

**Inclusion and Belonging Action Plan - Update
Public Board
26 March 2026**

Presented for:	Information and Assurance
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Previous Committees:	27 November 2025 – Trust Board 29 January 2026 – Trust Board 11 March 2026 – People Committee

Link to Strategic Objective	Support and develop our people
Link to Provider Capability Assessment	People and culture
Link to CQC Well-led Statement	Capable, Compassionate and Inclusive Leaders
Regulatory Impact	Regulation 17: Good governance

Key points	Purpose
- Continued delivery of the Trust-wide Inclusion and Belonging Action Plan, with clear ownership, milestones and reporting now embedded. - Update on progress provided to the People Committee on delivery progress and grip of actions. - Increasing focus on visible behavioural change, simplicity of people processes and colleague experience. - Next phase focused on continued progress and local ownership	Information and Assurance

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 supporting the training, development, and H&WB of our staff to retain the appropriate level of resource to continue to meet the patient demand for our clinical services	Cautious	Moving Towards
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

Between October and December 2025, the Trust brought together findings from the CQC Well-led review, the Employers Network for Equality and Inclusion (ENEI) review, and the Maternity Safety Support Programme. Board discussions in October and November 2025 led to a single Trust-wide Inclusion and Belonging Action Plan, first presented in November 2025, and updated in January 2026.

This paper provides assurance on progress against the Inclusion and Belonging priorities, including delivery of the Inclusion & Belonging Action Plan and associated High Impact Actions since January 2026. All Inclusion and Belonging actions are currently on track, with no red or amber items. High Impact Actions are either on track or completed, with strengthened governance following the introduction of clear status reporting. Describing actions as "to progress" indicates they belong to the upcoming phase of integration and are being closely monitored according to established assurance procedures.

The Board is requested to acknowledge ongoing progress and strengthened assurance measures that promote Inclusion and Belonging.

2. Progress Since Last Update

Since the January Trust Board update, progress has focused on moving from mobilisation into delivery and assurance.

Key developments include:

- Update and assurance to the People Committee 11 March 2026 on progress against the Inclusion and Belonging Action Plan, including ownership, milestones, and early delivery evidence.
- The LTHT EDI High Impact Actions and the Inclusion and Belonging short, medium, and long-term actions now include a clear status position, strengthening governance and audit assurance.
- All initiatives related to Inclusion & Belonging are progressing as planned, with delivery supported by current governance processes, including the People Improvement Framework, People Committee, and regular Trust Board reports.
- Commenced the plan to review and evolve through organisation wide co-creation of the LTHT values and behaviours shaped by all colleagues.
- Continued preparation for the introduction of the new Applicant Tracking System (ATS), supporting fair and transparent recruitment, improved flow metrics, and alignment with actions from the Inclusive Recruitment audit.
- Development of the People Improvement Framework, providing a clearer, more practical set of workforce health and inclusion measures with named owners and reporting routes.

- Ongoing Trust-wide engagement, including senior leadership sessions, LTHT Live follow-ups, the Weekly Executive Board (WEB) meetings and local conversations, reinforcing the importance of listening, speaking up and visible follow-through.

This work continues to emphasise simplicity, consistency, and practical impact, reducing the risk of colleagues experiencing Inclusion and Belonging as “additional initiatives” rather than part of everyday working life.

3. Embedding Inclusion and Belonging

Our Inclusion and Belonging approach remain focused on enabling LTHT to deliver safe, high-quality patient care by creating an environment where colleagues feel safe, valued, and able to perform at their best.

Key principles include:

- Shared responsibility for raising concerns and listening well, whether related to patient safety, behaviours or working practices
- Simplifying people policies, processes, and systems across the colleague journey, making expectations clear and support easy to access.
- Embedding inclusion through everyday conversations and behaviours, not short-term programmes, or branding
- Trust-wide and local ownership, ensuring consistent application while allowing teams to address their own contexts.

