



Workforce Race Equality Standard

South East London Integrated Care Board

Equality, Diversity and Inclusion Team 2024 – 2025

If you have any queries, please contact the team on: equality@selondonics.nhs.uk

CEO: An Chair: Si







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1. Introduction

- **1.1.** The NHS Workforce Race Equality Standard (WRES) ensures that employees from Global Majority backgrounds have equal access to career opportunities and receive fair treatment in the workplace.
- **1.2.** The NHS workforce is the foundation for NHS, there 1.6 million employees, 350 different professions and all of this is made up of staff from different backgrounds and nationalities. Every individual, irrespective of their background, enriches the NHS with distinctive skills, which supports the NHS in delivering exceptional care and services for all.
- **1.3.** The WRES has nine indicators: data for four indicators is sourced from workforce data, four indicators from the National Staff Survey and the data for the final indicator comes from the Board.
- **1.4.** The data utilised for the WRES is retrospective. This year's report is based on data from the financial year 2023/2024.
- **1.5.** We know from the Census 2021 data that the population of South East London (SEL) is diverse. This means we need to ensure the breakdown of our workforce is diverse, which will help to understand the community we serve. Along with this we need to ensure our processes are equitable and staff experiences are free from discrimination.

2. Summary of Findings

- **2.1. Indicator 1:** Overall, 42.5% of the workforce are from a Global Majority background and 55.8% are from a White background.
- **2.2. Indicator 2:** White applicants are 4 times more likely to be appointed after shortlisting.
- **2.3. Indicator 3:** We are unable to present disciplinary data to maintain confidentiality due to low numbers. The low numbers reflect a positive outcome for the organisation.
- **2.4. Indicator 4:** Information on non-mandatory training undertaken by the workforce is not currently collected by SEL ICB.
- **2.5.** Indicator 5: Global Majority staff (9.2%) are more likely to experience harassment, bullying or abuse from patients compared to White staff (4.9%). The Global Majority percentage is also higher than the national average.

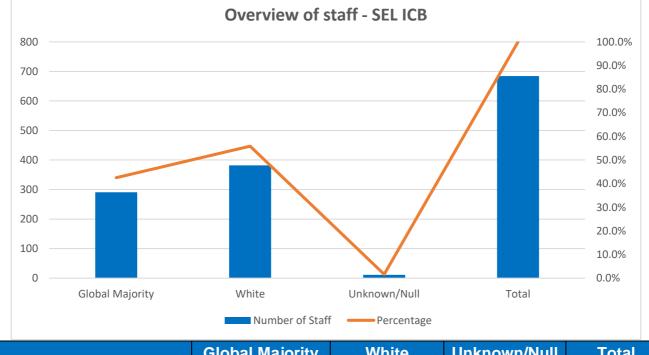






- **2.6.** Indicator 6: Global Majority staff (23.5%) experience more harassment, bullying or abuse from staff compared with White staff (19%). Both percentages for SEL ICB are higher than the national average.
- **2.7. Indicator 7:** 42.9% of Global Majority staff and 54.3% of White staff believe the organisation provides equal opportunities for progression or promotion. The % for White staff is below the national average.
- **2.8.** Indicator 8: Global Majority staff (18%) are more likely to experience discrimination at work from managers/team leaders and other colleagues compared to White staff (9%). Both have seen increase from the previous year and are higher than the national average.
- **2.9.** Indicator 9: The difference between White Board members and White staff (workforce) is 7.8%. The difference between Global Majority Board members and Global Majority staff (workforce) is (minus) -15.3%.

