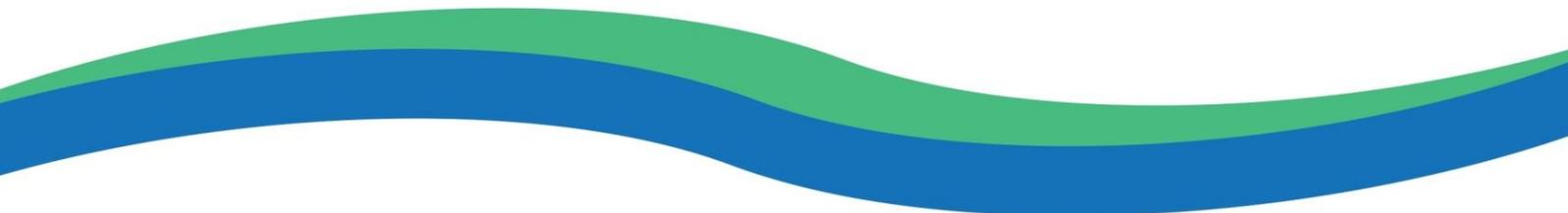


# Brighton and Sussex University Hospitals NHS Trust

Workforce Disability Equality Standard 2020





## Introduction

There has been legal protection for workers with disabilities for many years, making it unlawful to treat a worker with a disability less equally than workers without a disability. The most recent legislation that offers this protection is the Equality Act 2010.

The act goes further than just banning unfair behaviour to workers with disabilities, it also places public sector organisations under duty to seek opportunities to proactively address areas of equality of opportunity and promoting good relations between workers with disabilities and those without.

Whilst there have been improvements with societal attitudes towards people with disabilities, they have not necessarily moved as quickly as the act (and its predecessors) had intended. This being the case, there are still many inequalities surrounding the employment of workers with disabilities. The employment rate of people with disabilities is 51.3%, versus those without 81.4%, this means a difference of 30.1%. This difference is often referred to as the disability employment gap. Given that 22% of adults of working age have a disability, more needs to be done to close this gap. (Briefing Paper 7540, People with Disabilities in Employment, 30 November 2018, Andrew Powell: House of Commons Library).

Breaking down disability further the picture for people with mental ill health and learning disabilities is far worse. 1 in 4 adults and 1 in 10 children experience mental health illnesses in their lifetime (NHS England) however, the stigma around mental health is still rife within the UK. In the 2016 green paper *Improving Lives: The Work, Health and Disability Green Paper*, states that only 32% of people with mental illness were in work. There are approximately 1.5 million people in the UK with some form of Learning Disability, of which 17% of people of working age are in paid employment. It is estimated that 28% of adults of working age with mild or moderate learning disabilities, 10% of adults of working age with severe learning disabilities and 0% of adults of working adults with profound learning disabilities are in employment (Emerson and Hatton, 2008).

The inequalities can be vast, and may include inflexible recruitment practices that do not take the needs of the candidate's disability, providing adequate reasonable adjustments in the workplace, progression into more senior roles, overrepresentation in employee relations procedures, poor attitudes to those with a disability and poor access to development opportunities. These inequalities help to build a picture of poor employment/retention rates and experiences of employment.

The Workforce Disability Standard was introduced in April 2019 by NHS England, it was developed to demonstrate compliance with:

- UK Government's pledge to increase the number of disabled people in employment – this was made in November 2017
- The NHS Constitution – relating to the rights of staff
- The 'social model of disability' - recognising that it is the societal barriers that people with disabilities face which is the disabling factor, not an individual's medical condition or impairment
- The Equality Act 2010 – specific requirements not to discriminate against workers with a disability, advancing equality and fostering good relations
- 'Nothing about us without us' - a phrase used by the disability movement to denote a central principle of inclusion: that actions and decisions that affect or are about people with disabilities should be taken with Disabled people.

The standard allows NHS organisations to review the experiences and outcomes of both staff with and without disabilities. The standard provides a framework for NHS organisations to review their key employment cycle policies, practices and processes to identify if inequalities (listed above) exist, and gives them an opportunity to engage with disabled workers to put actions in place to address areas of inequality.

There are some specific issues that impact workers with disabilities and NHS organisations, these include:

- Significant under reporting of the numbers of staff who declare themselves as having a disability
- 15% difference between Electronic Staff Records (ESR) and Staff Survey declaration rates. ESR is the integrated Human Resources and Payroll system.
- Lack of representation of Disabled staff at senior levels
- Disabled staff consistently report:
  - higher levels of bullying and harassment
  - less satisfaction with appraisals and career
  - lack of development opportunities.

Through this programme and with annual reporting it is hoped that NHS Organisations will see many benefits including, continuous improvement for workers with a disability, better understanding of the needs of workers with a disability, improved data (declaration rates), improvements to the culture, improved employment and retention.



