Workforce **Equality and Diversity**



Monitoring Report

2014-2015

University Hospitals of Leicester NHS





Glossary of terms

AHP - Allied Health Professionals

BME- Black, Minority Ethnic (within this report this includes Asian; Black; mixed; other; white-other.)

Disciplinary Processes – within this report this represents any case that was investigated and includes outcomes that were formal, informal, found to have insufficient evidence, no case to answer, or the staff member resigned pending outcome.

EMLA- East Midlands Leadership Academy

ESR – Electronic staff register

LGB - Lesbian, Gay, Bi-sexual

Local – this includes any members of staff across various job roles not on an agenda for change pay scale.

LLR – Leicester, Leicestershire and Rutland

Other medical and dental – any medical and dental staff not in a consultant role.

QFC – Qualification Framework certificate

Undefined – This represents data where we staff have not completed equal opportunities data

Undisclosed – This represents data where staff have actively chosen not to declare status.

Unknown - includes both staff that do-not wish to declare and those who have an undefined status.

WRES - Workforce Race Equality Standard

Equality Workforce Monitoring Report 2014-2015

1. Introduction

The Workforce monitoring report has been presented to the Trust Board as to comply with our Legal Duty we need to publish the data against the nine protected characteristics that are:



Currently we collect and report staff data on disability, age, race, religion and belief, sex, and sexual orientation. We are also able to report on the numbers of staff taking maternity and paternity leave and staffs marital status.

In line with our requirements under the Public Sector Equality Duty we have collected, analysed and published our workforce data by:



1.1 Staff Survey

In addition to our Public Sector Duty this year's report also includes analysis from our staff attitude survey. The purpose of collecting and analysing this data is to allow us to identify any differences between groups in terms of satisfaction and engagement. To investigate the reasons for these differences and to put suitable actions in place to tackle and prevent issues that may disengage certain groups of the workforce. The Care Quality Commission also uses the results from the surveys to monitor on-going compliance with essential standards of quality and safety.

2. Report Summary

2.1 Profile of our Workforce - General Headlines

The data has been taken from the Electronic Staff Register in March 2015

- The total headcount of staff has increased by 6.9% this year to 12,645.
- The overall workforce profile remains largely unchanged from last year.
- Within the protected characteristic groups of Disability, Religion and Sexual
 Orientation we continue to see a decrease in our undefined status, with the
 corresponding increase in declarations accounting for the increase
 percentages noted in these groups.
- The unknown status within these characteristics of around 30% is significantly more than seen within other characteristics.

2.2 Data Reporting Changes

In order to provide an improved description to the changing ethnicity of our workforce the ethnicity classifications used for the report have been redefined offering added definition. This includes white-other, mixed and undisclosed becoming distinct categories. This change does mean that direct comparisons to previous year's data cannot be made in some instances e.g. 'other' but will provide a clearer picture moving forward.

2.3 Data Headlines

Our current BME representation of 28.9% is favourable against the 2011 census data, demonstrating its 8% higher than the population we serve (Leicester, Leicestershire and Rutland).

Our overall age profile reflects a normal distribution curve but there with slight increases in the younger and older age group in comparison to last year.

Minimal percentage changes in sex representation with the exception of Additional Professionals and Technical which has seen a 2.5% increase in female representation. These types of job roles include pharmacists, operating department practioners and dental technicians.

Table 1. Comparison of workforce Profile 2015/2014

	March	March	Difference
	2015	2014	

	Yes	2.1%*	1.7%	1 0.4%
Disability	No	68%	63%	1 5%
Disability	Undisclosed	4%	4%	No change
	Undefined	27%	31%	4 %

*2.1% represents 268 staff members

Sov	Male	21%	20%	1 %
Sex	Female	79%	80%	₹ 1%

	White -UK	66.3%	68%	Redefined*
	White - Other	2.1%	00%	nedelliled
	Asian	18.9%	18.3%	1 0.6%
Ethnicity	Mixed	1.4%	-	Redefined
	Black	4.4%	4.4%	No change
	Other	2.1%	9%	Redefined
	Undisclosed	4.9%	-	Redefined
	BME Total	28.9%	32%	Redefined
	<=30yrs	21%	20%	1 %
	31-40yrs	26%	27%	♣ 1%
Age Band	41-50yrs	27%	28%	↓ 1%
	51-60yrs	22%	22%	No Change

	Atheism	8%	7%	1 %
	Christianity	42%	41%	1 %
	Hinduism	6.8%	6.1%	1 0.7%
Religion	Islam	5.1%	4.6%	1 0.5%
neligion	Sikhism	1.8%	1.6%	1 0.2%
	Other	5.8%	5.2%	1 0.6%
	Undisclosed	11.3%	11.5%	4 0.2%
	Undefined	19%	24%	₹ 5%

4.4%

3.8% 1 0.6%

	LGB	1.4%*	1.3%	1 0.1%
Sexual	Heterosexual	66%	61%	1 5%
Orientation	Undisclosed	11.7%	12%	₽ 0.3%
	Undefined	20%	25%	₹ 5%

^{*1.4%} represents 171 staff members

>60yrs

3.0 Summary of Headlines for each protected characteristic.

3.1 Disability

- Within our workforce 268 staff members have declared they have a disability which is an increase of 39 on last year. This equates to 1 in every 47 members of staff which is significantly less than would be expected given recent census reports that nearly 1 in 5 people of working age in Great Britain have a disability, long-term health problem or impairment.
- There continues to be disabled staff represented within all of our staff groups. Proportionally to staff group the highest percentage is seen in Estates and Ancillary (3.72%) and lowest in Additional Professionals and Technical (0.97%).
- Under representation at senior level remains apparent with no representation at bands 8C-9 and a 3% decrease this year in band 8a-8b. The uptake of

leadership training courses is also less in disabled staff (0.04%) when compared to non-disabled staff (0.1%) in bands 5-9.

