The Robert Jones and Agnes Hunt
Orthopaedic Hospital
NHS Foundation Trust

# Public Sector Equality Duty (PSED) Equality, Diversity, and Inclusion Annual Report 2024/25





Improving lives through excellent and innovative care

PSED Published June 2025

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### INTRODUCTION





This report reflects the equality programme of work for staff and patients at, The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust, during this reporting period and how, as a Trust, we have considered and evidenced our Equality Act and Public Sector Equality Duty (PSED) responsibilities. We will continue to advance EDI through a range of initiatives, activities and collaborations, which this report will highlight.

The data covers the period 1<sup>st</sup> April 2024 to 31st March 2025. As part of the Trust's Public Sector Equality Duty (PSED), equality data for staff and patients must be made available to the public via the website, following review and sign off by Trust Board members.

The information is linked to the nine protected characteristics themes under the Equality Act 2010. These nine protected characteristics are:

- Age
- Gender
- Religious belief
- Ethnicity
- Disability
- Marital and Civil partnership
- Pregnancy and Maternity
- Sexual orientation
- Gender Reassignment

Any exceptions have been noted, and this information will be included in the annual Equality and Diversity report.



### PRIMARY LEGISLATION





### **Equality Act 2010 and it's Public Sector Equality Duty (PSED)**

The Public Sector Equality Duty (<u>The Equality Act 2010</u> (<u>Specific Duties</u>) Regulations 2011 (<u>legislation.gov.uk</u>)) came in to force in April 2011 (s.149 of the Equality Act 2010) and public authorities like the NHS are now required, in carrying out their functions, to have due regard to the need to achieve the objectives set out under s149 of the Equality Act 2010 to:

- Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;
- Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it:
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

The Equality Act 2010 (Specific Duties) Regulations 2011 require the Trust to:

- Publish information to show compliance with the PSED, at least once a year.
- Produce Equality Objectives at least every four years.

### **Human Rights Act 1998**

The Human Rights Act 1998 sets out universal standards to make sure that an individual's basic needs as a human being are recognised and met. Public authorities have a mandated duty to ensure they have arrangements in place to comply with the Act. It is unlawful for a healthcare organisation to act in any way that is incompatible with the Act. In practice, this means we must treat individuals with Fairness, Respect, Equality, Dignity and Autonomy – known as the FREDA principles.

Read more about <u>The Human Rights Act | EHRC (equalityhumanrights.com)</u>.



# **Associated Legislation**

#### **Health and Social Care Act 2022**

Statutory obligations on Organisations under the NHS Act 2006 (as amended by the Health and Care Act 2022)

Section 14Z35 of the 2006 Act (as added by section 25(2) of the 2022 Act) imposes the general inequality duty on an Organisation that it: must, in the exercise of its functions, have regard to the need to:

- Reduce inequalities between persons with respect to their ability to access health services.
- Reduce inequalities between patients with respect to the outcomes achieved for them by the provision of health services (including the outcomes described in section 14Z34(3).

### **Modern Slavery Act 2015**

The Modern Slavery Act 2015 applies to all organisations in the United Kingdom with a turnover of £36 million or above. A key element of the Act is the 'Transparency in Supply Chains' provision, which requires businesses above a certain threshold to produce a 'Slavery and Human Trafficking Statement' outlining what steps they have

taken in their supply chain to ensure slavery and human trafficking is not taking place.

Trust Response to the Requirements of the Modern Slavery Act 2015.docx (rjah.nhs.uk).







## RJAH EDI Objectives 2022-2026





# Equality Objectives We will achieve our ambition to be an inclusive organisation (in line with the NHS People Plan) through a clear set of strategic objectives and an action plan which will work across all areas of the Trust. The objectives will build on us creating an exceptional inclusive environment at the RJAH which will continue to improve everyone's experience. Objectives to enable our Trust to; 1 Tackle and remove all forms of discrimination in our workplace and for our patients Create an inclusive and healthy RJAH culture through our values Give the workforce a voice to speak up through Staff Network Groups Ensure all our leaders, managers and colleagues can role model in a compassionate and inclusive way Ensure the Equality and Diversity Action Plan delivers on the objectives and outcomes

### Our progress and achievements so far

- Received 52% response for our Staff Survey
- Published WRES, WDES, Workforce Report and Gender Pay Gap report
- Developed EDI mandatory training on e-learning modules
- Used feedback from staff induction to launch a development session in relation to LGBTO+
- Held Staff listening events to help shape this strategy and a platform for staff to share experiences

### How we can grow in this space

- Develop an RJAH EDI pledge
- > Develop communication channels for training offers and networking
- > Support the SAND project (Safe Ageing No Discrimination)
- > Commit to align resources of staff to support the inclusion objectives and actions
- > Create an EDI newsletter
- Develop and grow Trust Staff Network Groups
- Involvement in reverse mentoring
- > Review the EDI elements of our induction process & leadership programme
- > Board Development Sessions

### **EDS2 Domain**

As a Trust we will continue to work to the regulatory NHS measures as required. These are provided in summary below and we will review these against our action plan for the greatest effect on Inclusion at our Trust.

### **National NHS staff survey**

All Trusts are required to undertake the staff survey which is completed during October and November on an annual basis. Feedback can highlight and provide key issues and opportunities, across different teams but also in diverse groups. The staff survey information is used across the Trust in many different ways.

#### **National NHS Frameworks**

The Trust is required to work under the Public Sector Equality Duty (PSED) of the Equality Act 2010. One of these requirements is for the Trust to share the content of this report with the public through our ROH website. This information includes: Workforce Race Equality standards (WRES)

Workforce Disability Equality standards (WDES) standards

Gender Pay gap

**EDS 2 framework** 

### Meeting our public sector equality duty

Under the Equality Act 2010 as a public body we have a general public sector equality duty to:

- Eliminate unlawful discrimination
- Promote equality of opportunity
- Foster good relations between people with different backgrounds

#### **Workforce Race**

### **Equality Standard (WRES)**

Since 2015, all NHS Trusts have been required to collect and publish data on their progress around delivering race equality for staff.



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### **Workforce Disability Equality Standard (WDES)**

Since 2017, all NHS Trusts have similarly been required to collect and publish data on their progress around delivering equality for staff with disabilities and long-term health conditions.

### **Gender Pay Gap**

The mandatory gender pay gap analysis requires us to report workforce data across gender and pay bands and develop an action plan to address any gaps or over/under representation.

#### **Equality Delivery System**

The Trust utilises the Equality Delivery System 2 as a performance improvement framework to deliver and monitor our progress against our statutory requirements. NHS providers are expected to use EDS2 to help them improve their equality performance for patients, communities and staff, as well as helping them to meet the Public Sector Equality Duty.

