

#### TRUST BOARD

## Paper No:

Title of paper: Workforce Disability Equality Standard Report (WDES) 2021-2022

**Purpose:** This report provides and overview and analysis of the Trust's Workforce Disability Equality Standard (WDES) and proposed action plan for 2022-23.

## Summary:

The following is an overview of the WDES Highlights for 2021/22

#### Workforce data metrics:

- A marginal increase in staff recording disability on ESR.
- A marginal increase in the relative likelihood of non-disabled candidates being appointed from interview compared to disabled candidates, from **1.02** to **1.20**.

#### Staff survey data:

- An increase across all sources of harassment, bullying or abuse for disabled staff since 2020.
- A 13.7% decrease in disabled staff believing that Trust provides equal opportunities for career progression or promotion, compared to a 2.7% decrease for non-disabled staff.
- A **12.3**% gap between disabled staff and non-disabled staff saying they have felt pressure to come to work despite not feeling well enough.
- An 11.5% satisfaction gap between disabled staff and non-disabled staff relating to the extent to which the organisation values their work
- A 15.9% decrease in disabled staff saying their employer had made adequate adjustments.

A revised WDES Action Plan is provided at the end of this data report, identifying existing, ongoing, and proposed activity to address the themes identified in the WDES.

Our actions will be informed by our Staff Networks and monitored by the Trust's Equality and Diversity Steering Group, Strategic People Committee, JSNC and People Council and reported to the NHSE WDES Implementation Team and NHS Cheshire and Merseyside ICB.

**Corporate objectives met or risks addressed:** This relates to the 'Developing our Organisational Culture and Supporting our Workforce' objective.

**Financial implications:** None as a direct consequence of this paper

**Stakeholders:** Staff, the Trust, NHSE WDES Implementation Team, ICB and Regulators

# Recommendation(s):

The Trust's Executive Committee are asked to note the content of the report to approve that the WDES report and action plan is presented to the Trust Board to provide assurance against contractual reporting of WDES.

Presenting officer: Anne-Marie Stretch, Deputy CEO/Director of HR

Date of meeting: 28th September 2022

# Workforce Disability Equality Standard Report April 2021 – March 2022

# 1.0 Executive Summary

This paper provides the Trust Board with an overview of the Workforce Disability Equality Standard (WDES) and the Trust's data and responses to the various metrics against the 10 metrics within the Workforce Disability Equality Standard (WDES).

#### 2.0 Introduction

NHS England introduced the Workforce Disability Equality Standard (WDES) in 2019. The WDES is a data-based standard that uses a series of measures (metrics) to improve the experience of disabled staff in the NHS.

The WDES comprises of a set of metrics. All the metrics draw from existing data sources (recruitment dataset, ESR, NHS Staff Survey, HR data) except for one; Metric 9b asks for narrative evidence of actions taken, to be written into the WDES annual report. The annual collection of the WDES metrics will allow the Trust to better understand and improve the employment experiences of disabled staff in the NHS. This WDES report applies only to substantive posts and excludes Bank workers.

## 3.0 Key Data

For the period April 2021 to March 2022 trust figures on ESR reported that:

- 3.1% of STHK staff had recorded a disability on Electronic Staff Record
- 84.96% recorded no disability
- 11.94% recorded unknown/null

This compares with 'yes' responses from 24.4% of staff out of the 2,358 who completed the NHS Staff Survey proxy question for disability, ("do you have a physical or mental health condition or illness lasting or expected to last for 12 months or more?")

The percentage of disabled staff being appointed from shortlisting is **23.38%** for disabled compared to **28.18%** for non-disabled staff.

Relative likelihood of non-disabled staff being appointed from shortlisting compared to disabled staff is **1.2** (A figure below 1:00 indicates that disabled staff are more likely than non-disabled staff to be appointed from shortlisting).

ESR data highlights the relative likelihood of staff entering the formal capability process for disabled is **9.96**, an increase from 5.63 in 2021. (A figure above 1:00 indicates that disabled staff are more likely than non-disabled staff to enter the process.)

Disabled staff experiencing harassment, bullying or abuse from patients, relatives or the public is **13% higher** than for non-disabled staff.

Disabled staff experiencing harassment, bullying or abuse from managers is **10.6% higher** than non-disabled staff.

