



NEL WRES 17/18

Workforce Race Equality Standard

Development and Inclusion Team

August 2018

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About Workforce Race Equality Standards (WRES)

In 2014, NHS England and the NHS Equality and Diversity Council agreed action to ensure employees from Black and Minority Ethnic (BME) backgrounds have equal access to career opportunities and receive fair treatment in the workplace. It was agreed that a Workforce Race Equality Standard (WRES) should be developed, and in April 2015 it was made available to the NHS. All NHS organisations including CCGs, Trusts and CSUs as well as national organisations are encouraged to implement the WRES in an open and transparent way. This will help to show the national, clinical and commissioning workforce.

The Workforce Race Equality Standard is a set of indicators that, for the first time, require all organisations with NHS contracts to demonstrate progress against a number of areas of race equality, including a specific indicator to address the low levels of BME board representation.

Simon Stevens, Chief Executive of NHS England, said: “The Five Year Forward View sets out a direction of travel for the NHS – much of which depends on the health service embracing innovation, engaging and respecting staff, and drawing on the immense talent in our workforce.

“We know that care is far more likely to meet the needs of all the patients we’re here to serve when NHS leadership is drawn from diverse communities across the country, and when all our frontline staff are themselves free from discrimination. These new mandatory standards will help NHS organisations to achieve these important goals.”

Simon Stevens

Chief Executive of NHS England

Foreword

At NEL, our mission is to be the best partner to the system because we believe in healthy communities and our place in a sustainable NHS. As an organisation with revenues of over £130m, that delivers a wide range of services and support that impacts millions of lives across England, diversity and inclusion needs to be at the heart of everything we do.

Over the last year we have introduced best practice approaches to mitigating bias in recruitment and selection, including mandatory Black, Asian and Minority Ethnic (BAME representation) on panels for all senior roles. We have also trained a cohort of BAME coaches who are now available to provide support across the organisation. The new NEL talent management programme 'Building the Talent' has been designed to ensure that our talent pool reflects the diversity of our organisation.

We were the first Commissioning Support Unit to publish the WRES and we continue on the journey. This year's WRES report shows that we are making progress: the percentage of BAME staff has increased across NEL, incidences of bullying and harassment have fallen, and BAME staff are still more likely than white staff to access non-mandatory training.

While we celebrate our successes we are also open about where we still require improvement. We want to be the best place to work for all our people and will continue to challenge ourselves year on year.

