Workforce Race Equality Standard

Statistics breakdown

Date of this report	August 2018
Name of Provider Organization	Nottingham CityCare Partnerships
Name and Title of Board Lead for Workforce Race Equality Standard	Tracy Tyrrell Director of Nursing & Allied Health Professionals
Name and contact details of Lead Manager completing this report	Fiona Cambridge Equality Diversity & Inclusion Lead f.cambridge@nhs.net
Name of Commissioners this report has been sent to	Nottingham City Clinical Commissioning Group
This report has been signed off by the Board by	Tracy Tyrrell - September 2018

Report on the WRES Indicators

1. Background Narrative

a. Any issues of completeness of data

None

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 this report

1120

b. Proportion of BME[1] staff employed within this organisation at the date of this report

11.7%

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[1] The definitions of "Black and Minority Ethnic" and "White" used in the NHS England Standard and Guidance have followed the national reporting requirements of Ethnic Category in the NHS Data Model and Dictionary, and are as used in Health and Social Care Information Centre data. These definitions were based upon the 2001 ONS Census categories for ethnicity. "White" staff include White British, Irish and Any Other White. The "Black and Minority Ethnic" staff category includes all other staff except "unknown" and "not stated." (these are presented in Annex B)

3. Self-Reporting

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

98.9%

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

Improved self-reporting on last year. Staff complete self-reporting on application, at recruitment and for the staff survey.

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

Raise awareness of the importance of recording during equality training, on the website and in CityCare Cascade

3. Workforce Data

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

April 2017 to April 2018 (exception indicator 3 which is a rolling two year period)

5. Workforce Race Equality Indicators

	Indicator For each of these four workforce indicators, the Standard compares the metrics for White and BME staff	Data for reporting year	Data for previous year	Narrative – implications of this data and background narrative	Action taken and planned eg link to EDS2 evidence and corporate Equality Objectives

1	*Percentage of staff in each of the AfC bands 1-9 or medical and dental subgroups and VSM (including executive board members) compared with the percentage of staff in the overall workforce disaggregated by:*
	
	• *Non clinical staff*
	• *Clinical staff of which:*
	  ○ *Non-medical*
	  ○ *Medical & dental*
	Definitions are based on ESR occupation codes with the exception of medical & dental staff
	
	Please see attached table for % BME against whole BME workforce
		Band 1 non-clinical
		BME 100%
		White 0%
		
		Band 2 non-clinical
		BME 28% 17/61
		White 67% 41/61
		
		Clinical
		BME 11%
		White 89%
		
		Band 3 non-clinical
		BME 10%
		White 90% 53/59
		Clinical
		BME 10%
		White 88%
		
		Band 4 non-clinical
		BME 10%
		White 90%
		Clinical
		BME 13%
		White 86%
			Band 1 non-clinical
			BME 100%
			White 0%
			
			Band 2 non-clinical
			BME 28%
			White 72%
			
			Clinical
			BME 10%
			White 90%
			
			Band 3 non-clinical
			BME 10%
			White 90%
			Clinical
			BME 14%
			White 86%
			
			Band 4 non-clinical
			BME 11%
			White 89%
			Clinical
			BME 16%
			White 84%
				Within this reporting period 2018:
				
				The highest number of BME staff are within AfC band 6 clinical followed by band 4 clinical and band 2 non-clinical.
				The lowest number being in band(s) 7 non-clinical and band 8a and above.
				
				Generally, there are higher numbers of BME staff in clinical roles than non-clinical roles.
				
				In comparison with 2017 significant changes include:
				
				A higher number of BME staff in band 5 both non-clinical and clinical posts.
					EDS2 Goal 3 - 1c Monitoring career pathways in promotion.
					The Equality & Diversity Group regularly monitor and report to the Board on career progression & appointment of staff (BME & white staff).
					New and established managers will undertake a management programme including E&D elements, WRES and recruitment, unconscious bias and cultural competency.
					We have widened the market with targeted advertising and engagement; social media, local communities, recruitment events. Fair & consistent recruitment panels with stakeholder engagement; values bases recruitment, E&D elements.
					
					EDS2 Goal 3 - 2 a &b Analysis of staff training & staff survey
					Engagement sessions with staff,

Band 5 non-clinical BME 13% White 87% Clinical BME 12% White 88%	Band 5 non-clinical BME 8% White 92% Clinical BME 10% White 90%	focus on equality elements, report to Equality & Diversity Group and Board with action plan. Upskill managers to support staff via management induction programme.
Band 6 non-clinical BME 9% White 91% Clinical BME 10% White 90%	Band 6 non-clinic BME 8% White 92% Clinical BME 10% White 90%	**Goal 3 - 3 a-e - review & extend training program, targeted training reflecting needs of the organization** Cultural competence and unconscious bias training rolled out with elements included within induction and HR training courses.
Band 7 non-clinical BME 3% White 97% Clinical BME 7% White 92%	Band 7 non-clinic BME 3% White 97% Clinical BME 6% White 94%	**EDS2 Goal 3 - 4a & b Annual appraisal reflect evidence in relation to E&D values & behaviours** Implementation of new appraisal system. Leadership & management training/opportunities for future leaders. Ongoing accessibility to BME leadership programmes EMLA, coaching & mentoring opportunities. Work with EMLA to reduce level of entry to leadership courses. Ongoing analysis and reporting of career progression within bands and consider staff survey results around career progression opportunities.
Band 8a non-clinical BME 0% White 100% Clinical BME 6% White 94%	Band 8a non-clinic BME 0% White 100% Clinical BME 0% White 100%	
Band 8b non–clinical BME 0% White 100% Clinical BME 100% White 0%	Band 8b non-clinical BME 10% White 90% Clinical BME 100% White 0%	

