

PUBLICATION OF STAFF EQUALITY DATA

1 APRIL 2018 – 31 MARCH 2019

Published 21st May 2019

making a

difference

together

If you need this information summarised in another language or format such as Braille, talking tape or DVD please call the number below.

Polish:

Jeżeli potrzebujesz streszczenia tych informacji w innym języku lub formie, np. w Braille'u lub w formie nagrania dźwiękowego, zadzwoń na poniższy numer.

Arabic:

إذا أردت منا تلخيص هذه المعلومات بلغة أخرى أو بصيغة مختلفة مثل لغة بريل أو شريط صوتي أو قرص DVD يرجى الاتصال برقم الهاتف التالي.

Bengali:

যদি আপনি অন্য একটি ভাষায় এই তথ্যের সংক্ষিপ্তসার চান অথবা ব্রেইল, কথা বলা টেপ অথবা ডি.ভি.ডি. ফরম্যাট-এ এই তথ্য চান, তাহলে অনুগ্রহ করে নিচের নম্বরে টেলিফোন করুন।

Farsi:

در صورتی که مایلید خلاصه این اطلاعات را به زبان یا فرمت دیگری مانند بریل، نوار یا دی وی دی دریافت کنید، لطفاً با شماره زیر تماس بگیرید.

Hindi:

यदि आप इस सूचना का सारांश किसी अन्य भाषा या स्वरूप में, जैसे ब्रेल, टाकिंग टेप या DVD में चाहते हैं, तो कृपया नीचे दिए गए नंबर पर फोन करें।

Kurdish (Kurmanji):

Heke hun vê agahîyê bi kurtî bi zimanekî din an formateke din a wek Braille (ji bo kêmasîya dîtîne), teypa axaftinê yan jî DVD dixwazin, ji kerema xwe telefonî hejmarê jêrîn bikin.

Punjabi:

ਜੇ ਤੁਹਾਨੂੰ ਇਸ ਜਾਣਕਾਰੀ ਦਾ ਸਾਰ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਜਾਂ ਫਾਰਮੈਟ ਜਿਵੇਂ ਬ੍ਰੇਲ, ਟਾਕਿੰਗ ਟੇਪ ਜਾਂ DVD ਵਿੱਚ ਚਾਹੀਦਾ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਨੰਬਰ ਤੇ ਕਾਲ ਕਰੋ।

Simplified Chinese:

如果您需要该条信息用其他语言或格式概述，例如盲文，录音磁带或DVD。请联系以下号码：

Urdu:

اگر آپ کو ان معلومات کے خلاصہ کی کسی دیگر زبان یا شکل مثلاً بریل، ٹیکنگ ٹیپ یا ڈی وی ڈی میں ضرورت ہو تو برائے مہربانی درج ذیل نمبر پر کال کریں۔



Telephone 0191 3336267

PUBLICATION OF EQUALITY DATA**1. INTRODUCTION**

1.1 The general equality duty of the Equality Act 2010 requires the Trust in the exercise of its functions to have due regard to the need to :

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

1.2 The Trust must publish information to demonstrate its compliance with the general equality duty. This information must include information relating to service users who share a relevant protected characteristic who are affected by its policies and practices. The protected characteristics are sex, race, sexual orientation, gender reassignment, disability, religion and belief, marriage and civil partnership, age and pregnancy and maternity.

1.3 The Trust has published information to meet its public sector duties for the last six years.

1.4. The information in this report as far as possible replicates the indicators of the Workforce Race Equality standard (WRES). The information in the disability section mirrors the indicators for the Workforce Disability Equality Standard (WDES) which has to be published for the first time this year.

