Workforce Race Equality Standard

REPORTING TEMPLATE (Revised 2016)

Template for completion

Name of organisation

NHS South Sefton CCG

Date of report: month/year

September 2020

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

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

NHS South Sefton CCG is the co-ordinating Commissioner

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.southseftonccg.nhs.uk/get-informed/equality-and-health-inequalities/

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

Finance and Resource Committee October 2020

Publications Gateway Reference Number: 05067

Report on the WRES indicators

1. Background narrative

a. Any issues of completeness of data

This report provides the baseline data for NHS South Sefton CCG as at 31st March 2020.
The workforce and human resources data presented within this report is from the standard NHS human resources system (the 'Electronic Staff Record (ESR) and the personal filing and note taking procedures used by a variety of human resources staff. From the inception of the CCG in April 2013 both the ESR and the human resources service have been managed on behalf of the CCG by a Commissioning Support Unit (CSU) human resources team (currently Midlands and Lancashire CSU) using a standard set of processes and procedures. All of the records within ESR are self-declared either through an application form via NHS Jobs or through an ESR paper application form which is manually inputted by human resources staff.

In line with the WRES technical guidance, all data reported is based on the proportion of the workforce and job applicants via NHS Jobs with a

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

The CCG's workforce is small in comparison to other NHS organisations so care needs to be taken when drawing conclusions from the information, as a small group of individuals can have a significant impact on percentages. However the report indicates good levels of reporting.

2. Total numbers of staff

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

151 employees as at 31st March 2020

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

3.97%

3. Self reporting

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

98.67%

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

The self-reporting rate is high so remedial action to improve it is not required. The CCG's finance and resource committee will however continue to monitor this.

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

N/A

4. Workforce data

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

Staff in Post at 31.03.2020

Recruitment between 01.04.2019 and 31.03.2020

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.	Band 2 0.00% Band 3 0.00% Band 4 0.00% Band 2 0.00% Band 3 0.00% Band 4 1.32% Band 5 0.66% Band 6 0.00%	Band 2 0.00% Band 3 0.00% Band 4 0.00% Band 2 0.00% Band 3 0.00% Band 4 0.00% Band 5 4.55% Band 6 0.00%	This figure is derived when workers whose details are held on ESR are included even though not all have employee status. The organisation does not employ clinical staff in a direct patient care clinical setting so no distinction between clinical and non-clinical staff has been made. The CGG overall BME workforce has increased from 3.52% to 3.97% which is above the Minority Ethnic	BME staff in the CCG workforce has increased to 3.97%. The equality workforce action plan to address issues including staff support provision and positive action initiatives. The CCG has a workforce equality and diversity plan – which is part of the equality objective plan 2019/23. Both were informed by EDS2 evidence. Progress against the workforce elements of the
2	Relative likelihood of staff being appointed from shortlisting across all posts.	BAME 9.09% WHITE 24.39%	BAME 16.67% WHITE 19.61%	Reduction in the likelihood of BME staff being appointed following the shortlisting process. It should be noted that all personally identifiable information including monitoring data is withheld from recruiting managers and this ensures objective shortlisting based on the job description and person specification only.	The CCG has a workforce equality and diversity plan – which is part of the equality objective plan 2019/23. Both were informed by EDS2 evidence. Progress against the workforce elements of the plan is monitored by the finance and resource committee who also receive details of the CCG ethnicity profile within the human resources management framework to consider alongside
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.	No BME staff and No white staff entered the formal disciplinary process.	No BME staff entered the formal disciplinary process as opposed to 1 white staff based on data from the	The CCG has no formal employee relations issues/ cases in general. No BME staff have entered formal disciplinary proceedings.	This is not an area of concern. The CCG has a workforce equality and diversity plan – which is part of the equality objective plan 2019/23. Both were informed by EDS2 evidence. Progress against the workforce elements of the plan is monitored by the finance and resource committee, who also receive details of the CCG ethnicity profile within the human resources
4	Relative likelihood of staff accessing non-mandatory training and CPD.	Not calculable	Not calculable	Not calculable as non-mandatory training is not currently managed and recorded centrally. See Section 1 - Background narrative.	It should be noted that the CCG encourage all staff to identify their training needs during the annual Personal Development Review/setting objectives meeting and regular 1:1s. All training opportunities are promoted to all staff via email. The CCG has a workforce equality and diversity plan. Progress against the workforce elements of the plan is monitored by the finance and resource

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 6% BME 0%	White Not calculable BME Not calculable	No BME staff reported experiencing harassment, bullying or abuse from patients, relatives of the public in the last 12 months compared to 6% white staff.	The staff survey baseline report did not highlight any race equality issues relating to this key indicator. The CCG will continue monitoring this as part of the future staff surveys.
6	KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.	White 6% BME 0%	White Not calculable BME Not calculable	No BME staff reported experiencing harassment, bullying or abuse from staff in the last 12 months compared to 6% white staff.	The staff survey did not highlight any race equality issues relating to this key indicator. The CCG has appointed Freedom to Speak Up Guardians (FTsU) to support staff to raise concerns.
7	KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion.	White Not calculable BME Not calculable	White Not calculable BME Not calculable	Question not visible in reporting function to breakdown responses.	The CCG will continue monitoring this as part of future staff surveys. The CCG has a workforce equality and diversity plan. Progress against the workforce elements of the plan is monitored by the finance and resource
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 5% BME 0%	White Not calculable BME Not calculable	No BME staff reported personally experiencing discrimination at work from manager/ team leader or other colleagues in the last 12 months compared to 5% white staff.	The staff survey did not highlight any race equality issues relating to this key indicator. Such complaints would be taken seriously and investigated under the appropriate human resource policies. We will continue monitoring this
	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.	White: -12.9% BME: 5.1%	10.76% BME and overall workforce 5.63% white.	The CCG's BME workforce (based on all workforce on ESR) is 3.97%. Reduction in the BME voting membership noted from the previous year.	CCG has a workforce equality and diversity plan – which is part of the equality objective plan 2019/23. Both were informed by EDS2 evidence. Progress against the workforce elements of the plan is monitored by the finance and resource

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 CCG's workforce is small in comparison to other NHS organisations so care needs to be taken when drawing conclusions from the information, as a small group of individuals can have a significant impact on percentages.

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 CCG has a workforce equality and diversity plan – which is part of the CCG's equality objective plan. Both were informed by EDS2 evidence and WRES findings. Progress against the workforce elements of the plan is monitored by the finance & resource committee, who also receive details of the CCG ethnicity profile within the human resources management framework to consider alongside the actions on the plan. These include establishing monitoring systems to identify any discrimination and consider positive or correction action.
The newly established Cheshire and Merseyside Workforce Equality Focused Forum (WEFF) will be developing a work plan for the coming 12 months which will support systems to develop a number of positive action approaches.

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