Disabled staff experiencing harassment, bullying or abuse from other colleagues is **10.4% higher** than non-disabled staff.

Percentage of Trust staff believing that the Trust provides equal opportunities for career progression or promotion is **54.5**% for disabled staff, compared to **65.4**% for non-disabled staff, a difference of **10.9**%.

#### 3.1 Workforce Profile

As of the 31<sup>st</sup> March 2022, St Helens and Knowsley Teaching Hospitals NHS Trust employed 6,676 staff of whom 3.1% has recorded on ESR that they consider themselves to have a disability. 84.96% of staff have recorded that they did not consider themselves to have a disability, and 11.94% of staff had not stated or their status was unknown.

| Staff Headcount                 | Disabled Staff | Non-disabled<br>staff | Unknown/ Null |
|---------------------------------|----------------|-----------------------|---------------|
| Non-Clinical AfC<br>Workforce   | 71 (3.9%)      | 1503 (81.9%)          | 261 (14.2%)   |
| Clinical AfC Workforce          | 129 (3%)       | 3693 (86.2%)          | 461 (10.8%)   |
| Medical and Dental<br>Workforce | 7 (1.25%)      | 476 (84.96%)          | 75 11.94%)    |

#### 4.0 WDES Metrics 2021-22

The information below provides a comparison for the WDES reports for 2021-22 and 2020-21. All figures are self-populated taken from the WDES template provided by NHS England and generated using the automated template on Electronic Staff Record for assurance, and from the Staff Survey Coordination Centre.

**Note:** Definitions for these categories are based on Electronic Staff Record occupation codes except for medical and dental staff, which are based upon grade codes.

For each of workforce metrics, the standard compares the metrics for disabled and non-disabled staff where the figures do not equate to 100% this is due to the information not stated / not given. In recognition that Staff Survey data for 2020 was impacted by the pandemic, 2019 data is also included in these metrics for reference.

#### 4.1 Metric 1: Workforce

Percentage of staff in AfC 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.

# **Clusters by Band**

Cluster 1 (Bands 1 - 4), Cluster 2 (Band 5 - 7), Cluster 3 (Bands 8a - 8b), Cluster 4 (Bands 8c - 9 & VSM), Cluster 5 (Medical & Dental Staff, Consultants), Cluster 6 (Medical & Dental Staff, Non-Consultants career grade), Cluster 7 (Medical & Dental Staff, Medical and dental trainee grades).

|                      | 2020/2021  |                       | 2021/22       |                       |
|----------------------|------------|-----------------------|---------------|-----------------------|
| Non-Clinical         | % Disabled | %<br>Non-<br>disabled | %<br>Disabled | %<br>Non-<br>disabled |
| Cluster 1            | 3.8        | 78                    | 4.2           | 79.9                  |
| Cluster 2            | 2.2        | 88.5                  | 2.1           | 89.3                  |
| Cluster 3            | 5.7        | 78.2                  | 4.4           | 81.1                  |
| Cluster 4            | 2.4        | 87.8                  | 7.9           | 84.2                  |
| Clinical             | % Disabled | %<br>Non-<br>disabled | %<br>Disabled | %<br>Non-<br>disabled |
| Cluster 1            | 2.1        | 84.4                  | 2             | 87.2                  |
| Cluster 2            | 3.5        | 84.4                  | 3.7           | 85.8                  |
| Cluster 3            | 1.6        | 84.1                  | 1.8           | 84.9                  |
| Cluster 4            | 6.3        | 87.5                  | 5             | 90                    |
| Medical & Dental     | % Disabled | %<br>Non-<br>disabled | %<br>Disabled | %<br>Non-<br>disabled |
| Cluster 5            | 0.34       | 78.62                 | 0.33          | 79.87                 |
| Cluster 6            | 2.13       | 85.11                 | 3.75          | 82.5                  |
| Cluster 7            | 2.63       | 92.11                 | 1.71          | 96                    |
| Overall<br>Workforce | 2.95       | 83.1                  | 3.1           | 84.96                 |

Overall, there has been a slight increase in the number of staff with a disability recorded on ESR from 2.95% to 3.1%. Rates continue to be below the national average of 3.7%, which are still below the benchmarked STHK Staff Survey result of 24.5%.

The Trust have made efforts towards improving this information in 2022 through the WDES Innovation project.

