



NHS Workforce Race Equality Standard (WRES)

Annual Report 2023

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1. Introduction

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 Black, Asian and Minority Ethnic (BAME) 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 BAME staff is poor. The WRES metrics will also enable the organisation to demonstrate progress in areas where the treatment of BAME staff needs to improve; and facilitate challenge where progress is not being made.

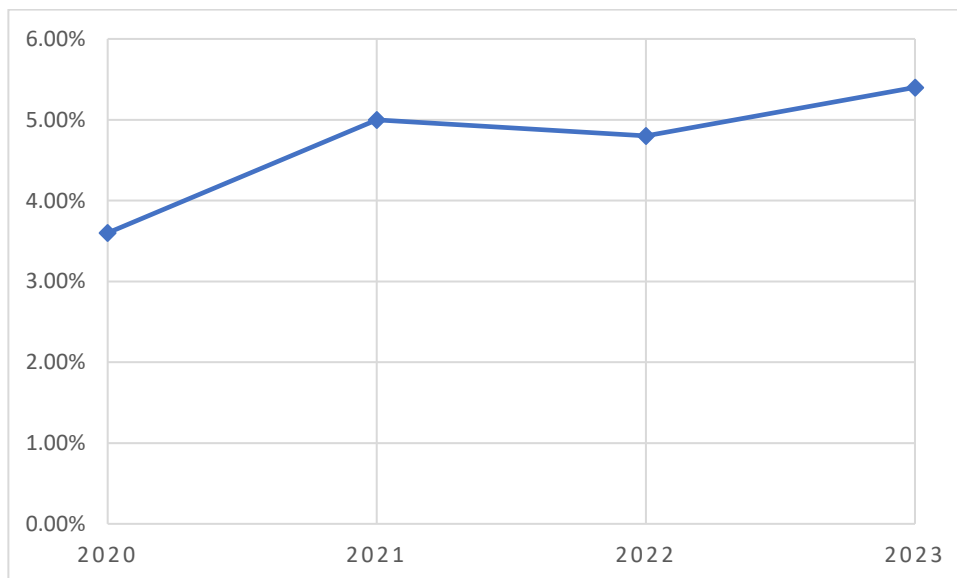
2. Executive summary

A summary of the data over the last 4 years with current highlights and points. A summary for this year is detailed in Appendix A.

Indicator 1 BAME staffing across the bands

In 2020 the total number of staff was 4,053 of which 3.6% were BAME, in 2021 there were 4,551 staff of which 5% were BAME, an increase of 1.4% on 2020. In 2022 we had a total of 4,474, of which 4.8% were BAME, a decrease of 0.2% from the previous year. This year we have a total staff population of 4,604 of which 5.4% were BAME, an increase of 0.6% from 2022.

Chart 1 BAME staff percentage over 4 years

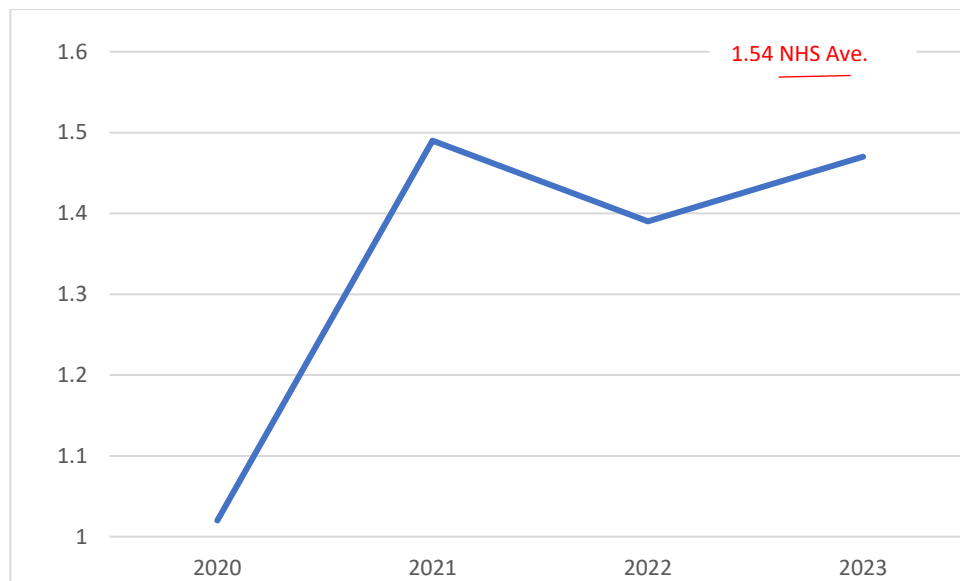


- Most staff across all bands are predominantly white, with bands 8a through to VSM having no BAME clinical staff.
- The highest numbers of BAME staff were in the non-clinical bands 2 - 6 and in band 6 clinical. Only 5 BAME non-clinical staff in bands 8a through to VSM

