



# Workforce Race Equality Standard 2016 – 2021

## Progress Report June 2017

*Part of our Trust Strategy to Promote and Improve Equality Diversity and Inclusion for Black Asian and Minority Ethnic Service Users and Staff*





## Contents

|  |    |
|--|----|
| Introduction   | 4  |
| Progress Summary   | 4  |
| Appendix 1 – Workforce Race Equality Standard Action Plan<br>Progress June 2017 - Targets and Action 2017/18 | 11 |
| Appendix 2 – Metric 1 Breakdown 2017 WRES  | 20 |
| Appendix 3 – WRES Targets Summary 2016 – 2021  | 22 |

## Introduction

The Workforce Race Equality Standard (WRES) is a national standard introduced in July 2015, the aim of the WRES is to respond to lack of progress in race equality in the NHS highlighted in reports such as Roger Kline's, "Snowy White Peaks" of the NHS. The WRES requires NHS organisations to report on and demonstrate progress against nine workforce metrics. The Standard has been included in the NHS Standard Contract since 15/16.

The WRES has nine metrics:

- Four metrics associated with workforce data.
- Four Staff Survey metrics reported by ethnicity
- One metric focused on Board diversity.

Targets were agreed by the Trust Board in July 2016 using 2016 WRES data as a starting point (see Appendix 3). Targets are intended to be achieved or maintained by 2021. This report provides a full year progress report covering the period July 2016 to June 2017. The data used in this report is the data collated annually for the 2017/18 WRES return.

The deadline for annual reporting of WRES data is the 1<sup>st</sup> of August 2017 at the time of writing this report (June 2017) all data was available apart for data relevant to accessing non mandatory training, this is because the survey that is now used to gather this data is still on-going at the time of this report. Progress on action is included in this report however.

## Progress Summary

Progress against Targets and related action plans are provided in Appendix 1. The following is a narrative highlighting progress against each WRES metric between July 2016 and June 2017.

**Metric One: Percentage of staff in each of the Agenda for Change Bands 1-9 (or equivalent) and VSM (including Executive Board members) compared with the percentage of staff in the overall workforce.**

There has also been some progress on target areas with an increase in the percentage of staff from BME groups in Bands 6 and a small increase in Bands 7 and 8a – 9.

The target of 10% not known for staff in Band 3 has been achieved.

The amount of change in staff numbers over the last year may have impacted on this however. A review of the target based on updated averages will be considered in the next financial year.

**Metric Two: Relative likelihood of staff being appointed from shortlisting across all posts.**

Problems associated with running recruitment reports from ESR were resolved. The 2017/18 WRES return shows a significant improvement from the 2016/17, indicating that BME applicants are slightly more likely to be appointed from shortlisting than white staff.

| 2017 | 2016 |
|------|------|
| 0.88 | 1.48 |

**Metric Three: Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation.**

At the time of the half year WRES report in January this year the relative likelihood of BAME staff entering the formal disciplinary process had increased since the 2016 WRES report from **1.85** to **2.27**. The latest data however indicates a reduction across the two year average required to be reported.

| 2017 | 2016 |
|------|------|
| 1.55 | 1.85 |

The reasons for this may be due to a number of factors including:

- Changes in the number of staff in the Trust
- A slight improvement in number of cases where ethnicity was not known 7 from 9
- General increased awareness following the WRES work being undertaken across the Trust

The main actions planned in this area are introduction of a new Problem Resolution Framework which has been delayed from March 2017, a pilot is about to start at time of writing this report.

**Metric Four: Relative likelihood of staff accessing non-mandatory training and CPD.**

Data for the 2016 report was based on an internal staff survey which has been repeated for the 2017 WRES report. Although data from this survey showed that BME staff were more likely to have access to non – mandatory training and CPD it should be noted that the number of staff completing the survey in 2017 was lower than in 2016 .

| 2017 | 2016 |
|------|------|
| 0.75 | 1.85 |

|   | 2016<br>WHITE<br>% | 2016<br>BME<br>% | 2017<br>WHITE<br>% | 2017<br>BME<br>% |
|---|--------------------|------------------|--------------------|------------------|
| Access to undergrad postgrad and other courses paid for by the organisation or self       | 90%                | 10%              | 83%                | 17%              |
| approached about a career development opportunity   | 91%                | 9%               | 75%                | 25%              |
| <i>Other Opportunities</i>  |                    |                  |                    |                  |
| Attended any conferences  | 85%                | 15%              | 74%                | 26%              |
| Attended a meeting on behalf of your line manager   | 89%                | 11%              | 78%                | 22%              |
| Attended a local event to represent the Trust or your service                             | 88%                | 12%              | 87%                | 13%              |
| Presented to a meeting or event as a development opportunity                              | 85%                | 15%              | 88%                | 13%              |
| Taken part in any Trust projects  | 88%                | 12%              | 83%                | 17%              |
| Undertaken a locally agreed project that was not part of your normal day to day work role | 87%                | 13%              | 75%                | 25%              |
| Acted up into a more senior position  | 79%                | 21%              | 93%                | 7%               |
| Been seconded to another department or organisation as a development opportunity          | 85%                | 15%              | 90%                | 10%              |

Good progress continues to be made in engaging staff from BAME groups in the trust so they are aware of opportunities for personal development.

