

Workforce Disability Equality Standard (WDES) Report and Action Plan 2023-2024

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Introduction

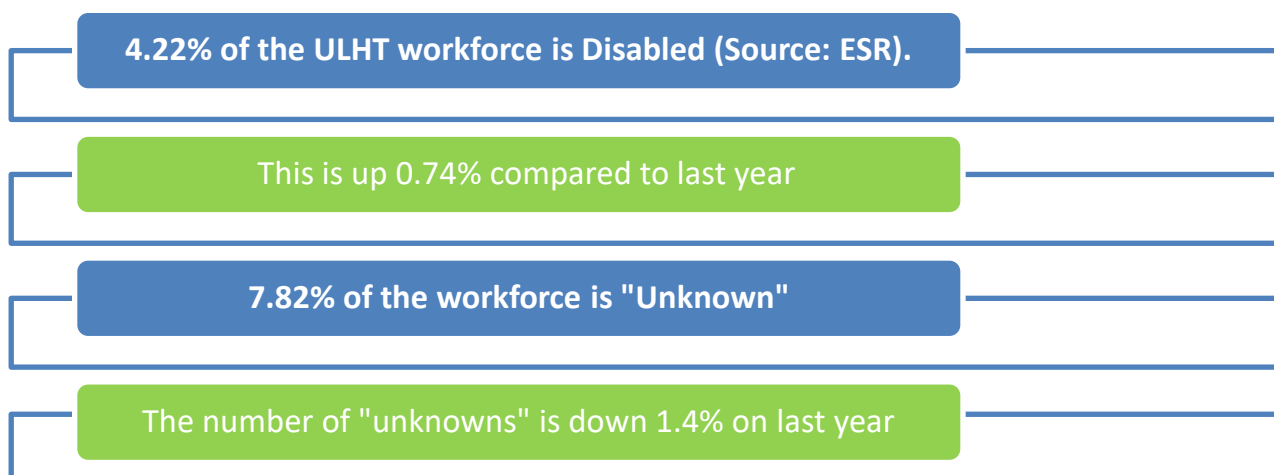
The **Workforce Disability Equality Standard (WDES)** is an annual data collection, analysis and action-planning requirement that highlights the experiences of Disabled colleagues compared to their non-Disabled counterparts within an organisation. The standard is a requirement for all NHS health care providers through the NHS standard contract, to improve the experience and outcomes for Disabled colleagues.

The WDES requires NHS organisations to demonstrate progress against 10 metrics specifically focused on disability equality and suggests actions to address the disparities identified. The data and statistics used in this report reflect Workforce indicators from ESR and Trac as at 31st March 2023, NHS Staff Survey results from the latest (i.e. 2022) staff survey, and a Board representation indicator.

This WDES report and action plan has been developed in line with the national NHS EDI Improvement Plan, launched in June 2023, and following a process of face-to-face and virtual engagement sessions with a wide range of stakeholders, kindly facilitated by Ryan Kelleher, Improvement Manager.

In line with NHS England WDES reporting, the term “Disabled” is used in this report, but it is acknowledged that some colleagues may more readily identify as having a long-term condition or being neuro-diverse, rather than a disability.

Summary



While the WDES uses ESR as the data source for these metrics, it is important to note that in the staff survey (NSS) results for 2022, the percentage of respondents at ULHT identifying as disabled or having a long-term condition was **23.5%**. This suggests that there continue to be more disabled colleagues working at the Trust than are known in ESR.


Areas where the Trust is performing well and has seen significant improvement are:


- ✓ Confidence of Disabled colleagues to report bullying, harassment and abuse remains strong, and above average
- ✓ The extent to which Disabled colleagues feel the Trust values their work has improved significantly, by 8 percentage points in the last year.
- ✓ The level of satisfaction with reasonable adjustments is around national NHS average, and this is before full implementation of improvements
- ✓ Levels of bullying, harassment and abuse are improving (WDES indicator 4a)
- ✓ The Trust is performing well at enabling Disabled colleagues to have a voice
- ✓ Satisfaction with fairness of career progression is improving for Disabled colleagues too

Areas of most concern/focus are:


Indicator	Major Actions Proposed
<p>Indicator 1 – Representation at all bands compared to overall percentage of Disabled colleagues working in the Trust</p>	<ul style="list-style-type: none"> • Launch Mutual Mentoring Programme • Career Conversations for all, but also targeted support for Disabled colleagues • Action for Indicator 2 - a deep and broad inclusive recruitment review. From multiple perspectives, throughout the whole process, end-to-end. • Talent Management plan for diversity in Executive and Senior Leadership roles (national NHS EDI Improvement Plan requirement)
<p>Indicator 9 – Trust Board representation</p>	<ul style="list-style-type: none"> • Trust Board to agree their EDI objectives in line with national NHS EDI Improvement Plan • A Trust Board-specific inclusive recruitment review



