Workforce Race Equality Standard

REPORTING TEMPLATE (Revised 2016)

Template for completion

Name of organisation

Berkshire Healthcare NHS Foundation Trust

Date of report: month/year

March 2016

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

Bev Searle, Corporate Affairs Director

Name and contact details of lead manager compiling this report

Louella Johnson Director of Human Resources, louella.johnson@berkshire.nhs.uk; 01344415619; 07789944218

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

None at this stage. The report along with plans developed will be shared later in the year

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

n/a

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

http://www.berkshirehealthcare.nhs.uk/_store/documents/wres-reporting-template-2016.pdf

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

Bev Searle, Corporate Affairs Executive Director, Berkshire Healthcare, 27 September 2016

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

2. Total numbers of staff

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

4177

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

19.7%

Report on the WRES indicators, continued

3. Self reporting

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

95.3% of staff have self-reported their ethnicity

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

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?

reporting year 1st April 2015 to 31st March 2016 (2015/16); previous reporting year 2014/15

Report on the WRES indicators, continued

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.	Workforce BME 19.8% White 75.5% CLINICAL Staff Under Band 1 BME 11.1% White 44.4%	Workforce BME 18.9% White 76.5% CLINICAL Staff Under Band 1 BME 28.6% White 28.6%	The data for Indicator 1 shows that taking each pay band separately; the percentage of BME staff in that pay band varies from the Trust wide average of 19.8% BME staff. For Clinical staff, from Bands 7 through to 8A – 8D, the percentage of BME staff is below the Trust average. BME staff are less well	For the detail behind these actions please see the BHFT WRES Action Plan. To address Indicator 1, we will: 1. Train managers in how to recruit and select fairly, by incorporating unconscious bias training into recruitment training 2. Promote successful role models
2	Relative likelihood of staff being appointed from shortlisting across all posts.	BME 0.110 White 0.160	BME 0.103 White 0.164	Whilst three years data shows a continuing positive improving trend, which may be attributable to the investment in management and leadership training in the last three years, there is clearly more to do as the 2015/16 scores show. In 2015/16, a white staff member is 1.454 times more likely to be appointed than a BME staff	For the detail behind these actions please see the BHFT WRES Action Plan. To address Indicator 2 we will: 1. Train managers in how to recruit and select fairly, by incorporating unconscious bias training into recruitment training 2. Promote successful role models
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.	BME 0.023 White 0.018	BME 0.029 White 0.021	Whilst three years data shows a continuing positive improving trend, which may be attributable to the investment in management and leadership training in the last three years, there is clearly more to do as the 2015/16 scores show. 2015/16 - 58 of 3155 white staff disciplined; 19 of 832 BME staff disciplined. A BME member of staff	For the detail behind these actions please see the BHFT WRES Action Plan. To address Indicator 3 we will: 1. Make unconscious bias training mandatory for anyone responsible for implementing formal disciplinary processes
4	Relative likelihood of staff accessing non-mandatory training and CPD.	BME 0.123 White 0.174	BME 0.144 White 0.206	CPD includes professional development courses as well as training for the unqualified workforce. The figures are based on the number of applications received by the Learning & Development Team. 2015/16 Workforce: White is 3155; BME 832 Accessing CPD Training: White staff 550; BME	For the detail behind these actions please see the BHFT WRES Action Plan. To address Indicator 4 we will 1. Enable staff to apply directly for CPD through a central (ideally) online system 2. Monitor to detect any unfair bias in decisions taken by line managers or Learning and

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 23% BME 25%	White 21% BME 32%	Positive improvement.	For the detail behind these actions please see the BHFT WRES Action Plan. To address Indicator 5 we will: 1. Make unconscious bias training essential for
6	KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.	White 19% BME 27%	White 19% BME 23%	A deterioration in performance against the indicator	For the detail behind these actions please see the BHFT WRES Action Plan. To address Indicator 6 we will: 1. Change the name of the policy (Currently
7	KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion.	White 91% BME 74%	White 88% BME 76%	A deterioration in performance against the indicator for BME, which stands out against a three percentage point improvement in the perception of white staff	For the detail behind these actions please see the BHFT WRES Action Plan. To address Indicator 7 we will: 1. Train managers in how to recruit and select
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% BME 14%	White NA BME NA	A significant adverse difference in the percentage of BME staff who have personally experienced discrimination. The nature of the discrimination could cover any	For the detail behind these actions please see the BHFT WRES Action Plan. To address Indicator 8 we will: 1. Train managers in how to recruit and select
	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.	White 83% BME17%	White 100%	Local Population: 20% BME 80% White	For the detail behind these actions please see the BHFT WRES Action Plan. To address Indicator 9 we will: 1. Train those involved in the appointment of

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.

Report on the WRES indicators, continued

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

The indicators reinforce the need for action already being taken by the Trust (in relation to EDS). the information gathering planned will be extended to address the problems indicated through the metrics. This should inform the trust on root causes as well as potential solutions from a staff perspective. In deciding what to prioritise and how to improve the indicators, our staff will be consulted about the solutions. Solutions are likely to require behavioural changes, which will take time to bring about. In this current year, raising awareness will be a priority. Before embarking on the design, development and delivery of new training initiatives, current training will be reviewed to identify any gaps or improvements needed.

Action plans informed by desk research, focus groups, surveys and feedback from staff will be linked into the EDS and wider Equality strategy

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.

WRES Action Plan produced and agreed by Trust Board

Click to lock all form fields and prevent future editing