

NHS Workforce Disability Equality Standard (WDES)

Annual Report 2021

Torbay and South Devon NHS Foundation Trust

1.0 Executive summary

- We are an Integrated Care Organisation (ICO) and are over 6,500 people strong. We are responsible for the delivery of acute, community health and social care services. We are culturally innovative, and have a clear ambition to improve outcomes for everyone in our population, Building a Brighter Future.
- Our People Promise describes how Torbay and South Devon will feel as a great place to work, and Our People Plan describes how we will create the conditions for people to thrive, and deliver exceptional integrated health and care, whatever essential role we play. Our People Promise and Plan have been shaped by our people, as well as our colleagues across the whole NHS. Importantly, we are committed to understand and build on what works well and to address the issues that get in the way.
- COVID19 has had a significant affect for all those who are vulnerable and specifically those with a Protected Characteristic. Each community has been affected and none more so than our staff, specifically those with a disability or long-term condition.
- Actions implemented by ICSD should drive and align to the high-level strategies of the NHS People Plan 2020/21, the NHS Long Term Plan and the NHS Equality Objectives. And with our local WRES action plans.
- We are very proud to have launched a number of Networks in driving forward equality, diversity and inclusion initiatives organisation wide. Furthermore, celebrating the best of every person individuality.
- The Equality Business Forum EBF together with the Networks will also have an important role in overseeing progress of the WDES action plan and strengthening collaboration between the Board and staff who may have a disability or Long-Term Condition across the organisation.
- The WDES will be a standard item on the EBF and Network monthly meetings and network members will continually seek updates on its progress.
- Finally, TSDFT takes the view that an action plan is an organic tool to be adapted as concerns are raised. This means our actions moving forward will be adaptable and personalized for our future states.
- The Trust also has Equality, Diversity and Inclusion (EDI) Leads who will have a key role in working with the networks, to support and guide the organisation and its stakeholders in improving staff and service user experience.

2.0 Introduction

Welcome to our WDES Annual Report 2021 which includes a data report for 2020/21 and an action plan for 2021/22.

2.1 National picture - understanding disability in the workplace

- **93%** of disabled people don't use a wheelchair
- **53.6%** of working age disabled people are in employment compared to **81.7%** of working age non-disabled people
- **83%** of disabled people acquire their health condition during working age
- **Disabled People from BME** backgrounds report great social inequalities compared to disabled people from white backgrounds

Understanding Disability – November 2020 (NHS Employers Disability Resource Library)

2.2 What is a disability?

- A condition that affects an individual's ability to carry out normal day to day activities
- A mental health or physical condition
- Disabilities can be visible or hidden
- Can last for 12 months or longer and be recurring

2.3 Long-term conditions which are classed as a disability

- Heart disease
- Musculoskeletal conditions (including spinal-cord, arms, legs and joints)
- Lung or respiratory conditions
- Stroke
- Mental health conditions (depression, anxiety and bipolar)
- Diabetes
- Learning difficulties and neuro-diverse conditions (e.g. autism, dyslexia, dyspraxia)

- Visual, auditory and speech impairments
- Cancer (including those with and who have survived cancer)
- HIV
- Multiple sclerosis

2.4 Covid Survey Results – National WDES Team

There is considerable evidence from a post covid survey carried out by the National WDES team that 65% of NHS staff who have a disability or Long-Term condition who were surveyed shared that during Covid their employer had offered them appropriate support whilst shielding. 69% had also had risk assessments carried out. This has a significant impact on staff well-being, patient outcomes and on the efficient and effective running of the NHS. However, 54% of those surveyed felt that senior leaders were not visible in demonstrating their commitment to workplace disability equality in the wave 1 period.

2.5 The Workforce Disability Equality Standard (WDES)

The WDES was introduced in 2019 and comprises of a set of ten metrics. This enables the Trust to compare the workplace and career experiences of Disabled and non-disabled staff. Trusts are then required to develop and publish an action plan.

The 2020 WDES Annual Report is still awaiting publication and is expected shortly.

The WDES data enables the Trust to better understand the experiences of our Disabled staff and supports positive change for all existing employees by Creating a more inclusive environment which evidence has shown that a Motivated, included and valued workforce helps to deliver high quality patient care, increased patient satisfaction and improved patient safety.

Overall, there are ten indicators that make up the NHS WDES These comprise:

Metrics 1, 2 and 3 are Workforce related

Metrics 4,5,7 and 7 are taken from the Staff Survey

Metrics 8 taken from the staff survey but only includes staff with a disability

Metrics 9 taken from staff survey but relates to engagement

Metric 10 relates to Board Representation.

All of the metrics draw from existing data sources (recruitment dataset, staff records, NHS staff survey) with the exception of 9b which asks for narrative evidence of actions taken, which will be highlighted in this report.

