

Workforce Race Equality Standard (WRES) report 2023-24

1.0 Introduction

The Workforce Race Equality Standard (WRES) was introduced in 2015 as part of the NHS standard contract to enable employees from black and minority ethnic (BME) backgrounds to receive fair treatment in the workplace. The Workforce Race Equality Standard (WRES) is a data collection framework which measures elements of race equality in NHS organisations. Implementing the WRES is a requirement for NHS Commissioners and NHS healthcare providers including independent organisations through the NHS contract.

The WRES is designed around nine indicators, or measures, which compare Black and Minority Ethnic (BME) colleagues and their White counterparts. We acknowledge and respect that not everyone is comfortable with the term “BME” and prefer other terms instead, however in line with the WRES terminology we shall use BME for consistency purposes.

We also acknowledge that comparing two groups has the disadvantage of masking disparities within each group, however on the same lines as above mentioned, we are following national guidelines and for the purposes of this report and data we will only compare the data for the generic two groups.

Five indicators of the WRES are populated with workforce data from our Electronic Staff Record (ESR) and show comparative data for BME and White staff.

This includes;

- Indicator 1: the distribution of staff in each pay band,
- Indicator 2: likelihood of being appointed following shortlisting
- Indicator 3: likelihood of entering a formal disciplinary process
- Indicator 4: access to training and development
- Indicator 5: BME Board membership

The remaining four indicators are populated with comparative data from the NHS National Staff Survey for three years from 2021 to 2023. The data covers, experiences of bullying and harassment, abuse; discrimination, and perceptions of fairness in career progression

The data is to enable the Trust to adopt a ‘learning organisation’ approach and produce an action plan to build cultures of continuous improvement. These are essential steps in helping to bring about a workplace that is free from discrimination and bias.

As a public service, our Trust is bound by the Equality Act - Public Sector Equality Duty and, as such, we are committed to:

- Eliminating unlawful discrimination, harassment, and victimisation.
- Advancing equality of opportunity between people from different protected characteristics
- Fostering good relations between people from different protected characteristics

2.0 Context

The data in this report is comparing 2022 - 2023 to 2023 2024. When reviewing the information, it is useful to understand the overall numbers of BME and white staff in the workforce. As at 31 March 2024 the ethnic profile of staff represents 43% for BME staff, 54% for White staff and 3% Not stated (staff who prefer not to declare their ethnicity).



| Ethnicity | Headcount - 31 March 2024 |
|-------------|---------------------------|
| BME | 1794 |
| Not stated | 140 |
| White | 2232 |
| Grand Total | 4166 |

3.0 Indicators 1 to 9

Indicator 1: 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:

Percentage of non-clinical staff in each Pay band AFC Band 1-9 & VSM

| Non-Clinical | Apr22-Mar23 | | | | | | Apr23-Mar24 | | | | | |
|--------------|-------------|------|-----------|-----|-----------|-----|-------------|-----|-----------|-----|-----------|-----|
| | White | | BME | | Unknown | | White | | BME | | Unknown | |
| | Headcount | % | Headcount | % | Headcount | % | Headcount | % | Headcount | % | Headcount | % |
| Band 1 | 11 | 69% | 2 | 13% | 3 | 19% | 10 | 71% | 2 | 14% | 2 | 14% |
| Band 2 | 369 | 80% | 71 | 15% | 24 | 5% | 340 | 72% | 109 | 23% | 21 | 4% |
| Band 3 | 114 | 86% | 12 | 9% | 6 | 5% | 153 | 85% | 21 | 12% | 6 | 3% |
| Band 4 | 175 | 91% | 14 | 7% | 4 | 2% | 174 | 88% | 20 | 10% | 4 | 2% |
| Band 5 | 62 | 82% | 10 | 13% | 4 | 5% | 63 | 81% | 11 | 14% | 4 | 5% |
| Band 6 | 53 | 70% | 20 | 26% | 3 | 4% | 57 | 72% | 20 | 25% | 2 | 3% |
| Band 7 | 59 | 86% | 9 | 13% | 1 | 1% | 73 | 78% | 18 | 19% | 2 | 2% |
| Band 8a | 37 | 88% | 4 | 10% | 1 | 2% | 40 | 80% | 10 | 20% | 0 | 0% |
| Band 8b | 20 | 71% | 7 | 25% | 1 | 4% | 23 | 72% | 8 | 25% | 1 | 3% |
| Band 8c | 9 | 64% | 5 | 36% | 0 | 0% | 9 | 82% | 2 | 18% | 0 | 0% |
| Band 8d | 8 | 73% | 3 | 27% | 0 | 0% | 8 | 80% | 2 | 20% | 0 | 0% |
| Band 9 | 7 | 100% | 0 | 0% | 0 | 0% | 7 | 88% | 1 | 13% | 0 | 0% |
| VSM | 8 | 89% | 1 | 11% | 0 | 0% | 7 | 88% | 1 | 13% | 0 | 0% |
| NEDS | 7 | 70% | 0 | 20% | 0 | 0% | 5 | 56% | 3 | 33% | 0 | 0% |

