

Workforce Race Equality Standard (WRES) 2020

Summary:

There is considerable evidence that the less favourable treatment of BAME staff in the NHS, through poor treatment and opportunities, has a significant impact on staff well-being, patient outcomes and on the efficient and effective running of the NHS and that the measures needed to address such discrimination will benefit patient care and organisational effectiveness.

The Workforce Race Equality Standard (WRES) is a set of nine specific metrics that enable NHS organisations to compare the experiences of white and black and minority (BAME) staff. This information will then be used to develop a local action plan, and enable the Trust to demonstrate progress against the indicators of race equality.

The main purpose of the WRES is:

- to help local, and national, NHS organisations to review their data against the nine WRES indicators,
- to produce action plans to close the gaps in workplace experience between white and Black and Ethnic Minority (BAME) staff, and,
- to improve BAME representation at the Board level of the organisation.

The WRES Metrics

The 9 Metrics are confirmed as follows:

Metric Number	Data source	Metrics
1	ESR	Percentage of staff in each of the AfC Bands 1-9 or Medical and Dental subgroups and VSM (including executive Board members) compared with the percentage of staff in the overall workforce
2	NHS Jobs	Relative likelihood of staff being appointed from shortlisting across all posts
3	Local HR database	Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation (based on data from a two year rolling average)
4	Local training data	Relative likelihood of staff accessing non-mandatory training and CPD
5	Staff survey	Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months

6	Staff survey	Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months
7	Staff survey	Percentage believing that trust provides equal opportunities for career progression or promotion
8	Staff survey	In the last 12 months have you personally experienced discrimination at work from any of the following? b) Manager/team leader or other colleagues
9	ESR	Percentage difference between the organisations' voting Board membership and its overall workforce

Note: For the 2020 reporting period, only metrics 1-4 and 9 are required for submission to NHS England as part of the data collection process. The results from metrics 5-8 are still included in this report, however for comparison purposes, it is noted that the 2019 NHS Staff Survey was issued to **all** Trust staff, rather than a sample as seen in previous years.

97.74% of Trust staff have their ethnicity recorded on ESR.

WRES Trust findings against the metrics

Metric 1- Percentage of staff in each of the AfC Bands 1-9 or Medical and Dental subgroups and VSM (based on ESR data as at 31st March 2020)

Non-clinical (AfC)

Band	% of BAME staff
Band 1	0%
Band 2	2.88%
Band 3	1.80%
Band 4	0.92%
Band 5	2.25%
Band 6	1.61%
Band 7	8.82%
Band 8a	2.33%
Band 8b	5.26%
Band 8c	0.00%
Band 8d	11.11%
Band 9	0.00%
VSM	0.00%

Clinical (AfC)

Band	% of BAME staff
Band 1	0%
Band 2	7.55%
Band 3	7.19%
Band 4	3.94%

Band 5	15.17%
Band 6	4.94%
Band 7	3.76%
Band 8a	1.54%
Band 8b	0.00%
Band 8c	0.00%
Band 8d	0.00%
Band 9	0.00%
VSM	0.00%

Medical & Dental

Grade	% of BAME staff
Consultant	35.55%
Non Consultant Career Grade	45.31%
Trainee Grades	38%

Key findings

- BAME staff make up 2.38% of the non-clinical workforce (AfC banded posts only).
- BAME staff account for 7.77% of the overall clinical workforce (AfC banded posts only).
- 6.05% of the total workforce, **excluding** those in Medical and Dental posts, are from BAME backgrounds. This increases to 7.70% when Medical and Dental staff are included.
- Excluding Medical and Dental roles, the highest numbers of BAME staff are in Band 5 nursing posts. This is a trend seen over previous years. BAME staff numbers in this band have increased over 50% since the previous reporting period due to recent international nursing recruitment campaigns.
- The only posts where BAME staff outnumber white staff is in Non-Consultant Career Grade posts.

Metric 2 - Relative likelihood of staff being appointed from shortlisting across all posts

24.9% of all applications for posts during the 2019/20 period were from BAME applicants, compared to 21.5% the previous year. BAME applicants who were short listed accounted for 18.46% of all shortlisted applicants.

The findings show that white staff are 1.43 times more likely to be appointed from shortlisting compared to BAME staff.

This is a declining position compared to the previous year where white staff were 1.32 times more likely to be appointed compared to BAME staff.

Policies and guidance are available for all aspects of the recruitment and selection process providing comprehensive information and guidance for those undertaking recruitment and selection at the Trust. Recruitment and Selection training for managers' covers unconscious bias and all recruiting managers are to attend training prior to undertaking the recruitment and selection process. The Trust will continue to monitor detailed analysis of ethnicity patterns in recruitment at the Equality, Diversity & Inclusion Group.

