Workforce Race Equality Standard (WRES) reporting template Submitted on 2017-07-24 10:12:29

- 1 Name of organisation East Kent Hospitals University NHS Foundation Trust
- 2 Date of report July 2017
- 3 Name and title of Board lead for the Workforce Race Equality Standard Sandra Le Blanc, Director Human Resources
- 4 Name and contact details of lead manager compiling this report Bruce Campion-Smith, Head of Diversity and Inclusion, bruce.campion-smith@nhs.net 01227 864077, 07826890938
- 5 Names of commissioners this report has been sent to

Ashford CCG, Canterbury and Coastal CCG, Dartford, Gravesham And Swanley CCG, NHS Medway CCG, West Kent CCG, South Kent Coast CCG, Thanet CCG, SWA

6 Name and contact details of co-ordinating commissioner this report has been sent to Co-ordinating Commissioner for the East Kent CCG Contract: Simon Perks,

Accountable Officer NHS Canterbury and Coastal Clinical Commissioning Group

- 7 Unique URL link on which this report and associated Action Plan will be found http://www.ekhuft.nhs.uk/patients-and-visitors/about-us/boards-andcommittees/diversity-and-inclusion/
- 8 This report has been signed off by on behalf of the board on Sandra Le Blanc, Director of Human Resources Date:: 31 July 2017

- **9** Any issues of completeness of data 86.84% of our staff have declared their ethnicity compared with 87.95% last year.
- **10** Any matters relating to reliability of comparisons with previous years None
- 11 Total number of staff employed within this organisation at the date of the report:

7904

- 12 Proportion of BME staff employed within this organisation at the date of the report? 14.31%
- **13** The proportion of total staff who have self-reported their ethnicity? 86.84%
- 14 Have any steps been taken in the last reporting period to improve the level of self-reporting by ethnicity? The development of our new people portal provides easier access to the Electronic Staff Record Self Service Feature. Staff are able to access and submit Protected Characteristic Data.
- 15 Are any steps planned during the current reporting period to improve the level of self-reporting by ethnicity? Working with the new Black Asian and Minority Ethnic (BAME) Staff Network, we plan to encourage greater levels of recording
- 16 What period does the organisation's workforce data refer to? 01/04/15 31/03/16

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 nonclinical and for clinical staff.

Band	Non Clinical Clinical		
Apprentice	0.00%	11.11%	
Band 1	38.64%	0.00%	
Band 2	3.61%	11.93%	
Band 3	2.53%	5.48%	
Band 4	2.66%	8.91%	
Band 5	4.42%	18.88%	
Band 6	2.52%	11.91%	
Band 7	1.27%	8.75%	
Band 8A	10.00%	2.56%	
Band 8B	4.55%	3.45%	
Band 8C	12.50%	0.00%	
Band 8D	0.00%	0.00%	
Band	90.00%	0.00%	
Exec	25.00%	0.00%	
VSM	11.11%	0.00%	
Medical Staff	0.00%	45.00%	
Total	4.26%	17.70%	
Trust	14.31%	14.31%	

### 17.1 Data for reporting year:

### 17.2 Data for previous year:

Band	Non Clinical	Clinical
Apprentice	0.00%	0.00%
Band 1	39.13%	0.00%
Band 2	3.46%	9.26%
Band 3	3.21%	5.14%
Band 4	2.57%	8.99%
Band 5	4.55%	19.29%
Band 6	3.85%	10.49%
Band 7	1.28%	8.67%
Band 8A	7.27%	1.59%
Band 8B	5.26%	3.33%
Band 8C	5.26%	0.00%
Band 8D	0.00%	0.00%
Band 9	0.00%	0.00%
Medical Staff	0.00%	49.08%
Total	4.23%	17.62%
Trust	14.23%	14.23%

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

There are 288 members of staff in bands 8A to 9. Fifteen (5%) of whom are BAME. 14.3% of all staff are BAME. 41.4% of Band 1 staff are BAME

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

This area will be addressed by actions taken to reduce disproportionalities in recruiting, promotion, access to training and reduction in discrimination.

