

# Workforce Sub-Committee

12<sup>th</sup> February 2014

## Statutory Annual Workforce Diversity Monitoring Report 2013/14

**Status:** A paper for information

**History:** Annual report

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Development

## Statutory Annual Workforce Diversity Monitoring Report 2013/14

### 1.0 Introduction

- 1.1 The Equality Act (2010) and subsequent public sector equalities duties have placed a much greater emphasis on providing visible and transparent information to the public. The annual diversity monitoring report will be published on the Trust internet site to meet our duties.
- 1.2 All public bodies are required to publish workforce information by the 'protected characteristics' set out in equality legislation. This will cover staff-in-post, applicants for jobs, promotion and training, results of training, employment relations data and performance appraisal.

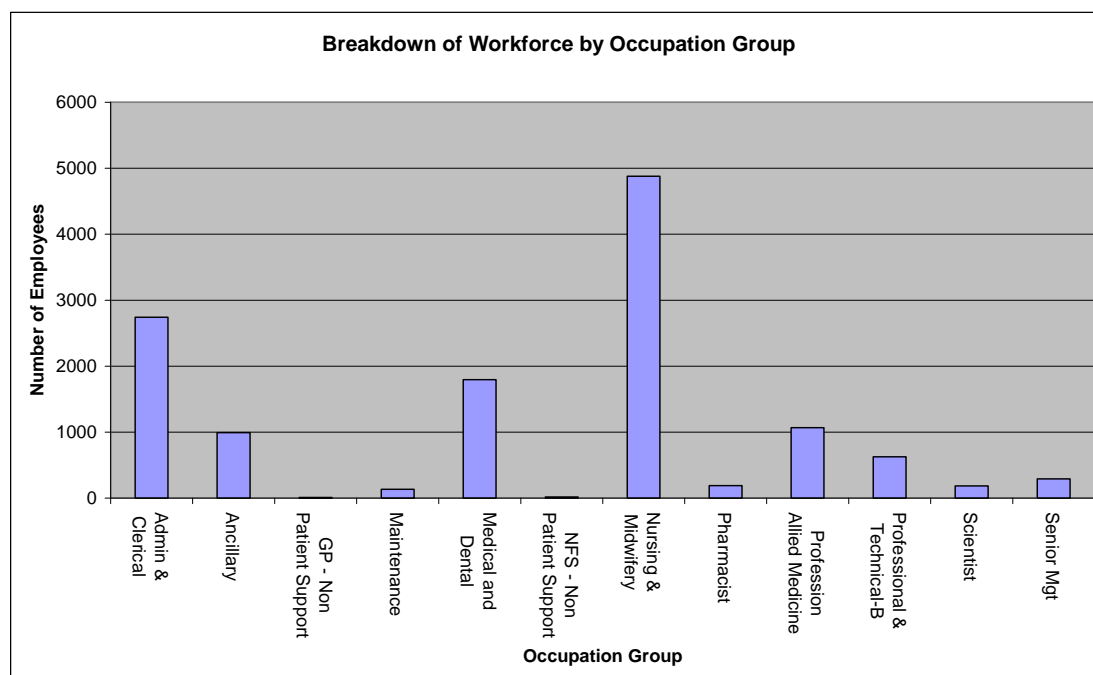
### 2.0 Purpose of this paper

- 2.1 The purpose of this paper is to set out the results of employment monitoring over the past 12 months.
- 2.2 The Trust has not undertaken a data cleansing exercise this year. This will have an effect on the validity of some of the information, and the relatively high level of 'unknown' data for ethnicity and disability.
- 2.3 Significant progress has been made in gathering reliable workforce diversity data over each year. However, it is recommended that when there is another data cleanse planned, communications outlining the importance and rationale for collecting diversity information are shared with staff to encourage responses.

### 3.0 Staff in post

- 3.1 The Trust had 12,918 employees on 30<sup>th</sup> November 2013. The distribution of the workforce across the occupation groups are shown in Figure 1. The profiles of the workforce by age, gender, ethnicity and disability are in Appendix 1.

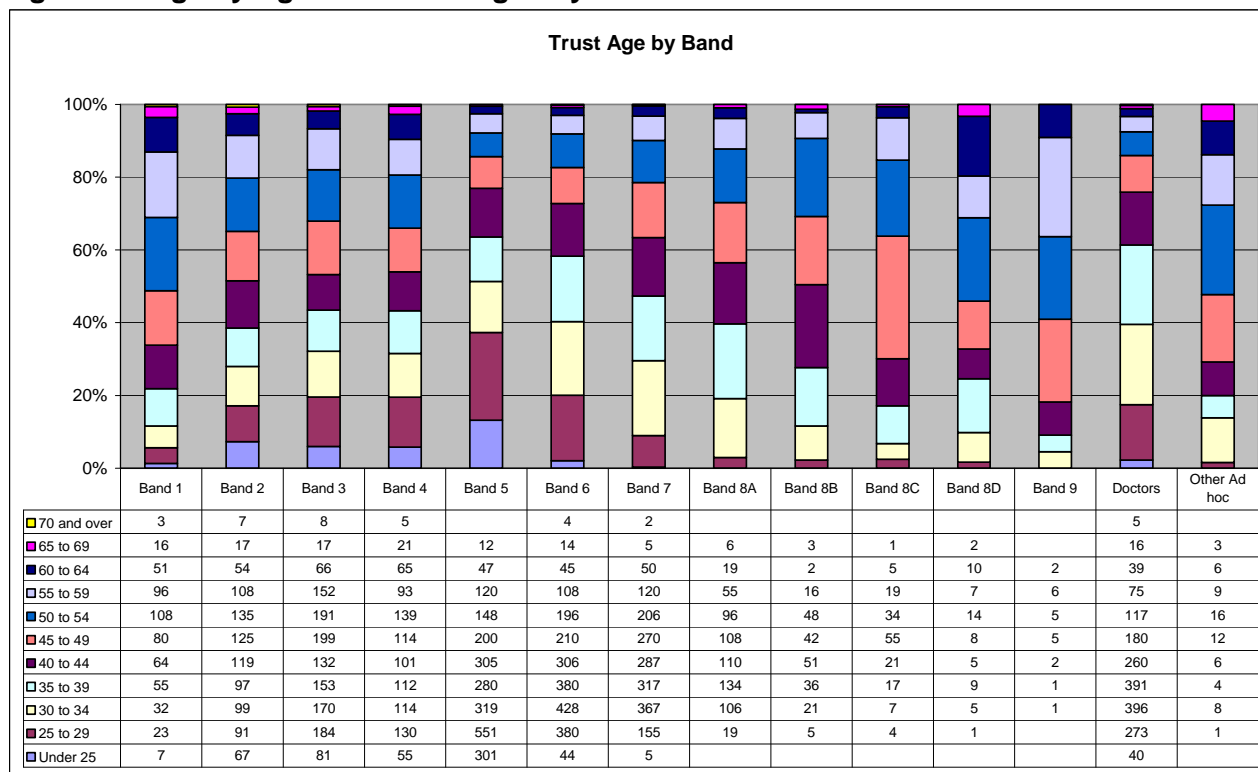
**Figure 1 - Workforce by occupational group**



#### 4.0 Age by pay band

4.1 Within the workforce, 19% are under 30 years old, 30-55 year olds represent 69% and 12% are aged over 55. There have been no significant changes from 2012/13. Age is generally well represented across AfC bands. Younger workers (under 25 years old) are mostly in band 2-5 posts, with the number of under 25 year olds in band 5 posts increasing from 2013/14, suggesting that initiatives to increase the recruitment of younger people into entry level posts and as part of the Widening Access Strategy are showing signs of success. In relation to age, it is a common trend across UK employers to have an ageing workforce. As a Trust, we are undergoing research into the changes needed to support this workforce in the future.

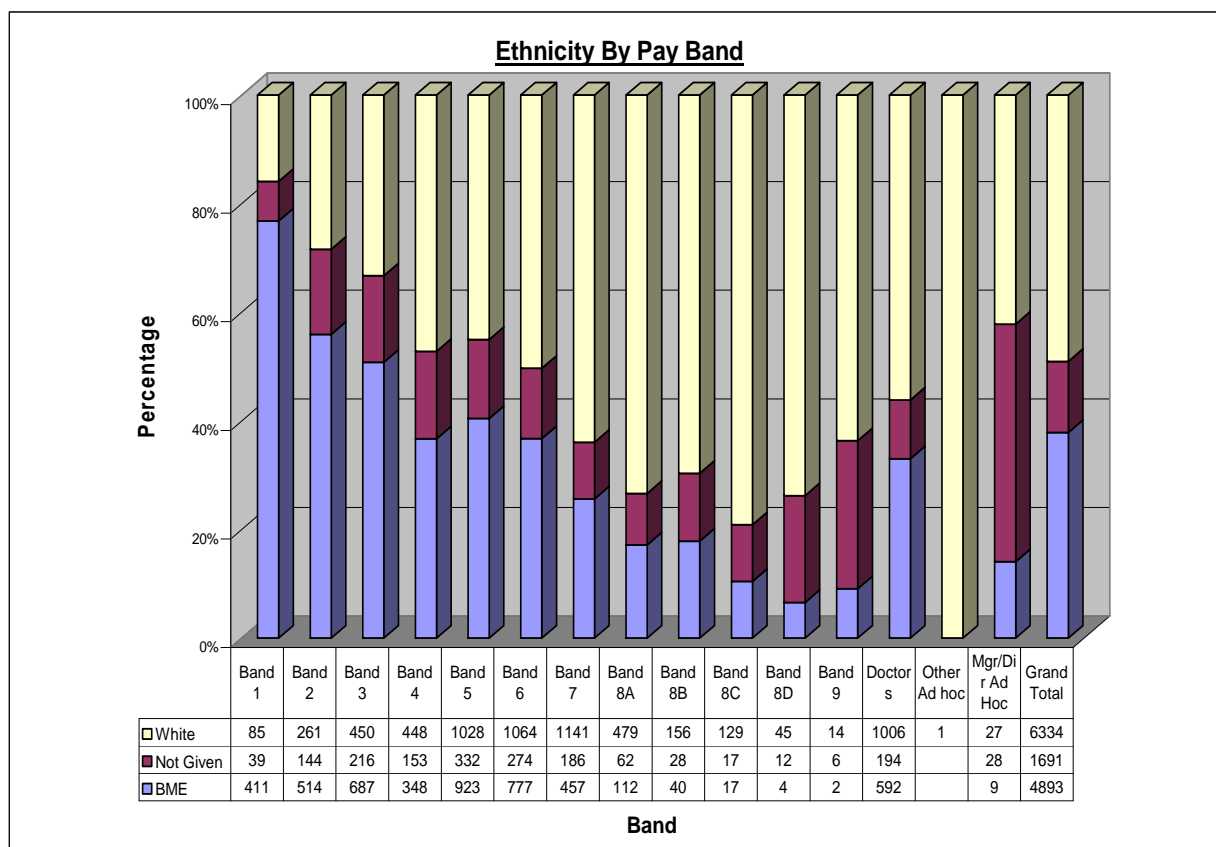
**Figure 2 – Age by Agenda for Change Pay Bands**



## 5.0 Ethnicity by pay band

- 5.1 86% of the workforce disclosed their ethnicity, a similar rate to the preceding three years. This is broken down into 37% of those staff stating that they were from a BME group and 49% disclosed as being white. The variation from figures in 2012/13 is no greater than 2%.
- 5.2 There is a general decline in the proportion of BME staff as band increases, with BME staff being highly represented in band 1-3 posts. The distribution of BME staff by band is 40% in bands 1-4, 44% in bands 5-7, 4% in bands 8A and above. These figures remain unchanged from 2012/13.
- 5.3 The ethnic composition of doctors reflects more closely the Trust's overall ethnic diversity, as 56% of doctors are white British, 33% are BME and 11% have not declared their ethnicity.
- 5.4 Please note that missing ethnicity data has a significant impact on the statistical margin of error.

