

Workforce Race Equality Standard (WRES) reporting template

Name of organisation

Maidstone and Tunbridge Wells NHS Trust

Date of report :

Month **July**

Year **2018**

Name and title of Board lead for the WRES

Simon Hart, Director of Workforce

Name and contact details of lead manager compiling this report

Jo Garrity, Head of Staff Engagement and Equality

Jo.garrity@nhs.net

Names of commissioners this report has been sent to

Name and contact details of coordinating commissioner this report has been sent to

Unique URL link on which this report and associated Action Plan will be found

This report has been signed off by on behalf of the board on:

Simon Hart, Director of Workforce

27/9/18

Background narrative

9. Any issues of completeness of data

None

10. Any matters relating to reliability of comparisons with previous years

None

11. Total number of staff employed within this organisation at the date of the report?

5658

12. Proportion of BME staff employed within this organisation at the date of the report?

21%

13. The proportion of total staff who have self reported their ethnicity?

97%

14. Have any steps been taken in the last reporting period to improve the level of self reporting by ethnicity?

Yes. Targeted emails and letters have been sent to staff who had not declared their ethnic origin on ESR.

15. Are any steps planned during the current reporting period to improve the level of self reporting by ethnicity?

Yes. Targeted emails and letters will be sent to staff who have not declared their ethnic origin on ESR.

Workforce Data

16. What period does the organisation's workforce data refer to?
1/4/17 – 31/3/18

Workforce Race Equality Indicators

For each of these workforce indicators, compare the data for White and BME staff.

17. Percentage of staff in each of the AfC bands 1- 9 and VSM (including executive Board members) compared with the percentage of staff in the overall workforce. Organisations should undertake this calculation separately for non-clinical and for clinical staff

Data for reporting year (2018):

Band	Non Clinical	
	White	BME
Under Band 1	2	0
Band 1	164	167
Band 2	314	46
Band 3	256	22
Band 4	274	16
Band 5	81	6
Band 6	62	7
Band 7	42	4
Band 8A	46	5
Band 8B	20	2
Band 8C	12	1
Band 8D	8	0
Band 9	5	0
VSM	6	0
Total	1292 (23%)	276 (5%)

Band	Clinical	
	White	BME
Under Band 1	0	0
Band 1	16	4
Band 2	363	140
Band 3	265	42
Band 4	114	6
Band 5	582	263
Band 6	628	105
Band 7	481	51
Band 8A	109	21
Band 8B	28	1
Band 8C	11	0
Band 8D	7	1
Band 9	1	0
VSM	2	0
Total	2607 (46%)	634 (11%)

Data for previous year (2017):

Band	Non Clinical	
	White	BME
Under Band 1	5	0
Band 1	171	168
Band 2	335	42
Band 3	266	20
Band 4	284	19
Band 5	76	3
Band 6	60	6
Band 7	48	3
Band 8A	52	2
Band 8B	18	2
Band 8C	14	1
Band 8D	7	0
Band 9	4	0
VSM	6	1
Total	1346 (26%)	267 (5%)

Band	Clinical	
	White	BME
Under Band 1	0	0
Band 1	20	4
Band 2	369	133
Band 3	284	36
Band 4	104	6
Band 5	677	279
Band 6	626	91
Band 7	478	45
Band 8A	103	19
Band 8B	27	2
Band 8C	10	1
Band 8D	6	1
Band 9	1	0
VSM	2	0
Total	2707 (53%)	617 (12%)

The implications of the data and any additional background explanatory narrative.

The number of clinical BME staff has decreased by 1% on the previous year.

Action taken and planned including eg. Does the indicator link to EDS2 evidence and/or a corporate Equality Objective.

This area will be addressed by actions taken to reduce any disproportion in the recruitment process.

This indicator links to EDS2 outcomes 3.1.

This also links to Corporate Equality Objective 3 to enable a robust recruitment process to be in place with appropriate checks and balances to avoid discrimination.

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

Data for reporting year (2018):

White: 0.25

BME: 0.19

White staff are 0.25 times more likely to be appointed than BME staff

Data for previous year (2017):

White: 0.29

BME: 0.19

White staff are 1.48 times more likely to be appointed than BME staff

The implications of the data and any additional background explanatory narrative.

Whilst white staff are still more likely to be appointed from shortlisting than BME staff, the gap has reduced once again this year.

Action taken and planned including eg. Does the indicator link to EDS2 evidence and/or a corporate Equal Objective.

