



Report to:	People	People & Culture Committee				
Date of meeting:	08 Nove	08 November 2018				
Report title:	Workfor	Workforce Race Equality Standard Action Plan (WRES)				
Agenda item:	09	09				
Report Author(s):	Melissa	Berry, Diversity Consultant				
Presented by:	Melissa	Berry, Diversity Consultant				
Status:		Assurance Discussion				
		Decision 🛛 Information				
Background / Purpose:						

The Trust's Workforce Race Equality Standard Action plan for September 2018 to August 2019.

Recommendation(s):

The Committee are requested to review and discuss the content of this report

Links to Board Assurance Framework (BAF) and key risks:

N/A

Please indicate which Board Assurance Framework (BAF) risk it relates to:				
Clinical and Quality	\square			
Performance				
Financial				
Workforce	\square			
Governance and Well-led	\square			
Reputation	\square			
Other				
This report supports the achievement of the following	Business Plan Workstreams:			
Ensure safe, timely and effective care	\square			
Ensuring staff are valued, respected and engaged	\square			
Partners are supported to deliver change in London	\square			
Efficiency and sustainability will drive us				





OUR PLAN OF ACTION

Foreword by the Chief Executive

- 1. London Ambulance Service serves a diverse population across Greater London. Increasing the number of Black and Minority Ethnic staff that we employ is an organisational priority, and also reflects my strong personal commitment to ensuring that our service reflects the communities of London.
- 2. Given my commitment to achieving a step change in our approach, I will provide leadership on the work to deliver Race Equality in employment and service delivery. I will chair quarterly meetings to drive and monitor progress on our Workforce Race Equality Standard action plan.
- 3. The London Ambulance Service Action Plan is centred on three key themes. Our first theme is recruitment and development. Our second theme is workplace experience. Finally, our third theme is senior Trust leadership. These three areas were identified by staff across the Trust during a collaborative workshop including participants from both the Black and Minority Ethnic Network, and the Lesbian, Bisexual, Gay and Trans Network, together with Senior Leaders.
- 4. Each theme is supported by specific targets and initiatives that aim to ensure that our workforce reflects the population of London, and also create an inclusive culture in which everyone has a voice and an equal chance of success.
- 5. Our re-energised Diversity and Inclusion Committee will work within the framework of London Ambulance Service's Vision, Purpose, Values and Behaviours.
- 6. I am delighted that we will build on the efforts of staff who have contributed to our work to date, and also continue to progress a number of new, key initiatives.



Background

- 7. In July 2016 the London Ambulance Service commenced its journey towards having an inclusive and racially diverse workforce which is representative of the local populations the Trust serves. The starting point for this journey was to obtain a baseline understanding of the position of the Trust against the 9 Workforce Race Equality Standard (WRES) indicators. For each indicator data must be compared between non-BME and BME staff.
- 8. The baseline position revealed the Trust had a prolonged historical trend of its workforce under representing the Black and Minority Ethnic (BME) population which it serves, with the senior management team also under representing the BME workforce. In 2016, only 11% of the London Ambulance workforce was from a BME background; this is in stark contrast to the London picture where 41% of NHS staff in London are from BME backgrounds, and 45% of the London-wide population from BME backgrounds.
- 9. The London Ambulance Service is committed to working from a position of transparency, accepting that the current position for BME staff is a challenge which requires significant improvement in order to achieve better outcomes for BME staff and the communities we work with. We are committed to working with all staff, including BME staff groups, local unions and other organised staff groups in achieving improvements.
- 10. Over the 2 years the London Ambulance has focused its efforts to be more racially diverse and inclusive, the Trust has seen a 2.5% increase in its BME workforce, which is now at 13.5% (as at July 2018). There is still more the Trust can do to have a more diverse workforce and we have set ourselves bold targets of 15% BME staff representation by the end of March 2019 and 20% by 2020.

