

**Workforce Disability Equality Standard (WDES) 2018/19 Board Paper and
Improvement Action Plan**

Purpose of Report

The Workforce Disability Equality Standard (WDES) 2018/19 reporting summary and actions are presented for consideration and approval prior to sharing with lead commissioners and publishing on the Trust's public-facing website by 30th September 2019. WDES indicators and on-line reporting form are available as appendices 1 & 2.

Executive Summary

In summary, our initial WDES 18/19 position shows there is considerable work to be done to address the variations in experience, workforce representation, recruitment progression and development for disabled people.

Declaration rates of staff with disabilities in the Trust are low. Across the NHS, on average 3% of people state that they are disabled on ESR, while 18% declare that they have a disability on the NHS Staff survey, which means a 15% difference in the disability declaration rate. At DHCFT, 4.45% of the workforce (115 people) has declared a disability on ESR, while 11.06% (286 people) declared a disability on the NHS Staff Survey. This shows a 6% difference in the disability declaration rate between ESR and the Staff Survey at DHCFT. Furthermore, 31.25% of DHCFT's workforce has not declared their disability status on ESR, and 0.04% would prefer not to say. The data shows that there is an underrepresentation of employees with disabilities in senior leadership levels with no disabled employees at Bands 8c and above, but there is also a corresponding level of unreported disability status in those positions.

As this is the first year of implementation of the WDES, we are learning from the Workforce Race Equality Standard (WRES) as a guideline for implementation. This work will be aligned to the WRES work streams where possible, including recruitment and monitoring grievance and disciplinary by disabilities.

The Disability and Wellness Network is sponsored by Director of People & Organisational Effectiveness and engaged at the outset.

Engaging with the Disability & Wellness Network as a platform to develop an effective Action Plan and solutions to target key areas in the WDES in order to make improvements on this year's data. It provides peer support to colleagues with a disability and/or long term condition.

We have a Health & Wellbeing Strategy

Why is the WDES relevant?

It is about positive cultural change for everyone. The Trust seeks to go beyond compliance and be 'positively inclusive' because everyone matters. Ensuring that we treat all of our colleagues equally and fairly is in all of our interests because it makes DHCFT a positive place to work, fosters a person centred culture and makes sure that we can get the most out of everyone's experience, talents and input.

The data will prompt and drive NHS organisations to take action and improve the experiences of disabled staff. As a result:

- More transparency, more accurate data reporting and analysis.
- Drive up the declaration rate of disabled staff.
- The collection and reporting of data will enable organisations to better understand the experiences of their disabled staff.
- It will support the development of good practice.
- Improve recruitment processes, and increase the number of Disabled staff recruited.
- It will support positive change for existing employees and enable a more inclusive environment for disabled people working in the NHS.
- Raising awareness of disability will support improvements in patient care.

Why is recruiting those with disabilities important?

- Employee diversity reflects customer base in society
- Disabilities are often acquired during employment
- Specific skills – e.g. autism, dyslexia
- Ageing workforce
- Younger people with more health problems
- Longer life expectancy
- The 'Purple Pound' which is worth £249bn (reflect customers)
- Skills shortages

What is the Workforce Disability Equality Standard (WDES)?

Ten evidence-based metrics which take effect from 1 April 2019 based on 2018/19 financial year data. It is mandated in the NHS Standard Contract and restricted to NHS Trusts and Foundation Trusts in the first two years of implementation. It enables NHS organisations to compare experiences of Disabled/non-disabled staff. NHS organisations to publish results and develop action plans.

The Workforce Disability Equality Standard (WDES) requires all NHS organisations to demonstrate progress against a set of ten indicators in order to assess the experiences of disabled and non-disabled staff. The aim of the WDES is to try and ensure employees who have a disability have equal access to opportunities and receive fair treatment in the workplace.

This is the first year that the standard has been implemented across all NHS Trusts in response to research that shows that disabled staff have poorer experiences in areas such as bullying and harassment, feeling pressure to come to work when feeling ill and in access to opportunities for career progression when compared to their non-disabled colleagues.

The WDES data will be submitted electronically using a reporting template provided by NHS England. It is populated using data extracted from ESR for Indicators 1-3 and 10 respectively, and data from the Staff Survey is used to populate Indicators 4-

9. The data informs the development of the action plan to drive improvement across the Trust and will be measured annually to review the progress made against each indicator.