The metrics have been developed to capture information relating to the workplace and career experiences of disabled staff. The WDES 2020 report continues to show that disabled staff have poorer experiences in areas such as bullying and harassment, feel less valued for their contribution and feel more pressure to attend work when feeling unwell.

The WDES supports our compliance with the Public Sector Equality Duty, as part of the Equality Act 2010.² It reinforces the improvements set out in the NHS Long Term Plan and is integral to the NHS People Promise within the NHS People Plan 2020/21, a promise we must all make to each other – to work together and improve the experience of working in the NHS for everyone.³

The Workforce Disability Equality Standard (WDES) and the Workforce Race Equality Standard (WRES) are both vital to ensuring that the values of equality, diversity and inclusion lay at the heart of the NHS

2.6 Our Values



Whether you're a patient, a visitor or a member of staff, our Vision sets out what you can expect from us – 'Working with you for you'

Our values describe and define our culture. In everything we do, we aim:

- Treat everyone with 'Respect and Dignity'.
- Treat everyone with 'Respect and Dignity'
- Commit to the quality of care we provide
- Treat our service users and colleagues with 'Compassion'
- Work collaboratively to 'Improve lives'
- Work together for people
- Ensure that everyone is counted and most importantly that they feel counted

2.7 Our Commitment

It is clear from our WDES data analysis that we need to improve the experience for our colleagues who have a disability or a Long-Term condition and continue to focus on how best we can assist them to remain well, and feel valued. This also includes encouraging staff to share their demographic data, to ensure that as an organisation we have the most up to date information to enable us to support all our staff as a priority.

We are committed to delivering our robust WDES action plan as part of the Equality, Diversity and Inclusion strategy; a golden thread which runs through our newly developing and exciting 'People plan' and 'Pathway to excellence' programme.

We all need to treat each other with kindness, civility and compassion and we know that improving the experience of all our colleagues will lead to better care for our patients.

We have introduced a number of Staff Networks during 2020/21, a catalyst to empower, encourage, and promote equitable opportunities for staff from across our organisation. It is a safe and supportive space for colleagues to come together, share their experiences and feedback on a wide range of actions and decisions.

Our Disability Enablement Focus Forum (DEFF) was developed in 2018. It is important for any network to continually encourage new membership. This will widen the diversity of the group and increase inclusion within the organisation. There are plans to survey staff, encourage new membership and seek an executive sponsor to support the initiative and help develop our progression to Level two of the National initiative the Disability Confident Scheme.

Stake holders across the organisation have been given the opportunity to input to the development of the action plan.

We are very grateful to those who shared their experiences and to everyone who has engaged in our WDES journey. We now look forward to working together throughout 2020/21 to deliver the actions in the plan and improve workplace and career experiences for our colleagues who have a Disability/Long Term Condition across TSDFT

3.0 Conclusions and Next Steps

- The data indicates some improvement in some areas for our colleagues who a disability or long-term condition. Encouraging the use of reasonable adjustments before capability questions are raised.
- We must recognise that some of the actions we take, specifically any culture differences may take a period of time.
- Our data was submitted August 2021 and our action plan has been reviewed and is attached in Appendix 2. Its focus and activities are in line with best practice and other trusts but we have not been seeing the results that we need and it would appear that we may have been trying to do too many things in parallel. Focus for the year ahead will be on key priorities (Refer to Agreed areas of Focus below)
- The WDES will continue, alongside organisational work streams, at system level. This will help drive a culture of inclusion within the organisation and help meet the goals set out in the People Promise and Plan 2021.

3.1 Agreed Areas of Focus

- **Employability.** To address the health inequalities within our local community. Plans to engage with communities suffering health inequalities to improve understanding of what is preventing uptake or access to service, using the insight gained to ensure pathways are tailored to the needs of specific groups.
- **Recruitment** practices to be overhauled so that we are truly Inclusive and Diverse. We attract and retain a diverse workforce. Particularly at board and senior management levels. Also focus on ensuring that our workforce is reflective of our local communities.
- **Reciprocal Mentoring.** We have been selected as an organisation to participate in the Reciprocal Mentoring Inclusion Scheme. This is a systemic leadership development intervention that provides opportunities for individuals from under-represented groups to work as equal partners in progress with senior executive leaders. The scheme is designed to create transformational change and enable a culture of diversity, equality and inclusion, where the power of difference is valued through sharing lived experiences, creating

awareness, insights and action. This directly contributes towards the creation of a more equitable and inclusive organisation where the factors that generate inequity are positively and proactively addressed. This program is a powerful enabler that can change organisational norms and traditional culture, one conversation at a time