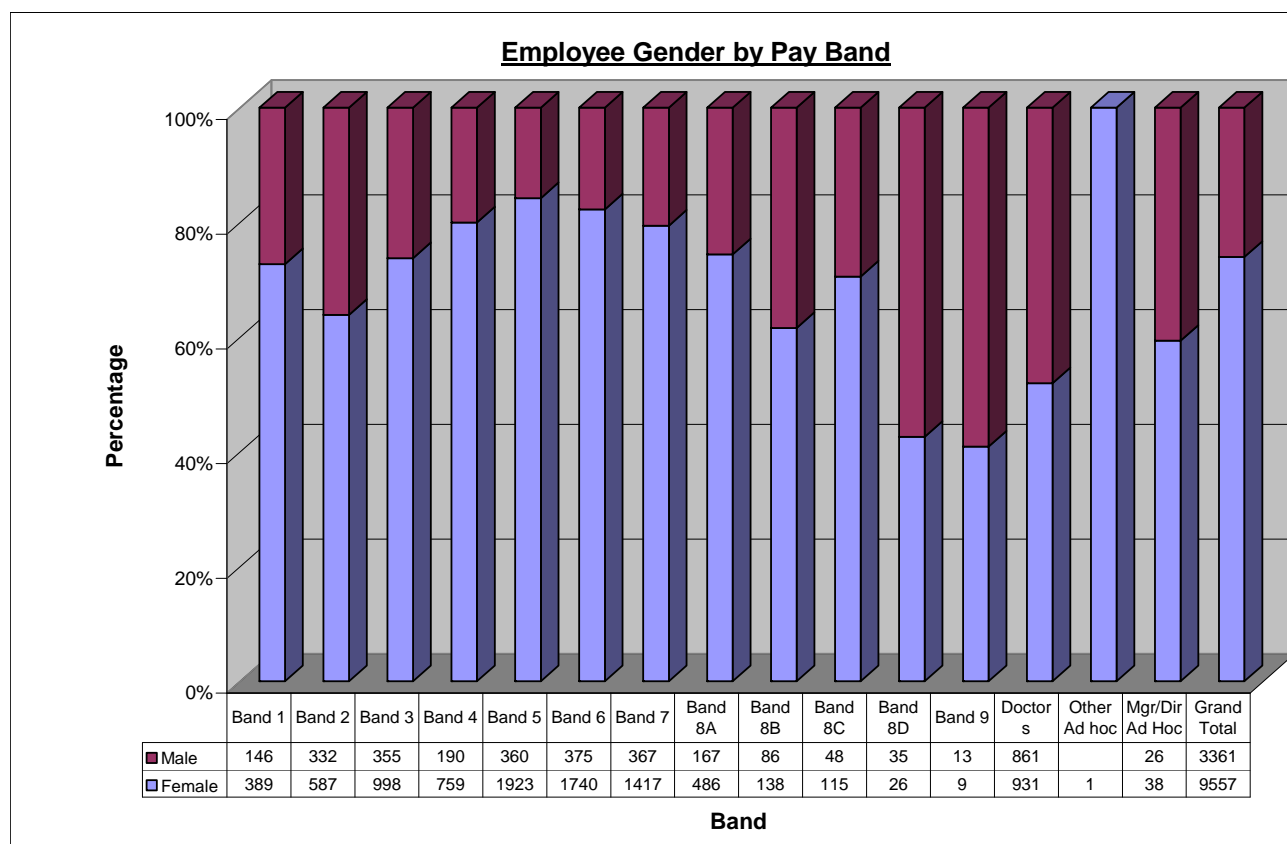
**Figure 3 - Ethnicity by Agenda for Change Pay Bands**



## 6.0 Gender by pay band

- 6.1 The workforce split remains at 74% female and 26% male, consistent with figures from the past 3 years.
- 6.2 There is some variation in gender distribution by band, with females comprising a higher than average proportion of the workforce within bands 3-7 and males forming a higher than average proportion of the workforce from band 8B upwards. This is particularly disproportionate at bands 8D and 9, where males dominate the workforce at 57% and 59% respectively.
- 6.3 Outside of AfC bands, 52% of doctors are female, with 48% being male, which is within a percentage point of last year's figures.

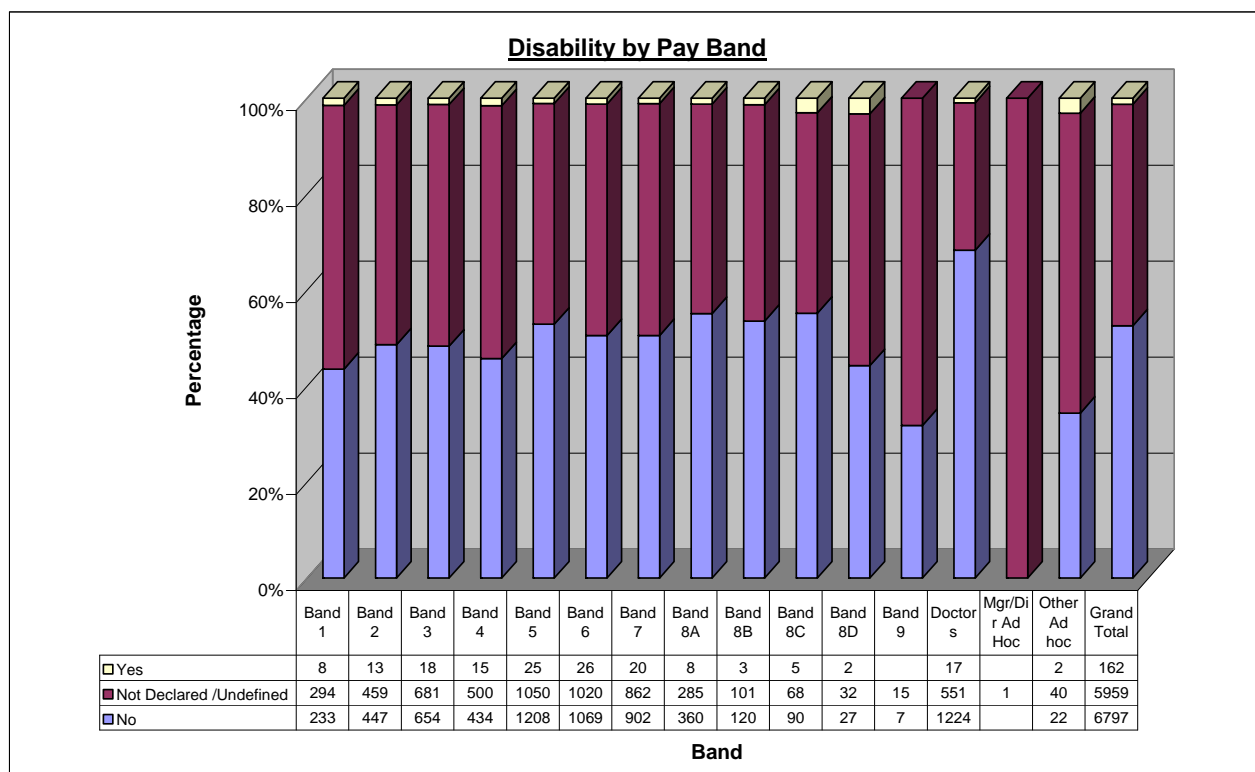
**Figure 4 - Gender by Agenda for Change Pay Bands**



## 7.0 Disability by pay band

- 7.1 The number of people prepared to declare whether or not they had a disability is 54% in 2013/14, which is a slight increase from 49% in the previous year. Of those who declared, 2.3% stated they had a disability (with 1.3% of the workforce overall stating they have a disability).
- 7.2 Rates of declaration are relatively consistent across AfC bands. The declaration rate for doctors is much higher, with only 31% choosing not to declare.

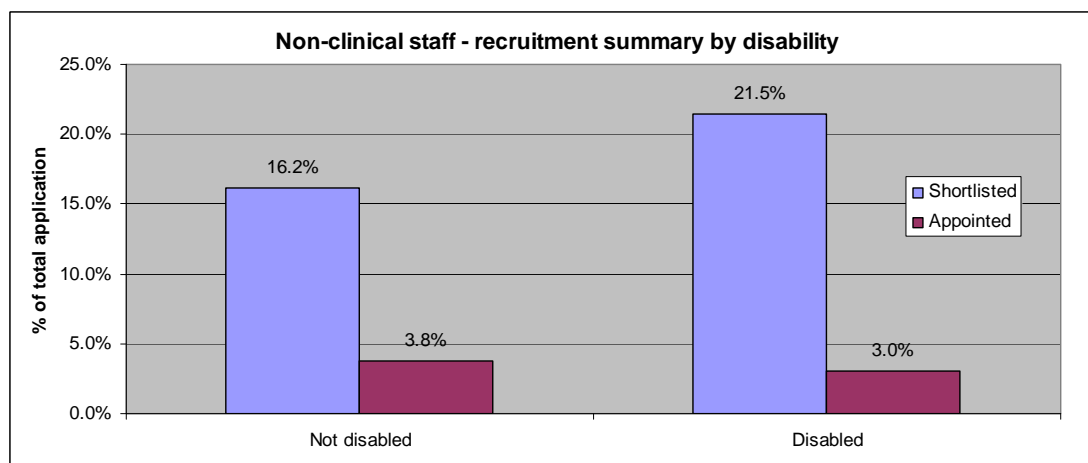
**Figure 5 - Disability Status by Agenda for Change Pay Bands**



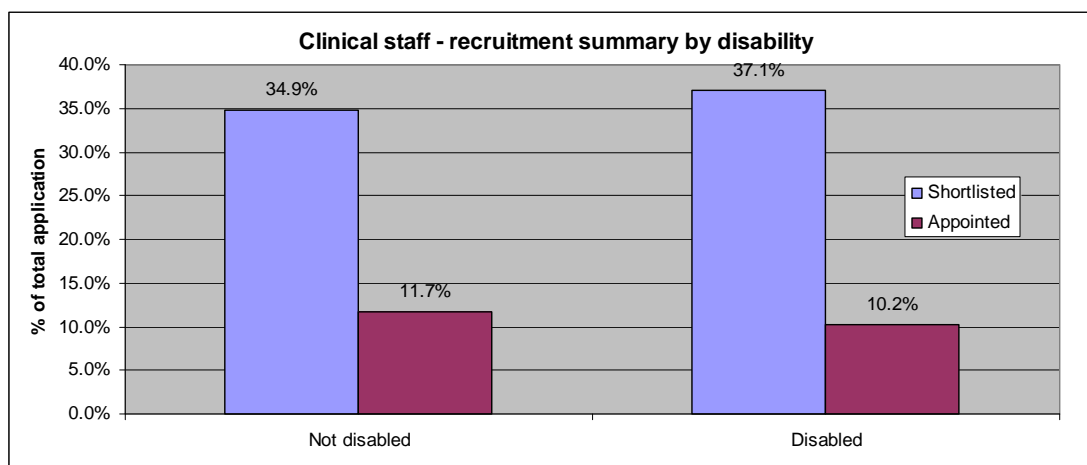
## 8.0 Applicants for employment

8.1 The Trust operates the two ticks symbol scheme and will guarantee an interview for disabled people who meet the essential job specification, explaining why the figures for disabled applicants who are shortlisted are higher than non disabled applicants. There is slightly more variation in clinical staff, with fewer disabled employees being appointed.

**Figure 6 – Recruitment Summary for Non-Clinical Staff by Disability**

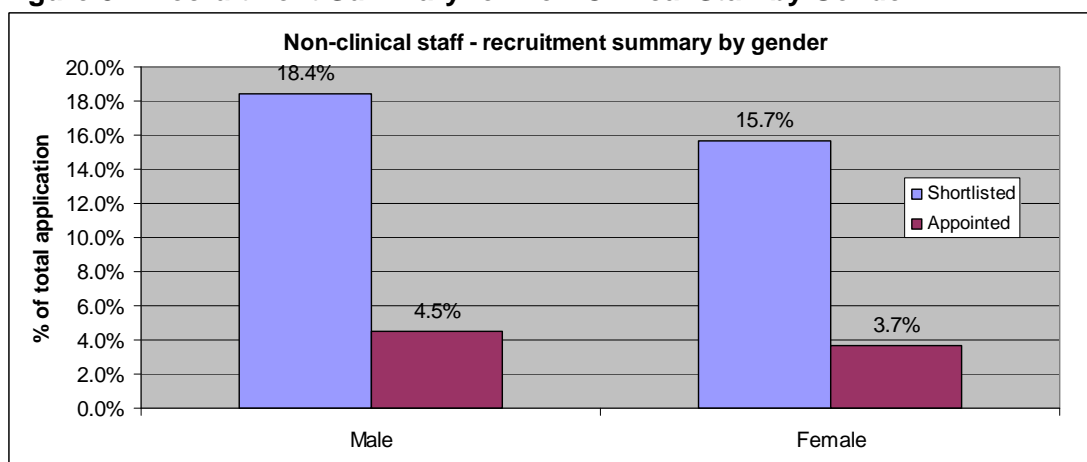


**Figure 7 – Recruitment Summary for Clinical Staff by Disability**

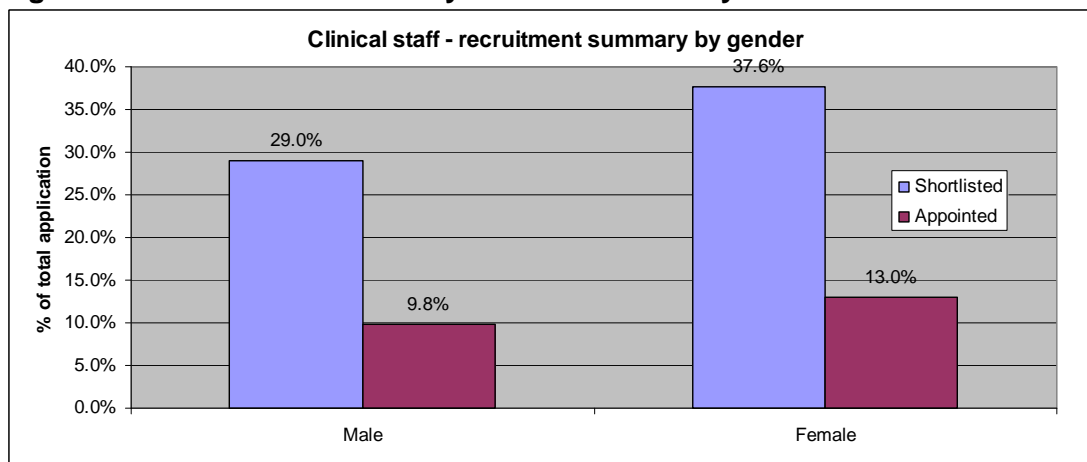


8.2 Within non-clinical staff, fewer women are shortlisted and appointed than men, whereas within clinical recruitment, fewer men are shortlisted and recruited. The difference is greater amongst clinical staff than non-clinical staff.

