

Annual Equality, Diversity and Human Rights Report

2015-2016

July 2016



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Introduction

York Teaching Hospital NHS Foundation Trust is committed to delivering safe, effective, sustainable healthcare within our communities. Continuing to integrate equality, diversity and human rights into our day to day practice will enable inclusive delivery of services and the employment of a workforce that is representative of the communities we serve.

We will achieve this through our Trust Values:

- Caring about what we do
 Respecting and valuing each other
- Listening in order to improve
 Always doing what we can to be helpful

http://www.yorkhospitals.nhs.uk/about_us/our_values/

We provide a comprehensive range of acute hospital and specialist healthcare services for approximately 530,000 people living in and around York, North Yorkshire, North East Yorkshire and Ryedale, covering 3,400 square miles. Our annual turnover is over £400 million; we manage ten hospital sites, 1,127 beds (including day case beds) and have a workforce of over 8,000 staff working across our sites and in the community.

This report is designed to demonstrate our compliance with the equality duty to publish information. Its aim is to be reader friendly with a clear structure and information to establish the current situation including progress, achievements since last year's report and identify where further work is required.

1. Our Services

1.1 Access to Services

Introduction

There are both national and local access and performance targets that the Trust is measured against. This section of the report relates to patient activity which has been extracted from our patient records database. It should be noted that there are local issues which impact on activity figures such as the large number of visitors especially during the summer months and the York Races which attract people from a wide catchment area.

Report preparation

In preparing this section of the report we have compared the periods 2014/2015 and 2015/2016. We have chosen to look at:

- ✓ Inpatient Admissions (Day Case, Elective, Non Elective)
- ✓ Outpatient Attendance / DNAs (Did Not Attend)
- Emergency Department (ED) 4 hour wait to treatment/admission/transfer (Breach/ Non breach)

We have assessed these key national indicators against the following protected characteristics:

- ✓ Gender
- ✓ Age
- ✓ Ethnicity

A summary of the statistics

- During 2015/16, overall inpatient activity increased when compared to 2014/15. Inpatient admissions rose by 5.7%; Day-case elective admissions rose by 6.7% and non-elective admissions rose by 5.6%. Admissions by age group remained consistent.
- Outpatient Attendances rose by 70314 across the two periods.
- Overall, 4 hour breaches have risen by 4873.

Protected Characteristic - Gender

 Attendances at Emergency Department (ED) and Minor Incident Unit (MIU) across the Trust fell by 4012 across the two periods; there were no significant changes in gender.

Protected Characteristic - Age

- Attendances by age group remained largely the same, with the largest changes in the 18-50 age range, which fell from 25.4% of follow up appointments to 23.9%; and the 75+ age range which rose from 24.8% of follow up appointments to 25.7%. DNAs across age groups did not differ significantly between the periods.
- Attendances at ED and MIU for patients aged 18-50 fell by a total of 2890, however breaches in this age group have fallen by 4531.
- Breaches for patients aged 75+ have risen by 1365, however they still account for a similar proportion of breaches (34.18% last year compared to 32.74% in 2015/16)

Protected Characteristic - Ethnicity

- The notable change in inpatient admissions was in non-elective admissions; 'British' patients accounted for 73.79% of non-elective admissions, down from 77.69% and 'Any other white background' patients accounted for 12.26% of non-elective admissions, which represented an increase of 24.09% from 9.88%.
- In Scarborough, inpatient admissions for 'British' patients fell from 87.5% of all inpatient admissions to 82.09% (although in real terms admissions rose by 780).
- Outpatient Attendances for 'Any other white background' patients rose from 5.0% to 6.7% of all outpatient attendances. Attendances of 'British' patients fell from 72.8% to 70.9%. Did not attends by ethnicity did not differ significantly between the two periods.

 ED and MIU breaches for 'British' patients have fallen by 79.6% to 75.26%. Breaches for patients where ethnicity is not known accounted for 20.35% of all breaches, compared to 16.34% last year. It is not known at this time whether this is as a result of patients not wishing to disclose their ethnicity, or whether there are gaps in recording. There were no significant differences in non-breach attendances between the two periods.

(Please see Appendix A pages 43 to 48 for data)

1.2 Patient Information

As a Trust we are committed to providing patient information in accessible formats and production of patient information for treatments and procedures is guided by Trust policy and a range of standards that applies to all patient information leaflets.

 A standard statement is included on the back cover or as close to the cover as possible (for sponsored leaflets) which has a central point of contact for patients and relatives to request information in a different language or format. This is being introduced via the review and reprint process and can be seen in section 6 of this report.

On-going work

The Trust's Implementation of the Accessible Information Standard is well underway; this is a new standard that applies to all NHS and adult social care organisations to make sure that people who have a disability, impairment or sensory loss are given information they can easily read or understand.

The standard requires us to;

- Ask people if they have any information or communication needs and how to meet these and record those needs clearly
- Highlight or flag the information gathered on the persons notes/files
- Share information collated with other providers of NHS and adult social care when they have permission to do so;
- Take steps to make sure people receive information which they can access, understand and receive communication support if they need it.
 The standard does not include interpretation and translation.
- ✓ In implementing the standard; the Trust has taken the opportunity to include interpretation and translation as this is an important part of communicating with our patients.

The number of contacts by language is consistent with last year, with British Sign Language (BSL), Polish, Mandarin and Turkish having the highest usage.

Alternative formats - The Trust's website can be viewed at <u>www.york.nhs.uk</u> and complies with WCAG/WAI web standards and guidelines, as required by the NHS and all other UK public sector organisations. The site includes "BrowseAloud" (a free screen reader service) text resizing, access keys and a translation tool for languages other than English. It is also compatible for people using mobile phones, tablets, and other devices to browse the internet.

1.3 Patient Experience

Our achievements

Following in-depth consultation with patients, carers and staff a new 3 year Patient Experience Strategy has been introduced this year. It sets out our high level objectives to improve the experience of patients over the next three years.

✓ Having a clear and accurate picture of patients' experiences of our care requires bringing together information from a range of sources and enables us to learn and improve our services.

Listening to you

Friends and Family Test

We have a single external contractor who undertakes the Friends and Family Test for both staff and patients.

- ✓ We have introduced monitoring data questions for age, disability, ethnicity and gender which we will be able to use in next year's report.
- ✓ All patients accessing our services have the opportunity to respond to a simple question: "How likely are you to recommend our ward/A&E department/ outpatient service etc. to friends and family if they needed similar care or treatment?"

Responses are collated onto a 'your experience matters' poster which is updated quarterly and shared with the area including response rate, comments, improvements in that area and a reminder of Trust Values; this is important as it demonstrates we are listening and what happens to feedback which could encourage greater participation.

Highlight on National Surveys

The results of two national surveys have been received in 2015-16

- 1. National Inpatient Survey 2015
- 2. National Maternity Survey 2015.
- ✓ Both show the Trust improved its level of satisfaction since 2014 and reported results which were, overall, above the national average.

Our response

 An action plan based on the insights from the survey is being developed which will also include recognising and celebrating the achievements of staff in delivering a good patient experience.

Positive outcomes

✓ Senior midwifery colleagues have since reviewed a leaflet given when a woman first starts to use our maternity services 'Congratulations on your pregnancy'. It now contains detailed information about the different options for where to have your baby: Scarborough Hospital, Scarborough Midwifery Led Unit (MLU), York Hospital or home.

Highlight on Local Surveys and their outcomes

Dementia carers' survey

✓ 86 carers of people with dementia were contacted by telephone each month and asked about their experiences. Overall, the "*This is me*" document was felt to be useful and the majority felt that they had the opportunity to talk to staff if they wished to.

Child Health survey

✓ Using a touch-screen machine almost 100 responses were received. A new play-focused approach to obtaining child feedback has been introduced using 'tops or pants' boards where children are helped to write down what was good (tops) or bad (pants). Learning from the surveys highlighted much positive feedback about staff, but also comments about the environment of care, particularly around the nurses' station.

Areas for improvement - Complaints

In 2015-16 the Trust received 355 formal complaints (York 188, Scarborough 145, Bridlington 12 and Community 10) Every complaint receives a full investigation led by a Matron or Senior Manager; this year, new guidance and training has been provided to help them provide open, empathetic responses which answer the issues raised and say sorry where something has gone wrong.

Key learning

✓ We have learned from patient concerns within our community hospitals at White Cross Court and St Helen's Rehabilitation Hospital. Patients' families said that their relatives would like to socialise more during their stay as some felt isolated outside of their one-to-one sessions. As a result, mid-morning refreshments, a group chair exercise class and chair games were organised.

What we are doing well - Compliments

✓ In 2015-2016 701 letters of appreciation were sent to the Chief Executive or the Patient Advice and Liaison Service. We highly value the kind letters, cards and social media posts that we receive from patients and their families thanking the staff who cared for them. Feedback is usually given directly to the individuals involved but those sent to the Chief Executive gives an insight into the appreciation that many of our patients and their families feel. "I felt I had to write and express our sincere thanks to all staff on every level for their outstanding care and kindness [my husband] received during his stay. They are an excellent team who work extremely well together. Nothing was ever too much trouble and my husband's care needs were always met with such a pleasant rapport between patient and staff." (Scarborough, Anne Wright Ward)

"The care and attention provided by all levels of staff could not be faulted. [The patient] died a dignified, pain free and peaceful death and we could have hoped for no more." (Ward 36, York)

"Our experience has been outstanding. All staff showed clinical expertise, respected us as individuals and treated us with genuine care." (York Maternity)

Patient Advice and Liaison Service (PALS)

Our PALS team's role is to listen to suggestions, answer queries and help resolve concerns promptly. They provide advice about the Trust's services and support people to get answers if they are worried about something or don't know who to ask. This year our PALS team handled 6278 contacts, either by answering queries themselves, liaising with clinical or administration colleagues across the Trust or signposting on to another organisation.

✓ An example of how we have acted on feedback received via PALS is in response to queries and concerns about blue badge parking. It was clear that blue badge holders in York needed better information about parking on the site, particularly if the car park outside the main entrance was full. A new leaflet has been created and is now available and on the Trust website. At Scarborough the blue badge car park has been moved so it is now directly outside the main entrance.

2. Our Workforce

2.1 Staff Profile

This year's report focuses again primarily on permanent and fixed term employees (i.e. excluding those on bank contracts). There is also a dedicated section which focuses on the key findings for our temporary workforce.

To follow good practice in data protection and ensure personal privacy, we have combined some categories so that there are at least 10 people in each category. This helps to protect the anonymity of staff. Below is an overview of the Trust's workforce, followed by a profile of those joining and leaving the organisation and findings within pay bands.

Report Preparation

The overall number of Trust staff decreased from 8,739 on 31 March 2015 to 8,503 on 31 March 2016. This reduction is primarily due to some services and their staff transferring to other organisations within the year.

This staff profile is based on a snapshot of all members of staff working for the York Teaching Hospital as at 31 March 2016. We also show data from 31 March 2015 to compare how the profile has changed.

The headline statistics below; include the overall staff profile, joiners and leavers for the period 1st April 2015 to 31st March 2016.

Also included within this section is a breakdown of the profile by pay grade. The pay grade analysis includes Junior Doctors. Within this work we combined many of the categories together to protect the anonymity of individuals. The analysis is not an equal pay audit; it is not looking at equal pay for equal work but at distribution of staff across pay bands by gender.

1,075 individuals joined the Trust between 1 April 2015 and 31 March 2016, 1,185 staff left the Trust during this same time period. The figures for 2015 -2016 do not include Junior Doctors as including this group would adversely reflect on the data and on the findings and conclusions which are then drawn.

The highest numbers of staff are in pay bands 2 and 5. This is because band 2 includes most of the administrators and healthcare assistants whilst band 5 is the entry grade for all nursing staff which is the largest staff group in the Trust.

A summary of the statistics

Protected Characteristic – Gender

- Women make up 79.5% of the Trusts workforce, (effectively the same as last year's figure of 79.6%). The largest percentage of staff is seen for those in Nursing and Midwifery roles (93.2% of this group are women, reflecting this being a sector which traditionally employs more women than men).
- Males made up 19.5% of new starters; this is in line with the 20.5% of all staff employed in the trust who are male. The percentage of all starters who were male has fallen slightly from 20.9% in 2014-2015.
- Men now account for 19.9% of leavers, very similar to the 19.8% of male leavers last year. 80.1% of all leavers are women which, likewise, were very similar to the 80.2% the previous year.
- The overall number of female staff is higher in each pay band apart from Medical and Dental grades where there were more men (460 males to 282 females) - this group also account for just over a quarter (26.4%) of all male staff. In contrast 4.2% of female staff were from Medical and Dental grades.
- In volume terms a higher number of women are in grades 8a+ than men (203 female staff compared to 74 male staff). This banding includes a variety of different roles including senior nursing roles (Matrons) which tends to attract a higher number of women. However, in terms of percentage, men are more likely to be in band 8a+ roles (i.e. accounting for 4.3% of the male workforce) than women (representing 3.0% of the female workforce).

