

WDES (Workforce Disability Equality Standard) Report 2022-23





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Manchester University NHS Foundation Trust (MFT) Board members

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METRIC 7

Introduction

Nationally, it is known, based on various sources of data and lived experiences, that disabled colleagues have a poorer experience of working within the NHS. Our workforce consists of people with varied disabilities and long-term health conditions. They include a whole range of hidden and often changing conditions that will affect different individuals in different ways, in terms of their ability to work, so we need to cater for all their bespoke needs.

At MFT we are committed to improving those lived experiences and strive towards creating an inclusive culture where being disabled is not a barrier to progression, allows individuals to feel safe in the workplace and difference is embraced.

The importance of disability equality is embedded into the <u>NHS People Plan 2020</u> where it states 'The NHS must welcome all, with a culture of belonging and trust. We must understand, encourage and celebrate diversity in all its forms'. The People Promise declares 'a commitment to creating and maintaining a compassionate and inclusive culture where diversity is valued and celebrated as a critical component, and not just a desirable one.' The Trust must also meet its legal obligations under the Equality Act 2010 and The Human Rights Act 1998.

MFT's <u>Diversity Matters Strategy 2019-2023</u>, is currently being reviewed and an updated version is being developed for 2024-2028, where the voices of our workforce will be key to our aims and objectives. This approach is also strengthened by the <u>NHS EDI Improvement Plan</u>, which sets out targeted actions to address the prejudice and discrimination – direct and indirect – that exists through behaviour, policies, practices and cultures against certain groups and individuals across the NHS workforce.

As a Trust we want to focus on working in partnership with our patients, service users and workforce, to change our workforce systems, rather than trying to change individuals. This enables our staff to thrive and deliver the best possible services and care to the people of Manchester, Trafford and surrounding areas.



Each year the Trust is required to publish <u>Workforce Disability Equality Standard</u> (WDES) data.

The WDES is a set of ten specific measures (metrics) that enable NHS organisations to compare the experiences of Disabled and Non-disabled staff. This information informs the development of an action plan to demonstrate progress against the metrics to improve equality and inclusion for Disabled staff.

The WDES was mandated for all Trust's from April 2017. It is included in the NHS Standard Contract .

The WDES is important because research shows that a motivated, included and valued workforce helps to deliver high quality patient care, increased patient satisfaction and improved patient safety. It supports positive change for existing employees and enables a more inclusive environment for disabled people working in the NHS.

The following information in the report details key findings from the data collated for 2022/2023, comparisons of data from previous years, the progress made and actions that will be implemented to address the findings. This report is interactive and enables you to click on the indicators in the contents page and the indicator tabs at the top of each page to easily navigate through the report.

We encourage anyone reading this report, to give us feedback about the contents and suggest improvements, so that we can enable appropriate and effective lived experiences for our diverse colleagues.

WDES Metrics



There are ten (10) WDES metrics. Three (3) metrics focus on workforce data; Five (5) are based on questions from the NHS Staff Survey; One (1) metric focuses on disability representation on boards; One (1) metric (metric 9b) focuses on the voices of Disabled staff. Based on the requirement from the National team, the Trust submitted the WDES data for Metrics 1 – 3, and Metric 9b and Metric 10 on the National Data Collection Framework (DCF) on 31st May 2023. The staff survey results for the Metrics 4 – 9a, are taken directly from the WDES publications available on the NHS Staff Survey website.

WDES Metrics

Workforce metrics: For the following three metrics, compare the data for both Disabled and non-disabled staff.

- 1. Percentage of staff in AfC (Agenda for Change) paybands or medical and dental subgroups and very senior managers (including Executive Board members) compared with the percentage of staff in the overall workforce. This calculation should be undertaken separately for non-clinical and for clinical staff for clusters 1 to 4. Data Sourced from ESR
- 2. Relative likelihood of non-disabled staff compared to disabled staff being appointed from shortlisting across all posts. Data Sourced from ESR
- 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. Data Sourced from HR records

National NHS Staff Survey metrics (or equivalent): For each of the following four metrics, compare the responses for both Disabled and non-disabled staff. Data Sourced from NHSS

- **4.** Percentage of disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from: a) Patients/service users, their relatives or other members of the public b) Managers c) Other colleagues, 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.
- 5. Percentage of disabled staff compared to non-disabled staff believing that the Organisation provides equal opportunities for career progression or promotion.
- 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.
- 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.
- **8.** The following NHS Staff Survey metric only includes the responses of Disabled staff Percentage of disabled staff saying that their employer has made reasonable adjustment(s) to enable them to carry out their work.
- 9. NHS Staff Survey and the engagement of disabled staff For part a)compare the staff engagement scores for Disabled, non-disabled staff.
- a)The staff engagement score for Disabled staff, compared to nondisabled staff.
- b) Have you taken action to facilitate the voices of disabled staff in your organisation to be heard (Yes or No)?

Board representation metric: For this metric, compare the difference for Disabled and non-disabled staff.

- **10.** Percentage difference between the organisation's Board voting membership and its organisation's overall workforce, disaggregated:
- By voting and non-voting membership of the board.
- By Executive and non-exec membership of the board.

Data Limitations



- Five of the WDES metrics (4 to 9a) are drawn from questions in the National NHS staff survey.

 The reliability of the data drawn from those metrics is dependent upon the overall size of samples surveyed, the response rates to the survey questions, and whether the numbers of disabled staff are large enough to not undermine confidence in the data.
- For WDES, the National NHS staff survey (NHSS) Benchmark report has been used

5 Benchmarking groups

NHS organisations vary in the services they provide and relatedly, the challenges they face. Organisations are assigned to a benchmarking group based on the services they offer. This means that comparisons are only made between organisations of a similar type and ensures comparisons are fair. In the benchmark reports organisations' results are presented in the context of their benchmarking group's best, average and worst results.

• Not all Sodexo staff within Estates & Facilities are employed by MFT, so the data shown in the report is for MFT employees only. Equality, Diversity and Inclusion (EDI) team will work with Estates and Facilities to identify how to capture data for this staff group.

Definitions



	Definitions as per Technical Guidance by NHS England WDES Team.
Term	Definitions
Disabled staff	Disabled staff refers to those staff who have recorded a disability in Electronic Staff Record (ESR)
Non-disabled staff	Non-Disabled staff may include staff who are disabled but have not recorded it.
Unknown	"Unknown" disability status (i.e., staff who have either indicated that they 'Prefer not to say' or have not responded to the disability monitoring question in ESR)
Clusters	 The WDES standard requires organisations to 'group' staff into 'clusters.' Cluster 1: AfC Band 1, 2, 3 and 4 Cluster 2: AfC Band 5, 6 and 7 Cluster 3: AfC Band 8a and 8b Cluster 4: AfC Band 8c, 8d, 9 and VSM (including Executive Board members) Cluster 5: Medical and Dental staff, Consultants Cluster 6: Medical and Dental staff, non-consultant career grade Cluster 7: Medical and Dental staff, Medical and Dental trainee grades

