

## Consideration of the EDI Findings and Developing Action Plan

### Board Timeout

**23 October 2025**

<b>Presented for:</b>	Discussion and Approval
<b>Presented by:</b>	Kate Sims, Interim Chief People Officer Debbie Rotchell, Enei
<b>Author:</b>	Kate Sims, Interim Chief People Officer
<b>Previous Committees:</b>	Board Workshop on 25 September 2025

<b>Our Annual Commitments for 2025/26 are:</b>	
Recognise and act upon moments that matter to our patients	✓
Support our patients to get home a day sooner	✓
Be in the top 25% for patient experience and efficiency in outpatients	✓
Support each other to act with kindness and compassion	✓
Reduce our carbon footprint by creating greener patient pathways	
Support our staff to manage every £ wisely	✓
Make best use of our estate, equipment and digital assets	✓

<b>Risk Appetite Framework</b>				
<b>Level 1 Risk</b>	<b>(✓)</b>	<b>Level 2 Risks</b>	<b>(Risk Appetite Scale)</b>	<b>Impact</b>
Workforce Risk		Workforce Retention Risk - We will deliver safe and effective patient care, through providing a supportive culture, training, development and H&WB to our staff to retain the appropriate level to continue to meet the patient demand for our clinical services	Cautious	Moving Towards
Operational Risk				
Clinical Risk				
Financial Risk				
External Risk		Regulatory Risk - We will comply with or exceed all regulations, retain its CQC registration and always operate within the law.	Averse	Moving Towards

## 1. Summary

The Trust was requested by NHS England (NHSE) Region to commission an external desk top review of EDI policies and practices, in response to whistleblowing concerns raised to both NHSE and the Care Quality Commission (CQC) prior to the CQC Well-led inspection carried out 17-19 June 2025.

Since that point, the Trust has now received the report and findings following the CQC Well-Led inspection in June 2025 and also the Maternity, Safety Support Programme (MSSP) EDI Maternity and Neonatal Diagnostic Report following a review over June-July.

The Trust Board, at a workshop on 25 September received details of the external EDI desktop review and held an initial discussion in relation to the findings of the review.

As referenced within the reports, the reviews undertaken provide the opportunity for the Trust to:

- Evaluate how EDI principles are embedded within clinical services, workforce practices and organisational culture,
- identify areas of good practice and consider enablers which can be scaled up,
- ensure we understand the gaps, risks and challenges highlighted, and
- consider the actionable recommendations to strengthen EDI across workforce and service delivery.

During the development session on 23 October 2025, the Board will spend time on the purpose of the EDI agenda, why this is so important and what success might look like in relation to our ambitions as an organisation. The Trust Board will receive a presentation from the Interim Chief People Officer Kate Sims, accompanied by Debbie Rotchell from Enei, which will provide detail from the latter on the desktop review, together with a presentation on the overarching themes and findings of the desktop review, the CQC Well-led findings and the MSSP report, in relation to the Trust's approach to Equality, Diversity and Inclusion. The Board will be asked to discuss the developing action plan and the proposed next steps.

## 2. Background

The Trust's current EDI strategy has an aim of '**valuing and embracing the diversity of its workforce and communities it serves**' and a core goal to; '**create a work and patient environment that is fully inclusive and fair, where staff could reach their full potential and patients receive the optimum level of care and treatment.**'

The Trust has now received the following reports, all of which have a full focus or make key reference to, the Trust's current approach and position with regards to EDI. The three reports can be found within the Appendices as:

- Appendix A - EDI desk-top review – Evaluation report
- Appendix B - CQC Well-Led report
- Appendix C - MSSP EDI Maternity and Neonatal Diagnostic Report

Whilst the Board will receive a detailed presentation from the report's author in relation to Appendix 1, the Interim Chief People Officer has reviewed all three reports together and will present that there are several key themes and findings highlighted within each, which are set out below.

### **Theme 1 – EDI Ambitions and Policies**

- The priorities of the EDI ambition / strategy not translating into practice
- A substantial framework of policies, practices and support but unclear how well understood
- The need to translate high level, EDI objectives into practical improvements
- The impact on staff health and wellbeing of racist and bullying behaviour
- Lack of diversity at Band 7 and above and at Board level
- The EDI and Freedom to Speak Up capacity

### **Theme 2 - An inclusive environment**

- Limited transparency in decision-making
- An erosion of 'The Leeds Way' and staff feeling unheard
- The willingness of the Board and other leaders to listen to feedback
- BAME staff reporting higher levels of discrimination, under-representation at leadership level and mentorship / progression is inconsistent
- Evidence of strong staff networks and growing engagement through these

### **Theme 3 - Leadership & Communication**

- A positive, compassionate culture is evident but inconsistent
- Board relationships were not as effective
- Great diversity needed at Board level
- Inclusive leadership as part of appraisal review process is key
- Communication on changes to management has been limited

### **Theme 4 – Organisational development and learning**

- Further improvement needed to improve development experience and equity of this
- Cross-organisational learning and sharing could be improved
- Dissatisfaction in learning with variation of experience
- Limited confidence in culturally safe care and the learning available to support this

### **Theme 5 – Data and Oversight**

- No systematic process evidence to link EDI data with patient outcomes
- Data quality – difficult to monitor outcomes against ethnicity

### **Theme 6 - Oversight and Assurance**

- Equality Impact Assessment – not fully embedded into the decision making process
- A range of positive health and wellbeing initiatives evident but BAME EDI metrics highlight harassment and bullying

In addition, the EDI Strategic Group held a workshop in October 2025, pending the outcome of the Board's deliberations relating to the EDI reports. From this meeting, the group, which has a multi-disciplinary membership from across the Trust, identified several areas of activity which it viewed would make the most immediate and visible difference to how colleagues experience equality, diversity and inclusion at the Trust.