(See appendix B Tables/Figures 1-4 pages 49 to 52)

Protected Characteristic - Ethnicity

- Overall the statistic is broadly the same as last year; the percentage of our staff who identify their ethnicity as being White is 90.6% compared with 90.9%. Of this, 81.6% declared as White UK.
- The overall percentage of BME staff is 6.9%. The largest BME group was Asian and Asian British, accounting for 3.8% of all staff.
- The percentage of new staff whose ethnicity was unknown rose to 6.4% (up from 4.1% in the previous year). The percentage of new starters who said they were from BME groups was 5.8% (compared to 6.9% of all staff).
- The percentage of staff leaving the Trust from a BME group rose slightly from 6.5% last year to 7.1%. This is also slightly higher than the overall Trust percentage that BME staff account for (6.9%).
- The highest percentage of BME staff is seen for Medical and Dental pay scales (37.9%), equating to 222 people. Compared to this, only 6.4% of all White staff are in Medical and Dental pay scales, albeit these totalling 494 people.
- BME staff make up a significant proportion of Medical and Dental staff, which has a major impact on the data and findings which can then be drawn from any analysis of staff within different pay scales. It can however be said that BME staff are less likely to be in band 8a+ roles (0.7% are in band 8a+ roles, with these pay bands accounting for 3.3% of all staff).

(See appendix B Tables/Figures 5-8 pages 53 to 56)

Protected Characteristic - Sexual Orientation

 The percentage of staff where we do not know / the person does not want to disclose their sexual orientation continues to gradually decline (from 61.7% in 2015 to 57.6% in 2016). Although we recognise this figure remains high, this has decreased from 74.7% of all staff three years ago.

- 65 staff disclosed as lesbian, gay or bisexual (0.8% of all staff, a slight increase from 0.7% last year). The percentage of heterosexual staff has increased from 37.7% to 41.6%, most likely due to enhancements to the information held by the trust.
- 19 new starters (or 1.8% of all starters) identified themselves as lesbian, gay or bisexual (more than double than the figure seen for lesbian, gay and bisexual people in the overall trust's workforce 0.8%). This percentage is also slightly higher than seen last year (1.5% of all starters).

Please note: In respect of those leaving the Trust and our analysis by pay grade, due to following good practice in data protection and to ensure personal privacy we are unable to make any meaningful conclusions here. Lesbian, gay or bisexual staff account for a small proportion of staff, but also for 57.6% of staff their sexual orientation is still not known, or that staff prefer not to disclose this.

(See appendix B Tables/Figures 9-12 pages 56 to 59)

Protected Characteristic – Religion and Belief

- The number of staff disclosing their religion and/or belief continues to improve with just under a quarter of our staff (24.0%) not wishing to disclose their religion/belief. Christians make up 30.8% of staff, up from 28.6% the previous year.
- 50.6% of the new staff joining stated they were Christian. Initially it appears that this is notably higher than the equivalent percentage of Christians in the trust's overall workforce (30.8%). However if the 'unknowns' are excluded (which account for a high proportion of the trust's overall workforce), 45.9% were Christians1.
- The percentage of new starters who practice other religions also saw a higher percentage than the equivalent percentage in the trust's overall workplace.
- 32.9% of staff who left the Trust were from Christian religions / beliefs in comparison they account for 30.8% of the overall workforce.

¹ More specificaly this involves excluding the 2,805 staff where their religion and beliefs are unknown and then re-calculating the percentage who were Christians

 A high proportion of staff from Non-Christian religions is seen in Medical and Dental roles (accounting for 15.6% of such staff – in contrast they account for 2.0% of the overall workforce). This links to why those from Non-Christian religions are less likely to be in either the below band 6 category or band 6 and above roles.

(See appendix B Tables/Figures 13-16 pages 59 to 62)

Protected Characteristic - Age

- The age profile is relatively similar to last year. The most notable changes were in the percentage of staff in the 26-30 age group – this increasing from 10.1% in 2015 to 10.9%, whilst those in the 46-50 age group decreased from 14.3% to 13.5%.
- Similar to last year, new starters tend to be younger than that seen for the Trust's overall workforce. Individuals aged 25 and under made up 28.9% of all starters but only 8.2% of all staff.
- The 'leavers rates' is unsurprisingly high for both the age groups under 30. This is likely to be due to younger people generally moving around more to find a job that suits them.
- In previous years the 61+ age group has tended to also have the highest leavers rate (primarily due to retirement), but in the latest year, the 51-55 and 56-60 age group leavers rate has been higher. Staff aged over 50 made up 32.1% of the Trust's overall workforce but 42.1% of leavers (which is similar to last year with 32.0% and 40.7% respectively).
- 19.1% of staff were under 30, yet this age group makes up 23.8% of staff leaving the Trust.
- Younger workers tend to be concentrated in the lower pay bands. This includes 40.3% of those aged under 25 being in the lowest two pay bands of staff (albeit this being similar to last year 43.9%). Whilst a further 43.9% of those under 25 were in bands 3 to 5 roles, only 4.9% were band 6 or higher.

(See appendix B Tables/Figures 17-20 pages 63 to 66)

Protected Characteristic - Disability

- Overall, the data held by the Trust shows 1.3% of staff as identifying themselves as disabled, which shows a low overall representation. The trend has continued with regard to increase in the number of staff who indicated that they have a disability (up from 103 in 2015 to 110 in 2016).
- Increases in the number of employees declaring a disability, appears to have largely been driven by those joining the Trust.
- The percentage of staff whose disability status is 'not known' has fallen from 54.4% to 49.9%, reflecting the trust's efforts to improve the quality of such information.
- This low percentage is not reflected in the annual staff survey (2015) where 19% of staff identified themselves as having a long-standing illness, health problem or disability.
- Of the 1,075 new starters 28 people identified themselves as disabled. This equates to 2.6% of all starters, which is higher than the 1.3% of all trust staff.
- A significant reduction was in the number of new starters with a disability status of 'not known' and there were no new starters falling into this category which is an improvement on the 3% in 2015 (and 63.8% the previous year).
- 1.6% of those leaving the Trust were disabled people this compares to 1.3% of Trust's overall workforce. The percentage of staff that left whose disability status was unknown has fallen significantly from just under half of all staff (49.9%) to 36.2%. It is anticipated this is due to enhancements to how this information is captured.

Pay Band - Please note: Due to confidentiality issues we are unable to make any meaningful conclusions here. A key factor here is the very small numbers of staff in each pay band and we still don't have an accurate figure of how many disabled staff we employ.

(See appendix B Tables/Figures 21-24 pages 67 to 69)

On-going work

The capture of protected characteristics information at all points of the employment cycle continues to be a key priority.

- The emphasis is on accuracy and encouraging staff to report information which is reflected in a continued reduction in the proportion of 'do not knows'.
- ✓ The implementation of ESR Employee Self Service in March 2016 across the Trust now enables staff to review and update their personal information in ESR themselves and this will need continual promotion to raise staff awareness; Work has also been continuing to ensure that Trust forms (starters, personal change forms etc.,) capture all of the required information
- ✓ As a Trust we recognise that we are committed to continually raising staff awareness and confidence in the use of such data in order to identify inequalities between different staff groups, monitor incidents of discrimination, facilitate change and proactively tackle identified issues.
- ✓ An updated Leavers questionnaire was rolled out in March 2016. The key priority is to ensure that leaver's information is captured to enable areas of concern to be addressed. This in turn can support improved retention and influence staff benefits.
- ✓ To ensure greater accessibility, the revised leaver questionnaire is available on-line and staff can complete this electronically and submit it confidentially, if they so wish. A paper version is also available.

Our Temporary Workforce Staff profile – A summary

The staff groups included in this section includes; Locum doctors, as well as those in a number of bank roles, e.g. Nurses; Midwives; Healthcare Assistants and those working in areas such as Radiology and Physiotherapy.

As of March 2016 there was a total of 644 temporary staff on which the analysis is based. This figure has increased significantly from April 2015 due to the Trust continuing to expand the internal nurse bank, reflecting the important role played by our temporary workforce.

Please note: Due to confidentiality issues it is only possible to report any meaningful information on gender, age and religion/beliefs. This data is also being compared to the overall workforce for the Trust. Key findings on our temporary staff are summarised below:

- The gender split of our temporary workforce is proportionately in line with the trust's overall gender split.
- More likely to see a higher percentage (compared to the Trust's overall workforce) who are 25 years old or younger.
- Compared to the Trust's overall workforce, the Trust's temporary workforce are less likely be aged between 31 and 60, but more likely to be aged 61 or older
- More likely to be from Non-Christian religions and beliefs (5.1% compared to 2.0% of all staff). Equally, more likely to be Christian (40.4% compared to 30.8% of all staff)

(See Figures 25 - 27 in Appendix B on pages 70 to 71)

2.2 Staff Learning and Development

Staff Appraisal

The Trust's values based appraisal process is being incorporated into a wider Development Review Policy, which incorporates processes linked to Staff Appraisal, Performance Management and Talent Management.

The appraisal process has been embedded over the last year and is now being used by managers and staff across the Trust.

 The focus remains to support a values based approach to managing and developing our people.

The Development Review Policy is intended to further support open and honest conversations about capability (performance against objectives) and attitude (behaviours compared to the Trust values) becoming the norm.

 It encourages transparency and fairness in the management of all individuals.

On-going work

- ✓ To support the effective and accurate reporting of appraisal activity the intention is that managers will soon have the capability to record appraisal activity themselves via a functionality in the Learning Hub. This means that at any point in time we will be able to see what the appraisal compliance rate is for any area, rather than waiting for a certain point in the month in which to run the reports. It is anticipated that this will go some way into providing some reassurances to managers that currently exist regarding some real issues, and some perceptions associated with the current reporting methodologies.
- The Talent Management Framework is in the early stages of its development and the details of this are currently being negotiated with Staff Side.

✓ The implementation of the Trust's Pay Progression policy earlier this year has also seen an increase in accountability from members of staff by increasing their awareness of when their appraisal is due and sharing the accountability for ensuring it takes place in a timely manner, with meaningful outcomes.

2.3 Organisational Development and Improvement Learning

The Organisational Development and Improvement Learning (ODIL) team exists to support the organisation to achieve its objectives by supporting staff to work in the most effective way they can, through opportunities for applied learning and development.

Access to relevant ODIL support is offered and advertised to individuals, teams and whole departments across all staff groups. This support may include leadership development at a number of levels, team development, coaching, mentoring or mediation, in addition to taught tools and techniques such as improvement methodology.

Input around values, and emotional and social intelligence and valuing difference feature in many interventions, with the aim of supporting people to increase self-awareness and management, and maximise working relationships.

 Partnership work with local organisations including the Army Training Centre at Strensall, the Joseph Rowntree Foundation Trust and City of York Council offers a diverse perspective in relation to the organisations ODIL portfolio.

The Learning Hub

Learning Hub is the organisations online learning platform, it is the central database for all corporate learning records/online learning provision and the catalogue of learning available via the system is increasing. It is routinely used by learners across the trust to self-enrol onto classroom learning and/or to undertake learning online. It is available to all staff via a single click from the home page of the Trust's intranet.

Learning Hub is complimented by a wide range of classroom delivery giving learner's a choice of learning provision. There is also a manual process in place for staff with access or 'use of computer' issues, this removes the need for learners to request learning via Learning Hub. Additional support is available when required.

✓ Opportunities have been taken to ensure that inclusive best practice has been embedded into the system and content design used e.g. tonal contrast, font sizes and language. These principles have also been applied to support processes and documentation.

Learning Hub is populated with data from both the Trust's Electronic Staff Record and Active Directory systems. This ensures that it allows the reporting/breakdown of learning data into six of the protected characteristics and also enables single sign-on for most users.

(See appendix C tables 1-6 pages 72 to 74 for attendance at ODIL courses and programmes through 2014-15 by protected characteristic.

See appendix C tables 7-13 pages 75 to 78 for breakdown of learning undertaken across all York Teaching Hospital Foundation Trust sites by six of the protected characteristics)

2.4 Recruitment

The Trust continues to emphasise the importance of a values-based (VBR) approach through its recruitment strategy. All recruitment campaigns which are centrally supported by the HR team utilise VBR methodology, and this is a growing portfolio (Staff Nurse Recruitment has been added to the portfolio this year).

- ✓ The VBR approach relies on the attraction and selection of new staff according to their motivations and drivers, and ensures that experience and qualifications are not given a disproportionate level of attention in the selection process.
- ✓ Research has shown that values-based recruitment increases workforce diversity as it takes a much broader view, not only of applicants but of the attributes which make someone suitable to undertake a particular role.

