Workforce Race Equality Standard

REPORTING TEMPLATE (Revised 2016)

Template for completion

Name of organisation

NHS Wakefield CCG

Date of report: month/year

August 2019

Name and title of Board lead for the Workforce Race Equality Standard

Ruth Unwin, Director of Corporate Affairs

Name and contact details of lead manager compiling this report

Esther Short, HR & OD Business Partner

Names of commissioners this report has been sent to (complete as applicable)

NA

Name and contact details of co-ordinating commissioner this report has been sent to (complete as applicable)

Esther Short, HR Business Partner. esther.short@nhs.net

Unique URL link on which this Report and associated Action Plan will be found

This report has been signed off by on behalf of the Board on (insert name and date)

Ruth Unwin, Director of Corporate Affairs

Publications Gateway Reference Number: 05067

Report on the WRES indicators

1. Background narrative

a. Any issues of completeness of data

There is no mechanism currently for recording non mandatory training and CPD. Data included relates to the staff survey responses, which may include mandatory training. Due to the low numbers we are unable to publish the data relating to the staff survey where it is disaggregated by ethnicity.

b. Any matters relating to reliability of comparisons with previous years

There is no mechanism currently for recording non mandatory training and CPD. Data included relates to the staff survey responses, which may include mandatory training. Due to the low numbers we are unable to publish the data relating to the staff survey where it is disaggregated by ethnicity.

2. Total numbers of staff

a. Employed within this organisation at the date of the report

There are 211 directly employed staff as at 31 March 2019.

b. Proportion of BME staff employed within this organisation at the date of the report

10.75% BME staff (including Governing Body Members) and 10.42% BME staff (excluding Governing Body Members). This compares with a Wa

3. Self reporting

a. The proportion of total staff who have self–reported their ethnicity

100% (due to self-reporting functionality)

b. Have any steps been taken in the last reporting period to improve the level of self-reporting by ethnicity

Employees have direct access to their personal information on the Electronic Staff Record via Employee Self Service and are encouraged to update their personal information.

c. Are any steps planned during the current reporting period to improve the level of self reporting by ethnicity

Employees have direct access to their personal information on the Electronic Staff Record via Employee Self Service and are encouraged to update their personal information.

4. Workforce data

a. What period does the organisation's workforce data refer to?

As at 31st March 2019

5. Workforce Race Equality Indicators

Please note that only high level summary points should be provided in the text boxes below – the detail should be contained in accompanying WRES Action Plans.

	Indicator	Data for reporting year	Data for previous year	Narrative – the implications of the data and any additional background explanatory narrative	Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective
	For each of these four workforce indicators, compare the data for White and BME staff				
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. Organisations should undertake this calculation separately for non-clinical and for clinical staff.	The percentage for BME staff is as follows in each of the AfC Bands (Non-clinical): Band 2 – N/A Band 3 – 23.8%	The percentage for BME staff is as follows in each of the AfC Bands (Non-clinical): Band 2 – 33.3% Band 3 – 30.8%	Within the Wakefield District 4.5% (excluding the White categories) of the population are from a BME background, in comparison to 10.42% of NHS Wakefield CCG staff.	
2	Relative likelihood of staff being appointed from shortlisting across all posts.	Likelihood of White staff being appointed from shortlisting = 0.47 Likelihood of BME staff being appointed from shortlisting = 0.54	Likelihood of White staff being appointed from shortlisting = 0.52 Likelihood of BME staff being appointed from shortlisting = 0.5	NHS Wakefield CCG conduct Line Manager Essentials training which is a mandatory requirement. Recruitment and Selection Training for recruiting managers has been conducted in 2019 with sessions planned for 2020.	The CCG has planned Line Management Essentials training session through out 2020
3	Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation. This indicator will be based on data from a two year rolling average of the current year and the previous year.	There were 8 formal disciplinary processes within the period. The employees were not from a BME background.	There was one formal disciplinary process within the period. This employee was not from a BME background.		The CCG will continue to monitor employee relations cases and subsequent formal disciplinary action and equality data of those employees involved in the process.
4	Relative likelihood of staff accessing non-mandatory training and CPD.	81% of staff reported having a development review in last 12 months compared to 87% nationally 93% stated	94% of staff reported having a development review in last 12 months compared to 87% nationally 91% stated	The CCG updated the Learning and Development request form to include equality monitoring information.	The CCG will continue to monitor the completion of PDRs for all staff and collate any formal learning and development requests that come out of these reviews to include equality monitoring information. The CCG have introduced a new PDR form for all staff to use which should ensure that all non-mandatory training and CPD is captured