This indicator links to EDS2 Outcomes 3.1, 3.3, 3.5 and 3.6

This indicator also links to Corporate Equality Objective 3. Reduce discrimination experienced by Disabled and BME staff and applicants and Increase the percentage of BME staff in senior positions

### 18 1Relative likelihood of staff being appointed from shortlisting across all posts.

### 18.1 Data for reporting year:

1.17

18.2 Data for previous year:

1.54

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

This indicator shows significant improvement since last year.

Factors impacting on this indicator during the last year include:

- 1. Recruiting Managers training was enhanced to include bias/prejudice.
- 2. Bias/prejudice training was made available to all staff and managers

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

An in-depth exploration into recruitment data will identify performance against this indicator across the trust. Targeted actions will address those areas where changes will have the greatest impact.

This indicator is linked to EDS2 Outcome 3.1 Fair NHS recruitment and selection processes lead to a more representative workforce at all levels.

This indicator is linked to corporate Equality Objective 3. Reduce discrimination experienced by Disabled and BME staff and applicants and Increase the percentage of BME staff in senior positions.

- 19 Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation. This indicator will be based on data from a two year rolling average of the current year and the previous year.
- **19.1 Data for reporting year:** 0.35
- **19.2 Data for previous year:** 0.56
- 19.3 The implications of the data and any additional background explanatory narrative:

A figure below "1" would indicate that BME staff members are less likely than white staff to enter the formal disciplinary process.

This indicator was not identified requiring any remedial actions.

- **19.4 Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:** No Actions are planned with regard to this indicator.
- 20 Relative likelihood of staff accessing non-mandatory training and CPD.
- **20.1 Data for reporting year:** 1.21
- **20.2 Data for previous year:** 1.25
- 20.3 The implications of the data and any additional background explanatory narrative:

There has been a small improvement over the last year.

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

An in-depth exploration into non-mandatory training data will identify performance against this indicator across the trust. Targeted actions will address those areas where changes will have the greatest impact.

This indicator is linked to EDS2 Outcome 3.3 Training and development opportunities are taken up and positively evaluated by all staff.

This indicator is linked to corporate Equality Objective 3. Reduce discrimination experienced by Disabled and BME staff and applicants and Increase the percentage of BME staff in senior positions.

21 KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.

	2017	2016
White	32.68%	32.19%
BME	30.89%	31.77%

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

There has been some improvement during the last year.

This indicator is addressed by our Great Place to Work Programme for both white and BAME staff. This indicator was not identified as requiring action under a separate WRES action plan.

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

Our great place to work programme continues and this indicator was not identified as requiring action under a separate WRES action plan for 2017.

This indicator links to:

Outcome 3.4 When at work, staff are free from abuse, harassment, bullying and violence from any source.

Corporate Equality Objectives.

1. To support the development of leadership at all levels in a way that values and promotes equality, diversity and inclusion.

- 22 3. Reduce discrimination experienced by Disabled and BME staff and applicants and Increase the percentage of BME staff in senior positions.
- 23 KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.

	2017	2016
White	35.94%	42.22%
BME	34.59%	39.43%

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

There has been some improvement during the last year.

This indicator is addressed by our Great Place to Work Programme for both white and BAME staff. This indicator was not identified as requiring action under a separate WRES action plan.

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

EDS Outcome 3.4 When at work, staff are free from abuse, harassment, bullying and violence from any source.

Corporate Equality Objectives.

1. To support the development of leadership at all levels in a way that values and promotes equality, diversity and inclusion.

3. Reduce discrimination experienced by Disabled and BME staff and applicants and Increase the percentage of BME staff in senior positions. Workforce Race Equality Indicators

24 KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion.

	2017	2016
White	83.69%	82.48%
BME	74.67%	67.38%

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

There has been a significant improvement in the level of BAME staff believing that trust provides equal opportunities for career progression or promotion.