Background to WRES

- 11. The Workforce Race Equity Standard (WRES) was mandated through the NHS standard contract, starting in 2015 / 16. It was implemented to ensure employees from black and minority ethnic (BME) backgrounds have equal access to career opportunities and receive fair treatment in the workplace.
- 12. This is important because studies show that a motivated, included and valued workforce helps deliver high quality patient care, increased patient satisfaction and better patient safety.
- 13. It is national policy that NHS Trust Boards should be as representative as possible of the communities they serve and that this is likely to benefit the planning and provision of services (NHS Leadership Academy 2013). There is evidence (Salway et al 2013) that when Trusts commission services they often fail to cater for the most deprived communities including black and minority ethnic (BME) populations. One of the strategies that Trusts can use to mitigate this is to ensure that decision-makers are drawn from a diverse pool.



The next phase "The Big Conversation"

- 14. The next phase of the WRES for London Ambulance will focus on enabling people to work comfortably with race equality. Through communication and engagement, embedding unconscious bias training to help staff move to conscious action by taking personal responsibility and, delivering cultural awareness training we will work to change cultures of race inequality and focus on supporting our people to learn more about the importance of equity, building capacity and capability to work with race. Every employee in the organisation will feel empowered to take action and own the actions set out in our WRES plan.
- 15. We will also ensure embedding of accountability as teams are reorganised and roles are updated to reflect new responsibilities and ensuring key policies and practices have race equality built into their core.

Design of Action plan

16. For the WRES Action Plan October 2018 we have used co-production methodology which challenges the traditional approach of action plans. This plan was developed with all staff groups including BME colleagues and staff from the senior management group and was led by our Chief Executive. The approach is values driven and built on the principle that it will be owned across the organisation.





Progress against WRES Indicators 2015 to 2018

WRES Indicat	ors:	2015 / 2016	2016 / 2017	2017/ 2018	
	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.	BME: 11%	BME 12%	BME 13.5%	1
	Indicator 2: Relative likelihood of staff being appointed from short listing across all posts.	No data	1.7 times more likely to be appointed if white than BME	2 times more likely to be appointed if white than BME	₽
	Indicator 3: Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation.	3 times more likely to enter the formal disciplinary process	2.7 times more likely to enter the formal disciplinary process	2 times more likely to enter the formal disciplinary process	1
	Indicator 4: Relative likelihood of staff accessing non-mandatory training and CPD.	No data	No data	No data	-
National staff survey	Indicator 5: Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months.	White: 56% BME: 35%	White:56% BME: 34%	White: 57% BME:39%	
indicators	Indicator 6: Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months.	White 38% BME 40%	White: 32% BME: 32%	White: 31% BME: 38%	↓
	Indicator 7: Percentage of staff believing that the Trust provides equal opportunities for career progressing and promotion.	White: 62% BME: 47%	White: 74% BME: 57%	White: 63% BME: 42%	↓
	Indicator 8: In the last 12 months have you personally experienced discrimination at work from any of the following? - Manager / Team Leader or other colleagues.	White: 13% BME: 25%	White: 9% BME: 18%	White: 11% BME: 19%	₽
Board representati on indicator	Indicator 9: Percentage difference between the Organisations Board voting membership and its overall workforce. NB. Only voting members of the	-11.9%	-12.7%	-13.5%	-
	Board should be included when considering this indicator.				



Action Plan

Each of the actions in this plan will make a significant difference to improving the BME experience and representation within the London Ambulance Service

OUR PLAN OF ACTION (3 Key Themes)

THEME 1	Achieve representation of BME staff
Recruitment & Development	
	15% by March 2019
We will.	17.5 by March 2020
	20% by March 2021
THEME 2	Use data to analyse the BME experience at London Ambulance and
	set challenging objectives for our managers to tackle inequality
Workplace Experience	
	Launch a one year programme in 2018 to pilot Sponsorship Mentoring
We will.	to support the progression of our talented BME employees and provide
	role models for others to follow
THEME 3	Develop and deliver extensive unconscious bias and cultural
	awareness programmes delivered across the employee journey over
Senior Trust Leadership	3 years
We will.	Set up a CEO/Director of People and Culture led WRES Action Plan
	Group to focus on tackling diversity on a 'grand' scale.



