

# **Workforce Race Equality Standard (WRES)**

# Trust Report 2023 & Action Plan for 2023-24



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## Contents

Executive Summary	<b>Pag</b> 2
1.0 Introduction 1.1 Trust WRES summary performance 2023	3
<ul> <li>2.0 2023 WRES overview</li> <li>2.1 Trust summary performance over time against the 9 WRES indicators</li> <li>2.2 National WRES results to 2022 for comparison purposes</li> </ul>	4 4 5
3.0 Trust performance breakdown by the 9 WRES indicators	6
indicator 1: Workforce Ethnicity Profile 3.1 bank WRES 3.2 WRES Aspirational Target 3.3 Race Disparity Ratios indicator 2: Recruitment measure indicator 3: Disciplinary measure indicator 4: Training measure indicator 5: Harassment, bullying & abuse from patients/public indicator 6: Harassment, bullying and abuse from staff indicator 7: Belief in equal opportunities for career progression and promotion indicator 8: Experience of discrimination at work indicator 9: Trust ethnic diverse board membership	6 10 11 12 13 14 15 16 16 17 17
4.0 What have Combined been doing to advance the WRES over the past 12-18 months?	19
5.0 WRES Action Planned for 2023-24	20
6.0 Conclusions and Recommendations	21
APPENDIX 1: Trust Medical WRES (mWRES) data 2023 – First Year of Submission  APPENDIX 2: Bank WRES – first year of submission  APPENDIX 3: Key work programmes supporting delivery of progress against the 9 WRES indicators  APPENDIX 4: NSCHT WRES Action Plan 2022-23 Progress Report	22 23 24 26

#### **EXECUTIVE SUMMARY**

This report contains the Trust's eighth annual WRES performance and our associated action plan in compliance with the NHS Standard Contract. This will be published on our website and shared with NHS England and our local commissioners, as well as being reviewed as part of any CQC inspection processes as may be required. For the first time, the 2023 WRES includes the medical WRES ('mWRES') and bankWRES.

Performance against the 9 WRES indicators is illustrated in chart, table & narrative form. Overall, the Trust has seen a further general improvement in its WRES data on an annual basis since the WRES was introduced.

#### What's Improved:

- Improved our workforce ethnic diverse representation again to best yet rate (9.9%)
- Improved our WRES inclusive recruitment score to 1.14 (1.0 is desirable/equitable)

#### What's Worse:

- Significant deterioration in rates of Harassment, Bullying and Abuse (HBA) from service users & public
- Reduction in Board Ethnic Diverse representation (and no NED representation)

#### **Key Messages**

Since availability of the revised local census (2021) data, the Trust is seen to significantly under-represent ethnic diversity in the majority of paybands, clinical (with the exception of medical and band 5 clinical) and especially non-clinical paybands

- 1 in 5 ethnic diverse staff have experienced HBA from staff and 2 in 5 from service users and the public
- 13% of ethnic diverse staff have experienced discrimination at work

#### What we've done -

Working to advance ethnic diversity and race inclusion has continued to be a high priority for the Trust and 2023 saw the creation of a new Combined People Plan with *Inclusive and Representative* at its very heart. We have continued to take a high-profile and multi-faceted approach to delivering on this specific agenda, including commencing our RACE Code journey and a wide-ranging programme of education and development on inclusion

#### What we'll do as a result

This report sets out a high-level action plan built around the 3 strategic priorities from the NHS Long-term Workforce Plan 2023 (Train-Retain-Reform). Priorities are to:-

- 1. Debias our people processes
- 2. Deliver significant progress towards an equitable workforce (target 11.2% ethnic diverse representation) across all pay bands and staff groups
- 3. Take steps to end racial violence and aggression and harassment, bullying and abuse
- 4. Make EDI and race inclusion everyone's business

# **NSCHT Workforce Race Equality Standard (WRES) Report 2023**

#### 1.0 INTRODUCTION

The Workforce Race Equality Standard (WRES) is mandated annually as part of the NHS Standard Contract. We are accountable to NHS England, the Care Quality Commission (CQC) and to our local commissioners regarding meeting this obligation.

The WRES supports us to develop our Trust ambition to provide **outstanding inclusion** for all of our workforce as set out in our <u>Combined People Plan 2023-28</u>, see also section 4 for summary), and to deliver against our commitment to (<u>The RACE Code</u>). It also enables our performance on race inclusion to be monitored and benchmarked against comparator NHS organisations nationally.

This report contains the Trust's eighth annual WRES performance and our associated action plan. This will be published on our website and shared with NHS England and our local commissioners, as well as being reviewed as part of any CQC inspection processes as may be required.

#### 1.1 TRUST WRES SUMMARY PERFORMANCE 2023

Overall, the Trust has seen a general improvement in its WRES data on an annual basis since the WRES was introduced. Section 2.1 sets out a summary of Trust performance each year since 2018. National progress is set out in the chart at 2.2. Section 3 holds more detailed analysis of Trust performance against national performance for each individual indicator.

2023 has seen steady improvement across the WRES standard:

- Two key indicators (1 and 2), relating to the overall workforce ethnicity profile and recruitment and selection outcomes respectively, have made significant steady annual progress continuing into 2023.
- The other indicators have generally held or improved their positions over time.

There has been a pleasing increase in the belief of Trust ethnic diverse staff that the Trust offers equality of opportunity for career progression and promotion (indicator 7) over time and this rate now almost matches the perception of white staff.

Ethnic diverse colleagues, however, still experience higher rates of harassment, bullying and abuse from patients and the public and from fellow workers than their white counterparts.

It is pleasing that the disciplinary measure (indicator 3) remains at 0 (ie no disciplinary investigations in 2022-23 centring around an ethnic diverse colleague), although this measure remains vulnerable to swinging steeply, in the event of a small number of such cases arising.

#### **2.0 2023 WRES OVERVIEW**

#### 2.1 TRUST SUMMARY PERFORMANCE OVER TIME AGAINST THE 9 WRES INDICATORS

<u>Ind</u>	<u>Detail</u>		2018	<u>2019</u>	2020	2021	2022	2023			2018	2019	2020	2021	2022	2023
1	W/F ethnic dive profile (compare local population		6.5%	6.3%	7.6%	8.2%	9.1%	9.9%	%	15.0 - 10.0 - 5.0 -						
2	Recruitment me	easure*	1.96	2.07	1.89	1.3	1.27	1.14		2.50 2.00 1.50 1.00 0.50						
3	Disciplinary me	easure*	10.52	0.88	1.39	4.35	0.00	0.00		5.00		\	_/		_	
4	Training measu	ıre*	0.95	0.68	0.78	0.67	0.47	0.83		0.5 -						
_	HBA from patients /	Ethnic Diverse	43.3%	54.5%	42.0%	27.3%	30.1%	40.5%	%	100.0						
5	public*	White	31.2%	27.4%	29.9%	27.6%	29.0%	26.0%	/0	50.0						
	HBA from staff*	Ethnic Diverse	36.7%	21.2%	24.5%	16.7%	23.3%	22.1%	0/	100.0						
6		White	16.1%	14.7%	17.1%	15.4%	13.6%	16.9%	90	0.0	_					
	Belief in Equal Opportunities	Ethnic Diverse	31.0%	30.3%	40.8%	53.6%	61.6%	67.4%		100.0						
7	for career progression	White	67.2%	58.7%	61.0%	67.9%	70.0%	68.2%	%	0.0						
_	Discrimination at work*	Ethnic Diverse	20.7%	3.3%	12.8%	12.5%	14.9%	12.8%	0/	100 -						_
8		White	6.7%	4.7%	4.8%	4.3%	3.6%	5.2%	%	50 -	_					
9	Board Members (compared to loo population		15.4%	14.3%	23.1%	21.4%	20.0%	14.3%	%	50.0 - 25.0 -						

Figure 1: Trust 2023 WRES Performance against the 9 Indicators 2018-2023

KEY: \*denotes indicators where a low score is better \_\_\_\_\_ ethnic diverse staff rate \_\_\_\_\_ white staff rate \_\_\_\_\_ denotes 'equal treatment' (1.00)

