



**Workforce Race**  
**Equality Standard (WRES)**

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2021-2022 Report

# Workforce Race Equality Standard (WRES) 2021-2022

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Date Workforce Race Equality Standard reported to the Board of Directors:

**9th May 2022**



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# Summary

**1.1.** The Trust has continued to focus on increasing ethnic diversity at Agenda for Change (AfC) bands 8a and above, following its 2021 WRES report indicated that the deliberate focus on increasing the ethnic diversity of the AfC structure is working. This year's report, 2021-2022, shows small changes across Band 8 and above for staff from Black, Asian and Ethnic Minority group:

- Band 8a from 10% to 12%
- VSM from 7% to 5%

A total of 45 (206 compared to 161 in 2020/21) more staff from Black, Asian and Ethnic Minority backgrounds at these bands over the last twelve months.

**1.2.** The continued effort to improve the representation of ethnic diversity in the senior levels of the organisation's AfC structure is brought together under the Removing the Barriers Programme (the Programme).

The Programme comprises actions to address under-representation by addressing the systematic barriers to progression and empowering staff from ethnic minority backgrounds. These actions include the Trust's attraction strategy, targeted recruitment, training, and diverse recruitment panels. Activities to empower staff include the reciprocal mentoring scheme and E3 ring-fenced secondment opportunities. The E3 opportunities are 6 to 12-month secondment opportunities to support staff from ethnic minority backgrounds to gain exposure, experience, and education.

**1.3.** In addition, the Trust now provides all hospitals, managed clinical services, community, and corporate services with their local WRES data and guidance on how to use this insight to promote workforce diversity. This local approach has enabled the production of local level WRES action plans to support the strategic approach to improve workforce race equality.



# Summary

**1.4.** The NHS Staff Survey results show that staff from Black, Asian, and Ethnic Minority backgrounds are disproportionately more likely to experience bullying, harassment, and abuse. The Trust has implemented the zero-tolerance bullying, harassment, and abuse approach to address these findings. The approach is a vital part of the organisation's Choose Kindness Campaign. The zero-tolerance approach will apply to all staff and be developed as part of the Trust's Putting People First Strategy. Several Trust hospitals and services held listening events to engage with staff in response to the 2020-2021 staff survey findings. The Trust recognises that creating an inclusive environment where staff feel safe and supported is imperative for wellbeing and belonging, directly impacting better patient care and performance.

**1.5.** The Trust has launched the 'Let's Talk About Race and Racism' Approach to address racial inequality by aiming to improve staff's awareness and understanding of the impacts of racism.

The approach enables the provision of a safe and supported space for staff to talk about the impacts of racism, to impact our workplace culture. It aims to do this by:

- Raise awareness of the inequalities and racism people from Black, Asian, and Minority Ethnic backgrounds often face.
- Create a shared understanding of the impacts of racism, how it may manifest itself, exploring its impact on the individuals, the organisation and society.
- Promote reflection, asking colleagues to think on their own ways of behaving.

In 2022 the Trust will deliver three workshops and two train-the-facilitator courses. The number of sessions available is impacted by the need for the organisation to focus on the implementation of the new Hive EPR system during 2022. The Trust will aim to increase this offer in 2023.



# Introduction

- 2.1. The WRES is included in the NHS standard contract and has been a requirement of NHS commissioners and NHS healthcare providers since July 2015. NHS Trusts are required to produce and publish their WRES report on an annual basis.
- 2.2. The purpose of the WRES is to ensure that NHS organisations review their data against the nine WRES indicators. The findings of the data are used to inform the production of an action plan to close the gaps in the workplace between ethnic minority and white staff. It aims to improve the representation of Black Ethnic Minority staff at Board level of the organisation.



# Scope

3.1. The parameters for the WRES report are commissioned and overseen by the NHS Equality and Diversity Council and NHS England.

