

# **Workforce Race Equality Standard (WRES)**

Annual report for 2018/19

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**Document information**

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## 1. Introduction

This is the 2019 Workforce Race Equality Standard (WRES) report for North West London Collaboration of CCGs. The report also includes the 2019 WRES Action Plan (appendix 2). All submissions and publications will show the report as a combined analysis, which will include all eight CCGs within North West London Collaboration of CCGs.

This will be the first year in which the organisation has been required to publish the WRES report on the CCG websites, as well as submit data to NHS England. Therefore, all data will be a baseline from which the organisation can make recommendations for improvement and utilise for comparison in 2020.

## 2. Background

NHS Workforce Race Equality Standard is a requirement for NHS Commissioners and NHS Healthcare Providers through the NHS Standard Contract since 2015. It was agreed to be put into action to ensure employees from Black and Minority Ethnic (BME) backgrounds have equal access to career opportunities and receive fair treatment in the workplace.

From this year onwards CCGs are required to collect data on their workforce by ethnicity, carry out data analysis, then produce and publish annual reports in line with the indicators specified within the WRES, along with a WRES action plan.

Whilst reporting on the data, CCGs are expected to show progress against these indicators of workforce equality, including a specific indicator to address the low numbers of BME board members across NHS organisations (to note that our organisation identify BME as BAME - Black, Asian and Minority Ethnicity).

## 3. WRES Indicators

The current position against the nine WRES indicators is based on organisation data held on 31 March 2019. Where the indicator is based on responses to the Staff Survey, this is based on the local February 2018 staff survey.

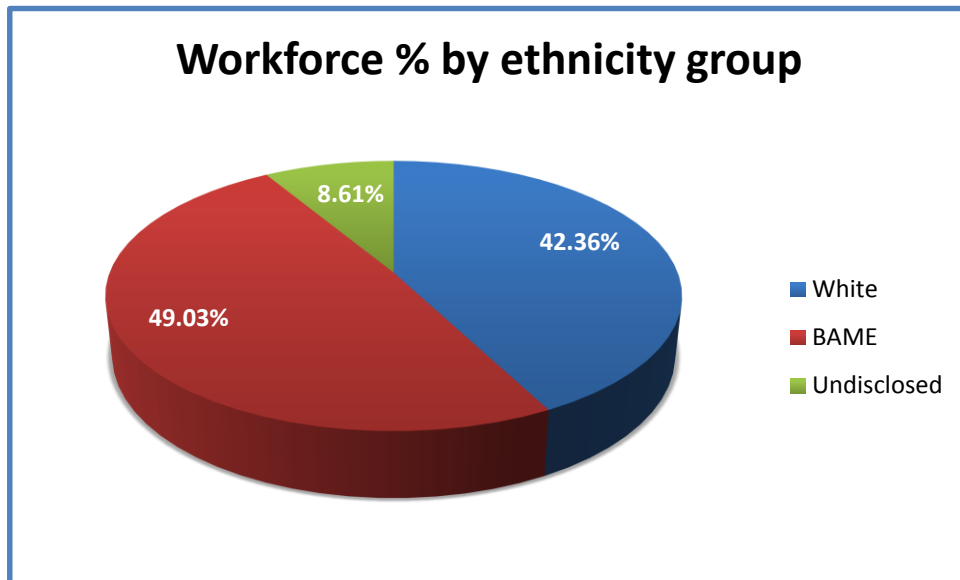
This information has been submitted to NHS England on 30 August 2019, in line with national requirements.

### Background narrative

There have been no issues with completeness of data. As this is the first year of official requirement for reporting and publication there is no comparison completed for previous years.

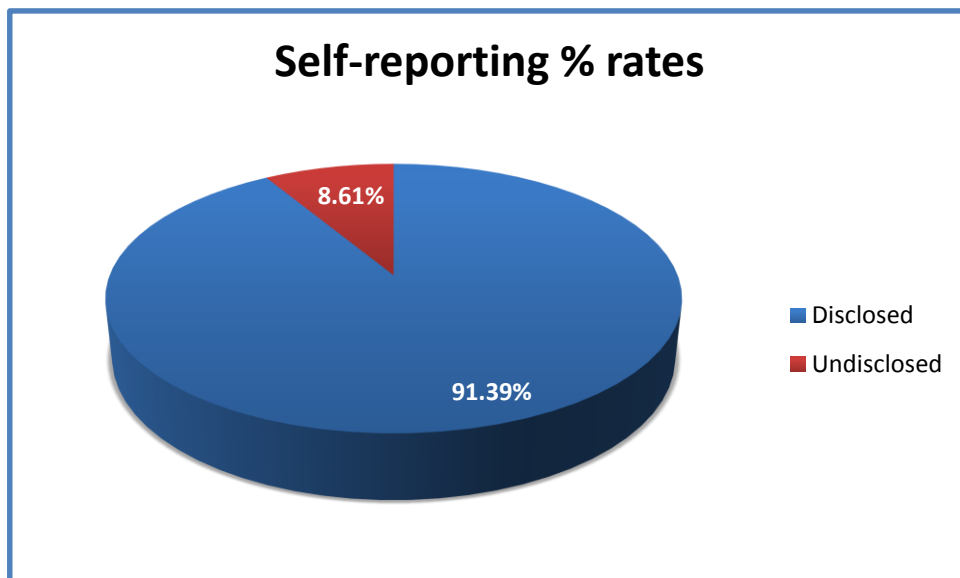
### Total numbers of staff

On 31 March 2019 there were 1,138 staff employed at North West London Collaboration of CCGs. Of those staff members, 558 declared being of BAME background, this equates to 49.03% of the overall workforce.



### Self-reporting

The proportion of total staff who have self-reported their ethnicity is 1,040 of the 1,138 workforce which equates to 91.39%. Although this percentage is relatively high we would like to aim for a higher percentage and have set a target of 95% by the next reporting period.