**Figure 8 – Recruitment Summary for Non-Clinical Staff by Gender**



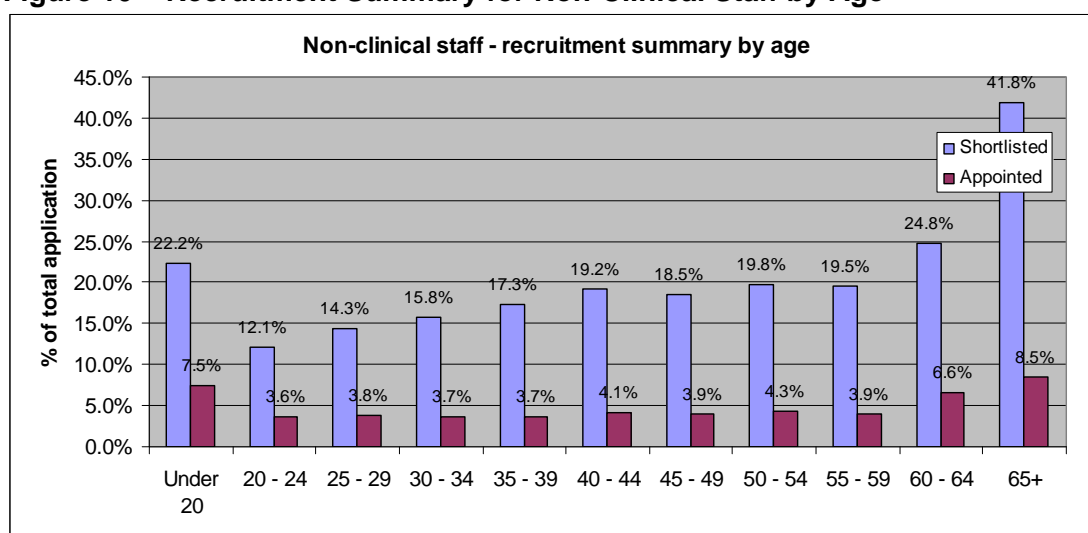
**Figure 9 – Recruitment Summary for Clinical Staff by Gender**



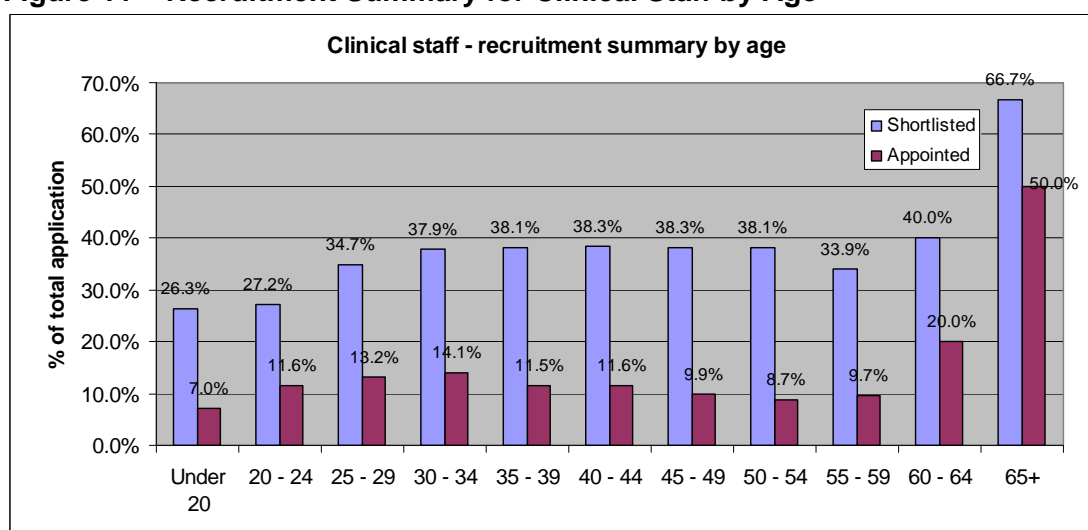


- 8.3 For non-clinical staff there is little variation with appointment rates across age, aside from slightly higher figures for those aged under 20 and over 60, which also have the highest figures for shortlisting. It should be recognised that the headcount figures for these age groups are significantly lower than other groups, being in the hundreds rather than thousands, therefore the validity of the data for these groups is lower, possibly explaining this variation. Furthermore, it is expected that some variation will be due to the types of role applied for, e.g. older applicants are likely to be applying for more senior positions of which there are generally fewer applicants. These explanations are also applicable to clinical staff, however the difference for this group is that those who are under 25 have the lowest figures. This is likely to be due to many clinical roles requiring a number of years of training, therefore few positions would receive a large number of applicants under 25 years of age.

**Figure 10 – Recruitment Summary for Non-Clinical Staff by Age**

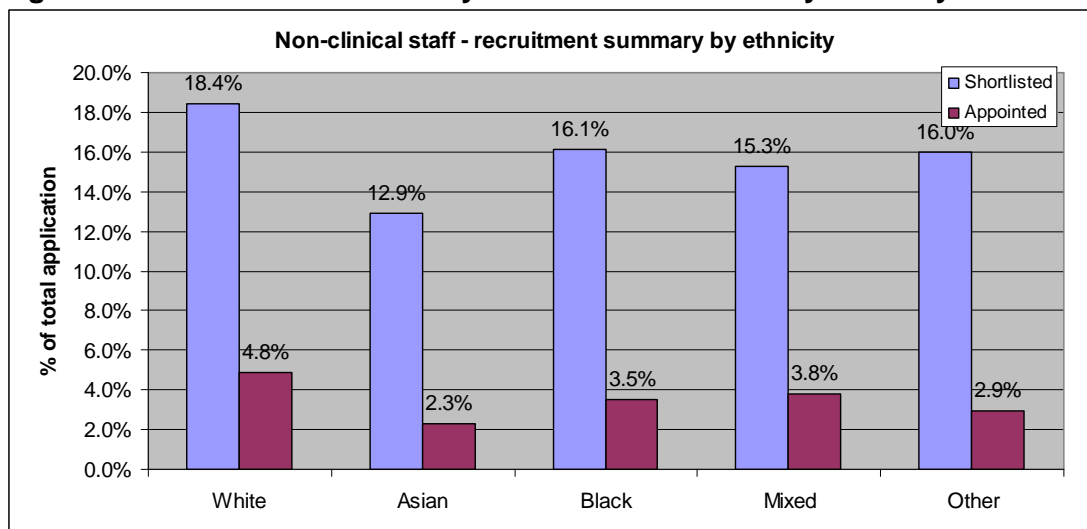


**Figure 11 – Recruitment Summary for Clinical Staff by Age**

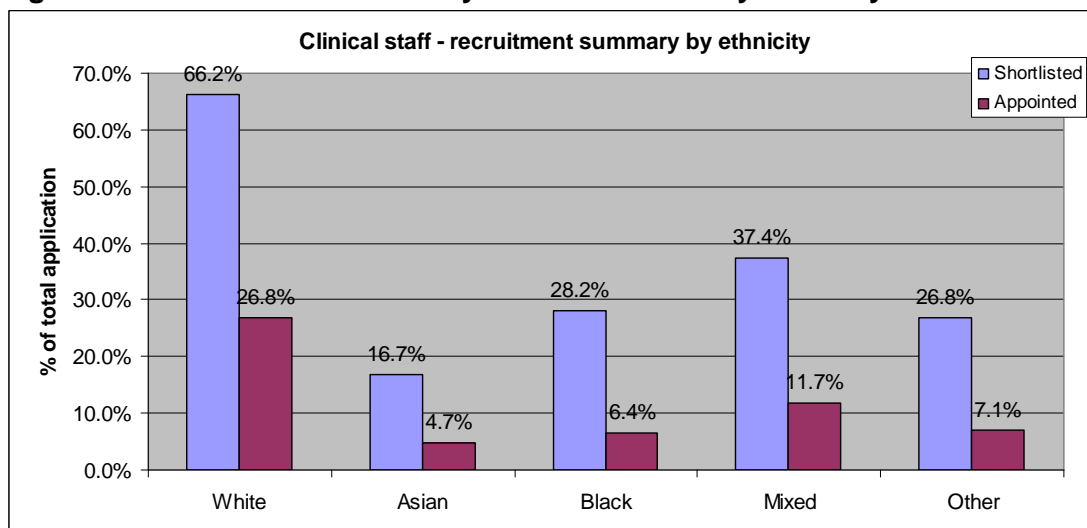


- 8.4 There is some variance between the shortlisting and appointments of different ethnic groups amongst both non-clinical and clinical staff, with white applicants having the highest rates of being shortlisted and appointed. It is likely that this could be due to the roles applied for, as section 5 of the report has demonstrated that across the Trust there is a greater proportion of white employees within senior roles and these roles tend to have a lower number of applicants, therefore the proportion of successful applicants (out of total applicants) would be higher. The variation is much greater amongst clinical staff.

**Figure 12 – Recruitment Summary for Non-Clinical Staff by Ethnicity**



**Figure 13 – Recruitment Summary for Clinical Staff by Ethnicity**



### 9.0 Education, Training and Development – Permanent Staff

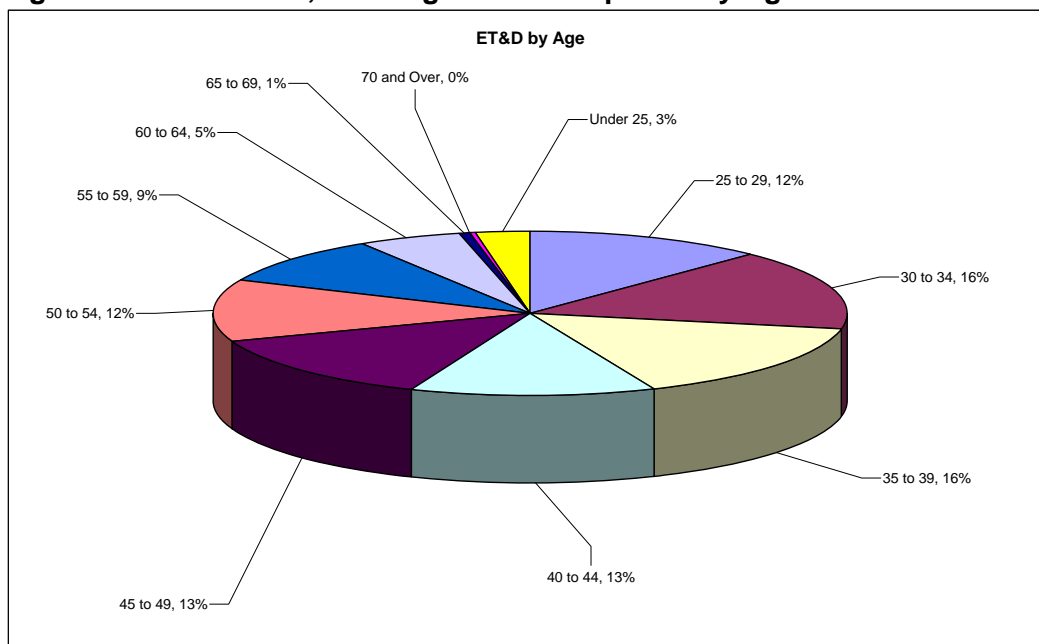
The Education, Training and Development (ET&D) data encompasses all employees who have attended internal training courses in the past 12 months. Whilst some employees have attended more than one course, for the purpose of the report they have been included only once in the data, as this demonstrates that they have been able to access training.

