

Workforce Race Equality Standard

Bolton NHS Foundation Trust 2022 Data Analysis Report

31 Mar 2022

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Introduction

- Fostering a culture of inclusion remains a critical priority for our organisation. An inclusive work environment provides a place where everyone feels welcome and can be the best version of themselves. This in turn enables our staff to thrive and deliver the best possible services and care to the people of Bolton.
- Nationally, it is known that colleagues from a Black, Asian and Minority Ethnic background have a poorer experience of working within the NHS. The past 2 years have further highlighted the health inequalities which exist and how COVID-19 has impacted people from these communities. Also the murder of George Floyd in 2020 continued to show that systemic racism exists in society.
- The importance of inclusion is embedded into the NHS People Plan and our Trust's Strategy 2019-2024. In addition, the Trust has articulated its' vision and priorities for improving EDI practice and health outcomes through its' new EDI Plan 2022-2026.
- Each year the Trust is required to publish Workforce Race Equality Standard (WRES) data.
- The WRES provides a framework for NHS organisations to report, demonstrate and monitor progress against a number of indicators of workforce equality, and to ensure that employees from BAME backgrounds receive fair treatment in the workplace and have equal access to career opportunities.
- 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 NHS national staff survey.
- The following information in the report details key findings from the data collated for 2021/2022, comparisons of data from previous years and actions that will be put in place to address the findings.

Key findings

Workforce Representation

The proportion of BME staff increased to **15.0%** in 2021/2022 compared with **14.10%** in 2020/2021. An increase of **0.9%**. However the highest proportion of BME staff are still represented at Band 5 (**24%**).

Recruitment

The relative likelihood of white applicants being appointed from shortlisting compared to BME applicants has increased by a relative likelihood of **0.22**.

Disciplinary Process

The relative likelihood of BME staff entering the formal disciplinary process has seen an increase of **0.07** in Apr 21 to Mar 22 and is now at a relative likelihood of **1.18. 43** white staff compared to **9.5** BME staff.

Harassment & Bullying

There has been an increase in the percentage of BME staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months from 23.9% to 27.7%.

Harassment & Bullying

There has been a slight decrease in the proportion of BME staff (27%) experiencing harassment, bullying or abuse from staff in the last 12 months. From 27% to 26.7%.

Career Progression

A significantly fewer proportion of BME staff believe there is equal opportunity in comparison to white staff, 47.4% to 62.3% respectively. This is a significant decrease in comparison to last year.

Discrimination

There has been an increase in the percentage of staff that have personally experienced discrimination at work from manager/team leader or other colleague.

Board Representation

The percentage of BME board members has increased slightly but there is a still significant difference in comparison to white board members.

Key findings

WRES indicator		2017	2018	2019	2020	2021	2022	Difference between 2021 & 2022	
1	Percentage of BME staff	Overall	11.00%	11.60%	12.40%	12.90%	14.10%	15.00%	0.9% ↑
		VSM	0.00%	4.80%	6.30%	8.30%	0.00%	0.00%	0% ↔
2	Relative likelihood of white applicants being appointed from shortlisting compared to BME applicants	1.37	1.4	1.53	1.3	0.62	0.84	0.22 ↓	
3	Relative likelihood of staff entering the formal disciplinary process	2.34	1.87	1.59	1.64	0.93	1	0.07 ↓	
4	Relative likelihood of white staff accessing non-mandatory training and CPD compared to BME staff	0.97	0.95	0.91	0.9	0.99	0.99	0 ↔	
5	Percentage of BME staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months	BME	26.70%	20.00%	32.00%	28.80%	23.90%	27.70%	3.8% ↓
		White	26.80%	27.10%	31.00%	21.90%	25.70%	26.50%	0.8% ↓
6	Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months	BME	26.80%	20.00%	29.00%	25.00%	27.00%	26.70%	-0.3% ↑
		White	23.90%	27.10%	16.00%	23.60%	19.80%	20.50%	0.7% ↓
7	Percentage of staff believing that the Trust provides equal opportunities for career progression or promotion	BME	87.90%	79.20%	75.00%	67.50%	74.80%	47.40%	-27.4% ↓
		White	92.70%	90.00%	90.00%	86.50%	90.10%	62.30%	-27.8% ↓
8	Percentage of staff personally experienced discrimination at work from manager/team leader or other colleague	BME	14.00%	20.00%	18.00%	21.20%	15.30%	16.30%	1% ↓
		White	6.10%	4.53%	5.00%	5.30%	5.30%	4.60%	-0.7% ↑
9	BME board membership	0.00%	7.70%	6.70%	6.70%	8.30%	15.40%	7.1% ↑	

WRES indicator 1

Key supportive data

Table 1

Staff in Bolton FT by ethnicity: 2017 – 2022 as at 31 March 2022

The overall headcount for the Trust is **5910**. This has increased between 2021 and 2022 with the number of BME staff declaring as BME increasing to **889**, an additional **69** people, which is **0.9** percent. There has also been a reduction in the proportion of staff for whom ethnicity is unknown. There has been an emphasis on the updating of ethnicity information during the pandemic as this has been prioritised to inform accurate risk assessments in support of staff.

