

ID is ANON-DH32-FNKC-K

Introduction

1 Name of organisation

Name of organisation:

Wrightington, Wigan and Leigh 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 :

Alison Balson, Director of Workforce

4 Name and contact details of lead manager compiling this report

Name and contact details of lead manager compiling this report:

Philip Makin, 01942 244000

5 Names of commissioners this report has been sent to

Complete as applicable:

Julie Southworth

Workforce Race Equality Standard reporting template

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

Complete as applicable.:

Julie Southworth,
Director of Quality & Safety,
Wigan Borough CCG,
Wigan Life Centre,
College Avenue,
Wigan, WN1 1NJ

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:

<http://www.wvl.nhs.uk/Equality/wres.aspx>

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

Name::

Alison Balson

Date::

September 2018

Background narrative

9 Any issues of completeness of data

Any issues of completeness of data:

BME data recorded on ESR is good quality and we are able to report against a range of indicators. However, our central electronic recording of training data includes internal training only and so we are unable to report on all training undertaken. Therefore, we are currently unable to provide data on the relative likelihood of BME staff accessing non-mandatory training and CPD as compared to White staff (Section 20).

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

5068

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:

7.62%

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

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

98.7%

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:

Woven Reports are reviewed on a monthly basis and any gaps are duly followed up.

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:

Response rate is high so no current concerns.

Workforce data

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

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

01 April 2017 to 31 March 2018

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 Workforce

| | WHITE | BME |
|--------------|-------|-----|
| Under Band 1 | 2 | 0 |
| Band 1 | 103 | 5 |
| Band 2 | 417 | 14 |
| Band 3 | 280 | 9 |
| Band 4 | 287 | 6 |
| Band 5 | 113 | 4 |
| Band 6 | 64 | 0 |
| Band 7 | 59 | 3 |
| Band 8a | 50 | 1 |
| Band 8b | 24 | 0 |
| Band 8c | 8 | 0 |
| Band 8d | 9 | 0 |
| Band 9 | 4 | 0 |
| VSM | 12 | 0 |

Clinical Workforce of which non- medical

| | WHITE | BME |
|--------------|-------|-----|
| Under Band 1 | 9 | 0 |
| Band 1 | 309 | 3 |
| Band 2 | 778 | 14 |
| Band 3 | 136 | 1 |
| Band 4 | 122 | 0 |
| Band 5 | 684 | 52 |
| Band 6 | 514 | 16 |
| Band 7 | 360 | 4 |
| Band 8a | 74 | 5 |
| Band 8b | 10 | 0 |
| Band 8c | 6 | 0 |
| Band 8d | 2 | 0 |
| Band 9 | 0 | 0 |
| VSM | 2 | 1 |

Of which Medical and Dental

| | WHITE | BME |
|--------------------------------|-------|-----|
| Consultants | 71 | 116 |
| Non-Consultant Career Grade | 31 | 61 |
| Trainee Grades | 2 | 71 |

| | | |
|-------|----|----|
| Other | 40 | 34 |
|-------|----|----|

Data for previous year:

Non Clinical Workforce

| | WHITE | BME |
|--------------|-------|-----|
| Under Band 1 | 0 | 0 |
| Band 1 | 385 | 5 |
| Band 2 | 437 | 16 |
| Band 3 | 271 | 9 |
| Band 4 | 289 | 7 |
| Band 5 | 113 | 6 |
| Band 6 | 59 | 1 |
| Band 7 | 67 | 3 |
| Band 8a | 44 | 1 |
| Band 8b | 27 | 0 |
| Band 8c | 7 | 0 |
| Band 8d | 9 | 0 |
| Band 9 | 1 | 0 |
| VSM | 14 | 0 |

Clinical Workforce of which non- medical

| | WHITE | BME |
|--------------|-------|-----|
| Under Band 1 | 0 | 0 |
| Band 1 | 22 | 0 |
| Band 2 | 761 | 11 |
| Band 3 | 138 | 1 |
| Band 4 | 127 | 0 |
| Band 5 | 732 | 51 |
| Band 6 | 511 | 12 |
| Band 7 | 341 | 3 |
| Band 8a | 72 | 5 |
| Band 8b | 8 | 0 |
| Band 8c | 6 | 0 |
| Band 8d | 2 | 0 |
| Band 9 | 0 | 0 |
| VSM | 2 | 1 |

Of which Medical and Dental

| | WHITE | BME |
|----------------|-------|-----|
| Consultants | 71 | 116 |
| Non-Consultant | | |
| Career Grade | 26 | 69 |
| Trainee Grades | 35 | 59 |
| Other | 21 | 16 |

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

The Trust's BME representation is currently 7.75% compared to 5% BME for the Wigan Borough. A large percentage of BME employees are within clinical staff groups and in particular the Medical & Dental staff group. There are no areas of concern from the data at the present time.

