



Somerset

NHS Foundation Trust



Workforce Disability Equality Standard (WDES) Annual Report 2020

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1 Introduction

The Workforce Disability Equality Standard (WDES) is a set of specific measures designed to enable NHS organisations to compare the experiences of disabled and non-disabled colleagues. This information can then be used to develop a local action plan, and enable demonstration of progress against the indicators of disability equality.

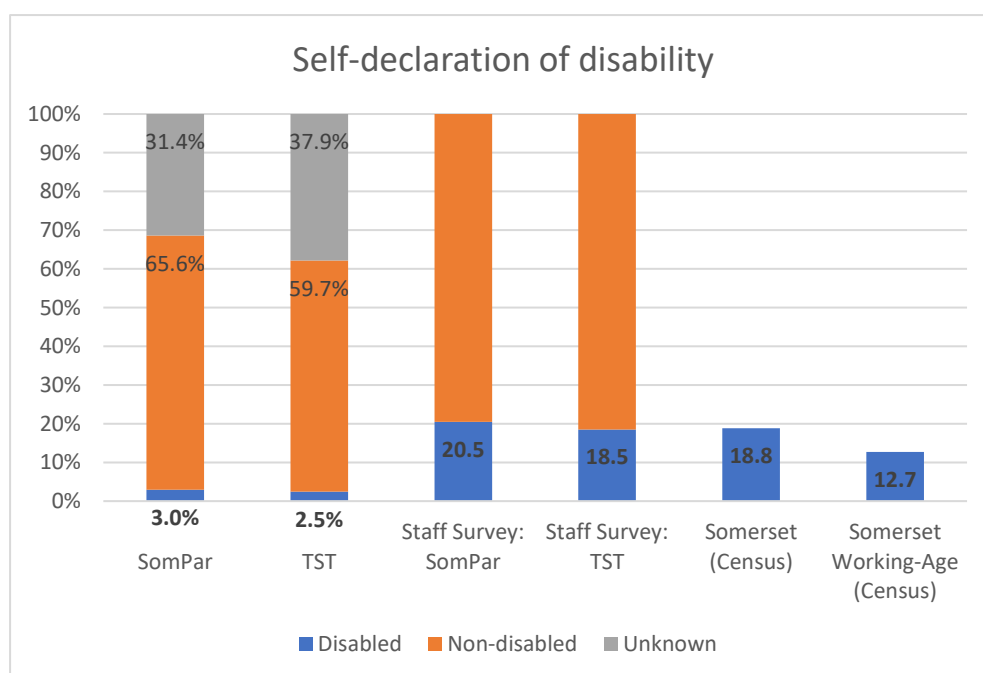
The first reporting on the WDES was in August 2019 for the 2018/2019 financial year. This is therefore the second year of the WDES Reporting. For most of the ten metrics, we have two separate sets of data: one from each legacy trust. Our reporting for next year will be simpler as there will be one set of data.

Terminology

For the purpose of the WDES metrics, many of the reports are presented using the term 'disabled staff' and 'non-disabled staff'. These are not terms we would usually use, however, they are used by the standard reporting measures and are therefore used in some parts of this report to mean colleagues declaring a disability, or colleagues living with disabilities.

Declaration rates

The information for several of the WDES metrics is taken from the Electronic Staff Record of each colleague. This information is updated and maintained by the colleague themselves and so we rely on a high degree of colleague activation to ensure that the WDES information is accurate. Declaration of disability is low for both legacy trusts, at 3.0% for SomPar and 2.5% for TST.



For comparison, the declaration rates of disability in the 2019 Staff Survey are 20.5% for SomPar and 18.5% for TST (for a sample of 1,598 and 2,259 respectively). This is much higher than the declaration on the ESR, which is likely due to the fact that the sample group for the staff survey is self-selecting and, by definition, keen to participate in feedback of this type. Also the mechanism to complete the staff survey is much simpler than the procedure for logging into and declaring disability in the ESR.

According to the 2011 census, just under 100,000 people in Somerset (18.8% of the population) said they had a long-term condition or disability which limited their day-to-day activities a lot or a little. Almost 41,000 of them were aged 16-64 (12.7% of that age group in Somerset). The proportion is on a par with both regional and national averages. Therefore the proportion of colleagues declaring a disability on the staff survey is likely to be higher than for the general working aged population, but the proportion declaring on the ESR is likely to be much lower.

We have encouraged colleagues to update their ESR over the last year, by moving payslips onto the ESR platform and with wider staff communications around this. However, declaration rates are still very low and this is something we need to improve.

2 Summary on a page

Metric 1

Workforce Representation

Declaration of disability is low for both legacy trusts, at 3.0% for SomPar and 2.5% for TST. There is a complicated picture of representation across the workforce.

Metric 3

Capability

For both legacy trusts, no staff with disabilities were recorded as entering the formal capability process.

Metric 5

Career progression

Disabled staff are less likely to consider that the trust provides equal opportunities for progression for SomPar (86.7% vs 91%) and TST (81.4% vs 88.6%).

Metric 7

Feeling valued

Disabled staff do not feel their work is valued as much as non-disabled staff for both SomPar (42.7% vs 51.1%) and TST (43.8% vs 55%).

Metric 9

Disabled staff engagement

Overall, staff survey results showed that disabled staff felt less engaged than non-disabled staff (Score of 6.9 vs 7.3 for SomPar and 7.0 and 7.4 for TST).

Metric 2

Recruitment

Disabled people are less likely to be appointed to roles. Non-disabled job applicants are 1.13 times more likely to be appointed from shortlisting compared to Disabled applicants.

Metric 4

Harassment, bullying, abuse

Disabled staff are more likely to experience harassment, bullying or abuse from managers, other colleagues and service users. For both legacy trusts, the highest prevalence of harassment, bullying or abuse for both Disabled and non-disabled staff was from patients/service users.

Metric 6

Presenteeism

Disabled staff have felt pressure from their manager to attend work when not feeling well enough more often than non-disabled staff for both SomPar (20.9% vs 14.4%) and TST (27.7% vs 15.9%).

Metric 8

Workplace adjustments

79.9% of disabled staff from TST and 76.8% of staff from SomPar felt that their employer had made adequate adjustments to enable them to work.

Metric 10

Board representation

No Board members, either Exec or Non-Exec, have declared that they live with a disability.

3 WDES metrics 2019/20

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.

