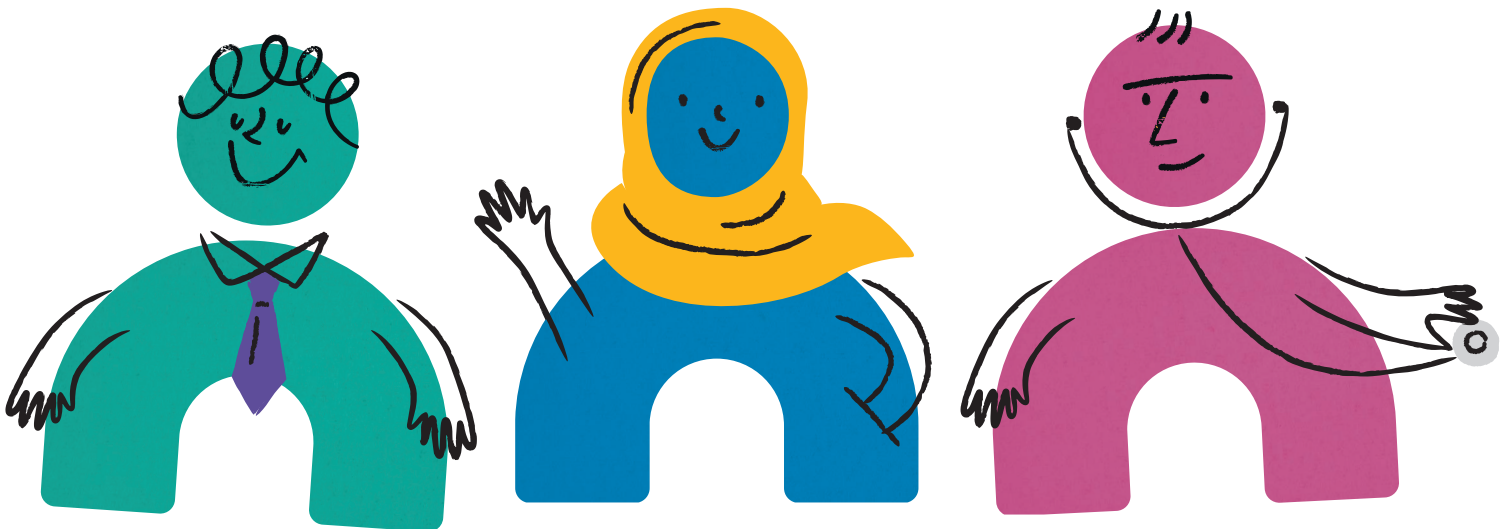


Humber Teaching NHS Foundation Trust

NHS Workforce Race Equality Standard (WRES)

Annual Report 2024



Caring, Learning
& Growing Together

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1.0

Executive Summary

The Workforce Race Equality Standard (WRES) was mandated through the NHS standard contract in 2015, with the first report released in June 2016. Since then, the Trust has published its progress annually against a number of indicators, focusing on addressing inequality at work and showing progress against the nine WRES indicators. In this way, the Trust can fully understand local challenges, make necessary changes, and also chart our progress on a broader scale by comparing regional and national issues.

In the ICBs recent evaluation of the six Trusts in our system, the Trust’s WRES results position well when compared to our system partners, where we position higher in almost all areas.

For **indicator 2: Relative likelihood of appointment from shortlisting**, the ICB recommended that Humber is demonstrating performance in the upper quartile that could support wider system learning.

For **indicator 6: The percentage of staff who experienced harassment, bullying or abuse from other staff in the last 12 months**, the Trust places best in the system. According to the ICB report, no Trusts in England demonstrate equity between colleagues from ethnically diverse backgrounds and white staff in the experience of discrimination at work, with the vast majority falling outside the upper equity band.

For **indicator 8: The percentage of staff who personally experienced discrimination at work from a manager, team leader or other colleagues**, Humber have the best overall score in the system and are only second for ethnically diverse colleagues by 0.3%

The Trust has undertaken a number of initiatives in the last 12 months and as a result has demonstrated matching or bettering results than the national average in six of the nine indicators.

