

University Hospitals Birmingham

Workforce Disability Equality Standard 2019

Indicator 1:

The percentage of staff in AfC pay bands or medical and dental subgroups and very senior managers (excluding Executive Board Members) compared with the percentage of staff in the overall workforce. The data for this metric should be a snapshot as at 31 March 2019.

<u>Cluster AfC Bands</u>	<u>% of staff with a disability</u>
Cluster 1 (Bands 1 - 4)	3%
Cluster 2 (Band 5 - 7)	3%
Cluster 3 (Bands 8a - 8b)	1%
Cluster 4 (Bands 8c - 9 & VSM)	1%
Cluster 5 (Medical & Dental Staff, Consultants)	1%
Cluster 6 (Medical & Dental Staff, Non-Consultants career grade)	1%
Cluster 7 (Medical & Dental Staff, Medical and dental trainee grades)	1%

Non Clinical Staff	Staff with a disability
Bands 1	4%
Bands 2	3%
Bands 3	4%
Bands 4	3%
Bands 5	3%
Bands 6	4%
Bands 7	2%

Bands 8a	1%
Bands 8b	2%
Bands 8c	0%
Bands 8d	0%
Bands 9	0%
VSM	0%
Other	8%

Clinical Staff	Staff with a disability
Bands 1	21%
Bands 2	2%
Bands 3	4%
Bands 4	2%
Bands 5	2%
Bands 6	3%
Bands 7	3%
Bands 8a	1%
Bands 8b	2%
Bands 8c	0%
Bands 8d	5%
Bands 9	0%
VSM	0%
Medical & Dental Staff, Consultants	1%
Medical & Dental Staff, Non-Consultants career grade	1%
Medical & Dental Staff, Medical and dental trainee grades	1%
Other	0%

Data produced by NHS Employers states that 9.15% of the Birmingham and Solihull Local Authority declared they had a disability. As at 31 March 2019, information taken from UHB's Electronic Staff Records (ESR) shows that 2.6% of staff (539 employees) has stated that they have a disability. However, there remains a high percentage of staff 19.9% (4095 employees) where disability status is unknown or not declared.

Information from the 2018 National Staff Survey for UHB shows that 1051 staff (16.5% of respondents) indicated that they have a disability, suggesting that more staff have a disability than

we have recorded on ESR, and also suggests staff are more likely to declare to have a disability via an anonymous source.

In 2017, prior to the merger, Heartlands Hospital, Good Hope Hospital and Solihull Hospital undertook a data cleanse exercise to address the high percentage of staff where disability status is unknown and to improve the overall quality of the data which is recorded on ESR. As a result of the success of the data cleanse exercise there was a reduction in the number of staff records which said 'not declared' for disability from 23.4% in 2015 to 17.3% in 2017. There are plans to repeat this exercise in 2020 for the merged Trust.

Analysis of data taken from ESR allows the Trust to understand better the percentage of staff recorded as having a disability by band. The snapshot of data taken as at 31 March 2019 is consistent with the data from previous years, with disabled employees least represented within the medical grades, with only 7 Consultants declaring a disability. The same is true for senior managers from band 8a and above with only 7 non-clinical bands 8a and above and 8 clinical band 8a above employees declaring they have a disability.

For clinical band 8c, band 9 and VSM there are no known staff to have declared a disability, and the same is true for non-clinical, band 8c, band 8d, band 9 and VSM has no known staff who have declared a disability. It is worth noting that where it states 5% of staff at clinical band 8d have a disability this is actually one person. Likewise, for clinical band 8a there is one person who has declared a disability and for non-clinical 8b there are only 2 members of staff.

Further analysis of the data has been carried out to identify which staff groups have gaps in the data in relation to disability. The data shows there appears to be trends between certain staff groups where protected characteristics including disability, sexual orientation and religion and belief are undeclared.

Indicator 2

Data for reporting year	Relative likelihood of disabled staff compared to non-disabled staff being appointed from shortlisting across all posts 1.37 less likely
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As at 31 March 2019, data taken from NHS Jobs shows the passage of disabled candidates from application to shortlisted to appointed. Analysis of the data taken from NHS Jobs shows the number of shortlisted applicants with a disability to be 1238 compared to 29276 without a disability. However despite the relative high number of people with a disability being shortlisted only 143 were successfully appointed compared to 4625 people without a disability appointed.

The Trust is committed to the Disability Confident Scheme which aims to attract, recruit and retain people with a disability or long term health condition. The Disability Confident scheme supports employers to make the most of the talents disabled people can bring to the workplace. Being Disability Confident is an opportunity for the Trust to lead the way for disability inclusion and to discover skills and talents we cannot do without. Currently the Trust holds 'Committed' status with the scheme which means the Trust is committed to inclusive and accessible recruitment; inclusive

communication of vacancies; offering an interview to disabled people; providing reasonable adjustments; and supporting existing disabled employees.

