

NHS WORKFORCE RACE EQUALITY STANDARD (WRES)

ANNUAL REPORT 2020



INTRODUCTION

The WRES is a set of specific measures (metrics) which enables NHS organisations to compare the workplace and career experiences of our black, Asian and minority ethnic (BAME) and White staff. NHS trusts use the metrics data to develop and publish an action plan. Year on year comparison enables trusts to demonstrate progress against the indicators of race equality.

This report is produced from the SaTH data returns submitted from the Trust ESR data in March 2020 and from the 2019 Staff Survey. It is produced in a nationally mandated format as submitted to NHS England and covers data and reported experience from 2019-20.

The WRES demonstrates our clear commitment in developing the SaTH to be an exemplar employer and in supporting the UK Government's aims of increasing representation in the workplace to ensure employees from Black, Asian and minority ethnic backgrounds have equal access to career opportunities and receive fair treatment in the workplace.

EXECUTIVE SUMMARY

We are committed to developing our Equality, Diversity and Inclusion work programme and recognise that during 2018-2019, the period to which this report relates, that the lack of a dedicated lead to drive this are of work, has impacted upon the pace of change and our ability to embed our work.

We want SaTH to be a workplace where staff feel a sense of belonging and are encouraged to bring their whole self to work, without fear or feeling unsafe or unsupported.

At SaTH, we do not tolerate any form of discrimination or harassment from colleagues, patients or the public and will ensure that our staff feel confident to report any issues so that they can be supported.

It is reassuring to see that our workforce demographic is changing and that now over 13% of our workforce is from a BAME background. We are delighted to welcome our International nurses from India who will be a tremendous support.

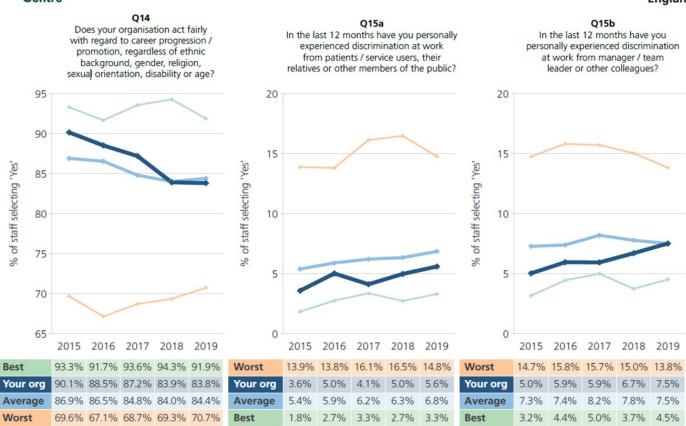


WRES PROGRESS IN 2019/20

Staff Survey Findings:

Survey Coordination Centre 2019 NHS Staff Survey Results > Theme results > Detailed information > Equality, diversity & inclusion 1/2





