

Workforce Race Equality Standard (WRES) Survey 2021 initial findings

December 2021

NMC WRES Survey 2021 initial findings

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Introduction

In 2019 the NMC made a commitment to sign up to the NHS Workforce Race Equality Standard (WRES), and in October 2020 we submitted our first set of data to WRES in line with this pledge. We have since committed to doing this on an annual basis, and in May 2021 collected our second round of data to enable us to begin to benchmark our performance, and monitor progress.

The WRES survey, and associated action plan, forms one part of our EDI plan in line with the NMC Strategy 2020-25. It is a key component of our workforce EDI work, setting our direction in terms of achieving good practice race equality across all areas of the employee lifecycle, ensuring our staff have access to career opportunities, development and progression, and that they and receive inclusive and fair treatment in the workplace.

The 2021 WRES survey ran from 4th to 21st May and 48.7 percent of NMC colleagues responded. This is an increase on the previous year where the response rate was 37.5 percent, an increase of 11.2 percentage points. This should be seen as a very positive outcome for the wider organisation's engagement with race equality.

In this initial findings report we set out the results against each WRES data indicator (1-4) and then results from our internal WRES workforce survey (indicators 5-8).

Unfortunately at the time of this initial report (June 2021) we had not received a comparative benchmark report from the NHS WRES Team for 2020. This meant we didn't have an updated set of data from 'arm's length bodies' (ALBs) to compare against. As a result, this report sets out the following:

1. NMC 2021 WRES data outcomes
2. NMC 2020 WRES data outcomes (for comparison)
3. ALBs 2019 data outcomes (in the absence of more recent data being provided to us).

Summary Table

| Indicator | Progress compared to 2020 | Comments |
|--|---------------------------|--|
| Overall survey responses | Improved | Up from 37.5% of employees in 2020 to 48.7% of employees in 2021. |
| Indicator 1: BME representation across the organisation | Worsened | Overall BME representation decreased by 1.5% in 2021. Now 39.3% compared to 40.8% in 2020. |
| Indicator 2: likelihood of BME candidates being appointed | Worsened | White candidates 1.25 times more likely to be appointed than BME candidates, compared to 1.04 times more likely in 2020. |
| Indicator 3: BME employees in disciplinary processes | Improved | BME staff 0.32 times more likely to enter formal disciplinary process, compared to 3.25 times more likely in 2020. |
| Indicator 4: employees accessing non-mandatory training | Improved | White staff 1.03 times more likely to access non-mandatory training than BME staff, compared to 1.04 times in 2020. |
| Indicator 5: employees experiencing external harassment, bullying or abuse | Worsened | 0% of both white and BME respondents said they'd experienced HBA in 2020, in 2021 this rose to 0.8% of white respondents, and 4% of BME respondents. |
| Indicator 6: employees experiencing internal harassment, bullying or abuse | Worsened | In 2020, 6.4% of white respondents and 6.9% of BME respondents said they had experienced discrimination. In 2021 this rose to 11.4% of white respondents and 14.4% of BME respondents. |
| Indicator 7: perceptions of equal opportunities for career progression | Improved | In 2020 just 5.2% of BME respondents agreed there are equal opportunities, in 2021 this rose to 35.3%. |
| Indicator 8: employees personally experiencing discrimination at work | Worsened | In 2020, 9.2% of BME respondents and 5.3% of white respondents said they had experienced discrimination, in 2021 this rose to 11.9% and 7.8% respectively. |
| Indicator 9: BME board membership | Improved | The percentage of BME board members has increased from 5% to 10.5% since our 2020 submission. |

A note on terminology

The terminology used throughout this document is 'Black and minority ethnic' (BME) which aligns with the terminology used by NHS WRES in its [reporting documents](#). Definitions of BME and white used in the WRES have followed the national reporting requirements of ethnic category in the NHS data model and are as used in NHS Digital data, and are based upon the ONS Census categories for data. More information can be found at Section 7 of the [WRES Technical Guidance](#).

WRES Data Indicators (1-4): 2021 Initial Findings

Indicator 1

WRES indicator 1 - Staff in each of the Agenda for Change (AfC) Bands 1-9 or Medical and Dental subgroups and Very Senior Manager (VSM) (including executive Board members) compared with the percentage of staff in the overall workforce.

