

Countess of Chester Hospital

NHS Foundation Trust



Countess of Chester Hospital NHS Foundation Trust Annual Workforce Equality Analysis (2012)



we **respect** each other
we have a **can do** attitude
we strive for **improvement**
we take **pride** in the service we provide
we are welcoming, friendly and **caring**
we put **patients** at the heart of everything we do

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This report is available in alternative formats upon request, such as large print, electronically or community languages. Please contact the Equality & Diversity Manager on 01244 364283.

1. Introduction

1.1 About this report

Fundamental values of dignity and respect underpin the Countess of Chester Hospital NHS Foundation Trust (CoCH). If these are to be achieved, our employees must have equal freedoms to flourish and achieve. The workplace is an important place to start; our employees are our greatest asset. Within numerous offices, wards and workplaces across West Cheshire and Chester, people with different characteristics are brought together. Delivering high-quality services with professionalism helps to fight stereotypes, reduce prejudice and change attitudes within wider society.

An inclusive workplace is an important tool to begin to address wider social fragmentation and community cohesion. This can be achieved by addressing employment related inequalities across the Equality Act 2010 defined protected characteristics – age, disability, sex(gender), race, religion or belief, pregnancy and marriage, sexual orientation, gender reassignment and civil partnership and marriage.

Employment and workforce opportunities are varied and numerous. They include opportunities for caring, leisure and respite, fair work conditions (including health and safety) and freedom to unionise or join professional bodies.

This report looks at the profiles of people accessing workforce and employment related opportunities at CoCH, based on requirements defined within the new single equality duty and related elements within other equality and employment legislation. It accompanies the Equality Diversity and Human Rights Assurance report (2013).

Recommendations from this report will help inform the inaugural equality strategy, as directed by the requirements of the new public sector single equality duty, which came into effect from 5th of April 2011, as the second tranche of legislation emanating from the equality Act 2010. This report refers to the period January 2012 to November 2012 (unless otherwise indicated).

1.2 About the organisation

The Countess of Chester Hospital NHS Foundation Trust (COCH) consists of a 600 bedded large district General Hospital, which provides its services on the Countess of Chester Health Park, and a 64 bedded Intermediate Care Service at Ellesmere Port Hospital. The Trust has approximately 4,000 staff and provides a range of medical services to more than 445,000 patients per year from areas covering Western Cheshire, Ellesmere Port, Neston and North Wales.

CoCH has an excellent reputation for delivering high quality patient care and is nationally accredited at the highest levels in many areas, in particular those relating to clinical outcomes and patient safety.

Our aim is to be the preferred hospital of choice for our traditional community, and a preferred hospital of choice for patients from a wider area, and to continue to provide a comprehensive, high quality, and accessible range of emergency and elective services to all our patients. We want our patients to be assured that they will receive their care as rapidly as possible in a first-class environment, be treated with courtesy and dignity, and be confident that the outcome of their clinical care will be of the highest standards and safety.

1.3 Single Equality Duty

The Trust meets its statutory obligations and has published a single equality duty assurance report for 2013, outlining how it will sustain this. In January 2012, the workforce equality analysis report for 2011 was published. In April 2012, the Trust published its equality objectives which will inform the inaugural Equality strategy to be published in April 2013. The Trust has embedded equality analysis into the review and development of policies, functions, services and planning. The Trust has built up an engagement framework with stakeholders from across the protected characteristics.

1.4 Drivers for workforce monitoring

The key drivers behind monitoring workforce related opportunities are:

- Reducing Inequalities, within national, regional and local policy;
- Statutory, meeting the legal requirements governing public bodies;
- Meeting the Care Quality Commission outcomes for quality and safety;
- Equality and Human Rights Commission (EHRC) codes of practice compliance.
- Guidelines and directives from the Government Equalities Office (GEO)

1.5 Key Principles

The diversity of our workforce enriches everyone and allows the Trust to deliver high quality services. There are three overall key principles when considering and delivering employment related opportunities:

1. Our employees have diverse needs shaped through circumstance and resource (e.g. a low-income carer may require more flexible working);
2. Our role as an employer gives us powers to tackle wider accumulation of disadvantage through targeted interventions ('positive action'), e.g. mentoring programmes for under-represented groups; and
3. Our employees should not experience unlawful disadvantage because of their age, disability status, sex, race, religion and beliefs, or sexual orientation.

2. Data and Reporting Principles

2.1 Measurement and Indicators

This report sets out the measurements from various indicators based on requirements of the equality Act 2010, which replaced the previous duties for race, disability and gender, when the new single equality duty came into effect from 5th of April 2011. The indicators used are presented below. The headings in bold indicate the legal requirements and the sub-headings indicate how we present the information:

- **Numbers of staff in post;**
 - By salary pay band
- **Applicants for employment, and promotion;**
 - Applications and Shortlisting
 - Promotions
- **Staff who benefit or suffer detriment as a result of performance assessment procedures;**
 - Managing poor performance policy usage
- **Staff who are involved in grievance procedures;**
 - Grievance policy usage
 - Bullying and Harassment policy usage
- **Staff who are the subject of disciplinary procedures;**
 - Disciplinary policy usage
- **staff who commence and cease employment;**
 - Starters and Leavers equality monitoring

2.2 General Reporting Principles

In December 2012, the Cheshire online demographics portal Data Observatory Research and Intelligence Collaborative (DORIC) disaggregated data from the national ONS 2011 census in Cheshire sectors, for Local Authority domains. The ONS sourced report records the Cheshire West and Chester population to be 329,708 (1). There is a projected increase of 8% by 2029 (2).

The presentation of data within this report uses the ONS census 2011. In rare instances, calculations for proportions where the required detailed information a protected groups is not available, alternative research may be cited.

(1) ONS National Census 2011; Source - DORIC Local Authority interim overview profiles [DORIC Online](#) (Dec. 2012)

(2) Cheshire West and Chester Council 2011 – [Population forecasts report](#) ; Jan 2011, (p2)

2.3 Overall staffing levels

The overall staff headcount for the reporting is **4,315** as 30/11/2012.

These numbers include all those on Permanent and Fixed Term contracts and those employed jointly with other organisations.

2.4 Data Sources

The data used in this report is sourced from:

- Electronic Staff Record (ESR),
- NHS Jobs records
- OLM (Oracle Learning Management)
- NHS Staff Survey

Within ESR certain protected characteristics may have data quality gaps, where staff have been given the option not to disclose. This is a common dynamic across most NHS organisations. With regard to formal procedures, in particular where the total number will be low, it may be imprudent to assess these as being statistically significant or a viable source for comparative analysis.

2.5 Data Presentation

Data presentation generally includes a comparison with baseline information.

- Baselines for staff categories (whether pay band, job-type etc.) is usually against the overall Trust staff profiles.
- The baseline for overall Trust profile is the West Cheshire and Chester population at large.
- In certain cases, national data sets or estimations based on commissioned research into protected characteristics may be utilised.

3. Workforce Profiles

3.1 Ethnicity Profiles

Black and Minority Ethnic (BME)

The term black and minority ethnic (BME) is used in this report to refer to people from the following ethnic groups:

- **Asian or Asian British:**
(Indian, Pakistani, Bangladeshi, Any other Asian Background);
- **Black or Black British:**
(Caribbean, African, Any other Black Background);
- **Chinese or any other ethnic group;**
- **Mixed:**
(White and Black Caribbean, White and Black African, White and Asian, Any other Mixed background).
- **White Irish, White European, Other White background** ⁽¹⁾

White British

As per '16+1' census ethnicity classification, the term 'White' used in this report refers to 'White British'. Although other ethnic groups such as 'White Irish' or 'White European' are referenced as 'White', these ethnic groupings are classified as Black and Minority Ethnic (BME) groupings, under the definitions of the Race Relations (Amendment) Act (2000).

3.2 Headcount - Please note

Any Headcounts of 5 or less is shaded, with the number deleted, to avoid individuals being identified. In most cases in this report, percentages will be presented to further promote staff confidentiality and sound information governance standards.

