Response ID ANON-R89M-8J34-S

Submitted to **Workforce Race Equality Standard (WRES) reporting template**
Submitted on **2018-10-12 15:10:45**

Introduction

1 Name of organisation

Name of organisation:
Navigo Health & Social Care CIC

2 Date of report

Month/Year:
July 2018

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 :
Simon Beeton Director of Finance

4 Name and contact details of lead manager compiling this report

Name and contact details of lead manager compiling this report:
Richard Watson Head of Workforce & Development
Navigo House
3-7 Brighowgate
Grimsby
DN32 0QE
richardwatson2@nhs.net

5 Names of commissioners this report has been sent to

Complete as applicable::
NEL 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.:
North East Lincolnshire CCG
Municipal Offices
Town Hall Square
Grimsby
North East Lincolnshire
DN31 1HU

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:
http://www.navigocare.co.uk/staff-zone/equality-diversity/

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

Name::
Simon Beeton

Date::
14 September 2018

Background narrative

9 Any issues of completeness of data

Any issues of completeness of data:
No issues re 2018 data.

10 Any matters relating to reliability of comparisons with previous years

Any matters relating to reliability of comparisons with previous years:
Prior to 2016 limited data exists and not within same format as this template, comparison beyond this is therefore unreliable

Self reporting

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

Total nuber of staff employed within this organisation at the date of the report:
544

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:
9.6

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

The proportion of total staff who have self–reported their ethnicity:
99.0%

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:
Continued work from HR team in relation to staff records and improving data quality, minimising errors and not stated, staff have esr self service.

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:
Continue with communications internally with staff encouraging access and amending their own personal data within ESR

Workforce data

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

What period does the organisation's workforce data refer to?:
1.42017-31.3.2018

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:
Overall
Clinical staff 10.0% BME
Non Clinical 2% BME

By Band
Clinical BME : Non BME
Band 2 20.5% 79.5%
Band 3 5.2% 93.5%
Band 4 8.7% 87.0%
Band 5 14.6% 85.4%
Band 6 3.4% 96.6%
Band 7 1 0.9% 89.1%
Band 8a 9.1% 81.8%
Band 8b 100.0% 0%
Band 8c 0% 100.0%
Medical & Dental Consultant 11.1% 77.8%
Medical & Dental Non-Consultant Career Grade 50.0% 50.0%
Medical & Dental Trainee Grades 0 % 100.0%
VSM 75.0%

Non Clinical BME : Non BME
Band 1 0% 100.0%
Band 2 7.7% 92.3%
Band 3 3.8% 96.2%

Band 4 0% 100.0%
Band 5 0% 100.0%
Band 6 0% 100.0%
Band 7 0% 100.0%
Band 8a 0% 100.0%
Band 8b 0% 100.0%
VSM 0% 100.0%

Data for previous year:
clinical 11.7% BME

non clinical 2.8% BME

data by band was not available

The implications of the data and any additional background explanatory narrative:
Small organisation size with minimal numbers of staff at some bands makes comparison of data by % unreliable as a small number of individuals within a small sample size may be unrepresentative of the wider organisation picture.

Data for current year available as ESR extract

overall reduction in BME % of the workforce yet remains greater than the BME % of the population within NEL

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:
Ongoing review of non clinical posts, applications and shortlisting to audit and validate no bias exists within non clinical recruitment process

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

Data for reporting year:
white appointed : shortlisted = 31/358= 0.086 i.e 8.6% of white applicants shortlisted are subsequently appointed
BME appointed: shortlisted =5/56=0.089 i.e 8.9% of BME applicants shortlisted are subsequently appointed

a BME applicant was approx. 3% more likely to be appointed in the last year

Data for previous year:
white appointed : shortlisted = 51/366 = 0.139
BME appointed: shortlisted =18 /45 =0.177

BME 25% more likely to be appointed

The implications of the data and any additional background explanatory narrative:
Noted that less than 40 appointees over the last 12 months does make data comparisons across years more likely to fluctuate.

current years ratios were, applications 87% white 13% BME, shortlisting 86%/14% appointed 86%, 14%, which are pleasingly consistent throughout the recruitment process, and an overall higher % of BME applicants in proportion to the local demographic.

