

Equality
Delivery
System 2

2018

Goal 3: A representative and supported workforce

1. Introduction

The Equality Act 2010 provides a legal framework to strengthen and advance equality and human rights. The Act brought together all existing equality law - such as the Sex Discrimination Act 1975, Race Relations Act 1976, Equal Pay Act 1970, Disability Discrimination Act 1995 - into one single legislative framework and covers nine protected characteristics:

- Age
- Race
- Sex
- Disability
- Marital status and civil partnership
- Sexual orientation
- Religion or belief
- Pregnancy and maternity
- Gender reassignment

Everyone has at least one protected characteristic – we all have an age, a race or a sexual orientation – so the Equality Act is for everyone to ensure they are not discriminated or treated differently because of a protected characteristic.

The Public Sector Equality Duty, as set out in the Equality Act (2010), requires public bodies like Salford CCG to have a general duty to show 'due regard' to the following three aims:

1. Eliminate unlawful discrimination, harassment and victimisation
2. Advance equality of opportunity between people who share a protected characteristic and those who do not
3. Foster good relations between people who share a protected characteristic and those who do not

The duty has a key role to play in making sure that fairness is at the heart of public bodies' work and that public services meet the needs of different groups. The Act explains that having due regard for advancing equality involves:

- Removing or minimising disadvantages suffered by people due to their protected characteristics
- Taking steps to meet the needs of people from protected groups where these are different from the needs of other people
- Encouraging people from protected groups to participate in public life or in other activities where their participation is disproportionately low.

To meet this general duty, Salford CCG has two specific duties:

1. Publish our equality information to show compliance with the general duty
2. Publish our equality objectives needed to meet the aims of the general duty

What is EDS2?

The Equality Delivery System (EDS) was launched in 2011 by NHS England to help NHS organisations improve performance on equality and diversity through regular reviews and engagement with the workforce, patients, carers, public, voluntary sector and Governing Body members.

In 2013, a more streamlined and simpler version of the EDS was launched and is known as EDS2. In 2015, it became mandatory and is now part of the CCG Assurance Framework and the standard NHS provider contract.

EDS2 reviews 18 outcomes grouped under four goals:

1. Better outcomes
2. Improved patient access and experience
3. A representative and supported workforce
4. Inclusive leadership

Having previously focused on goal 2 in 2016 and goal 4 in 2014, our Engagement and Inclusion Management Group (EIMG) agreed that the 2018 grading would focus on goal 3: a representative and supported workforce.

2. Goal 3: staff engagement and grading

Under goal 3, there are six outcomes. For each outcome, the CCG is required to find suitable evidence that shows how well we are progressing and grade our own performance. The EDS2 framework provides stipulated grading based on the amount of information and assessment across all protected characteristics:

- Undeveloped: if there is no evidence one way or another for any protected group of how people fare, or if evidence shows that the majority of people from protected groups fare poorly
- Developing: the evidence shows staff members from some protected groups fare well
- Achieving: the evidence shows staff members from most protected groups fare well
- Excelling: the evidence shows that the majority of people in all nine protected groups fare well

To assess our performance against goal 3, Salford CCG held three engagement events during September 2018 with employees and equality and diversity (E&D) leads from stakeholder organisations. The assessment involved gathering an initial evidence baseline for each outcome. This was sent out in advance to the three groups and they were asked to read the evidence pack in preparation for the grading events.

The first group to meet was E&D representatives from peer organisations; Salford City Council, Salford Community and Voluntary Service (CVS) and the University of Salford. With a facilitator from the CCG's engagement, inclusion and development team (EID) recording comments and recommended actions, the group discussed and reviewed the evidence before agreeing as a group the grading for each outcome.

The second group was the CCG's personal, fair and diverse (PFD) champions. Our 10 PFD champions are employees nominated by their teams to develop staff support across Salford CCG. The group meet bi-monthly to talk about life as a member of staff working for Salford CCG and what can be done to support our colleagues. As with the first group, the PFD champions discussed and reviewed the evidence facilitated by a CCG EID facilitator, and agreed a grade for each outcome along with suggested actions.

The third and final group was with the CCG's Executive Team Plus, i.e. our Executive Team plus the senior managers who report directly into an Exec. This was a larger group (20), including the CCG's Governing Body representative for equality and diversity. The group was split into smaller groups, each with a CCG EID facilitator and asked to discuss each of the six outcomes as a table. The groups then came back together as one to share the themes from their table discussions and suggested grades. Following this, the group was then informed of the results from the E&D peers and PFD champions and, where there wasn't a consensus between the three groups, the Execs Plus decided the best combined grades for the final assessment.

The outcomes for goal 3 were graded based on evidence gathered from the following main sources:

- NHS Staff Survey 2017
- Salford CCG Workforce Profile Report 2017-18
- Workforce Race Equality Standard (WRES)
- Relevant internal policies and procedures

3. Key findings

Below is a summary of the key findings against each outcome. Please refer to Appendix 1 for the evidence and Appendix 2 for summary of comments.

