Ri appendix 1

Leicestershire Partnership NHS Trust

Trust Board 27 October 2020

Workforce Race Equality Standard Metrics Report 2019/20

Appendix 1

Workforce Race Equality Standard

Leicestershire Partnership NHS Trust

March 2020

Detailed report with narrative

Introduction to the Workforce Race Equality Standard

Research over the past two decades and longer indicates that the NHS treats black and minority ethnic (BME) staff less favourably in their recruitment, promotion, discipline and career progression. In 2014, the NHS Equality and Diversity Council agreed action to ensure employees from BME backgrounds have equal access to career opportunities and receive fair treatment in the workplace. The Workforce Race Equality Standard (WRES) was mandated through the NHS standard contract from 2015/16.

The WRES comprises nine specific metrics to compare the profile and experiences of BME and White staff within an NHS organisation. The purpose of the metrics is to inform a local action plan that will target specific areas within a given organisation where the treatment or experience of BME staff is poor. The WRES metrics will also enable the organisation to demonstrate progress in areas where the treatment of BME staff needs to improve; and facilitate challenge where progress is not being made.

NHS Trusts are required to submit WRES data centrally, to NHS England, by the end of August. An action plan and the metrics must be ratified by the Trust's Board and must be published on the Trust's website by the end of October.

The WRES metrics

Metric 1. Pay Bands

Description of metric 1:

- The percentage of BME staff in each of the Agenda for Change Pay Bands 1 to 9 and VSM (including executive Board members) compared with the percentage of BME staff in the overall workforce, calculated separately for non-clinical and for clinical staff.

Narrative for metric 1:

- At March 2020, BME staff made up 23.5% of Leicestershire Partnership NHS Trust's (LPT) substantive workforce of known ethnicity (1221/5203).

- This represents a significant increase over the past three years, from 21.8% BME staff observed at March 2018 (1116/5127), through 22.6% BME staff at March 2019 (1171/5178); part of a long-term trend for year-on-year increases in the percentage of BME staff in the substantive workforce from 16.6% (924/5564) at March 2012.

- Ethnicity was known (declared on the Electronic Staff Record) for 97.6% of the substantive workforce at March 2020 (5203/5329). Thus, there were 126 staff for whom ethnicity was not known.

- Non-clinical:
    - BME people were overrepresented at Band 2 (33.1%, 86/260). This largely reflected an overrepresentation of Asian British people in lower-level Administrative roles.
    - BME people were proportionately represented from Band 3 (32.7%, 88/269) to Band 8a (27.6%, 16/58).
    - There was a significant drop in BME representation at Band 8b (11.9%, 5/42), with low levels of representation from Band 8b to Very Senior Manager level in general (9.5%, 7/74).

- Clinical:
    - Bands 2 to 4 (essentially Additional Clinical Services):
        - BME people were overrepresented at the lowest pay band, band 2 (36.8%, 193/525), and were underrepresented at higher bands, bands 3 and 4 (15.1%, 111/734). This was especially the case for Black British staff.
    - Bands 5 and above (primarily Registered Nurses):
        - BME people were proportionately represented at band 5 (22.0%, 162/735), and were underrepresented at higher bands, bands 6 and above (14.9%, 264/1773). This was especially the case for Black British staff.
    - Medical:
        - BME staff were overrepresented in Medical roles (64.0%, 128/200), particularly Asian British staff. This reflected occupational segregation, with Asian British staff underrepresented in Registered Nursing roles.

- The pattern of distribution of BME staff by pay band across the workforce has changed little over the period March 2018 to March 2020, or indeed over the longer term.

- The WRES does not consider staff who work solely on the Bank for LPT (i.e., staff who work for LPT on a zero-hours contract and who do not have a substantive role with the Trust):
    - Bank staff are more likely to come from a BME background (46.1% BME, 543/1007) than substantive staff (23.5% BME, 1221/5203).
    - Bank staff typically work at lower pay bands than substantive staff (72.5% of Bank staff are at band 4 and below, 756/1043, whilst 38.4% of Substantive staff are at band 4 and below, 2047/5329 – figures include staff of unknown ethnicity).
    - Consequently, the WRES underestimates the percentage of BME staff in LPT's overall workforce, especially at lower pay bands.

