



Title:	Workforce Race Equality Standard 2023						
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Purpose of the report and summary of key issues:	The Workforce Race Equality Standard 2023 (WRES) focuses on specific metrics regarding (Black, Minority and Ethnic) BME employees and their work experiences. Key areas of analysis are measured against data from the electronic staff record (ESR) and the National Staff Survey 2022.						
	The metric framework includes a breakdown of:						
	<ul> <li>BME staff within the agenda for change bandings in four clusters, (1-4, 5-7, 8a-8b, and 8c-9 and VSM).</li> <li>An assessment regarding the likelihood of colleagues being appointed from shortlisting,</li> <li>Colleagues entering the capability or disciplinary process.</li> <li>The number of BME employees who are facing bullying, and harassment from patients, colleagues, and managers.</li> <li>Comparisons between the membership of the Board and its contrast with the BME workforce.</li> </ul>						
	Findings from the 2023 report show an improvement in some of the indicators such as:						
	<ul> <li>The total percentage number of BME employees in the Trust (excluding Board members) has increased by 1.2%</li> </ul>						
	• The appointment of two BME Non-Executive Directors has had a positive impact on the difference between Board to Workforce findings. The data shows an increase from 1.9% in 2022 to 10.4% in 2023 for the Board with overall employee ethnicity at 11.8%.						
	<ul> <li>We have seen a decrease in harassment for BME colleagues from patients, managers, staff/other colleagues.</li> </ul>						
	The report also contains an action plan to focus on areas which have not improved, or where there are differences between perception or experience of BME colleagues, this includes that:						





	<ul> <li>The relative likelihood of being appointed from shortlisting has worsened in the last reporting year from 25.7% to 8.8% for BME colleagues.</li> <li>BME staff feel less likely that the Trust acts fairly with regard to promotion and career progression.</li> <li>There remains further work to do on recruitment and shortlisting for Consultant roles.</li> </ul>					
Trust Strategy and	The Patient and Child First					
Strategic Ambitions	Improving the health and wellbeing of our patients, children and co	ommunities				
	Best Quality, Safest Care					
	Person Centred, Integrated Care; Strong Partnerships					
	Great Start in Life					
	At Our Best: Making HDFT the best place to work	x				
	An environment that promotes wellbeing					
	Digital transformation to integrate care and improve patient, child					
	and staff experience					
	Healthcare innovation to improve quality					
Corporate Risks	N/A					
Report History:	N/A					
Recommendation:	The Board is requested to discuss and note the 2023 WRES metrics and the action plan that will attempt to address areas that need improving for BME colleagues.					
	The data element of this report will be published on our HDFT website on 31 October 2023 following approval by the Board.					





# NHS Workforce Race Equality Standard (WRES)

Annual Report 2023 Harrogate and District NHS Foundation NHS Trust





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### Introduction

Welcome to our Workforce Race Equality Standard (WRES) Annual Report 2023.

The report provides our internal data and metrics for the last twelve months, the progress we have made to date and an action plan to allow us to continue to develop our approaches, initiatives, and activities during 2023 and beyond.

To help contextualise the information in this report, data from the Office of National Statistics has been sourced. The demographic data of people living in Harrogate and surrounding districts highlights that 1.8% of the population are Asian, 0.6% identify as being Black, Black British, Black Welsh, Caribbean or African and 1.6% are from mixed ethnic groups. Harrogate as a town population has 95.4% White communities living here.

### Our commitment to Promoting Equal Opportunities for those who are BME.

The Trust recognises how important it is to support and improve the experiences of our colleagues who identify as Black, Minority and Ethnic groups, (BME). Over the last twelve months some of the key things we have done, are the introduction of a BME leadership development programme and the completion of the first reciprocal mentoring programme which have both been well attended.

In addition, we continue to develop our BME and Allies staff network group, our Internationally Recruited Nurses, and Allied Healthcare Professionals.

As a Trust, we want to make Harrogate District Foundation NHS Trust (HDFT) a more inclusive place to work and have set out an action plan at the end of this report to help achieve this.



### Metric 1 – Workforce ethnicity

In this section, we shall be examining the data regarding employees who are paid using the Agenda for Change pay and Senior Manager pay bands which are represented by bands 1-4, 5-7, 8a-8b and 8c-9 and VSM (Very Senior Manager) compared with the percentage of staff in the overall workforce.

