

Workforce Disability Equality Standard Report

2020-2021





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Report summary



In essence, the NHS Workforce Disability Equality Standard (WDES) helps NHS commissioners and NHS healthcare providers (including independent organisations) achieve workplace parity between their disabled (see below) and non-disabled staff.

It aims to achieve this by reviewing data against a number of key performance indicators, and obliges organisations to produce action plans to close identified gaps in career and workplace experiences.

A WDES return is completed annually. It requires comparative information on workforce indicators for disabled and non-disabled staff, and also compares national NHS Staff Survey data for these groups. Progress is measured against the WDES indicators, and we also compare our present position with results from previous years.

The Equality Act 2010 defines disability as: a physical or mental impairment that has a 'substantial' and 'long-term' negative effect on your ability to do normal daily activities.

Our findings present a broadly positive picture regarding career progress and improved work experiences for staff with disabilities. For instance, when compared with scores from previous years, and viewed against the national averages, our disabled staff are more likely to be appointed to roles once shortlisted; and are increasingly more satisfied with the value our organisation places on them and their work.

However, we also recognise that there is work still to be done. We have yet to have any members of our Executive team or Board with a declared disability, and cannot be wholly confident about our findings due to the disparity in number between our staff who self-declare a disability on our recording system, and our staff who declare a disability via the NHS Staff Survey.

We also know that our disabled staff have felt more pressured than in previous years to come to work, when not feeling well enough to perform their duties.

We have developed an action plan that builds on work we have done in previous years, and responds to the areas where we currently need to improve; and it is envisaged that our new network for staff with disabilities, will act as an important source of advice, support and awareness-raising for staff in the Trust.

Patrick Ismond Lead for Equality, Diversity and Inclusion



What is the WDES?

The NHS Workforce Disability Equality Standard (WDES) launched on 1 April 2019. There are ten metrics, taken from a variety of data sources and they are used to compare the experiences of staff who have a disability with those who do not.

Note: It is recognised that there is significant under-reporting of staff who declare themselves to have a disability on our Electronic Staff Record (ESR) system. Eighty-three (83) members of staff (1.5% of the total) have declared a disability on the ESR; but 154 members of staff who completed the 2020 NHS Staff Survey (from a total of 660) declared a disability. This represents an 86% disparity in declarations between the (ESR) and Staff Survey.

The period this workforce data is reporting against is 1 April 2020 to 31March 2021.

Our WDES Report for 2021 contains a number of elements:

- Comparison with findings from previous GWH NHS FT WDES reports;
- Comparison with average findings from the National Benchmark Group of 128 Acute and Acute and Community Trusts (benchmark year, 2020);
- Summary of key findings;
- An updated action plan.

WDES data sources include:

- The Electronic Staff Record (ESR) (Indicators 1, 3 & 10)
- The TRAC recruitment system (Indicator 2)
- The Annual Staff Survey (Autumn 2020) (Indicators 4 to 9)

Where possible, we have compared our position with that of our local partners in the Bath, Swindon and Wiltshire Integrated Care System (BSW ICS). Datasets extracted from the South West Workforce Planning and Intelligence Systems Information Pack were used to create a quarterly report for the BSW/South West Region, and any compatible metrics have been taken from the report released in December 2020.







What is the WDES?

Overall picture

to Say

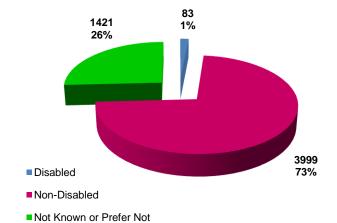
The total number of staff employed at our Trust as at 31 March 2021 is shown below, and compared with previous years.

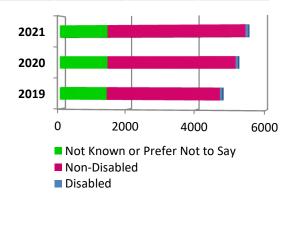
	2018/19	2019/20	2020/21
Total Number of Staff (Headcount)	4755	5211	5503

The proportion of these staff who reported a disability is shown in the following table and graph.

	201	8/19	2019	7/20	2020/21	
	Headcount	% of Staff	Headcount	% of Staff	Headcount	% of Staff
Disabled	64	1.3%	73	1.4%	83	1.5%
Non-Disabled	3298	69.4%	3720	71.4%	3999	72.7%
Not Known or Prefer Not to Say	1393	29.3%	1418	27.2%	1421	25.8%
Total Number of Staff	4755	100.0%	5211	100.0%	5503	100.0%

+748 From 2019 to 2021, our overall workforce has increased by 15.73%.





