



University Hospitals Dorset
NHS Foundation Trust

NHS Workforce Race Equality Standard (WRES)

Annual Report and Action Plan 2024

We are **caring** **one team** **listening to understand** **open and honest** **always improving** **inclusive**

Contents

	Table of Contents	Page
1.0	Executive Summary	3
2.0	Introduction	4
3.0	Workforce Race Equality Standard (WRES) Data 2024	5
4.0	Conclusion and Next Steps	10
5.0	Appendix 1: WRES Action Plan 2024	13

Some useful abbreviations:

- BAME - Black, Asian and Minority Ethnic
- BME - Black Minority Ethnic
- Global majority – Term agreed to replace BME/BAME and reference to minority.
- EDI - Equality Diversity and inclusion
- EDIG - Equality Diversity and Inclusion Group
- FTSU - Freedom to Speak Up (Guardian)
- HR - Human Resources
- OD - Organisational Development
- PCC - People and Culture Committee
- WRES - Workforce Race Equality Standards
- WDES - Workforce Disability Equality Standards
- ICS – Integrated Care System
- IEN – Internationally Educated Nurse



1.0 Executive Summary

The NHS Workforce Race Equality Standard (WRES) is a national standard. It was introduced in 2016 to address the inequalities and less positive lived experience of our ethnically diverse workforce. This is the eighth year of reporting on the WRES and the fourth year for University Hospitals Dorset (UHD).

This report shows the latest dataset for 2024 in relation to these standards and explores whether there have been any significant improvements or deterioration compared with the results from 2023. An updated WRES action plan is also included within the report (Appendix 1), outlining the areas of focus for the Trust in the coming year.

The key findings from the 2024 submission show:

- Black Asian and Minority Ethnic or Global Majority represent 23.87% of the total workforce, an increase of 2.4% from the 2023 data position
- The UHD workforce now shows representation across all bands from Global Majority staff with Global Majority 'Very Senior Manager' representation for the first time
- White candidates remain 1.79 times more likely to be appointed from shortlisting than Global Majority staff
- Staff from our Global Majority are now twice as likely to enter the formal disciplinary process compared to White staff
- Global Majority staff remain less likely than White staff to access non-mandatory training and continued professional development opportunities
- Global Majority staff continue to experience more harassment, bullying or abuse from patients, relatives or the public than White staff
- Global majority staff report a higher level of experiencing harassment, bullying or abuse from other staff compared with White staff
- The perception around the equal opportunities for career progression or promotion within the Trust is lower amongst Global Majority staff than it is for White staff
- Global Majority staff are more than twice as likely as white staff to report personally experiencing discrimination at work by a Manager/Team leader or other colleagues
- The representation of Global Majority staff on the Trust Board is 12.87% with a disparity of -11% compared to organisational representation

Compared to the 2023 WRES data, we have seen a positive and improving trend in a number of indicators, however the disparity gap is still large across a number of indicators. In summary, this report highlights the need for sustained action to address existing racial inequity and discrimination within UHD.

Our 2024 WRES action plan is underpinned by the recently published NHS Equality Diversity and Inclusion Improvement Plan (High Impact Actions) <https://www.england.nhs.uk/long-read/nhs-equality-diversity-and-inclusion-improvement-plan/> and progress will continued to be monitored by our People and Culture Committee.

2.0 Introduction

University Hospitals Dorset NHS Foundation Trust aspires to embed an inclusive culture where diversity is valued and championed at all levels of the organisation.

Through our Trust objectives and values, we aim to:

- promote and deliver equality of opportunity, dignity and respect for all our patients, service users, their carers and families and our people
- eliminate discrimination and harassment and reduce health inequalities

UHD has over 10000 staff serving a population base of 400,300 and in 2011, 84.8% were White British that has now reduced to 82.4% White British [*Census: 2021 ONS*]. It is worth noting that using the WRES Mapping tool and local data obtained from Bournemouth, Poole and Christchurch Council that 8.67% of the local population identified as BME in an earlier WRES report [2022]. We will continue to monitor our data alongside the lived experiences of all our staff.

