

**REPORT TO THE TRUST BOARD
24 SEPTEMBER 2020**

Title	Workforce Disability Equality Standards (WDES)
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Purpose of the Report:

The purpose of this report is to brief the Trust Board on the first submission of the Workforce Disability Equality Standard (WDES). It also highlights the identified actions to date and the next steps.

Summary of Key Issues:

The Workforce Disability Equality Standard (WDES) is a set of ten specific measures (metrics) that will enable NHS organisations to compare the experiences of disabled and non-disabled staff. This information will then be used by the relevant NHS organisation to develop a local action plan, and enable them 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 and is restricted to NHS Trusts and Foundation Trusts for the first two years of implementation.

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.

The implementation of the WDES will enable NHS Trusts and Foundation Trusts to better understand the experiences of their disabled staff. It will support positive change for existing employees, and enable a more inclusive environment for disabled people working in the NHS. Like the Workforce Race Equality Standard (WRES) on which the WDES is in part modelled, it will also allow us to identify good practice and compare performance regionally and by type of Trust.

Strategic priorities this paper supports (Please check box including brief statement)

Improved patient experience	<input checked="" type="checkbox"/>	If we are better able to reflect the populations we serve, then the quality of care is likely to improve and better the experience of service users and patients.
Improved health of the communities we serve	<input checked="" type="checkbox"/>	As above.
Improved staff experience	<input checked="" type="checkbox"/>	Results of the annual NHS staff survey show that disabled staff consistently report higher levels of bullying and harassment and less satisfaction with appraisals and career development opportunities. The purpose of the WDES is to

		<p>improve the experience of disabled staff working in, and seeking employment, in the NHS.</p> <p>The WDES mandates all NHS Trusts and Foundation Trusts to publish the results of their metrics, together with an action plan outlining the steps the organisation will take to improve the experiences of disabled staff.</p>
Improved value for money	<input checked="" type="checkbox"/>	<p>If staff are encouraged to disclose their disability, the Trust can be more proactive in terms of supporting staff. An example of this is with reasonable adjustments. This may have a positive impact on the amount of sick pay that the Trust pays and will improve absenteeism due to a disability.</p>

Committees / Meetings where this item has been considered:

Date	Committee / Meeting
	This report was last presented in September 2020 at the Appointments and Remuneration Committee.

Implications:

Equality Analysis	This report aims to close the gaps in the experience and opportunities between disabled staff and non-disabled staff within NHS trusts.
Risk and Assurance	Excellent equality, diversity and human rights practice demonstrates economic, legal, moral and reputational sense.
Service User / Carer / Staff	The needs of service users, carers and staff sit at the heart of equality, diversity and human rights work.
Financial	Excellent equality, diversity and human rights practice demonstrates economic, legal, moral and reputational sense.
Quality	A number of the WDES indicators are directly linked to the National NHS Staff Survey outcomes and there is a casual link between staff satisfaction and the quality of patient care.

Supporting Documents and Research material

More information can be found here https://www.england.nhs.uk/about/equality/equality-hub/wdes/

1.0 Background / Introduction

- 1.1 The purpose of this report is to present a summary of the Trust's statistics compared to the NHS England Workforce Equality Disability Standards (WDES). We also completed an online submission in consultation with the ELFT Ability Network.

2.0 Executive Summary

- 2.1 The WDES requires the NHS organisations employing the 1.4 million NHS staff to demonstrate progress against nine indicators (Annex A) of workforce race equality. The indicators focus upon differences between the experience and treatment of disabled staff in the NHS, including progression to appointment from shortlisting, entry into formal disciplinary processes, experience of bullying and harassment, and representation at board level.
- 2.2 The WDES was included in the NHS standard contract for NHS providers, and since July 2015, provider organisations have been submitting their respective data against the nine WRES indicators, with action plans to continuously improve on these measures.
- 2.3 The WDES Standard NHS organisations to demonstrate progress against a number of indicators of equality for disabled staff including a specific indicator to address the low levels of representation of disabled staff on the Board.
- 2.4 The Trust published its first baseline report in August 2019.