3. Indicator 1: Percentage and number of staff in NHS trusts by ethnicity (Clinical and Non-Clinical).



3.1. Overview of SEL ICB staff overall (Graph 1 and Table 1):

	Global Majority	White	Unknown/Null	Total
No. of staff 2024 (2023)	291 (323)	382 (445)	11 (26)	684 (794)
Percentage 2024 (2023)	42.5% (40.7%)	55.8% (56%)	1.6% (3.3%)	100%







- **3.2. Overview:** The overall workforce at SEL ICB is predominantly White (55.8%), with a representation of Global Majority employees (42.5%). The unknown or null category is relatively small (1.6%), indicating that the data is largely complete. This could be due to a variety of factors, such as staff not knowing how to update this information on the staff system (Workforce).
- **3.3. Comparison to 2023:** Largely, due management cost reduction, the workforce has decreased from 794 to 684 employees, representing a 13.9% reduction in total staff. Despite a numerical decrease, the proportion of Global Majority staff has risen by 1.8%. Meanwhile, the percentage of White staff has seen a slight decrease of 0.5%.

AfC band clusters	No. of Global Majority staff	Percentage of Global Majority staff	No. of White staff	Percentage of White staff	No. of unknown staff	Percentage of unknown staff	Total
Cluster 1: <1 to 4	21	63.6%	12	36.4%	0	0.0%	33
Cluster 2: 5 to 7	95	45.2%	112	53.3%	3	1.4%	210
Cluster 3: 8a and 8b	60	37.3%	99	61.5%	2	1.2%	161
Cluster 4: 8c to VSM	28	20.6%	105	77.2%	3	2.2%	136
Other	0	0.0%	3	100.0%	0	0.0%	3
Total	204	37.6%	331	61%	8	1.5%	543

3.4. Overview of SEL ICB staff in non-clinical staff (Table 2):

- **3.5.** Non-clinical staff: The non-clinical workforce consists mainly of White staff (61%), while Global Majority staff make up 37.6%. Global Majority staff make up more than half (63.6%) of staff within Cluster 1 and nearly half in Cluster 2 compared to White staff. From Cluster 3 onwards Global Majority representation significantly drops. This is telling us that Global Majority staff are experiencing a glass ceiling effect (generally from band 5 onwards).
- **3.6.** Comparison to 2023: The total number of staff in a non-clinical role has increased by 5 people. The percentage and number of Global Majority staff within non-clinical roles has slightly increased by 1.7% and for White staff has decreased by 1.4%.







AfC band clusters	No. of Global Majority staff	Percentage of Global Majority staff	No. of White staff	Percentage of White staff	No. of unknown staff	Percentage of unknown staff	Total
Cluster 1: <1 to 4	0	0.0%	0	0.0%	0	0.0%	0
Cluster 2: 5 to 7	23	79.3%	6	20.7%	0	0.0%	29
Cluster 3: 8a and 8b	41	69.5%	16	27.1%	2	3.4%	59
Cluster 4: 8c to VSM	14	45.2%	16	51.6%	1	3.2%	31
Other	9	40.9%	13	59.1%	0	0.0%	22
Total	87	61.7%	51	36.2%	3	2.1%	141

3.7. Overview of SEL ICB staff in clinical staff (Table 3):

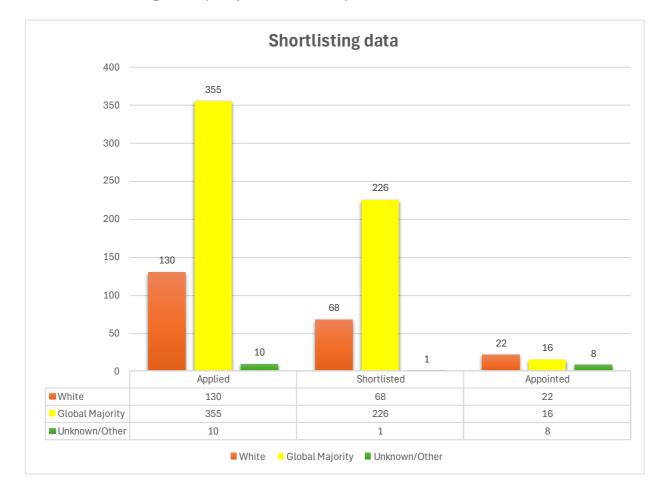
- **3.8. Clinical staff:** There are a higher number of Global Majority staff (61.7%) within clinical roles when compared to White staff (36.2%). Global majority numbers are higher on all bands apart from Band 8c and VSM where there are higher numbers of White staff. It should be noted that in the 'other' group there are higher numbers of White staff compared to Global Majority.
- **3.9.** Comparison to 2023: The workforce data for 2024 is consistent with the 2023 data. The numbers/percentages have reduced across the board with a 10% reduction in Global Majority staff and 5.9% reduction in White Staff.
- **3.10.** Comparison to South East London's population: South East London's Global Majority population is 39.8%, the ICB is overrepresented by 2.7%.







