

## Appendix 1

### Workforce Race Equality Standard Action Plan 2021 – 2022

Green (G)	Yellow (Y)	Amber (A)	Red (R)		
Evidence demonstrates action implemented	Evidence demonstrates the action is mostly met and within timescales	Evidence demonstrates the action is mostly met but not within timescales	Evidence in place demonstrates the action has not been met		
<b>1. Workforce Data and Representation – Metrics 1 and Metric 9</b>					
Metrics 1: Percentage of BME staff in each of the AfBands 1-9 and VSM (including executive Board members) compared with the percentage of BME staff in the overall workforce. Organisations should undertake this calculation separately for non-clinical and for clinical staff.					
Metrics 9: Percentage difference between the organisations' Board voting membership and its overall workforce.					
<b>Objectives</b>	<ul style="list-style-type: none"> <li>• Improve BAME staff representation across senior levels of the organisation</li> <li>• Reduce the gaps in experiences between white staff and BAME staff</li> <li>• Value and promoting the voice of BAME Staff within decision-making.</li> </ul>				
<b>What actions do we need to take and why?</b>	The WRES workforce data indicates that 25.1% of our workforce come from BAME background, however at middle to senior levels of the organisation BAME colleagues are disproportionately underrepresented (for both clinical and non-clinical roles). The focus of our actions with these actions are to review recruitment and selection processes to improve representation of BAME people on selections panels and help minimise bias from the selection process through best practice recommendations from the Kline review. The NHS People Plan emphasises the importance of BAME (and other protected groups) representation on decision-making committees and forums. The actions below will support this objective.				
<b>Reference</b>	<b>Action to be taken</b>	<b>Responsible owner(s)</b>	<b>Completion date</b>	<b>Outcomes</b>	<b>Rag Rating</b>
<b>1.1</b>	Introduce an 18 month Reciprocal Mentoring programme for Senior leaders (Trust Board, Non Execs, etc. – with Race as the initial focus– Disability will be the secondary focus.	HRD/Head of EDI	April 2023	<ul style="list-style-type: none"> <li>• Reciprocal mentoring positively impacting the entire organisation, by enabling leaders to engage on the topic of race equality and other protected characteristics.</li> <li>• Senior and all Leaders who can confidently speak on key issues regarding inequalities and lived experiences. The programme will target senior leaders' middle</li> </ul>	

1. Workforce Data and Representation – Metrics 1 and Metric 9					
<p><b>Metrics 1:</b> Percentage of BME staff in each of the AfBands 1-9 and VSM (including executive Board members) compared with the percentage of BME staff in the overall workforce. Organisations should undertake this calculation separately for non-clinical and for clinical staff.</p> <p><b>Metrics 9:</b> Percentage difference between the organisations' Board voting membership and its overall workforce.</p>					
<b>Objectives</b>	<ul style="list-style-type: none"> <li>• Improve BAME staff representation across senior levels of the organisation</li> <li>• Reduce the gaps in experiences between white staff and BAME staff</li> <li>• Value and promoting the voice of BAME Staff within decision-making.</li> </ul>				
<b>What actions do we need to take and why?</b>	<p>The WRES workforce data indicates that 25.1% of our workforce come from BAME background, however at middle to senior levels of the organisation BAME colleagues are disproportionately underrepresented (for both clinical and non-clinical roles). The focus of our actions with these actions are to review recruitment and selection processes to improve representation of BAME people on selections panels and help minimise bias from the selection process through best practice recommendations from the Kline review. The NHS People Plan emphasises the importance of BAME (and other protected groups) representation on decision-making committees and forums. The actions below will support this objective.</p>				
Reference	Action to be taken	Responsible owner(s)	Completion date	Outcomes	Rag Rating
				<p>managers and those with lived experience.</p> <ul style="list-style-type: none"> <li>• 15 managers/execs/senior leaders and 15 mentees paired for programme.</li> </ul>	
<b>1.2</b>	<p>Bi-annual WRES / WDES report on the workforce data in relation to by race on:</p> <ul style="list-style-type: none"> <li>• Applications/ Shortlisting/ Recruitment</li> <li>• Promotion/career progression/</li> <li>• Secondment</li> <li>• Employee relations case work</li> <li>• Access to training &amp; development (non- Mandatory)</li> </ul>	Head of EDI/HRD/Head of Workforce Information	May 2022	<ul style="list-style-type: none"> <li>• Workforce EDI data is routinely reviewed and appropriate actions undertaken.</li> </ul> <p>The data provided will be broken down as: BAME in comparison to white and then by the following categories:</p> <ul style="list-style-type: none"> <li>- Black</li> <li>- Asian</li> </ul>	