Workforce Disability Equality Standard (WDES) Action Plan 2023-24


WDES Indicator	Current WDES Performance	Lead	Actions	Timescale
<p>1. Percentage of staff in each of the AfC Bands 1-9 or medical and dental subgroups and VSM (including executive board members) compared with the percentage of staff in the overall workforce.</p> <p>NHS EDI Improvement Plan: High Impact Action 2</p> <p><i>“Embed fair and inclusive recruitment processes and talent management strategies that target under-representation & lack of diversity”</i></p>	 <p>Please see Appendix 1</p>	<p>Director of People & OD</p> <p>Supported by:</p> <p>Deputy Director, People & OD (Nico)</p> <p>Deputy Director, People & OD (Lindsay)</p> <p>Leads of Recruitment, EDI & OD (Simon, Alison, Damien)</p> <p>Staff Networks</p> <p>Lincolnshire ICB People Hub</p>	<p>Establish Mutual Mentoring Programme – “Mentoring Together” and include Disabled colleagues in the programme, with reasonable adjustments where required.</p> <p>Continue with Career Conversations action from Gender Pay Gap Action Plan, extending to all - including Disabled colleagues</p> <p>Establish meaningful career conversations with both Disabled and non-disabled colleagues, to ensure targeted career support, including reasonable adjustments where required, to remove barriers to progression.</p> <p>Establish and enact a talent management plan for Executive and Senior Leadership Teams, which includes improvements in the diversity of these teams</p> <p>Implement a plan to widen recruitment opportunities within local communities, aligned to the NHS Long Term Workforce Plan and Lincolnshire Integrated Care Board (ICB). To include those with disabilities, including pathways into employment for those with Physical Disabilities, Learning Disabilities or Difficulties, Autism, ADHD, Dyslexia, Dyscalculia, Sensory Processing Disorder and other neuro-diversities.</p>	<p>To establish actions and launch both by January 2024:</p> <p>Mutual Mentoring – Launch at end October 2023</p> <p>Career Conversations – January 2024</p> <p>ELT/TLT Talent Management Plan – by June 2024</p> <p>Wider recruitment opportunities & social mobility – by October 2024</p>




			<p>Ensure that medical engagement work recognises and works to actively improve the confidence of medical colleagues to share that they have a disability or long-term condition.</p> <p>Measurable outcomes:</p> <ul style="list-style-type: none"> • Improvement in the relative likelihood of being appointed (please also see Indicator 2 below) • Improvement in the National Staff Survey (NSS) question “Access to career progression, training & development opportunities” • Year-on-year improvement in disability and race representation, including senior leadership (Bands 8c and above) • Improvement in HEE NETS (National Education & Training Survey) metric on quality of training • Declaration of long-term condition or disability in ESR has increased by 2% for all colleagues, including medical colleagues. <p>All of the measurable outcomes in this plan are linked to the NHS EDI Improvement Plan, published in June 2023 NHS equality, diversity and inclusion (EDI) improvement plan NHS Employers</p>	<p>Ongoing and embedded into all medical engagement by January 2024</p>
<p>2. Relative likelihood of staff being appointed from shortlisting across all posts.</p> <p>High Impact Action 2</p>	 <p>Trust overall: 1.16</p>	<p>Director of People & OD</p> <p>Supported by:</p>	<p>The use of a more reliable source of data (Trac) this year, as planned in last WRES and WDES Action Plans, has highlighted that it is more likely that a shortlisted candidate will be appointed to the role if they do not state their disability or long-term condition when they apply, but leave it as “unknown” in Trac. Feedback from colleagues and</p>	<p>Review completed and actions identified & agreed by end October 2023</p>



