

Report to:	Public Board of Directors	Agenda item:	
Date of Meeting:			

Title of Report:	WDES Submission
Status:	For information
Board Sponsor:	Claire Radley, Director for People
Author:	Gayle Williams, Equality and Diversity Officer
Appendices	Appendix 1: WDES Indicators Appendix 2: Disability definitions

1. Executive Summary of the Report
This paper outlines the Trust's performance against the Workforce Disability Equality Standard (WDES) and, where shortcomings have been identified; a number of actions will be undertaken over the next 12 months from 1 st August

2. Recommendations (Note, Approve, Discuss)
Board of Directors is asked to note the report and be assured that the Diversity and Inclusion Steering Committee will monitor its implementation on a quarterly basis as part of a standing agenda item on the committees meeting.

3. Legal / Regulatory Implications
The Trust has a statutory obligation under the Equality Act 2010 to publish information to demonstrate compliance with the public sector equality duty at least annually and is further required to publish the results of the annual WDES data collection and subsequent action plan.

4. Risk (Threats or opportunities, link to a risk on the Risk Register, Board Assurance Framework etc)
Workforce risks associated with this report are monitored through the Diversity and Inclusion Steering Committee

5. Resources Implications (Financial / staffing)
None.

6. Equality and Diversity
This report supports equal opportunities for all staff.

7. References to previous reports

8. Freedom of Information
Public

1. Introduction

1.1 This paper outlines the Trust's performance against the Workforce Disability Equality Standard (WDES) and, where shortcoming has been identified, identifies a number of actions to be undertaken over the next 12 months.

2. Background

2.1 Following the implementation of the WRES, (Workplace Race Equality Standard), NHS England has, for the first time introduce equality standards for staff with disabilities. This reflects a lengthy consultation process on the metrics to be used as part of the standard. As with the WRES, the WDES is a requirement for NHS providers, with an annual report required to be submitted to the co-ordinating commissioner, alongside an action plan.

2.2 The Care Quality Commission will also consider the Workforce Disability Equality Standard in their assessments of how "well-led" NHS providers are.

3. Workforce Disability Equality Standard (WDES)

3.1 The WDES comprises nine standards against which the Trust is required to assess its performance:

- Three standards cover the comparison of staff with and staff without disabilities staff metrics held within the Electronic Staff Record (ESR)
- Five standards cover the comparison of staff with and staff without disabilities responses within the annual NHS staff survey results for 2018
- One standard looks at the staff engagement score for staff with and without disabilities
- One standard covers an assessment of whether our Board is representative of the overall staff within the RUH.

3.2 The details of the Trust's performance highlighted in Section 4 forms the basis for the formal submission to NHS England due by August 2019. The WDES standards are contained within **Appendix 1**.

3.3 Data Accuracy and Definition of Disability

"I put pressure on myself to appear 'normal'. I don't want to be treated differently. I feel I need to be better than everyone else to 'prove' I can do the job".

RUH staff member, Equal Abilities Network

3.4 Staff are asked to self-disclose whether or not they consider themselves to have a disability. There are multiple definitions used by the Trust to define disability, the definitions used by the Equality Act, NHS Jobs and the NHS staff survey are contained within **Appendix 2**. Broadly the Trust defines having a disability as identifying as

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having a physical, mental, learning or sensory impairment or long term health condition which impacts on the staff member's day to day life. This data is collected at appointment to the Trust and again if staff move from one post to another.

3.5 3% of the overall workforce state they consider themselves to have a disability. 72% of staff state they do not consider themselves disabled, 1% prefer not to say. The remaining 24% of the organisation does not have the answer to this question recorded.

3.6 In part this is due to staff who have been here a long time and did not have this information entered upon appointment, (the figure is reducing year on year as staff leave the organisation and new staff join). Furthermore, staff do not routinely update their details if they develop a disability during their employment.

3.7 Figures from the annual staff survey indicate that 16% of staff who chose to complete the survey considers themselves to have a disability. This would indicate that the number of staff who consider themselves to have a disability is closer to 7% than the 3% recorded.