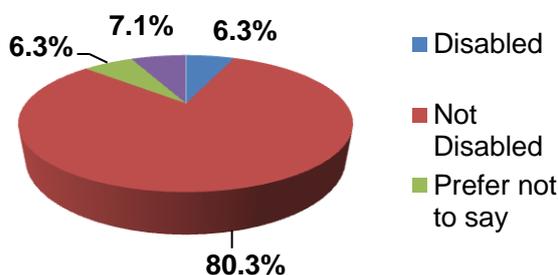
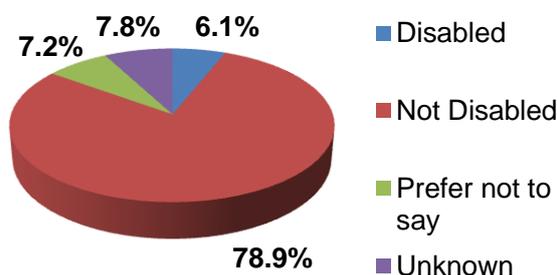
## Background Information

### 1) Total number of staff:

2019	2020
8487	8598

Proportion of staff with a disability employed within this organisation at the date of this report:

	2019		2020	
	Headcount	% of Staff	Headcount	% of Staff
<b>Disabled</b>	514	6.1%	541	6.3%
<b>Not Disabled</b>	6700	78.9%	6902	80.3%
<b>Prefer not to say</b>	608	7.2%	543	6.3%
<b>Unknown</b>	665	7.8%	612	7.1%
<b>Total</b>	8487	100.0%	8598	100.0%



2019

2020

### 2) Self-reporting

#### a) The proportion of total staff who have self-reported their disability status:

	2019		2020	
	Headcount	% of Staff	Headcount	% of Staff
<b>Disability Status Declared</b>	7214	85.0%	7443	86.6%
<b>Disability Status Not Declared</b>	1273	15.0%	1155	13.4%
<b>Total</b>	8487	100.0%	8598	100.0%

#### b) Have any steps been taken in the last reporting period to improve the level of self-reporting by disability?

We collect information relating to disability as part of the recruitment process.

The Trust has also taken steps to give staff more options and opportunities to declare their equality information. This includes setting up a new online declaration form, promoting Self-Service ESR and producing new information for staff to inform them about updating their equality information.

**c) Are any steps planned during the current reporting period to improve the level of self-reporting by disability?**

The Trust is planning to undertake an advertising campaign to encourage all staff to declare their equality information and promote the different methods they can use. There is work also underway that Occupational Health services can promote both support and improving declaration of staff that are disabled.

**3) Workforce Data**

**a) What period does the organisation's workforce data refer to?**

1<sup>st</sup> April 2019 to 31<sup>st</sup> March 2020.

**4) How is disability defined under the standard?**

The standard uses the definition of disability that can be found in the Equality Act 2010. Under the act a person is considered as having a disability if they have a physical or mental impairment that has a 'substantial' and 'long-term' negative effect on their ability to do normal daily activities.

**5) Population Demographic 2011 Census (Southeast England)**

	Census 2011
Activity limited a lot	6.9%
Activity limited a little*	8.8%

\* Within this section there will be some (not all) people who would meet the test under the Equality Act 2010 as being disabled, but it is impossible to say what proportion.



## Workforce Disability Equality Indicators

**For each of the indicators, the standard compares the metrics for staff with a disability and staff without a disability.**

**Metric 1 - Percentage of staff in AfC pay bands or medical and dental subgroups and very senior managers (VSM) (including executive board members) compared with the percentage of staff in the overall workforce.**

Cluster 1: AfC Band 1, 2, 3 and 4

Cluster 2: AfC Band 5, 6 and 7

Cluster 3: AfC Band 8a and 8b

Cluster 4: AfC Band 8c, 8d, 9 and VSM (including Executive Board members)

Cluster 5: Medical and Dental staff, Consultants

Cluster 6: Medical and Dental staff, Non consultant career grade

Cluster 7: Medical and Dental staff, Medical and dental trainee grades

**Note: Organisations should undertake this calculation separately for non-clinical and for clinical staff.**

	Non-Clinical					
	Disabled	Not Disabled	Not Known	Total	Disabled %	Not Disabled %
<b>Cluster 1</b>	193	1492	144	1829	10.6%	81.6%
<b>Cluster 2</b>	32	353	41	426	7.5%	82.9%
<b>Cluster 3</b>	10	102	8	120	8.3%	85.0%
<b>Cluster 4</b>	3	43	7	53	5.7%	81.1%
<b>Total</b>	<b>238</b>	<b>1990</b>	<b>200</b>	<b>2428</b>	<b>9.8%</b>	<b>82.0%</b>

In the table above in the column labelled 'Disabled %' the green cells demonstrates representation that is either equal or more than the general representation of disabled staff in the workforce (6.3%). The red cell shows an underrepresentation when compared to the general representation of disabled staff in the workforce.

Please note in the non-clinical group there is one person that is paid on a local agreement which falls outside of Agenda for Change. For the purposes of this comparison, this has been excluded from the above figures.

