



The Clatterbridge
Cancer Centre
NHS Foundation Trust

Clatterbridge Cancer Centre NHS Foundation Trust
Workforce Race Equality Standard (WRES)
Annual Report 2023



WE ARE...
KIND EMPOWERED RESPONSIBLE INCLUSIVE

Accessibility Statement

Here at Clatterbridge Cancer Centre, we want to provide information in clear and accessible ways to meet the communication needs of all our patients and staff.

To request any of our information or key documents in an alternative format including in larger print, audio or any an additional format, please access our website via the link below:

For further information contact:



General Enquiries telephone : 0151 556 5000



Email: ccf-tr.hrccc@nhs.net



**Website address:
<https://www.clatterbridgecc.nhs.uk>**



Workforce Race Equality Standard (WRES) Introduction

The Workforce Race Equality Standard (WRES) is a requirement for all NHS organisations to publish data and action plans against 9 indicators of workforce race equality, 2023 is its eighth year. It aims to facilitate an inclusive supportive, and fair culture in organisations to ensure that every member of the NHS diverse workforce has a sense of belonging and a positive working experience.

This report presents The Clatterbridge Cancer Centre's latest workforce race equality data (as of 31st March 2023) and identifies where improvements have been made and where data has remained static and/or deteriorated. The report contains the Trust's performance against these indicators using data from the Electronic Staff Records (ESR) system and relevant results from the 2020 National Staff Survey. The data from the WRES report is important, as research demonstrates that a motivated, included and valued workforce helps to deliver high-quality patient care, increase patient satisfaction and improve patient safety. The data will also enable us to better understand the experiences of our Black and minority ethnic staff so that we can target support and implement positive change thereby creating a more inclusive environment.

The Clatterbridge Cancer Centre continues to make significant progress and is committed to tackling workplace inequalities between Black and minority ethnic and White staff. Four of the nine indicators focus on workforce composition and people management, four are based on data from the national NHS Staff Survey (NSS) questions, and one indicator focuses on Board level representation. The report shows that The Clatterbridge Cancer Centre has made progress in four of the nine WRES indicators, however, there is immobility and/or regression in the remaining five indicators. In general, Black and minority staff have poorer work experience than White staff – this has been the trend since the WRES was mandated in 2015.

A note on language: When referring to ethnicity, we will use the term Black and minority ethnic (BME) to be consistent with National NHS Workforce Race Equality Standard terminology.

Ethnic Diverse Staff Network

The Ethnic Diversity Staff Network plays an important role in creating a safe and welcoming work environment for staff at CCC. The Ethnic Diversity network supports the career progression of its members through the promotion of training and development opportunities. In addition to this, it supports measures to make CCC a more inclusive environment. Recent projects include: The Reverse Mentoring programme and the installation of art that represents our diverse ethnic workforce.

The network also supports giving staff a safe place to discuss concerns in the workplace and signposts to services that can support them.

The Ethnic Diversity Network can support improve WRES data through:

- Advising CCC in formulating new and reviewing existing policies and procedures focusing on inclusion and diversity.
- Assist in identifying training needs, advice on providing courses to meet those needs, and on the content of courses with equality, diversity and inclusion implications as they relate to BAME staff.
- To support the Trust by training staff at all levels so they can better understand the perspective and needs of ethnic minority staff and service users.
- To promote the service as a healthcare provider and employer within the local ethnic minority communities.

Amin Sadik, chair of the Ethnic Diversity staff network

Workforce Race Equality Standard Progress in 2022/23

We are pleased to note that we have made improvements in four out of the nine indicators of race equality:

- Increase in the percentage of BME staff employed at The Clatterbridge Cancer Centre
- Decrease in the likelihood of White applicants being appointed compared to ethnic minority applicants
- All of our staff are equally likely to access non-mandatory training
- Decrease in the number of BME staff who have experienced harassment, bullying or abuse from patients, relatives or the public

Several actions have been taken over the last twelve months that will have attributed to the above improvements, these include:

- Supporting the Ethnic Diverse Staff Network to achieve their objectives
- Introduction and promotion of the new Reverse Mentoring programme
- Appointment of Head of Equality, Diversity, and Inclusion
- Appointment of the Freedom to Speak Up Guardian
- Communications regarding celebration days and events
- Supporting recruitment to reduce inequality in the recruitment process
- Introduction of Civility and Respect training

Indicator 1 – Percentage of staff in each AfC Bands 1 to 9 and VSM compared with the percentage of Black, Asian, and Minority Ethnic staff in overall workforce