**Table 1 – ET&D courses included in data**

In Scope	Out of Scope
Bite Size	Apprenticeships
Business Skills	Frontline Leaders
Coaching	Nursing Assistant Gateway/Diploma
Developing You	CPPD/External Courses
Sickness & Absence	
Speed Writing	

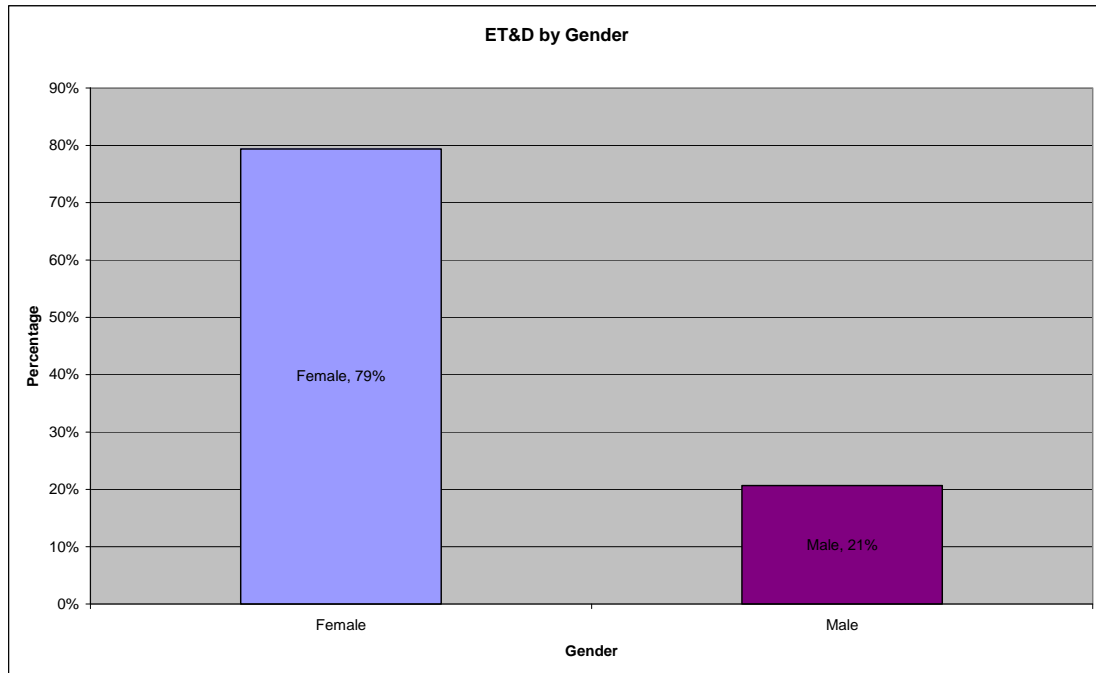
9.1 The age profile of those attending internal courses reflects the overall age profile of the workforce on the whole, however the under 25 age group are slightly underrepresented. There is no more than 2% variation across all age groups.

**Figure 14 – Education, Training and Development by Age**



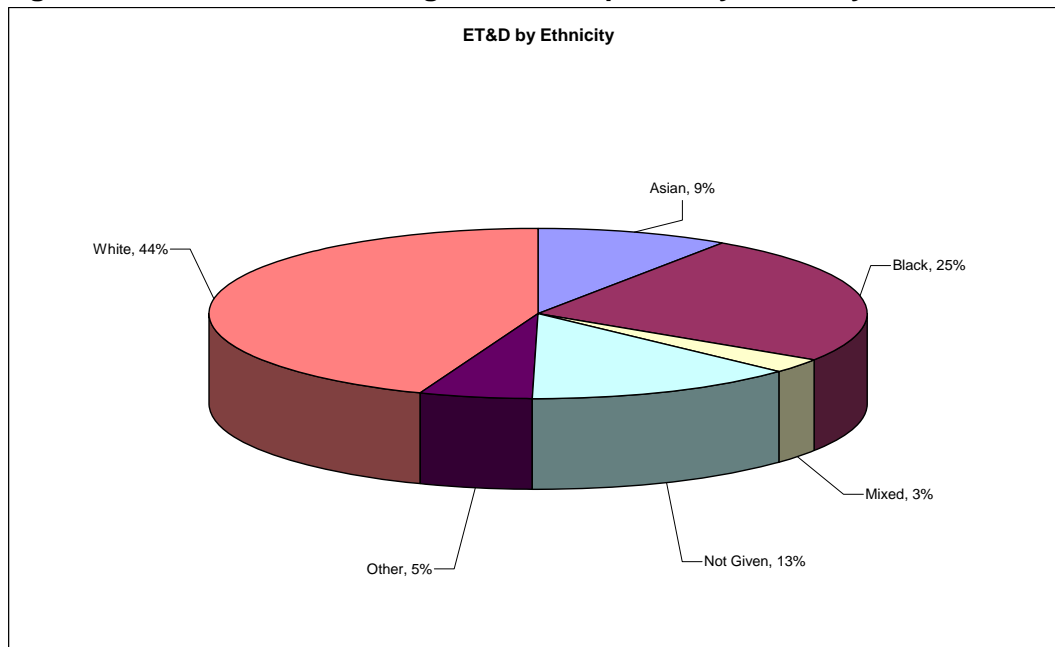
9.2 Females are accessing ET&D courses slightly more than expected in relation to the overall workforce division.

**Figure 15 – Education, Training and Development by Gender**

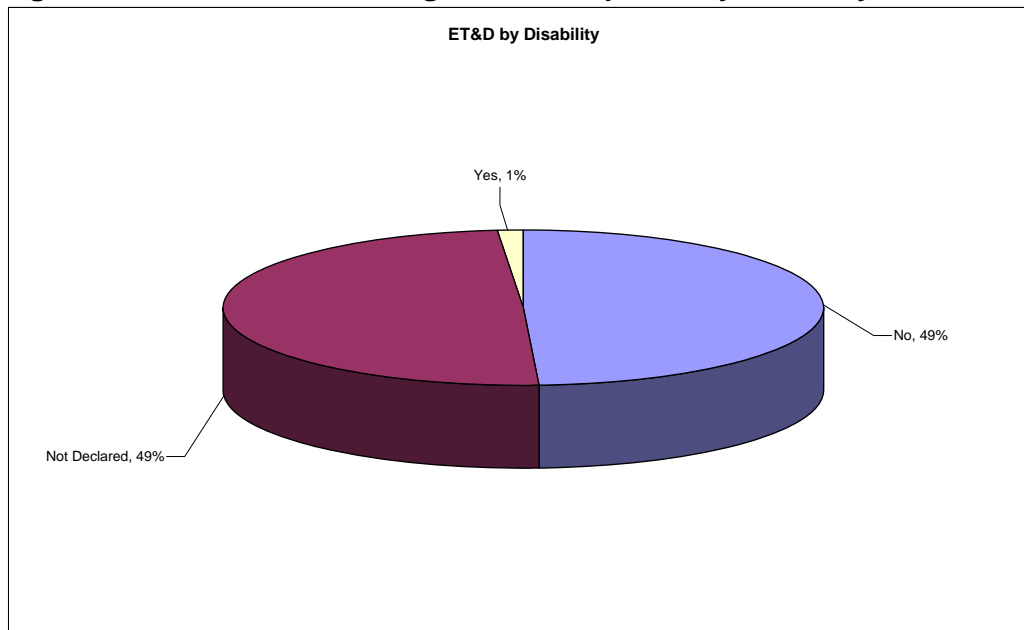


9.3 On the whole the ethnicity profile of those accessing ET&D courses reflects the profile of the workforce overall, with the greatest difference being the underrepresentation of white employees and the overrepresentation of black employees, both by 5%.

**Figure 16 – Education, Training and Development by Ethnicity**



9.4 The proportion of disabled employees accessing ET&D courses is as expected based on the overall Trust profile, however the proportion of those who have not declared whether they have a disability is slightly higher than the workforce average.

**Figure 17 – Education, Training and Development by Disability Status****Recommendations and summary**

- 1. The Workforce Committee are asked to note the inclusion of access to Trust training and development.**
- 2. Further analysis is to be completed to understand shortlisting and recruitment trends in clinical directorates.**
- 3. To consider the setting of inspirational targets redress the lack of diversity at different tiers of the organisational, relating to gender and ethnicity.**
- 4. To continue the improvement in case management and data collection in Employee Relations information.**
- 5. To complete a study to triangulate Occupational Health disability recording with Employee Services Records data.**

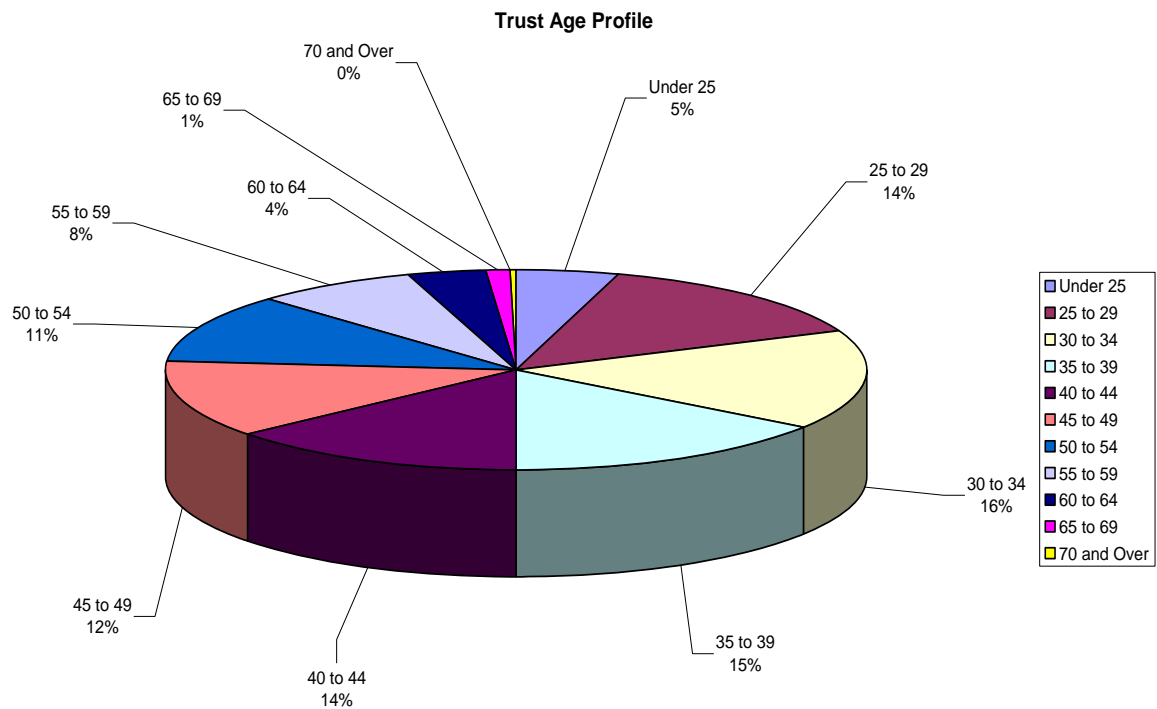
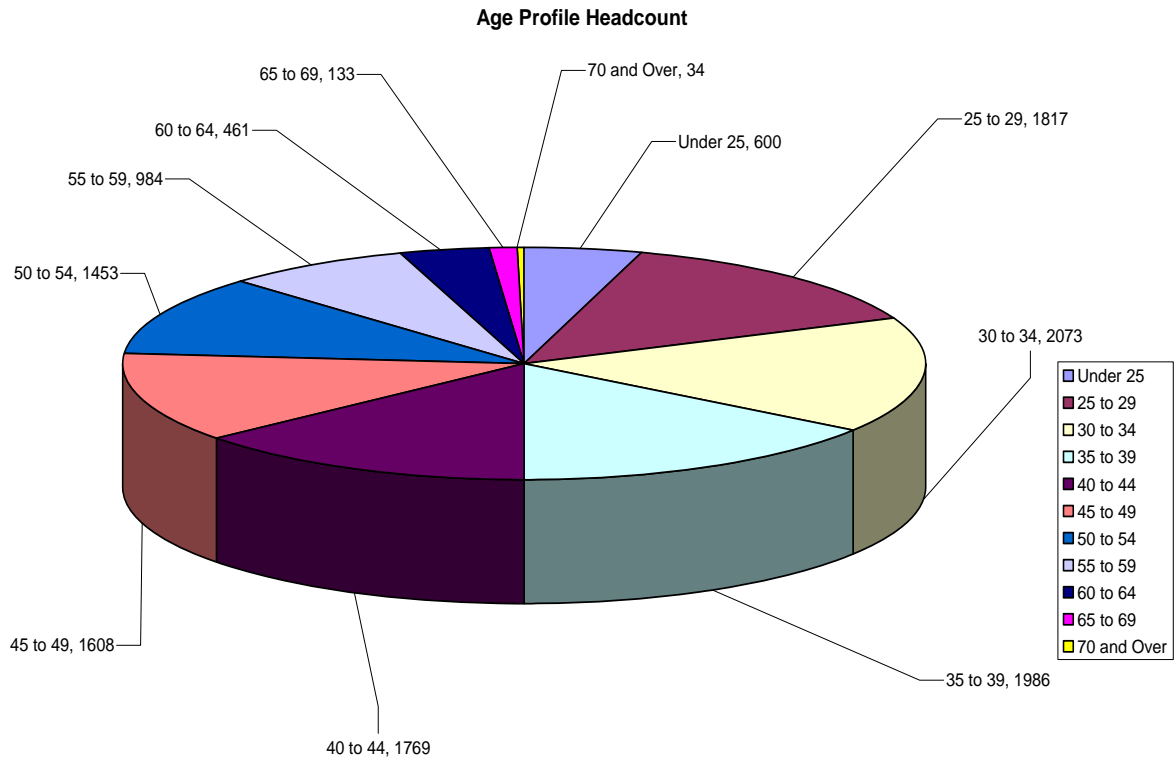
**Ann Macintyre****Staynton Brown**

