

Submitted to **Workforce Race Equality Standard (WRES) reporting template - 2017**  
Submitted on **2017-12-21 12:58:04**

## **Introduction**

### **1 Name of organisation**

**Name of organisation:**

NHS Doncaster Clinical Commissioning Group

### **2 Date of report**

**Month/Year:**

December 2017

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

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

Lisa Devanney - Associate Director of Human Resources and Corporate Services

### **4 Name and contact details of lead manager compiling this report**

**Name and contact details of lead manager compiling this report:**

Gareth Jones - Corporate Governance Manager

gareth.jones22@nhs.net

### **5 Names of commissioners this report has been sent to**

**Complete as applicable::**

N/A

## **Workforce Race Equality Standard reporting template**

### **6 Name and contact details of co-ordinating commissioner this report has been sent to**

**Complete as applicable.:**

N/A

### **7 Unique URL link on which this report and associated Action Plan will be found**

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

N/A

### **8 This report has been signed off by on behalf of the board on**

**Name::**

Lisa Devanney - Associate Director of Human Resources & Corporate Services

**Date::**

21 December 2017

## **Background narrative**

### **9 Any issues of completeness of data**

**Any issues of completeness of data:**

The CCG has given "due regard" in relation to the provision of data and the consideration of ensuring this is non-identifiable, and will report utilising the case law Brown Principles.

NHS Doncaster CCG has a small workforce, we are therefore unable to publish any data relating to formal or informal disciplinary action, bullying or harassment. As such the results from the NHS Staff Survey cannot be broken down by ethnicity due to the low numbers of employees.

### **10 Any matters relating to reliability of comparisons with previous years**

**Any matters relating to reliability of comparisons with previous years:**

Previous reporting in 2016 - 2017 included 121 new starters which includes staff TUPE'd in from a shared service. This report reflects the hosted service as

permanent employees of NHS Doncaster CCG. There has been no TUPE of colleagues in this current year and therefore new starters listed are directly employed and in permanent positions.

## Self reporting

### 11 Total number of staff employed within this organisation at the date of the report:

**Total number of staff employed within this organisation at the date of the report:**

176 staff employed. F.T.E 157.68

### 12 Proportion of BME staff employed within this organisation at the date of the report?

**Proportion of BME staff employed within this organisation at the date of the report:**

14 employees which equates to 8% of the workforce.

### 13 The proportion of total staff who have self reporting their ethnicity?

**The proportion of total staff who have self-reported their ethnicity:**

96.1% due to 7 employees not reported.

### 14 Have any steps been taken in the last reporting period to improve the level of self reporting by ethnicity?

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

As standard, all colleagues are asked to declare their ethnicity upon commencing in post. This is then managed by the ESR system via the employee self-service section. Capture takes place plus the facility for employee self service for staff to record change and update their personal records.

Where employees do not complete the box and leave this blank, the CCG actively request a response.

### 15 Are any steps planned during the current reporting period to improve the level of self reporting by ethnicity?

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

Please refer to question 14. No further steps are currently planned for 2017 - 2018.

Action taken re: where staff leave reporting blank we approach to obtain a response to ensure completeness and integrity of data.

## Workforce data

### 16 What period does the organisation's workforce data refer to?

**What period does the organisation's workforce data refer to?:**

12 December 2016 - 12 December 2017.

## Workforce Race Equality Indicators

**17 Percentage of staff in each salary range of £10k compared with the percentage of staff in the overall workforce. Very Senior Managers (VSM) salaries generally begin at £100k (including executive Board members). Organisations should undertake this calculation separately for non-clinical and for clinical staff.**

**Data for reporting year:**

Non Clinical Staff

White BME

B3 9.09% 1.7%

B4 11.36% 0.56%

B5 2.84% 0.56%

B6 6.82% 0%

B7 7.39% 0%

B8a 9.66% 0%

B8b 2.84% 0%

B8c 2.84% 0%

B8d 0% 0%

B9 1.14% 0%

IA01 0.57% 0%

WQ00 3.4% 0.57%

Clinical Staff

White BME

B5 4.55% 1.14%

B6 11.36% 0%

B7 4.55% 1.14%

B8a 3.41% 1.70%  
B8b 1.14% 0%  
B9 0.57% 0%  
VSM 1.14% 1.14%  
MQ00 1.14% MQ00 0.57%

**Data for previous year:**

Non Clinical:

Band 2 3.19% (3.19% White)  
Band 3 16.49% (15.58% White 0.91% BME)  
Band 4 9.57% (9.57% White)  
Band 5 6.91% (6.38% White 0.53% BME)  
Band 6 6.91% (6.91% White)  
Band 7 4.78% (4.78% White)  
Band 8a 9.57% (7.98% White 1.59% BME)  
Band 8b 2.66% (2.13% White)  
Band 8c 2.66% (2.66% White)  
Band 8d 1.06% (1.06% White)  
Band 9 0.53% (0.53% White)  
VSM 1.06% (1.06% White)  
Board 2.12% (0.53% White 0.53% BME)

Clinical:

Band 5 8.51% (6.92% White 1.59% BME)  
Band 6 10.63% (10.63% White)  
Band 7 5.85% (4.26% White 1.59% BME)  
Band 8a 1.59% (1.59% White)  
Band 8b 1.06% (1.06% White)  
Band 8c 1.06% (1.06% White)  
Band 9 0.53% (0.53% White)  
Board 4.78% (4.25% White 0.53% BME)  
Personal 2.12% (0.53% White)

**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:**

Both sets of data have a percentage of staff who did not wish to disclose their ethnicity. Where an individual leaves the field blank it is routine that the CCG would follow up to establish and indicator even where this then becomes the statement of non-disclosure.

