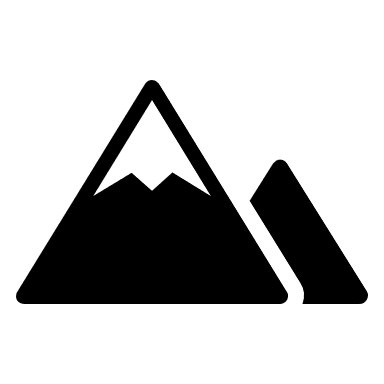
**Workforce Disability Equality Standard**

**Leicestershire Partnership NHS Trust**

**March 2022**

# Summary

**At LPT in 2021/22, Disabled colleagues were…**

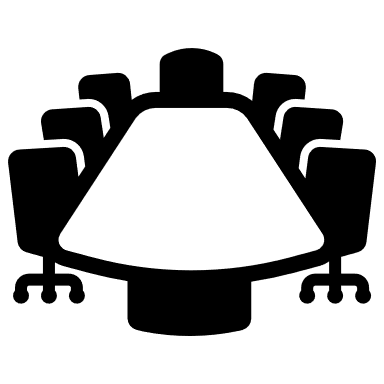


Under-represented at Bands 8A and above

Over-represented/proportionally represented in Bands 5 to 7

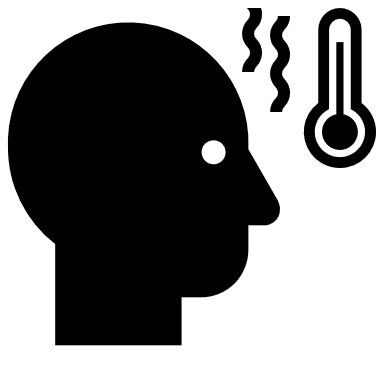
Over-represented in medical trainee roles

**Representation has improved across all Band clusters, with the exception of Consultants (remained similar) and clinical Band 8C to VSM (worsened)**



Similarly likely to be appointed from shortlisting than non-Disabled applicants. Non-disabled people were 1.17 times more likely than Disabled people to be appointed from shortlisting.

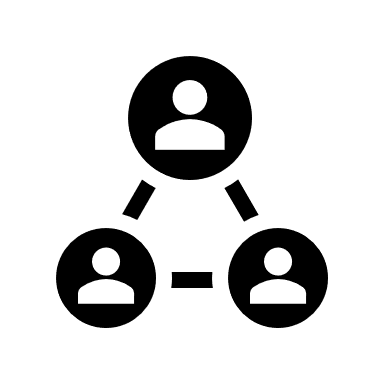
**This is similar to last year.**

More likely to feel pressured to come to work when unwell (22% Disabled, 15.1% non-Disabled)

**This is an improvement on last year**

More likely than Disabled staff nationally to report adequate adjustments have been made for them (79.9% LPT, 78.8% national)

**This is an improvement on last year**

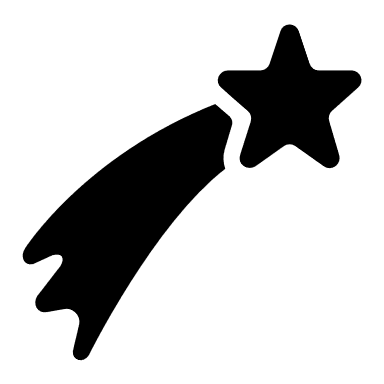
More likely than non-Disabled colleagues to suffer harassment, bullying or abuse from the public, managers, and colleagues.

However:

The gap between Disabled and non-disabled staff has narrowed when looking at bullying/harassment/abuse from the public.

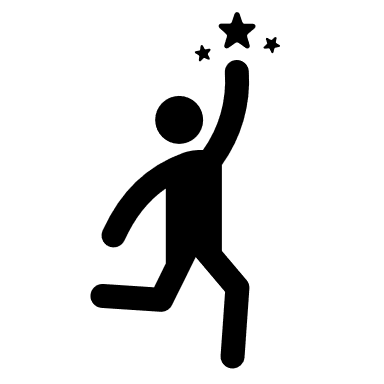
The proportion of Disabled staff reporting bullying/harassment/abuse has fallen across all categories.

Disabled and non-Disabled staff were similarly likely to report these incidents.

**This is an improvement on last year**

Less likely to feel valued by the organisation (38.1% Disabled, 51% non-Disabled)

**This is similar to last year**



Slightly less likely than non-Disabled colleagues to feel career progression is fair at LPT (59% Disabled, 65.7% non-Disabled)

**This is an improvement on last year**

Disabled people are proportionally represented within the Board as a whole, and among voting Board members, but not among executive Board members.

