Appendix 1

Workforce Race Equality Standard (WRES):
Summary of Metrics and Action Plan for 2017/18
Updated WRES information
Proposed actions for 2018/19

RAG rating key
Action overdue
Action within one week of due date OR known risk to achieving by due date
Action complete
Action complete with evidence
Action not yet due. No known risks to completion.

	WRES Indicator	Southend Hospital Findings	Recommended actions 2017/18	Responsibility	Timescales	Update on Progress as at June 2018	RAG
1	Percentage of BME staff in Bands 8-9 and Very Senior Managers (VSM) (including executive Board Members) compared with the percentage of BME staff in the overall workforce	2017 - 21% BME staff in the overall workforce 9.81% BME Clinical staff in Bands 8-9 and VSM 8.91% BME Non-Clinical staff Bands 8-9 and VSM 8% BME on the JEG (Joint Executive Board) 2016 - 19% BME staff in the overall workforce	Undertake further detailed data analysis to identify any specific directorates, departments, job roles and pay bands where BME staff are poorly represented at senior level and develop action plans to identify the underlying reasons and potential solutions.	EDIA	September 2018	Further drill down by clinical and non-clinical staff groups and band required to identify specific areas of concern if any.	
			As part of developing the BAME Diversity Network, ensure that identifying potential barriers to the progression of BME staff past band 7 is on the agenda.	EDIA and BME Diversity Network	Ongoing	The BAME group is meeting regularly and will ensure this is a standing agenda item.	
			Ensure there is sufficient engagement of BME representation on Leadership programmes	Head of OD and Learning and BME Network	On-going	National programmes advertised to BME staff via the intra-net and iLearn All internal Leadership programmes and toolkits for	

		- 9% BME staff in Bands 8-9 and VSM				managers are available on Ilearn	■
2	Relative Likelihood of BME staff being appointed from shortlisting compared to that of white staff being recruited from shortlisting across all posts	The relative likelihood of white staff being appointed from shortlisting compared to BME staff is 2017 0.75 times greater 2016 0.75 times greater	1. Review interview training provided for recruiting managers to raise awareness of equality and diversity issues, include unconscious bias as a component of the training, and then review Recruitment guidance to include unconscious bias and advising that recruitment panels are representative of the workforce.	EDIA, Resourcing Manager & Retention Programme Manager	September 2018	The training is being reviewed. As an interim measure there will be a recruitment slot of the flexible working training that is being launched for managers	
			2. Carry out further data analysis to establish whether there are particular directorates, departments, job roles and pay bands where BME staff are more or less likely to be appointed from shortlisting and develop an action plan.	EDIA	December 2018	TRAC has now been in place for over a year so this work should now be carried out	
			3. Add information to job advertisements and other recruitment documentation to encourage applicants from underrepresented groups to apply.	Resourcing Manager	On-going	Adverts and response rates have been reviewed, each role will be looked at individually	■
3	Relative Likelihood of BME staff entering the formal disciplinary process, compared to that of White staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation.	Disciplinary April 2017 – March 2018 White – 47 BME - 26 35% of disciplinary cases are BME	4. Disciplinary data analysed as part of the workforce equality data report. Data to be drilled down to identify if there are any hot spots and develop an action plan.	EDIA and Deputy Head of HR	July 2018	Further work to be done in this area. KPI's and detailed monthly reporting is being put in place	
			5. Review induction and training given to staff to ensure that staff who trained overseas are given sufficient training and information about NHS and UK culture and behavioural expectations.			Complete. New comprehensive induction programme has been implemented for all overseas new starters including E and D training.	■
			6. As part of developing the BAME diversity network, seek feedback on how we can apply the disciplinary policy more consistently and fairly.	EDIA and Deputy Head of HR	December 2018	Undertake an audit of disciplinary cases with a representative group	