The Trust's recruitment training promotes a values based approach, training provision has continued to evolve to increase focus around values based selection.

- ✓ In the past 12-months, 46 staff across a range of sites and departments have been trained in the assessment of candidates' behaviour in group activities, which as well as increasing levels of insight, should also bring the benefit of delivering a broader range of diversity-friendly selection activities across the organisation.
- ✓ The training has achieved a 500% increase in the number of male assessors available to be involved in assessment centres, thus creating more diversity amongst assessment panels for senior appointments.

Recruitment training is being revised to include activities relating to the benefits of diversity and the role of unconscious bias in recruitment and selection. The level of time commitment required to attend face-to-face training will be reduced which will make it more accessible and increase the spread of good practice across the organisation.

While the recruitment strategy hasn't changed markedly in the last 12months, there are a number of initiatives which support workforce diversity that have been completed or are ongoing and are worthy of mention. These include:

Careers Events

The Trust has increased its levels of attendance/provision of careers and recruitment-related events.

Events include those hosted by schools, colleges and universities in our community, as well as those organised by partners (e.g. The Officers Association who ran an event to support service leavers with transition into civilian careers) and a jobs event organised by the Trust.

- ✓ In 2014/15 event attendance was once every 5-weeks and we project this will be an average of attendance at events every 3 weeks in 2016.
- ✓ Attendance at such events makes job opportunities more accessible to a broad range of people in the Trust's local community.

Apprenticeships

In the last 12 months, around 20 new non-clinical apprentices have been recruited. The retention rate for apprentices at the Trust who go on to gain substantive employment has consistently been between the 80-90% mark, and these posts continue to offer a pathway into the organisation for people with little or no prior work experience.

✓ The Trust's plan is to increase the number of apprenticeships available over the coming 12 months, and it is already engaged with a secondary school in one of its local communities to offer mentoring as a means of supporting a number of students to be able to take up apprenticeships with the organisation.

New selection methods

Creating more diverse, structured approaches to selection is one way in which the Trust can make its recruitment more diversity-friendly.

Training is being used to seed ideas and stimulate thinking in this area, however, there are already a number of good examples of new methods in use, one example is 'modular interviewing'

The use of **'modular interviewing'** involves several interviewers each occupying a station which covers a topic/selection criterion and engaging with candidates on this subject for 5 minutes. The candidate then moves to another station.

- ✓ The advantage of this approach is that it provides an informal feel it encourages candidates to open up and therefore provides greater insight into what they have to offer the role, rather than inviting 'textbook' responses.
- Modular interviewing allows more candidates to be seen for interview, increasing diversity of interview attendees.
- ✓ Analysis of one pool showed this had a particularly strong effect on the age profile of candidates, providing candidates aged under 25 and in the 40-69 range with a greater level of opportunity.

Protected Characteristic – Gender

 Males made up 28.60% of the total applicants but account for 24.20% that were shortlisted. Females make up 71.00% of the total applicants, but 75.20% of those shortlisted.

Protected Characteristic – Disability

- The Trust is a two tick employer. This means that we guarantee to interview all disabled applicants who meet the minimum criteria.
- 7% of applicants that are shortlisted are disabled, greater as a proportion than the 6.40% of disabled applicants to the Trust.

Protected Characteristic – Ethnicity

- The data shows the number of applicants who are white were the most successful group in getting shortlisted from their job applications when compared to all the other ethnic groups.
- Notably, the ethnicity breakdown of applications in 2015-16 shows less diversity amongst applicants to the Trust than in the previous year applicants who are white accounted for 85.10% of all applicants – in 2014-15, it was 78.80%.

Protected Characteristic – Age

 The number of applications made and the number of applications shortlisted show to be proportionately in line with each other. Applicants in their 20s made the highest number of applications with well over a third (collectively 37.8%) of the total number of applications. Consequently this age group also had the highest number of shortlisted applications (collectively 32.8%). The number of applications (and shortlisted applications) then generally decreases proportionately in later age groups.

Protected Characteristic - Religion and Belief

 As with age group, the number of applications received and the number of applications shortlisted were proportional in line for each religious belief. Over half of all applications were received from applicants who declared they were Christian and consequently over half of the shortlisted applicants were also Christian. Non-Christian religions made up 18.74% of the total number of applications and 16.57% of all shortlisted applications.

Protected Characteristic - Sexual Orientation

 The data shows relatively little variation between the proportion of applicants at the application and shortlisting stages.

(See appendix D – Tables 1 – 6 pages 79 to 81 for full data set)

Staff Survey Responses

The annual staff survey asks staff whether they believe that the Trust provides equal opportunities for career progression or promotion. Whilst the number of positive responses to this question places the organisation above most other NHS providers of similar type, there has been a 3% decrease in the number of staff agreeing with this statement compared with the previous year's survey.

Furthermore, only 81% of BME staff answered positively compared to 89% of all staff, which is the same figure for BME staff as last year.

Ongoing work

The reporting of recruitment information has been limited by the need to use two data sets i.e. NHS Jobs and ESR. This means that new starter information is provided through ESR and recruitment information up to and including the shortlisting stage is through NHS Jobs.

✓ Work is underway exploring the most effective means of uploading successful applicant data to NHS Jobs to enable full and consistent reporting of the end to end recruitment process to be accessed via one data set. It is fully anticipated that this process may also be positively impacted by a new recruitment tracker system which is being considered by the Trust.

2.5 Grievance, Disciplinary and Bullying & Harassment

Bullying and Harassment

The percentage of staff in our 2015 Staff Survey who said they had experienced harassment, bullying or abuse from patients, relatives or the public within the past 12 months fell by 3% to 24% compared to our 2014 figures.

In addition, the number of staff who had experienced harassment, bullying or abuse from staff in the past 12 months had also decreased, to 22% compared to 23% in 2014.

With reference to specific protected characteristics, of the staff who declare themselves disabled in the staff survey, 31% said they had experienced bullying, harassment or abuse from patients/service users or their relatives and 32% said they had experienced bullying, harassment or absence from staff in the last 12 months.

Again in the 2015 staff survey men who responded generally appeared to have overall, slightly more positive experiences at work than women. However while in previous years, there were better scores for men on all of the Key Findings relating to violence and harassment, in the 2015 staff survey, men did report slightly higher scores than women in the % experiencing harassment, bullying or abuse from staff in the last 12 months and in the % experiencing physical violence from staff in the last 12 months (22% and 2% for Men respectively compared to 21% and 1% for women.

The number of bullying and harassment complaints reported was 10 during 1 April 2015 – 31 March 2016. **Please note:** it is not possible to give quality monitoring data due to the small number. This does not correlate to the number of staff who reported that they experienced bullying and harassment within the Staff Survey.

The Trust is committed to a zero tolerance approach to bullying and harassment. During 2015 / 2016 we have undertaken a number of actions to raise awareness of Harassment & Bullying issues to improve their resolution. These include:

- ✓ Implemented new training for managers and supervisors in dealing with Bullying & Harassment, Grievance and Disciplinary matters. All sections emphasise taking issues seriously, dealing with them promptly and talk about the impact on individuals and the wider team if concerns are not addressed in a timely manner.
- Continued to promote zero tolerance of bullying & harassment and the existence of the mediation service at open access Drop In sessions that are run fortnightly by HR at the two main sites. The sessions support both staff and managers on a range of people management issues.
- ✓ Discussed with the Fairness Champions how they might respond if staff raise bullying & harassment issues with them; and the support available in the Trust. Information on the Fairness Champions is given to all new starters to the Trust at corporate induction.
- ✓ We will continue to measure staff experience of harassment and bullying by asking staff a number of questions in our 2016 annual Staff Survey. We are also including a question in the Staff Friends & Family Test from June 2016 about how we can make it easier for staff to report experiences of bullying.

To follow good practice in data protection and ensure personal privacy and to help protect the anonymity of staff, we are unable to report on all characteristics due to the small number of disciplinary, grievance and bullying and harassment cases recorded.

Employment Tribunals

During this year one Employment Tribunal claim was received that included a bullying / harassment claim.

Grievances

Following the trend of 2014-15, the majority of cases were raised by White British staff, the main reason behind this is most likely due to White British staff accounting for the largest percentage of staff within the Trust.

Investigations and Disciplinary Action

The data provided in the report reflects the methodology for the Workforce Race Equality Standard (WRES) indicator in relation to staff entering a formal disciplinary investigation and is based on completed cases from a two-year rolling average of the current year and previous year.

The vast majority of cases (approximately 92%) involved staff within the groups of White UK, White Irish and White other groups.

During 2015 the Trust has encouraged managers to respond promptly and nip things in the bud via informal discussion, or to escalate to a senior manager if authority to go outside of process is required to resolve a grievance. Although this works for a proportion of cases; where staff are not happy with the outcome they are then progressing the case through the formal process, in an effort to obtain a different outcome.

Training for investigating officers was developed and delivered within 2015.

 A 'pool' of investigators has been trained to increase the consistency and effectiveness of investigations; and ensure they are undertaken fairly and equitably.

Where possible, investigators do not pick up cases in their own departments, a measure undertaken to introduce more objectivity to the process.

(See Appendix E tables 1 – 6 pages 82 to 83 for the full data set)

2.6 Staff Support Groups

Our staff support groups established in 2014 a staff Lesbian, Gay, Bisexual and Trans (LGBT) network and Fairness Champions continue their work; both are comprised of staff members who have volunteered with the common aims to:

- Provide a safe environment to raise
 Contribute to staff development issues
- Give information, guidance and support to staff
- activities and awareness events
- Signpost and support people to live the Trust values
- Assist colleagues to assess impact of policy etc. to ensure inclusivity

Staff LGBT network - Achievements

- ✓ June 2015 attended York Pride; rainbow flags were raised at the Hospital for visible support to the LGBT community
- ✓ February 2016 LGBT history month joined with York LGBT History month to promote an image gathering initiative in response to feedback from EDS2 and received valuable feedback which has been shared as patient stories and will be included in their work plan for the year.
- ✓ Attending the Stonewall employers conference in Leeds
- ✓ The Trust continues to be a corporate member of the York LGBT Forum and hosted their Annual General Meeting attended by the local MP and Lord Mayor of York. "WARMEST THANKS for a lovely evening" - extract from thank you letter.

Fairness Champions – Achievements

- Recording data has enabled themes of mental health issues and Eldercare to be identified as top contacts from staff
- ✓ May 2015 Event supporting NHS Employers Equality and Diversity week with a theme of "linking thinking" as it was also mental health week and walk to work week at the same time.

3 Our Partnership working

Working in partnership with other health and social care organisations and third sector organisations (including non-profit making organisations or associations, charities, community groups etc.) enables the Trust to understand how to affect change effectively making best use of resources available. This year our partnership work has included:



Healthwatch ensures that the voices of those who use services reach the ears of decision makers. Local Healthwatch (there our three in the Trust geographic area) helps the local community to get the best out of local health and social care services.

All Healthwatch organisations serving the Trust are represented on a number of Trust groups including the Fairness Forum and the Patient Experience Steering Group.

- Healthwatch York carried out an "enter and view" visit to the York Emergency Department. Their comments included recommendations for clearer information about the distinction between the emergency department and urgent care centre; more information about estimated waiting times and improvements to the waiting room environment.
- These comments have been acknowledged by the directorate who are improving patient information in the reception and waiting areas.

Healthwatch North Yorkshire carried out an assurance visit to Scarborough Hospital on 22 August 2015 to review the frail elderly pathway. The Trust has not yet received the final report, but early feedback included: praise for the pilot project with an elderly medicine consultant assessing patients in ED; positive comments from the patients spoken to during the visit; regular staff wanting to see agency staffing reduced; and acknowledgment of the need to have better integrated IT access to patients' health information. Three areas of the Trust (Emergency Department, Glaucoma Clinic and Orthodontic Department) were honoured by Healthwatch York at their Annual General Meeting with Making a Difference Awards this year. The Healthwatch York Manager said "It is vital to recognise some of the excellent work that people do day in and day out to make our health and care services the best they can for everyone"

York Fairness and Equalities Board (FEB)

This board brings together private, public and voluntary sector representatives to work to create a fairer York. Working to the principles previously set out by the York Fairness Commission and aims to ensure that:

- ✓ York has good community relations and that people and groups get on well together;
- Equality of opportunity is increased and everyone can prosper and flourish;
- ✓ The city's workforce is reflective of our community.

