

Equality and Diversity Annual Report 2019-20





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1. Introduction

As set out in the NHS Long Term Plan, respect, equality and diversity are central to changing culture and are at the heart of the NHS workforce implementation plan.

At North Tees and Hartlepool NHS Foundation Trust, we continue to work towards meeting our legal requirements as set out by the Public Sector Equality Duty (PSED). This report is compiled from information provided by different departments across the organisation and seeks to highlight the good practice, numerous initiatives and key achievements for the period 1 April 2019 to 31 March 2020.

The Trust acknowledges all protected characteristics to be of equal importance, including age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation. We are committed to challenging discrimination and promoting equality both as an employer and a provider of health care services. We aim to make sure that equality and diversity is at the centre of our work, and is embedded into our core business activities.

As a provider of health care services, we aim to meet the changing needs of diverse communities and provide access for all in an environment where individuality is respected and promoted. As an employer we will continue to focus on creating an organisational culture in which staff feel able to challenge unlawful discrimination and promote equality.



Alan Sheppard
Chief People Officer

2. Strategic Overview

Equality and Diversity – The Continued Vision

The Workforce Committee provides the strategic direction for equality and diversity within the organization, with operational support from the Trust's Culture Group. One of the main responsibilities of the Workforce Committee is to ensure that the Trust strives to achieve best practice across the organisation in a fair and equitable manner, ranging from employment practices through to service delivery and redesign.

The Workforce Committee is chaired by the Chief People Officer and has representation from across the organisation including a Non-Executive Director, representatives from the Workforce and Education departments, Senior Medical Staff, Senior Nursing Staff and Care Group leads.

The Trust is represented at an ICS level through membership of the Equality and Diversity Delivery Group and the regional Equality, Diversity and Human Rights Group, where representatives from local Trusts meet to share ideas and best practice with the aim of ensuring that various Trusts across the system work together to achieve a consistent and high level approach to implementing local and national equality and diversity practices.

The Trust holds the Disability Confident employer status, which recognises our commitment to removing inequality and ensuring fairness and equity in relation to recruitment and employment processes. This is reflected further within Trust policies and practices, all of which are assessed from an equality perspective.

Our Equality, Diversity and Inclusion Champions



Michelle Taylor
Workforce Lead



Nicola Hogarth
Employee Relations



Elizabeth Morrell
Employee Relations



Jill McGee
Health & Wellbeing



Carley Ogden
Learning Disabilities



Kath Tarn
Disabilities



Stuart Harper-Reynolds
LGBT, Gender Reassignment,
Marriage and Civil Partnerships



Jim Wright
Religion/Belief



Jennie Hobbs
Age (Younger People)



Fiona McEvoy
Age (Older People)



Shirley Carter
Pregnancy & Maternity



Sushil Munakhya
Race



Rafeed Rashid
Race



Pam Rogers
Patient Experience

3. Public Sector Equality Duty (PSED)

The principles of equality and diversity have been incorporated throughout the Trust, with inclusion of EDI considerations within business plans, ensuring that equality impact assessments are completed to a consistent standard, and that these are considered when implementing new and amended services, and workforce practices and policies.

As a Trust, we continue to seek to:

- Eliminate unlawful discrimination, harassment and victimisation;
- Advance equality of opportunity between different groups;
- Foster good relations between different groups;
- Seek to improve existing practices, embed new initiatives and enhance our equality and diversity activity.

We are continuing to work towards achieving the objectives identified in line with the specific duties of PSED.

Our current objectives are:

- To engage with our patients, the local community and various stakeholders, in line with the requirements of EDS2, to ensure the effective provision of services;
- To enable our staff to work alongside patients and carers to determine realistic, reasonable adjustments to deliver safe, effective care to people with literacy problems, learning difficulties and dementia.
- To promote equality, diversity and inclusion across the trust.
- To explore and reduce the discrimination experienced by our staff, as identified by the NHS annual staff survey, through the development of proactive measures and support mechanisms to be implemented trust-wide.

We aim to review our equality objectives for 2020/21, ensuring that focus is given on issues that are of particular importance to the organisation, based on feedback from our stakeholders.

4. Equality Delivery System 2

In 2012/13, the Department of Health reviewed and revised the Equality Delivery System (EDS) with a view to make it smarter and simpler to use. The review brought about the launch of EDS2, which retains much of the original framework however encourages local adaptation with a focus on local issues. It also prompts learning and sharing of good practice throughout the trust.

