

# Workforce **Race** Equality Standard Highlight Report 2021-22

Further information-

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# Introduction

*“These are not issues that a simple framework or policy can improve. There must be a sustainable programme of education, enablement, empowerment and change.” Yvonne Coghill, Director Workforce Race Equality, NHSEI*


Becoming a genuinely anti-racist organisation by advancing race equity is an unwavering commitment of the SWLStG- and it is part of our Corporate Objectives and Making Life Better Together vision. Workforce Race Equality Standard (WRES) is crucial to our “towards anti-racism” initiative.

At SWLStG, we are committed to taking a transparent and proactive approach to addressing racial inequity in the workforce and service delivery. Whilst submitting the WRES data annually to NHSE is a statutory requirement, we have chosen to additionally publish a public report to improve accessibility to our data and help drive improvements in the Trust in line with recommendations in the London Workforce Race Equality Strategy.

This report contains the updated WRES Metrics for the Trust for 2021/22. This data is based on the period from 1 April 2021 – 31 March 2022, including results from the staff survey carried out in Autumn 2021. In summary, data from the previous years are also reported. This is to understand if we have improved since last year and where we need to do more to accelerate progress and achieve equity. The report also refers to the WRES national report 2021, published in March 2022, and the London average to provide context for how the metrics have changed for the rest of the NHS compared to our performance.

We submitted the WRES data to NHSEI in August 2022, and this report will be published on our website by 31 October 2022. We have incorporated the WRES Action Plan into our Integrated EDI Strategy Action Plan 2022/24 for alignment with our wider EDI and Health Inequalities programmes, and to ensure accountability.

# What is WRES?

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- The WRES was introduced by the NHS Equality and Diversity Council (EDC) for all NHS Trusts and Clinical Commissioning Groups in April 2015. This was in response to 'The Snowy White Peaks' a report by Roger Kline which provided compelling evidence that barriers, including poor data, are deeply rooted within the culture of the NHS. The report highlights a clear link between workforce diversity of NHS organisations and better patient access, experience, care and outcomes.
  - There are nine WRES indicators. Four of these indicators are about the workforce (as at 31<sup>st</sup> March) recruitment (from 1<sup>st</sup> April to 31<sup>st</sup> March), formal disciplinary (two-year rolling) and staff access to non-mandatory training and CPD (from 1<sup>st</sup> April to 31<sup>st</sup> March)- and one specifically measures Black, Asian and Minority Ethnic (BAME\*) representation at Board level. The remaining four indicators cover discrimination, harassment, bullying or abuse from managers, colleagues, patients, relatives or the public (see Appendix 1: WRES Metrics).
  - The WRES has formed part of the standard NHS Contract since 1 April 2015. From April 2016, it has also included as part of the CQC inspection standards, and the lack of progress against the WRES was highlighted within our 2019 CQC report. The Trust submits the WRES data every year to NHSE by 31 August, and is required to publish a report on the website by 31 October.

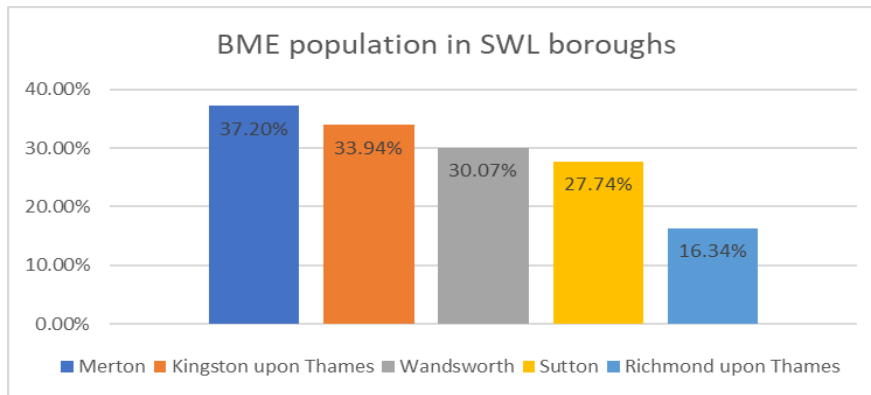
NHS England publishes an annual report on Trusts WRES performance  
[NHS England » NHS Workforce Race Equality Standard](#)

\* SWLSTG Equality and Diversity Committee made a decision to use BAME not BME, which the NHSE WRES documents

# Some context

For context, we like to provide some information to support a better understanding of the data and the analysis we have carried out.

- It's vital to consider the population we serve in SWL when drawing a comparison. We have included a chart to show the makeup of our local population across the five boroughs we serve. For some WRES metrics, it may show an under-representation of BAME compared with the overall workforce, but the gaps narrow and show more balanced when compared with the local demographic data.



**WHITE 71%**  
**BAME 29%**

- The reporting period is the 2021/22 financial year, and some indicators cover two years, e.g., WRES 3 and 4, when the NHS was faced with a big challenge because of COVID-19, which put added pressure on services and staff.
- Since April 2022, the Trust has made some structural and policy changes that have helped make tangible improvements, which are not shown in this report.
- Some of the data in the report need to be treated with caution, bearing in mind that a small change in the number can show a significant difference in the ratio or the percentage (e.g. WRES2/3).
- The data highlighted in red colour indicates a decline, and green shows progress compared to last year's performance.
- To show actual changes in the representation of BAME and White staff, we have used percentages, percentage points and numeric numbers.