Mark Creelman, Managing Director

August 2018

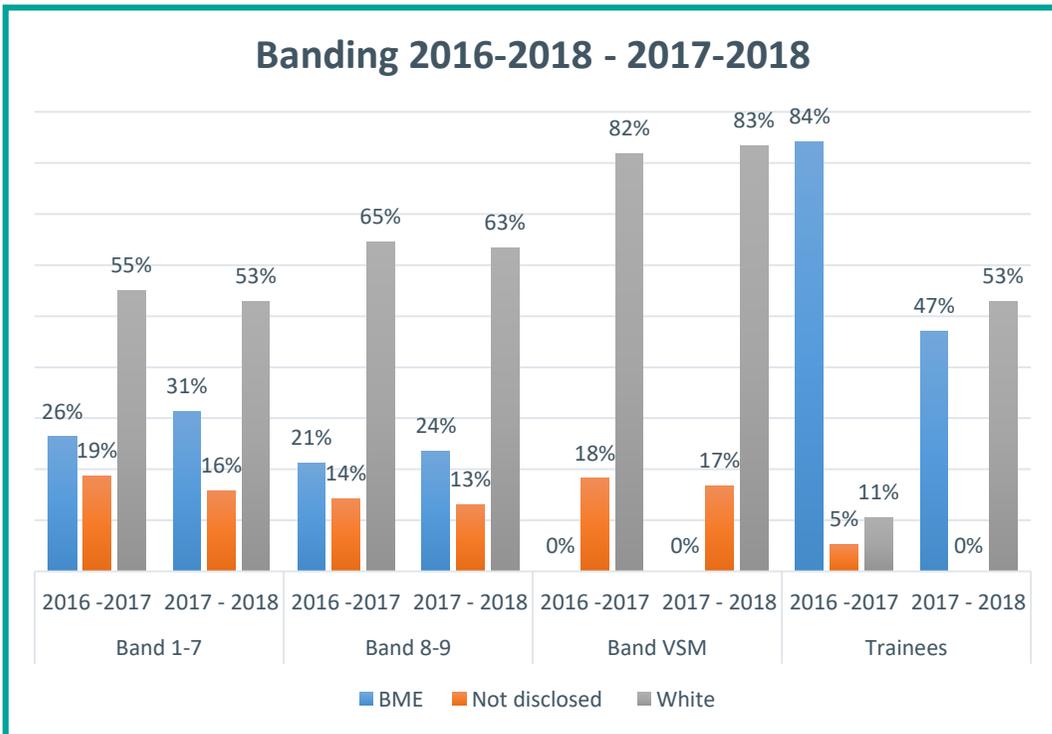
WRES Indicators

	<p>Workforce indicators For each of these four workforce Indicators, <u>compare the data for white and BME staff</u></p>
1.	<p>Percentage of staff in each of the AfC Bands 1-9 or Medical and Dental subgroups and VSM (including executive Board members) compared with the percentage of staff in the overall workforce disaggregated by:</p> <ul style="list-style-type: none"> • Non-Clinical staff • Clinical staff - of which <ul style="list-style-type: none"> - Non-Medical staff - Medical and Dental staff <p>Note: Definitions for these categories are based on Electronic Staff Record occupation codes with the exception of Medical and Dental staff, which are based upon grade codes.</p>
2.	<p>Relative likelihood of staff being appointed from shortlisting across all posts</p> <p>Note: This refers to both external and internal posts</p>
3.	<p>Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation</p> <p>Note: This indicator will be based on data from a two year rolling average of the current year and the previous year.</p>
4.	<p>Relative likelihood of staff accessing non-mandatory training and CPD</p>
	<p>National NHS Staff Survey indicators (or equivalent) For each of the four staff survey indicators, <u>compare the outcomes of the responses for white and BME staff</u></p>
5.	<p>KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months</p>
6.	<p>KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months</p>
7.	<p>KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion</p>
8.	<p>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</p>
	<p>Board representation indicator For this indicator, <u>compare the difference for white and BME staff</u></p>
9.	<p>Percentage difference between the organisations' Board membership and its overall workforce disaggregated:</p> <ul style="list-style-type: none"> • By voting membership of the Board • By executive membership of the Board <p>Note: this is an amended version of the previous definition of Indicator 9</p>

Indicator 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 disaggregated by: non-clinical staff/clinical staff



What is the data telling us?

- Over the last year the percentage of BME Staff in NEL has increased by 5% in bands 1-7 and 3% in Bands 8-9.
- NEL has no BME staff at VSM level.
- There has been a significant fall in the percentage of BME trainees year on year.

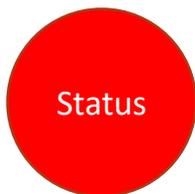
What have we done over the last year?

- NEL has applied a number of best practice interventions to mitigate bias in recruitment and selection.
- September 2017 we hosted a BAME conference with focus on building an inclusive culture.
- We developed a cohort of BAME EMCC accredited coaches.

What are we planning to do in the year ahead?

- Introduce BAME mentoring circles in partnership with Business in the Community.
- Launch Building the Talent, NEL's Talent Management programme with an explicit focus on ensuring representation.

Indicator 2



Relative likelihood of BME staff being appointed from shortlisting compared to that of white staff being appointed from shortlisting across all posts

NEL - External Recruitment	2016-17		2017-18	
Ethnicity	White	BME	White	BME
Number of staff in workforce	728	316	1074	531
Number short listed applicants	662	780	870	1188
Number appointed applicants	119	79	170	139
Ratio shortlisting to appointment	0.19	0.10	0.19	0.11
Relative likelihood of white staff being appointed from short listing compared to BME staff	1.9		1.7	

NEL - Internal Recruitment	2016-17		2017-18	
Ethnicity	White	BME	White	BME
Number of staff in workforce	728	316	1074	531
Number short listed applicants	310	198	307	273
Number appointed applicants	156	77	136	63
Ratio shortlisting to appointment	0.50	0.38	0.44	0.23
Relative likelihood of white staff being appointed from short listing compared to BME staff	1.31		1.91	

What is the data telling us?

- BME applicants are less likely than white staff to be appointed, the goal is a neutral likelihood of 1
- There has been some improvement in the relative likelihood of BME staff joining NEL through the external recruitment process.
- The relative likelihood of BME staff being recruited through the internal process has fallen year on year

What have we done over the last year?