- **The Networks** The trust is committed to supporting Networks to become sustainable with increased visibility, membership, wider reach and impact across all protected characteristics. They will play a significant role in driving up the standards to improve our WDES data over the next year through the WDES action plan. Empowering our colleagues to use their voices through the networks, sharing their lived experiences to educate to improve outcomes for colleagues with a disability or long-term condition. Our networks will be prominent in contributing too and informing decision making.
- **Develop career pathways** Focus on development and progression opportunities for a new and existing staff. Recognise and reward talent. Develop **Apprenticeship** career pathways
- **Education** Deliver Management essentials program and Cultural Framework- via I-Manage to include cultural competency to raise awareness and encourage conversation around uncomfortable topics. Celebrate and Valuing the contribution of all our staff. A focus on celebrating cultural festivals and encouraging more proactive campaigns around inclusion.
- Achieving equality and inclusion is central to our success and mission critical to delivering outstanding quality services.

4.0 References

www.england.nhs.uk/about/equality/equality-hub/equality-standard/
www.gov.uk/government/publications/public-sector-quick-start-guide-to-the-public-sector-equality-duty

www.england.nhs.uk/ournhspeople/

www.gov.uk/government/publications/the-nhs-constitution-for-england

NHS Employers Disability Resource Library (November 2020)

Appendix 1

WDES Data 2020

- Increased negative result compared to TSDFT in 2019
- Increased positive result compared to TSDFT in 2019

The Workforce Disability Equality Standard was introduced in 2019 and comprises a set of ten metrics. It enables us to understand the experience of our Disabled staff and supports positive change for all existing employees by creating a more inclusive environment.

Indicator 4 i (Disabled)

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



Indicator 4 iii (Non-disabled)

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



Indicator 6 (Disabled)

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.



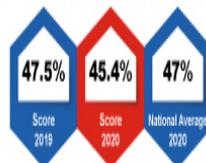
Indicator 4 i (Non-disabled)

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



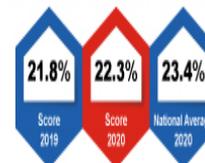
Indicator 4b (Disabled)

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.



Indicator 6 (Non-Disabled)

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.



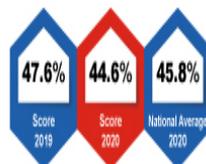
Indicator 4 ii (Disabled)

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



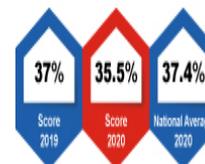
Indicator 4b (Non-disabled)

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.



Indicator 7 (Disabled)

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



Indicator 4 ii (Non-disabled)

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



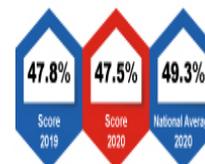
Indicator 5 (Disabled)

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



Indicator 7 (Non-disabled)

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



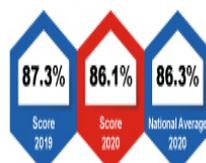
Indicator 4 iii (Disabled)

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



Indicator 5 (Non-disabled)

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



Indicator 8

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



Appendix 2- TSDFT WDES data report

Detailed below is the organisation's WRES data which was submitted August 2021

Indicator 1- Percentage of staff in each of the Agenda for Change (AfC) bands 1 – 9 and very senior managers (VSM) (including executive boardmembers) compared with the percentage of staff in the overall workforce.

1a. Non-clinical workforce

Non-clinical	Disabled staff in 2019/20	Disabled staff in 2020/21	Disabled staff difference	Non-disabled staff in 2019/20	Non-disabled staff in 2020/21	Non-disabled staff difference	Unknown/null staff in 2019/20	Unknown/null staff in 2020/21	Unknown/null staff difference	Total staff headcount
Cluster 1 (Band 1-4)	4.31%	4.62%	0.31%	87.06%	86.07%	-0.99%	8.62%	9.31%	0.68%	1429
Cluster 2 (Band 5-7)	4.73%	5.76%	1.03%	86.76%	86.41%	-0.36%	8.51%	7.83%	-0.68%	434
Cluster 3 (Band 8a-8b)	*	*	0	83.33%	83.51%	0.17%	12.22%	12.37%	0.15%	97
Cluster 4 (Band 8c-VSM)	*	*	*	84.38%	91.11%	6.74%	*	*	0	45