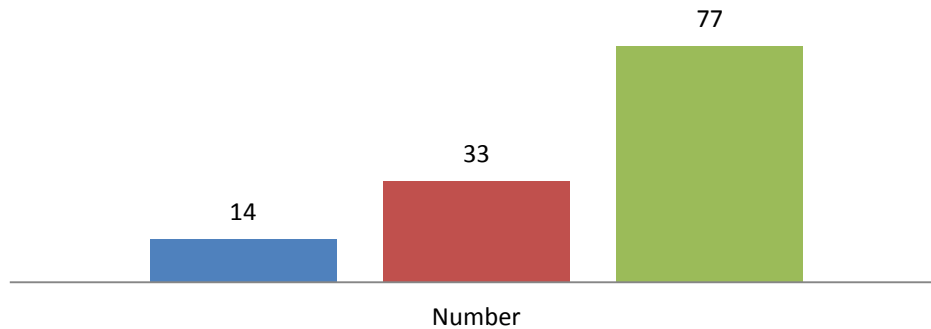
- A second cohort of mentors and mentees have started using the model developed through funding obtained by the Trust from Innov8.
- Opportunities to apply for specific leadership academy have been widely circulated – one member of staff was successful in obtaining a place on the highly competitive ‘Stepping Up’ programme for staff in band 5.6 or 7. Two members of staff also gained places on the resourceful and resilient leaders programme.
- A successful BAME staff engagement conference took place on the 12<sup>th</sup> of December, which is helping to define further work in this area.
- An additional action undertaken has been to include an additional optional section in the Trust NHS Staff Survey 2016 on *training, ability to become a leader, the vision of the organisation and fulfilling potential*, this section was added to the full staff survey which all staff had the opportunity to complete this year.
- A staff Development Workshop programme was piloted attended by 15 staff from BME groups which is now being rolled out to all staff as part of the trust leadership and development pathway development.

### **Staff Survey Metrics**

The NHS staff survey is completed annually the last one being completed in 2016. Due to timing of reports staff survey data reported in the national WRES report relates to data from the previous year i.e. for the 2016/17 report this would be 2015 staff survey data. The staff survey data in this report is for the 2016 staff survey and is the data that is included in the WRES 2017 return.

In 2016 SHSC surveyed all staff for the first time, prior to this only a sample were surveyed. This appears to have had a positive impact on the number of staff from BME groups completing the survey:

**BME Staff completing the Staff Survey 2014 to 2016**



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

|       | SHSC 2016 | Median Mental Health 2016 | SHSC 2015 | SHSC 2014 |
|-------|-----------|---------------------------|-----------|-----------|
| White | 36%       | 31%                       | 35%       | 29%       |
| BME   | 38%       | 38%                       | 27%       | 33%       |

In terms of progress this is the most concerning area of the Staff Survey WRES data. The chart indicates that is a problem for BME and White Staff and that this is a problem prevalent in mental health and Learning Disability trusts. The high percentage of staff experiencing harassment from patients is supported by Safeguard incident reporting which shows the same picture. Review of the action already taken and the effectiveness of this will be undertaken

**Metric Six: Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.**

|       | SHSC 2016 | Median Mental Health 2016 | SHSC 2015 | SHSC 2014 |
|-------|-----------|---------------------------|-----------|-----------|
| White | 19%       | 22%                       | 27%       | 18%       |
| BME   | 22%       | 26%                       | 15%       | 21%       |

The percentage of staff in white and BME groups experiencing discrimination from staff is less than the median for mental health trusts although the figure for BME groups in 2016 is higher than the 2015 percentage. Action in this area is on-going and

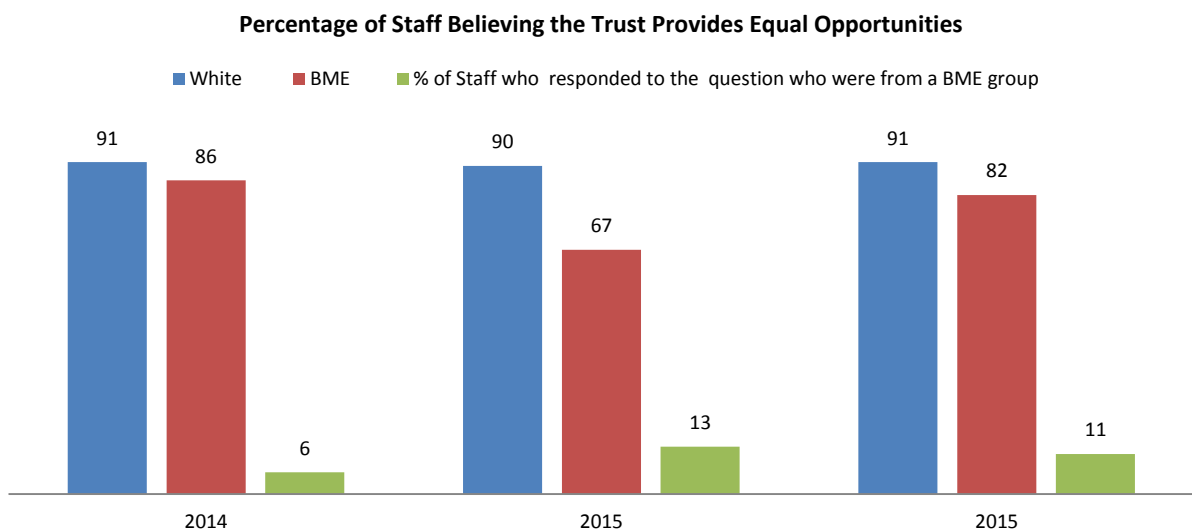


introduction of the problem resolution framework may assist in reducing the figure.