	Outcome	Grading	Rationale for grading
3.1	Fair NHS recruitment and selection processes which lead to a more representative workforce at all levels	Developing	We follow national NHS policies and guidelines for recruitment and anonymised selection process, but evidence shows not all protected groups are suitably represented across all levels of the organisation
3.2	Equal pay for work of equal value and use equal pay audits to help fulfil our legislation	Undeveloped	We adhere to the NHS Job evaluation scheme and the Agenda for Change terms and conditions, but no evidence available by protected characteristic around work of equal value
3.3	Training and development opportunities which are taken up and positively evaluated by all staff	Developing	Lots of training and development opportunities available which are positively evaluated by staff, but we need to do more on recording protected characteristics to effectively assess whether staff from all groups are participating
3.4	Staff to be free from abuse, harassment, bullying and violence from any sources when at work	Developing	Lots of evidence of the measures in place to support employees, but evidence from Staff Survey still shows two age groups are reporting bullying so only some protected groups fare well
3.5	Flexible working options available for all staff consistent with the needs of the service and the way people lead their lives	Achieving	Staff members from most protected groups fare well as the overall workforce
3.6	Staff reporting positive experiences of being a member of staff for Salford CCG	Achieving	Staff members from most protected groups fare well as the overall workforce

Key

<u>Undeveloped</u> Staff members from all protected groups fare poorly, or the evidence is not available	<u>Developing</u> Staff members from only some protected groups fare well	<u>Achieving</u> Staff members from most protected groups fare well	<u>Excelling</u> Staff members from all protected groups fare well
---	--	--	---

4. Learning and improvement plan

The key learning points from our self-assessment against EDS2 goal 3 are:

- Our first assessment against goal 3 provides a strong baseline to develop the CCG's workforce diversity and inclusion work and wider organisational development. While the next EDS2 will focus on goal 1, we will do an informal review against our improvement plan for goal 3 during 2019 to ensure progress is being made
- The EDS2 improvement plan will link in with our WRES action plan and actions arising from Diversity and Inclusion Workforce Demographics 2017/18 interim report
- Gathering robust evidence across all protected characteristics was a challenge. Within the NHS, Salford CCG is a small organisation with a workforce of c150 therefore reporting some protected characteristics is a challenge without leading to identification. For example, the NHS Staff Survey results were not available by breakdown of ethnicity due to the low number of BME staff who participated
- Disclosure of protected characteristics is not consistent. For example, 14% of staff do not disclose their religious beliefs and 7% do not disclose their sexual orientation on the Electronic Staff Record (ESR). Likewise, 4% of staff declares a disability of ESR, compared to 20% in the Staff Survey. The accuracy of the data from ESR could also be challenged, for example, if people's marital status has changed but not been updated on ESR, or they have a disability they may not have had when they joined the CCG
- The CCG needs to do more around educating our workforce on why we ask for equality characteristics and demonstrate the improvements that can be made if we have an accurate picture of the diversity of our workforce
- We need to be more robust on collecting equality information for wider purposes, not just ESR. For example, uptake on training opportunities, attendance at learning lunches

Improvement plan

Outcome	Description	Source	Action	Lead/ timescale
3.1	The ESR is either outdated or not accurate through non-disclosure	PFD champions	Internal communications campaign to promote the purpose of the EDR and encourage staff to check their record is up to date	LK December 2018
3.1	The discrepancy between % of staff declaring disability on ESR compared to much higher Staff Survey results	PFD champions and Execs+	Linked into above action, but also some work around understanding what staff would consider a disability, i.e. difference between a long term condition and a disability, through a learning lunch	LK December 2018
3.1	Senior managers dominated by women, but they are not developing up to Governing Body/Exec level	Execs+	Focus group with female members of staff from across all levels of the organisation to understand the barriers Produce Gender Pay Gap report and subsequent action plan	LK Mar 2019 LK Nov 2018
3.1	Lack of BME staff in the top four AfC pay bands	PFD champions, Execs+, E&D peers	Continue regular promotion of Stepping Up, NHS Leadership Academy's development programme for BME staff Promote relevant new posts to interfaith BME groups via social media Focus group for BME staff to understand the barriers, although low numbers may be an issue	LK Ongoing
3.1	The application/interview process is not suitable for all, so we need to look beyond the interview performance	PFD champions	Deliver unconscious bias training to recruitment managers	AT Mar 2019
3.2	Pay and grading does not take into account additional responsibilities	PFD champions and Execs+	Managers to discuss with team members if additional duties require job re-grading/review as part of annual/six month appraisal process	Ongoing

3.2	Job descriptions are not reflective of a person's role and are outdated	PFD champions	As above	Ongoing
3.3	We don't have a breakdown by protected characteristics for the uptake of training to evaluate if a protected group is missing out	PFD champions, Execs+, E&D peers	Equality monitoring is now part of Virtual College	AT Ongoing
3.3	Low % of people returning their completed appraisal paperwork to feed into CCG's training needs analysis	PFD champions, Execs+, E&D peers	Internal communications around appraisal time emphasising importance of returning paperwork and what it is used for	AT April 2019
3.3	People are not recording centrally when they have undertaken non-mandatory training	PFD champions, Execs+	As above, internal communications to staff and managers	AT April 2019
3.3	No breakdown by protected characteristic of people attending learning lunches	Execs+	More formal attendance process to be put in place so we have record of attendees	SL October 2018
3.4	We need to demonstrate how we prevent bullying and harassment	Execs+	<p>Continue to upskill the PFD champions to be anti-bullying advocates and engage with them to establish alternative and innovative ways to reduce bullying/harassment</p> <p>Regularly promote the PFD champions including quarterly You Said, We Did updates and summaries of meetings for staff to understand their role/remit</p> <p>Set up a PFD Champions generic email so staff have the option to be more anonymous rather than having to pick someone to contact</p> <p>Promote on a regular basis the CCG's Bullying and Harassment Policy through internal communication</p>	<p>LK Ongoing</p> <p>SL Ongoing</p> <p>SL October 2018</p> <p>LK Nov/Mar/</p>