Theme 1: Recruitment and Development

	July 2018		storic Performar	ice	2018/19	Reported in Month	Future	Target		Benchmarking	
Relates to WRES Indicator No.	Indicator Description	2015/16	2016/17	2017/18	Target	Actual	2019/20	2020/21	NHS London Average	LAS Ranking (NHS London)	Ambulance Trusts
1)	% of BME Staff										
	a) Trust Total	11.9%	12.7%	13.5%	15.0%	13.7%	17.5%	20.0%	44.3%	65 of 70	4.4%
	b) Bands 1-4	19.2%	20.6%	21.4%	15.0%	21.6%	17.5%	20.0%	51.4%	43 of 70	5.3%
	c) Bands 5-7	8.6%	9.0%	9.5%	15.0%	9.7%	17.5%	20.0%	43.7%	60 of 70	3.5%
	d) Bands 8A and above	7.1%	9.7%	10.5%	15.0%	11.9%	17.5%	20.0%	24.7%	63 of 70	4.8%
2)	% of BME Appointed										
	% BME Applications		47.8%	48.6%		41.4%					
	% White Applications		49.3%	48.5%		55.4%					
	% Unknown Applications		2.9%	3.0%		3.2%					
	% BME Shortlisted		35.3%	34.7%		37.7%					
	% White Shortlisted		61.8%	62.7%		57.5%					
	% Unknown Shortlisted		2.9%	2.6%		4.7%					
	% BME Appointed		20.2%	22.4%	25.0%	0.0%					
	% White Appointed		72.6%	73.4%		66.7%					
	% Unknown Appointed		7.2%	4.2%		33.3%					
	Relative Likelihood of appointment from shortlisting - BME		0.57	0.65		0.00					
	Relative Likelihood of appointment from shortlisting - White		1.18	1.17		1.16					
	Relative Likelihood of Appointment if White compared to BME		2.06	1.81	1.50	N/A	1.30	1.00			
4)	Relative likelihood of White staff accessing non-mandatory training and CPD compared to BME staff		1.16	1.79	твс		ТВС	твс			
7)	% of Staff Believing the Trust provides equal opportunities (SSKF21)										
	a) Trust Total	60.1%	72.6%	59.2%	62.0%		65.0%	68.0%	76.3%	54 of 56	69.3%
	b) BME										
	c) White	42.2%	56.6%	47.1%	50.0%		53.0%	56.0%	65.1%	41 of 46	55.9%
		62.9%	74.2%	61.8%	65.0%		68.0%	71.0%	84.1%	54 of 56	71.0%
	d) Ratio (No. times more likely if White)	1.49	1.31	1.31	1.30		1.28	1.27	1.29		1.27



Our pledge: We will increase the BME workforce and set specific targets over the next 3 years to recruit BME staff into front line roles

Theme 1: Recruitment and Development							
Objective	Actions	What WRES indicator will this action contribute towards:	Timescale (delivered by)	Owner			
1.1. To provide and promote opportunities / progression across the Trust for BME staff.	To roll out Visible Leader and Management Essentials training to Location Group Managers and all 8b and above leader's within the trust. The training will cover values unconscious bias, cultural awareness and aligned to the NHS leadership academy nine dimeson module. The training is co-facilitate with NHS Elect	1	April 2019	Julia Smyth Head of Leadership and Performance Melissa Berry Diversity Consultant.			
1.2	To commission a detailed review external of the recruitment pipe line process. The outcome will be to understand where and why BME candidates fall out in the process	1, 2	February 2019	Patricia Grealish Director of People and Culture			
 1.3 To increase the LAS BME workforce to 15% by 2019, 17.5% by 2020 	To ensure the Trust has diverse interview panels Bands 7 and above targeting corporate roles and TEAC panels with a monthly report provide to CEO in the performance review with how many interviews, panel make up and outcome.	2	Monthly	Averil Lynch Head of Recruitment Melissa Berry Diversity Consultant			
20% by 2020 / 21.	To provide data on a monthly basis to the CEO for performance review / recruitment. Data analysis will provide information on the differences between BME and white applications from shortlisting to appointment and address issues.	2	Monthly	Averil Lynch Head of Recruitment			



