



Workforce Race Equality Standard (WRES) Summary Report 2018-19

Presented for:	Approval
Presented by:	Simon Howard – Equality, Diversity and Inclusion Lead
Scrutinised by:	Hospital Management Committee People and Performance Committee
Strategic goal:	Recruiting, developing and retaining our workforce
Date:	26 th July 2019
Regulatory relevance:	Equality and Diversity Human Rights Commission Care Quality Commission
NHS Constitution delivery	The NHS provides a comprehensive service, available to all The NHS is accountable to the public, communities and patients that it serves
Equality and Diversity	This report reflects equality and diversity requirements throughout
Freedom of Information Release	This report can be released under the Freedom of information Act 2000
Private Debate	This report is being considered in the private section of the Board due to Commercial Confidentiality.

Summary

The Trust is required under the NHS England Workforce Race Standard to submit an annual online report and submit data. This report summarises the Trust's position in the previous financial year and provides a conclusion for the information.

Integrated Performance Report

Not required

Board Assurance Framework Context

Contribution to achievement of strategic objectives, identified risks and mitigating actions.

Key Points for Decision and Discussion

- Understanding of the Trust's position in relation to the Workforce Race Equality Standard as at 31 March 2019

Action required from the Board of Directors

- To read and approve the content of the report for publication on the Trust website and submission to NHS England

The following papers make up this report

- Workforce Race Equality Standard (WRES) Summary Report 2018-19
- Workforce Race Equality Standard (WRES) Data Sheet

Simon Howard

Equality, Diversity and Inclusion Lead

Contents

- 1 Workforce Race Equality Standard (WRES)**
- 2 Online Report**
 - 2.1 Overview**
 - 2.2 Background Information**
 - 2.3 Self-Reporting**
 - 2.4 Workforce Data**
 - 2.5 Workforce Equality Indicators**
 - 2.6 Other Information**
- 3 Conclusion**
- Appendix 1 Non-Clinical Staff Data**
- Appendix 2 Clinical Staff – Not Including Medical and Dental Data**
- Appendix 3 Medical and Dental Data**
- Appendix 4 WRES Datasheet**

1. Workforce Race Equality Standard (WRES)

Workforce Race Equality Standard (WRES) is a requirement for NHS commissioners and NHS healthcare providers including independent organisations, through the NHS standard contract.

In 2014 the NHS Equality and Diversity Council announced 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.

This is important because studies show that a motivated, included and valued workforce helps deliver high quality patient care, increased patient satisfaction and better patient safety.

In April 2015, after engaging and consulting with key stakeholders including NHS organisations across England, the WRES was mandated through the NHS standard contract, starting in 2015/16.

The WRES measures key metrics over a period of time to show changes in representation across an organisation.

This document allows the Trust to identify which pay points under or over represent each group in comparison with an average for that staff group.

2 Online Report

2.1 Overview

Organisation North West Anglia NHS Foundation Trust

Date of Report (Month/Year) July 2019

Name of Board lead for the Workforce Race Equality Standard

Louise Tibbert, Director of Workforce and Organisational Development

Name and contact details of lead manager compiling this report

Simon Howard, Equality, Diversity and Inclusion Lead. - simon.howard2@nhs.net

Peterborough City Hospital, Bretton Gate, Peterborough, PE3 9GZ

Names of commissioners this report has been sent to

NHS Cambridgeshire and Peterborough CCG

Name and contact details of co-ordinating commissioner this report has been sent to

Somitra Kawal - soomitra.kawal@nhs.net

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

<https://www.nwangliaft.nhs.uk/advice-support/equality-diversity/>

2.2 Background Information

Any issues of completeness of data:

NWAngliaFT was formed in April 2017. 2017/18 was therefore the first year a return was completed for the merged Trust. In the previous years two returns were submitted for each of the predecessor Trusts; Peterborough and Stamford Hospitals NHS Foundation Trust and Hinchingbrooke Hospital NHS Trust.

The staff survey data for 2017/18 was merged so comparisons can be made for the purpose of the Workplace Race Equality Standard. 2018/19 has not been subject to this process.

Any matters relating to reliability of comparisons with previous years:

The Trust has transferred from NHS Jobs to the TRAC applicant tracking system from November 2018.

