WRES/WDES Data 2024

Workforce Race Equality Standard WRES Data 2024

Workforce Race Equality Standard 2024

Data collated from WRES and Staff Survey 2023

Staff representation

Our black and minority ethnic workforce representation is **41.5%**

In 2024 we showed a small increase on the **39.1%**. reported in 2023 **(+ive)**.

A Model Employer: Increasing Black and minority ethnic representation at senior levels across the NHS.
A stretching, and yet achievable aspiration for the NHS would be to have more BME representation across the workforce pipeline.

Currently the target we are trying to achieve is 40% BME staff in Band 8a roles and above.

Clinical / Non Clinical Staff Representation Band 8a +	
2023	**2024**
24%	**28%**

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Workforce Race Equality Standard 2024

Data collated from WRES and Staff Survey 2023

NHS
Birmingham and Solihull Mental Health
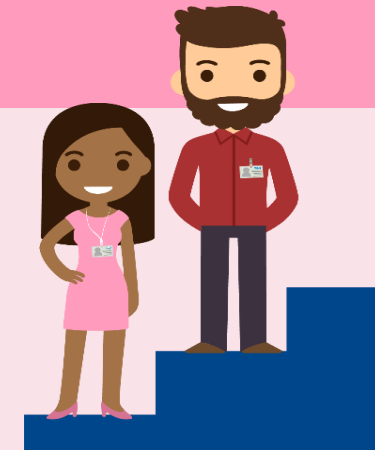NHS Foundation Trust

Shortlisting

White colleagues are **1.7** times more likely to be appointed from shortlisting.

In 2024 we have increased the gap on the **1.3** reported in 2023. **(-ive)**

Career progression

52% (43% last year) black and minority ethnic colleagues believe that our Trust provides equal opportunities for career progression as opposed to **56.4% (54.5%)** white colleagues **(+ive)**

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Workforce Race Equality Standard 2024

Data collated from WRES and Staff Survey 2023

NHS
Birmingham and Solihull Mental Health
NHS Foundation Trust

Professional development

White colleagues are **0.89 likely to undertake non-mandatory training and** development opportunities compared to black and minority ethnic colleagues. **(+ive) 0.77** last year.

Disciplinary investigation

Black and minority ethnic colleagues are **1.86** times more likely to enter formal disciplinary process than white colleagues.

In 2023 it was reported at **2.02 (+ive)**

Experiencing discrimination

12.3% (last year 17.1%) Black and minority ethnic colleagues experienced discrimination at work from other colleagues as opposed to **8.8%** (last year **11.5%**) white colleagues **(+ive) both improving, gap closing**

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Workforce Race Equality Standard 2024

Data collated from WRES and Staff Survey 2023

Bullying and harassment

All colleagues experiencing harassment, bullying or abuse from patients, relatives or the public has improved compared to previous year and the gap remains **(+ive)**.

12.3% black and minority ethnic colleagues compared to **8.8%** white colleagues experienced discrimination at work from manager/team leaders (the gap has decreased from previous year, with the experience of all colleagues improving) **(+ive)**

Board membership

42.9% white colleagues

50% black and minority ethnic colleagues

7.1% unknown ethnicity

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Staff Voices – WRES 2024

Team are not culturally aware, negative experience for most staff and poor retention of staff. Treated differently if "face didn't fit" and if had differences. Not offered training/opportunities to develop.

I identify as white, having seen colleagues and friends having to relive trauma against racism again and again is very upsetting. I want to be able to challenge and support in a way that I am not coming across as white saviour

I feel being an Asian women I am treated unfavourable and often overlooked for promotion and development opportunities, if this continues I will have no choice by to look for employment elsewhere

I feel that that there isn't just a black white issues, there are further issues within our black and minority ethnic staff, ie black on black and or Asian on Asian. This needs to be looked at.

As a trust I think we could do more around islamophobia and antisemitism. A lot of bad things are happening in the middle east and I don't feel there is anything around support or awareness that I can access to. Education is important

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Workforce Disability Equality Standard 2024

Data collated from WDES and Staff Survey 2023

NHS
Birmingham and Solihull
Mental Health
NHS Foundation Trust

7.48% colleagues across our Trust report having a long-term condition or illness. Compared to the **9.65%** reported in 2023

Colleagues with long-term condition or illness are...

