



Wirral Community
NHS Foundation Trust

Workforce Race Equality Standard (WRES) reporting - 2018

<p>1. Name of organisation</p> <p>Wirral Community NHS Foundation Trust</p>
<p>2. Date of report</p> <p>July 2018</p>
<p>3. Name and title of Board lead for the Workforce Race Equality Standard</p> <p>Jo Harvey, Director of Human Resources & Organisational Development</p>
<p>4. Name and contact details of lead manager compiling this report</p> <p>Sophie Hunter, Equality and Diversity Lead</p>
<p>5. Names of commissioners this report has been sent to</p> <p>Nicola Griffiths, Wirral Clinical Commissioning Group (CCG)</p>
<p>6. Name and contact details of co-ordinating commissioner this report has been sent to</p> <p>Lorna Quigley – Director of Quality & Patient Safety (Lead for Equality & Diversity) Lorna.quigley@nhs.net</p>
<p>7. Unique URL link on which this report and associated Action Plan will be found</p> <p>http://www.wirralct.nhs.uk/about-us/our-organisation/our-publications</p>
<p>8. This report has been signed off by on behalf of the board on</p> <p>25th July 2018</p>
<p>9. Any issues of completeness of data</p> <p>Data range for this year reporting will be based on ESR Business Intelligence reports WRES data. The report meets all criteria for the specific duties of the Equality Act (2010) and represents the organisation as at 31st March 2018.</p>
<p>10. Any matters relating to reliability of comparisons with previous years</p> <p>The known ethnicity profile of Wirral Community NHS Foundation Trust is 99.4% as at March 2018. A known ethnicity status of 99.4% can provide a strong degree of assurance for accuracy. Changes in requirements for data type in the WRES this year may make comparison with previous years more difficult. This will be addressed throughout this report.</p>

<p>11. Total number of staff employed within this organisation at the date of the report: 1729</p>
<p>12. Proportion of BME staff employed within this organisation at the date of the report? 3.3%. The population of BME residents in Wirral is 5.03%</p>
<p>13. The proportion of total staff who have self-reported their ethnicity? 99.4%</p>
<p>14. Have any steps been taken in the last reporting period to improve the level of self-reporting by ethnicity? Not required due to high level of compliance.</p>
<p>15. Are any steps planned during the current reporting period to improve the level of self-reporting by ethnicity? Not required due to high level of compliance.</p>
<p>16. What period does the organisation's workforce data refer to? 1st April 2017 to 31st March 2018</p>
<p>17. Percentage of staff in each salary range of £10k compared with the percentage of staff in the overall workforce. Very Senior Managers (VSM) salaries generally begin at £100k (including executive Board members). Organisations should undertake this calculation separately for non-clinical and for clinical staff. Data for reporting year:</p>

		%			
		White	BME	Not Stated	
Clinical	0-10k				
	10-20k	10.46	0.18	0.06	
	20-30k	28.40	0.87	0.22	
	30-40k	27.14	0.38	0.57	
	40-50k	9.29	0.19		
	50-60k	0.35			
	60-70k	0.06	0.08		
	70-80k	0.12	0.08		
	80-90k	0.10			
	90-100k	0.08			
	100-110k				
	110-120k				
	120-130k	0.18	0.09		
	130-140k	0.04			
	140-150k		0.03		
		76.23	1.89	0.84	78.96%
		%			
		White	BME	Not Stated	
Non Clinical	0-10k	0.15	0.08		
	10-20k	10.98	0.15	0.08	
	20-30k	5.12	0.05		
	30-40k	1.92	0.18		
	40-50k	1.13			
	50-60k	0.44			
	60-70k	0.38			
	70-80k	0.07			
	80-90k				
	90-100k	0.08			
	100-110k	0.08			
	110-120k				
	120-130k	0.08			
	130-140k				
	140-150k	0.08			
		20.5	0.46	0.08	21.04%

Data for previous year

This data was not required in previous years. The related data from previous years refers to agenda for change.

The implications of the data and any additional background explanatory narrative

The charts show that in clinical roles there is little representation from BME staff above £50k, for non-clinical roles, there is no BME representation above £40k. This is not unexpected; given the majority of BME staff at WCT work in clinical roles, and that there is a low% of BME staff generally.

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

Action will be included in the WRES action plan for 2018/2019 to focus on increasing the overall amount of BME staff at WCT and promoting leadership opportunities.

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

Data for reporting year

Shortlisted:

BME = 3%

White =97%

Starters:

BME=2%

White = 98%

Data for previous year

Shortlisted:

BME = 8 %

White =92 %

Starters:

BME=7%

White = 93%

The implications of the data and any additional background explanatory narrative

There is a clear reduction in the amount of BME new starters than the previous year.

