

Response ID ANON-R89M-8J9M-R

Submitted to **Workforce Race Equality Standard (WRES) reporting template**
Submitted on **2017-11-21 14:18:20**

Introduction

1 Name of organisation

Name of organisation:

Liverpool Heart & Chest Hospital

2 Date of report

Month/Year:

Data taken as at 31st March 2017

3 Name and title of Board lead for the Workforce Race Equality Standard

Name and title of Board lead for the Workforce Race Equality Standard :

Joanne Twist, Director of Workforce Development

4 Name and contact details of lead manager compiling this report

Name and contact details of lead manager compiling this report:

Rachael McDonald, HR Business Partner & Lead for Equality and Inclusion for the Workforce - 0151 600 1212

Vinny Langan, Workforce Information Analyst - 0151 600 1231

5 Names of commissioners this report has been sent to

Complete as applicable::

Liverpool Clinical Commissioning Unit

Workforce Race Equality Standard reporting template

6 Name and contact details of co-ordinating commissioner this report has been sent to

Complete as applicable.:

Andy Woods

Senior Governance Manager (Merseyside Inclusion Service)

NHS South Sefton CCG

Merton House

Stanley Road

Bootle

L20 3DL

Mobile: 07825111596

E mail1 andrew.woods@southseftonccg.nhs.uk

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7 Unique URL link on which this report and associated Action Plan will be found

Unique URL link on which this Report and associated Action Plan will be found:

<https://www.lhch.nhs.uk/about-lhch/equality-and-inclusion/>

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

Name::

The Board of Directors

Date::

31st October 2017

Background narrative

9 Any issues of completeness of data

Any issues of completeness of data:

Ethnicity data in ESR: - this data is only currently captured during recruitment and through monthly data cleanse of the WOVEN report. Please see improvement in self reporting ethnicity data from 2016 to 2017.

The Trust undertook a electronic data cleanse in 2016 which also helped to improve data quality in ESR.

10 Any matters relating to reliability of comparisons with previous years**Any matters relating to reliability of comparisons with previous years:**

The Trust has been able to report in 2017 in relation to CPD, but there is no comparator against 2016. Refer to notes on data template.

The Trust has been able to report a full year recruitment data as at March 2017 which wasn't available in the previous year due to the changes in recruitment software (TRAC)

Self reporting**11 Total number of staff employed within this organisation at the date of the report:****Total number of staff employed within this organisation at the date of the report:**

1579

12 Proportion of BME staff employed within this organisation at the date of the report?**Proportion of BME staff employed within this organisation at the date of the report:**

10.4%

13 The proportion of total staff who have self reporting their ethnicity?**The proportion of total staff who have self-reported their ethnicity:**

98.6%

14 Have any steps been taken in the last reporting period to improve the level of self reporting by ethnicity?**Have any steps been taken in the last reporting period to improve the level of self-reporting by ethnicity:**

As part of the Trusts E&I Strategy, an electronic data cleanse exercise was undertaken to help improve our equality data. The results above show an improvement in staff self reporting their ethnicity from 92% in 2016 to 98.6% in 2017

The Trust continues to action the monthly WOVEN reporting to help close the gaps and improve accuracy of reporting

A manual ESR update for new starters undertaken by The Resourcing Team.

15 Are any steps planned during the current reporting period to improve the level of self reporting by ethnicity?**Are any steps planned during the current reporting period to improve the level of self reporting by ethnicity:**

The Roll out of employee self service - October 2017

Workforce data**16 What period does the organisation's workforce data refer to?****What period does the organisation's workforce data refer to?:**

Data from 1st April 2016 to 31st March 2017

Workforce Race Equality Indicators**17 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:**

The results show that the largest proportion of BAME staff in the Trust are medical staff.

There has been a slight increase in the % of BAME staff within Band 5-7 roles, but there remains a low proportion of BAME staff in non-clinical roles, with a clear gap is evident in Band 8a and above.

Data for previous year:

The results remain consistent with the previous year

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

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

Please see WRES Action Plan attached which outlines the specific objectives to improve this.

The Resourcing Team have expanded advertising to help reach BAME groups and communities and uses social media to target specific groups through social media.

A targeted approach has been adopted for leadership training opportunities across the BAME workforce and the promotion of NHS Leadership Academy Opportunities are promoted and link to the talent management appraisals.

Bespoke Interview Skills Training was launched and delivered in July 2017 which included a mock interview to a group of BAME staff. Two of the staff that attended have secured promotion within the organisation.

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

Data for reporting year:

There has been an improvement against the indicator relating to the likelihood of BAME staff being appointed from shortlisting across all posts.