For the purpose of the WDES, pay bands are separated into the following clusters:

Non-clinical:

Cluster 1 (Under Band 1, Bands 1-4)

Cluster 2 (Band 5 - 7)

Cluster 3 (Bands 8a - 8b)

Cluster 4 (Bands 8c - 9 & VSM)

Clinical:

Cluster 1 (Under Band 1, Bands 1-4)

Cluster 2 (Band 5 - 7)

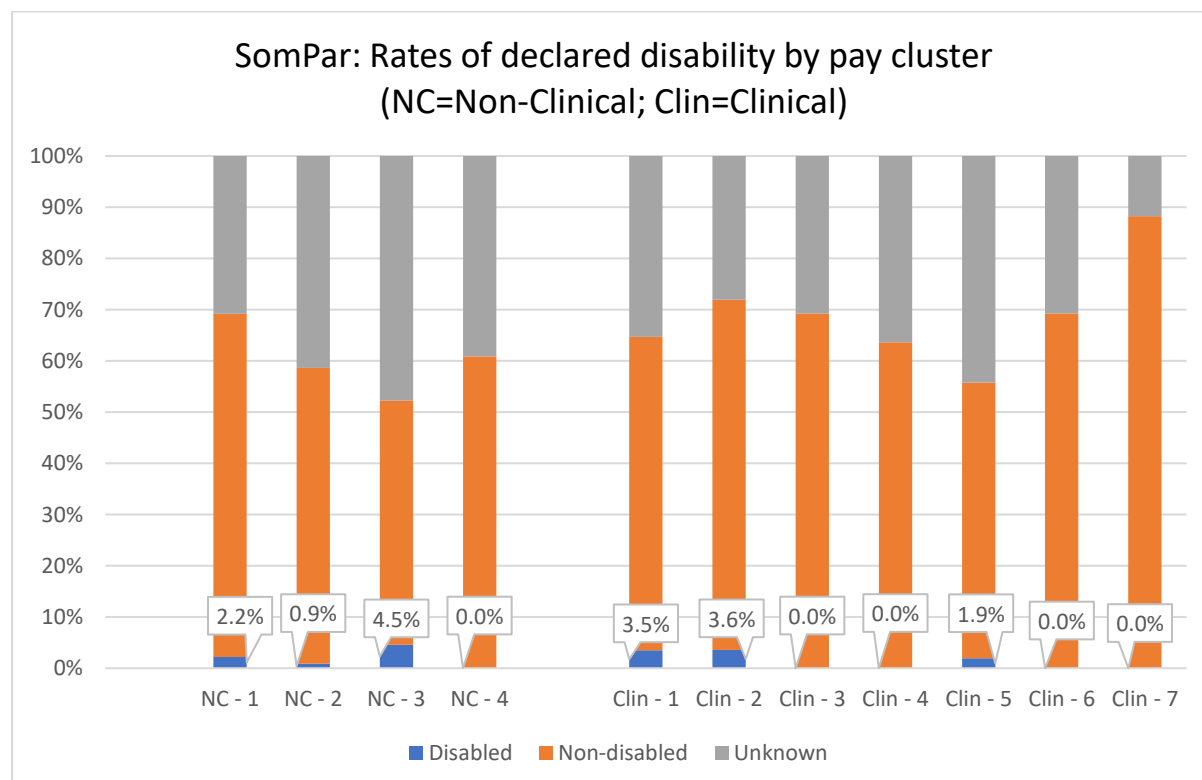
Cluster 3 (Bands 8a - 8b)

Cluster 4 (Bands 8c - 9 & VSM)

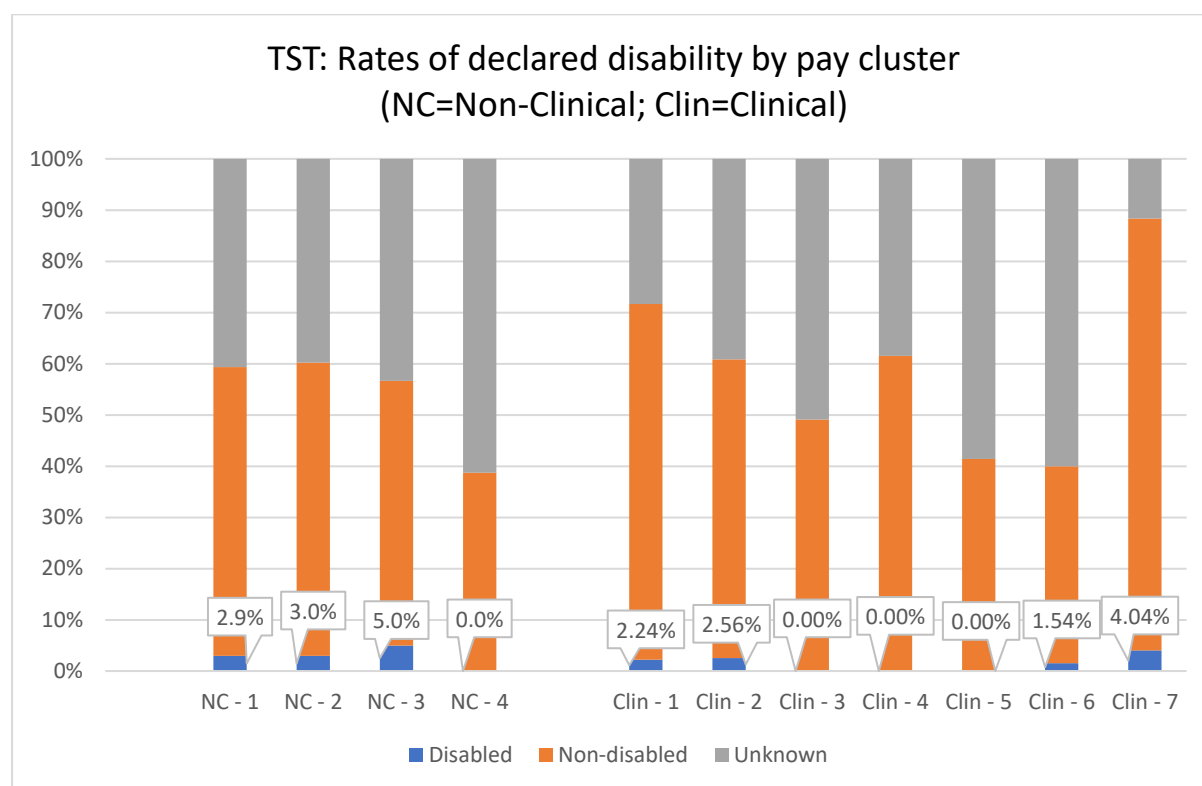
Cluster 5 (Medical & Dental Staff, Consultants)

Cluster 6 (Medical & Dental Staff, Non-Consultants career grade)

Cluster 7 (Medical & Dental Staff, Medical and dental trainee grades)



For SomPar, there are higher rates of disability for the lower bands for clinical staff; this is not so marked for non-clinical staff. Fewer senior clinical staff are disabled compared with staff at lower bandings.



For TST, there is a similar pattern, however, there is perhaps a surprisingly high rate of disability (4.04%) for the most senior clinical cluster (Medical & Dental Staff, Medical and dental trainee grades). However, this cluster is also the one with the highest rates of declaration of disabled status, with only 11% not declared/unknown, compared with an 'unknown' across the whole workforce of 37.9% for TST and 31.4% for SomPar. Therefore this may represent a more accurate picture of disability due to a higher rate of declaration.

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

Disabled staff are less likely to be appointed to roles. The metric uses the relative likelihood ratio to compare the probability of non-disabled people being appointed from shortlisting with the probability of Disabled individuals being appointed.

