



Sheffield Health  
and Social Care  
NHS Foundation Trust

# Workforce Disability Equality Standard

Report 2024



## Contents

Introduction .....	3
What do we mean by Disability? .....	3
Data and Information Used in this Report .....	3
The Percentage of Disabled Staff in our Organisation .....	4
The Percentage of Disabled Staff by Pay Band (WDES Metric 1) .....	4
Disabled Staff by Pay Band/Grade.....	5
Not Known .....	6
Likelihood of Disabled People Being Recruited From Shortlisting (WDES Metric 2) .....	7
Disabled Staff and Formal Capability Procedures (WDES Metric 3) .....	7
The NHS Staff Experience Survey 2021 (WDES Metrics 4 to 9a).....	7
Key Points and Areas for Action 2024/25.....	10
Disabled Staff Experience of Harassment / Abuse (WDES Metric 4a – d).....	10
Staff Feeling Pressure to Come to Work When Not Feeling Well Enough (WDES Metric 6) .....	10
Opportunities for Career Progression and the way the organisation values Disabled Staff's Work (WDES Metrics 5 and 7 ) .....	11
Reasonable Adjustments (WDES Metric 8) .....	11
Action to Facilitate the Voices of Disabled Staff in our Organisation (Metric 9b).....	12
The Diversity of Our Board (WDES Metric 10).....	13

## **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 2024 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 which is that:

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 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 report excludes anyone on a Bank only contract. There is now a Bank only NHS Staff Survey in order to look specifically at the experience of Bank staff.

## The Percentage of Disabled Staff in our Organisation

Disability	2016	2017	2018	2019	2020	2021	2022	2023	2024
Yes	8%	6%	7%	7%	7%	7%	8%	9%	11%
No	61%	78%	79%	79%	78%	77%	74%	75%	76%
Not Stated	32%	16%	14%	14%	15%	16%	18.3%	16%	14%

Figure 1

In 2024 the percentage recorded of people in our organisation who identify as disabled has continued to increase year on year and is at an all-time high of 11%.

Benchmarking with other NHS organisations indicates that we have a high percentage of staff identifying as Disabled and the most up to date we have access to (2023).

### 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. Figure 2 highlights the percentage of staff in each pay band /grade that say they are disabled, although some groups are below the average of 11% the high percentage overall indicates a positive score in all but clinical band 8c – 9 and VSM which is at 0%, this is likely to be because of the low number of posts overall and the fact that these sit in the non-clinical group which is at 22%.

## Disabled Staff by Pay Band/Grade

Figure 2

Non-Clinical	Disabled					Not Disabled				
	2020	2021	2022	2023	2024	2020	2021	2022	2023	2024
Bands 2 - 4	8%	8%	8%	8%	10%	83%	80%	78%	79%	77%
Band 5 - 7	5%	7%	7%	9%	11%	84%	82%	79%	78%	81%
Bands 8a - 8b	6%	6%	7%	10%	9%	85%	80%	75%	78%	83%
Bands 8c - 9 & VSM	11%	11%	10%	6%	22%	74%	73%	70%	77%	67%
Clinical	Disabled					Not Disabled				
	2020	2021	2022	2023	2024	2020	2021	2022	2023	2024
Bands 2 - 4	6%	7%	8%	9%	10%	74%	73%	72%	75%	75%
Band 5 - 7	8%	8%	8%	10%	12%	79%	76%	73%	75%	76%
Bands 8a - 8b	8%	9%	8%	10%	12%	83%	84%	84%	80%	80%
Bands 8c - 9 & VSM	8%	4%	0%	0%	0%	83%	81%	83%	96%	92%
Consultants	7%	8%	6%	8%	8%	75%	78%	72%	68%	69%
Non-Consultants Career Grade	5%	4%	5%	7%	10%	81%	84%	80%	93%	67%
Medical and Dental Trainee Grades	11%	10%	10%	7%	10%	61%	50%	30%	22%	23%

## Not Known

The average not stated has decreased a small amount in 2024 but remains above our target of 10%. This included making changes to the electronic staff record system so that staff were reminded to update their information. We have also taken action to ensure that records recorded in one part of our system are transferred to the next sated. We are particularly concerned about the high percentage of not known in the medical trainee group, our workforce team are working with the medical team to improve this data and helping us to progress ongoing improvements in this area.