Data for previous year:

In 2016, the dates showed at white staff were 3.01 times more likely to be appointed from shortlisting and in 2017 this has reduced to 1.84

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

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

Please see WRES Action Plan which is aligned to the Trust's 3 Year E&I Strategy.

The Trust is about to embark on a journey of implementing values based recruitment and a training package will be designed to support the implementation which will include exploring unconscious bias and supporting Managers to give meaningful feedback.

A staff engagement exercise will be launched to support the design of VBR and BAME will be approached to ensure that there is opportunity to contribute to the thinking.

19 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:

There have been no formal recorded disciplinary or grievances against/from BAME staff within the reporting year. This an improvement on the previous year.

Data for previous year:

There were 6 record disciplinary cases in ESR between 2015 and 2016 and one of these cases were recorded as BAME

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

Disciplinary cases at the Trust remain low - there is no specific concern regarding this indicator in terms of our BAME workforce.

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

Investigation Officer Training was delivered by Weightmans Solicitors in January 2017 to increase the pool and confidence of trained officers and to understand the legislation associated investigations involving the workforce.

20 Relative likelihood of staff accessing non-mandatory training and CPD.

Data for reporting year:

In 2016, the Trust could not submit any data in response to the indicator relating to this indicator, as the information was not recorded.

My PACT data in 2017 would indicate that white staff members PACT would be slightly less likely to access training than BAME staff, which is a positive result for BAME workforce.

Data for previous year:

Data was not recorded

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

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

See WRES Action Plan

Workforce Race Equality Indicators

21 KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.

White:

15.38%

BME:

16.47%

White:

15.86%

BME:

11.54%

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

The results show that there has been a slight increase in BAME staff stating they have experienced harassment, bullying or abuse from patients.

The results remain consistent from the white workforce.

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

Please see WRES Action Plan and below.

This areas remains a priority for the Trust for all of its workforce and in response to the results a Trust wide BIG conversation was held under the following topic. This session was Exec Led.

Staff experiencing physical violence – it's not okay, so what can we do? Focusing on the staff survey key findings of staff experiencing physical violence from patients, relatives or the public. Thursday 22nd June 2017, 10.30am – 12pm

23 KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion.

White:

89.02%

BME:

85.71%

White:

88.87%

BME:

72.41%

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

There has been a significant improvement for BAME in relation to the Trust providing opportunities for career progression and/or promotion.

The figures for white staff remain consistent with the previous reporting year.

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

24 Q17. In the last 12 months have you personally experienced discrimination at work from any of the following? b) Manager/team leader or other colleagues.

White:

4.85%

BME:

12.05%

White:

3.51%

BME:

18%

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

There has also been a significant improvement in BAME staff experiencing discrimination in the workplace in the last 12 months. Reduction from 18% to 12.05%

There has however, been a increase across our white workforce reporting discrimination in the workplace.

The Trust has refreshed and re-branded its Bullying & Harassment Policy (formally Dignity at Work) in response to staff feedback. The implementation will include awareness session and the development of a podcast.

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

22 KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.

White:

16.07%

BME:

25%

White:

14.36%

BME:

23.08%

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

There has also been a slight increase from both white and BAME staff that have experienced harassment, bullying and abuse from staff.

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

This remains a priority for the Trust and in response to the Staff Survey Results, the Trust held the following BIG conversations which were Exec Led.

Harassment, Bullying and Abuse – it's not okay, so what can we do? Focusing on the staff survey key finding of staff experiencing and reporting harassment, bullying and abuse - Tuesday 13th June 2017, 10am – 11.30am

In response to our BAME workforce saying that they would prefer to attend a protected session, an additional conversation was organised and the feedback from this was considered as part of the Trust wide plan/actions.

Workforce Race Equality Indicators

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

White:

- 3.5%

BME:

- 2.7%

White:

4.9%

BME:

- 2.1%

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

There is currently one member of the Board represented under BAME.

The negative figure (-2.7%) denotes the difference between the number of BAME Board members versus the overall workforce. Whilst this is only a very slight difference, in order to improve this indicator, representation of BAME at Board level would need to increase. See below

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

The Trusts E&I strategy sets out the following objectives - provide opportunities to improve diversity on the Board which is broadly representative of the population it serves. To support this, the Trust will:-

- Ensure that any recruitment campaign for Board level roles, provide opportunity to attract and retain people from diverse backgrounds.
- Ensure we promote our leadership programmes within the Trust to help harness talent in all its diverse forms and provide succession into future senior and board level opportunities.

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

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

27 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

workstreams agreed at board level, such as EDS2. You are asked to provide a link to your WRES action plan in the space below.

Organisations should produce a detailed WRES Action Plan, agreed by its Board. Such a Plan would normally elaborate on the actions summarised in section 5, 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 attach the WRES Action Plan or provide a link to it.:

Action Plan published on website