Berkshire Healthcare NHS Foundation Trust

Equality, Diversity, and Inclusion

Workforce Disability Equality Standard (WDES) Annual Report 2021

To find out more about what Berkshire Healthcare NHS Foundation Trust is doing to be an

'Outstanding and Equal Employer and Care Provider for Everyone',

please contact: EDITeam@berkshire.nhs.uk

Executive Summary

The Workforce Disability Equality Standard (WDES) is a requirement for all NHS organisations to publish data and action plans against ten indicators of workforce disability equality.

This report shows Berkshire Healthcare's latest workforce disability equality data (as at 31st March 2021) and identifies where improvements have been made and where data has stagnated or deteriorated.

The key findings from the 2021 report

Berkshire Healthcare continues to make incremental progress in tackling and removing barriers faced by staff with a Disability and individuals seeking employment with the Trust. Notable improvements were made in 6 out of the 10 WDES indicators of disability equality. However, Disabled staff have a poorer work experience than Non-Disabled staff overall - there is stagnation and/or regression in some of the metrices.

- The number of Disabled staff has remained consistent at 5% of the total workforce
- The Trust has taken action to facilitate the voices of Disabled staff – the role of the Chair of the Purple Network has been operationalised and allocated protected time (half a day a week)
- An increase in the National Staff Survey engagement score for Disabled staff for the third year running
- 77% of Disabled staff report that the Trust has made adequate reasonable adjustments to enable them to carry out their work
- Increase in the likelihood of Disabled staff being appointed from shortlisting, though still behind Non-Disabled staff
- A significant reduction in the likelihood of Disabled staff entering the formal capability process
- A reduction in the percentage of Disabled staff experiencing harassment, bullying or abuse from their manager and colleagues

However:

- 11% of the workforce have not declared their disability status
- Disabled staff are more likely to experience harassment, bullying or abuse from patients, service users, relatives, the public, their manager and colleagues than Non-Disabled staff
- Disabled staff are more likely to report harassment, bullying or abuse than Non-Disabled staff
- Disabled staff are less likely to believe the Trust provides equal opportunities for career progression or promotion that Non-Disabled staff
- Presenteeism: Disabled staff are more likely to come to work despite not feeling well enough than Non-Disabled staff
- An increase in the percentage of Disabled staff saying that they felt pressure from their manager to come to work despite not feeling well enough to perform their duties
- Decline in the percentage of Disabled staff believing the Trust provides equal opportunities for career progression or promotion
- There is no Disabled staff representation on the Board with voting membership

WDES – Introduction

The Workforce Disability Equality Standard (WDES) was mandated by the NHS Standard Contract in 2018; 2021 is its third year. It comprises of 10 measures (metrics) that compare the working and career experiences of Disabled and Non-Disabled staff in the NHS. The WDES is underpinned by the Social Model of Disability which argues that people are disabled because of societal barriers, rather than long-term health conditions.

With the Social Model of Disability in mind, the WDES seeks to help unmask barriers that have a negative impact on the experiences and career opportunities of Disabled staff in the NHS or disabled applicants seeking employment in the NHS, and thus facilitates transparency and informs year on year improvement.

Through providing comparative data between Disabled and Non-Disabled staff, the WDES illuminates where key differences lie, and thus provides the foundation for the development of Action Plans to enable the tracking of year-on-year progress and amelioration of the challenges.

The data for indicators 1 to 3 and 10 are taken from the Trust's workforce data as at 31st March 2021 and data for indicators 4 to 9 are taken from the Trust's 2020 National Staff Survey results.

The aim of this report is to present the Trust's latest Disability Equality Data and identify where improvements have been made and where there has been stagnation and/or regression.