The likelihood of non-disabled colleagues being appointed from shortlist compared to colleagues with disabilities is **1.28** compared to **0.84** in 2023 (Colleagues with disabilities less likely to be employed) **(-ive)**
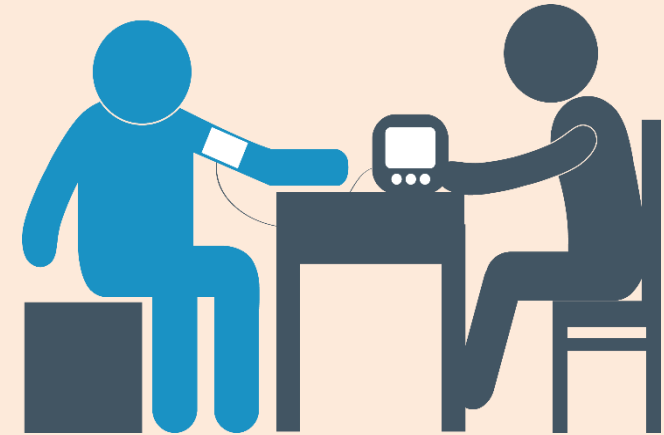
Colleagues with disabilities are 5.33 times likely to enter the capability process then those without. **(Last year we reached equity) (-ive)**

This is against 16 members of staff from a total of 4652 and the reporting this year is over 2 years whereas previous years the data was collated yearly

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Workforce Disability Equality Standard 2024

Data collated from WDES and Staff Survey 2023

NHS
Birmingham and Solihull Mental Health
NHS Foundation Trust

Colleagues with long-term condition or illness are...

...more likely to experience harassment, bullying and abuse

from patients or relatives – this has numerically decreased to **37.1%** since last year **43.05% (+ive)**.

from other colleagues – this has numerically decreased to **24.5%** since last year **25.9% (+ive)**.

Colleagues have shown an decrease in reporting bullying and harassment if they experience it **59.9%** to last year **65.1% (-ive)**.

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Workforce Disability Equality Standard 2024

Data collated from WDES and Staff Survey 2023

All colleagues have shown an increase in believing that our Trust provides equal opportunities for career progression or promotion **(+ive)**.

All colleagues have increased reporting the satisfaction with the extent to which their organisation values their work, bigger increase amongst colleagues with LTC or illness. **41.6%** compared to last year **34.81% (+ive)**.

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Workforce Disability Equality Standard 2024

Data collated from WDES and Staff Survey 2023

More colleagues with long-term condition or illness reported that they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties since last year. **20.97%** compared to **19.87%** last year. **(-ive)**

There has been an increase to **76.9%** from **74.38%** from **(+ive)** of colleagues with long-term condition or illness saying that their employer has made adequate adjustment(s) to enable them to carry out their work.

Workforce Disability Equality Standard 2024

Data collated from WDES and Staff Survey 2023

NHS
Birmingham and Solihull Mental Health
NHS Foundation Trust

Decrease from **6.9** to **6.6** in terms of engagement for disabled staff, compared to non-disabled staff for the organisation. (-ive)

Our Trust enables the voices of colleagues with LTC or illness via the Disability and Well Being Staff Network.

1 member on our Board of colleagues have declared a long-term condition or illness

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Staff Voices – WDES 2024

Being almost blind I am required to have specialist software, this is installed on trust desktops where I am based but often I have to chase IT and ask for it be reinstalled as it is often removed without warning because the software slows down the machine. However without this software I am unable to work and getting the software reinstalled is never a quick process. The software is on desktops as carrying a laptop causes high levels of pain.