### The profile of our BME employees versus NHS Averages:

The total percentage number of BME employees in the Trust (excluding Board members) has increased by 1.2% versus last year but is still lower than the overall average for the NHS.

	NHS Average	HDFT: 2023	HDFT: 2022	HDFT: 2021
Staff Who Identify as BME	24.2%	11.8%	10.6%	10.5%

### The total percentage number of BME employees within each bands:

Non-Clinical Staff	HDFT: 2023
Bands 1-4	5.6%
Bands 5-7	10.0%
Bands 8a-8b	1.6%
Bands 8c -9 and VSM	5.3%

Clinical Staff	HDFT: 2023
Bands 1-4	11.7%
Bands 5-7	10.7%
Bands 8a-8b	3.2%
Bands 8c-9 and VSM	12.5%

The bands which have the largest number of BME staff are clinical bands 2, 6 and 7.



## Metric 2 – Recruitment shortlisting

### Relative likelihood of staff being appointed from shortlisting across all posts

31st March 2023							
Indicator		White	BME	Not Declared	Total		
Number of staff in	Headcount	3,961	569	284	4,814		
the Workforce	%	82.3%	11.8%	5.9%			
Relative likelihood of staff being	Number of shortlisted applicants	3,815	1,504	276	5,595		
appointed from shortlisting	Number appointed from shortlisting	733	132	115	980		
across all posts	Relative Likelihood of appointed from shortlisting	19.2%	8.8%	41.7%	17.5%		
	31st March 2	2022					
Indicator		White	BME	Not Declared	Total		
Number of staff in	Headcount	3,825	484	260	4,569		
the Workforce	%	83.7%	10.6%	5.7%			
Relative likelihood of staff being appointed from shortlisting	Number of shortlisted applicants	2,810	795	199	3,804		
	Number appointed from shortlisting	931	204	151	1,286		
across all posts	Relative Likelihood of appointed from shortlisting	33.1%	25.7%	75.9%	33.8%		

The relative likelihood of being appointed from shortlisting has declined in the last reporting year from 25.7% to 8.8% for BME colleagues.





## Metric 3 – Disciplinary action

The relative likelihood of BME staff entering the formal disciplinary process compared to white staff

2023	White	BME	Unknown
Likelihood of staff entering the formal disciplinary process	0.23%	0.00%	0.35%
Relative likelihood of BME staff entering the formal disciplinary process compared to White staff		0.00	
2022	White	BME	Unknown
Likelihood of staff entering the formal disciplinary process	0.42%	0.21%	0.77%
Relative likelihood of BME staff entering the formal disciplinary process compared to White staff		0.49	

In 2023, no BME colleagues entered the disciplinary process.





### Metric 4 – Access to training

		White	BME	Unknown		White	BME	Unknown
Number of staff accessing non- mandatory training and CPD		1,298	294	129		1,675	261	112
Likelihood of staff accessing non- mandatory training and CPD	2023	32.8%	51.7%	45.4%	2022	43.8%	53.9%	43.1%
Relative likelihood of White staff accessing non- mandatory training and CPD compared to BME staff.			0.63	<u>.</u>		0.81		

Relative likelihood of staff accessing non-mandatory training and CPD

BME colleagues are more likely to attend non-mandatory CPD than white colleagues. At March 2023 the likelihood ratio was 0.63; lower than "1.0" or equity to a small degree. Specifically, 1298 out of 3961 white staff undertook non-mandatory training (32.8% of the white workforce) compared to 294 out of 569 BME staff (51.7% of the BME workforce).



### Metrics 5, 6, 7 and 8 – Bullying and harassment

Bullying and harassment by patients, staff and managers and percentage of staff believing that their trust provides equal opportunities for career progression or promotion

Metric			22	2021	
		White	BME	White	BME
5	Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months	23.8%	29.9%	26.6%	32.2%
6	Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months	15.9%	27.5%	27.2%	30.1%
8	Percentage of staff experiencing harassment, bullying or abuse from their manager, team leader or other colleague	9.6%	11.4%	8.0%	18.9%
7	Percentage believing that trust does not provide equal opportunities for career progression or promotion	42.8%	59.8%	55.8%	42.1%

We have seen a decrease in harassment for BME colleagues from patients, managers, staff/other Colleagues.

BME staff feel less likely that the Trust acts fairly with regard to promotion and career progression.