4. Indicator 2: The relative likelihood of White applicants being appointed from shortlisting compared to Global Majority applicants.



4.1. Shortlisting data (Graph 2 & Table 4):

- **4.2. Overview:** From the shortlisted applicants, 32.4% of White applicants were appointed compared to 7.1% of shortlisted Global Majority applicants. This difference is statistically significant, despite a higher number of applications from Global Majority candidates and their successful shortlisting.
- **4.3. Comparison to 2023:** There is a significant decrease from the previous year (18.9%) of shortlisted Global Majority applicants being appointed. This may be indicative of inequalities in the recruitment process; however, it should be noted that the organisation has undergone a restructure which has reduced the number of jobs available (and therefore reducing the overall number of applicants).
- **4.4.** Likelihood: The data is showing us that White applicants are 4.6 times more likely to be appointed following shortlisting compared to Global Majority. This is an increase from last year's data, which showed White applicants were 2.1 times more likely to be shortlisted (increase of 2.5).





- **4.5. Note:** It should be noted that a ratio above 1.0 indicates White applicants are more likely to be appointed and a ratio below 1.0 would indicate Global Majority staff being more likely to be appointed.
- **4.6.** Although the organisation has a 2.7% overrepresentation of Global Majority staff, it must be cautious while trying to align the staff representation more closely with that of our South East London community. The goal is to achieve parity without causing any negative impact.
- **4.7. Unknown data:** The data indicates that while only one shortlisted applicant had an unknown ethnicity, this number increased to eight when appointed. This could suggest that some applicants did not disclose their ethnicity during the application process but later chose to do so when appointed. Overall, 17.4% of those appointed chose not to share their ethnicity This raises the question about why more individuals are choosing not to disclose this information.

5. Indicator 3: The relative likelihood of Global Majority staff entering the formal disciplinary process compared to White staff

5.1. Due to good processes in place to support staff, SEL ICB has a low number formal and informal concerns/complaints raised. Ashe number is below 11, we are unable to provide details due to confidentiality and the risk of identifying the staff.

6. Indicator 4: The relative likelihood of White staff accessing nonmandatory training and CPD compared to Global Majority staff.

6.1. SEL ICB currently does not have a process for tracking non-mandatory training completed by staff. However, there is a training interview panel in place for non-mandatory training requests over £500. Additionally, all staff have access to NHS Elect and NHS Leadership Academy courses.

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

7.1. National Staff Survey Data (Table 5):

Ethnicity	SEL ICB	National ICB Average
White	4.9%	7.7%
Global Majority	9.2%	6.3%

7.2. Overview: Global Majority staff (9.2%) experienced more harassment, bullying or abuse from patients, relatives or the public compared to White staff.







- **7.3.** Comparison to national average: The Global Majority staff, compared to the national average of 6.3%, is statistically higher by nearly 3% (2.9%). For White staff it is statistically lower by 2.8%.
- **7.4.** Comparison to 2023: This is a change from the previous year's findings which showed that White staff are more likely to experience bullying or abuse from patients, relatives or the public (6.5%), which is 2.2% more than Global Majority (4.3%) staff.

8. Indicator 6: Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months:

8.1. National Staff Survey Data (Table 6):

Ethnicity	SEL ICB	National ICB Average
White	19.9%	15.6%
Global Majority	23.5%	20.9%

- **8.2. Overview:** Global Majority (23.5%) staff experienced more harassment, bullying or abuse from staff compared to White staff (19.9%). This is a significant difference of 3.6%.
- **8.3.** Comparison to national average: Global Majority staff at SEL ICB (23.5%) have a higher percentage compared to the National average of (20.9%), which is a difference of 2.6%. For White staff it is statistically higher 4.3% than the national average.
- **8.4.** Comparison to 2023: There has been a slight change to the data, which showed that 24.6% of Global Majority staff experienced harassment, bullying or abuse from staff. This is a slight decrease of 1.1%.

