

Trust Board 27 October 2020

Workforce Disability Equality Standard Metrics Report 2019/20

Appendix 1

Workforce Disability Equality Standard

Leicestershire Partnership NHS Trust

March 2020

Detailed report with narrative

Introduction to the Workforce Disability Equality Standard

In response to findings that indicate Disabled staff have a less favourable experience of working for the NHS than their non-disabled colleagues, NHS England have initiated a Workforce Disability Equality Standard (WDES). The WDES was mandated through the NHS standard contract from 2018/19.

The WDES comprises ten specific metrics to compare the profile and experiences of Disabled and non-disabled staff within an NHS organisation. The purpose of the metrics is to inform a local action plan that will target specific areas within a given organisation where the treatment or experience of Disabled staff is poor. The WDES metrics will also enable the organisation to demonstrate progress in areas where the treatment of Disabled staff needs to improve; and facilitate challenge where progress is not being made.

NHS Trusts are required to submit WDES data centrally, to NHS England, by the end of August. An action plan and the metrics must be ratified by the Trust's Board and must be published on the Trust's website by the end of October.

The WDES metrics

Metric 1. Pay Bands

Description of metric 1:

- Percentage of Disabled staff in Agenda for Change pay bands, calculated separately for non-clinical and for clinical staff, medical and dental subgroups and Very Senior Managers (including Executive Board members) compared with the percentage of staff in the overall workforce.

Narrative for metric 1:

- At March 2020, Disabled staff made up 5.8% of Leicestershire Partnership NHS Trust's (LPT) substantive workforce of known disability status (247/4245); however, disability status was not known for 20.3% of the substantive workforce (1084/5329).
- By comparison, in LPT's 2019 Staff Survey 23.3% of staff who gave their disability status identified as disabled (553/2373), with just 2.0% of respondents withholding the information (49/2422). Thus, data held in the Electronic Staff Record may underestimate the percentage of disabled staff in the organisation, potentially by a factor of 4. Notably, the NHS Staff Survey collects equality monitoring information anonymously. By contrast, whilst equality monitoring information held in the Electronic Staff Record is held confidentially, this information is linked to the individual's record in an identifiable manner.
- Amongst staff of known disability status, Disabled staff had the highest levels of representation at non-clinical pay bands 5 to 7 (7.5%, 22/293), whilst Disabled staff had the lowest levels of representation at non-clinical pay bands 8a to 8b (2.9%, 2/70), at clinical pay bands 8c and above (0.0%, 0/8), and amongst Career Grade Medics (0.0%, 0/15). Please refer to Table 1.
- However, the percentages of staff of unknown disability status tended to be highest in the pay bands where the representation of Disabled staff was lowest. For instance, at non-clinical pay bands 8a to 8b disability status was not known for 32.0% of staff (33/103) and at clinical pay bands 8c and above disability status was not known for 60.0% of staff (12/20).
- Almost all substantive staff for whom there was no information on disability status selected the "prefer not to say" option in the Electronic Staff Record (99.6%, 1080/1084), rather than the record being blank. Before reliable inferences can be drawn about the disability profile of staff based on information held in the Electronic Staff Record, there is a need to address the incompleteness of this equality monitoring information.
- The incompleteness of equality monitoring information on disability has decreased year-on-year from 45.0% at March 2012 to 21.8% at March 2019 and 20.3% at March 2020, but remains too high nonetheless.

Table 1: Metric 1: The disability profile of substantive staff at Leicestershire Partnership NHS Trust, by pay band cluster, at March 2019 and March 2020

Table in 5 columns by 13 rows (including header row)