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

www.nwangliaft.nhs.uk/advice-support/equality-diversity/

2.3 Self-Reporting (at 31st March 2019)

Total number of staff employed within this organisation at the date of the report: 6494

Proportion of BME staff employed within this organisation at the date of the report: 21.39%

The proportion of total staff who have self-reported their ethnicity: 96.75%

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

- Data validation exercise completed in March 2019.
- Active campaign to improve reporting rates at induction from 2017
- Data collection at recruitment

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

- Data validation exercise will be completed annually in March of each year.
- Continued request for demographic information at recruitment and induction of new starters
- Continued requests to complete data to existing staff.
- Continued data collection through internal recruitment processes

2.4 Workforce Data

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

April 2018 to March 2019

2.5 Workforce Race Equality Indicators

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
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.	See Appendices	See Appendices	See summary narrative for each appendix.	Review of recruitment and selection policy and process is in progress to include more representative selection panels Revised and improved recruitment and selection training introduced in 2018
2 Relative likelihood of staff being appointed from shortlisting across all posts.	28.87% (BME) compared to 30.56% (White)	15.20% (BME) compared to 22.47% (White)	The percentage for this indicator shows a significant narrowing in the likelihood of BME and White staff groups being appointed but white staff maintain an advantage.	TRAC introduced from November 2018 Improved MI Information used to inform actions on recruitment and selection
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.	8 cases - 0.58% BME compared to 35 cases 0.72% White	7 cases 0.56% BME compared to 35 cases 0.69% White	Whilst there is one more case within the BME group in 2018/19, BME groups are still less likely to enter a formal disciplinary process. The most likely group to enter formal disciplinary proceedings in 2018/19 is Unknown with 2 cases (0.95%)	Disciplinary processes are under review to include improved representation from protected groups and to focus on prevention rather than sanction

4	Relative likelihood of staff accessing non-mandatory training and CPD.	64.29% (BME) compared to 53.19% (White)	39.41% (BME) compared to 27.75% (White)	While the gap has narrowed in 2018/19, BME groups are significantly more likely to undertake non-mandatory training	Improved method of recording non-mandatory training is being piloted for review in 2020
5	KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.	White 29.37%	White 28.35%	The Trust has seen a reduction in the proportion of BME staff reporting harassment from patients of the public, meaning white staff are now more likely to experience this, however this remains marginal as was the previous year.	Work continues to attempt to reduce the overall rate of bullying and harassment by patients, relative or the public. Renewed focus on Dignity at Work throughout 2019/20 Refresh of G20 Programme on leadership and culture
		BME 28.99%	BME 29.23%		
6	KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.	White 20.54%	White 27.25%	The data shows a significant increase in the likelihood of BME staff experiencing bullying or abuse from other staff and a significant decrease in the situation for white staff, the situation now means BME staff are 3.08% more likely to experience this than white staff whereas in 2017/18 they were 9.07% less likely.	Significant increase in the delivery of Equality and Diversity training to staff has been implemented in 2018/19. This includes a component on dealing with harassment and bullying. Renewed focus on Dignity at Work throughout 2019/20 Refresh of G20 Programme on leadership and culture
		BME 23.62%	BME 18.18%		
7	KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion.	White 86.91%	White 88.06%	There has been a significant downturn (-12.5%) in the percentage of BME staff within the Trust believing the trust offers equal opportunities.	Development of BME Staff Network with senior leadership. Refresh of EDI Steering Group from July 2018 and to be reviewed in 2019 Divisional EDI Leads have been identified. Reverse Mentoring pilot program planned for July to December 2019 for execs and junior staff.
		BME 69.55%	BME 82.05%		

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	5.49%	White	7.69%	Whilst there has been a reduction of 2.2% for white staff reporting discrimination from their managers, there has been a significant increase in the number of BME staff reporting this + 4.51%.	The first trial of reverse mentoring has been designed with the executives being mentored by junior BME staff. Bias training has been introduced for new managers from 2017 and refreshed in 2018 as part of the effective managers programme. This will be rolled out to a broader group of existing management during 2019/20.
		BME	17.21%	BME	12.20%		
9	Percentage difference between the organisations' Board voting membership and its overall workforce.	16.9% White	15.1% White	-13.7% BME	-12% BME	There has been a reduction in the representation of BME board members in 2018/19	Director of Workforce and Organisational Development has leadership role as executive champion CEO and Non-Executive Director have been recruited as Equality, Diversity and Inclusion Sponsors to be in post from July 2019. Diversity Action Plan includes: <ul style="list-style-type: none"> • Embed EDI and V&Bs in Recruitment and selection training for Trust Board • Attract greater diversity within the NEDs so that it is more representative of staff and service users • Develop understanding of EDI with Governors and members • Increase EDI awareness of Trust Board Members
		-3.2% Unknown	-3.2% Unknown				

