



**Warrington & Halton Hospitals NHS Foundation Trust**  
**Annual Workforce Equality Analysis (2014)**



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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 Specialist on 01925 275229.

## **1. Introduction**

### **1.1 About this report**

This report looks at the profiles of people accessing workforce and employment related opportunities at Warrington and Halton Hospitals NHS Foundation Trust (WHH), based on requirements defined within the new single equality duty and related elements within other equality and employment legislation. It accompanies the Equality Duty Assurance Report 2015 (EDAR).

This report refers to the period January 1<sup>st</sup> 2014 to December 1<sup>st</sup> 2014 (unless otherwise indicated).

### **1.2 About the organisation**

Warrington and Halton Hospitals NHS Foundation Trust (WHH) manage Warrington Hospital and Halton General Hospitals in the North West of England. We also operate a step down care facility at Houghton Hall. The two hospitals work together to provide high quality health care services across the towns of Warrington, Runcorn, Widnes and the surrounding areas.

In December 1<sup>st</sup> 2008 we became an NHS Foundation Trust and our name was changed from North Cheshire Hospitals NHS Trust. This allowed us to better involve our patients and the public in how we are managed. Only the best performing and best run NHS hospitals are granted Foundation Trust status.

We are a good performing trust and our quality of services has been rated as 'good' by the Healthcare Commission for the last two years. At Warrington and Halton hospitals we have some of the lowest waiting times in England which means you can be seen quickly for your care.

The trust manages over 4,000 staff and provides access to care for over 300,000 patients. The workplace is an important place and our employees are our greatest asset.

Warrington and Halton Hospitals NHS Foundation Trust is committed to improving the health and wellbeing of the people we serve and employ. Warrington and Halton Hospitals NHS Foundation Trust aim to be a leading organisation for promoting Equality and Diversity (E&D).

### **1.3 Single Equality Scheme**

The Trust meets its statutory obligations and has published an equality duty assurance report for 2015, outlining how it will sustain this. In January 2014, the workforce equality analysis report for 2013 was published. In April 2013, the Trust published its equality objectives within the inaugural Equality strategy 2013 to 2017. The Trust has embedded equality analysis into the review and development of policies, functions, services and planning. The Trust has built up an inclusive 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 5<sup>th</sup> 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;**
  - Medical and Nursing & Midwifery
  - Gender analysis in Clinical Leadership:
- **Leavers and Starters;**
- **Applicants for employment;**
  - NHS Jobs equality monitoring on applications
  - NHS Jobs equality monitoring on short listing
- **Staff who benefit or suffer detriment as a result of performance assessment procedures;**
- **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

### 2.2 General Reporting Principles

In December 2012, the ONS 2011 census data sets were disaggregated into reports for Local Authority domains in Cheshire, which include Halton and Warrington, by the online demographics portal 'DORIC' (Data Observatory Research & Intelligence Collaborative).

Workforce demographics in this report will be compared to the local populations (where known) of Warrington and Halton across the protected characteristics. Where the ONS census results on different groups is not available, then there may be different sources used, e.g. Local Authority resident population estimates, National Charities / Research.

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

### **2.3 Overall staffing levels**

The overall staff headcount for the reporting is **4,172**

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 Warrington and Halton Borough Council domain populations 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** <sup>(1)</sup>

##### **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).

#### 4. Equality Demographics

##### 4.1 Numbers of Staff in Post:

### Medical and Dental

| Role                          | Role Total |
|-------------------------------|------------|
| Associate Specialist (Closed) |            |
| Clinical Assistant            |            |
| Clinical Medical Officer      |            |
| Consultant                    | 154        |
| Foundation Year 1             | 38         |
| Foundation Year 2             | 40         |
| Hospital Practitioner         |            |
| Medical Director              |            |
| Senior House Officer (Closed) |            |
| Specialist Registrar (Closed) |            |
| Specialty Doctor              | 39         |
| Specialty Registrar           |            |
| Staff Grade (Closed)          |            |
|                               |            |

### Nursing & Midwifery Registered

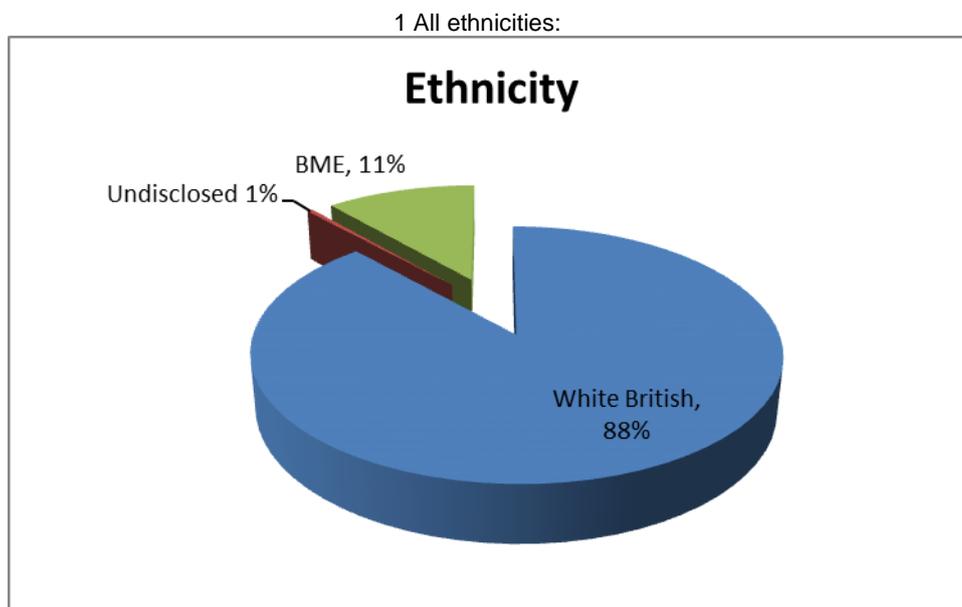
| Role                              | Role Total |
|-----------------------------------|------------|
| Community Nurse                   |            |
| Community Practitioner            |            |
| Director of Nursing               |            |
| Midwife                           | 123        |
| Midwife - Specialist Practitioner | 6          |
| Modern Matron                     | 17         |
| Nurse Consultant                  |            |
| Nurse Manager                     | 18         |
| Sister/Charge Nurse               | 35         |
| Specialist Nurse Practitioner     | 150        |
| Staff Nurse                       | 666        |
|                                   |            |

## Other

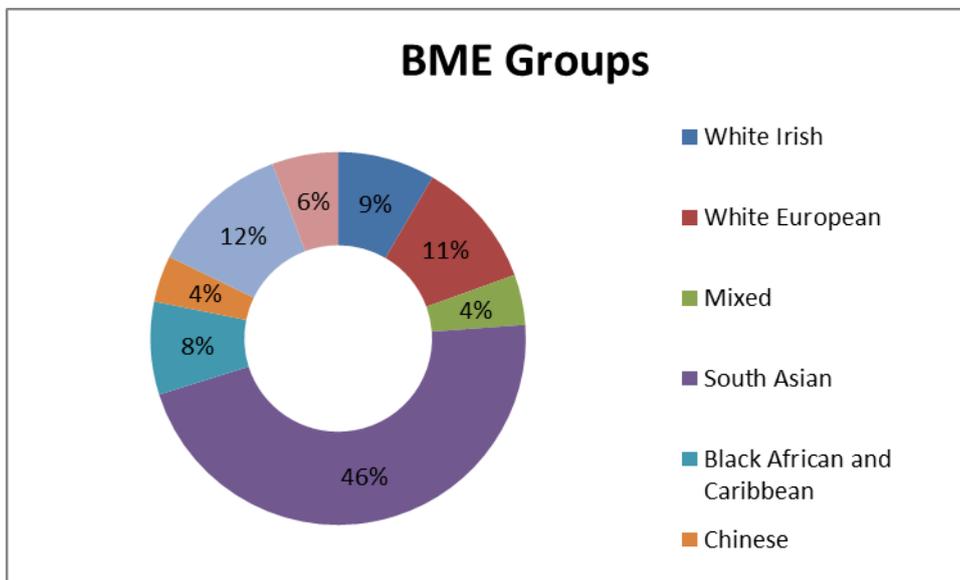
| Role                            | Role Total |
|---------------------------------|------------|
| Add Prof Scientific and Technic | 194        |
| Additional Clinical Services    | 721        |
| Administrative and Clerical     | 854        |
| Allied Health Professionals     | 325        |
| Estates and Ancillary           | 446        |
| Healthcare Scientists           | 104        |

