

Workforce Race Equality Standards

Action Plan 2022 / 2023



Overview

Our **People Strategy (2023 – 2030)** sets out a number of ambitions to becoming an organisation where our people feel valued and enabled. Themes relating to Equality, Diversity and Inclusion are found throughout our stated ambitions. This includes where we say:

- Our people will be welcomed, included, valued and enabled
- Our values will be lived in our every day, explicitly and authentically
- We will have high levels of awareness of our individual impact and we will recognise each other's strengths, perspectives and experience

This years actions against our people strategy have also included specific focuses on improving the experience of inclusion at the Trust. These actions include:

- Establish a golden thread of belonging, inclusion and compassion through all our people development activity, culture development programmes, policies and employment practice
- Launch an equality, diversity and inclusion delivery plan (2023 – 2025)

This year our WRES report highlights the specific actions from the People Strategy and the Inclusion Delivery Plan where they support improvement under each area.

The figures included in this plan are based on the National NHS Staff Survey from 2022 and the workforce figures were taken from 31st March 2023.

Our 10 High Impact Equality Actions

Our Inclusion Delivery Plan 2023-2025

This plan links to our People Strategy – Valuing and Enabling our People. Our strategy commits to establishing a golden thread of belonging, inclusion and compassion through all our people development activity, culture development programmes, policies and employment practice and sets out 2030 vision for belonging:



HIA 1

Undertake an EDI audit of all recruitment and selection processes to ensure fairness and equity is embedded, ensuring we are recruiting inclusively across all staff groups



HIA 2

Launch an Inclusive Mentoring Programme



HIA 3

Launch our new reporting and staff support approach for violence, aggression and discrimination incidents, ensuring staff are encouraged and supported to report incidents



HIA 4

Develop and implement a UHCW Anti-Racism Toolkit, giving colleagues the tools, support and resources, they need



HIA 5

Develop and launch a new range of inclusion education and training programmes, with education embedded into core people processes and practices



HIA 6

Develop and introduce a new Menopause policy, ensuring the appropriate support and guidance is in place for colleagues who are peri-menopausal or menopausal and providing leaders with the guidance they need to best support colleagues.



HIA 7

Complete our re-assessment for Rainbow Badge – Phase 2, ensuring we are continuing to make improvements for services for patients who identify as LGBTQ+ and ensuring people practices, procedures and policies are inclusive for colleagues who identify as LGBTQ+.



HIA 8

Launch an Inclusive Glossary, helping to raise awareness and ensure colleagues have the everyday support they need.



HIA 9

Launch our Inclusion Calendar, providing colleagues with a resource for actively promoting and raising awareness and breaking down barriers and fosters an inclusive environment for patients and colleagues



HIA 10

Signing up organisationally to the progressive Rainbow Badge, providing our visible commitment to creating an inclusive environment for patients and colleagues who identify as LGBTQ+.

Recruitment and Retention

Indicator 1 – Percentage of staff in AFC pay bands or medical and dental subgroups and very senior managers (including Executive Board members) compared with the percentage of staff in the overall workforce

Year	White staff		BME Staff		Unknown		Total
2021	6471	56.20%	3135	27.24%	1907	16.56%	11,513
2022	5647	58.9%	2829	29.5%	1112	11.6%	9,588
2023	5560	56.63%	3403	34.66%	855	8.71%	9818

WRES Indicator 1 - There are consistent year on year improvements in the self reporting of ethnicity and the number of 'unknown' has decreased.

However, we recognise that a proportion of staff are still to disclose their ethnicity. This is being addressed via our Inclusion Delivery Plan with a plan to reduce this gap further this year.

Indicator 2 – Relative likelihood of BME staff being appointed from shortlisting across all posts

2021	0.96
2022	1.48
2023	1.49

A figure above 1 indicates that BME staff are less likely than White staff to be appointed from shortlisting

Indicator 3 – Relative likelihood of BME staff entering the formal capability process

2021	1.03
2022	0.50
2023	0.85

A figure above 1 indicates that BME staff are more likely than White staff to enter the formal capability process

WRES Indicator 2 - The figures show that BME applicants are less likely to be appointed from shortlisting.

