

# Equality Strategy Annual Report Year 4

February 2016



## 1. Introduction

Our Equality Strategy outlines our plans for equality and diversity over the four year period from December 2011-2015. The Strategy reflects our legislative requirements under the Equality Act (2010) and Public Sector Equality Duty (PSED), and sets out our commitment to taking equality, diversity and human rights into account in everything we do, whether that's providing services, employing people, developing policies, communicating, consulting or involving people in our work. The Strategy is supported by our Equality Objectives which explain how we are working towards achieving our vision. Progress against the Strategy, including our equality information, is monitored by the Equality and Diversity Committee, reported to the Board, and published annually on our website.

**This annual report summarises the significant progress that the NHSBSA has made in the fourth and final year of this Equality Strategy for 2011-15, which covers the period from January – December 2015. Highlighted below in Section 2 are our main achievements in 2015. Section 3 contains an executive summary of key findings from the analysis of the workforce and recruitment statistics that we have a legal duty to collect and publish. The full details of these are included at Appendix 1. The updated Action Plan at the end of the current strategy is included at Appendix 2. The vast majority of actions have been completed, with only 4 actions remaining which are all in progress. These have been carried over into the action plan for the new Diversity and Inclusion Strategy for 2016 – 19.**

## 2. Main achievements in 2015:

### Stonewall Workplace Equality Index

Stonewall, the leading charitable organisation in the UK that campaigns for sexual orientation equality, announced the results of this year's Workplace Equality Index in January 2016. The NHSBSA participated in the Index for the third successive year, as part of our membership of Stonewall's Diversity Champions Programme. The Index is an annual benchmarking exercise that evaluates the progress employers are making in promoting a better working environment for their lesbian, gay and bisexual (LGB) employees. Research shows that people are more productive, creative, loyal and successful when they have the confidence and support to be themselves at work. Stonewall congratulated the NHSBSA on another fantastic achievement in the Index, moving up 42 places in one year, to 152<sup>nd</sup> out of the 415 participating organisations. This has been significant progress over the last two years, from 310<sup>th</sup> place in 2014, to 194<sup>th</sup> place in 2015, and now 152<sup>nd</sup> place. A representative from Stonewall will be visiting the NHSBSA to carry out a benchmarking meeting to explore in more detail our performance in the Index and how we compare against other organisations. This will assist us in making further improvements in readiness for our fourth submission to the annual Index, which will take place in September 2016.

### Equality and Diversity training

In 2015, a new Equality and Diversity e-learning module was developed and launched on the Learning Management System in May. The module is mandatory for all staff to complete, and by the end of 2015 99% of staff had done so. Feedback from staff has been very positive, and this module had the highest uptake of any module on the LMS to date. In 2016, a more in-depth module for managers will be developed and launched, specific to their roles and responsibilities, to complement the Equality and Diversity Workshops for managers that have been held previously.

## **Project Choice**

In 2015, the NHSBSA further expanded its support of Project Choice, an internship programme which equips young people with learning disabilities, difficulties, autism and/or physical disabilities with the social and work based skills needed to enable them to obtain employment. The Project is run by City Hospitals Sunderland NHS Foundation Trust, with partnership learning support provided by Gateshead College. The NHSBSA continued to support Stage 2 of the scheme, providing work placements in Prescription Services at Bridge House, with four students on placement every academic term. The students work three and a half days per week and spend the remainder of the week studying at Gateshead College. The students are supported in the workplace by mentors who have volunteered to be involved with the Project and who receive mentor training. It was a fantastic achievement of the scheme when one of the students was appointed to a permanent role with us in Prescription Services. In September, the NHSBSA started also supporting Stage 1 of the scheme, by providing work experience for younger students in our Contact Centre Services. These students spend half a day per week with us for 6 weeks, with the remainder of their week spent in school or college. Throughout the year we provided Stage 1 and 2 placements to 12 students, and this will be further expanded in 2016. This initiative also supports our Community Investment Strategy.

## **Newcastle College learning development retail scheme**

In Spring 2015, the NHSBSA began supporting Newcastle College's Learning Development Retail Scheme, which provides young people with learning disabilities, difficulties, autism and/or physical disabilities with retail experience and customer service skills, to enable them to obtain employment. The students run a mobile market stall selling fresh fruit and vegetables, which visits different workplaces throughout the week. After starting this initially at Stella House and receiving a fantastic response from staff, it has now been expanded to Bridge House and the Benton warehouse. This initiative also supports our Health and Wellbeing, and Community Investment strategies.

## **Connect to Autism**

In summer 2015, the NHSBSA joined 'Connect to Autism', a national project being run by the Autism Alliance and funded by the Department of Health, with the aim to create autism-friendly communities. Autism is a neurodevelopmental disorder which affects people's ability to communicate with and relate to others, which can lead to exclusion and isolation. In England, half a million people with autism risk being excluded from their own communities because they are misunderstood. The project involves working with the Autism Alliance to ensure our services are fully accessible to customers with autism, and our staff are aware of how best to support and communicate with people with autism. As part of this, the Autism Alliance delivered training to the Contact Centre trainers, and this is now being developed into a 'Supporting Vulnerable Customers' training module for all CCS

staff. In 2016, the Autism Alliance will be providing awareness sessions for our staff at our main sites. Attendees will gain a greater understanding of autism, an awareness of the different ways people with autism may choose to communicate, and how best to support people with autism, whether that is colleagues, customers or people outside the workplace.

## **Dementia UK**

The NHSBSA also started working with the Dementia Action Alliance and will sign up to become a national member in 2016, which will involve developing an action plan with them. It is a multi-faceted approach; aiming to improve access to our services for customers with dementia, raising awareness amongst and supporting our staff who may be caring for someone with dementia by delivering the 'Dementia Friends' initiative, facilitating staff to volunteer (as per our Community Investment strategy) for the Alzheimer's Society (who run 'Dementia Friends'), and also fundraise for them. 'Dementia Friends' awareness sessions were delivered at some of our sites in 2015, with more planned for 2016.

## **Staff Diversity Network**

The Staff Diversity Network has progressed very well during its third year, with membership rising further to 28 members currently. Network members come from diverse backgrounds and from varied roles, departments and bases across the NHSBSA, and meet every two months at different NHSBSA sites. The purpose of the Network is to; assist the NHSBSA in developing an inclusive culture where employees feel comfortable to be themselves at work, promote equality and diversity within the NHSBSA, provide a means of having open dialogue with staff to help us consult on the equality agenda, including identifying and understanding any barriers experienced by staff around fairness, respect and inclusion, and for Network members to act as visible 'Equality and Diversity' champions within their departments and bases.

Members have continued to promote the Network, encouraging staff to have confidence to raise any equality issues with them, and track where issues arise and any recurring themes, so that issues can be addressed and awareness raising can be targeted as needed. They have also worked hard to promote many key diversity issues and events over the year to staff (please see the Communications and Engagement section). Each Network meeting includes a skills or knowledge workshop, often with external speakers, to ensure that members have a good understanding of equality issues and have the appropriate skills to be able to support staff. Workshop topics in 2015 included how to challenge and deal with conflict, awareness of trans and gender variance, and the holocaust.

## **Equality and Diversity Committee**

The Equality and Diversity Committee have continued to oversee progress against the Equality Strategy. The Committee is chaired by the Director of Service Delivery in his role as Executive Champion for Equality and Diversity. Membership includes senior representation from across the NHSBSA and staff side colleagues, to lead on the work outlined within the Equality Strategy Action Plan. Representatives from the Staff Diversity Network also attend the Committee meetings, to ensure there is joined up working between the Network and the Committee. In 2015, the Committee reviewed its Terms of Reference and made some changes to its Membership to reflect the new Leadership

Team structure, to ensure that the membership continues to support the purpose of the Committee and operate strategically.

## **Communications and engagement on Equality and Diversity**

Throughout the year, the Staff Diversity Network have delivered a significant programme of regular communications to staff on equality and diversity, including news items and articles in The Loop, on the Hub, information displays at NHSBSA sites, drop-in sessions, and other promotions, to raise awareness and encourage greater engagement in this area. Key diversity events supported in 2015 included; LGBT (Lesbian, Gay, Bisexual and Transgender) History Month, NHS Equality, Diversity and Human Rights Week, Carers Week, Black History Month, and Older Peoples Day, and religious celebrations included Ramadan, Eid, Diwali and Samhain.

The Staff Diversity Network has also continued to support our external engagement work with customers and the public. In 2015 for the second year the NHSBSA participated in Newcastle Pride, with representatives from the Network and from Patient Services running an information stall to provide information to the public about our services and to promote the NHSBSA as an employer of choice. The festival is the second largest Pride event in the UK and attracted over 85,000 attendees. This year, the NHSBSA took out an advert in the Pride Guide, to further promote the NHSBSA and demonstrate our commitment to LGBT equality. Network members from Hesketh House also supported Blackpool Pride for the first time, running an information stall. Going forward, more events are planned.

Finally, there has also been engagement on equality and diversity with senior management colleagues, through the delivery of an Equality and Diversity session at an Extended Leadership Team event, which both Network and Committee members supported. In addition to a speaker from Stonewall talking about our work with them, it was also an opportunity to have a workshop with senior colleagues to gather their feedback for the development of the new Diversity and Inclusion Strategy.

## **Staff Survey**

The feedback from the 2015 staff survey, in which questions on equality and diversity were included for the first time, was very positive, with;

- 86% of respondents agreeing that the NHSBSA is committed to equality and diversity
- 76% agreeing that the NHSBSA acts fairly with regard to career progression/promotion, and
- 69% being aware of the Staff Diversity Network

These results were very encouraging and will now be benchmarked each year in the survey.

## **Accessibility of information and services**

In 2015 there was a continued increase in demand across the organisation for translation into different languages (especially via emails received into the Contact Centre), and also an increase in demand for documents to be produced in different formats such as Braille or easy-read. A review of our demand for translation and the existing services we use is currently underway. In addition, changes brought about by the Welsh Language Measure



(2011), have led to the creation of new standards which the NHSBSA may be required to comply with. The Welsh Language Commissioner has conducted a series of standards investigations of all public bodies providing services in Wales, with the NHSBSA included in the second review. A project was established, with the Equality and Diversity Manager and Communications Manager working with relevant Heads of Service to review our services in this regard and to submit a detailed response to the investigation on behalf of the NHSBSA. A draft report has been published by the Welsh Language Commissioner, which will be considered by the Welsh Assembly. We will be informed of the outcome and any changes we are required to make later this year.

Equality and Diversity questions are now included in all Customer Satisfaction surveys, to support us in identifying any barriers to accessing our services, and to ensure that customers receive the same quality of service from us, regardless of any additional communication needs they may have. The results from the surveys carried out in 2015 were very positive and demonstrate that overall there have been the same levels of satisfaction with our services, irrespective of protected characteristic.

