

Workforce Disability Equality Standard

South East London Integrated Care Board

Equality, Diversity and Inclusion Team
2024 – 2025

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1. Introduction

- 1.1. The NHS Workforce Disability Equality Standard (WDES) enables NHS organisations to better understand the experiences of their disabled staff, supporting positive change for all staff by creating a more inclusive environment for disabled people working and seeking employment in South East London.
- 1.2. The WDES has ten indicators (metrics), which enables a comparison of the workplace and career experiences of disabled and non-disabled staff. The data for four metrics is sourced from workforce data, five metrics from the National Staff Survey and the data for the final metric comes from the board.
- 1.3. NHS organisations use the metrics data to develop and publish an action plan to ensure the continuous improvement of healthcare services and the wellbeing of both patients and staff. Research shows that a motivated, included and valued workforce helps to deliver high-quality patient care, increased patient satisfaction and improved patient safety.
- 1.4. Metrics are based on the data from the Workforce (Staff Data) system and the NHS Staff Survey. All data is anonymous.
- 1.5. The data utilised for the WRES is retrospective. This year's report is based on data from the financial year 2023/2024.

2. Summary of Findings

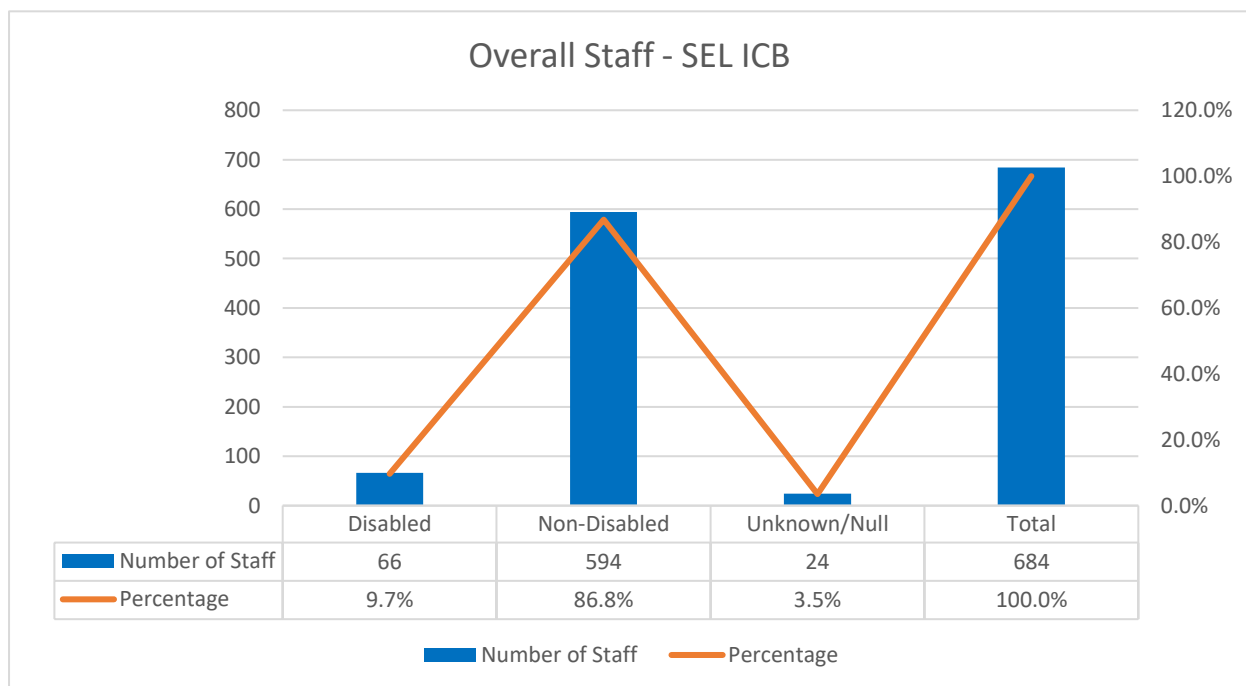
- 2.1. **Metric 1:** The workforce consists of 9.7% disabled staff and 86.8% non-disabled staff.
- 2.2. **Metric 2:** Non-disabled applicants are 0.82 times more likely to be appointed following shortlisting compared to disabled applicants.
- 2.3. **Metric 3:** No disabled staff have entered the formal capability process over the last 12 months.
- 2.4. **Metric 4a:** Disabled staff are 2.7% less likely to experience harassment, bullying or abuse from patients, relatives or the public compared to non-disabled staff.
- 2.5. **Metric 4b:** Disabled staff experienced significantly higher levels of harassment, bullying, or abuse from managers (25.3%) compared to non-disabled staff (9.7%).
- 2.6. **Metric 4c:** Disabled staff experience significantly higher levels of harassment, bullying, or abuse from other colleagues (23.5%) compared to non-disabled staff (12.2%).
- 2.7. **Metric 4d:** A significantly lower percentage of disabled staff (31.4%) reported harassment, bullying, or abuse compared to non-disabled staff (38.5%).



