objectives.

### Objective 2 Reflective and diverse workforce

We will enhance our approach to recruitment, selection and promotion to positively attract, retain and support the progression of diverse staff across the Trust.

We have done this in part by:

- Targeting local and diverse communities in recruitment campaigns.
- Work closely with external partners and providers (e.g., university paramedic programmes) to ensure diversity among the student group, and appropriate course content.
- Ensure the recruitment and selection training programme informs recruiting staff and managers of their legal duties under the Equality Act 2010.
- Partnering with Coventry University and Heath Education England to support three Masters of Research for 3 inter-related studies:



### Recruitment in Action - Recruitment engagement 2022-2023.

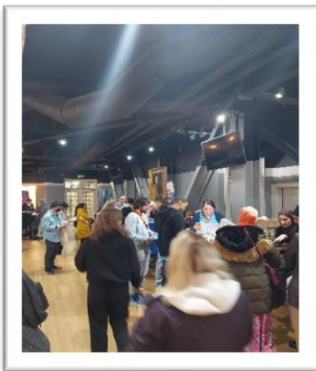


The recruitment team attended 40 different social engagement events in 2022-2023 within a variety of different settings, from schools that cater for pupils with multiple profound disabilities, delivering careers advice in partnership with the department of working pensions; to colleges and academy's that are looking to inspire their pupils. There has been a real sense this year of positivity and interest in working within the service. Some of the highlights this year have included Working with Connexions at their annual careers event held at West Bromwich Football club, demographically this area has a 40.9% BAME population with this specific event aimed at 15- 19-year-olds who use the connexions service to develop their employability skills. November saw the teamwork alongside the Princes Trust focusing on getting young people who have faced disadvantage and adversity to build a better future for



November saw the teamwork alongside the Princes Trust focusing on getting young people who have faced disadvantage and adversity to build a better future for

themselves through job opportunities, education training and enterprise at their careers event held at Birmingham's Villa Park. Lots of positive engagement with those who were drawn to the Trusts stand where the team were on hand to talk them through the recruitment and selection process as well as sharing their experiences of working within the Trust. Children and public service students braved the Birmingham weather to attend an emergency services day held in central Birmingham. Where they were introduced to members of the Trusts HART and Recruitment Team, asking questions about the roles they do and looking at all the specialist equipment and careers within the service. The year finished off with career presentations delivered at Juniper Training, who provide free training courses for 16-18year old across the country at different training centres. Juniper trains and educates a lot of disadvantaged pupils who have face difficulties within mainstream education to help them gain the vital skills and confidence to take them into the workforce. The 2023-2024 diary is already filling up with further diverse engagement opportunities such as working with BBC Asian Network to recruit more staff from diverse backgrounds and the opportunity to visit faith schools.



### **Inclusive Uniform Work Up for National Award**

The work undertaken to create a new more inclusive uniform for the UK Ambulance Sector was nominated for a national award and reached the finals. WMAS staff played a key role in the programme which saw the introduction of a range of items that help meet their beliefs such as Hijabs, Turbans, and Kippahs. It also saw the introduction of lighter polo shirts with underarm ventilation, trousers that fit different body types, helmets that can be used with cochlear implants and hats that allow space for hearing aids, and maternity clothing for staff who move into alternative duties in an office when pregnant. The work was nominated at the UK National GO Awards Ceremony to celebrates the very best procurement achievements from across the UK's public, private and third sector organisations. Trust Equality, Diversity and Inclusion Lead, Mohammed Ramzan, said: "The project took over two years to complete because of the thorough and extensive engagement with key stakeholders as well as testing by

staff in the roles the uniform was designed for. Even if we don't take first prize, the fact that staff give good feedback is a win in itself." You can find out more about the project by watching [this film](https://youtu.be/aOXN0EKiwMs). <https://youtu.be/aOXN0EKiwMs>



*From left to right, Chris Jenkins, Mohammed Ramzan EDI Lead, Elisa Lamb (NHS Supply Chain), (WMAS) Karen Holdsworth, Southwest Ambulance Trust EDI Lead.*

### **Provision of free sanitary products for all staff across the Trust.**

The Trust was successful in a bid for funds from AACE (Association of Ambulance Chief Executives) to be able to provide free sanitary products to all staff across the Trust. The monies awarded was used to purchase and install a free vend unit in every female toilet block across the Trust, a total of 34 units. In addition, the bid enabled the purchase of a large supply of sanitary towels and tampons, in a variety of flow sizes. This meant that every unit was provided with an initial stock of products. We wish to encourage people to pay it forward by adding products to the free vend machines when the initial stock has been used, feedback from women is that they would be happy to do this as and when they can to support their colleagues. We know that there are several reasons why this initiative will be beneficial to people in the Trust, including from a period poverty perspective, to supporting people experiencing menopause and other health issues such as heavy and irregular bleeding, in addition to being available to any staff that don't have products with them that they need.



*Becky Godfrey, Chair of the Women's Network and Lucy Mackcracken, Head of Human Resources*

### **Health & Wellbeing Roadshows 2023**

After the enormous success of the health and wellbeing roadshows last year, the events are back for 2023. In total 25 sessions have been set up with the usual features such as health checks, SALS advisors, health & wellbeing champions, FTSU advocates as well as the cycling and rowing challenges. This year we have partnered with our external stakeholders (West Midlands Police Social Club, OH, Cycle to work scheme etc) and internal stakeholders (Trust Networks, EDI Lead etc) to help and support staff with their health and wellbeing. We look forward to planning the 2024 events.





### **Recruitment of placement student to the HWB and EDI Team**

To support our Health and Wellbeing and Equality and Diversity Team, we have recently recruited our first every placement student from university for the next year to develop and support with HWB and EDI projects and initiatives, we really look forward to working with our new placement student Amisha Regmi.

### **Objective 3 Civility and Respect**

Ensure all our Board leaders, senior managers, staff, contractors, visitors and the wider community are aware of the effects of their behaviour on others and are equipped to challenge and report inappropriate behaviour when they experience or witness it

We will do this by:

- Developing and delivering an internal communication campaign on civility and respect in the workplace
- Developing a system where all cases of bullying or harassment are clearly recorded as such and monitored to identify any trends or patterns across the Trust. We have collated incidences of verbal and physical incidences broken down by Ethnicity, Age and Gender.
- Continuing to capture good practice from our partners and peers to improve our diversity and Inclusion performance, e.g., working collaboratively with the NHS Employers' National Ambulance Diversity Forum and Regional Diversity Groups
- Embedding the refreshed values, behavioural framework and culture statement as our standard, measured through performance and development conversations and holding ourselves and others to account
- Launching the rebrand of our grievance procedure to be a resolutions procedure with greater emphasis on listening skills and resolving issues at an informal level, ensuring that people that raise concerns are treated with dignity, respect and compassion.
- Launching and delivering a new manager training package in relation to dealing with dignity at work and resolutions concerns in the workplace, equipping managers with the skills and knowledge to deal with these topics appropriately whilst ensuring staff are supported through these processes.

### **Sexual Safety at WMAS**

In October 2022 we launched a sexual safety charter across the Trust, clearly demonstrating behaviors and conduct that are not acceptable and to encourage people to report concerns of a sexual safety nature. To coincide with the launch of the charter, an education and awareness session was implemented and delivered across the Trust to managers, supervisors and those working in a position of Trust.

Across all sites sexual safety awareness posters are displayed in safe spaces, on the back of toilet doors, highlighting examples of inappropriate behaviour and listing avenues of support available. The below infographic depicts the journey in relation to sexual safety at WMAS since October 2022.

# SEXUAL SAFETY AT WMAS

In October 2022 we Launched our approach to raising awareness of sexual safety in the workplace, highlighting the support avenues for individuals who experience this unacceptable behaviour and confirming our commitment to addressing this robustly and appropriately.

### New Values and Behaviours Launched

Sexual safety and awareness information has been incorporated into corporate induction and mandatory training workbook that all staff complete.