## **Equality analysis**

Significant work has been done to ensure that the Equality Analysis Procedure (formerly referred to as Equality Impact Assessment), is used regularly as part of the assurance framework for all business change and policy review / development processes across the NHSBSA. This supports the identification and avoidance of any potentially discriminatory equality issues at an early stage of a business change project or policy review, in order to ensure compliance with our legal requirements under the Equality Act (2010) and the Public Sector Equality Duty (2011). After working with the Project Management Office, this is now embedded in the change process, whether that is taking place as a change project or as a continuous improvement project run by a Head of Service. Equality analysis has also been embedded in procurement processes, so that equality requirements are included in all new procurements where relevant. There have been several major change and procurement projects in this period which have had significant equality implications for staff and/or customers, and these have been successfully identified and mitigated against, with requirements identified, through the use of the Equality Analysis Procedure. The outcomes of all Equality Analysis undertaken across the organisation are retained centrally by the Equality and Diversity Manager.

## **Recruitment and representative workforce**

Work has continued to support our aim to employ a workforce which is representative of the diverse population we serve. We have maintained accreditation to the Disability Equality 'Two Ticks' scheme run by JobCentre Plus for our commitment to job applicants and staff with a disability, and we demonstrate our commitment to sexual orientation equality through continued membership of Stonewall's Diversity Champions programme. Both of these accreditation logos are included on all job adverts, in addition to an equality statement.

## **3. Executive summary of workforce and recruitment analysis**

The full analysis of the workforce and recruitment statistics that we have a legal requirement to collect are included at Appendix 1, however below is a summary of the key findings, for the period 1 October 2014 – 30 September 2015.

## Workforce establishment –

- As at 30 Sept 2015, the NHSBSA employed 2763 staff, an increase in headcount of 116 from 2014
- Black and Minority Ethnic (BME) groups now constitute 7.59% of the workforce, a slight reduction of 1.89% from 2014
- This moves away from the trend of an increase year-on-year since 2010 of gradually becoming more racially representative of the general population (18.4% of England's population are from BME groups)
- The sites with the highest percentage of staff from BME groups are London (37.5%, compared to 40.2% of the Greater London population), Bolton (22.89% compared to 9.8% of the North West population), and for the first time Eastbourne (17.14%, compared to 9.3% of the South East population). The site with the lowest percentage is Mansfield (0%), followed closely by Fleetwood (1.33%)
- Despite significant recruitment during the year (the largest increase in headcount has been in Newcastle and Fleetwood), it has not led to a more racially representative workforce
- Our largest age group continues to be employees aged between 30-39 years old (27.43% of our workforce), closely followed by the 40-49 year olds at 25.19%
- 3.66% of staff have declared that they have a disability, which has remained fairly static from 2014. Although we are not yet representative of the 16% of UK working adults who have a disability, the overall trend is an increase year on year in staff declaring a disability
- 2.35% of staff have disclosed that they are LGB (Lesbian, Gay or Bisexual). Although we are not yet representative of the estimated 6.25% of the UK population who identify as LGB, the overall trend is gradually improving year on year
- The gender split of our workforce is 58.23% female, to 41.77% male employees, compared to England's population demographic of 51% women and 49% men, so we are not yet representative of the general population
- 11.18% of staff follow a religion other than Christianity, which includes Buddhism, Hinduism, Islam, Judaism and Sikhism amongst others. The diversity of religions that staff follow is generally increasing year on year.

## Band and pay analysis –

- Pay bands 1-6 still have significantly higher percentages of female staff, whilst in Bands 7-9 male staff are over-represented. This continues to be most noticeable at the differential between bands 6 and 7. However, there has been an improvement in the gender balance in Band 6 with an increase of men from 35.16% to 40.66%
- Likewise, the gender ratio in bands 7-9 has continued to improve, with the average of female staff in those bands increasing by 5.43% from 37.16% last year to 42.59%
- There has been a significant increase in the headcount of Band 1 by 115 employees. Pay bands 2 and 3 have also seen increases in headcount, with 65.84% of our workforce now in bands 1-3. Bands 4-9 have all remained fairly static in total headcount
- Average pay within the NHSBSA is currently £22,753 (based on WTE pay), a slight decrease of £349 since 2014. This reflects the changes in headcount outlined above
- The average pay gap in the NHSBSA between men and women continued to reduce, by £326 to £2,795

- For disability, sexual orientation and religion / belief, there is very little difference in average pay between those who have declared that they have a disability (or are LGB, etc.), and those who have not
- However, staff from BME backgrounds earn above average pay, whereas 'White-British' staff earn below average pay. Our youngest employees (16-19 years) have the lowest average pay (£15,147) and the 50-59 year olds have the highest average pay (£28,871).

#### Leavers -

- 353 staff left the NHSBSA in the period 1 October 2014 – 30 September 2015, with the majority leaving for reasons of voluntary resignation (59.64%), voluntary redundancy (15.86%) and dismissal (10.48%)
- Leavers were representative of the workforce establishment for disability and sexual orientation. However for race, gender, age, and religion / belief, leavers did not reflect the workforce establishment, with the least representative being the 11.91% of leavers from a BME group, compared to 7.59% of total staff.

#### Disciplinary and Grievance Cases -

- 18 staff received disciplinary sanctions during the year. 61.11% of these sanctions were given to male staff, which is significantly higher than the 41.77% of total male staff, and 16.68% of the sanctions applied to staff from BME groups, which is higher than the 7.59% of staff from a BME background
- There were 9 grievances lodged during the year. 77.78% of grievances were made by male staff (compared to 41.77% of male staff).

#### Recruitment –

- During the year 5,403 applications were received, with 1,671 applicants shortlisted and 347 candidates appointed
- It is positive to note that 20.6% of job applicants were from BME groups, which is slightly higher than the 18.4% of the population. However, this percentage did not remain consistent at the shortlisted and appointed stages, reducing to 11.2% and 7.4%. However, the overall trend year on year is that this is becoming more consistent each year
- This issue also applied to gender (46.9% of applications were from men, but this reduced to 43.1% of those shortlisted and 39.2% of those appointed), and religion / belief (19.9% of applications were from those following religions other than Christianity, reducing to 14.5% of those shortlisted and 12.1% of those appointed)
- However, the percentages for disability and sexual orientation were consistent.

Going forward, any areas of concern highlighted above will be closely monitored by the Equality and Diversity Committee to identify whether a pattern emerges, and if so this will be investigated.



## Appendix 1. Workforce and recruitment analysis

The tables and graphs below demonstrate our workforce information by protected characteristic, for the year from **1 October 2014 - 30 September 2015**. As at 30 September 2015, the NHSBSA employed 2763 staff, which was an increase in headcount of 116 from the previous year, from which comparisons will be made for the statistics below.

### 1.1 Summary of workforce by protected characteristic

#### Race

It can be determined from the tables below that Black and Minority Ethnic (BME) groups currently constitute 7.59% of the total workforce, a slight decrease of 1.89% from the previous year, which is a departure from what has been an increase year on year since 2010. The 7.59% workforce figure can be compared to the 18.4% of England's population being from BME groups (Census, 2011), so we are not yet representative of the general population.

1. Trend – race by year	BME %
30 September 2015	7.59%

2. Summary of workforce by race - grouped	Headcount	Headcount %
White - British	2379	86.10%
Black and Minority Ethnic Groups	210	7.59%
Not stated and undefined	174	6.30%
30 September 2014	9.48%	

3. Summary of workforce by race	Headcount	Headcount %
White - British	2379	86.10%
White - Other	41	1.48%
Mixed	16	0.58%
Asian or Asian British	126	4.56%
Black or Black British	13	0.47%
Chinese	7	0.25%
Other	7	0.25%
Undefined	0	0%
Not stated	174	6.30%
30 September 2013	7.85%	
30 September 2012	7.01%	
30 September 2011	6.52%	
31 March 2010	5.39%	

## Race by NHSBSA site establishment

4. NHSBSA Site / Race	Newcastle (SH & BH)	Eastbourne	Mansfield	Wakefield	Bolton	Fleetwood	Coventry	London
White - British	88.3%	77.14%	87.5%	85.04%	74.63%	92.05%	73.91%	47.73%
White - Other	2.43%	8.57%	0%	2.36%	1.24%	0.76%	8.7%	19.32%
Mixed	0.52%	0%	0%	0.39%	0.75%	0.19%	0%	3.41%
Asian/Asian British	1.55%	5.71%	0%	5.12%	20.15%	0.19%	0%	7.95%
Black/Black British	0.37%	0%	0%	0.39%	0.25%	0.19%	0%	5.68%
Chinese	0.22%	2.86%	0%	1.18%	0%	0%	0%	0%
Other	0.07%	0%	0%	0.39%	0.50%	0%	4.35%	1.14%
Undefined	0%	0%	0%	0%	0%	0%	0%	0%
Not stated	6.55%	5.71%	12.5%	5.12%	2.49%	6.63%	13.04%	14.77%
Number of staff at site	1359 (up by 104)	35 (up by 7)	24 (up by 1)	254 (down by 1)	402 (up by 1)	528 (up by 24)	23 (down by 3)	188 (down by 14)
% of staff at each site from BME groups	5.16% (down by 0.26%)	17.14% (up by 13.57%)	0% (stayed the same)	9.83% (Up by 1.21%)	22.89% (Down by 0.56%)	1.33% (down by 0.06%)	13.05% (up by 1.51%)	37.5% (Down by 4.65%)
% population by region and LA Area, from BME groups	North East 4.7% Newcastle 11.01%	South East 9.3% Eastbourne 6.64%	East Midlands 10.8% Mansfield 3.3%	Yorkshire & Humber 11.20% Wakefield 4.79%	North West 9.8% Bolton 12.78%	North West 9.8% Wyre 3.78%	West Midlands 17.4% Coventry 19.28%	London 40.2%

Table 4 above reveals our workforce, grouped by ethnicity and NHSBSA site. For comparison purposes, the two sites in Newcastle (Bridge House and Stella House) have been grouped together. In addition, the 50 home-based or regional staff have not been included. The row labelled 'total percentage of staff at each site from BME groups' can be compared with the row below, which highlights the percentage of the local population for that area who are from BME groups. There are two figures provided for the local population – the Local Authority Area percentage and also the regional percentage, as the geographic areas that job applicants are traditionally drawn from are widening over time, as people are commuting further from home to work. For example, 5.16% of our staff based in Newcastle upon Tyne are from BME groups, which is fairly representative of the 4.7% of the overall North East population from BME groups, but significantly lower than the 11.01% of the Newcastle upon Tyne city population from BME groups (Census 2011).