2.6 Other Information

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

From 1st December 2018 the trust has

- refreshed and accelerated the EDI Workforce Program
- set up a new EDI Steering Group
- Sought and identified senior divisional EDI Leads
- Appointed the CEO and a Non-Executive Director as EDI Sponsors
- Appointed Director of Workforce and Organisational Development to lead EDI programme and act as an executive champion
- Transferred the Trust's EDI Lead to the Workforce and Organisational Development Workforce Division from 3rd December 2018

The data contained within this report includes information from the staff survey in October 2018 prior to this change.

2.6.2 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.

<https://www.nwangliaft.nhs.uk/advice-support/equality-diversity/>

3. Conclusion

The North West Anglia NHS Foundation Trust is the product of a merger between two previous Trusts, the Peterborough and Stamford NHS Foundation Trust and the Hinchingsbrooke Hospital NHS Trust. It appears the 2018/19 data shows a rebalancing of the combined statistics to more of an average of the two trust prior to merger and perhaps the relatively strong results from 2017/18 represent a statistical anomaly.

The data from 2018/19 shows there is more to do to improve the position of the Trust. It is disappointing the Trust has reported a downturn in much of the experience of BME staff.

The Trust remains committed to improving staff experience and reducing inequality. Significant resource has been allocated to addressing the imbalance including:

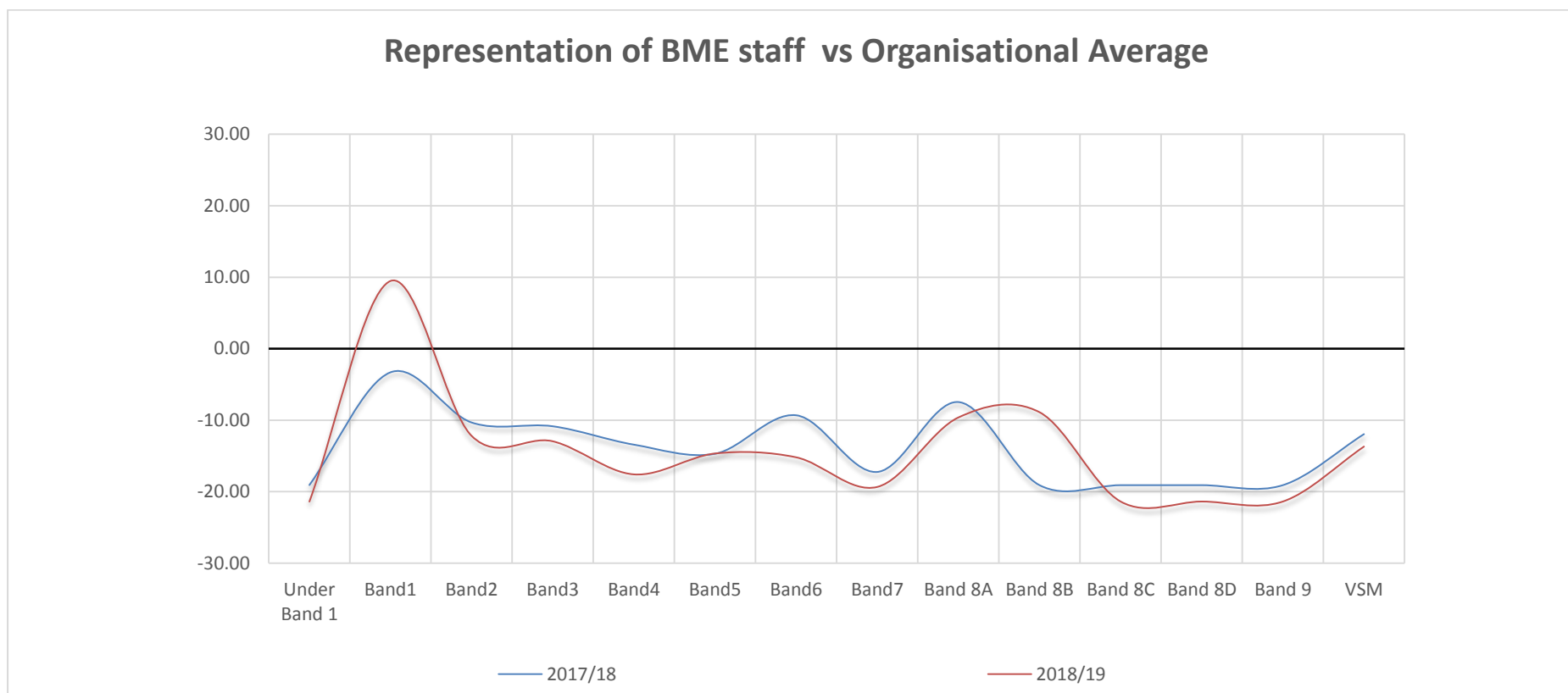
- Dedicated EDI personnel within the Workforce and Organisational Development Directorate
- The refresh of the EDI Steering Group including senior divisional representation
- The piloting of Reverse Mentoring
- Appointment of CEO and Non-Executive Director as EDI Sponsors

