

## REPORT TO THE HOSPITAL MANAGEMENT COMMITTEE

<b>REPORT TITLE</b>	Workforce Disability Equality Standard (WDES) Summary Report and Plan 2021
<b>AUTHOR</b>	Simon Howard, Equality, Diversity, Inclusion and Armed Forces Manager
<b>EXECUTIVE SPONSOR</b>	Louise Tibbert, Chief People Officer
<b>DATE OF MEETING</b>	23 <sup>rd</sup> July 2021
<b>PRESENTED FOR</b>	Decision
<b>ITEM PREVIOUSLY CONSIDERED BY</b>	Equality, Diversity and Inclusion Steering Group

**Presented For: Definitions**

Information	For information only. Not to be discussed at meeting unless members have specific questions.
Discussion	For discussion and possibly future decision. This includes items presented for assurance.
Decision	For approval and/or when any other decision is required

### PURPOSE OF THE REPORT

To seek approval of the data collected as part of the Workforce Disability Equality Standard (WDES) and the programme of work developed to support improvement.

### RISKS RELEVANT TO THE PAPER

Risk ID	Risk Description
	Workforce Disability Equality Standard is a mandatory programme for all NHS providers. Failure to comply will have a detrimental effect upon the reputation of the Trust.

**RISK APPETITE RELEVANT TO THE PAPER** (insert relevant section from Risk Appetite Statement from Risk Management Policy)

DOMAIN	TRUST RISK APPETITE LEVEL	DESCRIPTION OF RISK APPETITE
<b>Financial/ Value for Money (VfM)</b>	<b>Open</b> - <i>Willing to consider all potential delivery options and choose while also providing an acceptable level of reward (and VfM)</i>	Prepared to invest for return and minimise the possibility of financial loss by managing the risks to a tolerable level. Value and benefits considered (not just cheapest price). Resources allocated in order to capitalise on opportunities.

### THE COMMITTEE IS ASKED TO:

1. Approve the data presented for submission.
2. Approve the Improvement Programme presented

## STRATEGIC GOALS THIS REPORT SUPPORTS *(Check all that apply)*

Delivering outstanding care and experience	✓
Recruiting developing and retaining our workforce	✓
Improving and developing our services and infrastructure	✓
Working together with local health and social care providers	✓
Delivering financial sustainability	<input type="checkbox"/>

## OTHER IMPLICATIONS OF THE PAPER

<b>Legal/ Regulatory Relevance:</b>	<ul style="list-style-type: none"> <li>• Equality and Human Rights Commission</li> <li>• Care Quality Commission</li> </ul>
<b>NHS Constitution Delivery</b>	<ul style="list-style-type: none"> <li>• The NHS provides a comprehensive service, available to all</li> <li>• The NHS is accountable to the public, communities and patients that it serves</li> </ul>
<b>Freedom of Information Release</b>	This report can be released under the Freedom of information Act 2000

## Equality and Diversity Implications *(Check all that apply)*

Age	Gender	Ethnicity	Disability	Pregnancy/ Maternity	Marriage/ Civil Partnership	Religion/ Belief	Sexual Orientation	Gender Reassignment
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	✓	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*This report provides a programme designed specifically to improve the offering for disabled staff but the work laid out will have intersectional benefits for other protected and vulnerable groups.*



Outstanding Health and Wellbeing



Outstanding People



Outstanding Patient Care



Outstanding Leadership



Outstanding Communications

## Executive Summary

Background	<p>The Workforce Disability Equality Standard (WDES) is an obligation for the Trust. Data must be submitted within a specified period (between 1<sup>st</sup> July and 31<sup>st</sup> August in 2021) providing information relating to disability equality.</p> <p>A plan to demonstrate improvement must be published on the Trust's website by 1<sup>st</sup> October 2021.</p>
Summary of Key Points	<ul style="list-style-type: none"><li>• Sets out the data required for submission to NHS Improvement as part of the annual Workforce Disability Equality Standard (WDES) Programme</li><li>• Outlines a programme of work to be developed to support improving the Trusts position in relation to the data</li></ul>
Quality Impact	<p>Approximately 10% of the Trust's local, working age population identified themselves as having a disability or life limiting condition (2011 Census).</p> <p>It is acknowledged by the Trust and by NHS England that an effective way to improve services for communities is through representation within employment.</p> <p>By implementing programmes to support the employment of disabled people, the Trust will be able to use their lived experiences to design accessible services which meet the needs of people with disabilities; improving the quality of care delivered.</p>
Financial Implication	No financial implications.
Conclusion	The data collected shows the Trust has further work to do. This report recommends the Board approve the data presented for submission and the plan developed.

