

Response ID ANON-R89M-8JBK-Y

Submitted to **Workforce Race Equality Standard (WRES) reporting template**
Submitted on **2019-09-26 07:10:26**

Introduction

1 Name of organisation

Name of organisation:
Herts Urgent Care (HUC)

2 Date of report

Month/Year:
April 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 :
David Archer, Chief Executive

4 Name and contact details of lead manager compiling this report

Name and contact details of lead manager compiling this report:
Dipika Mistry, HR Business Partner
dipika.mistry@hertsurgentcare.nhs.uk

5 Names of commissioners this report has been sent to

Complete as applicable::
Details to insert
East & North Herts CCG
Herts Valleys CCG
West Essex CCG
Cambridgeshire & Peterborough CCG
Luton CCG
Bedfordshire CCG

Workforce Race Equality Standard reporting template

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

Complete as applicable.:

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://hucweb.co.uk/about-us/ethnicity-accessibility/workforce-race-equality-standard/>

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

Name::
David Archer, Chief Executive

Date::
22 May 2019

Background narrative

9 Any issues of completeness of data

Any issues of completeness of data:
We have compiled the report from data that is available in our HR IT system and staff surveys completed for 2018 and 2019. Data has been collated retrospectively and is therefore as accurate as possible.

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:

917

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:

18% (Looking at the last Census (2011) the BME for the East region was 8.7% of the population so relatively we have a good proportion of BME staff)

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

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

All ethnicity data is self reported by staff. Ethnicity data is recorded at the application stage and registration on HUC systems as an employee. Staff are also asked to provide their ethnicity as part of the annual staff survey, the data received from the survey is anonymised. The data referred to is based on the employed workforce.

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:

Our reporting levels are high; 68% of the workforce have reported their ethnicity. As a result of this review we will consider further encouraging reporting across HUC. The staff survey as above also includes ethnicity reporting information.

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:

The staff survey is used to collect data; this has a high response rate. This information has not been used to analyse the level of ethnicity reporting in HUC as it is anonymous and therefore cannot be compared against data held on the HRIS.

A communication to all staff will be sent asking them to login to the HR IT system (where we have a self service facility) asking them to enter these details if not currently recorded

Reminders will be put on the rota system and in the internal newsletter asking staff to update ethnicity

Workforce data

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

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

1 April 2018 to 31 March 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:

Herts

White - 55%

BME - 18%

Unknown - 27%

C&P

White - 49%

BME - 14%

Unknown - 37%

L&B

White - 41%

BME - 34%

Unknown - 25%

HQ - admin and management staff

White - 60%

BME - 8%

Unknown - 32%

Data for previous year:

Herts

White - 53%

BME - 18%

Unknown - 29%

C&P

White - 50%

BME - 13%

Unknown - 37%

L&B

White - 39%

BME - 32%

Unknown - 29%

HQ - admin and management staff

White - 60%

BME - 12%

Unknown - 28%

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

HUC does not operate AFC. Therefore the data is broken down by region.

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

HUC have good levels of BME staff across our regions.

HUC have produced an action plan to be considered by the Board. The plan will be shared with the Heads of Service with specific responsibilities assigned.

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

Data for reporting year:

Data for previous year:

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

HUC at present are unable to report accurately on this data as we use multiple recruitment sources and media.

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

HUC is implementing a candidate tracking system in the year 2019/20 which will provide accurate data as all candidate details from all sources will be entered into this system.

The candidate tracking system currently does not have a facility to redact personal data from applications.

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:

Number of staff who had a disciplinary broken down by region

Herts

White - 12 (11 received a warning, 1 no sanction)

BME - 2 (2 dismissed)

Not known - 6 (4 received a warning, 1 dismissed, 1 no sanction)

C&P - training ones not included

White - 12 (9 received a warning, 2 dismissed, 1 no sanction)

BME - 3 (3 received a warning)

Not Known - 9 (9 received a warning)

L&B

White - 3 (3 received a warning)

BME - 1 (1 received a warning)

Not Known - 1 (1 dismissed)

HQ

White - 2 (1 received a warning, 1 no sanction)

BME - 0

Not Known - 0

Data for previous year:

Data is not available

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

This information has not been reported upon in the past

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

This information will be reported upon at the end of each year

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

Data for reporting year:

Data for previous year:

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

Recording of data to date has been poor and therefore there is no complete data to report upon

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

HUC will improve recording of non-mandatory training. Our online elearning system has the facility for recording training.

We ensure all staff are provided with the opportunity to attend non mandatory training.

Our recently launched Management Development programme has the following breakdown of delegates:

White - 85%

BME -15%

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:

26%

BME:

25%

White:

35%

BME:

38%

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

The figures demonstrate a drop in those from both categories reporting such behaviour which is positive to see

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

HUC will continue to promote our equal opportunities stance, i.e. that there is zero tolerance for such behaviour and staff are encouraged to speak up to ensure management can support them. Any reported instances will continue to be dealt with via the relevant channels including our grievance, disciplinary and whistleblowing policies where appropriate which relates to questions 22-24 also.

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

White:

From managers - 7%

From colleagues - 11%

BME:

From managers - 12%

From colleagues - 12%

White:

From managers - 8%

From colleagues - 9%

BME:

From managers - 8%

From colleagues - 16%

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

It is good to see a drop in the number of BME staff experiencing such behaviour from colleagues, however this has risen for the white grouping.

There is an increase in such perceived behaviour from managers towards BME staff which is disappointing and needs to be addressed. The Management Training programme is intended to give managers tools on how to provide support in a way that is constructive and not perceived as bullying/harassing in nature.

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

This report has gone to the Board and recognised as a concern. The statistics will be shared with all staff as part of the staff survey feedback.

The forthcoming Management Development Programme has some content on this which should raise awareness on their ability to identify this behaviour and how behaviour can be perceived and is not acceptable.

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

75%

BME:

66%

White:

84%

BME:

81%

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

There has been a drop in the figures and action is included in the action plan

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

We will review our processes to ensure that we have a transparent and equal opportunities approach to progression and promotion. We will seek feedback from staff as part of the staff survey workshops on how to provide equal opportunities for all.

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:**

5%

BME:

14%

White:

3%

BME:

6%

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

It is disappointing to see a rise in perceived discrimination overall and particularly from those from a BME background.

For each of Q. 22-24 the results should be viewed in context of the baseline numbers of staff responding to the survey.

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

As part of the Staff Survey action plan measures will be taken to further understand the issues and concerns and address this with appropriate measures.

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

White:

89%

BME:

11%

White:

90%

BME:

10%

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

The board is represented well by BME. Any future appointments will continue to be on a merit and equal opportunities basis.

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

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?:

HUC are due to deliver the results of the 2018 staff survey to the whole workforce. Managers will be involved and an action plan will be developed touching on the aspects covered in this report as appropriate. Further communication is planned to encourage staff to self report and to reinforce messages that any discriminatory behaviour is not tolerated.

Due to the complexity of the NHS Pathways requirements HUC have a responsibility to ensure staff have the required level of linguistic skills to undertake their roles efficiently and deliver safe care to patients.

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.:

The action plan is set out in a separate document