

Meeting Title:	People & Culture Committee
Date of Meeting:	October 2021
Document Title:	Workforce Disability Equality Standard 2021
Responsible Director:	Dawn Harvey, Chief People Officer
Author:	Julie Barber, Head of Organisational Development

Confidentiality:	No – publicly published
Publishable under FOI?	Yes

Prior Discussion		
Job Title or Meeting Title	Date	Recommendations/Comments

Purpose of the Paper	This report sets out our 2020/21 data and action plan against the Workforce Disability Equality Standard (WDES) metrics							
	<i>Note</i> (✓)	✓	<i>Discuss</i> (✓)	✓	<i>Recommend</i> (✓)		<i>Approve</i> (✓)	✓
Summary of Key Issues	<p>The WDES is the national framework through which Trusts measure their performance against ten key metrics. These comprise workforce metrics (1-3), Staff Survey metrics (4-9) and a metric based on Board representation (10).</p> <p>Overall, the organisation has improved or remained consistent in five metrics and decreased in four, and mixed results for Metric 4 (4a (i) – positive, 4a (ii) & (iii) and 4b – negative). Data is shown at Annex A.</p> <p>The rolling WDES action plan has been replaced with our Equalities Plan & Priorities, a comprehensive suite of staff development activities and plans aimed at developing inclusive behaviours and practices across the organisation. This is shown at Annex B.</p>							
Action recommended	<p>The Board Meeting is recommended to:</p> <ol style="list-style-type: none"> NOTE the Workforce Disability Equality Standard data and action plan, and next steps. DISCUSS the contents and implications APPROVE the document to be published on 31/10/21 							

Governance and Compliance Obligations

Legal / Regulatory	Y	<p>The general equality duty is set out in section 149 of the Equality Act 2010. Public organisations including NHS Trusts are subject to the general duty and must have due regard to the need to: eliminate unlawful: discrimination, harassment and victimisation.</p> <p>The public sector Equality Duty (PSED) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity and foster good relations between different people when</p>
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		carrying out their activities. Each Trust's WDES data and Action Plan are published on their website annually as a requirement of the standard NHS Contract.
Financial	N	
Impacts Strategic Objectives?	Y	People, Place, Partnership – The new Trust strategy signals our intention to truly value our staff. Our people are our most important asset, and we want them to feel valued, welcomed, respected, they belong and matter. We recognise the link between high levels of staff satisfaction and improving patient experience and outcomes
Risk?	Y	Non-compliance with the WDES would create risks for the organisation in terms of reputation, but more importantly, in terms of the wellbeing of the overall workforce.
Decision to be made?	Y	Approve publication of WDES 2021
Impacts CQC Standards?	Y	Development of fair and inclusive leadership, practice and culture contributes to the 'Well Led' CQC Domain. Inclusive workplaces report better staff health and wellbeing, which is linked to markedly higher patient satisfaction and better patient outcomes, meaning that there is potential for progress in EDI work to positively contribute to all CQC Domains
Impacts Social Value ambitions?	Y	Championing Equality, Diversity and Inclusion is a key ambition of the Trust's Social Value pledge.
Equality Impact Assessment?	N	
Quality Impact Assessment?	N	

Introduction

This paper provides an overview of our annual performance against the Workforce Disability Equality Standard (WDES) metrics for 2020-21. The data will be published on our public website, along with our action plan, in line with regulatory requirements.

The WDES is mandated by the NHS Standard Contract and applies to all NHS Trusts and Foundation Trusts. This supports closer scrutiny of the progress we make and outcomes we achieve. Non-compliance with the WDES would create risks for the organisation in terms of reputation, but more importantly, in terms of the wellbeing of the overall workforce. In the spirit of transparency and continuous improvement, national health organisations adopted the WDES in autumn 2020.

The WDES is a data-based standard and uses a series of ten measures (metrics) to improve the experiences of Disabled staff in the NHS. All the metrics draw from existing data sources (recruitment dataset, staff records, NHS Staff Survey, local HR data) with the exception of one; metric 9b asks for narrative evidence of actions taken, to be written into the Trust's WDES annual report.

The ten key metrics comprise workforce metrics (1-3), Staff Survey metrics (4-9) and a metric based on Board representation (10).

The 2020-21 WDES data for Dorset County Hospital is based on staff who have a disability recorded on the Trust's Electronic Staff Records and we currently have data indicating 3.35% of our workforce have a disability.

Overview of changes since 2019/20 data

Developing an inclusive culture at DCH is a key organisation priority. During the last 12 months the programme of work supporting this has gained momentum. The first stage of shifting culture is to disrupt the existing culture and this has involved raising awareness of inequalities across the organisation and encouraging staff to speak out about experiences. It is helpful to consider interpretation of DCH WDES data in this context.

