



Barnsley Hospital
NHS Foundation Trust

WORKFORCE RACE EQUALITY STANDARD

**Report and Action Plan 2022 /
2023**

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1. Introduction

The WRES report illustrates organisational progress against the WRES nine indicators. For each of the indicators the data is compared for White and Black, Minority Ethnic colleagues. National staff survey averages have been included for comparative purposes, where applicable to the metric being reviewed.

The key findings and metrics are outlined:

- Overall, BME workforce at the Trust has increased, most notably in Band 5s largely due to the Recruits of International nurses
 - BME are under-represented in higher bands
 - Relative likelihood of BME applicants being appointed from shortlisting compared to BME applicant has positively decreased from the previous year
 - Relative likelihood of BME staff entering the formal disciplinary appears low (2) however statistical analysis of such low numbers of disciplinaries indicates BME entering the formal disciplinary process compared to white staff is therefore 4.05 times greater (previous year no reports for BME staff)
 - Relative likelihood of BME staff accessing non-mandatory training and CPD, deterioration in the numbers can be seen, 59% for BME and 66% for White staff (previous year was 92% BME and 81% White)
 - BME Staff Experiencing Harassment, Bullying or Abuse from Patients, Relatives, or the Public in last 12 months, an increase from 22.4% to 28.7% for BME staff and similar to previous year (22.5%) for White staff
 - BME Staff Experiencing Harassment, Bullying or Abuse from other Staff in last 12 months, decreased marginally although very similar to previous year
 - BME Staff believing that Trust provides equal opportunities for Career Progression to Promotion - a significant deterioration is evident for both staff groups, BME 50.6% and White 63.7% in contrast to the previous reporting year 88.2% of BME staff and 91.1% of White staff
 - BME staff reporting discrimination from Manager, Team leader, Staff/Colleagues - similar to previous year and remains significantly higher for BME staff in contrast to White staff
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The action plan outlined will show a number of initiatives introduced and planned to improve BME staff experiences. Progress will be reviewed and key deliverables in conjunction with the Race Equality Staff network and Diverse & Inclusive Culture subgroup.







WRES METRICS 2021 /2022

Workforce indicators


For each of these four workforce indicators, compare the data for White and BME staff

- | | |
|--|---|
| 1. Workforce Representation – Overall BME Staff 420 (10.1%)  (positive increase) | |
| 2. Relative likelihood of white applicants being appointed from shortlisting across all posts compared to BME applicants | 1.68 times more likely to be appointed for White staff  (positive decrease) |
| 3. Relative likelihood of BME staff entering formal disciplinary processes compared to white staff | BME 4.05  more likely entering formal disciplinary (negative increase) |
| 4. Relative likelihood of White staff accessing non-mandatory training/CPD compared to BME staff | 1.13  more likely White staff (negative increase) (59% BME, 66%) White staff (Previous year 92% BME and 81% White staff) |

National NHS Staff Survey indicators (or equivalent) For each of the four staff survey indicators, compare the outcomes of the responses for White and BME staff

- | | |
|---|---|
| 5. Percentage of staff experiencing bullying, harassment & abuse from patients/relatives/public in last 12 months | BME 28.7%  (negative increase)
White 22.5% |
| 6. Percentage of staff experiencing bullying, harassment & abuse from staff in last 12 months | BME 28.4 %  (similar to previous year)
White 19.1% |
| 7. Percentage believing the Trust provides equal opportunities for career progression and promotion | BME 50.6%  (negative decrease)
White 63.7% |
| 8. In the last 12 months personally experiencing discrimination from manager/team leader/other colleagues | BME 16.6%  (similar to previous year)
White 5.5% |

Board representation indicator: Compare the difference for White and BME staff

- | | |
|---|---|
| 9. Board Representation - Percentage difference between Board voting membership and overall workforce | BME 0.0%  (unchanged) Trust's board Voting membership are from BME backgrounds, compared to 10.1% of the Trust workforce

* BME Board member is shared with Rotherham Trust, on Rotherham payroll but works across Barnsley and Rotherham. |
|---|---|

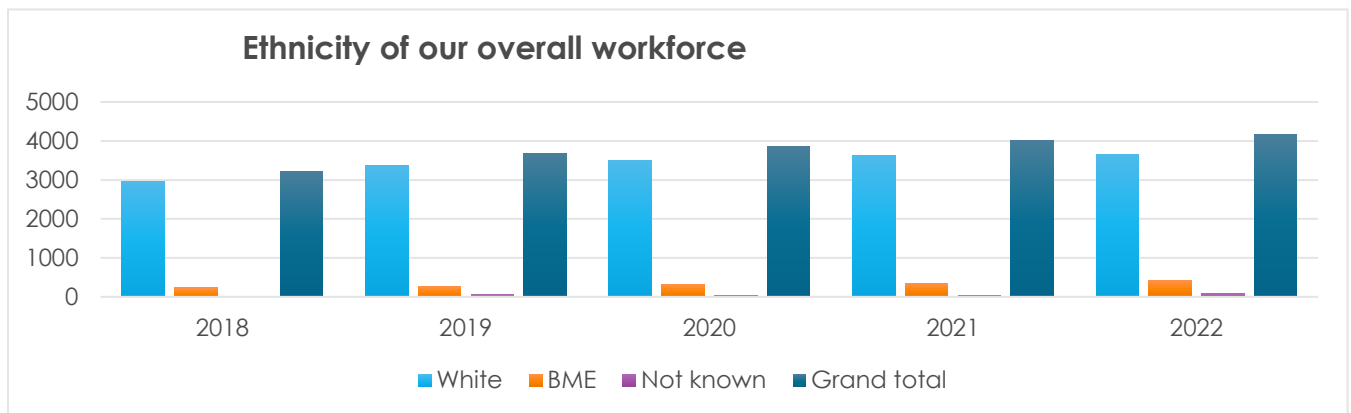
2. WRES METRICS

Metric 1 - Percentage of AfC staff by pay bands compared with the percentage in the overall workforce