The following table compares current and historical data for staff who answered the question about their disability status, with those who 'preferred not to say'. It shows that, on average, around one in four of our staff consistently choose not to declare their disability status on the ESR.

	2018/19		2019	9/20	2020/21	
	Headcount	% of Staff	Headcount	% of Staff	Headcount	% of Staff
Disability Declared	3362	70.7%	3793	72.8%	4082	74.2%
Disability Not Declared	1393	29.3%	1418	27.2%	1421	25.8%
Total Number of Staff	4755	100.0%	5211	100.0%	5503	100.0%



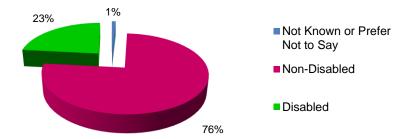
What is the WDES?

The Annual NHS Staff Survey

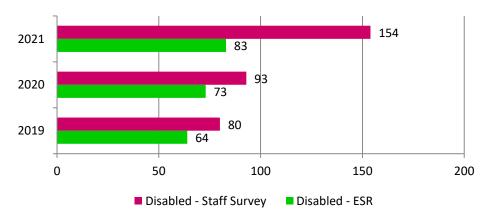
The total number of staff employed at our Trust as at 31 March 2021 is shown below, and compared with previous years.

+13%

- The percentage increase of eligible staff who completed the Annual NHS Staff Survey, between 2019 and 2020;
- It was completed by 660 Great Western Hospital NHS FT staff in 2020;
- We achieved an overall response rate of 53.4% from all eligible respondents;
- 154 staff who completed the NHS Staff Survey declared a disability.



When comparing data from the ESR and the NHS staff survey, we see a disparity in those identifying as having a disability. The disparity has increased over time, as can be shown by the graph below.



Note: For consistency, the rest of the report will use verified data from ESR rather than the Staff Survey results.





Indicator 1

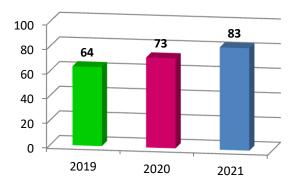
No. of Workforce with a Disability as at March 31 2021

+0.2%

The percentage increase in Trust staff who declared a disability

When our latest results are compared with our results from 2019...

- 1.5% (83) of staff working at The Great Western Hospitals NHS Foundation Trust declared they had a disability.
- This is an increase of 19 staff, as illustrated in the bar chart below.



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The number of disabled staff we would expect to have at the Trust, if the proportion of staff declaring a disability matched the percentage increase in overall staff numbers during this period (15.73% of 748).

There were 19.9% (659) more non-disabled staff in 2021, compared with 2019.

We can see from the table below that our declaring rate is lower than the overall average for other Trusts in BSW ICS.

Staff declari	ng a disability	What we plan to do
BSW ICS Average 3.1%	GWH NHS FT 1.5%	 Increase uptake of recorded personal protected characteristics on our ESR; Raise the profile and awareness of disability issues to increase engagement and allay staff fears.
	Great Western Hospitals NHS Foundation Trust	See Appendix 1 for more detail.



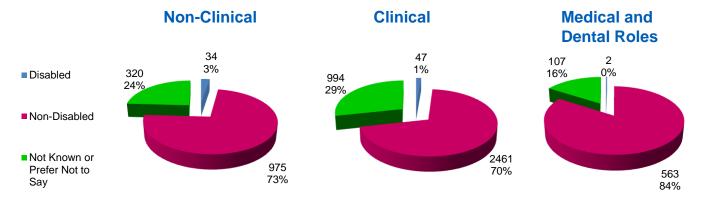


Indicator 1

No. of Workforce with a Disability as at March 31 2021

Clinical and Non-clinical Roles

The following pie charts show the percentage of disabled staff in clinical and non-clinical roles compared with non-disabled staff. 4,174 (76.4%) of our staff are clinical, compared to 1,288 (23.6%) non-clinical.



The majority of our known disabled workforce are employed as...

Bands 5 & 6 Clinical Staff

Our 28 disabled Band 5 & 6 clinical staff represent 1.6% of the total number of Band 5 & 6 Clinical staff (1750).