Overall, the organisation has improved or remained consistent in five metrics and decreased in four, and mixed results for Metric 4 (4a (i) – positive, 4a (ii) & (iii) and 4b – negative). The data is attached at **Annex A** and the WDES Action Plan (Equalities Plan and Priorities) is shown at **Annex B**.

Metrics where we have seen positive changes or data has remained consistent

Metric 1: *Percentage of staff in each of the AfC Bands 1-9 or Medical & Dental subgroups and VSM (including Executive Board members) compared with the % of staff in the overall workforce*

The number of staff identifying as having a disability has increased very slightly from 2.9% in 19/20 to 3.35% in 20/21- an increase of 0.45% across the overall workforce.

Due to the low percentage of staff recorded with a disability on ESR (3.35%), it was not possible to draw any conclusions from the data. This low percentage also presented a risk of identifying individuals at particular grades, so the majority of the data for Metric 1 has been presented as overall figures.

We know from our 2020 Staff Survey that 24.3% of respondents stated they have a physical or mental health condition or disability which is expected to last more than 12 months. Our Equalities Plan & Priorities will support increased disclosure over time.

A breakdown of workforce data for 2020-21 is shown at Annex A.

Metric 4a: *Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse*

(i) *From patients/service users, their relatives or other members of the public*

This data shows an improvement for both Disabled and non-disabled staff for the year and a reduction in the disparity to -2%. Whilst the improvement is welcomed, this still represents an unacceptable statistic and remains an area of focus for attention.

Metric 5: *Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression and promotion*

The data shows very little change (-0.1%) and a reduction in disparity. The Trust's Staff Survey results for this metric for Disabled and non-disabled staff remain higher than the national average for Acute Trusts.

A review of appraisal and succession planning processes and procedures, to include career planning and development discussions and skills training for managers, is underway as part of the Appraisal and Succession Planning work stream of our Transforming People Practices Programme. A review of recruitment and selection processes is also underway as part of the Inclusive Recruitment work stream of the same Programme.

Metric 6: *Percentage of Disabled staff compared to non-disabled staff saying they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties*

The data shows a decrease for Disabled staff of 3.4% resulting in 30.8% saying they have felt pressurised to come to work, which is still unacceptably high.

Metric 9: *NHS Staff Survey and the engagement of Disabled Staff*

Part (a): The engagement score for Disabled staff, compared to non-disabled staff

This metric has remained static for both Disabled and non-disabled staff, although we still have a small disparity gap of -0.4% which needs to be reduced further.

Part (b): Has your Trust taken action to facilitate the voices of Disabled staff in your organisation to be heard?

We answered 'yes' to this question, citing that prior to 31/3/21 activity commenced to establish a Staff Network for staff with disabilities and long-term health conditions. The Trust's 'Without Limits' staff network launched in the early part of 21/22.

The new network has already made positive strides towards improving the experience of Disabled Staff. Examples include:

- (a) a systematic review to check hearing loops are working across the Trust, after it found that many were not
- (b) Improving awareness around the Access to Work scheme is underway after issues were raised in the EDI Steering Group
- (c) Improving communication pathways for reasonable adjustments and Access to Work is also underway with a view to clear protocols and information being in place

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

- (a) *By Voting Membership of the Board*
- (b) *By Executive membership of the Board*

Whilst disability data on voting and executive membership was not reported last year so cannot be compared, it can be noted that 26.67% of the Board have not declared their disability status in 20/21, which is an improvement on 31% for 19/20.

Metrics where we have seen negative changes

Metric 2: *Relative likelihood of non-Disabled staff compared to Disabled staff being appointed from shortlisting across all posts*

Our likelihood ratio of 1.10 in 2019/20 has increased to 1.38 in 2020/21 which is disappointing and indicates the continuing need to improve the situation. A review of recruitment and selection processes, procedures and training for recruiting managers is underway as part of the Inclusive Recruitment work stream of our Transforming People Practices Programme.

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.*

Our likelihood ratio of 21.25 in 2019/20 has increased to 23.34 in 2020/21. Although this relative likelihood suggests there may be a problem, as there is only 1 Disabled and 1 non-disabled member of staff in the capability process, this suggests there are no underlying issues.

A review of disciplinary policies and procedures is underway as part of the Inclusive Recruitment work stream of our Transforming People Practices Programme.

