# Workforce Race Equality Standard

## **REPORTING TEMPLATE** (Revised 2016)

## Template for completion

| Name of organisation | Date of report: month/year | |
|---|---|---|
| Northamptonshire Healthcare NHS Foundation Trust | July | 2017 |

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

Chris Oakes, Director of Human Resources & Organisational Development

**Name and contact details of lead manager compiling this report**

David Ledger, Senior HR Business Partner

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

NHS Nene Clinical Commissioning Group/NHS Corby Clinical Commissioning Group

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

Alison Jamson, Director of Quality and Safeguarding at Nene CCG and Corby CCG

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

https://www.nhft.nhs.uk/documents

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

Chris Oakes, Director of Human Resources and Organisational Development

Publications Gateway Reference Number: 05067

# Report on the WRES indicators

## 1. Background narrative

### a. Any issues of completeness of data

None

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

None

## 2. Total numbers of staff

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

3466

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

10.33%

## 3. Self reporting

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

94.37%

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

The Trust has rolled out ESR Self Service which gives employees access to their personal information held on the NHS Electronic Staff Record System. This will provide employees with the means to update their own ethnicity data and the Trust will promote this extensively in the coming year.

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

Over the next 12 months the Trust will communicate to staff members the importance, relevance and significance of reporting ethnicity and other protected characteristics. It is proposed that a campaign to update personal data will improve the level of self reporting by ethnicity.

## 4. Workforce data

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

1st April 2016 to 31st March 2017

## 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 |
|---|---|---|---|---|---|
| | **For each of these four workforce indicators, compare the data for White and BME staff** | | | | |
| 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. | Percentage of total workforce:<br><br>Non-Clinical white<br>Band 1 - 2.60%<br>Band 2 – 4.24%<br>Band 3 - 5.05%<br>Band 4 - 3.03% | Percentage of total workforce:<br><br>Non-Clinical white<br>Band 1 - 2.88%<br>Band 2 - 5.08%<br>Band 3 - 5.79%<br>Band 4 - 3.59% | Overall BME representation is 10.3% of the workforce. BME representation for non-clinical staff has increased from 8.59% in 2016 to 8.87% in 2017. This is in the context of the Trust reducing its non clinical workforce by 11.92% in the reporting period. BME representation in non-clinical grades Band 5 and above remains disappointing. Within the clinical staff group BME | The Trust WRES action plan identifies actions being taken to promote/support career progression of BME staff which will in time impact on the proportionality of BME across staff bands .We continue to foster stronger links with our community and the BME network has made and continues to make significant progress in engaging with both BME staff and the BME |
| 2 | Relative likelihood of staff being appointed from shortlisting across all posts. | White staff are 1.54 times more likely to be appointed | White staff are 1.99 times more likely to be appointed | The Trust is disappointed with the figures and is committed to delivering corrective action. Detailed analysis of recruitment data will enable us to understand any hot spot areas and target interventions. | The Trust ensures recruiting managers are trained in appropriate interviewing techniques as well as equality and diversity. A understanding unconscious bias session was delivered by Binna Kandola at the Trusts Leadership Conference in March 2017. The session was well received with the outputs shared across the organisation. Further improvements are detailed in the WRES |
| 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. | BME staff are 3.43 times more likely to enter the formal process | BME staff are 3.30 times more likely to enter the formal process | The Trust is disappointed by the figures and that no improvement was recorded from the previous year. The Trust has seen a significant reduction in formal disciplinary cases through proactive partnership working with Trade Unions, down to 27 cases in the reporting period. Further work is needed to address the disproportional impact on BME staff and understand any hot spot areas. | As part of the 2016 / 2017 WRES action plan a full independent audit was completed on all disciplinary cases. The results identified the HR process had been correctly applied in each case with each issue being appropriately addressed by a disciplinary process. The Trust will embark on the RCN Cultural Ambassador programme in the coming year and continue to strive for |
| 4 | Relative likelihood of staff accessing non-mandatory training and CPD. | White staff are 0.69 times more likely to access | White staff are 0.78 times more likely to access | This year's result shows BME staff continue to be more likely to access non-mandatory training and CPD. | We will continue to monitor the figures and ensure that there is a similarly proportionate uptake for the Trusts leadership programme to equip BME staff for career development. |

# 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 |
|---|---|---|---|---|---|
| | **National NHS Staff Survey indicators (or equivalent)**<br>For each of the four staff survey indicators, compare the outcomes of the responses for White and BME staff. | | | | |
| 5 | KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months. | White 22.97<br>BME 35.86 | White 21.31<br>BME 28.57 | The Trust is extremely disappointed by the results following significant improvements seen in 2014, 2015 & 2016. The Trust will ensure a zero tolerant approach to all forms of bullying and harassment of staff is implemented. | The Trust will continue to work with the BME Network to further reduce the levels of bullying & harassment experienced by staff. A Trust wide coordinated approach to harassment, bullying and abuse will be developed and implemented in |
| 6 | KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months. | White 18.20<br>BME 28.97 | White 18.40<br>BME 19.85 | The Trust is extremely disappointed by the data returned in the annual staff survey. We will take responsibility for the results and ensure corrective actions are undertaken. | The Trust will continue to work with the BME Network and our Trade Unions to address the levels of bullying & harassment experienced by staff. A Trust wide coordinated approach to harassment, bullying and abuse will be developed |
| 7 | KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion. | White 88.02<br>BME 75.00 | White 90.55<br>BME 74.44 | The Trust is encouraged that the result has remained stable but is seeking further improvement. This in conjunction with the fact that across key staff survey findings BME staff results are significantly better than the results for | Work across our WRES action plan will feed into this important area. Feedback from the Trusts BME Network is that adoption of the RCN Cultural Ambassador programme will signal a change of approach and send a very positive message |
| 8 | Q17. In the last 12 months have you personally experienced discrimination at work from any of the following?<br>b) Manager/team leader or other colleagues | White 6.14<br>BME 13.01 | White 5.37<br>BME 16.15 | The improvement in the index is encouraging but the Trust acknowledges there is further work to do. | The Trust will continue to work with the BME Network to reduce the levels of discrimination experienced by staff. The increased focus on Freedom to speak up may encourage staff to have the confidence to report incidents. |
| | **Board representation indicator**<br>For this indicator, compare the difference for White and BME staff. | | | | |
| 9 | Percentage difference between the organisations' Board voting membership and its overall workforce. | -0.33% | -1.4% | BME representation on the Trust board is closely aligned to the overall workforce. The board representation has remain static across the reporting years, however an increase in our BME workforce in the 2016 reporting year marginally | We continue to foster stronger links with our community and the BME network has made and continues to make significant progress in engaging with the BME community we serve. |

**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.

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

None

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.

The Trust board receives twice yearly progress reports on 'Developing a Diverse Workforce' within the organisation. The Chief Executive and Director of HR & OD are working closely with the BME network and other Diversity networks within the organisation to develop robust plans to progress the Trust's approach to Diversity and Equality.

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