

Workforce Race Equality Standard 2018 – York Teaching Hospital NHS Foundation Trust

This report is a word version of the Workforce Race Equality Standard Template Report we are required to submit to NHS England.

1 Name of organisation

York Teaching Hospital NHS Foundation Trust

2 Date of report

August 2018

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

Mike Proctor, Acting Chief Executive

4 Name and contact details of lead manager compiling this report

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5 Names of commissioners this report has been sent to

Lead commissioner Vale of York CCG, Lead commissioner Scarborough and Ryedale CCG

6 Name and contact details of coordinating commissioner this report has been sent to

Vale of York CCG liza.smithson@nhs.net, Scarborough and Ryedale CCG steve.jordan@nhs.net

7 Unique URL link on which this report and associated action plan will be found

<https://www.yorkhospitals.nhs.uk/wres/>

8 This report has been signed off by on behalf of the board on

Mike Proctor, Acting Chief Executive, Teaching Hospital NHS Foundation Trust – 18 July 2018

2 Background Narrative:

a. Any issues of completeness of data

The Trust continues to increase awareness of the importance of accurate recording and reporting of protected characteristics. In March 2016 employee self-service for ESR was launched which enables employees to review and update their personal data. It is hoped this will result in fewer 'not known' entries for protected characteristics.

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

The sample for the 2017 staff survey was slightly larger than the sample for the 2016 staff survey.

The Trust conducted a full census approach of the Trust's entire eligible workforce (i.e. 8,476 staff) in 2017 inviting all staff to participate in the survey via a paper questionnaire. In total 4,111 staff responded which represented an overall response rate of 48.50%. This was above the average for combined acute and community trusts and also slightly higher than the response rate of 47.54% in the 2016 survey.

The Trust also adopted a paper questionnaire approach to the survey in 2016, inviting all eligible staff (8,214 staff) to participate in the survey. In total 3,905 staff responded which represented an overall response rate of 47.54%.

3 Total Numbers of Staff:

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

The headcount as at 31st March 2018 was 8,737. The figure is reporting staff that are on fixed term and permanent contracts only.

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

BME staff represent 7.2% of the workforce.

4 Self reporting:

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

100% of those who have reported have self-reported.

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

The ESR Employee Self-service functionality enables staff to review and update their personal details electronically and there has been further promotion across the organisation of this functionality to encourage staff to log-on and review their protected characteristics data.

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

As B above.

5 Workforce data:

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

The data is as at 31 March 2018

6. Workforce Race Equality Indicators:

Indicator	Data for reporting year	Data for previous year	Narrative – the implications of the data and any explanatory narrative	Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or Corporate Equality Objectives
<i>For each of these four workforce indicators, compare the data for white and BME staff:</i>				
<p>1. Percentage of staff in each of the AfC Bands 1-9 or Medical and Dental subgroups and VSM (including executive Board members) compared with the percentage of staff in the overall workforce disaggregated by:</p> <p>Non-Clinical staff Clinical staff – of which - Non-Medical Staff - Medical and Dental Staff</p>	See Table A	See Table B	<p>The total overall workforce includes all staff on permanent and fixed term contracts only (thereby excluding bank and locum staff) and includes primary assignments only.</p> <p>Of the total overall workforce figure, of 8787 used for the purpose of this, 297 (3.4%) of the records had an undefined / 'not known' ethnicity status.</p>	<p>The Trust holds a number of recruitment events:</p> <p>We attend York Job's fair annually which is run by CYC.</p> <p>We are building relationships with local schools across York and North Yorkshire through careers events.</p> <p>We held interviews in conjunction with local job centres to encourage individuals in to employment with the Trust</p> <p>We attended a careers event at a local female open prison to provide information and support on applying for roles in the Trust.</p> <p>We have been utilising technology</p>