The information relates to staff employed by the trust and contains information about age, sex, disability, race and sexual orientation for the period 1st April 2018 – 31st March 2019. The information sources are as follows:

- Indicator 1 is data obtained from ESR, the trust's electronic staff rota. VSM in this indicator stands for very senior manager.
- Indicator 2 is data pulled from NHS jobs which is the database the trust uses to advertise jobs and to recruit staff.
- Indicator 3 has been sourced from detailed records kept throughout the year on disciplinary cases.
- Indicator 4, the relative likelihood of staff accessing non mandatory training and CPD has been obtained from responses to a question in the staff friends and family test.
- Indicators 5 – 11 and 5 – 16 in relation to disability come from the national staff survey which again was sent to all staff. It is to be noted that there have been changes in the ways in which the staff survey is published nationally and this has resulted in some changes in the data fields – in particular in relation to sexual orientation, but also in other fields.
- Information for the indicator on the make-up of the trust board has been pulled from ESR and shows the percentage difference between the board makeup and that of the trust as a whole by each protected characteristic. A minus sign preceding the figure indicates that the representation on the board of a particular protected characteristic is less than the representation of that characteristic in the trust as a whole. A plus sign preceding the figure would indicate that the board representation of a particular characteristic is greater than that in the trust as a whole.

2. AGE:

Indicator.		Data for reporting year						
For each of these four workforce indicators, compare the data for Age Groups.								
1.	Percentage of staff in each of the AfC Bands 1-9 and VSM (including executive Board members)	Clinical Staff %						
		Age	Band 1-4	Band 5-7	Band 8 a,b,c,d	Band 9	VSM	Medics
		16-20	0	0	0	0	0	0
		21-30	14	20	2	0	0	7
		31-40	20	29	32	0	0	25
		41-50	26	25	36	50	0	41
		51-65	39	25	29	50	0	26
		66+	1	1	1	0	0	1
		Non- clinical staff %						
		Age	Band 1-4	Band 5-7	Band 8 a,b,c,d	Band 9	VSM	Medics
		16-20	1	0	0	0	0	n/a
		21-30	9	8	0	0	0	n/a
		31-40	16	30	16	0	0	n/a
		41-50	24	28	42	0	35	n/a
51-65	47	33	42	0	65	n/a		
66+	3	1	0	0	0	n/a		
2.	Likelihood of staff being appointed from shortlisting across all posts.	20 & under	0.36		45-49	0.25		
		20-24	0.26		50-54	0.27		
		25-29	0.28		55-59	0.27		
		30-34	0.33		60-64	0.2		
		35-39	0.31		65+	0.07		
		40-44	0.29					
3.	Likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation.	16-20	0.08		41-50	0.01		
		21-30	0.01		51-65	0.01		
		31-40	0.01		66+	0.01		
4.	Relative likelihood of staff accessing non-mandatory training and CPD.	It is not possible to provide this information for age.						
	National NHS Staff Survey indicators For each of the four staff survey indicators, <u>compare the outcomes of the responses</u> for each of the age							

groups.					
5.	KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.	21-30	30%		
		31-40	27%		
		41-50	28%		
		51-65	26%		
		66+	23%		
6.	KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months.	21-30	18%		
		31-40	14%		
		41-50	17%		
		51-65	15%		
		66+	4%		
7.	KF 21. Percentage believing that Trust provides equal opportunities for career progression or promoting.	21-30	92%		
		31-40	90%		
		41-50	90%		
		51-65	91%		
		66+	95%		
8.	Q17. In the last 12 months have you personally experienced discrimination at work from any of the following? b) Manager/team leader or other colleagues.	21-30	7%		
		31-40	5%		
		41-50	5%		
		51-65	6%		
		66+	0%		
9.	KF17. % feeling unwell due to work related stress in the last 12 months.	21-30	40%		
		31-40	39%		
		41-50	44%		
		51-65	35%		
		66+	15%		
10.	KF18. % attending work in the last 3 months despite feeling unwell because they felt pressure	21-30	55%		
		31-40	51%		
		41-50	54%		
		51-65	50%		
		66+	42%		
11.	Overall staff engagement	21-30	7.0		
		31-40	7.4		
		41-50	7.2		
		51-65	7.2		
		66+	7.9		
	Board representation indicator: For this indicator, compare the <u>difference for age groups.</u>				
12.	Percentage difference between the organisation's Board voting membership, non-voting membership and NEDs and its overall workforce.	Age	Voting	Non-voting	NEDs
		16-20	-1%	-1%	-1%
		21-30	-15%	-15%	-15%
		31-40	-25%	-25%	-25%
		41-50	-9%	-27%	-27%
		51-65	+50%	+67%	+67
		66+	-1%	-1%	-1%