	2018	2019	2020	2021	2022
White	92.3%	91.4%	90.9%	90.6%	88.0%
BME	7.1%	7.2%	8.4%	8.4%	10.1% ↑
Not known	0.6%	1.4%	0.8%	1.0%	1.9% ↑

Ethnicity of our overall workforce

	2018	2019	2020	2021	2022
White	2961	3372	3501	3623	3656
BME	229	265	322	337	420 ↑
Not known	18	53	29	41	77 ↑
Grand total	3208	3690	3852	4001	4153



The percentage of the workforce identified as Black or Minority Ethnic has increased from 8.4% (265) in 2021 to 10.1% (420) in 2022 largely due to international recruitment which will continue throughout the year and likely lead to a further increase. International Recruitment has been an important part of the Workforce supply Strategy in line with the NHS Long Term plan.

There continues to be a level of non-disclosure, representing 1.9% (77) of the overall workforce and this has increased from 1.0% (42) the previous year to 1.9% this year.

2.1% of the Barnsley population are from BME background (according to the latest 2011 census). Barnsley ethnic diversity population continues to change but the census is the most up to date ethnicity data available.

Metric one is split into Clinical and Non- Clinical, the table below shows the breakdown of staff in the clinical and non-clinical groups for period 1 April 2021 to 31 March 2022. Percentages are based on the numbers of staff in that group and show the percentage of White, BME and Not Known in each Band. Band 1 pay grade no longer exists so has been excluded in the table below. The tables have been highlighted to show where there is a difference in the percentage of people in the group and the organisation.

Grade	Non-Clinical				Clinical			
	White		BME		White		BME	
Band 2	221	(6%)	5	(1.2%)	464	(12.7%)	12	(2.9%)
Band 3	207	(5.7%)	3	(0.7%)	356	(9.7%)	17	(4.0%)
Band 4	133	(3.6%)	2	(0.5%)	95	(2.6%)	3	(0.7%)
Band 5	62	(1.7%)	3	(0.7%)	574	(15.7%)	104	(24.8%)
Band 6	47	(1.3%)	3	(0.7%)	530	(14.5%)	16	(3.8%)
Band 7	49	(1.3%)	3	(0.7%)	281	(7.7%)	16	(3.8%)
Band 8a	22	(0.6%)	2	(0.5%)	71	(1.9%)	3	(0.7%)
Band 8b	10	(0.6%)	1	(0.2%)	15	(0.4%)	1	(0.2%)
Band 8c	6	(0.2%)	2	(0.5%)	0	(0.0%)	0	(0.0%)
Band 8d	1	(0.0%)	0	(0.0%)	0	(0.0%)	0	(0.0%)
Band 9	0	(0.0%)	0	(0.0%)	1	(0.2%)	0	(0.0%)

The table below shows changes in the overall number of people in each band and the medical workforce since 2018.

There has been a gradual increase in the number of BME staff in Bands 2-5 and Band 7. Notably, Band 5 there is a significant increase from 56 in 2021 to 107 in 2022 primarily due to the recruitment of international nurses.

There is a decrease in the following bands:

- **Band 6**, (25) in 2021 to (19) in 2022.
- **Band 8A**, (5) in 2021 to (3) in 2022, and for white staff there is a decline, from (107) to (93)

Change in the Numbers of BME People in our organisation between 2018 and 2022

**Agenda
for
change**

	2018			2019			2020			2021			2022		
	White	BME	Unknown	White	BME	Unknown	White	BME	Unknown	White	BME	Unknown	White	BME	Unknown
Under band 1	31	1	0	25	0	0	25	1	0	16	1	0	14	1	0
band 1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
band 2	595	5	0	679	10	2	661	13	1	702	13	1	685	17	2
band 3	456	5	7	444	4	4	512	10	4	529	10	14	563	20	17
band 4	183	3	0	197	1	0	210	3	1	224	3	2	228	5	3
Cluster 1 total	1265	14	7	1345	15	6	1408	27	6	1471	27	17	1490	43	22
band 5	650	38	7	683	49	6	661	62	8	675	56	10	636	107	41
band 6	495	18	4	509	19	4	538	24	4	576	25	3	577	19	5
band 7	271	8	1	283	8	1	309	11	5	315	13	3	330	19	7
Cluster 2 total	1416	64	12	1475	76	11	1508	97	17	1566	94	16	1543	145	53
band 8a	88	6	2	98	9	0	100	7	0	101	7	0	93	5	0
band 8b	15	1	0	19	2	0	23	2	0	27	3	0	25	2	0
Cluster 3 total	103	7	2	117	11	0	123	9	0	128	10	0	118	7	0
band 8c	1	0	0	1	0	0	1	0	0	1	0	0	6	0	0
band 8d	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0
band 9	1	0	0	1	0	0	1	0	0	1	0	0	1	0	0
Cluster 4 total	2	0	0	2	0	0	2	0	0	2	0	0	8	0	0

The table above shows the numbers of BME people in the Trust from 2018 – 2022 based on the clusters identified in WRES: A Model Employer. The numbers of BME staff reduces as you move up the pay bands.

Medical and Dental	2018			2019			2020			2021			2022		
	White	BME	Unknown	White	BME	Unknown	White	BME	Unknown	White	BME	Unknown	White	BME	Unknown
Medical & Dental Consultants	77	73	0	77	73	0	90	79	0	95	84	0	93	87	0
Medical & Dental Non- consultants career grade	19	41	1	19	41	2	50	88	2	27	61	0	27	52	0
Medical & Dental trainee grades	58	46	2	58	46	1	33	16	4	49	53	0	52	76	0

Change in the Numbers of BME people in the Trust between 2018 and March 2022

Medical & Dental




BME Medical & Dental Consultants – there is an increase in the number of consultants, 84 increased to 87 in 2022 (compared to a slight decrease from 95 to 93 in 2022) White.