The workforce profile of BME Staff employed within the Trust has increased from 39% in 2022- 2023 to 43% in 2023 - 2024. A big drive up seems to come from the fact we have recruited a great number of our staff through international recruitment.

For BME staff in Band 7, the numbers have increased last year from 13% (9 staff), compared to 19% (18 staff). Similarly, progression has been made in Band 8a for BME staff, representing 20% (10 staff) compared to last year 10% (4 staff). This increase can be tracked down to the drive of having 'Equality Ambassadors' sitting on recruitment panels to support recruiting managers on removing bias from their decision making progress.

At the most senior levels of the Trust BME staff collectively continue to be underrepresented with similar numbers to last year. Collectively in Bands 8c and above staff held 9 posts compared to white staff at 32. It is an improvement from the 2023 - 2024 data but we do recognise there is still some work to be done to address the under representation.

Percentage of clinical staff in each Pay band AFC Band 1-9 & Medical & Dental

| Clinical | Apr22-Mar23 | | | | | | Apr23-Mar24 | | | | | |
|------------------|-------------|------|-----------|-----|-----------|----|-------------|-----|-----------|------|-----------|-----|
| | White | | BME | | Unknown | | White | | BME | | Unknown | |
| | Headcount | % | Headcount | % | Headcount | % | Headcount | % | Headcount | % | Headcount | % |
| Band 2 | 258 | 64% | 135 | 33% | 10 | 2% | 247 | 61% | 150 | 37% | 9 | 2% |
| Band 3 | 102 | 78% | 23 | 18% | 2 | 2% | 102 | 78% | 26 | 20% | 3 | 2% |
| Band 4 | 70 | 61% | 52 | 45% | 3 | 3% | 66 | 57% | 48 | 42% | 1 | 1% |
| Band 5 | 152 | 22% | 454 | 67% | 23 | 3% | 136 | 20% | 532 | 78% | 14 | 2% |
| Band 6 | 257 | 53% | 197 | 41% | 15 | 3% | 244 | 51% | 220 | 46% | 17 | 4% |
| Band 7 | 196 | 62% | 97 | 31% | 13 | 4% | 197 | 62% | 108 | 34% | 12 | 4% |
| Band 8a | 71 | 50% | 39 | 27% | 7 | 5% | 90 | 63% | 47 | 33% | 5 | 4% |
| Band 8b | 19 | 70% | 6 | 22% | 2 | 7% | 17 | 63% | 7 | 26% | 3 | 11% |
| Band 8c | 9 | 69% | 4 | 31% | 1 | 8% | 9 | 69% | 3 | 23% | 1 | 8% |
| Band 8d | 7 | 88% | 2 | 25% | 0 | 0% | 7 | 88% | 1 | 13% | 0 | 0% |
| Band 9 | 1 | 100% | 0 | 0% | 0 | 0% | 0 | 0% | 1 | 100% | 0 | 0% |
| Medical & Dental | 146 | 24% | 370 | 62% | 31 | 5% | 152 | 25% | 422 | 71% | 24 | 4% |

Comparing the data from last and present years the staff profile has shown little change from Band 5 to Band 8a. The majority of BME staff are at Band 5 equalling 532 staff, representing 78% of Band 5 employees.

