

Alder Hey WRES Annual Report 2020



Date of report
31 August 2020

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Names of commissioners this report has been sent to - Liverpool CCG

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Unique URL link on which this Report and associated Action Plan will be found
<https://alderhey.nhs.uk/about-us/our-board/publications>

This report has been signed off by on behalf of the board on - 8 September 2020

Background narrative

Any issues of completeness of data - Metric 3: There are few BME staff entering formal disciplinary procedures to enable us to provide quality data.

Any matters relating to reliability of comparisons with previous years- No

Total number of staff employed within this organisation at the date of the report - 3,682

Proportion of BAME staff employed within this organisation at the date of the report - 271
(7.3%)

The proportion of total staff who have self-reported their ethnicity 3,649 (99.1%) A total of 33 (0.9%) has not self-reported their ethnicity

Have any steps been taken in the last reporting period to improve the level of self-reporting by ethnicity - Human Resources (ESR team and recruitment team) regularly request staff to complete this information to improve the quality of data. The ESR team also provides regular drop in sessions to support staff to use ESR. The number of staff not self-reporting by ethnicity is similar to the previous year.

Are any steps planned during the current reporting period to improve the level of self-reporting by ethnicity? We have a high level of ethnicity self-declaration at Alder Hey and we will continue with our current process as above, to maintain this.

Workforce data

What period does the organisation's workforce data refer to? 1 April 2019 to 31 March 2020

Workforce Race Equality Indicators

For each of these workforce indicators, compare the data for White and BAME staff.

Percentage of staff in each of the AfC Bands 1-9 and VSM (including executive Board members) compared with the percentage of staff in the overall workforce. Organisations should undertake this calculation separately for non-clinical and for clinical staff

Data for reporting year:

Workforce	2019/20		2018/19	
	BAME	White	BAME	White
Clinical				
Under Band 1	0.00%	0.00%	0.00%	0.00%
Band 1	0.00%	0.00%	0.00%	0.00%
Band 2	*	4.46%	4.01%	*
Band 3	*	6.50%	6.18%	0.14%
Band 4	8.79%	3.57%	2.76%	0.00%
Band 5	12.09%	19.79%	19.53%	1.08%
Band 6	11.36%	15.42%	13.98%	0.60%
Band 7	2.56%	10.66%	9.79%	0.31%
Band 8a	3.66%	4.58%	3.67%	*
Band 8b	0.00%	0.89%	0.85%	*
Band 8c	0.00%	0.50%	0.51%	0.00%
Band 8d	0.00%	*	*	0.00%
Band 9	0.00%	*	*	0.00%
VSM	0.00%	*	*	0.00%
Medical & Dental Consultant	34.07%	4.58%	4.04%	2.19%
Medical & Dental Non-Consultant Career Grade	4.40%	0.35%	0.37%	0.31%
Medical & Dental Trainee Grades	7.33%	0.50%	0.46%	0.43%
Non Clinical	%	%	%	%
Under Band 1	0.00%	0.00%	0.00%	0.00%
Band 1	*	0.56%	4.16%	*
Band 2	2.20%	8.12%	4.87%	0.28%
Band 3	3.66%	4.99%	4.27%	0.20%
Band 4	*	5.97%	6.06%	0.23%
Band 5	*	2.19%	1.79%	*
Band 6	*	1.39%	1.37%	*
Band 7	*	1.65%	1.74%	*
Band 8a	*	1.54%	1.02%	*
Band 8b	*	0.74%	0.68%	0.00%
Band 8c	0.00%	0.30%	0.23%	0.00%
Band 8d	0.00%	*	*	0.00%
Band 9	0.00%	0.00%	0.00%	0.00%
VSM	*	0.41%	0.17%	0.00%

*is number less than 5

2019/20

Non-Clinical BME Staff Total = 34 (0.9%)

Clinical BME Staff Total = 237 (6.4%)

2018/19

Non-Clinical BME Staff Total = 34 (0.9%)

Clinical BME Staff Total = 185 (5.3%)

Overall BAME Staff Total is 271 (7.3%)

The implications of the data and any additional background explanatory narrative - We have marginally increased our BAME staff from 219 (6.2%) to 271 (7.3%).

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective - The Trust has set itself a 5 year target to increase the proportion of BAME staff by 1% year on year.