# 4.2 Metric 2: Relative likelihood of non-disabled staff to disabled being appointed from shortlisting across all posts

|  | Disabled | Non-<br>disabled | Unknown/<br>Null |
|--|----------|------------------|------------------|
| Number of shortlisted applicants   | 201      | 3368             | 750              |
| Number appointed from shortlisting   | 47       | 947              | 133              |
| Relative likelihood of staff shortlisted/appointed %   | 23.38    | 28.12            | 17.73            |
| Relative likelihood of relative likelihood of non-disabled staff being appointed from shortlisting compared to disabled staff. (Number of times more likely) |          |                  | 1.2              |

This is an increase on 2021, when the figure was 1.02. However, this relates to a small number of candidates involved, with many 'unknown/null' responses, and a difference equivalent to 0.7% of appointments. As such the result would fall well within the margin of error, and the priority is improving the quality of data and information.

# 4.3 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.

| Average over 2 years   | Entering<br>formal<br>capability<br>Process | Trust<br>Headcount<br>and % | Relative likelihood of staff entering the formal capability process |
|--|---|-----------------------------|---|
| Disabled   | 2   | 207 - 3.1%                  | 0.01  |
| Non-Disabled   | 5.5   | 5672 -<br>84.96%            | 0   |
| Unknown/Null   | 1.5   | 797 - 11.94%                | 0   |
| Total  | 9   | 6676                        |   |
| Relative likelihood of Disabled staff compared to non-disabled staff | 9.96  |                             |   |

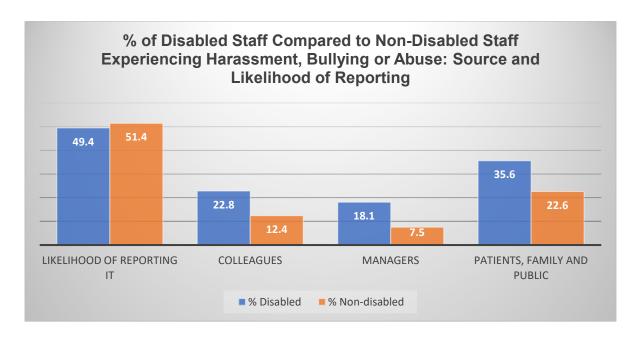
Note: This metric is based on data from a two-year rolling average of the current year and the previous year.

This result is an increase on 2021, up from 5.63%, however it is statistically unreliable due to the insufficient numbers involved in the use of this policy. The Trust is encouraging the use of the new Reasonable Adjustments policy and the Disability

Adjustment passport and has provided management training to raise awareness of how to support staff with disability and this is being delivered by the Business Disability Forum.

# 4.4 Metric 4a: Harassment, Bullying and Abuse

The metric firstly considers the percentage of disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse in the last 12 months from Patients/Service users, relatives, or other members of the public, their managers and colleagues. It then considers the 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.



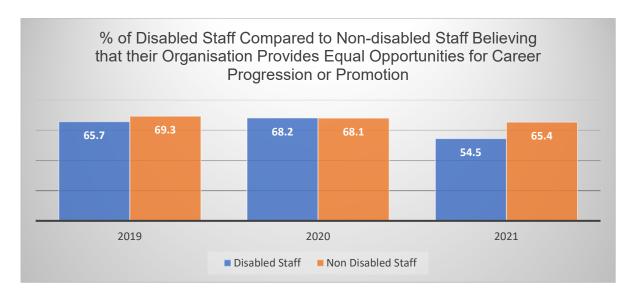
Disabled staff report higher incidence from all sources but are similarly as likely to report it as non-disabled colleagues.

- The results have **increased** from 2020-21 for 'patients, family and public' by **6.6%** for disabled staff, with a **4.3% increase** for staff without disabilities.
- The results have **increased** for 'colleagues' by **6.9%** for disabled staff and **1.7%** for staff without disabilities.
- Responses relating to 'managers' have increased by 6.2% for disabled staff and decreased by 0.7% for non-disabled staff.

Actions have been identified to better understand this information and directly relate it to process reviews around behaviour, conflict resolution and security, with links into the equality, diversity and inclusion (ED&I) governance structure.