Trust scores have improved on the previous year in five of the indicators showing a positive trajectory, although more work remains. A notable achievement is that the Trust is likely to remain a top performing Trust for WRES indicator 2, 'Relative likelihood of hiring staff from shortlisting.'

In the ICBs recent evaluation of the six Trusts in our system, the Trust’s WRES results position well when compared to our system partners, where we position higher in almost all areas.

Key findings include:

Areas of Progress

- The relative likelihood of white staff being appointed from shortlisting compared to staff from diverse backgrounds is 0.76 (less than 1 is a positive metric) which is an improvement on the previous year's figure of 0.78, which demonstrates the continued trend of equality and fairness in our recruitment processes.
- During the period, we have seen an improvement to ethnic diversity representation on the Trust Board. The Board representation is 12.5% which compares to 7.17% in the Trust workforce, and 4.9% in the communities we serve. This demonstrates that the Board is representative of the areas they serve.
- The Relative likelihood of staff accessing non-mandatory training and CPD - Employees Accessing Non-Mandatory Training is exactly equal and demonstrates equality and fairness in accessing non-mandatory training.
- The percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months is 20.62%, and whilst this is higher than for white colleagues at 16.13%, it is slightly better than the national figure at 20.98%. This also demonstrates a substantial improvement on the 2023 figure of 25.76% and demonstrates a continual downward trend since 2019 when the figure was 28.57% (number of responses to the question 97).
- The percentage of staff believing that the organisation provides equal opportunities for career progression or promotion is 50%, which is substantially lower than for white colleagues at 65.21%, and only marginally lower than the national figure at 50.50%. This represents an increase of just over 3% on the previous year but shows a downward trend since 2019 figure of 60% (number of responses to the question 100).



Areas for Concern

- The percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months is 37.37%, which is substantially higher than for white colleagues at 20.74%, and higher than the national figure at 31.43%. This is a substantial increase on the 2023 figure of 21.21% and an area of focus to be addressed. (Number of responses to the question 99)
- The percentage of staff experiencing discrimination at work from manager / team leader or other colleagues in the last 12 months is 16.16% which is substantially higher than for white colleagues at 4.43% and 2% higher than the national figure at 13.90%. However, this figure is a slight improvement on 2023 and demonstrates a downward trend since 2020 when the figure was 18.37% (Number of responses to the question 99)
- The relative likelihood of ethnically diverse staff entering the formal disciplinary process compared to White staff is 3 which represents a substantial gap on last year's figure of 1.08, which means the Trust will need to examine the formal disciplinary process to ensure ethnically diverse staff are not unfairly represented.

2.0

Introduction

Using the Workforce Race Equality Standard (WRES), NHS organisations measure and provide key insight into the workplace experience of Black, Asian and Ethnic Minority staff.

In 2015, the NHS Equality and Diversity Council and NHS England commissioned the WRES to understand Black, Asian and Ethnic Minority staff experiences within NHS organisations.

A total of nine indicators are used in the WRES report (see appendix 1): indicators 1 - 4 are taken from the Trust's Electronic Staff Record (ESR), indicators 5 - 8 are taken from the National NHS Staff Survey, and indicator 9 refers to the Trust's Board.

All NHS organisations implement the WRES report annually, and

it has become an integral part of measuring our performance and progress in relation to the experiences of Black, Asian and Ethnic Minority staff.

Humber Teaching NHS Foundation Trust is an award-winning organisation, providing a broad range of care and services across a wide geographical area. We employ approximately 3,600 staff across more than 82 sites at locations throughout five geographical areas; Hull, the East Riding of Yorkshire, Whitby, Scarborough and Ryedale.

