

NHS Workforce Disability Standard LYPFT Results 2018-19

1.0 Workforce Disability Equality Standard (WDES)

National NHS research data has indicated that less favourable treatment of Disabled staff can and does occur. Results of the annual NHS staff survey show that nationally, Disabled staff consistently report higher levels of bullying and harassment and less satisfaction with appraisals and career development opportunities.

The Workforce Disability Equality Standard (WDES) was devised by NHS England and the NHS Equality and Diversity Council as a tool to enable NHS organisations to address this. It is mandated by the NHS Standard Contract.

The Workforce Disability Equality Standard (WDES) includes a set of ten specific measures (metrics) that will enable NHS organisations to compare the experiences of Disabled and non-Disabled staff. This report provides our Trust results for the WDES reporting for August 2019. As a result, we will use the data identified through the ten metrics to develop and implement a local action plan to enable us to demonstrate progress against the indicators of disability equality. It is the first time that this information has been reported so there is limited benchmark available to share at this time.

ESR	Staff Survey	Local data
<ul style="list-style-type: none"> • Workforce representation (<i>metric 1</i>) • Board representation (<i>metric 10</i>) 	<ul style="list-style-type: none"> • Bullying, Harassment, abuse and reporting (<i>metric 4</i>) • Career opportunities (<i>metric 5</i>) • Presenteeism (<i>metric 6</i>) • Feeling valued (<i>metric 7</i>) • Adjustments (<i>metric 8</i>) • Engagement (<i>metric 9</i>) 	<ul style="list-style-type: none"> • Recruitment (<i>metric 2</i>) • Capability (<i>metric 3</i>)

2.0 What positive outcomes will the WDES bring?

The WDES will help foster a better understanding of the issues faced by Disabled staff and aims to increase understanding of Disabled patients needs and patient outcomes.

NHS Trusts and Foundation Trusts will be prompted to look at key areas highlighted by the metrics e.g. career development, appraisals, capability and recruitment processes.

The WDES will aid NHS Trusts and Foundation Trusts in considering Disabled staff representation at all levels throughout the organisation and any barriers which stand in the way of career progression for Disabled staff.

It will support positive change through action plans to enable a more inclusive environment for Disabled people working in the NHS.

The roll-out of the WDES will support an increased focus on disability and the voices of Disabled staff.

The WDES will drive NHS Trusts and Foundation Trusts to improve their disability declaration rates recorded on the national electronic staff records system, ESR..

3.0 What do we mean by disability?

You are Disabled under the Equality Act 2010 if you have a physical or mental impairment that has a 'substantial' and 'long-term' negative effect on your ability to do normal daily activities¹.

- 'substantial' is more than minor or trivial, e.g. it takes much longer than it usually would to complete a daily task like getting dressed
- 'long-term' means 12 months or more, e.g. a breathing condition that develops as a result of a lung infection
- The following short film provides an understanding of disability equality:
<https://www.youtube.com/watch?v=0e24rfTZ2CQ>

4.0 LYPFT WDES Results 2018-19

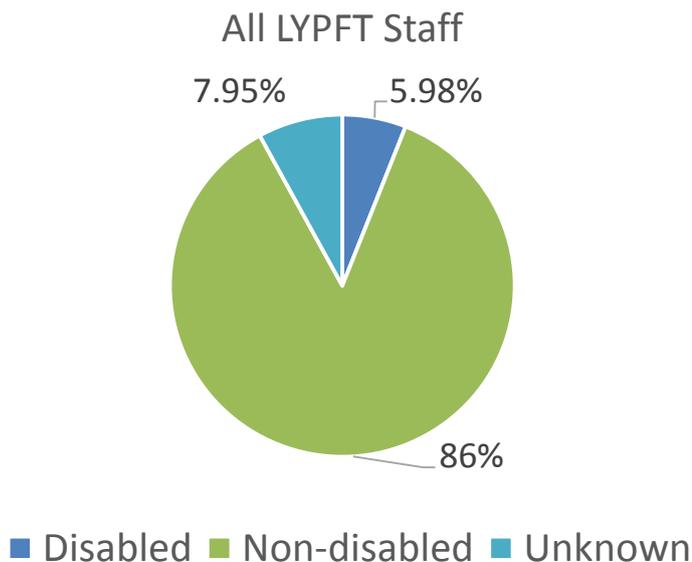
In line with initial national research findings our WDES data identifies;

- Lower likelihood of Disabled staff being appointed following shortlisting at 1.6
- Higher levels of Disabled staff reporting experiencing bullying, harassment or abuse from service users, managers or staff
- Lower percentage of Disabled staff reporting believing that the trust provides equal opportunities for career progression or promotion

A significant amount of focused work has taken place begin tackling disability related workforce disparities. Mechanisms for collecting and using qualitative and quantitative data are in place to enable the development of clear priorities. This includes developing and strengthening our staff networks to support an open and supportive culture and to support the identification of action areas.

