

SELCCG 2019-20 WRES Report & Action Plan

SELCCG 2019-20 WRES Data & 2020-21 Action Plan

Equalities Committee – 21 October 2020

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About Workforce Race Equality Standards (WRES)

In 2014, NHS England and the NHS Equality and Diversity Council agreed action to ensure employees from Black and Minority Ethnic (BME) backgrounds have equal access to career opportunities and receive fair treatment in the workplace. It was agreed that a Workforce Race Equality Standard (WRES) should be developed, and in April 2015 it was made available to the NHS.

All NHS organisations including CCGs, Trusts and CSUs as well as national organisations are encouraged to implement the WRES in an open and transparent way.

The report has the following key roles:

- To enable organisations to compare their performance with others in their region and those providing similar services, with the aim of encouraging improvement by learning and sharing good practice
- To provide a national picture of WRES in practice, to colleagues, organisations and the public on the developments in the workforce race equality agenda

Foreword

NHS South East London Clinical Commissioning Group is a clinically led organisation responsible for planning, paying for and monitoring most of the health services in the six boroughs that we cover.

Our CCG, as an NHS organisation, commissioner of care and as an employer, (has an unwavering) has reaffirmed its commitment to tackling (racism and) all forms of inequality and especially racism – ensuring equity and fairness for all. It is unacceptable that our Black, Asian and Minority Ethnic (BAME) communities continue to experience significantly poorer employment and health outcomes. We must respond faster and do more to eliminate this inequality through our commissioning.

The disproportionate impact of Covid-19 on BME people in the UK and elsewhere, combined with the increased awareness of the Black Lives Matter movement, have shone a spotlight on structural inequalities and institutional racism in British society that have been tolerated for too long.

Since 2015, the six south-east London CCGs; Bexley, Bromley, Greenwich, Lambeth, Lewisham and Southwark have used the Workforce Race Equality Standard (WRES) to understand differences in the experience of their workforces and put in place actions to reduce these differences. This is SEL CCG's first WRES report that analyses data from all six CCGs for the financial year April 2019-March 2020. Future WRES reports will continue to report on SEL CCG.

As well as an Equalities Committee that supports this critical agenda and reports directly into the Governing Body, we have established a Race Equality Executive Group chaired by the Accountable Officer. This group has developed a Race Equality Delivery Plan with ambitious aims to improve the diversity of the workforce, particularly at senior levels and to improve recruitment and selection processes to eliminate bias. The Plan also aims to address leadership understanding of the issues facing ethnic minority staff and to better support ethnic minority staff to progress internally. These actions have been embedded into the SEL CCG 2020-21 WRES Action Plan as appropriate.

As part of our staff network programme, we have developed a BAME Staff Group to give staff a psychologically safe space to support each other, set their own agenda with regard to their lived experience within SEL CCG and their aims and ambition for change. SEL CCG values the contribution that the BAME Staff Group can make to addressing inequality and fostering and maintaining an inclusive organisation.

CCGs are required to give assurance to NHS England that their providers are implementing and using the WRES. Evidence of the NHS Trusts' WRES compliance within south-east London can be found at Appendix C.

Joy Ellery, SEL CCG Patient & Public Involvement Lay Member
Joint Chair, SEL CCG Equalities Committee

Faruk Majid, SEL CCG Clinical Lead
Joint Chair, SEL CCG Equalities Committee

Looking to the future

Importantly, the data included here references six boroughs which were – until April 2020 – separate clinical commissioning groups. One of the benefits of merging is we are increasingly able to share learnings across the boroughs and in doing this hope to ‘level up’ where there is an opportunity, as well as throw collective weight behind addressing some of the embedded equalities issues this data identifies.

The Governing Body (see previous slide) and executive leadership of the CCG is fully committed to making a demonstrable improvement to race equality within the organisation. That may mean that we adapt our plan as we learn more about what works and what doesn’t, and we have also initiated an ongoing dialogue with our staff to get their feedback.

