

NHS Workforce Race Equality Standard (WRES) Report 1 April 2019 to 31 March 2020

1 Introduction

This is the 2019/2020 NHS Workforce Race Equality Standard (WRES) report for Livewell Southwest.

Since the organisation published its last WRES report, we have committed to re-energising our approach to our public sector equality duty (PSED) and have developed an Equality, Diversity and Inclusion (EDI) Strategy supported by a three-year action plan and established an EDI working group.

2 Background

The aim of the WRES is to help NHS organisations to ensure that employees from Black, Asian and Minority Ethnic (BME) backgrounds have equal access to career opportunities and receive fair treatment in the workplace.

The WRES was first made available to the NHS in April 2015, and has been included in the NHS Standard Contract since 2015/16. This means that the organisation must use the WRES, and report their findings to NHS England each year. NHS England then publishes a national report based on WRES information from across the country.

Livewell Southwest is required to:

- Give assurance to NHS England and our commissioners regarding the implementation of the WRES standards.
- Use the WRES data to help improve the workplace experiences and representation at all levels for our BME employees.

In practice this means that Livewell Southwest should:

- Collect data on its workforce by ethnicity, as well as, by protected characteristics on its ethnicity by ethnicity as well as other characteristics under the Equality Act 2010.
- Carry out data analysis.
- Produce and publish an annual report using the WRES.
- Produce and publish an annual report using the WRES reporting template together with a WRES action Plan.

3 Livewell Southwest's position against the WRES indicators in 2020

The current position against the nine WRES indicators is based on a snapshot of the organisation's workforce on 31 March 2020. This information will be submitted to the NHS England using the WRES reporting template by 31 January 2021.

3.1 WRES Indicator 1:

Number of staff in each of the AfC Bands 1-9 and VSM (including executive Board members) compared with the number of staff in the overall workforce.

CLINICAL	31.03.2020			31.03.19		
	White	BME	Not Reported	White	BME	Not Reported
Support	682	23	2	599	24	1
Middle	1324	56	22	1304	48	17
Senior	90	1	2	87	1	2
VSM	3	1	0	4	0	0
<i>Of which medical and dental</i>						
Consultants	15	8	2	14	8	2
Of which senior medical manager	0	0	0	0	0	0
Non consultant career grade	33	5	3	36	5	3
Trainee grades	12	3	1	11	3	0
Other	0	0	0	0	0	0

NON CLINICAL	31.03.2020			31.03.19		
	White	BME	Not Reported	White	BME	Not Reported
Support	510	8	7	519	8	8
Middle	95	3	1	98	2	0
Senior	25	1	1	27	1	2
VSM	8	0	0	7	0	0

The implications of the data and any additional background explanatory narrative

Further work is required to increase BME representation. Action taken and planned work includes linking this work the NHS Equality Delivery System 2 (EDS2) and the aims and objectives of the organisation.

Actions taken include continued engagement with diverse communities, continuing review of recruitment processes to ensure best practice and putting in place an EDI strategy which is supported by a three-year plan which focuses on being an inclusive employer. There are a proportion of 'Undisclosed' and 'Not stated' records which makes comparisons slightly less unreliable.

3.2 WRES Indicator 2:

During the period 1 April 2019 to 31 March 2020

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

	2019/20		2018/19	
	White	BME	White	BME
Number of shortlisted applicants	2692	204	2710	263
Number of appointed applicants	391	19	422	23
Ratio of shortlisting to appointment	0.15	0.09	0.16	0.09
Relative likelihood of BME staff being appointed from shortlisting compared to that of White staff being appointed from shortlisting across all posts	1.53		1.78	

White colleagues are 1.53 times more likely to be appointed from shortlisting which has dropped when comparing the figures from the previous year.

The implications of the data and any additional background explanatory narrative

A figure higher than 1.0 indicates that White candidates are more likely than BME candidates to be appointed from shortlisting. We will be able to compare this with next year's data.

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective

This links into the EDS2 Goal 3 - Recruitment and selection processes are fair, inclusive and transparent so that the workforce becomes as diverse as it can be within all occupations and grades.

We are utilising the Proud to Care website to advertise our posts and this portal is trying to appeal to all backgrounds and wishes to promote and encourage applicants from different backgrounds.

Through the organisation's Employability programme, we are working with all sections of the community to help enable upskilling through work experience, volunteering and paid work placement opportunities for BME groups who can sometimes find it more challenging, especially if language is a barrier.

Recruitment and selection processes are fair, inclusive and transparent so that the workforce becomes as diverse as it can be within all occupations and grades. We continuously review

what barriers there are to employment, review the recruitment processes to ensure best practice. We will conduct a detailed audit of the organisation’s recruitment data in relation to the Public Sector Equality Duty. When complete this will be shared with the Equality, Diversity & Inclusion (EDI) Working Group.