We have worked closely with our stakeholders, both internal and external to the Trust, in relation to the implementation of the Equality Delivery System (EDS2).

EDS2 enables us to provide focus for areas requiring further attention, to ensure all identified equality issues are addressed for all protected characteristics, as recognised by the Equality Act 2010.

We are not complacent and we know there is still much work to do. We will continue to work with service users, carers, staff, other organisations and members of the public to ensure that we are consistently fair and that our services meet the needs of our diverse communities.

This can only be achieved by working together to eliminate inequality wherever it exists and to promote fairness and inclusion in everything we do. This includes:

- Access to Trust services;
- The provision of Trust services;
- The delivery of Trust services, and;
- Employment.

5. Workforce Race Equality Standard (WRES)

The Workforce Race Equality Standard (WRES) was introduced as part of the NHS Standard Contract in 2015 and seeks to tackle one particular aspect of equality – the consistently less favourable treatment of those who identify themselves as Black, Asian or from a Minority Ethnic (BAME) background.

National research shows that those individuals who are from a Black, Asian or Minority Ethnic background are:

- less likely to be appointed for jobs once shortlisted;
- less likely to be selected for training and development programmes;
- more likely to experience harassment, bullying or abuse;
- more likely to be disciplined and dismissed.

The WRES consists of nine metrics which consider the fairness of how BAME staff are treated. Trusts must report on the metrics annually and implement an action plan to address any disparities highlighted by the information, in an attempt to try and close the gap between the experiences of BAME staff as compared to White staff.

The Trust's WRES report for 2019 is available on our website and can be found here:

<https://www.nth.nhs.uk/about/equality-diversity>

A summary of the results for 2019 is shown in the table below. The baseline data has been extracted and calculated to determine a response to each of the nine WRES indicators.

WRES Indicator	2019 Data	2018 Data
Number of staff in post	White (3989) – 87% BME (526) – 11% Not Stated (90) – 2%	White (4973) – 88% BME (567) – 10% Not Stated (121) – 2%
Shortlisting of applicants The relative likelihood of White staff being appointed from shortlisting compared to BME staff. <i>(A figure below “1” indicates that white candidates are less likely than BME candidates to be appointed from shortlisting).</i>	0.86	0.58
Disciplinary Processes The relative likelihood of BME staff entering a formal disciplinary process as compared to white staff. <i>(A figure below “1” indicates that BME staff are less likely than white staff to enter the formal disciplinary process).</i>	0.76	0.84

<p>Opportunities to access non-mandatory training</p> <p>Relative likelihood of White staff accessing non-mandatory training and CPD compared to BME staff.</p> <p>(A figure below “1” indicates that white staff members are less likely to access non-mandatory training and CPD than BME staff).</p>	0.67	0.89
Staff Survey Data 2018		
% of White Staff experiencing harassment, bullying or abuse from patients, relatives or the public.	26.90%	29.02%
% of BME Staff experiencing harassment, bullying or abuse from patients, relatives or the public.	37.50%	36.00%
% of White Staff experiencing harassment, bullying or abuse from staff.	18.30%	22.53%
% of BME Staff experiencing harassment, bullying or abuse from staff.	31.30%	38.00%
% White staff believing that the Trust provides equal opportunities for career progression or promotion.	91.40%	94.00%
% BME staff believing that the Trust provides equal opportunities for career progression or promotion.	85.70%	80.00%
% White staff who have personally experienced discrimination at work from manager/team leader/colleague.	4.4%	4.97%
% BME staff who have personally experienced discrimination at work from manager/team leader/colleague.	8.5%	14.00%
Voting Board Members:		
White	14	14
BME	1	1
% Board BME	6.7%	6.7%
Overall Workforce % BME	11%	10%
Difference (Total Board - Overall workforce)	-4.8%	-3.3%

6. Workforce Disability Equality Standard (WDES)

The NHS Workforce Disability Equality Standard (WDES) is designed to improve workplace experience and career opportunities for Disabled people working, or seeking employment, in the National Health Service (NHS). The WDES follows the NHS Workforce Race Equality Standard (WRES) as a tool and an enabler of change.