1. Workforce Data and Representation – Metrics 1 and Metric 9					
<p><b>Metrics 1:</b> Percentage of BME staff in each of the AfBands 1-9 and VSM (including executive Board members) compared with the percentage of BME staff in the overall workforce. Organisations should undertake this calculation separately for non-clinical and for clinical staff.</p> <p><b>Metrics 9:</b> Percentage difference between the organisations' Board voting membership and its overall workforce.</p>					
<b>Objectives</b>	<ul style="list-style-type: none"> <li>• Improve BAME staff representation across senior levels of the organisation</li> <li>• Reduce the gaps in experiences between white staff and BAME staff</li> <li>• Value and promoting the voice of BAME Staff within decision-making.</li> </ul>				
<b>What actions do we need to take and why?</b>	<p>The WRES workforce data indicates that 25.1% of our workforce come from BAME background, however at middle to senior levels of the organisation BAME colleagues are disproportionately underrepresented (for both clinical and non-clinical roles). The focus of our actions with these actions are to review recruitment and selection processes to improve representation of BAME people on selections panels and help minimise bias from the selection process through best practice recommendations from the Kline review. The NHS People Plan emphasises the importance of BAME (and other protected groups) representation on decision-making committees and forums. The actions below will support this objective.</p>				
Reference	Action to be taken	Responsible owner(s)	Completion date	Outcomes	Rag Rating
	<ul style="list-style-type: none"> <li>• Leavers/Turnover</li> <li>• Sickness (short term and long term data)</li> </ul>			<ul style="list-style-type: none"> <li>- Mixed</li> <li>- Other</li> <li>- White</li> </ul>	
<b>1.3</b>	Commit to increasing the number of shortlisting and interview panels that include BAME representation, identifying which roles it is essential to have a BAME panel member participating in.	Head of Resourcing/Division Leads	June 2022	<ul style="list-style-type: none"> <li>• Improving the representation of BAME colleagues in the recruitment processes.</li> <li>• 80% of all roles at band 8a and above interviews have BAME representation the stakeholder or panel.</li> </ul>	
<b>1.4</b>	EDI training for managers to be included in managers' development programmes.	Learning and Development Manager /Compassionate and Collective Leadership	April 2022	<ul style="list-style-type: none"> <li>• Enable the Trust to develop inclusive leaders at every level</li> </ul>	

