

Senior Executive Leadership Group

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068

18 Aug 2020

Purpose Information

Action

Monitoring

Title Workforce Race and Disability Equality Standards

report

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Summary:

This report provides an update on the Workforce Race and Disability Equality Standards (WRES/WDES) following the requirement of submission of data to NHS England by 31st August 2020. The submission of that data is part of the NHS Standard Contract requirements. NHS England specify that the data results should be shared with the Trust Board.

There have been improvements in the data over the last 12 months;

- For WRES the Trust has improved on 8 out of the 9 indicators with 1 deteriorating
- For WDES the Trust has improved on 7 indicators with 3 declined and 1 stayed the same.

The Committee is asked to:

- Note the report
- Sign off the recommended action plans
- Sign off the data to be submitted on the Strategic Data Collection Service (SDC) website and ELHT websites as per our contractual requirements.

Report linkages

Related strategic aim and corporate objective (Delete as appropriate)

Put safety and quality at the heart of everything we do

Invest in and develop our workforce

Related to key risks

Failure to achieve performance requirements of the





identified on assurance framework (Delete as appropriate)

(Monitor) NTDA compliance and risk assessment framework and regulatory standards.

Failure to maintain staffing levels and staff competencies to deliver high quality services

Failure to achieve the reputation of a provider of

choice

Failure to deliver high quality clinical services

Impact (delete yes or no as appropriate and give reasons if yes)

Legal Yes Financial Yes

Equality Yes Confidentiality No

Previously considered by: N/A



Purpose of report

- To provide the information to the Senior Executive Leadership Group on the Workforce Race and Disability Equality Standards (WRES / WDES).
- 2. To update the group on our submission of the WRES & WDES data, as per our contractual requirements.

Background

- The Workforce Race & Disability Equality Standards (WRES/WDES) are part of the NHS Standard Contract and supports NHS organisations to be compliant with the Equality Act 2010 and the 2017 Regulations. It was launched by NHS England in July 2015.
- 4. The NHS Workforce Race & Disability Equality Standards are designed to improve workplace experience and career opportunities for Black Asian Minority Ethnic and disabled people working, or seeking employment, in the Trust.
- 5. The Workforce Race Equality Standard (WRES) is a set of nine specific measures (metrics) and the Workforce Disability Equality Standard (WDES) has 10 metrics that enables ELHT to compare the experiences of Black Asian Minority Ethnic compared to white staff and disabled staff compared to non-disabled staff. This information is then used to develop a local action plan, and enable the Trust to demonstrate progress against the indicators.

2020 Data Submission

- 6. The WRES/WDES is a mandated standard, and trusts are required to submit data as part of the requirements laid out in section 13.8 of the NHS Standard Contract.
- The 2020 WRES/WDES data has to be submitted on the NHS Digital Strategic Data Collection Service (SDCS) by Monday 31st August 2020





Summary of the WRES / WDES data 2020 for submission

- 8. There have been improvements over time in a number of the key metrics for both WRES & WDES.
 - For WRES the Trust has improved on 8 out of the 9 indicators with 1 deteriorating, refer to Appendix 1
 - For WDES the Trust has made slight improvements on 7 indicators with 3 deteriorating and 1 staying the same, refer to Appendix 2

Key priorities and Action up to 31st March 2021

9. The WRES & WDES improvement actions are highlighted in appendix 3 & 4.

Recommendation:

- 10. The committee is asked to
 - Note the report
 - Sign off the recommended action plans
 - Sign off the data to be submitted to NHS England by 31st August via the Strategic Data Collection Service (SDC) and ELHT websites





Appendix 1 WRES 2020 Submission data

The latest assessment of race equality in ELHT – shows a significant increase in representation of BAME staff at Board level, as the Trust continues its drive to reduce gaps in experience of employees from different ethnic groups, in order to support staff and improve patients' care.

