

Workforce Race Equality Standard 2016/17

1. Introduction / Background

NHS England introduced the Workforce Race Equality Standard (WRES) in April 2015 which requires health providing organisations to publish information relating to their workforce, comparing BME staff (Black or Minority Ethnic groups) to White staff. There are 9 outcomes to evidence, the data for which has been sourced from ESR, NHS jobs, Datix and the National Staff Survey.

Consultation with BME staff is a requirement of the standard; therefore the evidence was discussed with the Minority Ethnic Group, a staff network group, to examine the evidence, seek views on their experiences and to explore possible ways to improve for the future. The feedback from this group informed the WRES action plan.

The WRES evidence requires uploading to NHS England, publication on the Trust website and provided to CCG.

2. Workforce Race Equality Standard evidence

NHS England introduced the WRES to encourage health organisations to address the lack of BME workforce in senior management positions and the poorer outcomes which exist for BME staff.

NHS England has produced two templates for organisations to complete with relevant information, one to be uploaded to NHS England via Unify and one to be published on the Trust's website.

This year's WRES report shows there have been improvements and regressions made in the last year requiring an updated action plan indicating the next steps needed to support further improvements.

There are nine outcomes to provide evidence for in the WRES.

Outcome 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.

2015/16

Ethnic Origin by Payscale & Clinical / Non-Clinical	White		BME		Unspecified		Total
	Clinical	Non-Clinical	Clinical	Non-Clinical	Clinical	Non-Clinical	
1	2	33	0	3	0	0	38
2	944	611	25	15	52	28	1675
3	355	262	9	3	15	10	654
4	187	276	4	2	11	12	492
5	1120	134	30	1	56	9	1350
6	717	84	11	2	35	2	851
7	338	77	5	0	11	5	436
8A	61	24	2	1	0	3	91
8B	23	22	0	0	3	0	48
8C	12	11	0	0	0	2	25
8D	3	8	0	0	0	0	11
9	2	5	0	0	0	1	8
Medical Staff	487	0	97	0	176	0	760
Medical Leadership	11	0	0	0	2	0	13
VSM	0	5	0	0	0	2	7
Spot	22	6	0	0	0	0	28
Total	4284	1558	183	27	361	74	6487

2016/17

Ethnic Origin by Payscale & Clinical / Non-Clinical	White		BME		Unspecified		Total
	Clinical	Non-Clinical	Clinical	Non-Clinical	Clinical	Non-Clinical	
1	0	26	0	3	0	0	29
2	906	503	21	12	46	17	1505
3	388	310	11	3	15	10	737
4	197	335	2	3	7	10	554
5	1126	140	32	2	56	10	1366
6	760	101	13	4	40	3	921
7	366	72	7	0	17	5	467
8A	63	29	2	1	1	4	100
8B	24	20	0	0	2	1	47
8C	13	12	0	0	0	3	28
8D	3	10	0	0	0	0	13
9	2	5	0	0	0	1	8
Medical Staff	463	0	87	0	217	0	767
Medical Leadership	11	0	0	0	2	0	13
VSM	0	5	0	0	0	2	7
Spot	3	8	0	0	0	1	12
Total	4325	1576	175	28	403	67	6574

It is difficult to compare the Trust's performance to the national and regional

picture due the fact that BME groups only represent 1.8% of the population of Cornwall; however, there has been a slight increase of BME staff within bands 6 and 7 in the last year. This is a positive move forward but there is still no representation of ethnic minority groups in the more senior roles. Fifteen per cent of medics are from a minority ethnic background; however, none are within the senior medical leadership.

This will remain on the WRES action plan focusing on the recruitment process and supportive career progression.

Outcome 2

Relative likelihood of staff being appointed from shortlisting across all posts.

2015/16

CLINICAL	Applied	Shortlisted	% shortlisted from applied	Appointed	% appointed from shortlisting
White	8,659	4062	46.9%	655	16.1%
BME	1275	335	26.2%	26	7.8%
Undisclosed	203	121	60%	29	24%

NON - CLINICAL	Applied	Shortlisted	% shortlisted from applied	Appointed	% appointed from shortlisting
White	9,623	2311	24.0%	287	12.4%
BME	646	92	14.2%	9	10%
Undisclosed	120	43	35.8%	11	25.6%

2016/17

Clinical	applied	shortlisted	% shortlisted from applied	appointed	% appointed from shortlisting
WHITE	8522	2525	29.63%	573	22.69%
BME	1268	217	17.11%	12	5.53%
Undisclosed	150	67	44.67%	29	43.28%

Non-clinical	applied	shortlisted	% shortlisted from applied	appointed	% appointed from shortlisting
WHITE	10323	1906	18.46%	273	14.32%
BME	523	67	12.81%	4	5.97%
Undisclosed	99	36	36.36%	10	27.78%

The tables above show that there has been a significant reduction in the percentage of appointed from shortlisting for individuals from a BME background compared to White and unknown ethnicity, however the numbers shortlisted are a third less than last year which may have in impact on the percentage difference. There has been difficulty obtaining data relating to recruitment due to the move over to Trac from NHS Jobs reporting. Trac is not capturing the appointed candidates for medics. Until a solution can be found this information will be manually collated to enable effective reporting next year.

