

# Response ID ANON-R89M-8JVW-Y

Submitted to **Workforce Race Equality Standard (WRES) reporting template**  
Submitted on **2019-12-03 11:58:15**

## Introduction

### 1 Name of organisation

**Name of organisation:**

North Somerset Community Partnership

### 2 Date of report

**Month/Year:**

August 2019

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

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

Jenny Turton, Director of People & Organisational Development

### 4 Name and contact details of lead manager compiling this report

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

Eugenie Mellon, Recruitment & Operational Manager

01275 546813

eugenie.mellon@nhs.net

### 5 Names of commissioners this report has been sent to

**Complete as applicable::**

NHS Bristol, North Somerset and South Gloucestershire Clinical Commissioning Group

0117 900 2655

## Workforce Race Equality Standard reporting template

### 6 Name and contact details of co-ordinating commissioner this report has been sent to

**Complete as applicable.:**

NHS Bristol, North Somerset and South Gloucestershire Clinical Commissioning Group

0117 900 2655

### 7 Unique URL link on which this report and associated Action Plan will be found

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

<https://www.nscphhealth.co.uk/about-us/equality-diversity-and-human-rights>

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

**Name::**

Jenny Turton, Director of People and Organisational Development

**Date::**

27 November 2019

## Background narrative

### 9 Any issues of completeness of data

Any issues of completeness of data:

### 10 Any matters relating to reliability of comparisons with previous years

Any matters relating to reliability of comparisons with previous years:

## Self reporting

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

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

883 (Including Bank workers)

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

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

3.17%

**13 The proportion of total staff who have self reporting their ethnicity?**

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

95.6%

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

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

An action within the ESD2 action plan was to reduce the number of undefined ethnic origins for the total workforce to 5%.

Monthly reports are produced from the Electronic Staff Record (ESR) to check the completeness of data held on all protected characteristics. Any gaps in the data are identified and individuals are asked to provide the data (unless they have specifically indicated that they do not wish to do so). In addition, we promote the importance of collecting this data to our employees and encourage them to disclose using the ESR Self-service system.

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

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

NSCP implemented ESR Self-service in 2017 allowing employees to view their personal information held on them. The functionality permits employees to securely and confidentially amend their own personal data such as ethnicity along with other protected characteristics. We hope this will help to continue to improve the quality of information held as year on year we are seeing a slight increase in self-reporting for ethnicity. We have now met our internal target of having only 5% undefined ethnic origins within our workforce as we are reporting 95.6% defined this year.

**Workforce data**

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

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

July 2019

**Workforce Race Equality Indicators**

**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:**

**Clinical**

**Banding BME White Not Stated/Not Given**

Band 2 2.9% 85.3% 11.8%

Band 3 0.0% 96.2% 3.8%

Band 4 3.8% 92.3% 3.8%

Band 5 0.9% 98.2% 0.9%

Band 6 1.6% 92.9% 5.5%

Band 7 4.8% 91.6% 3.6%

Band 8A 5.6% 88.9% 5.6%

Band 8B 0.0% 85.7% 14.3%

VSM 0.0% 100% 0.0%

Consultant 100% 0.0% 0.0%

Students 0.0% 100% 0.0%

**Non-Clinical**

**Banding BME White Not Stated/Not Given**

Band 1 0% 100% 0%

Band 2 10.7% 89.3% 0%

Band 3 3% 92.4% 4.5%

Band 4 0% 85.7% 14.3%

Band 5 0% 100% 0%

Band 6 0% 100% 0%

Band 7 0% 100% 0%

Band 8A 9.1% 90.9% 0%

Band 8B 0% 66.7% 33.3%

Band 8C 0% 0% 100%

VSM 0% 100% 0%  
Apprentice 0% 100% 0%  
Spot Salary 20% 80% 0%

**Data for previous year:**

Clinical

Banding BME White Not Stated/Not Given

AFC Band 2 8.3% 83.3% 8.3%  
AFC Band 3 1.0% 94.9% 4.1%  
AFC Band 4 2.0% 94.1% 3.9%  
AFC Band 5 3.0% 91.9% 5.2%  
AFC Band 6 1.6% 90.9% 7.5%  
AFC Band 7 3.5% 93.0% 3.5%  
AFC Band 8a 0% 94.7% 5.3%  
AFC Band 8b 0% 60.0% 40.0%  
VSM 0% 100.0% 0%  
Consultant 100% 0% 0%  
Spot Salary 0% 100.% 0%  
Student Nurse 0% 100% 0%

Non-Clinical

Banding BME White Not Stated/Not Given

AFC Band 1 22.2% 77.8% 0%  
AFC Band 2 3.2% 90.3% 6.5%  
AFC Band 3 0% 97.1% 2.9%  
AFC Band 4 0% 85.7% 14.3%  
AFC Band 5 6.7% 93.3% 0%  
AFC Band 6 0% 100.0% 0%  
AFC Band 7 10.0% 90.0% 0%  
AFC Band 8a 11.1% 88.9% 0%  
AFC Band 8b 0% 100.0% 0%  
AFC Band 8c 0% 50.0% 50.0%  
VSM 11% 88.90% 0%  
Spot Salary 33.3% 66.7% 0%

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

An action within the ESD2 action plan was to reduce the number of undefined ethnic origins for the total workforce to 5%. The introduction of the monthly reports in section 14 to capture missing protected characteristics has secured a 100% return. However, only 95.6 % of staff have a defined origin code as a number of employees have selected they do not wish to disclose their ethnicity.