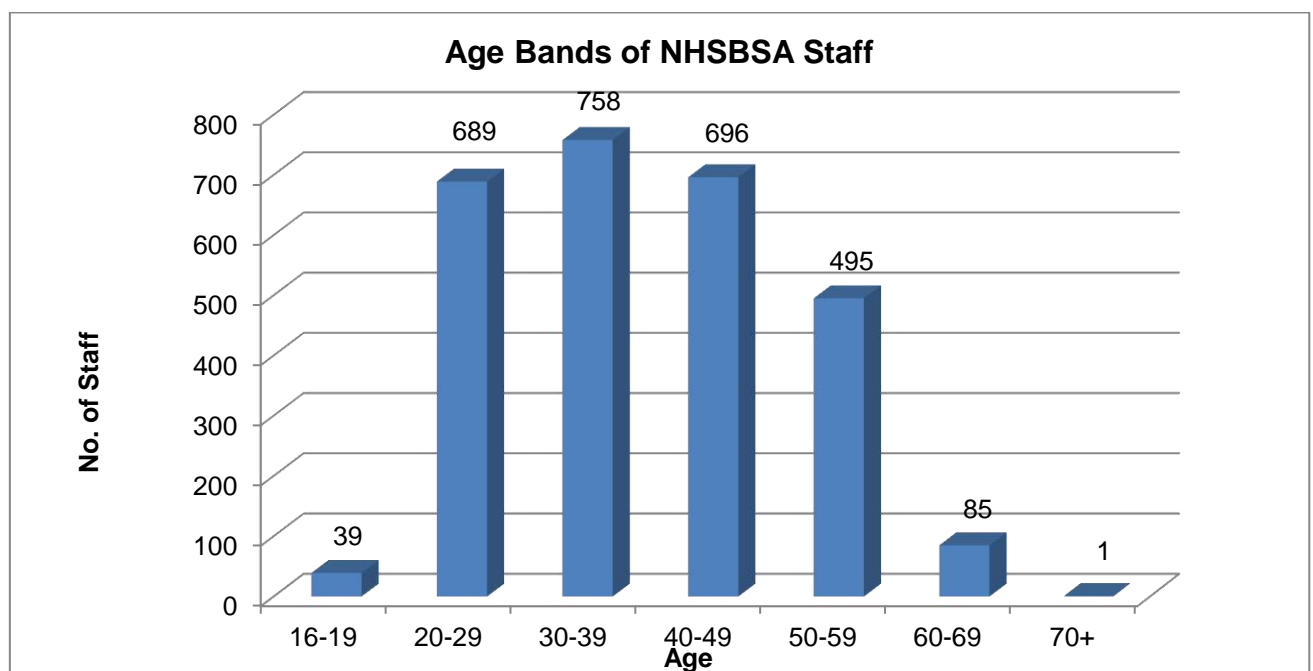
It can be seen that the sites with the highest percentage of staff from BME groups are London (37.5%), and Bolton (22.89%), followed for the first time by Eastbourne (17.14%). The site with the lowest percentage is Mansfield (0%), followed closely by Fleetwood (1.33%). Newcastle, London and Wakefield are the sites that are most representative of their regional populations, with 5.16% of Newcastle staff being from BME groups compared to 4.7% of the North East population, 9.83% of Wakefield staff compared to 11.20% of the Yorkshire and Humber region, and 37.5% of London staff compared to 40.2% of the greater London population. It is interesting to note that some areas are over-representative, for example at Bolton, with 22.89% of staff compared to 12.78% of Bolton's population and 9.8% of the North West population. Also included in the table is a comparison from the previous year, for both the total amount of staff based at each site,

and the percentage of those staff who are from BME groups. In terms of total headcount, most sites have remained fairly static from last year, other than; Newcastle which has increased headcount by 104, Fleetwood which has increased by 24, and London which has decreased by 14. It is interesting to note that these sites have also seen a decrease (albeit marginally in Newcastle and Fleetwood) in the percentage of staff from BME groups. It appears that despite recruitment in Newcastle and Fleetwood, this has not led to a more racially diverse workforce. Whilst the Newcastle sites are still representative of the North East population, it is a concern for Fleetwood as it is not representative of its local population, and this will be monitored going forward. Conversely, it is positive to note that the increase in headcount of 7 at Eastbourne has also led to a significantly more racially diverse workforce, up by 13.57%.

## Age

The information below reveals the age demographics of our workforce, which has remained fairly static from the previous year. The largest age group is employees aged between 30-39 years old, who constitute 27.43% of our workforce, closely followed by the 40-49 year old age group at 25.19%. There has been a slight increase in our youngest age groups, with 26.35% of staff aged under 30, compared to 25.54% previously.

5. Summary of workforce by age	Headcount	Headcount %
16 - 19	39	1.41%
20 - 29	689	24.94%
30 - 39	758	27.43%
40 - 49	696	25.19%
50 - 59	495	17.92%
60 - 69	85	3.08%
70+	1	0.04%



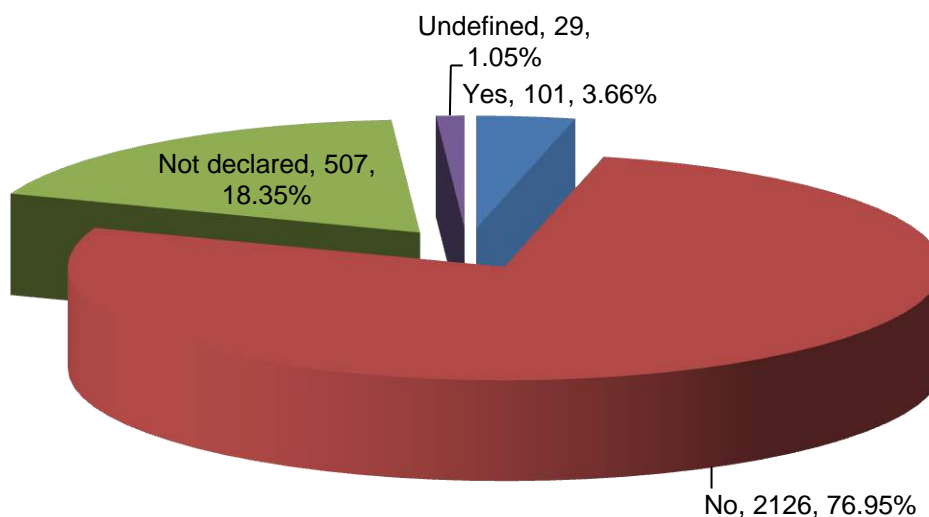
## Disability

Table 6 and the chart below summarise our workforce by disability, with 101 staff (3.66%) having declared that they consider themselves to have a disability. Table 7 reveals that this has remained fairly static over the last two years. This can be compared to the 16% of UK working adults who have a disability, so we are not yet representative of the population.

6. Summary of workforce by disability	Headcount	Headcount %
No	2126	76.95%
Yes	101	3.66%
Not declared	507	18.35%
Undefined	29	1.05%

7. Trend – disability dear	% Staff declaring a disability
30 September 2015	3.66%
30 September 2014	3.63%
30 September 2013	3.66%
30 September 2012	3.55%
30 September 2011	2.75%
31 March 2010	1.91%

**Disability declaration of NHSBSA Staff**



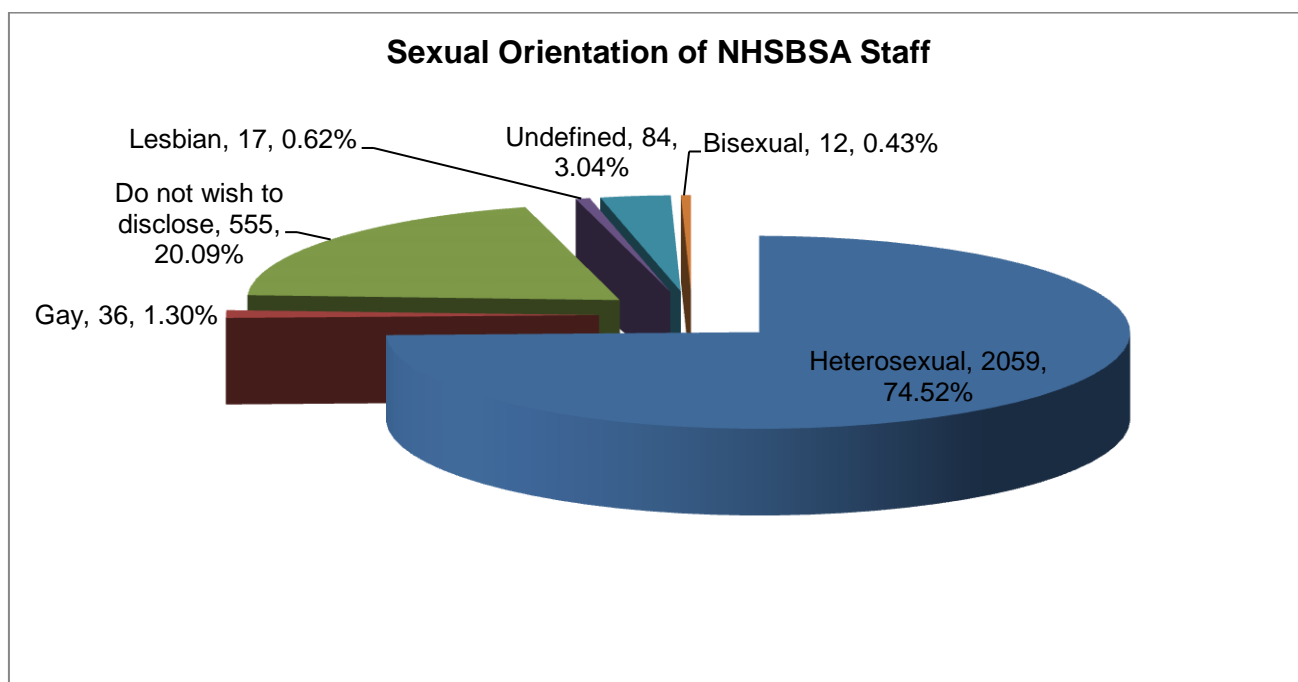
## Sexual orientation

Table 9 and the chart below outline our workforce by sexual orientation. 65 staff (2.35%) have disclosed that they are LGB (Lesbian, Gay or Bisexual). This compares to an estimated 6.25% of the UK population who identify as LGB, so we are not yet

representative of the general population. Table 8 reveals that this figure has improved slightly since last year (by 8 staff or 0.20%) which is encouraging. It is also positive to note that the percentage of staff overall disclosing their sexual orientation to us has increased from last year, from 74.34% to 76.87%.