The top 10 themes identified by the steering group were:

1. EDI awareness training: mandatory for all in management position of a certain banding
2. Simple 'belonging' language
3. Define the role of staff networks and how that relates to the delivery of the EDI strategy
4. Significant financial investment in enabling and supporting activities
5. Available data that is easy to access, tells you about your team and is useful and actionable
6. Communication (from ward to board) – engaging staff on the frontline
7. Free staff gym/free classes/free psych support
8. Make sure all board members champion at least one EDI action in the Trust
9. Reasonable adjustments – Trust and CSU actions/greater support and use
10. Raise the profile of EDI champions and allies

### **3. Proposal**

It is evident that the response to the findings and our ambitions as an organisation, will require a long-term transformational, cultural response which should not lose sight of the work already established. Accompanying this paper and to be discussed further at the Board Development session is the developing EDI action plan. The action plan represents a blend of the key activities already identified within the Trust's EDI action plan, together with actions in response to the CQC Well-led report and recommendations from the reports referenced above. The action plan reflects the six high-impact actions for EDI expected of NHS Trusts, but importantly, responds foremost to the findings identified locally for our organisation.

It is important that an EDI action plan feels real and owned by those who are impacted by and should benefit from the actions within. To ensure the plan remains relevant, it is proposed that following the initial discussion by the Board in October 2025, a period of engagement will be undertaken which includes with the EDI Strategic Group, staff network members and other groups, together with Patient Experience groups. The action plan needs to be ambitious but also sufficiently agile to respond to the changing and developing requirements of the organisation. A communication plan to support the engagement activity will be developed as a priority, following the discussion with Board members in October.

Whilst it is proposed that there will be an over-arching EDI action plan which responds to many of the findings detailed within the reports referenced, there may be some specific activity required within Maternity and Neonatal Services.

### **4. Financial Implications**

The reports highlight that the current Trust resource dedicated to the EDI and Freedom to Speak Up work programmes is limited and that in order to respond to the needs of our colleagues and patients in this area, it is anticipated that an investment of resources will be presented for consideration. As senior leaders we also need to consider how the EDI ambitions can be embedded across the organisation to avoid them being seen to be solely 'owned' in one area of the Trust.

Whilst financial resources are limited, it is anticipated that there will be some financial implications associated with the necessary investment of resources referenced above

therefore, together with a limited level of non-pay financial support for engagement activity with both workforce and patient groups. This proposal will be developed in the coming weeks.

## **5. Risk**

The Trust continues to operate within the adverse risk appetite with regard to Legal & Governance risk and Regulatory risk set by the Board. The Workforce and Quality Assurance Committees will provide assurance oversight of the Trust's most significant risks.

## **6. Communication and Involvement**

The Trust Board will receive a further, formal update with detail on the action plan and proposed governance and assurance at the November public Board meeting. This will include a proposed engagement plan for both workforce and patient engagement in the development of the action plan.

It is important to ensure that in the interim, the workforce receives communication following the outcome of the reports and the proposed work to develop the Trust's EDI ambitions and respond to the findings within.

## **7. Equality Analysis**

The Trust strives to adhere to equality and diversity practices set out within our people priorities. It is recognised that within the reports there are particular areas where further work is required to respond to the findings as listed in section 2 above. As the implementation of the action plan continues to progress, this will include the measurements of impact of activities.

## **8. Improving Health Equity**

The Trust is committed to Improving Health Equity meaning reducing the unfair and avoidable differences in health some groups experience, the work of our Board and Committees underpins this commitment.

## **9. Publication Under Freedom of Information Act**

This paper is exempt from publication under Section 22 of the Freedom of Information Act 2000, as it contains information which is in draft format and may not reflect the organisation's final decision and is intended for future publication.

The November Board report along with the evolving action plan, will be received in the public meeting.

## **10. Recommendation**

The Board are asked to receive this paper and accompanying reports and as part of the Board Development Timeout, participate in a confidential, detailed discussion on the overarching EDI agenda, the findings of the reports and the proposed actions to be taken to develop the overarching action plan, to develop the communication plan to support this

and note the indication of some anticipated resource requirements to support this programme of work.

The Board are also asked to consider the assurance on our progress via the Workforce Committee (our people) and the Quality Assurance Committee (our patients), and further reporting back to Board.

### **11.Supporting Information**

The following papers make up this report:

- Appendix A - EDI desk-top review – Evaluation report
- Appendix B - CQC Well-Led report
- Appendix C - MSSP EDI Maternity and Neonatal Diagnostic Report
- Appendix D - Draft core EDI Development Plan

Kate Sims  
**Interim Chief People Officer**  
15 October 2025