9. Indicator 7: Percentage of staff believing that their organisation provides equal opportunities for career progression or promotion.

9.1. National Staff Survey Data (Table 7):

Ethnicity	SEL ICB	National ICB Average
White	54.3%	53.7%
Global Majority	43.0%	36.5%

9.2. Overview: Significantly higher White staff (54.3%) believe that the organisation provides equal opportunities compared to Global Majority (43%). This is a significant difference of 11.3%.







- **9.3.** Comparison to national average: Both Global Majority staff (by 6.5%) and White Staff (0.6%) percentages are above the national average.
- **9.4.** Comparison to 2023: Global Majority perception has changed, indicating a positive change: last year only 38.4% of Global Majority staff believed this to be true. However, with White staff, this has decreased from 58.2%.

10. Indicator 8: Percentage of staff experiencing discrimination at work from other staff in the last 12 months (Manager/Team leader or other colleagues).

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Ethnicity	Overall	Manager	Other colleagues	National average
White	9%	13.5%	13.2%	5.1%
Global Majority	18%	13.6%	17.1%	14.5%

- **10.2. Overview:** Global Majority staff experienced more discrimination at work from a manager compared to White staff. Global Majority (17.1%) staff also experienced more discrimination from other colleagues compared to White staff (13.2%). This can also be seen in the in the overall percentages in above table.
- **10.3.** Comparison to national average: Global Majority staff's percentage is significantly higher by 3.5% compared to the national average. It should be noted that White staff's percentage is also higher.
- **10.4.** Comparison to 2023: Both Global Majority staff and White staff have seen an increase in experiencing discrimination from other staff. Global Majority staff experienced an increase of 0.8% from Managers, and for White staff it increased by 2.1%. For discrimination from other colleagues there was an increase of 0.8% for Global Majority staff and 1.8% for White staff.

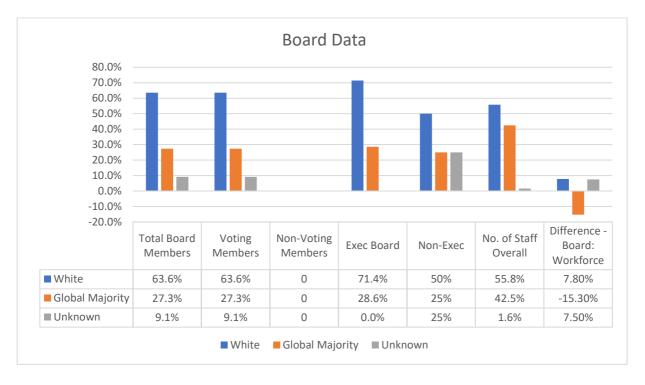
11. Indicator 9: Percentage difference between the organisations Board membership and its overall workforce disaggregated.

	White	BME	Unknown	Total
Total board members	7	3	1	11
Voting members	7	3	1	11
Non-voting	0	0	0	0
Exec board members	5	2	0	7
Non exec	2 (1	1	4
No. of staff overall	382	291	11	684
Difference – Board: Workforce	7.8%	-15.3%	7.5%	N/A

11.1. Board Data (Table 9 and Graph 5):







- **11.2.** Please note that the data above pertains to board members employed by the ICB, not the Partnership Board.
- **11.3.** There are a total of 11 board members: 63.6% are White; 27.3% are Global Majority; 9.1% are Unknown. All board members are voting members.
- **11.4.** There are 5 executive members (please note that SEL ICB have more executive members, however they are seconded from other organisations): 71.4% White and 28.6% are Global Majority.
- **11.5.** The difference between Global Majority Board members and Global Majority staff (workforce) is (minus) -15.3%.
- **11.6.** The difference between White Board members and White staff (workforce) is 7.8%.
- 11.7. Comparison to 2023: There are the same amount of Board members, however the composition has changed by having an additional Global Majority member and 1 less White Board member. This means the difference between Global Majority Board members and Global Majority staff has decreased from (minus) 22.5% to (minus) -15.3%.