Workforce Disability Equality Standard Progress in 2020/21

It is pleasing to note improvements in 6 out of the 10 indicators of disability equality:

- Increase in the likelihood of Disabled staff being appointed from shortlisting
- A reduction in the likelihood of Disabled staff entering the formal capability process
- A reduction in the percentage of Disabled staff experiencing harassment, bullying or abuse from their manager or colleague
- An increase in the National Staff Survey engagement score for Disabled staff for the third year running
- An increase in the number of Disabled staff saying that they are satisfied with the extent to which the Trust values their work
- 77% of Disabled staff report that the Trust has made adequate reasonable adjustments to enable them to carry out their work

A number of actions have been taken in the last WDES reporting year that will have attributed to the above improvements, these include:

- Supporting our Purple Network to achieve their objectives: operationalisation of the role of the network Chair (4 hours protected time a week)
- Launch of new Equality Diversity and Inclusion training programme on Allyship
- Embedding of Equality, Diversity and Inclusion in Leadership and Management training programmes
- Relaunch of the Reasonable Adjustments Policy with support/guidance given to both managers and staff
- Work on more inclusive Adverts and Job Descriptions
- Organisational focus on Bullying and Harassment
- All Divisions provided with granular data on Equality, Diversity and Inclusion to facilitate targeted interventions
- Launch of Just and Learning Culture approach to investigations and disciplinaries

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.

	Overall Workforce Profile 2020				Overall Workforce Profile 2021		
	Disabled	Not Disabled	Missing or Unknown		Disabled	Not disabled	Missing or Unknown
Workforce Total	5%	83%	13%		236 (5%)	3698 (84%)	504 **(11%)**
	Non-Clinical Cohort 2020				Non-Clinical Cohort 2021		
Cluster 1: Bands 1-4	6.1%	79.7%	14.2%		42 (6%)	574 (82%)	86 (12%)
Cluster 2: Bands 5-7	3.8%	86.4%	9.9%		15 (4%)	306 (87%)	30 (9%)
Cluster 3: Bands 8a-8b	5.2%	82.6%	12.2%		7 (6%)	108 (85%)	12 (9%)
Cluster 4 Bands 8c-9&VSM	2%	78.4%	19.6%		**0 (0%)**	41 (76%)	13 (24%)

Table 1: Workforce Profile - Non-Clinical Cohort

The data presented in Table 1 indicates that 236 staff (5% of the Workforce) have declared a Disability on the Trust's ESR. However, it is important to note that 493 (19% of the NHS Staff Survey respondents) were comfortable to declare their disabilities – this is a significant difference. The declaration rate within the Trust has been consistently at 5% with 504 (11%) members of staff withholding their disability on ESR as at 31 March 2021. However, this is an improvement of 2%: the non-declaration rate was 13% in 2020. Although high non-declaration rates are a national issue, Berkshire Healthcare continues to work on fostering a culture where employees are comfortable to declare.

This year, all Divisions within the Trust were given granular data that highlighted their non-declaration rates. Rather than placing emphasis on encouraging staff to declare disabilities, Divisions were encouraged to work on facilitating a Disability Confident Culture through embracing the Trust's Reasonable Workplace Adjustments Policy to support staff.

Table 1 also presents the numbers of disabled and non-disabled staff employed at Berkshire Healthcare at various Agenda for Change (AfC) pay-bands. Whilst there was an increase of 0.8% at Cluster 3 (Bands 8a-8b); Cluster 4 (Bands 8c-9&VSM) shrunk by 2% to 0%.

	Overall Workforce Profile 2020			Overall Workforce Profile 2021		
	Disabled	**Not Disabled**	**Missing or Unknown**	**Disabled**	**Not Disabled**	**Missing or Unknown**
Workforce Total	5%	83%	13%	236 (5%)	3698 (84%)	504 (11%)
	Clinical Cohort - 2020			Clinical Cohort - 2020		
Cluster 1: Bands 1-4	4.52%	84.97%	10.51%	51 (5%)	845 (87%)	76 (8%)
Cluster 2: Bands 5-7	4.79%	84.76%	10.45%	99 (5%)	1703 (87%)	164 (8%)
Cluster 3: Bands 8a-8b	4.07%	88.89%	7.04%	11 (4%)	260 (91%)	14 (5%)
Cluster 4: Bands 8c-9&VSM	8.89%	80%	11.11%	4 (9%)	37 (82%)	4 (9%)
Cluster 5: Medical and Dental Consultants	2.44%	53.66%	43.90%	3 (3%)	47 (48%)	48 (49%)
Cluster 6: Medical and Dental staff, Non-Consultant Career Grade	5.32%	58.51%	36.17%	4 (5%)	47 (54%)	36 (41%)
Cluster 7: Medical and Dental Staff, Medical and Dental Trainee Grades	0.00%	3.57%	96.43%	0 (0%)	0 (0%)	21 (100%)