York Racial Equality Network (YREN)



YREN is an established charity in York who promote awareness of the needs of black and minority ethnic (BME) and other people in the York area, we are grateful for YREN's continued support in the assessment of our Equality Delivery System (EDS2) and this year the Trust has joined a project coordinated by YREN – Comic Relief Empowered Voice Project 2015-2018. Project aims:

- Culturally diverse individuals recruited and trained to act as community representatives on local partnership to improve strategic decision-making
- An Equalities Network will be set up for staff and volunteers in mainstream organisations to improve knowledge and confidence in working with people from diverse groups

- ✓ Open forum meetings will be held for residents and their families, providing a safe environment in which people can voice their views and needs
- Improved communications YREN's website will be developed and a new community newsletter produced, enabling a better information flow to and from diverse communities and organisations

Equality Delivery System (EDS2) & Workforce Race Equality Standard (WRES)

The Equality Delivery System is a framework designed to help NHS organisations, in discussion with local partners to review and improve performance and help to meet their statutory and regulatory obligations for equality, diversity and human rights.

Last year was our first assessment and grading event working in partnership with other healthcare providers and we continued this year developing the assessment with Tees, Esk and Wear Valleys NHS Foundation Trust, Vale of York and Scarborough Ryedale CCG's. An event was held in Malton supported by our community representatives in February 2016; joint and individual equality priorities were established and will be added to our work plan and help to inform the development of our new equality objectives 2016-2020.

EDS2 has 4 goals and 18 outcomes, since beginning to work in partnership the Trust made a decision to focus on set goal/s each year to enable meaningful conversations with our stakeholders. The grades reflect the lack of data we currently hold to enable us to demonstrate how protected characteristics fare compared to people overall; we continue to work towards improving data collection, analysis and monitoring for protected characteristics as per our equality objective relying on national data and living our values to ensure inclusivity.

Goal		Year of joint	Grade
		assessment	
1	Better Health outcomes	2016/2017	
2	Improved patient access and experience	2014/2015	Undeveloped
3	A representative and supported	2015/2016	Developing
	workforce		
4	Inclusive leadership	2015/2016	Developing

 ✓ The Trust continues to work towards the EDS2 goals and with reference to our workforce it remains committed to progressing Goal 3 – A representative and supported workforce.

The NHS has also published a Workforce Race Equality Standard (WRES) and the Trust provided its first submissions in July 2015. The information reflects staff responses to the Annual Staff survey as well as data collected from recruitment, disciplinary and training records.

The purpose of the standard is to tackle a particular aspect of equality – the less favourable treatment of the BME workforce.

 During 2015 and 2016 the trust has had a number of initiatives to enhance the data held on its' workforce, particularly in relation to disability; religion; ethnicity and sexual orientation.

Access to Services Group

Based on feedback from colleagues at North Yorkshire County Council about prioritisation of audiology services for people who are Deaf/Blind; our access to services group has reformed.

✓ We are working with York Blind and Partially Sighted Society, Jorvik Deaf Connections and local councils with the aim of developing new shared materials for seamless services and training for staff.

Wider engagement will follow once the work is drafted. The group meets regularly and we are grateful for the time and support of our colleagues in health and social care and our service users.

4 Our achievements

Pictocomm

Thanks to funding from York Teaching Hospital Charity we have purchased "Pictocomm" folders for every ward and department in the Trust; these are based on clear and easy to understand pictures and where patients are unable to communicate translations are provided.

 They bring many benefits including another option to give patients a "voice" to communicate enabling confidence and assurance that their needs will be fulfilled.

Awareness Raising Events

Events are held throughout the year to raise awareness to issues within our community promoting understanding and acceptance. The report has already mentioned NHS Employers Equality and Diversity week with a theme of "linking thinking" with mental health week and walk to work week being at the same time. The staff LGBT network also linked to the National LGBT History month, ensuring they provided an update on progress from feedback.

Other events have linked to interfaith week and International Stammer awareness day when a member of our staff shared their experience by developing a display which they attended at York Hospital and promoted Trust wide.

The Hospital Arts Team develops events and exhibitions linked to equality and diversity, which this year included:

- November: Diwali exhibition in the 3D space showing photographs of people enjoying the festival, lit up with light boxes to signify the festival of light.
- December: Christmas decoration workshops with patients, visitors and staff; 5 special musical performances; Staff Choir at the NHS Carol Service and York Chapel's drop-in carol service

- ✓ March: Chinese New Year exhibition in the 3D space, exhibiting our home made Chinese dragon and information on the different animal's people's birth years link in to.
- March: Down's Syndrome Awareness Exhibition, a collaborative and informative exhibition showing photography and paintings from artists with connections to and one with Downs Syndrome.
- March: Holi photography exhibition at junction 7, exhibiting photographs of people enjoying the Hindu festival of Holi. Photos taken by two of York Hospitals own consultants.
- ✓ Changing Lives who work with people with drug and alcohol addiction
- ✓ Co-ordination of the staff choir

5 Our Progress Against the Equality Objectives

Oł	ojective	Progress
1	Improve data collection, analysis and monitoring of protected characteristics	 Continued awareness raising of the importance of recording protected characteristics Friends and Family Test format has been amended to include protected characteristics Improved system implemented by Patient Experience team which records more detailed information enabling themes and issues to be identified.
2	Further develop engagement and involvement of patients, carers, governors and staff to reflect local demographics	 Patient stories of experiences with the Trust included at Board Meetings and other staff forums. Corporate communication standard and style guide' approved and implemented In-depth consultation with patients, carers and staff enabled the development of a new Patient Experience strategy which was launched at the Trust's Nursing conference in September 2015.
Ob	jective	Progress
3	Develop strong partnerships with social care and GP's to ensure patient pathways are free from barriers between providers for everyone	 Continued development of partnership work with local councils and Health and Well Being Boards Representative member of the three Healthwatch in our area attends the Fairness Forum Continued work with local provider /commissioner NHS organisations to assess equality progress against the NHS Equality Delivery Framework. Member of York Fairness and Equalities Board (FEB) and York Equalities Network Access to services group
4	Continue the Board of Directors and senior management development programme ensuring equality and diversity is embedded into all decision making processes leading to active promotion of good relations	 Equality Analysis reviewed and submitted to Fairness Forum for discussion prior to pilot and implementation, including name change to equality assurance to link to culture of organisation.

The objectives have been reviewed annually and actions added based on feedback from EDS2. 2015- 2016 was the final year of our Equality Objectives that were originally set in 2012; progress has been made and work is underway to develop a new strategy and equality objectives.

6 Our Challenges and Future Developments

Challenges

- Implementation of the Accessible Information Standard the greatest challenge is anticipated to be the sharing of information, whilst recording is to be in a set way there are many computer systems and associated compatibility issues.
- To review the options for capture and monitoring of patient information on the Core Patient Database (CPD). This piece of work will involve many areas of the Trust but vital to improve patient experience, quality and continuity of care.

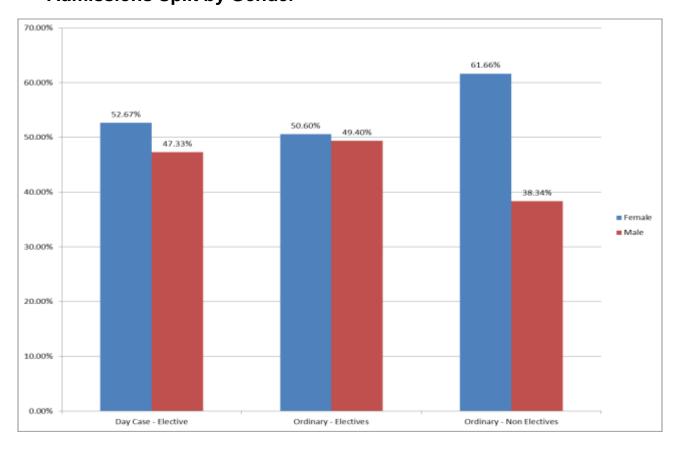
Future Developments

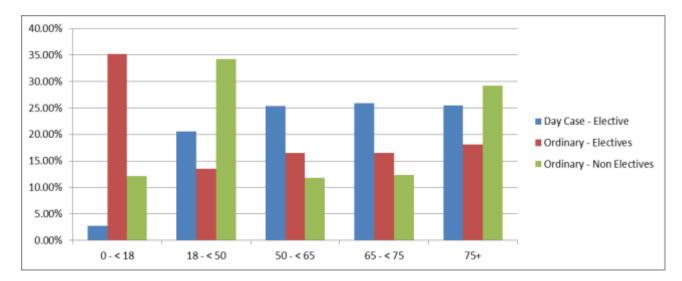
- Working in partnership with healthcare commissioners/providers on the outcomes and priorities of the EDS2.
- Reviewing our equality objectives and strategy 2016 onwards with the aims of continuing to make our services more accessible and improving the experiences of people using them addressing health inequalities.
- Embedding Equality and Diversity within the staff engagement strategy and ensuring that all of the Trust people management processes are inclusive and accessible.

7 Appendices

Appendix A

1. Trust-wide Inpatient Admissions January 2015 – December 2015 Admissions Split by Gender



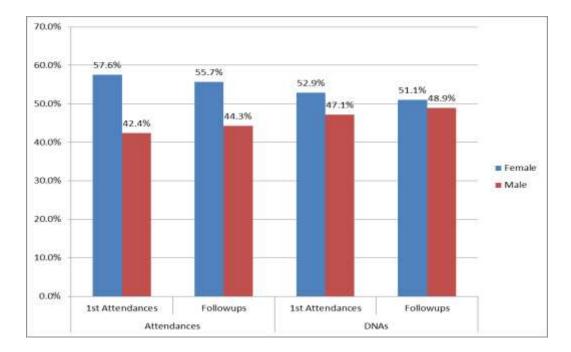


Admissions Split by Age group

Admissions split by Ethnicity

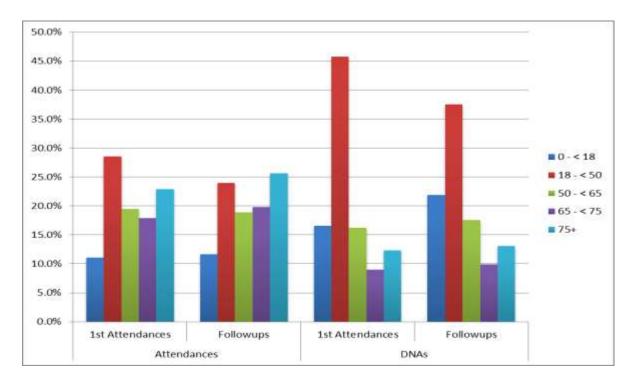
	% of Total
Ethnicity	Admissions
African	0.09%
Any other asian background	0.14%
Any other black background	0.03%
Any other ethnic group	0.19%
Any other mixed background	0.11%
Any other White Background	7.41%
Bangladeshi	0.06%
British	81.37%
Caribbean	0.02%
Chinese	0.14%
Indian	0.20%
Irish	0.26%
Not Stated	9.69%
Pakistani	0.07%
White and Asian	0.11%
White and Black African	0.05%
White and Black Caribbean	0.06%

2. Trust-wide Outpatient Attendances - January 2015 – December 2015



Attendances Split by Gender

Attendances Split by Age group

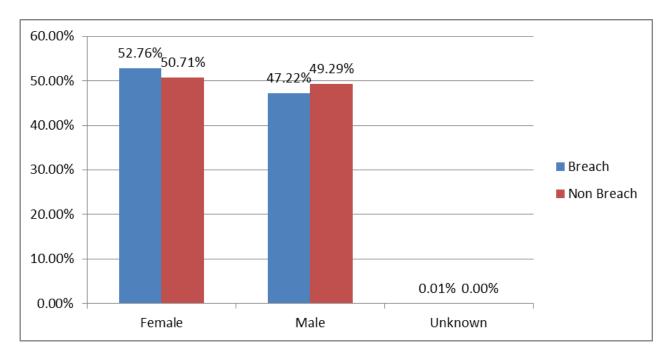


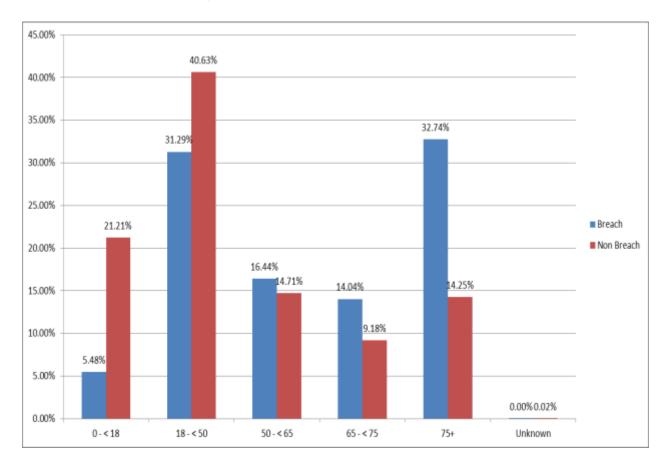
Attendances split by Ethnicity

	Attendance	es	DNAs		% of Total
Ethnicity	1st Attenda	Followups	1st Attenda	Followups	Attendances
African	0.1%	0.1%	0.1%	0.1%	0.06%
Any other asian background	0.1%	0.1%	0.1%	0.2%	0.13%
Any other black background	0.0%	0.0%	0.0%	0.0%	0.02%
Any other ethnic group	0.2%	0.2%	0.3%	0.3%	0.21%
Any other mixed background	0.1%	0.1%	0.1%	0.2%	0.11%
Any other White Background	6.7%	6.5%	7.6%	5.8%	6.59%
Bangladeshi	0.1%	0.1%	0.2%	0.1%	0.06%
British	70.9%	76.0%	67.3%	73.2%	74.22%
Caribbean	0.0%	0.0%	0.0%	0.0%	0.02%
Chinese	0.1%	0.1%	0.1%	0.1%	0.11%
Indian	0.2%	0.2%	0.1%	0.2%	0.20%
Irish	0.2%	0.2%	0.2%	0.2%	0.23%
Not stated	20.9%	16.0%	23.4%	18.9%	17.70%
Pakistani	0.1%	0.1%	0.1%	0.2%	0.08%
White and Asian	0.1%	0.1%	0.1%	0.2%	0.14%
White and Black African	0.1%	0.0%	0.1%	0.1%	0.05%
White and Black Caribbean	0.1%	0.1%	0.1%	0.2%	0.07%

