



**The Clatterbridge  
Cancer Centre**  
NHS Foundation Trust

## **NHS Workforce Race Equality Standard (WRES)**

Annual Report 2020

The Clatterbridge Cancer Centre NHS Foundation Trust

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## 1 Introduction

The Workforce Race Equality Standard was mandated in April 2015 through the NHS contract starting in 2015/2016 with the requirement to publish the data on external websites. The aim is to ensure employees from black and minority ethnic (BME) backgrounds have equal access to career opportunities and receive fair treatment in the workplace.

NHS providers are expected to show progress against a number of indicators of workforce equality, including a specific indicator to address the low numbers of BME board members across the organization.

During the initial outbreak of COVID-19 the requirement to publish WRES data was put on hold and then reinstated at the end of May 2020.

This report contains the Trust's employee data drawn from the Electronic Staff Records (ESR) system and also the relevant results from the 2019 National Staff Survey.

At The Clatterbridge Cancer Centre, we believe everyone has the right to be respected and valued as an individual. We care about empowering people and having a culture that promotes equality, inclusivity and human rights. We are determined to do all we can for all people at all times to meet their individual needs and provide the very best experience.

## 2 Executive summary

The percentage of BAME staff employed by the Trust has increased slightly from 4.4% to 5.0% between the years ending 31 March 2019 and 31 March 2020. The number of unknown or undisclosed data has fallen slightly from 3.1% to 2.4%.

The percentage of non clinical BAME staff has slightly increased from 1.8%(8 staff) to 2.8% (14 staff) however, the Clinical BAME has remained fairly static as an overall percentage of the Clinical workforce at 6.1% (58 staff) (compared to 6.2% in 2019, 50 staff).

The percentage of unknown/non disclosed is fairly low but has decreased from 3.7% to 2.4% for non clinical staff and has fallen from 2.9% to 2.4% for clinical staff.

The data regarding the non-BAME staff being appointed from shortlisting compared to BAME staff has also increased from 1.35 in 2019 to 2.5 in 2020 meaning that non-BAME staff are 2.5 times more likely to be appointed than BAME staff.

The Trust has not had any BAME staff that were managed under formal capability procedures over the last 2 years and therefore there is a nil return for the measure in relation to the likelihood of BAME staff entering formal capability process compared to non-BAME staff.

The relative likelihood of non BAME staff accessing non-mandatory and CPD Training compared to BAME staff indicates a slight improvement in that the number has decreased from 1.55 to 1.32, however non BAME staff are still more likely to access training compared to BAME staff.

Our non executive BAME representation at Board has increased to 14.3% in 2020. There has also been an increase as a result of the Board members with voting rights from 18.2% in 2019 to 27.3% in 2020.

From our Staff Survey Results in 2019 we have the following information:

- the Trust has seen a small decrease of 1.1% in white staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months compared to 2018, and a decrease of 2.9% in BME staff experiencing harassment, bullying or abuse from patients, relatives or the public.
- The Trust has seen a decrease of 3.6% in white staff experiencing harassment, bullying or abuse from staff in last 12 months in comparison to 2018, and a decrease of 2.1% in BME staff experiencing harassment, bullying or abuse from staff in comparison to 2018.
- The Trust has seen a small decline of 0.1% from 2018 in white staff believing the trust provides equal opportunities for career progression or promotion, but has seen a significant increase of 9.6% in BME staff believing the trust provides equal opportunities for career progression or promotion.
- The Trust has seen an encouraging decrease of 0.7% from white staff and a decrease of 6.4% from BME staff personally experiencing discrimination at work from Manager/team leader or other colleagues in comparison to 2018 data.

### **3 WRES progress in 2019/20**

A number of initiatives and work has been undertaken by the Trust over the last year. A summary of these are as follows:

- In order to raise awareness of the importance of self-recording disability and the Trusts legal obligation in reporting mandatory information a campaign to improve self-declaration was undertaken via communications briefings, screen savers and poster.
- Recruitment training was updated for managers to ensure content includes conscious and unconscious bias and reasonable adjustment information.
- Bullying & Harassment awareness training to managers has been delivered across all directorates and will now be included as part of core management training programme in 2020/2021.
- In November 2019 the Trust promoted the national Anti-Bullying week and raised awareness of support available to staff.