1b- Clinical workforce

Clinical	Disabled staff in 2019/20	Disabled staff in 2020/21	Disabled staff difference	Non-Disabled staff in 2019/20	Non-disabled staff in 2020/21	Non-disabled staff difference	Unknown/null staff in 2019/20	Unknown/null staff in 2020/21	Unknown/null staff difference	Total staff headcount
Cluster 1 (Band 1-4)	2.87%	3.64%	0.77%	89.94%	90.58%	0.64%	7.18%	5.78%	-1.41%	1593
Cluster 2 (Band 5-7)	2.85%	3.19%	0.34%	86.08%	87.92%	1.85%	11.07%	8.88%	-2.19%	2443
Cluster 3 (Band 8a-8b)	*	*	0.13%	82.27%	83.82%	1.55%	14.18%	12.50%	-1.68%	136
Cluster 4 (Band 8c-VSM)	0	0	0	90.63%	94.44%	3.82%	9.38%	5.56%	-3.82%	36
Cluster 5 (M&D Consultants)	*	*	-0.01%	84.23%	84.77%	0.54%	14.52%	13.99%	-0.53%	243
Cluster 6 (M&D Non-Consultants & Career grades)	*	*	-0.10%	89.52%	93.16%	3.64%	9.52%	5.98%	-3.54%	117
Cluster 7 (M&D Trainee grades)	*	*	1.02%	95.38%	96.74%	1.37%	3.78%	1.40%	-2.39%	215

The Trust adheres to the good practice guidance issued for equality monitoring by the Equality and Human Rights Commission (EHRC) in respect to omitting data items of 10 units or less. This is to ensure individuals cannot be identified. Data that represents small numbers of staff are indicated in the report by an asterisk (*).

1c TSDFT vs National data

National WDES indicator data			TSDFT 2019	National 2019	TSDFT 2020	National 2020
1	Percentage of Disabled Staff	Overall			3%	
2	Relative likelihood of non-disabled staff compared to Disabled staff being appointed from shortlisting across all posts. Both internal/external		0.93		1.50	
3	Relative likelihood of Disabled staff entering the formal capability process compared to Non-disabled staff		0.00		0.00	
4(a) (i)	Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months	D	26.8%	33.2%	27.9%	30.9%
		ND	24.2%	26.4%	22.9%	24.5%
(ii)	Percentage of staff experiencing harassment, bullying or abuse from managers in last 12 months	D	18.2%	18.5%	19.4%	19.3%
		ND	7.8%	10.8%	9.5%	10.8%
(iii)	Percentage of staff experiencing harassment, bullying or abuse from colleagues in last 12 months	D	28.6%	27.7%	26.8%	26.9%
		ND	15.4%	17.5%	16.9%	17.8%
4 (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.	D	47.5%	47.0%	45.4%	47.0%
		ND	47.6%	46.1%	44.6%	45.8%
5	Percentage of staff who believe that their organisation Provides equal opportunities for career progression or Promotion.	D	77.1%	79.3%	81.4%	79.6%
		ND	87.3%	86.1%	86.1%	86.3%
6	Percentage of disabled staff compared to non-disabled staff saying that they have felt pressure from their manager to	D	32.0%	32.6%	31.5%	33.0%

	come to work, despite not feeling well enough to perform their duties.	ND	21.8%	21.8%	22.3%	23.4%
7	Percentage of staff disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their Organisation values their work.	D	37.0%	37.9%	35.5%	37.4%
		ND	47.8%	49.9%	47.5%	49.3%
8	Percentage of staff with a long-lasting health condition or illness saying that their employer has made adequate adjustment(s) to enable them to carry out their work.		78.3%	73.4%	80.2%	75.5%
9 (a)	The staff engagement score for Disabled staff, compared to non-disabled staff (score 0-10)	Org. Avg	7.0		7.0	
		D	6.5	6.7	6.7	6.7
		ND	7.2	7.1	7.1	7.1
(b)	Has your Trust taken action to facilitate the voices of disabled staff in your organisation to be heard?	YES	See action Plan for detail			
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	D			-4%	
		ND			12%	

Appendix 3: Indicators 2-10

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

(A figure below '1' would indicate that Disabled staff are more likely than Non-Disabled candidates to be appointed from shortlisting)

(Data source: Trust's recruitment data)

	Relative likelihood in 2020	Relative likelihood in 2021	Relative likelihood difference (+-)
Relative likelihood of staff being appointed from shortlisting across all posts	0.93	1.50	+0.57

Indicator 3 – Relative likelihood of disabled staff entering the formal disciplinary 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

(A figure below '1' would indicate that disabled staff members are more likely than non-disabled staff to enter the formal capability process)

(Data source: Trust's HR data)

	Relative likelihood in 2020	Relative likelihood in	Relative likelihood difference (+-)
Relative likelihood of disabled staff entering the formal disciplinary process compared to Non-Disabled staff.	0.00	0.00	0.00

Indicators 4 – Percentage of staff experiencing harassment, bullying or abuse (Data source: NHS Staff Survey)