Pay Band Cluster	Percentage Disabled March 2019	Percentage Disabled March 2020	Actual Disabled March 2019	Actual Disabled March 2020
Substantive Staff Overall	5.4%	5.8%	226 out of 4151	247 out of 4245
Non clinical Cluster 1, Bands 1 - 4	6.3%	6.5%	41 out of 650	40 out of 620
Non clinical Cluster 2, Band 5 - 7	7.8%	7.5%	23 out of 293	22 out of 293
Non clinical Cluster 3, Bands 8a - 8b	1.5%	2.9%	1 out of 67	2 out of 70
Non clinical Cluster 4, Bands 8c - 9 and VSM	3.4%	4.0%	1 out of 29	1 out of 25
Clinical Cluster 1, Bands 1 - 4	4.2%	5.2%	41 out of 971	55 out of 1059
Clinical Cluster 2, Band 5 - 7	5.7%	6.1%	106 out of 1875	114 out of 1877
Clinical Cluster 3, Bands 8a - 8b	3.6%	3.8%	5 out of 137	6 out of 157
Clinical Cluster 4, Bands 8c - 9 and VSM	0.0%	0.0%	0 out of 5	0 out of 8
Clinical Cluster 5, Medical Consultants	4.0%	6.9%	2 out of 50	4 out of 58
Clinical Cluster 6, Medical Non-Consultants	11.1%	0.0%	2 out of 18	0 out of 15
Clinical Cluster 7, Medical Trainee Grades	7.1%	4.8%	4 out of 56	3 out of 63

Key to colour coding in table:

- Disabled staff overrepresented, ○ Disabled staff proportionately represented, ● Disabled staff underrepresented

Metric 2. Recruitment

Description of metric 2:

- Relative likelihood of non-disabled staff compared to Disabled staff being appointed from shortlisting across all posts. The percentage of non-disabled staff appointed from shortlisting divided by the percentage of Disabled staff appointed from shortlisting.

Narrative for metric 2:

- In 2019/20 non-disabled people and Disabled people were similarly likely to be appointed from amongst those shortlisted (non-disabled people were 1.39 times as likely as Disabled people to be appointed from shortlisting).
- This is similar to the position observed in 2018/19 (non-disabled people were 1.40 times as likely as Disabled people to be appointed from shortlisting). Please refer to Table 2.

Table 2: Metric 2: The relative likelihood of non-disabled people and Disabled people being appointed from amongst those shortlisted at Leicestershire Partnership NHS Trust during 2017/18 and 2018/19

Table in 3 columns by 6 rows (including header row)

Recruitment	2018/19	2019/20
Relative likelihood of appointment from shortlisting (non-disabled/Disabled)	1.40	1.39
Percentage of non-disabled people appointed from shortlisting	8.0%	11.2%
Percentage of Disabled people appointed from shortlisting	5.7%	8.1%
Number of non-disabled people appointed from shortlisting	477 out of 5952	504 out of 4493
Number of Disabled people appointed from shortlisting	24 out of 419	30 out of 371

Key to colour coding in table: ● Disabled staff disadvantaged

Metric 3. Formal capability process

Description of metric 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. The percentage of Disabled staff entering the formal capability process divided by the percentage of non-disabled staff entering the capability process.

Narrative for metric 3:

- In the two-year window 2018/19 to 2019/20, Disabled staff were 6.22 times more likely than non-disabled staff to enter formal capability proceedings.
- This represents a deterioration of the position observed in the two-year window 2017/18 to 2018/19, when Disabled staff were 2.48 times as likely as non-disabled staff to enter formal capability proceedings. Please refer to Table 3.

Table 3: Metric 3: The relative likelihood of Disabled staff and non-disabled staff entering the formal capability process at Leicestershire Partnership NHS Trust during the two-year window 2017/18 to 2018/19

Table in 3 columns by 6 rows (including header row)

Formal capability process	2017/18 to 2018/19	2018/19 to 2019/20
Relative likelihood of entering the formal capability process (Disabled/non-disabled)	2.48	6.22
Percentage of Disabled staff entering the formal capability process	1.3%	2.0%
Percentage of non-disabled staff entering the formal capability process	0.5%	0.3%
Number of Disabled staff entering the formal capability process	3 out of 226	5 out of 247
Number of non-disabled staff entering the formal capability process	21 out of 3925	13 out of 3998

Key to colour coding in table: ● Disabled staff disadvantaged

Metric 4. Harassment, bullying or abuse

Description of metric 4:

- 4 a) 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
- 4 b) 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.

