

North Bristol NHS Trust

Annual Equality Statistics

Monitoring Report 2017



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Introduction

This report contains statistics concerning the staff employed by North Bristol Trust by Race, Gender, Disability, Sexual Orientation, Religion or Belief and Age. The monitoring figures first became available in 2009 so this year is used as a comparator.

The collection of these statistics demonstrates how we meet our legal requirements under the statutory duties, as set out in the Equality Act 2010 and in the Public Sector Equality Duty (PSED) 2011. The latter obliges us to provide information relating to employees who have a relevant protected characteristic.

We also need to demonstrate compliance with the NHS Constitution and Equality Delivery System which are measured externally by the Quality Care Commission and Equality and Human Rights Commission respectively, and by other monitoring bodies.

This report is one part of how we meet our statutory obligations under the PSED but does not contain a full analysis of the figures. It needs to be read in conjunction with the 2017 Annual Equality Report. Monitoring is an important part of understanding the access needs and experiences of our staff and also assessing whether we are responding to them in an appropriate and effective manner. Both the Monitoring and Equality Reports were first compiled in 2009 and these give the evidence that shows the Trust has made considerable progress in promoting equality and taking steps to ensure that it does not discriminate.

The report also meets the Governments' requirement for public bodies, which was set out by Baroness Verma in the House of Lords on 6 September 2011 who said that NHS Trusts must be:

“...delivering real progress on equality and to be transparent about that so that the public can hold them to account.”

The staffing information in this report is taken from the Electronic Staff Record (ESR) unless otherwise stated. ESR is the main workforce/payroll system used by the Trust. It can be seen from the report that there are gaps in some of the data where applicants and staff are more reluctant to disclose their information, particularly in relation to disability, sexual orientation and religion or belief, although data is increasing for the latter. In some cases the figures are too small to be statistically significant. The Trust's Equality Objectives for 2017 – 2021 have been agreed and include actions to further improve staff monitoring data. These are due to be reviewed on an ongoing basis.

There are some inconsistencies in numbers of staff (headcount and FTE) in the report which is due to data being drawn at different times and over different periods, and some figures have been rounded up. These figures are mainly calculated on full time equivalent staff and do not include bank and agency, unless otherwise stated.

Lesley Mansell
Equality and Diversity Manager
April 2018

1 Staff in Post

The total number of Full time Equivalent (FTE) staff at the Trust on 31.12.2017 was 7,182 which is 57 more than in 2016 when there were 7,125. This figure excludes bank staff. These figures have hardly changed since 2009 when there was 7283 FTE staff in post.

1.1 Ethnicity

The percentage of BME (Black and Minority Ethnic) staff at 31.12.2017 was 16% (no change from 16% in 2016) the percentage for White staff was 83% (no change from 83% in 2016). In 2009 the percentage of BME staff was 14% which fell until 2011 when it began to rise again. Less than 1% (a similar figure for 2016) did not provide this information in 2017 compared with 27% in 2009 so this has moved significantly. Table 1 shows FTE staff by staff group and Ethnicity. All percentages have been rounded up here.

Table 1: FTE staff by staff group and Ethnicity 2017

Sum of FTE Med and Non Med 2017							
	Medical			Non-Medical			Grand Total
Staff Group	Black	Un disclosed	White	Black	Un disclosed	White	
Add Prof Scientific and Technic				19.71		187.95	207.66
Additional Clinical Services				236.50	10.33	1139.46	1386.29
Administrative and Clerical				96.22	7.13	1230.19	1333.53
Allied Health Professionals				20.82	2.00	318.16	340.98
Estates and Ancillary				199.24	5.25	457.34	661.84
Healthcare Scientists				32.74	9.72	304.15	346.61
Medical and Dental	190.07	27.14	698.64				915.85
Nursing and Midwifery Registered				376.17	6.99	1602.00	1985.16
Students						4.00	4.00
Grand Total	190.07	27.14	698.64	981.40	41.43	5243.25	7181.92
Workforce %	2.65%	0.38%	9.73%	13.66%	0.58%	73.01%	100.00%

Ethnicity of staff by pay band

Black and Minority Ethnic staff (BME) are concentrated in pay bands 2 and 5. This is also true for White staff, however, there is a higher representation of White staff in other pay bands.

Band 2 there were BME 5% and White 15% in 2017 (BME 5% and White 15% in 2016)
Band 5 there were BME 5% and White 16% in 2017 (BME 5% and White 16% in 2016)
Band 7 there were 0.39% BME and 6% White staff (0.39% BME and 8% White in 2016)
Band 8a-d there were 0.13% BME and 4% White (0.11% BME and 4% White in 2016)

Since 2013, when the figures were first recorded by band and various initiatives were begun to promote career development for Black and Minority Ethnic Staff, these figures have not moved significantly. NBT is reviewing its action plans over the next year in conjunction with the BME Staff Career Development group.

The following initiatives are in place to promote career development for BME staff within the Trust:

- BME Staff Career Development Group – agreed actions incorporated into Equality Objectives
- BME Mentoring scheme - members of the Trust Board mentoring staff from BME backgrounds. Relunched autumn 2017
- Interview skills training workshops. To be re-advertised in 2018
- NHS Stepping up Programme - advertised to BME staff, 1 member secured a place out of over 4000 applicants
- * Bristol Race Manifesto – NBT key player in the strategic leaders working group
 - Stepping up Project established and advertised to BME staff
 - Plans to share BME staff to sit on interview panels for each other

The work carried out impacted on the results of the Workforce Race Equality Standard which showed extremely favourable outcomes in its first report which was based on 2014 statistics. The Workforce Race Equality Standard Unit at NHS England analysed the results of 4 key indicators and NBT came top in 3 of these.

* NBT is a member of the Bristol Race Equality Manifesto strategic leaders group and our pay data for 2016 was submitted along with 11 other public bodies. This found that BME people are represented in small number in every pay band in every organisation. The committee are now identifying actions to address this.

