

REPORT TO PEOPLE, CULTURE & DEVELOPMENT COMMITTEE

Enclosure No:

Date of Meeting:	03/09/20		
Title of Report:	Workforce Disability Equality Standard (WDES) First Year Report and Admin Plan		
Presented by:	Lesley Faux, Diversity & Inclusion Lead		
Author:	Lesley Faux		
Executive Lead Name:	Shajeda Ahmed	Approved by Exec	<input type="checkbox"/>

Executive Summary:		Purpose of report	
<p>Similar to the Workforce Race Equality Standard (WRES), the Workforce Disability Equality Standard (WDES) is now mandatory for all NHS Trusts. This second WDES Trust report sets out the Trust's findings/progress against the 10 WDES indicators over 2019-20, along with our action plan for the current year.</p>		Approval	<input type="checkbox"/>
		Information	<input type="checkbox"/>
		Discussion	<input type="checkbox"/>
		Assurance	<input type="checkbox"/>
Seen at:	SLT <input type="checkbox"/> Execs <input type="checkbox"/>	Document Version No.	
Committee Approval / Review	<ul style="list-style-type: none"> • Quality Committee <input type="checkbox"/> • Finance & Resource Committee <input type="checkbox"/> • Audit Committee <input type="checkbox"/> • People, Culture & Development Committee <input checked="" type="checkbox"/> • Charitable Funds Committee <input type="checkbox"/> 		
Strategic Objectives (please indicate)	<ol style="list-style-type: none"> 1. To enhance service user and carer collaboration. <input type="checkbox"/> 2. To provide the highest quality, safe and effective services <input type="checkbox"/> 3. Inspire and implement innovation and research. <input type="checkbox"/> 4. Embed an open and learning culture that enables continual improvement. <input type="checkbox"/> 5. Attract, develop and retain the best people. <input checked="" type="checkbox"/> 6. Maximise and use our resources effectively. <input checked="" type="checkbox"/> 7. Take a lead role in partnership working and integration. <input type="checkbox"/> 		
Risk / legal implications: Risk Register Reference	<ul style="list-style-type: none"> • Annual WDES reporting forms part of the NHS Standard Contract since 2019-20. • Our WDES report and action plan each year are published on the Trust's website and data shared with NHS England and our lead commissioner 		
Resource Implications: Funding Source:	<p>Within existing resources N/A</p>		
Diversity & Inclusion Implications: (Assessment of issues connected to the Equality Act 'protected characteristics' and other equality groups). See wider D&I Guidance	<p>The WDES is specifically designed to support greater diversity and more positive inclusion experiences across NHS workforces, particularly in relation to staff with disabilities. As such, a positive effect is intended, such as improved access to employment and promotion opportunities, better workplace experiences for staff with disabilities and more diverse workforce with regard to disability and neurodiversity. This ultimately leads to make diverse and inclusive experiences for our service users also.</p>		
STP Alignment / Implications:	<p>All NHS Trusts are required to participate in the WDES process. There are opportunities for the alignment of activity under the WDES across the ICS Trusts (to be explored by the EDI Network).</p>		
Recommendations:	<ol style="list-style-type: none"> 1. It is recommended that the People and Culture Development Committee approve this report and associated action plan (collated at Appendix 5). 2. It is also recommended that Trust Senior Leaders demonstrate sustained and visible commitment to delivering on disabilities inclusion. This may include:- <ol style="list-style-type: none"> a) supporting our staffs networks and getting involved in developmental initiatives; b) positively demonstrating their commitment to disabilities equality and inclusion; and c) considering what support, development opportunities and training should be made available to staff at all levels to support the process of change towards outstanding inclusion for our colleagues with disability. 		
Version	Name/group	Date issued	

2020 Trust Workforce Disability Equality Standard (WDES) Report and Action Plan

What our WDES data says and
how we are responding to it



Date: September 2020
Author: Lesley Faux, Diversity & Inclusion Lead
Lead Director: Shajeda Ahmed, Director of Workforce, OD & Inclusion

Trust Workforce Disability Equality Standard (WDES) Report 2020

1.0 Introduction

1.1 This report sets out the Trust's data and response to the new Workforce Disability Equality Standard (WDES) in its second year of implementation. NHS organisations are expected to publish data for each of the metrics and use this information to develop local action plans to improve access to employment as well as the employment experiences of disabled staff. Year-to-year comparisons are anticipated to demonstrate progress and challenges for individual NHS employers.

1.2 Background

1.3 People with disabilities face considerable inequity in the workplace in the UK, and almost a third more likely to be unemployed (2018 data). Data from NHS national staff surveys suggests that employees with disabilities were:

- more likely to say they felt bullied by their manager
- more likely to say they felt pressured to work when unwell, and
- less likely to say their organisation acted fairly with regards to career progression

1.4 The WDES was launched from 2019 as part of the NHS response to these issues, designed to improve access to - and experience of - employment in the NHS by people with disabilities. Similar to the WRES, the WDES is a set of **ten specific measures** (Metrics) that will enable NHS organisations to compare the career and workplace experiences of disabled and non-disabled staff.

1.5 This report sets out the Trust's WDES progress in relation to the 10 WDES metrics in the second year of implementation, together with our action plan for 2020-21.

2.0 2020 WDES Reporting Requirements

2.1 All Trusts are required to adhere to the following WDES reporting requirements:-

1. Submission of Trust WDES template spreadsheet by 31st August 2019 – **Appendix 1 (complete)**
2. Submission of Trust Online Questionnaire by 31st August 2019 – **Appendix 2 (complete)**
3. Publishing of Trust WDES Report and Action plan on Trust website and sharing with lead commissioner by 30 September 2019 (i.e. **this report – following approval at PCDC and Trust Board**)

3. Trust Performance on 2020 WDES Metrics and proposed action

3.1 The Trust's performance in the first year of reporting against the WDES metrics is set out over the following pages, along with action to take place in 2019-20 to address identified areas for improvement.

Metric 1: Percentage of staff in AfC pay bands or medical and dental subgroups and very senior managers (including Executive Board members) compared with the percentage of staff in the overall workforce.

Our 2020 WDES workforce data (based on workforce headcount as at 31/03/20, bank staff excluded) is set out below. A more detailed breakdown is provided in Box 1 (next page) including split by clinical / non-clinical and different band groupings ('clusters').

(ESR data as at 31.03.20)	Headcount 2020	Percentage 2020	Headcount 2019	Percentage 2019
Disabled staff	68	4.1%	37	2.4%
Non-disabled staff	1108	66.1%	944	61.1%
Unknown/Null	417	24.9%	506	32.8%
Prefer not to say	51	3.0%	58	3.8%
TOTAL	1676	100%	1545	100%

The Trust's 2020 data is broadly similar to that found nationally in the first round of WDES. The first national WDES report (2019 data) found that 3.6% identified as disabled; 71% non-disabled, 25% disability status 'unknown'. Disability declaration rates ranged from 0.9% to 9.4% across Trusts.

Although some improvement has been made (in both the increased number of people declaring a disability and a reduction in the number of employees without any disability status recorded), the high number of unknown / null entries (approx. 25% of Trust employees) remains a significant concern and makes it impossible to know the true proportion of staff with a disability within the Trust. This remains a *KEY PRIORITY* for action. Trust data for 2020 shows that just over 4% of staff have a disability declared in ESR. It is anticipated that the actual proportion of staff with a disability is likely to be much higher. Indeed, 23% of Trust respondents (175 people) indicated that they had a disability in the 2018 NHS Staff Survey.

Staff with disabilities are mostly congregated in clusters 1 and 2 (bands 1-4 and 5-7 respectively). The largest cluster of staff with a disability (33 people) is clinical cluster 2 (clinical bands 5-7). There are only 2 non-clinical staff working at this level. In contrast, cluster 1 (up to and including band 4) is evenly divided between clinical and non-clinical staff (14 clinical & 14 non-clinical staff in cluster 1). There are only 5 people with disabilities outside of clusters one and 2 (including one medical consultant). However, this represents an increase compared to our 2019 data, where there were only 2 more senior staff. Our data again generally supports the national picture of disabled people being more heavily congregated in lower-banded posts.

