

July 2023  
WRES Report

**NHS**

East and North  
Hertfordshire  
NHS Trust

# Workforce Race Equality Standard (WRES) Report 2023



## 1. Introduction and Scope

Since its introduction in 2015, NHS England's Workforce Race Equality Standards (WRES) programme has been providing direction and tailored support to the NHS, enabling organisations to continuously improve their performance. The WRES has required NHS trusts to annually self-assess against nine indicators of workplace experience and opportunity in relation to race, and to develop and implement robust action planning for improvement.

This interim report focusses on ENHT returns as national and regional data is unavailable currently. An updated, fuller version of the report will become available once the national and regional data sets are published to us in early Autumn.

ENHT has committed to making anti-racism a reality<sup>1</sup>, incorporating respect, dignity and human rights, and by ensuring equitable opportunities free from discrimination for people with protected characteristics as defined by the Equality Act 2010.

ENHT is committed to becoming a leading organisation in promoting equality, diversity, and inclusion in Hertfordshire, by creating a place where every person in our organisation is responsible for enabling an environment which is supportive, fair, and free from discrimination.

This report seeks to understand trends and patterns of inequality and outlines detailed information about our Black, Asian, and Minority Ethnic (BAME) staff, covering the period April 2022 to March 2023, and documents our progress, continuing work, and actions still to deliver equity in relation to the national NHS Workforce Race Equality Standard (WRES).

## 2. Context

The WRES contains nine indicators covering workforce data, national NHS Staff Survey results and Trust Board composition as follows:

1. Percentage of staff in each of the NHS pay bands 1-9, plus those on Medical & Dental and Very Senior Managers contracts (including Executive Board members) compared with the percentage of staff in the overall workforce
2. Relative likelihood of staff being appointed from shortlisting across all posts
3. Relative likelihood of staff entering the formal disciplinary process
4. Relative likelihood of staff accessing non-mandatory training and CPD
5. Percentage staff experiencing harassment, bullying or abuse from patients, relatives, or the public in the last 12 months (from NHS Annual Staff Survey)
6. Percentage staff experiencing harassment, bullying or abuse from staff in the last 12 months (from NHS Annual Staff Survey)
7. Percentage staff believing that the organisation provides equal opportunities for career progression or promotion (from NHS Annual Staff Survey)
8. Percentage staff having personally experienced discrimination at work from manager, team leader, or other colleagues in the last 12 months (from NHS Annual Staff Survey)
9. Percentage difference between the organisations' Board voting membership and its overall workforce.

All work undertaken in 2022/23 is underpinned by the People Strategy four pillars (Work, Grow, Thrive & Care together) and by working together through and with our staff diversity networks, we continue to ensure our staff networks flourish and we continue to champion the principles of intersectionality, whilst continuing delivery of the equity and inclusion agenda. As opportunities arise

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<sup>1</sup> Making anti-racism a reality, East of England Race Strategy 2021 (Appendix 1)

at Board and senior level, we will increase diversity. Our freedom to speak up guardian work and people policy reviews continue to support and enable staff to speak up about their experiences and to confidentially raise concerns to be addressed and resolved.

### 3. Our priority areas of focus 2022/23

From our 2022 WRES report the following key areas of focus were identified for the 2022/23 period:

1. Consistently improve our standing on the likelihood of BAME staff entering formal disciplinary processes compared to white staff
2. Ensuring equity of access to development opportunities
3. Increasing diversity at senior and board level roles.
4. Interventions to debias local policy and procedures,
5. Co-create equitable, inclusive environments and recognise and appreciate differences through cultural change approaches

The national WRES team identified three top priorities for ENHT to focus on:

High priority areas for improvement within the Trust (to a maximum of three):
Indicator 9: Board representation (overall, voting members, and executive members)
Indicator 8: discrimination from a manager/team leader or other colleagues in last 12 months against BME staff
Indicator 6: harassment, bullying or abuse from staff in last 12 months against BME staff

### 4. Progress:

We have seen improvements in 1 and 2 above and the narrative is contained in section 4c-f below, there is good progress however there is more to achieve in both areas. We recognise in priority 3 above, that there is significant work to continue to increase BAME diversity at board and senior levels, many improvements have been achieved in inclusive recruitment and targeted positive action campaigns are supporting us improve.

