



Appendix 1

Workforce Race Equality Standard Action Plan 2022 – 2023

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Evidence de implemente	· · · · · · · · · · · · · · · · · · ·				Evidence in place action has not be	e demonstrates the een met	
Metrics 1: Percin the overall v	cforce Data and Repressentage of BME staff in each vorkforce. Organisations shows that the staff is the staff of the staff	of Bands 1-9 and ould undertake thi the organisations'	VSM (including executive is calculation separately	for non-clinical a hip and its overa	and for clinical staff. Il workforce.	entage of BME staff	
		•	oetween white staff ar f BAME Staff within de				
What actions do we need	The WRES workforce data indicates that 27.35% 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.						
to take and why?	The NHS People Plan empl	nasises the importa	ance of BAME (and other	protected group		the Kline review.	
	The NHS People Plan empl	nasises the importa	ance of BAME (and other	protected group		the Kline review.	Rag Rating





llaboration					
Metrics 1: Per in the overall	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	y for non-clinical		
Objectives	 Improve BAME staff representate Reduce the gaps in experiences Value and promoting the voice of 				
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 pracer or protected group	tice recommendations from the Kline review.	
Reference	Action to be taken	Responsible owner(s)	Completion date	Outcomes target senior leaders' middle	Rag Rating
				 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:	





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Metrics 1: Peroin the overall v	kforce Data and Representation – Mer centage of BME staff in each of Bands 1-9 and workforce. Organisations should undertake th centage difference between the organisations	VSM (including executi	y for non-clinical a		
Objectives	 Improve BAME staff representate Reduce the gaps in experiences Value and promoting the voice of 				
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 boom processes to im through best pracer protected group	tice recommendations from the Kline review.	
Reference	Action to be taken	Responsible owner(s)	Completion date	Outcomes	Rag Rating
1.3	Mandatory) Exit Interviews/Turnover Sickness (short term and long-term data) Fairer recruitment (no more tick boxes etc.) implemented. Noting actions for improvement. Ensure that the Trust takes positive action for the appointment of Executive and Non- Executive Director posts and encourages applications	Trust Board Chair/ CEO /HRD	Sep 2023	 Black Asian Mixed Other White Helps inform objective 1.3 Increased numbers of BAME candidates for senior positions. Develop and nurture staff to enhance their readiness to apply 	
	from as diverse pool of talent as possible to demonstrate the Trust's commitment to diversity and inclusion. Spot check that 80% of all interview			for new positions.	





	kforce Data and Representation – Met				
	- Carlotte			s) compared with the percentage of BME staff	
	workforce. Organisations should undertake th				
	centage difference between the organisations		•		
Objectives	 Improve BAME staff representat 				
	Reduce the gaps in experiences	between white staff a	nd BAME staff		
	 Value and promoting the voice of 	of BAME Staff within d	ecision-making.		
What	The WRES workforce data indicates that 27.3	35% of our workforce co	me from BAME ba	ackground, however at middle to senior levels	
actions do	of the organisation BAME colleagues are dis	proportionately underre	presented (for bot	th clinical and non-clinical roles). The focus of	
we need	our actions with these actions are to review		•		
to take	I			tice recommendations from the Kline review.	
and why?	The NHS People Plan emphasises the import	·		s) representation on decision-making	
	committees and forums. The actions below				
Reference	Action to be taken	Responsible	Completion	Outcomes	Rag Rating
		owner(s)	date		
	panels have BAME representation.				





Metrics 2: Re Metrics 3: Re This Metric w	ill be based on data from a two-year ro lative likelihood of staff accessing non- • Reduce the gaps in experie	to white staff being apportunity of the curre that the curre mandatory training and Cence between white staff	pinted from shortlis as measured by en nt year and the pre PD. If and BAME staff	ting across all posts. try into a formal disciplinary investigation.	
What actions do we need to take and why?	programmes Our WRES data indicates that furth interventions and Learning and Deawareness 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. 	





Metrics 2: Re Metrics 3: Re This Metric w	rkforce Data - Employee Relation lative likelihood of BME staff compared lative likelihood of staff entering the fo rill be based on data from a two-year ro lative likelihood of staff accessing non- the Trust.	d to white staff being appo ormal disciplinary process, olling average of the curre	ointed from shortlist as measured by ent nt year and the prev	ting across all posts. try into a formal disciplinary investigation.	
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. 	





Metrics 2: Re Metrics 3: Re This Metric w	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.						
				Patient/Public facing communication plan to be developed.			





ollaboration						
Metrics 5: Per Metrics 6: Per Metrics 7: Per	Survey Indicators & Staff Engagement – I centage of staff experiencing harassmer centage of staff experiencing harassmer centage believing that Trust provides equals the last 12 months have you personally ear colleagues.	nt, bullying or abuse nt, bullying or abuse ual opportunities f	e from patients, rela e from staff in last 1 or career progression	12 months. on or promotion.		
Objectives	Reduce the gaps in experience by	oetween white staff	and BAME staff.			
What actions do we need to take and why?	perceptions of our Black, Asian and minority ethnic staff through wider staff engagement. eed ee					
Reference	Action to be taken	Responsible owner(s)	Completion date	Outcomes	Rag Rating	
3.1	 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 5: Pe Metrics 6: Pe Metrics 7: Pe Metrics 8: In	Survey Indicators & Staff Engagement – I reentage of staff experiencing harassmer reentage of staff experiencing harassmer reentage believing that Trust provides equal the last 12 months have you personally ear colleagues.	nt, bullying or abus nt, bullying or abus Jual opportunities f	e from patients, rela e from staff in last 1 for career progression	12 months. on or promotion.	
Objectives	Reduce the gaps in experience by	oetween 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 8: In	the last 12 months have you personally e er colleagues. • Reduce the gaps in experience be	xperienced discrim	ination at work fro	· · · · · · · · · · · · · · · · · · ·	
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
3.3	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. 	





Objectives What actions do we need	Reduce the gaps in experience The actions in this part of the WRES act perceptions of our Black, Asian and min		ff and BAME staff.		
		nority ethnic staff t	•	·	
to take and why?		,	Ü		
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



