

Workforce Disability Equality Standard 2019-2020

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Introduction

The Workforce Disability Equality Standard (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 can then be used by the organisation to develop a local action plan, and to demonstrate progress against the indicators of disability equality. The WDES was made mandate for all Trusts and Foundation Trust from April 2019. The WDES has been commissioned by the Equality and Diversity Council (EDC). It is mandated through the NHS Standard Contract and is restricted to NHS Trusts and Foundation Trusts for the first two years of implementation.

The purpose of the WDES is to improve the experience of disabled staff and those seeking employment within the NHS. It mandates the reporting of data by NHS Trust's and Foundation Trusts to outline steps they will take to improve the experience of disabled staff through the provision of action plans. The Trust will need to outline how it has elevated the voices of disabled staff as well as the action it plans to take to improve the experience of disabled staff, which is evidenced to be poorer than that of non-disabled Staff.

The Metric requirements for the data presented in this report are determined by NHS England as outlined in the Workforce Disability Equality Standard Technical Guidance.

Scope

The WDES data in this report has been obtained from the following sources:

- Metrics 1, 2 and 10- Staff Records (ESR).
- Metric 3- Human Resource Team records.

• Metrics 4, 5, 6, 7, 8 and 9- Staff Survey.

The WDES includes a reporting category of, 'Other Locally Agreed' pay. These are staff who are not on Agenda for Change contracts, who are not Very Senior Managers or Medical and Dental staff. They include for example staff who remain on Whitley pay scales and Apprentices on specific pay points. There are 90 members of staff at the Trust on 'Other Locally Agreed' pay.

WDES Results-Manchester University NHS Foundation Trust 2019-2020

WDES Metrics	MFT 2018-2019	MFT 2019-2020
Metric 1.	Overall: 2.84%	Overall: 2.97% (707)
Percentage of staff in Agenda for Change (AfC) pay bands or	Cluster 1: 2.87%	Cluster 1: 2.96% (256)
medical and dental subgroups and very senior managers	Cluster 2: 3.09%	Cluster 2: 3.47% (394)
(including Executive Board members) compared with the	Cluster 3: 2.27%	Cluster 3: 2.52% (34)
percentage of staff in the overall workforce.	Cluster 4: 1.70%	Cluster 4: 2.26% (8)
	Cluster 5: 0.63%	Cluster 5: 0.58% (7)
Organisations should undertake this calculation separately for	Cluster 6: 1.05%	Cluster 6: 0.78% (5)
non-clinical and for clinical staff.	Cluster 7: 1.81%	Cluster 7: 1.16% (2)
Cluster 1: AfC Band 1, 2, 3 and 4	Other locally agreed: 2.88%	Other Locally Agreed: 1.11% (1)
Cluster 2: AfC Band 5, 6 and 7		
Cluster 3: AfC Band 8a and 8b	Clinical	Clinical
Cluster 4: AfC Band 8c, 8d, 9 and VSM (including Executive	Overall: 2.62%	Overall: 2.83% (494)
Board	Cluster 1: 2.68%	Cluster 1: 2.70% (111)
members)	Cluster 2: 3.03%	Cluster 2: 3.37% (343)
Cluster 5: Medical and Dental staff, Consultants	Cluster 3: 1.86%	Cluster 3: 2.34% (23)
Cluster 6: Medical and Dental staff, Non-consultant career	Cluster 4: 1.71%	Cluster 4: 2.19% (3)
grade	Cluster 5: 0.63%	Cluster 5: 0.58% (7)
Cluster 7: Medical and Dental staff, Medical and dental trainee	Cluster 6: 1.05%	Cluster 6: 0.78% (5)
grades	Cluster 7: 1.81%	Cluster 7: 1.16% (2)
	Other locally agreed: 3.13%	Other Locally Agreed: 0.00% (0)
Note: Definitions for these categories are based on Electronic		
Staff Record (ESR) occupation codes with the exception of	Non-Clinical	Non-Clinical
medical and dental staff, which are based upon grade codes	Overall: 3.48%	Overall: 3.37% (213)
	Cluster 1: 3.55%	Cluster 1: 3.20% (145)
	Cluster 2: 3.63%	Cluster 2: 4.38% (51)
	Cluster 3: 3.35%	Cluster 3: 3.01% (11)
	Cluster 4: 1.69%	Cluster 4: 2.30% (5)
	Other locally agreed: 2.50%	Other Locally Agreed: 2.17% (1)

