Workforce Race Equality Standard

REPORTING TEMPLATE (Revised 2016)

Template for completion

Name of organisation

DIAGNOSTIC ULTRASOUND SERVICES

Date of report: month/year

February 2021

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

DR DAVID HILL

Name and contact details of lead manager compiling this report

DR DAVID HILL email: davidhill1@nhs.net

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

SURREYHEARTLANDSCCG, NHS WEST SUSSEX CCG, NHS KENT AND MEDWAY CCG

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

SURREYHEARTLANDSCCG

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

www.oxtedultrasound.com

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

5th February 2021

Publications Gateway Reference Number: 05067

Report on the WRES indicators

1. Background narrative

a. Any issues of completeness of data

STAFF QUESTIONNAIRE COMPLETED BY 4 OF 4 SELF-EMPLOYED SONOGRAPHERS AND 2 OF 2 ADMINISTRATIVE STAFF
ANNUAL APPRAISAL DISCUSSION OF QUESTIONNAIRE AND WRES FINDINGS TO PROMOTE REPORTING

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

HIGHER THAN NATIONAL FIGURES FOR REPORTING OF HARASSMENT AND BULLYING OF BME STAFF SO NEED TO ENSURE CORRECT REPORTING BUT ENCOURAGE OPENNESS.HIGHER FIGER TIS YEAR - SINGLE MEMBER OF STAFF REPORTED ISUES AT OTHER WORKPLACE- AS WELL AS AT DUS WORKPLACE.

2. Total numbers of staff

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

NONE - STAFF SELF EMPLOYED AND SUBCONTRACTED ADMINISTRATIVE STAFF

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

16.7%

3. Self reporting

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

100%

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

PROMOTION OF WRES AND ASSOCIATED BENEFITS. DISCUSSION AT ANNUAL APPRAISAL AND TEAM MEETINGS

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

DISCUSSION OF FINDINGS AND PROMOTION OF FINDINGS

4. Workforce data

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

JAN 2020 - JAN 2021

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.	N/A	N/A		
2	Relative likelihood of staff being appointed from shortlisting across all posts.	100%	100%	NATIONAL SHORTAGE OF FULLY QUALIFIED AND EXPERIENCED SONOGRAPHERS- A PROTECTED PROFESION	
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%		
4	Relative likelihood of staff accessing non-mandatory training and CPD.	100%	100%	REGULAR AUDIT AS PART OF CLINICAL SESSIONS	

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 0% BME 100%	White 13% BME 0%	I1 BAME SONOGRAPHERREPORTING HARASSMENTBY PATIENTSNOT FULLY PREPAREDFOR SCANS EG NOT FULL BLADDER PRIOR TO SCAN - ARGUMENTATIVE WHEN CHALLENGED	FULL TEAM DISCUSSION RE MANAGING PATIENTSAND EXPECTATIONS- NOT FELT TO BE RACISM ISSUE WITH PATIENTS
6	KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.	White 0% BME 0%	White 0% BME 0%	NO ISSUESOR CONCERNS RAISED	OPENNESSAND REPORTINGOF CONCERNS ENCOURAGED FR ALL STAFF
7	KF 21. Percentage believing that trust provides equal opportunities for career progression or promotion.	White 100% BME 100%	White 100% BME 100%	ALL STAFFREEPORTHAPPY WITH PRESENT ROLES AND RSPONSIBILITIES	
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 0 BME 0	White 0 BME 0	NO ISSUESRAISED	EPORTINGOF CONCERNS REGULARLY ENCOURAGED AND PROMOTED AT INCLUSIVE TEAM MEETINGS
	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.	n/a	n/a		

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?

FULL DISCUSSION OF THEMES OF WRES ISSUES RAISED - AT MULTIDISCIPLINARY TEAM MEETINGS HELD REGULARLY. ISSUES RAISED ARE HIGHLIGHTED AS A SMALL TEAM AND CONCERNS DISCUSSED IMMEDIATLEY THEY ARE RAISED. SECURITY OF STAFF PARAMOUNT - URGENT CALL SYSTEMS REVIEWED AND USE PROMOTED

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.

SEE TEAM MEETING MINUTES FEB 2021

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