The percentage of employees with a defined origin code has increased from 94.64% to 95.6% over the last 12 months meeting the target set within the action plan.

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

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

**Data for reporting year:**

Number of shortlisted applications: White = 664 , BME = 57  
Number appointed from shortlisting: White = 91, BME = 4  
Relative likelihood of shortlisting/appointed: White = 0.13, BME = 0.07  
Relative of likelihood of white staff being appointed from shortlisting compared to BME staff (0.13/0.07) is therefore 1.85 times greater.

**Data for previous year:**

Number of shortlisted applications: White = 710 , BME = 66  
Number appointed from shortlisting: White =107 , BME = 13  
Relative likelihood of shortlisting/appointed: White = 0.15, BME = 0.20  
Relative of likelihood of white staff being appointed from shortlisting compared to BME staff (0.15/0.20) is therefore 0.75 times greater.

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

The data demonstrates that there has been a decrease in the number of BME applications being shortlisted in comparison to last year. However, it should be noted that NSCP uses NHS Jobs to recruit staff which means that the Recruiting Managers do not know the ethnicity of the applicants at shortlisting stage as this is removed from their applications 'blind shortlisting'.

North Somerset has a very small BME population of approximately 3% and some candidates have chosen not to disclose their ethnicity (112 undisclosed shortlisted applications received) therefore it is possible that there are more candidates from a BME background applying for posts at North Somerset Community Partnership.

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

North Somerset Council are working in partnership with NSCP to build relationships with a range of local groups representing protected characteristics to support

inclusive engagement with the community of North Somerset.

A full review of our Equality, Diversity and Inclusion activity has been undertaken by an external consultant to support, progress and develop inclusion and we have successfully achieved committed status from the Inclusive Employers membership organisation's National Inclusion accreditation tool recognising our inclusive approach to all.

We continue to embed Values Based Recruitment techniques into our recruitment process and we have trained 100+ Recruiting Managers. The workshop raises awareness of bias to ensure our values are embedded into the culture of our company.

All senior managers within NSCP also now have a specific Equality, Diversity and Inclusion objective set as part of the appraisal process.

**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:**

Rolling two year period between July 2017 - July 2019

Workforce = White 816, BME 28

Number of staff entering the formal disciplinary process: white = 10; BME = 2

Likelihood of white staff entering the formal disciplinary process = 0.01

Likelihood of BME staff entering the formal disciplinary process = 0.07

Relative likelihood of BME staff entering the formal disciplinary process compared to white staff is therefore 7 times greater.

**Data for previous year:**

Rolling two year period between July 2016 - July 2018

Workforce = White 752, BME 26

Number of staff entering the formal disciplinary process: white = 9; BME = 2

Likelihood of white staff entering the formal disciplinary process = 0.01

Likelihood of BME staff entering the formal disciplinary process = 0.07

Relative likelihood of BME staff entering the formal disciplinary process compared to white staff is therefore 7 times greater.

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

Whilst the relative likelihood of BME staff entering the formal disciplinary process is far greater than white employees - It should be noted the actual number of BME staff within the organisation is small and therefore despite only two cases within the last rolling 2 years it calculates at being 7 times greater.

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

NSCP had an objective to become a more Inclusive employer, a thorough review of our HR policies and processes was conducted by external consultants to ensure our approach is inclusive to all.

As a result an action plan was developed to address recommendations. In particular the disciplinary policy has been reviewed and a number of amendments made including the panel makeup and designating a neutral commissioning manager for each case. This policy has been ratified and is in operation for the last 12 months.

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

**Data for reporting year:**

Data 1st April 2018 - 31st March 2019

Number of staff in workforce: White =816 BME = 28

Number of staff accessing non-mandatory training and CPD: White =66 BME =0

likelihood of White staff accessing non-mandatory training and CPD is 0.08

Likelihood of BME staff accessing non-mandatory training and CPD is 0

Relative likelihood of white staff accessing non-mandatory training and CPD compared to the BME staff = 0 times greater

**Data for previous year:**

Data 1st April 2017 - 31st March 2018

Number of staff in workforce: White =752 BME = 26

Number of staff accessing non-mandatory training and CPD: White =125 BME =1

likelihood of White staff accessing non-mandatory training and CPD is 0.16

Likelihood of BME staff accessing non-mandatory training and CPD is 0.03

Relative likelihood of white staff accessing non-mandatory training and CPD compared to the BME staff = 5.33 times greater

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

The number of BME staff is very small and we have a number of employees who have chosen not to disclose their ethnicity (39 employees) therefore the reader should be mindful of this when drawing comparisons.