WDES Metrics	MFT 2018-2019	MFT 2019-2020
Metric 2.		
Relative likelihood of non-disabled compared to Disabled staff	1.43 times more likely	1.53 times more likely
being appointed from shortlisting across all posts.		
Note:	(Disabled compared to non-	(Non-disabled compared to Disabled per
i. This refers to both external and internal posts.ii. If your organisation implements a guaranteed	disabled per 2019 technical	2020 technical guidance)
ii. If your organisation implements a guaranteed interview scheme, the data may not be comparable	guidance)	
with organisations that do not operate such a		
scheme. This information will be collected on the		
WDES online reporting form to ensure comparability		
between organisations.		
Metric 3.		
Relative likelihood of Disabled staff compared to non-disabled		
staff entering the formal capability process, as measured by	1.9 times more likely	7.68 times more likely
entry into the formal capability procedure. Note:		
i. This Metric will be based on data from a two-year		
rolling average of the current year and the previous		
year.		
Metric 4. Staff Survey Q13		
	(a) i. Disabled 27%	(a) i. Disabled 28%
a) Percentage of Disabled staff compared to non-disabled staff	Non-Disabled 12%	Non-Disabled 23%
experiencing harassment, bullying or abuse from:	" D'adda 1400/	" B' I I . I 400/
i. Patients/service users, their relatives or other members	ii. Disabled 19%	ii. Disabled 18% Non-Disabled 9%
of the public ii. Managers	Non-Disabled 11%	Non-Disabled 9%
iii. Other colleagues	iii. Disabled 25%	iii. Disabled 25%
iii. Canor concagaco	Non-Disabled 16%	Non-Disabled 15%
b) Percentage of Disabled staff compared to non-disabled staff		
saying that the last time they experienced harassment, bullying	(b) Disabled 45%	(b) Disabled 49%
or abuse at work, they or a colleague reported it.	Non-Disabled 44%	Non-Disabled 46%

WDES Metrics	MFT 2018-2019	MFT 2019-2020
Metric 5. Staff Survey Q14 Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career	Disabled 75%	Disabled 75%
progression or promotion.	Non-Disabled 86%	Non-Disabled 85%
Metric 6. Staff Survey Q11 Percentage of Disabled staff compared to non-disabled staff saying that they have felt pressure from their manager to come	Disabled 57%	Disabled 32%
to work, despite not feeling well enough to perform their duties.	Non-disabled 34%	Non-disabled 21%
Metric 7. Staff Survey Q5 Percentage of Disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their	Disabled 36%	Disabled 41%
organisation values their work.	Non-Disabled 50%	Non-Disabled 52%
Metric 8. Staff Survey Q28b Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work.	69% - yes	70% - yes
Metric 9.		
 a. The staff engagement score for Disabled staff, compared to nondisabled staff and the overall engagement score for the organisation. 	(a) Disabled 6.6 Non-disabled 7.2	(a) Disabled 6.6 Non-disabled 7.2
 b. Has your trust taken action to facilitate the voices of Disabled staff in your organisation to be 	Trust 7.1	Trust 7.1
heard? (Yes) or (No) Note: For your Trust's response to b. If yes, please provide at least one practical example of current action being taken in the relevant section of your WDES annual report.	(b) Yes	(b) Yes-see analysis for information

WDES Metrics	MFT 2018-2019	MFT 2019-2020
Metric 10 Percentage difference between the organisation's Board voting membership and its organisation's overall workforce, disaggregated:	Overall representation: 10.4%	Overall representation: 5.56%
	Difference:	Difference:
 By voting membership of the Board. By Executive membership of the Board. 	 By voting membership of the Board. +3.05% By Executive membership of the Board. -2.84% 	 By voting membership of the Board. 2.59% By Executive membership of the Board. -2.97%

Analysis

Metric 1-Workforce Profile

This metric shows the 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. The data analysis is separate for non-clinical and for clinical staff. The WDES standard requires organisations to 'group' staff into 'clusters.'