Because of mistreatment largely from a lack of good interactions to action this has left me feeling vulnerable to further mistreatment and discrimination which in turn increases my anxieties around workloads being managed fairly. I have no doubt I have faced and continue to be facing victimisations and indirect discriminations in the work place, enough is enough it needs to end as I have had better and deserve better. Why I am left to be victimised and at a distinct disadvantage due to my disability going unsupported and ultimately my dignity is affected

During a meeting I felt I had been targeted because staff do not agree with my reasonable adjustment and it felt like ablism due to my disability and the environment being inaccessible. If someone was racist would that be considered different? The experience was made worse by the fact no one else in the meeting said anything in response to the dislike of my reasonable adjustment. Plus the response afterwards demonstrates words and actions do not always match. I feel very stressful, draining and I feel the trust is not inclusive or compassionate towards people like me

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Staff Voices – WDES 2024

I have fibromyalgia and due to this work 2 days a week. I have had to learn how to manage this illness and be at work and my experience with my own OT community team is very positive. Management are supportive of my needs and encourage me to take regular breaks and to not put too much stuff on myself. I am encouraged to ask for help if necessary and my managers are available for me to do this. I struggle to share this diagnosis with the wider team as a lot of our patients have fibromyalgia and there are a lot of negative comments about it by other staff members. It feels as though people talk about this illness like it is made up and that people are malingerers, this upsets me.
I don't think it would be possible to work full time with this condition as do not feel that there are systems to support this as a way of working, due to the debilitating condition it causes. This is an issue as it feels that I cannot apply for promotion due to needing to be able to work full time.

I had a life changing riding accident in France, fracturing my skull with a bleed on the brain which nearly killed me. Due to my age (19), I eventually made a full recovery apart from a permanent hearing loss in my left ear and was treated for epilepsy for 2 years afterwards.

The effects of the accident are still felt. I have a very weird type of migraine called a Basilar migraine with some symptoms similar to a stroke, tumour and infection.

Without the support of my previous line managers and understanding of my colleagues I doubt I would be doing the job I am today. Migraine sufferers will know that migraines are a neurological condition and are not just a bad headache and the more you stress about being off sick the more your symptoms worsen and hang about.

My reasonable adjustment plan has helped me massively and provides me with the reassurance that I can continue doing my job and make a positive contribution despite having a disability

Success metrics will be collected, collated and presented through the EDI dashboard

High Impact Action	Success Metric	Activity To date	On target
HIA1: Measurable objectives on EDI for Chairs Chief Executives and Board members	1a. Annual Chair/CEO appraisals on EDI objectives via Board Assurance Framework (BAF).	CEO and Exec Teams all have EDI embedded within their objectives via Board Assurance Framework (BAF).	Ongoing
HIA2: Overhaul recruitment processes and embed talent management processes.	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	Equity Panel Member on recruitment panels (additional to a panel that is gender and ethnicity diverse). Equity panel members will be required for all 8a and above roles to further exercise the principle of Equity as we work towards becoming a representative organisation. Equity Panel members are independent colleagues who should be integrated into the recruiting panel as a resource to ensure a fair and equitable process. Reasonable adjustment where required ie candidate who have declared a disability can ask for interview in advance Project Flourish QI Recruitment Project	Revamped recruitment policy, included equity panel members for all interviews Band 8a and above Project Flourish has started and monitored through L&D and OD QI Recruitment Project ongoing, support by QI team and Workforce Data Team

Success metrics will be collected, collated and presented through the EDI dashboard

High Impact Action	Success Metric	Activity To date	On target
HIA3: Eliminate total pay gaps with respect to race, disability and gender.	Improvement in gender, race, and disability pay gap	Improvement in gender, race, and disability pay gap. 2024 Gender Pay Gap reported	Ongoing
HIA4: Address Health Inequalities within their workforce	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	**PCREF** HI (Trust Strategy being developed). Each directorate has their own plan specific to their area. HI Conference Anti Racist Behavioural Framework completed ready for roll out. Fairer Futures Fund being actively scoped to support partnership working with a focus on racialised communities. PSIRF approach being developed to actively consider the racialised experience in relation to Patient Safety Data with Dignity (WRES/Model Employer/EDS) approach being used to inform Divisional reducing inequalities plans, to include PCREF, currently socialising PCREF locally. BLACHIR (Birmingham and Lewisham African & Caribbean Health Inequalities Review)	Associate Director of EDI and OD supported by Head of Programmes - Strategy, People & Partnerships, PMO and Medical Director. Associate Director of EDI and OD supported by Head of Programmes - Strategy, People & Partnerships,