Throughout this report, we have used the phrase Global Majority whenever possible in the text and when referring to data, the abbreviation BME may have been used. The use of the word minority reinforces disparity and we have reduced its use to within the data labels only. Additionally, the terms BAME or BME, are also commonly extended to Black, Asian and Minority Ethnic. It should be recognised that people sit behind the data and we are aware that staff experience varies in our organisation.

We continue our commitment to understanding staff experience and to engage with staff in a way which respects and advances our commitment to the Trust's value of 'Listening to understand'.

Our staff network groups have been instrumental in providing increased feedback to inform the Trust of the need for change to reduce potential organisational barriers. They are more mature in their development and progress compared to many others in the region; evidenced by invitations to speak with other trusts and recognition at a national level. Our Diverse Ethnicity Network (DEN) is an important group in

supporting the experience of all our staff with membership growing to 300 members and allies.

Our Anti-Racism Plan and Trust Board Statement was approved in August 2023 as the catalyst to a multi-layered and staged campaign to drive a culture of speaking up and challenging inappropriate behaviour, notably racism. By calling out racist behaviour or contextually adopting ‘**anti-racism**’ and educating ourselves we will be working towards improving the experience for all our staff. Without challenge, racism can sit quietly behind structures, damaging everyone affected including the negative impact on our patient care.

UHD anti-racism statement

As the Trust Board of University Hospitals Dorset, we affirm that the Trust is an open, non-judgemental and inclusive organisation that will not tolerate racism or discrimination. We celebrate the diversity of our staff and community. We will treat all our staff equitably, with dignity and respect, whatever their race, gender, religion, age, disability or sexual orientation.

27 July 2023

In June 2023 we launched our See ME First campaign, a staff-led initiative aimed at supporting and educating staff towards ending discrimination in the workplace.

Through See ME First, we have individually asked people to pledge to **challenge** discrimination when we see it and **support** any staff that experience discrimination by **listening** and encouraging them to **speak up** through the appropriate channels.

3.0 Workforce Race Equality Standard (WRES) Data 2024

The NHS Workforce Race Equality Standard (WRES) was introduced in 2016 to address the inequalities experienced by our Global Majority. There are 9 indicators developed from data sourced from Human Resource records and the 2023 NHS Staff Survey. A summary of our 2024 WRES Indicators (1 – 9) is shown in Figure 3.4.

