

# Diversity & Inclusion Report for the period: 01 April 2017 – 31 March 2018

Part A: People

Bruce Campion-Smith

Head of Equality, Diversity and Inclusion

January 2019



# **Table of Contents**

1	Summary	4
2	Rationale	
3	Introduction	4
4	Data Collection	5
5	Report Style	5
6	Statistical Significance	5
7	Demographics	5
8	Headcount	5
9	Grade	9
10	Promotion	17
11	Sickness	21
12	Workforce Race Equality Standard 2017	26
13	Other Diversity and Inclusion Activity	

# List of Tables

Table 1 Breakdown by Sex	6
Table 2 Ethnicity	7
Table 3 Ethnicity 2	7
Table 4 Religion	8
Table 5 Sexual Orientation	9
Table 6 Sex	10
Table 7 Ethnicity	13
Table 8 Disability 2017	15
Table 9 Disability 2018	16
Table 10 Promotion & Ethnicity	18
Table 11 Promotion & Sex	18
Table 12 Promotion & Work Pattern	19
Table 13 Promotion & Disability	20
Table 14 Sickness & Sex	21
Table 15 Sickness & Disability	21
Table 16 Sickness & Age	22
Table 17 Ethnicity & Sickness	24
Table 18 Sickness & Work Pattern	25
Table 19 WRES	26

# List of Charts

Chart 1 Breakdown by Sex	6
Chart 2 Ethnicity	7
Chart 3 Religion	8
Chart 4 Band 2017	11
Chart 5 Band 2018	12
Chart 6 Band & Disability	17
Chart 7 Promotion & Etnicity	18
Chart 8 Promotion & Sex	19
Chart 9 Promotion & Work Pattern	20
Chart 10 Disability & Promotion	20
Chart 11 Sickness & Sex	21
Chart 12 Sickness & Disability	22
Chart 13 Sickness & Age 2017	23
Chart 14 Sickness & Age 2018	23
Chart 15 Sickness & Ethnicity 2017	24
Chart 16 Sickness & Ethnicity 2018	24
Chart 17 Sickness & Work Pattern	25

#### Summary

This report provides evidence of East Kent Hospitals University NHS Foundation Trust (EKHUFT) Diversity & Inclusion performance. Overall, the data paints an improving picture resulting from Diversity & Inclusion activities during the year.

There continue to be areas for development generally would appear to focus on Pay Bands, providing opportunities for activities to improve access to promotion and recruitment into higher bands 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 8D and underrepresented above Band 8D.
- 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.

#### 1 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).

#### 2 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

# 2.1 Protected Characteristics

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

# 3 Data Collection

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

#### 4 Report Style

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

#### 5 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.

#### 6 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

#### 7 Headcount

On 31 March 2017 the Trust employed 7904 people.

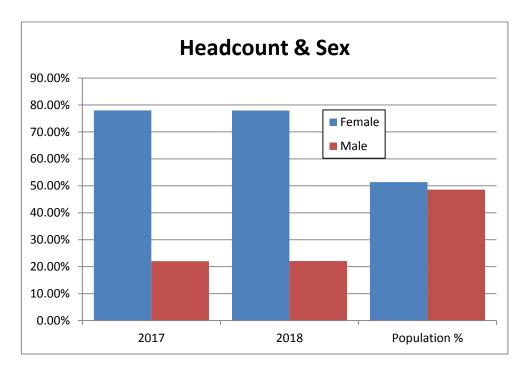
On 31 March 2018 the Trust employed 7928 people.

### 7.1 Sex

77.92% 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.

	2017	2018	Population %
Female	77.98%	77.92%	51.40%
Male	22.02%	22.08%	48.60%

Table 1 Breakdown by Sex





#### 7.2 Race

The national census current population estimates suggest that 90.56% of the local population described themselves as White. The level of EKHUFT staff who describe themselves as White is noticeably less at 65.4% which is probably a consequence of high number of staff who have not declared their ethnicity..