Indicator 2 Shortlisting of BAME applicants

- In 2020 the relative likelihood of white staff being appointed from shortlisting compared to BAME staff was 1.02 times greater, in 2021 it was 1.49 greater that white staff were being appointed from a shortlist. In 2022 the relative likelihood of white staff being appointed from shortlisting was 1.39 compared to BAME staff. This year the relative likelihood of white staff being appointed from shortlisting compared to BAME staff is 1.47, a regression for BAME staff being appointed from last year.

Chart 2 Likelihood of White staff appointed from shortlists

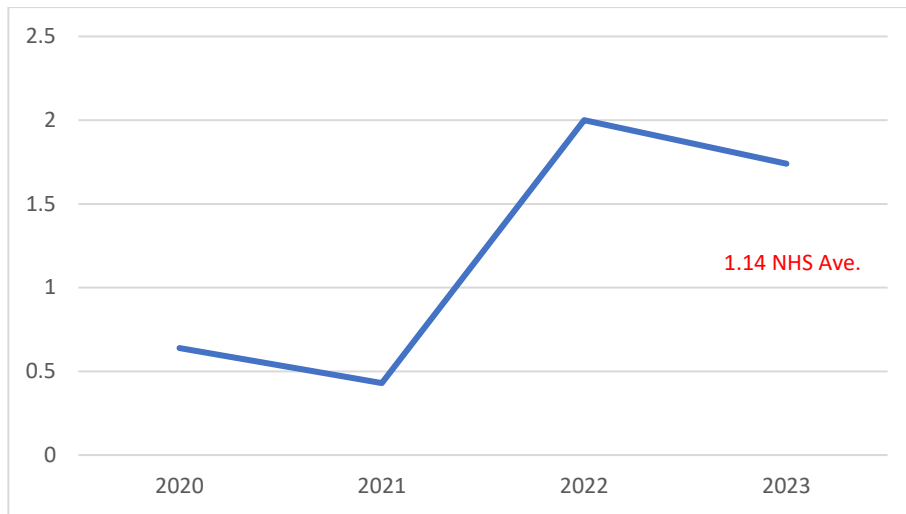


- Nationally across all NHS Trusts White applicants were **1.54** times more likely to be appointed from shortlisting compared to BME applicants. **We are better than the “all” NHS Trusts average.**

Indicator 3 Likelihood of BAME Staff entering a formal disciplinary process

- Relative likelihood of BAME staff entering the formal disciplinary process compared to white staff in 2021 was 0.43 times greater. This compares with 0.64 times greater in 2020. In 2022 the relative likelihood of BAME entering a formal disciplinary process is 2 times greater. This is a significant increase of 1.57 suggesting that BAME staff were more likely to enter the formal disciplinary process then in the previous year. This year the relative likelihood of BAME entering a formal disciplinary process is 1.74 times greater which is an improvement from last year. A figure below “1” would indicate that BAME staff members are less likely than white staff to enter the formal disciplinary process.

