

Workforce Diversity Report

Equality & Diversity Report For the year April 2015 – March 2016

This report has been produced in line with the Trust's Equality Objectives and takes into account the reporting requirements outlined by the Equality and Human Rights Commission (Equality information and the equality duty: A guide for public authorities).

The report looks at equality and diversity data over the twelve month period 1st April 2015 to 31st March 2016. Where a snapshot of data is shown, this has been taken as at 31st March 2016. Data is for substantive staff only (permanent and fixed term assignments); bank staff records are not included.

Data has been taken from the Electronic Staff Record (ESR), NHS Jobs, NHS Staff Survey (2014) and local databases as appropriate.

Summary

This report analyses the diversity of the Trust's workforce by ethnic origin, gender and age. For each of these strands of diversity the current workforce, applicants for vacancies, shortlisted and successful applicants, starters, leavers and promotions are considered.

The report also provides information on the Trust's position for reporting on disability, sexual orientation, religion, employee relations cases and training & development.

The report also includes information on the profile of the Trust Board (Chair, Non-executive and Executive Directors) and data from the NHS Staff Survey.

Key items of note

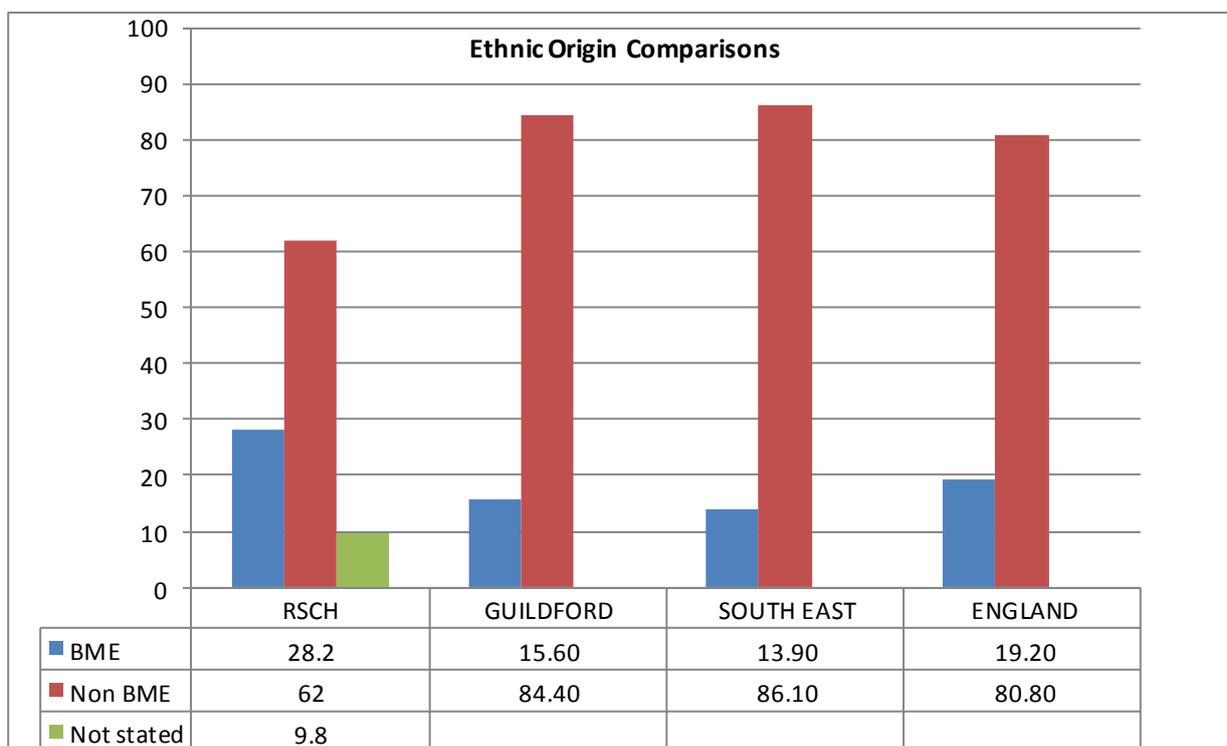
- The Trust's current workforce profile is more diverse than the local population
- BME representation has reduced slightly in comparison to previous years due to the transfer out of the housekeeping and portering staff on 31st January 2014.
- It is not possible to provide accurate Employee Relations data due to the lack of information recorded on this subject.

ETHNIC ORIGIN

Current Workforce

The Trust's current workforce profile is more diverse than the local population, with a higher proportion of BME staff compared to both Guildford and the wider South East area.

It should be noted however that demographic data of the Trust's workforce shows that only 55% of staff live within the Guildford postcode area; the higher BME representation is therefore not unexpected as staff commute from a wider geographical area to come to work.

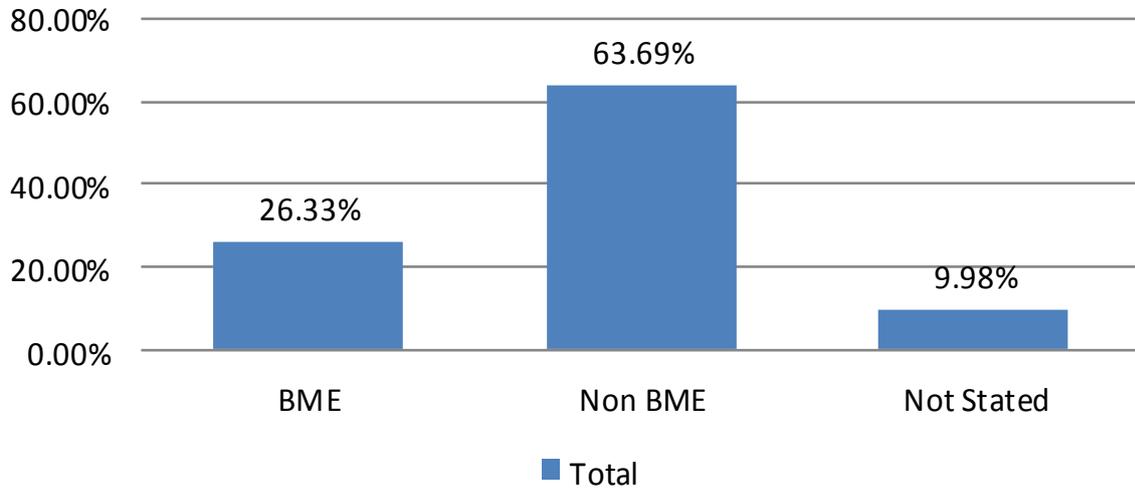


The overall Trust profile has remained broadly unchanged during the last six years; the number of BME staff employed at the Trust as a percentage of the total workforce has been between 23% and 28% since 2007. The representation has fallen slightly in comparison to previous years due to the housekeeping and portering staff transferring out of the Trust to Compass Medirest on 31st January 2014. Historically this group of staff has had a greater proportion of BME to non-BME staff.

