

WORKFORCE INCLUSION WORKPLAN 2023 - 2028

This workplan has been developed based on detailed analysis of our workforce data, including our staff survey. In addition, the actions have been informed by a number of reports and audits.

The workforce inclusion plan is a working document, and we expect this to develop and grow as we implement our Inclusion Roadmap. The Roadmap sets out the steps we are taking to embed a systemic approach for inclusion – this will lead to improved data analysis and insight, which in turn will inform the workforce inclusion plan.

The timeframes for the workforce inclusion plan aligns with the Somerset NHS Foundation Trust People Strategy. This is because many of the actions are reflected in the People Strategy. The plan below includes work that is already in progress, as well as additional action needed in response to our data.

The Inclusion Team will support teams and leaders across the organisation to implement and progress the actions outlined in the workplan.

Action	What we know	Strategic and Reporting Links	2024 progress update
Key theme 1: Recruitment			
Procure and embed an Applicant Tracking System (ATS) that enables us to: 1. undertake a detailed analysis of diversity recruitment data at application, interview, and appointment stages. 2. ensure we provide an accessible and inclusive hiring process. 3. Ensure the Disability Confident guaranteed interview scheme works in practice.	There is a lack of reliable or accurate data on our recruitment process – impacting our ability to undertake an analysis of diversity trends. The data we do have, suggests a white candidate is more likely to be appointed in comparison to a BAME candidate. The Disability Confident Audit identified that the guaranteed interview scheme does not work in practice due to issues with our current ATS.	<ul style="list-style-type: none"> - People Strategy - Retain and attract talent - WRES Metric 1 & 2 - WDES Metric 1 & 2 - Disability Confident 	ATS procurement process undertaken in Q3 2023, with new provider identified. Requirements relating to inclusion were defined and embedded as a core part of the procurement process. The new ATS has been implemented and is now live.
Move towards a skills-based model of hiring	Research suggests skills-based hiring is the most effective model for addressing bias in recruitment and ensuring equitable outcomes.	<ul style="list-style-type: none"> - People Strategy - Retain and attract talent - WRES Metric 1 & 2 - WDES Metric 1 & 2 	Diagnostic review undertaken in partnership with RoleMapper. This identified opportunities for improvement across our recruitment process, and

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			recommendations for revamping our process for creating job descriptions, adopting a structured job architecture, and moving to skills-based hiring.
<p>Embed recruitment tools that our inclusive and accessible, for example, this would include, but not limited to:</p> <ol style="list-style-type: none"> 1. Ensure we are equipped to provide reasonable adjustments at every stage of the recruitment process. 2. Exploring alternative methods of selection as well as or instead of a traditional interview. 3. Pilot providing interview questions in advance to all candidates. 	<p>Skills-based hiring, and the new ATS will make significant improvements to our recruitment process, and our ability to embed inclusive practice. However, there will be other mechanisms that we need to explore and embed within our process.</p>	<ul style="list-style-type: none"> - People Strategy - Retain and attract talent - WRES Metric 2 - WDES Metric 2 - Disability Confident 	<p>Improvements have been made to the recruitment process to explicitly promote reasonable adjustments during recruitment.</p> <p>Work is continuing on up-skill hiring managers on supporting these adjustments.</p>
<p>Review and update the SFT recruitment website to reflect diversity and inclusion, including a focus on:</p> <ol style="list-style-type: none"> 1. The diversity of images used 2. Information on accessibility and reasonable adjustments 3. Information on the culture of inclusion at the trust, the progress being made, and colleague networks 	<p>Opportunities for improvement were identified through the Disability Confident Audit, this included promoting the trust as an inclusive employer and providing information on arranging reasonable adjustments throughout the recruitment process.</p>	<ul style="list-style-type: none"> - People Strategy - Retain and attract talent - WRES Metric 2 - WDES Metric 2 - Disability Confident 	<p>The recruitment website was reviewed and updated in Q2-3 2023. The pages are continuously reviewed, but significant improvements have been made, with positive feedback received from colleagues, and positive feedback in the Rainbow Badge results report.</p> <p>Interview questions are being provided in advance and feedback from internationally educated colleagues, and those with disabilities, indicated this has been very helpful in preparing for interviews. We are continuing to assess impact and whether this could become standard practice.</p>
<p>Develop training for recruitment managers that guides them through</p>	<p>While the new ATS will enable more inclusive approaches and techniques for</p>	<ul style="list-style-type: none"> - People Strategy - Retain and attract talent - WRES Metric 2 	<p>The recruitment team has built inclusive practice into current training provided for hiring managers.</p>