3. Trust ED and MIU Attendances - January 2015 – December 2015

Attendances Split by Gender





Attendances Split by Age Group

Attendances split by Ethnicity

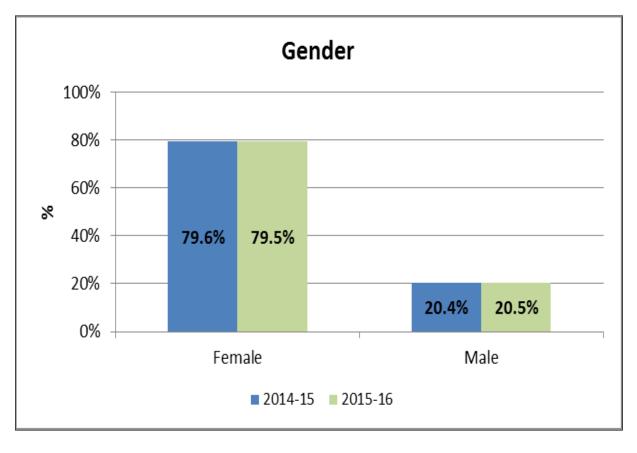
Ethnicity	Breach	Non Breach
African	0.06%	0.05%
Any other asian background	0.08%	0.09%
Any other black background	0.02%	0.03%
Any other ethnic group	0.19%	0.23%
Any other mixed background	0.04%	0.13%
Any other White Background	3.31%	4.22%
Bangladeshi	0.06%	0.06%
British	75.26%	62.00%
Caribbean	0.01%	0.02%
Chinese	0.06%	0.10%
Indian	0.09%	0.13%
Irish	0.25%	0.17%
Not Known	20.35%	32.42%
Not Stated	0.01%	0.02%
Pakistani	0.04%	0.06%
White and Asian	0.09%	0.12%
White and Black African	0.04%	0.06%
White and Black Caribbean	0.04%	0.08%

Appendix B - Our Workforce

•								
Gender	Number	% total	Number	Number	Number	% total	Number	Number
	of staff	staff	of staff	of staff	of staff	staff	of staff	of staff
	March	March	part time	full time	March	March	part time	full time
	2016	2016	2016	2016	2015	2015	2015	2015
Female	6,762	79.5	3,579	3,183	6,959	79.6	3,710	3,249
Male	1,741	20.5	329	1,412	1,780	20.4	332	1,448
Total	8,503		3,908	4,595	8,739		4,042	4,697

Table 1: York Teaching Hospitals Foundation Trust staff profile by gender, 2014-2015 and 2015-2016

Figure 1: Staff Profile by gender, 2014-2015 and 2015-2016



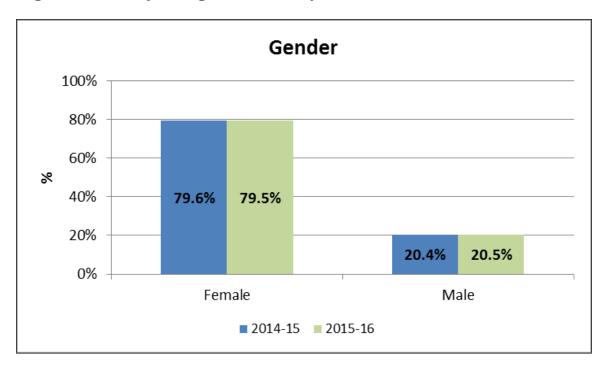


Figure 2: Staff joining the Trust by Gender, 2014-2015 and 2015-2016

Table 2 - Staff joining York Teaching Hospitals Foundation Trust from1 April 2015 to 31 March 2016 by gender

	Total new staff during the year	% of new staff during the year	% total staff at 31 March 2016	% new staff previous year
Gender				
Female	865	80.5	79.5	79.1
Male	210	19.5	20.5	20.9
Total	1,075			

Note – all data here excludes Rotational Doctors

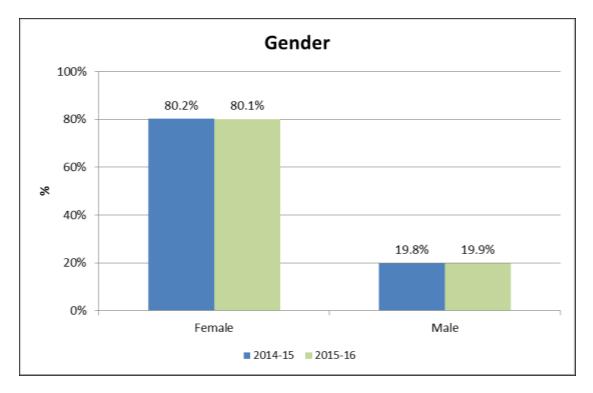


Figure 3: Staff Leaving the Trust by Gender, 2014-2015 and 2015-2016

Table 3 - Staff leaving York Teaching Hospitals Foundation Trust 1April 2015 to 31 March 2016 by gender

Publishable data – no category <10	Total number of staff leaving Trust	% staff leaving	% total staff	% staff leaving in previous year
Gender				
Female	949	80.1	79.5	80.2
Male	236	19.9	20.5	19.8
Total	1,185			

	Description of band	Pay Range	Female	% Female staff in this pay band	Male	% male staff in this pay band	Total	% total staff in this pay band
Band 1	Cooks, Domestics Assistants	£15,251 - £15,516	490	7.2%	151	8.7%	641	7.5%
Band 2	Administrators, Healthcare Assistants	£15,251 - £17,978	1,555	23.0%	341	19.6%	1,896	22.3%
Band 3	Senior Admin posts, Community Healthcare Assistants	£16,800 - £19,655	669	9.9%	149	8.6%	818	9.6%
Band 4	Officers, Craftsperson, Medical Secretary	£19,217 - £22,458	452	6.7%	84	4.8%	536	6.3%
Band 5	Nurses, Advisors Physiotherapists,	£21,909 - £28,462	1,482	21.9%	191	11.0%	1,673	19.7%
Band 6	Managers, Sisters, Senior Roles	£26,302 - £35,225	1,129	16.7%	165	9.5%	1,294	15.2%
Band 7	Senior managers, Area Leads	£31,383 - £41,373	480	7.1%	113	6.5%	593	7.0%
Band 8a, b, c, d and 9	Directorate Managers, Area Leads	£40,028 - £99,437	203	3.0%	74	4.3%	277	3.3%
Medical and Dental	Consultants, Specialty Doctors, Clinical Assistants		282	4.2%	460	26.4%	742	8.7%
Personal Pay scale*	Apprentices, Non Exec Directors		20	0.3%	13	0.7%	33	0.4%
Total Staff			6,762	100.0%	1,741	100.0%	8,503	100.0%

Table 4: Pay grade by gender, 2016

• In all such analysis this group includes a small number of staff who are usually in other staff groups, e.g. Medical and Dental staff; Estates and Ancillary staff; Theatre Practitioners; Student Health Visitors, etc.

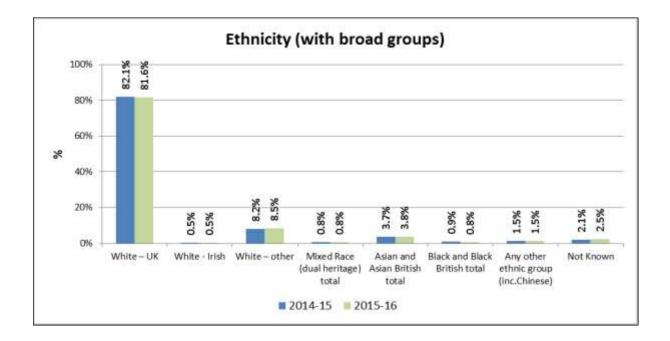


Figure 5: Staff Profile by ethnicity, 2014-2015 and 2015-2016

Table 5: York Teaching Hospitals Foundation Trust staff profile by ethnicity, 2014-2015 and 2015-2016

Ethnicity	Number of staff March 2016	% total staff March 2016	Number of staff part time 2016	Number of staff full time 2016	Number of staff March 2015	% total staff March 2015	Number of staff part time 2015	Number of staff full time 2015
White – UK	6,940	81.6	3,331	3,609	7,179	82.1	3,447	3,731
White – Irish	39	0.5	12	27	45	0.5	18	27
White – other	724	8.5	355	369	717	8.2	373	344
White total	7,703	90.6	3,698	4,005	7,940	90.9	3,838	4,102
Mixed Race (dual heritage) total	70	0.8	20	50	68	0.8	22	46
Asian and Asian British total	320	3.8	45	275	327	3.7	42	285
Black and Black British total	65	0.8	13	52	83	0.9	19	64
Any other ethnic group (inc.Chinese)	130	1.5	24	106	135	1.5	22	113
BME total	585	6.9	102	483	613	7.0	105	508
Not Known	215	2.5	108	107	186	2.1	99	87
Total	8,503	100.0	3,908	4,595	8,739	100.0	4,042	4,697

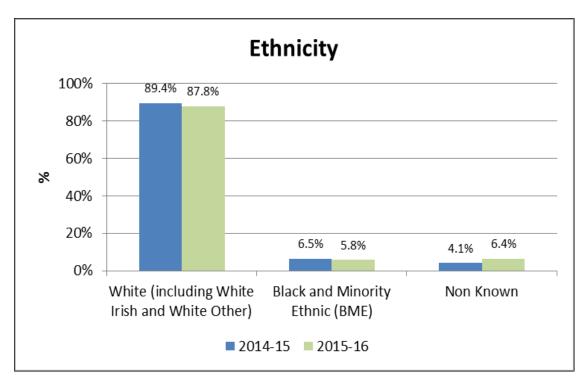


Figure 6: Staff joining the Trust by Ethnicity, 2014-2015 and 2015-2016

Table 6 - Staff joining the Trust from 1 April 2015 to 31 March 2016 by ethnicity

	Total new staff during the year	% of new staff during the year	% total staff at 31 March 2016	% new staff previous year
Ethnicity				
White (including White Irish and White other)	944	87.8	90.6	89.4
Black and minority ethnic people (Black, Asian, Mixed race and any other group)	62	5.8	6.9	6.5
Not Known	69	6.4	2.5	4.1
Total	1075			

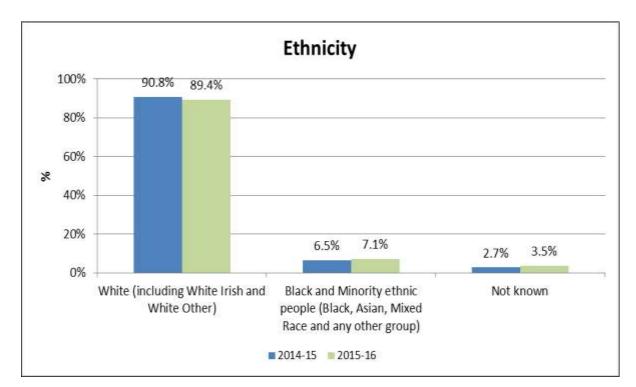


Figure 7: Staff Leaving the Trust by Ethnicity, 2014-2015 and 2015-2016

Table 7 - Staff leaving the Trust 1 April 2015 to 31 March 2015 by ethnicity

Publishable data – no category <10	Total number of staff leaving Trust	% staff leaving	% total staff	% staff leaving in previous year
Ethnicity				
White	1,059	89.4	90.6	90.8
Black and Minority ethnic people (Black, Asian, Mixed Race and any other group)	84	7.1	6.9	6.5
Not known	42	3.5	2.5	2.7
Total	1,185			

