

Diversity Report October 2009 to March 2010

Human Resources Department May 2010

CONTENTS			
	Page		Page
Introduction	3		
1. Employees			
1.1 Table 1: Staff in Post by Ethnic Group and Function	5	3. Leavers	
1.1 Table 2: Staff in Post by Ethnic Group and Pay band	6	3.1-3.5 Leavers by Ethnic Group, Age, Gender, Hours & Disability	22
1.1 Table 3 & 4: Ethnic Groups in Post and Local Population	7		
1.1 Commentary	8	4. Promotions	
1.1 Table 5: Progress against Targets & Actions	9	4.1-4.5 Promotions by Ethnic Group, Age, Gender, Hours &	23
		Disability	
1.2 Table 1: Staff in Post by Age and Function	11		
1.2 Table 2: Staff in Post by Age and Pay Band	11	5. Learning & Development	
1.2 Table 3: Progress against Targets and Actions	12	5.1-5.5 Learning & Development by Ethnic Group, Age, Gender, Hours & Disability	24
1.3–1.5 Table 1: Staff in Post by Gender, Hours, Disability and	14	5.6-5.7 Number of applications and applicants for training and	25
Function 1.3-1.5 Table 2: Staff in Post by Pay Band	14	numbers attended by Ethnic Group, Age, Gender & Disability	
			26
1.3 -1.5 Progress against Targets and Actions	16	6. Bullying & Harassment	26
2. Applicants		7. Disciplinary Events	26
2.1 NHS Jobs applicants and outcomes by Ethnic Group	18		
2.2 NHS Jobs applicants and outcomes by Age	19	8. Grievances	26
2.3 NHS Jobs applicants and outcomes by Gender	19		
2.4 NHS Jobs applicants by Disability	19		
2.5 NHS Jobs applicants by Religion	20		
2.6 NHS Jobs applicants by Sexuality	20		

INTRODUCTION

This is the twelfth report specifically on diversity produced by the Human Resources Department of NHS Rotherham. It covers the period from October 2009 to March 2010 and looks at the diversity of staff in post, applicants to posts in the PCT, leavers, promotions, learning & development, bullying and harassment and disciplinary events.

To aid clarity, we have attempted to produce the maximum amount of useful information from a minimum number of tabulated data, although more detailed data is available on request.

The information contained in this report is regularly used within the HR Department to identify and monitor progress and efficacy of HR-related actions to address areas of need. The statistics on staff in post by ethnic origin is incorporated into the Professional Executive and Board quarterly Key Data reports and the NHSR Annual Report. The content of periodic Equality and Diversity in Employment Strategic Progress reports, produced for NHSR Directors, the Professional Executive Committee and Commissioner and Provider Boards is heavily based on quantitative data and analysis and trends contained in the Diversity Reports. If a significant issue is identified from the Diversity report monitoring process, this would be discussed with the HR Department and brought to the attention of the NHSR Equality, Diversity and Human Rights Steering Group and NHSR Directors to discuss and consult on a way forward to address the issue(s).

This report includes information from the whole of NHS Rotherham, which has now split into two separate functions – commissioner and provider. However, until new organisations have been formally established, equality and diversity issues will be covered in a single report for NHS Rotherham.

NOTES ON DATA COLLECTION

Whilst information systems are in place to enable us to monitor key elements in line with our legislative duty under current anti-discrimination and equality legislation, the following should be noted:

- 1. Movements in numbers of staff in post between reporting periods, reconciled to leavers and new starters
 - a. Leaver data does not include employees employed on flexible contracts, nor does it include employees TUPE transferring to another NHS organisation or internal promotions across staff group. Promotions are monitored separately in their own right within this report.
 - b. Leaver information contained in the Diversity database is dependent upon managers informing HR at a timely point and as close to the leaving date as possible. This will enable leaver information to be reported within the appropriate period and also be reflected in the staff-in-post statistics for the same period.
 - c. New Starters may not commence employment until the next monitoring period yet actually be successfully offered a post in the current monitoring period. This will mean that whilst they are included in the applicants offered posts data in one Diversity Report, they will not necessarily be included in the staff in post figures in the same Report.
 - d. Until ESR Self-Service is fully rolled out, some new starter diversity information and in-post status is collated from new starter forms. There is the possibility of different personal diversity information being submitted from new starters to that submitted on application forms by job applicants. As a result there can be inconsistencies in diversity data (e.g. ethnic origin may differ for the same individual) contained in a diversity report for applicants offered post and for those same individuals contained within the staff-in-post data in the same or subsequent reports.
 - e. The staff in post data represents what employees themselves identify for their own diversity details (i.e. ethnic origin, date of birth, gender and disability) on their new starter form.

Other data is determined from

- 1. Diversity data provided by job applicants on the NHS Jobs application forms
- 2. Outcomes data provided by managers via:
 - new starter forms (for staff in post)
 - leavers forms (for leavers)
 - learning activity agreements (for learning and development)
 - contractual change forms (for part-time workers or flexible working or internal promotions/job changes)
 - recruitment and selection outcomes forms (for successful and unsuccessful applicants)
 - Disciplinary events log forms
 - Grievance events log forms
 - Bullying & Harassment log forms (can be completed by line manager or contact officer)
 - Direct input by ESR manager/administrator self-service
- 3. Population data is from the national census of 2001. Although later estimates are available, there are some doubts as to validity and we have chosen to continue using 2001 data to enable comparisons with other organizations who publish equality and diversity data.

All of the above is subject to the risk of human error in terms of accuracy and completeness of information submitted to HR and HR inputting errors when the information is put on to the monitoring database, which may occur from time to time.

With the above limitations in mind, issues and recommendations identified and arising from the data will be highlighted in the supporting text alongside the tables.

1.1 Table 1 - NHSR Staff in post by function analysed by Ethnic Group at 31st March 2010 (Not including recharged staff not directly employed by NHSR)