Chart 3 Likelihood of BAME Staff entering a formal disciplinary process

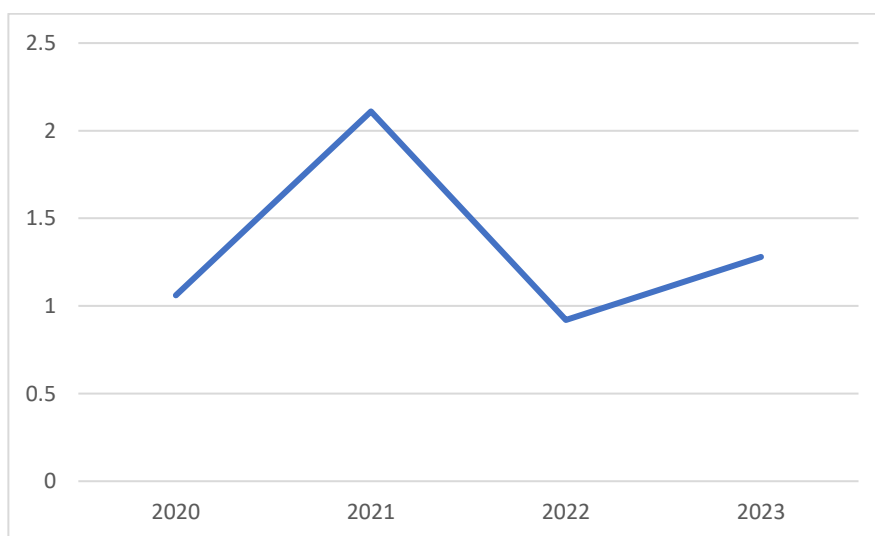


- Nationally across all Trusts BME staff were **1.14** times more likely to enter the formal disciplinary process compared to white staff. **We are worse than the “all” NHS Trusts average**

Indicator 4 likelihood of white staff accessing non mandatory training/CPD compared with BAME staff

- The relative likelihood of white staff accessing non-mandatory training and CPD compared to BAME staff in 2020 was 1.06 times greater, in 2021 it was 2.11 times greater. In 2022 it levelled down to 0.92. This year relative likelihood of white staff accessing non-mandatory training and CPD compared to BAME staff is 1.28. A figure below “1” would indicate that white staff members are less likely to access non-mandatory training and CPD than BAME staff. The non-adverse range nationally is 0.80 to 1.25.

Chart 4 likelihood of white staff accessing non-mandatory training

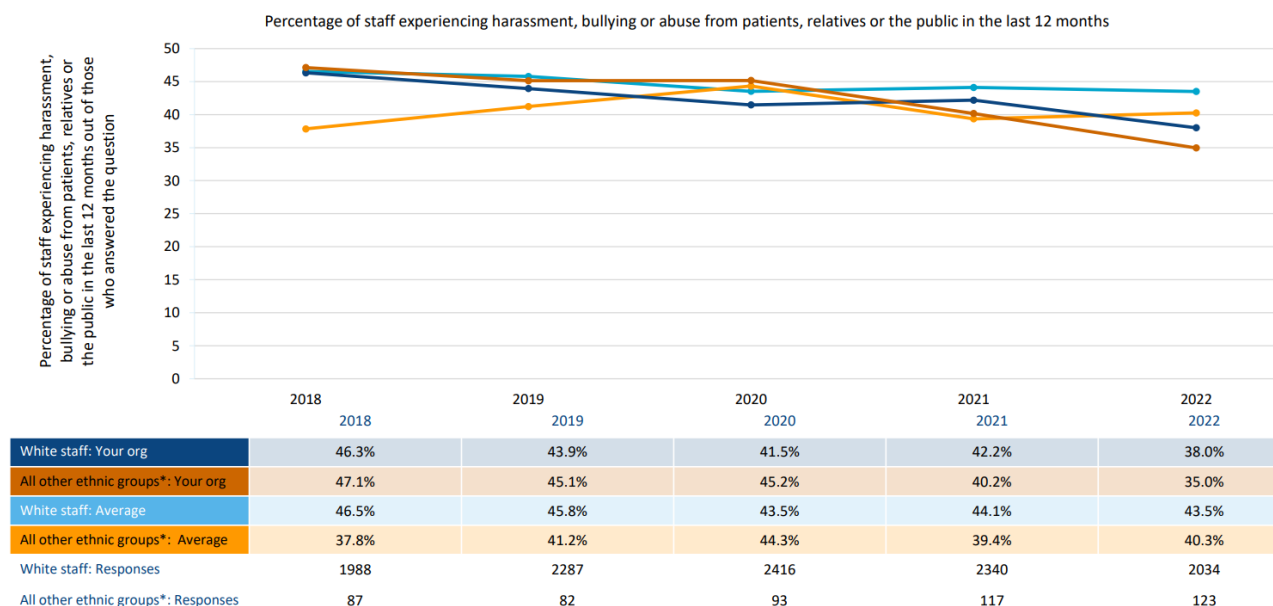


The indicators 5 to 8 are taken from the Staff survey (published March 2023) a year in arears

Indicator 5 percent of staff experiencing harassment, bullying or abuse from patients or public

- There has been a steady improvement in this indicator in the last 4 years. The percentage of BAME staff experiencing harassment, bullying or abuse from patients or the public is **35%**, this a significant drop from 40.2% from last year. We are **better** than the comparable Ambulance Trusts average for BAME staff at **40.3%**.
- This compares with experience of white staff at 42.2% last year that also improved this year to **38%**. We are better than the comparable Ambulance Trusts average for white staff at **43.5%**.

