

Equality and Diversity Council Meeting Paper

28th July 2015

Workforce Race Equality Standard Update

Purpose and context

An agreed priority of the EDC is to focus upon ensuring that the gap between the treatment, opportunities and experience of BME and White staff is closed and that NHS Boards are broadly representative of the communities they serve through the development and implementation of the Workforce Race Equality Standard.

Actions taken to date

- The Workforce Race Equality Standard is now mandated through the NHS standard contract 2015-16 and in the CCG Assurance Framework 2015/16
- The Workforce Race Equality Standard will be inspected against by the CQC from 2016-17
- Work has been commissioned to explore the feasibility of benchmarking the Standard and will be published in the near future.
- Technical Guidance on the Workforce Race Equality Standard has been published.
- An extensive range of FAQs and other materials are on a bespoke web page on the NHS England Equality Hub.
- An Advisory Group has been established and held its second meeting on 17th June 2015. It has changed its chair to Sir Keith Pearson (HEE). The draft minutes will be published in the near future.
- Joint Directors of the WRES Implementation Team have been appointed (Yvonne Coghill and Roger Kline) both commenced in post on 1st July 2015.
- Work has commenced on recruiting other members to the team.
- The development of a two and five year strategic plan with planned deliverables has begun, with support from members of the Advisory Group.

Current position

- Resources, including a case studies template and a voluntary reporting template, have been published.
- Further development of resources is underway including some fact sheets on the case for the WRES and explaining the processes underway.
- Technical Guidance for CCGs has been completed.
- Commissioning of work to evaluate the progress and impact of WRES, and to develop benchmarking methodology will take place in the near future following due process.
- Discussions with partner organisations to NHS England on further work and support is underway.
- Subject to resources, initial analysis of the July 1st baseline data reports will begin.

Key risks

Current potential risks include

- Delays in appointing additional staff in a timely manner
- Consequential risks might include a lack of direction for NHS organisations if timely support and resources not provided
- A risk that faced with other pressures, work to implement the Standard will not be seen as a priority (applies to both local and national organisations)
- This opportunity to help improve NHS provider performance and patient care will be missed
- The staffing costs of less favourable treatment of BME staff will continue

Next steps

Further development of the work programme, in particular:

- Appointment and development of an effective Team
- Ensuring all organisations understand the case for the Standard through a range of communications especially face to face discussions with networks, Boards and senior management teams
- Drawing on the contribution of partner organisations for NHS England nationally, working in partnership
- Working collaboratively to help support WRES implementation at national organisation level
- Prioritising the identification and sharing of examples of good practice
- Collaboration with the CQC on its future work

Recommendation and action requested

For the EDC to note the above, and to seek support and commitment with regard to the implementation of WRES across national health organisations.

**Yvonne Coghill and
Roger Kline
July 2015**