### What the data tells us:

- Non-clinical staff as a group generally have a good representation of disabled staff (9.8% representation compared to 6.3% of the overall workforce).
- Clusters 1-3 have a higher than expected representation of disabled staff when comparing to the overall workforce.
- Cluster 4 has a lower than expected representation of disabled staff when comparing to the overall workforce

	Clinical					
	Disabled	Not Disabled	Not Known	Total	Disabled %	Not Disabled %
Cluster 1	78	1109	159	1346	5.8%	82.4%
Cluster 2	166	2661	460	3287	5.1%	81.0%
Cluster 3	18	200	28	246	7.3%	81.3%
Cluster 4	0	20	11	31	0.0%	64.5%
Cluster 5	6	343	127	476	1.3%	72.1%
Cluster 6	1	34	22	57	1.8%	59.6%
Cluster 7	34	544	148	726	4.7%	74.9%
<b>Total</b>	<b>303</b>	<b>4911</b>	<b>955</b>	<b>6169</b>	<b>4.9%</b>	<b>79.6%</b>

In the table above in the column labelled 'Disabled %' the green cells demonstrates representation that is either equal or more than the general representation of disabled staff in the workforce (6.3%). The red cell shows an underrepresentation when compared to the general representation of disabled staff in the workforce.

### What the data tells us:

- Clinical staff as a group have a lower than expected representation of disabled staff (4.9%) when compared to the overall workforce (6.3%).
- There is a higher than expected representation of disabled staff in cluster 3 when compared to the overall workforce.
- There are no very senior managers (cluster 4) that have declared that they are disabled.
- In all other non-medical roles there is a lower than expected representation of disabled staff when compared to the overall workforce.
- In all medical roles there is a lower than expected representation of disabled staff than compared to the overall workforce.
  - The representation of disabled decreases with increased seniority of role.
  - A high proportion of medical staff have not declared their disability status.

**Metric 2 - Relative likelihood of Disabled staff compared to non-disabled staff being appointed from shortlisting across all posts. This refers to both external and internal posts.**

	Applicants		Shortlisted		Appointed		Relative Likelihood of being appointed
	Number	%	Number	%	Number	%	
Disabled applicants	1106	5.3	583	4.8	33	5.1	0.057
Non-disabled applicants	19093	91.8	11389	93.6	534	82.3	0.047
Not Stated / Unknown	597	2.9	194	1.6	82	12.6	0.423
<b>Total</b>	<b>20796</b>	<b>100.0</b>	<b>12166</b>	<b>100.0</b>	<b>649</b>	<b>100.0</b>	

The likelihood of non-disabled candidates being appointed from shortlisting:  
 $534 / 11389 = 0.047$

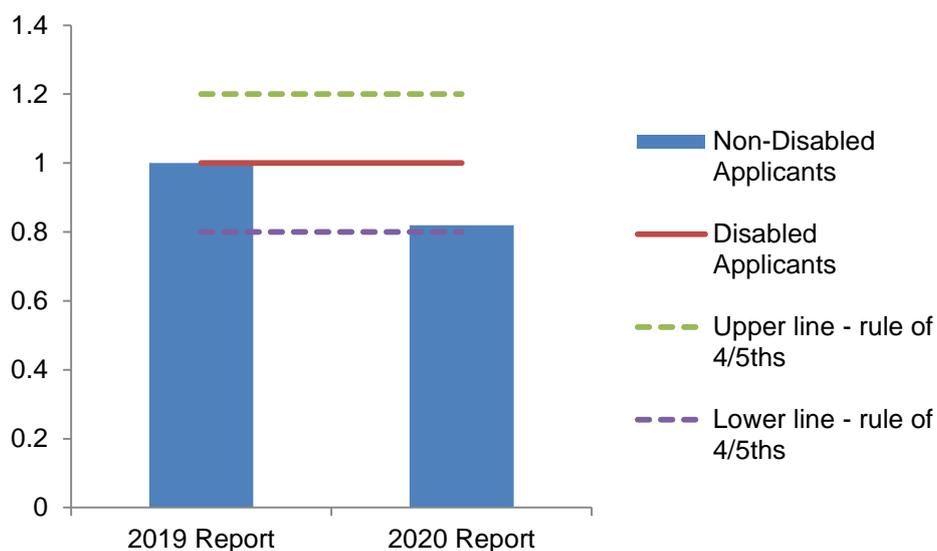
The likelihood of disabled candidates being appointed from shortlisting:  
 $33 / 583 = 0.057$

The relative likelihood of non-disabled candidates being appointed from shortlisting compared to disabled staff is:  $0.047$  (non-disabled candidates) /  $0.057$  (disabled candidates) = **0.82 times lower.**



*In this instance the data suggests disabled candidates are more likely to be appointed than non-disabled candidates.*

### Historical comparison



The above chart shows data from the 2019 and 2020 reports. The disabled applicants (red line) are at a constant of 1.00. In the 2019 report the relatively likelihood for non-disabled applicants was 1.00 which means that there was an equal chance of being appointed when compared to disabled applicants. In 2020 the likelihood is 0.82, which demonstrates that disabled applicants are more likely to be appointed than non-disabled applicants.

When applying the rule of 4/5ths, if the likelihood of non-disabled applicants is below 0.8 or above 1.2 it would indicate that there is a likely statistical adverse impact.