Sexual safety awareness posters can be found across all Trust sites. Including in safe spaces on the back of toilet doors.

A Sexual Safety and Awareness Training session has been developed and delivered to

- Board members & Senior managers
- Operational & Corporate Managers
- Clinical Team Mentors, Supervisor's
- Education & Training Officers
- Staff Networks

### We Launched a Sexual Safety Charter

[Viewing Managing Safeguarding Allegations Policy and Procedure \(policeystat.com\)](http://policeystat.com)

*"Until I read the poster on the toilet door, I thought what I was experiencing at work was part of ambulance banter, even though it made me feel very uncomfortable at times that I did not want to come to work. Reading the poster helped me understand it was unacceptable and should be reported".*

*" After attending the awareness session, I now feel more able to challenge inappropriate behaviour and feel more confident to support staff that disclose these experiences to me".*

- There are many avenues that people can use to raise concerns to,
- Police
  - Any Trust Manager
  - Human Resource Team
  - Safeguarding Team
  - Trade Union Representatives
  - Freedom to speak Up
  - Staff Advice Liaison Service (SALS)
  - Chaplaincy Services
  - Mental Health First Aiders

Of cases reported, following investigation have resulted in range outcomes including:

- Education and training recommendations regarding personal impact and behaviours.
- Sanctions
- Dismissal
- Referral to regulatory bodies and Disclosure and barring Service
- Formal Disciplinary
- Mediation
- No further Action



Since the launch of the awareness campaign, the number of concerns reported have risen. While any such case is one too many, the fact that staff have the confidence to report such behaviour is a positive. Claims are taken seriously, managed fairly and appropriately as part of a multidisciplinary allegations meeting.

All student paramedics, whether employed by the Trust and or on placement have been contacted regarding the Trust's approach to rooting out inappropriate behaviour. They have also been given details of how to report cases and the support available.

**Objective 4 Ensure our leadership is committed to creating an environment that promotes and values equality and diversity and this is embedded in all we do.**

We will do this by:

- Delivering diversity and inclusion training to all members of the Board of Directors and Council of Governors
- Ensuring all our leaders have specific diversity & inclusion objectives in their annual objectives with performance discussed during their appraisals.
- Ensuring that Board and Committee reports include an equality impact analysis.

We have made some significant progress despite the challenges and pressures that the Trust has faced whilst acknowledging that over the course of the four years of the Equality Strategy, further work needs to be advanced to deliver on the objectives in their entirety. In Feb 2023, the EDI lead delivered board session training on Equality, Inclusion and Diversity and provided information for further consideration by the Board in advancing and promoting equality throughout the organisation. The Board session was well received, and further outcomes were identified to be progressed in 2023/24.

In 2017 the Government introduced world-leading legislation that made it statutory for all organisations with 250 or more employees to report annually on their gender pay gap. West Midlands Ambulance Service University NHS Foundation Trust is covered by the Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017 that came into force on 31 March 2017.

These regulations underpin the Public-Sector Equality Duty and required the relevant organisations to publish their gender pay gap data by 30 March 2018 and then annually thereafter, including mean and median gender pay gaps; the mean and median gender bonus gaps; the proportion of men and women who received bonuses; and the proportions of male and female employees in each pay quartile.

The gender pay gap shows the difference in the average pay between all men and women in a workforce. If a workforce has a particularly high gender pay gap, this can indicate there may be a number of issues to deal with, and the individual calculations may help to identify what those issues are.

The gender pay gap is different to equal pay. Equal pay deals with the pay differences between men and women who carry out the same jobs, similar jobs or work of equal value. It is unlawful to pay people unequally because they are a man or a woman.

Differences in gender pay show a demographic pay gap. By taking the average hourly rate for all employees and comparing the difference in that metric for men and women, gender pay reporting is most notable about female representation in certain roles – not whether a man earns more for the same job.

Equal pay is about men and women being paid the same for the same work, while the gender pay gap is about the difference in average hourly earnings.

In 2022, we published the WMAS Gender Pay Gap report as per requirement and developed an action plan to bridge the gap in disparities. Please see action plan in the appendix section. For 2023/24, WMAS has continued to support the Springboard project for women.



## Springboard project for Women - Case Study 1

# Springboard Programme Case Study

Springboard is an award-winning and personal development training programme delivered over three months; it is CPD accredited.

The programme is aimed at women who want to take control, become more assertive, increase their confidence and build themselves a more positive attitude in both their work and home lives.

Springboard empowers women and helps them to enhance their own skills and abilities and challenge power and inequality while also building assertiveness, a positive image, and giving them a voice.

### Why was Springboard Programme delivered to WMAS?

Springboard was offered to demonstrate a visible commitment to the development of women across WMAS, in support of the EDI priorities, Gender Equality and Staff Health & Well-being strategy.

### Has it been successful, and why?

The programme has been successful. To date, over 60 women have completed the programme (Paramedics and non-operational staff)

The programme has inspired and motivated individuals, increasing the number of females who have secured leadership and specialist roles. Others have volunteered to take on additional responsibilities to help women have a voice and to influence policy - Becky Godfrey became the Chair of the Women's Network, and Karina Graham, Co-Chair of the WMAS ONE Network. As a result, of their leadership, more women are involved in the networks and influenced several policies for the Health & Wellbeing of women.

### Feedback from Becky Godfrey - Chair of Women's Network as to how the programme helped them:

I found the Springboard programme really empowering, it gave me insight into how I support my own wellbeing, but the overwhelming factor was meeting other women in our organization and understanding and supporting each other. Following completion of the programme I was asked if I would like to create and chair the Women's Network which I was honored to do. Since then the Network has gone from strength to strength and we are now actively promoting women's issues in the organization and supporting and empowering women across the region.

### Feedback from Karina Graham -Co-Chair of WMAS ONE Network as to how the programme helped them

The knowledge and the confidence that I gained from the programme enabled me to become successful in becoming the Co-Chair of the ONE network. The programme has been instrumental in enabling me to support the Workforce Race Equality Standard with the aim of improving workplace experiences and employment opportunities for BME staff.

  
**West Midlands Ambulance Service**  
University NHS Foundation Trust



As part of our commitment to bridging the gender pay gap and gender equality, the Trust is supporting the Springboard Women's Development Programme - an award winning personal and professional programme designed and developed by women for women. It has been tried and tested in the NHS and beyond and is designed to support women in taking control and making good decisions in life and work.

In the past year, we have continued to offer bespoke development programme for WMAS female staff and is open to transgender women and non-binary people,

Springboard is for women who want to take control, become more assertive, increase their confidence and build themselves a more positive attitude in both their work and home lives.

The programme gives the participants the time to reflect, share and most importantly, set achievable goals for now and the future.

Springboard empowers women and helps them to enhance their own skills and abilities, and challenge power and inequality, while also building assertiveness, a positive image, and giving them a voice.

During the programme, the participants were invited to explore practical ways of learning how to develop their potential by:

- undertaking realistic self-assessment which will help set challenging goals;
- learning communication skills, assertiveness, self- confidence, improving your work/life balance and developing positive skills and attitudes.

WMAS has an active workforce plan in place that has seen the recruitment of over 1600 student paramedics into the workforce since 2013. This programme has been instrumental in changing the demographics of the organisation, as can be demonstrated by recruitment activity where 57.87% women were appointed as of 31 March 2023.

#### ACTIONS TO ERADICATE THE GENDER PAY GAP

The Board of Directors and the senior leadership team are committed to improving our gender pay gap and are looking at a number of initiatives to address this through the action plan which includes supporting a further cohort for women's development programme, Springboard in 2023/24. Please see Action Plan in the appendix section.

## WORKFORCE RACE EQUALITY STANDARD

**Workforce Race Equality Standards (WRES).** The Workforce Race Equality Standard (WRES) was introduced in the NHS in 2015 with an aim to support NHS organisations to close the gaps in workplace experience between White and Black and Ethnic

Minority (BME) staff and to improve BME representation at the Board level of the organisation. The Trust supports and promotes the WRES, encouraging BME staff to reach their full potential through equality of opportunity.