#### 2.2 NATIONAL WRES RESULTS TO 2022 FOR COMPARISON PURPOSES

The chart below is taken from the <u>2022 National WRES Report</u> (NHS England, published Feb 2023), depicting average national performance annually since 2016. This provides information on the direction of travel nationally, for comparison against Trust performance. Generally, it can be seen that Trust performance is in line with the national trend over time.

ec i	ndicator					Year				Trond	
ES II	idicator		2016	2017	2018	2019	2020	2021	2022	Trend	20
1	Percentage of black and minority ethnic (BME) staff	Overall	17.7% *	18.1% *	19.1%	19.9%	21.1%	22.4%	24.2%	Overall	
١.	referringe of black and minority ethnic (BME) staff	VSM	5.4% *	5.3% *	6.9%	7.6%	7.9%	9.2%	10.3%	VSM	
2	Relative likelihood of white applicants being appointed from shortlisting across all posts compared to BME applicants		1.57	1.60	1.45	1.46	1.61	1.61	1.54		:
3	Relative likelihood of BME staff entering the formal disciplinary process compared to white staff		1.56	1.37	1.24	1.22	1.16	1.14	1.14		
4	Relative likelihood of white staff accessing non- mandatory training and continuous professional development (CPD) compared to BME staff		1.11	1.22	1.15	1.15	1.14	1.14	1.12		
	Percentage of staff experiencing harassment,	BME	29.1%	28.4%	28.5%	29.7%	30.3%	28.9%	29.2%	BME	31
5	bullying or abuse from patients, relatives or the public in last 12 months	White	28.1%	27.5%	27.7%	27.8%	27.9%	25.9%	27.0%	White	25
_	Percentage of staff experiencing harassment,	BME	27.0%	26.0%	27.9%	29.3%	28.4%	28.8%	27.6%	BME	22
6	bullying or abuse from staff in last 12 months	White	24.0%	23.0%	23.4%	24.4%	23.6%	23.2%	22.5%	White	17
	Percentage of staff believing that trust provides	BME			47.5%	44.6%	45.6%	44.0%	44.4%	White	49
7	equal opportunities for career progression or promotion **	White			61.1%	59.0%	59.7%	59.6%	58.7%	BME	62
_	Percentage of staff personally experiencing	BME	14.0%	14.5%	15.0%	15.3%	14.5%	16.7%	17.0%	BME	13
8	discrimination at work from a manager/team leader or other colleagues	White	6.1%	6.1%	6.6%	6.4%	6.0%	6.2%	6.8%	White	5.7
9	BME board membership		7.1%	7.0%	7.4%	8.4%	10.0%	12.6%	13.2%		Not yet

Figure 2: National WRES Performance against the 9 Indicators 2016-2022 (2023 for staff survey derived data)

#### 3.0 TRUST PERFORMANCE BREAKDOWN BY THE 9 WRES INDICATORS

#### Indicator 1: Workforce profile: Trust Ethic Diverse Heritage Workforce Representation (compared to local population)

Our aim at Combined is to be representative of our overall ethnic diverse workforce through all bands (clinical and non-clinical) and, also, after medical staff are excluded. The Trust's overall ethnic diverse workforce (bank excluded) has increased further to 9.9%. This is our best rate ever and a significant increase on our 2022 rate of 9.1%. However, this falls significantly short of the local ethnic diverse population (now identified as 11.2% from the 2021 census).

At 58.8% ethnic diverse (42.2% in 2022), the Trust Medical workforce significantly over represents for ethnic diverse heritage and this position bolsters the over-all Trust ethnic diverse workforce rate somewhat. A breakdown of our medical WRES data is included in Appendix 1. When medical staff are **excluded**, our Trust overall ethnic diverse workforce reduces to 8.0% (up from 8.2% in 2022) and our overall workforce to 8.0%.

Our non-clinical workforce significantly lags behind our clinical workforce in terms of ethnic diverse representation.

Trust Non-Clinical Ethnic Diverse Workforce:

**4.3%** (4.5% in 2022, so this position has worsened)

• Trust Clinical (Medical Excluded) Ethnic Diverse Workforce:

**9.1%** when excluding medical staff (up from 8.2% in 2022)

Trust overall Workforce (excluding medical):

**8.0%** (whole Trust excluding medical, up from 6.5% in 2022)

Our non-clinical representation consistently under-represents for ethnic diverse colleagues in all levels except for Band 8c (amounting to only one person) and Board membership. This position is unacceptable and remains a priority for action. For clinical workforce, the picture is the same, except for band 5 (predominantly nursing staff) where ethnic diverse colleagues are over-represented. This may be deemed to relate to disproportionate progression from band 5 into more senior bands in comparison to white counterparts. The Trust under-represents overall in all WRES 'clusters' (see table 1 below) except medical and VSM (executive, reducing to 14.3% when non-executive positions are included). Trust workforce ethnicity data as at 31<sup>st</sup> March 2023 is set out in the tables and charts below.

		2022		2023				
band/group	white	BME	unknown	white	BME	unknown		
band <1-4	89.7%	7.0%	3.3%	89.9%	7.3%	2.9%		
band 5-7	91.1%	8.0%	1.0%	89.6%	9.3%	1.1%		
band 8a-9	94.5%	3.7%	1.8%	94.1%	3.5%	2.4%		
VSM (exec)	62.5%	37.5%	0.0%	80.0%	20.0%	0.0%		
Medical	50.0%	42.2%	7.8%	35.3%	58.8%	5.9%		
TOTAL	88.7%	9.1%	2.3%	88.0%	9.9%	2.1%		

Figure 1 Summary Data – Whole Workforce 2023 – By WRES 'Cluster'

Data in the table shows our **best yet ethnic diverse representation** (9.9%).

However, this is significantly under the local population rate of 11% (from 2021 census).

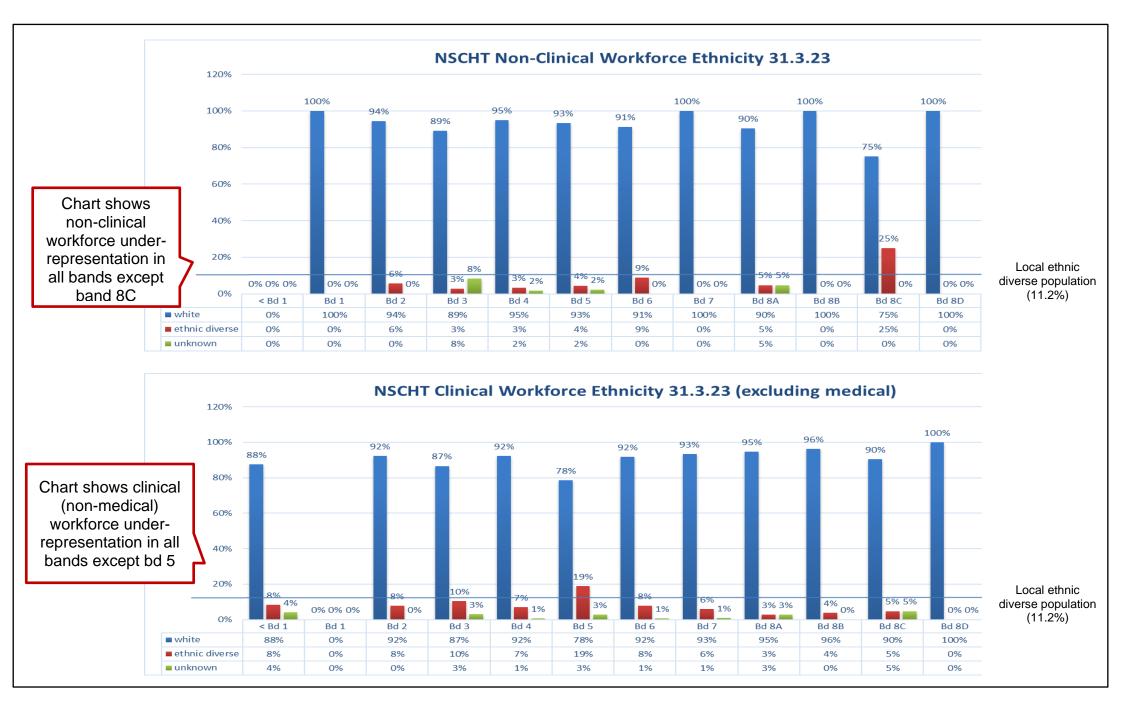


Figure 2: Trust Non-Clinical and Clinical Workforce (medical exclude) as at 31st March 2023