		<p>Deputy Director, People & OD (Nico)</p> <p>Deputy Director, People & OD (Lindsay)</p> <p>Leads of Recruitment & EDI (Simon, Alison)</p> <p>MAPLE Staff Network</p>	<p>applicants with lived experience confirms that the wording in Trac does not provide an encouraging message to share this information.</p> <p>The Trust will undertake a deep and broad Inclusive Recruitment review, including feedback from staff networks, use of the CQ-Leading Inclusively model and “No More Tick Boxes” guidance NHSE-Recruitment-Research-Document-FINAL-2.2.pdf (england.nhs.uk). The aim is to ensure that the process and training is even more inclusive from end-to-end, at all touchpoints, from the perspective of candidates with many different long-term conditions and disabilities, as well as recruiting managers and the recruitment team.</p> <p>The Trust is also aiming to achieve Disability Confident Leader status by end March 2024, and continuing actions around education and awareness of reasonable adjustments and different long-term conditions, and making the process of implementing reasonable adjustments clearer and easier.</p> <p>To ensure easy access to resources for candidates, colleagues and line managers regarding Neuro-diversities and how to support</p> <p>Measurable outcomes</p> <ul style="list-style-type: none"> • Improvement in the relative likelihood of being appointed score, with overall aim of parity (1.0) • Aim to increase the percentage of applicants happy to say that they are disabled or have a long-term condition in Trac by 2% 	<p>Identified actions completed and in place by end April 2024</p> <p>End March 2024 (in line with renewal of Disability Confident Employer award scheme, April 2024)</p> <p>End February 2024</p>
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
<p>3. Relative likelihood of staff entering the formal capability procedure.</p> <p>High Impact Action 6:</p> <p><i>“Create an environment that eliminates the conditions in which bullying, harassment, discrimination and physical violence at work can occur”</i></p>	 <p>Trust overall ratio: 2.85</p> <p>National average NHS: 1.94</p>	<p>Director of People & OD</p> <p>Deputy Directors of People & OD (Lindsay, Nico)</p> <p>Lead for EDI & MAPLE network</p>	<p>To continue with the Culture & Leadership Programme (CLP), including launch and embedding of the Mersey Restorative Just and Learning Culture model at the Trust. Restorative Just and Learning Culture :: Mersey Care NHS Foundation Trust</p> <p>This data is based on a two-year average, and in the second year (i.e. last 12 months from 31st March 2023) there had been no Disabled colleagues entering the formal capability procedure.</p> <p>Review Capability procedure with the MAPLE staff network.</p> <p>Measurable outcomes</p> <ul style="list-style-type: none"> • Reduce disparity ratio to national NHS average and then 1.0 (parity) • Reduction in number of formal grievances and dignity at work cases • Continued reduction in Employment Tribunals citing disability discrimination 	<p>June 2024</p> <p>By end April 2024</p>
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<p>4a. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months</p> <p>Percentage of staff experiencing bullying, harassment or abuse from managers in the last 12 months</p> <p>Percentage of staff experiencing bullying, harassment or abuse from other colleagues in the last 12 months</p> <p>High Impact Action 6</p>	 <p>All 3 areas are improving.</p> <p>But there is still disparity, i.e. Disabled colleagues are more likely to experience these behaviours, than those without a disability or long-term condition</p>	<p>Deputy Directors of People & OD</p> <p>Lead for EDI (Alison) plus United against Discrimination working group</p>	<p>Complete the implementation of United against Discrimination actions:</p> <ul style="list-style-type: none"> • Launch QR code reporting system, which includes anonymous option • Develop a workshop (virtual and face-to-face options) for “calling-out” and “calling-in”. Topics to include: racism, LGBTQ+ hate, misogyny, ageism, religious discrimination, ableism etc. Develop in conjunction with Staff Networks. • Start regular discrimination case and outcome reporting, through the People & OD Scorecard. <p>To continue with the Culture & Leadership Programme with emphasis on respect and civility.</p> <p>Measurable outcomes from 2023-2024 onwards:</p> <ul style="list-style-type: none"> • Continue upward scores and positive trajectory for NSS results for this indicator and achieve ‘national average score’ for Acute Trusts in all related indicators • Achieve above average scores and position ULHT in upper quartile for NSS results for all related indicators 	<p>In progress</p> <p>Target completion date: 30th September 2023</p> <p>June 2024</p>
<p>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</p>	 <p>As with the previous year’s data, disabled staff or their colleagues are <u>more</u> likely to report it, and this has</p>	<p>Freedom to Speak Up Guardian</p> <p>Lead for EDI (Alison) plus United against Discrimination working group</p>	<p>To continue with Freedom to Speak Up and United against Discrimination actions to encourage all to report harassment, bullying or abuse at work so that it can be addressed and resolved at the earliest opportunity</p> <p>Measurable outcome:</p> <ul style="list-style-type: none"> • To maintain the Trust’s above-average performance in this indicator. • To learn from the experiences of Disabled people and their colleagues who have spoken up, to encourage 	<p>Ongoing</p> <p>By April 2024</p>

