

Public Sector Duty

Workforce Equality Monitoring Report

2021/2022



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1. EXECUTIVE SUMMARY

At Southport & Ormskirk Hospitals NHS Trust (SOHT) we recognise that equality of opportunity is fundamental to develop the organisational culture needed to support a diverse and inclusive workforce. We are a learning Trust and committed to continually learning about our own staff and helping to develop and nurture their talents as individuals.

This report gives an overview of our workforce demographics by protected characteristics for the year ending 2021/2022. It provides a detailed snapshot of who we are, according to grouped characteristics that are known to be more likely to collectively experience systemic barriers to opportunity, development, and reward. By analysing this data across SOHT, we gain insight into how and where barriers may present for our colleagues, and a picture of where and when strategic interventions may have the most impact.

Data can, of course, only tell a small part of our peoples' stories. No individual can or should be reduced to a line on a chart; our lived experiences can intersect multiple categories. We are committed to ensuring that all staff can make their identity and perspectives heard at all levels across the organisation.

This document supports the Trust's Annual Report (also available on the Trust's website) by providing detailed and transparent high-level employee demographic data for the financial year 2021/2022. This also answers the Trust's specific duty under the Equality Act 2010, to publish employee equality information.

Detailed data follows which includes an organisation-wide breakdown of our workforce by protected characteristic including new starters, staff in post and leavers. Further and more detailed metrics relating to ethnicity and disability are available in our Workforce Race and Disability Equality Standard Reports, also available on the Trust website.

2. OVERVIEW

2.1 Policy and Legal Context

Southport & Ormskirk Hospitals NHS Trust recognises our obligations fulfil our statutory duties in relation to equality, diversity, and inclusion, such as the Equality Act 2010 and its associated Public Sector Equality Duty. To help organisations access and improve their performance in service design and delivery, under the Equality Act 2010 and the Public Sector General Equality Duty, organisations must publish sufficient information to demonstrate that, in the exercise of its functions, it has a due regard to:

- Eliminate discrimination, harassment, and victimisation.
- Advance equality of opportunity between people who share a protected characteristic and those who do not; and to
- Foster good relations between people who share a relevant protected characteristic and those who do not.

To achieve the aims of the general equality duty described above, the Trust must publish, on an annual basis, an equality profile of its workforce and service users to ensure a full understanding of its staff members and local populations, including where those groups have been engaged with where relevant.

Understanding and identifying the communities that the Trust serves will ensure that the potential impact of policy or practice can be considered, and any potential imbalance or inequalities addressed. This document forms the Workforce element of this duty and should be read in conjunction with the accompanying Patient Experience profile published on the Equality and Diversity section of the Trust website.

2.2 Monitoring Data

The Trust routinely collects equality monitoring data from staff members and uses this information to ensure that its employment processes, procedures, and opportunities are applied and functioning in a manner that are fair and accessible to all. This can include routine evaluation and assessment through scheduled or mandated standard reports (such as the NHS Workforce Race and Disability Equality Standards which are reported annually through a national portal), routine policy and procedure reviews, or ad hoc interventions and evaluations in response to staff feedback or employment relation cases. All data is held and processed in accordance with the Data Protection Act 2018 as amended by the GDPR 2016.

Please note that for the purpose of this report we are unable to provide precise figures (i.e., broken down by bands or age) when these are five or less (or two WTE or less) due to the risk that individuals will be identified, as we are required to protect their identity under the Data Protection Act. In such circumstances these figures will be omitted.

2.3 Our Population

Southport and Ormskirk Hospitals NHS Trust provides healthcare to a population of 258,000 people across Southport, Formby and West Lancashire.

After a review of the 2011 census for the local demographics of Sefton and West Lancashire the following information is available that covers ethnicity and commonly used languages.

2.4 Sefton: Ethnicity Population Summary: Census 2011

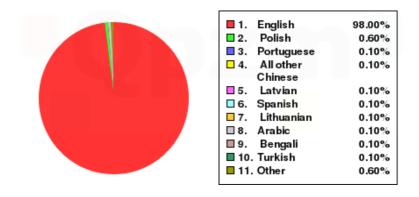
Ethnicity	% Percentage of the population in Sefton	
White	97.40%	
Mixed	1.1%	
Asian	0.5%	

Ethnicity	% Percentage of the population in Sefton	
Black	0.3%	
Other	0.7%	
Total	100%	

Source: ONS, 2011 Census: Note: BAME includes all other ethnicities besides White. Within Sefton, 97.4% of the population has a White ethnic background and 2.6% of the Sefton population has a Black, Minority Ethnic background (BAME).

2.5 Sefton's most used languages

98.0% of people living in Sefton speak English. The other top languages spoken are 0.6% Polish, 0.1% Portuguese, 0.1% All other Chinese, 0.1% Latvian, 0.1% Spanish, 0.1% Lithuanian, 0.1% Arabic, 0.1% Bengali, 0.1% Turkish.



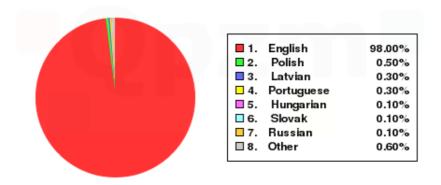
2.6 West Lancashire: Ethnicity Population Summary: Census 2011

Ethnicity	% Percentage of the Population in West Lancashire		
White	98.10%		
Mixed	0.7%		
Asian	0.9%		
Black	0.1%		
Other	0.2%		
Totals	100%		

Source: ONS, 2011 Census: Note: BAME includes all other ethnicities besides White. Within West Lancashire, 98.1% of the population has a White ethnic background and 1.9% of the West Lancashire population has a Black, Minority Ethnic background (BAME).

2.7 West Lancashire's most used languages

98.0% of people living in West Lancashire speak English. The other top languages spoken are 0.5% Polish, 0.3% Latvian, 0.3% Portuguese, 0.1% Hungarian, 0.1% Slovak, and 0.1% Russian



2.8 Equality Delivery System (EDS2)

The Equality Delivery System (EDS2) was designed to support NHS commissioners and providers to deliver improved outcomes for patients and communities and better working environments for staff, which are personal, fair and diverse. The EDS prioritises making positive impacts on healthy living and working lives. EDS2 is explicitly intended for NHS organisations to review their equality performance and to identify future priorities and actions *in partnership* with patients, the public, staff and staff-side organisations. It incorporates local and national reporting and accountability mechanisms to ensure that all Trusts develop and maintain a consistent level of priority and focus on equality outcomes.

