

People and Culture committee – 11 September 2024

Workforce Race Equality Standard Metrics 2024 and Action Plan

Purpose of the report

To present the 2024 WRES metrics data and action plan for publication in accordance with the technical guidance.

Analysis of the issue

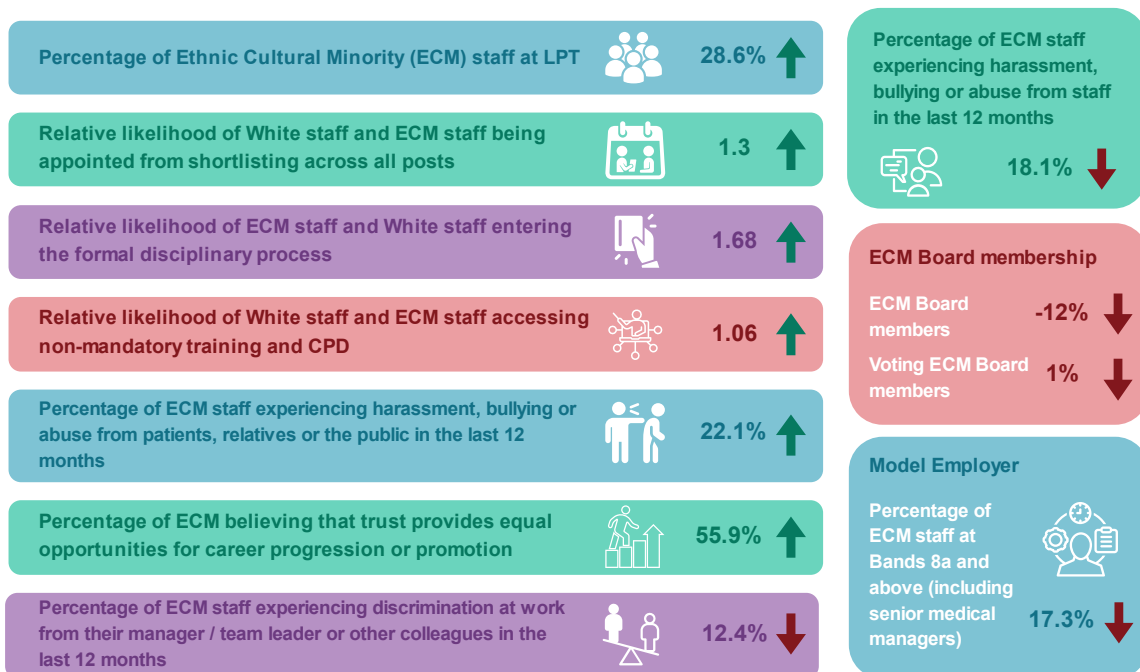
WRES metrics 2023/24

LPT's performance in relation to its work on WRES has been resulting in improvements against most of the 9 metrics with the exception of metric 5 where there has been a slight deterioration in the proportion of Ethnic and Cultural Minority (ECM) staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months. The model employer target (ECM staff at bands 8a and above) has remained largely the same for 2 years at around 17%. Please see the infographic below setting out the data comparing the past 2 years.

Workforce Race Equality Standard 2023/24



↑ Areas of Improvement ↓ Areas that have worsened



WRES Action Plan 2024/25

In August 2024 the Trust held a WRES workshop in order to present the WRES metrics and the previous year's action plan to receive feedback on the areas for prioritisation. The Trust hasn't run stakeholder workshops for the development of the WRES previously. 15 members of staff from across the Trust provided feedback (attached as appendix 2).

The revised action plan is attached as appendix 1. The main changes to this action plan are:

- An emphasis on rolling out inclusive (strength based) recruitment training to all recruiters
- Focus on Inclusive Talent Management approaches
- Strengthening of approaches to Zero Tolerance
- Deep dive in to why more ECM staff are entering in to disciplinary processes and recommending how this can be prevented

All the actions align to our Together Against Racism joint strategic priority, standards in the workforce pillar and actions.