Indicator	Data for reporting year	Data for previous year	Narrative – the implications of the data and any explanatory narrative	Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or Corporate Equality Objectives
				<p>and alternative resources to enable interviews to be undertaken across the communities of York and North Yorkshire, but also for both national and international candidates</p> <p>We maintain links with York University to support recruitment of our nursing workforce.</p> <p>Link EDS2 Goal 3.1</p>
2. Relative likelihood of staff being appointed from shortlisting across all posts.	The relative likelihood of white staff being appointed from shortlisting compared to BME staff is	The relative likelihood of white staff being appointed from shortlisting compared to BME staff is	During the reporting period we have used TRAC to interrogate the data compared to previous years where data was taken from NHS jobs.	The TRAC system for candidates has now been fully implemented and provides us with accessible Equality and Diversity data reporting which enables us to undertake a greater level of monitoring and analysis of the data, which may inform future

Indicator	Data for reporting year	Data for previous year	Narrative – the implications of the data and any explanatory narrative	Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or Corporate Equality Objectives
	1.38 greater	1.43 greater		events and policy decisions. Link EDS2 Goal 3.1
<p>3. Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation.</p> <p>This indicator will be based on data from a two year rolling average of the current year and the previous year.</p>	BME staff are 0.59 times less likely than white staff to enter the formal disciplinary process.	BME staff are 0.98 times less likely than white staff to enter the formal disciplinary process.	As proportionately the number of BME staff entering the formal disciplinary process (a rolling average of 2.5) and within the organisation (637 staff are of BME origin) are very small, an increase or decrease of just one person can seemingly have a big swing impact on the relative likelihood.	The Trust is undertaking a full review of the discipline policy, procedure and supporting documentation. Training for managers, investigating officers and HR staff will be form a significant part of the roll out of the policy.
4. Relative likelihood of staff accessing non-mandatory training and CPD	The relative likelihood of white staff accessing non mandatory training and CPD compared to BME is the	The relative likelihood of white staff accessing non mandatory training and CPD compared to BME is 1.98	The Trust continues to capture learning via one central point called Learning Hub.	Based on feedback from learners and the organisation, we have continued to enable Learning Hub remote access for staff through the internet. The Trust has implemented a new process via learning hub for

	same	times greater		recording appraisals. To complete an appraisal, the manager must review completion of statutory and mandatory training Link EDS2 Goal 3.3
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<p>5 KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months</p>	<p>White 26% BME 26%</p>	<p>White 25% BME 29%</p>	<p>The Trust conducted a full census of all eligible staff within the organisation for both the 2016 and 2016 staff surveys. The response rate for the 2017 staff survey was 48.5% which was a small increase from the previous year's staff survey response rate of 47.5%.</p>	<p>The Trust has a corporate action plan which links directly to the results of the staff survey.</p> <p>Following the appointment of the Freedom to Speak Up / Safer working Guardian in August 2016 the trust has developed a rolling program of recruiting new fairness champions under the guidance and support of the freedom to speak up/safer working guardian.</p> <p>The Trust is currently negotiating a new Challenging Bullying and Harassment Policy with our Staff Side Representatives.</p> <p>The Trust has appointed a Challenging Bullying and Harassment Champion to work alongside the Fairness Champions and the Freedom to Speak Up / Safer working Guardian.</p> <p>A training course for managers is currently being written with the aim of supporting line managers to</p>
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				<p>develop insight and understanding of their own behaviour and how it may differ from that of others and how to effectively manage staff who are different to themselves.</p> <p>The Trust continues to monitor staff experiences and compare to other combined Community & Acute Trust outcomes.</p> <p>Link EDS2 Goal 3.4 and 4.3</p>
6 KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months	White 24% BME 28%	White 23% BME 30%	As per indicator 5	As per indicator 5
7 KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion	White 91% BME 79%	White 90% BME 86%	As per indicator 5	<p>We have undertaken a full review and update of the recruitment and selection policy.</p> <p>We have revised our internal expressions of interest process, bringing this within the scope of the recruitment team to ensure transparency and consistency</p>

				across the Trust.
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% BME 18%	White 6% BME 14%	As per indicator 5	As per indicator 5
<i>Board Representation Indicator</i>				
<i>For this indicator, compare the difference for White and BME staff</i>				
Percentage difference between the organisation's 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 	No BME representation	No BME representation	The Population served is 96.8% white based on 2011 ONS census data.	The Trust undertook an inclusive Non-Executive Director recruitment program and had undertaken a reflective process to understand if there is any learning.

