



North Central London
Clinical Commissioning Group

Workforce Race Equality Standard (WRES) Report 2020/2021

For further information-
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Introduction

- Following the Snowy White Peak Report by professor Roger Kline, the NHS introduced the Workforce Race Equality Standards (WRES) in 2015 to hold a mirror up to the NHS and spur action to close gaps in workplace inequalities between Black, Asian and Minority Ethnic (BAME) and White staff.
- Having implemented the WRES for the last five years, many NHS organisations are now beginning to see continuous improvements across a range of WRES indicators – this is reflected in the national WRES data collated by NHSE/I.
- There is a requirement for CCGs and providers to report progress on their performance by publishing their performance and progress against the WRES and submitting this information to NSHE/I on an annual basis each year.
- This report sets out NCL CCG's performance against each of the WRES indicators. The report also highlights the areas we have improved in and our key achievements, the areas we need to do better in, an overview of the 2021-2022 action plan and provides an overview of our future strategic approach to working towards a more diverse, inclusive, fair, and equitable workforce.
- Events over the past year, including the Black Lives Matter campaign and the disproportionate impact of COVID-19 mean that the CCG's work on incorporating, embedding and creating more inclusive, equitable and fair practices in our everyday activities is more critical than ever.
- Embedding and sustaining continuous improvements in transforming the culture of an organisation takes time and focus. It requires organisations to approach this work with an open mind and an honest heart. It is clear that some organisations are beginning to act boldly and effectively in this area, yet much more work is still needed to shift the dial on workforce race equality.

WRES and The Role of CCGs

- **Clinical Commissioning Groups (CCGs) have two roles in relation to the WRES:**

As a Commissioner of NHS services	As an NHS employer
Give assurance to NHS England and Improvement that their providers are implementing and measuring their performance against the WRES.	Advance workforce equality and fairness
Ensure that the implementation of the WRES and associated action plans are part of contract monitoring and negotiation between CCGs and their respective providers.	Commit to the principles of the WRES and apply as much of it as possible to their own workforce.
Have meaningful dialogue with providers on the implementation and use of the WRES	Demonstrate good leadership and actively address standards requiring improvement within their own workforces, and set an example for their providers.

- In both roles, the **work of the CCG is shaped by key statutory requirements and strategic & policy drivers** including:
 - The NHS Constitution
 - The Equality Act 2010 and the Public Sector Equality Duty
 - The NHS standard contract and associated documents
 - The Oversight Framework
 - NHS Long Term Plan and the NHS People Plan
 - The WRES Leadership Strategy: A Model Employer sets the target for NHS employers to increase BAME representation at senior levels by 2033.
 - The London Workforce Race Equality Strategy.

These national and regional drivers and strategies will support the CCG with local actions and interventions to better our performance against the standards and thrive as a more diverse and inclusive workforce.

Workforce Race Equality Standard Indicators

Indicators	Workforce indicators For each of these four workforce indicators, compare the data for white and BAME staff
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 staff - Medical and dental 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
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, compare the outcomes of the responses for white and BAME staff	
5	Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.
6	Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.
7	Percentage believing that trust provides equal opportunities for career progression or promotion.
8	In the last 12 months have you personally experienced discrimination at work from a manager, team leader or other colleagues.
Board representation indicator For this indicator, compare the difference for white and BAME staff	
9	Percentage difference between the organisations' board membership and its overall workforce disaggregated: • By voting membership of the board • By executive membership of the board

NCL CCG Performance Against the WRES Indicators – 2020/2021

- We have been measuring our performance against the WRES indicators and publishing our WRES information for each of the five legacy CCGs, including action plans since 2015.
- Last year (2019-2020), in addition to reporting the performance for all five legacy NCL CCGs individually, we also reported the collective performance of the NCL CCGs.
- The next section of this report sets out **NCL CCG's performance against each of the WRES indicators for 2020/2021**, including where possible, a comparison to the previous year (2019/2020).
- The first part of the report outlines:
 - The methodology and data used to assess the CCG performance against the WRES indicators
 - 2020/2021 Highlights and Key Achievements, including the areas the CCG has done well in/improved on and the areas that require improvement.
 - A high level overview of the future strategic direction and next steps which takes into account the CCG's current activities relating to COVID-19 and the work of the Diversity and Inclusion Steering Group and Staff Networks.
- The second part of the report provides a more detailed breakdown of our performance against each WRES indicator.