The Trust is committed to act upon the 2018/19 WRES data and enact a robust set of strategies to improve the Trust's position and the experience of BME staff.

Appendix 1 – Non-Clinical Staff

Non-Clinical WRES Representation

The graphs show significant under representation of BME groups at almost all levels of non-clinical staff with the exception of band 1 which has seen a large shift into over representing BME staff. Whilst there has been a large improvement in representation at band 8b, band 8a has reduced slightly as have bands 8c and above have no representation except for one staff member at the level VSM.



Non-Clinical WRES Data

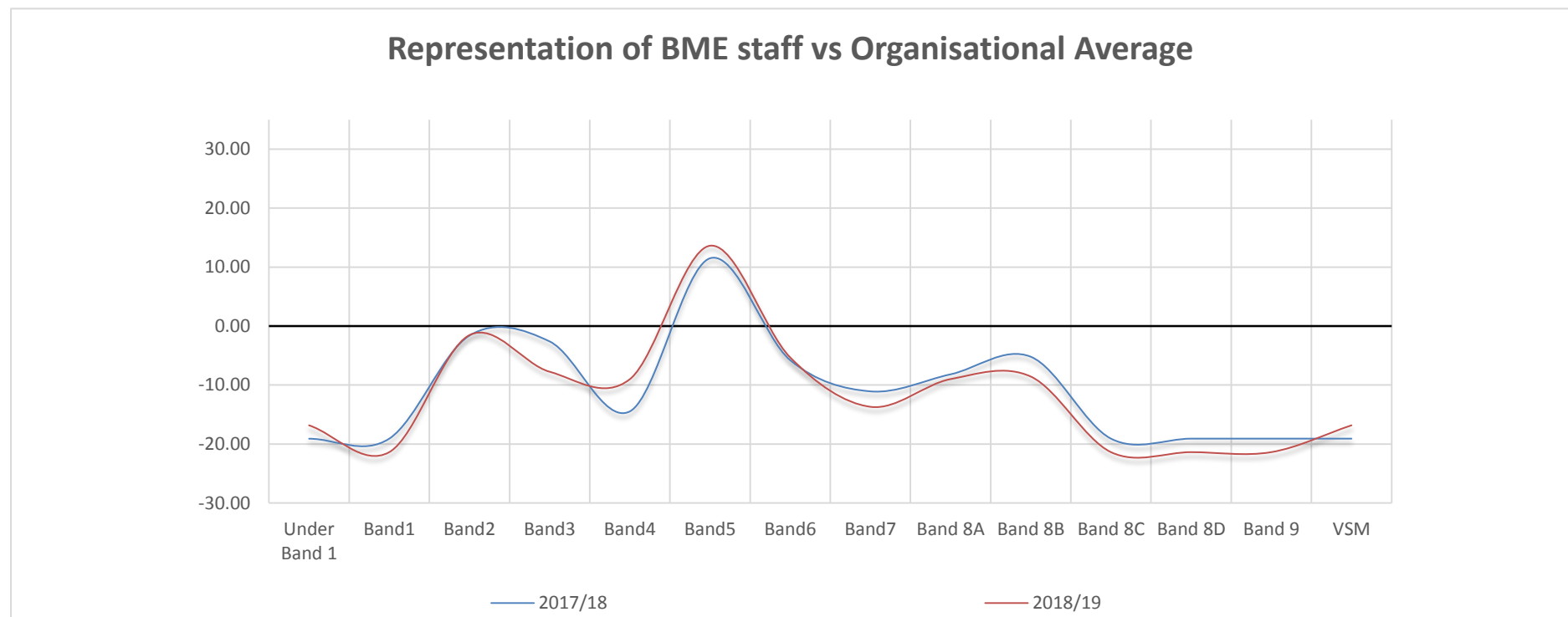
	BME 2017/18		White 2017/18		Unknown 2017/18		BME 2018/19		White 2018/19		Unknown 2018/19	
	Total	Percent	Total	Percent	Total	Percent	Total	Percent	Total	Percent	Total	Percent
<Band 1	0	0.00	0	0.00	0	0.00	0	0.00	7	100.00	0	0.00
Band 1	3	15.79	16	84.21	0	0.00	25	30.86	50	61.73	6	7.41
Band 2	52	8.77	528	89.04	13	2.19	53	9.19	513	88.91	11	1.91
Band 3	30	8.24	330	90.66	4	1.10	30	8.43	321	90.17	5	1.40
Band 4	16	5.67	262	92.91	4	1.42	10	3.80	251	95.44	2	0.76
Band 5	5	4.39	106	92.98	3	2.63	8	6.72	109	91.60	2	1.68
Band 6	9	9.78	83	90.22	0	0.00	6	6.19	89	91.75	2	2.06
Band 7	1	1.85	52	96.30	1	1.85	1	2.04	47	95.92	1	2.04
Band 8A	5	11.63	36	83.72	2	4.65	4	11.76	30	88.24	0	0.00
Band 8B	0	0.00	19	95.00	1	5.00	3	12.50	21	87.50	0	0.00
Band 8C	0	0.00	10	100.00	0	0.00	0	0.00	10	83.33	2	16.67
Band 8D	0	0.00	6	100.00	0	0.00	0	0.00	3	100.00	0	0.00
Band 9	0	0.00	6	100.00	0	0.00	0	0.00	6	100.00	0	0.00
VSM	1	7.14	13	92.86	0	0.00	1	7.69	12	92.31	0	0.00