(1) All assignments headcount by role

### 4.2 Ethnicity:



2 Black & Minority Ethnic (BME) break down:



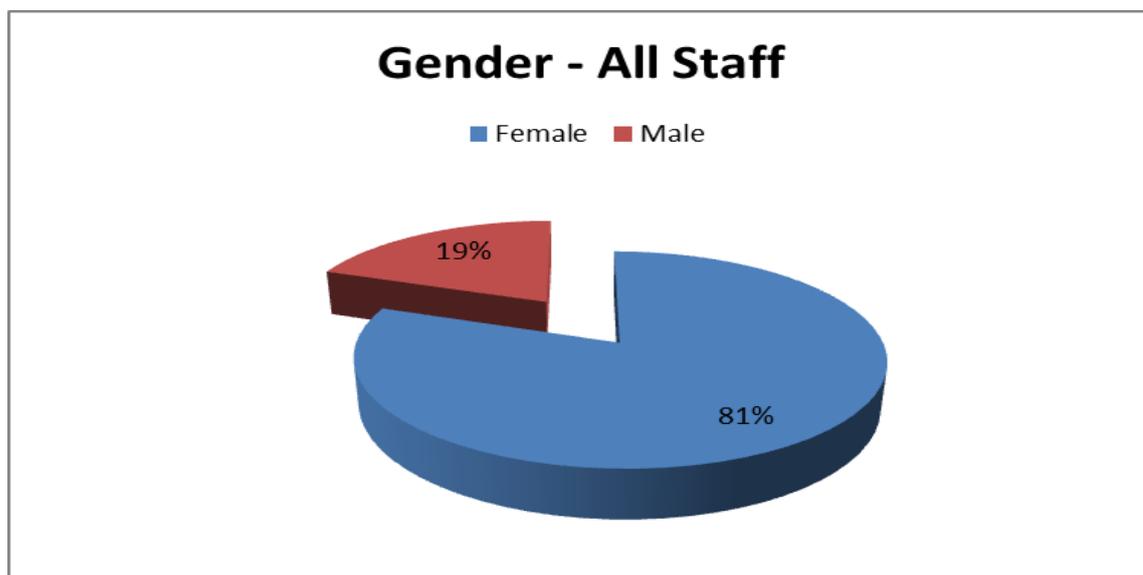
#### Analysis:

The known ethnicity profile of the Trust is remarkably high at 99%. The highest ethnicity is 'White British' at 88, a fall in 0.1 since 2014%. The second highest ethnicity is *South Asian* consisting of 46% of BME. 'BME' (Black and Minority Ethnic) staff account for 11%. 'Undefined' is at just less than 1%. The BME population in Warrington is recorded at 7.1% and for Halton is 3.6%. This is according to the Office for National Statistics (ONS) 2011 Census <sup>(1)</sup>. The BME staff population when compared to the Warrington BME populous is just over 20% higher. When compared to Halton, the BME workforce is two and a half times higher. The Trust can clearly show that it is more than representative of the local population with regard to ethnicity.

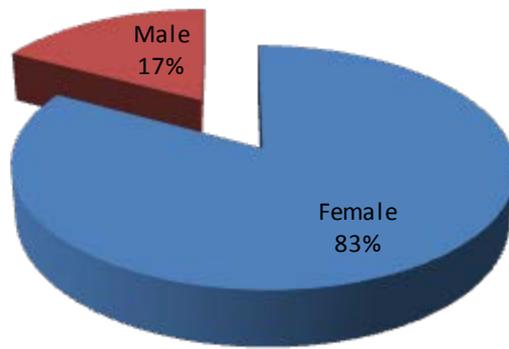
BME leadership is found mostly in medical posts across the Trust, especially Consultant posts, where BME Doctors account for 57%. The predominant ethnicity regarding Nurse leadership is 'White British'. The highest number of BME staff working in other leadership roles (band 5 or above) is 21% of these positions making 'White British' predominant in leadership in other areas.

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

### 4.3 Gender



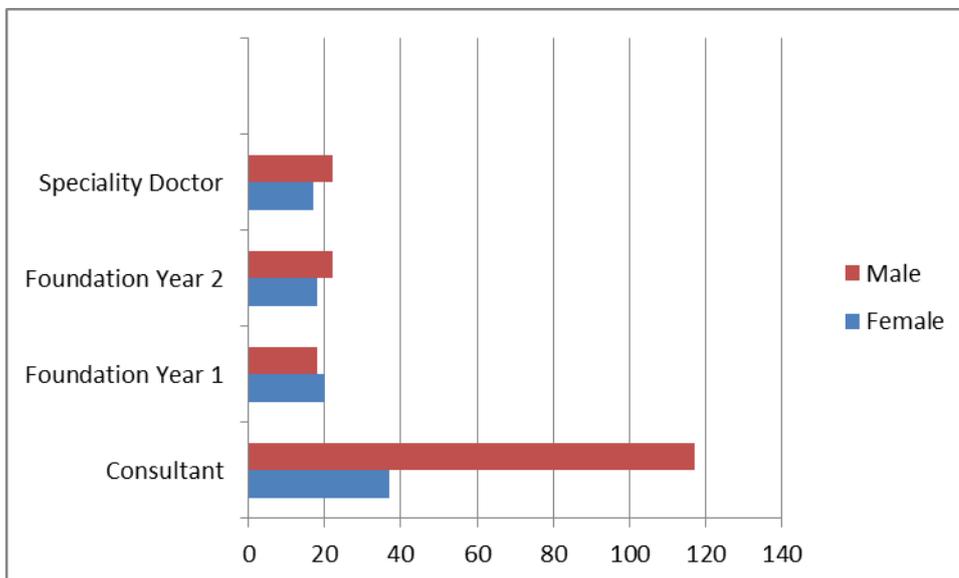
## Leadership Bands 7 to 8C



Women account for 81% of the workforce and men 19%. The distribution of leadership roles appears to reflect equitable access to each gender for leadership positions. Overall with regard to non medical leadership positions, women in the Trust workforce represent more than the local female population census accounts for Warrington at 50.4% and Halton at 51.2% (1)

The gender make up in medical staffing is 66% male, 34% female. Males account for approximately 76% of all Consultant positions. Women are more represented at Foundation one and two at 54.5% and make up 44% of Specialist posts, which is a higher sum to the gender make up for medical staffing as a whole.

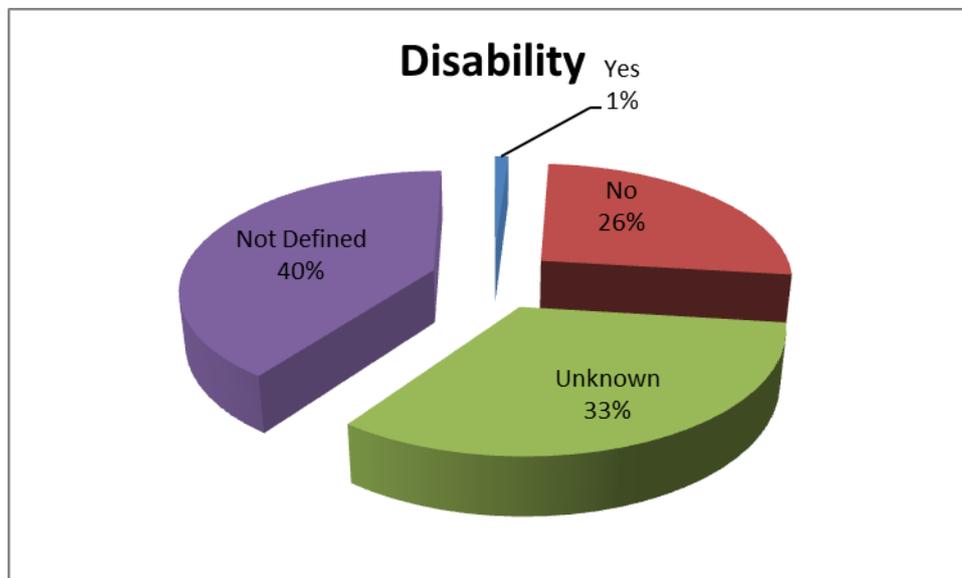
## Doctors



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

## 4.4 Disability

### Disability status:



The ESR profile for disability status in the workforce shows that there are very significant gaps in the data that can be analysed. The *known* disability status of employees has only slightly increased from 17% in 2012, to 19% in 2013, though an encouraging rise to 27% in 2014. 'Unknown' or not defined status remains at a high. Like 2012 and 2013, the number of staff stating 'Yes', that they are disabled remains at just below one per cent.

The figures for people living in Halton who are claiming Disability Allowance and related disability benefits is very high at 8.9% (1). In Warrington's local population the same cohort amounts to 5.65% (1). In residential estimates, the population who record as being disabled/living with life limiting illnesses for Halton is 21.5% of the local population and for Warrington 18% (2).

Promoting the benefits of staff declaring their disability status needs to be further undertaken in 2015, as there are currently large gaps in the knowledge base of the Trust. There are extended legislative powers around disability and discrimination within the Equality Act (2010) and specific requirements under the public sector equality duty (2011). It is important that all disabled employees are aware that they need to consider disclosing their disability to their employer, in order for them to fall under the full protection of the Equality Act (2010). This information is now automatically downloaded from successful applications via NHSJobs.

