

Stockport NHS Foundation Trust Workforce Disability Equality Standard (WDES) Report 2022



Introduction

The Workforce Disability Equality Standard (WDES) is a set of ten specific measures (metrics) which enables NHS organisations to compare the workplace and career experiences of Disabled and non-disabled staff. NHS trusts use the metrics data to develop and publish an action plan. Year on year comparison enables trusts to demonstrate progress against the indicators of disability equality.

The WDES is important, because research shows that a motivated, included and valued workforce helps to deliver high quality patient care, increased patient satisfaction and improved patient safety.

The WDES enables NHS organisations to better understand the experiences of their Disabled staff and supports positive change for all existing employees by creating a more inclusive environment for Disabled people working and seeking employment in the NHS.

This report summarises the Trust position, and progress against the 10 indicators of the NHS Workforce Disability Equality Standard. It is recognised that this report captures a point in time and whilst there have been some positive improvements we recognise that there is still significant work to do in improving the experience of our staff who have a disability.

The WDES Indicators



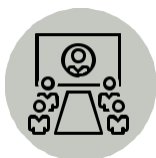
Workforce indicators

Indicator	Descriptor
1	Percentage of staff in each of the AfC Bands 1-9, Medical and Dental and VSM staff groups compared by: Non-Clinical staff & Clinical staff
2	Relative likelihood of staff being appointed from shortlisting across all posts
3	Relative likelihood of Disabled staff compared to non-disabled staff entering the formal capability process, as measured by entry into the formal capability procedure.



National NHS Staff Survey indicators

Indicator	Descriptor
4	a) Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from: i. Patients/Service users, their relatives or other members of the public ii. Managers iii. Other colleagues 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.
5	Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.
6	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.
7	Percentage of Disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their organisation values their work.
8	Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work.
9	a) The staff engagement score for Disabled staff, compared to non-disabled staff. b) Has your Trust taken action to facilitate the voices of Disabled staff in your organisation to be heard? (Yes) or (No)



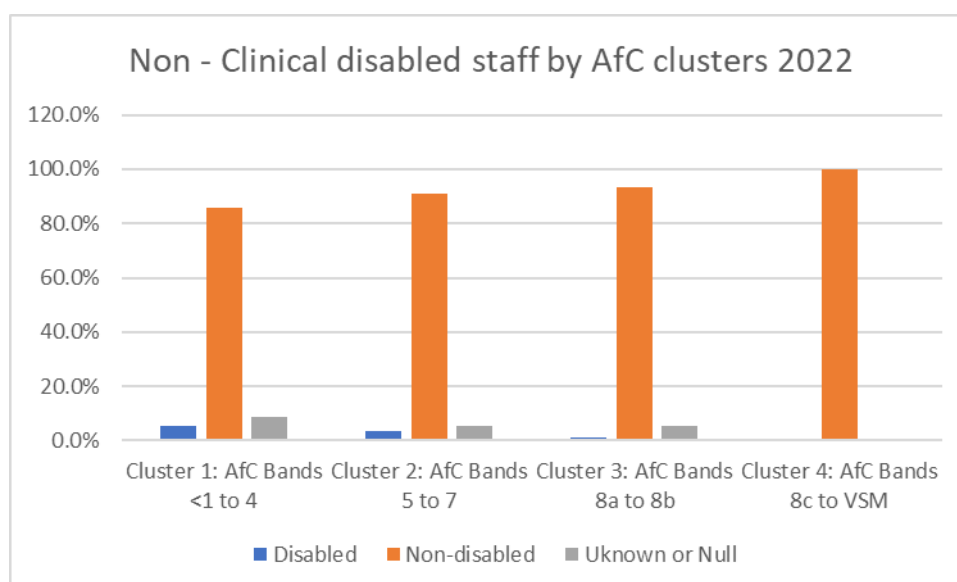
Board representation indicator

Indicator	Descriptor
10	Percentage difference between the organisation's Board voting membership and its organisation's overall workforce, disaggregated: <ul style="list-style-type: none"> • By voting membership of the Board. • By Executive membership of the Board

Reporting against the WDES Indicators

Indicator 1: Percentage of staff in each of the AfC Bands 1-9, Medical and Dental and VSM staff groups compared by: Non-Clinical staff & Clinical staff

Figure 1 shows the distribution of disabled/non-disabled staff across the AfC pay bands in the non-clinical workforce for 2022.



