Workforce Race Equality Standard

REPORTING TEMPLATE (Revised 2016)

Template for completion

Name of organisation

Leeds and York Partnership Foundation Trust

Date of report: month/year

August 2018

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

Lindsay Jensen, Interim Director of Workforce Development

Name and contact details of lead manager compiling this report

Caroline Bamford, Head of Diversity and Inclusion

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

Leeds Clinical Commissioning Group

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

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

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

Lindsay Jensen, Interim Director of Workforce Development- September 2018

Publications Gateway Reference Number: 05067

Report on the WRES indicators

1. Background narrative

a. Any issues of completeness of data

N/A

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

Indicator 2- Relative likelihood of staff being appointed across all posts
Data was analysed from NHS Jobs and TRAC (national data vacancy management system) for the 2017/18 reporting period. During 2017/18, Trust recruitment systems were updated and underwent transfer from NHS Jobs to TRAC, online recruitment management software. During the migration process, it is anticipated that there was data loss equating to 6-8 weeks' worth of recruitment information. Therefore, this must be considered when assessing the likelihood of White staff being appointed from shortlisting in comparison to BME staff.

Indicator 4- Relative likelihood of staff accessing non-mandatory training and CPD.
The scope of programmes included for analysis has been extended during this reporting period to include clinical supervision.

2. Total numbers of staff

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

2551

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

15.4%

3. Self reporting

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

97.8%

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

No

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

No

4. Workforce data

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

March 2018

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 WRES Staff Breakdown 2017-18 through accessing the link detailed at section 7 of this document.		Clinical roles- 51% of BME staff are concentrated in Bands 3-5, accounting for 51% .There is under-representation at Bands 6-8b, with the exception Bands 8c and 8d at 38%. Non-clinical role- 53% of BME staff are concentrated at Bands 1-3, reducing to only 22% at Bands 6 and 7, with no representation at Band	A Trust BME staff network was established in 2018 following extensive engagement with BME staff. Support to address barriers to career development is a key priority theme for members and actions undertaken include raising awareness of current development opportunities and the development of a peer support framework for network members.
2	Relative likelihood of staff being appointed from shortlisting across all posts.	1.3	1.7	The targeted ambition is for the likelihood of appointment to be the same for BME and White staff. There has been a positive reduction in the likelihood, indicating that training for appointing managers may be having an impact.	The Trust has introduced revised training for appointing managers which includes a focus on cultural competence and unconscious bias. The Trust will undertake further thematic analysis to identify themes and trends to inform the development of improvement plans at professional,care group and service level.
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.	1.7	1.37	There has been a negative increase in the likelihood since the last reporting period, currently for every 21 BME members of staff 1 was involved in a disciplinary, compared to, for every 30 White members of staff 1 was involved in a disciplinary.	To undertake detailed analysis of current disciplinary and recruitment conversion data, to identify themes and trends and to develop improvement plans with service and professional leads.
4	Relative likelihood of staff accessing non-mandatory training and CPD.	0.89	0.84	This is based on access to training which is non-mandatory.	The Trust promotes and monitors set programmes in relation to career development. Scoping work is currently being undertaken for the Trust to participate in a local evidence based career development programme for BME staff in 2019/20.

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 28.7% BME 36.05%	White 31.14% BME 40.28%	36% of BME staff who responded to the 2017 staff survey experienced harassment, bullying or abuse from patients, relatives or the public in the previous 12 months. This is a 4.2% decrease from last year.	On line Trust wide engagement to gather staff views on priorities to address bullying and harassment. An action plan has been developed and implementation commenced to review procedures and processes. The Trust has
6	KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.	White 19.42% BME 18.24%	White 21.9% BME 17.36%	0.8% more BME staff reported in the 2017 staff survey that they had experienced harassment, bullying or abuse from staff in the previous twelve months when compared to the previous year.	On line Trust wide engagement to gather staff views on priorities to address bullying and harassment. An action plan has been developed and implementation commenced to review procedures and processes. The Trust has
7	KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion.	White 87.69% BME 81.31%	White 89.16% BME 77.91%	81.3% of BME staff reported in the 2017 staff survey that they believe that the Trust provides equal opportunities for career progression or promotion. This is a 3.4% increase from the previous year.	Establishment of the BME Workforce Race Equality Network (WREN) with focus on reducing barriers to career development as prioritised by members, in this reporting year.
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 6.13% BME 8.24%	White 5.87% BME 7.8%	2.1% more BME respondents experienced discrimination at work from managers or other colleagues.	Embedded key messages for managers about collective and inclusive leadership into the Senior Leadership Forum programme through national expert national speakers.
	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.	- 7.8%			The Board is committed to ensuring that when a position becomes available they will actively seek BME applicants.

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?

During 2017 the Trust undertook extensive staff engagement to support the development of its Workforce and Organisational Strategic Plan for 2018-2021. Annual key performance and improvement indicators have been identified for WRES metrics 4;6;7 and 8 and progress will be reported annually through the governance structure to the Board;

Details of the key performance indicators can be accessed within section 5 of the strategic plan via the following link;
https://www.leedsandyorkpft.nhs.uk/about-us/wp-content/uploads/sites/8/2018/07/Workforce-and-Organisational-Development-Strategic-Plan-2018.pdf

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.

Implementation of the WRES is an equality objective for the Trust and a focus within the EDS2 workforce work stream.

The Trusts WRES action plan can be accessed via the following link;
https://www.leedsandyorkpft.nhs.uk/about-us/wp-content/uploads/sites/8/2017/11/workforce-race-equality-2017-20.pdf

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