

Workforce Race Equality Standard

REPORTING TEMPLATE (Revised 2016)



Template for completion

Name of organisation

Shropshire Clinical Commissioning Group

Date of report: month/year

August

2021

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

Alison Smith

Name and contact details of lead manager compiling this report

Alison Smith alison.smith112@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.shropshiretelfordandwrekinccg.nhs.uk/about-us/equality-diversity-and-inclusion/>

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

Alison Smith - 31 August 2021

Report on the WRES indicators

1. Background narrative

a. Any issues of completeness of data

Some data relies on completion of the national NHS staff survey which the CCG is unable to participate in due to its low numbers of employed staff. The CCG has run its own staff survey every two years but due to Covid 19 and staff management of change this has been postponed.

The CCG does not record non mandatory training centrally.

All other data is taken from casework information and ESR (electronic staff record) declared data by Human Resources at Midlands and Lancashire Commissioning support Unit.

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

161

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

2.48%

Report on the WRES indicators, continued

3. Self reporting

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

96.27

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

No as the focus for the CCG over the last 6 months was responding to the Covid 19 pandemic and progressing the management of change process

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

Yes - reminders will be issued to staff regarding accessing and updating their personal details

4. Workforce data

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

2020/2021

Staff in post at 31.03.21

Recruitment: April 2020 - March 2021

Report on the WRES indicators, continued

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, <u>compare the data for White and BME staff</u>				
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.	2.48% BME as compared to 93.79% White	2.04% BME as compared to 93.87% White	Small increase on last years data and slightly above the percentage total of BME in the Shropshire population of 2.1%	Explore with HR, Engagement and STW STP BAME Network colleagues how links to our recruitment on NHS Jobs could be shared with local BME networks.
2	Relative likelihood of staff being appointed from shortlisting across all posts.	9.09% BME compared to 26.32% white	33.33% BME as compared to 38.78% White	significant decrease in percentages but numbers are small so should be cautious when interpreting figures.	As part of OD support to become a single strategic commissioner work with HR colleagues to ensure there is robust recruitment training provided to recruitment managers that addressing unconscious bias and focusses on values based recruitment.
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.	0% BME as compared to 0% White	0% BME as compared to 0% White	No BME staff have entered the disciplinary process	
4	Relative likelihood of staff accessing non-mandatory training and CPD.	Information is not available	Information is not available	CCG does not record non-mandatory training centrally	Explore with HR how line managers could utilise the Easy HR system to record non mandatory training for staff

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, <u>compare the outcomes of the responses for White and BME staff.</u>				
5	KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.	White <input type="text"/> BME <input type="text"/>	White <input type="text"/> BME <input type="text"/>	Data is not available as the CCG runs its own staff survey and this has not been completed due to staff management of change processes during 2019/20 which have been postponed due to Covid 19	As part of work to become a single strategic commissioner with Shropshire CCG, adopt the NHS staff survey.
6	KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.	White <input type="text"/> BME <input type="text"/>	White <input type="text"/> BME <input type="text"/>	Data is not available as the CCG runs its own staff survey and this has not been completed due to staff management of change processes during 2019/20 which have been postponed due to Covid 19	As part of work to become a single strategic commissioner with Shropshire CCG, adopt the NHS staff survey.
7	KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion.	White <input type="text"/> BME <input type="text"/>	White <input type="text"/> BME <input type="text"/>	Data is not available as the CCG runs its own staff survey and this has not been completed due to staff management of change processes during 2019/20 which have been postponed due to Covid 19	As part of work to become a single strategic commissioner with Shropshire CCG, adopt the NHS staff survey.
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 <input type="text"/> BME <input type="text"/>	White <input type="text"/> BME <input type="text"/>	Data is not available as the CCG runs its own staff survey and this has not been completed due to staff management of change processes during 2019/20 which have been postponed due to Covid 19	As part of work to become a single strategic commissioner with Shropshire CCG, adopt the NHS staff survey.
	Board representation indicator For this indicator, <u>compare the difference for White and BME staff.</u>				
9	Percentage difference between the organisations' Board voting membership and its overall workforce.	2.3% difference between BME Board voting and overall BME workforce	2.3% difference between BME Board voting and overall BME workforce	Information remains static	The CCG will continue to advertise Board positions and invite applications from different communities as vacancies arise.

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.

Report on the WRES indicators, continued

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

None

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.

See attached

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and prevent future editing

