



Frimley Health
NHS Foundation Trust

Workforce Race Equality Standard (WRES) Report 2021

Why is the Workforce Race Equality Standard needed?

To address a lack of progress in race equality for Black & Minority staff (BAME) 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 & BAME staff
- Comparison of banding, disciplinary, recruitment and training data with the previous year’s submission
- Action plans to address low representation of BAME 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 BAME 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”. Depending on BAME representation in the workforce this baseline broadly means:

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

Workforce Race Equality Indicators

Indicator		Data for reporting year 2021	Data for previous year 2020	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: 65% Band 2: 42% Band 3: 29% Band 4: 28% Band 5: 55% Band 6: 38% Band 7: 25% Band 8a: 22% Band 8b: 18% Band 8c: 15% Band 8d: 0% Band 9 & VSM: 3.6%	Band 1: 56.8% Band 2: 41.9% Band 3: 27.2% Band 4: 22.4% Band 5: 53.4% Band 6: 34.2% Band 7: 23% Band 8a: 20.8% Band 8b: 20% Band 8c: 14.3% Band 8d: 0% Band 9 & VSM: 10%	The proportion of BME staff at Band 8a, 8c & 9 has increased, for 8b it has decreased and at 8d it is still at zero. The variation in trend is difficult to interpret just from these figures, however it has been established that turnover at Band 8d and VSM is less likely than the entry points to senior management. The ethnic diversity of the Trust's workforce overall (Clinical and Non – Clinical) is: <ul style="list-style-type: none"> • 58.1% (60.2% in 2020) White (White British, Irish, Other, European) • 39.3% (37.3% in 2020) Black, Asian, Minority Ethnic (BAME) (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 1.17 times more likely to be shortlisted than BME applicants	White applicants 1.38 times more likely to be shortlisted than BME applicants	2019/20 figures for shortlisting and appointments by ethnicity 62.6% (66.5% in 2019/20) of BAME applicants were shortlisted compared to 34.9% (31.2% in 2019/20) of White applicants. Appointments show 56% (49.7% in 2019/20) were White and 35% (36% in 2019/20) were BAME. Total number of applications has decreased from 2019/20 by over 4,000 applicants and BAME outcomes have improved compared with White applicants.	
3	Relative likelihood of BME staff entering the formal disciplinary process, compared to White staff entering the same process	0.9 times less likely to enter formal processes	BME Staff 1.05 times more likely to enter formal processes	This metric has improved further for the Trust to the point BAME staff fare better than White Staff.	
4	Relative likelihood of BME staff accessing non-mandatory training and Continuing Professional Development (CPD) compared to White staff	White staff are 0.9 times less likely to access CPD training	White staff are 1.3 times more likely to access CPD training	The data for 2021 shows positive progress as there has been a marked improvement for BAME staff compared with the previous year.	

Indicator		Data for reporting year 2020	Data for previous year 2019	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
5	KF 18. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months	White Staff: 29% BAME Staff: 31%	White Staff: 26% BME Staff: 28%	Link to Employment E&D Objective 2019 – 2023 The BAME Staff Forum is playing a key role in taking forward action linked to this staff survey item. Black History Month has been marked and celebrated jointly with Freedom to Speak Up Month. For example a webinar was held exploring barriers to speaking up and whether diversity and organisational culture are factors in preventing people from speaking up.	
6	KF 19. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months	White Staff: 21% BAME Staff: 24%	White Staff: 21% BME Staff: 22%	Activity to tackle violence and aggression is being developed	
7	KF 27. Percentage believing that trust provides equal opportunities for career progression or promotion	White Staff: 90% BAME Staff: 78%	White Staff: 89% BME Staff: 78%	E&D objective as above	
8	Experiencing discrimination at work from any of the following? b) Manager/team leader or other colleagues	White Staff: 6% BAME Staff: 13%	White Staff: 6% BME Staff: 12%	Reverse Mentoring is now at cohort 3 and participation has been extended to staff from all 9 protected characteristics. Reverse Mentoring is an expectation on Service Leader and Chief of Service development programmes. Awareness of micro aggressions has been identified as a priority intervention and this is being explored through this process.	
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) - 26.9% (ii) - 24.9%	(i) -12.3% (ii) - 12.3 %		