For this metric, both legacy trusts used the same data as job applications were being managed through a single process. Of over 5,000 applications that were shortlisted, 4.9% declared a disability, and of applicants appointed, 4.2% declared a disability.

The relative likelihood of non-disabled staff compared to disabled staff being appointed from shortlisting is 1.13. This means that non-disabled applicants are slightly more likely to be appointed. (This may not be surprising as any applicants declaring a disability that meet the essential criteria should be shortlisted under the Disability Confident scheme.) The figure of 1.13 is slightly lower than last year's national figure of 1.23.

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.

For both legacy trusts, no staff with disabilities were recorded as entering the formal capability process, and therefore this score was 0.

Metric 4 – Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse.

Disabled staff are more likely to experience harassment, bullying or abuse from managers, other colleagues and service users.

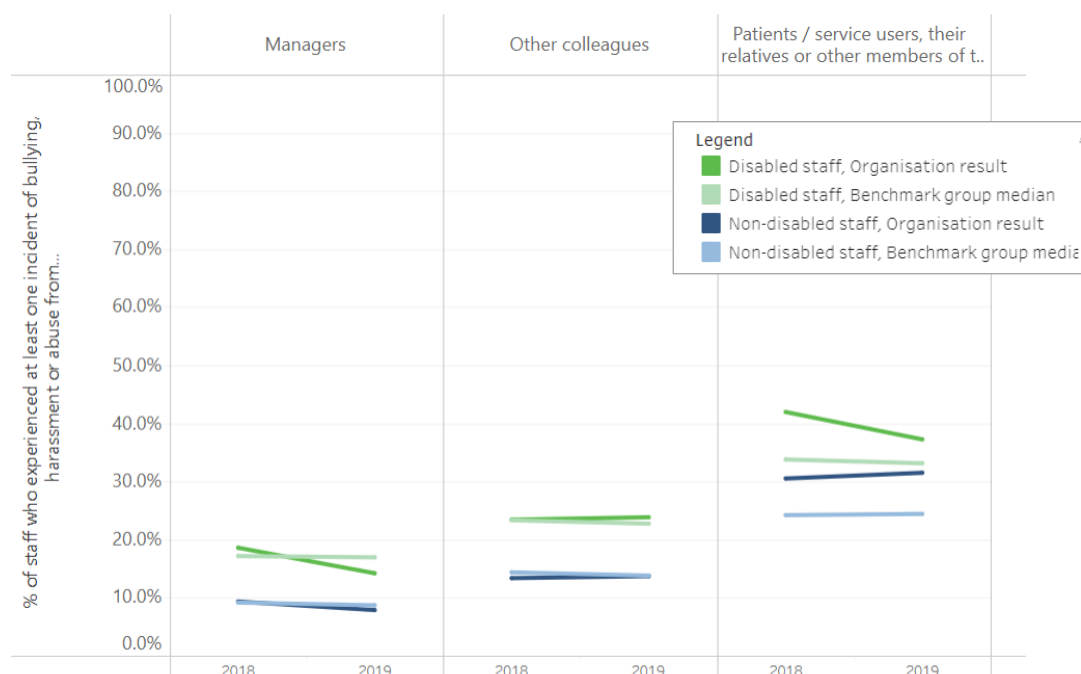


Figure 1 Somerset Partnership Staff Survey results 2019

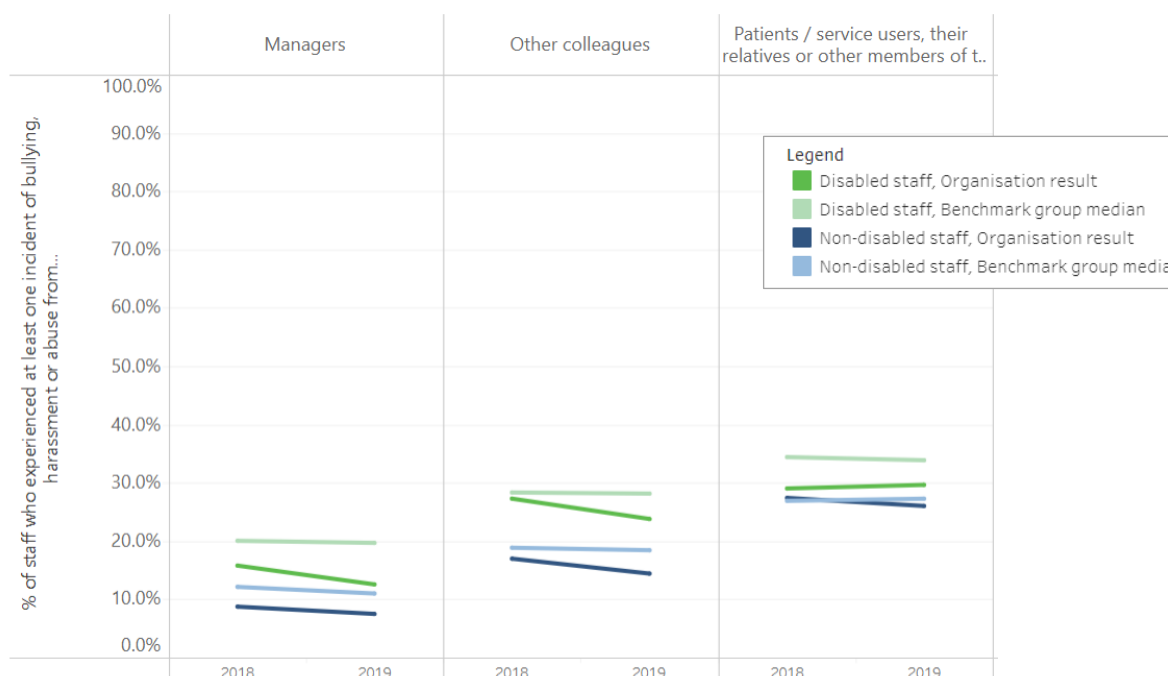


Figure 2: Taunton and Somerset Staff Survey Results 2019

For SomPar staff, the highest prevalence of harassment, bullying or abuse for both Disabled and non-disabled staff was from patients/service users (37.2% vs 31.5%). For TST staff, the highest prevalence of harassment, bullying or abuse for both

Disabled and non-disabled staff was from patients/service users (29.6% vs 26%). The percentage of disabled staff experiencing at least one incident of bullying, harassment or abuse from colleagues was 23.8% for TST (14.4% of non-disabled staff) and 23.8% for SomPar (13.7% of non-disabled staff).