Theme 1: Recruitment and Development							
Objective	Actions	What WRES indicator will this action contribute towards:	Timescale (delivered by)	Owner			
To increase the LAS BME workforce to 15% by 2019, 17.5% by 2020 and 20% by 2020 / 21.	To train BME interviewers twice a year to ensure diverse interview panels 2 cohorts with a minimum of twenty participates.	2	December 2019 / May 2019	Averil Lynch Head of Recruitment Melissa Berry Diversity Consultant			
	Promote LAS roles to under represent BME Communities by identifying one Borough in each sector with a high BME representation from the Greater London authority data and engaging with and encourage individuals to apply. Engaging with a minimum of 50 potential candidates from local community groups	2	Run session every quarter 4 (2018/19)	Averil Lynch Head of Recruitment Melissa Berry Diversity Consultant			
	Assign overall responsibility for BME recruitment targets to nominated senior managers. Senior Lead to take ownership of nominated areas to enable targets to be achieved and a Senior Lead assigned: Paramedics: 10% TEAC 10% EMD 50%	2	October 2018	Paramedics - Tina Ivanov TEAC - Peter Rhodes EMD Pauline Cramner /Jules Lockett			
	Monitor and review the recruitment data monthly in the Chief Executives monthly performance review meetings.	2	Monthly reporting	Averil Lynch Head of Recruitment			



Theme 1: Recruitment and Development							
Objective	Actions	What WRES indicator will this action contribute towards:	Timescale (delivered by)	Owner			
To increase the LAS BME workforce to 15% by 2019, 17.5% by 2020 and 20% by 2020 / 21.	The Trust to launch BAME Mentor Scheme for BAME Paramedic Students studying with our partner universities (all years) target of a minimum of 30 per year.	2	April 2019	Tina Ivanov Deputy Director Clinical Education & Standards.			
	Devise programme to include awareness raising, application guidance and interview skills for front line roles in the Service to include Non-emergency transport, Emergency Ambulance Crew and Paramedic roles. 3 sessions for 25 participants February, March and April 2019	2	May 2019	Anna Byers, Apprenticeship Consultant Averil Lynch Head of Recruitment			
1.5 To ensure that the next WRES submission has data for indicator 4	Data validation exercise to be undertaken to digitalise training records, and ensure it reports into the Oracle learning management system	4	December 2018	Chris Randall Head of Workforce Analytics			
	To analysis the data for differences between White and BME staff accessing non-mandatory training and CPD based on the outcomes we will devise a separate action plan	4	February 2019	Julia Smyth Head of Leadership and Performance			
1.6 Develop Career pathways that are flexible and enable staff to progress	To develop a Career Map that shows all staff how their careers might progress at London Ambulance Service. The career map will be used to promote LAS Career days to be held twice a year, at CEO road shows, used at internal events and published on the pulse	7	September 2018	Julia Smyth Head of Leadership and Performance			



Theme 1: Recruitment and Development							
Objective	Actions	What WRES indicator will this action contribute towards:	Timescale (delivered by)	Owner			
	Publish successful staff stories (profile a minimum of one staff member a month) The staff will be included in the" big staff conversation". And profiles will be published on the Pulse and Rib and used within the organisation	7	Every month from September 2018	Melissa Berry Diversity Consultant Internal Communications			
1.7 Introduce Talent Management and Succession Planning Programmes that include secondment and job shadowing opportunities	Job shadowing and secondment opportunities to be offered in areas where it is possible for the service to accommodate. As an initiative to further retain talent in the organisation. Identifying talent out of the PDR process, part of succession planning process, each directorate will identify a minimum of 1 person every quarter	3	March 2019	Patricia Grealish Director of People and Culture			
1.8 To develop and implement Sponsorship mentoring across the Trust.	To develop and run sponsorship mentoring training for a minimum of 30 BME staff in the next 12 months with a full evaluation of the programme -October for roll out for the first cohort of mentees -Evaluation of the sponsorship mentoring	6	October 2018 July 2019	Julia Smyth Head of Leadership and Performance. Julia Smyth Head of Leadership and Performance			