- In October 2019 The Clatterbridge Cancer Centre was one of the sponsors of the Royal College of Nursing's Black History Month Conference held in Preston which embraced the talents of the BAME workforce in health and social care across the North West. At the Conference, one CCC staff member received an award for Outstanding Contributions to Equality Diversity and Inclusion.
- The Trust sought to gain support from staff to start a BAME staff network and has since taken the opportunity to link in jointly with established BAME staff network at Liverpool University Hospital Foundation Trust.
- The offer of coaching opportunities for all staff were enhanced during 2019/2020 in order to support staff with career development discussions.

## 4 Conclusion and next steps

The data for the Trust in respect of BAME staff shows small but positive improvements in relation to a number of areas, both in terms of numbers of staff and staff survey results. The COVID-19 epidemic and the Black Lives Matter campaign has however made everyone take stock of what might be happening under the surface for BAME staff and it is important that CCC as a Trust continues to question it's policies and practices and ensures that BAME staff voices are heard and listened to.

There are therefore a number of important actions planned for the next year which will also take into account the NHS People Plan. These will include ensuring that all staff can expect civility and respect at work and the Trust is due to refresh the Trust values and behaviours by 31 March 2021 to support this. We have also committed to increasing the number of Freedom to Speak Up Guardians and Champions and promote a Respect at Work campaign before the end of 2020.

The Trust is also planning to introduce a reverse mentoring scheme and carry out a series of focus groups with staff to understand perceived or real experience of discrimination. Following the opening of our new hospital in Liverpool we also aim to actively engaged with local stakeholder and community groups to widen our candidate pool. 13.8% of Liverpool's population are Black and Minority Ethnic, similar to the proportion of the BAME population in the UK which stands at 13%.

## Appendix 1 WRES metrics report

Detailed below is the organisation's WRES data as at 31 March 2020

**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.

(Data source: ESR).

### 1a. Non-clinical workforce

	BAME staff in 2019	BAME staff in 2020	BAME staff in 2019/2020	Non-BAME staff in 2019	Non-BAME staff in 2020	Non-BAME staff in 2019/2020	Unknown/null staff in 2019	Unknown/null staff in 2020	Unknown/null staff in 2019/2020	Total staff in 2019	Total staff in 2020
	Number	Number	Difference	Number	Number	Difference	Number	Number	Difference	Headcount	Headcount
<b>Cluster 1 (Bands 1 - 4)</b>	3	8	+5	261	277	+16	6	6	0	270	291
<b>Cluster 2 (Band 5 - 7)</b>	4	3	-1	121	131	+10	7	5	-2	132	139
<b>Cluster 3 (Bands 8a - 8b)</b>	1	2	+1	30	40	+10	4	1	-3	35	43
<b>Cluster 4 (Bands 8c – 9 &amp; VSM)</b>	0	1	+1	20	21	+1	0	0	0	20	22
<b>Total</b>	8	14	6	432	469	37	17	12	-5	457	495

## 1b. Clinical workforce

	BAME staff in 2019	BAME staff in 2020	BAME staff in 2019/2020	Non-BAME staff in 2019	Non-BAME staff in 2020	Non-BAME staff in 2019/2020	Unknown/null staff in 2019	Unknown/null staff in 2020	Unknown/null staff in 2019/2020	Total staff in 2019	Total staff in 2020
	Number	Number	Difference	Number	Number	Difference	Number	Number	Difference	Headcount	Headcount
Cluster 1 (Bands 1 - 4)	5	6	+1	160	191	+31	2	3	+1	167	200
Cluster 2 (Band 5 - 7)	14	21	+7	486	521	+35	13	12	-1	513	554
Cluster 3 (Bands 8a - 8b)	2	2	0	84	95	+11	5	4	-1	91	101
Cluster 4 (Bands 8c - 9 & VSM)	3	2	-1	9	9	0	1	1	0	13	12
Cluster 5 (Medical and Dental staff, Consultants)	21	21	0	33	36	+3	3	3	0	57	60
Cluster 6 (Medical and Dental staff, Non-consultant career grade)	4	4	0	4	4	0	0	0	0	8	8
Cluster 7 (Medical and Dental staff, Medical and Dental trainee grades)	1	1	0	3	2	-1	0	0	0	4	3
<b>Total</b>	<b>50</b>	<b>57</b>	<b>7</b>	<b>779</b>	<b>858</b>	<b>79</b>	<b>24</b>	<b>23</b>	<b>-1</b>	<b>853</b>	<b>938</b>

**Metric 2 – Relative likelihood of BAME staff compared to non-BAME staff being appointed from shortlisting across all posts**

(Data source: Trust’s recruitment data)