Staff Group	White British	White Irish	White Other	Mixed white/ black caribb	Mixed white/ black African	Mixed white/ Asian	Other mixed	Indian	Paki- stani	Bangla -deshi	Other Asian	Black caribb	Black African	Other black	Chinese	Other ethnic group	Not stated	Total
Other PCT Managers ¹ % by ethnic group	79	2	2	0	0	1	0	0	0	0	0	0	1	0	0	0	2	87
	90.80	2.30	2.30	0.00	0.00	1.15	0.00	0.00	0.00	0.00	0.00	0.00	1.15	0.00	0.00	0.00	2.30	100.00
Qualified Nurses	456	0	1	0	0	1	1	1	2	0	0	2	2	0	0	2	0	468
% by ethnic group	97.44	0.00	0.21	0.00	0.00	0.21	0.21	0.21	0.43	0.00	0.00	0.43	0.43	0.00	0.00	0.43	0.00	100.00
Healthcare Support % by ethnic group	389	0	2	1	0	0	0	1	3	0	0	0	1	0	0	1	0	398
	97.74	0.00	0.50	0.25	0.00	0.00	0.00	0.25	0.75	0.00	0.00	0.00	0.25	0.00	0.00	0.25	0.00	100.00
Qualified ST&T staff ² % by ethnic group	268	1	3	0	0	1	0	3	1	1	1	0	1	1	0	2	0	283
	94.70	0.35	1.06	0.00	0.00	0.35	0.00	1.06	0.35	0.35	0.35	0.00	0.35	0.35	0.00	0.71	0.00	100.00
Medical & Dental	29	0	5	0	0	0	0	11	1	1	3	0	1	0	0	0	1	52
% by ethnic group	55.77	0.00	9.62	0.00	0.00	0.00	0.00	21.15	1.92	1.92	5.77	0.00	1.92	0.00	0.00	0.00	1.92	100.00
Admin & Clerical % by ethnic group	436	1	5	0	1	1	0	1	8	0	2	1	1	1	1	1	0	460
	94.78	0.22	1.09	0.00	0.22	0.22	0.00	0.22	1.74	0.00	0.00	0.22	0.22	0.22	0.22	0.22	0.00	100.00
Nursing Learners	4	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	5
% by ethnic group	80.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20.00	0.00	0.00	0.00	0.00	100.00
Total no. staff % of total staff	1661	4	18	1	1	4	1	17	15	2	6	3	8	2	1	6	3	1753
	94.75	0.23	1.03	0.06	0.06	0.23	0.06	0.97	0.86	0.11	0.34	0.17	0.46	0.11	0.06	0.34	0.17	100.00
% Rotherham pop ³	95.94	0.43	0.53	0.14	0.04	0.20	0.11	0.20	1.90	0.01	0.12	0.07	0.07	0.02	0.12	0.11	-	100.00

¹ All Managers in NHSR who do not belong to one of the other functional groups represented.
² Includes all professionally qualified healthcare professionals other than nursing and medical
³ Based on Residential Population for Rotherham 2001 Census published by Office of National Statistics.

1.1 Table 2 NHSR Staff in post by Pay Band analysed by Ethnic Group at 31st March 2010

Staff Group	White British	White Irish	White Other	Mixed white/ black caribb	Mixed white/ black african	Mixed white/ Asian	Other mixed	Indian	Paki- stani	Bangla -deshi	Other Asian	Black caribb	Black African	Other black	Chinese	Other ethnic group	Not stated	Total
On non-A4C scales	55	0	6	0	1	0	0	11	2	0	3	0	1	0	0	0	1	81
% by ethnic group	67.90	0.00	7.41	0.00	1.23	0.00	0.00	13.58	0.00	0.00	3.70	0.00	1.23	0.00	0.00	0.00	1.23	100.00
Band 7-9	354	3	4	0	0	3	0	2	1	1	0	0	2	1	0	3	2	376
% by ethnic group	94.15	0.80	1.06	0.00	0.00	0.80	0.00	0.53	0.27	0.27	0.00	0.00	0.53	0.27	0.00	0.80	0.53	100.00
Band 5-6	538	1	2	0	0	1	1	2	8	0	2	3	3	0	0	1	0	562
% by ethnic group	95.73	0.18	0.36	0.00	0.00	0.18	0.18	0.36	1.42	0.00	0.36	0.53	0.53	0.00	0.00	0.18	0.00	100.00
Band 3-4	500	0	6	0	0	0	0	2	3	0	1	0	1	1	1	1	0	516
% by ethnic group	96.90	0.00	1.16	0.00	0.00	0.00	0.00	0.39	0.58	0.00	0.19	0.00	0.19	0.19	0.19	0.19	0.00	100.00
Band 1-2	214	0	0	1	0	0	0	0	1	0	0	0	1	0	0	1	0	218
% by ethnic group	98.17	0.00	0.00	0.46	0.00	0.00	0.00	0.00	0.46	0.00	0.00	0.00	0.46	0.00	0.00	0.46	0.00	100.00
% Rotherham	95.94	0.43	0.53	0.14	0.04	0.20	0.11	0.20	1.90	0.01	0.12	0.07	0.07	0.02	0.12	0.11	-	100.00
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PLEASE NOTE: Medical and dental staff and senior executives remain outside the Agenda for Change process.

The most under-represented group across functions and each Agenda for Change pay band is of Pakistani origin. Within the Band 7-9 range there would need to be around 6 more people at that level to be reflective of their presence in the local population.

In Band 5-6 NHSR would require 3 more employees of Pakistani origin to be representative.

In Band 3-4 NHSR would require 7 more employees of Pakistani origin to be representative.

In Band 1-2 NHSR would require around 3 more employees of Pakistani origin to be representative.

1.1 Table 3
NHSR Employees Representation compared to local population by Ethnic Group — Summary of Changes

Staff Group	Total Asian	Total Black	Chinese	White Other	White Irish	Other	Total Ethnic Minority Groups	Total British White	Total not stated
% Total Staff	2.28	0.74	0.06	1.03	0.23	0.75	5.09	94.75	0.17
% Rotherham Population	2.23	0.16	0.12	0.53	0.43	0.60	4.06	95.94	0.00
Variance	+0.05	+0.58	-0.06	+0.50	-0.20	+0.15	+1.03	-1.19	+0.17
% Total Staff 12 months earlier: 31 March 2009	2.36	0.80	0.05	0.70	0.21	0.85	4.97	94.85	0.16
% Variance between 31st March 2010 and position 12 months previously	-0.08	-0.06	+0.01	+0.33	+0.02	-0.10	+0.12	-0.10	+0.01

The percentage of Asian employees of NHSR has decreased since the previous report, however rises in the percentage of white other employees has resulted in an overall increase in the proportion of ethnic minority staff compared to white British staff.

1.1 Table 4
NHSR Employees Representation compared to local population by Ethnic Group – numbers in post

Staff Group	White British	White Irish	White Other	Mixed white/ black caribb	Mixed white/ black african	Mixed white/ Asian	Other mixed	Indian	Pakistani	Bangla - deshi	Other Asian	Black caribb	Black African	Other black	Chinese	Other ethnic group	Not stated	Total
% Rotherham pop	95.94	0.43	0.53	0.14	0.04	0.20	0.11	0.20	1.90	0.01	0.12	0.07	0.07	0.02	0.12	0.11	-	100.00
Actual in post	1661	4	18	1	1	4	1	17	15	2	6	3	8	2	1	6	3	1753
"Ideal" proportion	1682	8	9	2	1	4	2	4	33	0	2	1	1	0	2	2	0	1753

This table demonstrates the number of employees that ideally should be in post if the workforce as a whole was to be representative of the local population origin in order to be in line with representation within Rotherham's population.