Proposal

To note the WRES metrics data trends and discuss the WRES action plan 2024/25 that require publication by the end of October 2024.

Decision required – Please indicate:

Briefing – no decision required	
Discussion – no decision required	
Decision required – detail below	x

To approve the WRES data and action plan for publication, subject to any amendments, by 31 October 2024.

Governance table

For Board and Board Committees:		
	Sarah Willis, Director of Human Resources	
Paper sponsored by:	Haseeb Ahmad- Head of EDI	
Paper authored by:	11 September 2024	
Date submitted:	EDI Workforce Group 20 August 2024	
State which Board Committee or other forum within the Trust's governance structure, if any, have previously considered the report/this issue and the date of the relevant meeting(s):		
If considered elsewhere, state the level of assurance gained by the Board Committee or other forum i.e. assured/ partially assured / not assured:	Assured	
State whether this is a 'one off' report or, if not, when an update report will be provided for the purposes of corporate Agenda planning		
STEP up to GREAT strategic alignment*:	High Standards	
	Transformation	
	Environments	
	Patient Involvement	
	Well Governed	
	Reaching Out	
	Equality, Leadership, Culture	x
	Access to Services	
	Trustwide Quality Improvement	
Organisational Risk Register considerations:	List risk number and title of risk	73 If we don't create an inclusive culture, it will affect staff and patient experience, which may lead to poorer quality and safety outcomes.
Is the decision required consistent with LPT's risk appetite:		
False and misleading information (FOMI) considerations:	N/A	
Positive confirmation that the content does not risk the safety of patients or the public	The content does not risk the safety of patients or the public	
Equality considerations:	Paper focuses on equality	

Version 1.0

Appendix 1 WRES Action Plan 2024-2025

WRES Action Plan 2024 - 2025							
Executive Sponsor: Sarah Willis							
Objective 1. Ensure Recruitment and Selection processes are inclusive and free from bias where candidates from ethnic and cultural minority backgrounds have an equitable outcome compared to their white colleagues from application to appointment across all employment roles with an aim of eliminating any race equality disparities by 20							
Links to NHS EDI High Impact Actions: Embed fair and inclusive recruitment processes and talent management strategies that target under-representation and lack of diversity; Develop and implement an improvement plan to eliminate pay gaps							
Action Number	Action	Lead	Date	Milestones	Progress	KPIs & Outcomes	RAG
1	Deliver Inclusive (Strength Based) Recruitment Training to all recruiting managers	Head of EDI/Strategic Resourcing Manager	May-25	1. Delivery of training to HR colleagues. 2. Cascaded to recruiting managers. 3. Embedded within L&D offer	NHFT inclusive recruitment training attended by Head of EDI who is also attending SBR training. NHFT colleagues have agreed to deliver training to HR colleagues as a taster session.	Improvement in metrics 1, 2, 7 Increase in number of people from ethnic and cultural minorities applying for, and being recruited to, roles in LPT.	Amber

2	Introduce seen interview questions for all job interviews	Assistant Director of HR	Jan-25	Development of guidance to be communicated to all recruiting managers	Guidance developed in FYPCLDA to be incorporated in to business case to be presented to EMB.	Improvement in metrics 1 and 2	Amber
Objective 2. Ensure that staff from ethnic and cultural minorities are benefitting from Talent Management, Succession Planning and Career Progression leading to improvements in progression to senior roles (band 8a and above)							
Links to NHS EDI High Impact Actions: Embed fair and inclusive recruitment processes and talent management strategies that target under-representation and lack of diversity; Develop and implement an improvement plan to eliminate pay gaps; Implement a comprehensive induction, onboarding and development programme for internationally-recruited staff							
Action Number	Action	Lead	Date	Milestone	Progress	KPIs & Outcomes	RAG
1	Establish Talent Management and succession planning Processes enabling Ethnic and Cultural Minority staff to progress into senior management positions in line with model employer targets	Associate Director of Communications and Head of EDI	Mar-25	Develop talent management plan aligning to LPT, Group, regional and national Talent Management strategies. Launch programme. Create an Inclusive Talent Management toolkit for managers. June 2023 - Secondment Policy: feedback provided for policy review to	Regional: Inclusive Culture and Leadership programme across LLR has inclusive talent management as a key component (ECM Nursing and Midwifery Development Programme,	Improvement in metrics 1, 2, 4 Increased number of development opportunities available for staff from ethnic and cultural minorities.	Amber