- 2.8. Metric 5:** A lower percentage of disabled staff (42.9%) believe that the organisation provides equal opportunities for career progression or promotion compared to non-disabled staff (54.4%).
- 2.9. Metric 6:** More disabled staff (30.2%) felt pressured to come to work despite feeling unwell compared to non-disabled staff (14%).
- 2.10. Metric 7:** Disabled staff (33%) felt least valued compared to non-disabled staff (50.6%).
- 2.11. Metric 8:** Only 56.5% of disabled staff have advised that reasonable adjustments were made to help them carry out their role.
- 2.12. Metric 9:** Disabled staff have a lower engagement score (6) compared to non-disabled staff (6.8).
- 2.13. Metric 10:** The difference between disabled Board members and disabled staff (workforce) is (minus) -1%.

3. Metric 1: Percentage of staff in each of the Agenda for Change Bands 1-9 OR Medical and Dental subgroups, and VSM – compared with the percentage of staff in the overall workforce.

3.1. Overview of SEL ICB workforce [Graph 1 & Table 1]:



- 3.2. Overview:** The overall workforce at SEL ICB is predominantly non-disabled (86.8%), with a low representation of disabled staff (9.7%). The unknown or null category represents 3.5% of the workforce indicating that the data is incomplete. This could be due to a variety of factors, such as staff not declaring.
- 3.3. Unknown:** While staff might not declare a disability to the organisation due to concerns about stigma, discrimination, or potential negative impacts on their career progression, it should also be considered that not knowing how to update this information on the staff system could have an impact.
- 3.4. Comparison to SEL community:** SEL ICB is not representative of the community it serves which has a disabled population of 14%.
- 3.5. Comparison to 2023:** The workforce has decreased from 794 to 684 employees, representing a 13.9% reduction in total staff. Despite a numerical decrease, the proportion of disabled staff has risen by 3.3%. It also has seen an increase in non-disabled staff by 2.9%. Unknown has reduced from 9.7% to 3.5%. It should be noted that due to the change in the workforce numbers, the number of non-disabled staff shows minus 72 people, however as a comparison to the current workforce is this much higher than disabled.
- 3.6. Overview of SEL ICB staff in non-clinical roles [Table 2]:**

AfC band clusters	No. of disabled staff	Percentage of disabled staff	No. of non-disabled staff	Percentage of non-disabled staff	No. of unknown staff	Percentage of unknown staff	Total
Cluster 1: <1 to 4	3	9.1%	30	90.9%	0	0.0%	33
Cluster 2: 5 to 7	28	13.3%	174	82.9%	8	3.8%	210
Cluster 3: 8a and 8b	17	10.6%	139	86.3%	5	3.1%	161
Cluster 4: 8c to VSM	9	6.6%	124	91.2%	3	2.2%	136
Other	1	33.3%	1	33.3%	1	33.3%	3
Total	58	10.7%	468	86.2%	17	3.1%	543

- 3.7. Non-clinical staff:** The non-clinical workforce at SEL ICB consists predominantly of non-disabled (86.2%) while disabled staff make up 10.7%. There are a larger number of disabled staff within bands 5-7 (28 staff) compared to any of the other bands. The numbers start decreasing significantly as you move onto higher bands, which suggests that disabled staff may be facing a glass ceiling effect between bands 5-7 onwards.
- 3.8.** It should be noted that those in the 'other' category are non-substantive employees.



3.9. Comparison to 2023: The total number of staff in a non-clinical role has increased by 15 people, which gives an increase of 2.8%.. The percentage and number of non-disabled staff within non-clinical roles has slightly decreased by 1.4% (11 people).

3.10. Note: It should be noted that the organisation has undergone a restructure and the total number of staff in non-clinical roles has gone from 547 to 543, which may slightly impact the percentages when comparing.

3.11. Overview of SEL ICB staff in clinical roles [Table 3]:

AfC band clusters	No. of disabled staff	Percentage of disabled staff	No. of non-disabled staff	Percentage of non-disabled staff	No. of unknown staff	Percentage of unknown staff	Total
Cluster 1: <1 to 4	0	0.0%	0	0.0%	0	0.0%	0
Cluster 2: 5 to 7	4	13.8%	24	82.8%	1	3.4%	29
Cluster 3: 8a and 8b	0	0.0%	55	93.2%	4	6.8%	59
Cluster 4: 8c to VSM	1	3.2%	28	90.3%	2	6.5%	31
Other	3	13.6%	19	86.4%	0	0.0%	22
Total	8	5.7%	126	89.4%	7	5.0%	141

3.12. Clinical staff: Only 5.7% (8) of staff in clinical roles have a disability compared to 89.4% (126) non-disabled staff. There are two clusters, Cluster 2 (13.8%) and Cluster 4 (3.2%), which show the highest number of disabled employees. At each level of the cluster, there can be seen large disparities in the number of disabled clinical staff against those without a disability.