- In 2021 the NMC's workforce is 39.3 percent BME. This is **19.6** percentage points higher than the NHS trust average and higher than all 9 arm's length bodies (ALB's) in 2019.
- The NMC's BME representation decreased by **1.5** percentage points in 2021. This is mainly caused by the decrease in the number of new starters declaring their ethnicity, with the number of 'unknown' increasing by 5 percent. The number of new starters not declaring their ethnicity data was 63 employees (32 percent) which is an increase of 43 from 2020 where only 20 employees (9.6 percent) had not declared this data.

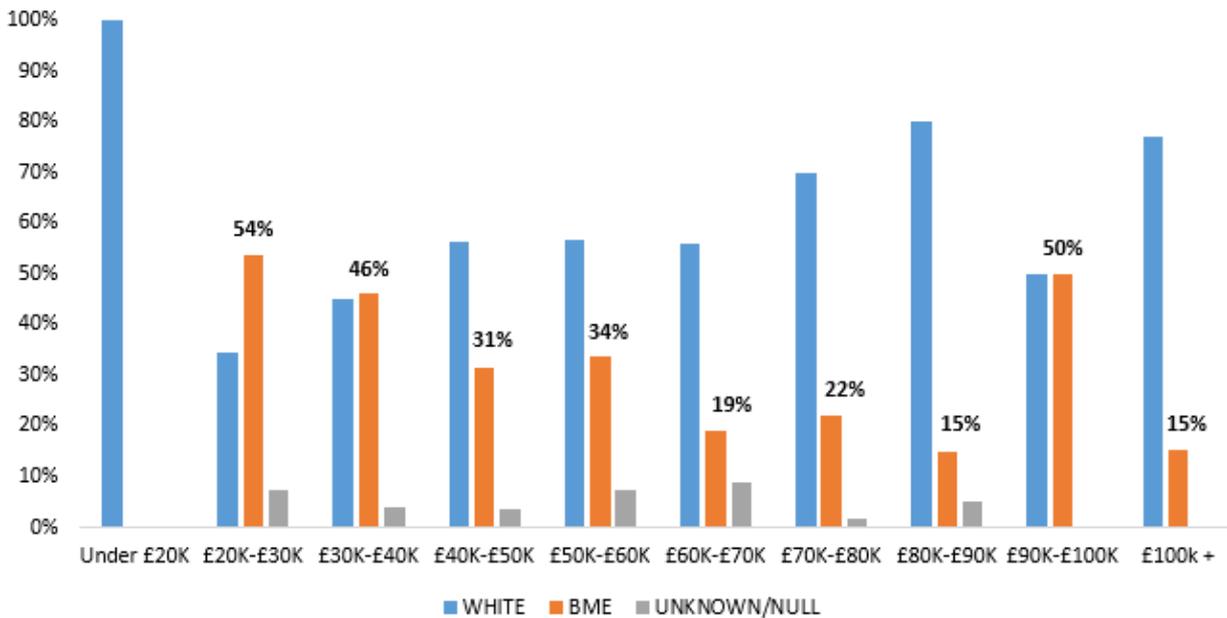
Below are the WRES survey results for the distribution of employees by ethnicity compared to the other ALB's in the 2019 survey.

| WRES 2019 | | | |
|---|---------|-------|-----------|
| Organisation | % White | % BME | % Unknown |
| Care Quality Commission | 78.5% | 12.5% | 9.0% |
| Health Education England | 71.5% | 15.7% | 12.8% |
| Health Research Authority | 76.5% | 17.9% | 5.6% |
| NHS Blood and Transplant | 81.2% | 14.3% | 4.5% |
| NHS Business Services Authority | 84.4% | 6.4% | 9.2% |
| NHS Digital | 76.2% | 12.8% | 11.0% |
| NHS England and NHS Improvement | 73.3% | 17.4% | 9.4% |
| National Institute for Health and Care Excellence | 79.5% | 12.6% | 7.9% |
| Public Health England | 66.5% | 19.9% | 13.5% |
| NHS trusts average | 75.6% | 19.7% | 4.7% |

| WRES Survey average | 76.3% | 14.9% | 8.8% |
|---------------------|-------|-------|-------|
| NMC 2020 | 53.0% | 40.8% | 6.2% |
| NMC 2021 | 49.5% | 39.3% | 11.2% |

NMC pay grades do not align with the NHS AfC grades. In 2020 it was agreed with WRES that we will submit our pay data in £10k salary intervals as the CQC and PHE do. Below is the current distribution of employee's salaries by grade:

NMC pay by Ethnicity 2021



Note the WRES survey defines employees paid over £100K as very senior managers (VSM).