3.2. The WRES data included in this report has been obtained from the following sources:

- Indicators 1 and 9 – Electronic Staff Record (ESR).
- Indicator 2- Trac.
- Indicator 3 – Human Resource Team Record.
- Indicator 4 – ESR and Organisational Development Record.
- Indicators 5, 6, 7 and 8 – NHS National Staff Survey.

# Definitions

4.1 The term BAME is used in this report as a data label. Wherever possible the report will refer to specific ethnic groups in line with best practice guidance.

4.2 The definition of ethnicity used for the purpose of this report is provided in the WRES Technical Guidance as outlined below:

“White” staff includes White British, Irish and Eastern European and any “white other”.

The term BAME for the purpose of this report refers to staff that are from a Black or Minority Ethnic background that is not White.

4.3 The definition of non-mandatory training is given as follows:

“Any learning, education, training, or staff development activity undertaken by an employee, the completion of which is neither a statutory requirement (e.g. fire safety training) or mandated by the organisation (e.g. clinical records system training). Non-mandatory and Career Progression and Development (CPD) recording practice may differ between organisations. However, all are expected to maintain internal consistency of approach from year to year, so that changes in uptake trends can be compared over time. Trusts are required to keep a record of all included and excluded training”.

4.4 Accessing non-mandatory training and CPD, in this context refers to courses and developmental opportunities for which places were offered and accepted.

4.5 Other Locally Agreed pay scales remain in use. This year, this data has been applied to the AfC salary equivalent rule to determine placement wherever possible. Where not possible to align to an AfC equivalent, the data remains labelled as ‘Other Locally Agreed’. There remain some staff on Band 1 or under equivalent who are also included in the ‘Other Locally Agreed’ category.





# Analysis

**5.1.** This report comprises an analysis for each indicator of the WRES based on the Trust data for the previous 12 months. The Trust's 2021-2022 data is attached in Appendix A of this report.

## 5.2. Indicator 1 – Workforce profile

**5.2.1** The overall representation of staff who identify as being from a Black, Asian, or Minority Ethnic background is 22%. It is noted that 8.62% of staff have not declared their ethnicity on the ESR system. The Trust has seen an increase of 1% in the representation of staff from ethnically diverse backgrounds in the last year.

## 5.3. Indicator 2 – Recruitment

**5.3.1.** All relative likelihood indicators can be understood by the following:

- A result of one means equal likelihood.
- A result of more than one means a less favourable variation for ethnic minority staff.
- A result of less than one means a more favourable likelihood for ethnic minority staff.

**5.3.2.** The data shows that White candidates are 1.66 times more likely to be appointed from shortlisting than candidates from ethnic minority backgrounds. Last year's data showed White candidates to be 1.42 times more likely than candidates from ethnic minority backgrounds to be appointed from shortlisting. National data shows that White candidates are 1.61 times more likely to be appointed from shortlisting than candidates from ethnic minority backgrounds.



# Analysis

## 5.4. Indicator 3 – Disciplinary process

**5.4.1.** The data for indicator 3 shows that staff from ethnic minority backgrounds are equally as likely as White colleagues to enter formal disciplinary process. This is an improvement when compared to the last year's findings of staff from Black, Asian and Minority Ethnic Background being 1.86 times more likely to enter the disciplinary process with compared to the staff from White background. The Trust will continue to review disciplinary cases to identify and address any disparities in treatment.

## 5.5. Indicator 4 – Training

**5.5.1.** The data shows that staff from Black, Asian, or Minority Ethnic background are equally as likely as White colleagues to access Non-Mandatory Training.

## 5.6. Indicators 5-8 – Staff Experience

**5.6.1.** Indicators 5 to 8 are drawn from the NHS National Staff Survey. The results show the experience of staff from Black and Ethnic Minority backgrounds compared to staff from White backgrounds. 30% of the Trust's staff completed the NHS Staff Survey in 2021, 18% of which identified as being from Black Ethnic Minority background. The results for indicators 5-8 are reflective of these responses.



