Workforce Race Equality Standard

REPORTING TEMPLATE

Template for completion

Name of provider organisation

Leicestershire Partnership NHS Trust

Date of report: month/year

July 2015

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

Alan Duffell - Director of Human Resources and Organisational Development

Name and contact details of lead manager compiling this report

Sandy Zavery - Equality and Human Rights Lead

Names of commissioners this report has been sent to

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

Unique URL link on which this report will be found (to be added after submission)

This report has been signed off by on behalf of the Board on (insert name and date)

Publications Gateway Reference Number: 03496

Report on the WRES indicators

1. Background narrative

a. Any issues of completeness of data

Ethnicity was know for 97.8% of the workforce (5403 / 5524 staff members). Of those for whom ethnicity was not known, 119 people chose to withhold the information and the field was blank for a further two people. The Equality and Human Rights Team at Leicestershire Partnership NHS Trust undertook an exercise to improve the completeness of equality monitoring data for staff in February and March 2013 by asking staff to update their Electronic Staff Record; the team will follow-up this work with engagement exercises in June and July 2015 to determine why some staff choose to withhold certain information. Concerns identified will be addressed where possible and a subsequent exercise to improve the completeness of equality monitoring data for staff will be undertaken in 2016.

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

This is the first year that the WRES has been in effect, although Leicestershire Partnership has undertaken detailed equality monitoring of its workforce within and beyond the domains outlined in the WRES (including detailed analyses of ethnicity that consider the heterogeneity of the "BME" group) since 2010/11. These analyses follow the technical guidance issued by the Equality and Human Rights Commission on meeting the Public Sector Equality Duty described in the Equality Act 2010.

2. Total numbers of staff

a. Employed within this organisation at the date of the report

5524

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

19.34%

Report on the WRES indicators, continued

3. Self reporting

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

97.8%

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

Staff were asked and supported to update their Electronic Staff Record in February and March 2013

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

Engagement exercises to ascertain why some staff withhold certain information will take place in June and July 2015, followed by a data refresh

4. Workforce data

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

31st March 2015 (workforce snapshot); year to March 2015 (recruitment); two years to March 2015 (disciplinary cases); 2014 (Staff Survey)

Report on the WRES indicators, continued

5. Workforce Race Equality Indicators

For ease of analysis, as a guide we suggest a maximum of 150 words per indicator.

	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 and BME staff.				
1	Percentage of BME staff in Bands 8-9, VSM (including executive Board members and senior medical staff) compared with the percentage of BME staff in the overall workforce	14.04% BME band 8/9/VSM vs 19.34% BME overall		BME Bands 8-9/VSM < BME workforce overall (statistically significant at alpha = .05)	Mentoring activity to provide guidance to BME groups, which enables them to gain appropriate understanding of roles and expectations at higher bands, leading to their applications being
2	Relative likelihood of BME staff being appointed from shortlisting compared to that of White staff being appointed from shortlisting across all posts.	0.58		BME people were 0.58 times as likely as (i.e., less likely than) White people to be appointed if shortlisted (statistically significant at alpha = .05)	Recruitment team to continue promotion of Trust vacancies in a variety of ways to raise the Trust's profile, and to look beyond NHS Jobs
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* *Note: this indicator will be based on data from a two year rolling average of the current year and the previous year.	2.08		BME staff were 2.08 times as likely as (i.e., more likely than) White staff to enter a formal disciplinary process (statistically significant at alpha = .05).	We will continue to monitor the data, as part of the EHRC guidance to assess any difference. Analysis of the latest evidence suggests that this pattern is not ongoing. The figure "2.08" is based on cases closed in the two years to March 2015 (following the technical guidance on calculation) and so does not necessarily reflect the current
4	Relative likelihood of BME staff accessing non-mandatory training and CPD as compared to White staff	0.93		BME staff were 0.93 times as likely as (i.e., less likely than) White staff to access non-mandatory	We will continue to monitor the data, as part of the EHRC guidance to assess any difference.

Report on the WRES indicators, continued

	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	KF 18. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months	White 28.38% BME 26.43%	White BME	BME ≈ White (not statistically significant at alpha = .05)	The Trust is undertaking a campaign additional to the support provided to raise awareness of different avenues for dealing with inappropriate
6	KF 19. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months	White 20.30% BME 23.84%	White BME	BME ≈ White (not statistically significant at alpha = .05)	The Trust is undertaking a campaign additional to the support provided to raise awareness of
7	KF 27. Percentage believing that trust provides equal opportunities for career progression or promotion	White 90.62% BME 76.29%	White BME	BME < White (statistically significant at alpha = .05)	We will continue to promote awareness of the different courses available for staff to develop
8	Q23. 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 5.58% BME 14.29%	White BME	BME > White (statistically significant at alpha = .05)	We continue to monitor this area as part of Trust requirements and implement action to address any shortfalls.
	Does the Board meet the requirement on Board membership in 9?				
9	Boards are expected to be broadly representative of the population they serve	Board: 7.14% BME		BME Board ≈ BME population served in statistical terms (statistically significant at alpha = .05), but	Trust Board continue to recognise the need to reflect the diversity of the population and works

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."

A more detailed consideration of ethnicity within Leicestershire Partnership NHS Trust's workforce can be found in the Trust's Annual Equality Report: (in press, to be published on the Trust's equality website July/August 2015).

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.

In press, to be published on the Trust's equality website July/August 2015.