WRES Indicator 3 - Although there has been a deterioration in 2023, the ratio of BME staff entering the formal capability process remains below 1 highlighting that BME staff are less likely to enter the formal capability process than their white staff.

Training and Development

Indicator 4 – The relative likelihood of white staff accessing non-mandatory training and CPD compared to BME staff

2021	N/A
2022	1.01

WRES Indicator 4

This is the first time the Trust has submitted these figures as systems are now in place to capture this data on an ongoing basis. This indicator shows that BME staff and white staff have the same access to non mandatory training and CPD.

Recruitment and Retention

The table below shows the specific actions we are taking as part of our Inclusion Delivery Plan (IDP) and top 10 high impact actions to specifically improve our results under recruitment and retention

Objective : Enable and provide a safe, healthy, fulfilling and inclusive environment for all staff, regardless of their colour, ethnic group or nationality to tackle racial inequality, discrimination and harassment

High Impact Action 1	Undertake an EDI audit of all recruitment and selection processes to ensure fairness and equity is embedded, ensuring we are recruiting inclusively across all staff groups
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Planned Actions	Update	Progress Measure
Complete a review of recruitment and selection processes to identify any discriminatory processes (IDP Action 6.1)	Review started in July 2023 and will be completed by December 2023.	Indicator 2 of WRES to be below 1, to show that BME candidates are more likely than white candidates to be appointed from shortlisting. 2023 shows a figure of 1.49.
Ensure interview panels reflect Trust values. (IDP Action 6.2)	Review started in July 2023 and will be completed by December 2023.	Unconscious Bias training is embedded within the recruitment and selection process and training for line managers

Violence and Aggression

Indicator 5 - Percentage of staff experiencing harassment, bullying or abuse from patients / service users, relatives or the public in last 12 months

	2018	2019	2020	2021	2022
White staff	28.2%	28.5%	28.6%	31.8%	30.6%
BME staff	22.1%	24.5%	26.4%	27.8%	28.4%

WRES Indicator 5 - The figure for White staff has slightly decreased from 2022 but remains above the scores from the last five years. The figure for BME staff has seen a slight increase and continues to increase year on year.

White staff are more likely to experience harassment, bullying and abuse than BME staff.

Both sets of figures have seen a decrease and are at their lowest levels since 2018.

Indicator 6 - Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months

	2018	2019	2020	2021	2022
White staff	26.8%	25.9%	27.3%	25.2%	20.6%
BME staff	25.0%	25.5%	29.8%	27.5%	25.0%

WRES Indicator 6 - BME staff are more likely to experience harassment, bullying and abuse than white staff.

Violence and Aggression

The below table shows the specific actions we are taking as part of our Inclusion Delivery Plan (IDP) and top 10 high impact actions to specifically improve our results under violence and aggression

Objective : Enable and provide a safe, healthy, fulfilling and inclusive environment for all staff, regardless of their colour, ethnic group or nationality to tackle racial inequality, discrimination and harassment

High Impact Action 3	Launch our new reporting and staff support approach for violence, aggression and discrimination incidents, ensuring staff are encouraged and supported to report incidents
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High Impact Action 4	Develop and implement a UHCW Anti-Racism Toolkit, giving colleagues the tools, support and resources, they need
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Planned Actions	Update	Progress Measure
Review and develop a robust reporting mechanism for victims and witnesses of discrimination. (IDP Action 6.6)	Internal multidisciplinary team bringing together a number of workstreams including reporting via internal systems and a director level response to support those impacted by violence and aggression at work. The FTSU (Freedom to Speak Up) staff app now has an option for anonymous reporting. Further work around improving the reporting rate and raising awareness is ongoing.	Increase in number of incidents reported. Improvement in staff confidence on actions taken following reports as measured through National Staff Survey

Violence and Aggression

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Objective : Enable and provide a safe, healthy, fulfilling and inclusive environment for all staff, regardless of their colour, ethnic group or nationality to tackle racial inequality, discrimination and harassment