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

8. 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 Indicator	Outcomes from previous Actions	Action to be taken going forward	Timeframe for completion
<p>1. Percentage of staff in each of the AfC Bands 1-9 and VSM (including executive Board members and senior medical staff) compared with the percentage of staff in the overall workforce.</p>	<p>The Trust has published the updated recruitment and selection policy</p> <p>The recruitment and selection training has also been updated</p>	<p>Continue to raise awareness across the community via regular and varied recruitment events.</p> <p>Continue to roll out delivery of updated recruitment and selection training</p> <p>Review and consider expanding the use of technology to enable ease and accessibility of interviews, locally, nationally and internationally.</p>	<p>On-going</p>
<p>2. Relative likelihood of staff being appointed from shortlisting across all posts</p>	<p>The TRAC system has provided some valuable equality data which has enabled us to fully assess where we are as an organisation.</p>	<p>Review a full year of data from TRAC</p> <p>Undertake international recruitment program.</p> <p>Recruit from local communities to ensure that our pool of candidates is representative.</p>	<p>September 2018</p> <p>On-going</p>
<p>3. Relative likelihood of staff entering the</p>	<p>Review of discipline policy and supporting</p>	<p>Undertake a rolling program of training across the organisation which supports the</p>	<p>On-going</p>

<p>formal disciplinary process</p>	<p>documentation</p>	<p>policy revisions.</p> <p>Continue to embed the HR Business partner role within each directorate to develop greater insight into E&D issues, providing appropriate advice and guidance is given to support Directorate Managers</p>	
<p>4. Relative likelihood of staff accessing non-mandatory training and CPD</p>	<p>Review of appraisal policy and supporting documentation and consultation and development of a separate development / talent management policy are underway working in consultation with staff side.</p>	<p>Remind managers through HR Business partners of the importance of CPD for their staff.</p> <p>Appraisal policy review</p> <p>Talent Management policy development</p>	<p>On-going</p>
<p>5. KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months</p>	<p>Development of a corporate action plan; development of a new people management training package for line managers. Development of fairness champion role to support the</p>	<p>Build on success of Fairness Champion recruitment and continue to recruit and develop the role.</p> <p>Continue to use the Challenging Bullying and Harassment Champion and the Freedom to Speak Up Guardian to review and promote the strategic position of the Trust on this agenda.</p>	<p>On-going</p> <p>Quarterly and Annually as results are published</p>

	<p>freedom to speak up guardian.</p>	<p>Review the corporate action plan against the next staff survey and staff friends and family results.</p> <p>Develop an online portal for staff discussion and ideas.</p> <p>The Trust is reviewing the Bullying and Harassment policy.</p> <p>Implement the training course for managers with the aim of supporting line managers to develop insight and understanding of their own behaviour and how it may differ from that of others and how to effectively manage staff who are different to themselves.</p>	
<p>6. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months</p>	<p>As 5 above</p>	<p>As 5 above</p>	<p>As 5 above</p>
<p>7. Percentage believing that the Trust provides equal opportunities for career progression or</p>	<p>We have previously reported about introducing a development policy to</p>	<p>The appraisal policy is currently being reviewed and a separate development / talent management policy is being developed. Discussions and consultations</p>	<p>On-going</p>

<p>promotion</p>	<p>incorporate the appraisal policy. The decision was made to keep a separate appraisal policy with a continued focus on a values based approach to managing and developing our staff.</p> <p>Recruitment and selection processes have been reviewed and updated to ensure consistence and fairness across the organisation.</p>	<p>have and will continue to take place with our staff side representatives on any proposed changes.</p> <p>Recruitment and selection - As per 1 above.</p>	
<p>8. Personally experienced discrimination at work from any of the following? b) Manager/team leader or other colleagues</p>	<p>Please note- no actions were set in previous reporting years.</p> <p>The Trust has re-launched personal responsibility</p>	<p>As detailed in 5 above.</p>	

	framework		
9. Board Representation		The Trust are currently undertaking a recruitment process for a new CEO we have engaged an executive recruitment company to undertake the recruitment and will be involving a cross section of staff in the selection process	September 2018