- In 2021 the NMC has two BME employees at VSM level. This is an increase of two since 2020 survey where the NMC had no BME representation at VSM level.
- In 2019 six of the nine ALB's had no BME staff at VSM level.
- The only organisations with BME VSM's are NHS England and NHS Improvement, NHS Blood and Transplant and Care Quality Commission.

Indicator 2

WRES indicator 2 – Relative likelihood of white applicants being appointed from shortlisting compared to BME applicants

In 2020 WRES agreed that the NMC could calculate this measure using appointment data only rather than using application and appointment data, as our recruitment system was not routinely collecting this information. Since then, from August 2020 the NMC has collected all candidates ethnicity at application stage. For the first time in the 2021 WRES survey the NMC collected information about employees at the application stage of recruitment

Below is a table showing the likelihood of a white applicant being appointed in comparison to a BME applicant, and how we compare to the 2019 WRES ALBs submissions:

| Organisation | Likelihood |
|---|-------------|
| Care Quality Commission | 1.18 |
| Health Education England | 1.48 |
| Health Research Authority | 2.89 |
| NHS Blood and Transplant | 1.19 |
| NHS Business Services Authority | 0.97 |
| NHS Digital | 2.19 |
| NHS England and NHS Improvement | 1.97 |
| National Institute for Health and Care Excellence | 3.19 |
| Public Health England | 1.55 |
| NHS trusts average | 1.46 |
| WRES Survey average | 1.81 |
| NMC 2020 (Appointments) | 1.04 |
| NMC 2021 (Appointments) | 1.25 |
| NMC 2021 (Shortlisting to Appointment) | 1.62 |

- White employees are more likely to be appointed in 8 of the 9 ALB's. The NMC score is 0.19 below the average ALB score, but is still in favour of white applicants and appointments at 1.62. There has also been a slight increase when comparing 'like for like' against last year (appointments).
- WRES defines an acceptable score as the non-adverse range of 0.8 to 1.25 based on the four fifths rule which the NMC falls into. The four fifths rule can be defined as 'if the selection rate for a certain group is less than 80 percent of the

group with the highest selection rate, there is an adverse impact on that group’.
This means the current NMC score (1.62) would fall outside this range.

- 30% of the NMC appointments were BME candidates in 2020/2021. Similarly to Indicator 1, the number of new starters not declaring their ethnicity has influenced our 2021 data, with 32 percent of new starters not declaring their ethnicity.

Indicator 3

WRES indicator 3 – Relative likelihood of BME staff entering the formal disciplinary process compared to white staff

The NMC collects data on all formal disciplinary investigations processes.

The table below show the likelihood of an employee entering a formal disciplinary process by ethnicity compared to the 2019 ALB’s WRES data:

| Organisation | Likelihood |
|---|-------------|
| Care Quality Commission | 0.78 |
| Health Education England | 2.28 |
| Health Research Authority | 0.00 |
| NHS Blood and Transplant | 1.04 |
| NHS Business Services Authority | 1.23 |
| NHS Digital | 2.56 |
| NHS England and NHS Improvement | 0.86 |
| National Institute for Health and Care Excellence | 6.28 |
| Public Health England | - |
| NHS trusts average | 1.22 |
| WRES Survey average | 1.81 |
| NMC 2020 | 3.25 |
| NMC 2021 | 0.32 |

- In 2019/2020 BME employees were more likely to go through a formal disciplinary case. There were seven total cases in 2019/2020.
- This changed in 2021, where data shows that BME employees are less likely than white employees to go through a formal disciplinary. There were five formal cases in 2021.
- For five of the eight organisations, BME staff were relatively more likely to enter the formal disciplinary process compared to white staff.
- For both years the probability of any NMC employee entering a formal disciplinary case was less than 1.5%.

Indicator 4

WRES indicator 4 – Relative likelihood of staff accessing non-mandatory training and continuing professional development (CPD)

The NMC collects data for all employees undertaking training. However, there are limits to our training records as not all training in the NMC is recorded in a central location. The data below is therefore a record of training recorded on the HR system.