Our current position is summarised below in the Improvement Action Plan:

Our key priorities and steps planned to improve our performance are outlined below:

Key priorities	Data	Action planned
<p>Indicator 1: Percentage of staff in AfC pay bands or medical and dental subgroups and VSM (including Executive Board members) compared with the percentage of staff in the overall workforce.</p>	<p>Declaration rates of staff with disabilities in the Trust are low. Overall, 4.45% of the workforce has declared a disability on ESR, while 11.06% has declared a disability on the NHS Staff Survey. 31.25% of the workforce has not declared their disability status and 0.04% would prefer not to say.</p> <p>*The data shows that there is an underrepresentation of employees with disabilities in senior leadership levels with no disabled employees at Bands 8c and above, but there is also a corresponding level of unreported disability status in those positions.</p>	<p>Executive champion and sponsor of Disability & Wellness Network - Director of People & Organisational Effectiveness.</p> <p>Improve declaration rates by promoting the importance of colleagues declaring their disability status. Colleagues should feel safe to declare disabilities and long term conditions in order for the Trust to be a more responsive employer catering to the needs of all of our employees (reasonable adjustments).</p> <p>Work with the Disability & Wellness Network, Information Systems and Communications Team to spread this message across DHCFT e.g. data cleansing, screensavers and case studies.</p> <p>*Senior leadership visibly championing disabilities and long term conditions.</p> <p>The Trust is part of the Disability Confident Scheme and has achieved Disability Confident Employer level 2 status. Key themes are :</p> <ul style="list-style-type: none"> • Getting the right people for your business • Keeping and developing your people. • Offering at least one activity that will make a difference <p>Part of the Midlandsability network – share good practice and resources to progress disability equality. This network was founded in 2017, is a cross organisational forum in the</p>

		<p>Midlands which brings government, companies and other organisations together to talk about the important issues surrounding disability and long-term health conditions in the workplace. Working with government representatives to support national initiatives, our mission is to connect businesses and colleagues to share experiences, best practice and ideas and capitalise on this knowledge to support others on their journey to become more disability confident and inclusive.</p> <p>British Sign Language Charter signatories.</p>
<p>Indicator 2: Relative likelihood of Disabled staff compared to non-disabled staff being appointed from shortlisting across all posts.</p>	<p>Non-disabled staff are 2.88 times more likely to be appointed from shortlisting than disabled staff.</p>	<p>As above.</p> <p>This will be aligned to current WRES work programme to improve recruitment.</p> <p>Working in partnership with the Disability & Wellness Network to review recruitment processes and understand what the data tells us.</p>
<p>Indicator 4: Percentage of disabled staff compared to non-disabled staff experiencing harassment, bullying and abuse from:</p> <p>i) Patients/service users, their relatives or members of the public</p> <p>ii) Managers</p> <p>iii) Other colleagues</p>	<p>i) From patients/service users, their relatives or members of the public</p> <p>33.8% of disabled staff 26.0% of non-disabled staff</p> <p>ii) Managers</p> <p>14.0% of disabled staff 8.8% of non-disabled staff</p> <p>iii) Other colleagues</p> <p>17% of disabled staff 14.5% of non-disabled staff</p>	<p>Work with the Disability & Wellness Network to target the high rates of harassment, bullying and abuse of disabled colleagues.</p> <p>Harassment and Bullying Booklet launched in July 2019 for circulation across the Trust based on the learning achieved by a series of workshops conducted in 2019.</p> <p>The implementation of a 'Just Culture' at DHCFT will encourage managers to treat staff involved in a patient safety incident in a consistent and fair way. It supports a culture of openness, fairness and learning in the NHS by making staff feel confident to speak up when things go wrong rather than fearing blame.</p> <p>Work with the newly appointed</p>

		<p>Freedom to Speak Up Guardian, to look at developing F2SU Champions, whose role will incorporate an aspect of supporting colleagues dealing with bullying and/or harassment.</p> <p>Disability network invited to attend the BME AGM on the 25th September, 2019.</p>
		<p>Engage with the Disability & Wellness Network to develop an effective Action Plan and solutions to target key areas in the WDES in order to make improvements on this year's data. The next Disability & Wellness Network meeting on 11th September 2019 will focus on the Action Plan as the main agenda item, and the data will be shared with the membership electronically in August 2019 to enable those unable to attend the main meetings to contribute to the discussion with suggestions and recommendations.</p>

Other targeted actions :

We have a Chronic Health Condition(s)/Disability Policy and Procedure, to which the Reasonable Adjustments Passport is appended.

In addition, our Trust offers a menu of options such as:

- Referral to our Occupational Health & Wellbeing Services.
- workplace risk assessments
- stress risk assessments
- flexible working patterns
- peer support through the Disability & Wellness Staff Network
- Health-related redeployment, phased return to work for employees, returning to work from long-term sickness absence.
- Signposting employees to the Access to Work scheme run by the Department for Work and Pensions.

The NHS WDES Technical Guidance (2019) is being used to apply good practice in the implementation of the standard and action plan: <https://www.england.nhs.uk/wp-content/uploads/2019/06/wdes-technical-guidance-v2.pdf>.