## Overview

The Workforce Disability Equality Standard (WDES) is a set of ten specific measures that will enable NHS organisations to compare the experiences of disabled and non-disabled staff. The Trust will use this information to develop an improvement programme to demonstrate progress against the indicators of disability equality.

The WDES has been commissioned by the Equality and Diversity Council (EDC) and developed through a pilot and extensive engagement with Trusts and key stakeholders. It is mandated through the NHS Standard Contract.

This document provides the Trust's responses to the WDES Online Report and allows the Trust to identify which pay points under or over represent each group in comparison with the average representation for that staff group.

The collection of this data was carried out in accordance with the WDES guidance provided by NHS England for the period 1st April 2020 to 31st March 2021.

## Basic Information about the Trust

Total number of staff employed within this organisation at the date of the report:	7087
Proportion of Disabled staff employed within this organisation at the date of the report:	3.67%
The proportion of total staff who have self-reported their disability status:	73.23%

## Metric 1 – Staff Position

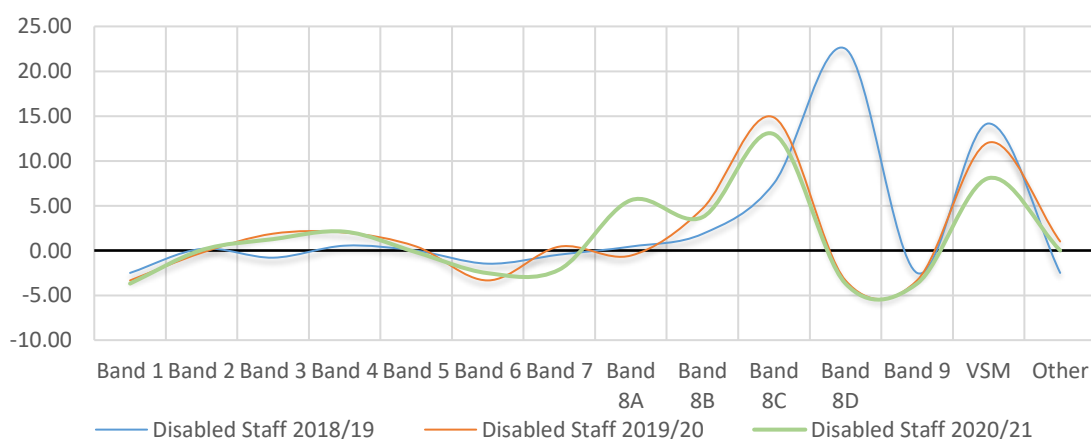
The percentage of staff in Agenda for Change pay bands or medical and dental subgroups and very senior managers (including Executive Board members) compared with the percentage of staff in the overall workforce. The data for this Metric is a snapshot as at 31 March 2021.

The Tables and graphs below provide a means to identify the position of staff with disabilities within the pay structures of the organisation.

### Non-clinical Staff

	Disabled 2020/21		Non-Disabled 2020/21		Unknown 2020/21		Total
	Total	%	Total	%	Total	%	
Under Band 1	0	0.00	18	69.23	8	30.77	26
Band 1	0	0.00	0	0.00	9	30.64	9
Band 2	25	3.74	439	65.62	205	30.64	669
Band 3	19	4.96	299	78.07	65	16.97	383
Band 4	15	5.79	190	73.36	54	20.85	259
Band 5	5	3.50	104	72.73	34	23.78	143
Band 6	1	1.16	64	74.42	21	24.42	86
Band 7	1	1.56	55	85.94	8	12.50	64
Band 8A	4	9.30	34	79.07	5	11.63	43
Band 8B	2	7.41	20	74.07	5	18.52	27
Band 8C	2	16.67	8	66.67	2	16.67	12
Band 8D	0	0.00	4	57.14	3	42.86	7
Band 9	0	0.00	4	66.67	2	33.33	6
VSM	2	11.76	10	58.82	5	29.41	17
Other	0	0.00	0	0.00	0	0.00	0