3.0 Background/Introduction

- 3.1 The WDES seeks to tackle the consistently less favourable treatment of the disabled workforce in respect of their treatment and experience working in the NHS.
- 3.2 It draws on new research on disability equality in the NHS workforce which shows that disabled staff are less likely to be appointed once shortlisted, less likely to be selected for training and development programs, more likely to experience harassment, bullying and abuse, and more likely to be disciplined and dismissed.
- 3.3 A culture of staff engagement and inclusion is proven to lead to improved team working, better decision making and, therefore, improving the service user experience.
- 3.4 The Standard aims to improve workforce disability equality across this Trust by tackling discrimination in particular on the basis of ethnic background. This will improve the experiences of disabled staff that form a large part of the NHS workforce. Ultimately, engaged and motivated staff will lead towards improvements in the quality of care and satisfaction for all patients.
- 3.5 The ten indicators that make up the WDES are intended to provide information which organisations should then explore to identify the root causes, and put action plans in place to address them. The indicators are:
- Indicator 1. Percentage of staff in each of the AfC Bands 1-9 or Medical and Dental subgroups and VSM (including Executive Board members) compared with the percentage of staff in the overall workforce;

- Indicator 2. Relative likelihood of disabled staff being appointed from shortlisting across all posts;
- Indicator 3. Relative likelihood of staff entering the formal capability process, as measured by entry into a formal capability procedure. Note: This indicator will be based on data from a two year rolling average of the current year and the previous year;

As the results of these are published on the NHS Staff Survey website, not required to enter these metrics as part of the submission, however they are still part of WDES and should be included in the action

- Indicator 4. Percentage of disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from:
 - I. Patients/service user, their relatives or members of the public;
 - II. Managers;
 - III. Other colleagues.
- Indicator 5. Percentage of disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion;
- Indicator 6. Percentage of disabled staff compared to non-disabled staff saying that they felt pressure from their manager to come to work, despite not feeling well enough to perform their duties;
- Indicator 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;
- Indicator 8. Percentage of disabled staff compared to non-disabled staff that their employer has made adequate adjustments to enable them to carry out their work;
- Indicator 9a. The staff engagement score for disabled staff compared to non-disabled staff and overall engagement score for the organisation;
- Indicator 9b. Has your Trust taken action to facilitate the voices of disabled staff in your organisation?
- Indicator 10. Trust board. Percentage difference between the organisations' Board voting membership and its overall workforce. Note: Only voting members of the Board should be included when considering this indicator.

3.6 The Trust's People Plan is, therefore, a holistic and comprehensive one, focused on building individual and organisational capability and removing institutional barriers to equality through both cultural and practical interventions. The strategy is focused on meeting quality outcomes for the organisation as a whole, and particularly for service users and carers, rather than solely focusing on representative targets.

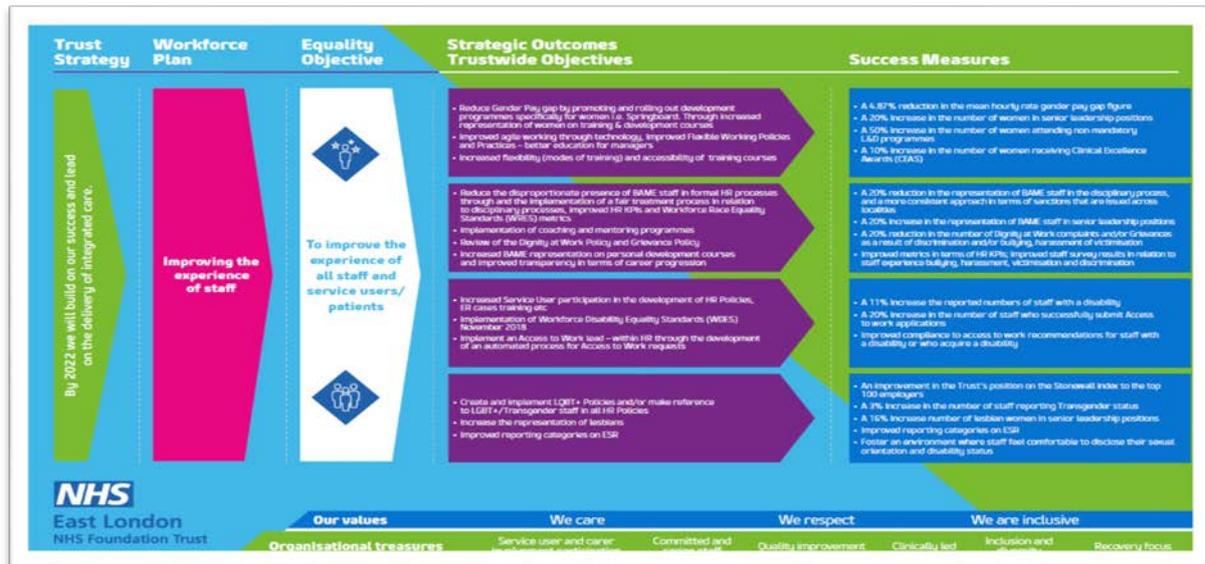
3.7 The purpose of this report is to present an updated action plan for the each of the WDES indicators. It also highlights this year's data submissions and highlights some actions that need to be taken.