The table below shows the likelihood of white employees receiving non-mandatory training compared to BME employees, against ALBs 2019 WRES submissions:

| Organisation | Likelihood |
|---|-------------|
| Care Quality Commission | 1.09 |
| Health Education England | 1.55 |
| Health Research Authority | 0.95 |
| NHS Blood and Transplant | 1.09 |
| NHS Business Services Authority | - |
| NHS Digital | 0.88 |
| NHS England and NHS Improvement | 0.99 |
| National Institute for Health and Care Excellence | - |
| Public Health England | - |
| NHS trusts average | 1.15 |
| WRES Survey average | 1.10 |
| NMC 2020 | 1.04 |
| NMC 2021 | 1.03 |

- White employees are slightly more likely to receive non-mandatory training at the NMC, with a relative likelihood of 1.03 compared to a 2019 ALB's likelihood of 1.10. There is a very small reduction in the relative likelihood at NMC of 0.01, which is positive.
- Similar to recruitment data, WRES defines an acceptable score as the non-adverse range of 0.8 to 1.25 based on the four fifths rule which the NMC falls into. We are currently well within this range at 1.03, meaning there is no likely adverse impact on BME employees in this indicator.
- The percentage of all staff accessing non mandatory training currently stands at 39.8% down from 2019/2020. This comprises:
 - 42.1% of white employees
 - 40.7% of BME employees

- 26.4% of unknown ethnicity employees

WRES Survey Indicators (5-8): Initial Findings

Survey methodology and data collection

WRES survey questions

- For indicators 5-8 we have to collect our data by running the exact WRES Survey questions through Survey Monkey, communicated to all employees through a range of internal mechanisms including the CEO email newsletter and Workplace.
- In total 479 employees responded to the survey in 2021 which represents 48.7% of all employees
- This is up 11.2 percentage points from 2020 where 37.5% of all employees participated
- It should be noted that not all ALB's answer these questions.

Indicator 5

WRES indicator 5 – Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months

| Organisation | % White | % BME |
|---------------------|---------|-------|
| WRES Survey average | 0% | 0% |
| NMC 2020 | 0% | 0% |
| NMC 2021 | 0.8% | 4.0% |

- All ALB's report this a 0% in 2019/2020.
- Even though the NMC percentages are low BME employees are more likely to experience harassment, bullying or abuse from patients, relatives or the public. Four percent (BME colleagues) represents eight people, and 0.8% (white colleagues) represents two people.
- In the NMC case this would be from the public as we would not have role that are in regular contact with patients and relatives.

Indicator 6

WRES indicator 6 – Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months

The table below shows how employees in each organisation that participated in the WRES survey answered the question above in 2019:

| Organisation | % White | % BME |
|---|--------------|--------------|
| Care Quality Commission | 10.0% | 14.0% |
| Health Education England | 14.0% | 15.0% |
| NHS Blood and Transplant | 13.9% | 13.9% |
| National Institute for Health and Care Excellence | 5.8% | 10.0% |
| NHS trusts average | 24.2% | 29.0% |
| WRES Survey average | 13.6% | 16.4% |
| NMC 2020 | 6.4% | 6.9% |
| NMC 2021 | 11.5% | 14.4% |

- Like for Care Quality Commission, Health Education England, and the National Institute for Health and Care Excellence, the NMC has a higher percentage of BME staff reporting they have experienced harassment, bullying or abuse from staff in the last 12 months compared to white staff. The NMC levels are comparatively below the levels in NHS trusts.
- In 2021 the percentage of employees experiencing harassment, bullying or abuse from staff increased for both white and BME employees.
- Although not reported to NHS WRES, it should be noted that 35 respondents did not disclose their ethnicity when completing the WRES survey, and of those 35, 11 said that they had experienced harassment, bullying or abuse.

Indicator 7

WRES indicator 7 – Percentage of staff believing that their organisation provides equal opportunities for career progression or promotion

The table below shows how employees in each organisation answered the question above:

| Organisation | % White | % BME |
|-------------------------|---------|-------|
| Care Quality Commission | 55.0% | 44.0% |

| | | |
|----------------------------|--------------|--------------|
| Health Education England | 83.0% | 57.3% |
| NHS Blood and Transplant | 51.0% | 36.0% |
| NHS trusts average | 86.3% | 69.9% |
| WRES Survey average | 68.8% | 51.8% |
| NMC 2020 | 42.6% | 5.2% |
| NMC 2021 | 46.1% | 35.3% |

- In 2020 the NMC response for this indicator was extremely low, with just 5.2 percent of employees agreeing that we provide equal career progression and promotion opportunities. This has significantly jumped in 2021 to 35.3 percent, which represents a 30.1 percentage point increase. All ALB organisations in 2019 reported a lower percentage of BME staff who agree their organisation provides equal opportunities for career progression or promotion compared to white staff.