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

There are no concerns from the data at the present time.

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

Data for reporting year:

White staff were 1.52 times more likely to be appointed from shortlisting compared to BME applicants.

Data for previous year:

White staff were 2.06 times more likely to be appointed from shortlisting compared to BME applicants.

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

Remains a focus moving forward.

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

The Trust's Equality Objectives for the forthcoming year include a specific focus on further reducing inequalities experienced by staff and applicants from a BME background by building on the BME Staff Network Forum. We also aim to further develop the BME Leaders module within the WWL Leadership Programme as well as BME coaching and mentoring. Focused listening events are planned as is the development of inclusive talent management programmes, enabling staff from protected groups to have equal opportunities of career progression.

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.

Data for reporting year:

BME staff were 1.02 times more likely than white staff to enter a formal disciplinary process.

Data for previous year:

BME staff were 1.83 times more likely than white staff to enter a formal disciplinary process.

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

Slight improvement since last year's submission.

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

BME staff are overrepresented in formal disciplinary processes compared with white staff and primarily these cases concern conduct & capability cases for BME medical staff. Medical staff conduct & capability issues are overseen by the Medical Director and Workforce Director. The process is transparent and involves NCAS and, where applicable, an external assessment. Therefore, we do not believe discriminatory practices are in place. However, it is still unclear as to why there is a disparity between the ethnic groups.

20 Relative likelihood of staff accessing non-mandatory training and CPD.

Data for reporting year:

N/A

Data for previous year:

N/A

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

See Question 9 - Background Narrative.

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

No current actions planned.

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.

Data for reporting year:

White:
18.70%
BME:
13.33%

Data for previous year:

White:
20.64%
BME:
21.74%

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

Reduction in % BME staff experiencing harassment, bullying or abuse from patients, relatives or the public within this year's results.

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

The Trust has a zero tolerance policy regarding violence towards Trust staff and a working group is in place with a nominated BME representative.

22. KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.

Data for reporting year:

White:
22.42%
BME:
35.48%

Data for previous year:

White:
19.80%
BME:
26.09%

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

Increased % BME staff experiencing harassment, bullying or abuse within this year's results.

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

Staff survey data to be triangulated with internally reported Dignity At Work related Grievances to establish any trends/hotspots that require further action.

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

Data for reporting year:

White:
87.13%
BME:
70.83%

Data for previous year:

White:
87.99%
BME:
80.00%

The implications of the data and any additional background explanatory narrative:
Reduced % BME staff believing the Trust provides equal opportunities within this year's results.

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:
Promotions data is included within the annual inclusion & diversity report and this will be triangulated with the staff survey feedback. Associated actions to be built into EDS action plan.

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.

Data for reporting year:

White:
5.41%
BME:
19.35%

Data for previous year:

White:
3.44%
BME:
4.35%

The implications of the data and any additional background explanatory narrative:
Significant reduction in the % of BME staff experiencing discrimination at work within this year's results.

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:
Cross refer to specific survey aimed at BME staff as well as internal pulse check surveys undertaken.

22 KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.

Data for reporting year:

White:
19.80%
BME:
26.09%

Data for previous year:

White:
18.88%
BME:
28.57%

The implications of the data and any additional background explanatory narrative:
Significantly higher % rate of BME experiencing discrimination at work within this year's results compared with last year.

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:
Focus Groups have been held on a regular basis to gain feedback from staff around any areas of concern. We will continue to review internally reported Dignity At Work related Grievances to establish any trends/hotspots requiring further action.

Workforce Race Equality Indicators

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

Data for reporting year:

White:
93.3% of the Trust Board membership was White compared with 90.4% of the Trust workforce.
BME:

6.7% of the Trust Board membership was BME compared with 8.3% of the Trust workforce.

Data for previous year:

White:

93.3% of the Trust Board membership was White compared with 90.9% of the Trust workforce.

BME:

6.7% of the Trust Board membership was BME compared with 7.7% of the Trust workforce.

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

Small differential between the percentage BME Trust Board membership when compared to the Trust workforce.

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

None at present.

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?:

The Trust has run several BME focus groups over a number of years and these sessions have been extremely beneficial in enabling proactive engagement with BME staff and key actions have been incorporated into the EDS action plan in response to feedback obtained.

The Trust reports on other BME data items such as PDR, leavers, flexible working applications and promotions within its Annual Inclusion & Diversity Monitoring Report.

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 workstreams agreed at Board level, such as EDS2. You are asked to attach the WRES Action Plan or provide a link to it.:

The Trust's EDS Action Plan focuses on actions associated with this year's WRES.