

Inclusion and Belonging Development Plan

Public Board Meeting

27 November 2025

Presented for:	Discussion and Approval
Presented by:	Kate Sims, Interim Chief People Officer
Author:	Kate Sims, Interim Chief People Officer
Previous Committees:	Board Workshop on 25 September 2025 Board Development session 23 October 2025

Our Annual Commitments for 2025/26 are:	
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	✓

Risk Appetite Framework				
Level 1 Risk	(✓)	Level 2 Risks	(Risk Appetite Scale)	Impact
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 the NHS England (NHSE) Regional team to commission an external desk top review of Equality, Diversity and Inclusion (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. An external organisation, Employers Network for Equality and Inclusion (Enei) was commissioned to undertake a desk-top review, which was completed between 30 June and 26 July 2025.

Since that point, the Trust has now also 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 2025.

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. Since then, the Board had held an extended Board development session in October 2025, where the wider EDI, (to be named as Inclusion and Belonging going forward) agenda has been reviewed and discussed in detail and where proposed actions from the three reviews supporting this agenda have been supported. **Appendix 1** sets out the summary discussion paper from the event on 23 October 2025.

The three separate reviews, as referenced within the subsequent reports, 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 that as a Trust, 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 spent time on the purpose of the Inclusion and Belonging agenda, why this is so important and what success might look like in relation to our ambitions as an organisation. The Trust Board received a presentation from the Interim Chief People Officer, Kate Sims, accompanied by Debbie Rotchell from Enei, which provided detail from the latter on the desktop review, together with a presentation received 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 Inclusion and Belonging. The Board supported the basis of the developing Inclusion and Belonging action plan and the proposed next steps.

During the same timeframe of the above reviews, the Trust, led by the internal EDI Strategic Group has undertaken work which has led to the development of the Trust's EDI Improvement Plan in readiness for the required statutory publication date of 31 October 2025. The Improvement Plan, approved through the Trust's Workforce Management Group and subsequently the Workforce Committee is attached as **Appendix 2**. The Improvement Plan references the need to remain agile, in anticipation of the expected recommendations from the three external reviews, namely from the CQC, Enei and MSSP. The purpose of this paper is therefore to brief the Board on the development work underway to bring the various work programmes together under a Trust Inclusion and

Belonging Development plan and to seek support for the proposed launch of the staff engagement work to support the Inclusion and Belonging agenda.

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.**'

As stated above, 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 Inclusion and Belonging. The three reports can be found within the Appendices as:

Appendix 3 - EDI desk-top review – Enei evaluation report

Appendix 4 - CQC Well-Led report

Appendix 5 - MSSP EDI Maternity and Neonatal Diagnostic Report

It is important to note that with the review undertaken by Enei, the author, in a detailed presentation to the Board on 23 October, emphasised that this was a desk-top review only and therefore was limited to the consideration of a significant number of policy, strategy and other documents but without the scope to then test assumptions reached with members of the Trust's workforce. It is key to also highlight that within the MSSP report, recommendations were made to support both workforce and patient experiences. The body of the work referenced within this Board paper has a focus on the workforce elements, however work is also underway to respond to the recommendations relating to service delivery and patient experience. Whilst the matter of minimal testing and triangulation was noted at the detailed Board session on 23 October, the Board accepted the proposed recommendations as areas of positive focus for the future Inclusion and Belonging work.

Acknowledging that the three external reviews were all completed separately, from a review of each, the Interim Chief People Officer presented to the Board in October 2025 the key themes which materialised from the work in terms of both findings and recommendations and which are summarised as:

Theme 1 – Inclusion and Belonging 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 across the organisation
- The need to translate high level, EDI objectives into practical improvements
- The impact on staff health and wellbeing of racist and bullying behaviour
- A lack of diversity at Band 7 and above within the workforce and at Board level
- The focused EDI and Freedom to Speak Up capacity currently available within the Trust

Theme 2 - An inclusive environment

- A view that there is 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 being inconsistent
- Good evidence of strong staff networks and growing engagement through these