An in-depth exploration into recruitment data will identify performance against this indicator across the Trust. Targeted actions will address those areas where changes will have the greatest impact.

This links to EDS2 Outcome 3.1 Fair NHS recruitment and selection processes lead to a more representative workforce at all levels.

This also links to Corporate Equality Objective 3 - work with the Learning and Development team to create a recruitment training program addressing unconscious bias to enable a robust recruitment process to be in place with appropriate checks and balances to avoid discrimination

19. Relative likelihood of staff entering the formal disciplinary process, as measured by entry into 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 (2018):

White: 0.012

BME: 0.010

BME staff are 0.88 times more likely to enter the disciplinary process than white staff

Data for previous year (2017):

White: 0.010

BME: 0.011

BME staff are 1.13 times more likely to enter the disciplinary process than white staff

The implications of the data and any additional background explanatory narrative.

Whilst BME staff are more likely to enter the disciplinary process than white staff, the number has reduced again this year.

Action taken and planned including eg. Does the indicator link to EDS2 evidence and/or a corporate Equal Objective.

A review of disciplinary cases was undertaken by the Head of Employee Relations, Head of Staff Engagement and Equality and Chair of the Cultural Diversity Network. The review demonstrated that the appropriate action was taken and no evidence of discrimination could be found.

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

Data for reporting year:

White: 0.50

BME: 0.47

White staff are 1.06 times more likely to access non mandatory training than BME staff

Data for previous year:

White: 0.50

BME: 0.66

White staff are 0.75 times more likely to access non mandatory training than BME staff

The implications of the data and any additional background explanatory narrative.

The number of BME staff accessing non mandatory training has decreased this year.

Action taken and planned including eg. Does the indicator link to EDS2 evidence and/or a corporate Equal Objective.

The Stepping Up Programme from the NHS Leadership Academy has been advertised throughout the Trust. The Cultural Diversity Network were used as a conduit for dissemination and encouragement.

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. KF25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months.

	2018	2017
White	26.99%	31.55%
BME	31.15%	22.06%

The implications of the data and any additional background explanatory narrative.

The incidents of staff experiencing harassment from patients has reduced for white staff but increased for BME staff.

Action taken and planned including eg. Does the indicator link to EDS2 evidence and/or a corporate Equal Objective.

This indicator links to EDS2 Outcome 3.4 When at work, staff are free from abuse, harassment, bullying and violence from any source.

This also links to Corporate Objective 4 - Work with Cultural Diversity Network group to celebrate diversity in the Trust and provide a supportive environment to enable the BME community to have a voice.

22. KF26. Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months

	2018	2017
White	25.69%	24.86%
BME	24.59%	21.21%

The implications of the data and any additional background explanatory narrative.

The number of both white and BME staff experiencing harassment from staff has increased this year.

Action taken and planned including eg. Does the indicator link to EDS2 evidence and/or a corporate Equal Objective.

This indicator links to Equality Objective 4: Create and work with Cultural Diversity Network group to celebrate diversity in the Trust and provide a supportive environment to enable the BME community to have a voice.

23. KF21. Percentage believing that trust provides equal opportunities for career progression or promotion.

	2018	2017
White	90.69%	89.3%
BME	77.78%	90.9%

The implications of the data and any additional background explanatory narrative.

The number of white staff believing the Trust provides equal opportunities for career progression has risen this year whilst the number of BME staff has reduced by 22%.

Action taken and planned including eg. Does the indicator link to EDS2 evidence and/or a corporate Equal Objective.

The Cultural Diversity Network has provided an opportunity to support staff in their career progression.

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

	2018	2017
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White	7.95%	6.84%
BME	18.33%	4.62%

The implications of the data and any additional background explanatory narrative.

The number of BME staff experiencing discrimination from their manager or colleagues has increased by a considerable amount this year.

Action taken and planned including eg. Does the indicator link to EDS2 evidence and/or a corporate Equal Objective.

In depth analysis will be undertaken of those areas where levels of staff reporting discrimination are of greatest concern and develop targeted action plans to address issues.

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

White: 17.1%

BME: -13.7%

The implications of the data and any additional background explanatory narrative.

These figures do not take account of those staff who have not declared their ethnicity and therefore are not strictly comparable as all voting members of the board have declared their ethnicity.

Action taken and planned including eg. Does the indicator link to EDS2 evidence and/or a corporate Equal Objective.

None

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

No.

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.