



**Surrey Heartlands**  
Clinical Commissioning Group

**Surrey Heartlands Clinical Commissioning Group**  
**Workforce Race Equality Standard (WRES)**  
**2020-2021 Report**

## 1. Introduction

The NHS Workforce Race Equality Standard (WRES) has been in place since April 2015 and NHS providers<sup>1</sup> have been producing and publishing their WRES data on an annual basis.

The NHS constitution established principles and values that recognised the rights in which communities, the people it serves, and its workforce were entitled to across England, it established its commitment to operate a fair and effective delivery of care and service.

The WRES report is now an annual requirement for all employers with over 250 staff and reports on nine key indicators, which include access to career progression opportunities and receipt of fair treatment at work for staff from a Black, Asian and Minority Ethnic (BAME) background.

This is the second year the CCG has formed its own report.

The main purpose of the WRES is:

- to help local, and national, NHS organisations including organisations providing NHS Services to review their data against the nine WRES indicators,
- to produce action plans to close the identified likelihoods based on the data and experience between white and BAME colleagues,
- to improve BAME representation at the senior and Board level within the organisation.

There are nine WRES indicators that will identify the differences between BAME and White Staff these are set out within this report. Of the nine indicators:

- four of the indicators focus on workforce data,
- four are based on data from the national NHS Staff Survey questions,
- one indicator focuses upon BAME representation on boards

WRES directly supports the Equality Delivery System (EDS2) and, in particular, goals three and four: representative workforce and inclusive leadership including the Board, and indirectly supports EDS2 goals one and two: better health outcomes and improved patient access and experience.

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<sup>1</sup> providers of non-primary healthcare services operating under the full-length version of the NHS Standard Contract, and so is applicable to NHS providers, independent sector providers, and voluntary sector providers - [WRES \(england.nhs.uk\)](https://www.england.nhs.uk/wres/)

## 2. WRES and Surrey Heartlands CCG

Surrey Heartlands CCG WRES forms an important and integral part of our local People Plan, committing to tackling inequality for our BAME workforce is vital to ensuring that the CCG supports, nurtures and develops its people and enables them to be the best they can be in a safe and inclusive environment, have a sense of belonging and feeling valued.

The CCG has two roles in relation to the WRES – as commissioners of NHS services and as employers. In both roles, work is shaped by key statutory requirements and policy drivers such as but not limited to:

- The NHS Constitution
- The Equality Act
- The Public Sector Equality Duty
- Equality Delivery System (EDS2)
- The NHS Oversight Framework (formerly CCG Improvement and Assessment Framework)

NHS CCGs workforce are small-scale in comparison to NHS Trusts and therefore, consideration should be given to how percentages can substantially change when working with relatively small staff numbers.

Surrey Heartlands CCG reporting information and data has been collated from our staff Electronic Staff Records (ESR), NHS Jobs and HR internal data sets. As the merger of the four CCGs only took place in 2020/21, data consistency and quality are difficult to assure and so this report should only be read as broadly indicative.

This is the second Surrey Heartlands CCG WRES Report, therefore only contains two years of data for comparison which may not show any significant changes.

Indicator 1 - Percentage of staff in each of the AfC Bands 1-9 and VSM (including executive Board members) compared with the percentage of staff in the overall workforce

Workforce WRES Data <sup>2</sup>				
	2019/2020		2020/2021	
	Workforce	%	Workforce	%
Total Staff	577		584	
White Staff	446	77.3%	449	76.9%
BAME Staff	78	13.5%	80	13.5%
Ethnicity unknown	53	9.2%	55	9.4%

The table above highlights the total workforce broken down by ethnicity.

Ethnicity unknown includes prefer not to say, null, not stated and not given. Due to the relatively small workforce at the CCG, it is desirable to keep this number to a minimum to prevent skewing.

At 13.5%, the proportion of BAME staff is broadly static compared to last year and lower than the proportion of BAME staff across the whole ICS (which is 22%) and the population of the county (which is 17%).

The table below combines the workforce data for non-clinical, clinical and medical/dentistry, which gives the overall data picture with percentage representation.