			channels We are in the process of moving onto a new staff extranet with the CCG policies easier to find, which will continue to be used as key message for internal communications Promote on a regular basis the feedback mechanisms for staff (e.g. Ask Anthony, comments box in staff kitchen)	Jul LK December 2018 LK Nov/Mar/ Jul
3.4	Breakdown by protected characteristics of people contacting Employee Assistance Programme to help identify any patterns	Execs+	To be explored with EAP providers if a possibility, although confidentiality may be a barrier to getting this information	LK Mar 2019
3.4	Staff Survey results are not representative of the workforce	PFD champions, Execs+, E&D peers	More communications to staff emphasising the benefits of completing the Staff Survey and use of You Said, We Did to show the difference it can make	LK January 2019
3.4	Perception of what is bullying/harassment can differ	PFD champions, Execs+	Explore options for bullying/harassment awareness training for all levels of staff, either externally or via the PFD champions	AT March 2019
3.5	Evidence of flexible working requests, who is approved/denied and are there correlations between the protected characteristics	PFD champions, Execs+	Formal requests are logged with HR and can explore if possible to get a breakdown by protected characteristics Promotion of flexible working policy and processes to encourage staff to make formal requests, which can then be monitored	LK March 2019
3.6	Need more evidence of how staff are using the channels available	PFD champions, Execs+	Internal communications review to staff opinion on the communication channels available to them	LK October

	to them			2018
3.6	More promotion of Staff Forum and its purpose		<p>Promotion of the Staff Forum dates in Staff News and staff extranet with agenda included</p> <p>Minutes from the Staff Forum posted on staff extranet and promoted in Staff News</p> <p>Quarterly You Said, We Did summaries in Staff News</p>	AT Ongoing
3.6	Option to include qualitative feedback in NHS Staff Survey	Execs+	Can request for NHS Staff Survey 2019	CC Jan 2020

Appendix 1: EDS2 evidence used for grading

We are aiming for:

- ✓ Fair NHS recruitment and selection processes which lead to a more representative workforce at all levels

We do this by:

- ✓ Recruiting in line with national NHS policies and our Recruitment Selection Policy, available on [staff extranet](#), which supports managers to provide a fair, consistent and effective approach to recruitment
- ✓ Including equality statements as standard within job descriptions and person specifications, and disability Two Ticks
- ✓ Advertising all roles through NHS Jobs using anonymised application forms/scoring system during recruitment/interview process
- ✓ Collecting equality monitoring information during recruitment via NHS Jobs, recorded via the Electronic Staff Record
- ✓ Publishing workforce information annually as part of the [Annual Equality Report](#) and the [NHS Workforce Race Equality Standard](#) providing an analysis of the workforce comparing with the local population, which then is used to formulate equality objectives and action plans
- ✓ Regular workforce report is provided by HR Business Partners, which cover recruitment information
- ✓ Including mandatory training on equality and diversity for all staff and Key Skills for Managers; mandatory training which covers considerations and implications for equality and diversity across all modules, including recruitment

How representative are we of the Salford population?

Gender

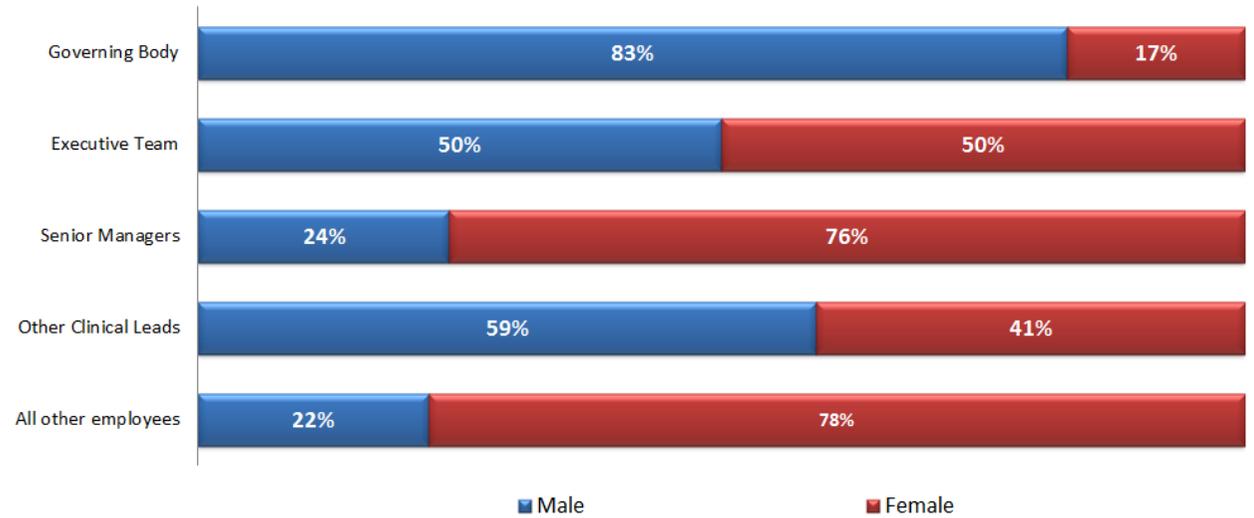
The % of Salford population who are...

49% male 51% female



The % of Salford CCG's workforce who are...