Table 2: Workforce Profile - Clinical Cohort

The clinical cohort data presented in Table 2 above indicates that there were no substantial changes in the workforce profile.

The NHS WDES Indicators: Metrics 2-4

The following indicators are taken from Berkshire Healthcare data and will be used as a benchmark for the future.

Metric	Descriptor	2019/20	2020/21
2	Relative likelihood of Non-Disabled staff compared to Disabled staff being appointed from shortlisting across all posts. *A figure below 1:00 indicates that Disabled staff are more likely than Non-Disabled staff to be appointed from shortlisting.	1.22	1.13

Table 3:Relative likelihood of appointment from shortlisting

The data in Table 3 indicates that whilst recruitment trends still favour Non-Disabled staff, the likelihood of Disabled staff being appointed from shortlisting has improved since 2020: Non-Disabled staff are currently 1.13 times more likely to be appointed from shortlisting. However, one would note here that Metric 2 should be used cautiously as it does not capture an accurate picture – not all shortlisted candidates attend their interviews and not all staff will declare that they have a disability at application stage, yet the metric is based on shortlisting figures.

Metric	Descriptor	2019/20	2020/21
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. * This metric will be based on data from a two-year rolling average of the current year and the previous year. * A figure above 1:00 indicates that Disabled staff are more likely than Non-Disabled staff to enter the formal capability process.	9.61	4.30

Table 4: Relative likelihood of entering formal capability process.

The data in Table 4 shows significant improvement in the relative likelihood of Disabled staff compared to Non-Disabled peers entering the formal capability process based on performance since 2020 which may reflect the new Just Culture approach to casework. However, there are validity concerns with comparing the 2020 and 2021 figures.

Previously, calculations were based on annual data, but from 2021 criteria will be based on data from a two-year rolling average of the current year and the previous year, thus the two figures are not directly comparable.

Metric	Percentage of Disabled staff compared to Non-Disabled staff experiencing harassment, bullying or abuse in the last 12 months from:	Disabled 2018/19	Non-Disabled 2018/19	Disabled 2019/20	Non-Disabled 2019/20	Disabled 2020/21	Non-Disabled 2020/21
4 Staff Survey Q13a-d	(a) Patients/Service users, their relatives or other members of the public	35%	22%	30%	23%	30%	20%
	(b) Managers	19%	9%	16%	9%	15%	17%
	(c) Other Colleagues	26%	13%	23%	14%	21%	13%
	(d) 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.	60%	55%	53%	61%	54%	59%

Table 5: Harassment, bullying or abuse in the last 12 months

Table 5 indicates that the percentage of Disabled staff saying they have experienced harassment, bullying or abuse at work in the last 12 months:

(a) From patients/service users, their relatives or other members of the public has remained consistent at 30%, this is 10% higher than Non-Disabled staff experience

(b) From managers has decreased by 1%

(c) From other colleagues has reduced by 2%, however there is still a significant gap of 8% with Non-Disabled staff

(d) And they or a colleague have reported it has increased by 1%, however it is important to note that Non-Disabled staff are more likely to report their experiences of harassment, bullying or abuse

Metric	Equal opportunities for career progression or promotion	Disabled 2018/19	Non-Disabled 2018/19		Disabled 2019/20	Non-Disabled 2019/20		Disabled 2020/21	Non-Disabled 2020/21
5 Staff Survey Q14	Percentage of Disabled staff compared to Non-Disabled staff believing that the Trust provides equal opportunities for career progression or promotion.	83%	86%		86%	88%		84%	90%

Table 6: Opportunities for career progression or promotion

Table 6 indicates that the percentage of Disabled staff believing the Trust provides equal opportunities for career progression or promotion has decreased since last year by 2% and is 6% less than Non-Disabled staff.