	2017	2018	Pop.
A White - British	64.35%	66.50%	90.80%
B Irish	0.92%	0.80%	0.70%
C Any other White background	4.91%	5.24%	3.50%
D White & Black Caribbean	0.29%	0.27%	0.40%
E White & Black African	0.03%	0.03%	0.20%
F White & Asian	0.39%	0.42%	0.40%
G Any other mixed background	0.42%	0.40%	0.30%
H Indian	5.22%	5.19%	0.60%
J Pakistani	0.67%	0.63%	0.10%
K Bangladeshi	0.23%	0.19%	0.20%
L Any other Asian background	3.56%	3.13%	1.20%
M Caribbean	0.32%	0.28%	0.20%
N African	1.87%	1.77%	0.60%
P Any other Black background	0.23%	0.22%	0.10%
R Chinese	0.53%	0.76%	0.40%
S Any Other Ethnic Group	1.08%	1.04%	0.30%
Z Not Stated	15.00%	13.16%	

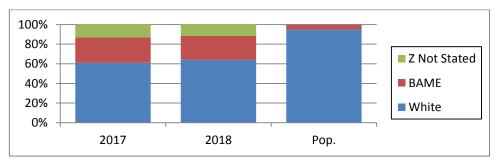
 Table 2 Ethnicity and Headcount

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

1040 members of staff have chosen not to declare their ethnicity.

			Рор.
White	70.18%	72.53%	95.00%
BAME	29.82%	27.47%	5.00%
Z Not Stated	15.00%	13.16%	





#### Chart 2 Ethnicity

# 7.3 Religion

46.51% of staff at EKHUFT did not wish to disclose their religion/belief compared to 7.47% of the East Kent Population.

	2017	2018	2017	2018	Рор.	Pop.%
No religion	670	654	8.45%	8.27%	209193	27.57%
Buddhism	44	45	0.55%	0.57%	3934	0.52%
Christianity	2890	2957	36.45%	37.41%	472194	62.23%
Hinduism	151	152	1.90%	1.92%	5577	0.74%
Not disclosed	3738	3676	47.15%	46.51%	56659	7.47%
Islam	86	81	1.08%	1.02%	6196	0.82%
Other	341	327	4.30%	4.14%	3412	0.45%
Judaism	2	2	0.03%	0.03%	924	0.12%
Sikhism	6	10	0.08%	0.13%	676	0.09%
Grand Total	7928	7904	100.00%	100.00%	758765	100.00%

Table 4 Religion

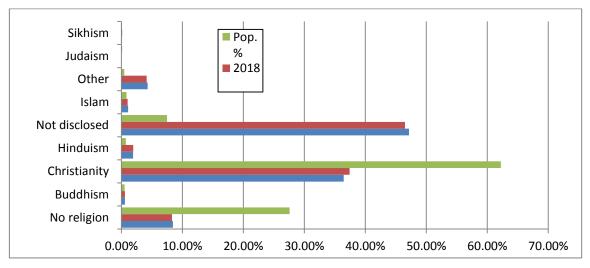


Chart 3 Religion

# 7.4 Sexual Orientation

55.23% of EKHUFT Staff identified as Heterosexual. 43.50% chose not to disclose their sexual orientation leaving 1.28% of staff identifying as lesbian, gay, bisexual or Transgender(LGBT+).

	2017	2018	2017	2018
Bisexual	46	44	0.58%	0.56%
Gay	39	31	0.49%	0.39%
Heterosexual	4348	4365	54.84%	55.23%
Not disclosed	3465	3438	43.71%	43.50%
Lesbian	30	26	0.38%	0.33%

**Table 5 Sexual Orientation** 

#### 8 Grade

#### 8.1 Sex

Women continue to be over represented in grades from Apprentice to Band 8D and underrepresented above Band 8D. The levels for doctors in training are evenly balanced. It is reassuring to note that there have been significant increases in the number of women employed as apprentices, consultants, senior managers and managers employed at Band 8B and 8D. This may suggest that our Gender Pay Gap action plan is resulting in positive change. It must be rec recognised that these changes in numbers will probably take some years before they impact on the Gender Pay Gap calculations.

