Diversity & Inclusion Report for the year 2017 East Kent Hospitals University NHS Foundation Trust

Part A: People



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1 Summary

This report provides evidence of East Kent Hospitals University NHS Foundation Trust (EKHUFT) Diversity & Inclusion performance. Overall, the data paints an improving picture consequent on Diversity & Inclusion activities during the year. The areas for development generally would appear to focus on Pay Bands, providing opportunities for activities to improve access to promotion and recruitment into higher band for minority groups. The Trust is working with the Black Asian or Minority Ethnic (BAME) Network to develop programs to support minority progression in the Trust.

- Women continue to be over represented in grades from Apprentice to Band 8 and underrepresented above Band 8.
- There is a reduced proportion of BAME staff in all nonclinical bands.
- In Bands 8c, 8d, 9 and Exec. There are no staff who have declared a disability.
- In 2017 9.25% of those promoted identified themselves as BAME when BAME staff constituted 14.4% of our staff.
- During 2017, full time workers were promoted proportionately more than part-time workers.

2 Rationale

This document is the EKHUFT response to The Equality Act 2010 (Specific Duties) Regulations 2011, which require each public authority to publish information to demonstrate its compliance with the duty imposed by section 149(1) of the Act (The Public Sector Equality Duty [PSED])

The information must include, in particular, information relating to persons who share a relevant protected characteristic who are its employees (People - Part A) and other persons affected by its policies and practices (Patients – Part B).

3 Introduction

The public sector Equality Duty, in section 149 of the Equality Act 2010, requires public bodies to consider all individuals when carrying out their day to day work – in shaping policy, in delivering services and in relation to their own employees. It requires public bodies to have due regard to the need to:

- a. eliminate discrimination
- b. advance equality of opportunity and
- c. foster good relations between different people when carrying out their

activities

3.1 Protected Characteristics

- Age
- Disability
- Gender reassignment
- Marriage and civil partnership
- Pregnancy and maternity
- Race
- Religion and belief
- Sex
- Sexual orientation

4 Data Collection

This report is based on data collected from the Electronic Staff Register (ESR) and Staff Survey 2016.

5 Report Style

To dramatically reduce the length and complexity of this document only those issues, which have been identified as statistically significant, are mentioned.

6 Statistical Significance

Data has only been considered significant when numbers fall outside the range of plus (+) or minus (–) two standard deviations. The standard deviation is commonly used to measure confidence in statistical conclusions. The reported margin of error is typically about twice the standard deviation, the half-width of a 95 per cent confidence interval. In science, researchers commonly report the standard deviation of experimental data, and only effects that fall much farther than one standard deviation away from what would have been expected are considered statistically significant – normal random error or variation in the measurements is in this way distinguished from causal variation.

7 Demographics

The demographic data used to produce this report has been based on data obtained in the 2011 census and ONS Mid-Year Estimates 2015.

Comparisons have been made between trust data and population where appropriate. A more detailed summary of the East Kent population is published on the Equality pages of the EKHUFT web site

8 Headcount

On 31 March 2017 the Trust employed 7802 people.

8.1 Sex

78.0% of employees are female in contrast to the local population where 51.1% are female (ONS Mid-Year Estimates 2015). This situation is reflected across the NHS at large.

Sex	Total	Population	Staff %	Population %
Female	6083	63800	78.0%	51.4%
Male	1719	60400	22.0%	48.6%
Grand Total	7802	124200	100.0%	100.0%

Table 1- Sex

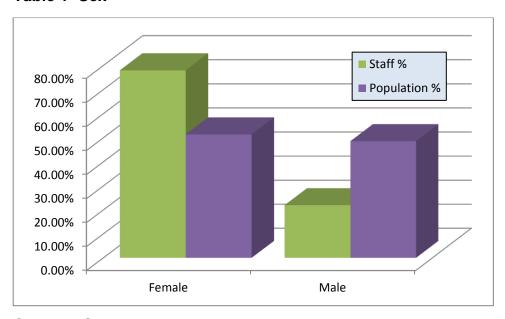


Chart 1 - Sex

8.2 Race

In the 2011 national census 90.8% of the local population described themselves as White-British. The level of EKHUFT staff who describe themselves as White-British is noticeably less at 65.4%