The clusters are as follows:

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

Note: Definitions for these categories are based on Electronic Staff Record occupation codes with the exception of medical and dental staff, which are based upon grade codes.

Overall, disabled staff make up 2.97% (707) of the workforce. At present, 25.99% (6,188) of the workforce has not declared their status on disability. The significance of a low declaration rate at is that the data may not be truly reflective of the representation of disabled staff at the Trust. The small size of this data set impacts upon data quality to inform decision making, it is a priority within the WDES plan and the Equality & Diversity Strategy to improve the quality of this data.

The data highlights that disabled staff are slightly more represented in non-clinical roles (3.37) than in clinical roles (2.83) by 0.54%. There has been a slight increase in representation of disabled staff compared to 2018/19 (2.84%), with the exception of non-clinical staff which shows a slight decrease of -0.11% compared to last year.

The calculations for Metric 2 and 3 are also impacted by the low declaration rate of disability at the Trust.

Metric 2- Recruitment

The data shows that non- disabled applicants are 1.53 times more likely to be appointed from shortlisting than disabled applicants. The Trust implements a Guaranteed Interview Scheme (GIS) which means that any disabled candidate who meets the essential criteria will be offered an interview.

Metric 3-Capability

Metric 3 shows the relative likelihood of disabled staff compared to non-disabled staff entering the formal capability process, as measured by entry into the formal capability procedure and is based on capability in relation to performance. This metric is based on data from a two-year rolling average of the current year and the previous year. The data set for this metric is small, 13 cases were recorded for formal capability this year, which explains the seeming large percentage changes over the last year from 1.9 to 7.68. The subset of disability within the data set is too small to provide within information governance. The Trust will continue to review capability cases relating to disability each year to address any variation in experience or outcome.

Metrics 4-8 - Staff Experience

Metrics 4 to 8 look at the experience of disabled staff in the organisation. Of the 35% of Trust staff who completed the national staff survey in 2019, 17% declared themselves as disabled.

Metric 4 is broken down into two sections:

Section a) looks at the percentage of disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from:

- i. Patients / service users, their relatives or other members of the public
- ii. Managers
- iii. Other colleagues

Section b) looks at the 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.

This data is taken from the national staff survey and shows that overall disabled staff are:

- Disabled staff are 5% more likely to experience harassment, bullying or abuse from patients/service users, their relatives or other members of the public than non-disabled staff.
- Harassment, bullying and abuse from patients and the public has increased by 11% for non-disabled staff. This suggests that overall both disabled and non-disabled staff are experiencing more harassment, bullying and abuse form patients and the public when compared to last year.
- Disabled staff are 9% more likely to experience harassment, bullying and abuse from their manager than non-disabled staff. The data suggest that harassment, bullying and abuse from managers has reduced overall for disabled and non-disabled staff, but that disabled staff remain more likely to have this experience.

 Disabled staff are 10% more likely to experience harassment, bullying or abuse from other colleagues than non-disabled staff.

Metric 5 compares the percentage of disabled staff to non-disabled staff who believe that the Trust provides equal opportunities for career progression or promotion. 75% of disabled staff feel that the Trust provides equal opportunities for career progression or promotion compared to 85% for non-disabled staff.

Metric 6 compares the percentage of disabled staff to non-disabled staff who said that they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties. The data shows that 32% of disabled staff have felt pressured to come to work despite not feeling well enough to perform their duties. This is a significant improvement of 25% in the last year from 57%. The gap between the experience of disabled and non-disabled staff has reduced by 12% in the last year though is significant at 11%.

Metric 7 compares the percentage of disabled staff to non-disabled staff who said that they are satisfied with the extent to which their organisation values their work. 41% of disabled staff feel that their work is valued by the Trust, which is 11% less than their non-disabled colleagues.

