

Appendix 1

Workforce Race Equality Standard Action Plan 2022 – 2023

	reen (G)	Yellow (Y)		Amber (A)		Red (R)
Evidence de implemente					Evidence in plac action has not b	e demonstrates the been met
Metrics 1: Pero	entage of BME staff in each o vorkforce. Organisations shou	ntation – Metrics 1 and Metr of Bands 1-9 and VSM (including ex uld undertake this calculation sepa he organisations' Board voting mer	ecutive Board membe rately for non-clinical	and for clinical staff.	entage of BME staff	
Objectives	Reduce the gaps i	aff representation across senior n experiences between white st ting the voice of BAME Staff with	aff and BAME staff	ation		
What actions do we need to take and why?	The WRES workforce data in of the organisation BAME co our actions with these action selections panels and help n The NHS People Plan empha committees and forums. The					
Reference	Action to be taken	Responsible owner(s)	Completion date	Outcomes		Rag Rating
1.1	Progress with the 18-mor Transformational Recipro programme for Senior lea	hth HRD/Head of ED	DI Dec 2023	Transformation mentoring posi	•	



Metrics 1: Pero in the overall v	kforce Data and Representation – Met centage of BME staff in each of Bands 1-9 and workforce. Organisations should undertake th centage difference between the organisations	VSM (including executi is calculation separately	y for non-clinical a			
Objectives	Reduce the gaps in experiences	 Improve BAME staff representation across senior levels of the organisation Reduce the gaps in experiences between white staff and BAME staff Value and promoting the voice of BAME Staff within decision-making. 				
What actions do we need to take and why?	of the organisation BAME colleagues are dis our actions with these actions are to review	proportionately underre recruitment and selection m the selection process ance of BAME (and othe	presented (for bo on processes to im through best prac er protected group	tice recommendations from the Kline review.		
Reference	Action to be taken	Responsible owner(s)	Completion date	Outcomes	Rag Rating	
				 target senior leaders' middle managers and those with lived experience. Participants to develop and implement a Service Improvement project. 		
1.2	 6 monthly WRES report on the workforce data by race on: Applications/ Shortlisting/ Recruitment Promotion/career progression/ Secondment Employee relations case work Access to training & development (non- 	Head of EDI/HRD/Head of Workforce Information	May 2023	 Workforce EDI data is routinely reviewed, and appropriate actions undertaken. Career progressions data improves for BAME staff. The data provided will be broken down as: BAME in comparison to white and then by the following categories: 		



	vorkforce. Organisations should undertake th centage difference between the organisations	-			
Objectives	 Improve BAME staff representation Reduce the gaps in experiences Value and promoting the voice of 	between white staff a	nd BAME staff	ation	
What actions do we need to take and why?	of the organisation BAME colleagues are dis our actions with these actions are to review	proportionately underre recruitment and selection m the selection process ance of BAME (and othe	presented (for bot on processes to im through best prac er protected group	tice recommendations from the Kline review.	
Reference	Action to be taken	Responsible owner(s)	Completion date	Outcomes	Rag Rating
	 Mandatory) Exit Interviews/Turnover Sickness (short term and long-term data) Fairer recruitment (no more tick boxes etc.) implemented. Noting actions for improvement. 			 Black Asian Mixed Other White Helps inform objective 1.3 	
1.3	Ensure that the Trust takes positive action for the appointment of Executive and Non- Executive Director posts and encourages applications from as diverse pool of talent as possible to demonstrate the Trust's commitment to diversity and inclusion.	Trust Board Chair/ CEO /HRD	Sep 2023	 Increased numbers of BAME candidates for senior positions. Develop and nurture staff to enhance their readiness to apply for new positions. 	



Metrics 1: Perc in the overall w	xforce Data and Representation – Met centage of BME staff in each of Bands 1-9 and vorkforce. Organisations should undertake th centage difference between the organisations	VSM (including executivity is calculation separately	/ for non-clinical a		
Objectives	 Improve BAME staff representat Reduce the gaps in experiences Value and promoting the voice of 				
What actions do we need to take and why?	The WRES workforce data indicates that 27.3 of the organisation BAME colleagues are disp our actions with these actions are to review selections panels and help minimise bias from The NHS People Plan emphasises the import committees and forums. The actions below of				
Reference	Action to be taken	Responsible owner(s)	Completion date	Outcomes	Rag Rating
	panels have BAME representation.				





ollaboration					
Metrics 2: Re Metrics 3: Re This Metric w	 ill be based on data from a two-year relative likelihood of staff accessing non- Reduce the gaps in experie 	d to white staff being appo ormal disciplinary process, olling average of the curre mandatory training and C ence between white staf	ointed from shortlist as measured by ent nt year and the prev PD. If and BAME staff	ting across all posts. try into a formal disciplinary investigation.	
	programmes				
What actions do we need to take and why?	Our WRES data indicates that furth interventions and Learning and De awareness of WRES data and adop gap for our BAME Staff in their exp				
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 2023	 Non-mandatory development opportunities are recorded aiding the Trust's reporting against Metric 4. 	
2.2	Embed 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. - Create a framework or policy around CA's role in	Head of EDI/Head of Employee Relations/HR and OD	June 2023	 Regular reports on progress taken to EDI Steering committee Cohort of BAME Staff trained and supporting disciplinary investigations. CA participants championing EDI and actively involved within the Trust activities. CA's to sit on Band 8A interview panels. 	