Narrative for metric 4a, parts i, ii, and iii:

- In 2019, Disabled staff were more likely than non-disabled staff to suffer harassment, bullying or abuse from patients / service users, their relatives or other members of the public (30.1%, 165/548 Disabled staff and 20.9%, 376/1803 non-disabled staff); a similar position to that seen in 2018 (32.5%, 181/557 Disabled staff and 21.0%, 411/1957 non-disabled staff). Please refer to Table 4.
- In 2019, Disabled staff were more likely than non-disabled staff to suffer harassment, bullying or abuse from managers (20.5%, 111/542 Disabled staff and 8.1%, 145/1801 non-disabled staff); a deterioration of the position seen in 2018 for Disabled staff (15.9%, 88/554 Disabled staff and 7.6%, 148/1952 Non-disabled staff). Please refer to Table 5.
- In 2019, Disabled staff were more likely than non-disabled staff to suffer harassment, bullying or abuse from other colleagues (23.6%, 126/534 Disabled staff and 13.5%, 238/1766 non-disabled staff); a similar position to that seen in 2018 (21.0%, 115/548 Disabled staff and 12.5%, 242/1934 non-disabled staff). Please refer to Table 6.

Table 4: Metric 4a i: The percentages of Disabled staff and non-disabled staff who experienced harassment, bullying or abuse from patients / service users, their relatives or other members of the public, Staff Survey 2018 and Staff Survey 2019

Table in 3 columns by 5 rows (including header row)

Harassment, bullying or abuse from patients / service users, their relatives or the public	2018	2019
Percentage Disabled staff	32.5%	30.1%
Percentage non-disabled staff	21.0%	20.9%
Number Disabled staff	181 out of 557	165 out of 548
Number non-disabled staff	411 out of 1957	376 out of 1803

Key to colour coding in table: ● Disabled staff disadvantaged

Table 5: Metric 4a ii: The percentages of Disabled staff and non-disabled staff who experienced harassment, bullying or abuse from managers, Staff Survey 2018 and Staff Survey 2019

Table in 3 columns by 5 rows (including header row)

Harassment, bullying or abuse from managers	2018	2019
Percentage Disabled staff	15.9%	20.5%
Percentage non-disabled staff	7.6%	8.1%
Number Disabled staff	88 out of 554	111 out of 542
Number non-disabled staff	149 out of 1952	145 out of 1801

Key to colour coding in table: ● Disabled staff disadvantaged

Table 6: Metric 4a iii: The percentages of Disabled staff and non-disabled staff who experienced harassment, bullying or abuse from other colleagues, Staff Survey 2018 and Staff Survey 2019

Table in 3 columns by 5 rows (including header row)

Harassment, bullying or abuse from other colleagues	2018	2019
Percentage Disabled staff	21.0%	23.6%
Percentage non-disabled staff	12.5%	13.5%
Number Disabled staff	115 out of 548	126 out of 534
Number non-disabled staff	242 out of 1934	238 out of 1766

Key to colour coding in table: ● Disabled staff disadvantaged

Narrative for metric 4b:

- In 2019, Disabled staff and non-disabled staff were similarly likely to say they, or a colleague, reported their last incident of harassment, bullying or abuse (50.2%, 119/237 Disabled staff and 56.6%, 282/498 non-disabled staff); a similar position to that seen in 2018 (54.4%, 118/217 Disabled staff and 57.6%, 260/451 non-disabled staff). Please refer to Table 7.

Table 7: Metric 4b. The percentages of Disabled staff and non-disabled staff who say they, or a colleague, reported their last incident of harassment, bullying or abuse, Staff Survey 2018 and Staff Survey 2019

Table in 3 columns by 5 rows (including header row)

Reporting harassment, bullying or abuse	2018	2019
Percentage Disabled staff	54.4%	50.2%
Percentage non-disabled staff	57.6%	56.6%
Number Disabled staff	118 out of 217	119 out of 237
Number non-disabled staff	260 out of 451	282 out of 498

Key to colour coding in table: ● Disabled staff disadvantaged

Metric 5. Equal opportunities for career progression or promotion

Description of metric 5:

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

Narrative for metric 5:

- In 2019, Disabled staff were less likely than non-disabled staff to feel that the organisation provides equal opportunities for career progression or promotion (77.0%, 291/378 Disabled staff and 86.3%, 1056/1223 non-disabled staff); a deterioration of the position seen in 2018 for non-disabled staff (81.8%, 320/391 Disabled staff and 89.3%, 1248/1397 non-disabled staff). Please refer to Table 8.

