



Yeovil District Hospital
NHS Foundation Trust



Somerset
NHS Foundation Trust

WORKFORCE DISABILITY EQUALITY STANDARD

REPORT AND ACTION PLAN 2022

**Somerset NHS Foundation Trust and
Yeovil District Hospital NHS Foundation Trust**

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1 Introduction

The Workforce Disability Equality Standard (WDES) was launched in 2019 and enables NHS organisations to better understand the experiences of colleagues with disabilities. The data presented in this report will help Somerset NHS Foundation Trust (SFT) and Yeovil District Hospital NHS Foundation Trust (YDH) create a more inclusive culture, by using a data driven approach to inform organisational change.

The 2021/22 Action Plan focussed our attention on the systemic issues affecting the outcomes and experiences of our colleagues with disabilities. We need to fully understand the multiple factors that contribute to the data and colleague feedback presented in this report. The Action Plan for 2022/23 will continue to build on those priorities with the addition of new priorities identified in this year's data.

In anticipation of SFT's upcoming merger with YDH in 2023, we will continue to work collaboratively by sharing our progress and challenges across both Trusts. To effectively manage actions and priorities for SFT and YDH, the previous two action plans have been combined into one. Our intention is that this 1-year action plan will position us to design a longer-term strategy for our merged organisation that will drive impactful change, with tangible outcomes for colleagues living with disabilities and the Trust as a whole.

Data analysis, proposed actions, and a review of impact over time are presented to the Board.

2 Declaration rates

The data for several of the WDES metrics is taken from the Electronic Staff Record (ESR), where information is voluntarily updated and maintained by colleagues. Despite efforts to raise the profile of updating disability status in ESR, declaration rates remain unchanged, with just 3% of colleagues at both SFT and YDH reporting they have a disability.

Declaration rates are higher at YDH. 11% of the workforce have not completed their information ESR, compared to 28% of colleagues at SFT. This suggests that good practice can be shared from YDH so that successful processes and communications are maintained as the Trusts merge.

Low declaration rates limit our understanding of colleagues' representation against some of the metrics. Some reasons for low declaration rates may include a low awareness amongst of how to update their personal information in ESR, a lack of trust in how the information will be used, and why reporting this information is important. Understanding the drivers for low completion rates and developing appropriate communications for improving declaration rates within ESR, remain a key priority.

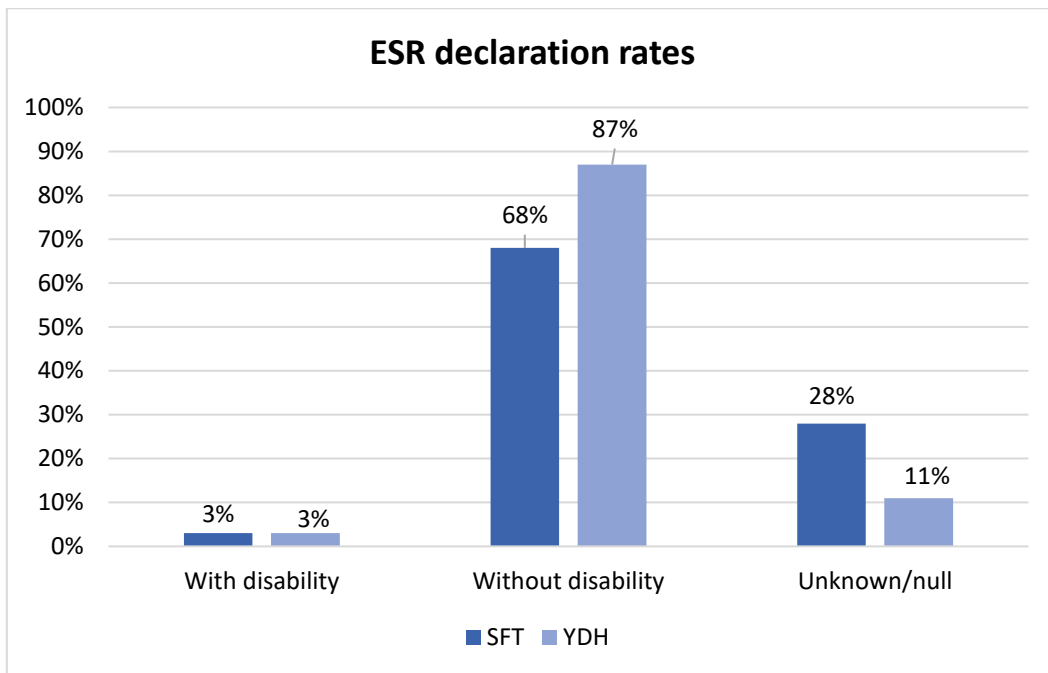


Chart 1

3 Terminology

For the purpose of the WDES metrics, many of the reports are presented using the terms ‘with disability’ or ‘without disability’ when referring to colleagues declaring disability or living with disabilities. These terms are not the preferred, however they are used by the standard reporting measures and therefore used in some parts of this report.

4 WDES metrics 2021/22

Metric 1:

Percentage of staff in AfC (Agenda for Change) 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

As Chart 2 illustrates, at SFT, approximately 3% (non-clinical), 4% (clinical) and 2% (medical and dental) colleagues have a disability.

At YDH, approximately 6% (non-clinical), 3% (clinical) and 2% (medical and dental) colleagues have a disability.

Declaration rates in ESR are low across all bands, highlighting the need to raise awareness of the importance of declaring disability status.

