



Bradford District Care
NHS Foundation Trust

Equality, Diversity and Inclusion Workforce Strategy Bradford District Care NHS Foundation Trust

2018 - 2021

1.0 Introduction

This strategy sets out the Trust's commitment to developing and maintaining a diverse workforce; a workforce that experiences equality of experience and in job satisfaction.

Bradford District Care Trust is striving to be an outstanding provider of care. Research¹ has proven that there is a clear link between the satisfaction levels of the workforce and the quality of care. The Workforce Race Equality Standard (WRES), Data draft Workforce Disability Equality Standard (WDES) Data and Stonewall research tell us that BAME staff, LGBT staff and Disabled staff regularly experience and report lower levels of satisfaction, equal opportunity and more discrimination, abuse and harassment. The strategy outlines the activity that will be undertaken to improve the WRES, WDES and Gender Pay Gap data for these groups.

The strategy builds on the Black, Asian and Minority Ethnic Diversity in Employment Strategy which ran from 2014 to 2016 with the aim of tackling barriers to career progression for BAME staff. The objectives set out within the strategy continued to be progressed in 2017 and reported into the Board in advance of this strategy being developed. The outstanding actions from the previous strategy have been incorporated into this new strategy. The evaluation of that work emphasised the need for a shift in focus and emphasis to concentrate on ensuring the essential building blocks are in place around recruitment and retention and delivering a smaller number of actions, mostly led by operational services, that are all aimed at achieving a sustainable cultural shift, to one that is inclusive and that will attract and retain staff.

The on-going challenges facing the NHS and the Trust including the scale and pace of change puts the need to engage with staff in an authentic and meaningful manner centre stage. This will mean supporting and engaging with leaders at every level so that they understand the need for change and are able to play their part in helping to create an inclusive and high performing culture.

Bradford District Care Foundation Trust delivers Community and Mental Health Services to an extremely diverse community of service users and carers in Bradford, Airedale, Wharfedale and Craven, and Wakefield and across the Yorkshire and Humber region. Our services touch the whole community ranging from Health Visiting that supports families with new babies right through to services for older people and Palliative Care offering support at the end of life.

36%² of the Bradford Local Authority area 4% of the Craven Local Authority area and 7% of the Wakefield Local Authority area³ are from a Black and Minority Ethnic Community.

In the 2011 Census, around 38,000 men and 48,000 women aged over 16 in Bradford reported a long term illness or disability which limited their day to day activities. Of these only 20% were in employment⁴.

Around 6%⁵ of the national population are estimated to be LGB which is approximately 32 280 people in Bradford, 3216 in Craven and 19 920 in Wakefield.

¹ Equally Outstanding CQC

² Census 2011

³ State of the District Report Wakefield DC 2017

⁴ Understanding Bradford BMDC 2013

⁵ Model Estimates of LGB population of England Public Health England 2017

This diverse population needs an NHS organisation providing services that reflects its make-up. A diverse workforce delivers services that are appropriate and responsive to community needs.

Paul Corrigan, CQC Non-Executive Director said recently at the launch of the CQC's 'Equally Outstanding Guide' that, "There is a clear link between the quality of care a service provides and whether the people who use it and its staff feel that their human rights are respected and they are treated equally".⁶

- CQC analysis of NHS trusts' ratings shows that staff in acute or combined trusts with higher ratings are less likely to say they have experienced discrimination, bullying or harassment.
- Research looking at the NHS staff survey and inpatient survey found that where Black and Minority Ethnic staff experienced discrimination, there tended to be lower levels of patient satisfaction.
- Equally, a care setting where staff do not feel valued and respected is more likely to experience absenteeism, high staff turnover and recruitment problems – with implications for both care quality and finances.⁷

Bradford District Care Foundation Trust aims to be an outstanding care provider that effectively and efficiently meets the needs of its service users and carers. This strategy sets out how over the next three years the Trust will continue its commitment to ensure all staff are free from discrimination, feel equally supported in career progression and opportunities and report the same levels of satisfaction with their role at the Trust. It moves beyond a focus on predominantly BAME staff to address workforce equality across all protected characteristics. Whilst the strategy focuses on addressing disadvantage and disproportionate representation experienced by those with protected characteristics, the actions and approaches focus on including and attracting into the workforce all sections of the community who may or may not have protected characteristics. The aim of achieving a workforce reflective of the communities it serves remains.