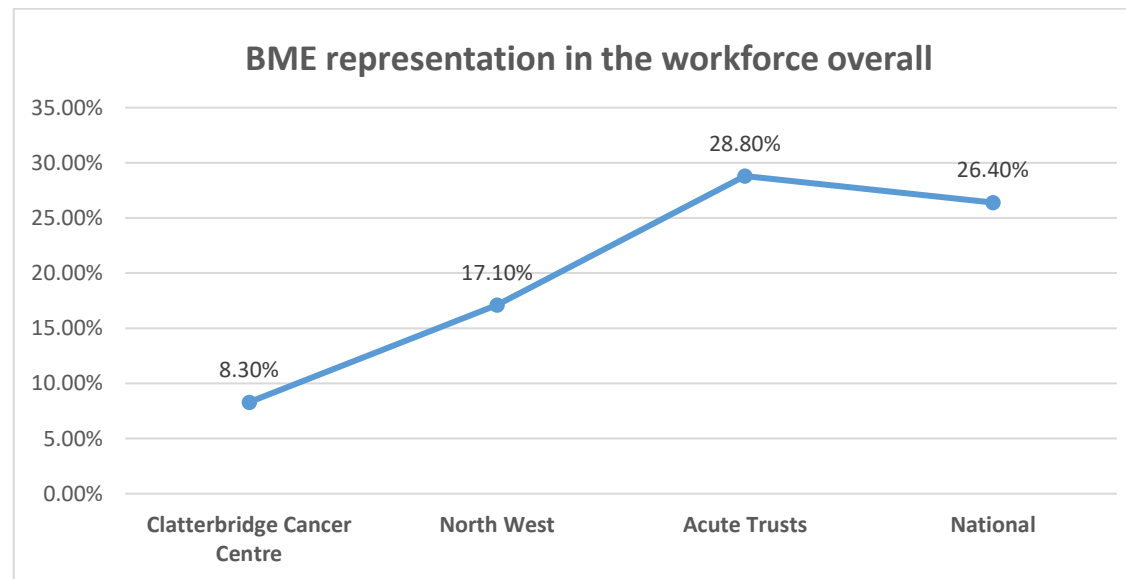
Total Workforce	BME	White	Missing or Unknown
1786	149 (8.30%)	1617 (90.50%)	20 (1.10%)

	BME			White			Missing or Unknown		
	2021	2022	2023	2021	2022	2023	2021	2022	2023
Cluster 1 (Bands 1 - 4)	9	13	16	291	311	319	2	3	2
Cluster 2 (Band 5 - 7)	3	3	3	124	158	170	2	4	3
Cluster 3 (Bands 8a - 8b)	3	4	3	37	43	54	1	1	1
Cluster 4 (Bands 8c – 9 & VSM)	3	0	3	23	18	28	0	0	0

Table 1: Non Clinical Workforce Cohort (data source ESR)



The data shown in Table 1 shows that at The Clatterbridge Cancer Centre, we have 149 staff (8.30% of the workforce) who recorded that they are from a Black minority ethnic background on our electronic staff record (ESR). The data from the non-clinical workforce group shows an increase in Black minority ethnic staff in Cluster 1 (Band 1-4). There has also been an increase in Cluster 4 (Band 8c-9 VSM) which has increased from 0 to 3 since the last WRES report in 2022. The national and regional BME representation in the overall workforce indicates the requirement to increase the diversity of our workforce. Whilst we have seen improvements which are encouraging, The Clatterbridge Cancer Centre acknowledges that we need to work hard if we are to achieve race equity within the workforce.



	BME			White			Missing or Unknown		
	2021	2022	2023	2021	2022	2023	2021	2022	2023
Cluster 1 (Bands 1 - 4)	9	15	18	211	223	222	3	3	1
Cluster 2 (Band 5 - 7)	29	34	54	597	610	631	12	8	7
Cluster 3 (Bands 8a - 8b)	3	6	6	104	110	119	3	3	4
Cluster 4 (Bands 8c - 9 & VSM)	2	1	1	9	15	14	1	1	0
Cluster 5 (Medical and Dental staff, Consultants)	25	30	37	31	43	59	2	2	2
Cluster 6 (Medical and Dental staff, Non-consultant career grade)	7	6	10	4	10	5	1	0	0
Cluster 7 (Medical and Dental staff, Medical and Dental trainee grades)	1	1	2	3	0	2	0	0	0

Table 2: Clinical Workforce (data source ESR)



Table 2 presents the clinical cohort data. The data shows an overall increase in all Clusters with the most significant increase in Cluster 2 (Band 5-7). This could be associated with the international recruitment programme and the employment of internationally educated staff, although it must be noted that the number of internationally educated staff coming to work at The Clatterbridge Cancer Centre is small. Despite small numbers, we will continue to support our internationally educated staff, enhancing their experiences so that they stay and thrive.

We have also seen a positive increase in Cluster 5 (Medical and Dental staff, Consultants) and Cluster 6 (Medical and Dental staff, Non-consultant career grade).