AGE BREAKDOWN FOR TRUST STAFF

Age Range	16-20	21-30	31-40	41-50	51-65	66+	Grand Total
Number	6	970	1637	1772	2216	78	6679
%	0.08	15	25	26	33	1	100

3. DISABILITY:

Indicator.		Data for reporting year			
	For each of these four workforce indicators, compare the data for Disability.				
1	Percentage of staff in each of the AfC Bands 1-9 and VSM (including executive Board members)	Clinical Staff %			
		Band	Disabled %	Not Disabled %	Not Declared %
		1-4	6	57	37
		5-7	6	72	22
		8 ab	4	73	23
		8 cd	4	59	37
		9	0	50	50
		VSM	0	0	0
		Medics	2	80	18
		Non-Clinical Staff %			
		Band	Disabled %	Not Disabled %	Not Declared %
		1-4	3	73	24
		5-7	6	72	22
		8 ab	3	57	40
8cd	6	44	50		
9	0	50	50		
VSM		40	60		
2.	Relative likelihood of staff being appointed from shortlisting across all posts.		Non-disabled staff are 1.27 times more likely to be appointed than disabled staff.		
3.	Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation.		The likelihood of disabled staff entering a formal disciplinary process is 0.4 compared to non-disabled. Disabled staff are therefore less likely to enter the formal disciplinary process than staff without a disability.		
4.	Relative likelihood of staff entering the formal capability process, as measured by entry into a formal process. This indicator will be based on data from a two year rolling average of the current year and the previous year.		Disabled staff are 1.7 times more likely to enter formal capability than non-disabled staff.		
5.	Relative likelihood of staff accessing non-mandatory training and CPD. (Based on responses to Q4 staff FFT).		Non-disabled staff are 1.06 times more likely to access non-mandatory training and CPD than disabled staff.		
	National NHS Staff Survey indicators (or equivalent). For each of the four staff survey indicators, <u>compare the outcomes of the responses for disability/non disability.</u>				
6.	Percentage of staff experiencing harassment, bullying or abuse	Disabled		32%	

	from patients, relatives or the public in last 12 months.	Not disabled		25%
7.	Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months.	Disabled		20%
		Not disabled		14%
8.	Percentage of staff experiencing harassment, bullying or abuse from managers in the last 12 months	Disabled		15%
		Not disabled		8%
9.	Percentage reporting or had a colleague report their last experience of harassment, bullying or abuse	Disabled		61%
		Not disabled		57%
10.	Percentage believing that Trust provides equal opportunities for career progression of promotion	Disabled		87%
		Not disabled		92%
11.	% attending work in the last 3 months despite feeling unwell because they felt pressure e) Have you felt pressure from your manager to come to work?	Disabled		68%
		Not disabled		45%
		Disabled		22.5%
		Not disabled		17%
12	How satisfied are you with each of the following aspects of your job: f) the extent to which my organisation values my work	Disabled		46%
		Not disabled		57%
13	In the last 12 months have you personally experienced discrimination at work from any of the following? b) Manager/team leader or other colleagues.	Disabled		10.6%
		Not disabled		3.4%
14	KF17. % feeling unwell due to work related stress in the last 12 months	Disabled		54%
		Not disabled		33%
15	(Reasonable adjustment): Has your employer made adequate adjustments to enable you to carry out your work?		Disabled: 89%	
16.	Overall staff engagement	Disabled		6.9
		Not disabled		7.4
	Board representation indicator: <u>For this indicator, compare the difference for disability/non disability.</u>			
17.	Percentage difference between the organisation's Board voting, non-voting and NED membership and its overall workforce.		The difference between the trust board, voting, non-voting and NED membership is -5% in all categories.	

