Workforce Equality Diversity and Inclusion (EDI) Annual Report 31st March 2019

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Alder Hey Children's **NHS**
NHS Foundation Trust

Introduction

Alder Hey Children's NHS Foundation Trust is committed to creating an environment which is inclusive, supportive and friendly to everyone within our communities, whether patients, parents, carers and staff. A key priority to Alder Hey is providing the best possible experience to our children, young people and families.

Each year public bodies, subject to section 149 of the Equality Act 2010 and the specific equality duties, are required to publish equality information. There is also a requirement to publish objectives every 4 years and this report includes a summary of Workforce Equality Diversity and Inclusion (EDI) Objectives 2018-2021.

The report provides evidence of the Trust commitment to the principles of the NHS Constitution and compliance with the general equality duty. The NHS is founded on a common set of principles and values that bind together the communities and people it serves – patients and public – and the staff who work for it. Seven key principles guide the NHS in all it does. They are underpinned by core NHS values which have been derived from extensive discussions with staff, patients and public. The NHS Constitution establishes the principles and values of the NHS in England (NHS Constitution 2012).

The report references the Workforce Race Equality Standard (WRES) 2017 data and Workforce Disability Equality Standard (WDES) 2018 (due to be implemented 1 August 2019) mandated by the NHS Standard Contract overseen by NHS England. In addition, it references the Trusts Gender Pay Gap report 2018 produced to meet the Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017 which came into force on the 31st March 2017.

The Report includes the Equality Delivery System (EDS2) grading for goal 3 (workforce related) and goal 4 (relating to leadership) 2018/19 .

This report has produced workforce data based on the content of the Electronic Staff Record (ESR) to include age, gender, ethnicity, disability, sexual orientation and religion and belief. This report compares data as at 31 March 2018 to 31 March 2019. Recruitment and Selection Data from NHS Jobs is also included in this report to measure the likelihood of being appointed from application and shortlisting stages of the selection process.

Priorities 2019/20

Establish an operational group to provide assurance to WOD that Workforce Equality, Diversity and Inclusion (EDI) Objectives 2018-2021 are being progressed.

Develop mechanisms for assuring body to regularly monitor:

Diversity % of staff to include disability (in addition to BAME)

Retention of staff (e.g. exit interview data via ESR)

Promotion of staff (e.g. interview data via Recruitment Team)

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Priorities 2018/19
Progress since last year's report

- The Human Resources Team (Recruitment and ESR teams) has increased the number of staff self-reporting their religion or belief, sexual orientation and ethnicity compared to last year due to a number of initiatives aimed at improving the quality of this data and this work will continue in 2019/20.

- Monitoring access to non-mandatory training opportunities by protected characteristic has improved compared to last year with a requirement that staff enrol onto courses via ESR, our workforce data system. The study leave policy and form has also been updated with a requirement that the study leave form is completed for all requests for study (accepted or not) and returned to the learning and development team. Staff survey results for ethnicity, LGBTO (as per ESR database) and disability are shared with the relevant staff network that includes the question 'Have you had any training, learning or development in the last 12 months not including mandatory training'

- Previous reports have been limited to reporting equality information in relation to Trust diversity by protected characteristic, recruitment and selection data, training data and employee relations data. The content of this report has been broadened to better reflect Alder Hey's commitment to Equality, Diversity and Inclusion and the progress we have made over the last 12 months.

Workforce Race Equality Standard (WRES) 2017

A full copy of our WRES submission is available on the Trust Publications Website based on 2017 Staff Survey Results.

- Actions to address WRES findings are included in the Trust Workforce EDI Objectives Plan 2018-2021.

- Alder Hey WRES submission is published on the Trust Publications website with 2018 results due to be published on **28 September 2019**. A summary of 2017 data findings are:

- Metric 1:
  - The number of BME staff is 6% (205)
  - Non-Disclosure of Ethnicity is 2% (77)
  - Non-Clinical Workforce White 26% (877) and BME 1% (31)
  - Clinical Workforce White 66% (2,260) and BME 5% (174)

- Metric 2: There is minimal difference in the likelihood of being appointed based on ethnicity.

- Metric 3: We have too few BME staff and too few staff entering formal procedures to produce any meaningful data. We continue to work with our staff networks to limit the likelihood of potential discriminatory behaviour in the workplace.

Workforce Race Equality Standard (WRES) 2017

- Metric 4: Due to the funding nature of a non-central budget for training and development staff access non-mandatory training without completing an application form to Learning and Development. A process will be introduced in 2018/19 to allow more robust reporting.

- Metric 5: Fewer BME staff believe the Trust provides equal opportunity for career progression and promotion. We will look at local and national initiatives to support and promote career development and leadership opportunities for BME staff.

- Metric 6: BME staff are no more likely than white staff to be subject to bullying and harassment by the public.

- Metric 7: BME staff are more likely to be subject to bullying and harassment from staff. The objectives plan will include the need to tackle bullying and harassment of and by staff and support staff to respectfully and successfully challenge problem behaviours.

- Metric 8: BME staff are more likely to be discriminated against from work colleagues

- Metric 9 : There is an under-representation of BME staff at Board level

Workforce Disability Equality Standard (WDES) 2018

- Actions to address WDES findings will be included in the Trust Workforce EDI Objectives Plan 2018-2021. **WDES is being implemented in 2018 so 2018 staff survey data has been provided** unlike WRES which has been provided based on 2017 staff survey results which is our most recent submission.

- Alder Hey full WDES submission will be published on the Trust Publications website with 2018 data due to be published on **1 August 2019**. The 2018 staff survey data comparing disabled and non-disabled staff responses suggested staff:

    - Felt pressure from manager to attend work when unwell

        27% (238) compared to 18% (846)

    - Believes there is Equal Opportunity for Career Progression and Promotion

        76% (231) compared to 89% (1,112)

Workforce Disability Equality Standard (WDES) 2018

- – Staff satisfied with extent they are valued by the Trust
  - 44% (337) compared to 55% (1,592)
- – 73% (198) of disabled staff believed the organisation had made adequate adjustments to carry out work
- – Staff Engagement organisation average 7.3 (1,196), Disabled 6.9 (340), Non-Disabled 7.4 (1,621)
- – Staff Reporting Bullying, Harassment or Abuse disabled compared to non-disabled
  - 47% (136) compared to 50% (404)
- – Bullying and harassment of staff (disabled compared to non-disabled) by;
  - Public 33% (332) compared to 23% (1,605)
  - Manager 15% (331) compared to 7% (1,595)
  - Colleague 25% (325) compared to 14% (1,584)

Equality Delivery System (EDS2) Grading

A full copy of our EDS2 Summary Report is available on the Trust Publications Website

3	A representative and supported workforce	Grading	Objective
3.1	Fair NHS recruitment and selection processes lead to a more representative workforce at all levels	Developing	3
3.2	The NHS is committed to equal pay for work of equal value and expects employers to use equal pay audits to help fulfil their legal obligations	Developing	-
3.3	Training and development opportunities are taken up and positively evaluated by all staff	Developing	2
3.4	When at work, staff are free from abuse, harassment, bullying and violence from any source	Developing	1
3.5	Flexible working options are available to all staff consistent with the needs of the service and the way people lead their lives	Achieving	5
3.6	Staff report positive experiences of their membership of the workforce	Developing	1-6
4	Inclusive Leadership		
4.1	Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations	Developing	1-6
4.2	Papers that come before the Board and other major Committees identify equality-related impacts including risks, and say how these risks are to be managed	Developing	Patient Objective
4.3	Middle managers and other line managers support their staff to work in culturally competent ways within a work environment free from discrimination	Developing	5

Gender Pay Gap Report

A full copy of our GPG submission is available on the Trust Publications Website

The Trust has calculated the gender pay gap data in line with the government's gender pay gap reporting regulations ahead of submission of 30th March 2019. The mean gender pay gap is 30%, and the median is 12%. Although not mandatory, the Trust has produced a narrative that explains the calculations and provides an organisational context.