	<p>increased. It sits above the national NHS average.</p> <p>For note: confidence to report has decreased for those <u>without</u> a disability or long-term condition and sits below the national NHS average.</p>		<p>those without a disability to report harassment, bullying or abuse at work – as measured by any improvement in this metric for those without a disability.</p>	
<p>5. Percentage believing that trust provides equal opportunities for career progression or promotion</p> <p>High Impact Action 2</p>	 <p>48.4%</p> <p>National NHS average: 51.4%</p>	<p>Deputy Directors People & OD (Nico, Lindsay)</p> <p>Supported by:</p> <p>Leads of Recruitment, EDI & OD (Simon, Alison, Damien)</p>	<p>Mutual Mentoring “Mentoring Together” & Career Conversations – as per Indicator 1.</p> <p>Inclusive recruitment review – as per Indicator 2.</p> <p>Measurable outcomes</p> <ul style="list-style-type: none"> • Incremental improvement in NHS Staff Survey results for 2023/24 onwards: • Achieve ‘national average score’ for Acute Trusts in this indicator • Achieve above average score and position ULHT in upper quartile for this indicator. 	<p>Mutual Mentoring – Launch at end October 2023</p> <p>Career Conversations – By January 2024</p> <p>Recruitment review completed and actions identified & agreed by end October 2023</p> <p>Identified actions completed and in place by end April 2024</p>

<p>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>30.4%</p> <p>National NHS average: 30%</p>	<p>Associate Director - OD, Wellbeing & Inclusion</p> <p>Lead for EDI (Alison)</p> <p>MAPLE Staff Network</p>	<p>Whilst the Trust is on track with national benchmarking, Disabled colleagues are still 8% more likely to feel under pressure to attend work despite not feeling well enough, compared to those without a disability or long-term condition.</p> <p>Therefore, it is important to continue the work on reasonable adjustments and the education/awareness action under United against Discrimination.</p>	<p>30th September 2023 – United against Discrimination</p> <p>April 2024 – Reasonable Adjustments work</p>
<p>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</p>	 <p>31.9%</p> <p>National NHS Average: 32.5%</p> <p>This score has rapidly-improved by 8% against declining position nationally</p>	<p>Associate Director - OD, Wellbeing & Inclusion</p> <p>Lead for EDI (Alison)</p> <p>MAPLE Staff Network</p>	<p>Mutual Mentoring “Mentoring Together” & Career Conversations – as per Indicator 1.</p> <p>Inclusive recruitment review – as per Indicator 2.</p> <p>Measurable outcomes</p> <ul style="list-style-type: none"> • Incremental improvement in NHS Staff Survey results for 2023/24 onwards: • Achieve ‘national average score’ for Acute Trusts in this indicator • Achieve above average score and position ULHT in upper quartile for this indicator. 	<p>Mutual Mentoring – Launch at end October 2023</p> <p>Career Conversations – By January 2024</p> <p>Recruitment review completed and actions identified & agreed by end October 2023</p> <p>Identified actions completed and in place by end April 2024</p>
<p>8. Percentage of disabled staff saying that their employer has made reasonable adjustment(s) to enable them to carry out their work</p>	 <p>71.5%</p>	<p>Associate Director - OD, Wellbeing & Inclusion</p> <p>Lead for EDI (Alison)</p> <p>MAPLE Staff Network</p>	<p>To continue the work on Reasonable Adjustments to full implementation.</p> <p>To then consider the feasibility and benefits of a centralised budget to fund reasonable adjustments.</p>	<p>April 2024</p> <p>By September 2024</p>

	<p>National NHS Average: 71.8%</p>		<p>Measurable Outcomes:</p> <ul style="list-style-type: none"> To achieve Disability Confident Leader award To fully-achieve national NHS average and position ULHT in the upper quartile for this indicator 	<p>April 2024 NSS 2023 and 2024 results</p>
<p>9a. The staff engagement score for disabled staff, compared to non-disabled staff and the overall engagement score for the organisation.</p> <p>9b. Have you taken action to facilitate the voices of disabled staff to be heard in your Trust?</p>	<p> Trust Overall: 6.4</p> <p>Disabled staff: 6.2</p> <p>National NHS Average for Disabled staff: 6.4</p> <p>9b – yes</p> <p></p>	<p>Associate Director - OD, Wellbeing & Inclusion</p> <p>Lead for EDI (Alison)</p> <p>MAPLE Staff Network</p>	<p>To ensure that all disabled staff are well-supported in the Trust, with consistency of positive experience in all Divisions - including those with less-visible disabilities, mental health conditions and wellbeing (including men – with the establishment of a men’s network) and those who are neuro-diverse.</p> <p>Measurable Outcomes for 9a & 9b:</p> <ul style="list-style-type: none"> To reach national NHS average for Disabled staff To position ULHT in the upper quartile for this indicator Continued growth (numbers) of MAPLE staff network and meaningful involvement of members in initiatives & actions 	<p>April 2024</p>