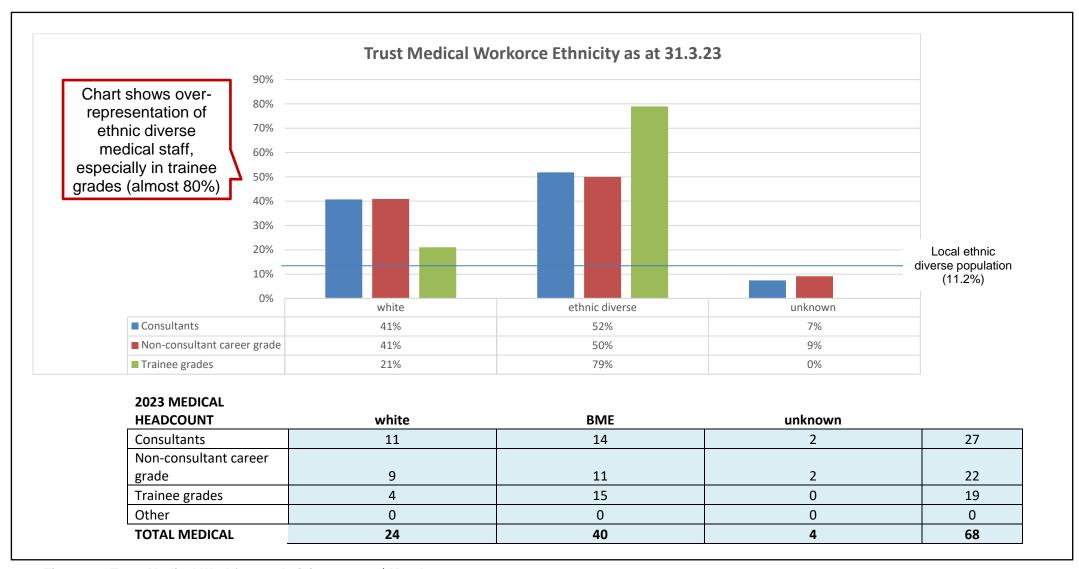


Figure 3: Trust Medical Workforce ethnicity as at 31st March 2023

[For further detail on the medical workforce, see <u>Appendix 1</u> (mWRES summary)]

#### Trust Non-Clinical and Clinical (non-medical) Workforce as at 31st March 2023 (headcount and percentages) 1a) Non Clinical workforce total 2022 total 2023 1a) Non Clinical workfowhite вме unknown total 2022 white BME unknown 0 0.0% Under Bar Headcoun 0 0 Under Bar Headcount 0% 0% 0% 0% 0.0% 0.0% 0 100% 0% 100% 100.0% Headcour Band 1 Headcount 0% 0.0% 0.0% Band 1 6% 82 88 84 89 Band 2 Headcount 93% 1% 100% 94.4% 5.6% 0.0% Band 2 Headcour Headcoun 95 4 108 97 109 Band 3 Headcount 88% 4% 8% 100% 89.0% 2.8% 8.3% Band 3 52 57 57 60 7% 2% 4 Band 4 91% 100% 95.0% 3.3% 1.7% Band 4 Headcour Headcount 38 40 42 45 Band 5 Headcount 95% 3% 3% 100% 93.3% 4.4% 2.2% Band 5 Headcour 28 31 Headcoun 29 0 34 Band 6 Headcount 97% 3% 0% 100% 91.2% 8.8% 0.0% Band 6 22 23 21 4% Band 7 Headcour 21 Band 7 Headcount 96% 0% 100% 100.0% 0.0% 0.0% 18 18 19 21 0% Band 8A Headcour 0 Band 8A Headcount 100% 0% 100% 90.5% 4.8% 4.8% 13 0 13 13 0 13 100% 0% 0% 100% 100.0% 0.0% 0.0% Band 8B Headcour Band 8B Headcount 0 6 Band 8C 100% 0% 0% 100% 25.0% Band 8C Headcoun Headcount 75.0% 0.0% 0% Band 8D Headcour Band 8D Headcount 100% 0% 100% 100.0% 0.0% 0.0% Band 9 Headcour 0 0 Band 9 Headcount 100% 0% 0% 100% VSM Headcoun 2 0 6 6 O VSM Headcount 67% 33% 0% 100% 85.7% 14.3% 0.0% 367 18 397 384 18 12 367 18 12 92.8% 4.3% 414 613 2.9% 1b) Clinical workforc 1b) Clinical workforced white BME unknown total 2022 white BME unknown 20 21 Under Band 1 87.5% Under Band 1 17 24 8.3% 0 0 0 10.0% 5.0% Band 1 Headcour Band 1 Headcount 85.0% 100.0% Headcour 18 19 12 13 Band 2 Headcount 92.3% 7.7% 0.0% Band 2 26 255 290 251 30 290 5.3% 86.6% 10.3% Band 3 Headcour Band 3 Headcount 94.7% 100.0% 3.1% 5 131 80 86 10 142 87.9% 9.0% 3.1% 100.0% 92.3% 7.0% 0.7% Band 4 Headcour Band 4 Headcount 27 35 153 184 146 186 1.2% 78.5% 18.8% Band 5 Headcour Band 5 Headcount 93.0% 5.8% 100.0% 2.7% 336 23 361 332 28 14.7% 2.2% 91.7% Headcoun 362 Band 6 Headcount 83.2% 100.0% 7.7% 0.6% Band 6 188 14 203 208 13 223 6.4% 0.6% 93.3% 5.8% 0.9% Band 7 93.1% 100.0% Band 7 Headcour Headcount 72 3 77 71 6.9% 0.5% 96.2% Band 8A Headcour 75 Band 8A Headcount 92.6% 100.0% 3.8% 0.0% 25 Band 8B Headcour 21 23 O 26 Band 8B Headcount 93.5% 3.9% 2.6% 100.0% 96.2% 3.8% 0.0% 15 17 19 21 8.7% 0.0% 90.5% 4.8% Band 8C Headcour Band 8C Headcount 91.3% 100.0% 4.8% 0 3 0 5.9% 5.9% 100.0% 0.0% Band 8D Headcour Band 8D Headcount 88.2% 100.0% 0.0% 0 0 0 0 0 Band 9 Headcount 100.0% 100.0% Band 9 Headcour VSM 50.0% 50.0% 100.0% 0.0% 100.0% 0.0% VSM Headcour Headcount 1159 105 21 1285 1218 124 23 1365 8.2% 89.2% 90.2% 1.6% 100.0% 9.1% 1.7% Of which Medical & Dental Of which Medical & Dental 16 26 8 40.7% 51.9% Consultan Headcour 11 14 27 Consultan Headcount 16 26 7.4% 0 0 0 0 0 0 of which Headcour 0 of which Headcount 0 Non-consi Headcour 12 22 9 11 22 Non-consi Headcount 8 12 2 22 40.9% 50.0% 9.1% 10 17 15 19 Trainee gr Headcount 7 10 0 17 21.1% 78.9% Headcour 0.0% Trainee g 25 0 3 22 0 22 25 Other Headcou Other Headcount 45 38 90 24 40 68 45 38 7 90 35.3% 58.8% 5.9% 1571 1772 1626 182 1847 2.3% 100.0% 88.0% 9.9% grand tota 161 39 grand total 88.7% 9.1% 2.1%

Figure 4: Table with Trust Workforce Ethnicity as at 31.3.23: Non-Clinical, Clinical and Medical - headcount and percentages

#### 3.1 BANK WRES

For the first time, the 2023 WRES process has included provision of data on bank staff (known as 'bank WRES'). Data submitted for the Bank WRES is set out in *Appendix 2* and summarised in Figure 5 below.