BME staff were represented at 4.2% in all non-clinical AfC roles and BME staff were represented at 7.3% in all clinical AfC roles.

Indicator 2 – Relative likelihood of staff being appointed from shortlisting

This metric compares the data for White applicants in regard to the relative likelihood of being appointed compared to BME applicants. The metric includes both internal and external recruitment

(Data source: Trust's Recruitment data)

WRES Indicator	DESCRIPTOR	2021/22	2022/23
2	Relative likelihood of White applicants being appointed from shortlisting across all posts compared to BME applicants	1.31	0.64

Table 3: Relative likelihood of appointment from shortlisting

In March 2023 the likelihood ratio was 0.64; lower than "1.0" or equity to a small degree. Specifically, 99 out of 1476 white candidates were appointed from shortlisting (6.7% of white candidates) compared to 27 out of 258 BME candidates (10.5% of BME candidates). The Trust performed better than 59% of Trusts and worse than 41% of Trusts.

Indicator 3 – Relative likelihood of staff entering the formal disciplinary process

Relative likelihood of BME staff compared to White staff entering the formal disciplinary process, as measured by entry into the formal disciplinary procedure.

(Data source: Trust's HR data)

WRES Indicator	DESCRIPTOR	2021/22	2022/23
3	Relative likelihood of BME staff entering the formal disciplinary process compared to White staff	0	0

Table 4: Relative likelihood of entering formal capability process

Within the last four years, we have not had any recorded BME staff that have entered a formal capability process. We will continue to ensure that we monitor this data, taking immediate action if this changes.

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

Relative likelihood of White staff compared to BME staff accessing non-mandatory and CPD Training.

(Data source: Trust's HR data)

WRES Indicator	DESCRIPTOR	2021/22	2022/23
4	Relative likelihood of White staff accessing non-mandatory training and continuous professional development (CPD) compared to BME staff	1	1.01

Table 5: Relative likelihood of staff accessing non-mandatory training and CPD

The data in Table 5 shows that White staff are 1.01 times more likely to access non-mandatory training and continuous professional development than Black, minority ethnic staff. National data suggests that a non-adverse range is between 0.80 to 1.25, based on the four-fifths rule. This is encouraging and The Clatterbridge Cancer Centre has remained consistent with a figure within the non-adverse range for the past three years.

WRES 5 – Percentage of staff experiencing harassment, bullying or abuse from patients, relatives, or the public

WRES Indicator	DESCRIPTOR	BME 2021	White 2021	BME 2022	White 2022
5 NHS Staff Survey	Percentage of staff experiencing harassment, bullying or abuse from patients, relatives, or the public in the last 12 months	20.4%	13.1%	17.2%	16.3%

Table 6: Harassment, bullying or abuse in the last 12 months (patients, relatives & public)

The data in Table 6 illustrates that 17.2% of Black minority ethnic staff have experienced harassment, bullying or abuse from patients, relatives, or the public in the last 12 months. There is a 3.2% point decrease from the previous year and this figure is lower than the national average, although no staff should experience harassment, bullying or abuse when at work. The trust has prioritised becoming an Anti-Racist organisation and is working with the North West BAME Assembly to explore implementing its Anti-Racist Framework.

WRES 6 – Percentage of staff experiencing harassment, bullying or abuse from staff

WRES Indicator	DESCRIPTOR	BME 2021	White 2021	BME 2022	White 2022
6 NHS Staff Survey	Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months	16.3%	16.8%	25.0%	14.4%

Table 7: Harassment, bullying or abuse in the last 12 months (staff)

The data in Table 7 shows an unacceptable increase in the number of Black minority ethnic staff who have experienced harassment, bullying or abuse from their colleagues with an 8.7% point increase from last year. We will work to try and understand the reason for this increase as well as prioritising tackling harassment, bullying or abuse to ensure that our staff feel safe and have a sense of belonging within our organisation.

WRES 7 – Percentage of staff believing the Trust provides equal opportunities for career progression or promotion

WRES Indicator	DESCRIPTOR	BME 2021	White 2021	BME 2022	White 2022
7 NHS Staff Survey	Percentage of staff believing that the organisation provides equal opportunities for career progression and/or promotion	53.1%	61.4%	48.4%	65.4%

Table 8: Opportunities for career progression or promotion

The data in Table 8 indicates that 48.4% of Black minority ethnic staff believe that The Clatterbridge Cancer Centre provides them with equal opportunities for career progression or promotion compared to 65.4% of White staff. This signifies a 4.7% point decrease from the previous year but still remains higher than the national average of 46.9%.