All Trust staff (bank workers excluded)	Disabled	Non-disabled	Not known	Disabled	Non-disabled	Not known
Cluster 1 (Bands 1 - 4)	28 (24)	371 (439)	237 (367)	4% (3%)	58% (53%)	57% (29%)
Cluster 2 (Band 5 - 7)	35 (19)	580 (539)	172 (272)	6% (2%)	74% (65%)	22% (33%)
Cluster 3 (Bands 8a - 8b)	3 (1)	74 (85)	32 (43)	3% (1%)	68% (66%)	29% (33%)
Cluster 4 (Bands 8c - 9 & VSM)	1 (0)	24 (57)	5 (12)	3% (0%)	83% (83%)	17% (17%)
Cluster 5 (Medical & Dental Staff, Consultants)	0 (0)	20 (16)	12 (13)	0% (0%)	63% (55%)	38% (45%)
Cluster 6 (Medical & Dental Staff, Non-Consultants career grade)	1 (1)	13 (7)	5 (3)	5% (9%)	68% (64%)	26% (27%)
Cluster 7 (Medical & Dental Staff, Medical and dental trainee grades)	0 (0)	14 (13)	1 (1)	0% (0%)	93% (93%)	7% (7%)
Non-clinical staff (bank workers excluded)	Disabled	Non-disabled	Not known	Disabled	Non-disabled	Not known
Cluster 1 (Bands 1 - 4)	14 (6)	166 (133)	77 (98)	5% (3%)	65% (56%)	30% (41%)
Cluster 2 (Band 5 - 7)	2 (2)	48 (41)	32 (39)	2% (2%)	59% (50%)	39% (48%)
Cluster 3 (Bands 8a - 8b)	1 (0)	16 (19)	8 (9)	4% (0%)	64% (68%)	32% (32%)
Cluster 4 (Bands 8c - 9 & VSM)	1 (0)	13 (19)	1 (1)	7% (0%)	87% (95%)	7% (5%)
Clinical staff (bank workers excluded)	Disabled	Non-disabled	Not known	Disabled	Non-disabled	Not known
Cluster 1 (Bands 1 - 4)	14 (18)	205 (306)	160 (269)	4% (3%)	54% (52%)	42% (45%)
Cluster 2 (Band 5 - 7)	33 (17)	532 (498)	140 (233)	5% (2%)	75% (67%)	20% (31%)
Cluster 3 (Bands 8a - 8b)	2 (1)	58 (66)	24 (34)	2% (1%)	69% (65%)	29% (34%)
Cluster 4 (Bands 8c - 9 & VSM)	0 (0)	11 (38)	4 (11)	0% (0%)	73% (78%)	27% (22%)
Cluster 5 (Medical & Dental Staff, Consultants)	0 (0)	20 (16)	12 (13)	0% (0%)	63% (55%)	38% (45%)
Cluster 6 (Medical & Dental Staff, Non-Consultants career grade)	1 (1)	13 (7)	5 (3)	5% (9%)	68% (64%)	26% (27%)
Cluster 7 (Medical & Dental Staff, Medical and dental trainee grades)	0 (0)	14 (13)	1 (1)	0% (0%)	93% (93%)	7% (7%)

Box 1: Trust WDES Workforce Data as at 31st March 2020 (2019 data in brackets)

ACTION on WDES Indicator 1:

1.1 Continue to focus on improving disability declaration rates to give greater validity and understanding of our workforce data in relation to disability through a campaign inviting all staff to review their personal equality data. (lead: Diversity & Inclusion Lead)

1.2 The Trust should monitor appointments to band 8a+ roles and raise leadership awareness about the apparent lack of opportunity for people with a disability at this level in order to instigate change. Consider positive action approaches. (lead: Recruitment Lead)

1.3 To continue to develop as an ‘employer of choice’ for people with a disability through development of our performance against the Disability Confident standard, including the development of role models through our recruitment literature and social media. (lead: WFBP)

Metric 2: Relative likelihood of disabled staff compared to non-disabled staff being appointed from shortlisting across all posts.

Trust Recruitment and Selection Data 1 April 2019 – 31 March 2020

Disability status	No. of applicants	No. Shortlisted	No. Offered	% applications	% shortlisted	% offered
Yes (disability)	347	157	24	6.1%	6.8%	6.0%
No (no disability)	5184	2074	354	91.3%	90.4%	87.8%
Not known	150	64	25	2.6%	2.8%	6.2%
Total	5681	2295	403	100.0%	100.0%	100.0%

People with a disability made up approximately 6% of applicants for Trust posts, and also 6% of appointments made. This suggests that, generally, people with disabilities are being equitably treated when applying and being considered for posts in the Trust.

This data gives the Trust an **Indicator 2 score of 1.06**, further supporting the above assessment. This means that people with a disability are slightly disadvantaged in the interview / appointment process compared to their non-disabled peers (a score of 1.0 would mean equal treatment). By way of comparison, the national score on this measure in 2019 was 1.23, which suggests that the Trust is performing better than average on this measure. This is a considerable improvement from the Trust’s 2019

score of 1.9 (which meant that it was almost twice as difficult to be successfully appointed with a disability than for non-disabled staff in 2018-19).

ACTION on WDES Indicator 2:

2.1 Invite staff with a disability to review our recruitment and selection processes to identify and address barriers faced by people with a disability and parts of the process, including potential for bias (conscious and unconscious) to influence decision making (lead: Recruitment Lead).

2.2 Continue to roll-out Inclusion and Unconscious Bias training to all Trust managers, and make reference within this to recruiting people with disabilities (lead: D&I Lead).

2.3 Introduce a new training programme on unconscious bias in recruitment, including focus on disabilities to be launched in 2020 (lead: Recruitment Lead).

Metric 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 (from 2020, over a 2 year averaging period).*

Trust score of 0.0 – there were no formal capability processes involving staff with a disability in either 2019 or 2020. There were only 3 cases in total in 2020 and 2 cases in total in 2019.

NO NEW ACTION INDICATED.

3.1 Continue to apply inclusive leadership in managing capability (poor performance) cases (lead: WFBPs and HR Advisers)

Metric 4:

a) Percentage of disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from patients/service users, their relatives or other members of the public; managers, or other colleagues:

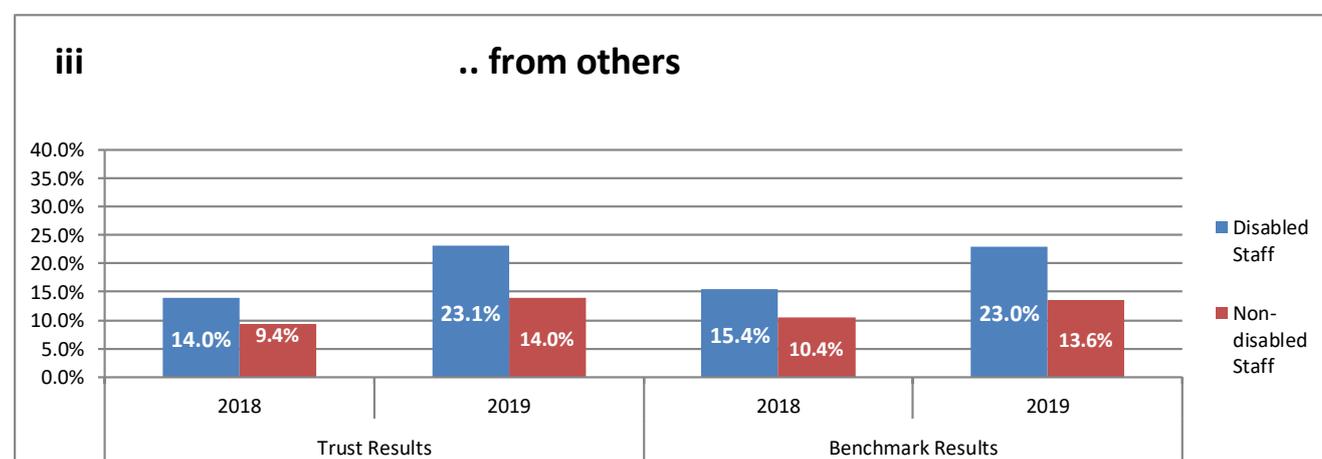
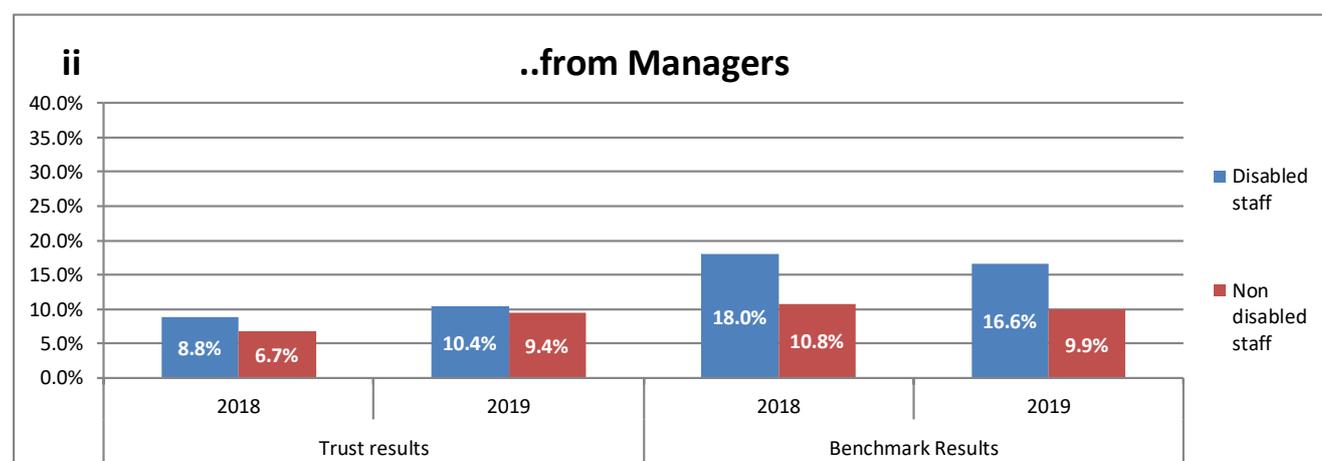
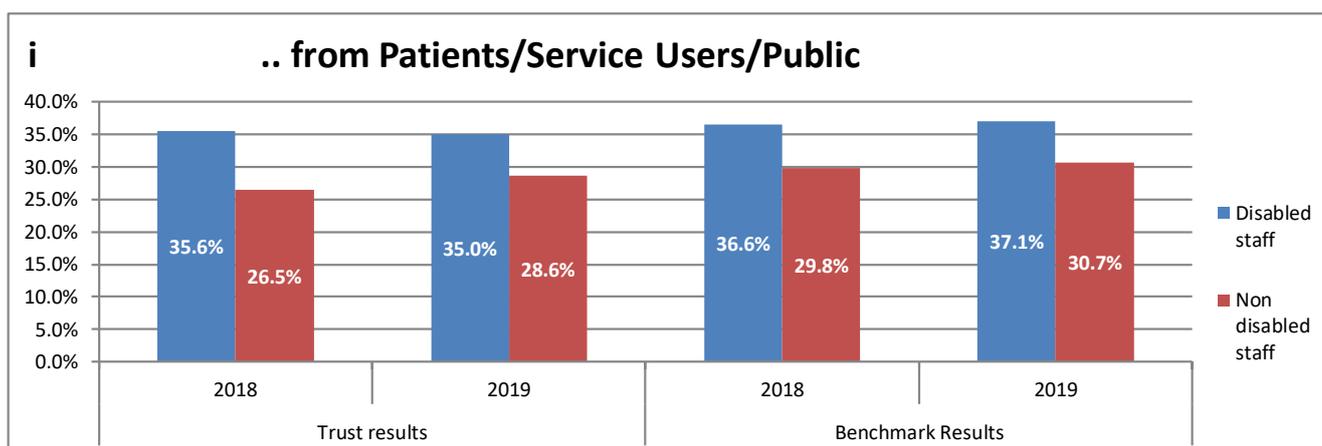
Staff who reported a disability in the 2019 NHS Staff Survey were more likely than their non-disabled colleagues to experience harassment, bullying or abuse by:

- i. service users and the public,
- ii. Managers, and
- iii. Other colleagues

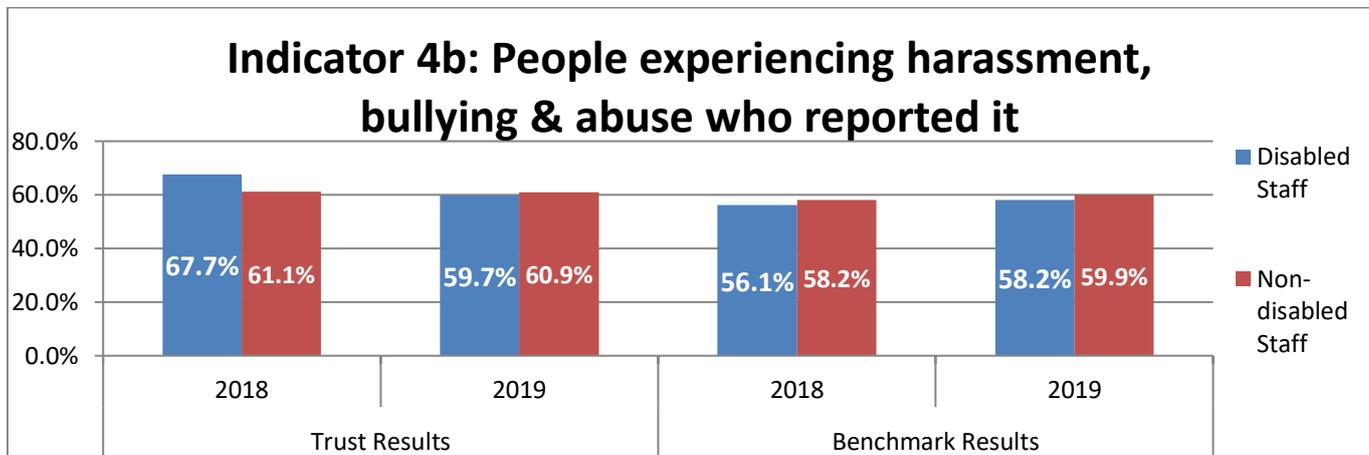
Data for 2020 (2019 staff survey) and 2019 (2018 staff survey) is set out as below.

Higher rates of harassment, bullying or abuse were reported by staff declaring a disability in the NHS Staff Survey than those without. This was seen in each of the three groups, within the Trust and also nationally with benchmark Trusts. Levels of abuse in the Trust from service users and the public were broadly consistent with those in 2019, but there was a slight increase in rates of HBA from managers and, particularly, a significant increase for HBA from other colleagues (although this was in line with the national trend).

Indicator 4: Harassment, Bullying or Abuse..



4b) 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:



In the 2019 Staff Survey, staff with disabilities who experienced harassment, bullying or abuse were as likely to report the incident as staff without a disability. This is an improvement on the 2018 survey position, where staff with disabilities were less likely to report such an incident.

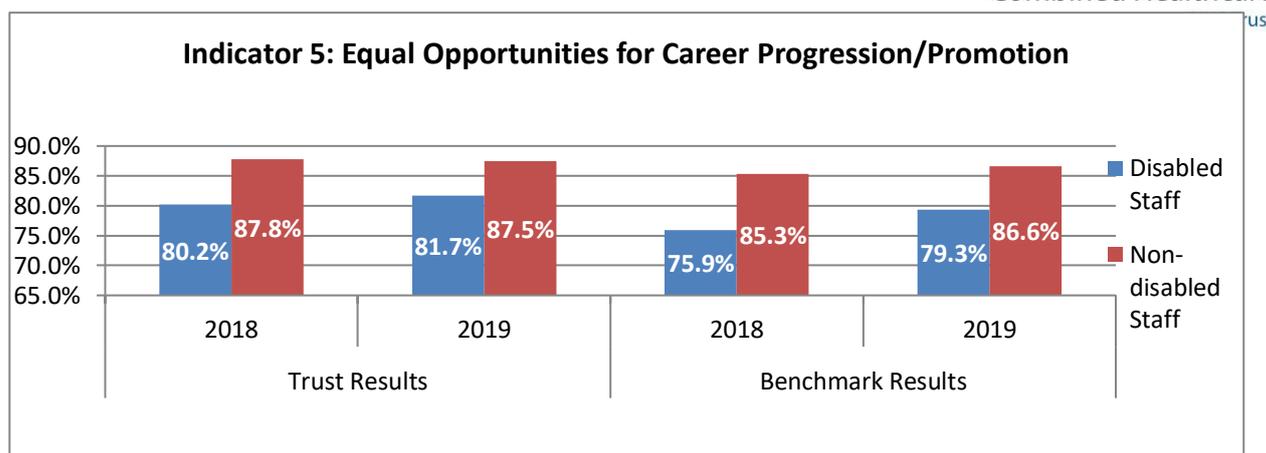
ACTION on WDES indicator 4:

4.1 To continue to develop a culture of inclusion and zero tolerance of harassment, bullying and abuse of NHS workers through the work of our Inclusion Council, including a specific focus on visible and non-visible disabilities (lead: Director of Workforce, OD & Inclusion with D&I Lead and Trust Inclusion Council)

4.2 To continue to promote reporting of all incidents of harassment, bullying or abuse at work by all staff via the Trust’s Ulysses incident reporting system and via the appropriate HR procedures (lead: Health & Safety Adviser with sponsorship from the Executive Team)

Metric 5: Percentage of disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.