	Disabled staff responses to 2019 NHS Staff Survey	Non-Disabled staff responses to 2019 NHS Staff Survey	% points difference (+/-) between Disabled and Non -Disabled staff responses 2019	Disabled staff responses to 2020 NHS Staff Survey	Non-Disabled staff responses to 2020 NHS Staff Survey	% points difference (+/-) between Disabled and Non-Disabled staff responses 2020
(a)(i) – Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months	26.8%	24.2%	+2.6%	27.9%	22.9%	+5.0%
(ii) Percentage of staff experiencing harassment, bullying or abuse from managers in the last 12 months	18.2%	7.8%	+10.4%	19.4%	9.5%	+9.9%
(iii)percentage of staff experiencing harassment, bullying or abuse from other colleagues in last 12 months	28.6%	15.4%	+13.2%	26.8%	16.9%	+9.9%
(b) Percentage of staff saying that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it.	47.5%	47.6%	-0.01%	45.4%	44.6%	+0.02

Indicator 5 – Percentage of staff who believe that their organisation provides equal opportunities for career progression or promotion

	Disabled staff responses to 2019 NHS staff survey	Non-Disabled staff responses to 2019 NHS Staff Survey	% points difference (+/-) between Disabled and Non - Disabled staff responses 2019	Disabled staff responses to 2020 NHS Staff Survey	Non-Disabled staff responses to 2020 NHS Staff Survey	% points difference (+/-) between Disabled and Non-Disabled staff responses 2020
Percentage of staff who believe that their organisation provides equal opportunities for career progression or promotion.	77.1%	87.3%	-10.2%	81.4%	86.1%	-4.7%

Indicator 6 - Percentage of staff who have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties.

	Disabled staff responses to 2019 NHS staff survey	Non-Disabled staff responses to 2019 NHS Staff Survey	% points difference (+/-) between Disabled and Non - Disabled staff responses 2019	Disabled staff responses to 2020 NHS Staff Survey	Non-Disabled staff responses to 2020 NHS Staff Survey	% points difference (+/-) between Disabled and Non-Disabled staff responses 2020
Percentage of staff who have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties	32.0%	21.8%	+10.2%	31.5%	22.3%	+9.2%

Indicator 7- Percentage of staff satisfied with the extent to which their organisation values their work.

	Disabled staff responses to 2019 NHS staff survey	Non-Disabled staff responses to 2019 NHS Staff Survey	% points difference (+/-) between Disabled and Non - Disabled staff responses 2019	Disabled staff responses to 2020 NHS Staff Survey	Non-Disabled staff responses to 2020 NHS Staff Survey	% points difference (+/-) between Disabled and Non-Disabled staff responses 2020
Percentage of staff satisfied with the extent to which their organisation values their work.	37.0%	47.8%	-10.8%	35.5%	47.5%	-12.0%

Indicator 8

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

2019	Average	2020	Average
78.3%	73.4%	80.2%	75.5%

Indicator 9(a) – The Staff engagement score for Disabled staff, compared to non-disabled staff (score 0-10)

Staff engagement Score for Disabled Staff 2019	Staff engagement score for Non-Disabled Staff 2019	points difference (+/-) between Disabled and Non-Disabled staff responses 2019	Staff engagement score for Disabled Staff 2020	Staff engagement score for Non-Disabled Staff 2020	% points difference (+/-) between Disabled and Non-Disabled staff responses 2019
6.5	7.1	-0.6	6.7	7.1	0.4

Indicator 9 (b) - Has your organisation taken steps to ensure that the voice of disabled staff have been heard?

Yes. We have a Staff Network that consists of a group of staff with a lived experience of disability. They have assisted in progressing the reasonable adjustment policy and in mentoring other staff with a disability or long-term condition. The group offers peer support and advice on the Workforce Equality Disability Standards and its objectives for the coming year.

Indicator 10 – Percentage difference between the organisation’s Board voting Membership and its organisations overall workforce, Disaggregated By voting membership of the Board, By Executive membership of the Board

		TSDFT 2019	TSDFT 2020
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	Disabled		-4%
	Non-Disabled		12%

Appendix 4: WDES Action Plan

WDES Metric	Objective	Action	Timescales	Leads	Why
1. % of staff in each Afc Band 1-9 and VSM compared with the % of staff in the overall workforce	<p>Improve our ethnicity data declaration rates to build a more accurate picture of the diversity of our workforce</p> <p>Improve diverse representation across the workforce, at all levels of Agenda for Change and Profession.</p> <p>Deliver in line with TSDFT People Promise and Plan 2021-2024</p>	<ol style="list-style-type: none"> 1. Work with the staff Networks to raise awareness of WDES and encourage staff to feel confident in declaring their equality data on ESR. 2. Review recruitment processes to promote inclusivity and our commitment as a Disability Confident Employer. 	<p>March 2021</p> <p>December 2021</p>	<p>W&OD Lead. EDI Leads. Staff Disability Network Communications</p> <p>Resourcing Lead/EDI Lead</p>	<p>To build a more accurate picture of the diversity of our workforce. Disparity between data on ESR and on NSS. Encourage staff to seek support if needed. To celebrate the inclusivity of the Organisation and encourage staff to bring their whole-self to work.</p>