	Indicator	2019	2020	Trackir Progre		Narrative – the implications of the data and any additional background explanatory narrative
1	Percentage of BME staff, VSM (including executive Board members and senior medical staff) compared with the percentage of white staff in the overall workforce	See Appendix	See Appendix	•	↑	Table 1 shows Improvements in representation at Board, overall BAME staff in the workforce have increased by 2% (213) in the last 12 months, Total BAME is 18% although not reflective of the local population of 26%, 8% short.
2.	Relative likelihood of White staff being appointed from shortlisting compared BAME staff	2.15	1.10		<u> </u>	The likelihood of BAME staff being appointed after shortlisting is now 0.10 in favour of White staff indicating that the work on unconscious bias training and other interventions for recruiting managers has had a positive impact.
3.	Relative likelihood of BAME staff entering the formal disciplinary process, compared to White staff	1.42	0.88		<u> </u>	The gap between BAME and White staff going through the formal disciplinary process has reduced and is now 0.88 in favour of BAME staff indicating that the work on unconscious bias training, informal resolution and FTSU staff guardian has had a positive impact
4	Relative likelihood of White staff accessing non-mandatory training and CPD as compared to BAME staff	1.14	1.22	1		Slight Improvement on last year
		White	BAME	White	BAME	
	Staff Survey Indicators 2019	20)19	20)20	
5.	KF25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months	25%	22%	24%	23%	1% decline on last year
6.	KF26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months	22%	25%	20%	24%	1% improvement on last year
7	KF21. Percentage believing that the Trust provides equal opportunities for career progression or promotion	88%	67%	90%	73%	6% improvement on last year
8	Q17B. In the last 12 months have you personally experienced discrimination at work from any of the following? b) Manager/team leader or	6%	16%	5%	14%	2% improvement on last year





9	Boards are expected to be					Our BAME Board representation has doubled
	broadly representative of the	88.2%	11.8%	77.8%	22.2%	over the past year, we now have an Executive
	population they serve				A	BAME Board member and 3 NED's

Table 1- Comparison of number of BAME & White staff in post from 1st April 2019 – 31 March 2020 (Data taken from the Electronic Staff Record (ESR)

Ethnicity & Band	Headcount 2019	Headcount 2020	Difference in number of staff over last 12 months
White	6980	7246	266
BAME	1428	1641	213
Not Stated/Undefined	100	103	3
Grand Total	8508	8990	482
White			
Band 1	115	16	-99
Band 2	1547	1678	131
Band 3	1015	1077	62
Band 4	562	592	30
Band 5	1342	1366	24
Band 6	1254	1303	49
Band 7	561	597	36
Band 8A	206	221	15
Band 8B	56	63	7
Band 8C	26	27	1
Band 8D	15	14	-1
Band 9	9	9	-
Very Senior Managers	23	22	-1
Non AfC Consultants, non-consultants and Trainees	148	261	113
BAME			
Band 1	30	3	-27
Band 2	301	336	35
Band 3	109	145	36
Band 4	58	71	13
Band 5	324	368	44
Band 6	183	222	39
Band 7	54	65	11
Band 8A	19	23	4
Band 8B	2	2	-
Band 8C	2	2	-
Band 8D	1	3	2
Band 9	0	0	-
Very Senior Managers	0	3	3
Non AfC Consultants, non-consultants and Trainees	345	398	58





Appendix 2 WDES 2020 Submission data

Summary Report: The latest assessment of disability equality in ELHT – shows slight improvements in 7 indicators, 3 deteriorating and 1 remained the same.