### The EDS2 has four goals which are:

- Better health outcomes
- Improved patient access and experience
- A representative and supportive workforce
- Inclusive leadership

		EDS FY2023/2024 - Summary Scores		
Doma	ain	Description	2023/2024 Rating	2023/2024 Score
omain One - S	ervice Lir	10.		
	1A	Patients & Service Users have access to the Service.	Developing	1
	1B	Individual Patients/service users health needs are met.	Achieving	2
tcome	1C	Patient/service users are free from harm.	Achieving	2
	1D	Patients/service users report positive experience of the service.	Achieving	2
b Score D1				7
main Two - H	lealth and	I Welbeing of Staff.		
	2A	When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions.	Developing	1
>	2B	When at work, staff are free from abuse, harassment, bullying and physical violence from any source.	Developing	1
tcome		Staff have access to independent support and advice when suffering from stress, abuse, bullying, harassment and physical		
	2C	violence from any source.	Developing	1
	2D	Staff recommend the organisation as a place of work and receive treatment.	Achieving	2
b Score D2				5
main Three -	Inclusive	Leadership.		W
		Board members, system leaders (Band 9 and VSM) and those with line management responsibilities routinely demonstrate		
	3A	their understanding of, and commitment to, equality and health inequalities.	Developing	1
		Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and ow		
tcome	3B	they will be mitigated and managed.	Achieving	2
		Board members, system and senior leaders (band 9 and VSM) ensure levers are in place to manage performance and		
	3C	monitor progress with staff and patients.	Developing	1
b Total D3				4
tal Score				16
iai ocore			<u> </u>	Dovolonia

# **RJAH Objectives**

In December 2023, the Board of Directors agreed a set of strategic objectives for the period to 31 March 2028. These are summarised below. In January 2024, the Board also agreed a revised risk appetite statement.

The Board Assurance Framework (BAF) – as the expression of risk to the delivery of the Trust's strategic objectives and statutory obligations is continuously reviewed against the revised objectives, taking account of the updated risk appetite.

The Trust agreed the following strategic objectives:

	RJAH Objective	
1	Deliver high quality clinical services	Р
2	Develop our Veterans service as a nationally recognised centre of	Р
	excellence	
3	Integrate MSK pathways across Shropshire, Telford and Wrekin	Р
4	Grow our services and workforce sustainably	Р
5	Innovation, education and research at the heart of what we do	Р

System partners in Shropshire, Telford and Wrekin have identified four strategic objectives for the integrated care system:

STW System Objective	
1 Improve outcomes in population health and healthcare	Р
2 Tackle inequalities in outcomes, experience and access	P
3 Support broader social and economic development	Р
4 Enhance productivity and value for money	Р



### **Statutory and Mandated Requirements**

The following key reporting tools and mechanisms were used in an annual reporting period:

- NHS Accessible Information Standard
- NHS Equality Delivery System 2023
- Workforce Disability Equality Standard
- Workforce Diversity Profile Report
- Race Disparity Ratio
- RJAH Annual Equality Action Plan
- RJAH Equality Strategy and Objectives
- Gender Pay Gap
- Workforce Race Equality Standard
- PSED Equality Diversity and Inclusion Annual Report
- NHSE EDI Improvement Plan

Throughout this reporting period, we have published legal and mandated information about equality on our dedicated equality webpages and staff intranet pages. We will refresh these webpages and intranet pages as required and review them annually.





### **Commissioning and Procurement**

The Trust procures from a variety of sources and wherever possible it uses Nationally Agreed Framework Agreements. These Frameworks will have been subject to robust procurement processes, including the nationally agreed supplier selection questionnaire, which takes account things such as Modern Slavery, Equality, Diversity & Inclusion in terms of any legislative breaches which may result in the bidder being marked down or rejected. Social Value is also a mandatory requirement in Public Sector Procurement and specific questions will have been included in all Frameworks and can be tailored dependent upon the requirement, based on a set of nationally agreed themes. The Trusts largest contracts are for Orthopaedics which are procured under an NHS Supply Chain Framework.

In a wider context the Equality and Health Inequalities Impact Assessment applies more so to Healthcare Contracting agreements, where the Trust is procuring (or being commissioned) services, none have been required within this reporting period.

### **Equality Health Inequality Impact** and Risk Assessments (EHIIRA)

Equality and Health Inequalities Impact and Risk Assessments (EHIIRAs) are a well- established and embedded tool in the Trust. Using EHIIRAs helps ensure that services, policies and day-to-day functions are fair, accessible and inclusive. Through a process of questions and data analysis, EHIIRAs help to identify gaps and potential risks and highlight opportunities to improve staff and patient, access, experience and outcomes.

EHIIRAs are evidence-based tools, requiring stakeholder engagement. A Stakeholder is an individual or group that has an interest and a say in any decision or activity of an organisation and can include staff, patients, the public, support groups or business partners.

# **Improving Patient Experience and Health Outcomes**



The NHSI Learning Disability Standards for NHS Trusts provide a benchmark against which all trusts can measure their performance in delivering services to people with learning disabilities and autistic people, which in turn drives quality improvement. This is a three-pronged approach:

- Organisational level collection.
- Staff Survey.
- Service User Survey.

This provides a holistic view of the workforce, activity, service models and quality of services provided to people with learning disabilities and autistic people.

The four LD standards are:

- · Respecting and protecting rights.
- Inclusion and engagement.
- Workforce.
- · Specialist Learning Disability Services.

### **Improving Patient Experience and Health Outcomes ... continues**

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Quality Statement Evidence Prompts			Evidence Prompts	Evidence
21. Care provision, integration and continuity	We understand the diverse health and care needs of people and our local communities, so care is joined-up, flexible and supports choice and continuity.	21.1	How does the service make sure that a person's care plan fully reflects their physical, mental, emotional and social needs, including on the grounds of protected characteristics under the Equality Act? These should include their personal history, individual preferences, interests and aspirations, and should be understood by staff so people have as much choice and control as possible.  *(Confirmed duplication with the above prompts)*	Our services cover the complete MSK pathway (physical, mental and social wellbeing) of prevention, assessment, self-care, intervention, treatment and rehabilitation to enable patient independence and an active healthy lifestyle. Patients individual needs are assessed and adjustments are made on the basis of that assessment throughout their pathway. For example; About Me passport (uploaded evidence).  The Trust builds facilities in line with the latest guidance, Health Technical Memorandums and Health Building Notes plus Approved Codes of Practice. As an example, the Trust has installed the 'Changing Places' facility in the main entrance (see link: - https://www.changing-places.org/find?toilet=1950). PLACE covers accessibility for the patient and site user, and regularly includes input from wheelchair users, in line with a high proportion of patients. The Quality Accreditation scheme assess estate and environment and the Trust is also due to launch the 'observe and act' improvement approach using patients and volunteers.  The Trust has transport arrangements in place where appropriate. A non-emergency transport service is provided for patients, both adults and children, who have a medical condition which prevents them from using other forms of transport to travel to and from healthcare appointments. Information is also available via our Trust website: - Non-Emergency Patient Transport - RJAH  To support our patients further there is accessible gym equipment on the Path of Positivity.  Evidence:  Path of Positivity video  Hospital Passport  NEPTS Service  Non Emergency Patient Transport
		21.2	Where the service is responsible, how are people supported to follow their interests and take part in activities that are socially and culturally relevant and appropriate to them, including in the wider community, and where appropriate, have access to education and work opportunities?	The Trust has dedicated Activity Coordinators for Sheldon (medical rehab ward) and MCSI (Spinal Injuries ward), recognising the longer stays of these patients. Sheldon Ward uses the Poppy Lounge, and MCSI has a patient entertainment area. A Play Specialist supports children with a play area, while the Turnour ward (Oswald) has Kates Cabin. These spaces are designed for patients and families to interact. Activity Coordinators and Play Specialists tailor activities to individual needs, and the Trust offers retraining opportunities for spinal injury patients through a Heavy Workshop for rehabilitation and education.  The Trust also collaborates with the local community to offer patient activities, such as canal boat trips for MCSI patients, and events like film nights, BBQs, and quizzes. There is a multi-faith room on-site for patients and staff, and access to support services like Macmillan and the Arthritis Research Campaign. The "This Is Me" passport enhances the patient experience. Additionally, the Trust partners with the 'Stepping Into Work' programme through Telford College, leading to successful employment opportunities within the estates and facilities team.
		21.3	Where the service is responsible, how are people encouraged and supported to develop and maintain relationships with people that matter to them, both within the service and the wider community, and to avoid social isolation?	Visiting changed to open visiting across site, MCSI have tablets in each bedspace for patient use. School in place on Alice ward and evidence of excellent patient education from classes such as joint school. All enable patients to be connected to other patients staff and family/friends. Dining champions exist to support service users so that they do not eat alone. Relatives and carers are encouraged with the consent of the patient to assist with their care for example supportive meal times.  The Trust has invested in environments that replicate and support rehabiliation back into outside environments such as Horatio's garden and activities take place within this area too. Bespoke Sunday worship place for Christian's exists on site. The Trust has employed a Trust chaplaincy and patients have access to other religious and spiratual leaders. Path of positivity is an outside space - accessible gym equipment. The Trust is a member of the Armed Forces Convenant and has a Veterans centre with a support group for both patients and staff.