In a similar picture to the non-clinical staff, the very senior AfC colleagues, bands 8C and above are under represented and on the same vein we understand there are still work to be done to address this disparity.

The data regarding to colleagues on the M&D terms and conditions, show a very different picture where the imbalance is with only having 25% of white staff. This is a representation of our diverse culture and international recruitment campaigns.

Indicator 2: Relative likelihood of white applicants being appointed from shortlisting across all posts compared to BME:

| Indicators | 2023 | | | | | | 2024 | | | | | |
|-------------------------------------------------------------------------------------------------------------|-----------|-----|-----------|-----|-----------|-----|-----------|-----|-----------|-----|-----------|-----|
| Relative likelihood of white staff being appointed from Shortlisting compared to BME staff across all posts | 1.44 | | | | | | 2.14 | | | | | |
| | White | | BME | | Unknown | | White | | BME | | Unknown | |
| | Headcount | % | Headcount | % | Headcount | % | Headcount | % | Headcount | % | Headcount | % |
| | 655 | 51% | 501 | 39% | 125 | 10% | 690 | 42% | 529 | 32% | 412 | 25% |

We acknowledge that our indicator 2 has unfortunately worsened in the past year. This may be a reflection of our recruitment process whereby our international recruitment does not fall part of this data.

We have committed to implemented the NHS De-bias recruitment programme to assist us in improving this outcome and will also be doing spot checks and deep dives to realise an action plan to support the indicator to be as close to 1 as possible.

Indicator 3: Relative likelihood of BME staff entering the formal disciplinary process compared to white staff.

| | | | | | | | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----|-----------|-----|-----------|----|-----------|-----|-----------|-----|-----------|----|
| Relative likelihood of BME staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation compared to white staff (two years rolling average) | 2023 | | | | | | 2024 | | | | | |
| | 0.30 | | | | | | 0.54 | | | | | |
| | | | | | | | | | | | | |
| | White | | BME | | Unknown | | White | | BME | | Unknown | |
| | Headcount | % | Headcount | % | Headcount | % | Headcount | % | Headcount | % | Headcount | % |
| | 19 | 83% | 4 | 17% | 0 | 0% | 23 | 70% | 10 | 30% | 0 | 0% |

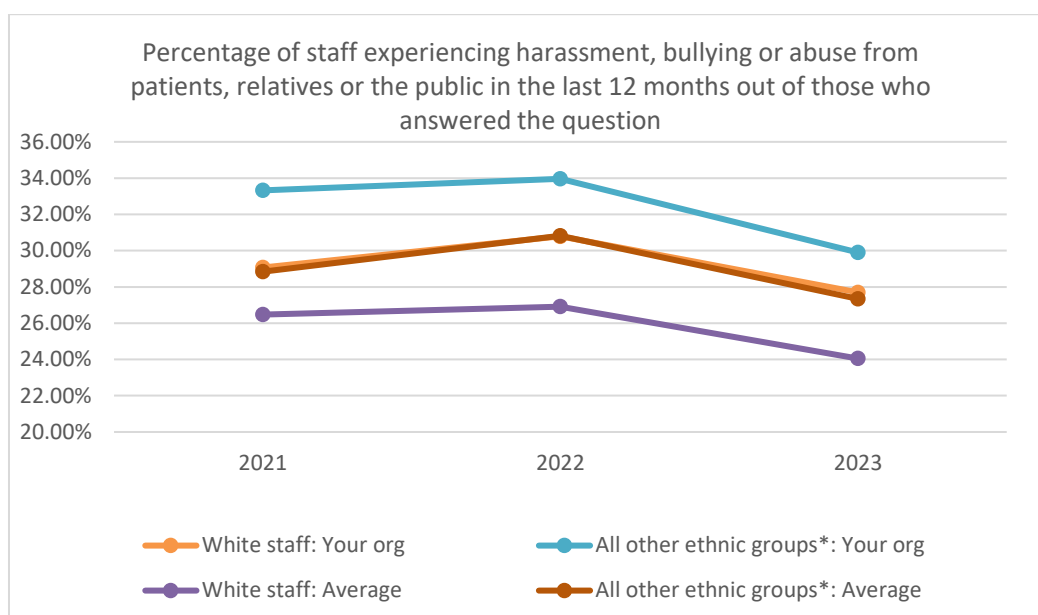
Although we should be happy that for the past 2 years this indicator demonstrates that white staff is much more likely to enter a disciplinary process we also need to be mindful that the dial on this indicator does not promotes an unbalance. As an employer we should always strive for fairness and equity across the board.