(1) These ethnic groupings are classified as Black and Minority Ethnic (BME) groupings, under the definitions of the Race Relations (Amendment) Act (2000).

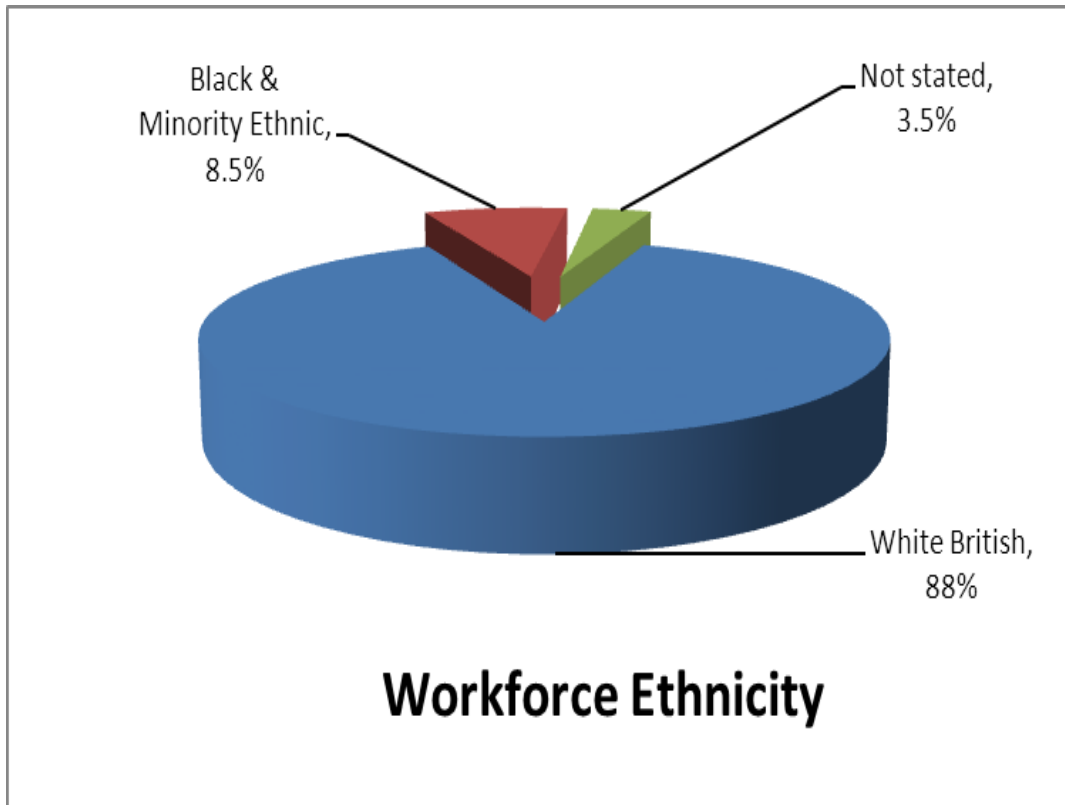
Headcount (1)

Pay Grade	Headcount
Associate Specialist	18
Band 1	309
Band 2	1,214
Band 3	424
Band 4	246
Band 5	876
Band 6	514
Band 7	278
Band 8a	74
Band 8b	18
Band 8c	20
Band 8d	
Band 9	
Clinical Assistant	26
Consultant	148
Hospital Practitioner	
Junior Doctors	96
Local Non-AfC	18
Medical Ad-Hoc	
Specialty Doctor	27
Staff Grade	
Total	4,315

1. Headcount is recorded as at the end of November 2012. This figure relates to all primary assignments i.e. all staff in employment across all medical and non-medical staff groupings and staff employed in training.

Ethnicity:

Fig 1



Analysis:

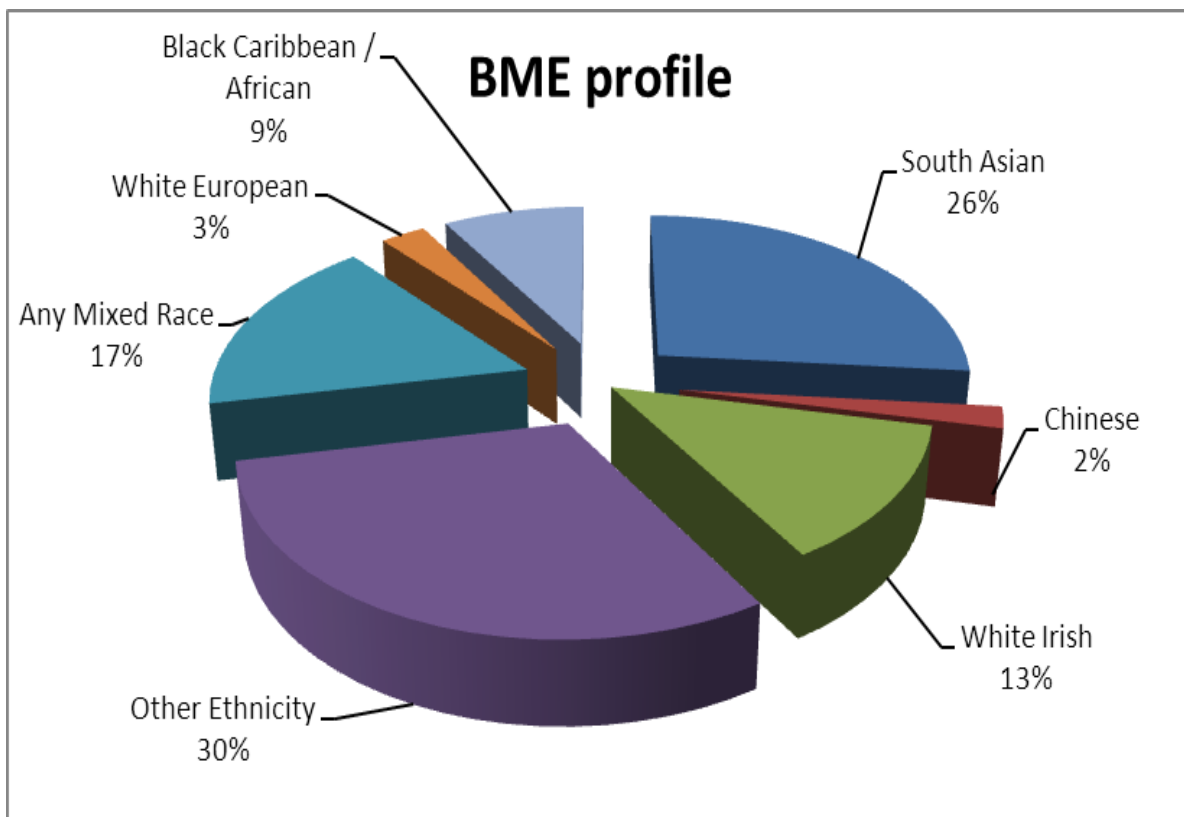
The known ethnicity profile of the Countess of Chester Hospital NHS Foundation Trust is recorded at a very creditable 96.5%. This record has improved on the 2011 figure by approximately 3%, thereby facilitating accuracy in workforce analysis. The number of applicants not stating their ethnicity on the NHS Jobs recruitment portal was 1.03% in 2012.

The highest ethnicity is '*White British*' at 88%. This was 86% in 2011. The total percentage for Black and Minority Ethnic (BME) staff in COCH is 8.5%, which is an increase of almost 1% on the figure for 2011. However, the two respective 2012 results will have been influenced by the slight reduction in the number of staff who did not state their ethnic status.

The BME population in West Cheshire and Chester according to the Office for National Statistics (ONS) 2011 Census amounts to 5.3% of the total population (1). The BME staff population when compared to the total workforce figures at CoCH, is approximately 75% higher than the BME West Cheshire and Chester wider community. This demonstrates that there is a staff corpus at COCH which is more diverse than the local population make up.

