



REPORT TO PEOPLE, CULTURE & DEVELOPMENT COMMITTEE

Enclosure No:-6

Date of Meeting:	SLT (August 2021), Trust Board (September 2021), PCDC (4 October 2021)				
Title of Report:	Workforce Race Equality Standard (WRES) Report and Action Plan				
Presented by:	Lesley Faux, Diversity & Inclusion Lead				
Author:	Lesley Faux & Amanda Boyd				
Executive Lead Name:	Shajeda Ahmed	Approved by Exec			

Executive Summary:		Purpose of report	
This is the Trust's sixth annual Wi	RES report. Since April 2015, all NHS organisations were	Approval	
	e nine point WRES metrics. This report sets out the Trust's	Information	
	ES indicators over 2020-21, along with our action plan for the	Discussion	\boxtimes
	sured that we are generally making tangible and measurable	Assurance	\boxtimes
ı · · · ·	ors, and have laid solid foundations for further improvement,		
to support acceleration in the pace			
Seen at:	SLT	Document	
0:	Date: 31.08.2021	Version No.	
Committee Approval / Review	Quality Committee		
	Finance & Resource Committee		
	Audit Committee		
	People, Culture & Development Committee		
	Charitable Funds Committee		
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Strategic Objectives	We will attract, develop and retain the best people		٦
(please indicate)	We will actively promote partnership and integrated		J
	3. We will provide the highest quality, safe and effecti		
	4. We will increase our efficiency and effectiveness the	irough sustainable	
	development 🖂		
Diak / local implications:	Appual WDEC reporting forms part of the NUC Ctandard	Contract since 2015	
Risk / legal implications: Risk Register Reference	Annual WRES reporting forms part of the NHS Standard Our WRES report and action plan each year are published.		and
Nisk Register Reference	Our WRES report and action plan each year are published data shared with NHS England and our lead commission		anu
Descures Implications:	data shared with NHS England and our lead commission	U I	
Resource Implications: Funding Source:	Within existing resources N/A		
Diversity & Inclusion Implications:	The WRES is specifically designed to support greater d	iversity and more nos	citivo
(Assessment of issues connected to the	inclusion experiences across NHS workforces, particularly		
Equality Act 'protected characteristics'	greater race equality. As such, a positive effect is intended		
and other equality groups). See wider	to employment and promotion opportunities, better workpla	•	
D&I Guidance	staff, and a more diverse workforce with regard to ethnicit	•	
	make diverse and inclusive experiences for our service use	•	20 10
ICS Alignment / Implications:	All NHS Trusts are required to participate in the WR		are
3	opportunities for the alignment of activity under the WRES	•	
	this will be explored by the EDI Network.		
Recommendations:	1. Note the progress with our 2020-21 WRES actions and	d journey, as set out al	oove
	and at Appendix 1.	, ,,	
	2. Approve this 2021 WRES report and Action Plan for	2021-22 (Appendix 2) for
	publication with the WRES Team, on the Trust's websit	e and sharing with our	lead
	commissioners.	-	
	3. Continue to act as positive Ambassadors and champion		
	culture for the ongoing development of tangible and m	neasurable change on	race
	equality and inclusion.		
Version	Name/group Date issued		
DRAFT 1			





Workforce Race Equality Standard (WRES) Trust Report 2021 & Action Plan for 2021-22

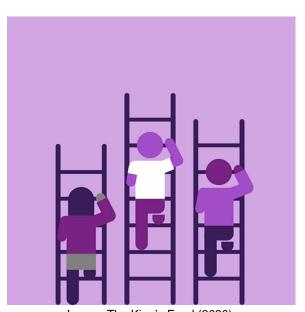


Image: The King's Fund (2020), Workforce race inequalities and inclusion in NHS providers

Date: September 2021 (final amendments 05.10.21)

Authors: Lesley Faux, Diversity & Inclusion Lead

Amanda Boyd, OD Practitioner (Talent Bank)

Lead Director: Shajeda Ahmed, Director of People, OD & Inclusion





NSCHT Workforce Race Equality Standard (WRES) Report 2021

Introduction

The Workforce Race Equality Standard (WRES) was introduced in April 2015 and mandated as annual part of the NHS Standard Contract. Implementation of the WRES is a requirement on both NHS commissioners and NHS provider organisations.

The WRES is a key component in how the Trust works to deliver tangible and lasting improvement on race inclusion, also supporting how as an organisation we deliver on our obligations under the Public Sector Equality Duty (PSED) to:

- i. **Eliminate unlawful discrimination**, harassment and victimisation and other conduct prohibited by the Act.
- ii. **Advance equality of opportunity** between people who share a protected characteristic and those who do not.
- iii. **Foster good relations** between people who share a protected characteristic and those who do not.

The WRES ultimately supports the Trust to increase its diversity and inclusivity enabling us to deliver services for all people within our communities. It is not possible to deliver safe, personalised, accessible and recovery-focussed services if we are not diverse and inclusive.

This report contains the Trust's sixth annual WRES report which 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.

The key purposes of the WRES are to:

- 'hold a mirror up to the NHS and spur action to close gaps in (established and persistent) workplace inequalities between our black and minority ethnic (BME) and white staff'
- prompt inquiry and assist organisations to develop and implement evidence-based responses to the challenges their data reveal
- complement national NHS workforce policy on diversity and inclusion, and support delivery of national policy frameworks, recently including the NHS People Plan (2020)

WRES Reporting Requirements

NHS Trusts produced and published their first WRES baseline data in July 2015. Since then, NHS England have published a number of reports sharing updates on the WRES data nationally, and also offering guidance and advice on what constitutes effective action. These reports can be accessed here. Trusts are required to submit and publish two documents to Commissioners and NHS England to comply with the WRES:

- 1. NSCHT spreadsheet data set
- Complete data uploaded to NHS England
- A WRES progress report and Action Plan to be published on the Trust's website by 30/9/2021
- This report when finalised and agreed at PCD Trust Board. Including action plan progress (Appendix 1) and 2021-22 action plan (Appendix 2)

The above information will be published on our Trust website and will also be shared with our lead commissioners.