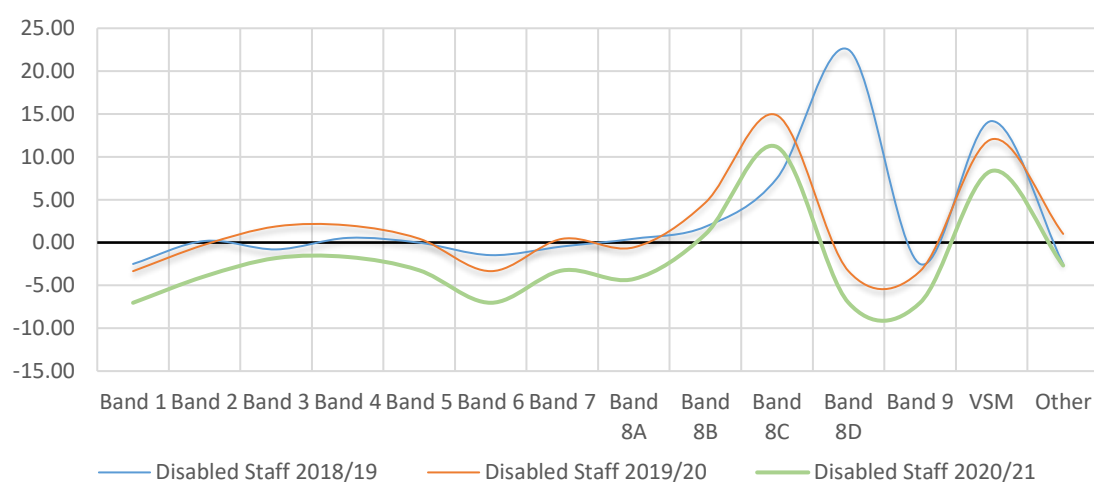
### Representation vs Organisational Average



## Clinical Agenda for Change Staff

	Disabled 2020/21		Non-Disabled 2020/21		Unknown 2020/21		Total
	Total	%	Total	%	Total	%	
Under Band 1	0	0.00	5	83.33	1	16.67	6
Band 1	0	0.00	0	0.00	0	0.00	0
Band 2	36	3.87	746	80.22	148	15.91	930
Band 3	9	5.14	123	70.29	43	24.57	175
Band 4	17	5.96	198	69.47	70	24.56	285
Band 5	46	3.40	940	69.53	366	27.07	1352
Band 6	46	4.85	706	74.39	197	20.76	949
Band 7	22	3.80	392	67.70	165	28.50	579
Band 8A	0	0.00	91	70.00	39	30.00	130
Band 8B	0	0.00	19	59.38	13	40.63	32
Band 8C	0	0.00	9	56.25	7	43.75	16
Band 8D	1	33.33	2	66.67	0	0.00	3
Band 9	0	0.00	1	0.00	0	0.00	1
VSM	0	0.00	1	100.00	0	0.00	1

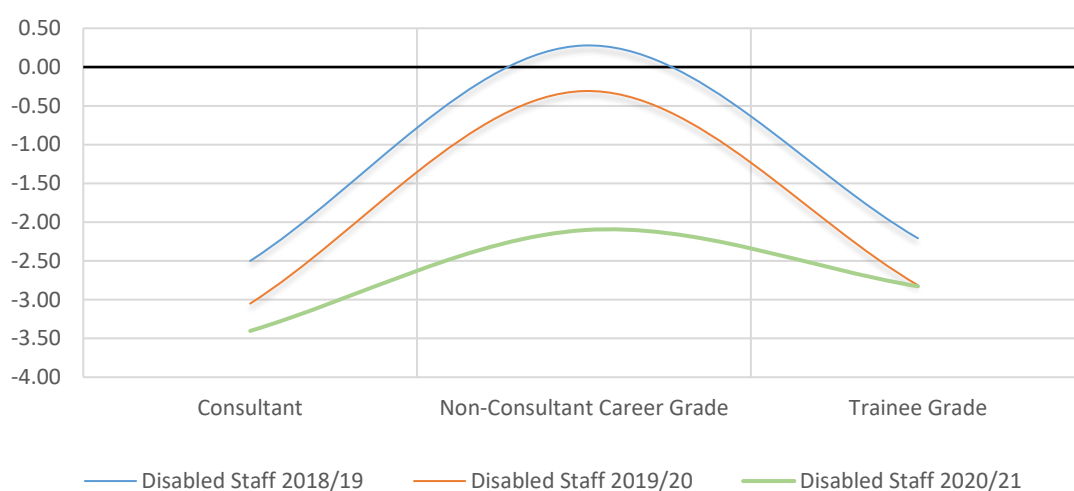
## Representation vs Organisational Average