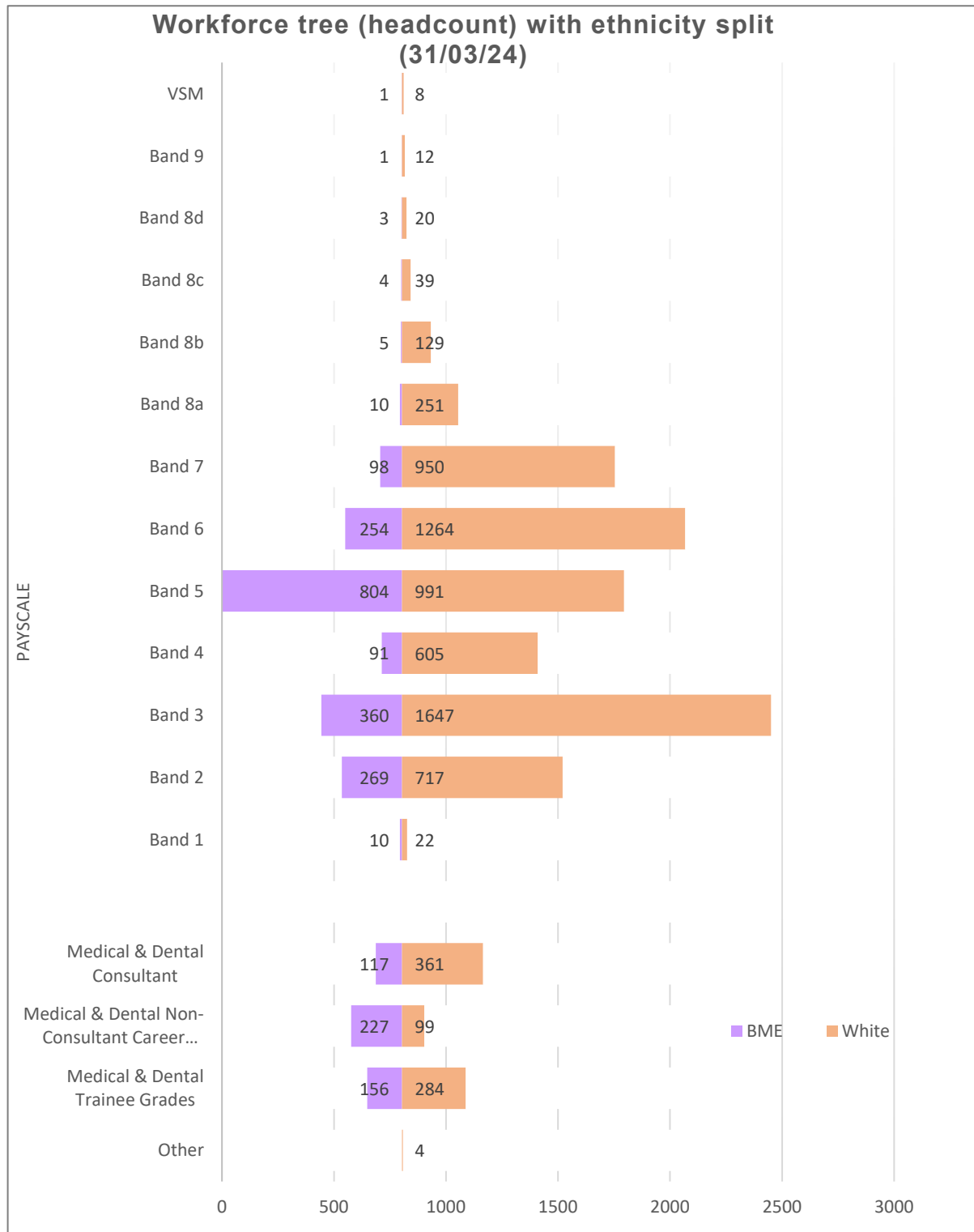
Whilst it is evident from the national and local data that there has been some improvement in 2024, behind the indicators hundreds of staff including those from all Protected Characteristics continue to report bullying, harassment and discrimination.

