



Luton and Dunstable University Hospital

Workforce Equality Information report

31st March 2019

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1. Introduction

This report overviews staff in post at the 31st March 2019 to help evaluate Trust performance in terms of Equality, Diversity and Human Rights. It seeks to highlight any developments or improvements, and any disparities such as indication of under-representation or potential unfair treatment to staff in relation to their individual characteristics such as age, gender, sexual orientation, ethnicity, transgender or belief.

Capturing this Equality Information supports the Trust in considering and making informed decisions about potential future action needed for improvements in fairly and equitably managing its workforce.

This data and analysis is also required under the Equality Act 2010, (Public Sector Equality Duty PSED) and for the NHS Equality Delivery System EDS2 which supports delivery and compliance. The Trust collects data across the protected characteristics from staff or job applicants. Most data is obtained from the Employee Staff Record (ESR). Any small or insignificant numbers have been amalgamated to maintain staff anonymity or confidentiality.

Declaration levels - can affect the value and relevance of the data collected. There are three Workforce data areas the Trust is working to improve which are disability, sexual orientation and religion or belief which have levels of 66 -71% declaration. Low declaration of these sensitive areas is a national patient and workforce phenomena for the NHS.

2. Summary - with recommendations

Total Employees at March 2019 were 4353, an increase of 3.38% from the 4206 at March 2018. The average annual increase in staff is 2.79%. The overall increase in staff between 2015 and 2019 is circa 11.17% (473 staff).

This is against patient attendances in the same period accruing by 11.4% in Outpatients, 21.7% in Inpatients and 18.2% in the Emergency Department. (Maternity and Healthy Births have increased circa 25% but this is more difficult to assess as there is fluctuation in numbers and non-healthy birth numbers are included in inpatients).

Full time Equivalent -

The report has measured staff by number. In 2019 of the 4353 staff, 3103 are full time and 1250 are part time (ratio 71% to 29% respectively). This will affect the average increase above as it may well be lower than the average 2.79% figure reached by counting staff by number.

Gender profile

- The working population gender ratio in England in 2018 of male to female was 53%: 47%. The national NHS average ratio of male to female was 23%:77% which is low male representation. The male ratio is still consistently lower for the Trust at between 19-20% over the last 5 years. In 2019 it is 19.7%.
- Societal drivers behind gender related career choices influence this result for the NHS and the Trust, so reaching the local population gender ratio is not realistic. It would be realistic to aim for the NHS average of 23% male and improve on that. The Trust works to promote its careers and vacancies without gender bias and will consider improvement initiatives.

NHS Gender Pay Gap Reporting at March 31st 2019

All organisations with 250 plus staff must collect specific gender pay data details annually at March 31st and publish a specific report with analysis by the following March. The Trusts 2nd

Gender Pay Gap Report for year ending 2018 was published in March 2019 and can be viewed on the Equality and Diversity Section of the Trusts website.

- The Trust has a higher ratio of female to male staff (circa 80%:20%). In the Trust's very senior management, our executive board reasonably reflects the workforce at 75% to 25%. However, there is a general higher level of males in the highest pay quartiles, where the female to male ratio is at 67% to 33%.
- Lower female numbers in senior management impacts results. For instance, when some staff groups in higher quartile pay are excluded from the data (e.g. medical /dental grades or Ad-hoc Professionals/ Consultants) this significantly reduces the general mean pay gap for female from 29.2% to a lower 10.97% in favour of male.
- There is also a predominantly male workforce in the higher banded Medical and Dental Professions where a bonus (Local Clinical Excellence Award - LCEA), is applied. As a proportion this means only 1.65% of staff receive a bonus of which this is 0.67% of female and 4.72% of male employees. This also impacts on pay results for females.
- In 2018 the mean bonus pay gap rose 10% to 43.7% (median 20% to 65.4%). Pay and the bonus are currently incremental to tenure of service and tenure in the award process. This means that more senior long serving consultants, who are typically male, will have higher remuneration and bonuses. Female consultant numbers have risen from 5% to 30.8%, but any impact on remuneration or bonus results will be slow as they need tenure.
- The increase in the gender bonus pay gap has not affected the overall pay gap which has been circa 29% for both years.
- A new LCEA agreement will be applied to awards in 2020 and so will not impact results in the reports due at March the 30th in 2020. The Trust's report lays out recommendations and actions to improve our Gender Pay Gap results. <https://www.ldh.nhs.uk/corporate-information/equality-and-diversity/annual-reports-and-relevant-documents>

Age Profile

Age has a high declaration level as date of birth is required for all employees. In the last 5 reporting years the workforce has increased in size but with relatively the same proportion of staff in the age groups covered. The majority of staff are aged between 30-54 years of age. A challenge remains the significant number of staff over 55 who may opt for retirement.

- **Age Bands** used for data analysis are similar to NHS Employers, but patients are captured by NHS England 5 year bands. Applying this to the workforce would help in more accurate benchmarking and be comparable to Patient data. The national workforce is moving to 5 generations of staff in the workplace who by established research are known to have very different outlooks on work life balance and broader age band data collected would help capture this age range information.
- **Age Profile and Establishment** – from 2015 to 2018, the under 50's had a proportional decrease of 3.7% against a 3.6% increase in the over 50's. In 2019 this has shifted to a 1% increase in the under 50's.
- **Under and Over 50 proportions** – The under 50 to over 50 ages ratio in the workforce is 71%:28.6%. The over 50 groups in 2019 are 11.3% aged 50-54 and 17.3% aged over 55, which is still a sizeable amount of staff close to, or potentially considering future work-life plans. However, in comparison to the proportions across both the NHS and the England working population, the LDH has a moderately less ageing workforce population.

- **Age and Discipline or Grievance – see page 5-6 under discipline and grievance**
- **Age and starters / leavers** – see under starters, leavers and reasons for leaving section at the end of the summary and also Age and Retention below.
- **Age and Retention - Flexible Working – Work Life Balance** - It is known that pre 2019, the cost and time of training, 1% pay cap and cost of living, tight resources, working hours, work life balance challenges made the NHS unattractive to join and possible untenable to stay for some e.g. with young families. There has been some movement on pay in 2019 but still how does the Trust improve retention? Looking at reason for leaving is one aspect.

Work life balance reasons – the reason for leaving category of wanting “work life balance” increased from 6-7% to 12.7% in 2018. From 2015 to 2019, it has increased from a 5.9% to 20.1% (162 staff). Comparing a “personal” categories group of “health, work life balance and dependants,” in 2016 at 13.3% to 26.6% of reasons in 2019, this group category has doubled in 2 years. In 2019 this equates to 215 staff.

“The better career opportunities group of leaver reasons” makes up 30.9% of leaver reasons in 2019 (249 staff). In 2016 this was 24% and so this is a proportional increase of 6.9% (circa 56 staff).

Work Life Balance – Gender, Age, Caring and Other demands

- With people generally living and working longer there is a sizeable, growing number of the workforce reaching or in the higher age brackets who are close to or potentially may be considering their future work-life plans. Such as would they like to continue as they are, or desire to work differently, more flexibly or less hours, or are considering retirement? **The Trust’s over 50 age group forms 29% of the workforce.**
- It is known that younger generations in the workforce value work life balance and flexibility and so it may improve future satisfaction, wellbeing and retention by enabling ability to meet work / life demands especially if trying to meet demands of a young family. Also a proportion of staff are returning to work part-time post retirement (which is viable under the pension scheme if they do not earn in total with their pension and pay, more than they would have earned in their fulltime employment prior to retiring).
- Review of the options and flexibility offered e.g. around older relatives and child caring needs, partial retirement or part time working and the management of this e.g. in developing any supportive working arrangements and succession planning could be opportune. Job share and mentoring opportunities between our experienced, long serving staff and recent, less experienced staff may help in mutual support and development opportunities, aiding job satisfaction, career development and retention.

Disability Profile

- **Declaration** of disability status has improved by 22% since 2015 leaving 29% undeclared (as opposed to 57% in 2016). This is part due to collection methods such as the national Electronic Staff Records ESR. Mostly the non-disabled group has grown by 21.3% since 2015 rather than the disabled group (at 0.5%) so that only 2% have declared a disability. This is much lower than national indices. In the NHS there is discrepancy with National Staff Survey declaration at circa 17% compared to the National ESR at circa 2-3%. This indicates the national NHS level of disability could be nearer 17% which is more realistic.
- **Workforce Disability Equality Standard WDES – Disability Confidence** - The **WDES** is a national initiative mandated into the NHS Contract to improve disability performance and experience. It has metrics (similar to Workforce Race Equality Standards **WRES**

indicators) which from 2019 will be used to measure and benchmark nationally. This will help the Trust to reduce the 29% non-declaration and gain a more accurate picture of workforce disability. The WRES holds initiatives to gain confidence in declaration, and in data use to ensure monitoring and application of fairer treatment such as reasonable adjustment.

Ethnicity Profile

- In 2019 2.3% (102) staff have not declared their ethnicity (the best result in the 5 years). There is more confidence in stating ethnicity than belief or sexual orientation which is usual.
- **The Trust workforce is much more diverse than the average National NHS or England workforce.** In 2018 the Trust workforce was more diverse than the total workforce in the NHS by 21%, and in England by 30%. The main differences respectively were circa 7% more Black and 14% more Asian staff.
- The **Workforce Race Equality Standard WRES** covers ethnicity data and can be viewed on the Trust website. However, this covers BME / White / non-declared categories only.
- **Broader ethnicity groups** - In 2018 the Trust looked beyond the 3 WRES categories and analysed Asian and Black Groups which formed respectively 23% and 11.8% of the workforce with an upward trend. Now in 2019, Asian form 25.2% and Black staff 12% while White ethnicities form 9.1% and ethnicity other form 5.9%. **In total Black, Asian, White minorities and other ethnicities now form 52.3% of the workforce - with the balance of White 45.5% and non-declared 2.3% making up the total workforce.**
- **Recruitment and Selection** – the Trust has generally been quite an ‘attractive’ employer for a wide number of diverse, prospective employees as shown by the healthy level of applications. As part of the WRES return the Trust looks at the level of appointments from BME groups compared to the applicant pool and short listing to ensure that any unfair or unwitting unfair treatment in the process is identified and minimised.

Belief (Religion, Belief or non-Belief) – Non-Declaration improved 7% from 41.2% in 2015 to 34.2% in 2019. This needs to be improved further as non-disclosure of belief or non-belief at more than a third of staff (1489 undeclared) really affects data value. The highest category is still Christianity with a slight decline at 40.9%. There are slight increases of Islam, Atheism and Hinduism which are now at 7.3%, 7% and 2.7% respectively. All other categories in total amount to 7.9% of the workforce.

Sexual Orientation - Non declaration of sexual orientation was 41.5% in 2015 and 31.5% in 2019, a 10% improvement in the 5 years. However, as staff increased too, it means 1320 have not declared. This is still high and a similar statistic to that of belief. Both categories need improvements to the declaration level and how this information is collected. There is still a very small number of declared LGBT staff and most declaration increases were heterosexual.

Pregnancy & Maternity and Paternity - Circa 3-7% of the female workforce are on maternity each year and 2.7% of the male workforce take paternity leave (against a female to male workforce ratio of 81%: 19%). A higher proportion of BME staff are taking maternity / paternity leave in the last 3 years than for the general workforce. Non declaration of disability in this group is low from 0.8% to 2.2% across the 4 years of data.