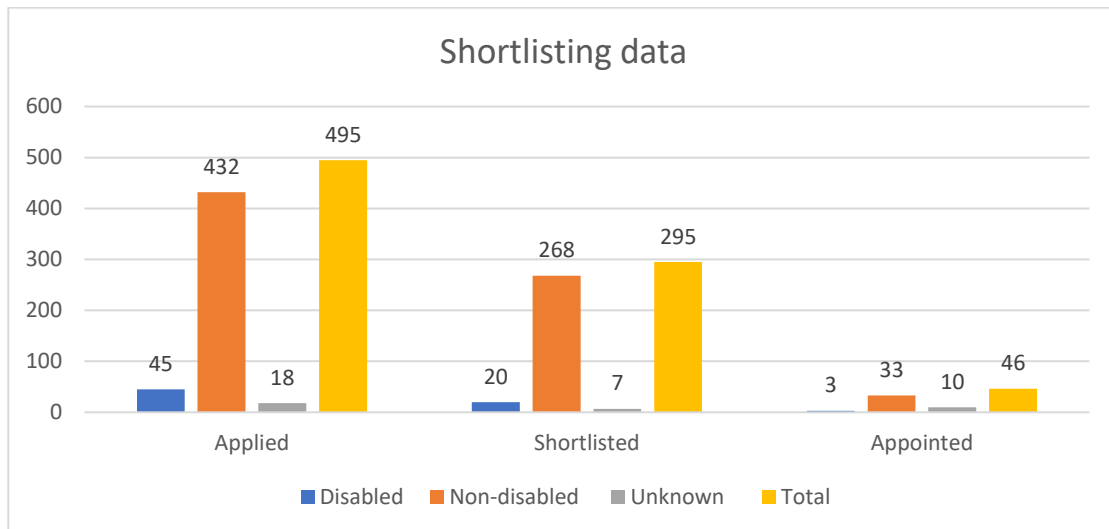
3.13. Comparison to 2023: The overall number of staff has decreased from 247 to 141 within clinical roles. This may be due to the restructure of the organisation, which is a decrease of 42.9% in the size. The percentage of disabled staff showed 3.2% and this year it shows 5.7%. This increase is due to the decrease of the staff employed by the organisation as the number of disabled employees has remained the same. Last year, disabled staff were disaggregated in Clusters 2,3 and 4 however this year it is primarily Clusters 2, 4 and 'other'.

3.14. The data does suggest potential barriers to progression for disabled clinical staff within SEL ICB, given the low overall percentage and significant presence in non-substantive roles. The distribution also indicates a notable disparity at senior levels.



4. Metric 2: Relative likelihood of staff being appointed from shortlisting.

4.1. Shortlisting data [Graph 2]:



4.2. Shortlisting Data [Table 4]:

Category	Applied	Applied percentage	Shortlisted	Shortlisted percentage	Appointed	Appointed Percentage
Disabled	45	9.1%	20	6.8%	3	6.5%
Non-disabled	432	87.3%	268	90.8%	33	71.7%
Unknown	18	3.6%	7	2.4%	10	21.7%
Total	495	100.0%	295	100.0%	46	100.0%

4.3. Overview: From the shortlisted candidates, 71.7% of non-disabled applicants were appointed compared to only 6.5% of disabled applicants. This difference is statistically significant. However, it should be noted that only 9.1% of applications were from disabled individuals, compared to 87.3% from non-disabled individuals.

4.4. Likelihood: The data indicates that non-disabled applicants are 0.82 times more likely to be appointed after shortlisting, a decrease from last year's figure of 0.88 times.

4.5. Comparison to 2023: The number of disabled applicants has decreased from last year; there were 43 shortlisted disabled candidates last year but only 20 this year. Similarly, the number of appointments for disabled candidates dropped from 12 last year to 3 this year. There was also a decline in shortlisted non-disabled applicants, from 393 last year to 268 this year, with appointments falling



from 96 to 33. It is important to note that the organisation underwent a restructure, which reduced the number of available positions.