Pond	2017	,	2018	6	%
Band	Female	Male	Female	Male	Change
Apprentice	6	16	28	12	366.67%
AfC Band 1	30	14	29	12	-3.33%
AfC Band 2	1431	304	1431	304	0.00%
AfC Band 3	684	83	684	89	0.00%
AfC Band 4	419	84	435	96	3.82%
AfC Band 5	1375	252	1293	227	-5.96%
AfC Band 6	1061	166	1049	169	-1.13%
AfC Band 7	573	146	609	151	6.28%
AfC Band 8a	128	49	129	62	0.78%
AfC Band 8b	67	35	75	33	11.94%
AfC Band 8c	19	9	19	9	0.00%
AfC Band 8d	5	2	7	2	40.00%
AfC Band 9	1	2		2	-100.00%
Consultant	102	285	119	298	16.67%
Doctor in Training	199	210	214	179	7.54%
Non Consultant Doctor	47	77	47	89	0.00%
Senior Manager	12	11	14	12	16.67%
Grand Total	6159	1745	6182	1746	0.37%

Table 6 Sex

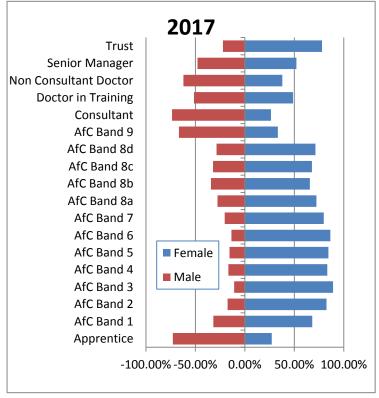


Chart 4 Band 2017

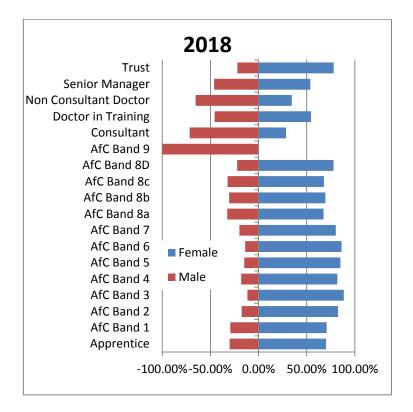


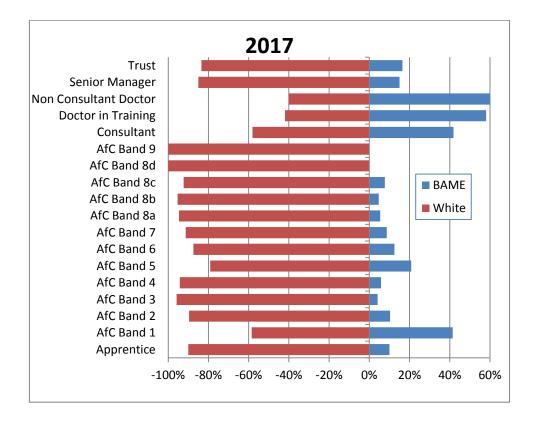
Chart 5 Band 2018

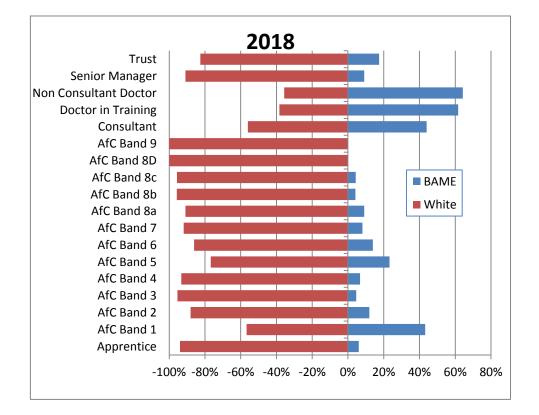
#### 8.2 Race

In general, the Trust employs a higher proportion of Black Asian and Minority Ethnic (BAME) staff than found in the local population. Currently 15% 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

	BAME		White		Not S	tated
Grade/Band	2017	2018	2017	2018	2017	2018
Apprentice	1	2	9	31	12	7
AfC Band 1	17	16	24	21	3	4
AfC Band 2	154	176	1335	1298	246	261
AfC Band 3	28	31	647	640	92	102
AfC Band 4	26	32	424	440	53	59
AfC Band 5	281	288	1067	953	279	279
AfC Band 6	135	146	946	905	146	167
AfC Band 7	57	55	600	623	62	82
AfC Band 8a	9	16	158	160	10	15
AfC Band 8b	4	4	82	91	16	13
AfC Band 8c	2	1	24	22	2	5
AfC Band 8d			7	8		1
AfC Band 9			3	2		
Consultant	142	157	197	200	48	60
Doctor in Training	209	177	151	110	49	106
Non Consultant						
Doctor	63	72	42	40	19	24
Senior Manager	3	2	17	20	3	4
Grand Total	1131	1175	5733	5564	1040	1189

