

Workforce Disability Equality Standard Report 2022

Executive Summary

- 1 The NHS Workforce Disability Equality Standard (WDES) is designed to improve workplace experience and career opportunities for Disabled people working, or those seeking employment, in the National Health Service (NHS). The WDES follows the NHS Workforce Race Equality Standard (WRES) as a tool and an enabler of change. The WDES is a series of evidence-based metrics that provide NHS organisations with a snapshot of the experiences of their Disabled staff in key areas. By providing comparative data between Disabled and non-disabled staff, this information can be used to understand where key differences lie; and will provide the basis for the development of action plans, enabling the Trust to track progress on a year by year basis. The WDES is based on ten evidence-based Metrics.
- 2 The data in this report refers to figures and staff experience from 2021/22.
- 3 The WRES action plan and EIA are attached at appendix 1

Background and Analysis

4 On the 31st March 2022 there were 1511 staff members employed within The Walton Centre. Of those, the proportion of staff recorded as Disabled on the Electronic Staff Records system (ESR) was 57 (3.77%) this compares with the 2020/21 figure of 46 (3.1%) measured against the then total staff of 1497. This shows that the number of Disabled staff at the Trust has increased by 11 while the total number of staff has risen by 10 in this reporting period. The data for each metric is below:

Metric1

The percentage of staff in AfC pay bands or medical and dental subgroups and very senior managers (including Executive Board members) compared with the percentage of staff in the overall workforce as at 31 March 2022.

Disability Unknown refers to those staff who have indicated that they prefer not to say, as well as those who have not responded to the disability monitoring question in ESR.

The Walton Centre Workforce as at 31 March 2022:

Total staff 1511

Clinical and Non-Clinical Staff

Disabled staff 57 (3.77%)

Non-disabled staff 1207 (79.9%)

Unknown 247 (16.35%).

Medical and Dental staff

(0%) of trainee grades, (0%) of non-consultant's career grade and (1.8%) of consultants had declared a disability.

An indication of the where Disabled staff are in the Trust in relation to NHS pay grades:

- Of the 393 non-clinical staff, there are 23 Disabled staff, 1 of these staff are at NHS pay band 7+.
- Of the 969 Clinical staff, there are 32 Disabled staff, 9 of these are at NHS pay band 7+.
- Of the 149 Medical staff, there are 2 Disabled staff, both of whom are Consultant grade.

The Trusts reported figures are the best data we have, but they are unlikely to accurately reflect the true numbers of Disabled staff, because we know from our conversations with staff on this subject that Disabled staff are often reluctant to share this information due to the general stigma in society around disability, and responses to the staff survey are often much higher than the declared numbers of Disabled staff at the Trust.

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

For the 2021/22 reporting period the number of Disabled candidates shortlisted was 19, the number appointed was 10. The likelihood of shortlisted disabled candidates being appointed was 0.53.

The number of non-disabled candidates shortlisted was 379 the number appointed was 124. The likelihood of shortlisted Non-disabled candidates being appointed was 0.33.

The data shows that there was an insignificant difference in the percentage of Disabled and non-disabled staff being appointed from shortlisting.

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.

Average number of disabled staff entering the formal capability process was 1.5 compared to 0.5 for non- disabled staff

It is not possible to form firm conclusions from this figure other than to observe that, with only 57 staff recorded as Disabled it is not surprising to have low figures for the number of disciplinaries involving those few Disabled staff. To have greater confidence in this metric the Trust will take steps to increase the numbers of staff recorded as Disabled on ESR.

Metric 4 to 9A

Staff Survey results

Percentage of staff experiencing harassment, bullying or abuse from patients / service users, relatives or the public in last 12 months

This indicator has deteriorated this year for staff with and without a long-term illness.

This indicator has seen an increase for staff with a long-term illness from 27.7% in 2020 to 30.6% in 2021 an increase of 2.9%.

This indicator has seen an increase for staff without a long-term illness from 21.6% in 2020 to 23.1% in 2021 an increase of 1.5%

Percentage of staff experiencing harassment, bullying or abuse from managers in last 12 months

This indicator has improved this year for staff with and without a long-term illness.

This indicator has seen a decrease for staff with a long-term illness from 11.9% in 2020 to 10.4% in 2021 a decrease of 1.5%.

This indicator has seen an increase for staff without a long-term illness from 8.5% in 2020 to 7.3% in 2021 a decrease of 1.2%

Percentage of staff experiencing harassment, bullying or abuse from other colleagues in last 12 months

This indicator has deteriorated this year for staff with and without a long-term illness.

This indicator has seen an increase for staff with a long-term illness from 20.2% in 2020 to 23.7% in 2021 an increase of 3.5%.

This indicator has seen an increase for staff without a long-term illness from 14.5% in 2020 to 16.2% in 2021 an increase of 1.7%

Percentage of staff saying that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it

This indicator has deteriorated this year for staff with a long-term illness and improved for staff without a long-term illness.

