

Equality Diversity and Inclusion Implementation Committee

May 2019

Workforce Disability Equality Standard 1 April 2019 – 31 March 2020

Report Prepared By:	Tina Daniels		
Contact Details:	57375		
Date of Report:	May 2019		
Purpose of Report:			
<p>To monitor data about the Trust's staff to ensure recruitment, promotion, and career development processes and procedures are fair to all, particularly towards staff who have a disability or long term health condition.</p>			
1 <input type="checkbox"/>	2 <input checked="" type="checkbox"/>	3 <input type="checkbox"/>	
For information	For Discussion	For Approval	
Recommendations:			
<p>1. Continue monitoring and reporting to identify any ongoing trends or problems for disabled staff in accessing training or promotional opportunities; 2. Promote local, regional and national training schemes for disabled staff; 3. Support disabled staff to attend training schemes.</p>			
Sensitivity Level:			
1 <input type="checkbox"/>	2 <input checked="" type="checkbox"/>	3 <input type="checkbox"/>	
Not sensitive: For immediate publication	Sensitive in part: Consider redaction prior to release	Wholly sensitive: Consider applicable exemption	

Purpose of paper

To provide an annual report which can be benchmarked against the Trust's own work to promote career opportunities for staff who have a long term disability or long term health condition, and with that of other Trusts both locally and nationally.

Background

This is an NHS Employers initiative to assist Trust's in identifying problems in processes and procedures in the career progression of staff who have a long term health condition or disability across all levels of the organisation.

Current position

This is the first year in which the workforce Disability Equality Standard has been implemented. The report is based on data from ESR as at the 31 March 2019. NHS England will ensure reporting is completed and their templates populated by the 1st August 2019, in order for them to produce a national report.

Key issues

- Representation at VSM, Board and Non-Executive levels not clear due to poor data.
- Low return rate for the staff survey may bring into question the reliability of the results.

Actions

- Monitor and compare reports to identify any ongoing problems for career progression or accessing training opportunities for our staff who have a long term health condition or disability.
- Make reasonable adjustments in order to support the above staff group stay in work and progress their careers.

Recommendations

- Continue monitoring and reporting to identify any ongoing trends or problems for staff with a long term health condition or disability in accessing training or promotional opportunities;
- Promote local, regional and national training schemes for staff with a long term health condition or disability;
- Support staff with a long term health condition or disability to attend training programmes/schemes.
- Note the contents of this report
- Receive an update on the Action Plan and full report in May 2020

Workforce Disability Equality Standard

REPORTING TEMPLATE

Name of provider organisation

Blackpool Teaching Hospitals

Date of report: May 2019

Name and title of Board lead for the Workforce Disability Equality Standard

Marie Thompson Director of Nursing and Quality

Name and contact details of lead manager compiling this report

Tina Daniels Equality and Diversity Lead 01253 957375

Names of commissioners this report has been sent to

Blackpool CCG; Fylde and Wyre CCG; North Lancashire CCG

Name and contact details of co-ordinating commissioner this report has been sent to

NHS England

Unique URL link on which this report will be found (to be added after submission)

<http://www.bfwh.nhs.uk/about/equality/default.asp>

This report has been signed off by on behalf of the Board on (insert name and date)

Report on the WDES indicators

1. Background narrative

a. Any issues of completeness of data

The Trust hosts Trinity Hospice and the North West Leadership Academy on VPD 382 which are excluded from the Trust data that follows as these are entirely separate organisations to BTH. The Trust endeavours to promote and develop staff surveys to reflect indicators 4 - 8 year on year.

b. Any matters relating to reliability of comparisons with previous years

None identified at this time

2. Total numbers of staff

a. Employed within this organisation at the date of the report

6719

b. Proportion of disabled staff employed within this organisation at the date of the report

2.5%

3. Self-Reporting

a. The proportion of total staff who have self-reported their disability

Data relating to disability is collected as part of a supplementary and non-compulsory page during the recruitment process, so this could be assumed as being all 'self-reported'.

b. Have any steps been taken in the last reporting period to improve the level of self-reporting by disability?