**This is an improvement on last year.**

# Introduction to the Workforce Disability Equality Standard

The Workforce Disability Equality Standard (WDES) includes ten metrics comparing experiences and outcomes for Disabled and non-disabled colleagues. This data is used to develop action plans for improvement.

All NHS Trusts are required to submit WDES data to NHS England and NHS Improvement, by August 31st 2022. An action plan must be agreed by the Trust Board and published on the Trust’s website by October 31st 2022.

**Note on data:**

Headcounts below 10, and any associated headcounts which could be used to calculate headcounts below 10, have been redacted.

**Note on terminology:**

For the Staff Survey, “Disabled” is defined to mean any physical or mental health conditions or illnesses lasting or expected to last for 12 months or more. Everyone responding “Yes” to Q28a (“Do you have any physical or mental health conditions or illnesses lasting or expected to last for 12 months or more?”) was deemed to be Disabled for the purposes of the Staff Survey analysis. The word “Disabled” was removed from this question in 2020, but results before and after this change are still comparable. The proportion of people reporting a long-term condition or illness via the Staff Survey is much higher than the proportion of people who are recorded as being Disabled on ESR, which is the figure used for the other WDES metrics.

**Benchmarking of last year’s data**

National 2020/21 WDES data broken down by organisation was made available in May 2022, allowing comparisons to be made.

* LPT performed better than, or the same as, other Trusts in the Midlands as a whole. The exception was in Indicator 1: LPT has a greater Disability disparity than Midlands and national data when comparing the disability profile of colleagues at lower bands to higher bands.
* LPT also fared worse for Indicator 3 (capability processes) than Trusts in the Midlands, and nationally. However, this indicator is liable to vary greatly from year to year.
* At LPT, Disabled staff were more likely to report adequate adjustments had been made for them, compared to the rest of the Midlands and national data.
* LPT was one of only 16 Trusts across the Midlands (out of a total 41) to have at least one Board member who had declared a disability.

# The WDES metrics

## Metric 1. Pay Bands

**Description of metric 1:**

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

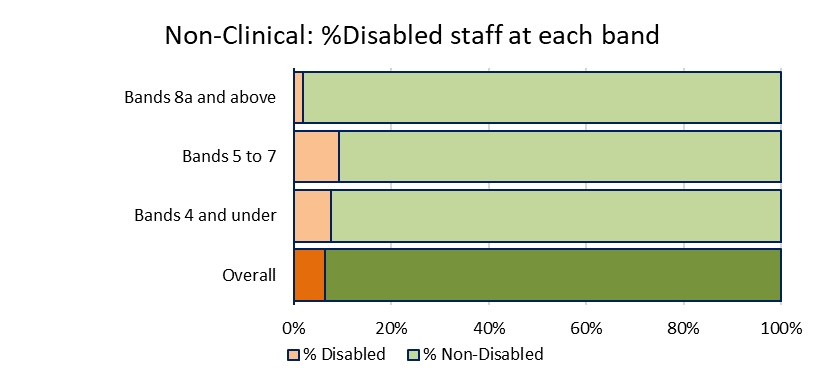
**Narrative for metric 1:**

* At March 2022, Disabled colleagues made up 6.4% (305/4730) of LPT’s substantive workforce of known disability status, an increase since last year (5.9%, 258/4402). Disability status was unknown for 16.9% of people (961/5691), down from 18.9% (1027/5429) last year. Figures in Table 1 and Graph A include colleagues of known disability status only.
* Staff Survey results for 2021 show 27.8% of substantive colleagues at LPT declared a disability, up from 25.0% last year. Therefore, ESR likely underestimates the percentage of Disabled colleagues in the organisation. This may be due to the anonymity of the Staff Survey encouraging people to declare a disability; the wording of the Staff Survey question asking more generally about “any physical or mental health conditions or illnesses lasting or expected to last for 12 months or more”; or the fact that some people will develop disabilities over their working life and not necessarily update their ESR record.
* Non-clinical:
  + For non-clinical colleagues, there is a higher proportion disclosing a Disability at lower bands, a pattern which has been seen across the past few years. Disabled colleagues had the highest levels of representation at non-clinical pay bands 5 to 7 (9.2%, 30/325), whilst Disabled colleagues had the lowest levels of representation at non-clinical pay bands 8c to VSM (R).
* Clinical:
  + As shown by Graph 1, the proportion of Disabled colleagues doesn’t vary much between clinical pay bands. However, disability status was not known for 16.0% of substantive clinical colleagues. Disability status is not recorded for 44.1% of Consultants, compared to just 7.8% of medical trainees. This may suggest we have improved our processes for requesting and recording disability status for newer colleagues, and now need to focus on improving data completeness for our longer-serving colleagues. Once a higher proportion of colleagues have a recorded Disability status, further analysis can be made about the distribution across bands.
* The incompleteness of equality monitoring information on disability has decreased year-on-year from 45.0% at March 2012 to 18.9% at March 2021 and 16.9% at March 2022.
* Analysis of the disability status of Bank-only colleagues shows 4.5% (37/822) of known status have declared a disability. 42.7% (613/1435) have not disclosed their disability status.