1.1 Commentary

There has been little change in the proportionate representations of ethnic groups employed over the past 12 months, and the total ethnic minority representation within the PCT workforce continues to slightly outstrip that of the local population.

Pakistani representation remains the highest under-represented group, slightly increasing to 15 employees, 18 less than would be required to be locally proportionate. Representation remains low across all levels and functional groups. Various remedial actions are being put in place through the vehicle of the Single Equality Scheme and the associated action plan which will be monitored by the Equality, Diversity and Human Rights Steering Group. Actions include recruiting managers offering constructive post-interview feedback on performance to unsuccessful interviewees from under-represented groups (including interviewees from Pakistani backgrounds and disabled people).

By contrast, Indian representation remains above that of the local population overall and across all levels and the majority of functional groups. However, the spread across pay levels and functional groups is variable e.g. other Asian employees mostly occupy Medical & Dental posts and currently reside on old pay scales.

White Irish is significantly under-represented (4 employees with 8 as the target representation) overall. White British representation is now slightly below that of the local population, by around 21 employees, although still with significant under-representation in Medical and Dental posts.

Black Caribbean and Black African and Other Black employee representation proportionately exceeds that of Rotherham by 2 and 7 and 2 employees respectively. However, representative spread across functional groups is variable, the majority of employees of Black Caribbean and Black African groups occupying qualified nursing and ST&T posts and in bands 5 -6. The employee of Other Black origin occupies an ST&T post. There is now one black employee in an NHSR management role.

Representation of employees of Other Mixed and Other ethnic groups exceed representation in Rotherham with spread across pay level and groups remaining variable.

1.1 Table 5. Summary of Progress against Targets to improve representation in line with that of the local community

Targets identified within 2005/6 Equality & Diversity Strategic Action Plan

	Local Target at April 2005	Progress against Target	Conclusion
•	To achieve BME representation in line with that of the Rotherham population at 4.06% i.e. 68 employees ⁴ .	BME representation exceeds local BME representation in local population. Total White British population is less than presence of that group within the local population.	The Total BME employee % at March 2003 was 4.18%. This total is now 5.09% of total workforce or 89 people and more than the representation within Rotherham of 4.06%.
	To increase Pakistani, and White Irish representation to that of the Rotherham population (1.9%, 0.43% i.e. 35 and 8 employees ⁶ respectively)(12 and 1 employees respectively, in post at 31.03.05)	The representation of White Irish origin has decreased since September 2004. Pakistani representation has slightly increased in the last period.	These groups remain significantly under- represented across the total workforce and all pay bands and functional groups compared to their % representation within Rotherham.
•	To ensure reasonable spread of representation across departments and all levels.	Reasonable spread across staff groups and pay bands is not being achieved in all areas – see 1.1 commentary.	Spread of representation of most BME groups is variable and below reasonable levels in bands 1-2, 3-4. Representation in PCT manager, Qualified Nursing, Nursing Support, AHP Support and Ancillary roles remains low.
•	To increase spread of Chinese representation across all staff groups. Increase total representation to 0.12% i.e. 2 employees (0 employees in post at 31.03.05)	We now employ 1 employee of Chinese origin.	

⁴ Ideal number of employees is based on total employees on workforce at 31 Mar 2005 of 1664. Numbers will change proportionately with increases and decreases in total number of staff in post over time.

ACTIONS:

The continued focus of promoting employability opportunities will further enhance NHSR's reputation as an equal opportunities employer. The NHSR's current financial position is recognised and it is anticipated that any external funding for employability schemes will be utilised if appropriate and available. In the absence of any specific funding for the continued promotion of employability schemes it is proposed that employability opportunities and positive action initiatives to address under-representation of ethnic and other diverse groups be kept on the agenda through a variety of mechanisms:-

- Closer working with Jobcentre plus and any other relevant agencies to increase under represented areas in the workforce and to access any appropriate schemes including external funding
- An Employability Advisor was employed for an 18 month period. This has now come to an end, but allowed a focus on encouraging different minority groups into NHSR, including disabled people; young people e.g. school leavers, people with mental health issues etc. Work with local agencies took place in order to improve vital connections.
- Working with under-represented areas of the community and schools to raise awareness of the various employment opportunities and entry routes which NHSR and the NHS has available, including apprenticeships, work placements.
- ❖ A research study involving the collation and analysis of primary and secondary data was undertaken by an HR Manager to identify barriers to employment specifically underlying Pakistani employees' under-representation within NHSR. The report's recommendations focus on practical and achievable positive action initiatives (as previously described) to remove those barriers and increase the number of applicants applying and succeeding in their applications for jobs/ employability opportunities across all Rotherham Pakistani groups. The actions have been incorporated into NHSR's Single Equality Scheme.

The employability approach is part of NHSR's current organisational development/human resources strategy and contributes to achieving the aims of the equality and diversity strategic agenda as well as going towards meeting the aims of the Care Quality Commission development standards. Critically, the employability focus also contributes towards NHSR's purpose of improving health.

1.2 Table 1 NHSR Staff in post by age and function at 31st March 2010

Staff Group	<20	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-69	Total
Other NHSR Managers ⁵	0	0	3	9	12	15	17	20	10	1	87
Qualified Nurses	0	3	31	40	53	85	99	108	34	15	468
Healthcare Support	0	10	28	25	43	57	75	63	53	44	398
Qualified ST&T staff ⁶	0	16	38	39	51	56	38	27	15	3	283
Medical & Dental	0	0	2	6	8	3	8	12	5	8	52
Admin & Clerical	11	20	44	37	67	61	83	70	38	29	460
Nursing Learners	0	0	2	1	2	0	0	0	0	0	5
Total no. staff	11	49	148	157	236	277	320	300	155	100	1753
% of total staff	0.63	2.80	8.44	8.96	13.46	15.80	18.25	17.11	8.84	5.70	100.00
Rotherham %	*	8.01	9.37	12.01	12.27	11.62	10.25	11.30	9.58	15.52	100.00
Difference from Rotherham %		-5.21	-0.93	-3.05	+1.19	+4.22	+8.00	+5.81	-0.74	-10.18	

^{*} As 100% of the workforce are between 18-69, the local population outside this age range cannot be considered as the catchment workforce. Therefore, the local population only of working age 16-64 has been re-aggregated to give a catchment of 100%. Therefore, although 5.10% of the *total* population is aged 20-24, 8.01% of *the total population of working age* is shown here. This enables more valid comparisons to be made

1.2 Table 2 NHSR Staff in post by age and pay band at 31st March 2010

Staff Group	<20	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60+	Total
On old pay scales (incl. medical)	8	0	2	8	11	5	9	18	10	10	81
Band 7-9	0	0	13	33	51	79	85	79	30	6	376
Band 5-6	0	18	72	56	85	93	86	98	40	14	562
Band 3-4	0	29	48	44	60	74	106	66	43	46	516
Band 1-2	3	2	13	16	29	26	34	39	32	24	218
Total no. staff	11	49	148	157	236	277	320	300	155	100	1753
% of total staff	0.63	2.80	8.44	8.96	13.46	15.80	18.25	17.11	8.84	5.70	100.00
Rotherham %	*	8.01	9.37	12.01	12.27	11.62	10.25	11.30	9.58	15.52	100.00
Difference from Rotherham %		-5.21	-0.93	-3.05	+1.19	+4.22	+8.00	+5.81	-0.74	-10.18	

⁵ All Managers in NHSR who do not belong to one of the other functional groups represented.