We continue to actively roll out the ESR self service module allowing individuals to access and amend their own record and so improving our self-reporting. This also gives staff that have worked for the Trust for a long period of time that may not reported initially the opportunity to add in their details.

c. Are any steps planned during the current reporting period to improve the level of self-reporting by disability?

We will continue to run the self-service awareness and advice sessions to improve access to this for all employees.

4. Workforce data

a. What period does the organisation's workforce data refer to?

1st April 2018 to 31st March 2019 or as at 31st March 2019 for data extracted from ESR.

Workforce Metrics				
For the following 3 workforce metrics, <u>compare the data for Disabled and non-disabled staff.</u>				
Indicator	Data for reporting year	Data for previous year	Narrative – the implications of the data and any additional background explanatory narrative	Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective
<p>1. Percentage of staff in AfC pay bands or medical and dental subgroups and VSM (including executive Board members) compared with the percentage of staff in the overall workforce.</p> <p>Organisations should undertake this calculation separately for clinical and non-clinical staff.</p> <p>Note: Definitions for these categories are based on Electronic Staff Record occupation codes with the exception of medical and dental staff, which are based upon grade codes.</p>	<p>2018/19 Overall Workforce 2.5%</p> <p>Clinical Bands 1-4 Disabled 2.6% non-disabled 76.1%</p> <p>Bands 5-7 Disabled 3.0% non-disabled 71.0%</p> <p>Bands 8a & 8b Disabled 1.0% Non-Disabled 64.6%</p> <p>Band 8c, 8d & VSM (inc Execs) Disabled 6.7% Non-Disabled 60.0%</p> <p>Med&Dental Cluster</p>	<p>This is the first year of reporting so no comparative data will be available until April 2020</p>	<p>The largest number of disabled staff are in AfC Bands 8c, 8d and VSM including Execs. The percentage of disabled staff in non-clinical bands 8c, 8d, 9 and VSM level, including Executives, is 0%, with 45.2% of VSM/Execs not disclosing their details.</p>	<ol style="list-style-type: none"> 1. Consider stretch targets for disabled staff representation at Bands 8a, 8b-9 to address any disproportion. 2. Consider reverse mentoring scheme i.e. disabled staff mentors a member of the senior team. 3. Succession planning and corresponding processes have been embedded into appraisals for all staff which includes positive action for all board and senior positions. 4. Talent monitoring has been commenced for staff at Bands 8a to identify potential career advancement to Executive Directors and VSM.

	<p>5 consultants Disabled 0.4% Non- Disabled 55.2%</p> <p>Cluster 6 Non consultant career grade Disabled 0.6% Non- Disabled 54.1%</p> <p>Cluster 7 Medical and dental trainee grades Disabled 1.4% Non- Disabled 20.8%</p> <p>Non-Clinical Bands 1-4 Disabled 2.6% Non- Disabled 68.9%</p> <p>Bands 5-7 Disabled 2.0% Non- Disabled 69.8%</p> <p>Bands 8a & 8b Disabled 1.2% Non- Disabled 72.6%</p>			
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	Bands 8c, 9d, 9 & VSM (inc Execs) Disabled 0.0% Non-Disabled 45.2%			
<p>2. Relative likelihood of Disabled staff compared to that of non-disabled staff being appointed from shortlisting across all posts.</p> <p>Note: i) This refers to both external and internal posts ii) If your organisation implements a guaranteed interview scheme, the data may not be comparable with organisations that do not operate such a scheme. This information will be collected on the WDES return form to ensure comparability between organisations.</p>	<p>2018/19 S/LIST</p> <p>Disabled 273 Non-Disabled 5505</p> <p>APPTD</p> <p>Disabled 37 Non-Disabled 973</p> <p>RATIO</p> <p>Disabled 0.13 Non-Disabled 0.17</p>	<p>This is the first year of reporting so no comparative data will be available until April 2020</p>	<p>Relative likelihood of disabled staff being appointed from shortlisting compared to non-disabled is 3.80%.</p>	<ol style="list-style-type: none"> 1. Auditing will be linked to our quarterly E&D reports and any changes will be reported and actions taken. 2. Review reasons for non-appointment/appointment of Disabled applicants 3. Investigate if any difference between professions in relation to the success of Disabled applicants. 4. Identify if there are any barriers preventing Disabled applicants attending interview. 5. E&D training, to include unconscious bias for interview panels. 6. Link in with engagement events with local Disabled communities to encourage applications. 7. Review wording on adverts for Band 8-9 and VSM to include clear statement encouraging applicants with a disability to apply. 8. Liaise with Project Search Team at Blackpool Council to support placements for people with a LD gain permanent employment.
<p>3. Relative likelihood of Disabled staff compared to</p>	<p>2018/19 W/FORCE</p>	<p>This is the first year of</p>	<p>There were 142 Formal disciplinary cases in 2018/19 (90 Non-disabled</p>	<p>As this is the first year of reporting there is no evidence to suggest that Disabled employees</p>