Engagement continues across all sites, colleague groups and shift patterns through face-to-face conversations, local huddles, team briefs, LTHT Live sessions and senior leader meetings.

4. Quality and Performance Implications

The People Improvement Framework is increasingly utilised for tracking progress, bringing together different components within a unified system.

- Practical workforce health and inclusion metrics
- Clear ownership and review cycles
- Alignment with statutory requirements and IQPR reporting

The People Committee provides assurance before escalation to Trust Board, strengthening grip and enabling earlier identification of risks or variation.

All legal obligations are still being fulfilled, such as the following:

- Workforce Race Equality Standard (WRES)
- Workforce Disability Equality Standard (WDES)
- Equality Delivery System (EDS)
- NHS Staff Survey action plans
- Pay Gap reporting (Gender, Ethnicity, Disability)

As Inclusion and Belonging becomes more embedded, we expect continued improvements in:

- Colleague experience and morale.
- Confidence to speak up.
- Fair access to recruitment, development, and progression

The People Improvement Framework will track these impacts, with consistent updates provided to both the People Committee and the Trust Board.

5. Financial Implications

There are no new financial risks beyond what we have already committed to. We will soon review the resources within the People Function, which will include recruiting to current vacancies. Funding for improvement work will come from LTHT's evolving Inclusion & Belonging Improvement Plan.

6. Risk

There is a **workforce retention and morale risk** (Cautious). Colleagues may feel we are launching "more initiatives" if they do not see real, practical changes. We will reduce this risk by giving regular Trust-wide updates on progress and ensuring leaders visibly follow through on actions. We will also avoid branding this work as a separate initiative.

There is also a **regulatory risk** relating to Well-Led and Equality standards (Averse). The risk is that we may not be able to show clear improvements or fully embed Equality Impact Assessments (EQIAs). We will manage this by introducing the new People Improvement Framework with regular reporting, using EQIAs early in our planning, and improving the quality of ATS metrics.

7. Communication and Involvement

Internal and external communications continue to align Inclusion and Belonging with the wider Trust strategy, ensuring coherence rather than duplication. Colleague networks, CSUs, Corporate Departments, Professional groups, and all colleagues remain key partners in delivery.

8. Improving Health Equity

While focused on the workforce, Inclusion and Belonging actions also support the Trust's wider commitment to health equity, recognising colleagues as members of the communities we serve and contributing to long-term, systemic improvement.

The review placed a strong focus on health equity, with Public Health playing a key role in gathering and assessing evidence. The review's findings centred on identifying and tackling health inequalities.

Our Inclusion and Belonging strategy focus on our employees and includes measures to tackle workforce health inequalities. This will help create a long-term, systematic approach that improves health outcomes for colleagues, who are also members of the communities we serve.

We will follow strong equality and diversity practices and work to eliminate unfair and avoidable differences in healthcare. Promoting health equity is a core commitment supported by the work of the Board and its Committees.

9. Publication Under Freedom of Information Act

This document is accessible in accordance with the Freedom of Information Act 2000.

10. Recommendations

Note and be assured of the progress since 29 January 2026, in addition to the identification of action owners and target completion dates, the introduction of clear status reporting is highlighted in Appendix 1 and Appendix 2 of this paper.

11. Supporting Information

Appendix 1: High Impact Action plan, action owners, and target completion dates.

Appendix 2: Short-, Medium- and Long-term action plan, action owners, and target completion dates.

