Response ID ANON-R89M-8J77-Z

Submitted to Workforce Race Equality Standard (WRES) reporting template Submitted on 2018-08-08 14:01:26

Introduction

1 Name of organisation

Name of organisation:

Great Western Hospitals NHS Foundation Trust

2 Date of report

Month/Year:

March 2018

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

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

Nerissa Vaughan, Chief Executive Officer

4 Name and contact details of lead manager compiling this report

Name and contact details of lead manager compiling this report:

Carole Nicholl
Director of Governance and Assurance
carole.nicholl2@nhs.net
01793 605426

5 Names of commissioners this report has been sent to

Complete as applicable::

Ms Lynette Glass Swindon CCG The Pierre Simonet Building North Latham Road Blunsdon St Andrew Swindon SN25 4DL

Workforce Race Equality Standard reporting template

6 Name and contact details of co-ordinating commissioner this report has been sent to

Complete as applicable.:

Ms Lynette Glass Swindon CCG The Pierre Simonet Building North Latham Road Blunsdon St Andrew Swindon SN25 4DL

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

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

https://www.gwh.nhs.uk/about-us/equality-and-diversity/workforce-race-equality-standard/

8 This report has been signed off by on behalf of the board on

Name::

Nerissa Vaughan, Chief Executive Officer

Date::

02/08/2018

Background narrative

9 Any issues of completeness of data

Any issues of completeness of data:

None

10 Any matters relating to reliability of comparisons with previous years

Any matters relating to reliability of comparisons with previous years:

None

Self reporting

11 Total number of staff employed within this organisation at the date of the report:

Total nuber of staff employed within this organisation at the date of the report:

5667

12 Proportion of BME staff employed within this organisation at the date of the report?

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

10.01%

13 The proportion of total staff who have self reporting their ethnicity?

The proportion of total staff who have self-reported their ethnicity:

90.42%

14 Have any steps been taken in the last reporting period to improve the level of self reporting by ethnicity?

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

The reporting of the ethnicity of the Trust Board has been improved and no longer has any unknown/null.

15 Are any steps planned during the current reporting period to improve the level of self reporting by ethnicity?

Are any steps planned during the current reporting period to improve the level of self reporting by ethnicity:

WRES Action Plan 2018/19.

Options and proposals to be considered when planning ESR self service

Work to analyse data re BME career progression and include in the workforce report

Workforce data

16 What period does the organisation's workforce data refer to?

What period does the organisation's workforce data refer to?:

April 17 - March 18

Workforce Race Equality Indicators

17 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.

Data for reporting year:

Non-Clinical

Under Band 1: White = 0.37%, BME = 0.02%

Band 1: White = 1.62%, BME = 0.12%

Band 2: White = 5.96%, BME = 0.32%

Band 3: White = 5.95%, BME = 0.14%

Band 4: White = 2.26%, BME = 0.04%

Band 5: White = 1.46%, BME = 0.09%

Band 6: White = 1.15%, BME = 0.16%

Band 7: White = 0.71%, BME = 0.05%

Band 8A: White = 0.81%, BME = 0.00%

Band 8B: White = 0.30%, BME =0.00%

Band 8C: White = 0.25%, BME =0.00%

Band 8D: White = 0.12%, BME = 0.00%

Band 9: White = 0.07%, BME = 0.02%

VSM: White = 0.14%, BME = 0.00%

Clinical

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Under Band 1: White = 0.28%, BME = 0.04%
Band 1: White = 0.11%, BME = 0.02%
Band 2: White = 8.17%, BME = 1.62%
Band 3: White = 6.07\%, BME = 0.42\%
Band 4: White = 2.77%, BME = 0.19%
Band 5: White = 13.09%, BME = 2.61%
Band 6: White = 14.52%, BME =1.64%
Band 7: White = 6.35%, BME = 0.25%
Band 8A: White = 1.41%, BME = 0.05%
Band 8B: White = 0.32%, BME = 0.02%
Band 8C: White = 0.12%, BME = 0.02%
Band 8D: White = 0.07%, BME = 0.00%
Band 9: White = 0.00%, BME = 0.00%
VSM: White = 0.02\%, BME = 0.00\%
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Data for previous year:

Non-Clinical

Under Band 1: White = 0.25%, BME = 0.00% Band 1: White = 1.71%, BME = 0.16% Band 2: White = 6.09%, BME = 0.35% Band 3: White = 6.57%, BME = 0.17% Band 4: White = 2.31%, BME = 0.00% Band 5: White = 1.76%, BME = 0.14% Band 6: White = 1.09%, BME = 0.12% Band 7: White = 0.85%, BME = 0.06% Band 8A: White = 0.70%, BME = 0.00% Band 8B: White = 0.23%, BME = 0.00% Band 8C: White = 0.25%, BME = 0.00% Band 8D: White = 0.14%, BME = 0.00% Band 9: White = 0.10%, BME = 0.00% VSM: White = 0.12%, BME = 0.00%

Under Band 1: White = 0.14%, BME = 0.06% Band 1: White = 0.14%, BME = 0.02% Band 2: White = 8.80%, BME = 1.49% Band 3: White = 6.07%, BME = 0.52% Band 4: White = 2.03%, BME = 0.19% Band 5: White = 14.61%, BME = 2.77% Band 6: White = 14.24%, BME = 1.59% Band 7: White = 5.79%, BME = 0.10% Band 8A: White = 0.99%, BME = 0.08% Band 8B: White = 0.37%, BME = 0.00% Band 8C: White = 0.10%, BME = 0.02% Band 8D: White = 0.08%, BME = 0.00% Band 9: White = 0.00%, BME = 0.00% VSM: White = 0.00%, BME = 0.00%

The implications of the data and any additional background explanatory narrative:

For non-clinical staff there has been a decrease or stay the same in all bands for BME, with an increase in under band 1 and bands 4, 5 and 9. For clinical staff there has been an decrease or stay the same in all bands for BME with an increase in bands 2, 6, 7 and 8b.