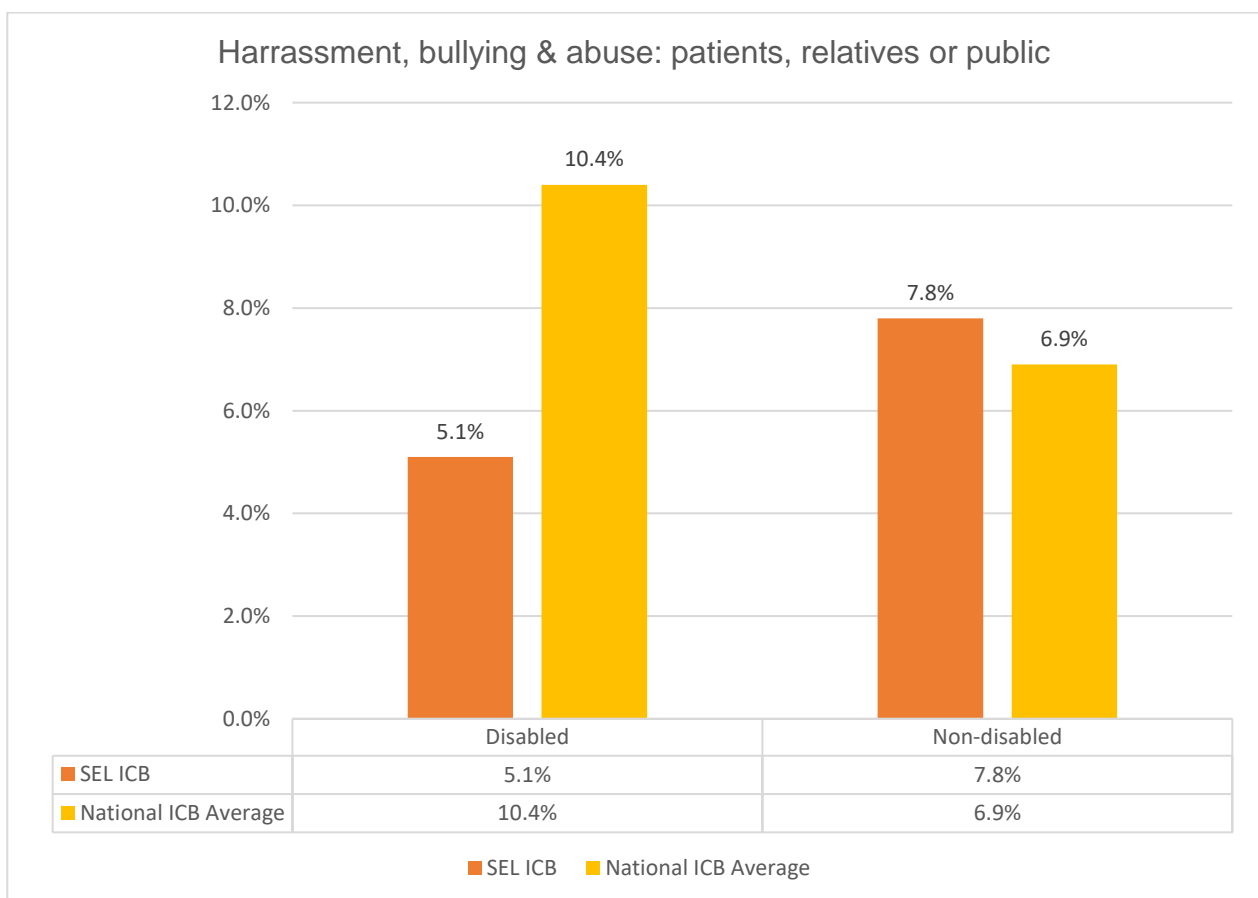
4.6. Note: It should be noted that a relative likelihood of 1 indicates that there is no difference: i.e. non-disabled applicants are equally as likely of being appointed from shortlisting as disabled applicants

5. Metric 3: Relative likelihood of staff entering the formal capability process.

5.1. No disabled staff have entered the formal capability process over the last 12 months.

6. Metric 4: Percentage of disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from:

6.1. Metric 4a: Percentage of staff experiencing harassment, bullying or abuse from patients/service users, their relatives or the public in the last 12 months [Graph 3]:



6.2. Overview: The data shows us that non-disabled staff are 2.7% more likely to experience harassment, bullying or abuse from patients, relatives or the public compared to disabled staff.



6.3. Comparison to 2023: The percentage for disabled staff has decreased from 6.2% to 5.1% and increased non-disabled staff from 5.6% to 7.8%. This shows us that there has been a change from 2022 to 2023.

6.4. Metric 4b: Percentage of staff experiencing harassment, bullying or abuse from managers in the last 12 months [Table 5]:

	SEL ICB	National average
Disabled	25.3%	13.5%
Non-disabled	9.7%	7.5%

6.5. Overview: This data indicates that disabled staff experience significantly higher levels of harassment, bullying, or abuse from managers (25.3%) compared to non-disabled staff (9.7%). This is 15.6% more than non-disabled staff.

6.6. Comparison to national average: It should be noted that the ICB's percentage is higher from the national average for both disabled and non-disabled however it is more significant with disabled staff by 11.8%.

6.7. Comparison to 2023: on the other hand, non-disabled staff, have seen a decrease from 10.7% to 9.7%.

6.8. Metric 4c: Percentage of staff experiencing harassment, bullying or abuse from other colleagues in the last 12 months [Table 6]:

	SEL ICB	National average
Disabled	23.5%	15.4%
Non-disabled	12.2%	9.6%

6.9. Overview: This data indicates that disabled staff experience significantly higher levels of harassment, bullying, or abuse from other colleagues (23.5%) compared to non-disabled staff (12.2%).

