



Workforce Race Equality Standard (WRES) Action Plan 2019/20

Introduction

Yorkshire Ambulance Service NHS Trust is committed to meeting the requirements of the Workforce Race Equality Standard for NHS Trusts and this is our fourth publication against this standard.

The Trust submitted its workforce data against the standard, to the national WRES team, on the 22nd August 2019, as per our contractual requirements.

Having considered the 2018/19 data, alongside data from previous years, whereby there has been an increasing negative trend or no improvement, this year's action plan will contain fewer, yet more focussed, objectives than in previous action plans. This is to ensure that focussed attention is given on a key number of indicators which, if addressed in detail and positively, will have the biggest impact. In doing this, it is anticipated that this will bring about positive change across the Trust resulting in an improvement in all WRES indicators.

The Trust's BME Staff Network has been instrumental in the development of this action plan which has been grouped into five themes to reflect the WRES return and the Trust's People Strategy.

- Culture and Leadership
- Recruitment, Retention and Resourcing
- Employee Voice
- Health and Wellbeing
- Education and Learning

Monitoring and Evaluation

The action plan will be monitored by the Diversity and Inclusion Strategy Group (DISG) and Strategic Workforce Group on a quarterly basis, and through the Trust Management Group and Trust Board for end of year assessment and evaluation. The BME Staff Network will adopt this action plan as their work programme in supporting the actions going forward.

WRES Submission 2019

Submission Year (August)		2018	2019
Reporting Period		April 2017- March 2018	April 2018- March 2019
Metric 1 -Percentage of staff in each of the AfC bands 1 - 9 or medical and dental subgroups and VSM (including executive board members) compared with the percentage of staff in the overall workforce.	Overall workforce headcount	4827	5110
	Overall % visible BME	4.7%	4.9%
	BME headcount	228	253
	White headcount	4600	4857
Metric 2 - Relative likelihood of white staff being appointed from shortlisting compared to BME staff. (shortlisting across all posts)		1.77	1.79
Metric 3 - Relative likelihood of BME staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation (2 year rolling period)		1.97	1.48
		143 white 14 BME	130 white 10 BME
Metric 4 - Relative likelihood of white staff accessing non-mandatory training and CPD compared to BME		106	1.18

Submission Year (August)		2018	2019
Reporting Period		April 2017- March 2018	April 2018- March 2019
Metric 9 - Percentage difference between the organisations' board voting membership and its overall workforce disaggregated:	White	93.8%	100%
	BME	6.3%	0%
	Null		

Date of Staff Survey		Oct 2017	Oct 2018
Metric 5 - KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.	White	45%	40%
	BME	27%	30%
Metric 6 - KF 26. Percentage staff experiencing harassment, bullying or abuse from staff in last 12 months.	White	27%	26%
	BME	31.1%	28%
Metric 7 - KF 21. Percentage of staff believing that Trust provides equal opportunities for career progression or promotion.	White	71%	74%
	BME	66.0%	62%
Metric 8 - In the last 12 months have you personally experienced discrimination at work from any of the following? b) Manager/team leader or other colleagues	White	10%	9%
	BME	17.6%	15%

Workforce Race Equality Standard: Summary Action Plan 2019/2020

	WRES Objective	YAS Action	Further Details
1.0	Leadership and Culture		
1.1	Staff will work in an environment free from bullying, harassment and discrimination	Design and plan with a 'Say Yes to Respect' Campaign to promote	4
1.2	Ensure BME representation on decision making forums	Consider the roles staff from protected groups hold on decision making boards and consider opportunities to chair/deputy chair.	5
2.0	Recruitment, Retention and Resourcing		
2.1	Ensure that recruitment and selection practices are inclusive for BME staff and prospective applicants	Analysis of recruitment and selection data and use improvement methodologies in R&S processes	5
2.2	To hold comprehensive and accurate workforce data on all protected characteristics for all staff	Monitor and understand workforce data in relation to protected characteristics of all our staff	6
3.0	Employee Voice		
3.1	Examine issues facing BME staff and improve working experience to increase retention	Cultural ambassadors will provide a conduit for staff to the Employee Voice Network. Review learning from national reports	7
4.0	Health and Wellbeing		
4.1	To ensure that the Health and Wellbeing Services meet the needs of BME staff	Health and Wellbeing services and policies to be Equality Impact Assessed to ensure that they meet the needs of BME staff	8
5.0	Education and Learning		
5.1	To have strategies to equip and support BME staff to progress in YAS	Equality Impact Assessments are completed for training and programmes are reviewed for inclusivity	8
5.2	To have enabling strategies that support BME staff to succeed	To work with other Trust's staff networks to gather intelligence on good practice and staff have role models at a senior level	9