**Director of Workforce &  
Organisational Development**

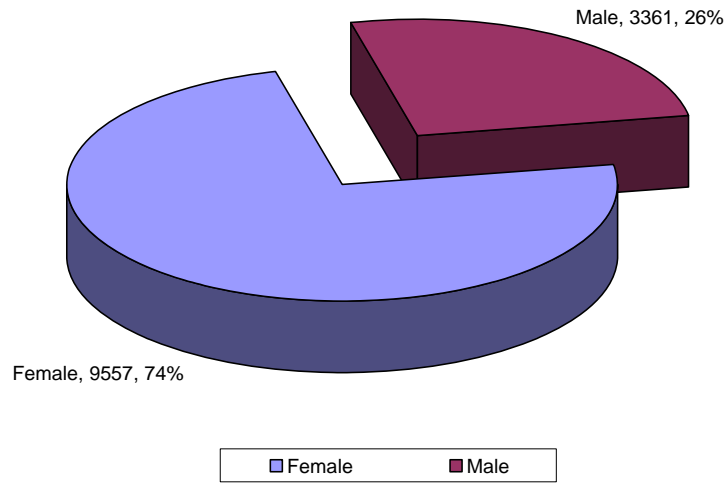
**Associate Director,  
Equality & Human Rights**

**January 2014**

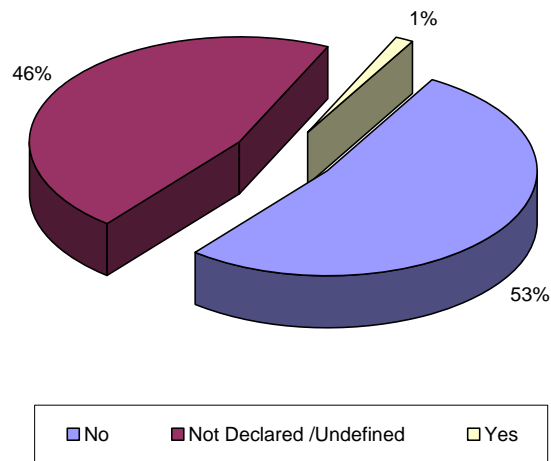
## Appendix A: Tables and graphs depicting workforce monitoring data 2013 - 2014



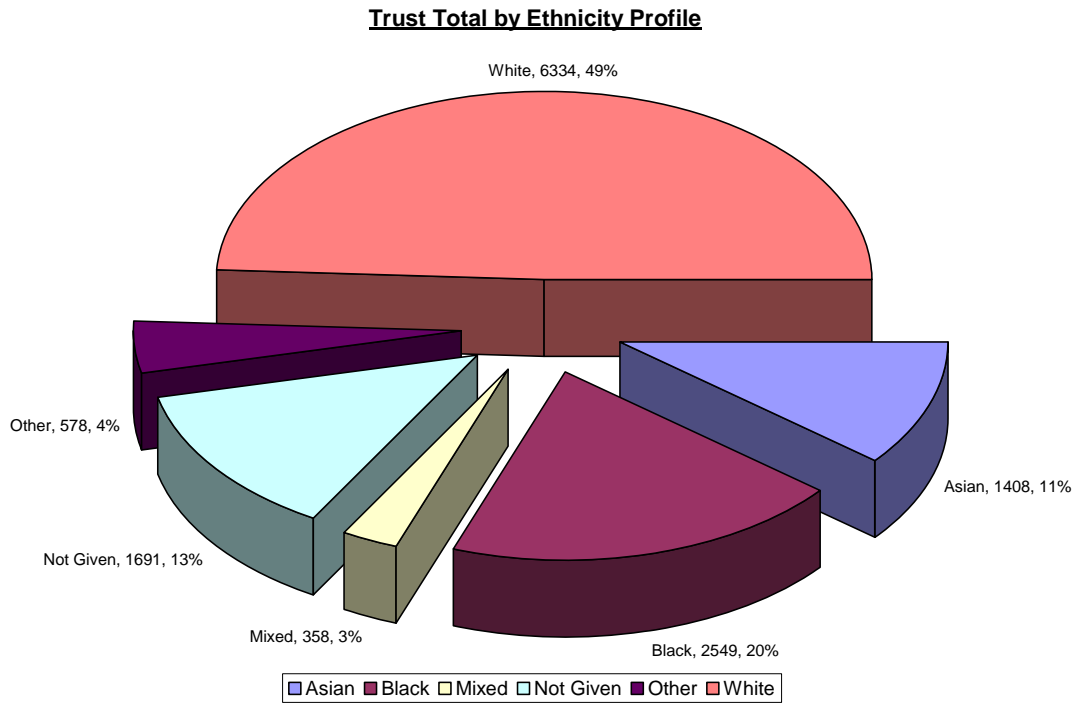
**Trust Gender Profile**



**Trust Disability Profile**







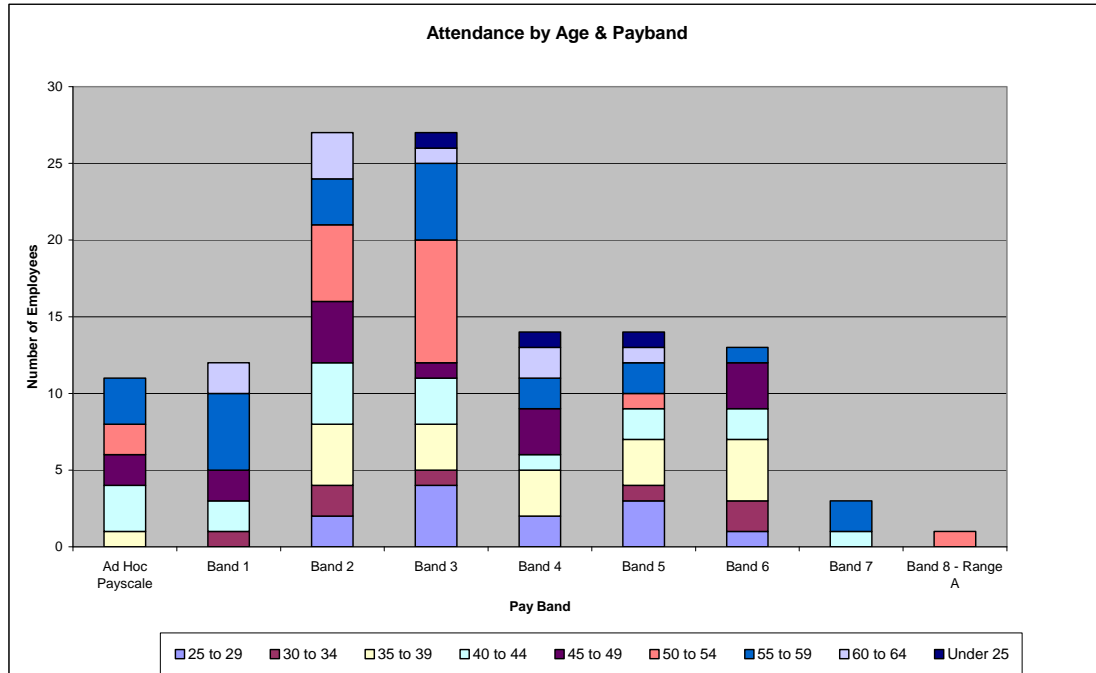
## Appendix B – Workforce Relations

### 1. Workforce Relations – Attendance

The attendance data shows all employees who have reached stage 2 of the sickness absence procedure.

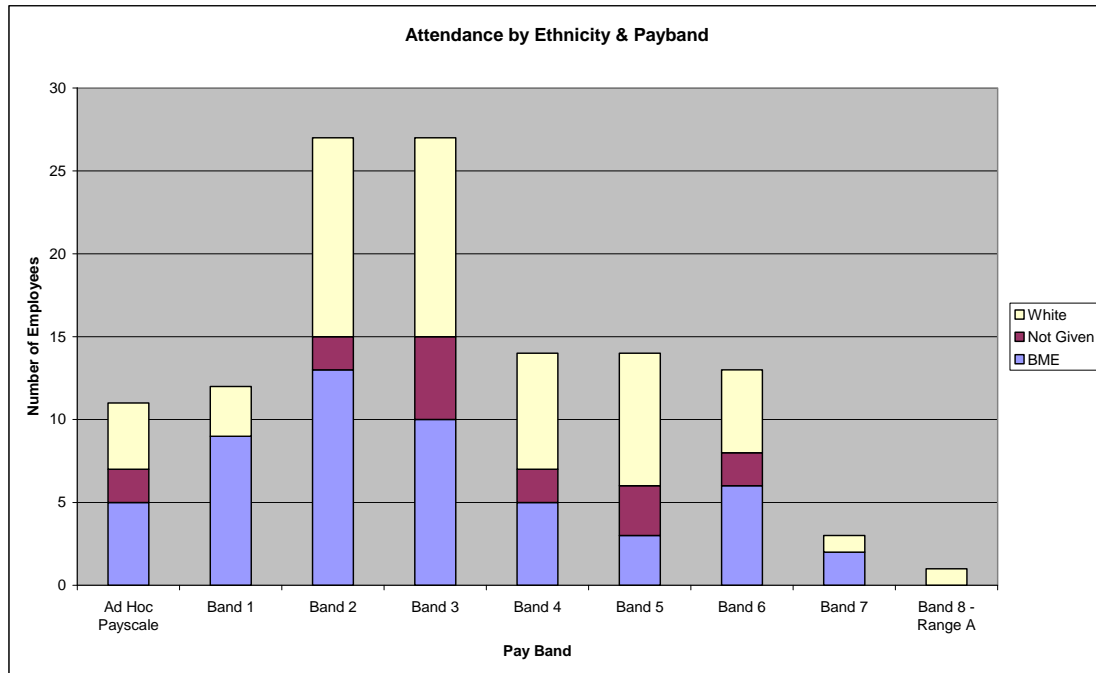
1.1. Attendance is spread fairly equally across age groups throughout the Trust.