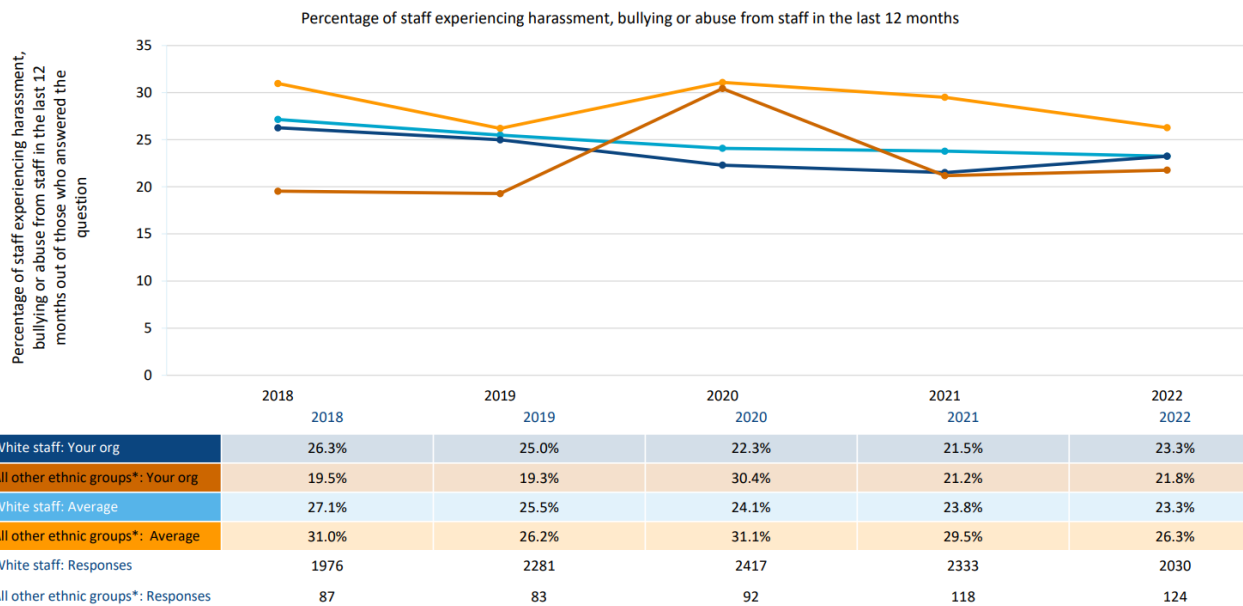
Chart 5 percent of staff experiencing harassment, bullying or abuse from patients or public



Indicator 6 Percentage of BAME staff experiencing harassment, bullying or abuse from staff

- There was a drop in the percentage of BAME staff experiencing harassment, bullying or abuse from staff in 2020 (30.4%) to 21.2% in last year. This year figure was **marginally worse** at **21.8%**. Although better than comparable Ambulance Trusts average for BAME staff at **26.3%**
- In comparison white staff have experienced an increase, from 21.5% last year to **23.3%** in the latest staff survey. This same as the comparable Ambulance Trusts average for white staff at **23.3%**.