This report shows the analysis of the Trust's workforce separately for medical and non-medical staff for some sections, as there is a significant difference in their ethnic profiles (see Table 2 & 3 below).

Specifically the analysis is separate when looking at pay band data, as Non Medical staff are subject to the national Agenda for Change pay bands and Medical staff have their own national set of pay scales.

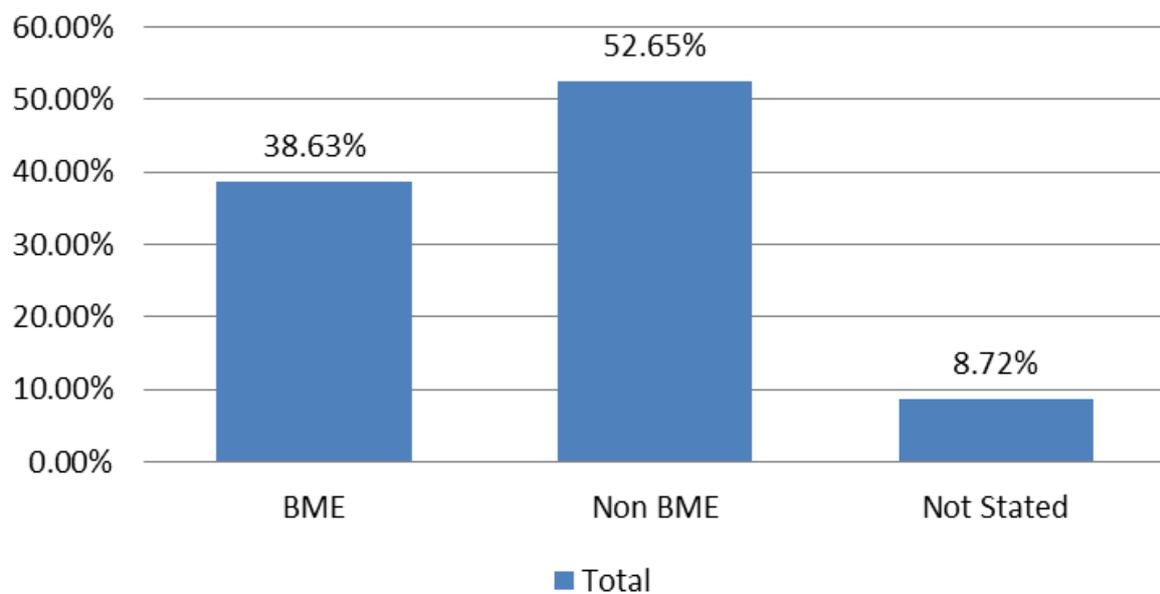
Table 2: Non Medical staff by Ethnicity



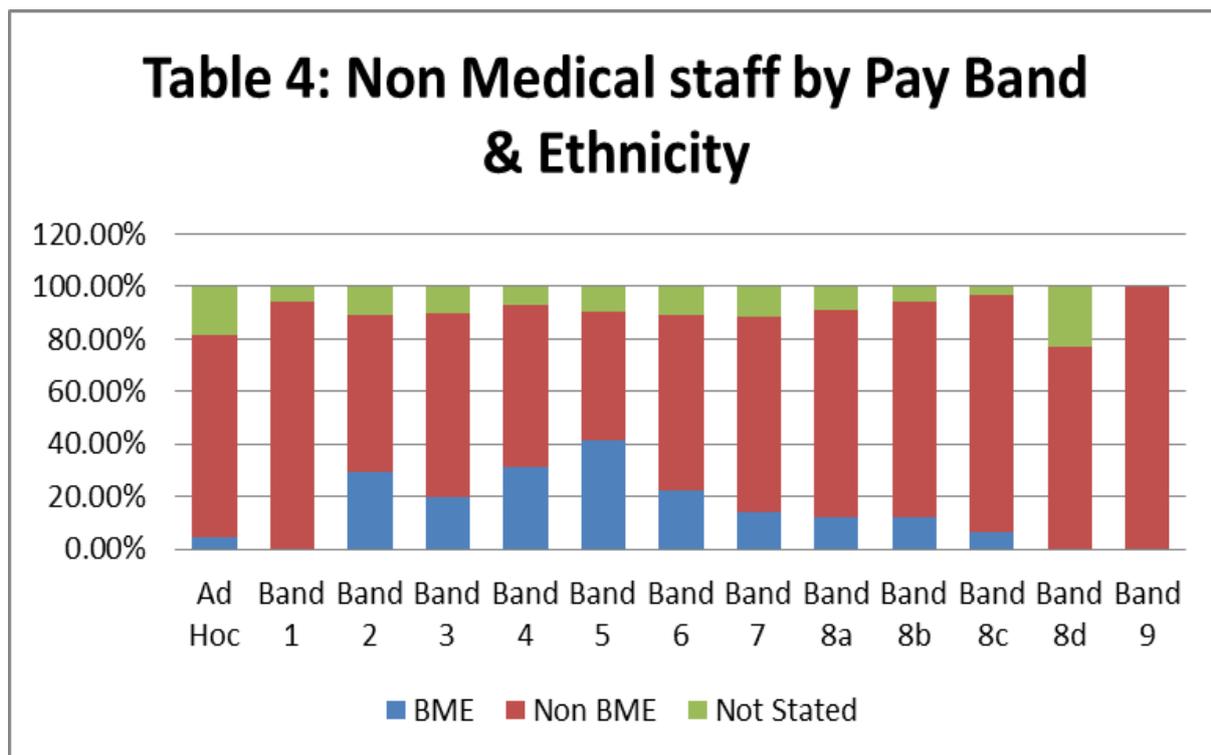
The completeness of the Trust's staff ethnicity data remains very good.

The Trust's Workforce Information team run monthly data quality checks and the completion of ethnicity data forms part of this. This enables missing data to be picked up and completed on a regular basis. The continued use of the NHS Jobs and ESR interface minimises the need to collect and input ethnicity data manually.