- Of appointments made to the Trust 3% were to staff declaring a disability. The trends at recruitment are consistent with that seen in previous years with disabled staff fairing worse than non-disabled staff as they pass through the process.
- Of staff leaving the Trust 2.7% had declared a disability which is a slight increase on the previous year. The majority of these staff (60%) left as a voluntary resignation.

3.2 Sex

- The overall workforce male-female ratio of staff is 21% -79% respectively, but with variations amongst staff groups. Female representation is greatest within Nursing and Midwifery (92%) with male representation greatest amongst Medical and Dental (60%). The only group demonstrating any significant percentage change is Professional Scientific and Technical with a 2.6% increase in female staff
- As in previous years the data demonstrates an overall trend of increasing male representation as a proportion as the pay band increases.
- There has been a 14% increase in Consultants on the previous year but due to the gender distribution the overall Female consultant representation has now decreased. As a workforce trend female staff continue to do better through the recruitment process than male staff.
- Of staff leaving the Trust 32% were male which represents a 2% decrease on last year but remains above what would be expected based on representation. Further analysis indicates similar trends as those seen in previous years, with more female staff leaving following retirement or voluntary resignation whereas more men leave following the end of fixed term contracts.
- An over representation of male staff (32%) are involved in disciplinary processes. This is particularly evident when investigation results in an informal outcome. Although numbers are very small 86% of the grievance cases are brought by women.
- This year has seen a 17% increase in female staff undertaking Leadership courses. Based on workforce percentages less male staff are accessing training than would be expected.

3.3 Ethnicity

- White-British make up 66% of the workforce with the overall BME being 29%. Analysis of the BME profile shows 66% are Asian; 15% Black; 5% Mixed; 7% Other and 7% White-other. Within staff groups BME representation highest within Medical and Dental Staff (50%) lowest within AHP's 20%.
- The overall trend, as in previous years, demonstrates in Bands 1-9 an overall trend of decreasing BME representation as a proportion as the pay band

increases. Under representation is not evident however within our medical staff with 37% of Consultants being BME and 58% of our 'other medical' staff being BME.

- This year our recruitment trends, more significantly than previously seen, demonstrate that BME staff, in all profiles, do worse through the recruitment process than White British staff. Initial exploration indicates that this may be due to changes in how data is being collated but a detailed investigation of processes is required.
- Of staff leaving the Trust 37% are BME staff indicating an over representation in terms of workforce proportion. Further analysis demonstrates differences between BME and White-British in terms of reasons for leaving for example 46% BME compared with 18% White British left due to the end of fixed term contracts (which include training posts). Of those leaving due to retirement 4% BME compared with 20% White British.
- The overall disciplinary outcomes are broadly in line with workforce representation with 60% involving White staff and 31% BME. The overall BME percentage has reduced this year but this does however coincide with an increase in unknown status. A higher percentage of BME staff outcomes are likely to result in a formal rather than informal outcome but remains within the overall workforce representations. Of the 7 grievance cases 4 were white and 3 BME.
- The training data demonstrates less BME staff are attending leadership / short courses but more BME staff are undertaking QFC's and enrolling on Apprenticeships than would be expected from overall workforce representation.

3.4 Age

- There are only small percentage changes from last year in the age profile of the workforce with the majority of the workforce aged between 30-50yrs. Within staff groups there are variations,73% our Estates and Ancillary staff are aged 41 years or above (50% being over 50) in contrast to this 63% of our AHP and 60% of our medical and dental staff are under 40 yrs.
- Variation is also seen across pay bands for example within other medical 84% are <=40years conversely at Band 9 80% are =>41years. The increase in older staff in senior positions is to be expected as often goes hand in hand with experience.
- Recruitment is seen in all age groups but with percentage decreases in applications as age increases. The data trends indicate that there is only a small percentage variation between shortlisting and appointment in all groups.
- There is minimal change this year in the age patterns staff leaving the Trust, with data suggesting that some of the leaving patterns are age specific.

- Within the disciplinary process the age ranges which include 41-60yrs are over represented when there is an informal/ informal outcome in comparison with overall workforce representation. The age range of staff who brought grievance cases this was 35-56yrs, however numbers are too small to analyse further with any meaning.
- Age data within currently reported training is unavailable in some areas. Where
 it is available there is no evidence of discrimination based on age.

3.5 Sexual Orientation

- Within our workforce 171 staff members identify as LGB which is an increase of 23 on last year.
- There continues to be staff identifying as LBT represented within all of our staff groups. Proportionally to staff group the highest percentage is seen in Estates and Ancillary (2.07%) and lowest in Medical (0.69%).
- Under representation at senior level remains apparent with no representation at band 9.
- Evidence of increasing representation is seen in band 1-4 and local. As noted at previous years there is no evidence of discrimination throughout the recruitment process.
- There has been a slight percentage increase of staff identifying as LGB leaving the Trust but it remains consistent with workforce representation.