	Relative likelihood in 2019	Relative likelihood in 2020	Relative likelihood difference (+-)
Relative likelihood of non-BAME staff being appointed from shortlisting compared to BAME staff	1.35	2.50	+1.15

**Metric 3 – Relative likelihood of BAME staff compared to non-BAME staff entering the formal capability process, as measured by entry into the formal capability procedure.**

(Data source: Trust’s HR data)

	Relative likelihood in 2018/19	Relative likelihood in 2019/20	Relative likelihood difference (+-)
Relative likelihood of BAME staff entering formal capability process compared to non-BAME staff	0	0	0

**Metric 4 – Relative likelihood of BAME staff compared to non-BAME staff accessing non-mandatory and CPD Training**

(Data source: ESR)

	Relative likelihood in 2018/19	Relative likelihood in 2019/20	Relative likelihood difference (+-)
Relative likelihood of non BAME staff accessing non-mandatory and CPD Training compared to BAME staff	1.55	1.32	-0.23



**Metrics 5-8 – Percentage of BAME staff compared to non-BAME staff experiencing harassment, bullying or abuse.**

(Data source: NHS Staff Survey)

	<b>BAME staff responses to 2018 NHS Staff Survey</b>	<b>Non-BAME staff responses to 2018 NHS Staff Survey</b>	<b>% points difference (+/-) between BAME staff and non-BAME staff responses 2018</b>	<b>BAME staff responses to 2019 NHS Staff Survey</b>	<b>Non-BAME staff responses to 2019 NHS Staff Survey</b>	<b>% points difference (+/-) between BAME staff and non-BAME staff responses 2019</b>
	<b>Percentage (%)</b>	<b>Percentage (%)</b>		<b>Percentage (%)</b>	<b>Percentage (%)</b>	
<b>5. Staff experiencing harassment, bullying or abuse from patients/ service users, their relatives or other members of the public in the last 12 months</b>	<b>24.0%</b>	<b>22.1%</b>	<b>1.9%</b>	<b>21.1%</b>	<b>21.0%</b>	<b>0.1%</b>
<b>6. Staff experiencing harassment, bullying or abuse from staff in the last 12 months</b>	<b>22.0%</b>	<b>25.1%</b>	<b>-3.1%</b>	<b>18.4%</b>	<b>23.2%</b>	<b>-4.8%</b>
<b>7. Staff believing that the organisation provides equal opportunities for career progression or promotion</b>	<b>81.3%</b>	<b>88.5%</b>	<b>-7.2%</b>	<b>90.9%</b>	<b>88.4%</b>	<b>-2.5%</b>
<b>8. Staff experienced harassment, bullying or abuse at work from manager/team leader or other colleagues in the last 12 months</b>	<b>12.0%</b>	<b>6.2%</b>	<b>5.8%</b>	<b>5.6%</b>	<b>5.5%</b>	<b>0.1%</b>

**Metric 9 – Percentage difference between the organisation’s board voting membership and its organisation’s overall workforce**

(Data source: NHS ESR and/or trust’s local data)

	<b>BAME Board members in 2019</b>	<b>Non-BAME Board members in 2019</b>	<b>Board members with BAME status unknown in 2019</b>	<b>% points difference (+/-) between BAME Board members and BAME staff in overall workforce</b>	<b>BAME Board members in 2020</b>	<b>Non-BAME Board members in 2020</b>	<b>Board members with BAME status unknown in 2020</b>	<b>% points difference (+/-) Between BAME and non-BAME Board members in 2020</b>
	<b>Percentage (%)</b>	<b>Percentage (%)</b>	<b>Percentage (%)</b>		<b>Percentage (%)</b>	<b>Percentage (%)</b>		
<b>Percentage difference between the organisation’s Board voting membership and its organisation’s overall workforce, disaggregated by Exec/non-exec and Voting/non-voting.</b>	Exec = 33.3% Non-exec = 0% Voting = 18.2% Non-voting = 0%	Exec = 66.7% Non-exec = 100% Voting = 81.8% Non-voting = 100%	Exec = 0% Non-exec = 0% Voting = 0% Non-voting = 0%	Total Board = 16.7% Overall workforce = 4.4% Difference = 12.3%	Exec = 33.3% Non-exec = 14.3% Voting = 27.3% Non-voting = 0%	Exec = 66.7% Non-exec = 85.7% Voting = 100% Non-voting = 0%	Exec = 0% Non-exec = 0% Voting = 0% Non-voting = 0%	Total Board = 23.10% Overall workforce = 5% Difference = 18.1%