- The ethnicity profile of substantive staff at Leicestershire Partnership NHS Trust, by individual pay band, at March 2018, March 2019, and March 2020 is detailed in Table 1, to the standard WRES specification. A summarised version of this information is given in Table 2, with pay bands grouped to convey the principle trends observed.

Table 1: Metric 1: The ethnicity profile of substantive staff at Leicestershire Partnership NHS Trust, by pay band, at March 2018, March 2019, and March 2020

Table in 7 columns by 31 rows (including header row)

Pay Band	Percentage BME staff March 2018	Percentage BME staff March 2019	Percentage BME staff March 2020	Number of BME staff March 2018	Number of BME staff March 2019	Number of BME staff March 2020
Substantive Staff Overall	21.8%	22.6%	**23.5%**	1116 out of 5127	1171 out of 5178	**1221 out of 5203**
Non-clinical Band 1	66.7%	53.3%	**40.0%**	8 out of 12	8 out of 15	**4 out of 10**
Non-clinical Band 2	34.6%	34.0%	**33.1%**	91 out of 263	90 out of 265	**86 out of 260**
Non-clinical Band 3	32.6%	32.2%	**32.7%**	90 out of 276	96 out of 298	**88 out of 269**
Non-clinical Band 4	22.7%	25.3%	**28.3%**	44 out of 194	49 out of 194	**54 out of 191**
Non-clinical Band 5	29.5%	31.7%	**30.3%**	39 out of 132	46 out of 145	**43 out of 142**
Non-clinical Band 6	28.6%	28.8%	**30.1%**	28 out of 98	30 out of 104	**34 out of 113**
Non-clinical Band 7	26.0%	29.1%	**27.3%**	27 out of 104	30 out of 103	**27 out of 99**
Non-clinical Band 8a	24.0%	25.5%	**27.6%**	12 out of 50	14 out of 55	**16 out of 58**
Non-clinical Band 8b	5.3%	5.3%	**11.9%**	2 out of 38	2 out of 38	**5 out of 42**
Non-clinical Band 8c	11.1%	9.5%	**11.1%**	2 out of 18	2 out of 21	**2 out of 18**
Non-clinical Band 8d	12.5%	0.0%	**0.0%**	1 out of 8	0 out of 9	**0 out of 9**
Non-clinical Band 9	0.0%	0.0%	**0.0%**	0 out of 1	0 out of 1	**0 out of 1**
Non-clinical VSM	0.0%	0.0%	**0.0%**	0 out of 5	0 out of 6	**0 out of 4**
Clinical Band 1	40.0%	26.1%	**20.0%**	2 out of 5	6 out of 23	**4 out of 20**
Clinical Band 2	31.3%	31.3%	**36.8%**	151 out of 483	155 out of 496	**193 out of 525**
Clinical Band 3	13.3%	16.2%	**16.5%**	63 out of 472	76 out of 468	**80 out of 485**
Clinical Band 4	11.5%	12.7%	**12.4%**	24 out of 209	29 out of 229	**31 out of 249**
Clinical Band 5	22.8%	22.9%	**22.0%**	188 out of 826	179 out of 782	**162 out of 735**
Clinical Band 6	13.1%	15.1%	**16.1%**	144 out of 1097	167 out of 1107	**181 out of 1125**
Clinical Band 7	10.8%	11.8%	**13.9%**	44 out of 409	48 out of 406	**57 out of 411**
Clinical Band 8a	10.9%	10.4%	**10.2%**	16 out of 147	15 out of 144	**16 out of 157**
Clinical Band 8b	16.7%	19.0%	**13.3%**	10 out of 60	11 out of 58	**8 out of 60**
Clinical Band 8c	7.1%	7.1%	**7.1%**	1 out of 14	1 out of 14	**1 out of 14**
Clinical Band 8d	16.7%	20.0%	**20.0%**	1 out of 6	1 out of 5	**1 out of 5**
Clinical VSM	no staff	no staff	**0.0%**	no staff	no staff	**0 out of 1**
Medical Trainee Grade	67.9%	58.2%	**66.2%**	38 out of 56	32 out of 55	**43 out of 65**
Medical Non-consultant	50.0%	48.0%	**47.6%**	16 out of 32	12 out of 25	**10 out of 21**
Medical Consultant	65.1%	64.2%	**66.1%**	71 out of 109	70 out of 109	**72 out of 109**
Medical Senior Manager	100.0%	66.7%	**60.0%**	3 out of 3	2 out of 3	**3 out of 5**