Table 3: Medical staff by Ethnicity

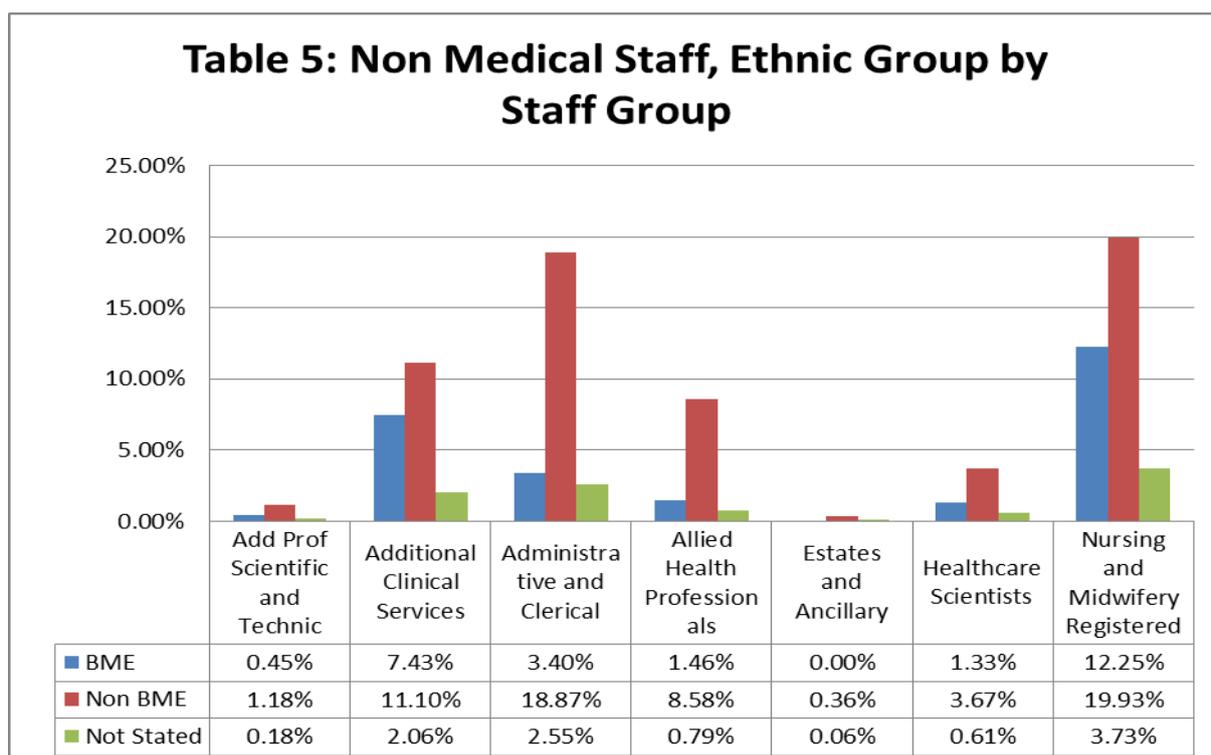


Non-medical staff by pay band



There are greater numbers of Non BME than BME staff in all pay bands across the Trust. Historically the Trust had greater numbers of BME than Non BME staff in pay band 1; these posts were predominantly housekeeping and portering staff and now that this group of staff have been transferred out of the Trust the profile has changed.

The pay bands with the highest proportion of BME staff are Band 5 with 41.57% and Band 4 with 31.16% BME representation each. Band 5 is the first pay band for registered health professionals (e.g. nurses, therapists, pharmacists, radiographers, biomedical scientists, midwives).



The profile by non-medical staff group indicates that the highest proportions of staff from ethnic minorities are employed as qualified Nurses & Midwives, followed by Additional Clinical Services and Admin & clerical.

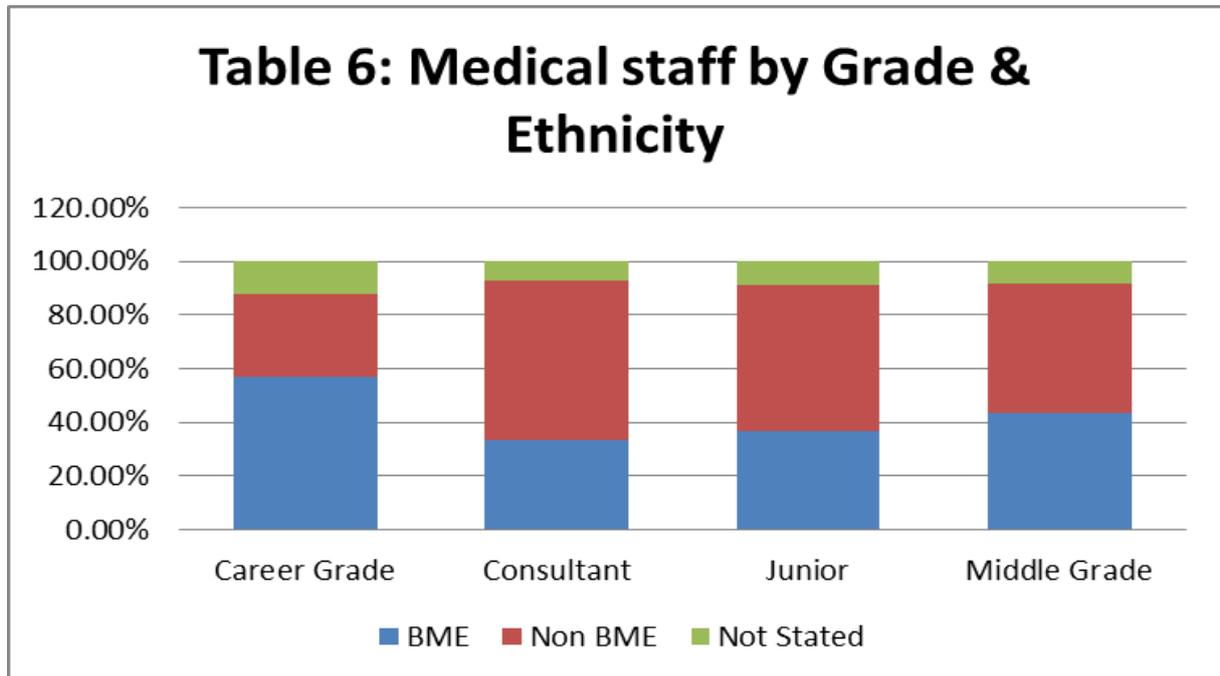


Table 6 shows the ethnicity split by grade for Medical & Dental staff. There is a fairly equal split between BME and non-BME for Juniors and Middle Grades. Consultants have a higher non-BME representation. There is a higher percentage (56.94%) of BME Career Grade Medical & Dental Staff than the number of Non-BME (30.56%).

This profile remains broadly unchanged from previous reports.

Recruitment

Table 7 below shows the proportion of applicants by ethnic group for all posts advertised on NHS Jobs, as a percentage of total applications, shortlisted and appointed. This includes both non-medical and medical job vacancies.



The proportion of BME applicants is higher than the local population and may be a product of applicants being able to apply for posts advertised on NHS Jobs from anywhere in the world; many applications are received from overseas applicants.

