

GSTT/RBH Workforce Race Equality Standard WRES					
		2019	2020	2021	Actions
2.Relative likelihood of white applicants being appointed from shortlisting across all posts compared to BME applicants	GSTT	1.91	1.45	1.5 	<ul style="list-style-type: none"> Embedding inclusive recruitment practice; transparent advertising, diverse shortlisting, robust selection criteria, diverse interview panel and developmental feedback given Embed positive action charter with clear progress metrics
	RBH	1.7	1.8	1.5	
3.Relative likelihood of BME staff entering the formal disciplinary process compared to white staff	GSTT	2.40	2.8 77 staff	4.15 44 staff 	<ul style="list-style-type: none"> Thematic review of cases, referrals, suspension, and outcomes including investigation of informal/formal disciplinary process. Working with managers to advance cultural competency and apply. Support and embed inclusive decision making process to turn difficult conversations to successful conversations.. Embed Just and learning culture methodology within training for managers.
	RBH	1.34	1.37	1.25	
4.Relative likelihood of BME staff accessing non-mandatory training and CPD compared to white staff	GSTT	1.12	2.42	1.26 	<ul style="list-style-type: none"> Data cleansing and consistency of collection set. Succession/talent pathway post non mandatory training, ROI and measuring improvements on career progression? Investigation into types courses? funding,
	RBH	N/A	0.95	0.97	
5.Percentage of BME staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months	GSTT	25%	24%	24%  (White 30%)	<ul style="list-style-type: none"> Embed zero tolerance statement/visibility Visibility on how to raise concerns and escalate Support for staff (practical support and health and well being offer.
	RBH	18.5%	28%	19.5% (White 19%)	
6.Percentage of BME staff experiencing harassment, bullying or	GSTT	29%	27%	28%  (White 26%)	<ul style="list-style-type: none"> Developing and embedding an anti racist culture-including visible leadership/active allyship/role

abuse from staff in last 12 months	RBH	34%	30%	29% (White 25%)	<ul style="list-style-type: none"> modeling and visibility, roll out SeeMeFirst and statement . Embed speaking up/active allyship/active bystander training Embed cultural competency, skills and confidence Working through local staff survey actions Embed Living our values programme
7. Percentage of BME staff believing that trust provides equal opportunities for career progression or promotion	GSTT	67%	66%	 62% (White 84%)	<ul style="list-style-type: none"> Embed positive action charter and associated actions plans/date with visibility of progress Visibility of opportunities, compliance with diverse shortlisting/interviews. Succession planning/opportunities Monotoring progress against Model employer goals
	RBH	73%	72%	74% (White 89%)	
8. Percentage of BME staff personally experiencing discrimination at work from a manager/team leader or other colleagues	GSTT	17%	15%	 17% (White 9%)	<ul style="list-style-type: none"> Diagnostic into where/how/what to create greater cultural awareness, senior insight/visibility speaking up. Colloboartive working across union, networks, HR, managers. Greater partnership working with staff networks Anti racist culture commitment to be embedded. Impact of white allies influence. Impact of positive action charter pledges Continue to roll out EDI workshops
	RBH	13%	16%	17% (White 6%)	
9. % difference between the organisations Board voting membership and its overall % of BME staff in the workforce	GSTT	-28.5	-28.5	 -24.2	<ul style="list-style-type: none"> Supporting and enabling inclusive Foundation membership process including during elections. Linking with community groups. Engagement in national/regional WRES programmes.
	RBH	-24	-26.5	n/a	