Key to colour coding in table: ● BME staff overrepresented, O BME staff proportionately represented, ● BME staff underrepresented

Table 2: Metric 1: The ethnicity profile of substantive staff at Leicestershire Partnership NHS Trust, by grouped pay bands, at March 2018, March 2019, and March 2020

Table in 7 columns by 8 rows (including header row)

Pay Band Group	Percentage BME staff March 2018	Percentage BME staff March 2019	Percentage BME staff March 2020	Number of BME staff March 2018	Number of BME staff March 2019	Number of BME staff March 2020
Substantive Staff Overall	21.8%	22.6%	**23.5%**	1116 out of 5127	1171 out of 5178	**1221 out of 5203**
Non-clinical Bands 2 to 8a	29.6%	30.5%	**30.7%**	331 out of 1117	355 out of 1164	**348 out of 1132**
Non-clinical Bands 8b to VSM	7.1%	5.3%	**9.5%**	5 out of 70	4 out of 75	**7 out of 74**
Clinical Band 2	31.3%	31.3%	**36.8%**	151 out of 483	155 out of 496	**193 out of 525**
Clinical Bands 3 to 4	12.8%	15.1%	**15.1%**	87 out of 681	105 out of 697	**111 out of 734**
Clinical Band 5	22.8%	22.9%	**22.0%**	188 out of 826	179 out of 782	**162 out of 735**
Clinical Bands 6 to VSM	12.5%	14.0%	**14.9%**	216 out of 1733	243 out of 1734	**264 out of 1773**

Key to colour coding in table: ● BME staff overrepresented, O BME staff proportionately represented, ● BME staff underrepresented

Metric 2. Recruitment

Description of metric 2:

- Relative likelihood of White people compared to BME people being appointed from shortlisting across all posts. The percentage of White people appointed from shortlisting divided by the percentage of BME people appointed from shortlisting.

Narrative for metric 2:

- In 2019/20 White people and BME people were similarly likely to be appointed from amongst those shortlisted (White people were 1.14 times as likely as BME people to be appointed from shortlisting).

- This represents an improvement in the positions observed in 2017/18 and 2018/19 when White people were 1.33 and 1.97 times more likely than BME people to be appointed from shortlisting, respectively by year. Please refer to Table 3.

Table 3: Metric 2: The relative likelihood of White people and BME people being appointed from amongst those shortlisted at Leicestershire Partnership NHS Trust during 2017/18, 2018/19, and 2019/20

Table in 4 columns by 6 rows (including header row)

Recruitment	**2017/18**	**2018/19**	**2019/20**
Relative likelihood of appointment from shortlisting (White/BME)	1.33	1.97	**1.14**
Percentage of White people appointed from shortlisting	10.5%	9.7%	**11.3%**
Percentage of BME people appointed from shortlisting	7.9%	4.9%	**10.0%**
Number of White people appointed from shortlisting	342 out of 3253	371 out of 3844	**341 out of 3005**
Number of BME people appointed from shortlisting	160 out of 2018	124 out of 2525	**186 out of 1861**

Key to colour coding in table: ● BME people disadvantaged

Metric 3. Formal disciplinary process

Description of metric 3:

- Relative likelihood of BME staff compared to White staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation, based on data from the most recent two-year rolling average. The percentage of BME staff entering the formal disciplinary process divided by the percentage of White staff entering the formal disciplinary process.