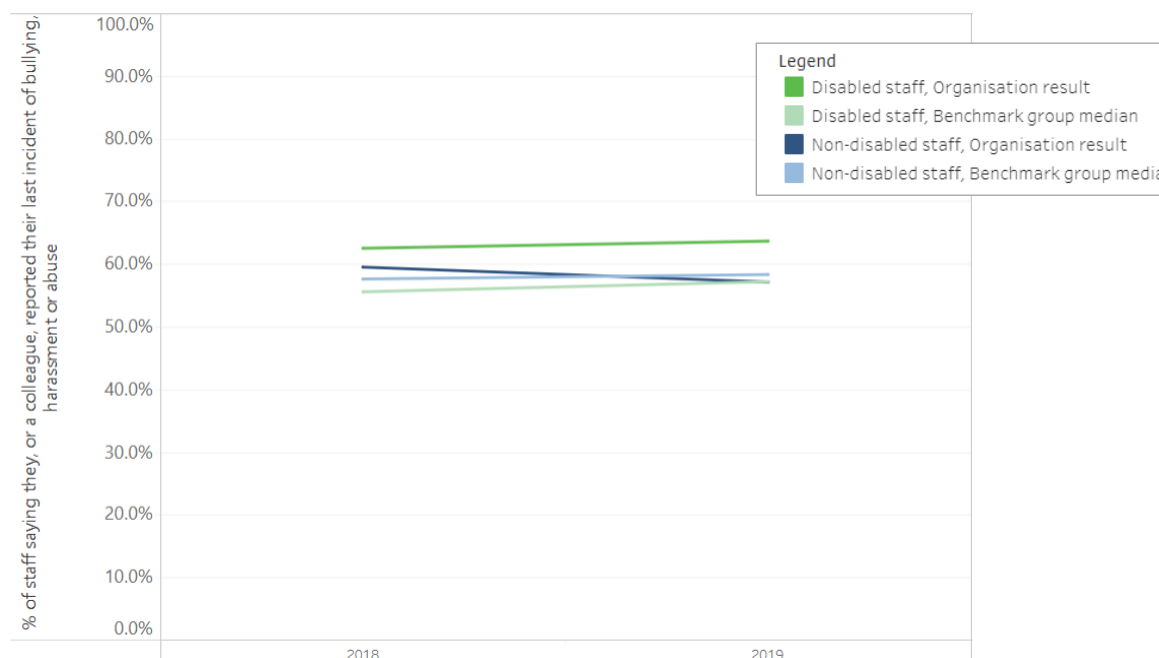


Figure 3: Somerset Partnership Staff Survey 2019

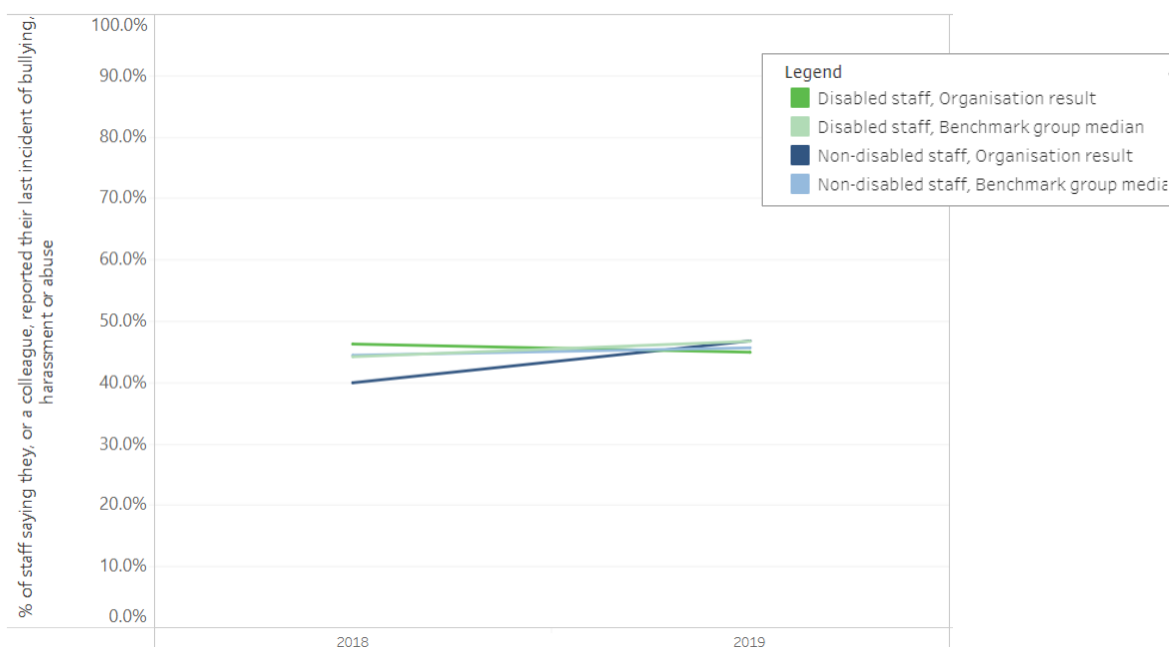


Figure 4: TST Staff Survey 2019

Following an incident of harassment, bullying or abuse, slightly more Disabled staff than non-disabled staff stated that the incident had been reported for SomPar (63.6% vs 57.1%) but this was not the case in TST (44.9% vs 46.7%). The rates of reporting are significantly higher for SomPar staff.

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

Disabled staff are less likely to consider that the trust provides equal opportunities for progression for SomPar (86.7% vs 91%) and TST (81.4% vs 88.6%).