In relation to 4 above, a range of programmes have taken place including cultural intelligence development with the Board, civility and kindness development work and developing our freedom to speak up culture. These continue to build relations and create psychological safe spaces for staff to speak up whilst encouraging and empowering staff to use our policies and processes to raise matters formally, where informal approaches are unsuccessful. The people policies have been updated, with a clear Speak Up Policy launching in July 2023. Further work is planned to redevelop core people policies and embed restorative justice practices appropriately within policies such as grievance and disciplinary and demystifying language in these policies is key throughout 2023/24.

For 5 above we continue to triangulate staff survey results, complaints, and reported incidents identify teams where cultural change approaches are needed and we have provided a range of interventions and support to improve these areas; an example – significant improvements in People Team staff survey outcomes. In the last year we have delivered extensive workshops on civility saves lives; redesigned and launched our ENHT values and team workshops where team charters emerge on healthy behaviour and bring the values to life, healthy leadership programme, team talks on staff survey results and actions developed and owned locally. Our staff network events both celebrate and challenge us in this space.

Two of the three nationally defined priorities have small improvements however representation at Board and senior level has more to achieve and deliver.

The 2022 WRES report outlined a comprehensive delivery work plan and the above demonstrates delivery of some of this work and the deliverables for 2023 – 2024 are outlined in the section 7 of this interim report.

## 5. Current Workforce Race Equality Standard (WRES)

a. ENHT data from 2019/20 to 2022/23 is shown in the table below and narrative for ENHT 2023-2025 is set out in **4c-g** below.

b. WRES comparison regional and national data 2022 is the most up to date currently available

Workforce Race Equality Standard (WRES) Indicators	East & North Herts (ENHT) WRES Data						WRES Comparison to Regional & National Data	
	Staff	ENHT 2019/2020	ENHT 2020/2021	ENHT 2021/2022	ENHT 2022/2023	ENHT WRES Progress in comparison to last year	East of England WRES 2021/2022	National WRES 2021/2022
WRES 1 – Overall workforce % by Ethnicity	White	62.1%	59.6%	56.7%	55.2%	Increase in Workforce Diversity	69.9%	71.3%
	BAME	31.9%	32.6%	34.5%	37.7%		25.3%	24.2%
	Unknown	6.0%	7.7%	8.8%	7.1%	Improvement	4.8%	4.5%
WRES 2 - Relative likelihood of White staff being appointed from shortlisting compared to BAME staff		1.57	1.32	1.39	1.34	Improvement	1.96	1.54
WRES 3 - Relative likelihood of BAME staff entering the formal disciplinary process compared to White staff		1.44	2.25	1.41	1.47	More work to be done	1.11	1.14
WRES 4 - Relative likelihood of White staff accessing non-mandatory training and CPD compared to BAME staff		1.35	1.22	1.37	0.86	Improvement	1.01	1.12
WRES 5 - Percentage of BAME staff experiencing harassment, bullying or abuse from patients, relatives, or the public in last 12 months		BAME 29.6%	BAME 30.6% White 25.9%	BAME 34.6% White 30.4%	BAME 32.2% White 32.2%	Improvement	BAME 30.6% White 28.1%	BAME 29.2% White 27.0%
WRES 6 - Percentage of BAME staff experiencing harassment, bullying or abuse from staff in last 12 months		BAME 31.2%	BAME 32.7% White 25.1%	BAME 31.1% White 26.5%	BAME 30.8% White 26.5%	Improvement	BAME 27.6% White 24.7%	BAME 27.6% White 22.5%
WRES 7 – Percentage of BAME staff believing that Trust provides equal opportunities for career progression or promotion		BAME 76.5%	BAME 69.9% White 83.8%	BAME 49.2% White 55.0%	BAME 50.2% White 54.7%	Improvement	BAME 56.8% White 45.5%	BAME 44.4% White 58.7%
WRES 8 - Percentage of BAME staff personally experienced discrimination at work from Manager/team leader/other colleagues		BAME 15.9%	BAME 19.6% White 7.2%	BAME 16.8% White 7.4%	BAME 15.8% White 8.9%	Improvement	BAME 17.8% White 7.7%	BAME 17.0% White 6.8%
WRES 9 - Percentage of voting members of the Board representation by ethnicity	White	100.0%	100.0%	91.7%	100%	More work to be done	-	-

### **c. WRES Data Key Findings**

The overall representation of minority ethnic staff is 37.7% and has continued to increase year on year, however when analysing the data further this representation is varied across different staff professions: health care sciences, nursing & midwifery and scientific and technical roles are at or above 37%; allied health professionals sits at 34% whereas admin and clerical roles have 18% representation.