Table 7 Ethnicity





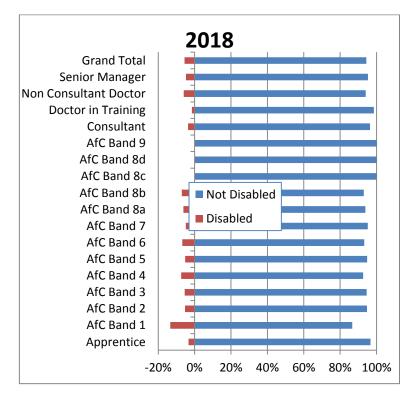
# 8.3 Disability

	2017									
Band/Grade	Not Not Disabled Declared		Disabled	Grand Total						
Apprentice	8	12	2	22						
AfC Band 1	26	13	5	44						
AfC Band 2	1110	560	65	1735						
AfC Band 3	504	232	31	767						
AfC Band 4	344	132	27	503						
AfC Band 5	1049	524	54	1627						
AfC Band 6	770	399	58	1227						
AfC Band 7	478	219	22	719						
AfC Band 8a	124	43	10	177						
AfC Band 8b	63	35	4	102						
AfC Band 8c	16	12		28						
AfC Band 8d	6	1		7						
AfC Band 9	3			3						
Consultant	195	182	10	387						
Doctor in Training	194	209	6	409						
Non Consultant Doctor	49	70	5	124						
Senior Manager	17	5	1	23						
Grand Total	4956	2648	300	7904						

Table 8 Disability 2017

	201	8		
Band/Grade	Not Disabled	Not Declared	Disabled	Grand Total
Apprentice	29	10	1	40
AfC Band 1	26	11	4	41
AfC Band 2	1114	559	62	1735
AfC Band 3	521	222	30	773
AfC Band 4	362	140	29	531
AfC Band 5	968	499	53	1520
AfC Band 6	760	403	55	1218
AfC Band 7	493	242	25	760
AfC Band 8a	137	45	9	191
AfC Band 8b	66	37	5	108
AfC Band 8c	15	13		28
AfC Band 8d	7	2		9
AfC Band 9	2			2
Consultant	213	196	8	417
Doctor in Training	67	325	1	393
Non Consultant Doctor	63	69	4	136
Senior Manager	20	5	1	26
Grand Total	4863	2778	287	7928

Table 9 Disability 2018



# Chart 6 Band & Disability

The UK Government's Office for Disability Issues states that 16% of working age adults have a disability. 3.62% 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.

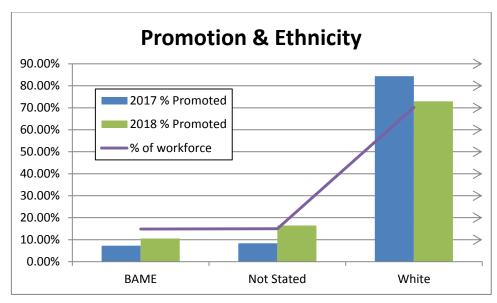
In Bands 8c, 8d, 9 and Exec. There are no staff who have declared a disability.

#### 9 Promotion

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

#### 9.1 Race

Ethnicity	2017 % Promoted	2018 % Promoted	% of workforce			
BAME	7.29%	10.59%	14.82%			
Not Stated	8.33%	16.47%	15.00%			
White	84.38%	72.94%	70.18%			
Table 10 Promotion & Ethnicity						



**Chart 7 Promotion & Etnicity** 

In The Year ending 31 March 2017, 7.29% of those promoted identified themselves as BAME when BAME staff constituted 14.82% of our staff.