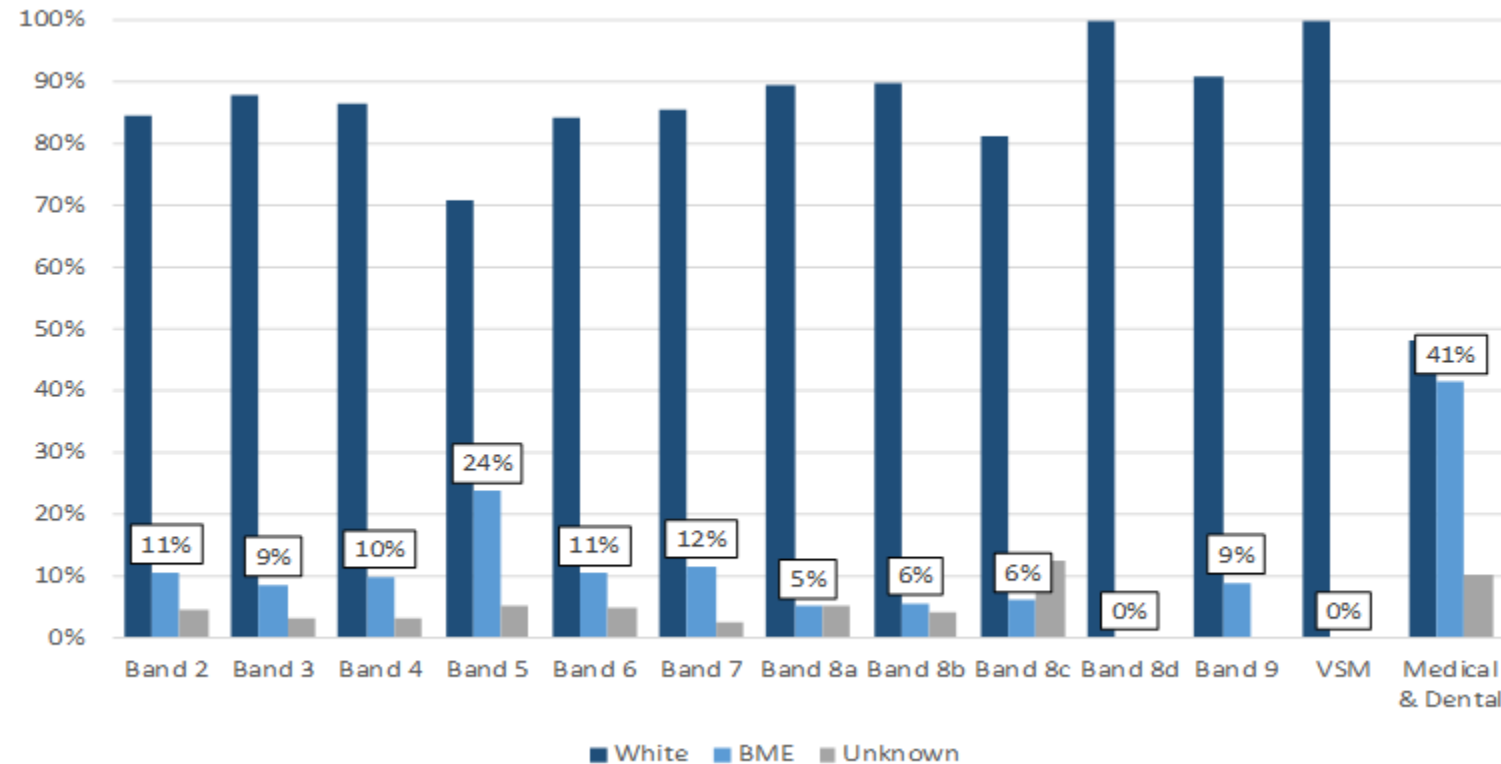
Year	Headcount			Percentage		
	White	BME	Unknown	White	BME	Unknown
2017	4532	601	349	82.7%	11.0%	6.4%
2018	4355	615	328	82.2%	11.6%	6.2%
2019	4453	679	325	81.6%	12.4%	6.0%
2020	4554	723	334	81.2%	12.9%	6.0%
2021	4686	820	317	80.5%	14.1%	5.4%
2022	4730	889	291	80.0%	15.0%	4.9%

WRES indicator 1

Key supportive data

Chart 1

Staff in Bolton FT by ethnicity: 2017 - 2022



The largest proportion of BME staff (**24%**) are still clustered at Band 5 as per last year.

