

Response ID ANON-R89M-8J8T-X

Submitted to **Workforce Race Equality Standard (WRES) reporting template**
Submitted on **2018-09-24 13:59:13**

Introduction

1 Name of organisation

Name of organisation:

Guy's and St Thomas NHS foundation Trust

2 Date of report

Month/Year:

September 2018

3 Name and title of Board lead for the Workforce Race Equality Standard

Name and title of Board lead for the Workforce Race Equality Standard :

Julie Screaton. Chief People Officer

4 Name and contact details of lead manager compiling this report

Name and contact details of lead manager compiling this report:

Manal Sadik. Head of Equality, Diversity and Inclusion.

5 Names of commissioners this report has been sent to

Complete as applicable::

Lambeth CCG

Workforce Race Equality Standard reporting template

6 Name and contact details of co-ordinating commissioner this report has been sent to

Complete as applicable.:

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

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

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

Name::

Julie Screaton

Date::

31st August 2018

Background narrative

9 Any issues of completeness of data

Any issues of completeness of data:

A query over the last 3 years has been has involved the inclusion or exclusion of the consultant body To ensure consistency and comparability, the Trust has tended to categorise senior managers as those who are within only Agenda for Change bands. for this years submission the WRES guidelines were followed which may have created a slight difference in values.

10 Any matters relating to reliability of comparisons with previous years

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Self reporting

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

Total nuber of staff employed within this organisation at the date of the report:

16783

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

Proportion of BME staff employed within this organisation at the date of the report:

40%

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

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

89%

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

Have any steps been taken in the last reporting period to improve the level of self-reporting by ethnicity:

Improved self reporting function rolled out to all staff.

Improve transparency and dialogue of the importance of reporting

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

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

Workforce data

16 What period does the organisation's workforce data refer to?

What period does the organisation's workforce data refer to?:

2017-2018

Workforce Race Equality Indicators

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:

non clinical

bme % compared to overall workforce

band 1 76%

band 2 56%

band 3 51%

band 4 41%

band 5 41%

band 6 33%

band 7 32%

band 8a 23%

band 8b 14%

band 8c 13%

band 8d 9%

band 9 6%

VSM 4%

Clinical

band 1 58

band 2 59

band 3 47

band 4 42

band 5 39

band 6 6

band 7 22

band 8a 16

band 8b 10

band 8c 8

band 8d 5

band 9 5

vsm 0

Data for previous year:

non clinical % of BME staff in each band compared to overall workforce

1 68%
2 46%
3 48%
4 34%
5 39%
6 31%
7 25%
8a 3%
8b 11%
8c 8%
8d 5%
9 7%
vsm 6%

Clinical
1 20%
2 62%
3 16%
4 47
5 34
6 31
7 24
8a 17
8b 13
8c 11
8d 14
9 14
vsm 0

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:

A Equality, Diversity and Inclusion 2 year strategy has been signed off to specifically improve the recruitment and progression of BME staff. Improving the widening participation into all roles

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

Data for reporting year:

Relative likelihood of white staff being appointed from shortlisting compared to BME staff is 2.26

Data for previous year:

Relative likelihood of white staff being appointed from shortlisting compared to BME staff is 1.96

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:

Diverse BME panel has been put in place for all 8am above interviews. Written developmental feedback to be given to all internal secondment applications. All Acting -up appointments need to document recruitment advertising and shortlisting

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:

Relative likelihood of BME staff entering the formal disciplinary process compared to white staff is 2.55

Data for previous year:

Relative likelihood of BME staff entering the formal disciplinary process compared to white staff is 2.48

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:

WRES action plan involves the implementation of a decision tree traige process, checkpoints along the process to address alternatives ways of handling the unwanted behaviour, sign off for all disciplinary by senior staff member, training resources, and alternative ways of managing .

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

Data for reporting year:

relative likelihood of white staff accessing non mandatory training and CPD compared to white staff is 0.97

Data for previous year:

relative likelihood of white staff accessing non mandatory training and CPD compared to white staff is 0.59

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

Better reporting to be in place

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

better reporting structures

Workforce Race Equality Indicators

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

White:

29%

BME:

21%

White:

28%

BME:

29%

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:

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

White:

89%

BME:

70%

White:

91%

BME:

70%

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:

As part of the EDI strategy and action plan, career progression opportunities such as secondments and acting up will have robust governance to ensure opportunities are advertised fairly. BME panel on all interviews 8a above and written feedback to all internal candidates with developmental plans.

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.

White:

6%

BME:

12%

White:

6%

BME:

12%

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:

transparent process, better governance structures and more visibility have both improved the reporting and highlight when this is occurring to ensure swift action.

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

White:

24%

BME:

24%

White:

22%

BME:

26%

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:

A number of Trust wide projects have taken place such as Big Conversation, Equality, Diversity and Inclusion events and transparency of processes such as recruitment could have resulted in more staff becoming more confident in reporting.

Workforce Race Equality Indicators

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

White:

78%

BME:

21%

White:

78%

BME:

21%

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:

Improved transparency and visibility of all actions. BME representation on all interview panels 8a above will ensure all appointments include a robust equality element.

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

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

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.

Organisations should produce a detailed WRES Action Plan, agreed by its Board. Such a Plan would normally elaborate on the actions summarised in section 5, setting out the next steps with milestones for expected progress against the WRES indicators. It may also identify the links with other work streams agreed at Board level, such as EDS2. You are asked to attach the WRES Action Plan or provide a link to it.:

The WRES action plan and 2 year EDI strategy are on this page.

EDS2 plan is underway.