Metric	Presenteeism	Disabled 2018/19	Non-Disabled 2018/19		Disabled 2019/20	Non-Disabled 2019/20		Disabled 2020/21	Non-Disabled 2020/21
6 Staff Survey Q11e	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.	27%	17%		23%	17%		**24%**	15%

Table 7: Presenteeism

Table 7 demonstrates that Disabled staff are 9% more likely to feel pressure from their manager to come to work, despite not feeling well enough than Non-Disabled staff. This figure has worsened by 1% since 2020.

Metric	Disabled staff's views / satisfaction with the extent to which their organisation values their work.	Disabled 2018/19	Non-Disabled 2018/19		Disabled 2019/20	Non-Disabled 2019/20		Disabled 2020/21	Non-Disabled 2020/21
7 Staff Survey Q5f	Percentage of Disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their organisation values their work.	44%	58%		54%	61%		55%	67%

Table 8: Satisfaction rate on how organisation values staff's work

Table 8 indicates that 55% of Disabled staff say they are satisfied with the extent to which their organisation values their work, however this is 12% less than Non-Disabled staff. The percentage number of Disabled staff saying this has improved by 1% on 2020 results.

Metric	Reasonable Adjustments for Disabled staff	2018/19	2019/20	2020/21
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.	74%	75%	77%

Table 9: Reasonable Adjustments

Table 9 indicates that 77% of Disabled staff say that their employer has made adequate adjustments to enable them to carry out their work, meaning that 23% have not had the adjustments required. However, whilst this figure represents an improvement of 2% on 2020's results, it is still 4% behind the national average of 81%.

Metric	NHS Staff Survey and the engagement of Disabled staff	Disabled 2018/19	Disabled 2019/20	Disabled 2020/21
9 **National Survey Staff Engagement Score**	(a) The staff engagement scores for Disabled and Non-Disabled staff	7.0	7.0	7.2
	(b) Has Berkshire Healthcare taken action to facilitate the voices of Disabled staff in your organisation to be heard?	Yes		

Table 10: The Engagement of Disabled Staff

Table 10 shows that the staff engagement score for Disabled staff has increased since last year to 7.2 – a figure that is well above benchmark average of 6.8. However, this is lower than the overall workforce engagement score which is 7.5.

It is worth noting that the Trust has answered 'Yes' to this question and voices of Disabled staff are heard via an active, up and running Purple Staff Network, whose Chair has protected time of half a day each week. The Purple Staff Network has Executive level sponsorship (Deputy Chief Executive Officer). The voice of disabled staff was sought in the co-production of the new People and EDI strategies.

Metric	Board Representation: the difference for Disabled and Non-Disabled staff.	Disabled 2018/19	Disabled 2019/20	Disabled 2020/21
10 **Board Representation**	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	2%	2%	(-) 5%

Table 11: Board Representation

The data in Table 11 shows that there is no Disabled staff representation on the Board with voting membership. Staff not declaring their disability status on ESR is prevalent throughout all levels of the organisation, this is demonstrated by 11% of the workforce not reporting their disability status on ESR.