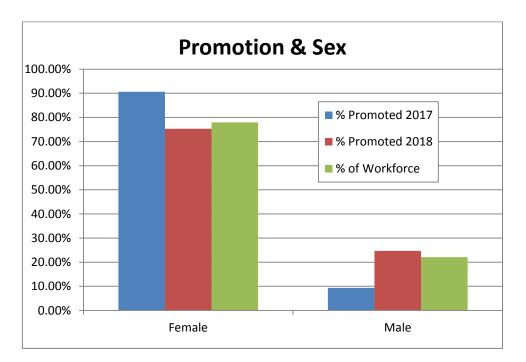
In The Year ending 31 March 2018 10.59% of those promoted identified themselves as BAME.

The proportion of BAME staff promoted increased by 3.3% 2018, which is significant improvement but which still needs to be a focus of activity.

#### 9.2 Sex

Sex	% Promoted 2017	% Promoted 2018	% of Workforce
Female	90.63%	75.29%	77.92%
Male	9.38%	24.71%	22.08%

Table 11 Promotion & Sex



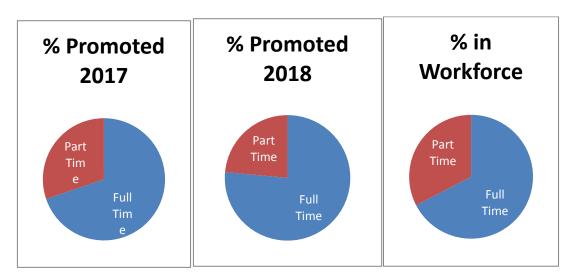
#### Chart 8 Promotion & Sex

Proportionately women were more likely to be promoted in 2017 and men more likely in 2018

#### 9.3 Working Pattern

Working pattern	% Promoted 2017	% Promoted 2018	% of Workforce	
Full Time	69.79%	76.47%	67.38%	
Part Time	30.21%	23.53%	32.62%	

Table 12 Promotion & Work Pattern



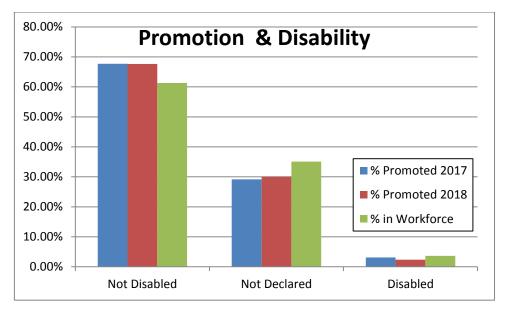
# **Chart 9 Promotion & Work Pattern**

During 2018, full time workers were promoted proportionately more than part-time workers.

#### 9.4 Disability

Disability	% Promoted 2017	% Promoted 2018	% in Workforce
Not Disabled	67.71%	67.65%	61.30%
Not Declared	29.17%	30.00%	35.08%
Disabled	3.13%	2.35%	3.62%

 Table 13 Promotion & Disability



**Chart 10 Disability & Promotion** 

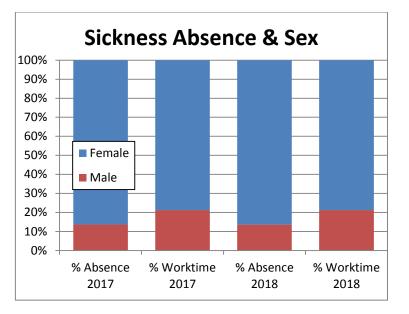
### 10 Sickness

In the following section, Worktime refers to the total time that staff are normally available for work show as a percentage for each relevant group.

# 10.1 Sex

Sex	% Absence 2017	% Worktime 2017	% Absence 2018	% Worktime 2018	
Female	86.31%	78.75%	86.41%	78.78%	
Male	13.69%	21.25%	13.59%	21.22%	

#### Table 14 Sickness & Sex



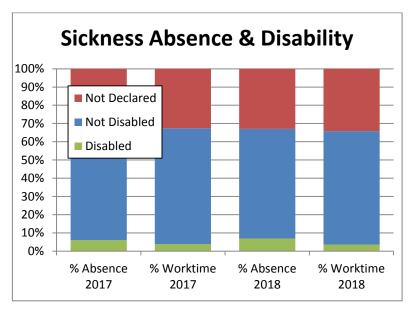
#### Chart 11 Sickness & Sex

Women who account for 78.7% of the workforce availability account for 86.41% of sickness absence. Men are contracted to work for 21.2% but are responsible for 13.5% of absence.