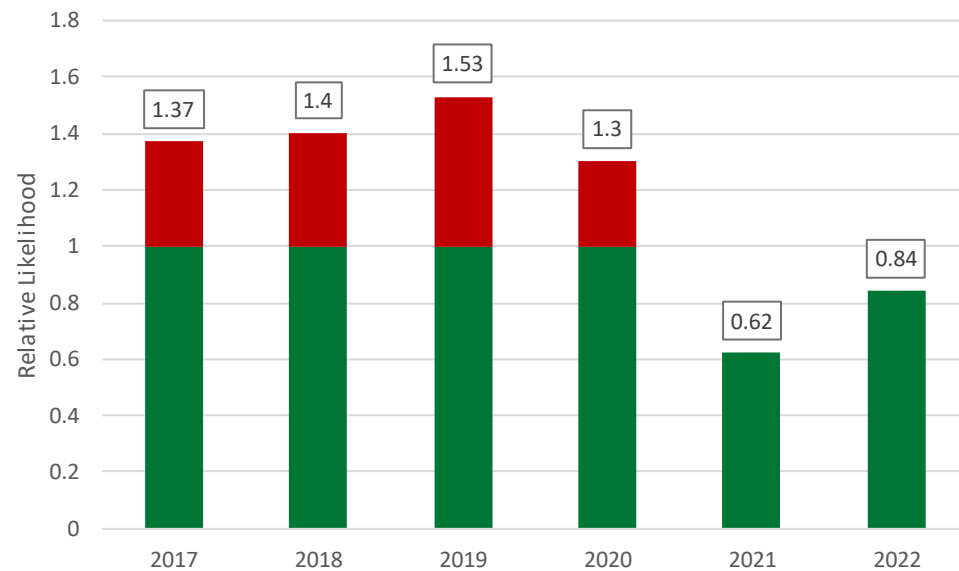
There are no BME staff at Bands 8d or VSM

WRES indicator 2

Key supportive data

Relative likelihood of white applicants being appointed from shortlisting compared to BME applicants: 2017 - 2022

2017	2018	2019	2020	2021	2022
1.37	1.4	1.53	1.3	0.62	0.84



The relative likelihood of white applicants being appointed from shortlisting compared to BME applicants has increased since last year by a relative likelihood of 0.22.

A relative likelihood of over 1 is indicated in red and means that white applicants have a greater likelihood of being appointed from shortlisting than BME applicants.

For the last two years we have appointed proportionately more BME applicants from shortlisting than white applicants.

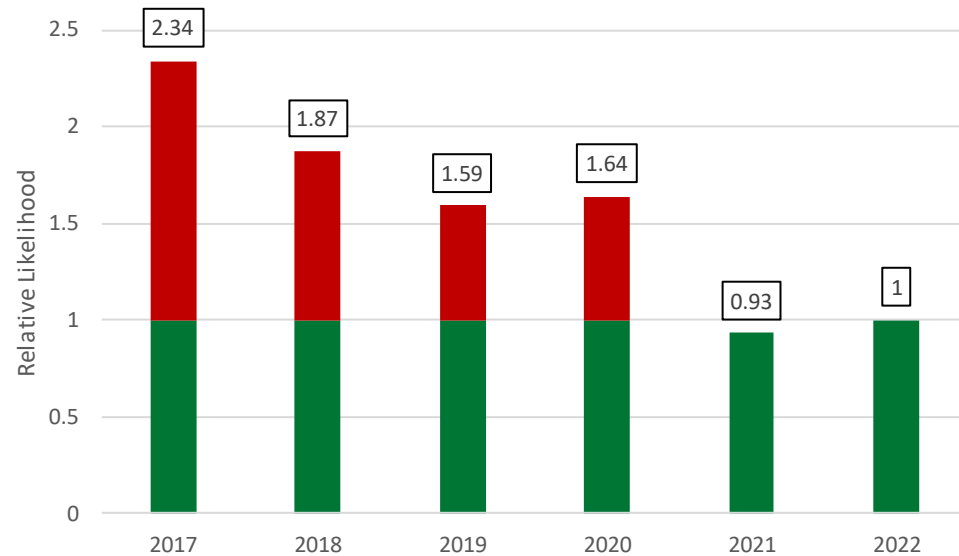
However in terms of headcount there were 506 out of 3220 white staff appointed from shortlisting and 134 BME staff out of 702 appointed from shortlisting.

WRES indicator 3

Key supportive data

Relative likelihood of staff entering the formal disciplinary process

2017	2018	2019	2020	2021	2022
2.34	1.87	1.59	1.64	0.93	1



This indicator is based on data from a two year rolling average of the current year and previous year.

The relative likelihood of BME staff entering the formal disciplinary process has seen an **increase of 0.07** in Apr 21 to Mar 22 and is now at a relative likelihood of 1. **43 white staff** compared to **9.5 BME staff**.