Notes on terminology

Black, Asian and Minority Ethnic (BAME)

The term Black, Asian and Minority Ethnic (BAME) will be used throughout this report as this is widely used in the UK and is the Trust's preferred term, felt to be more inclusive and representative of our local BAME population (overtly recognising our Asian ethnicity population). The term Black and Minority Ethnic (BME) is used where this is quoted by the WRES Team as this remains the term used by that team, having been used since the inception of the WRES. Race terminology has been extensively debated at national level in 2021 and the NHS Race Observatory recently conducted a survey around preferences on this. We await further guidance on the recommended terminology to be used going forwards.

WRES Aspirational Targets

In addition to the usual annual WRES process and national annual report, late in 2019, the WRES Team issued each Trust with a bespoke set of 'aspirational targets' for year-on-year improvement in the BAME representation in senior posts (band 8A and above). These targets seek to attain a minimum of 7.6% (local BAME population in 2011 census) in each senior band/grade by end of March 2028. Progress with these aspirational targets would form part of the appraisal of every Trust CEO from 2020-21 onwards.

Race Disparity Ratio

Introduced in 2021, supplementing the WRES Aspirational Targets. Considers all bandings and assesses whether BAME representation is equitable in 3 different 'clusters'.

Workforce Race, Equality and Inclusion Strategy

Launched in early 2021 to supplement the WRES process and accelerate progress in the Midlands NHS regions. Specifically requires Trusts and systems to develop and deliver against a 'High Impact Action Plan on Recruitment' as a key means to delivering BAME inclusion.

Equality Network for Race Inclusion and Cultural Heritage – ENRICH

New name for the Trust's BAME Staff Network





WRES Key Findings

Indicator 1 – Workforce profile: BAME representation through the organisation

136 (8.2%) of our workforce is from a BAME background (8.4% if ethnicity not known is included). This is an increase of 0.8% from 2020.

When medical staff are excluded our BAME workforce profile reduces to 6.2% (5.7% in 2020). This is the first year that our BAME workforce has exceeded the *currently available* local population figure of 7.6% based on the 2011 census. It is important to note that public health epidemiologists predict the 2021 census data will show growth in the local BAME population. The expected publication date is March/April 2022.

The national 2020 WRES report states that the NHS has an overall BAME workforce of 21%. The WRES national target for BAME representation is 19% across all pay grades. For Combined Healthcare, this currently translates to 7.6% as the local resident population (based on 2011 census).

The national WRES reports states that Trusts must do more to improve their talent pipeline if they are to achieve the model employer ambitions.

It is seen from the below that, whilst progress has been made, the Trust still under-represents for BAME workforce in almost every banding (exceptions are band 5, VSM and medical).

Workforce Band			Not	Total in			
Buria	White	BAME	known	Band	White	BAME	Not Known
		He	adcount			Percentag	ge in Band
Under							
Band 1	14	1	1	16	87.5%	6.3%	6.3%
Band 1	3	0	0	3	100.0%	0.0%	0.0%
Band 2	97	6	1	104	93.3%	5.8%	1.0%
Band 3	343	25	23	391	87.7%	6.4%	5.9%
Band 4	134	6	3	143	93.7%	4.2%	2.1%
Band 5	205	30	5	240	85.4%	12.5%	2.1%
Band 6	339	15	2	356	95.2%	4.2%	0.6%
Band 7	181	12	2	195	92.8%	6.2%	1.0%
Band 8a	75	5	2	82	91.5%	6.1%	2.4%
Band 8b	35	1	0	36	97.2%	2.8%	0.0%
Band 8c	18	0	1	19	94.7%	0.0%	5.3%
Band 8d	6	0	0	6	100.0%	0.0%	0.0%
Band 9	1	0	0	1	100.0%	0.0%	0.0%
VSM*	5	2	0	7	71.4%	28.6%	0.0%
Medical*	24	33	4*	61	39.3%	54.1%	6.6%
TOTAL	1480	136	44	1660	89.2%	8.2%	2.7%

The RAG rating in the table above relates to over/under representation for BAME in comparison to the local population (7.6% BAME as per 2011 census).

^{*}Please note our Medical Director is included in the Medical Workforce as per our data submitted in the National WRES template.





What we have done to improve this indicator?

 Our substantial work developing our culture of Race Inclusion at Trust and system levels, through multiple approaches throughout 2020-21, appears to now be having a tangible impact on our workforce make-up (whilst we still have much more to do to be representative in all bandings and in all staff groups). These interventions include:

Strong, visible and personal board leadership on race inclusion

- Inclusion School sessions
- o Board Development sessions
- Leadership Academy session on Let's Talk About Race (August 2020)
- o Trust general weekly and monthly communications (staff and public/external)
- Trust Committee discussions
- Inclusive Recruitment project progression
- Culture of Inclusion project progression
- Continued development of BAME Staff Network (now called ENRICH Equality Network for Race Inclusion and Cultural Heritage)
- 6 new BAME Freedom to Speak Up Champions have been appointed, trained and are now active

Indicator 2

Recruitment: relative likelihood of white applicants being appointed from shortlisting across all posts compared to BAME