Pay band	White staff	% White staff	BME staff (e.g. mixed race, Asian and Black/Black British/Chinese)	% BME staff	Ethnicity not known	% ethnicity not known	Total staff	% total staff in this pay band
Band 1	609	7.9%	17	2.9%	15	7.0%	641	7.5%
Band 2	1,767	22.9%	76	13.0%	53	24.7%	1,896	22.3%
Band 3	781	10.1%	19	3.2%	18	8.4%	818	9.6%
Band 4	523	6.8%	<10	*	<10	*	536	6.3%
Band 5	1,434	18.6%	196	33.5%	43	20.0%	1,673	19.7%
Band 6	1,225	15.9%	35	6.0%	34	15.8%	1,294	15.2%
Band 7	570	7.4%	10	1.7%	13	6.0%	593	7.0%
Band 8a, b, c, d and 9	270	3.5%	<10	*	<10	*	277	3.3%
Medical and Dental	494	6.4%	222	37.9%	26	12.1%	742	8.7%
Personal Pay scale	30	0.4%	<10	*	<10	*	33	0.4%
Total Staff	7,703	100.0%	585		215		8,503	100.0%

 Table 8: Pay band by ethnicity, 2016

Note - * signifies percentages cannot be shown due to confidentiality issues



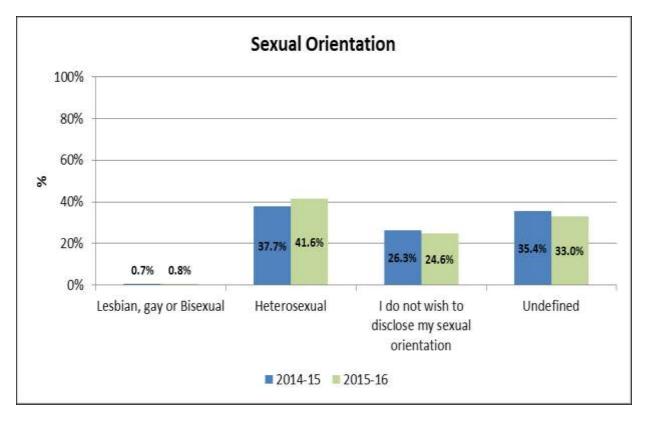


Table 9: York Teaching Hospitals Foundation Trust staff profile bysexual orientation, 2014-2015 and 2015-2016

Sexual Orientation	Number of staff March 2016	% total staff March 2016	Number of staff part time 2016	Number of staff full time 2016	Number of staff March 2015	% total staff March 2015	Number of staff part time 2015	Number of staff full time 2015
Lesbian, gay or Bisexual	65	0.8%			57	0.7%		
Heterosexual	3,538	41.6%	To protect a	nonymity	3,293	37.7%	To protect anonymity	
I do not wish to disclose my sexual orientation	2,094	24.6%	To protect anonymity of staff the part / full time analysis cannot be shown here		2,294	26.3%	of staff the part / full time analysis cannot be shown here	
Not known	2,806	33.0%			3,095	35.4%		
Total	8,503				8,739			

Figure 10: Staff joining the Trust by Sexual Orientation, 2014-2015 and 2015-2016

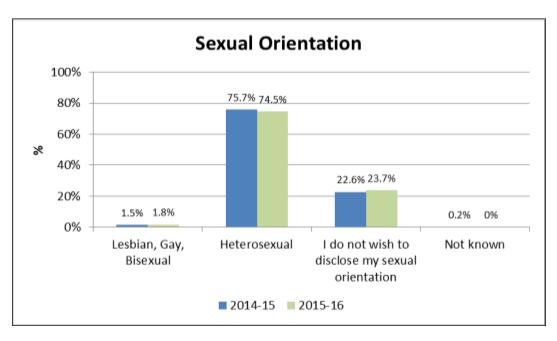


Table 10 - Staff joining the Trust from 1 April 2015 to 31 March 2016 by Sexual Orientation

	Total new staff during the year	% of new staff during the year	% total staff at 31 March 2015	% new staff previous year
Sexual orientation				
Lesbian, gay, bisexual	19	1.8	0.8	1.5
Heterosexual	801	74.5	41.6	75.7
I do not wish to disclose my sexual orientation	255	23.7	24.6	22.6
Not known	0	0	33.0	0.2
Total	1,075			

Table 11 - Staff leaving the Trust 1 April 2015 to 31 March 2016 bySexual Orientation

Publishable data – no category <10	Total number of staff leaving Trust	% staff leaving	% total staff	% staff leaving in previous year
Sexual Orientation				
Lesbian, Gay, Bisexual, Heterosexual	539	45.5	42.4	42.5
I do not wish to disclose my sexual orientation	405	34.2	24.6	25.4
Not Known	241	20.3	33.0	32.1
Total	1185			

Note - due to confidentiality issues we are unable to report findings for Lesbian, Gay, Bisexual staff as a specific group

Disabled	Number of staff below band 6	% staff below band 6	Number of staff band 6 and above, personal pay scale and Medical & Dental	% of staff band 6 and above	Total	Total %
Lesbian, Gay or Bisexual	50	0.9%	15	0.5%	65	0.8%
Heterosexual	2,421	43.5%	1,117	38.0%	3,538	41.6%
Not known/do not wish to disclose	3,093	55.6%	1,807	61.5%	4,900	57.6%
Total staff	5,564	100.0%	2,939	100.0%	8,503	100.0%

Table 12: Pay band by sexual orientation, 2016

Note - due to confidentiality issues it is only possible to report data based on very broad paybands

Figure 13: Staff Profile by Religion and Belief, 2014-2015 and 2015-2016

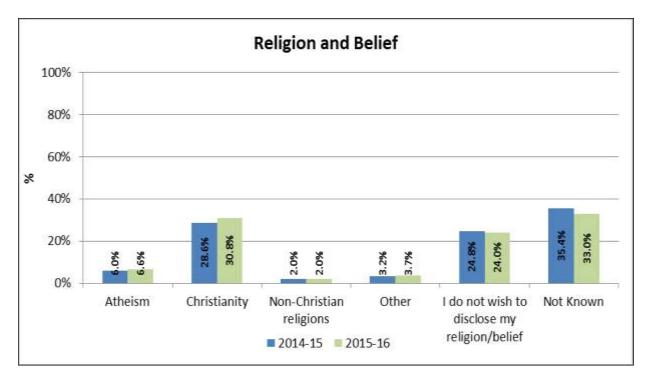


Table 13: York Teaching Hospitals Foundation Trust staff profile byReligion and Belief, 2014-2015 and 2015-2016

Religion and Belief	Number of staff March 2016	% total staff March 2016	Number of staff part time 2016	Number of staff full time 2016	Number of staff March 2015	% total staff March 2015	Number of staff part time 2015	Number of staff full time 2015
Atheism	558	6.6	156	402	521	6.0	156	365
Christianity	2,617	30.8	1,192	1,425	2,498	28.6	1,136	1,365
Non – Christian religions (Buddhism, Hinduism, Islam, Judaism, Sikhism)	170	2.0	24	146	175	2.0	21	154
Other	313	3.7	126	187	284	3.2	105	179
I do not wish to disclose my religion/belief	2,040	24.0	1,059	981	2,167	24.8	1,166	1,001
Not Known	2,805	33.0	1,351	1,454	3,094	35.4	1,458	1,633
Total	8,503		3,908	4,595	8,739		4,042	4,697

Figure 14: Staff joining the Trust by Religion and Belief, 2014-2015 and 2015-2016

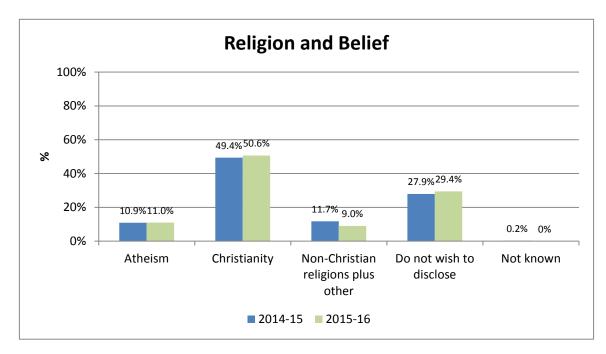


Table 14 - Staff joining the Trust from 1 April 2015 to 31 March 2016 by Religion and Belief

	Total new staff during the year	% new staff during the year	% total staff at 31 March 2015	% new staff in previous year
Religion and belief				
Atheism	118	11.0	6.6	10.9
Christianity	544	50.6	30.8	49.4
Non-Christian religions (Buddhism, Hinduism, Islam, Judaism, Sikhism) plus other	97	9.0	5.7	11.7
Do not wish to disclose	316	29.4	24	27.9
Not known	0	0.0	33.0	0.2
Total	1075			

Figure 15: Staff Leaving the Trust by Religion and Belief, 2014-2015 and 2015-2016

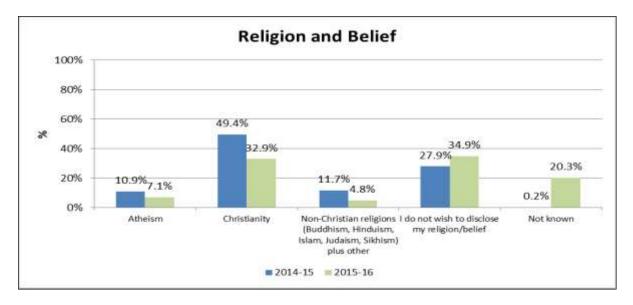


Table 15 - Staff leaving the Trust 1 April 2015 to 31 March 2016 by Religion and Belief

	Total number of staff leaving Trust	% staff leaving	% total staff	% staff leaving in previous year
Religion and belief				
Atheism	84	7.1	6.6	10.9
Christianity	390	32.9	30.8	49.4
Non-Christian religions (Buddhism, Hinduism, Islam, Judaism, Sikhism) plus other	57	4.8	2.0	11.7
Do not wish to disclose	413	34.9	24.0	27.9
Not known	241	20.3	330	0.2
Total	1,185			

Table 16: Pay band by religion and belief, 2016

Religion	Number of staff below band 6	% staff below band 6	Number of staff band 6 and above and personal pay	% of staff band 6 and above and personal	Number of staff in Medical & Dental Grade	% of Staff in Medical & Dental
Athaiana	255	C 40/	scale	pay scale	70	grade
Atheism	355	6.4%	133	6.1%	70	9.4%
Christianity	1,825	32.8%	615	28.0%	177	23.9%
Buddhism, Hinduism, Islam, Judaism, Sikhism	43	0.8%	11	0.5%	116	15.6%
Other	225	4.0%	70	3.2%	18	2.4%
Not known	1,738	31.2%	863	39.3%	204	27.5%
I do not wish to disclose my religion/belief	1,378	24.8%	505	23.0%	157	21.2%
Total staff	5,564	100.0 %	2,197	100.0%	742	100.0%

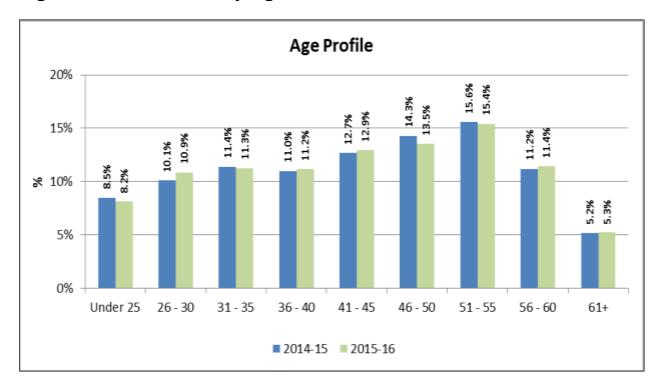


Figure 17: Staff Profile by Age, 2014-2015 and 2015-2016

Table 17: York Teaching Hospitals Foundation Trust staff profile byage, 2014-2015 and 2015-2016

Age	Number of staff March 2016	% total staff March 2016	Number of staff part time 2016	Number of staff full time 2016	Number of staff March 2015	% total staff March 2015	Number of staff part time 2015	Number of staff full time 2015
Under 25	693	8.2	139	554	740	8.5	165	576
26-30	924	10.9	258	666	881	10.1	268	613
31-35	957	11.3	436	521	996	11.4	449	547
36-40	949	11.2	482	467	958	11.0	472	486
41-45	1,101	12.9	524	577	1,114	12.7	536	578
46-50	1,150	13.5	540	610	1,252	14.3	591	661
51-55	1,310	15.4	651	659	1,361	15.6	677	683
56-60	972	11.4	553	419	983	11.2	563	420
61+	447	5.3	325	122	454	5.2	321	133
Total	8,503		3,908	4,595	8,739		4,042	4,697