Table 2: Ethnicity of staff by pay band (Sum of FTE) 2017

Med or Non Med	Band	Black	White	Undisclosed	Grand Total
Non-Medical	Band 1	0.49%	0.59%	0.00%	1.08%
	Band 2	4.59%	15.31%	0.16%	20.06%
	Band 3	1.05%	9.88%	0.05%	10.98%
	Band 4	0.78%	7.77%	0.09%	8.64%
	Band 5	4.65%	15.82%	0.09%	20.56%
	Band 6	1.53%	11.84%	0.07%	13.44%
	Band 7	0.39%	7.56%	0.04%	7.99%
	Band 8A	0.09%	2.27%	0.00%	2.36%
	Band 8B	0.03%	0.92%	0.00%	0.95%
	Band 8C	0.01%	0.33%	0.00%	0.34%
	Band 8D	0.00%	0.28%	0.01%	0.29%
	Band 9	0.00%	0.12%	0.00%	0.12%
	Non AFC	0.00%	0.25%	0.05%	0.30%
	Medical & Dental	0.06%	0.06%	0.01%	0.13%
Medical	Non AFC	0.00%	0.01%	0.00%	0.01%
	Medical & Dental	2.63%	9.71%	0.38%	12.72%
	Medical & Dental - Locum	0.01%	0.00%	0.00%	0.01%
Grand Total		16.31%	82.73%	0.95%	100.00%

Table 3 shows the BME population taken from the 2011 census figures for the South West, Bristol, North Somerset and South Gloucestershire areas.

Table 3: BME Population from 2011 Census

Key population data Source: 2011 Census	England	South West England	Bristol	North Somerset	South Glos.
Total population	53,012,456	5,288,935	428,234	202,566	262,767
BME	20%	9%	22%	6%	8%
White	80%	91%	78%	94%	92%

The 2011 census showed that fewer than 9% of the population in the South West are from a BME background. Bristol has a more diverse population with a 22% BME population, while there is 8% in South Gloucestershire and 6% in North Somerset. The figure for BME staff in the Trust at 16% is 4% higher than the average 12% BME people across the three BNSSG areas. The BME staffing profile is 4% less than the Bristol population, 8% higher than the census figures for South Gloucestershire and 10% higher than North Somerset.

1.2 Gender

In 2017 there were 5299 (5235 in 2016) FTE females representing 74% of the workforce (73% and 1% lower in 2016) and 1883 FTE males representing 26% of the workforce (1891 or 27% in 2016).

Table 4: FTE staff by Occupation by Gender 2017*

Sum of FTE Staff Group	Gender		
	Female	Male	Grand Total
Add Prof Scientific and Technic	155	53	208
Additional Clinical Services	1105	281	1386
Administrative and Clerical	1052	282	1334
Allied Health Professionals	283	58	341
Estates and Ancillary	302	360	662
Healthcare Scientists	221	125	346
Medical and Dental	421	495	916
Nursing and Midwifery Registered	1756	229	1985
Students	4.00		4.00
Grand Total	5299	1883	7182

* These figures are rounded up.

Gender Identity - The Trust does not ask monitoring questions regarding Gender Identity and it may be illegal to do so under the 2004 Gender Recognition Act. However, Transgender staff have said they are happy to have this information recorded. A request has been made to the service provider of the Electronic Staff Record to include this category and an answer is awaited.

Females represent 65% (68% in 2016) of staff in all Band 8 posts while men comprise 35% (32% in 2016). This is a 3% decrease of females from 2016 and 9% below the overall NBT workforce figure of 74% female. Pay bands 1- 4 has 75% females and 25% males, equivalent to the workforce figure. There are 83% of females in pay bands 5-7 and 17% males. Neither of these last two sets of figures has changed since 2016.

The Gender Pay Gap data for 2017 showed the overall average hourly rate for male employees is 19% higher than the average hourly rate it pays its female employees. This is slightly higher than the wider public sector economy which was reported as 17.7% in October 2017 (Office of National Statistics (ONS) Annual Survey of Hours and Earnings). However, this gender pay gap is largely because far more of the Trust's doctors and other medical staff are men than women, as is the case across the NHS. Of the Trust's other employees, including nursing, midwifery, scientific, therapeutic, technical, administrative and ancillary staff, and women are on average paid 1.16% more per hour. The Trust's executive team, which is made up of five women and three men, including a female chief

executive, is absolutely committed to having an equitable workforce and is taking a series of actions to achieve this. There has already been a lot of progress and in the past 10 years the proportion of female medical staff at the Trust has increased from 39% to 46%, including a rise in female consultants from 25% to 36%.

Table 5: Full Time equivalent staff by pay band by Gender 2017*

Sum of FTE	Gender		
	Female	Male	Grand Total
Band 1	42.01	35.84	77.85
Band 2	995.17	445.88	1441.05
Band 3	649.91	138.71	788.62
Band 4	496.67	123.94	620.61
Band 5 2491.14	1246.30	524.66	230.12
Band 6	782.58	182.88	3015.8
Band 7	462.26	111.66	1476.42
Band 8A	122.57	46.74	965.46
Band 8B	33.59	34.80	573.92
Band 8C	20.61	4.00	169.31
Band 8D	7.80	13.20	68.39
Band 9	3.31	5.00	24.61
Medical & Dental - Locum		1.00	21.00
Grand Total	4862.77	1373.76	6236.53

The last census return shows that there are slightly more than 50% of females in the population, this is the case nationally, regionally and locally.

Table 6 shows the 2011 Census figures broken down by gender for the South West, Bristol, North Somerset and South Gloucestershire areas.

Table 6: Male/Female Population from 2011 Census

Key population data Source: 2011 Census	England and Wales	South West England	Bristol	North Somerset	South Glos.
Total population	53,012,456	5,288,935	428,234	202,566	262,767
Female	51%	51%	50%	51%	50%
Male	49%	49%	50%	49.00%	50%

There are considerably more females represented in the Trust's workforce compared to the general population. There is a predominance of females in the nursing and administrative bands.

1.3 Disability

The total number of staff who declared a disability at 31.12.2017 was 1.19% (1.26% in 2016). This is slightly lower than the Office for National Statistics (ONS) data which is 1.5% for the population. The number of staff declaring a disability has reduced slightly while the overall number of staff has increased marginally.

The same percentage of staff were undefined as in 2016, a total of 19%. There was a marginal decrease of 0.3% of staff who did not declare a disability or have non-disabled status at a combined percentage of 79% compared with 77% in 2016.

The figure for disabled staff has risen slightly since 2009 when it was 1.1% to 1.26% in 2016. For 2017 the figure returned to the 2009 figure of 1.1%. The highest reported percentage during the period from 2009 – 2016 was 22%. These figures are too small to be statistically significant.