⁶ Includes all professionally qualified healthcare professionals other than nursing and medical

⁷ Based on Residential Population for Rotherham 2001 Census published by Office of National Statistics.

1.2 Commentary

Representation of employees under age 35 and over 60 remains significantly lower than that reflected in the Rotherham population. All employees under 20 years are employed at pay band level 1-2 or on apprentice rates (we have employed 10 business apprentices in the past year) and within admin and clerical and healthcare support roles. Of those Business Apprentices, 2 had found permanent employment within NHSR by 31 March 2010. There are no employees under 25 years in pay bands 7-8, which is due to the levels of experience they are required to demonstrate for many posts at the more senior levels resulting in younger applicants and internal employees being screened out. Relatively few employees over the age of 60 occupy posts in bands 7-8 (although in proportion to the age profile of the workforce as a whole.) The introduction of the age legislation in October 2006 and the decision by the Board to abolish the need to retire at age 65, may also encourage staff to stay on or encourage staff who have retired to come back to work.

1.2 Table 3: Progress against Targets to improve representation in line with that of the local community

Targets identified within 2005/6 Equality & Diversity Strategic Action Plan

Local Target at April 2005	Progress against Target	Conclusion
1) To increase year on year % representation of the following age groups towards that of the local population:		
Under 20s to 0.64% (:12 employees	This has been achieved with a recent intake of business apprentices.	
• 20-24 to 8% :(140 employees)	Slightly worsening	Remains significantly under- represented by 91 employees
• 25-29 to 9.37% (:164 employees)	Further improvement in last six months	Remains under-represented by 16 employees
Over 60s to 15.52%(:272 employees)	Improvement in last 6 months	Still needs 2.6 times as many employees of this age group to reflect the representation of the local population.

The extent to which the increase in numbers of the age groups referred to in the above targets, is due to natural age increases of the existing workforce is not clear and it must be borne in mind that the local population age groups are as at the 2001 Census.

ACTIONS:

The employment of a schools coordinator came to an end in 2007, however an Employability Advisor was employed for an 18 month period. This has now come to an end, but allowed a focus on encouraging different minority groups into NHSR, including disabled people; young people e.g. school leavers, people with mental health issues etc. Work with local agencies took place in order to improve vital connections. Consideration as to how this work can be continued should be given, so as not to waste the progress that has been achieved.

Working Beyond Age 65 years

The Trust Board approved the removal of NHSR's retirement age of 65 years to enable employees to remain in employment beyond this age if they choose to do so. The Board recognised the advantages to workforce diversity of encouraging individuals to remain in employment beyond the normal retirement age. The proportion of employees over age 60 across the workforce is under-represented compared to overall representation within the local population. NHSR's decision to remove the retirement age is beyond the minimum requirements stipulated in the Employment Equality (Age) Regulations 2006, which came into force from October 2006 and is demonstrative of NHSR's commitment to fulfil its values of Putting People First, Working in Partnership, Continuously Improving Quality of Care, Showing Compassion, Respect and Dignity, Listening and Learning and Taking Responsibility and Being Accountable.

Recruitment and Selection

The requirement to avoid unfair age discrimination has always been NHSR policy and part of its training; however NHSR has reviewed its position in relation to the requirements of the legislation.

The Recruitment Guidelines and the content of the Managing People Recruitment & Selection training to stress the requirements not to discriminate on age or any diversity related grounds throughout the recruitment & selection process. Also incorporation of specific age equality awareness training into the mandatory Equality & Diversity training for staff and into the Managing People training for line managers

1.3 – 1.5 Table 2 NHSR staff in post at 31st March 2010

	1.3 by 0	Gender	1.4 by	hours	1.5 by disability
Staff Group	Male	Female	Full-Time	Part-time	Disability
Other PCT Managers ⁷	34	53	70	17	7
Qualified Nurses	30	438	295	173	8
Health Care Support	52	346	104	294	17
ST&T Qualified Staff ⁸	30	253	138	145	9
Medical & Dental	31	21	13	39	1
Admin & Clerical	62	398	236	224	13
Nursing Learners	1	4	5	0	0
Total No.	240	1513	861	892	55
% of Total	13.69	86.31	49.12	50.88	3.14
Rotherham %	48.63	51.37	-	-	7.90
Difference	0.00	0.00	-	_	0.00

⁷ All Managers in NHSR who do not belong to one of the other functional groups represented.

8 Includes all professionally qualified healthcare professionals other than nursing and medical 14

1.3 – 1.5 Table 2 NHSR staff in post by pay band at 31st March 2010

	1.3 by	Gender	1.4 by	hours	1.5
Staff Group	Male	Female	Full-Time	Part-time	Disability
Non-A4C bands	37	44	28	53	2
Band 7-9	61	315	249	127	12
Band 5-6	66	496	329	233	14
Band 3-4	61	455	219	297	17
Band 1-2	15	203	36	182	10
Total No.	240	1513	861	892	55
% of Total	13.69	86.31	49.12	50.88	3.14
Rotherham %	48.63	51.37	-	-	7.90
Difference	0.00	0.00	-	-	0.00

1.2 – **1.5** Commentary

Age

Male employees remain significantly under-represented and female representation on the workforce exceeds that within the local population. Female representation remains at 86.31% and correspondingly male representation at 13.69%. The biggest discrepancy between male and female representation continues to be in relation to employees in Bands 1-2. Within functional groups male representation is proportionately lowest within Healthcare Support and Qualified Nursing posts. Male representation exceeds female in Medical and Dental posts.

Disability

Greatest representation is within nursing, healthcare support roles and admin & clerical roles and in Bands 3-6. Representation is of greatest concern in ST&T and medical and dental roles, although there is now one employee who has declared a disability.

