

# **NHSBT Workforce Disability Equality Standard (WDES) Report**

January 2023

## **Executive Summary**

This report, based on a snapshot of data from 31st March 2022 highlights current NHSBT practice with regard to the experience of disabled staff and shows key areas for improvement and progress within the organisation.

In order to improve the experience of people with disabilities, we need to encourage more disabled staff to share that they have a long-term condition or disability so that we can appreciate the numbers and track our progress via a number of parameters. Whilst we have increased the amount of disabled staff, we note that there is a higher number of disabled staff in the lower pay bands where there is also a higher amount who choose not to share their disability status.

It is important to continue the improvement seen in the relative likelihood of disabled staff being recruited into the organisation compared to non-disabled. However, engagement survey results for disabled employees show a need for improved opportunities for career development, better experience of feeling valued, greater access to workplace adjustments and amplification of the disability and neurodiversity networks' profile. Disabled staff had low engagement scores compared to other groups, and this spread across 14 of the 15 engagement drivers. Our learning is that they can feel overlooked. Our strategy is to maintain an open dialogue with our disabled staff. Implementation of our plans to respond and act appropriately will be the building blocks to ensure progress is meaningful, staff members feel valued, and this community has increased voice and visibility as we work towards successful workplace inclusion.

## **1. Introduction**

The Workforce Disability Equality Standard (WDES) was launched in 2019 aiming to improve the workplace and career experiences of disabled colleagues in the NHS. All NHS providers complete this annual report.

Overall figures from NHS England show that data from the combined Trusts has seen increased recruitment of disabled staff but the majority of Trusts have five or fewer disabled staff in senior positions. They show an increase in the number of disabled staff reporting they have the adjustments necessary to perform their duties effectively and for these reasons this NHS England resource is a valuable benchmark for NHSBT. Like the combined Trusts' data, NHSBT's data also shows progress over recent years but it shines a light on areas where disparities between disabled and non-disabled staff continue to exist and intends to use this evidence as an opportunity for action.

## **Purpose of report**

This report gives an overview of the Workforce Disability Equality Standard and the ten metrics we report against. It shows and gives a brief analysis of the WDES data against each metric and explores trends internally although there is limited data from last year for comparison purposes against other NHS Trusts. The report shows progress against these standards this year and identifies the key priorities for 2023.

## **Workforce Disability Equality Standard (WDES) Overview**

All NHS providers complete an annual Workforce Disability Equality Standard Report (WDES). The parameters for WDES and this report are commissioned and are overseen by NHS England to promote equality of career opportunities and fairer treatment in the

workplace and are a requirement for NHS organisations through the [NHS Standard Contract](#). The Care Quality Commission (CQC) includes the organisation's performance against these indicators in their inspections under the Well-Led domain.

The purpose of the WDES is to ensure that NHS organisations review their data against the ten indicators which are outlined in the WDES, produce an action plan to close any gaps in the workplace experience between disabled and non-disabled staff, as well as improving the representation of disabled staff at the Board level of the organisation.

The WDES report and associated action plan form a part of the Diversity and Inclusion plan in line with NHSBT Strategy. It is a key component of our Diversity and Inclusion work, setting our direction in terms of achieving good practice disability equality across all areas of the employee lifecycle.

### **Methodology and Data Sources**

Ten specific metrics are calculated from the data which is obtained from two sources:

1. Data for metrics 1, 2, 3, 9b and 10 is taken from NHSBT's people information systems.
2. What disabled staff tell us from the relevant questions in a staff engagement survey for metrics 4, 5, 6, 7, 8 and 9a.

The data included in this report has been obtained from:

- The NHS Electronic Staff Record (ESR)
- Human resources records
- Organisational development records
- NHSBT internal Our Voice survey data from Workday Peakon.

### **Scope**

Based on a snapshot of data from 31 March each year the report highlights current practice and shows key areas for improvement and progress within the organisation against key indicators of workforce equality for staff with a disability. It enables benchmarking across similar NHS providers and evidence how we are meeting our duties as set out in the Public Sector Equality Duty and to the standards required in the Department of Work & Pensions Level 2 Disability Confident scheme.

In line with national requirements this report should be reviewed internally and approved at Board before being published on the organisation's website.

### **Context**

The WDES has 10 measures for NHS organisations to compare the workplace and career experiences of disabled and non-disabled staff to enable better understanding of the experiences of disabled staff and support positive change by creating a more inclusive environment. We use the data to develop and publish an action plan which together with year-on-year comparison will enable us to demonstrate progress against the indicators of disability equality.

For reference, it is estimated that over seven million people, 18% of the working age population in Britain are disabled as defined by the Equality Act 2010, and the working-age population in the UK has increased by 0.78 million over the last eight years, to reach 41.3 million in 2020-2021.

## Definitions

The 2022 WDES technical guidance acknowledges that one of the challenges in monitoring workforce disability within the NHS is that the definitions of disability used within the NHS Electronic Staff Record (ESR), NHS Staff Survey and NHS Jobs are not the same. These definitions also vary when compared to the legal definition of disability, as set out in the Equality Act 2010. Work is ongoing to align definitions of disability with the Equality Act's definition, as well as set up cross-system, agreed disability questions.

The social model of disability, and the concept of 'Disability as an Asset', which are advocated by disabled people and disability rights organisations, underpin the WDES.

## Data-led improvements

This WDES report is structured in two parts.

The first half focuses on NHSBT's WDES data for 2022 to NHSBT's WDES data for 2021. It enables Board to understand current performance - where we have made improvements, where more progress is needed to achieve quality improvements in the working lives of disabled colleagues.