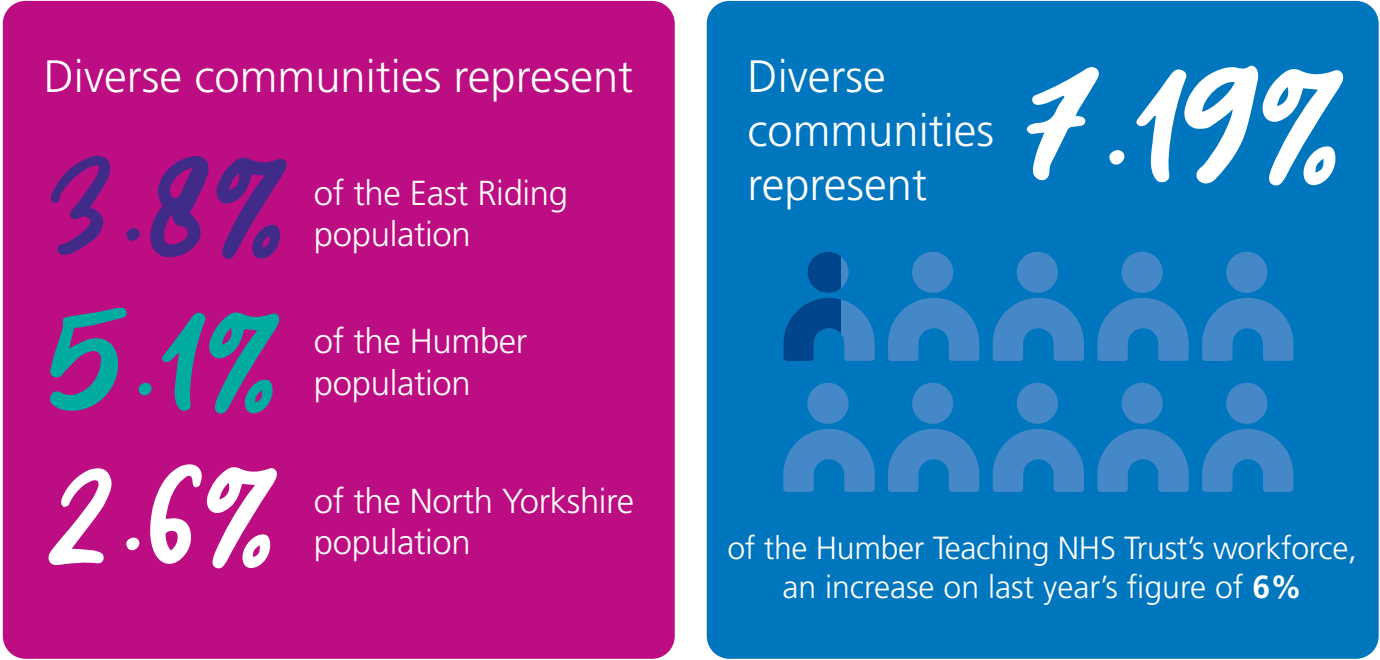
We provide care to a population of 765 thousand people of all ages who live within an area of more than 4,700 square kilometres, which contains some areas of isolated rurality, dispersed major settlements and pockets of significant deprivation.

Our workforce is paramount to delivering high quality care for our patients and the organisation strives to be an employer of choice locally and one which offers long term employment opportunities combined with structured personal and professional development.

Diverse communities represent 3.8% of the East Riding population, 5.1% of the Humber population and 2.6% of the North Yorkshire population. In the Trust, diverse communities represent 7.19% of Humber Teaching NHS Foundation Trust's workforce, an increase on last year's figure of 6%.

This report seeks to understand the experiences across the nine WRES metrics for our staff from a diverse heritage and backgrounds.





We provide care to a population of 765 thousand people of all ages who live within an area of more than 4,700 square kilometres.

3.0

WRES Related Activity

As a Trust we are committed to using the WRES data and interpreting it in order to improve representation within the workforce and ensuring staff experience is of the highest quality.

Below is a summary of some of the WRES related activity that we as a Trust have undertaken since the 2023 report:

Diverse representation in the Workforce

During the year the Trust has seen representation across the workforce increase from 6% to 7.34%. We have also seen an improvement in the number of diverse staff in band 7 and 8a roles in both clinical and non-clinical roles. Similarly, the Board continues to be representative of the communities we serve with a 12.5% diverse membership.

Addressing Bullying, Harassment and Discrimination

Respect Campaign

Our Respect campaign was launched on the 1st November 2023, with a range of 9 different 'Report It' posters displayed in the workplace, this forms a part of developing a positive and safe workplace culture.