Yearly comparison table 2019-2023



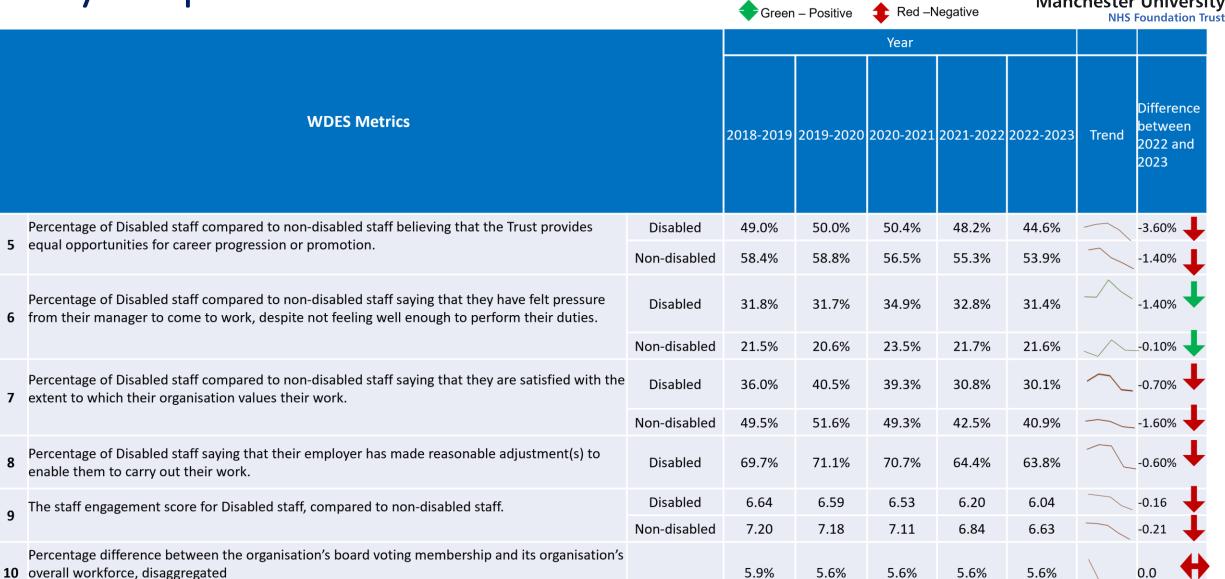
★ Red –Negative

Green – Positive

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					Year				
	WDES Metrics		2018-2019	2019-2020	2020-2021	2021-2022	2022-2023	Trend	Difference between 2022 and 2023
	Percentage of staff in Agenda for Change (AfC) pay-bands or medical and dental subgroups and very senior managers (including Executive Board members)	Overall	2.80%	3.00%	3.20%	3.70%	4.00%	/	0.30% 🕇
1	compared with the percentage of staff in the overall workforce. * Non-clinical, Clinical and Medical/Dental comparison data shown in the table represents	Non-clinical*	3.1%	3.4%	3.7%	4.7%	5.3%		0.60%
	% of disabled staff within each category (example: in 2023, 5.3% of all non-clinical staff in the Trust are disabled)	Clinical*	2.9%	3.1%	3.3%	3.7%	3.9%		0.20%
2	Relative likelihood of non-disabled staff compared to Disabled staff being appoint shortlisting across all posts	ted from		1.53	1.65	1.29	1.36		0.07
3	Relative likelihood of Disabled staff compared to non-disabled staff entering the process on the grounds of performance, as measured by entry into the formal caprocedure.	•		7.97	0.00	5.34	5.06	<u> </u>	-0.28
4-	Percentage of Disabled staff compared to non-disabled staff experiencing	Disabled	26.9%	28.4%	25.7%	32.8%	30.3%	~~	-2.50%
4a	harassment, bullying or abuse from Patients/Service users, their relatives or other members of the public.	Non-disabled	21.5%	22.9%	20.0%	24.5%	24.4%	~~	-0.10%
/h	Percentage of Disabled staff compared to non-disabled staff experiencing	Disabled	19.0%	18.5%	20.8%	22.3%	21.6%	_	-0.70%
4b	harassment, bullying or abuse from Managers	Non-disabled	10.7%	9.5%	11.4%	11.4%	11.4%	<u></u>	0.00%
4c	Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from colleagues	Disabled	24.9%	24.9%	27.3%	29.9%	27.1%		-2.80%
		Non-disabled	15.8%	15.5%	16.1%	17.9%	17.8%		-0.10%
	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	Disabled	44.6%	47.9%	47.0%	47.5%	46.5%	/	-1.00%
4d	colleague reported it.	Non-disabled	45.0%	46.2%	44.3%	44.9%	44.5%		-0.40%

Yearly comparison table 2019-2023





Key Findings

The WDES metrics are grouped under the following categories. The categories in yellow are the High Priority Areas For Improvement highlighted in the NHS England WDES report.



Workforce and Board Representation

There is an increase of **0.3%** in the proportion of disabled staff, from **3.7%** in 21/22 to **4%** in 22/23. The highest proportion of disabled staff are underrepresented in senior roles at MFT, especially in clinical roles.

The percentage of Board members who have declared that they are disabled remained the same as 21/22 at **5.6%**.

Out of **18** board members only **1** has declared a disability. **66.67%** of the board's status remains undeclared.

Recruitment

There is a slight increase of **0.07** in the relative likelihood of non-disabled staff compared to disabled staff, being appointed from shortlisting across all posts, from **1.3** in 21/22 to **1.4** in 22/23.

Capability

There is a slight decrease of **0.28** in the relative likelihood of disabled staff compared to non-disabled staff entering the formal capability process, from **5.34** in 21/22 to **5.06** in 22/23.

The disabled staff are more likely to enter the formal capability process as non-disabled staff.

Bullying & Harassment

There is a decrease of **2.5** % in bullying and harassment towards disabled staff from patients, service users, relatives and members of public, from **32.8**% in 21/22 to **30.3**% in 22/23

Bullying and harassment towards disabled staff from managers is slightly reduced by **0.7%**, from **22.3%** in 21/22 to **21.6%** in 22/23

As per the NHS England WDES report, the overall rank compared to 212 trusts nationally, MFT ranked **187** for Bullying and harassment towards disabled staff from managers.

There is a decrease of **0.8%** in bullying and harassment towards disabled staff from colleagues, from **27.9%** in 21/22 to **27.1%** in 22/23 and a decline of **1%** in the number of disabled staff reporting incidents, from **47.5%** in 21/22 to **46.5%** in 22/23.

Career Progression

There is a decrease of 3.6% in the number of disabled staff believing that the trust provides equal opportunities for career progression or promotion, from 48.2% in 21/22 to 44.6% in 22/23.

Pressure to come to work and Feeling Valued

There is a decrease of **1.4%** in the disabled staff who felt pressure to come to work, from **32.8%** in 21/22 to **31.4%** in 22/23.

However, there is a **0.7%** reduction in feeling that their work is valued, from **30.8%** in 21/22 to **30.1%** in 22/23.

Reasonable adjustments

This is a decrease of **0.6%** in the number of disabled staff saying that their employer has made reasonable adjustment(s) to enable them to carry out their work, from **64.4%** in 21/22 to **63.8%** in 22/23.

As per the NHS England WDES report, the overall rank compared to 212 trusts nationally, MFT ranked **199** for this indicator.

Staff Engagement

There is a decrease of **0.2** points in the staff engagement score for disabled staff.

The staff engagement score was significantly lower for disabled staff (6.04) than for Non-disabled staff (6.63).

As per the NHS England WDES report, the overall rank compared to 212 trusts nationally, MFT ranked **187** on the staff engagement indicator.

For the NHS Staff Survey Metrics, the number of disabled staff who responded to the NHS staff survey are more than the total number of staff who declared disability on ESR within MFT.

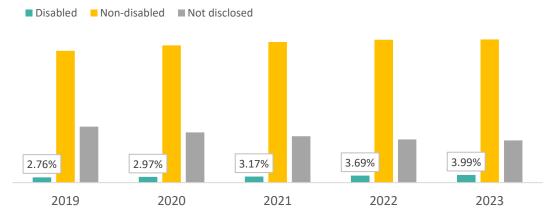
WDES Metric 1



Percentage of staff in AfC (Agenda for Change) paybands or medical and dental subgroups and very senior managers (including Executive Board members) compared with the percentage of staff in the overall workforce. To be calculated separately for non-clinical and for clinical staff for clusters 1 to 4.

