

**Essex Partnership University NHS Foundation Trust** 

# ESSEX **PARTNERSHIP UNIVERSITY NHS** FOUNDATION TRUST

PUBLIC SECTOR EQUALITY DUTY ANNUAL REPORT 2023-2024

#### **PUBLIC SECTOR EQUALITY DUTY 2023/2024**

#### 1. INTRODUCTION

Implementation of the Public Sector Equality Duty (PSED) is a legal requirement for all listed public authorities. Organisations are required to follow the implementation of PSED in accordance with PSED guidance documents.

The report provides staff and leaders with tools to improve, review and develop their approach in identifying and addressing disparities which affect people from 9 protected characteristics (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation, and marriage or civil partnership). The PSED has two parts – the General Duty and the Specific Duty:

- Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited under the Equality Act 2010.
- Advance equality of opportunity between persons who share a relevant protected characteristic and those who do not share it.
- Foster good relations between persons who share a relevant protected characteristic and those who
  do not share it.

The report presents data that represents EPUT's workforce, which has been collected from employee records, recruitment, and employee relations data.

Each year we are required to publish this information on our public website from data provided from 1 April 2023 to 31 March 2024.

# 2. EDI MONITORING

#### **EDI Strategy**

We are committed to challenging discrimination, both within our workforce and within the care we provide. We're proud of the diversity of our staff and want EPUT to be a great place to work and for all staff to feel they belong and are equally valued.

This Equality Diversity and Inclusion (EDI) Strategy is aligned with the Trust's strategic vision, values and objectives. It is about everyone actively reducing inequalities, respecting one another, and building an open and equitable culture within our organisation that celebrates diversity. This strategy will enable us to fulfil the Trust's purpose, "We care for people every day. What we do together, matters"

# **Staff Diversity Networks**

The staff networks work with the Trust to improve staff experience and develop and deliver the Trust's priorities by creating an inclusive environment. The Networks provide a psychologically secure environment for staff to share lived experiences, feel empowered, be heard and drive change.

EPUT currently have the following diversity networks:

- Spiritual and Faith
- Disability and mental Health
- LGBTQ+ (Lesbian, Gay, Bisexual, Transgender, Queer/Questioning, + )
- Gender Equality
- EMREN (Ethnic Minority Race Equality)

To drive the agenda forward each network has appointed a chair and an executive sponsor and developed the terms of reference. The networks meet regularly, enabling them to grow, develop staff-related activities, explore opportunities for cross-network collaboration, and establish the priorities and objectives that support their members and colleagues within the Trust.

## **Staff Survey**

In 2023, the Trust achieved a response rate of 44%, with 2,795 questionnaires returned; this was a 1.5% increase from 2022. Analysing our respondents, we have seen an increase in respondents across all minority groups, while this is a positive step, we need to continue to engage with staff to extend future participation and representation. Moreover, we have also seen an increase of respondents with a long-lasting health condition or disability.

The table below summaries our ranking of the People Promise scores for the Trust;

People Promise Year	We are			-			
i cai	compassionate and inclusive	We are recognised and rewarded	We each have a voice that counts	We are safe and healthy	We are always learning	We work flexibly	We are a team :
2022	7.49	6.22	6.90	6.23	5.74	6.77	7.09
2023	7.55	6.37	6.98	6.45	5.96	6.84	7.20

#### 3. WORKFORCE DATA

The workforce data contained within this report has been obtained from various sources:

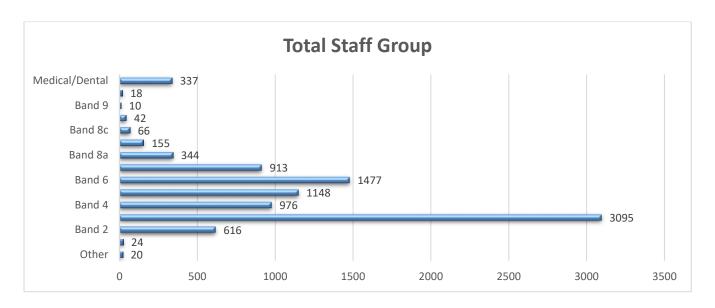
- Electronic Staff Record (ESR)
- TRAC (recruitment records)
- Employee Relations.
- NHS Staff Survey
- WRES (Workforce Race Equality Standard)
- WDES (Workforce Disability Equality Standard)

It is important to note that within ESR, there may be gaps in data relating to certain protected characteristics where colleagues have been given the option not to disclose information in relation to those protected characteristics. This is a common dynamic across most NHS organisations.

#### 4. STAFF PROFILE IN POST

For the 2023/2024 reporting period, the total headcount for EPUT was 9241, which is an increase of 796 staff from the last reporting period. This figure includes all permanent, fixed-term, bank workers, and leavers during this period.