Disabled employees who are monitored for the purposes of this report are those who have declared a disability on their NHS Jobs application form or were already known to NHSR prior to the introduction of ESR via statements on application forms. We may have staff whom, since commencing employment with NHSR, have become disabled due to a variety of reasons. As a result NHSR monitoring outcomes for employees with disability will not necessarily be a true representation of the position of all employees with a disability. However we have carried out work to address this issue by circulating a questionnaire to staff asking them to complete it in order to establish how many people within NHSR consider themselves to be disabled. This information is important in order to fulfill the legal requirements for Diversity Monitoring.

Full and Part-time

Full-time post holders are still the majority among NHSR management, ST&T and qualified nursing posts.

Flexible Working

The benefits of Flexible Working are recognized within NHSR and its uptake is encouraged so that over 90% of all NHSR staff now work flexibly, the highest uptake figure across the country in comparable PCTs. A range of flexible working practices are adopted such as term time working, annualized hours, flextime and compressed hours, which benefits the work/life balance for staff. This allows experienced staff to return to work when they have young familes/carer responsibilities so that the team does not lose their expertise.

1.3 -1.5 Table 3: Progress against Targets to improve representation in line with that of the local community

Targets identified within 2005/6 Equality & Diversity Strategic Action Plan

Local Target at April 2005	Progress against Target	Conclusion
• To increase the % males to 20% (incremental increase towards 46.63% goal) over 5 years i.e. 373 employees	240 males in post at 31.03.10	Male representationremains significantly under-represented and below 20% target across all functional groups except Medical and Dental Other NHSR Managers) and all pay bands.
To increase % disabled employees year on year towards 7.9% (138 employees ⁶)	A total of 55 employees in post with a declared disability. Identified due to recent information request to staff.	Declared Disabled employees remain under-represented within NHSR workforce across all functional groups and at all levels.

ACTIONS:

Gender

NHSR is exploring how more males can be recruited to the workforce into all staff groups linking with the national Positive Image Campaign driven by the SY WDC at local level. The impact of this campaign will be long-term; a strong emphasis of the campaign is upon males in terms of encouraging them to consider a career in the NHS. The impact on NHSR of this campaign will be difficult to measure due to the inability to demonstrate direct causal links to any increase in male representation. In April 2007 there was a legal requirement for public authorities to develop a Gender Equality Scheme, this was completed by the Trust in October 2007.

In terms of attracting disabled applicants to NHSR, we continue to hold the two-ticks symbol and NHSR has completed necessary adjustments to its work premises to comply with its legal responsibilities to disabled service users and employees under the Disability Discrimination Act 1995. NHSR's commitment to honouring its legal obligations under the DDA and moral obligations is demonstrated through its focus on disability issues within Equality & Diversity training, Recruitment & Selection training and Managing Sickness Absence Training.

Part-time Working

Part-Time working is promoted within the recruitment and selection process. The recruitment pack to applicants includes reference to the various potential flexible working options and all job adverts carry a strap line referring to flexible working. Flexible working options in support of part-time working include term-time working, voluntary reduced hours, annualised hours and compressed hours and home working. It may be useful to publicise the NHSR policy of permitting jobsharing of full-time posts in order to increase the availability of part-time work at senior levels.

Joint Disability Equality Scheme

The Joint Disability Equality Scheme was introduced in 2006 to comply with the requirements of the Disability Discrimination Regulations. This was developed in partnership between RMBC, RFT and RPCT. The Scheme incorporates a joint commitment to promote disability equality in relation to all aspects of service access, delivery and employment practices. The employment side of the scheme will include bespoke local actions determined at organisational levels to ensure that NHSR continues to pro-actively promote disability equality as part of its Diversity agenda at strategic and operational levels. Following on from the Joint Disability Scheme a local action plan was developed in 2006 by NHSR.

Single Equality Scheme

A Single Equality Scheme was developed and approved by Board in March 2010. The action plan was developed and approved by Board in May 2010.

Flexible Working

The Flexible Working Policy was revised in January 2010 to extend the flexibility of working hours for staff utilizing the flexitime element of the policy.

2. Applicants for posts - NHS Jobs online

NHSR now uses NHS Jobs to advertise all posts and encourage job applications. This means that all personal details about job applicants are entered by the applicants themselves at the time of application. NHS jobs offers some reporting facilities based on the diversity of applicants, however it does not allow us to track the progress of the applicant through the application process and report on reasons why the applicant may be unsuccessful in obtaining a post, nor does it allow reporting by post type or band. However it does report on the number of applicants by ethnicity, age, Gender, Disability, Religion and Sexual Orientation and with all of these it will also demonstrate how many were shortlisted and appointed.

2.1 Applications by Ethnicity

Total no. of applications October 2009-March 2010 (all posts)

Ethnic Group	Number Apps	% of total	% local pop.		Shortlisted			Appointed	
•				Number	% of apps	% of	Number	% of	% of
						total		apps	total
White British	2441	76.26%	95.94%	518	21.22%	85.48%	84	3.44%	98.82%
White Irish	19	0.59%	0.43%	1	5.26%	0.17%	0	0.00%	0.00%
White Other	89	2.78%	0.53%	11	12.36%	1.81%	0	0.00%	0.00%
Indian	187	5.84%	0.20%	19	10.16%	3.13%	1	0.53%	1.18%
Pakistani	128	4.00%	1.90%	19	14.84%	3.13%	0	0.00%	0.00%
Bangladeshi	11	0.34%	0.01%	1	9.09%	0.17%	0	0.00%	0.00%
Other Asian	28	0.87%	0.12%	3	10.71%	0.49%	0	0.00%	0.00%
Mixed white/black Caribbean	13	0.41%	0.14%	4	30.77%	0.66%	0	0.00%	0.00%
Mixed white/black African	6	0.19%	0.04%	0	0.00%	0.00%	0	0.00%	0.00%
Mixed white/Asian	11	0.34%	0.20%	1	9.09%	0.17%	0	0.00%	0.00%
Mixed other	7	0.22%	0.11%	1	14.29%	0.17%	0	0.00%	0.00%
Black Caribbean	9	0.28%	0.07%	1	11.11%	0.17%	0	0.00%	0.00%
Black African	185	5.78%	0.07%	15	8.11%	2.47%	0	0.00%	0.00%
Black other	6	0.19%	0.01%	2	33.33%	0.33%	0	0.00%	0.00%
Chinese	10	0.31%	0.12%	1	10.00%	0.17%	0	0.00%	0.00%
Other	28	0.87%	0.11%	2	7.14%	0.33%	0	0.00%	0.00%
Not stated	23	0.72%	-	7	30.43%	1.15%	0	0.00%	0.00%
Total	3201	100.00%	100.00%	606	18.93%	100.00%	85	2.66%	100.00%

A much larger proportion of applicants are of an ethnic minority background than are represented in the local population. This reflects the international range of an internet-based application system. The number of applications of Indian and black African background is particularly apparent once again. This is also reflected in applicants fully tracked through the recruitment procedure in Table 2.5