3.4 WRES Indicator 3:

Relative likelihood of BME staff entering the formal disciplinary process, compared to that of White staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation* Note: this indicator will be based on data from a two year rolling average of the current year and the previous year.

	2019/20		2018/19	
	White	BME	White	BME
Relative likelihood of BME staff entering the formal disciplinary process, compared to that of White staff entering the formal disciplinary process	14	0	26	1
	0		0.81	

The implications of the data and any additional background explanatory narrative

A figure lower than 1.0 indicates that BME employees are less likely to enter the formal disciplinary process than White employees. Overall we have improved the disciplinary process to ensure consistency and fairness. We recognise that on occasion employees will fall short of expectations of behaviour and will therefore enter formal disciplinary investigations.

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective

This links to EDS2 Goal 3. We have introduced a number of initiatives for further improvement which include:

- A new fact find form which is reviewed by a panel
- Line management guidance
- Mediation
- Facilitated discussion
- Toolkit sessions for managers
- Adopting a ‘Just Culture’ approach

3.5 WRES Indicator 4:

Relative likelihood of staff accessing non-mandatory training and Continuing Professional Development.

	2019/20		2018/19	
	White	BME	White	BME
Relative likelihood of staff accessing non-mandatory training and Continuing Professional Development.	283	9	246	16

3.6 WRES Indicator 5:

Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.

	2019/20		2018/19	
	White	BME	White	BME
Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public	14.13%	0.30%	18.07%	12%

The implications of the data and any additional background explanatory narrative

An Equality, Diversity and Inclusion Group has been established to review equalities data from the staff survey results. The numbers of BME employees reporting harassment, bullying or abuse from patients, relatives or the public has reduced considerably. We will continue to compare the results with next year's data.

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective

This links to EDS2 Goal 3. Livewell Southwest has a well-established and proactive approach to addressing violence and aggression towards our staff from members from members of the public and where proven, perpetrators are prosecuted. We will continue to promote this.

3.7 WRES Indicator 6:

Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.

	2019/20		2018/19	
	White	BME	White	BME
Percentage of staff experiencing harassment, bullying or abuse from staff	9.53%	0.13%	11.47%	0.12%

The implications of the data and any additional background explanatory narrative

An Equality, Diversity and Inclusion Group has been established to review equalities data from the staff survey results. The numbers of BME employees reporting harassment, bullying or abuse from staff although very low there is a slight rise compared to last years' data.

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective

This links to EDS2 Goal 3. Livewell Southwest operates a zero tolerance to bullying and harassment in the organisation and will continue to promote this. We have a number of policies and procedures in place to support employee. All employees attend equality and diversity training which includes respect and dignity in the workplace. The organisation has recently launched its values for the organisation which focuses on inclusion, respect and kindness.

3.8 WRES Indicator 7:

Percentage believing that trust provides equal opportunities for career progression or promotion.

	2019/20		2018/19	
	White	BME	White	BME
Percentage believing that trust provides equal opportunities for career progression or promotion	82.3%	1.4%	58.7%	1.3%

The implications of the data and any additional background explanatory narrative

An Equality, Diversity and Inclusion Group has been established to review equalities data from the staff survey results. The numbers of BME employees who do believe that the organisation provides equal opportunities for career progression continues to remain low compared to our white colleagues.

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective

This links to EDS2 Goal 3. The organisation continues to support equal access to career development for existing employees providing opportunity to move into higher banded clinical roles.

3.9 WRES Indicator 8:

In the last 12 months have you personally experienced discrimination at work from any of the following: Manager/team leader or other colleagues.

	2019/20		2018/19	
	White	BME	White	BME
In the last 12 months have you personally experienced discrimination at work	5.5%	0.06%	7.60%	0.12%

The implications of the data and any additional background explanatory narrative

An Equality, Diversity and Inclusion Group has been established to review equalities data from the staff survey results. The number of BME employees has in the last 12 months personally experienced discrimination at work remains low and has falling when comparing last years' data.

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective

This links to EDS2 Goal 3. The organisation operates zero tolerance regarding discrimination and will continue to promote this across the organisation. We have a number of policies and procedures in place to support employee. All employees attend equality and diversity training which includes respect and dignity in the workplace. The organisation has values for the organisation which focuses on inclusion, respect and kindness.

3.10 WRES Indicator 9:

Percentage difference between the organisations' Board voting membership and its overall workforce.

	2019/20		2018/19	
	White	BME	White	BME
Total Board members	10	1	11	0
Executive Board	5	1	6	0
Non-Executive Board	5	0	5	0
Percentage difference between the organisations' Board voting membership and its overall workforce	91.7%	8.3%	100%	0%

Although BME colleagues on Livewell Southwest's Board has grown by 1 colleague, Livewell will continue to explore opportunities for broadening its representation as and when vacancies occur and will continue to explore options for developing a talent pipeline for prospective board members.