DISABILITY BREAKDOWN FOR TRUST STAFF

Including not declared

Not disabled	Disabled	Not Declared	Grand Total
4488	350	1841	6679
67%	5%	28%	100%

Excluding not declared

Not disabled	Disabled	Grand Total
4488	350	4838
93%%	7%	100%

When compared to staff without a disability those who identify as disabled:

- Experience a higher level of harassment, bullying and abuse from patients, relatives or the public, from staff and from managers than those without a disability.
- They have experienced more discrimination from managers/team leader or other colleagues Whilst the percentage reporting this has decreased from last year for both disabled and non- disabled staff the difference between the percentages reporting discrimination from manager/ team leader or other colleagues has remained the same at 7%
- Non-disabled staff are 1.27 times more likely to be appointed from shortlisting compared to those with a disability. This is an improvement from last year's result which was 1.8
- Are less likely to enter the disciplinary process than those without a disability
- Are more likely to enter formal capability than those without a disability
- Are less likely to access non- mandatory training and CPD than those without a disability.
- Are significantly more likely to have felt unwell due to work related stress in the last 12 months
- Are significantly more likely to have attended work in the last three months despite feeling unwell
- Are less satisfied with the the extent to which the organisation values their work
- Are less convinced that the Trust provides equal opportunities for career progression or promotion.
- 10% more staff reported that reasonable adjustments had been made in 2019 when compared to 2018.

4. SEX

Indicator.	Data for reporting year			
For each of these four workforce indicators, compare the data for sex.				
1	Percentage of staff in each of the AfC Bands 1-9 and VSM (including executive Board members) compared with the percentage of staff in the overall workforce. Organisations should undertake this calculation separately for non-clinical and for clinical staff.	Clinical Staff %		
		Band	Male	Female
		1-4	26	74
		5-7	19	81
		8ab	24	76
		8cd	30	70
		9	0	100
		VSM	0	0
		Medics	47	53
		Non-clinical staff %		
		Band	Male	Female
		1-4	13	87
		5-7	36	64
		8ab	24	76
8cd	44	56		
9	0	0		
VSM	60	40		
2.	Relative likelihood of staff being appointed from shortlisting across all posts.	Males are 1.01times more likely to be appointed than females once shortlisted.		
3.	Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation.	Men are 2.5 times more likely to enter the formal disciplinary process.		
4.	Relative likelihood of staff accessing non-mandatory training and CPD. (Based on responses to Q4 staff FFT).	There is no difference in the relative of male and female staff accessing CPD.		
National NHS Staff Survey indicators (or equivalent). For each of the four staff survey indicators, <u>compare the outcomes of the responses for male/female.</u>				
5.	KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.	Male	30%	
		Female	26%	
6.	KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months.	Male	12%	
		Female	16%	
7.	KF 21. Percentage believing that Trust provides equal opportunities for career progression or promoting.	Male	86%	
		Female	92%	
8.	Q17. In the last 12 months have you personally experienced discrimination at work from any of the following? b) Manager/team leader or other colleagues.	Male	5%	
		Female	5%	
9.	KF17. % feeling unwell due to work related stress in the last 12 months.	Male	36%	
		Female	40%	
10.	KF18. % attending work in the last 3 months	Male	48%	

	despite feeling unwell because they felt pressure	Female	52%		
11.	Overall staff engagement	Male	7.3		
		Female	7.1		
	Board representation indicator: <u>For this indicator, compare the difference for male/female.</u>				
12.	Percentage difference between the organisation's Board voting, non- voting and NED membership and its overall workforce.	Sex	Voting	Non-Voting	NEDs
		Female	-45%	-28%	-61%
		Male	+45%	+28%	+61%

SEX BREAKDOWN FOR TRUST STAFF

Female	Male	Grand Total
5236	1443	6679
78%	22%	100%

The data on age is complete.

- Men are overrepresented in VSM posts when compared to the overall staff makeup.
- Men are 2.5 times more likely to enter the disciplinary process than women. This is an increase of 0.2 from last year's figure of 2.3
- Men are less convinced that the trust offers equal opportunities for career progression or promotion.