8. Trend – sexual orientation year	% of LGB staff
30 September 2015	2.35%
30 September 2014	2.15%
30 September 2013	2.15%
30 September 2012	2.20%
30 September 2011	1.8%
31 March 2010	1.35%

9. Summary of workforce by sexual orientation	Headcount	Headcount %
Bisexual	12	0.43%
Gay	36	1.3%
Heterosexual	2059	74.52%
Lesbian	17	0.62%
<b>Total LGB</b>	<b>65</b>	<b>2.35%</b>
I do not wish to disclose	555	20.09%
Undefined	84	3.04%



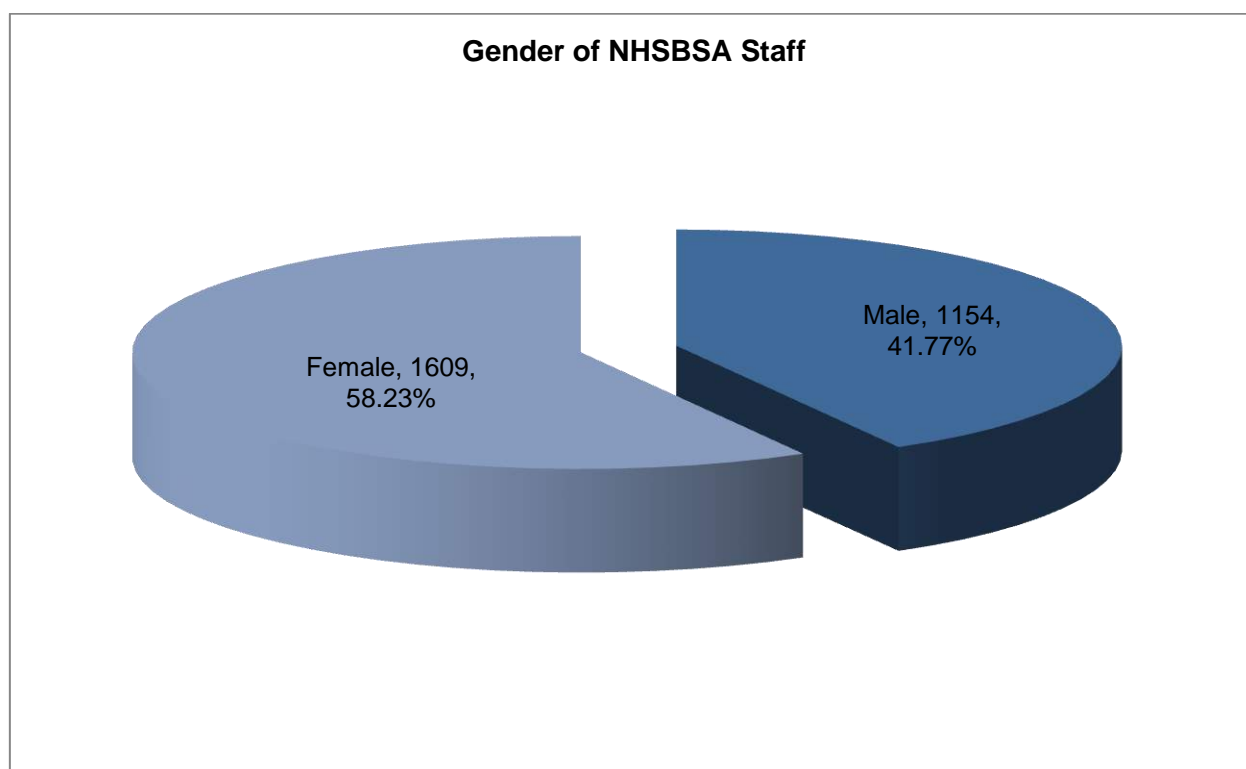
## Gender

Table 10 and the chart below illustrate our workforce by gender, which is split between 58.23% of staff being female, to 41.77% male employees. This can be compared to England's population demographic of 51% women and 49% men (Census, 2011), so we are over-representative by women. Table 11 reveals that the gender split has remained fairly static since 2010.



10. Summary of workforce by gender	Headcount	Headcount %
Female	1609	58.23%
Male	1154	41.77%

11. Trend – gender by year	% Female staff	% Male staff
30 September 2015	58.23%	41.77%
30 September 2014	57.50%	42.50%
30 September 2013	57.56%	42.44%
30 September 2012	58.04%	41.96%
30 September 2011	58.42%	41.58%
31 March 2010	58.38%	41.62%



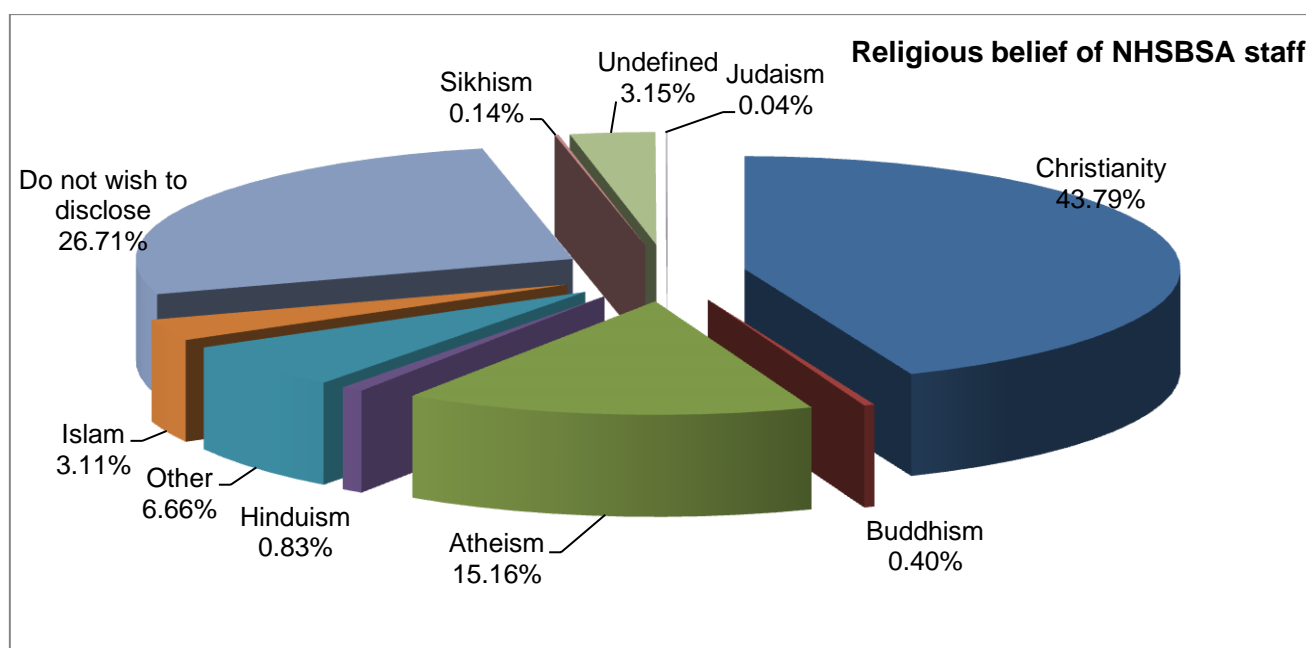
## Religion and belief

Table 12 and the chart below highlight the workforce by their religion or belief. The largest group remains Christianity at 43.79%, followed by 15.16% of staff who are Atheist or have no belief. 11.18% of staff follow a religion other than Christianity, which includes Buddhism, Hinduism, Islam, Judaism and Sikhism amongst others. This can all be compared to the estimated 59% of England's population who declare themselves to be Christian, followed by 25% who are of 'No religion or Atheist', and 8.4% who follow 'Other religions' (Census, 2011). Table 13 reveals that the diversity of religions staff follow is increasing year on year (albeit with a very slight decrease this year).

12. Summary of workforce by religion and belief	Headcount	Headcount %
---	-----------	-------------

Atheism / no belief	419	15.16%
Buddhism	11	0.40%
Christianity	1210	43.79%
Hinduism	23	0.83%
Islam	86	3.11%
Judaism	1	0.04%
Sikhism	4	0.14%
Other	184	6.66%
I do not wish to disclose	738	26.71%
Undefined	87	3.15%
<b>Total religions other than Christianity</b>	<b>309</b>	<b>11.18%</b>

<b>13. Trend – religion and belief by year</b>	<b>% of staff following ‘Other’ religions</b>
30 September 2015	11.18%
30 September 2014	11.30%
30 September 2013	11.04%
30 September 2012	10.54%
30 September 2011	9%
31 March 2010	7.54%



## 1.2 Equal pay analysis

### Gender by pay band

The following tables reveal our workforce by gender and pay band, highlighted by headcount (table 14), percentages of the total of each gender per pay band (table 15), and the gender split in each pay band (table 16). There has been a significant increase of 115 employees in the headcount in Band 1, from 724 employees last year to 839 currently. Pay bands 2 and 3 have also seen increases in headcount, with 65.84% of our workforce now in bands 1-3, compared to 62.41% last year. Bands 4-9 have all remained fairly static in total headcount.

Table 16 reveals that pay bands 1-6 still have significantly higher percentages of female staff, compared to male staff. This gender split is most noticeable at the differential between bands 6 and 7. However, it is very encouraging to note that the gender balance from band 6 upwards is continuing to improve. There has been an increase of men in Band 6 (which has historically been predominantly female), from 35.16% to 40.66%. In Bands 7 and above, which have been predominantly male, there has been increases in female staff of 0.81% in Band 7, of 2.84% in Band 8a, of 7.03% in Band 8b (which means there are now more women than men in band 8b), of 1.51% in Band 8d and of 30% in Band 9. This means that overall, the average of female staff in Bands 7-9 has increased by 5.43%, from 37.16% to 42.59%, which is very positive.

#### 14. Headcount

Pay band	Male	Female	Total
1	350	489	839
2	233	427	660
3	124	196	320
4	56	70	126
5	60	125	185
6	37	54	91
7	128	82	210
8A	52	42	94
8B	25	29	54
8C	15	8	23
8D	14	7	21
9	2	2	4
Level 1A	8	2	10
Level 1B	21	61	82
Level 2	3	3	6
Level 3	2	4	6
Level 4	2	4	6
Medical MC01	3	0	3
Medical MC02	8	3	11
Personal Sal	11	1	12

#### 15. Percentages (of total workforce)

Pay band	Male	Female	Total
1	12.67%	17.70%	30.37%
2	8.43%	15.45%	23.89%
3	4.49%	7.09%	11.58%
4	2.03%	2.53%	4.56%
5	2.17%	4.52%	6.70%
6	1.34%	1.95%	3.29%
7	4.63%	2.97%	7.60%
8A	1.88%	1.52%	3.40%
8B	0.90%	1.05%	1.95%
8C	0.54%	0.29%	0.83%
8D	0.51%	0.25%	0.76%
9	0.07%	0.07%	0.14%
Level 1A	0.29%	0.07%	0.36%
Level 1B	0.76%	2.21%	2.97%
Level 2	0.11%	0.11%	0.22%
Level 3	0.07%	0.14%	0.22%

Level 4	0.07%	0.14%	0.22%
Medical MC01	0.11%	0.00%	0.11%
Medical MC02	0.29%	0.11%	0.40%
Personal Sal	0.40%	0.04%	0.43%

## 16. Percentages (of each band)

**Key:**

>50% of staff

Pay band	Male	Female
1	41.72%	58.28%
2	35.30%	64.70%
3	38.75%	61.25%
4	44.44%	55.56%
5	32.43%	67.57%
6	40.66%	59.34%
7	60.95%	39.05%
8A	55.32%	44.68%
8B	46.30%	53.70%
8C	65.22%	34.78%
8D	66.67%	33.33%
9	50.00%	50.00%
Level 1A	80.00%	20.00%
Level 1B	25.61%	74.39%
Level 2	50.00%	50.00%
Level 3	33.33%	66.67%
Level 4	33.33%	66.67%
Medical MC01	100.00%	0.00%
Medical MC02	72.73%	27.27%
Personal Sal (Board)	91.67%	8.33%

## 1.3 Average pay analysis

The following tables reveal our workforce breakdown by average pay and protected characteristic, with the key indicating which categories are above or below the average pay of the NHSBSA, currently £22,753 (based on WTE pay). Average pay overall has decreased slightly (by £349) from £23,102 in the previous year. This reflects the increase in headcount in pay bands 1-3 as referred to on page 53. It is encouraging to see that the average pay gap in the NHSBSA between men and women (currently £2794.91), has continued to reduce, by £326 since last year. This also reflects the better gender balance amongst the higher pay bands, as explained on page 53.

