# Workforce Race Equality Standard

## **REPORTING TEMPLATE** (Revised 2016)

## Template for completion

**Name of organisation**

Lincolnshire Community Health Services

**Date of report: month/year**

July 2017

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

Lisa Green, Director of Nursing and Operations

**Name and contact details of lead manager compiling this report**

Rachel Higgins, Equality & Diversity Lead

**Names of commissioners this report has been sent to (complete as applicable)**

West CCG

**Name and contact details of co-ordinating commissioner this report has been sent to (complete as applicable)**

Karen Goldsmith Equality and Human Rights Project Manager NHS Arden and Greater East Midlands Commissioning Support Unit

**Unique URL link on which this Report and associated Action Plan will be found**

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

Publications Gateway Reference Number: 05067

# Report on the WRES indicators

## 1. Background narrative

### a. Any issues of completeness of data

The Census 2011 data shows that Lincolnshire's non-white population is 2.4%. LCHS' data for BME staff shows 2.94%. Engagement with the BME staff group and with local BME communities regarding applying for jobs within LCHS.

Metric 4- Non-mandatory training from LCHS Systems has been used to compile this data - however, it is not certain if this has captured every piece of non-mandatory training attended as it relies on staff self reporting to the workforce development team to put onto the system

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

LCHS BME employment data of 2.94% is small compared to the national non-white population of 14%, however, compared to the census data in 2011,the non-white population of Lincolnshire is 2.4%. LCHS there are is a only a 0.54% difference showing representation of our local communities the workforce.

## 2. Total numbers of staff

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

1974

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

2.94%

## 3. Self reporting

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

100% of staff have self-reported their ethnicity

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

A campaign to engage with staff to update equality data on ESR supported by Staff Side is taking place in August - end September 2017 with data comparisons at the end of this period.
Continuous promoting of the staff survey.

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

Steps to continue with self-reporting for all protected characteristics are in place with actions to raise awareness around updating the Electronic Staff Records (ESR)

## 4. Workforce data

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

April 2016 - March 2017

## 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. | See attachment | See attachment | The workforce data is taken from 1.4.16 – 31.3.17. The Census data is from 2011.<br><br>• Census data National non-white population of 14%.<br>• Census data Lincolnshire's non-white population 2.4%<br>• LCHS BME staff 2.94% | • NHS Jobs 'How to….'workshops being held in Boston aimed at the Eastern European Community – to increase recruitment from this community to reflect the community we serve.<br>• After events to engage with other established communities in Lincolnshire. |
| 2 | Relative likelihood of staff being appointed from shortlisting across all posts. | 0% | 1.35% | • Lincolnshire's non-white population 2.4%<br>• LCHS BME staff 2.94%<br>• NHS Jobs BME applicants: white any other background 4.6%, other BME categories 9.1%.<br>• NHS BME Jobs shortlisted: white any other background 4.2% other BME categories 6.8%, 1.0% undisclosed, White British 88.0%, white – Irish 0.6% | • Monitor ethnicity data annually – next review April 2018<br>• NHS jobs 'How to…' workshops in place aimed at Eastern European Communities' accessing applications in the Boston/Spalding. To assess other areas to target.<br>• Consider deep dive into recruitment files. |
| 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. | 0% | 0% | In the period of April 16 - March 17 only 5 cases of formal disciplinary. 2 identified as White British, 3 unknown. | Discussed with Freedom to Speak Up Guardian (FTSUG). Staff have approached the FTSUG regarding equality issues. Data is collated and shared with the National Guardian Office on a quarterly basis. Equality information is recorded though potentially would not be shared due to LCHS diversity make up as it would potentially identify the person raising concerns. |
| 4 | Relative likelihood of staff accessing non-mandatory training and CPD. | 0.66% | 0.79% | There is a rise of 13% of BME staff accessing non-mandatory training. | • Review data annually – next review April 2018.<br>• Discuss with BME Staff network |

# 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)**<br>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 23.57<br>BME 25 | White 25.86<br>BME 7.14 | BME LCHS 2016 25%<br>BME Community trust average 24%<br>BME LCHS 2015 7%<br><br>The % of staff experiencing B&H in the last 12 | • Engaging with staff side and Workforce Operational Lead to develop a communication plan raise awareness of bullying & harassment and what simple steps can be taken to address issues. |
| 6 | KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months. | White 22.13<br>BME 29.03 | White 22.73<br>BME 16.67 | BME LCHS 2016 29%<br>BME Community trust average 24%<br>BME LCHS 2015 17%<br><br>The % of staff experience B&H in the last 12 | • Engaging with staff side and Workforce Operational Lead to develop a communication plan raise awareness of bullying & harassment and what simple steps can be taken to address issues. |
| 7 | KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion. | White 83.58<br>BME 70.59 | White 92.53<br>BME 72.73 | BME LCHS 2016 71%<br>BME Community trust average 79%<br>BME LCHS 2015 73%<br><br>The % of staff believing that the Trust provides | • Engaged with Workforce to ensure the "How to….." workshops include increasing line managers skills in managing and responding appropriately to any concerns raised or behaviours seen. |
| 8 | Q17. In the last 12 months have you personally experienced discrimination at work from any of the following?<br>b) Manager/team leader or other colleagues | White 5.90<br>BME 6.67 | White 5.37<br>BME 10.71 | BME LCHS 2016 7%<br>BME Community trust average 11%<br>BME LCHS 2015 11%<br><br>Decrease from 2015 of 4%. | • Engage with staff re: BME Staff network and other staff around experiences with bullying, harassment and discrimination, what support they did or did not receive. |
| | **Board representation indicator**<br>For this indicator, compare the difference for White and BME staff. | | | | |
| 9 | Percentage difference between the organisations' Board voting membership and its overall workforce. | White 2.9<br>BME -2.9<br>Unknown 0.0 | White 50.8<br>BME -1.5<br>unknown 49.2 | The % difference between the organisation's Board voting membership and its overall workforce has increased by -1.5. | LCHS recently went out to advert for NED's. Other avenues to advertise were looked at.<br><br>The three Trusts are considering Board Apprenticeships. |

**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?

Lincolnshire's demographics from the 2011 Census show that LCHS data reflects the community it serves. On comparison, the national data shows BME communities are represented at 14%, Lincolnshire non-white representation is 2.4% - not broken down into Eastern European or White AOWB. The 2.4% for Lincolnshire's non-white population is still very small when compared with the national non-white population of 14%. LCHS's BME workforce is only 2.94% of the overall workforce which is showing that LCHS is representative is above representation of our population in Lincolnshire.
LCHS has also planned NHS Job awareness session in Boston to support recruitment from the established Eastern European Communities in the Boston and Spalding areas - these are being held from September - December 2017.

## 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.

See attached WRES 17/18 Action Plan.

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