

NWAS WRES 2018-2019 Action Plan – Summary at end of period

Indicator	What results show	Key Area of Action	Progress	Timescales
1 – Workforce make-up per Band	Improvement in overall BME % rates. Still differences in clinical and non-clinical staff by ethnicity,	Continue actions to promote NWAS careers to BME communities Improve BME representation on entry role interview panels Work with partner HEI's to improve representation on Paramedic courses Development of BME role models to support engagement events	Continued presence at BME recruitment events. Training date for BE staff to be trained in the Recruitment and Selection HR masterclass – date TBC in Q3 HEI's invited to National BME conference in Oct 2018 and ongoing collaboration in progress List of BME staff to attend events in place. Further cohort of Pre-degree paramedic programme implemented Pre-employment programmes implemented	Ongoing Ongoing Ongoing Complete
2 – Likelihood of being appointed from shortlisting	Relative likelihood of BME candidates being appointed from shortlisting as compared with White applicants looks positive for BME candidates. More BME candidates shortlisted this year too	Develop improved real time monitoring from new recruitment system.	Information analysed on a quarterly basis WRES meeting to discuss how to highlight information to wider Trust. Development of 'Driving Diversity' video	Ongoing
3 – Likelihood of entering formal disciplinary process	Likelihood improved slightly this year. Overall number of individuals is remaining consistent.	Ongoing review of cases and management training	Investigation training developed in 2018/19. Task and Finish group to be formed in Q3 19/20 to look at the use of the Disciplinary policy in light of national guidance.	Ongoing

4 – Likelihood of accessing non-mandatory training and CPD	Training figures have improved by likelihood but overall Trust numbers have decreased.	Implementation of BME development network targeting staff in frontline roles. Providing personal development to support progression, to enable sharing of experiences and to develop role models.	CPD event in Jan 2019 followed by a staff forum in Feb 2019 and July 2019. Have supported BME attendance at external training and conferences.	Ongoing
5 - % staff experiencing abuse from patients	Increase for BME staff, reduction for White staff. Overall, White employees advise experiencing abuse slightly more than BME staff in this staff survey result	Continuing work through violence and aggression group	The V&A group have been asked to consider WRES when mapping out their work plan.	Ongoing
6 - % staff experiencing abuse from staff	Slight increase for BME staff from 29% to 31%	BME focus groups and development network implemented to gain in depth understanding of BME staff experience to support targeted interventions.	Staff forums and bespoke CPD events	Ongoing
7 - % staff believing Trust offers equal opportunity for career progression	Improvement from 41% to 45% for BME staff but this figure remains lower than for White colleagues, at 70%.		Staff forums and bespoke CPD events	Ongoing
8 - % staff personally experiencing discrimination from manager/colleague	After a reduction the previous year, this figure has increased again for BME staff and remains higher than for White staff	Review of diversity content of key leadership training and planned essential learning.	The L&D team are working with ED&I Advisor on bespoke training e.g. formation of the Is it banter session. First session held in August 2019.	Ongoing
9 – Board member representation	BME representation on Board remains representative of local population	Continued promotion of senior positions and engagement with NHSI over NED recruitment. Board visibility	Board development session for ED&I scheduled for December 2019.	Ongoing