

Workforce Disability Equality Standard 2021 Update and Action Plan



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INTRODUCTION

The aim of our inclusion strategy is to ensure we create and maintain a hospital that is free from inequalities for our patients and our colleagues. We want our workforce to reflect our community to enable us to deliver the best possible care as well as creating a workplace where we value different perspectives and experiences. We are committed to ensuring equality, diversity and inclusion (EDI) in part of everything we do.

UHP's vision is to provide excellent care, with compassion wrapped around people's individual needs which is reflected in how we support our colleagues and underpinned by our Trust values:

- Put people first
- Take ownership
- Respect others
- Be positive
- Listen, learn and improve

This update provides an overview of the national 2021 Workforce Disability Equality Standard (WDES) submission from UHP covering the period 01 April 2020 to 31 March 2021. The submission includes workforce data and feedback from the 2020 National Staff Survey results for UHP (all colleagues are able to respond to the survey) in relation to the questions which contribute to WDES.

This update also outlines our key priorities that form part of the EDI Improvement Plan.

BACKGROUND

WDES was introduced in 2019 and is designed to improve workplace experience and career opportunities for colleagues who share that they have a disability working or looking to work in the NHS, to enable a more inclusive environment for all. The WDES is important, because research shows that a motivated, included and valued workforce helps to deliver high quality patient care, increased patient satisfaction and improved patient safety.

WDES enables NHS organisations to review their performance against ten specific measures (metrics) and produce action plans to support positive change and close the gap in the career and workplace experience between Disabled and non-disabled colleagues. Similar to the Workforce Race Equality Standard (WRES) on which the WDES is part modelled, WDES also identifies good practice and compares performance regionally and nationally.

More information can be found [here](#).

In July 2020 we launched our Disability and Wellbeing Network (DAWN). Our networks have a dual purpose – to bring colleagues together to identify with the network and allies (colleagues who demonstrate their commitment to EDI) to provide support and share experiences as well as working together to tackle issues that get in the way of inclusion at UHP.

UHP's WDES FINDINGS

Workforce Metrics

Metric	Indicator
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.
2	Relative likelihood of Disabled staff compared to non-disabled staff being appointed from shortlisting across all posts.
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. Note: this metric will be based on data from a 2 year rolling average of the current year and the previous year. This metric is voluntary in year one.

Metric 1 - Appendix 1 shows the headcount and percentage of the workforce by payband or staff group and disability. Colleagues who have shared that they have a disability represent 3.94% of the workforce (4% in 2020). With the exception of the lower pay clusters in AfC, most areas including medical see percentages lower than the overall workforce. As seniority increases, the number of colleagues sharing they have a disability reduces with no colleagues at band 8c and above. Colleagues who have shared that they have a disability peaks at 6.4% of colleagues in a non-clinical role bands 1-4, compared to 4.55% in clinical roles. Medical roles range between 0.95% for trainee grades and 1.9% for career grades

Metric 2 - The relative likelihood of non-disabled applicants compared to Disabled staff being appointed from shortlisting across all posts processed through NHS jobs has increased to 2.33. The gap has increased from 1.86 in 2020 and 1.43 in 2019. UHP are notably higher than the 2019 national figure of 1.23.

Metric 3 – In relation to formal performance related capability processes (excluding health) there were low numbers across the Trust with no cases relating to colleagues with a disability.

Staff Survey Feedback

All employees at UHP are asked to respond to the NHS Staff Survey. There were 3,550 responders to the 2020 survey, which represented 42% of the workforce. 763 of the 3,550 respondents identified themselves as having a long-term health condition or a disability, down from 879 in 2019. Whilst 14% of colleagues do not share their health status on ESR, it is worth noting that on appointment colleagues are asked to declare whether they have a disability whereas the survey asks whether colleagues have a long-term health condition or a disability.

A summary of UHP's results since 2018 are shown at Appendix 2.

Metrics

Metric	Indicator
4 – Staff Survey Q13	<p>a) Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from:-</p> <ul style="list-style-type: none"> • Patients/service users; their relatives or other members of the public • Managers • Other colleagues <p>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</p>
5 – Staff Survey Q14	Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.
6 – Staff Survey Q11	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.
7 – Staff Survey	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 following NHS Staff Survey Metric only includes the responses of Disabled staff
8 – Staff Survey Q28b	Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work.
9	<p>a) The staff engagement score for Disabled staff, compared to non-disabled staff and the overall engagement score for the organisation.</p> <p>b) Has your Trust taken action to facilitate the voices of Disabled staff in your organisation to be heard (yes) or (no).</p>

Results

Metric 4 - There was a notably higher percentage of colleagues who share they have a disability compared to those who do not of experiencing bullying, harassment or abuse from patients, managers and colleagues in the last 12 months:

Source of bullying, harassment or abuse	Disabled	Non-disabled
Patients/service users, relatives or the public	25.1%	21.9%
Managers	19.1%	9%
Colleagues	26.5%	17%

45.6% of cases relating to colleagues with disabilities are reported either by the individual or a colleague compared to 46.5% for non-disabled colleagues, which is lower than the national average of 47.8% (non-disabled) and 49.6% (Disabled) respectively.