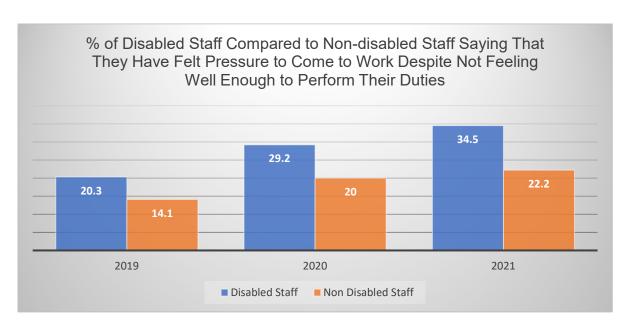
**4.5 Metric 5**: Percentage believing that Trust provides equal opportunities for career progression or promotion

The historic results for this metric have been adjusted due to change in the staff survey question weighting. The question now includes 'don't knows' where they were previously excluded. Previous years' results included for context.



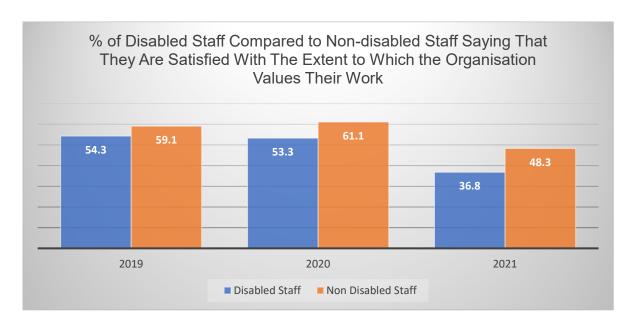
Disabled staff's belief that the Trust provides equality of opportunity has decreased since 2020-21. The 2020 result was originally higher prior to the new weighting, with less disparity between disabled and non-disabled responses (94.2% and 93.6% respectively).

**4.6 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



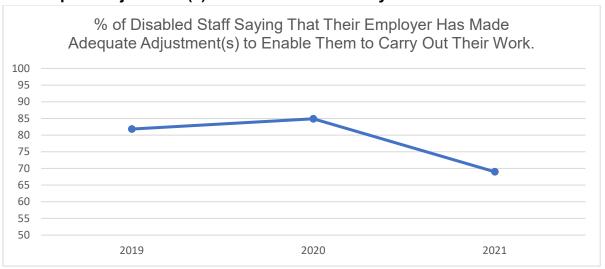
The increase in disabled staff reporting on this metric (+12.3%) is greater than the increase for non-disabled staff (+2.2%). Action has been taken in 2022 to address the disparity found in the 2020 results, with the introduction of a new Adjustments passport, new Reasonable Adjustments Policy, and a new management training scheme.

# 4.7 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



The gap between disabled and non-disabled staff's responses to the question has increased from 7.8% in 2020, to 11.5% in 2021. Both groups have seen a reduction, since 2020 with non-disabled staff satisfaction reduced by 12.8% and disabled staff by 16.8%. Results to this will be consulted on with stakeholders.

4.8 Metric 8: Percentage of disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work



There has been a 15.9% reduction in positive responses to this question from disabled staff. This has already been subject to significant resource investment via the WDESIP project as described in 4.6 and will continue to be an area of high priority throughout 2022-23.

# 4.9 Metric 9a: The staff engagement score for disabled staff, compared to nondisabled staff

| Category      | 2021  | Average from<br>Trusts | Difference         |
|---------------|-------|------------------------|--------------------|
| Non-Disabled  | 7.30% | 7%                     | 0.3% above average |
| Disabled      | 6.80% | 6.40%                  | 0.4% above average |
| Trust Average | 7.1   |                        |                    |

# 4.10 Metric 9b: Has your Trust taken action to facilitate the voices of disabled staff in your organisation to be heard? (Yes)

We have a Staff Network for staff with disabilities which is represented on our Strategic Advisory Group and Equality and Diversity Steering Group.