- NEL has applied a number of best practice interventions to mitigate bias in recruitment and selection these include:
 - Mandatory BAME representation on senior interview panels
 - Recruitment and selection training
 - Anonymous shortlisting

- We have launched BME mentoring circles in partnership with Business in the Community.

What are we planning to do in the year ahead?

- Enhance guidance regarding quality job applications on NEL website.
- Conduct staff CV and interview skills workshops in partnership with the BAME network.

Indicator 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 previous year)

NEL Workforce	2017	
Indicator 3: Disciplinary Process	White	BME
Number of staff in workforce	1074	531
Number of staff entering formal disciplinary	0	4
Likelihood of White staff entering formal disciplinary	0	
Likelihood of BME staff entering formal disciplinary	0.007	
The relative likelihood of BME staff entering formal disciplinary compared to White staff	0.007	

What is the data telling us?

- This is our first year of consolidated data since the April 2017 merger.
- Last year we published data for NEL as a separate organisation, there was no data available for South East.
- As last year the data shows that we have a small number of formal disciplinary processes.
- In a reversal of last year’s position BME staff are more likely than white staff to enter formal disciplinary.
- Numbers are too small to draw a meaningful conclusion.

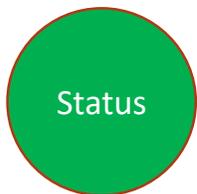
What have we done over the last year?

- Launched People Management Cycle with focus on regular feedback and one to ones.
- Encouraged managers to attend Management Development Academy to ensure effective performance management capability.
- Introduced mandatory BME representation on formal disciplinary panels.

What are we planning to do in the year ahead?

- Launch Aspiring Managers programme
- Encourage informal disciplinary processes, including a QA review before formal panel

Indicator 4



Relative likelihood of staff accessing non-mandatory training and CPD

	2016 -17		2017 -18	
Indicator 4: Non-mandatory training and CPD	White	BME	White	BME
Number of staff in workforce	728	316	1074	531
Number of staff accessing non mandatory training and CPD	349	161	1084*	539*
likelihood of white staff accessing non-mandatory training and CPD	0.47		1.00	
likelihood of BME staff accessing non-mandatory training and CPD	0.50		1.01	
Relative likelihood of white staff accessing non-mandatory training and CPD compared to BME staff.	0.94		0.99	

*Some people will access more than one training course in the same year, hence why the number of staff accessing non-mandatory training in 2017-18 is greater than the total workforce.

What is the data telling us?

- A figure below “1” would indicate that white staff members are less likely to access non-mandatory training and CPD than BME staff
- BME staff are more likely than white staff to access non-mandatory training or CPD
- The difference in relative likelihood between BME and white staff has fallen year on year, this is positive as the goal is for the likelihood to be the same between both groups

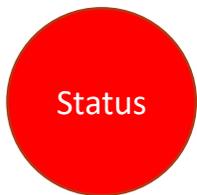
What have we done over the last year?

- Launched and promoted a number of BME specific programmes including Coaching and BME Mentoring circles in partnership with Business in the Community.
- Introduced effective monitoring of appraisal and PDP completion.

What are we planning to do in the year ahead?

- Monitor PDP completion and recording of all formal and informal non-mandatory training.
- Publicise non-mandatory training and CPD programmes to all staff.
- Communication of the importance of appraisal and staff responsibility to lead on their CPD.
- Launch Building the Talent, NEL’s Talent Management Programme.

Indicators 5-6



National NHS Staff Survey Indicators 2017/18

Summary of 2017 -18 Staff Survey outcomes (WRES Indicators 5-8)	NEL	
	2016	2017
5 - KF25 – percentage of staff experiencing harassment, bullying or abuse from patients/relatives or members of the public in last 12 months	Of the total who responded those who said 'YES': White:7% BME: 5%	Of the total who responded those who said 'YES': White: 6% BME: 6%
6 – KF26- percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months	Of the total who responded those who said 'YES': White: 22% BME: 24%	Of the total who responded those who said 'YES': White: 23% BME: 31%

What is the data telling us?

- Compared to other parts of the NHS only a small proportion of NEL staff work with members of the public and there is no difference in the percentage reporting bullying and harassment.
- A higher percentage of BME staff than white staff have experienced bullying and harassment from staff in the last 12 months, the percentage has increased for both groups.
- As a client service organisation incidences of bullying in indicator 6 may reference clients.

What have we done over the last year?

- Recruited and trained 33 volunteer Staff Support Champions across all NEL sites.
- Introduced a zero tolerance approach to bullying and harassment.

What are we planning to do in the year ahead?