# Our WRES performance 2021/22

23%

Increase in BAME staff in bands 8a-VSM (84 to 103).

5.2

Percentage points of BAME staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.

30%

Gap between the percentage points of BAME workforce (50%) and the BAME Board member (20%).

13%

Increase in BAME staff in the workforce since 2020 (1187 to 1338)

4

Percentage points of BAME staff experiencing harassment, bullying or abuse from staff in last 12 months.

35.2%

BAME staff believing that trust provides equal opportunities for career progression or promotion, compared with 55.3% White staff.

X1.3

The likelihood of BAME staff being appointed from shortlisting has increased, as the likelihood of White staff being appointed decreased from 1.43 times in 2021 to 1.3 times in 2022.

1

Percentage point of BAME staff personally experienced discrimination at work from any of the following: Manager/team leader or other colleagues.

X 7

BAME staff are 7 times more likely to face formal disciplinary action than White staff. This is based on 8 formal disciplinary cases over 2 years (2020-22)

# Summary of key findings

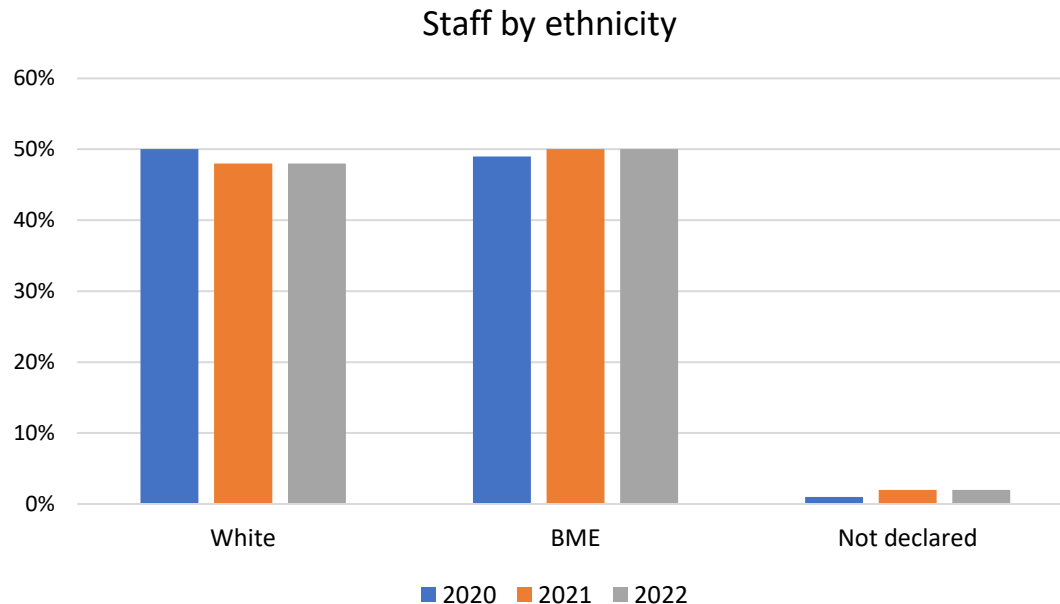
We are using the 2020 figures as our baselines and comparison is shown between the 2021 and 2022 to show the direction of travel and the impact on BAME staff. We have made the comparison of our 2022 figures with the 2021 national data as the 2022 data will be published in early 2023 (Indicators 1-4), and our 2021 Staff Survey data is compared with the NHS Staff Survey data, both national and London.

Number	Indicator	2020 (benchmark)	2021	2022	National average (2021)	Impact on BAME staff
1	Percentage of staff in each of the AfC Bands 1-9 or Medical and Dental subgroups and VSM. (BAME)	49%	50%	50%	22% (London 48%)	
2	Relative likelihood of staff being appointed from shortlisting across all posts (White)	X 1.64	X 1.43	X 1.3	X 1.61 (London 1.62)	
3	Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation (BAME)	X 2.39	X 2.34	X 7	X 1.14 (London 1.54)	
4	Relative likelihood of staff accessing non-mandatory training and CPD (White)	X 1.04	X 0.77	X 0.87	X 1.14 (London 0.95)	
5	Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.		White/BAME 29.10%/34%	White/BAME 26.4%/28.8%	White/BAME 25.9%/28.9%	*
6	Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.		White/BAME 21.5%/28.8%	White/BAME 16.8%/24.8%	White/BAME 23.2%/28.8%	*
7	Percentage believing that trust provides equal opportunities for career progression or promotion.		White/BAME 57.1%/38.2%	White/BAME 55.3%/35.2%	White/BAME 87.3%/69.2%	*
8	In the last 12 months have you personally experienced discrimination at work from any of the following: Manager/team leader or other colleagues.		White/BAME 6.8%/16.2%	White/BAME 7.1%/17.2%	White/BAME 6.2%/16.7%	*
9	Percentage difference between the organisations' Board membership and its overall workforce disaggregated: By voting and executive memberships of the Board (BAME)	23%	23%	20%	12.6% (London 22.6%)	

\* Both White and BAME impacted

# Key findings

## Direction of travel



A year on year  
increase in BAME  
staff in the Trust  
since 2020\*

2022	51%
2021	51%
2020	49%

3%  
(88)

The percentage (and numerical) increase in Trust staff since 2021, bringing the total to 2668.