Workforce Experience

Not Not Readily Applicable Available

July 2018		Histo	ric Perform	nance	nce 2018/19 in Month		Future Target		Benchmarking		
Relates to WRES Indicator No.	Indicator Description	2015/16	2016/17	2017/18	Target	Actual	2019/20	2020/21	NHS London Average	LAS Ranking (NHS London)	Ambulance Trusts
3)	Likelihood of BIVIE staff entering the formal disciplinary process compared to		2.73	2.01	1.70		1.50	1.30			
5)	White % of staff experiencing bullying from patients (SSKF25)										
	a) Trust Total	53.2%	52.1%	50.6%	ТВС				23.2%	56 of 56	47.9%
	b) BME	34.4%	35.0%	38.9%	ТВС				24.1%	49 of 56	38.4%
	c) White	55.6%	56.0%	56.6%	ТВС				23.6%	56 of 56	47.5%
	d) Ratio (No. times more likely if White)	1.61	1.60	1.46	ТВС				0.98		1.24
6)	% of staff experiencing bullying from staff (SSKF26)										
	a) Trust Total	38.4%	32.4%	32.0%	29.0%		26.0%	23.0%	27.3%	46 of 56	28.4%
	b) BME	40.1%	32.1%	37.7%	35.0%		33.0%	31.0%	30.8%	47 of 56	33.5%
	c) White	38.2%	32.4%	31.2%	29.0%		27.0%	25.0%	24.7%	50 of 56	27.6%
	d) Ratio (No. times more likely if BME)	1.05	0.99	1.21	1.21						1.21
8)	% of staff experiencing discrimination at work in the last 12 months (SSQ17b)										
	a) BME	24.6%	17.9%	19.1%	18.0%		17.0%	16.0%	16.5%	43 of 56	17.6%
	b) White	13.2%	9.3%	10.9%	10.0%		9.0%	8.0%	7.4%	52 of 56	10.8%
	c) Ratio (No. times more likely if BME)	1.86	1.92	Page 1.76	12 of 22				2.23		A 1.63 F



Theme 2: Workplace Experience

Our pledge: We will use data to analyse the BME experience at the LAS and set challenging objectives for our managers to tackle inequality

	Theme 2: Workplace experience							
Objective	Actions	What WRES indicator will this action contribute towards:	Timescale (delivered by)	Owner				
2.1 To prevent incidents going into formal disciplinary processes (where applicable) and resolve them informally wherever possible	Create and Implement Check and Challenge Panels to reduce numbers of BME staff going through disciplinary process. To include; 1. Triage process 2. Panel membership to include Head of Engagement 3. Investigation training and tool kit	3	October 2018	Lorna Campbell Interim Head of Engagement Melissa Berry Diversity Consultant				
To decrease the percentage of BME staff going through	Disciplinary data to be included in to the score cards and presented at the performance review meetings with CEO	3	September 2018	Chris Randall Head of Workforce Analytics				
the disciplinary process (where applicable).	Bullying & Harassment lead – training, coaching, triage to the 3 system approach of: Courageous conversations, round table and external mediation 8b and above 80 people	3	September 2018	Cathe Gaskell Bullying and Harassment Advisor				
	To scope who should receive investigation training. Implement investigation training to improve the	3	October 2018	Julia Smyth Head of Leadership and Performance				
	quality, consistency and equity of the process. Twenty per – cohort. Once trained this will be tracked through ESR. Target to train a sixty in a 12 month period. Managers will have to be trained in order to conduct an investigation		January 2018	Lorna Campbell Interim Head of Engagement				



