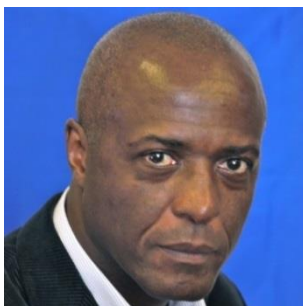


## Workforce Race Equality Standard 2020 Update and Action Plan



## Contents

INTRODUCTION .....	3
BACKGROUND .....	3
UHPs WRES FINDINGS.....	4
<i>Workforce Indicators</i> .....	4
<i>Staff Survey Feedback</i> .....	5
<i>Board Representation Indicator</i> .....	6
CONCLUSION .....	6
Appendix 1– Workforce Data .....	8
Appendix 2 – Staff Survey Results 2015-2019 .....	9

## **INTRODUCTION**

The national 2020 Workforce Race Equality Standard (WRES) submission from University Hospitals Plymouth NHS Trust (UHP) covers the period April 2019 to March 2020. The submission includes workforce data and feedback from the 2019 National Staff Survey results for UHP in relation to the key findings which contribute to WRES. Outlined below are the actions that form part of the Equality Diversity and Inclusion (EDI) Improvement Plan.

## **BACKGROUND**

WRES commenced in 2015 with NHS organisations required to annually submit workforce data and staff survey feedback in response to the WRES Metrics which are a set of measures that we are monitored against. NHS Employers explain that the WRES will focus on enabling people to work comfortably with race equality through communications and engagement. This involves working to change the deep rooted cultures of race inequality in the system, learn more about the importance of equity, to build capacity and capability to work with race. This will include embedding of accountability to ensure key policies have race equality built into their core, so that eventually workforce race becomes everyday business.

In recognition that there continues to be a lack of diversity at all levels of the NHS workforce, the target previously set through the Model Employer framework in ensuring leadership is representative of the overall BAME workforce has been brought forward from 2028 to 2025. UHP will be required to set out an action plan showing how, over the next few years, its Board and senior workforce will match the BAME composition of the overall workforce or the local community, whichever is higher. According to the 2011 census 5.1% of the Devon population were BAME (including white European) and UHP's diversity is 8.5%.

The NHS review the data at a national level and overall there have been some areas of improvement although there remain to be workplace inequalities:-

### *Improvement*

- There are over 16,112 more BME colleagues across the NHS.
- The relative likelihood of BME colleagues entering a formal disciplinary process compared to white colleagues has reduced year on year.
- Since 2016, the number of BME very senior managers has increased by 30%, including an increase in the number of BME board members.
- Year-on-year increase in response rates to the NHS Staff Survey from BME colleagues.
- 29.8% of BME colleagues, and 27.8% of white colleagues, reported experiencing harassment, bullying or abuse from patients, relatives or the public. This is a deterioration compared to last year

### *Challenge*

- White applicants are 1.46 times more likely to be appointed from shortlisting.
- BME staff are over-represented in AfC band 5 and significantly under-represented in senior pay bands (AfC 8a and above).
- White colleagues are more likely to access non-mandatory training and continuous professional development (CPD) compared to BME colleagues.

- The percentage of BME and white colleagues experiencing harassment, bullying or abuse from colleagues in the last 12 months has been increasing since 2016.
- Year-on-year deterioration in BME colleagues believing career progression is fair compared to white colleagues.

More information can be found at:-

<https://www.england.nhs.uk/about/equality/equality-hub/equality-standard/>).

## UHP's WRES FINDINGS

### Workforce Indicators

Metric	Indicator
1	Percentage of staff in each of the AfC Bands 1-9 or medical and dental subgroups and very senior managers (including executive board members) compared with the percentage of staff in the overall workforce disaggregated by:- <ul style="list-style-type: none"> <li>• Non-clinical staff</li> <li>• Clinical staff – of which <ul style="list-style-type: none"> <li>▪ Non-medical staff</li> <li>▪ Medical and dental staff</li> </ul> </li> </ul>
2	Relative likelihood of staff being appointed from shortlisting across all posts. Note: refers to both external and internal posts
3	Relative likelihood of staff entering the formal disciplinary process as measured by entry into a formal disciplinary investigation.
4	Relative likelihood of staff accessing non mandatory training and CPD

- Metric 1 - Appendix 1 shows the workforce by payband, staff group and ethnicity. The workforce diversity in relation to ethnicity has improved by 1%, which is the reflection of the reintroduction of Hotel Services and continued international recruitment.
- Metric 2 - The relative likelihood of white applicants being appointed from shortlisting across all posts compared to BAME applicants is 1.26. Although this is a notable improvement on the previous years and better than the national position of 1.46, it means white applicants continue to be more likely to be appointed. In the last year, we have seen more applications from BAME applicants.
- Metric 3 - UHP's position is better than the national position at 0.72 and indicates that BAME colleagues are less likely to enter the formal disciplinary process. Reducing the gap is a target for all Trusts as part of the People Plan and will be monitored closely to ensure UHP maintain the current position.