Partnership status and Marriage / Civil Partnership - The protected characteristic is marriage or civil partnership. Albeit a small proportion of the workforce, from 2015 to 2019 civil partnerships have increased from 4 to 35 which is indicator of LGBTQ changes or confidence at declaring same sex partnerships. At March 2019 the largest group remains married (52.9%) then single (36.9%). The level of non-declaration is 3.6% which has been fairly static.

Disciplinary Profile

- In the last 5 years there has been 151 disciplinary cases - an average of 30 a year. In 2019, the 37 cases equates to only 0.85% of the 4353 workforce being in a disciplinary.
- Over the 5 years none of the cases have declared a disability.
- Males are proportionally more likely to be in a disciplinary process than females.
- From 2015 to 2017 the BME to White Ratio showed BME were less likely to be disciplined than White staff which was high performance in terms of the WRES. In 2018 and 2019 BME were more likely to be in a disciplinary process than White Staff. 2018 showed an overall better average variation ratio for BME staff over the 4 years and better result for 3 out of 4 years. This year showed a 2.3% difference between BME and White likelihood of being in a disciplinary. This is a change but not at this stage a trend.
- In 2017 and 2018 there was much less likelihood of staff under the age of 25 being disciplined (-11 to -14%) - In 2019 it is now 7.1% more likely and proportionally there are fewer staff in this age group as they have moved from 21.9% to 9.1% of the workforce. Conversely, in 2017 and 2018 the older the staff member the more likelihood of a disciplinary case, especially if over 55 where it was 8-10% more likely. In 2019, this has reduced to be more proportional.

Grievance Profile

- Grievance was added to the report in 2016. There had been concern that the NHS staff survey showed high levels of issues with conduct from patients and colleagues but this was not reflected in complaints, grievances or speaking up. A number of initiatives have been introduced in the last two years such as the Board signing the Social Partnership Pledge to improve conduct, anti-abuse posters, promotion of speaking up and how at EDHR week and Event in the Tent and an increase in the Freedom to Speak up Team.
- The 15 grievances in 2019 is a large increase against 15 in total over the previous 3 years. Technically, these have tripled which would suggest actions for more confidence in speaking up have worked especially as the Freedom to Speak up team have been implicated. However, the team would have expected more grievances than this. The new queries are, is more confidence needed and are the process results working?
- The 15 cases between 2016 and 2018 had more likelihood of a male raising a grievance. In 2019 it was more likely for women to raise a grievance. Over the four years it is still more likely that White staff will raise a grievance and no cases have disclosed a disability.
- In terms of age in 2016 to 2018 all staff raising a grievance were over 36 years, in 2019 this was more likelihood in the over 46 to 56 plus groups and in the 26-35 age group.

Promotions

- **Number of promotions in 2019 total 262.**
- **Data Notations** - This is a difficult area to extract information from due to the nature of ESR. For instance it needs to be factored into the results that most workforce data does not include bank employees but this data does which will affect accuracy and data value (see 2017 report for more detail). Also, although most promotions seem to occur in Nursing and Midwifery, pre-registration nurses are upgraded to Band 5 as they receive their pin. Apparently this amounted to 103 or 2.4% of all staff in 2019, and 39.3% of the promotions.

- **Gender** – The average female to male workforce ratio 2015 to 2019 has been 80%:20%, so only in 2018 was there a more favourable result for male at 20.2% male. Other years have 10.7% to 13.7% male promotion. Band 5 female nurse pins may impact this result.
- **Belief** - shows Christianity as the consistent most declared category but with a trend of decline. The value of this data is affected as the next highest category across both the workforce and promotions is non-declared / not stated at circa 34% - 35%. This is more than a third of staff whose belief status is unknown. Atheism is circa 9% and Islam circa 7% with a trend for increasing as per workforce data.
- **Ethnicity** - Non-declaration of ethnicity is low at 2% for all staff and 2% in promotions data which adds good value to the data and analysis. BME staff has a trend for increasing in the workforce and is proportionally higher represented in promotions, for instance in 2019 BME are 43% of the workforce / 57% of promotions, and White Ethnicities are 9% of the workforce / 11% of promotions. White staff form 45% of the workforce, and 30% of promotions.
- **Sexual orientation** – high non-declaration at 28% affects the value of data. The LGB group at 1.9% declaration is low against national averages. Declaration needs improving.
- **Length of Service LOS** - Promotions by LOS data will be affected by pre-registration nurse upgrades to Band 5 on pin receipt (103 or 2.4% of all staff in 2019, and 39.3% of the promotions).
- **Disability and promotions** – was added to the report in 2018 in readiness for the WDES. This year non declaration is much improved at 15.6% against 34% in 2018. 5 have declared a disability which shows some confidence in doing so.
- **Age and promotions** – 6.01% of the total workforce promoted in 2019 with majority of these under age 45 at 86.3% (with the majority of workforce within this age range at 56.4%). Those aged 45 upwards are 24% of the workforce with only 12.6% of promotions and likelihood of promotion decreasing with age. Promotions for Under 30s are 47%.

Starters

In 2019 the starters at 809 and leavers at 807 were at the most balanced in the 5 year period.

- **Gender** - Gender in starters was added to the report in 2017 in response to Gender data requirements. With workforce female to male ratio circa 80%:20% in the last 5 years it is good to encourage a better ratio of male starters. In 2019 the male ratio was 26.2% (average over the 3 years is 25.9%). Male leavers in 2019 were 24.8%.
- **Age** - Starters are more likely to be under the age of 45 at 83.8% in 2018 and 86.3% in 2019 (and 70.9% and 61.8% of the workforce respectively in these years). Starters aged 46 plus were 16.1% in 2018 and 13.7% in 2019 (29%, 38.3% of the workforce respectively in these years). A large 21% decrease occurred in the under 25 group workforce from being 21.9% in 2018 to 9.1% in 2019. The 26 to 35 age group decreased by 10% but there was a 12% rise in the 36 to 55 age groups.

Of interest are the starters in the 56 to 70 age group which average 5.2% of starters over the last 2 years, including 32 staff over the age of 60 of which 6 were in the 66-70 age group. This shows that although numbers decline after age 55 there are still opportunities for employment in the Trust for older applicants.

Between 2017 and 2019, there is correspondence between age groups of starters to leavers. The younger the staff, the faster they turn over. Junior Doctors, career moves,

promotion etc. are likely to be part of these changes. (Reasons for leaving help inform these results).

Staff Groups -There are continued higher numbers of starters in Medical and Dental, Additional Clinical Services, Nursing and Midwifery and Admin and Clerical. Next year the staff group size and the different ethnicity of these staff groups would be of interest.

- **Ethnicity** - non-declared ethnicity in starters in 2019, is 6.3%. The ratio for BME recruits has been 42% to 43% between 2016 and 2018 which is similar to BME in the workforce, however in 2019, this has risen to nearly 50%.

Of interest are the proportions of Asian and Black ethnicity which are large groups in our workforce. In 2018 starters this was 22.7% and 12.9% respectively. In 2019 there are 33.4% Asian and 11.1% Black starters. White ethnicities are a sizeable group currently included in All White categories for WRES purposes. When separated out in 2019 White British amounts to 34% and White Ethnicities 9.1% of starters.

- **Disability** - new to the report in 2017 in readiness for the new Workforce Disability Equality Standard **WDES**. 2019 has very low disability declared at 0.4% which is under national expectations and higher non-declaration levels at 31.8% which affects data value.

Leavers

- **Leavers and gender** - year ending March 2019 saw 807 leavers. Between 2015 to 2019 and compared to the workforce male to female ratio of circa 20%:80%, there is a higher proportion of male leavers at 24-28% but a corresponding higher level of male starters e.g. 26.2% in 2019.
- **Disability** – The still high non-declaration at 21% effects validity and value of this data. Declaration of a disability is at 1.36 to 2.5% which is low to national expectations.
- **Ethnicity** - non-declaration is at its lowest level this year at 2.2%. The trend between 2017 and 2019 of proportionally lower White (4.7%), to higher BME (5.7%) of leavers, is still balanced by 4.8% fewer White and 7.5% more BME starters in the same period. In 2019 this equates to plus 1.7% more BME remaining (circa 136 staff) which has contributed to increasing proportions of BME to White Staff.
- **Age** - a disproportionate number of under 30's are leaving between 2017 and 2019 against the total staff aged under 30 in those years, but again matched by a high proportion of starters. The details of promotions and students may help explain this. Those aged 46 and upwards are more inclined to stay than those 45 and under.
- **By division and Staff Group** - By division the highest leavers are in Medicine 29-35% and Surgery 21-23%, but this needs to be compared to their workforce proportion, promotions, fixed term contracts etc. By staff group highest leavers are in Medical and Dental at circa 27-29% when their workforce proportion is 14% which is a concern but medical rotation may play a part in this. Then Nursing and Midwifery whose leavers are 24-28% against a workforce proportion of 33.4%. Additional Clinical Services have a ratio of 17.2% to 17.6% in the workforce, and Admin and Clerical 17.3% to 21.2% in the workforce. Other groups are below a threshold of 7.10% to 5.4%.

Reasons for Leaving - The Trust has been operating starter and exit questionnaires from October 2015 to explore unknown reasons for leaving to help the Trust to understand better why staff / staff groups join and/or leave the organisation.

The top two reasons for leaving since 2015 (bar TUPE in 2016) have been superseded by reason of work life balance in 2019 at 20.1% which accounts for 162 leavers in 2019. This category has increased each year and proportionally by 12.6% since 2015. The usual top two reasons follow this and are relocation at 17% and end of Fixed Term Contract at 14.7%. The unknown voluntary resignation category is much reduced from 17.8% in 2018 to 6.9% in 2019 which is progress on achieving known reasons for leaving with ample categories.

Communications are needed – to improve the level of ‘buy in’ and understanding by staff, of the benefits of a diverse, leading employer being able to understand and utilise characteristic information, to help address any unfair outcomes in line with the **Equality Delivery System** and the Trust’s **Equality Objectives**.

3. THE DETAILED REPORT FOLLOWS;

For the last 5 years the Trust has produced comprehensive Annual Equality Data Reports for the Workforce and for Patients. These can be viewed on the Equality and Diversity area of the Trusts website. The information below shares some of the workforce data with analysis of what this data shows compared to last and previous year’s annual reports.

3.1. Workforce Profile

Declaration Levels – due to the declaration data results in the chart below work is underway to reduce unknown or undeclared returns by staff, across disability, religion or belief and sexual orientation. This is not uncommon nationally, as people find these sensitive to declare. However, appropriate staff engagement and communications will help in gaining staff confidence in declaring and will gradually reduce this lack of declaration over time.

General Declaration levels	Declaration levels 2019	% increase since 2015
Gender	100.0%	
Age	100.0%	
Ethnicity	97.7%	1.2%
Disability	71.0%	22.0%
Religion Belief or Non Belief	65.8%	7.0%
Sexual Orientation	68.5%	11.0%
Partnership status	96.4%	0.3%
Pregnancy and Maternity	99.2%	97.8%

Staff establishment - The number of staff at March 31st 2019 totalled 4353, an increase of 3.38% within the last year from 4206 at March 2018. As can be seen from the chart below the average annual increase in staff is 2.79%. (For details of patient increases see page 4).