Narrative for metric 3:

- In the two-year window 2018/19 to 2019/20, BME staff and White staff were similarly likely to enter formal disciplinary proceedings (BME staff were 0.59 times as likely as White staff to enter formal disciplinary proceedings).

- This represents an improvement in the position observed two years ago, in the two-year window 2016/17 to 2017/18, when BME staff were 1.92 times more likely than White staff to enter formal disciplinary proceedings.

- This indicator is liable to vary to a large degree year-on-year due to the relatively small number formal disciplinary proceedings (even when aggregated across a two-year window). Please refer to Table 4. For reference, in the two-year windows to March 2016 and March 2017, the relative likelihoods were close to 1 (1.19 and 1.17 respectively).

- The official WRES statistics do not consider Bank staff. A supplementary analysis of formal disciplinary proceedings amongst Bank staff for the one-year period 2019/20 indicated that BME bank staff were 2.55 times more likely than White bank staff to enter formal disciplinary proceedings.

Table 4: Metric 3: The relative likelihood of BME staff and White staff entering the formal disciplinary process at Leicestershire Partnership NHS Trust during the two-year windows 2016/17 to 2017/18, 2017/18 to 2018/19, and 2018/19 to 2019/20

Table in 4 columns by 6 rows (including header row)

Formal disciplinary process	**2016/17 to 2017/18**	**2017/18 to 2018/19**	**2018/19 to 2019/20**
Relative likelihood of entering the formal disciplinary process (BME/White)	1.92	1.35	**0.59**
Percentage of BME staff entering the formal disciplinary process	1.4%	1.5%	**0.8%**
Percentage of White staff entering the formal disciplinary process	0.7%	1.1%	**1.4%**
Number of BME staff entering the formal disciplinary process	16 out of 1116	17 out of 1171	**10 out of 1221**
Number of White staff entering the formal disciplinary process	30 out of 4011	43 out of 4007	**55 out of 3982**

Key to colour coding in table: ● BME staff disadvantaged

Metric 4. Non-mandatory training

Description of metric 4:

- Relative likelihood of White staff compared to BME staff accessing non-mandatory training and CPD. The percentage of White staff accessing non-mandatory training divided by the percentage of BME staff accessing non-mandatory training.

Narrative for metric 4:

- In 2019/20 White staff were more likely than BME staff to access non-mandatory training (White staff were 1.10 times more likely than BME staff to access non-mandatory training).

- This represents a deterioration of the positions observed in 2017/18 and 2018/19 when White staff were 1.05 and 1.09 times as likely as BME staff to access non-mandatory training, respectively by year. Please refer to Table 5.

- In particular, White staff were more likely than Asian British staff (1.16 times more likely) to access non-mandatory training, reflecting occupational segregation in the workforce. White staff were overrepresented in Registered Nursing roles, where non-mandatory training was more common, whilst Asian British staff were overrepresented in Administrative and Clerical roles where non-mandatory training was less common. Nonetheless, the overall levels of those accessing non-mandatory training increased in 2019/20 for both White and BME staff.

Table 5: Metric 4: The relative likelihood of White staff and BME staff accessing non-mandatory training and CPD during 2017/18, 2018/19, and 2019/20

Table in 4 columns by 6 rows (including header row)

Non-mandatory training	**2017/18**	**2018/19**	**2019/20**
Relative likelihood of accessing non-mandatory training (White/BME)	1.05	1.09	**1.10**
Percentage of White staff accessing non-mandatory training	62.3%	61.7%	**80.4%**
Percentage of BME staff accessing non-mandatory training	59.1%	56.8%	**73.2%**
Number of White staff accessing non-mandatory training	2497 out of 4011	2473 out of 4007	**3203 out of 3982**
Number of BME staff accessing non-mandatory training	660 out of 1116	665 out of 1171	**894 out of 1221**

Key to colour coding in table: ● BME staff disadvantaged

Metric 5. Harassment, bullying or abuse from patients, relatives or the public

Description of metric 5:

- The percentages of White staff and BME staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months, derived from the NHS Staff Survey.