BME Medical & Dental Non-consultant career grade - has decreased from 61 to 52 and data remains unchanged (27) in 2021 and 2022 for White staff. A higher proportion of ethnic minority colleagues than white colleagues can be seen.

BME Medical & Dental trainee grades – interestingly has increased almost 50% from 53 to 76 in 2022.

*It is noted the higher number of BME trainee grade in this group compared to White Staff. A slight increase is seen from 49 to 52, White staff

The Model Employer Disparity Ratio

	2020	2021	2022
	Disparity Ratio excluding bank	Disparity Ratio excluding bank	Disparity Ratio excluding bank
Lower to middle (band 5 & under)	1.0	0.9	1.7  (favours white staff)
Middle to upper (band 6 -7)	0.6	0.7	0.7  (no change, favours BME staff)
Lower to upper (band 8a -9)	0.6	0.6	1.3  (favours white staff)

Model Employer Disparity Ratio

The disparity ratio has been developed by the national WRES team and compares the progression of white staff through the organisation with the progression of BME staff through the organisation (Agenda for Change bands). If the race disparity ratio is greater than "1.0" this means that progression favours white staff, whilst if the race disparity ratio is below "1.0", this means that progression favours BME staff.

Lower to middle (1.7) – band 5 and under

Middle to upper (0.7) – bands 6 – 7

Lower to Upper (1.3) - bands 8a – 9

Very Senior manager grades and medical and dental staffing are excluded from this calculation

Bank staff is not included in the Race Disparity Ratio

The ratio has worsened in the lower to middle and lower to upper disparity, Middle to upper disparity ratio is unchanged at 0.7 in 2021 and 2022.

The lower to middle race disparity ratios has deteriorated due to significant international recruitment, which has resulted in a large number of Black and Minority Ethnic nurses joining the Trust at Band 5.

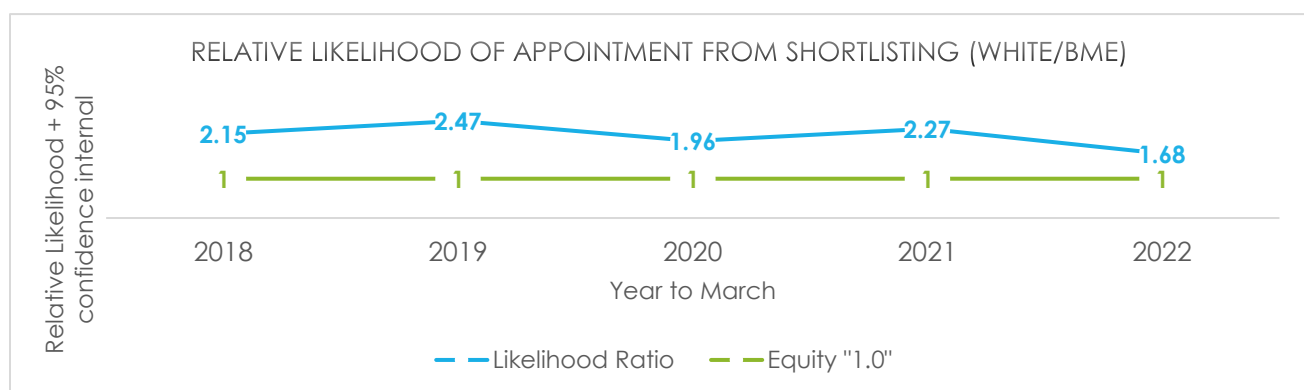
A key area of focus at the Trust is within our nursing workforce, where there is a significantly bigger race disparity ratio. This has actually increased over the last year as a result of ongoing international recruitment. As the Trust's international nurses are now settling into their roles the focus is shifting from induction to supporting career progression for these staff.

Work to improve the Trust's race disparity ratio is multifaceted, and includes changes to recruitment and promotion practises, educating staff and recruiting managers, raising awareness of career pathways and ensuring access to career development for Black and Minority Ethnic Staff.

Actions taken and planned

- Engagement with Race Equality Staff Network and Diverse & Inclusive Culture Subgroup have taken place to understand the barriers to career progression (See Metric 7 for more details)

Metric 2 - Relative likelihood of White Staff being appointed from Shortlisting



The figure below 1.0 indicates that BME applicants are more likely than White staff to be appointed from shortlisting. The likelihood ratio has improved from 2.27 last year to 1.68.

Despite having made positive progress on this indicator, the chart above illustrates that BME

applicants are still disadvantaged and less likely to be appointed compared to white candidates and this remains an area for improvement.

Actions taken and planned

- Ongoing audit is being undertaken by recruitment team to ensure the recruitment process is being conducted in line with recruitment guidance
- WRES Action group has reviewed WRES action plan and discussed progress. To create more inclusive recruitment opportunity, it was agreed that a scoping exercise will be undertaken to establish diverse recruitment and interview panels in 2023 and this will strengthen accountability for recruiting panels. Staff network members and Health & Wellbeing champions will be invited to become panel members including staff across the Trust
- Being a member of the South Yorkshire ICB EDI Co-production Working Group has been insightful and allowed measures to be implemented to promote inclusive recruitment. Some of these strategies can assist to create a diverse workforce in the Trust and to support those staff from diverse backgrounds once they are appointed

Metric 3 – Relative likelihood of BME Staff entering the formal disciplinary process compared to white staff (Obtained by Entry into a Formal Disciplinary Investigation)

	Relative likelihood in 2019	Relative likelihood in 2020	Relative likelihood 2021	Relative likelihood 2022
Relative likelihood of BME staff undertaking formal disciplinary process compared to White staff	0.00	0.36	0.00	4.05↑

2 (0.24%) BME staff entered formal disciplinary proceedings within the past 12 months compared to 1 (0.06%) of white staff, both figures appear very low. However statistical analysis of such low numbers of disciplinaries indicates BME entering the formal disciplinary process compared to white staff is therefore 4.05 greater and likely to enter formal disciplinary compared to White staff. Historically the figure was based on a 2-year rolling period now data focus on year end instead. There were no reports of BME staff entering a formal disciplinary in the previous year and for White staff 12 out of 3607. There is a reduction in the number of White staff entering formal disciplinary process for 2021 and this is a positive step. A key part of the NHS People Plan and WRES: A Model Employer requirement set out by NHS England is to reduce the numbers of minority ethnic staff in formal disciplinary, an area where nationally staff are over-represented.