For those staff who have not already self-reported, we will be promoting the benefits of self-declaration and how this can help the organisation to continue to make improvements for staff experiences in relation to the WRES standards.

## Workforce data

In this report the organisations workforce data refers to the period of April 2018 to March 2019.

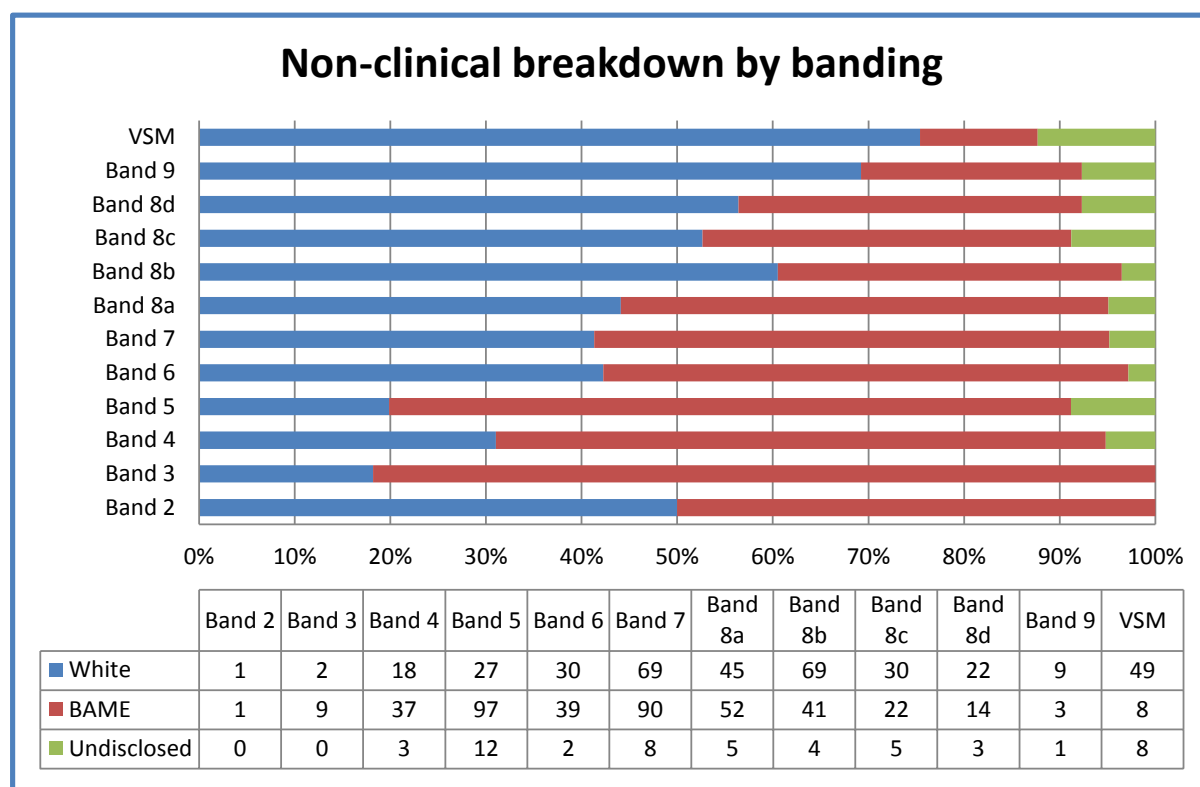
The indicators for the Staff Survey (indicators 5.5-5.8) refer to the last staff survey undertaken in February 2018.

## Workforce Indicators

**5.1 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. To be shown separately for clinical and non-clinical staff.**

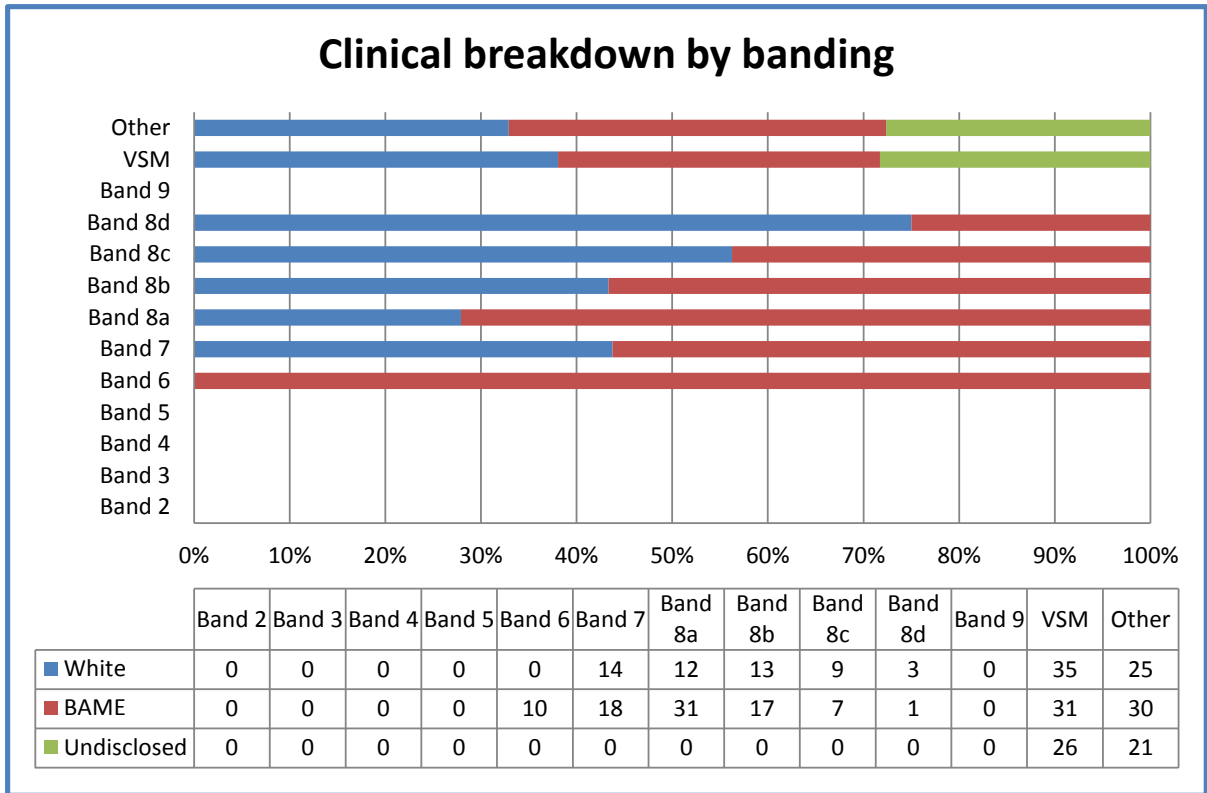
The breakdown of the numbers of staff in each banding is set out in Appendix 1.