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

In addition to the e-learning statutory mandatory training module, the company has implemented a Equality, Diversity and Inclusion workshop to provide employees with an opportunity to better understand the different sources of bias (e.g. unconscious, group preference, reactive, etc) and be better equipped to observe its impact and understand the kind of actions that can be taken individually, collectively and organisationally that can make a difference.

A corporate objective was introduced to all line manager staff appraisals to role model the company's Equality, Diversity and Inclusion ambition.

In 2019 NSCP carried out a refreshed EDS2 by reviewing a small number of services and assessed against the selection of the "in development" indicators. The services chose to assess their service against 3 of the 9 protected characteristics which they think are either areas of good practice or where there is the greatest risk.

## **Workforce Race Equality Indicators**

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

**White:**

19% of responses reported experiencing bullying, harassment or abuse from patients, relatives or the public within the staff survey. However the returns are anonymous so we cannot identify the ethnicity of the employees.

**BME:**

See above

**White:**

21% of responses reported experiencing bullying, harassment or abuse from patients, relatives or the public within the staff survey. However the returns are anonymous so we cannot identify the ethnicity of the employees.

**BME:**

See above

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

It should be noted the response rate for the staff survey was only 41% therefore readers should be mindful of this limitation.

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

NSCP continue to engage with staff to promote the benefits of completing the Staff survey so the company can respond to any areas requiring action or promote positive improvements. In addition, we continue to communicate with staff the different ways of raising concerns and who to contact.

The percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months has decreased by 2% in comparison to last years report.

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

**White:**

8% of people who responded to the staff survey reported experiencing bullying, harassment or abuse from staff in the last 12 months within the staff survey. However the returns are anonymous so we cannot identify the ethnicity of the employees.

**BME:**

See above

**White:**

8% of people who responded to the staff survey reported experiencing bullying, harassment or abuse from staff in the last 12 months within the staff survey. However the returns are anonymous so we cannot identify the ethnicity of the employees.

**BME:**

See above

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

It should be noted the response rate for the staff survey was only 41% therefore readers should be mindful of this limitation.

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

NSCP continues to engage with staff to promote the benefits of completing the Staff survey so the company can respond to any areas requiring action or promote positive improvements. In addition, we continue to communicate with staff the different ways of raising concerns and who to contact.

### **23 KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion.**

**White:**

The staff survey asks employees whether NSCP acts fairly with regard to career progression/promotion regardless of protected characteristics and 93% of the employees who responded agreed with this statement. However, the returns are anonymous so we cannot identify the ethnicity of the employees.

**BME:**

See above

**White:**

The staff survey asks employees whether NSCP acts fairly with regard to career progression/promotion regardless of protected characteristics and 91% of the employees who responded agreed with this statement. However, the returns are anonymous so we cannot identify the ethnicity of the employees.

**BME:**

See Above

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

It should be noted the response rate for the staff survey was only 41% therefore readers should be mindful of this limitation.

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

**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:**

The staff survey highlights that 7% of employees who responded to the survey reported experiencing discrimination within the work place and 5% was from Managers or colleagues. However the returns are anonymous so we cannot identify the ethnicity of the employees.

**BME:**

See above

**White:**

The staff survey highlights that 12% of employees reported experiencing discrimination within the work place and 8% was from Managers or colleagues. However the returns are anonymous so we cannot identify the ethnicity of the employees.

**BME:**

See Above

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

NSCP continue to engage with staff to promote the benefits of completing the Staff survey so the company can respond to any areas requiring action or promote positive improvements. In addition, we continue to communicate with staff the different ways of raising concerns and who to contact.

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

**Workforce Race Equality Indicators**

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

**White:**

NSCP has 92.41% White Workforce and 10 of its 11 members of the board are of White origin. The percentage difference between the organisation's Board membership and its overall workforce will be -5.8%

**BME:**

NSCP has 3.17% BME Workforce and 1 of its 11 members of the board are of BME origin. The percentage difference between the organisation's Board membership and its overall workforce will be 6.2%

**White:**

NSCP has 91.48% White Workforce and 9 of its 11 members of the board are of White origin. The percentage difference between the organisation's Board membership and its overall workforce will be 66.19%

**BME:**

NSCP has 3.16% BME Workforce and 1 of its 11 members of the board are of BME origin. The percentage difference between the organisation's Board membership and its overall workforce will be -33.81%

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

The board membership has improved in comparison to last years data as all members now have a defined ethnic origin.

Please note the Board membership is defined as voting and non-voting members and therefore includes the Staff Council Chair.

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

A Board member has been nominated as a Equality, Diversity & Inclusion Champion

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

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

**27 Organisations should produce a detailed WRES action plan, agreed by its board. It is good practice for this action plan to be published on the organisation's website, alongside their WRES data. Such a plan would elaborate on the actions summarised in this report, setting out the next steps with milestones for expected progress against the WRES indicators. It may also identify the links with other workstreams agreed at board level, such as EDS2. You are asked to provide a link to your WRES action plan in the space below.**

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.: