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Introduction

Equality and Inclusion is at the heart of our continued commitment to becoming the best employer of choice and the very best environment for receiving healthcare. Underpinning this commitment are our values which drive our vision to Change Lives. Our commitment goes beyond statutory commitment as we seek to create and sustain a world-class health organisation.

This year’s report provides equality information on the monitoring of the Trust’s employment processes for the period 1 October 2012 to 30 September 2013:

The information provided in this report is for the following categories:

- Workforce profile by protected characteristics
- Staff in post by band
- Applicants for employment
- Starters
- Leavers
- Comparison of starter and leaver information
- Disciplinaries
- Grievances
- Appraisals (pilot exercise)

Two years on since the merger, there have been further organisational changes notwithstanding; considerable progress has been made with data cleansing and effective records management. The gaps that have been identified include the capturing of data on:

- Return to work of women on maternity leave
- Return to work of disabled employees following sick leave relating to disability
- Promotions

In the coming months, our efforts will be focused on addressing these gaps as it is recognised that information on these areas will further assist the Trust in meeting its Public Sector Equality Duty.

Recognising the challenges that an increasingly diverse catchment area presents to any given organisation, Barts Health is taking proactive steps to ensure that its employees are competent in managing diversity in service delivery and in its employment practices.

With continued support from colleagues in the Education Academy and our Clinical Academic Groups, we have been able to achieve an average of 87 percent equality and diversity compliance with all actively employed staff and an average of 82 percent equality and diversity compliance for all active bank staff as at 13 December 2013.

At Barts Health, the equality agenda is visibly championed by senior leadership with one of the Trust’s Non Executive Director’s actively supporting the staff diversity network and the Trust’s implementation of Equality Delivery System (EDS2). It is the aim of the Trust to see that its workforce is supported and are confident and competent in dealing with equality and managing diversity in all undertakings.

Further details on how we have advanced the equality agenda within the Trust for our employees in particular can be found in our equality Information 2013 report.
Our workforce profile

The Trust’s total headcount as at 30 September 2013 was 13,784. This was a four percent rise from last year’s count of 13,279 at the beginning of October 2012, with nursing and midwifery continuing to be the largest single staff group within the Trust.

Workforce by staff group

Age profile

Monitoring of information by age presents a diverse workforce comprising of a variety of age groups seeing over four percent aged under 25 and over one percent aged 65 and over.
Disability profile
Valuing every member of staff and their contribution to the care of our patients is at the core of our vision and values. The results from our recent staff survey have highlighted the need to improve the working lives of our staff that have a disability. The percentage of employees who have declared disability status is 72 percent; this is an increase on the 60 percent that was reported earlier in the year.

Following an analysis of responses to the 2012 National staff survey, there was a higher number of employees who had declared disability status compared to numbers showing on ESR records.

In order to give staff with a disability a voice, the Trust has set up a disability sub-group of our staff diversity network. Also, as part of efforts to improve ‘disclosure’ and ‘declaration’ of disability at work, the Trust took part in a national research programme called ‘secrets and big news’, a project designed to explore the barriers and opportunities faced by employees to sharing personal information about disability, illness, injury or accident with their employer. Results from this research programme are due to be published early 2014 and it is envisaged that this report will provide the Trust with further practical advice on how we can ask for the information in a positive way.

Ethnicity profile
Barts Health prides itself in having a diverse workforce that is reflective of the community it serves.

Overall, 52 percent of those staff choosing to disclose their ethnicity stated that they were from an Asian, Black, Mixed and Other ethnic group. 42 percent disclosed themselves as being White/White other for which there is no percentage change compared to 2011/12. Current results indicate that 95 percent of the workforce disclosed their ethnicity, a similar rate to the previous year. The ratio of ethnic groups for doctors pay grades is more reflective of the overall Trust ethnic representation.
**Gender profile**

The gender split of the workforce has remained the same since last reported, it comprises of 75 percent females and 25 percent males. Doctors and employees in AfC band 9 however indicate a more equal gender split.

**Religion and belief profile**

The apportionment of religion across all pay bands and other grades is generally regular. A similar representation was identified following the analysis of the 2012 NHS Staff Survey responses by protected characteristics.