- The Trust's bank has a much higher ethnic diverse representation than the substantive workforce: 28.8% compared to 9.9%.
- The largest ethnic group is black ethnicity (15% of the Trust's bank workforce).
- 76% of the Trust's bank workforce is female, compared to 78% in the substantive workforce).
- 41% of male bank workers are ethnic diverse (majority black ethnicity), compared to 14% of female bank workers (also majority black ethnicity).
- There is a higher proportion of all non-white ethnic groups in the bank workforce, compared to the Trust substantive workforce.

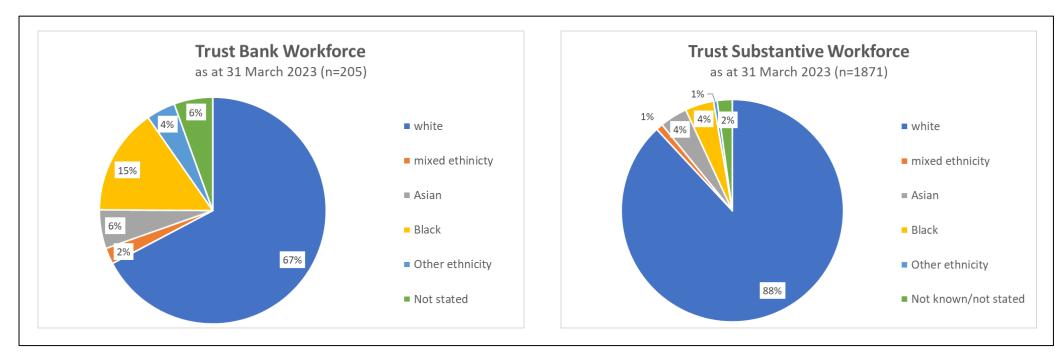


Figure 5: Trust Bank Workforce Ethnicity compared to Substantive Workforce ethnicity (31.3.2023 data)

#### 3.2 WRES ASPIRATIONAL TARGET

It is well-documented that ethnic diverse workers are most under-represented in more senior NHS roles (with the exception of medical roles). To address this situation, the **WRES Aspirational Target** seeks to work towards equitable representation in roles at band 8A+ by 2028.

This year, we have revised our Trust Aspirational Target based on our updated knowledge of our local ethnic diverse population, as provided by the 2021 Census (11.2%), to the below (see Figure 6 below).

Current p	orofile (31	23.23)			Aspirationa rate of 11.2		lation	Difference		
	White	Ethnic Diverse	Not Known	Total		White	Ethnic Diverse	Not Known	Total	No. of ethnic diverse appointments needed to be equitable
Bd 8A	90	3	3	96	Bd 8A	85	11	0	96	+ 8
Bd 8B	38	1	0	39	Bd 8B	34	5	0	39	+ 4
Bd 8C	22	2	1	25	Bd 8C	22	3	0	25	+1
Bd 8D	10	0	0	10	Bd 8D	9	1	0	10	+1
Bd 9	0	0	0	0	Bd 9	0	0	0	0	0

Figure 6: Trust 2023 Workforce Profile compared to aspirational workforce profile (by 2028)

To achieve our WRES Aspirational Targets by 2028, the Trust would need to progress and/or appoint 14 ethnic diverse individuals into Band 8(A-D) roles, as illustrated in Figure 6 above (based on current Trust establishment).

#### 3.3 RACE DISPARITY RATIOS

Race Disparity Ratios (RDR) provide a measure intended to reflect the progression of ethnic diverse staff from lower to higher levels in the workforce, by comparing BME representation amongst a lower set of pay bands with BME representation at a higher set of pay bands.

The 2023 data for Combined suggests significantly poorer rates of representation in senior roles compared to lower-banded clinical roles. Whilst there is greater equity evident in the data below at each RDR 'tier' for non-clinical roles, very significant ethnic diverse under-representation in Trust non-clinical roles is already noted in the report above.

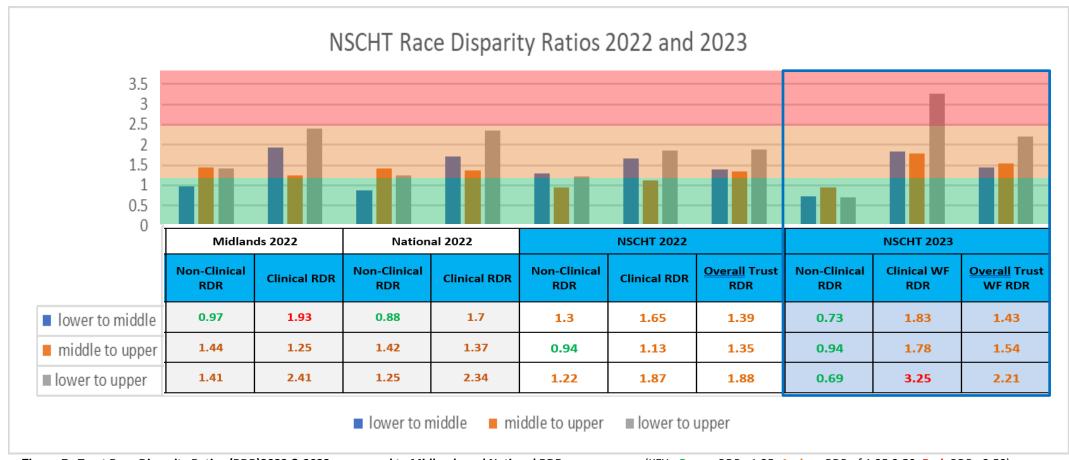


Figure 7: Trust Race Disparity Ratios (RDR)2022 & 2023, compared to Midlands and National RDR

(KEY: Green: RDR <1.25; Amber: RDR of 1.25:2.50; Red: RDR >2.50)

A value of equal to "1.0" indicates equity in representation at higher and lower levels; a value greater than "1.0" indicates that BME staff are underrepresented at the higher pay bands, and a value below "1.0" indicates BME staff are overrepresented at the higher pay bands.



**Figure 8**: WRES recruitment scores 2018 – 2023 (Trust scores compared with national average) [a score of 1.0 would mean equal access to recruitment appointments]

The above score is calculated the shortlisted and appointed data from Trust recruitment and selection activities over the period April 2022 – March 2023. A more complete analysis of our recruitment activities is included below for 2022-23 (and 2021-22).

								90.0%		78.5%	77.6%
	headcount			percentage			2022-23	80.0%	71.3%	76.570	//.0%
2022-23	Applications	Shortlisted	Appointed	Applications	Shortlisted	Appointed		70.0%			
ethnic diverse	1176	397	106	26.3%	18.1%	15.7%		60.0%			
not disclosed	111	73	45	2.5%	3.3%	6.7%		50.0%			
								40.0%			
white	3193	1719	523	71.3%	78.5%	77.6%		30.0%	26.3%		
TOTAL	4480	2189	674	100.0%	100.0%	100.0%		20.0%		18.1%	15.7%
								10.0%	2.5%	3.3%	6.7%
2021-22	Applications	Shortlisted	Appointed	Applications	Shortlisted	Appointed			2.370	5.5/6	0.776
ethnic diverse	943	249	100	25.7%	20.2%	16.7%		0.0%	Applications	Shortlisted	Appointed
not disclosed	45	15	3	1.2%	1.2%	0.5%	white		71.3%	78.5%	77.6%
white	2683	969	496	73.1%	78.6%	82.8%	ethni	c diverse	26.3%	18.1%	15.7%
TOTAL	3671	1233	599	100.0%	100.0%	100.0%	—not di	isclose d	2.5%	3.3%	6.7%

[Note: Ineligible application data has been removed from figures]

Figure 9: Trust Recruitment Data by Ethnicity 2022-23 (2021-22 bottom table)

Figure 10: Ethnicity through the Trust R&S Process 2022-23

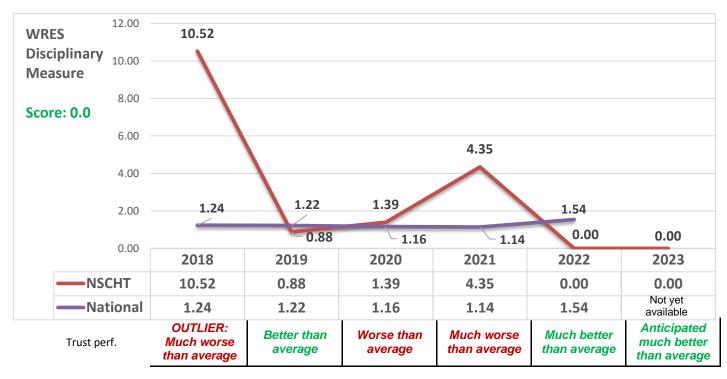


Figure 12 WRES Disciplinary Measure, year-on-year performance compared to the national position

As there were no disciplinary cases involving ethnic diverse colleagues in the 2023 WRES reporting period, hence our **disciplinary measure score is 0.00** (same as 2022). The 2021 score was 4.35 (likely not to be statistically significant) due to the small sample size.