Significant resource and effort is being focused on delivering some actions as quickly as possible, with the hope that this maximises the time to see some impact. One of our commitments is to review progress on equalities regularly at the highest levels of the organisation.

Also now more than ever we are working with partners at a borough and south east London level with the aim to both learn from successes and do things across organisations where it makes most sense too; recognising equalities is something we want to improve across all of health and social care.

Christina Windle
Chief Operating Officer & Equalities SRO

NHS People Plan 2020-21 / London Workforce Race Equality Strategy

NHS People Plan 2020-21

“There is strong evidence that where an NHS workforce is representative of the community that it serves, patient care and the overall patient experience is more personalised and improves.

This plan sets out actions to support transformation across the whole NHS.

It focuses on how we must all continue to look after each other and foster a culture of inclusion and belonging, as well as action to grow our workforce, train our people, and work together differently to deliver patient care.

The plan sets out what the people of the NHS can expect – from their leaders and from each other – for the rest of 2020 and into 2021.”

London Workforce Race Equality Strategy

“More than 44.9% of our NHS staff in London are from a BME background and the majority of our doctors, nurses and midwives bring global experience to their roles.

However, it is well documented that the experience of BME colleagues working in London is not equal to that of their white counterparts. This is simply not acceptable, and we now need to make a step-change to move forwards.

This strategy is aimed at starting a coordinated, consistent and sustainable programme of work to make that change. It is aligned with the spirit and actions of the People Plan and there is a great deal of interconnection between the two documents.”

**SELCCG 2020-21 WRES Action Plan is linked to the
NHS People Plan and the London Workforce Race Equality Strategy**

SELCCG 2019-20

WRES Data analysis

SELCCGs 2019-20 WRES Data – overall summary / analysis

Indicators	Highlights
1	<ul style="list-style-type: none"> At Bands 8-9: BME staff levels are less than the overall BME workforce and the BME borough population. The gaps are 3.5% and 3.33% respectively. At VSM: BME staff levels are less than the overall BME workforce and the BME borough population. The gaps are 14.87% and 14.7% respectively.
2	<ul style="list-style-type: none"> White applicants/staff were 1.6x more likely to be appointed from shortlisting compared to BME applicants/staff. This overall SELCCG figure is equal to the London Trusts average. However, there was significant variance in the likelihood for two CCGs.
3	<ul style="list-style-type: none"> There were no disciplinarys reported.
4	<ul style="list-style-type: none"> The average, that is similar to the London Trusts average is based on 3 CCGs, as 3 CCGs did not collect access to non-mandatory training in a meaningful way.
5	<ul style="list-style-type: none"> SELCCG figures are similar to the England CCGs averages. However, there was significant variance in the reporting of bullying and harassment in some CCGs.
6	<ul style="list-style-type: none"> The overall SELCCG figure for white staff is similar to the England CCGs average. The figure for BME staff is above the average and for some CCGs white and BME staff reported bullying and harassment significantly more than England CCG averages.
7	<ul style="list-style-type: none"> The overall SELCCG figure for white staff is similar to the England CCGs average. The figure for BME staff is a significantly below the average. There is a significance variance in some CCGs between white and BME staff perception regarding equality in career progression and promotion.
8	<ul style="list-style-type: none"> The overall figures for SELCCG are significantly above the England CCGs averages. (Low percentages are good) Significantly more BME staff from four CCGs have personally experienced discrimination at work from Manager, Team Leader or other colleagues compared to White staff from two CCGs.
9	<ul style="list-style-type: none"> BME Governing Body members are at higher levels than the overall BME workforce levels and the BME borough population. The gaps are +4.00% and +4.17% respectively. Two CCGs do not have BME Governing Body membership that is similar to BME staff numbers in the overall workforce/ representative of communities served.

