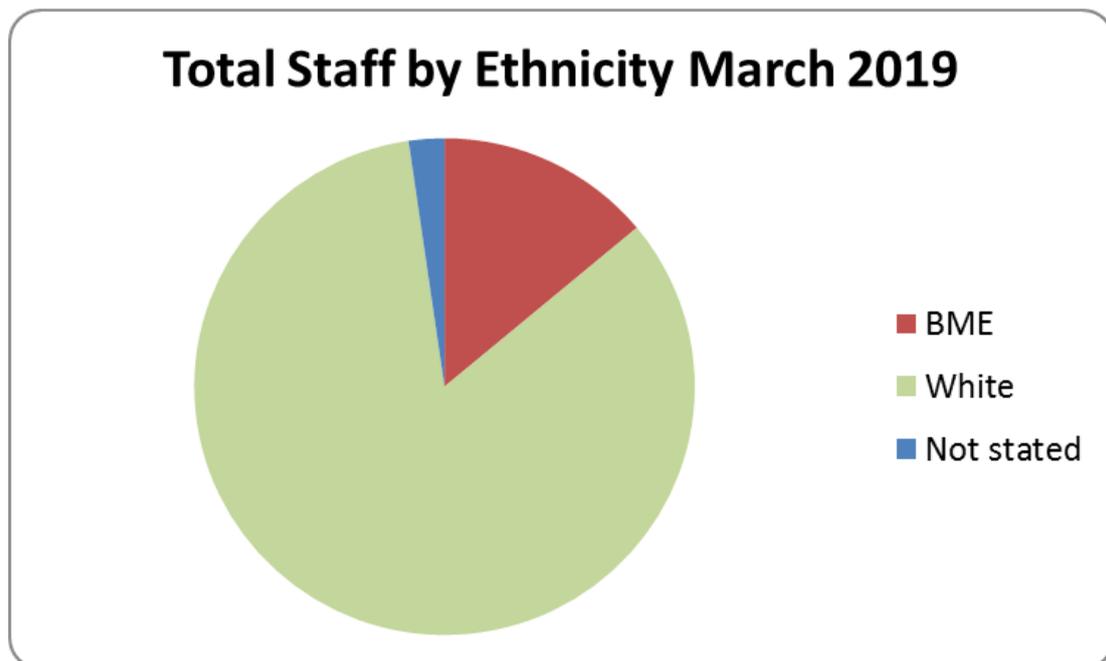# Workforce Race Equality Standards March 2019

At March 2019, a total of 2737 staff were employed by Airedale NHS Foundation Trust. Of these, 382 (13.96%) were BME and 2292 (83.74%) were white. The ethnicity of the remaining 63 (2.30%) staff were not stated.

There was an increase on the previous year for BME staff by 13.35%

Ethnic Group	Headcount	%
BME	382	13.96
White	2292	83.74
Not stated	63	2.30
Total	**2737**	**100.00**

Workforce Race Equality Standards March 2019

Indicator 1 - Percentage of Non-Clinical/Clinical 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.

As shown in the table below, as of March 2019, 9% of non-clinical staff and 15% of clinical staff of known ethnicity were from BME backgrounds.

Payscale	Non-Clinical Staff							Clinical Staff						
	White (headcount)	BME (headcount)	Unknown (headcount)	Total (headcount)	White (%)	BME (%)	Not Stated (%)	White (headcount)	BME (headcount)	Unknown (headcount)	Total (headcount)	White (%)	BME (%)	Not Stated (%)
Other	1	0	0	1	100%	0%	0%	3	1	0	4	75%	25%	0%
Band 1	0	0	0	0	0%	0%	0%	0	0	0	0	0%	0%	0%
Band 2	124	18	2	144	86%	13%	1%	309	62	12	383	81%	16%	3%
Band 3	127	11	2	140	91%	8%	1%	208	14	1	223	93%	6%	0%
Band 4	90	3	1	94	96%	3%	1%	57	5	1	63	90%	8%	2%
Band 5	38	3	1	42	90%	7%	2%	405	83	13	501	81%	17%	3%
Band 6	25	2	0	27	93%	7%	0%	327	50	13	390	84%	13%	3%
Band 7	32	5	1	38	84%	13%	3%	219	13	6	238	92%	5%	3%
Band 8a	20	2	0	22	91%	9%	0%	71	3	0	74	96%	4%	0%
Band 8b	10	2	0	12	83%	17%	0%	12	0	0	12	100%	0%	0%
Band 8c	7	0	0	7	100%	0%	0%	6	0	0	6	100%	0%	0%
Band 8d	3	0	0	3	100%	0%	0%	2	0	0	2	100%	0%	0%
Band 9	1	0	0	1	100%	0%	0%	2	1	0	3	67%	33%	0%
VSM	6	0	0	6	100%	0%	0%	2	0	0	2	100%	0%	0%
Medical: Consultants	0	0	0	0	0%	0%	0%	77	41	5	123	63%	33%	4%
Medical: Non-Consultant Career Grades	0	0	0	0	0%	0%	0%	25	22	3	50	50%	44%	6%
Medical: Trainee Grades	0	0	0	0	0%	0%	0%	83	41	2	126	66%	33%	2%
TOTAL	484	46	7	537	90%	9%	1%	1808	336	56	2200	82%	15%	3%