3.6 Religion and Belief

- There continues to be a range of religion or beliefs seen across the workforce and within each staff group, with Christianity remaining the most recorded religion.
- Those that are Atheists and Christians or fall within 'other' fair better through the recruitment process than other recorded religions.
- Of staff leaving the Trust those of an Islamic or Hindu religion are significantly over represented as proportionally of the total workforce, data suggests this is due to the end of fixed term contacts as part of a training rotation. This is likely to be a reflection of our medical staff in training.
- The combination of the number of religion and beliefs practiced, percentage of unknown recorded and the reduced numbers of disciplinary and grievance cases this year makes it more difficult to extrapolate trends with any meaning.

4.0 Data Headlines

- This year has seen significant differences in trends through the recruitment process for White British and BME applicants with the later fairing significantly worse. Initial exploration indicates that this may be due to changes in how data is being collated but a detailed investigation of processes is required.
- As a workforce trend female staff continue to do better through the recruitment process than male staff. An exception to this is within Consultants. There has been a 14% increase in Consultants on the previous year but due to the gender distribution the overall Female consultant representation has now decreased.
- Year on year we continue to see the challenge of representation at senior level in all protected groups.
- There is little change in the profile of staff leaving the Trust. We see an overrepresentation of staff that are male, BME, of an Islamic or Hindu religion and those aged last than 30 years, for all of these groups the majority are leaving due to 'End of fixed term contract' which includes training schemes and rotational posts.
- The number of disciplinary and grievance cases investigated this year has significantly reduced. Consistent with last year there is increased representation amongst male staff, and those from older age, whilst BME staff have fallen to be consistent with workforce representation.
- Our reporting of training data although improving does not include any training completed on-line or that which is completed outside of the Trust e.g.
 DeMontford University. This reduces the certainty of the conclusions we can draw from it.
- From the data we do have we can see that there is an under representation of BME staff accessing leadership/management courses or short taught day courses provided internally. There has been however a significant increase in female staff attending Leadership courses.

5.0 National Staff survey

A broad selection of questions from the 2014 staff survey were analysed to identify any differences with the groups of Ethnicity, Disability, Sexual Orientation and Sex. These included appraisal, feelings about work, job satisfaction, patient care and health and wellbeing.

The findings suggest:

Staff from a Black, Minority and Ethnic (BME) background are generally more positive that staff from a white background. The exception to this was a significant difference around BME staffs perception in regard to career progression and promotion.

- Staff with a disability are less positive than non-disabled in all areas analysed. The most significant differences were seen in the increased percentage of disabled staff coming to work despite not feeling well enough to perform their duties and those feeling unwell due to work related stress.
- Staff that identify themselves as Lesbian, Gay and Bi-sexual (LGB) are generally less positive than those who identify as heterosexual. A notable difference was that despite there being minimal difference in staff personally experiencing harassment, bullying or abuse at work from managers / team leaders or other colleagues it is significantly less likely to be reported by staff identifying as LGB. A similar finding was also noted between sexes with a significant increased percentage of male not reporting in comparison with female staff.
- It was noted that double the percentage of staff identifying as BME, disabled or LGB have personally experienced discrimination at work from a manager / team leader or other colleagues.
- Only 55% of staff with a disability felt their employer made adequate adjustments to enable them to carry their work. Within the other staff groups lower percentages of BME, LGB and male staff reported that adequate adjustments had been made.

6.0 Conclusion

The total head count of staff has increased by 7% but with minimal changes in the equality profile across the organisation. We have continued to see a slow improvement in declarations from staff monitoring data but it is hoped this will be accelerated following the recent ESR update.

As with previous years we see slightly different interesting anomalies between groups in different areas, however there are also key areas we are seeing year on year. This includes the challenge of representation at senior level, differences between groups in outcomes during the recruitment process and the uptake and recording of training. It is suggested that these are prioritised as the focus of additional work next year.

The true pattern of causes underlying differences between groups is often rich and complex, detailed investigation and interrogation of available data and engaging with staff both within focus groups and larger surveys will help us to understand how improvements can be made.

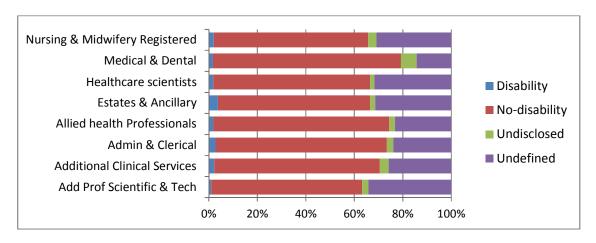
Section 1 - Disability

The Family Resources Survey for 2012/13 reports that 16% (6.1 million) of adults of working age are Disabled but that half of these are unemployed. This would suggest that around 8% of the working population have a disability. The negative employment gap between Disabled people and non-disabled people of around 30% has been static for many years.