<sup>2</sup> Data Source: Business Intelligence ESR

**Non-Clinical & Clinical combined workforce by banding comparison 2020 vs 2021**

Non-Clinical & Clinical combined	2019/2020						2020/2021					
	White	%	BAME	%	Ethnicity Unknown	%	White	%	BAME	%	Ethnicity Unknown	%
Band 3	13	2.3%	1	0.2%	4	0.7%	14	2.4%	2	0.3%	6	1.0%
Band 4	38	6.6%	4	0.7%	2	0.3%	42	7.2%	4	0.7%	3	0.5%
Band 5	32	5.5%	6	1.0%	0	0.0%	28	4.8%	6	1.0%	1	0.2%
Band 6	62	10.7%	12	2.1%	3	0.5%	55	9.4%	17	2.9%	3	0.5%
Band 7	68	11.8%	11	1.9%	9	1.6%	77	13.2%	8	1.4%	9	1.5%
Band 8A	70	12.1%	18	3.1%	5	0.9%	66	11.3%	17	2.9%	7	1.2%
Band 8B	37	6.4%	5	0.9%	3	0.5%	44	7.5%	7	1.2%	5	0.9%
Band 8C	32	5.5%	3	0.5%	4	0.7%	34	5.8%	5	0.9%	3	0.5%
Band 8D	23	4.0%	1	0.2%	0	0.0%	22	3.8%	1	0.2%	1	0.2%
Band 9	18	3.1%	4	0.7%	5	0.9%	15	2.6%	0	0.0%	2	0.3%
VSM	20	3.5%	4	0.7%	2	0.3%	7	1.2%	1	0.0%	1	0.0%
Consultants	0	0.0%	0	0.0%	0	0.0%	3	0.5%	0	0.0%	2	0.3%
Senior medical manager	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Non-consultant career grade	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Trainee grades	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Other	33	5.7%	9	1.6%	16	2.8%	42	7.2%	12	2.1%	12	2.1%
<b>Total</b>	<b>446</b>	<b>77.3%</b>	<b>78</b>	<b>13.5%</b>	<b>53</b>	<b>9.2%</b>	<b>449</b>	<b>76.9%</b>	<b>80</b>	<b>13.5%</b>	<b>55</b>	<b>9.2%</b>

The Non-Clinical workforce data shows that BAME staff are underrepresented in the lower band 3 and 4 and in the higher bands 8b, 8c, 8d 9 and VSM level in 2019/2020.

Although there is a slight increase in 2020/2021 for BAME representation in bands 8b and 8c, there is less representation in band 8d, 9 and VSM.

It is important to note within the senior cohort of bands 8a and above, this shows that of 190 staff in senior roles, only 17 are confirmed to be of a BAME (just under 9%).

(For noting purposes only, we see White staff at VSM shows a 4% decline. However this is due to data for 2019/2020 showing staff in the incorrect banding on ESR due to the restructure of the CCG merger. This has now been rectified and the data shows the number of staff in the correct banding for this year).

The Clinical workforce data shows that BAME staff are more representative in the higher bands. Here, there are 14 confirmed BAME staff from a total senior cohort of 48 (29%) but with no confirmed representation at 8d, 9 or VSM.

At the CCG, clinical staff reside largely in Medicines Management (Pharmacists) and the Continuing Health Care team.

Indicator 2 - Relative likelihood of white staff being appointed from shortlisting across all posts compared to BAME staff

	2019/2020		2020/2021 <sup>3</sup>	
	Shortlisted	Appointed	Shortlisted	Appointed
White	411	83	274	63
BAME	216	32	88	9
Ratio*	1.36		2.25	

\*A completely equal likelihood would be 1.00

During 2020/21, recruitment activity will have been affected by the pandemic and the data suggests it reduced compared to 2019/20. It also shows that applicants from a white background were more likely to be appointed after shortlisting than applicants from a BAME background and that this difference deteriorated.

Recruitment practices were agreed as a priority by the Surrey Heartlands People Board in 2021/22. As part of the actions taken, Inclusion Ambassadors have now been trained in recruitment and selection and sit on interview panels as an interviewer as part of the decision-making process. This has been implemented with all recruitment for band 8a and above, including Executive roles.

There is evidence of positive changes from other Trusts and Local Authorities that have implemented diverse interview panels but that this takes time.

The CCG has also committed to a wider recruitment process overhaul to address recruitment inequalities for BAME people, and the actions have been developed in collaboration with HR, EDI, WRES Experts and the BAME Forum to form part of the WRES action plan.