# Analysis

**5.6.2. Indicator 5** – The data shows that the percentage of staff experiencing harassment, bullying, or abuse from patients, relatives, or the public in last 12 months has increased. It has increased by 7% for staff from Black Asian and Minority Ethnic backgrounds (from 20% to 27%). It has increased by 5% for staff from White backgrounds (from 21% to 26%). Staff from Black, Asian, and Minority Ethnic backgrounds are more likely to experience harassment, bullying, or abuse from patients, relatives, or the public.

**5.6.3. Indicator 6** – The data shows that the percentage of staff experiencing harassment, bullying, or abuse from staff in the last 12 months has also increased for staff from Black Asian and Minority Ethnic backgrounds. It has increased by 3% for staff from ethnic minority backgrounds (from 30% to 33%). It has increased by 2% for staff from White backgrounds (from 23% to 25%). Black, Asian, and Minority Ethnic staff remain significantly more likely to experience harassment, bullying, or abuse from other staff.

**5.6.4. Indicator 7** – The data shows that the percentage of staff who believe that the Trust provides equal opportunities for career progression or promotion has decreased significantly. The data shows that this belief has decreased by 27% for staff from Black Asian and Minority Ethnic backgrounds, from 67% last year to 40% this year. The data also shows a decrease for staff from White backgrounds of 29%, from 86% last year, to 57% this year. This shows that it remains the case that Black, Asian, and Minority Ethnic staff are significantly less likely to believe that the Trust provides equal opportunities for progression or promotion.

**5.6.5. Indicator 8** – The data shows that the percentage of staff who have reported to have personally experienced discrimination at work from a Manager, team leader or other colleagues in the last 12 months has increased. The instance of this experience has increased by 4% for from Black Asian Ethnic Minority backgrounds, from 18% last year, to 22% this year. This has increased for staff from White backgrounds by 1%, from 7% to 8%. This shows that staff from Black, Asian, and Minority Ethnic backgrounds remain significantly more likely to experience instances of discrimination at work from colleagues.



# Analysis

## 5.7. Indicator 9 – Board representation

**5.7.1.** 5.6% of the Trust Board identify as being from Black Asian and Minority Ethnic backgrounds. Representation has decreased compared to last year. It is noted that the Board would be considered a very small data set. This means that the addition or removal of one or two individuals will have a significant impact on the percentage representation. It is also important to note that 28% of the Board membership has not declared their ethnicity. The data indicates that the Board is 16% less representative than the wider workforce based on the available data.



# The actions the Trust is taking to advance workforce race equality

- 6.1.** The Trust has taken significant action to proactively advance race equality over the last year. The Trust will continue to prioritise new and ongoing actions to improve the experiences and opportunities of staff from Black Asian and minority Ethnic backgrounds. The Trust's 2021-2022 WRES results continue to confirm the priorities outlined in the Trust's equality, diversity, and inclusion strategy. Diversity Matters aims to increasing ethnicity diversity at bands 8a and above and to focus on addressing workplace bullying, harassment, and abuse.
- 6.1.1** The last year has seen the number of ethnically diverse staff in AfC band 8a and above roles increase due to the deliberate focus of the Removing the Barriers Programme. The Trust will continue this deliberate focus to deliver the Removing the Barriers Programme. Efforts over the next 12 months will seek to strengthen compliance with the Diverse Recruitment Panels Scheme and ensure a training offer for the cohort of ethnic minority members to further develop their skills to apply and interview for senior roles. The programme team will deliver a Talent and Development approach as part of the organisations commitment to the NHS People Plan, through which the Trust will invest in the future of ethnically diverse leadership.
- 6.1.2.** The Trust will prioritise the delivery of its People Plan objective to create an inclusive workplace by continuing to engage with the voice of ethnic minority staff. It will achieve this by ensuring strong relationships with its well established BAME Staff Engagement Group which includes representation from the BAME staff Networks and is chaired by a HR Director providing senior leadership support to the voice of the group. The group reports into the Workforce Strategic Equality Group which is chaired by the Group Executive Director Workforce and Corporate Business enabling further senior support for the voice of ethnically diverse staff.
- 6.1.3.** Creating understanding and ownership for race equality at a local level is a priority for the Trust. To enable this local understanding and ownership, the Trust will continue to provide all hospitals, managed clinical service, community, and corporate services with their local WRES data annually. This data is utilised to inform local actions towards the delivery of the Trust's strategic objectives to advance race equality.