It remains the case that all data sets show better representation in lower band roles, with decreasing representation in more senior roles across all staffing groups. In the last 12 months changes in board and VSM roles has impacted the level of representation in relation to WRES, though it should be noted that both sets of groups contain other protected equality characteristics. A particular current opportunity exists to attract and encourage BAME candidates to apply to support ENHT increasing board representation following the recent resignation of the current Trust Board chair.

### **d. WRES Indicators 1-4**

White staff are 1.34 times (approx. 6.5%) more likely to be appointed from shortlisting, compared to minority ethnic staff, however this gap continued to close slightly compared last year. The data shows more minority ethnic staff are applying for roles and being successful at shortlisting stage compared to three years ago, demonstrating our minority ethnic staff are keen to apply for roles, yet not as successful in securing senior roles, work continues to engage development programmes to support the gap, and we have also introduced an ICS-wide agreed item on all job descriptions setting out behaviours required around equality, diversity and inclusion alongside an inclusivity commitment statement and clear essential criteria on diversity and inclusion, tailored to band of role. Analysis on success of development programmes will happen in due course and be available in the wider update to board in Autumn.

The Trust saw a spike in 2020/21 on likelihood of minority ethnic staff experiencing formal disciplinary procedures, however, the 2023 data shows a slight increase this year. We continue to utilise a checklist introduced to determine whether any disciplinary case, regardless of ethnicity, has merit to progress to formal stages. Other work continues to better understand the processes and behaviours between managers and staff by supporting managers and staff to explore and resolve tension and conflict through psychological safe facilitated conversations.

The relative likelihood of White staff accessing non-mandatory training and CPD compared to BAME staff metric has moved significantly from 1.37 in 2021/22 to 0.86 in 2022/23, this directly reflects work undertaken to increase the importance of development for all and focus on ensuring CPD opportunities and apprenticeships are promoted across the organisation and more promotion of opportunities through staff networks and other informal channels e.g., email cascades of course places.

### **e. WRES Indicators 5-8**

We have seen an improvement and decrease of 21% of BAME staff saying they experience discrimination at work from a manager / team leader or other colleagues. The metrics of indicators five to eight are represented in the staff survey results. The 2022 staff survey results showed an increase in staff completing by 5% demonstrating that more people are sharing their experiences. Whilst we were broadly average against

benchmark comparators, themes such as ‘morale’ and ‘we are always learning’ have become areas requiring focus. Work has continued around speaking up and safety of staff at work throughout 2022/23.

Work will continue to educate our staff and communities on incivility and its impact. Our civility saves lives film is being used externally and we refreshed our Trust values, encouraging and building confidence for all our staff to positively challenge and challenge uncivil behaviour. As we increase psychological safety in the workplace, this in turn will see staff survey results show a decline initially and then increase staff’s ability to positively advocate for others.

#### **f. Model Employer**

Model Employer targets were set in 2018 over a 10-year period through to 2028 and the NHS People Plan 2020 set an ambition to increase senior leader representation by 2025 to equate to either the organisational or community percentage, whichever is highest.

In ENHT the overall representation of BAME workforce currently sits at 37.5% as of March 23 compared to 19.2% in the Hertfordshire County.

Progress is being made with greater proportionate representation at band 8a and above, however, there is less representation at the most senior levels and model employer targets are not being met for all grades. Transparency is a key step towards achieving our model employer goals and we need to proactively be more inclusive considering our structural and procedures barriers requiring everyone’s input. This additionally involves looking beyond operational changes and enabling cultural and transformational changes.

ENHT will improve on its mission of providing high quality, compassionate care to its community where it represents both people it employs at all levels and the population it serves.