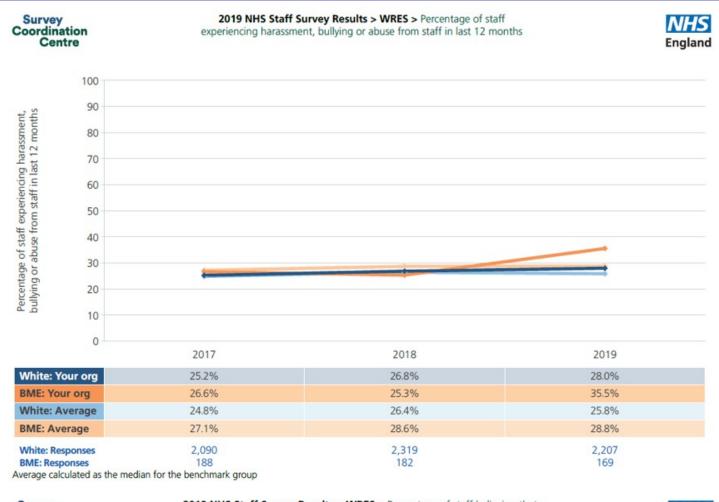
WDES FINDINGS

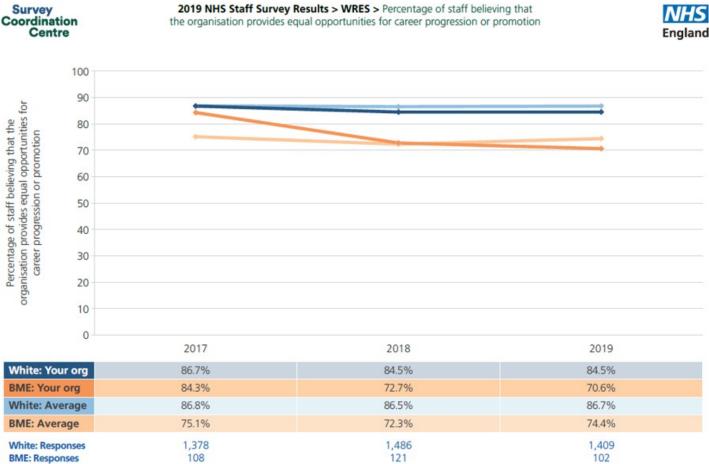
Positive staff survey feedback: WRES

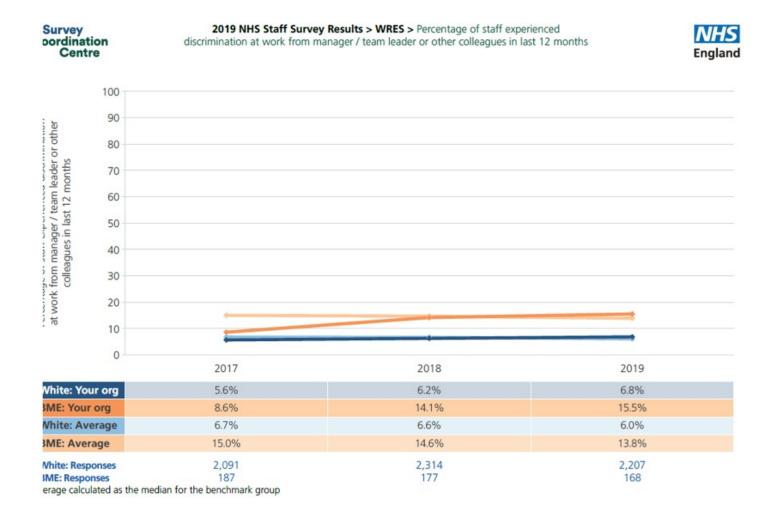
 Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months has decreased from 32.4 to 30.6%

Areas of especial concern identified relate to the experience of BAME colleagues include:

- bullying and harassment by staff
- career progression
- discrimination by line managers
- appointment from shortlisting







CONCLUSION AND NEXT STEPS

The proposed initial action plan is attached to this document and has been drafted in partnership with our new staff network and will be developed in more detail through Equality Diversity Inclu-sion Lead for SaTH and progressed by our Equality, Diversity and Inclusion group, once established.

As part of our response to COVID-19 pandemic, which evidenced that people from a BAME background to be more vulnerable to the virus, we wrote out to all our BAME colleagues to reassure them and also offer appropriate support and guidance. The risk assessments were introduced and completed by all BAME staff, including Bank and Agency staff. This has been the catalyst to our progress and we are developing a robust framework via our EDI Lead to support our BAME colleagues.



APPENDIX 1: WRES METRICS REPORT

Detailed below is the organisation's WRES data which was submitted in August 2020 covering the period April 2019- March 2020.

Metric 1 Percentage of staff in AfC pay bands or medical and dental subgroups and very senior managers (including executive board members) compared with the percentage of staff in the overall workforce.

