

BME MIDWIVES, DISCIPLINARY PROCEEDINGS AND THE WORKPLACE RACE EQUALITY STANDARD



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Introduction

In 2011 we carried out a Freedom of Information (FOI) request by providing information about the numbers of midwives in London facing disciplinary proceedings by ethnicity. Our report 'Royal College of Midwives Freedom of Information Request: Midwives and Disciplinary Proceedings in London' was published in November 2012. It revealed that a disproportionate number of black and black British midwives faced disciplinary proceedings, and a disproportionate number of black and black British midwives received a more severe outcome from the disciplinary proceedings.

We have repeated the FOI request for the years since the original report. This report sets out our findings for 2012, 2013, 2014 and 2015 compared with the original information from 2011. Sadly, our follow-up report reveals significant issues with BME midwives and disciplinary proceedings in the NHS.

The key findings are as follows.

- Over the five years of the FOI, BME midwives are disproportionately more likely to face disciplinary proceedings. 44.1% of the midwives employed in London are from a BME background. And 66.4% of the midwives facing disciplinary proceedings are from a BME background.
- Over the five years, a higher proportion of BME midwives than white midwives have been suspended while facing disciplinary proceedings. Overall, from July 2010 to June 2015, 19.6% of the BME midwives who were facing disciplinary proceedings were suspended, compared with 6.3% of the white midwives who were facing disciplinary proceedings.
- Over the five years, there was no trend or overall difference in the comparison of BME midwives to white midwives who had no further action taken, received a first written warning or received a final written warning as an outcome of their disciplinary proceedings.
- Over the five years, a higher proportion of BME midwives than white midwives have been dismissed while during disciplinary proceedings. During the five-year period, 38 midwives were dismissed and 37 of these were from a BME background. Out of the 37 BME midwives dismissed, 32 were black or black British. Overall, from July 2010 to June 2015, 13.2% of the BME midwives who faced disciplinary proceedings were dismissed, compared with 0.7% of the white midwives who faced disciplinary proceedings.

The high levels of discrimination against BME staff in the NHS have been widely evidenced in the report by Middlesex University 'The Snowy White Peaks of the NHS: a survey of discrimination in governance and leadership and the potential impact on patient care in London and England'

(see note ¹ below) and in the report 'Making the Difference: diversity and inclusion in the NHS' by The King's Fund (see note ² below). These reports led to the introduction of the Workplace Race Equality Standard.

It is very important that RCM workplace representatives are aware of the Workplace Race Equality Standard. This can help them support and protect our members in the workplace and make sure that they are not discriminated against.

This is important for providing high-quality care for women and their families. To be able to provide a truly inclusive service and an NHS which treats all service users with respect, dignity and compassion, NHS workplaces need to be inclusive and the workforce need to be treated with respect, dignity and compassion. Investment in NHS staff is an investment in NHS care.

Investing in a diverse NHS workforce allows the NHS to deliver a more inclusive service and improve care for service users. Equality is about creating a fairer society where everybody has the opportunity to achieve their potential. Diversity is about recognising and valuing difference in its broadest sense. Inclusion is about an individual's experience within the workplace, and in wider society, and the extent to which they feel valued and included.

This publication gives you:

- results from our Freedom of Information request
- background to our research about the experience of BME staff in the NHS
- information about the Workplace Race Equality Standard in the NHS.

This guide has been prepared for members of the Royal College of Midwives (RCM). For information on becoming a member, please visit www.rcm.org.uk

This publication is part of the RCM's Equality publications series. If you have any questions about this publication or any other publications in the equality series, please contact Amy Leversidge, by emailing amy.leversidge@rcm.org.uk



¹ The Snowy White Peaks of the NHS: a survey of discrimination in governance and leadership and the potential impact on patient care in London and England' (2014) Roger Kline, Middlesex University London
² Making the Difference: diversity and inclusion in the NHS (2015) Michael West, Jeremy Dawson and Mandip Kaur, The King's Fund



Results from our Freedom of Information request 2010 to 2015

We carried out a Freedom of Information (FOI) request in July 2011 about the numbers of midwives in London facing disciplinary proceedings by ethnicity. Our report 'Royal College of Midwives Freedom of Information Request: Midwives and Disciplinary Proceedings in London' was published in November 2012.

The report revealed that a disproportionate number of BME midwives faced disciplinary proceedings, and a disproportionate number of BME midwives received a more severe outcome from the disciplinary proceedings. The main findings of the report were that 60.2% of the midwives who faced disciplinary proceedings were from a BME background, even though only 32.0% of all the midwives in London were from a BME background. The report also found that 10 midwives were dismissed between July 2010 and June 2011 and every midwife who was dismissed was from a BME background, and that 15.4% of the BME midwives who faced disciplinary proceedings during the time period were dismissed.