WRES Highlights, and Next Steps (slides 7-12)

Methodology

- This section outlines the methodology and data used to assess the CCG performance against the WRES indicators
- **Data Sources** - The WRES requires NHS organisations to self-assess against nine indicators of workplace experience and opportunity.

Indicator(s)	Data source
1 and 9	Electronic Staff Records (ESR) as at 31 st March 2021
2	TRAC recruitment system used for recording data for candidates from 1 st April 2020 to 31 st March 2021
3-4	From staff records maintained by the HR Team
5-8	2020 Staff survey results - the responses to the WRES questions

- **Definitions**
 - **Staff** have the contractual status of employees on permanent and fixed term contracts and excludes agency workers.
 - **Office Holders** include roles such as Clinical Leads and Governing Body Members
- **Data Reporting Dates and Analyses**
 - This report sets out the NCL CCG performance against each of the WRES indicators for 2020/2021, including where possible, a comparison to the previous year (2019/2020)
- **Data Caveats**
 - As at 31st March 2021, NCL CCG employed 430 staff and engaged 58 clinical leads and 15 Governing Body Members.
 - For the purposes of the WRES report, Clinical Leads and GB members have been included under Office Holders as they are not employees of the CCG
 - Board representation includes Governing Body Members as Board Members only
 - The performance against some indicators is reported as both numbers and percentages to show statistical significant, where appropriate.
 - The race equality data for some indicators are too small to draw any meaningful conclusion as a small change in the number can affect the percentage significantly, and therefore the percentage changes need to be treated with caution.
 - Across the NCL CCGs, the response rate for the 2019 staff survey was 76% and the 2020 staff survey response rate was lower at 61%

Positive Highlights against the WRES Indicators – 2020/2021

Key achievements

- The number of staff from BAME and White backgrounds is generally reflective of the NCL population demography.
- The gaps between White and BAME staff in agenda for change bands (1-9) have been closing to reflect the local community as the percentage BAME staff in Bands 8a and above jobs has increased to 35%. while the percentage of staff from White backgrounds across band 1-7 has increased and now stands at 48%.
- The recruitment data shows that the likelihood of White staff being appointed from the shortlisting stage has changed consecutively from 2.39 times higher in 2018/19 to 1.14 times higher in 2020/21
- Self-disclosure of ethnicity information amongst staff has improved.
- The number of staff from BAME backgrounds experiencing harassment, bullying or abuse from patients, relatives or the public has decreased.
- Governing Body Members from white and BAME backgrounds are broadly representative of the demography of the NCL population.
- The CCG has set up a Diversity & Inclusion Steering Group, the BAME Staff Network and endorsed Safe Space Conversations.
- The BAME Staff Network has led the launch of the 'See ME First' Campaign and is supporting the CCG strengthen the current recruitment practices.
- The CCG's Senior Equality Lead is a member of NHSE/I's regional WRES Expert Programme.
- The CCG has invited national WRES Experts to share learnings and advise on priorities and national/regional direction of travel in this area.

Areas we need to do better in against the WRES Indicators – 2020/2021

Improvement needed

- Our 2020 staff survey results show that there has been an increase in staff from both BAME and White backgrounds experiencing bullying, harassment and discrimination from staff/colleagues and managers, compared to the 2019 results. There remains gaps between the experience of White and BAME staff, with the results from staff from a BAME background reflecting poorer experience against these indicators compared with White staff. Measures have been planned in both corporate and directorate staff survey action plans.
- The percentage of staff believing that the organisation provides equal opportunities with regard to career progression/promotion reduced for both staff from a white and BAME background.
- We need to put measures in place to address BAME staff representation in senior roles (Bands 8D-VSM)
- Better and central record keeping will be introduced to monitor the take-up of non-mandatory training by staff.

Work has been underway to address the key issues and gaps identified from the 2020 staff survey results with the development of the corporate staff survey action plan. The corporate action plan correlate to the actions against the WRES indicators and therefore the following table shows the progress we have started to make against each of the indicators and actions.