Narrative for metric 5:

- The 2019 NHS Staff Survey indicated that White staff and BME staff were similarly likely to suffer harassment, bullying or abuse from patients / service users, their relatives or other members of the public (22.9%, 429/1876 White staff and 23.4%, 102/435 BME staff).

- However, Black British staff in particular were more likely than White staff to suffer this type of harassment, bullying or abuse (39.5%, 34/86). Pease refer to Table 6. This may reflect that Black British staff are overrepresented in frontline clinical roles, including Additional Clinical Services and Registered Nursing.

- In 2017 and 2018, the levels of harassment, bullying or abuse from patients / service users, their relatives or other members of the public suffered by Black British staff (33.3% and 35.5% respectively, by year) were more similar to those suffered by White staff (23.1% and 24.7% respectively, by year). However, looking further back, in 2015 and 2016 the levels of this type of harassment, bullying or abuse suffered by Black British staff were elevated (at 47.0% and 47.2% respectively by year, compared to 27.5% and 26.1% for White staff). This indicates a long-term trend for Black British staff to be at a greater risk of harassment, bullying or abuse from patients / service users, their relatives or other members of the public.

- The NHS Staff Survey goes only to substantive staff. LPT conducts its own survey of bank staff (The Big Bank Survey). For reference, levels of harassment, bullying or abuse from patients / service users, their relatives or other members of the public were higher amongst BME bank staff in general, (59.38%, 76/128), and Black British bank staff in particular (67.47%, 56/83), than amongst White bank staff (38.84%, 47/121).

Table 6: Metric 5: The percentages of White staff and BME staff who experienced harassment, bullying or abuse from patients / service users, their relatives or other members of the public, Staff Survey 2017, Staff Survey 2018, Staff Survey 2019

Table in 4 columns by 7 rows (including header row)

Harassment, bullying or abuse from patients, relatives or the public	**2017**	**2018**	**2019**
Percentage White staff	24.7%	23.1%	**22.9%**
Percentage BME staff	23.0%	24.0%	**23.4%**
Percentage Black British staff	35.5%	33.3%	**39.5%**
Number White staff	439 out of 1780	460 out of 1991	**429 out of 1876**
Number BME staff	87 out of 379	117 out of 488	**102 out of 435**
Number Black British staff	22 out of 62	27 out of 81	**34 out of 86**

Key to colour coding in table: ● BME staff disadvantaged

Metric 6. Harassment, bullying or abuse from other staff

Description of metric 6:

- The percentages of White staff and BME staff experiencing harassment, bullying or abuse from other staff in last 12 months, derived from the NHS Staff Survey.

Narrative for metric 6:

- The 2019 NHS Staff Survey indicated that BME staff were more likely than White staff to suffer harassment, bullying or abuse from other staff (24.4%, 107/438 BME staff and 19.9%, 373/1879 White staff). This represents a deterioration of the position for BME staff compared to 2017 and 2018 (18.5% and 20.1% respectively, by year). Pease refer to Table 7.

- The levels of harassment, bullying or abuse from other staff suffered by Black British staff (27.7%, 23/83 Black British staff in 2019) have been elevated over the long-term (32.9% in 2018, 32.8% in 2017, 16.9% in 2016, and 26.8% in 2015)*.

- The NHS Staff Survey goes only to substantive staff. LPT conducts its own survey of bank staff (The Big Bank Survey). For reference, levels of harassment, bullying or abuse from other staff were higher amongst BME bank staff in general (52.3%, 67/128), and Black British bank staff in particular (65.1%, 54/83), than amongst White bank staff (24.8%, 30/121).