6.10. Comparison to national average: It should be noted that the ICB's percentage is higher from the national average for both disabled and non-disabled, however it is more significant for disabled staff by 8.1%.

6.11. Comparison to 2023: When compared to the results from last year, disabled staff have seen an increase from 20.6% to 23.5% and for non-disabled staff an increase from 11.9% to 12.2%.



6.12. Metric 4d: Percentage of staff saying that the last time they experienced harassment, bullying or abuse at work, they or a colleague report it [Table 7]:

	SEL ICB	National average
Disabled	31.4%	48.5%
Non-disabled	38.5%	43.6%

6.13. Overview: A significantly lower percentage of disabled staff (31.4%) reported any harassment, bullying, or abuse they experienced compared to non-disabled staff (38.5%).

6.14. Comparison to national average: It should be noted that the ICB's percentage is lower from the national average for both disabled (by 17.1%) and non-disabled (5.1%), which may be due to concerns about stigma, fear of retaliation, lack of confidence in the reporting process or even having experienced.

6.15. Comparison to 2023: When compared to last year, it is evident that the percentage of staff reporting (disabled) has significantly dropped by 13% (from 44.4%). There also has been a decrease for non-disabled staff by 7.7% (from 46.2%).

7. Metric 5: Percentage of staff believing that the ICS provides equal opportunities for career progression or promotion.

7.1. National Staff Survey Data [Table 8]:

	SEL ICB	National average
Disabled	42.9%	47.8%
Non-disabled	54.4%	52.7%

7.2. Overview: A lower percentage of disabled staff (42.9%) believe that the organisation provides equal opportunities for career progression or promotion compared to non-disabled staff (54.4%).

7.3. Comparison to national average: Compared to the national average, disabled staff scored significantly lower by 4.9%, highlighting potential concerns about systemic barriers or perceived inequities in advancement opportunities compared to non-disabled staff, who scored higher than the national average by 1.7%.

7.4. Comparison to 2023: Compared to last year, there was an increase in percentage of disabled staff of 3.3% (from 39.6%) and an increase for non-disabled staff of 1.5% (from 52.9%). This should not be seen as an indication that issues have been resolved, but rather as a sign of progress that highlights the need for initiatives to address remaining barriers.



8. Metric 6: Percentage of staff who have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties.

8.1. National Staff Survey Data [Table 9]:

	SEL ICB	National average
Disabled	30.2%	14.3%
Non-disabled	14%	9.4%

8.2. Overview: More disabled staff (30.2%) felt pressured to come to work despite not feeling well compared to non-disabled staff (14%). This is a significant difference of 16.2%.

8.3. Comparison to national average: Compared to the national average both disabled and non-disabled staff scored significantly higher, however the percentage for disabled staff is significantly higher by 15.9%. This could be attributed to challenges such as the masking of hidden disabilities, lack of understanding from a manager, stigma etc. This highlights that a significant amount of work is required in this area.

8.4. Comparison to 2023: Compared to last year, there is a significant increase of 7.7% in how many disabled staff felt pressured compared to non-disabled staff, which saw a decrease of 1.4%.

9. Metric 7: Percentage of staff saying that they are satisfied with the extent to which their organisation values their work.

9.1. National Staff Survey Data [Table 10]:

	SEL ICB	National average
Disabled	33%	38.9%
Non-disabled	50.6%	48.6%

9.2. Overview: Disabled staff scored lower (33%) compared to non-disabled staff (50.6%). This is a significant difference of 17.6%. This suggests a need for better recognition and support tailored for disabled employees.

