# Workforce Race Equality Standard Delivery Plan 2021-2025

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| **Objective**  | **Action**  | **Accountable Officer** | **Timescales**  | **Metric** | **NHS People Plan Theme** | **Matrix RAG Rating**  |
| 1.Embed EDI interventions into the recruitment process 2.Ensure that the development of the UHL Employer Brand includes the integration of EDI3.Ensure that our Executive Search and Recruitment Partners are supporting the Trust to fulfil its EDI ambitions4.Develop and roll-out an equality information disclosure campaign5. Develop of EDI data dashboard | * Undertake a review of the recruitment process to ensure mitigation of racial bias
* Diversifying Leadership Development roll-out –(inclusive of cultural intelligence diagnostic) Programme roll-out to all ESMs
* Develop role description for Equality Representative and integrate this role and the escalation process into existing practice
* Ensure that key employer brand messaging and imagery is racially inclusive
* Racial diversity workforce ambitions to be reflected in contractual relationship with Executive Search and Recruitment Agencies
* Encourage disclosure of ethnicity status through awareness campaign
* Development of a workforce dashboard which will include the following:
* UHL (Trust / CMG / Corp Directorate / Service level) Recruitment rates by ethnicity i.e. those who applied / shortlisted / appointed by ethnicity
* Staff survey data (Trust / CMG / Corp. Dir. levels)
* Attrition rates by ethnicity
* Demographic data by band and ethnicity
* Ethnicity pay gap information
* Exit interview data by to use the talent and ethnicity
 | Head of Recruitment / Head of EDI / Head of People ServicesHead of Recruitment / Head of EDI / Head of People ServicesHead of Recruitment / Head of EDI / Head of People ServicesHead of People Services / Head of EDI / Head of CommsHead of Recruitment / Head of EDI / Head of People ServicesHead of People Services / Head of EDI / Head of CommsHead of EDI / Workforce Development Manager | TBCTBCTBCTBCTBCTBCTBC | **Metric 1:** Percentage of staff in each of the AfC Bands 1-9 and VSM (includingExecutive Board members) compared with the percentage of staff in the overall workforce. Organisations shouldundertake this calculation separately for non-clinical and for clinical staff**UHL Outcomes** **2020/21 -** Non Clinical Staff Higher than Overall % in Band under 1 and Band 2Clinical Staff Higher than Overall % in Bands Under 1, 1, 3 and 5 and all medical grades with the exception of Medical Other*2.3%* improvement at non clinical Band 8b, 8.3% improvement at clinical Band 9 but based on low numbers16.7% deterioration at non clinical Band 9 (from 5:1 to 11:0 –movement of 1 to system VSM post) and 6.5% deterioration at non clinical VSM (14:3 to 16:2)4.2% improvement in representation at clinical Band 5 | **Growing for the Future**  | **4** |
| 6. Explore proportionate use the ‘Equal Merit Principle’ in recruitment and selection7. Ensure our recruitment panels have diverse representation8. Ensure that all recruitment panels incorporate a UHL EDI statement in to assessment processes with a commitment to mitigate and minimise bias within their decision-making | * Identify areas to target section 159 positive action measures in the recruitment and promotion process with respect to race

 * Ensure where practicable, there is racial diversity on recruitment panels
* Design and launch a bias development module and online toolkit for leaders and managers Inclusive of ‘racial’ bias content
 | Head of EDI / Head of Recruitment / Head of People ServicesChairs of recruitment panels/People PartnersHead of EDI / Head of People Services OD | TBCTBCTBC | **Metric 2:**Relative likelihood of staff being appointed from shortlisting across all posts.**UHL Outcomes**For all ethnicity categories there has been a decrease in the percentage likelihood of appointment from shortlisting.**2018/19** - 24.4% of white applicants were appointed from shortlisting, 2019/20 - 21.06% are likely**2018/19** 13.53% of BAME applicants were appointed from shortlisting , 2019/20 – 11.64% are likelyThe relative likelihood of appointing white applicants from shortlisting for 2020 is 1.81 compared to 1.80 last year**2019/20** - 21.06% of white applicants were likely to be appointed from shortlisting 2020/21 27.07% of white applicants were likely11.64% of BAME applicants are likely to be appointed from shortlisting **2020/21** - For all ethnicity categories there has been an increase in the percentage likelihood of appointment from shortlisting.16.16% of BAME applicants are likely to be appointed from shortlistingThe relative likelihood of appointing white applicants from shortlisting for 2021 is 1.67 compared to 1.81 last year | **Growing for the Future**  | **1** |