Ethnic Origin	Staff	Staff %	Pop.	Pop. %
A White - British	5100	65.4%	687120	90.8%
B Irish	66	0.8%	5136	0.7%
C Other White background	385	4.9%	26194	3.5%
D White & Black Caribbean	22	0.3%	3145	0.4%
E White & Black African	2	0.0%	1376	0.2%
F Mixed - White & Asian	30	0.4%	3223	0.4%
G Other mixed background	34	0.4%	2546	0.3%
H Asian - Indian	405	5.2%	4499	0.6%
J Asian - Pakistani	50	0.6%	891	0.1%
K Asian - Bangladeshi	17	0.2%	1197	0.2%
L Any other Asian background	257	3.3%	9157	1.2%
M Black - Caribbean	23	0.3%	1495	0.2%
N Black - African	137	1.8%	4406	0.6%
P Any other Black background	17	0.2%	560	0.1%
R Chinese	51	0.7%	3105	0.4%
S Any Other Ethnic Group	78	1.0%	2495	0.3%
Z Not Stated	1128	14.5%		
Grand Total	7802	100.0%	756545	100.0%

Table 2 - Ethnicity

16.3% of our staff describe themselves as from a BAME but only 5.0% of our local population describe themselves as BAME $\,$

1128 members of staff have chosen not to declare their ethnicity.

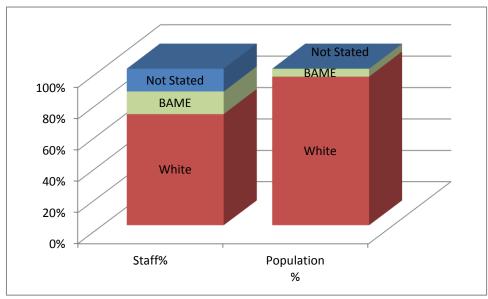


Table 3 - BAME

Ethnic Origin	Staff	Staff%	Рор.	Pop. %
White	5551	71.1%	718450	95.0%
BAME	1123	14.4%	38095	5.0%
Not Stated	1128	14.5%		0.0%
Grand Total	7802	100.0%	756545	100.0%

Chart 2 - BAME

8.3 Religion

47.9% of staff at EKHUFT did not wish to disclose their religion/belief compared to 7.5% of the East Kent Population.

Religion/Belief	Staff	Staff %	Pop.	Pop. %
Atheism/No				
Religion	627	8.0%	209193	27.6%
Buddhism	40	0.5%	3934	0.5%
Christianity	2856	36.6%	472194	62.2%
Hinduism	143	1.8%	5577	0.7%
Not disclosed	3736	47.9%	56659	7.5%
Islam	75	1.0%	6196	0.8%
Judaism	2	0.0%	924	0.1%
Other	318	4.1%	3412	0.4%
Sikhism	5	0.1%	676	0.1%
Grand Total	7802	100.0%	758765	100.0%

Table 4 – Religion

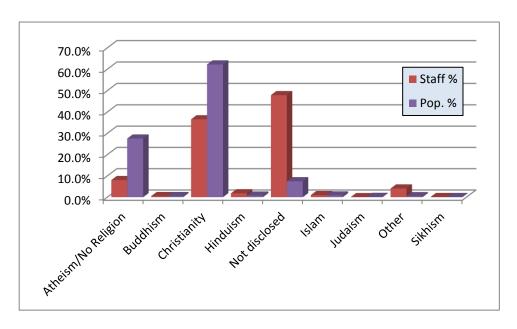


Chart 3 - Religion

8.4 Sexual Orientation

53.7% of EKHUFT Staff identified as Heterosexual. 45.0% chose not to disclose their sexual orientation leaving 1.2% of staff identifying as lesbian, gay, bisexual or Transgender(LGBT+).

In 2015, the Annual Population Survey found 1.7% of adults in the UK identified themselves as LGBT+.

Sexual orientation	Staff	%
Bisexual	41	0.5%
Gay	34	0.4%
Heterosexual	4192	53.7%
not disclosed	3509	45.0%
Lesbian	26	0.3%
Grand Total	7802	100.0%

Table 5 - Sexual Orientation

9 Grade

9.1 Sex

Women continue to be over represented in grades from Apprentice to Band 8 and underrepresented above Band 8. The levels for doctors in training are evenly balanced. There has been little change since last year.