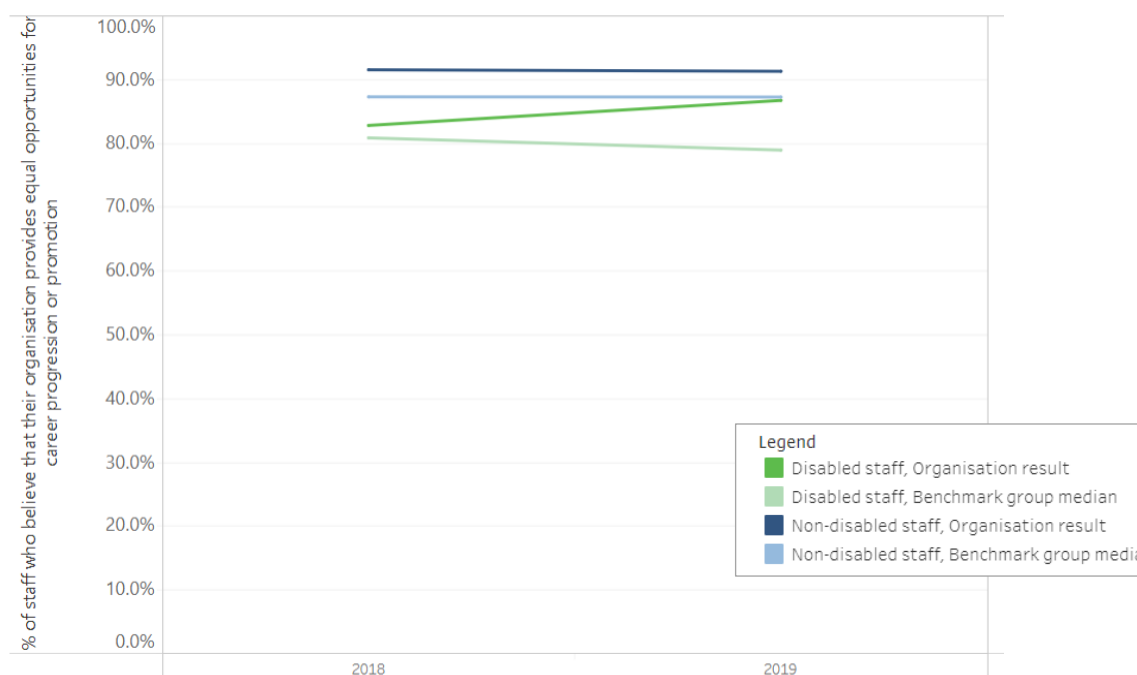


Figure 5: Somerset Partnership Staff Survey 2019

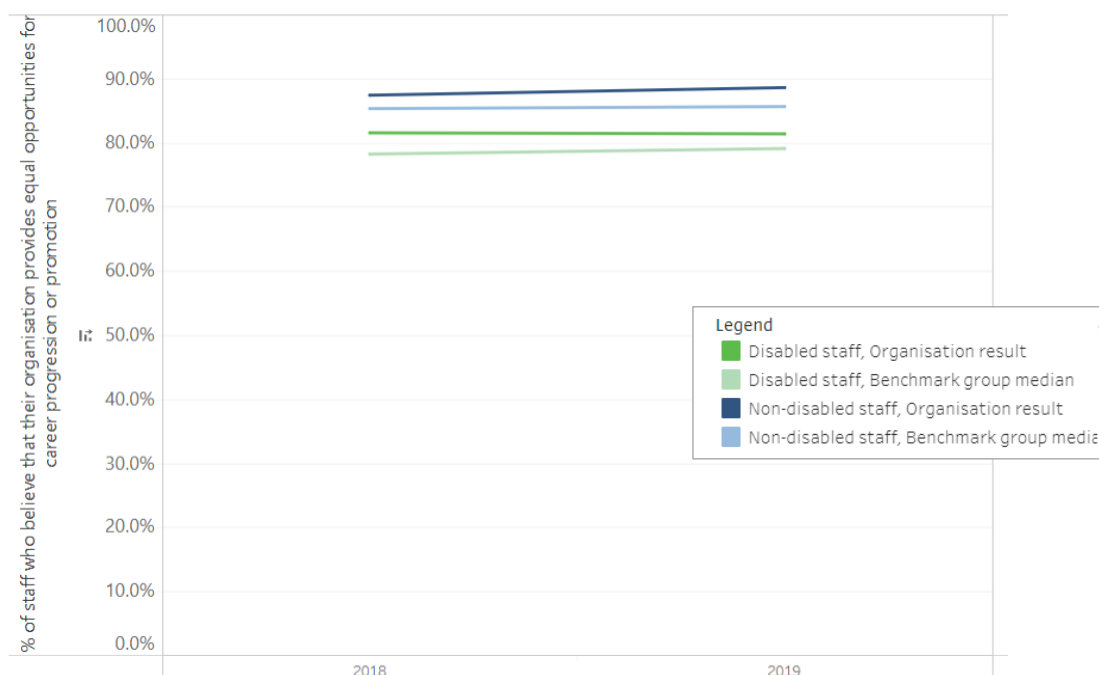


Figure 6: TST Staff Survey 2019

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.

Disabled staff have felt pressure from their manager to attend work when not feeling well enough more often than non-disabled staff for both SomPar (20.9% vs 14.4%) and TST (27.7% vs 15.9%).