With the breakdown of non-clinical roles, the data shows that there is a difference at Agenda for Change (AfC) bands 8b and above for BAME staff with a significant under representation. Likewise there is a difference at AfC bands 5 and below for White staff with a significant under representation.



With the breakdown of clinical roles, the data shows that there is a significant difference at AfC bands 8c and above for BAME staff with an under representation.

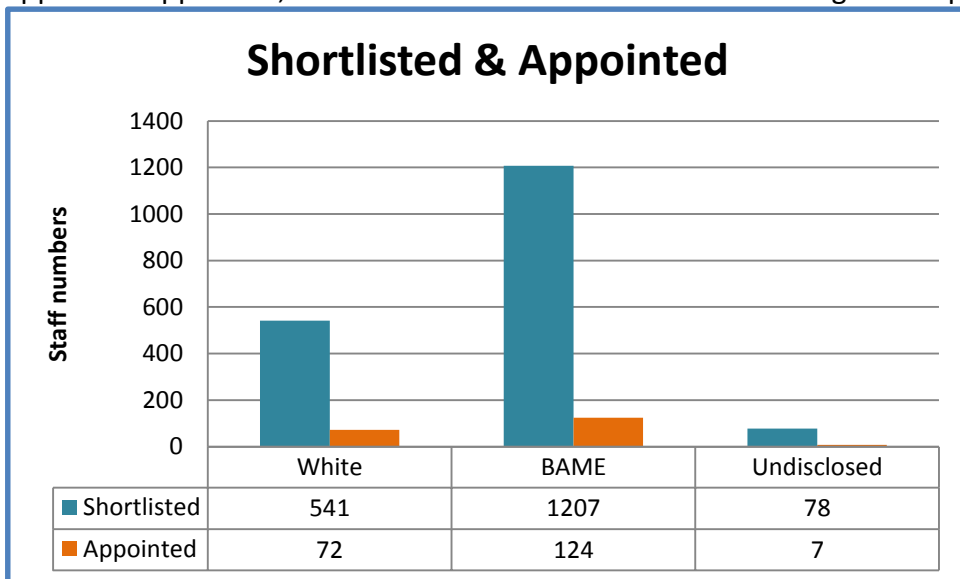
The band identified as 'Other' incorporates the grades for staff that are in roles that are not AfC, but rather locally agreed at organisation level.



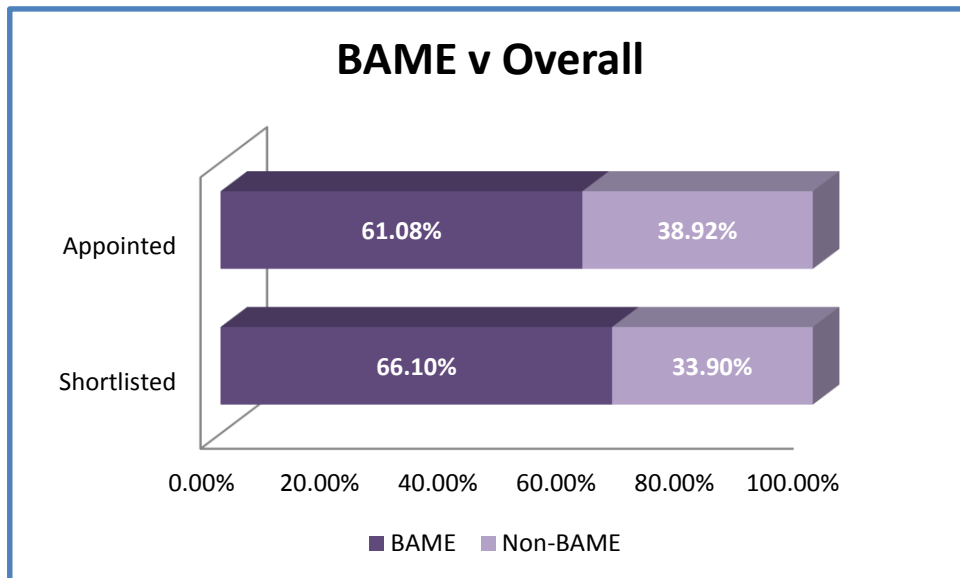
### 5.2 Relative likelihood of staff being appointed from shortlisting across all posts.

With this indicator a likelihood of more than 1.00 indicates that White staff are more likely to be appointed, and less than 1.00 indicates that BAME staff are more likely to be appointed.

The relative likelihood of White staff being appointed from shortlisting is 1.30 times greater than BAME staff. Overall there were 1,826 applicants shortlisted during this reporting period. BAME background applicants accounted for 1,207 of those. In total there were 203 appointed applicants, of those there were 124 from BAME background appointed.