Workforce Race Equality Standards March 2019

Non-Clinical staff by ethnicity: March 2019

Chart legend:
- Not Stated (%) — blue
- BME (%) — red
- White (%) — green

Band	Not Stated (%)	BME (%)	White (%)
VSM			100%
Band 9			100%
Band 8d			100%
Band 8c			100%
Band 8b		17%	83%
Band 8a		9%	91%
Band 7	3%	13%	84%
Band 6		7%	93%
Band 5	2%	7%	90%
Band 4	1%	3%	96%
Band 3	1%	8%	91%
Band 2	1%	13%	86%
Band 1			
Other			100%

Workforce Race Equality Standards March 2019

Clinical staff by ethnicity: March 2019

Legend:
- Not Stated (%)
- BME (%)
- White (%)

Category	Not Stated (%)	BME (%)	White (%)
Medical: Trainee Grades	2%	33%	66%
Medical: Non-Consultant Career Grades	6%	44%	50%
Medical: Consultants	4%	33%	63%
VSM			100%
Band 9		33%	67%
Band 8d			100%
Band 8c			100%
Band 8b			100%
Band 8a		4%	96%
Band 7	3%	5%	92%
Band 6	3%	13%	84%
Band 5	3%	17%	81%
Band 4	2%	8%	90%
Band 3		6%	93%
Band 2	3%	16%	81%
Band 1			
Other		25%	75%
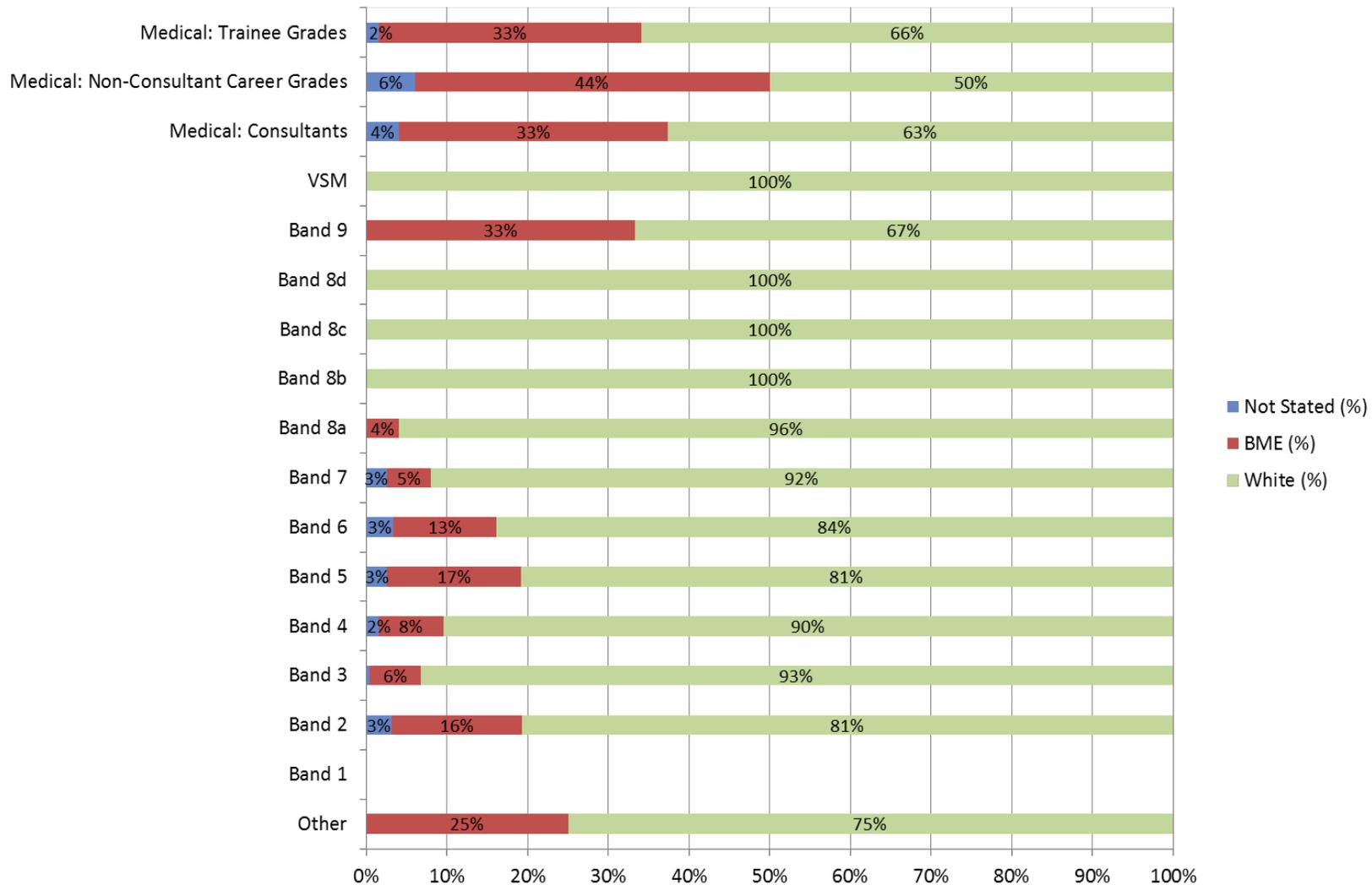
Workforce Race Equality Standards March 2019