1a) Non Clinical workforce	2019	2020	2019 BME	2020 BME	2019 not	2020 Not
	White	White			Declared	Declared
Under Band 1	#DIV/0!	%	#DIV/0!	%	#DIV/0!	0.00%
Band 1	89.92%	89%	10.08%	11%	0.00%	0.00%
Band 2	95.79%	93%	3.93%	7%	0.28%	0.00%
Band 3	94.16%	95%	4.67%	4.10%	1.17%	0.36%
Band 4	96.59%	96%	2.73%	3%	0.68%	1%
Band 5	99.24%	99%	0.76%	1%	0.00%	0.00%
Band 6	98.67%	99%	1.33%	1%	0.00%	0.00%
Band 7	96.88%	96%	3.13%	4%	0.00%	0.00%
Band 8A	91.11%	91%	8.89%	9%	0.00%	0.00%
Band 8B	95.65%	100%	4.35%	0.00%	0.00%	0.00%
Band 8C	86.67%	89%	13.33%	11%	0.00%	0.00%
Band 8D	100.00%	100.00%	0.00%	0.00%	0.00%	0.00%
Band 9	100.00%	67%	0.00%	33%	0.00%	0.00%
VSM	93.75%	84%	6.25%	11%	0.00%	5%
1b) Clinical workforce of which Non-	2019	2020	2040 BME	2020 PME	2019 Not	2020 Not
Medical	White	White	2019 BME	2020 BME	Declared	Declared
Under Band 1	0%	0%	#DIV/0!	0.00%	#DIV/0!	0.00%
Band 1	92.86%	0.00%	5.71%	0.00%	1.43%	0.00%
Band 2	91.06%	91%	8.27%	8%	0.67%	1%
Band 3	93.07%	75%	4.38%	22%	2.55%	3%
Band 4	91.38%	91%	8.62%	9%	0.00%	0.00%
Band 5	83.94%	80%	14.40%	18%	1.66%	2%
Band 6	91.91%	92%	6.15%	6%	1.94%	2%
Band 7	95.16%	94%	3.69%	5%	1.15%	1%
Band 8A	97.09%	96%	1.94%	3%	0.97%	1%
Band 8B	91.43%	90%	5.71%	8%	2.86%	2%
Band 8C	100.00%	100%	0.00%	0.00%	0.00%	0.00%
Band 8D	100.00%	100%	0.00%	0.00%	0.00%	0.00%
Band 9	0.00%	50%	100%	50.00%	0.00%	0.00%
VSM	50.00%	100%	50%	0.00%	0.00%	0.00%

The implications of the data and any additional background explanatory narrative

The Trust's overall BAME representation has increased from 11.16% to 13.77%. We have seen the greatest increase in our nursing staff with the arrival of our international nurses from India. We have also seen an increase Clinical Band 5-8B. Indeed progression for BAME staff is not observable in non-clinical grades.

As one of its EDS Equality Objectives, the Trust had sought to establish if there was an appetite for a BAME group. We now have established a new BAME and Allies network which began to help shape our priorities and work programme.

Also, responding to the staff survey findings, we are looking at targeted development programme for BAME staff. The Cultural Ambassadors programme will be a development opportunity for BAME staff but also provide learning for the organisation in relation to unconscious bias and cultural competence.

Metric 2 – Relative likelihood of BAME staff compared to White staff being appointed from shortlisting across all posts

(Data source: Trust's recruitment data)

	Relative likelihood in 2019	Relative likelihood in 2020
Relative likelihood of White staff being appointed from shortlisting compared to BAME staff	1.34	1.61
compared to BAINE Stan		

The implications of the data and any additional background explanatory narrative:

Action taken and planned.

The recruitment process in both medical and non -medical recruitment has been reviewed and streamlined. The Trust uses an applicant tracking system to record all applicants and the outcomes of their application. When shortlisting the recruiting manager does not see any personal identifiable data to stop unintentional bias. A recommendation from a recruitment audit has led to the changes in the recruitment process to ask for two people to do all shortlisting and a robust training package is being developed to train recruiting managers, this package includes a module on bias.

The Trust will be working with an external agency to improve all recruitment materials to appeal to the population that the Trust serves.

Metric 3 – Relative likelihood of BAME staff compared to White staff entering the formal disciplinary process, as measured by entry into the formal procedure.

(Data source: Trust's HR data)

	Relative likelihood in 2018/19	Relative likelihood in 2019/20
Relative likelihood of BAME staff entering formal	1.07	0.44
capability process compared to White staff		

The implications of the data and any additional background explanatory narrative:

These figures show a consistent reduction from the 2016 data of BAME staff being over 4 times more likely to enter the formal disciplinary process than white staff. In line with the Dido Harding Recommendations in 2019 the Trust has taken steps to avoid formal processes wherever possible and is committed to a restorative approach. We have also reviewed out decision making processes to ensure plurality in decision making at all stages of formal disciplinary processes.

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

	Relative likelihood in 2018/19	Relative likelihood in 2019/20
Relative likelihood of White staff accessing non- mandatory training and CPD compared to BAME staff	0.93	1.02

The implications of the data and any additional background explanatory narrative:

The implications of the data and any additional background explanatory narrative:

There has been a reduction in the proportion of BAME staff recorded as accessing non-mandatory training during 2019/20. A number of non-mandatory training events were cancelled or reduced during 2019-20 as a result of increasing performance pressure on the Trust. Staff attendance at non-mandatory training external or medical events is not recorded centrally on ESR/OLM, so the true statistics could be very different once ESR/OLM self-service is implemented during 2021 when staff would be able to record their own learning.