The tables below show targets and our data as at April 2023 and progress against targets:

Model employer targets set over 10 years

	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028
<b>Band 8a</b>	29	31	33	36	38	40	42	44	46	49	51
<b>Band 8b</b>	11	12	12	13	13	14	15	15	16	16	17
<b>Band 8c</b>	12	12	12	12	12	12	12	12	12	12	12
<b>Band 8d</b>	0	1	1	2	2	3	3	4	5	5	6
<b>Band 9</b>	1	1	1	2	2	2	2	2	2	3	3
<b>VSM</b>	0	1	1	2	3	4	4	5	6	6	7

## Year on year comparison (from band 5)

	Sep-20	Sep-21	Sep-22	Mar-23	Movement from Sept 22
Band 5	525	579	646	702	56
Band 6	307	317	374	415	41
Band 7	145	153	166	192	26
Band 8A	38	46	50	57	7
Band 8B	18	19	19	18	-1
Band 8C	11	11	10	10	0
Band 8D	5	5	8	8	0
Band 9	1	1	1	1	0
VSM	0	2	0	0	0
Grand Total	1050	1133	1274	1402	129

## Performance against target

Row Labels	BAME	Model employer targets	Target met?
Band 8A	57	40	Y
Band 8B	18	14	Y
Band 8C	10	12	N
Band 8D	8	3	Y
Band 9	1	2	N
Trust Pay	0	4	N
Grand Total	94	75	50%

The tables demonstrate in March 2023 we meet and exceeded set targets across grades 8a; 8b and 8d; however, more work to do across Band 8c, 9 and VSM on representation.

There are real opportunities for the Trust with the announcement of the current Trust Chair stepping down and where other board roles tenures are due to expire in the coming 12/24 months opportunity continues.

## 6. Medical Workforce Race Equality Standard (MWRES)

In 2020 the Medical Workforce Race Equality Standard (MWRES) was introduced. The table below shows the profile of this staff group for ENHT from 2020 to 2023.

MWRES	2020			2021			2022			2023		
	White	BAME	Unknown	White	BAME	Unknown	White	BAME	Unknown	White	BAME	Unknown

<b>Consultants</b>	46%	48%	7%	43%	47%	10%	43%	47%	11%	45%	50%	5%
<b>Other Doctor Grades</b>	20%	61%	18%	20%	60%	20%	14%	59%	27%	20%	73%	7%
<b>Junior Doctors</b>	34%	49%	18%	29%	42%	28%	29%	45%	26%	37%	56%	7%
<b>TOTAL</b>	<b>36%</b>	<b>51%</b>	<b>14%</b>	<b>32%</b>	<b>48%</b>	<b>20%</b>	<b>31%</b>	<b>49%</b>	<b>20%</b>	<b>37%</b>	<b>57%</b>	<b>6%</b>

The table demonstrates improvement in disclosure of equality data more generally, attributable to direct campaigns through networks, engagement and other forums as to the importance of enabling data evidence for decision making and increasing awareness of our organisational profile, overall a 14% improvement.

Over half of our medical workforce identify as Black, Asian or ethnic minority and ENHT engaging and understanding the lived experience can bring significant differences, an example is current work happening in maternity services with our junior doctors to hear how we can improve their placement experiences and learn back into the organisation, this has seen more engagement from consultants and midwives and is creating more psychologically safe working environments.

## 7. Areas of Focus and review of Actions 2023/24

Within the Healthy Culture team service, the EDI manager holds overall responsibility for the progress of inclusion for the Trust, supported through staff networks and the people partner team along with senior leadership and wider staff, the EDI manager objectives are contained at Appendix 3 for information for 2022/23. All work in this space, must include collaboration with the People Intelligence, Planning and Analytics team (PiP) to further look at WRES data at divisional level, produce our medical WRES and temporary workers (NHSP WRES) data submissions.

EDI objectives historically have been set in view of metrics from various data such Workforce Disability Equality Standard (WDES), Workforce Race Equality Standard (WRES), Gender Pay Gap (GPG), themes from NHS Staff survey, qualitative input from staff Networks and we now move to a more holistic approach to deliver and embed changes and work needed to continue to improve our standing with inclusion in the Trust and we will align future actions against the areas of the National EDI improvement action plan, show in the diagram below:

## NHS equality, diversity, and inclusion improvement plan (page 7)

[https://www.england.nhs.uk/wp-content/uploads/2023/06/B2044\\_NHS\\_EDI\\_Workforce\\_Plan.pdf](https://www.england.nhs.uk/wp-content/uploads/2023/06/B2044_NHS_EDI_Workforce_Plan.pdf)

# High-impact actions

This plan prioritises the following six high impact actions to address the widely-known intersectional impacts of discrimination and bias.

**Measurable objectives on EDI for Chairs Chief Executives and Board members.**

**Success metric**

1a. Annual Chair/CEO appraisals on EDI objectives via Board Assurance Framework (BAF).