5. RACE/ETHNICITY:

Indicator.		Data for reporting year			
		For each of these four workforce indicators, compare the data for White and BME staff.			
1	Percentage of staff in each of the AfC Bands 1-9 and VSM (including executive Board members)	Clinical Staff %			
		Band	White	BAME	Not Declared
		1-4	97%	2%	1%
		5-7	96%	3.4%	0.6%
		8ab	96.8%	2.9%	0.3%
		8cd	99%	1%	0%
		9	100%	0%	0%
		VSM	0%	0%	0%
		Medics	57.7%	40.8%	1.5%
		Non-clinical staff %			
		Band	White	BAME	Not Declared
		1-4	98%	1%	1%
		5-7	96%	2%	2%
		8ab	97%	3%	0%
8cd	100%	0%	0%		
9	0%	0%	0%		
VSM	100%	0%	0%		
2.	Relative likelihood of staff being appointed from shortlisting across all posts.		White staff are 1.47 times more likely to be appointed from shortlisting compared to BAME staff.		
3.	Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation.		BAME staff are 2.0 times more likely to enter the formal disciplinary process.		
4.	Relative likelihood of staff accessing non-mandatory training and CPD. (Based on responses in Q4 FFT)		The relative likelihood of White staff accessing non-mandatory and CPD training is 0.95.		
	National NHS Staff Survey indicators (or equivalent). For each of the four staff survey indicators, <u>compare the outcomes of the responses for White and BME staff.</u>				
5.	KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.	White		27%	
		BAME		32%	
6.	KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months.	White		20%	
		BAME		24%	
7.	KF 21. Percentage believing that Trust provides equal opportunities for career progression or promoting.	White		91%	
		BAME		81%	
8.	Q17. In the last 12 months have you personally experienced	White		5%	

	discrimination at work from any of the following? b) Manager/team leader or other colleagues.	BAME			7%	
9.	KF17. % feeling unwell due to work related stress in the last 12 months.	White			39%	
		BAME			30%	
10.	KF18. % attending work in the last 3 months despite feeling unwell because they felt pressure	White			52%	
		BAME			43%	
11.	Overall staff engagement	White			7.2	
		BAME			7.7	
	Board representation indicator: <u>For this indicator, compare the difference for White and BME staff.</u>					
12.	Percentage difference between the organisation's Board voting, non-voting and NED membership and its overall workforce.	Ethnicity	Voting		Non-Voting	NEDs
		BAME	+4%		-4%	-4%
		White	-4%		+4%	+4%

RACE/ETHNICITY BREAKDOWN FOR TRUST STAFF

White (including Medics)	6358	95.2%
BAME (including Medics)	281	4.2%
Not Declared	42	0.6%
Total	6681	100%
White (excluding Medics)	6207	96.7%
BAME (excluding Medics)	174	2.7%
Not Declared	38	0.6
Total	6419	100%

- BAME staff are 1.47 times less likely to be appointed from shortlisting, which has decreased from 1.6 in 2018.
- BAME staff are underrepresented in bands 8a and above in non-clinical and clinical posts.
- BAME staff are overrepresented in the medical workforce.
- BAME staff are 2.0 times more likely to enter the disciplinary process than white staff, this has reduced since 2018 when BAME staff were 2.59 times more likely to enter the disciplinary process than white staff
- More BAME staff than white staff have experienced harassment, bullying or abuse from patients, relatives or the public and staff in the last 12 months. However the figures for BAME staff experiencing harassment, bullying or abuse from staff have decreased by 5 % from 29% to 24% and the difference between the results for white staff and BAME staff for this indicator has decreased from 10% to 4%.
- More BAME staff experience discrimination from manager/ team leader/ or other colleagues, however this figures has dropped from 18% last year to 7% this year and the difference between BAME staff and white staff for this indicator has decreased from 12% to 2%.
- More White staff have felt unwell due to work related stress in the last 12 months than BAME staff.

- More White staff have attended work in the last 3 months despite feeling unwell than BAME staff.
- Apart from Medical staff there are low numbers of BAME staff employed by the trust.
- BAME staff have higher levels of staff engagement than white staff