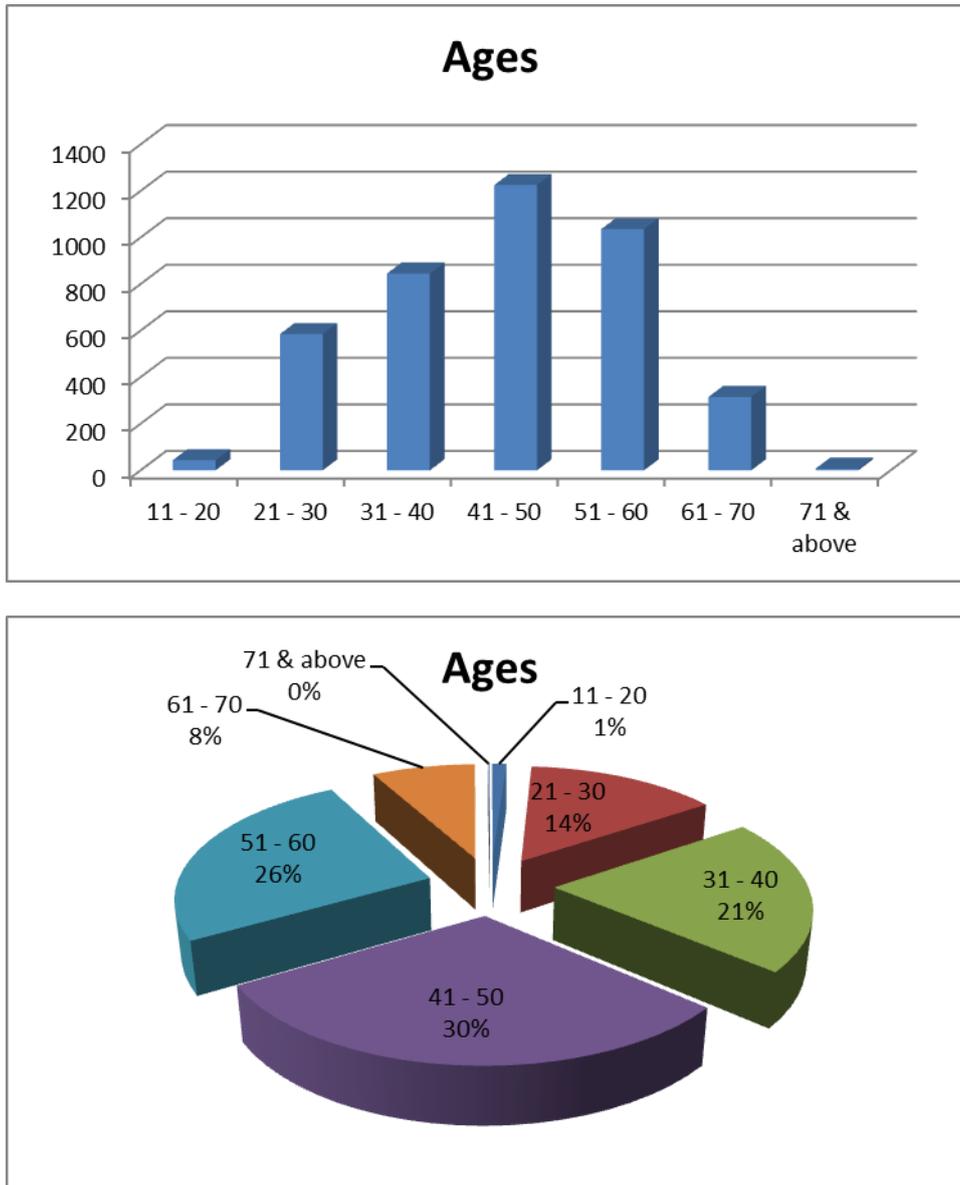
On a positive theme, due to its fair and equitable policies and recruitment functions, the Trust retained the 'Two Ticks' symbol accreditation for commitments to disabled people in 2014.

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

(2) Halton and Warrington disability profile; Neighbourhood statistics.gov.uk , (August 2010)

## 4.5 Age

Age Profile



The age group representing the highest percentage is age band 41 to 50 years which is recorded at 30.%, with age range 51-60 years accounting for 26% of the total workforce. Age bands 71 plus and 11 to 20 years are the lowest at just over a total of 1%. This represents no change on the figures of 2013.

The age range profile indicates that employees aged 40 years and above account for 64% of the workforce. The range consisting of ages 60 years and above totals 8%, a minuscule increase since 2014. In 2011, the Employment Equality (Repeal of Retirement Age Provisions) Regulations came into force <sup>(1)</sup>. This repealed the default retirement age of 65 years and provides protection for those aged 65 years and over from default retirement based on their date of birth. In line with the

amendments in law, the Trust can demonstrate clearly that it is adherent to age equality in employment.

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

#### 4.6 Religion or Belief

##### Religion or Belief Status

|   |        |
|---|--------|
| <b>Atheism</b>                                      | 3.77%  |
| <b>Buddhism</b>                                     | 0.15%  |
| <b>Christianity</b>                                 | 31.95% |
| <b>Hinduism</b>                                     | 0.59%  |
| <b>I do not wish to disclose my religion/belief</b> | 17.46% |
| <b>Islam</b>  | 0.84%  |
| <b>Judaism</b>                                      | 0.02%  |
| <b>Other</b>  | 4.19%  |
| <b>Sikhism</b>                                      | 0.15%  |
| <b>Undefined</b>                                    | 40.88% |

The total *known* status for any religion or belief has improved again on the 2013 workforce figure by over 4% and is now at 37.48% *'Undefined'* has come down by a further 7% in 2014 and is just over 40%. The number of staff who *did not wish to disclose* their religion or belief is the same as last year and the year before at just over 17%.

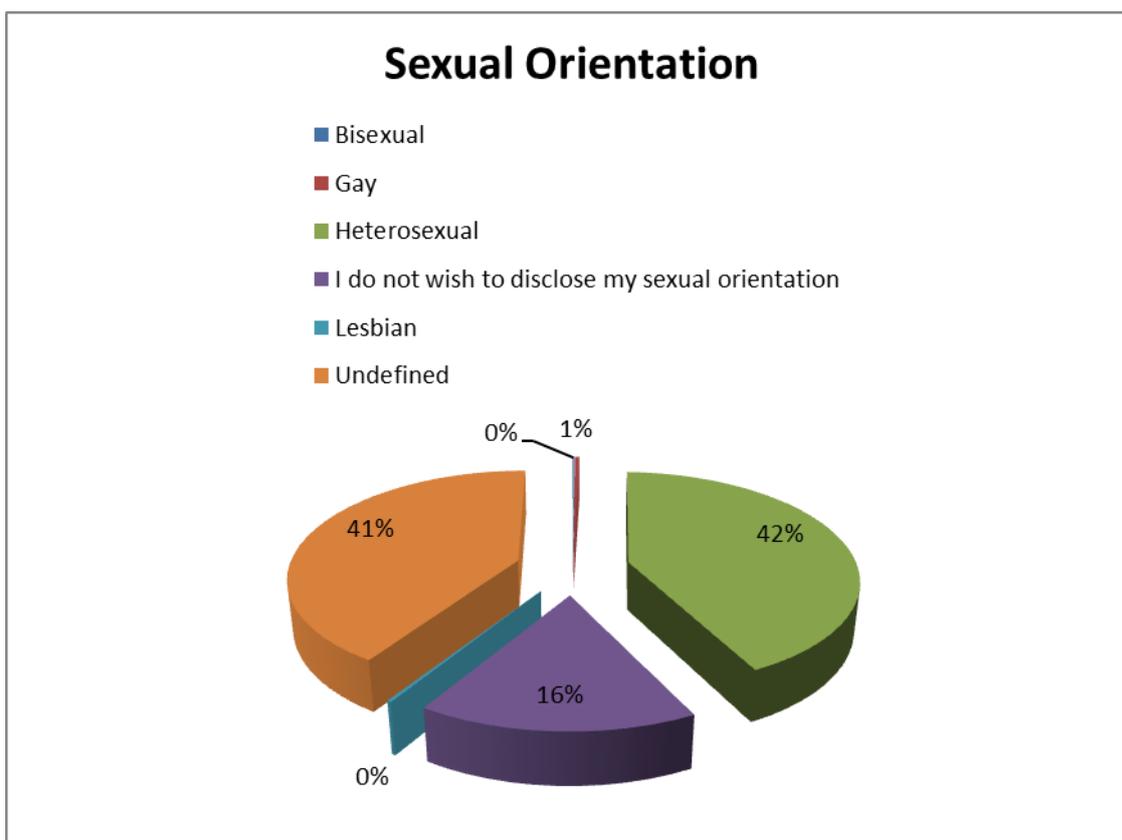
As in 2012 and 2013, *'Christianity'* is the predominant known religion or belief amounting to almost 32% of the total workforce, a repeated increase of 4%. The other statistically significant figures are for *'Atheism'* recorded at nearly 4% and *'Other religions'* at nearly 5%. Islam was the highest in the *'Other religions'* domain at 0.8%.

The figures for the populations of Warrington and Halton recorded in the 2011 census are indicated in the table below (1):

| Religion/Belief %   | Halton      | Warrington  |
|---------------------|-------------|-------------|
| <b>Christianity</b> | <b>75</b>   | <b>71.4</b> |
| <b>Hinduism</b>     | <b>0.2</b>  | <b>0.6</b>  |
| <b>Islam</b>        | <b>0.2</b>  | <b>1</b>    |
| <b>Judaism</b>      | <b>0</b>    | <b>0.1</b>  |
| <b>Other</b>        | <b>0.2</b>  | <b>0.3</b>  |
| <b>Sikhism</b>      | <b>0</b>    | <b>0.2</b>  |
| <b>Not stated</b>   | <b>5.4</b>  | <b>5.9</b>  |
| <b>Atheism</b>      | <b>18.7</b> | <b>20.4</b> |
| <b>Buddhism</b>     | <b>0.2</b>  | <b>0.2</b>  |

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

## 4.7 Sexual Orientation



The *known status* with regard to sexual orientation in 2014 has increased by 6% from 2013 and now accounts for approximately 43% of the total workforce. This figure leaves gaps in data intelligence making it more difficult to provide assurance that the Trust can identify and support all its employees regardless of their sexual orientation status.

Figures for *Lesbian Gay* and *Bisexual* combined, amounted to approximately less than 1%. There is no real change on last year's analysis for LGB staff therefore. The number of LGB applicants in 2014 amounted to nearly 3%% of the total, little change from 2013. The percentage who did not disclose was just dropped very slightly to 5%. This indicates that LGB and heterosexual staff applying for positions through the NHS Jobs portal feel more able to identify their sexuality, but that more needs to be done in encouraging this data and ensuring potential staff feel secure to do so. The national estimation for people identifying as Lesbian Gay and Bisexual (LGB) is between 5-7% (1). There are no population census records for the Local Authority domains and the national 2011 ONS census did not ask for sexual orientation status. 42% of employees identify as *heterosexual* or straight, an increase from 30% in 2011.

