

Report to:	Board of Directors People and Culture Committee
Date of Meeting:	2 November 2022 14 November 2022
Subject:	Workforce Race Equality Standard (WRES) Annual Report
Director Sponsor:	Polly McMeekin, Director of Workforce and Organisational Development
Author:	Virginia Golding, Head of Equality, Diversity and Inclusion and WRES Expert

Status of the Report (please click on the appropriate box)

Approve Discuss Assurance Information A Regulatory Requirement

<p>Trust Priorities</p> <p><input checked="" type="checkbox"/> Our People <input checked="" type="checkbox"/> Quality and Safety <input type="checkbox"/> Elective Recovery <input type="checkbox"/> Acute Flow</p>	<p>Board Assurance Framework</p> <p><input type="checkbox"/> Quality Standards <input checked="" type="checkbox"/> Workforce <input type="checkbox"/> Safety Standards <input type="checkbox"/> Financial <input type="checkbox"/> Performance Targets <input type="checkbox"/> DIS Service Standards <input type="checkbox"/> Integrated Care System</p>
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Summary of Report and Key Points to highlight:

This report is for assurance and has been shared with the People and Culture Committee for information and discussion. It sets out the Trust's 2022 WRES data, gives an overview on progress of the actions taken in 2021. It also incorporates an action plan for 2022-2023 to address the working experiences and career opportunities of Black and Ethnic Minority (BME) colleagues.

The WRES data was required to be submitted to NHS England (NHSE) by 31 August 2022 along with an Annual Report. The action plans are required to be approved and uploaded to the Trust's website by the 31 October 2022, the Annual Report will be uploaded at this stage. As the October Trust Board meeting was deferred until November 2022, there will be a slight delay in obtaining approval.

The Fairness Forum and Staff Network members were asked to comment on the draft action plan. 2022 is the first year that action plans are required to be submitted to the National WRES team to enable them to provide feedback about them and the extent to which they relate to the Trust's specific data and the evidence-based likelihood of improving outcomes.

As advised by the National Equality and Inclusion team; The Trust's WRES Expert should

be professional supported and provided with pastoral support with this challenging role.

The National WRES team requested that Trust's did not include the BME data for bank and agency staff for this year as they would be included in the Bank WRES that is due to be implemented.

Comparison of the 2021 and 2022 data has shown that Metrics 3, 5, 7 and 8 have deteriorated and metrics 2, 4, 6 and 9 have remained static. Metric 1 has seen a mixture of change. Metric 9 has seen a positive change in terms non-voting Board members but has remained static for voting Board members. A statistical analysis has been used of 0.5% and a positive, negative and static movement have been highlighted in green, red and yellow. The data for Metrics 5-8 are taken from the Staff Survey so the Trust's data has been compared to our benchmark group's average.

Responsibility at a senior level is required to ensure that the Trust makes a significant improvement to improve the work experiences and career progression of our BME colleagues.

Recommendation:

The Board of Directors is asked to note the content of this WRES Annual Report, approve the Action Plan and provide their support for its implementation.

Report Exempt from Public Disclosure (remove this box entirely if not for the Board meeting)

No Yes

(If yes, please detail the specific grounds for exemption)

Report History

(Where the paper has previously been reported to date, if applicable)

Meeting	Date	Outcome/Recommendation
Board of Directors	2 November 2022	

1. Introduction and Background

The Workforce Race Equality Standard (WRES) is a national annual reporting scheme which York and Scarborough Teaching Hospitals NHS Foundation Trust is required to comply with. Trusts are required by the NHS Standard Contract to use this data to develop action plans aimed at improving the experiences of BME colleagues. The data is required to be submitted to NHS England (NHSE) by 31 August 2022, this deadline was achieved. An action plan is to be drawn up and submitted to NHSE by 31 October 2022. The National WRES team has also requested that action plans are submitted to them for review and advice, this will be an annual requirement from this year.

The WRES covers 9 Metrics regarding the career progression and work experiences of BME colleagues. The data is collected for the period of 1 April 2021-31 March 2022 and is taken from the Electronic Staff Record (ESR) and the national Staff Survey, with a snapshot of the data as at 31 March 2022. The Staff Survey data is from the 2021 Staff Survey.

This report provides an analysis of the 2022 data for the 9 Metrics covering the last three years, progress on the 2021 action plan and the action plan for 2022. For the purposes of the WRES the term BME is defined as non-white, which means that staff from white minority groups are not included. Given this it is important to note that any wider inclusion work within the Trust must consider the needs of white minority colleagues.