Table 7: Metric 6: The percentages of White staff and BME staff who experienced harassment, bullying or abuse from other staff, Staff Survey 2017, Staff Survey 2018, Staff Survey 2019

Table in 4 columns by 7 rows (including header row)

Harassment, bullying or abuse from other staff	**2017**	**2018**	**2019**
Percentage White staff	19.7%	18.8%	**19.9%**
Percentage BME staff	18.5%	20.1%	**24.4%**
Percentage Black British staff*	32.8%	32.9%	**27.7%**
Number White staff	351 out of 1784	374 out of 1994	**373 out of 1879**
Number BME staff	70 out of 378	98 out of 487	**107 out of 438**
Number Black British staff*	20 out of 61	27 out of 82	**23 out of 83**

Key to colour coding in table: ● BME staff disadvantaged

* Levels of harassment, bullying or abuse from other staff are underestimated for Black British staff relative to White staff and relative to the pooled BME group. This is because the figures for White and BME staff come from the official WRES statistics which are calculated for NHS England's WRES Team to reflect harassment, bullying or abuse from *all* staff. This is done by combining responses to two questions from the NHS Staff Survey at the individual respondent level. One question relates to harassment, bullying or abuse from managers, and the other to harassment, bullying or abuse from other colleagues. Meanwhile figures for Black British staff are derived locally from summary data. It is not possible to gain a combined figure for harassment, bullying or abuse from *all* staff from these summary data. Consequently, the levels of harassment, bullying or abuse reported for Black British staff relate to that from other colleagues only (not managers).

Metric 7. Equal opportunities for career progression or promotion

Description of metric 7:

- The percentages of White staff and BME staff believing that the Trust provides equal opportunities for career progression or promotion, derived from the NHS Staff Survey.

Narrative for metric 7:

- The 2019 NHS Staff Survey indicated that BME staff, and especially Black British staff, were less likely than White staff to believe that the Trust provides equal opportunities for career progression or promotion (68.4%, 193/282 BME staff, 55.4%, 31/56 Black British staff, and 88.0%, 1145/1301 White staff).

- There has been a deterioration of the position for White staff compared to 2017 and 2018 (90.6% and 90.7% respectively, by year). Meanwhile, the position for BME staff has remained low across 2017 and 2018 (72.7% and 75.3% respectively, by year), as has the position for Black British staff in particular (57.5% and 55.8% respectively, by year). Pease refer to Table 8.

- The NHS Staff Survey goes only to substantive staff. LPT conducts its own survey of bank staff (The Big Bank Survey). For reference, belief that the Trust provides equal opportunities for career progression or promotion was lower amongst BME bank staff in general (49.4%, 43/87), and Black British bank staff in particular (47.3%, 26/55), than amongst White bank staff (75.0%, 54/72).

Table 8: Metric 7. The percentages of White staff and BME staff who felt that the organisation provides equal opportunities for career progression or promotion, Staff Survey 2017, Staff Survey 2018, Staff Survey 2019

Table in 4 columns by 7 rows (including header row)

Equal opportunities for career progression or promotion	2017	2018	2019
Percentage White staff	90.6%	90.7%	**88.0%**
Percentage BME staff	72.7%	75.3%	**68.4%**
Percentage Black British staff	57.5%	55.8%	**55.4%**
Number White staff	1172 out of 1293	1310 out of 1444	**1145 out of 1301**
Number BME staff	186 out of 256	244 out of 324	**193 out of 282**
Number Black British staff	23 out of 40	29 out of 52	**31 out of 56**

Key to colour coding in table: ● BME staff disadvantaged

Metric 8. Discrimination at work from a manager, team leader or other colleagues

Description of metric 8:

- The percentages of White staff and BME staff experiencing discrimination at work from their manager / team leader or other colleagues in last 12 months, derived from the NHS Staff Survey.

Narrative for metric 8:

- The 2019 NHS Staff Survey indicated that BME staff, and especially Black British staff, were more likely than White staff to have experienced discrimination at work from their manager / team leader or other colleagues (13.1%, 57/434 BME staff, 17.6%, 15/85 Black British staff, and 5.8%, 108/1863 White staff).