Increases in Staff by number and percentage

Year ending	Staff total	increase / decrease	
At March 2015	3880		
At March 2016 (Some staff left under TUPE)	3813	-67	-1.76%
At March 2017	3950	137	3.47%
At March 2018	4206	256	6.09%
At March 2019	4353	147	3.38%
Increase since March 2015 in staff		473	11.17%
Average annual increase in staff is			2.79%

Full time Equivalent -

For the last 4 years this report has measured staff by number and not whether they are part time or full time. In 2019 of the 4353 staff, 3103 are full time and 1250 are part time with a ratio 71% to 29% respectively. This will affect the average increase above as it may well be lower than the average 2.79% figure reached by counting staff by number.

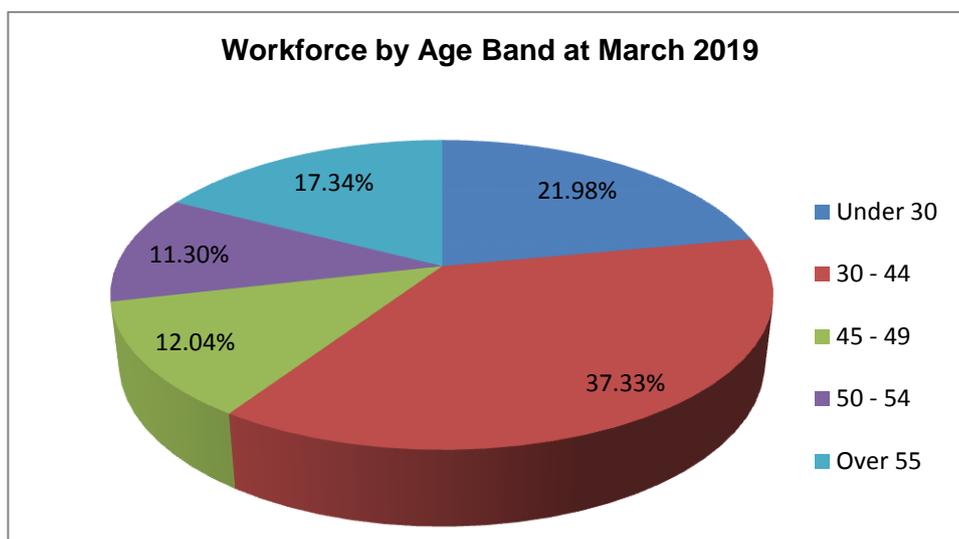
Gender - The ratio of male to female remains low and is an NHS national phenomenon. The NHS national average ratio was 25% male 75% female but is now 23%:77%. Societal drivers behind gender related career choices influence this result for the Trust and the NHS. However, the Trust works to promote its careers and vacancies without gender bias.

Gender – the Trust’s male to female ratio remains consistently circa 20%: 80% female with this year’s ratio at 19.7% male to 80.3% female. Last year it was 19%:81%. This continues a pattern of minor male and female fluctuations over the past 5 years.

3.2 Workforce by Age Profile

Age Profile – Age has high declaration as date of birth is required for all employees. Over the 5 reporting years the workforce has increased in size but with relatively the same proportion of staff in the age groups covered. The majority of staff are aged between 30-54 years of age.

Age Bands used for data analysis are similar to NHS Employers Bands, but Patients are captured by NHS England 5 year bands and if the workforce was also, this would help in accurate benchmarking. As the National workforce moves into 5 generations of staff in the work place with very different outlooks on work life balance, the broadening of age band data collected will capture this age range information with comparability to Patient data.



- Age Profile and Establishment**

From the table below in 2015 to 2018 the under 50’s saw a 3.7% proportional decrease and the over 50’s a 3.6% increase. In 2019 this shifted to a 1% increase in the under 50’s.

Staff under the age of 44 still form circa 59% of the workforce. When those aged 45 to 49, are added, circa 71% of the workforce are under-50. The over 50 groups (11.3% aged 50-54 and 17.3% over 55) form 28.6% of the workforce. This is still a sizeable amount of staff close to, or potentially considering future work-life plans such as if they would like to continue as they are, or desire to work more flexibly or less hours, or are considering retirement.

Workforce by age groups at March 2019 (with comparators to 2015 and 2018)						change 2015 to 2019 %
Age groups	2015	2018		2019		
	%	No	%	No	%	
Under 30	22.6%	922	21.9%	957	22.0%	-0.6%
30- 44	38.5%	1556	37.0%	1625	37.3%	-1.2%
45-49	13.5%	505	12.0%	524	12.0%	-1.1%
50-54	12.6%	544	12.9%	492	11.3%	-1.3%
over 55	12.8%	679	16.1%	755	17.3%	4.5%
		4206	4206	4353	4353	

A challenge remains the significant proportion of staff in the over 55 age range who may opt for retirement and have increased 4.54% over the 5 years from 2015 (see chart above). This year this increase is the equivalent of 196 staff. However, by proportions across the workforce against both the NHS and the England working population, the LDH has a slightly less ageing workforce population.

3.3 Workforce Gender profile

- **Gender by Grade and Banding** - The overall average ratio of female to male between 2017 and 2019 is circa 80%: 20%. The Trust has been looking at the representation of the female to male to this ratio across the bands since 2017. - As can be seen in the table that follows in bands 1-6 (apart from Band 1), female representation is between 5.3% - 9.8% higher than the workforce 80%, across these lower paid bands.

Gender representation within pay bands between 2017 and 2019										
Year	2017			Mar-18			Mar-19			variation 2017- 19 female %
Grade/ Banding	female		total staff	Female		total staff	Female		total staff	
	no	%		no	%		no	%		
Band 1	10	19.2%	52	13	17.1%	76	15	26.3%	57	7.1%
Band 2	619	87.4%	708	771	86.7%	889	605	86.2%	702	-1.2%
Band 3	212	85.8%	247	268	89.0%	301	280	87.2%	321	1.4%
Band 4	319	88.4%	361	346	87.4%	396	348	85.3%	408	-3.1%
Band 5	675	86.7%	779	704	88.1%	799	727	89.8%	810	3.1%
Band 6	593	90.5%	655	632	86.9%	727	689	87.0%	792	-3.5%
Band 7	330	87.8%	376	347	85.9%	404	361	85.8%	421	-2.1%
Band 8a	81	84.4%	96	88	80.7%	109	98	77.2%	127	-7.2%
Band 8b	30	76.9%	39	32	78.1%	41	38	80.9%	47	4.0%
Band 8c	11	57.9%	19	10	55.6%	18	10	66.7%	15	8.8%
Band 8d	8	66.7%	12	9	60.0%	15	11	61.1%	18	-5.6%
Band 9	3	50.0%	6	1	33.3%	3	1	33.3%	3	-16.7%
Consultant	98	40.2%	244	99	39.4%	251	108	41.1%	263	0.9%
Junior Dr	143	52.4%	273	146	57.0%	256	166	57.4%	289	5.0%
Middle Dr	29	45.3%	64	27	45.0%	60	27	48.2%	56	2.9%
Ad-Hoc (salaries)	7	36.8%	19	15	51.7%	29	12	50.0%	24	13.2%
Total	3161	80.4%	3950	3508	80.2%	4374	3496	80.3%	4353	

In the table above, in terms of the generally lower % representation of females in higher bands, females have increased in Band 8b by 4% to 81% which is more representational, but have notably decreased over the three years in Band 8a to 77%, Band 8d to 61% and Band 9 to 33.3% . Additionally even though Band 8c has increased by 8.8% it is still low female representation at 68%.

- **Gender pay gap – Senior Grades Bands 7 to 9**

As for the last three years, the results are reflective of the national NHS and Trust staff profile of having a majority of female staff across most staff groups. Senior grades increased from 486 in 2015 to 530 in 2016, then to 548 in 2017 and 595 in 2018 and is 548 in 2019. The increase between 2015 and 2019 in senior grades is by 21% or 62 roles.

The overall representation of female to male across senior roles in Band 7 to Band 9 in 2019 is 82.3% which was previously 84.1% in 2015. In the higher Bands representation is from between 33-66.7% which is disproportional to the total of females employed of 80%.

The table below for the period between 2015 and 2019, shows a 21.9% improvement for Band 8b to be able to reach 80.9% in 2019 and a 9.5% increase for 8c but 8c is still only 66.7%.

March 2019 - Gender Pay Gap 2019 – Bands 7-9									change 2015 /2019
AFC Band	Staff gender 2019			% of females					
	Female	Male	Total	2019	2018	2017	2016	2015	
7	361	60	421	85.8%	85.9%	87.8%	87.9%	89.3%	-3.5%
8a	98	29	127	77.2%	82.3%	84.4%	84.3%	82.4%	-5.3%
8b	38	9	47	80.9%	76.7%	76.9%	71.1%	59.0%	21.9%
8c	10	5	15	66.7%	58.8%	57.9%	55.0%	57.1%	9.5%
8d	11	7	18	61.1%	66.7%	66.7%	80.0%	66.7%	-5.6%
9	1	2	3	33.3%	33.3%	50.0%	50.0%	60.0%	-26.7%
Totals	519	112	631	82.3%	83.0%	84.5%	84.3%	84.1%	
				631	595	548			

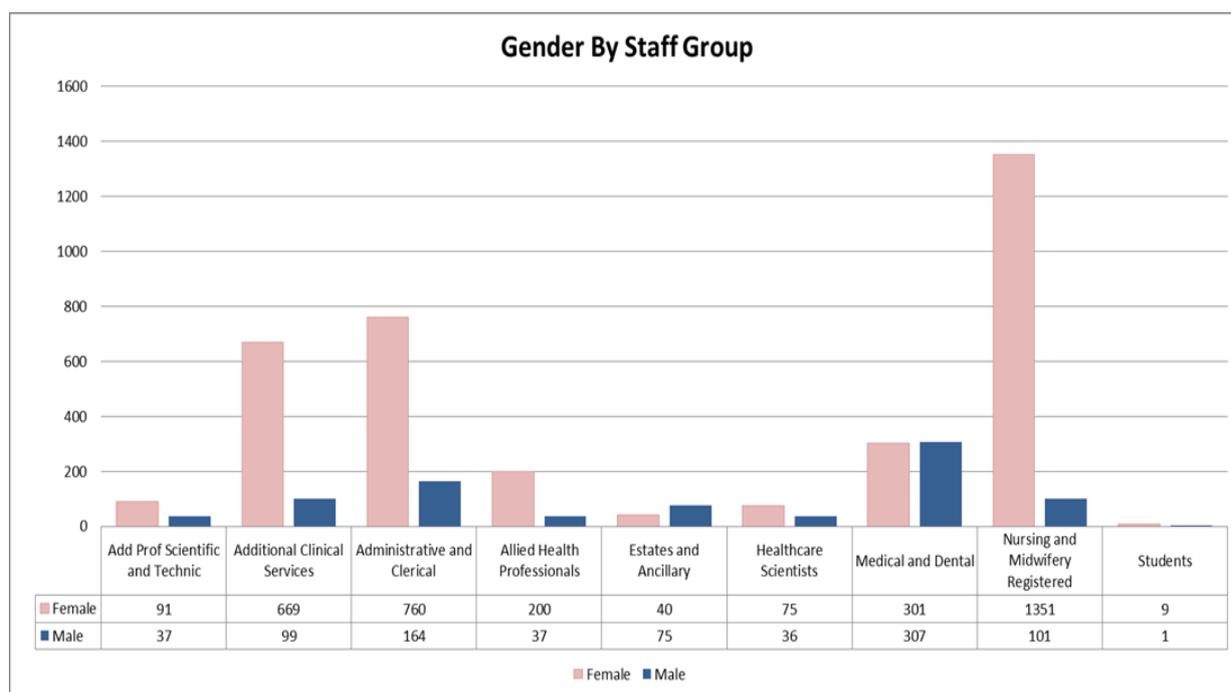
- **Gender by Staff Group -**

In 2019 as for the previous 4 years female staff are in the majority across all staff groups, apart from Estates and Facilities, Medical and Dental staff. There has been a 7% increase in the females in the former group and not much change in the latter since 2015. The male gender balance in Nursing and Midwifery continues to be disproportionate at consistently 7% male.