The reasons for a gender pay gap are multi-factorial; terms and conditions, length of service, gender mix, pension, flexible working arrangements and salary sacrifice commitments can all have an impact upon the overall gender pay gap results.

We recognised that a key reason for the gender pay gap in 2017 was that fewer female medical staff than male held Clinical Excellence Awards and the levels of CEA's that female medics held were, on average, lower in monetary value (this is often linked to length of service). In response, during 2018 we undertook a range of actions, including workshops and additional support to encourage more female and part time female medical staff to apply for an Award.

Workforce EDI Objectives 2018-2021

A full copy of a SMART objectives plan is available on request from the E&D Manager.

The objectives are aligned to WRES and EDS2 (and WDES post implementation).

1. Improve the experience of staff with the specific focus on bullying and harassment

2. Improve the experience of staff by providing improved communication and support for career development opportunities

3. Increase the diversity at all levels of the workforce to truly represent the community we serve

4. Resource and involve staff networks to provide a collective voice for staff with protected characteristics

5. Provide organisational training and awareness on how better to support individual needs

6. Minimise the gender pay gap

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Staff Networks

- Alder Hey recognises that the health and well-being of staff is essential to delivering high quality patient care and having a forum to properly listen to staff helps achieve this. The 'Listening into Action' process has propelled us to 'start the conversation' about what is important to staff who belong to minority groups and to set up three networks.

- The purpose of staff networks is to empower, encourage and promote equitable opportunities for Trust employees and volunteers and to have a voice in the Trust's policies, procedures and strategies, ensuring best practice outcomes in the workplace

- Current initiatives include the reciprocal mentoring programme (to enable transcultural learning between staff and senior leaders) the rainbow initiative broadening LGBTQI+ Training and reasonable adjustment guidance for staff.

- The Trust has three staff networks for each Black, Asian and Minority Ethnic (BAME), Lesbian, Gay, Bisexual, Transgender, Queer, Intersex plus (LGBTQI+) and Disability. In February 2019 we had our first LGBTQI+ meeting.

- Each network has an intranet site with terms of reference and relevant information. Network members have access to their networks folders on the shared drive that includes agendas and action plan that is maintained by an administrator.

- The network updates Trust Board of its progress on a 6 monthly basis.

- Chairs of the network are members of the Health and Well-Being Committee where actions identified by the networks are progressed and as contained in the objectives.

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Staff Survey Results

The following staff survey question responses are shared with BAME, LGBTQI+, Disability Staff Networks annually in March comparing staff responses for BME/White, LGBTQI+/Heterosexual and Disabled/Non-Disabled staff. Some are already included in the WRES and WDES metrics.

- How satisfied are you with the extent to which the organisation values your work?
- How satisfied are you with the opportunities for flexible working patterns?
- In the last 12 months, have you personally experienced discrimination at work from patients / service users, their relatives or other members of the public?
- In the last 12 months have you personally experienced discrimination at work from a manager / team leader or other colleagues?
- Does your organisation act fairly with regard to career progression / promotion, regardless of ethnic background, gender, religion, sexual orientation, disability or age?
- In the last 12 months how many times have you personally experienced harassment, bullying or abuse at work from patients / service users, their relatives or other members of the public?
- In the last 12 months how many times have you personally experienced harassment, bullying or abuse at work from managers?
- In the last 12 months how many times have you personally experienced harassment, bullying or abuse at work from other colleagues?
- The last time you experienced harassment, bullying or abuse at work, did you or a colleague report it?
- Have you had any training, learning or development in the last 12 months? (not including mandatory training)
- I would recommend my organisation as a place to work.

For Disability Network Only – Employer has made adequate adjustment(s) to enable them to carry out their work

Learning and Development

- The trust offers a wide range of internal clinical and non-clinical training for all staff, provided by appropriately qualified trainers and educators. All staff, regardless of protected characteristics are required to complete mandatory training based on their individual job needs ensuring that all protected characteristics have access to the same training as required.

- As part of mandatory training, the Trust requires all staff to complete Equality, Diversity and Human Rights training upon joining the organisation and refresher training every 3 years. Current Equality, Diversity and Inclusion Training includes:

  – Mandatory E-Learning for all Trust staff

  – Learning Disability Training (patient-related)

  – Cultural Sensitivity Training (patient and workforce related)

  – Recruitment and Selection Training (that includes unconscious bias)

  – LGBTQI+ Training (patient-related)

Learning and Development

- Training Opportunities are dependent on funding and how accessible these are particularly to part time staff, this can potentially impact on data findings.

- The staff survey suggests that the quality of our appraisal's are improving where training needs will be identified. The study leave form captures all applications for study leave (accepted or not) by demographic. In the event that staff feel that their application for study leave has been unfairly declined, this can be progressed through the Trust grievance procedure, we are not aware of any grievances relating to this in the last year.

- The networks are helping to develop training content to support the Trust leadership (Strong Foundations) programme to help line managers consider how they need to behave to be an inclusive leader

- The Trust has signed up to the 'rainbow initiative' that will see an extension of LGBTQI+ training in 2019/20.

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Learning and Development

As well as internal training, all staff are eligible to apply for Study Leave to support their personal and professional development. In order to encourage staff to access opportunities these are promoted via the intranet which all staff have access to. The uptake of non-mandatory training opportunities is recorded on ESR for non-medical staff which allows the trust to compare uptake against the following protected characteristics:

Age - There is a difference between the trust overall age demographics and the staff who are applying for study leave as part of the process, however this is to be expected as staff generally front load their large learning and development needs i.e. completing degree and masters programmes towards the start of their career. This is visible in that there is an over representation in younger staff accessing study leave and an under representation in older age groups accessing study leave.

Gender - As a Trust there is an over representation of female staff accessing study leave – 4% higher than the trust average, however a large proportion of our study leave requests come from nursing staff and compared to the nursing staff breakdown of gender we would be under the expected proportion.

Disability - We have an over representation of staff who have disclosed a disability accessing study leave within the trust, 1.90% higher than expected.

Ethnicity - As a Trust we are within 1% of our expected ethnicity statistics for Study Leave.

Religion or Belief - We have a slight over representation of Christianity, Atheism and Judaism within our Study Leave applications and an under representation of Other non-defined religions.

Sexual Orientation - Our breakdown of sexuality of staff accessing study leave is in alignment with the Trust overall.
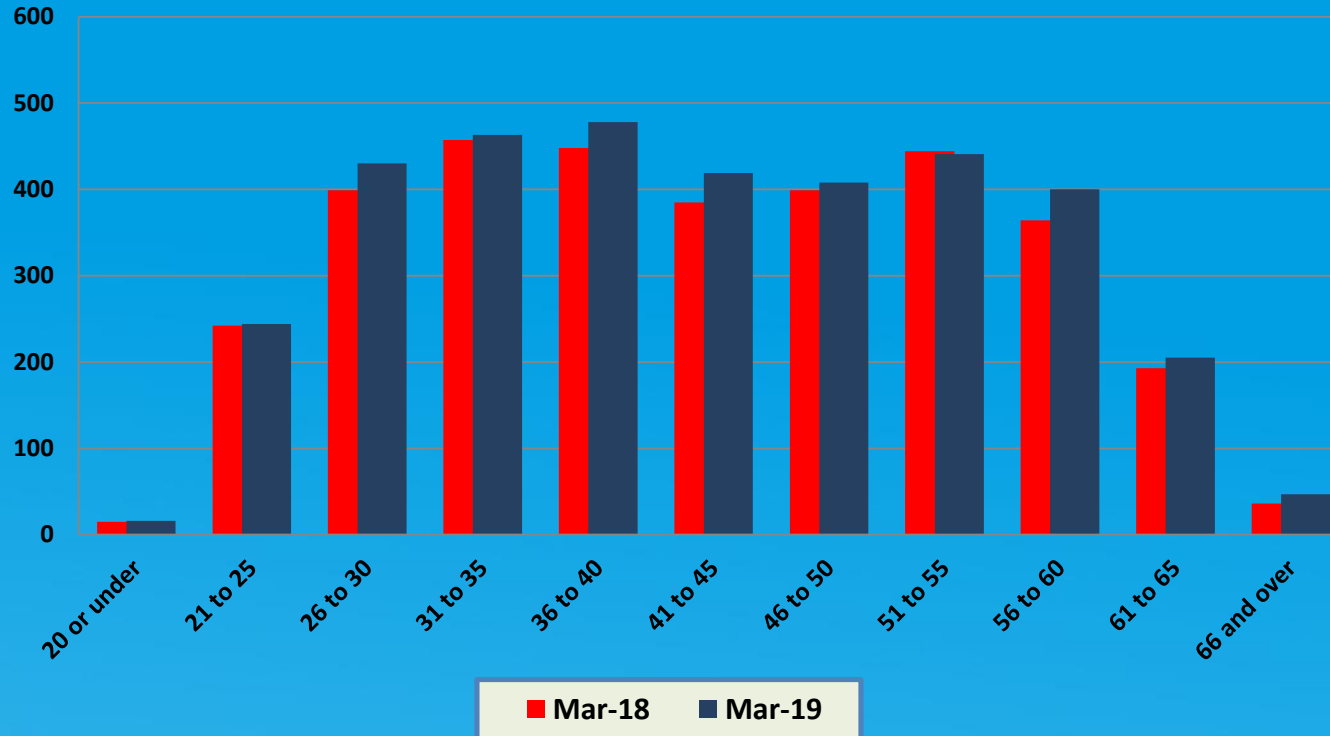
Workforce Diversity (ESR) Information
# 31 March 2019