6. SEXUAL ORIENTATION:

Indicator.		Data for reporting year			
		For each of these four workforce indicators, compare the data for Heterosexual/Lesbian/gay/bisexual.			
1	Percentage of staff in each of the AfC Bands 1-9 and VSM (including executive Board members).	Clinical staff %			
		Band	Heterosexual	LGB	Not Declared
		1-4	82	3	15
		5-7	84	3	13
		8 ab	82	3	15
		8cd	84	1	14
		9	50	0	50
		VSM	0	0	0
		Medics	55	1	44
		Non-clinical staff %			
		Band	Heterosexual	LGB	
		1-4	83	1	16
		5-7	87	3	10
		8ab	91	2	7
8cd	75	0	25		
9	0	0	0		
VSM	50	4	46		
2.	Relative likelihood of staff being appointed from shortlisting across all posts.		Heterosexual staff are 1.05 times more likely to be appointed from shortlisted posts than LGB staff.		
3.	Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation.		LGB staff are 2.5 times more likely to enter the formal disciplinary process than heterosexual staff.		
4.	Relative likelihood of staff accessing non-mandatory training and CPD. (Based on responses to Q4 staff FFT).		Heterosexual staff and LGB staff are equally likely to access non-mandatory training and CPD.		
	National NHS Staff Survey indicators (or equivalent). For each of the four staff survey indicators, <u>compare the outcomes of the responses for each of heterosexual/lesbian/gay/bisexual.</u>				
5.	KF 25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.	Heterosexual			26%
		Bisexual			40%
		Gay Man			36%
		Gay Woman (Lesbian)			26%
		Other			17%
6.	KF 26. Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months.	Heterosexual			15%
		Bisexual			17%
		Gay Man			18%

		Gay Woman (Lesbian)	16%
		Other	27%
7.	KF 21. Percentage believing that Trust provides equal opportunities for career progression or promoting.	Heterosexual	92%
		Bisexual	80
		Gay Man	91%
		Gay Woman (Lesbian)	100%
		Other	No result available
8.	Q17. In the last 12 months have you personally experienced discrimination at work from any of the following? b) Manager/team leader or other colleagues.	Heterosexual	5%
		Bisexual	17%
		Gay Man	4%
		Gay Woman (Lesbian)	0%
		Other	7%
9.	KF17. % feeling unwell due to work related stress in the last 12 months.	Heterosexual	38%
		Bisexual	67%
		Gay Man	43%
		Gay Woman (Lesbian)	28%
		Other	33%
10.	KF18. % attending work in the last 3 months despite feeling unwell because they felt pressure	Heterosexual	51%
		Bisexual	67%
		Gay Man	57%
		Gay Woman (Lesbian)	53%
		Other	42%
11.	Staff Engagement	Heterosexual	7.3
		Bisexual	7
		Gay Man	7.3
		Gay Woman (Lesbian)	7.7
		(Lesbian) Other	6.3
	Board representation indicator: <u>For this indicator, compare the difference for heterosexual/lesbian/gay/bisexual.</u>		
12.	Percentage difference between the organisations' Board voting, non- voting and NED membership and its overall workforce.		Percentage difference between the organisations' Board voting, non- voting and NED membership and its overall workforce is -3%

SEXUAL ORIENTATION BREAKDOWN FOR TRUST STAFF

Including not declared

Heterosexual	LGB	Not Declared	Grand Total
5508	168	1003	6679
82%	3%	15%	100%

Excluding not declared

Heterosexual	LGB	Grand Total
5508	168	5676
97%%	3%	100%

When compared to heterosexual staff, LGB staff are

- 2.5 times more likely to enter the disciplinary process, this is the same figure as last year. However it should be noted that 7 of the total number of people in the disciplinary process identified as LGB and for 15% of staff data on sexual orientation is not available so caution must be applied to this data.
- More likely to feel unwell due to work related stress in the last 12 months.
- Staff who identify as bisexual report less satisfactory experiences of working in the trust than those identifying as lesbian, gay or heterosexual.

7. CONCLUSIONS

- 7.1 There are clear differences in some of the metrics for staff from protected groups.
- 7.2 Actions to address issues for BAME staff will be identified in the WRES associated action plan which will go to Board for endorsement at the July 2019 meeting.
- 7.3 Actions to address issues for disabled staff will be identified in the WDES associated action plan which will go to Board for endorsement at the July 2019 Board meeting.
- 7.4 Amongst the benefits of addressing these are:
- Organisations that treat their staff fairly, that listen to them and develop their talent to the full, are more likely to provide better care for all patients.
 - Developing a more inclusive workplace can help improve staff engagement, service quality and productivity,

8. RECOMMENDATIONS

- 8.1 It is proposed that the information contained in this report is published on the Trust's website as evidence that the Trust is meeting its public sector equality duties.
- 8.2 The Board is asked to note the differences in experience and outcome for staff from protected groups and to receive the action plans referenced in paragraphs 7.2 and 7.3 at the July 2019 Board meeting.