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# Improving Patient Experience and Health Outcomes ... continues

Next steps for the Trust are to encourage the uptake amongst staff to partake in current data collection.

A task and finish group will be reinvigorated with clear objectives to improve current practices against the three core standards.

The Trust will continue communicating with Apollo team regarding efficacy of alert system Due to the maturity of the current PAS system the Trust have in place, there is no element to allow recording of patients admitted with learning disabilities or autism. There is an upgrade of the system due to be launched in **July 2024**, called Apollo, which will allow for such data to be captured and this will be included in future reporting, to note the number of:

- Adult patients admitted with learning disabilities or autism.
- Children and Young People admitted with learning disabilities or autism.
- Global Minority background patients admitted with learning disabilities or autism.



### **Latest CQC toolkit**

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"We actively seek out and listen to information about people who are most likely to experience inequality in experience or outcomes. We tailor the care, support, and treatment in response to this."

ive		20. Person-centred care	100%
		21. Care provision, integration and continuity	100%
S		22. Providing information	100%
Respon	<b>78%</b> 23. Listening to a	23. Listening to and involving people	100%
		24. Equity in access	50%
	25. Equity in experiences a	25. Equity in experiences and outcomes	100%
		26. Planning for the future	20%

The evidence statement applied within the toolkit is as follows:

"The Trust has completed the EDS2 assessment Domain 1, which has identified areas for improvement regarding inclusivity through the health inequalities working group. The Trust is also exploring whether the sociodemographic profile of patient experience feedback matches that of the health population we serve to understand if there are targeted efforts the Trust needs to undertake."

### **EDS2 Domain 1 - Commissioned or Provided Services.**

	EDS FY2023/2024 - Summary Scores					
				2222 12224		
	Domain Description		2023/2024 Rating	2023/2024 Score		
Domain O	Domain One - Service Line.					
	1A Patients & Service Users have access to the Service. Developing					
Outcome	1B Individual Patients/service users health needs are met. Achieving					
Outcome	1C Patient/service users are free from harm. Achieving					
	1D Patients/service users report positive experience of the service. Achieving					
Sub Score D1						

### **Workforce Diversity Profile and Reporting**

We aim to employ a diverse workforce that is representative of our local communities, as we believe this will improve our decision making in the development of health and care services.

This section of the report illustrates the demographics of the Trust' workforce as of 31<sup>st</sup> March 2025. The Trust will use this data as a baseline to measure the diversity of our staff across the full range of NHS pay grades and in future workforce planning. The table below provides a summary of the key findings.

Protected Characteristic	Narrative
Age	Our highest % age range is between 30 and 65 years, with below 20 years and age 66 ->71 years being our lowest represented age groups.
Sex	Males are considerable underrepresented within our Trust with just 24% of our workforce being male and 76% being female.
Race	The Trust are currently working on declarations of ethnicity through ESR to offer a more accurate reflection of our workforce. 84% of staff are declared as White British with 2% not stating their ethnicity.
Disability	81% of the Trust workforce have declared no disability with 10% unspecified. There is an ongoing project to support staff in declaring disabilities through ESR to enable the Trust to support individuals.
Marriage / Civil Partnership	2% of staff have chosen not to specify their marital status, with 53% being married and 3% being single.
Sexual Orientation	A total of 87% of staff identified as heterosexual or straight. 4% of staff preferred not to state their sexual orientation. With 7% unspecified this makes it difficult to establish if the workforce is representative of the national estimated LGBTQIA+ figure of 3.1% of the population over 16 years of age.



Protected Characteristic	Narrative
Gender Re-Assignment	This data is not currently captured within the Trust.
Maternity / Pregnancy	A total of 1.69% of the workforce were absent due to maternity leave in March 2025, the position for April 2024 was 2.10%
Religion / Belief	The percentage of staff who identify as Christian is 52%. Non-disclosure among staff is 7% overall. Atheism is at 16% with other religions and beliefs being low in representation. 11% of staff declared they did not wish to declare their religion/belief.
Part Time and Full Time Working Arrangements	Age, disability, religion and belief, race, pregnancy and maternity are all determining factors to consider in better understanding the dynamics of full and part-time working arrangements. While ensuring organisational day to day functions are being met. 55% of the Trust workforce are part-time and equality of opportunity should be given to ensure that these staff are afforded the same opportunities as their full-time counterparts.

### **Recruitment Process Data by Protected Characteristics**



Going forward recruitment data will be analysed by protected characteristics on a quarterly basis by the EDI Team. The information provides a breakdown of applicants by protected characteristics and how they fared in the recruitment process. Due to the record retention policy of our current recruitment system Trac, it is only possible to provide data from Quarter 3.

Protected Characteristic	Category	Applicants	Number Shortlist	Number Appointed	% Appointed
Gender	Male	2172	340	75	24%
	Female	3984	844	237	76%
	Not Stated	10	3	0	0%
Ethnicity	White	1432	798	228	73%
	ВМЕ	4634	342	52	17%
	Ethnicity Unknown	100	47	32	10%
Disability	Disabled staff	205	95	16	5%
	Non-disabled staff	5874	1044	264	85%
	Disability Unknown or Null	87	48	32	10%
TOTAL		6166	1187	312	

As this is the first time the Trust has produced and published this information, no clear messaging, analysis or comparisons can be drawn from this first set of data. It should be used as a baseline for identifying any future trends where potential disparities between certain protected groups may exist during the recruitment process, where any such disparities might be mitigated or rationalised.

Although we have recruited 25 international nurses since March 2023, the recruitment process has been completed via an agency and therefore data is unable to be captured via our internal program.

\*Maternity / Pregnancy data is not currently collated using our current system.

# Workforce Race Equality Standards 2024 (WRES)

The WRES requires NHS trusts to self-assess against nine indicators of workplace experience and opportunity for organisations to compare the workplace and career experiences of global majority and white staff.

Four indicators relate specifically to workforce data, four are based on data from the national NHS staff survey questions, and one considers ethnic diversity representation on boards.

As a Trust, we are using the term global majority rather than Black and Minority Ethnic (BME).