Table 7: Full Time Equivalent staff by Disability 2017

	Yes	No	Not Declared	Undefined	Prefer Not To Answer	Grand Total
Headcount	99	5806	803	1616	3	8327
Headcount %	1.19%	69.72%	9.64%	19.41%	0.04%	100.00%

The National NHS Staff Survey records members of staff who state they have a long term illness/health problem or disability. In 2017 the percentage of staff who stated they had a long term illness/health problem or disability was 14%. This has decreased by 4% from the 2016 figure of 18%. The previous year there was an increase of 5%. The highest figure in the Electronic Staff Record was 22%. The figures in the SAS has risen every year since until last year. The national average is 17% in the same survey.

All staff were invited to complete the survey in 2017 with a response rate of 46%. In 2016 a random sample of 1241 staff were asked to complete the survey and there was a 32% response rate equivalent to that in 2015 when all staff were invited to participate.

It is recognised that there is under-reporting of disability status, this is evident in the disparity between the number of staff declaring a disability and the results of the Staff Attitude Survey. Every year staff are encouraged to add their disability status to the ESR, although at one point this category had been removed, it has now been reinserted. The Equality Newsletter or direct messages to members of the Disabled staff group are made to encourage people to declare their status.

From the Staff Attitude Survey, the national average number of disabled staff is 17%, 3% higher than NBT at 14%. From the Electronic Staff Record this is 3% nationally, while the NBT figure was much lower at just over 1%.

Table 8: Census 2011 data relating to long term illness

Key population data Source: 2011 Census	England and Wales	South West England	Bristol	North Somerset	South Glos.
Total population	53,012,456	5,288,935	428,234	202,566	262,767
People with limiting long term illness	8,809,194	892,034	67,739	34,915	35,696
% people with limiting long term illness	17	17	16	17	14

The census in 2011 asked a question in relation to limiting long-term illness, which covered any long term illness, health problem or disability which limits daily activities at work. The census statistics therefore showed a much higher rate of those with long term illnesses nationally, regionally and locally compared to those who declared a disability in our 2015 workforce. The average for the BNSSG area is 16% and the staff survey figure of 14% is closer to these figures than those in the Electronic Staff Survey.

1.4 Sexual Orientation

Sexual orientation covers Lesbian, Gay and Bisexual (LGB) and heterosexual people.

For 2017 the statistics show that 1.6% of staff stated they are LGB (1.76% in 2016). This is slightly more than the national data collected by the Office for National Statistics at 1.5% and 53% of staff declared they were heterosexual (58% in 2016).

In 2017 35% did not want to disclose their sexual orientation, 6.3% more than in 2016. 10% are undefined meaning they did not record anything, a reduction of 1% from 2016. Failures to disclose have increased from 18% in 2009 but decreased for undefined which was 34% in 2009.

This information has only been collected in recent years and staff continue to be reluctant to share this information and the numbers of LGB staff are still too small to be statistically significant.

It is difficult to estimate the Lesbian, Gay or Bisexual (LGB) population but the Bristol Pride website estimates around 60,000 (about 7%) LGB people live and work in the city of Bristol.

Table 9: Full Time Equivalent and headcount staff by Sexual Orientation 2017

Sexual Orientation	Sum of FTE	Headcount	Headcount %
Lesbian	31.80	36	0.43%
Gay	50.96	54	0.65%
Bisexual	36.47	43	0.52%
Heterosexual	3772.97	4413	53.00%
I do not wish to disclose my sexual orientation	2604.12	2936	35.26%
Undefined	685.60	845	10.15%
Grand Total	7181.92	8327	100.00%

The table below shows the percentage of civil partnerships in relation to marriages in the 2011 census. As Civil Partnerships are only open to same sex couples it gives some indication of the number of lesbian/gay people in the population, but these figures should be treated with caution as many same sex people do not have a Civil Partnership. There were 86 Same Sex Marriage ceremonies in the BNSSG area in 2014 and more recent data is not yet available. The census does not collect figures for sexual orientation.

Table 10: Civil Partnerships Census Data 2011

Civil Partnerships data Source: 2011 Census	England	South West England	Bristol	North Somerset	South Glos.
Civil Partnerships	100,288	9,768	1,126	314	297
Percentage CPs	0.2%	0.2%	0.3%	0.2%	0.1%
Marriages	20,029,369	2,134,822	126,910	86,784	110,532

1.5 Religion or Belief

The largest group declaring a religion in 2017 were Christians representing 31% of staff (34% in 2016) followed by Atheists at 8.29% of staff (9.37% in 2016) then 'Other' at almost 4.9% (5.7% in 2016) and Muslims at 1.62% a 0.2% decrease from 2016.

When all religions, excluding Christians, are added together this represents 11% of staff with a belief (9% in 2015) an increase of 3% from 2016 which is an over-representation against the 2011 ONS data 0.5%. There was a 6.39% increase in staff who 'did not wish to disclose their religion/belief along with a decrease of 1% of 'Undefined' at 10% (11% in 2016). Table 11 below shows the range of FTE staff declaring their religion or belief by headcount equivalent.

Table 11: Full Time Equivalent and headcount staff by Religion or Belief 2017

Religious Belief	Sum of FTE	Headcount	Headcount %
Christianity	2196.6	2568	30.84%
Atheism	622.68	690	8.29%
Other	352.62	408	4.90%
Islam	109.12	135	1.62%
Hinduism	39.09	42	0.50%
Buddhism	28	33	0.40%
Sikhism	12.6	15	0.18%
Judaism	3.72	4	0.05%
Jainism	1.68	2	0.02%
I do not wish to disclose my religion/belief	3128.84	3583	43.03%
Undefined	686.96	847	10.17%
Grand Total	7181.92	8327	100.00%

Table 12: 2011 Census data by religion and belief

Key population data Source: 2011 Census percentage	England and Wales	South West England	Bristol	North Somerset	South Glos.
Total population	53,012,456	5,288,935	428,234	202,566	262,767
Christianity	59%	60%	47%	61%	74%
No religion	25%	30%	37%	30%	17%
Islam	5.0%	1.0%	5.1%	0.4%	0.4%
Hinduism	1.5%	0.3%	0.6%	0.2%	0.3%
Other	0.4%	0.6%	0.7%	0.5%	0.2%
Buddhism	0.5%	0.4%	0.6%	0.3%	0.1%
Sikhism	0.8%	0.1%	0.5%	0%	0.1%
Judaism	0.5%	0.1%	0.2%	0.1%	0.06%
Religion not stated	7.2%	7.9%	8.1%	7.5%	7%

Of those who declared their religion/belief the workforce data mirrors the key population data with the largest proportion of staff stating they are Christian.