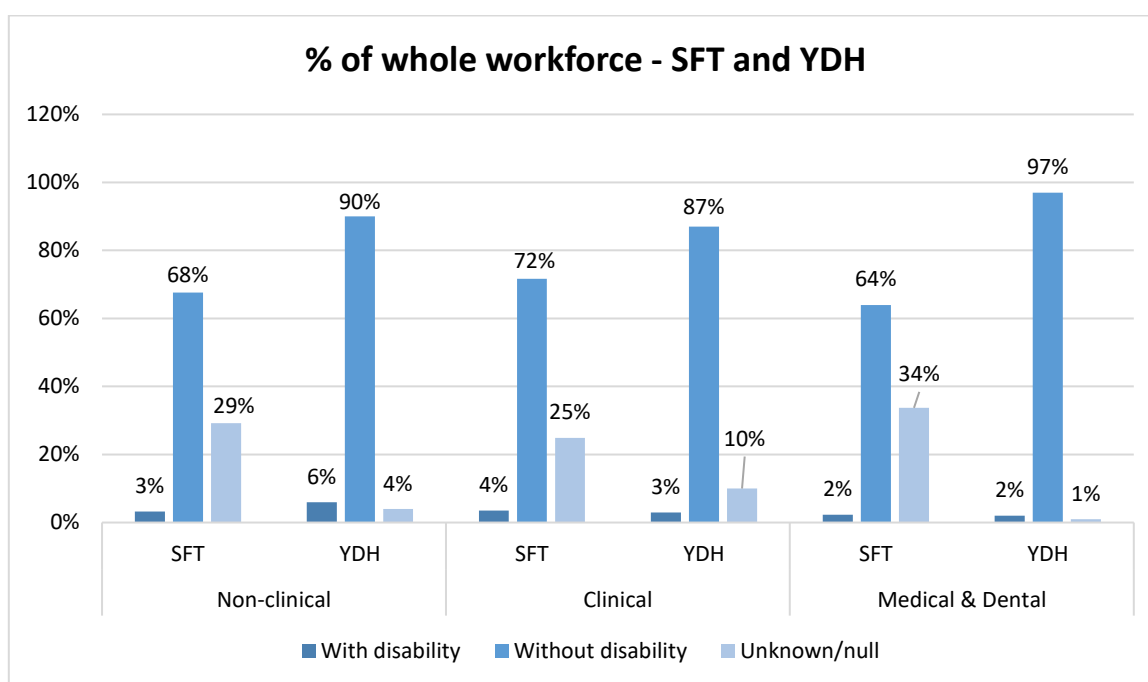


Chart 2

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

- Cluster 1: AfC Bands 1, 2, 3 & 4
- Cluster 2: AfC Bands 5, 6 & 7
- Cluster 3: AfC Bands 8a & 8b
- Cluster 4: AfC Bands 8c, 8d, 9 & VSM (including executive board members).

Chart 3 illustrates how the proportion of colleagues with disability decreases with seniority i.e., 3% (cluster 1) to 0% (cluster 4) for both SFT and YDH. This may be a real fall in representation, but our data also indicate that the proportion of colleagues who have not completed their data in ESR increases with seniority. Improving declaration rates would enable us to build a better picture of representation throughout our pipeline.

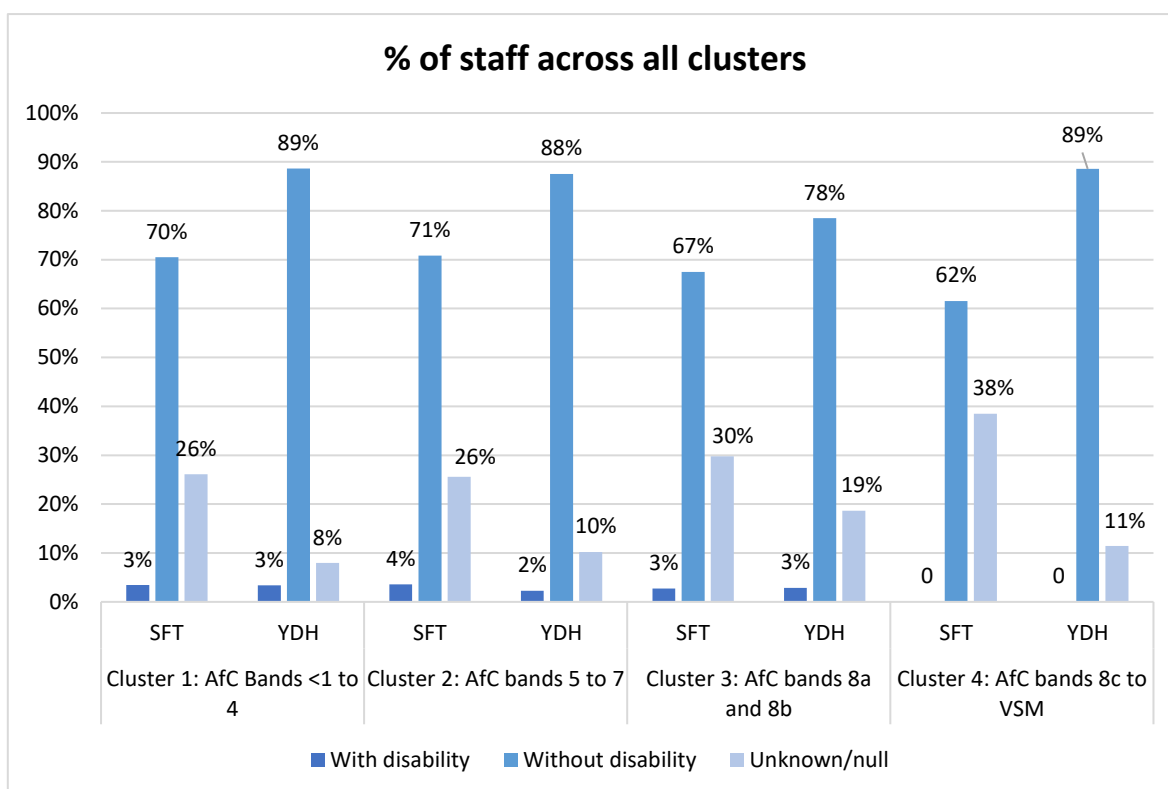


Chart 3

Metric 2:

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

The relative likelihood of non-disabled person being appointed from shortlisting, compared to disabled person being appointed from shortlisting, was 0.57 (SFT) and 0.78 (YDH). This means that disabled candidates are more likely to be appointed than non-disabled candidates at both Trusts, as a figure below 1:00 indicates that disabled candidates are more likely than non-disabled candidates to be appointed from shortlisting. Chart 4 further illustrates how the percentage of shortlisted vs appointed applicants is favourable toward colleagues with disability. For example, there were 4% of shortlisted applicants with disability which increased to 6.8% appointed (SFT).