<u>PowerPoint Presentation</u> NHS Workforce Race Equality Standard (WRES) Annual Report 2024

<u>PowerPoint Presentation</u> - NHS Workforce Race Equality Standard (WDES) Action Plan 2024



# Workforce Disability Equality Standards 2024 (WDES)

The data for indicators 1 to 3 and 10 are from the Trust's workforce data as of 31 March 2023. This includes information on disability-related demographics, workforce representation, and disability declaration rates. Indicators 4 to 9 have been obtained from the Trust's National Staff Survey results for the year 2023. These measures cover aspects such as workplace adjustments, perceived discrimination, bullying and harassment, career development opportunities, and satisfaction levels among disabled staff.

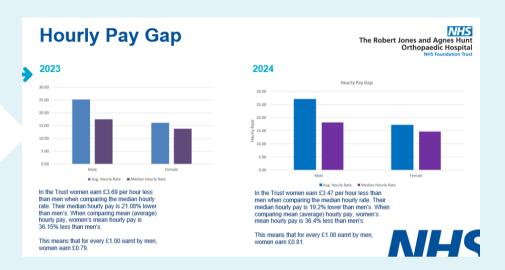
The data presented provides a better understanding of the experiences of our disabled workforce and highlights areas of success and areas requiring further attention. The Action Plan will include specific objectives, initiatives, and review of policies to further support disabled staff, promote inclusivity, and further develop a positive work environment.

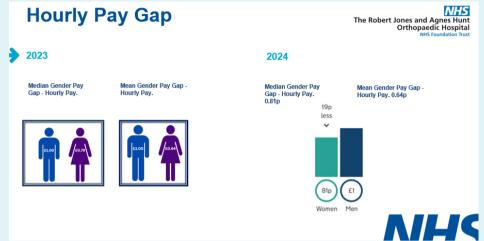
The WDES Annual Report 2024 demonstrates the Trust's commitment to disability equality and improving the work experience of disabled staff. We will aim to create an environment that promotes equal opportunities and positive change for all staff.

PowerPoint Presentation NHS Workforce Disability Equality Standard (WDES) Annual Report 2024

<u>PowerPoint Presentation</u> - NHS Workforce Disability Equality Standard (WDES) Action Plan 2024

### **Gender Pay Gap Report 2024**





Fostering and supporting a diverse and inclusive workforce is at the forefront of our Trust's plans to be the employer of choice to enable on-going delivery of outstanding patient care. Our organisation is 76% female, and our results show that like the median pay gap.

2023

This pay gap report shows a reduction of 0.11% in the mean and a decrease in 0.87% in the mean and a decrease in 0.87% in the median pay gap.

Our pay gap exists of 36.15% when expressed as a mean average and 121.03% as a median average, therefore there is more work to do.

This equates to a difference of £9.12.

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We can use the results of this Gender Pay Gap report to assess

- The levels of gender equality in our workplace.
- The balance of male and female employees at difference levels.
- How effectively talent is being maximised and rewarded.

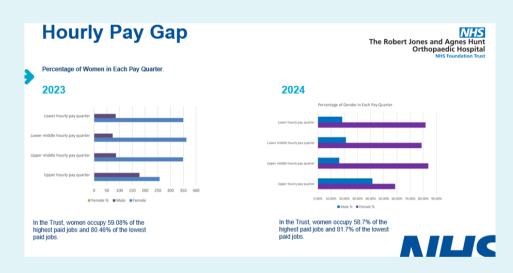
Through analysis of the report's findings the requirement from NHSE is to reduce any gender pay gap. However, the gender pay gap should not be confused with equal pay. Equal pay deals with the pay difference between male and females who carry out the same jobs, similar jobs, or work of equal value

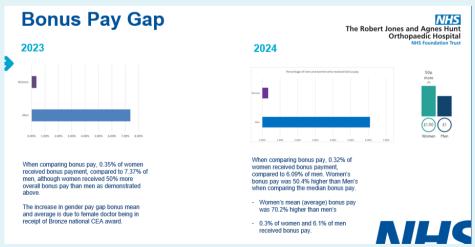
It is unlawful to pay people unequally because of their gender. The Roberts Jones and Agnes Hunt Hospital NHS Foundation Trust supports the fair treatment and reward of all staff irrespective of gender or any other protected characteristics

The gender pay gap shows the difference between the average (mean and median) earnings of men and women. This is expressed as a percentage of men's earning.

Used to its full potential, gender pay gap reporting is valuable tool for assessing levels of equality in the workplace, female, and male participation, and how effectively talent is being maximized

If a workplace 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 areas are. In some cases, the gender pay gap may include unlawful inequality in pay, but this is not necessarily the case.





### **Ethnicity Pay Gap Report 2025**

Employers are not required to collect, analyse or publish information on ethnicity pay. As part of our journey towards becoming an inclusive employer of choice we are reporting our ethnicity pay gap for the first time in 2025 based on a snapshot of our workforce on 31 March 2024.

The report is based on the government's guidance for calculating differences in ethnicity pay and is based on a similar methodology as that used for gender pay gap reporting using electronic staff record (ESR) data. Information on ethnicity is not completed for all employee records, on 31 March 2024.

Employees can update this information and there has been some improvement in recorded information in 2023/2024.

It is important to note that a pay gap differs from equal pay for equal work.

'Equal pay' means being paid equally for the same/similar work.

'Pay gap' is the difference in the average pay between groups.

The ethnicity pay gap shows the difference in the average hourly rates of pay for Global Majority employees (recorded in ESR as black, Asian, mixed race or other) and White employees across our organisation.

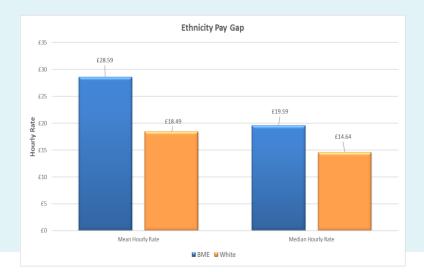
As of 31 March 2024, Total staff numbers: 1,881. 161 employees, 8.56% Global Majority and 88.52 % per cent White. (2.92% reporting as "not stated/unknown")

Our median ethnicity pay gap was – 33.83% and mean pay gap is – 54.64%

A median pay gap of -33.83%, means that on average global majority employees get paid 34p more per hour for every £1 earned by a white employee

In the Trust, Global Majority employees earn £4.95 per hour more when comparing the median hourly rate and £10.10 more when looking at the average hourly rate.

Within this, we have a pay gap of -28.60% for black staff, -17.07% for mixed race staff, -45.26% per cent for Asian staff (data only provided for groups of over 10 employees)



#### What are we doing?

This year we will take the following steps to promote diversity and understanding barriers to promotion and recruitment for global majority colleagues:

- creating an evidence base: To identify barriers to equality and to help us make priorities for action, we have introduced diversity monitoring to understand:
  - the race of those applying for jobs and being recruited;
  - the race of those applying for and getting promotions;
  - o the race of those leaving our organisation and their reasons for leaving;
  - o the race of those in each role and pay band; and
  - o the race of those formally involved in disciplinary, grievance and capability matters.
- reviewing our disciplinary and grievance processes: to support a move towards a just and learning culture.
- discuss the findings from our ethnicity pay gap alongside our equality's workforce analysis with our Ethnic Diverse Staff Network to get qualitative feedback on our organisation and the experience of our global majority employees, and to work collaboratively to develop initiatives to address issues identified.

#### What is our focus?

**Inclusive Recruitment:** Explore sharing interview questions in advance and expand interview question to improve standards of hire around inequality and anti-racism competence and experience.