In 2022/2023, SOHT will undertake an assessment in line with the revised EDS2022 standards, a set of 11 outcomes grouped into three domains. These outcomes focus on the issues of most concern to patients, carers, communities, NHS staff and Boards. It is against these outcomes that performance is analysed, graded and action determined.

2.9 Workforce Race Equality Standard (WRES)

In April 2015, NHS England introduced the Workforce Race Equality Standard (WRES). The standard consists of 9 indicators and requires NHS organisations to close the gap between the BME and white staff experience for those indicators. The WRES directly supports the Equality Delivery System (EDS2) goals 3 and 4: representative workforce and inclusive leadership including the Board. The Trust has developed an action plan to take steps to close the differences between the treatment and experience of White and BME staff.

Links to the WRES report and plans are available on our website.

2.10 Workforce Disability Equality Standard (WDES)

In April 2019, NHS England introduced the Workforce Disability Equality Standard (WDES). The standard consists of 10 Metrics that incorporate data from three primary sources; the Electronic Staff Record (ESR), NHS Staff Survey, and local HR and recruitment systems. The WDES was

introduced to make a positive impact for the benefit of disabled people, either currently working in, or aspiring to work in, the NHS. It is rooted in the Social Model of Disability which proposes that people are disabled because of societal barriers, rather than a long-term health condition. The Trust has reported on the WDES and developed an action plan to take steps to address barriers for disabled people.

Links to the WDES report and plans are available on our website.

2.11 Gender Pay Gap

The gender pay gap is the difference in the average hourly wage of all men and women across a workforce. If women do more of the less well-paidjobs within an organisation than men, the gender pay gap is usually bigger. The gender pay gap is not the same as unequal pay which is paying men and women differently for performing the same (or similar) work. Unequal pay has been unlawful since 1970.

As an NHS Trust, we are legally required to publish gender pay gap data on the Trust website and on the Government website. This requirement is governed by our duties under the Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017 as a public sector employer with more than 250 employees.

The Trust's report can be found in the Equality, Diversity, and Inclusion section on our website

2.12 Equality Governance

The Equality Act 2010 and the Human Rights Act 1998 provide the legal framework within which the Trust operates its equality governance. Additionally, the Health & Social Care Act 2008, NHS England, the Operating Framework, and the NHS Constitution all highlight the need to reduce discrimination in services, improve accessibility and reduce health inequalities for all.

The refreshed Equality Delivery System (EDS2022) is the framework by which the Trust can demonstrate how it is performing on issues of equality and health inequality to its patients, staff, communities and commissioners. At Board level, the lead accountability sits with the Director of Human Resources supported by the Director of Finance who leads on the Trust's Special Interest Group.

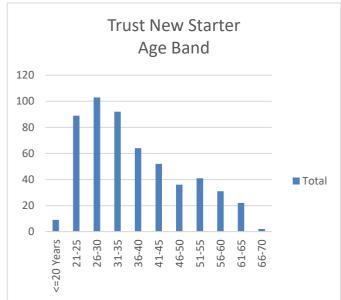
The Trust's Valuing Our People Inclusion Group ensures that the Trust complies with externally set standards and establishes, monitors and reviews content and methods of assurance to the Workforce Committee in relation to all areas of Equality and Diversity.

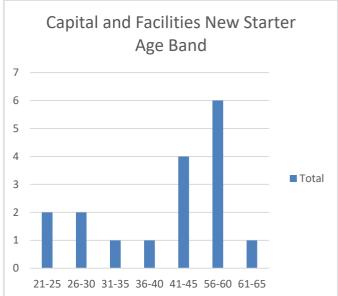
3. OUR WORKFORCE - NEW STARTERS

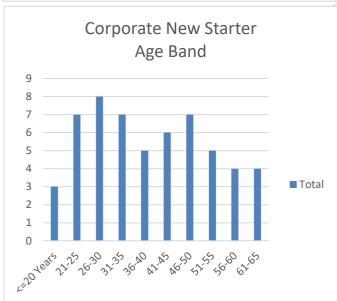
The figures presented here show the number of new starters with SOHT during the financial year 2021/22. The figures are categorised according to the organisation as a whole and Business Units within the Trust.

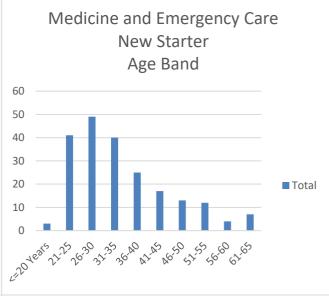
Figures for some groups relate to low numbers of staff and so in some instances detailed analysis will not be statistically relevant or data has been withheld to maintain anonymity.