**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.**

**Note: This indicator will be based on data from a two year rolling average of the current year and the previous year**

	Number of Capability Procedures	Number in Workforce	Relative Likelihood of entering procedure
<b>Disabled staff</b>	2	541	0.0037
<b>Non-disabled staff</b>	10	6902	0.0014
<b>Not known / unspecified</b>	1	1155	0.0004

The likelihood of non-disabled staff entering the formal capability process:  
 $10 / 6902 = 0.0014$

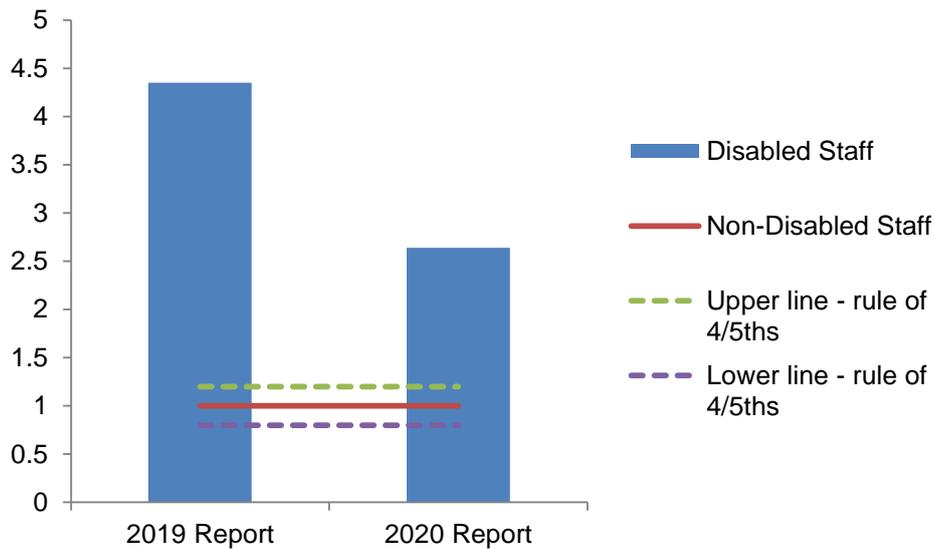
The likelihood of disabled staff entering the formal capability process:  
 $2 / 541 = 0.0037$

The relative likelihood of disabled staff entering the formal capability process compared to non-disabled staff is:  $0.0037$  (Disabled Staff) /  $0.0014$  (non-disabled Staff) = **2.64 times greater.**



*In this instance the data suggests that disabled staff members are more likely than non-disabled staff to enter into a formal capability process.*