Table 8: Metric 5. The percentages of Disabled staff and non-disabled staff who felt that the organisation provides equal opportunities for career progression or promotion, Staff Survey 2018 and Staff Survey 2019

Table in 3 columns by 5 rows (including header row)

Equal opportunities for career progression or promotion	2018	2019
Percentage Disabled staff	81.8%	77.0%
Percentage non-disabled staff	89.3%	86.3%
Number Disabled staff	320 out of 391	291 out of 378
Number non-disabled staff	1248 out of 1397	1056 out of 1223

Key to colour coding in table: ● Disabled staff disadvantaged

Metric 6. Pressure from a manager to come to work, despite not feeling well enough

Description of metric 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.

Narrative for metric 6:

- In 2019, Disabled staff were more likely than non-disabled staff to have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties (26.2%, 101/386 Disabled staff and 17.9%, 161/900 non-disabled staff); a similar position to that seen in 2018 (27.8%, 110/395 Disabled staff and 16.7%, 159/952 non-disabled staff). Please refer to Table 9.

Table 9: Metric 6. The percentages of Disabled staff and non-disabled staff who have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties, Staff Survey 2018 and Staff Survey 2019

Table in 3 columns by 5 rows (including header row)

Pressure from a manager to come to work, despite not feeling well enough	2018	2019
Percentage Disabled staff	27.8%	26.2%
Percentage non-disabled staff	16.7%	17.9%
Number Disabled staff	110 out of 395	101 out of 386
Number non-disabled staff	159 out of 952	161 out of 900

Key to colour coding in table: ● Disabled staff disadvantaged

Metric 7. Satisfaction with the extent to which the organisation values work

Description of 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.

Narrative for metric 7:

- In 2019, Disabled staff were less likely than non-disabled staff to be satisfied with the extent to which the organisation valued their work (37.8%, 207/547 Disabled staff and 47.4%, 853/1801 non-disabled staff); a deterioration of the position seen in 2018 for non-disabled staff (41.8%, 233/558 Disabled staff and 52.5%, 1027/1957 non-disabled staff). Please refer to Table 10.

Table 10: Metric 7. The percentages of Disabled staff and non-disabled staff who were satisfied with the extent to which the organisation valued their work, Staff Survey 2018 and Staff Survey 2019

Table in 3 columns by 5 rows (including header row)

Satisfaction with the extent to which the organisation values work	2018	2019
Percentage Disabled staff	41.8%	37.8%
Percentage non-disabled staff	52.5%	47.4%
Number Disabled staff	233 out of 558	207 out of 547
Number non-disabled staff	1027 out of 1957	853 out of 1801

Key to colour coding in table: ● Disabled staff disadvantaged

Metric 8. Adequate adjustments

Description of metric 8:

- Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work.

Narrative for metric 8:

- In 2019, Amongst Disabled staff at LPT, 80.3% (281/350) reported that their employer had made adequate adjustments to enable them to carry out their work – higher than the national average of 73.8% (44809/60699); a similar position to that seen in 2018 (78.6%, 257/327 Disabled staff at LPT and 72.9%, 34684/47531 Disabled staff nationally). Please refer to Table 11.

Table 11: Metric 8. The percentages of Disabled staff reporting that their employer has made adequate adjustment(s) to enable them to carry out their work, Staff Survey 2018

Table in 3 columns by 5 rows (including header row)

Adequate adjustments	2018	2019
Percentage Disabled staff at LPT	78.6%	80.3%
Percentage Disabled staff nationally	73.0%	73.8%
Number Disabled staff at LPT	257 out of 327	281 out of 350
Number Disabled staff nationally	34684 out of 47531	44809 out of 60699

Key to colour coding in table: ● Disabled staff at LPT at an advantage compared to Disabled staff nationally

Metric 9. Staff engagement and facilitating the voices of Disabled staff

Description of metric 9:

- 9 a) The staff engagement score for Disabled staff, compared to non-disabled staff and the overall engagement score for the organisation

A note on interpreting the staff survey engagement score: The engagement score is a composite score, which is drawn from 9 individual questions in the NHS Staff Survey, each of which contributes to the overall engagement score and to one of three sub-scales as outlined below. The overall engagement score and that on each subscale is standardised to give a value out of 10.