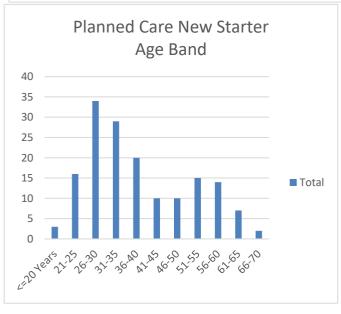
3.1 Age



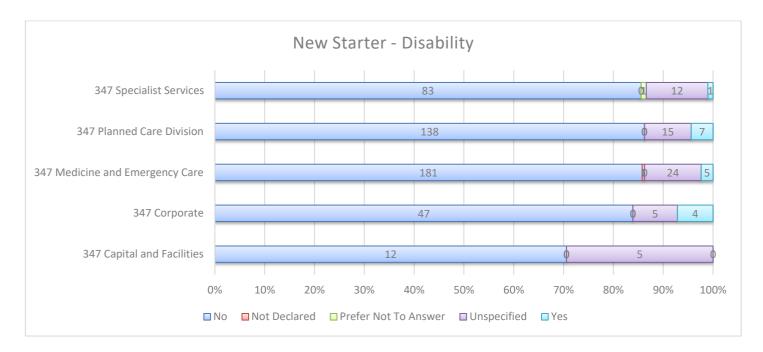






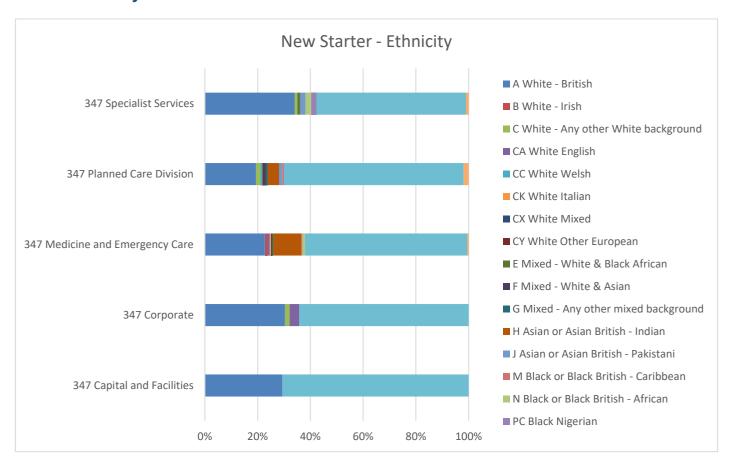


3.2 Disability



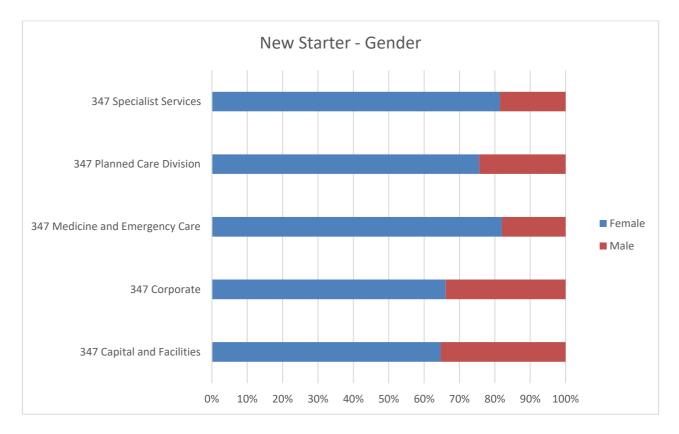
Overall, 3.15% of new starters considered themselves to have a disability, 85.37% did not and 11.30% were unspecified.

3.3 Ethnicity



Overall, 27.10% of new starters described their ethnic origin as "White" whilst 7.66% described themselves as belonging to black, minority or other ethnic groups. 63.93% were unspecified or did not declare.

3.4 Gender



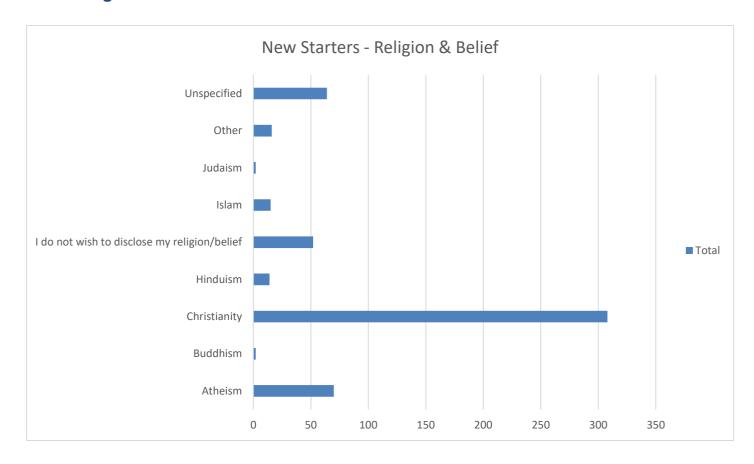
Overall, 77.82% of new starters were female whilst 22.18% were male.

3.5 Marital Status



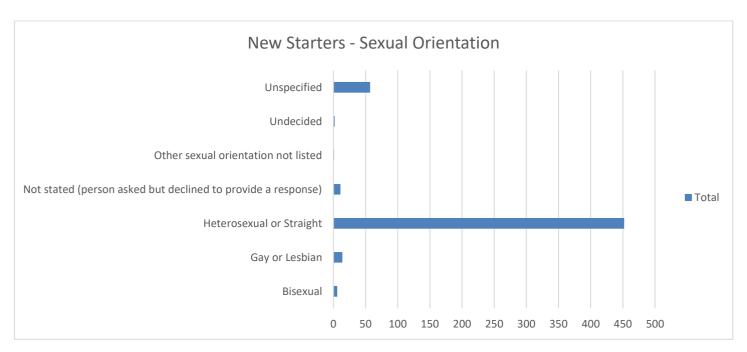
Overall, 44.36% of new starters described themselves as either married or in a civil partnership.

3.6 Religion and/or other belief



The most common religion / belief overall was Christianity which accounted for 56.72% of all new starters. The next largest group was Atheism at 12.89%. 2.95% described their religion / belief as 'Other'.

3.7 Sexual Orientation



Overall, 14.01% of new starters described themselves as Lesbian, Gay or Bisexual. 10.50% did not wish to disclose this information.

4. OUR WORKFORCE - STAFF IN POST

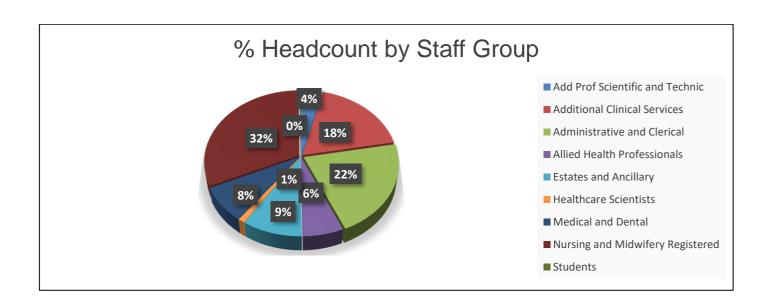
The figures presented here show the staff in post at Southport & Ormskirk Hospitals NHS Trust (SOHT) as of March 2022. There were 3348 in substantive posts according to the Electronic Staff Record which provides our assurance system for this report.

4.1 Staff Groups

The largest group of staff is Nursing & Midwifery Registered which accounts for 31.63% of all employees.