This campaign has focused on developing a safe culture to report

'staff to staff' incidents of bullying, harassment or discrimination, towards all people, but with particular emphasis on reaching underrepresented groups, namely but not limited to, the LGBTQ+ community, those with a disability or long-term condition and colleagues from ethnically diverse backgrounds.

In addition, a 'Report It' intranet page has been developed as a resource hub, hosting all relevant information, contact details and policies.

Since the launch we have seen a 70% increase in referrals for bullying, harassment, and discrimination. This has allowed colleagues in the HR Operations team to address these issues with a fair and equitable approach. So too has it allowed us to monitor the equality data of those making referrals and analyse statistics, themes, and areas of concern. This increase in referrals may have contributed to the increased reporting of bullying and harassment by staff from diverse cultural backgrounds in the staff survey and demonstrates that the Trust is creating a 'safe space' culture to report bullying and harassment.



Since the launch we have seen a 70% increase in referrals for bullying, harassment, and discrimination. This has allowed colleagues in the HR Operations team to address these issues with a fair and equitable approach.



No Excuse for Abuse Task and Finish Group

Through collaboration with our staff networks, it was identified that staff with a protected characteristic, especially those staff from ethnic minority backgrounds, those with a disability or long-term condition, and those from the LGBTQ+ community, were experiencing higher rates of bullying, harassment and discrimination from patients, carers and service users.

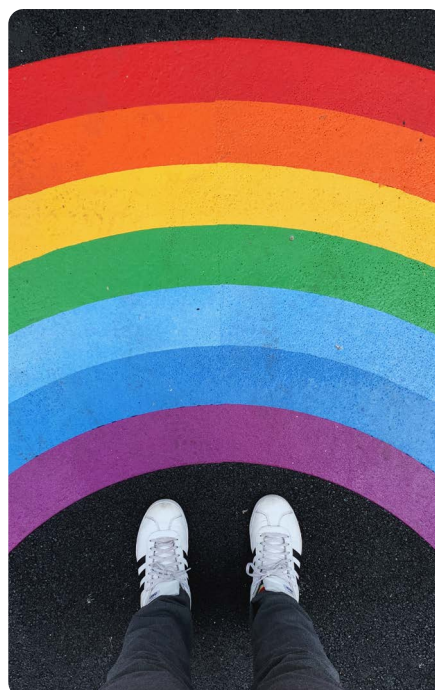
The Trust believes everyone has a duty to behave in an acceptable and appropriate manner. Staff have a right to work, as patients have a right to be treated, in an environment that is properly safe and secure.

To that end, a No Excuse for Abuse task and finish group met in February 2024 which was supported by senior leaders and with representation from Workforce and OD, EDI, H&S (LSMS) and the Race Equality Staff Network.

The result was the drafting of guidance for managers and staff. This guidance was designed to bring together a range of information from multiple sources into one document to provide a process and expectations. The aim is that this guidance will reduce underreporting of all incidents and ensure a consistent approach to supporting staff who have received aggression from patients, carers and service users.

Moving forward, the Trust will undertake listening exercises

to ensure this draft guidance is consulted on by a wide range of stakeholders from across the Trust prior to a launch and embedding process.



Strengthening our Staff Networks

At the Trust we have three staff networks including the Race Equality Network, Disability Staff Network, and the Rainbow Alliance (LGBTQ+ staff network). Our staff networks provide a safe and practical space where generating and sharing new ideas, and exchanging information can be expressed in an informal environment. They also provide peer support, networking opportunities and social activities. Their activities can help to open the door to changing the culture within the Trust.

During the year, we reviewed the terms of reference for our staff networks to support them to reach their goals. We introduced an EMT sponsor who would attend meetings and support in the escalation of issues as they arise.

We introduced monthly meetings between the Associate Director of People and OD, the Network Executive Sponsor and the EDI Lead in order to take feedback from the networks and address those issues escalated in network meetings.

We have continued to provide a budget of £5000 for each staff network to help them to put on engagement events. In March the Rainbow Alliance put on a face-to-face event with a range of guest speakers to celebrate International Trans Visibility Day.