The second half focuses on reporting actions taken in 2021-22 in pursuit of NHSBT's WDES data-led action plan to increase the representation of disabled people in our workforce and to support the inclusion of more disabled staff employed. The action plan for 2022-23 sets out actions to be taken to achieve improvements to the process of inclusive recruitment, retention, and the provision of reasonable adjustments in a timely and accessible way.

## 2. Key Findings Table

<p><b>+2.7%</b> Metric 1 On 31 March 2022, <b>5.04%</b> (284) of staff working in NHSBT had shared on ESR that they had a disability. This is an increase of <b>2.7%</b> since 2021.</p>	<p><b>x1.36</b> Metric 2 Non-disabled applicants were <b>1.36</b> times more likely to be appointed from shortlisting compared to disabled applicants. This is better than 2021 when the figure was <b>1.66</b> times more likely.</p>	<p><b>x1.0</b> Metric 3 The relative likelihood of a disabled person being in a formal capability proceeding is no more than non-disabled staff. There was one disabled and one non-disabled staff member involved in this process. There were 5 people whose disability status was unspecified on ESR.</p>	<p><b>18%</b> Metric 4ai <b>18%</b> disabled staff reported experience of harassment, bullying or abuse from patients, donors, relatives or the public in the last 12 months. This compares to <b>13%</b> of non-disabled staff.</p>	<p><b>37%</b> Metric 5 <b>37%</b> disabled staff believe that NHSBT provides equal opportunity for career progression and promotion. This compares to <b>45%</b> of non-disabled staff.</p>
<p><b>14%</b> Metric 6 <b>14%</b> disabled staff felt under pressure to come to work despite not feeling well enough to perform their duties. This is compared to <b>11%</b> of non-disabled staff.</p>	<p><b>27%</b> Metric 7 <b>27%</b> disabled staff were satisfied with the extent to which the organisation values their work, whilst <b>33%</b> for non-disabled staff (taking only 'promoter' survey responses). The joint promoter plus passive response was 59%</p>	<p><b>41%</b> Metric 8 <b>41%</b> disabled staff believe NHSBT provides adequate adjustments to enable them to carry out their work if they need them.</p>	<p><b>7.1</b> Metric 9 <b>7.1</b> out of 10 is the engagement score for disabled staff compared to <b>7.5</b> for non-disabled staff.</p>	<p><b>0</b> Metric 10 None of the 11 voting board members report having a disability in ESR. There are 8 (72.7%) board members whose disability status is unknown.</p>

Data of WDES findings by metric and by previous years' data

WDES Indicator		NHSBT			NHS National	
		2020	2021	2022	2021	
1.	Percent of Disabled staff	Overall	2.3%	3.33%	5.04%	3.7%
		VSM	No data	11.1%	7.1%	3.7%
2.	Relative likelihood of disabled applicants being appointed from shortlisting across all posts compared to non-disabled applicants (A figure below 1.00 indicates Disabled staff are more likely than non-disabled staff to be appointed from shortlisting.)		1.27	1.66	1.36	1.11
3.	Relative likelihood of disabled staff entering the formal capability process compared to non-disabled staff. (A figure above 1.00 indicates Disabled staff are more likely than non-disabled staff to enter the formal capability process)		No data	0	1.00 (this means no discrimination)	1.94
4.a	Percent of staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months	Disabled	No data	No data	18%	28.9%
		Non-disabled			13%	25.9%
4.b	Percent of staff experiencing harassment, bullying or abuse from staff in the last 12 months	Disabled			15%	28.8%
		Non-disabled			13%	23.2%
5.	Percent of staff believing NHSBT provides equal opportunities for career progression or promotion ("I see a path." in Our Survey <i>Growth</i> theme)	Disabled			37%	78.4%
		Non-disabled			45%	85%
6	I feel valued and included for the work that I do	Disabled			27%	39.4%
		Non-disabled			33%	50.7%
7	Percent of staff personally experiencing discrimination at work from a manager / team leader / colleague	Disabled			15%	16.7%
		Non-disabled			7%	6.2%
8	I felt pressured to come to work by my manager even if I am not feeling well enough to perform my duties	Disabled			14%	31.1%
		Non-disabled			11%	22.9%
9	Percent of staff saying their employer has made enough adjustments to enable them to carry out their work	Disabled			41%	76.6%
		Non-disabled			37%	not collected
10	Percent of Disabled voting board membership	-	No data	0%	0.0%	4.7%

## Analysis of Findings

### Metric 1 Workforce Numbers and Declaration

- There has been a year-on-year **increase in the number of disabled staff declaring that they have a disability** which is now 284. This is 5% of the 16.37% of all NHSBT staff who have updated their ESR records to state whether they have a disability or not.
- The representation of **disabled staff within the medical workforce is 4.08%**.
- The **percentage of all staff that have chosen *not* to share their disability status is 83.63%** which is high in relation to other NHS providers. NHSBT has set itself the aim of getting response rates to the disability declaration up to 73%. **Higher numbers of disabled staff are in lower pay bands.**

In terms of disabled staff numbers by category of disability, the table below shows the different **sub-sections of declared disability at NHSBT**.

<b>Disability category</b>	<b>Yes - Unspecified</b>	<b>Long-standing illness</b>	<b>Mental Health</b>	<b>Sensory</b>	<b>Learning difficulty</b>	<b>Other</b>	<b>Physical Health</b>
<b>Yes</b>	124	64	37	28	24	16	15

### Metric 2 Recruitment Relative likelihood of non-disabled staff being appointed from shortlisting compared to disabled staff

- Disabled staff are less likely to be appointed from shortlisting however there is a **decrease in the likelihood of non-disabled staff to be appointed from shortlisting compared with disabled staff**; it stands at **1.36** which is down from **1.66** last year, but if the figure had been below 1.00 then disabled staff would be more likely to be appointed from shortlisting.

