

Board of Directors (Public)

SUMMARY REPORT

Meeting Date: 28th September 2022

Agenda Item: 20(a)

Report Title:	Workforce Disability Equality Standard Annual Report 2022	
Author(s):	Liz Johnson – Head of Equality and Inclusion	
Accountable Director:	Caroline Parry Executive Director of People	
Other meetings this paper has been presented to or previously agreed at:	Committee/Tier 2 Group/Tier 3 Group	People Committee
	Date:	13 th September 2022
Key points/recommendations from those meetings	Received by the People Committee. Committee agreed that the Disability Equality Standard 2022 report for publication and summary report would proceed to Board prior to publication.	

Summary of key points in report

1. Our data indicates that the percentage of not known disability is increasing and is far from our target of 8% action to date has focused on providing guidance and a focus on individuals updating their record which is not having an impact, we plan to review our current approach to improving the percentage of not know disability recording with our workforce information team.
2. Our staff experience of accessing adjustment is poor compared to benchmark organisations and there are several examples of cases where equipment has not been provided because we do not have a streamlined system or approach – A Reasonable Adjustments Task and Finish Group has been established in collaboration with our Disabled Staff Network Group and improving the experience of Disabled staff is an objective led by the Executive Director of People.
3. Despite the above our organisation continues to have a good percentage of staff who say they have a disability compared to benchmarking and our data suggests that this is reflected positively across our banding hierarchy.
4. Our data report indicates that there may be less of an issue in our organisation with:
 - The percentage of disabled staff in senior roles (Metric 1)
 - Likelihood of being recruited from shortlisting
 - Capability cases

5. In 2021 we were successful in obtaining funding to develop some digital stories based on disabled staff experience – this work is highlighted in our report with a link to stories we have also agreed follow up action with the national WDES team again highlighted in the report.

Recommendation for the Board/Committee to consider:

Consider for Action		Approval		Assurance	X	Information	X
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It is recommended that:

1. Board are assured that our organisation is responding to the statutory duties of the Equality Act 2010 and the requirements of the NHS Standard Contract relevant to the Workforce Disability Equality Standard
2. Board agree (subject to any proposed amendments and clarifications) to publication of the 2022 Workforce Disability Equality Standard Report (Appendix 1).

Please identify which strategic priorities will be impacted by this report:

Covid-19 Getting through safely	Yes		No	X
CQC Getting Back to Good	Yes		No	X
Transformation – Changing things that will make a difference	Yes	X	No	
Partnerships – working together to make a bigger impact	Yes	X	No	

Is this report relevant to compliance with any key standards? State specific standard

Care Quality Commission Fundamental Standards	Yes		No	X	
Data Security and Protection Toolkit	Yes		No	X	
Any other specific standard?					Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017. The NHS Standard Contract

Have these areas been considered? YES/NO

If Yes, what are the implications or the impact?
If no, please explain why

Service User Safety and Experience	Yes		No	x	
Financial (revenue & capital)	Yes		No	X	There are no direct implications for expenditure related to the content of this paper
Organisational Development/Workforce	Yes	X	No		The content of this report is specifically relevant to the composition of workforce and organisational culture which may impact on achieving these objectives.
Equality, Diversity & Inclusion	Yes	X	No		See section 4.2
Legal	Yes	X	No		Compliance with section 149 of the Equality Act 2010 (the Public Sector Equality Duty) and the Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017.
Sustainability	Yes		No	X	NA

Title	Workforce Disability Equality Standard Report 2022
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Section 1: Analysis and supporting detail

Background

This report provides a summary of the annual Workforce Disability Equality Standard Report and related priorities for action 2022.

Under the NHS standard contract, we are required to:

1. Submit data to NHS Digital by the 31st of August 2022 – this data report has been submitted including completion of a survey required by the WDES national team.
2. Review our priorities plans in light of the data report and progress
3. Publish a report and provide a copy to our commissioners

The Workforce Disability Equality Standard (WDES) is made up of ten 'Metrics'. These compare the experiences of disabled and non-disabled staff in the NHS. The information from the WDES is used to inform our progress in looking at the experience of disabled staff and act to make improvements.

Metric 1 looks at the breakdown, split by clinical and non-clinical staff of people of disabled and non-disabled staff (as defined by the ESR definition of disability).

Metrics 2 and 3 look at recruitment and capability cases.

Metrics 4 to 9a are taken from the NHS staff survey which uses a wider definition because it includes people who have a long-term health condition in its demographic questions.

Metric 9b looks at engagement with disabled staff and

Metric 10 at Board diversity.

Throughout our WDES report we use the term Disability in the context of the Social Model of Disability:

A person is disabled by failure of an organisation or society to make adjustments that remove barriers, for example, changes to the environment, ways of doing things and attitudes.

Our legal duties to disabled people in our organisation also apply, The Equality Act 2010 provides a legal definition:

A person has a disability if—

- (a) the person has a physical or mental impairment, and
- (b) the impairment has a substantial and long-term adverse effect on the person's ability to carry out normal day-to-day activities.

Our Disability Staff network group have chosen to use Disability in their title because this reflects the 'protected characteristic' of Disability and the protection that the Equality Act 2010 gives against discrimination, and that it is important to move away from a focus on the individual but rather the barriers they experience.