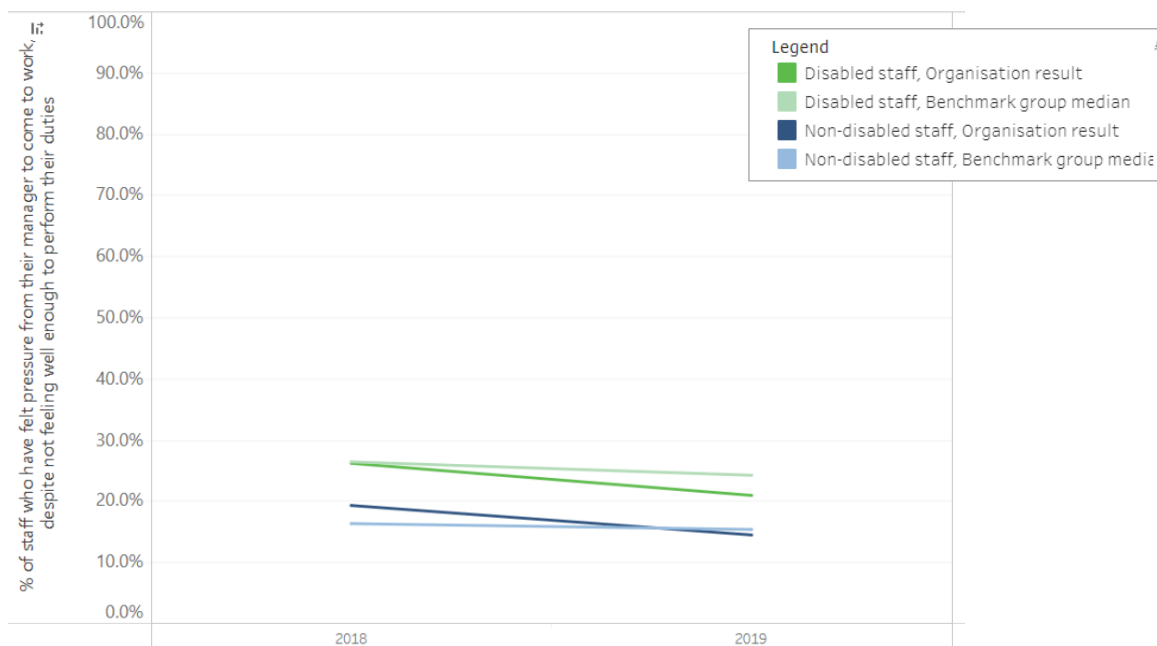


Figure 7: Somerset Partnership Staff Survey 2019

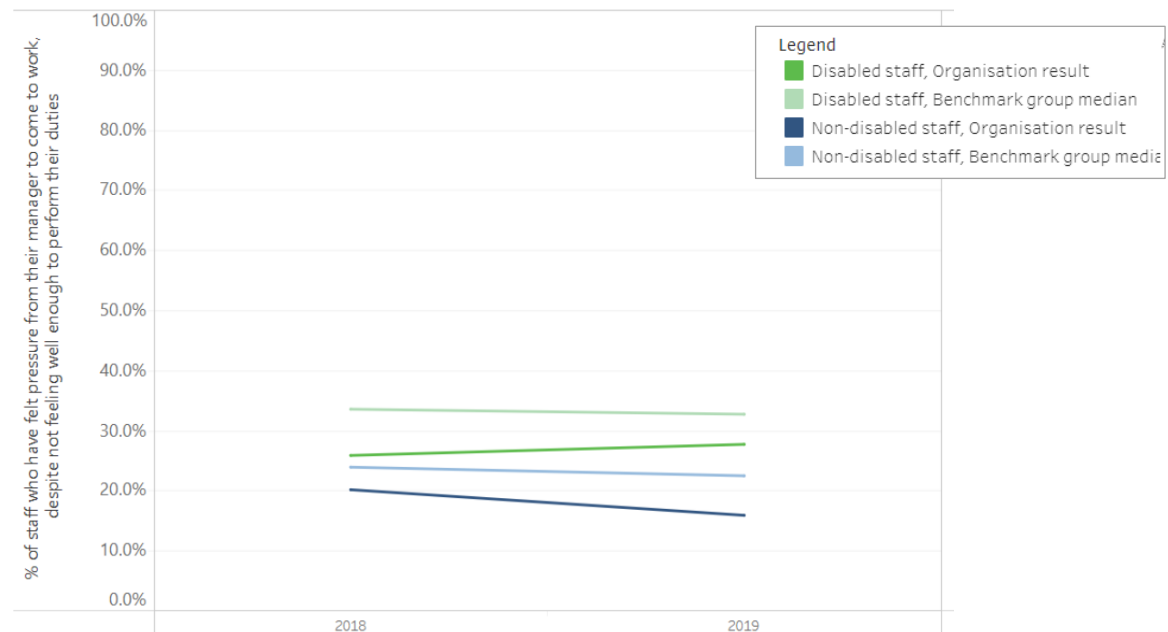


Figure 8: TST Staff Survey 2019

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.

Disabled staff do not feel their work is valued as much as non-disabled staff for both SomPar (42.7% vs 51.1%) and TST (43.8% vs 55%).

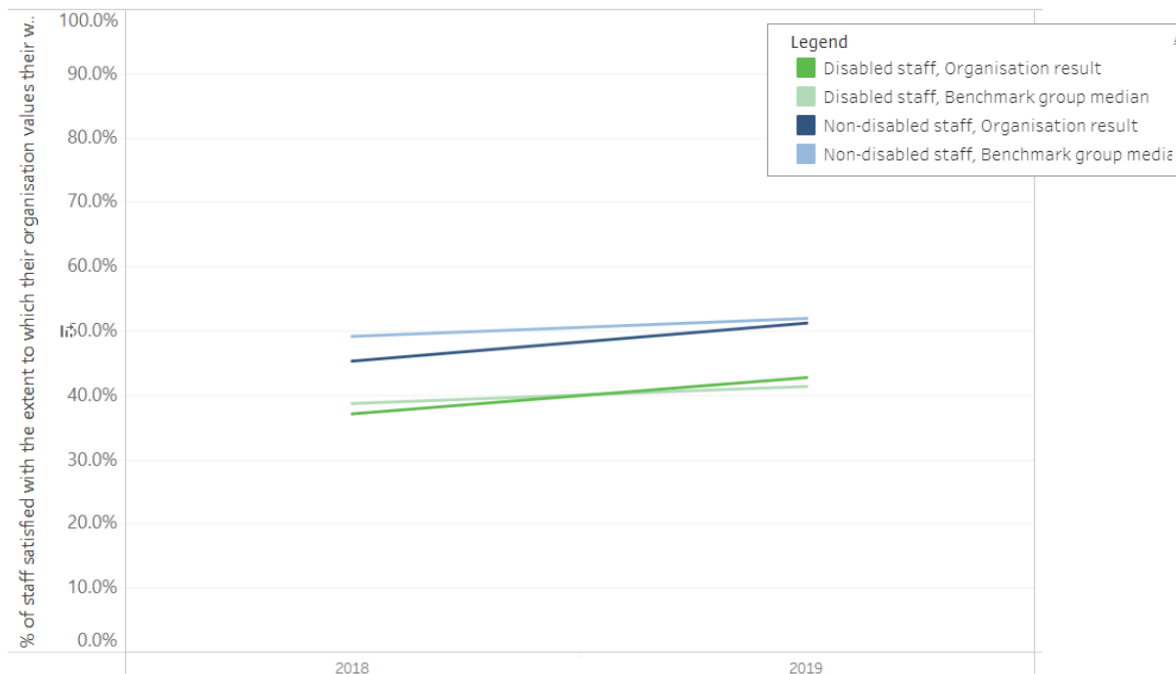


Figure 9: Somerset Partnership Staff Survey 2019

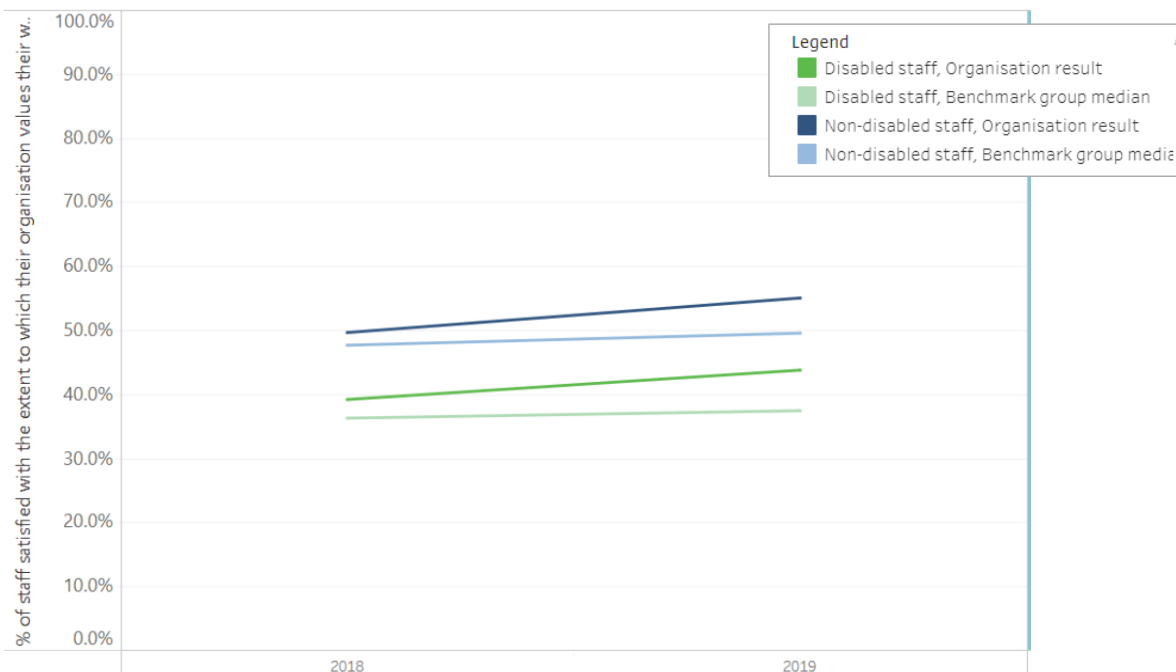


Figure 10: TST Staff Survey 2019

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

79.9% of disabled staff from TST and 76.8% of staff from SomPar felt that their employer had made adequate adjustments to enable them to work.