Administrative and Clerical is the next largest group and accounts for 21.42% of the workforce. 18.22% of the workforce belongs to Additional Clinical Services - these are the Healthcare Support Workers and other Support Staff on 'Agenda for Change' pay bands 1-4.

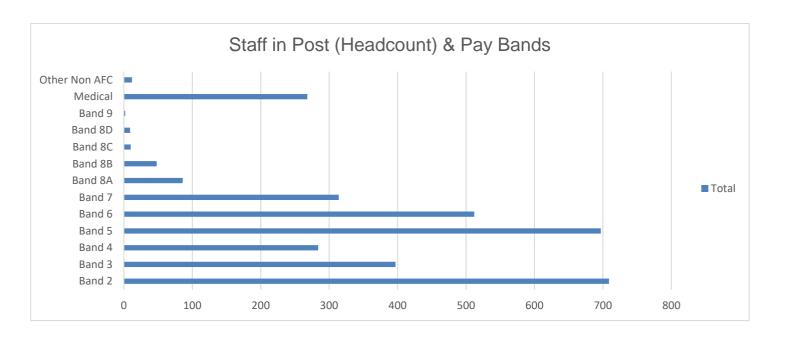
Staff Groups	Headcount	FTE	%
Add Prof Scientific and			
Technic	128	112.13	3.82%
Additional Clinical Services	610	533.50	18.22%
Administrative and Clerical	717	605.43	21.42%
Allied Health Professionals	212	184.45	6.33%
Estates and Ancillary	314	246.21	9.38%
Healthcare Scientists	33	28.38	0.99%
Medical and Dental	268	259.61	8.00%
Nursing and Midwifery			
Registered	1059	925.79	31.63%
Students	7	6.96	0.21%
Grand Total	3348	2902.46	100.00%



4.2 Pay Bands

Southport & Ormskirk Hospitals NHS Trust (SOHT) employs their staff in line with the nationally agreed 'Agenda for Change' and Medical and Dental pay banding systems. The largest cohort of staff are Band 5's which account for 21.37% of the workforce.

	Count of Employee		
Row Labels	Number	Sum of FTE	%
Band 2	709	564.17	19.44%
Band 3	397	328.02	11.30%
Band 4	284	257.78	8.88%
Band 5	697	620.31	21.37%
Band 6	512	440.00	15.16%
Band 7	314	278.64	9.60%
Band 8A	86	78.81	2.72%
Band 8B	48	46.69	1.61%
Band 8C	10	9.84	0.34%
Band 8D	9	8.60	0.30%
Band 9	2	2.00	0.07%
Medical	268	259.61	8.94%
Other Non-AfC	12	8.00	0.28%
Grand Total	3348	2902.46	100.00%



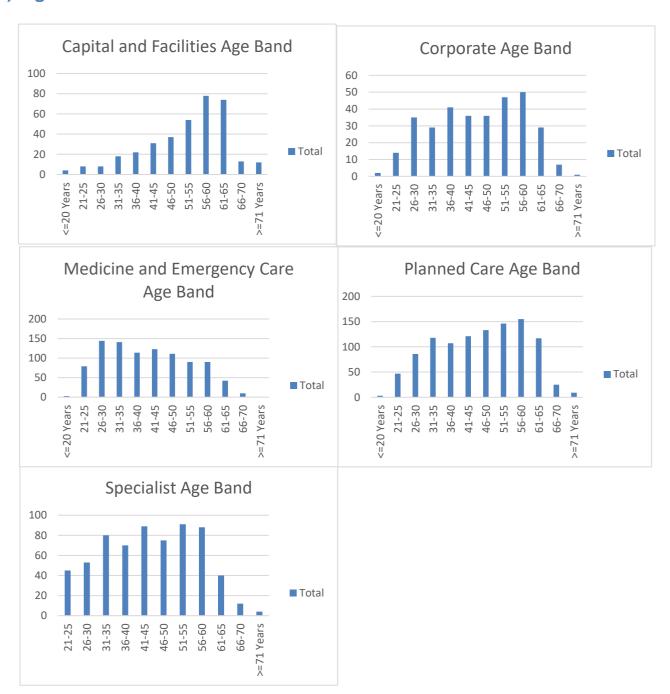
In total, 9.22% of the workforce are on Non 'Agenda for Change' pay bands. These consist of Medical Staff and other Ad Hoc pay grades.

4.3 Working Patterns

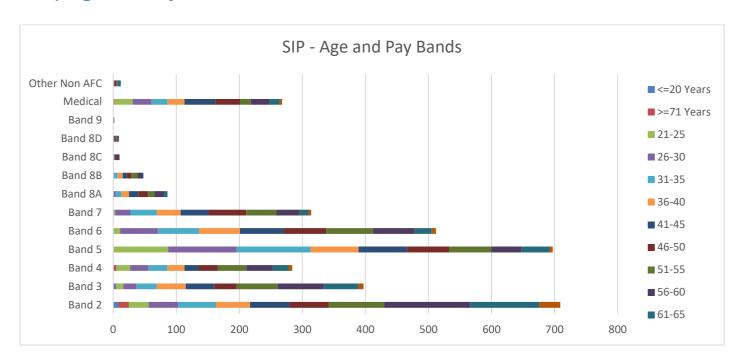
			Headcount	
Working Pattern	Headcount	Sum of FTE	%	FTE %
Full Time	1893	1893.00	56.54%	65.22%
Part Time	1455	1009.46	43.46%	34.78%
Grand Total	3348	2902.46	100.00%	100.00%