Bank workers were not included in this year's data and reporting as NHSE are developing a Bank WRES (BWRES,) due to colleagues on the Bank's unique experiences, they will be included in this analysis once it is implemented.

The Head of Equality, Diversity and Inclusion (EDI), the Fairness Forum and Trust colleagues have contributed to the production of the action plan. The Head of EDI will be attending the Race Equality Network (REN) to discuss the data and action plan with members. Combined Freedom to Speak Up and WRES roadshows will also be delivered.

Considerations

Due to the Head of EDI commencing their role mid-August 2022 the presentation of the data analysis, staff engagement and co-production of the action plan has been carried out within a short timescale. The process will differ slightly within the next reporting period in 2023. An annual report will be presented before the data is submitted via the online portal by 31 August 2023 deadline. Wider staff engagement will take place to co-create the action plan prior to the deadline and submitted for approval before 31 October 2023.

North East, Yorkshire and Humberside Region, EDI support provided a data pack, 'WRES and Workforce Disability Equality Standard (WDES) guidance' that was referred to in creating the action plan. Their information session was also attended. The WRES team have suggested that Trust's that employ WRES Experts should have an interest in their personal development and ensure they are utilised as a major resource. The following was suggested:

- Enable WRES Experts to support organisations outside their own, including Arm's Length Bodies (ALBs) and professional bodies. (Not all Trusts have a WRES Expert so might call on others for guidance)
- Check-ins and pastoral support for WRES Experts – there is considerable psychological weathering due to the types of conversations that WRES Experts have had to have around race, racism and so forth (e.g. they could also be affected by racial trauma)
- While we have WRES Experts, they have not been adequately welcomed, respected or their role understood by their organisations
- Clinical and non-clinical WRES experts to be engaged differently

The WRES Experts are several NHS colleagues in a variety of bands and roles that were recruited by the National WRES Team and trained in the standard by Inspiring Hope. The programme was designed to have a Board level sponsor as well as a colleague (Expert) that could support, advise and influence the workforce race equality agenda. They did not hold responsibility for its implementation. There are currently four cohorts, with York and Scarborough's WRES Expert being part of Cohort 3, which was the first cohort to do a professional qualification in Workforce Race Equality.

Support for the Experts has been self-managed, personally and through peer support. More recently support has been provided through the North East Yorkshire and Humberside Regional EDI Team and now the national WRES team.

The National Team are preparing a new cohort of WRES Experts for training. A development programme is being created for existing WRES Experts and Trust's may want to consider supporting the professional development of their existing and new WRES Experts.

2. Current Position/Issues

2022 Data Analysis

This analysis has used a method which highlights the positive, negative and static changes in the data. Positive is in green, negative is in red and a figure below 0.5% shows little statistical movement, therefore considered static and is highlighted in yellow. Statistically significant movement is +/- .0.5%.

Total White Staff Headcount & Percentage (for 2022)	Total BME Staff Headcount & Percentage (for 2022)	Total Staff Trust Headcount and Percentage (for 2022)	Total Headcount and Percentage of Staff Not Stated (for 2022)
7,503 (84.1%)	1,116 (12.5%)	8,922 (100%)	303 (3.4%)

Metric 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

2020 Total BME	2021 Total BME	2022 Total BME
Nonclinical BME	Nonclinical BME	Nonclinical BME

<ul style="list-style-type: none"> • Bands 1-4 = 2.85% • Bands 5-7 = 0.74% • Bands 8-9 = 0.04% • VSM = 0% <p>Clinical</p> <ul style="list-style-type: none"> • Bands 1-4 = 1.04% • Bands 5-7 = 6.07% • Bands 8-9 = 0.12% • VSM = 0% • Consultants = 1.73% • Career Grades = 1.58% • M&D Trainees = 2.75% 	<ul style="list-style-type: none"> • Bands 1-4 = 1.72% • Bands 5-7 = 1.11% • Bands 8-9 = 0.11% • VSM = 0% <p>Clinical</p> <ul style="list-style-type: none"> • Bands 1-4 = 2.84% • Bands 5-7 = 5.01% • Bands 8-9 = 0.1% • VSM = 0.01% • Consultants = 1.29% • Career Grades = 1.01% • M&D Trainees = 3.22% 	<ul style="list-style-type: none"> • Bands 1-4 = 3.31% • Bands 5-7 = 0.98% • Bands 8-9 = 0.1% • VSM = 0.03% <p>Clinical</p> <ul style="list-style-type: none"> • Bands 1-4 = 1.21% • Bands 5-7 = 8.84% • Bands 8-9 = 0.13% • VSM = 0% • Consultants = 1.81% • Career Grades = 1.74% • M&D Trainees = 3.26%
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In 2022 there has been a positive statistical improvement in non-clinical bands 1-4, but in bands 5-9 there has been a deterioration in the recruitment of BME colleagues in post. Whilst there has been a positive increase in the number of non-clinical colleagues at VM level, this is only 0.03% and is below 0.5% so is considered static.