<p>2. Relative likelihood of staff being appointed from shortlisting across all posts.</p> <table border="1" data-bbox="168 375 510 454"> <thead> <tr> <th>WDES 19</th> <th>WDES 20</th> </tr> </thead> <tbody> <tr> <td>0.93</td> <td>1.50</td> </tr> </tbody> </table>	WDES 19	WDES 20	0.93	1.50	<p>Reduce the inequality in shortlisting for staff who declare a disability/LTC Review recruitment practices to ensure the process is equitable and inclusive where everyone can thrive</p>	<ol style="list-style-type: none"> 1. Work with the Disability Network to understand the experiences of disabled colleagues in the recruitment process. 2. Look at Current National initiative Disability Confident Criteria and Progress to Level 2 - Disability Committed. 3. Overhaul Current recruitment practices including branding/criteria for appointment/management of unsuccessful candidates/Promotions, secondments/Job adverts/understand barriers for staff/Senior roles 4. Review training for managers via I Manage/Hive 5. Analysis of current data to gather further information 	<p>October 2021- July 2022</p> <p>July 2021</p>	<p>W&OD Lead Resourcing Lead EDI Leads Staff Networks</p> <p>W&OD Lead Resourcing Lead EDI Leads Staff Networks</p>	<p>Introduce a robust system of constructive and critical challenge to ensure fairness during interview process. Ensure a diverse Interview panel ensuring the involvement of the EBF and the Staff networks.</p>
WDES 19	WDES 20								
0.93	1.50								

<p>4.(i)</p> <p>NSS % of staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months.</p> <table border="1" data-bbox="159 451 546 639"> <thead> <tr> <th>WDES</th> <th>Non-Disabled</th> <th>Disabled</th> </tr> </thead> <tbody> <tr> <td>2019</td> <td>24%</td> <td>27%</td> </tr> <tr> <td>2020</td> <td>23%</td> <td>28%</td> </tr> </tbody> </table>	WDES	Non-Disabled	Disabled	2019	24%	27%	2020	23%	28%	<p>Reduce the incidents of staff experiencing harassment, bullying or abuse from patients, relatives, public.</p> <p>To promote the culture, change and work together to drive the importance of WDES throughout current work streams and future initiatives.</p>	<ol style="list-style-type: none"> 1. Work with H & S Team to ensure appropriate interventions/training and policies are in place for staff who are affected by B & H or abuse. 2. Signpost staff to appropriate support. 3. Ensure systems are in place to escalate incidents to relevant s 4. Support the Clinical safety manager with the EDI elements of the Violent Prevention Reduction Standards. 5. Promote the recording and reporting of all incidents and available support for staff. 6. Create a culture where everyone feels they belong. 	<p>June 2021</p>	<p>EDI Lead H&S Team Staffside</p>	<p>To ensure that the adoption of zero tolerance against staff is upheld. To ensure that staff able to access support. Escalate and identify trends and put solutions in place to keep staff safe</p> <p>Part of the overall organisation goal to create an inclusive culture</p>
WDES	Non-Disabled	Disabled												
2019	24%	27%												
2020	23%	28%												

<p>(ii) NSS% of staff experiencing harassment, bullying or abuse from staff/managers in the last 12 months</p> <table border="1"> <thead> <tr> <th>WDES-staff</th> <th>Non-Disabled</th> <th>Disabled</th> </tr> </thead> <tbody> <tr> <td>2019</td> <td>15%</td> <td>29%</td> </tr> <tr> <td>2020</td> <td>17%</td> <td>27%</td> </tr> <tr> <th>WDES-Managers</th> <th>Non-Disabled</th> <th>Disabled</th> </tr> <tr> <td>2019</td> <td>8%</td> <td>18%</td> </tr> <tr> <td>2020</td> <td>9.5%</td> <td>19%</td> </tr> </tbody> </table>			WDES-staff	Non-Disabled	Disabled	2019	15%	29%	2020	17%	27%	WDES-Managers	Non-Disabled	Disabled	2019	8%	18%	2020	9.5%	19%	<p>Reduce the incidents of staff experiencing harassment, bullying or abuse from staff or managers</p> <p>Review training and education, Review and finalise the virtual induction training Ensure the B& H training is integrated into mandatory training. Ensure the B & H and civility saves lives training is integrated in i-manage (management training) Begin Fostering a Culture of Respect and Dignity</p> <p>Continue listening across a variety of platforms where colleagues feel safe to share their lived experiences. Focus on the drive to eliminate</p>	<ol style="list-style-type: none"> 1. Update staff training at induction and mandatory training to include civility training. 2. Advertise newly formed team of anti-bullying advisors across the organisation to ensure staff can access them. 3. Encourage the reporting of all incidents on datix 4. Work with staffside/freedom to speak up guardians/managers to ensure staff are able to access support they need 5. Signpost the support staff can access 6. Escalate to further support Coaching/HR/Mediation 	<p>November 21</p>	<p>To ensure that staffs concerns are being addressed. To support staff when the need arises. To enable staff to feel valued and that they belong To enable staff to bring their whole-self to work.</p> <p>To build on the culture of the organisation in order to drive initiatives to reduce</p>
WDES-staff	Non-Disabled	Disabled																						
2019	15%	29%																						
2020	17%	27%																						
WDES-Managers	Non-Disabled	Disabled																						
2019	8%	18%																						
2020	9.5%	19%																						

	<p>harassment, bullying and abuse and reassure staff that concerns will be acted on appropriately.</p> <p>Raise awareness of the WDES with the Council of Governors and the Equality Business Forum, Support staff by updating zero-tolerance materials.</p> <p>Encourage colleagues to participate and provide feedback in the NHS Staff Survey.</p> <p>EDI Leads, Freedom to Speak Up Guardians, Network Chairs and Bullying & Harassment Advisors to triangulate learning from themes in relation to the experiences of staff and feedback to senior management team.</p>				<p>harassment, bullying and abuse from members of the public Understand the lived experience behind the data.</p> <p>Value the richness of staff feedback to inform actions.</p> <p>To work together in partnership so that all staff feel safe to speak up, knowing that the right actions will be taken.</p>
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	<p>Focus of work streams to ensure that we create a culture where everyone feels they belong.</p> <p>Continue to promote reporting of all B & H incidents on Datix</p>				<p>Celebrate our diversity and enjoy learning about other cultures</p> <p>Support staff to speak up.</p>									
<p>5.NHS % believing that the Trust provides equal Opportunities for career progression or promotion</p> <table border="1" data-bbox="87 783 568 938"> <thead> <tr> <th>WDES</th> <th>Non-Disabled</th> <th>Disabled</th> </tr> </thead> <tbody> <tr> <td>2019</td> <td>87%</td> <td>77%</td> </tr> <tr> <td>2020</td> <td>86%</td> <td>81%</td> </tr> </tbody> </table>	WDES	Non-Disabled	Disabled	2019	87%	77%	2020	86%	81%	<p>To reduce the difference between disabled-non-disabled staff's response to progression/promotion</p>	<ol style="list-style-type: none"> 1. Encourage staff to participate in the NSS 2. Understand staff experiences of career progression. 3. Set up focus groups and discuss with disability network 4. Explore the idea of reciprocal mentoring for staff with a Disability or Long-term condition 	<p>November 21</p>	<p>Staff Engagement Lead Workforce/OD EDI Leads Staff Networks</p>	<p>To enable staff who are living with a disability/LTC to feel valued, and are heard.</p> <p>In line with the People Plan.</p>
WDES	Non-Disabled	Disabled												
2019	87%	77%												
2020	86%	81%												

<p>6. NSS staff saying they have felt pressure from their manager to come to work despite not feeling well enough to perform their duties.</p> <table border="1" data-bbox="87 485 551 639"> <thead> <tr> <th>WDES</th> <th>Non-disabled</th> <th>Disabled</th> </tr> </thead> <tbody> <tr> <td>2020</td> <td>22%</td> <td>32%</td> </tr> <tr> <td>2021</td> <td>22%</td> <td>31.5%</td> </tr> </tbody> </table>	WDES	Non-disabled	Disabled	2020	22%	32%	2021	22%	31.5%	<p>To ensure that staff are able to feel valued, supported when they are unwell.</p>	<ol style="list-style-type: none"> 1. Raise profile of disability network to all staff for peer support. 2. Advertise the benefits of staff sharing their equality data with us. 3. Create a series of awareness clips on hive for all staff to understand some of the issues facing staff with Disability/Long Term conditions. 4. Run engagement sessions for staff to share their stories and experiences of working with a Disability/LTC 5. Education for managers and refresher training around absence from work. 	<p>November 21</p>	<p>Staff Network Education/Training Team EDI Leads</p>	<p>To raise awareness of disability/Ltc to all staff. Ensure staff feel valued and that they belong.</p>
WDES	Non-disabled	Disabled												
2020	22%	32%												
2021	22%	31.5%												