## Table 1 – Total Staff Group



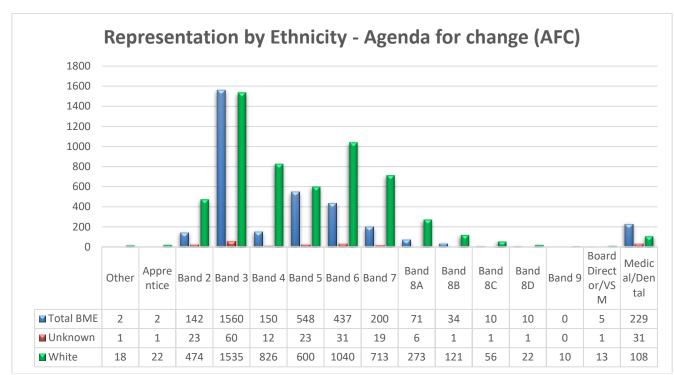
# Staff Profile by Ethnicity

Our records show **37%** of our workforce is from a BME background, which is an increase of 5% compared to the previous year's PSED report. This indicates that our workforce demographic aligns to our local population, which has a BME representation of 5.72% (Census 2021). This is positive and shows that EPUT employs a diverse workforce for the community it serves.

The Trust composition of ethnicities are as follows:

Table 2 - Ethnicity Breakdown

Code	Ethnic Origin	EPUT Workforce - 2023	Code	Ethnic Origin	EPUT Workforce - 2023
Α	White - British	5010	K	Asian or Asian British - Bangladeshi	76
В	White - Irish	84	L	Asian or Asian British – Any other Asian background	175
С	White-Any other White background	536	М	Black or Black British – Caribbean	98
D	Mixed – White & Black Caribbean	38	N	Black or Black British – African	1935
Е	Mixed – White & Black African	55	Р	Black or Black British – Any other Black background	352
F	Mixed – White & Asian	33	R	Chinese	17
G	Mixed – Any other mixed background	56	S	Any other ethnic group	129
Н	Asian or Asian British-Indian	361	U	Unknown / Not Stated	98
J	Asian or Asian British - Pakistani	75	Z	Unknown / Not Stated	113



The table below is a breakdown of ethnicity by banding. :

Slight changes were identified in comparison with the previous reporting period;

- Medical & Dental (68%), an increase of 4% from previous year reporting period.
- Band 3 (50%), an increase of 5% from previous reporting period.
- Band 5 (48%), an increase of 12% from the previous reporting period.

Whilst overall BME representation across the Trust is increasing, this is not proportional in all bandings, particularly in roles Band 6 and above which represents 8% of EPUT workforce.

## Workforce Race Equality Standard (WRES) Metrics for 2023/2024

EPUT saw improvements in six out of the nine WRES indicators, a full breakdown and analysis of these are available in the WRES report.

Notable positives include:

- Trust's BME workforce increased by 2.9% from the previous year.
- The percentage of BME staff as part of the Executive Board increased by 8.9%.
- The percentage of BME staff believing EPUT offered equal continued professional development opportunities improved by 0.6%, this was 3.5% lower than the national average.
- Improvements in the likelihood of BME staff accessing non-mandatory training and career progression.
- BME staff experiencing discrimination by 0.1% which was lower than the national average and nearequal to the experiences of white counterparts.

Whilst we have worked hard to improve the experiences of BME staff, the WRES 2024 report highlights areas for development. We will continue to work in collaboration with our Ethnic Race Equality Network and Employee Experience Team in order to drive improvement in creating an inclusive and supportive environment for our BME staff.

# Staff Profile by Disability of Staff in Post and Banding

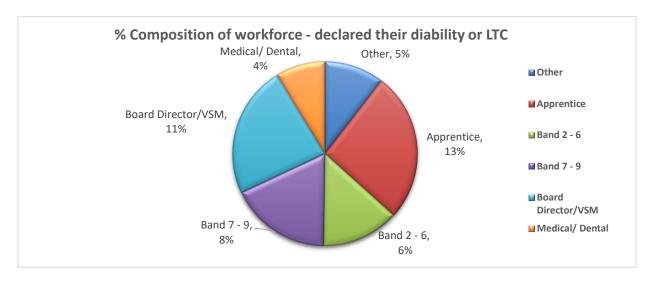
EPUT have **625 (7%)** staff who declared themselves as having a disability or long term health condition (LTC) during this reporting period. With a **3% increase** from the previous year' report, it is encouraging to see staff with a LTC or disability declaring a declaring their condition. This reflects that EPUT is a disability

confident leader and promotes an inclusive environment.

The Trust will continue to encourage all colleagues to declare their status and reassure colleagues the benefits of doing so. This will help the Trust in providing a psychologically safe environment for its staff, as well as, improving the quality of data for this protected group. To further support achieving this we are:

- Promoting communication and encouraging staff to share their personal experience relating to their disability/LTC;
- Encouraging wellbeing discussions and updates at appraisal and 1:1 support
- Promoting the use of the ESR self-service function in which staff have the opportunity to update information relating to their protected characteristics.
- Reviewing and updating the Trust's reasonable adjustment passport tool.