Overall staff in MFT by ethnicity: 2019 – 2023 as at 31 March 2023.

		Headcount		Percentages			
Year	Disabled	Non- disabled	Not disclosed	Disabled	Non-disabled	Not disclosed	
2019	6,05	14,984	6,356	2.76%	68.28%	28.96%	
2020	7,07	16,911	6,188	2.97%	71.04%	25.99%	
2021	7,89	18,116	5,991	3.17%	72.77%	24.06%	
2022	1,029	20,602	6,219	3.69%	73.97%	22.33%	
2023	1,146	21,280	6,286	3.99%	74.12%	21.89%	



- In MFT **1146** staff recorded a disability (3.99%), which is an increase from last year's data of **1029** (3.69%). This value is closer to the most recently reported national average.
- There is still a **significant gap** in people disclosing their disability. Over the last 3 years the proportion of staff with non-disclosure of disability has slightly decreased, however the non-disclosure rate remains high.



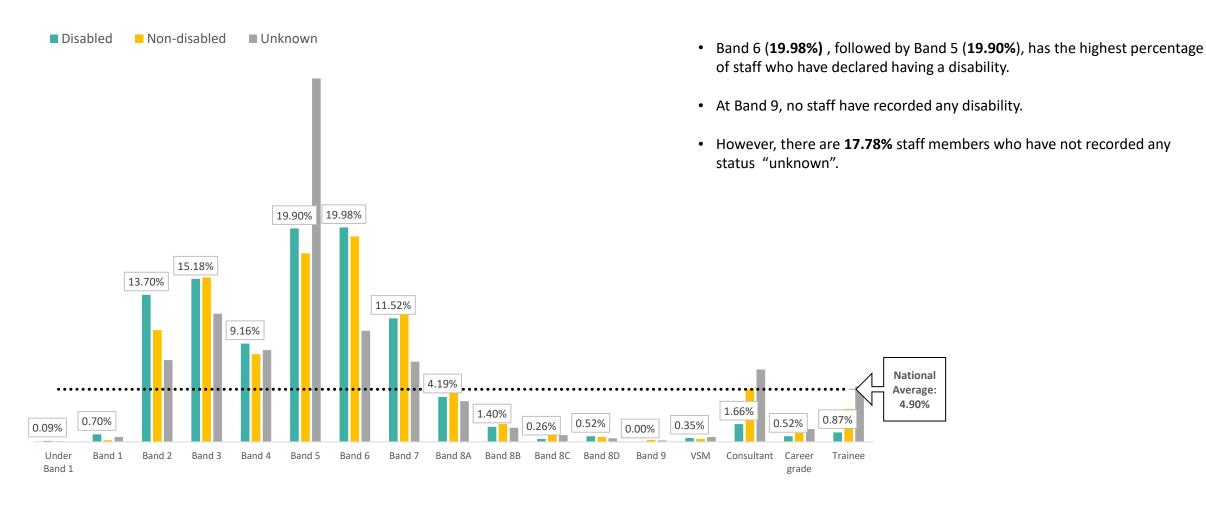
Overall staff in MFT by Clusters, Pay Bands & Grades as at 31 March 2023.

	Disabled		Non-disabled		Unknown			
Cluster Pay scale	Headcount	Headcount%	Headcount	Headcount%	Headcount	Headcount%	Total Headcount	
Cluster 1	445	4.68%	7,263	76.42%	1,796	18.90%	9,504	
Band 1	8	11.76%	32	47.06%	28	41.18%	68	
Band 2	157	5.50%	2,219	77.72%	479	16.78%	2,855	
Band 3	174	4.15%	3,263	77.91%	751	17.93%	4,188	
Band 4	105	4.41%	1,739	73.04%	537	22.55%	2,381	
Under Band 1	1	8.33%	10	83.33%	1	8.33%	12	
Cluster 2	589	4.15%	10,348	72.93%	3,251	22.91%	14,188	
Band 5	228	3.74%	3,740	61.33%	2,130	34.93%	6,098	
Band 6	229	4.62%	4,075	82.24%	651	13.14%	4,955	
Band 7	132	4.21%	2,533	80.80%	470	14.99%	3,135	
Cluster 3	64	3.52%	1,432	78.85%	320	17.62%	1,816	
Band 8A	48	3.52%	1,078	79.03%	238	17.45%	1,364	
Band 8B	16	3.54%	354	78.32%	82	18.14%	452	
Cluster 4	13	2.74%	366	77.22%	95	20.04%	474	
Band 8C	3	1.38%	176	80.73%	39	17.89%	218	
Band 8D	6	4.88%	97	78.86%	20	16.26%	123	
Band 9		0.00%	37	82.22%	8	17.78%	45	
VSM	4	4.55%	56	63.64%	28	31.82%	88	
Cluster 5	19	1.28%	1,046	70.25%	424	28.48%	1,489	
Medical and Dental staff, consultants	19	1.28%	1,046	70.25%	424	28.48%	1,489	
Cluster 6	6	2.37%	172	67.98%	75	29.64%	253	
Medical and Dental staff, non-consultant career grade	6	2.37%	172	67.98%	75	29.64%	253	
Cluster 7	10	1.01%	653	66.09%	325	32.89%	988	
Medical and Dental staff, trainee grades	10	1.01%	653	66.09%	325	32.89%	988	
Grand Total	1,146	3.99%	21,280		6,286	21.89%	28,712	

- The overall headcount for the Trust is 28,712, which includes
 - 1,146 (3.99%) disabled staff,
 - 21,280 (74.12%) non-disabled staff and
 - 6,286 (21.89%) staff who have not responded to the disability monitoring question in ESR.
- Cluster 2 has the majority of workforce 14,188 and the number of staff who have recorded a disability is the highest (589) here.
- In Clusters, 7 (32.89%), 6 (29.64%) and 5 (28.48%), the number of staff who have not responded/recorded their disability status is highest.
- The general trend of declaration rates decreasing as salary band increases, is consistent.

Manchester University NHS Foundation Trust

Overall staff in MFT by Pay Band and Grade as at 31 March 2023.



7

Overall – Clinical and Non-Clinical Clusters

72.93%



Disabled Non-Disabled Unknown

18.90%

20.04%

20.04%

29.64%

78.85%

70.25%

67.98%

Cluster 6

Staff

Non- Consultant

Medical and Dental

career grade

2.37%

66.09%

Cluster 7

Staff

Trainee grade

Medical and Dental

1.01%

- 3.52% 2.74% 1.28%
- 4.15% Cluster 2 Cluster 3 Cluster 4 Cluster 5 Band 5 Band 8A Band 8C Consultant Band 6 Band 8B Band 8D Medical and Band 7 Band 9 **Dental Staff** VSM

 Cluster 1 to 4 comprises of both Clinical and Non-clinical roles.
 Cluster 5 to 7 contains only Clinical staff.

NHS

NHS Foundation Trust

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- Cluster 5 to 7 contains only Clinical staff.
- Clinical roles can have both Non-medical, Medical & Dental staff.

- This Metric shows that declaration rates among medical and dental staff (cluster 5, 6 and 7) are particularly low.
- The data shows that disabled staff are under-represented in senior roles at MFT, especially in clinical roles.