Our interim target was to reduce not know to less than 10% by July 2022, we have not met this target but not know is decreasing from 2022 to 2023.

Our not known is above the last published national figure of 20% and our target remains at 10%.

<b>NON - CLINICAL - Not Known</b>					
	<b>2020</b>	<b>2021</b>	<b>2022</b>	<b>2023</b>	<b>2024</b>
<b>Bands 1 - 4</b>	9%	12%	14%	13%	13%
<b>Band 5 - 7</b>	11%	11%	14%	13%	8%
<b>Bands 8a - 8b</b>	10%	14%	19%	12%	9%
<b>Bands 8c - 9 &amp; VSM</b>	16%	16%	20%	18%	11%
<b>Clinical – Not Known</b>					
	<b>2020</b>	<b>2021</b>	<b>2022</b>	<b>2023</b>	<b>2024</b>
<b>Bands 1 - 4</b>	20%	20%	20%	16%	15%
<b>Band 5 - 7</b>	13%	16%	19%	15%	13%
<b>Bands 8a - 8b</b>	9%	7%	8%	5%	8%
<b>Bands 8c - 9 &amp; VSM</b>	9%	15%	17%	10%	8%
<b>Consultants</b>	19%	14%	22%	25%	24%
<b>Non-Consultants Career Grade</b>	14%	12%	15%	0%	23%
<b>Medical and Dental Trainee Grades</b>	27%	40%	60%	71%	67%

Figure 3

## **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. Our target is for this to be between 0.80 to 1.25.

In 2024 our recruitment data continues to show a positive score of 1.03 at , this means that disabled people that are shortlisted are as likely as non - disabled applicants to be appointed.

Our recruitment data appears to indicate that disabled applicants fare well in our recruitment procedures, and this appears to be reflected in the percentage of disabled staff we employ.

## **Disabled Staff and Formal Capability Procedures (WDES Metric 3)**

This Metric is based on data from a two-year rolling average of the current year and the previous year and is based on capability on the grounds of performance and not ill health. The data reviewed for this metric is the number of staff entering the capability process from 1 April 2022 to 31 March 2024, divided by 2.

In 2024 our two-year average cases were 0 disabled member of staff and 3 not disabled staff our score for this metric is therefore 0.0 for 2024

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

Nine of the WDES metrics come from the NHS annual Staff Survey the last survey took place in 2022 so these WDES metrics are as of 2022 rather than 2023.

The number of staff with a Disability or Long-Term Health Condition who complete the NHS staff survey in SHSC each year is rising, in 2024 this group represented 35% of all staff who completed the survey.

