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| Workforce Disability Equality Standard 2020  |
| September 2020 |
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# Background and introduction

# This report provides the 2020 Workforce Disability Equality Standard (WDES) findings for the Royal Marsden NHS Foundation Trust; summarises progress made towards the 2019/2020 WDES action plan and outlines the WDES priorities for 2020/2021.

# The WDES was designed to improve the representation and experience of disabled staff at all levels of the NHS and to establish systematic monitoring of disability equality performance. Since August 2019 all NHS organisations are required to publish data against the ten WDES indicators as at the 31 March annually. In addition, organisations are required to develop and publish a WDES report and action plan by the 31 October that is based on the 2020 WDES findings to address any differences identified.

# The WDES is a mandated requirement in the NHS standard operating contract. It is expected that the WDES will be built into assurance and regulatory processes including the Care Quality Commissions (CQC) inspections.

# 2019 Workforce Disability Equality Standard findings

There are ten WDES indicators, four of the indicators focus on workforce data (indicators 1-3 and 10), six on findings from the annual staff survey (indicators 4-9) and a commentary is required in relation to how we listen to the voices of disabled staff in our organisation.

The nine indicators and the 2020 WDES findings are provided in appendix 1.

The total number of staff employed within The Royal Marsden NHS Foundation Trust at 31 March 2020 was 4130. Of these, the proportion of staff employed who declared they had a disability was 3% (129 staff) with 91% declaring that they were not disabled (3773 staff) and 6% of staff not disclosing their disability status (228 staff).

The key findings from the 2020 WDES data are:

* The percentage of staff declaring a disability remains at 3% (indicator 1)
* An increase has been noted in the likelihood of Non-disabled staff more likely to be appointed from shortlisting compared with disabled staff; in 2019 it was 1.29 and this year it stands at 1.36 (indicator 2)
* The likelihood for disabled staff entering formal capability proceedings reduced to 5.35 from 7 times more likely last year (indicator 3)
* From the national staff survey findings, we noted an overall reduction in the number of staff feeling or reporting bullying or harassment compared to 2019:
* disabled staff reported experiencing more harassment and bullying from patients than non-disabled staff – 17.8% (23% in 2019) disabled staff, 16.3% (18% in 2019) not disabled staff (indicator 4ai)
* disabled staff reported experiencing more harassment and bullying from managers than non-disabled staff – 13.6% (15% in 2019) disabled staff, 8.8% not disabled staff (9% in 2019) (indicator 4aii)
* disabled staff reported experiencing more harassment and bullying from other colleagues than not disabled staff – 28.8% (28% in 2019) disabled staff, 17.5% (17% in 2019) not disabled staff (indicator 4aiii)
* the proportion of disabled staff who reported the last time they experienced harassment or bullying was marginally lower than the proportion of not disabled staff – disabled staff 48.9% (55% in 2019), not disabled staff 49.2% (54% in 2019) this year (indicator 4b)
* Not disabled staff had a higher score than disabled staff for believing that the Trust provides equal opportunities for career progression and promotion –77.2% (79% in 2019) disabled, 84.1% (87% in 2019) not disabled staff (indicator 5)
* more disabled staff than not disabled staff felt under pressure from their manager to come to work despite not feeling well enough to perform their duties – 22.5% disabled, 18.9% not disabled staff (indicator 6)
* disabled staff were less satisfied with the extent to which the organisation values their work than not disabled staff – 42.7% disabled staff, 57.4% not disabled staff (indicator 7)
* 80.9% of disabled staff survey respondents said the Trust had made adequate adjustments to enable them to carry out their work (indicator 8)
* not disabled staff reported a higher engagement score than disabled staff – 7.3 / 10 disabled staff, 7.7 / 10 not disabled staff (indicator 9a)
* The network for staff with disabilities and health conditions, established in 2018 provides an opportunity for the Trust to listen to the voices of disabled staff and those with health conditions about their experiences at work and how we can improve them. This is also a forum for discussing the WDES findings (indicator 9b)
* The proportion of the Board (Executive and Non-Executive Directors combined) who have a disability (8%) is higher than the proportion of disabled staff in the overall workforce (3%) (indicator 10)

N**ote:** data for indicators 1 and 9 is as at 31 March 2019, indicator 2 is from the period 1 March 2018 to 31 March 2020, indicators 4-9 are taken from the national staff survey findings.

# Review of 2019-2020 disability action plan

# Actions were agreed by the Equality, Diversity and Inclusion Steering Group in 2019 to maintain and improve performance against the WDES indicators set out in Table 1 below. The status of progress made against each outcome is also highlighted in the table below.