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

The WRES action plan 2018 will include initiatives to encourage BME applicants.

19. Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation. This indicator will be based on data from a two year rolling average of the current year and the previous year.

Data for reporting year

BME staff are less likely than White staff to be the subject of disciplinary procedures.

Data for previous year

BME staff are as likely as White British staff to be the subject of disciplinary procedures.

The implications of the data and any additional background explanatory narrative

Numbers of all disciplinary cases were too low for reporting purposes.

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

The numbers of both BME and White British staff who entered disciplinary procedures in 2017/18 was very low. No adverse treatment of BME staff was found.

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

Data for reporting year

BME 2%

Data for previous year

BME 3%

The implications of the data and any additional background explanatory narrative

BME staff were 33% less likely than White British staff to access non mandatory and CPD training. This is linked to the fact that the majority of BME staff in the trust are employed in our GP Out of Hours service on minimal hours contracts and we are not their primary employer.

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

Action needs to be taken to encourage BME staff to undertake training aligned to their career goals. WCT will continue to monitor CPD and undertake initiatives to ensure BME participation in apprenticeship programs at WCT and leadership programs from NHS Leadership Academy.

National NHS Staff Survey indicators (or equivalent)

For each of the four staff survey indicators, compare the outcomes of the responses for White and BME staff

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

Data for reporting year

White 25%

BME 18%

Data for previous year

White 24%

BME 42%

The implications of the data and any additional background explanatory narrative

This % of BME staff experiencing harassment, bullying or abuse has reduced significantly over the last 12 months which is encouraging. However, the % is still high for both BME and White staff and therefore initiatives must continue to protect all staff.

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

Continue to promote policies and functions to support staff from bullying and harassment from Patients, relatives and the public via communication media including emphasis of the zero tolerance campaign. OH and HR to continue to support staff health and wellbeing agendas.

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

Data for reporting year

White 19%

BME 18%

Data for previous year

White 18%

BME -

The implications of the data and any additional background explanatory narrative

Whilst there appears to be a significant increase in BME staff experiencing bullying, harassment or abuse from staff, responses last year were too low to publish. Data from this question indicates that BME are slightly less likely to experience discrimination from staff than white staff.

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

Continue to keep policy and practice updated and equality training up to date for all staff. Promote FTSU and whistle-blowing policy.

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

Data for reporting year

White 87%

BME -

Data for previous year

White 90%

BME -

The implications of the data and any additional background explanatory narrative

A high percentage of White staff believe that there is equal opportunity of progression. BME responses are too low to be used in any analysis

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

To encourage more BME take up of the staff survey for 2018 in order to provide a larger range of indicative data

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

Data for reporting year

White 5%

BME -

Data for previous year

White 4%

BME -

The implications of the data and any additional background explanatory narrative

Low reports of discrimination from both White and BME staff from managers and team leaders

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

–The trust must look to maintain this low score and keep related policy updated.

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

Data for reporting year

Board voting membership

White 100%
BME 0%

Overall workforce
White 96.7%
BME 3.3%

Data for previous year

The data was deemed too low to publish in the previous year. Following advice from the WRES team, WCT has opted to disclose this year's data as a %.

The implications of the data and any additional background explanatory narrative

The current ethnicity profile of the Trust Board is 100% White British. The population of BME residents in Wirral is 5.03%. There is a minimal underrepresentation at Board level of BME employees given the overall low number of Board members.

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

The Board will ensure that there are pathways in place to hear and consider feedback from BME staff and stakeholders. This will be through direct reports to the Board from BME Staff Focus Groups, and having an Executive Chair at the trusts Community Equality Panel. The trust will build links with local BME stakeholder groups and organisations to promote BME application for Exec, Non-exec and Governor vacancies as they arise. This is evidenced by the specification for the providers to carry out recruitment to the current non-executive vacancy.

26. Are there any other factors or data which should be taken into consideration in assessing progress?

The WRES reporting template has changed, and some elements differ from questions asked previously. In some cases, this can make data more difficult to compare.

27. Organisations should produce a detailed WRES action plan, agreed by its board. It is good practice for this action plan to be published on the organisation's website, alongside their WRES data. Such a plan would elaborate on the actions summarised in this report, setting out the next steps with milestones for expected progress against the WRES indicators. It may also identify the links with other workstreams agreed at board level, such as EDS2. You are asked to provide a link to your WRES action plan in the space below.

<http://www.wirralct.nhs.uk/about-us/our-organisation/our-publications>