'*Undefined*' status records have reduced notably from 47% in 2013 to 41% in 2014. 16% of staff still *Did not wish to say* their sexual orientation status in 2014. These employees have made a clear statement that for personal reasons, they did not want to declare their sexuality. This concurs with a pattern in other NHS Trusts over the past few years of a reduction annually in the percentage of '*Undefined*' returns and a rise in '*Did not wish to disclose*', with moderate increases in disclosures in the other sexual orientation status fields.

In line with guidance from the Government Equalities Office and Equality and Human Rights Commission, the Trust should consider working more closely with local and regional LGBT organisations and community interests to gain patient and staff perspectives and increase the potential for future employees disclosing their sexual orientation. In addition, more understanding is needed and reassurance given as to the motives for collecting such data.

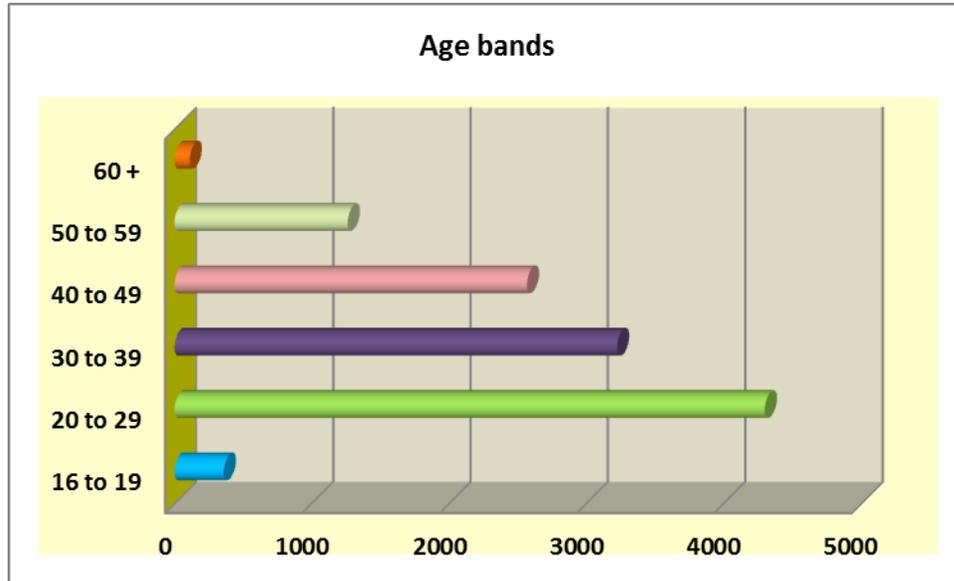
In 2012, 2013, and 2014 the Trust has participated in Warrington Prides and has promoted World AIDS Day events, national HIV screening week and its Sexual Health services, to demonstrate how it is trying to engage with Lesbian, Gay and Bisexual members of the community that it serves. The Trust has also joined Warrington Hate Crime Committee in 2014.

(1) Government LGB population estimates; [Stonewall.org.uk](http://Stonewall.org.uk) (2011)

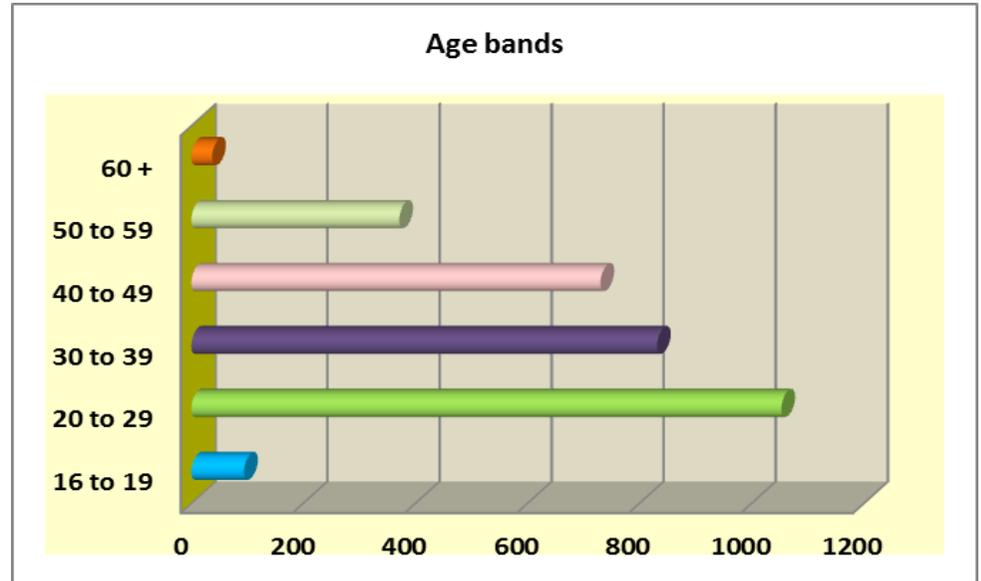
## 5 Section two Workforce dynamics

### 5.1 Recruitment profile

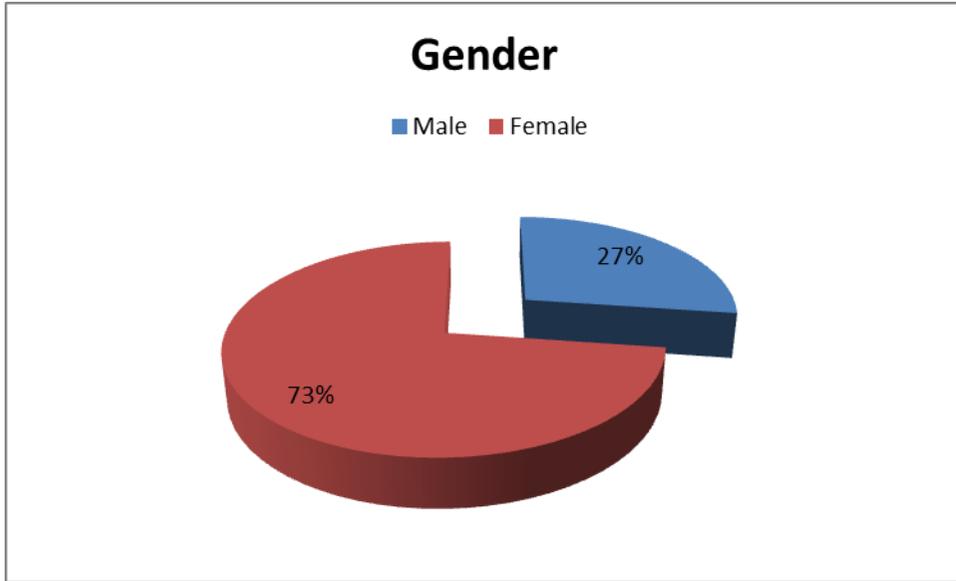
Applications:



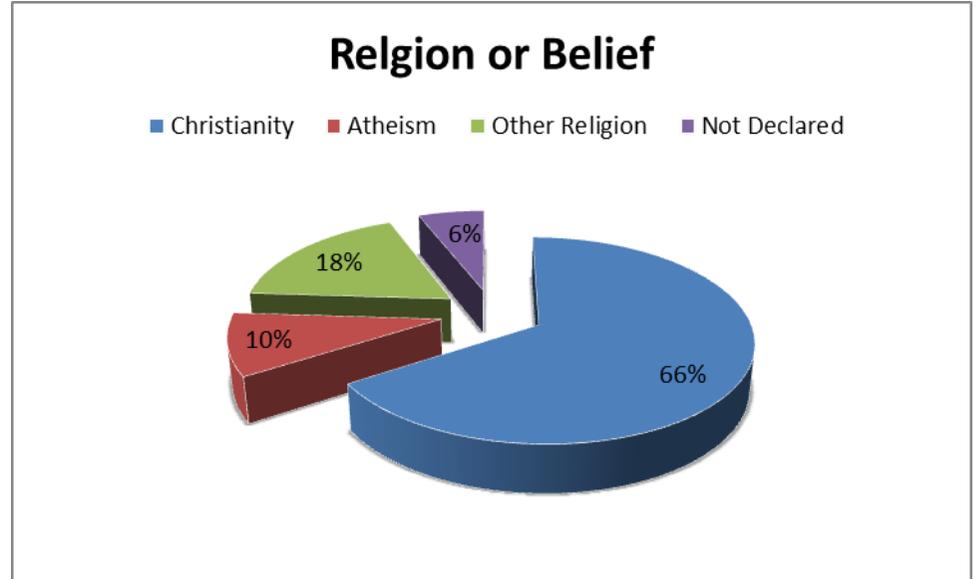
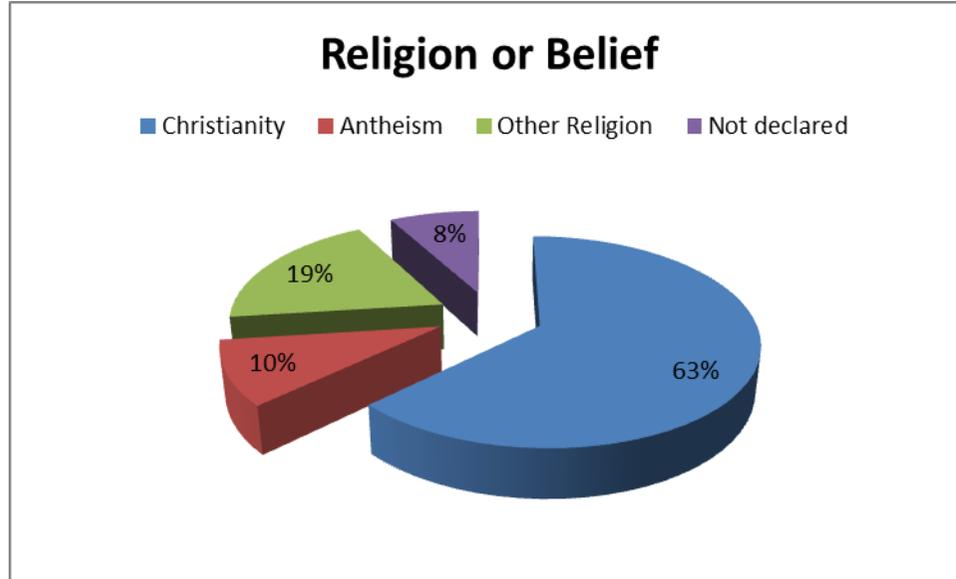
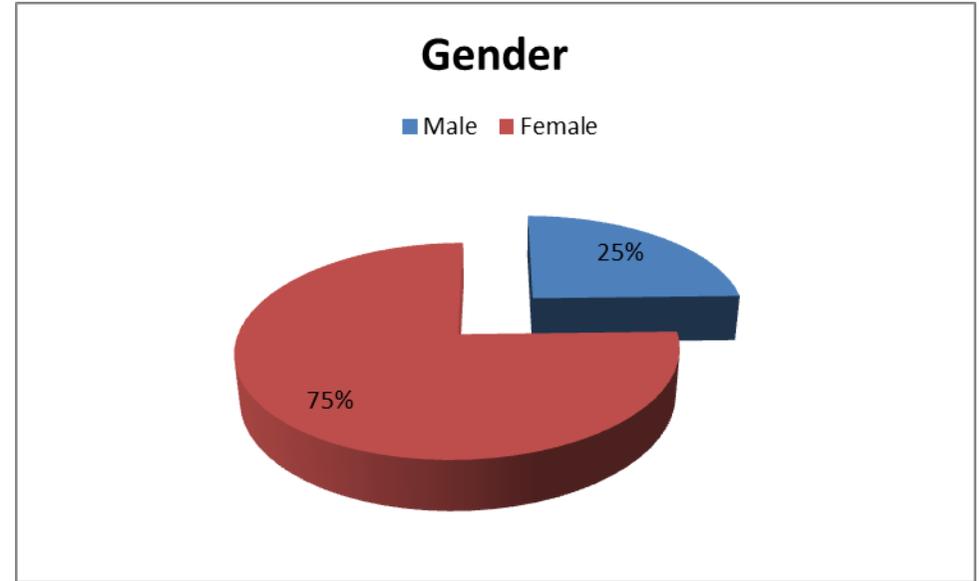
Shortlisted:



### Applications:



### Shortlisted:

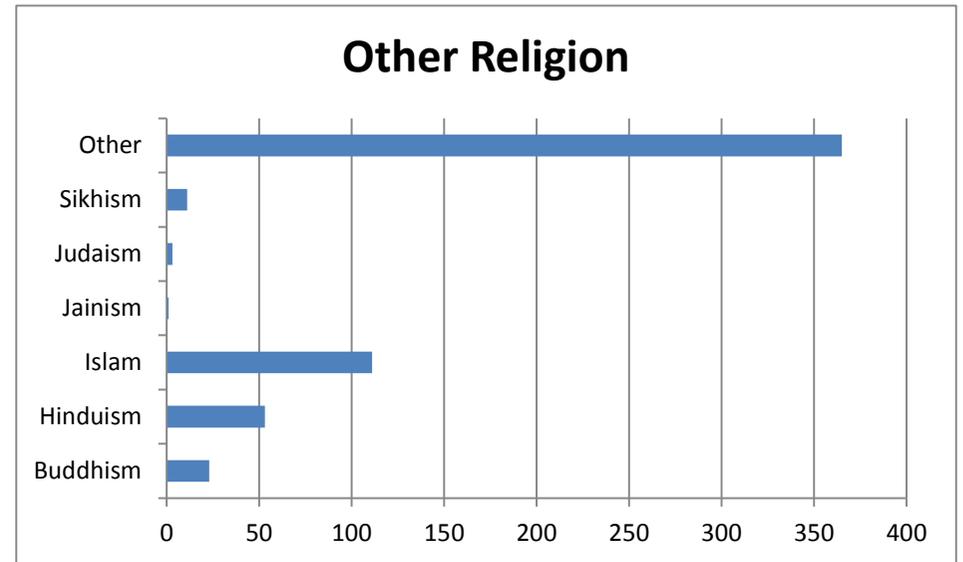
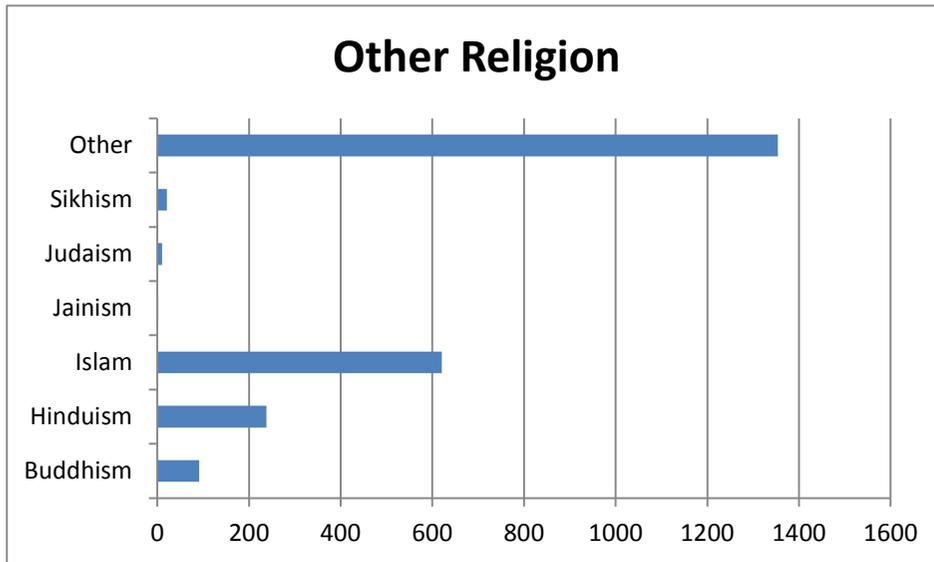


**Applications:**

**Shortlisted:**

**Other Religion**

**Other Religion**

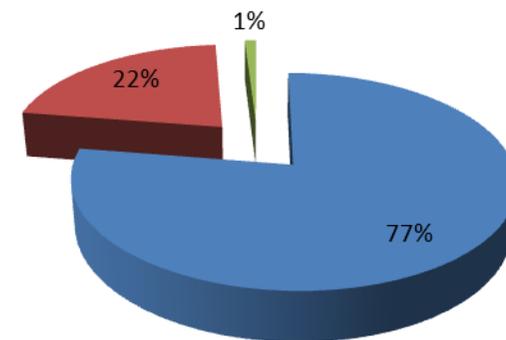
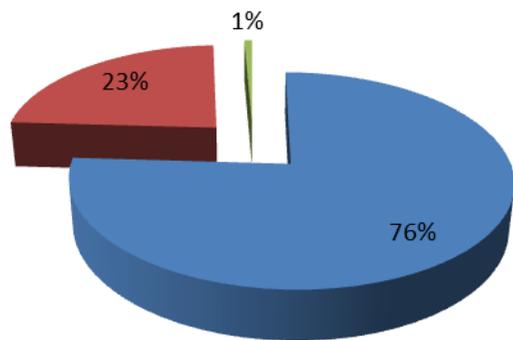


**Ethnicity**

**Ethnicity**

■ White-British ■ BME ■ Unknown

■ White-British ■ BME ■ Unknown



### Applications:

#### BME



### Shortlisted:

#### BME



#### Disability



#### Disability



### Applications:

| Sexual Orientation | %   |
|--------------------|-----|
| Lesbian            | 1%  |
| Gay                | 1%  |
| Bisexual           | 1%  |
| Heterosexual       | 92% |
| Undisclosed        | 5%  |

### Shortlisted:

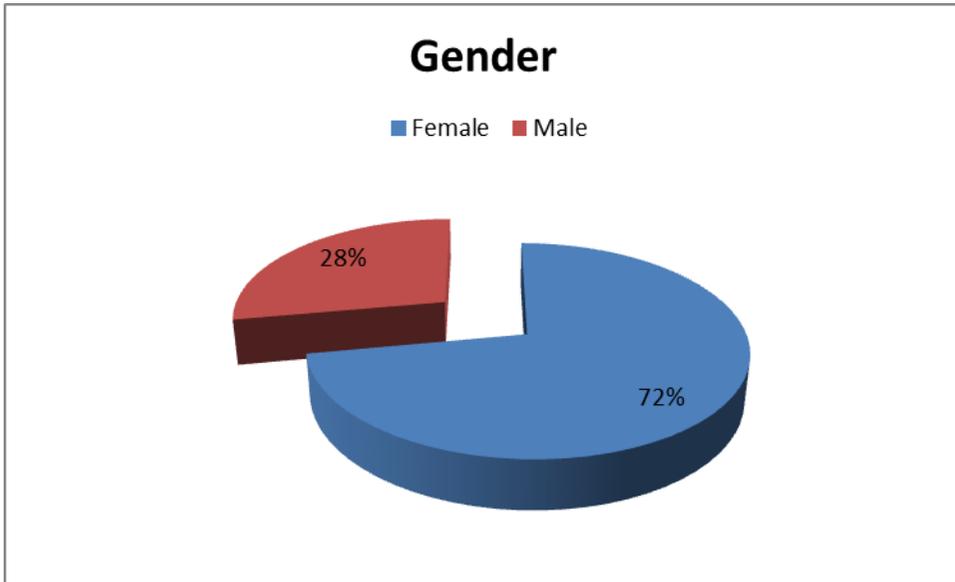
| Sexual Orientation | %   |
|--------------------|-----|
| Lesbian            | 0%  |
| Gay                | 1%  |
| Bisexual           | 1%  |
| Heterosexual       | 92% |
| Undisclosed        | 6%  |

As the charts indicate, there are no identified adverse patterns regarding applications and short listing in recruitment, across the protected characteristics in 2014. Age ranges of people shortlisted tallies well to the age of applicants and no age discrimination is indicated. Ethnicity shows a slight reduction in BME applicants being shortlisted but this is minimal at 1%. It is important to note that no information relating to any applicant's protected characteristics is seen by those short listing, unless a disabled applicant indicates their status (1). In proportion to applications, both 'disabled' and 'non-disabled' were again equally shortlisted in 2014. The Trust regained its 'two ticks' accreditation and is seen demonstrating how it is meeting disability equality obligations. LGB applicants were as likely as Heterosexuals to be shortlisted and women were more likely to be shortlisted than men in 2014.