The increased likelihood of disabled candidates being appointed may be a result of the guaranteed interview scheme that is in place at both Trusts. Both organisations are members of the Disability Confident Scheme and offer a guaranteed interview to disabled candidates who meet the minimum criteria for an advertised role. Further data analysis would be needed to identify whether this is contributing to higher appointment rates.

The proportion of applicants not completing information about disability was larger at YDH than at SFT. This may be another opportunity to share processes and communications that increase declaration rates between both organisations.

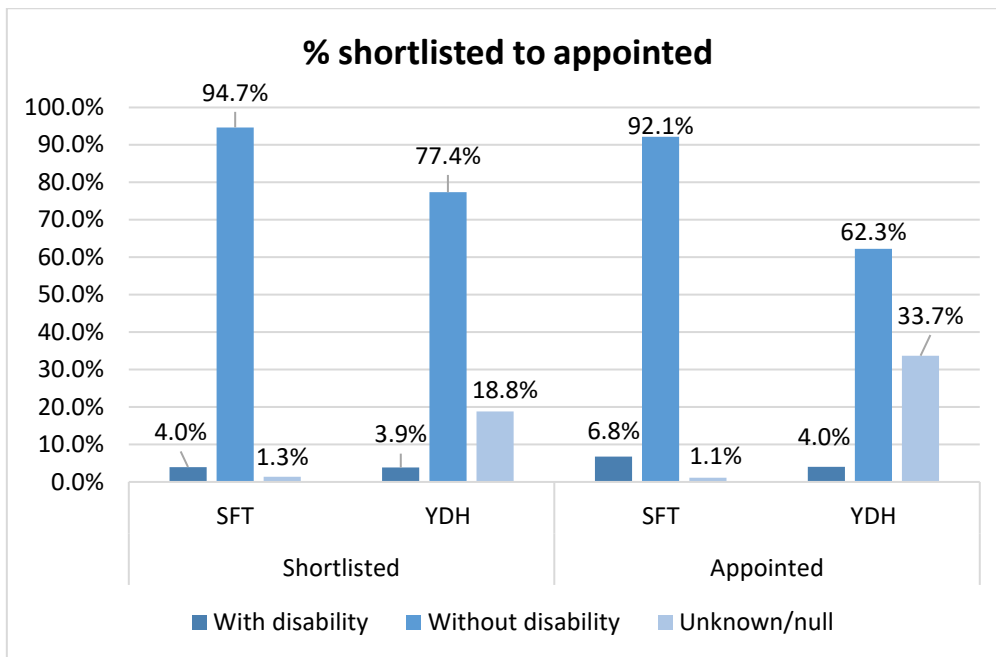


Chart 4

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

Colleagues at SFT who declared a disability were less likely to enter the formal capability process. The relative likelihood of disabled colleagues entering the formal capability process compared to non-disabled colleagues at SFT is down from last year, with 0.0 (2022) and 2.80 (2021).

YDH however saw an increase from 0.00 (2021) to 1.84 (2022). The total number of disciplinarians is relatively small, but we will investigate the nature of these cases to identify any potential for bias or inequity.

The following metrics (4 – 9a) are taken from the NHS Staff Survey 2021.

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

Colleagues with a disability at SFT and YDH were more likely to have experienced harassment, bullying or abuse at work from all three categories i.e.: managers; patients / service users; and colleagues. The highest incidences of such behaviour occurred from patients (see Chart 5). In relation to bullying from colleagues or managers, the difference in responses between colleagues with and without a disability was larger in SFT than in YDH.