Gender by Staff group at year end March 2019 (compared to 2015 and 2018)										
Staff Group	Data for 2015				Data 2018		Data 2019 incl. bank staff			
	Fem.	Male	total	Fem %	total	Fem. %	Fem.	Male	total	Fem. %
Add Prof Scientific Tech.	75	31	106	71%	124	68%	91	37	128	71%
Additional Clinical Services	752	114	866	87%	748	87%	669	99	768	87%
Admin Clerical	746	139	885	84%	883	84%	760	164	924	82%
Allied Health Profession	167	34	201	83%	215	83%	200	37	237	84%

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Estates Ancillary	37	93	130	28%	94	36%	40	75	115	35%
Healthcare Scientists	68	31	99	69%	101	70%	75	36	111	68%
Medical Dental	254	308	562	45%	599	50%	301	307	608	49%
Nursing midwifery	1,212	90	1302	93%	1430	93%	1,351	101	1452	93%
Students	8	N/A	8	100%	12	92%	9	1	10	11%
Total	3,319	840	4159		4206		3,496	857	4,353	
	79.8%	20.2%					80.2%	19.8%		



Gender Pay Gap Reporting

The first report was published and transparently shared on the LDH website in March 2018 for the data in relation to the year ended March 31st 2017. The 2nd years report published in March 2019 for data year ended March 31st 2018 is now also on the website.

3.4 Workforce by Religion, Belief or Non-Belief

A significant amount of staff in 2019 (34.2%) still have not disclosed their belief or non-belief which affects the value of the data. Since 2015 this decreased 7% from 41.2%. However, 2019 is the first year it has slipped back from an improvement (by 2.45%). Sikhism, Buddhism, Judaism and Jainism were previously in the “other” category but are listed since 2018.

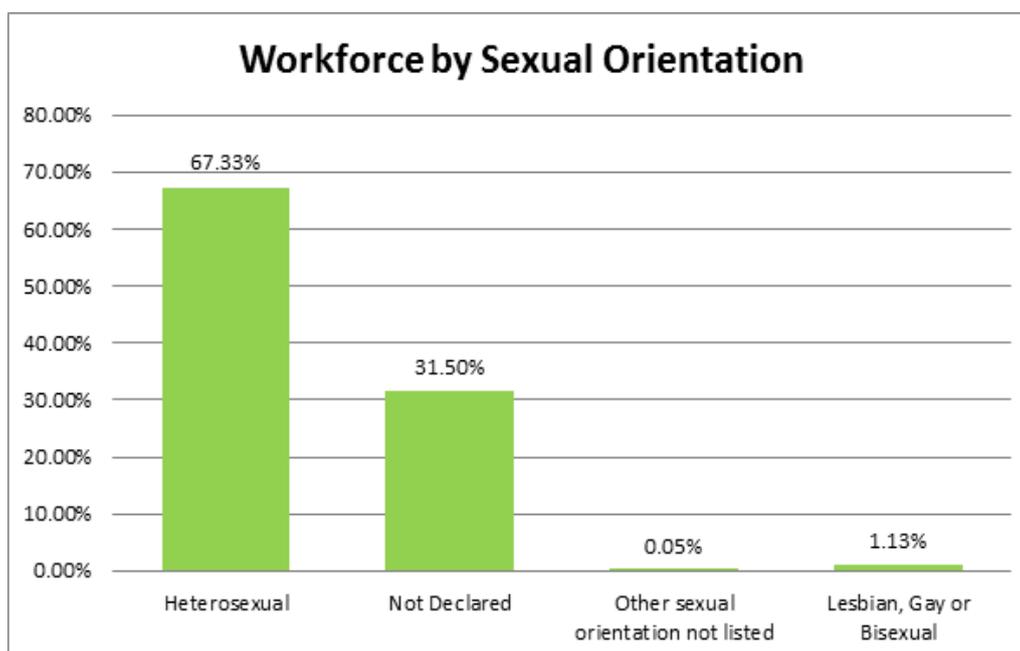
Of note is that Islam has risen 2.7% (by 139 staff) and atheism 1.9% (or by 108 staff).

Workforce by Religion - Belief - Non Belief year ending March 2019									
Declaration	2015	2015	2016	2017	2018	2019	2019	Varies 2015 to 2019	
	%	no	%	%	%	%	no	%	no
Christianity	40.2%	1560	42.2%	43.3%	43.3%	40.9%	1779	0.7%	219
Not disclosed	41.2%	1599	37.1%	33.7%	31.8%	34.2%	1489	-7.0%	-110
Islam	4.6%	178	5.1%	5.8%	7.2%	7.3%	317	2.7%	139
Atheism	5.1%	198	6.3%	6.9%	6.8%	7.0%	306	1.9%	108
Other	6.7%	260	7.2%	7.8%	8.2%	6.6%	288	-0.1%	28
Hinduism	2.2%	85	2.2%	2.6%	2.7%	2.7%	118	0.5%	33
Sikhism					0.5%	0.5%	21		
Buddhism					0.4%	0.4%	17		
Judaism					0.2%	0.2%	10		
Jainism					0.2%	0.2%	8		
	3880					4353			

3.5 - Workforce by Sexual Orientation

Non declaration of sexual orientation has moved from 41.5% of staff in 2015 to 31.5% in 2019 - just a 10% improvement in 5 years. However, as staff increased too, it means that 1371 staff have not declared. This is high and a similar lack of declaration statistic to that of belief. In both categories improvements to the declaration level are needed including improving how this information is collected. There is still a very small number of declared LGBTQ staff and most declaration increases heterosexual.

Workforce by Sexual Orientation - Year end Mar 2019						staff 2019	change
Declaration	2015	2016	2017	2018	2019		
Heterosexual	57.5%	62.0%	65.2%	67.5%	67.3%	2931	9.8%
Not Declared	41.5%	37.0%	33.7%	31.4%	31.5%	1371	-10.0%
LGBTQ	1.0%	1.1%	1.2%	1.1%	1.2%	51	0.2%
						4353	



3.6 Workforce by Ethnicity

The Trust aligned ethnicity data to the **Workforce Race Equality Standard WRES** and NHS National Requirements in 2016 so that when recording the proportion of Black and Ethnic Minorities BME and White British, the definitions for these are that:

- White” staff include White British, Irish and Any Other White
- Black and Minority Ethnic” BME includes all others except “unknown” or “not stated.”¹

Based on this definition, the data for 2015-2019 shows: White staff have proportionally decreased by 4.33% to 54.5% of the workforce, and that BME increased by 5.47%, to 43% of the workforce. Only 2.3% of staff (102) have not declared their ethnicity (there is more comfortable disclosure of ethnic origin than of belief or sexual orientation).

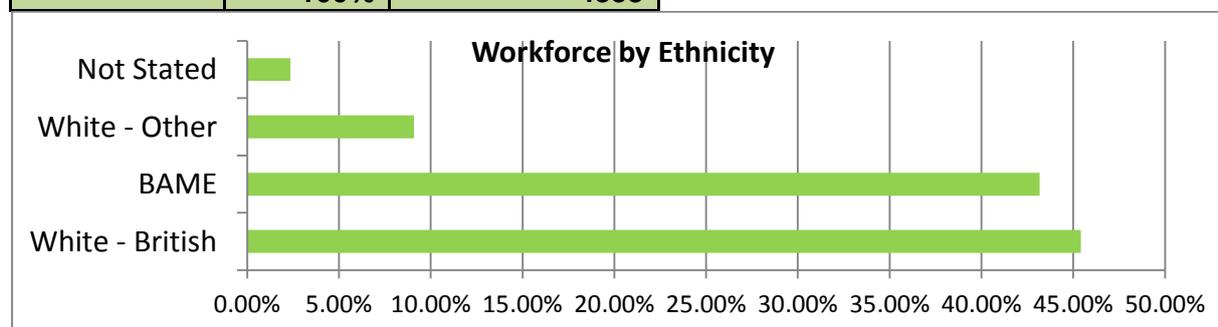
Workforce by Ethnicity Year end March 2019								Variation 2015 - 2019	
Declaration	2015		2016	2017	2018	2019		2015 - 2019	
	%	no	%	%	%	%	no	%	no
White	58.8%	2281	59.8%	57.6%	56.0%	54.5%	2371	-4.3%	90
BME	37.7%	1463	37.7%	38.9%	40.0%	43.2%	1879	5.5%	416
Not Declared	3.5%	136	2.5%	3.5%	4.0%	2.3%	102	-1.2%	-34
	100%	3880	100%	100%	100%		4353		

Accounting for White Ethnicities

NHS England and the WRES team leaves the decision about measuring White Ethnicities to be made locally. As one of the most diverse Trusts in the UK we are starting to collect White Ethnicity Data. This shows that 395 staff from the White category are White other leaving White staff making up 45.5% of the workforce and Black and ethnic minorities forming 52.3%.

Workforce by Ethnicity March 2019		
	%	no
White	45.5%	1978
White Other	9.1%	395
BME	43.2%	1879
Not Declared	2.3%	100
	100%	4353

395 staff are from a White other / White Ethnic minority - This means:
IN 2019 White staff make up 45.5%
And:
Black and ethnic minorities including White minority groups now make up 52.3% of the workforce
2.3% (100) staff still need to declare



¹ These definitions meet the national reporting requirements Ethnic Category in the NHS data Model / Dictionary, and the Health and Social care Information Centre Data as based on the 2001 ONS Census categories for ethnicity. Any significant proportion of ‘not stated’ should be addressed – this may affect the reliability of data as small numbers may make a significant difference to outcomes. If groups are a significant minority and may be at risk of less favourable treatment this should be explored.

Workforce Ethnicity Compared to Patient Attendance Ethnicity

In the chart that follows, the workforce in 2019 has good BME representation against the patient population. This has not been broken down into the different BME patient / staff groups to see how balanced the representation is across these. Also, as can be seen from maternity and healthy baby data, diversity will increase. White ethnicity has been added to the lower part of the chart for 2019 and with 2015 as comparator.

(1) Ethnicity Profile Year Ending March 2019 across services / workforce						
Ethnicity	Emergency	Inpatient	outpatient	maternity	Healthy babies	Workforce
White	62.6%	67.9%	68.2%	56.5%	52.0%	54.5%
BME	28.7%	26.3%	27.4%	42.3%	47.7%	43.2%
Unknown	8.7%	5.8%	4.4%	1.3%	0.3%	2.3%
(2) Ethnicity Profile Year Ending March 2019 with White Ethnicity						
White	52.6%	59.6%	60.1%	42.5%	38.3%	45.5%
White Ethnicity	10.0%	8.2%	8.1%	13.9%	44.7%	9.1%
BME	28.7%	26.3%	27.4%	42.3%	16.4%	43.2%
Unknown	8.7%	5.8%	4.4%	1.3%	0.6%	2.3%
Numbers	107998	95836	408128	19535	2519	4353
(3) Ethnicity Profile Year Ending March 2015						
White	53.0%	62.2%	61.7%	42.4%	38.9%	49.8%
BME	27.6%	24.1%	24.3%	40.1%	47.7%	37.7%
White Other	9.5%	7.3%	7.1%	17.0%	13.1%	8.9%
Unknown	9.9%	6.5%	6.9%	0.5%	0.3%	3.5%

Workforce Ethnicity in the Trust compared to that in the Workforce in England and across the NHS in 2018 - As can be seen from the chart below, BME groups are higher in the Trust's workforce than for England by 27% and than the NHS by 21%.

