# **Workforce Race Equality Standard**

REPORTING TEMPLATE (Revised 2017)

Name of organisation	Date c	of report: month	/year
NHS Wolverhampton CCG		March	2019
Name and title of Board lead for the Workforce Race Equality Standard			
Sally Roberts Chief Nurse			
Name and contact details of lead manager compiling this report			
David King EIHR 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 a	applicat	ole)	
N/A			
Unique URL link on which this Report and associated Action Plan will be found			
https://wolverhamptonccg.nhs.uk/about-us/equality-inclusion-and-human-rights-2018-19			
This report has been signed off by on behalf of the Board on (insert name and date)			
SMT August 2019			

## 1. Background narrative

#### a. Any issues of completeness of data

Ethnicity was not known for 2.6% of the workforce of 116 employees at the end of March 2019 (excluding non-executive directors).

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

The CCG has updated its staff survey to ensure that all metrics can be reported upon.

#### 2. Total numbers of staff

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

Workforce of 116 employees at the end of March 2019 (excluding non-executive directors). A further 15 non-executive directors were also listed.

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

27.4% of the 113 employees of known ethnicity were listed as BME (excluding non-executive directors).

## 3. Self reporting

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

97.4% of the workforce of 116 employees at the end of March 2019 (excluding non-executive directors) self-reported their ethnicity.

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

Staff in post at March 2019
Disciplinary proceedings for the financial years 17/18 and 18/19
Recruitment and non-mandatory training during 18/19

# **5. Workforce Race Equality Indicators**

18/19	17/18	Narrative	Action
Percentage of staff in each of the AfC Bands 1-9 rganisations should undertake this calculation so	and VSM (including executive Board members) comeparately for non-clinical and for clinical staff.	pared with the percentage of staff in	the overall workforce.
otal N refers to those of known ethnicity.  VERALL %BME  Forkforce: 27.4% BME; (Total N = 113)  Schnicity was not known for 3.1% of the workforce.  The ethnicity breakdown of staff by pay band has been redacted due to the small umbers of staff within each pay band.	Total N refers to those of known ethnicity.  OVERALL %BME Workforce: 25.3% BME; (Total N = 95) Ethnicity was not known for 3.1% of the workforce.  The ethnicity breakdown of staff by pay band has been redacted due to the small numbers of staff within each pay band.	There were no statistically significant differences in the representation of BME staff by pay band compared to their level of representation in the workforce overall (excluding non-executive directors). This was the case at the end of March 2019 as well as at the end of March 2018.  When the pay bands were aggregated, there was a trend for a higher percentage of BME staff in the lowest pay bands (Bands 4 and under), but this trend was not statistically significant. Please refer to the figures below.  Total N refers to those of known ethnicity.  18/19 Workforce Overall: 27.4% BME; (Total N = 113) Bands 4 and under: REDACTED%; (Total N = 22) Bands 8C and over, VSM, and Medical: REDACTED%; (Total N = 18)  17/18 Workforce Overall: 25.3% BME; (Total N = 95) Bands 4 and under: REDACTED%; (Total N = 17) Bands 5 to 7: REDACTED%; (Total N = 41) Bands 8A to 8B: REDACTED%; (Total N = 41) Bands 8A to 8B: REDACTED%; (Total N = 27) Bands 8C and over, VSM, and Medical: REDACTED%; (Total N = 27) Bands 8C and over, VSM, and Medical: REDACTED%; (Total N = 10)	

2. Relative likelihood of staff being appointed from	n shortlisting across all posts.	
Relative Likelihood = 1.07	Relative Likelihood = 1.30	In 18/19, 10.3% of White people were appointed from shortlisting, compared to 9.6% of BME people - this did not represent a statistically significant difference. Number of appointees overall: 15.  In 17/18, 26.8% of White people were appointed from shortlisting, compared to 20.6% of BME people - this did not represent a statistically significant difference. Number of appointees overall: 22.
		nal disciplinary investigation. This indicator will be based on
Please refer to the narrative.	Please refer to the narrative.	There were fewer than 10 disciplinary proceedings in the 17/18 to 18/19 two-year window, and the 16/17 to 17/18 two-year window. Given the small numbers involved, little can be said about the pattern of disciplinary proceedings.

4. Relative likelihood of staff accessing non-mandatory training and CPD.			
Not available	Relative Likelihood = 1.03	Information on the uptake of non-mandatory training was not available in 18/19.	
		In 17/18, the likelihoods of White and BME staff accessing non-mandatory training were similar.	

18/19	17/18	Narrative	Action
5. KF 25. Percentage of staff experiencin	g harassment, bullying or abuse from patients, relativ	ves or the public in last 12 months.	
% White = 6.0% % BME = 8.3%	% White = Not available % BME = Not available	6.0% of White staff (3/50) and 8.3% of BME staff (1/12) who took part in the staff survey reported experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months; this did not represent a statistically significant difference.	

6. KF 26. Percentage of staff experi	iencing harassment, bullying or abuse from staff in last 1	2 months.	
% White = 17.3% % BME = 7.7%	% White = Not available % BME = Not available	17.3% of White staff (9/52) and 7.7% of BME staff (1/13) who took part in the staff survey reported experiencing harassment, bullying or abuse from other staff in the last 12 months; this did not represent a statistically significant difference.	The CCG will review the staff survey and seek to identify the underlying reasons for some staff to feel they are being bullied or harassed and thus what action is needed to address it.
7. KF 21. Percentage believing that	trust provides equal opportunities for career progressio	n or promotion.	
% White = 96.2% % BME = 69.2%	% White = Not available % BME = Not available	96.2% of White staff (50/52) and 69.2% of BME staff (9/13) who took part in the staff survey felt that the CCG provides equal opportunities for career progression or promotion (excluding blank and "don't know" responses); this represented a statistically significant difference with BME staff less likely than White staff to feel that the CCG provides equal opportunities for career progression or promotion.	The CCG will look to further work to understand the underlying concerns of BME staff within the CCG.
8. Q17. In the last 12 months have	you personally experienced discrimination at work from a	any of the following? b) Manager/team lead	ler or other colleagues
% White = 7.7% % BME = 0.0%	% White = Not available % BME = Not available	7.7% of White staff (4/52) and 0.0% of BME staff (0/12) who took part in the staff survey reported experiencing discrimination from other staff in the last 12 months; this did not represent a statistically significant difference.	

18/19	17/18	Narrative	Action
Ethnicity profile of the Board's Executive, Non-exembership and its overall workforce.	ecutive, Voting, and Non-voting membership. Perce	ntage difference between the or	ganisations' Board
Percentage differences:	Percentage differences:	In 18/19 and in 17/18, BME people were proportionately	
BME total board - %BME overall workforce: +2.0%	%BME total board - %BME overall workforce: -7.1%	represented amongst all board members and voting board	
BME voting board - %BME overall workforce: +2.0%	%BME voting board - %BME overall workforce: -7.1%	members, but were underrepresented amongst	
BME executive board - %BME overall workforce: -27.4%	%BME executive board - %BME overall workforce: -25.3%	executive board members compared to their level of representation in the workforce overall.	
		Ethnicity was not known for 10.5% of board members in	
		18/19 and for 8.3% of board members in 17/18.	

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