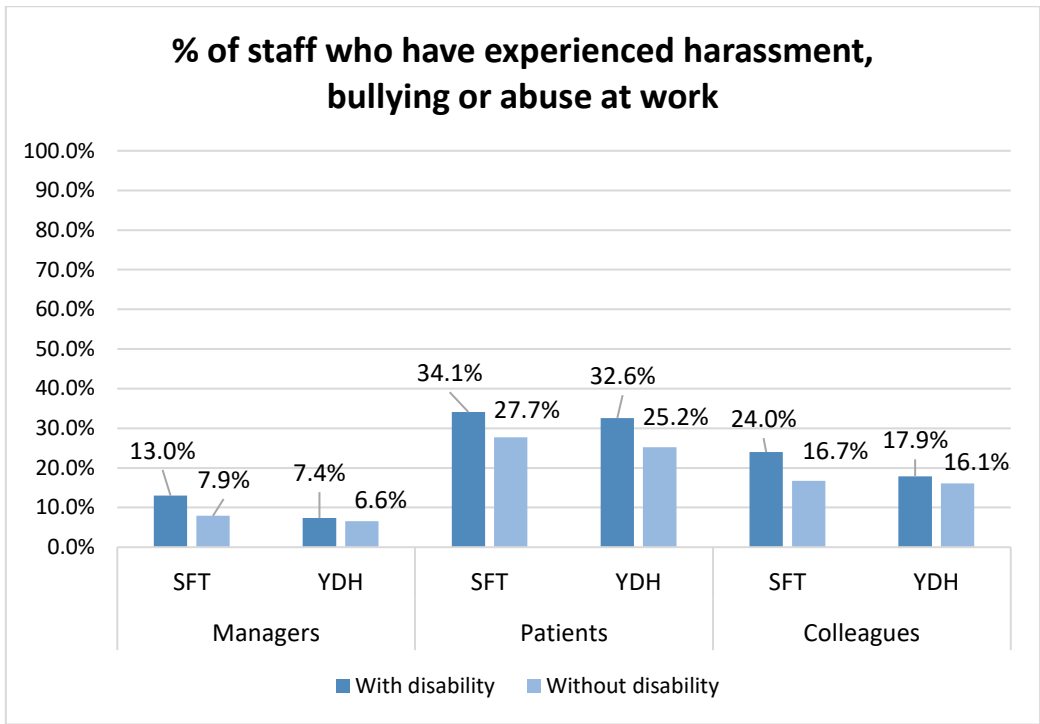


Chart 5

There was a minor difference at SFT in the proportion of colleagues with a disability reporting their experience of harassment, bullying or abuse compared to colleagues without disability (49.6% and 49.2% respectively). However, there was a larger gap at YDH, with 47.6% with disability compared to 54.4% without disability reporting their experiences. It is important to highlight that overall, under half of SFT colleagues with and without disability report harassment, bullying or abuse, compared with 54.4% at YDH.

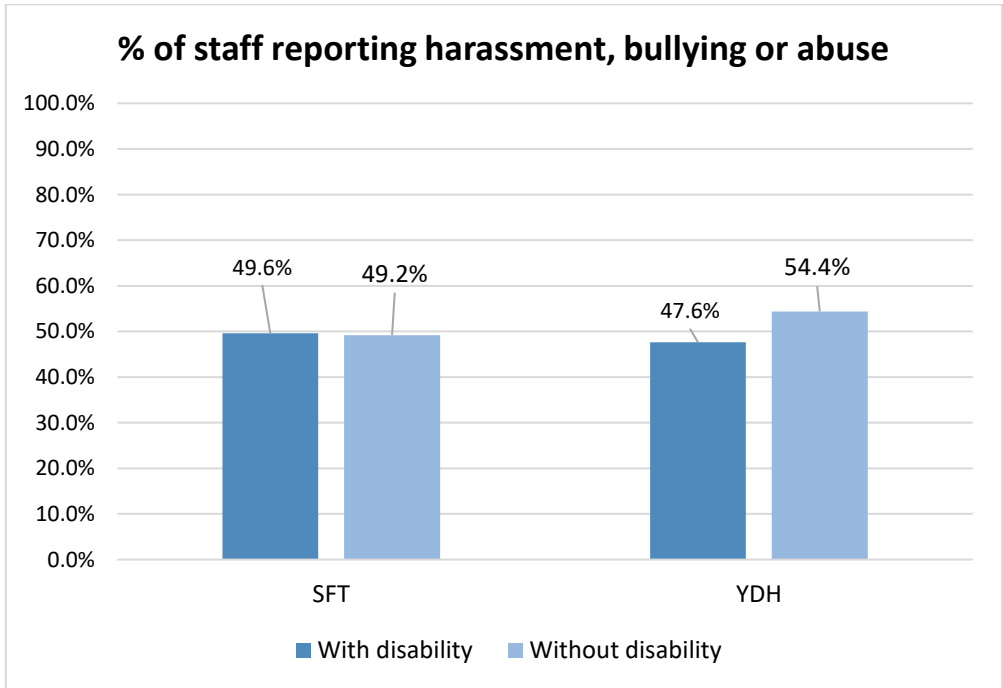


Chart 6

Metric 5:

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

At SFT, 55.9% of colleagues with disability feel that there are equal opportunities for career progression or promotion compared with 62.1% of colleagues without disability.

At YDH, 60.3% of colleagues with disability feel that there are equal opportunities for career progression or promotion compared with 62.6% of colleagues without disability. It is important to highlight that YDH is nearly 10% above the national benchmark at 51.4% for colleagues with disability.

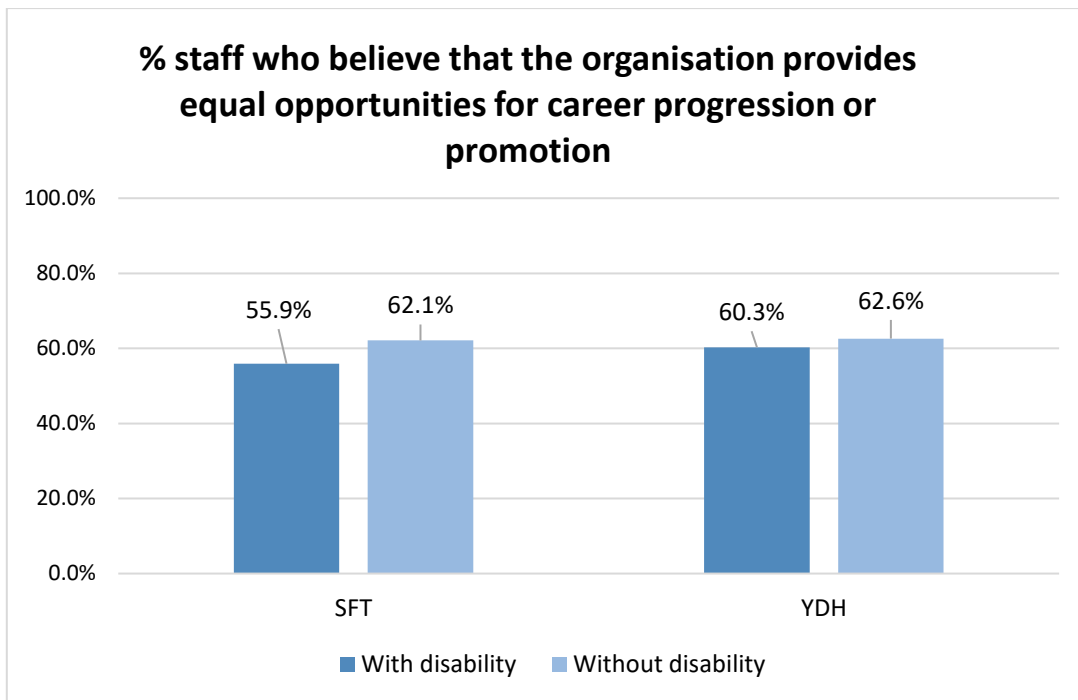


Chart 7

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

Colleagues with disability at both SFT and YDH were more likely to feel pressure from their manager to attend work whilst unwell. 20.9% with disability and 17.0% without disability (SFT) compared with 28.5% with disability and 22.1% without disability (YDH).