Theme 3 - Leadership & Communication

- A positive, compassionate culture is evident but inconsistent across the Trust
- Board relationships were not seen as effective
- Greater diversity needed at Board level
- Inclusive leadership as part of the appraisal review process was recommended as a key consideration
- Communication on changes to management was described as limited

Theme 4 – Organisational development and learning

- Further work needed to improve development experience for staff and the equity of access to this 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 evidenced 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 tandem, the Trust's EDI Strategic Group has undertaken development work pending the outcome of the Board's deliberations relating to the external EDI reports. The EDI Strategic group has a multi-disciplinary membership from across the Trust and developed the EDI Improvement plan shown as Appendix 2 and in line with the national statutory requirements for all NHS organisations, this was published on 31 October 2025. All of the priorities set out in this Improvement plan are embedded through the existing EDI Three Strand Approach, namely:

1. To de-bias our processes
2. Embed a culture of conscious inclusion
3. Take positive action

It is recognised that the Inclusion and Belonging agenda for the Trust is significant and will require a longer-term cultural transformation programme. It is essential to now bring the various strands and programmes of activity together and since the Board development session on 23 October and the publication of the EDI Improvement Plan on 31 October, work has taken place to develop an overarching Inclusion and Belonging Development plan which responds to the key recommendations from the external reviews, whilst building on the EDI programmes already underway in the Trust.

3. Proposal for Engagement

Accompanying this paper as **Appendix 6** is the developing Inclusion and Belonging action plan. The action plan represents a blend of the key activities already identified within the Trust's EDI Improvement 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 presentation of the Inclusion and Belonging Development plan to the Trust Board in November 2025, a period of engagement will be undertaken which includes with the EDI Strategic Group, staff network members and other groups, the Senior Leadership Forum together with Patient Experience groups. Working with the Trust Communication and Engagement team and co-led by the Interim Chief People Officer and Chief Operating Officer, it is proposed that the engagement with staff will commence with:

- Senior Leadership Team – 3 December
- EDI Strategic Group – 4 December
- LTHT Live – 10 December

The Development Plan needs to be ambitious but also sufficiently agile to respond to the changing and developing requirements of the organisation. It is acknowledged that at the point of presenting the draft development plan to the Board in November, further work is required to develop concise actions which commit to clear timeframes and ownership both corporately and within CSUs but it is presented, that the core purpose of the proposed engagement with our workforce is to test the core themes of the development plan as a response to areas of recommended improvement.

Whilst it is proposed that this will be an over-arching Inclusion and Belonging development plan which responds to many of the findings detailed within the reports referenced, it is anticipated that 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.

Whilst financial resources are currently limited, it was highlighted at the Board session in October that there may be some financial implications associated with the necessary investment of resources referenced above, together with a limited level of non-pay financial support for engagement activity with both workforce and patient groups. A business case is currently being developed for consideration in this area.

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 regarding the development and implementation of the Inclusion and Belonging plan at a future Board meeting in the first quarter of 2026/27. In the interim, the workforce will continue to receive communication on the outcome of the reports and the ongoing work to develop the Trust's Inclusion and Belonging ambitions.

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

A part of the presentation of the report to the November Board, the three EDI review reports provided as Appendices 3, 4 and 5, together with the draft Inclusion and Belonging Plan, provided as Appendix 6 will be made public.

10. Recommendation

The Board are asked to receive this paper and accompanying reports and support the ongoing development of the Inclusion and Belonging development plan and the proposed commencement of staff engagements in early December 2025.

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 1 - Board paper from the Trust Board EDI Development session 23 October

Appendix 2 - Leeds Teaching Hospitals EDI Improvement Plan – published 31 October

Appendix 3 - EDI desk-top review – Evaluation report

Appendix 4 - CQC Well-Led report

Appendix 5 - MSSP EDI Maternity and Neonatal Diagnostic Report

Appendix 6 - Inclusion and Belonging Draft Development Plan

Kate Sims
Interim Chief People Officer
16 November 2025