Learning and Development: Develop a leadership programme embedding inclusion

**Culture and Engagement:** Share ethnicity pay gap reports and action plans with staff networks (pending action).

**Ways of Working:** Launched an Anti-Racism workstream to address recruitment, progression, retention, and conditions. Anti-racism Policy in progress (pending action).

Table below shows that 74% of global majority staff are in roles that require professional registration. (Breakdown of professional registration identified below e.g. GMC/NMC/CIPD/HCPC/AAT etc.)

					Qualified Role
Count of Staff Group/Staff Group	1	2	3	4	Grand Total
Add Prof Scientific and Technical			1	2	3
Additional Clinical Services	14	5	6		25
Administrative and Clerical	5	7	2		14
Allied Health Professionals		3	7	5	15
Estates and Ancillary	2	1			3
Medical and Dental				64	64
Nursing and Midwifery Registered		8	27	2	37
Grand Total	21	24	43	73	161
Headcount in qualified role					119
% in qualified role					74%



### **Grievance, Disciplinary & Capability Issues**

The data below shares the formal cases from <u>April 2024 to March 2025</u>, only the protected characteristics identified within each case have been presented for ease of review. The Human Resources team within People Services continue to monitor the cases received and review any anomalies or areas of concern, ensuring continuous support is offered to those involved.



**Please note** for the purpose of condensing the table below, only categories relating to the individuals engaged in processes are included (e.g. lesbian/gay not included in sexuality because none involved have stated this category)

Protected			Case Type	
Characteristic	Category	Disciplinary	Grievance	Capability/Performance (not including ill health capability)
Gender	Male	4	3	0
Gender	Female	13	4	1
	White British	11	6	1
Ethnicity	Black or black British - African	2	0	0
Ethnicity	Black or black British - Caribbean	1	0	0
	H Asian or Asian British - Indian	2	1	0
	Under 20	1	0	0
Aza Dand	26-40	8	1	0
Age Band	41-55	5	2	0
	56-65	2	4	1
	Christian	10	5	1
Religion	Atheist	2	0	0
	Unspecified	3	2	0
Camedia.	Heterosexual/straight	13	5	1
Sexuality	Unspecified	3	2	0
	Yes	2	0	0
Disability	No	11	6	1
	Unspecified	2	1	0

### Leavers and the reason for departure

The Trust continually review leavers data to analyse any patterns or trends, and to put additional processes in place to support staff in alternatives to leaving. PDR compliance is monitored monthly by Committee to ensure that staff are in communication with their managers and to support in any areas of concern or any areas of learning and development. Regular catch-up meetings between managers and their teams are also encouraged on a regular basis ensuring that motivating the workforce continues to be a focus with particular emphasis on stay conversations to explore development and motivation of our people as a priority of the HR and wider People Services team.

Leaving Reason (April 2024 to March 2025)	Headcount
Death in Service	1
Dismissal - Capability/Conduct	5
End of Fixed Term Contract	24
Flexi Retirement	40
Retirement - Ill Health	1
Retirement Age	28
Voluntary Resignation - Adult Dependants	1
Voluntary resignation - Pay and Reward Related	5
Voluntary Resignation - Child Dependants	3
Voluntary Resignation - Health	6
Voluntary Resignation - Incompatible Working Relationships	1
Voluntary Resignation - Lack of Opportunities	4
Voluntary Resignation - Other/Not Known	24
Voluntary Resignation - Promotion	9
Voluntary Resignation - Relocation	9
Voluntary Resignation - To undertake further education or training	7
Voluntary Resignation - Work Life Balance	24
Total	192



The data should be seen in the context of the continued return to a more 'normal' labour market after the disruption of Covid in 2020-2022.

The data reflects that since April 2023 there has been more resource, and more focus on absence and performance management, likely to have had a push effect on staff leaving, and voluntarily resigning, as alternatives to participating in formal management processes.

The national staff turnover rate for the NHS was 8.1% in August 2023. Staff turnover in RJAH in March 2025 was 8.81%, an increase from the previous year which was 8.08%

This in turn has mirrored a reduction in vacancy rates.

The vacancy rate was 6.47% at year-end 2024/25, an increase from 4.69% in April 24.

Renewed focus on recruitment, and increased resource, allied to actions from the People Services team has supported progress in this area.

Managers are continually encouraged to be flexible with staff retiring and returning, supporting implementation of aspects of the NHS's People Plan.

As of 31st March 25, the Trust has 109 staff on fixed term contracts, this is a reduction from 134 staff on fixed term contracts at year end 2023/24.

Where the data is opaquer is the number of voluntary resignations for the category 'other/not known' which will be the focus of further review and refresh around exit interview process.

### **RJAH Equality Policy**



The Equality, Diversity and Inclusion Policy and its impact on equality have been reviewed in consultation with the trade union and other employee representatives in line with an Equality Impact Assessment. The purpose of the assessment is to minimise and, if possible, remove any disproportionate impact on employees on the grounds of race, sex, disability, age, pregnancy and maternity, marriage and civil partnership, gender reassignment, sexual orientation, religious or other belief.

The Trust is committed to embedding equality, diversity, and inclusion across the organisation rather than it being viewed as an isolated agenda. Ensuring that fair treatment and social inclusion is at the heart of what we do and how we do it.

edi-policy.pdf

Equality is about creating a fairer society where everyone has the opportunity to fulfil their potential. Diversity is about recognising and valuing difference in its broadest sense. Inclusion is about an individual's experience within the workplace and in wider society and, the extent to which they feel valued and included.

The Trust is committed to providing a working environment that is welcoming, inclusive, respectful and is free from unlawful discrimination. We have implemented our Equality Strategy and Action Plan to support with this and to making positive changes within the Trust.

During 2023/24, staff networks were established to provide a platform for staff and continue to support, express and voice a range of experiences. Information and feedback from these network groups progress through the governance process with the aim of influencing Trust policies, procedures and day-to-day functions. Each network has an Executive Sponsor, and a small budget for the year. All the network groups welcome allies to attend the meetings.

### **Disability Staff Network**



Bio of the Staff Network Chair "We wish to inform all staff that effective help is available and ensure it is provided.

Awareness is key."

"Hello I'm Ellie.



I am an apprentice Health Care Assistant and the chair of the new Staff Disability Network. I have a huge passion regarding equality and diversity and especially when it comes to visible and invisible disabilities.

I love my job, it has always been my dream to help others, provide support and learn new skills.

Despite there being principles regarding equality and diversity, there are often gaps that can lead to personal and professional limits.

I have epilepsy, and through experience I have faced discrimination, generalisation, and stereotyping when it comes to my own and other people's disabilities. Having epilepsy is not a definition of who I am, in fact, I live with my lovely wife and will never turn down a mocha! It can however influence how others see me.

I want to work with other staff members to patch up those missing gaps, minimise limits and promote equality of opportunity for all staff with conditions and disabilities. Everyone is different."

The network has been successful in encouraging more staff to attend the meetings and to communicate outside of the meetings, building support networks and safe spaces to gain advice or somebody to listen.

During the short time the network has been established, funding was sought to run an Event called 'This is Me', to encourage staff to have the confidence to be who they are and to speak up if reasonable adjustments are required or additional support is needed. The event saw 3 guest speakers attend on the day and several charities offering advice and support. The aim of the event was to build confidence in staff, to raise awareness and to raise the disability declaration rates of the Trust.

Additionally, to this, many actions have been progressed, to implement the following.