	WRES	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>
<u>Indicator</u>	Year:						
2. Relative	<u>National</u>						<u>Published</u>
likelihood of	WRES	1.57	1.60	1.45	1.46	1.61	Feb 2022
<u>white</u>	report						
applicants	NSCHT						
<u>being</u>	performance						
appointed							
<u>from</u>		2.66	1.20	1.96	2.07	1.89	1.30
shortlisting		Worse	Better	Worse	Worse	Worse	
across all		than	than	than	than	than	
posts		average	average	average	average	average	
compared to							<u>Big</u>
BME							<u>Improveme</u>
<u>applicants</u>							

WRES recruitment scores 2016 – 2021 (Trust scores compared with national average)

[a score of one would mean equal access to recruitment appointments; a score greater than one means outcomes skewed in favour of white applicants]

The relative likelihood of White staff being appointed compared to BAME staff is **1.3** for 2020-21. As an improvement from 1.89 in 2019/20 report it demonstrates a significant positive shift.

The 2021 WRES national likelihood figure will not be published until February 2022. However, when compared with the national figure for 2020, our performance is 0.31 better than nationally for that year. This is expected to be better than average and we expect to be in the top quartile with this figure when next year's report is published.

Our 2020-21 recruitment data is detailed in the table on Page 7.





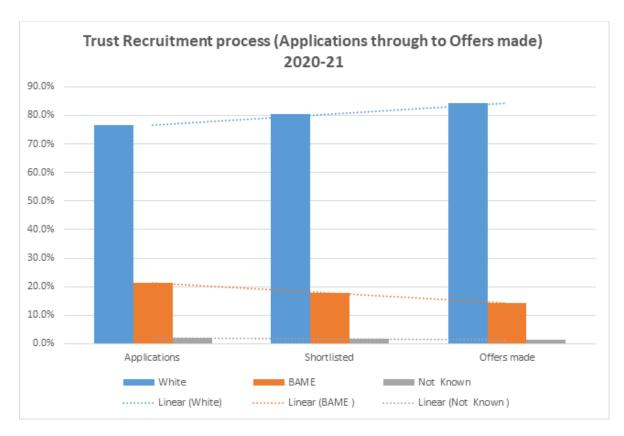
Trust Recruitment Data by Ethnicity 2020-21

Trust WRES recruitment data by ethnicity APRIL 2020 - MARCH 2021 (2019-20 data in brackets)	<u>Applications</u>	Shortlisted*	Offers made*
White - all white backgrounds	5878 (4383)	1467 (1815)	391 (351)
BAME - all BAME & mixed heritage	1646 (1203)	322 (439)	66 (45)
Not known / Not stated	153 (95)	34 (41)	6 (7)
Total	7677 (5681)	1823 (2295)	463 (403)

Trust WRES recruitment data APRIL 2020 - MARCH 2021	Applications <u>%</u>	Shortlisted* <u>%</u>	Offers Made* <u>%</u>
White - all white backgrounds	76.6% (77.2%)	80.5% (79.1%	84.4% (87.1%)
BAME - all BAME & mixed heritage	21.4% (21.2%)	17.7% (19.1%)	14.3% (11.2%)
Not known	2.0% (1.7%)	1.9% (1.8%	1.3% (1.7%)
Total	100%	100%	100%

^{*}Note the WRES recruitment score is based on Shortlisted and Offered data only.

Source: Trust recruitment data 1st April 2020-31st March 2021 (2019-20 in brackets)







The improvement made in the Trust's WRES recruitment score is set against the background of a worsening position on this measure nationally (see table above), putting the Trust's significant progress into context.

Despite having made significant progress on this indicator, the chart above illustrates that BAME applicants are still disadvantaged through the successive stages of our recruitment process, as seen by the increasing proportion of white applicants at each stage in comparison to the declining proportion of BAME and ethnicity not known applicants.

It is recognised nationally and regionally that Trusts need to substantially improve performance on this measure to bring about more equitable BAME inclusion in the NHS. As such, the Midlands workforce race, equality and inclusion strategy (WREI) was launched in early 2021 requiring Trusts and systems to develop detailed high impact plans in this area. The Trust has been working with system colleagues to develop this action plan (available on request) and performance against this will be closely monitored over the coming years.

This indicator continues to be a priority for the Trust due to year on year underperformance to maintain and further improve on our performance on this important measure.

What we have done to address this indicator?

The Trust has worked hard to develop its approach to Inclusive Recruitment throughout 2020-21, driven by our Recruitment Lead (Ami Stonier) and the Inclusion Council. Measures in place to deliver progress on this area through 2020-21 include:

- Batch recruitment whenever possible
- Increased promotion of flexible working opportunities
- BAME representation in all interviews at band 7 and above
- BAME representation in shortlisting encouraged whenever possible
- 41% of our preceptee nurses appointed in 2020 were of BAME heritage (10 of 24) local area
 7.6% BAME
- Conversion rate (from student to registered staff member) of our BAME students improved year-on-year (8 in 2019, 10 in 2020).
- Promotion of reporting of racist incidents against staff, resulting in reporting DOUBLED in reporting 2 consecutive years.
- 11 BAME colleagues (8% BAME workforce) have been trained in recruitment and are supporting Trust selection processes,
- Raising awareness of race inclusion / exclusion and inclusion imperative through the Trust and particularly leadership and recruiting managers
- Positive action approaches to advertising vacancies, included greater use of diverse workforce images and wording encouraging applications from under-served/under-represented groups





Indicator 3

Formal disciplinary cases: relative likelihood of entering the process compared to white staff

Disciplinary data for the last two years is illustrated in the table below.