| 8.Develop and Implement the Inclusive Decision-Making Framework and pilot programme | * Ensure that all disciplinary panels incorporate a UHL EDI statement in to assessment processes with a commitment to mitigate and minimise racial bias within their decision-making
* Use six steps of the IDMF to evaluate the current approach
 | Heads of People Services / Head of EDI  | TBC | **Metric 3:**Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation. This indicator will be based on data from a two year rolling average of the current year and the previous year**.****UHL Outcomes**In **2018/19** BAME staff were 1.19 times more likely to enter the disciplinary processIn **2019/20** BAME were less likely to enter the formal disciplinary processIn **2020/21** BAME were still less likely to enter the formal disciplinary processRelative Likelihood of BAME Staff Entering Disciplinary Process 0.06 improvement | **Looking After Our People****Belonging in the NHS** | **4** |
| 9.Ensure that every member of staff includes an EDI objective in their annual appraisal | * Ensure that the effective talent management of BAME staff forms part of the performance management process of all supervisors and managers
* All leaders and mangers to have an EDI objective in their appraisals which sets out how they will increase BAME representation –these objectives will be aligned to the UHL Race / Ethnicity objectives and actions set out in the EDI Strategic and Delivery Plans.
* Development of EDI competencies for all line managers to be demonstrated in annual appraisals
* Adopt resources, guides and tools to help leaders and individuals have productive conversations about race
* Development and launch of the UHL conversations about race series – will include videos/podcasts/Anti-racism pledge/ ABP for White Allies/and other online resources focused on anti-racism and racial justice.
 | Head of People Services OD / Head of EDIHead of People Services OD / Head of EDIHead of People Services OD / Head of EDIHead of People Services OD / Head of EDI | TBCTBCTBCTBC | **Metric 4:**Relative likelihood of staff accessing non-mandatory training and CPD**UHL Outcomes****2018/19** 0.76 relative likelihood of accessing training which means a greater chance of BAME staff accessing training than white staff**2019/20** 0.9 relative likelihood of accessing training which means there remains a greater chance of BAME staff accessing training, though lower than 2018/19**2020/21** 0.86 relative likelihood of white staff accessing training which means a greater chance of BAME staff accessing training than white staff, higher than in 2019/20  | **Belonging in the NHS** **Growing for the Future** | **4** |
| 10.Develop and embed an Active Bystander Programme to address inappropriate and unacceptable behaviours and support an inclusive culture  | * Integrate content specific in to the AB development programme to addressing inappropriate and unacceptable behaviours relating to harassment and racial discrimination
* Ensure communications messages for the Active Bystander Programme incorporate awareness of racial prejudice and biases. Target communications at key touch points e.g. South Asian/Black History Months /Anti-bullying week/Mental Health week
* Launch of the UHL Anti-Racism Campaign & Organisational Pledge
 | Active Bystander Programme GroupActive Bystander Programme GroupHead of EDI / Head of Comms | TBCTBCTBC | **Metric 5:**KF 25. Percentage of staffexperiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months**UHL Outcomes** **2018****BAME staff**: 22.6% (compared to acute benchmark of 29.8%)**White staff:** 27% (compared to acute benchmark of 28.4%)**2019****BAME staff**: 22.4% (compared to acute benchmark of 29.9%)**White Staff**: 28.2% (compared to acute benchmark of 27.7%)**2020****BAME staff:** 20.7% (compared to acute benchmark of 28.0%)**White Staff:** 24.6% (compared to acute benchmark of 25.4%) | **Looking After Our People** **Belonging in the NHS** **Growing for the Future** | **4** |
| 11.Develop and embed an Active Bystander Programme to address inappropriate and unacceptable behaviours and support an inclusive culture  | * Enhance our Trust approach to reporting of bullying, harassment and abuse at work by ensuring that processes are transparent, and set out the key routes to reporting incidents including options for anonymous reporting
* Use the IDMF to evaluate current approach
* Ensure that racial bias is defined within in our B&H processes, policies and procedures