This indicator has seen a decrease for staff with a long-term illness from 56.4% in 2020 to 54% in 2021 a decrease of 2.4%.

This indicator has seen an increase for staff without a long-term illness from 53.3% in 2020 to 58.9% in 2021 an increase of 5.6%

Percentage of staff who believe that their organisation provides equal opportunities for career progression or promotion

This indicator has deteriorated this year for staff with and without a long-term illness.

This indicator has seen a decrease for staff with a long-term illness from 50% in 2020 to 47.8% in 2021 a decrease of 2.2%.

This indicator has seen a decrease for staff without a long-term illness from 65.7% in 2020 to 63.3% in 2021 an increase of 2.4%

Percentage of staff who have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties

This indicator has improved this year for staff with and without a long-term illness.

This indicator has seen a decrease for staff with a long-term illness from 40% in 2020 to 29.8% in 2021 a decrease of 10.2%.

This indicator has seen an increase for staff without a long-term illness from 21.3% in 2020 to 20.4% in 2021 a decrease of 0.9%

Percentage of staff satisfied with the extent to which their organisation values their work

This indicator has deteriorated this year for staff with a long-term illness and improved for staff without a long-term illness.

This indicator has seen a decrease for staff with a long-term illness from 45.5% in 2020 to 43% in 2021 a decrease of 2.5%.

This indicator has seen a decrease for staff without a long-term illness from 59.3% in 2020 to 48.9% in 2021 a decrease of 10.4%

Percentage of staff with a long lasting health condition or illness saying their employer has made adequate adjustment(s) to enable them to carry out their work

This indicator has deteriorated this year

This indicator has seen a decrease for staff with a long-term illness from 70% in 2020 to 67.2% in 2021 a decrease of 2.8%.

The national average also decreased from 77% to 71.4% a decrease of 5.6%.

Staff engagement score (0-10)

This indicator has deteriorated this year for staff with a long-term illness and improved for staff without a long-term illness.

This indicator has seen a decrease for staff with a long-term illness from 7.2 in 2020 to 6.8 in 2021 a difference of 0.4

This indicator has seen a decrease for staff without a long-term illness from 7.7 in 2020 to 7.5 in 2021 a difference of 0.2

The Trust average decreased from 7.6 in 2020 to 7.3 in 2021 a difference of 0.3

Metric 9b Has your organisation taken action to facilitate the voices of Disabled staff to be heard?

The Trust has taken action to facilitate the voices of Disabled staff. The Trust has set up a Staff disability Equality Group to lead this action.

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

- **By voting membership of the Board**
- **By executive membership of the Board**

There is 1 Trust Board member recorded as Disabled. This is the same as last year.

Conclusion

5 This report indicates the need for the Trust to refocus its efforts in terms of disability equality and in particular on renewing and strengthening our dialogue with Disabled staff at the Trust. The Trust remains close to the rather low national average for the overall NHS declaration rates for Disabled staff in NHS trusts, however, despite some encouraging figures, this report shows the Trust has not made significant improvements to disability inequalities in the year to 31st March 2022 and some indicators show decreased results on the previous year. Disability equality performance trajectories are rather flat year on year. The Walton Centre is definitely not an outlier in this respect, but the Trust's commitment to disability equality is not yet being fully reflected in terms of the current data and outcomes for disabled staff.

Recommendation

6 The Trust Board is requested to note the content of the report and to support the continuation of the delivery of the action plan.

Author: Jane Mullin

Date: 11/08/22

Appendix 1 – Draft WDES Action Plan

To understand barriers disabled staff feel they face when applying for senior positions	Via disability network to survey staff for feedback	ED&I Lead
	Review recruitment process	ED&I Lead
	Discuss recruitment data related to disability at People Group	Deputy CPO
	Network with external Disability organisations to help to change the culture within the organisation to break down stigma about what it means to have a Disability at work	Deputy CPO
To increase the recording of disabled people at all levels of the workforce	Work with ESR Lead to look at innovative ways of capturing this information	Workforce analyst
	Remind managers and staff that being off work in relation to a disability is not to be viewed and dealt with in the same way as standard sick leave.	Deputy CPO
	To develop volunteer staff disability support advisors	ED&I Lead
Work towards level 3 disability confident leader	WDES Disability Equality Working Group will consider the possibility of introducing a Disability Reciprocal Mentoring Scheme to help Senior Leaders within the Trust to better understand the barriers Disabled staff perceive in their way regarding progressing their career and to help disabled staff to network within the organisation and learn more about the possibilities for advancement.	ED&I Lead
	Provide guidance on reasonable adjustments at induction and at regular intervals through Trust communications	Deputy CPO
	Work with disabled staff to facilitate the hearing of a powerful disabled staff voice	ED&I Lead
	Work with staff to Celebrate Disability History Month raise awareness and foster a conversation about what it means to be Disabled.	ED&I Lead
Increase diversity at Board level	The Board should consider taking further positive actions to increase its disability make up when recruiting new Board members e.g. by advertising future Board recruitment opportunities at organisations that support Disabled people	CPO/ Corporate Secretary

Equality Impact Assessment (EIA) Form

This section must be completed at the development stage i.e. before ratification or approval. For further support please refer to the EIA Guidance on the Equality and Diversity section of the Intranet.