3.8 There are many reasons as to why a person may choose to not self-declare. They may not 'feel' disabled; for instance not all people with diabetes, or undergoing treatment for cancer would consider themselves to have a disability, yet both are considered disabilities under the Equality Act. Concern over stigma and the ability to gain a promotion/job may be a factor for some as well as not wishing to be treated differently or having assumptions made about them are all factors.

3.9 Given the levels of 'unknown' within the data set, (24%) a key part of the action plan for the WDES will need to be improving the self-declaration rates regarding disability.

4. Performance against the Workforce Disability Equality Standard (WDES)

4.1 Metric 1: Percentage of staff in AfC paybands or medical and dental subgroups and very senior managers (including Executive Board members) compared with the percentage of staff in the overall workforce.

Descriptor	Disabled	Non-disabled	Not Known
Staff in Bands 1 -4	102	1604	518
Staff in Bands 5-7	74	1650	559
Staff in Bands 8a and 8b	3	126	53
Staff in Bands 8c – 8d, 9 and VSM, (very senior managers including executive board members)	2	44	9
Medical and dental staff; Consultants	0	157	99
Medical and Dental staff; non Consultant and career grade	0	76	40
Medical and Dental Staff: medical and	3	205	3

dental trainee grades			
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*Note: this indicator is based on directly employed workforce data within ESR at 1st April 2018, (excludes bank staff).

By far the highest concentration of staff with disabilities is in the bands 1-4 cluster. This may reflect the success of schemes such as Project Search, which support young people with disabilities in preparing them for work. The scheme has successfully employed 62% of graduates who have completed the scheme into entry level posts within the Trust since its introduction in 2009 and for the past two years has employed two thirds of those completing the programme. Retention of these staff has been very high. The next step will be to look at how we ensure that those staff in bands 1 to 4 looking to progress are able to reach their full potential.

4.2 Metric 2: Relative likelihood of staff with disabilities being appointed from shortlisting compared to that of staff being appointed from shortlisting across all posts*:

Descriptor	Disabled 2018	Non-disabled 2018
Number of shortlisted applicants	208	4333
Numbers appointed from shortlisting	6	513
Likelihood (shortlisting / appointed)	0.03	0.12

*Note: this indicator is based on data held in NHS Jobs between 1st April 2018 and 31st March 2019

4.3 Applicants are 4 times more likely to be appointed if they do not have a disability than if they do. The RUH operates a guaranteed interview scheme for applicants with disabilities under the governments Disability Confident scheme, (formally two tick scheme). This is a form of positive action and as such the data for the RUH may not be comparable with other NHS organisations which do not operate this scheme, (the Trust may short list far greater candidates with disabilities which would not reach this stage at other Trusts). NHS England are factoring this into the WDES results for Metric 2 and will collate a separate aggregate to assess how these Trust's compare. The DISCo and Equal Abilities Staff Network will review this data when it becomes available to establish what actions the RUH should take with respect to this metric.

4.4 Metric 3: Relative likelihood of Disabled staff compared to non-disabled staff entering the formal capability process, as measured by entry into the formal capability procedure.

Descriptor	Disabled	Non-Disabled
Number of staff in workforce	182	3850
Number of staff entering the formal performance management process	0	6
Likelihood (entering formal	0.0	0.0

process)		
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*Note: this indicator will be based on data from a two year rolling average of the current year and the previous year for identified disabled and non-disabled staff

4.5 There is no more or less likelihood of entering the formal performance management process if staff have a disability. This metric is voluntary for year one of the WDES, (there is no requirement to report it); due to the recognition of the difficulty some Trust's may have in collating the data. There are very few cases within the RUH that reach the formal stages of performance management due to capability. The number of informal cases was also reviewed and did not show a discrepancy in number of staff with disabilities versus those without disabilities.

4.5 In future this metric is likely to include those staff entering into the formal sickness absence process and this will present difficulties in collating the data, due to how sickness management is currently recorded.

4.6 Metric 4-9:

4.7 The following metrics are taken from the staff survey results from 2018

Metric 4

a) Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from:

- i. Patients/service users, their relatives or other members of the public
- ii. Managers
- iii. Other colleagues

b) Percentage of Disabled staff compared to non-disabled staff saying that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it.