- One Page Profiles.
- Sound eliminating Headphones available to all staff.
- Wellbeing portal to be established.
- Support network and safe space to be open.
- Funding for the network to attend training or events to develop.
- Health Passport trialed for Trust.
- Key Stakeholders giving valued comments and advice on Trust Policies.

In the future the network wish to continue expanding and offering support to as many staff as possible. A parent network has been suggested as a separate space to offer advice and support to parents with disabled and neuro-divergent children.



**NHS Foundation Trust** 

Staff Network Group Chair: Ellie Baldwin

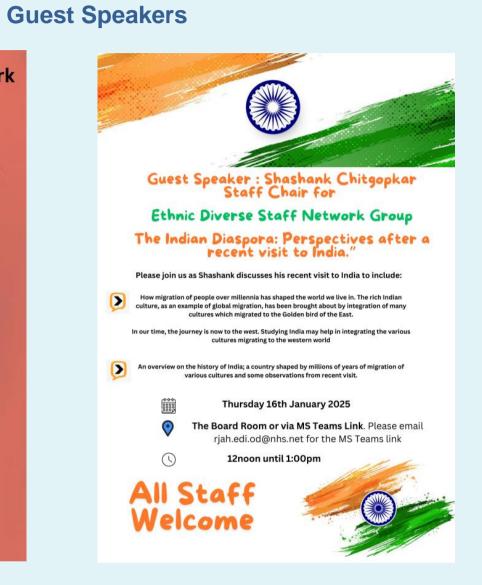
**Executive Sponsor:** Mike Carr

# The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust

### **Ethnic Diverse Staff Network**









Staff Network Group Chair: Vacant as at March 2025

**Executive Sponsor:** Paul Kavanagh-Fields



The Pride Staff Network Group meet month; first Wednesday of the lunch. Lunch and Learn sessions









LGBTQIA+ History Month 1st - 28th February 2025

LGBT + History Month is an annual event, founded by Schools Out, which takes place every February and celebrates the history of LGBTQIA+ communities and the progress made.

Schools Out is an LGBT+
education charity who, through
education and advocacy,
empower people to create
environments where all LGBT+
people feel safe, seen and
supported.

### **INVITE: Pride Network – learn more about pronouns**

As part of the Trust's Pride Network, Alice Amyes, Simulation Technician and Pride Network Chair, held a dedicated session to help staff understand the importance of pronouns and how to use them respectfully in everyday life.

The session covered:

- · What are pronouns
- · Why pronouns matter
- Types of pronouns
- · Using pronouns in practice
- · Creating inclusive spaces

The session was a safe space, where staff could ask any questions they may be too worried to ask.

### **Pride Network - Coffee and Catch-up**

The Trust's Pride Network – previously known as the LGBTQIA+ Network – organised a casual coffee and catch-up session on 16th October an informal space, where members of the network and members of staff can get together. If you have any questions, please contact EDI Team on rjah.edi.od@nhs.net or rjah.pridenetwork@nhs.net

Staff Network Group Chair: Vacant

**Executive Sponsor:** Ruth Longfellow

### **Menopause Staff Network**

Group meet monthly and as from May 2025 – bi-monthly.



World Menopause Day is held every year on the 18th of October. The purpose of the day is to raise awareness of the menopause and the support options available for improving health and wellbeing. We encourage professionals and women to participate in this global awareness raising campaign by printing and sharing these materials, organising events to engage their communities, and sharing World Menopause Day social media posts.

The theme for World Menopause Day 2024 is Menopause Hormone Therapy

https://www.imsociety.org/education/worldmenopause-day/

The RJAH Menopause Staff Network Chair continues to link in fortnightly, with the regional **Menopause Task** and Finish Group (North Shropshire, Telford & Wrekin) for best practice sharing.



Ourspace has a designated page for Menopause guidance and signposting

Joint Staff Network Group Chair: Clare McNeil

**Executive Sponsor:** Denise Harnin





National Day for Staff Networks Wednesday 14th May 2025 #ReadyForChange

This special day was dedicated to recognising the efforts and achievements of our staff networks.

It was a day to connect, share, and celebrate the diversity and inclusivity that our networks foster.

Whether you are already part of a network or looking to join one staff meet with fellow staff members, to learn about the various networks, and discover how they can be involved.

















### Human Resources, Organisational Development and Inclusion



In March 2023 the Trust held Listening Events to gain insight to what our staff wanted to form part of our EDI strategy, the interactive sessions allowed our staff to have a voice and feel included in the decision making of the Trust. Alongside this staff have had access to various support and communication mechanisms including:

- Sexual Safety Charter Signatories to this charter commit to taking and enforcing a zero-tolerance approach to any unwanted, inappropriate and/or harmful sexual behaviours within the workplace and to take appropriate actions.
- Freedom to Speak Up Guardian. More information on how staff are being supported in the Trust.
- SAND Training Safe Ageing No Discrimination, LQBTQIA+
- Oliver McGowan Training
- Manager's Briefings Held hybrid with the Chief Executive Officer and Exec Team to update senior management on any changes or information required to share with staff further.
- Question Time Held hybrid with the Chief Executive Officer and Exec Team to update all staff on any changes or information required to share with staff further.
- Chat with Harry Meetings held face-to-face with the Chair to discuss any issues or concerns.
- PDR Training To raise awareness of the importance of having regular conversations and catch-ups with your team and to support in any further training or changes required to support in their work.

### **NHS STAFF SURVEY 2024**

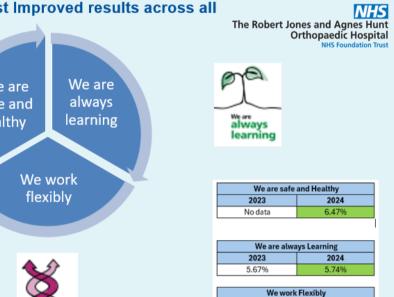


Staff Survey 2024 Overall, Most Improved results across all Department.









Staff Survey 2024 Overall, More work to do areas across all Department.

2024



2023



We are Compassionate & Inclusive







6.31%

The Robert Jones and Agnes Hunt Orthopaedic Hospital

	We are	a Team
(4)	2023	2024
	7.03%	6.99%

Staff Engagement

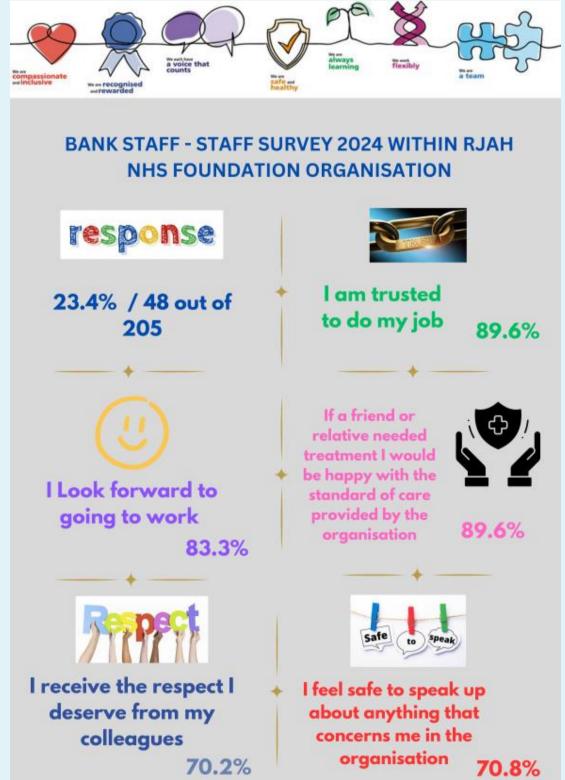
	We are recognise	ed and Rewarded
( 2 )	2023	2024
	6.26%	6.16%

	We each have a voice that counts			
(3)	2023	2024		
	6.89%	6.84%		

### 2024 2023 2023 2024

6.33%





### **EDI Team Learning – 2024.**



The Robert Jones and Agnes Hunt
Orthopaedic Hospital
NHS Foundation Trust

### EDI Team Learning Update

Caroline, Amber & Gina attended the final on-site Module 4 - Diversity in Health and Care Partners Programme in Leeds on the 2nd July 2024. This event topic discussed Equality, diversity and Inclusion as an improvement tool; exploring and identifying best practice, methodologies and strategies for Organisations to become a more inclusive workplace.