	Indicator	2019	2020	RAG	Narrative – the implications of the data and any additional background explanatory narrative
1	Percentage of staff in AfC pay bands or medical and dental subgroups and VSM (including Executive Board members) compared with the percentage of staff in the overall workforce.	See Appendix 1	See Appendix 1		Tables 2, metric 1 clearly show that the percentage of disabled staff in both the non-medical and medical workforce is very low. It also highlights in both tables that there are high percentage of the workforce which record as either "unknown" or a "null" response.
2.	Relative likelihood of non- Disabled staff being appointed from shortlisting compared to disabled staff	0.70	1.05	1	A figure above 1.00 indicates that Disabled staff are less likely than Non-Disabled staff _to be appointed from shortlisting. It should be noted that the Trust is part of the Department of Work and Pensions scheme are a Disability Confident Employer, and therefore operate a guaranteed interview scheme for disabled applicants who meet the minimum person specification.
3.	Relative likelihood of Disabled staff entering the formal capability process compared to non-disabled staff	2.83	3.50	1	Note: This Metric is based on data from a two- year rolling average of the current year and the previous year. Total no of disabled entering the formal capability process 1 compared to 8 non-disabled.
4	a) % of Disabled staff experiencing harassment, bullying or abuse from				
	I. Patients/Service users, their relatives or other members of the public	32% disabled staff 23% non-	31% disabled staff 22% non-	1	1% improvement on last year
		disabled staff	disabled staff		
	II. Managers	18% disabled staff	16% disabled staff	1	2% improvement on last year





				ı	
		9% non-	8% non-		
		disabled	disabled		
		staff	staff		
		26%	24%		2% improvement on last year
	III. Other colleagues	disabled	disabled		·
	Care concagace	staff	staff		
		Stall	Stall		
				1	
		400/	4.40/		
		16% non-	14% non-	_	
		disabled	disabled		
		staff	staff		
4b	Percentage of Disabled	47%	53%		6% improvement on last year
	staff compared to non-	disabled	disabled		'
	disabled reporting	staff	staff		
		Stall	Stall	1	
	harassment, bullying or				
	abuse at work			_	
		49% non-	49% non-		
		disabled	disabled		
		staff	staff		
5	Percentage of Disabled	700/	040/		Key: ND = Non- Disabled
	staff compared to non-	79%	81%		
	disabled staff believing that	disabled	disabled		
	the Trust provides equal	staff	staff		
	opportunities for career				2% more Disabled staff feel that they receive
	• •			-	equal opportunities in terms career
	progression or promotion.			•	progression or promotion at work compared to
		87% ND	89% ND		non-disabled staff.
6	Percentage of Disabled			<u> </u>	10% more Disabled staff felt pressured to
•	•				· ·
	staff compared to non-	25%	30%		attend work, despite not feeling well enough to
	disabled staff saying that	disabled			perform their duties compared to non-disabled
	they have felt pressure from		disabled		staff.
	their manager to come to	staff	staff		
	work, despite not feeling				
	well enough to perform their				
		000/ 1:5	000/ 1:=		
	duties	22% ND	20% ND		
7	Percentage of Disabled	4.407	4507		1% improvement on last year
"	_	44%	45%		1 /0 improvement on last year
	staff compared to non-	disabled	disabled		
	disabled staff saying that	staff	staff		
	they are satisfied with the				
	extent to which their			1	
	organisation values their				
	work	57% ND	59% ND		
	· - · · ·				
			1	1	



8	Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work	76%	77%	1	1% improvement on last year
9	a) The staff engagement score for Disabled staff, compared to non-disabled staff and the overall engagement score for the organisation.	7% disabled staff 7% ND	7% disabled staff 7.4 ND	+	No change
9b	Has your trust taken action to facilitate the voices of Disabled staff in your organisation to be heard? (yes) or (no	Yes	Yes		The Trust has a Disability Employee Network and a Mental Health & Wellbeing staff network
10	Percentage difference between the organisation's Board voting membership and its organisation's overall workforce, disaggregated: By Voting membership of the Board By Executive membership of the Board	Disabled 3% Non- Disabled 53% Not declared 44% Total 100%	Disabled 6% Non- Disabled 72% Not declared 22% Total 100%	*	No Change from last year only 1 Board Member has a disability



Table 2 - Comparison of number of staff in post from 1st April 2019 – 31 March 2020 (Data taken from the Electronic Staff Record (ESR)