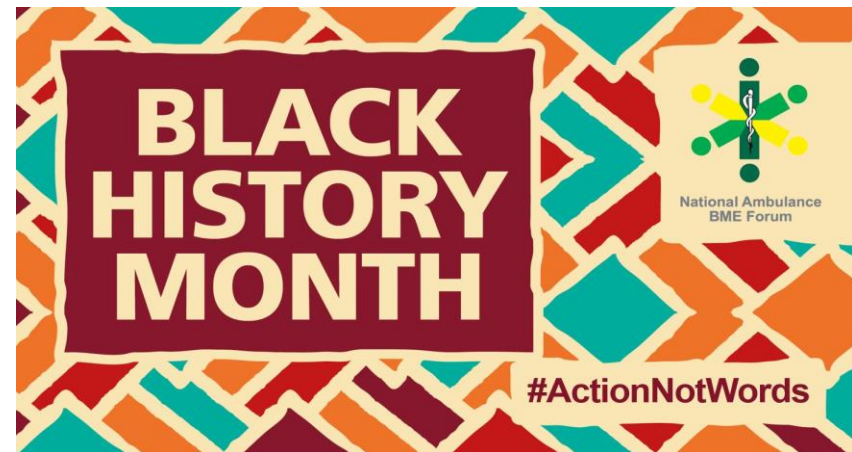
The Trust aims to recruit a workforce that is diverse and representative of our communities. The WRES is a set of metrics which annually is published in conjunction with an Action plan.

In 2022/23, WMAS collated the WRES data and developed a robust action plan to bridge the gaps in disparity. Please see the WRES Data & action plan in the appendix section.

The Trust has actively been working towards the implementation of the action plan and has notable successes despite the challenge of COVID 19. The Trust believes that the organisation is going in the right direction with an established ONE (BAME) network which has met on a regular basis throughout 2022/23.

### **West Midlands Ambulance Service: Workforce Race Equality Standard - Areas for Improvement**

This is the second year that the national Workforce Race Equality Standard (WRES) team has produced a detailed report on each Trust highlighting areas of improvement needed and identifying where Trusts have done well. The purpose of this exercise is to help the Trusts identify priority areas for improvement. The current reporting year for the purposes of this section of the report is 2022.



A maximum of three high priority areas for improvement have been identified for the WMAS as follows:

<b>High priority areas for improvement within the Trust (to a maximum of three):</b>
Indicator 1: 6 harassment, bullying or abuse from staff in last 12 months against BME staff
Indicator 7: belief that the trust provides equal opportunities for career progression or promotion amongst
Indicator 8: discrimination from a manager/team leader or other colleagues in last 12 months against BME staff

**Action:** Specific action for Diversity and inclusion lead to share the findings with recruitment, OD and HR to review current work being undertaken to address this disparity which will be reflected in 2023/24 WRES action plan.

<b>Areas of best performance within the Trust (to a maximum of three):</b>
Indicator 1: Career progression in clinical roles (lower to middle levels)
Indicator 9: Board representation from BME backgrounds, including voting members is higher than the population WMAS serves and also higher than the ethnicity staff profiles overall.

Please note, these areas of best performance are intended to highlight potential examples of good practice that could be further built upon within the organisation, and also shared with other organisations. Nonetheless, there may remain the need for further improvement in these indicators. The WRES team will analyse for and look to celebrate areas where good performance is maintained or further improved, year-on-year.

## **Conclusion**

The national WRES team identified three areas that the Trust should look towards setting specific actions to address for improvement. However, it must be noted that there are areas where the Trust has performed well as indicated in this summary. It should be noted that the Trust has been working towards the implementation of several action plans including the WRES action plan in 2022/23. These action plans have been actively monitored for progress, quarterly, at the Diversity and Inclusion Steering Group (DISAG). The outcome of the WRES data (to be published later in 2023) will give the Trust further information on how well the Trust has done in the past year and areas for further improvement.

This is a challenging time for everyone; however, it presents us with even more reason to ensure we are living the principles of equality and inclusion in all that we do, and WMAS will continue to progress the WRES and WDES work within WMAS.



**Introduction**

The main purpose of the Equality Delivery System is to help local NHS organisations, in discussion with local partners including local people, review and improve their performance for people with characteristics protected by the Equality Act 2010. By using EDS3 2022, NHS organisations can also be helped to deliver on the Public Sector Equality Duty (PSED).

The EDS provides a way for the organisation to show how it is doing against the three domains (they are called goals in the EDS2 framework)

1.	Domain 1: Commissioned or provided services
2.	Domain 2: Workforce, Health and Well-being
3.	Domain 3: Inclusive Leadership

In 2021/22, WMAS delivered on Goal 1 of the EDS2 framework which focused on the Procurement service. In previous years, WMAS considered and assessed all four goals and published the outcomes in the Annual Equality Report. The EDS3 2022 is a new leaner framework. The 4 ‘Goals’ have now been replaced with 3 ‘Domains’.

As this is a transition year for the implementation of the EDS3 2022, the Equality and Inclusion leads across Black Country ICB agreed that for 2022/23 the provider organisations would concentrate on Domain 1: Commissioned and Provided services. Two areas were initially chosen for assessment and grading however it was later decided by the ICB to assess one area. That being the PALS service. There are several benefits with this approach as follows:

- 1) The new approach is more focused and a joint EDS assessment across the system will allow greater collaboration and learning from best practice
- 2) Setting realistic goals and action plans which lead to transformational change
- 3) Making EDS work as a tool to effect organisational change, as it was originally intended, as opposed to a tick box exercise.

## Domain 1: Commissioned and Provided Services – Outcomes

Domain 1 will be completed as a system and Black Country ICB will be coordinating the assessment and grading. The expectation from WMAS will be to send evidence against the service areas in a timely fashion when requested. The planned completion of the EDS3 2022 assessment was scheduled for March 31, 2023. As this is a transition year of the implementation of the EDS3 2022 framework, WMAS, along with the majority of the system partners will only be doing Domain 1 and from 2023/24 organisational Trusts will complete Domain 2 &3 individually and Domain 1 will be completed at a system level.

EDS 3 2022 will be fully operational for reporting year 2023/2024 where all domains will be assessed and graded. There are essentially four outcomes for Domain 1 as follows:

<b><i>Domain 1: Commissioned or provided services</i></b>
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

### What did we do?

WMAS agreed to partner up with Black Country ICB and undertake a joint assessment on Domain 1 of the framework – Commissioned and Provided services. The previous EDS2 framework has now been being phased out. For 2023/24, the Trust has been working with Black Country ICB and a joint assessment was planned to take place in June 2023. WMAS submitted all the available evidence for Domain 1 in a timely fashion to Black Country ICB. However, there was later some amendments to this schedule with the ICB acknowledging that it is proving logistically difficult to do a joint assessment and that a slightly different path would be followed. It was therefore agreed that individual Trusts will undertake a self-assessment with it being peer reviewed for verification. The next annual report will highlight the outcomes of the assessment and any actions that need to be taken. It should also be noted that the originally planned 2 services to be assessed were reduced to one in this transition year and now we will be only reporting on the outcome of the PALS service.

### Analysis and grading

The local assessment team went through the evidence, and it was observed that there were areas where the Trust was doing really well whilst areas for improvement were also identified. After assessing and analysing the evidence, the panel decided collectively that the service had elements which still needed further development. The evidence also found that certain elements of the service had met the **Achieving** grade.

It was therefore decided, after much deliberation and discussion that the service would be graded as **Developing**. It was also acknowledged that with an effective action plan the service could move from **Developing to Achieving** over the next 24 months, provided the elements within the action plan were delivered.

#### **What difference did we make?**

The EDS assessment has enabled the Trust to identify potential gaps in access to service. The recommendations in this report will be reviewed in 2024/25 enabling the service to move from a grading which is **Developing** to one which is **Achieving**. This will ensure that the PALS service is equitable and accessible to all. An action plan will be developed and agreed with the stakeholder in 2023/24 to progress on the gaps identified.