As part of the review, the following priorities have been identified:

- A review of Job adverts and criteria for specific job roles
- Review of job descriptions and person specification – such as justification of length of experience and/or qualifications.
- Diverse shortlisting and interview panels for roles Bands 8a and above
- Neutral second person for Shortlisting
- Where a BAME person has not been successful, the recruitment panel to justify why

This process improvements will be shaped and implemented over the coming year.

This indicator is linked to EDS2, Section 3: A representative and supported workforce:  
 3.1 Fair NHS recruitment and selection process lead to a more representative workforce at all levels

<sup>3</sup> Data source: NHS Jobs

Indicator 3 - Relative likelihood of BAME staff entering formal disciplinary process compared to White staff

	2019/2020		2020/2021 <sup>4</sup>	
	Headcount	Disciplinary	Headcount	Disciplinary
White	444	0	453	2
BAME	75	1	82	0
Unknown	52	0	77	0
Ratio	0		0	

The CCG uses an in-house tracker for case management, which reports there were only 2 cases in this period.

In accordance with the Longbow review, CCG has revised the Disciplinary Policy and has included a pause and reflect checklist for line managers to use prior to proceeding with the formal process. This has meant that the CCG has shifted to better staff engagement from the outset and as far as possible to seek informal resolution.

A series of questions are asked to help clarify whether the issue is of wider significance and whether singling out the employee may be unfair. This is completed by commissioning manager and signed off by the Inclusion Ambassador, Head of HR and HR Advisors before any investigation takes place. A Case Plan is also developed after any decision to investigate.

Priorities going forward have been identified as below:

- Improvement in data capture to ensure accurate recording of ethnicity in disciplinary cases
- Implementation of the pause and review checklist to ensure decisions to progress to the formal stage are robust
- Inclusion Ambassadors are trained in the Disciplinary and Investigations training
- The HR, L&D and EDI Lead to develop training material and guidance on a Just and Learning culture.

<sup>4</sup> Data source: POD in-house tracker



Indicator 4 - Relative likelihood of White staff accessing non-mandatory training and CPD compared to BAME staff

	2019/2020		2020/2021 <sup>5</sup>	
	Workforce	Training/CPD	Workforce	Training/CPD
White	444	235	445	142
BAME	75	26	71	30
Unknown	52	0	54	26
Ratio	1.36		0.76	

The relative likelihood of white staff accessing non-mandatory/CPD training is **0.76** a decrease of 0.6 from 2019/2020. A figure of “1” or below “1” would indicate that BAME staff members are likely to access non-mandatory training and CPD at the same rate as White staff.

This indicator is widely acknowledged as difficult to accurately calculate. It is essential that CCG improves the process of capturing staff that have been denied access to non-mandatory training/CPD. This should be done as a comparison exercise including funded and non-funded training. The data captured can then also be measured against career progression post training to identify whether staff are benefitting from the training to progress their careers within the CCG.

Managers/Supervisors/Team Leaders currently use Appraisals and review meetings to review training opportunities with staff and the priority is to ensure that BAME staff access training opportunities at the same rate as white staff; particularly when developing staff to progress their careers into senior roles.

This indicator is linked to EDS2, Section 3: A representative and supported workforce:  
**3.3 Training and development opportunities are taken up and positively evaluated by all staff**

<sup>5</sup> Data source: POD in-house L&D report

Indicator 5 - Percentage of BAME staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months

	2020/2021 <sup>6</sup>
	<b>Surrey Heartlands CCG</b>
White	12.50%
BAME	10%

This indicator is likely only to relate to patient facing roles. CCG white staff are experiencing a slightly higher level of harassment, bullying or abuse from patients, relative or the public. This is the first year CCG has conducted the staff survey therefore there is no comparison data. From the staff survey, the data shows that the number of responses for this indicator was as follows:

- White Staff: Responses 272
- BAME Staff: Responses 40

Regardless of the low response compared to overall workforce, the CCG takes such abuse seriously and the following priorities have been identified with colleagues:

- Conduct a root cause analysis exercise on areas where harassment, bullying and abuse are high and include response to incident by managers.
- Implement safe spaces for staff to talk about incidents
- Identify, agree and implement sanctions for repeat offenders of harassment, bullying and abuse with the relevant services