Learning and Development

In April the Learning and Development team launched our own in house bullying and harassment awareness training for managers and leaders. This training will utilise Trust WRES data on bullying and harassment which can be contextualised within the training to ensure all colleagues are aware of the WDES/WRES findings regarding bullying and harassment.



Equality, Diversity and Inclusion Objectives for the Board

In March, a development session was held with the Board to establish a range of EDI objectives linked to the Trust EDI workstreams and strategies and aligned to the national EDI Improvement Plan. The Executive Team have since finalised EDI objectives for all Board members including the Chief Executive and Chair for the appraisal window for 24/25.

Ethnicity Pay Gap Analysis

This year, for the first time, the Trust undertook an ethnicity pay gap analysis. The resulting report found that there were no negative pay gaps between staff from ethnic minority backgrounds and their white colleagues.

All pay gaps identified were in favour of our staff from ethnic minority backgrounds. The report is currently being reviewed by our governance committees and will be published on our Trust website in due course.

National Celebrations and commemorations

As a part of our ongoing work to inform and educate colleagues, across the past 12 months, the Trust has provided a range of informative articles via our weekly global staff email that offer informative guidance about Ramadan, Eid, Black History Month and commemorated Martin Luther King Day and Stephen Lawrence Day.

Making EDI a priority for the Organisation

Act Against Racism Charter

During the year, the Trust signed up to the Royal Society of Psychiatrists Act Against Racism Charter. The campaign guidance provides a framework of 15 actions to support Trusts to effectively address racism and was developed with Medical Directors, the NHS Race and Health Observatory, and the expertise of a working group. In the Trust this work is led by the Executive Medical Director, coordinated by our EDI Lead and the Board are provided assurance as to our progress via a quarterly Board EDI assurance report.

EDI Assurance Reporting to the Board

This year the Trust introduced a quarterly EDI Assurance Report for EMT and the Board. This extensive report is designed to assure the Trusts Leadership of the progress against all our EDI workstreams, including the Workforce Race Equality Standard, the Workforce Disability Equality Standard, the Gender and Ethnicity Pay gap report, NHS England EDI Improvement Plan, the Act Against Racism Charter, and the impact of the Respect campaign.

Developing Cultural Awareness

Reverse mentoring

The Trust introduced a new Reverse Mentoring programme for the organisation, as part of the wider Mentoring programme for the organisation. The purpose is to create meaningful mentor/mentee relationships that assists in generating a greater awareness of issues relevant to equality, diversity and inclusion amongst senior leaders and provides an opportunity to develop a greater understanding of the experiences of staff from diverse groups on a more personal level. Moving forward the Trust will work to raise awareness of the reverse mentoring offer and look to recruit a bank of trained mentors with lived experience to work with senior leaders.

Inclusive Language Guidance

The Trust developed inclusive language guidance which has been presented at the Senior Leadership Forum and plans are in place to provide wider coverage across the organisation to support fostering better relations between the protected characteristics as well as supporting improved cultural awareness understanding.

One of the topics includes how the organisation is moving away from the use of outdated terminology such as BAME (Black, Asian and Minority Ethnic) in line with guidance from the Governments Race Disparity Advisory Group. This will support the organisation to move towards more inclusive language when referring to the wide range of diversity in the workforce and wider community.

Recruitment Deep Dive

A Recruitment deep dive report was developed which places an EDI lens on our recruitment activities over the previous six months based upon protected characteristics. Insight from this report is shared with HR Business Partners who embed this information into their workforce planning meetings to discuss underrepresentation, with actions to support diverse recruitment strategies. This forms part of our work to ensure our EDI objectives are known in the areas and can support our organisational EDI aims.