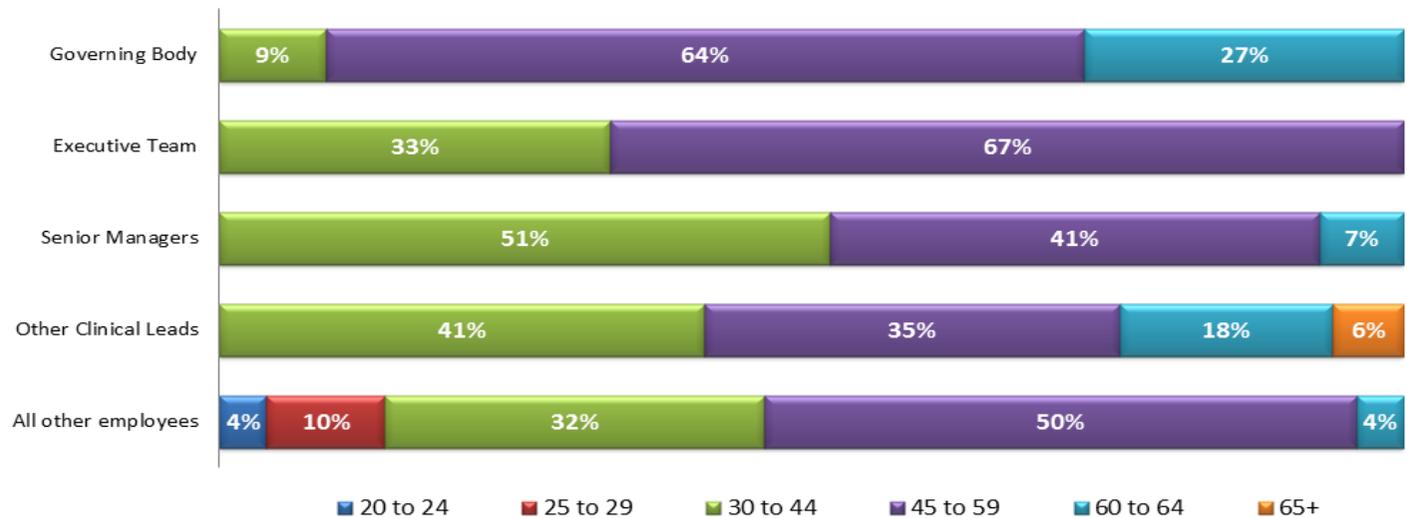
33% male 67% female



Age

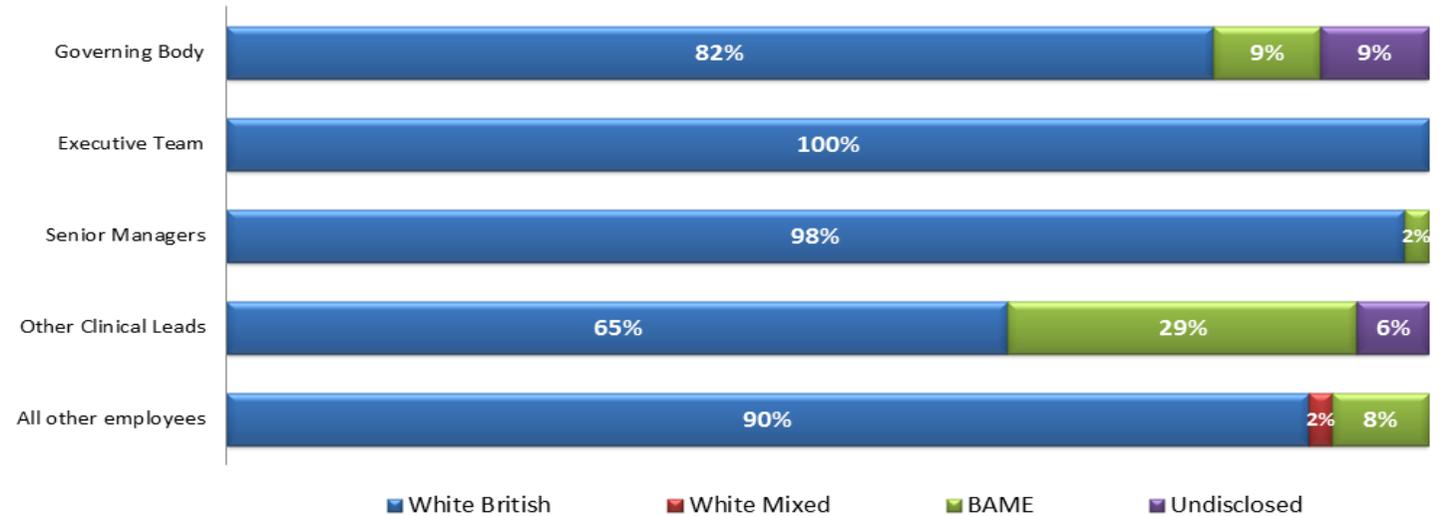
Age	Salford* %	CCG%
Under 20	9%	0%
20 to 24	11%	2%
25 to 29	12%	5%
30 to 44	28%	37%
45 to 59	24%	47%
60 to 64	7%	8%
65 and over	10%	1%