Actions to be taken

The number of BME disciplinaries will continue to be monitored and ensure processes are followed and support provided. The intention is that potential disciplinary cases are dealt with at an early stage, with a view to resolving problems as quickly and fairly as possible.

Metric 4 - Likelihood of Staff Accessing Non-Mandatory Training and CPD

	Relative likelihood in 2019	Relative likelihood in 2020	Relative likelihood 2021	Relative likelihood 2022
Relative likelihood of White staff undertaking non-mandatory training compared to BME staff	1.03	1.01	0.88	1.13↑

Equity =1.0

There is a marked reduction for both staff groups in the likelihood of staff accessing non-mandatory training or CPD, 59% for BME and 66% for White staff (previous year was 92% BME and 81% White).

Ratio 1.13 – this value indicates that White staff were 1.13 times more likely to undertake non-mandatory training compared to BME staff. Clearly, there is a trend for both BME and White staff in the dramatic decline in staff accessing non-mandatory training. One of the factors may be attributed to the aftermath of the Pandemic. For example, there has been a decrease in medical staff undertaking non-mandatory /CPD and training due to the pandemic and the restrictions on face to face training.

Action taken

- The Diverse & Inclusive subgroup from Creating a Positive Culture steering group meet on a monthly basis. The subgroup identified this indicator as an objective for the Race Equality Staff Network to identify factors preventing staff from accessing non-mandatory training and feedback to the subgroup. Various suggestions were recommended including:
- More flexible approach to create opportunities if staff are unable to complete training during work time and provide back hours for the extra time used to complete training
- Targeted offers of national and regional training programmes, resources have been circulated to staff network members

Metric 5 - Percentage of Staff Experiencing Harassment, Bullying or Abuse from Patients, Relatives, or the Public in Last 12 months (Obtained from NHS Staff Survey)

	2018	2019	2020	2021
BME	20.5%	29.5%	22.4%	28.7% ↑
White	23%	27%	22%	22.5%

Disappointingly, the figure has increased in 2021 for BME and White Staff. For BME, an increase from 22.4% to 28.7% and White Staff similar to previous year (22.5%).

In fact, the data might be higher if incidence are consistently reported.

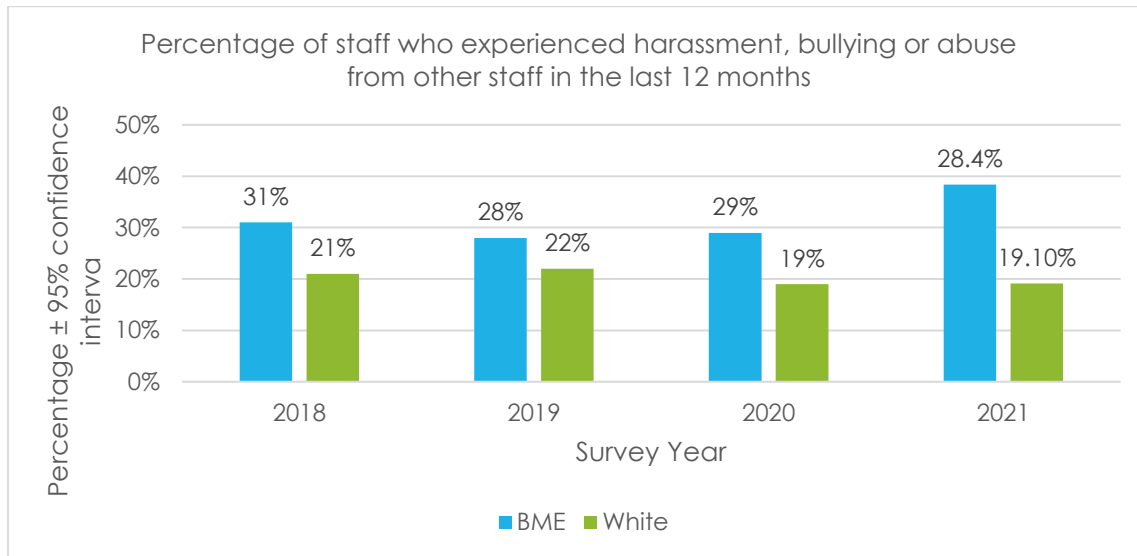
The NHS Staff Survey results indicates that the Trust scored below average in relation to the questions “the last time you experienced harassment, abuse or bullying did you report it?” and “the last time you experienced physical violence, did you report it?”; this shows a 2-year deterioration

This is consistent with some staff views from the Trust. For example, it has been highlighted that it is sometimes difficult to encourage staff to report verbal abuse because staff see it as part of the job and expects a certain degree of verbal abuse when working in Emergency department. Although respect posters are displayed, they are sometimes overlooked.