#### **What were the keys to our success?**

In order to get this project off the ground, collaborative working internally with colleagues at WMAS and with Black Country ICB (who approved the approach in the application of the EDS3 was crucial as evidence gathered would be shared for external scrutiny and learning from best practice. By analysing the PALS service and establishing a subsequent action plan (to be developed), key gaps have been addressed which will ensure that the PALS service is one which takes into account and is accessible to all that require its services.

## WMAS STAFF NETWORKS and CHAPLAINCY SERVICE

We have extended our Chaplaincy service through recruitment of Imam Asad who will be working in partnership with our existing Chaplain Rev. Vanetta. The latter has been part of WMAS Trust for a number of years providing valuable support to staff. The Chaplaincy has been further strengthened by having Imam Asad on board and the service was launched in March Ramadan 2023. A grand iftar (breaking of Muslim fast) took place in March 2023 where the Chief joined in in the celebrations. It was an opportunity to learn about different faiths and ask questions whilst celebrating the opening of the fast. We continue to increase our Chaplaincy service to support the diverse faiths of our workforce, we have recently appointed a Sikh Chaplain and will go on to expand our chaplaincy services further.

This year all staff networks have been assigned an Executive Sponsor as well as a HR Manager to act as a buddy. These additional resources will be able to assist the network chairs by providing professional support and guidance to them as chairs as well as to the networks as a whole that they support.



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## 1. PROUD AT WMAS:



Our LGBT+ Network is a well-established network within the Trust who through their inclusive ethos are bringing together LGBT+ staff, those who support their colleagues and those who want to learn more about and tackle health inequalities & stigma that LGBT+ communities still face today. Through a supportive local and national forum, they share best practice, continuing professional development opportunities and awareness events such as for LGBT History Month as well as working with the Trust to consult members in the development of policies, procedures and training to support our staff as individuals as well as improving the care we provide to our patients.

The Network communicates with our staff and its members through multiple platforms, including Microsoft TEAMS, Facebook, and email to improve engagement as well as with their followers on Twitter where they share upcoming events, new development opportunities and the exciting work that they do with the wider public which serves to improve relations between the ambulance service and the LGBT+ community and the wider public. We have also attended local LGBT+ events including Birmingham Pride where over 50 of our staff join colleagues from other emergency services and

the wider NHS to provide a Tri-Service approach to engaging with the community and promoting the ambulance service as a diverse and inclusive place to work.

As a contributing committee member of the National Ambulance LGBT+ Network who bring together representation from each NHS Ambulance Trust to coordinate best practice, activities and contribute to core objectives our network have supported our staff to attend the National Ambulance LGBT+ Network Annual Conference each year which is an opportunity for professional development, sharing best practice and networking with colleagues from around the country. This platform has seen us contributing to the development of a Trans Toolkit available from CPDme, the Trans 'Z' card available to staff across our organisation and other CPD aimed at improving care to patients living with HIV which is available to staff across the country and brings a unified standard to the care that we provide.



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## 2. ONE NETWORK: THE BME GROUP

The network is becoming well-established, have Terms of Reference and have elected a staff committee. Members receive regular updates and are able to engage with the network through a number of mechanisms, including WhatsApp, twitter, and email as well as in person and by phone.

The group is represented on the National BME Ambulance Forum with the work chair and the WMAS EDI Lead, being members of the management committee.

The network has gone through a transition over the last two years with two co-chairs elected. The network has worked closely with external partners and has made key contributions in the resource created for BAME members and allies of the Trust. Black History Month 2022 was celebrated across the Trust including weekly articles going into the organisations weekly brief with the aim of educating, learning and celebrating past and present contributions. The network have a number of achievements to look back on and moving forward as follows:

- The network is building in terms of members and we are continuing the process of recruiting more members.
- We have actively sent information to IT to help build a more informative ONE network intranet page and remove some outdated and isolating Information.
- Have successfully completed two independent ONE Network drop-in sessions. With the next one booked in for the 8<sup>th</sup> June at Erdington Hub alongside the health and well-being roadshow.
- Have completed some successful and fantastic community events (KG) with further events booked in 2023/24
- We have secured merchandise (pens, lanyards and badges) and a ONE Network banner which we are now taking out with us to events.
- In 2023/24 the network will be supporting the development of the anti-racism charter.
- Going forward the network is working towards more events and community engagements alongside building the network.



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### 3. WOMEN'S NETWORK

The Women's network is now well-established group having had the inaugural launch in March 2022 on the same day the celebration of the International Women's Day. A chairperson was elected and members receive regular updates and are able to engage with the network through a number of mechanisms. Although a relatively new network, it has already been instrumental in shaping the Gender Pay Gap action plan, which is monitored by the group and has helped coordinate the Springboard initiative for women.

- Network event held on 16<sup>th</sup> March 2023, full day event, good uptake and further membership gained.
- Vice Chair and social media secretary appointed, Sonia Bhattle and Louise Jones, meetings held to plan further events.
- Springboard cohort commenced; guest speaker presentation completed.
- Internet page currently being built
- Save the date 10<sup>th</sup> August – further network day event currently being planned for 2023/24.
- AACE National Network meeting attended.
- Gender Pay gap action plan updated and published for 2023/24.
- Roadshow planned with HR to promote free sanitary products in 2023/24



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### 4. DISABILITY, CARERS AND ADVOCATES NETWORK (DCA)

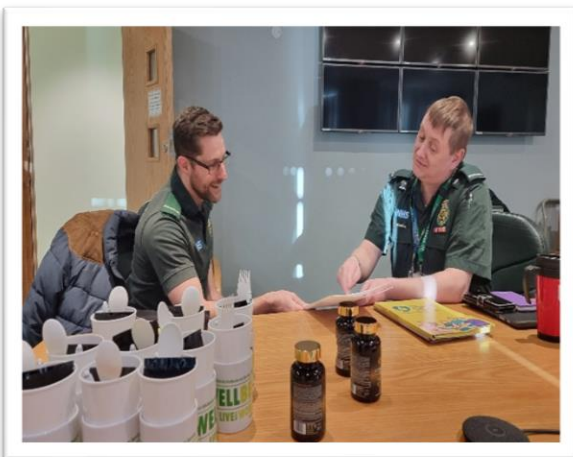
The Disability, Carers & Advocates in brief the DCA is the identifying name for the West Midlands Ambulance Service network for all staff who have a Disability, are a Carer or would act as a supporting Advocate for either party. DCA was launched in 2019 and has grown in membership very quickly with over 50 members.

The purpose of this group is:

- Is to promote a positive approach to Disability & Carers responsibilities
- To address issues, topics, that have arisen
- To provide best practice in terms of shared knowledge and understanding for the benefit of all staff.
- Creating a supportive, nurturing and inclusive environment where all members of staff with differing abilities are respected and acknowledged for their contribution.







**Membership** is currently stable with members predominantly at Millennium Point, Navigation Point and Tollgate. The network is keen to reach out to all staff and board members with disabilities (both obvious and hidden), caring responsibilities or who will be advocates for these groups. Meetings have mainly been online via Teams which seems to have worked well and allowed staff from other locations to join more easily, with the first face to face meeting in three years at MP just before Christmas.



### **Disability History Month (DHM)2022.**

A series of articles were published in the weekly briefing throughout the month. A Disability History Month/Health and Well-being event was held at Millennium Point at the end of the month. The network engaged with many staff to promote the

network, as well as health and carers passports. Several staff were signposted to internal or external sources of help and advice. A similar event in DHM this year is scheduled, possibly at Tollgate to allow outreach to a different group of staff.



In 2023/24 the network will have its own page on the Intranet to improve accessibility and interaction for all staff. Meetings will continue to use teams, however the face-to-face meeting in December took a hybrid approach as some members could not attend in person but could still join in.