¹ <https://www.gov.uk/definition-of-disability-under-equality-act-2010>

4.1 Metric 1 – Workforce Representation



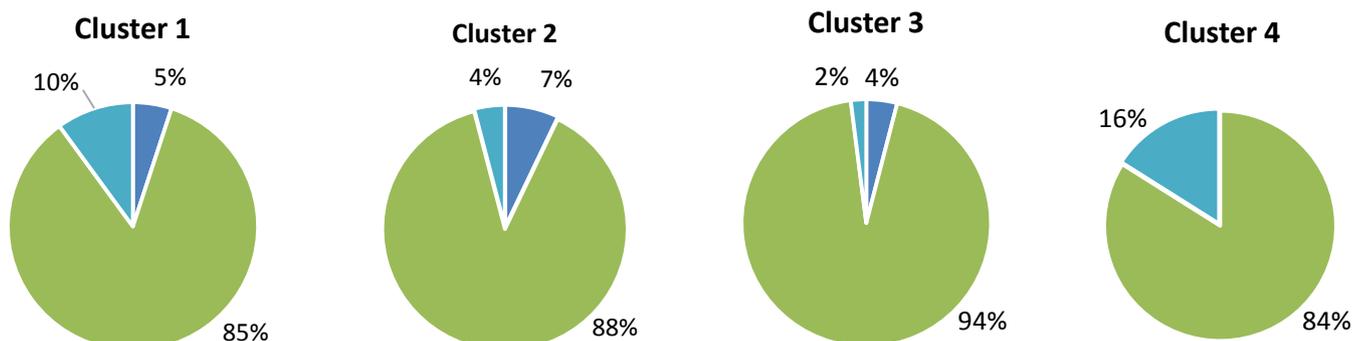
ESR (Employee Staff Records) data disclosure indicates that nearly 6% of the overall workforce population has declared a disability, however, 12.5% of LYPFT staff who completed the NHS Staff Survey declared a disability, during the same reporting period. This illustrates that over double the percentage of Trust staff prefer not to disclose information about disability, impairments or long term conditions on the Trust’s staffing records system, however feel confident to do so through the NHS Staff Survey which is anonymous and confidential.

Feedback from members of the Trust’s disabled and long term health conditions staff network, DaWN (Disability and Wellbeing Network), consistently highlights the concerns experienced by staff on sharing information about their disability within the organisation. Concerns include detrimental impact on career progression and job opportunities as a result of disclosing, fear of stigma and exclusion and increased management scrutiny on performance and capability.

The tables below illustrate the representation of staff with/without disabilities, across pay band clusters.

4.1.1 LYPFT non-clinical workforce profile

Cluster 1 (Bands 1 - 4)
Cluster 2 (Band 5 - 7)
Cluster 3 (Bands 8a - 8b)
Cluster 4 (Bands 8c - 9 & VSM)