## Historical Comparison



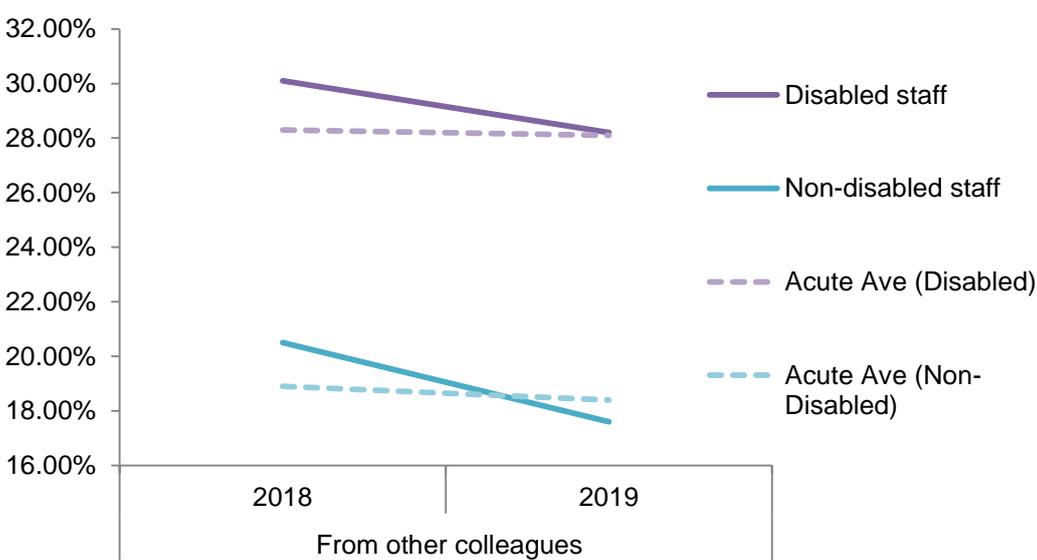
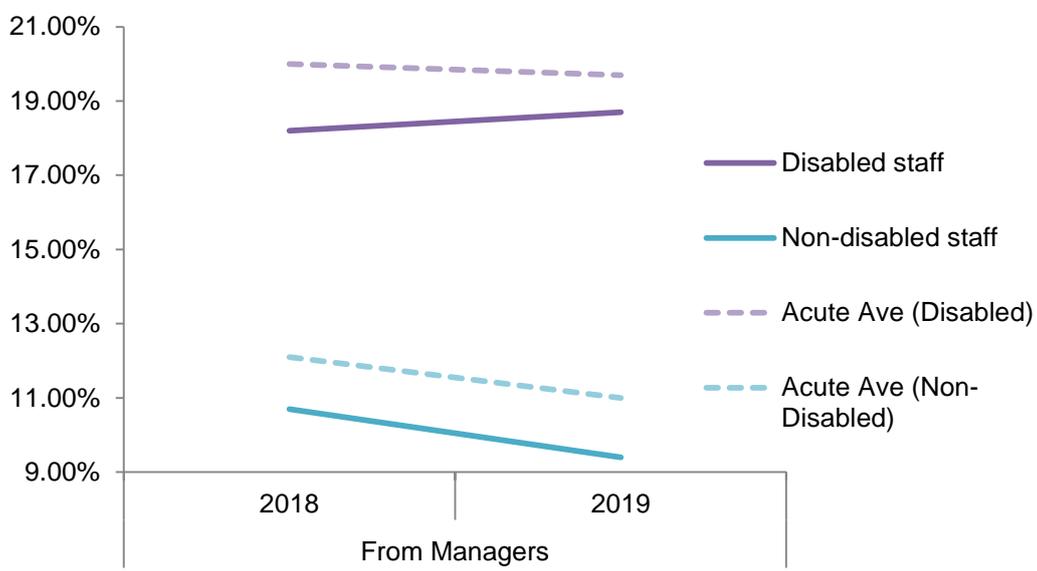
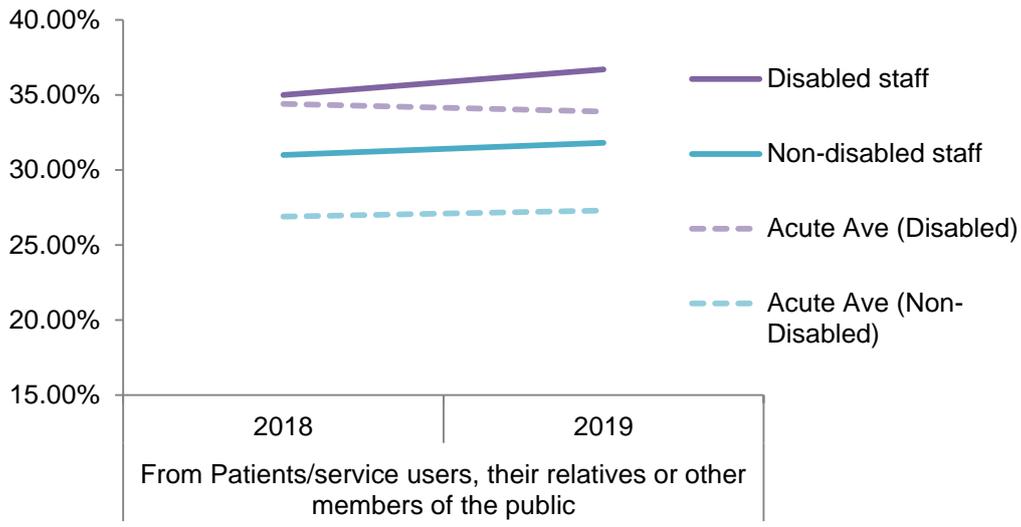
The above chart shows data from the 2019 and 2020 reports. The non-disabled staff (red line) are at a constant of 1.00. In the 2019 report the relatively likelihood for disabled applicants was 4.35 which means that there was a greater likelihood of entering the formal capability process when compared to non-disabled applicants. In 2020 the likelihood is 2.64, which demonstrates that disabled staff are more likely to enter into formal capability processes than non-disabled staff.

When applying the rule of 4/5ths, if the likelihood of disabled staff is below 0.8 or above 1.2 it would indicate that there is a likely statistical adverse impact.

### Metric 4a - Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from:

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

	Patients/service users, their relatives or other members of the public		Managers		Other colleagues	
	2018	2019	2018	2019	2018	2019
Disabled staff	35.0%	36.7%	18.2%	18.7%	30.1%	28.2%
Non-disabled staff	31.0%	31.8%	10.7%	9.4%	20.5%	17.6%
Acute Average (Disabled)	34.4%	33.9%	20.0%	19.7%	28.3%	28.1%
Acute Average (Non-Disabled)	26.9%	27.3%	12.1%	11.0%	18.9%	18.4%