The average pay analysis for the other protected characteristics has remained fairly static over the last year. Our youngest employees (in the age range 16-19 years) continue to have the lowest average pay at £15,147, compared to the highest average pay of £28,871 for the 50-59 year olds. It appears that pay increases with work experience, until the 60-69 age bracket when it starts to reduce again, possibly due to staff in that age group using flexible retirement options. For disability, there is very little difference between those who have declared that they have a disability and those who do not, however staff who chose not to disclose a disability do earn above average. This pattern continues with sexual orientation and religion or belief which may suggest that it is employees on the higher pay

bands who are selecting the 'I do not wish to disclose' options when completing their equality monitoring. For Race, it is interesting to note that staff from BME backgrounds earn above the average pay, whereas 'White-British' staff earn below the average pay.

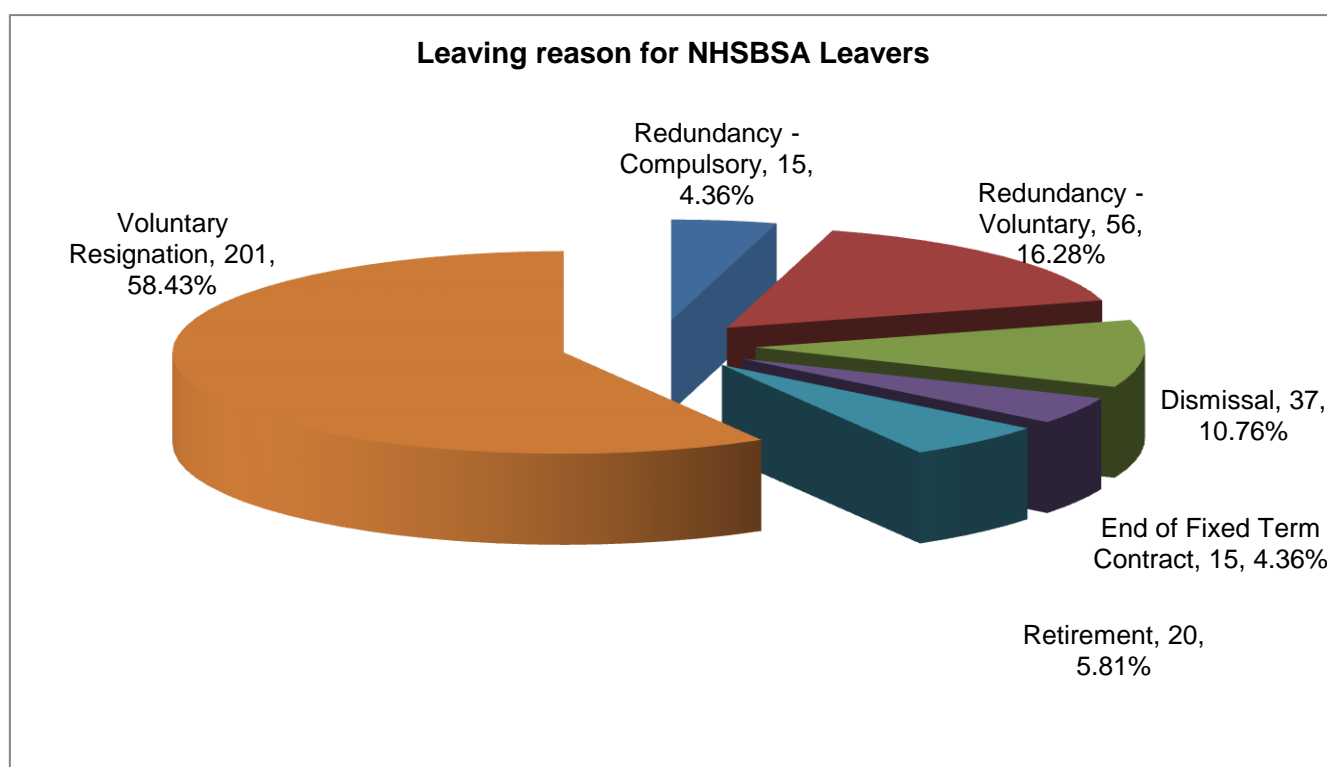
<b>Average NHSBSA Pay</b>	<b>£22,753.12</b>	
(based on WTE pay)		
<b>Key</b>		
		Above NHSBSA average
		Below NHSBSA average
<b>Gender</b>		
Male	£24,386.62	
Female	£21,591.71	
<b>Age</b>		
50-59	£28,871.37	
40-49	£25,859.61	
60-69	£25,307.65	
30-39	£21,517.81	
20-29	£16,755.31	
70+	£17,800.00	
16-19	£15,147.21	
<b>Disability</b>		
Not declared	£24,680.65	
Undefined	£17,686.45	
No	£22,359.92	
Yes	£22,838.87	
<b>Sexual Orientation</b>		
Do not wish to disclose	£24,303.73	
Heterosexual	£22,443.22	
Undefined	£21,899.72	
Lesbian	£23,507.76	
Gay	£19,758.08	
Bisexual	£17,907.92	
<b>Religious Belief</b>		
Sikhism	£20,894.75	
Do not wish to disclose	£24,093.58	
Christianity	£23,523.94	
Undefined	£21,743.68	
Buddhism	£21,675.45	
Atheism	£21,078.14	
Other	£19,585.35	
Hinduism	£23,316.04	
Islam	£16,560.08	
<b>Race</b>		
Other	£24,065.33	
White - British	£22,510.58	
Not stated	£24,160.57	
Undefined	£0.00	



## 1.4 Summary of leavers by protected characteristic

The table below and chart overleaf gives a breakdown of the 353 staff who left the NHSBSA in the year 1 October 2014 – 30 September 2015, by grouped reasons for leaving. The vast majority left for reasons of voluntary resignation (59.64% in total), voluntary redundancy (15.86%) and dismissal (10.48%).

Grouped	Number	%
Redundancy - Compulsory	15	4.25%
Redundancy - Voluntary	56	15.86%
Dismissal	37	10.48%
End of Fixed Term Contract	15	4.25%
Retirement	20	5.67%
Voluntary Resignation	201	56.94%
Death in Service	2	0.57%
TUPE transfer	5	1.42%
Other	2	0.57%



The following tables provide a breakdown of leavers by protected characteristic, and demonstrate that leavers were fairly representative of the workforce establishment as a whole for disability, with 3.12% of leavers having declared a disability compared to 3.66% of staff, and for sexual orientation as 1.98% of leavers were LGB compared to 2.35% of staff. However, for race, gender, age and religion / belief, leavers did not reflect the workforce establishment. 11.91% of leavers were from a Black and Minority Ethnic Group, compared to only 7.59% of staff. 45.61% of leavers were male, compared to only 41.77% of total staff. 32.86% of leavers were aged under 30 years old, which is higher than the 26.53% of staff in that age group, and 15.3% of leavers followed a religion other than Christianity, compared to 11.18% of staff. Going forward, these areas will be monitored to identify whether a pattern emerges, and if so this will be investigated.

Leavers by Gender	Number	%
Male	161	45.61%
Female	192	54.39%

Leavers by Race	Number	%
White - British	276	78.19%
White - Other	11	3.12%
Other	3	0.85%
Asian or Asian British	20	5.67%
Black or Black British	8	2.27%
Undefined	11	3.12%
Not Stated	24	6.8%
Total BME leavers	42	11.91%

Leavers by Age	Number	%
16-19	16	4.53%
20-29	100	28.33%
30-39	71	20.11%
40-49	66	18.70%
50-59	66	18.70%
60-69	34	9.63%
70+	0	0%

Leavers by Sexual Orientation	Number	%
Heterosexual	247	69.97%
Do not wish to disclose	71	20.11%
Lesbian	3	0.85%
Undefined	28	7.93%
Gay	4	1.13%
Bisexual	0	0%
Total LGB leavers	7	1.98%

Leavers by Disability	Number	%
Yes	11	3.12%
No	265	75.07%
Not declared	60	17%
Undefined	17	4.82%

Leavers by Religious Belief	Number	%
Atheism	43	12.18%
Christianity	137	38.81%
Buddhism	1	0.28%
Do not wish to disclose	91	25.78%
Hinduism	3	0.85%
Islam	14	3.97%
Judaism	0	0%
Other	36	10.20%
Sikhism	0	0%
Total religions other than Christianity	54	15.3%
Undefined	28	7.93%

## 1.5 Summary of job applicants, shortlisted and appointed, by protected characteristic

We analyse recruitment data by protected characteristic, and are able to capture data on these from the point of application through to appointment. This data assists us in ensuring that our recruitment methods are fair and transparent for all, and supports us in our goal to recruit a workforce which is representative of the diverse population. During the year 1 October 2014 – 30 September 2015, 5,403 applications were received, with 1671 applicants shortlisted and 347 people appointed.

### Race

The table below reveals that 20.6% of job applicants were from BME groups, which is slightly higher than the 18.4% of England's population from BME groups, and 7.59% of our staff. The second table shows the historical data for BME applicants for the different recruitment stages. The percentages of BME applicants are reducing at each stage of the recruitment process, albeit there does appear to be an overall trend towards this becoming more consistent each year, and this will be an area that will be closely monitored going forward to identify if any action is needed.

Race	Applications	%	Shortlisted	%	Appointed	%
White – British	4141	76.6%	1423	85.2%	309	89%
Any other white background	213	3.9%	47	2.8%	10	2.9%
Asian or Asian British	522	9.6%	84	5%	7	2.1%
Mixed	72	1.3%	13	0.8%	3	0.9%
Black or Black British	277	5.10%	31	1.9%	3	0.9%
Chinese	13	0.2%	8	0.5%	2	0.6%
Any other ethnic group	26	0.5%	3	0.2%	0	0%
Do not wish to disclose	139	2.6%	62	3.7%	13	3.7%
<b>Grand Total</b>	<b>5403</b>	<b>100%</b>	<b>1671</b>	<b>100%</b>	<b>347</b>	<b>100%</b>
<b>Of which BME Groups</b>	<b>1123</b>	<b>20.6%</b>	<b>186</b>	<b>11.2%</b>	<b>25</b>	<b>7.4%</b>

Data period	% of Applications from BME Groups	% of Shortlisted from BME Groups	% of Appointed from BME Groups
Oct 2014 – Sept 2015	20.6%(1123)	11.2% (186)	7.4% (25)
Oct 2013 – Sept 2014	28.4% (1186)	14.65% (139)	13.7% (36)
Oct 2012 – Sept 2013	22.65% (1263)	14.35% (229)	9.75% (5)
Oct 2011 - Sept 2012	35.8% (1045)	27.4% (209)	16.65% (25)
April 2010 – March 2011 (different time period)	16.2% (143)	6.95% (18)	1.37% (1)
April 2009 – March 2010 (different time period)	16.9% (1055)	12.5% (217)	8.8% (37)

## Gender

The table below illustrates the gender breakdown of the job applications received in this period. 46.9% of applicants were male, and this can be compared to the 49% of the general population who are male, and the 41.77% of men in our workforce. The percentages of men shortlisted and appointed did reduce from the percentage of applications (46.9% to 43.1% shortlisted and 39.2% appointed), and this will be monitored going forward.