Staff reporting a disability in the 2019 NHS Staff Survey reported lower perceptions of the Trust as a provider of equal opportunities for career progression or promotion (82% of disabled employees believed the Trust offered equal opportunities for career progression / promotion, compared to 88% of non-disabled respondents). This marked a slight improvement since the 2018 survey. (See Chart below)

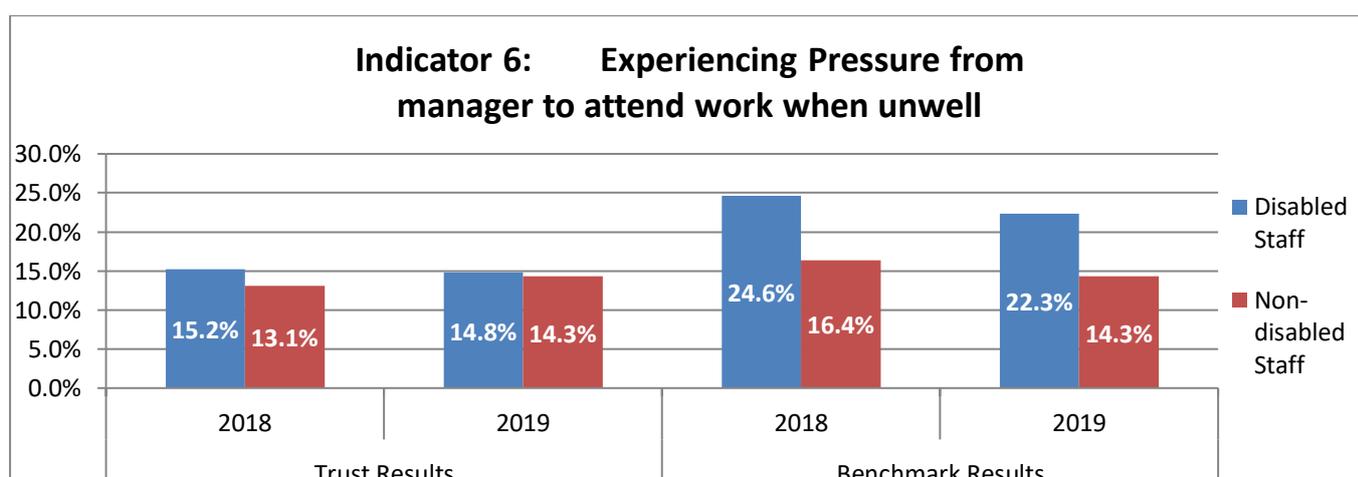


ACTION on WDES indicator 5:

5.1 Continue to develop a culture of inclusion through the work of our Inclusion Council, Trust Directorates, Workforce Team and Diversity and Inclusion Lead (lead: Director of Workforce, OD & Inclusion with D&I Lead).

- Metric 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.**

Slightly more staff reporting a disability in the 2019 NHS Staff Survey said that they felt pressure to come to work despite not feeling well enough to perform their duties, but the difference had reduced to a mere half percentage points, marking an improvement on the 2018 data position. The experiences of disabled and non-disabled staff are much more aligned (equivalent) at the Trust, compared to the benchmark position in both 2018 and 2019.



ACTION ON WDES INDICATOR 6:

6.1 In addition to the ongoing development of our Neurodiversity Staff Network, establish a new Disability Staff Network with a chair with a direct link to the Senior Management (lead: D&I Lead)

Metric 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.

Staff reporting a disability in the 2019 NHS Staff Survey were less likely to be satisfied by the extent to which their work is valued by the Trust (41% compared to 53% of non-disabled respondents). However, the experience of both groups appeared to have improved from the 2018 survey position and were now more aligned to the benchmark group levels.

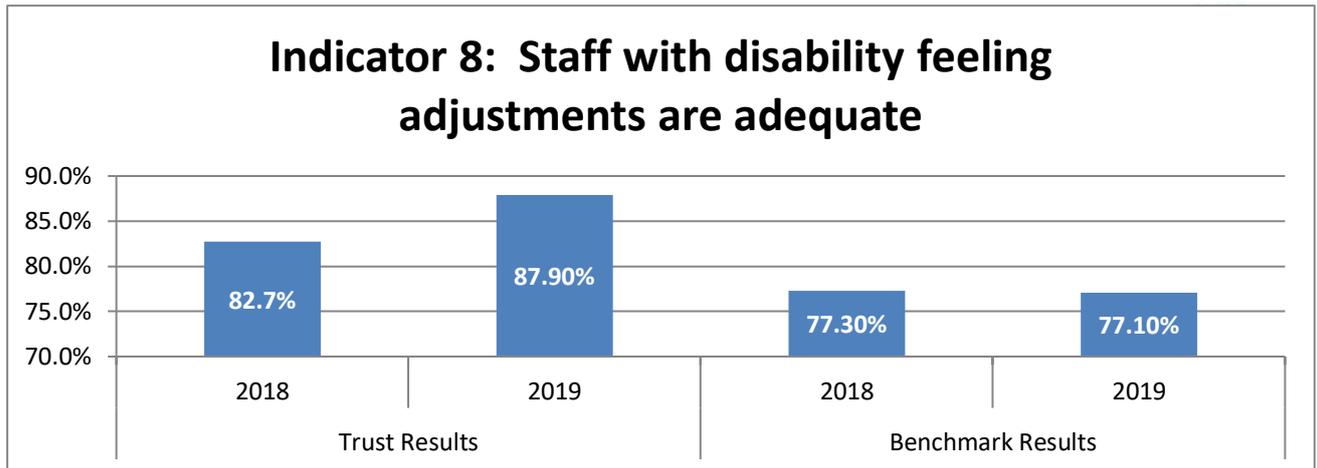


ACTION on WDES Indicator 7:

7.1 Empower the proposed Disability Staff Network and the existing Neurodiversity Staff Network to develop experience and engagement for people with disabilities across the Trust (lead: Director of Nursing and Quality, with Director of Workforce, OD & Inclusion, and D&I Lead).

Metric 8: Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work.

Of staff declaring a disability in the 2019 NHS Staff Survey, 88% said that their manager had made adequate adjustments to enable them to carry out their work. This was an improvement on the already strong position reported in the 2018 survey, and was significantly better than the benchmark position in both years.



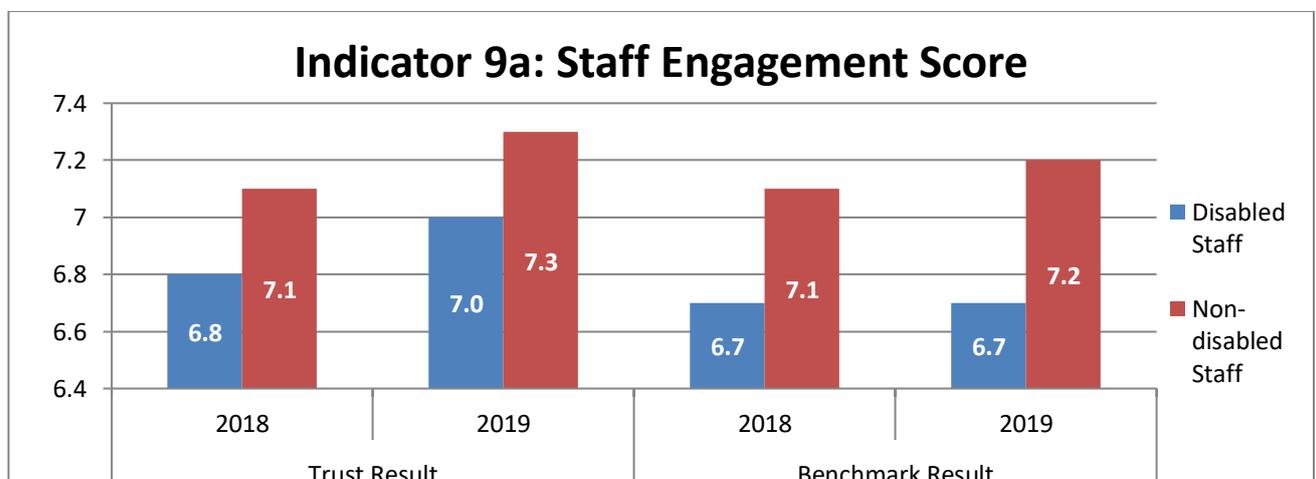
ACTION on WDES Indicator 8:

8.1 HR Team to continue to follow up reasonable adjustments made with individuals to review adequacy and effectiveness post-implementation. Seek feedback about how the reasonable adjustments process could be improved on from people who have experienced the process (lead: WFBPs and HR Advisers).

Metric 9:

a) The staff engagement score for Disabled staff, compared to non-disabled staff and the overall engagement score for the organisation.

The Staff Engagement score for staff declaring a disability in the 2019 Staff Survey was slightly lower than for non-disabled staff (7.0 compared to 7.3 for non-disabled staff). These rates represent an improvement in staff engagement for both groups of staff since the 2018 survey. The Trust staff engagement rate in both years for people with a disability was slightly higher than for the benchmark group (with a wider positive shift in the 2019 survey).



b) Has your trust taken action to facilitate the voices of Disabled staff in your organisation to be heard? (Yes) or (No) – If yes, please provide at least one practical example of current action being taken in the relevant section of your WDES annual report.