In order to upgrade from 'Committed' to 'Employer' status a number of actions must be completed which includes evidence of how the Trust draws from the widest possible pool of talent; employs disabled or people with long term health conditions; helps and supports disabled people to find and stay in work; improve employee morale and commitment by demonstrating that we treat all employees fairly; promotes inclusive communications. The Trust has a robust action plan in place to upgrade its status from Committed to Employer on the scheme in 2020.

Indicator 3

Data for reporting year	Relative likelihood of disabled staff compared to non-disabled staff entering the formal capability process, as measured by entry into the formal capability procedure, is 1.73 greater
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As at 31 March 2019, data taken from ESR shows that 4 out of the 59 people who had entered into the formal capability process were staff with a disability. This is disproportionate to the overall percentage of staff with a disability in the workforce and means the relative likelihood of staff compared to non-disabled staff entering the formal capability process is 1.73 greater.

In response the Trust has introduced Unconscious Bias training into the HR Masterclasses, including the disciplinary (capability) process training for all managers in the Trust. HR has continued to ensure that managers receive training on the relevant Trust policies, including the disciplinary policy, and that the training will include raising awareness of how biases can occur and reinforce the need for fairness and consistency when applying Trust policies.

The introduction of a senior review panel for all employee relations casework will review all cases and includes individuals with a key protected characteristic or where the case relates to a protected characteristic. It will mean reviewing allegations and initial facts before any casework is commissioned to determine whether formal action is justified and equitable and there will be fortnightly reviewing of any cases that are commissioned.

In addition, the Trust has introduced internal leadership programmes for managers, which includes an emphasis on the protected characteristics and focussing on how workplace issues impact on personal performance and workplace wellbeing.

Indicator 4:

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

Patients/Service User

Disabled	30.20%
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Non-disabled	24.20%
Managers	
Disabled	20.30%
Non-disabled	12.20%
Other colleagues	
Disabled	28.90%
Non-disabled	17.40%
Of those that were harassed, bullied or abused, what % reported it	
Disabled	42.70%
Non-disabled	43.80%

Data taken from 2018 National Staff Survey shows that in every category the percentage of disabled staff experiencing harassment, bullying or abuse is higher than non-disabled staff. It is worth noting that the highest percentage increase is the percentage of disabled staff experiencing harassment, bullying and abuse from other colleagues in the Trust, closely followed by harassment, bullying and abuse from Managers. Less than half of those (42.7%) who experienced bullying, harassment or abuse actually reported it.

The Trust continues to implement and embed conflict resolution and resilience training to support staff in conjunction with the Staff Disability or Long Term Health Condition network as a source of peer to peer advice and support. In addition, the Trust has continued to improve awareness of the Freedom to Speak up Guardian who provides a confidential service for staff to approach for advice where they feel they may have experienced harassment and that this may have been associated to their disability or long term health condition. The Freedom to Speak up Guardian is supported by the Trust's confidential contacts and a dedicated confidential contact for disability has recently been recruited.

Following the merger the Trust has held a number of forums with staff to understand better the positive behaviours which are aligned to the new Trust values. This will be part of a wider work stream to develop a code of conduct for staff. The merger has also meant the alignment and revision of policies including the Trust's Dignity at Work policy which provides effective support for staff experiencing harassment and an overhaul of Corporate Induction for all new starters to include an Inclusion video to promote equality, fair treatment and inclusivity in the workplace.

As part of the new inclusion strategy the Trust will increase the engagement opportunities to hear the voices of our staff, including those with a disability, and use staff feedback to shape programmes

of work to enable change. This is supported by the Staff with a Disability or Long Term Health Conditions network and by ensuring representation from this network on the Inclusion Stakeholder Group who monitor all inclusion activity at the Trust.

Indicator 5:

Percentage of Disabled staff compared to non-disabled staff believing the Trust provides equal opportunities for career progression and promotion.	
Disabled	71.90%
Non-disabled	83.80%

Whilst nearly 72% of staff with a disability believes that the Trust provides equal opportunities for career progression, this percentage is significantly lower than the percentage of non-disabled staff (84%). The implications of this may mean that staff with a disability are not putting themselves forward for career progression in the Trust.

During the last year the Trust has implemented a number of actions which include, formalising the recruitment process for 'acting up' and all internal positions to improve fairness and equality to opportunity and improving awareness of the National Leadership programmes which are available to all staff. In 2019 the Trust sponsored the Chair of the Staff with a Disability or Long Term Health Condition Network to attend a National Leadership Development Programme for People with a Disability. Since then, the Chair has used the learning to begin talks with the Trust on how we might develop our own internal leadership programme for staff with a disability. In addition, the Trust continues to work with partners to develop an offering of career clinics and access to career advisors for staff in order to provide advice and support to those looking to advance personally and professionally.