We repeated the FOI request for the years since the original report. This report sets out our findings for 2012, 2013, 2014 and 2015 compared with the original information from 2011. Sadly, our follow-up report reveals significant issues with BME midwives and disciplinary proceedings in the NHS.

The findings are set out in more detail in the following pages but here is a summary.

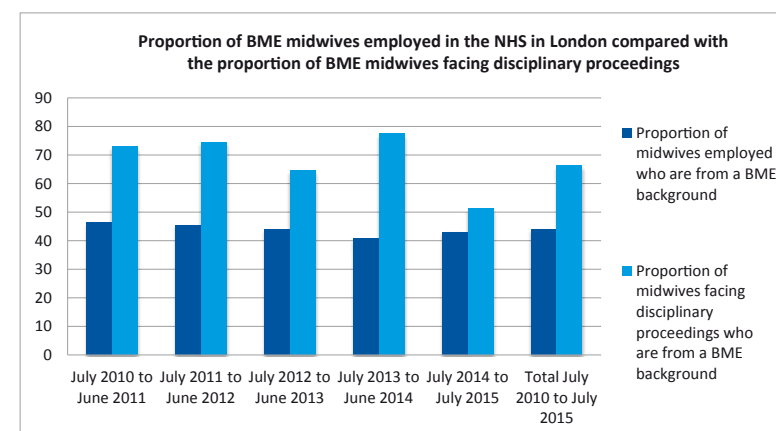
- Over the five years of the FOI, BME midwives were disproportionately more likely to face disciplinary proceedings. 44.1% of the midwives employed in London were from a BME background and 66.4% of the midwives facing disciplinary proceedings were from black and minority ethnic groups.
- Over the five years, a higher proportion of BME midwives than white midwives were suspended while they were facing disciplinary proceedings. Overall, from July 2010 to June 2015, 19.6% of the BME midwives who were facing disciplinary proceedings were suspended, compared with 6.3% of the white midwives who faced disciplinary proceedings.
- Over the five years, there was no trend or overall difference in the comparison of BME midwives to white midwives who had no further action taken, received a first written warning or received a final written warning as an outcome of their disciplinary proceedings.
- Over the five years, a higher proportion of BME midwives than white midwives were dismissed while they were facing disciplinary proceedings. During the five-year period, 38 midwives were dismissed and 37 were from a BME background. Out of the 37 BME midwives dismissed, 32 were black or black British. Overall, from July 2010 to June 2015, 13.2% of the BME midwives who faced disciplinary proceedings were dismissed, compared with 0.7% of the white midwives who faced disciplinary proceedings.

Total number of midwives facing disciplinary proceedings

The table and chart below show the proportion of midwives employed in the NHS who are from a BME background, compared with the proportion of midwives facing disciplinary proceedings who are from a BME background.

The results of the FOI show that a disproportionate number of BME midwives faced disciplinary proceedings. Overall, in total for the five years, 44.1% of the midwives employed in London were from a BME background compared with 66.4% of the midwives who faced disciplinary proceedings who were from a BME background.

	Proportion of midwives employed who are from a BME background	Proportion of midwives facing disciplinary hearings who are from a BME group
July 2010 to June 2011	46.3%	73.1%
July 2011 to June 2012	45.5%	74.5%
July 2012 to June 2013	44.1%	64.6%
July 2013 to June 2014	40.8%	77.5%
July 2014 to July 2015	43.0%	51.3%
Total for July 2010 to July 2015	44.1%	66.4%

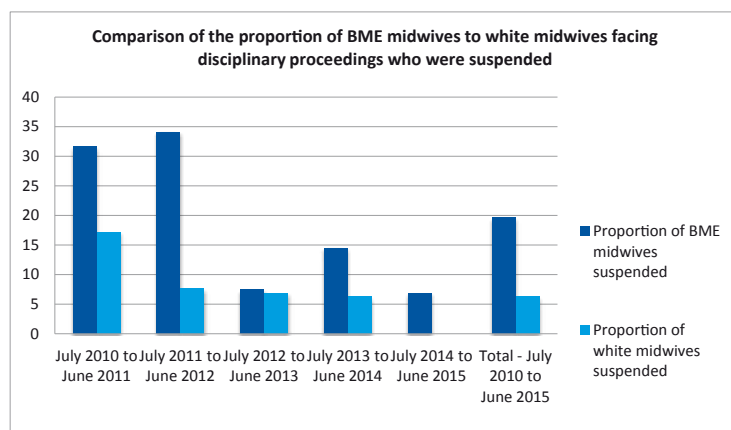


Suspension

The table and chart below show the proportion of BME midwives who were suspended when facing disciplinary proceedings compared with the proportion of white midwives who were suspended when facing disciplinary proceedings.