2.2 All applications by Age Band October 2009-March 2010

Age Band	Number	% of	% local		Shortlisted			Appointed	
		total	pop.	Number	% of apps	% of total	Number	% of apps	% of total
16-19	133	4.15%	*	10	7.52%	1.65%	3	2.26%	3.53%
20-24	687	21.46%	8.01%	75	10.92%	6 12.38% 8 1.16%		9.41%	
25-29	658	20.56%	9.37%	111	16.87%	18.32%	15	2.28%	17.65%
30-34	438	13.68%	12.01%	86	19.63%	14.19%	14	3.20%	16.47%
35-39	368	11.50%	12.27%	81	22.01%	13.36%	15	4.08%	17.65%
40-44	340	10.62%	11.62%	83	24.41%	13.70%	11	3.24%	12.94%
45-49	271	8.47%	10.25%	69	25.46%	11.39%	9	3.32%	10.59%
50-54	198	6.19%	11.30%	58	29.29%	9.57%	7	3.54%	8.23%
55-59	84	2.62%	9.58%	29	34.52%	4.78%	3	3.57%	3.53%
60+	24	0.75%	15.52%	4	16.67%	0.66%	0	0.00%	0.00%
Total	3201	100.00%	100.00%	606	18.93%	100.00%	85	2.66%	100.00%

2.3 All applications by Gender October 2009-March 2010

Gender	Number	% of	% local		Shortlisted		Appointed				
		total	pop.	Number % of apps		% of total	Number	% of apps	% of total		
Male	826	25.80%	48.63%	111	13.44%	18.32%	9	1.09%	10.59%		
Female	2363	73.82%	51.37%	494	20.91%	81.52%	76	3.22%	89.41%		
Undisclosed	12	0.37%	-	1	8.33%	0.16%	0	0.00%	0.00%		
Total	3201	100.00%	100.00%	606	18.93%	100.00%	85	2.66%	100.00%		

2.4 All applications by Disability October 2009-March 2010

Disabled	Number	% of	% local		Shortlisted		Appointed				
		total	pop.	Number	% of apps	% of total	Number	% of apps	% of total		
Yes	97	3.03%	7.9%	19	19.59%	3.14%	3	3.09%	3.53%		
No	3080	96.22%	92.1%	582	18.90%	96.04%	81	2.63%	95.29%		
Undisclosed	24	0.75%	-	5	20.83%	0.82%	1	4.17%	1.18%		
Total	3201	100.00%	100.00%	606	18.93%	100.00%	85	2.66%	100.00%		

2.5 All applications by religion October 2009-March 2010

Religious Group	Number	% of	% local		Shortlisted			Appointed	
		total	pop.	Number	% of apps	% of total	Number	% of apps	% of total
Atheism	315	9.84%	10.22%	51	16.19%	8.42%	4	1.27%	4.71%
Buddhism	8	0.25%	0.05%	0	0.00%	0.00% 0.00%		0.00%	0.00%
Christian	1986	62.04%	79.42%	385	19.39%	63.53%	59	2.97%	69.41%
Hindu	97	3.03%	0.10%	10	10.31%	1.65%	0	0.00%	0.00%
Islam	186	5.81%	2.18%	21	11.29%	3.47%	0	0.00%	0.00%
Jain	7	0.22%	Not known	1	14.29%	0.16%	0	0.00%	0.00%
Judaism	9	0.28%	0.02%	1	11.11%	0.16%	1	11.11%	1.18%
Sikhism	18	0.56%	0.08%	3	16.67%	0.50%	0	0.00%	0.00%
Other	353	11.03%	0.15%	68	19.26%	11.22%	9	2.55%	10.59%
Undisclosed	222	6.94%	7.78%	66	29.73%	10.89%	12	5.41%	14.11%
Total	3201	100.00%	100.00%	606	18.93%	100.00%	85	2.66%	100.00%

2.6 All applicants by sexual orientation October 2009-March 2010

Group	Number	% of	% local		Shortlisted		Appointed				
		total	pop.	Number	% of apps	% of total	Number	% of apps	% of total		
Lesbian	7	0.22%	n/a	3	42.86%		0	0.00%	0.00%		
Gay	20	0.62%	n/a	5	25.00%		0	0.00%	0.00%		
Bisexual	16	0.50%	n/a	3	18.75%		0	0.00%	0.00%		
Heterosexual	2985	93.25%	n/a	554	18.56%		78	2.61%	91.76%		
Undisclosed	173	5.40%	n/a	41	23.70%		7	4.05%	8.24%		
Total	3201	100.00%	100.00%	606	18.93%		85	2.66%	100.00%		

Ethnicity

23.74% of all applicants via NHS Jobs in the last six months were of a BME background. This is much greater than the percentage of BME persons in the local population, though applications come from all over the country and abroad via NHS Jobs. There were 187 applications of Indian origin in the period (5.8% of all applicants) for a wide range of different posts, although some individuals made applications to multiple posts. Only one person of an ethnic minority backgrounds was successful in being offered posts in this reporting period. This equates to 0.13% of all BME applicants whose progress was tracked in the period, which was considerably lower than the 3.4% of white British applicants successfully being offered posts. Pakistani applicants, the largest BME group in Rotherham, constituted 4.0% of total applicants via NHS Jobs (128 applicants), 19 were shortlisted but none were successful in being offered a post.

There were 24 applicants aged 60+ via NHS Jobs in the last period, 4 were shortlisted but none were successful (exactly the same proportion as in the previous period). Applicants under 20 years remain lower than in age groups above 24 years, with 133 people under 20 years applying in this period. 10 of these applicants were shortlisted and 3 were offered posts. The essential requirements for prior experience and qualification levels for posts may be a barrier to younger workers wishing to embark on careers within the NHS, although we have continued to recruit business apprentices in a recent move to address this problem.

Gender

The majority of applicants for posts continue to be female. The proportion of male applicants on NHS Jobs for posts in the period was 25.8%, a considerable improvement on the previous period. 9 males were offered a post in this period, 1.1% of male applicants whose progress was fully tracked (the same as the previous period). The majority of applicants continue to be screened out at the shortlist stage, although once again, a greater proportion of total male applicants than total female applicants were unsuccessful at this early stage of selection.

Again the proportion of total males being offered posts in this period (1.1% of all fully tracked applicants) was lower than the female proportion offered posts in this period (3.2% of all female applicants).