This links to section 3.0 of EDS2, recruitment process is via NHS Jobs, and policy EQIA, for impact and to ensure equity of opportunity. Equality monitoring is on-going and renewed to provide indication for action. Reviews of Pay Progression, Grading Review, Study Leave and Induction, Mandatory & Statutory Training Policies have all been recently undertaken in 2017. Talent Management Procedure and PDR Process are currently under review.

**18 Relative likelihood of staff being appointed from shortlisting across all posts.**

**Data for reporting year:**

December 12, 2016 - December 12, 2017

15 New Starters  
None BME

Number of Shortlisted Applicants - White 19 BME 2  
Number of Appointed Applicants - White 15 BME 0  
Likelihood - White 0.79 (2 d.p) BME 0

**Data for previous year:**

12 New Starters including TUPE transferred staff, 7.4% from BME groups.

**The implications of the data and any additional background explanatory narrative:**

Equal opportunities are given to all staff. All CCG Policies ensure equity of opportunity for employees, and have due regard for equality impact assessment whilst ensuring the principles of Diversity are also supported.

**Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:**

N/A

**19 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.**

**Data for reporting year:**

Redacted - Nil Return

**Data for previous year:**

Redacted - Nil Return

**The implications of the data and any additional background explanatory narrative:**

In line with guidance which stipulates that data which could be individually identifiable cannot be published as a small organisation we are unable to publish details on any disciplinary action or formal processes that have or are currently taking place.

**Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:**

N/A

**20 Relative likelihood of staff accessing non-mandatory training and CPD.**

**Data for reporting year:**

All applications from all groups are approved and supported

BME Applications 14 Enrolments 13 Likelihood 0.93 (2dp)

White Applications 155 Enrolments 139 Likelihood 0.90 (2dp)

Note: this data can only report on any non-mandatory training that has been recorded in ESR.

**Data for previous year:**

All applications from all groups approved.

**The implications of the data and any additional background explanatory narrative:**

N/A

**Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:**

Link to section 3 of EDS 2

Review of Induction, Mandatory & Statutory Policy and Study Leave policies undertaken in 2017 including EQIA.

**Workforce Race Equality Indicators**

**21 KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.**

**White:**

Redacted

**BME:**

Redacted

**White:**

Redacted

**BME:**

Redacted

**The implications of the data and any additional background explanatory narrative:**

In line with guidance which stipulates that data which could be individually identifiable cannot be published as a small organisation we are unable to publish details on any disciplinary action or formal process taking place. Releasing my reasonably identify and individual.

**Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:**

Disciplinary Policy and Process reviewed 2017 with EQIA.

**22 KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.**

**White:**

Redacted

**BME:**

Redacted

**White:**

Redacted

**BME:**

Redacted

**The implications of the data and any additional background explanatory narrative:**

Please refer to response as at Q21.

**Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:**

Link to section 3.4 of EDS2: Equal Opportunities and Harassment and Bullying Policies both reviewed and updated in 2017 including EQIA.

In addition action plan developed from Staff Survey and Health and Well Being Surveys undertaken.

**23 KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion.**

**White:**

Redacted

**BME:**

Redacted

**White:**

Redacted

**BME:**

Redacted

**The implications of the data and any additional background explanatory narrative:**

N/A

**Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:**

Link to section 3.3 of EDS2: Talent Management Policy and PDR Process under review. Induction, Statutory and Mandatory Training Policy both reviewed and updated in 2017 including EQIA. Recruitment Process utilised via NHS Jobs to ensure equity of opportunity including internal posts.

In addition action plan developed from Staff Survey and Health and Well Being Surveys undertaken

**24 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:**

Redacted

**BME:**

Redacted

**White:**

Redacted

**BME:**

Redacted

**The implications of the data and any additional background explanatory narrative:**

Please refer to response at Q21

**Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:**

N/A

**Workforce Race Equality Indicators**

**25 Percentage difference between the organisations' Board voting membership and its overall workforce.**

**White:**

Redacted

**BME:**

Redacted

**White:**

Redacted

**BME:**

Redacted

**The implications of the data and any additional background explanatory narrative:**

Please refer to the response as at Question 21.

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:

N/A

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

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

N/A

**27 Organisations should produce a detailed WRES action plan, agreed by its board. It is good practice for this action plan to be published on the organisation's website, alongside their WRES data. Such a plan would elaborate on the actions summarised in this report, setting out the next steps with milestones for expected progress against the WRES indicators. It may also identify the links with other workstreams agreed at board level, such as EDS2. You are asked to provide a link to your WRES action plan in the space below.**

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 workstreams agreed at Board level, such as EDS2. You are asked to attach the WRES Action Plan or provide a link to it.:

Current EDS2 relates to year 2016-2017. Link is outlined on DCCG website.

New EDS2 to be created January 2018. Link will be published once completed.

Discussion will take place at the Engagement and Experience Committee early in 2018 to agree new objectives for the 2017 - 18 EDS2. These actions will then achieve previous objectives 1 & 2 from current year and new objectives will be identified.