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

For the reporting period 1 April 2018 to 31 March 2019, the results were as follows:

Data between April and June 2018 has been extracted from NHS Jobs. Trac was implemented in July 2018 so data between July 2018 and April 2019 has been extracted from Trac.

Ethnic Group	Number of Shortlisted Applicants (headcount)	Number appointed from shortlisting (headcount)
White	1556	296
BME	685	70
Not stated	80	16
Total	**2321**	**382**

Likelihood of white staff being appointed from shortlisting (296/1556) = 0.190

Likelihood of BME staff being appointed from shortlisting (70/685) = 0.102

*The relative likelihood of white staff being appointed from shortlisting compared to BME staff is therefore 0.190/0.102 = **1.86 times greater***

*The data submitted for 2017-19 showed the relative likelihood of white staff being appointed from shortlisting compared to BME staff was **1.73 times greater.***

Indicator 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 - based on a two year rolling period 1 April 2017 – 31 March 2019

Ethnic Group	Number of Disciplinaries	Number in workforce
White	92	2292
BME	18	382
Not stated	1	63
Total	**111**	**2737**

Likelihood of white staff entering the formal disciplinary process (92/2292) = 0.040

Likelihood of BME staff entering the formal disciplinary process (18/382) = 0.047

*The relative likelihood of BME staff entering the formal disciplinary process compared to white staff is therefore 0.047/0.040 = **1.17 times***

*The data submitted for 2016-18 showed the relative likelihood of BME staff entering the formal disciplinary process compared to white staff was **0.81 times***

Workforce Race Equality Standards March 2019

Indicator 4 – Relative likelihood of staff accessing non-mandatory training and CPD

For the reporting period 1 April 2018 to 31 March 2019, the results were as follows:

Ethnic Group	Number of staff accessing non-mandatory training	Number in workforce
White	426	2292
BME	52	382
Not stated	7	63
Total	**485**	**2737**

Likelihood of white staff accessing non-mandatory training (426/2292) = 0.186

Likelihood of BME staff accessing non-mandatory training (52/382) = 0.136

*The relative likelihood of white staff accessing non-mandatory training compared to BME staff is therefore 0.186/0.136 = **1.37 times greater***

*The data submitted for 2017-18 showed the relative likelihood of white staff accessing non-mandatory training compared to BME staff was **1.34 times greater***

Indicators 5, 6, 7 and 8

			31-Mar-18	31-Mar-19
Indicator 5	Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months	White	19.89%	20.81%
		BME	28.74%	26.73%
Indicator 6	Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months	White	20.24%	20.04%
		BME	24.42%	24.75%
Indicator 7	Percentage of staff believing that the organisation provides equal opportunities for career progression or promotion	White	89.08%	90.73%
		BME	69.49%	82.35%
Indicator 8	In the last 12 months have you personally experienced discrimination at work from manager/team leader or other colleagues?	White	5.08%	3.98%
		BME	13.10%	11.46%

Workforce Race Equality Standards March 2019

Indicator 9 – Percentage difference between the organisations Board voting membership and the organisations Board executive membership and its overall workforce (comparing the difference in percentage of BME staff).

In March 2019, the Trust had 13.96% BME workforce and 1 of its 11 (9.09%), voting members on the Board was of BME origin. The percentage difference between the organisations' Board voting membership and its overall workforce was -4.87%.

In March 2019, the Trust had 13.96% BME workforce and 0 of its 8 (0%), executive members on the Board was of BME origin. The percentage difference between the organisations' Board executive membership and its overall workforce was -13.96%.