**Metric Seven: Percentage believing that trust provides equal opportunities for career progression or promotion.**

|       | SHSC 2016 | Median Mental Health 2016 | SHSC 2015 | SHSC 2014 |
|-------|-----------|---------------------------|-----------|-----------|
| White | 91%       | 89%                       | 90%       | 91%       |
| BME   | 82%       | 79%                       | 67%       | 86%       |

There has been a positive increase in the percentage of BME staff believing the trust provided equal opportunities. This is also above the median for mental health trusts. This is positive because the 2015 figure was of particular concern. Even though this is still a reduction on 2014 due to the increased number of BME staff completing the survey this is probably a more accurate picture than in 2014 when only 4% of respondents were from a BME group.



**METRIC EIGHT: In the last 12 months have you personally experienced discrimination at work from any of the following? b) Manager/team leader or other colleagues**

|       | SHSC 2016 | Median Mental Health 2016 | SHSC 2015 | SHSC 2014 |
|-------|-----------|---------------------------|-----------|-----------|
| White | 7%        | 7%                        | 7%        | 7%        |
| BME   | 7%        | 14%                       | 13%       | 4%        |

The trust has consistently scored relatively well on this metric and for BME staff the trust is below the median for other mental health Trusts.

**Metric Nine: Percentage difference between the organisations' Board voting membership and its overall workforce**

In 2017 there has been a change in this metric – trusts are now required to look at the percentage difference between the organisations' Board membership and its overall workforce disaggregated:

- By voting membership of the Board
- By executive membership of the Board

For SHSC

Percentage of the workforce, where ethnicity is known, from a BME group = 14%

Percentage voting Board members from a BME group = 10% - difference - 4%

Percentage of Executive Board members from a BME group = 20% - difference – 6%

Consideration has been given to using 'Positive Action' in the past in non-executive Board member recruitment and will continue to be considered.

**Workforce Race Equality Standard Action Plan Progress**

Appendix 1 contains the Trust WRES action plan with progress mapped as of June 2017. The action plan has also been updated to reflect planned action for 2017/18.

## Appendix 1 – Workforce Race Equality Standard Action Plan Progress June 2017 - Targets and Action 2017/18

**METRIC ONE: Percentage of staff in each of the Agenda for Change Bands 1-9 (or equivalent) and VSM (including Executive Board members) compared with the percentage of staff in the overall workforce**