Conclusion and Next Steps

Based on the 2020-21 data the following have been identified as areas of concern that the Trust must focus on for improvement:

- Lack of parity in the recruitment and selection process
- Presenteeism
- Staff who have not declared their disability status
- Disabled staff experiencing harassment, bullying or abuse from patients, service users, relatives or members of the public, their manager and colleagues
- Disabled staff believing the Trust provides equal opportunities for career progression or promotion
- Lack of Disabled representation on the Board with voting membership

With these concerns in mind, the Trust's EDI Improvement Plan (see Appendix 1) outlines actions the Trust will take to respond to the WDES and achieve improvements against the following themes:

- 'De-biasing' and 'inclusivisation' of the recruitment and selection processes
- Eradication of discrimination, bullying and harassment in the workplace
- Equalisation of career opportunities for development
- Increasing disability declaration rates
- Compassionate and inclusive leadership
- Allyship

Appendix 1: EDI Improvement Plan

Action	EDI Strategy Objectives	Progress	Next steps	Timescales
Continue to increase disability declaration rates on ESR	*Staff engagement scores for Disabled* *Declaration rates*	• Discussion of granular Divisional data with EDI Leads. • Continue to promote Reasonable Adjustments Policy – people need to see the benefits of declaring • Communication strategy to raise awareness about ESR data - people need to feel safe to declare.	• Continue to promote Reasonable Adjustment Policy • Continue to offer drop-in sessions to guide managers and staff about Reasonable Adjustment Policies • Communicate a reminder about the importance of declaration to all staff, and how they can use ESR Self Service functionality to update their personal information	Ongoing
Rollout of new Ready for Change Programme	*Allyship* *Emotional and Cultural Intelligence*	• Extensive rollout of the programme	• Identify and prioritise Divisions or Teams with greatest EDI need • 'Train the trainer' – have a pool of trainers to increase speed of rollout of programme • Review delivery and impact of programme	November 2021 December 2021 December 2021

Increase the likelihood of Disabled staff being appointed from shortlisting through improved and inclusive recruitment processes	*Recruitment Processes*	• Place inclusion at the centre of people recruitment • Monitor candidate profiles at all stages of recruitment	• Work with Purple Network and review recruitment process (including job adverts) • Deliver inclusive recruitment training (including unconscious bias) • Invest in a pool of EDI champions to sit on interview panels	September 2021 January 2022 February 2022
Continue to address the poorer experience of disabled staff reported through the NSS for Bullying and Harassment	*Inequalities and differentials in experience:* • *Just Culture* • *Bullying and Harassment*	• Promote Trust's Zero-Tolerance Policy about bullying and harassment, supported by Comms to reduce violence against our staff by patients and their families. • Appointment of an OD violence reduction lead to tackle issues of violence against our staff • Continue to promote reasonable adjustments policy and provide guidance and clarity for our staff with a disability and managers • Work with the Purple Network to improve use of soft intelligence about people's experience, in combination with data from Human Resources, EDI Team and Freedom to Speak Up processes	• Reduction of Bullying and Harassment to be a key deliverable of the newly formed EDI Team. • Continue to promote Reasonable Adjustment Policy • Continue to offer drop-in sessions to guide managers and staff about Reasonable Adjustment Policies • Embed Reasonable Adjustments Policy work EDI into Leadership Training for managers • Continue to promote the Reasonable Adjustments Policy through the internal communication channels for staff and managers	Ongoing

Continue to invest in developing compassionate and inclusive leadership	*Leadership and Management*	• Continue to thread EDI into Leadership and Management Training	• Review all Leadership and Management Training through EDI lenses. • Embed EDI in Leadership and Management Training. • Alignment of the EDI and OD leadership team, both reporting to the Director of EDI	December 2021 Ongoing
Provide inclusive career progression opportunities for development	*Inequalities and differentials in experience:*	• Use of reliable and robust data – to understand the experiences of our staff and proactively use data to address areas of concern. Work with the Purple Network to improve our use of soft intelligence about people's experiences, in combination with data from Human Resources, EDI Team and Freedom to Speak Up processes	• Career conversations embedded into the annual appraisal process • Implement and fully embed an inclusive talent management system, to support the development of a talent pipeline • Promote and support inclusive access to training, learning and development opportunities, at national, regional and local level • Identify any specific gaps requiring some targeted or bespoke • Alignment of the EDI and OD leadership team, both reporting to the Director of EDI. A new talent lead post will be recruited to that will report into this new wider team incorporating talent, leadership and EDI	Ongoing