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

| Disability                 | Headcount | Headcount<br>% | Board<br>Headcount | Board<br>Headcount<br>% | Variance |
|----------------------------|-----------|----------------|--------------------|-------------------------|----------|
| No                         | 5672      | 84.96%         | 14                 | 87.50%                  | 2.54     |
| Not<br>Declared<br>& Other | 797       | 11.94%         | 2                  | 12.50%                  | 0.56     |
| Yes                        | 207       | 3.10%          | 0                  | 0.00%                   | -3.1     |

#### 5.0 Our People Plan

The purpose of Our People Plan is to identify the Trust's people priorities and to ensure that everyone connected to the Trust understands the contribution they make. There are multiple actions attached with specific emphasis on ED&I and the culture and behaviours we are working towards.

The following key actions taken from our overarching action plan which have been identified for the next 12 months, along with actions already consulted on with staff as part of our detailed WDES Innovation Fund research project carried out in 2022, will form the basis of our WDES Action Plan for 2022-23. The impact of these actions will be measured by improvements to the WDES metrics.

## 5.1 We will focus on real and measurable progress

The Trust is committed to identifying measurable and tangible improvements on ED&I and will agree new KPI's and dashboards to support our forthcoming ED&I Operational Plan, with clear governance oversight.

## 5.2 Compassionate Culture and Leadership

The Trust leadership will continue to embed a compassionate, kind and inclusive work environment based on common values and a shared purpose. We will review our behavioural standards around civility and respect with reference to the WDES and will develop and deliver culturally appropriate training and support for managers and staff.

# 5.3 Workforce Development and career development for staff from underrepresented groups

Specific programmes of work addressing disability awareness will continue to be rolled out aimed at supporting staff with protected characteristics, including staff with disabilities. We will be working in partnership with the Royal College of Nursing to introduce their Cultural Ambassadors programme to the Trust, which will be specifically addressing disability in formal procedures, as well as reviewing recruitment, promotion practices and talent management plans for accessibility.

#### 5.4 We will ensure that each voice counts

The Trust will encourage more staff with disabilities to become actively involved in shaping practices across the Trust. We will do this by enhancing the support for staff networks, including the Building Abilities Network to encourage staff from across the organisation to share experiences, shape and influence Trust policies and procedures, identify opportunities and help prioritise improvement in areas such as recruitment and selection.

## 5.6 We will promote and celebrate ED&I

We will develop and maintain an annual calendar of events and communications activity to celebrate difference and increase awareness of ED&I.

#### 6.0 Trust Actions to Comply with the WDES

- WDES reporting template completed and sent to NHS England (Aug 2022)
- WDES report completed, to be hosted onto the Trust website (October 2022)
- WDES report and action plan to be sent to the NHS Cheshire and Merseyside ICB
- WDES action plan in place and reviewed bi-monthly with monitoring via the Equality and Diversity Steering group and People Council

#### 7.0 Recommendations

The People Council is asked to note the WDES metrics, and the actions identified to address the gaps highlighted.

# WDES Action Plan 2022-2023

| Objective   | Action  | Action Owner  | By<br>When    |  |  |  |
|---|---|---|---------------|--|--|--|
| 1.0 Inclusive and Compassionate leadership  |   |   |               |  |  |  |
| 1.1 Place increasing emphasis on whether organisations have made real and measurable progress on equality, diversity and inclusion, as part of the well-led assessment. | Enhance data to inform actions through surveys, deep dives and focus groups including in relation to their lived experiences and how staff with protected characteristics could be better supported in the workplace.   | Deputy Director<br>of HR &<br>Governance/<br>Head of ED&I                       | Mar<br>2023   |  |  |  |
| 1.2 Ensure that an understanding of Disability and inequality is woven through both discussion and decision making at the highest levels of leadership.                 | Appoint a Trust board lead (outside of Human Resource responsibility), to act as ambassador for the work area.  | Director of<br>HR/Deputy<br>Director of HR &<br>Governance                      | March<br>2023 |  |  |  |
| 1.3 Advance the learning and gains made through the WDES Innovation Fund Project.   | Video campaign for the intranet including senior leaders showcasing the benefits of the Adjustments Passport.  Continued Delivery of the Managing Disability with Confidence programme  Working Group to be established to process map best practice in adjustment provisions including IT, IG, Facilities, HWWB and Procurement. | Head of ED&I  | March<br>2023 |  |  |  |
| 1.4 Ensure that the workforce leadership is representative of the overall Disabled workforce including at senior level.   | Participate in national and regional development programmes to support future leaders; enhance communications around how to share information for existing leaders.   | Head of Strategic<br>Resourcing/Head<br>of Equality<br>Diversity &<br>Inclusion | Sep<br>2023   |  |  |  |