### **Case Study 2: Disability – Health Passport**

This year the Trust launched both a Health and Carer's Passport Scheme. The passports allows individuals to document their needs and support they may require in the workplace, this enables them to have an effective conversation with their managers to discuss and agree the support to be implemented.

The case study below is based on a real case and demonstrates how solution-based interventions can help staff and management understand the needs of staff leading to better working conditions, less days of sickness, well led and motivated staff.

# Health Passport Case Study

Health passports allow individuals to record details about their disability, health condition or learning disability. This case study outlines how a health passport can benefit an individual in the workplace by making a few reasonable adjustments to their role and environment.

**Job Category:** Admin / Desk Role

## What led to the health passport being completed:

A health passport was implemented during a welfare meeting between the individual and their line manager, following multiple short term episodes of sickness and a prolonged period of sickness absence. During the welfare meetings, it became apparent that this member of staff had multiple health conditions that may require further support and/or adjustments in the workplace.

## Has it been successful and why?:

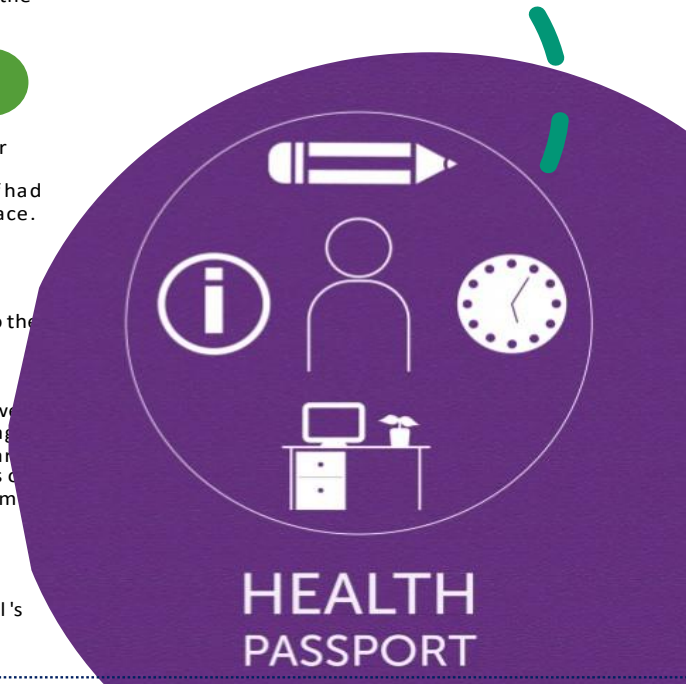
As a result of the health passport being completed, a number of adjustments have been made to support this individual in the workplace. These adjustments include: additional support for dyslexia, a new office chair which is tailored to support the individual's needs, and a referral to the individual's local GP for a hearing test.

## Feedback from the individual; how has the passport helped them:

The health passport was beneficial in helping the individual identify the areas of support that were required. This document breaks down each aspect of work into separate categories to encourage individuals to really think about each aspect of their role and identify where any adjustments are needed. Without this document, many individuals may continue to struggle with some aspects of their work, as they are unaware that reasonable adjustments may be available to support them.

## Any feedback/comments from the manager; how has it helped them?:

The health passport has enabled the line manager to understand the individual's needs and be better equipped to support them moving forwards. With reasonable adjustments in place, the employee's health should now improve which will also have a positive impact on the individual's sickness absence levels and the staffing levels across the team.



The sickness absence manager training packages have been refreshed this year to include greater emphasis and education about reasonable adjustments and the support that can be explored to people who have long term health conditions and/or disabilities. The training takes managers through practical exercises to challenge their thinking process and to help them understand from a different perspective. The sickness policy is due for review in Summer 2023, the aim being to rebrand the policy to have a greater emphasis on a supportive and compassionate approach including a stand-alone appendix to help managers understand their responsibilities in relation to supporting individuals with disabilities in the workplace.

## 5. WMAS Military Network

The Military Network provides a support group for staff who have an affinity with the armed forces community. This includes those who have served (veterans), those currently serving as reservists, Cadet Instructors, family members of those serving and everyone else who has an interest in the armed forces community. The network aims to:

- Support staff to be able to engage in military service (Reservists and Cadet Leaders)
- Create an inclusive community of staff who have military experience, connections to the military or a general interest with no barriers to membership
- Celebrate the current and past military service of WMAS staff
- Provide signposting for further support and welfare to military veterans
- Raise awareness across the trust of issues faced by military veterans and offering of signposting support for patients
- Support military service leavers in their transition into working for WMAS
- Support Armed Forces Charities and organisations

November is a busy month for the network supporting Remembrance with a number of events and parades across the region.

The network was relaunched in early 2023 and a committee has now been put in place and a new Teams site setup as a central point of information and interaction.



June was a busy month with both Reserves Day and Armed Forces Day which saw reservists (non-patient facing) wearing uniform to work and a host of Armed Forces Day events across the region.

Looking ahead the network will focus on supporting Veterans and the introduction of Veteran Champions on hubs/trust sites as a point of contact/support. We will look at what other support we can offer these individuals and any other relevant training.

The Network continues to engage with military organisations, NHS employers and other key stakeholders to ensure we provide the best support our staff and patients.



## DIVERSITY & INCLUSION STEERING GROUP (DISAG)

The Trust supports the DISAG group with representation from a diverse range of staff from across the Trust who are representative of the various roles and departments within the Trust group, including network chairs, staff side representatives, the group is chaired by the People Director. The DISAG group meets every three months to consult and drive the Diversity & Inclusion agenda forward. Action plans emanating from DWES, WRES and Gender Pay Gap reports are monitored at DISAG for progress.

## EXTERNAL PARTNERS

### NADG [NATIONAL AMBULANCE DIVERSITY GROUP]

The Trust is represented on the national group and attends the meetings regularly. It is a forum of shared knowledge and expertise which drives the Equality & Diversity agenda at national level.

### NLGBT [NATIONAL LESBIAN GAY BISEXUAL TRANSGENDER] AND NATIONAL BME AMBULANCE NETWORK

Both groups have developed over the last few years with an annual conference every year and all ambulance services march together at Pride. WMAS hosted the conference in 2019.

### REGIONAL EQUALITY FORUM & INTEGRATED CARE SYSTEM/BOARD (ICS/B)

The Trust are members of the regional Equality forum and ICS/B which allows all Trusts to meet and share best practice and discuss issues which relate directly to the region.

### NATIONAL & REGIONAL RESERVIST FORUM

The Trust are members of both the local and national group and support Armed Forces Day, Reservist Day and Remembrance Day.

### NHS STANDARD CONTRACT

The NHS Standard Contract is mandated by NHS England for use by NHS commissioners to contract for all healthcare services other than primary care. This prohibits discrimination based on the nine protected characteristics set out in the Equality Act 2010 and is a mutual obligation on the commissioner and on the provider. Service Condition 13 relates specifically to 'Equality of Access and Equality and Non-Discrimination.' WMAS has provided timely assurance reports to commissioners as part of the local agreement.

This means that the Trust must:

- Have regard to the need to reduce inequalities between patients in access to health services and the outcomes achieved (s. 13G and s.14T);
- Exercise its functions with a view to securing that health services are provided in an integrated way, and are integrated with health-related and social care services, where they consider that this would improve quality and reduce inequalities in access to those services or the outcomes achieved (s13N and s.14Z1);

## CULTURAL CALENDAR 2023

The Equality and Inclusion department teamed up with the Health and Well-being team and collaboratively produced a WMAS cultural calendar for 2023. This innovative piece of work will now be shared with the networks and staff so that events can be highlighted and celebrated in a timely fashion during the year. The calendar has been shared with senior management so that employee requests to be absent due to religious and cultural commitments should be dealt with sympathetically by departments provided this has been discussed and agreed with their line manager. Staff wishing to observe religious festivals and holy days will have the opportunity to discuss and negotiate with their managers in advance. Managers in turn have been encouraged to consider sympathetically requests for annual leave or flexible work schedules from staff wishing to participate in religious and cultural festivals and to be prepared to make reasonable adjustments to working arrangements as long as they don't cause undue disruption.