**Overhaul recruitment processes and embed talent management processes.**

**Success metric**

2a. Relative likelihood of staff being appointed from shortlisting across all posts  
2b. NSS Q on access to career progression and training and development opportunities  
2c. Improvement in race and disability representation leading to parity  
2d. Improvement in representation senior leadership (Band 8C upwards) leading to parity  
2e. Diversity in shortlisted candidates  
2f. NETS Combined Indicator Score metric on quality of training



**Eliminate total pay gaps with respect to race, disability and gender.**

**Success metric**

3a. Improvement in gender, race, and disability pay gap



**Address Health Inequalities within their workforce.**

**Success metric**

4a. NSS Q on organisation action on health and wellbeing concerns  
4b. National Education & Training Survey (NETS) Combined Indicator Score metric on quality of training  
4c. To be developed in Year 2



**Comprehensive Induction and onboarding programme for International recruited staff.**

**Success metric**

5a. NSS Q on belonging for IR staff  
5b. NSS Q on bullying, harassment from team/line manager for IR staff  
5c. NETS Combined Indicator Score metric on quality of training IR staff



**Eliminate conditions and environment in which bullying, harassment and physical harassment occurs.**

**Success metric**

6a. Improvement in staff survey results on bullying / harassment from line managers/teams (ALL Staff)  
6b. Improvement in staff survey results on discrimination from line managers/teams (ALL Staff)  
6c. NETS Bullying & Harassment score metric (NHS professional groups)



The table below shows the work undertaken over the last year and into the remainder of 2023/24 on our WRES.

## WRES Action Plan Update and Plans for 2023/24

Objective	Actions	Metrics	Updates at July 2023	RAG rating
<b>Equality, Diversity and Inclusion training</b>  To increase the view of BAME staff believing that trust provides equal opportunities for career progression or promotion	First steps towards - Leading inclusively with Cultural intelligence  Plans to launch Reciprocal Mentoring for Inclusion in Sep 2022 and launch programme and create data base of mentors ICS and Inclusive Career Development Programme for BAME and Disabled members of staff  Engaging on Regional Maternity/Neonatal Equity & Inclusion Ambassador scheme  Diversity in Health and Care Partners programme  Restorative Just Culture – engagement with Mersey Care NHS FT	<b>WRES 8</b> - Percentage of BAME staff personally experienced discrimination at work from Manager/team leader/other colleagues  <b>WRES 2</b> - Relative likelihood of White staff being appointed from shortlisting compared to BAME staff  <b>WRES 4</b> - Relative likelihood of White staff accessing non-mandatory training and CPD compared to BAME staff  <b>WRES 7</b> – Percentage of BAME staff believing that trust provides equal opportunities for career progression or promotion  <b>WRES 5 &amp; 6</b> - Percentage of BAME staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months / Percentage of BAME staff experiencing harassment, bullying or abuse from staff in last 12 months	<ul style="list-style-type: none"> <li>Board and senior leader master class completed on cultural intelligence training</li> <li>Reciprocal mentoring launches July 12, 2023 with 20 pairs – programme supported by an external facilitator and run for 1 year</li> <li>Maternity programme to launch later in 2023</li> <li>Specific programmes from system and national shared widely informally and formally to increase take up</li> <li>Head of ERAS and EDI and others trained in restorative just culture and wider sessions planned for early 2024</li> </ul>	<b>Green</b>  <b>Amber – Green</b>  <b>Amber</b>  <b>Amber – Green</b>  <b>Green</b>
<b>Inclusive recruitment</b>  Ensuring fairness in recruitment and selection	Positive action and practical support for candidates	<b>WRES 1</b> – Overall workforce % by Ethnicity  <b>WRES 2</b> - Relative likelihood of White staff being appointed from	<ul style="list-style-type: none"> <li>Recruitment and Selection Training now includes greater focus on ED&amp;I &amp; values based recruitment, &amp; includes unconscious bias,</li> </ul>	<b>Green</b>  <b>Green</b>