National Average 4.9%

76.42%

Cluster 1

Band 1

Band 2

Band 3

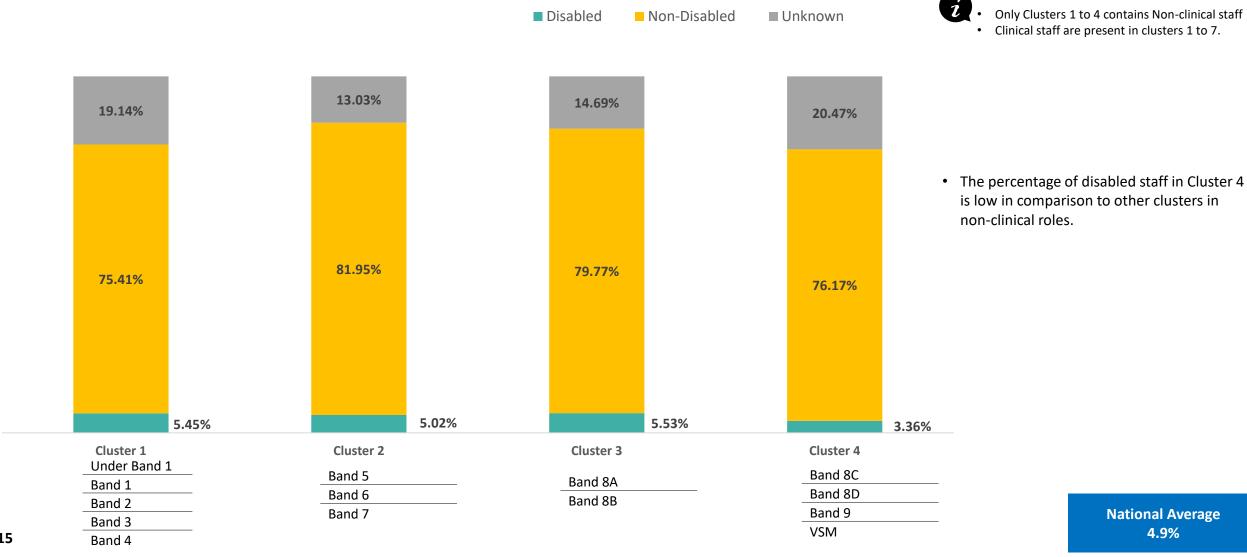
Band 4

Under Band 1

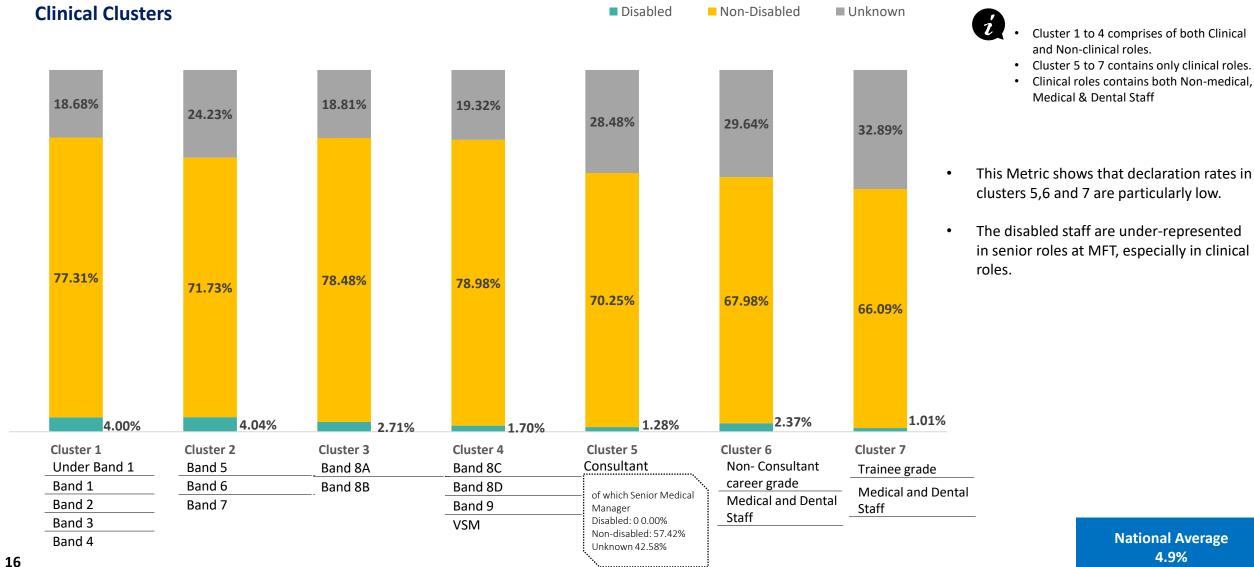
4.68%

NHS **Manchester University NHS Foundation Trust**





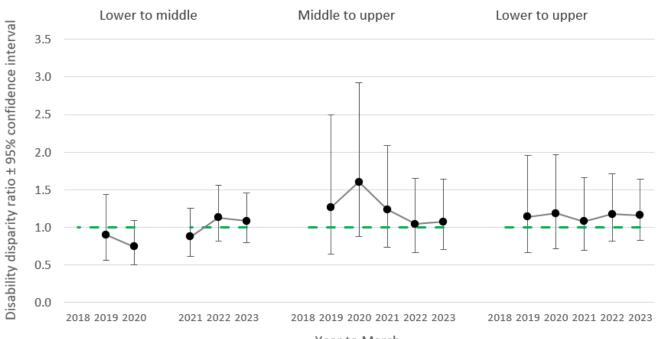




Manchester University NHS Foundation Trust

Disability disparity ratios for non-clinical staff on AfC paybands

Disability disparity ratios, non-clinical (Non-disabled/Disabled)



Year to March

- "Equity" 1.0— Disability Disparity Ratio

Lower: non-clinical bands 5 and under

Middle: non-clinical bands 6 to 7

Upper: non-clinical bands 8a and above



The disability disparity ratio compares the progression of non-disabled staff through the organisation with the progression of disabled staff through the organisation. If the disability disparity ratio is greater than "1.0" this means that progression favours non-disabled staff, whilst if the disability disparity ratio is below "1.0", this means that progression favours disabled staff.

Lower: non-clinical bands 5 and under

Middle: non-clinical bands 6 to 7

Upper: non-clinical bands 8a and above

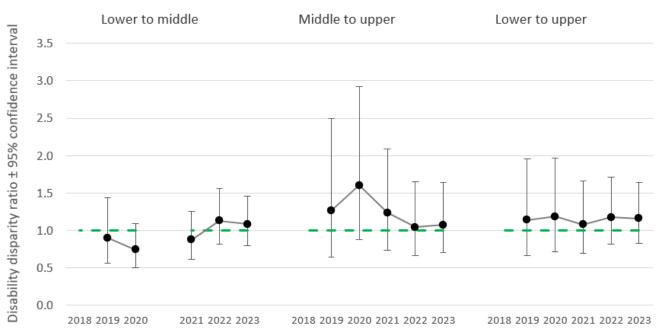
At March 2023:

- Lower to middle: 1.08; not significantly different from 1.0 (which is "equity")
- Middle to upper: 1.07; not significantly different from 1.0 (which is "equity")
- Lower to upper: 1.16; not significantly different from 1.0 (which is "equity").



Disability disparity ratios for clinical staff on AfC paybands

Disability disparity ratios, non-clinical (Non-disabled/Disabled)



Year to March

- • "Equity" 1.0— Disability Disparity Ratio

Lower: non-clinical bands 5 and under

Middle: non-clinical bands 6 to 7

Upper: non-clinical bands 8a and above



The disability disparity ratio compares the progression of non-disabled staff through the organisation with the progression of disabled staff through the organisation. If the disability disparity ratio is greater than "1.0" this means that progression favours non-disabled staff, whilst if the disability disparity ratio is below "1.0", this means that progression favours disabled staff.

Lower: non-clinical bands 5 and under

Middle: non-clinical bands 6 to 7

Upper: non-clinical bands 8a and above

At March 2023:

Lower to middle: **1.06**; not significantly different from 1.0 (which is "equity"). Middle to upper: **1.61**; higher than 1.0 (which is "equity") to a small degree. Lower to upper: **1.71**; higher than 1.0 (which is "equity") to a small degree.