Gender	Applications	%	Shortlisted	%	Appointed	%
Male	2533	46.9%	720	43.1%	136	39.2%
Female	2842	52.6%	932	55.8%	208	59.9%
Do not wish to disclose	28	0.50%	19	1.10%	3	0.90%
<b>Total</b>	<b>5403</b>	<b>100%</b>	<b>1671</b>	<b>100%</b>	<b>347</b>	<b>100%</b>

## Disability

The table below reveals that 5.2% of the applicants had declared a disability, which can be compared to the 16% of UK working adults who have a disability and 3.66% of staff who have declared a disability. It is very encouraging to note that this percentage remained consistent at all recruitment stages, with 5.1% of those shortlisted and 4.9% of those appointed having declared a disability.

Disability	Applications	%	Shortlisted	%	Appointed	%
Yes	280	5.2%	86	5.1%	17	4.9%
No	5038	93.2%	1560	93.4%	324	93.4%
Do not wish to disclose	85	1.6%	25	1.5%	6	1.7%
<b>Total</b>	<b>5403</b>	<b>100%</b>	<b>1671</b>	<b>100%</b>	<b>347</b>	<b>100%</b>

## Age

The table below reveals that the percentages between applications, shortlisted and appointed remained fairly constant for all age groups, although the percentage of 20-29 year olds did increase from 34.9% of applications to 38.4% of those shortlisted and again to 41.5% of those appointed. It is encouraging to note that there was significant recruitment at either end of the age spectrum, with 4.1% of appointments made to those aged under 20, and 14.4% to those aged 50 and over.

Age Group	Applications	%	Shortlisted	%	Appointed	%
16-19	187	3.5%	68	4.1%	14	4.1%
20-29	1887	34.9%	641	38.4%	144	41.5%
30-39	1360	25.2%	371	22.2%	77	22.2%
40-49	1134	21%	355	21.3%	61	17.5%

<b>50-59</b>	721	13.3%	206	12.3%	45	13%
<b>60-69</b>	98	1.8%	22	1.4%	5	1.4%
<b>Over 70</b>	0	0%	0	0%	0	0%
<b>Undisclosed</b>	16	0.3%	8	0.5%	1	0.3%
<b>Total</b>	<b>5403</b>	<b>100%</b>	<b>1671</b>	<b>100%</b>	<b>347</b>	<b>100%</b>

## Sexual orientation

The table below reveals that 3.3% of applicants had declared that they were lesbian, gay or bisexual, which can be compared to an estimated 6.25% of the UK population and to 2.35% of staff who identify as LGB. It is positive to see that the percentages of LGB applicants remain constant at the shortlisted and appointed stages, with 3.4% and 3.5% respectively.

<b>Sexual Orientation</b>	<b>Applications</b>	<b>%</b>	<b>Shortlisted</b>	<b>%</b>	<b>Appointed</b>	<b>%</b>
<b>Heterosexual</b>	4901	90.7%	1502	89.9%	313	90.2%
<b>Lesbian</b>	36	0.7%	12	0.7%	2	0.6%
<b>Gay</b>	85	1.6%	23	1.4%	3	0.9%
<b>Bisexual</b>	55	1%	21	1.3%	7	2%
<b>I do not wish to disclose</b>	326	6%	113	6.8%	22	6.3%
<b>Total</b>	<b>5403</b>	<b>100%</b>	<b>1671</b>	<b>100%</b>	<b>347</b>	<b>100%</b>
<b>LGB applicants</b>	<b>176</b>	<b>3.3%</b>	<b>56</b>	<b>3.4%</b>	<b>12</b>	<b>3.5%</b>

## Religion and belief

The table below identifies that 19.9% of applicants followed a religion other than Christianity, including Buddhism, Hinduism, Islam, Jainism, Judaism, and Sikhism amongst others. This can be compared to the 8.4% of England's population who follow 'Other religions' (Census, 2011), and 11.18% of our staff. It is encouraging to see that the percentages for most religions remained fairly consistent between the applications, shortlisted and appointed stages, with the exception of Islam, which reduced from 5.6% of applications to 3.4% of those shortlisted and 1.7% of those appointed. This will be monitored going forward.

<b>Religion / Belief</b>	<b>Applications</b>	<b>%</b>	<b>Shortlisted</b>	<b>%</b>	<b>Appointed</b>	<b>%</b>
<b>Atheism</b>	983	18.2%	375	22.4%	93	26.8%
<b>Buddhism</b>	35	0.6%	10	0.6%	1	0.3%
<b>Christianity</b>	2729	50.5%	848	50.7%	169	48.7%
<b>Hinduism</b>	132	2.4%	14	0.8%	2	0.6%
<b>Islam</b>	302	5.6%	57	3.4%	6	1.7%
<b>Jainism</b>	4	0.1%	0	0%	0	0%



<b>Judaism</b>	17	0.3%	6	0.4%	0	0%
<b>Sikhism</b>	31	0.6%	3	0.2%	0	0%
<b>Other</b>	554	10.3%	152	9.1%	33	9.5%
<b>Undisclosed</b>	616	11.4%	206	12.3%	43	12.4%
<b>Total</b>	<b>5403</b>	<b>100%</b>	<b>1671</b>	<b>100%</b>	<b>347</b>	<b>100%</b>
<b>Of which Religions other than Christianity</b>	<b>1075</b>	<b>19.9%</b>	<b>242</b>	<b>14.5%</b>	<b>42</b>	<b>12.1%</b>

## 2.6 Summary of disciplinary cases by protected characteristic

18 staff received disciplinary sanctions during the year. The tables below analyse these by protected characteristic, and reveal that 61.11% of the sanctions were given to male staff, which is significantly higher than the 41.77% of total male staff. In terms of race, 16.68% of the sanctions applied to staff from BME groups, which is higher than the 7.59% of staff from a BME background. These areas will be closely monitored going forward.

For age, 50% of the sanctions were given to 20-29 year olds, with the remainder spread across the 30-49 year olds. It is interesting to note that there were no sanctions given at either end of the age spectrum, for the under 20's or those aged 50 and over. None of the sanctions applied to staff who had declared a disability, or who were lesbian, gay or bisexual. 11.12% of the staff involved followed a religion other than Christianity, which is very representative 11.18% of staff who do so.

<b>Gender</b>		
Female	7	38.89%
<b>Male</b>	<b>11</b>	<b>61.11%</b>

<b>Race</b>		
White British	15	83.33%
White Other	0	0%
Asian or Asian British	2	11.12%
Chinese	1	5.56%
Black or Black British	0	0%
Mixed	0	0%
Not stated	0	0%
<b>Total BME staff</b>	<b>3</b>	<b>16.68%</b>

<b>Age</b>		
16-19	0	0%
20-29	9	50%
30-39	6	33.33%
40-49	3	16.67%
50-59	0	0%
60-69	0	0%
70+	0	0%

<b>Disability</b>		
<b>Yes</b>	<b>0</b>	<b>0%</b>

No	15	83.33%
Not Declared	3	16.67%

Religious Belief		
Christianity	7	38.89%
Atheism	3	16.67%
Buddhism	0	0%
Hinduism	0	0%
Islam	1	5.56%
Judaism	0	0%
Other	1	5.56%
Sikhism	0	0%
Do not wish to declare	5	27.78%
<b>Total following religions other than Christianity</b>	<b>2</b>	<b>11.12%</b>

Sexual orientation		
Heterosexual	14	77.78%
Bisexual	0	0%
Gay	0	0%
Lesbian	0	0%
Do not wish to declare	4	22.22%
<b>Total LGB staff</b>	<b>0</b>	<b>0%</b>

## 2.7 Summary of grievance cases by protected characteristic

There were 9 grievances lodged during the year. The tables overleaf analyse these by protected characteristic, and reveal that 77.78% of the grievances were made by male staff, which is significantly higher than the 41.77% of total male staff. In terms of race, 11.11% of the grievances were made by staff from BME groups, which is higher than the 7.59% of staff from a BME background. Again, these areas will be closely monitored going forward. For age, it is interesting to compare the breakdown to the disciplinary figures. Whereas no disciplinary sanctions were given to staff aged 50 and over, this was the age group lodging the most grievances, at 44.44% (which compares to 17.92% of total staff in this age group). Again, it is positive to note that none of the grievances were raised by staff who had declared a disability, or who were lesbian, gay or bisexual. Very similarly to the disciplinary figures, 11.11% of the staff involved followed a religion other than Christianity, which is representative 11.18% of total staff who do so.

Gender		
Female	2	22.22%
<b>Male</b>	<b>7</b>	<b>77.78%</b>

Age		
16-19	0	0%
20-29	3	33.33%
30-39	1	11.11%
40-49	1	11.11%
<b>50-59</b>	<b>4</b>	<b>44.44%</b>
60-69	0	0%
70+	0	0%

Race		
------	--	--

White British	8	88.89%
White - Other	0	0%
Asian or Asian British	1	11.11%
Black or Black British	0	0%
Chinese	0	0%
Mixed	0	0%
Not stated	0	0%
<b>Total BME staff</b>	<b>1</b>	<b>11.11%</b>

<b>Disability</b>		
Yes	0	0%
No	8	88.89%
Not Declared	1	11.11%

<b>Religious Belief</b>		
Christianity	5	55.56%
Do not wish to disclose	2	22.22%
Atheism	1	11.11%
Other	1	11.11%
Buddhism	0	0%
Hinduism	0	0%
Islam	0	0%
Judaism	0	0%
Sikhism	0	0%
<b>Total following religions other than Christianity</b>	<b>1</b>	<b>11.11%</b>

<b>Sexual orientation</b>		
Heterosexual	8	88.89%
Bisexual	0	0%
Gay	0	0%
Lesbian	0	0%
Do not wish to disclose	1	11.11%
<b>Total LGB staff</b>	<b>0</b>	<b>0%</b>

## Appendix 2 – Updated Action Plan at end of Year 4

This action plan sets out our equality objectives to ensure we continue to improve our performance around Equality, Diversity and Human Rights, and meet our legal duties. The plan is set out to clearly show which of the protected characteristics each objective relates to. All of the objectives can impact on Human Rights and therefore Human Rights underpin each of the protected characteristics in the plan.

### Results from our consultation and engagement:

To identify the equality objectives that have been set as a result of the consultation and engagement we carried out with our staff and customers, they are marked with the following symbols, under the heading 'Benefits/Rationale':

<b>C</b> – Customer consultation <b>S</b> – Staff consultation   * - denotes the most frequently cited actions by staff and customers
---

### Meeting our duties:

In order to demonstrate how our actions link with our legal obligations under the Equality Act (2010), we have numbered the three key 'general' duties below. Against each objective under the heading 'Benefits/Rationale', we have listed which of the 'general' duties each objective relates to.