The personal and professional progression of staff with a disability or long term health condition in the Trust was profiled as part of the Trust's role model campaign to inspire and motivate others and plans are in place to continue with showcasing role models with a disability in 2020.

Indicator 6:

Percentage of Disabled staff compared to non-disabled staff saying they have felt pressure from their manager to come to work despite not feeling well enough to perform their duties.	
Disabled	36.40%
Non-disabled	25.10%

Data from the National Staff Survey shows that 25% of non-disabled staff have reported feeling pressure from their manager to come to work despite not feeling well enough to perform their duties however 36% of disabled staff have reported the same. The Trust recognises this is an indicator which requires further investigation and intends to hold focus groups with disabled staff to understand better the reasons for this disparity.

Following the merger the Sickness Absence policy has been revised including a review of the trigger points. This has meant the introduction of a new Disability Leave policy which allows staff with a disability additional time off work to manage their disability or long term health condition. Further communication of the disability leave policy and training for all Managers is planned 2020.

Indicator 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	35.80%
Non-disabled	48.4%

Similarly, there is a disparity between the percentage of non-disabled staff (48%) compared to the percentage of disabled staff (nearly 36%) reporting that they are satisfied with the extent to which their organisation values their work. This is also reflected in the results of indicator 9a which shows staff with a disability to have the lowest overall engagement score in the Trust.

The Trust recognises the low engagement and overall satisfaction of staff with a disability or long term health condition to be a priority and as a result raising the profile of disability in the Trust will be a key objective in the new Inclusion Strategy and work plan for 2020.

Indicator 8:

Data for reporting year	The percentage of disabled staff saying that their employer has made adequate adjustments to enable them to carry out their work 68.9%
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Although almost 70% of staff with a disability have said that the Trust has made adequate adjustments for them to carry out their work, there is still almost a third of staff with a disability who have not had the adjustments they need to support them in their roles. It is worth noting that this figure represents those staff who have declared they have a disability, there is a significant number of staff who have not declared they have a disability and therefore will not have had the workplace adjustments they need to be supported at work.

The Trust recognises that there is a need to provide more education to managers and staff on workplace adjustment, in particular Access to Work. There has been an absence of sufficient Access

to Work training available to staff in the Trust and as such Managers are reporting a lack of understanding on how to undergo the process of applying to Access to Work for current staff and new starters. Plans are in place to provide robust Access to Work training, including understanding workplace adjustments and an 'easy to read' Access to Work' guidebook for managers.

Indicator 9a:

Staff engagement score for Disabled staff, compared to non-disabled staff and the overall engagement score for the organisation	
Disabled	6.5
Non-disabled	7.1
Overall Trust score	7.0

The Trust recognises the low engagement and overall satisfaction of staff with a disability or long term health condition to be a priority and as a result raising the profile of disability in the Trust will be a key objective in the new Inclusion Strategy and work plan for 2020.

Indicator 9b:

Has your Trust taken action to facilitate the voices of Disabled staff in your organisation?

The Trust has a successful Staff with a Disability or Long Term Health Condition network which continues to grow in size and influence. The network meets bi-monthly and provides an opportunity for the members to work in partnership with the Trust to enable change for staff and patients with a disability. The network has two dedicated Chairs who will often meet with disabled staff to listen to their experiences and offer advice and support. Recently, the network members requested for a separate sub group to be set up specifically for staff with neurodiversity so that the voices of those staff could be heard.

The staff network reports into the Inclusion Stakeholder Group chaired by the Executive Chief Nurse. These quarterly meetings offer the Chair of the staff network with the opportunity to share the experiences of the members with key stakeholders throughout the Trust. The Inclusion Stakeholder Group monitors the progress against the indicators in the WDES report and provides an update to the Trust Board.

In September 2019 the Trust held an engagement event with representatives from all staff groups in order to understand better the inclusion priorities for the Trust and to inform the new inclusion

strategy. Staff with a disability were represented at this event and as a result it was recognised by the Trust that improving the overall engagement of disabled staff must be a key priority in the development of the new inclusion strategy.

All staff are asked to complete the National Staff Survey so that the Trust may understand better the experiences of our staff. Analysis of the data shows that staff with a disability have the lowest engagement score in the Trust. The data also shows the specific areas where staff with a disability have scored the lowest satisfaction and can be used to inform a Trust wide action plan to address areas of concern.

As part of the new inclusion strategy the Trust will increase the engagement opportunities to hear the voices and listen to staff, including those with a disability, and use staff feedback to shape programmes of work to enable change. This will include a dedicated inclusion inbox for staff to confidentially get in touch with the inclusion team; the creation of an inclusion newsletter to share relevant information and celebrate the stories of our staff; a dedicated confidential contact for disability so that staff may have a person to contact who will understand their lived experiences; and a dedicated workforce inclusion team who will provide advice, advocacy and support.