Appendix 2 - Clinical Staff – Not Including Medical and Dental

Clinical (Not Including Medical and Dental) WRES Representation

The graphs below show representation of BME staff compared with White staff at all pay banding points for clinical (not including medical and dental) staff.

The graphs show a widening of the under-representation of BME staff in management positions from band 7 upwards (there are no clinical staff at band 9), which can be attributed in most to the increased representation of BME staff across the organisation, and an increase in the over-representation of BME staff at band 5. Band 2 provides the closest to average representation but still shows a slight disadvantage to BME staff.



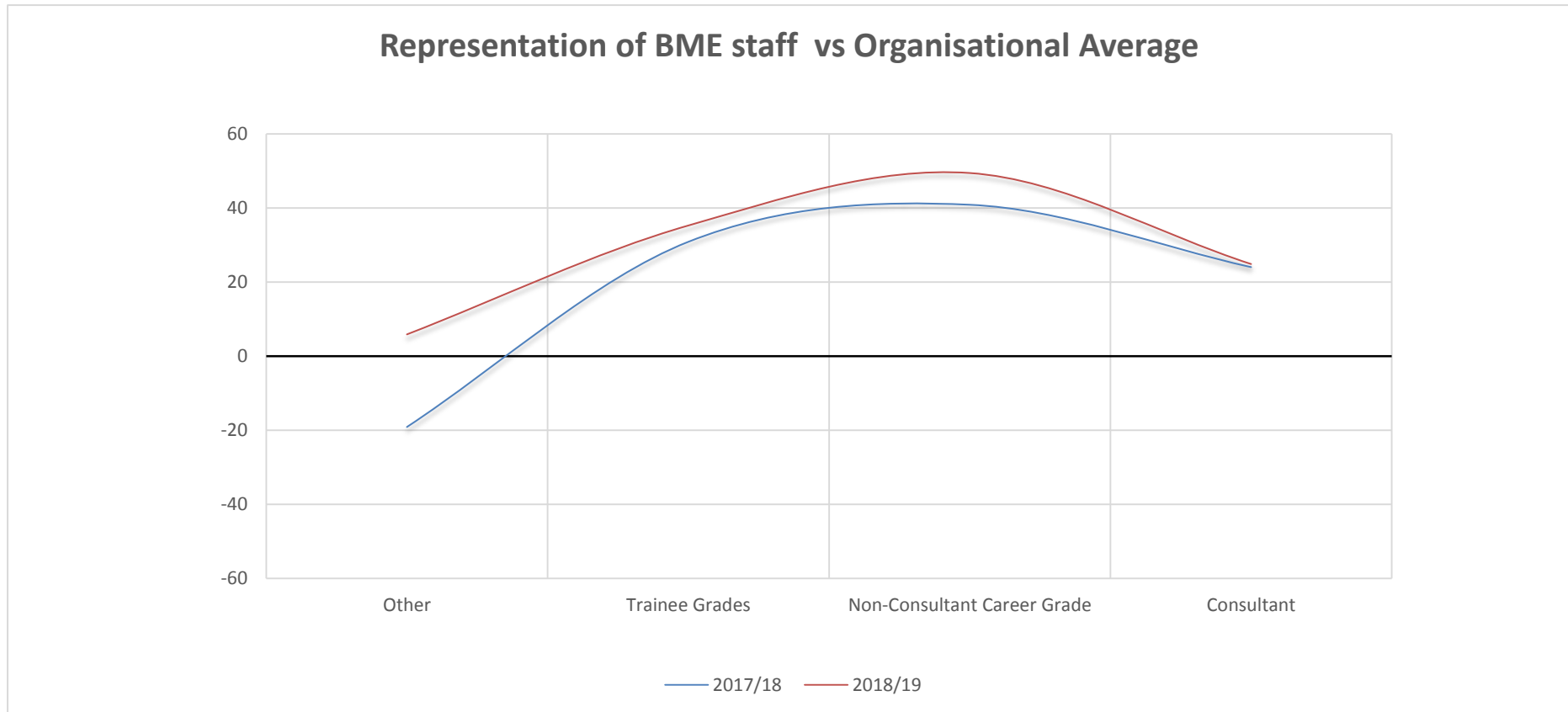
Clinical (Not Including Medical and Dental) WRES Data