Table 1: Metric 1: The disability profile of substantive colleagues at Leicestershire Partnership NHS Trust, by pay band cluster, at March 2020, March 2021, and March 2022

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Pay Band Cluster** | **Percent Disabled**  **March 2020** | **Percent Disabled**  **March 2021** | **Percent Disabled**  **March 2022** | **Number**  **Disabled March 2020** | **Number**  **Disabled March 2021** | **Number**  **Disabled March 2022** |
| Substantive Colleagues Overall | 5.8% | 5.9% | **6.4%** | 247 out of 4245 | 258 out of 4402 | **305 out of 4730** |
| Non clinical Cluster 1, Bands 4 and under | 6.5% | 7.2% | **7.6%** | 40 out of 620 | 45 out of 626 | **49 out of 647** |
| Non clinical Cluster 2, Band 5 - 7 | 7.5% | 7.8% | **9.2%** | 22 out of 293 | 24 out of 306 | **30 out of 325** |
| Non clinical Cluster 3, Bands 8a - 8b | R | R | **R** | R | R | **R** |
| Non clinical Cluster 4, Bands 8c - 9 and VSM | R | R | **R** | R | R | **R** |
| Clinical Cluster 1, Bands 4 and under | 5.2% | 5.4% | **5.9%** | 55 out of 1059 | 59 out of 1090 | **69 out of 1175** |
| Clinical Cluster 2, Band 5 - 7 | 6.1% | 5.8% | **6.3%** | 114 out of 1877 | 113 out of 1950 | **133 out of 2117** |
| Clinical Cluster 3, Bands 8a - 8b | R | R | **R** | R | R | **R** |
| Clinical Cluster 4, Bands 8c - 9 and VSM | R | R | **R** | R | R | **R** |
| Clinical Cluster 5, Medical Consultants | R | R | **R** | R | R | **R** |
| Clinical Cluster 6, Medical Non-Consultants | R | R | **R** | R | R | **R** |
| Clinical Cluster 7, Medical Trainee Grades | R | R | **R** | R | R | **R** |

Graph A: How the percentages of Disabled colleagues varies across pay bands for substantive colleagues, compared to the overall figure, as at March 2022



## Metric 2. Recruitment

**Description of metric 2:**

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

**Narrative for metric 2:**

* In 2021/22 non-disabled people and Disabled people were similarly likely to be appointed from amongst those shortlisted (non-disabled people were 1.17 times as likely as Disabled people to be appointed from shortlisting).
* This follows a similar trend to previous years. 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 2018/19, 2019/20, 2020/21, and 2021/22

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Recruitment** | **2018/19** | **2019/20** | **2020/21** | **2021/22** |
| Relative likelihood of appointment from shortlisting (non-disabled/Disabled) | 1.40 | 1.39 | 1.13 | **1.17** |
| % non-disabled people appointed from shortlisting | 8.0% | 11.2% | 10.8% | **13.2%** |
| % Disabled people appointed from shortlisting | 5.7% | 8.1% | 9.6% | **11.3%** |
| n. non-disabled people appointed from shortlisting | 477 out of 5952 | 504 out of 4493 | 550 out of 5079 | **766 out of 5786** |
| n. Disabled people appointed from shortlisting | 24 out of 419 | 30 out of 371 | 35 out of 364 | **55 out of 485** |

## Metric 3. Formal capability process

**Description of metric 3:**

* Relative likelihood of Disabled colleagues compared to non-disabled colleagues entering the formal capability process, as measured by entry into the formal capability procedure. The percentage of Disabled colleagues entering the formal capability process divided by the percentage of non-disabled colleagues entering the capability process. This does not include ill-health processes.