1.6 Age

The table below shows the age bandings of staff by FTE and headcount. The percentages in each age group remain largely unchanged with any changes being too small to be statistically significant.

The biggest age band is comprised of staff aged from 26-30 at 14.45% (this was also the largest group in 2016 at 13.95%). The smallest group remains the same for those aged over 65 (comprised of 4 age bands from 61– Over 80) at 1.17%, followed by the second smallest aged 16 - 20 at 1.21%. XXX

Table 13: Full Time Equivalent and headcount staff by Age 2017

Age Band	Sum of FTE	Headcount	Headcount %
16-20	96.34	101	1.21%
21-25	743.71	785	9.43%
26-30	1116.05	1203	14.45%
31-35	877.06	1021	12.26%
36-40	815.52	994	11.94%
41-45	814.89	954	11.46%
46-50	851.57	1001	12.02%
51-55	885.59	1041	12.50%
56-60	628.35	759	9.11%
61-65	287.28	370	4.44%
66-70	57.53	87	1.04%
71-75	6.03	8	0.10%
76-80	1.40	2	0.02%
Over 80	0.60	1	0.01%
Grand Total	7181.92	8327	100.00%

2 Applications for Employment

These figures were collected between 1st January 2017 and 31st December 2017. There was a 2.5% decrease in the number of applicants from 2016.

2.1 Applicants and Staff Appointed by Ethnic Background

Overall in 2017 there were 21% appointments of BME people (17% in 2016). However, of 32% of BME people shortlisted, 3% were appointed, a decrease of 6% from 2016. Fewer BME people applied for posts, 6297 or 29% in 2017 compared with 6625 or 31% in 2016. 32% of BME applicants were shortlisted (26% in 2016 and 24% in 2015). 3% did not state their ethnic origin, this is an increase from 2016 when it was 2.5%.

Table 14: Applicants and Staff Appointed by Ethnicity 2017

Applicants and Staff Appointed by Ethnicity 2017						
Ethnicity	Number Applied in 2017	Total Applied %	Number Short listed 2017	Total Shortlisted %	Number Appt. 2017	*Total Appt. %
BME	6297	29	3912	32.4	113	21.4
White	14710	67.5	7970	65.7	375	70.5
Undisclosed	741	3.4	223	1.8	44	8.3
Grand Total	21,748	100%	12,105	100%	532	100%

2.2 Applicants and Staff Appointed by Gender

In 2017, 74% of staff appointed were female, a slight increase on 72% in 2016. In 2017, 1395 more females applied - 15,616 compared with 14,221 in 2016, a 10% overall increase in female applicants. In 2009, of all those appointed 81% were female.

Table 15: Applicants and Staff Appointed by Gender 2017

Applicants and Staff Appointed by Gender 2017			
Gender	Number Applied in 2017	Total Applied %	Total Appointed % FTE
Female	15,616	71.8%	74.4%
Male	6064	27.9%	25.6%
Undisclosed	68	0.3%	0%
Grand Total	21,748	100%	100%

2.3 Applicants and Staff Appointed by Disability

In 2017, 5.5% of applicants declared themselves as disabled (4% in 2016). More disabled people applied for posts and the number of overall applicants increased from 2016.

While 85% of those appointed were not disabled, this compares to 95% in 2016. However, the most significant change is the increase in the number of applicants with an undisclosed status increasing from 1% in 2016 to 4% in 2017 along with an increase in the percentage of those appointed with an undisclosed status from 1% in 2016 to 10.5% in 2017.

Whilst the percentage of applicants declaring themselves as disabled has increased, the 2.5% increase (from 1.2% in 2016 to 3.7% in 2017) in undisclosed status is cause for concern and shows that disabled people may be reluctant to declare their status.

Table 16: Applicants and Staff Appointed by Disability 2017

2.3 Applicants and Staff Appointed by Disability

Disability	Number Applied in 2017	Total Applied %	Number Short listed 2017	% Shortlisted	Appt.	% Appt.
Yes	1198	5.5	693	5.7	26	4.9
No	19,742	90.8	11,180	92.4	450	84.6
Undisclosed	808	3.7	232	1.9	56	10.5
Grand Total	21,748	100%	12,105	100%	532	100%

2.4 Applicants and Staff Appointed by Sexual Orientation

In 2017, 5% of people who applied identified as Lesbian, Gay or Bisexual (LGB) (4% in 2016, compared with 2.76% in 2009). 3.8% of those appointed in 2017 were LGB (4.4% in 2016, compared with 6.1% in 2009).

10.3% of applicants did not state their sexual orientation in 2017 compared with 8.5% in 2016 which is an increase in those not disclosing.

Table 17: Applicants and Staff Appointed by Sexual Orientation 2017

Sexual Orientation	Number Applied in 2017	Total Applied %	Total Appointed % FTE
Lesbian	188	0.9%	0.6%
Gay	394	1.8%	1.7%
Bisexual	491	2.3%	1.5%
Heterosexual	18,436	84.8%	79.9%
Undisclosed	2239	10.3%	16.3%
Total	21,748	100%	100%

2.5 Applicants and Staff Appointed by Religion or Belief

Christians represent the largest group of people who applied in 2017 at 40% (42% in 2016) followed by Atheists 20% (19% in 2016). More applicants chose not to disclose, 15% (12% in 2016).

The 2009 report shows that 49% of those applying were Christian showing a decrease of 9% over the last 8 years. There were 13% in the 'Other' category (12% for 2016). This figure has risen from 10% in 2009.

Muslims are the next largest group at 7.5% (10% in 2016).

These figures have changed since 2009 with 9% fewer people recording a Christian faith and 6% more saying they are Atheist. 85% of applicants recorded a faith (including 'Other'), 88% in 2016 compared with 89% in 2009. More people did not disclose a faith in 2017 (15%) which is an increase since 2009 when it was 11%.

Table 18: Applicants and Appointed by Religion or Belief 2017

Religion or Belief	Number Applied in 2016	Total Applied %	Total Appointed %
Atheism	4424	20.3	21.6
Buddhism	228	1	0.9
Christianity	8764	40.3	38.5
Hinduism	512	2.4	0.8
Islam	1639	7.5	5.6
Jainism	1	0	0
Judaism	18	0.1	0
Sikhism	120	0.6	0.6
Other	2738	12.6	10.2
Undisclosed	3304	15.2	21.8
Total	21,748	100%	100%

2.6 Applicants and Staff Appointed by Age

44% (46% in 2016) of staff appointed were aged between 20 and 29; this represented the largest group of those appointed. The second largest are aged 30-39 24% (27% in 2016).