	2019	2020	
	Headcount	Headcount	Difference in number of staff over last 12 months
Disability & Non Disability	2019	2020	Stall Over last 12 months
Disabled	246	294	48
Non-Disabled	5556	5657	101
Not Stated/Undefined	2704	3039	335
Grand Total	8506	8990	484
Disability			
Band 1	9	0	-9
Band 2	55	77	22
Band 3	45	45	-
Band 4	24	22	-2
Band 5	45	55	10
Band 6	41	49	8
Band 7	14	22	8
Band 8A	6	6	-
Band 8B	1	0	-1
Band 8C	1	2	1
Band 8D	0	1	1
Band 9	0	0	-
Very Senior Managers	0	1	1
Non AfC Consultants, non-consultants and Trainees	5	14	9
Non-Disability			
Band 1	67	0	-67
Band 2	1006	1055	49
Band 3	803	831	28
Band 4	470	478	8





Band 5	952	952	-
Band 6	1008	1044	36
Band 7	455	464	9
Band 8A	167	171	4
Band 8B	37	35	-2
Band 8C	13	13	-
Band 8D	12	11	-1
Band 9	6	7	1
Very Senior Managers	7	8	1
Non AfC Consultants, non-consultants and Trainees	553	582	29



Appendix 3 - WRES Action Plan 2020 - 2022

Description of Objective	Who is leading	Progress notes	Evidence	Actions	Timescales
Executive, Senior Management and Board buy-in and are accountable			>Reverse Mentoring,	Buy-in from other senior and middle managers	Mar 20
for inclusion Unified approval from the Trust Board to examine and	Operational	Execs buy-in established and senior	>Exec Panel with BAME > Kevin McGee BAME network Sponsor,	Board Development session	May 21
initiate change, plus extending this to other executives and senior management colleagues sharing an interest in the subject for their input and involvement in formulating a strategy.	Director of HR&OD	managers are committed to improve race equality	>Board approval of WRES and People Plan Strategies in place >Improved BAME representation on Board	Senior leaders and board members will have performance objectives on workforce race equality and inclusion built into their appraisal process	Next appraisal and then Annually
Embedding Race Equality within vison and values. Adding terminology around 'equity' and 'inclusivity' (at all levels), would really transmit a high-level sense of belonging.	Operational Director of HR&OD EDI Lead	Inclusion Statement of intent published during Festival	Inclusion Statement of intent published	Remove Effective from SPE to read Safe Personal, Inclusive and Compassionate	Next review of values Aug 21
Increase the number of executive and non-executive board members from a BAME background in ELHT	Operational Director of HR&OD EDI Lead	Wres metric on this has improved	1 x Medical Director 3xNed's	Recruit 2 more BAME Executive Directors to reflect local population.	Mar 22
Board and senior leaders to be mentored on Race Equality	Operational Director of HR&OD EDI Lead	Not in place	Not in place	Source a mentor(s) for Board	Feb 21





	I		T		1
Create a new Star Award - Leadership for Inclusion	Jane Butcher	Agreed in principle	Award category included	To start at the next Star awards in 2021	July 21
BAME network is going to be really crucial is supporting Board members learn about Race equality so plan more panel sessions with the Exec team	Operational Director of HR&OD EDI Lead	One meeting taken place	Meeting held 23rd June	Future exec panel meetings to be planned quarterly	Dec 20 Apr 21 July 21 Oct 21
Embed WRES within divisions	Divisional General Manager's	Not in place	Not in place	WRES data to be standing agenda item within all DMB's	Quarterly
Encourage allyship – this is a prerequisite for tackling racism and developing accountability by inviting Managers at all levels and matrons to be actively involved with and attend BAME network meetings, as it drives normalisation of conversations around race and will help to address various perspectives and the way that racism manifests, through bullying and harassment, macro and microaggression, weathering and debunking the myth perpetuated around the "race card".	EDI Lead Matrons/ Managers	Not in place	Not in place	Invite managers & matrons to BAME meetings.	Dec 20 & then bimonthly
Build EDI into manager's annual appraisals and PDR's.	Associate Director of Engagement, OD & wellbeing	Not in place	Not in place	Build EDI objectives for all managers	Next Appraisal & then annually
Reverse Mentoring Scheme to be	EDI Lead	24 staff going through	All Execs have a mentor	Reverse mentoring rolled out to middle managers	April 21