AFC Bands 2-6 have the highest number of staff who have disclosed a disability or LTC, however, the highest percentages of staff who declared a disability or LTC lie within the apprentice (13%) group. In addition, the percentages of colleagues sharing their disability is higher within senior roles, which is contrary to the pattern seen across the local system.



There are particularly low numbers of Medics who declared themselves as having a disability or LTC. This is not unsurprising as the majority of doctors rotate through different Trusts, meaning that demographic data needs to be re-shared each time they join a new organisation.

In addition, there were 2,197 new starters in EPUT during this reporting period, which was lower than the previous year (2,435). All new starters are given the opportunity to share their information relating to a disability, LTC and required workplace adjustments. For this period, 7% of new starters stated that they have a disability, an increase of 1% since the previous report. This demonstrates that the Trust is in alignment with the NHSE EDI Improvement plan and the WDES by continuing to improve the experiences of our workforce who have a disability or LTC. Further information about the Improvement Plan is detailed at the end of this report.

#### WDES - Workforce Disability Equality Standard

Notable positives were seen across the following indicators:

- An area of notable improvement is disabled representation on the board. In this metric, we are in the top 10% of mental health and community trusts nationally
- Indicator 1: year on year improvement (+ 1.21%) in the number of colleagues sharing their disability status:
- Indicator 2: 22% of disabled staff being appointed from shortlisting which is an improvement in the overall likelihood score.

- Indicator 4b: The percentage of disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from Managers, colleagues and patients or members of public has decreased in all areas. With 7.9% of staff reporting that these incidents were reported when they occurred.
- Indicator 5 4.5% increase for disabled or LTC staff reporting that the Trust provided equal opportunities for career progression or promotion.
- Indicator 7 4.9% increase of disabled staff compared to non-disabled staff stating that they are satisfied with the extent to which their organisation values their work.
- Indicator 8- 2.5% increase of disabled staff stating that EPUT has made adequate adjustment(s) to enable them to carry out their work.

The full report can be accessed via WDES Report 2024 and Appendix A [intranet].pdf (eput.nhs.uk)

## Health and wellbeing

A comprehensive occupational health service is available to staff, to support their wellbeing within their working environment. Services include:

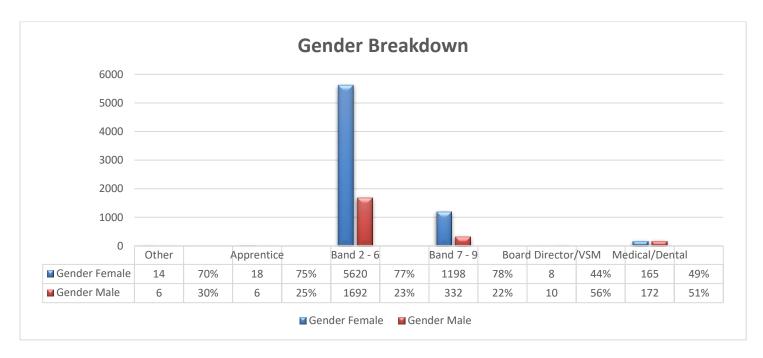
- · Health assessments
- Fitness to work/practice
- Permanent/temporary injury applications
- Detailed recommendations for work related rehabilitation (for example, phased return to work, re-deployment, adjustments to duties/post)
- Ill health retirement, providing advice in line with national guidelines
- Immediate response and follow-up service for staff with sharps injuries
- Pre-employment health assessments (including for international recruitment)
- · Fast track physiotherapy referral
- · Workplace adjustments for neurodivergent colleagues

The wellbeing of our colleagues is our priority; there are several aspects in place to help, manage and support individuals, such as:

- Here for you provides therapeutic support where difficulties are linked to the workplace.
   This could be stress, distress and/or trauma, which is impacting on a person's ability to be at work or carry out their duties. Continued support via the various EDI network meetings.
- Promoting wellbeing local and national wellbeing initiatives/programmes relating to mental and physical wellbeing.
- Utilising the Occupational Health service for advice/support on the health of staff in the workplace.
- Promoting the services of the Trust's EAP, which provides a range of counselling services, self-help programmes, as well as, a fast-track physiotherapy service.

# Staff Profile by Gender

**76% of the workforce are female**, which is a decrease of **1%** in comparison to the previous year's report, The Trust saw an increase of **1%** in our male workforce from last year's report. These figures are similar to the wider NHS, which is predominantly female.



The largest proportion of staff lie within AFC Bands 2-6, with a female workforce of **77%.** In comparison to last year, the percentage of female staff in senior management roles has remained the same at 44%.