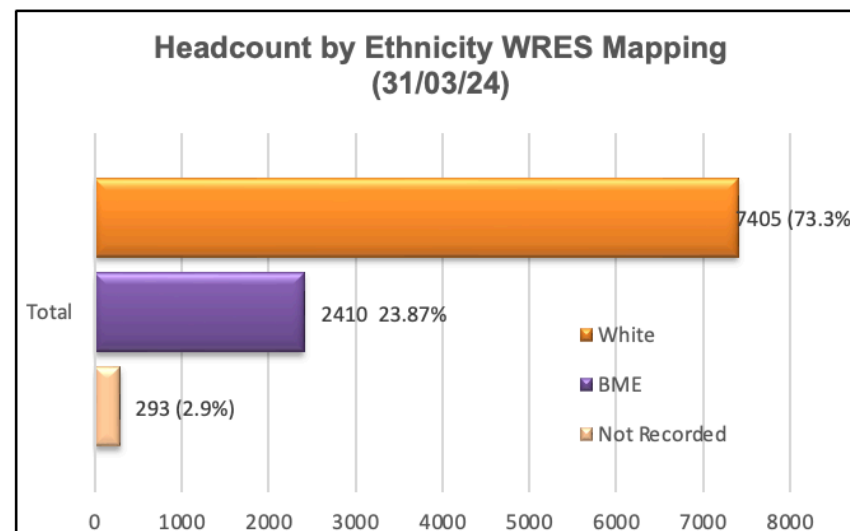
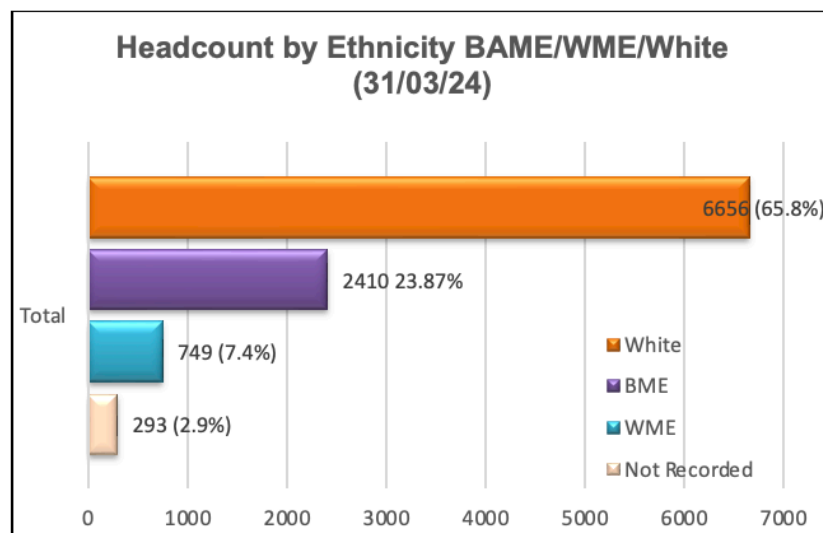
Indicator 1: Percentage of staff in each AfC Band 1-9 and VSM compared to overall workforce

- The overall workforce sample has increased to over **10,000**.
- Black Asian and Minority Ethnic or Global Majority represent **2,410 or 23.87%** of the total workforce increasing from 21.5% reported in 2023
- Ethnicity declarations remain high and above 97%
- The White Minority Ethnic group (**WME**) **has increased to 749**, 7.4% from 692, 7.2% reported in 2023

The UHD workforce now shows representation across **all bands** from Global Majority staff. UHD has Global Majority 'Very Senior Manager' representation for Indicator 1 for the first time (11.1%). See Figure 3.1.

Figure 3.1: WRES Indicator 1 Workforce Tree





	31/03/2022		31/03/2023		31/03/2024	
Ethnicity (Grouped)	Headcount	%	Headcount	%	Headcount	%
Asian	872	9.12%	1044	10.75%	1181	11.68%
Black	267	2.79%	336	3.46%	469	4.64%
Chinese	57	0.60%	51	0.52%	53	0.52%
Not Known	313	3.27%	288	2.96%	293	2.90%
Other	370	3.87%	381	3.92%	408	4.04%
White	7441	77.84%	7340	75.55%	7405	73.26%
Mixed	239	2.50%	276	2.84%	299	2.96%
Grand Total	9559	100.00%	9716	100.00%	10108	100.00%

Race / Ethnicity

There are now 23.87% of staff declaring BME this has increased from 21.5% reported in 2023. There are now 804 BME Staff at band 5, an increase from 704 reported on the 31 March 2023. Diverse ethnicity is now represented across all bands.

Figure 3.2: WRES Indicator 1 Ethnicity (WRES Mapping from our Staff Record)