(1) ONS National Census 2011; Source - DORIC Local Authority interim overview profiles [DORIC Online](#) (Dec. 2012)

Fig 2



The highest Black and Minority Ethnic (BME) groups are 'Asian or Asian British –Indian' at 1.76%, White Other – 1.74% and White Irish at 1.09% of the total workforce. Visible BME staff groups amount to 54% of the total number of staff identifying as BME within the total workforce. The highest combined BME grouping relates to 'Other Ethnicity' which amounts to almost a third of the total for BME ethnic groups at 30%. South Asian ethnicities account for just over a quarter of BME staff at 26%.

There are significantly higher percentages of BME staff in medical positions. At Consultant level, they amount to 46% of all positions. BME junior Doctors account for 55% of all such positions. Numbers are less at other Medical pay bands. There is a low record of 'not stated' in the medical domains, which adds to accuracy of data analysis.

Since the Workforce Equality Analysis Report (2011), there has been little change with regard to AFC pay grades from Band 7 to 9. 'White British' across this range averages at 95%. 'Black British' at band 8c and 'Mixed race any other background' in band 8b at 5% respectively, are statistically significant. At band 7, the BME groups account for just over 6% of the total in this pay banding.

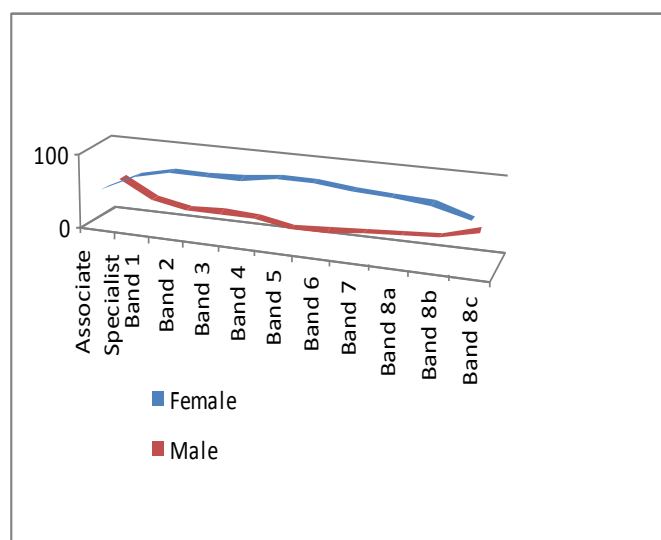
In terms of BME representation of staff in leadership roles in CoCH, Medical positions remain the strongest example, although across leadership posts within bands 7-9, the workforce is on average representative of the wider BME population of Cheshire West and Chester, which is 5.3% (1).

(1) ONS National Census 2011; Source - DORIC Local Authority interim overview profiles [DORIC Online](#) (Dec. 2012)

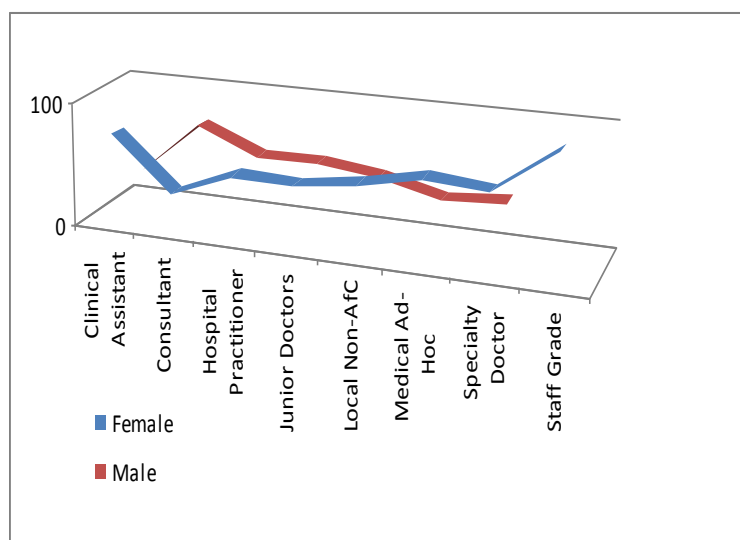
Gender

Pay Grade	Female	Male
Associate Specialist	50.00%	50.00%
Band 1	73.14%	26.86%
Band 2	82.78%	17.22%
Band 3	81.13%	18.87%
Band 4	83.33%	16.67%
Band 5	90.07%	9.93%
Band 6	89.30%	10.70%
Band 7	84.53%	15.47%
Band 8a	81.08%	18.92%
Band 8b	77.78%	22.22%
Band 8c	65.00%	35.00%
Clinical Assistant	73.08%	26.92%
Consultant	29.73%	70.27%
Hospital Practitioner	50.00%	50.00%
Junior Doctors	48.96%	51.04%
Local Non-AfC	55.56%	44.44%
Medical Ad-Hoc	66.67%	33.33%
Specialty Doctor	62.96%	37.04%
Staff Grade	100.00%	-

Non-Medical pay bands



Medical pay bands



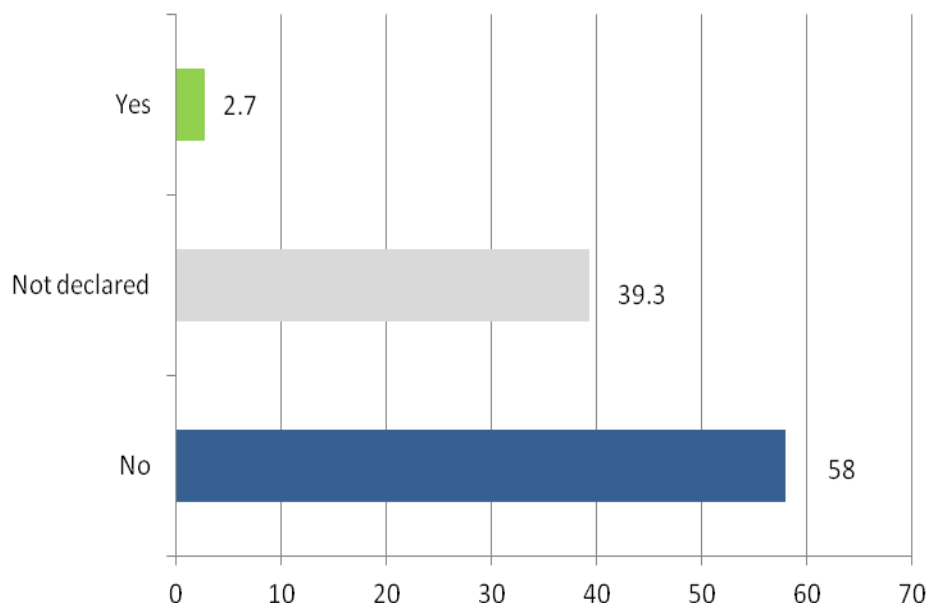
Like in 2011, women account for just over 81% of the workforce. This percentage is slightly higher in AFC pay bands 5 up to 8a at an average 86%. In pay band 1, men represent approximately 27% of this pay banding in the workforce. There is also a slightly higher male representation in bands 8b and 8c (average 28%), although the number of posts is fewer than in pay bands 6 to 8a. Overall with regard to non medical leadership positions, women in the CoCH workforce represent more than the local female population for Cheshire West and Chester, which is recorded at 51.3% (1)

In medical staffing, men account for 70% of all Consultant positions. Women are more represented at other medical pay bands accounting for around 55% of total posts (excluding Consultants) across this range.

(1) ONS National Census 2011; Source - DORIC Local Authority interim overview profiles [DORIC Online](#) (Dec. 2012)

Disability

Disability Status



In 2012, the Countess initiated a phased ESR refresh of staff personal details, which was staggered across the divisions and directorates through different times in the year. Supportive information was also included, to promote greater self-declaration and an explanation as to why it is important to gain a more accurate picture of the make-up of the workforce, from an equality and human rights perspective.

Consequently, the number of staff in CoCH who have declared their disability status amounts to 60%. This is a very significant increase on the 2011 record, which was a very low figure at only 18.5% of the total workforce. 58% of staff stated that they are not disabled. Despite there being a welcomed 50% reduction in the undeclared status of the workforce, the percentage of staff who did not indicate their disability status which thereby affects the overall accuracy of analysis of the staff disability profile, amounts to just under 40%.