- |  |
|--|
| <ol style="list-style-type: none"><li>1. Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act</li><li>2. Advance equality of opportunity between people who share a protected characteristic and those who do not</li><li>3. Foster good relations between people who share a protected characteristic and those who do not</li></ol> |
|--|

### Monitoring our progress:

Against each action is a 'Status' column, indicating the progress made against each action using the key below:

😊 Completed or in place   😊 <b>IP</b> In Progress   😞 Not progressing   ⌚ Not due to start yet
--

## Objective Area 1: Leadership and accountability

The objectives in this area as detailed below support the following aims:-

- Equality champions across the organisation are supported to mainstream equality into every part of our business
- Our Board and Managers are fully aware of the organisational benefits of diversity, in addition to their obligations under Equality legislation
- There is clear governance and accountability for Equality, with regular reports on performance to the Board, and an Equality Committee comprising senior leaders within the organisation to drive the agenda forward.

Action	Benefits / rationale	Lead(s)	Time-scale	Measure of success	Status	Age	Disability	Gender reassignment	Marriage and Civil partnership	Pregnancy and maternity	Race	Religion / belief	Sex	Sexual orientation
						Human rights								
a.	Identify Non- Executive and Executive Equality and Diversity Board Champions	Equality and Diversity issues are championed at a Board level (2,3)	Chief Executive and Chair	Yr 1 31/12/11 Ongoing	Board Champions identified, who champion E&D issues at Board level.	😊	✓	✓	✓	✓	✓	✓	✓	✓
b.	The Board to receive training on Equality, Diversity and Human Rights	The Board are aware of their legal duties and responsibilities on equality, diversity and human rights (1,3)	Head of L&OD  E&D Manager	Yr 1 Summer 2012	All Board members to have received EDHR training	😊	✓	✓	✓	✓	✓	✓	✓	✓
c.	A new strategic Equality and Diversity Committee to be established	The Committee to be comprised of senior leads from across the NHSBSA, who are accountable for actions within this Strategy (1, 2)	Executive E&D Champion E&D Manager	Yr 1 31/01/12 Ongoing	Equality and Diversity Committee established	😊	✓	✓	✓	✓	✓	✓	✓	✓
d.	Equality and Diversity structures and leadership roles are identified within the organisation, providing an assurance framework	E&D is embedded throughout the organisation. (2,3)	Director of People and OD	Yr 1 Dec 2012 Ongoing	Identifiable structures and roles in place.	😊	✓	✓	✓	✓	✓	✓	✓	✓



Action	Benefits / rationale	Lead(s)	Time-scale	Measure of success	Status	Age	Disability	Gender reassignment	Marriage and Civil partnership	Pregnancy and maternity	Race	Religion / belief	Sex	Sexual orientation
						Human rights								
e.	Collate, analyse and publish equality monitoring information, with annual updates provided	E&D Manager	Yr 1 31/12/11 Then annual updates due each year	Equality information is monitored by the E&D Committee, shared with the Board and published	😊	✓	✓			✓	✓	✓	✓	✓
f.	Prepare and publish annual update reports on progress against this Equality Strategy.	E&D Manager	Yrs 1-4 Then annual updates due each year	Annual (and mid-year) reports provided to the Board and published	😊	✓	✓	✓	✓	✓	✓	✓	✓	✓




## Objective Area 2: Strategy and policy

The objectives in this area as detailed below support the following aims:-

- To employ a workforce which is representative at all levels of population demographics
- To have fair and flexible policies and practices in place to support our staff to do their jobs effectively without fear of discrimination or harassment
- To create a workplace where dignity and respect for colleagues, clients and customers is paramount
- Staff are actively engaged and involved in the development and delivery of our Equality Strategy

Action		Benefits / rationale	Lead(s)	Time-scale	Measure of success	Status	Age	Disability	Gender reassignment	Marriage and Civil partnership	Pregnancy and maternity	Race	Religion / belief	Sex	Sexual orientation
							Human rights								
a.	Prepare, publish and implement an Equality Strategy, which must be updated at least annually	To provide evidence of how the NHSBSA complies with the general duties (1,2,3)	E&D Manager	31/01/12 Ongoing	Equality Strategy approved by Board and published on website	😊	✓	✓	✓	✓	✓	✓	✓	✓	✓
b.	Prepare and publish SMART Equality Objectives and the details of engagement to develop them	To provide evidence of how the NHSBSA complies with the general duties and to identify our priorities for E&D for the next 4 years. (1,2,3)	E&D Manager	Yr 1 06/04/12 Ongoing	SMART Equality Objectives and details of engagement are published within Equality Strategy	😊	✓	✓	✓	✓	✓	✓	✓	✓	✓

Action		Benefits / rationale	Lead(s)	Time-scale	Measure of success	Status	Age	Disability	Gender reassignment	Marriage and Civil partnership	Pregnancy and maternity	Race	Religion / belief	Sex	Sexual orientation
							Human rights								
c.	Develop and implement an Equality Analysis Procedure (formerly EqIA), to ensure that equality issues for business and policy change within the NHSBSA are taken into account	The needs of diverse groups within our workforce and customers are taken into account when delivering our services or making policy decisions <b>(1,2), S</b>	E&D Manager	Yr 1 April 2012 Ongoing	Equality Analysis Procedure implemented and integrated into business and policy change processes	😊	✓	✓	✓	✓	✓	✓	✓	✓	✓
d.	Prioritise relevant policies and procedures for equality analysis, and develop schedule for review	Equality Analysis is undertaken and is of a high standard <b>(1,2) S</b>	E&D Manager  HR Policy Advisor	Yr 2	Schedule developed and implemented	😊	✓	✓	✓	✓	✓	✓	✓	✓	✓
e.	Equality and Diversity Policy to be updated to reflect the Equality Act.	Managers and staff are aware of their duties and responsibilities around equality, diversity and human rights <b>(1, 3)</b>	E&D Manager  HR Policy Advisor	Yr 3	Updated policy ratified and implemented	😊	✓	✓	✓	✓	✓	✓	✓	✓	✓
f.	E&D statement for all policies to be updated to reflect the Equality Act and new Equality Analysis Procedure	Organisational commitment to E&D is clear and evident in all policies <b>(1, 2)</b>	E&D Manager  HR Policy Advisor	Yr 1 31/12/12	Updated E&D statement included in all policies going forward	😊	✓	✓	✓	✓	✓	✓	✓	✓	✓

Action		Benefits / rationale	Lead(s)	Time-scale	Measure of success	Status	Age	Disability	Gender reassignment	Marriage and Civil partnership	Pregnancy and maternity	Race	Religion / belief	Sex	Sexual orientation
							Human rights								
g.	Review all elements of Recruitment process and documentation to ensure it reflects Equality Act and best E&D practice, including new E&D statement in job adverts and new E&D section in all JD's.	External job applicants and staff are aware of our commitment to equality and our aim to increase the diversity of our workforce is supported.  <b>(1, 2)</b>	E&D Manager / HR Policy Advisor / Reward 7 Recognition Manager / HR Admin Managers	Yr 1 30/06/12	Recruitment Policy, process and documentation reviewed and updated if necessary.		✓	✓	✓	✓	✓	✓	✓	✓	✓
h.	Review relevant E&D elements of HR policies including Attendance Mgt, Flexible Working, etc. to ensure they reflect the Equality Act and best practice.	HR policies are compliant with new equality legislation and reflect best practice in E&D.  <b>(1, 2)</b>	E&D Manager  HR Policy Adviser	Yrs 2-3	Policies reviewed and updated if necessary.		✓	✓	✓	✓	✓	✓	✓	✓	✓
i.	New E&D Guidance to be developed to underpin updated E&D Policy and to reflect protected characteristics, including Gender Reassignment and Religious Observance.	New guidance reflects the aim to be a model employer and demonstrates our commitment to equality in practice for our workforce <b>(1, 3)</b> <b>S*</b>	E&D Manager  HR Policy Adviser	Year 4 Dec 2015	New guidance developed, ratified and implemented.	 <b>IP</b>	✓	✓	✓	✓	✓	✓	✓	✓	✓

### Objective Area 3: Accessibility and customer experience

The objectives in this area as detailed below support the following aims:-

- To recognise the individual needs of our diverse customers and treat them fairly with dignity and respect
- To have measures in place to identify and tackle any barriers to using our services
- To provide people with the support and information they need to use our services in a way that meets and takes account of their individual needs
- To have systems in place to gather feedback and capture experiences from people who use our services and use this to improve the things we do.

Action		Benefits / rationale	Lead(s)	Time-scale	Measure of success	Status	Age	Disability	Gender reassignment	Marriage and Civil partnership	Pregnancy and maternity	Race	Religion / belief	Sex	Sexual orientation
							Human rights								
a.	Identify priority services for Equality Analysis and complete assessments, to identify any barriers to access or difference in customer experience	Any areas of potential negative impact can be identified and addressed and areas of positive impact can be further promoted <b>(1,2,3) S, C*</b>	Heads of Services  E&D Manager	Yr 2 Ongoing	Outcomes from equality analysis are completed and any barriers identified removed.	😊	✓	✓	✓	✓	✓	✓	✓	✓	✓
b.	Introduce systems / procedures for the capture of monitoring information from customers	Any areas of under representation in terms of accessing and using services are identified and addressed. <b>(1,2)</b>	Head of Patient and Customer Operations	Year 4	Systems are in place to allow for customers monitoring information to be captured.	😐 IP	✓	✓				✓	✓	✓	✓
c.	Ensure that service usage is monitored to enable any areas of under representation to be identified and addressed	Any areas of under representation in terms of accessing and using services are identified and addressed. <b>(1,2), C</b>	Head of Patient and Customer Operations	Yr 3 June 2014 Annual update required	Service Monitoring Reports are in place	😊	✓	✓				✓	✓	✓	✓
d.	Ensure clear guidance is in place to enable the communication and	The communication and access needs of customers are met	Head of Patient and	Yr 2 Dec 2013	Guidance is in place (through the Comms and	😊		✓							

Action		Benefits / rationale	Lead(s)	Time-scale	Measure of success	Status	Age	Disability	Gender reassignment	Marriage and Civil partnership	Pregnancy and maternity	Race	Religion / belief	Sex	Sexual orientation
							Human rights								
	access needs of all customers to be met, including those who are deaf, blind, deafblind or have a disability	(1,2,3) S*, C*	Customer Operations  Head of Comms	Then ongoing	Insight Strategy and the Customer Contact Strategy) and staff are aware.										
e.	Ensure that staff understand how to access and use the translation service	There are no language barriers to accessing our services (1,2) S, C*	Head of Patient and Customer Operations	Yr 2 July 2013 Then ongoing	Staff know how to use the translation service. More calls and emails are translated	😊						✓			
f.	Ensure that customer information is available in different formats and languages on request to meet individual customer needs	Customers have access to information in formats they can understand, that is relevant to them, and they can use (1,2,3), C	Head of Comms	Yr 3 June 2014	Information can be supplied in different formats on request	😊	✓	✓				✓			
g.	Ensure Access audits of our premises are carried out	Staff and customers can access all NHSBSA buildings (1,2,3)	Head of Estates and Facilities	Yr 1. Annual update required	Up to date access audits have been completed and acted upon	😊		✓							
h.	Review the Complaints Procedure to ensure that it is fully accessible to all.	There are no barriers to accessing the Procedure or making a complaint (1,2)	Corporate Secretary /  Head of Comms	Yr 2 Sept 2013	Complaints Procedure reviewed and amended if necessary	😊	✓	✓	✓	✓	✓	✓	✓	✓	✓
i.	Introduce systems / procedures for the capture of monitoring information for formal complaints	Trends in complaints can be monitored (1,2)	Corporate Secretary	As above	Formal complaint reports are broken down by protected groups	😊	✓	✓	✓	✓	✓	✓	✓	✓	✓