WRES indicator 4

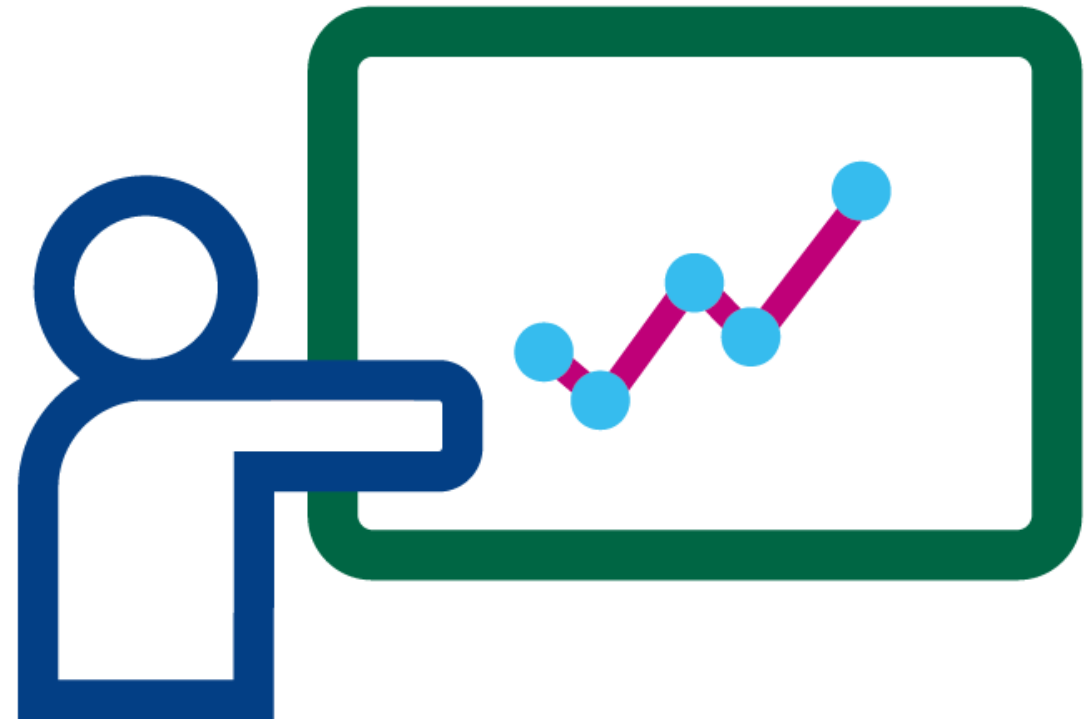
Key supportive data

Relative likelihood of white staff accessing non-mandatory training and CPD compared to BME staff: 2017 - 2022

BME staff have remained slightly more relatively likely to access non-mandatory training and CPD compared to white staff although in 2021 & 2022 this was almost even.

NHS employers say that Trusts should consider how to use non-mandatory training and CPD to improve career progression for BME staff

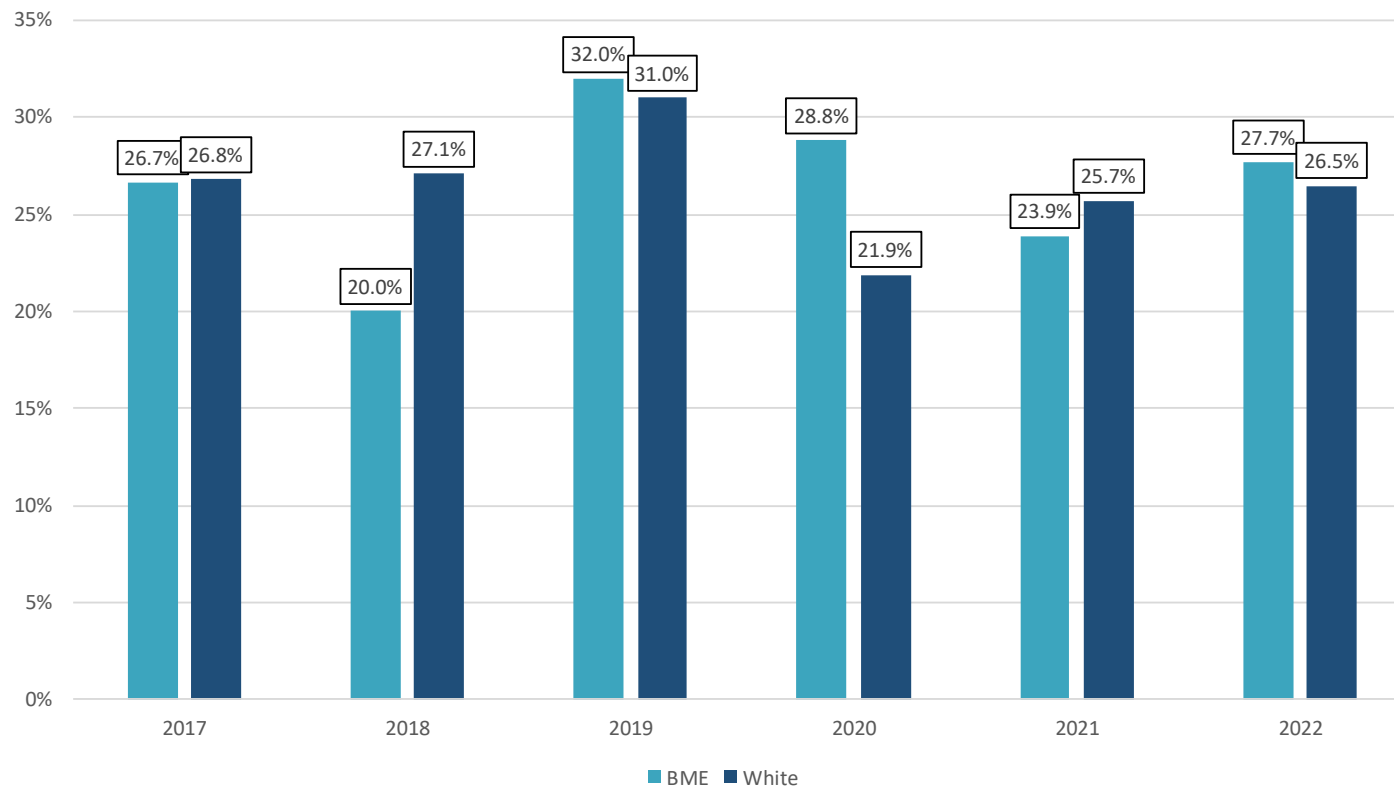
Year	Relative Likelihood
2017	0.97
2018	0.95
2019	0.91
2020	0.90
2021	0.99
2022	0.99



WRES indicator 5

Key supportive data

Percentage of BME staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months: 2017 - 2022



This data is from the National Staff Survey results

There has been an increase of **3.8%** of BME staff experiencing harassment, bullying or abuse from patients, relatives or the public.