# The actions the Trust is taking to advance workforce race equality

- 6.1.4.** To further understand and support the progression and promotion of staff from Black, Asian and Minority Ethnic backgrounds the Trust will commit to monitoring the appraisal process and development plans by ethnic group to identify and address any disparity experienced. This will include supporting the aim that all Removing the Barriers members have a progression plan in place by 2023. The Trust will continue to promote the CPD offer available to staff from Black, Asian and Ethnic Minority backgrounds via the MFT and NHSE Leadership Academies.
- 6.1.5.** The Trust will aim to provide all Diverse Recruitment Panels Scheme members with recruitment training and all recruiting managers with recruitment bias training. At a hospital and service level, the Trust will mandate that all roles at bands 8b and above are advertised in ethnic minority press to attract diverse talent.
- 6.1.6.** The Trust will aim to ensure that all HR cases are recorded using the Empactis-Case Manager system. This will enable the annual review of disciplinary cases to be assessed so that any variation in experience or outcome can be identified and addressed.
- 6.1.7.** The Trust will address the finding of the WRES relating to experiences of harassment, bullying or abuse through the implementation of its Choose Kindness Campaign. Choose Kindness will outline a clear zero-tolerance approach to bullying through the delivery of actions plans, guidance and a Trust wide 'Big Conversation'. At a local level, hospital and service will be encouraged to continue to host listening events to engage staff in the Trust level and local WRES actions. The approach to bullying, harassment and abuse is part of the Trust's broader Putting People First programme aimed at strengthening culture around employment issues. It builds on what is already in place such as Freedom to Speak Up and builds on national NHS initiatives such as the NHS violence reduction and the Hate Crime reporting provision at MFT.
- 6.1.8.** The Trust will focus on accreditation for, and the delivery of the Let's Talk About Race and Racism Workshops and Talking About Race and Racism Facilitators Courses throughout 2022, aiming to increase the offer in 2023.



# The actions the Trust is taking to advance workforce race equality

**6.1.9.** The MFT Widening Participation Team will continue to deliver exceptional supported opportunities to attract the best of the talent Manchester has to offer. The Trust offer supported Internships, employment-based study programmes giving students with special educational needs and disabilities the opportunity to develop employability skills, 45% of these students also identify as being from ethnic minority backgrounds. MFT has operated a Supported Internship programme for over 10 years in partnership with a local non-profit support provider and several local educational facilities. The Trust now hosts around 40 interns a year across North Manchester, Trafford, Oxford Road and Wythenshawe sites making it one of the largest employer hosts in the country. The scheme typically sees around 50-60% of learners gaining paid employment at the end of the programme.

Overall, 43% of the participants who access employability programmes at MFT, and 66% of the participants who accessed insight and experience programme identified as being from an ethnic minority background.

The team will continue to proactively monitor demographic information for all activity with the aim to increase and diversify our workforce through targeted engagement with our local communities.



# Appendix A

**Note** The scope for which we are required to report for the WRES are set by NHS England, as outlined in the WRES Technical Guidance.