This is particularly significant for the Asian ethnicities at 15% and 13% respectively, and Black ethnicities at 8% and 6% respectively. The NHS Employer's data below has a Chinese category, but the Trust also have a similar significant number of Filipino as a single group also.

Ethnicity in the workforce England, the NHS and the Trust in 2018	Trust Variation 2018				
Ethnicity	England	NHS	Trust	to England	to NHS
White	86%	77%	56%	-30%	-21%
Black / Black British	3%	5%	11%	8%	6%
Asian / Asian British	7%	9%	22%	15%	13%
Mixed	1%	2%	2%	1%	0%
Chinese	1%	1%	1%	0%	0%
Any other ethnic group	1%	2%	4%	3%	2%
Not stated / unknown	0%	5%	4%	4%	-1%
BME	13%	19%	40%		

The Trust was 21-30% more diverse than the workforce in the NHS / England in 2018.

The Trust is looking at the data for key BME groups as detailed below:

Workforce Asian Ethnicity

The Asian workforce continues at a higher rate than the total growth rate of the workforce. Our total workforce increased 3.38% last year (equivalent to 147 staff) and the Asian workforce grew by 13.5% or 131. In 2016 Asian staff formed 21% of our workforce, in 2018 23% and then 25.2% of our workforce this year. This latest proportional increase of 2% in the workforce means that a quarter of all staff are now Asian. (If Filipino and Chinese Asian were added to Asian group the group would be 27% of the workforce this year).

Workforce Asian Ethnicity year Ending March 2019 compared to 2016						
Ethnic Origin	2019			2016		
	Total	% all staff	% in group	Total	% all staff	% in group
Indian	443	10.2%	40.3%	352	9.2%	43.9%
Asian other	299	6.9%	27.2%	228	6.0%	28.5%
Pakistani	235	5.4%	21.4%	146	3.8%	18.2%
Bangladeshi	90	2.1%	8.2%	52	1.4%	6.5%
Mixed - White & Asian	26	0.6%	2.4%	23	0.6%	2.9%
Asian Unspecified	6	0.1%	0.5%	0	0.0%	0.0%
TOTAL	1099	25.20%		801	21.01%	100.0%

Workforce Black Ethnicity

This group now forms 12% of our workforce with the majority African at 6.5%, and Caribbean 3.6%. The group grows at a much slower rate than the Asian group 5.4% as opposed to 13.5% and a 0.02% growth (27 staff) as a proportion of the workforce. Within this group African is 54% (a 4.2% increase from 2016) and Caribbean 30% (a 7% decrease from 2016).

Workforce Black Ethnicity year Ending March 2019							2018 % in group
Ethnic Origin	2019			2016			
	Total	% in staff	% in group	Total	% in staff	% in group	
Black or Black British – African	281	6.5%	53.7%	204	5.4%	49.5%	52.6%
Black or Black British – Caribbean	155	3.6%	29.6%	151	4.0%	36.7%	32.3%
Mixed - White & Black Caribbean	35	0.8%	6.7%	27	0.7%	6.6%	6.7%
Black or Black British - Any other Black background	33	0.8%	6.3%	17	0.4%	4.1%	5.2%
Mixed - White & Black African	17	0.4%	3.3%	13	0.3%	3.2%	2.6%
Black Unspecified	2	0.0%	0.4%				0.6%
	523	12%		412	10.8%		
			IN 2018	496	11.8%		

Workforce and any other Ethnic Group

This is the smallest group at 5.9% of the workforce this year but the group has grown by 16.8% in the last year with a further 27 staff, 24 of whom were Filipino.

Workforce BAME Ethnicity Other year Ending March 2019							2018 % in group
Ethnic Origin	2019			2016			
	Total	% in staff	% in group	Total	% in staff	% in group	
Any Other Ethnic Group	140	3.2%	54.5%	123	3.2%	54.9%	59.5%
Filipino – Asian	56	1.3%	21.8%	45	1.2%	20.1%	14.5%
Mixed - Any other	30	0.7%	11.7%	0	0.0%	0.0%	13.6%
Chinese – Asian	28	0.6%	10.9%	33	0.9%	14.7%	11.4%
Other Specified	3	0.1%	1.2%	23	0.6%	10.3%	0.9%
	257	5.90%		224	5.87%		
			In 2018	220	5.22%		

4.9 Nursing and Midwifery NMW by Ethnicity

NMW Numbers - The NMW workforce is a significant proportion of our frontline staff for patients, their carers or visitors. The level of staff has increased by 11.17% or by 473 staff since 2015, an average of 2.79% or 94 staff a year. (See page 4 for patient increases).

There is a better level of declaration for NMW staff than staff in general at 98.5%. Non-declaration was 3.2 last year and 1.5% this year which equates to 22 staff. From the chart below, since 2015, White British have decreased in proportion by 6.2% whilst Asian and Black have increased by 10.8% (8.2% and 2.6% respectively).

2019 Workforce - Nursing and Midwifery by Ethnicity								2019 compared to 2015 by number / %	
Declaration	2015	2019	2015	2016	2017	2018	2019		
White British	618	594	47.1%	47.1%	44.5%	45.9%	40.9%	-24	-6.2%
Asian	235	379	17.9%	17.3%	21.1%	19.7%	26.1%	144	8.2%
Black	150	203	11.4%	10.8%	12.1%	12.8%	14.0%	53	2.6%
White Other	149	164	11.4%	13.5%	12.8%	9.7%	11.3%	15	-0.1%
Other	105	69	8.0%	7.3%	5.2%	6.8%	4.8%	-36	-3.2%
Not stated	32	22	2.4%	2.1%	2.6%	3.2%	1.5%	-10	-0.9%
Mixed	23	21	1.8%	1.9%	1.8%	1.8%	1.4%	-2	-0.4%
Numbers	1312	1452							
Increase in staff no.		140							
Increase in staff %		10.7%							

For the WRES - BME to White staff ratio between 2015 and 2019 has a proportional lowering of White by -6.3% (92 staff) against an increase in BME of 7.2% (105 staff). The ratio is now White 52.2%: BME 46.3%. When White Ethnicities are added to BME the ratio becomes 40.9% White and 57.6% BME (1.5% not stated).

2019 Workforce - Nursing and Midwifery by Ethnicity								Change 2019 to 2015 by Number / %	
Declaration	2015	2019	2015	2016	2017	2018	2019		
White	767	758	58.5%	60.6%	57.3%	55.6%	52.2%	-9	-6.3%
BME	513	672	39.1%	37.2%	40.1%	41.2%	46.3%	159	7.2%
Not stated	32	22	2.4%	2.1%	2.6%	3.2%	1.5%	-10	-0.9%
Total staff	1312	1452						140	

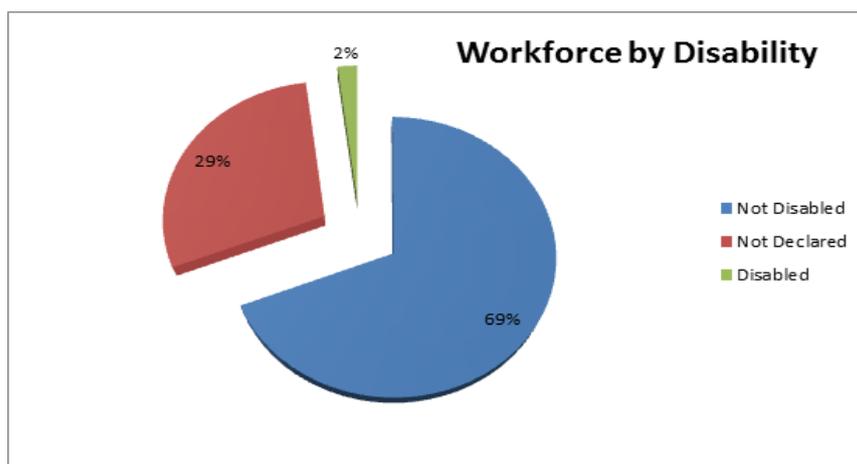
3.7 Workforce by Disability

Year-end 31st March 2019 is the first year for data collection for the new Workforce Disability Equality Standard WDES. The Trust has been reporting on areas of disability data since 2015.

Declaration - As can be seen in the table below, by March 2019 staff declaration of disability status has improved by 21% since 2015 leaving 29% who have not declared as opposed to the highest level of 56.9% in 2016. Of the declarations, the non-disabled group has increased by 21% and the disabled group by 0.50% which shows more staff declaring but not with a disability.

Workforce by Disability 2019 (and compared to 2015 to 2018)								Varies to 2015	
Status	2015	2015 staff	2016	2017	2018	2019	2019 staff	%	Staff No.
Disabled	1.5%	58	1.6%	2.0%	2.2%	2.0%	78	0.5%	19
Not Disabled	47.7%	1851	41.4%	62.4%	67.5%	69.0%	2677	21.3%	826
Not declared	50.8%	1971	56.9%	35.6%	30.4%	29.0%	1125	-21.8%	-846
		3880					4353		

The level of staff with a disability is anticipated to be much higher than 2% in terms of national working population averages. The 29% non-declaration does not give the Trust accurate data for disability within the workforce, or assist in detection of potential less favourable treatment, or the handling of enabling initiatives such as reasonable adjustments.



Disability declaration By Band – the lower the band the slightly better the declaration is. The worst declaration levels are in the highest bands and groups, for instance within consultants 44.5%, Middle Doctors and Ad-hoc 50%.

Category	DISABILITY DECLARATION BY BAND 2019				Declaration %	
	NO	Not declared	Yes	Total	% yes	% non-declared
Ad-Hoc	12	12		24	0.0%	50.0%
Band 1	41	15	1	57	1.8%	26.3%
Band 2	533	154	15	702	2.1%	21.9%
Band 3	226	83	12	321	3.7%	25.9%
Band 4	281	114	13	408	3.2%	27.9%
Band 5	581	211	18	810	2.2%	26.0%
Band 6	574	193	25	792	3.2%	24.4%
Band 7	245	173	3	421	0.7%	41.1%

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Band 8A	83	43	1	127	0.8%	33.9%
Band 8B	31	14	2	47	4.3%	29.8%
Band 8C	10	4	1	15	6.7%	26.7%
Band 8D	13	4	1	18	5.6%	22.2%
Junior	198	90	1	289	0.3%	31.1%
Middle	28	28		56	0.0%	50.0%
Band 9	3	0		3	0.0%	0.0%
Consultant	146	117		263	0.0%	44.5%
TOTALS	3005	1255	93	4353		

3.8 Workforce by Partnership Status

Marriage / Civil Partnership - The protected characteristic is marriage or civil partnership. Albeit a small proportion of the workforce, between 2015 and 2019, civil partnerships have increased from 4 to 35. This is also an indicator of LGBTQ changes and confidence at declaring same sex partnerships. Out of the total workforce at March 2018, the largest group remains married at 52.9% followed by single at 36.9%. The level of non-declaration is 3.6% which apart from being 5.2% in 2016 has been fairly static.