**This indicator is linked to EDS2, Section 3: A representative and supported workforce:**

**3.4 When at work, staff are free from abuse, harassment, bullying and violence from any source**

<sup>6</sup> Indicators 5, 6, 7, 8 data sources: CCG staff survey 2020

Indicator 6 - Percentage of BAME staff experiencing harassment, bullying or abuse from staff in last 12 months

	<b>2020/2021</b>
	<b>Surrey Heartlands CCG</b>
White	25.30%
BAME	<b>30%</b>

Regardless of ethnicity, it is saddening to see high levels of reported bullying or abuse from our staff.

BAME staff are experiencing a 5% higher level of harassment, bullying or abuse. This is the first year CCG has conducted the staff survey therefore there is no comparison of data, other than a national picture, where the CCG is shown as below average.

The CCG's Culture Review, which was conducted in July 2020, reflects this indicator. The culture of the organisation is described in the culture review report and acknowledges that BAME staff are disproportionately affected as they are more likely to experience racial microaggressions in the workplace.

The CCG has a proactive BAME forum that meets every month and provides a safe space for BAME staff to share their experiences in the workplace. The racial trauma experienced by many BAME staff has been discussed at the BAME forum and needs to be continuously addressed to ensure the health and wellbeing of BAME staff.

The priorities identified are covered under Indicator 8, below

This indicator is linked to EDS2, Section 3: A representative and supported workforce:

3.4 When at work, staff are free from abuse, harassment, bullying and violence from any source

Indicator 7 - Percentage of BAME staff believing that the CCG provides equal opportunities for career progression or promotion

	<b>2020/2021</b>
	<b>Surrey Heartlands CCG</b>
White	84.60%
BAME	<b>61.90%</b>

This shows that fewer BAME staff believe that CCG provides equal opportunities for career progression or promotion.

When looking at the actual number of responses for this question, only 21 responses came from BAME staff and 182 from White staff and therefore the data maybe distorted. The culture review picked up on progression and promotion, linking it potentially to favouritism and even skin colour.

The following priorities have been identified to increase BAME staff trust in the CCG when it comes to their progress or promotion.

- Recruitment review and process changes as described above
- A deep dive into internal promotions and career progressions by ethnicity
- The development of a mentoring and coaching programme for BAME staff (resourcing dependent)
- Participation in the development of the SE Region Leadership and Talent Alliance

This indicator is linked to EDS2, Section 3: A representative and supported workforce:

**3.3 Training and development opportunities are taken up and positively evaluated by all staff**

Indicator 8 - Percentage of BAME staff personally experiencing discrimination at work from a manager/team leader or other colleagues

	2020/2021
	<b>Surrey Heartlands CCG</b>
White	9%
BAME	<b>18%</b>

The staff survey data shows BAME staff are twice as likely to experience discrimination at work than white staff. The number of responses for this indicator on the staff survey is:

- White staff: Responses 285
- BAME staff: Responses 41

Again, only national data is available for comparison, where we see the CCG marginally below average in the area of diversity and inclusion as a whole.

The culture review corroborates BAME staff experience within the CCG and a culture review steering group was assembled to work on the 21 recommendations from the review. This has now been completed and plans are in place to engage with the wider workforce to develop the culture going forward.

The key priorities going forward are as follows:

- Report and close Phase 1 of the culture review, with independent review by Longbow Associates.
- Working with staff to build actions beyond the culture review: using the cultural web and other tools to understand culture and lived experience from the perspective of BAME staff to shape the most effective proposals and actions together
- Widen access to FTSU for BAME staff in particular, adopting a more sustainable model, most likely with an external provider
- To encourage BAME colleagues to become FTSU Ambassadors to ensure there is sufficient representation across the CCG and support staff at all band levels
- Develop a proposal on cultural intelligence development with Frimley CCG and the SE Leadership Academy
- A roll out of training related to race and racism for staff and managers to understand the role racism plays in the workplace including impact on staff health and wellbeing.
- Conduct an exercise around staff exiting the organisation, to capture real reasons for leaving.
- Embed just and learning culture approach via the new policy framework recently agreed.
- Ensuring accountability for acts of discrimination relating to race and ethnicity.