<p>10. Percentage difference between the organisation’s Board voting membership and its overall workforce representation.</p> <p>High Impact Action 1:</p> <p><i>“Chief executives, chairs and board members must have specific and measurable EDI objectives to which they will be individually and collectively accountable”</i></p>	 <p>See Appendix 1</p>		<p>There is no representation on ULHT Board. Disabled colleagues/those with long-term condition more-accurately represent c.20% of the overall workforce (Source: NSS 2022), compared to 4.22% in ESR. c.11% of the Lincolnshire population has a disability or long-term condition which impacts on daily life (Source: Census, 2021)</p> <p>Trust Board to agree EDI objectives which are SMART and have been cascaded & communicated widely in the Trust. One of these objectives should aim to increase the diversity and representation of BME and Disabled people holding <u>voting</u> membership of the Board.</p> <p>Inclusive Recruitment and Selection review specifically regarding Board recruitment process, with improvements identified & agreed.</p> <p>Measurable Outcomes</p> <ul style="list-style-type: none"> • In 2026, Trust Board representation is in line with the Lincolnshire population we serve, based on 2021 Census data for the county of Lincolnshire. That it also reflects our workforce, which is more diverse in terms of ethnic background and disability/long-term conditions than the Lincolnshire population, at around 20% Trust-wide for both – based on NSS 2022 data which is generally higher than ESR because it is anonymous. • The Board has reviewed relevant data to understand where EDI areas of concern are, including this WDES action plan, and prioritised actions. Progress will be tracked and monitored via the Board Assurance Framework (BAF). 	<p>By end September 2023</p> <p>By end December 2023</p> <p>By end 2026</p> <p>By March 2024</p>
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Appendix 1

Indicator 1 – Representation at each Band, compared to Trust overall percentage

1a) Total Workforce: 4.22% AfC Non-Clinical: 5%	Agenda for Change Non-Clinical Workforce			
	Disabled	Not Disabled	Unknown	Percentage of Disabled staff in each band
Under Band 1	0	2	0	0%
Band 1	2	29	17	4.2%
Band 2	66	1204	171	4.6%
Band 3	33	501	31	5.8%
Band 4	14	291	30	4.2%
Band 5	11	170	9	5.8%
Band 6	10	128	7	3.5%
Band 7	3	88	1	3.3%
Band 8a	3	52	2	5.3%
Band 8b	4	32	4	10%
Band 8c	0	16	1	0%
Band 8d	0	8	1	0%
Band 9	1	11	1	7.7%
VSM	0	4	1	0%

1b) AfC Clinical: 4.4%	Agenda for Change Clinical Workforce			
	Disabled	Not Disabled	Unknown	Percentage of Disabled staff in each band
Under Band 1	1	7	0	12.5%
Band 1	0	0	0	N/A
Band 2	40	1013	75	3.8%
Band 3	15	209	14	6.3%
Band 4	13	296	7	4.1%
Band 5	73	1372	119	4.7%
Band 6	49	868	68	5.0%
Band 7	23	489	28	4.2%
Band 8a	7	190	19	3.2%
Band 8b	0	39	4	0%
Band 8c	0	18	1	0%
Band 8d	1	8	2	9.1%
Band 9	0	5	0	0%
VSM	0	0	1	0%

1c) Medical: 1.26%	Medical & Dental Workforce			
	Disabled	Not Disabled	Unknown	Percentage of Disabled staff in each band
Consultants	1	323	41	0.3%
Non-consultant career grade	3	220	22	1.2%
Trainee grades	9	377	32	2.15%
Other	0	0	0	N/A

Indicator 9 – Representation on Trust Board

	Disabled	Not Disabled	Unknown
Total Board members	0	6	9
<i>of which: Voting Board members</i>	0	4	7
<i>: Non-Voting Board members</i>	0	2	2
Total Board members	0		2
<i>of which: Exec Board members</i>	0	5	2
<i>Non Executive Board members</i>	0	1	7
Number of staff in overall workforce	7021	1871	169
Percentage Difference: Total Board – Overall Workforce	-4%	-48%	52%
Percentage Difference: Voting Membership – Overall Workforce	-4%	-52%	56%
Percentage Difference: Executive Membership – Overall Workforce	-4%	-17%	21%
Trend (compared to 2022) – Overall Workforce & Voting Membership	1% lower	10% lower	11% higher