<p>non-disabled staff entering the formal disciplinary process, as measured by entry into a formal capability investigation*</p> <p>Note: this indicator will be based on data from a two year rolling average of the current year and the previous year.</p> <p>This metric is voluntary in year 1</p>	<p>Total number of staff 142 Disabled 5 Non-Disabled 90</p> <p>Likelihood of Disabled staff entering capability process is 0.35%</p> <p>Likelihood of non-disabled staff entering capability process is 63.4%</p>	<p>reporting so no comparative data will be available until April 2020</p>	<p>and 5 Disabled; 3 preferred not to say and 44 not declared).</p> <p>There is no indication that Disabled employees are more likely to enter the capability process than non-disabled employees.</p>	<p>are more likely to enter the disciplinary process than non-disabled employees.</p> <p>Capability cases will continue to be monitored as part of the HR/employee relations monitoring process.</p>
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National NHS Staff Survey Metrics				
For each of the following 4 staff survey Metrics, <u>compare the responses for Disabled and non-disabled staff</u>				
Indicator	Data for reporting year	Data for previous year	Narrative – the implications of the data and any additional background explanatory narrative	Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective
<p>4a. (Q13a-c) Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from:</p> <p>a) Patients/Service</p>	<p>Disabled =</p>	<p>N/A This is the first year of reporting so no comparative data will be available</p>	<p>This is the first year in which the workforce Disability Equality Standard has been implemented. The report is based on the data from ESR as at the 31 March 2019.</p>	<ol style="list-style-type: none"> 1. This will be discussed at the 'Great Place to Work Group' meeting and monitored via the action plan 2. Additional diagnostics will be undertaken to identify factors leading to these results and subsequent actions identified to address these issues

<p>users, their relatives or other members of the public</p> <p>b) Managers</p> <p>c) Other colleagues</p> <p>4b) (Q13d) 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.</p>	<p>33% (n 385)</p> <p>Non-Disabled = 26% (n 1,715)</p> <p>Disabled = 20% (n 378)</p> <p>Non-Disabled = 12% (n 1,681)</p> <p>Disabled = 29% (n 376)</p> <p>Non-disabled = 19% (n 1,681)</p> <p>Disabled = 52% (n 182)</p> <p>Non-disabled = 47% (n 592)</p>	<p>until April 2020</p>		<ol style="list-style-type: none"> 1. Further analysis of the data will be undertaken to establish where issues are occurring 2. A breakdown of the type of discrimination will also be undertaken
<p>5. (Q14) Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.</p>	<p>Disabled= 82% (n 254)</p> <p>Non-disabled = 85% (n 1,161)</p>	<p>N/A This is the first year of reporting so no comparative data will be available until April</p>	<p>Despite 82% disabled staff stating there is no equal opportunities for career progression, this is figure is low when compared to the overall number of staff 6719 (3.78%).</p>	<ol style="list-style-type: none"> 1. Actions to ensure that a relative proportion of staff attending the Senior Collaborative Leadership Programme have a disability are in place. Participants on this programme are those identified in the Trust's succession planning and talent management process