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:
Continuing to utilise NHS jobs and Universal Job match as advertising platform for all posts, continual audit of process and data via NHS jobs.

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:
2 year average
27 formal investigations, 3 BME , 24 Non BME staff

5.7% of BME workforce
4.9 % of non bme workforce were investigated

Data for previous year:
18 formal investigations, 3 BME staff, 15 Non BME staff

5.2% of BME workforce
3.1 % of non bme workforce were investigated

single year data

The implications of the data and any additional background explanatory narrative:
current year only no BME staff entered formal disciplinary investigation. The number of BME staff employed has decreased slightly, hence an increase in % terms, however a further increase for numbers of non BME staff investigate.

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:
Continual monitoring of disciplinary records monthly to Workforce Committee, overall objective to reduce number of formal investigations where possible.

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

Data for reporting year:
BME staff ration of staff: number of external courses accessed = 1:1

Non BME staff = 1:0.97

BME staff are more likely to access non mandatory training.

Data for previous year:
bme staff were 10.6% of workforce total

yet only 9.2% on non mandatory training accessed was by BME staff

non BME staff 1.56x more likely to access non mandatory training

The implications of the data and any additional background explanatory narrative:
previous years data recorded as list of training, current data taken from central ESR report, not immediately comparable, yet does indicate a higher proportion/likelihood of non mandatory training being accessed by BME staff

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:
Ongoing training calendar published for all staff. Internal training requests monitored through workforce committee to ensure PDR and corporate training priorities me for each service area.

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:
29%

BME:
44%

White:
30%

BME:
41%

The implications of the data and any additional background explanatory narrative:
Slight increase in BME staff experiencing this from the public, this an other staff survey results show a very positive overall picture for navigo compared to other provider organisations.

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:
Incorporated within staff survey action plan, and linked to Social Partnership Forum - Call to Action to tackle Bullying and Harassment, in the last year there has been an anti bullying harassment and violence project across Navigo, led by the Chief Executive and a zero tolerance approach, along with closer links with local police regarding tackling adverse behaviours from the public

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

White:
91%

BME:
100%

White:
94%

BME:
93%

The implications of the data and any additional background explanatory narrative:
Good response from BME staff correlating to higher instance of non mandatory training being accessed.

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:
none identified, continue to monitor NHS survey results and internal staff satisfaction surveys including feedback from briefing & listening events with the CEO

and Chairman.

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:
0%

White:
6%

BME:
6%

The implications of the data and any additional background explanatory narrative:
Significant improvement in BME staff experience

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:
Ongoing monitoring, revision of E&D training package.

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

White:
18%

BME:
5%

White:
19%

BME:
12%

The implications of the data and any additional background explanatory narrative:
significant reduction in BME staff experiencing harassment bullying or violence from fellow colleagues

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:
Also incorporated within this years Navio anti bullying harassment and violence campaign were strengthening internal reporting routes for staff along with ACAS training across the organisation and managers.

Workforce Race Equality Indicators

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

White:
75%

BME:
25%

White:
75%

BME:
25%

The implications of the data and any additional background explanatory narrative:
greater BME CIC board representation than workforce and local population

CIC company structure is not typical NHS and includes a wider membership board, including non executives, appointed from within our workforce and community groups allowing for greater representation into the decision making process for the organisation.

Action taken and planned including e.g. does the indicator link to EDS2 evidence and/or a corporate Equality Objective:
none.

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?:
Data quality in respect of comparing percentages of small organisation size.

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.:
http://www.navigocare.co.uk/staff-zone/equality-diversity/