4.4. Age

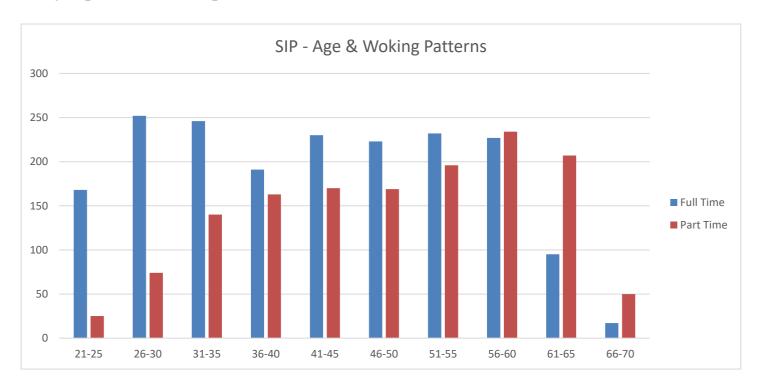
a) Age: Business Units



b) Age and Pay Bands

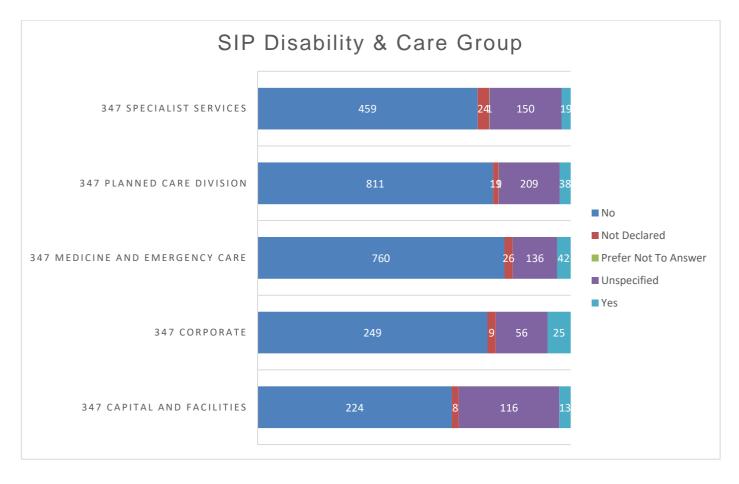


c) Age and Working Patterns



4.5 Disability

a) Disability: Business Units

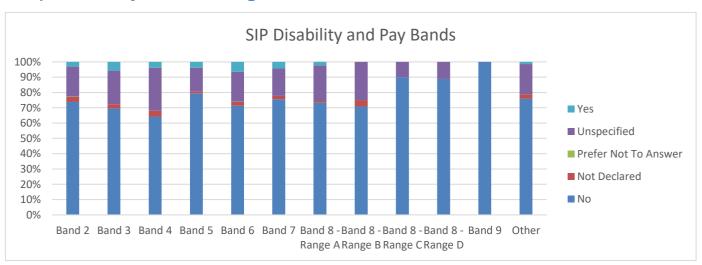


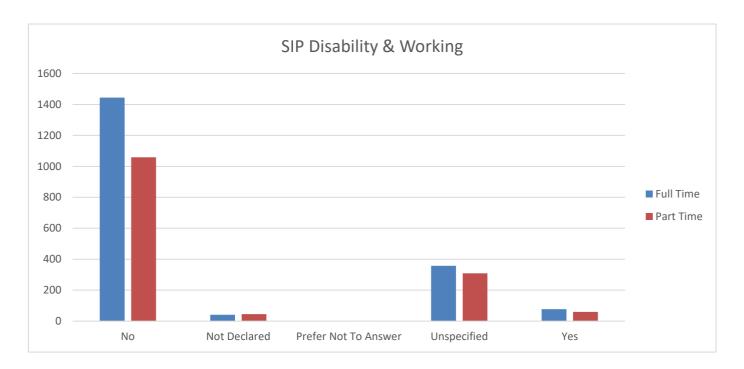
Overall, 4.04% of the workforce considers themselves to have a disability. However, 2.53% of the workforce has not declared.

b) Disability and Pay Bands

The highest rate of staff declaring a disability is Band 6 with 6.44%. The overall 'Unspecified' totals 19.65%

c) Disability and Working Patterns

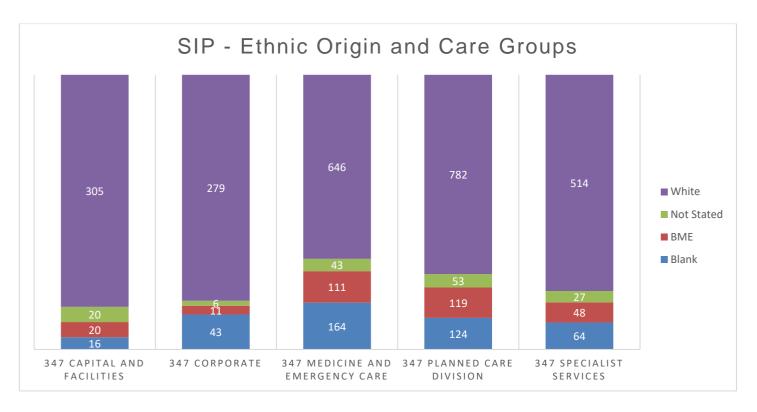




Overall, 137 members of staff consider themselves to have a disability. Of those, 77 worked full time whilst 60 worked part time.