The WDES first came into force on 1 April 2019 as part of the NHS Standard Contract and consists of ten specific metrics which consider the fairness of how disabled staff feel they are treated by the organisation. NHS Organisations are required to report on the metrics annually and the information obtained is used to implement local action plans to address any disparities in the metrics and to demonstrate progress against the indicators of disability equality.

The Trust's WDES report for 2019 is available on our website and can be found here:

<https://www.nth.nhs.uk/about/equality-diversity/>

A summary of the results for North Tees and Hartlepool NHS Foundation Trust is shown in the table below. The baseline data has been extracted and calculated to determine a response to each of the ten WDES indicators.

WDES Indicator	2019 Data									
1. Number of staff in post										
Overall Workforce	<table> <tr> <td>Disabled</td> <td>(80)</td> <td>2%</td> </tr> <tr> <td>Non-Disabled</td> <td>(2666)</td> <td>58%</td> </tr> <tr> <td>Not Stated</td> <td>(1858)</td> <td>40%</td> </tr> </table>	Disabled	(80)	2%	Non-Disabled	(2666)	58%	Not Stated	(1858)	40%
Disabled	(80)	2%								
Non-Disabled	(2666)	58%								
Not Stated	(1858)	40%								
Non Clinical Staff	<table> <tr> <td>Disabled</td> <td>(21)</td> <td>2%</td> </tr> <tr> <td>Non-Disabled</td> <td>(540)</td> <td>54%</td> </tr> <tr> <td>Not Stated</td> <td>(446)</td> <td>44%</td> </tr> </table>	Disabled	(21)	2%	Non-Disabled	(540)	54%	Not Stated	(446)	44%
Disabled	(21)	2%								
Non-Disabled	(540)	54%								
Not Stated	(446)	44%								
Clinical Staff	<table> <tr> <td>Disabled</td> <td>(59)</td> <td>2%</td> </tr> <tr> <td>Non-Disabled</td> <td>(2126)</td> <td>59%</td> </tr> <tr> <td>Not Stated</td> <td>(1412)</td> <td>39%</td> </tr> </table>	Disabled	(59)	2%	Non-Disabled	(2126)	59%	Not Stated	(1412)	39%
Disabled	(59)	2%								
Non-Disabled	(2126)	59%								
Not Stated	(1412)	39%								
2. Shortlisting of applicants										
The relative likelihood of Disabled staff being appointed from shortlisting compared to Non-Disabled staff <i>(A figure below 1 indicates that Disabled staff are more likely than Non-Disabled staff to be appointed from shortlisting).</i>	1.64									
3. Capability Processes										
The relative likelihood of Disabled staff entering the formal capability process compared to Non-Disabled staff	0.0									

<p>(A figure above 1 indicates that Disabled staff are more likely than Non-Disabled staff to enter the formal capability process).</p> <p>This indicator required a two year reporting period from 2017/18 and 2018/2019.</p>	
Staff Survey Data 2018	
<p>% of Disabled Staff experiencing harassment, bullying or abuse in the last 12 months from:</p> <p>Patients, relatives or the public: Managers: Colleagues:</p> <p>% of Non-Disabled Staff experiencing harassment bullying or abuse in the last 12 months from:</p> <p>Patients, relatives or the public months: Managers: Colleagues:</p> <p>% of Disabled Staff saying the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it in the last 12 months.</p> <p>% of non-Disabled saying the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it in the last 12 months.</p>	<p>35.4% 16.3% 33.7%</p> <p>26.7% 5.8% 12.4%</p> <p>51.2%</p> <p>52.9%</p>
<p>% of disabled Staff believing that the Trust provides equal opportunities for career progression or promotion.</p> <p>% of non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.</p>	<p>84.4%</p> <p>92.1%</p>
<p>% of disabled Staff who felt pressure from their manager to come to work despite not feeling well enough to perform their duties.</p> <p>% of non-disabled Staff who felt pressure from their manager to come to work despite not feeling well enough to perform their duties.</p>	<p>43.8%</p> <p>19.2%</p>
<p>% of disabled staff who said they feel satisfied with the extent to which their organisation values their work.</p> <p>% of non-disabled staff who said they feel satisfied with the extent to which their organisation values their work.</p>	<p>36.7%</p> <p>53.4%.</p>