This report covers our WRES data report submitted to NHS digital in August 2022 however the data in WRES reports are based on the previous year's Staff Survey results (i.e., 2021 in this report) and staff information as of the 31st of March 2022.

The priorities identified through reviewing our data and our progress against our priorities from 2021 are to

1. Our report indicates that we have an increasingly high percentage of not known for disability, we have an identified target of 8% however the action we have taken to date has not improved this situation. A review of our current approach to improving the percentage of not know disability recording in collaboration with our workforce information team is required.
2. Our staff survey data and feedback from disabled staff indicates a problem with providing Reasonable Adjustments to disabled staff, this is identified as a risk in this summary report. A Task and Finish Group is in the process of being established in collaboration with our Disabled Staff Network Group.
3. Our staff network group has identified several useful resources and we have also committed to improving our information for managers - we intend to update our Jarvis intranet pages with information about resources for disabled staff and management information.
4. We will implement the action we have agreed with the national WDES team following our 2021 Innovation Fund Award:
 - Work collaboratively with three of our organisations staff networks our Disability staff Network group, our Lived Experience Staff Network Group, and our Carers Staff network group to integrate the Digital Stories into a training programme going forward.
 - Collaboratively externally across the South Yorkshire and Bassetlaw Integrated Care System to take forward development of the use of this resource across NHS trusts and share good practice in implementation.
 - In July 2022 to staff form the People Directorate undertook a specific course focused on supporting staff with dyslexia we plan to develop a focus on this area though a small project group.

Section 2: Risks

2.1 There is a risk that Disabled staff will not have access to Reasonable Adjustments to support them in undertaking their employment role, impacting on their wellbeing and ability to work.

Mitigation against this risk includes

- Establishment of a Reasonable Adjustment Task and Finish group to identify barriers and address these.
- Identify efficient ways of overseeing access to adjustments learning from good practice in other organisations.
- Establish a more affective way of monitoring access requests and fulfilment

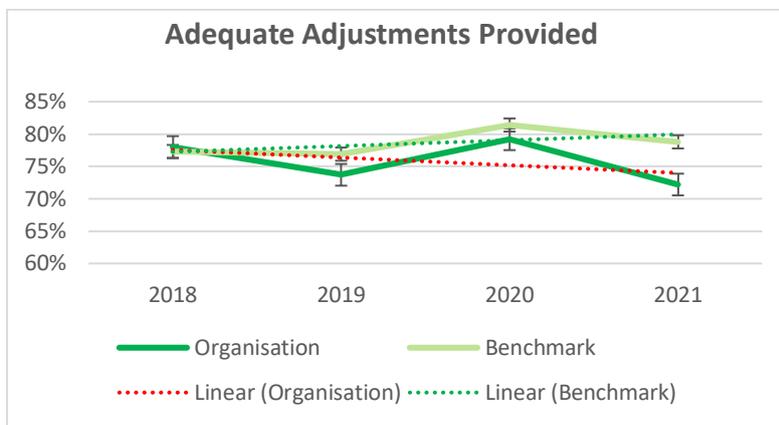
Section 3: Assurance

Benchmarking

The majority of our WDES staff survey metrics are worse than the benchmark group and show little improvement over time from 2018 when the WDES was first introduced.

Compared to other organisations our reported percentage of disabled staff is high at 8% and we also have a high percentage of staff with a disability or long-term health condition completing the staff survey at 33% of overall respondents in 2021.

Our staff survey metric associated with access to 'adequate' adjustments indicates that our staff have a worse experience, and this is deteriorating whilst our benchmark group is improving over time.



Our data report indicates that there may be less of an issue in our organisation with:

- The percentage of disabled staff in senior roles (Metric 1)
- Likelihood of being recruited from shortlisting
- Capability cases

Engagement

Our Disabled Staff network continues to develop and a significant project involving co production with the Staff network group took place in 2021/22 following a successful bid to the WDES innovation fund 2021. Details are provided in the annual report and not repeated in this summary report.

Section 4: Implications

Strategic Aims and Board Assurance Framework

4.1 This paper is relevant to the strategic aim of Transformation - Changing things that will make a difference

Equalities, diversity, and inclusion

4.3 The Public sector equality duty (s.149 of the Equality Act 2010) requires public organisations, in carrying out their functions, to have due regard to the need to achieve the objectives set out under s149 of the Equality Act 2010 to:

(a) eliminate discrimination, harassment, victimisation, and any other conduct that is prohibited by or under the Equality Act 2010.

(b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.

(c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

This report supports assurance against this duty and is referenced to the organisation's equality objectives.

Financial

4.5 There are no specific financial considerations associated with this particular report

Compliance - Legal/Regulatory

4.6 See section 4.3 above.

Section 5: List of Appendices

Appendix 1 – The Workforce Disability Equality Standard Report and Action Priorities 2022 (Attachment)



Sheffield Health
and Social Care
NHS Foundation Trust

Workforce Disability Equality Standard

Report and Action Plan 2022



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Introduction

The Workforce Disability Equality Standard (WDES) is made up of ten 'Metrics.' These compare the experiences of disabled and non-disabled staff in the NHS. The information from the WDES is used to inform our progress in looking at the experience of disabled staff and act to make improvements.

This report provides information about the WDES metrics in 2022 and what we plan to do to make changes where metrics highlight areas of concern.

What do we mean by Disability?