Yes. The Trust is facilitate the voice of disabled staff. This includes:-

- i. Ongoing work of our Neurodiversity Staff network. The Trust has a Neurodiversity Staff Network which was established in May 2019 and which meets regularly (online via MS Teams since COVID19). This network is to support people with Asperger's, autism, dyslexia, dyspraxia and other neurodiversity.
- ii. Neurodiversity Staff Network Lead has a place on the Trust's Inclusion Council and regularly participates in these meetings.
- iii. We do not yet have a Disability Staff Network established, but have been working to lay the foundations for this. We have a number of interested members of staff and are working to identify our first Disability Network Lead. It is our intention to launch our Positive About Disability Staff Network during 2020-21.
- iv. The Trust very much supports disability inclusion and participates in events to raise awareness and develop experiences for both staff and service users with disabilities. We endeavour to mark and share information on events such as Neurodiversity Celebration Week (13-17 May 2020), and Day of People with Disabilities (3 Dec annually). The Trust is very proud to have our own Umbrella Installation since Summer 2019 to celebrate and raise awareness about neurodiversity.
- v. The Trust is keen to develop employment opportunities for people with learning disabilities and at the time of writing (August 2020) has an advert out for 3 new 'Expert by Experience' posts. These posts, each permanent and for 8 hours a week, are specifically designed to be for people with lived experience to work to help to develop service and experience for our service users with learning disabilities. The Trust is working to develop our processes to make this employment experience as accessible as possible from advert, to recruitment process, and (following appointment) from induction to ongoing experience of (and development within) the role. #
- vi. In relation to raising awareness and understanding and working to improve experiences for people with disabilities, the Trust recently shared Chloe's Story. Chloe is a young woman with cerebral palsy who has accessed Trust services. Chloe's Story was initially shared at our July 2020 Trust Board meeting and then wider on our Trust website and social media channels. Follow the link to [Chloe's Story](#). Chloe also visited Ward 3 to help develop Ward 3 as part of their SPAR accreditation with Zoe Grant and has trained to support the Trust's Observe and Act approach. Chloe's story was also presented at Trust Board recently and raised some useful points for development.

ACTION:

- 9.1 *In addition to introduction of new disability staff network, continue to engage in direct communication with disabled staff in writing via e mail feedback requests/letter to remind individuals plus Newsround, CEO Blog etc. to reach staff with disabilities who have not disclosed/reported their disability (lead: D&I Lead)*
- 9.2 *Disabilities Staff Network and Neurodiversity Staff Network to hold a focus group on employee experience (lead Network Leads with support of D&I Lead)*

Metric 10: Percentage difference between the organisation’s board voting membership and its overall workforce, disaggregated

- o By voting membership of the board
- o By Executive membership of the board

Boards are expected to be broadly representative of their workforce. At Combined Healthcare currently there is one Board members with a disclosed disability. This individual is a member of the executive team and has voting rights on the Board.

No Board members have a NULL entry for disability (i.e. all have declared that they are non-disabled). There are no non-executive directors with a declared disability.

	Disabled	Non-Disabled	Not Known	TOTAL
No of Board members*	1	12	0	13
<i>of which:</i>				
<i>-Voting Board members*</i>	1	10	0	11
<i>-Non Voting Board members</i>	0	2	0	2
<i>Exec members*</i>	1	6	0	7
<i>Non-Exec Members</i>	0	6	0	6

*Note: Director of Nursing & Quality not included in data as seconded to Trust on 31.03.20 and not in the Trust’s ESR system

ACTION on WDES Indicator 10:

- 10.1 *As per action 6.1 and 7.1, Board Executive Sponsor for Disability to continue to champion disability matters with their board colleagues Develop the role of the chairs of the Disability Staff Network and the*

Neurodiversity Staff Network to liaise with this individual. (Director of Nursing & Quality).

- 10.2** *Expressly seek participation in the Trust's second round of Reverse Mentoring by colleagues with disabilities to help inform and educate senior leaders with regard to the varied impacts of disability on individuals (now planned for 2020-21 – lead D&I Lead)*
- 10.3** *Consider a positive action statement seeking a non-executive director with lived experience of disability as part of the NED recruitment process, when this next arises (lead: Trust Board Secretary with Recruitment Lead)*

4.0 Conclusion and Recommendations

- 4.1 This report has set out the Trust's progress against the new WDES standards, along with the continued roll-out of a detailed action plan designed to develop our performance against these indicators and improve the workplace experiences for people with disabilities working within the Trust now and in the future.
- 4.2 The Trust has taken steps to improve the experience of our disabled staff over recent years including:-
 - Development of flexible working and flexible retirement (with more development in this area planned in 2020-21 as part of our delivery of the NHS People Plan)
 - Development of approach and policy on management of ill health
 - Development of approach and policy on management of capability (performance)
 - Supporting numerous individual employees with adjustments and equipment to support them at work
 - Attaining Disability Confident Employer status
- 4.3 It is clear, however, that there is still much to do to create more equitable and rewarding employment opportunities and experiences for disabled workers and, in so doing, enabling us to maximise on the talents that this under-utilised group can bring to delivering the highest quality health services for all our service users.

4.4 Recommendations

1. It is recommended that the People and Culture Development Committee approve this report and associated action plan (collated at Appendix 5).
2. It is also recommended that Trust Senior Leaders demonstrate sustained and visible commitment to delivering on disabilities inclusion. This may include:-
 - a) supporting our staffs networks and getting involved in developmental initiatives
 - b) positively demonstrating their commitment to disabilities equality and inclusion; and
 - c) considering what support, development opportunities and training should be made available to staff at all levels to support the process of change towards **outstanding inclusion** for our colleagues with disability.

4.5 Reporting and Monitoring

- 4.6 Members of the PCD Committee will continue to receive a minimum of **two WDES reports annually** and will provide monitoring and assurance checking that the Trust is not only meeting its responsibilities under the WDES but is continually seeking to improve experience and opportunity for people living with disabilities.
- 4.7 The annual WDES report will be signed off by the Trust Board prior to publication in line with national reporting requirements.

END

APPENDIX ONE: NSCHT WDES EXCEL SPREADSHEET SUBMISSION

The Trust's WDES Online Data Submission Spreadsheet 2020 was submitted on 19th August 2020 and a copy can be viewed via the embedded document below (copy available from Lesley.Faux@combined.nhs.uk in event of any difficulty in opening the document).



WDES V6.1 2020 RLY
FINAL UPDATED FOR

APPENDIX 2: Trust 2019 WDES Online Submission, 30 July 2019

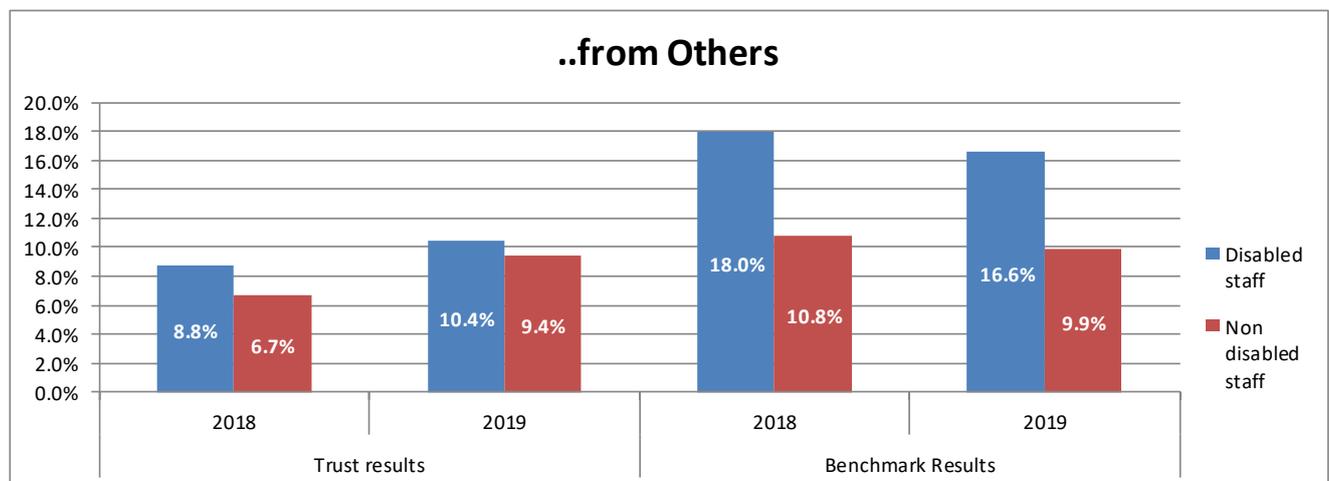
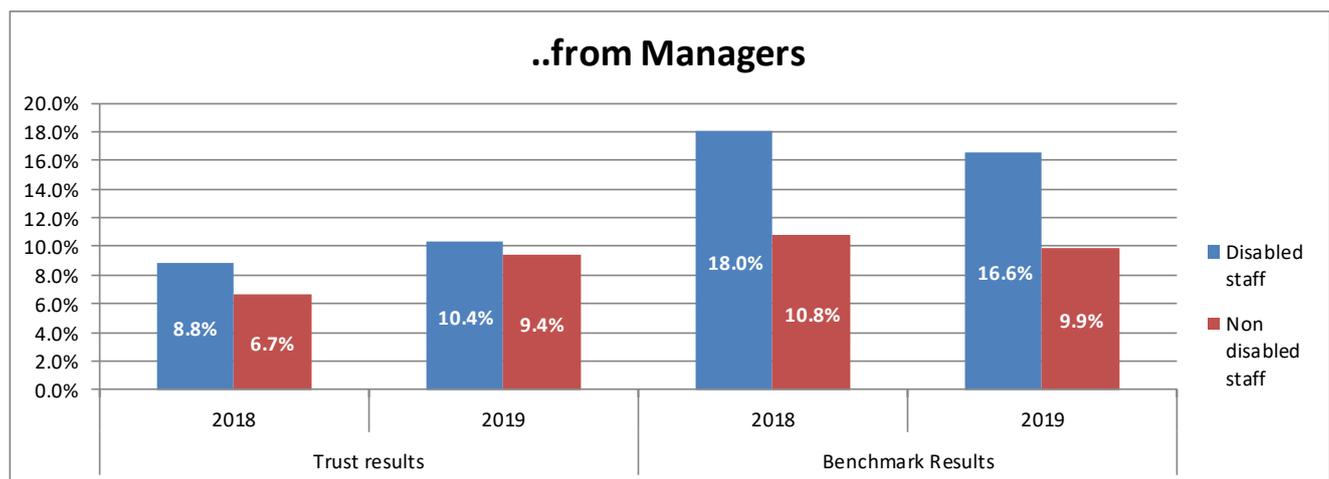
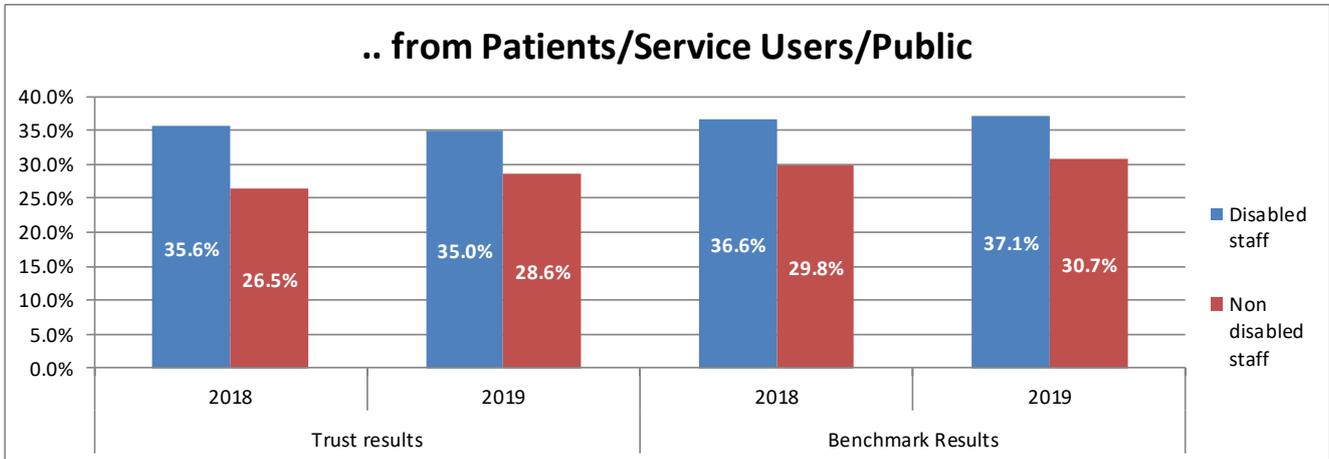
The Trust's WDES Online Reporting Form 2020 was submitted on 19th August 2020 and a copy can be viewed via the embedded document below (copy available from Lesley.Faux@combined.nhs.uk in event of any difficulty in opening the document).

