

## BOARD OF DIRECTORS MEETING

<b>Agenda Item</b>	<b>P1-167-17</b>	<b>Date: 5<sup>th</sup> July 2017</b>
<b>Subject /title</b>	<b>NHS Workforce Race Equality Standards (WRES)</b>	
<b>Author</b>	<b>Jenny Grant (Head of HR)</b>	
<b>Responsible Director</b>	<b>Helen Porter, Director of Nursing &amp; Quality</b>	
<b>Executive summary and key issues for discussion</b>		
<p>The NHS Workforce Race Equality Standards (WRES) requires all NHS organisations to demonstrate progress against the nine indicators of workforce race equality.</p> <p>The purpose of doing this 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 (BME) staff, and to improve BME representation at the Board level of the organisation.</p> <p>Therefore the Board are asked to review the submitted workforce data and agree the supporting action plan that will address the Trusts workforce gaps in relation to the employment and development of BME staff up to and including board level positions.</p>		
<b>Strategic context and background papers (if relevant)</b>		
<p>The NHS Equality and Diversity Council announced on 31 July 2014 that it had agreed action to ensure employees from black and minority ethnic (BME) backgrounds have equal access to career opportunities and receive fair treatment in the workplace.</p> <p>The Workforce Race Equality Standard (WRES) was introduced in April 2015, after engaging and consulting key stakeholders including other NHS organisations across England.</p> <p>It is included in the NHS standard contract and NHS Trusts produced and published their first WRES baseline data on 1 July 2015.</p> <p>Implementation of the WRES is a requirement on both NHS commissioners and NHS provider organisations. From 1<sup>st</sup> July 2016, the UNIFY 2 a system for sharing and reporting NHS and social care performance information will be used for the annual WRES return by NHS organisations.</p>		
<b>Recommended Resolution</b>		
Approve WRES data submission and supporting action plan.		
<b>Risk and assurance</b>		
That agreement and implementation of the attached action plan will ensure that we fulfil our reporting requirements under WRES and most importantly our continued commitment and development of the WOD agenda that enables and supports BME		

staff having equal access to career opportunities and receiving fair treatment in the workplace.

**Link to CQC Regulations**

Well led  
Responsive

**Resource Implications**

None

**Key communication points (internal and external)**

Workforce & OD Committee  
Strategic Partnership Forum  
Equality & Diversity Action Group  
Health & Well-being Task Force

**Freedom of Information Status**

FOI exemptions must be applied to specific information within documents, rather than documents as a whole. Only if the redaction renders the rest of the document non-sensical should the document itself be redacted.

- Application Exemptions:**
- **Prejudice to effective conduct of public affairs**
  - **Personal Information**
  - **Info provided in confidence**
  - **Commercial interests**
  - **Info intended for future publication**

Please tick the appropriate box below:

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- A. This document is for full publication**
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- C. This whole document is exempt under FOI**

IMPORTANT:

If you have chosen B above, highlight the information that is to be redacted within the document, for subsequent removal.

Confirm to the Trust Secretary, which applicable exemption(s) apply to the whole document or highlighted sections.

**Equality & Diversity impact assessment**

Are there concerns that the policy/service could have an adverse impact because of:	Yes	No
Age		✓
Disability		✓
Sex (gender)		✓
Race		✓
Sexual Orientation		✓
Gender reassignment		✓
Religion / Belief		✓
Pregnancy and maternity		✓
Civil Partnership & Marriage		✓

If YES to one or more of the above please add further detail and identify if full impact assessment is required.

**Next steps**

Agreement of data and supporting action plan for submission to CQC and enable uploaded data returns to NHS England and Commissioners.

**Appendices**

**Corporate Objectives supported by this report**

Improving Quality	✓	Maintaining financial sustainability	
Transforming how cancer care is provided across the Network		Continuous improvement and innovation	✓
Research		Generating Intelligence	✓

**Link to the NHS Constitution**

<b>Patients</b>		<b>Staff</b>	
Access to health care		<i>Working environment</i> Flexible opportunities, healthy and safe working conditions, staff support	x
Quality of care and environment		<i>Being heard:</i> <ul style="list-style-type: none"> <li>• Involved and represented</li> <li>• Able to raise grievances</li> <li>• Able to make suggestions</li> <li>• Able to raise concerns and complaints</li> </ul>	x
Nationally approved treatments, drugs and programmes			
Respect, consent and confidentiality			
Informed choice		Fair pay and contracts, clear roles and responsibilities	x
Involvement in your healthcare and in the NHS		Personal and professional development	x
Complaint and redress		Treated fairly and equally	x