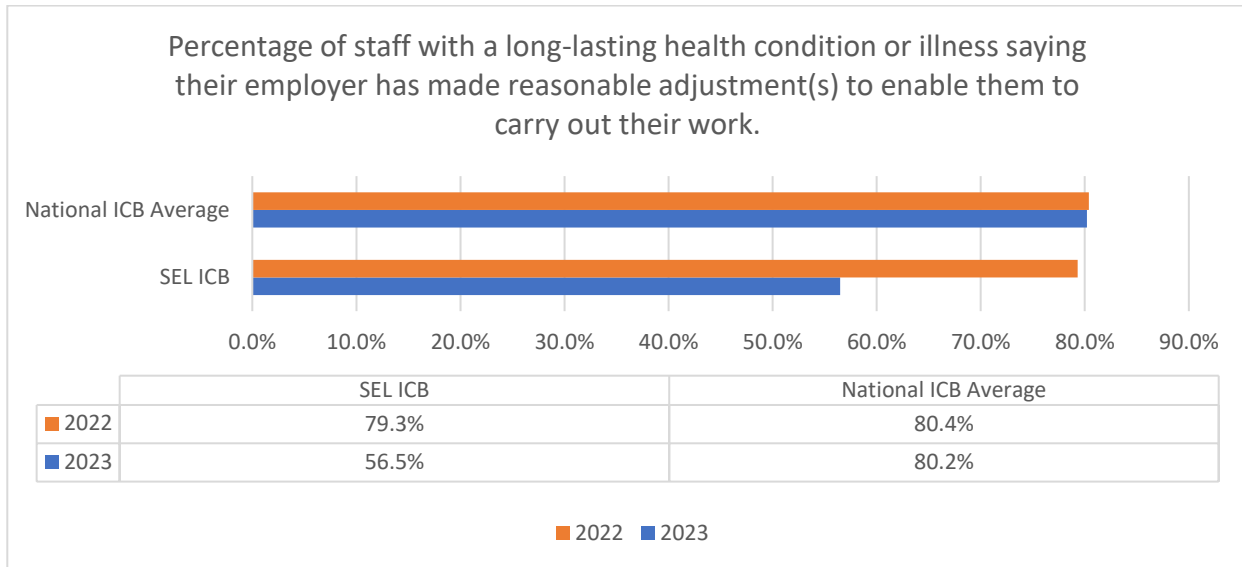
9.3. Comparison to national average: Compared to the national average, the ICB has scored significantly lower by 5.9% for disabled staff, however for non-disabled staff the ICB has scored higher by 2%.

9.4. Comparison to 2023: Compared to last year, the percentage of disabled staff feeling valued has decreased by 11.3% (from 44.3%). This is also true for non-disabled staff with a decreased of 2.5% (from 53.1%).



10. Metric 8: Percentage of staff with a long-lasting health condition or illness saying their employer has made reasonable adjustment(s) to enable them to carry out their work.

10.1. National Staff Survey Data [Graph 4 and Table 11]:



10.2. Overview: 56.5% of disabled staff have advised that reasonable adjustments, where made and helped them carry out their role.

10.3. Comparison to national average: Compared to the national average, the ICB percentage is significantly lower by 23.7%. This highlights that there is more work to be undertaken within this area to ensure staff have their needs met and reasonable adjustments made to carry out their role.

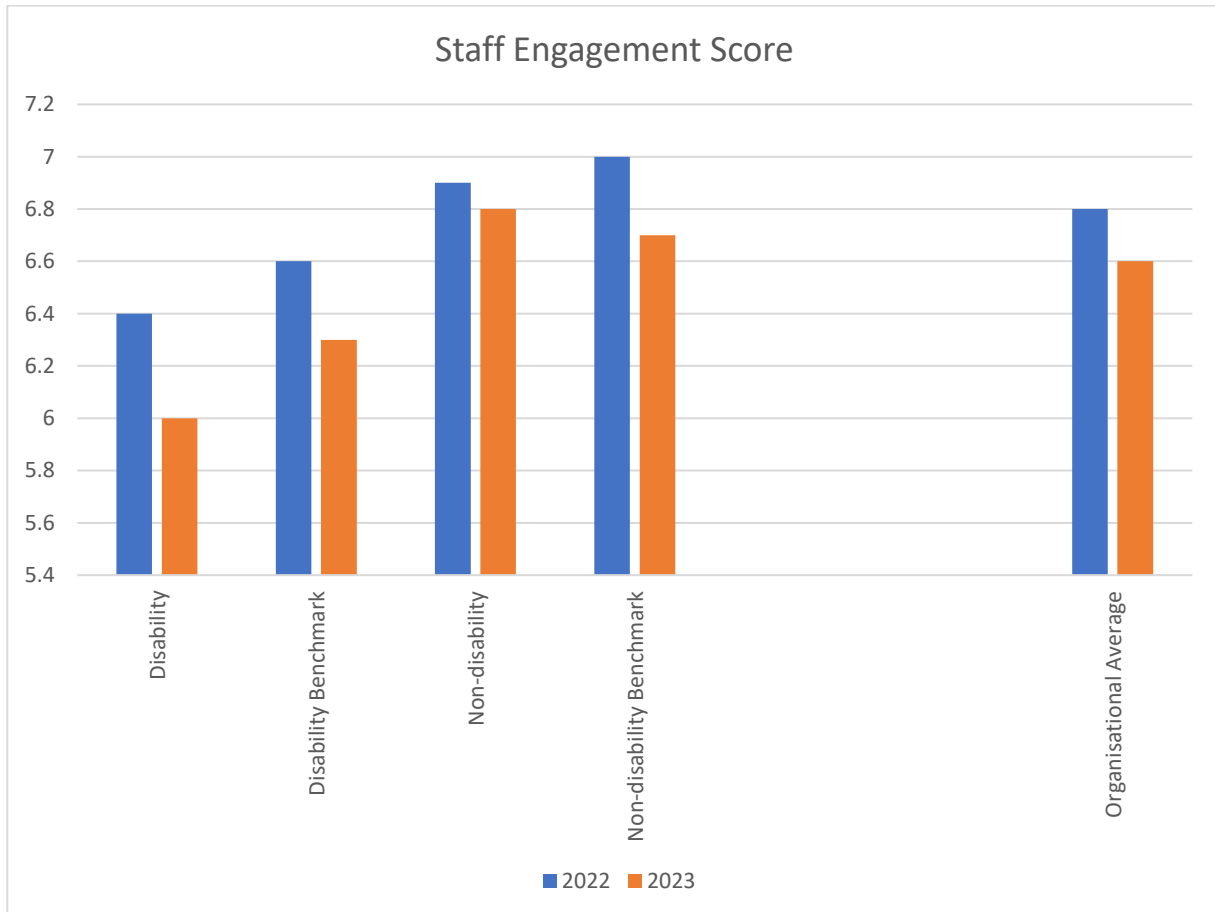
10.4. Comparison to 2023: Compared to last year’s percentage, there has been a significant decrease of 22.8% in how supported staff are feeling with regard to any adjustments that they may need to carry out their day-to-day role .