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inclusive practice and bias mitigation strategies at every stage.	hiring, there will still be a need for development for hiring managers.	<ul style="list-style-type: none"> - WDES Metric 2 - Rainbow Badge 	A review of training will be undertaken in line with the launch of the new ATS platform.
Key theme 2: Retention and Progression			
<p>Take steps to improve the progression and retention for internationally educated colleagues. This will include, but is not limited to:</p> <ol style="list-style-type: none"> 1. Understand the needs of internationally educated colleagues in different staff groups, including nurses, midwives, AHPs, and doctors. 2. Improvements to the induction and onboarding process. 3. Develop and implement Cultural Competency training for managers of culturally diverse teams. 4. Ensure colleagues are not charged as international students when completing qualifications. 5. Review opportunities to support colleagues applying for their right to remain visa (this comes at a significant financial cost to colleagues). 6. Review of the DAL programme, and opportunities to apply positive aspects to internal training. 7. Opportunities to support internationally educated doctors become consultants. 	<p>The majority of BAME clinical colleagues are employed at band 5 – 48% of colleagues at band 5 are BAME. Representation then falls significantly to 15% at band 6.</p> <p>In comparison to 2022, the representation of BAME colleagues has increased from 14 to 19%. There has also been an increase across most bands, including an increase from 41% to 48% at band 5, and from 12% to 15% at band 6.</p> <p>In medical and dental roles, BAME colleagues are more highly represented in SAS roles (51%), compared to 22% in consultancy roles.</p>	<ul style="list-style-type: none"> - WRES Metric 1 	<p>Several Cultural Competency training offerings have been piloted, with a view to adopting a model to roll out across SFT. The training is intended to support managers, especially those who support internationally educated colleagues.</p> <p>A career development workshop has been developed to provide tools to support global majority colleagues with their career progression.</p> <p>5 SFT colleagues have taken part in the Developing Aspirant Leaders (DAL) programme for ethnic minority nurses and midwives, run by NHS England.</p> <p>Progress to date and matters arising are discussed at bi-annual meetings between senior leadership and co-leads of colleague networks. The Chief Executive is also in attendance at these meetings.</p> <p>Guidance on languages spoken at work has been developed, and continues to be reviewed every 3 months to monitor impact.</p>

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8. Consider how we meaningfully acknowledge and value experience gained overseas, before joining the NHS.			Our annual leave policy was amended following feedback from internationally educated colleagues that they were not being supported to take longer periods of leave to travel home.
Review and improve our reasonable adjustments policy and process.	<p>This was a key finding from the BDO Disability Confident Audit.</p> <p>In 2023, the staff survey showed that almost a third of colleagues with a disability do not have a reasonable adjustment in place to enable them to carry out their work. This could equate to roughly 1200 people without an adjustment in place.</p> <p>A large number of ongoing HR cases and tribunal cases related to disability, and often a lack of reasonable adjustments discussed and when offered they were not all fully considered or understood.</p> <p>We also recognised a significant increase in concerns being raised via the Disability and Neurodiversity Networks.</p>	<ul style="list-style-type: none"> - Disability Confident - WDES Metric 8 	<p>A working group has been in place to undertake a holistic review of the reasonable adjustment process. A new policy has been developed, a central fund for reasonable adjustments created, and training has been held for the HR Advisory Service. We hope to launch the new policy, process and guidance by the end of 2024 / early 2025.</p> <p>Further information, guidance / toolkits and training will be developed in early 2025.</p>
Ensure career conversations enable colleagues to effectively plan for their progression, with development opportunities provided by their manager and centrally via People Services. Ensure this is designed to meet the needs all colleague groups and demographics.		<ul style="list-style-type: none"> - People Strategy – Develop our people 	A Retention Working Group has been established. In its first year, this group has been primarily focussing on the 'Scope for Growth' framework for career support and development. There will be three to four pilot groups, one of which will include internationally educated nurses. Pilot groups have been selected