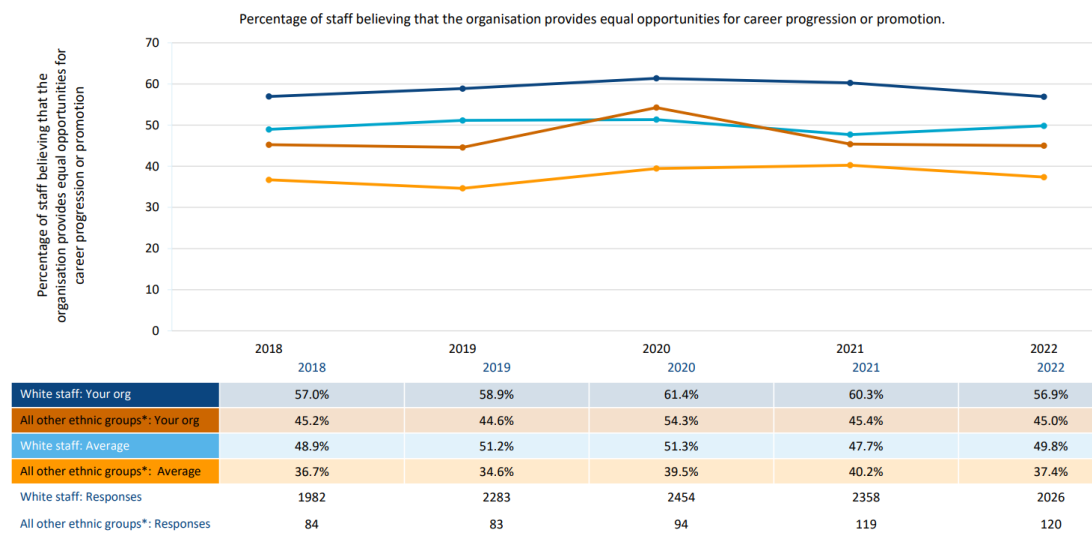
Chart 6 Percentage of BAME staff experiencing harassment, bullying or abuse from staff



Indicator 7 Percentage of staff believing that Trust provides equal opportunities for career progression or promotion

- Both BAME and white staff reported worse for this indicator than the previous survey, but significantly greater than comparable Ambulance Trust's.
- At SCAS **45%** of BAME staff believed that the Trust provides equal opportunities for career progression, this was a **marginal decrease** from 45.4% in the previous survey. We are **better** than the comparable Ambulance Trusts average for BAME staff at **37.4%**
- In comparison white staff at SCAS, **56.9%** believed that the Trust provides equal opportunities for career progression, a **decrease** from 60.3% in the previous year. We are **better** than the comparable Ambulance Trusts average for white staff at **49.8%**

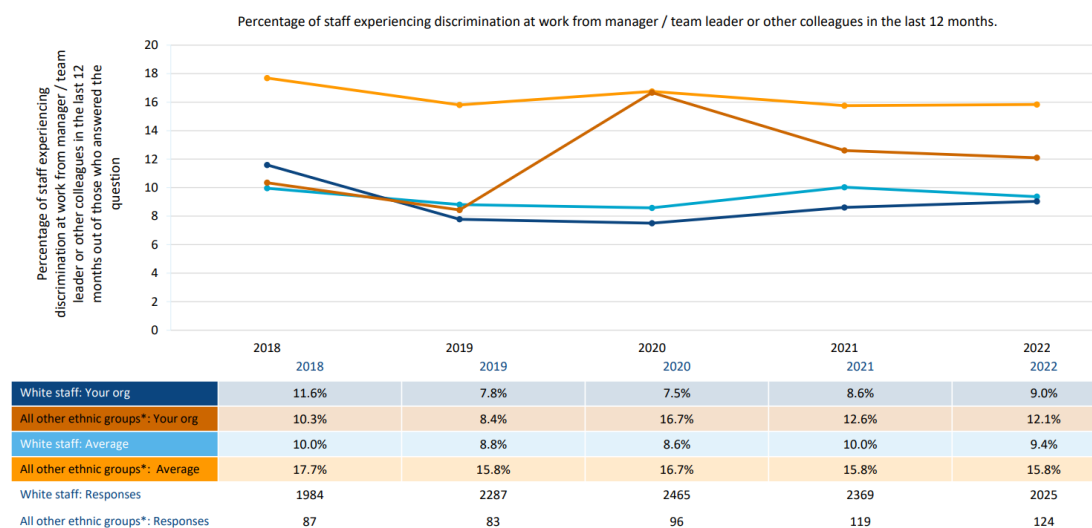
Chart 7 Percentage of staff believing that Trust provides equal opportunities for career progression or promotion



Indicator 8 Percentage of BAME staff personally experiencing discrimination at work from a manager / team leader or other colleagues

- The percentage of BAME staff personally experiencing discrimination at work from a manager / team leader or other colleagues has had a marginal **improvement** from 12.6% in the previous year to **12.1%** in the latest survey. We are better than the comparable Ambulance Trusts average for BAME staff at **15.8%**.
- The percentage of White staff personally experiencing discrimination at work from a manager / team leader or other colleagues has had a marginal increase in the latest survey to **9%** from 8.6% in the previous year. We are better than the comparable Ambulance Trusts average for white staff at **9.4%**.