There has been a deterioration in the percentage of clinical BME colleagues in bands 1-4 but a significant increase in bands 5-7, this might be attributed to the international nurse recruitment. 2022 saw an increase in the number of clinical colleagues in bands 8-9, it is important that there is a continuous increase year on year. There are no clinical BME colleagues at VSM level, but the Trust has seen an increase at Consultant and Career Grade level.

From this analysis it shows that BME non-clinical colleagues are unlikely to progress within the Trust above band 7. This is reflected throughout the NHS. NHS England has set a target of 19% BME representation across all pay bands throughout the NHS.

NHS England, February 2021, *Workforce Race Equality Standard, 2020 Data Analysis Report for NHS Trusts and Clinical Commissioning Groups.*

In 2021 the Trust created an action plan, as requested by NHS England, to address its Race Disparity Ratios, this plan still needs to be addressed and has been incorporated into the WRES action plan.

Metric	Description	2020 Total BME	2021 Total BME	2022 Total BME
2	Relative likelihood of White staff being appointed from shortlisting compared to that of BME staff being appointed from shortlisting across all posts	1.76	2.61	2.60

Metric 2 compares the relative likelihood of White colleagues being appointed from shortlisting compared to that of BME colleagues being appointed from shortlisting

across all posts. The relative likelihood focuses on a figure of 1 being parity. As you can see from the above figures, the Trust is making little positive statistical movement which shows that our BME colleagues are adversely impacted with the Trust's shortlisting process.

In 2021 the Trust had an action plan for the Implementation of the 6 Key Actions on the Overhaul of Recruitment and Promotion. This plan should still be carried out and is incorporated as an action the accompanying plan.

Metric	Description	2020 Total BME	2021 Total BME	2022 Total BME
3	Relative likelihood of BME staff entering the formal disciplinary process, compared to that of White staff entering the formal disciplinary process	0	0.51	1

There has been a negative statistical increase of above 0.5% but the relative likelihood of BME colleagues entering the disciplinary process compared to white colleagues is the same. It is important that experiences do not deteriorate any further.

Metric	Description	2020 Total BME	2021 Total BME	2022 Total BME
4	Relative likelihood of White staff accessing non mandatory training and CPD compared to BME staff	0.86	1.06	1.07

There has been no statistical change with Metric 4, but the figure is slowly increasing above the level of parity.



Metric 5 Percentage of staff experiencing harassment, bullying or abuse from patients, relatives, or the public in last 12 months

2020 (2019 Staff Survey)		2021 (2020 Staff Survey)		2022 (2021 Staff Survey)	
BME	White	BME	White	BME	White
26.5%	23.6%	25.5%	22.5%	28.0%	25%

After seeing a positive change in 2020, 2021 has seen a significant deterioration with the number of BME colleagues experiencing unwanted behaviour from those who use our services, this figure is high and is only 0.8% below the Staff Survey benchmark group average.

Metric 6 Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months



2020	2021	2022
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(2019 Staff Survey)		(2020 Staff Survey)		(2021 Staff Survey)	
BME	White	BME	White	BME	White
30%	24.2%	31% 	24.8%	31.4% 	25.1%

There has been a slight deterioration with this figure in 2021 and although there is no significant statistical movement it is still high and is above the Staff Survey benchmark group average of 28.5%.



The Trust is currently experiencing a recruitment and retention problem and if our BME colleagues continued to experience harassment, bullying or abuse this will only have a negative impact on this problem. Therefore, it is imperative that the Trust continues to address this.

Metric 7 Percentage believing that the Trust provides equal opportunities for career progression or promotion

2020 (2019 Staff Survey)		2021 (2020 Staff Survey)		2022 (2021 Staff Survey)	
BME	White	BME	White	BME	White
49.2%	57.1%	46.7% 	55.6%	41.9% 	56.8%



2020 and 2021 Staff Survey results have seen a consistent deterioration of this Metric with only 41.9% of BME colleagues believing that the Trust provides equal opportunities for career progression or promotion. The fact that Metrics 1 and 2 demonstrate that there is an issue with promotion supports this belief. Our Staff Survey benchmark group average is 44.6%.