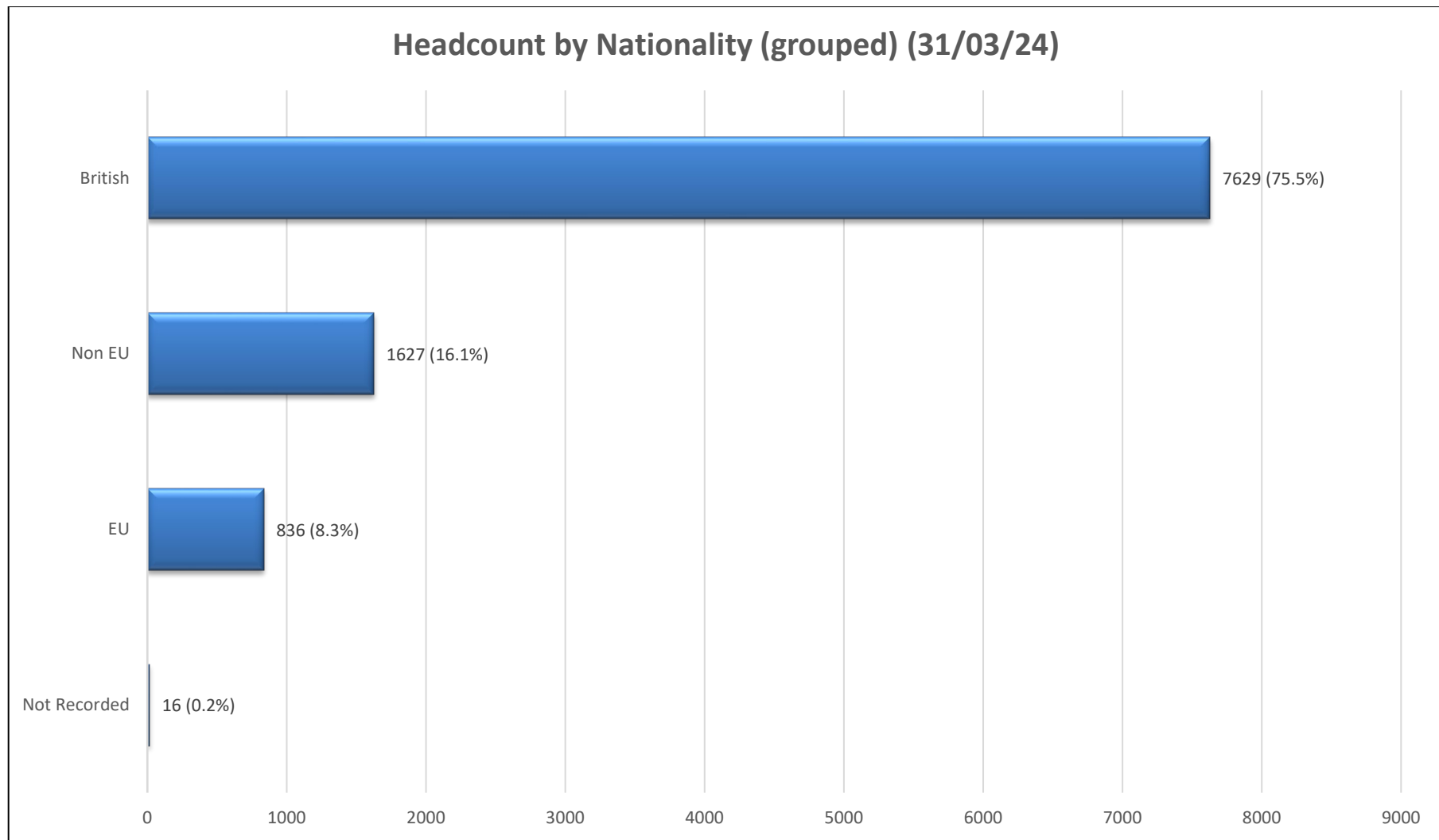


Figure 3.3: WRES Indicator 1 Ethnicity (WRES Mapping from our Staff Record)

Indicator 2: Relative likelihood of BME staff being appointed from shortlisting

White candidates remain **1.79** times more likely to be appointed from shortlisting, although the position has improved since **1.9** reported in 2023. The Dorset Integrated Care System EDI group are developing new Inclusive Recruitment guidance. At UHD recruitment for senior positions benefit from staff network participation. Inclusive Recruitment could be more equitable with trained Recruitment Champions.

Indicator 3: Relative likelihood of staff entering a formal disciplinary process

Staff from our Global Majority are now **twice** as likely to enter the formal disciplinary process compared to White staff. This could be attributable to the seriousness of the cases, however better cultural understanding and application of Civil and Just Culture could prevent colleagues entering into a process that could have been managed more informally.