The WDES and our organisational Disabled Staff policy uses the term Disability in the context of the Social Model of Disability:

A person is disabled by failure of an organisation or society to make adjustments that remove barriers, for example, changes to the environment, ways of doing things and attitudes.

The Equality Act 2010 provides a legal definition:

A person has a disability if—

- (a) the person has a physical or mental impairment, and
- (b) the impairment has a substantial and long-term adverse effect on the person's ability to carry out normal day-to-day activities.

Our Disability Staff network group have chosen to use Disability in their title because this reflects the 'protected characteristic' of Disability and the protection that the Equality Act 2010 gives against discrimination, and that it is important to move away from a focus on the individual but the barriers they experience.

Data and Information Used in this Report

The information used in this report comes from our Electronic Staff Record (ESR) system and from our NHS Staff Survey report. The ESR system and the Staff Survey ask the question about Disability, research has shown that more staff disclose disability

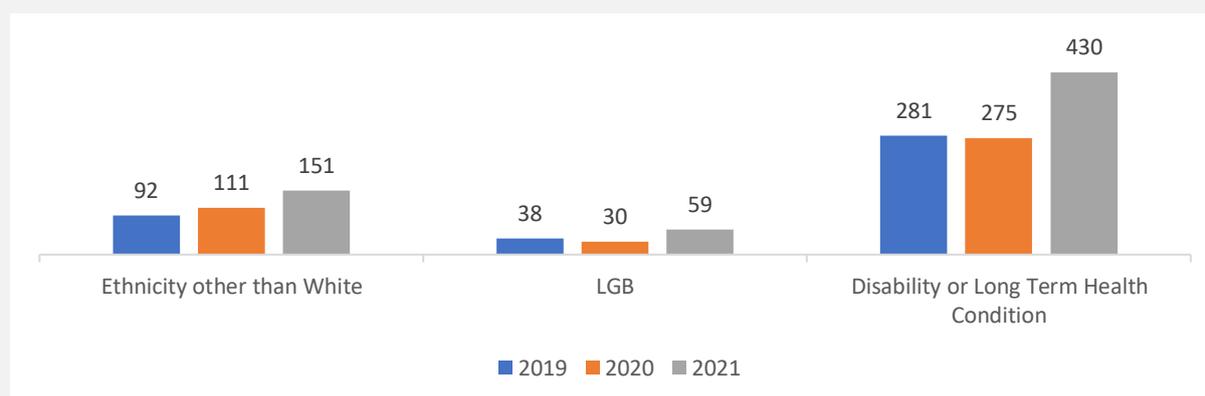
when they are completing the NHS staff survey than provide this information in the ESR system. The data in this year's report excludes anyone on a Bank only contract.

The Percentage of Disabled Staff in our Organisation

Disability	2016	2017	2018	2019	2020	2021	2022
Yes	8%	6%	7%	7%	7%	7%	8%
No	61%	78%	79%	79%	78%	77%	74%
Not Stated	32%	16%	14%	14%	15%	16%	18.3%

In 2022 the percentage of people in our organisation who identify as disabled has increased from 7% to 8% however this is likely to be due to the exclusion of bank only staff in this year's report because the only identifiable increase in terms of staff group is in Clinical bands 2 – 4.

The NHS staff survey includes demographic information about the people who have completed the survey, the question in the survey has a wider scope than in our NHS staff information system (ESR) because it asks about long term health conditions as well however we did see a significant increase in the numbers of staff saying yes to this question in the staff survey for 2021. The table below shows this increase from 2019 to 2021.



The Percentage of Disabled Staff by Pay Band (WDES Metric 1)

The Workforce Disability Equality Standard asks us to review the percentage of disabled staff in our pay bands compared with the percentage of staff in the overall workforce. This metric is reported by non – clinical and clinical staffing groups.

The average percentage of disabled staff has increased from 7% to 8% (rounded).

Non – Clinical	Disabled				Not Disabled			
	2019	2020	2021	2022	2019	2020	2021	2022
Bands 2 - 4	8%	8%	8%	8%	84%	83%	80%	78%
Band 5 - 7	4%	5%	7%	7%	86%	84%	82%	79%
Bands 8a - 8b	4%	6%	6%	7%	83%	85%	80%	75%
Bands 8c - 9 & VSM	16%	11%	11%	10%	81%	74%	73%	70%
Clinical	Disabled				Not Disabled			
	2019	2020	2021	2022	2019	2020	2021	2022
Bands 2 - 4	6%	6%	7%	8%	75%	74%	73%	72%
Band 5 - 7	9%	8%	8%	8%	81%	79%	76%	73%
Bands 8a - 8b	6%	8%	9%	8%	85%	83%	84%	84%
Bands 8c - 9 & VSM	4%	8%	4%	0%	74%	83%	81%	83%
Consultants	4%	7%	8%	6%	82%	75%	78%	72%
Non-Consultants Career Grade	13%	5%	4%	5%	50%	81%	84%	80%
Medical and Dental Trainee Grades	14%	11%	10%	10%	72%	61%	50%	30%

Not Known

Our interim target was to reduce not know to less than 10% by July 2022, we have not met this target.