Theme 2: Workplace experience							
Objective	Actions	What WRES indicator will this action contribute towards:	Timescale (delivered by)	Owner			
	All business partners and band 7 people and culture mangers and above managers will receive investigation training within the next 12 months. ()	3	Update provided every quarter until July 2019	Lorna Campbell Interim Head of Engagement			
	Deep dive into a completed disciplinary case on a quarterly basis by external consultant.		Every quarter	Patricia Grealish Director of People and Culture			
2.2 To decrease staff who experience harassment, bullying or abuse from patients or relatives by a	Undertake Thematic Analysis of supplementary questions on Staff Survey relating to discrimination, bullying, harassment, and abuse.	5	September to November 2018	Melissa Berry, Diversity Consultant Delia McMillan, Staff Survey Consultant			
minimum 3%	Analysis of additional question from the staff survey and separate action plan developed for Health and Safety	5	March 2019	Martin Nicholas Sector Health & Safety Manager			
	 Commence the staff safety group as a sub group of the corporate Health & Safety committee for all staff Verbal assaults Physical assaults Look at key themes and support of staff 	5	November 2018	Local Security Management Specialist			



Theme 2: Workplace experience						
Objective	Actions	What WRES indicator will this action contribute towards:	Timescale (delivered by)	Owner		
2.3 Promote the Trust networks, BME networks and LGBT network with the aim of creating disability	BME staff network to be supported to have a work plan that aligns with WRES action plan BME staff to have periodic meeting with CEO on a quarterly basis to hear concerns and enable two	8	October 2018	Agatha Nortley – Mesh Chair BME Network Melissa Berry Diversity Consultant		
forum and women	way communication and understand if action plan is having an impact on staff As part of the offering of the BME network, BME	8	Every quarter	Garrett Emmerson, CEO Melissa Berry Diversity Consultant		
	Master class for BME staff network members (open to all staff) will be rolled out. Interview skills and techniques, motivational speakers, personal development session to include speed mentoring	8	November 2018	Agatha Nortley – Mesh Chair BME Network Melissa Berry Diversity Consultant		
	Freedom to Speak up Guardian to work closely with Diversity consultant and Bulling and Harassment lead to share intelligence and meet every six weeks and flag theme's to Director of People and Culture	8	Every 6 weeks	Melissa Berry Diversity Consultant FTSU Guardian Bullying & Harassment Lead Patricia Grealish, Director of People and Culture		



Theme 2: Workplace experience						
Objective	Actions	What WRES indicator will this action contribute towards:	Timescale (delivered by)	Owner		
2.4 "Big conversations"	To continue to use the Senior Managers forum annually to discuss the WRES and race. Using other methods of communication to "normalise" organisation discussion on race and related matters. Engagement with , ADO's, LGM's,	2	Ongoing	Garrett Emmerson, CEO Patricia Grealish, Director of People and Culture		
	Cultural awareness, Postcard to be sent out every month to managers to have conversations with their team with a different image each month, as part of the "Big conversation "each card will have questions on the back to be used by teams as part of team meetings	6	Monthly	Melissa Berry Diversity Consultant		
	Recruit Race Advocates "Ask me" T-shirts to encourage staff to have the race conversation talk about the BME staff network all linked to the big conversation	6	January 2019	Melissa Berry Diversity Consultant		
2.5To improve our Trust wide communications and openness about race."Big Conversation"	To develop and implement a Trust wide internal and external Communications plan called 'Lets talk about race'. - Promote success stories of BME staff. - The BME Staff network - The WRES - Equality delivery system	2	Plan Development: October/ November 2018. Implementation December r 2018	Alex Bass Head of Internal Communications Melissa Berry Diversity Consultant.		
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Theme 2: Workplace experience							
Objective	Actions	What WRES indicator will this action contribute towards:	Timescale (delivered by)	Owner			
2.6 Unconscious bias programme for all staff	 Unconscious bias programme for 700 top leaders in the trust will be implemented as part of the management essential training Unconscious Bias training is to be commissioned by an external provider and to be delivered on CSR training over a four month period starting in April 2019. The training will focus on Bias, self awareness, Equity, Diversity. 	1	April 2019	Melissa Berry Diversity Consultant Julia Smyth Head of Leadership and Performance Tina Ivanov Deputy Director Clinical Education & Standards. Melissa Berry Diversity Consultant			