	Disciplinary cases 2019-20	Disciplinary cases 2020/2021
White	17	5
BAME	2	2
Ethnicity not known/ not stated	0	1
TOTAL CASES IN YEAR	19	8

The table below details year on year performance figures:-

Indicator		<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>	
3. Relative likelihood of BME	National WRES report	1.56	1.37	1.24	1.22	1.16	Published Feb 2022	
staff entering the formal disciplinary process compared to white staff.	NSCHT performance	2.28 Worse than average	1.77 Worse than average	10.52 (outlier) Worse than average	0.88 Better than average	1.39* Better than average		vement eded

^{*}Note: This figure has been recalculated based on recent information and updated national guidance. [a score of one would mean equal access to development opportunities]

The likelihood of BAME colleagues entering the formal disciplinary process is disproportionate to that compared to white colleagues, with a score of 4.35, suggesting than BAME colleagues are four times more likely to face disciplinary processes than their white counterparts.

However, it is noted that the Trust has been working to drastically reduce the number of disciplinary cases by applying much greater rigour in the early stages when an incident arises, using the Restorative Just Culture Framework approach. This change has resulted in the very low number of disciplinaries in 2020/21 (8 in total). It is also noted at the time of writing (late August 2021) there have been no disciplinary cases to date, largely credited to this change in approach.

It is noted that this score of 4.35 has been calculated on the basis of 2 disciplinary cases (from a total of 8) in 2020/21. With such low numbers of disciplinary cases and a BAME workforce of 8.2% it is likely that even a small number of BAME cases will result in a BAME over representation, even just one.





With such low numbers of disciplinary cases, it is likely to be <u>not</u> statistically significant and as such will not be highlighted in the WRES national report/data.

This indicator remains a key challenge for the Trust. However, we are hoping that our new approach and use of the Restorative and Just Culture framework checklist will give confidence 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.

What have we done to address this indicator?

- The Trust has introduced the Restorative Just Culture Framework as a key change in approach in managing potential disciplinary situations. Key elements of this framework are:
 - Commissioning manager appointed to review the case using the JCF checklist
 - Decision making methodology for triaging cases applied
 - Focus on what has happened rather than who responsible
 - Wider systemic and culture issues taken into consideration
 - Unconscious bias effects minimised
 - Focus on informal resolution wherever possible and appropriate.

Since implementing this framework, the Trust has not reported any live formal disciplinary investigations since November 2020. The next stage of development for this new approach aims to move beyond policy compliance towards a fully embedded cultural change of a restorative just culture which has principles of natural justice, diversity and inclusion at its heart.

Indicator 4

Non-Mandatory training: relative likelihood of accessing training

This indicator assesses the proportion of BAME staff accessing AT LEAST ONE piece of NON-MANDATORY development, in comparison to the proportion of white staff accessing the same.

Historically, the Trust has ostensibly performed well on this measure, with a score in favour of BAME staff, and the 2021 score is no exception to this trend.

However, deeper analysis reveals that there IS actually a negative likelihood of accessing development for BAME staff when medical staff are excluded from the data. The high proportion of BAME doctors in the Trust (>50%) is responsible for the skewing of this measure.

Non-Mandatory Training: relative likelihood of accessing at least one piece of non-mandatory training:

- The balance of this measure was again in favour of BAME staff, with a positive score of 0.67 (compared to 0.78 in the 2020 WRES). Overall, BAME staff were more likely to access at least one piece of non-mandatory development than white staff.
- 39% of all BAME staff accessed development in 2020-21, compared to 26% for all white staff (47% & 37% respectively in 2019-20)

However, when medical staff are removed from the data:-

- the balance changes heavily in favour of white staff to a score of 1.67 (2.10 in the 2020 WRES) [a score of one would mean equal access to development opportunities]
- just 19% of BAME staff have accessed at least one piece of non-mandatory training, compared to 25% of white staff (when medical staff are excluded).





<u>Indicator</u>		<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>	
4. Relative likelihood of BME staff	National WRES report	1.11	1.22	1.15	1.15	1.14	Published Feb 2022	
accessing non-mandatory training and CPD compared to white staff.	NSCHT performance	1.13 Approx same as average	0.76 Better than average	0.95 Better than average	0.68 Better than average	0.78 Better than average	0.67 Sor Improv Mac	ement de
							required wh exclu	

Despite an apparently good overall score on this measure, clearly further improvement in this area is required in 2021-22 for the benefit of non-medical BAME staff across the Trust.

What we have done to address this indicator?

The Trust has continued to progress its Inclusive Development project, overseen by the Inclusion Council. This group is now focussing on development of the Trust Education Framework, creation of a quick reference digital handbook of available options for career development, promotion of coaching and mentoring opportunities, and responding to the NHS Staff Survey feedback relating to development and career progression.

Measures to support this area of work through 2020-21 have included:

- Direct communication of development opportunities to our BAME workforce (bypassing line management)
- Regional NHS Aspirant BAME Leadership Programme Trust nurse (Sarah Wanjiku) successful as our system candidate for this 12 month development programme (Kenny Laing participating as Sarah's sponsor)
- Continued support and engagement of our Stepping Up Alumni, including alumni events and surveys / ongoing support
- Commitment to and development of plans for further round of Staffordshire Stepping Up and Reverse Mentoring at Trust and system level
- Invitation to BAME workforce and Stepping Up alumni to participate in Staff Networks and Inclusion School series





Indicators 5-8 Staff Survey Data Questions.

The data for the next four indicators is taken from Trust results in the 2020 NHS Staff Survey (feeding 2021 WRES) as illustrated over the page.