4.0

Data Summary

Indicator	2023/24				2022/23			
1. PERCENTAGE OF STAFF IN BANDS	Non-Clinical							
	Band	White	BAME	Unknown	Band	White	BAME	Unknown
	Under Band 1	0% (0)	0% (0)	0% (0)	Under Band 1	0% (0)	0% (0)	0% (0)
	Band 1	91% (10)	9% (1)	0% (0)	Band 1	91% (11)	9% (1)	0% (0)
	Band 2	92% (307)	3% (9)	5% (17)	Band 2	90% (303)	4% (12)	6% (21)
	Band 3	96% (179)	2% (4)	2% (3)	Band 3	96% (172)	2% (4)	2% (4)
	Band 4	91% (98)	5% (5)	4% (4)	Band 4	90% (93)	5% (5)	5% (5)
	Band 5	92% (86)	7% (6)	1% (1)	Band 5	91% (66)	7% (5)	2% (1)
	Band 6	96% (54)	2% (1)	2% (1)	Band 6	92% (44)	4% (2)	4% (2)
	Band 7	91% (52)	7% (4)	2% (1)	Band 7	92% (41)	6% (3)	2% (1)
	Band 8a	88% (35)	5% (2)	7% (3)	Band 8a	90% (28)	3% (1)	7% (2)
	Band 8b	95% (17)	0% (0)	5% (1)	Band 8b	100% (17)	0% (0)	0% (0)
	Band 8c	100% (11)	0% (0)	0% (0)	Band 8c	100% (5)	0% (0)	0% (0)
	Band 8d	100% (7)	0% (0)	0% (0)	Band 8d	100% (9)	0% (0)	0% (0)
	Band 9	0% (1)	0% (0)	0% (0)	Band 9	0% (0)	0% (0)	0% (0)
	VSM	100% (4)	0% (0)	0% (0)	VSM	100% (4)	0% (0)	0% (0)
	Clinical							
	Band	White	BAME	Unknown	Band	White	BAME	Unknown
	Under Band 1	0% (0)	0% (0)	0% (0)	Under Band 1	0% (0)	0% (0)	0% (0)
	Band 1	0% (0)	0% (0)	0% (0)	Band 1	0% (0)	0% (0)	0% (0)



Indicator	2023/24				2022/23			
1. PERCENTAGE OF STAFF IN BANDS	Clinical							
	Band	White	BAME	Unknown	Band	White	BAME	Unknown
	Band 2	70% (72)	17% (18)	13% (13)	Band 2	77% (71)	11% (10)	12% (11)
	Band 3	85% (441)	10% (54)	5% (24)	Band 3	88% (455)	7% (37)	5% (26)
	Band 4	90% (217)	6% (13)	4% (9)	Band 4	91% (203)	4% (9)	5% (11)
	Band 5	79% (313)	12% (46)	9% (35)	Band 5	82% (321)	8% (34)	10% (41)
	Band 6	90% (617)	4% (27)	6% (40)	Band 6	92% (604)	4% (24)	4% (28)
	Band 7	93% (342)	3% (9)	4% (13)	Band 7	93% (302)	2% (8)	5% (16)
	Band 8a	88% (105)	8% (9)	4% (4)	Band 8a	88% (116)	6% (8)	6% (8)
	Band 8b	86% (25)	4% (1)	10% (3)	Band 8b	88% (23)	4% (1)	8% (2)
	Band 8c	88% (21)	4% (1)	8% (2)	Band 8c	88% (23)	4% (1)	8% (2)
	Band 8d	100% (3)	0% (0)	0% (0)	Band 8d	100% (1)	0% (0)	0% (0)
	Band 9	50% (1)	50% (1)	0% (0)	Band 9	50% (1)	50% (1)	0% (0)
	VSM	100% (2)	0% (0)	0% (0)	VSM	100% (2)	0% (0)	0% (0)
	Consultants	37% (14)	50% (19)	13% (5)	Consultants	39% (15)	47% (18)	14% (5)
	Non-Consultants	54% (7)	46% (6)	0% (0)	Non-Consultants	50% (5)	50% (5)	9% (0)
	Trainee Grade	13% (4)	66% (20)	20% (6)	Trainee Grade	33% (10)	50% (15)	17% (5)
	Other	55% (22)	12% (5)	33% (13)	Other	33% (60)	6% (10)	61% (110)