2.7% of staff declared that they are disabled. Across the pay bands the highest percentage of any pay band was at band 8c, where disability was declared by 10% of post holders. However, this is a relatively small number of posts in total. At pay band 3, the number declaring disability status was just under 6%. The percentage of disabled people living in West Cheshire and Chester is estimated at 14% (1), although the percentage of people living in West Cheshire and Chester claiming disability living allowance is assessed as 5.5% of the total population (2).

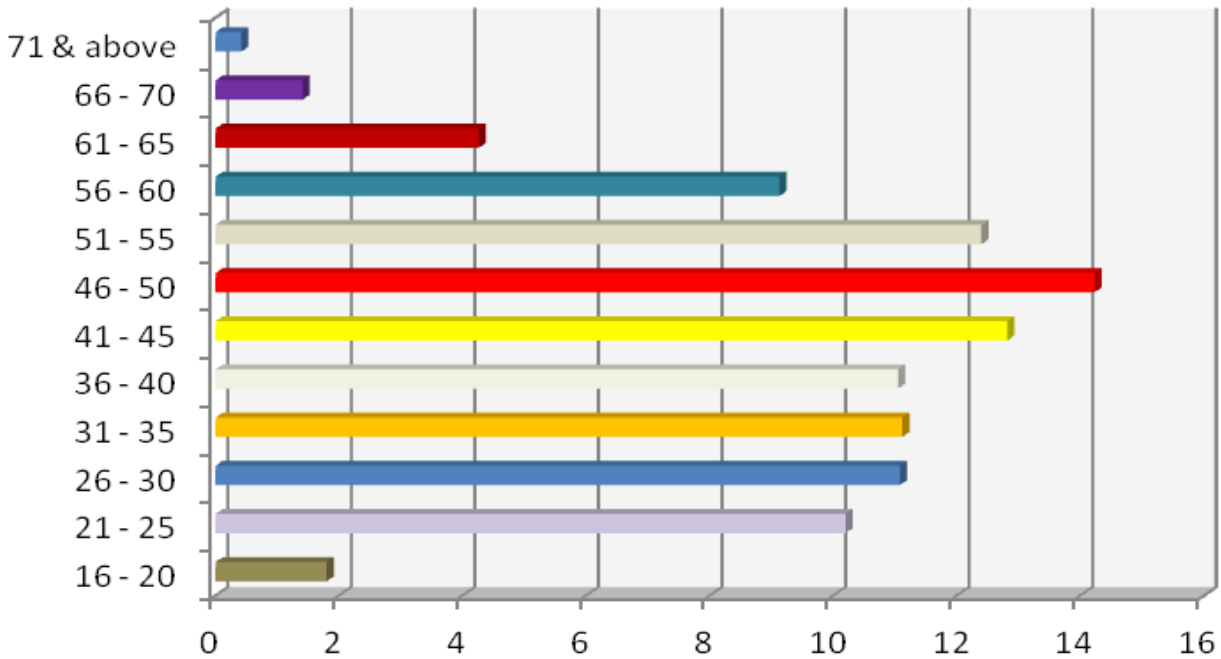
As indicated in the 2011 workforce equality analysis, staff declaration of disability status across the NHS remains low in relation to many of the other protected characteristics, as evidenced in the National ESR database. The Trust has demonstrated that it has taken positive steps in 2012, with regard to improving the accuracy of the profile of staff disability status. Such endeavours along with inclusive staff engagement and the new Health and Wellbeing forums, may assist CoCH in meeting its obligations to engage and involve disabled staff, to pay due regard to the general duty of the equality Act 2010. CoCH has an inclusive disability equality sub group, with representatives from many local external disability organisations within its cohort and a robust disability equality policy, with extensive guidance on making reasonable adjustments for disabled employees. In 2012, CoCH retained the 'Two Ticks' symbol accreditation for commitments to disabled people.

(1) West Cheshire & Chester disability profile; [Neighbourhood statistics.gov.uk](http://Neighbourhood.statistics.gov.uk), (August 2010)

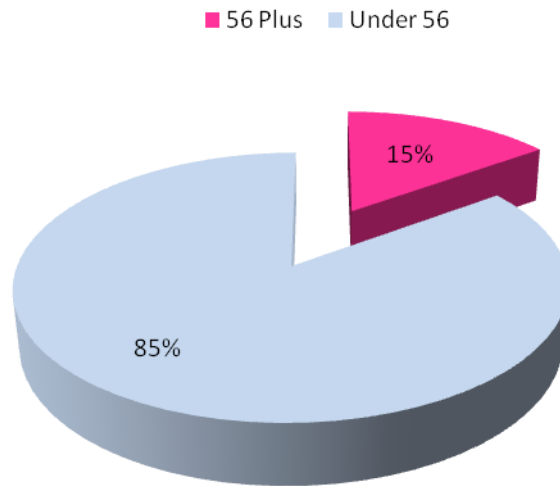
(2) ONS National Census 2011; Source - DORIC Local Authority interim overview profiles DORIC Online (Dec. 2012)

Age

Age group by percentage



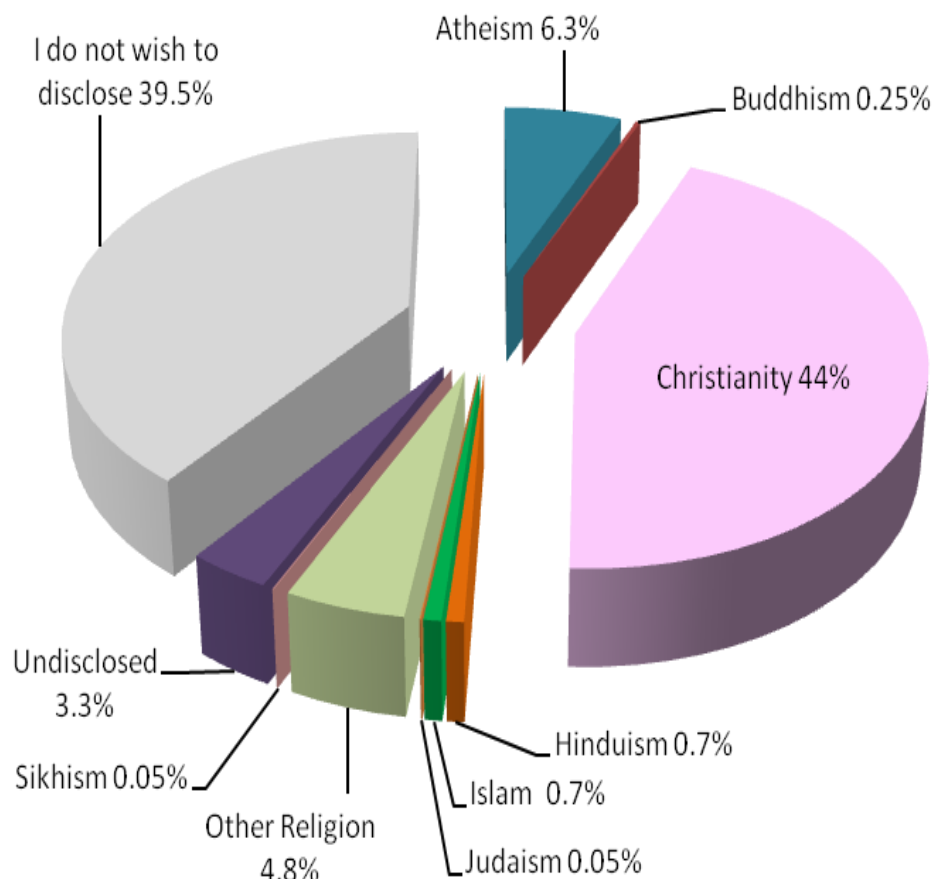
As in 2011, the age group representing the highest percentage is age band 46 to 50 years which is recorded at approximately 14%. Age band 16 to 20 years has increased by 80% on 2011 but remains as one of the lowest. There are no other significant changes. The percentage for employees aged 40 years and older remains at a similar figure to the 2011 record, at just over half, at 54.5%.