Descriptor	Disabled	Non-disabled
% of staff experiencing harassment, bullying or abuse from patients/service users, their relatives or other members of the public in the last 12 months	30.9%	25.2%
% of staff experiencing harassment, bullying or abuse from managers in the last 12 months	21%	12.1%
% of staff experiencing harassment, bullying or abuse from other colleagues in the last 12 months	26.3%	17.5%
% of staff saying that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it in the last 12 months	38.4%	40.5%

4.8 Metric 5: Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.

Descriptor	Disabled	Non-disabled
% of staff believing that the Trust provides equal opportunities for career progression or promotion.	77.6%	86.8%

“Staff forget I have hearing loss, they’ll ask me to do something but won’t be looking at me so I don’t always hear them. I feel passed over for opportunities because I’m perceived as slower as a result”.

– Equal Abilities Network Member

4.9 Metric 6: Percentage of Disabled staff compared to non-disabled staff saying that they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties.

Descriptor	Disabled	Non-disabled
% of staff saying that they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties	33.2%	19.2%

4.10 Metric 7: Percentage of Disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their organisation values their work.

Descriptor	Disabled	Non-disabled
% of staff saying that they are satisfied with the extent to which their organisation values their work	36.8%	48%

4.11 Metric 8: The following NHS staff survey metric only includes the responses of staff with Disabilities. Percentage of disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work.

Descriptor	Disabled
% of staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work.	75.7%

“My manager is really flexible which is great, I had an adaptive chair provided within my first week of joining the Trust and when patient care allows, I can change my hours around if I have had a fall or a bad few days”.

- Equal Abilities Network Member

I'm still waiting for a simple piece of kit which would help me do my job more effectively. It isn't a priority for my manager, so I don't feel important.

- Equal Abilities Network Member

4.12 The metrics above highlight that staff with disabilities consistently report a lower or worse experience at work than those who do not have a disability. Staff with disabilities report higher instances of bullying; are less likely to believe that opportunities for career progression are fair and feel more pressure to come to work when feeling unwell.

4.13 Furthermore the experiences of staff in having adjustments made is mixed. These results are reflected in Metric 9 which reviews the overall staff engagement score for staff with disabilities and those without. Staff with disabilities have an overall lower score for engagement.

Metric 9: a) The staff engagement score for Disabled staff, compared to non-disabled staff and the overall engagement score for the organisation.

Metric 9: Descriptor	Disabled	Non-disabled	Overall Trust score
The staff engagement score for Disabled staff, compared to non-disabled staff and the overall engagement score for the organisation.	6.7	7.1	7.1

b) Has your Trust taken action to facilitate the voices of Disabled staff in your organisation to be heard? (Yes) or (No)

Yes. The Trust in September 2018 as a result of focus groups held with staff started a network for staff with disabilities, called 'Equal Abilities'. The network is small, but the group are keen to raise the profile of the group and expand its membership. A representative from the group attends the DISCo meetings and the group will be key to agreeing what the focus of the WDES action plan should be following the first year of results.

Additionally as part of the Equality Delivery System 2 (EDS2), the focus for the represented and supported workforce objective is staff with sensory loss, in recognition there is more we could be doing for staff with disabilities.

4.14 Metric 10: Percentage difference between the organisation's Board voting membership and its organisation's overall workforce, disaggregated:

- **By voting membership of the Board.**
- **By Executive membership of the Board.**

% difference between organisations board membership and overall workforce, disaggregated	Board	Trust	Difference
By voting membership of the Board	20%	3%	+17%
By executive membership of the Board	29%	3%	+25%

5. Conclusion

- 5.1 Examination of the data currently available in support of the Trust's position against the WDES indicates further work is required in establishing better self-declaration rates of disability as well as a deeper understanding of the underlying causes for the poorer experiences reported by staff with disabilities.
- 5.2 In order to ensure that meaningful and sustained change is made, the data will be shared with the Trust's Equal Abilities Network and widely across the Trust to help shape and form an action plan over the coming 12 months.

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