

Workforce Race Equality Standard 2015 – 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 Background Narrative

a. Any issues of completeness

The Trust continues to increase awareness of the importance of accurate recording and reporting of protected characteristics

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

The 2013-2014 Trust Equality and Diversity report used BME definitions not consistent with WRES guidance. The definitions of ethnicity provided in the WRES guidance have been adopted for purposes of reporting and were used in the equality and diversity report 2014-2015.

Rotational doctors were included in some figures produced in 2013-2014. This is noted where relevant.

2 Total Numbers of Staff:

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

Headcount 8,739. The figure is reporting staff that are on fixed term temporary and permanent contracts only

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

7% of staff employed are from the categories for BME

3 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 Trust continues to increase awareness of the importance of accurate recording and reporting of protected characteristics.

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

The Trust will implement in full by 31 March 2016 a self service product which will allow staff to update their ethnicity on ESR.

4 Workforce data

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

The data is as at 31 March 2015

5 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, the standard compares the metrics for white and BME staff</i>				
1 Percentage of BME staff in Bands 8-9, VSM (including executive Board members and senior medical staff) compared with the percentage of BME staff in the overall workforce	0.8% compared to 7% overall	0.3% compared to 7.5% overall	The increase may be due in part to the new WRES guidance document. We should be able to demonstrate improvement in the figures next year	Action plan to be established via Trust Fairness Forum
2 Relative likelihood of BME staff being appointed from shortlisting compared to that of White staff being appointed from shortlisting across all posts.	The relative likelihood of White staff being appointed from short listing compared to BME staff is 2.21 times greater	The relative likelihood of White staff being appointed from short listing compared to BME staff is 1.27 times greater	Different methodology used in the reporting this year 2014/15 (rotational Doctors were excluded)	Continue values based recruitment Plan to introduce centralised recruitment which would allow for improved monitoring and audit Systematic and visible monitoring

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>3 Relative likelihood of BME staff entering the formal disciplinary process, compared to that of White staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation*</p> <p>*Note: this indicator will be based on data from a two year rolling average of the current year and the previous year.</p>	<p>The relative likelihood of BME staff entering the formal disciplinary process compared to White staff is 1.65 times greater.</p>	<p>-</p>		<p>Audit in the form of case reviews to include consideration of ethnicity. Checks are already made by the Employee Relations team in determining whether a case should proceed through the disciplinary process.</p>
<p>4 Relative likelihood of BME staff accessing non-mandatory training and Continuing Professional Development (CPD) as compared to White staff</p>	<p>-</p>	<p>-</p>	<p>Data as collected does not currently breakdown to CPD</p>	<p>New learning hub (Trust online learning management system) will enable refinement of data (directorate and occupation) to be developed in the year ahead.</p> <p>Monitoring appraisal process</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
<i>For each of these four staff survey indicators, the Standard compares the metrics for each survey question response for White and BME staff.</i>				
5 KF 18. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months	White 26% BME 24%	White 27% BME 28%	Staff survey was sent to 50% of staff randomly selected and returned by 47% of the sample.	Look to improve return rate within the Trust. Consider more detailed analysis of results (directorate + occupation) Fairness Champions appointed to improve awareness + support
6 KF 19. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months	White 23% BME 22%	White 21% BME 30%	As indicator 5	As indicator 5
7 KF 27. Percentage believing that trust provides equal opportunities for career progression or promotion	White 93% BME 80%	White 91% BME 80%	As indicator 5	A new talent management system is in development
8 Q23. 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 20%	White 5% BME 22%	As indicator 5	Specific directorates alerted to areas of concern. Scoping exercise re BME staff network

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
Does the Board meet the requirement on Board membership in 9?				
Boards are expected to be broadly representative of the population they serve	No BME representation		The population served is 96.8% white based on 2011 ONS census data	Board conscious of data when considering new members. Increase awareness of role models

6. Are there any other factors or data which should be taken into consideration in assessing progress? Please bear in mind any such information, action taken and planned may be subject to scrutiny by the Co-ordinating Commissioner or by regulators when inspecting against the “well led domain.”

In addition to the WRES we publish an annual E & D report which includes detailed analysis of workforce information. The Trust has a Fairness Forum which meets every quarter and monitors progress of E & D work. The forum has Board level representation.

7. If the organisation has a more detailed Plan agreed by its Board for addressing these and related issues you are asked to attach it or provide a link to it. Such a plan would normally elaborate on the steps summarised in section 5 above setting out the next steps with milestones for expected progress against the metrics. It may also identify the links with other work streams agreed at Board level such as EDS2.

It may be useful to read this report in conjunction with the Equality & Diversity Report 2014/15