Chart 10 Percentage of BAME staff personally experiencing discrimination at work from a manager / team leader or other colleagues



Indicator 9 BAME (voting) board membership

All Board members have voting rights, all Board members declared their ethnicity. Board ethnicity is **15%** when compared in relation to the workforce from 14% last year. There has been an increase in Board ethnic composition relative to the workforce, a difference (Total board - Overall workforce) from 9% last year to **9.6%** this year.

3. WRES progress in 2022/2023

We continue to implement and monitor the WRES action plans and have implemented our ED&I strategy which includes our statutory required Equality Objectives. We also published our Annual Public Sector Equality Duty (PSED) report and provide a six-month update of our WRES to the Executive and Board. As part of the CQC inspection a portfolio of evidence was provided with the Head of ED&I interviewed for the 'Well-led' their criteria.

Other progress made this year of note include the following:

- The BAME Staff Network has been refreshed and all the Staff Networks now have Executive Board sponsor
- ED&I induction training has been updated and included within the 'Good start' programme
- A refreshed Equality Impact Analysis (EqIA) Toolkit has been developed and implemented
- The refreshed Equal Opportunities & Diversity Policy was consulted and implemented
- Recruitment Skills Training Course for managers updated to include EDI – being rolled out.
- Inclusive Recruitment programme rolled out
- Implemented Trac and understanding how to use it effectively for monitoring performance at each stage of the recruitment process.
- Train the trainer on ED&I & Bias delivered by Head of ED&I to HR staff
- Quarterly Board reports on Disciplinary & Capability with data on Protected characteristics
- Specific questions on PDR review document on "*Our culture – equality, diversity, and inclusion*" have now been included
- Added a count of each time one of the protected characteristics has been chosen from the Aggravating Factors field and secondly a report with the details of each record from that first report.
- New Equality Objectives produced with *Objective 3 – Our People (Governors and Volunteers)* that they are broadly representative of the communities we serve and are supported and engaged
- Harassment and Sexual safety Disclosure checklist for managers developed can be applied to any discrimination disclosure

4. Conclusion and next steps

SCAS is developing a culture change programme and we are still implementing actions that will be carried over to the new year. The actions that are being carried forward include addressing inappropriate and unacceptable behaviours and support an inclusive culture.

The action and interventions identified in this report are both behavioural and structural and form part of a significant culture change programme which takes time, energy, and leadership. Nevertheless, the report indicates that although we have a long way to go in implementing and embedding the plan, we are making steady progress.

We will be delivering our [Action plan](#) and include ongoing reviews of actions mentioned in this report.

Next steps:

Over next twelve months, will focus on the following key actions:

- Consult and grade our progress against the Equality Delivery System 2022
- Provide development to the Board on their ED&I responsibilities through the NHSE EDI improvement plan.
- Continue to provide support and development to the Networks Board Executive Sponsors.
- To monitor BAME in the disciplinary process and deep dive into data to assess any patterns
- Undertake analysis to better understand the data particularly access to learning and development by BAME staff
- Launch Operation Cavell to publicise zero tolerance of bullying and harassment and abuse from patients and the public
- To develop an Active Bystander Programme to address inappropriate and unacceptable behaviours and support an inclusive culture.
- Embed the Just & Learning culture and the culture of Civility to enhance the Trust's approach to reporting of bullying, harassment and abuse (including sexual harassment), ensuring that processes are transparent, and publicise the key routes to reporting incidents.

WRES Action Implementation Plan 2023/24

Indicator	Objective	Action/s	Timescales	Lead/s	Why	NHS People Plan Themes	EDS Goals
2	To increase the number of BAME candidates to be successfully recruited	Evaluate further Inclusive Recruitment methods to ensure that they are fair, accountable, bias-free, advances equality and attracts more BAME candidates	To be developed Oct- '23 – March '24	Recruitment Head of Equality	This year the relative likelihood of white staff being appointed from shortlisting compared to BAME staff is 1.47, a regression for BAME staff being appointed from last year (1,39).	Growing for the future Looking After Our People	Goal 3: A representative and supported workforce
		Use external experts and social media to attract a wider pool of diverse candidates to apply to SCAS.	Quarterly reviews during the year	Recruitment			
		Complete EQIA's for recruitment policy, procedures and attraction/engagement plans	By April 2024	Recruitment			
		To carry out a benchmarking exercise of Recruitment and selection training in relation to equitable recruitment	On-going	Recruitment			