When looking at the comparison of those appointed from shortlisting, it looks like a drastic difference. Although when comparing the data for BAME staff with the overall shortlisted and overall appointed it shows that BAME staff represent 66.10% shortlisted and 61.08% appointed.

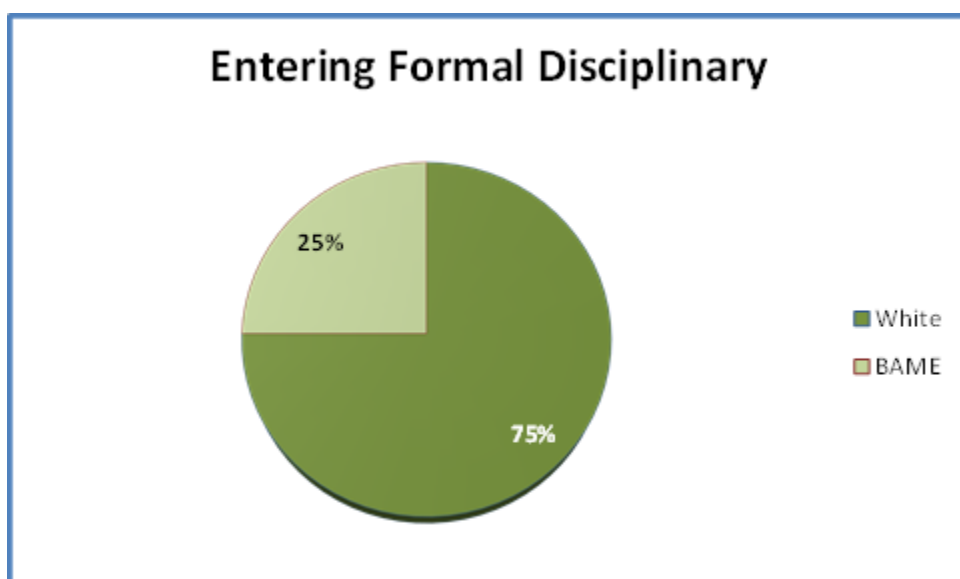


*In this instance non-BAME incorporates White staff and those that have undisclosed ethnicity.*

### 5.3 Relative likelihood of staff entering a formal disciplinary process, as measured by entry into a formal disciplinary investigation.

In total there were four disciplinaries that took place during this reporting period, which represents 0.35% of the overall workforce. Of those, three were White staff and one was BAME staff.

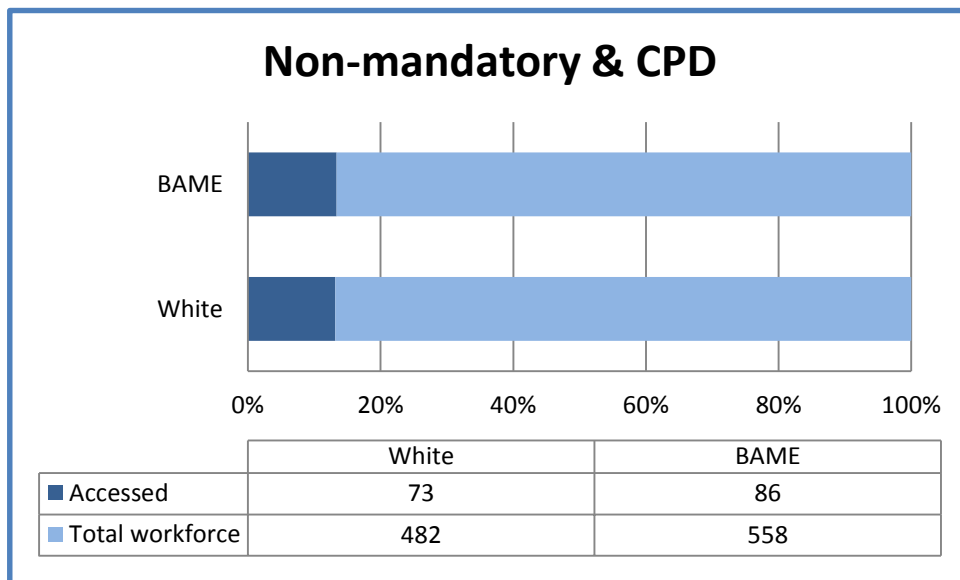
The cases resulting in disciplinary all fall under the category of failure to follow CCG Policy and Procedure.



### 5.4 Relative likelihood of staff accessing non-mandatory training and CPD.

With this indicator a likelihood of more than 1.00 indicates that White staff are more likely to have access, and less than 1.00 indicates that BAME staff are more likely to have access.

The relative likelihood of White staff having access is 0.98 times greater than BAME staff (meaning BAME staff are more likely). There were 73 White staff that accessed non-mandatory training and CPD, compared to 86 BAME staff.