3.8 Whilst there are Trust HR policies and procedures in place, there also needs to be a

cultural shift in order to reduce the number of formal processes. However, the policies on their own are not sufficient to solve the problems of inequality and discrimination.

4.0 Equality and Diversity Plan

4.1 The Trust's Equality and Diversity strategy has been reviewed and we are in the process of devising metrics to measure its success.



Summary:

4.2 **Indicator 1. Percentage of staff in each of the AfC Bands 1-9 or Medical and Dental subgroups and VSM (including executive Board members) compared with the percentage of staff in the overall workforce.**

Non clinical staff

- Under Band 1 - 8.8% of staff in Under Band 1 roles are disabled.
- Band 1 – We have no disabled staff in Band 1 roles.
- Band 2 - 13.8% of Band 2s are disabled.
- Band 3 - 14.8% of Band 3s are disabled.
- Band 4 - The percentage of disabled staff in Band 4 roles is 5.8%.
- Band 5 - The percentage of disabled staff in Band 5 roles is 5.6%.
- Band 6 – The percentage of disabled staff in Band 6 roles is 6.9%.
- Band 7 - The percentage of disabled staff in Band 7 roles is 2.3%.
- Band 8A – 7.5% of Band 8As are disabled.
- Band 8B – 2.6% of Band 8Bs are disabled.
- Band 8C - The percentage of disabled staff in Band 8C roles is 9.1%.
- Band 8D - The percentage of disabled staff in Band 8D roles is 3.8%.
- Band 9 - We have no disabled staff in Band 9 roles.
- VSM – The percentage of disabled staff in VSM roles is 27.3%.

Clinical staff

- Under Band 1 – We have no disabled staff in Under Band 1 roles.

- Band 1 - We have no disabled staff in Band 1 roles.
- Band 2 – 11.11% of Band 2 staff are disabled.
- Band 3 – 4.41% of Band 3 staff are disabled.
- Band 4 – 5.74% of Band 4 staff are disabled.
- Band 5 – 5.87% of Band 5 staff are disabled.
- Band 6 – 6.85% of Band 6 staff are disabled.
- Band 7 – 4.77% of Band 7 staff are disabled.
- Band 8A - The percentage of disabled staff in Band 8A roles is 4.47%.
- Band 8B - The percentage of disabled staff in Band 8B roles is 2.78%.
- Band 8C - The percentage of disabled staff in Band 8C roles is 1.72%.
- Band 8D - We have no disabled staff in Band 8D roles.
- Band 9 - We have no disabled staff in Band 9 roles.
- VSM – We have no disabled staff in VSM roles.

4.3 Indicator 2. Relative likelihood of disabled staff being appointed from shortlisting across all posts.

4.3.1 The number of shortlisted candidates recorded as having a disability is 370, this has fallen from 936 in the previous year, compared to 4749 recorded as not having a disability.

4.3.2 The number of candidates reporting a disability that are appointed are 68, compared to 1004 candidates who did not declare a disability. Disabled staff are therefore 0.18 times likely to be appointed compared to 0.21 of non-disabled staff.

4.3.3 The relative likelihood of disabled staff being appointed from shortlisting compared to non-disabled staff is 1.15.

4.4 Indicator 3. Relative likelihood of staff entering the formal capability process, as measured by entry into a formal capability procedure. Note: This indicator will be based on data from a two year rolling average of the current year and the previous year.