Disability

97 applicants with a disability applied in this period, and three were offered posts. A further 19 applicants were shortlisted. A slightly higher proportion of disabled applicants achieved the shortlisting stage than those who were not disabled. The under-representation of disabled people in the workforce is concerning as the PCT aims to significantly increase workforce representation of disabled employees in order to contribute to improving the overall diversity of the workforce in line with the local population. However according to the 2007 staff survey we have far more disabled people employed by the PCT than reported, to address this issue we will be circulating a questionnaire to all staff in order to establish the correct number of disabled employees working within the PCT. This will be for monitoring purposes only.

<u>Sexuality</u>

Whilst the great majority of applicants were prepared to disclose their sexuality in their application, it is notable that the relatively small proportion who did not (5.4%) were proportionately the most successful in being offered posts.

ACTIONS

Attraction of male and disabled applicants of required calibre to succeed through all stages of selection remains an area of focus. The possibility of widening the remit of and participating in employability skills of disabled individuals who face skill-related employment barriers through which we could offer job-related training placements within the PCT will be explored as part of the Joint Disability Equality scheme by NHSR and partner organisations, including Rotherham Metropolitan Borough Council and Rotherham Foundation NHS Trust.

The recommendations from the recent research study into Pakistani under-representation in NHSR include amendments to Recruitment & Selection training aimed at reducing the likelihood of inadvertent discrimination, raising awareness among recruiters of barriers to applicants from this ethnic group, and emphasizing the need to provide feedback to unsuccessful candidates.

3. Leavers October 2009-March 2010 (excluding TUPE transfers, flexible leavers and short-term contracts)

	No.	% of total leavers	% of staff of this category in post
Total Leavers	95	100.00%	100.00%
3.1 Ethnic Group			
White British	87	91.58%	94.75%
White Other	1	1.05%	1.03%
Mixed white & asian	1	1.05%	0.23%
Indian	2	2.11%	0.97%
Other asian	1	1.05%	0.34%
Black Caribbean	1	1.05%	0.17%
Black African	1	1.05%	0.46%
Other	1	1.05%	0.34%
3.2 Age			
<20	1	1.05%	0.63%
20-24	12	12.63%	2.80%
25-29	8	8.42%	8.44%
30-34	7	7.37%	8.96%
35-39	15	15.79%	13.46%
40-44	16	16.84%	15.80%
45-49	10	10.53%	18.25%
50-54	6	6.32%	17.11%
55-59	12	12.63%	8.84%
60+	8	8.42%	5.70%
3.3 Sex			
Male	13	13.68%	13.69%
Female	82	86.32%	86.31%
3.4 Full-time/part-time			
Full-time	42	44.21%	49.12%
Part-time	53	55.79%	50.88%
3.5 Disability			
No. of disabled staff	5	5.26%	3.14%

Ethnicity

The proportion of total leavers who are white British remains below the proportion of white British employed by the PCT. Consequently the proportion of BME leavers is higher than the proportional representation employed by the PCT.

Of the 95 leavers in the period, 34 have returned exit questionnaires (a response rate of 35.8%, similar to the usual one). None of these exhibited concerns on grounds of unequal treatment based on the grounds of diversity.

<u>Age</u>

The % of leavers in age groups 20-24, and 55+ as a proportion of total leavers (95) in the period, continues to outnumber the % representation of staff of these age groups actually in post. All of these groups have been consistently under-representative of those groups residing in the local population since monitoring commenced.

Gender

82 leavers were female and 13 male, almost exactly matching the proportion in the workforce. 42 leavers were full-time staff and the rest part-time or bank staff.

Full-Time/Part-Time

There was a considerably lower proportion of full-time leavers than the proportion of full-time employees in posts. The reverse is true of part-time leavers.

Disability

There were 5 leavers with a disability reported in the last period, above the proportion of employees reporting a disability.

4. Promotions - October 2009-March 2010

At the current time, due to shortcomings with the NHS Jobs application form it is impossible to identify job applicants for promotion, this appears to be a national problem and is being followed up with NHS Jobs/NHS Employers. NHS Rotherham in the interim will continue to monitor and report on numbers of staff who actually achieve a promotion in each reporting period. Also in the last six months the number of promotions has begun to fall due to financial pressures on the organisation as a result of national difficulties.

	No.	% of total promotions	% of staff of this category in post
Total Promotions	39	100.00%	100.00%
4.1 Ethnic Group			
White British	37	94.84%	94.75%
White Other	1	2.56%	1.03%
Indian	1	2.56%	0.97%
4.2 Age			
<20	0	0.00%	0.63%
20-24	5	12.82%	2.80%
25-29	4	10.26%	8.44%
30-34	6	15.38%	8.96%
35-39	4	12.82%	13.46%
40-44	9	23.08%	15.80%
45-49	7	17.95%	18.25%
50-54	4	12.82%	17.11%
55-59	0	0.00%	8.84%
60+	0	0.00%	5.70%
4.3 Sex			
Male	3	7.69%	13.69%
Female	36	92.31%	86.31%
4.4 Full-time/part-t			
Full-time	28	71.79%	49.12%
Part-time	11	28.21%	50.88%
4.5 Disability			
No. of disabled staff	1	2.56%	3.14%

Ethnicity

There have been 39 promotions in this period, 2 from BME groups. There is no evidence of unfair selection processes favouring one ethnic group over another in relation to promotion opportunities. There have been fewer promotions in total in this period, reducing the sample size for comparison.

The Talent Management, Leadership and Succession Planning Strategy states that we will prioritise BME participation in any career development programmes that are run. Specifically, BME nominations will be encouraged for our in house talent management programme Ignite. The Trust is also supporting the regional Innov8 diverse leadership initiative.

Age

No one has been promoted in age groups over 55 and less than 20 years. There may be many reasons for this such: promotions are not available in their particular field of work, not enough experience or employees simply do not wish to move on.

Full-Time/Part-Time

Part-time post holders, whose representation exceeds that of full-time post holders continue to be less successful in obtaining promotions.

Disability

One person with a disability was promoted in this period.

5. Learning & Development

The limitations to reporting on this subject are that monitoring is based solely on delegates who have completed a learning agreement form within the PCT or enrolled directly via Electronic Staff Record Self-Service. It is not yet possible to identify numbers of delegates by diversity who have been refused training for any reason.

