Workforce Race Equality Standard
REPORTING TEMPLATE
Template for completion

Name of provider organisation	Date of report; month/year	
South West Yorkshire Partnership NHS Foundation Trust	Month: August	Year: 2019
Name and title of Board Lead for the Workforce Race Equality Standard		
Alan Davis, Director of human resources, organisational development and estates		
Name and contact details of lead manager compiling this report		
Claire Hartland, HR business manager, claire.hartland@swyt.nhs.uk 07881 008185		
Names of commissioners this report has been sent to		
Wakefield CCG, Barnsley CCG, North Kirklees CCG, Greater Huddersfield CCG, Calderdale CCG., NHS North of England SCT		
Names and contact details of co-ordinating commissioner this report has been sent to		
Amanda Capper | Head of Contracts | NHS Barnsley Clinical Commissioning Group | Amanda.capper@nhs.net Michael Bennett | Senior Contract Manager | NHS Calderdale & NHS Greater Huddersfield CCG | michael.bennett2@greaterhuddersfieldccg.nhs.uk Rita Thomas | Head of Mental Health | NHS England, North of England Specialised Commissioning Team (Yorkshire & Humber Hub) | rita.thomas1@nhs.net		
Unique URL link on which this report will be found https://www.southwestyorkshire.nhs.uk/about-us/performance/workforce-equality/		
This report has been signed off by Alan Davis, Director of human resources, organisational development and estates on behalf of the Board on 24.9.19		

Report on the WRES indicators

1. Background narrative

a. Any issues of completeness of data
No issues

b. Any matters relating to reliability of comparisons with previous years
No issues

2. Total numbers of staff

a. Employed within this organisation at the date of the report
There were 4254 staff employed by South West Yorkshire Partnership NHS FT as at 31st March 2019

b. Proportion of BME staff employed within this organisation at the date of the report
9.5% BME staff in the workforce as at 31st March 2019

3. Self reporting

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

100% of staff have self-reported their ethnicity

b. Have any steps been taken in the last reporting period to improve the level of self-reporting by ethnicity
The Trust uses ESR employee self-service which staff have been encouraged to use to self-report and check their own data. The reporting level is now at 100%

c. Are any steps planned during the current reporting period to improve the level of self reporting by ethnicity
Self-reporting is currently at 100% but we plan to ask staff to check their personal data stored on ESR on an annual basis

4.   Workforce data

a. What period does the organisation's workforce data refer to?
Years ending 2017/18 and 2018/19

5.   Workforce Race Equality Indicators

Please note that only high level summary points should be provided in the text boxes below – the detail should be contained in accompanying WRES action plans

	Indicator	Data for reporting year	Data for previous year	Narrative – the implications of the data and any additional background explanatory narrative	Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective
	For each of these four workforce indicators, the Standard compares the metrics for White & BME staff.				
1	Percentage of staff in each for the AfC bands 1-9 and VSM (including executive Board members) compared with the percentage of staff in the overall workforce. Percentage of staff in each of the AfC bands 1-9- or Medical and Dental subgroups and VSM (including executive Board members) compared with the percentage of staff in the overall workforce.	Please see Appendix 1	Please see Appendix 1	The % of BME staff in the workforce has increased by 0.97% in the current year and by 0.59 in the previous year The Trust has reviewed demographic workforce data for Trusts in Yorkshire and Humber. This has identified there is a lack of available candidates from across the region.	~The Workforce strategy supports encouraging BME staff development by means of coaching & mentoring, succession planning and talent management. ~Workforce report includes AfC band data by ethnicity, monthly reports showing this data are also produced. ~The Trust's gender pay gap report and action plan has been extended to include ethnicity.
2.	Relative likelihood of BME staff being appointed from shortlisting compared to that of White staff being appointed from shortlisting across all posts	1.08	0.71	The data shows that BME applicants are less likely to be appointed from shortlisting than white applicants.	~ Continue to engage with BME communities in North Kirklees through 'New Horizons' project with the local schools to encourage consideration of the Trust and the NHS as an employer of choice. ~ Promote Apprenticeship's in North & South Kirklees by means of a targeted approach with the BME communities
3.	Relative likelihood of BME staff entering the formal disciplinary process, compared to that of White staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation*	0.77	0.63	The average figure required by the Indicator shows that BME staff are less likely to enter a formal disciplinary process than White staff.	~ The Trust will continue to engage with the BAME staff network and staff side reps to support this process.