Grade	Female	Male	Grand	Female	Male
Graue	remale	IVIAIE	Total	%	%
Apprentice	9	15	24	37.50%	62.50%
Band 1	29	14	43	67.44%	32.56%
Band 2	1414	292	1706	82.88%	17.12%
Band 3	680	85	765	88.89%	11.11%
Band 4	416	90	506	82.21%	17.79%
Band 5	1340	239	1579	84.86%	15.14%
Band 6	1033	166	1199	86.16%	13.84%
Band 7	581	149	730	79.59%	20.41%
Band 8A	128	54	182	70.33%	29.67%
Band 8B	68	32	100	68.00%	32.00%
Band 8C	19	9	28	67.86%	32.14%
Band 8D	6	2	8	75.00%	25.00%
Band 9	2	2	4	50.00%	50.00%
VSM	3	5	8	37.50%	62.50%
Exec	9	6	15	60.00%	40.00%
Non-Consultant	46	77	123	37.40%	62.60%
Trainee Grade	195	188	383	50.91%	49.09%
Consultant	105	294	399	26.32%	73.68%
Trust	6083	1719	7802	77.97%	22.03%

Table 6 - Grade v Sex

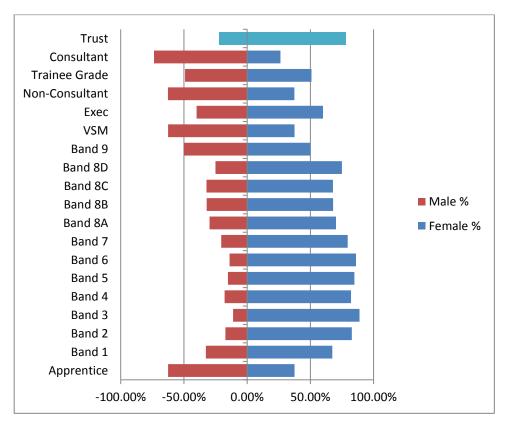


Chart 4 - Sex v Grade

9.2 Race

In general, the Trust employs a higher proportion of Black Asian and Minority Ethnic (BAME) staff than found in the local population. Over 17% of the Trusts employees are from BAME groups compared to 5% found in the East Kent population. There is a reduced proportion of BAME staff in all nonclinical bands. There is a much higher proportion of BAME Clinical grades

Ethnic	BAME	Not	White	Grand
Group	DAIVIE	Stated	wille	Total
Apprentice	1	14	9	24
Band 1	17	3	23	43
Band 2	153	271	1282	1706
Band 3	29	99	637	765
Band 4	29	57	420	506
Band 5	279	301	999	1579
Band 6	137	152	910	1199
Band 7	57	69	604	730
Band 8A	10	13	159	182
Band 8B	4	15	81	100
Band 8C	1	4	23	28
Band 8D		1	7	8
Band 9			4	4
Consultant	152	49	198	399
Exec	1	3	11	15
Non-				
Consultant	60	22	41	123
Trainee				
Grade	192	55	136	383
VSM	1		7	8
Grand Total	1123	1128	5551	7802

Table 7 - Grade v Ethnicity

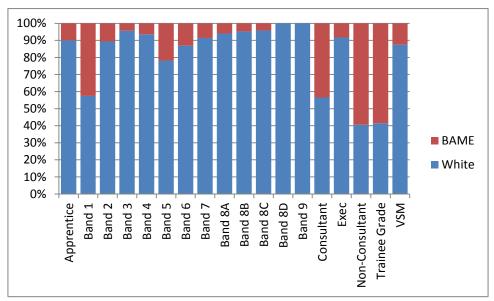


Chart 5 - Grade v Ethnicity

9.3 Disability

Disability	Not Disabled	Not Declared	Disabled	Grand Total
Apprentice	7	15	2	24
Band 1	26	12	5	43
Band 2	1077	564	65	1706
Band 3	502	232	31	765
Band 4	348	134	24	506
Band 5	1002	529	48	1579
Band 6	751	391	57	1199
Band 7	479	226	25	730
Band 8A	125	47	10	182
Band 8B	62	34	4	100
Band 8C	15	13		28
Band 8D	6	2		8
Band 9	4			4
Consultant	202	188	9	399
Exec	13	2		15
Non-Consultant	52	66	5	123
Trainee Grade	88	293	2	383
VSM	6	1	1	8
Grand Total	4765	2749	288	7802