WRES Indicator 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 disaggregated by: Non-Clinical Staff/Clinical staff

WRES Indicator 1 - 2020	Percentage of White/BME Bands 1-7			Percentage of BME staff in SELCCG workforce	Percentage of White/BME Bands 8-9			BME Population in Borough	Percentage of White/BME Band VSM		
	White	BME	Not stated		White	BME	Not stated		White	BME	Not stated
SELCCG	58.67%	34.67%	6.50%	33.17%	66.17%	29.67%	2.50%	33%	81.33%	18.83%	0.00%
Highest SELCCG borough percentage	71%	44%	16%	49%	83%	50%	8%	47%	100%	100%	0%
Lowest SELCCG borough percentage	50%	16%	0%	24%	44%	14%	0%	19%	88%	0%	0%

Bands 1-7	Bands 8-9	VSM
BME staff are at similar levels to the overall BME workforce levels and the BME borough population. The gaps are +1.5% and +1.67% respectively.	BME staff levels are less than the overall BME workforce and the BME borough population. The gaps are -3.5% and -3.33% respectively	BME staff levels are less than the overall BME workforce and the BME borough population. The gaps are -14.87% and -14.7% respectively

Indicators 1 and 9

SELCCG has developed a Race Equality Delivery Plan with ambitious aims that focus on improving the diversity of the workforce particularly at senior levels, improving recruitment and selection processes to eliminate bias, improving leadership understanding of the issues facing ethnic minority staff and better supporting ethnic minority staff to progress internally. These actions have been embedded into the SELCCG 2020-21 WRES Action Plan as appropriate.

WRES Indicator 9:

Percentage difference between (i) the organisations' Board voting membership and its overall workforce and (ii) the organisations' Board executive membership and its overall workforce

WRES Indicator 9 - 2020	Percentage BME Governing Body	Percentage of BME staff in SELCCG workforce	BME Population in Borough
SELCCG	37.17%	33.17%	33%
Highest SELCCG borough percentage	53%	49%	47%
Lowest SELCCG borough percentage	13%	24%	19%

Governing Body

BME Governing Body members are at higher levels than the overall BME workforce levels and the BME borough population. The gaps are **+4.00%** and **+4.17%** respectively.

Indicators 1 and 9

SELCCG has developed a Race Equality Delivery Plan with ambitious aims that focus on improving the diversity of the workforce particularly at senior levels, improving recruitment and selection processes to eliminate bias, improving leadership understanding of the issues facing ethnic minority staff and better supporting ethnic minority staff to progress internally. These actions have been embedded into the SELCCG 2020-21 WRES Action Plan as appropriate.

WRES Indicators 2 - 4:

Organisation's name	WRES 2019-2020 data submission		
	Indicator 2 Relative likelihood of staff being appointed from shortlisting across all posts	Indicator 3 Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation	Indicator 4 Relative likelihood of staff accessing non-mandatory training and CPD
SELCCG	1.6:1	0	0.93:1
Highest variance	3.07:1	n/a	1.5:1
Lowest variance	0.33:1	n/a	0.8:1
London Trusts average	1.6:1	1.67:1	0.95:1

Indicator 2	Indicator 3	Indicator 4
<p>White applicants/staff were 1.6x more likely to be appointed from shortlisting compared to BME applicants/staff. This overall SELCCG figure is equal to the London Trusts average.</p> <p>However, there was significant variance in the likelihood for two CCGs.</p> <p>Review of recruitment and selection processes is part of the SELCCG 2020-21 WRES Action Plan.</p>	<p>No CCG reported incidences of formal disciplinary cases.</p> <p>As part of a Human Resources action SELCCG to develop a process to record informal and formal disciplinaries, including establishing robust decision-tree checklists for managers, post-action audits on disciplinary decisions, and pre-formal action checks.</p>	<p>The SELCCG average, that is similar to the London Trusts average is based on 3 CCGs, as 3 CCGs did not collect access to non-mandatory training in a meaningful way.</p> <p>SELCCG is to develop, agree and implement a formal SELCCG wide process for accessing non-mandatory training and CPD and recording it.</p> <p>SELCCG will also increase promotion of learning and development opportunities.</p>

WRES Indicators 5 - 8:

WRES staff survey questions 2020	Indicator 5 Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.		Indicator 6 Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.		Indicator 7 Percentage of staff believing that the CCG provides equal opportunities for career progression or promotion.		Indicator 8 In the last 12 months have you personally experienced discrimination at work from any of the following? Manager / team leader or other colleagues	
	White	BME	White	BME	White	BME	White	BME
Organisation's name								
SELCCG	8.33%	6.85%	23.05%	31.73%	85.42%	41.10%	12.63%	20.85%
Highest SELCCG variance/percentage	21.40%	13.30%	39.10%	44%	89.50%	50%	14.70%	32%
Lowest SELCCG variance/percentage	0%	0%	13%	23.10%	85%	33.30%	0%	13%
England CCGs Average	9.9%	8.3%	19.60%	23.20%	88.60%	56.30%	3.60%	12.50%

Indicator 5	Indicator 6	Indicator 7	Indicator 8
<ul style="list-style-type: none"> SELCCG figures are similar to the England CCGs averages. However, there was significant variance in the reporting of bullying and harassment in some CCGs. SELCCG plans to review bullying and harassment concerns and support line managers and others to respond appropriately with behaviours framework and training. 	<ul style="list-style-type: none"> The overall SELCCG figure for white staff is similar to the England CCGs average. The figure for BME staff is above the average and for some CCGs white and BME staff reported bullying and harassment significantly more than England CCG averages. As well as the review for Indicator 5 SELCCG will map current 'state of play' and develop interventions based on future aspirations as part of the HR action plan. 	<ul style="list-style-type: none"> The overall SELCCG figure for white staff is similar to the England CCGs average. The figure for BME staff is a significantly below the average. There is a significance variance in some CCGs between white and BME staff perception regarding equality in career progression and promotion. SELCCG has developed a Race Equality Delivery Plan with interventions to respond to career progression and promotion. 	<ul style="list-style-type: none"> The overall figures for SELCCG are significantly above the England CCGs averages. SELCCG has developed interventions as part of the Race Equality Delivery Plan that include: <ul style="list-style-type: none"> Development of further staff training and development on race equalities issues Freedom to Speak Up Guardians that are accessible to all staff.

SELCCG Response to 2019-20 WRES Data analysis

SELCCG WRES 2020-21 Action Plan – part 1

Key:								
Significant variance between White and BME staff experience			Some variance between White and BME staff experience			No variance between White and BME staff experience		
Indicator	Point for focus	Status / Priority level	Actions already agreed by the organisation	Target	Owner	Action Status	Planned end Date	
1 and 9	Senior BME Representation in Bands 8+, VSM and Governing Body	Medium	<ol style="list-style-type: none"> Utilise diversity recruitment consultants for all external senior vacancies (8B+) Implement a reverse mentoring programme Create buddying system between different groups and ethnicities in the Governing Body Improve data disclosure in terms of staff information in order to be clear on areas of challenge and priorities Discuss progress on every Governing Body at least until the end of the financial year to ensure demonstrable change, all GB members are informed etc CCG to develop a talent pool across the organisation to ensure prioritisation of diversity in talent management, and consistency of opportunities to different demographics For senior members of the CCG to participate in the Board Level Race Awareness Programme and identify individuals on boards to participate in the WRES training programme when these are released Regionally LWRES recommends Commissioners should work with providers in enhancing their performance against indicators of race inequality. 	<ol style="list-style-type: none"> Used for 100% of recruitment at these grades; they would look internally first and then externally. Ten Band 8D+ matched with a reverse mentor as a pilot At least 90% of the Governing Body have a buddying arrangement. Reasons for data collection included on CCG requests <ul style="list-style-type: none"> Staff report understanding reason for disclosure 90% completion rate of following data values: age, disability, ethnicity/race, gender, pregnancy, religion/fait, sexual orientation (year 1) Item on four public governing bodies and all seminars held before April 2021 	<p>Christina Windle / Usman Niazi</p> <p>Usman Niazi/ Angela Paradise</p> <p>Theresa Osborne</p> <p>Angela Paradise</p> <p>Christina Windle</p>	<ol style="list-style-type: none"> Tender exercise commenced Commenced Commenced Commenced Commenced Early stages of development When regional training programme available. Commenced 	<ol style="list-style-type: none"> End October 2020 On-going from December 2020 On-going from September 2020 End December 2020 On-going from August 2020 Already report to IGP quarterly as of August 	