Indicator 5: Harassment, bullying and abuse from patients % of staff experiencing from patients, relatives or the public in the last twelve months

BIG improvement (15 % points) in BAME staff experiencing harassment, bullying and abuse from service users and the public

- from 42.0% in 2019 survey (2020 WRES) to 27.3% in 2020 survey (2021 WRES)
- That's marginally **better** than the score for our white staff (27.6%)
- And significantly better (5 % points) than average for BAME staff in our comparator Trusts (32.1%)

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

Significant improvement (8 % points) in the corresponding measure of BAME colleagues experiencing HBA from staff

- down from 24.5% to 16.7%
- BAME rate almost the same as for white staff (15.4%)
- Much better (over 8% points) than average for BAME staff in comparator Trusts (25.0%)

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

BIG improvement for second year in a row in BAME staff reporting equal opportunities for progression and promotion

- up to 88.2% from 66.7% in 2020 WRES (2019 survey) and from 58.5% in 2019 WRES (2018 survey)
- Rate now almost the same as for white staff (91%)
- Much better (15.5 % points) than average for our comparator Trusts (72.7%)

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

Marginally improved our position on BAME staff reporting discrimination by their manager or team leader (12.5%, 12.8% in 2019).

- This represents substantial progress since our 2017 rate (20.7% of BAME staff).
- Significantly better (2.6 % points) than average for BAME colleagues in comparator Trusts (15.1%)

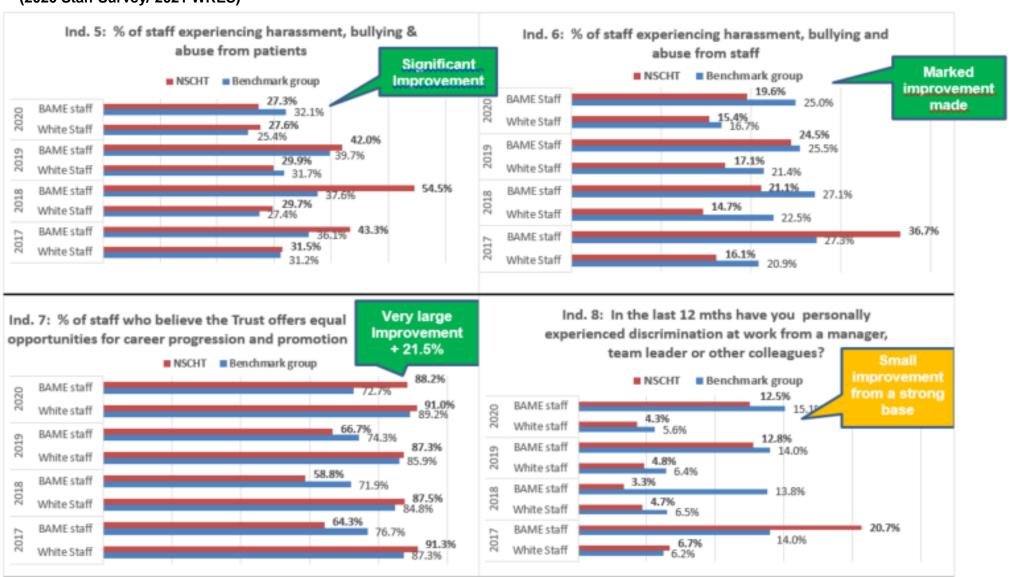
What we have done to address these indicators?

- Inpatient services task and finish group on addressing racist incidents detailed action plan developed and implemented with high level of BAME staff involvement and leadership involvement and commitment.
- Continuation of Addressing Racist and Personal Incidents project via Inclusion Council focus
 on this has led to reporting of racist incidents against staff DOUBLING in 2 consecutive years.
- Developing our culture of Race Inclusion at Trust and system level and being clear than racism of any kind will not be tolerated here.





Staff Survey WRES Measures (2020 Staff Survey/ 2021 WRES)







Indicator 9

BAME Board membership

- 21.4% of our board membership is from the BAME workforce as at 31st March 2021. This compares to 10% nationally as reported in the latest WRES report.
- 37.5% of our Executive team are from the BAME workforce compared to 42.9% in 2020.
- 9.1% are voting board members are BAME, compared to 18.2% in 2020.
- There are currently no BAME NEDs within the Trust and this remains an area for development

(NB The Trust has had 2 NED trainees over the past 2 years, both with BAME heritage, thereby helping to increase the local talent pool for future NED appointments. Last year's NED trainee has now secured a NED position in another Trust. Our current NED trainee joined the Trust in April 2021.)

We still have the same number of BAME board numbers (3, all executive team) as the previous year. The variation in percentages relates to the people in post/ vacancy on the effective date each year. It is noted that the Trust is currently supporting Tosca Fairchild, Assistant Chief Executive to be seconded as Delivery Director for Equality and Health Inequalities and Intensive Support at NHS England & NHS Improvement, East of England Region.

Indicator		<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>
9. BAME board membership	National WRES report	7.1%	7.0%	7.4%	8.4%	10%	To be published Feb 2022
	NSCHT performance	7.7% Better than average	7.7% Better than average	15.4% Better than average	14.3% Better than average	23.1% Better than average	21.4%

Please note the WRES national report does not publish national figures broken down by voting and non-voting board members.

BAME board headcount remains the same

What we have done to make this improvement?

