Executive Summary:
This report provides an update on the Workforce Race Equality Standard (WRES) and Workforce Disability Equality Standard (WDES) following preparation of the data for submission to NHS England before the end of August and publication of the data on the BDCFT website by the end of September 2019. The submission of that data is part of the NHS Standard Contract requirements.

This is the first time that the data for WDES has been collected. The data captures the picture of equality for disabled staff within the organisation. The data has highlighted several issues as set out in this report that the Trust will need to address to close the current gaps in experience and perception between disabled and non-disabled staff.

The Workforce Race Equality Standard asks Trusts to measure themselves against 9 metrics to provide a picture of race equality in organisations for staff. This is the fourth year that the data has been collected, submitted, discussed at Trust Board and actioned on. The 2019 data has highlighted areas of improvement since 2018 but also continuing gaps in the experience and perception of staff from ethnic minorities.

The key action responses to the data are detailed in Appendix 1 and a summary of additional actions are captured in section 2.1 for the WDES, and section 3.1 for the WRES. A full breakdown of the analysis is available in appendix 2 and appendix 4.

Recommendations:
That the Board
• Approve the report and its appendices for publishing and submission to commissioners.
• Note that the data was submitted to NHS England in August 2019
• Note that actions relating to the data are included within the Equality, Diversity and Inclusion Workforce Strategy and approve that further updates on the WRES and WDES are reported as part of that report every six months to Board.
• Endorse the proposed actions set out in Appendix 1
• Note the process for communicating the results to staff
Governance/Audit Trail:

### Meetings where this item has previously been discussed (please mark with an X):

<table>
<thead>
<tr>
<th>Audit Committee</th>
<th>Quality &amp; Safety Committee</th>
<th>Remuneration Committee</th>
<th>Finance, Business &amp; Investment Committee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior Leadership Team</td>
<td>Directors</td>
<td>x</td>
<td>Chair of Committee Meetings</td>
</tr>
<tr>
<td>Council of Governors</td>
<td></td>
<td></td>
<td>Mental Health Legislation Committee</td>
</tr>
</tbody>
</table>

### This report supports the achievement of the following strategic aims of the Trust: (please mark those that apply with an X):

- Consolidation of Market Share: being great in our patch **X**
- Manage the impacts of the whole system of reduced health and social care funding: working in partnership to develop cost effective out of hospital services and pathways to support the delivery of sustainable services
- Secure Funding for new or expanded services

### This report supports the achievement of the following Regulatory Requirements: (please mark those that apply with an X):

- **Safe**: People who use our services are protected from abuse and avoidable harm **X**
- **Caring**: Staff involve people who use our services and treat them with compassion, kindness, dignity and respect **X**
- **Responsive**: Services are organised to meet the needs of people who use our services **X**
- **Effective**: Care, treatment and support achieves good outcomes, helps to maintain quality of life for people who use our services and is based on the best available evidence. **X**
- **Well Led**: The leadership, management and governance of the organisation make sure it's providing high-quality care that is based around individual needs, encourages learning and innovation, and promotes an open and fair culture. **X**

**NHSI Single Oversight Framework**

### Equality Impact Assessment:

This work focusses on the three general duties of the Equality Act 2010:

- Enhancing equal opportunities,
- Fostering good community relations between groups and;
- Eliminate discrimination, harassment and victimisation.

With a specific emphasis on the Race and Disability protected characteristics. The WRES and WDES is an equality analysis. Data is collected and analysed for inequalities and actions are developed in response. The process is established within BDCFT to involve staff and stakeholders in the discussion and action planning.

### Freedom of Information:

**Publication Under Freedom of Information Act**

This paper has been made available under the Freedom of Information Act
1.0 Background and Context

The Workforce Race Equality Standard (WRES) and Workforce Disability Equality Standard (WDES) are part of the NHS Standard Contract and support NHS organisations to be compliant with the Equality Act 2010 and the 2017 Regulations. The WRES was launched by NHS England in July 2015 and the Workforce Disability Standard on 2019 with the first submission of data against the new metrics required by the end of August 2019.

The data collected for both standards was submitted via the SDCS NHS Digital database before the deadline. This report outlines the headlines for that submission, the comparison and trends over the past four years where they are possible and the actions that will be and already are embedded into the Equality, Diversity and Inclusion Strategy. The intention is that this report is published as evidence. Publication is a key element of compliance with the Public Sector Duty of the Equality Act 2010.

The implementation of both standards is an Equality Objective for the Trust. The Equality Objectives run from 2016 – 2020 and are a legal requirement under the Public Sector Equality Duty. The 2020 – 2024 Equality Objectives will include ongoing objectives relating to Standard implementation as they are mandated requirements in the NHS Standard Contract.

2.0 NHS Workforce Disability Standard

This new standard aims to decrease the inequality that Disabled staff face within the NHS workforce. The standard is based on the social model of disability. A useful film explaining the model can be found here. https://www.youtube.com/watch?v=0e24rfTZ2CQ.