### Metric 3 Employee relations processes

- The **relative likelihood of a disabled person entering formal capability proceedings is no different to that of a non-disabled staff member**. This means we have no disparity in this metric. A figure above 1.00 would have indicated that disabled staff are more likely than non-disabled staff to enter a formal capability process.

### Metric 4 Harassment, Bullying and Abuse (reported from Our Voice Survey)

- 18% of disabled staff reported harassment, bullying or abuse from donors, patients, relatives or the public in the last 12 months compared with 13% of non-disabled staff.
- 15% of disabled staff reported experiencing more harassment and bullying from managers and colleagues than non-disabled staff 13%.
- Of those making a formal report the last time they experienced harassment or bullying 13% were disabled staff compared with 9% non-disabled staff.

### Metric 5 Beliefs about equal opportunities, career progression and promotion

- **37% of disabled staff believe NHSBT provides equal opportunities for career progression** and promotion. This is compared with a greater amount (45%) of non-disabled staff who believe they have access to equal opportunities.

### Metric 6 Feeling pressure to go to work when unwell

- A **higher number of disabled staff (14%) compared to non-disabled staff (11%) report feeling pressure to come into work** despite not feeling well enough to carry out duties.

#### Metric 7 Disabled staff say they are satisfied with how their organisation values their work

• **Disabled staff are less likely to feel that their work is valued by the organisation.** 27% of disabled staff who responded to the Our Voice Survey were satisfied with the extent to which the organisation valued their work. This compared with 33% of non-disabled staff.

#### Metric 8 Adjustments in the workplace

• **41% of disabled staff believe NHSBT provides them with adequate reasonable adjustments to enable them to carry out their work** if they need them. This corresponds with the DAWN staff network's survey on reasonable adjustments which found considerable disquiet about the process and how well it meets the needs of disabled staff. This will be discussed later.

#### Metric 9 Engagement

• **The engagement score for disabled staff at NHSBT is 7.1 out of 10.** This is compared to 7.5 for non-disabled staff.

#### Metric 10 Board representation

• There are **no voting Board members who declared themselves to have a disability.**  
• None of the eleven voting board members report having stated that they have a disability. **There are eight board members whose disability status is unknown (72.7%).**

### **3. WDES Progress in 2021-22**

Since its last report, the organisation has taken several steps to support those members of our workforce with a disability, and to improve staff voice and disability data.

#### Staff Networks

NHSBT has a thriving network of employees interested in providing support to staff with disabilities and health conditions to ensure their wellbeing. Launched last year by a growing group of **Disability and Wellbeing Champions** the **Disability and Wellbeing Network (DAWN)** provides an opportunity for the organisation to listen to the voices of disabled staff and those with health conditions about their experiences at work, how we can improve them, and the experience of employees who are carers. Meetings are held monthly for members who commit to providing events and activities to highlight specific awareness days for example World Arthritis Day and Alzheimer's Day, members offer peer support and organised their first AGM and conference.

The **Accessibility sub-group** is reviewing IT and environmental accessibility with an internal technology workforce group making improvements to the internal software systems and NHSBT intranet. The network undertook a survey of all employees to hear their experience of the take-up of reasonable adjustments which developed into a policy and priorities for change.

A **Neuro-Diversity Network** commenced with preparations for a specific employability toolkit and the posting of podcasts highlighting the experience of those on the autistic spectrum. This is also the forum for discussing this report's findings which the ninth (of ten) WDES metrics refers to.

## Reasonable Adjustments

At the end of 2021 the DAWN network surveyed employees about their experience of obtaining reasonable adjustments. A June 2020 employee engagement survey had showed low levels of engagement by disabled staff and anecdotal evidence coming into the newly formed DAWN network identified one issue as being the inability to obtain adjustments for disabilities. The survey was open for 11 weeks and had 249 respondents. In February 2022 the responses were analysed, and a report prepared for discussion. In March 2022 the detailed survey results with themes drawn out and directorate breakdown were shared with employees, staff side, senior leaders, and at the CEO-led EDI Council on 13 April.

Overall, 25% of colleagues who said adjustments would be helpful to them had *not* discussed this with their manager. Only 50% of respondents who required and requested reasonable adjustments had their adjustments fully implemented. Staff described a lack of understanding and a lack of empathy from line managers as their top challenge. Furthermore, it was noted that too few people understood what the NHSBT reasonable adjustments policy was, or how to access it.

The new D&I team has made improving the reasonable adjustments policy, practice, and performance a key priority. A new Reasonable Adjustments Policy was drafted by the D&I team policy officers and was consulted on with our disabled staff, the DAWN network, staff side unions, and the People Directorate. The revised policy is now awaiting final approval at the Policy sub-group, in preparation for adoption by the Staff Partnerships Committee.

In addition to considering the new Reasonable Adjustments policy, the Policy sub-group is also reviewing the (disability) Attendance Policy.

## Menopause policy

In October 2022 NHSBT's new Menopause Policy came into effect. It was developed by a project manager and team of Menopause Champions in association with our DAWN Network and the Women's Network. The new policy takes account of the specific needs which individuals can face when going through the menopause. This policy provides much needed support for staff, as well as clarity for managers, particularly around reasonable adjustments. Although the menopause is not a disability or long-term health condition, per se, it does impact the health and well-being of women staff across the organisation and can have additional implications for those already living with a disability or long-term health condition.