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

In the last reporting year there had been no improvement in bands 8 and higher of BME employees. In this reporting year there has been an increase in band 8b and 9 of BME employees.

18 Relative likelihood of staff being appointed from shortlisting across all posts.

Data for reporting year:

1.32

Data for previous year:

The implications of the data and any additional background explanatory narrative:

1.67 white employees appointed from shortlisting in comparison to 1 BME employee for the previous reporting year. This reporting year there has been an improvement with 1 BME employee appointed from shortlisting for every 1.32 white employees.

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

indicator will be based on data from a two year rolling average of the current year and the previous year.
Data for reporting year: 0.80
Data for previous year: 0.60
The implications of the data and any additional background explanatory narrative: For the previous reporting year 0.60 employees entered the formal disciplinary process in comparison to 1 white employee showing a disparity to white employees. This year 0.08 BME employees are entering the formal disciplinary process in comparison to 1 white employee.
Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective: WRES Action Plan 2017/18
E&D has been included in the Trust's training course, 100 days to management to ensure managers feel confident managing BME and white employees equally.
20 Relative likelihood of staff accessing non-mandatory training and CPD.
Data for reporting year: 0.96
Data for previous year: 1.11
The implications of the data and any additional background explanatory narrative: In the previous reporting year, for every 1.11 white employee, 1 BME employee accessed non mandatory training and CPD. This has changed to every 0.96 white employee, 1 BME employee has accessed non mandatory training and CPD in this reporting year.
Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective: WRES Action Plan 2018/19 Academy to ensure BME staff are booked on all leadership and development courses
Workforce Race Equality Indicators
21 KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.
White: 31.89%
BME: 32.28%
White: 31.65%
BME: 26.42%
The implications of the data and any additional background explanatory narrative: The Trust has seen an increase for all staff receiving harassment, bullying or abuse from patients, relatives or the public in the last 12 months.
Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective: For the Never OK campaign in 2016 to be reviewed and updated and re-launched
The Trust continues to encourage staff to report all incidents.
The Trust has a Minimising Violence and Aggression in the Workforce Policy in place.
23 KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion.
White: 86.17%
BME: 76.47%
White: 89.18%

82.86%
The implications of the data and any additional background explanatory narrative: The percentages have decreased for all staff and the gap has widened from 6.32% to 9.7% in this reporting year. All promotions and posts are subject to a standard recruitment and retention process.
Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective: WRES Action Plan 2018/19
Academy to ensure BME staff are booked on all leadership and development courses
If there is an opportunity to recruit to a board position (Executive or Non Executive Director) that recruitment process is reviewed to increase BME applications (best person for role will be appointed).
24 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: 5.83%
BME: 11.35%
White: 6.21%
BME: 9.26%
The implications of the data and any additional background explanatory narrative: The gap between white and BME employees has increased in this reporting year and increased for BME employees.
The Trust has "Freedom to Speak Up" guardians.
The Trust has a Bullying and Harassment Policy and an Equality and Diversity Policy in place.
Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective: WRES Action Plan 2018/19
HR to advertise for a willing member of staff to lead a BME Committee
BME Committee to be formed, (with membership from partner organisations e.g. SCCG to be invited) led by a member of staff who will attend the E&D Group. (Feedback from Birmingham and other Trusts that committee is only successful if run by BME staff not Corporate or HR)
BME Committee chair to discuss and agree with the E&D Group on support is required
Trust Equality and Diversity Training to be reviewed and updated
22 KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.
White: 24.36%
BME: 30.53%
White: 21.32%
BME: 20.75%
The implications of the data and any additional background explanatory narrative: The Trust has seen an increase for all staff receiving barassment, bullying or abuse from staff in the past 12 months with a significant increase for RME staff.

HR to advertise for a willing member of staff to lead a BME Committee

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

(9.78% increase).

WRES Action Plan for 2018/19

BME:

BME Committee to be formed, (with membership from partner organisations e.g. SCCG to be invited) led by a member of staff who will attend the E&D Group. (Feedback from Birmingham and other Trusts that committee is only successful if run by BME staff not Corporate or HR)

BME Committee chair to discuss and agree with the E&D Group on support is required

BME Committee to set up a network programme of work to engage and consult with local communities

Workforce Race Equality Indicators

25 Percentage difference between the organisations' Board voting membership and its overall workforce.	
White:	
19.6%	
BME:	
-10%	
White:	
-15.2%	

The implications of the data and any additional background explanatory narrative:

Ethnicity of all Board members is now reported.

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

WRES Action Plan 2018/19

BME:

If there is an opportunity to recruit to a board position (Executive or Non-Executive Director) that recruitment process is reviewed to increase BME applications (best person for role will be appointed).

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

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

27 Organisations should produce a detailed WRES action plan, agreed by its board. It is good practice for this action plan to be published on the organisation's website, alongside their WRES data. Such a plan would elaborate on the actions summarised in this report, setting out the next steps with milestones for expected progress against the WRES indicators. It may also identify the links with other workstreams agreed at board level, such as EDS2. You are asked to provide a link to your WRES action plan in the space below.

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.:

https://www.gwh.nhs.uk/about-us/equality-and-diversity/workforce-race-equality-standard/linear