- Strong leadership internally and externally on inclusion and specifically on race inclusion, including Trust leaders speaking out at external events and conferences on race inclusion
- The Trust had maintained its BAME Board membership of 3 individuals throughout 2020-21.
- However, it is noted that one of these individuals went on secondment (continuing at time of writing) to NHS E&I and so has not been working within the Trust for much of this time.
- It is also noted that we have not had BAME NED representation for some time in the Trust and this remains an aspiration at this time future in line with the national "Strengthening NHS Board Diversity" report published in June 2021.





Conclusions and Recommendations

The need to develop greater race inclusion and equality continue to remain both an immediate and a long-term challenge. Our people need a compassionate and inclusive culture, an organisation where all colleagues feel looked after, valued and have a sense of belonging. The disproportionate impact of Covid 19 on BAME communities and colleagues has further shed a light on inequalities and created an even greater catalyst for change. The Trust has made significant strides to progress our inclusion agenda during a challenging year. 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 BAME workforce (and our BAME service users) experiencing poorer employment prospects and experiences than their white counterparts in the NHS on a range of indicators.

The Trust has made very significant strides in 2020-21 to keep the development of greater race inclusion as a high priority and in delivering tangible and substantial improvements in our WRES measures. It is incumbent that we continue to press forward with this agenda at every level of the organisation and across our Integrated Care System (ICS) for Staffordshire and Stoke on Trent. Despite our progress, there is so much more that can be achieved. It is widely recognised that culture and enduring change takes time if the change is to be real and lasting. With continued intensity of commitment to enhanced race equality and inclusion it is hoped a lasting legacy of improvement will be achieved, with the ripples of our success reaching beyond the Trust into our wider local system and society, and beyond.

Our work on developing workforce race inclusion over the past 12-18 months has gained national recognition and much of this work is summarised above in this report and at *Appendix 1*. The further work that we are committed to implementing in 2021-22 to take us to the next stage in our race inclusion journey is set out at *Appendix 2*.

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 2020-21 WRES actions and journey, as set out above and at *Appendix 1*.
- 2. Approve this 2021 WRES report and Action Plan for 2021-22(*Appendix 2*) for publication with the WRES Team, on the Trust's website and sharing with our lead commissioners.
- 3. Continue to act as positive Ambassadors and champion an inclusive and anti-racist culture for the ongoing development of tangible and measurable change on race equality and inclusion.

END





APPENDIX 1

NSCHT WRES ACTION PLAN 2020-21 PROGRESS REPORT

WRES ACTION PRIORITIES 2020-21	By Who	By When	Comments / Progress to date	Where reported / monitored / governance?
 ACTION 1: 1.1 Continue to progress the work of our 4 Workforce Inclusion Projects with a view to tangible and measureable improvements being realised in year:- Inclusive Recruitment Inclusive Development Improving our Response to Racist and Personal Abuse of Staff Culture of Inclusion 1.2 All 5 directorates (4 clinical and corporate directorate) to be able to identify at least one key action that they will take to support delivery of these imperatives and to demonstrate measureable progress by March 2021. 	Associate Directors	Bi-monthly progress reports to Inclusion Council Directorate Action Plans required by end of September 2020 and progress reports to Inclusion Council in January and March 2021.	1.1 ACHIEVED AND ONGOING Despite the ongoing challenges of the COVID-19 pandemic, the Trust's Inclusion Council has continued to meet every 2 months, with no meetings being cancelled. Progress with each of our 4 Inclusion Projects is reported on in detail at each meeting, with a focus on Key Achievements / Progress made; Action/Progress to be delivered by next meeting, and Action / Progress to be delivered beyond next meeting, plus AOB/help needed. 1.2 ACHIEVED 1. Corporate Directorate has delivered the Inclusion School programme and Cultural Education Programme, progressing the Trust and wider system's Culture of Inclusion. 2. Specialist Services Directorate has developed and delivered on the proposal to introduce 4 Expert by Experience roles for people with Learning Disabilities 3. Acute & Urgent Care Directorate has delivered a Task and Finish Group project on addressing racist incidents in inpatient services 4. Stoke Community Directorate, together with the North Staffordshire Community Directorate have been developing a proposal	Inclusion Council through to PCDC and Trust Board





WRES ACTION	N PRIORITIES 2020-21	By Who	By When	Comments / Progress to date	Where reported / monitored /
					governance?
				for a Community Engagement Co-ordinator that will work across the two areas supporting engagement within the localities, focussing on work addressing health inequalities which exist across a range of dimensions or characteristics, including the nine protected characteristics of the Equality Act 2010, socioeconomic status, geographic deprivation, or being part of a vulnerable or Inclusion Health group. (Note: This post is currently being recruited to at the time of writing, September 2021). The 2 Community Directorates have also been working with partners and service users to develop a number of key Community Support Peer Coaches, which will include Expert by Experience opportunities. This work will be realised during 2021-22.	gerennaneer
i. Diverse s panels as all posts sii. Batch appropria	RES Aspirational Target shortlisting and interview to the norm – in place for at band 7+ recruitment whenever ate – in place & batch ent increasingly used ag to extend our	Recruiting managers Recruiting managers	Throughout year Throughout year Second Cohort launched in year	PROGRESS MADE & ONGOING This national action was superseded this year with the Race Disparity Ratio tool, which encompasses all bands, not just bands 8A and above and compares them to the local BAME population rate (7.6%). Using this tool, the Trust Race Disparity Ratio scores as at 31.03.21 were as below (31.03.20 in brackets):- Disparity ratio - lower to middle 1.64 (1.39) Disparity ratio - middle to upper 0.82 (1.80) Disparity ratio - lower to upper 1.33 (2.51) [Note: a score of 1.00 represents proportionate representation, >1.0 represents under representation; <1.0 represents over representation] It is seen from the below (ethnicity not known excluded)	Inclusion Council through to PCDC and Trust Board
establish programr	ed Reverse Mentoring me with a further cohort opportunities cross-	D&I Lead		that, whilst progress has been made, the Trust still under- represents for BAME workforce in almost every banding (exceptions are band 5 & VSM).	