A breakdown of the workforce by pay band and disability – clinical and non-clinical roles:

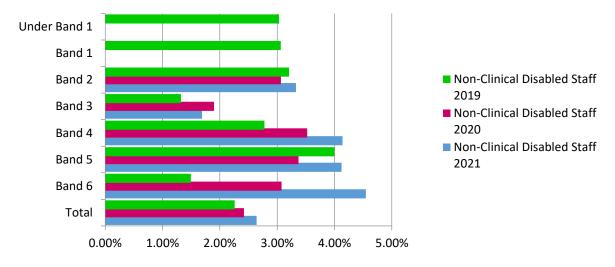
			Non Cl	inical				Clinica	l, Medio	cal and	Dental	
2021	Disabled	Non- Disabled	Prefer Not to Say	Total	Disabled %	Non- Disabled %	Disabled	Non- Disabled	Prefer Not to Say	Total	Disabled %	Non- Disabled %
Under Band 1	0	15	3	18	0.0%	83.3%	0	7	0	7	0.0%	100.0%
Band 1	0	1	0	1	0.0%	100.0%	0	2	0	2	0.0%	100.0%
Band 2	15	331	105	451	3.3%	73.4%	11	468	146	625	1.8%	74.9%
Band 3	6	259	90	355	1.7%	73.0%	2	226	66	294	0.7%	76.9%
Band 4	6	92	47	145	4.1%	63.4%	4	168	109	281	1.4%	59.8%
Band 5	4	73	20	97	4.1%	75.3%	14	640	260	914	1.5%	70.0%
Band 6	3	44	19	66	4.5%	66.7%	14	572	250	836	1.7%	68.4%
Band 7	0	32	18	50	0.0%	64.0%	1	269	120	390	0.3%	69.0%
Band 8A	0	43	9	52	0.0%	82.7%	1	72	34	107	0.9%	67.3%
Band 8B	0	14	3	17	0.0%	82.4%	0	14	8	22	0.0%	63.6%
Band 8C	0	15	3	18	0.0%	83.3%	0	7	0	7	0.0%	100.0%
Band 8D	0	3	1	4	0.0%	75.0%	0	6	1	7	0.0%	85.7%
Band 9	0	7	2	9	0.0%	77.8%	0	1	0	1	0.0%	100.0%
VSM	0	46	0	46	0.0%	100.0%	0	9	0	9	0.0%	100.0%
Consultants							1	186	48	235	0.4%	79.1%
Non- consultants career grade							1	67	16	84	1.2%	79.8%
Trainee grades							0	307	37	344	0.0%	89.2%
Other							0	3	6	9	0.0%	33.3%
Total	34	975	320	1329	2.56%	73.36%	49	3024	1101	4174	1.17%	72.45%



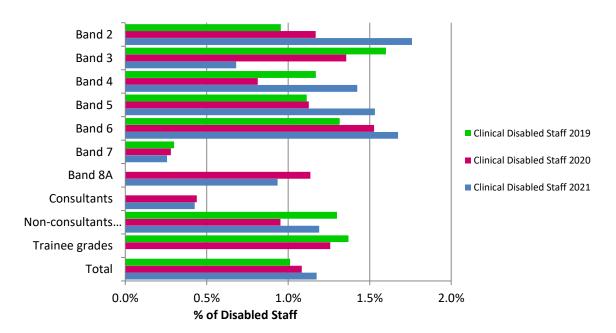


Indicator 1 No. of Workforce with a Disability as at March 31 2021

The following chart shows the changing proportions of disabled staff in movement between pay-bands over the last 3 years, for clinical and non-clinical staff.







Note:

- There are no non-clinical staff who declared a disability beyond Band 6, for 2019-2021, so those bands have been removed from the chart.
- There are no clinical staff with a declared disability below Band 2, or between Bands 8B, Other and VSM level, for 2019-2021, so those bands have been removed from the chart.



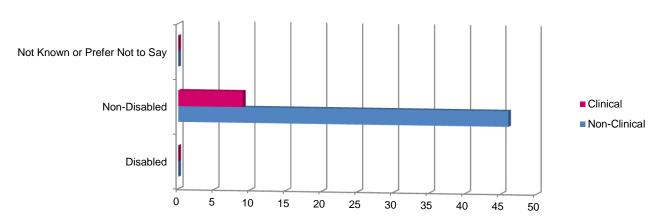


Indicators 1, 10 Disabled Staff in Senior Management Positions

0

The Number of Disabled Staff at Very Senior Manager (VSM) Level in 2021

Declared disability status, clinical and non-clinical staff



		Overall V	Vorkforce		Executive Board Voting Membership		
		No. in Workforce	% in Workforce	No. on Board	% on Board	Difference	
Dis	sabled	83	1.51%	0	0.00%	-1.51%	
No	n-Disabled	3999	72.67%	7	100.00%	27.33%	
	t Known or efer Not to Say	1421	25.82%	0	0.00%	-25.82%	
Tot	tal	5503	100.00%	5	100.00%		

What we plan to do

- Continue with regular stories from staff and patients with disabilities heard at Board Level;
- Use our Differently Abled Network to introduce and review resources to aid our staff with disabilities;
- Increase awareness about the range and scope of disabilities and remove the stigma sometimes associated with them.