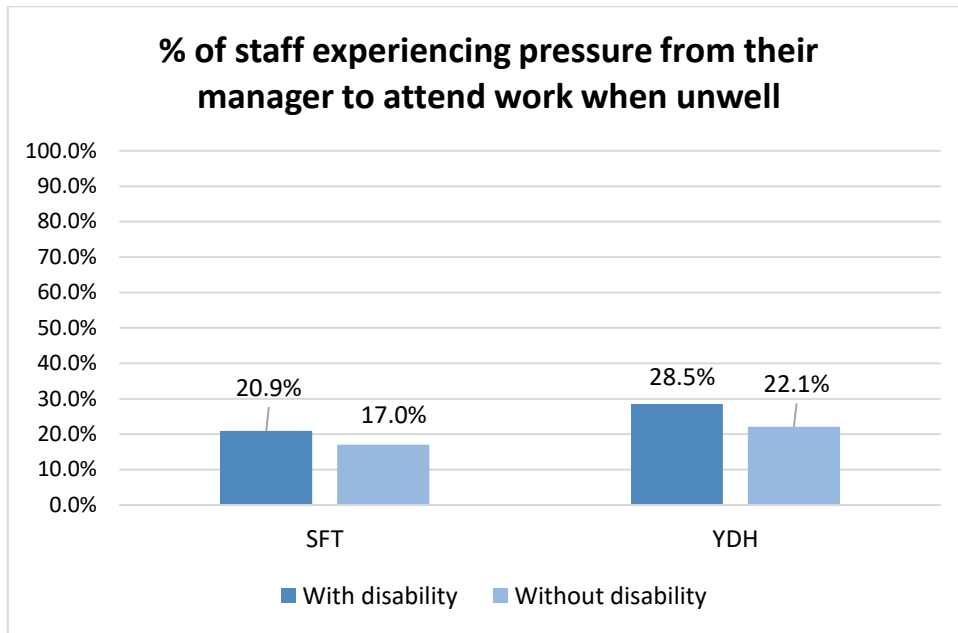


Chart 8

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

At SFT, 39.6% of colleagues with disability feel that their work is valued compared with 49.9% of colleagues without disability. This is lower than the previous reporting period, where colleagues with disability was 43.6%.

At YDH, 45.3% of colleagues with disability feel that their work is valued compared with 53.8% without disability.

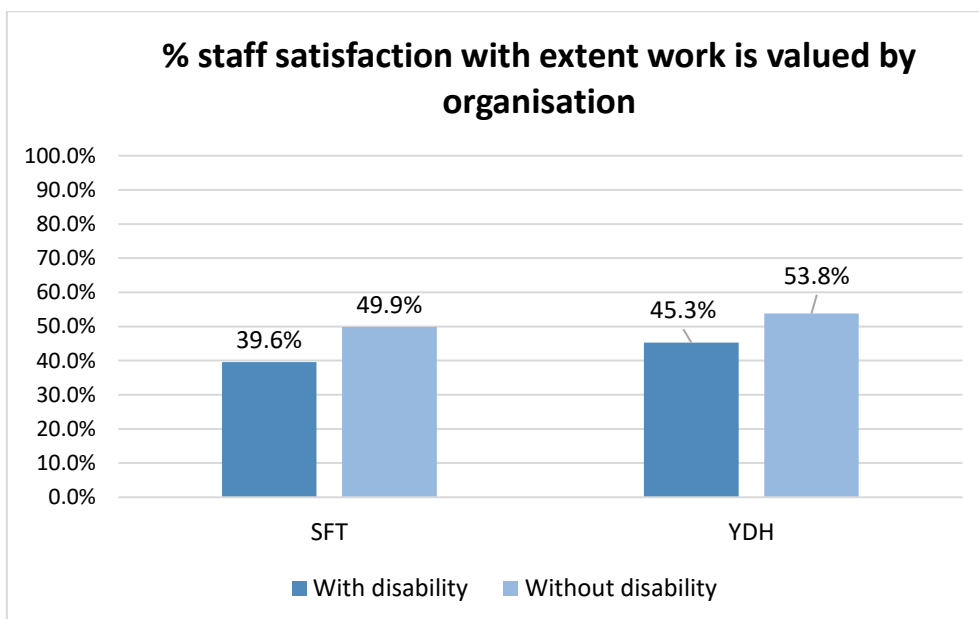


Chart 9

Metric 8:

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

At SFT, 75.4% of colleagues with disability reported that they feel the Trust provides adequate adjustment(s). This is down from 82.5% in the previous reporting period.

At YDH, 86.9% of colleagues reported they feel the Trust provides adequate adjustment(s). YDH had seen significant improvements in responses over time – from 75.7% in 2018, to 89.4% in 2020. The 2021 response represents a slight fall in positive responses. This general trend of improvement over time suggests there are lessons that can be learnt from YDH processes and applied across our merged organisation.

Both SFT and YDH are higher than the relevant benchmark (70.9%), but we would like to see improvements in this area and ensure all colleagues receive the appropriate adjustments.