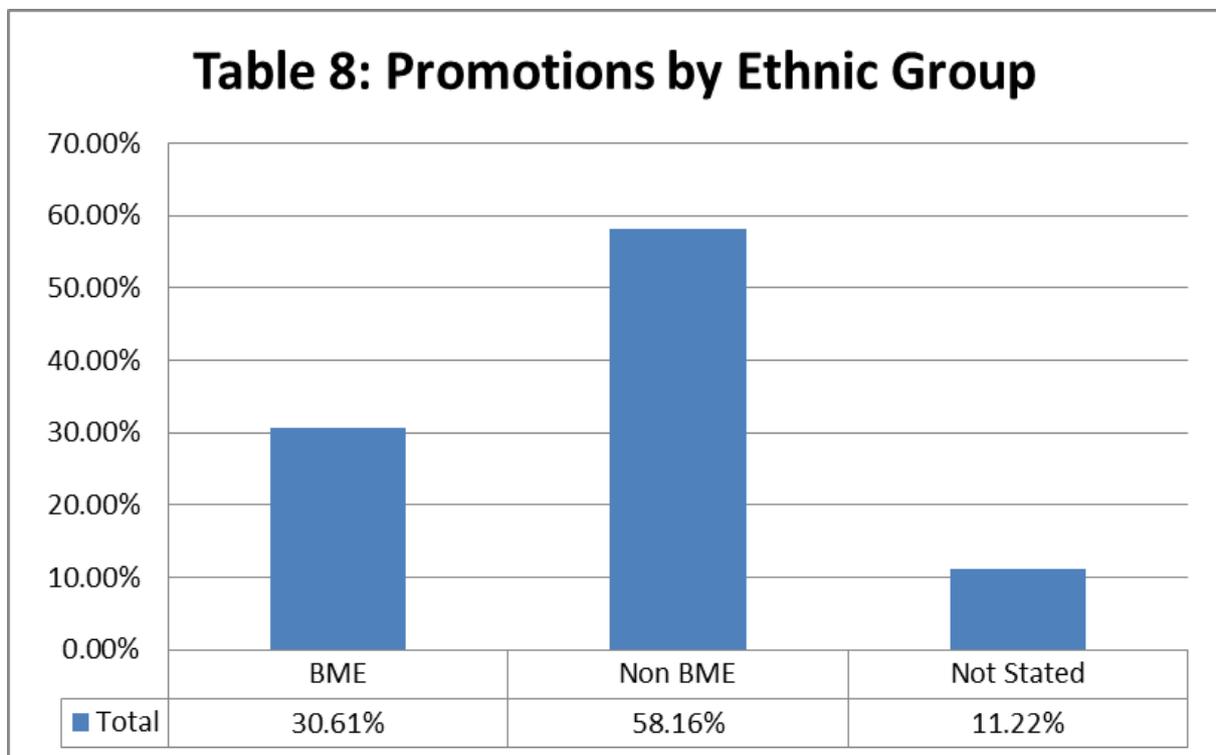
A higher percentage of applications from Non-BME groups progress to the next stages of the recruitment process, whereas overall BME groups reduce at each stage. This may be due in part to applicants from overseas that may require a work permit; for the vast majority of posts a work permit would not be granted and this may eliminate a number of BME applicants at the first stage.

The proportion of BME staff appointed is slightly lower than the overall representation in the Trust, with 27.9% appointed versus representation of 28.2%. The proportion of Non-BME staff appointed is higher at 70.6% appointed versus representation of 62%. There are small numbers of "Undisclosed" ethnic origins.

NHS Jobs is fully utilised by both the general Resourcing and Medical Resourcing teams, with the exception of the appointment of doctors in training (Foundation Years 1 & 2 and Registrars) which is managed by the KSS Deanery.

Promotions

The ethnic origin of staff promoted at the Trust is provided below.

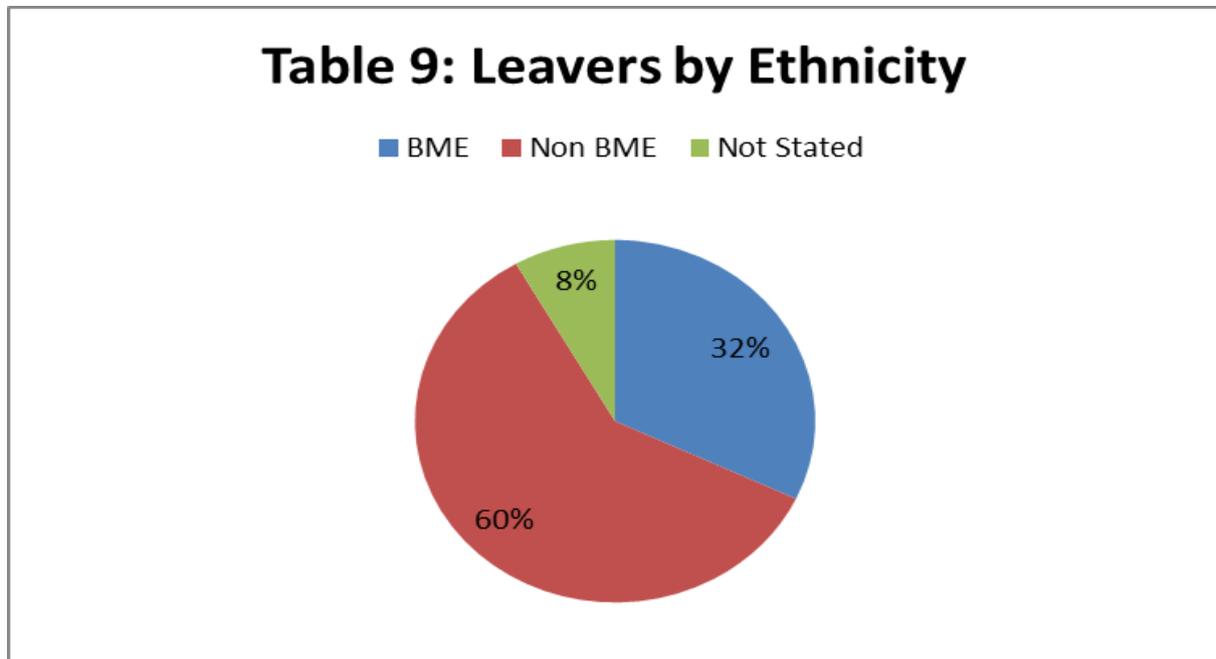


A new ESR report for monitoring data on promotions was introduced from 1st April 2011. In addition it became mandatory to complete the assignment change reason on ESR. This should enable far more accurate reporting on promotions. The promotion data above is for the period 1st April 2015 to 31st March 2016.

Leavers

There were 824 leavers between April 2015 and March 2016.