Actions Taken

- Violence & Aggression Management Group (VAMG) is established, benchmarking other Trusts and identifying shared learning
 - Priorities, Plans and Resources for violence reduction are in place and being developed further
 - Respect programmes are being delivered and de-escalation training.
 - New hashtag NoPlaceForHateInBarnsley is adopted across the Trust with partnership of Barnsley council
 - No place for hate & poster campaign to be enhanced and incorporate staff stories
 - Body cameras usage are worn in Emergency department, Acute Medical Unit and Community Diagnostic Centre and additional cameras are available upon request
 - Walkabouts have been completed looking at the type of signage across the Trust in respect to CCTV, body cameras and respect signage
 - Supporting Staff involved in an incident, inquest or claim policy has been updated to incorporate Debrief support following an incident, in response to VAMG request
 - Race Equality staff network is playing a vital part and collaboration with Freedom to Speak Up Guardian (FTSU) & Champions to allow a safe place for staff voice to be heard
 - Listening events for international recruits have been undertaken and unfortunately incidence of racism from patients were shared. There are a range of Civility & Respect activities planned and the efficacy of interventions will be monitored through the staff network, staff survey and other forums
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Metric 6 - Percentage of Staff Experiencing Harassment, Bullying or Abuse from other Staff in last 12 months (Obtained from NHS Staff Survey)



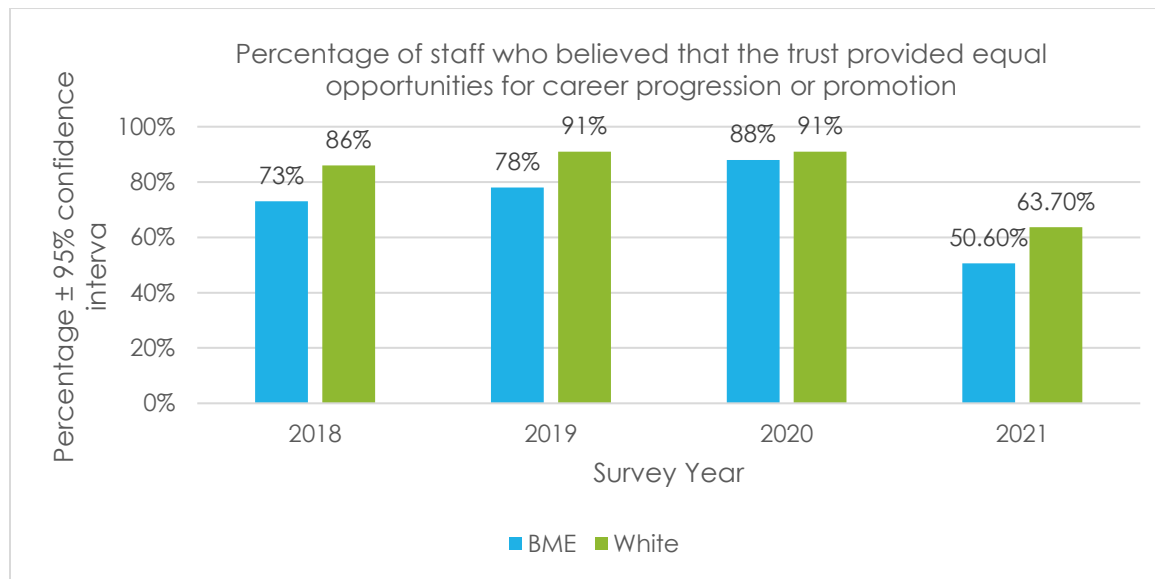
- The data set is similar to the previous year for BME, although marginally reduced (28.4%) and White staff, 19.1%. Previous year BME staff, 28.7% and for White staff, 19.1% (Average 28.5% for BME and White Ave 23.6%). There is a 9% gap for BME staff compared to White Colleagues. Listening events have also highlighted negative comments from staff. It is necessary for staff and managers to be reminded to be respectful and to translate the Trust values meaningfully and the implications if not followed.

Action Taken

- Restorative Culture training, as previously indicated will be taking place in November 2022 and rolled out across the Trust in 2023
- Positive workplace Culture group continues to look at ways to improve staff experience
- Learning and organisational team are developing a toolkit, planning training and looking at ways to address inappropriate behaviours and identify positive behaviours to encourage civility and respect
- Internal and External Mediation support is available. New internal mediators have been identified and training provided in August 2022. Refresher training for existing mediators has taken place in September 2022 and Mediation support service will be relaunched.
- Launching of Health & Wellbeing Champions and an increase in the number of champions have been identified. Meetings have taken place providing information about the role and responsibilities. Further training and ongoing support will be provided

- Specialist Staff Counsellor has been appointed and is supporting staff with counselling, drop in sessions in various departments and is also available to provide psychological debrief and mediation support

Metric 7 - Percentage of People believing that Trust provides equal opportunities for Career Progression to Promotion (Obtained from NHS Staff Survey)



There is a significant deterioration in the number of BME and White staff that believes the Trust provides equal opportunities for career progression to promotion, BME 50.6% and White 63.7%. This is in contrast to the previous reporting year 88.2% of BME staff and 91.1% of White staff believing that the Trust provides equal opportunities for career progression or promotion – White 63.7%, BAME 50.6% (BAME, Average score, 44.6% and White Average, 58.6%) higher than national average score.

Action taken and planned

Diversity & Inclusion sub-group has identified recommendations to support staff with Career progression:

- The Trust should consider longer-term career development needs of International nurses at Band 5 to ensure retention and further development of this group which has significantly increased in recent years.
- Communicate with managers and staff. Discussions to support staff and raise awareness, what factors are getting in the way of progression for those who are interested in pursuing their career progression

- Ensure mentorship and development plans are in place for aspirant BAME nurses and midwives
- More promotion of BAME people within the trust, publish success stories
- Ensure mentorship and development plans are in place for aspirant BAME nurses and midwives
- Empowerment for staff to progress in their career. Change managers mindset, to give staff time and opportunity to undertake training
- It has been highlighted that there is a big need for coaching and mentoring and staff empowerment as there is a hesitation amongst some staff to proactively advance their careers. Some staff believe that it is impolite to go and seek opportunities if it is not offered to them and some staff do not have
- A new talent management programme has recently been introduced as part of talent management offers, open for applications and promoted to all staff for Bands 2 - 3. Talent Management offers now includes:
 - ❖ **Aspiring Talent (Bands 2-3)**
 - ❖ **Arising Talent (Bands 4-6)**
 - ❖ **Ascending Talent (Bands 7 and above)**