		Audit our interview panellists to ensure they are fully trained (as above)	Twice a year	Recruitment			
		Audit a range of non-shortlisted candidates to ensure a fair selection process	Twice a year	Recruitment			
		Review our advertising campaigns for diversity	Every 3 months	Recruitment			
3	To reduce number BAME in the disciplinary process	To identify any trends and evaluate and find out why more disabled people are entering the capability process	On going	HR manager	This year the relative likelihood of BAME entering a formal disciplinary process is 1.74 times greater which is an improvement from last year.	Looking After Our People Belonging in the NHS	Goal 3: A representative and supported workforce Goal 4: Inclusive leadership
		To undertake further analysis of directorate and departmental data to assess any patterns	Nov '23 - Aug'24	HR manager			
4	To increase the number of BAME staff accessing mandatory/C PD training	Ensure that every member of staff includes an EDI objective in their (PDR) annual appraisal	On going	Managers & Education Leads	This year relative likelihood of white staff accessing non-	Looking After Our People	Goal 3: A representative and supported workforce

		To encourage and monitor number of BAME staff entering the SCAS leaders programme	Nov '23 – March '24	OD leads Education Leads Race Equality & Inclusion Network	mandatory training and CPD compared to BAME staff is 1.28	Belonging in the NHS	
5	Reduce the incidence of BAME staff experiencing harassment, bullying and abuse from patients and the public	Publicise Operation Cavell.	On going	Head of EDI	The percentage of BAME staff experiencing harassment, bullying or abuse from patients or the public is 35%, this a significant drop from 40.2% from last year	Looking After Our People	Belonging in the NHS Goal 3: A representative and supported workforce
		Promote harassment checklist to managers & team leads		Head of EDI FTSU			
		Embed the Just & Learning culture to enhance the Trust's work around perceived bullying, harassment, and abuse at work, ensuring that processes are transparent, and set out the key routes to reporting incidents		HR Teams			
		Finalise and share Harassment 10	By March '24	Head of ED&I			

		<p>points guide. Publicise through communication channels, ESPM and FTSU</p>					
		<p>Continue the Trust's approach to reporting of bullying, harassment, and abuse at work by ensuring those processes are transparent, and set out the key routes to reporting incidents including options for anonymous reporting</p>	<p>On-going</p>	<p>HR Leads</p> <p>Freedom to speak up team</p>			
		<p>To roll out the 'Good Start' induction training programme to address negative cultures and engender inclusion, belonging & reporting</p>	<p>No '23 onwards</p>	<p>Head of ED&I</p> <p>Freedom to Speak up team</p>			

6	To reduce BAME staff experiencing harassment, bullying or abuse from staff	Actions as above apply			This year figure was marginally worse at 21.8% similar to last year at 21.2%	Looking After Our People Belonging in the NHS	Goal 3: A representative and supported workforce
7	To maintain and promote opportunities for career progression or promotion	Participate in the National NHS Staff Survey to enable Benchmarking across NHS Indicators by Ethnicity	Yearly staff survey	All Trust wide managers HR & Communications Teams	45% of BAME staff believed that the Trust provides equal opportunities for career progression, this was a marginal decrease from 45.4% in the previous survey.	Looking After Our People Belonging in the NHS	Goal 3: A representative and supported workforce
		All appraisers to promote appraisal (PDR) and career management training to support BAME careers Work with the Race & Inclusion Network to promote and help support career progression with interview tips and	On going Dec' 23	All Trust wide managers HR & Communications Teams Recruitment Race Equality &			Goal 4: Inclusive leadership

		promotional video with BAME colleagues		Inclusion Network			
8	To actively reduce BAME staff personally experiencing discrimination at work from a manager / team leader or other colleagues	Feature the experiences and share life stories from BAME staff highlighting and educating inappropriate and unacceptable behaviours and support an inclusive culture	Dec '23 - March '24	Head of ED&I Race Equality & Inclusion Network	The percentage of BAME staff personally experiencing discrimination at work from a manager / team leader or other colleagues has had a marginal improvement from 12.6% in the previous year to 12.1% in the latest survey	Looking After Our People Belonging in the NHS	Goal 3: A representative and supported workforce
9	Promote Board diversity	Ensure that our Executive Search and Recruitment Partners are supporting the	On going	HR	Board ethnicity is 15% when compared in relation to	Looking After Our People	Goal 3: A representative and