Authors

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March 2026

Appendix one- NHS equality, diversity, and inclusion improvement plan (High Impact Actions)

HIA	Action	Lead	Status	When	Progress
HIA-1 Chief executives, chairs and board members must have specific and measurable EDI objectives to which they will be individually and collectively accountable.					
1.1	Every board and executive team member must have EDI objectives that are specific, measurable, achievable, relevant, and timebound (SMART) and be assessed against these as part of their annual appraisal process.	Suzanne Dunkley	On Track	30-Jun-26	SD, JB and ODC working in collaboration to support the holistic review of Executive and NED Appraisals, including EDI objectives. For embedding within the 2026 Appraisal season.
1.2	Board members should demonstrate how organisational data and lived experience have been used to improve culture.	All Board members	On Track	31-Oct-26	To form part of the Inclusion and Belonging Board reporting
1.3	NHS boards must review relevant data to establish EDI areas of concern and prioritise actions. Progress will be tracked and monitored via the Board Assurance Framework.	All Board members	On Track	31-Oct-26	To form part of the Inclusion and Belonging Board reporting
HIA-2 Embed fair and inclusive recruitment processes and talent management strategies that target under-representation and lack of diversity.					
2.1	Create and implement a talent management plan to improve the diversity of executive and senior leadership teams and evidence progress of implementation.	Suzanne Dunkley	On Track	30-Jun-26	Roll out scope for growth conversations for Leaders in the 2025-26 Appraisal window.
2.2	Implement a plan to widen recruitment opportunities within local communities, aligned to the NHS Long Term Workforce Plan. This should include the creation of career pathways into the NHS such as apprenticeship programmes and graduate management training schemes. Impact should be measured in terms of social mobility across the integrated care system (ICS) footprint.	Chris Jones	On Track	30-Jun-26	Completed - Leeds Career Compass Gold Standard Apprenticeship process Rotational Apprenticeship programmes Established Graduate scheme Further work required - Social mobility measured needs to be explored.
HIA-3 Develop and implement an improvement plan to eliminate pay gaps.					
3.1	Implement the Mend the Gap review recommendations for medical staff and develop a plan to apply those recommendations to senior non-medical workforce.	Chris Jones & Elizabeth Garthwaite	On Track	31-Oct-26	Completed - Inclusive Recruitment Policy in place which includes Consultant and Medical and Dental Appointments. Flexible Working Policy in place. Further work to provide assurance of all the recommendations in the Mend the Gap report.
3.2	Analyse data to understand pay gaps by protected characteristic and put in place an improvement plan. This will be tracked and monitored by NHS boards. Reflecting the maturity of current data sets, plans should be in place for sex and race by 2024, disability by 2025 and other protected characteristics by 2026.	Chris Jones	On Track	31-Oct-26	Annual Gender Pay Gap, Ethnicity Pay Gap and Disability Pay Gap. To be maintained as part of the Inclusion and Belonging Board reporting.
3.3	Implement an effective flexible working policy including advertising flexible working options on organisations' recruitment campaigns.	Chris Jones	On Track	30-May-27	Completed - Inclusive Recruitment Policy in place. Flexible Working Policy in place. Flexible Working improvement Project completed. In progress - New Applicant Tracking System to be rolled out 9 March 2026. Complete Internal Audit actions for Inclusive Recruitment
HIA-4 Develop and implement an improvement plan to address health inequalities within the workforce.					
4.1	Line managers and supervisors should have regular effective wellbeing conversations with their teams, using resources such as the national NHS health and wellbeing framework.	Chris Jones	Completed	30-Jun-26	Completed Work underway as part of continuous improvement cycle.
4.2	Work in partnership with community organisations, facilitated by ICBs working with NHS organisations and arm's length bodies, such as the NHS Race and Health Observatory. For example, local educational and voluntary sector partners can support social mobility and improve employment opportunities across healthcare.	Chris Jones	Completed	01-Apr-26	Completed Previously collaborated on system recruitment events. Standard work in place.