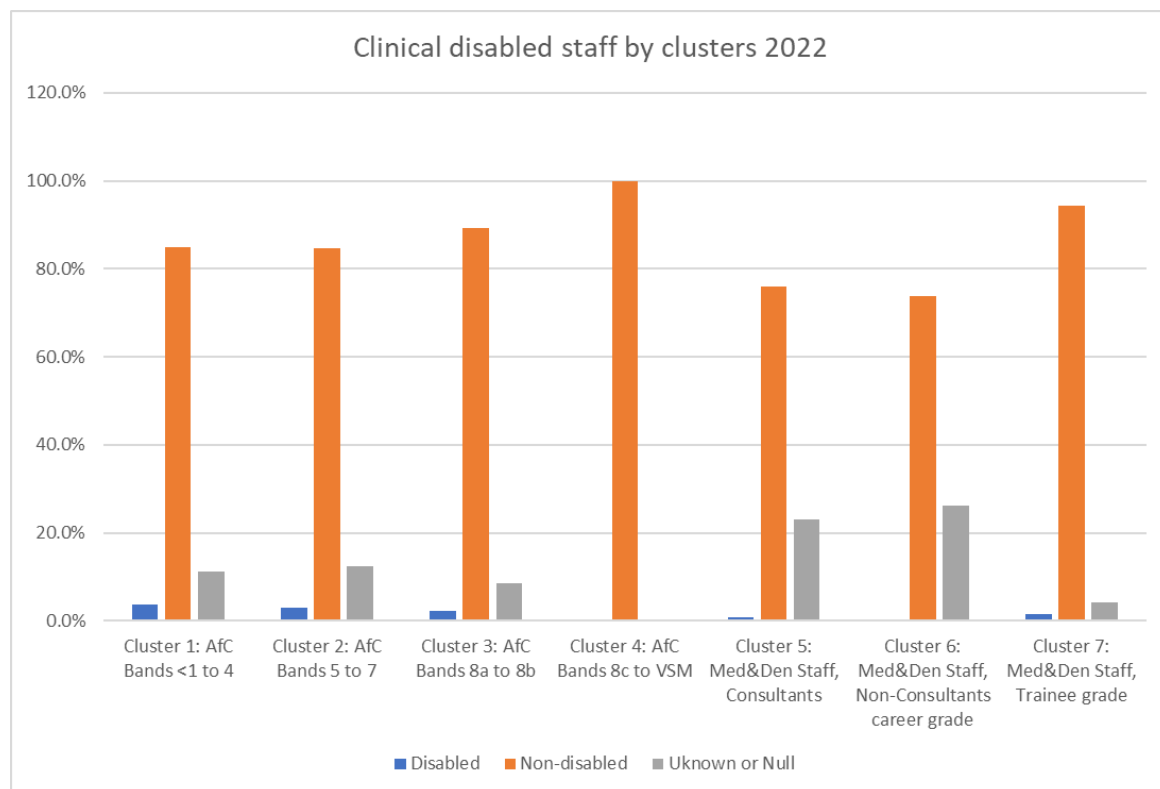
2022 data	Cluster 1: AfC Bands <1 to 4	Cluster 2: AfC Bands 5 to 7	Cluster 3: AfC Bands 8a to 8b	Cluster 4: AfC Bands 8c to VSM
Disabled	5.2%	3.5%	1.4%	0.0%
Non-disabled	85.9%	91.2%	93.2%	100.0%
Unknown or Null	8.8%	5.3%	5.4%	0.0%

Summary analysis shows that:

- The total workforce representation of disabled staff in 2021 was 3.2% and in 2022 was 3.4%
- There has been an improvement in the representation of disabled staff in Band clusters 1 as compared to 2021.
- There has been a <0.2% decrease in representation of disabled staff in Band clusters 3 and 4 as compared to 2021

- There are no disabled within Band cluster 4, down from 3.2% in 2021, but in absolute terms this is a headcount reduction of 2.
- 8.0% of Non-clinical staff have no data in the disability field of the Trust staff data system, the Electronic Staff Record (ESR.)

Figure 2 shows the distribution of disabled/non-disabled staff across the AfC pay bands and the medical grades, in the clinical workforce for 2022.



	Cluster 1: AfC Bands <1 to 4	Cluster 2: AfC Bands 5 to 7	Cluster 3: AfC Bands 8a to 8b	Cluster 4: AfC Bands 8c to VSM	Cluster 5: Med&Den Staff, Consultants	Cluster 6: Med&Den Staff, Non-Consultants career grade	Cluster 7: Med&Den Staff, Trainee grade
2022 data							
Disabled	3.7%	3.0%	2.2%	0.0%	0.90%	0.00%	1.44%
Non-disabled	85.0%	84.6%	89.2%	100.0%	76.02%	73.91%	94.24%
Unknown or Null	11.3%	12.4%	8.6%	0.0%	23.08%	26.09%	4.32%

Summary analysis shows that:

- Percentage of clinical disabled staff in every band is lower than the Trust disabled staff average of 3.4% apart from Band cluster 1.
- All other Band clusters have remained either static or minor change since 2021
- 11.8% non clinical and 17.0% of Medical and Dental staff have no data recorded in the disability field of the Trust staff data system, the Electronic Staff Record (ESR.)