Table A: WRES Staff Breakdown by Grade

		Clinical Staff (%)	Non Clinical Staff (%)	Overall (%)			Clinical Staff (%)	Non Clinical Staff (%)	Overall (%)
BME	Band 1	0.0%	3.3%	3.3%	White	Band 1	0.8%	93.6%	94.4%
	Band 2	3.6%	0.6%	4.2%		Band 2	64.8%	27.0%	91.8%
	Band 3	0.7%	0.7%	1.4%		Band 3	51.1%	44.6%	95.8%
	Band 4	3.8%	1.4%	5.2%		Band 4	23.9%	68.6%	92.4%
	Band 5	11.0%	0.5%	11.5%		Band 5	75.6%	8.8%	84.4%
	Band 6	3.5%	0.5%	4.0%		Band 6	84.2%	9.2%	93.4%
	Band 7	1.9%	1.3%	3.1%		Band 7	75.6%	18.6%	94.2%
	Band 8	1.7%	0.3%	2.0%		Band 8	60.1%	36.8%	97.0%
	Band 9	0.0%	0.0%	0.0%		Band 9	0.0%	100.0%	100.0%
	VSM	0.0%	0.0%	0.0%		VSM	14.3%	85.7%	100.0%
	Senior Medical Manager	0.0%	0.0%	0.0%		Senior Medical Manager	100.0%	0.0%	100.0%
	Apprentice	0.0%	0.0%	0.0%		Apprentice	40.0%	60.0%	100.0%
	M&D Consultants	21.2%	0.0%	21.2%		M&D Consultants	74.9%	0.0%	74.9%
	M&D Non-consultant career grade	28.1%	0.0%	28.1%		M&D Non-consultant career grade	67.7%	0.0%	67.7%
M&D Trainee Grades	37.9%	0.0%	37.9%	M&D Trainee Grades	53.6%	0.0%	53.6%		
BME as % of total workforce	6.4%	0.8%	7.2%	White as % of total workforce	61.6%	27.8%	89.4%		

Table B: WRES Staff Breakdown by Grade

		Clinical Staff (%)	Non Clinical Staff (%)	Overall (%)			Clinical Staff (%)	Non Clinical Staff (%)	Overall (%)
BME	Band 1	0.0%	3.0%	3.0%	White	Band 1	1.5%	92.8%	94.2%
	Band 2	3.5%	0.5%	4.0%		Band 2	5.6%	34.6%	92.1%
	Band 3	0.9%	1.3%	2.2%		Band 3	48.1%	47.2%	95.4%
	Band 4	0.9%	1.3%	2.3%		Band 4	19.1%	76.2%	95.3%
	Band 5	10.9%	0.4%	11.3%		Band 5	76.6%	8.6%	85.2%
	Band 6	3.1%	0.2%	3.3%		Band 6	85.8%	8.1%	94.0%
	Band 7	1.8%	0.7%	2.5%		Band 7	76.0%	19.1%	95.0%
	Band 8	1.7%	0.3%	2.0%		Band 8	61.2%	35.7%	96.9%
	Band 9	0.0%	0.0%	0.0%		Band 9	0.0%	100.0%	100.0%
	VSM	0.0%	0.0%	0.0%		VSM	11.1%	88.9%	100.0%
	Senior Medical Manager	0.0%	0.0%	0.0%		Senior Medical Manager	100.0%	0.0%	100.0%
	Apprentice	0.0%	0.0%	0.0%		Apprentice	0.0%	100.0%	100.0%
	BME as % of total workforce	6.3%	0.8%	7.1%		White as % of total workforce	60.2%	29.6%	89.8%