Workforce Race Equality Standard

REPORTING TEMPLATE (Revised 2016)

Template for completion

Name of organisation

NHS Doncaster CCG

Date of report: month/year

December 2018

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

Lisa Devanney - Associate Director of Human Resources and Corporate Services

Name and contact details of lead manager compiling this report

Helen Harris- Head of Corporate Governance. helen.harris31@nhs.net

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

N/A

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

N/A

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

https://www.doncasterccg.nhs.uk/about-us/equality-diversity

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

Lisa Devanney- Associate Director of Human Resources & Corporate Services.

Publications Gateway Reference Number: 05067

Report on the WRES indicators

1. Background narrative

a. Any issues of completeness of data

The CCG has given "due regard" in relation to the provision of data and consideration of this being non-identifiable. The report given utilises 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 and the potential that individuals can be identified.

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

This report reflects the hosted / shared service as permanent employees of NHS Doncaster

2. Total numbers of staff

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

167

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

10.18%

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

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

Encourage and maintain the use of the self reporting functionality within ESR

4. Workforce data

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

01/01/2018 to 31/12/2018

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.	Clinical Band 5 20.0% Band 7 11.1% VSM(8a+) 30.0% NONCLINICAL; Band 3 13.6% Band 4 5.9%			
2	Relative likelihood of staff being appointed from shortlisting across all posts.	Wh - 19/42= BME - 3/7= 0.4 = factor of 1.25		Data extracted from ESR where recruitment has followed standard process. This factor score shows that a white candidate is 1.25 more likely to be appointed from shortlisting compared to a BME candidate. A factor of 1 would indicate an equal liklihood.	
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.			Data not provided. Please refer to point 1a.	
4	Relative likelihood of staff accessing non-mandatory training and CPD.	All applications from all groups approved	All applications from all groups approved	Data not collected in ESR so figures are not available.	

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	Data not provided. Please refer to point 1a.	
6	KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.	White BME	White BME	Data not provided. Please refer to point 1a.	
7	KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion.	White BME	White BME	Data not provided. Please refer to point 1a.	
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	Data not provided. Please refer to point 1a.	
	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.	3 of 15 = 20%		Data has been sourced manually as the required field is not populated accurately in ESR. This percentage is higher than the proportion of BME in the wider workforce.	

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?

N/A

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.

The Engagement and Experience Committee will discuss appropriate actions at its meeting on 7 February 2019 for delivery of WRES during 2019 - 20. These actions will support the achievement against the Equality and Diversity strategic objectives.

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