13%  
(149)

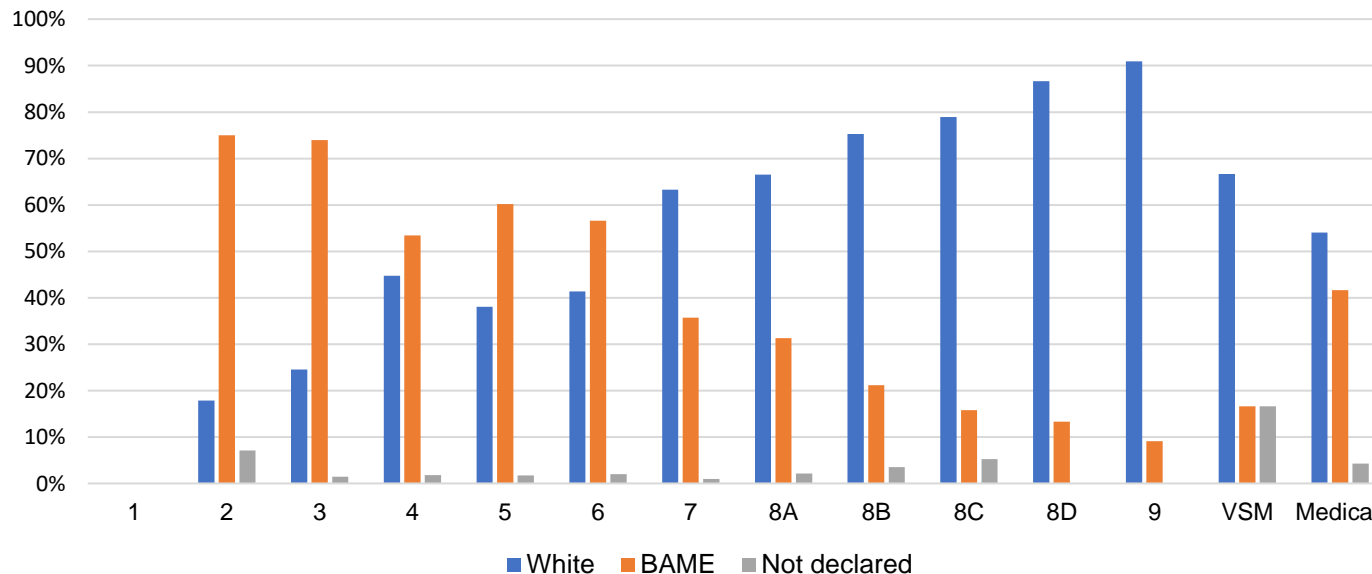
The percentage (and numerical) increase in BAME Trust staff since 2020



# Key findings

## WRES Metric 1: Staff by ethnicity

Staff by band and ethnicity as at 31st March 2022



As of 31<sup>st</sup> March 2022, the Trust had 2668 staff, a 3% increase since 2021.

BAME staff are overrepresented in lower bands (2-6) and White staff in senior bands (7-VSM).

# Key findings

## WRES Metric 1: Staff by ethnicity as at 31<sup>st</sup> March 2022, and comparison with March 2021 figures

2021

Bands	White	BAME	Not disclosed
1 to 7	43%	56%	2%
8b to VSM	75%	24%	2%

Bands	White	BAME	Not disclosed
1 to 5	35%	64%	2%
6 to 7	53%	46%	2%
8a to 8b	72%	26%	2%
8c to VSM	83%	16%	1%

2022

Bands	White	BAME	Not disclosed
1 to 7	42%	56%	2%
8a to VSM	71%	26%	3%

Bands	White	BAME	Not disclosed
1 to 5	36%	62%	2%
6 to 7	51%	47%	2%
8a to 8b	69%	29%	3%
8c to VSM	79%	15%	6%

- Representation of BAME staff in bands (6-7) has increased by 8% (31) and 28% in bands 8a-8b (20).
- The data shows a decrease of 1 percentage point of BAME staff in bands 8c-VSM (1). The 2 percentage points decrease in bands 1-5 (5) is mainly due to the increase in some staff being promoted to jobs in bands.
- Non-disclosure of ethnicity has increased amongst staff in bands 8a and above.

# Key findings

## WRES Metric 1: Non-clinical staff by ethnicity as at 31<sup>st</sup> March 2022, and comparison with March 2021 figures

2021

Bands	White	BAME	Not disclosed
1 to 7	39%	60%	2%
8b to VSM	69%	27%	3%

Bands	White	BAME	Not disclosed
1 to 5	32%	65%	2%
6 to 7	50%	50%	0%
8a to 8b	62%	34%	4%
8c to VSM	79%	18%	3%

2022

Bands	White	BAME	Not disclosed
1 to 7	35%	62%	3%
8a to VSM	69%	25%	6%

Bands	White	BAME	Not disclosed
1 to 5	30%	67%	4%
6 to 7	43%	55%	1%
8a to 8b	66%	32%	3%
8c to VSM	74%	15%	11%

- Representation of BAME staff in bands 1-7 shows an increase, but a decrease in bands 8a-VSM.