SELCCG WRES 2020-21 Action Plan – part 2

Indicator	Point for focus	Status / Priority level	Actions already agreed by the organisation	Target	Owner	Action Status	Planned end Date
2	To ensure the likelihood BME and White staff being shortlisted and appointed is equal.	Medium	<ol style="list-style-type: none"> 1 Identify and mitigate issues with recruitment process which limit ethnic diversity 2 CCG to review Recruitment & Selection processes to ensure there is high quality performance in recruitment, ensuring bias is removed at all stages and enabling SELCCG to take a creative, innovative approach to recruiting new staff. 3 Review of internal secondment/ recruitment processes to create a transparent process to promote suitable opportunities, increasing the accessibility and visibility of these roles. 	<ul style="list-style-type: none"> • 100% training for un-conscious bias • 100% interview panels have meaningful diversity (at least gender and ethnicity) • Relative likelihood score to be reduced incrementally over three-year period (Set target for year 1) 	Angela Paradise	In progress	End of December 2020
3	<p>Ensure that a process to record informal disciplinary is developed.</p> <p>Embed reliable data capture by ethnicity.</p>	Medium	<ol style="list-style-type: none"> 1. SELCCG to develop a process to record informal and formal disciplinarys, including establishing robust decision-tree checklists for managers, post-action audits on disciplinary decisions, and pre-formal action checks 	<ul style="list-style-type: none"> • Decision-trees under development (including pre-formal action checks) • Audit process also under development 	Angela Paradise	Planned	Awaiting national / London proposal
4	To develop an organisational-wide access to non-mandatory training process.	Medium	<ol style="list-style-type: none"> 1. Develop, agree and implement formal SELCCG wide process for accessing non-mandatory training and CPD and recording it. Increase promotion of learning and development opportunities. 	<ul style="list-style-type: none"> • New training and development policy approved at Integrated Governance and Performance Committee in September 2020. • Access to non-mandatory training is via training review panel, and all requests are subject to equalities monitoring 	Angela Paradise	In progress	End of December 2020

SELCCG WRES 2020-21 Action Plan – part 3

Indicator	Point for focus	Status / Priority level	Actions already agreed by the organisation	Target	Owner	Action Status	Planned end Date
5 and 6	Reducing incidences of bullying and harassment	Medium	<ol style="list-style-type: none"> Promote a positive culture to tackle levels of bullying and harassment. Ensuring that line managers are equipped to provide appropriate support and interventions are in place for staff and support reduction in reporting. Map current 'state of play' and develop interventions based on future aspirations. [Note this is proposed to be added to broader HR action plan, as not WRES specific] 	<ul style="list-style-type: none"> Reduced indicators for this through appraisals, staff network, and staff survey training – for example on micro incivilities Behaviours framework and training adopted (indicator TBC) Benchmarking and monitoring progress of annual WRES data 	Angela Paradise	In progress	April 2021
7	To address the variance in belief that the CCG provides equal opportunities for career progression or promotion between BME and White.	High	<ol style="list-style-type: none"> Implement a reverse mentoring programme Start a sponsorship programme for staff to have direct support from a CCG Executive. Ethnic minority staff will be prioritised Ask that all members of the CCG executives have at least one member of staff that they formally mentor. They should all open this opportunity to ethnic minority staff See Indicator 1 above re Talent Management process Report regularly to CCG governance on demographics of new appointments. Communicate on changes to staff periodically 	<ol style="list-style-type: none"> Ten Band 8D+ matched with a reverse mentor as a pilot At least 5 staff identified as a pilot That 11 CCG executives have confirmed mentees Demonstrable regular reporting to IGP/GB and staff 	<p>Usman Niazi/ Angela Paradise</p> <p>Angela Paradise</p> <p>Angela Paradise / Theresa Osborne (data)</p>	<ol style="list-style-type: none"> Commenced In progress In progress In progress 	<ol style="list-style-type: none"> On-going from December 2020 January 2021 End October 2020 On-going from August 2020