WRES Indicator	Action	Lead (s)	Progress so far
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. (clinical and non-clinical)	<ul style="list-style-type: none"> Ensure sustained GB and EMT commitment to improving BAME representation in senior roles. 	Ian Porter	<ul style="list-style-type: none"> Range of EMT actions including reciprocal mentoring, shadowing and inclusive recruitment panel being rolled out.
2. Relative likelihood of BME staff being appointed from shortlisting compared to that of White staff being appointed from shortlisting across all post (internal and external)	<ul style="list-style-type: none"> Ensure sustained progress by strengthening recruitment. 	Darshna Pankhania & Emdad Haque	<ul style="list-style-type: none"> Recruitment framework is being developed to review the end-to-end recruitment process to ensure fairness, which includes establishing a pool of diverse panel members and robust recruitment and selection training.
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 formal disciplinary investigations.	<ul style="list-style-type: none"> Continue monitoring disciplinary cases in line with the NHSE/I's 'closing the gap' framework plus the CCG's value and See ME First Campaign. 	Darshna Pankhania & Raksha Merai	<ul style="list-style-type: none"> To be monitored via the monthly and quarterly workforce performance reports.
4. Relative likelihood of BME staff accessing non-mandatory training and CPD as compared to White staff.	<ul style="list-style-type: none"> Ensure fair access to training budget and encourage take up. Improve recording of training attendance 	Courine Stewart	<ul style="list-style-type: none"> Training budget agreed for each employee corporate training programme is due to be rolled out in September 2021
5. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.	<ul style="list-style-type: none"> Develop and implement the 2020 Staff Survey Action Plan. Continue supporting Diversity Staff Networks. Promote See ME First Campaign Promote Speak Up initiatives Design learning initiatives and continue leadership conversations 	Ian Porter & Darshna Pankhania	<ul style="list-style-type: none"> Staff Survey Action Plans developed which include specific initiatives including training, reciprocal mentoring, shadowing. BAME Staff Network delivering safe space conversations, book and film club, See ME First, and recruiting diverse panel members.
6. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months			
7. Percentage believing that CCG provides equal opportunities for career progression or promotion.			
8. In the last 12 months have you personally experienced discrimination at work from any of the following: Manager, Team Leader, Other Colleagues?			
9. Percentage difference between the organisation's voting membership and executive membership of the Board	<ul style="list-style-type: none"> Improve self-disclosure of ethnicity amongst GB members/Office Holders. 	Ian Porter & Darshna Pankhania	

Future strategic direction

- A Model Employer: NHS Workforce Race Equality Standard (WRES) leadership strategy sets the targets for recruitment to senior posts with individuals from a BAME background that Trusts and CCGs need to achieve by 2023, 2028, and 2033. These are quite challenging targets for CCGs as the number of posts at VSM level is significantly less than larger organisations i.e. provider trusts, NHSE/I.
- We are also mindful of the national targets in accordance with the NHS People Plan, NHS People Promise and the NHS Closing the Gaps Plan- and our NCL ICS Development Plan Objectives.
- Given the impact of COVID 19 and the Black Lives Matter campaign, NCL CCG must work to sustain the progress it has made over the last five years in improving race equality performance. We have the perfect opportunity through NCL partnership collaboration and our internal staff networks to sustain progress.
- Our focus in 2021/22 and beyond will be to continue to use the lived experience of our staff in the CCG to inform the future WRES action plans. This will be achieved through the Diversity and Inclusion Steering Group and the BAME Staff Network. A number of leadership conversations and training programmes will be delivered in the second and third quarters of the current financial year to strengthen our inclusive leadership work.
- While we are developing our leadership competence and awareness about race discrimination, the importance of collaborative working cannot be stressed enough given the leadership role the CCG plays with regard to both commissioning care and holding providers to account through the assurance role. There is also an opportunity emerging for the CCG to play a more influential role through local ICS development work in tackling health inequalities and driving the race equality and inclusion agenda forward with other partners across the system.
- For 2021/22 we have prioritised our WRES action planning in a more innovative way by engaging our staff and system partners which have shaped our equality objectives in the Diversity and Inclusion Strategy 2021-23.