<p>7. NHS % of staff saying they are satisfied with the extent to which the organisation values their work.</p> <table border="1" data-bbox="85 486 566 638"> <thead> <tr> <th>WDES</th> <th>Non-Disabled</th> <th>Disabled</th> </tr> </thead> <tbody> <tr> <td>2019</td> <td>48%</td> <td>31%</td> </tr> <tr> <td>2020</td> <td>47.5%</td> <td>35.5%</td> </tr> </tbody> </table>	WDES	Non-Disabled	Disabled	2019	48%	31%	2020	47.5%	35.5%	<p>To reduce the % of staff who feel they are undervalued</p>	<ol style="list-style-type: none"> 1. Ensure that all staff are aware of the Disability Network so they can access it for peer support. 2. Engage with the Network on all organizational issues to ensure staff feel included in decision making process 3. Raise awareness of the reasonable adjustment policy 4. Hold focus groups to understand the implications of this metrics data. 	<p>November 21</p>		<p>To ensure that all staff feel valued and that they are included in the organisational business decisions. To feel they belong.</p>
WDES	Non-Disabled	Disabled												
2019	48%	31%												
2020	47.5%	35.5%												
<p>8. NSS Employer has made adequate adjustments to enable them to carry out their work.</p> <table border="1" data-bbox="85 1117 497 1193"> <tbody> <tr> <td>2019</td> <td>78.3%</td> </tr> <tr> <td>2020</td> <td>80.2%</td> </tr> </tbody> </table>	2019	78.3%	2020	80.2%	<p>To support staff when they need support to carry out the role.</p>	<ol style="list-style-type: none"> 1. Continue to raise awareness of the Reasonable Adjustment Policy 2. Support staff and managers to use the policy in an effective way 3. Engage with the disability network to ensure progress is being made for staff 	<p>December 21</p>		<p>To enable staff to stay in work longer if they require adjustments to their role.</p>					
2019	78.3%													
2020	80.2%													

<p>9(a) NHS staff Engagement Score</p> <table border="1" data-bbox="87 451 568 603"> <thead> <tr> <th>WDES</th> <th>Non-Disabled</th> <th>Disabled</th> </tr> </thead> <tbody> <tr> <td>2019</td> <td>7.10%</td> <td>6.50%</td> </tr> <tr> <td>2020</td> <td>7.1%</td> <td>7.1%</td> </tr> </tbody> </table> <p>(b) Action to facilitate the voices of disabled staff</p>	WDES	Non-Disabled	Disabled	2019	7.10%	6.50%	2020	7.1%	7.1%	<p>To ensure all staff are consulted with.</p>	<ol style="list-style-type: none"> 1. Engage with the Disability Network to cascade information to their members and escalate any concerns 2. Liaise with the Disability Network to understand how we can close this gap <p>(b)</p> <ol style="list-style-type: none"> 1. Refocus the Disability Staff Network 2. Survey staff to raise awareness of the Network and find out what they want the they believe the network should look like 3. Progress the disability confident scheme Encourage staff to update their equality data 	<p>December 21</p>	<p>EDI Lead Staff Disability Network</p>	<p>To ensure every member of staff is given the opportunity to contribute, feels valued in line with the People Plan</p>
WDES	Non-Disabled	Disabled												
2019	7.10%	6.50%												
2020	7.1%	7.1%												

10 % difference between the Organisations Board voting Membership and its overall Workforce.	To ensure that the Board, Executive and Non-Executive Directors are representative of the staff and population we serve.	<ol style="list-style-type: none"> 1. Ensure the process for appointment of Executive and Non-Executive Directors encourages diverse application 2. Explore the use of reciprocal mentoring program for staff from the disability Network 3. Establish links with local and national recruitment agencies to increase the representation at senior management and Non-Executive level in the Trust. 	July 21		Ensure that the Board, Senior Executive Team are diverse. Importance of Senior Role models									
<table border="1"> <thead> <tr> <th data-bbox="78 379 226 451">WDES</th> <th data-bbox="226 379 383 451">Non-Disabled</th> <th data-bbox="383 379 551 451">Disabled</th> </tr> </thead> <tbody> <tr> <td data-bbox="78 451 226 491">2019</td> <td data-bbox="226 451 383 491"></td> <td data-bbox="383 451 551 491"></td> </tr> <tr> <td data-bbox="78 491 226 529">2020</td> <td data-bbox="226 491 383 529">12%</td> <td data-bbox="383 491 551 529">-4%</td> </tr> </tbody> </table>	WDES	Non-Disabled	Disabled	2019			2020	12%	-4%			March 21		
WDES	Non-Disabled	Disabled												
2019														
2020	12%	-4%												