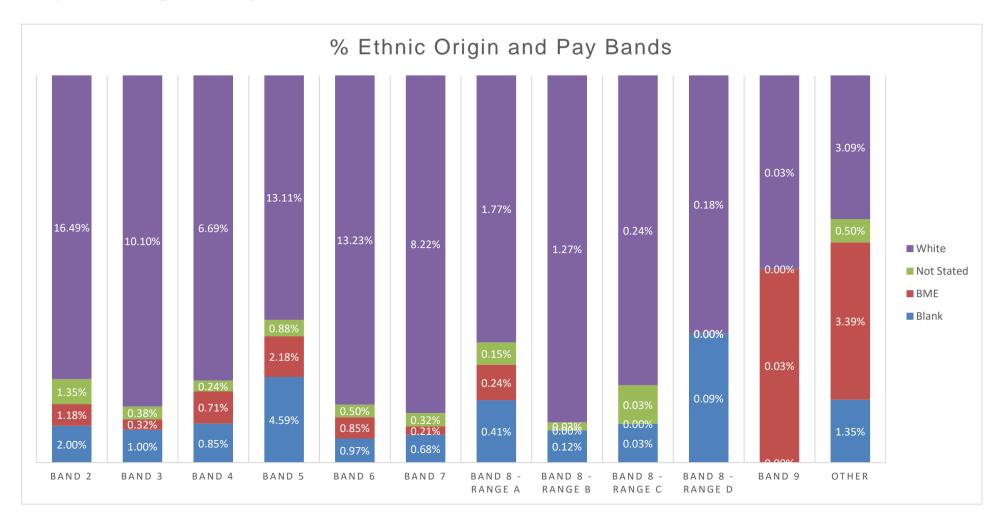
4.5 Ethnic Origin

a) Ethnic Origin: Business Units



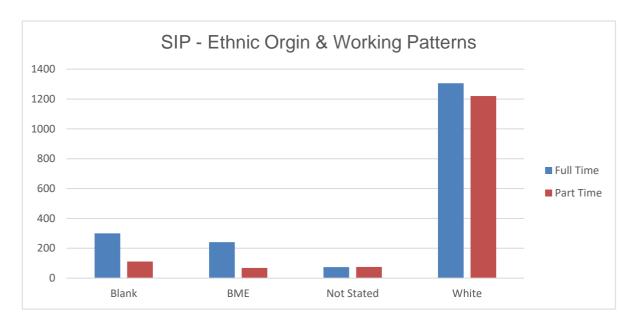
Overall, 77.40% of the workforce describe their ethnic origin as "White" whilst 9.10% describe themselves as belonging to a Black, Minority or Other Ethnic group. 4.39% prefers not to state their ethnic origin.

b) Ethnic Origin and Pay Bands



Black and Minority Ethnic staff members account for 2.18% of staff on Band 5 Grade, and 4.39% at 'Not Stated'.

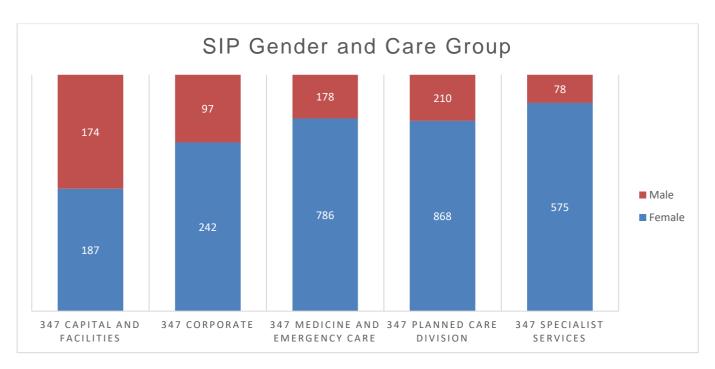
c) Ethnic Origin and Working Patterns



White staff are significantly more likely to work part time than their Black and Minority Ethnic (BAME) counterparts.

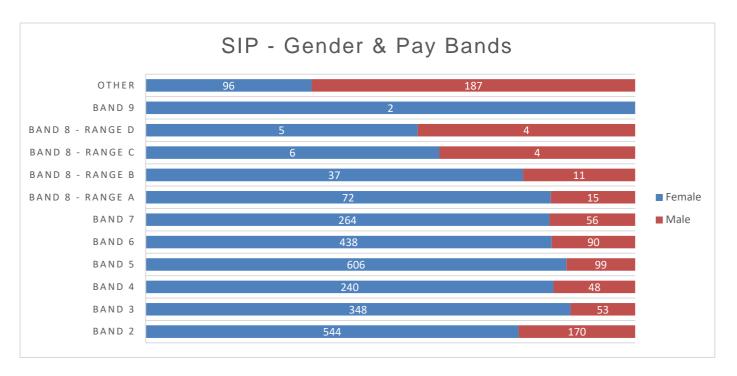
4.6 Gender

a) Gender: Business Units



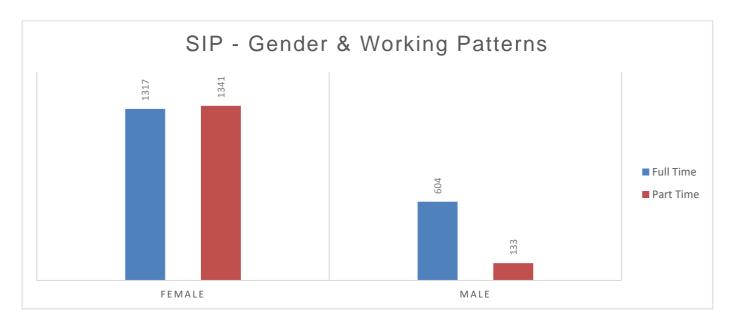
Overall, 78.29% of the workforce is female. Capital and Facilities Services have the closest ratio of male / female staff with 51.80% female and 48.20% male.

b) Gender and Pay Bands



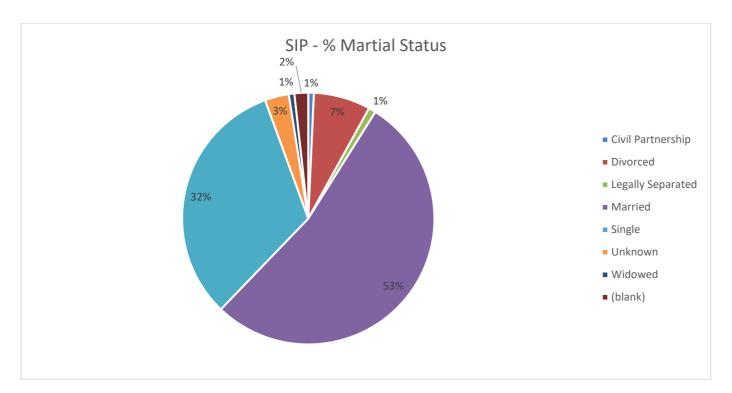
Men account for 2.92% of staff on Band 5 scale, whereas females account for 17.85% This is reflected in our Gender Pay Audit results, also available on our website.