<p>% of disabled staff who said that their employer has made adequate reasonable adjustment(s) to enable them to carry out their work.</p>	<p>66.7%</p>
<p>Staff engagement score for: Disabled Staff Non-disabled Staff</p> <p>Overall engagement score for the Organisation</p> <p>Has your Trust taken action to facilitate the voices of disabled staff in your organisation to be heard?</p>	<p>6.5 7.2</p> <p>7.1</p> <p>No</p>
<p>Voting Board Members:</p> <p>Disabled Non-Disabled % Board Disabled Overall Workforce % Disability Difference (Total Board - Overall workforce)</p>	<p>0% 38% 0% 2% -2%</p>

7. Gender Pay Gap

The Trust complies with the **Equality Act 2010** (Gender Pay Gap Information) Regulations 2017.

Our gender pay gap report as of 31 March 2019 (the snap shot date) shows the Trust has an average pay gap of 35.27%, and a median pay gap of 20.58%. A further breakdown of results shows that the average and median pay gap is higher amongst the medical workforce compared to non-medical staff. Men account for 64% of all Trust medical staff compared to 36% female. There has been an increase in female medical staff commencing employment with the Trust in recent years. If this trend continues this is likely to have a positive impact on our gender pay gap results.

The Trust's Gender Pay Gap report is available to view on our website:

<https://www.nth.nhs.uk/about/trust/how-we-are-doing/gender-pay>

Gender	Average Hourly Rate (Mean)	Median Hourly Rate (Median)
Male	22.54	16.74
Female	14.84	13.57
Difference	7.70	3.17
Pay Gap %	34.17%	18.95%

The mean gender pay gap for the Trust is that female staff are paid 34.17% less than male staff. The median gender pay gap for the Trust is that female staff are paid 18.95% less than male staff.

Gender	Average Bonus Pay (Mean)	Median Bonus Pay (Median)
Male	£11,362.41	£8,294.00
Female	£9,129.41	£6,027.04
Difference	£2,233.00	£2,266.96
Pay gap %	19.65%	27.33%

The Trust does not operate a bonus scheme, however consultant medical staff are eligible to apply for clinical excellence awards, which are considered to be a bonus payment and form part of the gender pay gap calculations. Since medical staff are predominantly male, it is reasonable to conclude that male workers earn a higher rate of bonus pay than female workers.

Pay Quartiles by Gender:

Lower Quartile



11.05%



88.95%

Lower Middle Quartile



12.41%



87.59%

Upper Middle Quartile



11.90%



88.10%

Upper Quartile



26.74%



73.26%

The data above shows the male to female split of our workforce for each quartile.

The lower quartile represents the lowest salaries in the Trust and the upper quartile represents the highest salaries. The Trust employs more women than men in every quartile.

8. Staff Survey

The results of the 2019 national NHS staff survey are used to identify any particular areas of good practice as well as those areas requiring improvement, and considers a number of areas in relation to equality and diversity which need to be addressed.

As part of the 2019 staff survey, all employees were invited to participate in the survey and the personal characteristics of the respondents are reported as similar to the overall profile of our workforce.

The results of the recent survey indicate that, in comparison to other trusts, we have:

- more staff reporting that their manager provides support and clear feedback;
- more staff believing that the Trust takes positive action on health and well-being;
- more staff reporting that appraisals have helped them to do their job and helped them to agree clear objectives;
- more staff reporting that the Trust has made adequate adjustments to enable them to carry out their work;
- more staff reporting that the Trust provides support with flexible working patterns;
- less staff reporting that they have felt unwell as a result of work related stress;
- more staff who are satisfied with the quality of services that they provide patients and who feel that their role makes a difference to patient's/service users;
- less staff personally experiencing harassment, bullying or abuse at work from managers;
- less staff personally experiencing harassment, bullying or abuse at work from other colleagues;
- more staff believing that the Trust treats staff who are involved in an error, near miss or incident fairly and takes action to ensure that they do not happen again.

As responses to the survey are anonymous, it is not possible to directly address any concerns raised through the survey on an individual basis. However, we continue to ensure that all staff are made aware of the numerous options in place where they are able to raise concerns, including details of the various support systems that are available for staff to access. There are both formal and informal measures to assist staff who may be experiencing any form of discrimination, bullying or harassment. As well as our Workforce policies on raising grievances or claims of bullying and harassment, there are also additional routes in place for raising concerns (strengthened by the implementation of Freedom to Speak Up) and also a number of other support systems such as our Freedom to Speak Up champions, our internal mediation service and occupational health support which includes access to counselling services.

