Workforce Race Equality Standard

REPORTING TEMPLATE (Revised 2016)

Template for completion

Name of organisation

University Hospitals Plymouth NHS Trust

Date of report: month/year

December 2018

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

Steven Keith, Director of People

Name and contact details of lead manager compiling this report

Lisa White, Head of Operational HR

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

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

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

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

Publications Gateway Reference Number: 05067

Report on the WRES indicators

1. Background narrative

a. Any issues of completeness of data

Some of the previous data has been reported incorrectly due to the report filters. This years data provides a more accurate reflection of the current situation

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

See above

2. Total numbers of staff

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

7145

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

490 staff - 6.86%

3. Self reporting

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

96.64%

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

No

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

Any individual who has not confirmed their ethnicity will be contacted requesting them to provide this information and allow them to understand the purpose of capturing the data as noted below. During April 2019 the intention is to increase the profile of our inclusivity agenda which will include highlighting the planned work and encouraging people to share their experiences. Part of this will encourage people to feel able to share their ethnicity and allow them to understand how this will help the organisation to improve their experience of the workplace.

4. Workforce data

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

April 2017 - March 2018

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.	Non Clinical White: 96.70% BME 1.43% Clinical White: 90.96% BME 5.71% *see attached breakdown	Overall workforce data: White: 90.7% BME: 6.9%	The data indicates that BME employees are less likely to hold senior non-clinical and clinical positions in the Trust	Links to EDS2 goals 3.1, 4.1 and 4.3 Planned action to improve the workplace experience and career progression for BME staff, Workforce data confirms that BME employees are less likely to hold senior leadership roles. Planned actions:- Undertake Trust Board E&D Development / refresher event, with external specialist input.
2	Relative likelihood of staff being appointed from shortlisting across all posts.	2.05 White compared to BME	0.58 White compared to BME	Data indicates that BME employees are less likely to be shortlisted than white applicants. The worsening of this data this year has been compounded by the fact that previously Junior Doctors were included in the calculations. This year advice has been to not include them as the Trust does not shortlist and recruit, but instead only receives successful candidates a the end of	Relates to EDS2 goals 3.1, 3.3 and 4.3. Actions in addition to those above include:- Review of NHS jobs data to identify patterns and themes. Review of the Trust's Values Based Recruitment and Selection Training to ensure unconscious bias and flexible working features highly in the programme to educate managers in the
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.	0.35 BME staff compared to White	1.11 BME Staff compared to White	There are no identifiable issues	Links to EDS2 goals 3.3, 3.4, 3.6 and 4.3. Actions - Continue to monitor and evaluate data. Support middle managers in positive leadership behaviour linked to the Manager's Passport which considers inclusive and compassionate leadership
4	Relative likelihood of staff accessing non-mandatory training and CPD.	0.94 White staff compared to BME staff	1.16 White staff compared to BME staff	Comparable data	Links to EDS2 goal 3.3. Actions - Review all staff mandatory training and leadership training through the lens of E&D

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) 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 25.67 BME 30.99	White 25.87 BME 26.36	BME employees continue experience more inappropriate behaviours from the public, patients and relatives than their white colleagues. The difference in experience between BME and white colleagues has become wider since the previous	Links to EDS2 goals 3.4 and 3.6 Actions - Encourage BME employees to raise concerns. The Trust has recruited a dedicated trainer for conflict resolution, de-escalation techniques and
6	KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.	White 22.13 BME 24.77	White 23.05 BME 24.03	Comparable data.	Links to EDS2 goal 3.4 and 3.6 Actions as noted above. In addition: Share the lived experience of BME employees to support education, reinforce expected behaviours and the Trust Board commitment to dealing with
7	KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion.	White 86.04 BME 74.58	White 89.34 BME 78.16	There is a notable difference in the experience of BME and white colleagues. Although the experience of fairness had deteriorated overall during the last year, BME employees experience has deteriorated at a greater rate .	Links to EDS2 goals 3.1 and 3.3. Actions - Undertake Trust Board Refresher E&D Development, with external specialist input. Develop E&D Strategy with Trust Board and Staff
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 6.7 BME 15.02	White 6.83 BME 15.75	The experience of BME employees is notably worse than their white colleagues. The findings may correlate with the perception of fairness in recruitment processes and the workforce data demonstrates a lack of racial diversity in more	Links to EDS2 goals 3.1, 3.3, 3.4 and 3.6. In addition to actions above :- Encourage people to raise concerns and openly talk the difference in experience when promoting the inclusion agenda. Staff posters will support
	Board representation indicator For this indicator, compare the difference for White and BME staff.				
9	Percentage difference between the organisations' Board voting membership and its overall workforce.	White 10.2 BME -6.9	White 9.1 BME -6.7	Greater increase in white ratio which has increased the gap between BME employees.	Links to EDS2 goals 4.1 and 4.2. Actions - Undertake Trust Board Refresher E&D Development, with external specialist input. Develop E&D Strategy with Trust Board.

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?

Staff Survey feedback.
UHPNT temperature checks/feedback
Feedback from Equality Impact Assessments

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.

WRES Action Plan to be expanded and implemented
EDS2 work plan to be reviewed Dec 2018.

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