c) Gender and Working Patterns



4.7 Marital Status

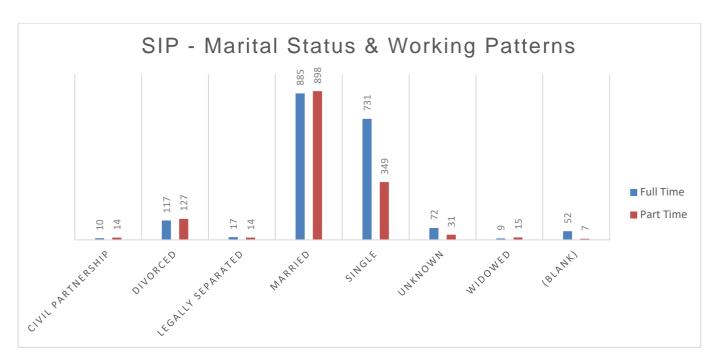
a) Marital Status: Staff in Post



b) Marital Status and Pay Bands

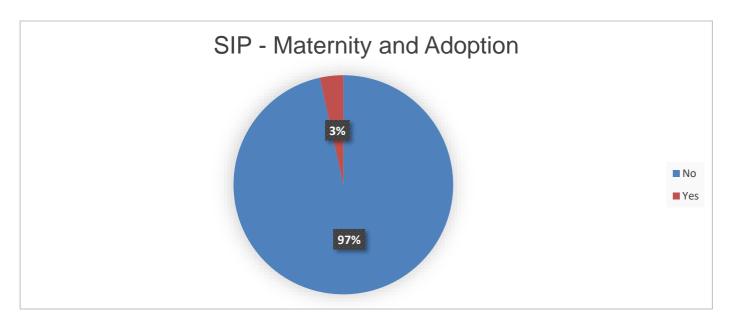
This information is unavailable publicly due to the low numbers in each category.

c) Marital Status and Working Patterns



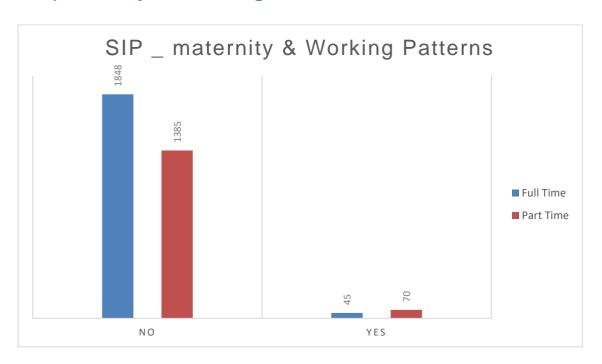
4.8 Maternity

a) Maternity: Trust



Overall, 3.43% of staff were on Maternity or Adoption Leave during 2021/2022.

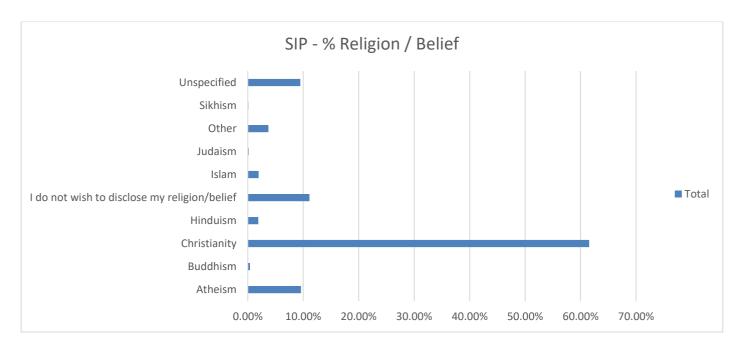
b) Maternity and Working Patterns



This graph shows the proportion of staff on Maternity or Adoption leave according to their working patterns. 1.34% of full-time staff were on maternity, compared to 2.09% of part-time staff.

4.9 Religion and/or other beliefs

a) Religion and/or other Belief: Trust

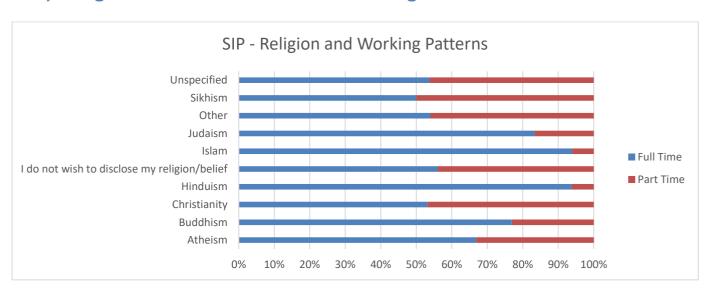


The most common religion/belief overall was Christianity which accounted for 61.56% of the workforce. The next largest single group did not wish to disclose.

b) Religion and/or other Belief by Pay Band

Due to the distribution of staff across pay bands and the relatively small numbers of staff from minority religions, we cannot publish this data. However, the most diverse Pay Band is 'Other Non-AFC' which includes Medical and Dental staff.

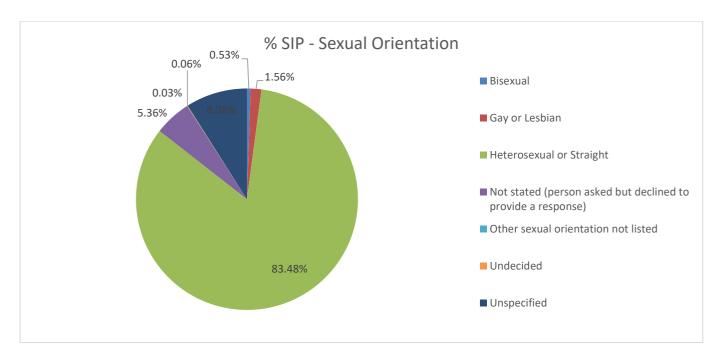
c) Religion and/or other Belief and Working Patterns



Only groups where there are >10 staff are shown.

4.10 Sexual Orientation

a) Sexual Orientation: Trust

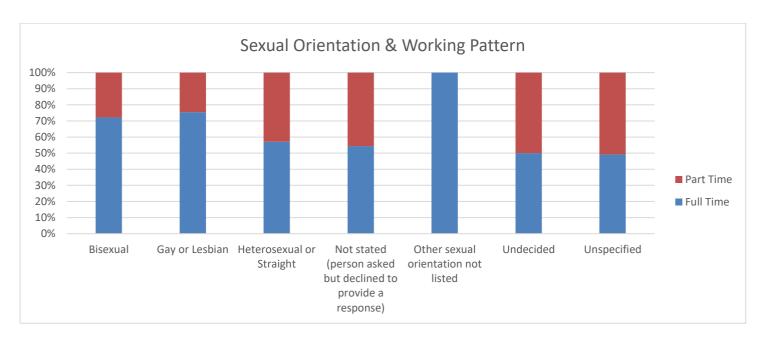


Overall, 2.09% of the workforce described their sexual orientation as Lesbian, Gay or Bisexual. 5.36% do not wish to disclose this information.

b) Sexual Orientation and Pay Bands

The highest percentage of staff who have identified as Bisexual is at Band 5 level at 0.26%, with Gay and Lesbian for Band 2 at 0.64% and Band 5 at 0.26%.