Metric 4a: *Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse*

(ii) From Managers

This data shows an increase of 2.4% from last year, with 20.7% of disabled staff saying they had experienced harassment, bullying or abuse from managers. This also resulted in the disparity between Disabled and non-disabled staff widening to -12%. This remains an area of focus for attention and the Trust welcomes the fact that more staff feel able to express their views.

(iii) From other colleagues

This data shows an increase of 6.0% from last year, with 32.1% of disabled staff saying they had experienced harassment, bullying or abuse from other colleagues. This also resulted in the disparity between Disabled and non-disabled staff widening to -13%, which has nearly doubled in two years. This remains an area of focus for attention.

It is worth reminding ourselves that whilst our ESR shows that 3.35% of staff have a disability, metrics 4-9a are taken from our Staff Survey where 24.3% of staff have declared themselves to be Disabled (or to have a long-term condition), so these figures represent a significant number of staff reporting unacceptable behaviour.

Metric 4b: *Percentage of Disabled staff compared to non-disabled staff saying the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it*

44.1% of Disabled staff said that they reported incidents – this is a 2.5% drop from the previous year. Non-disabled staff had increased reporting incidents, resulting in a disparity of +0.8%. All staff will continue to be encouraged to report incidents and a number of priority work programmes (*shown at Annex B*) focus attention on challenging unacceptable behaviour and reporting routes.

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*

Satisfaction has decreased for both Disabled staff and non-disabled staff, and in both cases percentage levels are close to the national average for Acute Trusts. Satisfaction levels are lower for Disabled staff with a disparity of -11.6%, indicating further work is required in this area.

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

This shows a reduction on last year, with the current score of 75.5% being equal to the average across Acute Trusts. A review of staff policies and procedures and improved awareness in this area is included in the Equalities Plan and Priorities shown at Annex B.

Next steps

Achieving inclusion and equity is central to our mission to deliver outstanding care and reduce health inequalities. The data illustrates that Disabled staff are increasingly able to speak out about experiences.

The WDES is a driver for the Trust to improve our disability declaration rates on ESR and our Without Limits staff network provides an additional platform for the voices of Disabled staff to be heard.

The data supports the need to continue building an inclusive culture where everyone is valued and heard and has opportunities for progression. It is important DCH continues with the 18 month programme of work in the Equalities Plan and Priorities agreed by the People and Culture Committee. This is shown at Annex B.

The Equalities Plan and Priorities is regularly reviewed and refined as we measure impact using quantitative and qualitative data as part of the monthly People Dashboard.

The WDES findings will be shared with the Without Limits Staff Network to test if there is anything missing from our Action Plan, to further improve the experience of Disabled staff across the Trust.

All NHS Trusts are required to publish WDES data by 31st October 2021.

Annex A - WDES National Metrics Report

Detailed below is the organisation's WDES data which was submitted in August 2021 covering the period 1 April 2020 – 31 March 2021.

Where data is available, year-on-year comparisons have been made.

Metric 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. (Data source: ESR)

N.B. Due to the low percentage of staff recorded with a disability on ESR (3.35%), it was not possible to draw any conclusions from this. This low percentage also presented a risk of identifying individuals at particular grades, so the majority of the data for Metric 1 has had to be presented as overall figures.

1a - Non-clinical workforce

AfC Bands 1 - VSM	Disabled Staff #	Disabled staff %	Non-disabled staff #	Non-disabled staff %	Unknown #	Unknown %	Total
TOTAL	38	3.3%	899	79.0%	201	17.7%	1138

1b – Clinical workforce

AfC Bands	Disabled Staff #	Disabled staff %	Non-disabled staff #	Non-disabled staff %	Unknown #	Unknown %	Total
Cluster 1 Bands 1-4	32	3.3%	812	84.4%	118	12.3%	962
Cluster 2-4 Bands 5-VSM	52	3.8%	1133	82.7%	264	19.3%	1370
TOTAL	84	3.5%	1945	80.7%	382	15.8%	2411

1c – Medical & Dental Workforce

Consultants Non-consultants career grade Medical & dental trainee grades	Disabled Staff #	Disabled staff %	Non-disabled staff #	Non-disabled staff %	Unknown #	Unknown %	Total
TOTAL	15	2.76%	354	65.07%	175	32.17%	544

1d – Overall Workforce

	Disabled Staff #	Disabled staff %	Non-disabled staff #	Non-disabled staff %	Unknown #	Unknown %	Total
Overall workforce	137	3.35%	3198	78.13%	758	18.52%	4093

This metric indicates an increased percentage (0.45%) in staff with a disability in the overall workforce, from 2.9% in 19/20.

