Workforce Race Equality Standard

REPORTING TEMPLATE (Revised 2016)

Template for completion

Name of organisation

Leeds and York Partnership NHS Foundation Trust

Date of report: month/year

June 2017

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

Susan Tyler - Director Workforce Development

Name and contact details of lead manager compiling this report

Caroline Bamford, Head of Diversity and Inclusion, email: caroline.bamford@nhs.net Tel: 0113 855 9915

Names of commissioners this report has been sent to (complete as applicable)

Rachel McCluskey, Leeds North CCG

Name and contact details of co-ordinating commissioner this report has been sent to (complete as applicable)

Rachel McCluskey, Leeds North CCG

Unique URL link on which this Report and associated Action Plan will be found

https://www.leedsandyorkpft.nhs.uk/about-us/equality-and-diversity/

This report has been signed off by on behalf of the Board on (insert name and date)

Susan Tyler, Director of Workforce and OD August 2017

Publications Gateway Reference Number: 05067

Report on the WRES indicators

1. Background narrative

a. Any issues of completeness of data

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

There were issues with analysis and reporting of recruitment conversion data for 2015/16 and these have now been rectified in the 2016/17 reporting period. However this means that accurate analysis against the previous data cannot be undertaken but that this will be undertaken going forward.

2. Total numbers of staff

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

2535

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

15.2%

3. Self reporting

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

100%

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

Personal information sheet for all new starters includes ethnicity data and data validation has been completed to capture any omitted data. Staff can also self identify through the employee self service portal and regular local data quality reporting is undertaken to consistently maintain 100% compliance.

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

4. Workforce data

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

1st April 2016 to 31st March 2017

5. Workforce Race Equality Indicators

Please note that only high level summary points should be provided in the text boxes below – the detail should be contained in accompanying WRES Action Plans.

	Indicator	Data for reporting year	Data for previous year	Narrative – the implications of the data and any additional background explanatory narrative	Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective
	For each of these four workforce indicators, compare the data for White and BME staff				
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.	Please see Appendix G of the Trust's 2016/17 Workforce and Organisational Development Report for further breakdown.	Please see Appendix 1 of the Trust's 2015/16 report for the full breakdown of staff in each Agenda for Change Bands	Data analysis indicates an under-representation of BME staff in: Clinical Bands 4,6,7,8a,8b,8c Non Clinical Bands: 1,3,4,5,6,7,8a,8b,8d	Equality and Inclusion Board member lead.
2	Relative likelihood of staff being appointed from shortlisting across all posts.	1.71	1.46	The relative likelihood of White staff being appointed from shortlisting compared to BME staff is 1.71 times. This illustrates 0.25% increase when compared with data from 2016/17.	Review of recruitment and selection training for appointing managers to include unconscious bias module; training to commence November 2017. Introduction of new recruitment management system TRAC in November 2017 will enable more detailed analysis of recruitment conversion trends by service area and by occupational areas
3	Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation. This indicator will be based on data from a two year rolling average of the current year and the previous year.	1.37	1.33	This figure is based on 119 cases over a two year period. This data shows that the relative likelihood of BME staff entering the formal disciplinary process compared to White staff is 1.37 times greater which is a 4% increase when compared with the previous year.	Detailed analysis of disciplinary data undertaken in 2016 by Staff Side representative to identify and understand themes and trends. Development of Disciplinary Training for investigating managers to include unconscious bias module; training to commence October 2017.
4	Relative likelihood of staff accessing non-mandatory training and CPD.	0.84	1.27	Indicator 4 shows that during 2016/17, White staff were 0.84 times more likely to access non - mandatory training and CPD than BME staff. This is a 43% decrease in likelihood when compared with 2015/16. During the reporting period 17.3% of BME staff	Although there has been a 4.5% increase in BME staff accessing non-mandatory training in 2016/17 there is still a disparity in access. Promotion and monitoring of uptake of leadership and development programmes including Management Essentials programme for middle leaders and the Mary Seacole leadership

Report on the WRES indicators, continued

	Indicator	Data for reporting year	Data for previous year	Narrative – the implications of the data and any additional background explanatory narrative	Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective
	National NHS Staff Survey indicators (or equivalent) For each of the four staff survey indicators, compare the outcomes of the responses for White and BME staff.				
5	KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.	White 31.14% BME 40.28%	White 31.83% BME 38.64%	Indicator 5 illustrates that staff from BME groups experience more instances of harassment, bullying or abuse from patients, relatives or the public than White staff. It is also an increase of almost 2% when compared with the previous	Trust-wide on-line staff engagement exercise to take place in September 2017 to identify ideas and priority actions to address bullying and harassment. A Trust-wide action plan will be developed and implemented from the survey.
6	KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.	White 21.90% BME 17.36%	White 21.07% BME 24.44%	Indicator 6 shows that there has been a decrease by 6.6% in the percentage of BME staff experiencing harassment, bullying or abuse from other staff when comparing the two financial years.	Trust-wide on-line staff engagement exercise to take place in September 2017 to identify ideas and priority actions to address bullying and harassment. A Trust-wide action plan will be developed and implemented from the survey.
7	KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion.	White 89.16% BME 77.91%	White 90.39% BME 66.67%	The data highlights there has been a positive increase of 11.24% year on year in the percentage of BME who believe that the Trust provides equal opportunities for career progression or promotion.	A Talent Management framework is currently being developed to commence in 2018/19. Within the framework there will be specific focus on developing an inclusive approach and detailed monitoring of uptake will be undertaken.
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 5.87% BME 7.80%	White 6.23% BME 13.95%	The percentage of BME staff personally experiencing discrimination from managers and colleagues illustrates a positive decrease of 6.2% during 2016/17 in comparison to the previous year.	A behavioral framework has been developed in 2016/17 through Trust-wide on line staff engagement and incorporated within the annual appraisal process. Further will be undertaken to embed the framework at all levels e.g. through
	Board representation indicator For this indicator, compare the difference for White and BME staff.				
9	Percentage difference between the organisations' Board voting membership and its overall workforce.	-7.4%	-7.1%		Indicator 9 shows that the percentage of Board members from a BME community is considerably lower than the BME population within the overall workforce.

Note 1. All provider organisations to whom the NHS Standard Contract applies are required to conduct the NHS Staff Survey. Those organisations that do not undertake the NHS Staff Survey are recommended to do so, or to undertake an equivalent.

Note 2. Please refer to the WRES Technical Guidance for clarification on the precise means for implementing each indicator.

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

In 2016/17 the Trust staff survey response rate was 53% which was above the national average and an improvement on the previous year. For the first time the Staff Survey results were desegregated by team and service area therefore enabling much more detailed identification of hot spot areas and high performing areas to inform local improvement plans for 2017/18 and to enable the sharing of best practice.

7. 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.

The current WRES Action plan is available via the Trust website please see:
https://www.leedsandyorkpft.nhs.uk/about-us/equality-and-diversity/

In line with the Trust's development of its clinical strategy and supporting plans the WRES Action plan will be reviewed by November 2017 an updated plan will be produced and improvement measures and key performance indicators integrated within the Trust's three year Workforce and Organisational Development Plan.

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