Non – Clinical				
	2019	2020	2021	2022
Bands 1 - 4	9%	9%	12%	14%
Band 5 - 7	10%	11%	11%	14%
Bands 8a - 8b	15%	10%	14%	19%
Bands 8c - 9 & VSM	0%	16%	16%	20%
Clinical				
	2019	2020	2021	2022
Bands 1 - 4	19%	20%	20%	20%
Band 5 - 7	10%	13%	16%	19%
Bands 8a - 8b	10%	9%	7%	8%
Bands 8c - 9 & VSM	22%	9%	15%	17%
Consultants	14%	19%	14%	22%
Non-Consultants Career Grade	38%	14%	12%	15%
Medical and Dental Trainee Grades	19%	27%	40%	60%

Unfortunately, there has been a significant increase in the number of people who are 'not known' for Disability. The areas with the highest percentage of not known are highlighted above. In the past we have provided guidance and support on an individual level to people in updating their record and this was an area for action that was identified in our 2020 action plan is likely that a more comprehensive exercise is needed to reduce this – we will consider how to take this forward and implement a revised action to be completed by March 2023 as noted above our target overall is 8%.

Likelihood of disabled people being recruited from shortlisting (WDES Metric 2)

This question looks at the proportion of disabled people compared to non-disabled people appointed from shortlisting when they have applied for roles in our organisation. We expect this to be between 0.80 to 1.25 and in 2021 this is showing a positive score of 0.87.



Our data suggests that disabled people are more likely to be recruited from shortlisting, we were concerned that this might be due to a sizeable percentage of people who had not recorded their disability status when applying for posts however our data suggests that the number of not known is very low for both shortlisted and recruited candidates. Organisationally we offer an interview to people who identify as disabled if they meet the essential criteria for the role.

Shortlisted Not Known	Recruited Not Known
3.9%	1.3%

Our focus for action as in 2021 is not so much with recruitment but with retention.

Disabled Staff and formal Capability procedures (WDES Metric 3)

This metric looks at the likelihood of disabled and non-disabled staff entering our formal capability process. The reporting for this metric started in 2020. As reported in our 2021 WDES report in 2020 our score was high at 3.51 which indicated that disabled staff were around three times more likely to be involved in capability procedures, however the number of cases was extremely low. In 2021 and subsequently in 2022 there have been very few cases and none involving disabled staff.

2020	2021	2022
3.51	0.00	0.00

We do not intend to take any specific action on this area in 2022/23.

The NHS Staff Experience Survey 2021 (WDES Metrics 4 to 9a)

WDES Metrics 4 to 9a are part of the NHS staff experience annual survey, they compare the outcomes of the responses for Disabled staff, and none disabled staff. In this 2022 WDES report the 2021 staff survey results are referred to and are part of our 2022 WDES return.

As noted above in the 2021 survey 430 people who responded to the survey said they had a disability of long-term health condition.

In all of the following charts a **dark green** line shows the experience of staff with a disability or long-term health condition who work in our organisation.

A **light green** line represents the experience of staff with a disability or long-term health condition who work in similar NHS organisations (our Staff Survey benchmark Group).

Blue lines are people in both groups above who do not have a disability of long-term health condition.

Disabled Staff Experience - Harassment Bullying or Abuse (WDES Metric 4a)

This question looks separately at disabled staff experience of harassment bullying or abuse from patients / service user's relatives or the public, managers, and colleagues.



Harassment Bullying or Abuse ...

From Managers

15.2% of disabled staff said they had experienced bullying or abuse from managers in 2020/21, an improvement from 2019/20 which was 18.1% but still significantly higher than non-disabled staff in 2021 (8.6%).

From Other Colleagues

18.5% of disabled staff said they has experienced bullying or abuse from colleagues this was reduction from 21.3% in 2020. For this metric, our staff experience is slightly better than the benchmark group (20.2%).

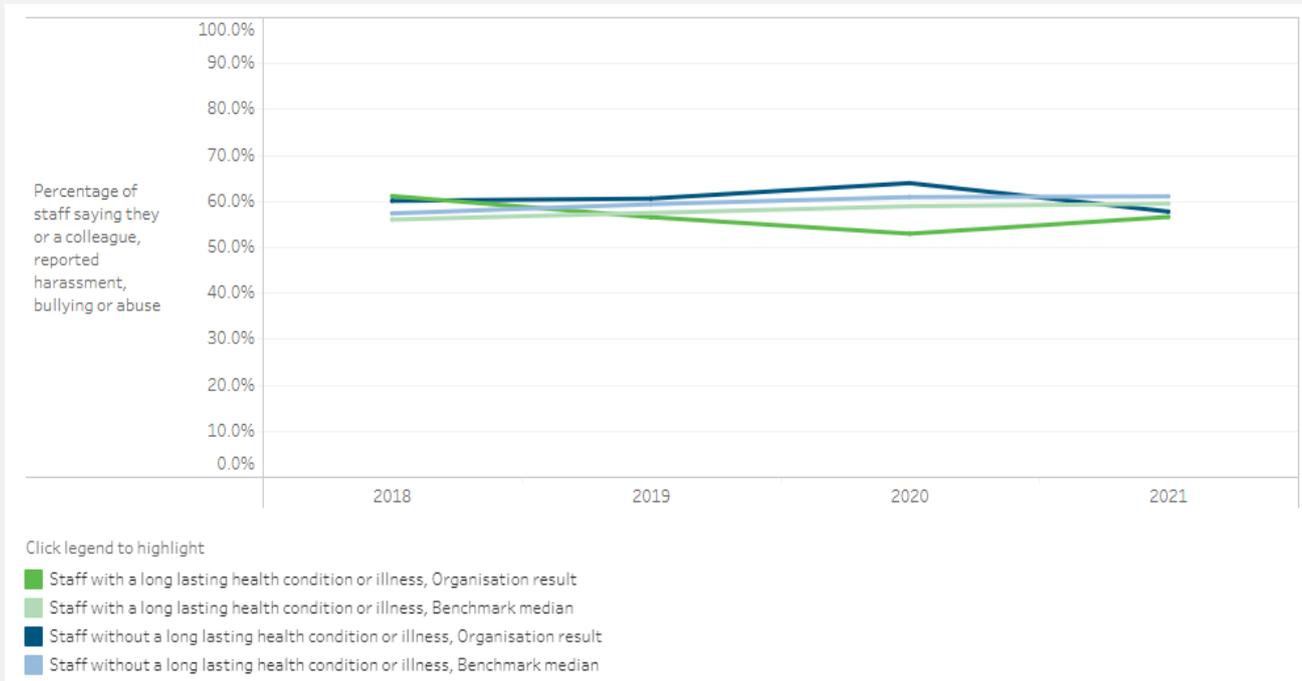
From Patients / Service users or the Public