Indicator 4: Relative likelihood of staff accessing non-mandatory training and CPD

The relative likelihood of White staff accessing non-mandatory training remains around **0.9** providing a better opportunity for White staff compared to Global Majority Staff. Allocation of Continuous Professional Development and non-mandatory training should be Equality Impact Assessed, and demographic reporting should be undertaken.

Indicator 5: Percentage of staff experiencing harassment, bullying or abuse from patients, relatives, or the public

2023 – White: 27.9%, BME: 34.1%

2024 – White: 26%, BME: 30%

Compared to last year, the percentage of Global Majority staff experiencing harassment, bullying or abuse from patients, relatives or the public is reported at 30%, a reduction of 4%. Although the disparity of experience compared to White staff has lessened this year, there continues to be a disparity of 4%.

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

2023 – White: 18.2%, BME: 31.7%

2024 – White: 22.5%, BME: 25%

This year's data indicates that Global Majority staff experience more harassment, bullying or abuse by staff than White staff. The experience for Global Majority staff is reported at 25% in comparison to 22.5% for White staff. Although the disparity of experience compared to White staff has lessened this year, there continues to be a disparity of 2.5%.

Although we can report an improving position, the response rates in Indicators 5 and 6 represent a relatively large number of staff experience harassment, bullying or abuse from colleagues and service users. To make staff aware of the impact they have on each other we will be looking to roll out *Conscious Inclusion* and *Inclusive Leadership* workshops on a wider scale.

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

The percentage of staff personally experiencing discrimination at work from a manager/team leader or other colleague has reduced however the visual gap remains in the same way as WRES 5 and

6. Our anti-racism campaign has continued with resources now available to help staff listen, speak up, challenge and support those affected by discrimination.

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

Global Majority Staff report opportunities for career progression less favourably than White staff. The NHS Staff Survey for 2023, q24b shows a more favourable position. The spike in 2021 was due to the change in the NHS Staff Survey.

Indicator 9: % difference between the organisations' Board voting membership and its overall workforce

The appointment of new board members has reduced the UHD workforce gap which is also lower than the national position. The gap reported in 2024 has reduced to 11% compared to the national position reported in 2023 (15%).

4.0 Conclusions and Next Steps

Based on a comparison to the 2023 data we have seen improvements in some indicators. However, the disparity gap is still large across a number of indicators and the level of discrimination, harassment and bullying experienced by staff remains a significant concern.

In this reporting period our external auditor has undertaken a review of our staff networks to inform future alignment to the Trust's needs and provided revised governance suggestions.

The WRES action plan (Appendix 1) sets out in detail the actions the Trust will take to achieve improvements against these indicators.

Figure 3.4: Summary WRES Indicators 1 – 9

WRES indicators		2021	2022	2023	2024 [1/4/23 –31/3/24]	Trend	2023 national
1. Percentage of black and minority (BME) staff [See also WRES metric 1 charts]	Overall %	16.8	18.7	21.5	23.87	↑	26.4
2. Relative likelihood of white applicants being appointed from shortlisting across all posts compared to BME		1.26	2.09	1.9	1.78	↑	1.59
3. Relative likelihood of BME staff entering the formal disciplinary process compared to white staff		1.17	1.22	1.0	1.97	↓	1.03
4. Relative likelihood of white staff accessing non-mandatory training and CPD compared to BME staff		1.11	0.79	0.9	0.91	—	1.12
5. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months	BME %	27.0	30.0	34.1	30.0	↑	30.5
	White %	25.0	26.3	27.9	26.0		26.9
6. Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months	BME %	29.0	31.1	31.7	25.0	↑	27.5
	White %	22.0	23.9	22.5	18.0		21.7
7. Percentage of staff believing that trust provides equal opportunities for career progression and promotion	BME %	78.0	44.5	45.7	46.0	—	46.7
	White %	90.0	60.0	60.1	61.0		59.4
8. Percentage of staff personally experiencing discrimination at work from a manager/team leader or other colleague	BME %	17.0	16.8	20.3	16.0	↑	16.4
	White %	6.0	7.4	5.4	5.0		6.6
9 BME board membership [% difference]	[% difference]	13.7	12.2	15.0	11.0	↑	15.6