WRES ACTION PRIORITIES 2020-21 By Who		By When	Co	Where reported / monitored / governance?			
	system) - delayed to Autumn		Throughout year		White - Current	BME - Current	
	2021 to launch as whole system			Bands	Year	Year	
	RM opportunity			Under			
i. ,	Continuing to develop a sulture of	All CLT	A a a a a a a a a a a a a a a a a a a a	Band 1	93.3%	6.7%	
iv.	Continuing to develop a culture of inclusion, addressing deep-rooted	All SLT. Inclusion	As opportunity arises	Band 1	100.0%	0.0%	
	inequalities – much delivered in	Council. D&I	anses	Band 2	94.3%	5.7%	
	2020-21	Lead.		Band 3	93.2%	6.8%	
			Throughout year	Band 4	95.7%	4.3%	
٧.	Recruitment drive for BAME Non-	Trust Bd		Band 5	87.2%	12.8%	
	Executive Director (NED)	Secretary /		Band 6	95.8%	4.2%	
	representation at next opportunity – pending opportunity	Rect Lead		Band 7	93.8%	6.2%	
			Agroo by and	Band 8a	93.8%	6.3%	
vi.	STP and wider-regional	D&I Lead	Agree by end Sept 2020	Band 8B	97.2%	2.8%	
٧١.	collaboration on development of			Band 8C	100.0%	0.0%	
	our BAME talent pools - delayed			Band 8D	100.0%	0.0%	
	- to be developed through 2021-		Attain 95%	Band 9	100.0%	0.0%	
	22 in conjunction with regional colleagues		compliance in all	VSM	62.5%	37.5%	
			areas by 31.03.20	Grand	5_10,0	011070	
vii. Agree the	Agree the broad long term (5	DofWF, D&I		Total	93.3%	6.7%	
vii.	year) targets and annual 'stepping stones' and deliver on those for 2020-21 —reviewed as over page*. DofWF, D&I Lead, Rect Lead		Part of 2020-21 appraisals	*Reworked W	RES Aspirational Ta	rgets for Trust:-	
viii.	Working with directorate to encourage declaration of ethnicity (and other protected characteristics information) to close the gap of 'ethnicity not known' – ongoing and focus as	Associate Directors with Performance Team	Throughout year	PTO			





WRES ACTION PRIORITIES 2020-21		ES 2020-21 By Who By When		Co	Where reported / monitored / governance?		
ix.	part of Inclusion Week September 2021 Developing leadership appraisal objectives on BAME workforce			Bands	Additional BAME headcount to meet aspirational target (7.6%) b7 2025	Additional BAME headcount to develop against aspirational target in 2021-22	
	representation – to be cascaded via leadership appraisals – data			Band 6	12	3	
	still to be gathered for 2021-22			Band 7	3	1	
	appraisals			Band 8a	1	_	
	Developing and supporting our	DofWF with D&I Lead		Band 8B Band 8C	2	2 (from across	
Χ.	Developing and supporting our BAME staff network and network	Dai Leau		Band 8D	1	Band 8A-9)	
	chair to drive and actively develop			Band 9	0		
	meaningful change - ongoing, networks continue to be			VSM	n/a	n/a	
	developed within the Trust and at system level. Additionally, a paper proposing to increase the support to our network leads going to Execs Autumn 2021.			Grand Total	19		
ACTI	ON 3:						
Progr Trust, under and c create focus • Kne • Ga • Pra	Deliver a Cultural Development Programme on race inclusion across the Trust, increasing awareness and understanding of BAME inequality issues and creating an active desire and skills to create change.Trailblazing approach, focusing on developing; Knowledge of theory Gaining insight into lived experience Practical application through socially distanced role play using actors		To be rolled out from Q3 2020-21	 DELIVERY DELAYED. PART ACHIEVED AND ONGOING This project was agreed at system level to be divided into 2 phases for delivery in 2021-22:- Phase I – Very Senior Leaders from across the system – majority completed 3 sessions were delivered for system VS leaders over June-July 2021. 54 of the intended 94 VSLs attended (57.5%). A further session was provisionally booked for 30 September for the 44 		Inclusion Council through to PCDC and Trust Board (plus ICS People Board at system level)	





WRES ACTION PRIORITIES 2020-21	By Who	By When	Comments / Progress to date	Where reported / monitored / governance?
 Drive for inclusive change Skills and confidence to converse and challenge Race and Inclusion issues Platform on which to build local provider cultural change work Possible blue-print for wider cultural development across ICS ACTION 4: To continue the support to the original 3 cohorts of Stepping Up Alumni from across the ICS to ensure that those who originally participated are fully supported to be able to access opportunities for further development, supporting them in advancing their careers in the direction aspired to by each individual. To include: Alumni gathering Oct 2020 Cross-Trust/ICS Reverse Mentoring opportunity 		Delivery in 2020- 21	not yet attending. Unfortunately it appears this session will need to be cancelled due to lack of attendees. • Phase II – wider roll-out through system. Plan begun. 120 band 7+ leaders from UHNM and NSCHT will receive this development in September 2021 as part of the Connects leadership programme. 80 MPFT and CCG leaders will receive the training in Oct-Nov 2021. ACHIEVED AND ONGOING The existing Stepping Up Alumni were invited to participate in various engagement / support events during 2019-20, including:- - Stepping Up Alumni 'Check In' Session – informal gathering 4.11.20 - Stepping Up Alumni 'Next Steps' with Prem Singh and Shajeda Ahmed (November 2020) - Inclusion School sessions November 2020-March 2021 (and beyond) - Stepping Up Alumni Survey July 2021 (feedback	Inclusion Council through to PCDC and Trust Board
Cross Trust BAME Network joint working/event			and recommendations currently being collated) - System and Trust BAME Staff Network meetings (various dates)	
ACTION 5: To develop a plan to deliver Wave 2 Staffordshire Stepping Up. There is an identified need for BAME	Dof WF With D&I Lead	Plan in place by end of March 2021	DELAYED BUT PROGRESSING It was decided to delay this further round of Staffordshire Stepping Up until 2021-22 due to the circumstances of the COVID-19 pandemic.	Inclusion Council through to PCDC and Trust Board
colleagues from across the ICS to gain the opportunity to undertake BAME			on carrieta record of the COVID To particolline.	