Workforce Race Equality Standard – Action Plan 2019/20

No	Objective	Specific action	Lead	Timeline	2018/19 WRES Submission	Indicators of improvement	Progress												
1.0	Leadership and Culture																		
1.1	Staff work in an environment free from bullying, harassment and discrimination	Develop a culture of dignity and respect for all staff through the “Say Yes to Respect” campaign.	Head of D&I	March 2020	<p>IND5: Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months</p> <table border="1"> <thead> <tr> <th>White</th> <th>BME</th> </tr> </thead> <tbody> <tr> <td>30%</td> <td>40%</td> </tr> </tbody> </table> <p>IND6: Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months</p> <table border="1"> <thead> <tr> <th>White</th> <th>BME</th> </tr> </thead> <tbody> <tr> <td>26%</td> <td>28%</td> </tr> </tbody> </table> <p>IND8: In the last 12 months have you personally experienced discrimination at work from any of the following? Manager/team leader or other colleagues</p> <table border="1"> <thead> <tr> <th>White</th> <th>BME</th> </tr> </thead> <tbody> <tr> <td>15%</td> <td>9%</td> </tr> </tbody> </table>	White	BME	30%	40%	White	BME	26%	28%	White	BME	15%	9%	<p>Fewer cases of conflict going through formal processes</p> <p>Fewer complaints of bullying and harassment</p> <p>Staff are aware of the Mediation Service and feel comfortable accessing it</p> <p>BME staff feel confident about reporting incidences of bullying and harassment</p>	<p>The new Dignity and Respect Policy was approved in 2019.</p> <p>A dedicated Task and Finish Group has met to develop ‘Say Yes to Respect Campaign to ensure Professional Behaviours in the Workplace. Campaign to commence October – December 2019</p>
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1.2	Ensure BME representation on decision making forums	Consider the roles staff from protected groups hold on decision making boards and consider opportunities to chair/deputy chair.	Associate Director of Corporate Affairs	August 2020	<p>IND9: Percentage difference between the organisations' board voting membership and its overall workforce disaggregated.</p> <table border="1"> <thead> <tr> <th>White</th> <th>BME</th> </tr> </thead> <tbody> <tr> <td>100%</td> <td>0%</td> </tr> </tbody> </table>	White	BME	100%	0%	<p>Decisions do not impact negatively on BME people</p> <p>Decisions take into account the needs of BME people</p>	A positive action campaign is being developed to increase ethnic make-up at Trust Board i.e. targeted recruitment for an Associate Non-Executive Director																
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2.0	Recruitment, Retention and Resourcing																										
2.1	Ensure that recruitment and selection practices are inclusive for all BME staff and prospective applicants	<ul style="list-style-type: none"> Analyse recruitment data to explore drop-out rates by roles and service areas Identify reasons and trends for drop outs Implement improvement (including candidate reach and direct feedback) <p>Review and analyse inclusivity of recruitment materials (including where adverts are placed).</p> <p>Consider positive action schemes to encourage a greater number of BME applicants.</p> <p>Create and develop a pool of BME staff who</p>	<p>Recruitment Manager/Head of D&I</p> <p>Recruitment Manager</p> <p>Leadership & OD/ Head of D&I</p> <p>Head of YAS Academy/</p>	<p>March 2020</p> <p>March 2020</p> <p>March 2020</p> <p>March 2020</p>	<p>IND2: Relative likelihood of white staff being appointed from shortlisting compared to that of BME staff being appointed from shortlisting</p> <p>Applied</p> <table border="1"> <thead> <tr> <th>White</th> <th>BME</th> </tr> </thead> <tbody> <tr> <td>3461</td> <td>634</td> </tr> </tbody> </table> <p>Shortlisted</p> <table border="1"> <thead> <tr> <th>White</th> <th>BME</th> </tr> </thead> <tbody> <tr> <td>1176</td> <td>177</td> </tr> </tbody> </table> <p>Attended interview</p> <table border="1"> <thead> <tr> <th>White</th> <th>BME</th> </tr> </thead> <tbody> <tr> <td>726 (61%)</td> <td>89 (50%)</td> </tr> </tbody> </table> <p>Appointed</p> <table border="1"> <thead> <tr> <th>White</th> <th>BME</th> </tr> </thead> <tbody> <tr> <td>250</td> <td>21</td> </tr> </tbody> </table> <p>Relative likelihood of shortlisting/appointed</p> <table border="1"> <thead> <tr> <th>White</th> <th>BME</th> </tr> </thead> <tbody> <tr> <td>0.21</td> <td>0.12</td> </tr> </tbody> </table>	White	BME	3461	634	White	BME	1176	177	White	BME	726 (61%)	89 (50%)	White	BME	250	21	White	BME	0.21	0.12	<p>All selection panels are adequately trained on diversity and inclusion and unconscious bias.