1.1 Disability profile of staff in post at UHL

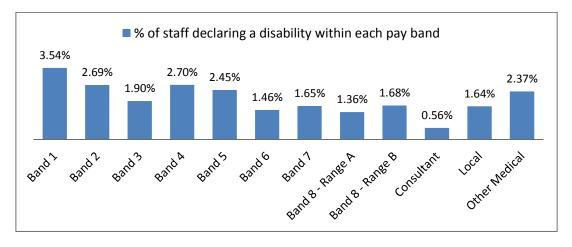
Within the total workforce 2.1% (268) of staff have declared a disability this represents a 0.4% increase on the previous reporting year. We continue to see an improved declaration rate within this characteristic with 70% of staffs' disability status known.

1.1.1 Disabled staff by staff group.



The data demonstrates that there is staff declaring a disability within each staff group. All staff groups; with the exception of Additional Prof Scientific and Technical; have seen an increase in the number of staff declaring a disability this year. The highest representation is seen in Estates and Ancillary (3.72%) and the lowest in Additional Prof Scientific and Technical (0.97%), however the varying percentages in each staff group of unknown status reduces our ability to draw firm conclusions.

1.2 Disability and Pay



This year's data demonstrates:

- An increase in representation in bands 1-4; bands 5-7, Consultant and other medical.
- A decrease in Bands 8A-8B and Local
- There remains no representation in Band 8C-9

1.3 Disability Profile at Recruitment

Of all staff appointed 3.27% (45 staff members) declared a disability.

The trend in recruitment of staff declaring a disability demonstrated that:

- They do better from application to shortlist.
- They fair worse from shortlist to appointment. This trend is similar to that seen in last year's data.

1.4 Disability of Staff Leaving

The data shows that of staff that left the Trust 2.7% (50 staff members) defined themselves as having a disability. This represents an increase on the previous year of 0.8%. 60% of staff declaring a disability left due to a Voluntary resignation which compares with 53% of non-disabled staff.

1.5 Disciplinary and Grievance Cases

1.5.1 Disciplinary data by Disability

A total number of 103 disciplinary investigations were carried out only 2 of which involved staff declaring a disability. The disability status of 46% of cases is unknown therefore no inferences can be drawn from this data.

1.5.2 Grievance data by Disability

A total of 7 cases were investigated this year therefore numbers are too small to analyse further with any meaning.

1.6 Disability and Access to Training

Courses	Disability								
	Yes	Yes		No		own			
Leadership	5	1.2%	395	96%	11	2.7%			
EMLA & UHL									
Short Courses	24	3%	695	86%	85	11%			
QCF's	1	2.4%	38	90%	3	7%			
Apprentices	1	1.7%	59	98.3%	0	-			

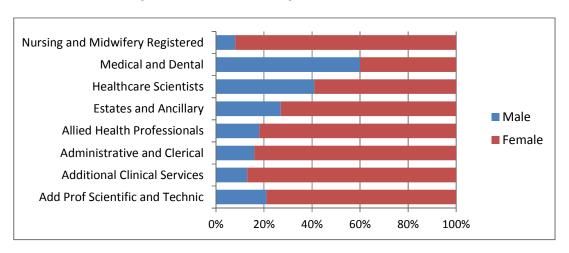
1.47% of in bands 6-9 have declared a disability suggesting that they are underrepresented the uptake of leadership courses.

Section 2 - Sex

2.1 Sex profile of staff in post.

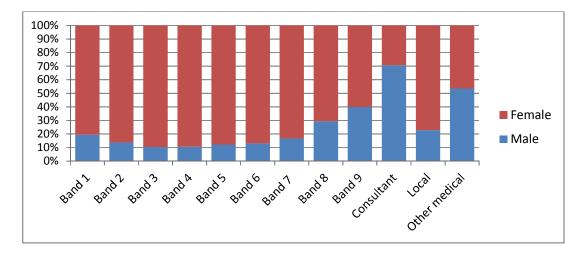
There has been 1% change in the male-female ratio of staff (21% -79% respectively) in the workforce in comparison to last year.

2.1.1 Sex as a Proportion of Staff Group



All staff groups % of male-female staff have seen minimal percentage change when compared to last year's data. The exception of Prof scientific and Technical which has again this year seen a 2.6% increase in female staff. Medical and dental and healthcare scientists demonstrate the most equally representative of staff groups.

2.2 Sex Profile and Pay

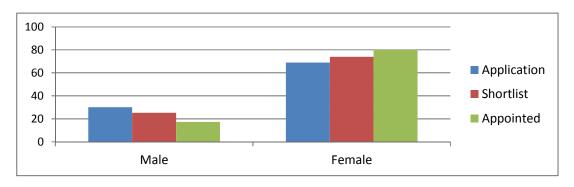


As in previous years the data demonstrates an overall trend of increasing male representation as a proportion as the pay band increases.

When compared to last year's percentage data there is:

- A further increase of 1% in male representation in bands 1-4
- No change in representation in Bands 5-9 or other medical
- A decrease in female consultants of 0.76%.
- An increase of 2.2% of female staff in Local.

2.3 Sex Profile at Recruitment



The trend in the data demonstrates that female staff do better through the recruitment process than male staff.