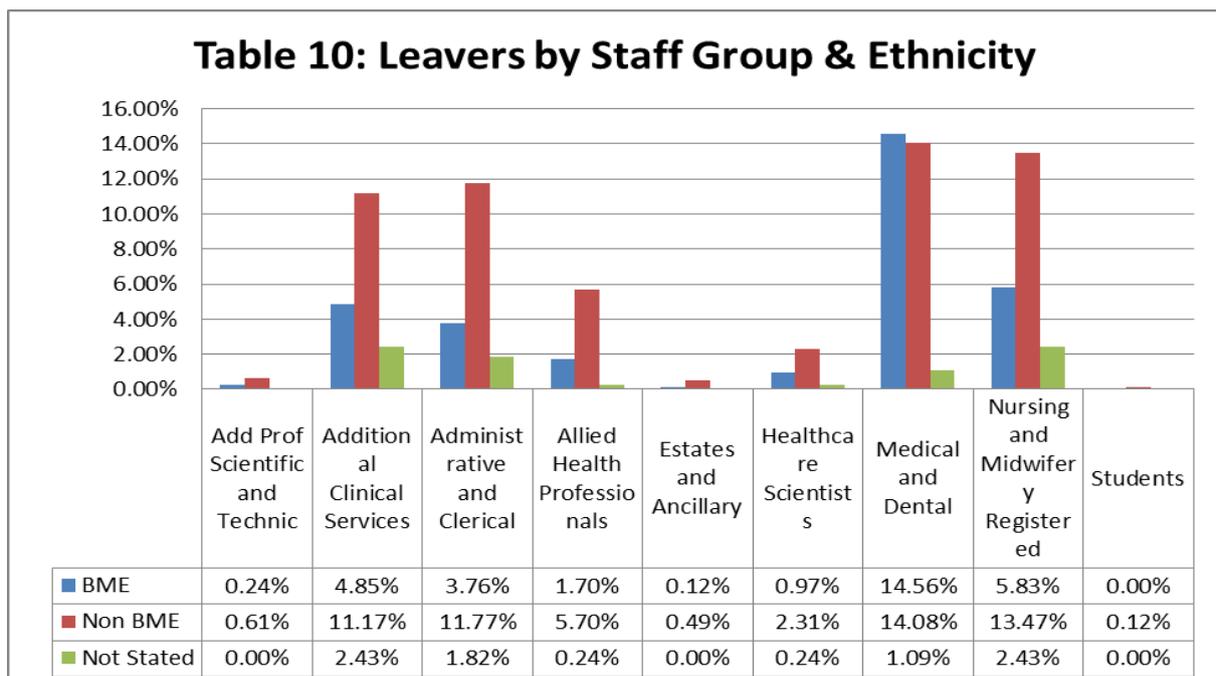
The number of BME leavers was higher than their overall representation at the Trust (32% versus 28%) with a corresponding lower number of non-BME staff in terms of overall representation (60% versus 62%).



By Staff Group

Of the 825 leavers as expected the majority fall within the Medical & Dental staff group due to the junior doctor rotations (29.73%).

The next highest group were Nursing & Midwifery at 21.72%, followed by Additional Clinical Services at 18.45% and Admin & Clerical at 17.35%.

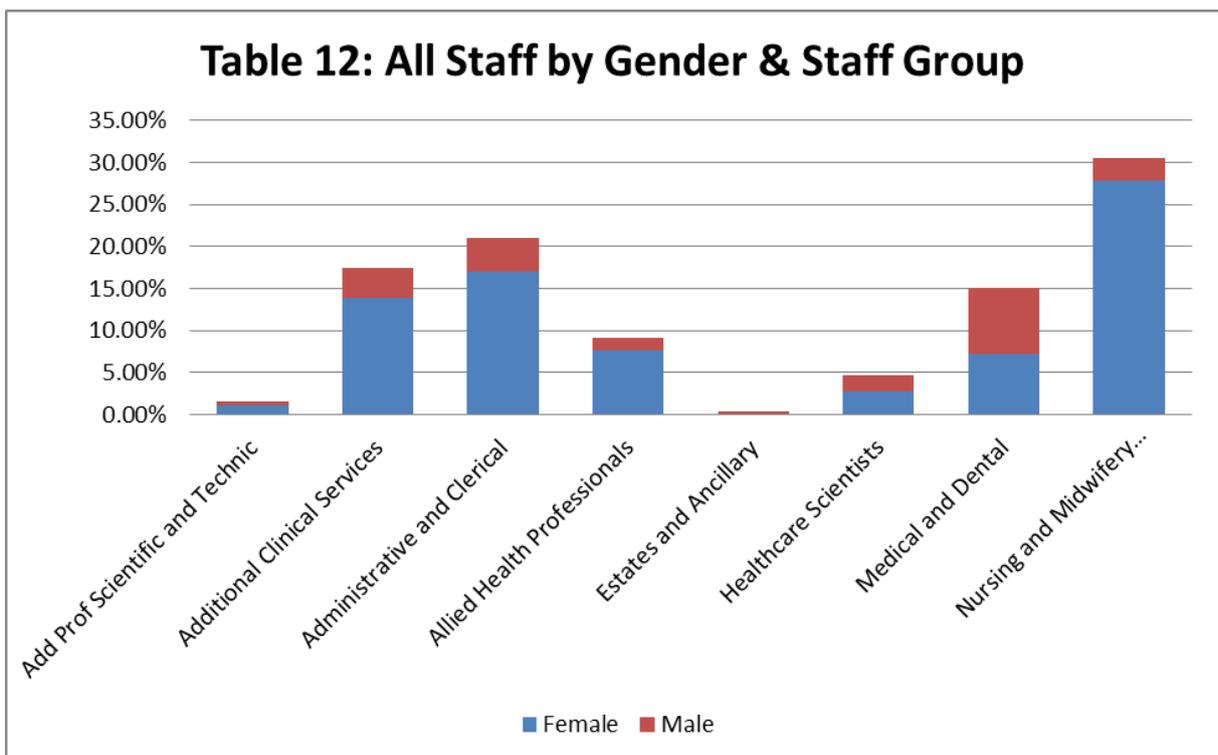
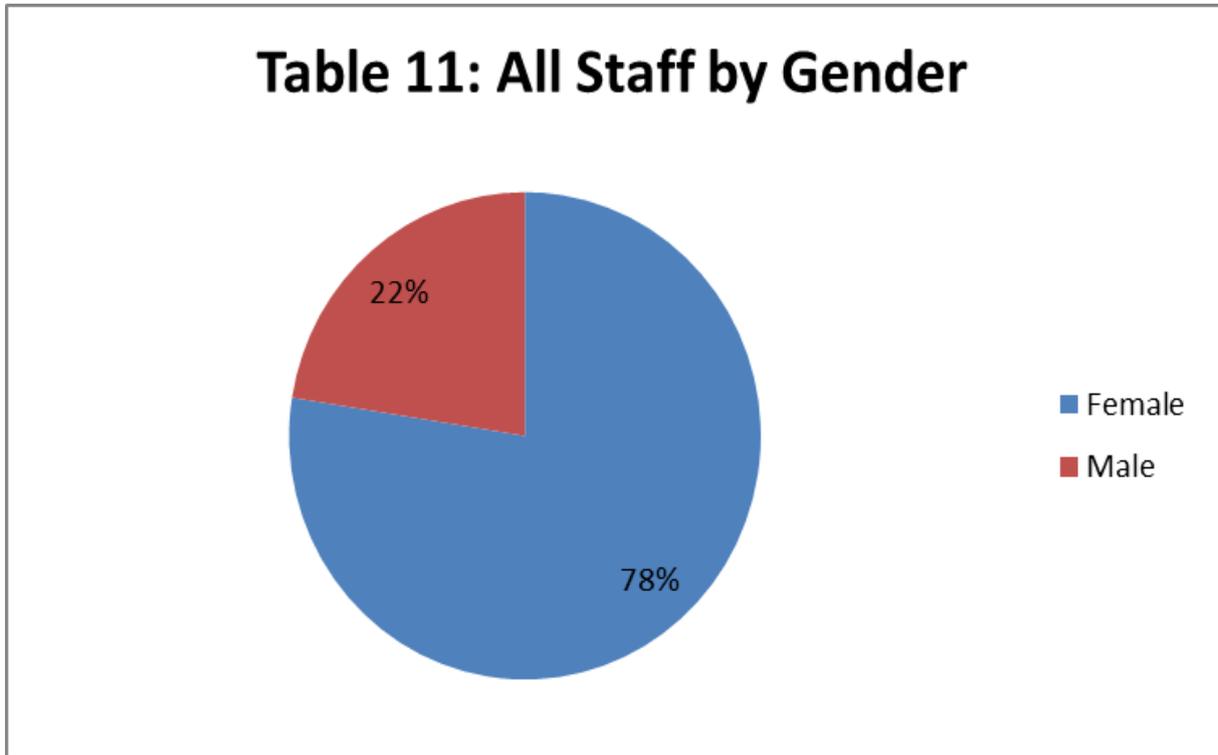