- Motivation subscale:
 - Q2a - "I look forward to going to work."
 - Q2b - "I am enthusiastic about my job."
 - Q2c - "Time passes quickly when I am working."
 - Ability to contribute to improvements subscale:
 - Q4a - "There are frequent opportunities for me to show initiative in my role."
 - Q4b - "I am able to make suggestions to improve the work of my team / department."
 - Q4d - "I am able to make improvements happen in my area of work."
 - Recommendation of the organisation as a place to work / receive treatment subscale:
 - Q21a - "Care of patients / service users is my organisation's top priority."
 - Q21c - "I would recommend my organisation as a place to work."
 - Q21d - "If a friend or relative needed treatment I would be happy with the standard of care provided by this organisation."
- 9 b) Has your Trust taken action to facilitate the voices of Disabled staff in your organisation to be heard? (yes) or (no)

Narrative for metric 9a:

- In 2019, Disabled staff scored lower than non-disabled staff on the engagement score (6.56 for Disabled staff and 6.96 for non-disabled staff); a deterioration of the position seen in 2018 for non-disabled staff (6.67 for Disabled staff and 7.08 for non-disabled staff). Please refer to Table 12.

Table 12: The engagement score, overall and on each of the three subscales, for Leicestershire Partnership NHS Trust overall, and for Disabled and not disabled staff separately, Staff Survey 2018

Table in 3 columns by 4 rows (including header row)

Staff engagement	2018	2019
Disabled staff	6.67	6.56
Non-disabled staff	7.08	6.96
LPT overall	6.98	6.87

Key to colour coding in table: ● Disabled staff disadvantaged

Metric 9b. Action taken by the Trust to facilitate the voices of Disabled staff in the organisation to be heard:

- Channels for voices to be heard:
 - Disabled Staff Support Group: MAPLE (Mental and Physical Life Experience) which feeds into the
 - Equality, Diversity and Inclusion Strategic Workforce Group
 - Equality, Diversity and Inclusion Patient Involvement and Experience Group
- Issues Addressed
 - Discriminatory language
 - Able staff parking in disabled parking bays
 - Derogatory comments about work performance
- Outputs
 - Co-production of training packages and tools to include
 - Unconscious bias training
 - Managing ill health (for line managers, including access to work, reasonable adjustment, and stress management)
 - Stress management toolkit and links to the discussion of health and well-being at appraisal

Metric 10. Board representation

Description of metric 10:

- Percentage difference between Disabled staff representation in the organisation's Board membership and the organisation's overall workforce, disaggregated by the Board's voting membership and executive membership.

Narrative for metric 10:

- At March 2020, compared to the level of representation in the workforce overall, Disabled people were proportionally represented amongst board members overall (+2.5% difference in representation), and amongst voting board members (+5.3% difference in representation); however there no Disabled people amongst executive board members (-5.8% difference in representation). The position is similar to that observed in March 2019.
- Disability status was not known for 29% of board members and 20% of the substantive workforce overall. Before reliable inferences can be drawn about the disability profile of the board and staff based on information held in the Electronic Staff Record, there is a need to address the incompleteness of equality monitoring information on disability status.