Due to the low number of disciplinaries and relatively small ethnic diverse workforce in the Trust, this measure is vulnerable to swinging widely (seen in 2018 & 2021 above) in the event of even a small number of ethnic diverse colleagues going through a formal process. With the continued embedding of the Trust's Just and Fair Culture of Civility and Respect framework and associated investigations checklist, we are confident that disciplinary investigations are only being applied when absolutely necessary and appropriate rigour has been adopted to help eliminate effects of any potential bias that may be present. The People Directorate have also earlier this year instigated a review of practise and some changes to procedure following the learning from the Michele Cox employment tribunal case.

	Disciplinary cases 2021-2022	Disciplinary cases 2022-2023
White	7	11
ВМЕ	0	0
Ethnicity not known	1	0
TOTAL CASES IN YEAR	8	11

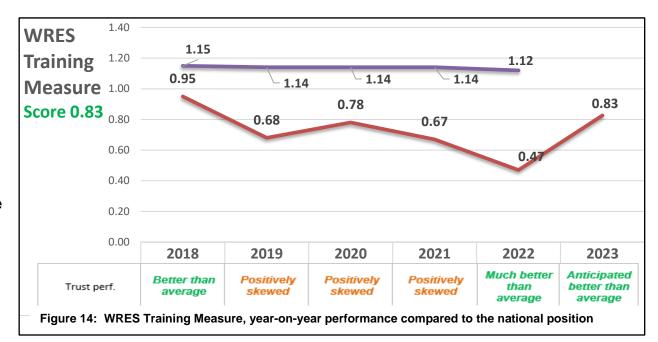
Figure 13: Trust Disciplinary Cases 2021-23

#### Indicator 4: Training Measure: Relative likelihood of BME colleagues accessing non-mandatory training compared to white colleagues

This indicator assesses the proportion of ethnic diverse colleagues accessing at least one piece of non-mandatory/non-core-required development, compared to white colleagues.

Historically, the Trust has *ostensibly* performed well on this measure, with a score skewed in favour of ethnic diverse staff. The 2022 score is no exception to this trend, but it is pleasing that this is less skewed than in previous years (a score close to 1.0 is generally desirable).

Pleasingly this year, after removing medical staff from the data, the figure does not flip to a score in favour of white staff as in previous years, but remains skewed in favour of ethnic diverse colleagues (score of 0.92).



Whilst an equitable score is ideal (as close to 1.0 as possible), in the short term this relatively minor skewing towards ethnic diverse colleagues may help to redress the balance a little in respect of years gone by of disadvantage. Additionally, this does not indicate the value / intensity of any learning programmes undertaken nor the number of programmes done by each ethnic diverse or white colleague respectively.

The Trust continues to operate a positive action approach to encouraging ethnic diverse colleagues to access development and also with regard to running specific positive action development programmes (*New Futures* and forthcoming in 2023 *Developing You, Developing Me Talent Acceleration Programme*). The Diversity and Inclusion Lead continues to share a range of development opportunities directly with ethnic diverse colleagues, without the need to go through line management communication as it has been suggested that this may be a potential barrier to accessing information on development opportunities.

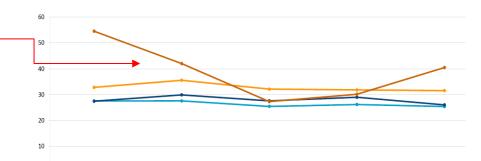
#### Indicator 5: Harassment, bullying & abuse from patients/public (% staff experiencing from patients, relatives or the public in last 12 mths)

#### Significantly worse than:

- 2022 Trust score for ethnic diverse colleagues
- 2022 and 2023 national score for ethnic diverse colleagues
- 2022 and 2023 Trust and national scores for white colleagues

In the 2023 WRES (2022 staff survey), we saw a significant increase (10.4 % points) in ethnic diverse staff experiencing harassment, bullying and abuse (HBA) from service users and the public (from 30.1% to 40.5%).

That's much worse than the score for our white staff (13.5% points difference), and significantly worse than the comparator figure for mental health Trusts (31.5% for ethnic diverse colleagues nationally).



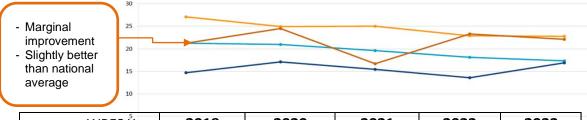
WRES Year	2019	2020	2021	2022	2023
NSCHT BME %	54.5	42.0	27.3	30.1	40.5
NSCHT White %	27.4	29.9	27.6	29	26
National BME %	32.8	35.5	32.1	31.8	31.5
National White %	27.5	27.6	25.4	26.1	25.4
NSCHT BME responses	33	50	55	73	84
NSCHT White responses	740	723	867	967	1127

Figure 15 HBA by Patients & Public: Trust & national performance 2019-2023

#### Indicator 6: Harassment, bullying and abuse from staff (% of staff experiencing harassment bullying and abuse from staff)

In 2023 WRES (2022 Staff Survey), we saw a slight improvement (1.2 % points) in the measure of ethnic diverse colleagues experiencing HBA from staff. In this period, the corresponding figure for white staff worsened by 3.3 % points) closing the gap in experience between the two groups somewhat (but still skewed against ethnic diverse colleagues). The score for ethnic diverse staff is marginally better / broadly comparable to the national score.

We continue to encourage staff to report incidents of racial abuse and bullying of all kinds. We continue to promote our Freedom to Speak Up process, in addition to our other employment relations routes for raising concerns.



WRES Year	2019	2020	2021	2022	2023
NSCHT BME %	21.2	24.5	16.7	23.3	22.1
NSCHT White %	14.7	17.1	15.4	13.6	16.9
National BME %	27.1	24.9	25.0	22.9	22.8
National White %	21.2	21.0	19.6	18.1	17.3
NSCHT BME responses	33	49	54	73	86
NSCHT White responses	736	720	869	966	1126

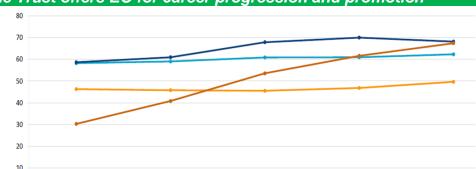
Figure 15 HBA by Staff: Trust & national performance 2019-2023

### Indicator 7 - Belief in Equal Opportunities (EO) - % of staff who believe the Trust offers EO for career progression and promotion

It is pleasing to see that perceptions of equal opportunities of Trust ethnic diverse colleagues continued to again improve to the 2023 position, which is almost the same as for white colleagues - now within 1% point difference - following a slight reduction in perceptions by white staff. This marks a significant and sustained improvement over time since 2019.

