**Workforce Race Equality Standard Action Plan 2023-2025**

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| Red | Not yet begun |
| Amber | Begun but not complete |
| Green | Complete |
| Blue | New |

**Author:** Head of Equality, Diversity and Inclusion

**Senior Responsible Officer:** Director of Workforce and Organisation Development

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Note: BME staff were engaged with via a joint staff network meeting and a survey monkey to obtain their suggestions on the actions required. These actions are designed to address the Workforce, Medical and Bank Race Equality Standards.

Where an action has been given a Green RAG rating to indicate complete, the action, where necessary, will be continuously implemented.

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| **Objective** | **Analysis** | **WRES Action** | **Executive Director Lead** | **Operational Lead** | **Date** | **RAG**  **Rating** |
| **WRES Indicator 1 BME representation in the workforce by pay band**  **WRES Indicator 2 Relative Likelihood of White staff being appointed from shortlisting compared to that of BME staff being appointment from shortlisting across all posts** | | | | | | |
| Indicator 1 has not seen any improvement in the number of BME staff employed in the Trust under Agenda for Change. Therefore, the Trust needs to Increase support and opportunities for career progression | Race Disparity Ratios  High priority areas for improvement suggested by NHSE WRES Team:  Career progression in clinical roles (lower to middle levels,)  Career progression in clinical roles (lower to upper levels)   * Bands 1-4 = 0.8% * Bands 5-7 = 7.3% * Bands 8-9 = 0.07% * VSM = 0%   Career progression in non-clinical roles middle to upper levels)   * Bands 5-7 = 0.5% * Bands 8-9 = 0.1% * VSM = 0.01%   Lower: band 5 and under  Middle: bands 5 & 7  Upper: bands 8a and above | Use positive action in targeting BME staff within the race disparity ratios levels to attend the internal development courses to support them with career progression | Director of Workforce and Organisational Development | Head of Organisational Development | Commence in Q4 2024 |  |
| **Bank WRES Indicator 1 Percentage of active workers by ethnic group and gender across key grades and staff groups** | | | | | | |
| Increase BME appointments to clinical and non-clinical A4C posts. Increase this by 0.6% for each race disparity ratio level | On examining the Bank data there could be an improvement in the number of BME staff on Bank. | BME staff invited to attend Bank recruitment events. (This should include existing staff) | Director of Workforce and Organisational Development | Bank Recruitment | Commence in Q3 2023 |  |
| **WRES, BWRES & MWRES** | Qualitive engagement data states that more visible diversity in the Trust’s communications is required. This would encourage BME staff to see themselves in different job roles and see others as role models | Continue to ensure there is visible diversity in the Trust’s Communications  Dedicated equality, diversity and inclusion page in Staff Matters | Director of Communications | Head of Communications and Head of EDI | Commence in Q3 2023 |  |
| **WRES Indicator 2 Relative likelihood of White staff being appointed from shortlisting compared to that of BME staff being appointed from shortlisting across all posts** | | | | | | |
| Improve the relative likelihood of being appointed from shortlisting from 2.5 to 1 for the organisation | Y&S has seen no statistical improvement.  A figure of 1 would mean there is equity | All recruiting managers/panels to attend Inclusive Recruitment Training (whilst this wouldn’t be mandatory training, this should be a recruitment requirement) | All Directors | Head of EDI, Medical & Bank Recruitment & HR Recruitment Manager | Q4 2024 |  |
|  |  | BME representation on recruitment panels. Bands 6+ for AfC and Consultant posts (may need to include colleagues from HNY) | Director of Workforce and Organisational Development | Medical Recruitment Manager, Bank Recruitment & HR Recruitment Manager | Q2 2024 |  |
|  |  | Continue to deliver Conscious Inclusion training | Director of Workforce and Organisational Development | Head of EDI | 2023-2024 |  |
|  |  | Workforce Leads to work with CG and Directorates on developing local action plans addressing local data | Polly McMeekin, Director of Workforce and Organisational Development | Workforce Leads | October 2023 onwards |  |
|  |  | Implement interview skills training to support staff pre-interview | Director of Workforce and Organisational Development | Head of EDI | Q3 2024 |  |
|  |  | Offer all BME job applicants the opportunity of receiving improvement feedback after interview | Director of Workforce and Organisational Development | EDI Workstream supported by Workforce Leads | Q2 2024 |  |
|  |  | Advertise jobs using a variety of recruitment platforms | Director of Workforce and Organisational Development | HR Recruitment Manager, Band and Medical Recruitment | Q2 2024 |  |