Staff aged 56 years and over account for 15% of the total workforce, an increase of just 2%. The repeal of default retirement age of 65 in the public sector (2011) (1) indicates that workforce analysts should bear this in mind and there is a likelihood of increase within this age group in the coming years. Given the accepted link between age and acquired disability, the Trust will be guided by its disability equality policy in assessing reasonable adjustments for disabled employees.

(1) Employment Equality (Repeal of Retirement Age Provisions) Regulations (2011)

Religion or Belief



The phased ESR update programme (see page 12) has also resulted in much improved data quality returns for religion or belief across the workforce this year. In 2011, the *known status* for any religion or belief was set at just 28%. Such a figure could not provide assurance of accuracy in this domain. However, in 2012 this has improved to account for 57%, which is double the figure for 2011.

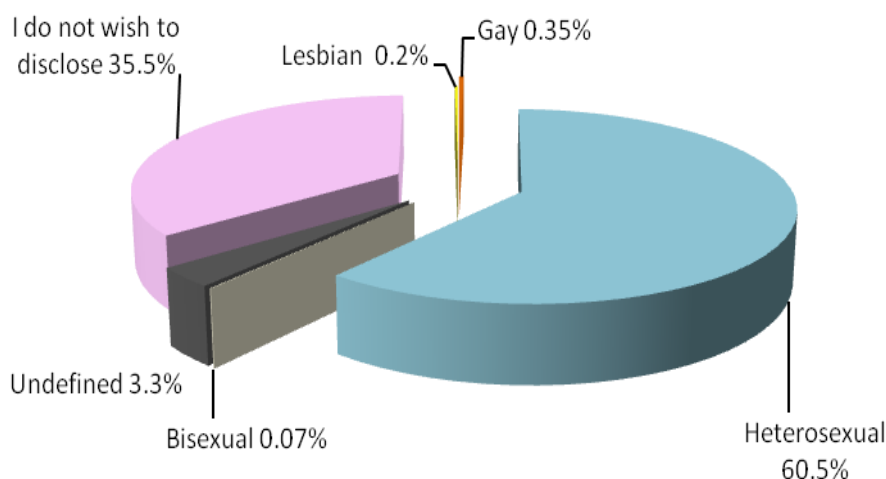
'*Christianity*' is the predominant religion or belief at 44%. '*Atheism*' is recorded at 6.3% and '*Other religion*' at 4.8%. The figure for Cheshire West and Chester is '*Christianity*' at 70%, with '*No religion*' at 22% and '*not stated*' 6.5%. ⁽¹⁾

A key dynamic from the ESR refresh in 2012 reveals that the number of staff stating they *did not wish to disclose* their religion or belief has risen from 25% in 2011, up to 39.5% in 2012. Clearly, staff have an opinion on how comfortable they feel declaring their religion or belief. The undisclosed /not stated category has fallen dramatically, however, from a very high 48% of the total workforce in 2011, down to only 3.3% in 2012 record.

As in the disability domain, the Trust's efforts to identify the make-up of its workforce across the protected characteristics can demonstrate positive results and increased confidence from a higher number of its workforce, with regard to the disclosure of personal information.

(1) ONS National Census 2011; Source - DORIC Local Authority interim overview profiles [DORIC Online](#) (Dec. 2012)

Sexual Orientation



The *known status* with regard to sexual orientation in 2011 was just 32% of the total workforce. This figure has improved to rise to 61% in 2012, almost twice as high as the previous year. The phased ESR update and accompanying rationale has brought about improvements in what is the final target group from the protected characteristic spectrum. This is also an equality objective for the Trust.

The highest sexual orientation declared is '*heterosexual*' at 60.5%, up from 31.5% in 2011. Combined percentages for staff identifying as '*lesbian*', '*gay*' and '*bisexual*' (LGB) amounted to almost the same figure as in 2011, at 0.6%. The national estimation for people identifying as LGB is between 5-7% (1). There are no population census records for the Local Authority domain and the national 2011 ONS census did not ask for sexual orientation status.

Whilst '*undefined*' sexual orientation status was reduced from 48% in 2011 down to only 3.3%, there was a similar rise in the category for staff who '*did not want to disclose*', as was seen with regard to '*religion or belief*'. This moved from 20% in 2011 up to 35.5% in 2012. The staff have made a clear statement here, which warrants further exploration.

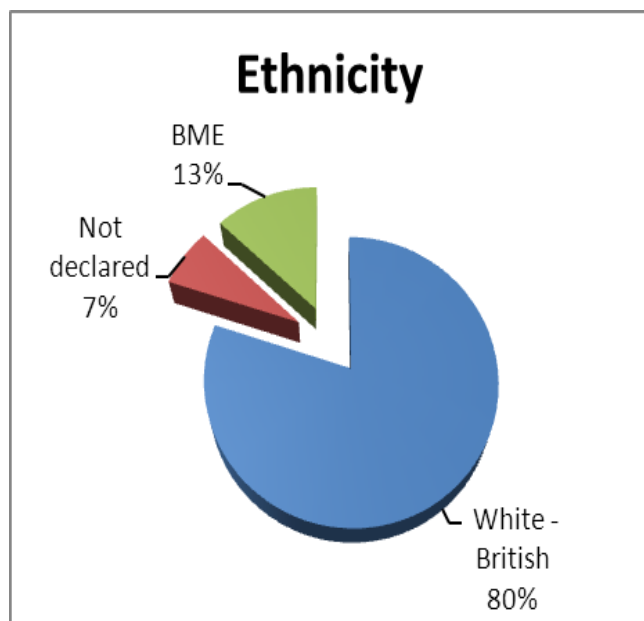
Given the extended duties around the equality Act 2010 outlined in the general duty (April 2011), CoCH should aim to attain a more accurate representation across sexual orientation, although this seems contrary to the perspectives of a third of the current workforce at this point in time.

Alternative options such as periodic anonymous self-declaration methods may be explored but would require an element of assurance to participants, as to what such an approach would be looking to achieve. The Trust has recently co-formed a multi-agency LGBT steering group called Chester Lion's Pride and has established partnership working with a regional LGBT community organisation 'Encompass LGBT', since January 2012. It is initialising an application for accreditation under the Navajo LGBT charter mark in 2013 and will work with the 3rd sector and the internal sex, gender reassignment and sexual orientation equality group at the Countess, in order to look into this area over the next twelve months.

(1) Government LGB population estimates; Stonewall.org.uk (2011)

Section two Workforce dynamics

Starters (1)

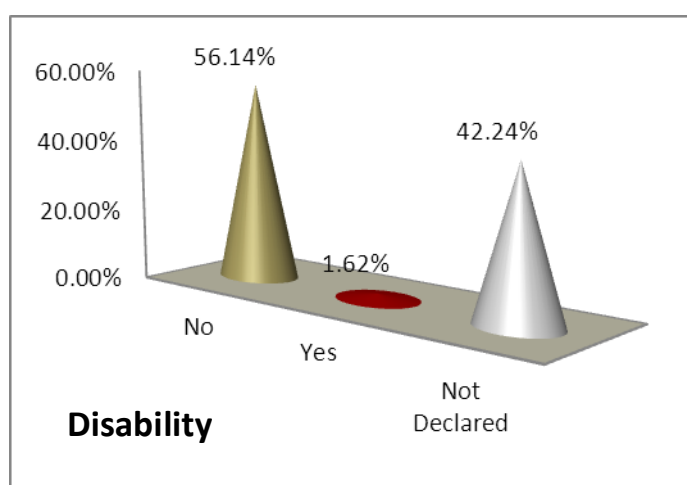


Age Band	%
16 - 20	9.45%
21 - 25	24.43%
26 - 30	15.38%
31 - 35	13.36%
36 - 40	9.99%
41 - 45	8.10%
46 - 50	8.23%
51 - 55	5.67%
56 - 60	2.83%
61 - 65	1.89%
66 - 70	0.40%
71 & above	0.27%

There is about a 90% improvement in the number of new starters who declared their ethnic status, resulting in 'not declared' falling down to just 7% from the 13% return in 2011. This is a direct result of amendments made to the new starters pro forma, which came from a recommendation of the 2011 workforce equality analysis report (WEAR). 13% of new starters were BME which is higher than the established total of 8.5%.