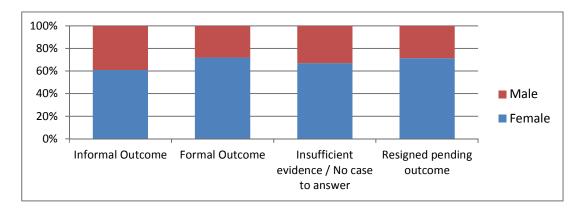
2.4 Sex of Staff Leaving

The data shows that of staff that left the Trust 68% was female and 32% was male. Although this represents a 2% decrease in male staff leaving the Trust it remains above what would be expected based on representation. Further analysis of reasons indicates similar trends as those seen in previous years, with more female staff leaving following retirement or voluntary resignation whereas more men leave following the end of fixed term contracts.

2.5 Sex Profile and Disciplinary and Grievance

2.5.1 Disciplinary data by sex.

Of the 103 disciplinary processes complete 68% involved female staff and 32% involved male staff. This indicates that, based on representation, more male staff that expected are involved in a disciplinary process. On further breakdown of the data this is particularly evident when investigation results in an informal outcome or when it is found that there is insufficient evidence /no case to answer although numbers in the later are small.



2.5.2 Grievance Outcome Data by sex

86% of the grievance cases are brought by women, however as the total number of cases was only 7 and therefore numbers are too small to analyse further with any meaning.

2.6 Sex Profile and Access to Training

Courses	Sex					
	Male		Female		Unknown	
Leadership	65	16%	336	82%	10	2%
EMLA & UHL						
Short Courses	104	13%	695	86%	5	0.6%
QCF's	6	14%	36	86%	0	-
Apprentices	7	12%	53	88%	0	-

There is a significant difference this year in the number of Leadership courses completed with a 17% increase in uptake amongst female staff.

Less male staff have undertaken training in all recorded areas than would be expected from workforce representation.

Section 3 – Race

3.1 Race profile of staff in post.

Within this year's report we have realigned our categories that make up our BME profile also separating out our unknown profile which had previously been included in 'other'. Due to this we are unable to make direct comparisons with last year's data however it will provide more detailed data moving forward.

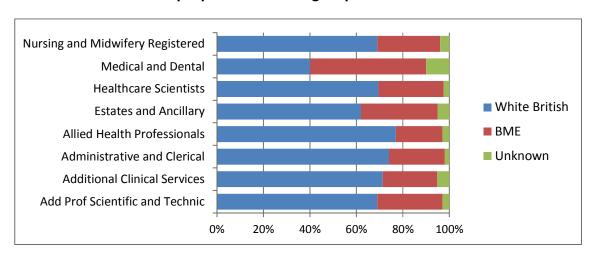
The comparison of our workforce population with the latest census data for our region suggests that we have a higher BME representation than that of the population we serve.

	UHL Workforce	Census 2011 LLR*
	profile	profile
White	66%	78%
BME	29%	21%
Unknown	5%	1%

^{*} Leicester, Leicestershire and Rutland

Analysis of our workforce BME profile shows 66% are Asian; 15% Black; 5% Mixed; 7% Other and 7% White-other.

3.1.1 Race Profile as a proportion of staff group.

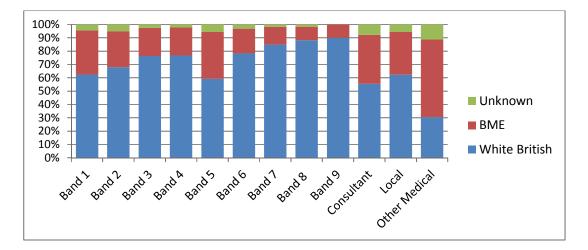


The data indicates that within most staff groups the majority of staff are White British (range 62-77%). The exception to this is seen in Medical and Dental where 50% are BME and 40% are white British.

Further analysis of the data within each of the BME profiles indicates that:

- there is representation in all staff groups with the exception of 'Other' in Allied Health Professionals and White-other in Add Prof Scientific and Tech.
- within the Asian profile the greatest representation is in Medical and Dental and Estates and Ancillary
- within the Black profile the greatest representation is in Nursing and midwifery.
- within the mixed, other and white- other profiles the greatest representation is seen in Medical and Dental

3.2 Race and Pay

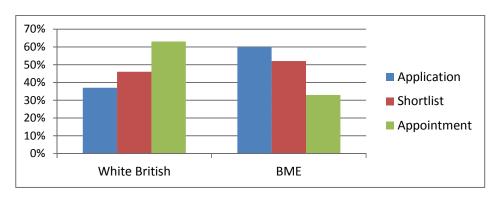


The data indicates that there is BME representation in all pay bands but with an overall trend of the majority of staff being White British, with increasing proportions as pay band increases.

We see a different profile within our medical staff with 37% of Consultants being BME and 58% of our other medical staff being BME.

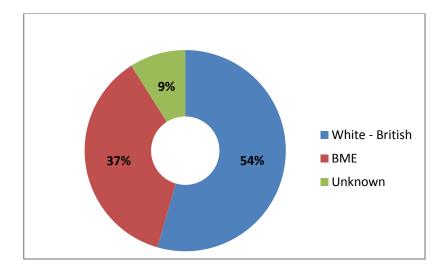
3.3 Race Profile at Recruitment

White British compared with total BME



The data clearly demonstrates that BME staff do worse through the recruitment process than White British staff. On further analysis of the data this trend is reflected in all BME profiles. This year the difference is more significant than previously seen initial exploration indicates that this may be due to changes in how data is being collated but requires a detailed investigation of processes to begin to understand why we may be seeing these trends.