## Policy development and review

The governance around NHSBT's Policy sub-group, which reports to the Staff Partnerships Committee, has been revised to include the D&I team's expertise in inclusive policy making. The D&I team is supporting plans to create an annual schedule that details which People policies need to be reviewed in year. Relevant directors will be notified which policies their teams are expected to work on, and the D&I team will ensure the staff networks get consulted in the policy process.

The D&I team has also presented the Policy sub-group with a simplified model to undertake and embed Equality Impact Assessments in the policy making process. The D&I team have developed a training pack for policy officers to undertake EIAs effectively. These interventions – if agreed and adopted by the People Directorate – will help ensure the EIA review process takes full account of NHSBT's responsibilities to groups with protected characteristics under the Equality Act.

## Increasing disability data

We are working on building robust ESR equality and diversity data especially for the characteristic of disability data with site-wide campaign to encourage employees to self-identify their personal characteristics. A campaign is launching in 2022 entitled 'Count Me In' to encourage employees to share their personal demographic information on ESR.

The number of staff sharing that they have a disability on the electronic staff record has shown a slight increase and a refresh of the digital factsheet [Changing equality and diversity details](#) will better explain the reasons behind how and what to select, the definitions and benefits of selecting the disability category, even if it is to report no current experience.

### NHSBT employee engagement survey

One in-house engagement surveys ran over the course of 3 months from January to March 2022. The Our Voice staff survey was based on the independent Workday Peakon package (in place of the NHS staff survey) and 54 questions were asked. The results were shared with all employees from April 2022 onwards. It was very stark that Disabled staff had the lowest engagement scores across 14 of the 15 drivers (see table below).

In response to these findings, the Executive Team identified the top three themes of the Our Voice survey that will be a focus at the national level are: i) bullying and harassment (14% of staff face this at some point in past year and always in higher numbers for disabled staff), ii) engagement of colleagues with a disability, and iii) reward.

Segment	Engagement	Accomplishment	Autonomy	Environment	Freedom of Opinions	Goal setting	Growth	Management Support	Meaningful Work	Organisational Fit	Peer Relationships	Recognition	Reward	Strategy	Workload
<b>NHSBT</b>	7.5	7	6.6	6.7	7.3	8.4	6.4	7.8	7.9	7	8	6.8	5.9	7	6.8
<b>Disabled</b>	7.1	6.7	6.7	6.5	7	8.2	6	7.4	7.7	6.5	7.8	6.3	5.5	6.8	6.5
<b>Non-disabled</b>	7.5	7	6.6	6.7	7.3	8.4	6.5	7.8	8	7.1	8	6.8	6	7	6.8

### Workforce Recruitment

The Talent Acquisition and Recruitment team in People Directorate have introduced an applicant tracking system which it is hoped will provide more data relating to diversity, in addition to the WDES data that NHSBT systems already collect. The eRecruitment system (Job Train) provides applicants with Recite accessibility tools (see below) and is compatible with screen readers:



The revised online Recruitment and Selection Training consists of 4 modules including one on diversity and inclusion. From September 2022 it has become compulsory to have undertaken this training to be involved in any aspect of recruitment. Hiring managers are invited to advertise roles on the NHS Jobs board which is free to use and accessible for people with disabilities. Recruitment materials (job descriptions) are converted into 2-page recruitment profiles for easy reading and will include NHSBT's values and behaviours. The services of 'Role Mapper' have been used to identify and remove items that could deter some candidates from applying like non-inclusive language and unnecessary or lengthy criteria. Hiring managers are also encouraged to think about needs that people with disabilities might have on the day of interview.

## Disability Confident Employer

NHSBT's Disability Confident Employer status enables those with a disability, who meet the minimum criteria for a role, to be interviewed. All invitations to interview include a reference to adjustments, and who the applicant should contact for this. Arrangements that have been made have included extra time for ability tests, sign language interpreter, review of interview questions / sending to candidates in advance, changing venue for access.

## Disability History Month

Disability History Month runs from mid-November to mid-December. It provides a platform to run awareness events focussed on eliminating barriers in our working lives that affect our productivity and performance, encouraging staff to share their disability status, have open conversations with their managers and encourage leaders and to support staff through compassion and inclusivity.

During this month-long celebration, our WDES priorities highlighted the need to plan activities for our staff around inclusive recruitment; reducing experiences of harassment and bullying; creating fair career progression; improving the content and quality of health and wellbeing services to disabled people; enabling reasonable adjustments and improving employee engagement and voice by strengthening our staff networks.

As well as promoting library books, posting 'experience blogs' on the intranet, podcasts on Yammer, NHSBT's D&I have hosted celebrations that include highlighting World AIDS Day, Purple Light Up Day and International Day of Persons with Disabilities. NHSBT has undertaken a pilot in supported internships, with a focus on hidden disabilities to include neurodiverse conditions. Other activity connected to our WDES data has been socialising the use of the social model of disability; promoting disability history, and inclusive language.

## Supported internships

Project Search is a supported internship for young adults with an Education, Health and Care Plan for learning disability or autism. The initiative was launched at Filton in September 2022 in collaboration with Bristol Community College. Eight young people have enrolled with the college for long-term work experience in NHSBT workplaces. The aim is to improve job skills and work-readiness leading to employment in NHSBT or with local employers. Other Project Search programmes in the UK have seen benefits to the organisation from increased disability awareness; an improved and enriched culture in the organisation, and successful engagement into the local community.

## Training

We are working on a new learning and development approach with diversity at its centre including disability awareness, as well as positively encouraging the uptake of development opportunities by under-represented communities such as disabled staff.

Since March 2021, our upgraded Learning Management System has enabled D&I education on the platform by sharing content with our networks. This has increased the quantity of educational resources from Skill-boosters on Stream which has Disability Awareness training for whenever staff wish to view. Connection is also available to the national hub which provides access to content such as the Disability Matters programme.