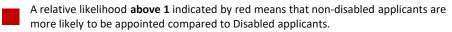
Relative likelihood of non-disabled staff compared to disabled staff being appointed from shortlisting across all posts: 2019-2023

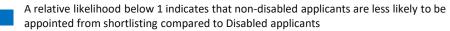
2019	2020	2021	2022	2023
1.53	1.67	1.65	1.28	1.36



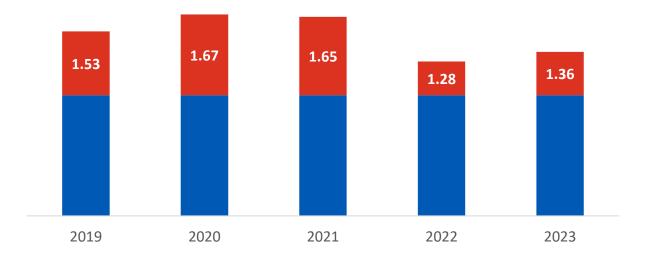
"Relative likelihood" compares the likelihood of non-disabled and disabled staff being appointed.

A relative likelihood of **1 means** that there is no difference and Disabled applicants are just as likely to be appointed compared to non-disabled applicants.





"For WDES metrics 2 (Recruitment), statistical significance is assessed using the 'four-fifths' rule. If the relative likelihood of an outcome for one subgroup compared to another is less than 0.80 or higher than 1.25, then the process would be identified as having an adverse impact: relative likelihoods between 0.8 and 1.25 suggest there is no significant difference between the subgroups. A lack of statistical significance should not be interpreted as meaning that disabled individuals or disabled staff do not experience inequalities in these areas."



- This metric shows non-disabled applicants are almost one and a half times more likely to be appointed from shortlisting compared to Disabled applicants.
- For the last few years, the Trust has appointed proportionately fewer disabled staff from shortlisting than non-disabled staff.

WDES Metric 3



Relative likelihood of disabled staff compared to non-disabled staff entering the formal capability process: 2019-2023

2019	2020	2021	2022	2023
1.9	7.97	0	5.34	5.06



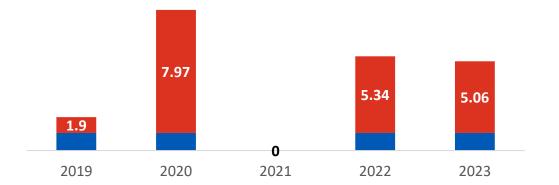
This metric compares the data for Disabled and non-disabled staff in regard to the relative likelihood of entering the formal capability process.

A relative likelihood of **1** means that there is no difference and non-disabled staff are just as likely to enter the formal capability process compared to disabled staff.

- A relative likelihood **above 1** indicated by red means that disabled staff are more likely to enter the formal capability process compared to non-disabled applicants.
- A relative likelihood **below 1** indicates that disabled staff are less likely to enter the formal capability process compared to non-disabled applicants.

If the average number of disabled staff entering the formal capability process (over the last two years) is less than 10, that strongly suggests there are no institutional issues in this area.

"For WDES metrics 3 (capability), **statistical significance is assessed using the 'four-fifths' rule.** If the relative likelihood of an outcome for one subgroup compared to another is less than 0.80 or higher than 1.25, then the process would be identified as having an adverse impact: relative likelihoods between 0.8 and 1.25 suggest there is no significant difference between the subgroups. A lack of statistical significance should not be interpreted as meaning that disabled individuals or disabled staff do not experience inequalities in these areas."



- The data covers a two-year rolling average of the current year and previous year. staff entering the capability process from 1 April 2021 to 31 March 2023, divided by 2.
- The calculation uses the number of staff going through a capability process for performance management only rather than ill health.
- The national average shows that disabled staff are twice as likely as non-disabled staff to enter the formal capability process on the grounds of performance

WDES Metric 4a



Disabled

staff survey, are more than the total number staff who

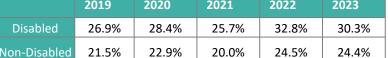
declared a disability on ESR within MFT.

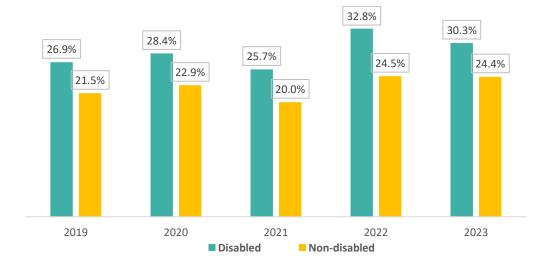
Non-disabled

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

(a) Patients/service users, their relative or other member of the public

					Overall Workforce at	Overall in MFT 1,146	Overall in MFT 21,280
					MFT: 28,712	Responded to NHSS 1870	Responded to NHSS 6267
2019	2020	2021	2022	2023	The number of c	isabled staff who respoi	nded to the NHS





- This data is from the National Staff Survey (NHSS) results
- There is a decrease in bullying of disabled staff from patients/service users, their relative or other members of the public by 2.09%.
- A higher proportion of disabled staff experience bullying, harassment and abuse from the public than non-disabled staff.

NHS Staff Survey Benchmark report 2022

National Average Disabled: 33.0% Non-Disabled: 26.2%

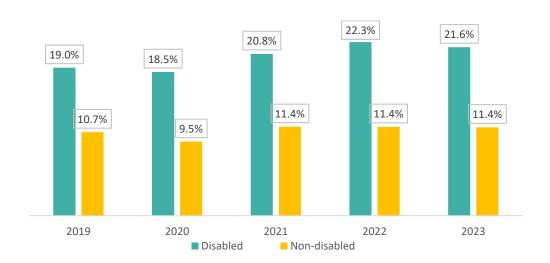
WDES Metric 4b

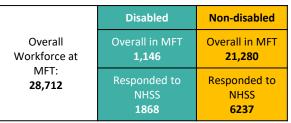


Parsontage of disabled staff compared to non-disabled staff experiencing baracement, bullying or abuse from:

Percentage of disabled staff compared to non-disabled	stan experiencing narassment, bunying or abuse from.	
(b) Managers		_

	2019	2020	2021	2022	2023
Disabled	19.0%	18.5%	20.8%	22.3%	21.6%
Non-Disabled	10.7%	9.5%	11.4%	11.4%	11.4%





The number of disabled staff who responded to the NHS staff survey, are more than the total number staff who declared a disability on ESR within MFT.

- This data is from the National Staff Survey results
- There has been a reduction of 0.7% in the number of disabled staff experiencing bullying or abuse from managers
- A higher proportion of disabled staff experience bullying, harassment and abuse from managers than non-disabled staff.
- As per the NHS England WDES report this metric is ranked in the bottom 10% nationally.

NHS Staff Survey Benchmark report 2022

National Average Disabled: 17.1% Non-disabled: 9.9%

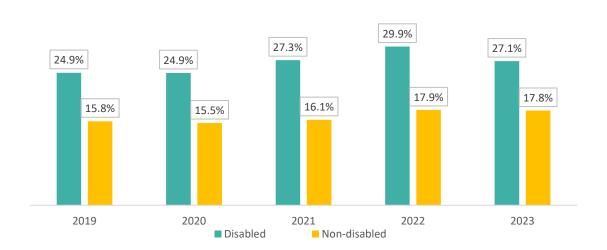
WDES Metric 4c

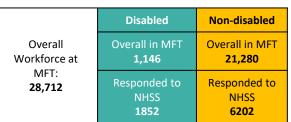


Percentage of disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from:

(c) Other Colleagues

	2019	2020	2021	2022	2023
Disabled	24.9%	24.9%	27.3%	29.9%	27.1%
Non-Disabled	15.8%	15.5%	16.1%	17.9%	17.8%





U

The number of disabled staff who responded to the NHS staff survey, are more than the total number staff who declared a disability on ESR within MFT.