A key part in enabling female colleagues to progress into senior roles is ensuring they are proportionally represented in talent management and leadership development programmes, as well as, identifying dedicated and bespoke development programmes.

## Pay Gap

The Trust adheres to the Government Equalities Office's Gender Pay Gap (GPG) reporting requirements and has a GPG action plan, in which it sets out its remedial objectives to address any gender pay inequality.

The GPG is defined as the difference between the mean or median hourly rate of pay that male and female colleagues receive. The mean pay gap is the difference between average hourly earnings of men and women. This is commonly known as the average and is calculated when you add up the wages of all employees and divide the figure by the number of employees.

It is important to stress that the gender pay gap is different to equal pay. Equal pay deals with the pay differences between men and women who carry out the same jobs, similar jobs or work of equal value. It is unlawful to pay people unequally because of their gender.

We are committed to providing equal opportunities and equal treatment for all employees, regardless of sex, race, religion or belief, age, marriage or civil partnership, pregnancy/ maternity, sexual orientation, gender reassignment or disability. We pay employees equally for the same or equivalent work, regardless of their sex or race (or any other characteristic set out above).

We deliver equal pay through a number of means but primarily through adopting nationally agreed terms and conditions for our workforce:

- National NHS AFC Terms and Conditions of Service
- Medical and dental staff are employed on national Terms and Conditions of Service (TCS) and pay arrangements

The full report can be accessed via gender-pay-gap-report-2024-final.docx (live.com)

## Flexible working

EPUT are aware from over the last 2 years the significance increase of flexible working requests, which appears to be a key priority for EPUT staff.

The implementation of the flexible working policy can often influence individuals in feeling supported and fulfilled in undertaking their role. Flexible working increases diversity and equality of opportunities for those with disabilities, caring responsibilities and provides further support during pregnancy or older colleagues who no longer wish to work full time.

## Table of flexible working request:

Category	2022/2023	2023/2024
Flexible Working	249	301

## Table flexible working requests age:

Age - Row Labels	Flexible Working
< 20	0
20's	42
30's	93
40's	65
50's	65
60's	33
> 70	3
TOTAL	301

The flexible working request for our female workforce is significantly higher (251) than for our male (50) workforce.

The Trust recognises more needs to be done to increase the equity of access and to demonstrate to line managers the extensive benefits in support flexible working requests, increasing productivity, retention and wellbeing. The Trust appointed the NHS People Promise Manager to develop strategies ensuring the benefits within these areas are developed and encourage.

## **Pregnancy & Maternity**

The data for this section breaks down active assignments which shows breaks or changes in staff employment. The Trust workforce data shows 8444 members of staff are in active assignments, of these active assignment the data show us 135 (1%) of staff have taken maternity or adoption leave which is a slight decrease from the previous year report. A further breakdown from the data reported within this period shows that the highest number of those who have taken maternity or adoption are paid AFC band 3.

#### Menopause

The majority of EPUT staff are likely to experience the menopause and therefore it is vital that we are providing a supportive working environment.

EPUT offer the following resources to support colleagues:

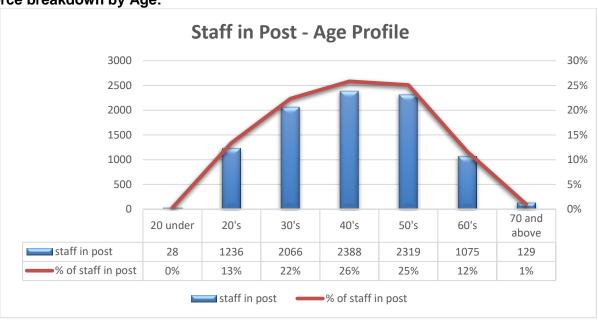
- The Menopause Café provides support and hosts events for all colleagues in relation to the menopause.
- Wellbeing hub accessed via EPUT intranet
- Menopause guidance and information on the staff internet website.
- Menopause advocates who provide awareness sessions for colleagues and managers.
- Employee experience managers who provide wellbeing support and guidance to staff

Managers also are able to record menopause related absence for their staff via the health roster system. This enables the Trust record reasons behind absence and gain a better understanding of the impact of the menopause on its staff and put in place appropriate support.

## Age profiles

EPUT consider all ages when it comes to filling vacancy rates. We know that hiring across a broad age range contributes to diversity and inclusivity. There has been a slight decrease in staff whose ages are within their 20's, a slight increase by 1% for staff in their 40's, and a slight decrease by 1% for staff in their 50's. All other age groups have remained the same. In comparison, the age demographic within the Trust is slightly below to that of the local area in which there large population aged 50 and above.