Indicator	2023/24	2022/23	NHS National Figures
2. Relative likelihood of staff being appointed from shortlisting	1.3	0.78	1.59*
3. Relative likelihood of staff entering a formal disciplinary investigation	3	0.98	1.03*
4. Relative likelihood of staff accessing non-mandatory training and CPD	1	1.01	1.12*
5. % of staff experiencing harassment, bullying or abuse from patients, relatives or the public	37.3% Diverse staff** 20.4% White staff**	21.2% BAME staff** 24.3% White staff**	30.4% BAME staff*** 26.8% White staff***
6. % of staff experiencing harassment, bullying or abuse from staff	20.6% Diverse staff** 16.1% White staff**	25.8% BAME staff** 17.1% White staff**	27.7% BAME staff*** 22% White staff***
7. % of staff believing that trust provides equal opportunities for career progression or promotion	50% Diverse staff** 65.2% White staff**	47% BAME staff** 60.5% White staff**	46.4% BAME staff*** 59.1% White staff***
8. % of staff personally experiencing discrimination at work by Manager/team	16.1% Diverse staff ** 4.3% White staff**	16.7% BAME staff ** 4.6% White staff**	16.6% BAME staff*** 6.7% White staff***
9. % difference between the organisations' Board voting membership and its overall workforce	White Staff 85.3% Diverse Staff 7.3% White Board members 81.2% Diverse Board members 12.5% Difference -5.2%	White Staff 85.3% BAME Staff 6% Board 84.6% White Difference -0.7%	-10.9% Difference*

Data source: *2023 NHS WRES Report **2023 NHS Staff Survey Results ***NSS23 WDES/WRES National Tables

5.0

Summary of Progress

Below is a brief summary of the Trust’s progress against each indicator. Whilst there has been positive improvement the Trust recognises that there remains more to do.

WRES Indicator	Description
1	Percentage of staff in each AfC Bands 1-9 and VSM compared to overall workforce 266 of Trust staff come from diverse backgrounds which is an improvement on 214 in the previous year and represents 7.34% of the overall workforce, up from 6% last year. Our local demographic for diverse representation is 5%. During the year we have seen an improvement in diverse representation in band 7 and 8a in clinical and non-clinical roles. However, in medical roles we have seen a greater improvement to diverse representation. There has been a 25% increase in Clinical Trainee Grade staff from diverse backgrounds which builds upon the previous year's 50% increase. 50% of clinical band 9 senior leaders are from diverse backgrounds. The data is showing some minor improvement in the representation of BAME staff at bands 7/8a in clinical and non-clinical roles, there is recognition that this remains and area of focus for all bands in the workforce. In the national WRES reporting the Trust are rated green for five out of six race disparity ratios and amber for only one. This demonstrates a proportionality across the bandings, with areas for improvement in the mid-range roles. The Trust is in the top 6% of Trusts for representation for upper clinical roles.
2	Relative likelihood of BAME staff being appointed from shortlisting The ratio of 1.3 demonstrates that applicants from diverse backgrounds are more likely to be appointed from shortlisting compared to white applicants. The national guidance states that anything between 0.80 and 1.25 is in the non-adverse range, so this is in favour of diverse candidates. The Trust has been highlighted by the ICB as being the only Trust in our system to provide equity in shortlisting to appointment and recommend that other Trusts in the system learn from our practice. In the national WRES report the Trust were positioned in the top 7% of Trusts for this indicator, this is likely to increase with this years ratio.
3	Relative likelihood of staff entering a formal disciplinary process The ratio between diverse candidates entering formal disciplinary process when compared to their white colleges is 3, this indicates that they are 3 times more likely to enter the process. However, in the previous year we strengthened our disciplinary processes where previously we had very low numbers across the board. This ratio represents 8 diverse colleagues and 20 white colleagues across the organisation. The ratio of 3 is due in part to having 266 diverse staff in the organisation when compared to 3087 white colleagues. However, an investigation is prudent to ensure there is no inequality in our disciplinary processes. The Trust is in a worse position than the nationally reported figure 1.14 for this indicator.