# WRES Action Plan 2017-2019

## Workforce Race Equality Standard Indicators

<b>Workforce:</b> For each of the four workforce indicators, the Standard compares the metrics for White and BME staff.				
	<b>Actions</b>	<b>Timescale</b>	<b>Corporate Leads</b>	<b>Progress/ Update</b>
<b>1. Percentage of BME staff in Bands 8-9, VSM (including Executive Board Members &amp; Senior Medical Staff) compared with the percentage of BME staff in the overall workforce.</b>	<p>Communications campaign for all staff to raise awareness of the importance of self-recording of ethnicity and the Trust's legal obligations in reporting this information. Identify and deliver any training needs to support staff</p> <p>Developing external relationships with BME organisations, local community groups, schools and networks to promote employment opportunities at all levels including apprenticeships and graduate programmes (through NHS Employers) within CCC.</p> <p><b>Link to EDS2 Goal 3. 3.1 &amp; 3.3</b></p>	August/Sept 2017	Equality, Diversity & Wellbeing Business Partner(ED&WBP)	
<b>2. Relative likelihood of BME staff being appointed from shortlisting compared to that of White staff being appointed from shortlisting</b>	<p>Ensure E&amp;D and intentions to increase the Trusts BME representation is appropriately reflected within the Trust's Recruitment and Retention Strategy.</p> <p>Ensure training in relation to 'unconscious bias' is included within the recruitment training for managers.</p> <p>Ensure E&amp;D is appropriately reflected within the Trusts leadership development programme. .</p>	Oct/Nov 2017	ED&WBBP	

# WRES Action Plan 2017-2019

## Workforce Race Equality Standard Indicators

across all posts	<b>Link to EDS2 Goal 3. 3.1</b>			
<b>3. Relative likelihood of BME staff entering the formal disciplinary process, compared to that of White staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation.</b>	<p>Monitor current Employee Relations activity by protected characteristic. Report figures and trends to the Equality in Action Steering Group, Workforce and OD Implementation Group and Strategic Partnership Forum (SPF), on a quarterly basis.</p> <p>Where trends are identified information will be shared at local level with managers and appropriate actions/ interventions will be put in place.</p> <p>Reporting of interventions will be provided to the E&amp;D Steering Group on an exception basis.</p> <p><b>Link to EDS2 Goal 3. 3.3 &amp; 3.6</b></p>	Ongoing	ED&WBBP  BS  TU	
<b>4. Relative likelihood of BME staff accessing non-mandatory training and CPD compared to</b>	<p>Undertake a Trust wide review of all non-mandatory training activity through HRBP/A's surgery's due to Training budgets devolved to departments.</p>	November 2017	ED&WBBP  GMs & Heads of Services L&D	

# WRES Action Plan 2017-2019

## Workforce Race Equality Standard Indicators

<p><b>White staff</b></p>	<p>Explore how ESR OLM can be used to capture non mandatory training information at department level.</p> <p>Analyse the data and align findings to the Trusts recruitment, talent management and Workforce Planning strategies ensuring access to non-mandatory training for BME staff.</p> <p><b>Link to EDS2 Goal 3. 3.4</b></p>		<p>ED&amp;WBBP</p> <p>ED&amp;WBBP</p>	
<p><b>Staff Survey:</b> For each of these four staff survey indicators, the Standard compares the metrics for each survey question response for White and BME staff</p>				
<p><b>5. KF25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months</b></p> <p><b>6. KF 26. Percentage of staff experiencing harassment, bullying or abuse</b></p>	<p><b>Please note: Activities to cover KF25, KF26 and Q17 as they are interlinked.</b></p> <p>Review the role, activity and purpose of the Trusts Relations at Work Group.</p> <p>Update Bullying and Harassment Policy and Raising Concerns Policy to reflect latest national guidance</p> <p>Working in Partnership with Trade Union colleagues to conduct Focus Groups for with staff to further understand the type of B&amp;H experience, level of reporting and understanding the reasons for non-reporting and the type of discrimination experienced.</p> <p>Work with L&amp;D to raise awareness through training, workshops and various forms of communication with all networks where staff and Managers can access help and support if they experience bullying, harassment or abuse.</p>	<p>July/Aug 2017</p> <p>July/Aug 2017</p> <p>July/ Aug 2017</p> <p>Dec 2017</p>	<p>ED&amp;WBBP</p> <p>ED&amp;WBBP</p> <p>ED&amp;WBBP and OD Practitioner</p> <p>ED&amp;WBBP</p>	