The highest proportion of BME leavers was in the Medical & Dental staff group (14.56%) which is comparable with their overall representation at the Trust, followed by 5.83% for Nursing and Midwifery and 4.85% for Additional Clinical Services.

GENDER

Current workforce

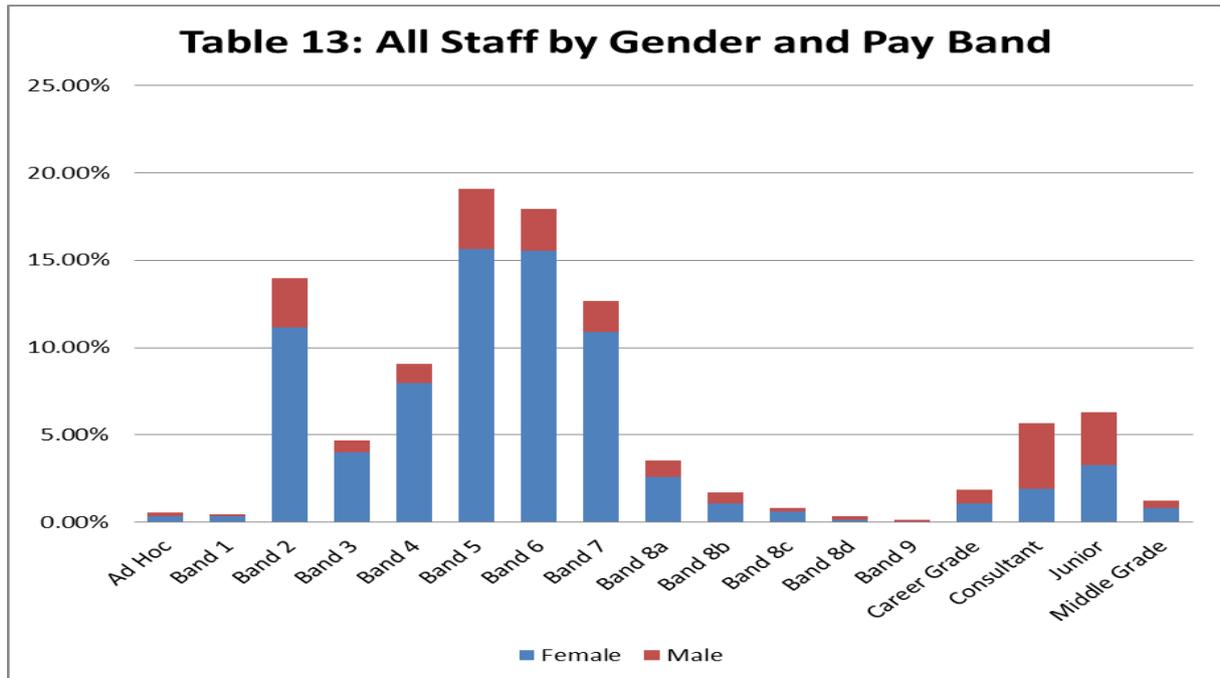
The proportion of Trust staff by gender is illustrated below; this is broadly unchanged from previous reports.



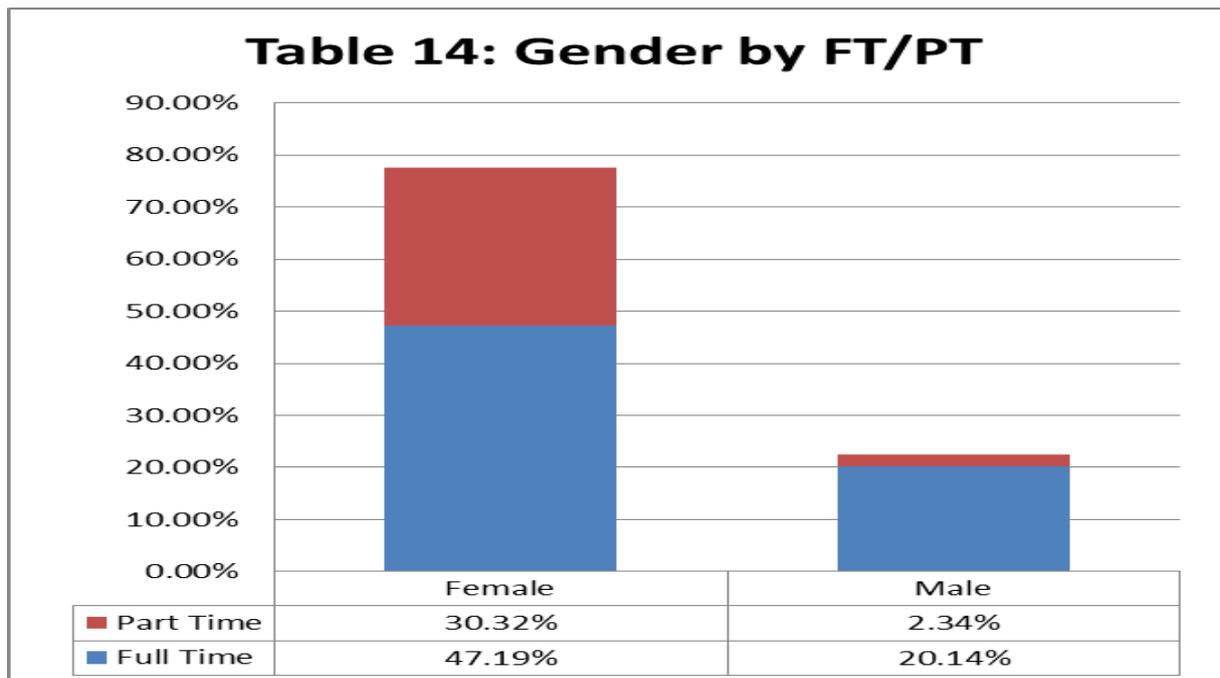
There is a fairly even gender split for posts within Healthcare Scientists and Medical & Dental staff groups.