- This data is from the National Staff Survey results
- There has been a decrease of 2.8% in the number of disabled staff that have experienced harassment, bullying or abuse from other colleagues.
- A higher proportion of disabled staff experience bullying, harassment and abuse from colleagues than non-disabled staff.

NHS Staff Survey Benchmark report 2022

National Average Disabled: 26.9% Non-disabled: 17.7%

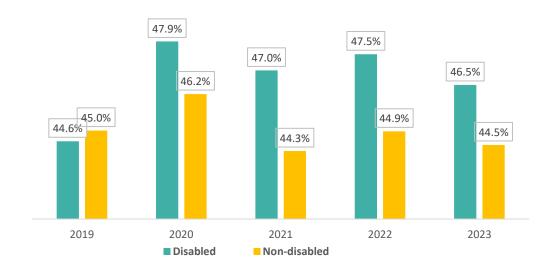
WDES Metric 4d



Percentage of disabled staff compared to non-disabled staff saying the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it

	Disabled	Non-disabled
Overall Workforce at	Overall in MFT 1,146	Overall in MFT 21,280
MFT: 28,712	Responded to NHSS 826	Responded to NHSS 2010

	2019	2020	2021	2022	2023
Disabled	44.6%	47.9%	47.0%	47.5%	46.5%
Non-Disabled	45.0%	46.2%	44.3%	44.9%	44.5%



- This data is from the National Staff Survey results
- This metric shows a 1% reduction in disabled staff reporting harassment the last time it happened compared to last year
- Nearly half of disabled staff reported the latest incidence of harassment, bullying or abuse.
- Disabled staff are only slightly more likely to report incidences compared to non-disabled staff.

NHS Staff Survey Benchmark report 2022

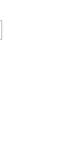
National Average Disabled: 48.4% Non-disabled: 47.3%

WDES Metric 5



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

	2019	2020	2021	2022	2023
Disabled	49.0%	50.0%	50.4%	48.2%	44.6%
Non-Disabled	58.4%	58.8%	56.5%	55.3%	53.9%



49.0%	58.8%	56.5%	55.3%	53.9%
2019	2020 ■ Disab	2021 led Non-dis	2022 sabled	2023

Overall
Workforce at
MFT:
28,712

Disabled

Overall in MFT
1,146

Responded to
NHSS
1873

Non-disabled

Overall in MFT
21,280

Responded to
NHSS
6270

t

The number of disabled staff who responded to the NHS staff survey, are more than the total number staff who declared a disability on ESR within MFT.

- This data is from the National Staff Survey results
- 45% of disabled staff believe the trust provides equal opportunities compared to 54% of nondisabled staff.
- This metric shows a 3.6% decrease in disabled staff with this view compared to last year, but the percentage remains lower than the national average.
- The NHS England WDES data suggests there is a correlation between how well a trust is led overall and how disabled staff feel about their opportunities for career progression.

NHS Staff Survey Benchmark report 2022

National Average Disabled: 51.4% Non-disabled: 57.3%

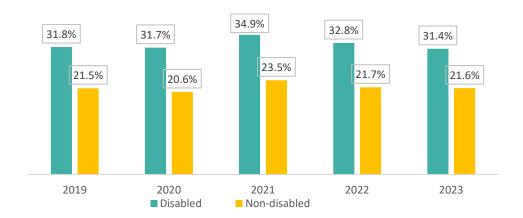
WDES Metric 6

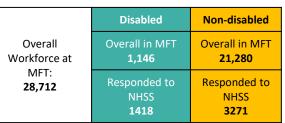


Percentage of disabled staff compared to non-disabled staff saying they felt pressure to come to work despite not

feeling well enough to perform their duties

	2019	2020	2021	2022	2023
Disabled	31.8%	31.7%	34.9%	32.8%	31.4%
Non-Disabled	21.5%	20.6%	23.5%	21.7%	21.6%





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The number of disabled staff who responded to the NHS staff survey, are more than the total number staff who declared a disability on ESR within MFT.

- This data is from the National Staff Survey results
- Nearly one in three disabled staff have felt pressure from their manager to work, despite not feeling well enough to perform their duties.
- Disabled staff are nearly one and a half times more likely to have this view compared to non-disabled staff.
- This metric shows a 1.4% reduction in disabled staff feeling pressure to work compared to last year.

NHS Staff Survey Benchmark report 2022

National Average Disabled: 30.0% Non-disabled: 20.8%

WDES Metric 7



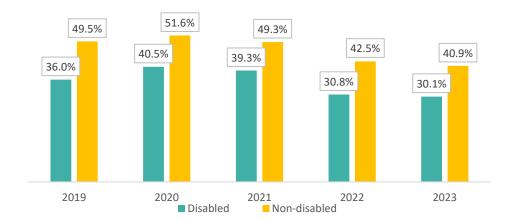
Percentage of disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their organisation values their work

	Disabled	Non-disabled
Overall Workforce at	Overall in MFT 1,146	Overall in MFT 21,280
MFT: 28,712	Responded to NHSS 1862	Responded to NHSS 6239



The number of disabled staff who responded to the NHS staff survey, are more than the total number staff who declared a disability on ESR within MFT.

	2019	2020	2021	2022	2023
Disabled	36.0%	40.5%	39.3%	30.8%	30.1%
Non-Disabled	49.5%	51.6%	49.3%	42.5%	40.9%



- · This data is from the National Staff Survey results
- 30% of disabled staff feel the trust values their work compared to 41% of nondisabled staff and the percentage has decreased over the previous years.
- This metric shows a 0.7% reduction in disabled staff feeling their work is valued compared to last year

NHS Staff Survey Benchmark report 2022

National Average Disabled: 32.5% Non-disabled: 43.6%



Percentage of disabled staff saying their employer has made reasonable adjustment(s) to enabled them to carry out their work

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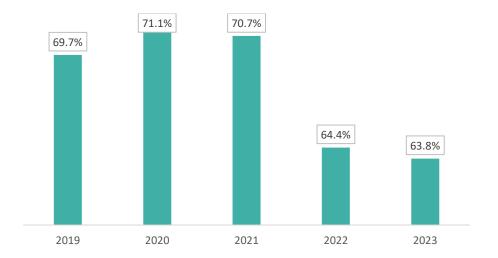
Prior to 2022, the term "adequate adjustments" was used.

	Disabled	Non-disabled
Overall Workforce at	Overall in MFT 1,146	Overall in MFT 21,280
MFT: 28,712	Responded to NHSS 1118	Responded to NHSS



The number of disabled staff who responded to the NHS staff survey, are more than the total number staff who declared a disability on ESR within MFT.

	2019	2020	2021	2022	2023
Disabled	69.7%	71.1%	70.7%	64.4%	63.8%



- This data is from the National Staff Survey results
- Nearly two thirds (64%) of disabled staff say the Trust has made reasonable adjustments. This figure is lower than the national average of 72%.
- This metric shows a 0.6% reduction in disabled staff saying reasonable adjustments have been made compared to last year.
- As per the NHS England WDES report, this metric is ranked in the bottom 10% nationally.