				<p>ensure it is fully inclusive</p>	<p>Developing Diverse Leadership) with 2nd cohort underway. Developing Me, Developing You (bands 8a and 8b delivered and 2nd cohort programme to be launched. D</p> <p>Local: ECM Interview Skills sessions are regularly run and have positive feedback. Scoping Careers Advice sessions, run on Teams, as an addition. We Nurture Programme</p>	
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					being delivered.		
2	Identify additional specific needs of International recruits.	Head of Nursing, Midwifery and AHP equalities/Head of International Nursing Recruitment	Mar-25	Preceptorship programme for international nurses is well established.	Head of Nursing, Midwifery and AHP equalities appointed at ICB to progress career opportunity and development for staff from ethnic and cultural minorities. INs provided with information re joining REACH staff	Improvement in metrics 1, 2, 4	Blue

					network, listening events and relevant development opportunities via Head of IN.		
3	Engagement events: career development for nurses and AHPs from ethnic and cultural minorities	Associate Director of AHPs, Heads of Nursing, EDI team, Communications	Sep-25	2 initial Trust-wide events went ahead in 22/23 and were well attended (40 - 80 people at each one) staff. BHM event being planned focused on career development. Career development workstream of OFOW underway.	BHM career development workshop currently being planned. Links are being made with the OFOW workstream and future activity on Talent Management plans.	Improvement in metrics 1, 2, 4 and 7.	Amber
Objective 3. Create a culturally inclusive organisation for colleagues from ethnic and cultural minorities							
Links to NHS EDI High Impact Actions: Chief executives, chairs and board members must have specific and measurable EDI objectives to which they will be individually and collectively accountable;							
Action Number	Action	Lead	Date	Milestone	Progress	KPIs & Outcomes	RAG

1	Review impactful Race and Cultural Intelligence Learning Sets which include lived experience of Black, Asian and minority ethnic staff to all line-managers in light of events of August 2024 and to reflect strengthened approaches to anti-racism	Head of EDI and EDI Specialist	Jan-24	Communicate requirement for all line-managers to attend the learning sets.	Over 280 leaders have attended the training to date, and sessions are being well attended and well received. There is a schedule of monthly sessions planned until the end of the financial year, with lived experience contributors for each one.	Improvement in metrics 1, 2, 3, 6, 7, 8	Green
2	To ensure that the Together Against Racism joint strategic priority is explicitly built in to the next step Up to Great Strategy with clear expectations and standards for staff and the public	Head of strategy	Apr-25	Board member anti-racism pledges have been committed to. Boards and stakeholders have met at two Joint Board Workshops to determine priorities and actions. Determined the	An action plan for Together Against Racism has been developed, with strong links into this WRES action plan.	Improvements across WRES metrics and Staff Survey responses relating to race and staff engagement.	Amber

				vision, completed a SWOT analysis	<p>* Workforce: inclusive recruitment, inclusive leadership, addressing racist abuse, career development</p> <p>* Patients: equality data, PCREF, cultural competency</p> <p>* Communities: engagement, strategy & partnerships, procurement</p>		
3	Carry out an audit to determine how effective EDI objectives are and what further work might be needed to improve the setting of these	Head of EDI and Head of OD	May-25	create survey by April 25 and issue in May 25.	TBC	Improvements across metrics 5, 6, 7, 8	Blue
4	Launch 6th cohort Reverse Mentoring Programme and continue to grow the	Head of EDI	Nov-24	Launch RM programme Nov 24 and promote ABP programme	5th cohort underway of the RM programme. Shortlisted	Improvements across metrics 1, 2, 6, 7, 8 Positive feedback from mentors and mentees.	Green

