NHS LINCOLNSHIRE CCG 2020 WRES REPORTING TEMPLATE

Introduction
1 Name of organisation
NHS Lincolnshire CCG
2 Date of report
Month/Year: June/2020
3 Name and title of Board lead for the Workforce Race Equality Standard
Martin Fahy, Director of Nursing and Quality
4 Name and details of lead manager compiling this report
David King EIHR Manager
5 Names of commissioners this report has been sent to
Complete as applicable: N/A
6 Name and contact details of co-ordinating commissioner this report has been sent to
Complete as applicable:
7 Unique URL link on which this report and associated Action Plan will be found
https://lincolnshireccg.nhs.uk/about-us/our-commitment-to-equality-inclusion-and-human-rights/

8 This report has been signed off by on behalf of the board on

Name: TBA

Date: TBA

Background narrative

9 Any issues of completeness of data

Ethnicity was known for 98.2% of the workforce of 279 employees at the end of June 2020 (excluding non-executive directors and lay members).

10 Any matters relating to reliability of comparisons with previous years

NHS Lincolnshire CCG was formed in April 2020 by the merger of the previous four Lincolnshire area CCGs: NHS Lincolnshire West CCG, NHS South West Lincolnshire CCG, NHS South Lincolnshire CCG & NHS Lincolnshire East CCG. Consequently, there are no comparisons to prior years for indicators based on staff in post. Indicators requiring data for the 19/20 financial year have been constructed by pooling data across the four prior Lincolnshire area CCGs. The staff survey indicators have been constructed by pooling staff survey data for across the four prior Lincolnshire area CCGs for the staff survey years of interest.

Self reporting

11 Total number of staff employed within this organisation at the date of the report:

Workforce of 279 employees at the end of June 2020 (excluding non-executive directors and lay members). A further 7 non-executive directors and 2 lay members were also listed.

12 Proportion of BME staff employed within this organisation at the date of the report:

3.6% of the 274 employees of known ethnicity were listed as BME (excluding non-executive directors and lay members).

13 The proportion of total staff who have self reported their ethnicity:

98.2% of the workforce of 279 employees at the end of June 2020 (excluding non-executive directors and lay members) self-reported their ethnicity.

14 Have any steps been taken in the last reporting period to improve the level of self reporting by ethnicity?

No further actions have been identified due to the high level of reporting achieved.

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

It is intended to carry out a data validation exercise to review the data currently held on staff and ensure the data held is up to date and accurate.

Following the merger of the CCGs, it is intended that Self service will be rolled out to all staff to allow them to self report their data. It is expected that this will enhance the data quality for this metric.

Workforce data

16 What period does the organisation's workforce data refer to:

Staff in post at June 2020

17 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.

Data for reporting year:

Total N refers to those of known ethnicity.

These figures exclude non-executive directors and lay members.

OVERALL %BME

Workforce of known ethnicity: 3.6% BME; (Total N = 274)

Ethnicity was not known for 1.8% 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.

Data for previous year:

NHS Lincolnshire CCG was formed in April 2020

The implications of the data and any additional background explanatory narrative:

When using the specified WRES scheme for pay band analyses, 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 and lay members of the Board).

In a supplementary analysis, pay bands were pooled to account for the small number of employees within each individual pay band. When the workforce was analysed in this fashion, again BME staff were proportionally represented in each group of pooled pay bands. This reflected the small number of BME people employed by the CCG.

2019/20: CLINICAL AND NON-CLINICAL POOLED %BME

Workforce overall: 3.6%; (Total N = 274)
Bands 2 to 4: REDACTED%; (Total N = 62)
Bands 5 to 7: REDACTED%; (Total N = 106)
Bands 8A to 8B: REDACTED%; (Total N = 51)

Bands 8C to VSM and Medical: REDACTED%; (Total N = 55)

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:

The CCG's Equality Objective action plan sets out key objectives including an objective focussed specifically to addressing BAME disparity. The CCG's WRES action plan will link to these objectives as shown in section 22.

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

Data for reporting year:

Incalculable, please refer to narrative

Data for previous year:

N/A

The implications of the data and any additional background explanatory narrative:

NHS Lincolnshire CCG was formed in April 2020 by the merger of the previous four Lincolnshire area CCGs: NHS Lincolnshire West CCG, NHS South West Lincolnshire CCG, NHS South Lincolnshire CCG & NHS Lincolnshire East CCG. This indicator was constructed by pooling recruitment data for the 19/20 financial year across the four prior Lincolnshire area CCGs.

In 2019/20, 2.9% of White people shortlisted were appointed and 0.0% of BME people shortlisted were appointed. As no BME people were recruited in the period of interest, it is not possible to calculate the likelihood ratio for the indicator. Given the very small number of appointees overall (fewer than ten), little can be said of the pattern of recruitment in 2019/20.

It should be noted that a recruitment freeze was in operation from the 1st April 2019. Appointments could only be made with senior approval.

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:

It is intended that a review of the recruitment information collection process will take place to ensure all posts including internal moves are captured as currently not all such moves are captured in the data.

19 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.