-

# Key findings

## WRES Metric 1: Clinical staff by ethnicity as at 31<sup>st</sup> March 2022, and comparison with March 2021 figures

2021

Bands	White	BAME	Not disclosed
1 to 7	43%	55%	2%
8b to VSM	76%	22%	1%

Bands	White	BAME	Not disclosed
1 to 5	35%	63%	2%
6 to 7	53%	45%	2%
8a to 8b	75%	24%	1%
8c to VSM	86%	14%	0%

2022

Bands	White	BAME	Not disclosed
1 to 7	43%	55%	2%
8a to VSM	72%	26%	2%

Bands	White	BAME	Not disclosed
1 to 5	36%	62%	2%
6 to 7	52%	47%	2%
8a to 8b	70%	28%	2%
8c to VSM	86%	14%	0%

Representation of BAME staff in bands 6-8b shows an increase, which impacted quite positively in BAME representation in bands 8a-VSM. There was a slight decrease of BAME staff in bands 1-5.

# Key findings

## WRES Metric 1: Medical staff by ethnicity as at 31<sup>st</sup> March 2022, and comparison with 2021 figures

2021	White	BAME	Not disclosed
Consultant	58%	39%	3%
Snr Medical Manager	80%	20%	0%
Non-consultant	45%	50%	5%
Trainee Grade	52%	40%	8%

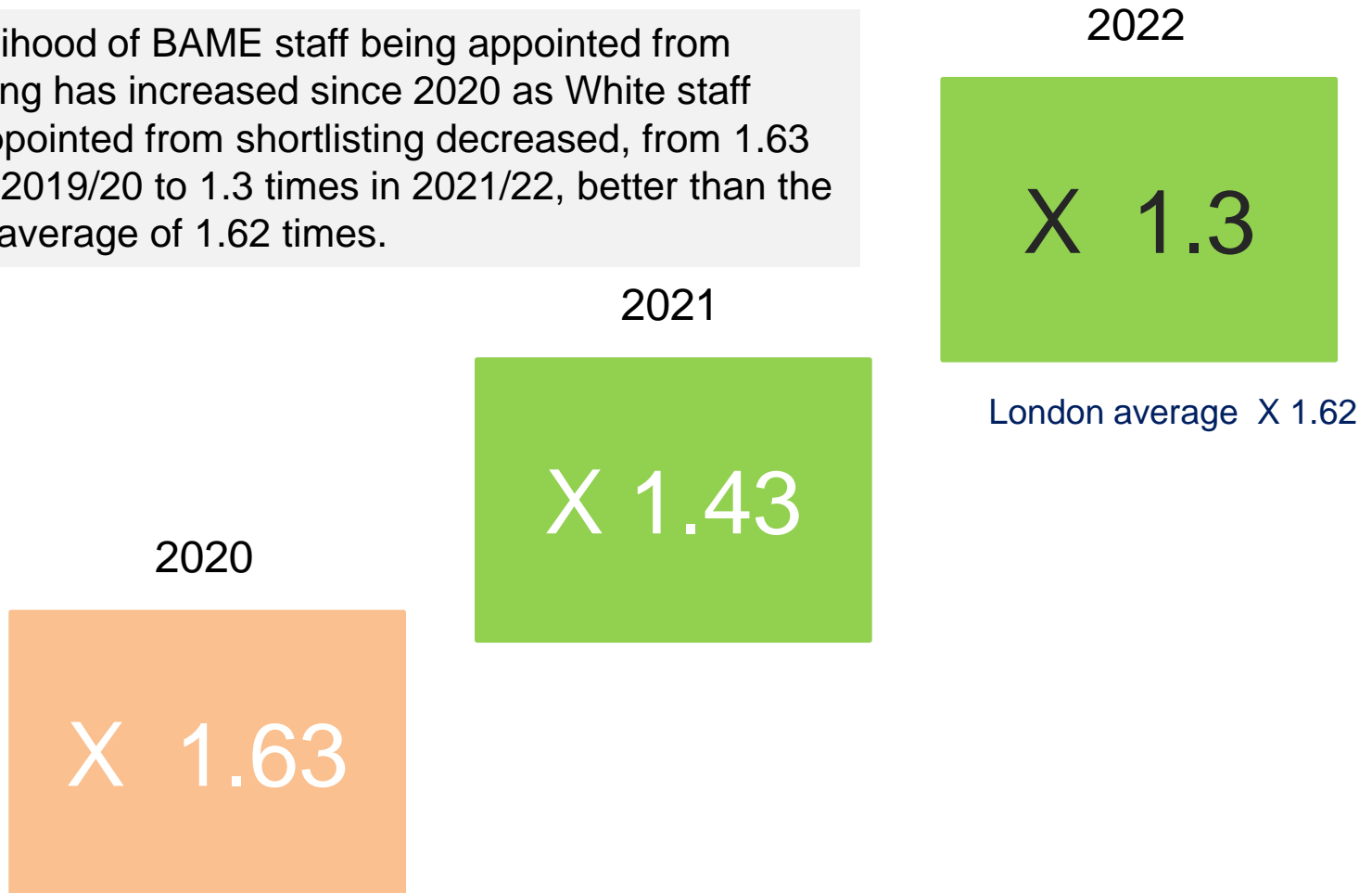
2022	White	BAME	Not disclosed
Consultant	58%	40%	2%
Snr Medical Manager	90%	10%	0%
Non-consultant	37%	63%	0%
Trainee Grade	53%	40%	8%

