



Frimley Health
NHS Foundation Trust

Workforce Race Equality Standard (WRES) Report 2019

Why is the Workforce Race Equality Standard needed?

To address a lack of progress in race equality for Black & Minority staff in the NHS (as cited in “Snowy White Peaks of the NHS Report”), in April 2015 NHS England introduced the NHS Workforce Race Equality Standard (WRES).

What do NHS Trusts need to do?

NHS Trusts must publish annually:

- Data against 4 nationally set workforce indicators and 4 NHS Staff Survey scores relating to White & BME staff
- Comparison of banding, disciplinary, recruitment and training data with the previous year’s submission
- Action plans to address low representation of Black and Minority (BME) representation at Senior Management levels in the NHS

What is different about the Workforce Race Equality Standard?

NHS Trusts can now calculate a metric to indicate how White staff and BME staff fare when accessing training, entering disciplinary processes and recruitment (see WRES indicators 2 – 4 (in the table below).

The metric which is calculated is then compared against the baseline figure which is “1” and depending on BME representation in the workforce this baseline can broadly mean:

- **Exactly 1** suggests “parity” between White and BME staff and reflects ethnic diversity in the workforce
- **Less than 1** suggests BME staff are faring well
- **Between 1 - 2** suggests BME staff are faring less well than White Staff in the workforce
- **Above 2** suggests BME staff are faring significantly worse than White Staff in the workforce

Workforce Race Equality Indicators

Indicator		Data for reporting year 2019	Data for previous year 2018	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
1	Percentage of BME staff in Bands 1-9	Band 1: 60.2% Band 2: 39.3% Band 3: 28.6% Band 4: 21.8% Band 5: 48.3% Band 6: 34.1% Band 7: 21.2% Band 8a: 19.4% Band 8b: 21.3% Band 8c: 11.5% Band 8d: 5.9% Band 9: 0%	Band 1: 56.9% Band 2: 36.2% Band 3: 25.4% Band 4: 20.6% Band 5: 38.7% Band 6: 31.7% Band 7: 20.7% Band 8a: 17.6% Band 8b: 18.1% Band 8c: 8.6 % Band 8d: 13.3% Band 9: 0%	The proportion of BME staff at Bands 8a - 8d have shown marked increases compared with the previous years' figures The ethnic diversity of the Trust's workforce overall (Clinical and Non – Clinical) is: <ul style="list-style-type: none"> • 63.7% White (White British, Irish, Other, European) • 33.4% Black & Minority Ethnic (BME) (Mixed Race, South East Asian, Black, Chinese, Filipino, Other) 	
2	Relative likelihood of BME staff being appointed from shortlisting compared to that of White staff being appointed from shortlisting across all posts.	White applicants 2 times more likely to be shortlisted than BME applicants	White applicants 1.90 times more likely to be shortlisted than BME applicants	2018/19 figures for shortlisting and appointments by ethnicity show 59.4% of BME staff were shortlisted compared to 38.5% White & new starters were 45 % BME & 49.5% White – White staff fare better in appointments than shortlisting	
3	Relative likelihood of BME staff entering the formal disciplinary process, compared to White staff entering the same process	BME Staff 1.21 times more likely to enter formal processes	BME Staff 1.17 times more likely to enter formal processes	Analysis of grounds for formal disciplinary is underway to draw out any key themes or common reasons for investigations to take place. ACAS have been commissioned to deliver employment law update training for senior managers to hear disciplinary and grievance cases	
4	Relative likelihood of BME staff accessing non-mandatory training and Continuing Professional Development (CPD) compared to White staff	No difference between BME staff and White staff	White staff 0.86 times more likely than BME staff to access training	The data for 2019 includes staff accessing CPD job related training.	

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For each of these four NHS 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 Staff: 26% BME Staff: 28%	White Staff: 26% BME Staff: 26%	Link to Employment E&D Objective 2019 – 2023 Drop in sessions have been held in departments where Staff Survey scores are higher than the organisational average. In these sessions staff have been able to develop actions which the department will take forward.	
6	KF 19. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months	White Staff: 21% BME Staff: 22%	White Staff: 21% BME Staff: 22%	E&D objective as above	
7	KF 27. Percentage believing that trust provides equal opportunities for career progression or promotion	White Staff: 89% BME Staff: 78%	White Staff: 88% BME Staff: 78%	E&D objective as above	
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 Staff: 6% BME Staff: 12%	White Staff: 7% BME Staff: 13%	E&D objective as above	
9	Percentage difference between (i) the organisation's Board voting membership and its overall workforce and (ii) the organisation's Board Executive membership and its overall workforce	(i) -8.3% (ii) -19.1%	(i) - 8.3% (ii) -19.1%		