We are keen to ensure that staff feel empowered to raise concerns and that, as a responsive employer, we clearly communicate the cultures and values expected by those employed within the organisation in relation to behaviour and attitude, ensuring that these are instilled within all staff at all times.

9. Equality, Diversity and Inclusion in Practice

Equality and diversity is about inclusion, respect and removing barriers, whether this be in relation to the health care services we provide, or the employment of our staff.

There are numerous ways in which this is illustrated throughout the organisation, through specific initiatives as well as in everyday practices. The following section of the report highlights some examples of good practice and the case studies which reflect this.

Menopause Support Group

The Trust has launched its own menopause support group for staff – led by the Trust’s Health and Wellbeing lead Jill McGee and Consultant Gynaecologist Gill Black (pictured below). The group helps staff who may be struggling with symptoms of the menopause and need further advice and support.

Jill has told us that: “The first group meeting took place recently and feedback has been really positive. People were pleased to be listened to and they were relieved to hear that they were not the only ones going through it. Menopause can be linked to many things which affect an individual’s ability to work, including anxiety and depression. Groups like this help encourage women to talk more and feel comfortable”.



Equality, Diversity and Human Rights Week 2019

As part of Equality, Diversity and Human Rights Week, we delivered a number of awareness and training sessions during the week. Everyday Language Solutions who provide interpreting services to the Trust came on-site and shared a range of information on the services they provide to the Trust, including how to overcome language barriers.

We also re-launched the 'inspirational women's group' during the week with the support of our Deputy Medical Director who felt that our female doctors would benefit greatly from contact with a supportive group of more senior doctors, to encourage them through their career journey and help them to maintain a work/life balance and have a successful career.

Continued success for dementia champions

A complete lack of hierarchy and no 'death by PowerPoint' are just two of the factors that have led to the stunning success of the Trust's Dementia Champions course.

North Tees and Hartlepool NHS Foundation Trust hit the headlines last year when the 250th member of staff was trained to be more aware of the issues related to dementia. The two-day course aims to open people's minds to thinking differently in relation to dementia. By placing an emphasis on hands-on activities including role plays, practical sessions on nutrition and hydration and even wearing a sensory suit to mimic age and frailty, course attendees develop knowledge of dementia and increase their empathy. The course also raises awareness of the importance of reasonable adjustments, legalities and an understanding of the supporting role of carers and families.

The Trust has now achieved its ambition of a Dementia Champion on every ward but still has plans to train more staff.

Dementia Specialist Nurse Stephen Nicholson commented:

"One of the great things about the course is there is no hierarchy. Consultants, porters, specialist nurses, enhanced care, community matrons, staff nurses, therapy staff, chaplaincy, outpatients and health care assistants are all in the same room, working, interacting and learning together. It's very hands-on, with lots of role playing and general interaction. Over the entire two days, there's only about three hours of presentations. Death by PowerPoint is no-one's idea of an enjoyable or worthwhile training experience."

Stephen and his colleagues Dementia Specialist Occupational Therapist Nicola Murphy and Community Dementia Specialist Nurse Janette McGuire designed the course to better meet the needs of the Trust's staff. Nicola said:

"The course was completely re-vamped three and half years ago. It used to be several monthly sessions, all around two hours long, which were all very presentation-based and had very little hands-on activities. We created the new two-day course using the feedback received at the time and we keep adapting it according to staff requirements. No two sessions are ever the same. The course identifies dementia awareness as everybody's business and highlights the dementia champions across the trust have an increased knowledge they can pass on. They are the 'go to' people to advise and support their colleagues in relation to cognitive impairment.

As Janette says:

“Dementia can affect anyone. We’re really pleased with the uptake. Most of the training sessions are fully booked, just by word-of-mouth.”

Course participant Mark Ryder, a frailty co-ordinator at the Trust, commented:

“Before going on the course I had heard from around the Trust how amazing the training was, so I went with high expectations. I wasn't disappointed. The training was excellent in its content and delivery. It provided a wealth of information, great practical application and challenged the way we work with people living with dementia. I feel this training really promotes standards of care and improves the patient and carer experience.”