SELCCG WRES 2020-21 Action Plan – part 4

Indicator	Point for focus	Status /Priority level	Actions already agreed by the organisation	Target	Owner	Action Status	Planned end Date
8	To address incidences of discrimination for staff from all backgrounds	Medium	<ol style="list-style-type: none"> 1. Development of further staff training and development on race equalities issues Implement a monthly BAME engagement discussion, open to all which is run by members of the exec and BAME network to share stories, discuss progress on the plan etc 3. Ensure BAME Freedom to Speak Up Guardians are accessible to all staff Raise awareness of Freedom to Speak Up Guardians, how to approach them and reinforce messages 5. Work with communications, HR and others to encourage speaking up and reporting incidences 	<ol style="list-style-type: none"> 1. One all-staff session and at least one new training programme implemented 2. At least 6 discussions with staff this financial year, with identified resulting actions 3&4. Ensure BAME Freedom to Speak Up Guardians are representative of the CCG's staff and accessible to all staff 	<p>Angela Paradise</p> <p>Christina Windle</p> <p>Joy Ellery</p>	<ol style="list-style-type: none"> 1. Planned 2. Commenced September 2020 3&4. To be launched October 2020 5. Planned 	<ol style="list-style-type: none"> 1. End January 2021 2. On-going from September 2020 3. End October 2020

WRES Report & Action Plan Engagement

<ul style="list-style-type: none"> • Beyond BAME Group – NELCSU EDI Manager shares 1st Draft 	<ul style="list-style-type: none"> • August 2020
<ul style="list-style-type: none"> • Beyond BAME WRES Task & Finish Group – NELCSU EDI Team share 2nd Draft 	<ul style="list-style-type: none"> • September 2020
<ul style="list-style-type: none"> • SEL CCG invites All Staff to comment on WRES Action Plan 	<ul style="list-style-type: none"> • September 2020
<ul style="list-style-type: none"> • Beyond BAME Group – NELCSU EDI Manager shares all feedback on WRES Action Plan 	<ul style="list-style-type: none"> • October 2020
<ul style="list-style-type: none"> • Beyond BAME WRES Task & Finish Group – to review implementation and progress 	<ul style="list-style-type: none"> • November 2020 – March 2021

Next Steps

- **2020-21 WRES Report and Action Plan submitted to Governing Body for sign off by Chair's Action - October 2020**
- **Publish 2020-21 WRES Action Plan by 31 October 2020**
- **Monitoring progress** at Executive Race Equality Group. Progress report to Equalities Committee - quarterly

Appendices

Appendix A1-A5 - 2018-19 WRES Data for Six SEL CCGs

Appendix B - WRES Indicators

Appendix C - Local NHS Healthcare Providers' WRES Compliance

SELCCGs 2019-20 WRES Data – overall summary / analysis

<ul style="list-style-type: none"> • <i>At Bands 8-9: Three CCGs (50%) do not have BME staff at similar levels to the overall BME workforce and the BME borough population.</i> • <i>At VSM: One CCG has BME staff at VSM level that is more than the overall BME workforce and the BME borough population</i> • <i>In three CCGs (50%), BME and white staff were relatively just as likely to be appointed from shortlisting. However, in two CCGs (33%) white staff were more likely to be appointed than BME staff.</i> • <i>There were no disciplinaries reported.</i> 	<ul style="list-style-type: none"> • <i>Bullying and harassment from patients, relatives and the public is around the average levels for both BME and white staff.</i> • <i>There are significantly above average levels of bullying and harassment from staff in four CCGs (66%) towards BME and white staff.</i> • <i>In three CCGs (50%) it is not possible to know the percentage of BME staff that think that their CCG provides equal opportunities because of the low response rate for this question.</i> • <i>In the remaining three CCGs (50%) significantly fewer than average BME staff think that their CCG provides equal opportunities.</i> 	<ul style="list-style-type: none"> • <i>Significantly more BME staff from four CCGs (66%) have personally experienced discrimination at work from Manager, Team Leader or other colleagues compared to white staff from two CCGs (34%).</i> • <i>Four CCGs (66%) have BME Governing Body membership that is greater than BME staff numbers in the overall workforce/ representative of communities served.</i> • <i>Two CCGs (34%) do not have BME Governing Body membership that is similar to BME staff numbers in the overall workforce/ representative of communities served.</i>
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South East London CCGs - 2019-20