<p>process with attention given to employee life cycle.</p> <p>To deliver a representative workforce that reflects the community and delivers on model employer targets</p>	<p>Accountability and assurance framework in recruitment reviewed</p> <p>Secondment policy to be created and ratified, soon to be published, to support equity in opportunities within the Trust</p> <p>Onboarding and induction seamless and consistent for all</p> <p>Board representation and 8D increase in diversity</p>	<p>shortlisting compared to BAME staff - Relative likelihood of White staff being appointed from shortlisting compared to BAME staff</p> <p><b>WRES 7</b> – Percentage of BAME staff believing that Trust provides equal opportunities for career progression or promotion</p> <p><b>WRES 9</b> - Percentage of voting members of the Board representation by ethnicity</p>	<p>job descriptions, person specifications and adverts</p> <ul style="list-style-type: none"> <li>Secondment Policy Launched April 2023 with review of all current secondments to complete by Sept 23</li> <li>Improved induction in place since Feb 2023 and review of e-learning underway throughout year</li> <li>Vacancy arising at board provides opportunity</li> </ul>	<p><b>Green – Amber (work to communicate required)</b></p> <p><b>Green</b></p> <p><b>Amber- Red</b></p>
<p><b>Engage on Anti-Racism strategy</b></p> <p>Reducing uncivil behaviour and raising awareness of discrimination in all forms, and creating advocates and allies across the workforce</p> <p>Reducing incidents of discrimination and experience of bullying and harassment in the workplace measured through staff survey</p>	<p>Launching the See ME Fist campaign</p> <p>Delivery of civility saves lives programme and staff values charters for local teams</p> <p>Board representation and 8D increase in diversity</p>	<p><b>WRES 5 &amp; 6</b> - Percentage of BAME staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months / Percentage of BAME staff experiencing harassment, bullying or abuse from staff in last 12 months</p> <p><b>WRES 5 &amp; 6</b> - Percentage of BAME staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months / Percentage of BAME staff experiencing harassment, bullying or abuse from staff in last 12 months</p> <p><b>WRES 8</b> - Percentage of BAME staff personally experienced discrimination at work from Manager/team leader/other colleagues</p>	<ul style="list-style-type: none"> <li>Scheme launched in late 2022 early 2023 with many in brief articles and continues alongside celebration events</li> <li>Values team talks and civility saves lives celebrated its first year and both are being embedded in the organisation</li> <li>Opportunity to increase representation at board into 2023/24 due to vacancies and tenures expiring</li> </ul>	<p><b>Green</b></p> <p><b>Green</b></p> <p><b>Amber</b></p>

<p><b>Launch of two new documents, ENHT ED&amp;I policy underpinned by our ENHT Equity &amp; Inclusion strategy.</b></p> <p>The two documents will foster a co-production approach with staff side and staff networks and all relevant stakeholders to ensure its effectiveness, inclusivity, and sustainability.</p> <p>To increase morale and engagement – by creating a better feeling of inclusion and belonging people are happier, more productive and deliver better quality</p>	<p>Review of people policies on speaking up and encouraging staff to share their lived experiences through Equality, Diversity &amp; Inclusion lens to include the lived experiences of disabled members of staff.</p>	<p><b>WRES 3</b> - Relative likelihood of BAME staff entering the formal disciplinary process compared to White staff</p> <p><b>WRES 5 &amp; 6 &amp; 8</b> - Percentage of BAME staff experiencing harassment, bullying or abuse from patients, relatives, staff or managers in last 12 months</p> <p><b>WRES 8</b> - Percentage of BAME staff personally experienced discrimination at work from Manager/team leader/other colleagues</p>	<p>EDI strategic Aims and operational priorities in place and survey to test level of importance closed July 7<sup>th</sup> this will inform content of a 3year Inclusion strategy for ENHT to launch by October 2023</p>	
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## 8. Priority Areas for 2024/25

Alongside the above actions to continue into 2024/25 and the priorities within the NHS EDI plan we will develop a single document to track, monitor and evaluate and bring together all the various inclusion actions and the diagram below captures the four pillars toward enabling us to deliver an inclusive place to work for all.

## Equality Diversity & Inclusion Strategic Aims and Operational Priorities

### Help build our equality, diversity and inclusion strategy

Our Equality, Diversity and Inclusion (EDI) team are looking for staff to complete a short survey which will be used to inform Trust EDI strategy for 2023-2025. The team welcome feedback from all staff. Deadline to complete the survey is **Friday 7 July**. If you have any questions, please contact [celina.mfuko@nhs.net](mailto:celina.mfuko@nhs.net) Please use the QR code below to go to Survey Link

#### Aim 1 - Representative workforce

- 1. Culture, Inclusive Leadership, Behaviours and Values.
- 2. Fair and Inclusive Recruitment Process.
- 3. Inclusive Onboarding, Learning and Development Programme.
- 4. Inclusive Career Progression and Talent Management Strategy.

