

Workforce Race Equality Standard 2021 Update and Action Plan



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INTRODUCTION

The aim of our inclusion strategy is to ensure we create and maintain a hospital that is free from inequalities for our patients and our colleagues. We want our workforce to reflect our community to enable us to deliver the best possible care as well as creating a workplace where we value different perspectives and experiences. We are committed to ensuring equality, diversity and inclusion (EDI) in part of everything we do.

UHP's vision is to provide excellent care, with compassion wrapped around people's individual needs which is reflected in how we support our colleagues and underpinned by our Trust values:

- Put people first
- Take ownership
- Respect others
- Be positive
- Listen, learn and improve

The national 2021 Workforce Race Equality Standard (WRES) submission from University Hospitals Plymouth NHS Trust (UHP) covers the period April 2020 to March 2021. The submission includes workforce data and feedback from the 2020 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. The metrics 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. Alongside WRES the Model Employer framework aims to ensure leadership is representative of the overall composition of the BAME workforce or local community.

The national WRES report can be found [here](#)

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"> • Non-clinical staff • Clinical staff – of which <ul style="list-style-type: none"> ▪ Non-medical staff ▪ Medical and dental staff
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 - The workforce diversity in relation to ethnicity has remained the same as the previous year, 8.5% overall. Appendix 1 outlines the ethnic diversity of the Trust and shows that UHP has greater representation at pay bands 2 and 5 within AfC. Medical roles at all levels, band 5 clinical roles and band 8d clinical and non-clinical roles exceed 8.5% representation.
- Metric 2 - The relative likelihood of white applicants being appointed from shortlisting across all posts recruited via NHS Jobs compared to BAME applicants has moved from 1.26 to 1.79 (nationally 1.61). This is a worsening position and moves away from the aim of achieving an equal position represented as 1.0. These figures do not include junior doctors or international nurses due to the selection process. The overall number of shortlisted applicants from an ethnic minority background remains static since 2020, although the number of applicants appointed from shortlisting has reduced. In comparison there has been a reduction in the number of shortlisted applicants who are white with a small increase in the number of white applicants who were appointed. There is likely to be a link with the impact of the pandemic.
- Metric 3 - Nationally BAME colleagues are 1.16 times relatively more likely to enter the formal disciplinary (conduct) process than white colleagues (improved from 1.22 in 2020). UHP's position remains more favourable (2020 – 0.72 and 2021 – 0.98). There has been an overall reduction in cases during the pandemic and the triage process which includes senior HR representatives and line managers supports a just and learning culture.
- Metric 4 – The number of BAME colleagues who have had access to CPD has improved from 0.92 to 0.90 (nationally 1.14) which indicates that BAME colleagues are more likely to have access to non-mandatory training. There is no correlation between development opportunities and the ability for BAME colleagues to progress into more senior roles.

Staff Survey Feedback

Metric	Indicator
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 3,550 respondents to the 2020 survey, which represented 42% of the workforce. 247 Black, Asian and Minority Ethnic (BAME) colleagues replied to the staff survey which is lower than 2019 at 297. It is worth noting, that 7.5% of colleagues have not shared their ethnicity on ESR.

A summary of UHP's results since 2015 are shown at Appendix 2.

- Metric 5 - The gap in experience in relation to harassment from patients, relatives and the public has been bridged in 2020 and better than the national position (BAME UHP 22.4%, nationally 30.3%; UHP white 22.6% nationally 27.9%). The reduction for BAME responders is better than the improvement seen by white responders (BAME 6.8% and white 4.3%). It is likely that these findings are heavily influenced by the pandemic and changes to services and visiting during the reporting period.
- Metric 6 - The percentage of BAME colleagues experiencing harassment, bullying or abuse from colleagues in the last 12 months has increased by 5.6% - 28% to 33.6%. White responders have seen a significantly lower increase of 0.7% (22.7% to 23.4%). The overall gap between BAME responders and white responders has increased from 5.3% to 10.2%. UHP white responders are broadly similar to the national position whilst BAME responders are 5.2% higher.
- Metric 7 - The perception of fairness in career progression is 2% better than the national average for BAME responders although has reduced by 7.5% to 73.2% since 2019. White responders are 1.3% lower than the national position and 2% lower than the previous year although 12.4% better than BAME responders (85.6%). An unsurprising result given the lack of diversity at all levels within AfC.

- Metric 8 - Discrimination from managers and colleagues has increased for both BAME and white responders. BAME responders have seen a greater increase of 4.4% to 15.9% which is 1.4% higher than the national position. White responders have seen a 1% increase and 0.6% higher than the national position. The gap between BAME and white responders has increased by 3.4% to 9.3% in 2020 (2019 gap was 5.9). This may be driven by multiple factors including the pandemic and the change in culture at UHP which encourages colleagues to feel more able to speak up.

Board Representation Indicator

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

BAME representation at Trust Board level is 6.3% which is lower than the overall Trust which has remained at 8.5%.

CONCLUSION

There remain to be differences in the workplace 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. Over the last year we have established our BAME Staff Network which has already made a significant difference for many of our colleagues. Most importantly as we move forward we will do this with our network members and together we will deliver our actions.