Significant numbers of new starters with regard to age were found in age bands 16-20 and 21-25, amounting to 33% of the total for 2012. In the staff establishment, these two bands account for only 12% of the workforce (p13).

There is a similar pattern to the starters with regard to self-declaration of sexual orientation as was found in the 2011 WEAR. LGB staff starters just over represented 1% and heterosexuals 58%. As was found in the whole workforce ESR refresh in 2012, over a third of new starters opted not to disclose their sexual orientation.

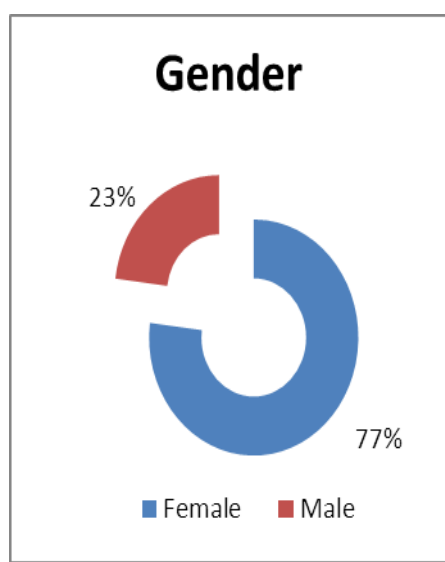


Sexual Orientation	%
Bisexual	0.13%
Gay	0.54%
Heterosexual	57.76%
I do not wish to disclose	39.00%
Lesbian	0.40%
Not Declared	2.16%

(1) The time period indicated is for 2012. Unlike other data sets outlined in this equality analysis, figures for 'Starters' and 'leavers' may not match up, due to varied factors and workforce dynamics

Starters (1)

Known disability status for new starters improved on the 2011 figures, with not declared falling by about 20%. This may have informed the roughly 20% rise in new starters who declared that they do not have a disability. There was very marginal increase on disabled new starters in 2012.



Pay Grade	Headcount%
Band 1	6.88%
Band 2	43.59%
Band 3	4.18%
Band 4	2.56%
Band 5	21.73%
Band 6	4.18%
Band 7	2.16%
Band 8a	0.13%
Band 8b	0.27%
Band 8c	0.40%
Clinical Assistant	0.54%
Consultant	4.05%
Junior Doctors	7.69%
Local Grade	0.67%
Specialty Doctor	0.94%

Religion or Belief	%
Atheism	8.50%
Buddhism	0.40%
Christianity	37.52%
Hinduism	1.35%
I do not wish to disclose	42.11%
Islam	1.35%
Other	6.61%
Not Declared	2.16%

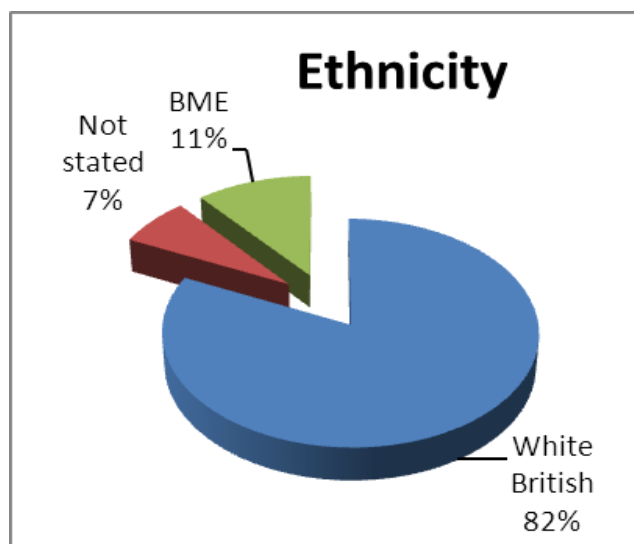
In terms of gender, the new starter male starter ratio is significantly higher than the total workforce at 23% compared to 19%. The figure for 2011 was male at 21% of new starters. Women accounted for 77% of all starters.

The number of starters who recorded '*Christianity*' as their religion or belief remained at a similar record to 2011. This was the highest count for any religion or belief category. *Atheists* increased in 2012 by about 20% to 8.5%. Non-disclosure by choice of religion or belief was reduced from the 2011 data but nonetheless amounted to 42%. There was a slight increase in the number of starters who stated other religion, as their belief system (6.6%).

The number of new starters at band 2 was much higher than in 2011. 85% of these new employees were women. In pay band one new starters, the figure decreasing by just over a half from the 2011 records. Men accounted for 37% of this cohort, compared to the whole workforce 2012 record. 90% of all starters at band 5 were women.

(1) The time period indicated is for 2012. Unlike other data sets outlined in this equality analysis, figures for 'Starters' and 'leavers' may not match up, due to varied factors and workforce dynamics

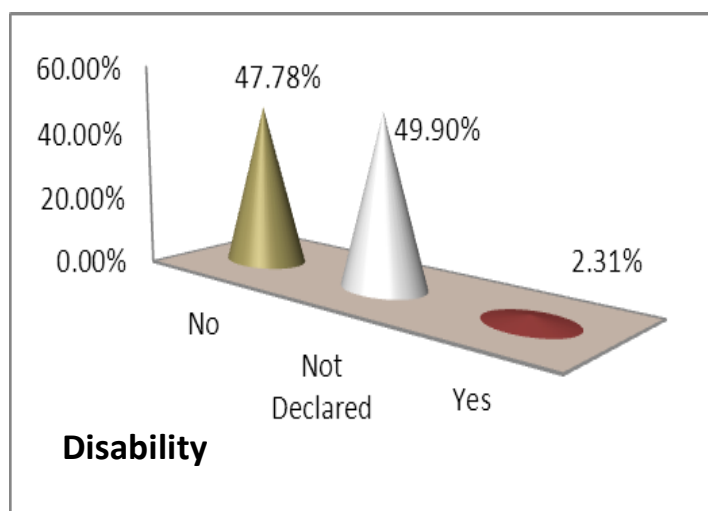
Leavers (1)



Age Band	%
16 - 20	2.12%
21 - 25	16.57%
26 - 30	15.61%
31 - 35	12.91%
36 - 40	9.44%
41 - 45	8.29%
46 - 50	9.06%
51 - 55	8.29%
56 - 60	9.06%
61 - 65	7.51%
66 - 70	0.96%
71 & above	0.19%

Most leavers in 2011 came from the 'White British' ethnic field recorded at 82%. A reduced figure from the 2011 WEAR was in evidence with regard to the percentage of BME leavers in 2012 (11%). There was no change in the *not stated* category.

The highest age group leavers were the 21-25, 26-30 and 31-35 years age bands, amounting to about 44% of the total. In contrast the number of new starters for these combined age bands amounted to 52%. In the 2011 WEAR, it was suggested that in light of the amendments in the Employment Equality (Repeal of Retirement Age Provisions) Regulations (2011), that leavers from the age bands 60 years and over be compared in this year's analysis. In 2011, the number of leavers for the combined age bands 61-65, 66-70 and 70 years and above amounted to 12.5% of the total amount. In 2012, there has been a significant reduction in the number of staff leaving within this combined age range leading to the figure of 8.5%, an approximate 25% decrease. It can thereby be demonstrated that the Countess is adhering to age equality legislation.