WRES Indicator	Description
4	Relative likelihood of staff accessing non-mandatory training and CPD This year’s ratio of 1 indicates that diverse staff are as likely to access non-mandatory training and CPD in the Trust which is within the non-adverse range as set out in the national WRES report. This demonstrates equality of access and shows a more positive position than the national figure of 1.14 and the North-East and Yorkshire figure of 1.07.
5	Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public We have seen an increase in the number of staff from diverse backgrounds who have completed the WRES questions, with 99 respondents to this indicator. This is an improvement on 66 last year. 37.37% of diverse staff reported experiencing harassment, bullying or abuse from patients, relatives or the public which is a significant decline of 16.1% on last year’s figure. The figure reported nationally in the NHS staff survey is 31.4%, showing the Trust is significantly worse for this indicator. This figure reinforces the need to embed the trusts new No Excuse for Abuse framework across the Trust.
6	Percentage of staff experiencing harassment, bullying or abuse from staff 20.6% of the diverse staff reported experiencing harassment, bullying or abuse from staff. This represents a 5.1% improvement from last year’s figure. However, there has been a steady decline since 2018 when the figure was 29.7% and the Trusts figure is comparable to the national figure of 21%. This figure reinforces the continued importance of embedding the Trust’s Respect framework to address bullying and harassment from staff.
7	Percentage of staff believing that trust provides equal opportunities for career progression or promotion 50% of diverse staff reported that the Trust provides equal opportunities for career progression or promotion. Whilst acknowledging there is still work to do, this represents a 3% improvement on the previous year, and is comparable to the national figure of 50%
8	Percentage of staff personally experiencing discrimination at work by manager/team leader or other colleagues 16.6% of diverse staff reported they had personally experienced discrimination at work by a manager/ team leader, this represents a small improvement of on the previous year, it does demonstrate an improving trend since 2020. However, this figure is still higher than the national average of 13.9%, so will be an area of focus in 2024/25 address by further embedding the Respect framework.
9	% difference between the organisations’ Board voting membership and its overall workforce Diverse representation on the Trust board (voting membership) is 12.5%, this demonstrates a diverse representation on the board that exceeds our workforce and local demographics representation. In the national WRES reporting the Trust positions well with that national figure being -10.9%



Action Plan

Trust performance in 7 of the 9 indicators is better than the NHS average. The Trust WRES action plan for 2024/25 below represents our priorities based upon the data.

Number	2024/25 Objective
1	Fulfil the requirements of the NHSE EDI Improvement plan and support the board to realise high impact action 1.
2	Utilise the July 2024 Trust Non-Executive Director recruitment window as an opportunity to further diversify the Board. The EDI Lead will represent staff (in capacity as Staff Governor) on NED recruitment stakeholder panel.
3	Following the success of the Respect campaign, embed the Respect framework as business-as-usual practice, raising the profile for the ambitions of the work and further drive up a safe reporting culture.
4	Consult with stakeholders on the ‘No Excuse for Abuse’ task and finish group on the guidance framework that seeks to address patient to staff bullying, harassment and aggression from patients. Further see this launched and embedded by March 2025.
5	Effective delivery of a working group to examine harm caused by formal investigations process and implement proportionate actions to address via multi stakeholder involvement.
6	Effective delivery of a staff experience working group which will examine issues of discrimination and belonging and implement proportionate actions to address via multi stakeholder involvement.
7	EDI lead to work with the Executive Medical Director to realise the ambitions of the Act Against Racism Charter and embed inclusive practice across the organisation, providing regular assurance to EMT and the Board.

Appendix 1

Data Sources

Metric	Data Source
Metric 1 – Percentage of staff in AfC pay bands or medical and dental subgroups and very senior managers (including executive board members) compared with the percentage of staff in the overall workforce.	ESR
Metric 2 – Relative likelihood of BAME staff being appointed from shortlisting	Trust’s recruitment data
Metric 3 – Relative likelihood of staff entering a formal disciplinary process	Trust’s HR data
Metric 4 – Relative likelihood of staff accessing non-mandatory training and CPD	Question 13, NHS Staff Survey
Metrics 5 – 8	Questions 14, 11, 5, 28b, NHS Staff Survey
Metric 9 – Percentage difference between the organisation’s board voting membership and its organisation’s overall workforce	ESR and/or Trust’s local data



Following the success of the Respect campaign, embed the Respect framework as business-as-usual practice.

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Independently accredited
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