



Workforce Race Equality Standard (WRES) Action Plan 2021 - 2022

NHS Warrington Clinical
Commissioning Group
NHS Halton Clinical Commissioning
Group

November 2021





Workforce Race Equality Action Plan (WRES) 2021/22

What is the WRES?

The NHS Workforce Race Equality Standard was introduced for NHS organisations in April 2015 and was included within the NHS Standard Contract from 2015-16. WRES baseline data has been provided and published on a yearly basis by the NHS since 01 July 2015.

The main purpose of the WRES is to help local and national NHS organisations to review their workforce data against nine WRES indicators and to produce an action plan to improve workplace experiences of Black, Asian and Ethnic Minority (BME) staff. The WRES also places an obligation on NHS organisations to improve BME representation at Board level.

WRES reporting links with NHS England mandated <u>Equality Delivery System (EDS)</u> goals.

EDS is an equality performance and evaluation tool to help improve equality performance across 4 goals –

- 1. Better health outcomes
- 2. Improve patient access and experience
- 3. A represented and supported workforce
- 4. Inclusive leadership

WRES relates directly to all goals but specifically directly to goal 3 and 4.

Our reporting duty 2021/22

NHS Halton Clinical Commissioning Group (CCG) and NHS Warrington CCG have respectively completed WRES reporting to NHS England since 2015 and published their WRES action plans.

The data is reported to NHS England who combine with larger data sets across England to analyse representation and experiences across NHS organisations – including CCGs. Due to relatively low numbers of staff employed by the CCGs, the data sets on staff is potentially identifiable and therefore we are unable to publish this. We are able to publish our WRES action plan for 2020/21 which provides the direction for improving our equality performance for our workforce.

We have developed a general WRES action plan based on intended work over the next year.

Our action plans and progress will be regularly reviewed throughout the year with oversight from our governance processes. The Integrated Management Team will have overall oversight for monitoring with Governing Body Board member – Dr Andy





Davies – Clinical Chief Officer who has responsibility for reducing inequalities to have responsibility at Board Level.

Progress will be reported and published within:

- 2021/22 Equality and Inclusion Annual Report
- 2022 WRES report
- CCG Corporate Annual Report 2022





Progress on WRES action plan for 2021/2021:	
Action	Progress
1. Supporting BAME staff	Completed.
a. To implement Staff Risk Assessments across all staff with priority given first to staff with high risk factors for COVID 19 – BAME, Disability, Age	All staff have had a risk assessment, including agile working checklist.
	Process in place for all new starters.
b. Ensure any back to office / workplace follows national guidance and risk assessments take all possible mitigating factors to address risks and support staff	Ongoing staff wellbeing activities.
c. Ensuring that any COVID-19 work arrangements such as working from home are supported through the CCG staff wellbeing group and practical support via line managers	Wellbeing Conversations process for all staff
2. Self-reporting ethnicity	Included in the People's Management training and wellbeing conversations.
Increase / maintain staff self-reporting of their ethnicity to above 95%. Promoting update of ESR records through team brief and supervision meetings.	In the reporting period the number of NHS Warrington CCG staff self-reporting on ethnicity has decreased to 96% and has remained stable for NHS Halton CCG.
(Current reporting for Warrington: 98% and Halton: 94.6%)	
3. Staff Survey	Completed
CCGs to review staff survey questions in light of WRES report data. This should be considered in order for the survey to align with the WRES	Staff survey undertaken with questions relevant to WRES.





	porting and NHS national survey questions to ensure consistency to help alysis across wider NHS workforce.	
4.	Development of BAME network	Continued support to local BAME network representatives
a.	CCGs to support development of BAME network across the area to ensure that BAME staff can access local network support.	More work to be undertaken to create a local network
b.	Use supporting documents via NHS Employers website to help establish a local network.	
C.	Link network development with Primary Care Networks.	
d.	Network to have links with local senior representatives on NW BAME Advisory Group to ensure local voices are heard and represented.	
5.	Staff training and development	Completed
a.	Review the process and approval process for staff applying for non-mandatory training – in order to ensure equity of opportunity.	Updated PDR and one to ones process developed including training needs and opportunities.
b.	Improve recording of non-mandatory training by setting up central recording of non- mandatory training. (info that is not already recorded via ESR)	Consistent process for training opportunities developed, including a regular section in the staff bulletin and teams channel with all training opportunities including NW Leadership.
C.	Governing Body members to attend annual Equality and Health Inequality Development session	Equality and Health Inequality development session undertaken. Health inequalities training offered to all staff
d.	CCG to routinely share Development Opportunities provided through the NHS NW Leadership Academy	Trodian moduling onered to an stan





6. Recruitment

- a. Promote development programme for Managers potentially within People Management Programme to include a module on Recruitment Practice
- To promote greater understanding of bias within recruitment Recruiting Managers to undertake unconscious bias training. Free
 NHS training available:
 https://lms.leadershipnhs.uk/login?redirect=/profile
- c. Continue to follow fair recruitment and best practice guidance as directed by NHSEI and HR team

Completed

People Management training undertaken by all Line Managers. Positive feedback was received.

Unconscious bias training to be undertaken with GB and then sessions with staff from November 2021





WRES action plan for 2021/2022:				
Action	Timescale	Responsible person / team	Outcome	Progress
Self-reporting ethnicity Increase / maintain staff self-reporting of their ethnicity to above 95%. Promoting update of ESR records through team brief and supervision meetings.	March 2022	IMT / line managers	Improve data reporting Links to EDS 3	Ongoing Contact made with the WIS team who support ESR. Staff guides produced and more friendly system to self-report being developed Reminder of the importance of self-identifying in the 6 monthly health and wellbeing conversations
2. Staff Survey To ensure the questions relating to WRES remain consistent in the next CCGs staff survey to be able to monitor against May 2021 survey results.	March 2022	IMT/ OD	Monitorin g staff experienc e Links to EDS goals 3 and 4	Ongoing. To include questions in the staff survey in January 2022.





3. Development of BAME network		OD team	Develop and	Ongoing.
To link into the ICS to explore what work is being done to develop the BAME network across Cheshire and Merseyside			support BAME employee s	
			Links to EDS goals 3 and 4	
4. Link into the ICS To link into the ICS Workforce and OD Group and the Communications and Engagement Group to develop the ICS and place actions on equality, inclusion and WRES is being picked up from April 2022.	March 2021	IMT	Ongoing support	IMT lead sits on both the ICS Workforce and OD Group and the Communications and Engagement Group