#### Aim 2 - Engagement and collaboration

- 1. Staff Networks & Intersectionality.
- 2. Address Bullying, Discrimination, Harassment and -Physical violence at work.
- 3. Active & Inclusive Listening Events.
- 4. Effective Appraisals and Wellbeing Conversations.

#### Aim 3 - Equality, Diversity and Inclusion Transformational Programmes

- 1. Leading and Managing inclusively with Cultural intelligence (CQ).
- 2. Reciprocal Mentoring for Inclusion (RMfI)
- 3. Restorative Just Culture.
- 4. Equality, diversity and Inclusion Focus Groups.

#### Aim 4 - Data Insight, Evidence and Processes

- 1. Equality Delivery System (EDS 2022).
- 2. Workforce Disability Equality Standard (WDES).
- 3. Workforce Race Equality Standard (WRES).
- 4. Gender, Ethnicity and Disability Pay Gaps.
- 5. Policies and Equality Impact Assessment.



## **Appendices**

### **Appendix 1: Making Anti-Racism a Reality**

**<https://www.england.nhs.uk/east-of-england/nhs-east-of-england-equality-diversity-and-inclusion/antiracism-strategy/>**

## Appendix 2: Representation by staff group

### Healthcare Science

Row Labels	BAME	%	White	%	Not Known	%	Grand Total
Band 5	15	42%	13	36%	8	22%	36
Band 6	31	57%	20	37%	3	6%	54
Band 7	16	32%	27	54%	7	14%	50
Band 8A	2	9%	19	86%	1	5%	22
Band 8B	1	13%	7	88%		0%	8
Band 8C	2	29%	5	71%		0%	7
Band 8D		0%	2	100%		0%	2
Grand Total	67	37%	93	52%	19	11%	179

### AHP

Row Labels	BAME	%	White	%	Not Known	%	Grand Total
Band 5	31	46%	22	33%	14	21%	67
Band 6	49	40%	61	50%	11	9%	121
Band 7	23	22%	73	70%	8	8%	104
Band 8A	5	20%	16	64%	4	16%	25
Band 8B		0%	3	100%		0%	3
Band 8C		0%	1	100%		0%	1
Band 8D		0%		0%	1	100%	1
Grand Total	108	34%	176	55%	38	12%	322

### Scientific and Technical

Row Labels	BAME	%	White	%	Not Known	%	Grand Total
Band 5	37	51%	31	43%	4	6%	72
Band 6	29	47%	28	45%	5	8%	62
Band 7	17	46%	17	46%	3	8%	37
Band 8A	15	38%	21	54%	3	8%	39
Band 8B	5	50%	5	50%		0%	10
Band 8C	2	50%	2	50%		0%	4
Band 8D	2	67%	1	33%		0%	3
Band 9		0%	1	100%		0%	1
Grand Total	107	47%	106	46%	15	7%	228

### Admin and Clerical

Row Labels	BAME	%	White	%	Not Known	%	Grand Total
Band 5	21	17%	100	81%	3	2%	124
Band 6	16	15%	89	82%	3	3%	108
Band 7	15	18%	63	74%	7	8%	85
Band 8A	19	30%	44	70%		0%	63
Band 8B	10	26%	27	69%	2	5%	39
Band 8C	2	6%	32	89%	2	6%	36
Band 8D	4	22%	14	78%		0%	18
Band 9	1	8%	11	92%		0%	12
Trust Pay		0%	14	100%		0%	14
Grand Total	88	18%	394	79%	17	3%	499

### Nursing and Midwifery

Row Labels	BAME	%	White	%	Not Known	%	Grand Total
Band 5	588	69%	208	24%	53	6%	849
Band 6	281	40%	380	54%	43	6%	704
Band 7	121	27%	312	70%	14	3%	447
Band 8A	16	16%	80	81%	3	3%	99
Band 8B	1	6%	17	94%		0%	18
Band 8C	4	50%	4	50%		0%	8
Band 8D	1	33%	1	33%	1	33%	3
Band 9		0%	2	67%	1	33%	3
Trust Pay		0%	1	100%		0%	1
Grand Total	1012	47%	1005	47%	115	5%	2132