Under the Equality Act 2010 you are disabled if you have a physical or mental impairment that has a 'substantial' and 'long-term' negative effect on your ability to do normal daily activities. Substantial' is more than minor or trivial, for example, it takes much longer than it usually would to complete a daily task like getting dressed and long-term’ means 12 months or more, for example, a breathing condition that develops as a result of a lung infection.

This is the first time that the data for WDES has been collected and provides the Trust with a picture of equality for Disabled staff within the organisation. As such the data has highlighted several issues that the Trust will need to address. In particular it is worth noting that:

- 2% more Non-Disabled than Disabled staff perceived that the Trust offers equal opportunities for career progression.
- Disability disclosure rates within ESR are low (4%) and work needs to be done to increase the number of staff that feel able to share information about their long term health condition or disability.
- 14.7% fewer Disabled staff feel that their work is valued by the Trust than Non-Disabled staff.
- Disabled staff are more likely to have experienced bullying, harassment or abuse from service users and from staff.
- Disabled staff are more likely to feel pressure to attend work despite feeling unwell to perform their duties.
It is also worth noting that the ESR data for the same reporting period as the WDES shows that 143 staff have shared that they consider themselves to be disabled within their self-service staff record. In the staff survey the questions were answered by 284 disabled staff.

This suggests that a significant number of staff are choosing not to share information about impairments and long-term conditions with their employer but are happy to do so in this anonymous and confidential survey. Bearing in mind that the staff survey was responded to by 1272 staff (45.07%) it is likely that there are more staff who consider themselves to be disabled but do not complete the staff survey.

In staff focus groups disabled staff have spoken consistently about the concern they have about sharing their disability within the organisation. This concern is due to fear of being treated differently, inviting further scrutiny on their capability and performance and attendance record. In addition, the data highlighted that only 78% of Disabled staff feel that reasonable adjustments have been made so that they are able to complete their duties. The support available to staff and new Trust policy to support attendance needs to be promoted to encourage more staff to share their disability or long term condition and access any support that they need, enabling staff with a disability to raise their requirements with their line manager, supported by occupational health as appropriate.

Below is a summary of the WDES activity undertaken to help address issues highlighted in the report. The metric results and detailed actions are included in appendix 1. A detailed report of all the results is included in appendix 2 and a simple infographic outlining the headlines is included in appendix 3.

Summary of key actions undertaken to-date.

- A review of the Supporting Attendance Policy with clear guidance for managers on Reasonable Adjustment processes.
- A system for monitoring the number of capability processes that affect Disabled staff has been established.
- Regular staff focus groups have been held to establish a dialogue with staff about the forthcoming metrics and their experiences of working in the Trust with a disability,
- Benchmarking with NHS Trusts in the region via the NHS Yorkshire and Humber Equality and Diversity Network.
- A review of Disabled parking provision has been carried out by the Estates Team to address the parking issues that Disabled staff reported facing and a process in place to ensure that structures are in place to facilitate Disabled staff discussing their access needs.

3.0 Workforce Race Equality Standard Data

The standard is designed to tackle inequality of experience and under-representation of BAME staff within NHS organisations. As the standard has been in place since 2015 there is national benchmarking data available for some metrics to compare our results with organisations of a similar size and service.

The 2019 data has highlighted the following areas of improvement from last year: -

- There has been a 3.95% increase since 2018 in the number of BAME staff in bands 8a and above.
- There has been a significant improvement in the scores for BAME staff experiencing discrimination from managers, although this is still above the benchmarked national average.
The data also highlighted the following issues:

- The likelihood of White staff being appointed after shortlisting when compared with BAME staff has increased since 2018 from 1.15 in 2018 to 1.71.
- BAME staff are almost twice as likely to enter formal disciplinary processes than White staff.
- BAME staff are more likely to experience harassment, bullying or abuse from service users than in 2018 meaning that the gap has increased.
- The gap between BAME and White staffs’ perception of equal opportunities for career progression is more than double the benchmarked average for similar Trusts.

Actions have been developed to respond to the issues highlighted in the data. Appendix 1 shows the WRES data for 2019 alongside previous years information and the proposed actions to respond to the information. A full breakdown of all the results is included in a separate report in appendix 4 along with a simple infographic in appendix 5.

Summary of Key Actions undertaken to-date.