Indicator 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

(Workforce representation as at 31 March 2020) (Source: WRES data submission for 2019-20).

WRES Indicator 1 - 2020	Percentage of White/BME Bands 1-7			Percentage of BME staff in CCG workforce	Percentage of White/BME Bands 8-9			BME Population in Borough	Percentage of White/BME Band VSM		
	White	BME	Not stated		White	BME	Not stated		White	BME	Not stated
Organisation's name											
Bexley CCG	69%	31%	0%	28%	73%	21%	0%	21%	100%	0%	0%
Bromley CCG	71%	29%	0%	24%	83%	14%	3%	19%	0%	100%	0%
Greenwich CCG	48%	44%	7%	47%	47%	50%	3%	37%	100%	0%	0%
Lambeth CCG	68%	16%	16%	24%	72%	28%	0%	47%	100%	0%	0%
Lewisham CCG	46%	46%	8%	49%	44%	49%	8%	37%	100%	0%	0%
Southwark CCG	50%	42%	8%	27%	78%	21%	1%	37%	88%	13%	0%

Bands 1-7	Bands 8-9	VSM
Most CCGs have BME staff at similar levels to the overall BME workforce levels and the BME borough population.	2 CCGs (33%) have BME staff at similar levels to the overall BME workforce and the BME borough population	One CCG has BME staff at VSM level that is more than the overall BME workforce and the BME borough population

South East London CCGs WRES indicators 2 – 4 data, 2019-20

(Source: WRES data submission for 2020).

Organisation's name	WRES 2019-2020 data submission		
	Indicator 2 Relative likelihood of staff being appointed from shortlisting across all posts	Indicator 3 Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation	Indicator 4 Relative likelihood of staff accessing non-mandatory training and CPD
Bexley CCG	3.07:1	0	No data collected
Bromley CCG	0.81:1	0	0.8:1
Greenwich CCG	1.44:1	0	No data collected
Lambeth CCG	0.33:1	0	No data collected
Lewisham CCG	2.89:1	0	1.5:1
Southwark CCG	1.12:1	0	0.48:1
London Trusts average	1.6:1	1.67:1	0.95:1

- For three CCGs (50%), BME and White staff were relatively just as likely to be appointed from shortlisting. However, for two CCGs (33%) White staff were more likely to be appointed than BME staff.
- There were no disciplinaries reported.
- Three CCGs do not collect this data in a meaningful way. Three CCGs collect the data that shows a mixed picture with White/BME staff having similar levels of access to non-mandatory training.

South East London CCGs WRES

NHS staff survey questions, 2019-20

(Source: NHS Staff survey website).

WRES staff survey questions 2020	Indicator 5 Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.		Indicator 6 Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.		Indicator 7 Percentage of staff believing that CCG provides equal opportunities for career progression or promotion.		Indicator 8 In the last 12 months have you personally experienced discrimination at work from any of the following? Manager / team leader or other colleagues.	
	White	BME	White	BME	White	BME	White	BME
Organisation's name								
Bexley CCG	9.8%	7.1%	24.4%	28.6%	89.5%	*%	4.9%	14.3%
Bromley CCG	11.1%	13.3%	13.0	40%	89.5%	*%	6.4%	20%
Greenwich CCG	21.4%	8.7%	17.9%	26.1%	88.2%	40%	0%	13%
Lambeth CCG	2.9%	0%	29.4%	23.1%	85%	*%	14.7%	23.1%
Lewisham CCG	0%	0%	39.1%	28.6%	71.4%	50%	8.7%	22.7%
Southwark CCG	4.8%	12%	14.5%	44%	88.9%	33.3%	3.2%	32%

South East London CCGs

WRES indicator 9 data, 2019-20

(Board representation as at 31 March 2020)

(Source: WRES data submission for 2019-20).