In March 2020 the Trust will hold the first conference to celebrate people with a disability. The conference will be open to all staff and will hear from experts on living with a physical disability; living with neuro diversities; mental health awareness; plus six of our own staff will share their personal stories of living with a disability or long term health condition. The conference aims to be educational, informative as well as motivational and inspiring.

Indicator 10:

Percentage difference between the organisation’s Board voting membership and its organisation’s overall workforce. The data for this metric should be a snapshot as at 31 March 2019.

	Disabled	Non-disabled
Total Board members	0	24
Total Board members - % by Disability	0%	100%
Voting Board Member - % by Disability	0%	100%
Non-Voting Board Member - % by Disability	0%	100%
Executive Board Member - % by Disability	0%	100%
Non-Executive Board Member - % by Disability	0%	100%

There are 24 Board members of which 0% have declared a disability. This is in comparison to 3% of the overall workforce at UHB who have declared a disability as recorded on ESR.

Actions for 2020

Improve the declaration rates of staff with a disability

The workforce comparison against the local population suggests under reporting of disabilities. Although the position has slightly improved through previous data cleanse exercises carried out, there is still work to be done to improve the data which is recorded on ESR in relation to staff with a disability. This is highlighted by 16.5% (1051 staff) of those staff who completed the 2018 National Staff Survey declared they have a disability compared to 2.6% of staff (539 employees) on ESR.

The Trust aims to improve the declaration rates of staff with a disability on ESR from 2.6% to 4% by the end of 2022. This will involve undertaking a further cleanse of the data which it holds. This will involve a communication campaign to raise awareness and improve understanding of the importance of recording disability as well as provide staff with the confidence to declare.

Responsibility: Head of Inclusion, Advocacy, Partnerships and Events; Workforce Information.

Changing the way we conduct recruitment and selection processes.

Further investigation is required into the relatively low proportion of disabled recruits. The Trust will upgrade its Disability Confident Scheme status from Committed to Employer by April 2020 which will lead to innovative ways of attracting, recruiting and retaining people with a disability or long term health condition. This will involve working with national and local partners to share best practice and implement new ways of conducting recruitment and selection in the Trust. In addition, to attract recruit and retain from a more diverse pool of talent the Trust will forge links with key community stakeholders and showcase UHB as an inclusive employer of choice.

Responsibility: Head of Inclusion, Advocacy, Partnerships and Events; Deputy Director of HR (Recruitment)

Changing the overall engagement and satisfaction of staff with a disability.

There are some notable differences in the national staff survey results, in particular, the organisation acts fairly on career progression (72% Disabled Staff / 84% Non-Disabled Staff); the percentage of staff feeling pressure from their manager to come to work despite not feeling well enough to perform their duties (36% Disabled Staff / 25% Non-Disabled Staff); percentage of staff saying they are satisfied with the extent to which their organisation values their work (35% Disabled Staff / 48% Non-Disabled Staff). A task and finish group will be established to understand better the experiences of our staff with a disability in the Trust and the cause of their low engagement score and overall satisfaction with the Trust.

Responsibility: Head of Inclusion, Advocacy, Partnerships and Events; Head of Staff Experience; Operational HR

Increase knowledge, skills and confidence for senior and middle management.

The Trust will develop a portfolio of internal leadership programmes which will be available to all staff and will provide the knowledge, skills and confidence to advance in their careers. The Trust will also develop inclusion training for leaders in the Trust to increase confidence and the use of discretion. The Inclusion Leadership Programme for Managers will provide a better understanding of what inclusive leadership means, and amongst a range of inclusive subject matters, will cover supporting staff with a disability, workplace adjustments and Access to Work.

Responsibility: Head of Inclusion, Advocacy, Partnerships and Events; Deputy Chief Operating Officer; Director of Education; Head of Staff Experience

Consider the development of a Disability Case Manager for staff with a disability or long term health condition.

The Trust will consider the development of a Disability Case Manager who will advocate, advise and support staff with a disability or long term health condition. Staff seeking support and guidance on matters relating to managing their disability, such as advice on workplace adjustments; the smooth process of Access to Work applications and implementing recommendations; and help with understanding Trust policy and procedures will be able to speak to the Disability Case Manager. Staff will be able to approach this person for confidential advice where they feel they may have experienced harassment and that this may have been associated to their disability or long term health condition. The Disability Case Manager will oversee the management of all related disability casework and will work with the individual and the Manager to reach a solution.

Responsibility: Deputy Director of Human Resources – Strategy & Development (OH) with Deputy Director of HR (Operational HR)