Table 13: Metric 10. Differences in the levels of representation of Disabled staff amongst board members (overall, voting members, and executives), relative to the level of representation in the workforce overall, at March 2019 and March 2020

Table in 3 columns by 5 rows (including header row)

Board representation	March 2019	March 2020
Percentage Disabled staff in the substantive workforce overall	5.4%	5.8%
Difference between percentage Disabled people amongst all board members and the substantive workforce overall	+2.9%	+2.5%
Difference between percentage Disabled people amongst voting board members and the substantive workforce overall	+5.7%	+5.3%
Difference between percentage Disabled people amongst executive board members and the substantive workforce overall	-5.4%	-5.8%

Key to colour coding in table: ● Disabled people underrepresented

Appendix 2

Leicestershire Partnership Trust

Draft WDES Action Plan 2020/21

1. Increase declaration rates of employees with disabilities from 5.8% to 10% by March 2021.

Key issues identified from WRES Metrics:

- At March 2020, Disabled staff made up 5.8% of Leicestershire Partnership NHS Trust's (LPT) substantive workforce of known disability status (247/4245); however, disability status was not known for 20.3% of the substantive workforce (1084/5329);
- By comparison, in LPT's 2019 Staff Survey 23.3% of staff who gave their disability status identified as disabled (553/2373), with just 2.0% of respondents withholding the information (49/2422). Thus, data held in the Electronic Staff Record may underestimate the percentage of disabled staff in the organisation, potentially by a factor of 4. Notably, the NHS Staff Survey collects equality monitoring information anonymously. By contrast, whilst equality monitoring information held in the Electronic Staff Record is held confidentially, this information is linked to the individual's record in an identifiable manner.

Priority	Action	Lead	By When	Milestone	Progress	RAG
1	Promote the importance of disability declaration through ongoing communications. This will include articles in the staff newsletter, staff stories and features and high profile messaging via MAPLE Executive sponsor and Trust Board.	Director of HR with support from EDI Co-ordinator and Resourcing Manager	March 2021	<ul style="list-style-type: none"> • Establishment of communications plan (August 2020) • Regular disabled staff stories and features as blogs and vlogs which promote importance of declaration (September 2020) • Regular articles and information on how to record disability through ESR (could include YouTube video on step by step guide or MS Teams tutorial) 	MAPLE staff network have supported the idea of blogs and vlogs. Some volunteers have agreed to assist with the campaign.	B

				(December 2020) <ul style="list-style-type: none"> Promote these stories on social media to help with increased declarations at application stage (December 2020) and increase applications from individuals with disabilities. 		
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2. Developing a culture where disabled staff (and candidates) feel confident and reach their full potential

Key issues identified from WRES Metrics:

- In 2019, Disabled staff were more likely than non-disabled staff to suffer harassment, bullying or abuse from patients / service users, their relatives or other members of the public (30.1%, compared to non-disabled staff 20.9%);
- In 2019, Disabled staff were more likely than non-disabled staff to suffer harassment, bullying or abuse from managers (20.5%, compared with 8.1%, non-disabled staff);
- In 2019, Disabled staff were more likely than non-disabled staff to suffer harassment, bullying or abuse from other colleagues (23.6%, compared with 13.5%, non-disabled staff);
- In 2019, Disabled staff were less likely than non-disabled staff to feel that the organisation provides equal opportunities for career progression or promotion (77.0%, compared with 86.3%, non-disabled staff).

Priority	Action	Lead	By When	Milestone	Progress	RAG
1	Encourage and promote the stories/lived experiences of the contributions of disabled staff in a range of roles across the Trust and on social media.	EDI Co-Ordinator, Communications team, MAPLE Support Network	December 2020	<ul style="list-style-type: none"> Establishment of communications plan (August 2020) Regular disabled staff stories/lived experiences and features as blogs and vlogs which promote and highlight 	Some members of MAPLE have agreed to share their stories	B