See Appendix 1 for more detail



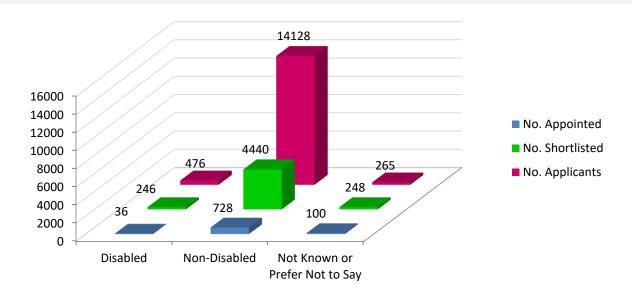
Indicator 2 Disabled Appointments from Shortlisting

The rate at which non-disabled applicants were more likely to be appointed than disabled applicants...

x 1.52	Our Trust in 2020
x 1.12	Our Trust in 2021

- During 2020/21, a total of 476 applicants who declared a disability applied for job roles at GWH;
- 246 were shortlisted for interview, and 36 were appointed;
- If disabled staff were equally as likely to be appointed from shortlisting as non-disabled candidates, then the above figure would be 1.
- This ratio is closer to one in 2021 than it was in 2020. We are therefore showing an Improvement in our position, relative to previous years.

Note: A score of one, or 'parity', means that the measure affects both disabled and non-disabled staff equally. It is therefore a desired outcome.



We are closer to parity than we were in previous years. However, our data shows that a relatively low number of applicants who declare a disability apply for roles in the Trust.

What we plan to do

Continue work at a wider system level to redress issues with recruitment.

See Appendix 1 for more detail





Indicator 3 Disabled Staff and the Formal Capability Process

The rate at which disabled staff were likely to enter the formal capability process, compared with their nondisabled colleagues...

x 2.83	Our Trust in 2020
x 0.00	Our Trust in 2021

Notes:

- This metric looks at capability on the grounds of performance, rather than ill health.
- A capability process is a formal way for an employer to address the circumstances surrounding an employee's 'under performance'. This may involve, for example, reviewing an employee's personnel file, appraisals, and gathering any relevant documents.
- Before starting a disciplinary process, it is recommended that an employer first see whether the problem can be resolved in an informal way. This can often be the quickest and easiest solution.
- Our Trust figure is 0.00, which shows that no disabled staff entered the formal capability process during this
 period.
- If disabled staff were equally as likely to enter the formal capability process as non-disabled staff, then the figure for disabled staff would be 1.
- This is a positive move; because figures from 2020 showed disabled staff were more likely of entering the formal capability process than non-disabled staff.



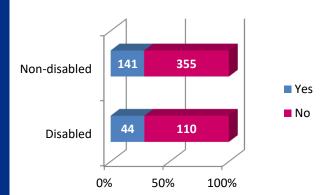
Indicator 4

Disabled Staff experiencing Harassment, Bullying or Abuse*

28.6%

The percentage of disabled staff who reported experiencing harassment, bullying or abuse from patients, relatives or the public.

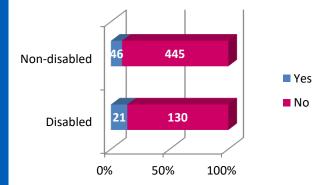
- This is a decrease for disabled staff, when compared to data from both 2018/19 and 2019/20.
- 28.4% of non-disabled staff also reported experiencing harassment, bullying or abuse from patients, relatives or the public.
- GWH figures are lower when compared to the national average across the benchmark group, which records figures of 30.9% for disabled staff and 24.5% for non-disabled staff in 2020.



13.9%

The percentage of disabled staff who reported experiencing harassment, bullying or abuse from managers.

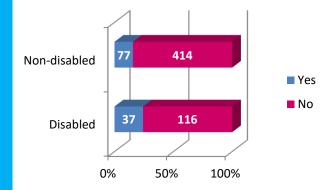
- This is a decrease for disabled staff when compared with data from both 2018/19 and 2019/20.
- 9.4% of non-disabled staff also reported experiencing harassment, bullying or abuse from managers.
- GWH figures are also lower when compared to the national average across the benchmark group, which recorded figures of 19.3% of disabled staff and 10.8% of non-disabled staff in 2020.



24.2%

The percentage of disabled staff who reported experiencing harassment, bullying or abuse from other members of staff.