HIA	Action	Lead		When	Progress
HIA-5 Implement a comprehensive induction, onboarding and development programme for internationally-recruited staff.					
5.1	Before they join, ensure international recruits receive clear communication, guidance and support around their conditions of employment ; including clear guidance on latest Home Office immigration policy, conditions for accompanying family members, financial commitment and future career options (by March 2024).	Chris Jones	On Track	31-Oct-26	Completed Part of Inclusive Recruitment Policy Process established to identifying staff new to UK, and on project plan for new recruitment system. - signposted to the Colleague Networks for support. International Recruitment ceased . Medical Inductions take place- cohort recruitment ceased. To progress Review of Corporate, Medical and Dental, Local Induction
5.2	Create comprehensive onboarding programmes for international recruits, drawing on best practice. The effectiveness of the welcome, pastoral support and induction can be measured from, for example, turnover, staff survey results and cohort feedback.	Chris Jones	On Track	31-Oct-26	Completed Standard work in place for onboarding, welcome and pastoral support. To progress Quantitative and qualitative measurement to be developed.
5.3	Line managers and teams who welcome international recruits must maintain their own cultural awareness to create inclusive team cultures that embed psychological safety.	Chris Jones	Completed	28-Feb-26	Completed International recruits colleague network in place. Active colleague networks encourage line manager involvement and participation.
5.4	Give international recruits access to the same development opportunities as the wider workforce. Line managers must proactively support their teams, particularly international staff, to access training and development opportunities. They should ensure that personal development plans focus on fulfilling potential and opportunities for career progression.	Chris Jones	On Track	30-Jun-26	To progress Scope for growth conversations as part of the annual appraisal.
HIA	Action	Lead		When	Progress
HIA-6 Create an environment that eliminates the conditions in which bullying, discrimination, harassment and physical violence at work occur.					
6.1	Review data by protected characteristic on bullying, harassment, discrimination and violence. Reduction targets must be set and plans implemented to improve staff experience year-on-year.	Chris Jones	On Track	30-Jun-26	Completed Annual Employment Relations reporting to Board Bi-annual Freedom to speak up report To progress Implementation of the People Improvement Framework
6.2	Review disciplinary and employee relations processes. This may involve obtaining insights on themes and trends from trust solicitors. There should be assurances that all staff who enter into formal processes are treated with compassion, equity and fairness, irrespective of any protected characteristics. Where the data shows inconsistency in approach, immediate steps must be taken to improve this.	Chris Jones	On Track	30-Jun-26	Completed Weekly MHPS review Monthly complex case review Monthly lessons learnt review Daily escalations To progress Implementation of the People Improvement Framework with Inclusion and Belonging measures for improvement. Avoidable Harm roll out

HIA	Action	Lead		When	Progress
HIA-6 Create an environment that eliminates the conditions in which bullying, discrimination, harassment and physical violence at work occur.					
6.3	Ensure safe and effective policies and processes are in place to support staff affected by domestic abuse and sexual violence (DASV). Support should be available for those who need it, and staff should know how to access it.	Chris Jones	On Track	31-Dec-26	Completed Intranet resource for all colleagues Report for support and ongoing work on Violence Prevention Reduction reported to Board Annual Employment Relations reported to Board Freedom to Speak up reported to Board Health and Safety reported to Board To progress Review and implementation of the Sexual Misconduct Policy Framework and associated actions.
6.4	Create an environment where staff feel able to speak up and raise concerns, with steady year-on-year improvements. Boards should review this by protected characteristic and take steps to ensure parity for all staff.	Chris Jones Alan Sheppard	On Track	30-May-26	Completed Rolled out of Freedom to Speak Up App Increased visibility and number of FTSU champions FTSU Steering Group established Regular reporting to Board Incorporated into the People Improvement Framework Aligned to FTSU Improvement Plan Community of practice established Champions development sessions set up as standard work
6.5	Provide comprehensive psychological support for all individuals who report that they have been a victim of bullying, harassment, discrimination or violence.	Chris Jones	On Track	30-Jun-26	Completed Health and Wellbeing support available physical, mental and financial.
6.6	Have mechanisms to ensure staff who raise concerns are protected by their organisation.	Chris Jones Alan Sheppard	On Track	30-May-26	Completed Procedure for Dealing with Reported Negative Impact (Detriment) Risk Assessment for Reported Negative Impact (Detriment)