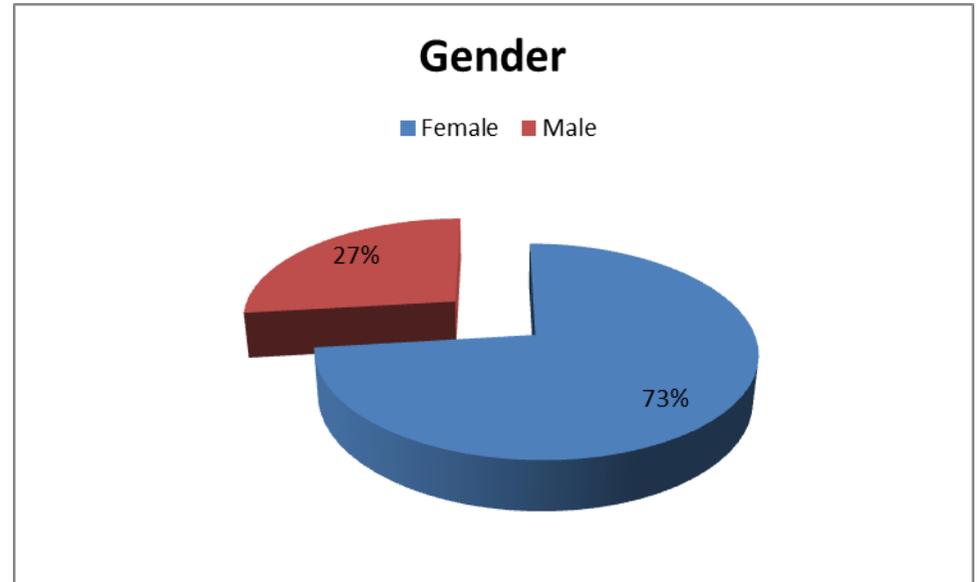
(1) Disabled applicants are identified where *reasonable adjustments* for interviews are required, although disabled applicants need not disclose a disability before an offer of employment

## 5.2 Leavers and Starters

Leavers:

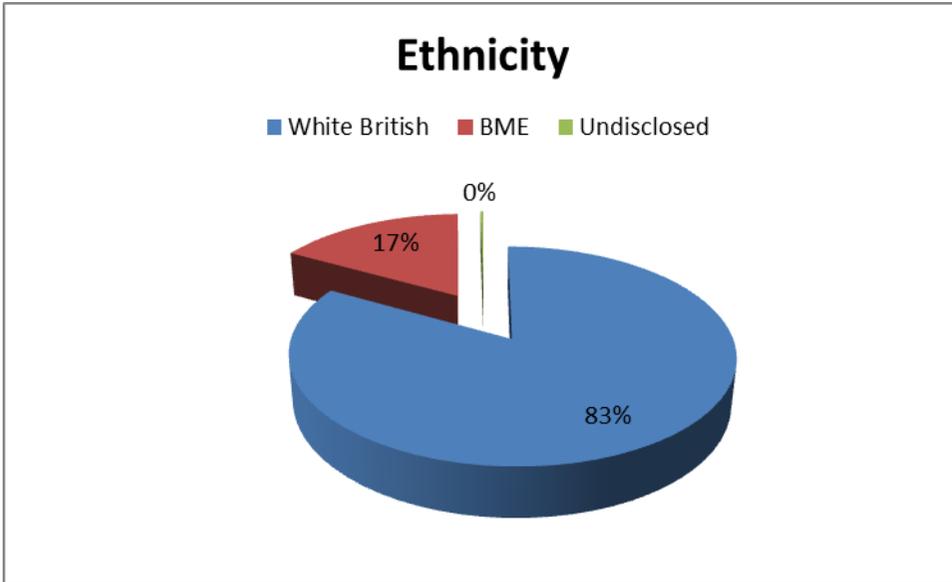


Starters:

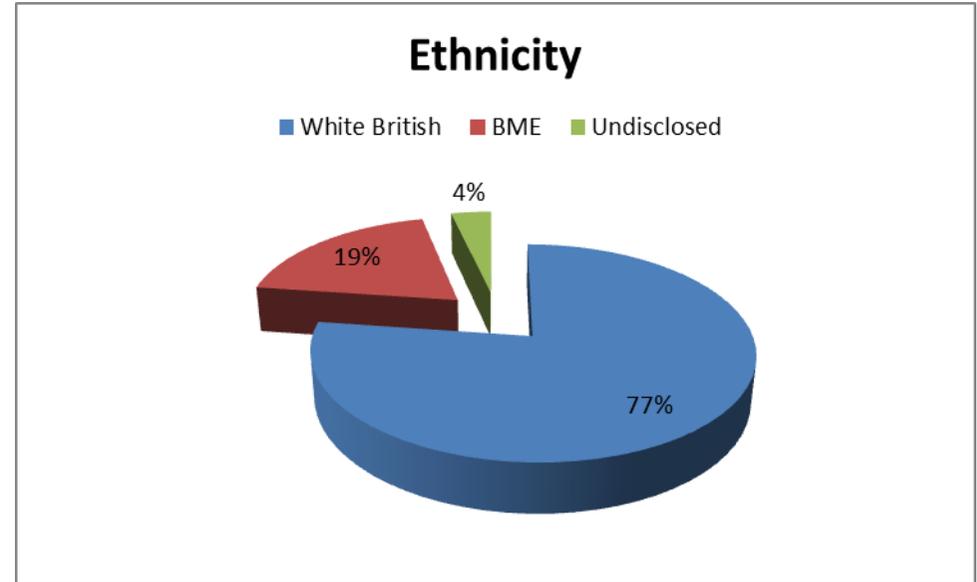


The male component of the total workforce is 19%. In 2014, 27% of leavers were male but 28% of employees starting were male, showing a slight increase in male staff. In relation to the gender balance over 2014, there is no trend or pattern of statistical merit. Gender ratios remain as they were in 2012 and 2013.

**Leavers:**

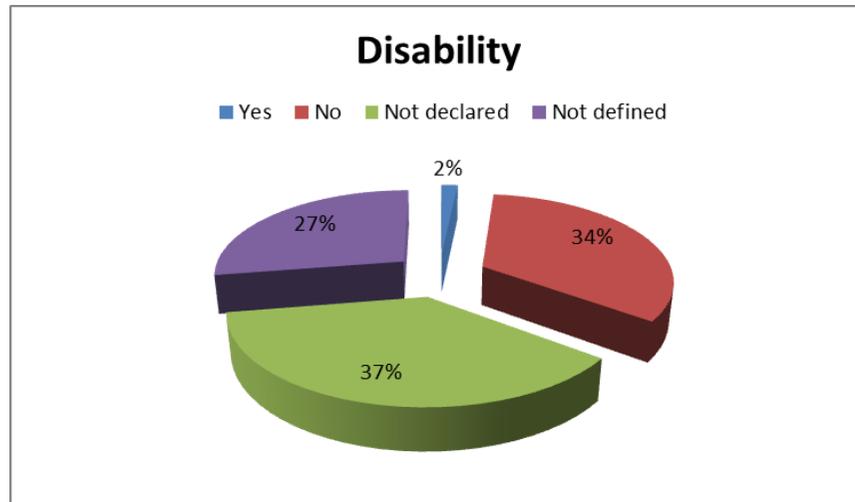


**Starters:**

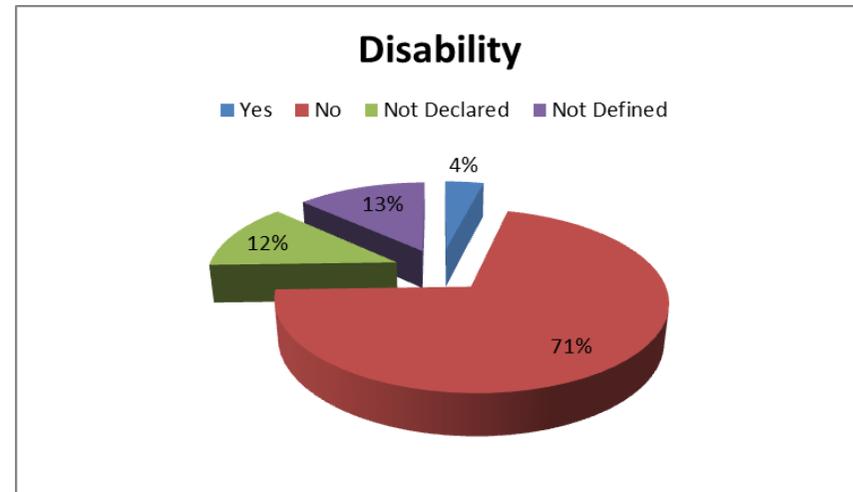


In 2014, the number of leavers was highest in the *White British* ethnicity grouping with the number of *BME* starters outnumbering the number who left over the same period. *BME* staff represent 11% of the total current workforce, which stood at 10% in 2012 and 10.5% in 2013. The increase in 2013 raised the total *BME* percentage of the workforce by 0.5% and a further increase occurred of 0.5% in 2014 despite a higher leaver percentage.