The results of the FOI show that for every year, a higher proportion of BME midwives than white midwives were suspended while they were facing disciplinary proceedings. Overall, from July 2010 to June 2015, 19.6% of the BME midwives who faced disciplinary proceedings were suspended, compared with 6.3% of the white midwives who faced disciplinary proceedings.

	Proportion of BME midwives who faced disciplinary proceedings who were suspended	Proportion of white midwives who faced disciplinary proceedings who were suspended
July 2010 to June 2011	31.6%	17.2%
July 2011 to June 2012	34.1%	7.7%
July 2012 to June 2013	7.5%	6.9%
July 2013 to June 2014	14.5%	6.3%
July 2014 to June 2015	6.9%	0%
Total for July 2010 to June 2015	19.6%	6.3%

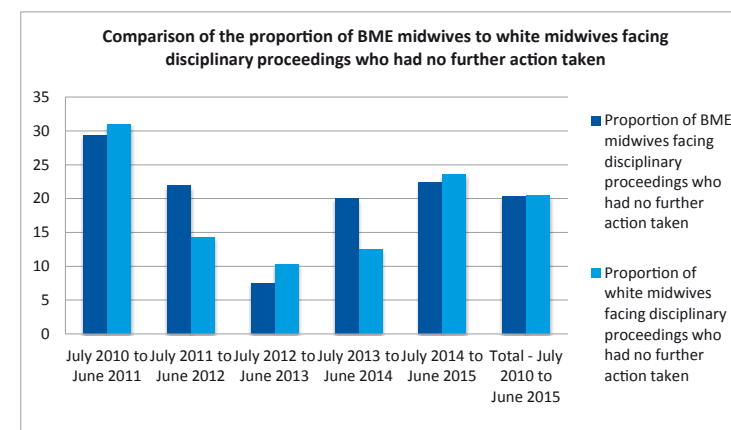


No further action

The table and chart below show the proportion of BME midwives who had no further action taken when facing disciplinary proceedings compared with the proportion of white midwives who had no further action taken when facing disciplinary proceedings.

The results of the FOI show that there was no trend in the comparison of BME midwives to white midwives who had no further action taken as an outcome of their disciplinary proceedings. Overall, from July 2010 to June 2015, 20.3% of the BME midwives who faced disciplinary proceedings had no further action taken compared with 20.4% of the white midwives who faced disciplinary proceedings.

	Proportion of BME midwives facing disciplinary proceedings who had no further action taken	Proportion of white midwives facing disciplinary proceedings who had no further action taken
July 2010 to June 2011	29.4%	31%
July 2011 to June 2012	21.9%	14.3%
July 2012 to June 2013	7.5%	10.3%
July 2013 to June 2014	20%	12.5%
July 2014 to June 2015	22.4%	23.6%
Total for July 2010 to June 2015	20.3%	20.4%

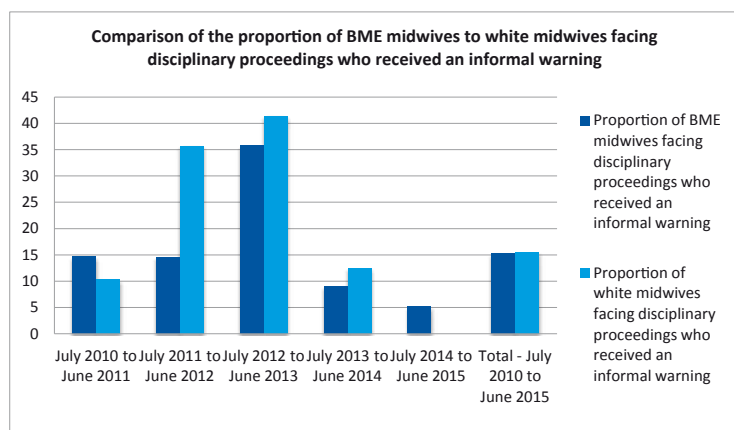


Informal warning

The table and chart below show the proportion of BME midwives who received an informal warning when facing disciplinary proceedings compared with the proportion of white midwives who received an informal warning when facing disciplinary proceedings.

The results of the FOI show that there was no trend in the comparison of BME midwives with white midwives who received an informal warning as an outcome of their disciplinary proceedings. Overall, from July 2010 to June 2015, 15.3% of the BME midwives who faced disciplinary proceedings had an informal warning compared with 15.5% of the white midwives who faced disciplinary proceedings.