Table 8 - Grade v Disability

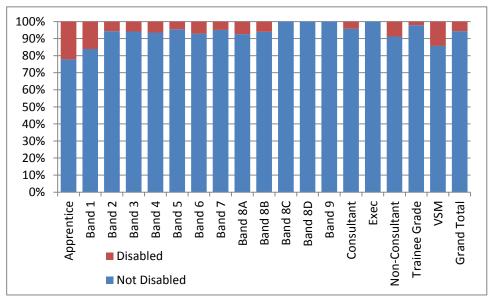


Chart 6 - Grade v Disability

The UK Government's Office for Disability Issues states that 16% of working age adults have a disability. 3.69% of staff employed by EKHUFT have declared a disability.

35.23% of EKHUFT staff chose not to declare whether or not they have a disability.

In Bands 8c, 8d, 9 and Exec. There are no staff who have declared a disability.

10 Promotion

This section compares headcount to promotion. Promotion is defined as, when a member of staff moves to a higher band.

10.1 Age

Age Band	Promotion	Promotion %	Headcount
16 - 20	5	2.89%	0.64%
21 - 25	21	12.14%	6.96%
26 - 30	35	20.23%	11.77%
31 - 35	22	12.72%	11.38%
36 - 40	18	10.40%	12.01%
41 - 45	24	13.87%	12.64%
46 - 50	22	12.72%	12.93%
51 - 55	17	9.83%	14.10%
56 - 60	7	4.05%	10.68%
61 - 65	1	0.58%	5.19%
71 & above	1	0.58%	0.68%

Table 9 – Age v Promotion

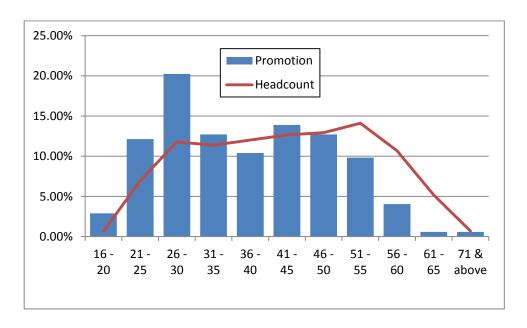


Chart 6 - Age v Promotion

There are higher rates of promotion below the age of 40 years. Our people strategy speaks of retention of staff being a priority. It may be that our organisation can improve retention by increasing the rates of promotion in staff over 40 years old.

10.2 Race

Ethnic	Promotion 2016	Promotion 2017	Headcount
Group	%	%	%
BAME	4.50%	9.25%	14.39%
Not Stated	11.40%	12.72%	14.46%
White	84.10%	78.03%	71.15%

Table 10 - Ethnicity v Promotion

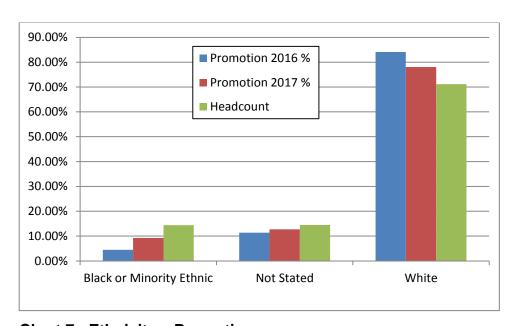


Chart 7 - Ethnicity v Promotion

In 2016 4.5% of those promoted identified themselves as BAME when BAME staff constituted 14.26% of our staff.

In 2017 9.25% of those promoted identified themselves as BAME when BAME staff constituted 14.4% of our staff.

Twice as many BAME staff were promoted in 2017, which is significant movement in the right direction but which still needs to be a focus of activity.

10.3 Sex

Sex	Total	Promotion	Headcount
Female	138	79.77%	77.97%
Male	35	20.23%	22.03%

Table 11 - Sex v Promotion

Proportionately women were slightly more likely to be promoted in 2017 than

men (1.80%).