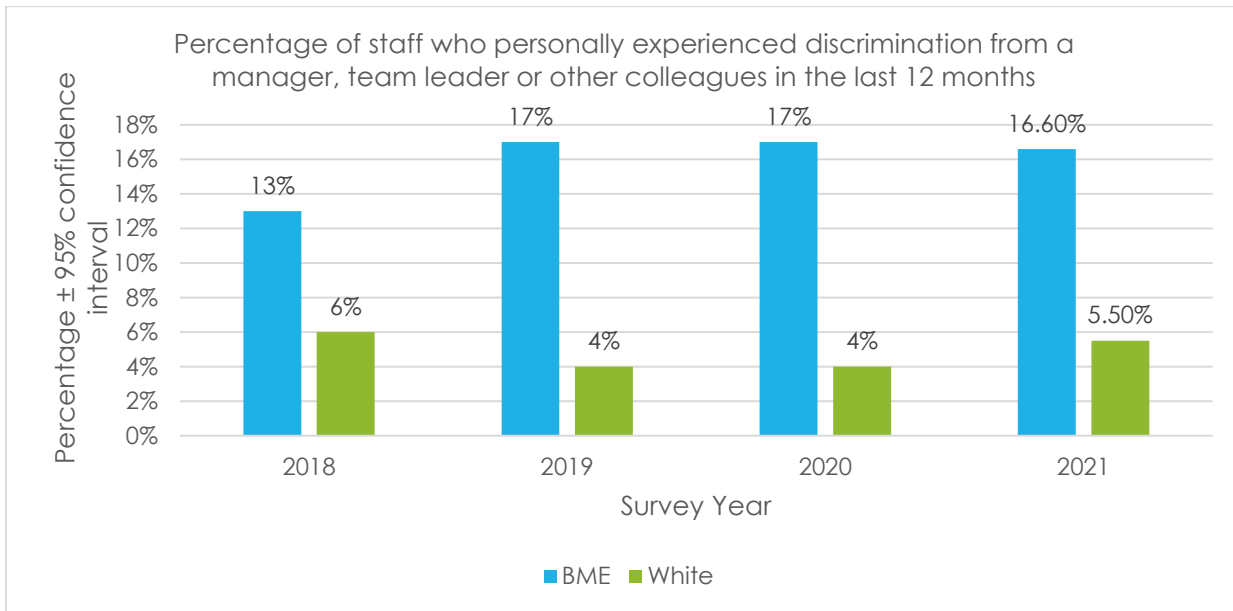
The Inclusive Culture Partnership Reciprocal Mentoring Programme, Graduation event will be taking place in October 2022 for the first cohort aspirant and established leaders.

- Dates are not yet agreed for the second cohort of the Inclusive Culture Partnerships reciprocal mentoring Programme. Several potential aspiring leaders have expressed interests in pursuing future programmes and established leaders in supporting the programme.

It is important for key learning to be identified and embedded and successes shared. Aspirant leaders identified key outputs and recommendations for action from the first cohort:

- Leaders to be equipped and able to respond and talk about race.
 - Create conditions for BME role models
 - Potential unfair / bias in recruitment processes and lack of diversity on interview panels. Talk is not translated into action.
 - Lack of trust in the system e.g. some communities have preconceptions about securing roles above Band 5 and do not apply for roles.
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Metric 8 – Percentage of staff who personally experienced discrimination at work from a manager, team leader or other colleague (Obtained from NHS Staff Survey)



The percentage of staff who personally experienced discrimination from other staff in the last 12 months is similar to the previous year, 16.6% for BME staff in 2021 and 16% in 2020. Again, this is significantly higher for BME staff in contrast to White staff (5.5%) where there is a slight increase for White staff from the previous year (4.3%). However, Benchmarking data show a slightly higher average score for BME (17.3%) and White Average 6.7% staff.

Action taken and planned

- Passport to Management EDI training has been refreshed and updated and ongoing training is delivered to managers
- Courageous Conversations training for Managers will be newly available as a separate session for all managers from October 2022 instead of being a part of the Passport to Management programme
- Compassionate Leadership is currently in development with an expected launch date in October / November 2022. It will focus on the key components of compassion and how we can all be more compassionate individuals, team leaders and a more compassionate organisation overall. There is also a section about inclusivity
- Civility & Respect Toolkit will be launched to guide managers to various internal and external resources designed to promote civility and respect to others

- **Metric 9 – Percentage Difference between the Organisations Board Voting Membership and its Overall Workforce**

BME Trust Board Voting membership is 0.0% compared to 10.1% of the Trust workforce; BME Board member is shared with Rotherham Trust, Director of Workforce and is on Rotherham payroll but works across Barnsley and Rotherham.

Trusts are required to look at the percentage difference between their organisations and overall workforce to ensure they reflect the Trust overall workforce. We know that diverse teams make better and safer decisions and there is a large body of evidence to support this

In March 2021, the overall board membership BME representation was underrepresented on the board by one member. The Trust performed better than 58% of Trusts and worse than 42%.

In 2021 steps have been taken to improve both the initial search and recruitment and selection processes to increase the field of appropriately diverse candidates. The Trust has also implemented an Associate Non-Executive Director (NED) programme to provide learning opportunities for individuals that may not necessarily be ready for a NED position, with a view to bringing wider diversity to the Board in the future.

3. Conclusions

There have been some improvements over the last 12 months but there is still further work required to be undertaken in order to improve BME experiences and to make the Trust the best place to work and create an organisational climate that supports Equality, Diversity and Inclusion.