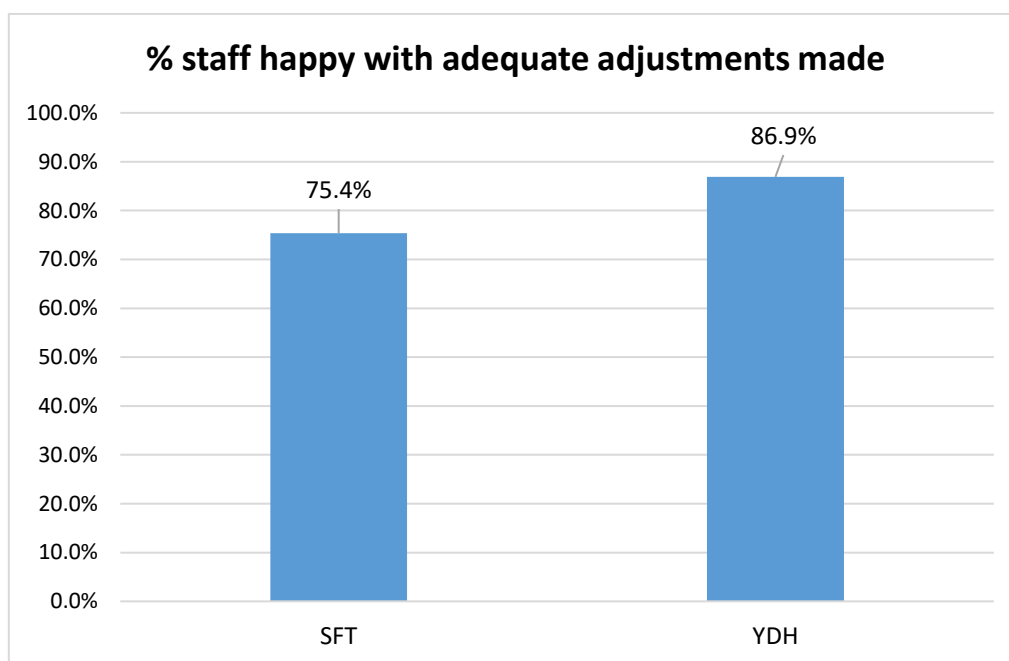


Chart 10

Metric 9:

NHS Staff Survey and the engagement of disabled staff

The staff engagement score is taken from the mean scores of the People Promise elements and themes. The staff survey engagement score was lower for colleagues with disability compared with colleagues without disability, at both SFT and YDH (Chart 11).

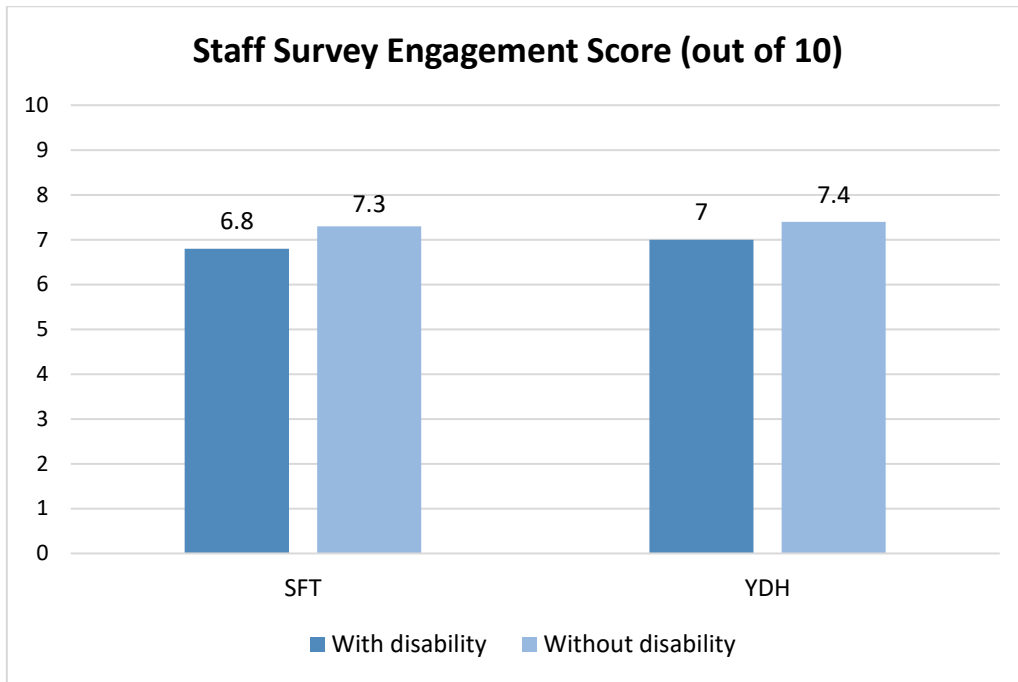


Chart 11

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.**

Charts 12 and 13 illustrate the fact there are no Board members with disability (SFT and YDH). This is shown by numbers and as a percentage of the Board.

The number of Board members without disability is 31.8% (SFT) however, those who have not recorded their disability status is 68.2%. This indicates 1) the priority for senior staff members to update their equality and diversity data in ESR and 2) work towards having diversity at the Board level.