33% of disabled staff said they had experienced bullying or abuse from services users in 2020/21 this was a decrease from 2019/20 and similar to the benchmark group.

Disabled Staff - Harassment Bullying or Abuse Reporting (WDES Metric 4 b)

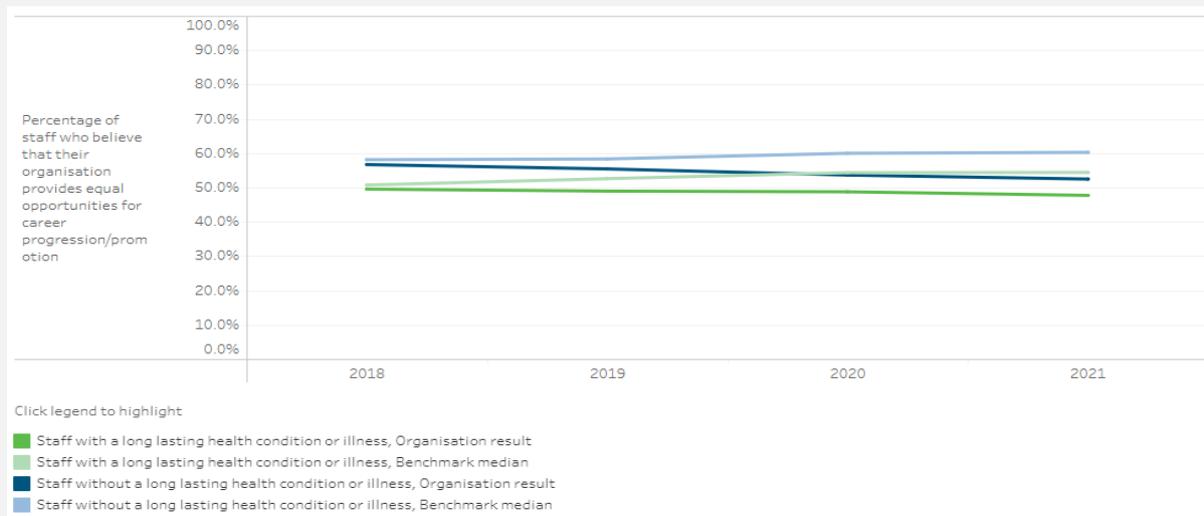
This question asks if someone who has experienced harassment bullying or abuse has reported it or if it was reported on their behalf by a colleague. There has been an increase in this score for disabled staff and the score is more or less equal to non-disabled staff however still well below the disabled benchmark group.

We have made improvements to our incident reporting process in 21/22 and introduced a new operation procedure for reporting hate incidents internally in autumn 2022 we will introduce a new third party hate incident reporting procedure so that hate incident can be reported centrally.



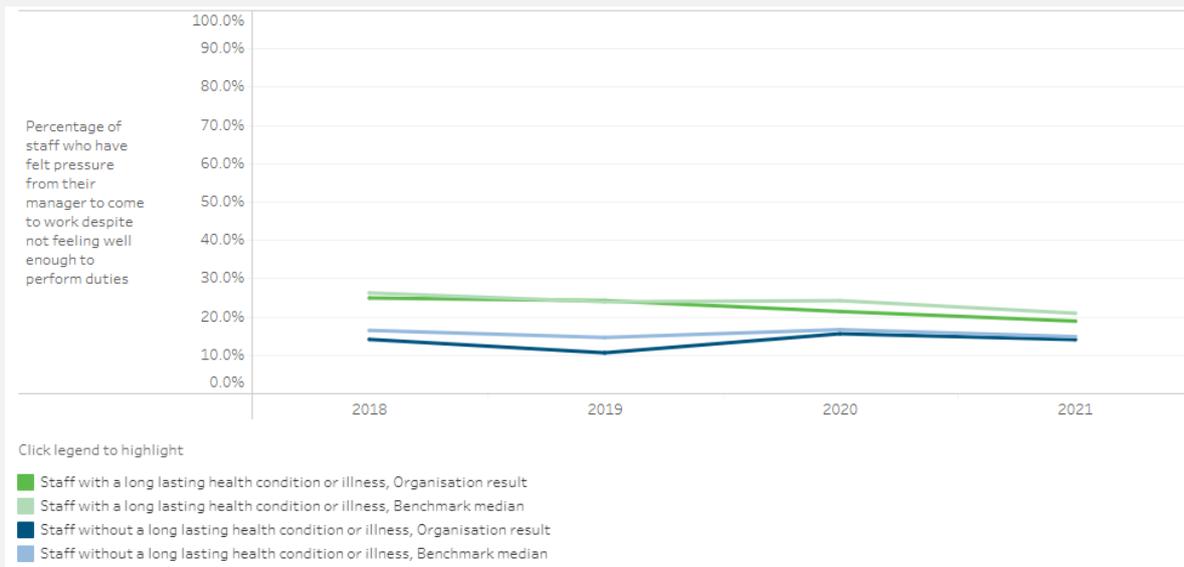
The Percentage of People Who Believe We Provide Equal Opportunity for Career Progression (WDES Metric 5)