## Fulfilment of strategy

Other areas of the People strategy that provide support to disabled colleagues include:

- Building a refreshed set of behaviours and interactive code of conduct into our performance framework and supporting leaders and managers to role model these.
- Taking action to resolve conflict and tackle inappropriate behaviour and employee concerns.
- Working in partnership with staff side, staff networks, and heads of centres to develop policy and plans.

The absence of a full D&I team during key periods of the past year hampered the progress that was anticipated in our 2021-22 WDES action plan. Looking ahead to 2022-23's WDES action plan, the ambition is to secure key wins. These can be summarised in five areas:

1. Seek robust approach to get disability-inclusive training resources and guidance to managers
2. Review core line management processes and documents that affect disabled staff to design out any risk of unnecessary pressure being applied to disabled colleagues.
3. Extend engagement efforts and use the partnership working to build trust and improve declaration rates amongst disabled staff. A '*Count Me In*' campaign to encourage employees to share their personal demographic data on ESR is set to run during Disability History Month.
4. Raise awareness of different disabilities among our staff and understanding of how disability impacts staff affected by, or living with, a disability.
5. Set clear performance metrics on reasonable adjustments plans to ensure support available to staff, that managers are trained in new policy, and we begin to earn back trust of our disabled staff

#### **4. Conclusion**

This report shows some progress on last year. It highlights interventions that are making an impact and there have been real improvements within the organisation against key indicators of workforce equality for disabled staff. While there is an increase in staff sharing if they have a disability, 83.63% have not answered either way, and there is under-representation at Board level, among medical staff, and at the lower pay bands. Disabled applicants are less likely to be appointed from shortlisting, are more likely to report experiencing harassment or bullying whether from the public or from fellow staff or managers. Fewer disabled staff believe that NHSBT provides them with equal opportunities for career progression and promotion when compared with non-disabled staff.

A higher number of disabled staff report feeling pressure to come into work despite not feeling well enough to carry out their duties. Disabled staff are less likely to feel their work is valued by NHSBT and are significantly less likely to be able to access reasonable adjustments they want.

To ensure NHSBT better understands and equips itself to tackle workplace inequalities that are experienced by our disabled staff, we engage with stakeholders to examine policies, training, and review provisions that affect them. We also ensure that we work in collaboration with our disabled staff to ensure we're fully meeting the requirements of the Disability Confident Scheme.

Analysis of our WDES metrics shows that for disabled staff to thrive at NHSBT we need to recognise them as a community that empowers and enriches our workforce. Evidence from the **Our Voice survey** shows they can feel overlooked. Maintaining an open dialogue with our disabled staff, responding and acting appropriately are the building blocks to ensure progress is meaningful, and staff members feel valued and this community has increased voice and visibility as we work towards workplace equality and inclusion.

**Appendix A** has an action plan which details key objectives and actions, with timescales and those responsible.

**Appendix B** has Metrics 1 to 10 presented as graphs and infographics

**Appendix C** Data presented in the format required by NHS England

### **Next Steps**

The data provided in this report will be published along with the 2022-2023 Workforce Disability Equality Action Plan. This has been reviewed and updated in collaboration with the Disability and Wellbeing Staff Network and People Directorate.

### **Recommendations**

The Board, EDI Council, and D&I Programme Board are asked to review the information and approve the action plan in Appendix A which will be reviewed and updated as appropriate following bi-monthly staff network meetings, results of the next Staff Survey and a repeat of the Reasonable Adjustments survey are published.