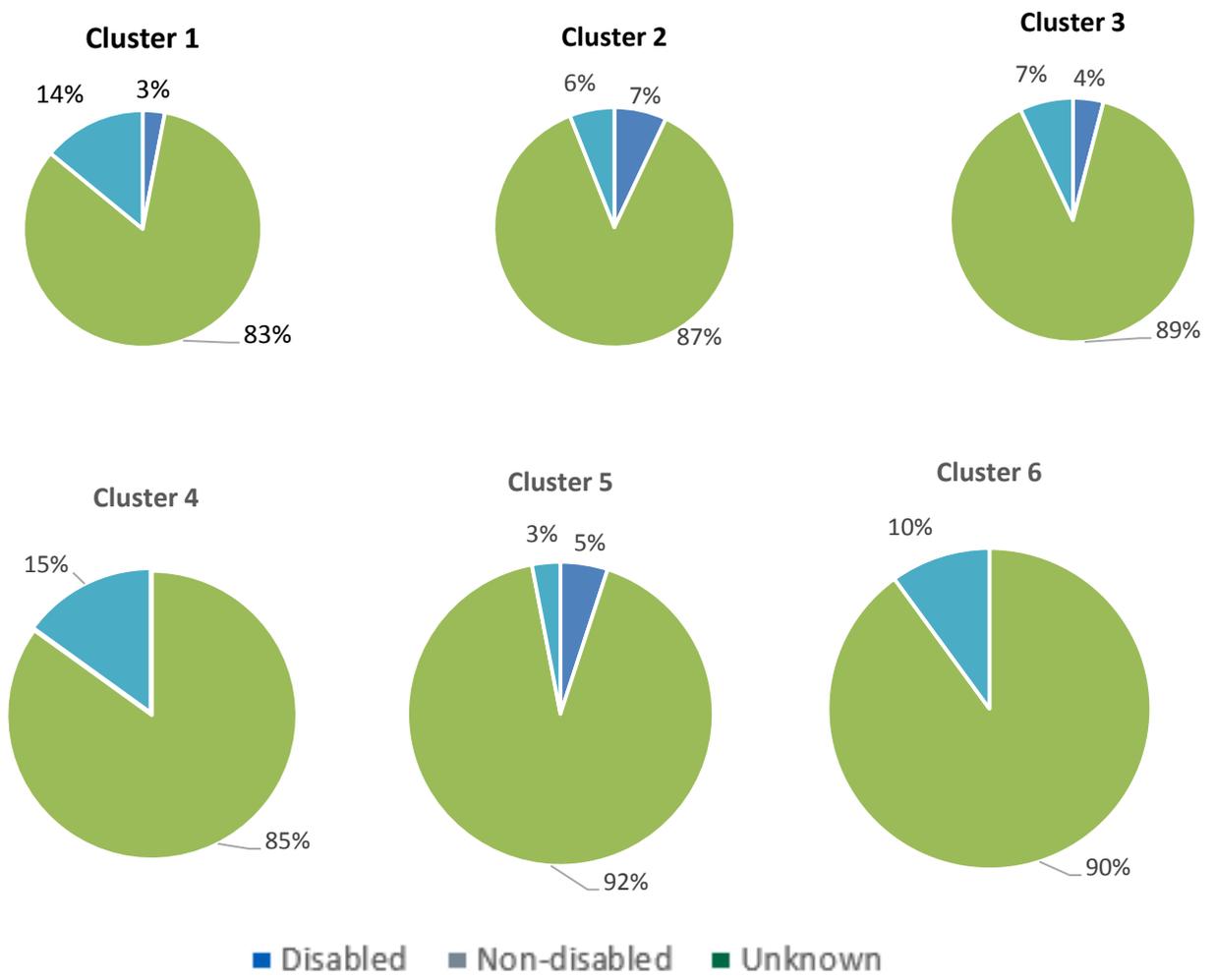


■ Disabled ■ Non-disabled ■ Unknown

The highest percentages where disability data remains unknown in the non-clinical workforce, occurs in clusters 1 and 4 at 10% and 16% respectively.

4.1.2 LYPFT clinical workforce profile

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)



The highest percentage of disability data unknown occurs in Cluster 7 for the clinical workforce, at 25%, followed by Cluster 4 (15%) and Cluster 1 (14%).

4.2 Metric 2 – Recruitment

Relative Likelihood of Disabled Staff Compared with Non-Disabled Staff Being Appointed from Shortlisting Across All Posts

The relative likelihood is 1:65 for LYPFT. A figure below 1:00 indicates that Disabled staff are more likely than Non-Disabled staff to be appointed from shortlisting. This shows a relatively high favourability to Non-Disabled applicants.

4.3 Metric 3 - Capability

Relative Likelihood of Disabled Staff Compared with Non-Disabled Staff Entering the Formal Capability Process – as measured by entry into the formal capability procedure

During this reporting period, there were no staff with declared disability or health impairment, that entered the formal capability process.

4.4 Metric 4 - Workplace harassment, bullying or abuse, Staff Survey results

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

Harassment, Bullying and Abuse – the tables below provide the trust wide results of the 2018 Staff Survey. The responses given by Disabled staff and Non-Disabled staff are compared to show the different experiences and inequalities that exist within the workforce.

WDES Metric 4a: Experience of bullying, harassment or abuse	Data period	Trust value	Peer median	National median
Experience of bullying, harassment or abuse from manager (Disabled Staff %)	2018	 11.7%	16.5%	19.0%
Experience of bullying, harassment or abuse from other colleagues (Disabled Staff %)	2018	 23.8%	23.9%	26.4%
Experience of bullying, harassment or abuse from patients / service users / relatives / public (Disabled Staff %)	2018	 36.6%	33.6%	33.8%

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.

WDES Metric 4b: Reporting last incident	Data period	Trust value	Peer median	National median
Last incident of workplace bullying or harassment reported (Disabled Staff %)	2018	 61.5%	49.3%	48.7%

From managers:

- 11.7% of Disabled staff experienced bullying, harassment or abuse from managers than non-disabled staff at 6.5%

From other colleagues:

- 23.8% of disabled staff experienced bullying, harassment or abuse from other colleagues compared with 13% of non-disabled staff

From patients/service users/public:

- 36.6% of disabled staff report bullying, harassment or abuse compared with 28.8% of non-disabled staff. The figure for disabled exceeds the set percentage medians for national and peer Trusts by 3%.