### Metric 9

The number of BME directors and non-executive directors compared to the overall workforce.

	2023	White Board Members	BME Board Members	Unknown Ethnicity Board Members	2022	White Board Members	BME Board Members	Unknown Ethnicity Board Members
Total Board Members		77.8%	22.%	0.0%		87.5%	12.5%	0.0%
: Executive Board Members		87.5%	12.5%	0.0%		87.5%	12.5%	0.0%
: Non-Executive Board Members		70.0%	30.0%	0.0%		87.5%	12.5%	0.0%
	2023	White Board Members	BME Board Members	Unknown Ethnicity Board	2022	White Board Members	BME Board Members	Unknown Ethnicity Board
Number of staff in overall workforce		3,961	569	284		3,825	484	260
Total Board Members % by Ethnicity		77.8%	22.2%	0.0%		87.5%	12.5%	0.0%
Voting Board Member % by Ethnicity		77.8%	22.2%	0.0%		87.5%	12.5%	0.0%
Non-Voting Board Members % by Ethnicity		-	-	-		-	-	-
Executive Board Members % by Ethnicity		87.5%	12.5%	0.0%		87.5%	12.5%	0.0%
Non-Executive Board Members % by Ethnicity		70.0%	30.0%	0.0%		87.5%	12.5%	0.0%
Overall workforce % by Ethnicity		82.3%	11.8%	5.9%		83.7%	10.6%	5.7%
Difference (Total Board - Overall Workforce)		-4.5%	10.4%	-5.9%		3.8%	1.9%	-5.7%





The appointment of two BME Non-Executive Directors has had a positive impact on the difference between Board to Workforce findings. The data shows an increase from 1.9% in 2022 to 10.4% in 2023 for the Board with overall employee ethnicity at 11.8%.

## Has your Trust taken action to facilitate the voices of BME colleagues in your organisation to be heard (provide an example or action plan).

The BME staff network Group continues to grow in membership and our non-executive director of the Board and Equality Champion attends many of these meetings in support. This helps demonstrate our commitment and direct line of communication to the Board.

Further details of the network group are found on our careers landing page and additional links for our Internationally Recruited Nurses are collated on the Intranet.

We now deliver unconscious bias training on a regular basis across our sites. We have positive imagery on site highlighting our BME colleagues as part of our "ask me my preferred name" campaign. A revised system of equality impact assessments has been launched and is now in place.

### **Bank WRES**

For the first time, elements of the Workforce Race Equality Standard 2023 report have been disaggregated to review Bank staff separately from the permanent workforce.

Indicator 1 Active Bank Worker Headcounts across staffing groups by ethnicity group and gender	Bands 1-4	Bands 5-8a
Women BME – Clinical	1	1
Women White – Clinical	29	26
Women Unknown Ethnicity – Clinical	9	0
Men BME – Clinical	0	0
Men White – Clinical	14	7
Men Unknown Ethnicity – Clinical	3	1
Women BME – Non-clinical	0	0
Women White – Non-clinical	10	1
Women Unknown Ethnicity – Non-clinical	0	0



Men BME – Non-clinical	2	0
Men White – Non-clinical	3	1
Men Unknown Ethnicity – Non-clinical	1	0
Medical and Dental All Grades	Male	Female
Medical and Dental All Grades BME	Male 9	Female 2
	-	

We have a predominantly white and female bank workforce.

### **Medical WRES**

In this section, the medical and dental workforce have also been disaggregated.

### Medical and Dental Employees by Ethnicity

Medical and Dental	BME	White	Unknown Ethnicity
Medical Directors	0	1	0
Clinical Directors	0	2	0

### The number of colleagues applying for Clinical Excellence Awards

Eligibility	BME	White	Unknown Ethnicity
Eligible	27	102	3
Applied	27	102	3
Awarded	27	102	3

The Clinical Excellence Awards process has changed from an application and award process to an automatic equal allocation across all eligible Consultants, so this data cannot now be used to show the likelihood of a successful application for BME colleagues.

### The number of Consultants recruited, by ethnicity

Recruitment Stage	BME	White	Unknown Ethnicity
Applicants	60	17	1
Shortlisted	19	11	1
Appointed	4	4	0





The percentage of Consultants applying for roles at the Trust is 76.9% BME applicants compared to 21.8% White applicants.