Next Steps

- ❑ The Public and Patient Engagement and Equalities Committee will be asked to review and approve this report on 12 August 2021.
- ❑ The CCG performance against the WRES indicators for 2020/2021 to be submitted to NHSE/I by 31 August 2021.
- ❑ Publicise the CCG's performance against the WRES indicators and action plan on the intranet and internet and share the report with staff via the staff briefings in September 2021.
- ❑ Continue with the implementation of the Corporate and Directorate Staff Survey Action Plans for 2021-2022 that are linked to the WRES action plan
- ❑ BAME Staff Network to continue to lead the See ME First Campaign. This will require the BAME Staff Network Chair and Vice-Chairs to present and update the Governing Body on the progress of the See ME First Campaign in October 2021, with a further update to EMT.
- ❑ BAME Chair and Vice-Chairs to support the work on Strengthening and diversifying the recruitment and selection process and experience for staff.
- ❑ The Diversity and Inclusion Steering Group and Staff Networks to work with EMT to develop the framework for future partnership (ICS) working beyond 2022 and support and contribute to change management initiatives including equality impact assessments.
- ❑ Continue working with NHSE/I and Pan London NHS Diversity Networks to share and learn from good practice.
- ❑ Continue to work collaboratively with partner EDI Leads across the system to identify WRES priorities that can be undertaken at a system level and place the CCG in a good position on our journey to becoming an ICS Body.
- ❑ Quarterly progress reports to EMT on the progress against the WRES action plan via the quarterly HR Workforce Performance Reports.



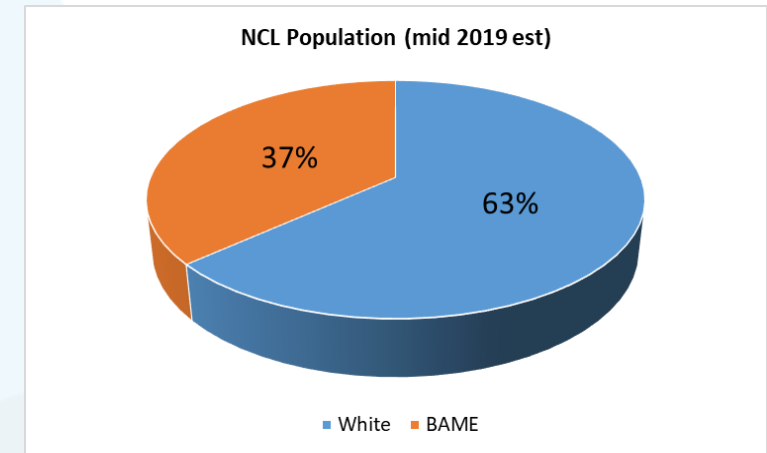
**The next section shows
the breakdown of the
performance against each
of the WRES indicators**

Overall Breakdown of Workforce Data

WRES Indicator 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

Analysis of all staff across NCL CCG as at 31st March 2021, including staff that did not disclose their ethnicity:

	2018/19 (collective legacy NCL CCGs data)	2019/20 (collective legacy NCL CCGs data)	2020/21	Performance compared with 2019/20 (%)
Self-disclosed White	53%	56%	56%	No change
Self-disclosed BAME	35%	38%	39%	+1%
Not disclosed	12%	6%	5%	-1%



Analysis of staff data based on self-disclosed ethnicity data only as at 31st March 2021*:

	2018/19 (collective legacy NCL CCGs data)	2019/20 (collective legacy NCL CCGs data)	2020/21	Performance compared with 2019/20 (%)
Self-disclosed White	60%	60%	59%	-1%
Self-disclosed BAME	40%	40%	41%	+1%

As at 31st March 2021, the self-disclosed information shows that 41% of NCL CCG's staff were from Black and Minority Ethnic (BAME) backgrounds and 59% from White backgrounds. There has been a 1% increase in BAME staff. This could be due to increased self-disclosure, not necessarily an increase in the number of staff from a BAME background.

BAME staff are overrepresented by 4% and White staff are underrepresented by 4% compared with the latest NCL population demographic information of 37% and 63%, respectively.