Figure 18: Staff joining the Trust by Age, 2014-2015 and 2015-2016

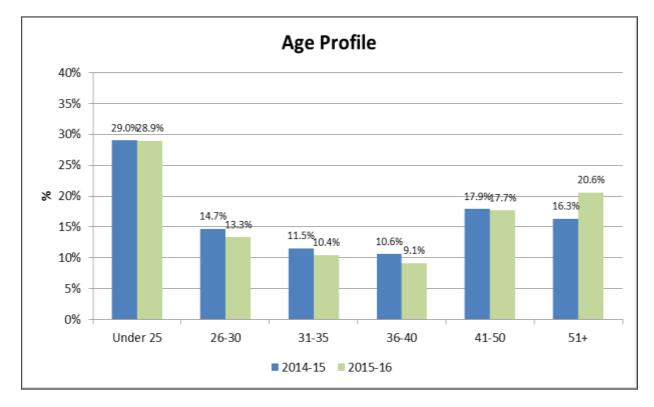
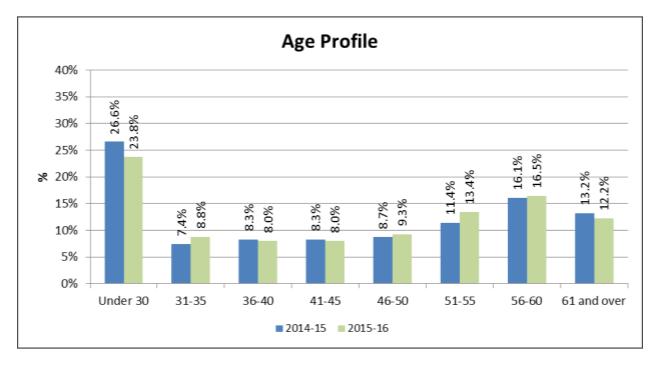


Table 18 - Staff joining the Trust from 1 April 2015 to 31 March 2016 by age

	Total new staff during the year	% new staff during the year	% total staff at 31 March 2015	% new staff in previous year
Age Profile				
Under 25	311	28.9	8.2	29.0
26-30	143	13.3	10.9	14.7
31-35	112	10.4	11.3	11.5
36-40	98	9.1	11.2	10.6
41-50	190	17.7	26.4	17.9
51+	221	20.6	32.1	16.3
Total	1075			

Figure 19: Staff Leaving the Trust by Age, 2014-2015 and 2015-2016



Publishable data – no category <10	Total number of staff leaving Trust	% staff leaving	% total staff	% staff leaving in Previous year
Age				
Under 30	282	23.8	19.1	26.6
31-35	104	8.8	11.3	7.4
36-40	95	8.0	11.2	8.3
41-45	95	8.0	12.9	8.3
46-50	110	9.3	13.5	8.7
51-55	159	13.4	15.4	11.4
56-60	195	16.5	11.4	16.1
61 and over	145	12.2	5.3	13.2
Total	1,185			

Table 19 - Staff leaving the Trust 1 April 2015 to 31 March 2016 by age

Table 20: Pay band by age

	Under 25 Years	% staff under 25 years	26 – 50 years	% staff 26- 50 years	Over 50 years	% over 50 years	Total staff	% total staff in this pay band
Personal								
Salary	9	1.3%	10	0.2%	14	0.5%	33	0.4%
Medical								
and Dental	67	9.7%	504	9.9%	171	6.3%	742	8.7%
Band 1	44	6.3%	342	6.7%	255	9.3%	641	7.5%
Band 2	235	33.9%	995	19.6%	666	24.4%	1,896	22.3%
Band 3	64	9.2%	480	9.4%	274	10.0%	818	9.6%
Band 4	39	5.6%	274	5.4%	223	8.2%	536	6.3%
Band 5	201	29.0%	1,052	20.7%	420	15.4%	1,673	19.7%
Band 6			885	17.4%	382	14.0%	1,294	15.2%
Band 7	34	4.9%	366	7.2%	221	8.1%	593	7.0%
Band 8a+			173	3.4%	103	3.8%	277	3.3%
Total	693		5,081		2,729		8,503	

Note - due to confidentiality only totals for band 6 and above and under 25 years can be shown

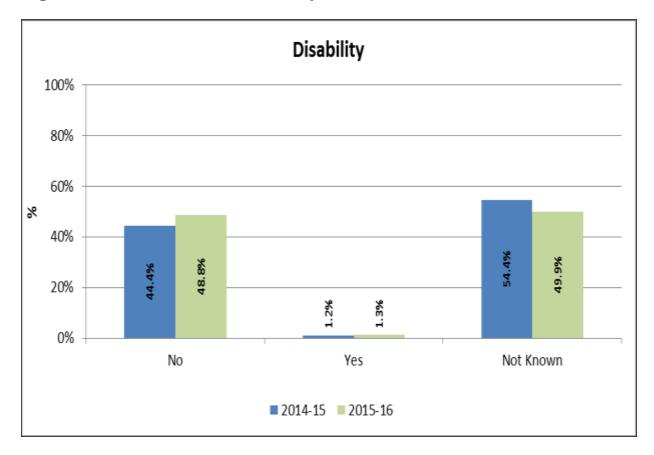


Figure 21: Staff Profile - Disability, 2014-2015 and 2015-2016

Table 21: York Teaching Hospitals Foundation Trust staff profile - disability status, 2014-2015 and 2015-2016

Disabled Person	Number of staff March 2016	% of staff March 2016	Number of staff part time 2016	Number of staff full time 2016	Number of staff March 2015	% of staff March 2015	Number of staff part time 2015	Number of staff full time 2015
No	4,148	48.8	1,758	2,390	3,881	44.4	1,698	2,185
Yes	110	1.3	49	61	103	1.2	44	59
Not Known	4,245	49.9	2,101	2,144	4,755	54.4	2,300	2,453
Total	8,503		3,908	4,595	8,739		4,042	4,697

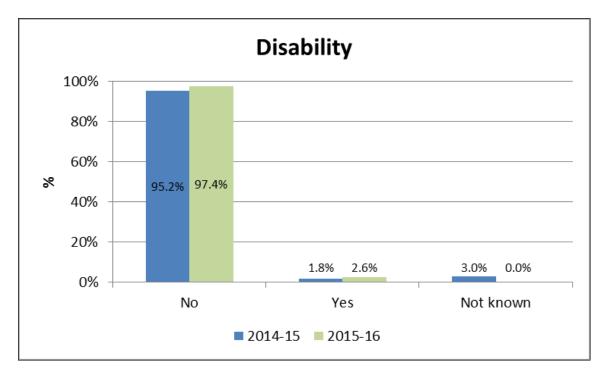


Figure 22: Staff joining the Trust - Disability, 2014-2015 and 2015-2016

Table 22 - Staff joining the Trust from 1 April 2015 to 31 March 2016 - disability status

	Total new staff during the year	% of new staff during the year	% total staff at 31 March 2016	% new staff previous year		
Disabled Person						
No	1,047	97.4	48.8	95.2		
Yes	28	2.6	1.3	1.8		
Not known	0	0	49.9	3		
Total	1,075					

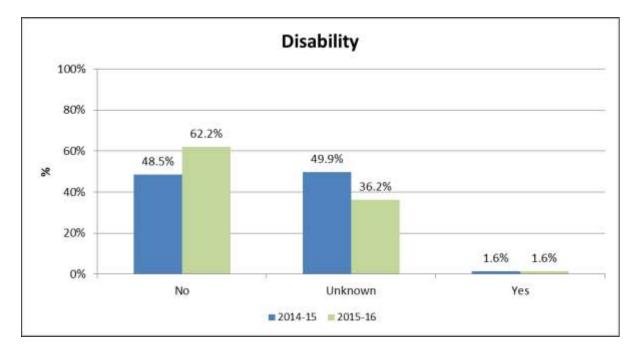


Figure 23: Staff Leaving the Trust - Disability, 2014-2015 and 2015-2016

Table 23 - Staff leaving York Teaching Hospitals Foundation Trust(disability) 1 April 2015 to 31 March 2016

Publishable data – no category <10	Total number of staff leaving Trust	% staff leaving	% total staff	% staff leaving in previous year
Disabled person				
No	737	62.2	48.8	48.5
Yes	19	1.6	1.3	1.6
Not Known	429	36.2	49.9	49.9
Total	1,185			

Table 24: Pay band by disability, 2016

Disabled	Number of staff below band 6	% staff below band 6	Number of staff band 6 and above, personal pay scale and Medical & Dental	% of staff band 6 and above	Total	Total %
Non - Disabled Staff	2,820	50.7%	1,328	45.2%	4,148	44.4
Disabled staff	88	1.6%	22	0.7%	110	1.2
Not known	2656	47.7%	1,589	54.1%	4,245	54.4
Total staff	5,564		2,939		8,503	

Note – due to confidentiality issues it is only possible to report data based on very broad paybands

Our Temporary Workforce Staff

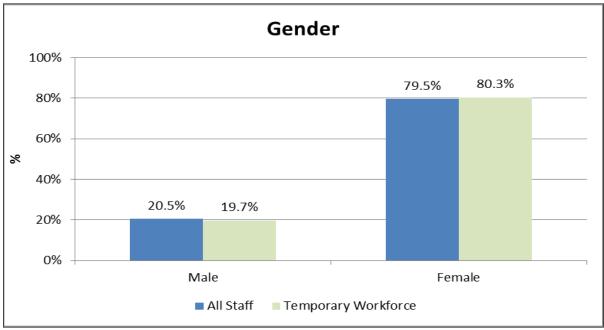


Figure 25: Temporary Workforce Staff Profile by gender, 2016

Note – all the analysis is solely based on those where their 'main role in the organisation was recorded as bank or locum.

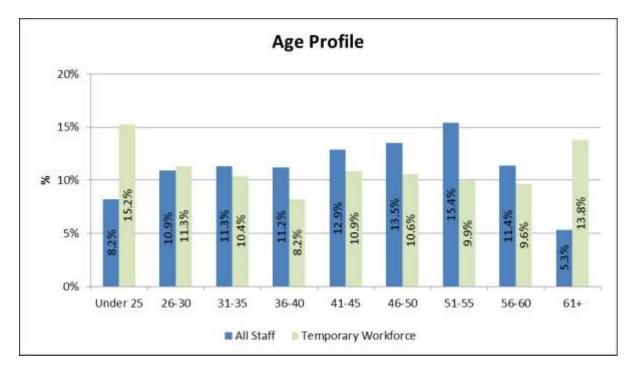


Figure 26: Temporary Workforce Staff Profile by age, 2016

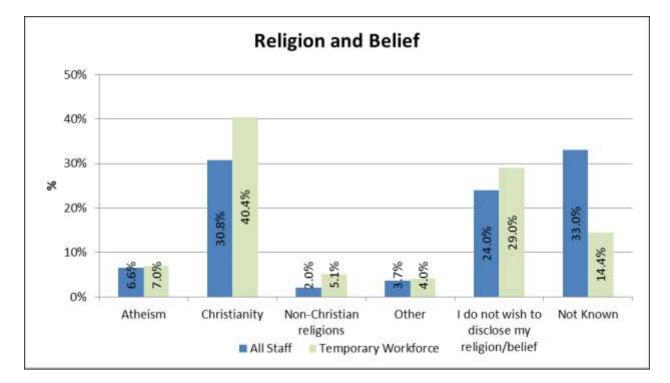


Figure 27: Temporary Workforce Staff Profile by Religion and Belief, 2016

Note – this data is influenced by the fact the levels of staff not wishing to disclose this and also 'Unknowns' are better for temporary workforce staff

Appendix C - Staff Learning and Development

1. ODIL

Table 1: Attendance at ODIL courses and programmes: 2014-15 by age

Financial Year 2014-15		
Age Range	Attendees in range	Percentage
20-29	92	6.45%
30-39	382	26.79%
40-49	538	37.73%
50-59	350	24.54%
60-65	27	1.89%
Not recorded	37	2.59%
Total	1426	100.00%

Table 2: Attendance at ODIL courses and programmes: 2014-15 by gender

Gender of Delegates Attending ODIL Courses and Programmes				
Financial Year 2014-15				
Gender Total Percentage				
Female	1154	80.93%		
Male	235	16.48%		
Not recorded	37	2.59%		
Grand Total	1426	100.00%		

Table 3: Attendance at ODIL courses and programmes: 2014-15 by ethnicity

Ethnicity of Delegates Attending ODIL Courses and Programmes		
Financial Year 2014-15		
Ethnicity	Total	Percentage
A White – British	1017	71.32%
B White – Irish	4	0.28%
C White - Any other White background	13	0.91%
C3 White Unspecified	110	7.71%
CA White English	126	8.84%
CB White Scottish	3	0.21%
CY White Other European	9	0.63%
D Mixed - White & Black Caribbean	8	0.56%
GF Mixed - Other/Unspecified	7	0.49%
H Asian or Asian British - Indian	32	2.24%
J Asian or Asian British - Pakistani	9	0.63%
M Black or Black British - Caribbean	4	0.28%
N Black or Black British - African	13	0.91%
SC Filipino	17	1.19%
Z Not Stated	17	1.19%
Not recorded	37	2.59%
Grand Total	1426	100.00%