# Workforce breakdown by Age:



As a large portion of staff are entering retirement age between the age group 60-70 (13%), there is a need to offer support and build sustainable career pathways to help attract and retain the younger workforce to ensure that our service users continue to receive high-quality care. The Trust is actively engaging with young people in local communities by:

- Hosting recruitment drives
- Working with local schools, colleges and universities, encouraging young adults to consider a career within the NHS.
- Promoting the benefits of the NHS apprenticeship schemes available at the Trust.

#### Flexible Retirement

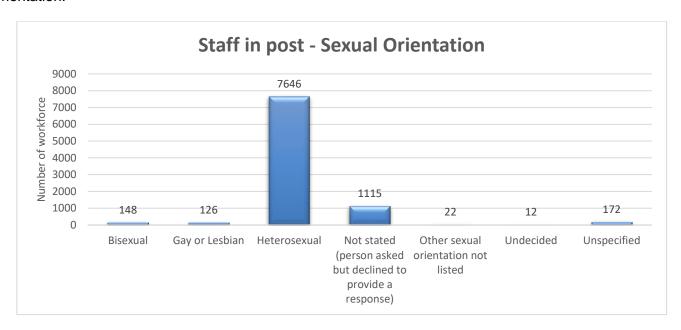
Within the reporting period EPUT saw 116 members of staff leave due to retirement. EPUT appreciates the benefits of retaining the knowledge, skills and experience of its older employees and, therefore, offers a range of flexible retirement options to support the health and wellbeing of staff. Options include:

- Step Down;
- Retire and Return;

- Partial Retirement:
- Early Retirement Reduced Buy Out.

#### **Staff Profile Sexual Orientation**

The majority of staff declared their sexual orientation as heterosexual (83%) which is a 2% increase from the previous year's report.3% of the workforce declared their sexual orientation as lesbian, gay, bisexual, transgender, queer/questioning and any other gender identified (LGBTQ+), which has remained the same from the previous year's report. There was a 10% reduction of staff choosing to not declare their sexual orientation.



The Trust is conscious that the percentage of staff who shared their sexual orientation as LGBTQ+ is extremely low; this could be a result of anticipated discrimination, bullying and harassment, hate crimes and fear of being undermined.

EPUT updated the Equality, Inclusion and Human Rights policy and procedure with additional guidance for managers to support transgender staff members and patients, this was developed in collaboration with the LGBTQ+ Network in EPUT as well as contribution from the East of England Rainbow Network. EPUT recognises there is more that can be done to support its LGBTQ+ colleagues in terms of offering reassurance, physiological safe spaces, further LGBTQ+ training and resources. The Trust provides resources and guidance for colleagues on the EDI hub, embedded the LGBTQ+ diversity network and develop a Transgender guidelines.

#### Staff Profile Marriage & Civil Partnership

The marital status with the highest percentage reported was married, with single following closely after. Since our previous report, there has been an increase for those selecting unspecified by 4%; this could be due to the fact that staff no longer had the option to select 'unknown'. We have seen a slight decrease in the following statuses: married, single, divorced, legally separated, widowed, and civil partnership.



The Trust ensures all colleagues have equal opportunities and recognition, regardless of marital status, by keeping HR policies are current and up to date in line with employment law. The Trust also encourages colleagues to update their status on ESR.

## Staff profile Religious Belief

When reviewing the religious beliefs declared by EPUT's workforce, we can see the most highly represented religious belief is **Christianity (51%)** and **Atheism (15%)**. **17%** of staff did not disclose their religious belief this year; this also reflects the current Census as more people across the UK selected the option, 'No Religion' as their belief.

## Table below workforce breakdown religious Belief:

	Religious Belief										
AFC Band	I do not wish to disclose my religion/belief	Atheism	Christianity	Buddhism	Hinduism	Islam	Jainism	Judaism	Other	Sikhism	Unspecified
Other	3	5	10	0	0	0	0	1	1	0	0
Apprentice	3	12	9	0	0	0	0	0	0	0	0
Band 2	142	81	286	8	6	26	0	2	49	1	15
Band 3	405	326	1855	12	44	174	1	5	223	15	35
Band 4	191	188	442	2	9	26	0	2	83	0	33
Band 5	154	146	684	3	24	40	0	2	77	5	13
Band 6	245	257	708	9	33	38	0	6	143	5	33
Band 7	204	173	381	6	19	15	0	4	89	1	21
Band 8a	60	82	138	5	8	12	0	1	23	2	13
Band 8b	28	29	73	1	4	4	1	0	12	1	2
Band 8c	16	13	24	0	3	1	0	0	4	1	4
Band 8d	12	2	19	0	1	1	0	1	2	1	3
Band 9	2	2	6	0	0	0	0	0	0	0	0
Board Director/VSM	2	4	7	0	1	1	0	0	3	0	0
Medical/Dental	92	21	85	7	49	65	1	2	6	2	7
Total	1559	1341	4727	53	201	403	3	26	715	34	179
%	17%	15%	51%	1%	2%	4%	0.03%	0.3%	8%	0.4%	2%