This indicator is linked to EDS2, Section 3: A representative and supported workforce:

3.4 When at work, staff are free from abuse, harassment, bullying and violence from any source

Indicator 9 - Percentage difference between the organisations' Board membership and its overall workforce

	2019/2020			2020/2021 <sup>7</sup>		
	White	BAME	Unknown	White	BAME	Unknown
No of staff in workforce	444	75	52	445	80	55
No of Board Members	25	6	5	15	2	10
Total Board Members - % by Ethnicity	69.4%	17.9%	14.3%	55.6%	7.4%	37%
Overall Workforce - % by Ethnicity	77.3%	13.5%	9.2%	76.9%	13.7%	9.4%
Difference (Total Board – Overall Workforce)	-7.9%	3.1%	4.7%	-21.3%	-6.8%	27.6%

**The definition of Board membership is as follows:**

Board membership in the context of this indicator includes all members of the Governing Board irrespective of whether they are executive or non-executive members and whether they are voting or non-voting members of the Board.

The Surrey Heartlands People Plan has committed to increase BAME board and senior staffing to 20% by 2025 as a system, which includes the CCG.

In this period, the CCG will likely be replaced by the NHS Integrated Care Board. This provides an opportunity to achieve a more representative leadership. The accurate capture of ethnicity will also be vital to prevent skewing.

This indicator is linked to EDS2, Section 3: A representative and supported workforce:

3.1 Fair NHS recruitment and selection processes lead to a more representative workforce at all levels

<sup>7</sup> Data source: ESR and verified by Corporate Governance Team

## 2.1 Appendix 1 - Leavers - 1/04/2020 - 31/03/2021

Band	White	BAME	Unknown
2	0	0	1
3	0	0	0
4	5	0	0
5	2	1	0
6	5	1	0
7	6	2	0
8a	11	8	2
8b	2	0	1
8c	2	0	1
8d	0	0	0
9	2	1	0
VSM	4	0	0
Ad-hoc	4	2	4
<b>Total</b>	<b>43</b>	<b>15</b>	<b>9</b>
	<b>2.18</b>		

In 2020/2021 67 members of staff left the organisation, BAME staff left at a 2.18 rate compared to white staff.

For the total number of leavers (67) **22%** who left are from a BAME background, given the % of BAME representation in the workforce **13.7%** this is a disproportionate number of leavers. Whereas the percentage of white staff who have left is 64% however this is not disproportionate in comparison as white staff represent 76.9% of the workforce.

Despite the increase of BAME staff recruited, over the last year BAME staff have left Surrey Heartlands CCG at twice the rate of white staff. A priority identified is to draft a BAME leavers report to capture the reasons BAME staff are leaving the CCG, the data and lived experience captured will be anonymised. The report will support the data of the rate of leavers and will link to how the CCG retains BAME staff.



### 3. Action Plan

Planned actions for 2021/2022 drawn up in conjunction with our BAME Forum members and WRES Expert, include:

Surrey Heartlands CCG Objective	Action & Priorities	Measured By	Lead	Timeline
<p>To have a diverse workforce that is reflective of the local population and the NHS workforce in Surrey Heartlands. With representation with people from a BAME background at every level.</p> <p>NHS England have an internal target of 20% BAME representation at every level. The BAME representation in NHS workforce in Surrey is 30%. Objective for Surrey Heartlands should be to have at least 20% BAME representation at Board and Senior levels by 2025 as referenced in SH People Plan</p>	<p>A review of Job adverts and criteria for specific job roles</p> <p>Review of job descriptions and person specification – such as justification of length of experience and/or qualifications.</p>	Annual WRES data and applicants received	HR	Dec 2022
	<p>Social media strategy being developed to ensure advertising reaches specific communities</p>		HR	Oct-21
	<p>Improve completion of ESR data to have a complete picture of staff ethnicity.</p> <p>Form to submit ethnicity data to be included in the e brief.</p>	<p>Increase in completed ESR data and reduction in ethnicity unknown/not declared</p>	HR	Nov-21
	<p>Job adverts screened by HR to ensure they are fair and will not disadvantage people applying</p>	<p>HR team are screen job adverts and descriptions to ensure they are appropriate.</p>	HR	Ongoing