- We will continue to progress equality objective 3 to 'Increase the diversity at all levels of the workforce to truly represent the community we serve' aligned to EDS2 Metric 1, 3.1, 3.6, 4.1
- The ESR team continue to improve the quality of data to improve the self-reporting of ESR
- The WRES data Metric 2 suggests that if you were a BAME applicant you were more likely in 2019-2020 than a White applicant to secure a position, when shortlisting.
- The Trust implemented an exit questionnaire, which is in addition to the leavers form completed by the line manager with staff and recorded on ESR. This is requested on termination of contract and completed by the individual via their electronic staff record. The exit questionnaire data is currently broken down by division, service group and department. The Trust is currently reviewing how to better capture and utilise exit interview data to better understand the reasons why staff including BAME staff are leaving. Data relating to retention of BAME staff will be reported on a regular basis so that timely interventions can be considered if necessary and where possible.
- The Trust was successful following an expression of interest to Health Education England to join the Step into Work programme. The programme is a work experience programme to promote healthcare careers to people from minority groups. The aim of the programme is to offer rotational healthcare and administrative placements within Paediatric services that could progress onto apprenticeship or bank positions.
- We will ensure that our apprenticeship scheme is a key driver in employing staff from diverse backgrounds.
- We continue with the Step into Work programme as well as multiple vocational placement opportunities which are available to all learners including those belonging to BAME groups. In the forthcoming year we will particularly focus on how to attract more BAME candidates.
- The Trust held a number of careers fairs and worked with local senior schools to support BTEC Health and Social Care Programmes. We will continue to work with local partners to promote Alder Hey as an employer for BAME young people.
- We introduced an international recruitment programme recruiting 25 Indian Nurses and plan to recruit a further 15 nurses this year. The nurses intend to bring families over the UK who will be given the opportunity to apply for Trust vacancies.

- We will work with local HEI's to increase the diversity of students training with us.
- We will continue to develop the BAME staff network so that we can have a better understanding of the workplace experiences of BAME staff.
- We will continue to develop our leaders to be more inclusive leaders via our in-house Strong Foundations leadership programme.
- We will review our induction process to ensure it promotes an inclusive and culturally sensitive organisation.
- We will continue to review all of our marketing and communications collateral to ensure it reflects a diverse workforce, families and patients.

Although the Trust has identified an increase in BAME staff from 6.2% (18/19) to 7.3% (19/20), it has however noted a decrease in BAME staff within Bands 5,6 and 7 for the same period. The Trust will commit to undertaking an analysis of the possible reasons for this and developing a specific action plan for these bands, including reviewing recruitment practices and analysing reasons for leaving.

Relative likelihood of staff being appointed from shortlisting across all posts.

Data for reporting year:

- White: 17.47% BAME: 18.73%
- Data for previous year:
- White: 15.11% BAME: 13.9%

The implications of the data and any additional background explanatory narrative

- The data continues to suggest minimal difference in the likelihood of being appointed based on ethnicity although the data this year suggests you are marginally more likely to be appointed if you are from a BAME background.

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective

- We will progress equality objective 3 to 'Increase the diversity at all levels of the workforce to truly represent the community we serve' aligned to EDS2 Metric 1, 3.1, 3.6, 4.1

Relative likelihood of staff entering the formal disciplinary 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.

Data for reporting year:

- Although the number of white staff entering formal disciplinary cases has significantly increased to 0.86% (29 in total) there are few BAME staff 0.37% entering the formal disciplinary procedure .

Data for previous year:

- The data suggested there were no BAME staff and few White staff 0.004% (14 in total) entering the formal disciplinary procedure.

The implications of the data and any additional background explanatory narrative:

- As reported in previous years we have too few BAME staff and too few staff entering formal disciplinary procedures to enable us to provide any meaningful data. The Trust's BAME staff do not receive any disproportionate disciplinary action compared to White staff.

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective

- We will continue to engage with our BAME staff via the network to monitor any discriminatory behaviour in the workplace.

Relative likelihood of staff accessing non-mandatory training and CPD

For the reporting year 2019, there were no recorded BAME employees who accessed non-mandatory training. This compares to 14 employees who were from a white background. Based on the number of staff and the percentage of both white and BAME backgrounds, this equated to white employees being 2.48% more likely to access this training.

For the 2020 reporting year, 4 employees from a BAME background accessed this training. This contributed to reducing this gap from 2.48% to 2.3%, between white and BAME employees.

Although the pool of applicants from both white and BAME backgrounds for this training and relatively small, totalling 118 staff, work will be undertaken to further reduce this gap.

The implications of the data and any additional background explanatory narrative

- As this year's figures suggest, we have seen an increase in the likelihood of BAME staff accessing non-mandatory training and CPD this year. However, as this pool of applicants (as in previous year's) is very small, totalling 118, and the

percentage of BAME staff that have access to CPD (Non-Medical only) is also small, we can infer very little from this information.

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective

- We continue to increase our visibility of study leave across the trust year on year from 53 two years ago to 118 this year which allows us to start to draw more meaningful comparisons. Over the next 12 months we will continue to promote CPD and other opportunities to our BAME staff via our BAME network as well as seek ideas from this group on how we can further improve access for staff.

National NHS Staff Survey indicators (or equivalent).

Board representation indicator

For this indicator, compare the difference for White and BAME staff.

Percentage difference between the organisations' Board voting membership and its overall workforce

White: 7.5%

The overall workforce is 91.7% white and the board is 84.2% white so the board has a 7.5% difference in under-representation of white staff.