The Trust's score on this measure in 2023 is much better than the comparative national score for ethnic diverse colleagues and significantly better than that for white staff nationally

- Further improved
- Trust ethnic diverse and white staff scores almost the same
- Significantly better than national comparator



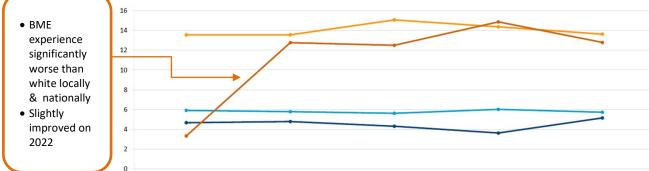
0					
WRES Year	2019	2020	2021	2022	2023
NSCHT BME %	30.3	40.8	53.6	61.6	67.4
NSCHT White %	58.7	61.0	67.9	70.0	68.2
National BME %	46.3	45.8	45.5	46.8	49.6
National White %	58.3	59.0	60.9	61.0	62.3
NSCHT BME responses	33	49	56	73	86
NSCHT White responses	738	720	866	964	1128

Figure 17 Belief in Equal Opportunities: Trust & national performance 2019-2023

#### Indicator 8 - Experience of discrimination at work in the last 12 months

In the 2023 WRES (2022 staff survey), we marginally improved our position on BME staff reporting discrimination by their manager or team leader. We have seen relatively steady performance since 2020 (much better than 2019, which is considered an anomaly). Unfortunately, there is a large and continuing gap in the experience between ethnic diverse and white staff (7.6 percentage points), but this gap has closed slightly since 2022.

We seek to ensure a positive working environment and working relationships which enable all individuals to perform to their best. We will continue to work to create a culture in which all colleagues feel supported equitably and in which race discrimination is stamped



WRES Year	2019	2020	2021	2022	2023
NSCHT BME %	3.3	12.8	12.5	14.9	12.8
NSCHT White %	4.7	4.8	4.3	3.6	5.2
National BME %	13.6	13.6	15.1	14.4	13.6
National White %	5.9	5.8	5.6	6.0	5.7
NSCHT BME responses	30	47	56	74	86
NSCHT White responses	727	710	858	964	1125

Figure 18 Experience of discrimination: Trust & national performance 2019-2023

#### Indicator 9: Trust BME Board membership

2023	White headcount	Ethnic Diverse headcount	White %	Ethnic Diverse %
Executive Directors	5	2	71.4%	28.6%
Of which: Voting members	3	2	60%	40%
Non-Executive	7	none	100%	none
Of which: Voting members	6	none	100%	none
Total board members	12	2	85.7%	14.3%

Figure 19

- Ethnic diverse board headcount has reduced to 2 (from 3) members (both exec team).
- Remains high executive / voting member ethnic diverse representation
- Still no ethnic diverse NED members

NOTE: The above 2023 data does not include executive roles (x2) seconded to the Integrated Care Board (ICB).

		<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2022</u>
BME board	National WRES report	7.1%	7.0%	7.4%	8.4%	10%	12.6%	13.2%	To be published early 2024
membership	NSCHT performance	7.7%	7.7%	15.4%	14.3%	23.1%	21.4%	20.0%	14.3%
		Better than average	Anticipated average.						

Figure 20

The Trust is proud to have strong ethnic diverse representation at Board level compared to our local population and to be one of the few Trusts nationally with black CEO and medical directorship. Overall, the board membership is 14.3% ethnic diverse (2 members of the board team), which exceeds the local population rate (11.17%). This figure fell from 20% in 2022, when there were 3 ethnic diverse board members. It is noted the board membership does not include any Asian or other ethnic identity. The Trust's Board members have again proudly demonstrated outstanding passion and commitment for inclusion, on the local and national stage.

It is again noted that currently there is no ethnic diverse representation in the Trust's non-executive directors. Our NEDs are an important source of oversight, challenge and scrutiny for Trust decisions and in assuring quality of health service provision on behalf of a diverse population. It remains a priority to seek to appoint ethnic diverse talent to our NED team when a vacancy arises.

#### 4.0 WHAT HAVE COMBINED BEEN DOING TO ADVANCE THE WRES OVER THE PAST 12-18 MONTHS?

Inclusion is increasingly key to how we work at Combined. It is no coincidence that the first section of our Combined People Plan 2023-28 is devoted to being **Inclusive and Representative** (see Figure 18), specifically stating our ambition to be inclusively representative of our communities through:-

- Celebrating & recognising diversity
- Developing a culture of justice, belonging & inclusivity
- Representative of our diverse communities at every level

Working to advance ethnic diversity and race inclusion has continued to be a high priority for the Trust and we have continued to take a high-profile and multifaceted approach to delivering on this specific agenda. Key work programmes to advance race inclusion through 2022-23 were as below (for detail, see *Appendix 3*).



Figure 21: Combined People Plan 2023-28 at a glance summary

- Inclusion Council
- The RACE Code
- Inclusion School
- Comfortable Being Uncomfortable with Race and Difference cultural education programme
- Inclusive Talent Management programme
- Leadership Development
  - New Futures (formerly Stepping Up
  - Developing Aspirant Leaders
  - High Potential Scheme
  - o Connects leadership programme
  - Trust Leadership Academy
- ENRICH Staff Networks
- Inclusive Trailblazers Project (Specialist Directorate)

#### 5.0 WRES ACTION PLANNED FOR 2023-24

Key areas for action facilitating continued improvement across the 9 WRES indicators in 2023-24 are outlined below.

WI	RES Action Priorities 2023-24	Train	Retain	Reform
1.	To further extend our work to debias our employee relations and talent management processes to achieve a position where our ethnic diverse workers are as likely to access development and advancement as their white counterparts	<ul> <li>Extend inclusive recruitment training to more colleagues involved in R&amp;S</li> <li>Autumn practical workshop led by recruitment lead – attendance or representation required</li> <li>Reciprocal Mentoring cohort 2 delivery</li> <li>WRES Champions Programme delivery</li> <li>See Me First Badges and approach</li> </ul>	<ul> <li>Creating a culture of inclusion &amp; belonging:</li> <li>Roll out Inclusive Just and Fair Culture of Civility &amp; Respect change programme</li> <li>Roll out RACE Code Action Plan antiracism change programme</li> <li>Work to deliver WRES aspirational targets over 2 years (30% progress Yr 1)</li> </ul>	<ul> <li>Review &amp; overhaul R&amp;S, disciplinary and speaking up processes based on learning in 'No More Tick Boxes' (Kline 2023) and M Cox tribunal learning</li> <li>Reinvent our diverse and inclusive portrayal of the organisation to the public</li> <li>International recruits same development opportunities as others</li> </ul>
2.	Seek opportunities to understand, engage, develop and progress our ethnic diverse talent at every level (including bank workers) to achieve an equitable workforce profile across levels and staff groups by 2025-26.	<ul> <li>Positive action in R&amp;S for all roles where ethnicity is under-represented</li> <li>Target under-represented groups in local community improving rect opportunities at every level from entry via career pathways / apprenticeships / GMTS</li> </ul>	<ul> <li>Urgent work to improve corporate and non-clinical (including NED) workforce ethnic diverse representation needed in 2023-24</li> <li>Talent management plan for exec and snr teams to address lack of diversity</li> </ul>	<ul> <li>'Inclusive by design' R&amp;S and talent management processes</li> <li>Assessing and addressing attainment and progression gaps for our ethnic diverse workforce talent pipeline (students, preceptees, established wf)</li> </ul>
3.	Take steps to end violence and aggression, and harassment, bullying and abuse against our ethnic diverse workforce	<ul> <li>Ongoing leadership development and education in support of our culture of inclusion</li> <li>Wider development and awareness raising on inclusion</li> </ul>	<ul> <li>Project to deliver 20% improvement in V&amp;A / HBA incidents against our ethnic diverse colleagues in year (RB)</li> <li>Enhanced visibility of our anti-racism stance and zero tolerance to racist abuse</li> </ul>	<ul> <li>Directorates to plan to highlight and target key services for action on reduction of violence, aggression and HBA (applying 80:20 rule)</li> </ul>
4.	Make EDI and race inclusion everyone's business – and make it demonstrable and sustainable	Continue to educate on inclusion: Inclusion School Weekly Newsround Trust / system leadership programmes and positive action programmes Inclusion awareness days and events celebrated and used as education opportunities	<ul> <li>Enhance our Flexible Working Offer with specific focus on staff in minoritized groups</li> <li>Board members to demonstrate improvements in culture through data and lived experience</li> <li>Further embed role and impact of ENRICH network and other staff networks</li> </ul>	<ul> <li>Implement and embed the NHS EDI High Impact Actions and the RACE Code governance framework over a period of 2 years</li> <li>Introduce quarterly Trust &amp; Directorate EDI metrics to show progress in race inclusion (RAG rated) from Q3 – based on NHS EDI Improvement Plan metrics – build in accountability for elevating equity through directorate leadership</li> </ul>
5.	Directorates and services to work to close the remaining gap in declaration of ethnicity across the Trust	Leaders & colleagues at every level to understand WHY we should ask about ethnicity, religion etc and HOW to ask in an appropriate & sensitive way	Line managers to ensure they have regular conversations on inclusion & wellbeing with team, group and individual staff members, demonstrating compassionate inclusive leadership.	Analyse and publish 1st Trust Ethnicity Pay Gap and action plan in 2023-24