Senior Trust Leadership

Not Applicable Not Readily Available

	July 2018	Histo	ric Perforn	nance	2018/19	Reporte d in month	Future	Target	В	enchmarkir	ng
Relates to WRES Indicator No.	Indicator Description	2015/16	2016/17	2017/18	Target	Actual	2019/20	2020/21	NHS London Average	LAS Ranking (NHS London)	Ambulance Trusts
9)	% difference between voting board members and total workforce										
	a) Trust Board BME %	0.0%	0.0%	0.0%							
	b) Workforce	11.9%	12.7%	13.5%							
	c) Difference	-11.9%	-12.7%	-13.5%							
Local Indicator	% difference between Exec Leadership Team and Workforce										
	a) ELT	0.0%	0.0%	9.1%							
	b) Workforce	11.9%	12.7%	13.5%							
	c) Difference	-11.9%	-12.7%	-4.4%							
Local Indicator	Overall staff engagement										
	a) Trust	3.11	3.39	3.36					3.80	55 of 56	3.45
	b) BME	3.22	3.53	3.43							
	c) White	3.10	3.38	3.36							
	d) Ratio (BME to White)	1.04	1.04	1.02							



Theme 3: Senior Trust Leadership

Our pledge: We will develop and deliver unconscious bias and cultural awareness programmes across the employee journey over the next 3 years

Theme 3: Senior Trust Leadership Inc 8C and above							
Objective	Actions	What WRES indicator will this action contribute towards:	Timescale (delivered by)	Owner			
3.1 To influence leadership behaviours to drive a change in culture and move towards an inclusive way of working across the Trust.	TOP 65 band 8c and above in LAS to have specific objectives in PDR relating to race equality and contribution to the WRES	1	December 2018	Patricia Grealish, Director of People and Culture			
3.3 To have a board that is reflective of the populations of which the LAS serve.	have a board that is in, Leadership academy, NHS diversity leads London and various channels to attract a more diverse		January 2019	Heather Lawrence Chair			
	"Reject the list" To work with Head-hunters to ensure that shortlist are diverse 30% Gender and Ethnicity mix.	9	Ongoing	Patricia Grealish, Director of People and Culture			
	Diversity lead to sit on all 8d and above post	9	Update quarterly	Melissa Berry Diversity Consultant			
	Ensure a diverse selection panel for all executive appointments BME/Gender	9	Update quarterly	Melissa Berry Diversity Consultant			
	CEO Commitment to delivery of the WRES Action Plan via annual objectives	9	Reviewed annually	Garret Emerson Chief Executive			



Top 65

Band 8C and	Band 8C and above (inc non-exec)				
Gender Description	r Description Headcount Percentage				
BME	8	12%			
White	57	88%			
Total	65	100%			

Band 8C and above (inc non-exec)					
Gender Description Headcount Percentage					
Female	34	52%			
Male	31	48%			
Total	65	100%			



Conclusion

- 17. London Ambulance data demonstrates that if we want a better outcome for staff and patients, we will need to evolve our approach. This work is fundamental to the core values of London Ambulance and we are determined to meet the targets we have set.
- 18. The Trust is passionately committed to accelerating progress, ensuring our culture is supportive and equitable, having a workforce that is reflective of London, and doing so under the leadership of the Chief Executive.

Melissa Berry, Diversity Consultant



London Ambulance Service

Appendix 1