BAME: 8.4%

The overall workforce is 7.4% BAME and the board representation is 15.8% BAME so the board is over-representative of BAME staff in the workforce.

Are there any other factors or data which should be taken into consideration in assessing progress?

Staff networks are supported by executive sponsors who have an interest in equality, diversity and inclusion and champion diversity at board level in addition to workplace initiatives to help create a more inclusive culture.

The Trust has ensured representation across its COVID19 response leadership and governance teams from as wide a group as possible that represents and reflects the diversity across the organisation specifically including our Joint Tactical Commander and Senior Medical Advisor. This has been done via an inclusive communications approach and a determination to ensure that our COVID19 response generates ideas and actions from all areas of our diverse workforce groups.

In direct response to the emerging evidence suggesting a disproportionate impact of coronavirus (COVID-19) on BAME groups the Trust responded quickly. Since May 2020 the

Trust has held weekly discussions with BAME staff chaired by the Director of HR & OD, and attended by the Director of Medicine Division (who is the Executive Sponsor of the BAME network), the Freedom to Speak Up Guardian, the Equality and Diversity Manager and a member of staff who held the role of BAME Network Chair in another Trust. In addition to enabling executive staff to speak directly with BAME colleagues on a regular basis, the Trust is keen to build a stronger BAME network, and the conversations have been a fantastic way to engage and talk to staff about what they want from a network.

Diversity and Inclusion is recognised as a Trust wide risk and appears on the Board Assurance Framework for 20/21.

- 1. Organisations should produce a detailed WRES action plan, agreed by its board. It is good practice for this action plan to be published on the organisation's website, alongside their WRES data. Such a plan would elaborate on the actions summarised in this report, setting out the next steps with milestones for expected progress against the WRES indicators. It may also identify the links with other work streams agreed at board level, such as EDS2. You are asked to provide a link to your WRES action plan in the space below.**

The Trust had planned in 2019/20 to establish an operational group to provide assurance to the workforce committee that workforce EDI objectives (referenced in this document that integrates the WRES action plan) would be progressed. This will be included in 2020/21 plans. In addition, Trust executives participated in a reciprocal mentorship programme and plan to re-launch this in 2020/21.

<https://alderhey.nhs.uk/about-us/our-board/publications>

Appendix 1

WRES Indicators

Indicator	WRES indicators for Alder Hey		2019	2020	National Data (2019)
2	Relative likelihood of white applicants being appointed from shortlisting across all posts		1.15	0.93	1.46
3	Relative likelihood of staff entering the formal disciplinary process	BAME	0	0.43	1.22
		WHITE	0	0	
4	Relative likelihood of staff accessing non-mandatory training and CPD		n/a	2.30 (White)	1.15 (BME)
9	BAME voting board membership representation		8.30%	21.40%	8.40%
5	Percentage of staff experiencing harassment, bullying or abuse from patient, relatives of the public in the last 12 months	BAME	24.30%	27.4%	29.80%
		WHITE	24.60%	20.3%	27.80%
6	Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months	BAME	20%	25.40%	29%
		WHITE	19.70%	19.30%	24.20%
7	Percentage of staff believing that the Trust provides equal opportunities for career progression or promotion	BAME	78.40%	72.1%	69.90%
		WHITE	87%	85%	83.60%
8	Percentage of staff personally experiencing discrimination at work from a manager/team leader or other colleagues	BAME	11.30%	15.8%	15.30%
		WHITE	4.70%	5%	6.40%

The Trust notes that within WRES indicator 5 , there has been an increase in BAME staff experiencing harassment, bullying or abuse from patients, relatives and the public, and against WRES Indicator 6, have experienced this behaviour from other staff. The Trust is committed to addressing and reducing this behaviour from both sources and measures to support this are set out within the WRES action plan. This includes the implementation of the BAME Taskforce and the revised Bullying and Harassment Policy, now renamed 'Respect at Work'.

Within this 'Respect at Work Policy' there is a commitment to take action in the event of any inappropriate behaviour, which is observed or reported regardless of whether or not the complainant and/or alleged perpetrator is a Trust employee. This message is communicated to all staff on commencement with the Trust and regularly thereafter and for everyone who comes into contact with Trust staff. Types of communication will vary and will include appropriate materials and via electronic means.

The above standard of conduct is coupled with our zero tolerance approach to racism and negative conduct.

Turning to WRES indicator 8, the Trust notes that the percentage of BAME staff who have said that they have personally experienced discrimination at work from a manager/team leader or other colleagues increased in 2020. As with the 5th and 6th indicators, these will be addressed by the Trust.

In the context of addressing personally experienced discrimination, as well as applying the principles set out within the local '*Respect at Work Policy*' and the '*The Equality Act (2010)*', the Trust has implemented a dedicated BAME taskforce led by a Non-Executive Director.