WRES Indicator	MFT 2020-21		MFT 2021-22		
<b>Indicator 1</b>					
Indicator 1: Percentage of staff in each of the Agenda for Change (AfC) Bands 1-9 and VSM (including Executive Board members) compared with the percentage of staff in the overall workforce.	<b>Trust Total</b>	<b>20.00%</b>	<b>Trust Total</b>	<b>21.75%</b>	<b>6,058</b>
	Band 1	46.70%	Band 1	16.67%	14
	Band 2	21.13%	Band 2	22.84%	960
	Band 3	16.65%	Band 3	17.65%	474
	Band 4	13.43%	Band 4	14.58%	342
	Band 5	24.28%	Band 5	26.97%	1,598
	Band 6	15.47%	Band 6	18.68%	915
	Band 7	11.98%	Band 7	13.91%	421
	Band 8a	9.94%	Band 8a	12.37%	158
	Band 8b	6.91%	Band 8b	6.34%	27
	Band 8c	3.59%	Band 8c	4.98%	11
	Band 8d	2.53%	Band 8d	5.71%	6
	Band 9	0.00%	Band 9	0.00%	0
	VSM	6.67%	VSM	5.06%	4
	Medical & Dental	38.14%	Medical & Dental	44.48%	1,123
	Other Locally Agreed	18.89%	Other Locally Agreed	58.33%	7
			<b>Clinical</b>		
			<b>Trust Total</b>	<b>24.19%</b>	<b>5,038</b>
			Band 1	0.00%	0
			Band 2	27.64%	688
			Band 3	20.65%	235
			Band 4	15.56%	167
			Band 5	28.22%	1,495
			Band 6	19.22%	849
			Band 7	13.62%	344
			Band 8a	12.05%	115
			Band 8b	6.37%	16
			Band 8c	2.04%	2
			Band 8d	2.27%	1
			Band 9	0.00%	0
			VSM	0.00%	0
			Medical & Dental	44.48%	1,123
			Other Locally Agreed	62.50%	5
			<b>Non-Clinical</b>		
			<b>Trust Total</b>	<b>14.53%</b>	<b>1,020</b>
			Band 1	16.67%	14
			Band 2	15.87%	272
			Band 3	15.45%	239
			Band 4	13.76%	175
			Band 5	16.38%	103
			Band 6	13.75%	66
			Band 7	15.34%	77
			Band 8a	13.31%	43
			Band 8b	6.29%	11
			Band 8c	7.32%	9
			Band 8d	8.20%	5
			Band 9	0.00%	0
			VSM	5.88%	4
			Other Locally Agreed	50.00%	2



# Appendix A

WRES Indicator	MFT 2019-20	MFT 2020-21	MFT 2021-22
<b>Indicator 2</b> Relative likelihood of white candidates being appointed from shortlisting compared to black candidates across all posts.	1.67 times more likely	1.42 times more likely	1.66 times more likely
<b>Indicator 3</b> Relative likelihood of black staff entering formal disciplinary process compared with white staff, as measured by entry into formal disciplinary investigation. This indicator will be based on data from a two-year rolling average of the current year and the previous year.	1.13 times more likely	1.86 times more likely	1.06 times more likely
<b>Indicator 4</b> Relative likelihood of white staff accessing non-mandatory training and CPD compared with Black staff.	1.14 times more likely	1.04 times more likely	0.99 times more likely
<b>Indicator 5</b> Percentage of staff experiencing harassment, bullying or abuse from patients, relatives, or the public in last 12 months.	BAME – 23% White – 23%	BAME – 20% White – 21%	BAME – 27% White – 26%
<b>Indicator 6</b> Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.	BAME – 21% White – 16%	BAME – 30% White – 23%	BAME – 33% White – 25%
<b>Indicator 7</b> Percentage believing that trust provides equal opportunities for career progression or promotion.	BAME – 70% White – 86%	BAME – 67% White – 86%	BAME – 40% White – 57%
<b>Indicator 8</b> In the last 12 months have you personally experienced discrimination at work from any of the following Manager/team leader or other colleagues?	BAME – 13% White – 6%	BAME – 18% White – 7%	BAME – 22% White – 8%
<b>Indicator 9</b> Percentage difference between the organisations' Board voting membership and its overall workforce.	BAME – 16.67% The percentage difference between the organisation's Board executive membership and its overall workforce will be: <b>-3.3%</b>	BAME – 16.67% The percentage difference between the organisation's Board executive membership and its overall workforce will be: <b>-4.35%</b>	BAME – 5.56% The percentage difference between the organisation's Board executive membership and its overall workforce will be: <b>-16.19%</b>