2.0 Background

In 2012 Bradford District Care Foundation Trust (BDCFT) adopted the NHS Equality Delivery System (2). The EDS2 provides NHS organisations with a framework to assess and develop their equality work. It focuses on both care equality and workforce equality.

Through extensive research into health inequalities and stakeholder involvement a set of Equality Objectives were launched to meet the Public Sector Equality Duty. One of those Equality Objectives was to 'Reduce the inequalities faced by Black and Minority Ethnic Staff and Job Applicants'. That objective ran from 2012 – 2016. The outcomes of that work were:

- Research and a report about the hypothesis that there were barriers to career progression at the Trust for BAME staff.
- A 'BAME Diversity in the Employment Strategy' launched in 2014.
- The setting of a target, to work towards 35% of all staff at each pay band being from a BAME background. That is the same percentage of the Bradford working age population that are from a BAME background.

⁶ CQC website Equally Outstanding Launch 2017

⁷ CQC Equally Outstanding 2017

- The design, development and delivery of the Moving Forward Career Development Programme for BAME staff in bands 5 and 6 that have experienced barriers to their career development.
- Development of key messages about unconscious bias and the importance of inclusive leadership that have been embedded into the Trusts Leadership and Management Frameworks and Recruitment and Selection Training.
- Collection and provision of performance data on how we are moving towards the 35% target.

In 2015 NHS England launched the Workforce Race Equality Standard. This standard is now in its third year and requires NHS organisations to provide data to NHS England on their performance on the following nine metrics:

1. Percentage of BAME staff in Bands 8-9, VSM (including executive Board members and senior medical staff) compared with the percentage of BAME staff in the overall workforce.
2. Relative likelihood of BAME staff being appointed from shortlisting compared to that of White staff being appointed from shortlisting across all posts.
3. Relative likelihood of BAME 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.
4. Relative likelihood of BAME staff accessing non-mandatory training and CPD as compared to White 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 any of the following?
 - a) Patients, relatives or the public
 - b) Manager/team leader or other colleagues
9. Boards are expected to be broadly representative of the population they serve.

The past three years WRES reports submitted by the Trust and the WRES action plan can be viewed here <http://www.bdct.nhs.uk/about-us/key-information/equality-and-diversity/>

3.0 New Strategic Drivers 2018 - 2020

In 2016 the BDCFT Equality Objectives were refreshed. Three new workforce related objectives were agreed. They are:

- To implement the Workforce Race Equality Standard.
- To prepare for the implementation of the Workforce Disability Equality Standard by preparing data and developing and delivering plans to tackle the issues identified.
- To publish the Gender Pay Gap and develop an action plan responding to the data.
- To implement the recommendations in the Unhealthy Attitudes Stonewall Study and Equity partnership LGB&T Local Health Needs Assessment.

These were in response to:

- A new **Workforce Disability Equality Standard (WDES)** to be launched by NHS England in April 2018. The metrics are likely to be similar to those set out in the WRES with additional ones linked to the percentage of disabled staff feeling pressure to attend work when they are unwell.

- The **Equality Act 2017 Regulations** requiring public sector organisations to calculate and publish their **Gender Pay Gap** in April 2018. This tells us of any difference between what men and women are being payed. The data will be comparable across the country.
- The **Stonewall Unhealthy Attitudes Survey**⁸ and **BDCFT Workplace Culture Survey**⁹. These national and local studies identified the issues for LGBT patients accessing NHS services and for NHS staff in the workplace.

The Equality, Diversity and Inclusion Workforce Strategy aims to address the issues identified over the past year in preparation for the standards and regulations listed above as well as the information we provide annually to NHS England as part of the Workforce Race Equality Standard.

4.0 The Current Picture

The workforce issues facing the NHS nationally are mirrored within Bradford District Care Foundation Trust making this a key priority for improvement. Progress has been made in some areas but there are still significant differences in the way staff from protected characteristic groups experience work.