Workforce Race Equality Standard Action Plan 2017 -2020

Updated July 2019

WRES indicator	What Action do we need to take?	Project lead and update
1.a Overall BAME staff representation is in line with the local population.	Expand the Trust's Apprenticeship Programme across other service and occupational groups to create an entry level pipeline for people from the local community.	**Matt Smales-Creswell** • Apprenticeship Programme • Developing a route to right care Apprenticeship scheme • Support workers development programme • Graduate Scheme • Internship
1.b. There is strong representation of BAME staff within the medical workforce	Extend the Trust's Mentoring and Coaching Programme to target BAME staff at band 6 and 7; and introduce reverse mentoring as part of Trust leadership development programmes by January 2019	**Nadia Hussain** Cohort 1 of reciprocal mentoring underway Cohort 2 from October 2019
	Use talent management conversations to identify BAME staff with future management/leadership potential and put forward for Trust and Leadership Academy development programmes. Commence	**Nadia Hussain** Email to be sent to managers asking for them to send common themes of development requested. To build in to 2019's PDR a section for key development area on front sheet - once we have the data to then ensure

1.c Representation at band 8a and above is not reflective of the wider workforce 1.d Representation differs within pay bands, occupational and service groups	April 2018.	development plan are in place. Direct colleagues to coaching programme for career coaching and explore appetite for BAME career buddies and career surgery.
Recruitment:	**What Action do we need to take?**	**Project lead and update**
White applicants 1.93 times more likely to be appointed from shortlisting than BAME applicants	Equality impact assess each stage of the recruitment process for different staff groups to identify areas to address by April 2018 and ongoing Review a sample of interview questions and scores for equality considerations by March 2018. Develop a marketing campaign aimed at the local BAME community, involving BAME staff to promote careers at Airedale and to outline expectations of roles by January 2018. Produce guidelines on applying for jobs via NHS jobs and value based recruitment for applicants by February 2018; and commence outreach within the local community to outline the recruitment approach from February 2018. Develop and target a revised work experience programme aimed at people in	**Lorna Smithson / Kelly Baxter - to update** **Matt Smales-Creswell -** Linked to the 1a above.

	the local community by June 2018.	
	Train managers in value based recruitment and unconscious bias from January 2018 onwards.	**Nadia Hussain** Values based questions have been designed by Kelly and Lorna – these are now within the recruitment and selection training along with unconscious bias. Supporting tools are also now available on Aireshare
Access to Training and Development	**What Action do we need to take?**	**Project lead and update**
Data not collected on all training and development including local	Improve data collection on access to training, education and development as part of the implementation of ESR self - service by April 2019	**Nadia Hussain:** For all 2019 Leadership workshop to be inputted into ESR this will enable us to see who attends the workshops ESR Manager Self Service Project will allow for better use of data
	Use BAME focus group and annual appraisal process to identify any access difficulties from April 2018.	As per 1c and 1d above – ensure the PDR process for 2019 is changed to indicate on front sheet key development areas
	Equality impact assessment of the new band 1-4 training and development offer to be completed by January 2018.	**Matt Smales-Creswell** – this is linked back to 1a above

Disciplinary	What Action do we need to take?	Project lead and update
Parity between BAME and white staff entering the disciplinary process	Action plan developed to equip managers with skills to deal with issues informally	**Holly Tetley**
Staff Experience	**What Action do we need to take?**	**Project lead and update**
BAME staff in the 2016 Staff Survey were more positive than white staff across the majority of indicators. However, BAME staff reported that they were more likely to experience harassment, bullying and abuse from staff – 27.4% compared to 24.26%; and more likely to experience discrimination from managers and colleagues – 10% compared to 5.29%.	Continue to support the BAME Network Focus Group to promote inclusion and to give BAME staff a voice, sponsored by Board member. Include as part of Trust Respect and Dignity Campaign in October 2017. Encourage managers to review their approaches to annual leave, cultural leave and compassionate leave to support inclusion through the above and targeted communications between January and April 2018	**Jo Farn and OLI team:** Inclusion is now built into all leadership workshops. A specific Inclusion workshop was delivered as part of Equality and Diversity week. Reciprocal Mentoring launching 30th of November 2018 Plan to launch next cohort in September/October with an Inclusion Event-current mentors and mentees share stories, grow the group **Holly Tetley**

	Board Representation	What Action do we need to take?	Project lead and update
	Board composition is currently not representative of the wider workforce or local population	Proactively encourage BAME applicants to apply for future Board roles to be advertised over the next 2 years; and target BAME applicants through executive search	**Jo Farn/Joanne Harrison**
		The Trust is in conversation with Gatenby Sanderson with a view to participating in the Non-Executive Director Insight programme. The programme provides mentoring support and first-hand exposure to the Board environment to aspiring Non-Executive Directors and Trustees from under-represented groups.	**Vicky Pickles**