</p> <p>R&S panels have diversity representation,</p> <p>Recruitment literature carries an inclusive statement</p> <p>YAS workforce is representative of the community we serve</p>	<p>A set of metrics is under development for submission quarterly to Strategic Workforce Group</p> <p>Recruitment policies and literature are being reviewed to ensure those with protected characteristics are welcomed to apply for roles</p> <p>A positive action campaign is being developed to increase ethnic make-up at Trust Board i.e. targeted recruitment for an Associate Non-</p>
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		<p>can contribute to selection panels</p> <p>Hold recruitment/career days for BME community to apply for roles. Including sessions on application /interview skills</p>	<p>Head of D&I</p> <p>Recruitment Manager/Head of D&I</p>	December 2019			Executive Director The Trust have held 2 events for BME staff with positive outcomes														
2.2	To hold comprehensive workforce data on all protected characteristics for staff	<p>Strategic Workforce Group (SWG) to monitor the workforce data in relation to:</p> <ul style="list-style-type: none"> • Applications/ Shortlisting/ Recruitment • Promotion/career progression/ secondment • Pay and reward • Flexible working • Employee relations case work • Access to training & development • Staff satisfaction • Leavers/Turnover <p>Review the learning from 'A fair experience for all; closing the gap in rates of disciplinary action across the NHS workforce of July 2019</p>	<p>Director of Workforce and OD</p> <p>HR Business Partner/Head of D&I</p>	<p>March 2020</p> <p>March 2020</p>	<p>IND1: Percentage of staff in each AfC bands 1 - 9 or medical and dental subgroups and VSM (including executive board members) compared with the percentage of staff in the overall workforce</p> <table border="1"> <thead> <tr> <th colspan="2">Trust Headcount</th> </tr> </thead> <tbody> <tr> <td colspan="2">5110</td> </tr> <tr> <th>White</th> <th>BME</th> </tr> <tr> <td>4857</td> <td>253</td> </tr> </tbody> </table> <p>Percentage</p> <table border="1"> <thead> <tr> <th>White</th> <th>BME</th> </tr> </thead> <tbody> <tr> <td>95.1%</td> <td>4.9%</td> </tr> </tbody> </table> <p>IND3: Relative likelihood of BME staff entering a formal disciplinary process, compared to that of white staff. (Closer to 1 the better the result.)</p> <table border="1"> <thead> <tr> <th>Likelihood i.e. more likely to enter disciplinary process</th> </tr> </thead> <tbody> <tr> <td>1.48</td> </tr> </tbody> </table>	Trust Headcount		5110		White	BME	4857	253	White	BME	95.1%	4.9%	Likelihood i.e. more likely to enter disciplinary process	1.48	<p>The following mandated and published work programmes benefit from equality monitoring data</p> <ul style="list-style-type: none"> • Workplace Disability Equality Scheme (WDES) • Workplace Race Equality Scheme (WRES), • Equality & Diversity System 2 (EDS2) • Gender pay gap report <p>Likelihood of BME staff entering formal disciplinary processes are reduced</p>	<p>A set of metrics is under development for submission quarterly to the Strategic Workforce Group</p> <p>Standard reporting templates developed and standard reports published annually (with quarterly updates to in place).</p>
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		<p>(WRES team) and 'Learning lessons' to improve our people practices (May 2019)</p> <p>Monitor the make-up of the Trust's workforce in relation to all protected characteristics via the annual Equality and Diversity Report and to complete mandated reports to NHS England</p>	Head of Diversity and Inclusion (D&I)	March 2020	<p>Headcount</p> <table border="1"> <thead> <tr> <th>White</th> <th>BME</th> </tr> </thead> <tbody> <tr> <td>130</td> <td>10</td> </tr> </tbody> </table>	White	BME	130	10	YAS workforce is representative of the community we serve					
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3.0 Employee Voice															