- There has been a deterioration in the position for White staff compared to 2018 (4.3%). Meanwhile, the position for BME staff has remained elevated across 2017 and 2018 (10.3% 10.8% respectively, by year), as has the position for Black British staff in particular (16.7% and 16.9% respectively, by year). Pease refer to Table 8.

- The NHS Staff Survey goes only to substantive staff. LPT conducts its own survey of bank staff (The Big Bank Survey). For reference, levels of discrimination at work from a manager / team leader or other colleagues were higher amongst BME bank staff in general (41.4%, 53/128), and Black British bank staff in particular (49.4%, 41/83), than amongst White bank staff (16.5%, 20/121).

Table 9: Metric 8: The percentages of White staff and BME staff who experienced discrimination at work from their manager / team leader or other colleagues in last 12 months, Staff Survey 2017, Staff Survey 2018, Staff Survey 2019

Table in 4 columns by 7 rows (including header row)

Discrimination at work from a manager / team leader or other colleagues	**2017**	**2018**	**2019**
Percentage White staff	5.7%	4.3%	**5.8%**
Percentage BME staff	10.3%	10.8%	**13.1%**
Percentage Black British staff	16.7%	16.9%	**17.6%**
Number White staff	102 out of 1777	85 out of 1987	**108 out of 1863**
Number BME staff	39 out of 378	52 out of 481	**57 out of 434**
Number Black British staff	10 out of 60	13 out of 77	**15 out of 85**

Key to colour coding in table: ● BME staff disadvantaged

Metric 9. Board representation

Description of metric 9:

- Percentage difference between BME representation in the organisation's Board membership and the organisation's overall workforce, disaggregated by the Board's voting membership and executive membership.

Narrative for metric 9:

- At March 2020, compared to the level of representation in the workforce overall, BME people were underrepresented
    - amongst board members overall (-17.6% difference in representation),
    - amongst voting board members (-14.4% difference in representation),
    - and amongst executive board members (-23.5% difference in representation).
    - Please refer to Table 10.

- It is noted that in June 2020 a BME person joined the board as an executive director. Consequently, the board's executive membership will be broadly representative of the overall workforce in terms of BME representation.

Table 10: Metric 9. Differences in the levels of representation of BME people amongst board members (overall, voting members, and executives), relative to the level of representation of BME people in the workforce overall, at March 2018, at March 2019, and at March 2020

Table in 4 columns by 5 rows (including header row)

Board representation	March 2018	March 2019	March 2020
Percentage BME in the substantive workforce overall	21.8%	22.6%	**23.5%**
Difference between percentage BME amongst all board members and the substantive workforce overall	-12.7%	-15.5%	**-17.6%**
Difference between percentage BME amongst voting board members and the substantive workforce overall	-10.7%	-13.5%	**-14.4%**
Difference between percentage BME amongst executive board members and the substantive workforce overall	-1.8%	-22.6%	**-23.5%**

Key to colour coding in table: ● BME people underrepresented

Appendix 2

Leicestershire Partnership Trust

Draft WRES Action Plan 2020/21

1. Ensure Recruitment and Selection processes are free from bias

Priority	Action	Lead	By When	Milestone	Progress	RAG
1	Ensure that all interview panels are ethnically diverse	Directors	October 2020	• Recommence data monitoring reports to EDI Group (July 2020) • Ensure Directorates have a ready pool of BAME staff to involve in recruitment process	Diverse interview Panels were mandated from January 2020. Communications on this approach was started in May 2019. 2020 WRES data shows LPT Recruitment processes are fair with no disproportionate impact on the appointment of BAME candidates. However, this position needs to be sustained and improvements evidenced in the appointment of BAME candidates at very senior levels (8b and above) requires improvement.	A