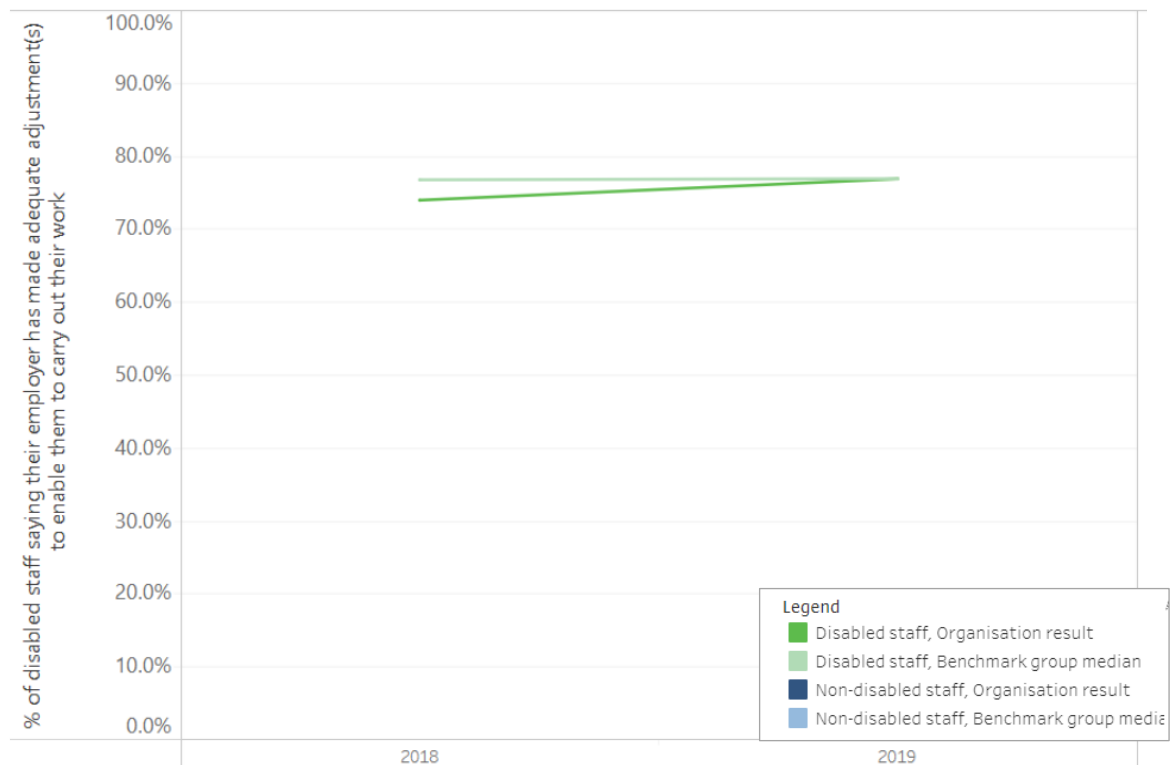


Figure 11: SomPar Staff Survey 2019

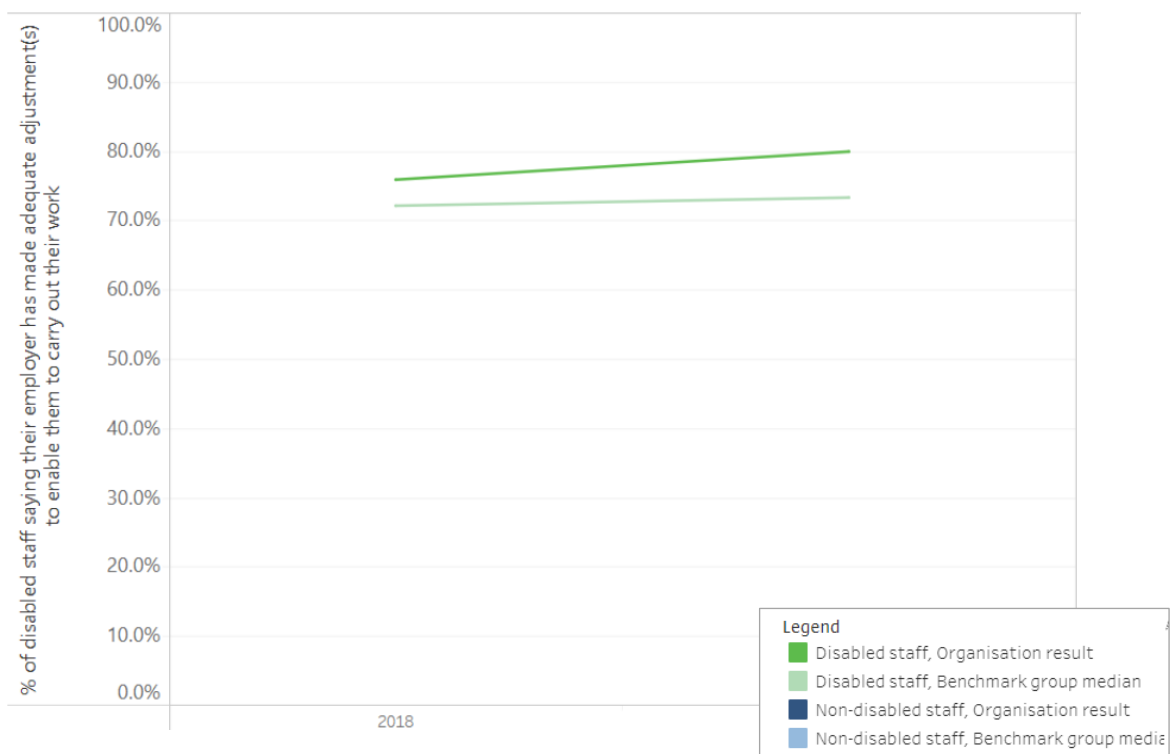


Figure 12: TST Staff Survey 2019

Metric 9 – NHS Staff Survey and the engagement of Disabled staff

Overall, staff survey results showed that disabled staff felt less engaged than non-disabled staff (Score of 6.9 vs 7.3 for SomPar and 7.0 and 7.4 for TST).