### Leavers:



### Starters:



The largest percentage of leavers disability status is 'unknown' at 71%, with only 2% declaring a disability. New starters were more willing to share this information with 75% being willing to declare yes/no. 83% of staff were willing to share their disability status in 2014, indicating that people are more comfortable than previously to share this data.

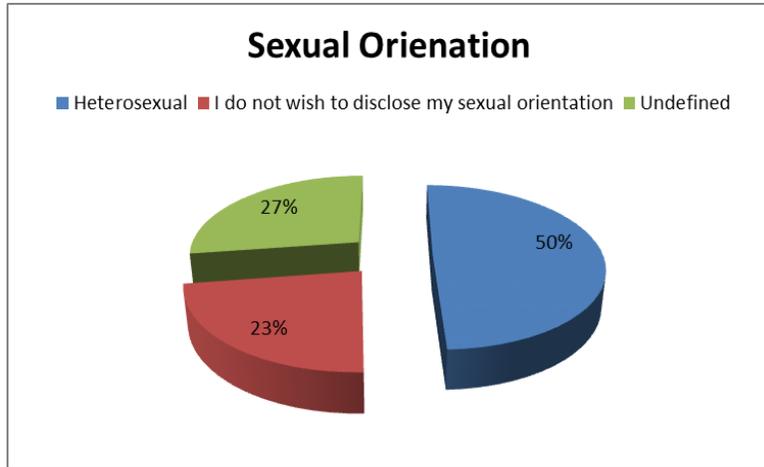
### Religion and Belief

|  |        |
|--|--------|
| Atheism                                      | 4.92%  |
| Christianity                                 | 35.25% |
| Other  | 7.65%  |
| Undefined                                    | 27.32% |
| I do not wish to disclose my religion/belief | 24.86% |

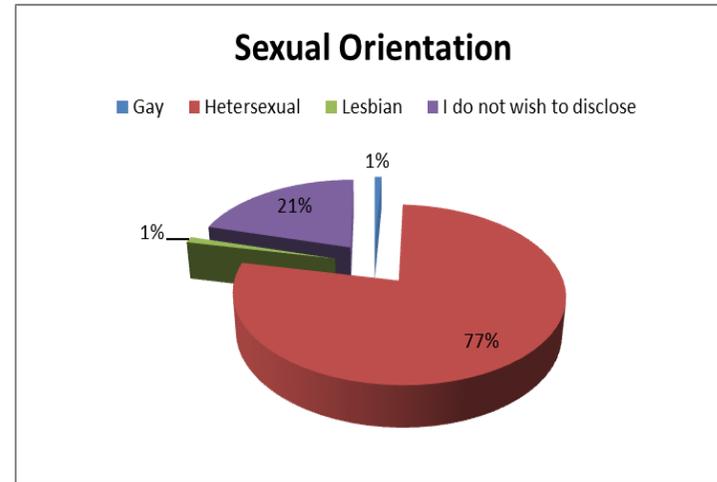
|                         |        |
|-------------------------|--------|
| Atheism                 | 11.36% |
| Christianity            | 53.74% |
| Other                   | 11.36% |
| Undefined               | 0.28%  |
| Do not wish to disclose | 23.27% |

The largest percentage of leavers was Christian at 35.25%, though there is a high amount of undefined and undeclared status. Starters held more accurate data with the *known* religion or belief status of starters higher than in previous years at 77%.

**Leavers:**



**Starters:**



With the majority of leavers registering as heterosexual at 50%, the remaining categories give little reliable data at 'undefined' or not 'willing to disclose'. There is a slight improvement on starter data, though with 21% of new starters still unwilling to disclose sexual orientation, it is worth exploring ways to encourage this by promoting good working relationships with LGBT groups.

**Leavers**

| Age Ranges |        |
|------------|--------|
| 16 - 20    | 1.37%  |
| 21 - 30    | 25.96% |
| 31 - 40    | 20.22% |
| 41 - 50    | 15.85% |
| 51 - 60    | 25.14% |
| 61 - 70    | 10.93% |
| 71 & above | 0.55%  |

**Starters**

| Age Ranges |        |
|------------|--------|
| 16 - 20    | 4.99%  |
| 21 - 30    | 39.89% |
| 31 - 40    | 20.50% |
| 41 - 50    | 13.85% |
| 51 - 60    | 15.24% |
| 61 - 70    | 5.54%  |
| 71 & above | 0.00%  |

There has been a slight further increase in the number of people aged under 20 years in 2014, with this age group contributing to 4.99% of the total starters. Approximately 11% of leavers in 2014 were in the 61 years plus age band, a decrease of 45 from the previous year. The same age groups accounted for 6% of starters, an increase in 2% since 2013. The age group with highest percentage in starters was again 21-30, who amounted to almost 40% of the total for 2014.

### **Leavers and Starters Summary**

An overall analysis of the leavers and starters reveals no patterns or trends that may indicate a predisposition to potentially discriminatory dynamics. The salient element that has emerged has been an increase in the *known* status of starters in the *disability, religion or belief* and *sexual orientation* characteristic groups in 2014.

The lack of *'known'* data in leaves in some areas does make equality analysis more difficult to assess. The data available however does not bring about any concerns. It is worth noting that from 1<sup>st</sup> April 2015, Warrington and Halton Hospital will be moving towards the use of 'Self Serve' on the organisations Electronic Staff Record which will enable staff to update their equality monitoring details themselves. It is hoped that this may encourage more staff to supply data.

### 5.3 Formal Procedures (1)

This report refers to the period April 1st 2014 to December 1st 2014 (unless otherwise indicated).

#### Bullying & Harassment

| Ethnicity          |     | Sexual Orientation |     |
|--------------------|-----|--------------------|-----|
| WH British         | 64% | Heterosexual       | 33% |
| Chinese            | 9%  | Undefined          | 67% |
| Other ethnic group | 9%  |                    |     |
| Mixed              | 9%  |                    |     |
| WH - Other         | 9%  |                    |     |
|                    |     |                    |     |
| Gender             |     | Disability         |     |
| Female             | 82% | Not declared       | 91% |
| Male               | 18% | No                 | 1%  |
|                    |     |                    |     |
| Religion or Belief |     | Age                |     |
| Christian          | 27% | 31-40              | 30% |
| Other              | 9%  | 41-50              | 30% |
| Not declared       | 64% | 51-60              | 40% |
|                    |     |                    |     |

#### Bullying & Harassment

There were few alleged instances 2014, which may indicate that the Trust has positive policies and procedures for protecting staff from protected characteristics. Women accounted for 82% of those alleging bullying and harassment in 2014. 'White British' accounting made up the majority of ethnicities. None were brought forward by disabled or LGB staff although there are significant gaps in the overall workforce make-up as indicated in the previous sections. Age group 51-60 years shows a higher percentage than the workforce equivalent but given the low number of allegations and the closeness in % to other age groups this is not statistically significant.

#### Disciplinary

| Ethnicity          |     | Sexual Orientation |     |
|--------------------|-----|--------------------|-----|
| WH British         | 78% | Heterosexual       | 59% |
| BME                | 22% | Undefined          | 41% |
|                    |     |                    |     |
|                    |     | Disability         |     |
| Gender             |     | Not declared       | 67% |
| Female             | 61% | No                 | 30% |
| Male               | 39% | Yes                | 3%  |
|                    |     |                    |     |
| Religion or Belief |     | Age                |     |
| Christian          | 31% | 21-30              | 13% |
| Other Religion     | 14% | 31-40              | 45% |
| Not declared       | 50% | 41-50              | 19% |

|         |    |       |     |
|---------|----|-------|-----|
| Atheism | 5% | 51-60 | 13% |
|         |    | 61-70 | 10% |

### Disciplinary

There has been a significant rise in the percentage of *BME* staff who came under disciplinary procedures in 2014 when compared to the previous year from 10% up to 22%, though this is still dealing with a very small number of people. This is more than the workforce total of *BME*. *White British* employees account for 78%. A rise is observed regarding Men, who have gone up from 17% to 39%. A very small percentage disabled and no *LBGT* staff are indicated as having come under disciplinary procedures in this time period but as previously stated, there are gaps in the main workforce profile for these equality domains. No adverse dynamics are in evidence in any other of the protected characteristics presented.