Metric 5 – 75.3% of responders with a long-term health condition or a disability believe the Trust provides equal opportunities for career progression or promotion. The gap between non-disabled responders has widened to 12%, an increase of 4.7%. Non-disabled responders report minimal change with 87.3% in 2020. Non-disabled responders report more favourably than the national position whilst colleagues with a long-term condition or a disability respond less favourably.

Metric 6 - More responders who have a long-term health condition or a disability felt pressure from their manager to come to work when unwell when compared with non-disabled colleagues (Disabled 30.5%, non-disabled 19.7%). The gap has increased from 8.4% in 2019 to 10.8% 2020 between responders who have a long-term health condition or disability and those who do not.

Metric 7 – The gap has widened in relation to the extent to which the Trust values their work with responders with a long-term condition or disability reporting 35.6% compared to 49.2% for non-disabled responders – a gap of 13.6% widening from 9.4% in 2019. UHP respond more less favourably than the 2019 national position at 37.2% for responders with a long-term condition or disability and more favourably for non-disabled responders (47.3%).

Metric 8 - 77.9% of responders with a long-term condition or disability believe the Trust has made adequate adjustments to enable them to carry out their duties. This is a 0.3% increase on last year and an upward trajectory since 2018. This is better than the 2019 national average of 75.5%.

Metric 9 - The staff engagement score has remained static and in line with the national position for non-disabled responders. Responders with a long-term health condition or disability show a reduction from 6.7 in 2019 to 6.5 in 2020, a 0.6 gap and below the 2020 national position of 6.7.

Board Representation Indicator

Metric	Indicator
10	Percentage difference between the organisations Board membership and its overall workforce disaggregated <ul style="list-style-type: none"> • By voting membership of the Board • By executive membership of the Board

Metric 10 - The overall representation at Trust Board level is 6.25% reflective of non-voting/non-executive membership compared to 3.94% for the overall workforce.

CONCLUSION

The workforce data and staff survey feedback indicates that colleagues who share they have a disability or long-term health issue continue to experience workplace inequalities when compared to non-disabled colleagues. We also know that, COVID-19 has had a greater impact on people who have long-term health issues or disabilities reflected in the need for many to shield over the past 18 months. To support colleagues we have worked hard on ensuring risk assessments are completed and reasonable adjustments are put in place.

Our aim is to bridge the gaps identified by the workforce standard and work alongside DAWN to shape our action plan which we will co-deliver.

NEXT STEPS AND ACTION PLAN

Our key areas of focus are:-

Actions	Lead	Due	Supports	Success Measure
Overhaul Recruitment and widen career development opportunities				
<p>Targeted recruitment campaigns in collaboration with the staff networks.</p> <p>Networks to review of the application process from an applicant's perspective</p> <p>Widening career development opportunities for colleagues from protected groups to move into leadership positions through greater access to relevant courses</p> <p>Enabling work experience opportunities in the form of shadowing and learning from those in leadership roles</p> <p>Expanding access to career conversations</p> <p>Foster good relationships with our community to support identification of our blind spots</p>	<p>HRBP Lead EDI</p> <p>Lead OD Facilitator</p>	<p>March 2023</p>	<p>Model Employer</p> <p>WRES Metrics 2, 7</p> <p>WDES Metrics 1, 2</p>	<p>6% increase in BAME and Disabled shortlisted applicants</p> <p>4% increase in the number of BAME and Disabled applicants being appointed</p> <p>3% increase in fairness in career progression for those who identify with protected groups.</p>

Education				
<p>Enhance existing education relating EDI in partnership with Staff Networks – focus on improving the workplace experience.</p> <p>Development of a menu of easily accessible educational documents for managers and colleagues with support from the staff networks.</p> <p>Sharing personal stories in different formats to highlight how to raise awareness in terms of experiencing discrimination, bullying and harassment and how to access support within the Trust.</p> <p>Enhance existing education in relation to reasonable adjustments.</p>	HRBP EDI Lead	August 2022	<p>WRES Metrics 5, 6 and 8</p> <p>WDES Metrics 4, 5, 6, 8, 9</p>	<p>2% reduction in 2022 staff survey feedback re harassment from colleagues and discrimination from managers with further 3% reduction in 2023</p> <p>1% increase in satisfaction with reasonable adjustments in 2022 and 2023 survey feedback</p>
Promotion				
<p>Campaign to increase colleagues sharing their protected characteristics rates to include how we use the information</p> <p>Achieve Disability Confident 3</p>	HR EDI Lead	<p>April 2022</p> <p>Dec 2022</p>	<p>All metrics</p> <p>All WDES metrics</p>	10% reduction in unknown rates