- This is a decrease for disabled staff looking back at both 2018/19 and 2019/20.
- 15.7% of non-disabled staff also reported experiencing harassment, bullying or abuse from other members of staff.
- GWH figures are lower when compared to the national average scores across the benchmark group, which record figures of 26.9% for disabled staff and 17.8% for non-disabled staff in 2020.







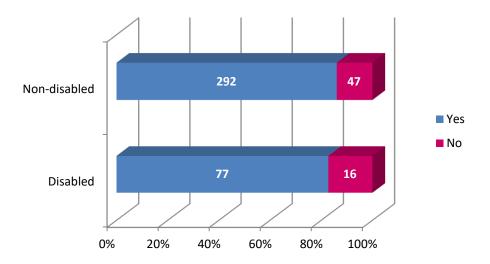
Indicator 5 Disabled Staff believing the Trust provides equal opportunities for career progression or promotion

The percentage of disabled staff who believe Great Western Hospitals NHS FT provides equal opportunities for career progression or promotion.	82.8%
National average WDES findings from benchmark group.	79.6%

We note that:

- This is a similar finding to the previous year for both disabled and non-disabled staff groups, when there was an increase from 2019 (78.3% for disabled staff; 81.7% for non-disabled staff).
- This is an improvement on the national picture. 79.6% of disabled staff and 86.3% of non-disabled staff in 2020 (national figures for 2021 not available at the time of this report).

Disabled and non-disabled staff who believe Great Western Hospitals NHS FT provides equal opportunities for career progression or promotion







Indicator 6 Disabled Staff feeling pressurised to come to work

The percentage of disabled staff who felt pressure from their manager to come to work, despite not feeling well enough to perform their duties.

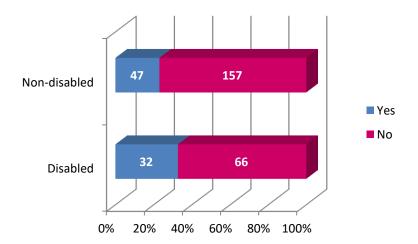
32.7%

- There has been an increase in the number of disabled staff feeling pressure from their manager to come to work, despite not feeling well enough to perform their duties when compared with last year.
- The above figure exceeds reported figures from 2019/20.
- In 2019/20 27.4% of disabled staff and 18.4% of non-disabled staff reported feeling pressurised.

However:

- Our Trust figures are slightly better than the national average.
- Across the benchmark group, 33.0% of disabled staff and 23.4% of non-disabled staff reported feeling pressurised from their managers in 2020.

Disabled and non-disabled staff who felt pressure from their manager to come to work, despite not feeling well enough to perform their duties



What we will continue to do

- Work to reduce levels of harassment, bullying or abuse from manager or colleagues;
- Work to reduce levels of discrimination at work by manager/team leader or colleague;
- Work to reduce levels of harassment, bullying and abuse from patients, relatives or the public;
- Continue our work as part of the BSW ICS, and our commitment to delivering the People Plan. We will
 work with our regional partners to develop a joined-up approach to EDI for the future.
- Increase awareness about the range and scope of staff Wellbeing support services, alongside staff and management training.



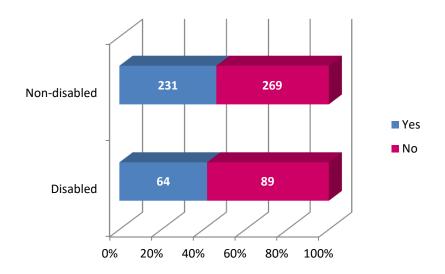


Indicator 7 Disabled Staff whose organisation values their work

The percentage of disabled staff who are satisfied with the extent to which their organisation values their work (2021).	41.8%
The percentage of disabled staff who are satisfied with the extent to which their organisation values their work (2020).	30.8%

- This is an improvement for both disabled and non-disabled staff groups, when compared to our figures for 2020, which showed that only 30.8% of disabled staff at the Trust were satisfied with the extent to which the organisation valued their work (46.2% for non-disabled staff in 2021, up from 43.4% in 2020).
- This is also an improvement on the national picture, which records a lower figure of 37.4% of disabled staff (and 49.3% of non-disabled staff) in 2020. National figures for 2021 not available at the time of this report).