Metric 3 - Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation

This indicator is measured over a 2 year period as defined in the WRES guidance.

Based on a 2 year period April 2018- March 2020 BAME staff were 0.54 times more likely than white staff to enter the formal disciplinary process. This is compared to 1.01 in the previous reporting period.

This metric has seen a year on year improvement, decreasing from 1.70 in 2017 and 1.65 in 2018.

The Trust continue to monitor staff that enter into the disciplinary process and provide an annual disciplinary by ethnicity profile report to the Equality, Diversity & Inclusion Group to determine any outlying trends.

Metric 4 - Relative likelihood of staff accessing non-mandatory training and CPD

It is noted that each staff member may have attended more than one training session and have several training sessions attributed to them. The figures have been calculated to ensure that only one period of training/CPD is taken into account.

White staff are 0.88 times more likely to access non-mandatory training than their BAME counterparts. This is a slightly worsening position when compared to the previous year when white staff were 0.86 times more likely to access non-mandatory training.

The Trust continues to monitor attendance at training and CPD events to ensure that such courses and opportunities for learning are available and accessible to all.

Metric 5 - Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months

This metric has seen an increase since the previous year for BAME staff (28.4% in 2019 compared to 17.9% in 2018).

White staff reported a poorer experience for this metric in the 2018 NHS Staff Survey when compared to BAME staff; however this is no longer the case, with a decrease to 23.2% of staff in 2019, compared to 25.7% in 2018.

The Trust will continue to review all incidents relating to harassment, bullying or abuse from patients in line with the zero tolerance guidance.

Metric 6 - Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months

The results from the 2019 NHS Staff Survey shows an improvement for this metric compared to the previous year with 22.4% of BAME staff reporting harassment, bullying or abuse from their colleagues. This is compared to 32.1% in the previous year.

22.2% of white staff reported that that they had experienced harassment, bullying or abuse from staff in 2019, a slight increase noted when compared to 20.2% in 2018. The

staff survey results show a relatively poor experience in relation to both white and BAME staff experiences.

The Trust will continue to review all reported incidents relating to harassment, bullying or abuse.

Metric 7 - Percentage believing that the trust provides equal opportunities for career progression or promotion

This metric reported a significant decline in 2019 with just 68.2% of BAME staff believing that the Trust provides equal opportunities for career progression or promotion. This is a declining position when compared to 2018 (86.4%).

White staff reported a slight decline for this metric in 2019 with 89.4% of staff believing that equal opportunities for career progression or promotion were provided, compared to 91.2% in the previous year.

The Trust will continue to promote equal access to career progression opportunities. Analysis of ethnicity patterns in training will be monitored at the Equality, Diversity & Inclusion Group.

**Metric 8 - In the last 12 months have you personally experienced discrimination at work from any of the following?
- Manager/team leader or other colleagues**

This metric reported an increase for BAME staff in the 2019 NHS Staffs Survey. 16.2% of BAME staff reported that they personally experienced discrimination compared to 10.3% of BAME staff in 2018.

In contrast, 4.9% of white staff reported that they experienced discrimination in 2019 compared to 4.4% in the previous year.

The Trust will continue to review all reported incidents relating to discrimination and will take appropriate action where this occurs.

Metric 9 - Percentage difference between the organisations' Board membership and its overall workforce (based on data as at 31st March 2020)

There has been no change to this indicator since the introduction of the WRES with the Board voting profile 100% white.

Conclusion, data reporting and action planning

When excluding metric one which relates to staffing numbers across each of the pay bands, a decline in outcomes has been identified against five metrics (relative likelihood of staff being appointed from shortlisting, relative likelihood of staff accessing non-mandatory training and CPD, percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public, percentage believing that the trust provides equal opportunities for career progression or promotion and staff experiencing discrimination at work from their manager/team leader or other colleagues.

One indicator found static outcomes where no overall improvements or changes were

measured (percentage difference between the organisations' Board membership and its overall workforce).

The Trust has measured improved outcomes against two of the WRES indicators (relative likelihood of staff entering the formal disciplinary process and percentage of staff experiencing harassment, bullying or abuse from staff).

Whilst some improvements have been noted, the findings still evidence that in some areas BAME staff still experience a poorer experience at work than white staff.

These findings from the WRES data will be reported to the Workforce and Digital Transformation Committee and Trust Board and will be published on the Trust website.

An action plan will be developed in partnership with our BAME Staff Network to address the areas where improvements are required. This action plan will be regularly monitored and reviewed by the Equality, Diversity and Inclusion Group.

Natalie Wallace
Workforce Business Partner/Equality, Diversity & Inclusion Lead
August 2020