4.1 Workforce Race Equality

The BAME Diversity in Employment Strategy that ran from 2014 – 2017 made a positive impact on the WRES metrics proving that this approach can make a difference. The following impact has been made:

- There has been an increase in the percentage of **BAME staff in bands 8 – 9** over the 4 year period from 6.7% in 2014 to 10.4% in 2017.
- There is now no difference in the likelihood of **BAME applicants being appointed after shortlisting** when compared with White staff.
- The gap between BAME staff and White staff reporting having experienced **harassment, bullying or abuse from patients, relatives or the public** has reduced over the time period from 6% more BAME staff having experienced it to 3% and now to 0.25%.¹⁰
- The gap between the percentage BAME staff and White staff **believing that the Trust provides equal opportunities for career progression and promotion** has narrowed by 4% over the time period, which is 1% per year reduction.
- There has been a steady reduction in the gap from 30% to 8% between BAME staff and White staffs **reporting of experiencing discrimination at work from a manager / team leader or other colleagues**.
- 6.25% of the **Trust Board was from a BAME background** in 2014 and during the 2017 reporting period that had increased to 8.3%.¹¹

Although there have been positive changes in reducing the gap between how BAME and White staff report experiencing and feeling about their work there are still significant gaps that need to continue to be addressed. These are:

- BAME staff are almost twice as likely to enter the formal disciplinary process compared to White British staff.

⁸ <http://www.stonewall.org.uk/our-work/campaigns/unhealthy-attitudes>

⁹ BDCFT study carried out by Rebecca Hewitt in 2015

¹⁰ BDCFT WRES data 2017

¹¹ NHS England WRES data <https://www.england.nhs.uk/wp-content/uploads/2014/10/WRES-Data-Analysis-Report.pdf>

- BAME Board representation is 8%.
- Still an 18% difference between BAME and White Staff believing that Trust provides equal opportunities for career progression and promotion.
- There has been a constant gap of 4% more BME staff experiencing harassment, abuse or discrimination from staff until 2016 year when that gap increased to 5%.
- There is still an 8% gap in the percentage of BME and White staff who report personally experiencing discrimination at work from a Manager / Team Leader or other colleagues.

4.2 Workforce Disability Equality

Over the past few years we have collected data in preparation for the Workforce Disability Standard. A summary of the information collected is below:

- Only 4% of staff members **disclose a disability** within their Electronic Staff Record whereas in the confidential staff survey 23% of respondents disclosed that they had a disability.
- In ESR 26% of staff have left the category '**undefined**'; so do not answer the question.
- As the figures are so low it is difficult to take meaningful learning from the breakdown of that data at band and staff group level.

In the 2017 BDCFT NHS Staff Survey:

- 72% of Disabled staff compared with 52% of non-Disabled staff reported **feeling pressure to attend work despite feeling unwell** in the last 3 months.
- 74% of Disabled staff compared with 84% of non-Disabled staff believes that the organisation provides **equal opportunities for career progression / promotion**.
- Less Disabled staff (2.95) than non-Disabled staff (3.11) report being **satisfied with their appraisal**.
- 30% of Disabled staff report experiencing **abuse, harassment or discrimination** from staff in comparison with 18% of non-Disabled staff.

4.3 Workforce Gender Equality

BDCFT produced and analysed Gender Pay Gap information in March 2017 in preparation for the requirement to publish by 31st March 2018. The current gender pay gap calculated using the specified mean calculation is 6.86% in favour of males or £1.11. This has decreased by 1.68% since the previous report in March 2016. The average hourly rates of pay are £14.88 for females and £15.99 for males. This calculation is based on full time employees only.

The Equality and Human Rights Commission have recently published data for benchmarking against. The national gender pay gap is £2.41 £2.55 for England and £2.27 in Yorkshire, £2.13 in West Yorkshire and £1.66 in Bradford.

4.4 Workforce Sexual Orientation Equality

Basic data is analysed as part of the Trust's bi-annual workforce equality data analysis. Below is a summary of that information.

