

**NHS DORSET CLINICAL COMMISSIONING GROUP  
GOVERNING BODY MEETING**

**WORKFORCE RACE EQUALITY STANDARD (WRES) REPORT 2016**

<b>Date of the meeting</b>	18/05/2016
<b>Author</b>	E Sosseh, Engagement and Diversity Officer
<b>Sponsoring GB member</b>	Dr P Blick, Clinical Lead, Central Bournemouth Locality
<b>Purpose of Report</b>	The Workforce Race Equality Standard (WRES) report has been produced to evidence how we comply against the nine indicators of the standard.
<b>Recommendation</b>	The Governing Body is asked to <b>approve</b> the contents of the report which will be published on the CCG website
<b>Stakeholder Engagement</b>	N/A
<b>Previous GB / Committee/s, Dates</b>	N/A

**Monitoring and Assurance Summary**

<b>This report links to the following Strategic Principles</b>	<ul style="list-style-type: none"> <li>• Services designed around people</li> <li>• Preventing ill health and reducing inequalities</li> <li>• Sustainable healthcare services</li> <li>• Care closer to home</li> </ul>		
	<b>Yes</b> [e.g. ✓]	<b>Any action required?</b>	
		<b>Yes</b> Detail in report	<b>No</b>
All three Domains of Quality (Safety, Quality, Patient Experience)	✓		✓
Board Assurance Framework Risk Register	✓		✓
Budgetary Impact	✓		✓
Legal/Regulatory	✓		✓
People/Staff	✓		✓
Financial/Value for Money/Sustainability	✓		✓
Information Management & Technology	✓		✓
Equality Impact Assessment	✓		✓
Freedom of Information	✓		✓
<b>I confirm that I have considered the implications of this report on each of the matters above, as indicated</b>	✓		

Initials : ES

## 1. Introduction

- 1.1 The Workforce Race Equality Standard (WRES) was made available to the NHS from April 2015, following sustained engagement and consultation with key stakeholders. The WRES was included in the NHS standard contract 2015/16, and NHS trusts and Clinical Commissioning Groups produced and published their WRES baseline data reports on 1 July 2015.
- 1.2 The main purpose of the WRES is to help local and national NHS organisations to review their data against the nine WRES indicators, to produce action plans to close the gaps in workplace experience between White and Black and Minority Ethnic (BME) staff, and to improve BME representation at the leadership level of the organisation.
- 1.3 The purpose of this report is to provide members with an overview of the key findings of Dorset CCG's WRES report for 2015/16.

## 2. Report

- 2.1 An inaugural report on the WRES was published in July 2015 and an action plan was developed to address the findings. Progress against this action plan has been made and highlights are:
  - developed and implemented 'Unconscious Bias' training for Line Managers and staff included in recruitment with focus on the 'blind shortlisting' process;
  - promoted local vacancies, including recruitment of Non Executives and Lay members with local diverse organisations and partners;
  - enabled conversations between Governing Body members and BME workforce to raise awareness of the experiences of BME members of staff in the workplace.
- 2.2 The 2015/16 report benchmarks against the inaugural report and highlights the CCG's performance, progress made, and identifies steps to take into 2016/17.

### Key findings

- 2.3 The WRES report for 2015/16 can be found in Appendix A, the findings reflect the views of a significant but small number of staff and should be interpreted recognising the low level of BME workforce.
- 2.4 The CCG's BME staff members account for 2.11% (6) of the total workforce (279), compared to a local BME population size of 8.1%. Overall, there has been no significant change in the results from the 2014/15 survey compared to the 2015/16, key finding are:
  - there was a 2.3% reduction in the rate of BME people shortlisted for jobs between 2014/15 and 2015/16 survey. This equated in real terms from 47 out of 287 in 2014/15 to 37 out of 242 in 2015/16;

- disciplinary cases within the CCG remain low, however disparity exists between overall levels of BME staff and the general workforce and those involved in disciplinary processes. Over the period 2014/15 and 2015/16 formal disciplinary cases have involved white staff on 92.5% (24) of occasions and BME staff on 7.5% (2);
- there have been no reports of bullying and harassment against BME staff from staff compared to 14.2% in 2014/15. There has been also been a 4.67% reduction in bullying and harassment from patients, relatives and public on BME staff. However there has been an increase for white staff by 4.8%;
- no member of staff (of any racial background) reported discrimination on the basis of ethnic origin in the past year.

### **3. Conclusion and Next Steps**

- 3.1 An action plan will be developed for 2016-2017 to address any gaps identified through the WRES. We will continue to encourage more dialogue between the Governing Body, Heads of Service and BME staff around the indicators.
- 3.2 The Governing Body is asked to approve the report, which will be published on the CCG website in line with national guidance.

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**Date: 26/04/2016**

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<b>APPENDICES</b>	
<b>Appendix A</b>	<b>Workforce Race Equality Standard report 2016 and Action Plan</b>