The percentage of BAME medical staff has increased from 40% to 42% since 2021, primarily due to the large increase in non-consultant staff (13 percentage points)

# Key findings

**WRES Metric 2:** White applicants being appointed from shortlisting compared to BAME applicants.

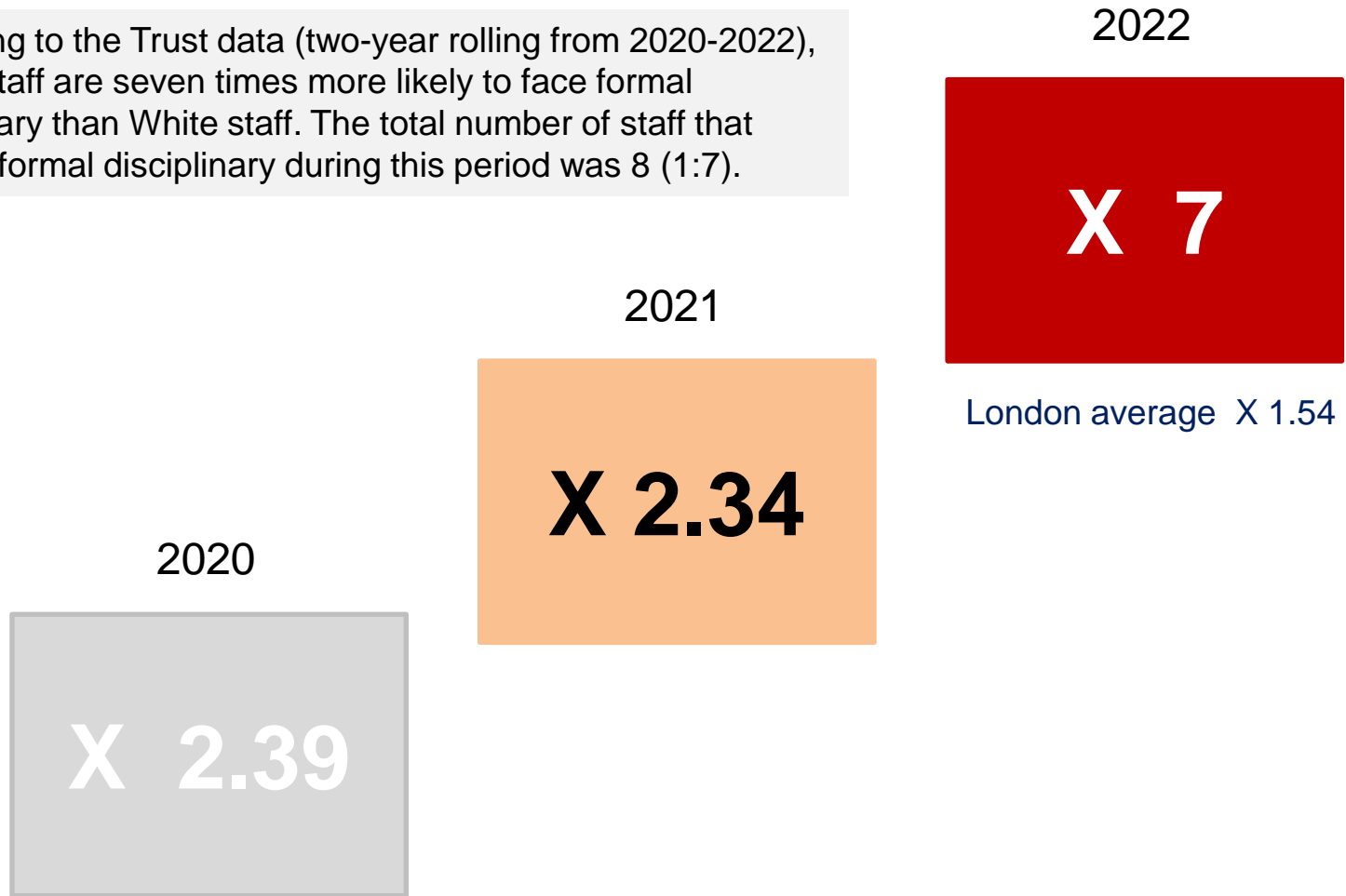
The likelihood of BAME staff being appointed from shortlisting has increased since 2020 as White staff being appointed from shortlisting decreased, from 1.63 times in 2019/20 to 1.3 times in 2021/22, better than the London average of 1.62 times.