| TRUST TARGET  | WRES METRIC  | WRES METRIC 2016   | Trust Target Position 2017 |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
|---|--|--|----------------------------|-----|---|-----|---|----|---|----|----------|----|-----------------------|-----|---|--|------|-----------|---|-----|---|-----|---|----|---|----|----------|----|-----------------------|-----|---|------|-----------|---|-------|---|------|---|------|---|------|----------|------|-----------------------|-------|
| <table border="1"> <thead> <tr> <th>Band</th> <th>Target</th> </tr> </thead> <tbody> <tr> <td>3</td> <td>14%</td> </tr> <tr> <td>4</td> <td>14%</td> </tr> <tr> <td>6</td> <td>9%</td> </tr> <tr> <td>7</td> <td>9%</td> </tr> <tr> <td>8 a-d &amp;9</td> <td>9%</td> </tr> <tr> <td>Band 3 %<br/>not known</td> <td>10%</td> </tr> </tbody> </table> | Band   | Target   | 3                          | 14% | 4 | 14% | 6 | 9% | 7 | 9% | 8 a-d &9 | 9% | Band 3 %<br>not known | 10% | <p>The WRES Metric changed between 2015 and 2016. From 2016 Metric One required reporting across all bands rather than just senior bands and a break down into clinical and non-clinical.</p> | <table border="1"> <thead> <tr> <th>Band</th> <th>June 2016</th> </tr> </thead> <tbody> <tr> <td>3</td> <td>13%</td> </tr> <tr> <td>4</td> <td>10%</td> </tr> <tr> <td>6</td> <td>6%</td> </tr> <tr> <td>7</td> <td>6%</td> </tr> <tr> <td>8 a-d &amp;9</td> <td>3%</td> </tr> <tr> <td>Band 3 %<br/>not known</td> <td>13%</td> </tr> </tbody> </table> | Band | June 2016 | 3 | 13% | 4 | 10% | 6 | 6% | 7 | 6% | 8 a-d &9 | 3% | Band 3 %<br>not known | 13% | <table border="1"> <thead> <tr> <th>Band</th> <th>June 2017</th> </tr> </thead> <tbody> <tr> <td>3</td> <td>14.3%</td> </tr> <tr> <td>4</td> <td>7.6%</td> </tr> <tr> <td>6</td> <td>8.1%</td> </tr> <tr> <td>7</td> <td>7.3%</td> </tr> <tr> <td>8 a-d &amp;9</td> <td>4.0%</td> </tr> <tr> <td>Band 3 %<br/>not known</td> <td>10.1%</td> </tr> </tbody> </table> | Band | June 2017 | 3 | 14.3% | 4 | 7.6% | 6 | 8.1% | 7 | 7.3% | 8 a-d &9 | 4.0% | Band 3 %<br>not known | 10.1% |
| Band  | Target   |  |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
| 3   | 14%  |  |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
| 4   | 14%  |  |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
| 6   | 9%   |  |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
| 7   | 9%   |  |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
| 8 a-d &9  | 9%   |  |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
| Band 3 %<br>not known   | 10%  |  |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
| Band  | June 2016  |  |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
| 3   | 13%  |  |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
| 4   | 10%  |  |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
| 6   | 6%   |  |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
| 7   | 6%   |  |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
| 8 a-d &9  | 3%   |  |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
| Band 3 %<br>not known   | 13%  |  |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
| Band  | June 2017  |  |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
| 3   | 14.3%  |  |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
| 4   | 7.6%   |  |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
| 6   | 8.1%   |  |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
| 7   | 7.3%   |  |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
| 8 a-d &9  | 4.0%   |  |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
| Band 3 %<br>not known   | 10.1%  |  |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
| Action 2015/16  | Progress 2016/17   | Action 2017/18   |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |
| Deliver the Innov8 Fund Project   | <ul style="list-style-type: none"> <li>Evaluation of the Innov8 project - completed</li> <li>Business case support a phase two of the Innov8 project drawing on the evaluation findings. Completed</li> <li>One place in the Bradford Care Trust Moving On course – evaluate relevance for Trust as good practice.-</li> <li>Completed Provide a quarterly report to the HR and Workforce Group on progress against targets. – reviewed reports now to WODC 6/12</li> <li>Publicised development opportunities for staff from BAME groups – <b>one member of staff successful in application to Stepping Up programme and two for the Resourceful and Resilient Leaders programme. Staff attended regional workshops.</b></li> </ul> | <p>The actions below are rolled over from 2016/17 due to being in progress or not yet started.</p> <ul style="list-style-type: none"> <li>BAME members of staff to be involved in recruitment of staff in bands 6 upwards. – To be picked up in full review of recruitment policy/procedure</li> <li>Develop support and training for managers and supervisors to focus on ensuring that effective appraisal and development support is offered.</li> <li>Review recruitment data by ethnicity for band 8a upwards posts at each recruitment.</li> <li>Undertake a more detailed review and analysis of medical staff development career pathways and identify specific action in response.</li> </ul> <p><b>New action</b></p> <ul style="list-style-type: none"> <li>Integration with development of the Trust Leadership and development pathway</li> <li>Implement second cohort of mentoring</li> <li>Develop the Build Modify Expand branding</li> </ul> |                            |     |   |     |   |    |   |    |          |    |                       |     |   |  |      |           |   |     |   |     |   |    |   |    |          |    |                       |     |   |      |           |   |       |   |      |   |      |   |      |          |      |                       |       |

**METRIC TWO - Relative likelihood of staff being appointed from shortlisting across all posts**

| TRUST TARGET   | WRES METRIC 2015   | WRES METRIC 2016   | Trust Target Position 2017   |
|--|--|--|--|
| Decrease the WRES score for Metric Two to:<br><br><b>1.00 or below</b>   | <b>1.03</b>  | <b>1.48</b>  | <b>2017 Position</b><br><div style="background-color: #92d050; padding: 5px; display: inline-block; margin: 5px auto;"> <b>0.88</b> </div> |
| Action 2015/16   | Progress 2016/17   | Action 2017/18   |  |
| <ul style="list-style-type: none"> <li><b>Review and update recruitment data by ethnicity (to respond to problems experienced with ESR reporting)</b></li> </ul> | <ol style="list-style-type: none"> <li>Action described for metric 1</li> <li>Integrate into the trust widening participation action plan – action on-going for example mentoring of UTC students and widening participation policy</li> </ol> | <p>The actions below are rolled over from 2016/17 due to being in progress or not yet started.</p> <ul style="list-style-type: none"> <li>Use positive action under Section 159 of the Equality Act 2010 for posts in band 6 upwards (Trust process and pro forma is available)</li> <li>Require recruiting managers to keep a more detailed account of reasons for lack of success at shortlisting and recruitment and offer candidates’ detailed feedback.</li> </ul> <p><b>New action</b></p> <p>No new action is proposed for 2017/18 actions for metric one also support metric</p> |  |