Disabled and non-disabled staff who are satisfied with the extent to which the organisation values their work





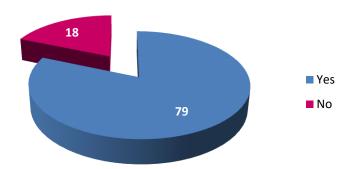


Indicator 8 Disabled Staff Satisfied that Adequate Adjustments are made

The percentage of disabled staff who are satisfied that their employer has made adequate adjustment(s) to enable them to carry out their work.	81.4%
National average WDES findings from the benchmark group.	75.5%

- The staff survey data for this metric only collects responses of disabled staff.
- This is roughly the same position for disabled staff at our Trust, when compared with our Trust findings for 2020 (82.4% for disabled staff).
- This is an improvement on the national picture.

Disabled staff who are satisfied that the trust has made adequate adjustment(s) to enable them to carry out their work







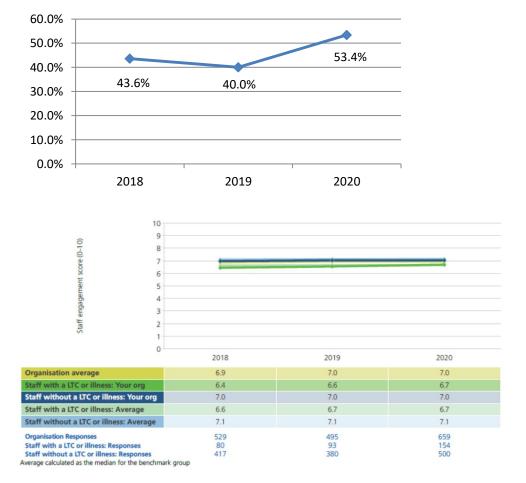
Indicator 9 Disabled Staff Engagement Score

40.0%	Our Trust in 2019
53.4%	Our Trust in 2020

We achieved an improved overall response rate of 53.4% in 2020 from all eligible respondents, which
represents an engagement score of 7.0.

 The engagement score is similar for both our disabled and non-disabled staff groups and compares with the National benchmark group.

Trust engagement scores, 2018 - 2020





Summary of the WDES Indicator Scores

Below is a summary of the WDES indicator scores for our Trust over the last three years, shown as either a percentage or as an indicator (an indicator score of one, or 'parity', being the overall aim). Comparisons are between figures from 2020 and 2021, to rate our direction of travel, with an assessment of positive or negative referring to the indicator's impact on disabled staff.

	WDES Indicator	2019 (benchmark year)	2020	2021	Impac Disabled Direction	d Staff/
	Increase proportions of disabled staff in higher bands					
1	Disabled staff in higher grades	1%	1%	2%	Same	\Leftrightarrow
2	Likelihood of non-disabled staff being appointed from shortlisting compared with disabled staff	x1.66	x1.52	x1.12	Down +ve	Û
3	Likelihood of disabled staff entering the formal capability process	x2.62	x2.83	x0.00	Down +ve	Û
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	32.5% disabled 24.9% not disabled	35.5% disabled 26.4% not disabled	28.6% disabled 28.4% not disabled	Down +ve	Û
	ii. Managers	22.8% disabled 9.5% not disabled	15.1% disabled 6.7% not disabled	13.9% disabled 9.4% not disabled	Down +ve	Û
	iii. Other colleagues	33.3% disabled 17.0% not disabled	24.4% disabled 16.4% not disabled	24.2% disabled 15.7% not disabled	Similar	\Leftrightarrow
5	Believing that the Trust provides equal opportunities for career progression or promotion	78.3% disabled 81.7% not disabled	83.1% disabled 85.7% not disabled	82.8% disabled 86.1% not disabled	Similar	\Leftrightarrow
6	Felt pressure from their manager to come to work, despite not feeling well enough to perform their duties.	37.9% disabled 23.2% not disabled	27.4% disabled 18.4% not disabled	32.7% disabled 23.0% not disabled	Up -ve	1
7	Satisfied with the extent to which their organisation values their work.	28.8% disabled 44.8% not disabled	30.8% disabled 43.4% not disabled	41.8% disabled 46.2% not disabled	Up +ve	Û
8	Percentage of disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work.	75.0%	82.4%	81.4%	Up +ve	Û
	a) Staff engagement score (10 = highest score)	6.4 disabled 7.0 not disabled	6.6 disabled 7.0 not disabled	6.7 disabled 7.0 not disabled	Similar	\Leftrightarrow
9	b) Has your Trust taken action to facilitate the voices of disabled staff in your organisation to be heard? (Yes) or (No)	No	No	Yes	Up +ve	Û
	Explanation on the above: The Trust has created a Disability Equality Network in 2021, as a space for staff with visible and non-visible disabilities and impairments to connect, share experiences and information, and support each other. The Network also raises and promotes awareness of disability issues, and shares best practice.					
10	Percentage difference between the proportion of the Board voting membership and the proportion of the organisation's overall workforce	0%	-1%	-2%	Down -ve	1

Key for disabled staff progress against WDES indicators

Improvement

Similar findings

Deterioration

19





Summary of Key Findings

Our data presents a broadly positive picture regarding career progress and improved work experiences for staff with disabilities. The majority of indicators for the WDES show an improvement on scores from previous years, and when viewed against the national averages.