1. Workforce Data and Representation – Metrics 1 and Metric 9					
<p><b>Metrics 1:</b> Percentage of BME staff in each of the AfBands 1-9 and VSM (including executive Board members) compared with the percentage of BME staff in the overall workforce. Organisations should undertake this calculation separately for non-clinical and for clinical staff.</p> <p><b>Metrics 9:</b> Percentage difference between the organisations' Board voting membership and its overall workforce.</p>					
<b>Objectives</b>	<ul style="list-style-type: none"> <li>• Improve BAME staff representation across senior levels of the organisation</li> <li>• Reduce the gaps in experiences between white staff and BAME staff</li> <li>• Value and promoting the voice of BAME Staff within decision-making.</li> </ul>				
<b>What actions do we need to take and why?</b>	<p>The WRES workforce data indicates that 25.1% of our workforce come from BAME background, however at middle to senior levels of the organisation BAME colleagues are disproportionately underrepresented (for both clinical and non-clinical roles). The focus of our actions with these actions are to review recruitment and selection processes to improve representation of BAME people on selections panels and help minimise bias from the selection process through best practice recommendations from the Kline review. The NHS People Plan emphasises the importance of BAME (and other protected groups) representation on decision-making committees and forums. The actions below will support this objective.</p>				
Reference	Action to be taken	Responsible owner(s)	Completion date	Outcomes	Rag Rating
1.5	Identify and consider opportunities for BAME Network chair/co-chairs/ deputy chair to be involved in key governance meetings and Trust groups – this action includes identifying opportunities for other Staff Network chairs / leaders to be included.	Trust Executive/Trust Secretary	April 2022	Embedding Staff Networks into Trust governance of the Trust.	
1.6	Create and develop a pool of BAME colleagues who are trained to sit on recruitment panels and interview stakeholder groups (trained through the internal training programmes and the BAME Staff Network participation)	Head of Resourcing (Lead)/Head of Employee Relations	April 2022	<ul style="list-style-type: none"> <li>• Improving the diversity of recruitment and selection panels</li> </ul>	
1.7	Ensure that the Trust takes positive action for the appointment of Executive and Non-Executive Director posts and encourages	Trust Board Chair/ CEO /HRD		<ul style="list-style-type: none"> <li>• Increased numbers of BAME candidates for senior positions.</li> </ul>	

1. Workforce Data and Representation – Metrics 1 and Metric 9					
<p><b>Metrics 1:</b> Percentage of BME staff in each of the AfBands 1-9 and VSM (including executive Board members) compared with the percentage of BME staff in the overall workforce. Organisations should undertake this calculation separately for non-clinical and for clinical staff.</p> <p><b>Metrics 9:</b> Percentage difference between the organisations’ Board voting membership and its overall workforce.</p>					
<b>Objectives</b>	<ul style="list-style-type: none"> <li>• Improve BAME staff representation across senior levels of the organisation</li> <li>• Reduce the gaps in experiences between white staff and BAME staff</li> <li>• Value and promoting the voice of BAME Staff within decision-making.</li> </ul>				
<b>What actions do we need to take and why?</b>	<p>The WRES workforce data indicates that 25.1% of our workforce come from BAME background, however at middle to senior levels of the organisation BAME colleagues are disproportionately underrepresented (for both clinical and non-clinical roles). The focus of our actions with these actions are to review recruitment and selection processes to improve representation of BAME people on selections panels and help minimise bias from the selection process through best practice recommendations from the Kline review. The NHS People Plan emphasises the importance of BAME (and other protected groups) representation on decision-making committees and forums. The actions below will support this objective.</p>				
Reference	Action to be taken	Responsible owner(s)	Completion date	Outcomes	Rag Rating
	applications from as diverse a pool of talent as possible to demonstrate the Trust’s commitment to diversity and inclusion				
2. Workforce Data - Employee Relations and Education & Training – WRES Metric 2, 3, 4					
<p><b>Metrics 2:</b> Relative likelihood of BME staff compared to white staff being appointed from shortlisting across all posts.</p> <p><b>Metrics 3:</b> Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation. This Metric will be based on data from a two year rolling average of the current year and the previous year.</p> <p><b>Metrics 4:</b> Relative likelihood of staff accessing non-mandatory training and CPD.</p>					
<b>Objectives</b>	<ul style="list-style-type: none"> <li>• Reduce the gaps in experience between white staff and BAME staff</li> <li>• Support managers to understand structural and individual acts of racism and develop cultural intelligence programmes</li> </ul>				