This question asks people if they believe that the organisation provides equal opportunity for career progression. Our score in this area is very poor with only 47.5% of disabled staff saying the organisation does provide equal opportunity. As noted above our staff network group have suggested this may be associated with staff retention rather than recruitment.



Feeling Pressure to Come to Work When Not Feeling Well Enough to Perform Duties (WDES Metric 6)

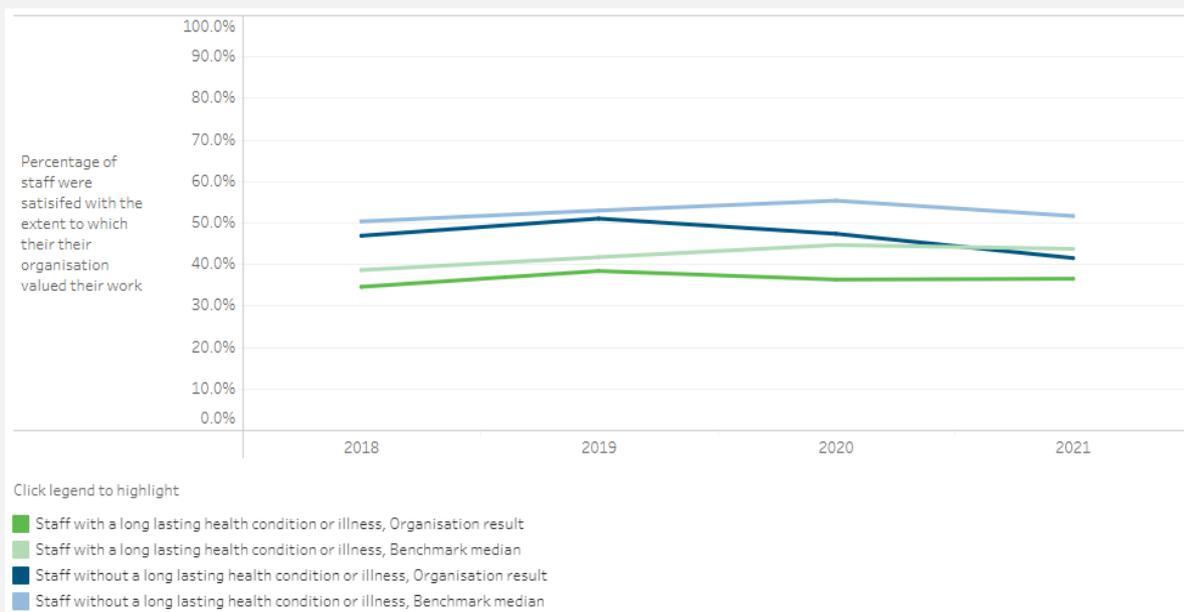
This question looks at the percentage of people who say that they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties. In 2022 the percentage of staff with a disability saying yes to this question has reduced from 21.3% in 2020 to 18.8% in 2022 however this is still higher than non-disabled staff (14%). This metric score however is more positive than our benchmark group (20.8%).



Although our organisation score is below the benchmark for this question disabled people are still more likely to feel under pressure to come to work when they are unwell than people who not.

The Extent to Which the Organisation Values My Work (WDES Metric 7)

