Workforce Race Equality Standard

REPORTING TEMPLATE (Revised 2016)

Template for completion

Name of organisation

NHS Sheffield CCG

Date of report: month/year

April 2016

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

Tim Furniss, Director of Delivery

Name and contact details of lead manager compiling this report

HR 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

http://www.sheffieldccg.nhs.uk/our-information/workforce-race-equality-standard.htm

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

Strategic Public Equality, Engagement and Experience Group - 20 June 2016

Publications Gateway Reference Number: 05067

Report on the WRES indicators

1. Background narrative

a. Any issues of completeness of data

NA

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

NHS Sheffield CCG's headcount has increased by 61.5% since 31st May 2015. This is largely due to the TUPE transfer of employees from NHS Yorkshire and the Humber Commissioning Support Unit.

2. Total numbers of staff

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

278

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

9.4%

3. Self reporting

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

99.6%

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

NHS Sheffield CCG have implemented ESR Self Service which enables employees to check personal details held by the organisation including ethnicitiy and arrange for changes and updates.

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

Yes.

4. Workforce data

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

1st April 2015 – 31st March 2016

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.	11.4% of staff in Bands 8-9, VSM (including executive Board Members and senior medical staff) are from a BME background	6.3% of staff in Bands 8-9, VSM (including executive Board Members and senior medical staff) are from a BME background		
2	Relative likelihood of staff being appointed from shortlisting across all posts.	For the period 1st April 2015 – 31st March 2016: BME Applications – 27% BME Applicants shortlisted – 15.7%	For the period 1st April 2014 – 31st March 2015: BME Applications – 31% BME applicants shortlisted – 14% BME Applicants		NHS Sheffield CCG have ran numerous training events for recruiting managers in relation to fair recruitment and selection processes in line with legislation and the organisational policy.
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.	For the period 1st April 2014 – 31st March 2016: Total number of employees entering the disciplinary processes – 5	There have been no formal disciplinary processes within the previous 2 year period.		
4	Relative likelihood of staff accessing non-mandatory training and CPD.	Data taken from the Staff Survey 2015: 89% staff reported having a development review in last 12	Data taken from the Staff Survey 2014; 92% staff reported having a development review in last 12		NHS Sheffield CCG have implemented a new Learning and Development Policy and have created a Learning and Development Manager role within the permanent organisational structure.

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 0 BME 0	White BME	For this year 100% of staff have not experienced harassment, bullying or abuse in last 12 months compared to 83% for CCGs nationally. No breakdown provided for BME staff due to low numbers.	NHS Sheffield CCG have implemented a new Dignity at Work Policy and have ran numerous training events for line managers and staff in relation to prevention of bullying and harassment.
6	KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.	White BME	White BME	For this year 95% of staff have not experienced harassment, bullying or abuse in last 12 months compared to 83% for CCGs nationally. No breakdown provided for BME staff due to low numbers.	HS Sheffield CCG have implemented a new Dignity at Work Policy and have ran numerous training events for line managers and staff in relation to prevention of bullying and harassment.
7	KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion.	White BME	White BME	For this year 93% believed CCG acts fairly with regards to career progression compared to 90% nationally. No breakdown provided for BME staff due to low numbers.	NHS Sheffield CCG have implemented a new Learning and Development Policy and have created a Learning and Development Manager role within the permanent organisational structure.
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 BME	White BME	This year 99% had not personally experienced discrimination at work compared to 97% nationally. 1 respondent had personally experienced discrimination at work because of their ethnic background compared to 3	NHS Sheffield CCG have implemented a new Dignity at Work Policy and have ran numerous training events for line managers and staff in relation to prevention of bullying and harassment.
	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.	The Governing Body is represented by 17.6% of BME staff compared to	The Governing Body is represented by 6% of BME staff compared to		

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?

NA

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.

We are currently developing our detailed WRES action plan. We will attach it when completed.

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