10.4 Working Pattern

Working			
Pattern	Total	Promotion	Headcount
Full Time	138	79.77%	66.46%
Part Time	35	20.23%	33.54%

Table 12 - Working Pattern v Promotion

During 2017, full time workers were promoted proportionately more than parttime workers.

10.5 Disability

Disabled	Total	Promotion	Headcount
Not			
Disabled	112	64.74%	61.07%
Not			
Declared	56	32.37%	35.23%
Disabled	5	2.89%	3.69%

Table 13 - Disability v Promotion

11 Sickness

11.1 Sex

Sex	Absence	Availability
Female	83.40%	76.28%
Male	16.60%	23.72%

Table 14 - Sickness v Sex

Women who are contracted to work for 76% of the total work time account for 83% of sickness absence. Men are contracted to work for 23% but are responsible for 17% of absence.

11.2 Disability

Disabled	Absence	Availability	
Not Disabled	56.97%	62.94%	
Not Declared	36.32%	33.31%	
Disabled	6.71%	3.75%	

Table 15- Sickness v Disability

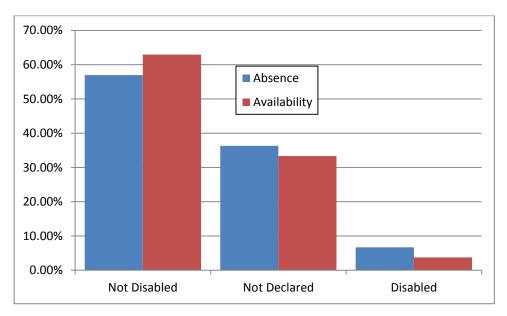


Figure 11- Sickness v Disability

People who classified themselves as disabled on average took higher levels of sickness absence than those who did not.

11.3 Age

Age Band	Absence	Availability
16 - 20	0.30%	0.60%
21 - 25	5.00%	6.96%
26 - 30	8.88%	12.51%
31 - 35	8.68%	11.30%
36 - 40	8.44%	11.80%
41 - 45	10.82%	12.32%
46 - 50	15.89%	13.26%
51 - 55	16.91%	14.16%
56 - 60	16.02%	10.83%
61 - 65	7.10%	4.88%
66 - 70	1.36%	0.88%
71 & above	0.59%	0.49%

Table 16 - Sickness v Age

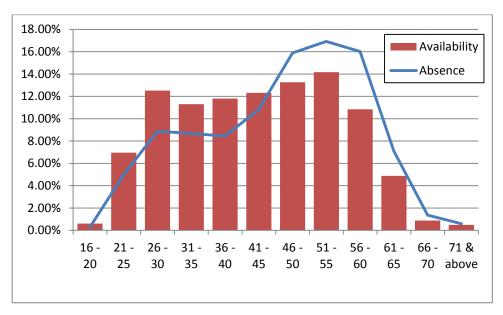


Figure 12 – Sickness v Age

Those staff members over the age of 46 tend to take higher levels of sickness absence than those 45 years and younger. The highest levels of sickness absence were taken by those aged 51 to 60 years old.

11.4 Ethnicity

Ethnic Group	Absence	Availability
Black or Minority	8.10%	15.31%
Not Stated	10.79%	11.25%
White	81.11%	73.45%
Grand Total	100.00%	100.00%

Table 17 - Ethnicity v Sickness Absence

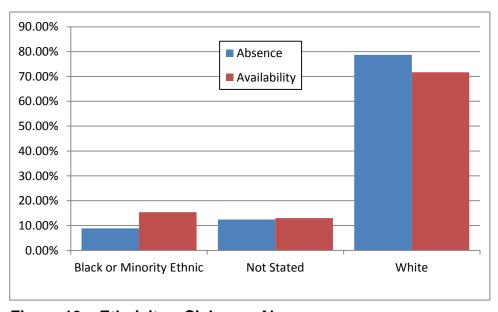


Figure 13 - Ethnicity v Sickness Absence

Generally white staff take higher levels of sickness than their black colleagues.