**Figure B1 – Attendance by Age**



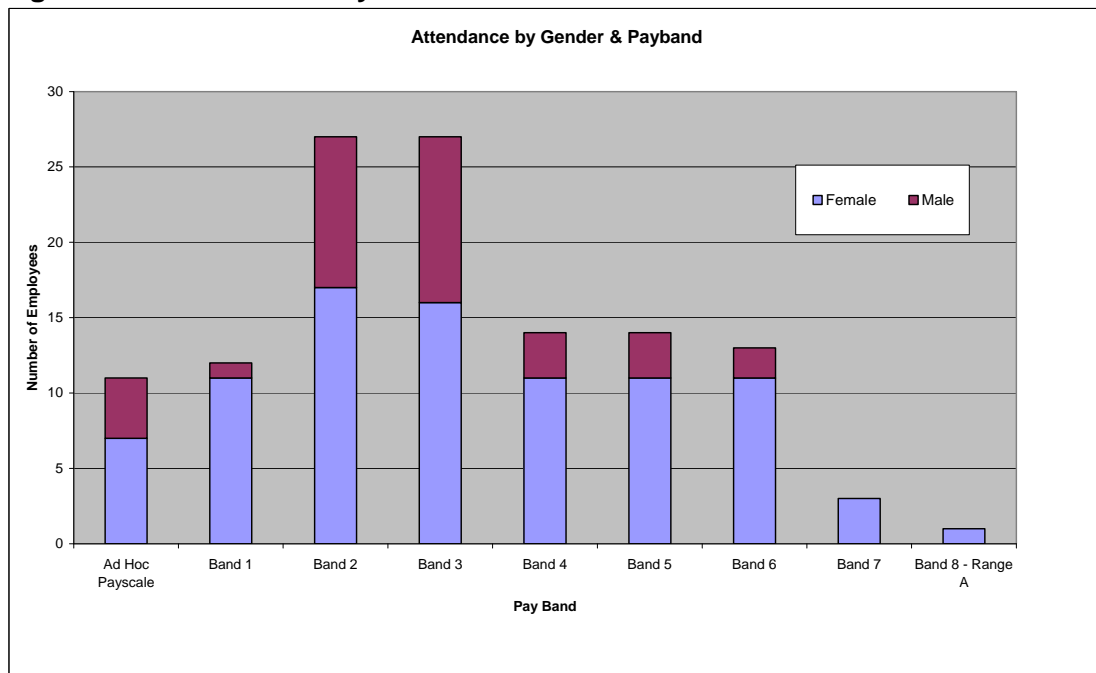
1.2. Across the Trust, the breakdown of attendance by ethnicity is generally in line with the overall representation of ethnicity.

**Figure B2 – Attendance by Ethnicity**



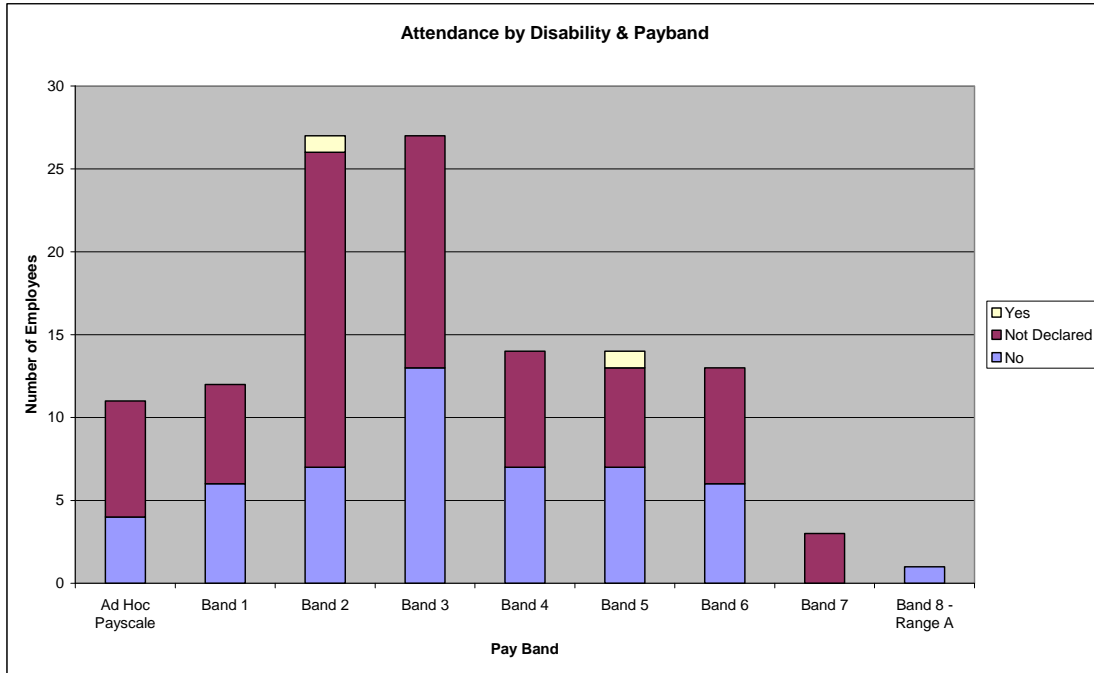
1.3. Gender representation of attendance reflects that of the Trust as a whole.

**Figure B3 – Attendance by Gender**



1.4. In comparison to the Trust’s general trends, there is a slightly higher proportion of employees who have not declared their disability status. Given that sickness absence could relate to disability, further investigation should be done into this.

**Figure B4 – Attendance by Disability Status**

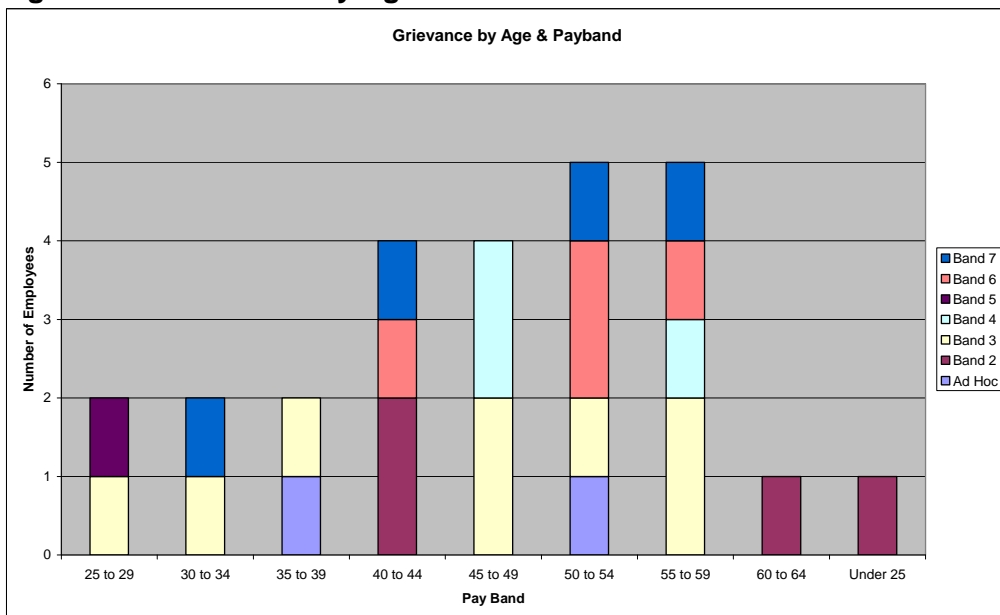


**2. Workforce Relations – Grievance**

This data refers to those who have raised a formal grievance, excluding any collective grievances raised.

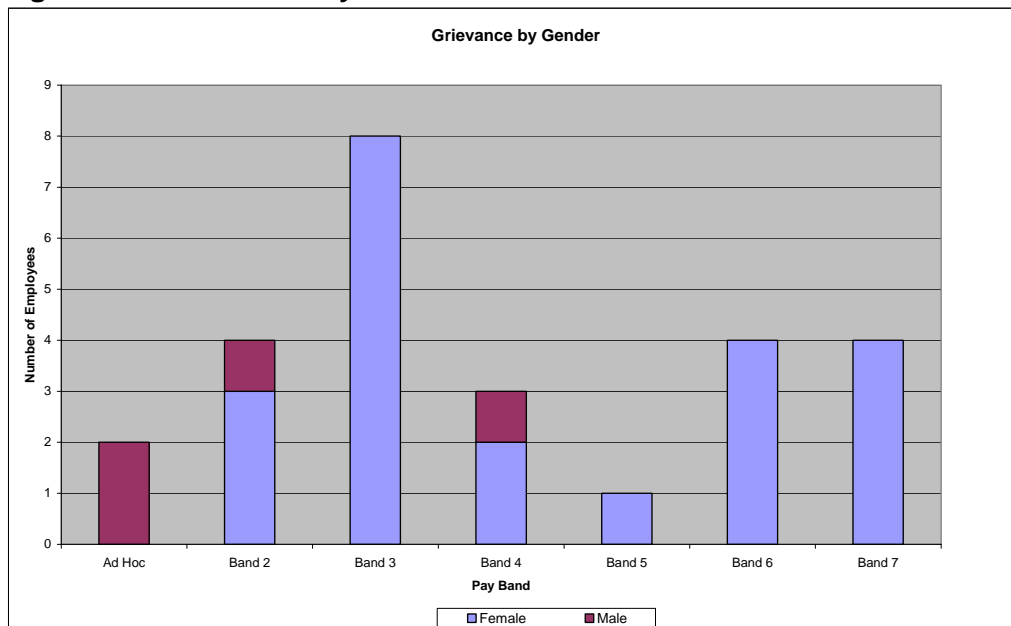
2.1. There is a slight increase in the number of grievances reported with age; however the overall number is so small that this trend is unlikely to be significant.

**Figure B5 – Grievance by Age**



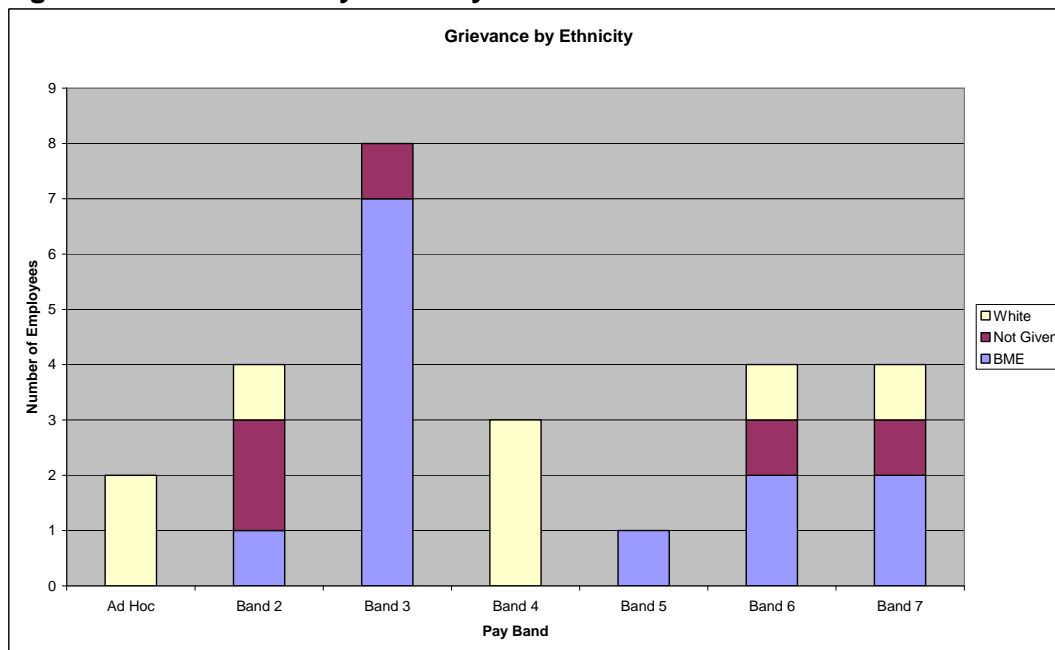
2.2. There are a higher number of females raising grievances than expected in relation to the overall gender split of the workforce, however again this is unlikely to be significant given the low number of grievances in total.

**Figure B6 – Grievance by Gender**



2.3. In relation to overall workforce ethnicity, there is an overrepresentation of BME employees. This may be due to the relatively high number of grievances raised by staff in Band 3 roles, which as section 5 demonstrates, has a high representation of BME staff. Again the small number of total grievances should be recognised as a limitation.