## Medical Staff

	Disabled		Non-Disabled		Unknown		Total
	Total	%	Total	%	Total	%	
Medical & Dental Staff, Consultants	1	0.29	210	60.34	137	39.37	348
Medical & Dental Staff, Non-consultants career grades	1	1.59	40	63.49	22	34.92	63
Medical & Dental Staff, trainee grades	4	0.86	197	42.46	263	56.68	464
Other	1	50.00	1	50.00	0	0.00	2

### Representation vs Organisational Average



## Metric 2 – Recruitment

Relative likelihood of non-disabled staff compared to Disabled staff being appointed from shortlisting across all posts.

- i. This refers to both external and internal posts.
- ii. If your organisation implements a guaranteed interview scheme, the data may not be comparable with organisations that do not operate such a scheme. This information will be collected on the Survey section to ensure comparability between organisations.

	Disabled	Non-Disabled	Unknown
Number of Shortlisted Applicants	551	15997	218
Number appointed from shortlisting	43	1206	39
Likelihood of shortlisting/appointment	0.08%	0.08%	0.18%
Relative likelihood of non-disabled staff compared to Disabled staff being appointed from shortlisting across all posts			0.97

## Metric 3 – Capability

Relative likelihood of Disabled staff compared to non-disabled staff entering the formal capability process, as measured by entry into the formal capability procedure.

- i. This Metric will be based on data from a two-year rolling average of the current year and the previous year.
- ii. This metric applies to capability on the grounds of performance and not ill health.

Clarification for people completing the data collection: enter the number of staff entering the capability process from 1 April 2019 to 31 March 2021, divided by 2.

	Disabled	Non-Disabled	Unknown
Number of staff in workforce	260	4930	1897
Number of staff entering the formal capability process	1	11	5
Likelihood of staff entering the formal capability process	0.38%	0.22%	0.26%
Relative likelihood of Disabled staff entering the formal capability process compared to non-disabled staff			1.72

Note: Metrics 4 to 9a are drawn from the national systems and do not require submission by the Trust.

## Metric 9b – Engagement

Has your organisation taken action to facilitate the voices of Disabled staff to be heard?

Yes

Please provide at least one practical example of current action being taken in the relevant section of your WDES annual report.

Trust has in place a Disabled Staff Network which is well attended, has formal structures, and executive lead and appointed chair. The network has responsibility for a range of policy options and reports directly to the EDI steering group.

## Metric 10 – Board Representation

	Disabled	Non-disabled	Unknown	Total
Total Board members	2	10	5	17
How many are voting members?	2	10	5	17
Number of non-voting members	0	0	0	0
How many are Exec Board members?	2	2	2	6
Number of non-exec members	0	8	3	11
Number of staff in overall workforce (from Metric 1)	260	4930	1897	7087
Total Board members - % by Disability	11.76%	58.82%	29.41%	
Voting Board members - % by Disability	11.76%	58.82%	29.41%	
Non-Voting Board Member - % by Disability	0.00%	0.00%	0.00%	
Executive Board Member - % by Disability	33.33%	33.33%	33.33%	
Non-Executive Board Member - % by Disability	0.00%	72.73%	27.27%	
Overall workforce - % by Disability	3.67%	69.56%	26.77%	
Difference % (Total Board - Overall workforce)	8.09	-10.74	2.64	
Difference % (Voting membership - Overall Workforce)	8.09	-10.74	2.64	
Difference % (Executive membership - Overall Workforce)	29.66	-36.23	6.56	



# Survey

## Question 1

Name and contact details of the lead(s) compiling this report.

Name:	Simon Howard	Email:	simon.howard2@nhs.net
Name:	Denise McMurray	Email:	denise.mcmurray1@nhs.net

## Question 2

Name and contact details of the Board lead for the Workforce Disability Equality Standard.

Name:	Louise Tibbert	Email:	louise.tibbert@nhs.net
Job Title:	Chief People Officer		

## Question 3

Name of commissioner, name of commissioning body and email address that the WDES Annual report (containing the WDES metrics report and action plan) will be sent to.

Name of Commissioner:	Simon Howard	Email:	Simon.howard7@nhs.net
Name of Commissioning Body:	Cambridgeshire and Peterborough CCG		

## Question 4

Unique URL link or existing web page on which the WDES Annual report will be published.