## Objective Area 4: Workforce

The objectives in this area as detailed below support the following aims:-

- To employ a workforce which is representative at all levels of population demographics
- To have fair and flexible policies and practices in place to support our staff to do their jobs effectively without fear of discrimination or harassment
- To create a workplace where dignity and respect for colleagues, clients and customers is paramount
- Staff are actively engaged and involved in the development and delivery of our Equality Strategy

Action	Benefits / rationale	Lead(s)	Time-scale	Measure of success	Status	Age	Disability	Gender reassignment	Marriage and Civil partnership	Pregnancy and maternity	Race	Religion / belief	Sex	Sexual orientation
						Human rights								
a.	All new staff receive training on Equality and Diversity as part of their Induction programme	All new staff are informed about their duties and responsibilities around equality and diversity <b>(1,3), S*, C*</b>	Head of L&OD	Yr 1 30/04/12	Induction programmes include Equality and Diversity	😊	✓	✓	✓	✓	✓	✓	✓	✓
b.	All staff to complete Equality and Diversity training annually.	All staff are aware of their duties and responsibilities around equality and diversity. <b>(1,3), S*, C*</b>	Head of L&OD	Yr 1 30/04/12	All staff to have completed the Easy-I Diversity module.	😊	✓	✓	✓	✓	✓	✓	✓	✓
c.	Ensure arrangements are in place to audit uptake of Equality and Diversity training	The NHSBSA is able to demonstrate what percentage of staff have completed E&D training <b>(1,3), S*, C*</b>	Head of L&D	Yr 1 31/04/12	We can report on the percentage of staff who have received this training	😊	✓	✓	✓	✓	✓	✓	✓	✓
d.	Review the effectiveness of the Easy-I Diversity module and develop additional resources if required.	E&D training for all staff is effective and relevant to job roles <b>(1,3) S*, C*</b>	E&D Manager / L&OD team	Yr 2 Dec 2013	Review completed and resources developed	😊	✓	✓	✓	✓	✓	✓	✓	✓



Action		Benefits / rationale	Lead(s)	Time-scale	Measure of success	Status	Age	Disability	Gender reassignment	Marriage and Civil partnership	Pregnancy and maternity	Race	Religion / belief	Sex	Sexual orientation
							Human rights								
e.	Following the decommission of Easy-I, a new E&D e-learning module for staff for LMS to be developed and launched	E&D training for all staff is effective and relevant to job roles <b>(1,3)</b> <b>S*, C*</b>	E&D Manager  L&OD team	Year 4	New E&D modules for staff for LMS launched and all staff complete it	😊	✓	✓	✓	✓	✓	✓	✓	✓	✓
f.	Develop and implement an E&D Course for Managers on their obligations and this should be mandatory to attend every 3 yrs.	Managers are aware of their duties and responsibilities around equality and diversity. <b>(1,3)</b> <b>S*, C*</b>	E&D Manager  Head of L&D	Yr 1-2	Course developed and implemented.	😊	✓	✓	✓	✓	✓	✓	✓	✓	✓
g.	Identify and address the specific E&D training needs of any other groups of staff	E&D training is targeted appropriately and effectively <b>(1,3)</b>	E&D Manager Head of L&OD	Yr 2-3	E&D training needs are identified and addressed	😊	✓	✓	✓	✓	✓	✓	✓	✓	✓
h.	Maintain accreditation of the Disability Award ('Two Tick' symbol)	More people with disabilities apply for our vacancies, and staff with disabilities are supported <b>(2)</b>	E&D Manager HR Admin Team Managers	Annual update	Accreditation by JobCentre Plus is maintained.	😊		✓							
i.	Assess interest and if sufficient establish a staff diversity network.	Diverse staff feel empowered and engaged with the NHSBSA, and contribute to its equality objectives <b>(1), S</b>	E&D Manager / Internal Comms Manager	Yr 1 Dec 2012	Interest in network gauged and network established.	😊	✓	✓	✓	✓	✓	✓	✓	✓	✓
j.	Participate in an E&D benchmarking standard such as the Stonewall Workplace Equality Index.	The NHSBSA can benchmark itself against best practice with regard to E&D, and further improve.	E&D Manager	Yr 2 onwards then annually	Benchmarking exercise complete and any outcomes implemented.	😊	✓	✓	✓	✓	✓	✓	✓	✓	✓

Action	Benefits / rationale	Lead(s)	Time-scale	Measure of success	Status	Age	Disability	Gender reassignment	Marriage and Civil partnership	Pregnancy and maternity	Race	Religion / belief	Sex	Sexual orientation
						Human rights								
		(1)												
k.	Develop an action plan for further improvement in Stonewall WEI, in readiness for third submission	The NHSBSA can benchmark itself against best practice with regard to E&D, and further improve. (1)	E&D Manager  E&D Committee	Yr 4 Sept 2015	Action plan developed and implemented. Performance in 2016 WEI and ranking improved	😊								✓
l.	Further strengthen links between E&D Committee and Staff Diversity Network by establishing a 'reverse mentoring / buddying' scheme between members	Links between the two strategic and staff equality groups are strengthened. Senior Committee members are aware of equality issues faced by staff. (1,2,3)	E&D Manager / E&D committee / Staff Diversity Network	Yr 4	Links between the two groups are strengthened and groups work in partnership	😐 IP	✓	✓	✓	✓	✓	✓	✓	✓
m	Analyse job satisfaction rates of staff by protected characteristic, by including equality monitoring questions in the staff survey	We can identify if staff from different equality groups have different experiences and views of the NHSBSA, and if themes emerge, then plan action to address this. (1)	E&D Manager  Insight team	Yr 4	Results of staff survey analysed by protected characteristic and reported to E&D Committee. Any necessary action planned.	😊	✓	✓	✓	✓	✓	✓	✓	✓

## Objective Area 5: Procurement

The objectives in this area as detailed below support the following aim:-

- Equality and Diversity issues are considered from the outset in the procurement and commissioning process

Action		Benefits / rationale	Lead(s)	Time-scale	Measure of success	Status	Age	Disability	Gender reassignment	Marriage and Civil partnership	Pregnancy and maternity	Race	Religion / belief	Sex	Sexual orientation
							Human rights								
a.	Where Pre Qualifying Questionnaires (PQQs) are applicable, ensure that they take into account Equality and Diversity requirements	Equality and Diversity issues are considered from the outset in the procurement and commissioning process (1,2)	Commercial SMT Group	Annual update	Where applicable, PQQs contain E&D specific questions	😊	✓	✓	✓	✓	✓	✓	✓	✓	✓
b.	Contracts contain a requirement for suppliers to comply with E&D legislation	Contracted services are fully aware of their duties and responsibilities around E&D (1,2)	Commercial SMT Group	Annual update	All new contracts contain E&D clauses	😊	✓	✓	✓	✓	✓	✓	✓	✓	✓
c.	Where E&D is a primary requirement of the service, E&D requirements are included in the contract and progress monitored throughout the contract	Contracted services have to demonstrate their compliance to Equality legislation (1,2)	Commercial SMT Group	Annual update	Contracts are monitored for compliance with E&D legislation	😊	✓	✓	✓	✓	✓	✓	✓	✓	✓
d.	Procurement and contract management practices with regard to equality move beyond compliance towards best practice	Equality issues are weighted throughout all procurement and contract management processes (1,2)	Change and commercial SMT Group	Yr 4	Benchmarking measures our performance in this area as best practice	😐 IP	✓	✓	✓	✓	✓	✓	✓	✓	✓

## Objective Area 6: Communications and engagement

The objectives in this area as detailed below support the following aims:-

- To have systems in place to gather feedback and capture experiences from our staff and from the people who use our services, and use this to improve the things we do.
- Staff are actively engaged and involved in the development and delivery of our Equality Strategy

Action	Benefits / rationale	Lead(s)	Time-scale	Measure of success	Status	Age	Disability	Gender reassignment	Marriage and Civil partnership	Pregnancy and maternity	Race	Religion / belief	Sex	Sexual orientation
						Human rights								
a.	Consult and engage with staff and customers on our Equality Strategy and draft equality objectives.	Staff and customers have an opportunity to influence our Equality Strategy. <b>(2,3)</b>	E&D Manager  Comms Mgrs	Jan – Mar 2012	Engagement, monitored by protected groups. Outcomes of engagement published.	😊	✓	✓	✓	✓	✓	✓	✓	✓
b.	Develop E&D sections of the intranet and external website, with Equality Strategy and other info required to publish on.	Publishing the Equality Strategy for staff and the public is a legal requirement <b>(2, 3), S*</b>	E&D Manager  Comms Mgrs	Yr 1 31/12/12	New E&D sections of the intranet and website launched.	😊	✓	✓	✓	✓	✓	✓	✓	✓
c.	Raise staff awareness of E&D through regular comms updates – through The Loop, Service News, etc.	Staff gain an increasing awareness of E&D and their obligations. <b>(2,3) S*</b>	E&D Manager  Comms Mgrs	Yr 1 31/12/12 Then ongoing	Regular E&D updates included in The Loop and Service News, etc.	😊	✓	✓	✓	✓	✓	✓	✓	✓
d.	Annual comms plan to be developed for the year ahead, for diversity related events and issues to be promoted to staff, ensuring all protected characteristics are covered	Staff gain an increasing awareness of E&D and their obligations. <b>(2,3)</b>	E&D Manager Staff Diversity Network  E&D committee	Yr 4	Plan implemented and regular diversity events and issues are promoted to raise staff awareness	😊	✓	✓	✓	✓	✓	✓	✓	✓

Action		Benefits / rationale	Lead(s)	Time-scale	Measure of success	Status	Age	Disability	Gender reassignment	Marriage and Civil partnership	Pregnancy and maternity	Race	Religion / belief	Sex	Sexual orientation
							Human rights								
e.	Staff Diversity Network to host a diversity event(s) for staff at each main site, to raise the profile of the Network and increase awareness of equality issues	Staff gain an increasing awareness of equality issues and also have confidence to raise any equality issues with Network members <b>(1, 2,3)</b>	E&D Manager Staff Diversity Network E&D committee	Yr 4 Sept 2015	Network host events at main NHSBSA sites	😊									
f.	Support staff participation in diversity-related community event(s) such as Pride or Mela festivals	Raises the profile of the NHSBSA as a service provider and employer of choice, for people from all diverse communities. <b>(2,3) S*</b>	E&D Manager  Staff Diversity Network	Yr 3 Then annually	Staff are supported to attend relevant community events and the profile of the NHSBSA is raised	😊	✓	✓	✓	✓	✓	✓	✓	✓	✓