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			due to identified areas of attrition due to a lack of development or opportunities.
<p>Review our parental leave provisions, with a particular focus on:</p> <ol style="list-style-type: none"> 1. Colleagues are encouraged and feel able to access shared parental and paternity leave. 2. Our policies are explicitly inclusive of LGBTQ+ families. 3. There are clear mechanisms and guidance for keeping in touch and up to date during parental leave. 4. There is a clear process and guidance to support a smooth and successful return from parental leave. 	<p>A relatively low number of colleagues are accessing parental and paternity leave. There were no records of colleagues accessing shared parental leave. However, our BAME colleagues are more likely to access these provisions.</p> <p>Within our Rainbow Badge assessment report, the trust scored 0 out of 5 for the review of policies relating to parental leave, as they were not seen to be explicitly inclusive of LGBTQ+ families.</p> <p>The Women's Network undertook a survey of colleagues who had recently taken parental leave in 2021. This was developed into a series of actions that need to be adopted and reviewed within people services.</p>	<ul style="list-style-type: none"> - People Strategy - Care for our people - Rainbow badge 	
Develop and implement guidance for colleagues who are transitioning. This guidance should include information for the individual and their manager.	<p>As part of the rainbow badge scheme, there was a clear recommendation that the trust finalises and publishes the draft guidance that has been developed. Feedback has been provided by the LGBT Foundation.</p> <p>Anecdotal feedback from colleagues who are transitioning is that there is very little information or advice available, and managers are unsure how best to support.</p>	<ul style="list-style-type: none"> - Rainbow Badge 	<p>An initial outline of this guidance was drafted, and consultation resulted in the guidance being changed to policy.</p> <p>This policy was widely consulted on with trans and non-binary colleagues. It is due to be ratified and released early 2025.</p>
Improve completion rates for demographic data in ESR.	Completion rates are particularly low for disability and sexuality.	<ul style="list-style-type: none"> - All strategies and reports 	A letter to colleagues with missing data in ESR has been drafted sent out.

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	To improve our understanding of trends, we need to improve the completeness and accuracy of our data.		Since 2023, completion rates have improved, which we believe is a result of wider awareness raising of its importance. For example, 20% of colleagues had not answered demographic questions relating to disability in 2022, compared with 15% in 2023.
Ensure there is a consistent and accurate record of colleagues entering formal processes. Review diversity data of colleagues going through processes including: 1. Formal capability processes 2. Formal disciplinary processes 3. Referrals to bodies including the NMC and GMC	Research suggests that bias often impacts the likelihood of underrepresented groups entering formal processes. Initial data from the WRES suggests BAME colleagues may be more likely to be involved in formal disciplinary processes. However, numbers are very small, there are concerns around data accuracy, and that data is not currently reflective of all formal processes in place at SFT.	<ul style="list-style-type: none"> - WDES Metric 3 - WRES Metric 3 - People Strategy - Care for our people 	There is work happening across people services to improve the way data is recorded and reported.
Investigate within-band pay gaps, particularly gaps within senior roles. Analysis might include: 1. Analysis of starting salaries to explore whether the negotiation process establishes a pay gap. 2. Gender and race distribution across banding pay points.	There are some gender and race pay gaps within bands, particularly at band 8D and above, and within several medical and dental roles.	<ul style="list-style-type: none"> - Gender Pay Gap 	
Ensure any future Clinical Excellence Award scheme is implemented and designed to be inclusive, so further pay gaps are not created.	The historic CEA scheme has created a legacy gender pay gap of 30.2%. This compares to the current scheme, where money is shared equally between all consultants.	<ul style="list-style-type: none"> - Gender Pay Gap 	

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<p>Implement mechanisms, including an exit survey, to understand:</p> <ol style="list-style-type: none"> 1. People's reasons for leaving the trust and whether this differs across demographic groups. 2. The length of service when someone leaves, to understand whether the rate of retention and turnover differs across demographic groups. 	<p>Our leavers data doesn't indicate that any demographic group is more likely to leave than others.</p> <p>However, we aren't sure what contributes to people's decision to leave.</p>	<ul style="list-style-type: none"> - People Strategy - Retain and attract talent 	<p>The trust recently introduced a new exit survey, which we hope will enable a detailed analysis and understanding of people's reasons for leaving, and whether this differs by demographic group.</p>
Key Theme 3: Leadership			
Partner with executive team to develop specific inclusion actions and priorities for each member of the executive team.	Research and best practice shows the importance of senior leaders visibly taking accountability for, and implementing, actions relating to inclusion.	<ul style="list-style-type: none"> - People Strategy - Compassionate and inclusive leadership 	<p>Each member of the executive has identified at least 1 inclusion objective. These objectives and progress made, will be communicated to colleagues across the trust.</p> <p>Some members of the executive have also asked their senior teams to develop their own inclusion objective.</p>
Ensure our leadership development programmes build compassionate and inclusive leadership skills across our organisation		<ul style="list-style-type: none"> - People Strategy - Compassionate and inclusive leadership - WDES Metric 6 	An approach to inclusive leadership development was piloted at the senior nurse away days, reaching 300+ colleagues.
<p>Implement mechanisms for collecting and analysing the diversity of key decision-making committees, this may include:</p> <ol style="list-style-type: none"> 1. Trust board 2. Board sub-committees 3. Governors 	WDES and WRES data indicates that some data is missing relating to the diversity of Board. However, the number of unknowns has decreased from 2022 and the number of those with disability has increased.	<ul style="list-style-type: none"> - WRES metric 9 - WDES metric 10 	Board members are continually reminded to update their diversity data.
Key theme 4: Workplace Culture			