### Staff Survey Indicators

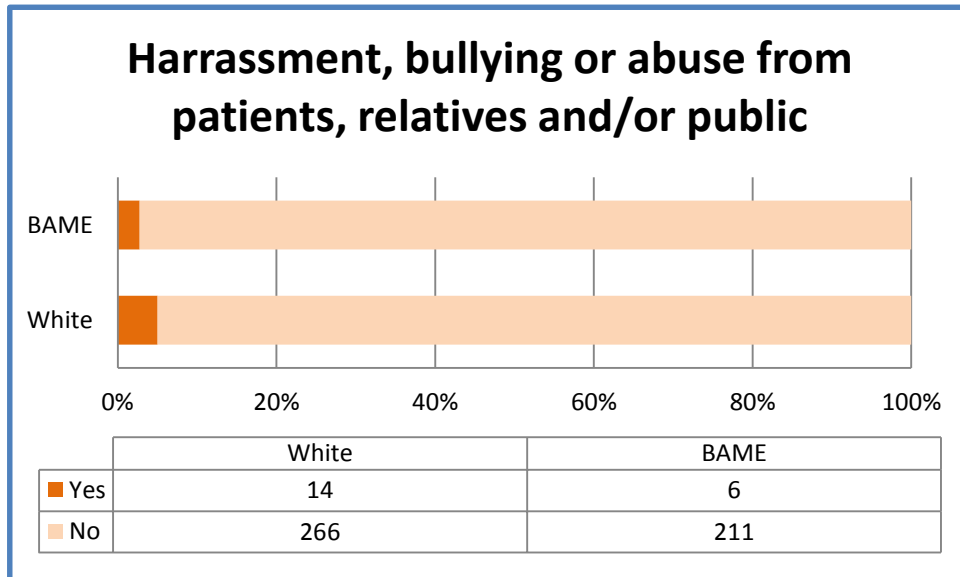
The data used within this analysis is from the February 2018 staff survey. A revised survey will be undertaken within the organisation in September/October 2019.

In total 497 staff members that completed the staff survey had self-reported, making 43.63% of the overall workforce. The following analysis is based on those that responded to the staff survey.

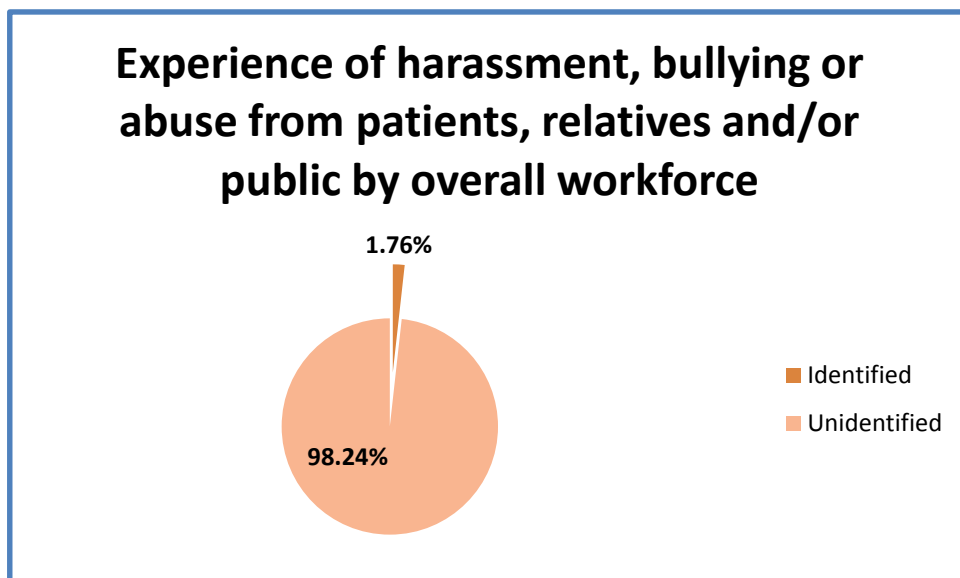


**5.5 Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months.**

Through the analysis we can see that 2.76% of BAME staff experience harassment, bullying or abuse from patients, relatives or the public, compared to 5% of White staff.

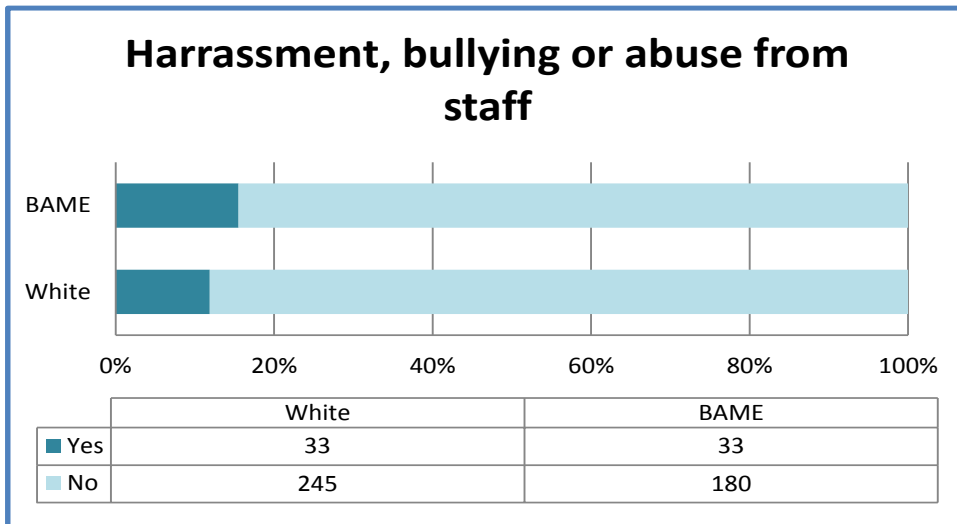


There were 20 staff that identified they had experienced harassment, bullying or abuse from patients, relatives or the public, out of the overall workforce. This makes 1.76% of our workforce. Although this may seem to be a small percentage, this is something that cannot be tolerated and must be an area for our focus.