# Key findings

**WRES Metric 3:** Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation.

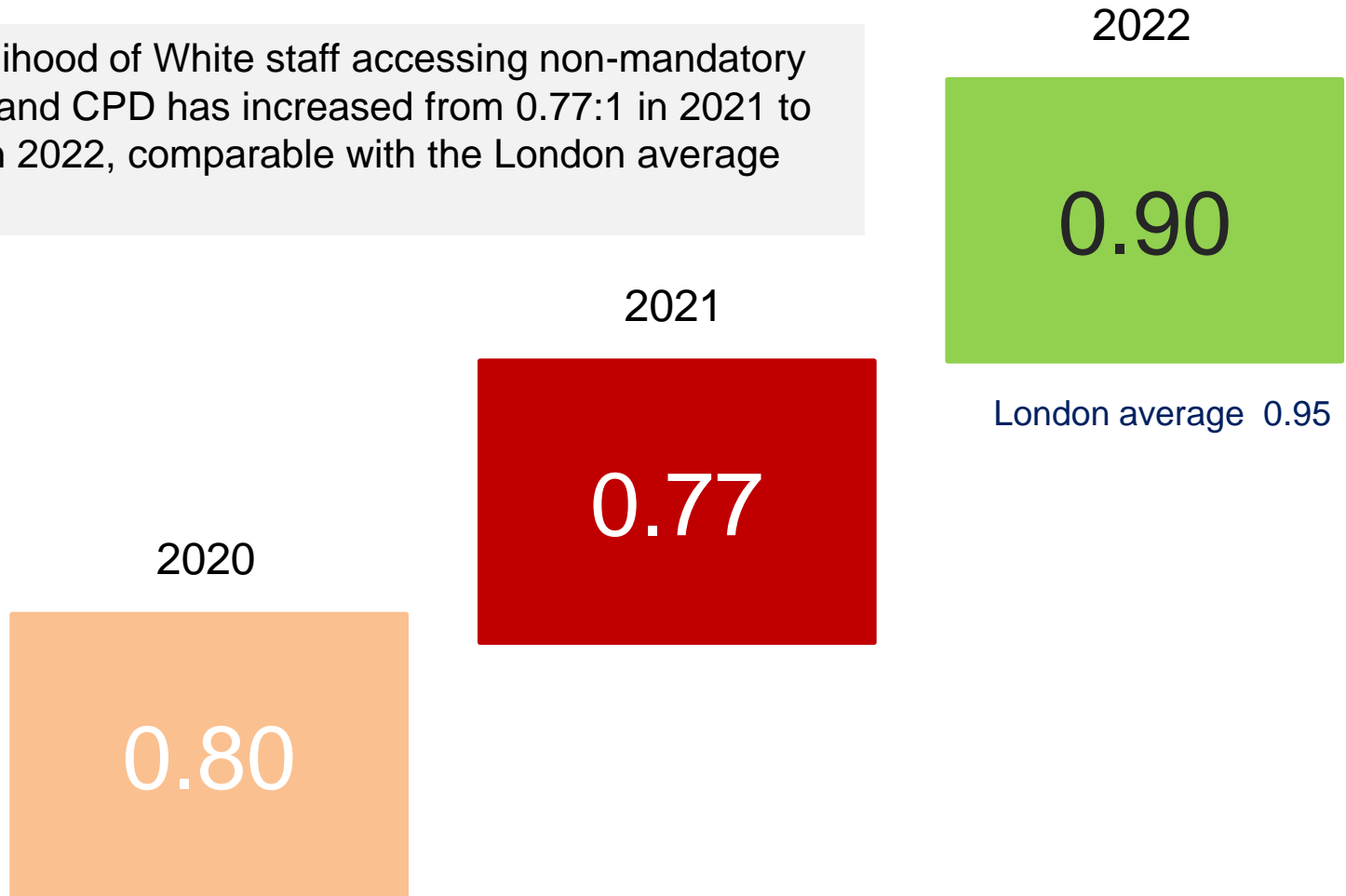
According to the Trust data (two-year rolling from 2020-2022), BAME staff are seven times more likely to face formal disciplinary than White staff. The total number of staff that entered formal disciplinary during this period was 8 (1:7).



# Key findings

**WRES Metric 4:** Relative likelihood of White staff accessing non-mandatory training and CPD.

The likelihood of White staff accessing non-mandatory training and CPD has increased from 0.77:1 in 2021 to 0.90:1 in 2022, comparable with the London average (0.95).