#### 6.0 CONCLUSIONS AND RECOMMENDATIONS

The need for deep-seated cultural change in the NHS on race inclusion is now well recognised as being key to avoiding putting ethnic diverse service users and colleagues at risk (Adebowale, 2022). The need to develop greater race inclusion and equality remains both an immediate and a long-term challenge for Combined Healthcare. Our people need a compassionate and inclusive culture of fairness, civility and respect; an organisation where all colleagues feel looked after, valued and have a sense of belonging.

The Trust has made significant strides to progress our inclusion agenda (and specifically on our race inclusion programme) during the past 12-18 months. Tangible progress has been made as demonstrated in this report. However, collectively as individuals, as an organisation and working as a system we need to continue our journey with passion and impact to address the societal, historical, cultural and organisational factors which culminate in our ethnic diverse workforce (and service users) continuing to experience poorer employment prospects and experiences than their white counterparts on a range of indicators (particularly experience of harassment, bullying and abuse and discrimination at work).

We have been building on and educating for our culture of inclusion as a Trust and leading on much of this work on behalf of our system. Specifically, our Inclusion School approach, our Comfortable Being Uncomfortable programme, our New Futures programme and Stepping up Alumni, our High Potential Scheme approach and our Connects leadership programme. Many of these will continue in 2023-2024.

We are committed to delivery of our detailed programme of action on The RACE Code governance standard, also incorporating increased visibility on anti-racism, zero tolerance of racist violence and abuse and See Me First badges, from board to ward and all services of the Trust.

Our work on developing workforce race inclusion over the past 2 years has gained regional and national recognition. Our sustained focus and drive for continuous improvement on inclusion for all will take us to the next stage in our ambition of delivering outstanding inclusion in 2023-24. Increased Directorate accountability for improving inclusion through monitoring of evidence-based measures known to elevate equity.

Board members, the Trust Senior Leadership Team (SLT) and members of the People and Culture Development (PCD) Committee are asked to:-

- 1. Note the progress with our 2022-23 WRES actions and journey
- 2. Approve this 2023 WRES report and Action Plans for 2023-24 for publication with the WRES Team, on the Trust's website and sharing with our lead commissioners
- 3. Note that personal and team action will follow from the broad action plans outlined in the report and undertake to take personal responsibility for delivering against these within own area of responsibility as these actions emerge
- 4. Continue to act as active ambassadors of race inclusion and to champion an inclusive and anti-racist culture for the ongoing development of tangible and measurable change on race equality and inclusion and taking personal responsibility for developing cultural competence with regard to race inclusion.

  END

#### APPENDIX 1: Trust Medical WRES (mWRES) data 2023 – First Year of Submission

**Medical Workforce Ethnicity Profile** 

Data collection categories and sub-categories		2022/23										
	Black	White	Asian	Other	Not known							
Medical directors	1											
Clinical directors (directors of clinical teams)		3	1									
Consultants	1	8	11	1	2							
SAS			; ;									
Locally Employed Doctor (LED)												
Doctors in postgraduate training	5	5	7	2								
All other medical and dental staff	4	8	7	1	2							
Total Medical Staff	11	27	26	4	4							

#### **Consultant Clinical Excellence Awards**



#### **Consultant Recruitment 2022-23**



# APPENDIX 2: Bank WRES – first year of submission

		v	Vhite	:				ı	Ethn			1	_		ı					White						Ethn		verse							
	All bank staff in the last 12 months	I			I	Miz	xed		А	sian oı Briti		1		k or Bla British		Othe Ethn Grou	nic	þe				ı	Mix	ed		А	sian o Brit		n		k or B British		Oth Eth Gro	nic	
		British	Irish	Any other White	White and Black	White and Black	White and Asian	Any other mixed	Indian	Pakistani	Bangladeshi	Any other Asian	Caribbean	African	Any other Black	Chinese	Any other ethnic	Not stated	British	Irish	Any other White	White and Black	White and Black	White and Asian	Any other mixed	Indian	Pakistani	Bangladeshi	Any other Asian	Caribbean	African	Any other Black	Chinese	Any other ethnic	Not stated
	Under band 1																																		
U	Band 1																																		
Non-clinical AfC	Band 2	1																	3																
inica	Band 3																																		
n-c <u>li</u>	Band 4																																		
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	Band 6 Band 7 and above									1									2								1								
	Under band 1 Band 1																																		
ပ	Band 2																												1						
Clinical AfC	Band 3	1 1		1		2			2	3				1 8			1	1	87	1	3		1	1			2	1	1		1 1	1		1	2
inica	Band 4													0																	1				
ਹ	Band 5	3													1				18					1											2
	Band 6	1												1			1		12												1				1
	Band 7 and above	1																	2																
Med	dical & dental																																		
		17	0	1	0	2	0	0	2	4	0	0		19	1	0	2	1	124		3	0	1	2	0	0	3	1	2	0	12	1	0	1	5
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#### **APPENDIX 3**

#### Key work programmes to support delivery of progress against the 9 WRES indicators

- Inclusion Council Chaired by the Chief Executive, this diverse group meets bi-monthly to discuss and develop inclusion practise across the Trust. Our RACE Code Project (see below) and our Inclusive Recruitment and Development Project, and oversight of WRES progress are areas overseen by this group.
- The RACE Code The Trust committed to becoming an anti-racist organisation during 2022-23 and has a detailed action plan to make this a reality over the next 2-3 years, overseen by our Inclusion Council and People and Cultural Development Committee, using the detailed and evidence-based RACE Code governance framework.
- Inclusion School Led by the Trust for the local ICS, Inclusion School aims to influence and change behaviours through a 'show not tell' approach, based on powerful personal stories and conversation. Our Inclusion School journey continued through 2022-23, including a session on Progressing the RACE Code in January 2023 and a full day session with Roger Kline, built around Roger's No More Tick Boxes approach to recruitment and other people processes in April 2023.
- Comfortable Being Uncomfortable with Race and Difference This cultural education programme is designed to create genuine culture change by challenging institutional and individual biases and micro-aggressions and incivility, encouraging leaders and other colleagues to have challenging and uncomfortable conversations on race.
- Inclusive Talent Management: programme of developments to enhance inclusive progression for all our employees, including a specific focus on supporting development and performance of ethnic diverse colleagues at every level. Dual focus on providing support to ethnic diverse colleagues whilst supporting the wider development of the organisation to create an appropriate environment in which our ethnic diverse colleagues can thrive and progress.

#### Leadership Development

New Futures (formerly Stepping Up) - The Trust has led on delivering a 5<sup>th</sup> cohort of this positive action development programme for aspirant leaders with ethnic diverse heritage from across the system. A further 38 system colleagues, including 2 Trust colleagues, have participated in New Futures 2023 and also gained access to a range of other personal development opportunities with a view to being 'ready now' when progression opportunities arise. We continue to work to monitor and support the development and progress of all our New Futures/Stepping Up alumni.