This is the first year of the WDES and the Equality, Diversity & Inclusion Service will start to track and benchmark year on year improvement following production of national WDES report.

Strategic Considerations (All applicable strategic considerations to be marked with X in end column)

1) We will deliver great care by delivering compassionate, person-centred innovative and safe care	x
2) We will ensure that the Trust is a great place to work by attracting colleagues to work with us who we develop, retain and support by excellent management and leadership	x
3) We will make the best use of our money by making financially wise decisions and will always strive for best value to make money go further	x

Assurances

- The Equality, Diversity and Inclusion Team are working in partnership with the Trust's Disability & Wellness Network, for which the Director of People and Organisational Effectiveness is the Executive Sponsor. WDES will be performance managed via Equalities Forum.
- Disability Confident Employer Status.

Consultation

- WDES data was presented to the Disability & Wellness Network on 10th July 2019 for their views and for information, and the EDI Service held an interactive session on 15th August 2019 to explore the data and consult with the Network on the Action Plan.
- The Action Plan will be created in partnership with the Network and shared with the Equality Forum with a view to supporting the Trust to address disability inequalities.
- Trust Management Team – 1st August, 2019

Governance or Legal Issues

- The WDES has been commissioned by the Equality & Diversity Council (EDC) and is mandated through the NHS Standard Contract to ensure effective collection, analysis and use of workforce data.
- The WDES is linked to the EDS2 which is also mandatory for all NHS Trusts.
- Supports meeting the Equality Act 2010 and duty to make reasonable adjustments.

Public Sector Equality Duty & Equality Impact Risk Analysis

Below is a summary of the equality-related impacts of the report:

The WDES is a set of measures that identifies inequalities in the experience of disabled staff in the workplace in comparison with their non-disabled counterparts. It is a barometer of our culture and lived experience of disabled colleagues. Our current position highlights a need to increase the declaration rates of disabled staff in

our Trust, in order to allow us to better identify inequalities and close the gaps. The data clearly identifies a difference in workplace experience, treatment and progression of disabled colleagues. The aforementioned Action Plan being developed in partnership with the Disability & Wellness Network outlines the steps that will be taken to close the gaps.

We have the second largest deaf community outside of London.

Workforce diversity as at 31/3/2019 (2586)

- Disability - total of 809 employees, 31.28% of the Trust have not declared their disability status. 4.45% of staff within DHCFT have declared some form of disability (115 staff).
- Ageing workforce - 50-54 age group accounts for 17.13% of the Trust head count equating to 443 employees. A total of 1,012 employees, 39.13% of the Trust head count, is aged 50 or over which shows an aging workforce within the Trust. The Trust employs only 1 member of staff who is aged under 20. In total there are just 72 employees (2.78%) within the Trust who are aged under 25.
- Gender - majority of employees are female 2,068 (79.97%) but looking at Senior Managers (band 8c & above) the female/male divide is much closer at 54.17% and 45.83%; closer still at Director level 50% and 50%. Male employees are over represented in senior positions compared to female employees.

Disability in the workplace and Public Health Data:

- 1:6 of working age have a diagnosable mental health condition
- 52% unskilled; 33% professionals have long term conditions
- By 2030 40% workforce have long term condition
- By 2020 1:3 workers will be 50+
- Young people – impact repetitive strain injury, muscular skeletal injuries and isolation
- 50% mental health conditions begin before age 14
- TUC reported disability unemployment rate has increased between 2013 and 2016

Other data:

- There are 6 million people of working age with a disability. Only 48% of them are in work compared with 80% of people in work without a disability.
- 83% of people acquire their disability whilst at work.
- Hearing lost is a major public health issue affecting 10 million people
- 1 in 10 affected by Tinnitus
- 1 in 10 living with dyslexia

73% of employers who said they had made a reasonable adjustment said it was easy to do (ENEI)

There are no adverse effects on people with protected characteristics (REGARDS).	
There are potential adverse effect(s) on people with protected characteristics (REGARDS). Details of potential variations /inequalities in access, experience and outcomes are outlined below, with the appropriate action to mitigate or minimise those risks.	x

Recommendations

The Board of Directors is requested to:

1. Note findings against the 10 performance indicators and the need to improve the disclosure rate so that we can support colleagues with reasonable adjustments.
2. Approve the WDES Report that will be published on the Trust's external website by the 30th September, 2019 and shared with commissioners.

Report presented by: Amanda Rawlings, Director of People & Organisational Effectiveness

Report prepared by: Harinder Dhaliwal, Head of Equality, Diversity & Inclusion and Clare Meredith, Equality, Diversity & Inclusion Advisor.

Appendix 1: WRES 18/19 indicators

Appendix 2: WRES 18/19 On-line reporting form.