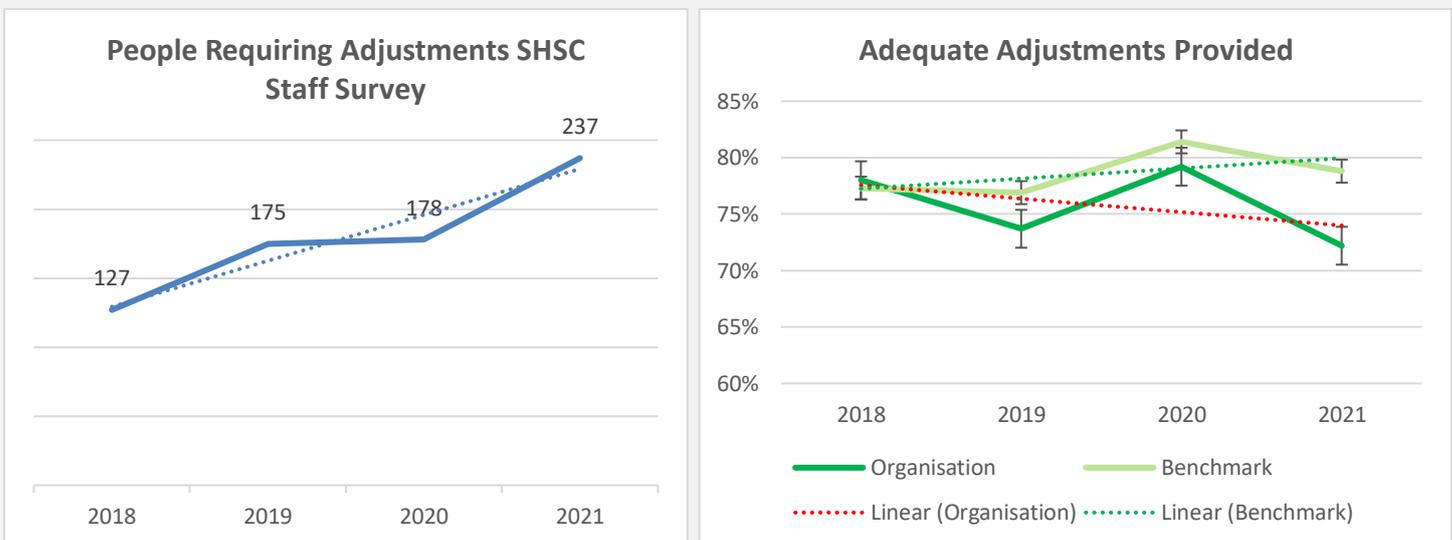
This question asks if people are satisfied with how much our organisation values their work. In 2021 this metric has stayed more or less the same as in 2020 and below the score for non-disabled staff – this position echoes feedback from our staff network about the extent to which they are valued by the organisation.



Adequate Adjustments (WDES Metric 8)

This question asks if staff who have identified that they have a need for adjustments have had adequate adjustments made. In the 2021 survey 430 staff said they had a disability of long-term health condition, of these 237 said they needed adjustments but only 72% felt they had had adequate adjustment made.

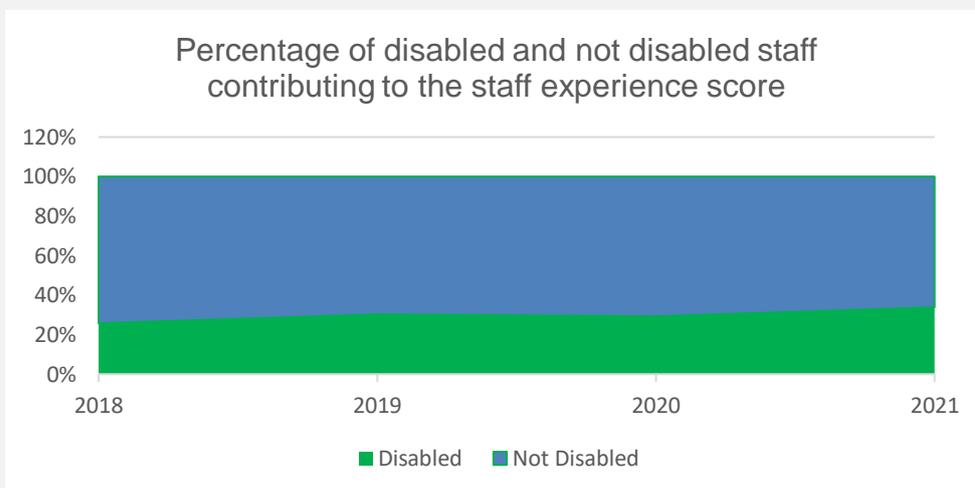
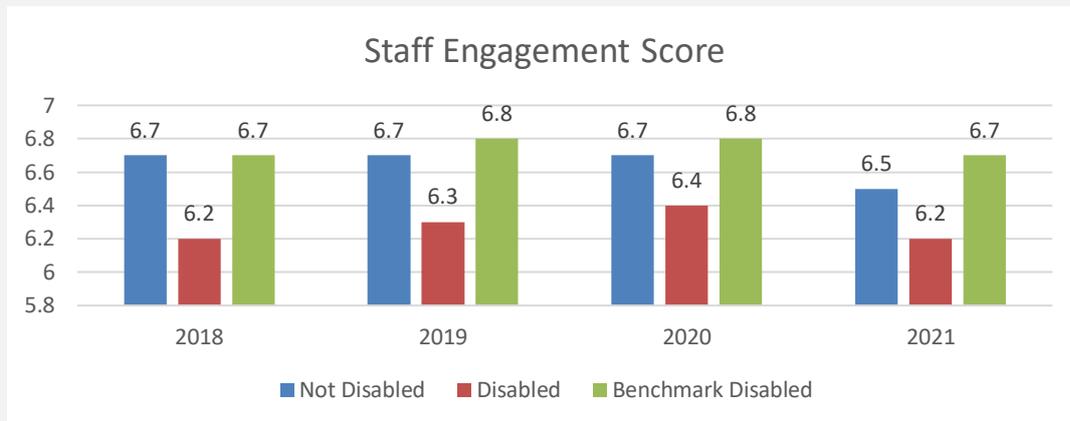
As noted above the number of disabled staff completing the survey has increased significantly since 2018. Our data indicates however that adequate adjustments are not being provided, the percentage of staff in our organisation that say that they have not been provided with adequate adjustments is decreasing year on year whereas our benchmark groups performance is improving year in year. We are currently establishing a task and finish group to look at the process we have in place for providing practical adjustments and equipment, this will involve a number of areas of our organisation the group will be in place until March 2023 to ensure that action is identified and implemented. Our staff network have provided a detailed record of their experience which we will use as a starting point for this work.



Action to Facilitate the Voices of Disabled People (WDES Metric 9a)

The staff survey engagement score looks at questions in the staff survey about engagement and gives a score of 1-10. The score for disabled staff has been consistently lower than for non-disabled staff and the benchmark since 2018, however

each year it was improving, unfortunately in 2021 it had reduced to 6.2 the same level as in 2018.



Action to facilitate the voices of Disabled staff in our organisation (Metric 9b)

Our Disabled Staff Network group membership has grown to thirty-eight members, the group meets regularly and is increasingly informing our action to improve the experience of disabled staff in our organisation, our aim is to co-produce action relevant to disability with our staff network group.

In 2021 our Disability Staff Network reviewed our staff survey results for 2020 and co-produced a response and set of actions. Our network group wanted to prioritise improving line managers understanding of adjustments and to focus on hidden disability. They also highlighted that they would like there to be a greater awareness of microaggressions and how these impact on disabled people in our organisation. The staff network wanted to look at how working environments that 'promote resilience' can be developed including a focus on compassionate and informed management.

Our staff network proposed that to take this forward, based on their personal experience, there needed to be an approach that supported learning and development for managers leaders and colleagues focused on insight into the experience of disabled staff, particularly people with hidden and fluctuating conditions, this would provide a foundation for managers to gain a better understanding of how they could approach making adequate adjustments. Members of our network had had the opportunity to speak about their condition more openly since the network has been established including in organisational forum such as our senior leadership calls, the impact and power of hearing people’s stories of lived experienced was felt to be fundamental to change.

The action the network proposed was the development of co - produce resources and the opportunity to put in a bid for the Innovation Fund 2021-22 provided an opportunity to provide a focus for this.

We aimed to:

- Develop a training resource to be used as part of a full training package through commissioning production of a set of short but high impact digital storytelling films, based on various aspects of the experience of NHS staff with hidden and fluctuating disabilities. To commission the Digital Stories from Flourish a Social enterprise with a track record of producing materials focused on lived experience.

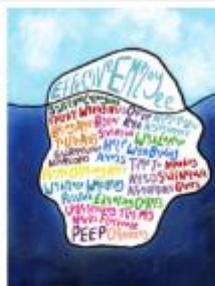
The project was implemented by our EDI lead for Health and Wellbeing, network members were fundamental in supporting engagement with a diverse range of participants and creatin an environment for stories to be shared. A set of Digital stories were produced which can be viewed below – we have provided a more detailed report on this project which can be provided on request to our EDI team EDI@shsc.nhs.uk .



Lorena



Alex



Ellie



Karyn

- Work collaboratively with three of our organisations staff networks our Disability staff Network group, our Lived Experience Staff Network Group, and our Carers

Staff network group to integrate this resource into a training programme going forward.

We have agreed an action plan to take this forward into autumn 2022 and early new year.

- Collaboratively engage with Health Inequalities Health and Wellbeing leads across the South Yorkshire and Bassetlaw Integrated Care System to take forward development of the use of this resource across NHS trusts and share good practice in implementation.

We have agreed action with the Yorkshire and Humber Equality Leads network.

The Diversity of Our Board (WDES Metric 10)

The WDES asks us to look at the percentage difference between our Board voting membership and our workforce in relation to disability.

- In 2021 the difference in the percentage of disabled people on our Board and in the organisation was +1.35 % this has improved to + 7.5 in 2022.
- The difference between the organisation's Board **voting** membership and the percentage of disabled people overall in 2021 was -7% in 2022 this has increased to +1.21.
- The difference between the organisation's Board membership and its organisation's overall workforce, disaggregated by **Executive** membership of the Board in 2021 was -7% in 2022 this has negatively increased to -7.88

This reflects an improvement in the diversity of the Board with regard to voting members and the board as a whole but not whole is not Executive Board membership which is underrepresented in relation to the organisation as a whole.

Appendix 1 - Priority Action 2022/2023

1. We will review our current approach to improving the percentage of not know disability recording with our workforce information team.
2. We will implement the new Reasonable Adjustments Task and Finish Group in collaboration with our Disabled Staff Network Group
3. We will update our intranet pages with information about resources
4. We will implement the action areas identified in our Innovation Fund Award report
 - Work collaboratively with three of our organisations staff networks our Disability staff Network group, our Lived Experience Staff Network Group, and our Carers Staff network group to integrate the Digital Stories into a training programme going forward.
 - Collaboratively externally across the South Yorkshire and Bassetlaw Integrated Care System to take forward development of the use of this resource across NHS trusts and share good practice in implementation.
5. We will collaborate with our staff network to continue to look at different ways of involving members in the work of the group and increase membership.
6. We will progress developing our expertise and support for staff with Dyslexia.