Workforce Race Equality Standard (WRES) Action Plan 2020/22

Introduction

Yorkshire Ambulance Service NHS Trust is committed to meeting the requirements of the Workforce Race Equality Standard for NHS Trusts and this is our fourth publication against this standard.

The Trust submitted its workforce data against the standard, to the national WRES team, on the 27th August 2020, as per our contractual obligation.

Having considered the 2019/20 data, alongside data from previous years, this year's action plan will contain fewer, yet more focussed, objectives than in previous action plans.   This is to ensure that focussed attention is given on a key number of indicators which, if addressed in detail and positively, will have the biggest impact. In doing this, it is anticipated that this will bring about positive change across the Trust resulting in an improvement in all WRES indicators. This action plan covers 18 months with completion of actions expected by 31st March 2022.

The Trust's BME Staff Network has been instrumental in the development of this action plan which has been grouped into five themes to reflect the WRES return and the Trust's People Strategy.

- Culture and Leadership
- Recruitment, Retention and Resourcing
- Employee Voice
- Health and Wellbeing
- Education and Learning

Monitoring and Evaluation

The action plan will be monitored by the Diversity and Inclusion Steering Group (DISG) on a bi-monthly basis and Strategic Workforce Group on a quarterly basis, and through the Trust Management Group and Trust Board for end of year assessment and evaluation. A WRES Accountability Group has also been established to ensure there is appropriate challenge from colleagues who do not attend the above groups.

Workforce Race Equality Scheme: Our data as at 31st March 2020

Metric		2017	2018	2019	2020	Comments	Theme from People Plan
Metric 1-Percentage of staff in each of the AfC bands 1 - 9 or medical and dental subgroups and VSM (including executive board members) compared with the percentage of staff in the overall workforce.	Workforce headcount	5255	4827	5110	5361	Workforce Headcount has steadily increased	**Recruitment (1)** Increase recruitment to roles such as clinical support workers, highlighting the importance of these roles for patients and other healthcare workers as well as potential career pathways to other registered roles.
	% declared BME	4.8%	4.7% ⬆	4.9% ⬆	5.3% ⬆	This has positively increased but YAS remains underrepresented compared to our community (13%)	
	BME headcount	254	228 ⬆	253 ⬆	284 ⬆	The increase in the overall workforce has meant an increase in BME staff	
	White headcount	5001	4600	4857	5059	Workforce headcount has steadily increased	
	Not stated	-	-	4	18	Ideally all staff should declare their ethnicity. However this is not mandated.	
Metric 2 - Relative likelihood of white staff being appointed from shortlisting compared to that of BME staff being appointed from shortlisting across all posts *(The target here is 1.0 where BAME and White staff have equal likelihood of being appointed.)*		2.7	1.77 ⬇	1.79 ⬆	2.43 ⬆	The number of BME employees has increased, but the number of white employees increased more. BME candidates who DNA or withdraw prior to interview is significant compared to white candidates.	**Equality and Diversity (1)** Overhaul recruitment and promotion practices to make sure that staffing reflects the diversity of the community, and regional and national labour markets
Metric 3 - Relative likelihood of BME staff entering the formal disciplinary process, compared to that of white staff, as measured by entry into a formal disciplinary investigation. *(The target here is 1.0 where BAME and White staff have equal likelihood of entering the disciplinary process.)*		1.5	1.97 ⬆	1.48 ⬇	0.96 ⬇	This year the Employee Relations team introduced a gate review process to ensure all disciplinary cases should be progressed to a formal process	**Equality and Diversity (4)** 51 per cent of organisations to have eliminated the ethnicity gap when entering into formal disciplinary processes.
Metric 4 - Relative likelihood of white staff accessing non-mandatory training and CPD compared to BME *(The target here is 1.0 where BAME and White staff have equal likelihood of accessing training.)*		1.05	1.06 ⬆	1.18 ⬆	1.13 ⬇		**Growing the Workforce (12)** Ensure people have access to continuing professional development, supportive supervision and protected time for training.