Appendix two - Inclusion and Belonging action plan presented to Board in November

No	Action	Lead	When	Status	Progress
Short-Term Priorities					
1.1	Ensure all board members champion at least one EDI action in the Trust: All board members are expected to champion at least one EDI action within the Trust. This commitment ensures that EDI remains a strategic priority and is visibly supported at the highest levels of leadership.	Suzanne Dunkley & Jo Bray	30-Jun-26	On Track	JB and ODC working in collaboration to support the holistic review of Executive and NED Appraisals, including EDI objectives. For embedding within the 2026 Appraisal season.
1.2	Review and re-define the role of Staff Networks and their Chairs: Further defining and strengthening the role of staff networks, and their chairs, in alignment to the delivery of the Trust's EDI Plan. These networks are recognised as pivotal contributors to shaping an inclusive culture across the Trust.	Chris Jones	31-Mar-26	On Track	Network Collaborative established (bi-monthly collaborative of Network Chairs first one 11/03/2026), and improvement actions identified and underway, to enable greater Network forward planning, alignment of activity across Networks and Trust strategies, impactful alignment to Executives, roles/responsibilities/accountability clarity, governance standardisation, and a proposal for a new model for the Faith and Belief Network. This is now transitioning into standard work.
1.3	Raise the profile of EDI champions and allies across the Trust: Further strengthen and raise the profile of champions and allies across the Trust. These individuals play a crucial role in advocating for inclusion, supporting colleagues, and driving local cultural change.	Chris Jones	31-May-26	On Track	Review of various Champion roles and supporting infrastructure underway. Pilot commenced within Estates & Facilities. Draft SBAR developed for presentation at March FTSU Steering Group.
Medium-Term Priorities					
2.1	Reasonable adjustments - supporting consistent and impactful use: To renew our collective focus on reasonable adjustments. Enabling effective support and utilisation of adjustments to ensure consistently equitable working conditions.	Chris Jones	31-Oct-26	On Track	Working group set up Support from Staff Networks, Health and Wellbeing, Operational HR and CSUs
2.2	Simple belonging language: To review and utilise simple, inclusive language that feels accessible by all, and promotes active use to empower a sense of belonging throughout the organisation.	Suzanne Dunkley Jane Westmoreland	30-Jun-26	On Track	
Long-Term Priorities					
3.1	Impactful training for all in a management position: Review and make available impactful training, that ensures that all leaders across the Trust are equipped with the knowledge and sensitivity required to foster inclusive environments and uphold EDI principles.	Chris Jones	31-Aug-26	On Track	Review underway
3.2	Review how, where, and when we invest our resources: To identify and support further improvements.	Suzanne Dunkley	30-Jun-26	On Track	
3.3	Available data that is easy to access, tells you about your team and is useful and actionable: Review and develop data that is easily accessible, relevant, and actionable. Enabling the Trust, leaders and teams to make informed decisions that support inclusion and address disparities effectively.	Suzanne Dunkley	30-Jun-26	On Track	New PIF process embedded, to inform local action and support. Power BI Dashboard under development.

No	Action	Lead	When		Progress
Long-Term Priorities					
3.4	Communication (from 'ward to board') - engaging staff on the frontline: Strengthen communication strategies and opportunities to enable greater engagement and involvement, from frontline staff to senior leadership, in EDI practice and activity. This 'ward to board' approach ensures that EDI messages and initiatives are consistently shared, understood and accessible across all levels.	Suzanne Dunkley Jane Westmoreland	31-Aug-26	On Track	
3.5	Workforce Health Equity: Following the research conducted over the last year, implement the recommended outcomes. This supports the wellbeing of all employees, particularly those from underrepresented or vulnerable groups.	Chris Jones	31-Mar-27	On Track	Research on public and staff health inequalities conducted and completed. This work has informed the Workforce Health Equity Improvement Plan for 2026/27.