11.5 Flexible Working

Flexible Working	Absence	Availability	
Full Time	68.21%	74.94%	
Part Time	31.79%	25.06%	

Table 18 - Roster v Sickness Absence

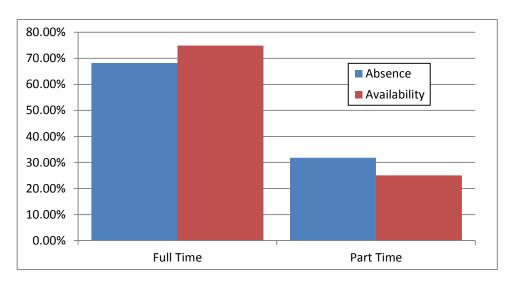


Chart 8 - Roster v Sickness Absence

Part time staff tend to take proportionally more sickness absence than full time staff.

12 Workforce Race Equality Standard 2017

Indicator	2015	2016	2017
%of our staff have		87.9%	87.5%
declared their ethnicity		07.970	07.570
Proportion of BAME			
staff employed within		14.2%	14.3%
this organisation			
KF 25. Percentage of			
staff experiencing	White 33%	White 32%	White 33%
harassment, bullying		5=75	
or abuse from patients,	BAME 31%	BAME 31%	BAME 31%
relatives or the public			
in last 12 months.			
KF 26. Percentage of	1004	14/1: 400/	14# 14 0004
staff experiencing	White 42%	White 42%	White 36%
harassment, bullying	DAME 200/	DAME 200/	BAME 35%
or abuse from staff in	BAME 38%	BAME 39%	BAME 35%
last 12 months			
KF 21. Percentage believing that trust			
provides equal	White 77%	White 82%	White 84%
opportunities for			<u> </u>
career progression or	BAME 68%	BAME 68%	1 BAME 75%
promotion.			_
Q17. In the last 12			
months have you			
personally experienced		14/11/2004	MII ' 00/
discrimination at work	White 10%	White 9%	White 9%
from any of the	DAME COS		BAME 17%
following? b)	BAME 20%	BAME 21%	DAIVIE 17%
Manager/team leader or			
other colleagues			
Table 10 WDES	<u> </u>		

Table 19 - WRES

Divisional WRES Action plans are under development and will be implemented by April 2018.

13 Other Diversity and Inclusion Activity

13.1 NHS Employers Diversity and Inclusion Alumni

The Trust is an NHS Employers Diversity and Inclusion Alumni Member.

The diversity and inclusion alumni programme supports participating trusts to progress and develop their equality performance and to build capacity in this area. At the same time the programme provides an opportunity for partners to offer advice, guidance and demonstrations of good practice in equality and diversity management to the wider NHS. Partners are supported to achieve this via:

- Continuous improvement around equality and diversity within their own organisation.
- Raising awareness of what constitutes sustainable, outcome-focused improvement in managing equality and diversity across their region.
- Acting as a thermometer by which NHS Employers can determine the key issues facing the wider NHS, so that advice and guidance is relevant and up to date.
- Contributing to the development of emerging good practice and providing a channel for collecting case studies from which others can learn, within the wider context of NHS initiatives.
- Contributing to a broader understanding of equality and diversity, across both the NHS and the wider public sector, in the context of quality, innovation, productivity and disease prevention.

13.2 Kent Surrey & Sussex (KSS) Diversity Leads Group

The KSS Diversity Leads Group in Chaired by our Head of Diversity and Inclusion.

13.3 enei

The Employers Network for Equality & Inclusion (enei) is the UK's leading employer network covering all aspects of equality and inclusion issues in the workplace. The enei e-quality standard is a pioneering benchmarking tool that helps organisations audit their diversity and inclusion performance across the 9 "Protected Characteristics" in the Equality Act 2010 as well other groups such as carers and ex-offenders.

In 2017 EKHUFT was awarded a Bronze award following completion of the benchmarking tool.





13.4 Two Ticks and Age Positive



The trust displays the 'two ticks' positive about disabled people and 'Age Positive' logos on all job adverts.

13.5 Diversity and Inclusion (D&I) Steering Group

The D&I steering group chaired the CEO. Steering Group standing members include Dir. HR, Chief Nurse and Director of Quality, Director of Communications and Engagement and Divisional Directors. The Chairs of our BAME Network, Disabled staff council and Staff Side Committees and a representative from Healthwatch Kent are also members.