Appendix 1: WRES Action Plan

WRES Metric	Alignment to NHS England High Impact Action	Actions	Timescale	Lead
WRES 1. Percentage of staff in each of the AfC Bands 1- 9 and VSM (including executive Board members) compared with the percentage of staff in the overall workforce.	HIA2	Increase the number of Global Majority Staff at Band 6 Level and above by 3%: <ul style="list-style-type: none"> Adopt Inclusive recruitment processes to ensure equity Review Talent Management Process and take positive action Monitor TRAC shortlisting Monitor disparity ratio for whole career progression 	18 - 36 months	Chief People Officer Chief Nursing Officer / Director of Organisational Development Recruitment Lead
WRES 2. Relative likelihood of white applicants being appointed from shortlisting across all posts compared to BME applicants.	HIA2	Adopt a 'one stop shop' inclusive recruitment approach: <ul style="list-style-type: none"> Review policy, guidance and training for best practice Consider Recruitment Champions to participate in selection processes 	March 2025	Chief People Officer Head of OD/ Recruitment Lead/EDI Lead
WRES 3. Relative Likelihood of BME staff entering the formal disciplinary process compared to white staff.	HIA6	Adopt a consistent approach to managing ER cases: <ul style="list-style-type: none"> focused approach on early informal outcomes and <i>Civil and Just Culture</i> 	December 2024	Associate Director of HR Operations EDI Lead Freedom To Speak up Guardian
WRES 4. Relative likelihood of White staff accessing non-mandatory training and CPD compared to BME staff.	HIA2	Review access to CPD and non-mandatory training: <ul style="list-style-type: none"> collect demographic data on applicants ensure talent management process allows positive action 	Review January 2025	Associate Director of Education / Director of Organisational Development
WRES 5. Percentage of BME staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months	HIA6	Promote zero tolerance through an Anti-Racism statement and guidance: <ul style="list-style-type: none"> See ME First campaign Develop cultural awareness and inclusive leadership workshops Implement BDO DEN Staff Network recommendations Increase listening events and open space discussions 	Ongoing/ September 2024	CEO and Board Directors [CPO/DoOD] Head of OD/ EDI Lead / Comms / DEN Network

WRES Metric	Alignment to NHS England High Impact Action	Actions	Timescale	Lead
WRES 6. Percentage of BME staff experiencing harassment bullying or abuse from staff in the last 12 months		As above		CEO and Board Directors [CPO/DoOD] Head of OD/ EDI Lead / Comms / DEN Network
WRES 7. Percentage of BME staff believing that the Trust provides equal opportunities for career progression or promotion	HIA 5	Ensure 100% of internationally recruited colleagues have personal development plans [monitored through appraisal rates): <ul style="list-style-type: none"> Comprehensive induction and support package in place for Internationally Recruited Staff Undertake a review of talent management programmes and identify opportunities to support the development of BME leaders of the future 	18 - 36 months	Chief Nursing Officer Director of OD EDI Lead
WRES 8. Percentage of BME staff personally experiencing discrimination at work from a manager/team leader or other colleagues	HIA6	Reduction in % of colleagues experiencing discrimination on grounds of racism [as reported through the NHS Staff Survey]: <ul style="list-style-type: none"> Commence cultural awareness through <i>Conscious Inclusion</i> and <i>Inclusive Leadership</i> Workshops with Dorset ICS and bespoke for UHD Anti-Racism and See ME First Campaign and guidance 	September 2024 On-going On-going	Director of OD Head of OD EDI Led Staff Networks Comms
WRES 9. BME Board Membership	HIA1	EDI Objectives for board members set by the Chairman as part of the annual appraisal process	September 2024	Chairman / CEO