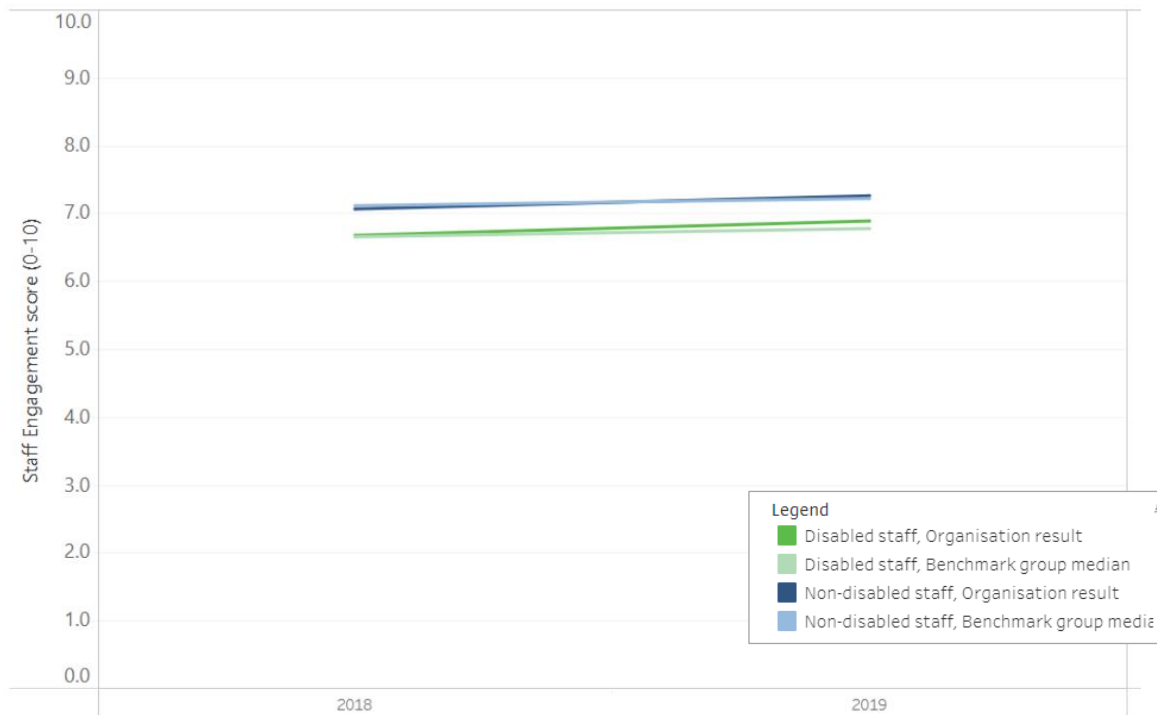


Figure 13: SomPar Staff Survey 2019

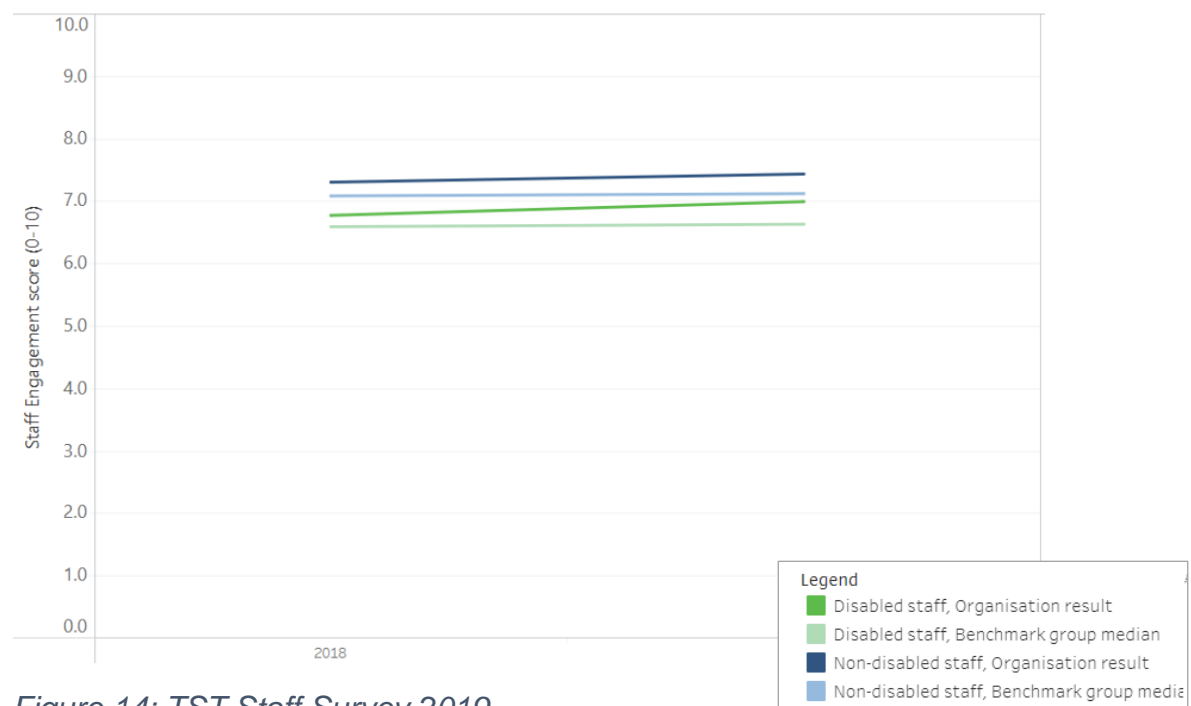


Figure 14: TST Staff Survey 2019

Metric 10 – Percentage difference between the organisation’s board voting membership and its organisation’s overall workforce.

No Board members, either Exec or Non-Exec, have declared that they live with a disability on ESR. Therefore the difference for each legacy trust is the same as the percentage of the overall workforce that have declared a disability; 3% for SomPar and 2.5% for TST.

4 Conclusion and next steps

The action plan below has been developed by the trust’s colleague network for people with disabilities, the Lived Experience Network.

This action plan will be monitored through both the Inclusion Steering Group on an ongoing basis.

For more information

For more information about this report, please email the Inclusion Team on inclusion@somersetft.nhs.uk.

September 2020

Workforce Disability Equality Standard Action Plan 2020/21

Metric	Objective	Action/s	Timescales	Lead/s	Why
1, 10	Increase rates of declaration	Communications with staff to explain how to update ESR: ongoing. Work with Board (see Metric 10) and publicise this.	June 2021	LEN Network Leads/ Inclusion Manager	More accurate information will then be available and we will have a clearer picture of our workforce's disabled representation.
2	Fairer recruiting of disabled people	Explore options for improved reasonable adjustments for interviews, particularly for people who are not neurotypical.	March 2021	LEN Network Leads/ Inclusion Manager	Improves equality of opportunity for candidates.
4, 6, 7, 9	Improve understanding of disabilities in the workplace	Develop/explore training around understanding disabilities in the workplace.	June 2021	Inclusion Manager / Recruitment	Raise awareness and understanding.
“	“	Explore a shared staff network badge promoting kindness.	June 2021	Inclusion Manager/Network leads	Visible sign of our values and mission.
“	“	Sunflower Lanyards: pilot in key areas and roll out.	December 2020	Inclusion Manager and LEN	“ and improve patient environment.

8	Improve feelings of value, acceptance and belonging/welcome	Roll out Staff Passports for recording reasonable adjustments.	November 2020	Inclusion Manager with People Services	Improve understanding of barriers faced by staff with disabilities and how to improve these.
Note: These actions were developed with the Trust's Disability Action Group, a working group of the Lived Experience Network.					

Lived Experience Network Leads: Bev Jones and Georgina Boon

Lucy Nicholls, Inclusion Manager

inclusion@somersetft.nhs.uk

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