**Sexual orientation profile**

The current work programme of the Trust's Workforce Resourcing Assurance Group (WRAGII) includes a focus on achieving an increase in disclosure of sexual orientation as the total 'undefined' and 'I do not wish to disclose' accounts for 44% of the total ESR record. There is currently no functionality on ESR to capture Transgender status.
Staff in post by band

On the basis of workforce information available across the AfC bands, it is evident that the highest percentage of the workforce is in bands 5 and 6. In April 2014, the Trust will be rolling out an electronic performance appraisal system. This will facilitate an effective talent management process within the Trust.
Age profile by band

At Barts Health those under 30 make up 19 percent of the workforce, 30-55 year olds represent 70 percent and employees aged over 55 make up 11 percent. Age is generally well represented across Agenda for Change (AfC) bands, although almost 60 percent of AfC band 8ds are aged between 45-54.

![Trust Age by Band - September 2013](image)

The current analysis indicates that 54 percent of the Trust’s medical and dental staff (consultants) are aged 45 and over with 17 percent of the total medical and dental consultant headcount being in the 55-64 and 65 and over age groups. This information presents the need for the Trust to give due consideration to long term consultant recruitment planning.
Ethnicity profile by band

The proportion of Asian, Black, Mixed and other ethnic groups reduces as the highest pay bands are reached. These groups form 59 percent of bands 1-4, 52 percent of bands 5-7 and 25 percent of bands 8a and over. The emerging issue has been highlighted and will form part of the investigatory work on appointments into senior positions. This programme of work will be closely monitored by our Public Health and Equality Committee.
Gender profile by band

The information below indicates that there is a trend that suggests that as you move across AfC bands, there is a lower percentage of female employees in AfC bands 7 and upwards compared to percentage of male employees. This has informed the selection of a workforce equality objective that is actively championed by the director of human resources; and this is to improve our performance in regards to women in leadership.
Applicants for employment

The Trust monitors its recruitment to ensure fairness at all stages of the recruitment process. As part of this exercise, attention is being given to such protected characteristic groups that have faced disadvantage over the years, for example people with a disability.

A rapid review of both clinical and non-clinical recruitment for the period October 2012 to September 2013 shows that overall, four percent of applicants appointed declare having a disability, this is an increase from the 3.5 percent of applicants over the same period who had declared having a disability. This shows that a proportionate number of disabled people are appointed.
### Disability

<table>
<thead>
<tr>
<th>Recruitment Stage</th>
<th>Yes</th>
<th>No</th>
<th>Undisclosed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applications</td>
<td>3.5%</td>
<td>95.9%</td>
<td>0.6%</td>
</tr>
<tr>
<td>Shortlisted</td>
<td>3.9%</td>
<td>95.5%</td>
<td>0.6%</td>
</tr>
<tr>
<td>Appointed</td>
<td>4.0%</td>
<td>95.1%</td>
<td>0.9%</td>
</tr>
</tbody>
</table>

### Starters

This section presents workforce information for our starters, leavers by staff group and is followed by a comparison of both by overall numbers and particular protected characteristics as the analysis provides the Trust with an opportunity to monitor the implementation of its values based policies in order to successfully manage, support and retain our employees.

Medical and dental as well as nursing and midwifery, continue to have the largest number of starters during the reporting period of which 35% are male and 65% female. For Medical and Dental, this is because the figures include Junior Doctors on rotations that are recruited by the Trust as part of their training for a period ranging from six months to one year.

To ensure consistency of permanent nursing staff across our wards, towards the end of the reporting period, progress was made with recruitment, aiming at a 95% target for permanent staffing levels. This is part of on-going efforts towards closing gaps in staffing and ensuring our hospitals are staffed by permanent clinical teams.

### Leavers

For the same reason mentioned on the previous page, the majority of leavers have been Junior Doctors from Medical and Dental. New leadership and corporate structures were introduced in October 2012 and work has since focused on determining consistent standards across our sites to ensure the right levels of staffing. The results of consultation and change programmes have led to skill mix changes across all our sites.
An analysis of leavers by reason and gender shows that ‘voluntary resignation’ forms 51 percent of the reasons for leaving the organisation. As part of future reporting, the Trust will monitor the key reasons for ‘voluntary resignations’ as part of its exit interview procedures. Further analysis of the data shows that ‘end of fixed term contract’, ‘voluntary resignation’, ‘voluntary early retirement’ and ‘retirement’ accounts for 88 percent of total leavers for the period October 2012 to September 2013, with 31 percent of these being male. This is only slightly above the Trust’s gender baseline of 25 percent of total workforce. Also, pregnancy represents 0.03 percent of total leavers by reason for the same period. The Trust will continue to monitor leavers by reason in order to ensure there is no overall disproportional representation or any emerging issues that requires intervention.