Metric		2017	2018	2019	2020	Comments	Theme from People Plan
Metric 5 - Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.	White	N/A	44.9%	39.6%	42.7%	This could have increased due to the start of the Say Yes to Respect Campaign with staff recognising that behaviour they previously accepted is not acceptable.	**Health and Wellbeing (8)** Prevent and control violence in the workplace – in line with existing legislation.
	BME	N/A	27%	29.8% ⬆️	40.3% ⬆️		
Metric 6 - Percentage staff experiencing harassment, bullying or abuse from staff in last 12 months.	White	N/A	26.8%	25.5%	21.9%		**Health & Wellbeing (7)** Prevent and tackle bullying, harassment and abuse against staff, and create a culture of civility and respect.
	BME	N/A	31.1%	27.6% ⬇️	28.6% ⬆️		
Metric 7 - Percentage of staff believing that Trust provides equal opportunities for career progression or promotion.	White	N/A	71.3%	73.6%	71.6%	This data needs further analysis to determine areas of concern.	**Recruitment (1)** Increase recruitment to roles such as clinical support workers, highlighting the importance of these roles for patients and other healthcare workers as well as potential career pathways to other registered roles.
	BME	N/A	66.0%	61.5% ⬇️	56.0% ⬇️		
Metric 8 - 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	N/A	10.3%	8.5%	7.0%	This could have changed due to the start of the Say Yes to Respect Campaign with staff recognising that behaviour they previously accepted is not acceptable.	**Health & Wellbeing (7)** Prevent and tackle bullying, harassment and abuse against staff, and create a culture of civility and respect.
	BME	N/A	17.6%	14.5% ⬇️	20.3% ⬆️		
Metric 9 - Percentage difference between the organisations' board membership and its overall workforce disaggregated:	White	93.8%	93.8%	100%	100%	The Trust Board diversity profile has not changed during 2019-20	**Equality and Diversity (3)** Publish progress against the Model Employer goals to ensure that the workforce leadership is representative of the overall BAME workforce.
	BME	6.25%	6.25% ↔️	0% ⬇️	0% ↔️		

Workforce Race Equality Standard: Summary Action Plan 2020/2022

	WRES Objective	YAS Action	Further Details
1.0	**Leadership and Culture**		
1.1	Staff will work in an environment free form bullying, harassment and discrimination	Continue to roll-out the Say Yes to Respect' Campaign in a targeted and structured to create a culture of civility and respect. This will also include a public awareness campaign to increase respect from patients, relatives and the public with the encouragement to staff to report incidents. Triangulate data to prioritise the roll out of middle management leadership and learning sessions	6
1.2	Ensure BME representation on decision making forums	Develop a positive action position on the Board for a Trainee Non-Executive from a BAME community.	6
2.0	**Recruitment, Retention and Resourcing**		
2.1	Ensure that recruitment and selection practices are inclusive for BME staff and prospective applicants	Analysis of data and use improvement methodologies to develop processes to ensure the Trust's recruitment and selection processes are inclusive to reflect the diversity of the community.	7
2.2	To hold comprehensive and accurate workforce data on all protected characteristics for all staff	Monitor and analyse workforce data on a monthly basis in relation to protected characteristics of our workforce. Make data available on the progress against the Model Employer goals to ensure that the workforce leadership is representative of the BAME workforce	8
3.0	**Employee Voice**		
3.1	Examine issues facing BME staff and improve working experience to increase retention	Develop a Reverse Mentoring programme for staff with a pilot undertaken exclusively for BAME staff. To commence initial work on a BAME staff development programme focused on career progression within YAS	8
4.0	**Health and Wellbeing**		
4.1	To ensure that YAS understands and meets the health needs of BME staff	Undertake a Health Needs Assessment provide targeted interventions to support BME staff in their working lives Every member of NHS staff should have a health and wellbeing conversation.	9
5.0	**Education and Learning**		
5.1	To have strategies to equip and support BME staff to progress in YAS	To develop middle manager leadership and learning sessions which include diversity and inclusion, unconscious bias and compassionate person centred leadership.	9

Workforce Race Equality Standard – Action Plan 2020/22

No	Objective	Specific action	Lead	Timeline	2020 WRES Submission	Indicators of improvement	Progress	RAG Rating
1.0	**Leadership and Culture**							
1.1	**Staff work in an environment free from bullying, harassment and discrimination**	Continue to roll out the dignity and respect campaign "Say Yes to Respect" across the organisation using data to prioritise areas and create a culture of civility and respect.	Head of D& I/ Head of OD	March 2022	**IND5:** Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months | White	BME | | 42.7%% | 40.3% | **IND6:** Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months | White	BME | | 21.9% | 28.6% | **IND8**: In the last 12 months have you personally experienced discrimination at work from any of the following? Manager/team leader or other colleagues | White	BME | | 7.0% | 20.3% |	Fewer cases of conflict going through formal processes Fewer complaints of bullying and harassment from staff Staff are aware of the Mediation Service and feel comfortable accessing it BME staff feel confident about reporting incidences of bullying and harassment		
		The Say Yes to respect campaign is adapted for external use to encourage respect from patients, relatives and the public with staff being encouraged to report and receive feedback on action taken	Head of Corporate Comms / LSMS	March 2022				
		Triangulate data relating to patient complaints, FTSU, Employee Relations cases to prioritise the roll out of middle manager and Say Yes to Respect sessions	Head of D& I / Head of HR Operations	March 2021				