The data shows improvements in the following areas:

- Increased BME workforce representation particularly at Band 5 largely due to the recruitment of International nurses and also notably seen in BME Medical trainee grades. An increase in numbers are seen in other staff groups highlighted in the report
 - Relative likelihood of BME appointments from shortlisting, positive improvements in this area although we will continue to focus our efforts in making further improvements
 - Slight improvement for BME Staff Experiencing Harassment, Bullying or Abuse from other Staff
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Unfortunately, there are disparities in the level of discrimination, harassment, bullying or abuse for BME staff in comparison to White Staff and the gap is widening. There are a range of interventions planned to foster a just and restorative culture and create compassionate leadership. We will be working closely with the Staff network and Diverse & Inclusive Culture Subgroup and actively seek the collaboration, inclusion and voice of our BME staff to develop plans and improvement. The aim is to develop and implement a range of activities to engage and listen to staff and make transformational changes. We would like to thank the Race Equality Staff Network and the Diverse & Inclusive Culture Subgroup for their commitment in promoting an inclusive culture.

The action plan highlights the steps to take to address the priority areas and reduce the identified gaps for the next 12 months.

- Increase the likelihood of candidates from an ethnic minority background being appointed from shortlisting across all posts/bands.
- Increase the percentage of BME staff colleagues in senior roles
- Increase the opportunity for BME staff to access non-mandatory and CPD and opportunity for career progression
- Further efforts to reduce the percentage of BME staff experiencing harassment, bullying and abuse from patients, relatives and the public
- Reduce the percentage of colleagues from an ethnic minority background experiencing harassment, bullying, abuse or discrimination at work

4. Recommendations

It is requested that the Board of Directors will ratify the WRES Annual Report 2022 and agree that the report will be published on the Trust's website by the reporting deadline of 31st October 2022.

Appendix 1 - Workforce Race Equality Standard (WRES) Action Plan 2022 - 2023

WRES Indicators	How this will be achieved	What expected outcome will be	What evidence will support this	Who will lead this	Where reported/ monitored e.g. Committee/ Group	Timescale	Update	RAG rating
1 & 2 Workforce Representation and Staff recruitment from shortlisting	Scope the feasibility of diverse recruiting panels	Improvement in likelihood of BME staff being appointed from shortlisting	2023 WRES data results	EDI Lead for Health & Wellbeing (HWB), Freedom to Speak up Guardian	PEG	January 2023	Project to look at forming a cohort of diverse staff to voluntarily sit on recruitment panels.	Amber
1.1 & 2.1 Workforce Representation and Staff recruitment from shortlisting	Scope how we can embed the authority to intervene into the recruitment process	Improvement in likelihood of BME staff being appointed from shortlisting	2023 WRES data results and mid-point data	Project to be undertaken by EDI Lead for Health & Wellbeing (HWB), Freedom to Speak up Guardian	PEG	January 2023	Project to look at the skills required for independent panellists to be able to carry out the role with confidence	Amber
1.3 & 2.3 Workforce Representation and Staff recruitment from shortlisting	Update recruitment guidance to propose introducing a mandatory EDI values - based question to be assessed in all applications and at all recruitment and selection interviews.	Improvement in likelihood of BME staff being appointed from short listing	Guidance completed	Head of I&WB and Recruitment Lead	PEG	Completed June 2022	Mandatory EDI question incorporated in application and interview stage in line with the new NHS Jobs New Service Launch.	Green
1.4 & 2.4 Workforce Representation and Staff recruitment from shortlisting	Actively promoting jobs' opportunities in partnership with communities and different organisations	Improvement in likelihood of BME staff being appointed from shortlisting	WRES Data results	Head of Inclusion & Wellbeing EDI Lead for HWB	PEG	January 2023		Amber

1.5 & 2.5 Workforce Representation and Staff recruitment from shortlisting	Targeted promoting resources for development / training programmes / skills and competencies, coaching/mentoring shadowing,	Improvement in likelihood of BME staff being appointed from shortlisting	WRES Data results	Head of Leadership & OD / Learning & OD Manager Head of Inclusion & Wellbeing / EDI Lead for HWB /	PEG	June 2022 / March 2023 October 2022	Training programmes, development opportunities cascaded to the networks and will continue to be circulated To collaborate with Learning & OD about talent management, promoting coaching/ mentoring,	Amber
1.6 & 2.5 Workforce Representation and Staff recruitment from shortlisting	Promote Talent Management offer which includes: <ul style="list-style-type: none"> • Aspiring Talent (Bands 2-3) • Arising Talent (Bands 4-6) • Ascending Talent (Bands 7 and above) 	Improvement in likelihood of BME staff being appointed from shortlisting	WRES Data results	Head of Leadership & OD / Learning & OD Manager	PEG	January 2023	Talent management programme to commence Jan 2023 Applications from July – September for cohort.	Amber
3.Relative likelihood of staff entering the formal disciplinary	Continue to monitor disciplinary figures	Low figures, ideally no reports of disciplinaries	WRES Data results	HRBP	PEG	November 2022 – March 2023		Amber

process, as measured by entry into a formal disciplinary investigation. This indicator will be based on data from a two-year rolling average of the current year and the previous year.								
4. Relative likelihood of BME staff undertaking non-mandatory training or CPD	BME accessing non-mandatory training	Improvement in accessing non-mandatory training	WRES Data results	Head of Leadership & OD	PEG	March 2023	57% of BME have accessed non-mandatory training compared to 61% of White staff.	Amber
5. Staff experiencing harassment, bullying or abuse from patients, relatives or public	Explore public facing information targeting respect for staff and the consequences.	Encourage a focus on respectful behaviours	WRES data – reduction in number of staff experiencing harassment, bullying or abuse	Head of I&WB Communications Lead	PEG Violence & Aggression Management Group	July 2022 – March 2023 June 2022 – March 2023 June 2022	Respect posters displayed across the Trust RESPECT programme training in place and being cascaded to staff across the Trust New hashtag #NoPlaceForHat eInBarnsley being adopted in partnership with Barnsley Council	Amber