ollaboration					
Metrics 2: Re Metrics 3: Re This Metric v	rkforce Data - Employee Relation elative likelihood of BME staff compared elative likelihood of staff entering the for vill be based on data from a two-year re elative likelihood of staff accessing non-	d to white staff being appo rmal disciplinary process, olling average of the curre	pinted from shortlis as measured by en nt year and the pre	ting across all posts. try into a formal disciplinary investigation.	
	the Trust.				
2.3	Undertake annual analysis of all disciplinary data to identify any trends or issues in relation to race.	Head of Employee relations/Head of EDI	June 2023	 Identify learning lessons from CA programme and have actions to address the identified gaps. 	
2.4	Provide divisions and directorates with WRES data for their workforce. EDI becomes a standing item on the Directorates Business Meetings- Staff Survey, pulse survey, WRES, WDES, Gender Pay Gap, and planned delivery of identified actions that Directorates need to undertake to improve their staff experience. Violence and Aggression policy Review. Focused work around racism and discrimination to be a theme throughout the policy.		April 2023	 Embed EDI as BAU Promoting and encouraging visible representation of BAME staff in communication activity and in forums such as Board meetings/committee meetings etc. Staff to feel safe at work Staff know how to report racist abuse and violence and are encouraged to do so. Staff receive appropriate support following abuse and violence. Communication and training plan for line managers and staff on the revised violence and aggression policy. 	



liaboration	
2. Workforce Data - Employee Relations and Education & Tr Metrics 2: Relative likelihood of BME staff compared to white staff being app Metrics 3: Relative likelihood of staff entering the formal disciplinary process, This Metric will be based on data from a two-year rolling average of the curre Metrics 4: Relative likelihood of staff accessing non-mandatory training and C	ointed from shortlisting across all posts. , as measured by entry into a formal disciplinary investigation. ent year and the previous year.
	Patient/Public facing communication plan to be developed.



Metrics 5: Per Metrics 6: Per Metrics 7: Per	Survey Indicators & Staff Engagement – I reentage of staff experiencing harassmer reentage of staff experiencing harassmer reentage believing that Trust provides eq the last 12 months have you personally e er colleagues. • Reduce the gaps in experience b	nt, bullying or abuse nt, bullying or abuse jual opportunities f experienced discrim	e from patients, rela e from staff in last 1 or career progression ination at work fro	L2 months. on or promotion.	
What actions do we need to take and why?	The actions in this part of the WRES acti perceptions of our Black, Asian and min	on plan involve wor	king to understand		
Reference	Action to be taken	Responsible owner(s)	Completion date	Outcomes	Rag Rating
3.1	 Support the BAME Network to: Host four listening events. – Launch of new Trust values, Black History Month etc. Develop a Strategy Promote the work of the Network. 	Head of EDI/Network Chairs	Strategy Dec 2022 April 2023	 BAME Network Strategy to be added to the Staff Networks Strategy BAME and non-BAME staff participating in organised initiatives. A clear programme of cultural and diversity events shared across the organisation. Continued development of Network Chairs. 	



Metrics 6: Per Metrics 7: Per	rcentage of staff experiencing harassmer rcentage of staff experiencing harassmer rcentage believing that Trust provides eq the last 12 months have you personally e er colleagues.	nt, bullying or abus ual opportunities f	e from staff in last 1 for career progressi	L2 months. on or promotion.	
Objectives	Reduce the gaps in experience b	between white staf	f and BAME staff.		
What actions do we need to take and why?	The actions in this part of the WRES acti perceptions of our Black, Asian and min	•			
Reference	Action to be taken	Responsible owner(s)	Completion date	Outcomes	Rag Rating
3.2	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) Supporting Overseas Trained Nurses towards getting their PIN and qualifying as a nurse.	Learning and Development Manager	March 2023	 The Trust is able to provide a formal structure to facilitate BAME staff career development. Each division to identify at least 5 BAME colleagues to access coaching or mentoring to develop their careers Coaches / mentors are identified for BAME colleagues to support career development. 	



Metrics 6: Per Metrics 7: Per	rcentage of staff experiencing harassmer rcentage of staff experiencing harassmer rcentage believing that Trust provides eq the last 12 months have you personally e er colleagues.	nt, bullying or abuse ual opportunities f	e from staff in last 1 or career progressio	2 months. on or promotion.	
Objectives	Reduce the gaps in experience b	between white staff	and BAME staff.		
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
3.3	 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) Training workshops around micro aggression, incivility, active allyship. Values and behaviours training at staff induction Cultural Intelligence training for line managers. 	Head Of Employee Relations /Head of EDI/Learning and development	Ongoing	 Staff Survey and WRES data for this indicator improves. Pulse Survey data improves. Line managers and staff having more sensitivity on their impact on others. 	



Metrics 5: Per Metrics 6: Per Metrics 7: Per Metrics 8: In t leader or othe		nt, bullying or abuse nt, bullying or abuse jual opportunities f experienced discrim	e from patients, rela e from staff in last 1 or career progression ination at work fro	L2 months. on or promotion.	
Objectives What actions do we need to take and why?	 Reduce the gaps in experience by The actions in this part of the WRES actions of our Black, Asian and min 				
Reference	Action to be taken	Responsible owner(s)	Completion date	Outcomes	Rag Rating
3.4	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 2023	 BAME Staff uptake of non- Mandatory training programmes increases. BAME Staff are actively encouraged to seek development opportunities and positive stories captured from their participation. Increase % of delegates accessing non-Mandatory training from BAME backgrounds – annually. 	





Action plan history log	Date
Initial draft – OPR Head of EDI	18.07.2022
Update-OPR and CN Deputy Chair BAME Network	23.07.2022
Update-OM Director of HR and OD	26.07.2022
Update- OPR and CC non-Exec and Sponsor for BAME Network	28.07.2022
Updated- OM Director of HR and OD and OPR Head of EDI	10.08.2022