10.5. Note: It should be considered that respondents of the survey may interpret 'employer' to mean their direct line manager, implying that issues could be localised within specific departments or teams. Local area investigations may need to be undertaken to identify and address these gaps, ensuring that all staff receive the appropriate support and accommodations.



11. Metric 9: Staff engagement score for disabled and non-disabled staff.

11.1. National Staff Survey Data [Graph 5 and Table 12]:



	SEL ICB	National average
Organisation average	6.6	N/A
Disabled	6	6.3
Non-disabled	6.8	6.7

11.2. Overview: Disabled staff have a lower engagement score (6) compared to non-disabled staff (6.8). This score suggests that disabled staff have unique challenges that may be having an impact on engagement.

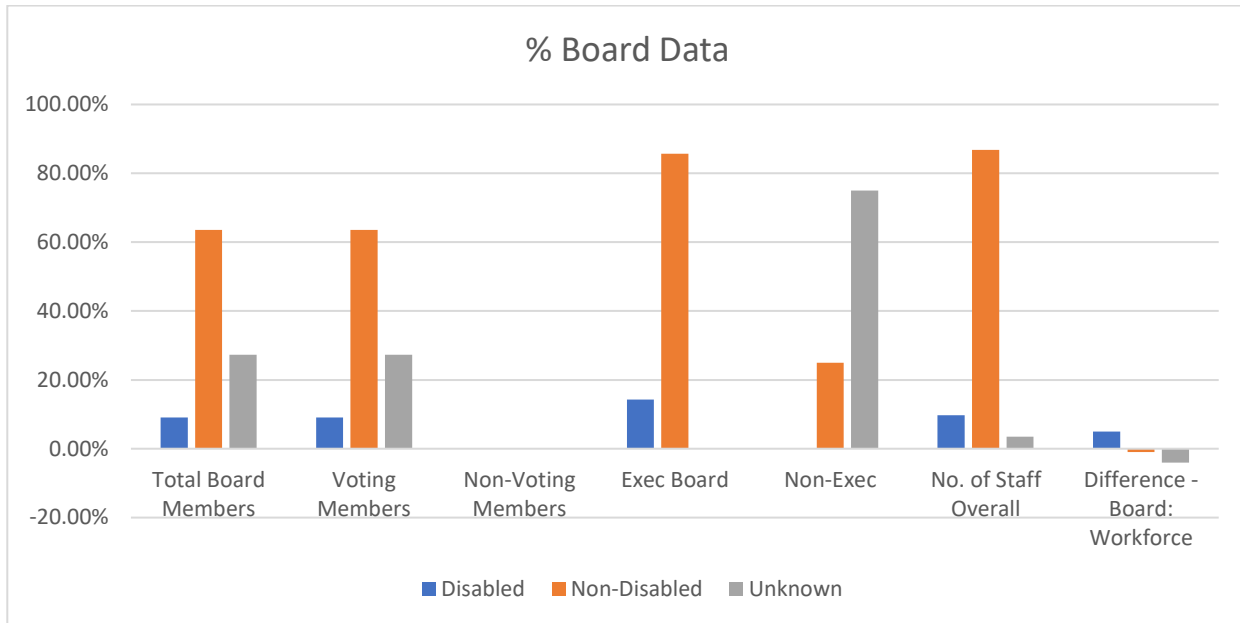
11.3. Comparison to national average: The score for disabled staff compared to the national average is also lower by 0.3 points.

11.4. Comparison to 2023: Last year the engagement score for disabled staff was 6.4, which means there has been a slight decrease in the engagement score since last year by 0.4 points.