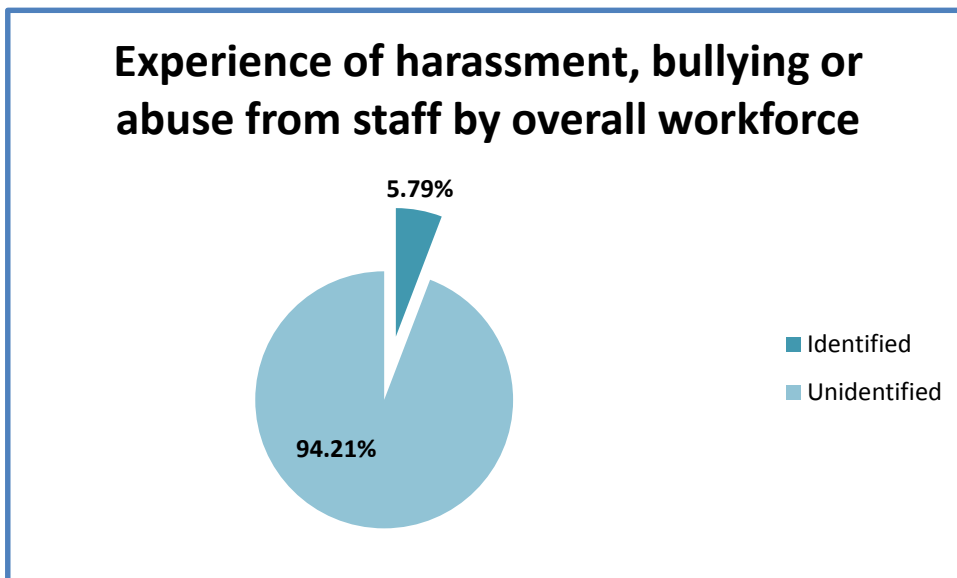


**5.6 Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months.**

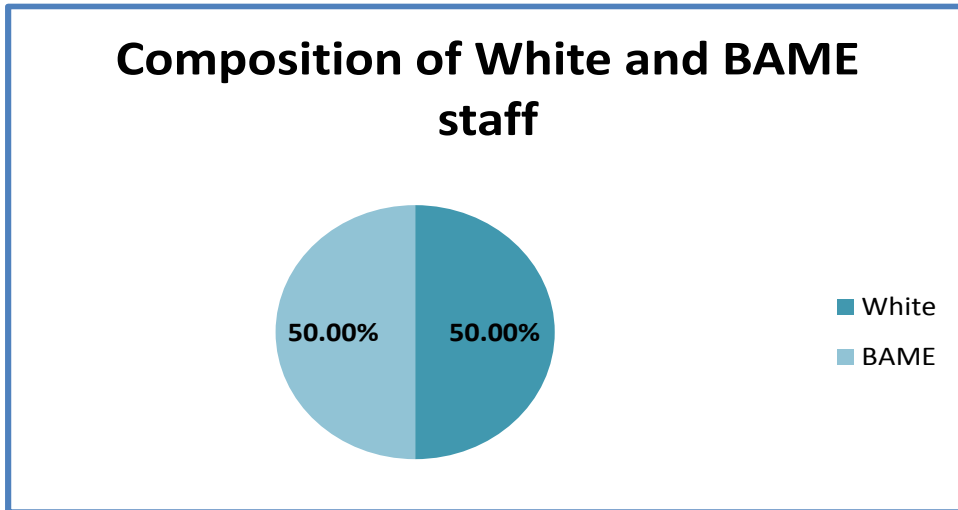
The results of the staff survey show that 15.49% of BAME staff experienced harassment, bullying or abuse from staff, compared to 11.87% of White staff. This makes a gap of 3.62% between the experience percentage of BAME and White staff.



66 staff members identified experiencing this. Out of the overall workforce this is 5.79%. This will need to be an area of focus within the WRES Action Plan.

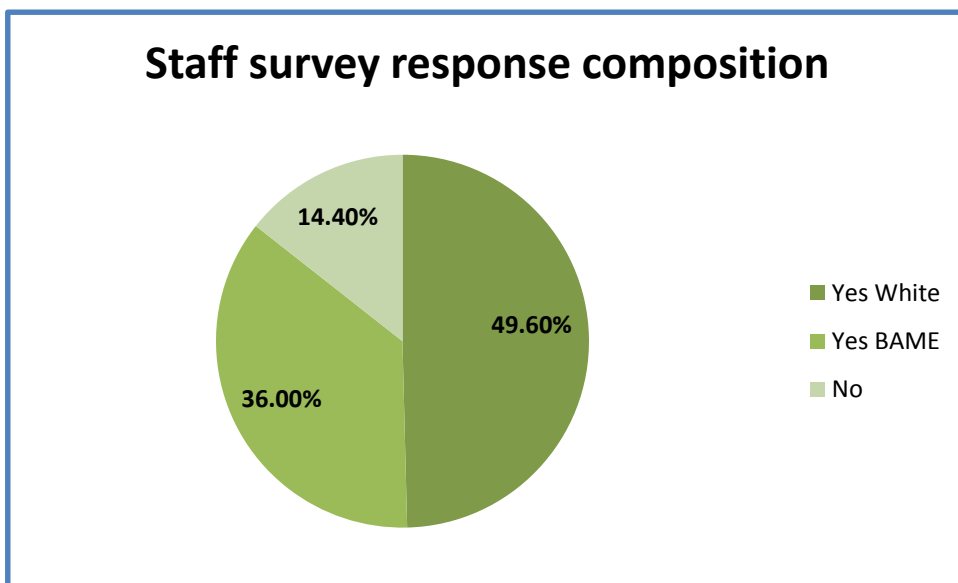


Of those 66 staff members, 33 are BAME staff and 33 are White staff, which has a representation of 50/50.