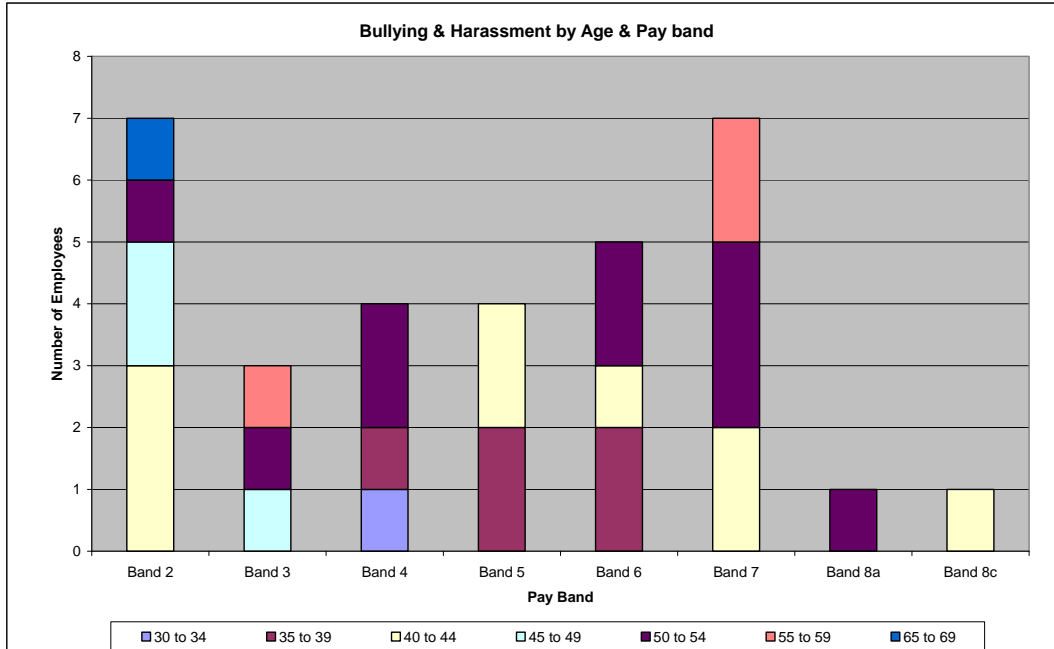
**Figure B7 – Grievance by Ethnicity**



### 3. Workforce Relations – Bullying and Harassment

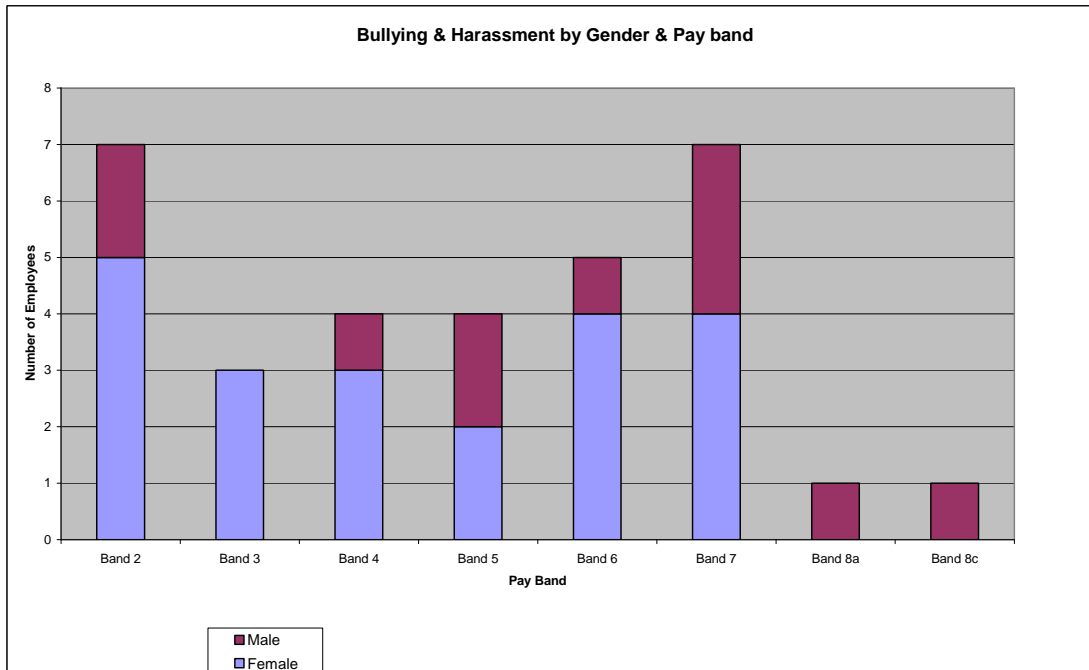
3.1. The majority of bullying and harassment complaints are raised by those aged 35 or over, although it should be recognised that the total number of bullying and harassment cases is only 32 across the Trust.

**Figure B8 – Bullying and Harassment by Age**



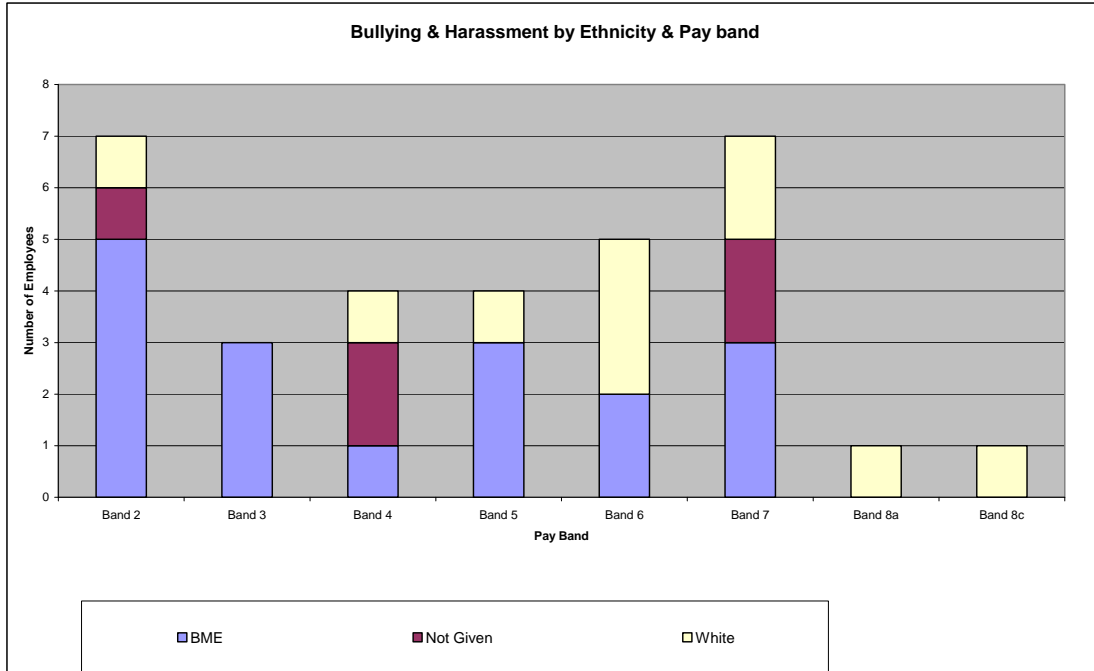
3.2. The gender representation across employees who have raised a bullying and harassment complaint reflects the overall gender distribution across the Trust.

**Figure B9 – Bullying and Harassment by Gender**



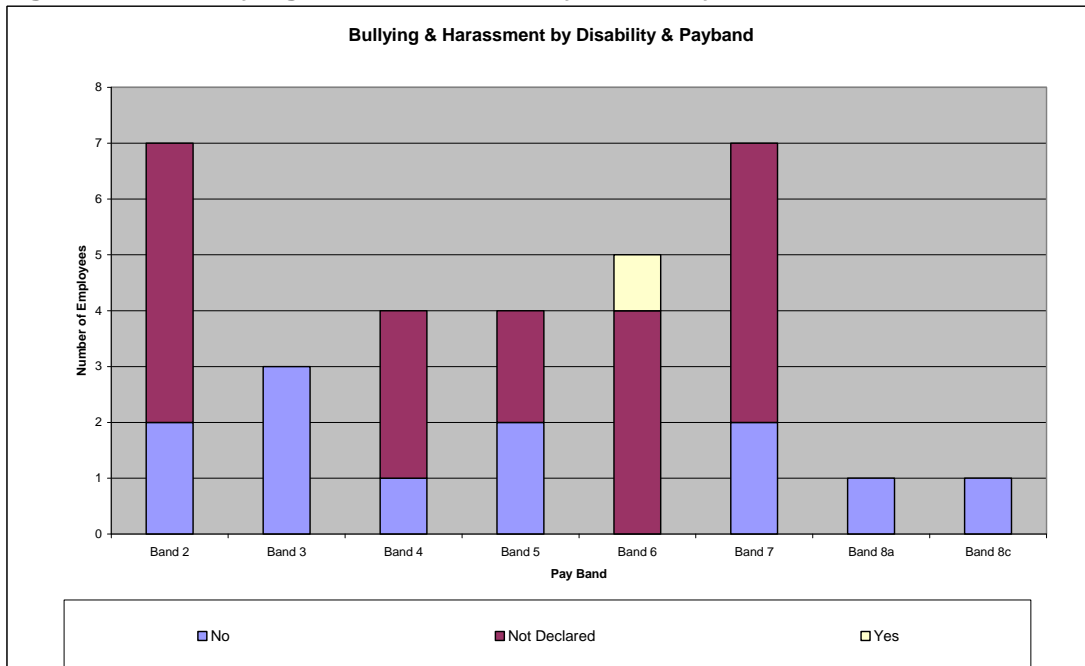
3.3. In comparison to ethnicity representation across the Trust, the number of Bullying and Harassment complaints raised by BME employees is higher than would be expected. This is, in part, caused by the high number of complaints by band 2 staff, and due to the small sample size, this has a considerable impact on the overall trend.

**Figure B10 – Bullying and Harassment by Ethnicity**



3.4. There is no clear relationship between disability status and bullying and harassment complaints other than those with a status of non declaration being slightly higher than expected.

**Figure B11 – Bullying and Harassment by Disability Status**

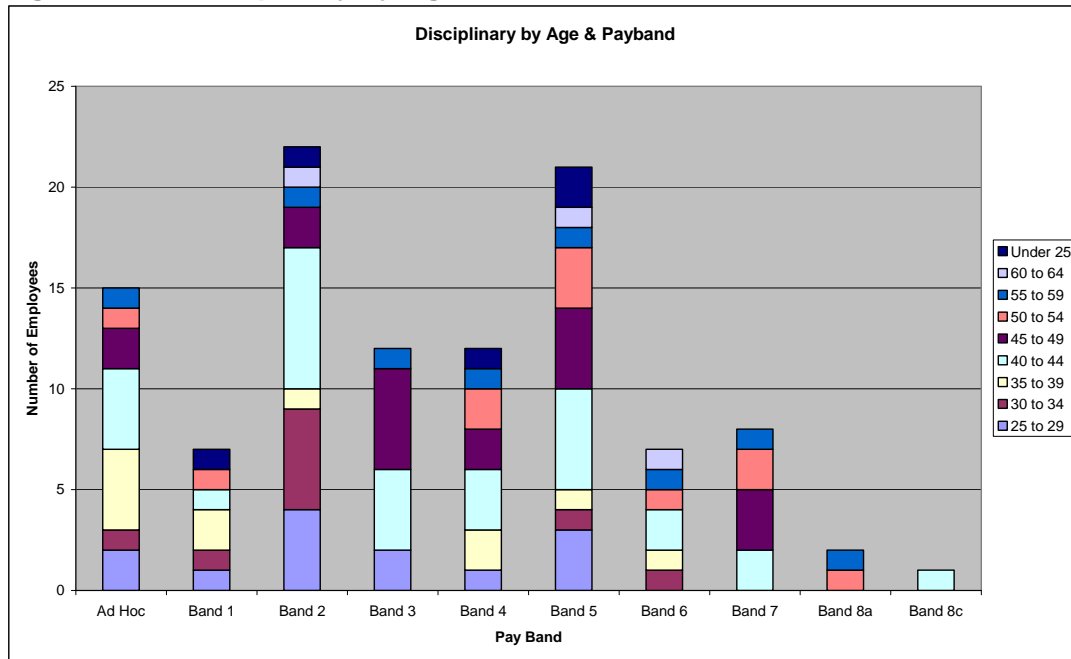


#### 4. Workforce Relations – Disciplinary

The disciplinary data includes all employees who have been subject to a formal investigation and outcome under the disciplinary policy which has been recorded from November 2012 to December 2013. It does not, therefore, include employees who have been informally investigated or where a formal outcome has not been issued.