Report on the WRES indicators, continued

	Indicator	Data for reporting year	Data for previous year	Narrative – the implications of the data and any additional background explanatory narrative	Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective
	National NHS Staff Survey indicators (or equivalent) For each of the four staff survey indicators, compare the outcomes of the responses for White and BME staff.				
5	KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.	White BME	White BME	For this year 9% of staff have experienced harassment, bullying or abuse in last 12 months compared to 92% for CCGs nationally. 94% of staff had not experienced harassment,	NHS Wakefield CCG have developed and are currently delivering a 'Bullying and Harassment Prevention' training session, supported by the Executive Team, to all employees which includes the following:
6	KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.	White BME	White BME	For this year 85% of staff have not experienced harassment, bullying or abuse in last 12 months from managers compared to 89% for CCGs nationally.	NHS Wakefield CCG will encourage all staff to complete the staff survey in 2019 to enable access to a breakdown of responses by ethnicity. The CCG is currently delivering a 'Bullying and Harassment Prevention' training session,
7	KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion.	White BME	White BME	For this year 82% of staff believed the CCG acts fairly with regards to career progression compared to 88% nationally. 79% of staff believed the CCG act fairly with	The CCG will continue to engage in staff focus groups to understand whether there is an interest amongst staff to create staff networks.
8	Q17. In the last 12 months have you personally experienced discrimination at work from any of the following? b) Manager/team leader or other colleagues	White BME	White BME	For the reporting year 92% of staff had not personally experienced discrimination at work compared to 94% nationally. No breakdown provided for BME staff due to low numbers.	The CCG will continue to actively promote the range of policies and procedures that the organisation have to support staff that may feel discriminated against, including the Dignity at Work Policy and the Grievance Policy.
	Board representation indicator For this indicator, compare the difference for White and BME staff.				
9	Percentage difference between the organisations' Board voting membership and its overall workforce.	The Governing Body has 5.88% of BME staff compared to 10.42% of the	The Governing Body has 12.5% of BME staff compared to 10.67% of the	Despite the governing Body members remaining the same, data quality updates in ESR account for the change in figures.	The CCG ensures that any recruitment campaigns for Lay members and members of the Governing Body are conducted in line with the CCGs open and transparent Recruitment and Selection process, outlined in the CCGs Policy.

Note 1. All provider organisations to whom the NHS Standard Contract applies are required to conduct the NHS Staff Survey. Those organisations that do not undertake the NHS Staff Survey are recommended to do so, or to undertake an equivalent.

Note 2. Please refer to the WRES Technical Guidance for clarification on the precise means for implementing each indicator.

6. Are there any other factors or data which should be taken into consideration in assessing progress?

The Action Plan for 2019/20 mirrors those actions and commitments identified on the Staff Survey Action Plan which contribute to the WRES and are uploaded to the CCG Website.

7. Organisations should produce a detailed WRES Action Plan, agreed by its Board. Such a Plan would normally elaborate on the actions summarised in section 5, setting out the next steps with milestones for expected progress against the WRES indicators. It may also identify the links with other work streams agreed at Board level, such as EDS2. You are asked to attach the WRES Action Plan or provide a link to it.

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