NEXT STEPS AND ACTION PLAN

Our key areas of focus will include:-

Actions	Lead	Due	Supports	Success Measure
Overhaul Recruitment and widen career development opportunities				
<p>Targeted recruitment campaigns in collaboration with the staff networks.</p> <p>Networks to review of the application process from an applicant's perspective</p> <p>Widening career development opportunities for colleagues from protected groups to move into leadership positions through greater access to relevant courses</p> <p>Enabling work experience opportunities in the form of shadowing and learning from those in leadership roles</p> <p>Expanding access to career conversations</p> <p>Foster good relationships with our community to support identification of our blind spots</p>	<p>HRBP Lead EDI</p> <p>Lead OD Facilitator</p>	<p>March 2023</p>	<p>Model Employer</p> <p>WRES Metrics 2, 7</p> <p>WDES Metrics 1, 2</p>	<p>6% increase in BAME and Disabled shortlisted applicants</p> <p>4% increase in the number of BAME and Disabled applicants being appointed</p> <p>3% increase in fairness in career progression for those who identify with protected groups.</p>

Education				
<p>Enhance existing education relating EDI in partnership with Staff Networks – focus on improving the workplace experience.</p> <p>Development of a menu of easily accessible educational documents for managers and colleagues with support from the staff networks.</p> <p>Sharing personal stories in different formats to highlight how to raise awareness in terms of experiencing discrimination, bullying and harassment and how to access support within the Trust.</p> <p>Enhance existing education in relation to reasonable adjustments.</p>	HRBP EDI Lead	August 2022	<p>WRES Metrics 5, 6 and 8</p> <p>WDES Metrics 4, 5, 6, 8, 9</p>	<p>2% reduction in 2022 staff survey feedback re harassment from colleagues and discrimination from managers with further 3% reduction in 2023</p> <p>1% increase in satisfaction with reasonable adjustments in 2022 and 2023 survey feedback</p>
Promotion				
<p>Campaign to increase colleagues sharing their protected characteristics rates to include how we use the information</p> <p>Achieve Disability Confident 3</p>	HR EDI Lead	<p>April 2022</p> <p>Dec 2022</p>	<p>All metrics</p> <p>All WDES metrics</p>	<p>10% reduction in unknown rates</p>

Appendix 1 – Workforce Data

Non-clinical Workforce						
	WHITE 2020	WHITE 2021	BAME 2020	BAME 2021	ETHNICITY UNKNOWN /NULL 2020	ETHNICITY UNKNOWN /NULL 2021
Under Band 1	93.48%	90.2%	2.17%	0.00%	4.35%	9.8%
Band 1	52.46%	45.2%	6.56%	6.5%	40.98%	48.4%
Band 2	81.19%	82.8%	5.54%	5.5%	13.27%	11.7%
Band 3	94.80%	95.0%	2.13%	2.3%	3.07%	2.7%
Band 4	96.88%	95.4%	2.19%	2.6%	0.94%	2.0%
Band 5	94.02%	94.0%	2.17%	2.5%	3.80%	3.5%
Band 6	92.97%	94.7%	1.56%	1.5%	5.47%	3.8%
Band 7	98.78%	97.8%	0.00%	1.1%	1.22%	1.1%
Band 8A	98.11%	92.2%	0.00%	1.6%	1.89%	6.3%
Band 8B	100%	100.0%	0.00%	0.0%	0.00%	0.00%
Band 8C	96.55%	97.0%	0.00%	0.0%	3.45%	3.00%
Band 8D	100%	90.0%	0.00%	10.0%	0.00%	0.00%
Band 9	100%	100.0%	0.00%	0.0%	0.00%	0.00%
VSM	90.91%	100.0%	0.00%	0.0%	9.09%	0.00%

Clinical Workforce (non-medical)						
	WHITE 2020	WHITE 2021	BAME 2020	BAME 2021	ETHNICITY UNKNOWN /NULL 2020	ETHNICITY UNKNOWN /NULL 2021
Under Band 1	100%	0.00%	0%	0%	0%	0%
Band 1	75.00%	100.00%	16.67%	0.00%	8.33%	0%
Band 2	92.88%	91.87%	5.09%	5.45%	2.04%	2.68%
Band 3	93.61%	92.69%	4.57%	4.73%	1.83%	2.58%
Band 4	94.23%	69.82%	2.88%	2.44%	2.88%	27.74%
Band 5	78.73%	74.60%	10.83%	12.95%	10.44%	12.44%
Band 6	92.45%	91.27%	5.10%	5.68%	2.46%	3.06%
Band 7	94.98%	93.85%	3.09%	3.98%	1.93%	2.17%
Band 8A	93.50%	94.81%	2.44%	1.95%	4.07%	3.25%
Band 8B	97.62%	97.30%	0%	0%	2.38%	2.70%
Band 8C	100%	100.00%	0%	0%	0%	0%
Band 8D	100%	90.91%	0%	9.09%	0%	0%
Band 9	100%	100.00%	0%	0%	0%	0%
VSM	0.00%	50.00%	0%	0%	0%	50.00%

Medical & Dental						
	WHITE 2020	WHITE 2021	BAME 2020	BAME 2021	ETHNICITY UNKNOWN/ NULL 2020	ETHNICITY UNKNOWN/ NULL 2021
Consultants	76.44%	76.83%	19.56%	18.58%	4.00%	4.59%
Non-consultant career grade	49.74%	48.10%	39.38%	38.57%	10.88%	13.33%
Trainee grades	59.06%	59.43%	31.69%	25.71%	9.25%	14.86%
Other	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

Appendix 2 – Staff Survey Results 2015-2020

		2015	2016	2017	2018	2019	2020	National
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%	23%	28%
	BAME	23%	26%	31%	26%	29%	22%	30%
Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months	White	26%	23%	22%	25%	23%	23%	24%
	BAME	28%	24%	25%	26%	28%	34%	28%
Percentage of staff believing that the Organisation provides equal opportunities for career progression or promotion	White	87%	89%	86%	85%	88%	86%	87%
	BAME	71%	78%	75%	70%	81%	73%	71%
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%	7%	6%
	BAME	12%	16%	15%	17%	12%	16%	15%