Metric 8 shows the percentage of disabled staff who said that they feel the Trust has made adequate adjustment(s) to enable them to carry out their work. 70% of disabled staff reported that they felt that adequate reasonable adjustment to enable them to carry out their work had been made.

Metric 9-Engagement

Metric 9 looks at disabled staff engagement (6.6) compared to non-disabled staff (7.2) and the overall engagement score for the organisation (7.1). This metric also asks NHS organisations to outline their engagement with disabled staff.

The data shows that non-disabled staff feel more engaged than disabled staff. The Trust monitors Staff Survey data by disability to understand the experiences of its disabled staff.

Metric 10-Board Representation

Metric 10 compares the percentage difference between the organisation's Board voting membership and the overall workforce. 5.56% of the Trust Board self-reports to be disabled. The difference between the organisation's Board voting membership who have declared themselves as disabled and the overall workforce is 2.59%, which indicates that the Trust Board is representative of the overall workforce. It is important however to consider that 55.56% (10) of the Board have not declared their disability status. When looking at the Executive membership of the Board, rather than the Board overall, 0% of members have declared themselves as disabled, however 54.55% (6) of the Executive membership have not declared their disability status.

Actions promoting workforce disability equality

- a) The Trust is committed to delivering workforce disability equality. Its four-year equality and diversity strategy, 'Diversity Matters 2019-2023', outlines the Trust's ambition, "to be regarded as the best place for patient safety, quality and experience and the best place to work", and its workforce equality aim, " A representative and supported work force".
- b) The Trust's disability equality programme includes:
- c) The Trust is a Disability Confident Employer. As part of this, there is a clear process in place to support disabled applicants through the recruitment process which includes guaranteeing an interview for applicants that meet the minimum requirements for the role and supporting disabled staff in the workplace through reasonable adjustment(s).
- d) Supported internship programmes for local disabled young people. Interns come to the Trust from a variety of backgrounds with a range of disabilities/moderate and severe learning difficulties alongside physical, sensory and mental health needs. The interns are either from local specialist colleges or from NEET (Not in Education, Employment or Training). The programme is a yearlong vocational programme offering various placements throughout the Trust.
- e) COVID-19 risk assessment and guidance included staff with long term health conditions and at risk groups. There have been significant communications across the Trust to promote the take up of risk assessment. In addition, there is a robust Health and Wellbeing offer in place to support staff, for example those who are shielding. The offer includes support guides, daily wellbeing sessions, the 24-hour Employee Assistance Programme and 7 day a week advice and support from the Employee Health and Wellbeing Team.
- f) The Trust is working towards the implementation of a Case Manager system (Empactis) which will provide a more robust approach to recording and monitoring HR cases including capability cases. The case manager system has a provisional launch date of 2021.
- g) 2.97% of staff at the Trust have declared themselves as disabled which is low compared to 17.8% of the Greater Manchester surveyed population. 25.99% (6,188) of the workforce has not declared their status on disability. The Trust will continue to work towards increasing self-reporting through the ESR and through the recruitment and retention processes. The small size of this data set means that the data impacts upon data quality to inform decision making.
- h) Disabled staff are more likely to report through the Staff Survey that they experience harassment, bullying and abuse from patients/service users, their relatives or other members of the public, managers and other colleagues. The Trust's MRI is a hate crime reporting centre and the Trust has policies and procedures in place to make clear expected standards of behaviour and for addressing where those standards fall short.

i) The engagement score for the Trust of 6.6 for disabled staff compared to 7.2 for non-disabled staff indicate the need for increased engagement with disabled staff. The impact of COVID-19 on staff with long term conditions reinforces the need to amplify disabled staff voices and the Trust is establishing a Disability Reference Group initially focused on ensuring the support the Trust has put in place reaches and is right for disabled colleagues.

Monitoring Trust Wide Performance

The Trust will monitor progress of the WDES action plan at the Trust Equality, Diversity and Human Rights Committee. Assurance on delivery of the various strands of work will be through the HR Scrutiny Committee.