Review and audit the who recruitment cycle, getting right by ensuring fair and recruitment and selection – including formal and sof promotion and developme activities e.g. Introducing interview panels for all po Agenda for Change. Pay which can be built on to in best practice and inclusive recruitment policy and apy with positive action where representation exists. Recruitment review In cor with recruitment work alre undertaken, ensure all sewithing the organisation in BAME member as part of interview panel and (re)interview panel and auditability	the basics consistent processes ft ent diverse sts above band 6, mplement e proach, e under- njunction eady being nior posts aclude a the troduce	Head of Resourcing EDI Lead	Project group set up to progress this work	>Two meetings have taken place >Scoping exercise completed >Action plan in place	Involve staff network members in the project group Implement Action Plan	Dec 20 Mar 21
Talent Management of BA to include acting up oppor stretch assignments, second etc.	rtunities,	Head of Education Operational Director of HR&OD	Not in place	Not in place	Develop TM strategy	Aug 21



Developing future leaders via workforce planning Adopt a 'hire for attitude, train for skills' approach and fulfil the equity and inclusion agenda. Targeting schools and colleges en route.	Head of Education Workbased Learning Lead DGM's	Workbased learning team works with schools & colleges, developed links with job centre plus	> Work experience > Step into the NHS > Apprenticeships	Undertake a workforce planning exercise for upcoming management positions within each division or directorate over the next 5-years and constructing a bespoke, undergraduate learning and development pathway	Starting June 21 & then annually
Enhanced EDI training for managers at all levels					
Training and development, Improve both cultural awareness and managerial training. Elaborate on the existing unconscious bias training and/or (as literature suggests) develop a bespoke cultural awareness training package (either in-house or with UCLan), structured through lived experiences of ELHT staff.	Head of Education EDI Lead	EDI and Unconscious Bias training in place	>Part of CMT >Bespoke sessions on UB being delivered	Staff training mandatory & statutory and strengthening the Cultural & Religious Awareness and Unconscious Bias	Aug 21
Bespoke Leadership development programme to develop staff from lower levels to help them with their progression	111-(516	Some BAME staff have	>Diverse Leaders >Engaging managers,	Design and develop a	May 21
Targeted programmes that can help to address historic imbalances in access to development and career progression for ethnic minority staff.	Head of Education	accessed leadership development programmes	>NHS leadership programmes e.g. stepping up >Shadow Board	new leadership programme for BAME staff	



Through a regular drum beat of communications raise the profile and visibility of BAME staff in many of our publications, channels, events and web resources					Dec 20
Proactive communication Before, during and after any implementations, an effective communication substrategy is imperative. In this instance formulating a 'campaign' type approach using social media, staff bulletins and the intranet could be advantageous.	Acting Director of Communications	Ad hoc communications	>Festival of Inclusion >Risk Assessments > Awareness days	Develop Communications Plan for Race equality	
A committee with a voice, reviewing the remit, makeup, leadership and objectives of the BAME network. Consider proportionately representing peer groups and renaming to Race Equality Committee. Also, enable an opt in/out option for all BAME staff i.e. the BAME network and revise methods of communication in line with the new sub-strategy.	BAME Co-Chairs	In progress, BAME network is engaged and thriving and has successfully given BAME staff a voice and is instrumental in influencing culture change	TOR, Meetings well attended, Progress is tracked, Current arrangements working well, good engagement, good mix of makeup of network	>Monitor progress on Actions > Improve awareness of network to increase membership and attendance	Next review Dec 20 then Quarterly
EDI Statement of Intent pledge is visibly displayed across all sites	Acting Director of Communications EDI Lead	EDI statement approved	Published in Other News	Display in main entrances and in corridor of restaurant	Dec 21
Include staff stories to be shared at Trust Board to highlight the lived experience of BAME staff	Operational Director of HR&OD Staff networks	Not in place	Not in place	Capture staff stories via networks	May 21