*working age population



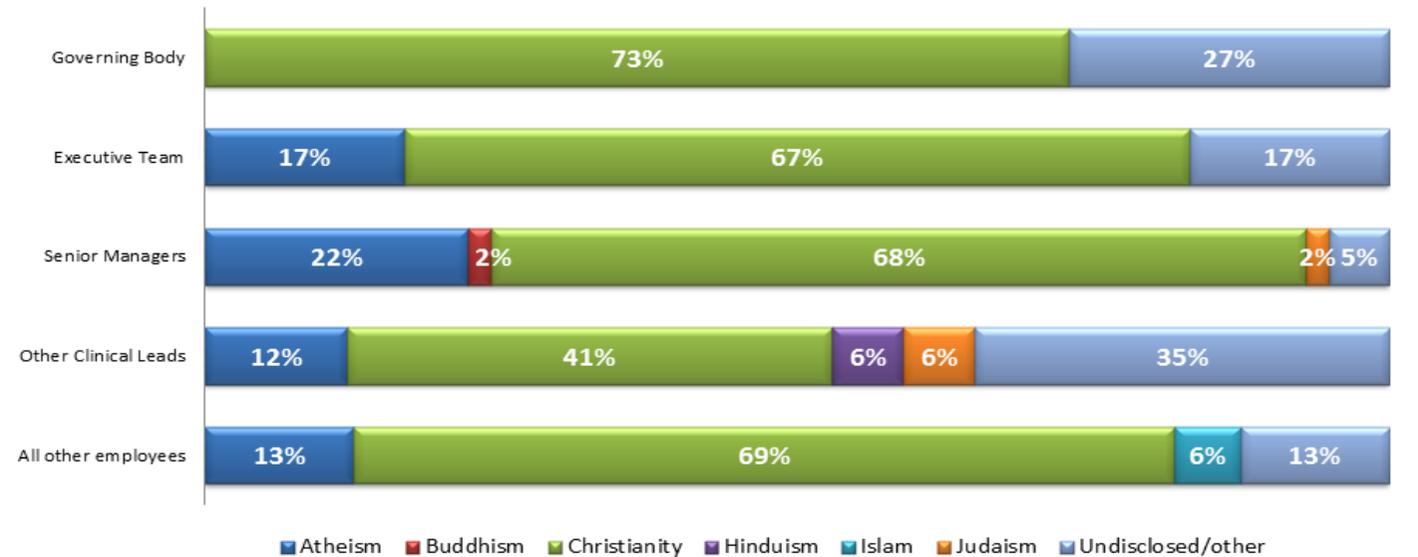
Race

Ethnic origin	Salford %	CCG%
White British	84.4%	89.7%
BAME	8.9%	8.8%
White ME*	5.7%	0.5%
Other	1.1%	0%
Undisclosed	0%	1%

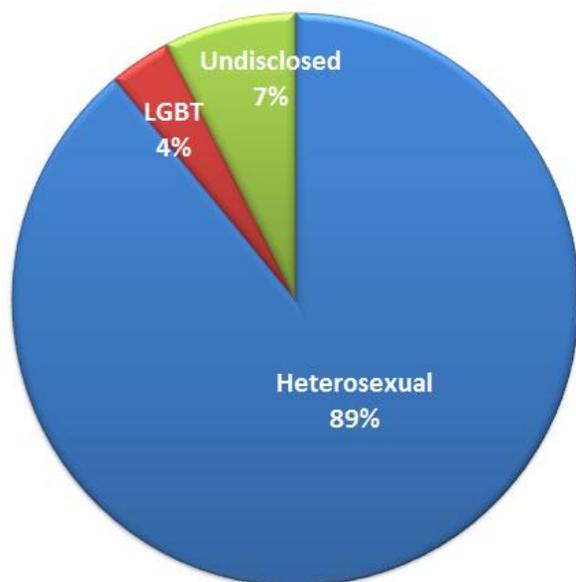


Religion

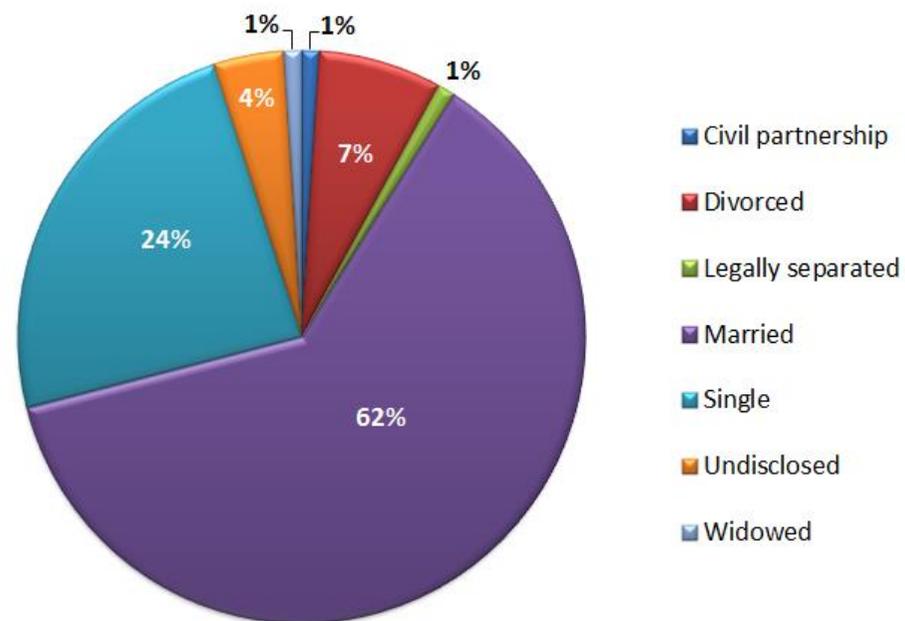
Religion or belief	Salford %	CCG %
Atheism	22%	14%
Buddhism	0.5%	1%
Christianity	64%	66%
Hinduism	0.5%	1%
Islam	3%	3%
Judaism	3%	1%
Sikhism	0.1%	0%
Undisclosed/other	6%	14%