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| **2019/2020 WDES action plan** |
|  | **Outcome required** | **Action** | **Responsibility** | **Timescale** |
| 1 | Increased reporting to Board on equality metrics and progress | Six monthly report to Board **Status: Partially completed** | Director of Workforce | July 2019  |
| 2 | Conversations about disability and inclusion are held across the organisation | Schwartz rounds on diversity and inclusion topic as part of the annual series of Schwartz rounds with members of the disabilities network as contributing panel members**Status: Outstanding** | Head of EDI/ Divisional Director Cancer Services | February 2020 |
| 3 | Values are embedded into employment policy and practice and are widely known across the organisation with team level understanding | Launch values content as part of induction programmeTeam level discussions about impact of values for themLaunch new appraisal and values-based recruitment interview support for managers including values based interview questions**Status: Partially completed (Values and appraisal work completed; recruitment support for managers has been drafted)** | Asst Director Workforce Development/ Deputy Director of HR | From June 2019 |
| 4 | Recruitment panel members are diverse and have undertaken equality and diversity training | Quarterly monitoring of panel member training compliance and disability composition with candidate outcomes (for Band 8a and above vacancies)**Status: Outstanding**  | Head of Resourcing/ Head of EDI | From September 2019 |
| 5 | Inclusive leadership to be integral part of all leadership development programmes | New programmes that are being procured require inclusive leadership to be a key component.**Status: On-going**  | Asst Director Workforce Development | From June 2019 |
| 6 | Joint network for staff with disabilities and health conditions to become a self-led network with Director Sponsorship | Divisional Director to attend network meetings and to raise issues as appropriate with the Executive BoardNetwork members to take on chair and other committee roles by January 2019**Status: Completed**  | Head of EDI/ Divisional Director Cancer Services | November 2019 |
| 7 | 2019 WDES findings  | Findings and actions to be discussed with disabilities network.**Status: Completed** | Head of EDI | August 2019 |
| 8 | Increased awareness of mental health conditions and staff support across the organisation | Run pilot Mental Health First Aid half day awareness sessions at Chelsea and Sutton with a view to rolling out further training across the organisation.Wellbeing sessions to be run for staff. **Status: Completed** | Deputy Director of HR | November 2019 |

# National and local benchmarking

The 2020 WDES findings will be monitored nationally by the WDES Team, who will analyse the national and regional data to highlight areas of concern and areas of good practice across the NHS. It is anticipated that an annual benchmarking report will be provided to identify areas of good practice across the NHS and areas for national or regional attention.

# WDES conclusions

It is encouraging to see a greater number of staff confirming their manager has made reasonable adjustments and fewer disabled staff reporting bullying or harassment concerns from patients. However, there remain a number of metrics that require improvement. An increased emphasis on improving our WDES scores for recruitment, capability, career progression and valuing our disabled staff will feature in our WDES action plan for 2020 – 2021 outlined in section 6 below.

# WDES action plan 2020-2021

# The actions set out below for 2020 - 2021 aim to improve the experiences and outcomes of disabled staff within the Trust, as measured through the WDES.

# This action plan will be monitored by the Workforce and Education Committee and Equality, Diversity and Inclusion Steering Group and findings reported to the Board.

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| **2020/2021 WDES action plan** |
|  | **Outcome required** | **Action** | **Responsibility** | **Timescale** |
| 1 | Increased reporting to Board on equality metrics and progress | Six monthly report to Board  | Director of Workforce | July 2020  |
| 2 | Conversations about disability and inclusion are held across the organisation | Schwartz rounds on diversity and inclusion topic as part of the annual series of Schwartz rounds with members of the disabilities network as contributing panel membersDevelop a communications and infographics to raise the profile of the Disability Network, disability related issues as well as increase membership. Regularly encourage staff to update their demographic details on ESR.  | Head of EDI/ Divisional Director Cancer ServicesEDI/Communications/Divisional Director of Cancer Services |  March 2021November 2020July 2021 |
| 3 | Values are embedded into employment policy and practice and are widely known across the organisation with team level understanding | Launch interview support for managers including values-based interview questions | Deputy Director of HR/Head of Resourcing  | November 2020 |
| 4 | Recruitment panel members are diverse and have undertaken equality and diversity training | Quarterly monitoring of panel member training compliance and disability composition with candidate outcomes (for Band 8a and above vacancies) | Head of Resourcing/ Head of EDI | November 2020 |
| 5 | Inclusive leadership to be integral part of all leadership development programmes | New programmes that are being procured require inclusive leadership to be a key component. | Asst Director Workforce Development | Ongoing |
|  | Reduce the likelihood of disabled staff entering formal capability proceedings  | Undertake regular case reviews to ensure due process is followed fairly Transfer any learning acquired through monitoring WRES 3 indicatorRefresh ER training for managers  | Deputy Director of HR/ER team/EDI | March 2021 |

# Report approval

The Equality, Diversity and Inclusion Steering Group has approved the 2020 WDES Report for formal publishing to meet WDES deadlines.

## **Appendix 1: Summary of 2020 WDES findings (31 March 2020)**



## **Appendix 2: Indicator 1 – Percentage of staff in Agenda for Change pay bands, VSM and Medical and Dental grades by disability status as at 31 March 2020**

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|  | **Disabled** | **% DISABLED** | **Non-disabled** | **% NON-DISABLED** | **Unknown** | **% UNKNOWN** |
| Cluster 1 Band 1-4 | 44 | 3.9% |  1012 |  89.9% |  70 |  6% |
| Cluster 2 Band 5-7 | 68 | 3.4% | 1843 | 92.7% | 77 | 3.9% |
| Cluster 3 Band 8a – 8b | 9 | 2.2% | 397 | 95.2% | 11 | 2.6% |
| Cluster 4 Band 8c – 9 VSM | 1 | 1% | 110 | 93% | 7 | 6% |
| Cluster 5 (M&D Consultants) | 4 | 2% | 168 | 81% | 35 | 17% |
| Cluster 6 No career grade M&D | 0 | 0% | 17 | 74% | 6 | 26% |
| Cluster 7 M&D trainees | 3 | 1.2% | 226 | 90% | 22 | 8.8% |
| **Grand Total** | **129** | **3%** | **3773** | **91%** | **228** | **6%** |