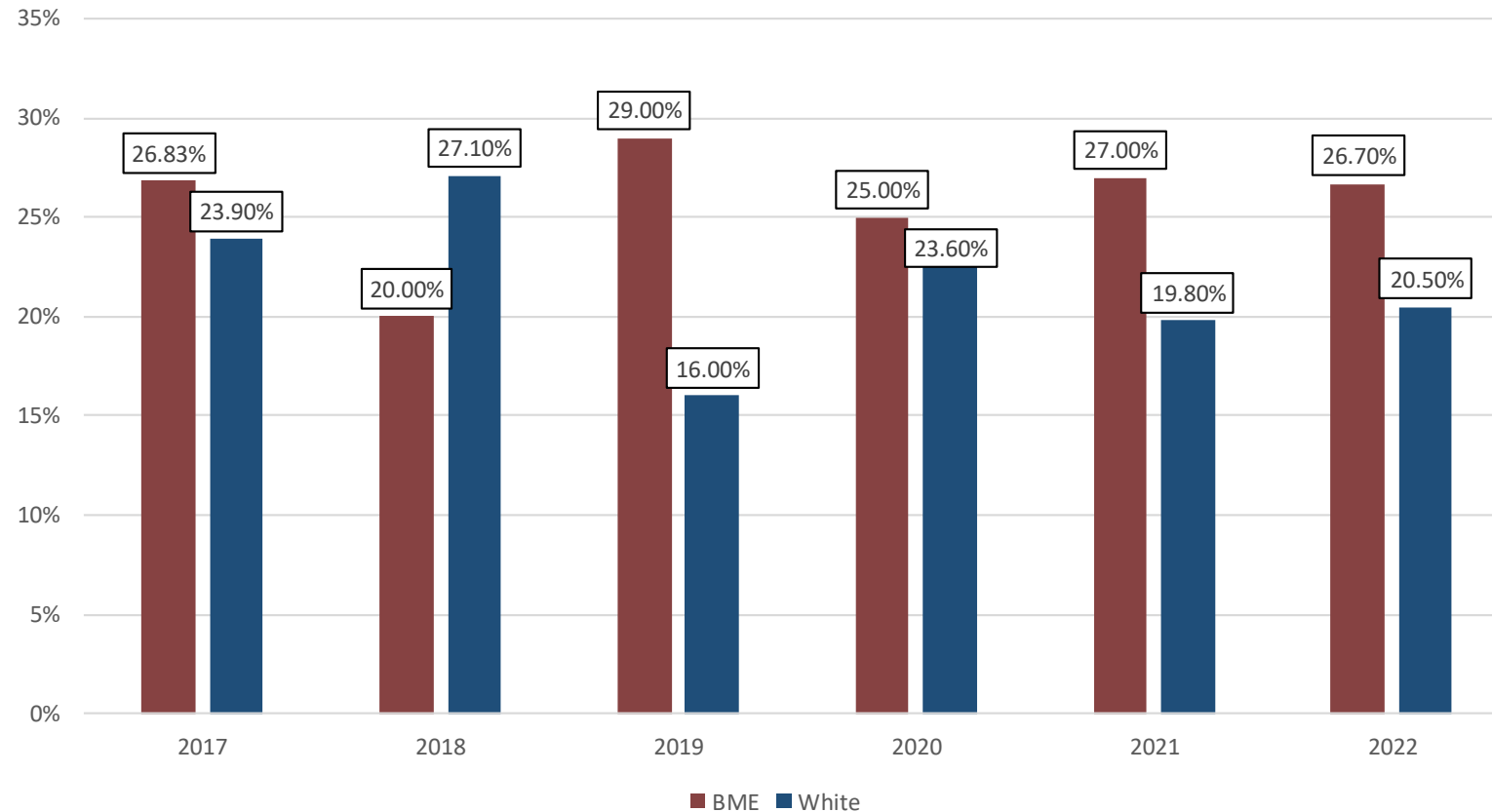
1912 white staff responded to this question

231 BME staff responded to this question

WRES indicator 6

Key supportive data

Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months: 2017 - 2022



This data is from the National Staff Survey results

There has an been a slight decrease of **0.3 %** of the number of BME staff reporting harassment, bullying or abuse from staff.