		Band 8c non-clinical BME 0% White 100% Clinical BME 0% White 100%	Band 8c non-clinical BME 0% White 100% Clinical BME 0% White 0%		Equality event with deep dive explored cultural competence of the workforce, action plan agreed and sharing of good practice across services.
		Band 8d non-clinical BME 0% White 100% Clinical BME 0% White 100%	Band 8d non-clinical BME 0% White 0% Clinical BME 0% White 0%		WRES action plan to be produced and agreed by E&D Group and Board.
		Band 9 non-clinical BME 0% White 100% Clinical BME 0% White 0%	Band 9 non-clinical BME 0% White 100% Clinical BME 0% White 0%		
		VSM non-clinical BME 0% White 100% Clinical BME 0% White 0%	VSM non-clinical BME 0% White 100% Clinical BME 0% White 100%		
		Medical subgroups BME 33% White 67%	Medical subgroups BME 40% White 60%		

2	Relative likelihood of BME staff being appointed from shortlisting compared to that of White staff being appointed from shortlisting across all posts.	1.08 times greater for white staff	1.90 times greater for white staff	There has been an increase in the likelihood of BME staff being appointed from shortlisting from the previous year.	**EDS2 Goal 3 - 1b Values based recruitment & patient representative involvement** • Values based recruitment and unconscious bias, cultural awareness for appointing managers. • Patient, public & staff involvement in senior interview panels • Targeted advertising in local communities & on social media • Promote work experience & apprenticeships. Leadership & management training/opportunities for current and future leaders . • Regular reporting from NHS jobs discussion at E&D and HR Group.
3	Relative likelihood of BME staff entering the formal disciplinary process, compared to that of White staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation* *Note: this indicator will be based on data from a two year rolling average of the current year and the previous year.	0.87 times greater for BME staff	0.50 times greater for BME staff	There has been an increase in the relative likelihood of BME staff entering the formal disciplinary process	**EDS2 Goal 3 - 4a & b Annual appraisal reflect evidence in relation to E&D values & behaviours** • Deep dives to identify mechanisms & causes – implement better practice • Offer of support during process for BME staff from trained BME staff • Management HR toolkit • Revision of HR policy & training including unconscious bias.

	Indicator	Data for reporting year	Data for previous year	Narrative – implications of this data and background narrative	Action taken and planned eg link to EDS2 evidence and corporate Equality Objectives
4	Relative likelihood of BME staff accessing non-mandatory training and CPD as compared to White staff	0.99 times greater for white staff	0.34 time greater for white	There has been an increase in the number of white staff attending CPD compared to BME staff 21.7% of BME staff attended non-mandatory training and CPD compared to be 21.9% of white staff	**EDS2 Goal 3 - 3 a-e Review & extend training program, targeted training reflecting needs of the organization** • Aspiring leaders programme and management programme established. Increased opportunity for development with clear pathways with new appraisal system. • BME staff network and protected release time. • You Said We Did staff survey action plan
	Indicator **For each of these four staff survey indicators, the Standard compares the metrics for each survey questions response for White and BME staff**	**Data for reporting year**	**Data for previous year**	**Narrative – implications of this data and background narrative**	**Action taken and planned eg link to EDS2 evidence and corporate Equality Objectives**
5	KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months	White 24% BME 24%	White 23% BME 12%	The total response rate for completion of the staff survey has increased from 57% to 63% There has been an increase in bullying/harassment/abuse for white staff of + 1% There is a 12% increase for BME staff within this domain	EDS2 Goal 3 - 5 Address issues from staff survey • BME staff network – consult & represent views. • Explore reported cases • Managers induction programme to effectively support staff • Cultural competence resources & training

6	KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months	White 14%	White 15%	There is a 1% decrease for white staff and 1% decrease for BME staff in their experience from the previous year	EDS2 Goal 3 - 3 Review and delivery of E&D training. Annual appraisal to reflect evidence to E&D values and behaviours
		BME 19%	BME 20%		• BME staff network – consult & represent views • Managers induction programme to effectively support staff • Cultural competence resources & training • Unconscious bias training • WRES staff workshop & action plan
7	KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion	White 86%	White 88%	There is a slight decrease in this area for white staff and a 14% decrease for BME staff	EDS2 Goal 3 - 2 Equality of access to training and development
		BME 53%	BME 67%		• Aspiring leaders programme • Managers Induction programme • Increase opportunity for development with clear pathways • BME staff network • Protected release time • Work with EMLA to offer leadership training for lower banded BME staff • You Said We Did staff survey action plan