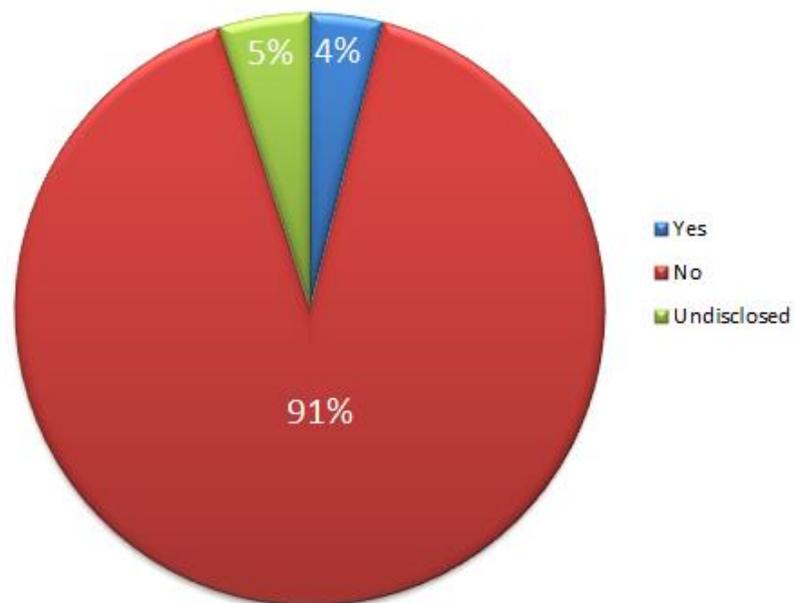
Sexual orientation (Salford CCG)



Marital status (Salford CCG)



Disability (Salford CCG)



We are aiming for:

- ✓ **Equal pay for work of equal value and use equal pay audits to help fulfil our legal obligation**

We do this by:

- ✓ Adhering to [Agenda for Change NHS Terms and Conditions of employment](#), adopting the grading structures and salaries
- ✓ The Agenda for Change Agreement has been [equality impact assessed](#) to ensure that it is not discriminatory across all protected characteristics
- ✓ Job descriptions and person specifications are sent to an independent panel for review where the information is evaluated and scored against 16 factors. The final score results in the banding applied to the post. The process of evaluation is based solely on the job description and person specification and therefore does not discriminate against the protected characteristics.
- ✓ Travel expenses procedure and policy in place
- ✓ No complaints regarding equal pay have been submitted in the last 12 months

We are aiming for:

- ✓ Training and development opportunities which are taken up and positively evaluated by all staff

We do this by:

- ✓ Embedding [Our People Plan 2014 – 2019](#), which outlines how staff will be developed to achieve the CCG's strategic objectives and embed our values
- ✓ Giving staff protected time to attend team away days, as well as the annual Salford CCG Staff Away Day
- ✓ Promoting a wide range of internal and external learning and development opportunities in our weekly CCG eBulletins, including opportunities through the CCG's NHS Leadership Academy membership, e.g. Stepping Up for BAME staff
- ✓ Mandatory training for all staff includes an Equality and Diversity module, refreshed every three years
- ✓ Monthly mandatory training compliance reports are circulated to line managers to encourage compliance across teams
- ✓ Launched Virtual College, an online learning system to log mandatory and non-mandatory training
- ✓ 99% of staff declared in Staff Survey they have had an appraisal within the last 12 months although 75 Personal Development Plans have been submitted (47% of workforce). Staff are encouraged to identify training needs with their line managers during their annual appraisal and regular 1:1s with line managers, which is then fed into the annual CCG training needs analysis and used to shape the CCG's training offer to staff
- ✓ Encouraging attendance at monthly Learning Lunches with expert speakers giving an overview to different protected characteristics and the issues they may face to raise awareness of diversity

What are our staff views on training and development opportunities?

Results from the NHS Staff Survey 2018 (max score, if not a %, is 5)

(Breakdown by ethnic minority is not available due to low numbers who completed)

	Age 16 – 30	Age 31 – 40	Age 41 - 50	Age 51+	Men	Women	Disabled	Not disabled
Quality of appraisals	3.73	3.84	3.55	3.94	3.71	3.74	3.36	3.81
Quality of non-mandatory training, learning or development	4.09	4.08	4.09	4.11	4.08	4.08	3.98	4.12
% believe CCG provides equal opportunities for career progression	-	100%	97%	100%	96%	100%	94%	99%

We are aiming for:

- ✓ Staff to be free from abuse, harassment, bullying and violence from any source when at work

We do this by:

- ✓ Providing several forums for staff to air any concerns/views i.e. Personal, Fair and Diverse Champions, Staff Forum, comments box in kitchen
- ✓ Employee Assistance Programme available to all staff providing confidential information, advice and a support line on issues related to work/career, relationships, children, money, individual rights, health and wellbeing, management support, and retirement
- ✓ A number of policies in place to protect staff rights and guidance on reporting and dealing with incidents, including Bullying and Harassment Policy, Whistleblowing Policy, Grievance Policy, all of which are subject to equality impact assessments and available via [staff extranet](#)
- ✓ Whistleblowing module included in mandatory training
- ✓ Participating in annual NHS Staff Survey to give staff a forum to feedback their experience of the workplace anonymously
- ✓ Support available such as the provision of counselling via Occupational Health
- ✓ In 2016, the annual CCG Staff Away Day included a session on refreshing CCG's values, which includes acting with integrity. This is embedded in our organisational culture through values-based leadership and appraisals

What are our staff views on abuse, harassment, bullying and violence in work?