Attending Organisations were presented with a personalised glass shield and framed certificate (and cupcake) for their completion of the programme.





Final Masterclass attended virtually on Tuesday 23rd July which discussed Inclusive recruitment and talent management.





**SAND Covenant** - RJAH signed a covenant with the charity, committing to understand and respond to the needs of older LGBTQIA+ people in Shropshire, Telford and Wrekin.

The covenant consists of five pledges, which we have committed to at RJAH.

The pledges are:

- Providing the best possible quality services for older and old LGBTQIA+ people;
- Learning what life can be and has been like for different LGBTQIA+ people;
- Vocally and visually supporting groups working with and for older and old LGBTQIA+ people;
- Creating meaningful opportunities for LGBTQIA people and groups to influence;
- Assessing and evidencing change, including work carried out to engage with LGBTQIA+ people.





**Data Quality Provider** - The Trust celebrated after being named as a National Joint Registry (NJR) Quality Data Provider, after successfully completing a national programme of local data audits.

This is the 6<sup>th</sup> year running that The Robert Jones and Agnes Hunt Orthopaedic Hospital has been awarded as a Quality Data Provider, which was introduced to offer hospitals a blueprint for reaching high-quality standards relating to patient safety.



NHS Exemplar Trusts Programme for Catering - following a national independent review of hospital food, where the team was recognised as one 21 NHS Trusts in the country to be hailed as exemplar. The Catering Team at the Trust are responsible for providing and serving meals to inpatients, as well as the day to day running of the onsite restaurant, Denbigh's.





**NHS Pastoral Care Quality Award -** International recruitment efforts and commitment to providing gold tandard quality pastoral care at Shropshire's specialist orthopaedic hospital was recognised by a prestigious national award from NHS England.

Launched in March 2022, the NHS Pastoral Care Quality Award – which aims to standardise the quality and delivery of pastoral care internationally educated nurses and midwives across England – was presented to the team at The Robert Jones and Agnes Hunt Orthopaedic Hospital.

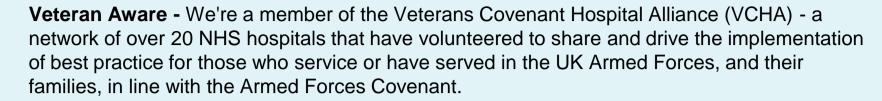


**Neuromuscular Team Centre of Excellence Award from MDUK -** Our Neuromuscular Centre received a prestigious Centre of Excellence award from leading national charity <u>Muscular Dystrophy UK</u>.

The charity who supports more than 110,000 children and adults in the UK living with one of over 60 muscle wasting and weakening conditions awarded the team for providing outstanding care, promoting best practice locally and nationally and demonstrating their commitment to improving health and care for people living with muscle wasting and weakening conditions.







- The Robert Jones and Agnes Hunt
  Orthopaedic Hospital
  NHS Foundation Trust
- We are committed to applying the Armed Forces Covenant and giving special consideration where appropriate.
- Staff should be able to explain the health commitments of the Covenant.
- All relevant staff will be trained and educated in veteran needs.
- Staff will ask patients if they or a close family member serve or have served in the UK Armed Forces, so we can best support their care needs





**GIRFT -** GIRFT aims to supports systems nationally to ring-fence elective capacity through this hub model and increase capacity nationally by 30% by the end of 2024/25.

Being accredited as an Elective Surgical Hub is seen as a visible marker of high standards and excellent quality. We know we already deliver outstanding care – gaining this accreditation is another positive confirmation of that. It is endorsed by the Royal College of Surgeons, which is another marker of its value and importance.













### **Initiatives**

- Free Sanitary Products for all staff
- Free breakfast for all staff
- Denbigh's Lunch Deal
- Money Matters financial education session
- Money Matters financial education 121 sessions
- Free tea, coffee, milk, and sugar to all departments (ceased 31<sup>st</sup> March 2025
- Free staff car parking continues
- Bank that bonus (although now ended)
- Bank weekly pay

### **Equality Statement**

The Robert Jones and Agnes Hunt Orthopaedic Hospital NHSFT embraces diversity, equality and inclusion and our aim is to be diverse in age, gender identity, race, sexual orientation, physical or mental ability and ethnicity.

We are committed to ensuring disabled workers aren't disadvantaged when applying for and doing their jobs and offer an interview to all applicants with a disability who meet the minimum criteria for the advertised post. Reasonable adjustments under the Equality Act 2010 will be considered upon request.

# Training opportunities for staff

# The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust

### **Leadership Programme**

The course is made up of three modules as set out below. Each is designed to focus on a different aspect of your leadership journey. Between each module, you will be given a workbook which should take no more than three-to-four hours to do. Successful completion of each module and workbook will see you graduate from the programme, with a formal presentation to take place with some of our very senior leaders

- •Module 1 (Releasing Your Potential) is all about helping you to be the best version of yourself. You will look at compassionate leadership and the NHS People Promise. You will also focus on employee engagement, and why that is so essential.
- •Module 2 (Essential Management Skills) will have a focus on communication and support you in mastering being able to hold difficult conversations. You will also explore the importance of getting off to a good start in the way you onboard new recruits, and how you help people to transition into a new role.
- •Module 3 (Looking After Yourself To Lead Effectively) will encourage you to make sure you are also looking after yourself, something which is essential if you are to function as an effective leader. What are our senior leaders saying about this?

Stacey Keegan, our Chief Executive, said: "There is a broad combination of fundamental skills that effective leaders need to acquire and develop; from setting objectives to motivating, delegating, coaching, and giving feedback.

"Supporting our leaders is one of our top priorities as we continue on our mission of making RJAH a truly outstanding place to work, and I encourage everyone to sign up for this programme and take advantage of this opportunity.

"The best leaders expand their thinking beyond what's visible and obvious and can also capitalise on the hidden drivers of organisational success: inclusion, agility, flexibility, and the engagement and wellbeing of the people who work with and for you.

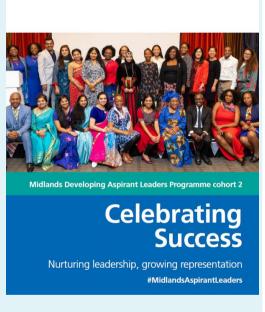
"As you work through this programme, I am sure you will be challenged and stretched. I hope you will also build that toolkit to be the best leader you can be – both here at RJAH and for the NHS as a whole."