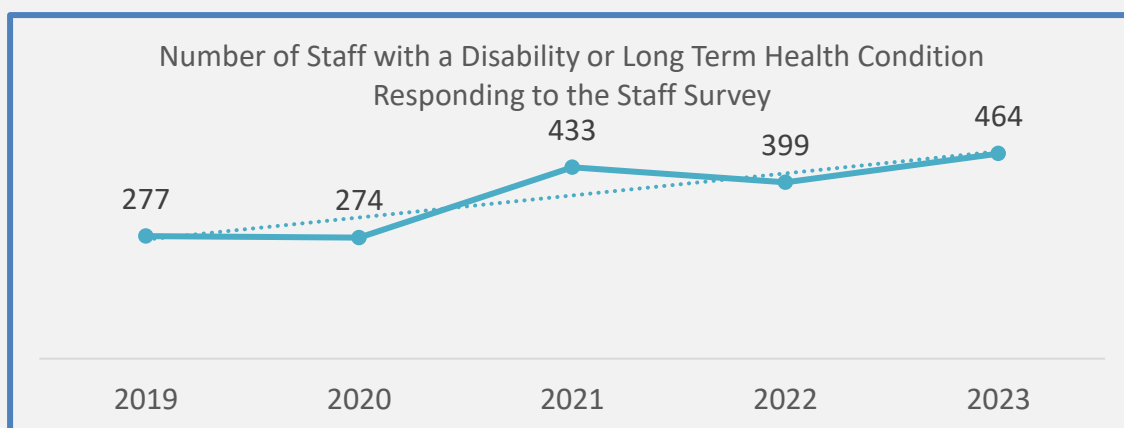


Figure 4

Staff Survey questions included in the Workforce Disability Equality Standard are:

- The Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from:
  - A. Patients/Service users, their relatives, or other members of the public
  - B. Managers
  - C. Other colleagues
  - D. The 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.
- The Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.
- The 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.
- The Percentage of Disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their organisation values their work.
- The Percentage of Disabled staff saying that their employer has made reasonable adjustment(s) to enable them to carry out their work. (Prior to 2022, the term “adequate adjustments” was used).
- The staff engagement score for Disabled staff, compared to non-disabled staff.

The table below (Figure 1) is a summary of our organisations WDES scores for all of the WDES metrics from the NHS Staff Survey 2022.



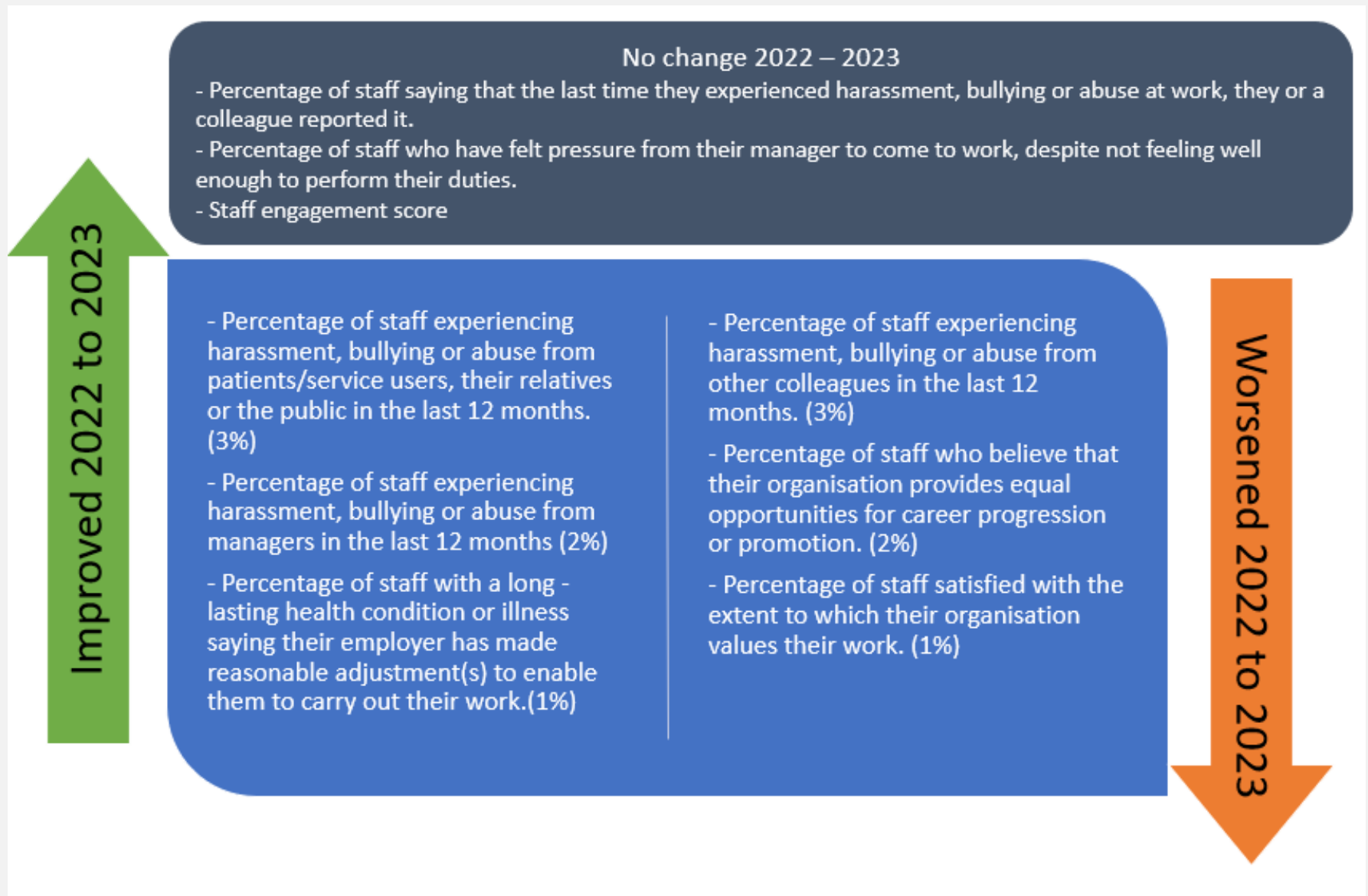


Figure 5

## **Key Points and Areas for Action 2024/25**

### **Disabled Staff Experience of Harassment / Abuse (WDES Metric 4a – d)**

There has been a 3-percentage point improvement in Disabled staff experiencing harassment, bullying or abuse from patients/service users, their relatives, or other members of the public and a 2-percentage point movement for staff experiencing harassment, bullying or abuse from managers, however, there has been a 3-percentage point worsening for disabled staff experiencing harassment, bullying or abuse from other colleagues.

In 2023/4 we agreed a new Equality Objective to:

*Improve our Knowledge , Understanding and Attitude in the areas of : Neurodiversity, Reasonable Adjustments, Cultural Humility, Allyship, Microaggression.*

In 2024/2025 action we will take to support this objective includes:

- Developing training as part of our new Manager Programme this will include Reasonable Adjustments, Allyship and Microaggressions.
- Including topics around Disability in our Equality Diversity and Inclusion Learning and Sharing Forum programme for 2024/2025
- Including Disability in developing a new 'Living Library' Resource

There has also been no change in the percentage of disabled verses not disabled staff who said that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it. As previously reported, we are continuing to improve the availability of options for reporting harassment and discrimination which is aligned to our ongoing work on reporting racism and a focus on sexual safety and including other protected characteristics as this develops.

### **Staff Feeling Pressure to Come to Work When Not Feeling Well Enough (WDES Metric 6)**

There has been no change in 2023 to 2024 in the score for this metric in 2024/2025 we will continue to look at the reasons why disabled staff may feel pressure to come to work when they are not well enough, this will include:

- Review of some aspects of our managing sickness absence policy
- Holding a workshop to support this review including key stakeholders
- Doing a deep dive on reasons for staff being away from work due to ill health

### **Opportunities for Career Progression and the way the organisation values Disabled Staff's Work (WDES Metrics 5 and 7 )**

There has been a 2-percentage point worsening in respect to the percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion. This does appear to be at odds with our workforce data in relation to staff appointed from shortlisting and the percentage of staff disabled staff in roles at most levels across the organisation to Board level apart from bands 8c – 9 in clinical roles. We will work with our staff network to explore this area.

We have also noted that there is a one percentage point worsening in the percentage of disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their organisation values their work this could be aligned to the results we are seeing for the above metric, so we plan to consider these two areas together.

### **Reasonable Adjustments (WDES Metric 8)**

We have progressed a detailed programme of work to improve staff access to practical adjustments in 2023/2024. This has not yet led to a large improvement in our 2023 staff survey results, but we anticipate we will see improvement in the medium term. Between 2022 and 2023 there was a 1 percentage point improvement.

In 2024/2025 we will.

- Mainstream our centralised cost centre and budget that was piloted in 2023/2024 and our centralised Reasonable Adjustments process
- Work with our procurement and Information technology colleagues to develop new agreed processes for ordering specialist items and equipment.

- Including topics around Disability in our Equality Diversity and Inclusion Learning and Sharing Forum programme for 2024/2025
- Deliver Phase two of our work which is focus on improving knowledge and understanding for managers and colleagues of disability and reasonable adjustments
- Complete development of our managers guidance

### **Action to Facilitate the Voices of Disabled Staff in our Organisation (Metric 9b)**

Although we have taken steps to improve the voice and influence of disabled staff, we recognise that our staff survey results indicate that disabled staff have a much poorer experience in the workplace than non-disabled colleagues. Our Disabled Staff Network continues to meet regularly,

In 2023/2024 we have established a chairs of the staff network policy group the chairs have been involved in a detailed review of policies including:

The Disabled Staff Policy and  
Equity in the Workplace policy

We reported in our 2023 report that we planned to appoint a project lead to undertake a focused piece of work with staff in bands 2 to 5, in patient facing roles, collaborating with them to look at creative ways of improving access to our wellbeing offers in particular for staff who may be more vulnerable to health inequalities including disabled staff. We have progressed this plan and the project has already identified some key areas for improvement we are moving into phase 2 at the time of this report which involves piloting some of the ideas that have emerged through the first part of the project which involved on line and face to face engagement.

We also reported that In 2023/2024 we also planned to hold our first Staff Networks conference this happened and as planned through collaboration between all of our staff networks members of the Disabled Staff network presented in key areas such as a presentation around neurodivergence and an interactive session on microaggressions developed and presented by members of the Staff Network Groups. This was really well

received and evaluated, and we plan to look at how this can be developed into a resource for wider use in training and development.

Our digital stories have now been used in leadership training delivered to over 90 people in the organisation.

### 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. The overall percentage of disabled people in the organisation in 2024 was 10.8% before rounding.

The charts below show three areas:

- Difference (%) total Board vs overall workforce (Figure 6)
- Difference (%) Voting membership of the Board vs overall workforce (figure 7)
- Difference (%) Executive membership of the Board vs Overall Workforce (figure 8)