Indicator 4: Relative likelihood of White staff accessing non-mandatory training and CPD compared to BME staff:

| | | | | | | | | | | | | |
|---------------------------------------------------------------------------------------------------|-----------|-----|-----------|-----|-----------|----|-----------|-----|-----------|-----|-----------|----|
| Relative likelihood of white staff accessing non-mandatory training and CPD compared to BME staff | 2023 | | | | | | 2024 | | | | | |
| | 0.99 | | | | | | 0.87 | | | | | |
| | | | | | | | | | | | | |
| | White | | BME | | Unknown | | White | | BME | | Unknown | |
| | Headcount | % | Headcount | % | Headcount | % | Headcount | % | Headcount | % | Headcount | % |
| | 528 | 58% | 369 | 40% | 21 | 2% | 321 | 53% | 296 | 44% | 19 | 3% |

The likelihood of White staff accessing non-mandatory training and has dropped from last year. A value of “1.0” for the likelihood ratio means that white and BME staff are equally likely to access non-mandatory training or CPD. We will be reviewing applications for training to understand the decline and address the outcome for next year so the balance and equity on this indicator is restored.

Indicator 5: Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months



We are happy with the downward shift for all our colleagues both locally and nationally. However we will have to still acknowledge that the rate of perception from our staff is not within acceptable numbers, with our BME colleagues still feeling more affected than our white colleagues.

Our REACH (Race Equality and Cultural Heritage) network is being proactive on supporting the Trust to create a communications campaign to address behaviours from patients and relatives (and staff). Our aim is to fully support the network and also look into further initiatives to address these issues.

Indicator 6: Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months



This table also represents a very similar picture as the indicator 5. We will be addressing both indicators simultaneously with the addition of a further strengthening on our established 'just culture' programme on our policies and practices.

Indicator 7: Percentage of staff believing that the organisation provides equal opportunities for career progression or promotion