*Excludes 'not disclosed' data shown in the above table

Workforce Data

WRES Indicator 1- continued



North Central London
Clinical Commissioning Group

The following table shows the breakdown of staff information by agenda for change bands and ethnicity, together with a breakdown of Office Holders by ethnicity across the CCG as at 31 March 2021. A comparison of percentage changes from 2019/20 is also shown:

Analysis of all staff across NCL CCG as at 31 st March 2021, including staff that did not disclose their ethnicity and comparison to 2019-2020 representation:									
	Bands 1-7		Change in % representation	Bands 8a - VSM		Change in % representation	Office Holders		Change in % representation
	Number	%		Number	%		Number	%	
Self-disclosed – White	69	45%	+1%	171	62%	-1%	22	38%	-7%
Self-disclosed - BAME	76	50%	No Change	92	33%	+2%	15	26%	-2%
Not disclosed	8	5%	-1%	14	5%	-1%	21	36%	+9%

The data in the tables shows:

- Due to the transition, there was a vacancy freeze in the CCG in 2020/21.
- Based on self-disclosed data, there has been a small increase in the percentage of BAME staff (2%) and a small reduction of White staff in Bands 8a and above jobs (1%).
- Also, there has been a small percentage increase in white staff (1%) and a small reduction in BAME staff in Bands 1-7 jobs (1%).
- Due to a greater proportion of non-disclosure amongst clinical leads (36%), the percentage of BAME and White office holders shows to have decreased.

Analysis of staff data based on self-disclosed ethnicity data only as at 31st March 2021, including comparison to 2019-2020 representation*:

Ethnicity	Bands 1-7	Change in % representation	Bands 8a - VSM	Change in % representation
Self-disclosed - White	48%	+1%	65%	+2%
Self-disclosed - BAME	52%	-1%	35%	-2%

*Excludes 'not disclosed' data shown in the above table

The changes in percentage need to be treated with caution as they may indicate a small, or no change in the numbers of staff. Also, it should be noted that not all Office Holders have disclosed their ethnicity.

WRES Indicator 2: Compare the data for White and BAME staff: Relative likelihood of staff being appointed from shortlisting across all posts.

The following table shows the likelihood of White staff being appointed from shortlist in comparison to BAME staff:

NCL average		NCL CCG
2018/19 (collective legacy NCL CCGs data)	2019/20 (collective legacy NCL CCGs data)	2020/21
2.39 times higher	1.48 times higher	1.14 times higher

Recruitment of BAME staff from shortlist has been improving since 2018/19

The data shows:

- The likelihood of White staff being appointed from shortlisting stages in comparison to BAME staff reduced markedly across NCL since 2018/2019
- In 2019/20 there was an increase of 38% in BAME staff appointments from shortlists compared with 2018/19. In 2020/21 this has improved by a further 30% bringing the likelihood of BAME staff appointment from shortlist close to White staff.
- The overall success in appointing more BAME staff from the shortlisting stage is the result of more rigorous and fair recruitment and selection processes and raising awareness of fair and equitable recruitment and selection processes.

Staff Entering Formal Disciplinary Processes

WRES Indicator 3: The Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation

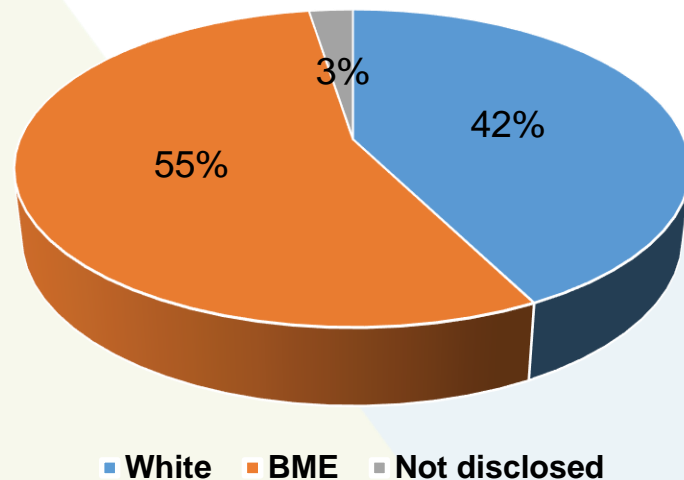
- The CCG records and monitors all disciplinary cases based on protected characteristics
- Where the number of staff entering a formal disciplinary process is less than 5, the CCG will not disclose or publish the information for reporting purposes to maintain confidentiality and anonymity of individuals subject to such processes
- The total number of staff that entered a formal disciplinary process across all the NCL CCGs for the period 01 April 2020 to 31 March 2021 is less than 5 and therefore this information has not been presented in this report.
- Whilst the number of formal disciplinary cases across the CCG are low, nationally, the relative likelihood of BAME staff entering the formal stages of disciplinary process are still twice that of a white staff.