# Key findings

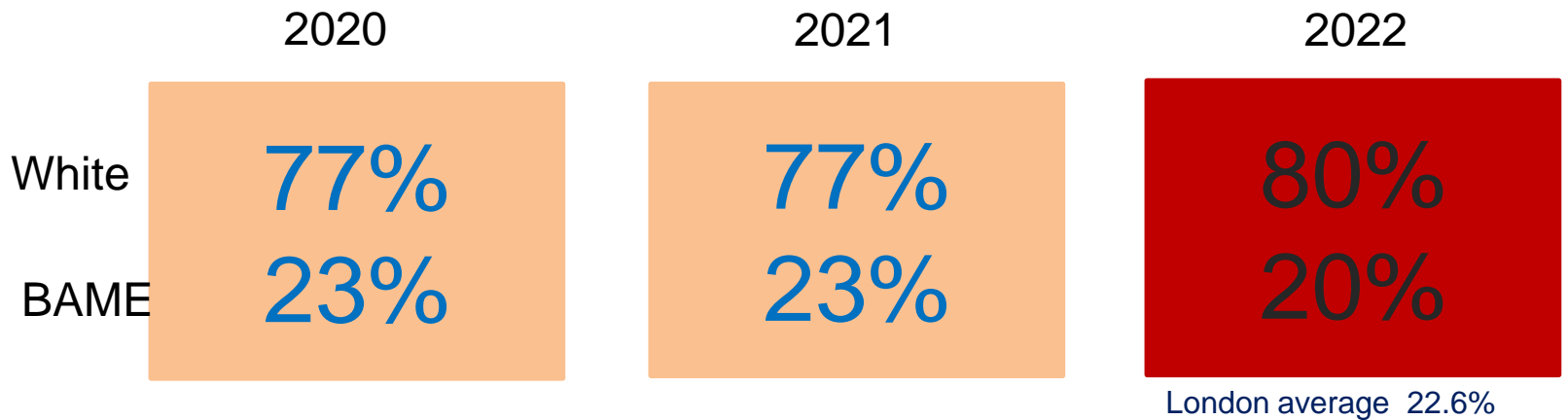
## WRES Metric 5-8: Staff Survey

WRES Staff Survey Metrics provide information about staff experiences of discrimination, abuse bullying, harassment by patients, staff managers/team leaders. From this information, we get a snippet of how staff are treated in the Trust. However, to understand the full picture, it may be useful to look at the other questions e.g. People Promise.

	2021	2022
Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.	White/BAME 29.10%/34%	White/BAME 26.4/28.8%
Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.	White/BAME 21.5%/28.8%	White/BAME 16.8%/24.8%
Percentage believing that trust provides equal opportunities for career progression or promotion.	White/BAME 57.1%/38.2%	White/BAME 55.3%/35.2%
In the last 12 months have you personally experienced discrimination at work from any of the following: Manager/team leader or other colleagues.	White/BAME 6.8%/16.2%	White/BAME 7.1%/17.2%

# Key findings

## WRES Metric 9: Board voting members and overall workforce



20% Board voting members are from BAME backgrounds- in comparison with 50% staff being from BAME backgrounds.

# How do we operationalise WRES?

*You Cannot Be What You Cannot See*



**We will use a reflective model for improving race equity in the workforce.**

*Awareness*

WHAT?

What does the  
WRES data tell us?

What has improved  
and what has not  
improved?

What have we done?

*Analysis*

SO WHAT?

So what more do  
need learn about the  
WRES data?

So what action(s)  
must we take to  
improve race equity?

So what makes  
WRES more  
important now than  
ever before?

*Synthesis*

NOW WHAT?

So now what  
could/must we do?

What will we do  
differently next time?

# Recommendations

  
**1**

Review structures and policies to ensure the Trust consistently achieves workforce race equity goals, and the Trust People Plan reflects that.

**2**

Deliver specific interventions to (a) reduce BAME staff facing formal disciplinary, and (b) offer career progression opportunities for staff in lower bands.

**3**

Engage BAME staff in co-production and decision making.

**4**

Widen the scope of the data analysis beyond the WRES metrics include demographic information for a better understanding of the racial disparities and the impact of our policies and practices on BAME staff.

# Appendix 1: WRES Metrics

Indicators	Workforce indicators For each of these four workforce indicators, compare the data for white and BAME staff
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 disaggregated by: Non-clinical staff, Clinical staff, of which - Non-medical staff - Medical and dental staff
2	Relative likelihood of staff being appointed from shortlisting across all posts.
3	Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation
4	Relative likelihood of staff accessing non-mandatory training and CPD.
National NHS Staff Survey indicators (or equivalent) For each of the four staff survey indicators, compare the outcomes of the responses for white and BAME staff	
5	Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.
6	Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.
7	Percentage believing that trust provides equal opportunities for career progression or promotion.
8	In the last 12 months have you personally experienced discrimination at work from a manager, team leader or other colleagues.
Board representation indicator For this indicator, compare the difference for white and BAME staff	
9	Percentage difference between the organisations' board membership and its overall workforce disaggregated: • By voting membership of the board • By executive membership of the board

# Appendix 2: WRES Action Plan 2021/22 implementation

## Workforce Race Equality Standard (WRES) achievements

Activities/achievement	WRES Indicator
Our goal of increasing the number of Diversity in Recruitment Champions from 40 to 80 till September 2022 achieved	2; 7
Quarterly Diversity in Recruitment Champions feedback sessions introduced. The purpose is for our DIRs to meet with each other, the EDI team and the Recruitment team; discuss their experience, bring queries, ask questions and provide feedback, while networking.	2
Cohort 2 of our Reverse Mentoring Programme concluded in November 2021, Feedback report shared with senior leaders (June 2022) for review and decision regarding Cohort 3 and the way forward.	1; 4
The Trust have revised our Disciplinary process and produced a new policy in November 2021. We ran Focus Groups where BAME staff, staff side and FSTU Guardian shared their feedback on how we can improve our disciplinary process.	3
New Disciplinary policy is currently being reviewed and revised due to HR split. The recommendations from the Disciplinary Deep Dive and WRES will be included within this new revised approach.	3
Our Trust's new WRES action plan 2021-2022 was launched on 31 October 2021, with quarterly updates reports presented to EDC. New holistic EDI action plan being currently received.	1; 2; 3
Our Equality, Diversity, and Inclusion presentation during the monthly Corporate Induction features information about WRES and WDES.	1-8
Evolve (Black and Ethnic Minorities Staff Network) have also been encouraging all members of staff to complete the NHS Race Equality Strategy survey	1-8

# Appendix 2: WRES Action Plan 2021/22 implementation (cont'd)

## Black and ethnic minorities celebrations and awareness

Activities/achievement	WRES Indicator
To mark Black Inclusion Week, (May 2022) we shared information, resources, and external events on InSite (internal intranet)	1-8
Windrush Day 2022 was celebrated by displaying our Windrush banner at our sites, together screening of 'Soon Gone: A Windrush Chronicle Monologues'. The stories explored the experience of migration. Attendees shared their own experiences and memories of living in Britain as the child of a migrant.	1-8
Black History Month 2021 was celebrated via several webinars, weekly quizzes, and events in collaboration with Evolve BAME staff network.  Evolve (Black and Ethnic Minorities Staff Network) and the Trust are currently organising Black History Month 2022, with the theme 'I am not my hair'	1-8
Evolve (Black and Ethnic Minorities Staff Network) and the Trust remembered the death of George Floyd with an article on InSite (May 2022).  Evolve (Black and Ethnic Minorities Staff Network) also planned a one-minute silence in honour of Chris Kaba and aall other British people of colour who have died at the hands of the Police in the street or have been killed in police custody (October 2022)	5-8
Evolve (Black and Ethnic Minorities Staff Network)and the Trust celebrated South Asian Heritage Month 2022 (July – August) for the first time with numerous events at both our sites and online	1-8
Evolve (Black and Ethnic Minorities Staff Network) and the LGBTQIA+ staff network had a stall at UK Black Pride 2022, where they reached out to a LGBTQIA+ people of colour and promoted mental health and wellbeing tips, together with our services	1-8
The Trust celebrated National Day for Staff Networks in May 2022 with each staff network giving a presentation about their work and achievements	1-8

# Appendix 2: WRES Action Plan 2021/22 implementation (cont'd)

## Evolve (Black and Ethnic Minorities) Staff Network achievements

Activities/achievement	WRES Indicator
Evolve (Black and Ethnic Minorities Staff Network) held its first Masterclass entitled 'Identity Safety a precursor to psychological safety', discussing the impact of a lack of psychological and identity safety on the workforce.	4-8
Successful Annual Evolve (Black and Ethnic Minorities Staff Network) conference entitled "Anti Racism is Everyone's Business" The webinar facilitated by ENEI was followed by 3 monthly discussions about different forms of racism.	1-8
Increase in membership and distribution of Evolve Lanyards	1-9
Staff Network Meeting discussions with expert presenters on Trust Strategies and initiatives e.g., White Allies, Communications, Staff Survey results, WRES, Guardian Service, EMHIP	1-8
Workshop – "If You Don't Know, Get to Know Series: HR Policy & Process Awareness"	1-8
Evolve (Black and Ethnic Minorities Staff Network) organised a UK Black Pride presentation and discussion led by Dr Rajesh Mohan, Presidential Lead for Race and Equality at the Royal College of Psychiatrist, about being LGBTQIA+ and Black	1-8
Evolve (Black and Ethnic Minorities Staff Network) and our white allies designed and developed an Anti-Racism Senior Leadership seminar in February 2022 focussing on all our individual and collective roles in creating an actively anti-racist organisation	5-8
Together with Evolve (Black and Ethnic Minorities Staff Network), the Trust took a firm stance against the racism seen after the World Cup 2022 final and encouraged those affected to use IAPT services.	5-8



# Appendix 2: WRES Action Plan 2021/22 implementation (cont'd)

## Staff lived experience sharing

Activities/achievement	WRES Indicator
2 staff stories shared on InSite, social media and Youtube as part of Black History Month 2021.	1; 5-8
Reverse mentoring article (featuring Black & Ethnic Minority mentor and CEO mentee) featured on EDI newsletter Q3 and Insite (internal) article.	1;4
Experience of being a Diversity in Recruitment (DIR) Champion published every quarter as part of our DIR recruitment commitment.	2
Evolve organised regular webinars, masterclasses, meetings, and events that give staff the opportunity to share their lived experiences.	1-8

## White allyship programme

Activities/achievement	WRES Indicator
6 of our white senior leaders embarked on an NHS England's first White Allyship Programme with focus on creating the type of change which we hope will have a more sustainable impact on how the organisation behaves in addressing race inequality.	1-9

# Appendix 2: WRES Action Plan 2021/22 implementation (cont'd)

## Anti-racism Hub

Activities/achievement	WRES Indicator
As a result of the White Allyship Programme, the Trust launched its Anti-Racism Virtual Hub, a place where all staff, regardless of their ethnic background, can come together and collaborate, ask questions, discuss, reflect and challenge.	1-9

## Strengthening nursing leadership

Activities/achievement	WRES Indicator
The Trust has worked to address inequality in leadership by successfully winning two external grants from the Burdett Nursing Trust, which has over the last four years funded two projects. These strengthened nurse leadership and promoted the use of Black nurse cultural expertise in the reduction of restrictive practices. Both programmes have been coproduced with those with lived experiences, run in conjunction with Kingston University and external expert consultants.	1-8