	community of active Bystanders			September 24 and ongoing.	for 2 national awards during 2024. 60 LPT staff trained on ABP.		
5	Ensure that key/important events and festivals are celebrated and used as learning opportunities for staff from all backgrounds	Co-Chairs of REACH Staff Support Network	Ongoing	Calendar of events and festivals developed. Delivery of important events such as Black History Month, South Asian Heritage Month, Diwali, Vaisakhi etc.	Continue to deliver a very busy calendar of events. Staff networks now have a budget which will help with delivery of events, in particular FTF ones.	Improvement in staff engagement score in Staff Survey for staff from ethnic and cultural minorities. Increased attendance at events and REACH meetings.	Green
6	Cultural Competency Programme to improve CC across LPT leadership	Head of EDI	May-25	Review current processes for delivering cultural competency training and learning.	LPT and NHFT currently reviewing their approaches to the development of cultural competency training. NHSE on-line training has been reviewed and is a further	Improvements across metrics 3, 6, 7, 8 as managers' improved cultural competency reduces bias and discrimination in teams. Positive feedback from Enablers and participating senior leaders.	Amber

					option for colleagues to access.		
7	Create EDI ambassadors across the Trust	Directorate EDI leads	Apr-25	create job descriptions and recruit in to roles. Provide support and training to EDI ambassadors and connect to Trust wide work.	FYPCLDA have recruited 3 EDI ambassadors. CHS in the process of doing this and AMH are also reviewing current approaches for adoption.	Improvements in indicators 5,6,7 and 8.	Amber
Objective 4. Reduce the amount of bullying, harassment and abuse experienced by colleagues from ethnic and cultural minorities							
Links to NHS EDI High Impact Actions: Create an environment that eliminates the conditions in which bullying, discrimination, harassment and physical violence at work occur; Develop and implement an improvement plan to address health inequalities within the workforce							
Action Number	Action	Lead	Date	Milestone	Progress	KPIs & Outcomes	RAG

1	Zero Tolerance campaign relaunch, with additional supportive materials to encourage speaking up	EDI Specialist, Communications	Nov-24	Relaunch of campaign in November 24. Revised resources available and further training offer will be promoted.	ZT Taskforce co-ordinating activities. Regular training available to service areas requiring these. New resources developed including videos and posters being revamped. Key messages and support being strengthened to ensure that staff feel empowered. Refusal to treat abusive patients being reviewed.	Improvements in metric 5 Increased number of Ulysses incident reports (as we are aware of under-reporting) but increase in number of incidents with actions recorded to resolve.	Amber
Objective 5: review disciplinary processes to ensure equity among all colleagues							
Links to NHS EDI High Impact Actions: Create an environment that eliminates the conditions in which bullying, discrimination, harassment and physical violence at work occur							
Action Number	Action	Lead	Date	Milestone	Progress	KPIs & Outcomes	RAG

1	Review disciplinary cases and processes for substantive and bank staff to ensure principles of equity and just culture are embedded at every stage and eliminate disproportionality between ECM and white staff.	HR, EDI	Mar-24	<p>Review processes and themes of disciplinary cases in 2024.</p> <p>Present findings to relevant committees and implement any necessary changes.</p>	<p>Head of HR has carried out initial review of cases comparing those entering the process to the outcome of each case. Further work required.</p>	<p>Improvement in indicator 3 (WRES) and indicator 2 (Bank WRES)</p> <p>Reduction in number of disciplinary cases concluded with no case to answer which could have avoided a formal process.</p>	Amber
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