 | Civility and Respect Stakeholder Group / Heads of People ServicesHead of EDI and Heads of People ServicesHead of EDI and Heads of People Services | TBCTBCTBC | **Metric 6:**KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.**UHL Outcomes** **2018****BAME staff :**28.7% (compared to acute benchmark 28.6%)**White staff**: 28.1% (compared to acute benchmark 26.4%)**2019****BAME staff:** 25.7% (compared to acute benchmark 28.8%)**White staff**: 25.7% (compared to acute benchmark 25.8%)**2020****BAME staff:** 28.7% (compared to acute benchmark 29.1%)**White staff:** 23.9% (compared to acute benchmark 24.4%) | **Looking After Our People** **Belonging in the NHS** **Growing for the Future** | **4** |
| 12.Identify and develop career development pathways for diverse cohorts of staff using talent management methodology13.Implementation of the High Potential Scheme and alignment to implementation of the Model Employer ‘Aspirational Targets expand to include Gender, Disability, and LGBT+ staff in addition to BAME staff | * Undertake a review of career pathways for the following areas and include a focus on advancing race equality:
* Nursing roles
* Head of Service roles
* Estates and Facilities roles
* Launch of a Sponsorship Programme for Ethnic Minority Staff
* Quarterly review of progress against Race Equality KPIs by EDI and Trust Board
* Work with system partners to develop system wide strategic talent pools and objective selection criteria free from bias
* Implement and embed the High Potential Scheme and ensure that the national requirement to encourage participation from potential BAME leaders
* All ESMs to have a reverse mentor for 6 months to develop understanding of lived experience
* Executive Sponsorship of the Talent and Diversity Toolkit (TDT)
* All recruiting managers to use the Talent and Diversity toolkit to inform their practice-including guidance on the use of section 159 positive action provisions of the EA (2010)
* Work with UHL Comms Team on the communication plan for the TDT with a particular focus on the use of positive action
 | OD Specialist Lead for Talent Management / OD Specialist for EDI & HWB / Deputy Chief Nurse (Workforce)Head of EDI / Head of People Services OD / People PartnersHead of EDI/ Workforce Development ManagerHead of EDI / System, OD & EDI LeadsOD Specialist lead for the High Potential Scheme / Head of EDI Head of EDI / Head of People Services ODHead of EDIHead of EDIHead of EDI / Head of Comms | TBCTBCTBCTBCTBCTBCTBCTBCTBC | **Metric 7:**KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion**UHL Outcomes** **2018****BAME staff**: 67% (Compared to acute benchmark of 72.3%)**White staff**: 86% (compared to acute benchmark of 86.5%)**2019****BAME staff**: 68.9% (compared to acute benchmark of 74.4%)**White staff**: 86.3% (compared to acute benchmark of 86.7%)**2020****BAME staff**: 67.5% (compared to acute benchmark of 72.5%)**White staff:** 87.8% (compared to acute benchmark of 87.7%) | **Looking After Our People** **Belonging in the NHS****Growing for the Future**  | **4** |
| 14.Develop and embed an Active Bystander Programme to address inappropriate and unacceptable behaviours and support an inclusive culture  | * Enhance our Trust approach to reporting of bullying, harassment and abuse at work by ensuring that processes are transparent, and set out the key routes to reporting incidents including options for anonymous reporting
 | Civility and Respect Stakeholder Group / Heads of People Services | TBC | **Metric 8:**Q17. In the last 12 months have you personally experienced discriminationat work from any of the following?b) Manager/team leader or other colleagues**UHL Outcomes** **2018****BAME staff**: 68.9% (compared to acute benchmark of 74.4%)**White staff**: 86.3% (compared to acute benchmark of 86.7%)**2019****BAME staff**: 12.9% (compared to acute benchmark of 13.8%)**White staff**: 5.9% (compared to acute benchmark of 6.0%)**2020****BAME staff:** 15.0% (compared to acute benchmark of 16.8%)**White staff:** 5.3% (compared to acute benchmark of 6.1%) | **Looking After Our People** **Belonging in the NHS****Growing for the Future**  | **4** |
| 15.Ensure that our Executive Search and Recruitment Partners are supporting the Trust to fulfil its EDI ambitions  | * Improve the representation of BAME people in our leadership community through embedding positive action(159) measures into the selection processes for Band 8a-VSM roles
 | Head of EDI / Head of People Services OD / Head of Recruitment | TBC | **Metric 9:**Percentage difference between the organisations’ Board voting membership and its overall workforce**UHL Outcomes** **2018/19** Overall Trust Board representation relative to overall staff - -17.3%**2019/20** Overall Trust Board representation relative to overall staff - -19.3%.**2020/21** Overall Trust Board representation relative to overall staff – -27.3% | **Growing for the Future** **Belonging in the NHS**  | **3** |