Our staff who declare a disability are:

- More likely than in previous years to be appointed to roles once shortlisted;
- Less likely to enter the formal capability process;
- Less likely to experience abuse from managers and members of the public;
- Increasingly more satisfied with adjustments made to the workplace, and with the value our organisation places on them and their work.

There are areas where our progress is less marked. Namely:

- We have yet to have any members of our Executive team or Board with a declared disability;
- Very few staff (83, or 1.5%) have self-declared a disability;
- Staff have felt more pressured than in previous years to come to work, when not feeling well enough to perform their duties.
- There is a disparity between the number of staff declaring a disability through the ESR, and the number of staff declaring a disability when completing the National NHS Staff Survey.

With such low numbers declaring a disability, and with a disparity in numbers between the ESR and NHS staff survey, it is difficult to draw firm conclusions. However, we have created a Disability Equality Network, in March 2021, and will aim to build on the work being done through this route.





Workforce Disability Equality Standard Indicators

Workforce	Metrics			
For the following three workforce metrics, compare the data for both Disabled and non-disabled				
staff.				
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. Organisations should undertake this calculation separately for non-clinical and for clinical staff.			
	Cluster 1: AfC Band 1, 2, 3 and 4 Cluster 2: AfC Band 5, 6 and 7 Cluster 3: AfC Band 8a and 8b Cluster 4: AfC Band 8c, 8d, 9 and VSM (including Executive Board members) Cluster 5: Medical and Dental staff, Consultants Cluster 6: Medical and Dental staff, Non-consultant career grade Cluster 7: Medical and Dental staff, Medical and dental trainee grades			
	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			
Metric 2	Relative likelihood of non-disabled staff compared to Disabled staff entering the formal capability process, as measured by entry into the formal capability procedure. Note:			
	i) This refers to both external and internal posts			
	ii) If your trust 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 online reporting form to ensure comparability between organisations.			
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.			
	Note:			
	This metric will be based on data from a two-year rolling average of the			
	current year and the previous year ii) This metric applies to capability on the grounds of performance and not ill health.			
National N	HS Staff Survey Metrics			
	For each of the following four Staff Survey Metrics, compare the responses for both Disabled			
and non-disabled staff				
Metric 4 Staff Survey Q13a-d	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			





Workforce Disability Equality Standard Indicators

Metric 5	Percentage of Disabled staff compared to non-disabled staff believing that
Staff Survey	the Trust provides equal opportunities for career progression or promotion.
Q14	
Metric 6	Percentage of Disabled staff compared to non-disabled staff saying that
Staff Survey	they have felt pressure from their manager to come to work, despite not
Q11e	feeling well enough to perform their duties.
Metric 7	Percentage of Disabled staff compared to non-disabled staff saying that they
Staff Survey	are satisfied with the extent to which their organisation values their work.
Q5f	

The following NHS Staff Survey metric only includes the responses of Disabled staff

Metric 8 Staff Survey Q26b

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

NHS Staff Survey and the engagement of Disabled staff

For part a) of the following metric, compare the staff engagement scores for Disabled and non-disabled staff

For part b) add evidence to the Trust's WDES Annual Report

Metric 9

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

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 your WDES annual report. Examples are listed in the national WDES 2019 Annual Report.

Board representation metric

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

Metric 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.





Updated Action Plan

Following the results of the Trust WDES, an following action plan was developed and has been updated for 2021/22 areas of focus and to improve. The table cells coloured blue below contain measures developed with our local partners as part of a system wide approach to overhaul recruitment processes. The measures have not been finalised at Executive level.