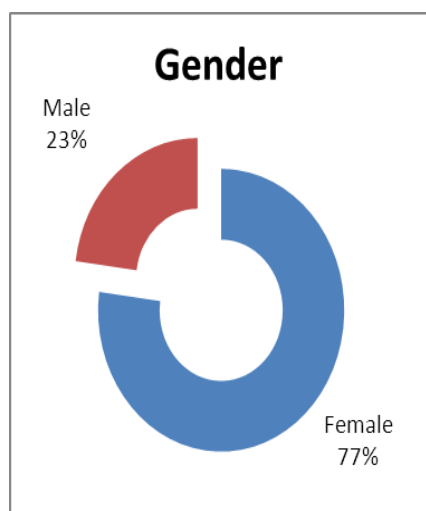
Sexual Orientation	%
Bisexual	0.39%
Gay	0.19%
Heterosexual	52.60%
I do not wish to disclose	41.04%
Lesbian	0.58%
Not Declared	5.20%

The number of leavers who did not state their disability has reduced from 80% in 2011 down to 50% in 2012. Disabled leavers amounted to 2% and staff who stated that they do not have a disability accounted for 48%, which was up from only 18% in 2011.

(1) The time period indicated is for 2012. Unlike other data sets outlined in this equality analysis, figures for 'Starters' and 'leavers' may not match up, due to varied factors and workforce dynamics

Leavers (1)

In 2011, there was no data identifying as *Lesbian, Gay* or *Bisexual (LGB)* in the leavers' figures, due in part to the high number of not stated in the total amount of 70%. In 2012, LGB leavers accounted for about 1%. *Heterosexual* leavers represented just over half of all leavers. Approximately 41 % of leavers stated that they *did not want to disclose* their sexual orientation, an increase on the 2011 figure of 24%. Conversely, the *not stated* field fell from its 2011 record of 47% down to only 5%. This year's WEAR has revealed a pattern of a big reduction in the *not stated* category and an increase in the '*prefer not to disclose*' sexual orientation status.



Pay Grade	Headcount %
Band 1	5.97%
Band 2	30.25%
Band 3	9.44%
Band 4	4.43%
Band 5	20.62%
Band 6	9.83%
Band 7	4.62%
Band 8a	1.16%
Band 8b	0.58%
Band 8c	0.39%
Clinical Assistant	0.19%
Consultant	3.08%
Junior Doctors	7.13%
Local Grade	0.77%
Specialty Doctor	1.35%
Staff Grade	0.19%

Religion or Belief	%
Atheism	7.13%
Buddhism	0.19%
Christianity	34.68%
Hinduism	1.54%
I do not wish to disclose	44.70%
Islam	1.16%
Other	5.39%
Not Declared	5.20%

There was little change with regard to the proportion of men and women who left the Trust in 2012. There was an improvement in the amount of stated religion or belief categories in 2012 leavers. The previous 2011 combined unknown status total was 77%. This has fallen in 2012 and amounted to just under 50%. With regard to religion or belief, *Christianity* remained the highest declared belief system at 35%. *Atheism* is next highest on 7%, moving up from the 1.5% figure for 2011. There is little variance on the leavers by pay band between 2011 and 2012.

(1) The time period indicated is for 2012. Unlike other data sets outlined in this equality analysis, figures for 'Starters' and 'leavers' may not match up, due to varied factors and workforce dynamics

Recruitment

	Applications %	Shortlisted %
Age Under 20	3.48%	3.34%
Age 20-24	21.61%	20.54%
Age 25-29	21.60%	16.88%
Age 30-34	14.98%	14.23%
Age 35-39	10.06%	10.29%
Age 40-44	9.56%	11.57%
Age 45-49	8.62%	10.89%
Age 50-54	6.19%	7.41%
Age 55-59	3.04%	3.66%
Age 60-64	0.71%	0.91%
Age 65-69	0.14%	0.23%
Age 70+	0.03%	0.05%

Ethnicity	Applications %	Shortlisted %
WHITE - British	65.49%	81.29%
WHITE - Irish	1.00%	1.46%
WHITE - Any other white background	6.23%	3.89%
ASIAN or ASIAN BRITISH - Indian	7.66%	4.35%
ASIAN or ASIAN BRITISH - Pakistani	5.34%	1.46%
ASIAN or ASIAN BRITISH - Bangladeshi	0.68%	0.37%
ASIAN or ASIAN BRITISH - Any other Asian background	2.54%	1.19%
MIXED - White & Black Caribbean	0.28%	0.55%
MIXED - White & Black African	0.70%	0.50%
MIXED - White & Asian	0.50%	0.14%
MIXED - any other mixed background	0.46%	0.32%
Age Band	0.26%	0.18%
BLACK or BLACK BRITISH - Caribbean		
BLACK or BLACK BRITISH - African	5.00%	1.78%
BLACK or BLACK BRITISH - Any other black background	0.31%	0.23%
OTHER ETHNIC GROUP - Chinese	0.47%	0.27%
OTHER ETHNIC GROUP - Any other ethnic group	2.05%	1.60%
Undisclosed	1.03%	0.41%

Disabled Person	Applications %	Shortlisted %
Yes	4.75%	4.21%
No	94.61%	95.20%
Undisclosed	0.64%	0.59%

Religious Belief	Applications %	Shortlisted %
Atheism	9.89%	12.53%
Buddhism	1.02%	0.73%
Christianity	57.90%	62.95%
Hinduism	4.49%	2.33%
Islam	10.12%	3.34%
Jainism	0.12%	0.00%
Judaism	0.05%	0.00%
Sikhism	0.45%	0.37%
Other	8.86%	10.16%
Undisclosed	7.10%	7.59%

Sexual Orientation	Applications %	Shortlisted %
Lesbian	0.38%	0.55%
Gay	0.92%	0.96%
Bisexual	0.70%	0.59%
Heterosexual	92.47%	93.60%
Undisclosed	5.52%	4.30%

Gender	Applicants %	Shortlisted %
Male	34.16%	23.97%
Female	65.77%	75.89%
Undisclosed	0.07%	0.14%

In proportion to applications, both ‘disabled’ and ‘non-disabled’ were equally shortlisted in 2012. The Trust regained its ‘two ticks’ accreditation and is seen demonstrating how it is meeting disability equality obligations. With regard to *religion or belief*, most applicants declared their status, amounting to 93% of all applicants. Those identifying as ‘Atheist’ and ‘Christian’ had the highest likelihood of being shortlisted in 2012. As in 2011, men were slightly less likely than women to be shortlisted in 2012.

The percentage of applicants from across the sexual orientation categories, were all shortlisted in proportion. Like in 2011, applications from people aged 40+ onwards were slightly more likely to be shortlisted than those from other age bands, although most age bands were shortlisted in proportion to applications. The Trust can once more demonstrate that there is no age discrimination in recruitment. ‘White British’ and ‘White Irish’ were more likely to be shortlisted than other ethnic groups. However, the number of BME applicants amounted to just over 19% of the total number of shortlisted candidates. This figure is twice as high as the total BME staff cohort in the established workforce (8.5%). Given that equality fields other than disability (1) are not known by those shortlisting, there is no evidence of any form of discriminatory conduct with regard to recruitment in any of the protected groups but there is positive evidence in the area of meeting disability equality duty.

(1) Disabled applicants are identified where *reasonable adjustments* for interviews are required, although disabled applicants need not disclose a disability before an offer of employment

Promotions

Religion or Belief	Total
Atheism	8.94%
Christianity	54.47%
I do not wish to disclose	26.02%
Other	8.13%
Sikhism	0.81%
Not Declared	1.63%

Age Band	Total
16-19	0.81%
20-29	23.58%
30-39	35.77%
40-49	26.83%
50-54	8.13%
55-60	4.88%

Sexual Orientation	Total
Gay	0.81%
Heterosexual	78.86%
I do not wish to disclose	17.89%
Lesbian	0.81%
Not Declared	1.63%

Disabled	Total
No	74.80%
Not Declared	23.58%
Yes	1.63%

Gender	Total
Female	77.24%
Male	22.76%

Ethnic Origin	Total
White British	85%
Not stated	3%
BME	12%

BME staff were well represented in promotions in 2012, when in 2011 they accounted for just 5%. The 12% BME staff total promoted in 2012 compares favourably with the establishment total of 8.5%. Most promotions in the age spectrum were in evidence in bands 20-29, 30-39 and 40-49, collectively totalling 86% of all promotions.

Staff identifying as *Lesbian* and *Gay* in the promotion figures amounted to 1.6% of the total which is higher than the 0.6% figure in the whole workforce establishment record. Disabled staff in promotions increased from 0.7% in 2011 up to 1.6% in 2012.