<p>Reduce relative likelihood of BAME applicants being appointed from shortlisting to 1:1</p> <p>Increase BAME representation at all staff levels with particular focus on senior roles</p>	<p>Roll out values-based recruitment practice guidance pack for line managers</p> <p>Neutral second person for Shortlisting</p> <p>Where a BAME person has not been successful, the recruitment panel to justify why</p>	<p>Percentage of accessing VBR training and resourcing pack.</p>	<p>HR</p>	<p>Sep-21</p>
	<p>Inclusion ambassador programme starting. 15-20 inclusion ambassadors being trained to assist with recruitment and part of interview panels.</p>	<p>Number of inclusion ambassadors in place and number of interviews they are in attendance for</p>	<p>HR/EDI Lead</p>	<p>Dec-21</p>
<p>All interview panels should be diverse.</p>	<p>Diverse shortlisting and interview panels for roles Bands 8a and above</p> <p>This is a particular importance for roles that are band 8a and above where BAME staff are underrepresented.</p> <p>All interview panels 8a and above should have inclusion ambassador</p>	<p>6 monthly review of shortlisting, BAME/White appointment ratio and exception reports</p>	<p>All/Policy</p>	<p>Sep-21</p>
<p>To ensure BAME staff are not disproportionately entering a disciplinary process or experiencing discrimination</p>	<p>Improvement in data capture to ensure accurate recording of ethnicity in disciplinary cases</p> <p>Implementation of the pause and review checklist to ensure decisions to progress to the formal stage are robust</p>	<p>To be tested at regular intervals via the "Temperature Check" and cut by protected characteristics</p>	<p>HR/L&amp;D/EDI Communications</p>	<p>Ongoing</p>

	<p>Inclusion Ambassadors are trained in the Disciplinary and Investigations training</p> <p>The HR, L&amp;D and EDI Lead to develop training material and guidance on a Just and Learning culture.</p> <p>Promote a positive, compassionate and inclusive environment for all staff working in Surrey Heartlands CCG.</p>			
	<p>Anti-racism training is provided to all staff.</p>		EDI/HR	Jan 22

<p>Reducing staff experience harassment, bullying or abuse</p>	<p>Report and close Phase 1 of the culture review, with independent review by Longbow Associates.</p> <p>Working with staff to build actions beyond the culture review: using the cultural web and other tools to understand culture and lived experience from the perspective of BAME staff to shape the most effective proposals and actions together</p>	<p>Datix reports Staff sickness Staff retention</p>	<p>CR SRO/Lead</p>	<p>Sept 21</p>
	<p>Widen access to FTSU for BAME staff in particular, adopting a more sustainable model, most likely with an external provider</p> <p>To encourage BAME colleagues to become FTSU Ambassadors to</p>		<p>EDI/BAME Forum</p>	<p>Nov 21</p>
			<p>EDI BAME Forum</p>	<p>March 22</p>

	<p>ensure there is sufficient representation across the CCG and support staff at all band levels</p> <p>Conduct an exercise around staff exiting the organisation, to capture real reasons for leaving.</p> <p>Embed just and learning culture approach via the new policy framework recently agreed.</p> <p>Ensuring accountability for acts of discrimination relating to race and ethnicity.</p>			
	<p>Develop a proposal on cultural intelligence development with Frimley CCG and the SE Leadership Academy</p> <p>A roll out of training related to race and racism for staff and managers to understand the role racism plays in the workplace including impact on staff health and wellbeing.</p>		EDI	Jan 22
	<p>Conduct a root cause analysis exercise on areas where harassment, bullying and abuse are high and include response to incident by managers.</p> <p>Implement safe spaces for staff to talk about incidents</p>		HR/EDI	March 22

	Identify, agree and implement sanctions for repeat offenders of harassment, bullying and abuse with the relevant services			
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Increase the proportion of BAME staff believing in equality of opportunity	Updated Equality, Diversity and Inclusion training is provided on a yearly basis		OD	Oct-21
	Ensure internal roles, secondments, non-mandatory training and CPD opportunities are communicated to BAME Network	Number of Expression of Interest, applications and appointments. Non-mandatory training and CPD measured by WRES indicator 4	HR/OD	Sep-21
	Continue to grow and develop the BAME forum	Network established; regular meetings continue. Forum consulted on organisational and staff changes/restructures	BAME network Chair	Ongoing