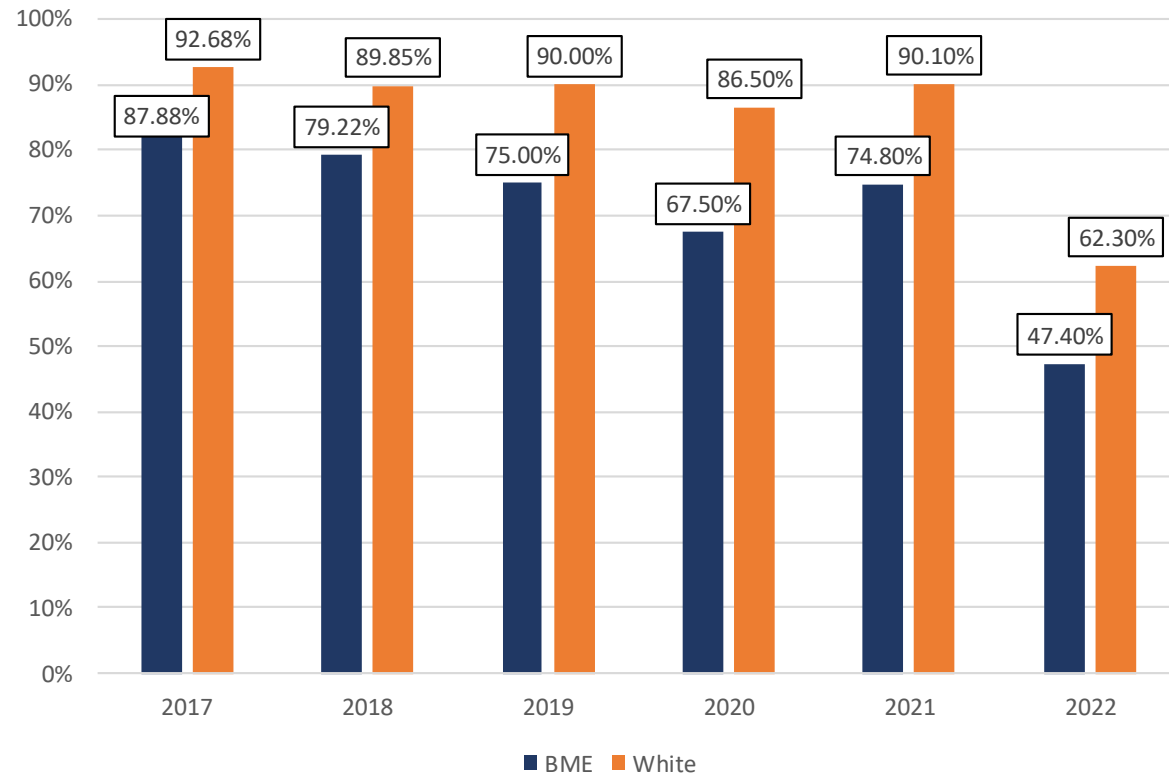
1916 white staff responded to this question

232 BME staff responded to this question

WRES indicator 7

Key supportive data

Percentage of staff believing that the Trust provides equal opportunities for career progression or promotion: 2017 - 2022



This data is from the National Staff Survey results.

There has been a significant decrease by **27.4%** of the number BME staff that believe the Trust provides equal opportunities for career progression or promotion.

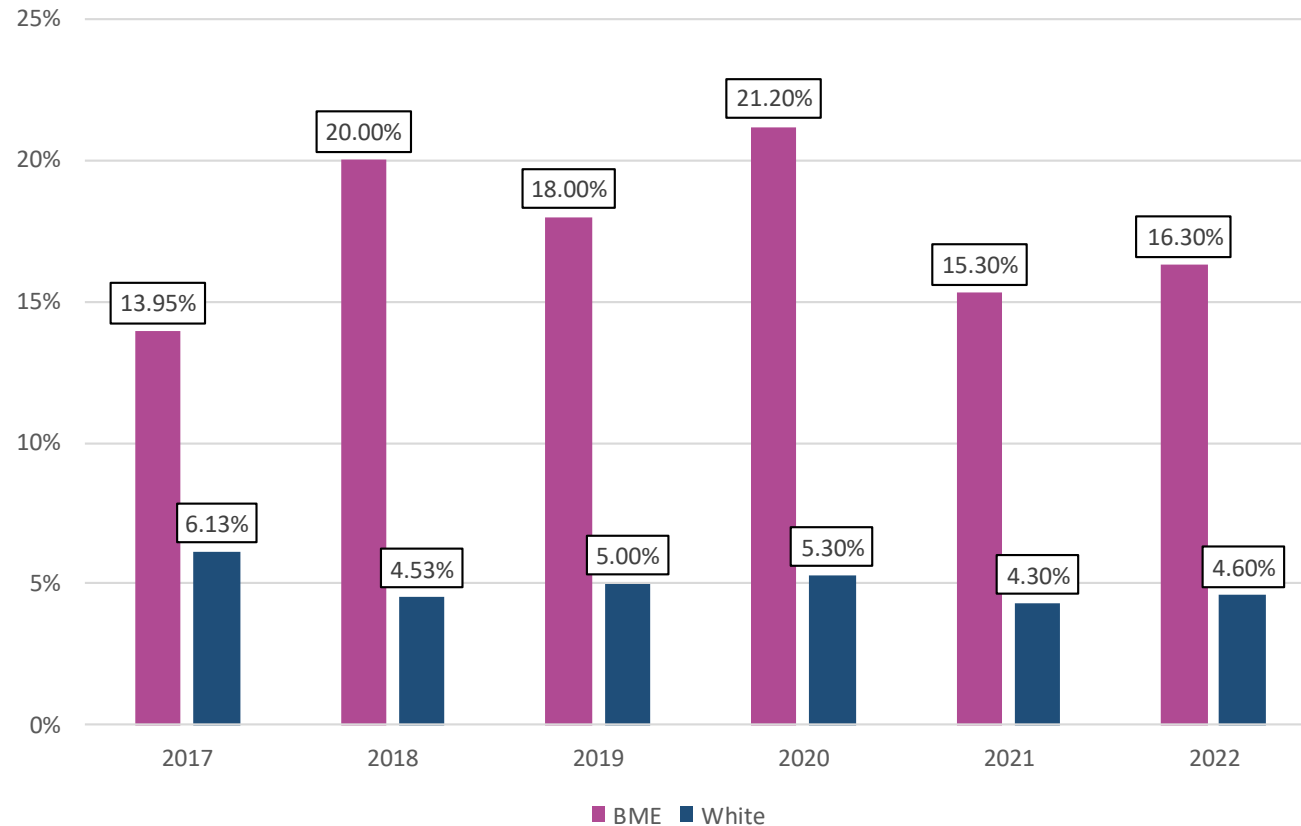
1925 white staff responded to this question