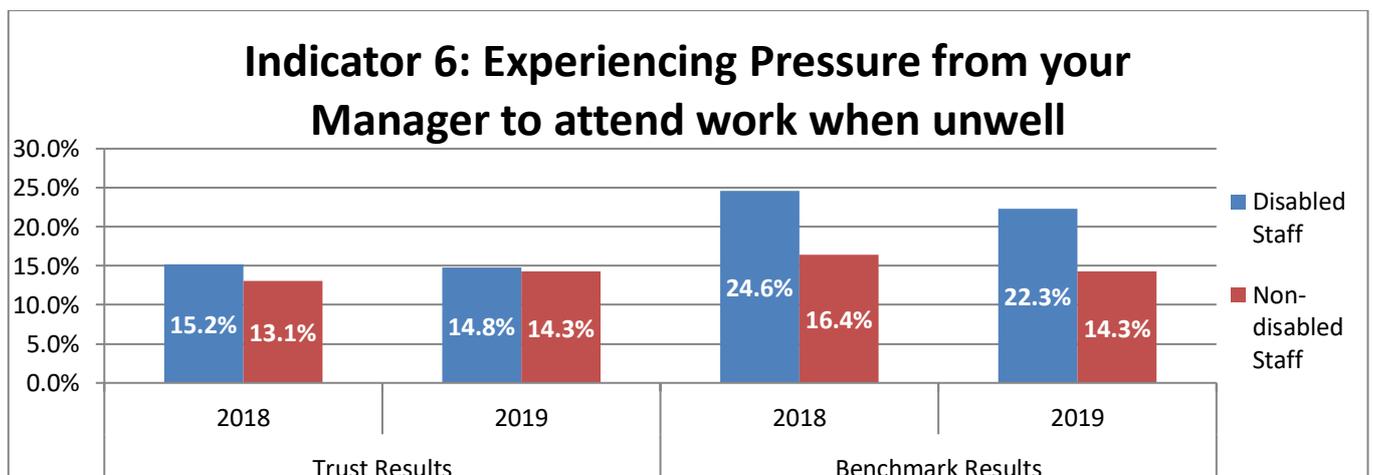
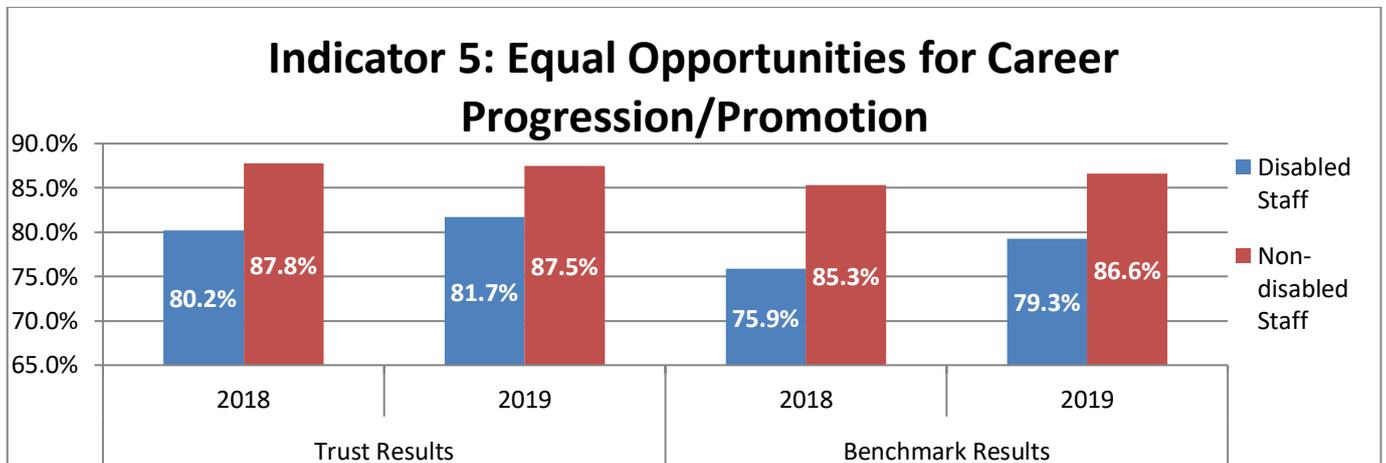
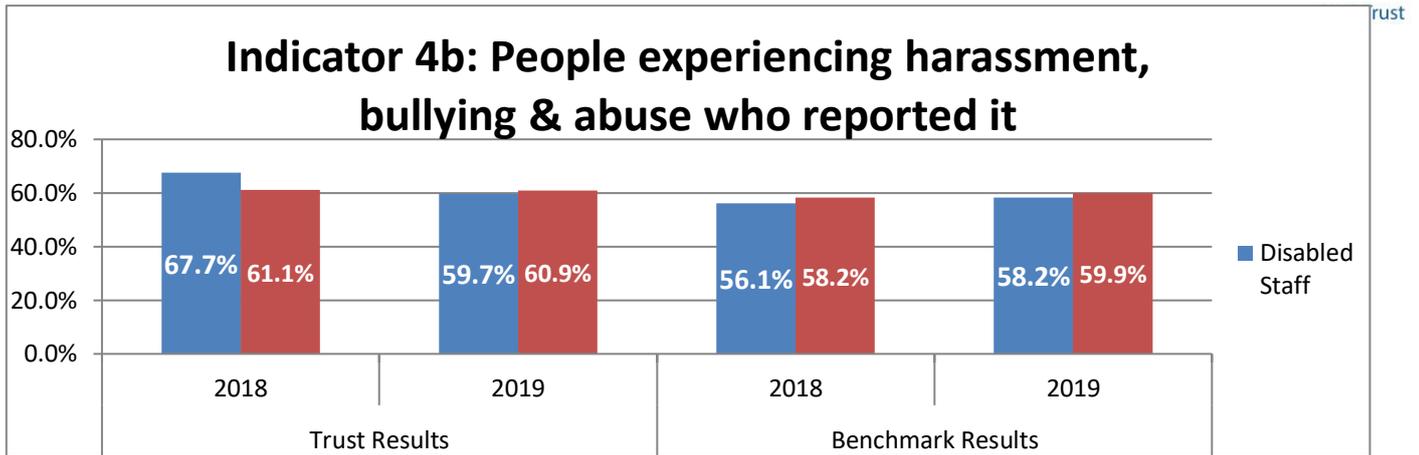