There are substantially higher numbers of female workers than male workers in Administrative & Clerical and Nursing & Midwifery posts which is comparable with their overall representation at the Trust. Additional Clinical Services and Allied Health Professionals posts also have more female workers than male.

The highest proportion of male workers are Medical & Dental staff (7.91%), followed by 4.04% in Admin & Clerical roles and 3.58% in Additional Clinical Services.

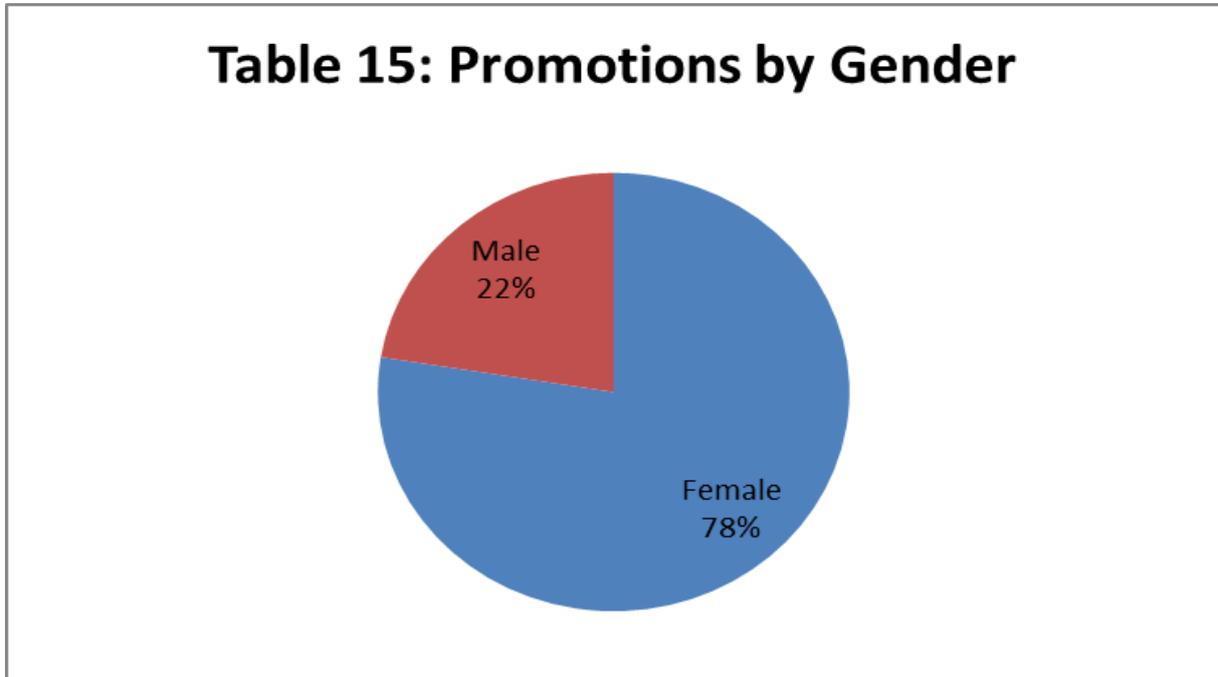


Of the 22.91% male workers at the Trust, the highest number are employed in Medical & Dental grades (7.91%), followed by Band 5 (3.43%).



The table above highlights the gender split by full time v part time staff. As expected the majority of part time staff are female.

Promotions



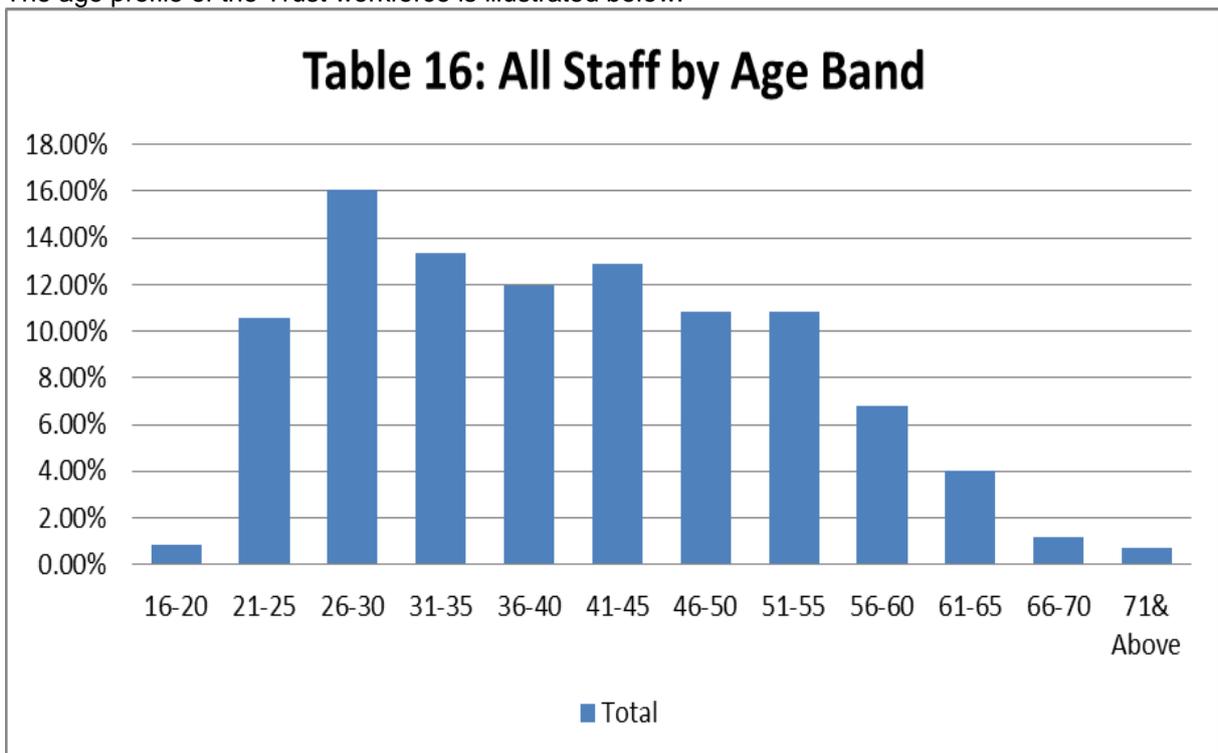
The proportion of men and women promoted at the Trust in the last twelve months is consistent with the Trusts Workforce profile for Gender.

The promotion data above is for the period 1st April 2015 to 31st March 2016.