4.4.1 337 staff employed have a recorded disability, compared to 4772 that have not. Seven staff who have a disability have entered the capability process compared to 68 staff who have not got a recorded disability.

4.4.2 The likelihood of disabled staff entering the capability process is 0.02 compared to non-disabled staff 0.01.

4.5 Indicator 4. Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from:

- Patients/service user, their relatives or members of the public
- Managers
- Other colleagues

	Disabled	Non-disabled	Unknown
% experiencing harassment, bullying or abuse from Patients/service user, their relatives or members of the public	40%	33.8%	0%
% experiencing harassment, bullying or abuse from managers in the last 12 months	20.3%	12.8%	0%

% experiencing harassment, bullying or abuse from other colleagues in the last 12 months	22.9%	16.8%	0%
% of staff saying the last time they experienced harassment, bullying or abuse at work, they or a colleague reported in the last 12 months	58.8%	58.8%	0%

4.6 Indicator 5. Percentage of disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.

Disabled	Non-Disabled	Unknown
72.6%	80.6%	0%

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

Disabled	Non-Disabled	Unknown
23.1%	15.9%	0%

4.8 Indicator 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.

Disabled	Non-Disabled	Unknown
45%	56%	0%

4.9 Indicator 8. Percentage of disabled staff compared to non-disabled staff that their employer has made adequate adjustments to enable them to carry out their work.

Disabled	Non-Disabled	Unknown
69.7%	N/A	N/A

4.10 Indicator 9a. The staff engagement score for Disabled staff compared to non-disabled staff and overall engagement score for the organisation.

Disabled	Non-Disabled	Overall Staff
7.0	7.4	7.3

4.11 **Indicator 9b has your Trust taken action to facilitate the voices of disabled staff in your organisation?**

4.11.1 Yes.

4.12 **Indicator 10. Trust board. Percentage difference between the organisations' Board voting membership and its overall workforce. Note: Only voting members of the Board should be included when considering this indicator.**

	Disabled	Disabled %	Non-Disabled	Non-Disabled %	Unknown	Unknown %
Trust Board	3	16%	16	84%	0	0%
Execs	2	18%	9	82%	0	0%
Non Execs	1	13%	7	88%	0	0%

5.0 Recommendations

5.1 It is recommended that the Trust Board agree the action plan as detailed above.

6.0 Action being requested

6.1 The Board/Committee is asked to **RECEIVE** and **DISCUSS** the contents of the report.

WORKFORCE DISABILITY EQUALITY STANDARDS (WDES)
DRAFT ACTION PLAN 2020/21 (Subject to Trust board ratification)

Indicator	Next Steps
<p>Percentage of staff in each of the AfC Bands 1-9 or Medical and Dental subgroups and VSM (including executive Board members) compared with the percentage of staff in the overall workforce</p>	<p>There is an under representation of staff declaring a disability Carry out a data cleansing exercise. Create Trust wide communications jointly with Staff side, ELFT Ability and People & Culture to encourage staff to declare their disability.</p> <p>Communications articles where Trust board members share their disability.</p> <p>Director of People & Culture to attend the ELFT Ability Network meeting to elicit input into the action plan.</p>
<p>Indicator 2. Relative likelihood of Disabled staff being appointed from shortlisting across all posts.</p>	<p>We are currently a disability confident employer. A project is underway to review the Recruitment Policy and Training and to undertake a Values Based Recruitment project, to have a greater emphasis on disability awareness.</p> <p>Run disability awareness sessions.</p> <p>Be more explicit in recruitment adverts that the Trust are positive about disability. Pilot underway with learning disabilities to replace traditional interviews with work trials</p>
<p>Indicator 3. Relative likelihood of staff entering the formal capability process, as measured by entry into a formal capability procedure. Note: This indicator will be based on data from a two year rolling average of the current year and the previous year.</p>	<p>People and Culture and Operations group working closely with ELFT Ability Network. The number of people without a disability is significantly higher than those that have a disability.</p> <p>Guidance has been implemented in terms of reasonable adjustments.</p> <p>The sickness policy has been reviewed</p> <p>The Trust have re-procured the Occupational Health provider Team Prevent.</p> <p>We are recruiting for a pastoral care role to give additional support to staff who are off sick.</p> <p>Following Covid 19, where around 450 staff declared underlying Health conditions, the Wellbeing team are working with the ELFT Ability lead to encourage those staff to declare their disabilities.</p> <p>As a result of Covid 19, we have set up a Remote working Group and Remote Working Guidance. In addition, we have run a number of online Purple Space events to support staff</p>

	<p>working remotely. We also have a Project Manager in post to support staff with Reasonable Adjustments. Office Equipment and furniture is also being made easily accessible. As a requirement from the NHS People Plan, we are implementing Wellbeing Conversation's.</p> <p>We have risk assessed over 95% of our organisation for vulnerabilities. All buildings have been risk assessed and there is also detailed Shielding Guidance for staff. Performance management/ capability policy under full review to include alternative options such as fast track redeployment</p>
<p>Indicator 4. Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from:</p> <ul style="list-style-type: none"> i. Patients/service user, their relatives or members of the public ii. Managers iii. Other colleagues 	<p>The Respect and Dignity at work project is ongoing and the first. 'Through Someone Else's Eyes' session took place in September 2019. We continue to build on the stories collected during the 'Through My Eyes' Sessions.</p>
<p>Indicator 5. Percentage of disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.</p>	<p>Promoting training opportunities to all staff and encourage staff with a disability to apply and to declare their disability.</p> <p>Increase service user participation in HR processes (Physical and mental health). LMS project to ensure accessibility and 'shop window' for all</p>
<p>Indicator 6. Percentage of disabled staff compared to non-disabled staff saying that they felt pressure from their manager to come to work, despite not feeling well enough to perform their duties.</p>	<p>Promoting training opportunities to all staff and encourage staff with a disability to apply and to declare their disability.</p> <p>Increase service user participation in HR processes (Physical and mental health). Home working for all vulnerable/ shielding</p>
<p>Indicator 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.</p>	<p>Expend on the Respect and Dignity at Work project, with a disability angle.</p> <p>Improved communications.</p>
<p>Indicator 8. Percentage of disabled staff compared to non-disabled staff that their employer has made adequate adjustments to enable them to carry out their work.</p>	<p>Launch and promote the reasonable adjustments guidance.</p> <p>Promote partnership working with ELFT Ability. Active promotion of access to work</p>

<p>Indicator 9a. The staff engagement score for Disabled staff compared to non-disabled staff and overall engagement score for the organisation.</p>	<p>If re people discussed their disability, then the Trust would have a better understanding and would be able to offer more support to disabled staff.</p>
<p>Indicator 9b has your Trust taken action to facilitate the voices of disabled staff in your organisation?</p>	<p>Help to promote the equality networks. Complete the Equality Delivery System 2 assessment. Trust wide focus groups are being arranged. Gold standard in service user engagement & employment</p>
<p>Indicator 10. Trust board. Percentage difference between the organisations' Board voting membership and its overall workforce. Note: Only voting members of the Board should be included when considering this indicator</p>	<p>We have written to board members asking them to disclose any disabilities. Ask all board members to declare their disabilities and undertake a communications campaign around this topic. Them to do a promotional piece to promote their disabilities.</p>