**METRIC THREE: Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation**

| TRUST TARGET   | WRES METRIC 2015   | WRES METRIC 2016  | Trust Target Position 2017   |
|--|--|---|--|
| <ul style="list-style-type: none"> <li>Decrease the WRES score for Metric Three to:<br/><b>1.00 or below</b></li> <li>Improve ethnicity recording for staff subject to disciplinary to <b>95%</b></li> </ul> | <p style="text-align: center;"><b>2.75</b></p> <p style="text-align: center;"><b>Ethnicity Recording 90%</b></p>   | <p style="text-align: center;"><b>1.85</b></p> <p style="text-align: center;"><b>Ethnicity Recording 89%</b></p>  | <p style="text-align: center;"><b>2017 Position</b></p> <div style="text-align: center; background-color: yellow; padding: 5px;"><b>1.55</b></div> <p style="text-align: center;"><b>Ethnicity Recording 91%</b></p> |
| Action 2015/16   | Progress 2016/17   | Action 2017/18  |  |
| <ul style="list-style-type: none"> <li><b>Establish a project group to review and identify action regarding the percentage of BME staff subject to disciplinary.</b></li> </ul>                              | <ul style="list-style-type: none"> <li>Problem Resolution Framework agreed</li> <li>Review of disciplinary processes started in partnership with HR</li> </ul> | <p>The actions below are rolled over from 2016/17 due to being in progress</p> <ul style="list-style-type: none"> <li>Implement the problem Resolution Framework</li> <li>Review Disciplinary data quarterly and look at how best to update ethnicity where this is not recorded.</li> <li>Complete review of disciplinary process and implement</li> </ul> |  |

**METRIC FOUR *Relative likelihood of staff accessing non-mandatory training and CPD***

| TRUST TARGET  | WRES METRIC 2015   | WRES METRIC 2016   | TRUST TARGET POSITION 2017  |
|---|--|--|---|
| <ul style="list-style-type: none"> <li>Decrease the WRES score for Metric Four to <b>1.00 or below</b></li> </ul>   | <p align="center"><b>2.34</b></p>  | <p align="center"><b>1.13</b></p>  | <p align="center"><b>2017 Position</b></p> <div style="background-color: #92d050; padding: 5px; display: inline-block;"> <p align="center"><b>0.75</b></p> </div> |
| Action 2015/16  | Progress 2016/17   | Action 2016/17   |   |
| <ul style="list-style-type: none"> <li><b>Review processes in place for obtaining funding and other opportunities to identify barriers</b></li> <li><b>Agree action to address</b></li> </ul> | <ul style="list-style-type: none"> <li>Undertake a survey of staff focused on access to learning and development opportunities – completed for 2016</li> <li>Review by ethnicity – completed</li> <li>Additional action - supplementary questions on learning and development added to 2016 staff survey.</li> </ul> | <p>The action below is rolled over from 2016/17 due to being in progress</p> <ul style="list-style-type: none"> <li>Develop a separate action plan and integrate into the Build Modify expand programme.</li> </ul> <p><b>New action</b></p> <ul style="list-style-type: none"> <li>Roll out staff development workshops piloted in 2016/17</li> </ul> |   |

**METRIC FIVE: Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months**

| TRUST TARGET  | WRES METRIC 2015<br>(2014 STAFF SURVEY)  | WRES METRIC 2016<br>(2015 STAFF SURVEY)   | TRUST TARGET POSITION 2017<br>(2016 STAFF SURVEY)   |
|---|--|---|---|
| <ul style="list-style-type: none"> <li>A year on year reduction from previous year</li> <li>BAME percentage is equal to or less than White percentage</li> <li>BAME percentage is less than median for mental health</li> </ul> | <p>White 29%<br/>BME 33%</p> <p>White 29%<br/>BME 33%</p> <p>Median Mental Health<br/>Not Reported in the<br/>2014/15 Survey</p> | <p>White 35%<br/>BME 27%</p> <p>White 35%<br/>BME 27%</p> <p>Median Mental Health in 2016 report<br/>White 32%<br/>BME 37%</p>  | <p>Reduction from previous year</p> <p>BAME % equal to or less than White %</p> <p>Median for Mental Health in 2017 report</p> <div style="background-color: red; color: white; padding: 5px;"> <p>White 36%<br/>BME 38%</p> <p>White 36%<br/>BME 38%</p> <p>White 31%<br/>BME 38%</p> </div> |
| Action 2015/16  | Progress 2016/17   | Action 2017/18  |   |
| <ul style="list-style-type: none"> <li>Continue to review incidents of racial harassment from third parties through trust safeguard report</li> </ul>   | <ul style="list-style-type: none"> <li>Updated the zero tolerance of third part harassment policy.</li> </ul>                    | <p>The actions below are rolled over from 2016/17 due to being in progress or not yet started.</p> <ul style="list-style-type: none"> <li>Review quarterly safeguard report at the strategy operational group and agree action based on any themes.</li> <li>Do more on implementation of the zero tolerance policy</li> </ul> <p><b>New action</b></p> <ul style="list-style-type: none"> <li>Integrate with general Trust action plan on bullying and harassment</li> <li>Review good practice in other mental health trusts</li> <li>Prioritise specific action following discussion with BME staff network group</li> </ul> |   |

**METRIC SIX: Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months**

| TRUST TARGET  | WRES METRIC 2015<br>(2014 STAFF SURVEY)   | WRES METRIC 2016<br>(2015 STAFF SURVEY)   | TRUST TARGET POSITION 2017<br>(2016 STAFF SURVEY)  |
|---|---|---|--|
| <ul style="list-style-type: none"> <li>A year on year reduction from previous year</li> <li>BAME percentage is equal to or less than White percentage</li> <li>BAME percentage is less than median for mental health</li> </ul> | <p><b>White 18%</b><br/><b>BME 21%</b></p> <p><b>White 18%</b><br/><b>BME 21%</b></p> <p><b>Median Mental Health Not Reported in the 2014/15 Survey</b></p>   | <p><b>White 27%</b><br/><b>BME 15%</b></p> <p><b>White 27%</b><br/><b>BME 15%</b></p> <p><b>White 21%</b><br/><b>BME 23%</b></p>  | <p><b>Reduction from previous year.</b></p> <p><b>BAME % equal to or less than White %</b></p> <p><b>Less than median for mental health trusts</b></p> <div style="display: flex; align-items: center;"> <div style="background-color: red; padding: 5px; margin-right: 5px;"> <p><b>White 19%</b><br/><b>BME 22%</b></p> </div> <div style="background-color: green; padding: 5px;"> <p><b>White 22%</b><br/><b>BME 26%</b></p> </div> </div> |
| Action 2015/16  | Progress 2016/17  | Action 2017/18  |  |
| <ul style="list-style-type: none"> <li>Supported and developed the role of the BME staff network group</li> <li>Extended membership</li> <li>Support of steering group to address barriers to attendance obtained</li> </ul>    | <ul style="list-style-type: none"> <li>Supported the BME staff network group to deliver a conference in 2016/17</li> <li>Supported the BME staff network to implement their communication plan</li> </ul> | <p>The action below is rolled over from 2016/17 due to being in progress</p> <ul style="list-style-type: none"> <li>Implement the problem resolution framework</li> </ul> <p>New action</p> <ul style="list-style-type: none"> <li>Integrate with general Trust action plan on bullying and harassment</li> </ul> |  |



**METRIC SEVEN: Percentage believing that trust provides equal opportunities for career progression or promotion**

| TRUST TARGET   | WRES METRIC 2015<br>(2014 STAFF SURVEY)   | WRES METRIC 2016<br>(2015 STAFF SURVEY)  | TRUST TARGET POSITION 2017<br>(2016 STAFF SURVEY)  |
|--|---|--|--|
| <ul style="list-style-type: none"> <li>A year on year increase from previous year</li> <li>BAME percentage is equal to or more than White percentage</li> <li>BAME percentage is more than median for mental health</li> </ul> | <p>White 91%<br/>BME 86%</p> <p>White 91%<br/>BME 86%</p> <p>Median Mental Health<br/>Not Reported in the<br/>2014/15 Survey</p>                          | <p>White 90%<br/>BME 67%</p> <p>White 90%<br/>BME 67%</p> <p>White 88%<br/>BME 75%</p>   | <p>Increase from previous year</p> <p>BAME % equal to or more than White %</p> <p>More than median for mental health trusts</p> <div style="display: flex; flex-direction: column; align-items: flex-end;"> <div style="background-color: #92d050; padding: 2px; margin-bottom: 2px;">White 91%<br/>BME 82%</div> <div style="background-color: #ff0000; padding: 2px; margin-bottom: 2px;">White 91%<br/>BME 82%</div> <div style="background-color: #92d050; padding: 2px;">White 89%<br/>BME 79%</div> </div> |
| Action 2015/16   | Progress 2016/17  | Action 2017/18   |  |
| <ul style="list-style-type: none"> <li>As above support development of the BME staff Network group</li> </ul>  | <ul style="list-style-type: none"> <li>Completed the learning and development survey</li> <li>Undertook the BME staff network group conference</li> </ul> | <p>The actions below are rolled over from 2016/17 due to being in progress or not yet started.</p> <ul style="list-style-type: none"> <li>Review Qualitative and quantitative data</li> <li>Agree an action plan with the BME staff network group</li> </ul> <p>New Action</p> <ul style="list-style-type: none"> <li>Integrate with development of the trust management and leadership development pathway</li> <li>Staff conference 2017</li> <li>Mainstream with trust coaching and mentoring programme</li> <li>Build Modify expand lead to work with middle managers to raise profiles and encourage support of BME staff locally.</li> </ul> |  |

**METRIC EIGHT: In the last 12 months have you personally experienced discrimination at work from any of the following? b) Manager/team leader or other colleagues**