Factors impacting on this indicator during the last year include:

- 1. Recruiting Managers training was enhanced to include bias/prejudice.
- 2. Bias/prejudice training was made available to all staff and managers
- 3. Development of a BAME Staff Network following the BAME conference arranged
- in November last year by the Diversity & Inclusion team.

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

The trust will carry out an in depth analysis and examine those areas where level of staff believing the trust provides equal opportunities for career progression or promotion are of greatest concern and develop targeted action plans to address this issue.

#### EDS2 Outcomes

3.1 Fair NHS recruitment and selection processes lead to a more representative workforce at all levels

3.3 Training and development opportunities are taken up and positively evaluated by all staff

3.4 When at work, staff are free from abuse, harassment, bullying and violence from any source.

3.6 Staff report positive experiences of their membership of the workforce

Corporate Equality Objectives.

1. To support the development of leadership at all levels in a way that values and promotes equality, diversity and inclusion.

3. Reduce discrimination experienced by Disabled and BME staff and applicants and Increase the percentage of BME staff in senior positions.

25 Q17. In the last 12 months have you personally experienced discrimination at work from any of the following? b) Manager/team leaderor other colleagues.

	2017	2016			
White	8.13%	9.01%			
BME	16.62%	20.58%			

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

Once again there is a significant improvement over last year but there remains a significant disparity between white and BAME staff. Factors affecting this indicator during the last year include:

- 1. Recruiting Managers training was enhanced to include bias/prejudice.
- 2. Bias/prejudice training was made available to all staff and managers
- 3. Development of a BAME Staff Network following the BAME conference arranged in November last year by the Diversity & Inclusion team.

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

The trust will carry out an in depth analysis and examine those areas where levels of reported discrimination are of greatest concern and develop targeted action plans to address this issue.

### EDS2 Outcomes

- 3.1 Fair NHS recruitment and selection processes lead to a more representative workforce at all levels
- 3.3 Training and development opportunities are taken up and positively evaluated by all staff
- 3.4 When at work, staff are free from abuse, harassment, bullying and violence from any source.
- 3.6 Staff report positive experiences of their membership of the workforce

### Corporate Equality Objectives.

- 1. To support the development of leadership at all levels in a way that values and promotes equality, diversity and inclusion.
- 3. Reduce discrimination experienced by Disabled and BME staff and applicants and Increase the percentage of BME staff in senior positions.

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

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

Year to	31st MARCH 2016			31st MARCH 2017		
Ethnicity	White	BAME	Unknown	White	BAME	Unknown
Voting Board members	12	3		11	3	
Exec Board members	5	1		6	1	
Number of staff in overall workforce	5864	1125	958	5678	1120	1032
Voting Board Member - % by Ethnicity	80.0%	20.0%		78.6%	21.4%	
Executive Board Member - % by Ethnicity	83.3%	16.7%		85.7%	14.3%	
Overall workforce - % by Ethnicity	73.8%	14.2%	12.1%	72.5%	14.3%	13.2%
Difference (Voting Board Membership -Overall workforce)	6.2%	5.8%	-12.1%	6.1%	7.1%	-13.2%
Difference (Exec Board Membership - Overall workforce )	9.5%	2.5%	-12.1%	13.2%	0.0%	-13.2%

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

These figures do not take account of those staff who have not declared their ethnicity and are therefore not strictly comparable as all voting members of the board have declared their ethnicity. In addition at the time of reporting, there were fewer board members than last year.

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

This data shows that the ethnic breakdown of voting members of the board of directors very closely matches the overall workforce. Therefore, there is no requirement for any further action.

# 27 Are there any other factors or data that should be taken into consideration in assessing progress?

None

# 28 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 work streams agreed at board level, such as EDS2. You are asked to provide a link to your WRES action plan in the space below.

A detailed action plan will be developed in response to these metrics and published at:

http://www.ekhuft.nhs.uk/patients-and-visitors/about-us/boards-andcommittees/diversity-and-inclusion