2. Ensure that BAME staff are benefiting from career progression and development

Priority	Action	Lead	By When	Milestone	Progress	RAG
1	Establish on-merit fast-track career pathways for BAME	Head of OD and Head of EDI	December 2020	• Develop On-Merit plan aligning to LPT, regional and national	Head of EDI exploring what is available regionally and nationally in	B

	staff in to senior positions			Talent Management strategies September 2020 • Launch programme December 2020	order that talent management strategies are aligned. Also exploring what has worked and what needs to be done differently to guarantee career progression that is impactful.	
1	Interview Skills Training	Head of EDI/OD Practitioner	September 2020	• Interview skills training package already developed (May 2019) • Establish MS Teams sessions for BAME staff (September 2020)	The interview skills workshop has already been developed in 2019. 1 session was delivered to a very small cohort. It is hoped that more will be able to join the on-line training once this is available from September onwards.	A

3. Create a culturally inclusive organisation for all

Priority	Action	Lead	By When	Milestone	Progress	RAG
1	Develop a timetable of Listening events with specific themes and topics in consultation with BAME staff they would like to discuss with the Executive Team	Head of EDI	September 2020	• Discuss topic areas at BAME SSG (July 2020) • Develop timetable and schedule in meetings in line with Executive Team availability	4 Trust-wide Listening Events have taken place. Staff have requested more localised sessions at Directorate level which are being planned.	A
2	Deliver "on-demand" unconscious bias training	Equality Co-Ordinator	December 2020 onwards	• Promote training through coms on an ongoing basis (January 2020) • Report number of sessions and evaluation feedback to EDI Workforce Group January 2020	6 LPT sessions have been delivered during 2019 with good feedback.	A
1	Recommence successful Race and Cultural Intelligence Training to all line-managers	EDI Lead	August 2019	• Develop approach for virtual delivery (July 2020) • Commence August 2020	The Race and Cultural Understanding Training was agreed as "role essential" for leadership and has been available to book since January	A

					2020. 122 managers attended by the end of February. However, all training was put on hold during Lockdown. This training will recommence in August with dates available throughout 2020/21.	
1	Develop and promote psychological support for BAME staff as a response to Covid19/Black Lives Matter and emerging mental health concerns	BAME SSG Chair	September 2020	• Agree working group to take forward model of "Trauma informed care" targeted at BAME staff (August 2020) • Present options to Health and well-being and EDI Groups (September 2020)	LPT service has been developed. One of the BAME SSG members is involved in delivering the service and is going to provide the SSG with advice and support on how to access the services and other resources at the September 2020 meeting.	A
1	Develop a business case for securing resources to support the BAME SSG agenda	Head of EDI	August 2020	• Development of business case (July 2020) • Agree with BAME SSG (August 2020) • Approval sought from QAC (August 2020)	Business case has been drafted and at first stage of consultation.	A
1	Support the delivery of WRES Culture Change Programme	Head of EDI	August 2020 onwards	• Meeting with WRES to explore areas for progression (August 2020) • Establishment of action plan (November 2020) • Delivery of programme (December 2020 – March 2020)	WRES Team met with Trust board at its development day on 4th August. Focus groups with BAME colleagues being established.	A
1	Launch 2nd Cohort Reverse Mentoring Programme	Head of EDI	November 2020	• Develop resources for second cohort of reverse mentoring programme (October 2020) • Launch application process (November 2020) • Provide Training December	Head of EDI to lead system wide LLR programme. Project Team and plan is in the process of development. Much of the Teaching Resources are available from previous programme.	A

				2020) • Commence 2nd cohort of reverse mentoring from January 2020		
1	Participate in LLR System wide Cultural Competency Masterclassses run by Above Difference (30 places available across LLR)	Head of EDI	November 2020	• Face to Face training to be delivered in socially distanced setting (November 2020)	HE funding secured. This Masterclass includes a 360 cultural competency assessment followed by a full day Masterclass aimed at EDI Leads and Board level Leadership.	A

Table Key: Blue: not started Red : concerns / not on track Amber : action is on track Green: action is complete.