WRES 8 – Percentage of staff personally experiencing discrimination at work from their manager/team leader or colleagues

WRES Indicator	DESCRIPTOR	BME 2021	White 2021	BME 2022	White 2022
8 NHS Staff Survey	Percentage of staff experienced discrimination at work from manager/team leader or other colleagues in the last 12 months	12.2%	5.1%	14.3%	3.8%

Table 9: Experience of discrimination at work from manager/team leader or colleagues

The data in Table 9 reveals that 14.3% of Black minority ethnic staff at The Clatterbridge Cancer Centre have directly experienced discrimination at work from either their manager, team leader or colleagues in comparison to 3.8% of White staff. The trust is committed to tackling harassment, bullying and/or abuse over the next 12 months. In 2022 the Trust launched its new Trust Mission Statement and Values following a comprehensive staff engagement programme and subsequently a Civility & Respect Training programme has been rolled out. We will monitor the impact of this programme, working with the Ethnic Diverse staff network to develop and implement strategies to help combat this behaviour.

WRES 9 – Percentage difference between Board voting membership and its overall workforce

Percentage difference between the organisations' Board voting membership

(Data source: NHS ESR and/or trust's local data)

WRES Indicator	DESCRIPTOR	BME 2021/22	White 2021/22	BME 2022/23	White 2022/23
9 Board Representation	Percentage difference between the organisation's Board voting membership and its overall workforce	27.3%	-25.6%	18.3%	-17.2%

The percentage difference between the organisation's Board voting membership and its overall workforce has declined by 9% points for Black minority ethnic staff and -8.4% points for White staff. Our challenge is to ensure that all our staff have equal opportunities for progression and/or promotion and we will work to develop strategies to support career progression and development.

Conclusions and next steps

The report provides an assessment of our current position in regard to the experiences of Black minority ethnic staff working at Clatterbridge Cancer Centre. Based on the 2022/23 data presented in this report, the following have been identified as areas of concern that the trust must focus on for improvement:

- Underrepresentation of BME staff in senior positions
- Percentage of staff experiencing harassment, bullying or abuse from staff
- Percentage of BME staff experiencing discrimination at work from their manager, team leader or colleagues
- Percentage of BME staff believing that the Trust provides equal opportunities for career progression or promotion
- Underrepresentation of BME on the Board with voting membership

With the support and involvement of the Ethnic Diverse staff network, the WRES action plan (Appendix 1) has been developed in response to the WRES data and we will work together to make improvements against the themes identified as concerns. We will, where possible, link our actions to the NHS Equality, Diversity, and Inclusion Improvement Framework to ensure we our activities are robust, align, and work towards improving the experience of our staff.

Appendix 1: WRES Improvement Plan

Action	Objective	Progress	Next Steps	Timescales
Continue to monitor and take action to address the poorer experience of BME staff reported through the NHS Staff Survey for Harassment, bullying or abuse	Inequalities and differentials in staff experiences	<ul style="list-style-type: none"> • Raise awareness for reporting and support mechanisms to ensure colleagues have the confidence to speak up safely about issues. • Continue to embed new Trust Values • Promote Trust Zero Tolerance policy • Link actions to NHS EDI Improvement Plan: High impact action 4 • CCC has made a commitment to embed the North West BAME Assembly Anti-Racist Framework 	<ul style="list-style-type: none"> • Continue to monitor the impact of the Civility and Respect training programme (Link to HI action 4) • Ensure line managers hold regular effective wellbeing conversations with their teams (Link to HI action 4) • Develop our current onboarding programme and pastoral care for our internationally educated staff, involving their managers and team members (link to HI action 6) • Work with Freedom to Speak Up Guardian to ensure review policies and processes, ensuring they are safe and inclusive, building psychological safety (link to HI action 6) • Work towards becoming an intentionally anti-racist organisation, implementing the NW BAME Assembly Anti-Racist Framework 	<p>December 2023</p> <p>March 2024</p> <p>December 2023</p> <p>March 2024</p> <p>July 2024</p>



<p>Provide inclusive career progression opportunities for development</p>	<p>Inequalities and differentials in experience</p>	<ul style="list-style-type: none"> • Work with the Ethnic Diverse staff network to proactively address areas of concern, improving our understanding of the experiences of our BME staff • Work with our newly appointed Freedom to Speak Up Guardian • Encourage participation in the Reverse Mentoring programme 	<ul style="list-style-type: none"> • Ensure that career conversations are embedded into the staff's annual appraisal process • Determine and monitor targets related to workforce representation • Promote and support inclusive access to training, learning and development opportunities • Use the intelligence from staff network members to identify any specific gaps requiring the development of bespoke training • Make sure that our Internationally educated staff are encouraged and have access to development opportunities (link to HI action 5) • Develop a talent management plan looking to improve the diversity of executive and senior leadership teams (link to HI action 2) 	<p>December 2023</p> <p>March 2024</p> <p>March 2024</p> <p>December 2023</p> <p>July 2024</p>
---	---	---	--	--