#### 10.2 Disability

Disability	% Absence 2017	% Worktime 2017	% Absence 2018	% Worktime 2018	
Not Disabled	57.27%	63.55%	60.15%	62.22%	
Not Declared	36.71%	32.63%	33.00%	34.21%	
Disabled	6.02%	3.82%	6.85%	3.58%	

Table 15 Sickness & Disability



#### **Chart 12 Sickness & Disability**

People who classified themselves as disabled on average took higher levels of sickness absence than those who did not. A very high proportion of staff have chosen not to declare their status.

1	0.3	Age
		<u> </u>

	% Absence	% Worktime	% Absence	% Worktime
Age Band	2017	2017	2018	2018
16 - 20	0.34%	0.57%	0.58%	0.56%
21 - 25	5.26%	7.01%	4.33%	6.16%
26 - 30	8.34%	12.30%	8.04%	12.00%
31 - 35	9.23%	11.20%	9.94%	11.43%
36 - 40	8.83%	11.89%	9.94%	12.10%
41 - 45	10.37%	12.86%	11.76%	13.04%
46 - 50	15.09%	13.67%	16.25%	13.55%
51 - 55	18.22%	14.63%	18.24%	14.46%
56 - 60	16.37%	10.29%	13.33%	10.92%
61 - 65	6.30%	4.38%	6.04%	4.47%
66 - 70	1.10%	0.80%	0.92%	0.90%
71 & above	0.54%	0.41%	0.62%	0.42%

Table 16 Sickness & Age

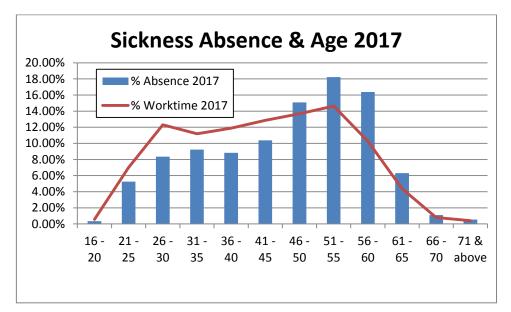


Chart 13 Sickness & Age 2017

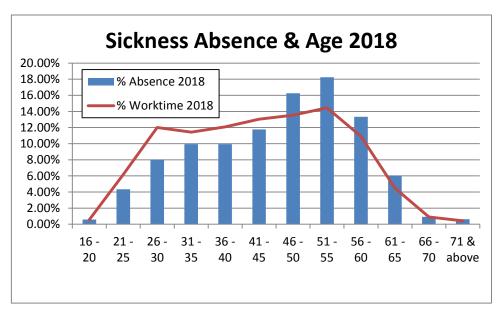


Chart 14 Sickness & Age 2018

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.

#### 10.4 Ethnicity

Ethnicity	% Absence 2017	% Worktime 2017	% Absence 2018	% Worktime 2018
BAME	8.61%	14.75%	9.94%	15.29%
Not Stated	11.20%	11.78%	13.56%	13.88%
White	80.20%	73.47%	76.50%	70.83%

