

Meeting:	Brighton and Sussex University Hospitals NHS Trust Board of Directors
Date:	26th January 2017
Board Sponsor:	Chief Executive
Paper Author:	Associate Director of Transformation
Subject:	Workforce Race Equality Standard & Action Plan

Executive summary

The purpose of this paper is to introduce the national Workforce Race Equality Standard (WRES) and action plan for BSUH. The WRES comprises nine metrics: four of the metrics concern workforce data, four are derived from questions in the national NHS Staff Survey, and the final metric concerns the ethnic composition of the Board. The aim of objective of the WRES is to compare the experience of BME staff and white staff with the aim of closing the gaps highlighted by the metrics and other factors or data of concern included in the report by an agreed action plan.

The WRES demonstrates:

- For non- clinical staff BME staff are over-represented at the lowest payband and although represented at some of the higher paybands none of the VSM (including executive board members) are from a BME background.
- For clinical staff BME staff are over-represented at some of the lower paybands and under-represented from payband 6 onwards. No BME staff is employed at payband 8C and above.
- The under-representation of BME staff at the higher paybands was a finding of the WRES in 2015 and as such nothing has changed.
- Among medical staff there was a significant over-representation of BME staff at the non-consultant career grades.
- White staff were more likely to be appointed from short-listing compared to BME Staff although to a lesser extent than reported in 2015.
- BME staff were almost twice as likely (LR 1.96 times greater) to enter the disciplinary process than white staff and the relative likelihood has increased significantly since 2015 (LR 1.52 times greater).
- BME staff were more likely to apply and be funded for non-mandatory training and CPD.

- In 2015 the percentage of BME staff (41%) and white staff (36%) experiencing harassment, bullying or abuse from patients, relatives or the public had increased from 2014 when it was 38% and 33% respectively. This is greater than the national average (28%) for acute trusts for both white and BME staff.
- In 2015 the percentage of BME staff (44%) experiencing harassment, bullying or abuse from staff had increased significantly from 2014 (30%) and was much greater than the national average (28%) for acute trusts. However, the percentage for white staff (28%) reporting the same remains unchanged and is more or less consistent with the national average (25%).
- The percentage of BME staff (68%) reporting they believed the trust provides equal opportunities for career progression or promotion remains much lower than white staff (87%).
- In 2015 the percentage of BME staff (22%) reporting they had personally experienced discrimination at work from manager/team leader or other colleagues had increased from 2014 (18%) and is much greater than the national average for acute trusts (13%). However, the percentage of white staff (7%) reporting the same had not changed since 2014 (8%) and is consistent with the national average for acute trusts (6%).
- The Trust Board is currently 100% white. Of the two BMEs appointed to the Trust Board in 2015 one individual resigned from the Board in July 2016.
- The other factors to be considered as part of the WRES standard include the findings pertaining to the discrimination of BME staff as reported by CQC in August 2016 and known to the Trust Board for a very long time.

Action required by the Board

The Board is asked to discuss and note the content of the Workforce Race Equality Standard and the integral action plan. The Board is also asked to sign off the WRES for publication on BSUH's website as required.

Links to corporate objectives	This report concerns the Trust corporate objectives: <i>excellent outcomes; great experience; empowered skilled staff;</i>
Identified risks and risk management actions	
Resource implications	None specific to this report
Report history	None

Appendices	Workforce Race Equality Standard with an integral action plan
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