Indicator 2

	Relative likelihood in 2021	Relative likelihood in 2022	Difference +/-
Relative likelihood of disabled staff being appointed from shortlisting across all posts	1.33	0.95	-0.38

There has been an improvement in the relative likelihood of disabled applicants being appointed from shortlisting as compared to non disabled applicants, with disabled applicants slightly more likely to be appointed to the post.

Indicator 3

	Relative likelihood in 2021	Relative likelihood in 2022	Difference +/-
Relative likelihood of Disabled staff compared to non-disabled staff entering the formal capability process, as measured by entry into the formal capability procedure	1.22	1.00	-0.22

There was an improvement in the relative likelihood of staff entering the formal capability process throughout the 2022 reporting period, with parity now achieved.

Indicator 4

a) Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from:

- i. Patients/Service users, their relatives or other members of the public
- ii. Managers
- iii. Other colleagues

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.

	Disabled staff	Non-disabled staff
Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months	28.7%	21.9%
Percentage of staff experiencing harassment, bullying or abuse from manager in last 12 months	16.6%	9.1%
Percentage of staff experiencing harassment, bullying or abuse from other colleagues in last 12 months	22.7%	14.0%
Percentage of staff saying that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it	43.7%	49.2%

There has been an overall decline in staff experiencing harassment, bullying or abuse although for staff with disabilities the figure remains significantly higher than colleagues without a disability.

Indicator 5

	Disabled staff	Non-disabled staff
Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.	55.4%	58.8%

There has been a marginal increase with both disabled and non-disabled staff believing that our Trust acts fairly in terms of career progression.

Indicator 6

	Disabled staff	Non-disabled staff
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.	33.9%	21.3%

There has been an increase of 0.3% for disabled staff experiencing pressure from line managers, whereas there has been a 3.7% decrease reported by non disabled staff from the previous year.

Indicator 7

	Disabled staff	Non-disabled staff
Percentage of Disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their organisation values their work.	30.0%	41.6%

There has been an overall decrease from 32.2% to 30.0% for our disabled staff and 43.9% to 41.6% for our non-disabled staff saying they are satisfied with the extent to which their organisation values their work.

Indicator 8

	Disabled staff
Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work.	70.8%

There has been a 1% decrease in disabled staff stating adequate adjustments have been made since the previous reporting year.

Indicator 9

- 9a) The staff engagement score for Disabled staff, compared to non-disabled staff.
 9b) Has your Trust taken action to facilitate the voices of Disabled staff in your organisation to be heard? (Yes) or (No)

9a	Disabled staff	Non-disabled staff
Staff Engagement Scores (1-10) of Disabled Staff v Non-Disabled Staff	6.4	6.9

The staff survey engagement scores show that overall, disabled staff are less engaged than non-disabled colleagues, this remains static from previous reporting year.

9b) Has your Trust taken action to facilitate the voices of Disabled staff in your organisation to be heard? **Yes**

Our Trust has relaunched our Disability and Wellness Network (DAWN) to ensure our staff living with disability and long-term conditions are represented and voices of staff to be heard and meet bi-monthly.

In collaboration, over the last 12 months our workstreams have included

- Realigning the groups workstream priorities to support the WDES action plan
- To strengthen reporting lines to EDI Steering Group and Performance in People Performance Committees (PPC)
- Delivery of Disability awareness training for managers
- Values into Action – delivery of sessions for all staff groups providing information sharing sessions aimed at developing understanding between staff with protected characteristics and those that do not.
- Staff with disabilities were invited to share their lived experiences in inform the work streams of Values into Action group.
- People Pulse, our quarterly survey that collects data around protected characteristics to use in organisational development.
- Attendance and lived learning sharing at Disability Summit 2021
- Working with our community to deliver Disability History Month 2021 to provide in house and community based events, learning set and engagement opportunities for staff, patients, allies, families and carers.

Indicator 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.