| **MWRES Indicator 1b Percentage of staff by ethnicity in pay bands which cover all non-medical staff and Very Senior Managers** | | | | | | |
| Encourage BME consultants to apply for the Local Clinical Excellence Awards (LCEA) | The number of staff eligible for and were awarded clinical excellence awards funds in 2022 round, disaggregated by ethnicity = White colleagues 252, BME colleagues 88 (*please note*: The Trust did not run an application process through the 2022 LCEA round. These figures are reflective of equal distribution of available awards funds amongst all consultants who would have been eligible to apply had an application process taken place. Moving forward the Trust plans to revert to an application and reward scheme). | Ensure any future LCEA process is inclusive of BME consultants to encourage an increase in the number of applications | Medical Director | Medical Director & Medical Workforce Manager | Next round of awards 2024 |  |
| **WRES Indicator 5 Percentage of staff experiencing harassment, bullying, or abuse from patients, relatives or the public in the last 12 months** | | | | | | |
| See a year on year decrease in the number of staff experiencing this behaviour. To reach 30.8% by 2025 | There has been a significant deterioration over the last two years with the number of BME staff experiencing unwanted behaviour from those who use our services, this figure is high and is above the Staff Survey benchmark group average of 30.8%. | Review of the Trust’s Exclusion (Challenging Behaviours) Policy | Chief Nurse | Learning Disabilities | 2023 |  |
|  |  | Implement training for ward staff on how to deal with unwanted behaviour in line with the Challenging Behaviours Policy | Chief Nurse | TBA | After implementation of the policy |  |
|  |  | Procedure developed on how to support staff including access to psychological support | Chief Nurse | Learning Disabilities | 2024 |  |
|  |  | Communications campaign to inform all services users and visitors to the Trust regarding approach to bullying, harassment and violence to staff | Chief Nurse | Head of Communications, Patient EDI Lead and EDI Workstream | 2024 |  |
| **Metric 8 In the last 12 months have your personally experienced discrimination at work from any of the following: Manager/team leaders or colleagues?** | | | | | | |
| For the Trust to see a reduction in people’s experiences and the reporting in the Staff Survey by 2.5% by March 2024 | After seeing a steep deterioration in 2022 compared to 2021, there has been little statistical improvement in 2023. The Trust’s data is currently above the Staff Survey benchmark group average of 17.3%. | Improve mandatory Equality, diversity and human rights training compliance. Target 85%. | All Directors | EDI Workstream supported by Workforce Leads | Q1 2024 |  |
|  |  | Implement NHS England’s Culture and Leadership Programme. Included within this will be the Behavioural Framework implementation, launch of the Civility, Respect and Resolution Policy, the importance of raising concerns and the FTSU remit | Chief Nurse | Head of Employee Relations and Engagement | May 2024-Sep 2025 |  |
|  |  | Examine data collected with ER to determine trends in specific departments, roles or pay bandings  • monitor exit interview data to identify any particular trends and issues relating to staff leaving for these reasons. Create local action plans to address the findings | Chief Nurse | EDI Workstream supported by Workforce Leads | Q1 2024 |  |
| **Metric 9: BME Board members – Percentage difference between the organisation’s Board voting membership and its overall workforce** | | | | | | |
| Increase the number of BME Board members by to be more reflective of the organisation | Metric 9 has seen no statistical improvement in the number of BME staff on the Trust’s Board of Directors and as voting board members.  The difference in comparison to the rest of the organisation is-4.9% | Associate Director of Governance to engage with staff networks to review Chair and NED recruitment documentation for any barriers | The Trust’s Chair | Associate Director of Governance | October 2023 |  |
|  |  | The Trust to continue to engage with Gatenby Sanderson’s Inspiring Leaders Programme to aid diverse recruitment | The Trust’s Chair | Associate Director of Governance | November 2023 |  |
|  |  | Head of EDI to review Chair’s JD & PS for any potential barriers | Director of Workforce and Organisational Development | Head of EDI | July 2023 |  |
|  |  | Career conversation/coaching and mentoring (action also applicable metrics 1, 2 and 4) | Director of Workforce and Organisational Development | OD Facilitator | March 2024 |  |
|  |  | Positive action in recruitment allowed under the Equality Act 2010 – state in advertisements looking for someone from a visibly diverse background | The Trust’s Chair | Council of Governors | September 2024 |  |
|  |  | Ensure the Council of Governors is diverse | The Trust’s Chair | Governor and Membership Manager | September 2024 |  |