5.1 Delegates to Training completing course October 2009-March 2010

			0/ 6
	No.	% of total	% of staff of
		delegates	this
		ucicgates	category
			in post
Total Delegates	2155	100.00%	100.00%
5.1 Ethnic Group			
White British	2043	94.80%	94.75
White Irish	12	0.56%	0.23
White other	34	1.58%	1.03
Mixed white/black Caribb	1	0.05%	0.06
Mixed white/Asian	19	0.88%	0.23
Mixed other	2	0.09%	0.06
Indian	9	0.42%	0.97
Pakistani	9	0.42%	0.86
Bangladeshi	1	0.05%	0.11
Asian other	4	0.19%	0.34
Black Caribbean	2	0.09%	0.17
Black African	5	0.23%	0.46
Black Other	3	0.14%	0.11
Other	3	0.14%	0.34
Not stated	8	0.37%	0.17
5.2 Age			
<20	33	1.53%	0.63%
20-24	157	7.29%	2.80%
25-29	232	10.77%	8.44%
30-34	230	10.67%	8.96%
35-39	336	15.59%	13.46%
40-44	303	14.06%	15.80%
45-49	380	17.63%	18.25%
50-54	321	14.90%	17.11%
55-59	108	5.01%	8.84%
60+	54	2.51%	5.70%
5.3 Sex			
Male	275	12.76%	13.69%
Female	1880	87.24%	86.31%
5.4 Full-time/part-time			
Full-time	1291	59.91%	49.12%
Part-time	864	40.09%	50.88%
5.5 Disability			
No. of disabled staff	51	2.37%	3.14%

N.B. It is worth noting that even if attendances at L&D by a particular group is proportionate or exceeds the % representation of that group in the workforce, this does not mean all employees within each category are getting access to learning opportunities. Indeed any individual may have attended more than one L&D event in the period compared to other staff in the same group who have not had any such attendances in the same period.

In this period the highest proportion of attendances from a BME group in the period was, White Other employees, Indian employees, followed by Pakistani employees and we have had attendances on training from all BME groups other than the single Chinese person in this period.

Gender

Once again the proportion of attendances by males remained below equal proportionate male workforce representation, although only slightly this time.

Disability

The attendances from the disability group are slightly lower than the amount represented of this group in the workforce.

Part-Time/Full/Time

In this period a higher proportion of full-time staff compared to their representation in the workforce completed training courses than part-time staff.

5.6 Number of Applications/Applicants and attendees for Training – Ethnicity October 2009-March 2010*

	White British	White Irish	White Other	Mixed white/ black caribb	Mixed white/ black african	Mixed white/ Asian	Other mixed	Indian	Paki- stani	Bangla -deshi	Other Asian	Black caribb	Black African	Other black	Chines e	Other ethnic group	Not stated /undef ined	Total
Number applications for training	3638	26	56	4	0	27	6	20	22	3	8	2	11	5	0	4	11	3843
Number applications actually attended	2255	12	37	2	0	18	3	13	11	1	5	1	7	4	0	3	8	2380
% of total applications attended	62.0%	3.8%	66.1%	50.0%	0.0%	66.7%	50.0%	65.0%	50.0%	33.3%	62.5%	50.0%	63.6%	80.0%	0.0%	75.0%	72.7%	61.9%
Number of applicants for training	1144	4	11	1	0	4	1	10	9	2	4	2	3	1	0	3	5	1204
Number of applicants who attended training +	980	4	11	1	0	4	1	8	6	1	3	1	3	1	0	3	5	1032
% of total applicants who attended training	85.7%	100%	100.%	100%	0.0%	100%	100%	80.0%	66.7%	50.0%	75.0%	50.0%	100%	100%	0.0%	100%	100%	85.7%

5.7 Number of Applications/Applicants and attendees for Training – Disability/Gender/Age October 2009-March 2010

	Disabled	Male	Female	Age <-19	Age 20-24	Age 25-29	Age 30-34	Age 35-39	Age 40-44	Age 45-49	Age 50-54	Age 55-59	Age 60+
Number applications for training	96	466	3377	50	174	413	389	584	601	607	625	286	114
Number applications actually attended	53	282	2098	25	117	268	251	353	352	392	384	159	79
% of total applications attended	55.2%	60.5%	62.1%	50.0%	67.2%	64.9%	64.5%	60.4%	58.6%	64.6%	61.4%	55.6%	69.3%
Number of applicants for training	37	153	1051	7	41	105	97	166	197	224	211	105	51
Number of applicants who attended t training +	29	130	902	7	37	94	85	147	171	193	172	83	43
% of total applicants who attended training	78.4%	85.0%	85.8%	100%	90.2%	89.5%	87.6%	88.6%	86.8%	86.2%	81.5%	79.0%	84.3%

^{*} applications from people who remained in post at 31st March 2010. + Applicants who attended may have applied for multiple courses and not attended some of them.

Table 5.6 & 5.7

Number of Applications/Applicants and attendees for Training – Ethnicity/Disability/Gender/Age October 2008 – March 2009

Commentary

It is apparent through the monitoring of applications to training that there is a large number of staff under ethnicity, disability, gender and age who apply for training and for whatever reason do not actually attend. This could be for a number of reasons e.g. job related, sickness etc. However 61.9% of all applications actually attended training in this period, as opposed to 44.9% in the previous six month period, representing a sizeable improvement.

Ethnicity

Table 5.6 demonstrates that the majority of ethnic groups are accessing training at different times of the reporting period..

6. Bullying & Harassment

No new cases were <u>reported</u> during the period (see below).

The HR Team are continuing to raise the profile of the reporting procedures set out in section 9.1 of the Bullying & Harassment policy and procedure to PCT Managers via the Equality & Diversity Managing People Training as it is suspected that not all reports of bullying or harassing behaviour- particularly those which are resolved informally rather than being formally investigated and therefore brought to the attention of a HR Manager- reported to line managers are being recorded and submitted to the HR information Manager for monitoring purposes. Therefore it cannot definitely be confirmed that there have been no incidents of such behaviour occurring in the current reporting period

7. Disciplinaries

One disciplinary case was carried over from the previous reporting period related to inappropriate conduct. This resulted in a dismissal.

Seven new disciplinary cases were initiated in the reporting period, five of which were concluded. Of the ongoing cases, one was related to misconduct and one was related to the misuse of work time. Of the cases which were concluded, two were related to the misuse of NHSR e-mail system, two to theft, and one to misconduct.

8. Grievances

Six grievance cases were carried over from the previous reporting period. Three grievances were raised as a collective grievance related to workload, and which was upheld in part. One grievance related to relocation and was resolved mutually. One grievance was not upheld, and one was withdrawn by the employee.

12 grievances were raised during the reporting period. Eight of these grievances were raised as a collective grievance which has not been completed yet. Three other grievances were not completed during the reporting period. One grievance involving dissatisfaction with management actions was partially upheld.

NB. The relatively small numbers of reported incidences means that statistically significant conclusions can be difficult to reach. The PCT will continue to monitor these events within the spirit of its core values of Putting People First, Working in Partnership, Continuously Improving Quality of Care, Showing Compassion, Respect and Dignity, Listening and Learning and Taking Responsibility and Being Accountable.

9. Performance Management Procedures

The number of staff who have suffered detriment as a result of the organisation's performance management procedures is measured by monitoring staff who have been blocked from passing through the gateway to the next pay point.

Number of staff who have suffered detriment: 0