	Proportion of BME midwives facing disciplinary proceedings who received an informal warning	Proportion of white midwives facing disciplinary proceedings who received an informal warning
July 2010 to June 2011	14.7%	10.3%
July 2011 to June 2012	14.6%	35.7%
July 2012 to June 2013	35.8%	41.4%
July 2013 to June 2014	9.1%	12.5%
July 2014 to June 2015	5.2%	0%
Total for July 2010 to June 2015	15.3%	15.5%

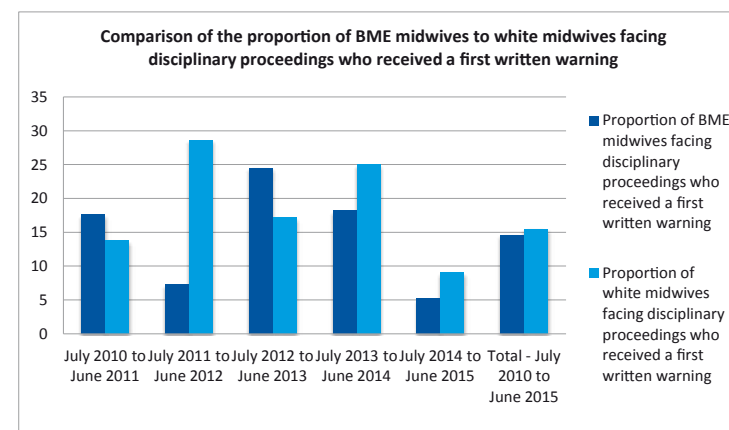


First written warning

The table and chart below show the proportion of BME midwives who received a first written warning when facing disciplinary proceedings compared with the proportion of white midwives who received a first written warning when facing disciplinary proceedings.

The results of the FOI show that there was no trend in the comparison of BME midwives with white midwives who received a first written warning as an outcome of their disciplinary proceedings. Overall, from July 2010 to June 2015, 14.6% of the BME midwives who faced disciplinary proceedings had a first written warning compared with 15.5% of the white midwives who faced disciplinary proceedings.

	Proportion of BME midwives facing disciplinary proceedings who received a first written warning	Proportion of white midwives facing disciplinary proceedings who received a first written warning
July 2010 to June 2011	17.6%	13.8%
July 2011 to June 2012	7.3%	28.6%
July 2012 to June 2013	24.5%	17.2%
July 2013 to June 2014	18.2%	25%
July 2014 to June 2015	5.2%	9.1%
Total for July 2010 to June 2015	14.6%	15.5%



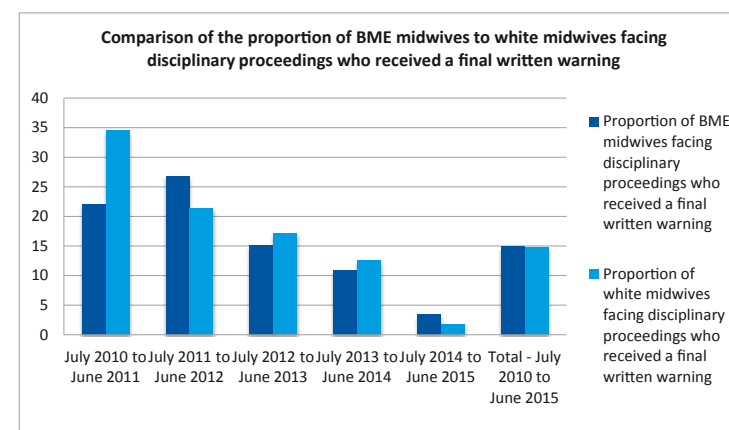


Final written warning

The table and chart below show the proportion of BME midwives who received a final written warning when facing disciplinary proceedings compared with the proportion of white midwives who received a final written warning when facing disciplinary proceedings.

The results of the FOI show that there was no trend in the comparison of BME midwives with white midwives who received a final written warning as an outcome of their disciplinary proceedings. Overall, from July 2010 to June 2015, 14.9% of the BME midwives who faced disciplinary proceedings had a final written warning compared with 14.8% of the white midwives who faced disciplinary proceedings.