2. Workforce Data - Employee Relations and Education & Training – WRES Metric 2, 3, 4					
Metrics 2: Relative likelihood of BME staff compared to white staff being appointed from shortlisting across all posts.					
Metrics 3: Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation. This Metric will be based on data from a two year rolling average of the current year and the previous year.					
Metrics 4: Relative likelihood of staff accessing non-mandatory training and CPD.					
What actions do we need to take and why?	Our WRES data indicates that further work has to be undertaken to improve the data collection and analysis of HR interventions and Learning and Development opportunities in terms of race. The actions below are focused on raising awareness of WRES data and adopting a highly recommended RCN Cultural Ambassador programme to help close the gap for our BAME Staff in their experience of the workplace.				
Reference	Action to be taken	Responsible owner(s)	Completion date	Outcomes	Rag Rating
2.1	Generate and analyse training reports for staff that access non-mandatory training (including the introduction of apprenticeships) by tri-angulating data with ESR records.	Learning and Development Manager	April 2022	<ul style="list-style-type: none"> <li>Non-mandatory development opportunities are recorded aiding the Trust's reporting against Metric 4.</li> </ul>	
2.2	Increase awareness of the WRES and WDES data amongst divisional teams.	Head of EDI & HR Employee Relations	March 2022	<ul style="list-style-type: none"> <li>All operational senior teams have an understanding of their WRES and WDES data.</li> </ul>	
2.3	Adopt and implement the RCN Cultural Ambassadors (CA) Programme for disciplinary and grievance cases relating to a member of staff from a BAME background to reduce likelihood of unconscious bias and ensure all decisions are fair and equitable	Head of Employee Relations/HRD	June 2022	<ul style="list-style-type: none"> <li>Regular reports on progress taken to EDI Steering committee</li> <li>Cohort of BAME Staff trained and supporting disciplinary investigations.</li> <li>CA participants championing EDI and actively involved within the Trust activities.</li> </ul>	
2.4	Undertake annual analysis of all disciplinary data to identify any trends or issues in relation to race.	Head of Employee relations	June 2022	<ul style="list-style-type: none"> <li>Identify learning lessons from CA programme and have actions to address gaps the identified gaps.</li> </ul>	

<b>2. Workforce Data - Employee Relations and Education &amp; Training – WRES Metric 2, 3, 4</b> Metrics 2: Relative likelihood of BME staff compared to white staff being appointed from shortlisting across all posts. Metrics 3: Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation. This Metric will be based on data from a two year rolling average of the current year and the previous year. Metrics 4: Relative likelihood of staff accessing non-mandatory training and CPD.					
2.5	EDI becomes a standing item on the Directorates Business Meetings.	Divisions/Execs/VSM's	Nov 2021	<ul style="list-style-type: none"> <li>• Embed EDI as BAU</li> <li>• Promoting and encouraging visible representation of BAME staff in communication activity and in forums such as Board meetings/committee meetings etc.</li> </ul>	
<b>3. Staff Survey Indicators &amp; Staff Engagement – Metrics 5, 6, 7 and 8</b> Metrics 5: Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months. Metrics 6: Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months. Metrics 7: Percentage believing that Trust provides equal opportunities for career progression or promotion. Metrics 8: In the last 12 months have you personally experienced discrimination at work from any of the following Manager/team leader or other colleagues.					
<b>Objectives</b>	<ul style="list-style-type: none"> <li>• Reduce the gaps in experience between white staff and BAME staff.</li> </ul>				

What actions do we need to take and why?	The actions in this part of the WRES action plan involve working to understand and explore the experience and perceptions of our Black, Asian and minority ethnic staff through wider staff engagement.					
Reference	Action to be taken	Responsible owner(s)	Completion date	Outcomes	Rag Rating	
3.1	Support the BAME Network to: <ul style="list-style-type: none"> <li>• Host four listening events. – Launch of new Trust values, Black History Month etc.</li> <li>• Develop Strategy</li> </ul>	Head of EDI/Network Chairs	June 2022	<ul style="list-style-type: none"> <li>• BAME Network Strategy to be added to the Staff Networks Strategy</li> <li>• BAME and non-BAME staff participating in organised initiatives.</li> <li>• A clear programme of cultural and diversity events shared across the organisation.</li> </ul>		
3.2	Undertake a divisional-based intervention (deep dive) into the experiences of BAME Staff and share that learning across the organisation.	Head of EDI	June 2022	<ul style="list-style-type: none"> <li>• The findings from this report used as a model of best practise and replicated across two other divisional</li> </ul>		
3.3	Identify BAME colleagues to become freedom to speak up champions	Freedom to Speak Up	Nov 2021	<ul style="list-style-type: none"> <li>• BAME staff feeling confident to report any concerns relating to</li> <li>• Patient safety and quality of care.</li> </ul>		
3.4	Identify BAME colleagues to become Career Coaches Develop workshops / Masterclasses for BAME Staff facilitated by BAME Network e.g. – interview skills, successful applications etc.	Head of Employee Relations	Nov 2021	<ul style="list-style-type: none"> <li>• Providing support of BAME colleagues to their potential for success in the recruitment and selections processes.</li> </ul>		