				<p>key issues for disabled staff. These may be both positive or negative but seek to create a more inclusive culture in line with LPT values and behaviours (December 2020)</p> <ul style="list-style-type: none"> Promote stories on social media (December 2020) 		
1	Utilise the opportunity for the celebration of International Day of Disabled People on 3 December 2020 to promote and explore the issues identified through the WDES.	Director of HR supported by EDI Co-ordinator	December 2020	<ul style="list-style-type: none"> Plan content and theme of IDODP (September 2020) Agree plan (October 2020) IDODP event delivery (3 December 2020) JP – Promote the day on social media 	TBC	B
2	Explore subject to resources the delivery of a range of disability equality training in specific areas such as mental health, physical and sensory disabilities.	Head of EDI	October 2020	<ul style="list-style-type: none"> Carry out a Learning Needs Assessment (LNA) on what gaps are present in staff knowledge and awareness (September 2020) Present findings to EDI Group (October 2020) Identify resources required to deliver training to staff (October 2020) 	TBC	B
2	Consider the exploration of carrying out access audits of LPT Estates and Facilities.	Director of Finance	March 2021	<ul style="list-style-type: none"> Identify resources required for access audit (November 2020) Subject to resources, establish a timetable for commencement of access audits (January 2021) Completion of access audits (March 2020/21) 	TBC	B

				<ul style="list-style-type: none"> • Implementation of timetable of access improvements to start (April 2021) 		
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3. Involve and engage with Disabled staff in decision-making

Key issues identified from WRES Metrics:

In 2019, Disabled staff scored lower than non-disabled staff on the engagement score (6.56 for Disabled staff and 6.96 for non-disabled staff); a deterioration of the position seen in 2018 for non-disabled staff (6.67 for Disabled staff and 7.08 for non-disabled staff).

Priority	Action	Lead	By When	Milestone	Progress	RAG
1	Develop a timetable of Listening events with specific themes and topics in consultation with disabled staff they would like to discuss with the Executive Team.	Head of EDI	September 2020	<ul style="list-style-type: none"> • Discuss topic areas at MAPLE SSG (September 2020) • Develop timetable and schedule in meetings in line with Executive Team availability 	To be actioned.	B
2	Engage MAPLE staff network in the development of theme and delivery of LPT's contribution to Purple Tuesday.	EDI Co-ordinator	October 2020	<ul style="list-style-type: none"> • Develop theme and content (September 2020) • Develop coms plan and programme of activities (October 2020) • Deliver Purple Tuesday Event (November 2020) • JP – Promote the day on social media 	TBC	B
1	Engage with MAPLE SSG in the development of and delivery of International Day for Disabled People.	EDI Co-Ordinator	December 2020	<ul style="list-style-type: none"> • Plan content and theme of IDODP (September 2020) • Agree plan (October 2020) • IDODP event delivery (3 	TBC	B

				<p>December 2020)</p> <ul style="list-style-type: none"> • JP – Promote the day on social media 		
1	Engage disabled staff in the delivery of reasonable adjustment training as part of the Management of Ill-Health training or stand alone training.	EDI Co-Ordinator	January 2020/21	<ul style="list-style-type: none"> • Liaise with HR lead on securing a slot for MAPLE members to share their stories with managers (October 2020) • Explore how stand alone training could be delivered on reasonable adjustments aimed at wider audience of employees (November 2020) • Start delivering training (January 2021) 	To be actioned	B
1	Develop a business case for securing resources to support the MAPLE SSG agenda.	Head of EDI	August 2020	<ul style="list-style-type: none"> • Development of business case (July 2020) • Agree with MAPLE SSG (August 2020) • Approval sought from CEB (August 2020) 	To be actioned	B
1	Encourage MAPLE members to engage with the delivery of LPT Culture Change Programme.	Head of EDI & Head of OD	December 2020	<ul style="list-style-type: none"> • Invite Head of OD to a meeting of MAPLE to present the plans for Culture Change Programme (October 2020) • Identify specific projects that MAPLE group members can get involved with (December 2020) 	TBC	B
1	Reverse Mentoring.	Head of EDI	November 2020	<ul style="list-style-type: none"> • Develop resources for second cohort of reverse mentoring programme (October 2020) • Launch application process (November 2020) 	Head of EDI informed that LLR Academy were in the process of evaluating 2019 programme. LPT have carried out their own evaluation which provides evidence	B

				<ul style="list-style-type: none"> • Provide Training (December 2020) • Commence 2nd cohort of reverse mentoring from January 2020 	of positive outcomes from the 1 st programme. Head of EDI now leading on system wide approach.	
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Table Key:  Blue: not started  Red : concerns / not on track  Amber : action is on track  Green: action is complete.