Non-mandatory training and continuous professional development

WRES Indicator 4: Compare the data for White and BAME staff: Relative likelihood of staff accessing non-mandatory training and continuous professional development (CPD)

- The following chart shows a breakdown of staff that accessed non-mandatory training, broken down by ethnicity
- It should be noted that the total number of staff that accessed non-mandatory training across the CCG during 2020-2021 is relatively low due to the pandemic and therefore the information is shown as an aggregated number during the period 2019/20 and 2020/21

Non mandatory training and CPD in 2019/20 and 2020/21



The data shows:

- The non-mandatory training and CPD data submitted for the last two years (which includes the legacy five NCL CCGs), shows that BAME staff attended the training than White staff
- Nationally, data shows that BAME staff are 1.29 times more likely to attend non-mandatory and CPD training compared with White staff.

Staff Survey Indicators

WRES Indicators 5-8

Percentage of CCG staff that said 'YES' to the WRES questions in the 2020 staff survey and a comparison with the 2018 & 2019 results

Staff Survey indicator (WRES)	Ethnic Group	Survey results		
		2018	2019	2020
Indicator 5- KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months	White	11%	10%	5.7%
	BAME	8%	11%	8.7%
Indicator 6- KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months	White	24%	14%	21.3%
	BAME	36%	18%	24.2%
Indicator 7- KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion	White	81%	89%	72.3%
	BAME	not available*	63%	54.7%
Indicator 8- Q17- In the last 12 months have you personally experienced discrimination at work from Manager/team leader or other Colleagues?	White	6%	8%	11.8%
	BAME	20%	13%	19.6%

The 2019 staff survey results show an improvement in the WRES questions across the legacy five NCL CCGs. However, there were still gaps in the experiences between BAME and white staff. In 2020, the results show that staff from White and BAME backgrounds had poorer experiences in 3 out of the WRES staff survey indicators (career progression and experiencing bullying & harassment from staff and managers).

The results show that the experiences of both white and BAME staff has reduced in all (indicators 6-8) but one of the indicators (indicator 5). It should be noted that staff experience in 2020 may have been heavily influenced by the impact of Covid 19.

In Indicator 6, there was an increase in the percentage of both white and BAME staff experiencing harassment, bullying and abuse from other staff. The gap in experience between white and BAME staff remained almost the same as the previous year.

According to the results in Indicator 8, both white and BAME staff experiencing discrimination at work from manager/team leader or other colleagues worsened in 2020.

In Indicator 7, the percentage of staff from both white and BAME backgrounds believing that the CCG provides equal opportunities for career progression or promotion decreased. However, the experience gap between white and BAME staff has narrowed compared with the 2019 results.

Work has been underway to address the key gaps and issues identified in the 2020 staff survey results, including those detailed in these indicators via both the Corporate and Directorate staff survey action plans.

Board Membership Representation

WRES Indicator 9: Percentage difference between the organisations' Board membership and its overall workforce

The following table shows the **Governing Body Members ethnicity data (based on self-disclosed data) as at 31st March 2021** compared with the local NCL population and the NCL CCG workforce:

	2019-20 (collective legacy NCL CCGs data)		2020-21		% Change in GB from 2019/2020	NCL Population Demography	Comparison with NCL population to show representation	Comparison with CCG employees to show representation
	GB Members*	CCG staff**	GB Members*	CCG staff**				
White	40%	60%	64%	59%	+24%	63%	1% [Over]	5% [Over]
BAME	60%	40%	36%	41%	-24%	37%	1% [Under]	5% [Under]

*The 2019/20 WRES report showed representation of GB members from all 5 legacy CCGs. Within the legacy CCGs, the number of GB members was significant higher (57) compared with the current size of the Governing Body (15).

**CCG staff includes CCG employees only

The data shows:

- The data shows that the self-disclosed data, the percentage of BAME Governing Body Members decreased significantly by 24% in 2020/21, however, it should be recognising that this is due to the reduction in the size of the Governing Body following the merger to become a single CCG on 01 April 2020.
- BAME members on the Governing Body are broadly representative to the demography of the local NCL population.
- Disclosure of ethnicity by GB members has increased significantly in 2020-21.