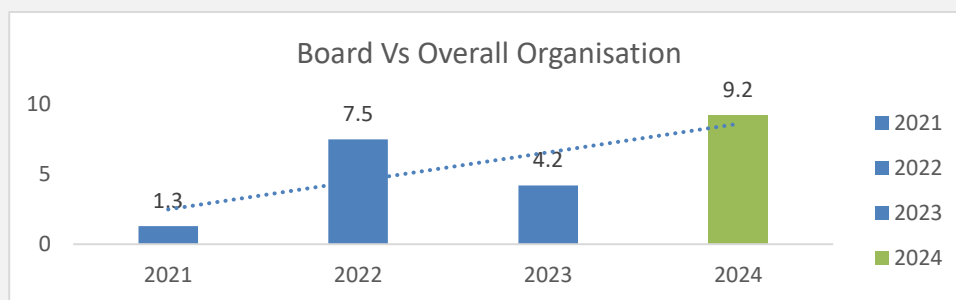


Figure 6

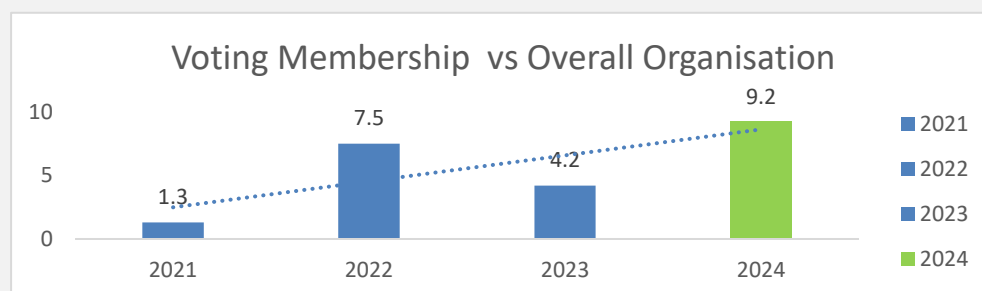


Figure 7

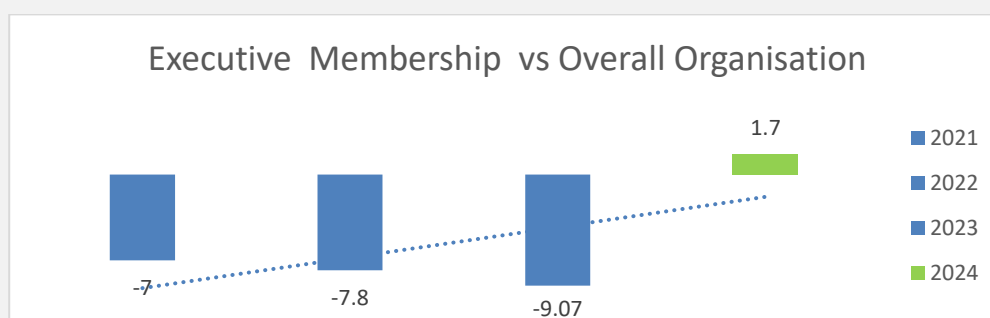


Figure 8

All three areas show a positive upward trend in favour of disabled Board membership.

## Progress - Priority Areas identified in 2023

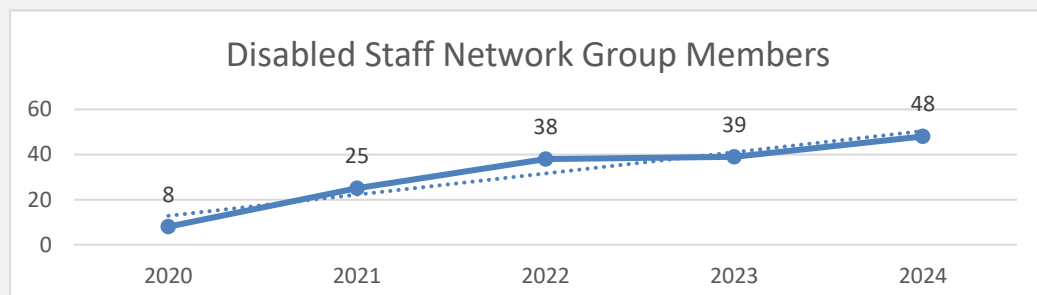
In 2023 we progressed action to support our priority areas

### Priority One - Improving Access to Adjustments

- We piloted use of a new central costs centre for Reasonable Adjustments
- We establish a central process for ordering Equipment and software
- We made some progress on establishing an operating procedure for Access to Work
- We published managers Guidance on Providing (practical) Reasonable Adjustments
- We supported a refresh of the Recruitment and Selection training for Managers
- We provided Access to Work Training for Managers and Administrators

### Priority Two - Increasing membership and Involvement in the Disabled Staff Network

- We worked with the Staff Network to look at how to encourage increase membership between 2023 and 2024 membership increased from 39 members to 48 members.



- The Disabled Staff Network was involved in planning and delivery of our first Staff Networks Event in March 2024

### Priority Three - Voice and Influence

- We collaborated with the disabled staff network to review the Disabled Staff Policy
- Implement learning from the charitable trust project to look at engagement of Band 3 to 5 staff in patient facing areas

### Priority Four - Improve Disability recording for Staff

- We worked with the medical directorate to improve recoding of disability of trainees however the impact of this has been limited in between 2023 to 2024.
- We worked with the Workforce Information team to improve not known which has shown some improvement in 2023/2024.

### Priority Fiver Collaboration

- We worked with the regional Workplace Adjustments Group to Develop a Toolkit
- We aimed to focus on collaboration to explore why staff feel they have to come to work when not well enough, and work with the new wellbeing OD lead to explore experience and identity further action unfortunately we did not achieve as much progress as we intended in this area in 2023/2024