WRES ACTION PRIORITIES 2020-21	By Who	By When	Comments / Progress to date	Where reported / monitored / governance?
leadership development. Funding to be identified to deliver a further 1-2 cohorts.			Plans in development for delivery using a hybrid delivery model (online national content, combined with face to face local elements) to be commenced during 2021-22.	(plus ICS People Board at system level)
ACTION 6:				
Deliver on our People Plan actions on Race Inclusion Urgent action to address systemic inequality, experienced by some NHS staff, including BAME staff:-	D&I Lead / WF	Within year	a) Development of unprecedented levels of joint action on inclusion across ICS b) Trust and (NEW) system BAME Networks development supported and progressed through 2020-21. c) Trust Leadership Academy session on Race held August 2020 d) System 'Let's Talk About Race' Inclusion School held November 2020 e) Delivery against Trust annual calendar of diversity and inclusion dates (including key religious and cultural days/weeks/months) through Trust communications and social media f) Development of a more representative pool of coaches and mentors within the Trust g) Reviewed, developed and advertised/promoted flexible working for all staff / roles internally and externally h) Introduced measures to provide robust challenge in relation to BAME colleague disciplinary investigations/hearings through Restorative Just Culture Framework and principles i) Recruited and developed more BAME colleagues to act as FTSU Champions with a view to being 'spoilt for choice'	Workforce Directorate SMT Inclusion Council through to PCDC and Trust Board (plus ICS People Board at system level)





WRES ACTION PRIORITIES 2020-21	By Who	By When	Comments / Progress to date	Where reported / monitored / governance?
ACTION 7:				
The Trust will develop and recruit to a number of new positive action roles where BAME ethnicity will be a Genuine Occupational Qualification for the postholder, working to specifically develop inclusion for our BAME population. Sutherland Centre development. Proposed new 2 x Bd 6 posts & 2 x Bd 3	roles will be in the Stoke Community	Appointments made in financial year	ACTION CANCELLED Funding not secured to support this proposal and plan discontinued. New plans, however, are in development for Community Engagement Co-ordinator and key Community Support Peer Coaches to be realised during 2021-22 (see action 1.2 above).	NOT APPLICABLE – ACTION CANCELLED





APPENDIX 2

NSCHT WRES ACTION PLAN 2021/22

WRES ACTION PRIORITIES 2021-22	Relates to WRES	By Who	By When	Comments / progress to date	Where reported/
Action 1	Indicator(s)				monitored
Continue to develop the Trust and wider system culture of inclusion to increase the inclusion awareness and inclusive behaviours of staff at all levels, and importantly those in leadership positions	Indicators 1-9	Director of People, OD & Inclusion D&I Lead	Throughout 2021-22		Inclusion Council PCDC
1.1 Inclusion built-in to the design of all Trust/ system leadership programmes					
1.2 Delivery of wider Trust and system roll-out of Comfortable Being Uncomfortable with Race and Difference programme					
1.3 Delivery of Autumn Inclusion School (20 October and develop ongoing Inclusion School ambitions					
1.4 Trust / system events to mark Black History Month and South Asian History Monty					
1.5 Regular awareness raising communications on race inclusion and equality related matters					





WRES ACTION PRIORITIES 2021-22	Relates to WRES	By Who	By When	Comments / progress to date	Where reported/
through Trust internal and external communications and social media Action 2	Indicator(s)				monitored
Delivery against the High Impact Action Plan on Recruitment as part of the Midlands Workforce Race, Equality and Inclusion (WREI) Strategy Ensure specific focus on disability and neurodiversity is built in through all action areas of this plan	Indicator 2	Recruitment Lead D&I Lead (with others)	Throughout 2021-22	Timescales as per Trust & system WREI action plan (available on request)	Inclusion Council System People Board
Action 3 Trust Directorates each to deliver an action supporting the progression of workforce race inclusion through their services	various	Directorate AD	Through 2021-22		Directorate Leadership Team Trust Senior Leadership Team (SLT)
Action 4 Specifically target BAME staff in the Trust/system Reverse Mentoring cohort to be established from Autumn 2021	various	D&I Lead	From Autumn 2021		Inclusion Council System People Board
Action 5 Further progress the Trust's 4 Inclusion Council projects, with specific reference/focus on race: 1. Inclusive recruitment (also see action 2) 2. Inclusive development	Indicators 1-9	Project Leads	Ongoing		Inclusion Council





WRES ACTION PRIORITIES 2021-22	Relates to WRES Indicator(s)	By Who	By When	Comments / progress to date	Where reported/monitored
Preventing and Responding to Personal Abuse					
4. Culture of Inclusion (+ see action 1)					