# NHS England Midlands Developing Aspirant Leaders (DAL)

NHS England Midlands Developing Aspirant Leaders (DAL) Programme supports ethnic minority nurses and midwives aspiring towards a senior leadership role. DAL was created by ethnic minority nurses and midwives for ethnic minority nurses and midwives and provides academic learning, sponsorship and the ability to safely stretch, delivering a sustainable positive action scheme for progression.

The e-book celebrates the achievements of the second cohort of DAL participants, who all have completed the programme with exceptional results. The book showcases each of the participants, their leadership stretch assignments and the overall success of the programme, which has already led to improvements in patient and staff experience.













### **EDI Staff-related Training and Development Opportunities**

- RJAH Leadership Programme
- Improvement Advocates
- Access to Oliver McGowan Training
- Partner on the Diversity in Healthcare Programme 2023/24
- Freedom to Speak Up Training
- PDR Awareness
- Holistic Skills Academy
- Human Factors Training
- Sexual Safety Training (commencing in May 2025)

Following the recent successful award from NHSE in relation to WDES innovation funding, we have set-up 3 training sessions to be run during Neuro-Diversity Celebration week.

 Neuro-Diversity Awareness Training – A webinar open to up to 100 participants, to support in raising awareness and understanding, aimed for all staff.

Disability Awareness Training – A 3-hour session open to up to 20 participants, aimed at senior managers to support their teams and the overall workforce.

Neurodiversity and Autism Awareness Training – A 3-hour session open to up to 20 participants, aimed at senior managers to support their teams and the overall workforce.

Staff group	Successful	Unsuccessful	Total number of applications
Study Leave (non- medical staff)	40	1	43 (2 Pending)
CPD (Registered health care professionals)	869	5	864
Medical study Leave (Consultants and Medical Doctors)	637	0	637
Total Number of applications	1,276	6	1,274 (2 pending as noted above)

### **Communications and Involvement**



### **Patients and the Public**

RJAH communicates regularly with patients and the public in a variety of ways:

- Social media
- Website
- Patient Participation Group
- Surveys

### RJAH has social media profiles on the following platforms:

- Facebook: @RJAH.NHS
- X (formally Twitter): @RJAH\_NHS
- Instagram: @rjah\_nhs
- LinkedIn: The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust
- YouTube: The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust
- RJAH EDI Facebook page.











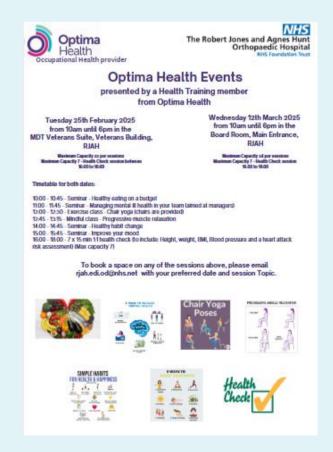




OurSpace - Useful Resources to help you look after number one

### Health and Wellbeing

A staff platform for a whole host of resources and information around wellbeing – mental, physical and financial – can be found on OurSpace – our dedicated wellbeing portal.



Health & Well-being Event for Staff Feb 2025/March 2025.

# Access Able – patient and Staff re: Signage

Sian Langford, Facilities Compliance & Sustainability Manager/
Accredited Counter Fraud Specialist (ACFS) confirms that funding for Access-Able has gone through Charitable Funds request and reviewed at the Charitable Fund Committee.

**Outcome below:-**

3 years funded, full accessibility guides, 20% of site reviewed each year.



**Neurofriends Support Network.** 

### **STAFF**

# The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust

### **SAND Covenant**



RJAH signed Safe Ageing No Discrimination's (SAND) covenant, committing to understand and respond to the needs of older LGBTQIA+ people in Shropshire, Telford and Wrekin.

SAND are a community organisation who aim to improve the experiences and lives of the ageing LGBTQIA+ community across the county.

Following signing the covenant, RJAH launched dedicated training for staff to open their hearts and minds to the issues the ageing LGBTQIA+ community face. The training included appropriate questions, how best to phrase language and pronoun use. Following the training, staff felt like they can effectively signpost and support colleagues to the relevant resources, and also help colleagues embrace more supportive language and questions.

# **Sexual Safety Charter**

As a Trust, we committed our support to the Sexual Safety Charter launched by NHS England. This means we commit to taking and enforcing a zero-tolerance approach to any unwanted, inappropriate and/or harmful sexual behaviours within the workplace and to take appropriate actions

# Regular Staff Messaging

Email messages are sent out from the Communications
Team, on average three times a week, to keep staff updated on news and topics
from across the Trust. These messages are also shared with staff via the closed
Staff Facebook group, intranet and through briefings known as Question Time
(for all staff) and Managers' Briefing (for managers).



### **STAFF**













Some of the EDI events and themes the Trust has shared information with staff includes (but not limited to):-

- Easter
- Nutrition & Hydration Week
- Armed Forces and Reservices Day
- Freedom to Speak Up Month
- Time to Talk Day
- Race Equality Week
- A series of religious festivals such as Bodhi, Diwali, Hanukkah and more



### Intranet



The RJAH staff intranet – Percy – is a digital resource which holds a wealth of information, including articles, events and useful resources, on topics such as health and wellbeing and equality diversity and inclusion.

### Trust values /Our signature behaviours













### WDES ACTION PLAN 2024/25





>	Area and Objective	Action	Indicator	Lead	Outcome and impact
	Inclusive Culture	Increase Board representation Introducing Disability passport	10	EDI Team	Continue to ensure that the recruitment process for Non Executive Board members and Governors is inclusive
	Belonging	Increase and encourage staff disability declaration on ESR Promote Staff Network Group and NeuroDiverse Friends	1	EDI Team Staff Network Groups	➤ Host a range of campaigns aimed at updating personal details on ESR, to ensure the Trust's workforce profile is as accurate as it can be and reflects the true picture of our workforce
	Eliminating Discrimination	Disability pay gap Identification and promotion of relevant awareness events	7	EDI Team	➤ Improved staff survey scores relating to violence, bullying and harassment from colleagues and managers
	Diverse Workforce	Debiasing recruitment processes Opportunities to understand, engage, develop and progress our differently abled talent	2	EDI Team	<ul> <li>improvement on key workforce metrics relating to EDI</li> <li>Improvement and culture of allyship at events</li> </ul>



### WRES ACTION PLAN 2024/25





Area and Objective	Action	Indicator	Lead	Outcome and impact
Inclusive Culture	Reverse Mentoring Appointment of FTSU champions Promotion of Developing Aspirant Ethnic Minority Nursing and Midwifery Leadership Programme	6 9	EDI Team	<ul> <li>Create an environment that eliminates the conditions in which bullying, discrimination, harassment and physical violence at work occur</li> <li>improvement in staff survey results</li> </ul>
Belonging	Staff Network Groups Culture/compassionate training Global majority staff listening events	4	EDI team Staff Network Groups	Improvement in access to CPD and non- mandatory training: collect demographic data on applicants
Eliminating Discrimination	Implement Anti Racist Strategy Zero tolerance posters Ethnicity pay gap	8	EDI team	<ul> <li>Create zero tolerance through an Anti-Racism statement and guidance</li> <li>EDI Objectives for board members set by the Chair as part of the annual appraisal process</li> </ul>
Diverse Workforce	Recruitment open days/interviews Equal opportunities for career progression	7	Recruitment team EDI team	➤ Undertake a review of talent management programmes and identify opportunities to support the development of ethnic minority leaders of the future