Par

1. Person(s) Responsible for Assessment: Jane Mullin
2. Contact Number: **0151 556 3396**
3. Department(s): **HR**
4. Date of Assessment: **11.08.22**
5. Name of the policy/procedure being assessed: **WDES Findings 2022**
6. Is the policy new or existing?
 New Existing
7. Who will be affected by the policy (*please tick all that apply*)? Staff
 Staff Patients Visitors Public
8. How will these groups/key stakeholders be consulted with? N/A This document is the result of a consultation process.
9. What is the main purpose of the policy? **This document sets out the findings of the Walton Centre Workforce Disability Equality Standards monitoring for 2019.**
10. What are the benefits of the policy and how will these be measured? **Improving disability equality and reducing discrimination in Trust processes and staff, patient and visitor behaviour. This will be measured through feedback, including but not limited to complaints, grievances and concerns raised.**
11. Is the policy associated with any other policies, procedures, guidelines, projects or services? **Yes, The Equality, Diversity and Inclusion 5 Year Vision.**
12. What is the potential for discrimination or disproportionate treatment of any of the protected characteristics? **None, these findings are intended to promote and support disability equality for all staff.**

Protected Characteristic	Positive Impact (benefit)	Negative (disadvantage or potential disadvantage)	No Impact	Reasons to support your decision and evidence sought	Mitigation / adjustments already put in place
Age	✓			Defines disability within the context of the Equality Act and discusses promotion of disability equality relating to all other protected characteristics.	
Sex	✓			Defines disability within the context of the Equality Act and discusses promotion of disability equality relating to all other protected characteristics.	
Race	✓			Defines disability within the context of the Equality Act and discusses promotion of disability equality relating to all other protected characteristics.	
Religion or Belief	✓			Defines disability within the context of the Equality Act and discusses promotion of disability equality relating to all other protected characteristics.	
Disability	✓			Defines disability within the context of the Equality Act and discusses promotion of disability equality relating to all other protected characteristics.	
Sexual Orientation	✓			Defines disability within the context of the Equality Act and discusses promotion of disability equality relating to all other protected characteristics.	
Pregnancy / maternity	✓			Defines disability within the context of the Equality Act and discusses promotion of disability equality relating to all other protected characteristics.	
Gender Reassignment	✓			Defines disability within the context of the Equality Act and discusses promotion of disability equality relating to all other protected characteristics.	
Marriage & Civil Partnership	✓			Defines disability within the context of the Equality Act and discusses promotion of disability equality relating to all other protected characteristics.	

Other	✓		Defines disability within the context of the Equality Act and discusses promotion of disability equality relating to all other protected characteristics.
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If you have identified no negative impact for all please explain how you reached that decision and provide reference to any evidence (e.g. reviews undertaken, surveys, feedback, patient data etc.) **The purpose of this report is to set out how disability equality as defined within the context of the Equality Act will be promoted throughout the Trust and therefore there is likely to be a positive impact on other protected characteristic, as according to this definition anybody can become. Disabled.**

13. Does the policy raise any issues in relation to Human Rights as set out in the Human Rights Act 1998? **This report supports a Human Rights based approach to supporting staff with disabilities.**

If you have identified negative impact for any of the above characteristics, and have not been able to identify any mitigation, you MUST complete Part 2, please see the full EIA document on the Equality and Diversity section of the Intranet and speak to Hannah Hall, HR Manager or Clare Duckworth, Matron for further support.

Action	Lead	Timescales	Review Date
N/A	N/A	N/A	N/A

Declaration

I am satisfied this document/activity has been satisfactorily equality impact assessed and the outcome is:

No major change needed – EIA has not identified any potential for discrimination/adverse impact, or where it has this can be mitigated & all opportunities to promote equality have been taken

Adjust the policy – EIA has identified a need amend the policy in order to remove barriers or to better promote equality
You must ensure the policy has been amended before it can be ratified.

Adverse impact but continue with policy – EIA has identified an adverse impact but it is felt the policy cannot be amended.
You must complete Part 2 of the EIA before this policy can be ratified.

Stop and remove the policy – EIA has shown actual or potential unlawful discrimination and the policy has been removed

Name: Jane Mullin

Date: 11.08.22

Signed: Jane Mullin