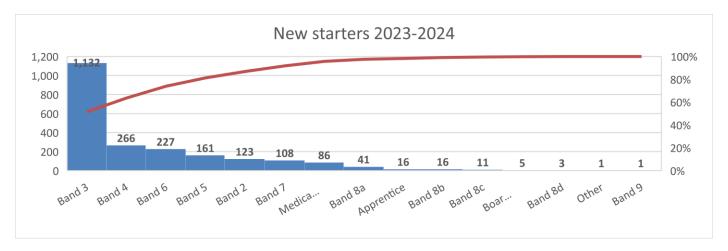
EPUT pays due regard to religious beliefs by promoting the Faith and Spirituality Diversity Network, and celebrating religious festivals and events. The Trust encourages staff to update their religious status on

ESR to support the Trust in providing equal opportunities for all faiths and non-faiths. The Interfaith and Spirituality Diversity Network works in collaboration with the Trust chaplaincy services, offering emotional, spiritual and religious guidance to all colleagues. Newly embedded prayer rooms have been provided, to enable staff to have space for prayer and reflection.

#### 5. NEW STARTERS & LEAVER PROFILE

The Trust has taken action to promote a more diverse workforce by embedding a fairer recruitment process, facilitating a large recruitment drive and introducing the international recruitment programme.

There were **2197** new starters in EPUT during this reporting period, a reduction of 9% from the previous year **(2435)**. The majority of new starters were employed in Band 3 or Band 4 posts.



The demographic composition of new starters within the Trust:

**Ethnicity:** The total percentage of all new starters from ethnic minority backgrounds during this reporting period was 53%. This is an increase from the previous year's report by 47%.

Age: The highest percentage of new starters are those aged in their 20's (24%), 30's (24%) and 40's (26%)

**Gender:** The workforce is predominately female which reflects in the new starters data - 71% new starters were female and 29% were male. In comparison from last year's report, we saw a 4% decrease of female new starters, but saw an increase of 4% of male new starters

**Disability:** Overall **7%** of new starters stated that they have a disability, an increase of **1%** since the previous year report.

**Sexual Orientation:** The highest representation for sexual orientation was heterosexual (86%), followed by 10% of new starters declining to provide a response. 4% of our new starters were from an LGBTQ+ background, a 1% increase from the previous year. As a Trust we recognise that the current ESR data collected on a national level falls short on the recording of gender identity for our transgender and non-binary staff members.

**Religious Belief:** The highest representation of religious belief within new starters was Christianity (57%), followed by Atheism 16%, which reflects the figures of the local demographics. However, there were a large number of new starters who chose not to disclose this information (11%).

**Marital Status:** The highest declared marital status was married with 1004, which is a decrease of from the previous year. This was followed closely by Single 963, a decrease from the previous year.

These figures reflect the dedication and work in appointing and retaining a diverse workforce. To align with the NHS EDI High Impact Action Plan, as well as the WRES/WDES action plans, EPUT continues to strive:

- To improve the recruitment process by developing and embedding the De-Bias toolkit for hiring managers to ensure the process is fair for all.
- To promote and build awareness of the Disability Confident Scheme.
- To promote its status as a Disability Confident Leader on all job advertisements

#### Leavers

Turnover is calculated by dividing the number of employees who left by the average number of employees, then multiplying by 100. Our overall turnover rate was 10%, which remains the same as previous year's report. The highest proportion of leaver's falls within AFC bands 2-6.

Out of the 1,347 leavers, 45% of were planned (end of fixed term contracts, retirements and employee transfers) and 55%were unplanned exits (death in service, dismissal and voluntary resignation). 48% of unplanned leavers were recorded as 'other' or 'unknown'. ..

## Planned/Unplanned Workforce Turnover:

Planned/Unplanned Turnover	Leaving Reason	TOTAL
Planned	End of Fixed Term Contract	13
	End of Fixed Term Contract - Completion of Training Scheme	15
	End of Fixed Term Contract - End of Work Requirement	14
	End of Fixed Term Contract - External Rotation	2
	End of Fixed Term Contract - Other	11
	Flexi Retirement	0
	Merged Organisation - Duplicate Record	1
	Mutually Agreed Resignation - Local Scheme with Repayment	0
	Retirement - III Health	10
	Retirement Age	116
	Redundancy - Compulsory	3
	Voluntary Early Retirement - no Actuarial Reduction Voluntary Early Retirement - with Actuarial Reduction	
	Bank Staff not fulfilled minimum work requirement	415
	Planned Total	610

Planned/Unplanned Turnover	Leaving Reason	TOTAL
Unplanned	Dismissal - Capability	13
	Dismissal - Conduct	27
	Dismissal - Some Other Substantial Reason	6
	Dismissal - Statutory Reason	1
	Voluntary Resignation - Adult Dependants	4
	Voluntary Resignation - Better Reward Package	31
	Voluntary Resignation - Child Dependants	14
	Voluntary Resignation - Health	39
	Voluntary Resignation - Incompatible Working Relationships	10
	Voluntary Resignation - Lack of Opportunities	13
	Voluntary Resignation - Other/Not Known	354
	Voluntary Resignation - Promotion	60
	Voluntary Resignation - Relocation	56
	Voluntary Resignation - To undertake further education or training	30
	Voluntary Resignation - Work Life Balance	74
	Unplanned Total	737

The demographic composition of leavers for the Trust:

**Ethnicity:** 42% of leavers were from ethnic minority groups, which is an increase of 16% in comparison to the previous year's report.