Organisation's name 2020	BME Governing Body Headcount	% BME Governing Body	% BME in staff	BME Population in Borough
Bexley CCG	8	47%	28%	21%
Bromley CCG	5	31%	24%	19%
Greenwich CCG	8	53%	47%	37%
Lambeth CCG	5	46%	23%	47%
Lewisham CCG	5	33%	48%	37%
Southwark CCG	2	13%	28%	37%

- Except for Lewisham and Southwark CCGs, BME representation on the Governing Body is higher than BME representation in the CCG workforce and the populations served.

WRES Indicators

	Workforce indicators For each of these four workforce indicators, <u>compare the data for white and BME staff</u>
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 Note: Organisations should undertake this calculation separately for nonclinical and for clinical staff
2.	Relative likelihood of staff being appointed from shortlisting across all posts
3.	Relative likelihood of 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
4.	Relative likelihood of staff accessing non-mandatory training and CPD
	National NHS Staff Survey indicators (or equivalent) For each of the four staff survey indicators, <u>compare the outcomes of the responses for white and BME staff</u>
5.	KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months
6.	KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months
7.	KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion
8.	Q217. In the last 12 months have you personally experienced discrimination at work from any of the following? b) Manager/team leader or other colleagues
	Board representation indicator For this indicator, <u>compare the difference for white and BME staff</u>
9.	Percentage difference between the organisations' Board voting membership and its overall workforce Note: Only voting members of the Board should be included when considering this indicator

Local NHS Healthcare Providers' WRES Compliance

Healthcare Provider	WRES Report 2018–19 published as at September 2020*	Level of Compliance
Bromley Healthcare	https://www.bromleyhealthcare.org.uk/wp-content/uploads/2019/11/Bromley-Healthcare-WRES-Report-2019.pdf	✓
Guy's and St Thomas' NHS Foundation Trust	https://www.guysandstthomas.nhs.uk/resources/about-us/equality/wres-action-plan/wres-action-plan-2019-2020.pdf	✓
Kings College Hospital NHS Foundation Trust	https://www.kch.nhs.uk/Doc/corp%20-%20649.3%20-%20workforce%20race%20equality%20standard%20-%20report%202017-2019.pdf	✓
Lewisham & Greenwich NHS Trust	https://www.lewishamandgreenwich.nhs.uk/download.cfm?doc=docm93jjm4n4271.pdf&ver=5332	✓
Oxleas NHS Foundation Trust	http://oxleas.nhs.uk/site-media/cms-downloads/Oxleas_Workforce_Race_Equality_Standard_Action_Plan_2019_2020.pdf	✓
South London and Maudsley NHS Foundation Trust	https://www.slam.nhs.uk/media/12133/2018-to-2019-workforce-race-equalities-standard-and-workforce-disability-equalities-standard-reports.pdf	✓

***Provider WRES Reports for 2019-20 are due for upload and publication by 31 October 2020**

In September 2020, the **NHS London Workforce Race Equality Strategy** was finalised. It is a regional strategy asking NHS Leaders to commit to making the NHS in London a fairer and more equitable place to work for all our staff. In July 2019, all NHS Trust Leaders were required to sign up to the NHS London Workforce Race Equality Strategy. This Strategy is designed to support local NHS trusts in their implementation of the Workforce Race Equality Standard (WRES), and to meet the aspirations of increasing black and minority ethnic (BME) representation at senior levels across the NHS. This strategy will support local NHS trusts to develop and refine their existing WRES action plans.

This strategic approach will help NHS trusts to meet the workforce race equality commitments set out in the NHS People Plan, the NHS London Workforce Race Strategy and Simon Stevens Covid-19 Phase 3 implementation.