Planned Actions	Update	Progress Measure
Ensure continuation with the no excuse for abuse campaign (IDP Action 6.7)	This campaign is ongoing	Reduction in Indicators 5 and 6 of WRES by 3%
Audit of a sample of formal cases (disciplinary and grievance cases) to ensure the process is free from bias (IDP Action 6.6)	This audit is due to commence in September 2023	Ensure that indicator 6 of WRES continues to decrease (figure for 2022 is at 25%)
Develop and implement a UHCW Anti-Racism Toolkit, giving colleagues the tools, support and resources, they need (IDP High Impact Action 4)	The Anti racism toolkit was launched in July 2023 and provides practical guidance and includes resources to help develop confidence in challenging racism.	Reduction in Indicators 5 and 6 of WRES by 3%

Belonging

Indicator 7 - Percentage believing that the Trust provides equal opportunities for career progression or promotion

	2018	2019	2020	2021	2022
White staff	60.0%	61.9%	58.7%	61.0%	61.1%
BME staff	46.4%	47.6%	39.6%	42.1%	46.6%

WRES Indicator 7 - The figure for BME staff has seen an increase continuing the improvements trend from 2020. However it is concerning that the figure remains significantly lower than the figure for White staff.

Indicator 8 – In the last 12 months have you personally experienced discrimination at work from any of the following? Manager / Team Leader or other colleagues

	2018	2019	2020	2021	2022
White Staff	5.7%	4.8%	7.4%	7.0%	7.4%
BME Staff	12.0%	11.7%	18.8%	16.5%	17.5%

WRES Indicator 8 - The figure for BME staff experiencing discrimination is almost double the figure for white staff. Since the significant worsening of experience in 2020, this figure has remained high across all ethnicities and is of concern.

Belonging

The table below shows the specific actions we are taking as part of our Inclusion Delivery Plan (IDP) to improve our results under belonging

Objective : Enable and provide a safe, healthy, fulfilling and inclusive environment for all staff, regardless of their colour, ethnic group or nationality to tackle racial inequality, discrimination and harassment

Planned Actions	Update	Progress Measure
Establish and launch the Mentoring for Inclusion pilot (IDP Action 6.3)	The pilot is in place and will be reviewed in September 2023. Recruitment for Cohort 2 has commenced.	Increase Indicator 7 of WRES relating to career progression for BME staff from 46.6% (figure in 2022) to 51%
Review current development and training opportunities for all staff, with particular attention to access to development opportunities both formal and informal which lead to promotion and access to senior grades in the Trust. (IDP Action 6.4)	Work has commenced to ensure that the golden thread of belonging runs through all of our training and development programs.	Identification of changes and improvements to be made with dates of implementation and impact measures.
Develop and deliver career development workshops to support BME staff (IDP Action 6.5)	We are at the development stage of this program of work.	Increase Indicator 7 of WRES relating to career progression for BME staff from 46.6% (figure in 2022) to 51%

We have achieved our target to increase Indicator 7 of WRES relating to career progression for BME staff from 42.7% (figure in 2021) to 46.6%



University Hospitals
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NHS Trust

Our Board

Indicator 9 – Percentage difference between the organisations' Board membership and its overall workforce disaggregated

	White	BME	Unknown
2021	3.8%	-13.9%	10.1%
2022	12.5%	-15.2%	2.7%
2023	19.8%	-11.1	8.7%

WRES Indicator 9 - We have made significant progress on self reporting with our Board members mirroring the success we have seen with other staff groups. The unknown category is zero. We have a total of 17 Board members 13 of whom are White, 4 are BME.

This figure is the difference (Total Board- Overall workforce)

The table below shows the specific actions we are taking as part of our Inclusion Delivery Plan (IDP) to improve our results under belonging

Objective : Enable and provide a safe, healthy, fulfilling and inclusive environment for all staff, regardless of their colour, ethnic group or nationality to tackle racial inequality, discrimination and harassment

Planned Actions	Update	Progress Measure
Increase reporting to reduce the 'Unknown' Category	<p>Focussed administrative support remains ongoing to encourage more people to report their ethnicity</p> <p>Continued communication campaigns to raise awareness and support self-reporting</p>	Reduction of 2% in the WRES Indicator 1