232 BME staff responded to this question

WRES indicator 8

Key supportive data

Percentage of staff personally experienced discrimination at work from manager/team leader or other colleague: 2017 - 2021



This data is from the National Staff Survey results.

There has been an increase of **1%** of BME staff that have personally experienced discrimination at work from manager/team leader or other colleague.

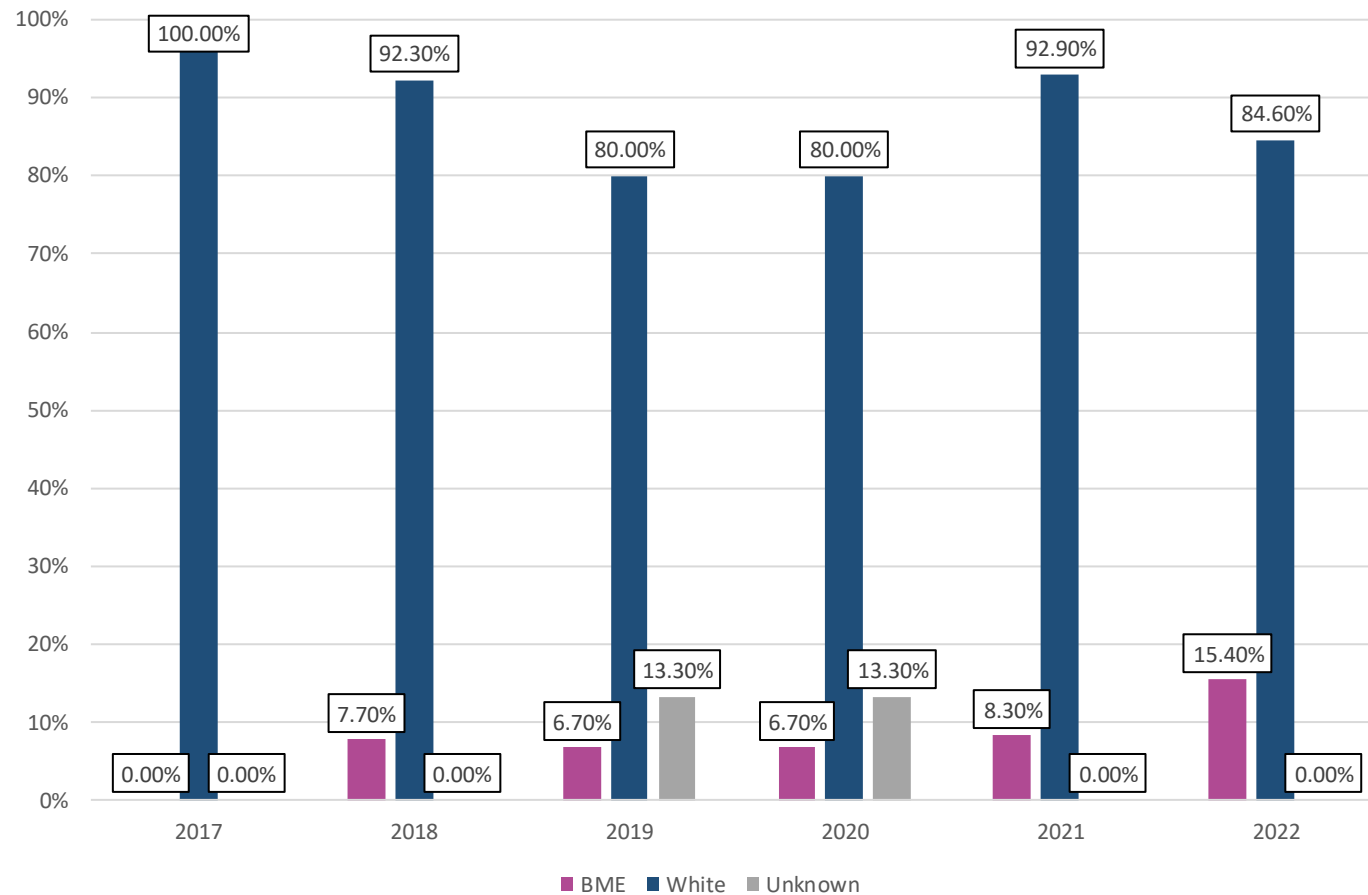
1917 white staff responded to this question

227 BME staff responded to this question

WRES indicator 9

Key supportive data

Percentage of board members by ethnicity compared to BME workforce: 2017 - 2022



While the number of BME voting board members has increased there are still only **3 BME members** on the Board.