Blindness is no barrier for voluntary radio presenter

When poorly patients are relaxing to music from our volunteer-run hospital radio station, they might be surprised to learn that one of their presenters is not only blind, but is also wheelchair-bound and has a learning disability.

18-year-old Bilqees Hussain, from Stockton-on-Tees, is the latest presenter to join Radio Stitch – the Trust’s hospital radio service. She told us:

“Being blind doesn’t stop me from doing anything. I’m always happy and full of laughs. I’m a joker”!

One of six siblings, Bilqees also attends Abbey Hill Sixth Form where she studies maths and English, and as a self-confessed fan of ‘blingy’ nails, is also learning salon skills. As well as radio presenting, Bilqees says she would one day like to work in a cake shop. Having completed several training sessions to learn how to use the radio broadcasting equipment, Bilqees is now on-air every Thursday morning from 10am entertaining patients and visitors with her unique banter and her favourite tracks.

When asked what music she likes the most, Bilqees doesn’t hesitate to answer: “Uptown Funk, Mamma Mia and anything by Little Mix”!

Run by a team of volunteers, the Trust's hospital radio service has a history of being a proven ground for radio talent, giving a valuable start to BBC Radio Tees presenter Ken Snowdon, former Radio 1 star Mark Page and BBC Radio 2 and Radio 6 music editor Chris Reay.

Radio Stitch volunteer manager Elliot Kennedy told us:

"Bilqeis is a star in the making. She's a great girl and has been a joy to work with. A proper radio livewire. At Radio Stitch we pride ourselves on providing opportunities for people with disabilities or other limiting conditions and we're always happy to hear from anyone who is interested in volunteering".



Hartlepool health and education team's collaboration improving futures for young people

A special educational needs school in Hartlepool has teamed up with the Trust as part of a project to help boost the prospects of their students.

Two groups of students at Catcote Academy took a tour at the University Hospital of Hartlepool where they had the chance to meet and talk to staff to find out more about careers within the NHS.

After being introduced to the site by our education team, the group had the opportunity to visit the joint replacement unit and the orthopaedic outpatients department as part of their extensive hospital tour. Suzanne Coyle-Watson, lead educator for the Trust said:

"These visits mark the start of an exciting new partnership between our two organisations. It was fantastic to meet all of the students and to have the opportunity show them around the Trust. The visitors asked some insightful questions and took a real interest in the different job roles we offer and the care we provide to our patients. It was a real privilege to meet all of these fantastic young people".

Jackie McGarry, Careers Leader for Catcote Academy added:

"We're delighted to be working in partnership with the Trust and would like to say a huge thank you to all the staff who took time out of their busy schedules to talk to our students about the

careers that are available in our National Health Service. The visits have been invaluable in terms of raising aspirations, and also finding out about the many different jobs that exist for young people with special educational needs in this sector”.



From prescriptions to priesthood

A former pharmacy employee of the Trust has returned to the fold for a few months as she undertakes a training placement as part of her journey to becoming a priest in the Church of England.

Jane Robson worked at the Trust for 21 years as a clinical pharmacy services manager, before an ambition and a calling led her to pursue a career in the Church. Jane was happily welcomed by colleagues who enjoyed catching up with her and wishing her well.



Baby talk

We have been talking about babies, with a look at three special innovations we are making to improve the health and future of our precious little ones.

Online pregnancy registration

We're asking all expectant mums to register their pregnancy online, rather than calling a community midwife. Our new online pregnancy registration form asks for simple details like height and weight to make sure the midwifery team gets all the information they need to start planning a care pathway straight away.

The form is available at: www.nth.nhs.uk/maternity-form

Continuity of Carer

The online form plays a vital role in our 'Continuity of Carer' programme which ensures pregnant women are seen by the same community midwife throughout their pregnancy.

Anita Scott, Specialist Lead Midwife, told us:

"We know from research that having the same midwife throughout pregnancy has huge benefits. It allows the mum-to-be and midwife to develop a good working relationship and builds a lot of trust. The midwife gets to know the mother and is in a much better position to ensure everything is place for a healthy baby. But more importantly, having Continuity of Carer throughout pregnancy reduces the risk of losing the baby by 16%. Mothers are also 24% less likely to experience a premature birth".



Reducing smoking in pregnancy

More than 100 leaders from across the region recently came together to pledge their commitment to ending one of our most pressing health concerns: tobacco dependency in pregnancy.