	Proportion of BME midwives facing disciplinary proceedings who received a final written warning	Proportion of white midwives facing disciplinary proceedings who received a final written warning
July 2010 to June 2011	22.1%	34.5%
July 2011 to June 2012	26.8%	21.4%
July 2012 to June 2013	15.1%	17.2%
July 2013 to June 2014	10.9%	12.5%
July 2014 to June 2015	3.4%	1.8%
Total for July 2010 to June 2015	14.9%	14.8%

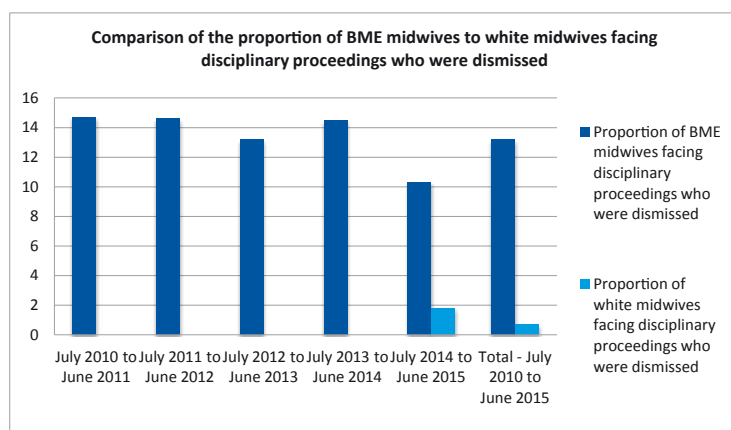


Dismissed

The table and chart below show the proportion of BME midwives who were dismissed when facing disciplinary proceedings compared with the proportion of white midwives who were dismissed when facing disciplinary proceedings.

The results of the FOI showed that every year, apart from July 2014 to June 2015, all the midwives who were dismissed were from a BME background. During the five-year period, 38 midwives were dismissed and 37 were from a BME background. Out of the 37 BME midwives who were dismissed, 32 were black or black British. Overall, from July 2010 to June 2015, 13.2% of the BME midwives who faced disciplinary proceedings were dismissed compared with 0.7% of the white midwives who faced disciplinary proceedings.

	Proportion of BME midwives facing disciplinary proceedings who were dismissed	Proportion of white midwives facing disciplinary proceedings who were dismissed
July 2010 to June 2011	14.7%	0%
July 2011 to June 2012	14.6%	0%
July 2012 to June 2013	13.2%	0%
July 2013 to June 2014	14.5%	0%
July 2014 to June 2015	10.3%	1.8%
Total for July 2010 to June 2015	13.2%	0.7%



Background to our research – the experience of BME staff in the NHS

Our research is consistent with previous research about the experience of BME staff working in the NHS. Previous research has found that BME staff are more likely to face harassment and bullying in the workplace and a disproportionate number of BME staff face disciplinary proceedings in the NHS. Research also shows that when there is evidence of high levels of discrimination of BME staff in the NHS, this can lead to negative outcomes for patients.

As well as our research, there are many research studies that have shown the negative experiences of BME staff in the NHS, including the following.

- In 2004 the Institute of Employment Studies published a report that found that midwives report more incidents of harassment, including verbal abuse and racial abuse, than any other groups of workers in the NHS. (See note ³ below.)
- In 2005, a report published by the Valleys Race Equality Council and the University of Glamorgan Business School on workplace bullying found that BME staff are five times more likely to suffer bullying in the workplace than their white colleagues. (See note ⁴ below.)
- In 2009, a report published by the Aston Business School that linked NHS staff survey data to patient survey data found that the staff survey item that was most consistently linked to patient survey scores was discrimination, in particular discrimination on the basis of ethnic background. They found that high levels of bullying, harassment and abuse against staff related to negative patient experiences. (See note ⁵ below.)
- In March 2010, the Centre for Inclusion and Diversity at the University of Bradford carried out research into the involvement of BME staff in NHS disciplinary proceedings. The research, 'The Involvement of Black and Minority Ethnic Staff in NHS Disciplinary Proceedings' (see note ⁶ below) which was commissioned by NHS Employers and the NHS Institute for Innovation and Improvement, found that BME staff were almost twice as likely to be disciplined compared with their white colleagues, and BME staff employed by acute, primary-care, mental-health and learning disability and care trusts were significantly over-represented in disciplinary proceedings. The research also investigated issues relating to collecting disciplinary information, issues relating to management practices, organisational culture, support networks and the behaviours and attitudes of staff members.

³ 'Safety, Health and Equality at Work' Labour Research Department April 2012

⁴ 'Safety, Health and Equality at Work' Labour Research Department April 2012

⁵ 'Does the experience of staff working in the NHS link to the patient experience of care? An analysis of links between the 2007 acute trust inpatient and NHS staff surveys.' Jeremy Dawson, Aston Business School, July 2009

⁶ The Involvement of Black and Minority Ethnic Staff in NHS Disciplinary Proceedings (2010) University of Bradford Centre for Inclusion and Diversity