	BME 2017/18		White 2017/18		Unknown 2017/18		BME 2018/19		White 2018/19		Unknown 2018/19	
	Total	Percent	Total	Percent	Total	Percent	Total	Percent	Total	Percent	Total	Percent
<Band 1	0	0.00	8	100.00	0	0.00	1	4.55	21	95.45	0	0.00
Band 1	0	0.00	3	100.00	0	0.00	0	0.00	3	100.00	0	0.00
Band 2	168	17.48	773	80.44	20	2.08	187	19.85	737	78.24	18	1.91
Band 3	32	16.49	151	77.84	11	5.67	21	13.64	131	85.06	2	1.30
Band 4	6	4.62	119	91.54	5	3.85	24	12.37	147	75.77	23	11.86
Band 5	392	30.60	840	65.57	49	3.83	415	35.02	713	60.17	57	4.81
Band 6	119	13.31	760	85.01	15	1.68	136	16.06	700	82.64	11	1.30
Band 7	45	8.02	502	89.48	14	2.50	42	7.69	491	89.93	13	2.38
Band 8A	12	10.91	96	87.27	2	1.82	14	12.39	98	86.73	1	0.88
Band 8B	5	13.89	30	83.33	1	2.78	5	12.82	33	84.62	1	2.56
Band 8C	0	0.00	16	100.00	0	0.00	0	0.00	13	100.00	0	0.00
Band 8D	0	0.00	2	100.00	0	0.00	0	0.00	4	100.00	0	0.00
Band 9	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
VSM	0	0.00	8	100.00	0	0.00	1	4.55	21	95.45	0	0.00

Appendix 3 - Medical and Dental

Medical and Dental WRES Representation

The representation of BME staff at non-consultant and consultant grades has increase in 2018/19. This cohort represent a major characteristic of the Trust's overall representation and is the only group to continually over-represent BME staff in senior management positions.



Medical and Dental WRES Data

	BME 2017/18		White 2017/18		Unknown 2017/18		BME 2018/19		White 2018/19		Unknown 2018/19	
	Total	Percent	Total	Percent	Total	Percent	Total	Percent	Total	Percent	Total	Percent
Other	0	0.00	4	100.00	0	0.00	1	25.00	3	75.00	0	0.00
Trainee Grades	154	50.00	111	36.04	43	13.96	204	54.40	127	33.87	44	11.73
Non-Consultant Career Grade	54	60.00	27	30.00	9	10.00	48	68.57	19	27.14	3	4.29
Consultant	142	43.16	177	53.80	10	3.04	150	43.99	184	53.96	7	2.05