Trust Profile by Age

The total number of staff employed by the Trust at 31st March 2019 is 3551.

The majority of the workforce are aged 31-40 years old. There appears to be an increase in number in the older age groups and significantly in the 56-60 age group.

Overall	Age Band	20 or under	21 to 25	26 to 30	31 to 35	36 to 40	41 to 45	46 to 50	51 to 55	56 to 60	61 to 65	66 and over	Grand Total
Mar-19	Total	16	244	430	463	478	419	408	441	400	205	47	3551
	% of Staff	0.45%	6.87%	12.11%	13.04%	13.46%	11.80%	11.49%	12.42%	11.26%	5.77%	1.32%	100.00%
Mar-18	Total	15	242	399	457	448	385	399	444	364	193	36	3382
	% of Staff	0.44%	7.16%	11.80%	13.51%	13.25%	11.38%	11.80%	13.13%	10.76%	5.71%	1.06%	100.00%

Trust Profile by Disability

Non-
Disabled
97%

Disabled
3%
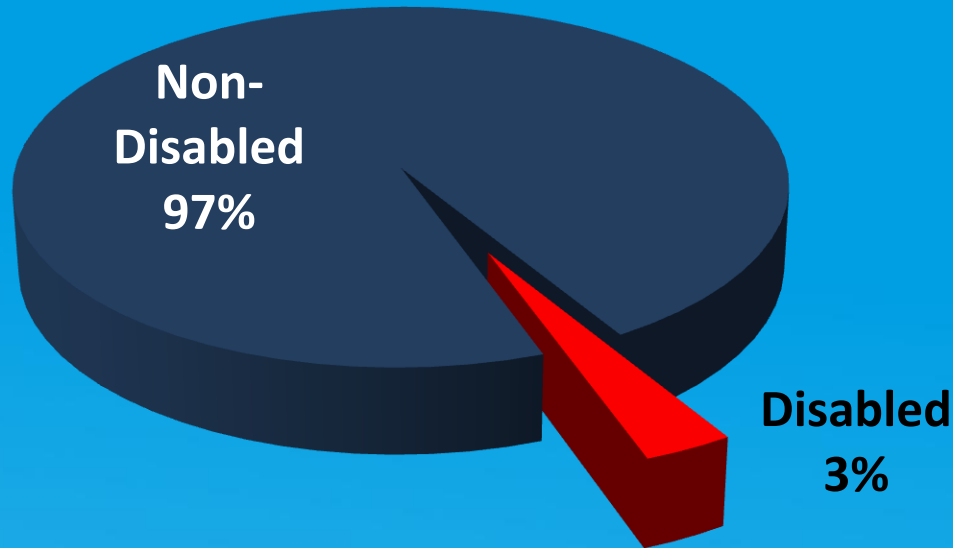
There has been a significant increase in the number of staff recorded as having a disability from 2.57% (87) staff to 3.27% (116) staff.

	Headcount		%	
	Mar-19	Mar-18	Mar-19	Mar-18
No	3435	3295	96.73%	97.43%
Yes	116	87	3.27%	2.57%
Grand Total	3551	3382	100.00%	100.00%

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Trust Profile by Gender

Alder Hey Children's NHS
NHS Foundation Trust

Female, 83.69%

Male, 16.31%
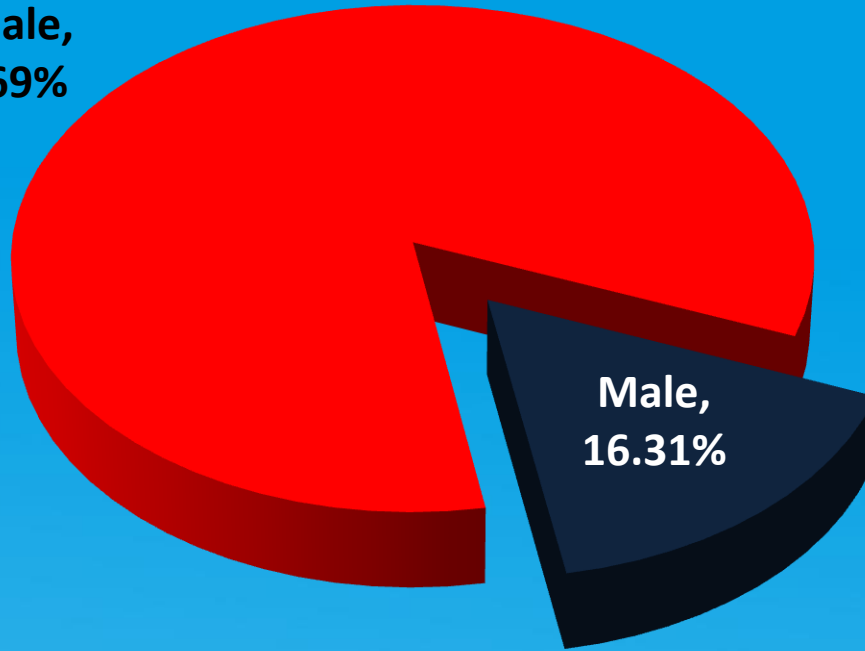
As expected, the workforce is comprised predominantly by female staff with figures similar to last year.