This is a change from 2009 when the highest number appointed were in the group aged 30-39 at 36%.

There has been an increase in the number of applicants choosing not to disclose their age from 0% (17 in 2016) to 0.5% (105 in 2017).

Table 19: Applicants and Staff Appointed by Age 2017

2.6 Applicants and Staff Appointed by Age

Applicants and Staff Appointed by Age 2017 FTE			
Age	Number Applied in 2017	Total Applied %	Total Appointed %
Age up to 20	1079	5	5.3
Age 20 - 29	9467	43.5	46
Age 30 – 39	5321	24.4	23.9
Age 40 – 49	3221	14.8	15.2
Age 50 – 59	2274	10.5	7.9
Age 60 - 64	234	1.1	1.1
Age 65+	47	0.2	0.2
Undisclosed	105	0.05	0.4
Total	21,748	100	100

3 Staff Training

There were 5297 (74%) staff in 2017 who undertook some form of equality and diversity training, attended corporate induction or undertook the E-learning equality and diversity course (4039 or 57% in 2016).

Of these, 18% were BME (17% in 2016) 79% were White (78% in 2016), 2% did not record their ethnicity (5% in 2016) and 32% were male (25% in 2016). Equality training became mandatory in April 2015 for all staff once every 3 years and there was an 87% (77% in 2016) compliance rate by 31 December 2017.

Table 20: Equality Training for 2017 by ethnicity

	Female	Male	Total Training Attendances/ Completions	Total Attendances /Completions as %
BME	656	317	973	100%
White	3278	919	4197	100%
Ethnicity not recorded	86	41	127	100%
Grand Total	4020	1277	5297	100%

Induction training is mandatory for all new starters, in September 2017 all new staff are expected to undertake the e-learning equality training package.

4 Full/Part-Time Status

4.1 Full/Part-time Status by Gender 2017

Figures for the year to 31 December 2017 show that 68% (68.5% in 2016) of staff worked full time. 32% of staff worked part time in 2017 (31.4% in 2016).

Of all part time staff, 91% were female and 9% were male, no change from 2016. In 2009, 35% of staff worked part time, of which 93% were female and 7% were male.

Table 21: Full/Part-time Status by Gender 2017*

Employee Category	Female			Male		
	Sum of FTE	Headcount	Headcount %	Sum of FTE	Headcount	Headcount %
Full Time	3195.00	3195	38.37%	1675.00	1675	20.12%
Part Time	2104.82	3146	37.78%	207.10	311	3.73%
Grand Total	5299.82	6341	76.15%	1882.10	1986	23.85%

4.2 Full/Part Time Status by Ethnicity 2017

The proportion of White staff working full time was 57% (58% in 2016) and 43% were part time (42% in 2016). For BME staff 64% were full time and 36% were part time, no change from 2016.

There are 28% more full time BME staff than in 2009. 36% of BME staff worked part time in 2017 compared with 51% in 2009.

Table 22: Full/Part Time Status by Ethnicity 2017

Ethnicity	Full Time			Part Time		
	Sum of FTE	Headcount	Headcount %	Sum of FTE	Headcount	Headcount %
Black	843.00	843	10.12%	328.46	466	5.60%
Undisclosed	47.00	47	0.56%	21.57	31	0.37%
White	3980.00	3980	47.80%	1961.89	2960	35.55%
Grand Total	4870.00	4870	58.48%	2311.92	3457	41.52%

4.3 Full/Part Time Status by Disability 2017

In 2017 0.67% of staff who declared a disability were full time (0.75% in 2016) with 0.52% working part time and the same figure worked part time (0.51%) in 2016. While these figures are too small to be of any statistical significance there has also been very little change since 2009 with 0.61% full time and 0.59% part time.

Table 23: Full/Part Time Status by Disability 2017

Disabled	Full Time			Part Time		
	Sum of FTE	Headcount	Headcount %	Sum of FTE	Headcount	Headcount %
Yes	56.00	56	0.67%	26.40	43	0.52%
No	3600.00	3600	43.23%	1476.19	2206	26.49%
Not Declared	449.00	449	5.39%	242.98	357	4.29%
Undefined	765.00	765	9.19%	566.36	851	10.22%
Grand Total	4870.00	4870	58.48%	2311.92	3457	41.52%

5 Benefits 2017

The NHS has very few benefits for staff in the way of enhanced payments; however, Clinical Excellence Awards are awarded to doctors through an application process.

The figures for the awards in 2017 show that 76 (57 in 2016) doctors received these awards, of which 27 or 35% (14 or 25% in 2016) were female and 49 or 64% (43 or 75%) were male.

The numbers of awards have increased year on year for the past 3 years as has the number of women receiving them.

30% of BME doctors had an award in 2017 compared with 17.5% in 2016 and 20% in 2015. This figure fluctuates and does not rise or decrease every year. Just under 3% did not state their ethnic origin.

Table 24: Benefits by Ethnic Origin

Benefits 2017 by Ethnic Origin	
British	28
White British	20
Any Other White background	4
British Asian	1
White African	1
Indian	5
White other	1
Asian Indian	1
White & Black Caribbean	1
Any other Asian	2
Chinese	1
Pakistani	2
White Asian	2
White non-British	1
Mixed race	1
Other	3
Not stated	2
Total	76

6 Reasons for Leaving

In 2017 there were 1,729 leavers, 21% of the overall FTE workforce compared to 2,572 or 30% of the overall FTE workforce in 2016.

From the total number of FTE leavers, the highest percentage was from the 26-30 year age band at 26%, a 6% increase from 20% in 2016. The second highest was the 21-25 year age band at 17%, a change from 2016 when 21-25 year age band had the 3rd highest percentage of leavers and 31-35 year age band had the 2nd highest percentage of leavers.

From the total of FTE staff in post, the age band with the highest percentage of those leaving was '71 and above' at 48%. The second highest was the 26-30 year age band with 35.27% of the overall workforce leaving in 2017 compared to 40% in 2016.

The only age band which saw an increase the overall workforce leaving was the 21-25 age band with a 3% increase from 2016 to 2017. All other age bands saw a decrease in the percentage of the overall workforce leaving with the largest decrease in the 46-50 age band which saw a 62% decrease in leavers from 2016 to 2017.