- Implemented a range of actions to prevent, identify and tackle bullying and harassment; including ensuring that staff know what support is available, measures to tackle issues before they escalate, developing and providing training as a standard offer and targeted training to teams that have concerns.
- Continued to hold staff focus groups, training and workshops about bullying, harassment and discrimination to staff from colleagues, service users, their relatives and the public. The findings from these focus groups have been shared with the Strategic Reference Group and Service Managers along with the recommendations. Escalation of issues not being tackled directed to the COO or appropriate director. A sample report from Low Secure Services is included in Appendix 6.
- Continued to promote and support implementation of the policies that are in place to tackle and prevent bullying and harassment.
- Continued to coordinate and promote the use of the Bullying Harassment Support Officers and expanded the number of trained officers.
- Continued to deliver the Sharing Perspectives Training that enables managers to have conversations about team culture, inclusion and diversity in their teams.
- Worked in partnership with WY Partners on responding to and tackling abuse towards staff from service users in Mental Health settings.
- Undertaken a review of disciplinaries and grievances with subsequent actions that tackle over-representation of mental health staff particularly in bands 2 and 3 and temporary staff entering into those processes who are predominantly BAME staff; actions include a review of the staff bank procedures for performance and disciplinary processes, triaging cases within the HR Team involving Staff Side and Senior Service Managers, regular weekly run downs of all cases, monthly review of all cases with the Head of Equality and her automatic involvement in cases involving BAME staff.
- Development of Moving Forward 2 for launch in April 2020.
- Worked alongside the staff network Chair on WRES metric 5 with other similar Trusts in the region to develop shared approaches to tackling racial abuse from services users.
- Developing a Board Reciprocal Mentoring Programme in the first instance and assess impact for wider roll out.
- Developed and gained SLT approval for a revised Disciplinary Policy that includes a stronger personal responsibility case conference approach to handling disciplinaries where this is appropriate.
4. Communication of Results

The results from the WDES and WRES will be shared widely via the Strategic Reference Group for the Equality, Diversity and Inclusion Workforce Strategy. Service and Directorate leads will be asked to cascade the information and continue holding focus groups to discuss and plan actions within their teams. The infographics will be included in Equality, Diversity and Inclusion newsletters and in e-update. The data will be used alongside the stories and role model case studies throughout the year. A video is also being filmed to celebrate role models, showcase excellence and reflect the importance of equality, diversity and inclusion across the Trust.

5. Implications

Legal and Constitutional
This work is part of the NHS Standard Contract and is of interest to commissioners and NHS England as a result of the links between staff satisfaction and quality of care; particularly of BAME staff. The work addresses the General Duty of the Equality Act 2010 and the Equality Act Regulations 2017 to:

- Eliminate harassment, discrimination and victimisation of protected characteristic groups.
- Foster good community relations between groups and;
- Promote equality of opportunity.

Resource
There needs to be a continued shift from the equality and diversity work being driven by the Human Resources and Organisational Development Directorate led by the Head of Equality (part time role) to local ownership. The next phase of implementation requires services to further progress work to address inequalities identified within their teams through the WRES and WDES data. This work will be led via the EDI Workforce Strategic Reference Group.

Quality and Compliance
The WRES and WDES report and action plans provide evidence of compliance with the Equality Act 2010 and commitment to the principles set out in the CQC ‘Equally Outstanding’ Good Practice Resource1.

To be compliant with the WRES and WDES requirements the Trust needs to submit data annually to NHS England, commissioners and to publish this information online. The data has been submitted within the timescale required; this report once approved will be published and circulated to commissioners for compliance.

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## 6. Risk Issues Identified

<table>
<thead>
<tr>
<th>Risk</th>
<th>Likelihood High/Medium/Low</th>
<th>Implication</th>
<th>Mitigation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not meeting the requirements for compliance outlined above.</td>
<td>Low</td>
<td>The Trust is in breach of the WRES and WDES requirements and the General Duties of the Equality Act 2010.</td>
<td>Publication is planned once the report has been to Trust Board.</td>
</tr>
<tr>
<td>Employment Tribunal claim for discrimination.</td>
<td>Medium</td>
<td>The cost of a tribunal claim financially and reputational. The impact on staff morale.</td>
<td>The organisation is committed to the WRES and WDES work stream. An action plan is in place based upon the data and issues it identifies. Staff are being engaged in that work. Policies and procedures are in place for tackling discrimination.</td>
</tr>
</tbody>
</table>

## 7. Communication and Involvement

Staff will continue to be engaged in this important agenda via focus groups which are well established to talk to staff about the staff survey findings, WRES and WDES data. In addition, crowdsourcing campaigns and poster campaigns will be used throughout the year to promote and seek feedback on various equality strands.

The above will continue and run alongside the Strategic Reference Group for the Equality, Diversity and Workforce Strategy Group which is Chaired by Sandra Knight Human Resources and Organisational Development Director.

## 7. Monitoring and review

The ongoing monitoring of this work happens through the bi-annual EDS (2) update at Quality and Safety Committee. A bi-annual review of progress against the EDI Workforce Strategy will come to Trust Board in October 2019. The objectives and actions within the Equality, Diversity and Inclusion Workforce Strategy will be reviewed at the Equality, Diversity and Inclusion Strategic Reference Group.

## 8. Timescales/Milestones

The 2019 WRES and WDES data was submitted by the 1<sup>st</sup> August 2019 deadline.