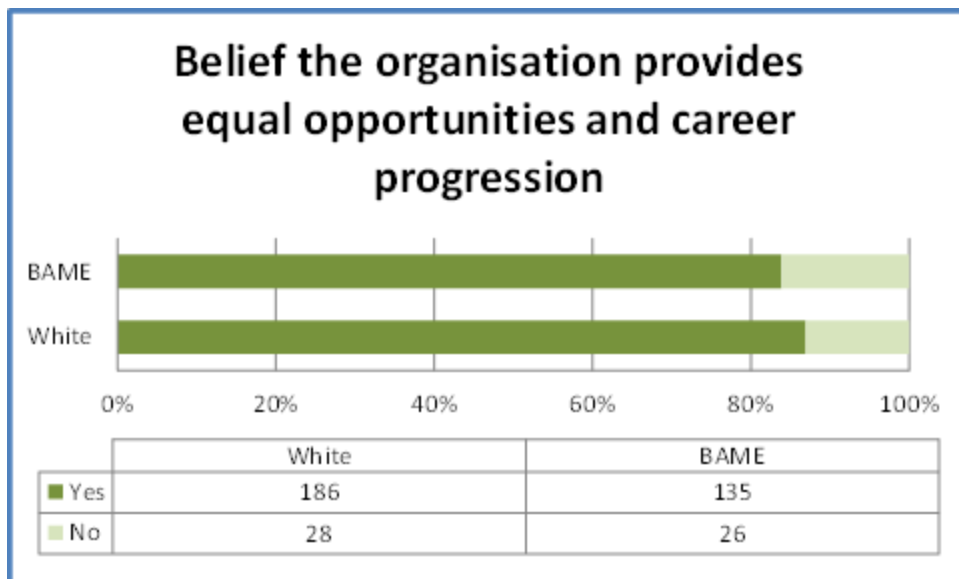


#### 5.7 Percentage believing that the organisation provides equal opportunities for career progression or promotion.

Data analysis of the staff survey results shows that there is a relatively high percentage of staff that believe the organisation provides equal opportunities and career progression. From the responses, in totality, there was 85.60% with a positive belief.

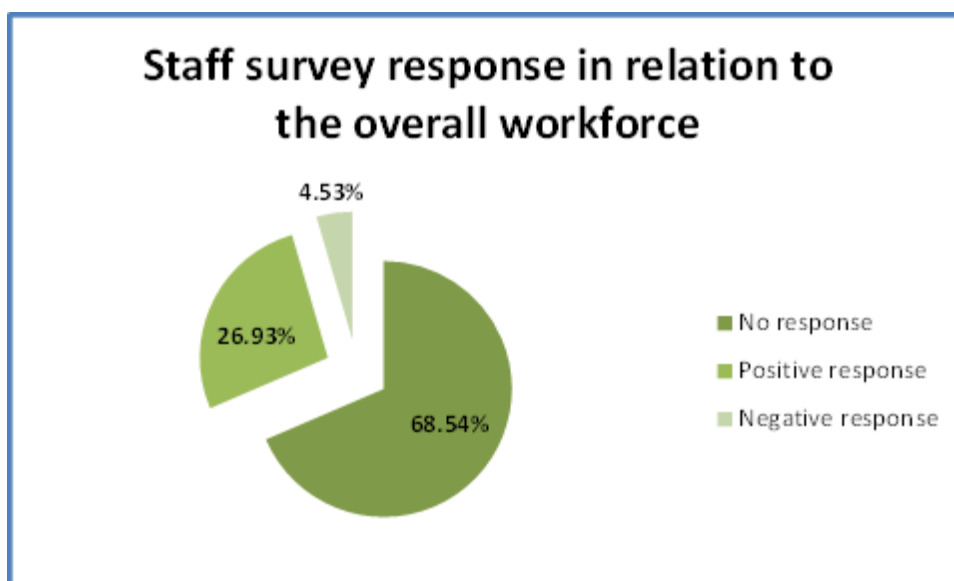


The composition of the staff survey responses comparing White and BAME staff shows a similar belief from both groups. It should be noted that White staff are slightly higher with 83.04% compared to BAME staff with 82.32%.



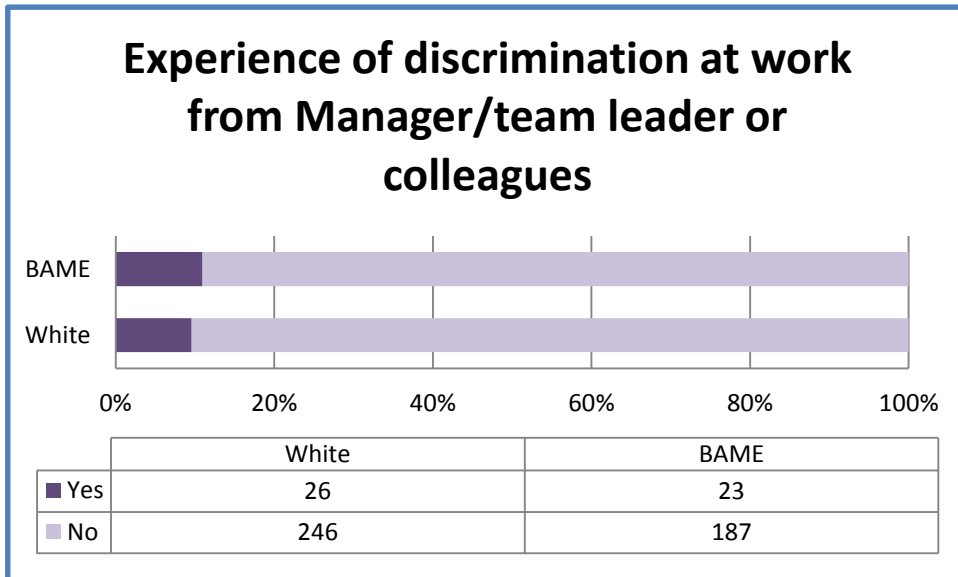
When considering the overall workforce, it shows that 26.93% responded with a positive belief and 4.53% responded with a negative belief. The remaining 68.54% of the workforce either did not respond to the staff survey or responded without identifying their ethnicity.

This would suggest that there needs to be focus on promoting the staff survey as a facility for staff to have their voice heard, whilst highlighting areas for the organisation to make improvements in. It would also suggest that greater engagement with staff on self-reporting their ethnicity needs to be developed, whilst highlighting that it will contribute to the organisation being able to identify areas that are working well and areas that could benefit from further focus.