4	Relative Likelihood of BME staff accessing non mandatory training and CPD compared to white staff.	Training April 2017 – March 2018 White – 60.38% BME – 39.63%	7. Ensure complete equality and diversity data is routinely collected for all training.			Complete. The collection of training equality data has now been reviewed and will be collected on an on-going basis
			8. Further analysis should be undertaken to understand where there may be pockets of under-representation in terms of accessing non-mandatory training and to identify departments, roles or job bands where review and action is required.			Training data has been reviewed and now all required E and D data is being routinely collected. Analysis has taken place and has been presented to the EDIC and forms a part of the workforce equality data analysis The percentage of BME staff accessing training is higher than the representation in the workforce – no further action needed
5	KF25: Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months.	2017 survey White staff – 29.53% BME staff – 27.21% 2016 survey White Staff – 29% BME staff – 30%	9. Undertake a refreshed communications campaign to all service users and visitors to the Trust regarding the Trust's zero tolerance approach to bullying, harassment, abuse and violence. 10. Review the Trust's Policy and Procedure for the Management of Violence and Aggression (RM-05) which has a current review date of May 2013 to ensure that it is still fit for purpose and meeting the needs of staff.			Now forms part of departmental Risk Assessments. Posters placed throughout the hospital Complete - Policy has now been reviewed and is due to be published as HS41 Prevention and management of Abuse and Violence at Work
6	KF26: Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months.	2017 survey White staff – 27.81% BME staff – 23.16% 2016 survey White Staff – 23% BME staff – 27%	11. As part of the Freedom to Speak Up agenda include promotion on bullying and harassment, and raising concerns	EDIA, Head of Leadership & Talent	July 2018	Freedom to Speak Up initiative re-launched, and there is a Freedom to Speak up Steering Group in place. The Guardian Service has been implemented, is working well and is being reviewed. Additional speak up champions were recruited to cover all areas within the Trust. There has been a full communications programme in place to promote the Freedom to speak up initiative.

						Further work is required in this area and a management session is being developed following on from listening events	
7	KF21: Percentage believing that the Trust provides equal opportunities for career progression or promotion.	The likelihood that BME staff feel that the Trust does not provide equal opportunities for career progression or promotion more than white staff 2017 survey BME staff – 75.6% White staff - 85.96% 2016 survey BME staff 77% White staff 86%	12. As part of the development of the BAME Diversity Network, work with the group to improve the Trusts understanding of staff perceptions around promotion and career progression.	EDIA	Ongoing	BAME Network group is up and running and this will be picked up as part of the groups action log	
			13. Further analyse the workforce data, specifically to identify any bottlenecks within pay bands or directorates, develop actions to address these.	EDIA and Deputy Head of HR	October 2018	This is being addressed within the Gender Pay Gap action plan	
			14. Review the responses to this staff survey question in more detail on an annual basis to establish what changes take place over time.	EDIA	August 2018	Analysis of Staff survey to be completed	

8	Q17: In the last 12 months have you personally experienced discrimination at work from any of the following: Manager/team leader or other colleagues.	2017 survey BME staff - 13% said yes White staff – 5% said yes 2016 survey BME staff – 12 **%** said yes White Staff – 5**%** said yes	15. Ensure leadership programmes build in equalities training and development.	Head of Leadership, OD and Learning	On-going	The new Leading Better Care programme for nurse managers includes a session on equalities. Each new programme will be assessed as its developed on an on-going basis.
9	Boards are expected to be broadly representative of the population they serve.	2017 BME staff make up 0% of the Board BME staff make up 12% of the local population 2016 BME staff make up 15% of the Board BME staff make up 12% of the local population	16. Undertake a review of the process for appointment of Non-executive Directors to ensure it encourages diverse applicants and that those involved in the selection process have received appropriate training in Equality and Diversity.	EDIA	Feb 2017	NED data analysed and appropriate process in place Completed To note: Movements to MSB Group have impacted on Board representation. SLT are aware of expectations regarding representation