- 32% of the workforce do not disclose their sexual orientation within the Electronic Staff Record.

- The Trust carried out a survey of LGBT staff and their work experiences in 2014; in that survey staff stated feeling concerned about sharing their sexual orientation as they were unclear why it was needed and what the information would be used for.
- The recommendations from that study have not yet been taken forward, this strategy offers the opportunity to take work that forward.

5. Key objectives for attracting, developing and retaining a Diverse and Inclusive Workforce

A series of staff and service user focus groups and meetings with the staff networks took place to identify priorities to move this work onto the next stage of culture change that is felt across all services and for all staff across the Trust. Those meetings and the Equality Objectives, data and current position summarised on page 5, 6 and 7 has led to the following priorities being identified for development over the 3 years. The focus of all of this work is to positively change culture whether it relates to recruitment and workforce planning, performance and progression or bullying, harassment and victimisation. This has been proven to make a difference in improving the metrics around this agenda.

	Objectives
1.	<p><i>Embed the Strategy across the Trust</i></p> <ul style="list-style-type: none"> • Business units to develop objectives that support the delivery of this strategy based upon data and intelligence provided as a workforce equality dashboard. • Ensure a strong communication approach to the strategy and the workstreams that promotes the importance to managers and staff across the Trust and ensuring team leaders support staff attendance.
2.	<p><i>Creating a Diverse and Inclusive Culture</i></p> <ul style="list-style-type: none"> • Facilitate an ongoing conversation with staff from the protected characteristic groups about their experience and satisfaction as a means to steering the strategy and monitoring culture change. • Ensure a strong focus on staff networks and promoting their importance to managers and team leaders across the Trust to enable staff attendance. Support the staff networks to contribute to this agenda and support the delivery of these priorities. • Develop communications that promote role models and ambassadors in the Trust from protected characteristic groups who have progressed in their careers. • Deliver training for team leaders developing the Confidence and Skills to Have Challenging and Constructive Discussions with Staff from a Diverse Range of Backgrounds • Introduce and embed a Cultural Change Makers Programme focusing on delivering equality objectives. • Work with the Bradford Teaching Hospitals Foundation Trust on a Rainbow Symbol Campaign. The Rainbow Ribbon will be allocated to staff who pledge their support of the principle from the Stonewall LGB Unhealthy Attitudes Research and BDCFT LGBT Staff Survey.

	Objectives
3.	<p><i>Improve and Explore Data to Support Delivery</i></p> <ul style="list-style-type: none"> • Increase the number of staff completing the Disability and Sexual Orientation sections of ESR. • Request additional analysis of the staff survey data by Sexual Orientation for 2017 from the staff survey provider. Ethnicity, Disability, Gender and Age analysis is already undertaken. • Carry out a review of grievances and disciplinaries to look for differing treatment and/or outcome for staff from other protected characteristic groups and determine actions to address. • Further in-depth review of the impact of Moving Forward on the graduates of the programme and identify any barriers to progression that can be addressed through this work. • Publish the Gender Pay Gap figures and benchmark the data with other comparable Trusts across the country; including analysis of the outcome of any bonus systems identified in the process. • Review starting salaries for staff in areas that have the widest pay gaps to ascertain if there is any issue with gender inequality to address. • Triangulate data collected through incident reporting forms, grievances and disciplinaries, and through Harassment Officers, Freedom to Speak Up Guardians and the Staff Networks to inform priorities, identify hotspots and address bullying, harassment, discrimination and abuse.
4.	<p><i>Reviewing and Improving Policy, Procedure and Process</i></p> <ul style="list-style-type: none"> • Review the recruitment and selection process to enhance equal opportunities and enable positive action. • To continue to deliver Unconscious Bias training as a core part of the recruitment and selection process.
5.	<p><i>Identify and tackle bullying, harassment and abuse of staff that relates to a protected characteristic</i></p> <ul style="list-style-type: none"> • The Trust Board and Senior Leadership Team to provide a narrative to this work that publicly supports the aim to identify and tackle bullying, harassment and abuse of staff related to protected characteristics. • Ensure all staff are aware of the policies that protect staff from bullying, harassment and abuse and tackling it when it occurs. • Support and skill managers to use a resolution approach to these issues to prevent escalation, reduce stress and time that later intervention can create. • Encourage staff to share their experiences so they can be addressed via Freedom to Speak Up Guardians, Harassment Officers and the Culture Conversations. Provide channels that staff can feel confident in using. • Use the data collected across the Trust to identify hotspots in teams for intervention around equality culture change.
6.	<p><i>Monitoring Progress and Emerging Priorities</i></p> <ul style="list-style-type: none"> • To review the data required in the annual reports of the WDES, WRES and Gender Pay Gap

