

Agenda Item No				
Meeting	Board of Directors			
Date	September 2018			
Title	Workforce Race Equality Standard 2018 (WRES)			
Executive Summary	<p>1. Our commitment to ensuring Equality Diversity and Inclusion within our workforce is essential to the Trust to ensure we deliver safe, caring and excellent services in line with our Trust values.</p> <p>2. Implementing the Workforce Race Equality Standard is part of our commitment to meeting the Equality Delivery Standards, which is now a required component of the standard NHS contract.</p> <p>3. Colleagues will be aware that the main purpose of the WRES is to:</p> <ul style="list-style-type: none"> a. enable NHS organisations to review their performance against the nine WRES indicators b. produce action plans to close the gap in workforce experience between white and BAME (black and minority ethnic) staff <p>4. Whilst some improvement has been made in many of the WRES indicators a sharper focus is required on this important agenda.</p> <p>5. The WRES findings and associated actions will be published on the Trust website at the end of September, 2018.</p>			
Previously considered by	Not Applicable			
Next steps/future actions	Discuss	x	Receive	
	Approve	x	Note	X
	For Information		Confidential y/n	n

This Report Covers the following objectives(please tick relevant boxes)

Quality, Safety and Patient Experience	✓	To be well governed	✓
Valued Provider	✓	To be financially viable and sustainable	
Great place to work	✓	To be fit for the future	✓
Prepared by:	James Mawrey, Director of Workforce	Presented by:	James Mawrey, Director of Workforce

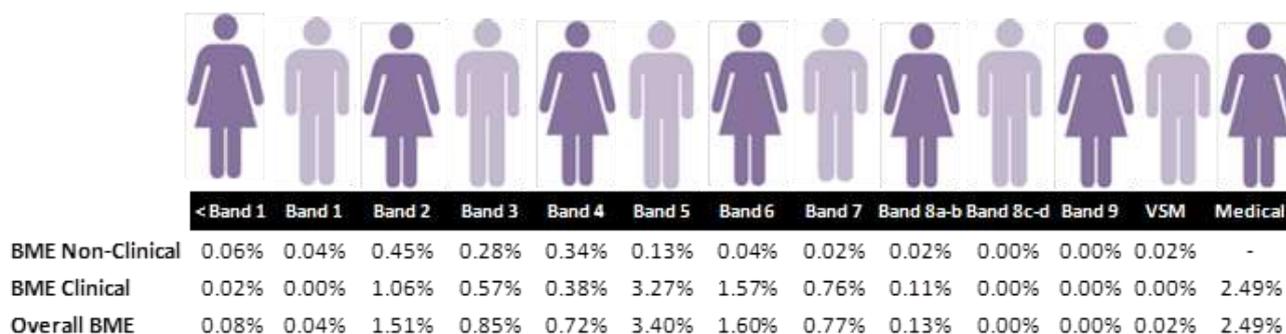
1. Introduction

- 1.1 The Workforce Race Equality Standard (WRES) provides a framework for NHS Trusts to report, demonstrate and monitor progress against a number of indicators of workforce equality, and to ensure that employees from black and ethnic minority (BAME) backgrounds receive fair treatment in the workplace and have equal access to career opportunities.
- 1.2 The requirement to have signed up to the Workforce Race Equality Standard (WRES) has been included in the NHS standard contract since 2016. It focuses on meeting requirements around ethnicity and hinges on nine Race Equality Indicators as part of the Equality Delivery System. These indicators are a combination of workforce data and results from the National Staff Survey.
- 1.3 Trusts are required to publish their data by the end of September, 2018.
- 1.4 This paper has been produced with the support from a number of BAME colleagues within the Trust.

2. Performance / Key Findings

2.1 The following improvements have been made since the last reporting year:-

- There has been an increase in the overall number of BAME staff employed - from 9.7% (2014/15) to 11.6% (2017/18). Deeper analysis shows that the majority of BAME staff are clinical and clustered at Band 5.



- There has been a reduction in the likelihood of BAME staff entering the disciplinary process (from 2.34) however, BAME staff are still 1.87 times more likely to be subject to formal process than white staff. A score of 1.0 indicates equity. A score of greater than 1.0 for BME staff indicates they are more likely to be subject to formal process.
- The relative likelihood of White staff being appointed from interview is 1.4, up from 1.37 in 2016/17. Whilst this compares against the national picture of 1.6, there remains scope for improvement. A score of 1.0 indicates equity. A score greater than 1.0 shows an advantage to White staff.