12. Updates on last year's actions

12.1. Last year's report outlined 13 actions (8 completed), which were further broken down into 18 manageable steps, of which we have completed 13. Due to changes in the organisation's structure, the remaining actions will be reviewed and incorporated into the new action plan if necessary.







13. Overview

- **13.1.** Data from the 2023/2024 WDES report indicates that improvements are needed in the following areas, consistent with the findings of the previous report:
 - Global Majority representation within higher Agenda for Change (AfC) and VSM bandings within clinical and non-clinical roles.
 - Bringing parity to shortlisting and appointment of Global Majority applicants, along with ensuring our recruitment process is equitable.
 - Recording of non-mandatory training and CPD.
 - Reducing discrimination, bullying, harassment and abuse experienced by staff.
 - Providing equal opportunities for promotion and progression.
 - Increase Global Majority representation at Board and Executive level.





14. Mitigating Actions

Indicator	Theme	Action	Main lead	Review date
1 to 2	Recruitment and representation	 Redesign the SEL ICB recruitment internet page layout to be more welcoming, user-friendly, and accessible, this will include: A "What It Means to Work with Us" section highlighting values, mission, and staff experiences. Videos showcasing staff at all levels within SEL ICB (i.e. regarding the reasonable adjustments we offer etc.) Links to employee testimonials, benefits, and career growth opportunities. Statement about why we are collecting equalities data/who can see it to encourage a higher disclosure rate. 	Recruitment	November 2025
		Develop an Offline, Accessible Application Form for example a fillable PDF application form that's simple to read, complete, and submit.	Recruitment	November 2025
		Create Concise Job Descriptions by working with hiring managers to rewrite job descriptions to focus on essential duties, required qualifications, and key responsibilities	Recruitment	November 2025
		Develop and implement a process where applicants can request interview questions in advance.	Recruitment	November 2025
		Create a process for panel members' short biographies and headshots which are shared with candidates once interviews have been scheduled.	Recruitment	November 2025
		Select and train inclusion representatives to participate in interview panels, ensuring diverse perspectives are represented.	Recruitment	November 2025
		Design additional recruitment training sessions and explore the potential for "Train the Trainer" recruitment workshops (through Enact) to equip SEL ICB staff with the skills needed to carry out a fair and equitable recruitment processes.	OD	November 2025





7	Equality	Review 2024 staff survey data to understand colleague experiences and	OD	November 2025
	Opportunities	integrate findings into the OD plan for FY 25/26, following which further		
	and progression	actions will be developed and updated in the next report.		
5,6&8	Bullying and	Revitalise the mediation service, including training more staff to become	OD	November 2026
	harassment	mediators		
		Increase the number of trained Mental Health First Aiders.	OD	November 2025
		Design and deliver enhanced line management training.	OD	November 2025
		Refresh the appraisal process to ensure staff have an opportunity raise	OD	November 2025
		concerns.		
		Create and implement a Sexual Safety Charter.	OD	November 2025
		Strengthen and actively promote the Speak Up process	HR	November 2025
	Support for staff	Develop and Deliver training on workplace adjustments and the Access to	EDI	November 2025
		Work process.		
		Develop awareness raising sessions, through ad hoc events or the Equalities Forum	EDI	November 2025
		Develop and implement a formal workplace adjustments policy.	HR	November 2025
		Advertise ICS leadership training for SEL ICB staff.	OD	November 2025
		Create a rewards and recognition program to help staff feel valued.	OD	November 2026
		Participate in the development of the ICS conference and awards session.	EDI	March 2025
		Provide managers with templates to recognise colleagues' contributions.	OD	November 2026
		New ways of working: Integrate a "Wall of Praise" into meetings to celebrate achievements.	OD	November 2026
4	Recording non- mandatory training	The training request form will be digitised, with mandatory fields for demographic and diversity data to ensure accurate information capture.	OD	December 2024