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<p>Develop and progress a Trust-wide strategy on violence and aggression, which addresses the variation of experience for colleagues from diverse groups. This strategy will focus on:</p> <ol style="list-style-type: none"> 1. Governance - including our reporting mechanisms, support options post-incident, and understanding our data on experiences of violence 2. Environment – including our approach to providing security, pilots of body cams, and ensuring Trust environments are designed with safety in mind 3. Behaviour – building de-escalation skills and a trauma informed approach across the trust, setting the tone of the behaviours that are expected, and clear processes and support if these expectations are not met. 	<p>Our 2023 staff survey indicated that:</p> <ul style="list-style-type: none"> - BAME and LGB colleagues were more likely to report experiencing physical violence from patients / service users, their relatives or other members of the public. - BAME colleagues were more likely to experience harassment, bullying or abuse at work from other colleagues. - Female, BAME, LGB colleagues were more likely to report experiencing harassment, bullying or abuse from patients or service users. - Disabled colleagues were less likely to report their experience of harassment, bullying or abuse compared to colleagues with no disability. - A lower proportion of colleagues overall reported their experience of harassment, compared to physical violence. 	<ul style="list-style-type: none"> - WRES Metric 5 - WDES Metric 4 - People Strategy - Care for our people 	<p>Dave Thomas (Director of Nursing Strategy and Transformation & Chief Nursing Information Officer) has been appointed as the lead for this project, with senior leaders identified to lead the three workstreams.</p> <p>A working group established within people services continues to progress the 'behaviour' workstream.</p> <p>Radar reports are being monitored by ADPCs and are being discussed in regular governance meetings at Service Group level.</p> <p>The induction workshop for internationally educated nurses is being reviewed, with the aim to include open and honest discussions about racism and other forms of discrimination, both inside and outside the workplace, with information on how to report incidents, raise concerns, and where to seek support.</p>
<p>Develop an Inclusion 101 training box set. These short videos will aim to give people the information they need to feel confident with some of the basics of inclusion. Topics could include, but are not limited to:</p> <ol style="list-style-type: none"> 1. What are pronouns and why are they important? 2. What is a reasonable adjustment and why are they important? 	<p>Conversations with teams and managers has highlighted a need for basic information and training to improve people's confidence to have conversations around inclusion. This information would impact interactions with colleagues and with patients.</p>	<ul style="list-style-type: none"> - People Strategy - Develop our people 	

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3. What is a People Impact Assessment and how do I use the PIA Tool?			
Develop effective, just and restorative policies, processes and guidance relating to bullying, harassment and discrimination.	Within the rainbow badge assessment, SFT scored 1 out of a total 4 points on questions relating to discrimination, bullying or harassment policies.	<ul style="list-style-type: none"> - People Strategy - Care for our people - WDES Metric 4 	<p>The HR Advisory team and the inclusion team are working together to ensure a just and restorative culture is weaved throughout all HR policies.</p> <p>6 just and restorative principles have been developed and approved and will underpin each of the HR policies.</p>
Develop informative and effective policies and processes in relation to sexual safety.		<ul style="list-style-type: none"> - People Strategy - Care for our people 	<p>The 2023 staff survey included a specific question exploring colleague experience of sexual harassment at work.</p> <p>The trust has signed up to the NHS sexual safety charter, which includes a commitment to 10 key actions. A working group has been established to plan the trust's implementation of this charter.</p>
Review our opportunities for speaking up to ensure they are inclusive and colleagues from all demographic groups feel safe to access these options.		<ul style="list-style-type: none"> - People Strategy - Care for our people 	
Review our wellbeing offerings to ensure they are accessible and inclusive, and meet the needs of diverse demographic groups.	<p>Staff survey data highlights that:</p> <ul style="list-style-type: none"> - disabled colleagues, LGB and male respondents were less positive about the trust's action on health and wellbeing. - LGB and disabled colleagues were significantly more likely to report that they had felt unwell as a result of work-related stress. 	<ul style="list-style-type: none"> - People Strategy - Care for our people 	

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Roll out allyship training across SFT		<ul style="list-style-type: none"> - People Strategy - Care for our people 	<p>Allyship training was piloted with the executive late in 2022.</p> <p>Each member of the executive co-delivered these workshops throughout 2023 and 2024, which are open to all SFT colleagues. These sessions continue to run every month.</p> <p>To upskill and promote allyship within the People Services team, all members of the People Services team were offered tailored allyship training, delivered by the Chief of People and Organisational Development and the inclusion team. Over 60 people attended, and the training has received excellent feedback.</p> <p>Bespoke inclusive leadership and allyship sessions have also been held for 300+ senior nurse and AHP colleagues.</p> <p>Allyship training will continue into 2025 with discussions underway regarding a different structure.</p>