- Metric 4 – The number of BAME colleagues who have had access to CPD has increased since last year (74% to 90%) and has improved at a greater rate than white colleagues (78% to 82%). This is reflected in the relative likelihood of BAME colleagues accessing non- mandatory training and CPD at 0.92 which is better than the national position of 1.15.

### **Staff Survey Feedback**

<b>Metric</b>	<b>Indicator</b>
5	Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months
6	Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months
7	Percentage believing that the Trust provides equal opportunities for career progression or promotion
8	In the last 12 months have you personally experienced discrimination at work from any of the following - Manager/team leader or other colleagues

The staff survey was sent to the entire workforce. There were 4602 respondents to the 2019 survey, which represented 63% of the workforce, an increase of 11% from the previous year. 297 of the respondents were BAME, which is an improvement from 2018 (199). A summary of UHP’s results since 2015 are shown at Appendix 2.

- Metric 5 - Whilst the gap between white and BAME colleagues was bridged in 2018 in relation to experiencing harassment from patients, relatives and the public, the gap has sadly widened again. 26.9% of white colleagues reported issues, and BAME colleagues saw the position worsening to 29.2%, a 2.9% increase. UHP white colleagues fair better than the national average (27.8%), whilst BAME colleagues mirror the national picture (29.8%).
- Metric 6 - The percentage of colleagues experiencing harassment, bullying or abuse from colleagues in the last 12 months has decreased by 2% for white colleagues, whilst BAME colleagues saw a 1.9% increase. UHP white colleagues respond better than the national average although BAME colleagues are 1% lower than the national position (22.7% UHP white, 24.2% national; 28% UHP BAME, national 29%).
- Metric 7 - The perception of fairness in career progression is better than the national average for BAME and white colleagues. There has been a 1.8% increase for white colleagues (85.8% to 87.6% UHP, 86.3% nationally) and a 10.6% increase for BAME colleagues, 70.1% to 80.7% which is 10.8% higher than the national average at 69.9%.
- Metric 8 - Discrimination from managers and colleagues has decreased for both BAME and white colleagues with BAME colleagues seeing a decrease from 17.3% to 11.5% which is better than the national position (15.3%). White colleagues respond very differently at 5.6% (6.9% last year) for UHP and 6.4% nationally. Whilst a positive improvement we still have a long way to go to bridge the gap.

### **Board Representation Indicator**

Metric	Indicator
9	Percentage difference between the organisations Board membership and its overall workforce disaggregated <ul style="list-style-type: none"> <li>• By voting membership of the Board</li> <li>• By executive membership of the Board</li> </ul>

BAME representation at Trust Board level is 5.9% which is lower than the overall Trust which has grown from 7.5% to 8.5%.

### **CONCLUSION**

There remain to be differences in the experience of BAME and white colleagues. UHP are committed to finding ways to bridge the gaps as well as enabling all colleagues to reach their full potential.

### **NEXT STEPS AND ACTION PLAN**

Our key areas of focus in the next 12 months will include:-

EDI campaign to change the conversation	<ul style="list-style-type: none"> <li>• Talk openly about our WRES challenges and make EDI part of everyday conversations:-               <ul style="list-style-type: none"> <li>○ Create and share colleague stories to support a change in mind-set in collaboration with the networks</li> <li>○ Increase our website and social media activity</li> <li>○ Engage and work collaboratively with our local community</li> </ul> </li> </ul>
Engagement	<ul style="list-style-type: none"> <li>• Work collaboratively with our networks, commencing with our BAME and Disabled networks to               <ul style="list-style-type: none"> <li>○ Listen, learn and work together to co-create, develop and deliver the ongoing EDI Improvement plan</li> <li>○ Foster better relationships with our community by opening communication channels, encouraging and welcoming their input into how we achieve our aim and to uncover our blind spots.</li> </ul> </li> </ul>
Leadership and Education	<ul style="list-style-type: none"> <li>• Maintain a comprehensive EDI package for mandatory training and induction in collaboration with the networks.</li> <li>• Enable people in leadership positions to measure (using ESR data at varying levels including department, role, band) and close the gap in their areas.</li> <li>• Targeted leadership development for BAME and Disabled colleagues</li> <li>• Positive action in recruitment to increase applications from protected/underrepresented groups.</li> <li>• Learn from Covid and facilitate collective leadership</li> </ul>