## CONCLUSION

Despite the challenges presented in the last couple of years with the pandemic, winter pressures and significant hospital handover delays, the Trust has achieved a number of milestones as contained in this report and met the PSED duties. There is much to be proud of and the Trust is committed to achieving further progress on all areas of Diversity & Inclusion, and we will continue to strive to make the environment more inclusive for both patients and staff through our engagement strategy.

The Trust now incorporates its duties under the PSED of the Equality Act 2010 within the annual report. The Workforce Race Equality Standard and Action Plan, Workforce Disability Action Plan, Gender Pay Gap report and EDS3 2022 are published on the Trust web site in their own right. However, outcomes from EDS3 are also included in this report as is workforce data.

## PRIORITIES FOR 2023/24

The following list describes the areas which the Trust will prioritise and will form part of the work plan for 2023/24:

- 1) Development of Action Plan based on findings from the WDES & WRES data analysis.
- 2) Continued work with ICS/ICB Equality and Inclusion Group
- 3) Continued delivery on the Equality Objectives including Board development training.
- 4) Continued Implementation of Equality Strategy for the Trust 2021 - 2025
- 5) Continued work on Workforce Race Standard and Implementation of Disability Workforce Equality Standard
- 6) Work in partnership with colleagues across the Ambulance sector including the National Ambulance alliance - AACE.
- 7) Training for staff on the Equality Impact Assessment process.
- 8) Increased engagement and recruitment campaigns with seldom heard communities should be a focus in 2023/24 and beyond - this will help the Trust to attract diverse portfolio of staff.
- 9) Work on the EDS3 2022 assessment and grading for all domains for 2023/24
- 10) Provide timely reports to ICB and commissioners on Equality compliance.
- 11) Work on the Health Inequalities agenda
- 12) Launch of a Trust anti-racism charter and associated education and awareness package launched.
- 13) Review of the Trust's sickness absence policy to have greater emphasis on supporting people with long term conditions and disabilities in the workplace.
- 14) Implementation and launch of the Diversity Champions for the Trust.

Appendix 1 – RECRUITMENT DIVERSITY PROFILE

Recruitment Diversity Profile 22/23

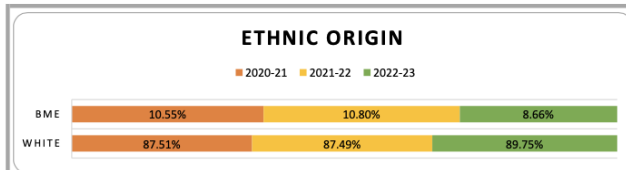
Recruitment Activity Monitoring 2022/23 (April 22 to March 23)									
Recruitment Activity	Number of Applications	% of applications	Shortlisted	% Shortlisted from applications	% Shortlisted from total shortlisted	Appointed	% Apptd from number of applications	% Apptd from number shortlisted	% Apptd from total appointed
<b>Protected Characteristic</b>	<b>5,038</b>		<b>3,241</b>	<b>64.33%</b>		<b>648</b>	<b>12.86%</b>	<b>19.99%</b>	
<b>Ethnic Origin</b>									
White	3,907	77.55%	2,594	66.39%	80.04%	534	13.67%	20.59%	82.41%
BME	1,066	21.16%	608	57.04%	18.76%	102	9.57%	16.78%	15.74%
Undisclosed	65	1.29%	39	60.00%	1.20%	12	18.46%	30.77%	1.85%
<b>Gender</b>									
Female	2,860	56.77%	1,870	65.38%	57.70%	375	13.11%	20.05%	57.87%
Male	2,145	42.58%	1,347	62.80%	41.56%	266	12.40%	19.75%	41.05%
Undisclosed	33	0.66%	24	72.73%	0.74%	7	21.21%	29.17%	1.08%
<b>Age</b>									
Under 24 years	1,448	28.74%	860	59.39%	26.54%	161	11.12%	18.72%	24.85%
24-44 years	2,619	51.98%	1,709	65.25%	52.73%	361	13.78%	21.12%	55.71%
45-59 years	830	16.47%	576	69.40%	17.77%	107	12.89%	18.58%	16.51%
60-74 years	126	2.50%	90	71.43%	2.78%	18	14.29%	20.00%	2.78%
75+ years	0	0.00%	0	0.00%	0.00%	0	0.00%	0.00%	0.00%
Undisclosed	15	0.30%	6	40.00%	0.19%	1	6.67%	16.67%	0.15%
<b>Disability</b>									
No	1,381	27.41%	2,920	211.44%	90.10%	579	41.93%	19.83%	89.35%
Yes	2,047	40.63%	252	12.31%	7.78%	59	2.88%	23.41%	9.10%
Undisclosed	106	2.10%	69	65.09%	2.13%	10	9.43%	14.49%	1.54%
<b>Religious Belief</b>									
Atheism	1,381	27.41%	859	62.20%	26.50%	164	11.88%	19.09%	25.31%
Christianity	2,047	40.63%	1,396	68.20%	43.07%	309	15.10%	22.13%	47.69%
Other*	1,127	22.37%	691	61.31%	21.32%	116	10.29%	16.79%	17.90%
Undisclosed	483	9.59%	295	61.08%	9.10%	59	12.22%	12.41%	9.10%
<b>Sexual Orientation</b>									
LGBT	449	8.91%	299	66.59%	9.23%	48	10.69%	16.05%	7.41%
Heterosexual	4,417	87.67%	2,843	64.36%	87.72%	577	13.06%	20.30%	89.04%
Undecided	28	0.56%	14	50.00%	0.43%	4	14.29%	28.57%	0.62%
Undisclosed	144	2.86%	85	59.03%	2.62%	19	13.19%	22.35%	2.93%
<b>Marriage &amp; Civil Partnership</b>									
Civil Part	197	3.91%	117	59.39%	3.61%	26	13.20%	22.22%	4.01%
Married	1,376	27.31%	901	65.48%	27.80%	171	12.43%	18.98%	26.39%
Other	3,306	65.62%	2,111	63.85%	65.13%	425	12.86%	20.13%	65.59%
Undisclosed	159	3.16%	112	70.44%	3.46%	26	16.35%	23.21%	4.01%

\*Incs: Buddhism, Hinduism, Islam, Jainism, Judaism, Sikhism and Other

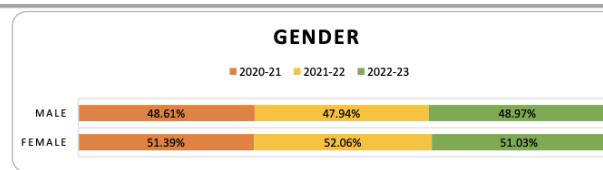
Source: NHS Jobs

## Appendix 2 – WORKFORCE DIVERSITY PROFILE

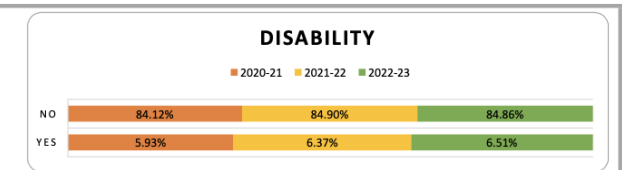
Workforce Diversity Profile 2020-21, 2021-22 and 2022-23 - Profile



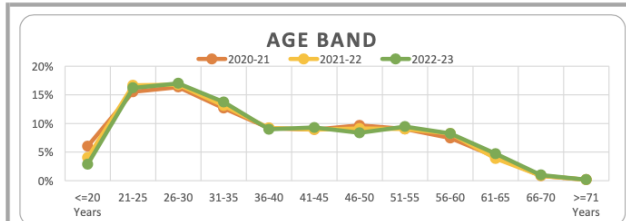
Ethnic Origin	2020-21		2021-22		2022-23	
	Headcount	% Headcount	Headcount	% Headcount	Headcount	% Headcount
White	6777	87.51%	6827	87.49%	6325	89.75%
BME	817	10.55%	843	10.80%	610	8.66%
Not Stated	150	1.94%	133	1.70%	112	1.59%
<b>Grand Total</b>	<b>7744</b>	<b>100.00%</b>	<b>7803</b>	<b>100.00%</b>	<b>7047</b>	<b>100.00%</b>