Metric 8 In the last 12 months have you personally experienced discrimination at work from any of the following? Manager/team leader or other colleague

2020 (2019 Staff Survey)		2021 (2020 Staff Survey)		2022 (2021 Staff Survey)	
BME	White	BME	White	BME	White
16.1%	5%	16.0% 	6.3%	20.3% 	6.1%

The 2021 Staff Survey results have seen a significant deterioration of this figure by 4.3%. The national figures for BME colleagues experiencing discrimination within admin and clerical, AHPs, nursing and medical and dental roles are all higher than their white counterparts with nursing being the highest. This is referenced in the aforementioned report. The Trust figure is above the Staff Survey benchmark group average figure which is 17.3%.

The CEO's Listening Exercise is also reflective of this experience and is addressed within the accompanying action plan to demonstrate that the Trust is listening and takes the experiences of its BME colleague's seriously.

Metric	Description	2020 Total BME	2021 Total BME	2022 Total BME
9	BME Board Members	0	0 	1 

	Percentage difference between the organisations' Board voting membership and its overall workforce			6.25%
	Voting Board Members	0	0	0
	Non-voting Members	0	0	1

The percentage of Board members by ethnicity compared to its BME workforce is 6.25%. The aim of this metric is for the Board to reflect its BME workforce, which is currently at 12.5%. This should be an opportunity to create diversity of thought, equal opportunities, diverse representation and inclusion.

In the 2021 WRES report, previously mentioned, within North East and Yorkshire 12.2% of the workforce is made up of BME colleagues. The Boards are 87.7% white, 8.2% BME and 4% have an ESR declaration status of Unknown. There is a lower proportion of BME people on Boards compared to the proportion of BME colleagues.

Progress Against the 2021 Action Plan

The responsibility for the Equality Action Plan 2021 was held with several colleagues within Workforce, overseeing the whole action plan whilst carrying out their substantive roles.

The action plan covered the WRES and Workforce Disability Equality Standard (WDES) and was very extensive. It covered several areas aimed at improving BME colleague's experiences. With any action plan an improvement in experiences and therefore data needs to be monitored on a year on year basis which will provide a true reflection of improvement. There have been different levels of progress with the 2021 action plan; for the following reasons:

- Absenteeism
- Staff Network members response
- Some actions not aligned with anyone specifically
- Postponement of the intervention

There has been progress with some of the actions, but this has not been the case throughout. The pilot of the Reciprocal Mentoring Programme has been implemented and reviewed, with a plan to continue rolling this out throughout the Trust. Policies have/are being reviewed to be more inclusive, the Staff Networks have been engaged with and the CEO has conducted a Listening Exercise and there has been a review of the Leaver's questionnaire. There should still be a 'push' forwards where there has been a lack of response from colleagues and it is hoped that the Head of EDI can influence and support colleagues where necessary.

Some of the 2021 actions have been incorporated into the 2022/23 action plan to ensure they are implemented. On this occasion, the WRES and WDES action plans have been drawn up separately as less progress has been made with the WRES, so it needs to be very focused. Colleagues who hold responsibility for an area of

work are encouraged to ensure that EDI is threaded throughout and take responsibility for consulting data and listening to colleague's lived experiences to improve outcomes.

2022-2023 Action Plan

This year's action plan focuses on the Metrics that have deteriorated and those where the data remains high, so experiences are negative. The National advice is not to necessarily focus on all 9 Metrics but on those that require addressing the most. In saying this there will naturally be other organisational interventions that might have a positive impact on experiences and therefore the data. It is imperative that a deep dive into the data is carried out to ensure there is a better understanding of experiences. This will be intrinsic to some of the actions.

The National WRES Team have provided a template action plan, but it is not mandatory to use this, although it will be in the future. 2022 is the first year where they have requested that Trusts submit their action plans for analysis. They will then provide feedback about the action plans regarding the extent to which they relate to the Trust's specific data, and the evidence-based likelihood of improving outcomes.

1. Summary

- The Trust needs improve the experiences of its BME colleagues, there has been inadequate improvement of its data.
- The impact of BME colleagues work experiences and career progression will not create a healthy and sustainable workforce if they continue to be negative.
- The financial cost to the organisation of not 'getting this right' will be significant.
- The experiences of BME colleagues may impact on patient care
- Negative outcomes will affect our Well-led review, especially as the National WRES team have been working with the CQC.

2. Next Steps

The data was submitted by the deadline of 31 August 2022. The Trust's action plan will be submitted by the deadline of 31 October 2022 and will be published on the Trust's website.

The Trust Board is asked to review the data and sign off and support the action plan for implementation.

Appendix 1 – WRES Action Plan 2022-2023

Date: October 2022