### Grievances

| Ethnicity          |     | Sexual Orientation |      |
|--------------------|-----|--------------------|------|
| WH British         | 83% | Not disclosed      | 83%  |
| BME                | 17% | Heterosexual       | 17%  |
|                    |     |                    |      |
| Gender             |     | Disability         |      |
| Female             | 67% | Not declared       | 100% |
| Male               | 33% |                    |      |
|                    |     |                    |      |
| Religion or Belief |     | Age                |      |
| Christian          | 17% | 41-50              | 67%  |
| Not declared       | 83% | 61-70              | 33%  |

### Grievances

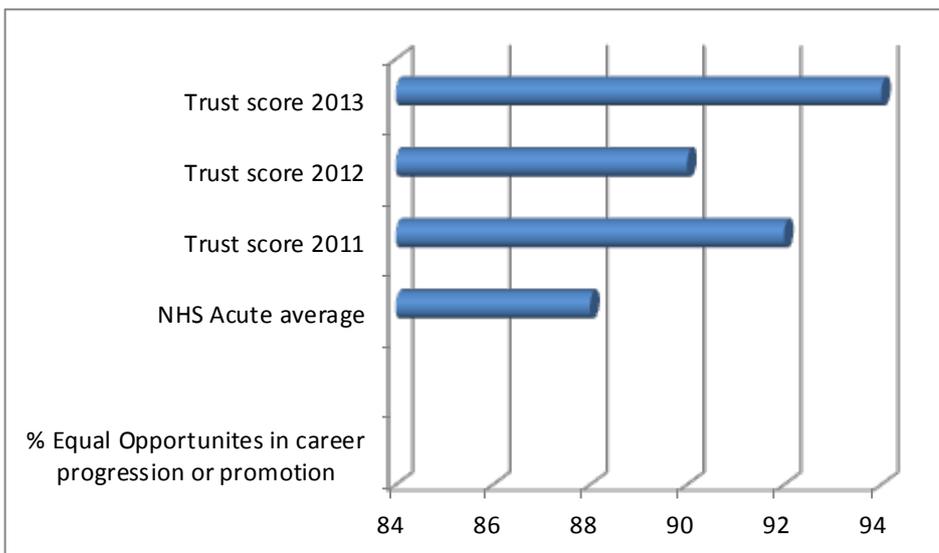
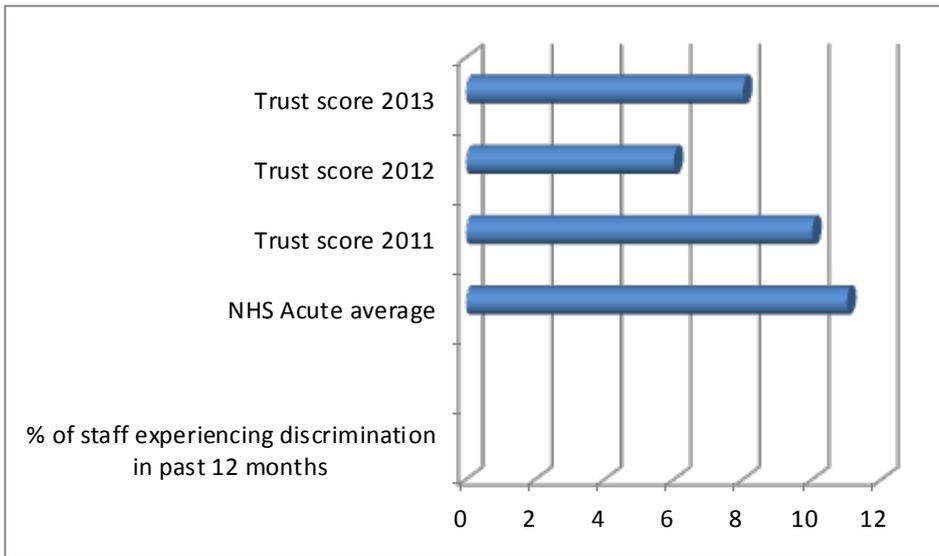
There were few invocations of grievance procedures in 2014. This very low number provides assurance that there are comprehensive policies and functions to support and protect employees in the workplace. The protected characteristic break down in this area is statistically insignificant, given the relatively few instances of grievances in the year.

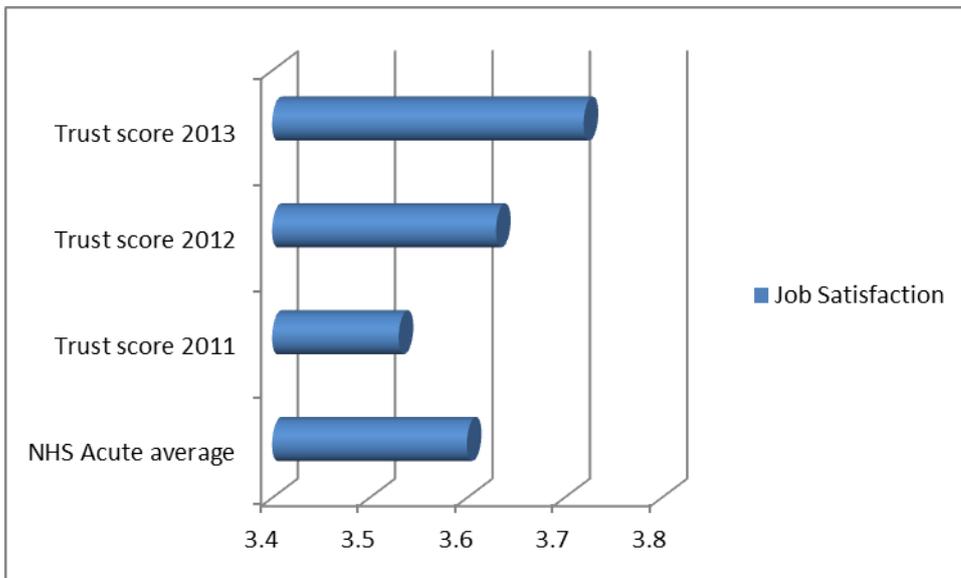
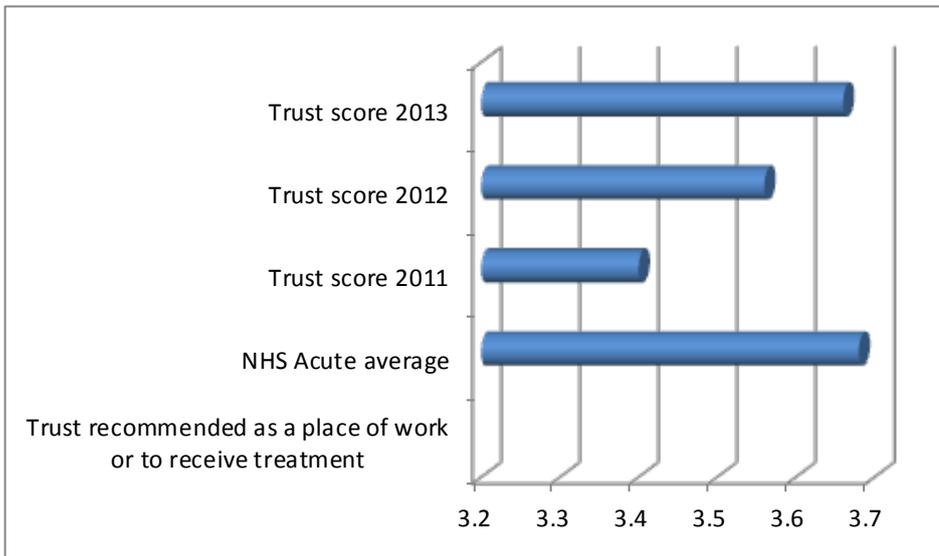
### Performance

For the third consecutive year, there were no cases of formal performance related procedures in 2014.

(1) Time period 1<sup>st</sup> January – 30<sup>th</sup> September 2014

### 5.4 Other factors: NHS Staff Survey





In the NHS Staff survey, there are key domains which can also provide insight into how staff from protected characteristics group may perceive the working environment and whether they feel supported by policies and senior management. There should be some consideration made for the relatively low percentage return on the sample employee cohort of 800 who receive NHS staff survey questionnaires and the number who actually complete and return them to the independent organisation, which oversees the governance of the national survey.

From the returns, the Trust demonstrates significant progress on reducing discrimination in the workplace and was well below the average NHS Acute Trust for this period. The Trust remained above the national average on equal opportunities in career progression or promotion, albeit with a slight reduction on the previous year.

In terms of employees recommending the Trust as a place to work or to receive treatment, there was an increase in staff affirmations bringing the Trust in line with the national NHS Acute Trust profile. Employee job satisfaction also improved and moved above the national NHS Acute Trust average for this domain and time frame. Overall, these four key examples provide evidence that the steps being undertaken to improve policies, functions and services for staff and patients and to embed equality

and human rights within the organisation are being reflected in staff confidence in the Trust as an equality champion and fair place to work.

## 6 Recommendations:

1. Scope potential options to encourage more definitive self-declaration by staff against all the protected characteristics, with particular emphasis on improving staff declaration of **disability**, **religion or belief** and **sexual orientation** status. This needs to be especially addressed for leavers who went through the recruitment system prior to ESR.
2. 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. This will follow the advice of the Government Equalities Office, regarding engagement and objective setting in the general duty guidance paper (June 2011).
3. Ensure members of staff from across the range of the protected characteristics are involved in the NHS Equality Delivery System 2 (EDS) grading for 2014.
4. Key findings of the Workforce Equality Analysis Report 2014 should continue to underpin evidence that is submitted under workforce outcomes in goal three of the Equality Delivery System 2 and help inform the Equality work streams.
5. Continue to ensure all **reasonable adjustments** required by disabled staff fall in line with the Equality Act 2010 directives.
6. Address potential scoping for staff carer information as part of Equality Monitoring on the new 'Self Serve' systems.
7. Address the potential to introduce staff members into the role of Equality Champions to help raise issues for protected staff groups
8. Continue to liaise and support LGBT groups and events such as PRIDE to provide reassurance to new staff in declaring sexual orientation status.