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 5%	White 6%	The experience for white staff has slightly improved by 1% and improved for BME staff more significantly by 5%	EDS2 Goal 3 - 3 E&D training for staff EDS2 Goal 3 - 5 Monitor staff survey & action plan to address issues - BME staff network – consult & represent views with reporting to Equality & Diversity Group - Managers induction training to effectively support staff - Cultural competence training and resources - Unconscious bias training
		BME 13%	BME 18%		
	Does the Board meet the requirement on Board membership?	**Data for reporting year**	**Data for previous year**	**Narrative – implications of this data and background narrative**	**Action taken and planned eg link to EDS2 evidence and corporate Equality Objectives**
9	Percentage difference between the organisations Board voting membership and its overall workforce: a. By voting member of the Board b. By executive membership of the Board	a +2.59% b -11.7%	a. +1% b. a difference of -11.5%	There has been an increase both in the voting member and executive members of the Board compared to that of the overall workforce	EDS2 goal 3 – 1 monitor Board representation

6. Are there any other factors or data which should be taken into consideration in assessing progress? Please bear in mind any such information, action taken and planned may be subject to scrutiny by the Co-ordinating Commissioner or by regulators when inspecting against the "well led domain".

CityCare were awarded "excellent" at the CQC inspection which fell in the previous reporting period. CQC comments included; the leadership team at CityCare demonstrated they were meeting the objectives and promoting the values of the Workforce Race Equality Standard (WRES) with processes that promoted staff involvement and led to action plans which addressed causes of inequality. Board minutes we reviewed indicated regular discussions of the WRES were taking place and WRES requirements were embedded and reviewed appropriately.

7. If the organisation has a more detailed Plan agreed by its Board for addressing these and related issues, you are asked to attach it or provide a link to it. Such a plan would normally elaborate on the steps summarised in section 5 above setting out the next steps with milestones for expected progress against the metrics. It may also identify the links with other work streams agreed at Board level such as EDS2.

EDS2 action plan and grading report
WRES action plan
You Said We Did staff survey action plan

					Reporting 2018		
Pay Band	No. of BME Staff	No. of White Staff	Not Stated	Total Staff	% BME Staff in Pay Band	% BME staff compared to whole BME workforce (all pay bands)	**Annex A**
Band 1 non-clinical	2	-		2	100%	1.56%	
Band 1 clinical	-	-		-	-		
Band 2 non-clinical	17	41	3	61	28%	13.28%	
Band 2 clinical	3	24		27	11%	2.34%	
Band 3 non-clinical	6	53		59	10%	4.68%	
Band 3 clinical	8	72	2	82	10%	6.25%	
Band 4 non-clinical	6	52		58	10%	4.68%	
Band 4 clinical	17	110	1	128	13%	13.28%	
Band 5 non-clinical	3	19		22	13%	2.34%	
Band 5 clinical	18	133		151	12%	14.06%	
Band 6 non-clinical	3	30		33	9%	2.34%	
Band 6 clinical	30	256		286	10%	23.43%	
Band 7 non-clinical	1	29		30	3%	0.78%	
Band 7 clinical	9	116	1	126	7%	7.03%	
Band 8a non-clinical	-	14		14	-		
Band 8a clinical	1	14		15	6%	0.78%	
Band 8b non-clinical	-	6		6	-		
Band 8b clinical	1	-		1	100%	0.78%	
Band 8c non-clinical	-	2		2	-		
Band 8c clinical	-	1		1	-		
Band 8d non-clinical	-	1		1	-		
Band 8d clinical	-	1		1	-		
Band 9 non-clinical	-	1		1	-		
Band 9 clinical	-	-		-	-		
VSM non clinical	-	1		1	-		
VSM clinical	-	-		-	-		
Medical sub-groups	1	2		3	33%	0.78%	
(other pay band)	3	2	5	10	33%	2.34	
TOTAL	128	980	12	1120			

14 Annex B –Office of National Statistics 2001 Ethnic Categories Ethnic Categories 2001

A – White -British
B – White -Irish
C – Any other white background
D – Mixed White and Black Caribbean
E – Mixed White and Black African
F – Mixed White and Asian
G – Any other mixed background
H – Asian or Asian British -Indian
J – Asian or Asian British -Pakistani
K – Asian or Asian British - Bangladeshi
L – Any other Asian background
M – Black or Black British -Caribbean
N – Black or Black British -African
P – Any other Black background
R – Chinese
S – Any other ethnic group
Z – not stated
Note: a more detailed classification for local use if required
is contained in Annex 2 of DSCN 02/2001.

Old Ethnic Codes - staff employed after 1 April 2001 must have their ethnic group assessed and recorded using the new categories and codes as detailed above. The "old" codes shown below are for reference only.
0 – White
1 – Black – Caribbean
2 – Black – African
3 – Black – Other
4 – Indian
5 – Pakistani
6 – Bangladeshi
7 – Chinese
8– Any other Ethnic Group
9 – Not given