The promotions section is included in most public sector agency workforce equality reports. With regard to the NHS and NHS Jobs frameworks, it is not an accurate field when seen in isolation. Numbers of opportunities for 'promotion' are low in comparison to other public sector agencies. Many staff will have to apply via the NHS jobs portal for positions and higher AFC bandings in the Trust.

Formal Procedures

Disciplinary			
		Age Band	
Gender		20-29	16.67%
Female	79.17%	26-30	4.17%
Male	20.83%	30-39	12.50%
		40-49	29.17%
Disability		41-45	8.33%
No	45.83%	50-54	16.67%
Not Declared	41.67%	55-60	8.33%
Yes	12.50%	61-65	4.17%
Religion / Belief		Sexual Orientation	
Atheism	4.17%	Heterosexual	62.50%
Christianity	58.33%	I do not wish to disclose	33.33%
I do not wish to disclose	29.17%	Not Known	4.17%
Not Known	4.17%		
Other	4.17%	Ethnicity	
		White British	95.83%
		Any mixed race	4.17%

Bullying & Harassment		%
Gender *		
Disability	Not Declared	100%
Ethnicity	White - British	100%
Religious Belief	Not Known	100%
Sexual Orientation	Not Known	100%
Age Band *		100%
* Figure withheld due to low number of cases		

Disciplinary – Men were represented slightly higher than women. There were no LGB employees who fell within this category, although 39% of the workforce has not declared their sexual orientation. With regard to age and religion or belief, the percentages falling under disciplinary procedures are similar to those found in the workforce profile, apart from *Christianity* and *age band 20-29* which were slightly higher. There was a higher than anticipated number of disabled employees falling under these procedures at 12.5%. The number of staff in the total profile was recorded at 2.7%, with 39% of staff not declaring their disability status. However, with regard to *ethnicity*, the number of BME staff in disciplinary procedures was just 4%, when compared to the overall workforce profile of 8.5%. None of the reasons for employees falling under the disciplinary proceedings in 2012 were related to the protected characteristics or allegations of discriminatory conduct.

Bullying & Harassment – There was only one instance of invocation of the bullying and harassment policy noted in 2012. There were only four in 2011. This is very low, indicating the Countess has positive policies and procedures for protecting staff from protected characteristics. The NHS survey 2011 indicated that 16% of staff indicated anonymously they felt they had experienced bullying and harassment at work, which was the same as the national NHS Acute Trust average (Source KF 26; NHS Staff Survey 2011).

Grievances			
Gender		Age Band	
Female	50%	20-29	16.67%
Male	50%	30-39	16.67%
		40-49	16.67%
Disability		41-45	16.67%
No	50.00%	50-54	16.67%
Not Declared	33.33%	55-60	16.67%
Yes	16.67%		
		Ethnicity	
Sexual Orientation		White - British	100%
Gay	16.67%		
Heterosexual	33.33%	Religion / Belief	
I do not wish to disclose	50.00%	Christianity	50%
		I do not wish to disclose	50%

Performance			
		Age Band	
Disability		20-29	15.79%
No	42.11%	30-39	5.26%
Not Declared	47.37%	40-49	21.05%
Yes	10.53%	50-54	21.05%
		51-55	10.53%
Gender		55-60	26.32%
Female	68.42%		
Male	31.58%	Ethnicity	
		White - British	94.74%
Religious Belief		Any mixed race	5.26%
Atheism	10.53%		
Christianity	36.84%	Sexual Orientation	
I do not wish to disclose	26.32%	Heterosexual	63.16%
Not Known	10.53%	I do not wish to disclose	26.32%
Other religion	15.79%	Undisclosed	10.53%

Grievances – The total number of individual or collective grievances in 2012 was 17. The protected characteristic of any person who brings forward a grievance does not indicate that the reason for raising a grievance is based upon for example the sex or ethnicity of the individual or collective concerned. In 2012, none of the grievances were brought forward relating to disability, race, sex or any other alleged discrimination or intolerance relating to the protected characteristics. Disabled staff who invoked the grievance procedure amounted to 16%. Men represented 50% in this category although they account for only 19% of the workforce. Gay men accounted for 16% and grievances were brought forward in equal number across the age bands. With regard to ethnicity, all staff who brought forward a grievance at some stage were *White British*.

Performance – The number of staff coming within performance management amounted to 19 in 2012. Of these only 36% went beyond informal procedures such as counselling or warnings. This information should be considered when looking at the overall picture for performance and the equality make-up of the total for this category. Disabled staff were recorded at 10% of the total performance results. There were no staff identifying as LGB within this cohort. BME staff accounted for just 5% compared to 8.5% in the full workforce profile. Men were more likely than women to be represented at 37%, when compared to 19% in the main workforce profile. No other significant dynamics are in evidence for this category.

Staff Survey

KF 7 Trust commitment to work-life balance (Higher rating = better)	
CoCH	National NHS Acute average
3.42	3.36

KF 28 Impact of health and well-being on ability to perform work or daily activities (Lower rating = better)	
CoCH	National NHS Acute average
1.49	1.56

KF 33 Staff intention to leave jobs (Lower rating = better)	
CoCH	National NHS Acute average
2.50	2.59

KF 34 Staff recommendation of the trust as a place to work or receive treatment (Higher rating = better)	
CoCH	National NHS Acute average
3.65	3.50

KF 37 Percentage of staff believing the trust provides equal opportunities for career progression or promotion	
CoCH	National NHS Acute average
90%	90%

KF 38 Percentage of staff experiencing discrimination at work in last 12 months	
CoCH	National NHS Acute average
12%	13%

The Staff survey results indicate that policies support staff within the workplace. Significant numbers of survey respondents indicate that they would recommend the Trust as a place to work and the number of staff who stated an intention to leave work is lower than the national average for NHS Acute Trusts. Other positive results relate to how the Trust support staff in the work life balance domain and on the area as to where health and well-being have an adverse impact on their ability to work or undertake daily activities. The Trust has a robust disability equality policy with a comprehensive reasonable adjustments guide and toolkit. 12% of staff respondents in the survey alleged they had experienced discrimination in 2011, which is below the national NHS Acute Trust average. The 12% alleging discrimination on the grounds of a particular protected characteristic are:

Ethnicity 2% (NHS 3%),
Age 2% (NHS 2%),

Sex 2% (NHS 2%),
Other protected Characteristic 0%,

Disability 1% (NHS 1%),
Other reason 5%, (NHS 4%).

6. Recommendations:

1. Where staff profiles are inaccurate and or under representative, seek interim measures to engage with partner agency staff networks and or charitable / independent organisations, where consultation and or engagement planning are indicated.
2. Ensure that there is staff representation from across the range of protected characteristics in the NHS Equality Delivery System (EDS) grading phase and in equality objective setting for the inaugural Equality strategy for 2013.
3. Ensure key findings of the Workforce Equality Analysis Report 2012 are referenced within section three of the Equality Delivery System and help inform the equality objective setting phase for the Equality strategy to be published in April 2013.
4. Continue to ensure all **reasonable adjustments** required by disabled staff fall in line with the equality Act 2010 directives.
5. Work with 3rd sector partner organisations, the culture and faith equality group and the sex, gender reassignment and sexual orientation equality group to explore the high percentage of staff who responded that they did not want to disclose their *religion or belief* and *sexual orientation status*.
6. Work through the Navajo charter mark accreditation process, ensuring that all relevant data and analysis is explored and recommendations from the initial assessment are integrated into relevant equality action plans and work streams.
7. Ensure any scheduled ESR personal details updates sent to staff include a rationale on the benefits and detriments of equality data capture
8. Facilitate events such as IDAHO, Pride, International Day for Disabled People, LGBT month, Black History month, International Women's Day, World Religions Day and Men's Health week, in order to raise awareness and promote positive relations for people who share a protected characteristic and those who do not.
9. Continue with measures employed to involve staff from across protected characteristics in Health and Wellbeing Forums, questionnaires, the EDS and research, in order to work towards greater inclusivity and engagement.