Table 17 Ethnicity & Sickness

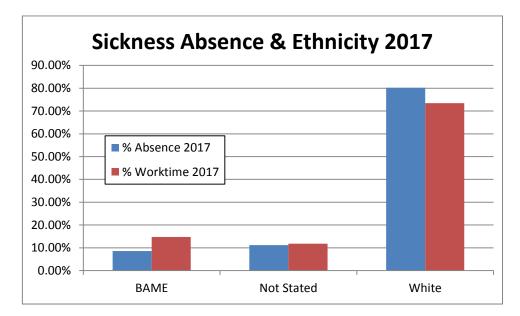


Chart 15 Sickness & Ethnicity 2017

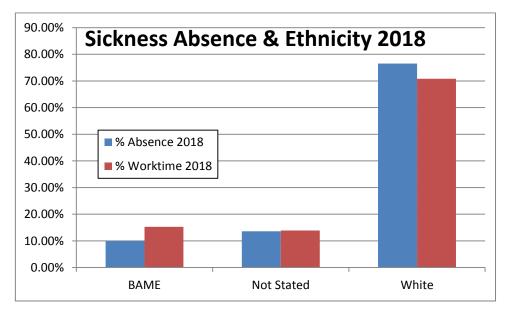


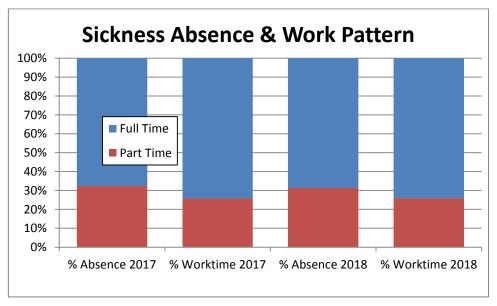
Chart 16 Sickness & Ethnicity 2018

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

# 10.5 Work Pattern

Work Pattern	% Absence 2017	% Worktime 2017	% Absence 2018	% Worktime 2018
Full Time	67.62%	74.19%	68.71%	74.02%
Part Time	32.38%	25.81%	31.29%	25.98%
Grand Total	100.00%	100.00%	100.00%	100.00%

Table 18 Sickness & Work Pattern



# Chart 17 Sickness & Work Pattern

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

11	Workforce Race Equality Standard 2017
----	---------------------------------------

#		Ethnicity	2015	2016	2017	2018
2	Relative likelihood of White staff being appointed from shortlisting compared to BAME staff:		1.59	1.54	1.17	1.21
3	Relative likelihood of BAME staff entering the formal disciplinary process compared to White staff:		1.35	0.56	0.35	0.41
4	Relative likelihood of White staff accessing non- mandatory training and CPD compared to BAME staff:		1.16	1.25	1.21	0.97
5	% of staff experiencing harassment, bullying or abuse from patients,	White	33.54%	32.19%	32.68%	33.73%
	relatives or the public in last 12 months	BAME	31.21%	31.77%	30.89%	33.33%
6	% of staff experiencing harassment, bullying or abuse from staff in last 12	White	41.82%	42.22	35.94%	34.42%
	months	BAME	38.35%	39.43%	34.59%	31.96%
7	% of staff believing that trust provides equal opportunities for career progression or	White	77.44%	82.48%	83.69%	83.36%
	promotion	BAME	67.60%	67.38%	74.67%	74.15%
8	% of staff personally experienced discrimination	White	10.49%	9.01%	8.13%	8.56%
	at work from Manager/team leader or other colleague	BAME	19.64%	20.58%	16.62%	17.31%
9A	Percentage difference between the organisations' Board membership and its overall workforce	White	23.07%	-3.9%	6.06%	8.41%
	disaggregated: By voting membership of the Board	BAME	14.27%	5.84%	7.12%	-0.55%
9B	Percentage difference between the organisations' Board membership and its overall workforce	White	23.07%	0.6%	13.18%	1.30%
	disaggregated: By executive membership of the Board	BAME	14.27%	2.5%	-0.00%	13.7%
-	rovement over last year					
	se than last year					

Table 19 WRES

# 12 Other Diversity and Inclusion Activity

#### 12.1 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.

#### 12.2 Kent Surrey & Sussex (KSS) Diversity Leads Group

The KSS Diversity Leads Group is attended by our Head of Diversity and Inclusion. The KSS Leadership Academy is supporting the KSS Inclusion Network

- 1. A leadership development programme on leading, influencing and facilitating change specifically for ED&I leads, or people leading on ED&I
- 2. A programme of mentoring for ED&I leads
- 3. Coaching for ED&I leads and focused Coaching for people from groups underrepresented at senior levels
- 4. Support for ED&I leads attending leadership development programmes

# 12.3 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.

East Kent Hospitals has recently rejoined the network and look forward to meeting with our account manager to discuss how enei can support the trust.

# 12.4 Two Ticks and Age Positive



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

#### 12.5 Diversity and Inclusion (D&I) Steering Group

The D&I steering group chaired the Director of Human resources. Steering Group standing members include Chief Nurse and Director of Quality, Director of Communications and Engagement. The Chairs of our BAME Network, Disabled staff council LGBT+ Network 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

#### 12.6 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.

#### 12.7 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