Data for reporting year:

No formal disciplinary proceedings

Data for previous year:

N/A

The implications of the data and any additional background explanatory narrative:

NHS Lincolnshire CCG was formed in April 2020 by the merger of the previous four Lincolnshire area CCGs: NHS Lincolnshire West CCG, NHS South West Lincolnshire CCG, NHS South Lincolnshire CCG & Lincolnshire East CCG. This indicator was constructed by pooling formal disciplinary data for the two-year period to the end of March 2020 across the four prior Lincolnshire area CCGs.

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:

The CCG is pleased to note that no formal disciplinary proceedings have taken place in this or the proceeding year. This may be considered more normal in a CCG as opposed to a Trust with 5,000 staff.

The CCG remains committed to a diverse and inclusive workforce and as shown in the Equality Objectives and EDS2 produced by the former CCGs a commitment to policies and procedures are regularly reviewed to support this. The CCG's Equality forum represents a key tool in gaining soft intelligence and staff feedback on decision making and tool in inclusive leadership. As the CCG develops its Equality and WRES action plans so further SMART actions will be identified in this and other areas.

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

Data for reporting year:

Not available

Data for previous year:

Data has never been collected centrally to support reporting this metric since individual staff records do not support identifying the relative rate.

The implications of the data and any additional background explanatory narrative:

As the data is not available no implications can be drawn, now that the single CCG has been formed it is vital that a mechanism is developed to support reporting this data going forward.

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:

The CCG will review the current methods for collecting training and development data, this will link to the new Learning and Development policy and PDR process. The completion of the PDR forms will enable learning and development activity to be recorded by line managers and or staff using ESR. Where bespoke training activity is undertaken this will be recorded by the HR team so that individual employee records can be updated.

Further detail will be provided in the CCG's action plan which will be compiled be the end of October. It is anticipated that this data will be available for the CCG's next WRES reporting period (March 2021). Once the data is available it will permit it to be interrogated to determine whether there are any inequalities in opportunities to undertake non mandatory training.

BME:

21 KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.

Data for reporting year:
White: 10.7%
BME: SUPPRESSED AT SOURCE (see narrative)
Data for previous year:
White: 8.2%

SUPPRESSED AT SOURCE (see narrative)

The implications of the data and any additional background explanatory narrative:

NHS Lincolnshire CCG was formed in April 2020 by the merger of the previous four Lincolnshire area CCGs: NHS Lincolnshire West CCG, NHS South West Lincolnshire CCG, NHS South Lincolnshire CCG & NHS Lincolnshire East CCG. This indicator was constructed by pooling staff survey data across the four prior Lincolnshire area CCGs for the staff survey years of interest.

In 19/20, 10.7% of White staff (18/168) who took part in the staff survey reported experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months. Results for BME staff were suppressed at source due to the small number of BME respondents (reflecting the small number of BME people employed by the CCGs).

In 18/19, 8.2% of White staff (13/159) who took part in the staff survey reported experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months. Results for BME staff were suppressed at source due to the small number of BME respondents (reflecting the small number of BME people employed by the CCGs).

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:

It should be noted that the majority of CCG staff do not deal directly with the public. (There are operational teams e.g. Continuing Health Care, Safeguarding, Mental Health etc who are public facing and deal directly with the public to perform assessments.)

While the total above is in line with other CCGs it does suggest that further action should be taken to look at how staff can be protected and supported with regard to (challenging public). Due to the focus on developing the culture and inclusivity of the new CCG internally this area is not specifically mentioned in the objectives, however the CCG will need to include a response to any issues emerging from the survey. For example it may be appropriate to undertake a review of the CCG's external facing policies such as the complaints policy to understand whether particular teams feel at risk of bullying and harassment and what actions may be required to support them. A review of the EDS2 reports of the previous 4 CCGs illustrates that complaints focus around CHC decision making. Noting the key priority of the objectives, there will be some interdependency between this response and that in the next section.

22 KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.

Data for reporting year:
White: 13.0%
BME: SUPPRESSED AT SOURCE

Data for previous year:

White: 11.3%

BME:

SUPPRESSED AT SOURCE

The implications of the data and any additional background explanatory narrative:

NHS Lincolnshire CCG was formed in April 2020 by the merger of the previous four Lincolnshire area CCGs: NHS Lincolnshire West CCG, NHS South West Lincolnshire CCG, NHS South Lincolnshire CCG & Lincolnshire East CCG. This indicator was constructed by pooling staff survey data across the four prior Lincolnshire area CCGs for the staff survey years of interest.

In 19/20, 13.0% of White staff (22/169) who took part in the staff survey reported experiencing harassment, bullying or abuse from other staff in the last 12 months. Results for BME staff were suppressed at source due to the small number of BME respondents (reflecting the small number of BME people employed by the CCGs).

In 18/19, 8.2% of White staff (18/160) who took part in the staff survey reported experiencing harassment, bullying or abuse from other staff in the last 12 months. Results for BME staff were suppressed at source due to the small number of BME respondents (reflecting the small number of BME people employed by the CCGs).