Workforce by Partnership and Marital status 2019 (compared to 2015)						
Declaration	2015	2019	Number change 2015-19	2015 % of total staff	2019 % of total staff	% change 2015-19
Married	2150	2301	151	55.4%	52.9%	-2.5%
Single	1335	1606	271	34.4%	36.9%	2.5%
Divorced	177	194	17	4.6%	4.5%	-0.1%
Unknown	134	157	23	3.5%	3.6%	0.1%
Civil partnership	4	35	31	0.1%	0.8%	0.7%
Legally separated	49	35	-14	1.3%	0.8%	-0.5%
Widowed	31	25	-6	0.8%	0.6%	-0.2%
TOTAL STAFF	3880	4353				

3.9 Workforce by Pregnancy and Maternity Leave, also Paternity Leave

As for the patients / Maternity division numbers fluctuate annually. Reporting on workforce employee maternity leave data has been since 2015 with circa 3-7% of the female workforce on maternity each year. Reporting on Paternity leave started in 2017 when the number on paternity leave who took paternity leave around the birth were 21 (2.7%) of the male workforce. This year the number and percentage is slightly less.

Maternity / Paternity Leave 2019 (comparison 2015 - 2018)						2019 ratio %	All staff gender
Category	2015	2016	2017	2018	2019		
Maternity Leave female	93	206	223	197	208	90.8%	80%
Paternity Leave (male)	n/a	n/a	21	19	21	9.2%	20%
Grand Total	93	206	244	216	229		

The maternity / paternity leave taken by genders is not related but there is a lower proportion of paternity leave taken.

Ethnicity in Maternity and Paternity Leave - In terms of ethnicity a higher proportion of BME staff are taking maternity / paternity leave in the last 3 years than for the general workforce as per BME to White Staff ratios. This is particularly the case for male paternity leave. From the data there is a higher proportion of BME staff taking paternity leave than in the maternity data by circa 13%.

Ethnicity in Maternity and Paternity 2019 (compared to 2018 and 2017)								
Ethnicity	maternity 2017 / 2018				paternity 2017/ 2018			
	2019	2019%	2018%	2017%	2019	2019%	2018%	2017%
White	99	47.6%	49.7%	50.2%	5	23.8%	42.1%	38.1%
BME	107	51.4%	49.2%	48.4%	16	76.2%	57.9%	61.9%
Not stated	2	1.0%	1.0%	1.4%	0	0.0%	0.0%	0.0%
Total	208		197	223	21		19	21

Disability and Maternity / Paternity leave - There is high non declaration in maternity and paternity leave with some disability declaration in the 3 years. Maternity (female) are 10% more likely to declare than Paternity (male)/

Maternity / Paternity by Disability 2019 (2018-2017)					
Category		2019%	2019 no.	2018 no.	2017 no.
Maternity	No	83.7%	174	151	164
	Not Declared	13.0%	27	40	51
	Yes	2.4%	5	6	6
	undefined	1.0%	2	0	2
Total			208	197	223
Paternity	No	76.2%	16	17	18
	Not Declared	23.8%	5	2	2
	yes	0.0%	0	0	1
Total			21	19	21
Total			229	216	244
Total number		190	83.0%		
Total not declared		32	14.0%		
total Yes		5	2.2%		
Total undefined		2	0.9%		

3.10 Workforce and Discipline –

Disciplinary and Gender Year Ending March 2019 and compared to Years ending March 2015 to March 2018						
Year end	No of cases	Case Female	Case Male	Trust Total Female	Trust Total Male	Variation - % males
2015	24	70.8%	29.2%	79.6%	20.4%	9.2%
2016	15	80.0%	20.0%	81.0%	19.0%	1.0%
2017	38	71.0%	29.0%	81.0%	19.0%	10.0%
2018	37	56.8%	43.2%	81.0%	19.0%	24.2%
2019	37	67.6%	32.4%	80.3%	19.7%	12.7%
	151					

Gender – From the table, as for 2018 there were 37 cases in year ending March 2019.

This means that against a total workforce of 4353 only 0.85% were in a disciplinary process.

The ratio of male to female at 32.4% to 67.6% is more proportionate than

in 2018, however, over the 5 years males are more likely to be in a disciplinary process than females.

Ethnicity - From the chart below, this year and last year were the times within the 5 years that BME were more likely to be in a disciplinary process than White Staff. Last year showed an overall better average variation ratio for BME staff over the 4 years and a better result for 3 out of 4 years. This year showed a 2.3% difference between BME and White.

Discipline and Ethnicity Year Ending March 2019 and compared to Years ending March 2015 to 2018								Variation to totals		BME Likely hood
Year end	BME cases	White Cases	Not stated cases	% BME case	% White case	Total Trust BME	Total Trust White	BME case	White Case	
2015	NA	NA	NA	37.0%	59.8%	37.7%	58.8%	-0.7%	1.0%	less
2016	NA	NA	NA	33.3%	66.6%	37.7%	59.8%	-4.4%	6.8%	less
2017	13	24	1	34.2%	63.2%	38.9%	59.8%	-4.7%	3.4%	less
2018	16	18	3	43.2%	48.6%	40.0%	56.0%	3.2%	-7.4%	more
2019	18	17	2	48.6%	45.9%	43.2%	54.6%	5.4%	-8.7%	more
TOTAL	47	59	6	39.3%	56.8%	39.5%	57.8%	-1.1%	-4.8%	
2017 to 2019 totals above only 112			Total Averages over the 5 years above							

Asian and Black form the 2 largest BME groups in the workforce with Asian 25% and Black 12% However, over the last 2 years is 12% Asian and 18% Black are represented in cases. This shows that African and Caribbean Staff are more likely to be in a disciplinary process than Asian or White staff in the last 2 years. This will be monitored for any trends developing.

Discipline and Age - represented by staff in cases and in workforce age bands

For age, in 2019 15 cases were under, and 22 above age 35 which is very similar to results in 2017 and 2018. However, from the tables below, in 2017 and 2018 there was much less likelihood of staff under the age of 25 being disciplined (-11 to -14%) and in 2019 it is now 7.1% more likely and proportionally there are fewer staff in this age group as they have moved from 21.9% to 9.1% of the workforce.

Discipline and Age Bands in 2019			
Age bands	Cases	Case %	All staff %
18 - 25	6	16.2%	9.1%
26 - 35	9	24.3%	28.1%
36 - 45	11	29.7%	24.6%
46 - 55	6	16.2%	23.7%
56+	5	13.5%	14.6%
TOTAL	37		

In 2017 and 2018 the older the staff member the more likelihood of a disciplinary case, especially if over 55 where it was 8-10% more likely. In 2019, this has reduced to being more proportional to the workforce % of that group.

Discipline and Age 2017 to 2019									
Bands	2017			2018			2019		
	cases	all staff	varies	cases	all staff	varies	cases	all staff	varies
18 - 25	7.9%	21.9%	-14%	10.8%	21.9%	-11%	16.2%	9.1%	7.1%
26 - 35	36.8%	37.0%	-0.1%	32.4%	37.0%	-4.6%	24.3%	28.1%	-3.8%
36 - 45	15.8%	12.0%	3.8%	16.2%	12.0%	4.2%	29.7%	24.6%	5.1%
46 - 55	13.2%	13.5%	-0.3%	16.2%	12.9%	3.3%	16.2%	23.7%	-7.5%
55+	26.3%	15.7%	10.6%	24.3%	16.1%	8.2%	13.5%	14.6%	-1.1%
								4353	
ratio of disciplines to ratio of band is higher									

Disability and discipline – across the 5 years 2015 to 2019, no staff in the disciplinary process have declared a disability.

3.11 Workforce by Grievance

Grievance was added to data analysis in 2016. The 15 cases over the 3 years between 2016 and 2018 averaged at 73.3% female and 26.7% male which against the workforce female to male ratio of circa 81% to 19% gives male a higher likelihood of raising a grievance.

There has been 15 grievances in 2019 which is a large increase as there were 15 in total over the previous 3 years. The high number of females in 2019 has shifted the average and made it more likely for women to raise a grievance. Over the four years it is still more likely that White staff will raise a grievance and no cases have disclosed a disability.

Workforce Equality Details for Grievance 2019 (compared to 2016-2018)								
Cases		Gender			Ethnicity			Disability
Year end	No	female	male	% male	White	BME	Unknown	
Mar-16	5	5	0	0.0%	60.0%	40.0%	0.0%	not disclosed
Mar-17	8	4	4	50.0%	50.0%	37.5%	12.5%	not disclosed
Mar-18	2	2	0	0.0%	100.0%	0.0%	0.0%	not disclosed
Mar-19	15	14	1	6.7%	60.0%	40.0%	0.0%	not disclosed
Total	30	25	5		68%	29%	3%	
		83.3%	16.7%					

In the previous 3 years, all staff raising a grievance were aged 36 plus. This year the age bands warrant more analysis. As can be seen in the chart below there were none in the 36-45 group but more likelihood in the over 46 to 56 plus groups and in the 26-35 age group.

Grievances and Age in 2019				
Age band	Cases	% case load	% Staff	Varies
18 - 25	1	6.7%	9.1%	-2.4%
26 - 35	6	40.0%	28.1%	11.9%
36 - 45	0	0.0%	24.6%	-24.6%
46 - 55	5	33.3%	23.7%	9.6%
56+	3	20.0%	14.6%	5.4%
TOTAL	15			

3.12 Promotions by Year ending March 31st 2019

In 2015, 624 promotions were reported by ethnicity to support the WRES but since 2016 broader areas have been considered. This is a difficult area to get exact information from due to the nature of ESR. Most workforce data does not include bank employees but this data does and will affect accuracy and data value (see 2017 report for more detail).

By Gender – as can be seen in the table below, in 2019 there have been 262 promotions with a female to male ratio of 86.3% to 13.7%. The average workforce female to male ratio between 2015 and 2019 has been 80%:20%, and so the only year there has been a more favourable result for male was in 2018 when this 20.2% male. Other years are between 10.7 to 13.7% male promotions. Any disproportionate results can warrant further exploration.

Promotions by Gender 2019 compared to 2016, 2017 and 2018								
Gender	2019	%	2018	%	2017	%	2016	%
Female	226	86.3%	178	79.8%	556	89.1%	349	89.3%
Male	36	13.7%	45	20.2%	68	10.9%	42	10.7%
Total	262		223		624		391	

From the data below, it seems that most promotions occur in Nursing and midwifery, however, pre-registration nurses are upgraded to Band 5 once they receive their pin. Apparently this amounted to 103 staff in 2019. The adjustment for this is seen in the last 2 columns.

Promotions by Staff Group 2019 compared to 2018					Adjustment 2019	
Category	2019		2018		number	%
	Number	%	Number	%		
Nursing and Midwifery Registered	182	69%	145	65%	79	49.7%
Additional Clinical Services	21	8%	19	9%	21	13.2%
Administrative and Clerical	21	8%	16	7%	21	13.2%
Allied Health Professionals	19	7%	18	8%	19	11.9%
Add Prof Scientific and Technic	8	3%	9	4%	8	5.0%
Healthcare Scientists	5	2%	7	3%	5	3.1%
Medical and Dental	5	2%	6	3%	5	3.1%
Estates and Ancillary	1	0%	2	1%	1	0.6%
Students	0	0%	1	0%	0	0.0%
Grand Total	262		223		159	

Promotions by religion, belief or no belief - Christianity is the highest declared category in promotions but has a trend of decline, moving from 59.3% in 2017 to 41.2% in 2019 (a decrease of 18%). Across the workforce in 2017 and 2019 Christianity was at 43% and 41% respectively. The next highest category in 2017 and 2019 across both the workforce and promotions was non-declared at circa 34-35% which is more than a third of staff and really affects the value of this data. As for belief across the workforce Atheism is circa 9%, Islam circa 7% with a trend for increasing.