	*Note: this indicator will be based on data from a two year rolling average of the current year and the previous year					
4	Relative likelihood of BME staff accessing non-mandatory training and CPD as compared to White staff	1.00		0.93	The data show that BME staff are equally as likely to access non-mandatory training and CPD as White staff. The data includes medical staff.	~ Maintain robust process for training data collection and collation, including ongoing monitoring on break down by staff group ~ In line with Values Based Appraisal policy will continue to monitor uptake and will undertake random sample on qualitative data.

	Indicator	Data for reporting year		Data for previous year		Narrative – the implications of the data and any additional background explanatory narrative	Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective
	For each of these four staff survey indicators, the Standard compares the metrics for each survey question response for White and BME staff						
5.	KF25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months	White	28.00	White	29.06	The 2018 staff survey was sent to all staff in the Trust. The response rate was good (1643 responded) at 40%. However this is 4% below the previous year and is slightly below average compared with other similar NHS organisations (45%). 2018 staff survey indicates that the BME staff who responded indicated they were more likely to experience harassment and bullying from service users and carers than white staff. The 4 key priorities for improving staff and service user experience are: • Increasing staff engagement • Preventing harassment & bullying • Workplace wellbeing	~ Continue to work to improve the return rate of the staff survey by supporting managers to understand the importance of regular staff feedback. ~ Engage with BME staff network to improve understanding of the survey issues, actions that can be taken, support that can be given ~The RACE Forward network was established to review support and actions required regarding harassment and bullying from service users and carers. In addition we have formed a cross organisational group to look at WRES 5 with other similar NHS organisations in the region. ~ In 2019 we spoke to nearly 800 staff in our 'engage and listen' events looking at next steps for the Trust in 4 key areas and re-enforcing the importance of staff feedback. This will support our work to improve the
		BME	32.40	BME	36.05		

						• Improving the quality of appraisal	return rate of the staff survey.
6.	KF26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months	White	19.10	White	18.90	2018 staff survey indicates that the BME staff who responded indicated they were more likely to experience harassment and bullying from staff than white staff. The Trust works with wellbeing specialist Robertson Cooper, and plans to undertake our next wellbeing survey for staff in Spring 2020. This survey also captures WRES issues. The data will be analysed and the findings will inform wider Trust strategies and plans	~ Continue to work to maintain the return rate of the staff survey by supporting managers to understand the importance of regular staff feedback. ~ Wellbeing survey results will be shared with Extended EMT and BDU's (Business Delivery Units) where actions plans will be agreed. This will include action around harassment and bullying (linked to the 4 key themes). Progress in this area will be reviewed through the Wellbeing at work partnership group. ~ Following on from the 'engage and listen' events we are looking at developing a revised framework for the prevention of harassment and bullying. This will include looking at rights and responsibilities and relaunching the H&B advisor roles. ~ Engage with BME staff network to improve understanding of the survey issues, actions that can be taken, support that can be given ~ Refresh Middle Ground, a 2 day forum for senior leaders, focussing the 4 key priorities. The main emphasis will be on leadership actions and behaviours that will support us in developing the Trust to be a 'great place to work'.
		BME	28.40	BME	22.97		
7	KF21. Percentage believing that the Trust provides equal opportunities for career progression or promotion	White	86.90	White	87.28	2018 staff survey indicates that the BME staff who responded indicated they were more negative regarding believing the Trust provides equal opportunities for career progression or promotion than white staff. The Trust continues to sponsor BME staff onto the NHS Leadership Academy 'Stepping Up' and 'Ready Now' national programmes along with the Regional RADAR development programme. These offers are incorporated in the Trust's Leaders and Managers	~ The Workforce strategy supports encouraging BME staff development by means of coaching & mentoring, succession planning and talent management ~ The Trust's 'Moving Forward' programme will be delivered between October 19 and April 2020 and includes BME staff from 2 of our MH partners in West Yorkshire and 3 of our partners in the Wakefield Continue Care alliance. In summer 2019 we added coaching conversations to our offer ~Continue to network and benchmark with
		BME	81.30	BME	77.66		