Metric 2: Relative likelihood of non-Disabled staff compared to Disabled staff being appointed from shortlisting across all posts

(Data source: Trust's recruitment & ESR data)

Relative likelihood of non-Disabled staff compared to Disabled staff being appointed from shortlisting	Relative likelihood in 2019-20	Relative likelihood in 2020-21	A figure below 1.00 indicates that Disabled staff are more likely than non-Disabled staff to be appointed from shortlisting
	1.10	1.38	

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.

(Data source: Trust's HR data)

Relative likelihood of Disabled staff compared to non-Disabled staff entering	Relative likelihood in 2019-20	Relative likelihood in 2020-21	A figure above 1.00 indicates that Disabled staff are more likely than non-Disabled staff to enter the formal capability process
	No likelihood figure provided in 19/20 but calculations indicate 21.25	23.34	

Metric 4: Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse

(Data source: Q.13a-d, NHS Staff Survey)

4a: % of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from:	2018			2019			2020		
	Disabled staff	Non-disabled staff	% points difference (+/-)	Disabled staff	Non-disabled staff	% points difference (+/-)	Disabled staff	Non-disabled staff	% points difference (+/-)
(i) Patients/service users, their relatives or other members of the public	26.8	23.3	-3.5	26.9	23.8	-3.1	23.5	21.5	-2.0
(ii) Managers	19.4	8.2	-11.2	18.3	8.1	-10.2	20.7	8.7	-12.0
(iii) Other colleagues	24.0	17.1	-6.9	26.1	17.5	-8.6	32.1	19.1	-13.0
4b: % of Disabled staff compared to non-disabled staff saying the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it	37.0	52.1	-15.1	46.6	39.8	+6.8	44.1	43.3	+0.8

Metric 5: Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression and promotion

(Data source: Q.14, NHS Staff Survey)

2018			2019			2020		
Disabled Staff	Non-disabled staff	Difference (+/-)	Disabled Staff	Non-disabled staff	Difference (+/-)	Disabled Staff	Non-disabled staff	Difference (+/-)
89.1	91.7	-2.6	86.3	92.4	-6.1	86.2	89.0	-2.8

Metric 6: Percentage of Disabled staff compared to non-disabled staff saying they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties

(Data source: Q11e, NHS Staff Survey)

2018			2019			2020		
Disabled Staff	Non-disabled staff	Difference (+/-)	Disabled Staff	Non-disabled staff	Difference (+/-)	Disabled Staff	Non-disabled staff	Difference (+/-)
30.8	21.1	-9.7	34.2	18.0	-16.2	30.8	21.4	-9.4

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

(Data source: Q5f, NHS Staff Survey)

2018			2019			2020		
Disabled Staff	Non-disabled staff	Difference (+/-)	Disabled Staff	Non-disabled staff	Difference (+/-)	Disabled Staff	Non-disabled staff	Difference (+/-)
33.6	49.8	-16.2	40.4	53.0	-12.6	37.8	49.4	-11.6

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

(Data source: Q.26b, NHS Staff Survey – *this question only includes the responses of Disabled staff*)

2018	2019	2020
77.9%	81.2%	75.5%

Metric 9: NHS Staff Survey and the engagement of Disabled Staff

Part (a): The engagement score for Disabled staff, compared to non-disabled staff

2018			2019			2020		
Disabled Staff	Non-disabled staff	Difference (+/-)	Disabled Staff	Non-disabled staff	Difference (+/-)	Disabled Staff	Non-disabled staff	Difference (+/-)
6.7	7.3	-0.6	6.9	7.3	-0.4	6.9	7.3	-0.4

(Data source: NHS Staff Survey)

Part (b): Has your Trust taken action to facilitate the voices of Disabled staff in your organisation to be heard? **Yes.**

We were asked to provide at least one practical example of current action being taken in the last 12 months to engage with Disabled staff:

Prior to 31/3/21 activity commenced to establish a Staff Network for staff with disabilities and long-term health conditions. Network launched in the early part of 21/22.

(Data source: WDES Submission, August 2021)

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

(Data source: WDES Submission, August 2021)

Snapshot as at 31/3/21	Disabled %	Non-disabled %	Disability unknown %
Total Board members	0.00	73.33	26.67
By Voting Membership of the Board	0.00	71.43	28.57
By Non-Voting Membership of the Board	0.00	100.00	0.00
By Executive Membership of the Board	0.00	83.33	16.67
By Non-Executive Membership of the Board	0.00	66.67	33.33
Difference (Total Board – Overall Workforce)	-3%	-5%	8%
Difference (Voting membership – Overall Workforce)	-3%	-7%	10%
Difference (Executive membership – Overall workforce)	-3%	5%	-2%

Whilst disability data on voting and executive membership was not reported last year so cannot be compared, it can be noted that 26.67% of the Board have not declared their disability status in 20/21, which is an improvement on 31% for 19/20.