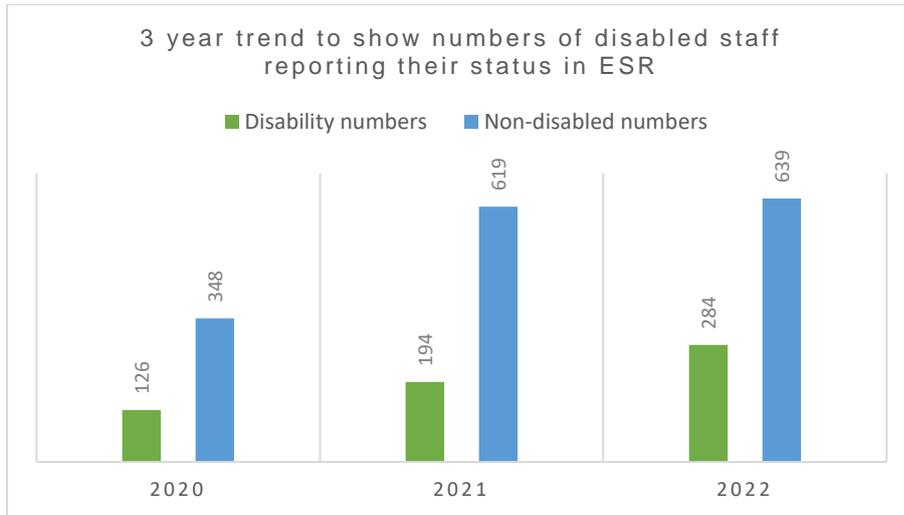
## Appendix A Action Plan

Links to: -	Objective	Action	Responsible	Time scale
<b>Metric 1 – Workforce numbers</b> percent of staff who record having a disability or not. 5% with disability, 11.3% without	Improve numbers of staff sharing disability status to 27% on ESR	Launch 'Count Me In' campaign, with webinars, and a guide to update ESR information	D&I Team	Jan 2023
<b>Metric 2 – Recruitment.</b> Relative likelihood of non-disabled staff being appointed from shortlisting x1.36	Attract and boost applicants from candidates with disabilities.	Develop and implement an inclusive recruitment process and talent attraction strategy. Monitor panel member training compliance	Recruitment	2023
<b>Metric 3 – Capability process.</b> Relative likelihood of disabled staff entering formal capability process x1	Maintain even balance of staff entering formal capability process	Undertake a deep dive into capability cases and process. Ensure we understand whether the process is fair and action we need to take	D&I Team and HR Ops	On-going
<b>Metric 4 – Harassment and bullying.</b> 18% of disabled staff reported harassment or bullying from donors, patients or public last year (13% among non-disabled staff). 15% harassment or bullying from managers or colleagues (13% for non-disabled staff)	Reduce number of staff being bullied, harassed or abused by managers, colleagues, public or patients	Develop and launch new L&D approach to disability awareness training.	Leadership Performance Culture team / D&I Team	2023
		Promote the use Freedom to Speak Up Guardian and champions	Freedom to Speak Up Guardian	Ongoing
		Proactive promotion of campaign about zero tolerance of abuse and harassment of staff in public spaces	Heads of Centre / Internal Comms	March 2023
<b>Metric 5 - Equal opportunities.</b> 37% of disabled staff say NHSBT has equal opportunity to progress career	Improve disabled peoples' access to learning and development progression, and promotion for all	Embed D&I career conversations module across all directorates	D&I team	September 2023
<b>Metric 6 - Presenteeism.</b> More disabled staff felt pressured to be at work despite not feeling well enough to perform duties	Reduce staff experiencing pressure to come to work when ill	Line manager conversations about NHSBT's HWB offer and wellbeing coupled with training on Attendance policy and Annual Leave policy Training on Attendance policy and Reasonable Adjustments policy	AD Wellbeing and Governance  D&I Team	Throughout 23/24

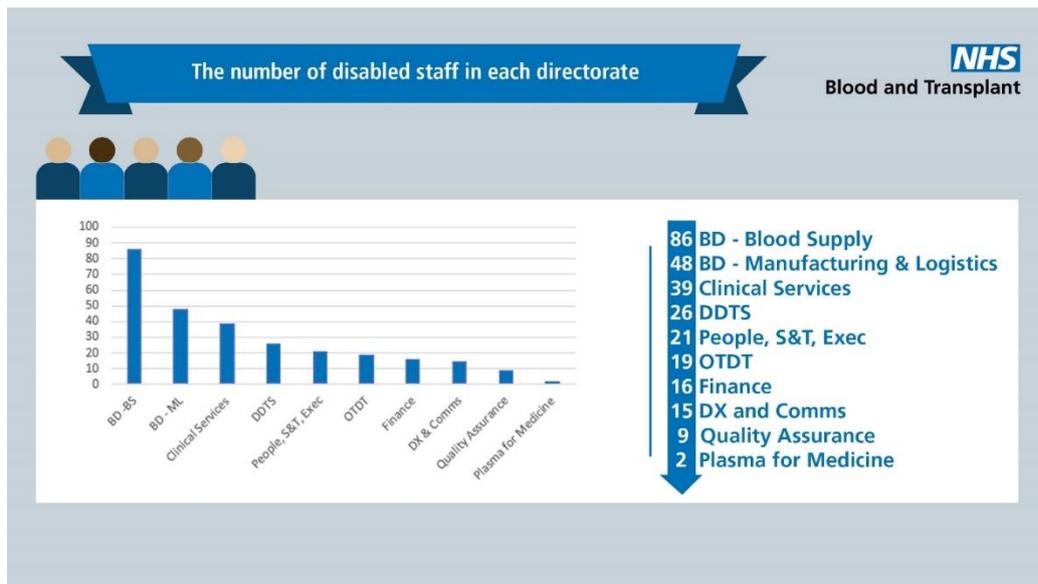
<b>Metric 7 - Valued.</b> 27% of disabled staff satisfied with extent to which NHSBT values their work	Improve experience of disabled staff to feel valued	Following the implementation of this plan ensure we monitor the satisfaction levels of disabled staff via the our voice survey	Leadership Performance Culture team / D&I Team	April 2023
<b>Metric 7 Valued</b>	Maintain status of Disability Confident Scheme (Level 2)	Review that we are fully meeting the requirements of the Disability Confident Scheme (Level 2). Keep up the standards required to remain at Level 2 and address any gaps.	Health and Wellbeing Team  D&I team	Sept 2023
<b>Metric 8 - Reasonable adjustments.</b> 41% of disabled staff believe NHSBT provides adequate adjustments to enable them to carry out their work if they need them	Increase the number of staff acquiring workplace adjustments if they need them	Reasonable adjustments policy in place and trained out.  Digitalise adjustments metrics by capturing in ServiceNow	Health and Wellbeing Team and D&I Team  D&I Team	Q1 2023/24
<b>Metric 8 Reasonable adjustments</b> continued	Increase staff experiencing easier access to internal information	Internal webpages and communications to meet best practice accessibility standards.	Internal Comm  D&I Team	March 2023
<b>Metric 9 - Engagement.</b> 7.1 out of 10 engagement score for disabled staff compared to 7.5 for non-disabled staff	Improve colleague engagement and feelings of inclusion	Develop communication plan to amplify profile of DAWN and Neuro-diversity networks and D&I's disability awareness initiatives	PCPs  Internal Comms  D&I Team	June 2023
<b>Metric 10 - Board representation.</b> None of 11 voting board members report having disability in ESR. 8 (72.7%) board members have disability unknown status	Every Board member to set the example and update their disability status	Ensure we have all board members D&I characteristics are captured in ESR	Company Secretary	March 2023