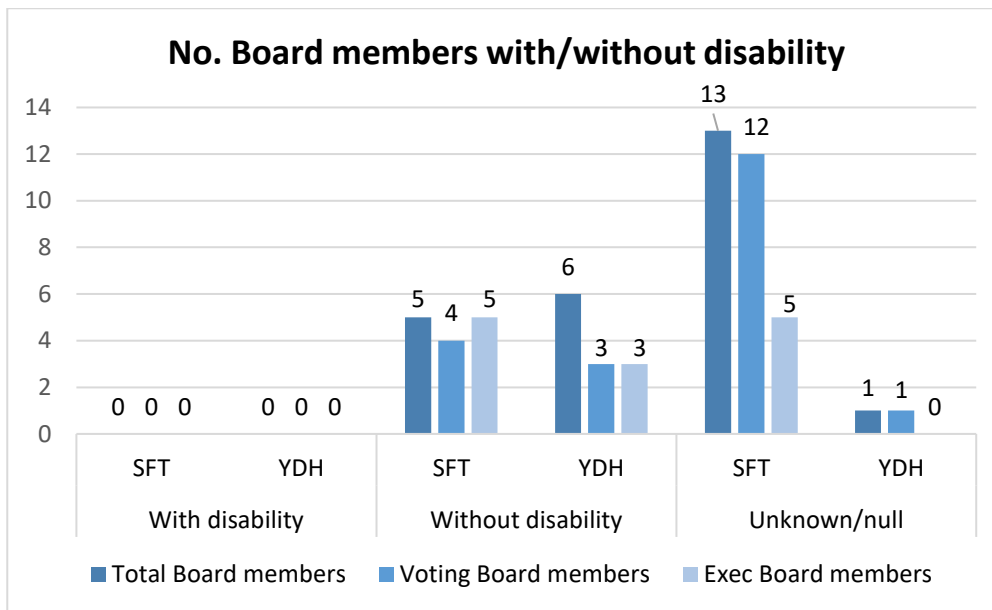


Chart 12

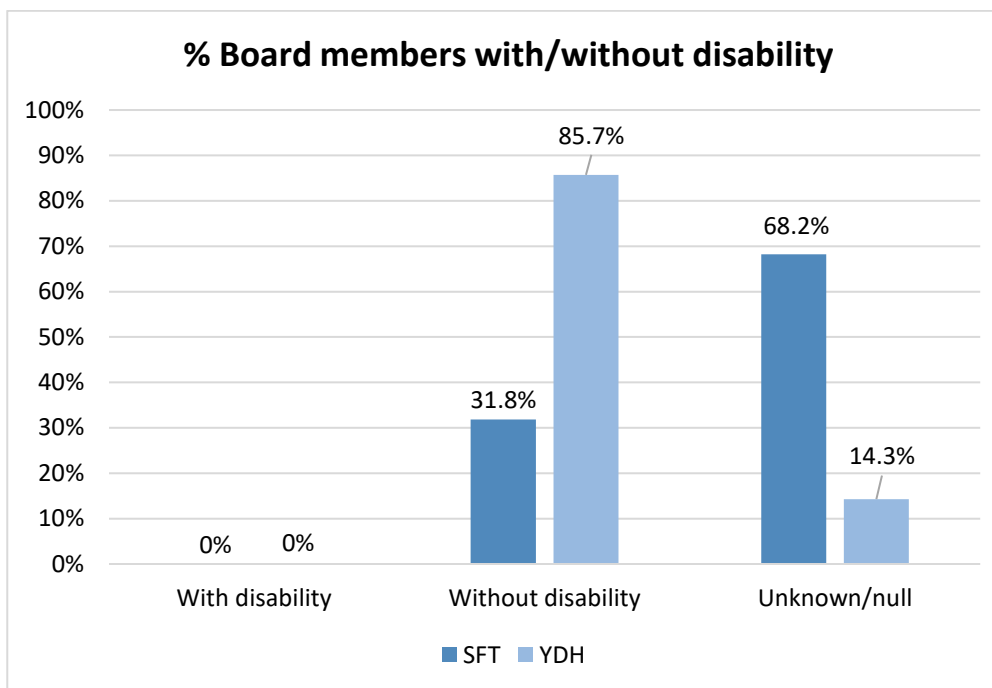


Chart 13

5 Summary: key areas for action

From the data above, the following issues have been highlighted where further investigation is required:

- Action is needed to understand why ESR declaration rates are low, particularly at SFT. This may represent a lack of trust in how information is used, and/or no to low awareness of how to update personal information in ESR and why it's important. Consultation with colleagues will help to understand the drivers of low declaration rates and develop clear and appropriate communication to increase declaration rates. As declaration rates are higher at YDH, we will work together to learn from and apply across the merged organisation.
- Declaration rates are also low within recruitment. We can do more to reassure applicants and encourage them to complete demographic information when applying for roles.
- Our staff survey data highlights significant issues around bullying, harassment and abuse of colleagues with disability from: managers; colleagues; and patients/families. Both SFT and YDH have taken steps to encourage and enable colleagues to speak up or report incivility and harassment in the workplace. This is done by: drop-in sessions by the Freedom to Speak Up Guardian, delivering inclusion training at management level and highlighting the importance of speaking up at Induction sessions. Our staff survey data show that more could be done to encourage colleagues to report incidents, and to empower colleagues to step up as allies and act as an upstander. The data show that less than 50% of colleagues with and without disability report harassment, bullying or abuse at SFT, compared with 54.4% at YDH.
- 75.4% (SFT) and 86.9% (YDH) of colleagues with disability felt that their respective Trusts provide adequate adjustment(s). Whilst both these figures are higher than the relevant benchmark, it is important that all colleagues receive appropriate adjustments, and the data suggests there may be examples of good practice that could be learnt from YDH and shared across a merged organisation.
- Colleagues with disability are less likely to feel their work is valued and had lower overall engagement scores across both Trusts. SFT's numbers were lower than the previous reporting period. Consultation is needed to understand this feedback in more detail, so that we can develop actions and strategies to improve colleague experience within our Trust.
- There is no representation of Board members with disability. More needs to be done to increase the visible diversity of our senior leadership.

6 Next steps

The WDES data and analysis will be presented to the Lived Experience Network, Autistic Colleagues' Network and Boards. Progress against our plan will be reported to the and Inclusion Steering Committee.

7 Further information

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

8 WDES Action Plan 2022-23

Progress has been made across both Trusts in building engagement in inclusion for colleagues living with disabilities, and setting the groundwork for change; through leadership commitment, awareness campaigns, commitment to the Disability Confident Scheme, a developing and visible Lived Experience Network, and a newly formed Autistic Colleague Network.