- The Francis Report (see note ⁷ below) found further confirmation that discrimination against BME staff directly affects patient care and safety. The report found that 19.3% of BME staff said they were more likely to be ignored by management compared with 14.7% of white staff. 40.7% of BME staff said they were less satisfied at work compared with 27% of white staff. 21% of BME staff were more likely to be victimised by management compared with 12.5% of white staff. The Francis Report also found that only 3% of BME staff were praised by management after raising a concern compared with 7.2% of white staff, and 24% of BME staff did not raise a concern for fear of victimisation compared with 13% of white staff.
- In 2014, Middlesex University published the report: 'The Snowy White Peaks of the NHS: a survey of discrimination in governance and leadership and the potential impact on patient care in London and England' (see note ⁸ below). The report set out the findings of a survey of the leadership of NHS trusts in London to assess the progress of the 2004 Race Equality Plan. The report concludes that the NHS needs a change of culture and leadership style in relation to the way BME staff are treated.
- The report 'Making the Difference: diversity and inclusion in the NHS' by The King's Fund (see note ⁹ below) by the King's Fund analyses information from the NHS Staff Survey to assess the scale of discrimination against BME staff in the NHS. It concludes that there is a clear and compelling case to develop a more diverse and effective NHS leadership.

This is important because the research also shows that how NHS staff are treated has a direct effect on patient care. When people are discriminated against it can lead to feelings of disillusionment, unhappiness, a lack of confidence, anger, a lack of belief in the system, sadness, a lack of engagement with their work and resentment. It is little wonder that when NHS staff feel uncared for in this way it affects the care they are able to provide.

The report 'Employee Engagement and NHS Performance' by Michael West and Jeremy Dawson (see note ¹⁰ below) found that patient satisfaction is highest in NHS trusts that have clear goals at every level of the organisation. Where staff have clarity of purpose they provide good-quality care. Leadership by senior managers and immediate managers helps to provide clarity of purpose and it is not surprising that, when staff see their leaders in a positive light, this is strongly related to patients' opinions of the quality of care they receive. There is a spiral of positivity in the best-performing NHS trusts. The extent to which staff are committed to their organisations and to

which they recommend their trust as a place to receive treatment and to work is strongly related to patient outcomes and patient satisfaction. There is a sense of trust and respect in these top-performing trusts.

The authors state:

"In general terms, the more positive the experiences of staff within an NHS trust, the better the outcomes for that trust. Engagement has many significant associations with patient satisfaction, patient mortality, infection rates, Annual Health Check scores, as well as staff absenteeism and turnover. The more engaged staff members are, the better the outcomes for patients and the organisation more generally. In summary, the findings make it clear that cultures of engagement, positivity, caring, compassion and respect for all – staff, patients and the public – provide the ideal environment within which to care for the health of the nation. When we care for staff, they can fulfil their calling of providing outstanding professional care for patients."

NHS England agree that there is a link between ethnic discrimination against staff and patient satisfaction. They give evidence that the higher the proportion of staff from a BME background who report experiencing discrimination at work in the previous 12 months, the lower the levels of patient satisfaction. There is a link between the levels of discrimination and the levels of patients reporting that they get their questions answered and they have confidence and trust in the staff. NHS England have found a link between discrimination against staff and patients feeling that staff talk in front of them as if they weren't there, that they were not as involved as they wanted to be in decisions about their care and treatment, and that they could not find a member of hospital staff to talk about their worries and fears. Most importantly, they did not feel they were treated with respect and dignity while in hospital. The experience of BME staff is a very good guide to levels of respect and care within NHS organisations, which is why the Workforce Race Equality Standard was introduced.

In short, to be able to provide a truly inclusive service, high-quality care for women and their families, and an NHS which treats all service users with respect, dignity and compassion, NHS workplaces need to be inclusive and the workforce need to be treated with respect, dignity and compassion. Investment in NHS staff is an investment in NHS care.

⁷ Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry (2013) Robert Francis QC

⁸ The Snowy White Peaks of the NHS: a survey of discrimination in governance and leadership and the potential impact on patient care in London and England' (2014) Roger Kline, Middlesex University London

⁹ Making the Difference: diversity and inclusion in the NHS (2015) Michael West, Jeremy Dawson and Mandip Kaur, The King's Fund

¹⁰ 'Employee Engagement and NHS Performance' (2012) Michael West and Jeremy Dawson, The King's Fund

The Workforce Race Equality Standard

Following the reports that have highlighted differences in the number of BME people in senior leadership positions across the NHS as well as lower levels of well-being among people from BME backgrounds working in the NHS, the Equality and Diversity Council announced action to make sure that people from a BME background have equal access to career opportunities and receive fair treatment in the workplace.

The Equality and Diversity Council (EDC) agreed that the Workforce Race Equality Standard (WRES) would come into force in 2015. The WRES will, for the first time, require NHS organisations (which together employ 1.4 million staff) to demonstrate progress against a number of indicators of workforce equality, including a specific indicator to address the low levels of black and minority ethnic (BME) representation on NHS organisations’ executive boards.

