



Workforce Race Equality Report 2023



FOREWORD

The Workforce Race Equality Standard (WRES) report details the workforce data as of 31st March 2023. The data within this report will be provided to NHSE on request.

The WRES report will be signed off by the Chief Executive as the Executive Boards representative and a brief submitted to the Executive Board within the CEO update. It will be published on the organisation's website under the FREDIE section.

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1. Introduction

The report has been developed to inform the board of the data held on the workforce in respect of the Workforce Race Equality Standard (WRES) as at 31/03/2023.

The WRES reporting compares the data for white against BME and follows the ethnic categories as set out in the Office of National Statistics 2001, the statistics refers to white as, White British, White Irish, and Any other White background. It does not recognise white minority ethnicities such as Eastern Europeans independently although it does consider Asian ethnicities when referring to BME.

2. Background Context

The Workforce Race Equality Standard was introduced to NHS organisations in April 2015 following an announcement by the NHS Equality and Diversity Council announcing that it had agreed to ensure employees from black and minority backgrounds have equal access to career opportunity and receive fair treatment in the workplace.

CHCP reported the data to NHSE year on year up until January 2021, following this in July 2021 all Independent Health Care Providers were informed that data collection for 2021/22 was being postponed, there has not been any update on this since and currently we are not being asked to submit our data. However we continue to run the data and present it in this report which is uploaded to our website.

3. Data Analysis

The data set reported is on 31st March 2023 and has been drawn from ESR, Colleague Survey and HR Employee Relations logs and the full data set can be accessed by contacting chcp.equalitydiversityandinclusion@nhs.net

3.1 Workforce

At the date of reporting, the total headcount of the substantive workforce was 2124 which includes:

- White 1985 – a decrease of 123 since the previous year
- BME 72 - increase of 13
- Unknown 67 decrease of 79 since the previous year, this is positive as it shows more people are open to declaring their ethnicity then in previous years.

The percentage of the workforce that declare their ethnicity as BME is 3.39% and shows a steady increase of 1.5% over the past three years.

The reporting breaks the workforce down into Clinical, Non-Clinical and Medical and for clinical and non-clinical these are grouped into categories of Support (up to band 4), Middle

(band 5 – 7), Senior (8a – 8c) and VSM (8d and above). Medical groups include Consultants Non-consultant career grade, trainee and other.

The table below shows number of headcounts, based on substantive staff for each group over a period of three years 2021, 2022 and 2023.

Non-Clinical	White			BME			Unknown (not declared)		
	2021	2022	2023	2021	2022	2023	2021	2022	2023
Support	441	472	442	5	5	6	25	28	13
Middle	90	78	115	3	3	3	26	26	3
Senior	40	51	14	0	0	0	7	8	1
VSM	6	1	3	0	0	0	0	0	0
Clinical	White			BME			Unknown		
Support	583	562	569	13	10	16	34	32	15
Middle	773	845	794	28	28	33	31	39	27
Senior	58	68	13	2	3	1	4	2	0
VSM	7	4	4	1	0	1	0	1	0
Medical	White			BME			Unknown		
Consultants	6	4	4	5	5	6	0	1	0
Non-Consultant career grade	6	6	5	1	2	1	0	0	0
Trainee grade	0	0	1	0	0	0	2	2	1
Other	18	17	21	4	3	5	7	7	7
Total	2028	2108	1985	62	59	72	136	146	67

3.2 Recruitment

The recruitment figures quoted are taken from the Electronic Staff Records which records applicants and new starters, the figures given are for the period 01/04/2022 to 31/03/2023 and shows the number of applications shortlisted versus the number of applications appointed:

	Shortlisted	Appointed Headcount/percentage
• White	808	234 (29%)
• BME	52	17 (33%)
• Unknown	51	6 (12%)

The findings show that the relative likelihood of white applicants being appointed from shortlisting compared to BME applicants is 0.89%

The number of returns for 2023 was 1468 of which 3% identified as BAME. The data reported on in this WRES report has been taken from the dashboard which gives both an organisational response, but also allows for the breakdown based on demographics.

Question	White %	BAME %
Percentage of staff experiencing bullying, harassment, or abuse within the last 12 months	6	3
Percentage of staff believing that the organisation provides equal opportunities for career progression or promotion	75	45
In the last 12 months have you personally experienced discrimination at work from Manager/team leader/colleague	6	3
Percentage of staff experiencing discrimination from patients/relatives/pubic within the last 12 months.	5	9

3.4 Employee Relations Activity

When reporting on Employee Relations Activity, the standard focuses on staff being subject to the formal disciplinary process, the findings show:

- White 10
- BME 0
- Unknown 0

3.5 Non - Mandatory Training

When considering the number of staff accessing number of non-mandatory training, the findings show:

- White 1761 (89%)
- BME 58 (80%)
- Unknown 45 (67%)

4. Conclusion

The data taken from ESR only focuses on the substantive workforce, therefore there will be several staff who only hold bank contracts that aren't included in these figures, once we are included in the data reporting to NHSE again, it is likely that there will be the opportunity to pull the bank data too.



Since the previous report we have, a regular reminder being sent to staff to update their personal details in ESR, this I believe has been a contributor in increasing the number of those reporting their ethnicity.

This report shows a positive result in that we are slowly increasing our BAME workforce with fairness being demonstrated regarding recruitment with 33% of BAME applicants that were shortlisted for posts being recruited to roles. However the findings from the colleague survey regarding discrimination are not so positive, there has been an increase in percentage of those that report experiencing discrimination from patients/service users. The BAME workforce report 9% in the 2023 survey whereby the rate for 2022 was 5% and the White workforce report 5% in 2023 with the rate being 4% in 2022.

CHCP has a BAME staff network group who meet regularly, the aim of the group is to improve not only their own workplace experiences but others that identify from minority groups. The members will play a key role of developing an action plan against the WRES outcomes which will continue to support the organisation to develop and improve in areas needed.

5. Recommendations

The following recommendations are suggested for the development of the action plan.

- Carry out effective data monitoring from recruitment to exit by demographics on a quarterly basis looking for common themes and or issues.
- Continue to communicate and encourage staff to update their demographics within ESR.
- Develop the Zero tolerance framework in collaboration with the Just Culture process being developed.
- Work with the BAME staff network group to explore the findings and agree further actions.

On behalf of the FREDIE steering group, I agree that this report is complete and that there is a process in place whereby the steering group will monitor the action plan developed from the recommendations. The findings will be fed into the Executive board via the CEO update and uploaded to the organisation's website.

Name: Andrew Burnell

Signature:

Title: Chief Executive Officer

Date:

15/2/24