**Comparison of starter and leaver information**

The initial comparison of starter and leaver information by age shows that the highest numbers of leavers are those aged 25 to 34.

A similar comparison of starter and leaver information by gender shows that female employees are more likely to leave compared to male employees over the given period. This is in line with the Trust’s gender profile (female 75 percent: male 25 percent).

The Trust will continue to monitor its policies to ensure family friendly practices are in place to successfully manage, support and retain our male and female employees.
Disciplinaries

The monitoring of our workforce information has shown that certain protected characteristic groups in our workforce are more likely to be involved in disciplinary procedures than other groups. The emerging issue has been highlighted and an action plan is being developed to ensure a continually fair disciplinary process at all times for all employees irrespective of their protected characteristic. This programme of work will be closely monitored by our Public Health and Equality Committee.

Disciplinaries by age

The monitoring of disciplinaries by age for the period October 2012 to September 2013 shows a representation that is in line with the Trust’s baseline population.
Disciplinaries by ethnicity

The monitoring of disciplinaries by ethnicity shows a representation that is not in line with the Trust's baseline figures.

Disciplinaries by gender

The monitoring of disciplinaries by gender however, shows a representation that is in line with the Trust's baseline figures. For the same period, it shows that 71% of the disciplinary action was taken on female employees against 29% male.
Grievances

Overall, 65 percent of the total numbers of grievances raised during the reporting period were made by female employees; this is below the Trust’s gender baseline of 75 percent female and 25 percent male. Also, a review by age shows that the highest proportion of grievances was raised by employees aged between 35 to 44 and 45 to 54 respectively. This spread is in line with the Trust’s baseline population.

<table>
<thead>
<tr>
<th>No. of Grievances</th>
<th>Under 25</th>
<th>25 - 34</th>
<th>35 - 44</th>
<th>45 - 54</th>
<th>55 - 64</th>
<th>65 and over</th>
<th>Grand Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>15</td>
<td>22</td>
<td>21</td>
<td>14</td>
<td>1</td>
<td>74</td>
</tr>
<tr>
<td>% Grievances</td>
<td>1</td>
<td>20</td>
<td>30</td>
<td>28</td>
<td>19</td>
<td>1</td>
<td>100</td>
</tr>
<tr>
<td>% Trust Headcount</td>
<td>4</td>
<td>30</td>
<td>30</td>
<td>24</td>
<td>11</td>
<td>1</td>
<td>100</td>
</tr>
</tbody>
</table>

Appraisals

A pilot exercise was conducted using paper based templates during the period of July to October 2013. Though the pilot composition was not necessarily representative of the Trust’s workforce population, approximately 700 participants took part in the pilot exercise with a split of the BRAG ratings shown as follows.

Following the launch of the electronic performance and talent review process (appraisal) in spring 2014, the Trust will be able to effectively monitor the process by protected characteristics.
**Recommended actions**

Following the analysis of our workforce information, a set of key actions for the coming year have been recommended with continuous monitoring provided via the Trust’s Public Health and Equality Committee.

<table>
<thead>
<tr>
<th>Theme</th>
<th>Key actions 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Recruitment planning</td>
<td>To develop a long term Consultant recruitment planning programme</td>
</tr>
<tr>
<td>2 Disability at work</td>
<td>To increase ‘disclosure’ and ‘declaration’ of disability at work</td>
</tr>
<tr>
<td>3 Women in leadership</td>
<td>To investigate appointments into senior positions to find out how the number of women in leadership positions can be improved in the organisation.</td>
</tr>
<tr>
<td>4 Talent Management</td>
<td>To provide support for those employees who are considering how they move onto the next stage of their career.</td>
</tr>
<tr>
<td>5 Exit interviews</td>
<td>To monitor the key reasons for ‘voluntary resignations’ as part of the Trust’s exit interview procedures</td>
</tr>
<tr>
<td>6 Ethnicity and Disciplinary procedures</td>
<td>To continually monitor and ensure fair disciplinary processes at all times for all employees irrespective of their protected characteristic.</td>
</tr>
</tbody>
</table>

**Conclusion**

This report provides the reader with the equality information for Barts Health NHS Trust workforce. This is in line with our statutory duty to publish our equality information. The Trust has gone beyond statutory requirements to also include details of emerging issues and has provided opportunities for both staff and service users to measure the progress made by the Trust in improving outcomes for individual employees with protected characteristics.

We welcome your comments on how the Trust is meeting its Public Sector Equality Duty. For any comments on this report, please contact the Inclusion team by email organisationaldevelopment@bartshealth.nhs.uk or by writing to:

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