3.1	Examine issues facing BME staff and improve working experience to increase retention	Launch and embed the Cultural Ambassador Network to act as key conduits in raising the profile of BME equality	BME Staff Network Head of D&I	Ongoing	<p>IND5: Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months</p> <table border="1"> <thead> <tr> <th>White</th> <th>BME</th> </tr> </thead> <tbody> <tr> <td>30%</td> <td>40%</td> </tr> </tbody> </table> <p>IND6: Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months</p> <table border="1"> <thead> <tr> <th>White</th> <th>BME</th> </tr> </thead> <tbody> <tr> <td>26%</td> <td>28%</td> </tr> </tbody> </table> <p>IND8: In the last 12 months have you personally experienced discrimination at work from any of the following? Manager/team</p>	White	BME	30%	40%	White	BME	26%	28%	<p>BME staff across YAS feel engaged and listened to through various engagement mechanisms.</p> <p>Staff area aware of the Mediation Service and feel comfortable accessing it</p>	The BME Staff Network is in place and effectively influencing equality at key decision making forums including the "Say Yes to Respect Campaign"
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4.0 Health and Wellbeing											
4.1	To ensure that the Health and Wellbeing Services reflects the needs of BME staff	Undertake an Equality Impact Assessment on the Health and Wellbeing Services and ensure that the needs of BME staff are met Ensure that BME staff needs are met under the Health and Wellbeing Policy	Head of Health & Wellbeing Head of Health & Wellbeing	March 2020 March 2020	In the last 12 months have you personally experienced discrimination at work from a manager/team leader or other colleagues?	BME staff feel their physical, mental and psychological needs are met	EIA for the Trust's Occupational Health Services is complete. Health and Wellbeing Policy is in development				
5.0 Education and Learning											
5.1	To have strategies that equip BME staff to progress in their careers at YAS	Review development programmes from an inclusion perspective to ensure BME staff's needs are being met: <ul style="list-style-type: none"> in the training room, incl. accessible venues, materials, equipment to access learning and development opportunities Ensure equality, diversity and Human Rights embedded into training	Head of Leadership and OD Head of YAS Academy	Aug 2020 and ongoing thereafter March 2020	IND4: Relative likelihood of white staff accessing non mandatory training and CPD as compared to BME staff (The closer to 1 the better the result.) <table border="1"> <tr> <td>Likelihood i.e. more likely to access training and CPD</td> </tr> <tr> <td>1.18</td> </tr> </table>	Likelihood i.e. more likely to access training and CPD	1.18	D&I Team deliver training to all managers All BME staff have an annual appraisal where managers and staff identify development needs BME staff attendance on management /leadership programmes is increased	Diversity and inclusion is a key component of the Leadership Induction programme. All new and existing managers are expected to attend		
Likelihood i.e. more likely to access training and CPD											
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No	Objective	Specific action	Lead	Timeline	2018/19 WRES Submission	Indicators of improvement	Progress				
		Monitor take-up of L&D opportunities by protected characteristic, including at events designed to improve learning e.g. conferences, seminars.	Head of YAS Academy	March 2020							
5.2	To have enabling strategies that support BME staff to succeed	<p>Analyse the data of progression of white staff in proportion to BME staff and consider any improvements for recruitment to address identified areas</p> <p>Network chairs to link in with other staff forum's across UK, in particular the NHS to source good practice.</p> <p>Managers to act as role models and in some cases as mentors for junior staff from the staff networks.</p>	<p>Head of D&I/HR</p> <p>Head of D&I BME Staff Network Chair</p> <p>Head of D&I</p>	<p>March 2020</p> <p>December 2019</p> <p>March 2020</p>	<p>IND7: Percentage of staff believing that Trust provides equal opportunities for career progression or promotion</p> <table border="1"> <thead> <tr> <th>White</th> <th>BME</th> </tr> </thead> <tbody> <tr> <td>74%</td> <td>62%</td> </tr> </tbody> </table>	White	BME	74%	62%	<p>BME staff feel they have equal access to progression.</p> <p>Staff have role models at a senior level</p> <p>The Trust has intelligence relating to good practice from other Trust's staff forums</p>	<p>Good engagement with the national Ambulance Staff networks</p>
White	BME										
74%	62%										