# WRES Action Plan 2017-2019

## Workforce Race Equality Standard Indicators

<p>from staff in last 12 months.</p> <p>7. Q17 in the last 12 months have you personally experienced discrimination at work from any of the following? Management, team leader or other colleagues.</p>	<p>Link to EDS2 Goal 3. 3.4</p>			
<p>8. KF 21 Percentage believing that the Trust provides equal opportunities for career progression and promotion</p>	<p>Work with RIS to understand data identifying staff movements within the Trust.</p> <p>Working with L&amp;D and Internal Clinical Education providers to demonstrate and evidence equitable access to career development and promotion.</p>	<p>Dec 17</p>	<p>ED&amp;WBBP</p>	
		<p>Dec 17</p>	<p>ED&amp;WBBP</p>	
<p><b>4.3 Trust Board: Does the Board meet the requirement on Board Membership</b></p>				
<p>9) Percentage difference between the organisations' Board voting</p>	<p>Ensure that agreed contracts for external recruitment agencies, used to source candidates for Executive Director roles include a requirement relating to Equality &amp; Diversity which is beyond the statutory minimum requirements. Provide agencies with a clear brief to encourage applications from a diverse pool of talent to ensure the Trust demonstrates its commitment to diversity and</p>	<p>Ongoing</p>	<p>ED&amp;WBBP</p>	

# WRES Action Plan 2017-2019

## Workforce Race Equality Standard Indicators

<b>membership and its overall workforce</b>	<p>inclusion.</p> <p>From Trust data, establish whether the Trust Governors are representative of the local population in which we serve and identify any actions required to address any underrepresentation.</p> <p><b>Link to EDS2 Goal 3 3.1 &amp; 3.3. Goal 4. 4.1 &amp; 4.3</b></p>	<p>March 2018</p>	<p>ED&amp;WBBP</p>	
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# Workforce Race Equality Standard

## REPORTING TEMPLATE (Revised 2016)



Template for completion

Name of organisation

Date of report: month/year

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Name and title of Board lead for the Workforce Race Equality Standard

Name and contact details of lead manager compiling this report

Names of commissioners this report has been sent to (complete as applicable)

Name and contact details of co-ordinating commissioner this report has been sent to (complete as applicable)

Unique URL link on which this Report and associated Action Plan will be found

This report has been signed off by on behalf of the Board on (insert name and date)

# Report on the WRES indicators

## 1. Background narrative

a. Any issues of completeness of data

b. Any matters relating to reliability of comparisons with previous years

## 2. Total numbers of staff

a. Employed within this organisation at the date of the report

b. Proportion of BME staff employed within this organisation at the date of the report

# Report on the WRES indicators, continued

## 3. Self reporting

a. The proportion of total staff who have self-reported their ethnicity

b. Have any steps been taken in the last reporting period to improve the level of self-reporting by ethnicity

c. Are any steps planned during the current reporting period to improve the level of self reporting by ethnicity

## 4. Workforce data

a. What period does the organisation's workforce data refer to?

# Report on the WRES indicators, continued

## 5. Workforce Race Equality Indicators

Please note that only high level summary points should be provided in the text boxes below – the detail should be contained in accompanying WRES Action Plans.

	Indicator	Data for reporting year	Data for previous year	Narrative – the implications of the data and any additional background explanatory narrative	Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective
	<b>For each of these four workforce indicators, compare the data for White and BME staff</b>				
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. Organisations should undertake this calculation separately for non-clinical and for clinical staff.				
2	Relative likelihood of staff being appointed from shortlisting across all posts.				
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.				
4	Relative likelihood of staff accessing non-mandatory training and CPD.				

# Report on the WRES indicators, continued

	Indicator	Data for reporting year	Data for previous year	Narrative – the implications of the data and any additional background explanatory narrative	Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective
	<b>National NHS Staff Survey indicators (or equivalent)</b> For each of the four staff survey indicators, <u>compare the outcomes of the responses for White and BME staff.</u>				
5	KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.	White BME	White BME		
6	KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.	White BME	White BME		
7	KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion.	White BME	White BME		
8	Q17. In the last 12 months have you personally experienced discrimination at work from any of the following? b) Manager/team leader or other colleagues	White BME	White BME		
	<b>Board representation indicator</b> For this indicator, <u>compare the difference for White and BME staff.</u>				
9	Percentage difference between the organisations' Board voting membership and its overall workforce.				

**Note 1.** All provider organisations to whom the NHS Standard Contract applies are required to conduct the NHS Staff Survey. Those organisations that do not undertake the NHS Staff Survey are recommended to do so, or to undertake an equivalent.

**Note 2.** Please refer to the WRES Technical Guidance for clarification on the precise means for implementing each indicator.

## Report on the WRES indicators, continued

6. Are there any other factors or data which should be taken into consideration in assessing progress?

7. Organisations should produce a detailed WRES Action Plan, agreed by its Board. Such a Plan would normally elaborate on the actions summarised in section 5, setting out the next steps with milestones for expected progress against the WRES indicators. It may also identify the links with other work streams agreed at Board level, such as EDS2. You are asked to attach the WRES Action Plan or provide a link to it.

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