Key Areas of Progress: 2021-2022

- Developed an inclusive recruitment framework to improve the Trusts Race Disparity Ratios which is monitored on a regular basis to ensure inclusion is at its heart.
- Recruitment interview checklist.
- BAME Staff Network pivotal in co designing solutions to create a better Bolton such as reviewing recruitment practices, prayer facilities and external communication methods to reflect the diversity of Bolton.
- Provision of safe spaces for BAME staff to raise concerns and issues.
- Stretch assignments/projects have been offered to BAME staff who had successfully completed the BAME leadership programme to advance their career.
- Continued to embed our Freedom to Speak Up Approach and increased the number of FTSU champions.
- Internal EDI training review taken place and proposals developed.
- Annual calendar of diversity and inclusion campaigns and engagement activities such as Black History Month and Ramadan.
- Continuing to work with Bolton's Community of Mosques to invest in new Muslim prayer facilities for staff and patients in the hospital.
- Promotion of regional and national BAME leadership programme's.

Action Plan: 2022 -2023

	Indicator	Actions
1	Percentage of staff in each of the Agenda for Change, VSM and Medical & Dental staff	<ul style="list-style-type: none"> • Establishing a structured community voices involvement network with local race and cultural community groups to co-design solutions and achieve the Trusts EDI plan ambitions. • Showcase the diversity of our workforce and celebrate BAME role models in our promotional and recruitment material, to demonstrate our commitment to being an inclusive employer • Continue our widening participation strategy of targeting local ethnic minority communities and schools to promote NHS Careers. • Continue with the tailored support given to the overseas nursing programme. To explore input from BAME Staff network. • Continue our focus of increasing BAME representation in senior leadership positions through promotion of positive action programmes including national and regional Leadership and management programmes. • Monitor the divisional and Trust wide recruitment figures on a regular basis • Develop pilot process for recruitment managers, to ensure recruitment interview checklist being used. • Review the current process and content of Sample EDI Interview questions. • Continue to undertake OD interventions at team level, organisational level and individual level. • Explore the regional anti-racist framework • Launch campaign to Increase self declaration rates in ESR
2	Relative likelihood of white applicants being appointed from shortlisting compared to BME applicants	<ul style="list-style-type: none"> • Implement an inclusive recruitment framework to ensure policies, procedures and practice are updated, to attract diversity into the trust. • Recruitment team to communicate importance of ensuring diverse recruitment panels are consistently applied • Arrange inclusive recruitment training for Hiring Managers.

Action Plan: 2022 -2023

	Indicator	Actions
3	Relative likelihood of staff entering the formal disciplinary process	<ul style="list-style-type: none"> • Develop and launch a new Be Inclusive Development Programme, to help redesign systems, increase EDI awareness and practice and support behaviour change. • Progress joint approach and process with Human Resources, Freedom To Speak Up Guardian, Unions and BAME Staff Network, to analyse staff complaints and implement effective interventions. • Review leadership and management programme to ensure EDI focus including unconscious bias and privilege are embedded.
4	Relative likelihood of white staff accessing non-mandatory training and CPD compared to BME staff	<ul style="list-style-type: none"> • Review talent management process to ensure there is greater prioritization and consistency of diversity in talent • Actively promote leadership development opportunities through the BAME Staff Network. • Promote access to coaching and career conversations and system wide pool of diverse coaches. • Monitor the diversity of participants in non mandatory learning and development
5	Percentage of BME staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months	<ul style="list-style-type: none"> • Review Trusts zero tolerance approach and communication and publicise zero tolerance of bullying and harassment and abuse to patients and the public • Continue to promote health and wellbeing conversations between line managers and staff to empower people to reflect on their lived experience, support them to become better informed on the issues and determine what they and their teams can do to make further progress.

Action Plan: 2022 -2023

6	Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months	<ul style="list-style-type: none"> • Review and explore rolling out the Trust focus on civility and respect. Embed themes such as macroaggressions and bias. • Develop a suite of Edi training. • Recruit additional FTSU Guardians, expanding the team to reflect the diversity of the workforce • Continue to work closely in enabling safe speaking up channels for our BAME workforce and build confidence of our staff to speak up • Explore other confidential systems and processes for reporting discrimination • Establish Executive Sponsors for each of the Trust's Networks • Support staff to learn about race and cultural diversity through celebration of key events • Continue to undertake OD interventions at team level, organisational and individual level.
7	Percentage of staff believing that the Trust provides equal opportunities for career progression or promotion	<ul style="list-style-type: none"> • Build on the success of our BAME leadership development pilot programme, by analysing findings of the initial evaluation and delivering further cohorts and mainstreaming the offer. • Promote access to coaching and mentoring • Continue to undertake OD interventions at team level, organisational level and individual level.
8	Percentage of staff personally experienced discrimination at work from manager/team leader or other colleague	<ul style="list-style-type: none"> • Raise awareness through the diversity events calendar of the Trusts commitment to zero tolerance of discrimination and individual responsibility of Ally ship
9	Percentage of board members by ethnicity compared to BME workforce	<ul style="list-style-type: none"> • Resourcing Team to conduct a review of the values based recruitment process for executive appointments • Launch Cohort 2 of the Reciprocal Mentoring Programme with organisational leaders