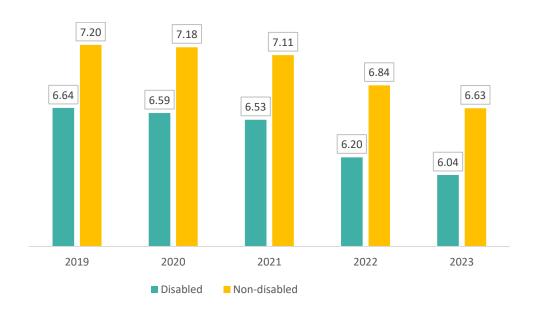
NHS Staff Survey Benchmark report 2022

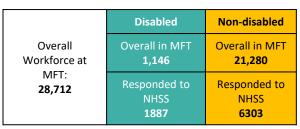
WDES Metric 9a

Manchester University NHS Foundation Trust

Staff Engagement Score

	2019	2020	2021	2022	2023
Disabled	6.64	6.59	6.53	6.20	6.04
Non- disabled	7.20	7.18	7.11	6.84	6.63





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The number of disabled staff who responded to the NHS staff survey, are more than the total number staff who declared a disability on ESR within MFT.

- This data is from the National Staff Survey results.
- The staff engagement score was significantly lower for disabled staff (6.04) than for non-disabled staff (6.63).
- The difference between disabled and non-disabled staff has not changed largely over the last five years.
- This metric shows a **0.2** points reduction in the staff engagement score for disabled staff compared to last year
- As per the NHS England WDES report, this metric is ranked in the bottom 10% nationally.

NHS Staff Survey Benchmark report 2022

National Average Disabled: 6.4 Non- Disabled: 6.9

WDES Metric 9b



Has your Organisation taken action to facilitate the voices of disabled staff in your organisation to be heard (yes or no)?

For significant improvements to be achieved against the WDES metrics, it is essential that the voices of disabled staff continue to be heard loud and clear. MFT has taken the following actions to facilitate the voices of disabled staff to be heard:

Staff Network & Engagement Group

The Trust now has a variety of Staff Networks including the Diverse Abilities Network (DAN), which is supported by the Disability Engagement Group, (DEG) chaired by a HR Director, providing senior leadership support to the voice of the group. The Trust is undertaking a review of staff networks for all protected characteristics and how they can best be supported, to enhance the support they provide to staff and in turn, to deliver effective services, through our diverse workforce, to our diverse patients and service users. A Staff Network Development Session was held in September 2023 with all Staff Network Chairs, facilitated by the Organisational Development Team and the EDI Team, to form the guidance for the future development of the staff networks. Discussions included Protected time, Network Models and key challenges. The Trust's Chief Executive, Mark Cubbon, now meets with Staff Network chairs as a group on a quarterly basis to discuss progress and improvements. The members of DAN and DEG also attend senior strategic meetings, such as the Workforce Strategic Equality Group, chaired by the Group Executive Director of Workforce & Corporate Resources and the Group Equality Diversity and Human Rights Committee, chaired by the Joint Group Medical Director, to discuss and escalate the high areas of risk.

Reasonable Adjustment Framework & Toolkit

The Trust was successful in receiving WDES Innovation Funding recently to enhance the understanding, guidance and delivery of a reasonable adjustment framework and toolkit for staff and managers. The Reasonable Adjustment Task and Finish Group which, consists of members from DAN & DEG, meet regularly to discuss the design and implementation of the reasonable adjustment support process for disabled staff. which is planned to go live in November2023. This includes:

- Recording of reasonable adjustment discussion between the manager and the staff into our workforce electronic system "Empactis" in a consistent way to help managers and staff with disabilities to proactively implement reasonable adjustments.
- Sharing this information with other managers if staff move to a different team.
- Reviewing options of portability if staff moves to other NHS organisations.
- The above is complemented by ACAS training delivered for managers; with sessions completed and scheduled this year.

Bullying Harassment & Abuse

The Workplace Bullying, Harassment and Abuse Task and Finish Group reconvened in 2023. The outcomes of the Group will be closely monitored and embedded within NHS England's EDI Improvement Plan, to address High Impact Action 6, which is to 'Create an environment that eliminates the conditions in which bullying, discrimination, harassment and physical violence at work occur. The Chair of DAN attends and staff that have experienced bullying, harassment, abuse and discrimination will be encouraged to attend, to inform discussion and create solutions.

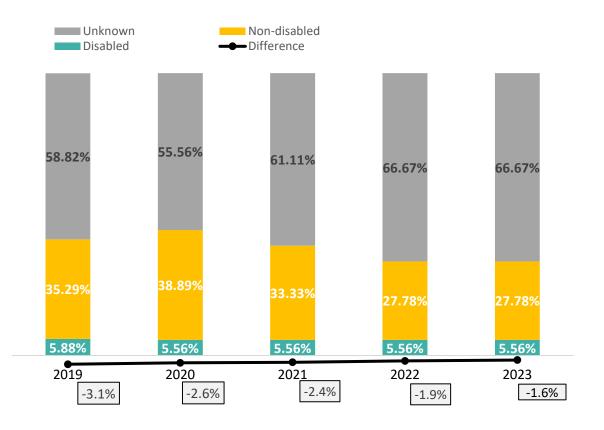
Board Members Sponsorship

The Trust has agreed that each Board member will act as a sponsor for one or two of the nine protected characteristics. This will result in dedicated and targeted leadership support, provide accountability and governance from senior leaders. reinforce the commitment to improving lived experiences and develop an inclusive leadership culture. Most importantly it will enable Board members to hear the voices of disabled staff.



Percentage difference between the organisation's board membership and its organisation's overall workforce, disaggregated:

- by voting and non-voting membership of the board
- by executive and non-exec membership of the board.





For percentage difference, value of:

- A value of 0.0 means that the percentage of disabled members on the board of directors is exactly the same as the percentage of disabled staff in the workforce.
- A positive value means that the percentage of disabled members on the board of directors is higher than in the workforce, and
- A negative value means that the percentage of Disabled members on the board of directors is lower than in the workforce.
- These calculations are made for all board members considered together, as well as for voting members and executive members considered separately.

Vacu	Headcount Year					Percentage			
Year	Category	Disabled	Non-disabled	Unknown	Total	Disabled	Non-disabled	Unknown	
2022	Exec	1	3	5	9	11.11%	33.33%	55.56%	
2023	Non-exec	0	2	7	9	0.00%	22.22%	77.78%	

- · All board members have voting membership.
- The number of disabled voting board members has remained the same at **5.56%** across the past four years.
- Out of 18 board members there is only 1 (Exec board member) declaration of disability.
 Disabled board members were at least proportionately represented on the board in terms of headcount.
- 66.67% of board members have not recorded their status.

Key Areas of Progress and Actions for Next 12 Months



Culture Change

Leadership

1. Diversity Matters Strategy

In 2023, the EDI Team conducted a series of listening events with colleagues across the Trust and communities, to develop the Trust's EDI strategy – 'Diversity Matters 2024-2028'. Consultation is also currently taking place with our communities. The refreshed strategy will reflect an understanding of the WDES data to improve the experience of ethnically diverse colleagues across the Trust. The Strategy will be published in 2024 and shared with our workforce and communities.

2. NHS Employers' Diversity In Health & Care Partners Programme 2023/24

The Trust is participating in the NHS Employers' Diversity In Health & Care Partners Programme 2023/24. The Programme supports health and care organisations to create more inclusive workplace cultures, where uniqueness of beliefs, backgrounds and ways of living are welcomed and celebrated. It is a year-long programme that includes a session for Board members on the strategic business case for EDI, four face-to-face interactive modules and specialist virtual masterclasses. The programme also provides access to leading industry experts, good practice, guidance, resources and networking opportunities.

3. Board members and Protected characteristics

The Trust has agreed that each Board member will act as a sponsor for each protected characteristic. This will result in dedicated and targeted leadership support, provide accountability and governance from senior leaders. reinforce the commitment to improving lived experiences and develop an inclusive leadership culture.