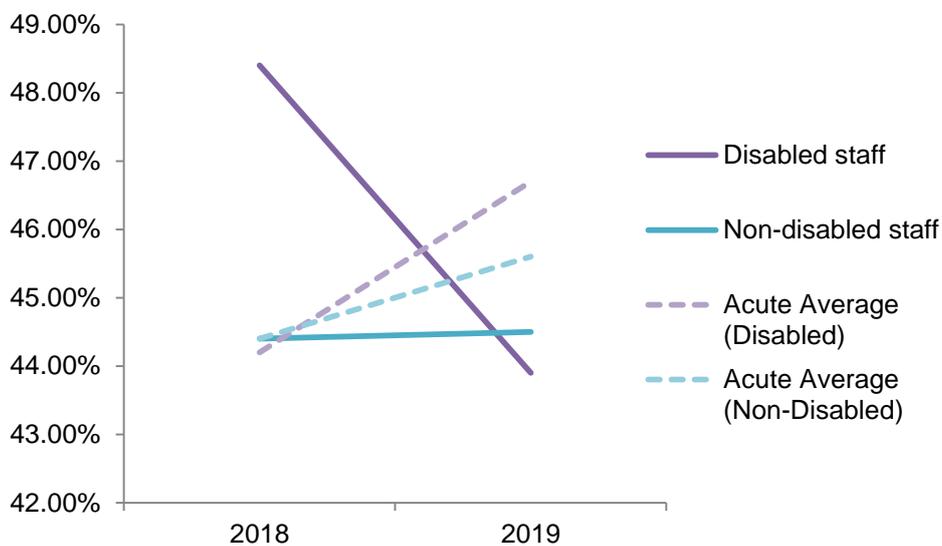


## What the data tells us:

- In all cases, disabled staff experienced more harassment, bullying and abuse from all groups than non-disabled staff.
- Since 2018, there has been an increase (+1.7%) in the number of disabled staff experiencing from harassment, bullying and abuse from patients, service users, etc. This is above the national average for acute trusts (33.9%). Disabled staff are 1.2 times more likely than non-disabled staff to experience this type of behaviour from this group.
- Since 2018, there has been a small increase (+0.5%) in the number of disabled staff experiencing from harassment, bullying and abuse from their manager. This is below the national average for acute trusts (19.7%). Disabled staff are 2.0 times more likely than non-disabled staff to experience this type of behaviour from this group.
- Since 2018, there has been a decrease (-1.9%) in the number of disabled staff experiencing from harassment, bullying and abuse from other colleagues. This is in line the national average for acute trusts (28.1%). Disabled staff are 1.6 times more likely than non-disabled staff to experience this type of behaviour from this group.

**Metric 4b - 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.**

	2018	2019
<b>Disabled staff</b>	48.4%	43.9%
<b>Non-disabled staff</b>	44.4%	44.5%
<b>Acute Average (Disabled)</b>	44.2%	46.7%
<b>Acute Average (Non-Disabled)</b>	44.4%	45.6%

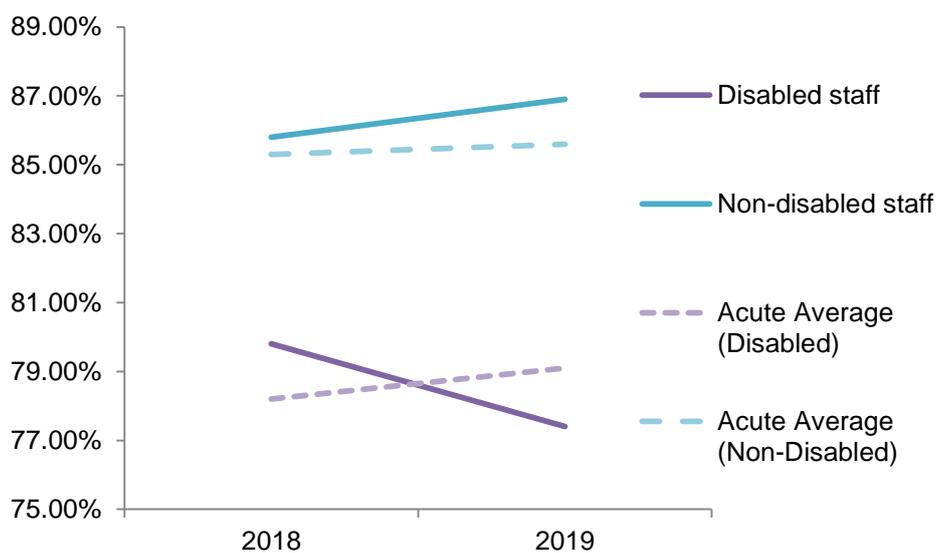


**What the data tells us:**

- Disabled staff are slightly less likely to report incidents of harassment, bullying or abuse at work, than non-disabled staff
- Fewer disabled staff (-4.5%) stated that they would report incidents compared to the previous year. The percentage of disabled staff is lower than the national average (46.7%).
- Statistically, the difference between disabled and non-disabled staff is not significantly – they have a likelihood of 1.0 when comparing both groups in the recent staff survey.

**Metric 5 - Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.**

	2018	2019
Disabled staff	79.8%	77.4%
Non-disabled staff	85.8%	86.9%
Acute Average (Disabled)	78.2%	79.1%
Acute Average (Non-Disabled)	85.3%	85.6%