**Narrative for metric 3:**

* Results for Metric 3 have not been published, as there were fewer than 10 performance management cases involving staff with a disability in 2021/22. This is in line with guidance from the National WDES team.

## Metric 4. Harassment, bullying or abuse

**Description of metric 4:**

* 4 a) Percentage of Disabled colleagues compared to non-disabled colleagues 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 colleagues compared to non-disabled colleagues 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 2021, Disabled colleagues were more likely than non-disabled colleagues to suffer harassment, bullying or abuse from patients / service users, their relatives or other members of the public (26.3%, 206/782 Disabled colleagues and 21.4%, 435/2037 non-disabled colleagues); however, this is an improvement on previous years and the gap between Disabled and non-disabled experiences is narrowing. Please refer to Table 4 and Graph B. LPT’s results for this metric in 2021 were better than Trusts of the same type in the benchmark group (32.2% Disabled colleagues and 24.7% non-Disabled colleagues).
* In 2021, Disabled colleagues were more likely than non-disabled colleagues to suffer harassment, bullying or abuse from managers (16.2%, 126/776 Disabled colleagues and 7.2%, 145/2021 non-disabled colleagues); however this is an improvement on 2019 and 2020’s figures. Please refer to Table 5 and Graph C. LPT’s results for this metric in 2021 were worse than Trusts in the benchmark group for Disabled colleagues (13.4% Disabled colleagues and 7.1% non-Disabled colleagues).
* In 2021, Disabled colleagues were more likely than non-disabled colleagues to suffer harassment, bullying or abuse from other colleagues (21.4%, 165/772 Disabled colleagues and 12.3%, 248/2012 non-disabled colleagues); this is the widest discrepancy between Disabled and non-disabled colleagues’ responses for metric 4a, however this is a small improvement on 2019 and 2020’s figures. Please refer to Table 6 and Graph D. LPT’s results for this metric in 2021 were slightly worse than Trusts in the benchmark group for Disabled colleagues (20.2% Disabled colleagues and 12.3% non-Disabled colleagues).
* For bank colleagues, similar patterns are seen for metrics 4a(ii) and 4a(iii) mirroring the position for substantive colleagues, although the discrepancies between Disabled and non-disabled colleagues are not as large and respondent numbers are much smaller:
  + 23.3% (R) of Disabled bank colleagues reported harassment, bullying or abuse from patients / service users, their relatives or other members of the public, compared to 29.6% (R) of non-disabled bank colleagues.
  + 9.3% (R) of Disabled bank colleagues reported harassment, bullying or abuse from managers compared to 5.6% (R) of non-disabled bank colleagues
  + 23.8% (R) of Disabled bank colleagues reported harassment, bullying or abuse from colleagues compared to 18.3% (R) of non-disabled bank colleagues.

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Harassment, bullying or abuse from patients / service users, their relatives or the public** | **2018** | **2019** | **2020** | **2021** |
| % Disabled colleagues | 32.5% | 30.1% | 30.7% | **26.3%** |
| % non-disabled colleagues | 21.0% | 20.9% | 20.2% | **21.4%** |
| n. Disabled colleagues | 181 out of 557 | 165 out of 548 | 210 out of 684 | **206 out of 782** |
| n. non-disabled colleagues | 411 out of 1957 | 376 out of 1803 | 415 out of 2050 | **435 out of 2037** |

Graph B: Metric 4ai: How the percentages of colleagues with and without disabilities/long-term conditions who experienced harassment, bullying or abuse from patients / service users, their relatives or other members of the public, has changed since 2018

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Harassment, bullying or abuse from managers** | **2018** | **2019** | **2020** | **2021** |
| % Disabled colleagues | 15.9% | 20.5% | 17.7% | **16.2%** |
| % non-disabled colleagues | 7.6% | 8.1% | 8.9% | **7.2%** |
| n. Disabled colleagues | 88 out of 554 | 111 out of 542 | 121 out of 682 | **126 out of 776** |
| n. non-disabled colleagues | 149 out of 1952 | 145 out of 1801 | 183 out of 2047 | **145 out of 2021** |

Graph C: Metric 4aii: How the percentages of colleagues with and without disabilities/long-term conditions who experienced harassment, bullying or abuse from managers has changed since 2018