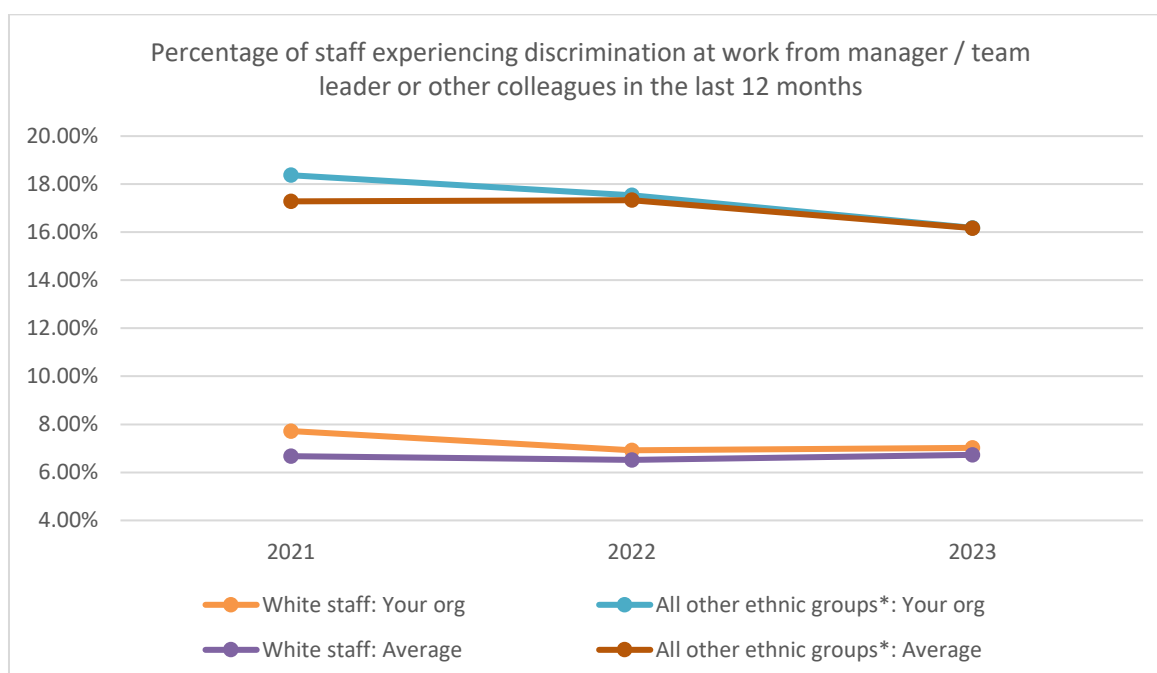


In the past year we have been working on supporting a change in culture in regards to career progression and promotion, which has been identified on the slight increase from our BME staff's perception.

However it is very clear that overall our staff do not believe that our organisation provides equal opportunity for career progression and promotion.

We have appointed a new Head of Organisational Development at the beginning for this financial year and he is working to develop a further framework that will support development and learning across the organisation. We may not see this indicator increasing drastically on the next report due to when the survey is released, but we are confident that in 2 years' time, when the work we are currently developing is actually in place, our data will show an improvement.

Indicator 8: Percentage of staff experiencing discrimination at work from manager / team leader or other colleagues in the last 12 months



The table above indicates that our staff perceptions and experiences are in line with our national average. This indicator also tells us there is much work to do to tackle discrimination and perceptions of discrimination in the work place. We will be reviewing and implementing appropriate actions from the EOE (East of England - Region) Anti-racism Strategy, to assist us in tackling race discrimination and perceptions of discrimination within the Trust.

Indicator 9: BME board membership – Executive and Non-Executive Directors:

| Total Board Members by ethnicity | 2023 | | | | 2024 | | | |
|----------------------------------|-----------|-----|-----------|-----|-----------|-----|-----------|-----|
| | | | | | | | | |
| | White | | BME | | White | | BME | |
| | Headcount | % | Headcount | % | Headcount | % | Headcount | % |
| | 15 | 79% | 3 | 16% | 13 | 72% | 4 | 22% |

BME representation at board level is 22% when compared to 16% last year. The national indicative at senior level positions is 19%.

We are always striving for a better representation on our Board but these numbers are encouraging for the leadership and progression of diverse leadership in the Trust, and we will continue to encourage diversity on our Board.

4.0 Actions for 2024 to 2025

It is important that we sign up to the recommended actions below and agree the timescales.

| Ref | Indicator | Actions | Lead | Timescale |
|-----|-----------|-------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|--------------|
| 1 | 1,2,9 | Debias recruitment NHS programme to be implemented in line with the NHS EDI High impact actions – attraction, recruitment and retention. | Head of People - Recruitment and Retention | March 2025 |
| 2 | 1,2,9 | Review the role of recruitment inclusion specialist. To ensure they are effectively able to challenge and report on bias recruitment processes. | Head of People - Recruitment and Retention | March 2025 |
| 4 | 3,6,8 | Review all People policies as they come up for renewal to strengthen the just culture approach. | Head of People - Business Partnering | Ongoing 2025 |
| 5 | 5,6,8 | Within our culture change initiatives set standards of behaviour to tackle bullying and harassment. – support network initiatives | Head of ODL & Head of EDI | March 2025 |

| | | | | |
|----------|---------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|---------------------|
| 6 | 4,5,6,8 | Consider bystander training - Select existing EDI champions, Freedom to Speak up Guardians, and Inclusion Specialist for the Active Bystander Train-the-Trainer programme - to roll out across the Trust. | Head of EDI | March 2025 |
| 7 | 5,6 | Implement the EOE Anti- racism Strategy and Action plan – to ensure we appropriately challenge racism within PAHT. | Head of EDI | March 2025 |
| 8 | 4,7 | Deep dive and spot checks on non-mandatory training and CPD process and policy | Head of OD | Ongoing 2025 |