		2020		
6. (Q11e) 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.	Disabled = 30% (n 284) Non-disabled = 22% (n 917)	N/A This is the first year of reporting so no comparative data will be available until April 2020	From the figures disclosed roughly a third of disabled staff feel pressured to come into work when feeling unwell. Compared to the overall number of staff 6719 this figure is low.	Discuss at Great Place to Work Have OH involvement to find mechanisms to help staff Link with Staff ED&I Ambassadors to promote awareness of existing support for staff including reasonable adjustments and Access to Work
7. (Q5f) Percentage of Disabled staff compared to non-disabled saying that they are satisfied with the extent to which their organisation values their work.	Disabled = 39% (n 383) Non-disabled = 49% (n 1,717)	N/A This is the first year of reporting so no comparative data will be available until April 2020	Of those staff declaring a disability just over a third felt they were valued by the organisation. Work is required to dis-spell biases about the ability of people with disabilities.	Monitor this metric Promote discussions at Great Place to Work meetings Include discussions at appraisals about support available
The following NHS Staff Survey Metric only includes the responses of Disabled staff				
8. (Q28b) Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work.	Disabled = 78% (n 235)	N/A This is the first year of reporting so no comparative data will be available until April 2020	A relatively high number of staff have had adjustments made to allow them to continue in work. More work is required to improve this figure.	Continue to monitor this metric. Promote Access to Work and other support mechanisms available. Have staff champions to talk about their lived experiences within work.
For part a) of the following Metric, compare the staff engagement scores for disabled, non-disabled staff and the overall trust's score For part b) add evidence to the trust's WDES Annual Report				

<p>9. a) The staff engagement score for Disabled staff, compared to non-disabled staff and the overall engagement score for the organisation.</p>	<p>Disabled = 7% (n 385)</p> <p>Non-disabled = 7% (n 1,725)</p> <p>Overall = 7% (n 2,297)</p>	<p>N/A This is the first year of reporting so no comparative data will be available until April 2020</p>	<p>From the figures disclosed there appears to be little difference in staff engagement across the disabled and non-disabled groups,</p>	
<p>b) Has your trust taken action to facilitate the voices of Disabled staff in your organisation to be heard? (yes) or (no)</p>			<p>The Trust has a Staff ED&I Ambassadors Network which is inclusive of all protected characteristics. Ambassadors can support and advise staff with a disability but also bring concerns to the ED&I Ambassador meetings.</p>	
<p>Note: For your trust's response to b) If yes, please provide at least one practical example of current action being taken in the relevant section of your WDES annual report. If no, please include what action is planned to address this gap in our WDES annual report. Examples are listed in the WDES technical guidance.</p>			<p>One concern is the inconsistent approach given to people with e.g. Cancer to attend appointments, and require time to travel to and from their appointments. A further concern is Finance not authorising payments for equipment to complete a reasonable adjustment in accordance with Access to Work recommendations.</p>	

Board representation Metric
For this Metric, compare the difference for Disabled and non-disabled staff

<p>10. Percentage difference between the organisation's Board voting membership and its organisation's overall workforce, disaggregated:</p> <ul style="list-style-type: none"> • By voting membership of the Board • By Executive membership of the Board 	<p>Proportion of staff disabled 2.5%</p> <p>Proportion of board disabled 0.0%</p>	<p>This is the first year of reporting so no comparative data will be available until April 2020</p>		<ol style="list-style-type: none"> 1. Review Non-Exec terms of office or when appointing new members taking note of the lack of diversity at senior members. 2. Take Positive Action to encourage diverse applicants and declarations of status.
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Report on the WDES indicators, continued

6. Are there any other factors or data which should be taken into consideration in assessing progress?

Consideration should be given to the data for the disabled communities of the Fylde Coast population which in total is approximately 142,580 of which 12.59% are disabled. As the current figures stand, the Trust appears under-representative of the community it serves. However, it must be remembered that only 3% of staff declare a disability on the ESR system compared with the Staff Survey which is 18%.

7. Organisations should produce a detailed WDES Action Plan, agreed by its Board. Such a Plan would normally elaborate on the actions summarised throughout the document, setting out the next steps with milestones for expected progress against the WDES indicators. It may also identify the links with other work streams agreed at Board level, such as EDS2. You are asked to attach the WDES Action Plan or provide a link to it.

www.bfwh.nhs.uk/wp-content/uploads/2019/06/WDES-Indictators-Action-Plan-2019-20.pdf

The Trust's Staff EDS2 consultation and grading event was held in March 2019, any actions arising from the grading will be reviewed alongside the WDES recommendations to ensure proposed actions are complementary, relevant and workable.