Results from the NHS Staff Survey 2018

(Breakdown by ethnic minority is not available due to low numbers who completed)

	Age 16 – 30	Age 31 – 40	Age 41 - 50	Age 51+	Men	Women	Disabled	Not disabled
% experiencing physical violence from staff in the last 12 months	0%	0%	0%	0%	0%	0%	0%	0%
% experiencing harassment, bullying or abuse from staff in the last 12 months	18%	7%	17%	6%	9%	12%	12%	14%

We are aiming for:

- ✓ Flexible working options available for all staff consistent with the needs of the service and the way people lead their lives

We do this by:

- ✓ As part of the NHS Terms and Conditions of Service, the CCG may be able to offer flexible working arrangements such as part-time working, compressed hours and job shares, if practical. These are outlined in the Flexible Working Policy available on staff intranet
- ✓ Agile Working Procedure in place along with carers leave; maternity and paternity leave; adoption policies, all which are subject to equality impact assessments and available on [staff extranet](#)
- ✓ Reasonable adjustments
- ✓ Occupational health provision available
- ✓ Key Skills for Managers, mandatory training for all line managers which includes considerations and implications for flexible working

What are our staff views on availability of flexible working opportunities?

Results from the NHS Staff Survey 2018

(Breakdown by ethnic minority is not available due to low numbers who completed)

	Age 16 – 30	Age 31 – 40	Age 41 - 50	Age 51+	Men	Women	Disabled	Not disabled
% satisfied with the opportunities for flexible working patterns	100%	87%	90%	80%	82%	89%	92%	85%

We are aiming for:

- ✓ Staff reporting positive experiences of being a member of staff for Salford CCG

We do this by:

- ✓ CCG weekly eBulletin, Staff News, keeps staff informed on latest news, training opportunities, vacancies and workforce wellbeing
- ✓ Team meetings/1:1s with managers to offer staff the opportunity to feedback
- ✓ Weekly Air and Share and monthly Air and Share Extra provide staff with overview on the week's activities from a strategic view
- ✓ Bi-monthly Staff Forum, comprising staff representatives from each directorate/team who raise positive thoughts and experiences, as well as areas for improvement on behalf of their team. The Forum is also used as a mechanism for cascading information to and from teams to ensure all members of staff are included. All matters raised are discussed by the Forum and possible solutions identified from best practice and/or individual experiences.

What are our staff views on being a member of staff for Salford CCG?

Results from the NHS Staff Survey 2018 (max score, if not a %, is 5)

(Breakdown by ethnic minority is not available due to low numbers who completed)

	Age 16 – 30	Age 31 – 40	Age 41 - 50	Age 51+	Men	Women	Disabled	Not disabled
Recommend Salford CCG as a place to work	-	4.24	4.40	4.07	4.18	4.30	4.27	4.21
Motivated at work	3.85	3.83	4.08	3.98	3.88	4.00	3.93	3.93
Satisfied with level of responsibility and involvement	4.22	4.17	4.21	4.19	4.19	4.17	3.80	4.20
Feeling recognised and valued by managers and the organisation	4.15	4.21	4.10	4.15	4.13	4.17	3.90	4.15
% reporting good communication between senior management and staff	55%	83%	68%	86%	76%	75%	69%	76%
% of staff attending work in last 3 months despite being unwell because they felt pressure	27%	43%	49%	37%	45%	40%	50%	41%
Staff satisfaction with the quality of work and care they are able to deliver	-	3.78	4.01	4.29	3.74	4.12	-	4.02

Appendix 2: Summary of comments from engagement

Outcome 1: Fair NHS recruitment and selection processes which lead to a more representative workforce at all levels

- Senior managers are dominated by women, but they are not developing up to Governing Body level. However, we have a stable Governing Body and Executive Team so we probably do not have many opportunities to move up
- Governing Body and GPs are recruited differently than other members of staff, so maybe this is something we can look at
- The fact that the process is anonymised helps
- There are good practices processes in place
- The definition of disability isn't clear, does it include LTC. Do people who live and work with LTC regard themselves as disabled?
- Why do people not declare disability or LTC in their application form?
- There is a large gender divide on the governing body. Is this relevant to the recruitment pool available rather than it being an issue of the CCGs
- Following national guidelines and policies doesn't capture the 'local' picture and the CCG should be a leader in committing to local recruitment policies
- Why do people not disclose their religious beliefs/sexual orientation?
- Why do people feel as though they can't declare their disability?
- How restricted are we by NHS policies?
- The application process is very rigid and may someone who may be great in person but not great at selling themselves on paper will not get through the application process. Or vice versa – someone may be great for the job, but doesn't do well in face-to-face interviews under pressure
- We need more younger staff under the age of 24
- There is more work to do, but we can only recruit those with the strongest skill sets and the pool from which we are recruiting

Outcome 2: Equal pay for work of equal value and use equal pay audits to help fulfil our legal obligation

- Remuneration Committee process could be used as evidence
- Mismatch in terms of people doing similar roles, made worse by the recent pay increase
- The Agenda for Change process means equal pay for jobs that are banded the same, but does not assess the workload
- When does it become an expectation for people to step above their pay scale just to gain experience?
- Work is coming in but nothing is dropping off at the other end, there is an intensity of workload
- Lack of evidence with regard to AFC banded staff

- Job descriptions should be reviewed and monitored at annual appraisal.
- Do we check across teams what each person does in comparison to others on that band?
- A person is recruited to a job description but as they develop and become more experienced their role may develop.
- There is a risk of evaluation an individual and their experience rather than the job description
- Can't always fall back on Agenda for Change, need to have robust audits to test this
- What is the gender pay gap of the CCG? Although slightly different, this could be something worth looking at
- We should be doing regular job description reviews for all staff because some people are still working with a job description that is not reflective of their actual role
- Lack of consistency – some people are doing the same work but are on different bands
- We're a Living Wage organisation – but what does this actually mean?
- Just because we haven't had any official complaints, doesn't mean that people don't feel adequately compensated for their role
- Are male employees more likely to try to negotiate their starting salaries or utilise ROPE more?