An equal number of staff was appointed from a White and BME background. However, only 31.7% (19/60) of BME applicants were shortlisted, versus 64.7% of White applicants being shortlisted, so there remains work to do in this area.

### **Conclusion and Recommendations**

Findings from the 2023 report show an improvement in a number of the indicators such as:

- The total percentage number of BME employees in the Trust (excluding Board members) has increased by 1.2%.
- The appointment of two BME Non-Executive Directors has had a positive impact on the difference between Board to Workforce findings. The data shows an increase from 1.9% in 2022 to 10.4% in 2023 for the Board with overall employee ethnicity at 11.8%.
- We have seen a decrease in harassment for BME colleagues from patients, managers, staff/other colleagues.

The report also contains an action plan to focus on areas which have not improved, or where there are differences between perception or experience of BME colleagues, this includes that:

- The relative likelihood of being appointed from shortlisting has worsened in the last reporting year from 25.7% to 8.8% for BME colleagues.
- BME staff feel less likely that the Trust acts fairly with regard to promotion and career progression.
- There remains further work to do on recruitment and shortlisting for Consultant roles.

The Board is requested to discuss and note the 2023 WRES metrics and the action plan that will attempt to address areas that need improving for BME colleagues.





The data element of this report will be published on our HDFT website on 31 October 2023 following approval by the Board.





## Appendix 1 Action Plan

### Action Plan

### Workforce Race Equality Standard 2023

Metric	HDFT	National Average	Context	Actions	Timescale
Metric 1 representation in the	Overall 11.8%	26.4%	Lower proportion of BME staff in Band 3, Band 4 and Bands 6-8C Clinical roles.	Discuss the barriers hindering mobility with the Staff Network	Ongoing
workforce by pay band				Options appraisal of changes to recruitment process and/or BME leadership/development to identify possible actions	Ongoing
				Continue to ensure recruitment and selection of staff remains inclusive through: Ensuring at least one panel member per interview is trained in "Recruit with values".	Ongoing
				Explore recruitment data behind 8a – VSM recruitment in previous 12 months.	Ed of Jan 2024
				Compare vacancies to applicants; is there an increase in vacancies or applicants in all roles over the last 12 months.	Ed of Jan 2024
Metric 2 Likelihood of	2.19	1.59	Specifically, 733 out of 3815 white candidates were appointed from	Further analysis and exploration of Trac (Trust Recruitment System) data to	
appointment			shortlisting ( <b>19.2% of white</b>	extrapolate shortlisting data:	
from shortlisting			candidates) compared to 132 out of	Cross reference data with National Equality Team	Completed





			1504 BME candidates (8.8% of BME candidates).	Impact of international recruitment Explore sample of recruitment data behind	Completed End of Jan
			The gap has increased from 7.4% in 2022 to 10.4% in 2023.	Bands 3, Band 4 and Bands 6 – 8C recruitment in previous 12 months.	2024
				Continue to roll out understanding bias training.	Ongoing
Metric 6 Harassment bullying and	32.9%	27.7%	We are 5.2% above the national average.	Re-publicise the dignity at work/ bullying and harassment policy	Ongoing
abuse from staff in the last 12 months				Work with the staff network	Ongoing
Metric 7 Belief that the trust provides equal opportunities	40.2%	46.4%	There is a lower percentage of BME staff believing there are equal opportunities at HDFT, compared to the National average.	Continue to deliver the Reciprocal Mentoring and BAME Leadership Development.	Ongoing
for career progression or promotion				Update equality impact assessment template to ensure there is no unintended consequences for people with protected	Ongoing
				characteristics.	End of Jan 2024
				Explore the use of an Inpulse survey to ask BME staff how the Trust could better enable equal opportunities and develop colleagues.	
Metric 8 Discrimination from a	22.6%	16.6%	We are 6% higher than the national average.	Review the Bullying and Harassment policy, via the BME and Ally Staff Network.	Ongoing
manager or other colleague in				Continue to embed diversity and inclusion in everything we do through the Belonging Subgroup and staff networks.	Ongoing





the last 12 months				Continue to improve the dedicated EDI internet page.	Ongoing
Metric 9 BME representation on the board	Overall: +10.4%	-10.9%	We are in the top 2% of Trusts for board representation.	Each board member to have an EDI objective in their appraisal.	End of appraisal setting period.
				Develop career conversations toolbox and template	End of Oct