## APPENDIX 2 - WRES action plan 2020/21

Metric	Objective	Action/s	Timescales	Lead/s	Why
1. Percentage of staff in each of the AfC 1-9 OR Medical and Dental sub groups and Very Senior Managers (VSM) (including Executive Board members) compared with the percentage of staff in the overall workforce.	Increase representation of BAME staff across all paybands	<ul style="list-style-type: none"> <li>Audit current recruitment process and practices in order to identify potential barriers to appointment of BAME staff</li> <li>Review options in relation to targeted job opportunities and positive discrimination</li> <li>Review process of encouraging application from volunteer workforce</li> </ul>	Dec 2020	Recruitment Team	To ensure staff are reflective of the population we serve.
2. Relative likelihood of staff being appointed from shortlisting across all posts	Ensure recruitment process is free from prejudice and bias whether conscious or unconscious	<ul style="list-style-type: none"> <li>Review data as part of recruitment audit to identify potential barriers.</li> <li>Investigate possibility of having an EDI specialist on all/selective interview panels.</li> </ul>	Dec 2020	Recruitment Team	To improve employment opportunities of BAME staff
3. Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation.	To ensure BAME staff do not suffer discrimination in becoming more likely to enter formal capability process.	<ul style="list-style-type: none"> <li>Due to no cases over last 2 years, continue to review and record cases.</li> </ul>	March 2021	HR Business Partnering Team	To ensure there is no unfair treatment of BAME staff.
4. Relative likelihood of staff accessing non-mandatory and CPD Training	To ensure BAME staff are able to progress within careers and up the salary scale	<ul style="list-style-type: none"> <li>Review process of gathering information in relation to ethnicity at application stage to ensure completeness of data.</li> <li>Introduce career conversation for all staff with particular attention to BAME staff</li> <li>Introduce reverse mentoring programme for BAME staff</li> </ul>	Dec 2020	EDI Lead	To improve career progression opportunities of BAME staff
5. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months	To ensure all BAME staff feel safe, supported and protected within the workplace	<ul style="list-style-type: none"> <li>Review security provisions at all sites</li> <li>Increase awareness of all staff regarding reporting and support mechanisms</li> </ul>	Oct 2020	H&S Lead Communications team	To ensure all staff are treated with dignity and respect.
6. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.	To have zero tolerance for all forms of harassment, bullying and abuse and create a culture of civility and respect	<ul style="list-style-type: none"> <li>Refresh of Trust values and behaviours</li> <li>Respect at Work campaign planned for Q3</li> <li>Increase number of FTSU Champions and Guardians</li> </ul>	March 2021 Dec 2020 Dec 2020	Learning & Organisation Development Team Learning & Organisation Development Team Trust FTSU Lead	To ensure all staff are treated with dignity and respect.

		<ul style="list-style-type: none"> <li>• Appoint Board Wellbeing Guardian</li> </ul>	Nov 2020	WOD Director	
<b>7. Percentage of staff believing that the Trust provides equal opportunities for career progression and promotion</b>	To ensure BAME staff are able to progress within careers and up the salary scale	<ul style="list-style-type: none"> <li>• Introduce career conversation for all staff with particular attention to BAME staff</li> <li>• Introduce reverse mentoring programme for BAME staff</li> </ul>	Dec 2020	Learning & Organisation Development Team Trust FTSU Lead	To improve career progression opportunities of BAME staff
<b>8. In the last 12 months have you personally experienced discrimination at work from any of the following? Management, team leader or other colleagues.</b>	To ensure all staff are treated with dignity and respect and don not experience discrimination in the workplace.	<ul style="list-style-type: none"> <li>• Refresh of Trust values and behaviours</li> <li>• Respect at Work campaign planned for Q3</li> <li>• Increase number of FTSU Champions and Guardians</li> </ul>	March 2021 Dec 2020 Dec 2020	Learning & Organisation Development Team Learning & Organisation Development Team Trust FTSU Lead	To ensure all staff are treated with dignity and respect.
<b>9. Percentage difference between the organisations' Board voting membership and its overall workforce</b>  <b>NOTE: Only voting members of the Board are included in this indicator</b>	To ensure there is appropriate BAME representation at Board level with voting rights.	<ul style="list-style-type: none"> <li>• Review recruitment documentation and process as part of audit to ensure process attracts BAME candidates</li> </ul>	Dec 2020	Recruitment Team	To ensure that senior BAME staff are represented at Board level and are part of the decision making at a strategic level within the Trust