Outcome 3: Training and development opportunities which are taken up and positively evaluated by all staff

- We do very well on training, very structured path for some teams. The students who we train up then come back
- The opportunities are there, but do we know who takes them up? Need to do a piece of work to see which protected characteristics are taking up opportunities
- The pressure of workload may stop some people taking up training opportunities
- Rely on people sending in non-mandatory training forms to capture who is taking up training, but people don't always send their forms back
- The learning lunches are highly positive but do we have a breakdown of who attends.
- What issues are covered during the learning lunches?
- The current training and development offer is the same for everyone. Does this mean that some people are not accessing it as it does not meet their needs or that they have barriers that prevent them from taking up the offer?
- Barriers to accessing training and development should be discussed during annual appraisal or during 1-1s and this collated as evidence in order to address any barriers

- We're really lucky, I've had more development in my last four years here than I did in 20 years in a previous role
- Do all staff have equal access to paid training? How do we know if people are asking to attend training courses but being told by their managers no?
- Staff may not want to develop their skills. Always this assumption that everyone wants to develop. Some people may be happy in their role as it is and shouldn't feel pressured to do training

Outcome 4: Staff to be free from abuse, harassment, bullying and violence from any source when at work

- Alarming that two groups of protected characteristics, nearly 20% report bullying/harassment
- Bullying/harassment is subjective and what someone perceives to be bullying, another may not, e.g. if a staff member is told to do something by a manager, this could be perceived as bullying
- A lot of the evidence is how we provide support for people who feel they are bullied etc. We need to demonstrate how we prevent bullying and harassment. For example; how we invest in management training
- Exit interviews should provide evidence of why people leave. How are they conducted and how do we collate and use the resulting information.
- We would like to know how our figures compare nationally as they are surprisingly high
- There is a danger that staff who are being performance managed are being bullied. Do we need to be clear with staff that as an organisation performance will be monitored and managed?
- The Staff Survey results are not representative of the whole workforce
- Do we have a breakdown of directorate/teams that people who feel bullied or harassed work in? Could be more isolated an issue than reflects overall
- Do we have a breakdown by protected characteristics of the people who contact the Employee Assistance Programme to understand if there is a particular group affected
- We don't have a great recording rate for appraisal paperwork
- The people who are feel they're being bullied/harassed – where are they in the bandings, is there a pattern there?
- We should do another push around the PFD champions and raise awareness of their role and how they can support staff
- A lot of it is perception – different people have different reactions
- Is this response reflective of the last 12 months or are people 'in the moment' when they are completing the Staff Survey and may feel differently if they were asked at a different time

- As bullying is subjective, it is possible some people who are being performance managed could feel aggrieved and class it as bullying/harassment

Outcome 5: Flexible working options available for all staff consistent with the needs of the service and the way people lead their lives

- Issues with consistency across the organisation
- We have all the right things in place, but there is inconsistency in how they are applied
- Very, very flexible and accommodate flexible working and make reasonable adjustments
- Do we have evidence that this is applied across all staff groups in all departments?
- Are we bias towards awarding parents with flexible working?
- Is the 'first come, first served' approach fair?
- Evidence should be available in the authorisation paperwork of people being granted flexible working and also of anyone having been refused and a breakdown of the uptake by protected characteristics
- Are flexible working policies being implemented evenly across teams and across protected characteristics.
- Is there any evidence of unreasonable requests for flexible working?
- The older you are, the less great you are feeling

Outcome 6: Staff reporting positive experience of being a member of staff for Salford CCG

- Evidence on a whole is really positive
- Concern about staff attending work when unwell because they are feeling under pressure
- Is it a two-way process? Lots of evidence to say the ways for the CCG to inform staff, but where is the evidence that staff are feeding back, both positive and negative?
- The evidence available demonstrates what the CCG is doing that may contribute to staff feeling positive about working at the CCG. What is missing is the evidence that staff do report positively
- Why do those who identify as having a disability have one of the highest scores for recommending Salford CCG as a place to work, but the lowest satisfaction rates and feeling of being valued?
- Would like to see evidence from the staff forum, what has been brought to the forum and how it was address/resolved
- A breakdown of what is asked via 'Ask Anthony' and response
- A breakdown of what is put in the suggestion box and the response

- Staff satisfaction results broken down into directorates/teams
- Activity such as the recent communications survey and it's results should have been included as evidence
- Although some of the results aren't great about attending work due to pressure, the ultimate evidence is the percentage of staff who recommends the CCG as a place to work, which is 4+ across the results
- Is it possible to have qualitative evidence as part of the Staff Survey? Can we get text boxes added so people can explain their answers and then it gives better perception
- Are people feeling under pressure from their managers/colleagues or is it personal pressure they are putting on themselves?