- Further analysis by sites and directorate to identify areas for focus.
- Launch pulse survey to actively monitor staff experience through the year.
- Promote staff support champion service to raise awareness.
- Launch Aspiring managers programme to develop inclusive leadership behaviours.

Indicators 7-8



National NHS Staff Survey Indicators 2017/18

Summary of 2017 -18 Staff Survey outcomes (WRES Indicators 5-8)	NEL	
	2016	2017
7 – KF21– percentage of staff believing that the organisation provides equal opportunities for career progression or promotion	Of the total who responded those who said 'YES': White: 85% BME: 63%	Of the total who responded those who said 'YES': White: 83% BME: 56%
8 – Q17b in the last 12 months have you personally experienced discrimination at work from manager/team leader or other colleagues	Of the total who responded those who said 'YES': White: 7% BME: 20%	Of the total who responded those who said 'YES': White: 9% BME: 15%

What is the data telling us?

- The percentage of BME staff who believe that NEL provides equal opportunities for career progression has fallen by 7%.
- The percentage of BME staff reporting discrimination at work has fallen by 5% for BME staff, there is a small increase of 2% for white staff.

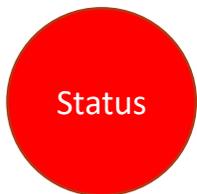
What have we done over the last year?

- NEL has implemented a best practice approach to recruitment and selection, including BAME staff on senior recruitment panels.
- Encouraged all managers to attend MDA programme to build leadership capability at NEL.

What are we planning to do in the year ahead?

- Launch Aspiring Managers programme to ensure that new managers are aware of expected behaviours.
- Road to Inclusion tour focus on impact of behaviours on others.
- Develop and launch staff charter.
- Develop and rollout managing Equality and Diversity ILM accredited programme.

Indicator 9



Percentage difference between (i) the organisations’ Board voting membership and its overall workforce and (ii) the organisations’ Board executive membership and its overall workforce

CMT	2016 -17			2017 -18		
Percentage difference between Board voting and executive memberships and overall workforce	White	BME	Not disclosed	White	BME	Not disclosed
Workforce	728	316	0	1074	531	277
CMT and VSM ethnic origin	8	0	0	12	0	4

What is the data telling us?

- NEL has no BME representation on CMT or at VSM level.
- There has been no improvement year on year.

What have we done over the last year?

- There is limited opportunity to address this due to lack of churn at senior level.
- Data for August would show one BME individual on CMT.
- Utilised the staff networks to ensure that key decisions are inclusive.

What are we planning to do in the year ahead?

- Introduce effective succession planning methodology.
- There are two VSM vacancies at present, the search specification highlights the organisation’s focus on diversity.
- Review of advisory board membership and refresh to ensure diversity input.

Action Plan

RAG status key

	BME experience equivalent to white experience
	Some difference between BME and white experience
	Large difference between BME and white experience

Indicator	Status 2016/17	Status and priority level 2017/18	Point for focus	Action
1 and 9		MEDIUM	Senior BME Representation Bands 8+ and VSM	<ul style="list-style-type: none"> Set directorate level representation goals Develop and implement Talent Management Programme Ensure focus on diversity in senior recruitment processes
2		HIGH	Internal recruitment – likelihood to be appointed	<ul style="list-style-type: none"> CV and interview workshops for BAME staff to be implemented through the BAME network Continue to ensure all interview panels have had recruitment and selection training Roll out BAME representation on all panels
3		LOW	Ensure that disciplinary data is captured	<ul style="list-style-type: none"> Continue to gather and report formal disciplinary occurrence
4		MEDIUM	To assess the impact of non-mandatory training on BME career progression	<ul style="list-style-type: none"> Launch talent management programme with focus on ensuring fair representation
5 and 6		HIGH	Focus on reducing incidences of bullying and harassment within NEL	<ul style="list-style-type: none"> Promote staff support champions more widely Enforce NEL zero tolerance policy
7 and 8		HIGH	Continue to promote culture of inclusion at NEL	<ul style="list-style-type: none"> Launch Aspiring Managers programme to ensure that new managers are aware of expected behaviours Road to Inclusion tour focus on impact of behaviours on others Develop and launch staff charter Develop and rollout managing Equality and Diversity ILM accredited programme

Note: This is a high level plan of centrally coordinated actions aligned to the WRES indicators. See NEL CSU Action Plan for full details including BME Network specific actions.

Acknowledgements

Thanks to the NEL BAME
Network