- Board representation as a percentage of the overall workforce has improved over the last two years. However, similar to the NHS nationally, this relates to Non- Executive Director roles.
- 2.2 There has been no change in the levels of Bullying & Harassment reported from patients & relatives towards BAME staff. In the same reporting period there has unfortunately been an increase of more white staff reporting harassment from patients & relatives.
- 2.3 The following deteriorations have been made in WRES performance since the last reporting year:-
- There has been an increase in the number of staff from BAME background reporting that they personally experienced discrimination – up from 14% in 2016/2017 to 20% in 2017/2018 (5% for white staff in 2017/2018). As noted later in the report the Trust will develop a BAME Diversity Network who will be charged with specifically looking at the underlying reasons for this.
 - Confidence in equal opportunities for career progression and promotion has reduced amongst BAME staff from 88% (2016/2017) to 79% (2017/2018). 90% of White Staff believe that the Trust provides equality of opportunity. Whilst the Trust benchmarks better than the national average (50%) there is work that needs to be undertaken in this area to more deeply understand the reasons.

3. Actions to be taken

- 3.1 The data indicates an improvement in some areas for BAME staff. However, there is still a need to further develop in some areas, and therefore the WRES action plan will be revitalised in order to address each of the WRES metrics with a view to improve next year's results.
- 3.2 Whilst the full action plan will be monitored at the Workforce Assurance Committee the following themes will be the key priorities for action (non exhaustive):-

3.2.1 Workstream 1. Make recruitment fairer:

- Ensure job adverts and website clearly welcome applications from BAME people.
- Develop and train a designated BAME staff network in interviewing skills and unconscious bias. These Network members will then act as a guardian of a fair process by inputting into recruitment processes of band 7-9 job vacancies. In conjunction with the Workforce & Organisational Development team the BAME Network members will hold support sessions aimed at current BAME staff to help with the application form process and interviewing skills.
- Monitor recruiting panels and ensure that panel has had training in unconscious bias or anti discriminatory interviewing techniques.

How will this workstream be measured?

By improving equal opportunities for BAME applicants through recruitment process that show a direct impact on reducing WRES indicator 2 from 1.4 to 1.0, which means that BAME staff are as likely as White staff to be appointed following interview. (indicator 2).

3.2.2 Workstream 2. Workplace Experience:

- Review exit interviews and report regularly into Diversity Steering Group on reasons for staff leaving, highlighting numbers of leaving due to harassment or bullying
- Review Investigator training and amend as necessary to bring a strong focus on Equality and Diversity issues and remove unconscious bias.
- Ensure list of Investigating Officers (IO) is representative of the BAME population in the BFT workforce
- Introduce explicit step in the application of the formal case management process, for disciplinary and performance management cases, whether there is a need for participation of a member of the BAME staff network to as observers to the process. All BAME reported discrimination cases will have 100% evidence of actions and outcomes.
- A deeper analysis of the cultural issues facing BAME staff will be undertaken with a view to further considering HR Policies & Practices that can be refined / improved. For example how we can better support our staff during Ramadan.

How will this workstream be measured?

By improving the workplace experience of our BAME staff by decreasing the level of discrimination against BME staff from 20% to 14%, the same level reported as at 2016/17. (Indicator 8).

3.2.3 Workstream 3. Support and enable career development:

- Devise training packages in interview skills and application writing, this training to be offered centrally and via the BAME staff network.
- Develop coaching and mentoring training to enable colleagues and BAME Staff Network members to act as internal coaches and mentors.
- Ensure there is a mechanism in the appraisal system to audit career progression plans for BAME staff.
- The Trust will actively encourage attendance on the NHS Leadership Academy programme named 'The Stepping Up programme', which is a leadership development programme for black, Asian and minority ethnic (BAME) colleagues in bands 5 - 7 (or equivalent) roles, who work within healthcare (the NHS or an organisation providing NHS care). The programme is designed to bridge the gap between where applicants are and where they need to be, to progress into more senior roles.

How will this workstream be measured?