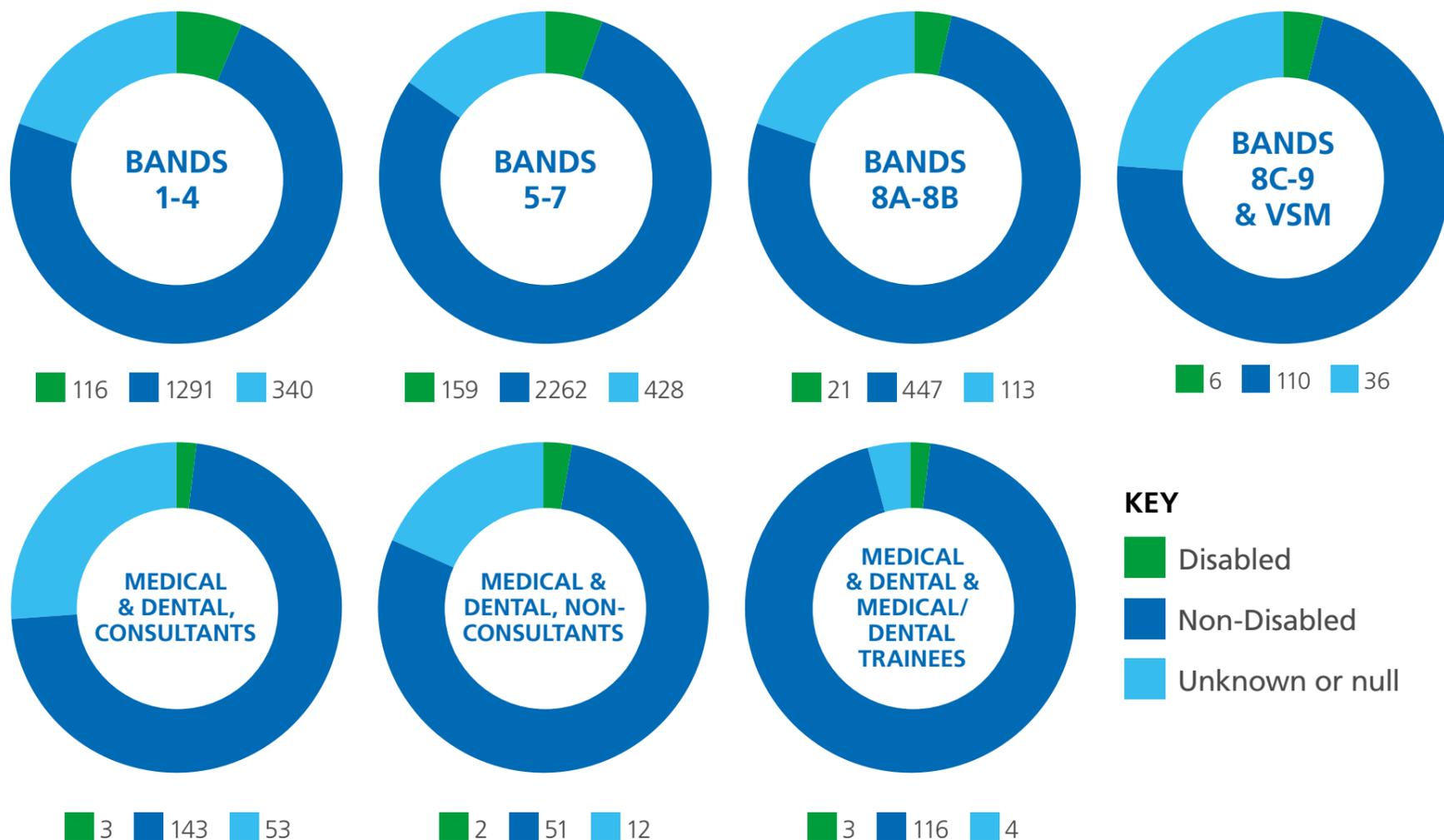
WORKFORCE DISABILITY EQUALITY STANDARD



East London
NHS Foundation Trust

The Workforce Disability Equality Standard (WDES) is a set of ten specific measures (Metrics) that enable NHS organisations to compare the experiences of Disabled and non-disabled staff. East London Foundation Trust will use the Metrics data and local data to develop an action plan that will enable us to demonstrate progress against the indicators of disability equality.

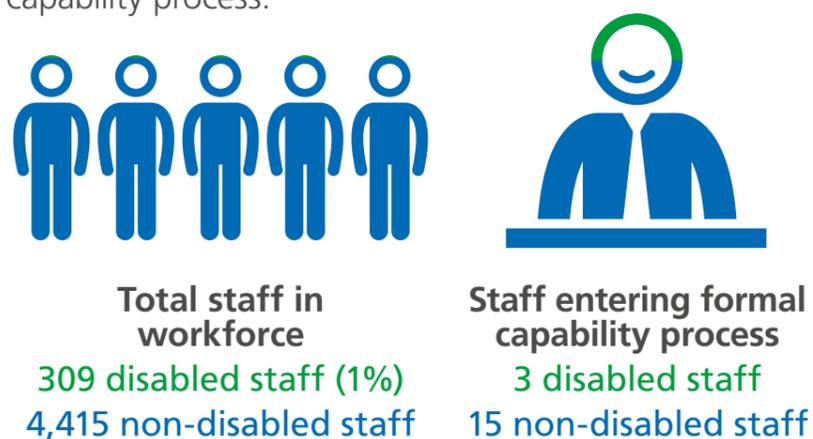
Paybands – number of people per pay range compared with the overall workforce



Appointments – relative likelihood of disabled staff compared to non-disabled staff being appointed from shortlisting across all posts.