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:

The CCG remains committed to ensuring a safe inclusive environment for staff and will continue to review the annual survey, feedback from staff and other soft information sources. As the new organisation is now larger than the previous single CCGs there may have been dynamic changes. As part of the merger process staff had the opportunity to comment on the new structures. In addition, the CCG has created a staff engagement group which meets regularly and has the opportunity to feedback to the executive team. As a result of the approach taken by the CCG so far

and the engagement by staff it is positive to report that the merger has not seen a spike in staff feeling unhappy.

The link to the CCG's Equality objectives can also be seen below showing the interdependency between the WRES, Objectives and EDS2.

1. Workforce data and staff support

- Enhance the data quality held on CCG staff via ESR, through an updated data cleansed system to improve data recording and monitoring.
- WRES/WDES delivery of annual submissions to NHSE and implementation of action plans.
- GPG reporting dependant on the workforce numbers (threshold 250 staff), the new CCG will need to consider submitting gender pay gap data and so be responding to this data with an action plan.
- Introduce staff networks to support the development of different protected characteristics.

2. Visible leaders to champion EDHR

- Leaders to be at the forefront of improving engagement with vulnerable groups/populations with regards to service change.
- Managers to be more involved in implementing EDHR actions/initiatives as part of their roles and responsibilities.
- Senior staff to be involved with the new Lincolnshire CCG Equality Forum –set up to support the implementation EIHR objectives and monitoring and review of outcomes.
- Support providers to address barriers to accessing services to by patients

The CCG is yet to publish an EDS2 return (due to be developed March 2021) but a review of those of the previous 4 CCGs has shown further information under goal 3. Further work is needed however to reach the next steps as set out in the objectives.

Data for reporting year:

23 KF 21. Percentage believing that the organisation provides equal opportunities for career progression or promotion.

White: 93.5%
BME: SUPPRESSED AT SOURCE
Data for previous year:
White: 94.4%
BME:

SUPPRESSED AT SOURCE

The implications of the data and any additional background explanatory narrative:

NHS Lincolnshire CCG was formed in April 2020 by the merger of the previous four Lincolnshire area CCGs: NHS Lincolnshire West CCG, NHS South West Lincolnshire CCG, NHS South Lincolnshire CCG & NHS Lincolnshire East CCG. This indicator was constructed by pooling staff survey data across the four prior Lincolnshire area CCGs for the staff survey years of interest.

In 19/20, 93.5% of White staff (115/123) who took part in the staff survey felt that the CCG provides equal opportunities for career progression or promotion. Results for BME staff were suppressed at source due to the small number of BME respondents (reflecting the small number of BME people employed by the CCGs).

In 18/19, 94.4% of White staff (117/124) who took part in the staff survey felt that the CCG provides equal opportunities for career progression or promotion. Results for BME staff were suppressed at source due to the small number of BME respondents (reflecting the small number of BME people employed by the CCGs).

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:

Improving the inclusive culture of the CCG and making it an exceptional place to work is key to the CCG's <u>EDI action plan and objectives</u>.

Working with the CCG's Equality forum the proposed Equality and WRES action plans are intended to substantially advance this approach.

Data for reporting year:

24 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: 2.4%
BME: SUPPRESSED AT SOURCE
Data for previous year:

White: 1.2%

BME:

SUPPRESSED AT SOURCE

The implications of the data and any additional background explanatory narrative:

NHS Lincolnshire CCG was formed in April 2020 by the merger of the previous four Lincolnshire area CCGs: NHS Lincolnshire West CCG, NHS South West Lincolnshire CCG, NHS South Lincolnshire CCG & NHS Lincolnshire East CCG. This indicator was constructed by pooling staff survey data across the four prior Lincolnshire area CCGs for the staff survey years of interest.

In 19/20, 2.4% of White staff (4/166) who took part in the staff survey reported experiencing discrimination from other staff in the last 12 months. Results for BME staff were suppressed at source due to the small number of BME respondents (reflecting the small number of BME people employed by the CCGs).

In 18/19, 1.2% of White staff (2/161) who took part in the staff survey reported experiencing discrimination from other staff in the last 12 months. Results for BME staff were suppressed at source due to the small number of BME respondents (reflecting the small number of BME people employed by the CCGs).

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:

The CCG is currently developing its identity and values to maintain and improve staff satisfaction. During 19/20 the CCG held two all staff events to assist with this work. This has been followed up by virtual staff events to develop and consolidate this. This is also linked to the wider EDI action plan.

25 Percentage difference between the organisations' Board voting membership and its overall workforce.

Data for reporting year:

Difference (%BME total board - %BME overall workforce): +10.6% Difference (%BME voting board - %BME overall workforce): +6.4% Difference (%BME executive board - %BME overall workforce): +8.9%

Data for previous year:

N/A

The implications of the data and any additional background explanatory narrative:

In 2019/20, BME people were proportionately represented on the Board of the CCG compared to their level of representation in the workforce of the CCG, overall, in terms of voting members, and in terms of executive members.

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:

This is covered in the CCG's Equality Objective action plan.

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

Following the CCG's merger there is now a new single board where representation of board members continues to be proportionately representative however as will be outlined in the action the CCG will continue to work to continue to monitor and improve the representation on board.

27 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.

To be published (October 2020)