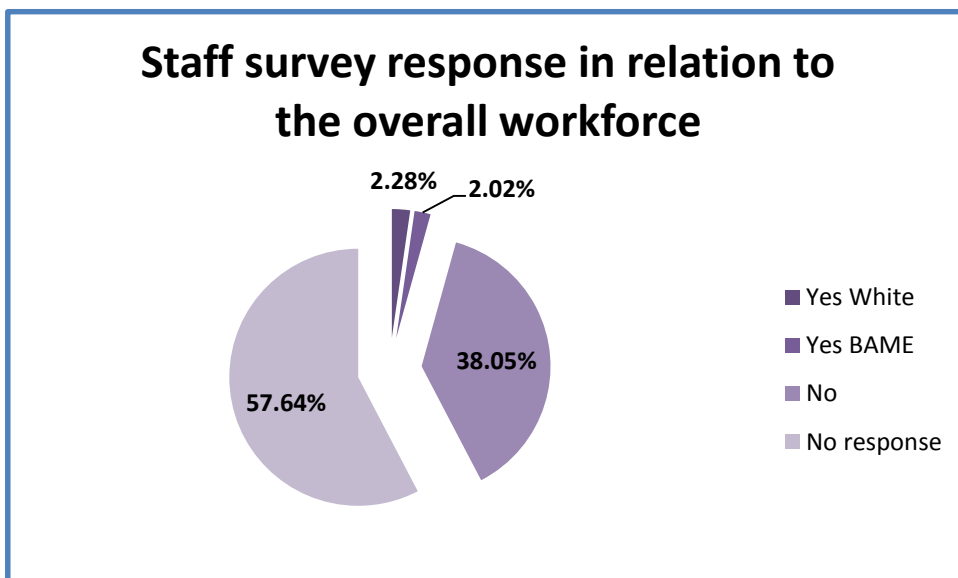


**5.8 In the last 12 months have you personally experienced discrimination at work from Manager/team leader or other colleagues?**

When looking at this data both White and BAME staff are similar in their experience of discrimination at work from their manager/team leader or other colleagues. It shows White staff at 9.56% and BAME staff at 10.95%.



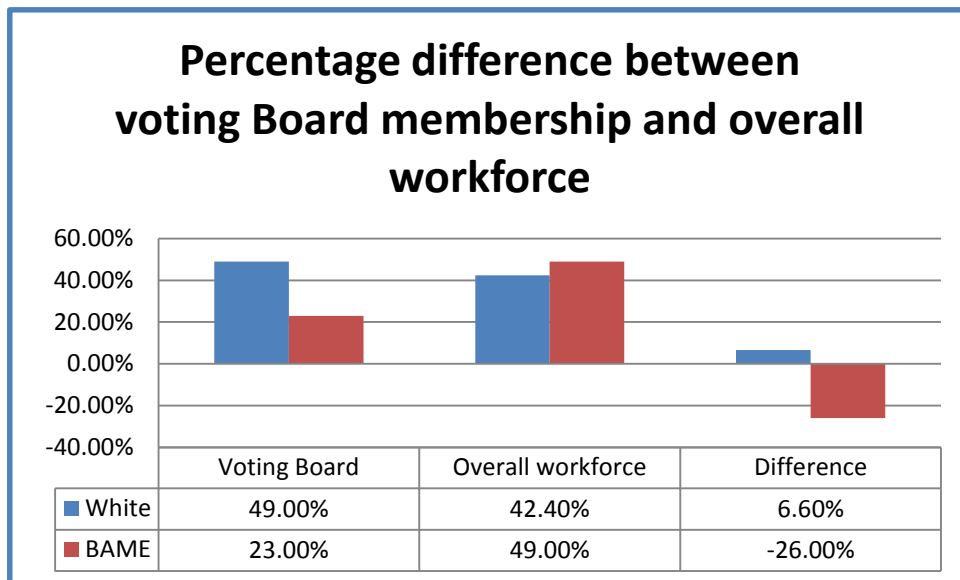
Comparing that to the overall workforce, a total of 49 staff members (26 White and 23 BAME) responded with a yes through the staff survey. Meaning 4.30% of our overall workforce have experienced this discrimination.



## Board Representation Indicator

### 5.9 Percentage difference between the organisations Board voting membership and its overall workforce.

Analysing the data on the percentage difference between the voting Board membership and our overall workforce it is apparent that BAME staff are underrepresented 26% compared to the overall workforce BAME staff composition percentage.



## 4. Recommendations

All recommendations on how to make improvements for the experience and opportunities for BAME staff is detailed in the WRES Action Plan (appendix 2).

The areas identified that need to have some focus on are;

- Self-reporting to be encouraged and target set at 95%
- Underrepresentation of BAME staff at senior levels
- Improvements to uptake of non-mandatory training for all staff in the organisation
- Push to encouragement all staff to participate in the annual staff survey

## 5. Appendices

### Appendix 1

Tables with breakdown of ethnicity group by banding

Non-clinical workforce by headcount	White	BAME
Band 2	1	1
Band 3	2	9
Band 4	18	37
Band 5	27	97
Band 6	30	39
Band 7	69	90
Band 8a	45	52
Band 8b	69	41
Band 8c	30	22
Band 8d	22	14
Band 9	9	3
VSM	49	8

Clinical workforce by headcount	White	BAME
Band 2	0	0
Band 3	0	0
Band 4	0	0
Band 5	0	0
Band 6	0	10
Band 7	14	18
Band 8a	12	31
Band 8b	13	17
Band 8c	9	7
Band 8d	3	1
Band 9	0	0
VSM	35	31
Other	25	30

*\*Other - incorporates the grades for staff that are in roles that are not AfC, but rather locally agreed at organisation level.*