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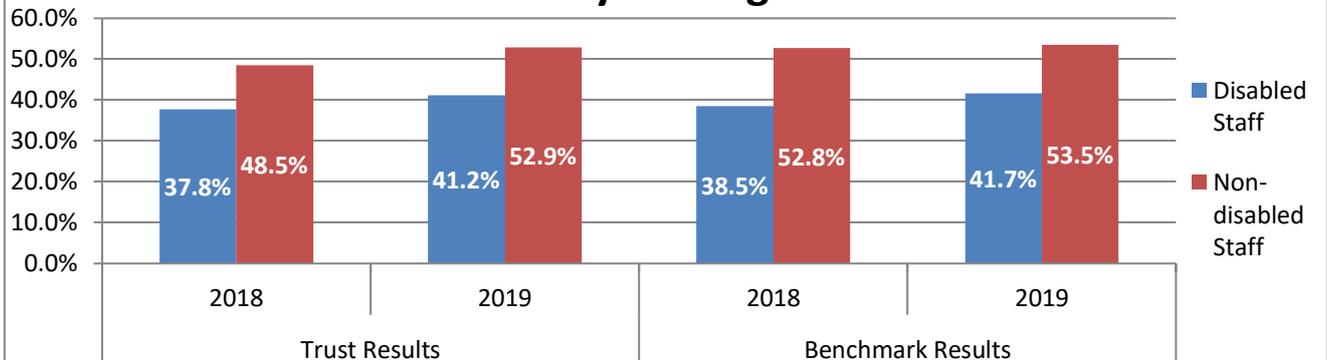
APPENDIX 3: NSCHT Staff Survey 2019 Data Supporting 2020 WDES

Indicator 4a: Harassment, Bullying or Abuse..

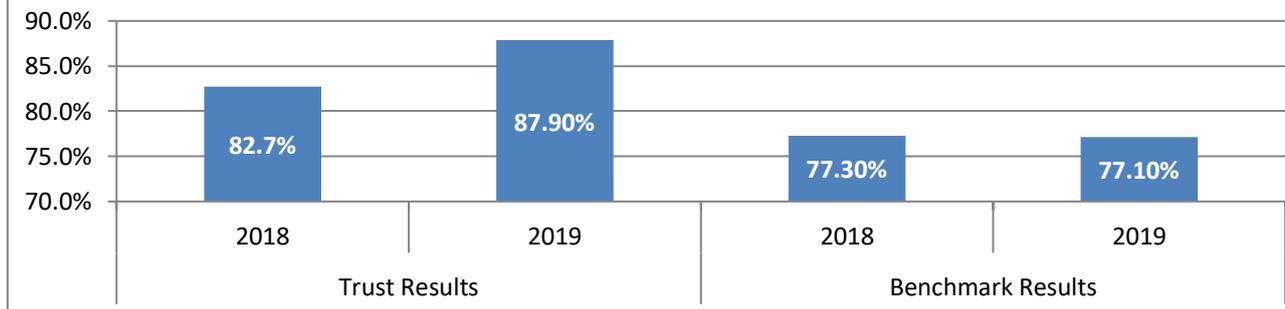




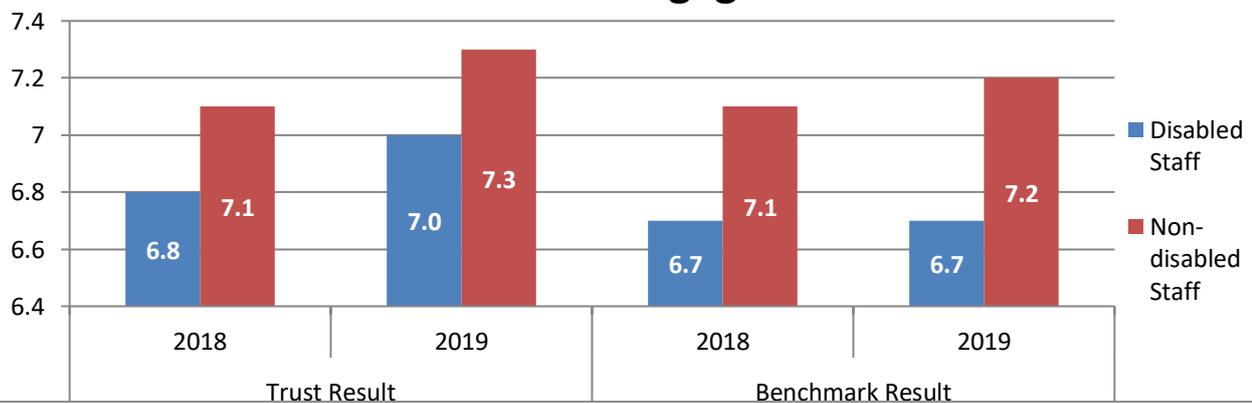
Indicator 7: Staff satisfaction with extent their work is valued by the organisation



Indicator 8: Staff with disability feeling adjustments are adequate



Indicator 9a: Staff Engagement Score



APPENDIX 4:

The WDES Metrics

<ul style="list-style-type: none"> • Metric 1: Percentage of staff in AfC pay bands or medical and dental subgroups and very senior managers (including Executive Board members) compared with the percentage of staff in the overall workforce.
<ul style="list-style-type: none"> • Metric 2: Relative likelihood of Disabled staff compared to non-disabled staff being appointed from shortlisting across all posts.
<ul style="list-style-type: none"> • Metric 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.
<ul style="list-style-type: none"> • Metric 4: <ul style="list-style-type: none"> a) Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from: <ul style="list-style-type: none"> 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.
<ul style="list-style-type: none"> • Metric 5: Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.
<p>11 Metric 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.</p>
<p>12 Metric 7: Percentage of Disabled staff compared to non-disabled staff saying that they are confident in the extent to which their organisation values their work.</p>
<p>13 Metric 8: Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work.</p>
<p>14 Metric 9:</p> <ul style="list-style-type: none"> (a) The staff engagement score for Disabled staff, compared to non-disabled staff and the overall engagement score for the organisation. (b) Has your trust taken action to facilitate the voices of Disabled staff in your organisation to be heard? (Yes) or (No) – If yes, please provide at least one practical example of current action being taken in the relevant section of your WDES annual report.
<p>15 Metric 10: Percentage difference between the organisation’s board voting membership and its overall workforce, disaggregated:-</p> <ul style="list-style-type: none"> 15.1 By voting membership of the board 15.2 By Executive membership of the board

APPENDIX 5:

NSCHT WDES ACTION PLAN 2020-21 – All actions by end March 2021 unless otherwise stated

Action No	Action Detail	Key Measurable Target	Who is responsible	Where monitored
1.1	Continue to focus on improving disability declaration rates to give greater validity and understanding of our workforce data in relation to disability through a campaign inviting all staff to review their personal equality data.	<ul style="list-style-type: none"> Reduce 'Unknown'/'Null' rate from 15% or less by 31/3/21 	<ul style="list-style-type: none"> D&I lead with WF BPs and WF Info Team. Supported by Directorate & Service Managers 	<p>Action continuing from 2019-20</p> <ul style="list-style-type: none"> Quarterly HR Reports to Directorates and PC D
1.2	The Trust should monitor appointments to band 8a+ roles and raise leadership awareness about the apparent lack of opportunity for people with a disability at this level in order to instigate change. Consider positive action approaches.	<ul style="list-style-type: none"> Report quarterly on no of disabled applicants/shortlisted/appointed for all Band 8a + roles Review positive action statement on NHS jobs adverts Include specific positive action statement on disability in all Band 8a + adverts 	<ul style="list-style-type: none"> Recruitment Lead to PC D & Directorates Rect. Lead with D&I lead Rect. lead with D&I lead 	<p>Action continuing from 2019-20</p> <ul style="list-style-type: none"> Workforce Team to review Directorate Quarterly Data Adverts on NHS Jobs Adverts on NHS Jobs
1.3	To develop as an employer of choice for people with a disability through development of our performance against the Disability Confident standard, including the development of role models through our recruitment literature and social media.	<ul style="list-style-type: none"> Task & finish group established to progress Disability Confident Standard and the deal and sharing of role models with a disability Minimum 4 role models shared by end March 2020 - completed 	<ul style="list-style-type: none"> D&I Lead with Associate Director. HR to establish Task & Finish Group including staff side report by end October 2020 	<p>Action continuing from 2019-20</p> <ul style="list-style-type: none"> Group established and minimum of 3 months by 31st March 2020 role models shared by 31 March 2020 Measurable progress seen in at least 2 areas of Disability framework
2.1	Invite staff with a disability to review our recruitment and selection processes to identify and address barriers faced by people with a disability and parts of the process, including potential for bias (conscious and unconscious) to influence decision making.	<ul style="list-style-type: none"> Feedback received from staff with a disability during met and selection 	<ul style="list-style-type: none"> Inclusive Recruitment Project group and lead (Recruitment Lead) 	<p>Action Carried Forward from 2019-20</p> <ul style="list-style-type: none"> Feedback to Inclusion Council by end March 2021