| 1.5 Introduce and support a culture of civility and respect to include a review of behavioural standards and their link to the Trust's corporate values. | Launch the NHSE Toolkit for civility and respect, when released.   | Head of Learning<br>& OD and<br>Deputy Director<br>of HR     | TBC         |  |  |  |
|--|--|--|-------------|--|--|--|
| 1.6 Ensure that the differential experiences of Disabled staff are represented in the development of the Trust's approach to security strategy.          | Deep dive into the data on staff experiences of bullying and harassment to ensure appropriate ED&I Metrics are routinely reported as part of the implementation of the new Security Group and Violence Reduction Strategy. | People<br>Protection and<br>Asset<br>Manager/Head of<br>ED&I | Dec<br>2023 |  |  |  |
| 2.0 We Will Actively Listen  | and Give Everyone a Voice  |  |             |  |  |  |
|  | WDES will be monitored bi-<br>monthly at the Equality and<br>Diversity Steering Group.   | Head of Equality Diversity & Inclusion                       | Ongoing     |  |  |  |
| 2.1 Continue to listen to our staff to ensure we remain an employer of choice.   | Develop our Staff Networks to align their deliverables to the ED&I strategy, ensure the workforce are supported to undertake their network roles and encourage membership of Staff Networks.                               | Head of Equality<br>Diversity &<br>Inclusion                 | Jan<br>2023 |  |  |  |
| 2.2 Improve the quality of data held on staff with disabilities to better understand the workforce and target support.                                   | Renew communications efforts to enhance support and awareness of our Disability Confident Leader status utilising the ESR Self-Service Portal, Adjustments Passport, and opportunities to promote at events.               | Head of Equality<br>Diversity &<br>Inclusion                 | Mar<br>2023 |  |  |  |
| 2.3 Have an active network of ED&I Champions in place to support staff in the Trust.   | Terms of reference and membership of networks to be reviewed and recruitment campaign to refresh membership to be rolled out during 2022/23.   | Head of Equality<br>Diversity &<br>Inclusion                 | Jan<br>2023 |  |  |  |
| 3.0 Supported Workforce who are Educated and Aware   |  |  |             |  |  |  |
| 3.1 Continue to build on and extend the Managing Diversity with Confidence programme to upskill and support managers on understanding Disability.        | Include Disability in the Employment Law training modules for all line managers, develop eLearning/video modules   | Deputy Director<br>of HR &<br>Governance and<br>Head of ED&I | Oct<br>2023 |  |  |  |

|   | on undertaking an adjustments conversation.   |   |             |
|---|---|---|-------------|
| 3.2 Establish an EDI/Cultural Ambassadors programme to support the Just Culture and Inclusive Recruitment agendas, supporting staff and incorporating lived experience and staff voice into decision making and people processes. | Train and support Ambassadors through the RCN's Cultural Ambassador programme, underpinned with a supporting programme of organisational development.   | Deputy Director<br>of HR and<br>Governance/<br>Head of ED&I                     | Mar<br>2023 |
|   | Work in collaboration to review the recruitment processes of the Trust to ensure they are appropriate and accessible to all.  | Head of Strategic<br>Resourcing/Head<br>of Equality<br>Diversity &<br>Inclusion | Mar<br>2023 |
| 3.3 Review recruitment and promotion practices to make sure that staffing reflects the diversity of the community, and regional and national labour markets.  | Identifying links (via the ED&I regional Task & Finish Group) with local community organisations to promote vacancies to under-represented groups, including Project Search.  | Head of Strategic<br>Resourcing/Head<br>of Equality<br>Diversity &<br>Inclusion | Mar<br>2023 |
|   | Work in collaboration to implement succession planning and talent management that takes account of the needs of diverse groups  | Head of Learning<br>& OD/Head of<br>Equality Diversity<br>& Inclusion           | Mar<br>2023 |
| 3.4 Promotion of annual calendar of events for ED&I and Wellbeing   | Develop and promote events calendar and celebration opportunities to tie into calendar of national celebration and awareness events, utilising knowledge and feedback from Staff Survey Network as to needs and demand. | Head of Equality<br>Diversity &<br>Inclusion                                    | Ongoing     |