| TRUST TARGET  | WRES METRIC 2015<br>(2014 STAFF SURVEY)   | WRES METRIC 2016<br>(2015 STAFF SURVEY)  | TRUST TARGET POSITION 2017<br>(2016 STAFF SURVEY)  |
|---|---|--|--|
| <ul style="list-style-type: none"> <li>A year on year reduction from previous year</li> <li>BAME percentage is equal to or less than White percentage</li> <li>BAME percentage is less than median for mental health</li> </ul>                                       | <p>White 7%<br/>BME 4%</p> <p>White 7%<br/>BME 4%</p> <p>Median Mental Health<br/>Not Reported in the<br/>2014/15 Survey</p>  | <p>White 7%<br/>BME 13%</p> <p>White 7%<br/>BME 13%</p> <p>White 7%<br/>BME 13%</p>  | <p>Reduction from previous year</p> <p>BAME % equal to or less than White %</p> <p>Less than median for mental health trusts</p> <div style="background-color: #92d050; padding: 5px;"> <p>White 7%<br/>BME 7%</p> <p>White 7%<br/>BME 7%</p> <p>White 7%<br/>BME 14%</p> </div> |
| Action 2015/16  | Progress 2016/17  | Action 2017/18   |  |
| <ul style="list-style-type: none"> <li>Establish and implement a cross organisational communication plan to promote the Trust strategy to Promote and Improve Equality Diversity and Inclusion for Black Asian and Minority Ethnic Service Users and Staff</li> </ul> | <ul style="list-style-type: none"> <li>Outline plan agreed with the chair of the BME staff network group.</li> <li>Communication contact list established and communications started</li> <li>Supported the BME staff network group to plan for a Trust conference.</li> <li>Continued to develop network of BME staff involved in the BME staff network.</li> <li>Supported the SNG to undertake a staff survey updating from the survey undertaken in 2011</li> </ul> | <p>The action below is rolled over from 2016/17 due to being in progress</p> <ul style="list-style-type: none"> <li>Develop a shorter Race Equality Cultural Capability (RECC) course</li> </ul> <p><b>New Action</b></p> <ul style="list-style-type: none"> <li>Implement a plan to deliver the full RECC course in house.</li> </ul> |  |

**Metric Nine: Percentage difference between the organisations' Board voting membership and its overall workforce**

*Please note this metric has been changed nationally in 2017*

| TRUST TARGET  | WRES METRIC 2015   | WRES METRIC 2016   | TRUST TARGET POSITION 2017   |
|---|--|--|--|
| <p><b>2016 - 13%</b><br/> <b>Revised to 14% (2017)</b></p>  | <p><b>10%</b><br/> <b>-3% difference</b></p>   | <p><b>10%</b><br/> <b>-3% difference</b></p>   | <p>Comparison of percentage difference against trust percentage this year takes account of not known.<br/> <b>White + 10.6% against Trust white %</b><br/> <b>BME - 3.4% against Trust BME %</b><br/> <b>(as per Unify 2 Report calculation)</b></p> |
| <p><b>Action 2015/16</b></p>  | <p><b>Progress 2016/17</b></p>   | <p><b>Action 2017/18</b></p>   |  |
| <ul style="list-style-type: none"> <li>Consider the use of 'positive action' in recruitment of Board members</li> </ul> | <ul style="list-style-type: none"> <li>Agreed that positive action would be used in recruitment</li> <li>Positive action pro forma developed and used</li> </ul> | <ul style="list-style-type: none"> <li>Continue to consider use of positive action in Board Recruitment</li> </ul> |  |

## Appendix 2 – Metric 1 Breakdown 2017 WRES Report

### Clinical – Compares BME staff Clinical to total staff in group

| CLINICAL  | Band 1        | Band 2      | Band 3      | Band 4       | Band 5      | Band 6       | Band 7       |
|---|---------------|-------------|-------------|--------------|-------------|--------------|--------------|
| Number of BME Staff Band                              | 0             | 113         | 75          | 15           | 59          | 28           | 15           |
| Total number of Staff Band                            |               | 548         | 526         | 117          | 365         | 394          | 199          |
| <b>Percentage BME Staff Band</b>                      | 0.0%          | 20.6%       | 14.3%       | 12.8%        | 16.2%       | 7.1%         | 7.5%         |
| Number BME Staff in workforce (Clinical)              | 316           | 316         | 316         | 316          | 316         | 316          | 316          |
| Total number of Staff in workforce (Clinical)         | 2296          | 2296        | 2296        | 2296         | 2296        | 2296         | 2296         |
| <b>Percentage BME Staff in the Clinical workforce</b> | 13.76%        | 13.76%      | 13.76%      | 13.76%       | 13.76%      | 13.76%       | 13.76%       |
| <b>Difference</b>                                     | <b>-13.8%</b> | <b>6.9%</b> | <b>0.5%</b> | <b>-0.9%</b> | <b>2.4%</b> | <b>-6.7%</b> | <b>-6.2%</b> |

| CLINICAL  | Band 8a       | Band 8b        | Band 8c       | Band 8d        | Band 9         |
|---|---------------|----------------|---------------|----------------|----------------|
| Number of BME Staff Band                              | 5             | 0              |               | 0              | 0              |
| Total number of Staff Band                            | 73            | 22             | 13            | 13             |                |
| <b>Percentage BME Staff Band</b>                      | 6.85%         | 0.00%          | 7.69%         | 0.00%          | 0.00%          |
| Number BME Staff in workforce (Clinical)              | 316           | 316            | 316           | 316            | 316            |
| Total number of Staff in workforce (Clinical)         | 2296          | 2296           | 2296          | 2296           | 2296           |
| <b>Percentage BME Staff in the Clinical workforce</b> | 13.76%        | 13.76%         | 13.76%        | 13.76%         | 13.76%         |
| <b>Difference</b>                                     | <b>-6.91%</b> | <b>-13.76%</b> | <b>-6.07%</b> | <b>-13.76%</b> | <b>-13.76%</b> |

| Students |
|----------|
|          |
| 6        |
| 33.33%   |

#### Notes:

- Numbers are obscured where one figure is less than 5
- A minus figure indicates there are proportionately more white staff in this Band / group a positive figure that there are less
- Not Known clinical = **7.9%**