3.4 Race of Staff Leaving the Trust



The data demonstrates that BME staff are over represented and White British staff under-represented in terms of workforce proportion. The increase in representation is seen in all of the BME profiles.

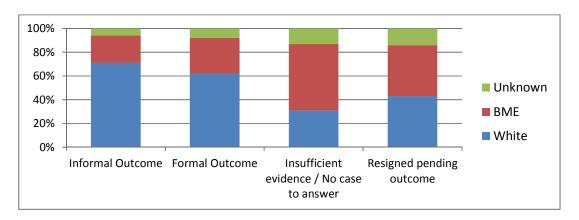
Further analysis of the data does indicate some differences in the reasons for leaving.

- Of those leaving due to end of fixed term contracts (which include training posts) 46% BME compared with 18% White British.
- Of those leaving due to retirement 4% BME compared with 20% White British.
- Of those leaving due to voluntary resignation 47% BME compared with 55% White British.

3.5 Disciplinary and Grievance by Race

3.5.1 Disciplinary Outcome Data

Of the 103 disciplinary processes complete 60% involved white staff and 31% BME staff the remaining cases race is unknown. This suggests overall disciplinary outcomes are broadly in line with workforce representation. The overall BME percentage has reduced this year but this coincides with an increase in unknown status.



A higher percentage of BME staff outcomes are likely to result in a formal rather than informal outcome but remains within the overall workforce representations.

The percentages where there was insufficient evidence /no case to answer from a BME background remains proportionately high, however this is based on very small numbers.

3.5.2 Grievance cases by race

Of the 7 grievance cases 4 were white and 3 BME however numbers are too small to analyse further with any meaning.

3.5.3 Ethnicity and Access to Training

Courses	Ethnic	Ethnicity								
	White	White		BME		vn				
Leadership (EMLA)	286	70%	71	17%	54	13%				
Short Courses	549	68%	160	20%	95	12%				
QCF	24	57%	16	38%	2	5%				
Apprentices	40	67%	20	33%	0	-				

As proportionally representative of the workforce the data indicates that:

- less BME staff are attending leadership or short courses.
- more BME staff are undertaking QFC's and enrolling on Apprenticeships.

Section 4 – Age

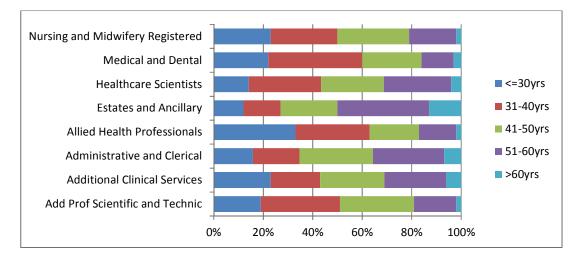
4.1 Age Profile of Staff in Post.

A normal distribution curve continues to be evident in the age profile of the workforce, with only small percentage changes from last year.

These includes a:

- 1.4% increase in staff <=30 years of age
- 2% decrease in staff aged 31-60 years
- 0.6% increase in staff > 60yrs

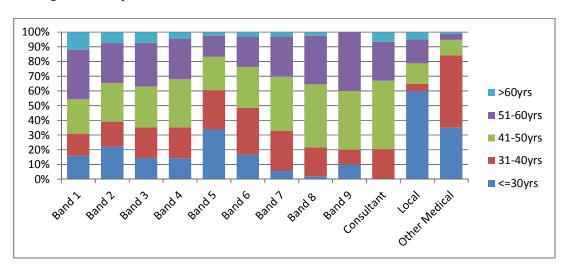
4.1.1 Age Profile of Staff Groups.



The data highlights that:

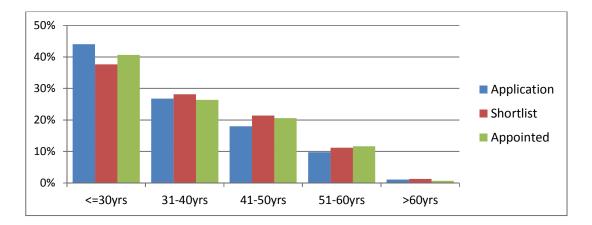
- 50% of staff within Estates and Ancillary is over 50 years old.
- 63% of Allied health professionals and 60% of Medical & Dental staff are less than 40 years old.

4.2 Age and Pay



The data demonstrates a variety of age range across pay groups with the expected increase in older staff in senior positions. This year's data however does demonstrate an increase of younger staff in Band 9. Within other medical 84% are <=40years conversely at Band 9 80% are =>41years.

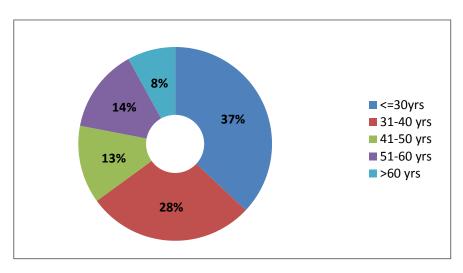
4.3 Age Profile at Recruitment



The data indicates that we continue to recruit across all age groups but with percentage decreases in applications submitted as age increases.

The data trends indicate that those aged 51-60yrs are most successful through the application process. In all age groups however there is only a small percentage variation between shortlisting and appointment.