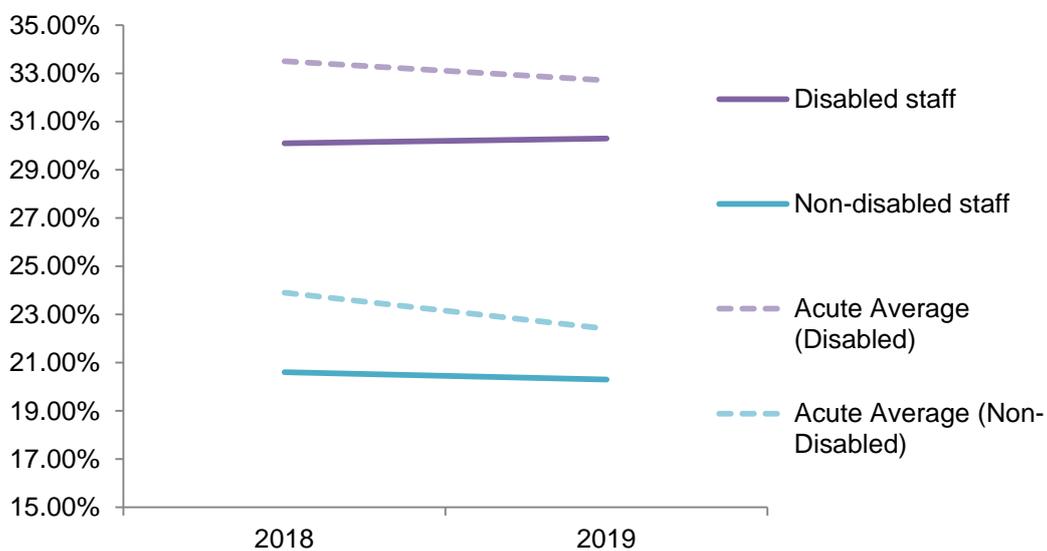


**What the data tells us:**

- Fewer disabled staff feel that the Trust provides equal opportunities for career progression or promotion than non-disabled staff.
- Compared to last year there was a decrease (-2.4%) in the number of disabled staff that felt the Trust provides equal opportunities for career progression or promotion, this is slightly lower than the national average for acute trusts (79.1%).
- As a likelihood, disabled staff are 0.90 times as likely as non-disabled staff to feel that the Trust provides equal opportunities for career progression or promotion.

**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.**

	2018	2019
Disabled staff	30.1%	30.3%
Non-disabled staff	20.6%	20.3%
Acute Average (Disabled)	33.5%	32.7%
Acute Average (Non-Disabled)	23.9%	22.4%

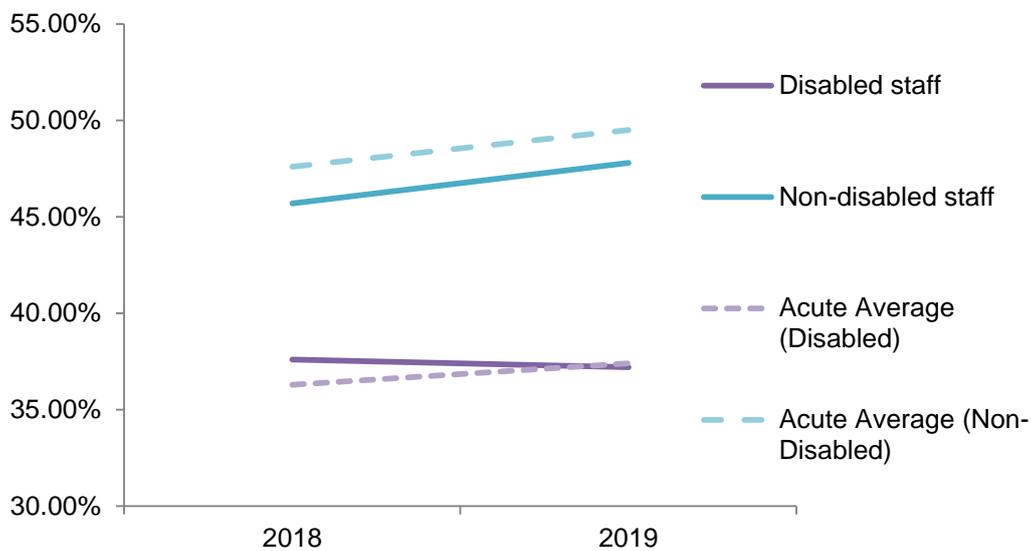


**What the data tells us:**

- More disabled staff generally have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties, when compared to non-disabled staff.
- Compared to last year there has been a marginal increase (+0.2%) of disabled that have felt pressure to attend work when not well enough. This is below the national average for acute trusts (32.7%).
- As a likelihood, disabled staff are 1.5 times more likely to feel pressure to attend work when not well enough, when compared to non-disabled staff.

**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.**

	2018	2019
Disabled staff	37.6%	37.2%
Non-disabled staff	45.7%	47.8%
Acute Average (Disabled)	36.3%	37.4%
Acute Average (Non-Disabled)	47.6%	49.5%