Promotions by Belief or Non Belief in 2019 compared to 2017						
Belief	Total 2019	2019 - %	all staff 2019	Total 2017	2017 - %	all staff 2017
Christianity	108	41.2%	40.9%	370	59.3%	43.3%
Not stated	92	35.1%	34.2%	125	20.0%	33.7%
Atheism	23	8.8%	7.0%	40	6.4%	7.0%
Islam	19	7.3%	7.3%	35	5.6%	5.8%
Other	17	6.5%	6.6%	44	7.1%	7.8%
Hinduism	3	1.1%	2.7%	4	0.6%	2.6%
Buddhism	0	0.0%	0.4%	6	1.0%	0.0%
Total	262	100%	99%	624	100%	100%

Promotions and ethnicity

Non- declaration of ethnicity is low at 2% for all staff and 2% in promotions data. This adds good value to the data and analysis. BME staff has a trend for increasing in the workforce.

BME have also increased in proportion in promotions to be over represented in this, for instance in 2019 BME form 43% of the workforce and 57% of promotions, White Ethnicities form 9% of the workforce and 11% of the promotions. White staff form 45% of the workforce and 30% of promotions.

As can be seen above under gender and staff groups, it seems that most promotions occur in Nursing and midwifery but pre-registration nurses are upgraded to Band 5 once they receive their pin. Apparently this amounted to 103 (2.4% of all staff) in 2019 and 39.3% of promotions.

Promotions by Ethnic Origin in 2019 (compared to 2018, 2017, 2016)									all staff ethnicity 2019
Ethnicity	2019	%	2018	%	2017	%	2016	%	
White	79	30%	95	43%	289	46%	228	58%	45%
White other	28	11%	32	14%	72	12%	15	4%	9%
BME	150	57%	71	32%	251	40%	145	37%	43%
Not stated	5	2%	25	11%	12	2%	3	1%	2%
	262	100%	223	100%	624	100%	391	100%	4353

Promotions by Ethnic Origin in 2019 (and compared to 2018, 2017 and 2016)									all staff ethnicity 2019
Ethnicity	2019	%	2018	%	2017	%	2016	%	
White	79	30%	95	43%	289	46%	228	58%	45%
White other	28	11%	32	14%	72	12%	15	4%	9%
Black or Asian	116	44%	59	26%	179	29%	98	25%	37%
Mixed	7	3%	6	3%	17	3%	2	1%	
Any other Group	27	10%	6	3%	55	9%	45	12%	6%
Not stated	5	2%	25	11%	12	2%	3	1%	2%
	262		223		624		391		4353

<i>Asian and Asian Mixed</i>	72	27%
<i>Black and Black Mixed</i>	49	19%

25%
12%

121

Promotions by Sexual Orientation - The level of non-declaration is high at 28%, which affects the value of this data. Also the LGB group at 1.9% declaration is low against national averages. Declaration levels need to be improved.

Promotions by Sexual Orientation	Number	%
Heterosexual or Straight	184	70.2%
Not stated	73	27.9%
Gay or Lesbian	3	1.1%
Bisexual	2	0.8%
Grand Total	262	

Promotions by Length of Service

Again data in the first 2 years will have been affected by the 103 pre-registration nurses upgraded to Band 5 once they receive their pin (103 or 2.4% of all staff in 2019, and 39.3% of the promotions).

Promotions by Length of service in 2019					% in 2018
Years of service	Headcount	%	%	%	
>1	109	41.6%	216 or 82.4%	174 or 66%	62%
1-2 years	64	24.4%			
2-3 years	22	8.4%			
3-4 years	13	5.0%			
4-5 years	8	3.1%	25 or 9.5%	43 or 16.4%	20%
5-6 years	9	3.4%			
6-7 years	6	2.3%			
7-10 years	10	3.8%	21 or 8%		13%
10-15 years	10	3.8%			
15-20 years	4	1.5%			
Over 20 Years	7	2.7%			2%
Grand Total	262				

Promotions by age

In 2019 6.01% of the total workforce were promoted with the majority of these under age 45 at 86.3% (with the majority of workforce within this age range at 56.4%). Those aged 45 upwards are 24% of the workforce with only 12.6% of promotions and likelihood of promotion decreasing with age. Promotions for Under 30s are 47%.

Last year in 2018 5.3% of the total workforce were promoted with the majority of promotions under age 45 at 86% (with the majority of staff within this age range at 70%). Those aged 45 upwards are 30% of the workforce are and have only 14% or promotions with the likelihood of promotion decreasing with age. This was a large shift for this group from the 37% in 2017 and the 35% in 2016. There was also a corresponding large shift in the under 30's group which moved from 16-20% previously to 46% this year. It would help if the way in which age bands are defined and recorded for the workforce and for promotions match.

Promotions by Disability

This was a new category for the report in 2018. In 2018 non declaration was high at 34%, this year it is 15.6% which is much improved. 5 have declared a disability which shows some confidence in doing so.

Promotions by Disability in 2018 and 2019				
category	2019		2018	
	number	%	number	%
No	216	82.4%	141	63%
Not Declared	41	15.6%	76	34%
Yes	5	1.9%	6	3%
Total	262		223	

3.13 Starters and Leavers 2015 to 2019

Starters and Leavers 2015 to 2019						
Category	2015	2016	2017	2018	2019	2020
Starters	762	831	793	1121	809	
Leavers	629	989	789	757	807	
Staff no year end	3880	3813	3950	4206	4353	
staff number previous year *		3880	3813	3950	4206	4353

* staff number is at March 31st the previous year

A number of staff were part of a TUPE transfer to a service contract in 2016

In 2019, the starters at 809 and leavers at 807 were at the most balanced in the 5 year period. 2018 had seen the highest level of starters at 1121 against one of the lowest levels of leavers at 757 staff. Leavers and starters by age band show more incoming than out-going by the ages of 20 to 35 and more outgoing than incoming between the ages of 36 to 71.

Leavers and Starters 2019			
Bands	Leavers	starters	Varies
under 20	13	28	15
21-25	112	171	59
26 -30	163	204	41
31-35	119	123	4
36-40	111	106	-5
41-45	72	66	-6
46-50	52	39	-13
51-55	57	24	-33
56-6	51	33	-18
61-65	41	14	-27
66-70	14	1	-13
71+	2		-2
	807	809	2

3.14 Starters

Starters in year ending March 2019 amounted to 809 staff.

Starters by gender – This was a new addition to the report in 2017 to start to capture data for Gender reporting requirements. With workforce female to male ratio now at 81%:19% (circa 80%:20% in the last few years) it is good to encourage a better ratio of male starters. In 2019 the male ratio for starters was 26.2%. The average in the last 3 years is 25.9%

Starters - Gender	2019	2019%	2018%	2017%	Leavers 2019 by %
Female	597	73.8%	77.3%	71.3%	75.2%
Male	212	26.2%	22.7%	28.8%	24.8%
	809				807

Starters by age band

As can be seen in the chart below, starters are more likely to be under the age of 45 at 83.8% in 2018 and 86.3% in 2019 and these form 70.9% and 61.8% of the workforce respectively in these years.

Starters at age 46 and over totalled 16.1% in 2018 and 13.7% in 2019 and these formed 29% and 38.3% of the workforce respectively in these years.

There has been a large shift in the workforce under 25 group in terms of these being 21.9% of the workforce in 2018 and 9.1% in 2019 (21% less). Also the 26 to 35 age group decreased by 10%. There has been a 12 % increase in the workforce of those aged between 36 and 55. **Of interest are the starters in the 56 to 70 age group which average 5.2% of starters over the last 2 years, including 32 staff over the age of 60.**

Age group of Starters 2018						Age group of Starters 2019					
Age bands	No.	%	% of starts by group	All staff % 2018	Varies	Age bands	No.	%	% of starts by group	All staff % 2019	Varies
<=20	33	2.9%	25.2%	21.9%	3.3%	<=20	28	3.5%	24.6%	9.1%	15.5%
21-25	250	22.3%				21-25	171	21.1%			
26-30	256	22.8%	39.0%	37.0%	2.0%	26-30	204	25.2%	40.4%	28.1%	12.3%
31-35	181	16.1%				31-35	123	15.2%			
36-40	128	11.4%	19.6%	12.0%	7.6%	36-40	106	13.1%	21.3%	24.6%	-3.3%
41-45	92	8.2%				41-45	66	8.2%			
46-50	74	6.6%	11.6%	12.9%	-1.3%	46-50	39	4.8%	7.8%	23.7%	-
51-55	56	5.0%				51-55	24	3.0%			
56-60	34	3.0%	4.5%	16.1%	-11.6%	56-60	33	4.1%	5.9%	14.6%	-8.7%
61-65	12	1.1%				61-65	14	1.7%			
66-70	5	0.4%				66-70	1	0.1%			
total	1121					total	809				

This shows that although numbers decline after age 55 there are still opportunities for employment in the Trust.

As for 2017 in 2018 there was correspondence between age groups of starters to leavers. The younger that staff are, the faster they turn over. In 2017 the under 45's formed 59% of the workforce but 74-78% of starters and leavers. Junior Doctors, career moves etc. are likely to form part of these changes. Exit interviews / reasons for leaving help to inform these results.

Starters by staff group

Years 2017 to 2019 show a continued higher numbers of starters in Medical and Dental, Additional Clinical Services, Nursing and Midwifery and Amin and Clerical. For the next year, the different ethnicity of these staff groups would be of interest.

Starters by Staff Groups 2019 (compared to 2017 and 2018)						
Staff Group of Starters	Number 2019	Number 2018	% in 2017	% in 2018	% in 2019	Varies 2017-2019
Medical and Dental	227	300	30.0%	26.8%	28.1%	-1.9%
Additional Clinical Services	232	291	24.7%	26.0%	28.7%	4.0%
Nursing and Midwifery	112	267	16.4%	23.8%	13.8%	-2.6%
Administrative and Clerical	131	153	17.5%	13.6%	16.2%	-1.3%
Allied Health Professionals	41	54	5.4%	4.8%	5.1%	-0.3%
Add Prof Scientific - Tech	25	21	1.5%	1.9%	3.1%	1.6%
Healthcare Scientists	15	15	2.3%	1.3%	1.9%	-0.4%
Estates and Ancillary	22	12	1.6%	1.1%	2.7%	1.1%
Students	4	8	0.5%	0.7%	0.5%	0.0%
Grand Total	809	1121	793			

Starters by Ethnicity – From 2016 to 2018, non-declared ethnicity increased from 3.7% to 12% which equates to 134 starters with unknown ethnicity which will have affected data value. In 2019, this has reduced to 6.3%. The ratio for BME recruits has been 42% to 43% over the 3 years which is similar to BME in the workforce.

In the WRES details you can see the ethnicity of the different staff groups by BME White and non-stated.