No	Objective	Specific action	Lead	Timeline	2020 WRES Submission	Indicators of improvement	Progress	RAG Rating
1.2	**Ensure BME representation on decision making forums**	A positive action appointment of a BAME Trainee Non-Executive Director on a two year development programme	Director of Workforce and OD / Associate Director of Corporate Affairs / Head of D&I	December 2020	**IND9**: Percentage difference between the organisations' board voting membership and its overall workforce disaggregated. White 100% / BME 0%	Decisions do not impact negatively on BME people Decisions take into account the needs of BME people		
2.0	**Recruitment, Retention and Resourcing**							
2.1	**Ensure that recruitment and selection practices are inclusive for all BME staff and prospective applicants**	Undertake recruitment and selection workshops to review the inclusivity of the Trust processes.	Head of HR Operations / Recruitment Manager	December 2020	**IND2:** Relative likelihood of white staff being appointed from shortlisting compared to that of BME staff being appointed from shortlisting **Applied** White 8505 / BME 1885	All selection panels are adequately trained on diversity and inclusion and unconscious bias. R&S panels have diversity representation YAS workforce is representative of the community we serve		
		Developing a new job description and personal specification template to ensure criteria are inclusive	Recruitment Manager	December 2020	**Shortlisted** White 4644 / BME 1289 **Attended interview** White 1050 / BME 224 **Appointed**			
		Develop positive action schemes to encourage a greater number of BME applicants and to ensure that staffing reflects the diversity of the community.	Recruitment Manager / Head of D&I	March 2022	White 956 / BME 109 **Relative likelihood of shortlisting/appointed** 2.43			

No	Objective	Specific action	Lead	Timeline	2020 WRES Submission	Indicators of improvement	Progress	RAG Rating
		Introduce diverse panels for leadership roles including training more BME staff in R&S who can support panels	Recruitment Manager / Head of D&I	March 2022				
		Understand why BME candidates withdraw or DNA from interviews	Recruitment Manager	March 2022				
2.2	**To hold comprehensive workforce data on all protected characteristics for staff**	Strategic Workforce Group (SWG) to monitor data on a monthly basis in relation to: • Recruitment • Employee relations • Turnover	Head of HR Operations	March 2021	**IND1:** Percentage of staff in each AfC bands 1 - 9 or medical and dental subgroups and VSM (including executive board members) compared with the percentage of staff in the overall workforce **Trust Headcount** 5361 	White	BME
5059	284	 **Percentage** 	White	BME
94.4%	5.3%		Improvements in data for submission: • Workplace Race Equality Scheme (WRES), • Equality & Diversity System 2 (EDS2) • Workforce Profile YAS workforce is representative of the community we serve Increase in declaration rates on ESR.		
		Make data available to staff on the progress against the Model Employer goals to ensure that the workforce leadership is representative of the overall BAME workforce	Head of HR Operations	March 2021				

No	Objective	Specific action	Lead	Timeline	2020 WRES Submission	Indicators of improvement	Progress	RAG Rating
3.0	**Employee Voice**							
3.1	**Examine issues facing BME staff and improve working experience to increase retention**	Launch and embed a Reverse Mentoring Scheme for BME staff	Head of OD / Head of D&I	March 2022	**IND7**: Percentage of staff believing that Trust provides equal opportunities for career progression or promotion 	White	BME
71.6%	56%		BME staff are able to safely share lived experience BME staff across YAS feel engaged and listened to		
		To commence initial work on a BAME staff development programme focused on career progression	Head of Leadership and OD / Head of D&I	March 2022				
		Review governance arrangements and consider positive action to ensure that BME staff are able to contribute to decision-making processes	Head of D&I/Head of Corporate Affairs	March 2022				
4.0	**Health and Wellbeing**							
4.1	**To ensure that YAS understands and meets the health needs of BME staff**	Undertake a Health Needs Assessment focussed on BME communities and provide targeted interventions to support their working lives	Head of Health & Wellbeing	March 2022	Absence data for BME staff |	Long Term	Short Term	Total
BME	4.10%	3.18%	7.28%
White	3.64%	2.81%	6.45%
Grand Total	**3.66%**	**2.83%**	**6.49%**		BME staff feel their physical, mental and psychological needs are met		
		Every member of NHS staff should have a health and wellbeing conversation.	Head of Health & Wellbeing	March 2022				

No	Objective	Specific action	Lead	Timeline	2020 WRES Submission	Indicators of improvement	Progress	RAG Rating
5.0	**Education and Learning**							
5.1	**To have strategies that equip BME staff to progress in their careers at YAS**	To develop middle manager leadership and learning sessions which include diversity, inclusion, unconscious bias, compassionate person centred leadership.	Head of D&I / Head of L&OD / Head of YAS Academy	March 2022	**IND4:** Relative likelihood of white staff accessing non mandatory training and CPD as compared to BME staff **Likelihood i.e. more likely to access training and CPD** 1.13	L&OD Team deliver training to managers Staff survey shows improvement in quality of appraisals Engagement score increased		