Gender	Headcount		%	
	Mar-19	Mar-18	Mar-19	Mar-18
Female	2972	2833	83.69%	83.77%
Male	579	549	16.31%	16.23%
Grand Total	3551	3382	100.00%	100.00%

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Staff Group Analysis by Gender

	Add Prof Scientific and Technic	Additional Clinical Services	Administrative and Clerical	Allied Health Professionals	Estates and Ancillary	Healthcare Scientists	Medical and Dental	Nursing and Midwifery Registered
Male	41	69	154	25	56	35	142	57
Female	203	401	630	251	180	87	138	1082
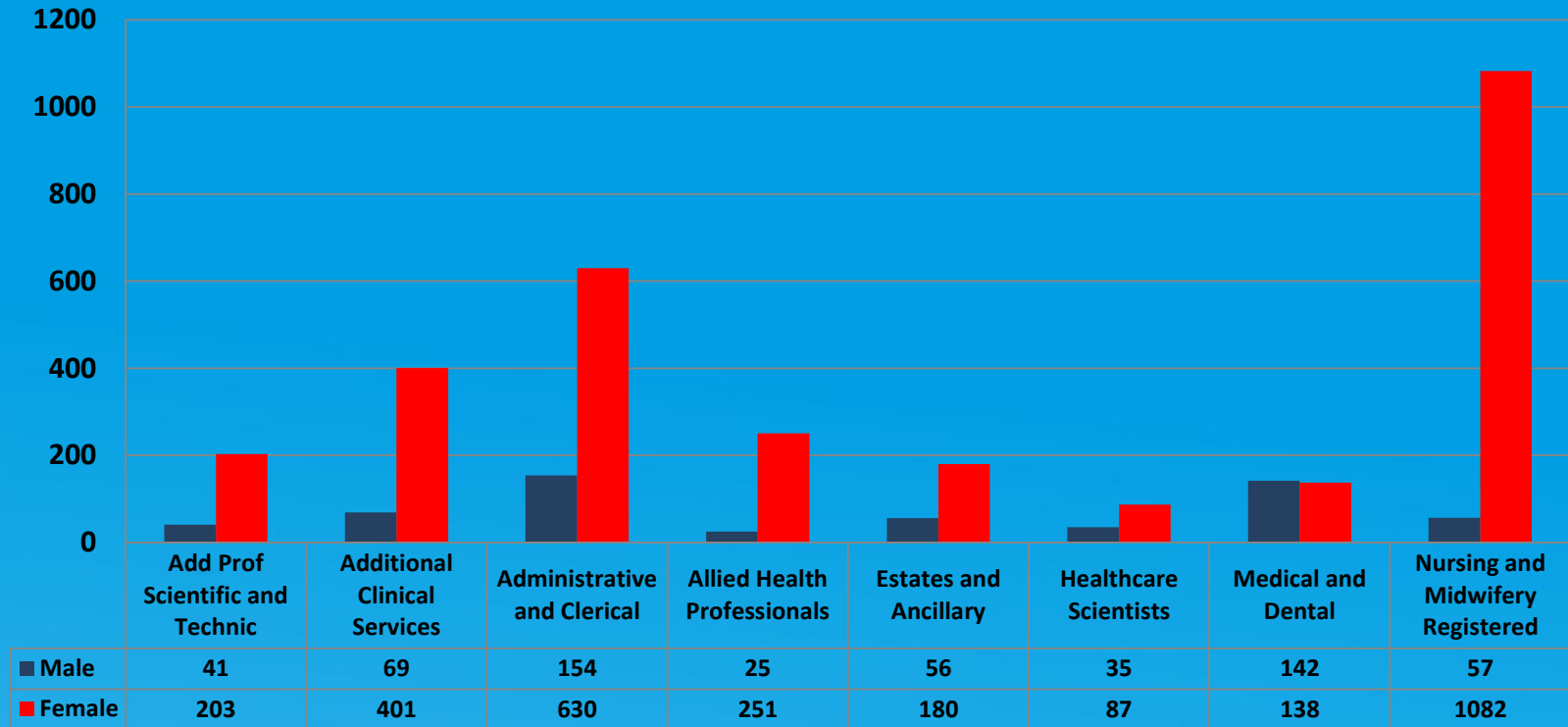
The majority of the workforce is female with the majority of the male workforce from the administrative and clerical staff group and the majority of the female workforce from the nursing and midwifery staff group.

Trust Profile By Ethnicity

Alder Hey Children's **NHS**
NHS Foundation Trust

There has been no increase in the number of BAME staff 2018-2019 making up 6% of the overall workforce.

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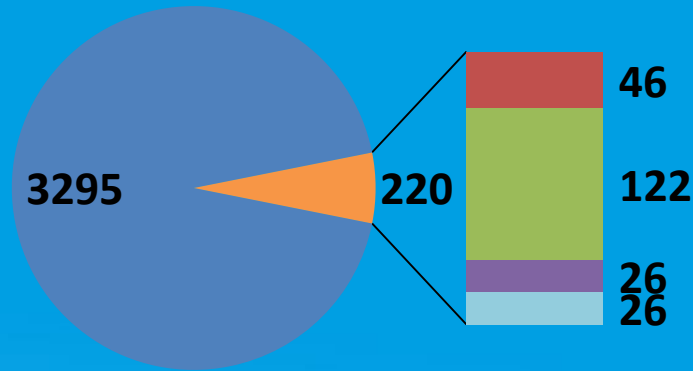
White **Mixed** **Asian** **Black** **Chinese or Other**

2019	
Ethnic Grouping	No of Staff
White	93.74%
Mixed	1.31%
Asian	3.47%
Black	0.74%
Chinese or Other	0.74%
Total	100.00%

3120 — 202 — 37 / 118 / 24 / 23
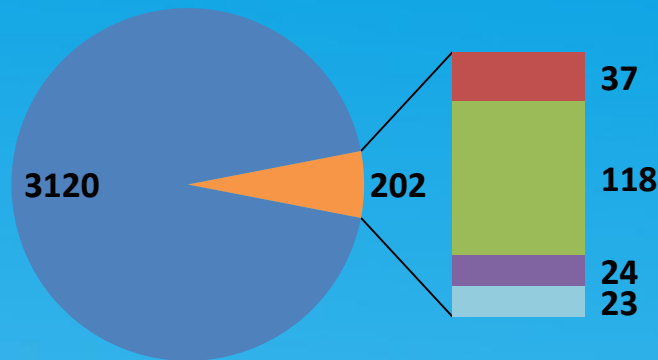
White **Mixed** **Asian** **Black** **Chinese or Other**

2018	
Ethnic Grouping	No of Staff
White	93.92%
Mixed	1.11%
Asian	3.55%
Black	0.72%
Chinese or Other	0.69%
Total	100.00%

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Ethnicity Breakdown

Please read clockwise.

Mixed

- White & Black Caribbean
- White & Black African
- White & Asian
- Any other mixed background
- Chinese & White
- Mixed Other/Unspecified

4% 4% 22% 7% 41% 22%
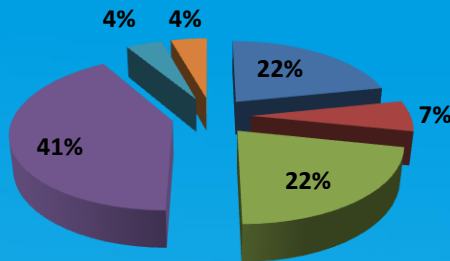
Asian

- Indian
- Pakistani
- Bangladeshi
- Any other Asian background
- Punjabi
- Sri Lankan
- Asian British