	Objectives
	<p>and adapt the priorities annually.</p> <ul style="list-style-type: none"> • To report on progress against this strategy and these priorities every 6 months to the Trust's Quality and Safety Committee, annually to NHS England and annually to the Trust's commissioners. • Business Units to report progress against the objectives every 6 months at the Business Unit Quality and Safety Governance Groups.

6.0 Communication and Engagement

A critical success factor is the effective communication of this strategy and key objectives both within the Trust and externally to the wider community.

The key messages outlined in the strategy will be shared with staff, service users and the community regularly to keep a focus on this agenda. The aim of that is to ensure the following are understood:

- Why this is an important area for the Trust (the case for change).
- Why the senior leadership team are fully supportive and driving this.
- The benefit of this work to the Trust.
- How staff are feeling about the work and the impact it is having.
- The priorities and actions; including those priorities for services to take up.
- How progress is measured and monitored.
- What has been done to date and how we are building on that for future success

7.0 Monitoring and Review

Progress will be reported and monitored at the Trust's Quality and Safety Committee bi-annually as part of the Equality Delivery System update. This report focuses on delivery of the equality objectives.

An action plan for delivery of this strategy has been developed and is included in appendix 1. In addition annual Workforce Race Equality Standard and Workforce Disability Standard reports will be taken to the Trust Board annually. The findings of that analysis will be shared with services in order for them to adopt their own priorities for change. The WRES and WDES findings and action plan will be submitted to commissioners and NHS England annually. The information will all be published on the BDCFT website Equality and Diversity pages.

The NHS Equality Delivery System (2) grading process will be carried out at least every two years to offer the opportunity for stakeholders¹² to scrutinise performance and input into the performance grading of this work and setting of future priorities.

¹² Stakeholders refers to community and voluntary sector organisations, staff and staff network members, NHS Health Partners, public sector partners and patients and public.

8.0 Timescales, Milestones and Review

The strategy has been developed to run alongside the four year legally required Equality Objectives. As described above the following milestones will be in place:

Monitoring	Timescale
Quality and Safety Committee	March 2018 October 2018 March 2019 October 2019 March 2020 October 2020 March 2021 October 2021
Trust Board	October 2017 October 2018 October 2019 October 2020 October 2021
Equality and Delivery System (2) Panels	December 2017 December 2018 December 2019 December 2020 December 2021

The strategy will be reviewed and refreshed on an annual basis and in light of the development of a new 5 year Organisation Strategy.

9.0 Conclusion

The CQC ‘Equally Outstanding Guide’ for the NHS sets out the clear link between staff feeling respected with equal opportunities and outstanding quality care. Bradford District Care Foundation Trust is striving to be an outstanding care provider and employer. This strategy is an integral part of that journey to outstanding services and care. The Trust is committed to adopting the guidance in the guide and if the strategy is delivered we expect to that staff will say the following about the Trust in three years time:

- Have a leadership committed to equality and human rights.
- Apply “equality and human rights thinking” to quality improvement.

- Develop a culture of staff equality where staff are improvement partners in this work.
- Listen carefully to people using our services, including to their aspirations.
- Be courageous in our approaches to tackling difficult issues.
- Make external links to help us progress this work.¹³

10. Key Documents to read in conjunction with the Equality, Diversity and Inclusion Strategy 2018 – 2021

- Workforce Strategy
- You and Your Care Strategy

¹³ CQC 'Equally Outstanding' 2017