<https://www.nwangliaft.nhs.uk/advice-support/edi/>

## Question 5

Date of Board meeting at which organisation's WDES Annual report will be ratified. If the date is not known, please provide an approximate date or explain why a date cannot be provided.

10th October 2021

## Question 6

Does your organisation participate in any programmes or initiatives that are focused on disability equality and inclusion?

Yes

If yes, please provide initiatives

- Project SEARCH
- Disability Confident Scheme
- Disability Equality Staff Network Group

## Question 7

Do your staff have access to the ESR self-service portal?

Yes

## Question 8

Since you published your WDES 2020/21 Action Plan, have any steps been taken within your organisation to improve the declaration rate for disability status?

Yes

If yes, please share any examples of interventions that have increased declaration rates at your organisation.

- Promotion of ESR self-service to encourage staff to update details
- Internal communications (e.g. staff email, intranet page)

#### Question 9

What level of Disability Confident accreditation does your organisation currently hold?

Level 3 -  
Leader

#### Question 10

Does your organisation use the Guaranteed Interview Scheme?

Yes

Please add any examples of interventions that have impacted positively on the recruitment of Disabled staff.

- Review of the implementation of the Guaranteed Interview Scheme
- External communications

#### Question 11

Has your organisation compared any of the following other datasets you hold to the WDES Metric 4 (Harassment, Bullying or Abuse)?

No

#### Question 12

Please add any actions taken since your 2020/21 WDES Action Plan was published to reduce harassment, bullying or abuse in relation to Disabled staff.

Yes

- Disability Awareness campaigns
- Champions/Ambassadors/Advisors (Allyship Programme)
- Peer support scheme (via Staff Network)
- Training events

#### Question 13

Does your organisation provide any targeted career development opportunities for Disabled staff?

Yes

If yes, or planned, please select relevant examples. Please feel free to expand in the free text box.

The development of Person-Centred Career plans to support people within the organisation to plan and develop meaningful careers using person centred planning techniques and circle of support processes. This links to a comprehensive disability passport which can be expanded as needed.

#### Question 14

Does your 2020/21 WDES Action Plan set out any targeted actions to reduce presenteeism i.e. feeling pressured to come to work when not feeling well?

Yes

If yes, please specify

The issuing of disability passports where request, which include clear, agreed actions for the staff member, line manager and wider team is designed to prevent presenteeism.

<p>Question 15</p> <p>Does your 2020/21 WDES Action Plan set out any targeted actions to increase the workplace satisfaction of Disabled staff?</p> <ul style="list-style-type: none"> <li>• Disability networks/groups</li> <li>• Consultation events</li> <li>• Line manager disability awareness training</li> <li>• All staff disability awareness training</li> </ul>	Yes
<p>Question 16</p> <p>Does your organisation have a reasonable adjustments policy?</p>	No
<p>Question 17</p> <p>Are costs for reasonable adjustments met through centralised or local budgets?</p>	Local Budgets
<p>Question 18</p> <p>Have you undertaken any actions in the last 12 months to improve the reasonable adjustments process?</p>	Yes
<p>If yes, or planned, please select relevant examples. Please feel free to expand in the free text box.</p> <ul style="list-style-type: none"> <li>• Training for managers</li> <li>• Consultation events involving Disabled staff</li> <li>• Guidance and support provision</li> <li>• Internal communications</li> <li>• Sharing best practice examples through induction/intranet/training</li> <li>• Disability/Workplace adjustments passport</li> </ul>	
<p>Question 19</p> <p>Please list any actions contained in your 2020/21 WDES Action Plan that have not been completed.</p> <ul style="list-style-type: none"> <li>• Mandating of implicit bias testing as part of induction</li> <li>• Introduction of Cultural Ambassadors Programme</li> </ul>	
<p>Question 20</p> <p>Are there plans for your Trust to merge with another trust in the next 12 months?</p>	No
<p>Question 21</p> <p>Has the Board reviewed the 2020/21 WDES Action Plan in the last 6 months?</p>	Yes
<p>Question 22</p> <p>Do you have any further comments?</p>	No

## Improvement Programme

Building on our status as one of only 330 Disability Confident Leader organisations in the UK, we will launch The Confident Project: an innovative and leading employment programme for people with disabilities and neurodivergent people.