6% 2% 1% 1% 1% 8% 81%
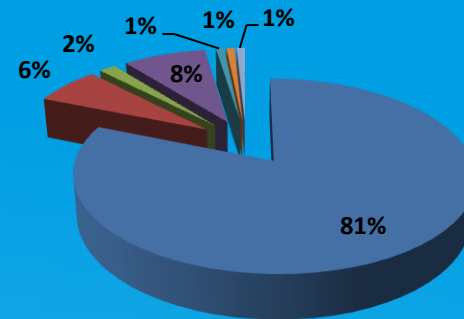
Black

- Caribbean
- African
- Black British
- Black Unspecified

4% 4% 34% 58%
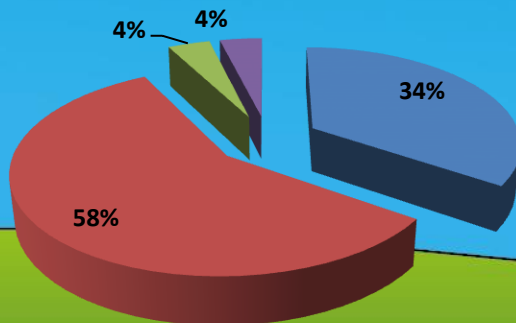
Chinese & Other

- Chinese
- Any Other Ethnic Group
- Malaysian
- Other Specified

4% 8% 27% 61%

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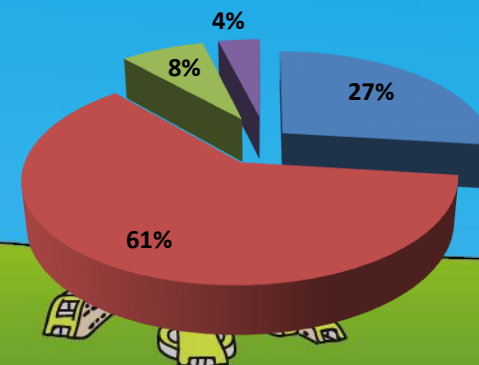
New Starters by Ethnicity 2018 vs 2019
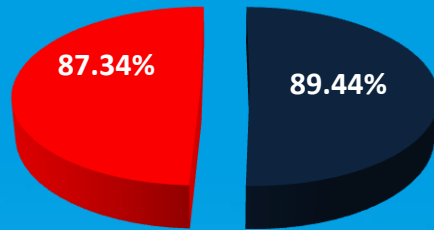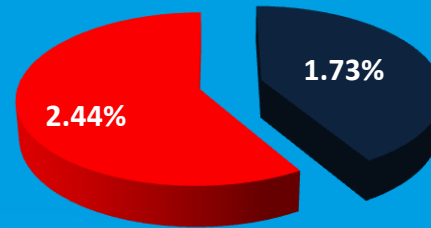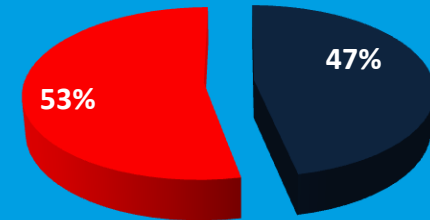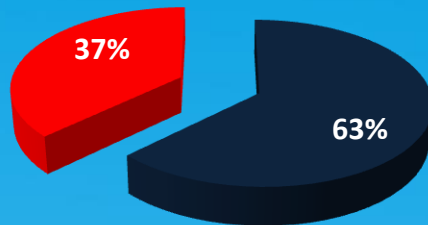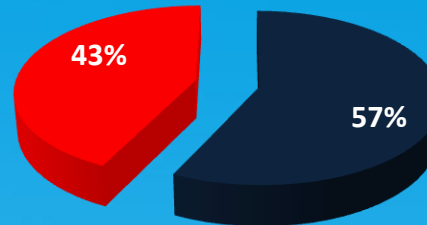
Alder Hey Children's NHS
NHS Foundation Trust

WHITE

87.34% 89.44%

MIXED

2.44% 1.73%

ASIAN

53% 47%

BLACK

37% 63%

CHINESE OR OTHER

43% 57%

NOT STATED

28% 72%
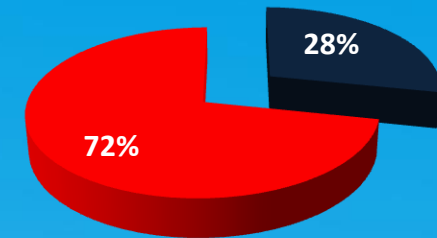
There is a significant increase in the number of Black Ethnic New Starters in 2019 at 63% compared to 37% in the previous year and also in the Chinese or Other ethnic category at 57% compared to 43% in the previous year. The quality of data has also significantly improved with 28% compared to 72% in the previous year of staff 'not stating' their ethnicity.
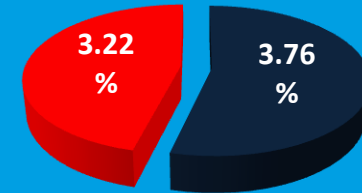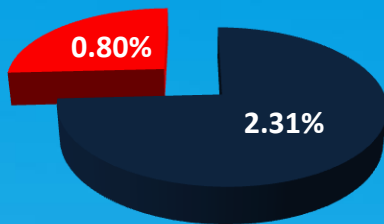
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Leavers by Ethnicity 2018 vs 2019

Alder Hey Children's NHS Foundation Trust

WHITE
88.47%
89.88%

MIXED
0.80%
0.87%

ASIAN
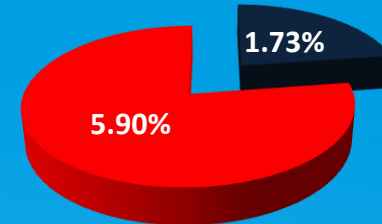3.22%
3.76%
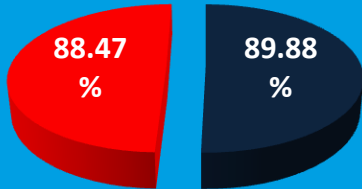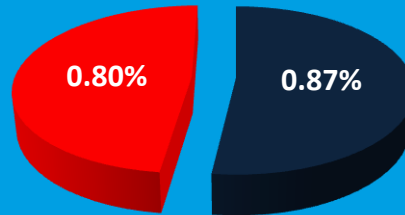
BLACK
0.80%
2.31%

CHINESE OR OTHER
0.80%
1.45%

NOT STATED
1.73%
5.90%

Whilst there is a significant increase in the number of Black Ethnic New Starters in 2019 there are also significantly more leaving at 2.31% compared to 0.80% in the previous year. The quality of data has also significantly improved with 1.73% compared to 5.90% in the previous year of not being able to identify the ethnicity of leavers.   We have recently reviewed the trust exit process and have initiated the exit questionnaire functionality in ESR. Using ESR to record exit questionnaires will allow us to report on this data and combine it with turnover data to produce a more detailed analysis of leavers. The new exit process has only been implemented since March so there is not enough data within ESR to produce an information for this purposes of this report. Going forward there will be that a quarterly analysis of this data to be produced for the Trust workforce committee during Q2 reviewing Q1 data. We need to look at more data to properly understand why BME staff are leaving.
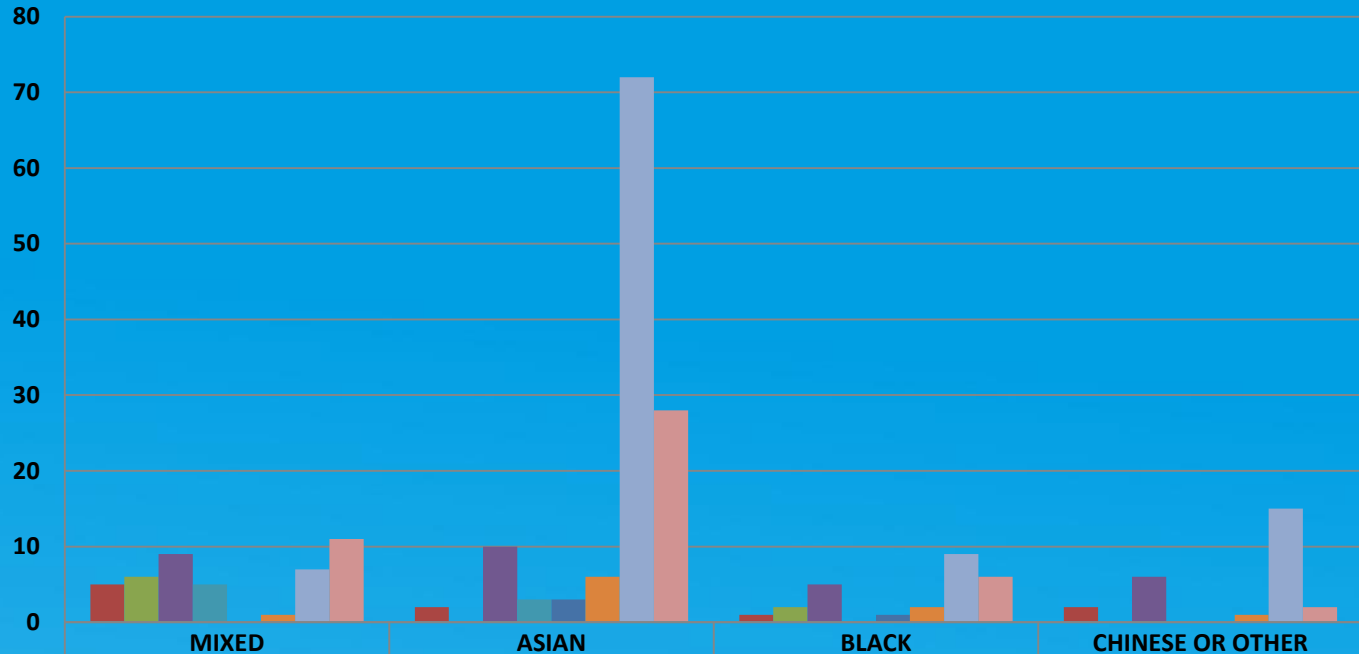
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Trust Ethnicity Profile