Indicator 8

WRES indicator 8 – In the last 12 months have you personally experienced discrimination at work from a manager / team leader or other colleague?

The table below shows how employees in each organisation answered the question above:

| Organisation | % White | % BME |
|---|-------------|--------------|
| Care Quality Commission | 4.0% | 44.0% |
| Health Education England | 4.8% | 57.3% |
| NHS Blood and Transplant | 7.3% | 36.0% |
| National Institute for Health and Care Excellence | 2.0% | 2.0% |
| NHS trusts average | 6.4% | 15.3% |
| WRES Survey average | 4.9% | 30.9% |
| NMC 2020 | 5.3% | 9.2% |
| NMC 2021 | 7.8% | 11.9% |

- In 2021, 11.9 percent of BME respondents agreed that they had personally experienced discrimination at NMC in the past 12 months. This represents a very small increase on 2020 of 2.7 percentage points. There was also a small increase of 2.5 percentage points in the proportion of white employees experiencing discrimination.
- The NMC has the second lowest score for BME employees experiencing discrimination out of all ALBs who responded to this indicator. Of the four ALBs who reported against this indicator, three reported significantly higher percentages of BME staff experiencing discrimination
- There was a small increase in employees experiencing discrimination at work for both white and BME employees in 2021.

Indicator 9

WRES indicator 9 – Percentage difference between the organisations’ board membership and its overall workforce

The table below shows how we compare to ALB organisations’ board membership by ethnicity in 2019.

| Organisation | White | BME | Unknown |
|---|--------------|--------------|--------------|
| Care Quality Commission | 81.3% | 6.3% | 12.5% |
| Health Education England | 94.1% | 5.9% | 0% |
| Health Research Authority | 40.0% | 0% | 60.0% |
| NHS Blood and Transplant | 80.0% | 5.0% | 15.0% |
| NHS Business Services Authority | 80.0% | 0% | 20.0% |
| NHS Digital | 40.0% | 13.3% | 46.7% |
| NHS England and NHS Improvement | 86.4% | 13.6% | 0% |
| National Institute for Health and Care Excellence | 33.3% | 0% | 66.7% |
| Public Health England | 78.6% | 21.4% | 0% |
| NHS trusts average | 86.6% | 8.4% | 5.0% |
| WRES Survey average | 70.0% | 7.4% | 22.6% |
| NMC 2020 | 95.0% | 5.0% | 0% |
| NMC 2021 | 89.5% | 10.5% | 0% |

- The NMC has low BME representation at board member level, with BME colleagues representing 10.5 percent of our Board membership. The percentage difference between our BME Board membership and our overall workforce is 28.7%.
- There was a 5.5 percentage point increase in BME board representation in 2021, which is now higher than the WRES ALBs average of 7.4 percent.

Conclusion

The purpose of this report is to set out the initial findings of WRES data collection. It was to be presented to the WRES Working Group and then to the Executive Board and wider workforce. Unfortunately we had not yet received the 2020 Arm's Length Bodies report from NHS WRES which restricts our ability to externally benchmark our data, although we are able to compare directly to last year's NMC submission data. Initial analysis demonstrates that, compared to our 2020 submission, we have improved against the following indicators in 2021:

- Overall WRES survey responses by employees;
- Indicator 3 – Relative likelihood of BME staff entering the formal disciplinary process compared to white staff;
- Indicator 4 – Relative likelihood of staff accessing non-mandatory training and continuing professional development (CPD);
- Indicator 7 – Percentage of staff believing that their organisation provides equal opportunities for career progression or promotion;
- Indicator 9 – Percentage difference between the organisations' board membership and its overall workforce.

Against all other indicators our data shows a lack of progress compared to 2020.

This will therefore be the area of focus for our 2021/22 Race Equality Action Plan and we will look to develop specific and measurable actions to improve the experiences and perceptions of our BME employees. We will monitor our progress against this regularly.