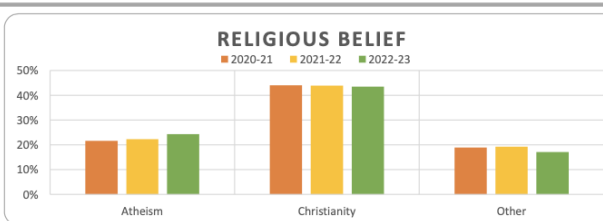
Gender	2020-21		2021-22		2022-23	
	Headcount	% Headcount	Headcount	% Headcount	Headcount	% Headcount
Female	3980	51.39%	4062	52.06%	3596	51.03%
Male	3764	48.61%	3741	47.94%	3451	48.97%
<b>Grand Total</b>	<b>7744</b>	<b>100.00%</b>	<b>7803</b>	<b>100.00%</b>	<b>7047</b>	<b>100.00%</b>



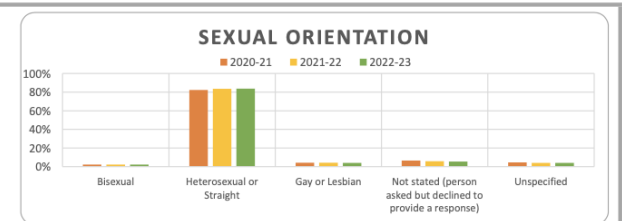
Disability	2020-21		2021-22		2022-23	
	Headcount	% Headcount	Headcount	% Headcount	Headcount	% Headcount
Yes	459	5.93%	497	6.37%	459	6.51%
No	6514	84.12%	6625	84.90%	5980	84.86%
Not Declared	760	9.81%	663	8.50%	576	8.17%
Unspecified	10	0.13%	15	0.19%	26	0.37%
<b>Grand Total</b>	<b>7744</b>	<b>100.00%</b>	<b>7803</b>	<b>100.00%</b>	<b>7047</b>	<b>100.00%</b>



Age Band	2020-21		2021-22		2022-23	
	Headcount	% Headcount	Headcount	% Headcount	Headcount	% Headcount
<=20 Years	466	6.02%	314	4.02%	202	2.87%
21-25	1203	15.53%	1301	16.67%	1142	16.21%
26-30	1266	16.35%	1309	16.78%	1198	17.00%
31-35	982	12.68%	1024	13.12%	969	13.75%
36-40	710	9.17%	719	9.21%	632	8.97%
41-45	691	8.92%	696	8.92%	654	9.28%
46-50	749	9.67%	711	9.11%	589	8.36%
51-55	699	9.03%	705	9.03%	665	9.44%
56-60	577	7.45%	642	8.23%	581	8.24%
61-65	321	4.15%	301	3.86%	332	4.71%
66-70	66	0.85%	68	0.87%	70	0.99%
>=71 Years	14	0.18%	13	0.17%	13	0.18%
<b>Grand Total</b>	<b>7744</b>	<b>100.00%</b>	<b>7803</b>	<b>100.00%</b>	<b>7047</b>	<b>100.00%</b>



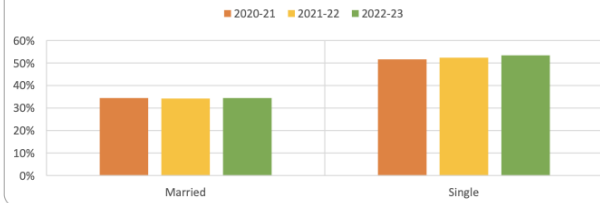
Religious Belief	2020-21		2021-22		2022-23	
	Headcount	% Headcount	Headcount	% Headcount	Headcount	% Headcount
Atheism	1670	21.57%	1736	22.25%	1711	24.28%
Christianity	3408	44.01%	3424	43.88%	3067	43.52%
Other	1461	18.87%	1504	19.27%	1204	17.09%
I do not wish to disclose	857	11.07%	823	10.55%	743	10.54%
Unspecified	348	4.49%	316	4.05%	322	4.57%
<b>Grand Total</b>	<b>7744</b>	<b>100.00%</b>	<b>7803</b>	<b>100.00%</b>	<b>7047</b>	<b>100.00%</b>



Sexual Orientation	2020-21		2021-22		2022-23	
	Headcount	% Headcount	Headcount	% Headcount	Headcount	% Headcount
Bisexual	168	2.17%	173	2.22%	159	2.26%
Heterosexual	6377	82.35%	6513	83.47%	5906	83.81%
Gay or Lesbia	323	4.17%	323	4.14%	288	4.09%
Not stated (p	510	6.59%	459	5.88%	388	5.51%
Other sexual	6	0.08%	7	0.09%	10	0.14%
Undecided	12	0.15%	14	0.18%	15	0.21%
Unspecified	348	4.49%	314	4.02%	281	3.99%
<b>Grand Total</b>	<b>7744</b>	<b>100.00%</b>	<b>7803</b>	<b>100.00%</b>	<b>7047</b>	<b>100.00%</b>

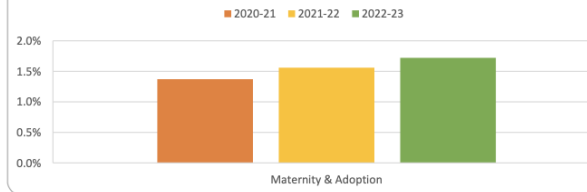


### MARITAL STATUS



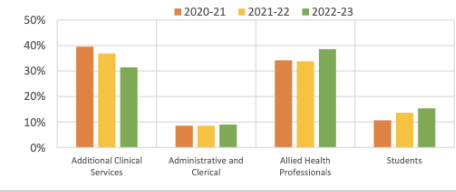
Marital Status	2020-21		2021-22		2022-23	
	Headcount	% Headcount	Headcount	% Headcount	Headcount	% Headcount
Civil Partnership	105	1.36%	123	1.58%	114	1.62%
Divorced	358	4.62%	364	4.66%	341	4.84%
Legally Separated	95	1.23%	90	1.15%	80	1.14%
Married	2666	34.43%	2670	34.22%	2428	34.45%
Single	3998	51.63%	4086	52.36%	3762	53.38%
Widowed	50	0.65%	49	0.63%	44	0.62%
Unknown	472	6.10%	421	5.40%	278	3.94%
Unspecified						
<b>Grand Total</b>	<b>7744</b>	<b>100.00%</b>	<b>7803</b>	<b>100.00%</b>	<b>7047</b>	<b>100.00%</b>

### ASSIGNMENT STATUS



Assignment Status	2020-21		2021-22		2022-23	
	Headcount	% Headcount	Headcount	% Headcount	Headcount	% Headcount
Acting Up	2	0.03%	2	0.03%		
Active Assignment	7483	96.63%	7260	93.06%	6629	94.07%
Career Break	15	0.19%	20	0.26%	14	0.20%
Inactive Not Worked	41	0.53%	39	0.47%	17	0.24%
Internal Secondment	93	1.20%	352	4.51%	260	3.69%
Maternity & Adoption	106	1.37%	122	1.56%	121	1.72%
Out on External Secondment	3	0.04%	4	0.05%	1	0.01%
Suspension	1	0.01%	4	0.05%	5	0.07%
<b>Grand Total</b>	<b>7744</b>	<b>100.00%</b>	<b>7803</b>	<b>100.00%</b>	<b>7047</b>	<b>100.00%</b>