Appendix 1 – Workforce Data

	DISABLED		NON-DISABLED		DISABILITY UNKNOWN OR NULL	
Non Clinical Staff	2020	2021	2020	2021	2020	2021
Bands 1	6.56%	6.5%	45.90%	32.3%	47.54%	9.8%
Bands 2	10.00%	8.6%	73.56%	75.3%	16.44%	61.3%
Bands 3	3.78%	3.9%	87.94%	88.9%	8.27%	16.1%
Bands 4	3.13%	2.3%	88.75%	87.6%	8.13%	7.3%
Bands 5	5.98%	6.0%	83.70%	83.6%	10.33%	10.1%
Bands 6	2.34%	2.3%	89.84%	91.0%	7.81%	10.4%
Bands 7	4.88%	5.6%	87.80%	88.8%	7.32%	6.8%
Bands 8a	1.89%	0.0%	88.68%	84.4%	9.43%	5.6%
Bands 8b	0.00%	4.2%	95.24%	91.7%	4.76%	15.6%
Bands 8c	3.45%	0.0%	93.10%	97.0%	3.45%	4.2%
Bands 8d	0.00%	0.0%	85.71%	90.0%	14.29%	3.0%
Bands 9	0.00%	0.0%	77.78%	80.0%	22.22%	10.0%
VSM	0.00%	0.0%	54.55%	55.6%	45.45%	20.0%
Clinical Staff – non medical	2020	2021	2020	2021	2020	2021
Bands 1	16.67%	100%	66.67%	0.00%	16.67%	0.00%
Bands 2	4.92%	5.12%	84.99%	85.77%	10.09%	9.11%
Bands 3	4.11%	4.52%	85.16%	85.81%	10.73%	9.68%
Bands 4	3.85%	2.13%	81.73%	62.80%	14.42%	35.06%
Bands 5	3.37%	3.45%	78.14%	75.49%	18.49%	21.06%
Bands 6	2.93%	3.14%	87.82%	87.86%	9.25%	9.00%
Bands 7	3.09%	3.25%	84.75%	84.81%	12.16%	11.93%
Bands 8a	1.63%	3.25%	80.49%	83.12%	17.89%	13.64%
Bands 8b	0.00%	0.00%	85.71%	83.78%	14.29%	16.22%
Bands 8c	0.00%	0.00%	92.31%	83.33%	7.69%	16.67%
Bands 8d	0.00%	0.00%	100%	100%	0.00%	0.00%
Bands 9	0.00%	0.00%	100%	100%	0.00%	0.00%
VSM	0.00%	0.00%	0.00%	50.00%	0.00%	50.00%
Medical and Dental	2020	2021	2020	2021	2020	2021
Consultants	1.11%	1.04%	84.44%	85.59%	14.44%	13.36%
Non-consultant career grade	2.07%	1.90%	90.16%	84.76%	7.77%	13.33%
Trainee grades	0.59%	4%	94.69%	81.90%	4.72%	17.14%

Appendix 2

Staff Survey Metrics		2018	2019	2020	National (2019)
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	Disabled Non	31.4% 25.7%	30.9% 26.3%	25.1% 21.9%	31.6% 25.2%
ii. Managers	Disabled Non	17% 10.4%	15.7% 10%	19.1% 9%	18.6% 10.7%
iii. Other colleagues	Disabled Non	26.6% 17.6%	26% 16.6%	26.5% 17%	25.7% 16.8%
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	Disabled Non	50.2% 48.3%	51.4% 48%	45.6% 46.5%	49.6% 48.0%
Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.	Disabled Non	78.5% 86.2%	81.1% 88.4%	75.3% 87.3%	78.5% 85.1%
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.	Disabled Non	28.4% 20%	26.7% 18.3%	30.5% 19.7%	31.3% 23.0%
Percentage of Disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their organisation values their work.	Disabled Non	36.6% 47.7%	40% 49.4%	35.6% 49.2%	37.4% 47.3%
Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work.	Disabled	76.8%	77.6%	77.9%	75.5%
The staff engagement score for Disabled staff, compared to non-disabled staff.	Disabled Non	6.6 7.1	6.7 7.1	6.5 7.1	6.7 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	Yes	