Formal capability – relative likelihood of disabled staff compared to non-disabled staff entering the formal capability process.



Board members – total disabled and non-disabled board members of which voting and not voting



Bullying – experienced harassment, bullying or abuse from:



Patients/service users, their relatives or other members of the public



Managers



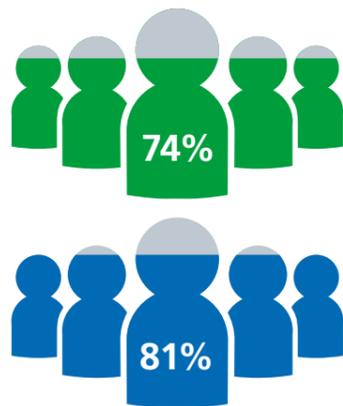
Other colleagues

Bullying – last time experienced harassment, bullying or abuse at work, they or a colleague reported it



Non-disabled

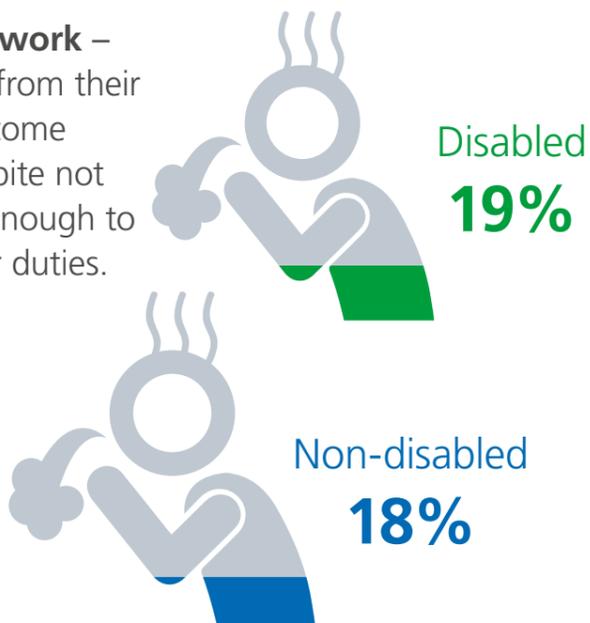
Career progression – % of disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.
74% disabled staff
81% non-disabled staff



74%

of disabled staff said their employer had made adequate adjustment(s) to enable them to carry out their work.

Pressure to work – felt pressure from their manager to come to work, despite not feeling well enough to perform their duties.

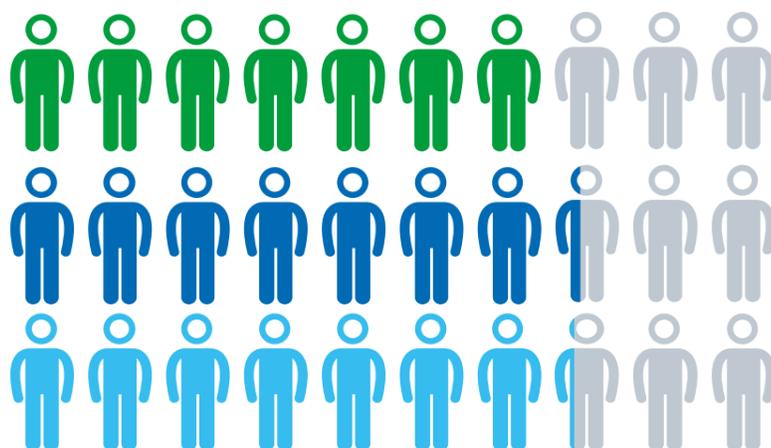


Valued at work – satisfied with the extent to which their organisation values their work.



Non-disabled 56%

Staff engagement – The staff engagement score for Disabled staff, compared to non-disabled staff and the overall engagement score for the organisation.



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