- Developing Aspirant Leaders The Trust now has an alumni of 3 individuals (of 6 total from our ICS) who have completed this
  regional NHS positive action on race leadership programme. Participants join our New Futures/Stepping Up and wider Trust and
  ICS Leadership Alumni.
- High Potential Scheme the Trust is leading on the delivery of the second cohort of this scheme for aspirant NHS directors.
   Inclusion has been built in by design through this programme at every stage, with 13.5% of participants going through the second cohort having ethnic diverse identity (18% in cohort 1; target for both cohorts 20%).
- Connects leadership programme as with the HPS, inclusion is built in by design through this local first-line general leadership development programme for junior - middle managers. Includes module on Creating Inclusive Cultures and Inclusive Recruitment.
- Trust Leadership Academy continued focus on inclusive leadership within our regular Leadership Academy sessions to keep
   Trust leaders updated and engaged on important topics
- ENRICH Staff Networks The Trust has worked to further embed and increase the impact of our ENRICH Network and also to encourage and support participation at our ICS ENRICH. Our Chief People Officer acts as Executive Sponsor to this network and demonstrates great passion, drive and commitment for creating greater race inclusion. Our Chief Nurse has also acted as executive sponsor for our ENRICH lead through her 12 month journey on the Developing Aspirant Leaders programme.
- Inclusive Trailblazers Project (Specialist Directorate) A senior leader in our Specialist Directorate is working in conjunction with People Team colleagues to develop and deliver a project on becoming a trailblazer on inclusive recruitment, talent management and disciplinary processes.

#### **APPENDIX 4**

#### NSCHT WRES ACTION PLAN 2022-23 - Progress Report

WR	RES ACTION PLAN 2022-	<b>WRES</b>
<u>23</u>		<u>Inds)</u>
1.	Strong, visible & personal Trust Board and senior leadership on race inclusion (Inds 1,7,8)	1, 7, 8
2.	Commence our journey and development of supporting actions to deliver our accreditation against 'The Race Code' and as an antiracist organisation: (Inds 1,7 & 8)	1, 7, 8
3.	Consider 'See Me First' NHS Race Badge scheme – currently being explored (Inds 5 & 6)	5 & 6
4.	Continuing Inclusion School journey, including further race-focussed sessions to run in 2022/23 (Inds 1, 2, 7 & 8)	1,2,7,8

প্রভাৱ বিশ্ব প্রভাৱ বিশ্ব (carry forward for 2023-24)

#### **ACHIEVED**

Visible leadership from our Executive Team on Race Inclusion, particularly the work of our Chief People Director, Chief Operating Officer and our CEO. Inclusion School on becoming anti-racist hosted by Buki and Paul 8<sup>th</sup> Feb 2023.

## For 2023-24

Board

SLT members

Chief

People Officer

D&I Lead

D&I Lead

Inclusion

Council

Chief

People

Officer

D&I Lead

&

Continue to increase this and seek visible leadership from across the Trust Board portfolio on race.

#### **ACHIEVED**

- RACE Code Assessment complete October 2022
- Feedback received November 2022
- Inclusion School on RACE Code / anti-racism held Feb 23
- Response submitted March 2023
- Accreditation awarded March 2023
- Action plan developed for next 12 months March 2023
   For 2023-24 Action Plan & Programme delivery

#### **ACHIEVED** - to progress in 2023-24

- Scheme approved for application across Trust and wider system March 2023
- Badges purchased March 2023

For 2023-24

To develop implementation & comms plan & launch – Oct 2023

#### **ACHIEVED**

### Successful Inclusion schools held on:-

- Inclusion & Intersectionality: The Big Questions with John Amaechi, May 2022, and
- RACE Forward: Your role in creating an antiracist ICS, Feb 2023

#### For 2023-24

20 April 2023 – Inclusion School Extra with Roger Kline: No More Tick Boxes: Putting EDI at the heart of our People and Processes - focus on inclusive recruitment, career progression and disciplinaries

5.	Continue to develop and embed the role and impact of our <b>Trust staff networks</b> (specifically ENRICH) as well supporting and contributing to the development of our system level networks (Inds 1, 2 & 7)	1,2,7
6.	Continue the role of the Inclusion Council. Complete review and refresh of Inclusion Council projects for 2023 (inclg Culture of Civility & Respect and Inclusive Recruitment projects) (Inds 1, 2, 3 & 7)	1,2,3,7
7.	Continue our <b>High Potential Scheme</b> , supporting the development of a diverse cohort of aspirant senior leaders through the first 2 cohorts of this flag-ship programme (Inds 1 & 2)	
8.	Continue to support and track progress of New Futures & Stepping Up alumni, exploring the possibility of a further cohort in 2022-23 (Ind 1 & 2)	
9.	Continue promoting development opportunities, coaching and	

#### **ACHIEVED**

 Dedicated (paid) time – 2 days per month per network – of network lead throughout 2022-23 for first time; Executive sponsorship for each network

D&I Lead with Network Leads

Chief

People Officer Inclusion D&I Lead • Regular ENRICH meetings held. System ENRICH mtgs held bimonthly in addition

For 2023-24

Review arrangements for 2023-24. Network sponsors undertaking development re their network roles

#### **ACHIEVED** and ongoing

- Review of projects complete
- Bi-monthly meetings continued throughout 2022-23
   Ongoing in 2023-24

#### **ACHIEVED**

- Diverse 2023 cohort selected
- Inclusion again a core feature of the application and selection approach
   For 2023-24

Associate Director of OD (JR)

Delivery of programme for 2023 cohort
 Ongoing support, devt. & tracking (both cohorts) via leadership alumni

#### **ACHIEVED / ONGOING**

- 2023 cohort selected and commenced 29th March
- Pleasing number of 2022 cohort reporting career advancement

D&I Lead

Lead,

For 2023-24

Detailed review of progress of each candidate with tailored support offered as appropriate

# Education Lead. D&I • Regular sharing of d

 Regular sharing of development opportunities (vacancies, secondments, acting up etc) via ENRICH distribution and Newsround

	mentoring, talent management and support, with specifically focus on those with ethnic diverse heritage (I.4)	
10.	Deliver second cohort of Reverse / Reciprocal Mentoring including race as a key characteristic for reverse mentors (Inds 1,7,9)	
11.	Extending the focus on the appointment, retention and advancement of people of colour at every level, including student, bank, preceptor and substantive roles and developing the talent pipeline at every step through optimising use of apprenticeships and new roles (such as Nursing Associate roles). (Inds 1,2,9)	
12.	Develop core action on the WRES in conjunction with system partners as a local Integrated Care Board. (As applicable)	

Talent Mgt Lead

Chief

People Officer (via Baz Kaur, for system)

Chief

People Officer

- Sharing of leadership development opportunities via staff networks Feb 2023
- Cohort 5 New Futures
- Registered with 10,000 black interns project, but unfortunately no interest received For 2023-24
- Re-register with 10,000 black interns with increase in offer of opportunities
- #InclusiveHR project 5 step Challenge to Change framework
- Inclusion Trailblazer project Specialist Directorate
- Increased focus on development of New Futures line managers
- Developing Me, Developing You programme

#### DELAYED

Now due for delivery from October 2023 due to issues with provider capacity - carry forward

#### ONGOING

- Batch recruitment for all Band 3 and Band 5 HCSE and Nursing posts
- Diverse panel for selection interviews for all band 7 + posts and as many as possible below band 7 in place (rec for shortlisting also)
- Focus on inclusion in Trust recruitment events and campaigns
- Inclusion Trailblazer project approved, specialist directorate, March 2023 For 2023-24
- Seek opportunities to develop ethnic diverse Non-Exec talent pipeline and to be spoilt for choice with high quality ethnic diverse applications when next vacancy arises
- Monitoring of application of diverse shortlist requirement reporting to PCDC

#### PART ACHIEVED

- Increasingly greater partnership working on EDI
- Shared work on: New Futures, Comfortable Being Uncomfortable with Race, Inclusion D&I Lead ● Schools, Connects Leadership (including high priority focus on Inclusion), Inclusive Recruitment, WREI and much more. All system partnerships working on RACE Code commitment and action plan.

For 2023-24 – system orgs to work together on shared core elements of WRES plans