						development pathway and access to 360 feedback is included within these programmes.	other Trusts, for example, through the regional E&D network and look at examples of good practice nationally ~Improving the quality of appraisals is one of our 4 key priorities for improving staff and service user experience
8	Q17b. In the last 12 months have you personally experienced discrimination at work from any of the following? b) Manager/team leader or other colleagues	White	4.60	White	5.40	2018 staff survey indicates that the BME staff who responded indicated they were more likely to experience discrimination at work from their Manager/team leader or other colleagues than white staff.	~ Continue to work to maintain the return rate of the staff survey by supporting managers to understand the importance of regular staff feedback. ~Engage with BME staff network to improve understanding of the survey issues, actions that can be taken, support that can be given. ~ Following on from the 'engage and listen' events we are looking at developing a revised framework for the prevention of harassment and bullying. This will include looking at rights and responsibilities and relaunching the H&B advisor roles. ~ Refresh Middle Ground, a 2 day forum for senior leaders, focussing the 4 key priorities. The main emphasis will be on leadership actions and behaviours that will support us in developing the Trust to be a 'great place to work'.
		BME	8.10	BME	13.01		
	Board representation indicator. For this indicator, compare the difference for white and BME staff						
9	Percentage difference between the organisations Board voting membership and its overall workforce **2019** Percentage difference between the organisations Board membership and its overall workforce disaggregated by:			-9.02		The Trust has appointed 2 BME Board members since April 18. Barnsley 2.13% BME population Calderdale 10.32% BME population Kirklees 20.87% BME population Wakefield 4.57% BME population	~ Our Trust Board continues to participate in a pilot for the Insight Programme which assists people from BME communities to be represented on Trust Board. ~ BME staff can access the in- house systems leader/aspiring directors programme and coaching for senior leaders/managers which may support the development of a more diverse Board, along with a Board development programme via NHSI

	Voting membership of Board Executive membership of Board	+7.20 +4.8			

Note 1: All provider organisations to whom the NHS Standard Contract applies are required to conduct staff surveys though those surveys for organisations that are not NHS Trusts may not follow the format of the NHS Staff Survey.

Note 2: Please refer to the Technical Guidance for clarification on the precise means of each indicator.

Report on the WRES indicators, continued

6.   Are there any other factors or data which should be taken into consideration in assessing progress? Please bear in mind any such information, action taken and planned may be subject to scrutiny by the Co-ordinating Commissioner or by regulators when inspecting against the "well led domain"

The Trust also publishes a detailed Equality Workforce Monitoring Annual Report on our website, link at No 7 below. Progress regarding the Equality agenda is monitored by the Trust Board at the Equality and Inclusion Committee

The Trust provides secure services across Yorkshire and Humber which has a different population make up compared to that of its local services.

7.   If the organisation has a more detailed Plan agreed by its Board for addressing these and related issues you are asked to attach it or provide a link to it. Such a plan would normally elaborate on the steps summarised in section 5 above setting out the next steps with milestones for expected progress against the metrics. It may also identify the links with other work streams agreed at Board level such as EDS2

The Trust has developed an integrated EDS2 and WRES workforce action plan, please see link below:
https://www.southwestyorkshire.nhs.uk/about-us/performance/workforce-equality/