Health inequalities are driven by structural discrimination, which is where systems are designed in a way that restricts or limits access or opportunity to specific groups. This is more often through oversight rather than a deliberate exclusion of groups, but nevertheless, the result is the same – poorer health outcomes for people from particular groups.

The confident Project is designed to help staff gain greater insight of the limitations experienced by people with disabilities, in particular people with Learning Disabilities and Neurodiversities.

Through recruitment of people with a range of disabilities into clinical and non-clinical roles, through the development of parallel training programmes to ensure people with disabilities are peers to those without and through representation at senior levels within the organisation, the subtle requirements of people with additional needs will be tailored into solutions and processes for patients.

The Confident project sets out a range of interventions from recruitment, training, and induction, through to promotion and career planning ensuring people with additional needs have access to jobs in the Trust and those jobs lead to meaningful careers.

Through greater contact with people with disabilities, decision makers will start to develop processes and systems that factor out the structural discrimination that exists today.

### **Adapted Recruitment**

Working in partnership with local education providers and third sector organisations we will build a sustainable model of disability employment.

The Trust will open a range of ways people with disabilities can enter the workforce, providing a non-linear approach that meets the needs of the individual.

### **Volunteering**

Volunteer options provide the opportunity for people with disabilities to experience the workplace and identify the skills that they have or need to develop to gain employment.

A wide range of volunteering options will be developed to provide a meaningful experience of work in a variety of settings.

### **Supported Internships**

Supported internships are unpaid roles within the Trust which provide the individual with the opportunity to experience work in a more formal way, adhering where possible to working time restrictions and leave allocations.

The supported internship should align to and have the potential for an employed role upon completion of up to one year.

Supported Interns bring with them a Job Coach, who will support them to understand and undertake the role on a tapering basis throughout their internship.

After a period (maximum of one year) if the supported intern has proven their competence in the role, the line manager can choose to offer them the position without the need for formal interview processes.

Should the supported intern fail to meet the standards required for the role, they may choose to undertake another supported internship in a different role where available.

## **Supported Apprenticeships**

Supported apprenticeships provide a means for people with additional needs to develop skills and gain qualifications whilst receiving support from a job coach, offering a blended model between the support offered as part of a supported internship, the formal requirements of an apprenticeship.

The Supported apprentice will work within the Trust as a paid member of staff, working within the rules followed by other apprentices but with reasonable adjustments made to support them in a more specific way.

Job coaches are employed and provided by local colleges who mentor and guide the apprentice on a tapering basis through their work and studies, preparing them to enter the workforce as a full member of staff.

In line with other apprenticeship models, this role should align to a permanent position upon completion of the course and the apprentice should be offered that role provided they meet the required standards.

## **Parallel Apprenticeships**

Parallel apprenticeships align the individual's supported apprenticeship to a field taken up by other apprentices without additional needs.

Where a non-disabled apprentice may work to a particular level, the parallel apprentice will study to the limit of their abilities alongside the non-disabled apprentice, creating an environment in which the two apprentices can build a strong professional relationship, effectively giving the non-disabled apprentice an insight into the needs of the person with a disability which provides them a more nuanced understanding of the needs of people with a variety of disabilities.

This process effectively creates a reverse mentoring system, upskilling the future workforce to become more compassionate and knowledgeable about the nature of people with disabilities.

## **Interviews and Skills-Based Assessments**

If an interview is likely to be representative of the kind of work likely to be conducted within the role, this may be the most effective way of identifying the best person for a position, however, interviews are more often than not, not reflective of the nature of the work done by staff within the Trust. They offer very little in the way of meaningful insight into the skills and abilities of the individual but can be used to test an individual's knowledge under pressure.

Where a role is overwhelmingly physical or practical, a skills-based assessment will often prove more indicative of the person's ability to meet the demands of the job.

Skills based assessments may also not however be truly reflective of an individual's abilities on their own.

The Trust will develop a matrix-based approach, providing scoring against a standardised framework of interview questions and skills assessment so a judgement on an individual's ability to perform can be achieved based on a choice of recruitment processes, giving the individual and recruiting manager the opportunity to choose the most effective recruitment process for themselves: whether fully interview-based, skills based or a blended approach.

## **Training**

### **Systematic Instruction**

Processes to support staff with additional needs to access training will be developed, this will include adjusting induction to be delivered in a way that breaks down the tasks into small parts and uses repetitive teaching to ensure understanding and knowledge.