**Disability:** 6% of all leavers identified themselves as having a disability, an increase of 5% in comparison to the previous year.

**Gender**; 74% of leavers were female and 26% were male, which is proportionate to the overall workforce. We can see a slight decrease in female leavers (2%) and an increase of male leavers (5%) from the previous reporting period.

**Religion;** The highest percentage of leavers declared themselves as Christian (54%), which is proportionate to the overall workforce.

**Sexual Orientation:** 5% of leavers were LGBTQ+, an increase of 2% compared to last year. This increase may be partially due to improvements in the quality of data as staff feel more confident in disclosing their sexuality on ESR.

**Age:** The average percentage of leavers remains equal across the 20-60 year age groups, however leavers which fall within the age group of 70 remains at 2% the same as the previous year's report.

It is encouraging to see there hasn't been an overall increase in leavers within the Trust. This is due to a combination of the Trust's initiatives to improve staff retention, improved access to career development opportunities, and fewer dismissals.

#### 6. PROMOTIONS

There were **510** promotions during this reporting period, which is a 9% decrease from the previous year **(559)** and a 62% decrease from the 2021-2022 reporting period **(1,338)**., This could be as a result of no promotional vacancies or appropriate candidates for the role.

The demographic composition of staff who have been promoted within the Trust:

**Ethnicity: 30%** of staff who were promoted were from a BME background. This is a **23% increase** in comparison to last year's report.

**Disability: 8%** of the staff that were promoted declared that they had a disability, which is a **1%** decrease in comparison to last year's report.

**Gender Breakdown: 78%** of the promotions were female, while **22%** were male (an increase of **1%** in comparison to last year's data).

**Religious Belief:** The highest number of promotions came from those who declared themselves as Christian, which is representative of the underlying workforce.

**Sexual Orientation:** The highest proportion of staff who were promoted declared themselves as heterosexual (87%), which aligns to the overall workforce of the Trust. The percentage of LGBTQ+ staff who received a promotion remains unchanged at 4% in comparison to last year.,

**Age:** The data shows EPUT's staff promotions falls within the younger and older adults appearing more frequently within the workforce aged group 26 - 55.

Please note there is no marital status breakdown for promotions.

The Trust recognises the importance supporting staff throughout their career within EPUT and encourage career progression and development by providing the following initiatives::

- Management Development Programme
- Ward Manager Programme
- Leadership Development Programme
- RISE Programme
- Career Lounge for BME colleagues.

# 7. EMPLOYEE RELATIONS (ER)

Data in this category includes the following:

- The number of staff undergoing a disciplinary hearing
- The number of staff submitting formal grievances,

- The number of staff who have been the subject of investigation and capability procedures the number of allegations made in relation to bullying and harassment (Dignity at Work)
- The number of staff whose level of sickness absence prompted formal action as detailed in the Trust's Management of Sickness & III Health Procedure.

The data includes all staff (permanent and bank workers) across all pay bands.

Type / Category (reporting only)	Number of cases - 2022/23	Number of cases - 2023/24		
Capability	22	22		
Conduct	67	96		
Temporary Worker Conduct	82	149		
Flexible Working	249	301		
Grievance	59	84		
Temporary Worker Complaint	17	18		
Sickness	14	10		
TOTAL	510	680		

The table above shows the majority of formal capability process has remained the same from the previous reporting period, with the exception of cases relating to sickness absence which has seen a slight decrease. We can see an increase across other areas particularly in cases relating to flexible working. The increase in cases relating to flexible working requests may be a result of the implementation of The Employment Relations (Flexible Working) Act 2023, which enables employees to submit two flexible working requests per year (rather than one), as well as, no longer requiring them to explain the effect of their requested change.

The demographic composition of staff who were involved in ER cases within the Trust:

**Ethnic:** In comparison to the previous year's report we have seen an increase in formal cases overall, including **an increase in cases involving our BME staff**. Most staff who are involved in ER cases are white British (55%), with just under half of cases (45%) being attributed to workers from a BME background which in comparison is high due to the 37% of EPUT workforce is BME. 79 flexible working applications were submitted from BME employees, with a further 221 from non-ethnic employees. **Of the 96 conduct cases 53 were from BME staff**;

**Disability:** 10% of ER cases involved staff who identified as having a disability or long term health condition, an increase of 3% since the previous reporting period. In comparison, 79% of cases involved staff who declared that they did not have a disability an increase of 2% from the previous year.