There are nine indicators in the WRES, outlined in the table below. The WRES should allow organisations to highlight any differences between the experience and treatment of white staff and BME staff in the NHS, with a view to closing the gap.



Workforce Race Equality Standard indicators	
Workforce indicators	
For each of these workforce indicators, the WRES compares the indicators for white and BME staff.	
1.	Percentage of BME staff in bands 8 to 9, very senior managers (including executive board members and senior medical staff) compared with the percentage of BME staff in the overall workforce
2.	Relative likelihood of BME staff being appointed from a shortlist of potential candidates, across all posts, compared with that of white staff being appointed
3.	Relative likelihood of BME staff entering the formal disciplinary process, compared with that of white staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation
4.	Relative likelihood of BME staff accessing non-compulsory training and continuing professional development as compared with white staff
National NHS staff survey findings	
For each of these staff survey indicators, the WRES compares the indicators for each survey question against the response for white and BME staff.	
5.	Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months
6.	Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months
7.	Percentage of staff believing that their NHS trust provides equal opportunities for career progression or promotion
8.	Percentage of staff that have personally experienced discrimination at work from a manager, team leader or colleagues
Boards	
9.	Boards are expected to be broadly representative of the population they serve

The Care Quality Commission (CQC) will include inspecting progress against the WRES in its inspection schedule. Each clinical commissioning group (CCG) will need to show that their providers are putting the WRES into practice.

Equality Delivery System (EDS2)

Alongside the WRES, the **Equality Delivery System (EDS2)** is also mandatory for all NHS provider organisations. This is a toolkit which aims to help organisations improve the services they provide for their local communities and provide better working environments for all groups. It is currently used voluntarily across the NHS

The role for RCM workplace representatives

As part of our equality publications series we have produced guidance called 'Equality Essentials'. This gives you information about the Equality Act, equality work in the NHS and what RCM workplace representatives can do when supporting a member.

Further information

Royal College of Midwives Freedom of Information Request: Midwives and Disciplinary Proceedings in London (2012) The RCM (<https://www.rcm.org.uk/briefings-and-reports>)

So you want to be a RCM Workplace Representative (2015) The RCM (<https://www.rcm.org.uk/sites/default/files/WPR%20A5%20Booklet%20January%202015.pdf>)

RCM Leadership Resources (2015) The RCM (<https://www.rcm.org.uk/learning-and-career/learning-support/leadership>)

i-learn and i-folio (2015) The RCM (<http://www.ilearn.rcm.org.uk/my/>)

NHS Workforce Race Equality Standard (2015) (<https://www.england.nhs.uk/about/gov/equality-hub/equality-standard/>)

Making the Difference: Diversity and Inclusion in the NHS (2015) Michael West, Jeremy Dawson and Mandip Kaur, The King's Fund (<https://www.england.nhs.uk/wp-content/uploads/2015/11/making-the-difference.pdf>)

Safety, Health and Equality at Work (2012) Labour Research Department (<http://www.lrdpublications.org.uk/publications.php?pub=BK&iss=1612>)

Employee Engagement and NHS Performance (2012) Michael West and Jeremy Dawson, The King's Fund (<http://www.kingsfund.org.uk/sites/files/kf/employee-engagement-nhs-performance-west-dawson-leadership-review2012-paper.pdf>)

Does the Experience of Staff Working in the NHS Link to the Patient Experience of Care? An Analysis of Links between the 2007 Acute Trust Inpatient and NHS Staff Surveys.'

(2009) Jeremy Dawson, Aston Business School (https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/215457/dh_129662.pdf)

The Involvement of Black and Minority Ethnic Staff in NHS Disciplinary Proceedings (2010) University of Bradford Centre for Inclusion and Diversity

The Snowy White Peaks of the NHS: A Survey of Discrimination in Governance and Leadership and the Potential Impact on Patient Care in London and England (2014) Roger Kline Middlesex University London (http://www.mdx.ac.uk/__data/assets/pdf_file/0012/59799/The-snowy-white-peaks-of-the-NHS.pdf)

Leading by Example: The Race Equality Opportunity for NHS Provider Boards (2014) NHS Providers (https://www.nhsproviders.org/media/1199/nhsp_race_equality_report.pdf)

The NHS Leadership Academy (<http://www.leadershipacademy.nhs.uk/>)

Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry (2013) Robert Francis QC (<http://webarchive.nationalarchives.gov.uk/20150407084003/http://www.midstaffpublicinquiry.com/report>)