Audits are planned to analyse the data from a Divisional and speciality perspective.

Any surveys relating to the recruitment process will be analysed for each characteristic and the information used to improve the process.

Outcome 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.

2016/17			2015/16		
Ethnicity	Disciplinary	%	Ethnicity	Disciplinary	%
White	78	62.4%	White	127	95.49%
BME	0	0%	BME	1	0.75%
Unspecified	47	37.6%	unspecified	5	3.76%
Total	125		Total	133	

The table above shows that the likelihood of a person who identifies as BME entering the disciplinary process has reduced from 0.25 likelihood to 0. There does not appear to be any concerns for this outcome, therefore this is not included on the WRES action plan.

Outcome 4

Relative likelihood of staff accessing non-mandatory training and CPD.

	2015/16	Likelihood of White staff accessing training compared to BME staff	2016/17	Likelihood of White staff accessing training compared to BME staff
White	2095	1.3	2900	0.94
BME	58		108	
Unknown			340	

The table shows that over half of the total BME workforce have accessed CPD training in the last year compared to 49.17% of the total White workforce. This compares favourably with the national picture as the average score across England is 1.1. Although this outcome appears to suggest that there is not a problem with BME staff attending CPD events it will remain on the WRES action plan due to the link with poorer career progression.

Outcome 5

National NHS Staff Survey indicators (or equivalent) For each of the four staff survey indicators, compare the outcomes of the responses for White and BME staff.

KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.

2016		2015		There has been a significant decrease in the number of BME declaring that they have been bullied/harassed in the last year.	Zero Tolerance to Discrimination protocol has been introduced to ensure patients behaviour is challenged in an appropriate and consistent way.
White	27.43%	White	28.20%		
BME	25.93%	BME	32.43%		

A data analysis report published by NHS England earlier this year revealed that nationally White and BME staff are equally likely to experience harassment, bullying or abuse from patients, relatives or members of the public. The evidence taken from the 2016 Staff Survey for this Trust shows that BME staff were slightly less likely to report this than their White colleagues. The regional average for the South in 2015 was 31% of BME staff disclosing that they had experienced this behaviour. This will remain on the WRES action plan.

Outcome 6

KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months

2016		2015		There is a slight increase in BME staff declaring that they have experienced bullying and harassment since last year.	This is on the Trust's WRES action plan and via EDS2
White	29.76%	White	31.92%		
BME	28.40%	BME	28%		

The NHS England data report found that nationally the percentage of White staff experiencing bullying/harassment was 24% and BME staff 27%, therefore the results for this Trust are above average. A Trust wide Anti-bullying campaign is planned to be rolled out in the autumn to try to tackle, what may appear to be, a bullying culture within the organisation. Also, with the recruitment of the Freedom to Speak Up Guardian and the revamp of the previous Independent Listener role evolving into Freedom to Speak Up Advocates, it is hoped that reporting of these issues will be more comfortable for victims and this resource can be utilised in place of the Datix system.

This remains on the WRES action plan.

Outcome 7

KF 21. Percentage believing that the trust provides equal opportunities for career progression or promotion.

2016		2015		This has improved over the last year.	This remains on the Trust's WRES action plan
White	83.05%	White	83.02%		
BME	71.43%	BME	68.75%		

This has seen an improvement of almost 3% in the last year for BME staff, however, there is still a gap of almost 12% between the belief of BME staff that career progression is fair within the Trust compared to White staff. The NHS England data report reveals that the overall percentage of White staff reporting that their Trust provides equal opportunities for career progression is 89% and BME is 74% which highlights that the Trust scores below this. This will remain on the WRES action plan so further improvements can be supported.

Outcome 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

2016		2015		This has increased for both staff groups in the last year.	This item is on the Trust's WRES action plan
White	7.54%	White	7.21%		
BME	17.26%	BME	14.67%		

It is concerning that the total number of staff have reported an increase in discrimination in the workplace over the last year, especially the rise of 2.5% for BME staff. The NHS England data report shows the percentage of White staff reporting discrimination decreased to 6% from 2014 to 2015 and the percentage of BME staff reporting fell to 14%. The Trust is below average for this outcome. This will be added to the WRES action plan.

Outcome 9

Board representation indicator

For this indicator, compare the difference for White and BME staff.

Percentage difference between the organisations' Board voting membership and its overall workforce

The percentage difference between the total Board and the overall workforce is -3.4%. The Board remains 100% White which is understandable as the population of Cornwall only has a recorded 1.8% BME community. However, it may be expected that the very senior managers may include some individuals from a non-White background.

3. Conclusion

There have been several improvements in the WRES outcomes over the last year and two concerning negative trends relating to recruitment and discrimination from other workers. Both of these items are included on the WRES action plan for actions to be taken to improve these areas over the coming year. The action plan will be monitored through the Equality & Inclusion steering Group and the People and Organisational Development Committee.

4. Recommendation

- Take note of the WRES data for 2016/17
- Promote and participate in the improvements identified in the WRES action plan
- Agree to the publication of the WRES reporting templates and action plan onto the Trust's website