**Gender:** The gender breakdown of staff involved in ER cases is (102) for men and (143) for women. This figure is particularly high for male staff as nearly a quarter of the workforce are men.

**Religious:** Christianity (55%) is the highest declared religion followed by "I do not wish to disclose my religion or belief" (15%).

**Sexual Orientation:** 11% of staff who have been involved in ER cases have chosen not to disclose their sexual orientation, which is a decrease of 3% in comparison to the previous year. It should be noted the ER team have included reporting on 'other sexual orientation, not listed' and 0.1% of staff selected this option.

**Age:** The majority of staff who were involved in ER cases were aged group 30 - 50, this is aligned with the Trust's overall workforce as this is the largest age group within the Trust. The main areas for ER procedures falls within conduct, flexible working and grievance.

#### 8. EQUALITY DELIVERY SYSTEM

The Equality Delivery System (EDS) designed by NHS England to support the NHS in making improvements on equality, diversity, wellbeing and inclusion for the benefit of patients and staff.

- Domain One: Commissioned or provided services led by the Patient Experience Team and graded by patient, carers and volunteers.
- Domain Two: Workforce Health and Wellbeing led by the Employee Experience Team and graded by staff volunteers.
- Domain Three: Inclusive Leadership led by the Employee Experience Team and graded by an independent evaluator, peer reviewer and trade union representatives

EPUT has seen an improvement in both Domain 1 and Domain 3 whilst Domain 2 remains consistent. It is encouraging to have improvements as it shows a positive perception of our services from both an internal perspective within our workforce and an external perspective from our patients and independent adjudicators. Under the EDS rating EPUT was rated as 'achieving'.

To achieve and monitor progress we will:

- Align action plans for each domain with the WDES, WRES, and EDI Improvement Plan
- Track and monitor actions via the EDI committee, Employee Experience Team and patient feedback.

#### 9. CONCLUSION

Whilst we acknowledge the improvements in declarations rates for many protected characteristics within 2023/2024, the Trust are aware that extensive efforts are required to reach its objectives and to fully embed EDI across the organisation.

We are committed to challenging discrimination, both within our workforce and the care we provide. Our new People and Education Strategy and Trust Behavioural Framework is aligned with the Trust's values and objectives, on the basis that everyone takes an active role to reduce inequalities, respects one another and builds an open and equitable culture within our organisation. We believe that EDI is everyone's responsibility, not the function of a single team.

We are working to meet targets set by the <u>NHSE EDI Improvement Plan</u>. Launched on June 2023, the Plan outlines a strategic approach to enhance EDI within the NHS workforce. It aims to dismantle prejudice and discrimination through behaviour, policies, practices, and culture. Developed collaboratively with staff networks and leaders, the Plan emphasises intersectionality, recognising the complex identities of individuals.

Improvements will be made, through a number of approaches led by the Trust's Executive Board and The People and Culture and The People and Culture Team. Our approaches to improve EDI will be aligned with NHSE EDI Improvement Plan and will incorporate the WRES, WDES, staff survey in order to create a diverse and inclusive culture at work and ensure there is fair representation at all levels of the Trust.

#### Key focusses for 2024/2025 will be:

- EDI Networks ensuring each Executive Sponsor is actively participating in their allocated EDI network.
- Recruitment Improving proportional representation of ethnicity, gender, disability and sexual orientation in all band and roles by:
  - Implementing the De-bias Recruitment Toolkit

- Encouraging the use of NHS values-based questions
- Embedding Inclusion Ambassadors to drive actions to mitigate potential bias within recruitment
- Delivering targeted workshops and career development lounges for minority staff, such as the Trust's leadership and management programs, as well as, the RISE program.
- Training promoting the refreshed EDI training to EPUT staff, embedding this within the
  management development and leadership programmes, and b promoting inclusive behaviours and
  influencing cultural change within the organisation.
- Reasonable Adjustments improving the working experience of staff with a disability or long term
  health condition by ensuring staff are provided with reasonable adjustments and promoting disability
  passport.
- ER Cases Reducing the number of incidents of staff with a disability or long term health condition
  entering formal capability process in comparison to their non-disabled counterparts by changing the
  culture around how complaints and investigations are completed, ensuring decisions are informed
  and based on evidence, which will reduce the number of incidents specially relating to staff with
  disabilities or long term health conditions.
- Behavioural Framework utilising the Framework to improve patient and employee experience in order to reassure patients and staff that the Trust takes a zero tolerance approach to violence and abuse.
- Continuous Improvement To continuously learn, lead and improve policies and procedures in relation to EDI by listening and responding to feedback provided by our staff, service users, volunteers and networks.

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