4.4 Age of staff leaving



There has been minimal change in the percentage per age group of staff leaving the Trust.

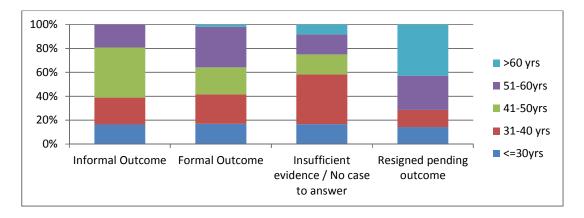
Some of the leaving patterns are age specific for example:

- 44% of those aged <=40 years leave due to end of a fixed term contracts (which include training posts) compared with 6% of those aged >40yrs.
- 36% of those aged =>50yrs leave due to retirement with no-one <50yrs retiring.</p>

4.5 Disciplinary and Grievance

4.5.1 Disciplinary data by Age group.

Disciplinary category outcomes by age.



The data demonstrates that:

- 41-50yrs over represented when there is an informal outcome
- 51-60yrs over represented when there is an formal outcome
- 31-40yrs over represented when insufficient evidence / no case to answer but numbers in these categories are very small.

4.5.2 Grievance data by age group.

The age range of staff that brought grievance cases this year was 35-56yrs, however as the total number of cases was only 7 numbers are too small to analyse further with any meaning.

4.6 Age and Access to Training

Training	Age g	roups								
	<29yrs	3	30-39	yrs	40-49yrs		50-59yrs		>60yrs	
QCF	13	31%	8	19%	16	38%	5	12%	0	-
learners										
Apprentices	44	73%	8	13%	4	7%	4	7%	0	
Leadership (EMLA)		Age data recorded differently data demonstrated: <20yrs = 5; 21-44yrs =68; 44-64yrs=111 >65yrs =1 unknown 55								
Leadership	*Age is	s not re	cordec	d						
(UHL)										
Short	*Age is	s not re	cordec	t E						
Courses										

Some areas of training do not currently record age. Apprenticeships are predominantly but not exclusively undertaken by those <29yrs.

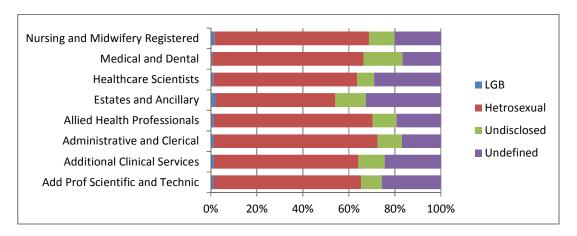
<u>Section 5 – Sexual Orientation</u>

In a 2010 national integrated household survey conducted by the Office of National Statistics, 94% of those questioned identified themselves as heterosexual, 1% identified as Gay or Lesbian, 0.5% as Bisexual and the remaining 0.5% as other. This would suggest that individuals who identify nationally as LGB is 1.5%.

5.1 Sexual Orientation Profile of Staff in Post.

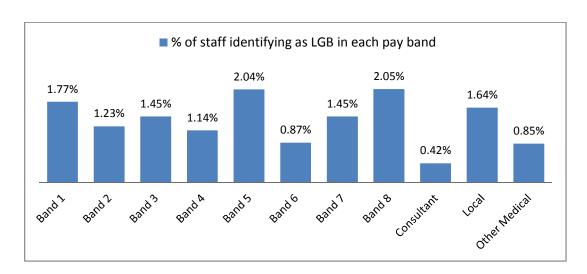
Within the total workforce 1.4% (171) of staff identify as LGB this is consistent with the previous reporting year. We continue to see an improved declaration rate within this characteristic with 67.4% of staffs' sexual orientation status known.

5.1.1 LGB profile in staff groups.



The data demonstrates that there is staff identifying as LGBT within each staff group. The highest percentage is within Estates and Ancillary staff group (2.07%) and the lowest within Medical and dental (0.69%).

5.2 Sexual Orientation and Pay



Consistent with last year's data there are staff identifying as LGB in all pay bands with the exception of Band 8C and 9.

The largest changes are evident in Bands 1-4 where there has been a 1.42% increase and in local with an increase of 1.32%.

5.3 Sexual Orientation Profile at Recruitment

Of all staff appointed 2.76% (38 staff members) identify as LGB. The trends continue to indicate that for those that have declared their sexual orientation are equally successful through the recruitment process.

5.4 Sexual Orientation of staff leaving

There has been a slight percentage increase of staff identifying as LGB leaving the Trust 1.35% (25 staff members) but as with previous year's data it remains consistent with overall workforce representation.

5.5 Disciplinary and Grievance

5.5.1 Disciplinary Data by Sexual Orientation.

A total number of 103 disciplinary investigations were carried out, only 2 of which involved staff who identified as LGB. The sexual orientation status of 39% of cases is unknown therefore no inferences can be drawn from this data.

5.5.2 Grievances

A total of 7 cases were investigated this year therefore numbers are too small to analyse further with any meaning.