Action No	Action Detail	Key Measurable Target	Who is responsible	Where monitored
2.2	Continue to roll-out Inclusion and Unconscious Bias training to all Trust managers, and make reference within this to recruiting people with disabilities.	<ul style="list-style-type: none"> Monthly Inclusion and Unconscious Bias process delivered to March 2020. Mandatory attendance by Trust managers and leaders Explore e-learning options for continued roll-out 	<ul style="list-style-type: none"> D&I lead with support trainers from across the Trust 	<ul style="list-style-type: none"> Monthly session delivered Band 7+ compliance rate at 75% as at end July 2020 Continue to work towards 90% compliance for Band 7+ whilst rolling out to other groups of staff. Work towards 50% for band 6+ staff by 31 March 2021
2.3	Introduce a new training programme on unconscious bias in recruitment, including focus on disabilities.	<ul style="list-style-type: none"> New programme developed and piloted by end Dec 2019 	<ul style="list-style-type: none"> Recruitment lead 	<p>Action Carried Forward from 2019-20</p> <ul style="list-style-type: none"> Pilot session delivered and evaluated To be mainstreamed from 2020-21 onwards
3.1	NO NEW ACTION INDICATED Continue to apply inclusive leadership in managing capability (poor performance) cases	<ul style="list-style-type: none"> Demonstrable inclusive practise in managing capabilities cases in line with Trust policies and Trust values 	<ul style="list-style-type: none"> WF Team 	<p>Action continuing from 2019-20</p> <ul style="list-style-type: none"> HR Team
4.1	NO NEW ACTION INDICATED. To continue to develop a culture of inclusion and zero tolerance of harassment, bullying and abuse of NHS workers through the work of our Inclusion Council, including a specific focus on visible and non-visible disabilities.	<ul style="list-style-type: none"> Extend recruit of incidents project group and culture of inclusion project group to include disability (including visible and non-visible disabilities) 	<ul style="list-style-type: none"> Inclusion Council 	<ul style="list-style-type: none"> Further demonstrable action reported to Inclusion Council by 31/3/21
4.2	To continue to promote reporting of all incidents of harassment, bullying or abuse at work by all staff via the Trust's Ulysses incident reporting system and via the appropriate HR procedures.	<ul style="list-style-type: none"> Trust D & I trainers Inclusion & Unconscious Bias training and Incident Reporting Training state implications of reporting incidents and examples 	<ul style="list-style-type: none"> Relevant Trainer 	<p>Action continuing from 2019-20</p> <ul style="list-style-type: none"> Frazer MacDonald, Health and Safety Adviser

Continued/

Action No	Action Detail	Key Measurable Target	Who is responsible	Where monitored
5.1	Continue to develop a culture of inclusion through the work of our Inclusion Council, Trust Directorates, Workforce Team and Diversity and Inclusion Lead.	<ul style="list-style-type: none"> High visibility on inclusion in Trust communications with specific focus on disability 	<ul style="list-style-type: none"> Trust Board Members D & I Lead Associate Director of Comms 	<ul style="list-style-type: none"> Continued improvement in engagement and belief Trust offers equal share in 2020 staff survey
6.1	In addition to the ongoing development of our Neurodiversity Staff Network, establish a new Disability Staff Network with a chair with a direct link to the Senior Management	<ul style="list-style-type: none"> Disability Staff Network established as a safe place for disabled employees to share concerns by end Jan 2020. Identify Board member to act as Disability Champion and to be Board link to Disability Staff Network Chair 	<ul style="list-style-type: none"> Director of W/force and Inclusion with D&I Lead Disability Champion identified Sept 2019 (Director of Nursing & Quality) 	<p>Action Carried Forward from 2019-20</p> <ul style="list-style-type: none"> First meeting held by 31 Jan 2021
7.1	Empower the proposed Disability Staff Network and the existing Neurodiversity Staff Network to develop experience and engagement for people with disabilities across the Trust.	<ul style="list-style-type: none"> Disability Network Chair and Neurodiversity Network Chair have met with Board Champion on two occasions by end March 2020 to discuss environment of the group and allocated potential time to deliver on this 	<ul style="list-style-type: none"> Disabilities Staff Network Chair and Neurodiversity Staff Network Chair with relevant link Board Member 	<ul style="list-style-type: none"> x 2 mtgs happened protected time in place network chairs report feeling supported and empowered to develop their network
8.1	HR to continue to follow up reasonable adjustments made with individuals to review adequacy and effectiveness post-implementation. Seek feedback about reasonable adjustment process, particularly including from people who declared a disability in the Staff Survey but are not identified as having a disability in ESR.	<ul style="list-style-type: none"> Each reasonable adjustments case reviewed for adequacy and effectiveness on implementation Feedback gained on reasonable adjustments process 	<ul style="list-style-type: none"> Associate Director of Workforce with HR Team 	<ul style="list-style-type: none"> Ongoing via HR Team

Action No	Action Detail	Key Measurable Target	Who is responsible	Where monitored
9.1	In addition to introduction of new disability staff network, engage in direct communication with disabled staff in writing via e mail feedback requests/letter to remind individuals plus Newsround, CEO Blog etc. to reach staff with disabilities who have not disclosed/reported their disability	<ul style="list-style-type: none"> Evidence of direct and indirect with staff with disabilities 	<ul style="list-style-type: none"> CEO and Exec team D & I lead Comms team HR team 	<ul style="list-style-type: none"> WDES 2021
9.2	Disabilities Staff Network and Neurodiversity Staff Network to hold a focus group on employee experience	<ul style="list-style-type: none"> Focus group (s) held before 31 March 2020 	<ul style="list-style-type: none"> Staff Network Chairs with D & I Lead 	<ul style="list-style-type: none"> Documented focus group
10.1	As per action points 6.1 and 7.1, identified Board Executive Sponsor to champion disability matters with their board colleagues. Develop the role of the chairs of the Disability Staff Network and the Neurodiversity Staff Network to liaise with this individual.	<ul style="list-style-type: none"> As per 6.1 and 7.1 	<ul style="list-style-type: none"> As per 6.1 and 7.1 	<ul style="list-style-type: none"> As per 6.1 and 7.1
10.2	Expressly seek participation in the next round of Reverse Mentoring by colleagues with disabilities to help inform and educate senior leaders with regard to the varied impacts of disability on individuals.	<ul style="list-style-type: none"> 4 or more staff with disabilities to take on role as reverse mentor in 2nd cohort of Trust RM. To include visible / non-visible disability / intersectionality 	<ul style="list-style-type: none"> D & I Lead 	<p>RM cohort 2 now planned for 2020-21</p> <ul style="list-style-type: none"> Evidence of participation in Reverse Mentoring programme
10.3	Consider positive action statement seeking a non-executive director with lived-experience of disability as part of the NED recruitment process, when this next arises	<ul style="list-style-type: none"> Visible statement Evidence of impact of statement (applications from people with disability) 	<ul style="list-style-type: none"> Trust Board Secretary With Recruitment Lead 	<ul style="list-style-type: none"> WDES 2021

Continued/

Supplementary Actions				
Action No	Action Detail	Key Measurable Target	Who is responsible	Where monitored
Supp Action	i. Identify and train at least one physical, one sensory and one mental health or neuro diversity FTSU Champions	<ul style="list-style-type: none"> 3 FTSU Champions trained and commenced 	FTSU Guardian with support of D&I Lead	<ul style="list-style-type: none"> Task and Finish Group Inclusion Council
Supp Action	ii. Engage with a local group representing people with disabilities such as Disability Solutions to provide critical friend support and challenge on our action plans	<ul style="list-style-type: none"> Further effort to establish a link with a critical friend organisation identified and engaged with, with a minimum of 2 detailed exchanges by end March 2021. 	D&I Lead	<ul style="list-style-type: none"> Task and Finish Group Inclusion Council
Supp Action	iii. Engage with staff side organisations and our Patient Experience lead and Volunteer Coordinator to provide further support and challenge on our action plans	<ul style="list-style-type: none"> Engagement and involvement undertaken and feedback received with regard to plans and progress 	D&I Lead	<ul style="list-style-type: none"> Task and Finish Group Inclusion Council
Supp Action	iv. Ensure the voice of our disabled staff is heard loud and clear throughout development and delivery against the WDES	<ul style="list-style-type: none"> Multiple opportunities taken and evidenced to hear voice of staff with disabilities and evident in outcomes 	D&I Lead	<ul style="list-style-type: none"> Task and Finish Group Inclusion Council

– All actions by end March 2021 unless otherwise stated

[END]