12. Metric 10: Board Membership

12.1. Board Data [Graph 6 and Table 13]:



	Disabled	Non-disabled	Unknown	Total
Total Board members	1 (9.1%)	7 (63.6%)	3 (27.3%)	11
Voting Board members	1 (9.1%)	7 (63.6%)	3 (27.3%)	11
Non-voting Board members	0	0	0	0
Executive Directors	1 (14.3%)	6 (85.7%)	0	7
Non-Executive Members	0	1 (25%)	3 (75%)	4
No. of staff overall	66 (9.7%)	594 (86.8%)	24 (3.5%)	684
Difference between board & Workforce	-1%	-23%	24%	

12.2. Please note that the data above pertains to board members employed by the ICB, not the Partnership Board.

12.3. There are a total of 11 Board members: 9.1% are disabled, 63.6% are non-disabled and 27.2% are unknown. All board members are voting members.

12.4. There are 7 executive directors: 14.3% disabled and 85.7% non-disabled

12.5. The difference between disabled Board members and disabled staff (workforce) is (minus) -1%.



13. Updates on last year's actions

13.1. Last year's report outlined 22 actions, which were further broken down into 28 manageable steps, of which we have completed 13 steps. Due to changes in the organisation's structure, the remaining actions will be reviewed and incorporated into the new action plan if necessary.

14. Overview

14.1. Data from the 2023/2024 WDES report indicates that improvements are needed in the following areas, consistent with the findings of the previous report:

- Increasing disabled representation within higher Agenda for Change (AfC) and VSM bandings within clinical and non-clinical roles.
- Improving the recruitment process, which includes increasing numbers of applications from disabled applicants, shortlisting and appointment of disabled people.
- Recording of non-mandatory training and CPD.
- Reducing discrimination, bullying, harassment and abuse experienced by disabled staff.
- Providing equal opportunities for promotion and progression.
- Reducing the number of disabled staff feeling pressured to come into work despite being unwell.
- Improving how valued disabled staff feel (by the organisation).
- Improving reasonable adjustments.
- Disabled representation at Board and executive level.



15. Mitigating Actions

Metric	Theme	Action	Main lead	Review date
1 to 2	Recruitment and representation	Redesign the SEL ICB recruitment internet page layout to be more welcoming, user-friendly, and accessible, this will include: <ul style="list-style-type: none"> • A “What It Means to Work with Us” section highlighting values, mission, and staff experiences. • Videos showcasing staff at all levels within SEL ICB (i.e. regarding the reasonable adjustments we offer etc.) • Links to employee testimonials, benefits, and career growth opportunities. • Statement about why we are collecting equalities data/who can see it to encourage a higher disclosure rate. 	Recruitment	November 2025
		Develop an Offline, Accessible Application Form for example a fillable PDF application form that’s simple to read, complete, and submit.	Recruitment	November 2025
		Create Concise Job Descriptions by working with hiring managers to rewrite job descriptions to focus on essential duties, required qualifications, and key responsibilities	Recruitment	November 2025
		Develop and implement a process where applicants can request interview questions in advance.	Recruitment	November 2025
		Create a process for panel members’ short biographies and headshots which are shared with candidates once interviews have been scheduled.	Recruitment	November 2025
		Select and train inclusion representatives to participate in interview panels, ensuring diverse perspectives are represented.	Recruitment	November 2025
		Design additional recruitment training sessions and explore the potential for “Train the Trainer” recruitment workshops (through Enact) to equip SEL ICB staff with the skills needed to carry out a fair and equitable recruitment processes.	OD	November 2025
5	Equality Opportunities and progression	Review 2024 staff survey data to understand colleague experiences and integrate findings into the OD plan for FY 25/26, following which further actions will be developed and updated in the next report.	OD	November 2025



4a to 4d	Bullying and harassment	Revitalise the mediation service, including training more staff to become mediators	OD	November 2026
		Increase the number of trained Mental Health First Aiders.	OD	November 2025
		Design and deliver enhanced line management training.	OD	November 2025
		Refresh the appraisal process to ensure staff have an opportunity raise concerns.	OD	November 2025
		Create and implement a Sexual Safety Charter.	OD	November 2025
		Strengthen and actively promote the Speak Up process	HR	November 2025
6 to 9	Support for staff	Develop and Deliver training on workplace adjustments and the Access to Work process.	EDI	November 2025
		Develop awareness raising sessions, through ad hoc events or the Equalities Forum	EDI	November 2025
		Develop and implement a formal workplace adjustments policy.	HR	November 2025
		Relaunch the Sunflower Lanyard scheme and promote through the Age & Ability staff network.	OD	November 2025
		Advertise ICS leadership training for SEL ICB staff.	OD	November 2025
		Create a rewards and recognition program to help staff feel valued.	OD	November 2026
		Participate in the development of the ICS conference and awards session.	EDI	March 2025
		Provide managers with templates to recognise colleagues' contributions.	OD	November 2026
5	Recording non-mandatory training	The training request form will be digitised, with mandatory fields for demographic and diversity data to ensure accurate information capture.	OD	December 2024