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Harassment, bullying or abuse from other colleagues** | **2018** | **2019** | **2020** | **2021** |
| % Disabled colleagues | 21.0% | 23.6% | 22.3% | **21.4%** |
| % non-disabled colleagues | 12.5% | 13.5% | 13.0% | **12.3%** |
| n. Disabled colleagues | 115 out of 548 | 126 out of 534 | 150 out of 673 | **165 out of 772** |
| n. non-disabled colleagues | 242 out of 1934 | 238 out of 1766 | 262 out of 2020 | **248 out of 2012** |

Graph D: Metric 4aiii: How the percentages of colleagues with and without disabilities/long-term conditions who experienced harassment, bullying or abuse from colleagues has changed since 2018

**Narrative for metric 4b:**

* In 2021, Disabled colleagues and non-disabled colleagues were similarly likely to say they, or a colleague, reported their last incident of harassment, bullying or abuse (54.5%, 163/299 Disabled colleagues and 52.5%, 283/539 non-disabled colleagues); a similar position to that seen in previous years. Please refer to Table 7 and Graph E. LPT’s results for this metric in 2021 were worse than Trusts in the benchmark group (59.4% Disabled colleagues and 61.0% non-Disabled colleagues).

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Reporting harassment, bullying or abuse** | **2018** | **2019** | **2020** | **2021** |
| % Disabled colleagues | 54.4% | 50.2% | 56.3% | **54.5%** |
| % non-disabled colleagues | 57.7% | 56.5% | 57.6% | **52.5%** |
| n. Disabled colleagues | 118 out of 217 | 118 out of 235 | 166 out of 295 | **163 out of 299** |
| n. non-disabled colleagues | 258 out of 447 | 280 out of 496 | 314 out of 545 | **283 out of 539** |

Graph E: Metric 4b: How the percentages of colleagues with and without disabilities/long-term conditions who say they, or a colleague, reported their last incident of harassment, bullying or abuse has changed since 2018

## Metric 5. Equal opportunities for career progression or promotion

**Description of metric 5:**

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

**Narrative for metric 5:**

* From 2021, “Not sure” responses were not excluded from the total. Therefore, positive response percentages are lower than previous years. To enable comparison, data below has been calculated using the new method for all previous years retrospectively.
* Disabled colleagues were less likely than non-disabled colleagues to feel that the organisation provides equal opportunities for career progression or promotion (59.0%, 459/778 Disabled colleagues and 65.7%, 1336/2032 non-disabled colleagues); a slight improvement on previous years in terms of proportion of colleagues answering positively, and an improvement on last year in terms of the discrepancy between Disabled and non-disabled colleagues. Please refer to Table 8 and Graph F.
* LPT’s results for this metric in 2021 were better than Trusts in the benchmark group (54.4% Disabled colleagues and 60.2% non-Disabled colleagues).

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Equal opportunities for career progression or promotion** | **2018** | **2019** | **2020** | **2021** |
| % Disabled colleagues | 57.6% | 52.9% | 54.6% | **59.0%** |
| % non-disabled colleagues | 63.8% | 58.5% | 64.1% | **65.7%** |
| n. Disabled colleagues | 320 out of 556 | 291 out of 550 | 375 out of 687 | **459 out of 778** |
| n. non-disabled colleagues | 1249 out of 1957 | 1056 out of 1804 | 1320 out of 2058 | **1336 out of 2032** |

Graph F: Metric 5: Percentage of colleagues with and without disabilities/long-term conditions feeling the organisation provides equal opportunities for career progression or promotion, 2018 to 2021

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

**Description of metric 6:**

* Percentage of Disabled colleagues compared to non-disabled colleagues 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 2021, Disabled colleagues were more likely than non-disabled colleagues to have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties, (22.0%, 121/549 Disabled colleagues and 15.1%, 146/968 non-disabled colleagues); however, there has been an improvement for all colleagues. Please refer to Table 9 and Graph G.
* LPT’s results for this metric in 2021 were worse than Trusts in the benchmark group (20.8% Disabled colleagues and 14.7% non-Disabled colleagues).

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Pressure from a manager to come to work, despite not feeling well enough** | **2018** | **2019** | **2020** | **2021** |
| % Disabled colleagues | 27.8% | 26.2% | 26.6% | **22.0%** |
| % non-disabled colleagues | 16.7% | 17.9% | 18.9% | **15.1%** |
| n. Disabled colleagues | 110 out of 395 | 101 out of 386 | 119 out of 447 | **121 out of 549** |
| n. non-disabled colleagues | 159 out of 952 | 161 out of 900 | 154 out of 814 | **146 out of 968** |

Graph G: Metric 6: How the percentages of colleagues with and without disabilities/long-term conditions feeling pressure from their manager to come into work has changed since 2018

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

**Description of metric 7:**

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

**Narrative for metric 7:**

* In 2021, Disabled colleagues were less likely than non-disabled colleagues to be satisfied with the extent to which the organisation valued their work (38.1%, 296/777 Disabled colleagues and 51.0%, 1035/2028 non-disabled colleagues); a similar position to that seen in previous years. Please refer to Table 10 and Graph H.
* LPT’s results for this metric in 2021 were worse than Trusts in the benchmark group for Disabled colleagues (43.6% Disabled colleagues and 51.5% non-Disabled colleagues).

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Satisfaction with the extent to which the organisation values work** | **2018** | **2019** | **2020** | **2021** |
| % Disabled colleagues | 41.8% | 37.8% | 38.7% | **38.1%** |
| % non-disabled colleagues | 52.5% | 47.4% | 53.1% | **51.0%** |
| n. Disabled colleagues | 233 out of 558 | 207 out of 547 | 265 out of 685 | **296 out of 777** |
| n. non-disabled colleagues | 1027 out of 1957 | 853 out of 1801 | 1086 out of 2045 | **1035 out of 2028** |

Graph H: Metric 7: How the percentages of colleagues with and without disabilities/long-term conditions feeling valued by the organisation has changed since 2018

## Metric 8. Adequate adjustments

**Description of metric 8:**

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

**Narrative for metric 8:**

* From 2021, the way this question’s benchmark comparison data is calculated has changed. Now, the comparator is based on an average (median) of benchmark similar Trusts, rather than total number of all responses. In 2021, amongst colleagues with Disabilities or long-term conditions at LPT, 79.9% (366/458) reported that their employer had made adequate adjustments to enable them to carry out their work: slightly more than the national average of 78.8%. Please refer to Table 11 which has been retrospectively updated to for previous years to reflect the same calculation for the comparative data, and also to Graph I.

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Adequate adjustments** | **2018** | **2019** | **2020** | **2021** |
| % Disabled colleagues at LPT | 78.6% | 80.3% | 79.4% | **79.9%** |
| % Disabled colleagues nationally | 77.3% | 76.9% | 81.4% | **78.8%** |
| n. Disabled colleagues at LPT | 257 out of 327 | 281 out of 350 | 359 out of 452 | **366 out of 458** |
| n. Disabled colleagues nationally | Data not available | Data not available | Data not available | **Data not available** |

Graph I: Metric 8: How the percentages of Disabled colleagues reporting adequate adjustments locally and nationally has changed since 2018

## Metric 9. Staff engagement and facilitating the voices of Disabled colleagues

**Description of metric 9:**

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

The engagement score is calculated from 9 questions in the NHS Staff Survey, as outlined below, 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.”
  + Involvement 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.”
  + Advocacy 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 2021, Disabled colleagues scored lower than non-disabled colleagues on the engagement score (6.7 for Disabled colleagues and 7.1 for non-disabled colleagues); a very similar position to that seen in previous years. Please refer to Table 12 and Graph J. LPT’s staff engagement scores are very similar to those Trusts in the benchmark group (6.7 for Disabled colleagues and 7.2 for non-disabled colleagues).

Table 12: The engagement score for Leicestershire Partnership NHS Trust overall, and for Disabled and non-disabled colleagues separately, Staff Survey

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Staff engagement** | **2018** | **2019** | **2020** | **2021** |
| Disabled colleagues | 6.7 | 6.6 | 6.7 | **6.7** |
| Non-disabled colleagues | 7.1 | 7.0 | 7.1 | **7.1** |
| LPT overall | 7.0 | 6.9 | 7.0 | **7.0** |

Graph J: Metric 9a: Staff engagement scores and how they have changed since 2018

**Metric 9b. Action taken by the Trust to facilitate the voices of Disabled colleagues 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
  + Newly formed Neuro-diverse Support Network to accommodate the voices of those who want a safe space to share their lived experiences
* Themes identified through the MAPLE group
  + Continue to promote awareness of reasonable adjustments and use of the Health Passport
  + Ensure more accessibility of the recruitment process
  + Establish Ability Allies
* Outputs
  + Ongoing 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
  + Policy Reviews
  + Listening into Action Event
  + Joint Colleagues Networks Day with Northamptonshire Healthcare Foundation Trust (our buddy Trust)
  + Linking of well-being to the appraisal process through the Leadership Behaviour Framework
  + Developing a lived experience library
  + Celebrating Disability History Month with colleagues sharing their stories.

## Metric 10. Board representation

**Description of metric 10:**

* Percentage difference between Disabled colleagues 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:**

* In March 2022, compared to the level of representation in the workforce of known status overall, Disabled people were proportionally represented amongst board members overall (-0.9% difference in representation), and amongst voting board members (+2.6% difference in representation). However, Disabled people were under-represented amongst executive board members (-6.4% difference in representation). Please refer to Table 13.
* The position is similar to previous years.

Table 13: Metric 10. Differences in the levels of representation of Disabled colleagues amongst board members of known status (overall, voting members, and executives), relative to the level of representation in the workforce overall (of known status), at March 2019, March 2020, March 2021, and March 2022

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| --- | --- | --- | --- | --- |
| **Board representation** | **March 2019** | **March 2020** | **March 2021** | **March 2022** |
| Percentage Disabled colleagues in the substantive workforce overall | 5.4% | 5.8% | 5.9% | **6.4%** |
| Difference between **all board members** and the substantive workforce overall | +2.9% | +2.5% | +4.1% | **-0.9%** |
| Difference between **voting board members** and the substantive workforce overall | +5.7% | +5.3% | +6.6% | **+2.6%** |
| Difference between **executive board members** and the substantive workforce overall | -5.4% | -5.8% | -5.9% | **-6.4%** |

**Leicestershire Partnership Trust**

**WDES Action Plan 2022 - 2024**

**Objective 1: To guarantee Dignity at work for all disabled staff (and those with long-term ill health) by creating a culture free from bullying, harassment and discrimination**

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| **Action Number** | **Action** | **Lead** | **Date** | **Milestone** | **Progress** | **Improvement to Metric(s)** | **RAG** |
|  | To ensure that there is full engagement with the disability agenda, in line with Leadership Behaviours leading to demonstrable culture change in respect of attitudes and approaches | Head of EDI  MAPLE Group | Ongoing  September 2022 - appraisals | September 22: EDI objectives added to appraisals  Ongoing promotion of opportunities | Promote any webinar/learning opportunities/training about disabilities to LPT colleagues, especially managers  EDI objectives within appraisals – in development  Promote reverse mentoring | 1 | A |
|  | Ensure disability diversity balance on decision making Forums i.e. Review all Boards/ committees/decision making forums. Do staff from protected groups sit on these boards/groups | Deputy Director of Governance and Risk | March 2024 | Review of membership | To be commenced | 1 | B |
|  | To ensure that policies and Practices accommodate the needs of staff with disabilities | EDI team | March 2023 | Review key policies as necessary | Link to the Equality Impact Assessment/Due Regard process for policies | 1, 2, 3 | A |
|  | Zero Tolerance to abuse campaign relaunch, with additional supportive materials to encourage speaking up | Zero Tolerance Project Group | December 2022 | Relaunch of campaign in September 2022 | Requirement for more training for staff to know how to approach these situations, what to say | 4 |  |
|  | Produce written guidance for colleagues and managers about navigating post-Covid work, especially for immunosuppressed people: what support is available, what adjustments could be made, etc. | HR, EDI | December 2022 | Review of what is already available  Production of additional guidance | Explanation of Access to Work | 7, 8 | B |
|  | Create a form for people to request reasonable adjustments in writing, and continue to promote Health Passports | HR, EDI | March 2023 | Produce a simple form, how this would link with Health Passports  Engage with stakeholders |  | 7, 8 | B |

**Objective 2: Examine and prioritise issues facing disabled staff and have strategies in place to support individuals.**

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| **Action Number** | **Action** | **Lead** | **Date** | **Milestone** | **Progress** | **Improvement to Metric(s)** | **RAG** |
|  | Give voice to staff with disabilities using existing MAPLE network | MAPLE Group, Freedom to Speak Up Guardian, Director of HR and OD | Ongoing | How to engage with people who do not have access to computers/work phones  Promote MAPLE at careers fairs etc. | Spread the word about MAPLE, what the role of the group is, how they can support staff, and why people should join to encourage new membership. Consider different ways for people to engage with MAPLE: Teams chat, separate chat platform, Facebook group, face to face sessions? | 4, 5, 6, 7, 8, 9 | A |
|  | To promote and communicate a wide range of disability related topics through Team Brief and team meetings. Also use this as a way of getting feedback/ intelligence | MAPLE, Associate Director of Communications, Head of EDI | Ongoing |  | It is planned to communicate more information and guidance through channels such as Team Briefs, staff bulletin and where appropriate the FB closed page and awareness sessions Trust Wide and within teams. | 4, 7, 9 | B |
|  | To develop a Human Library (volunteers from the MAPLE Group who can share their lived experience and expertise through half hour sessions where colleagues can ask them questions) | MAPLE Group | December 2022 | Scoping the project  Recruiting volunteers  Producing materials | To be commenced | 4, 7, 9 | B |
|  | Identify, share, and engage with “hotspot” areas linked to ‘health and wellbeing’ questions in the additional questions part of the NHS staff survey | MAPLE Group  Health & Wellbeing Lead | Summer  2023 | Deep dive into Staff Survey data | To be commenced | 4, 5, 6, 7, 8, 9 | B |

**Objective 3: All disabled staff have the confidence to declare their disability on ESR**

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| **Action Number** | **Action** | **Lead** | **Date** | **Milestone** | **Progress** | **Improvement to Metric(s)** | **RAG** |
|  | Develop a communication campaign so that staff feel confident sharing their disability on ESR | Communication Lead for MAPLE Network | Summer 2023 | Link to Human Library project  Clear guidance on how to update ESR | To be commenced  Have a senior leader champion for this initiative  Myth busting – advantages to people of declaring? Assurance that it won’t negatively impact on them. What counts as a disability?  Refer to NHS Employers best practice advice  Language – use “share” rather than “declare” or “disclose” | 1, 7, 9 | B |
|  | Continue to promote the Trust as a ‘Disability Confident’ employer both internally and via recruitment social media sites | Resourcing Manager/ Communication Lead for MAPLE Network | March 2023 | Review recruitment literature  Comms campaign | Recruitment literature includes Disability Confident logo and criteria such as guaranteeing an interview to candidates who meet the minimum criteria. Further work required: specific Comms campaign with volunteers to be featured on social media talking about their positive experiences as a member of staff with a disability/health condition. | 1, 2, 7 | A |
|  | Share Lived Experiences from disabled staff regarding their experiences in the workplace | MAPLE Network, EDI-Coordinator & Communication Lead | March 2023 | See above – Human Library |  | 1, 7 | A |
|  | Create a prompt in ill-health review meetings and when people request reasonable adjustments to update ESR if someone has acquired a long-term condition/disability | HR | March 2023 | Add to ill-health review meeting templates |  | 1, 7, 8, 9 | B |

**Objective 4: Embed Inclusive recruitment practice towards the employment and retention of candidates with disabilities to guarantee fairness throughout the process.**

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| **Action Number** | **Action** | **Lead** | **Date** | **Milestone** | **Progress** | **Improvement to Metric(s)** | **RAG** |
|  | Review how we work with Trust communications to ensure that we present an inclusive picture to potential job applicants | MAPLE Communication Lead  Resourcing Manager | February 2023 | Commencement of review and engagement with stakeholders Autumn 2022  Production of revised policy and process February 2023 | Review of recruitment and selection policy and procedure planned – review due by Feb 2023. | 1, 2, 7 | B |
|  | Enhance recruitment training so focus is on reducing unconscious bias at all stages of selection | Head of EDI/EDI Specialist  Resourcing Manager | January 2023 | Commencement of review and engagement with stakeholders Autumn 2022  Commence updated training Winter 2022 | As above. | 2 | B |

**Objective 5: Ensure Career Progression for staff with disabilities through the Talent management and succession planning approach.**

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| **Action Number** | **Action** | **Lead** | **Date** | **Milestone** | **Progress** | **Improvement to Metric(s)** | **RAG** |
|  | Develop Disability equality/confident training for all | Resourcing Manager and Head of EDI | March 2023 | Create Disability equality training for all | To be commenced.  Resources to signpost people to, and help managers to understand their responsibilities | 1, 2, 4 | B |
|  | Review how we encourage managers (via training, ongoing education and coaching conversations) to have health and well-being discussions with staff about what reasonable  Adjustments can be made | Head of OD | March 2023 | Add to training  Add to HR advice/templates | Health and wellbeing is included in staff appraisals. Consider further guidance and support to managers to have this discussion.  Link to leadership behaviours training, or other suitable training | 1, 2, 4, 8 | B |
|  | Ensure staff with disabilities benefit from Trust-wide talent management approach by making specific provisions | Head of OD | Ongoing | Integrate disability equality into Trust-wide approach |  | 1, 2 | B |