Starters By Ethnicity Year ending March 31st 2019 - and compared to 2016, 2017 and 2018							Variation in % 2019 2016
Ethnicity	2019	2018	2016%	2017%	2018%	2019%	
White	355	520	53.3%	48.7%	46.4%	43.9%	-9.4%
BME	403	467	43.0%	42.3%	41.7%	49.8%	6.8%
Non stated	51	134	3.7%	9.1%	12.0%	6.3%	2.6%
Total	809	1121	831	793	1121		

Of increasing interest are the proportions of Asian and Black ethnicity which are large groups in our workforce. In 2018 this is 22.7% and 12.9% respectively. In 2019 the Asian starters form 33.4% of starters, with a slight drop in Black proportions to 11.1%.

There is also awareness that White ethnicities are a proportionally sizeable group of 9% that are currently included for WRES purposes with White British categories. In 2019 White British amounts to 34% of starters whilst White Other is 9.9%.

Starters by Ethnic Groups 2019 and 2018					Variation in % 2018-2019
Category	2019		2018		
	Number	%	Number	%	
White British	275	34.0%	409	36.5%	-2.5%
Asian	270	33.4%	254	22.7%	10.7%
Black	90	11.1%	145	12.9%	-1.8%
White Other	80	9.9%	111	9.9%	0.0%
Not Declared	51	6.3%	134	12.0%	-5.7%
Mixed	23	2.8%	35	3.1%	-0.3%
Other	20	2.5%	32	2.9%	-0.4%

Starters by disability - a new addition to the report in 2017 as part of meeting requirements for the new Workforce Disability Equality Standard **WDES**. It is important to note lower declaration at 0.4% and non-declaration levels which are higher this year at 31.8%. These need to be improved on as the disability level is under national expectations and low declaration affects data value.

Starters 2019 and Disability Declaration						
Status	2019	2019%	2018	2018%	2017	2017%
No	549	67.9%	865	77.2%	525	66.2%
Not Declared	257	31.8%	229	20.4%	248	31.3%
Yes	3	0.4%	27	2.4%	20	2.5%
Total	809		1121		793	

3.15 Leavers

Year ending March 2019 saw 807 leavers. This data can be compared to years ending 2015, 2016, 2017 and 2018 in the table below.

Leavers by Gender – in the 4 years there has been a disproportionate level of male leavers compared to the overall workforce male to female staff ratio (which has been circa 19% to 20% male for the last 5 years). However, there is also a corresponding higher level of male starters e.g. 26.2% in 2019.

Leavers by Gender 2019 (compared to 2015, 2016, 2017 and 2018)						
Gender	2019	2019 %	2018 %	2017 %	2016 %	2015 %
Female	607	75.2%	72.3%	76.1%	70.1%	71.8%
Male	200	24.8%	27.7%	24.0%	29.2%	28.2%
Total leavers	807		757	789	989	629

Leavers by disability – There is still high no declaration at 21% which effects validity and value of this data. Declaration of a disability is at 1.36 to 2.5% which is very low to national expectations.

Leavers by Disability 2019 (compared to 2018)					Starters 2019
Category	2019		2018		
	Number	%	Number	%	
No	627	77.70%	544	71.90%	67.9%
Not Declared	169	20.94%	194	25.60%	31.8%
Yes	11	1.36%	19	2.50%	0.4%
Total	807		757		

Leavers by ethnicity

Non declaration of ethnicity is at its lowest level this year at 2.2%. There is a trend between 2017 -2019 of proportionally lower White at 4.7% and proportionally higher BME at 5.7% leavers but this is balanced by 4.8% fewer White and 7.5% more BME starters in the same

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period. For 2019 numbers this equates to +1.7% more BME remaining (circa 136 staff), and has contributed to the increasing proportions of BME to White Staff.

In 2017 and 2018 the ratio of White to BME leavers in total was proportional to the total workforce ratio for these groups. The percentage of Asian leavers was proportional at 21.55% of total leavers in 2017 and 20.2% in 2018. In 2019 this is 25.9% and 25% respectively.

Leavers by Ethnicity in 2019 (compared to 2017 and 2018)							
category	2019	% 2019	% 2018	% 2017	starters in 2019	all staff 2019	all staff 2015
White	429	53.2%	55.7%	57.9%	43.9%	54.5%	58.8%
BME	360	44.6%	39.9%	38.9%	49.8%	43.2%	37.7%
Not stated	18	2.2%	4.4%	3.8%	6.3%	2.3%	3.5%
Total Leavers	807	807	757	789	809	4353	3880

Leavers by Ethnicity 2019 (compared to 2018) with wider categories showing main groups					all staff 2019
Category	Number	%	Number	%	
White British	328	40.6%	341	45.0%	45.3%
Asian	209	25.9%	153	20.2%	25.0%
Black	102	12.6%	92	12.2%	10.8%
Mixed	24	3.0%	22	2.9%	1.4%
White Ethnicity	101	12.5%	81	10.7%	9.2%
Other	25	3.1%	35	4.6%	5.9%
Not stated	18	2.2%	33	4.4%	2.3%
	807		757		

From the chart below a disproportionate number of under 30's are leaving over the years ending 2017 to 2019 against the total staff aged under 30 in those years. However, Starters match this high proportion. Conversely aged 46 and upwards are more inclined to stay than those 45 and under.

Leavers in 2019 by age band					Leavers in 2018 by age band				
Leavers by Age Band 2018	No.	%	Group % 2019	Varies to 2018	No.	%	Group % 2018	Group % 2017	All staff 2018
<=20 Years	13	1.6%	35.7%	-3.8%	7	0.9%	39.5%	41.3%	22%
21-25	112	13.9%			118	15.6%			
26-30	163	20.2%			174	23.0%			
31-35	119	14.7%	37.4%	1.2%	129	17.0%	36.2%	33.5%	37%
36-40	111	13.8%			79	10.4%			
41-45	72	8.9%			66	8.7%			
46-50	52	6.4%	6.4%	-6.1%	44	5.8%	12.5%	13.7%	12%
51-55	57	7.1%			51	6.7%			
56-60	51	6.3%	13.1%	1.3%	41	5.4%	11.8%	11.5%	16%
61-65	41	5.1%			40	5.3%			
66-70	14	1.7%			5	0.7%			
>=71 Years	2	0.2%			3	0.4%			
Total	807				757				

Leavers by division and Staff Group

Leavers by Division 2019 (compared to 2018)				
Division	No 2019	2019%	no 2018	2018%
Corporate	107	13.3%	81	10.7%
Diagnostics, Therapeutics, Outpatients	124	15.4%	115	15.2%
Medicine	239	29.6%	267	35.3%
Surgery	189	23.4%	163	21.5%
Women's & Children's	148	18.3%	131	17.3%
Grand Total	807		757	

Leavers by Staff Group 2019 (compared to 2017 and 2018)						
Staff group	Number 2019	% in 2019	All Staff 2019	2018 - %	2017 - %	Variation 2019
Medical and Dental	229	28.4%	14.0%	29.20%	27.10%	14.4%
Nursing / Midwifery Registered	215	26.6%	33.4%	24.20%	28.80%	-6.7%
Additional Clinical Services	139	17.2%	17.6%	19.80%	14.80%	-0.4%
Administrative and Clerical	140	17.3%	21.2%	14.50%	16.00%	-3.9%
Allied Health Professionals	29	3.6%	5.4%	5.40%	7.10%	-1.9%
Estates and Ancillary	14	1.7%	2.6%	2.50%	2.20%	-0.9%
Healthcare Scientists	13	1.6%	2.5%	2.20%	2.30%	-0.9%
Add Prof Scientific and Technic	22	2.7%	2.9%	1.70%	1.70%	-0.2%
Students	6	0.7%	0.2%	0.40%	0.10%	0.5%
Grand Total	807		4353	757		

Reasons for Leaving - The Trust has been operating starter and exit questionnaires from October 2015 to explore unknown reasons for leaving to help the Trust to understand better why staff / staff groups join and/or leave the organisation.

The top two reasons for leaving since 2015 (bar TUPE in 2016) have been superseded by reason of work life balance in 2019 at 20.1% which accounts for 162 leavers in 2019. This category has increased each year and proportionally by 12.6% since 2015. The usual top two reasons follow this and are relocation at 17% and end of Fixed Term Contract at 14.7%. The unknown voluntary resignation category is much reduced from 17.8% in 2018 to 6.9% in 2019 which is progress on achieving known reasons for leaving with ample categories.

Reasons for Leaving	No. 2019	% in 2019	% Mar 2015	% Mar 2016	% Mar 2017	% Mar 2018	as % of 4353 staff
Death in Service	3	0.4%			0.1%	0.5%	0.1%
Dismissal - conduct* (prior to 2019 = all dismissals)	9	1.1%			3.2%	3.4%	0.4%
Dismissal capability (separate category @ 2019)	10	1.2%					

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Employee Transfer TUPE				22.7%			
End of Fixed Term Contract	119	14.7%	21.8%	19.4%	21.2%	24.4%	2.7%
End of Fixed Term Contract – re Training	12	1.5%			0.6%	0.3%	0.3%
End of Fixed Term contract- end of work requirement	1	0.1%					
End of Fixed Term Contract - External Rotation	47	5.8%			0.1%	0.4%	1.1%
End of Fixed Term Contract - Other	1	0.1%			2.4%	1.1%	0.0%
Has Not Worked						0.1%	
pregnancy					0.1%		
Redundancy - Compulsory					0.9%	0.1%	
Redundancy – Voluntary					0.1%		
Retirement - Ill Health	2	0.2%				0.1%	0.0%
Retirement Age	58	7.2%	9.1%	4.9%	6.8%	5.3%	1.3%
Voluntary Early Retirement - no Act. Red	2	0.2%			0.8%	0.4%	0.0%
Voluntary Early Retirement with Act. Red	8	1.0%			0.6%	0.5%	0.2%
VR Voluntary Resignation categories:							
Adult Dependants	7	0.9%		2016>	1.1%	0.9%	0.2%
Better Reward Package	51	6.3%	2015 >	1.3%	1.9%	4.1%	1.2%
Child Dependants	19	2.4%	2015 >	1.7%	2.5%	3.2%	0.4%
Health	27	3.3%		2016>	1.5%	3.0%	0.6%
Incompatible Working Relationships	5	0.6%		2016>	1.0%	0.8%	0.1%
Lack of Opportunities	10	1.2%		2016>	1.0%	0.8%	0.2%
Other/Not Known	56	6.9%	26.6%	21.7%	23.6%	17.8%	1.3%
Voluntary resignation "other reasons" not used since 2015			15.6%	N/a	N/a	n/a	
Promotion	40	5.0%	2015 >	5.0%	6.7%	5.7%	0.9%
Relocation	138	17.1%	13.9%	9.1%	14.6%	14.4%	3.2%
To undertake further education or training	20	2.5%	2015 >	1.5%	0.8%	0.5%	0.5%
Work Life Balance	162	20.1%	7.5%	5.9%	8.2%	12.9%	3.7%
Grand Total	807						18.5%

Reasons for Leaving in 2019	Number 2019	% in leavers 2019	as % of 4353 staff
Death in Service	3	0.4%	0.1%
Dismissal	19	2.4%	0.4%
End of fixed term contract (all categories)	180	22.3%	4.1%
Retirement (all categories)	70	8.7%	1.6%
Voluntary resignation:			
1- Personal - dependants, health, work life balance	215	26.6%	4.9%
2- Career - better reward package, promotion, relocation, further education, training,	249	30.9%	5.7%

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3 -Work - lack of opportunities / incompatible work relationships	15	1.9%	0.3%
4 -Other - not known	56	6.9%	1.3%
	807	100.0%	18.5%

NB Total of Voluntary resignation categories =	535	66.3%	12.3%
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