Annex B – WDES Action Plan (Equalities Plan and Priorities)

Our starting point for getting inclusion right will be to initially focus on staff as this will support getting it right for patients. Throughout 2021-22 we are embarking on a range of staff development activities and programmes aimed at developing inclusive behaviours and practices. Our key work programmes are presented here with high level detail to show the range of interventions and indicative timeframes.

	Programme	Summary	Timescale
1	<p>Dignity & Respect at Work</p> <p><i>This will be a mandatory session for all existing staff & will initially be aimed at Bands 2-6</i></p>	<p>A development session to support all staff understand their personal & role responsibilities for role modelling respectful behaviour and calling out inappropriate behaviour.</p>	<p>Programme commences October 2021</p>
2	<p>Mental Health First Aid</p> <p><i>This will be a mandatory session for all line managers (and be available for other staff as required).</i></p>	<p>A one day course will qualify line managers as an MHFA Champion, giving them an understanding of common mental health issues, knowledge and confidence to advocate for mental health awareness, provide ability to spot signs of mental ill health and develop skills to support mental health wellbeing.</p>	<p>Programme commences January 2022</p>
3	<p>Bystander to Upstander</p> <p><i>Linked to Dignity & Respect Programme</i></p>	<p>A poster/communications campaign backed by skill sessions suitable for all staff to help challenge inappropriate behaviour through speaking up and reporting routes.</p>	<p>Programme commences October 2021</p>
4	<p>Inclusive Leadership Programme for Middle Managers</p> <p><i>This will be a mandatory session for all line managers at B7+ initially, with a tailored rollout to staff Bands 1-6 in due course.</i></p>	<p>A programme of workshops, self-directed learning and group activities for leaders with line management responsibility to develop confidence and understanding of the importance of creating inclusive, compassionate teams to address inequalities, improve team performance and organisational effectiveness.</p>	<p>Programme commences June 2021</p>
5	<p>Staff Development Programmes for staff from minority communities.</p>	<p>Participation in the programmes is intended to accelerate career progression and support applicants to contribute to removing inequity by becoming knowledgeable and skilled agents of change. The programmes will support ethnically diverse staff to release their</p>	<p>Programme* commences September 2021</p> <p><i>*Beyond Difference, Dorset ICS Programme</i></p>

		leadership capabilities.	
6	Reciprocal Mentoring for Inclusion	A Change Programme that uses Reciprocal Mentoring as a tool for supporting greater systemic change that actively reduces inequity.	Programme start date to be reviewed in September 2021.
7	Transforming People Practices – 3 workstreams: 1. Just & Learning Culture 2. Appraisal & Succession Planning 3. Inclusive Recruitment	Workshops aimed at developing new policies and frameworks to ensure all staff processes and procedures are inclusive, fair and equitable. We will review and update how we recruit, develop, appraise, performance manage and promote staff to build a fair and inclusive culture.	Programme commences March 2021
8	Staff Networks	The Trust currently has 3 staff networks: Diversity Network (for staff from minority ethnic communities) Pride Network (for our LGBTQ+ community) Without Limits Network (for Staff with Disabilities/Long Term Health conditions and Carers) Staff Networks for other under-represented groups are being planned and encouraged, including an Overseas Staff Network	Ongoing – latest two staff networks launched in April and May 2021
9	Management Toolkit	A range of resources and development sessions to support line managers with effective and inclusive management practices.	Programme commences May 2021

Measures of Success

We will evaluate our progress on EDI, ensuring it is measured against realistic and achievable targets which in turn will help us to learn, develop and improve over time. Cross-referencing our strategy to data and documents will ensure all areas are progressed and measurable. A dashboard of inclusion metrics will be created for on going monitoring of progress.

Evidence of success will look, sound and feel like (& our measurement tools):

- Board members and leaders at all levels will routinely demonstrate their commitment to equality, diversity and inclusion

- Board and Committee papers will identify equality-related impacts and how they are mitigated and managed
- When at work staff are free from abuse, harassment, bullying and physical violence from any source (*SOS, Quarterly staff survey, ER data, WRES & WDES*)
- Staff believe the Trust provides equal opportunities for career progression and promotion (*shortlist to hire data*)
- Staff recommend the Trust as a place to work and receive treatment (*SOS, Quarterly staff survey*)
- Greater diversity in our senior management and leadership structures (*workforce demographic by band, improvements at 8a and above via a goal-oriented trajectory of progress*)
- People report positive experiences of Trust services (*FFT*)