Consultation will take place with our BAME network group to understand barriers to accessing non-mandatory and CPD training. We have increased our recording on ESR, but it has not been possible to capture medical non-mandatory training from Equiniti Appraisal System where a significant proportion of BAME staff non-mandatory training is recorded for revalidation purposes (a high proportion of SaTH BAME staff are in medical roles). We will explore ways of formally recording this data during 2020-21 to improve the robustness of our data.

Metrics 5 - 8 (Data source: Questions 14, 11, 5, 28b, NHS Staff Survey)

	BAME staff responses to 2018 NHS Staff Survey	White staff responses to 2018 NHS Staff Survey	% points difference (+/-) between BAME staff and White staff responses 2018	BAME staff responses to 2019 NHS Staff Survey	White staff responses to 2019 NHS Staff Survey	% points difference (+/-) between BAME and White staff responses 2019
	Percentage (%)	Percentage (%)		Percentage (%)	Percentage (%)	
5) Staff experiencing harassment, bullying or abuse from patients/ service users, their relatives or other members of the public	32%	28%	+4%	30%	27%	+3%
in the last 12 months 6) Staff experiencing harassment, bullying or abuse from staff in the last 12 months	25%	27%	-2%	35%	28%	+7%
7) Percentage believing that trust provides equal opportunities for career progression or promotion.	72%	84%	-12%	70%	84%	-14%
8) In the last 12 months have you personally experienced discrimination at work from any of the following? Manager/team leader or other colleagues	14%	6%	+12%	16%	7%	+9%

Metric 9 - Percentage difference between the organisations' Board voting membership and its overall workforce.

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

	BAME Board members in 2019	White Board members in 2019	BAME Board members in 2020	White Board members in 2020
	Percentage (%)	Percentage (%)	Percentage (%)	Percentage (%)
Percentage difference between the organisation's Board voting membership and its organisation's overall workforce, disaggregated by Exec/non-exec and Voting/non-voting.	Voting 2.4%	Voting 1.2%	Voting +0.2%	Voting -1%

The figures are automatically calculated on the WRES template and show a decline in BME Board representation.

APPENDIX 2: WRES ACTION PLAN 2020/21

WRES Action Plan 2020/2021

Objective	Intention	Responsibility	Ву
Develop the new BAME staff network and seek Chair/Co -Chair from within the network. Ensuring members feel supported and encouraged to participate. Develop a robust communications and marketing plan for the networks and encourage Active Allies	To increase staff voice and engagement from key staff groups	Equality, Diversity & Inclusion Lead	Dec 2020
Review Staff survey findings for Harassment and bullying by staff colleagues	Improve on figures 2019 35% 2018 25.3%	Head of Employee Relations/ Equality, Diversity & Inclusion Lead	Jan 2021
Conduct confidential survey and Listening Events of BAME staff in conjunction with (FTSU) Guardians.	To increase staff voice and engagement from key staff groups	Equality Diversity & Inclusion Lead & FTSU Lead	March 2021
Embed the Cultural Calendar develop a programme of events to mark: -Holocaust Memorial Day -South Asian History Month -Gypsy and Traveller Month -Black History Month	To create an inclusive workplace, valuing diversity and creating a sense of belonging	Equality, Diversity & Inclusion Lead & Head of Communications	Jan 2021
Introduce a BAME Development Programme 'Cultural Ambassadors Programme'	To support career development and progression and develop organisational learning	Head of Workforce Transformation and OD and Workforce Equality Lead	Oct 2020
Develop Positive Action recruitment activity such as: -targeted media and publicity campaigns -Improve representation in publicity and marketing materials -develop positive case studies of existing employees	To increase representation in the Trust of underrepresented groups	Head of Recruitment & Equality, Diversity & Inclusion Lead	March 2021
Review Implement Diversity elements of Leadership Academy and Manager Training and include Unconscious Training and Cultural Competence	To ensure our managers and Leaders are skilled and trained in diversity management.	Head of Workforce Transformation and OD and Workforce Equality Lead	March 2021