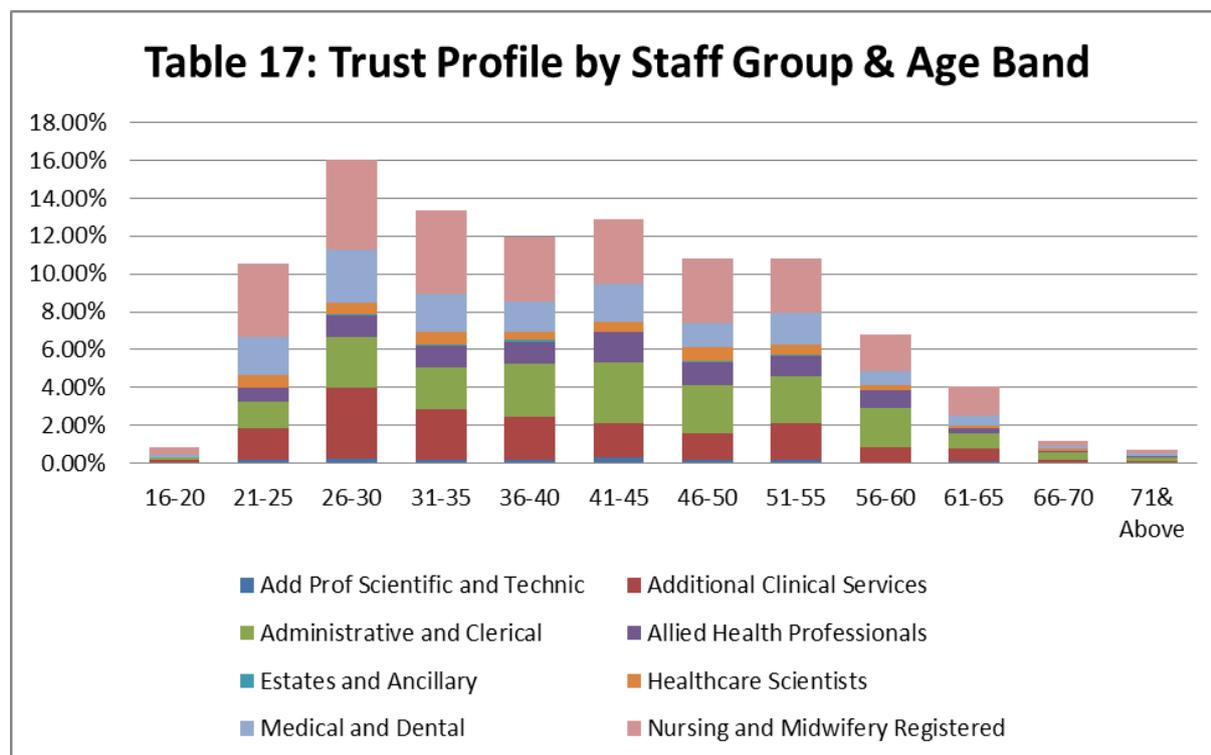
AGE

Current workforce

The age profile of the Trust workforce is illustrated below.



The highest proportion of staff (16.05%) are aged between 26-30, followed by (13.34%) aged 31-35. 23.57% of the Trust's workforce is aged over 50 which is similar to last year.



DISABILITY

1.11% of Trust staff are recorded on ESR as having a disability. 48.48% have indicated that they do not have a disability, 6.57% have indicated they do not wish to declare their status and 43.84% are undefined, i.e. no record is held of their disability status.

This is a slight improvement on the last report, where 56.96% were undefined; this will be due to the interface between NHS Jobs and ESR where this information is transferred across for successful applicants.

With such a small number of recorded disabilities, it is not possible to undertake any meaningful analysis of this group. We will be undertaking a data cleanse exercise this coming year to try and improve on the information currently held.

SEXUAL ORIENTATION AND RELIGIOUS BELIEF

Historically this information has not been collected by the Trust; it is recorded when an individual applies for a vacancy on NHS Jobs and therefore is transferred to ESR through the interface for successful candidates.

With the increased usage of the interface the level of information held is gradually increasing, but it is still not at a sufficient level to undertake any detailed reporting.

EMPLOYEE RELATIONS CASES

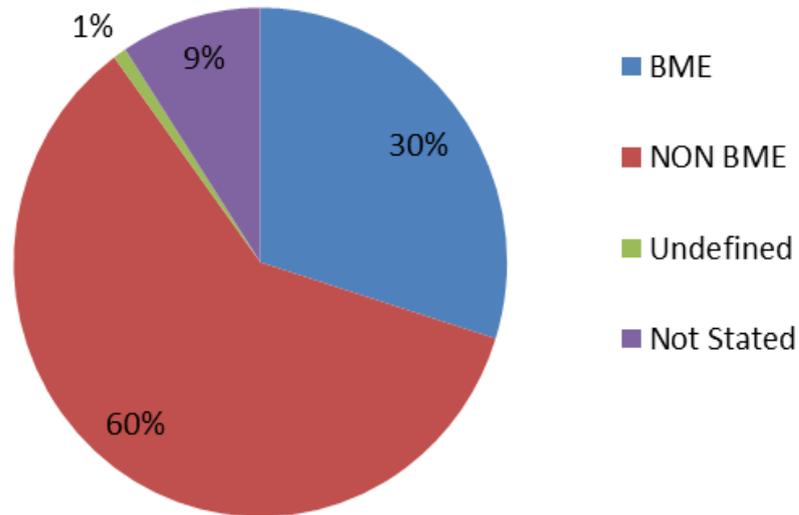
There were 54 employee relations cases being managed by the Trust's HR Business Partners between April 2015 and March 2016.

Employee relations cases include Bullying & Harassment, Tribunals, Disciplinarys, Appeals, Capability, Absence Management, Grievances and Investigations.

39 Non-BME, 12 BME & 19 Not Stated.

TRAINING AND DEVELOPMENT

Table 18: Training Courses Undertaken by Ethnic Origin

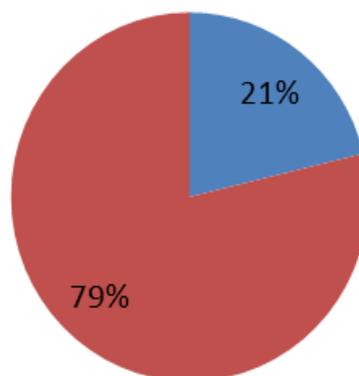


The chart above represents the number of training courses undertaken by Trust staff for the period 1st April 2015 to 31st March 2016.

The ethnic profile is comparable with the Trust's overall workforce profile.

Table 19: Training Courses Undertaken by Gender

■ Male ■ Female



The gender profile of training courses undertaken for the last twelve months is comparable with the Trust's overall workforce profile.

The information is drawn from the training module of ESR (Oracle Learning Management, referred to as 'OLM').

Information on the diversity of medical education is not reported, as this is held on the Deanery database (Intrepid).

TRUST BOARD PROFILE

As at 31st March 2016 the Trust Board comprised one chairman, five non-executive directors and six executive directors. Of the total seven are male and four are female. Nine are non-BME, and the remainder have an ethnicity of Not Stated.

REDUNDANCY DATA

There were no redundancies at the Trust during the period April 2015 to March 2016.