	Disabled	Not Disabled	Not Disclosed /Unknown
Board Membership	0	17	0
Of which;	0	15	0
Voting Board Members			
Non-voting Board Members	0	2	0
Board Membership	0	17	0
Of which;			
Exec Board Members	0	8	0

Non-Exec Board Members	0	9	0
Number of staff in overall workforce	199	4941	644
Overall Workforce % by disability	3.4%	85.4%	11.1%
Total Board members by disability (%)	0%	100%	0%
Difference Board membership to overall workforce	-3.4%	14.6%	-11.1%

There are currently no members of the Board who identify as disabled, or have a Long-Term Condition and no members of the board who have not disclosed within the ESR record.

Action Planning

The Equality, Diversity and Inclusion Strategy 2022-2025 looks to address the issues identified by the data in this report. The following table extracts some of the key actions contained within the strategy that addresses the issues identified.

What we will do:	How we will know we have had impact:
We will build relationships with local organisations supporting people with protected characteristics into employment to ensure our vacancies reach a diverse audience, with a particular focus on disability/Long Term Condition (LTC)	We will see an increase in the number of people shortlisted/appointed from people with protected characteristics and individuals with disabilities /LTC
We will undertake mandatory implicit and association bias awareness training as part of the recruitment training for all managers with responsibility for current and future recruitment and selection	Increase in job offers made to people with protected characteristics
We will work with managers to reduce barriers into employment by reviewing and drawing up role descriptions which are more accessible and user friendly and therefore targeted to a wider audience. To facilitate applications from our local population/community We will work with 'Pure Innovations', those on apprenticeships and Guaranteed Interview schemes to ensure people with protected characteristics can transition to employment following initial work experience and training programmes.	Increase in shortlisting and job offers made to people with protected characteristics
We will work closely with our leadership teams to reinforce flexible working opportunities to remove barriers of access to employment for people with protected characteristics	We will see an increase in flexible working across our workforce

<p>We will ensure reasonable adjustments are in place, insofar as operational requirements allow for staff with disabilities / LTC to maximise the time they are available to perform, without feeling pressured to attend work if unwell.</p> <p>Where operational requirements mean staff must attend site, all reasonable adjustments shall be made to assist our staff in performing their duties.</p> <p>Training and support to line managers on these adjustments to be provided, with a particular focus on clinical environments</p>	<p>We will see a reduction in lost working hours from staff with disabilities / LTC and a further reduction in these staff being taken through the capability process</p>
<p>We will re-establish the Reciprocal Mentoring Scheme for BAME and Disabled Staff to support making applications for leadership roles</p>	<p>We will see an increase in internal successful applications for senior roles</p>
<p>Introduce diverse interview panels for selection processes for all Bands 8A and above. To manage the potential for any unconscious bias in recruitment processes.</p>	<p>We will see an increase in the success rates of people with protected characteristics applying for jobs successfully at senior levels</p>
<p>We will relaunch the Staff Networks, Equality Champions, and Allies network. The Board Members shall be nominated as Sponsors and one member aligned to each group.</p>	<p>Increased membership to improve staff experience</p>
<p>We will embed EDI capability and competence for inclusive leadership and management practice into all current and future leadership and management development programmes for all managerial staff and team leaders</p>	<p>Lower reporting of instances of Bullying, Harassment, Abuse and Discrimination</p>
<p>We will incorporate the 'Hate Crime and Respect' campaign that is currently focussed on reducing abuse towards staff from patients and visitors, to extend this internally to drive a zero-tolerance culture. This shall be included in staff / team briefings and other literature available to all staff and linked to FTSU process</p>	<p>Greater incident reporting to FTSU and an overall reduction in staff reporting Bullying Harassment and Abuse in the NSS over the three-year period.</p>

Conclusions

The data from this year's WDES submission shows that we have some minor improvements, leading to disabled staff being more likely to be appointed from shortlisting, achieving parity between disabled and non disabled staff entering capability processes.

Conversely, it should be noted whilst there have been some improvements the Trust recognises that there is still a significant amount of work to be undertaken to improve its position.

The 2022 data necessitates significant improvements, with representation of disabled staff far below the local populous across all grades and significantly so in leadership roles. The disparity between disabled and non-disabled colleagues experiencing bullying, harassment, abuse and discrimination both within our organisation and from the community we serve must also be addressed.

As aforementioned, this year we introduced the ED&I strategy 2022-2025 as our platform drive to change. As a consequence of this report we will review and reconfigure action plans to provide a targeted accelerated programme to expedite the outcomes of EDI Strategy objectives in recruitment and culture, these are outlined in the above table.

The report will be shared with the Disability Staff Network and we will engage with the network on the development of the actions required and the revision of the EDI Strategy action plan. This report will be published on the Trust website and intranet page.