Systematic instruction can take a significantly longer period to achieve the same outcomes as that for those without additional needs, therefore the completion of this training may not reasonably align with the recruitment cycles of roles.

The Trust will introduce proactive training with external providers to help develop a pool of trained people from which applicants can be recruited using adapted methods.

## **Career Progression**

### **Person Centred Career Planning**

A process of supporting planning to help staff with disabilities implement the right support at the right time throughout their careers will be developed. This will enable those staff to maintain and build high quality careers and achieve their full potential within the organisation.

The organisation will use processes that engage the staff member's wider support networks, this will include colleagues, friends and family as well as professional advice via occupational health.

### **Disability Passports**

Disability passports will be implemented to ensure staff with additional needs are supported throughout their working life. The passports provide appropriate information to managers and team members to ensure staff with additional needs receive inclusive and compassionate support in the workplace.

The agreed content of an individual's disability passport will be held within a staff member's personal file, ensuring any change in management will maintain continuity.

Disability passports may be developed as part of a Person-Centred Career Plan but may also work as a stand-alone document.

### **Innovative Reasonable Adjustments**

Managers will use a wide range of advice and guidance from a range of sources to identify more creative ways to support their staff. Much advice can be found by researching the advice given by specialist charitable organisations, but this will not necessarily represent the complete range of adjustments that can be made.

The intersectional benefit of reasonable adjustments made across the sphere of EDI will be recorded and examples provided via an easy to access support hub to provide consistency.

## **Mentoring**

A range of adapted mentorships will be developed to support staff with disabilities and neurodiversities to draw upon the knowledge and experience of staff with similar experiences.

## **Leadership**

NHS England's plan to improve the EDI requirements for future Board members include activism as a key criterion for future board members.

The Trust will utilise this to ensure people with lived experience of disability, either personally or via comprehensive experience as a family member/carer to ensure representation of people with disabilities is embedded within the Board membership.

The Trust will use outreach programmes to encourage people to apply to join the board as non-executive directors with a more diverse background and provide initiatives to support development where candidates require additional support to meet the appointable criteria of NED roles.

## **Documentation**

The Accessible Information Standard will be widened to include documentation for staff: from application to day-to-day processes, guidance of adjustment into a variety of formats will be developed including:

- Easy Read
- Large Print
- Soft Tone

## **Managers**

A programme of upskilling managers and providing support will be developed. Resources will be provided via an easy to access hub, with advance enquiries being supported directly by the EDI and Workforce teams.

Training will be provided as part of leadership programmes to give clear and practical examples of reasonable adjustments to support managers to utilise the facilities made available.

## **Key Initial Actions**

1. Identify key volunteer roles by 31<sup>st</sup> December 2021
2. Align skills required in specific roles against key components of person specifications by 28<sup>th</sup> February 2022
3. Identify potential volunteers by 30<sup>th</sup> April 2022
4. Develop support provision by 31<sup>st</sup> December 2021
5. Establish and widen offering for Supported Internships within the Trust by 30<sup>th</sup> September 2021
6. Identify Job coach provision by 1<sup>st</sup> September 2021
7. Identify roles across a spectrum of disciplines by 31<sup>st</sup> July 2021
8. Recruit first cohort of potential interns by 30<sup>th</sup> September 2021
9. Development of documentation guidance by 31<sup>st</sup> December 2021
10. Building of links with external providers by 1<sup>st</sup> September 2021
11. Development of easy to access support hub by 31<sup>st</sup> December 2021
12. Development of training packages for managers and team members by 1<sup>st</sup> September 2021
13. Development of first version of Person-Centred Career Planning tools by 1<sup>st</sup> September 2021
14. Development of mentoring programme by 1<sup>st</sup> April 2022
15. Review of Disability Passports by 1<sup>st</sup> April 2022
16. Presentation of Systematic Instruction Programme by 1<sup>st</sup> September 2021

## **Key Measurements**

1. We will expand our offering of supported internship opportunities to 20 placements per year by 2025
2. We will develop a parallel apprenticeship scheme reaching across clinical and non-clinical roles by the end of 2023
3. We will create a pool of disabled talent and set a requirement for recruiters to search for appropriate candidates from here before offering roles out to wider recruitment. This will be created by September 2022.
4. The Trust's WDES data will show steady progress throughout the programme.
5. A range of Key Performance Indicators (KPIs) will be developed to support the consistent reporting of data to assess the impact of The Confident Project.