Comparing by Trust, Local, Regional & National
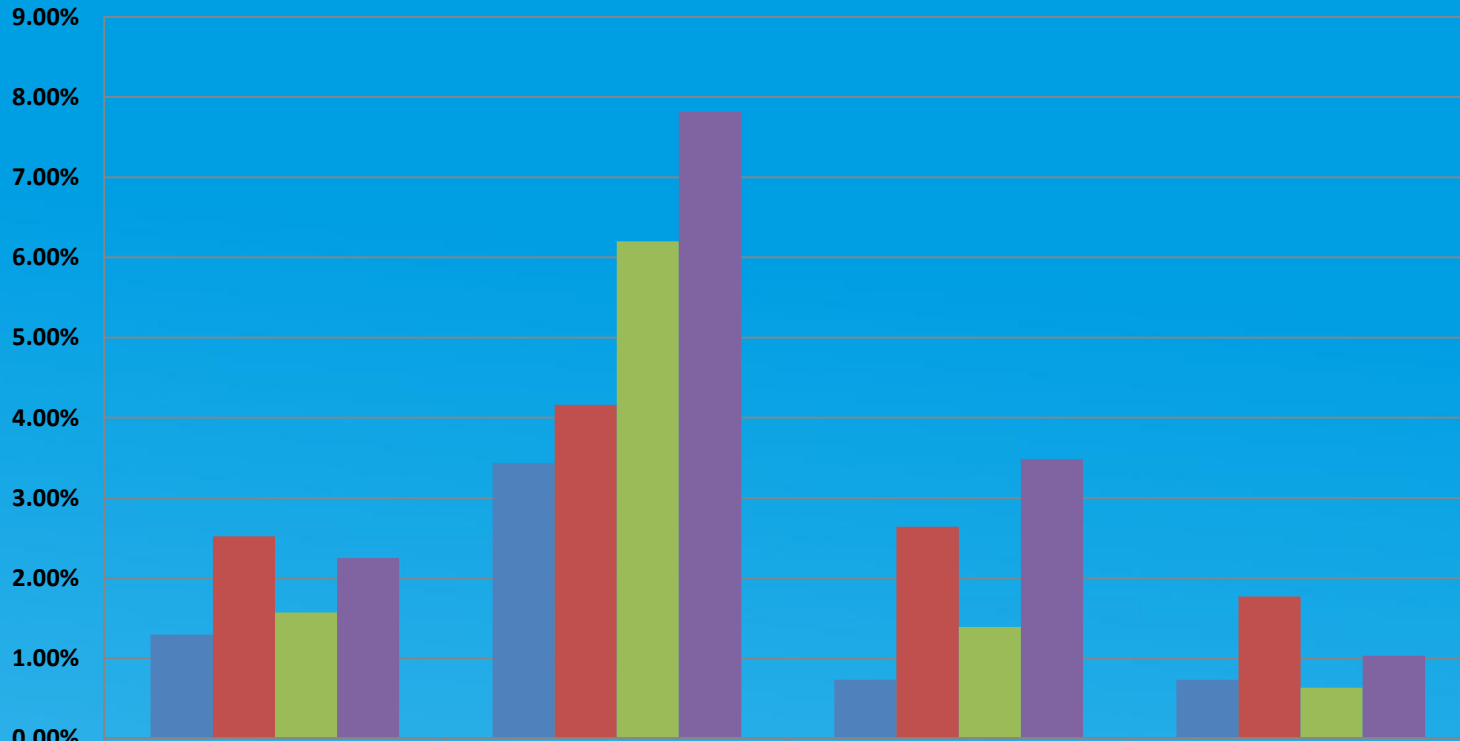
	Mixed	Asian	Black	Chinese or Other
Trust	1.30%	3.44%	0.73%	0.73%
Liverpool	2.52%	4.16%	2.64%	1.77%
North West	1.57%	6.20%	1.39%	0.63%
England	2.25%	7.82%	3.48%	1.03%

Trust Ethnicity Profile by Staff Group

	MIXED	ASIAN	BLACK	CHINESE OR OTHER
Add Prof Scientific and Technic	5	2	1	2
Additional Clinical Services	6	0	2	0
Administrative and Clerical	9	10	5	6
Allied Health Professionals	5	3	0	0
Estates and Ancillary	0	3	1	0
Healthcare Scientists	1	6	2	1
Medical and Dental	7	72	9	15
Nursing and Midwifery Registered	11	28	6	2

Trust Profile by Religion or Belief

Alder Hey Children's **NHS**
NHS Foundation Trust
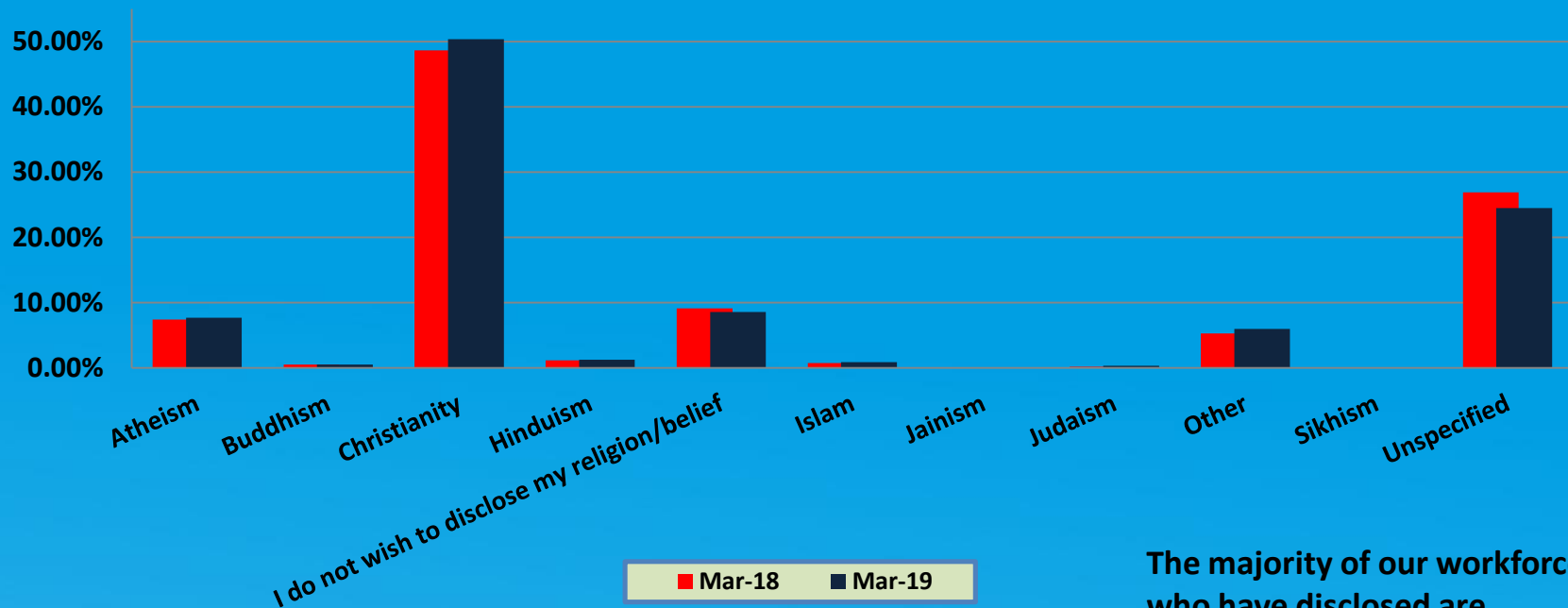
Mar-18 ■ **Mar-19**

Religious Belief	Mar-18		Mar-19	
	Headcount	%	Headcount	%
Atheism	250	7.39%	272	7.66%
Buddhism	17	0.50%	17	0.48%
Christianity	1646	48.67%	1789	50.38%
Hinduism	39	1.15%	43	1.21%
I do not wish to disclose my religion/belief	308	9.11%	304	8.56%
Islam	25	0.74%	30	0.84%
Jainism	1	0.03%	2	0.06%
Judaism	5	0.15%	10	0.28%
Other	178	5.26%	211	5.94%
Sikhism	3	0.09%	3	0.08%
Unspecified	910	26.91%	870	24.50%
Grand Total	3382	100.00%	3551	100.00%

The majority of our workforce who have disclosed are Christian at 50%. We need to continue to improve the quality of workforce data with 24% (870) unspecified.