Table 25: Leavers 2017 - All Staff by Age

Age Band	Sum of Leavers FTE	Headcount	Headcount %	Sum of FTE Leavers %
16 - 20	27.91	30	1.74	1.84
21 - 25	257.05	273	15.79	16.98
26 - 30	393.64	422	24.41	26.01
31 - 35	241.54	270	15.62	15.96
36 - 40	156.94	184	10.64	10.37
41 - 45	99.71	120	6.94	6.59
46 - 50	70.86	89	5.15	4.68
51 - 55	84.14	101	5.84	5.56
56 - 60	105.05	132	7.63	6.94
61 - 65	65.33	89	5.15	4.32
66 - 70	7.78	14	0.81	0.51
71 & above	3.76	5	0.29	0.25
Grand Total	1513.71	1729	100.00	100.00

Table 26 shows that there is an almost an equivalent percentage of leavers for BME and White staff. The number of leavers has decreased for both groups to 20% in 2017 for BME staff (from 24% in 2016) and to 21% for White staff in 2017 (from 29% in 2016).

Table 26: Leavers by Ethnicity 2017

Ethnicity	Sum of Leavers FTE	Sum of Leavers Headcount	Sum of FTE	Sum of FTE Turnover %
Black	230.89	262	1171.46	19.70%
White	1269.19	1449	5941.89	21.36%
Undisclosed	13.62	18	68.57	19.86%
Grand Total	1513.71	1729	7181.92	

Reasons for leaving are collected by way of a termination form. The highest number was due to voluntary resignation (all voluntary resignation reasons combined) at 60%, a significant increase from 37% in 2016.

The expiry of all fixed term contracts (all fixed term reasons combined) is 25%, an increase from 17% in 2016.

There was a small percentage increase in those leaving due to retirement age at 7.8%, from 5.7% in 2016 and dismissals remain the same at 2.7% in 2017 (2.5% in 2016).

There was a decrease in employee transfers at 25% (35% in 2016).

The figures are too small to be statistically significant across the protected characteristics.

Table 27: Leaving Reason 2017

Leaving Reason	Sum of FTE	Headcount	Headcount %
Voluntary Resignation - Work Life Balance	347.35	423	24.47
End of Fixed Term Contract	249.65	267	15.44
Voluntary Resignation - Relocation	194.60	212	12.26
Retirement Age	104.18	135	7.81
Voluntary Resignation - Promotion	92.86	106	6.13
End of Fixed Term Contract - External Rotation	96.20	99	5.73
Voluntary Resignation - To undertake further education or training	81.30	89	5.15
Voluntary Resignation - Better Reward Package	60.26	64	3.70
Voluntary Resignation - Health	40.46	47	2.72
Voluntary Resignation - Lack of Opportunities	45.25	47	2.72
Voluntary Resignation - Child Dependants	20.94	28	1.62
End of Fixed Term Contract - Completion of Training Scheme	25.90	27	1.56
Dismissal - Capability	20.57	25	1.45

End of Fixed Term Contract - End of Work Requirement	19.44	20	1.16
Dismissal - Conduct	16.81	19	1.10
End of Fixed Term Contract - Other	18.40	19	1.10
Employee Transfer	9.09	18	1.04
Voluntary Early Retirement - with Actuarial Reduction	12.66	15	0.87
Voluntary Early Retirement - no Actuarial Reduction	9.56	12	0.52
Death in Service	8.19	9	0.52
Retirement - Ill Health	6.51	8	0.46
Voluntary Resignation - Incompatible Working Relationships	6.46	8	0.46
Voluntary Resignation - Other/Not Known	6.63	8	0.46
Voluntary Resignation - Adult Dependants	5.91	7	0.40
Has Not Worked	4.40	5	0.29
Redundancy - Compulsory	2.80	3	0.17
Redundancy - Voluntary	2.80	3	0.17
Dismissal - Some Other Substantial Reason	2.00	2	0.12
Flexi Retirement	2.00	2	0.12
Bank Staff not fulfilled minimum work requirement		1	0.06
Dismissal - Statutory Reason	0.53	1	0.06
Grand Total	1513.71	1729	

7 ASK HR Case Management

ASK HR dealt with 704 cases in 2017 a decrease of 5% from 2016. BME staff are represented in 5 of the 14 areas reported which is lower than those for White staff who are included in 10. BME staff represent 18.5% of cases overall an increase of 0.5% from 2016 and 2.5% higher than the percentage of BME staff in the workforce. There were 16 cases involving Disabled staff, 7 in respect of disciplinary and 7 for sickness absence, these figures are separate to the case for race.

For disciplinary cases:

- 29.5% (45% in 2016) involved BME staff; this is 6.5% higher than the percentage of BME staff in the workforce. This is 39% lower than for White staff which is 68.5% (53% in 2016).

Harassment and Bullying cases concerned:

- 0% (0% in 2016) BME staff and 100% White staff

Grievances were raised by:

- 7% (14% in 2016) of BME staff which is 9% lower than the workforce figure, and 93% of White staff (57% in 2016), 39% more than in 2016 and 10% more than the workforce figure (83%).

Overall cases come from 18.5% of BME staff (18% in 2016) compared with 81% of White staff (80% in 2016) and 0.5% unknown.

It should be noted that the figures regarding BME staff are calculated from the small number of cases registered for each category.

Underreporting of disability status on the Electronic Staff Record means that cases dealt with do not necessarily show the true number of disabled staff. In 2017 there was only 16 recorded cases dealt with by ASK HR where the staff member recorded their disability status.

76% (78% in 2016) of staff managed under HR policies were women, slightly higher than the percentage of women in our workforce (73%) and 2% lower than in 2016, Meanwhile, there were 24% of male staff involved. The majority of these related to long term sickness, 90% for females and 64.5% males.

It is encouraging that the provision of data from staff has improved year on year this contributes to a more coherent assessment of the equality and diversity employee relations climate within the Trust.

Table 28

ASK HR Cases 2017					
Policy	BME	White	Not known	Disability*	Total
AWOL	5	4	0	-	9
Capability	0	5	0	-	5
Discipline	19	44	1	(7)	64
Fixed Term Contracts	0	0	0	-	0
Flexible Working	0	6	0	-	6
Grievance	1	13	0	-	14
Harassment & Bullying	0	5	0	-	5
Organisational Change (0-99 Staff)	0	0	0	-	0
Recruitment and Selection	0	2	0	(1)	2
Redeployment	2	4	0	(1)	6
Sickness	104	484	2	(7)	590
Trust Board Appeals	0	1	1	-	2
Whistleblowing (Raising Concerns)	0	0	0	-	0
Total	131	568	4	(16)	703

*Disabled statistics are included in the total and not additional to the figures for race.