The steering group provides leadership to the achievement of Equality Diversity and Inclusion in employment and service provision within EKHUFT

13.6 People Strategy

The D&I team have been engaged in the development of the Diversity and Inclusion Section of the Strategy and are working to implement our action plan tasks.

- Continue to support the Bright Futures project
- Work with the organisation to identify roles under the Learning Disability Pledge
- Increase access to work and pre-employment programmes
- Agree a Trust Diversity & Inclusion statement

13.7 Unconscious bias training

Susan Abbott Diversity and Inclusion Officer has developed a three hour Unconscious Bias Training Course that is being offered to all members of the Trust and has been very well received by everyone who has attended. All courses are fully booked with more being made available. Managers have noticed significant improvement in working relationships of their teams who have attended.

A father and son were involved in a car accident in which the father was killed and the son seriously injured. The father was pronounced dead at the scene of the accident and his body taken to the local morgue. The son was taken by ambulance to a nearby hospital and immediately wheeled into an emergency room. A surgeon was called. Upon arrival, and seeing the patient, the attending surgeon exclaimed, "Oh my God, it's my son!" The question to you is, who is the surgeon?

13.8 Managing Workplace Relationships Course

Susan Abbott, D&I officer has developed a Managing Workplace Relationships Course'

Rationale

East Kent Hospitals University NHS Foundation Trust is committed to transforming the Trust and making it a better place for both patients and employees. The Managing Workplace Relationships course will be offered by April 2018 and will play an integral part in this.

Aim of Managing Workplace Relationships

To provide managers with the opportunity to explore the skills and knowledge needed to manage diverse teams well.

Objectives: by the end of the half-day programme participants will:

- Appreciate some of the challenges of managing teams/individuals from a different culture or background
- Have an opportunity to have an open and honest discussion about workplace relationships in a safe environment
- Explore strategies for addressing the performance of individuals and teams

13.9 LGBT+

In February 2017, the Trust celebrated LGBT+ History Month by flying

Rainbow flags at Trust Headquarters, Kent and Canterbury Hospital, Queen Elizabeth the Queen Mother Hospital and William Harvey Hospital. The Diversity & Inclusion (D&I) Team displayed information about the development of Gay rights in every hospital restaurant.

A group of staff promoted LBGT+ at Pride days and in LBGT+ History Month.

In more recent months the D&I Team have been working with the EKHUFT Staff LGBT+ representative for the Royal Collage of Nursing with the aim to put the network on a more official footing.

The D&I Team are working with Transgender staff to develop a Transgender Policy. This policy will set out the Trust's responsibilities as a service provider to, and an employer of, trans people.

13.10 Disabled Staff Council (DSC)

The Disability Council is a network group with the objective of giving staff with disabilities a voice. The Council have developed a Reasonable Adjustment Agreement which will be released in April 2018 and will be included in the annual appraisal paperwork.

The NHS Equality and Diversity Council (EDC) have mandated that the Work Force Disability Standard (WDES) becomes operative on 1 April 2018 and will require publication of data by August 2019.

http://www.ekhuft.nhs.uk/patients-and-visitors/about-us/boards-and-committees/diversity-and-inclusion/disabled-staff-council/

13.11 Black Asian and Minority Ethnic (BAME) Staff Network

Empowering BAME staff to achieve their potential through creating positive change.

In December 2016, the Trust held a BAME staff conference. Two high profile speakers attended, Yvonne Coghill OBE, Director, Workforce Race Equality Standard (WRES) Implementation at NHS England and Cherron Inko-Tariah MBE, Founder, The Power of Staff Networks. The event was opened by Matthew Kershaw, CEO with Sandra Le Blanc, Dir. HR giving the closing address. The successful day included presentations and workshops on the WRES, Staff networks and EDS2.

A major outcome of the day has been the development of the new EKHUFT BAME staff network. The network has been re-launched and is now known as BAME (Black, Asian and Minority Ethnic Staff Network). They meet on a monthly basis, have designed and had made Badges for all members and are in the process of improving marketing for the network and organising an

AGM/ conference.

http://www.ekhuft.nhs.uk/patients-and-visitors/about-us/boards-and-committees/diversity-and-inclusion/bame/