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Trust Profile by Sexual Orientation

Alder Hey Children's **NHS**
NHS Foundation Trust

■ Mar-18 ■ Mar-19

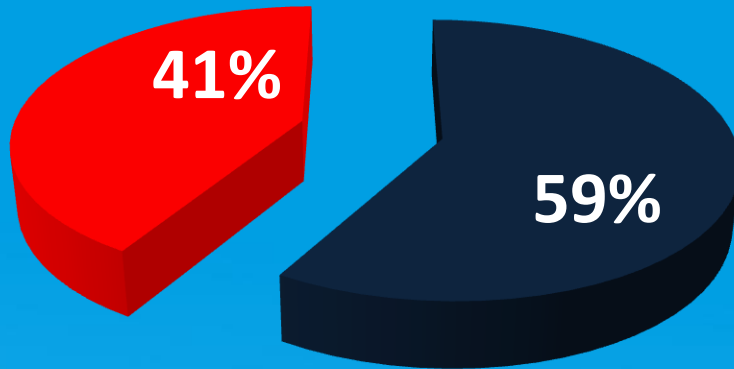| Sexual Orientation	Mar-18		Mar-19	
	Headcount	%	Headcount	%
Bisexual	14	0.41%	12	0.34%
Gay or Lesbian	41	1.21%	51	1.44%
Heterosexual	2187	64.67%	2387	67.22%
I do not wish to disclose my sexual orientation	222	6.56%	222	6.25%
Other sexual orientation not listed	0	0.00%	1	0.03%
Undefined	918	27.14%	878	24.73%
Grand Total	3382	100.00%	3551	100.00%
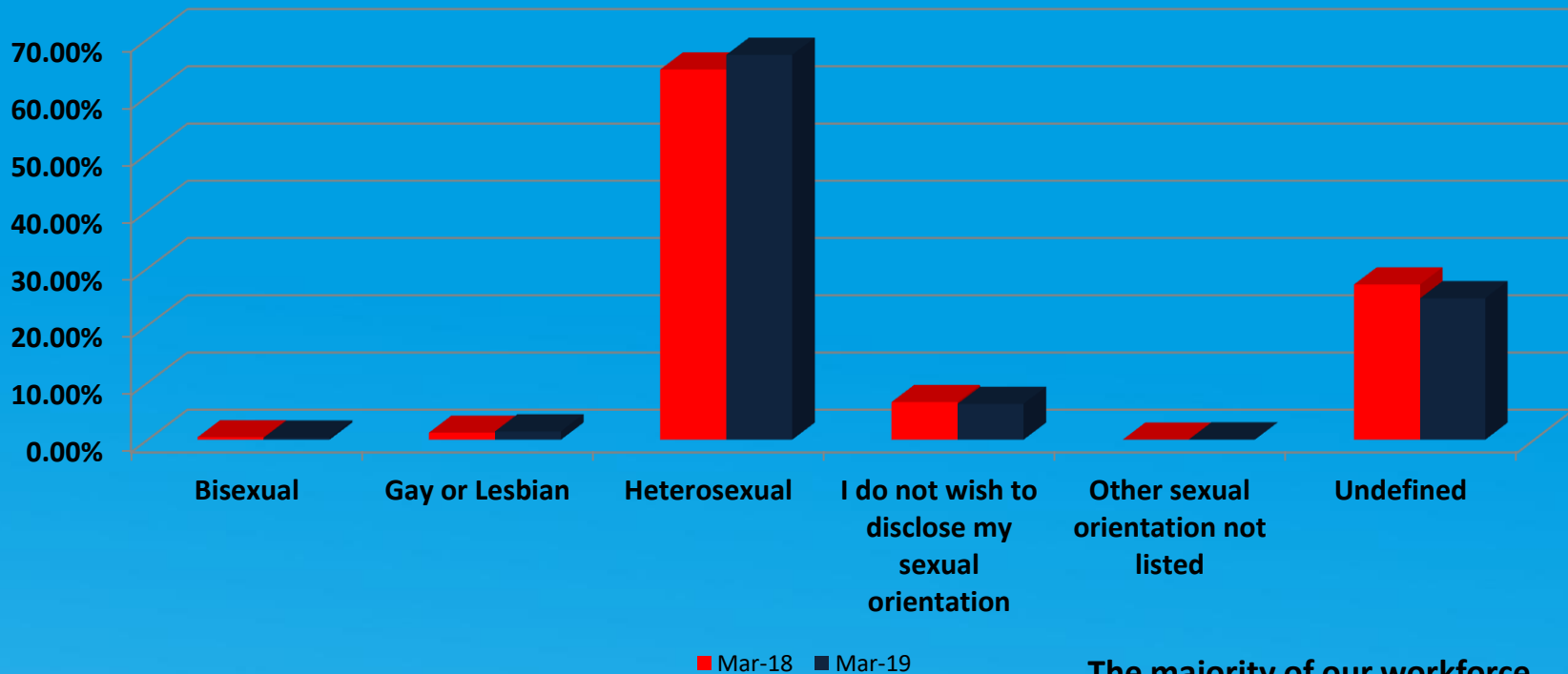
The majority of our workforce who have disclosed are heterosexual at 67% with 2% LGBO. We need to continue to improve the quality of workforce data with 25% (878) undefined.

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Trust Profile by Flexible Working (Full or Part Time)

Alder Hey Children's NHS
NHS Foundation Trust

41%

59%

■ Full Time ■ Part Time

Figures are similar to the previous year's report. This is proportionate with the percentage of the workforce at 84% being female with a higher proportion of females having primary care responsibilities for childcare.

Staff Type	Headcount		% of Workforce	
	Mar-18	Mar-19	Mar-18	Mar-19
Full Time	1989	2080	58.81%	58.58%
Part Time	1393	1471	41.19%	41.42%
Grand Total	3382	3551		

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Employee Relations 1st April 2017 to 31 March 2019