Key Action	Steps to achieve action	Due by	Desired Outcomes
Achieve Disability Confident Leader Level III	 Improved recruitment processes to ensure attraction of diverse candidates; Promote best practice standards in line with the level 3 requirements; Validate self assessment by recognised validator organisations; Encourage other employers to make the journey to become Disability Confident; Report using the Voluntary Reporting Framework. 	End of 2022 to achieve Level 3 status	More candidates with disabilities attracted to roles and appointed to post from shortlisting.
Increase uptake of recorded personal protected characteristics on ESR	 Continue with campaign to encourage staff to update personal information on ESR; Run quarterly ESR reports to see rates of data submission on ESR; Publicise importance of data collection via Trust Comms and EDI newsletter, and EDI Podcasts; Use targeted emails to contact staff showing as "Not Known" in any of the protected characteristic monitoring information fields on ESR and ask if they are prepared to discuss concerns about declaring this information. EDI Lead to work with Head of Quality to ensure that a standard set of equality data is recorded across all directorates in the Trust. 	June 2022	More targeted interventions to improve services and experiences for staff. More staff self-declaring personal protected characteristics. Decrease unknown/ null figures by 5% (currently 26%)
Raise the profile and awareness of disability issues	 Continue with regular stories at Board Level, The Differently Abled Network to introduce and review resources to aid our staff with disabilities, that also recognise the diversity of mental and physical health issues included under this term. To continue to embed Equality, Diversity and Inclusion into strategic decision making committees and forums; Increase membership of DAN and diversity of voices. 	Ongoing Ongoing Ongoing Ongoing	Greater awareness throughout organisation of the range and scale of disability issues in the Trust; Greater awareness to Trust Board and Senior Leaders around equality issues and information included in monthly Workforce Report Increased visibility of ED&I at Trust Board and Senior Leaders with ED&I topics on agenda quarterly.





Updated Action Plan

Updated Action Plan				
Key Action	Steps to achieve action	Due by	Desired Outcomes	
Improved recruitment processes to ensure attraction of diverse candidates Introduce a system of constructive and critical challenge to ensure fairness during interviews. This system includes requirements for diverse Interview panels, and the presence of an equality representative who has authority to stop the selection process before offer is made, if it is deemed unfair and complements the need for accountability	 Adopting diverse interview panels for Exec and VSM OR across the Trust where possible; Explore the inclusion of patients on focus groups; Recruiting managers to undertake 'License to Recruit' mandatory training which includes EDI and unconscious bias training; Pilot the introduction of a 'critical friend', to observe and review consistency across interview panels (target areas based on experience feedback, ensuring different roles and banding are included). 	31 December 2022 31 March 2022 31 March 2022 31 March 2022	Training to be included as role essential At least 1 member of the recruitment panel has completed the "License to Recruit" training Monitoring of training compliance	
Organise talent panels to: a) Create a 'database' of individuals by system who are eligible for promotion and development opportunities such as Stretch and Acting Up assignments must be advertised to all staff b) Agree positive action approaches to filling roles for under-represented groups c) Set transparent minimum criteria for candidate selection into talent pools	 Standardise adverts to include applicants welcomed from underrepresented groups; Use CPD/Appraisals to support Divisions creating a database of individuals who are eligible for promotion. Ensure this succession planning data is captured in Divisional workforce planning; Collate feedback from wider community groups to reach candidates (areas to include; where we advertise, type of advertisement, language used) 	30 June 2021 31 March 2022 31 October 2021	Monitoring of progress through relevant governance routes	
Enhance EDI support available to: a) Train organisations and HR policy teams on how to complete robust / effective Equality Impact Assessments of recruitment and promotion policies b) Ensure that for Bands 8a roles and above, hiring managers include requirement for candidates to demonstrate EDI work / legacy during interviews	 Incorporate questions for bands 8a level roles that enable candidates to demonstrate their EDI experience, commitment and engagement. Internal communications to promote the importance of completing effective Equality Impact Assessments and the governance process on monitoring EIA's. 	30 Sept 2021 31 March 2022	Monitoring of progress through relevant governance routes	
Overhaul interview processes to incorporate: a) Training on good practice with instructions to hiring managers to ensure fair and inclusive practices are used. b) Ensure adoption of values based shortlisting and interview approach. c) Consider skills-based assessment such as using scenarios	 Compulsory for all recruiting managers to complete the License to Recruit training to promote good practise (training includes EDI, unconscious bias and safeguarding). This will be monitored and reported. Create best practise document that can be distributed to recruiting managers across the Trust. Values based recruitment to be explored and implemented across the system (BSW RRS Objective) 	31 Dec 2022 31 October 2021 31 March 2022	Monitoring of progress through relevant governance routes	
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Updated Action Plan

Key Action	Steps to achieve action	Due by	Desired Outcomes
Adopt resources, guides and tools to help leaders and individuals have productive conversations about race	 Developing a range of teaching resources that focus on intersectionality (audio visual, newsletter, fresh eyes, feedback from all networks – BAME, DAN, LGBQT…) 	31 March 2022	Monitoring of progress through relevant governance routes