Workforce Race Equality Standard

REPORTING TEMPLATE (Revised 2016)

Template for completion

Name of organisation

NHS Vale of York Clinical Commissioning Group

Date of report: month/year

July 2019

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

Executive Director for Quality and Nursing

Name and contact details of lead manager compiling this report

Planning and Assurance Manager

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.valeofyorkccg.nhs.uk/about-us/equality-and-diversity/

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

Michelle Carrington July 2019

Publications Gateway Reference Number: 05067

Report on the WRES indicators

1. Background narrative

a. Any issues of completeness of data

Total staff numbers are low and therefore numbers below 5 are not reported.
Ethnicity data relating to training are incomplete.

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

None

2. Total numbers of staff

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

129

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

8.52%

3. Self reporting

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

89.9%

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

Staff have been reminded to update their records via the Electronic Staff Record.

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

Staff will be requested to update their personal details where these are incomplete.

4. Workforce data

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

1 April 2018 - 31 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.	White/Clinical Band 1-6: 10 (7.75%) Band 7-8: 3 (2.32%) Band 9/ VSM: 1 (0.77%) White/	White/Clinical Band 1-6: 10 (7.9%) Band 7-8: 2 (1.58%) Band 9/ VSM: 1 (0.79%) White/	13 individuals did not declare ethnicity, 9 in bands 1-6, 3 in bands 7-8, 1 in band9/vsm.	
2	Relative likelihood of staff being appointed from shortlisting across all posts.	White shortlisted - 122 White appointed 17 BME shortlisted - 15 BME appointed 0	White shortlisted - 147 White appointed 18 BME shortlisted - 29 BME appointed - 4	Further analysis required to understand reason for change in performance	
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.	White staff - total= 2 BME staff - total = 0	White staff - 0 BME staff- 0	Numbers too small for meaningful comparison.	
4	Relative likelihood of staff accessing non-mandatory training and CPD.	Data incomplete: White 1, BME 0	Data not available	Data only recorded for high-value expenditure.	

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 6.2 BME 0.77	White 8.7 BME 0		Action on staff wellbeing and reporting of issues forms part of the 2019-20 staff wellbeing plan.
6	KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.	White 9.3 BME 0.77	White 14.28 BME 2.38	This represents an improvement on the 2017-18 year.	Action on staff wellbeing and reporting of issues forms part of the 2019-20 staff wellbeing plan.
7	KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion.	White 29.46 BME 2.32	White 25.39 BME 1.58	This represents an improvement on the 2017-18 year.	Talent Management Plan launched which includes promotion of equality of access.
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 3.1 BME 0	White 1.58 BME 0		
	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 BME - 1		This includes Non-Executive Directors (Lay Members) Comparison for Executive Directors is White - 9, BME - 1.	

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?

As a small organisation, precentages are easily skewed by single numbers, and therefore headcount may be a more accurate reflection or progress.

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.

WRES actions are being followed up via the Talent Management action plan and work to address staff wellbeing.

Click to lock all form fields and prevent future editing