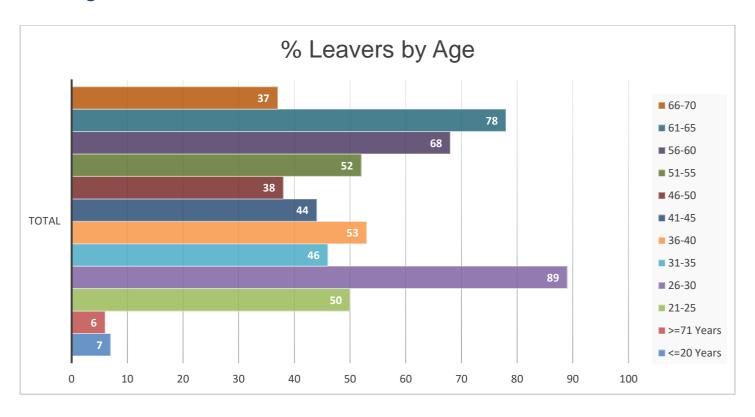
c) Sexual Orientation and Working Patterns



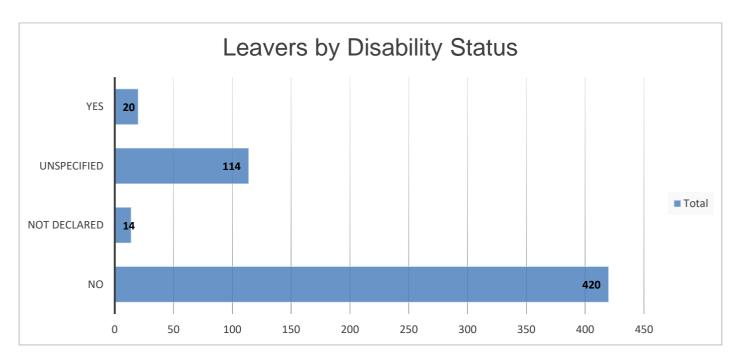
5. OUR WORKFORCE - LEAVERS

A total of 568 employees left the Trust in the reporting period 2021/22.

5.1 Age



5.2 Disability

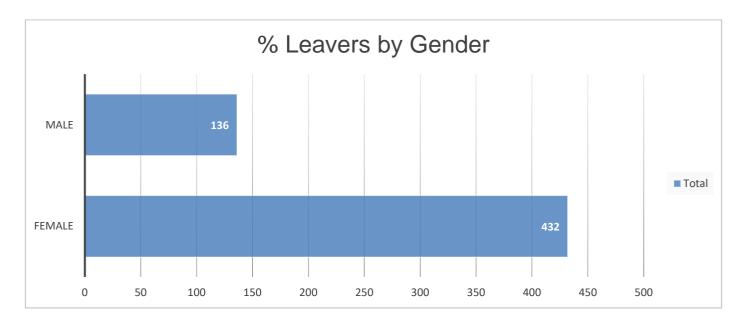


3.52% of leavers had declared that they had a disability, compared to 20.07% who were 'Unspecified'.

5.3 Ethnic Origin

Our data indicates that during this period leavers were disproportionately representative of the 'not stated' and 'Unspecified' category. With 'not stated' at 4.58% and 'unspecified' groups was 13.20%. Data was below publication threshold in most ethnic minority groups.

5.4 Gender



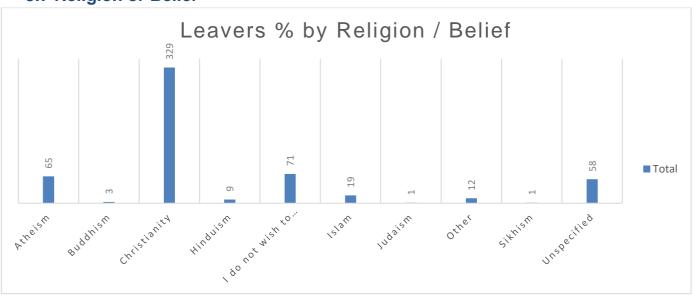
5.5. Marital Status

The data in the category is below the threshold to report.

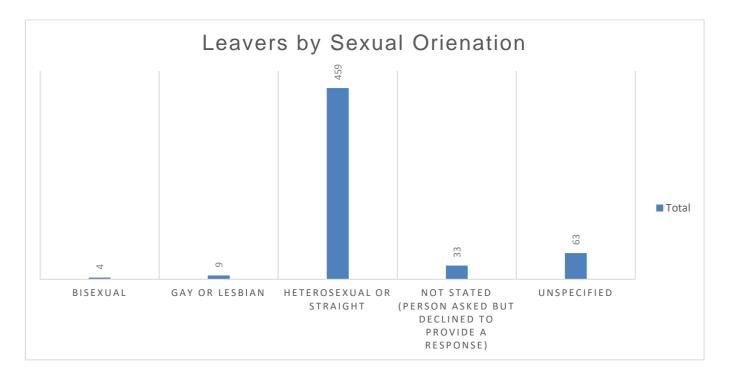
5.6 Maternity

The data in the category is below the threshold to report.

5.7 Religion or Belief



5.8 Sexual Orientation



2.29% of leavers identified as Lesbian, Gay or Bisexual, compared to 5.51% of 'Not Stated'.

6. DUE REGARD AND IMPACT ASSESSMENT

The Trust uses Equality Assessments as an evidence-based tool through which to evaluate and predict the potential impact of a given policy or service on equality. This helps to ensure that our policies and services do not discriminate against anyone, and that wherever possible, we promote equality of opportunity in line with our duties. In relation to Workforce this means that we include equality considerations whenever we review or introduce new policies or ways of working. This is included in our Policy Template, is mandatory across the Workforce Directorate, and supported by specialist advisors.

7. CONCLUSION

This report summarises SOHT's workforce data in relation to protected characteristics for 2021/22. The Trust uses this data through its structures and systems for promoting equality and diversity such as the Staff Networks, Special Interest Group, Valuing our People Inclusion Group and Workforce Committee.

Going forward we will continue to track these results from year to year, and further refine our data to suit the needs and requirements of the Trust.