Recruitment

4. The MFT Widening Participation Team

Career Progression

The MFT Widening Participation Team continued to deliver exceptional supported opportunities to attract the best of the talent Manchester has to offer. The Trust offer supported Internships and employment-based study programmes, to give students the opportunity to develop employability skills. MFT has operated a Supported Internship programme for over 10 years in partnership with a local non-profit support provider and several local educational facilities. The Trust now hosts interns across North Manchester, Trafford, Oxford Road and Wythenshawe sites making it one of the largest employer hosts in the country. 23% of the pre-employment students and 100% of the interns declared as disabled. The scheme typically sees around 50-60% of learners gaining paid employment at the end of the programme.

In 2022-23 they piloted a community recruitment campaign. which makes MFT roles more accessible to our local communities. They market opportunities directly to people in

local communities, through stakeholders and deliver recruitment processes advice and guidance in the local community, to simplify the application and selection process where applications are completed following interview. Campaigns were piloted across Manchester and Trafford. For all campaigns, all roles were filled, and they succeeded in attracting a more diverse range of candidates.

Reasonable
Adjustments
Profile & webinars

5. Reasonable adjustments

MFT's Reasonable Adjustments Task and Finish Group was recently successful in achieving Workforce Disability Equality Standard (WDES) Innovation Funding to build an innovative digital reasonable adjustments profile into our employee management system, Empactis, with associated guidance and policy. This innovation will improve our retention of disabled staff aligned to national guidance through ensuring they are appropriately supported to request and receive reasonable adjustments throughout their employee journey. Staff with reasonable adjustments already in place, will have an official record, so if they move roles, or their line manager changes, there is evidence of agreed arrangements. The profile will go live on 1st November 2023. The Trust is delivering bespoke reasonable adjustment webinars in partnership with ACAS to increase the awareness and understanding of reasonable adjustments. The webinars are extremely popular with over 250 expressions of interest so far and a total attendance of 71 people at the first session in September 2023 and more planned for December. This work will include the development of resources and dedicated spaces on the staff intranet.

Key Areas of Progress and Actions for Next 12 Months



Bullying, Harassment & Discrimination

6. Bullying Harassment and Abuse

The Workplace Bullying, Harassment and Abuse Task and Finish Group reconvened in 2023. The outcomes of the Group will be closely monitored and embedded within NHS England's **EDI Improvement Plan**, to address High Impact Action 6, which is to 'Create an environment that eliminates the conditions in which bullying, discrimination, harassment and physical violence at work occur.' Staff that have experienced bullying, harassment and abuse will be encouraged to attend, to inform discussion and create solutions. To support targeted approaches to reducing bullying, harassment and abuse in the workplace, the EDI Team are working with the Estates and Facilities Team to expand the recording of Sexual Violence assaults via the Ulysses Incident Management System so that staff can directly report incidents of bullying, harassment and abuse.

Staff Experience

7. Staff Network & Engagement Groups

The Trust now has a variety of Staff Networks including, BAME Staff Network, LGBTQ+ Staff Network, Diverse Abilities Network, Muslim Staff Network, Hindu Staff Network, Carers Network, Armed Forces Staff Network and others developing in the future. The Networks are operating at various stages but are supported by our Engagement Groups, chaired by HR Directors, providing senior leadership support to the voice of the groups. The Trust is undertaking a review of staff networks for all protected characteristics and how they can best be supported, to enhance the support they provide to staff and in turn, to deliver effective services, through our diverse workforce, to our diverse patients and service users. A Staff Network Development Session was held in September 2023 with all Staff Network Chairs to form the guidance for the future development of the staff networks. Discussions included Protected time, Network Models and key challenges. The Trust's Chief Executive, Mark Cubbon, now meets with Staff Network chairs as a group on a quarterly basis to discuss progress and improvements.

Accessible Information Standard

8. Accessible Information Standard

A robust AIS Framework has been developed as part of the AIS Steering Group Committee, to ensure full compliance, which focuses on each of the AIS National objectives. Feedback from the Committee is relayed to the Manchester Disability Collaborative Partnership Forum, which is facilitated by Breakthrough UK and includes other leading disability organisations and charities. Members of the Steering Group Committee feedback each quarter on achievements. The Learning Disabilities Safeguarding Team have driven forward a number of actions to support relevant patients, such as a successful bid for "Board Maker", which is a tool that can be used to help communicate with patients who are non-verbal and/or struggle to communicate, a Learning Disability & Autism (LD&A) nurse has been recruited at MRI to support LD&A workstreams and deliver service improvements, the Outpatients Department (OPD) are looking at clinic days/times to make more accessible appointments for young people/working people to attend that do not disrupt their job/college/university. This will reduce the amount of DNA's and loss of working/learning time and pilot has been in run in North Manchester whereby staff have been trained as "Super Users" to support staff when recording information. The pilot has been successful, and they will be looking to roll this initiative out more widely across the LCO.

Neurodiversity

9. Neurodiversity Task & Finish Group

There is a growing awareness of the unique adjustments required for colleagues with neuro-diverse disabilities. A task and finish group has been established with HR staff from across the Trust to provide greater understanding of how managers can support colleagues with neurodiverse disabilities. This is supported by several resources for managers and staff on the Trust's internal intranet.

Key Areas of Progress and Actions for Next 12 Months



Staff Declaration

10. ESR Declaration Campaign

The Trust has undertaken additional engagement with the Disabled workforce through the delivery of an engagement and communications campaign to increase declaration rates via ESR. The insights collected from Disabled staff will inform a programme of work designed to develop an inclusive workplace for Disabled staff directed by Disabled staff. The ESR campaign included information and guidance on how to access ESR to update Disabled status, and where to gain support to address accessibility needs. Messages regarding the importance of declaration have been added to pay slips to target as many staff as possible.

Disability Framework

11. Disabled NHS Directors Network (DNDN) Framework

Whilst supporting the delivery of the national EDI Improvement Plan, there are high impact actions identified by DNDN to enable disabled staff to have great careers in the NHS, which MFT will seek to deliver, which are:

- Develop manager training to provide confidence/literacy in relation to disability.
- Develop a campaign to persuade staff who identify privately as disabled, to identify themselves as disabled on ESR.
- Set targets regarding disabled staff entering the capability process or experiencing bullying and harassment.
- Report on the disability pay gap.
- Publish performance against the Accessible Information Standard.
- Support a central NHS reasonable adjustment service and accept that reasonable adjustments change with time.
- Develop and support disability passports.
- Establish a reasonable adjustment budget to facilitate the costs for reasonable adjustments.
- Develop leadership development programme for developing disabled leaders.
- Within 3 years every board has at least one member who identifies as disabled.

Capacity to meet objectives

12. EDI Team Restructure

To develop a robust and effective Diversity Matters Strategy, 2024-2028, we need to be able to respond to the demands made of the EDI Team. We are currently consulting with EDI Team members, to restructure the team, to be more flexible and responsive to our priorities and to create an inclusive culture within the workforce and diverse communities.



METRIC 10

Action	By When	By Who
Renew the Diversity Matters Strategy 2024-2028	30 th August 2024	EDI Team
Implement EDI Improvement Plan (addressing all the High Impact Actions)	2023-2025	EDI Team and Partners from across the Trust
Provide progress of reasonable adjustment request profiles	31 st May 2024	HR
Produce Staff Network and Engagement Groups policy	31 st May 2024	EDI Team
Develop Accessible Information Standards compliance	31 st May 2024	EDI Team
Restructure the EDI Team	30 th November 2023	EDI Team



We would really appreciate feedback and suggestions for improvements on this report

Please contact the Equality Diversity & Inclusion Team via the email address below

equality@mft.nhs.uk