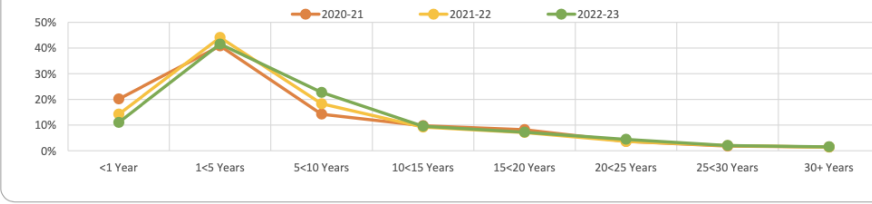
### STAFF GROUP



Staff Group	2020-21		2021-22		2022-23	
	Headcount	% Headcount	Headcount	% Headcount	Headcount	% Headcount
Add Prof Scientific and Technic	58	0.75%	54	0.69%	5	0.07%
Additional Clinical Services	3062	39.54%	2878	36.88%	2214	31.42%
Administrative and Clerical	660	8.52%	669	8.57%	636	9.03%
Allied Health Professionals	2647	34.18%	2636	33.78%	2715	38.53%
Estates and Ancillary Medical and Dental	316	4.08%	303	3.88%	300	4.26%
Nursing and Midwifery Registered	70	0.90%	64	0.82%	42	0.60%
Students	109	1.41%	132	1.69%	55	0.78%
<b>Grand Total</b>	<b>7744</b>	<b>100.00%</b>	<b>7803</b>	<b>100.00%</b>	<b>7047</b>	<b>100.00%</b>

Length of Service Band	2020-21		2021-22		2022-23	
	Headcount	% Headcount	Headcount	% Headcount	Headcount	% Headcount
<1 Year	1559	20.13%	1112	14.25%	776	11.01%
1<5 Years	3160	40.81%	3441	44.10%	2928	41.55%
5<10 Years	1102	14.23%	1428	18.30%	1600	22.70%
10<15 Years	755	9.75%	719	9.21%	673	9.55%
15<20 Years	636	8.21%	554	7.10%	509	7.22%
20<25 Years	280	3.62%	283	3.63%	313	4.44%
25<30 Years	139	1.79%	157	2.01%	142	2.02%
30+ Years	113	1.46%	109	1.40%	106	1.50%
<b>Grand Total</b>	<b>7744</b>	<b>100.00%</b>	<b>7803</b>	<b>100.00%</b>	<b>7047</b>	<b>100.00%</b>

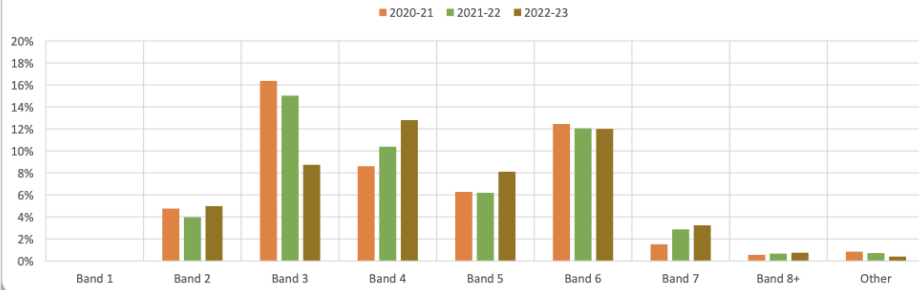
### LENGTH OF SERVICE BAND



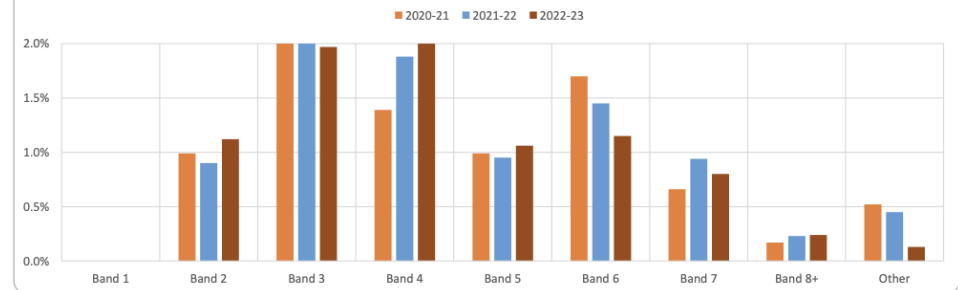
Pay Scale	Female		Male		Female		Male	
	2020-21	2020-21	2021-22	2021-22	2022-23	2022-23	2022-23	2022-23
Band 1	0.00%	0.03%	0.00%	0.01%	0.00%	0.01%		
Band 2	4.76%	7.52%	3.98%	7.39%	4.98%	8.55%		
Band 3	16.36%	7.94%	15.02%	6.82%	8.73%	5.00%		
Band 4	8.60%	7.58%	10.38%	8.84%	12.81%	9.04%		
Band 5	6.28%	6.48%	6.19%	5.64%	8.11%	6.70%		
Band 6	12.46%	14.15%	12.06%	13.52%	12.00%	14.27%		
Band 7	1.52%	2.69%	2.88%	3.44%	3.24%	3.36%		
Band 8+	0.56%	0.99%	0.67%	1.16%	0.75%	1.31%		
Other	0.85%	1.23%	0.72%	1.27%	0.40%	0.75%		
<b>Grand Total</b>	<b>51.39%</b>	<b>48.61%</b>	<b>51.91%</b>	<b>48.09%</b>	<b>51.01%</b>	<b>48.99%</b>		

Pay Scale	White			BME			Not Stated		
	2020-21	2020-21	2020-21	2021-22	2021-22	2021-22	2022-23	2022-23	2022-23
Band 1	0.03%	0.00%	0.00%	0.01%	0.00%	0.00%	0.01%	0.00%	0.00%
Band 2	11.11%	0.99%	0.18%	10.35%	0.90%	0.12%	12.27%	1.12%	0.10%
Band 3	19.71%	4.12%	0.48%	17.62%	3.89%	0.33%	11.56%	1.97%	0.20%
Band 4	14.63%	1.39%	0.15%	17.20%	1.88%	0.14%	19.46%	2.16%	0.17%
Band 5	11.52%	0.99%	0.25%	10.63%	0.95%	0.24%	13.49%	1.06%	0.20%
Band 6	24.26%	1.70%	0.65%	23.55%	1.45%	0.58%	24.60%	1.15%	0.51%
Band 7	3.43%	0.66%	0.12%	5.20%	0.94%	0.18%	5.65%	0.80%	0.16%
Band 8+	1.29%	0.17%	0.09%	1.51%	0.23%	0.09%	1.72%	0.24%	0.10%
Other	1.54%	0.52%	0.03%	1.52%	0.45%	0.03%	1.02%	0.13%	0.00%
<b>Grand Total</b>	<b>87.51%</b>	<b>10.55%</b>	<b>1.94%</b>	<b>87.59%</b>	<b>10.70%</b>	<b>1.71%</b>	<b>89.78%</b>	<b>8.63%</b>	<b>1.59%</b>

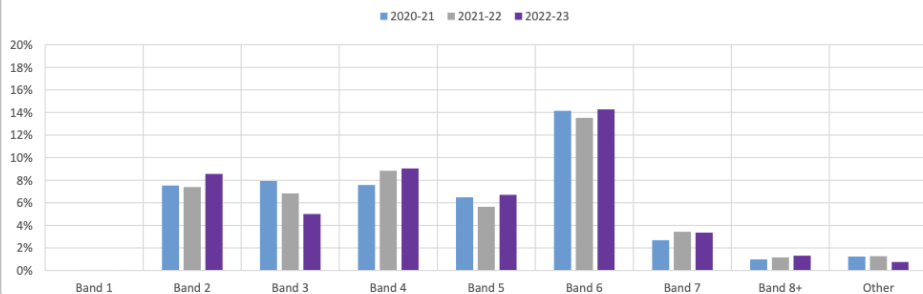
PAY SCALE BY GENDER (FEMALE)



PAY SCALE BY ETHNICITY - BME



PAY SCALE BY GENDER (MALE)



PAY SCALE BY ETHNICITY - WHITE