8 Harassment and Bullying

The Harassment and Bullying advice line service was launched in November 2009 following responses to the Staff Attitude Survey (SAS) where staff said they did not think enough was being done to tackle harassment and bullying. The service is supported by volunteer harassment and bullying advisors, recruited from a diverse staff group.

Table 29 below shows that 13 staff (18 in 2016) contacted the service between January 2017 and December 2017 and the reason why, where this is known.

Based on the total number of cases including where the reason is unknown, 23% related to Race (27% in 2015) a reduction of 4%.

15% related to Disability (11% in 2016) an increase of 4% than the previous year.

There were no cases based on Sexual orientation whereas this made up 6% of cases in 2016, likewise Gender saw an increase to 8% from 7%, the same percentage for Religion and Belief.

It should be noted that these figures are very low so it is difficult to draw any conclusions from them. It is good to see low levels of helpline cases but this may not be the true picture within the Trust.

Table 29

Harassment and Bullying reason for help call category	No.	Type of H&B	No.
Race	3	Not Known	6
Disability	2	Managers on staff	6
Gender	1	Staff on staff	6
Religion/Belief	1	Not H&B	1
Total Cases	13		13

However, calls to the helpline show that harassment and bullying of staff continues to be at the highest level for BME staff and remained the same for Disabled staff in 2017.

The service is promoted in a variety of ways throughout the year: in the monthly equality newsletters, on Message of the Day, the equality notice boards in various equality days to ensure that staff are aware of the helpline.

The Staff Survey for 2017 showed positive results in that 75% of employees felt that they were not harassed or bullied by staff (80% in 2016) while 72% said they had not experienced this from patients, relatives or public (70% in 2016). Only 47% said they had reported it, a rise of 2% from 2016.

However, it also showed that 26% of employees felt that they were harassed or bullied by staff (32% in 2016) this has fallen by 6% for BME staff and remained the same at 25% for White staff. 22% of BME respondents said they had experienced this from patients, relatives or public a reduction of 10% (32% in 2016) 28% for White Staff and a 2% reduction. Meanwhile 56% of BME staff said they had reported it, a rise of 6% from 2016.

However, the story is not the same for Disabled staff who have registered a number of the lowest scores for any equality groups. This will be looked at in conjunction with the Staff Disability Career Development Group.

9 Trust Board Equality Profile 2017

At NBT female staff represents 74% of the workforce. The equality profile for the North Bristol Trust Board is set out below. There are 15 board members. The gender ratio is the same as in 2016 at 47% are female, 53% male. Of these 62.5% of Executive Directors are female and 37.5% are male. One third of non-executives are female and two thirds are male. None of these declares a disability status; there were no members from a BME background over the last year.

Table 30: Trust Board Equality Profile 2017

Trust Board Equality Profile 2017										
No. of Execs	No. of non-Execs	Female	Male	BME	White	Disabled*	Lesbian	Gay	Bisexual	Trans
8	7	7	8	0	15	0	0	0	0	N/Stated

10 Workforce Diversity Profile

Ethnicity

Figures taken from the Electronic Staff Record (ESR) show that there has been no change in the percentage of BME staff since 2016, this remains at 16% similarly for White staff at 83%. There was a 1% increase in BME appointed in 2017 to 17% and of those appointed from shortlisting. Fewer BME people applied for posts and

5% at 29% more BME applicants were shortlisted than in 2016 (26% in 2016 and 24% in 2015). Only 6% did not state their ethnic origin, this is an increase from 2016 when it was 2.5%.

The BME population of Bristol, South Gloucestershire and North Somerset is 12% and the percentage of BME staff at 16% is 4% higher than this.

Staff members are encouraged to join the BME Career Development group and numbers increased in 2017 which is chaired by a member of staff and supported by the BME Champion. The group has drawn up an action plan and agreed priorities in line with the Workforce Race Equality Standard. They also had the opportunity to be matched with Board members and senior managers as mentors when this was relaunched in autumn 2017. In 2016 NBT took part in the University of the West of England Diversity Advantage scheme which placed a BME mentee within the Trust, he became a member of the Hospital Charity committee in order to gain an understanding of the finances and attends public board meetings. He is being supported to apply for a non-executive board position when this becomes vacant later in 2018.

Disability

The total number of staff who declared a disability was 1.19%, a slight decrease from 1.26% in the previous year. Up until 2017 this number had risen very slightly since 2009 when it was 1.1% - too small to be statistically significant.

There was a 2% increase in the percentage who did not declare a disability or have non-disabled status from 77% in 2016 to 79% in 2017. The number of 'not declared' and 'undefined' decreased to 29% from 31% in 2016.

In 2017 5.5% of applicants declared their Disabled status, 4% in 2016 this is almost double the figure for 2012. 327 more disabled people applied for posts in 2017 than in 2016 and 4.9% were appointed (4% in 2016).

In 2009 this was 0.2% of those who declared a disability; therefore this shows a marked improvement over the last 8 years. While in 2017, 91% of those appointed were not disabled, this compares with 95% in 2016. However, the undisclosed percentage rose from 1% of those applying in 2016 to 3.7% in 2017.

These figures are small overall so it is difficult to draw conclusions, however, it would appear that Disabled and LGB people are still reluctant to declare their status.

The figures for successful Disabled applicants increased slightly in 2017. However, due to the lack of statistics this is too small to be of any significance. All staff are encouraged to complete this information on their Electronic Staff Record throughout the year.

In comparison, the National Staff Attitude Survey (SAS) results for NBT in 2017 reported a total of 14% of staff who declare their status as a long term illness/health problem or disability a decrease of 4% from 18% in the previous year.

The Staff Disabled Development group has a chair who is a member of staff and they have drawn up an action plan.

Gender

Full time equivalent females represent 74% of the workforce (73% in 2016) and full time equivalent males represent 26% of the workforce (27% in 2016). The 2011 census figures show just over 50% of the population is female locally, regionally and nationally and that the Trust employs a far higher percentage. Females represent 65% of staff in all Band 8 posts while men make up 35%.