Success metrics will be collected, collated and presented through the EDI dashboard

High Impact Action	Success Metric	Activity To date	On target
HIA5: Comprehensive Induction and onboarding programme for International recruited staff	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	Trust has launched the Internationally Educated Nurse Recruitment Programme International Nurse Network to be established and a localised approach.	Ongoing and monitored by Corporate Nursing through Practice Placement Team
HIA6: Eliminate conditions and environment in which bullying, harassment and physical harassment occurs	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)	Cultural Competency, Cultural Humility and Microaggression Training Corporate support offer Anti Racist Behavioural Framework completed and socialised Anti Racist Policy going through ratification process. Anti Racist Behavioural Framework in 1st Phase of roll out Anti Racist Colleague indicators. Goes Live 1st March 2024. Behavioural guidance and toolkit being collated. Data with Dignity (WRES/Model Employer/EDS) approach being used to inform Divisional Active Bystander training 300+ colleagues trained.	Workstreams have started and ongoing – updates regularly shared at committees and Exec Meeting via Associate Director of EDI and OD

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To date:

- Dedicated EDI Lead / ODBP for Directorates – **in place**
- EDI Lead taking a lead in Workforce and Health Inequalities – **in place**
- Additional Role Equity Panel Members, Cultural Ambassador and Buddy Roles embedded within the Trust – **EPM embedded, CA and BR to be rolled out**
- Corporate Support Offer – **in place**
- Anti Racist Framework Rollout – 3 parts (Colleague, Practitioner and Leadership) **– Colleague Guide socialised, other 2 to follow in June and August**
- Patient Carer Race Equity Framework Rollout - **Divisional reducing inequalities plans, to include PCREF, currently socialising PCREF locally.**
- Mental Health and LD Recruitment Programme – **launch in July**
- Cultural Competence / Cultural Humility Training **– in place**
- Microaggression Training – **in place**
- DND Network – split in 3 to ensure all voices are heard – **in place**
- Trust has launched the Internationally Educated Nurse Recruitment Programme **– in place**

<u>**Updates will be provided via the EDI Quarterly update through TCSE's**</u>

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Action Plan 2024: WRES

NHS
Birmingham and Solihull Mental Health
NHS Foundation Trust

How our strategic priorities align

One vision: improving mental health wellbeing

Reducing inequalities

Working in a way that tackles discrimination, addresses stigma, and encourages equality for all

People	Workforce planning across the system	Staff engagement; lived experience roles; co-production of our systems and processes	Evidence based people practice; using data and analytics	Embedding our value of inclusion; diverse workforce; just culture; safety to speak up

Action	By whom	Reporting Cyle
White Allies Network	External, EDI	Quarterly reviews through TCSE
Values in Practice	EDI/OD	Quarterly reviews through TCSE
Flourish	OD	Quarterly reviews through TCSE
International Nurses Network	EDI/OD	Quarterly reviews through TCSE
Active Bystander Training – Phase 2	EDI	Quarterly reviews through TCSE
The Race Code	EDI	Quarterly reviews through TCSE
Improved Self Declaration	All	Quarterly reviews through TCSE
Rewards and recognition to demonstrate fairness across the main protected characteristics	All	Quarterly reviews through TCSE

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Action Plan 2024: WDES

NHS Birmingham and Solihull Mental Health NHS Foundation Trust

How our strategic priorities align

One vision: improving mental health wellbeing

Reducing inequalities

Working in a way that tackles discrimination, addresses stigma, and encourages equality for all

People	Workforce planning across the system	Staff engagement; lived experience roles; co-production of our systems and processes	Evidence based people practice; using data and analytics	Embedding our value of inclusion; diverse workforce; just culture; safety to speak up

Action	By whom	By when
Disability and Wellbeing Network Campaign	EDI and DAWN Network	Quarterly reviews through TCSE
Disability Awareness Training	EDI	Quarterly reviews through TCSE
Reasonable Adjustment Process/Training	EDI	Quarterly reviews through TCSE
Launch Mental Health and LD Recruitment Programme	EDI	Quarterly reviews through TCSE
Improved Self Declaration	All	Quarterly reviews through TCSE

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Thank you