Table 4: Attendance at ODIL courses and programmes: 2014-15 by religion

Religion of Delegates Attending ODIL Courses and Programmes		
Financial Year 2014-15		
Religion	Total	Percentage
Atheism	107	7.50%
Buddhism	2	0.14%
Christianity	421	29.52%
Hinduism	18	1.26%
I do not wish to disclose my religion/belief	316	22.16%
Other	28	1.96%
Undefined	497	34.85%
Not recorded	37	2.59%
Grand Total	1426	100.00%

Table 5: Attendance at ODIL courses and programmes: 2014-15 bydisability

Able Bodied/Disabled Delegates Atte	Bodied/Disabled Delegates Attending ODIL Courses and Programmes		
Disability Total Percentage			
No	530	37.17%	
Not Declared	72	5.05%	
Undefined	772	54.14%	
Yes	15	1.05%	
Not recorded	37	2.59%	
Grand Total	1426	100.00%	

Table 6: Attendance at ODIL courses and programmes: 2014-15 bysexual orientation

Sexuality of Delegates Attending ODIL Cou Financial Year 2014-15	uality of Delegates Attending ODIL Courses and Programmes		
Sexual Orientation	Total	Percentage	
Gay	20	1.40%	
Heterosexual	491	34.43%	
I do not wish to disclose my sexual			
orientation	381	26.72%	
Undefined	497	34.85%	
Not recorded	37	2.59%	
Grand Total	1426	100.00%	

2. Learning and Development / Training

Ethnicity	Learner 'access' April 2014 - March 2015	Learner 'access' April 2013 - March 2014	% change year on year
White – UK	55,715 (81%)	38,224 (70%)	45.8
White – Irish	461 (0.7%)	328 (0.6%)	40.5
White (e.g. not UK, White unspecified)	4394 (6.4%)	10,409 (19%)	-57.8
White total	60570 (88%)	48,961 (89%)	23.7
Mixed Race (dual heritage) total	764 (0.1%)	443 (0.8%)	72.5
Asian and Asian British total	3304 (4.8%)	2,190 (0.4%)	50.9
Black and Black British total	713 (0.1%)	628 (0.1%)	13.5
Any other ethnic group (including Chinese)	1212 (1.8%)	859 (1.6%)	41.1
BME total (mixed race, Asian and Asian British)	6454 (9.4%)	4,448 (8.2%)	45.1
Black and Black British, Chinese and Irish people)			
Not known	1908 (2.8%)	1,348 (2.5%)	41.5
Total Learning Interventions	68,471	54,429	

Table 7: Staff Learning and Development by ethnicity

Table 8: Staff Training by gender

Gender	Learner 'access' April 2014 - March 2015	Learner 'access' April 2013 - March 2014	% change year on year
Female	55,779 (81%)	46,319 (85%)	20.4
Male	12,692 (19%)	8,110 (15%)	56.5
Total	68,471	54,429	

Disability	Learner 'access' April 2014 - March 2015	Learner 'access' April 2013 - March 2014	% change year on year
No	40,287 (59%)	19,134 (35%)	110.6
Yes	907 (1.2%)	790 (1.6%)	14.8
Not known/not declared	27,277 (39.8%)	34,505 (63.4%)	-20.9
Total Learning Interventions	68,471	54,429	

Table 9: Staff Training by disability

Table 10: Staff Training by age

Age	Learner 'access' April	Learner 'access' April	% change year
Aye	2014 - March 2015	2013 - March 2014	on year
Under 25	10,496 (16%)	6,093 (11%)	72.3
26 - 30	9,194 (13%)	5,543 (10%)	65.9
31 - 35	8,080 (12%)	6,297 (12%)	28.3
36 - 40	7,456 (11%)	6,268 (12%)	19.0
41 - 45	8,396 (12%)	7,216 (13%)	16.4
46 - 50	8,700 (13%)	7,840 (14%)	11.0
51 - 55	8,207 (12%)	8,340 (16%)	-1.6
56 - 60	5,678 (8%)	5,053 (9%)	12.4
61+	2,264 (3%)	1,779 (3%)	27.3
Total Learning	68,471	54,429	
Interventions	00,471	54,425	

Table 11: Starr Learning and Development by religion			
	Religion	Learner 'access' April 2014 -	% of total delegates

Table 11: Staff Learning	and Development by religion
	and Development by religion

Religion	Learner 'access' April 2014 - March 2015	% of total delegates sessions
Atheism	5,512	8.0
Buddhism	278	0.4
Christianity	22,643	33.1
Hinduism	728	1.1
Islam	1,030	1.5
Jainism	26	0.03
Judaism	60	0.07
Sikhism	118	0.2
Other	3,062	4.5
Not known	16,729	24.4
I do not wish to specify	18,285	26.7
Total Learning Interventions	68,471	

Table 12: Staff Learning and Development by sexual orientation

Sexual Orientation	Learner 'access' April 2014 - March 2015	% of total delegates sessions
Bisexual	190	0.3
Gay	296	0.4
Lesbian	161	0.2
Heterosexual	33,291	48.7
Not known	17,803	26.0
I do not wish to specify	16,730	24.4
Total Learning Interventions	68,471	

Payscale	Learner 'access' April 2014 - March 2015	% of total delegates sessions
Band 1	3,601	5.3
Band 2	15,988	23.4
Band 3	6,140	9.0
Band 4	1,920	2.8
Band 5	16,681	24.4
Band 6	10,010	14.6
Band 7	4,329	6.3
Band 8	902	1.3
Band 9	224	0.3
Personal Salary	8,676	12.6
Total Learning Interventions	68,471	

Table 13: Staff Learning and Development by payscale

Appendix D - Recruitment

Category	Applied April 2015 to March 2016	Shortlisted April 2015 to March 2016	% applications shortlisted	% applications
Male	5,630	1,672	24.20%	28.60%
Female	13,317	5,195	75.20%	71.00%
Undisclosed	70	39	0.60%	0.40%
Total	18,747	6,906	100.00%	100.00%

Table 1: Recruitment by gender, 2015-2016

Table 2: Recruitment by disability, 2015-2016

Category	Applied April 2015 to March 2016	Shortlisted April 2015 to March 2016	% applications shortlisted	% applications
Yes	1,196	482	7.00%	6.40%
No	17,216	6,308	91.30%	91.80%
Undisclosed	335	116	1.70%	1.80%
Total	18,747	6,906	100.00%	100.00%

Category	Applied April 2015 to March 2016	Shortlisted April 2015 to March 2016	% applications shortlisted	% applications
WHITE - British	13,969	5,425	78.60%	74.50%
WHITE - Irish	107	57	0.80%	0.60%
WHITE - Any other white background	1,349	392	5.70%	7.20%
ASIAN or ASIAN BRITISH - Indian	792	233	3.40%	4.20%
ASIAN or ASIAN BRITISH - Pakistani	549	158	2.30%	2.90%
ASIAN or ASIAN BRITISH - Bangladeshi	89	16	0.20%	0.50%
ASIAN or ASIAN BRITISH - Any other Asian background	326	100	1.40%	1.70%
MIXED - White & Black Caribbean	27	15	0.20%	0.10%
MIXED - White & Black African	45	10	0.10%	0.20%
MIXED - White & Asian	54	17	0.20%	0.30%
MIXED - any other mixed background	79	30	0.40%	0.40%
BLACK or BLACK BRITISH - Caribbean	77	33	0.50%	0.40%
BLACK or BLACK BRITISH - African	616	172	2.50%	3.30%
BLACK or BLACK BRITISH - Any other black background	17	2	0.00%	0.10%
OTHER ETHNIC GROUP - Chinese	102	33	0.50%	0.50%
OTHER ETHNIC GROUP - Any other ethnic group	231	85	1.20%	1.20%
Undisclosed	318	128	1.90%	1.70%
Total	18,747	6,906	100.00%	100.00%

Category	Applied April 2015 to March 2016	Shortlisted April 2015 to March 2016	% applications shortlisted	% applications
Under 18	35	14	0.20%	0.20%
18 to 19	439	116	1.70%	2.30%
20 to 24	3,484	1079	15.60%	18.60%
25 to 29	3,600	1188	17.20%	19.20%
30 to 34	2,417	892	12.90%	12.90%
35 to 39	2,060	854	12.40%	11.00%
40 to 44	1,733	750	10.90%	9.20%
45 to 49	1,937	784	11.40%	10.30%
50 to 54	1,532	686	9.90%	8.20%
55 to 59	925	406	5.90%	4.90%
60 to 64	525	122	1.80%	2.80%
65 to 69	20	4	0.10%	0.10%
70 and over	0	0	0.00%	0.00%
Undisclosed	40	11	0.20%	0.20%
Total	18,747	6,906	100.00%	100.00%

Table 4: Recruitment by age, 2015-2016

Table 5: Recruitment by religion / belief, 2015-2016

Category	Applied April 2015 to March 2016	Shortlisted April 2015 to March 2016	% applications shortlisted	% applications
Atheism	3,114	1119	16.20%	16.60%
Buddhism	160	64	0.90%	0.90%
Christianity	9,849	3796	55.00%	52.50%
Hinduism	392	131	1.90%	2.10%
Islam	1,079	296	4.30%	5.80%
Sikhism	35	11	0.20%	0.20%
Other (including Jainism and Judaism)	1,826	640	9.27%	9.74%
Undisclosed	2,292	849	12.30%	12.20%
Total	18,747	6,906	100.0%	100.0%

Table 6: Recruitment by sexual orientation, 2015-2016

Category	Applied April 2015 to March 2016	Shortlisted April 2015 to March 2016	% applications shortlisted	% applications
Lesbian	102	39	0.50%	0.60%
Gay	187	65	1.00%	0.90%
Bisexual	225	73	1.20%	1.10%
Heterosexual	17,046	6313	90.90%	91.40%
Undisclosed	1,187	416	6.30%	6.00%
Total	18,747	6,906	100.00%	100.00%

Appendix E – Grievance, Disciplinary and Bullying & Harassment

Table 1: number of grievances by ethnic origin, 2014-2015 and 2015-	
2016	

	Number of Grievances year ending 31 March 2016	Number of Grievances year ending 31 March 2015
White – UK	20	14
White – Irish	0	<10
White (not UK or Irish – Includes White unspecified)	<10	<10
Mixed Race (dual heritage) total	0	0
Asian and Asian British total	0	0
Black and Black British total	0	0
Any other ethnic group (including Chinese)	0	0
Not Known	0	0
Total	*	*

Note - * signifies that this figure cannot be shown due to confidentiality issues

Table 2: Disciplinary investigations by Ethnicity, 2014-2015 and 2015-2016

Ethnicity	Disciplinary Investigations	Disciplinary Investigations
	2016	2015
White – UK	76	78
White – Irish	0	0
White (not UK or Irish – Includes White unspecified)	<10	<10
White total	*	*
Mixed Race (dual heritage) total	<10	<10
Asian and Asian British total	<10	<10
Black and Black British total	0	0
Any other ethnic group (including Chinese)	<10	<10
BME total (e.g. mixed race, Asian and Asian British,		*
Black and Black British, Chinese)	<10	
Not Known	0	0
Total	87	89

Note - * signifies figures cannot be shown due to confidentiality issues

Table 3: Disciplinary investigations by Gender, 2015-2016

Gender	Disciplinary Investigations 2016	Disciplinary Investigations 2015
Female	54	61
Male	33	28
Total	87	89

Disabled	Disciplinary Investigations 2016	Disciplinary Investigations 2015
Yes	<10	0
No	32	35
Not Declared	*	54
Undefined		54
Total	87	89

Table 4: Disciplinary investigations by Disability, 2015-2016

Note - * signifies figures cannot be shown due to confidentiality issues

Table 5: Disciplinary investigations, sanctions and suspensions bySexual Orientation, 2015-2016

Sexual Orientation	Disciplinary Investigations	Disciplinary
	2015	Investigations 2015
Heterosexual	29	26
I do not wish to disclose my sexual orientation	23	23
Undefined	35	40
Total	87	89

Table 6: Disciplinary investigations, sanctions and suspensions byReligion / Belief, 2015-2016

Religion and Belief	Disciplinary Investigations 2015	Disciplinary Investigations 2015
Atheism	<10	<10
Christianity	23	19
Hindu	<10	0
I do not wish to disclose my religion/belief	20	21
Undefined	35	39
Other	<10	<10
Total	87	89

8 How are we doing?

We are accountable to our staff, service users and members of the public.

Should you have any feedback or concerns about equality of access to services or in the workplace, please contact:

Margaret Milburn – Equality and Diversity Facilitator Telephone: 01904 726633 Email: margaret.milburn@york.nhs.uk