Appendix one: Freedom of information request results

Total 2010 to 2011	Midwives working		Facing disciplinary proceedings		Suspended		Outcome unknown		No further action		Informal warning		First written warning		Final written warning		Dismissed		
	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	
Asian and Asian British	182	4.3	3	2.8	2	66.7					3	100							
Black and black British	1348	32	65	60.2	22	33.9	10	15.3		17	26.2	4	6.2	11	16.9	13	20	10	15.4
Chinese	90	2.1	1	0.9						1	100								
Mixed	98	2.3	3	2.8	1	33.3							1	33.3	2	67.7			
White	2265	53.7	29	26.9	5	17.2	3	10.3		9	31	3	10.3	4	13.8	10	34.5		
Other	95	2.3	4	3.7			1	25		1	25	2	50						
Unknown	139	3.3	3	2.8			1	33.3		1	33.3	1	33.3						

In total, 21 out of 24 trusts in London responded to the FOI.

Total 2011 to 2012	Midwives working		Facing disciplinary proceedings		Suspended		Outcome unknown		No further action		Informal warning		First written warning		Final written warning		Dismissed		
	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	
Asian and Asian British	89	3.5	2	3.6							1	50			1	50			
Black and black British	797	31.3	35	63.6	12	34.3	6	17.1		9	25.7	5	14.3	3	8.6	7	20	5	14.3
Chinese	59	2.3	2	3.6	1	50									2	100			
Mixed	68	2.7	1	1.8	1	100									1	100	1	100	
White	1387	54.5	14	25.5	1	7.7				2	14.3	5	35.7	4	28.6	3	21.4		
Other	49	1.9	0																
Unknown	95	3.7	1	1.8															

In total, 14 out of 21 trusts in London responded to the FOI.

Total 2012 to 2013	Midwives working		Facing disciplinary proceedings		Suspended		Outcome unknown			No further action		Informal warning		First written warning		Final written warning		Dismissed	
	Number	%	Number	%	Number	%	Number	%		Number	%	Number	%	Number	%	Number	%	Number	%
Asian and Asian British	96	3.7	4	4.9								2	50	1	25	1	25		
Black and black British	765	30.1	39	47.6	3	7.8	2	5.1		4	10.3	13	33.3	11	28.2	4	10.3	5	12.8
Chinese	52	2	2	2.2								1	50			1	50		
Mixed	70	2.8	3	3.7	1	25						1	33.3	1	33.3			1	33.3
White	1422	55.9	29	35.4	2	6.9	4	13.8		3	10.3	12	41.4	5	17.2	5	17.2		
Other	51	2	2	2.2												1	50	1	50
Unknown	88	3.5	3	3.7								2	66.7			1	33.3		

In total, 14 out of 21 trusts in London responded to the FOI.

Total 2013 to 2014	Midwives working		Facing disciplinary proceedings		Suspended		Outcome unknown			No further action		Informal warning		First written warning		Final written warning		Dismissed	
	Number	%	Number	%	Number	%	Number	%		Number	%	Number	%	Number	%	Number	%	Number	%
Asian and Asian British	80	2.8	3	4.2	1	33.3	1	33.3						1	33.3			1	33.3
Black and black British	790	27.6	44	62	7	15.9	11	25		9	20.5	4	9.1	7	15.9	6	13.6	7	15.9
Chinese	37	1.3	2	2.8						1	50	1	50						
Mixed	86	3	3	4.2			2	66.7						1	33.3				
White	1694	59.2	16	22.5	1	6.3	6	37.5		2	12.5	2	12.5	4	25	2	12.5		
Other	56	2	1	1.4						1	100								
Unknown	120	4.2	2	2.8			1	50						1	50				

In total, 15 out of 21 trusts in London responded to the FOI.

Total 2014 to 2015	Midwives working		Facing disciplinary proceedings		Suspended		Outcome unknown		No further action		Informal warning		First written warning		Final written warning		Dismissed		
	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	
Asian and Asian British	129	4.3	5	4.4			4	80		1	20								
Black and black British	786	26.3	41	36.3	3	7.3	19	46.3		10	24.4	3	7.3	3	7.3	1	2.4	5	12.2
Chinese	46	1.5	1	0.9			1	100											
Mixed	87	2.9	2	1.8	1	50											1	50	
White	1704	57	55	48.7			35	63.6		13	23.6			5	9.1	1	1.8	1	1.8
Other	123	4.1	3	2.7			1	33.3		1	33.3								
Unknown	116	3.9	6	5.3			4	66.7		1	16.7					1	16.7		
In total, 15 out of 19 trusts in London responded to the FOI.																			

Note:

Some trusts that didn't respond to the FOI did so because of privacy reasons.
 The number of trusts in London with maternity units decreased due to trusts merging.