By increasing the % of BAME staff who believe there are equal opportunities for career progression or promotion from 79% to 90%, the same as that reported for White staff. (Indicator 7)

3.3 Pivotal to the above workstreams will be the development of the BAME network. Members of this network will sponsor the BAME staff voice and ensure it is heard and acted upon. A number of colleagues have already expressed their support to becoming members of the BAME network.

3.4 The WRES action plan will be regularly monitored by the Equality and Diversity Steering Group and the Workforce Operational Committee. The Workforce Assurance Committee will provide oversight and reporting to the Board via the Chair report. The WRES data and action plan will be published on the NHS England WRES portal and the Trust's website.

4. Recommendations

4.1 The Trust Board is asked to:

4.1.2 Note the details of the Report.

4.1.3 Note the actions that will be taken to improve performance against key WRES Indicators. The Trust Board will be updated on the progress being made via the Workforce Assurance Committee Chair's report.

4.1.4 Highlight any specific additional assurance / workforce information required.

APPENDIX 1 – KEY FINDINGS AGAINST WRES INDICATORS 2018

WRES Indicator*		2014/15	2015/16	2016/17	2017/18	Analysis
	Total number of staff	5250	5356	5482	5298	6.19% of the workforce have chosen not to declare their ethnicity. However, with 93.81% of staff self-reporting it is a strong indicator. The proportion of BME staff working at the Trust has increased incrementally since the introduction of the WRES in 2015.
	Proportion of BAME staff employed	9.7%	10.66%	10.96%	11.61%	
	The proportion staff who have self-reported their ethnicity	94.7%		93.63%	93.81%	
1	Percentage of staff in each of the AfC Bands 1-9 and VSM (including executive Board members) compared with the percentage of staff in the overall workforce.	Details shown within report table				Analysis of the Trust workforce breakdown shows a gap between white staff and BAME staff ; with very few employees holding senior management positions in non-clinical roles, it is slightly more positive within the Trusts clinical workforce from a BAME background.
2	Relative likelihood of staff being appointed from shortlisting across all posts.	1.08	0.96	1.37	1.40	This indicator shows that white applicants are 1.40 times more likely to be appointed from shortlisting than BAME applicants.
3	Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation. This indicator will be based on data from a two year rolling average of the current year and the previous year.	1.81	1.94	2.34	1.87	This indicator demonstrates that BAME staff are 1.87 times more likely to enter a formal disciplinary process than white staff. There has been a significant improvement with this indicator over last 12 months which is encouraging and a positive indicator that some of the case management controls put in place over this period has had an impact. However further work is required to eradicate the gap between BAME and white staff.
4	Relative likelihood of staff accessing non-mandatory training and CPD.	0.91	0.96	0.97	0.95	This indicator shows that BAME staff and white staff have equal access to non-mandatory training and CPD.
5	KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.	White: 28% BAME: 25%	White: 31% BAME: 39%	White: 27% BAME: 20%	White: 27% BAME: 20%	BAME staff for the last 3 reporting periods have reported lower levels of bullying and harassment from patients, relatives or the public.
6	KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.	White: 18% BAME: 26%	White: 21% BAME: 36%	White: 24% BAME: 27%	White: 19% BAME: 27%	BAME staff reporting higher levels of bullying and harassment from colleagues than white staff, has been consistently higher since the introduction of the WRES.
7	7 KF 21. Percentage believing that	White: 94%	White: 92%	White: 93%	White: 90%	79% of BAME staff believe that the Trust provides equal

	WRES Indicator*	2014/15	2015/16	2016/17	2017/18	Analysis
	trust provides equal opportunities for career progression or promotion.	BAME: 72%	BAME: 71%	BAME: 88%	BAME: 79%	opportunities for career progression compared to 90% of white staff.
8	8 Q17. In the last 12 months have you personally experienced discrimination at work from any of the following? - Manager/team leader or other colleagues	White: 4% BAME: 14%%	White: 5% BAME: 14%%	White: 6% BAME: 14%	White: 5% BAME: 20%	The number of BAME staff who have experienced discrimination within the workplace rose within the reporting period. Within every reporting period there have been a gap between white and BAME staff who report experiencing discrimination.
9	Percentage difference between the organisations' Board voting membership and its overall workforce	White: 100%	White: 100%	White: 17.3% BAME: -11%	White: 10.1% BAME: -3.9%	The Trust BAME representation at Board level has improved during the reporting period. In order for the Trust board to be aligned to the overall workforce, 2 of its 13 members would be from a BAME background.