Alder Hey Children's **NHS**
NHS Foundation Trust

By Ethnicity

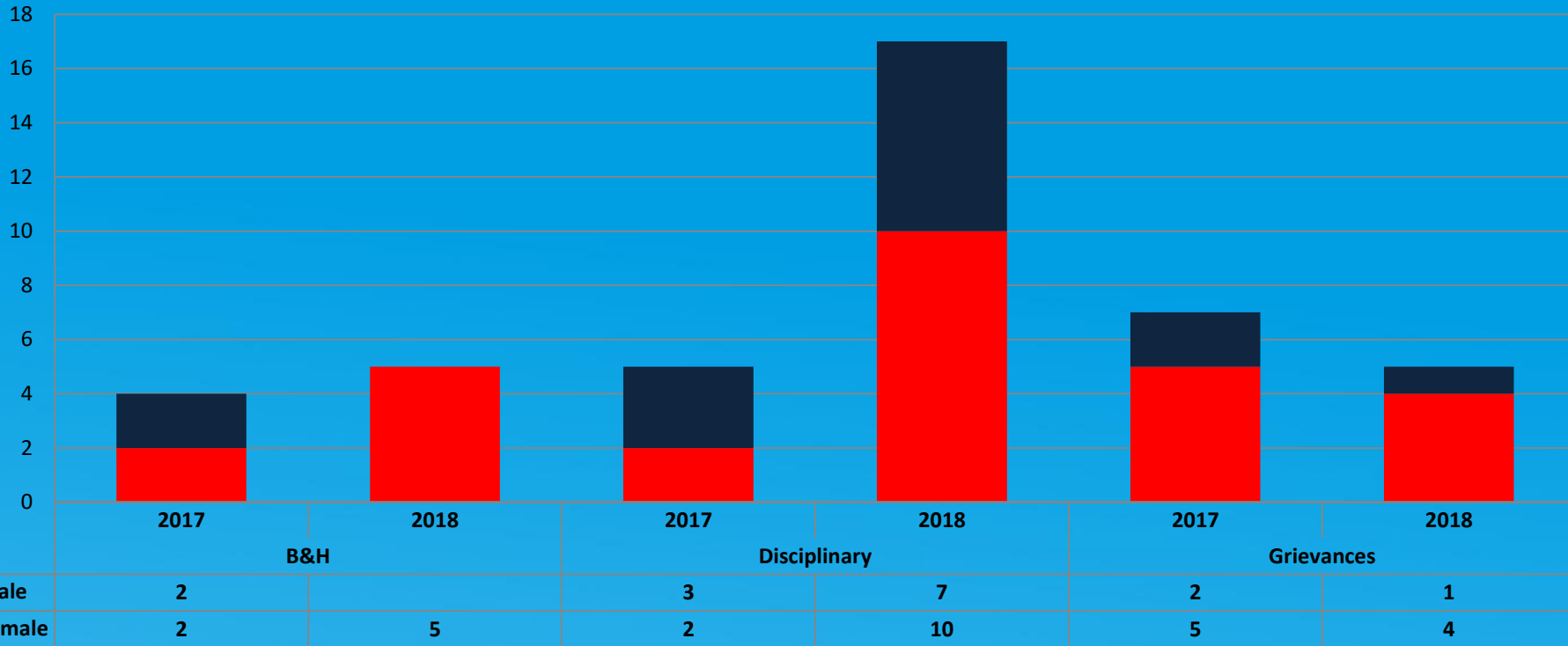|	BME	White	White
	2017		**2018**
■ Grievances	1	6	5
■ Disciplinary		5	17
■ B&H		4	5

Figures are similar to the previous year's report. There are too few staff BME staff to obtain anything meaningful from the data and no BME staff entering formal procedures in 2018.

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Employee Relations 1st April 2017 to 31 March 2019

By Gender

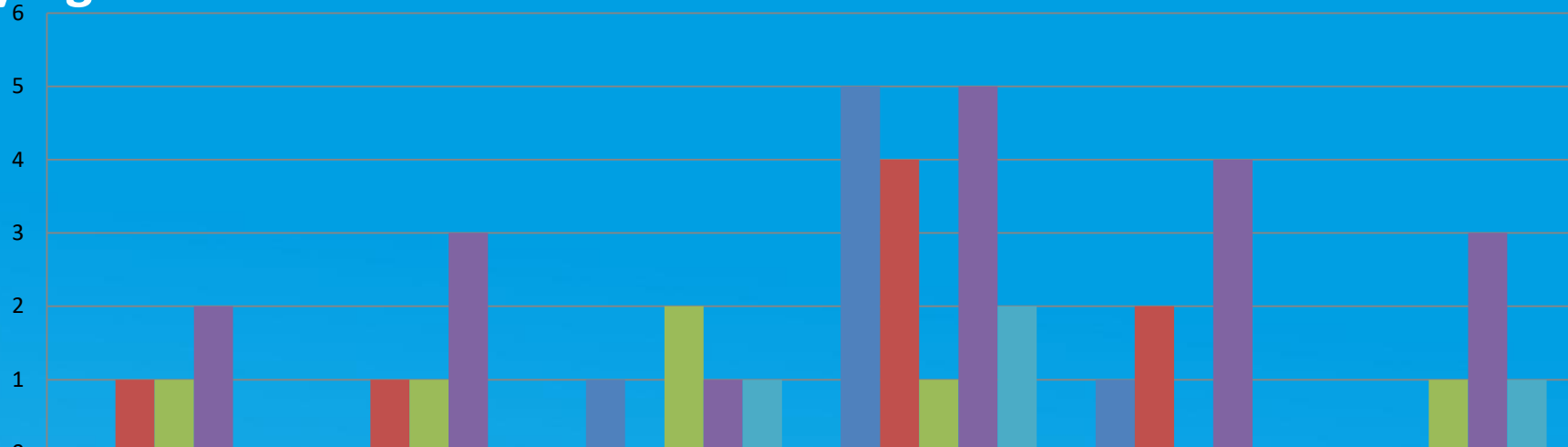|	B&H		Disciplinary		Grievances	
	2017	2018	2017	2018	2017	2018
■ Male	2		3	7	2	1
■ Female	2	5	2	10	5	4

The data suggests that both male and female staff are entering formal disciplinary procedures compared to grievance or bullying and harassment. Male staff are more likely than female staff to enter formal procedures (0.025% males compared to 0.009% females).

Employee Relations 1st April 2017 to 31 March 2019

By Age

	B&H		Disciplinary		Grievances	
	2017	2018	2017	2018	2017	2018
21-30			1	5	1	
31-40	1	1		4	2	
41-50	1	1	2	1		1
51-60	2	3	1	5	4	3
60 and over			1	2		1

Significantly, the 51-60 age group appear to be more likely to enter formal procedures compared to any other age categories with 31-60 year olds mainly involved in disciplinary procedures.

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Recruitment and Selection (NHS Jobs) Information

NHS Jobs Data

- **Age:** The greatest number of applications is between ages 20-24, 25-29 and 30-34 at around 2,000 per age group per annum. Number of applications and appointments drop significantly from ages 55+.

- **Religion or Belief:** The greatest number of applicants indicate that they are Christian at approximately 68% (6,600) per annum followed by atheist 11% or other 9% (1,300) per annum. There is a greater number not self-reporting their denomination at 9.3% (1,033) compared to last year at 9.2% (862)

- **Marital Status:** The majority of applicants are single status at 60% (6,706) that is consistent with the age data suggesting that the majority of younger age categories apply to the Trust.

- **Gender:** The majority of applicants are female at 77% (8,572) which is probably attributable to the fact that the majority of the workforce are nursing and midwifery staff group that is predominantly female gender

NHS Jobs Data

- **Disability:** The data suggests that we had 5% (524) applicants of which 5% (157) was shortlisted and 4% (13) was appointed. This is an increase from last year when we had 4.3% (404) applicants with a similar number of appointments at 5% (14). We will continue to monitor this data as we would like to see an increase in the number of disabled staff employed at the Trust.

- **Sexual Orientation:** We had Lesbian, Gay, Bisexual, Other 4% (467) applicants with 2% (6) appointed. The majority of applicants are heterosexual 93% (10,338).

- **Ethnicity:** 11,004 applicants disclosed their ethnicity. Of that number:

  - White: 84% (9,405) white applicants of whom 31% (2,925) were shortlisted and 7% (198) were appointed.

  - BME: 15% (1599) BME applicants of whom 22% (350) were shortlisted and 3% (9) were appointed.

  - **These figures shows an increase in BME applicants from 13% to 15% but a decrease in the number shortlisted (22% from 23%) and significantly appointed (3% from 13%).**

- Asian or Asian British (Indian) make up the majority of BME applications at 3.3% (368) followed by Black or Black British African making up 2.9% (328) of the applications.

- There are a higher number of applicants not disclosing their ethnicity at 1.4% (156) applications compared to last year at 1.5% (144).

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