The Gender Pay Gap data for 2017 showed the overall average hourly rate for male employees is 19% higher than the average hourly rate it pays its female employees. This is slightly higher than the wider public sector economy which was reported as 17.7% in October 2017 (Office of National Statistics (ONS) Annual Survey of Hours and Earnings). An action plan has been drawn up for this.

47% of the NBT board members are female of which 55% are Executive Directors and 40% are Non-Executives.

Sexual orientation

Over the last year the statistics for sexual orientation have risen slightly. Sexual orientation covers Lesbian, Gay and Bisexual (LGB) and heterosexual staff. A total of 1.6% of staff stated they are LGB (1.76% in 2016). Figures for non-declaration and undefined increased by 5.5% from 2016. This information has only been collected in recent years and it appears that staff are more reluctant to share these details, although the figures collected increase each year the numbers are still too small to be statistically significant.

There were more LGB people who applied in 2017 compared to 2016 and 0.6% fewer appointed. There was also an increase of 1.8% of people who did not state their sexual orientation. These figures are too small to be statistically significant.

Religion, belief or none

Christians represent the largest group of people who applied in 2017 at 40% (42% in 2016) followed by Atheists 20% (19% in 2016). These figures have changed significantly with 9% fewer people recording a Christian faith and 6% more identifying as Atheist compared to 2009.

Slightly more applicants chose not to disclose at 15% (12% in 2016). In 2017 there were 13% in the 'Other' category (12% in 2016) and this figure has risen from 10% in 2009. Muslims are the next largest group at 7.5% of applicants (10% in 2016) compared to 8% in 2009.

85% of applicants recorded a faith in 2017 an overall decrease of 4% since 2009.

The Sanctuary offers specific space to Muslims for Friday prayers, a Christian group has prayers every Wednesday and a Taoist group also meets. There are smaller rooms for individual prayers or contemplation at other times. This is an important space which hosts diverse events and displays throughout the year for example, Holocaust memorial day, Rainbow faiths day, Vaisakhi, Eid as well as Christian festivals.

Age

The biggest age band is comprised of staff aged from 26-30 at 14.45 and the smallest group remains the same for those aged over 65 (comprised of 4 age bands from 61–Over 80) at 1.17%, followed by the second smallest aged 16-20 at 1.21%. An Organisational Pledge for working longer is being drawn up in 2018.

Harassment and Bullying

The figures for calls to the Harassment and Bullying helpline fell in 2017 by almost 3% and numbers are very small. The helpline is advertised in the monthly staff Equality newsletter, on notice boards and in all equality displays to encourage staff to use it.

The Staff Survey for 2017 showed positive results in that 75% of employees felt that they were not harassed or bullied by staff (80% in 2016) and figures fell overall for employees who felt that they were harassed or bullied by staff these also fell by 6% for BME staff. te staff. There was a reduction of 10% of BME respondents who said they had experienced harassment and bullying from patients, relatives or public and more BME staff said they had reported it, a rise of 6% from 2016.

However, the story is not the same for Disabled staff who have registered a number of the lowest scores for any equality groups. This will be looked at in conjunction with the Staff Disability Career Development Group.

The Staff Attitude Survey for 2017 for harassment and bullying from patients, relatives or public showed a reduction for BME staff while it remained the same for White staff. The percentage also fell for BME and White staff where they felt they were harassed and bullied by staff. There was an increase BME staff reporting it of 6% from 2016 and a reduction of 1% for White staff. It is good to see low levels of helpline cases but this may not be the true picture within the Trust.

Monitoring

This report has been collated since 2009.

There have been some changes in the last six years in that more staff are beginning to give their equality information in some categories; however these movements are often too small to have any statistical significance.

Staff seem reluctant to record their disability and/or sexual orientation on the Electronic Staff Record while numbers stating a religion or belief have increased during this time. Gender Recognition is still not included in the ESR and this has been raised nationally.

Next Steps

A five point plan has been drawn up to use as a focus over the next year. This is attached at Appendix A.

Lesley Mansell
Equality and Diversity Manager

Katie Allen
Equality and Diversity Support Officer
April 2018

Appendix 1 - 5 Working Points

Annual Equality Statistics Monitoring Report 2017 Explain or Change 5 Points DRAFT			
Item	Action		Lead
EDS2 objective			
3. A representative and supported workforce			
1	Disabled Staff Disabled Staff action plan	<p>Manager training - provide a comprehensive programme of training to ensure awareness of disability issues</p> <p>Increase recording of "Disability" on ESR</p>	<p>Head Learning and Development</p> <p>Director of People and Transformation</p>
2	<p>BME Staff BME Staff Action Plan</p> <p>WRES Indicator 1 Increase percentage of BME staff in Bands 8-9, VSM (including executive Board members and senior medical staff) compared with the percentage of BME staff in the overall workforce</p>	<p>Training for managers on non- discriminatory selection.</p> <p>Retention interview - BME staff at same post or level for three years to evaluate reasons why they have not progressed/where they want to go</p>	Head Learning and Development
3	<p>Women</p> <p>Gender Pay Gap NBT Gender Pay Gap Report 2018 Remove pay gap 2, 8 and Medical bands</p>	<p>Continue the development of the Trust's talent management programme to support all employees to progress, with consideration given to supporting all staff in protected characteristic groups, including gender</p> <p>Explore how we can attract more men into the organisation at the lower bands, to create a more even gender balance</p> <p>Continue to take into account gender in the development and delivery of the Trust leadership programme</p>	<p>Head of Learning and Development</p> <p>Head of Resourcing</p> <p>Head of People and & Transformation</p> <p>Head of Learning and Development</p>

		Offer workshop sessions to Consultants to encourage CEA applications from across the workforce	
4	3.4 When at work, staff are free from abuse, harassment, bullying and violence from any source Harassment and Bullying EDS/WRES NBT Equality Objectives	Consider mechanisms to reduce percentage of staff experiencing harassment, bullying or abuse from patients/staff and how to encourage staff to report instances. In areas where harassment is identified to be offered staff training, counselling and mediation	Head of People and & Transformation
EDS2 objective 4. Inclusive leadership			
5	4.1 Trust Board Equality Profile – Zero BME members Zero Disabled members Zero LGBT members	Identify how to increase diversity Build on UWE Diversity advantage project Engage in Bristol Leadership Development programme offer by BARP	Company Secretary

Lesley Mansell
Equality and Diversity Manager
 July 2018