**Non – Clinical - Compares BME staff Non- Clinical to total staff in group**

| NON CLINICAL  | Band 1 | Band 2 | Band 3 | Band 4 | Band 5 | Band 6 | Band 7 |
|---|--------|--------|--------|--------|--------|--------|--------|
| Number of BME Staff Band                                |        | 6      | 9      |        | 8      | 5      |        |
| Total number of Staff Band                              | 9      | 30     | 129    | 128    | 81     | 45     | 44     |
| <b>Percentage BME Staff Band</b>                        | 11.11% | 20.00% | 6.98%  | 2.34%  | 9.88%  | 11.11% | 4.55%  |
| Number BME Staff in workforce (Non- Clinical)           | 39     | 39     | 39     | 39     | 39     | 39     | 39     |
| Total number of Staff in workforce (Non-clinical)       | 545    | 545    | 545    | 545    | 545    | 545    | 545    |
| <b>Percentage BME Staff in non - clinical workforce</b> | 7.16%  | 7.16%  | 7.16%  | 7.16%  | 7.16%  | 7.16%  | 7.16%  |
| <b>Difference</b>                                       | 3.96%  | 12.84% | -0.18% | -4.81% | 2.72%  | 3.96%  | -2.61% |

| NON CLINICAL  | Band 8a | Band 8b | Band 8c | Band 8d | Band 9 |
|---|---------|---------|---------|---------|--------|
| Number of BME Staff Band                                |         | 0       | 0       | 0       | 0      |
| Total number of Staff Band                              | 32      | 15      | 7       | 7       |        |
| <b>Percentage BME Staff Band</b>                        | 3.13%   | 0.00%   | 0.00%   | 0.00%   | 0.00%  |
| Number BME Staff in workforce (Non- Clinical)           | 39      | 39      | 39      | 39      | 39     |
| Total number of Staff in workforce (Non-clinical)       | 545     | 545     | 545     | 545     | 545    |
| <b>Percentage BME Staff in non - clinical workforce</b> | 7.16%   | 7.16%   | 7.16%   | 7.16%   | 7.16%  |
| <b>Difference</b>                                       | -4.03%  | -7.16%  | -7.16%  | -7.16%  | -7.16% |

**Notes:**

- Numbers are obscured where one figure is less than 5
- A minus figure indicates there are proportionately more white staff in this Band / group a positive figure that there are less
- Not Known non - clinical = **2.9% (2016 4%)**

## Medical and Dental; Very Senior Managers; Apprentices – Percentage

| <b>Medical and Dental</b>                |        |
|--|--------|
| Number of BME Staff Medical and Dental   | 50     |
| Total number of Staff Medical and Dental | 169    |
| <b>Percentage BME Staff Band</b>         | 29.59% |

| <b>Very Senior Managers</b>                  |                    |                |
|--|--------------------|----------------|
|  | VSM - non clinical | VSM - clinical |
| Number of BME VSM                            |                    | 0              |
| Total number of VSM Non - Clinical /Clinical |                    |                |
| <b>Percentage BME Staff Band</b>             | 25.00%             | 0.00%          |

| <b>Apprentices</b>                                   |                      |                        |
|--|----------------------|------------------------|
|  | Apprentices clinical | Apprentices - Clinical |
| Number of BME Apprentices                            |                      |                        |
| Total number of Apprentices Non - Clinical /Clinical | 13                   | 17                     |
| <b>Percentage BME Staff Band</b>                     | 23.08%               | 17.65%                 |

### Notes:

- Numbers are obscured where one figure is less than 5
- A minus figure indicates there are proportionately more white staff in this Band / group a positive figure that there are less

## Appendix 3 – WRES Targets Summary 2016 – 2021

### Metric One

- Increase the numbers of staff from BAME groups in Bands 3 and 4 to 14%
- Increase the number of staff from BAME groups in Bands 6 and 7 and 8a,b,c,d to 9%
- Improve ethnicity recording for staff in Band 3 to 5% not known

### Metric Two

- Decrease the WRES score for Metric Two to 1.00 or below

### Metric Three

- Decrease the WRES score for Metric Three to 1.00 or below
- Improve ethnicity recording for staff subject to disciplinary to 95%

### Metric Four

- Decrease the WRES score for Metric Four to 1.00 or below

### Metric Five

- A year on year reduction from previous year
- BAME percentage is equal to or less than White percentage
- BAME percentage is less than median for mental health

### Metric Six

- A year on year reduction from previous year
- BAME percentage is equal to or less than White percentage
- BAME percentage is less than median for mental health

### Metric Seven

- A year on year increase from previous year
- BAME percentage is equal to or more than White percentage
- BAME percentage is more than median for mental health

### Metric Eight

- A year on year reduction from previous year
- BAME percentage is equal to or less than White percentage
- BAME percentage is less than median for mental health

### Metric Nine

- Board BAME voting membership 13% (to be revised year on year)