4.1. There is a relatively even spread of disciplinary action across the age groups.

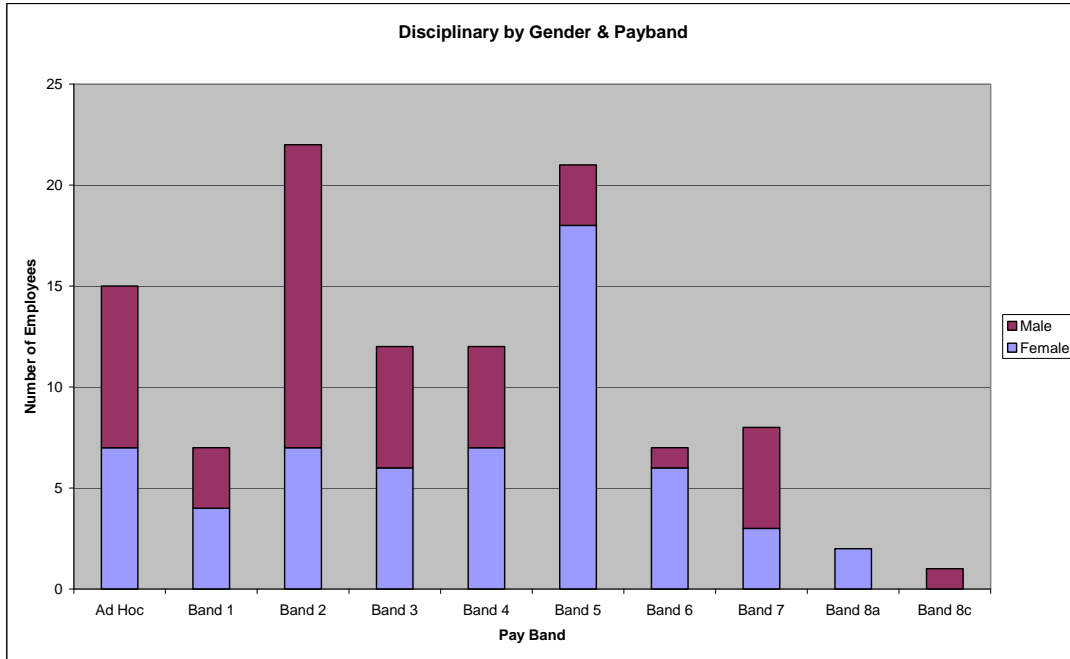
**Figure B12 – Disciplinary by Age**



4.2. In comparison to the gender division across the workforce as a whole, there is a higher than expected proportion of men who have received a formal disciplinary outcome.

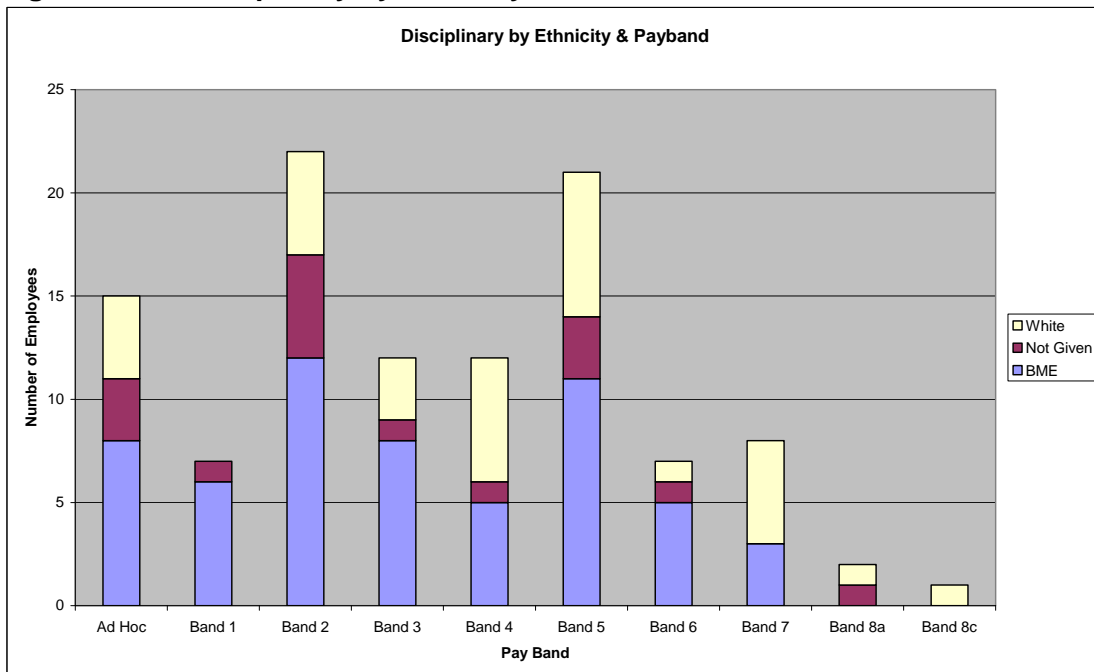


**Figure B13 – Disciplinary by Gender**



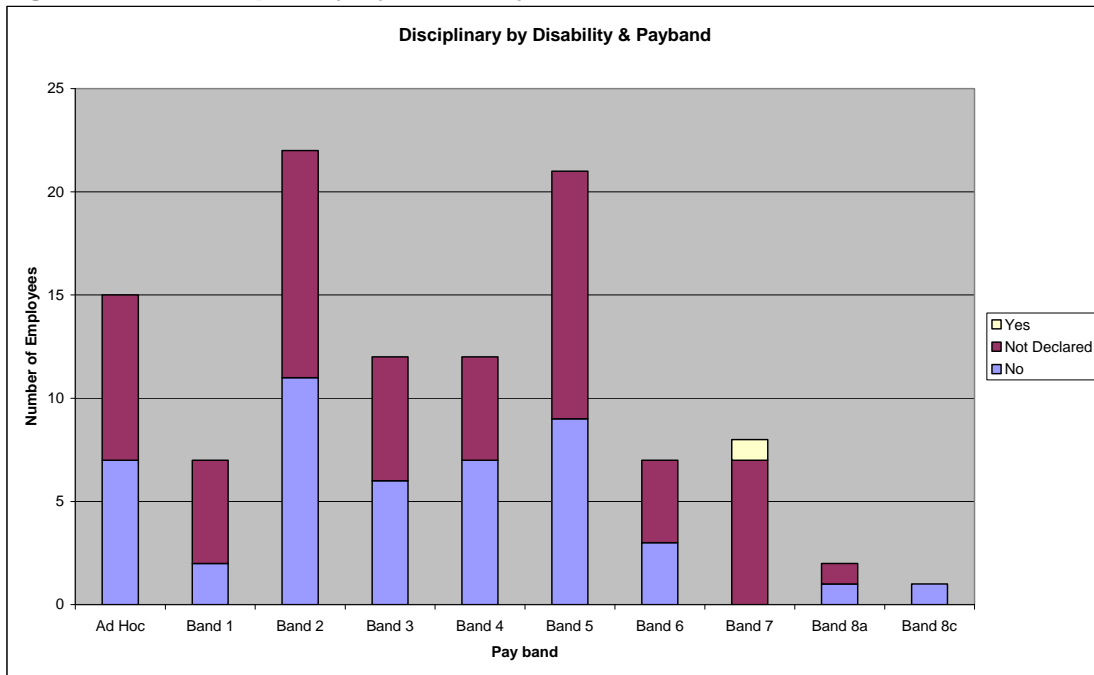
4.3. There is a higher than expected proportion of BME employees who have received a formal disciplinary outcome in comparison to the Trust’s overall ethnicity representation.

**Figure B14 – Disciplinary by Ethnicity**



4.4. The number of disabled employees that received a formal disciplinary outcome is not higher than would be expected, however as with the other workforce relations indicators, there appears to be an overrepresentation of those who have not declared their disability status in comparison to the workforce overall.

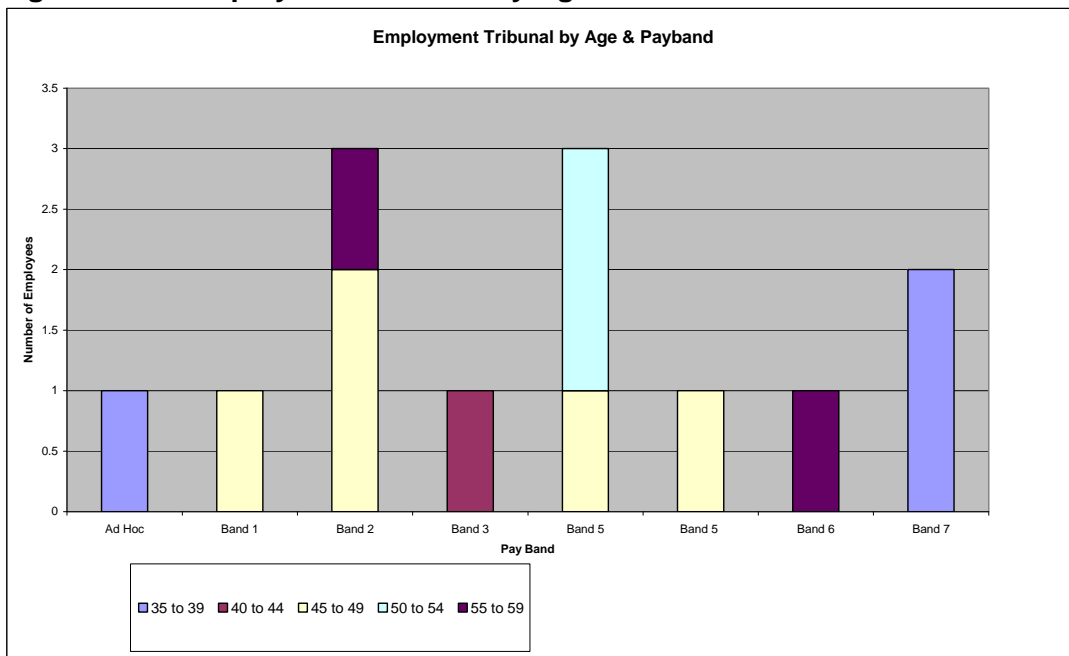
**Figure B15 – Disciplinary by Disability Status**



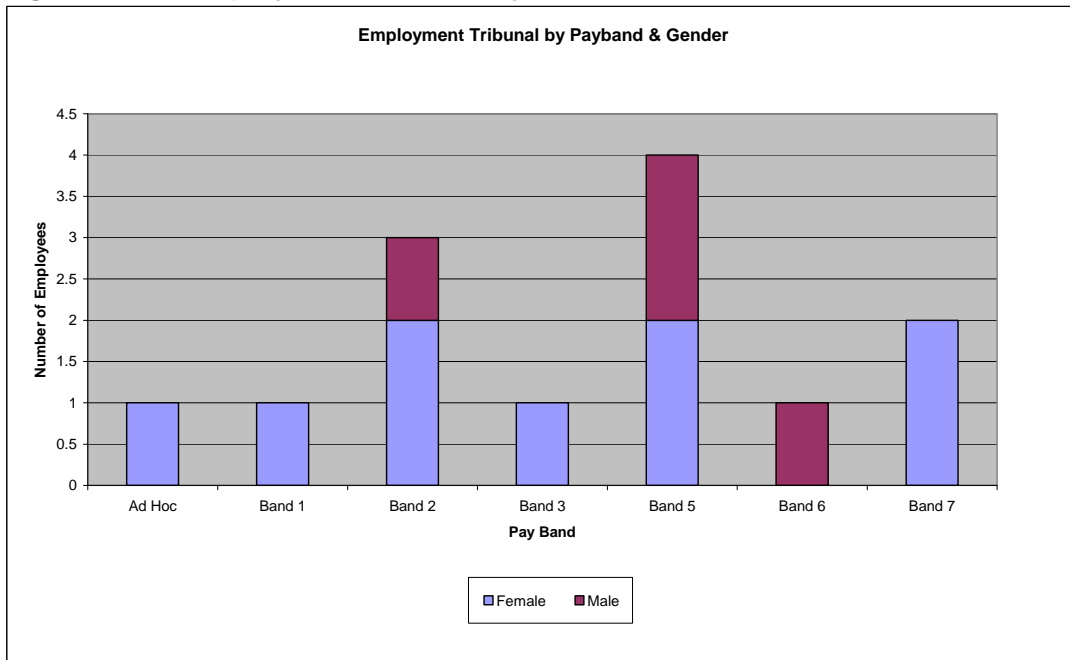
**5. Workforce Relations – Employment Tribunal**

There are only 13 Employment Tribunal cases recorded, meaning the sample size is too small to show any clear trends or to draw any conclusions.

**Figure B16 – Employment Tribunal by Age**



**Figure B17 – Employment Tribunal by Gender**



**Figure B18 – Employment Tribunal by Ethnicity**