						June 2022	Body cameras worn in some departments e.g. Emergency department, Acute Medical Unit Signage	
5.1 Staff experiencing harassment, bullying or abuse from patients, relatives or public	Encouraging staff to report abuse and provide support (counselling, debrief) Collaboration with Race Equality staff network, Freedom to Speak Up and allow safe place for voice to be heard	Staff to have the confidence to report or challenge in a non-threatening way harassment. Bullying or abuse	Less staff experiencing harassment, bullying or abuse	EDI Lead for HWB, Freedom to Speak Up Head of Inclusion & Wellbeing	PEG	June 2022 / March 2023	Staff network members encouraged to report incident. FTSU attended meeting and encouraged staff to speak up and report issues / concerns	Amber
6. Staff experiencing harassment, bullying or abuse from staff	Explore Trust current mediation process, refresher training, promotion of mediation and the benefits	Encourage a focus on an informal resolution framework	Less staff experiencing harassment, bullying or abuse	Head of I&WB 'Creating a Positive Culture' Steering Group	PEG	October 2022 Completed August / September 2022 June 2022 / March 2023	Mediation service to be relaunched, Mediation training and refresher training for internal mediators Support staff and Provide mediation as necessary	Amber

6.1 Staff experiencing harassment, bullying or abuse from staff	Encourage staff to speak up and report harassment, bullying or abuse Collaboration with Race Equality staff network, EDI champions, Freedom to Speak up, Health & Wellbeing	Staff to have the confidence to report or challenge in a non-threatening way harassment. Bullying or abuse BAME staff to have an addition vehicle to have a voice	Less staff experiencing harassment, bullying or abuse	Head of I&WB EDI Lead for HWB	PEG	April 2022 – Mar 2023	RACE Equality staff network in place Champions launched and training to be provided	Amber
6.2 Staff experiencing harassment, bullying or abuse from staff	Create and promote Restorative and Just Culture	Encourage a focus on respectful behaviours	Less staff experiencing harassment, bullying or abuse	Head of I&WB 'Creating a Positive Culture' Steering Group	PEG	Nov 2022 /23	Learning & Behaviours subgroup - Restorative Culture course to be undertaken in November 2022 and cascaded to staff across the Trust Respect Training	Amber
6.3 Staff experiencing harassment, bullying or abuse from staff	Create and Promote a just culture	Encourage a focus on respectful behaviours	Less staff experiencing harassment, bullying or abuse	Head of I & WB L &OD Manager	PEG	June 2022 / Marc 2023 November 2022	Respect Training Courageous Conversations training for staff and new programme for non-managers Civility & Respect Toolkit	Amber

							to be launched to include poor behaviours and EDI conversations	
7. 1 Believe equal opportunities for career progression or promotion	Ensure mentorship and development plans are in place for aspirant BME nurses and midwives.	Improvement on WRES indicators	Graduation of Trust's Aspiring Leader & Senior Leader participants 2021- 2022 ICS commissioned Inclusive Cultures Partnership Programme: Reciprocal Mentoring. Second Cohort to be promoted when dates are released	Head of I&WB L&OD Manager	PEG	October 2022 (on completion of 12 months programme) February 2023 / March 2023	Inclusive Cultures Partnership Programme Programme to be evaluated and identify and address any issues and cascade learning Date to be confirmed for next cohort ?Spring 2023 Potential candidates - expression of interests	Amber
7. 2 Believe equal opportunities for career progression or promotion	More promotion of BME people within the trust, publish success stories	People will see other people in promotions who look like them	More BME people included in marketing and promotion	Head of I&WB Communications Lead	PEG	December 2022	To Increase diversity in images across the Trust and liaise with Comms lead to provide images	

7. 3 Believe equal opportunities for career progression or promotion	Consider longer-term career development needs of International nurses at Band 5 to ensure retention and further development of this group which has significantly increased in recent years	Improvement in WRES indicators and retention of staff	International nurses retained and career progression	Associate Director of Professions	PEG	Completed June 2022 (in line with the Trust's appraisal window) June 2022 / March 2023	Peer support Inspiring session for international nurses completed Bespoke training designed to be delivered International Nurses Day Promote training programmes, events, resources	Amber
8. Staff experiencing discrimination at work from Manager/team leader or other colleagues	FTSU Guardian support H&WB champions incorporating the FTSU Champion and Diversity champions role Continue to collaborate with staff network	Reduction in number of BME staff experiencing discrimination at work and managers/team leaders awareness of what discrimination looks like	Sense check with FTSU Guardian and Champions	Head of I&WB FTSU Guardian	PEG	June 2022 / March 2023 Completed Completed	Continue to encourage staff to speak Up and report discrimination Managing Equality & Diversity Session Passport to Management training has been refreshed Liaise with FTSU, Staff network, Champions to identify any	Green

							episodes of discrimination	
8. Staff experiencing discrimination at work from Manager/team leader or other colleagues	Update Passport to Management training FTSU EDI & HWB Champions Compassionate leadership training	Reduction in number of BME staff experiencing discrimination at work and managers/team Promote programme and create respectful behaviours and just culture	WRES Data WRES Data	EDI Lead for HWB Head of I&WB L&OD Manager I/W	PEG	October 2022 October / November 2022	Passport to Management Diversity Training refreshed Compassionate leadership training to be launched Oct / 2022	Amber
9. Board representation	Proposal to create an Associate NED position for applicants with experience of living or working within BME communities and group	Successful appointment into the position To Increase better opportunity for BAME to apply for the roles	Appointment commences	Nominations Committee	Nominations Committee Council of Governors	Completed	NED appointed who identifies as BAME	Green
Board representation	To increase better opportunity for BME	Review Inclusive Recruitment	WRES Data	Head of I & WB	Council of Governors	December 2022	Liaise with Chair and explore	

	candidates to apply for roles						inclusive recruitment	
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KEY RAG Rating



Complete



On track for delivery



Behind plan and action needed to bring back on target