Governance and QEIA	<ul style="list-style-type: none"> <li>• Key HR policies to be reviewed through the lens of inclusion in collaboration with the networks, ensuring there is a robust QEIA process.</li> <li>• Cleanse the workforce data to increase declaration rates by reminding colleagues of the purpose of gathering the data.</li> </ul>
Recruitment	<ul style="list-style-type: none"> <li>• Overhaul recruitment and promotion practices to make sure that staffing reflects the diversity of the community, regional and national labour markets (the People Plan). <ul style="list-style-type: none"> <li>○ Review of reliance on qualifications and education balanced against evidence of competence</li> <li>○ Easy access to off line applications</li> <li>○ Review of internal progression and processes.</li> </ul> </li> </ul>
Wellbeing	<ul style="list-style-type: none"> <li>• Equality, diversity and inclusion action as part of the health and wellbeing conversations described in the People Plan health and wellbeing table</li> <li>• Achieve Disability Confident Level 2</li> </ul>
Model Employer	<ul style="list-style-type: none"> <li>• Publish progress against the Model Employer goals to ensure that the workforce leadership is representative of the overall BAME workforce.</li> </ul>



<b>Non-clinical workforce</b>						
	<b>WHITE 2019</b>	<b>WHITE 2020</b>	<b>BME 2019</b>	<b>BME 2020</b>	<b>ETHNICITY UNKNOWN /NULL 2019</b>	<b>ETHNICITY UNKNOWN /NULL 2020</b>
Under Band 1	94.55%	93.48%	3.64%	2.17%	1.82%	4.35%
Band 1	90.91%	52.46%	0.00%	6.56%	9.09%	40.98%
Band 2	93.06%	81.19%	4.54%	5.54%	2.40%	13.27%
Band 3	94.95%	94.80%	2.78%	2.13%	2.27%	3.07%
Band 4	96.49%	96.88%	1.75%	2.19%	1.75%	0.94%
Band 5	85.22%	94.02%	8.49%	2.17%	6.29%	3.80%
Band 6	92.36%	92.97%	4.83%	1.56%	2.81%	5.47%
Band 7	96.28%	98.78%	2.66%	0.00%	1.06%	1.22%
Band 8A	94.01%	98.11%	1.20%	0.00%	4.79%	1.89%
Band 8B	100%	100%	0.00%	0.00%	0.00%	0.00%
Band 8C	100%	96.55%	0.00%	0.00%	0.00%	3.45%
Band 8D	100%	100%	0.00%	0.00%	0.00%	0.00%
Band 9	100%	100%	0.00%	0.00%	0.00%	0.00%
VSM	84.62%	90.91%	0.00%	0.00%	15.38%	9.09%

<b>Clinical Workforce (non-medical)</b>						
	<b>WHITE 2019</b>	<b>WHITE 2020</b>	<b>BME 2019</b>	<b>BME 2020</b>	<b>ETHNICITY UNKNOWN /NULL 2019</b>	<b>ETHNICITY UNKNOWN /NULL 2020</b>
Under Band 1	0%	100%	0%	0.00%	100%	0.00%
Band 1	100%	75.00%	0%	16.67%	0%	8.33%
Band 2	91.99%	92.88%	5.78%	5.09%	2.23%	2.04%
Band 3	94.18%	93.61%	3.63%	4.57%	2.17%	1.83%
Band 4	93.41%	94.23%	2.39%	2.88%	4.19%	2.88%
Band 5	83.93%	78.73%	9.39%	10.83%	6.67%	10.44%
Band 6	91.92%	92.45%	4.96%	5.10%	3.11%	2.46%
Band 7	95.88%	94.98%	3.08%	3.09%	1.02%	1.93%
Band 8A	93.22%	93.50%	1.69%	2.44%	5.08%	4.07%
Band 8B	100%	97.62%	0%	0.00%	0%	2.38%
Band 8C	100%	100%	0%	0.00%	0%	0.00%
Band 8D	100%	100%	0%	0.00%	0%	0.00%
Band 9	100%	100%	0%	0.00%	0%	0.00%
VSM	100%	0.00%	0%	0.00%	0%	0.00%

<b>Medical &amp; Dental</b>						
	<b>WHITE 2019</b>	<b>WHITE 2020</b>	<b>BME 2019</b>	<b>BME 2020</b>	<b>ETHNICITY UNKNOWN/N ULL 2019</b>	<b>ETHNICITY UNKNOWN/N ULL 2020</b>
Consultants	77.69%	76.44%	18%	19.56%	3.83%	4.00%
<i>of which Senior Medical Manager</i>	100%	100%	0%	0%	0%	0.00%
Non-consultant career grade	62.06%	49.74%	29%	39.38%	8.96%	10.88%
Trainee grades	65.6%	59.06%	27%	31.69%	7.35%	9.25%
Other	66.66%	0%	0%	0.00%	33,.33%	0.00%



## Appendix 2 – Staff Survey Results 2015-2019

		2015	2016	2017	2018	2019
Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months	White	29%	26%	26%	27%	27%
	BME	23%	26%	31%	26%	29%
Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months	White	26%	23%	22%	25%	23%
	BME	28%	24%	25%	26%	28%
Percentage of staff believing that the Organisation provides equal opportunities for career progression or promotion	White	87%	89%	86%	85%	88%
	BME	71%	78%	75%	70%	81%
In the 12 last months have you personally experienced discrimination At work from manager/ team leader or other colleagues	White	7%	7%	6%	7%	6%
	BME	12%	16%	15%	17%	12%