		Trust to fulfil its EDI ambitions			the workforce from 14% last year. There has been an increase in Board ethnic composition relative to the workforce	Belonging in the NHS Growing for the future	supported workforce Goal 4: Inclusive leadership
		To complete the induction training for Staff Network Sponsors	To be developed Nov '23 – March '24	Executive Directors			
		To provide presentation regarding the NHS ED&I High Impact Areas	To be completed by Dec '23	Head of ED&I			

Appendix A

Summary Analysis of the WRES 2023

Indicators 1 – 4 taken from ESR (as of 31 March 2023)

Indicator 1	2020	2021	2022	2023	Trend	Comment
BAME staffing across the bands						
BAME workforce	3.6%	5%	4.8%	5.4%		<p>As at 31/03/2022 24.2% of staff working across “all” NHS Trusts formed the BAME workforce (increased by 2.2% from last year)</p> <p>We have an increase in the BAME workforce</p>
Indicator 2 Likelihood of White staff appointed from shortlist	1.02	1.49	1.39	1.47		<p>A regression for BAME staff from last year.</p> <p>A figure above “1” indicates that white candidates are more likely than BAME candidates to be appointed from shortlisting.</p> <p>Nationally across all NHS Trusts White applicants were 1.54 times more likely to be appointed from shortlisting compared to BME applicants. We are better than the “all” NHS Trusts average.</p>

Indicator 3 Likelihood of BAME Staff entering a formal disciplinary process	0.64	0.43	2	1.74		<p>There is improvement, however there was notable increase in BAME staff entering a disciplinary process last year</p> <p>A figure below “1” would indicate that BAME staff members are less likely than white staff to enter the formal disciplinary process.</p> <p>Nationally across all Trusts BME staff were 1.14 times more likely to enter the formal disciplinary process compared to white staff. We are worse than the “all” NHS Trusts average</p>
Indicator 4 likelihood of white staff accessing non mandatory training/CPD compared with BAME staff	1.06	2.11	0.92	1.28		<p>More white staff proportionately accessing non mandatory/CPD training.</p> <p>A figure below “1” would indicate that white staff members are less likely to access non-mandatory training and CPD than BAME staff.</p> <p>The non-adverse range nationally is 0.80 to 1.25. We are in adverse than the “all” NHS Trusts range.</p>

Indicators 5 – 9 taken from Staff Survey 2022 (published March 2023)

	2019	2020	2021	2022	Trend	Comment
Indicator 5 percent of BAME staff experiencing harassment, bullying or abuse from patients or public	45.1%	45.2%	40.2%	35.0%		We are better than last year.

						And better than the comparable Ambulance Trusts average for BAME staff at 40.3%
Indicator 6 Percentage of BAME staff experiencing harassment, bullying or abuse from staff	19.3%	30.4%	21.2%	21.8%	<p>Line chart showing percentages: 19.30%, 30.40%, 21.20%, 21.80%. A blue horizontal line is at 40.3%.</p>	<p>We are marginally worse last year.</p> <p>Although better than comparable Ambulance Trusts average for BAME staff is 26.3%</p>
Indicator 7 Percentage of staff believing that Trust provides equal opportunities for career progression or promotion	44.6%	54.3%	45.4%	45.0%	<p>Line chart showing percentages: 44.60%, 54.30%, 45.40%, 45.00%. A blue horizontal line is at 37.4%.</p>	<p>We are marginally worse than last year.</p> <p>Although better than the comparable Ambulance Trusts average for BAME staff at 37.4%</p>
Indicator 8 Percentage of BAME staff personally experiencing discrimination at work from a manager / team leader or other colleagues	8.4%	16.7%	12.6%	12.1%	<p>Line chart showing percentages: 8.40%, 16.70%, 12.60%, 12.10%. A blue horizontal line is at 15.8%.</p>	<p>We are marginally better than last year.</p> <p>We also are better than the comparable Ambulance Trusts average for BAME staff at 15.8%.</p>
Indicator 9 BAME (voting) board membership	12.7%	20%	14%	15%	<p>Line chart showing percentages: 12.70%, 20%, 14%, 15%.</p>	There has been an increase in Board ethnic composition relative to the workforce

