Workforce Race Equality Standard

REPORTING TEMPLATE (Revised 2016)

Template for completion

Name of organisation

Coventry & Rugby GP Alliance

Date of report: month/year

June 2018

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

Dr Jerry Horn

Name and contact details of lead manager compiling this report

Kerry Crutchlow

Names of commissioners this report has been sent to (complete as applicable)

Coventry & Rugby CCG

Name and contact details of co-ordinating commissioner this report has been sent to (complete as applicable)

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

http://www.coventryrugbygpalliance.nhs.uk/

This report has been signed off by on behalf of the Board on (insert name and date)

Publications Gateway Reference Number: 05067

Report on the WRES indicators

1. Background narrative

a. Any issues of completeness of data

Data is compiled from both internal and external sources.

Internal data is extracted from soft recruitment which is driven by interest from local practices and clinicians. Such applications are not processed using formal practices and therefore limit reporting opportunities.

External data is obtained from standard NHS application forms.

b. Any matters relating to reliability of comparisons with previous years

2. Total numbers of staff

a. Employed within this organisation at the date of the report

128

b. Proportion of BME staff employed within this organisation at the date of the report

Core Staff: 23% Zero Hrs: 32% S/E: 45%

3. Self reporting

a. The proportion of total staff who have self–reported their ethnicity

Core Staff: 100%

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

Ensure all applicants complete the application forms, including the monitoring information.

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

A more strict recruitment has been followed for the Zero hour and self-employed staff.

4. Workforce data

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

01 April 2018 to 31 March 2019

5. Workforce Race Equality Indicators

Please note that only high level summary points should be provided in the text boxes below – the detail should be contained in accompanying WRES Action Plans.

	Indicator	Data for reporting year	Data for previous year	Narrative – the implications of the data and any additional background explanatory narrative	Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective
	For each of these four workforce indicators, compare the data for White and BME staff				
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. Organisations should undertake this calculation separately for non-clinical and for clinical staff.	ALL CORE B2 - 1 (3%) B3 - 4 (13%) B4 - 2 (7%) B5 - 1 (£%) B6 - 3 (10%) B7 - 8 (27%) B8 - 4 (13%)	ALL CORE B2 - 1 (5%) B3 - 1 (5%) B4 - 1 (5%) B5 - 1 (5%) B6 - 5 (25%) B7 - 2 (10%) B8A - 1 (5%)	Data covers core staff on substantive or fixed term contract and excludes staff who are either self employed or on zero hour contract.	
2	Relative likelihood of staff being appointed from shortlisting across all posts.	All staff have equal opportunities across all posts	None		
3	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.	0	0	There has been no disciplinary action against any staff within the reporting year.	
4	Relative likelihood of staff accessing non-mandatory training and CPD.	0	0	Staff can access non-mandatory training upon request, as part of their agreed objectives during their review meetings.	

Report on the WRES indicators, continued

	Indicator	Data for reporting year	Data for previous year	Narrative – the implications of the data and any additional background explanatory narrative	Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective
	National NHS Staff Survey indicators (or equivalent) For each of the four staff survey indicators, compare the outcomes of the responses for White and BME staff.				
5	KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.	White BME	White BME		
6	KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.	White BME	White BME		
7	KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion.	White BME	White BME		
8	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 BME	White BME		
	Board representation indicator For this indicator, compare the difference for White and BME staff.				
9	Percentage difference between the organisations' Board voting membership and its overall workforce.		2.45		

Note 1. All provider organisations to whom the NHS Standard Contract applies are required to conduct the NHS Staff Survey. Those organisations that do not undertake the NHS Staff Survey are recommended to do so, or to undertake an equivalent.

Note 2. Please refer to the WRES Technical Guidance for clarification on the precise means for implementing each indicator.

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

No

7. 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.

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