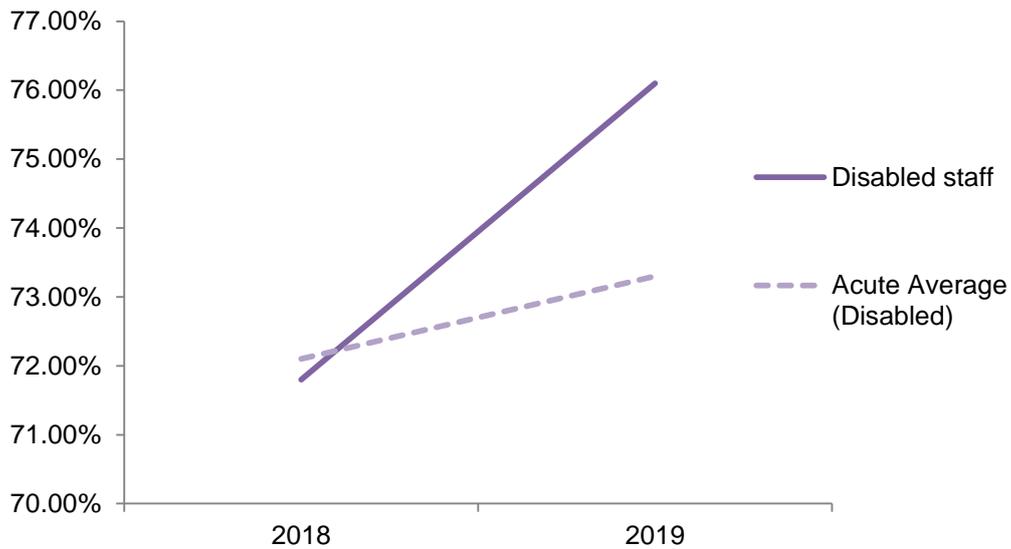


**What the data tells us:**

- Fewer disabled staff feel that they are satisfied with the extent to which their organisation values their work than non-disabled staff.
- Compared to last year there has been a marginal decrease (-0.4%) of disabled that have felt satisfied with the extent to which their organisation values their work. This is in line the national average for acute trusts (37.4%).
- As a ratio, disabled staff are 0.8 times likely to have felt satisfied with the extent to which their organisation values their work, when compared to non-disabled staff.

**Metric 8 - Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work.**

	<b>2018</b>	<b>2019</b>
<b>Disabled staff</b>	71.8%	76.1%
<b>Acute Average (Disabled)</b>	72.1%	73.3%

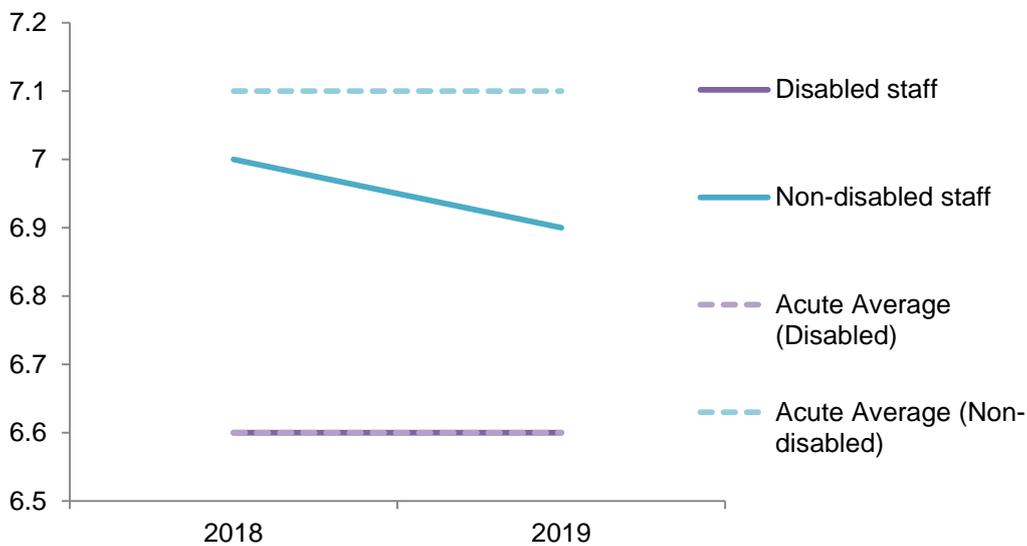


**What does the data tell us:**

- There has been an increase in staff (+4.3%) from last year that feel they have been provided with adequate reasonable adjustments
- The Trust score is above (+2.8%) the national average for acute Trusts.

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

	2018	2019
Disabled staff	6.6	6.6
Non-disabled staff	7.0	6.9
Acute Average (Disabled)	6.6	6.6
Acute Average (Non-disabled)	7.1	7.1



**Metric 9b - Has your trust taken action to facilitate the voices of Disabled staff in your organisation to be heard?**

**Yes** – In February 2019 the Trust signed of a Terms of Reference for the Disability Staff Network, from that point forward the network was formally recognised by the Trust. The aim of the network is to provide an avenue for staff to discuss disability related issues. The network reports to the Diversity Matters Steering Group, which is chaired by the Chief Executive and the Chief Workforce and Organisational Development Officer.

**Metric 10 - Percentage difference between the organisation's board voting membership and its organisation's overall workforce, disaggregated:**

(i) The organisation's Board executive membership and its overall workforce

	Overall Workforce		Executive Board Membership		% Difference
	Number in workforce	% in workforce	Number on board	% of board	
<b>Disabled</b>	541	6.3%	0	0.0%	-6.3%
<b>Non-disabled</b>	6902	80.3%	9	64.3%	-16.0%
<b>Not known</b>	1155	13.4%	5	35.7%	+22.3%
<b>Total</b>	8598	100.0%	14	100.0%	

**Are there any other factors or data which should be taken into consideration in assessing progress?**

This is the launch report for the Workforce Disability Equality Standard, which sets a benchmark to measuring progress.

**a. Any issues of completeness of data**

None

**b. Any matters relating to the reliability of comparisons with previous years**

None