The action plan below aims to build on these foundations by sharing successes and good practice across SFT and YDH, and by identifying strategies for systemic change. For this reason, many of the actions outlined below focus on data collection and analysis, consultation, and process review. This will enable us to develop specific and measurable actions that target the underlying causes of inequality and underrepresentation throughout our workforce.

The intention is that this 1-year action plan will position us to design a longer-term strategy for our merged organisation that will drive impactful change, with tangible outcomes for colleagues living with disabilities and the Trust as a whole.

Action	Accountability	Timescales	Outcomes and Success Measures	WDES Metric
Key Theme 1: Recruitment				
Undertake holistic review of recruitment process to embed inclusive practice. Review to consider specific issues relating to accessibility including: <ul style="list-style-type: none"> - Detailed analysis of disability data throughout recruitment process from application to appointment, - Process for providing adjustments for application and interview, 	Deputy Chief People Officer	Project continuing from 2022/23 and ongoing throughout 2023/24.	Revised recruitment process, underpinned by inclusive recruitment principles, in place by Q1 2024/25.	2

Action	Accountability	Timescales	Outcomes and Success Measures	WDES Metric
<ul style="list-style-type: none"> - Impact of guaranteed interview scheme, - Methods to build confidence and improve declaration rates from applicants, - Move to skills-based hiring. 				
Review and update recruitment website to reflect diversity and inclusion.	Head of Communications	Q2 2023/24	<p>Increased diversity in images and website content.</p> <p>Inclusion as a key theme throughout website content.</p> <p>Increase in the proportion of disabled candidates applying for roles.</p>	2
Develop training for recruitment managers that guides them through inclusive practice and bias mitigation strategies at every stage.	Associate Director of UK and International Recruitment	Q1 2023/24	Training developed and in place. Monitor uptake, with a plan in place for reaching all trust recruitment managers.	2
Key Theme 2: Progression and Retention				
Learn from YDH good practice and develop a consistent process and policy for providing adjustments.	Head of HR Advisory Service	Q4 2022-23	Improvement in proportion of colleagues reporting they have appropriate adjustments in 2023 staff survey.	8
Internal Audit to take place to identify opportunities for improving HR and recruitment processes for colleagues with disabilities.	Head of Inclusion	Q3 2022/23	Specific actions identified.	All
SFT to apply for Disability Confident Employer (Level 2) recognition, in line with YDH.	Head of Inclusion	Q4 2022/23	Our merged organisation holds a Level 2 award, with plans in place to achieve Level 3.	All

Action	Accountability	Timescales	Outcomes and Success Measures	WDES Metric
<p>Explore formal capability procedure at SFT and YDH.</p> <ul style="list-style-type: none"> - Compare data for the previous 3 years - Identify any good practice at either Trust or potential for bias or inequity - Update process based on review and ensure bias-mitigation techniques are included. 	Associate Director of People	Q3 2023/24	Targeted and specific actions developed and approved in response to data review where appropriate.	3
Key Theme 3: Leadership				
Partner with Executive Team to develop specific inclusion actions and priorities for each member of the Executive Team.	Head of Inclusion & Executive Team	From Q4 2022/23 onwards	Inclusion actions in place for each member of the Executive Group and communicated to colleagues.	All
Set up 'conversation café' sessions – for each member of Executive Team to meet with every Network Lead to hear priorities, colleague feedback and challenges.	Chief Executive	Events to take place twice per year	Systemic actions identified for Executive to take forward following each event.	All
Key Theme 4: Workplace Culture				
Consultation with colleagues via the Lived Experience Network and Autistic Colleagues Network to explore 2022 staff survey findings.	Lived Experience Network and Autistic Colleague Network Leads and Inclusion Coordinator	Q1 2022/23	Targeted and specific actions developed and approved in response to consultation.	All
Following pilot sessions - launch Allyship training – workshop to develop skills and confident to step in and challenge discrimination, microaggressions or bullying.	Head of Inclusion	Pilot – Q4 2022/23 Launch – Q1 2023/24	Reduction in proportion of colleagues living with disability reporting that they experience abuse, bullying or harassment at work in 2023 NHS Staff Survey.	4

Action	Accountability	Timescales	Outcomes and Success Measures	WDES Metric
Inclusion Team to continue to work with the Violence Prevention & Reduction Strategy Group, with a specific focus on improving the experiences of underrepresented groups and improving reporting rates.	Head of Inclusion	Project continuing from 2022/23 and ongoing throughout 2023/24.	Reduction in proportion of colleagues living with disability reporting that they experience violence and abuse at work in 2023 NHS Staff Survey.	4
Support the continued growth of the Lived Experience Network and the new Autistic Colleague Network across SFT and YDH.	Lived Experience Network and Autistic Colleague Network Leads and Inclusion Coordinator	Throughout 2022-23	Increase in network membership over time.	All
Review SFT and YDH dignity at work / bullying and harassment policies and create a consistent and combined policy and process.	Head of HR Advisory Service	Q1 2023/24	Clear and transparent policy in place and communicated.	6 & 8
Key Theme 5: Declaration rates in ESR				
YDH has higher declaration rates than SFT. Share learning from YDH on communications and processes relating to ESR in order to improve declaration rates.	Head of HR Advisory Services	Q1 2023/24	>80% ESR data completed by Q1 2024/25.	1
Develop specific and targeted communications to encourage colleagues to update their demographic information within ESR.	Head of Inclusion & Head of Communications	Q2 2023/24	>80% ESR data completed by Q1 2024/25.	1
Encourage Board members and Executive Group to complete their demographic data in ESR	Chief Executive	Q4 2022/23	>90% data available for Board members and Executive Group by Q1 2023/24	10