5.6 Sexual Orientation and Access to Training

Training	Sexual Orientation								
	LGB		Heterosexual		Unknown				
Leadership	4	1%	277	67%	130	32%			
(EMLA) & (UHL)									
Day Courses	6	0.7%	543	68%	254	32%			
QCF's	*not recorded								
Apprentices	1	1.7%	41	68%	18	30%			

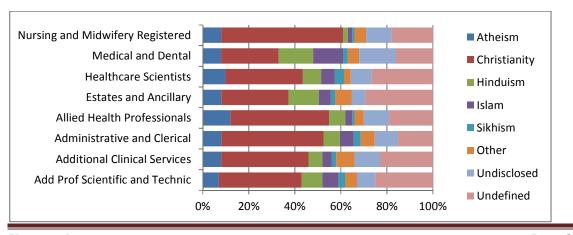
Section 6 - Religion or Belief

The Equality Act states it is unlawful to discriminate against workers because of their religion or belief or against a person for not holding a particular (or any) religious or philosophical belief.

6.1 Religion or Belief Profile of Staff in Post.

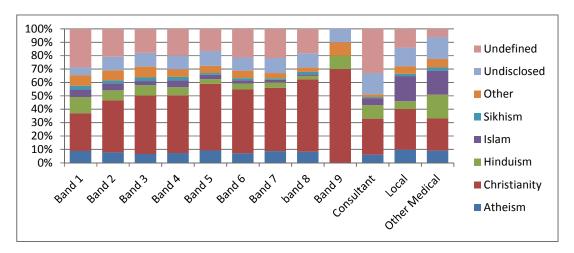
There is a broad range of beliefs amongst staff, with an increase in all defined groups this year. This corresponds with the data showing the percentage of individuals with undefined status continuing to reduce.

6.1.1 Religion or Belief profile of staff groups.



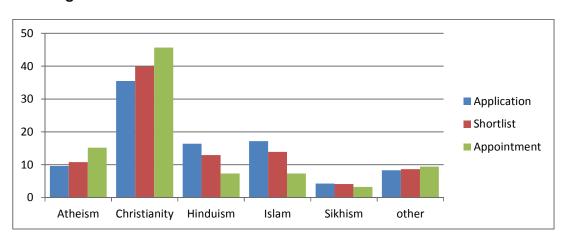
The data demonstrates that a range of religion or beliefs are seen within each staff group. Christianity remains the most recorded religion and is particularly dominant amongst nurses and midwives (53%) but less so amongst medical and dental staff (25%).

6.2 Religion or Belief and pay



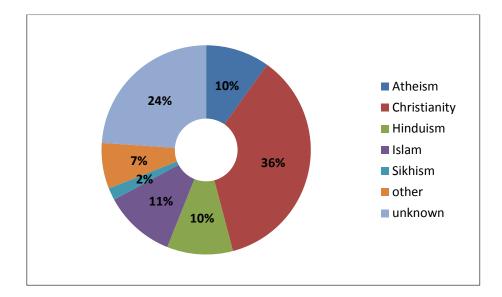
As with previous years data the general trend demonstrates that Christianity becomes more dominant as pay bands increase, especially in bands 8&9.

6.3 Religion or Belief Profile at Recruitment



Those that are Atheists and Christians or fall within 'other' fair better through the recruitment process that other recorded religions. The decreasing trend from shortlisting to appointment is particularly significant for staff who's religion is Islamic or Hindu

6.4 Religion or belief of staff leaving



The data indicates that for staff who's religion is Islamic or Hindu are significantly over represented as proportionally of the total workforce. Further analysis of the data suggests this is due to the number of staff leaving due to the end of fixed term contacts as part of a training rotation.

6.5 Disciplinary and Grievance

The larger number of categories when dealing with only 103 overall cases for disciplinary and 7 cases for grievance does make it more difficult to extrapolate trends. In addition to this the religion or belief of 42% are unknown. Therefore numbers are too small to analyse further with any meaning.

6.6 Religion or Belief and Access to Training

Religion or Belief	Training			
	Leadership		Day Courses	
	(ELMA) & (UHL)			
Atheism	21	5.1%	71	8.9%
Christianity	210	51%	336	42%
Hinduism	19	4.6%	34	4.3%
Islam	14	3.4%	14	1.8%
Sikhism	2	0.4%	11	1.4%
Other	10	2.4%	44	5.5%
Unknown	135	32.8%	290	36.2%

^{*}This data is not currently collected for apprentices or staff undertaking QFC's.

The data suggests that staff of a Christian religion are over represented in the uptake of Leadership courses, this however maybe a reflection of representation at senior level.

The following three sections are additions under the Equality act (2010) and minimal data is currently collected. A decision needs to be made as to what data we need to collect in the future.

<u>Section 7 – Marriage and Civil Partnership</u>

7.1 Marital status of staff in post.

	March 2015	March 2014
Civil Partnership	0.4%	0.4%
Divorced	5.1%	5.4%
Legally Separated	1.1%	1.2%
Married	56%	57%
Single	32.7%	31.3%
Widowed	0.7%	0.7%
Unknown	3.6%	4%

<u>Section 8 – Pregnancy & Maternity</u>

8.1 Maternity Leave of Staff in Post.

	Number of	Total of
	staff	days taken
Maternity leave	669	113,036
Paternity leave	66	914
Adoption leave (Female)	10	1848
Adoption leave (Male)	2	333

This year more staff took maternity and adoption leave with less staff taking paternity leave.

<u>Section 9 – Gender Reassignment.</u>

Data is recorded in this area but not reported due to low numbers with the possibility of breach of confidentiality.