61.5% of Disabled staff reported incidents of harassment, bullying or abuse experienced at work compared with 63.6% of non-Disabled staff. This positive score exceeds the national median by 12.8% and indicates a smaller disparity in reporting incidents between Disabled and non-Disabled staff.

4.5 Metric 5 – Career progression and promotion

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

WDES Metric 5: Equal Opportunities	Data period	Trust value	Peer median	National median
Belief that organisation provides equal opportunities for career progression (Disabled Staff %)	2018	 77.8%	82.1%	78.5%
Belief that organisation provides equal opportunities for career progression (Disabled & Non-disabled Staff % Point Difference)	2018	-9.9	-5.9	-7.0

9.9% more non-Disabled staff than Disabled staff responding to the NHS staff survey believe that the Trust offers them equality of opportunity for career progression (77.8% Disabled staff and 87.7% Non-Disabled staff).

4.5 Metric 6 – Presenteeism

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.

WDES Metric 6: 'Presenteeism'	Data period	Trust value	Peer median	National median
Felt pressure from manager to come to work, despite not feeling well enough (Disabled Staff %)	2018	 17.4%	30.6%	31.2%
Felt pressure from manager to come to work, despite not feeling well enough (Disabled & Non-disabled Staff % Point Difference)	2018	3.2	10.1	10.0

17.4% of Disabled staff reported feeling pressure to attend work when unwell. This is compared with 14.2% of non-Disabled staff and highlights a 3.2% difference.

4.6 Metric 7 – Job Satisfaction

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

WDES Metric 7: Valued	Data period	Trust value	Peer median	National median
Satisfied with the extent to which organisation values their work (Disabled Staff %)	2018	 38.5%	36.7%	37.8%
Satisfied with the extent to which organisation values their work (Disabled & Non-disabled Staff % Point Difference)	2018	-14.6	-11.0	-11.0

38.5% of Disabled staff and 53.1% of non-Disabled staff reported that they were satisfied with the extent to which the Trust valued their work. This is a difference of 14.6%.

4.7 Metric 8 – Reasonable adjustments

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

WDES Metric 8: Adequate Adjustments	Data period	Trust value	Peer median	National median
Employer made adequate adjustment(s) to enable employee to carry out work (Disabled Staff %)	2018	 77.3%	75.7%	74.0%

77.3% of Disabled staff replying to the NHS Staff Survey felt the Trust had made reasonable adjustments which enabled staff to undertake their work.

4.7 Metric 9 – Disabled staff engagement

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

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

WDES Metric 9: Staff Engagement	Data period	Trust value	Peer median	National median
Staff engagement (Disabled Staff)	2018	 6.7	6.6	6.6
Staff engagement (Disabled & Non-disabled Staff Difference)	2018	-0.5	-0.5	-0.5

The staff engagement score taken from the 2018 NHS staff survey indicates a differentiation between Disabled and non-Disabled in terms of levels of engagement by a score of 0.5.

5. Progress and Governance

During 2019, LYPFT staff were requested by the Trust's Diversity & Inclusion team to complete a confidential online survey which sought the views and experiences of disability equality in the Trust. 73% of respondents expressed interest in participating in a Trust workforce disability equality network as a key mechanism to enable sharing experiences, feedback, promoting good practice, providing equal opportunities to career development and progression and as peer support.

As a result, DaWN (Disability and Wellbeing Network), the Trust's disability equality network has held two meetings since the online survey responses (March 2019) and is continuing to shape its aims and priorities on workforce equality for staff with disabilities or long term health conditions. Network membership inclusively encourages the involvement of non-Disabled staff to share learning and good practice.

Priority areas for DaWN will be underpinned by the WDES indicators and will include further exploration of staff experiences to inform organisational learning and development. Key areas of good practice relating to conscious and unconscious bias will be embedded in development programmes and management skills training. Furthermore, further work will be undertaken to increase awareness of disability equality and DaWN through corporate welcome days, staff wellbeing initiatives and through dedicated senior leader involvement in culture change programmes.

A workshop with senior leaders and Board members of the Trust was undertaken on 11th September 2019, to discuss the WDES results. The session was facilitated by a manager from the NHS

England/NHS Improvement WDES team to support the identification of development areas and to collectively define and agree leadership actions to drive the disability equality agenda. The outputs and actions from the workshop were then discussed and agreed at the Trust Board meeting held on 26th September 2019.

Priority actions have been identified and a detailed action plan has been developed. The three key priority action areas to address as part of the WDES action plan are;

1. Improvement to declaration of disability status and confidence in declaring a disability.
2. Culture and behaviours in response to NHS Staff Survey results around poor experience of conduct and discrimination
3. Representation, Career progression and Belief in Fair, Equal Opportunities

Progress will be reviewed and reported twice yearly through the Trust's governance structures through the Equality and Inclusion Group, Workforce Committee and the Board.