Workshops and discussions Participants should be empowered to discuss their experiences, good, bad or indifferent without the fear of repercussion. Perhaps a series of 'let's talk about race' conversations could be formulated and delivered in parallel with the general 'Big Conversations' and/or within the Festival of Inclusion'. Such sessions would also supplement the cultural awareness training.	Operational Director of HR&OD BAME Co-Chairs	Let's talk about Race delivered during FOI	Let's talk about Race delivered during FOI	Plan more sessions within divisions	Dec 20 Family Care Corporate Feb 21 Community Apr 21 Surgery Medicine ICS
Integrated support infrastructure Empower divisional and/or profession specific, BAME champions to work alongside and support the Staff Guardian (including the newly appointed BAME champions). Periodic review of cases via 'surgeries' and escalate to the newly formed Race Equality Committee. Eliminating the ethnicity gap in relation to numbers of staff entering formal disciplinary processes - introduction of Employee Relations Review Panel	FTSUP Guardian Head of HR	>BAME champions recruited >ER cases are reviewed by the Employee Relations Case Review Group with representatives from the BAME network	Employee Relations Case Review Group in place	FTSUP champions to receive training	Jan 21



Amendments to the Trust's policy framework to ensure policies support the removal of racism from the workplace and allow for positive action to be taken where it can be objectively justified.	Head of HR	As Above	As above	A positive first step will be the explicit definition of racial abuse as a specific gross misconduct (in addition to discrimination) in the Disciplinary policy. Social media policies to be amended to define that the publishing, sharing, encouraging or promoting of racist material will be treated as a gross misconduct	May 21
Adopt the Mayo Clinic Wellbeing Index to support BAME staff wellbeing and resilience	Consultant Gynaecologist Operational Director of HR&OD	Preparing a business case for investments needed across the ICS for this which includes all five provider Trusts	Data collected from ICS to support with BC	>Awaiting feedback from Lee Barnes >Quotation from Mayo Clinic >Business case approval	May 21 Board
Risk assessment of all BAME staff	Deputy Director of HR&OD	Risk assessments ongoing	All BAME staff risk assessed	>External audit of risk assessments	Dec 20



Appendix 4 - WDES Action Plan 2020 - 2022

	Action planned	Lead/ Responsible for action	Completion Date
1.	Communication & Engagement plan in relation to the theme of disability	EDI Lead Associate Director of Engagement, OD & Wellbeing Staff Network groups	Dec 2020
2.	Improve Disability disclosure and Data cleanse exercise to focus on reducing the large percentage of staff who record unknown or null in their disability/ability status	EDI Lead Head of ESR Staff Network groups	Mar 2021
3	To improve recruitment and retention of disabled people via Equality Impact Assessment of the whole employee lifecycle (i.e. recruitment and retention, performance reviews, development, ER cases, exit questionnaires, staff engagement) in relation to disability	EDI Lead Head of Resourcing	Dec 2020
4	Education (for both staff with disabilities and for managers) and breaking down stigma	EDI Lead	Feb 2021
5	Achieve the Department for Work and Pensions (<i>DWP</i>) Disability Confident Employer (<i>level 2</i>) and Leader (Level 3) Charter mark.	EDI Lead	Level 2 Dec 2020, Level 3 Dec 2022





6.	Develop a disability resource guide to help staff and managers	EDI Lead	Jan 2021
	understand their responsibilities under the Equality Act 2010 in relation to supporting disable staff by removing the barriers that deny	Staff Networks	
	disabled people equality of outcome in the workplace, (including reasonable adjustments, access to work support, definitions of disability, etc.).	Head of Occy health	