**Appendix B Metrics 1 to 10 presented as graphs and infographics**

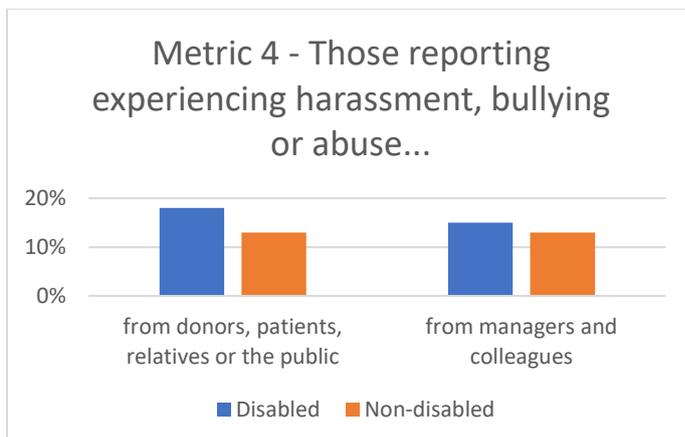
Metric 1 Bar chart to show increase in numbers of disabled staff each year.



Metric 1 Infographic to show numbers of disabled staff by Directorate



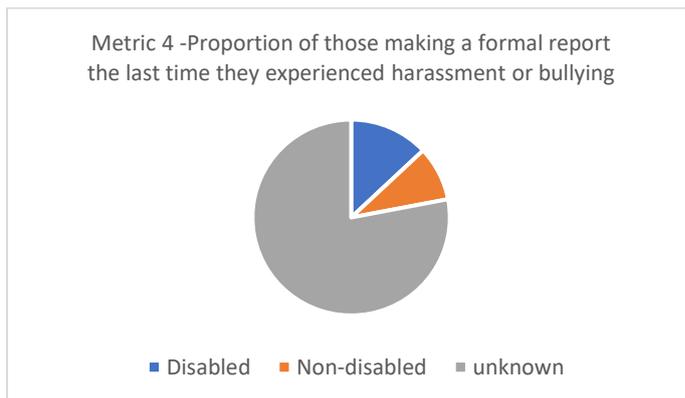
Metric 4 Bar chart to show numbers of disabled staff reporting harassment bullying or abuse



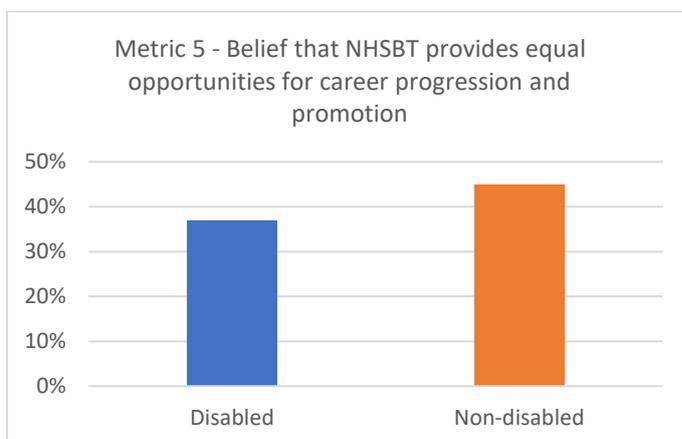
Metric 4 Infographic to show numbers of disabled staff reporting harassment bullying or abuse



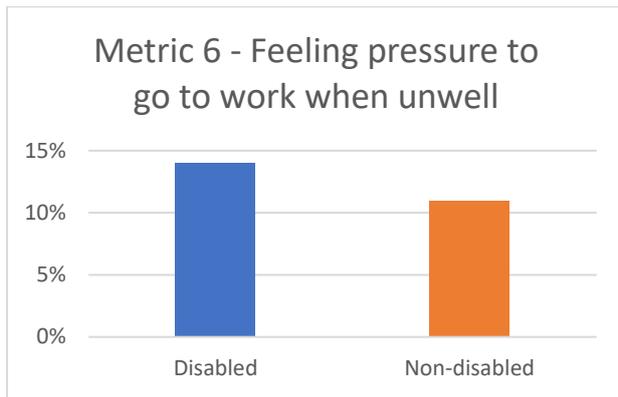
Metric 4 Pie chart to show numbers of disabled staff experiencing harassment bullying or abuse and reporting it



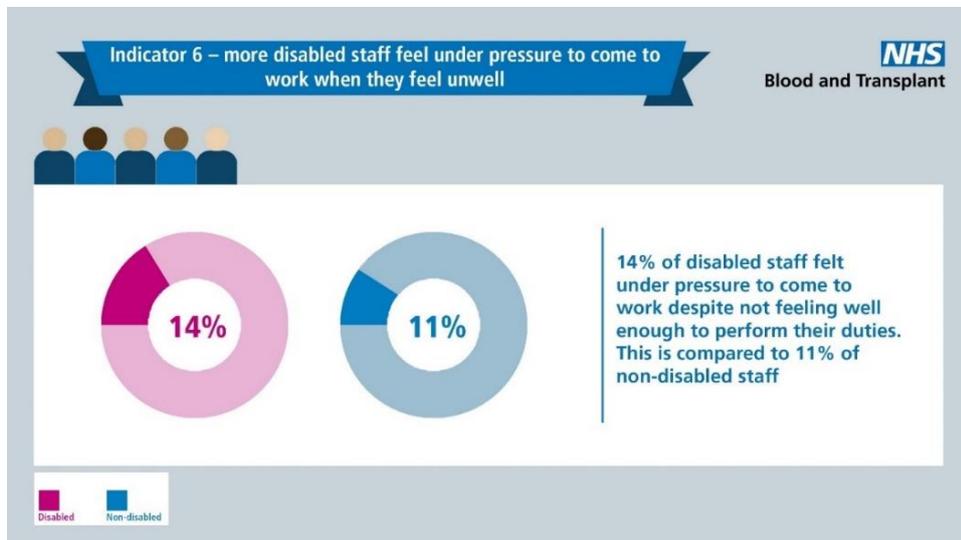
Metric 5 Bar chart to show numbers of disabled staff believing they have equal opportunities for career progression and promotion