3. Staff Survey Indicators & Staff Engagement – Metrics 5, 6, 7 and 8					
<p><b>Metrics 5: Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.</b></p> <p><b>Metrics 6: Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.</b></p> <p><b>Metrics 7: Percentage believing that Trust provides equal opportunities for career progression or promotion.</b></p> <p><b>Metrics 8: In the last 12 months have you personally experienced discrimination at work from any of the following Manager/team leader or other colleagues.</b></p>					
<b>Objectives</b>	<ul style="list-style-type: none"> <li>Reduce the gaps in experience between white staff and BAME staff.</li> </ul>				
<b>What actions do we need to take and why?</b>	The actions in this part of the WRES action plan involve working to understand and explore the experience and perceptions of our Black, Asian and minority ethnic staff through wider staff engagement.				
Reference	Action to be taken	Responsible owner(s)	Completion date	Outcomes	Rag Rating
3.5	<p>Develop a coaching and mentoring register for BAME Staff – each Division to identify BAME colleagues (extended to other underrepresented groups – young people and disabled staff)</p> <p>Supporting Overseas Trained Nurses towards getting their PIN and qualifying as a nurse</p>	Learning and Development Manager	March 2022	<ul style="list-style-type: none"> <li>The Trust is able to provide a formal structure to facilitate BAME staff career development.</li> <li>Each division to identifies at least 5 BAME colleagues to who are accessing coaching or mentoring to develop their careers</li> <li>Coaches / mentors are identified for BAME colleagues to support career development.</li> </ul>	
3.6	Reduce the number of BAME staff experiencing B&H from staff, managers, team leaders or other colleagues – identify actions to be undertaken working with the Freedom to Speak Up Guardian (F2SU)	Head Of Employee Relations	June 2022	<ul style="list-style-type: none"> <li>Staff Survey and WRES data for this indicator improves.</li> <li>5 BAME colleagues identified to be F2SU assistants</li> </ul>	

3. Staff Survey Indicators & Staff Engagement – Metrics 5, 6, 7 and 8					
<p><b>Metrics 5: Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.</b></p> <p><b>Metrics 6: Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.</b></p> <p><b>Metrics 7: Percentage believing that Trust provides equal opportunities for career progression or promotion.</b></p> <p><b>Metrics 8: In the last 12 months have you personally experienced discrimination at work from any of the following Manager/team leader or other colleagues.</b></p>					
<b>Objectives</b>	<ul style="list-style-type: none"> <li>Reduce the gaps in experience between white staff and BAME staff.</li> </ul>				
<b>What actions do we need to take and why?</b>	The actions in this part of the WRES action plan involve working to understand and explore the experience and perceptions of our Black, Asian and minority ethnic staff through wider staff engagement.				
Reference	Action to be taken	Responsible owner(s)	Completion date	Outcomes	Rag Rating
3.7	Actively encourage participation of BAME staff in NHS Leadership Academy development programmes e.g. Stepping Up, Ready Now programmes etc.	Learning and Development Manager	June 2022	<ul style="list-style-type: none"> <li>BAME Staff uptake of non-Mandatory training programmes increases.</li> <li>BAME Staff are actively encouraged to seek development opportunities and positive stories captured from their participation.</li> <li>Increase % of delegates accessing non-Mandatory training from BAME backgrounds – annually.</li> </ul>	
<b>Action plan history log</b>				<b>Date</b>	
Initial draft – OPR				01.06.2021	
Updated OPR following input from BAME Network Chair/Deputy Chair				22.06.2021	
Updated OM				15.07.2021	



Updated JM (BAME Network Chair)	16.07.2021
---------------------------------	------------