Metric 6 Bar chart to show numbers of disabled staff feeling the pressure to go to work when unwell



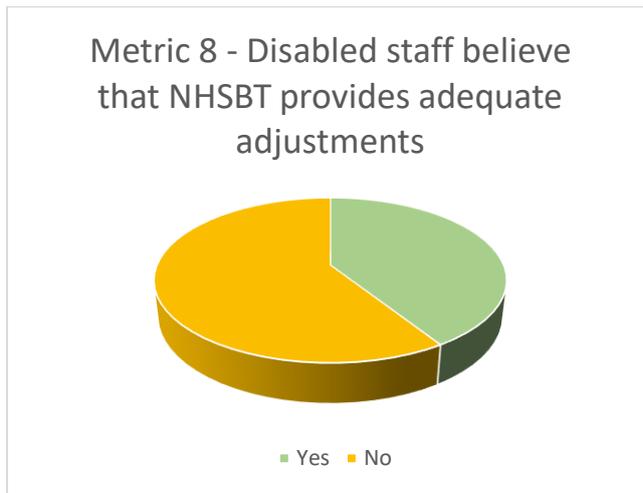
Metric 6 Infographic to show numbers of disabled staff feeling the pressure to go to work when unwell



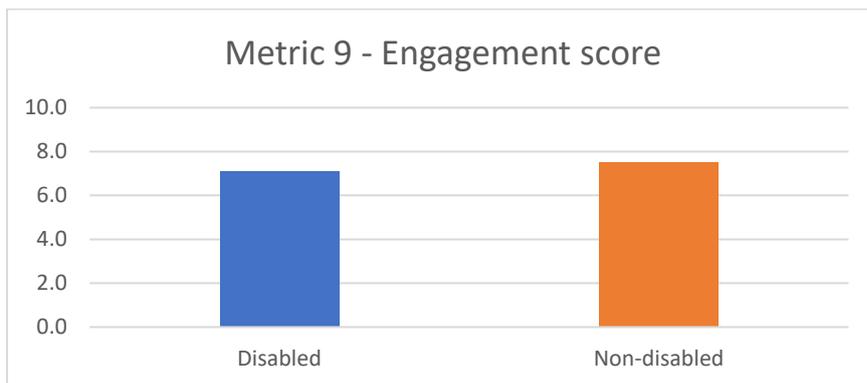
Metric 7 Infographic to show numbers of disabled staff feeling satisfied that the organisation values their work



Metric 8 Pie chart to show numbers of disabled staff believing the organisation provides them with adequate reasonable adjustments



Metric 9 Bar chart to show numbers of disabled and non-disabled staff's engagement score



Appendix C Data presented in the format required by NHS England

Metric		NHSBT # and / or % disabled	All NHS data disabled	NHSBT # and / or % non disabled	All NHS data non-disabled	NHSBT # or % unknown	NHSBT Total
1	Number of disabled staff in workforce	(284) 5.04%	3.7%	(639) 11.33%		(4717) 83.63	(5640)
2	Number of shortlisted applicants Apr 21-Mar 22	471		6244		201	6916
	Number of hires appointed from shortlisting Apr 21 - Mar 22 (NHSBT relative likelihood in Total column)	78	RL 1.11	1405		30	1.36
3	Average number of staff entering formal capability process over last 2 years	0.5 Relative Likelihood (RL)	RL 1.94	0.5		2.5	3.5
4b	Disabled staff who faced harassment, bullying or abuse at work & reported	13%		9%			
4ai	Disabled staff who faced harassment, bullying or abuse at work from public	18%	31.9%	13%	25.5%		
4aii, iii	Disabled staff who faced harassment, bullying or abuse at work from manager] or colleagues	15%	25.6%	13%	16.7%		
5	Staff believe NHSBT provides equal opportunity for career progression or promotion	37%	78.4%	45%	85%		
6	Staff say they have felt pressure from manager to come to work, despite not feeling well enough to perform their duties	14%	31.1%	11%	22.9%		
7	Staff say they are satisfied by extent to which NHSBT values their work	27%	39.4%	33%	50.7%		
8	Disabled staff say NHSBT made adequate adjustment(s) to enable them to do their work	41%	76.6%	37%			
9a	Staff engagement score of disabled staff compared to non-disabled staff and the overall engagement score for organisation	7.1	6.68	7.5	7.15		7.5 NHSBT overall

10	Percent difference in (reported) disabled status between Board (voting members) and overall workforce, disaggregated <ul style="list-style-type: none"> <li>• By voting members</li> <li>• By Exec members at <b>31.3.22</b></li> </ul>						
	Total Board members	6.25%	3.7%	25%	72.5%	88.75	
	- of which voting board members	0%	3.6%	27.27%	72.3%	72.73	
	- of which non-voting board members	20%	3.9%	20%	73.5%	60%	
	- of which exec members	11.11%	3.8%	33.33%	75.6%	55.56	
	- of which non-exec members	0%	3.6%	14.29%	69.6%	85.71	
	Difference total board to overall workforce	1%		14%		-15%	
	Difference between voting members / total workforce	-5%		16%		-11%	
	Difference between exec members / total workforce	6%		22%		-28%	