The initiative was borne of a group of leaders who have participated in the widely acclaimed Yale System Leadership Programme to create a 'guiding coalition' including local maternity systems, leading midwives and clinical experts.

Our Chief Executive Julie Gillon spoke to us:

"By coming together as one single voice for the North East and North Cumbria, we can be louder than ever before. A newly launched script which midwives will use to talk to expectant mothers about their habit as an addiction sends a hard hitting message about the realities of the impacts on their unborn child. Nationally around 10% of expectant mothers have a

dependency throughout their pregnancy but here in the North East that figure increases to 17%. Smoking during pregnancy causes up to 2,200 premature births, 5,000 miscarriages and 300 perinatal death deaths every year in the UK. Successfully reducing tobacco dependency during pregnancy to 6% by 2022 could save the local health service an estimated £4.8m

Lesbian, Gay, Bisexual and Transgender (LGBT) History Month

As part of LGBT History Month we launched our first LGBT support group. The network was well attended and provided a forum for individuals to come together, share ideas and experiences, raise awareness of the challenges individuals have experienced and provide support to each other. The group is chaired by our LGBT Equality Champion: Stuart Harper-Reynolds.

We also took the opportunity to coincide LGBT History Month with our February Schwartz Round where we received excellent feedback from the staff who attended the session and they were extremely grateful to their colleagues for sharing their experiences.

The poster features a rainbow gradient background. At the top left, 'LGBT' is written in large white letters on a red background. To the right is the NHS logo and 'North Tees and Hartlepool NHS Foundation Trust'. Below this, 'History Month 2020' is written in large black letters on a white background. A green banner contains the text 'Join us in celebrating LGBT+ History Month 2020 and let your stories be heard.' The bottom section is divided into two columns: 'Schwartz Round' on the left and 'Staff Network' on the right. The central text 'Members, supporters and allies of the LGBT+ community are all welcome.' spans both columns.

Schwartz Round	Members, supporters and allies of the LGBT+ community are all welcome.	Staff Network
Wed 12 Feb		Thurs 13 Feb
12:30pm – 2pm		1pm – 2pm
Spirituality Centre UHNT		Spirituality Centre UHNT

My Transition

We thought it fitting to finish our stories of equality and diversity in practice with the thoughts of one of our colleagues who is currently transitioning from one gender to another and we are extremely grateful to him for sharing his honest experiences of this process.

“In the transgender community it’s common to hear horror stories about when people transition at work. So unsurprisingly, when I came out as a transgender man a lot of people told me how brave I was. I didn’t feel particularly brave though, because I was confident that the people in my life would be understanding and supportive. I’m fortunate to say that I was right.

Everyone I have encountered in our Trust with regards to my transition have been wonderful. Most importantly, my team in Clinical Coding. From the moment I came out they have been nothing but supportive and there aren’t any words to truly express my gratitude. They have made what could have been a difficult and stressful time of my life actually pretty easy. By using my new name and pronouns and treating me the same as they always have, they have

helped me become the version of myself I was meant to be. A happier and more confident me.

If I could give only one piece of advice to someone going through gender transition, it would be to find someone you can trust to talk to and help you through the process. That could be a colleague, a manager, the Trust's inclusion lead for gender reassignment (Stuart Harper-Reynolds), or even myself. I'm always happy to answer any questions, whether you are transitioning yourself or you want to help someone who is transitioning. I want to pay forward the invaluable support I received".



10. Contacts for Further Information

If you would like any further information about Equality, Diversity and Inclusion within North Tees and Hartlepool NHS Foundation Trust, please contact our Workforce Equality and Diversity lead:

Michelle Taylor, Head of Workforce
University Hospital of North Tees
Tel: 01642 624025

Feedback

We actively seek feedback on our annual reports from stakeholders and service users so that we can continue to meet our commitment to improve service delivery. We would welcome any feedback and comments on this document which should be directed to:

The Employee Relations Team, University Hospital of North Tees, Hardwick Road, Stockton on Tees, TS19 8PE or by email at nicola.hogarth@nth.nhs.uk

The information contained within this report is also available in alternative formats, which can be obtained by contacting, Cordelia Wilson, Clinical Governance Lead on 01642 383576.

11. Workforce Equality Factsheets

Workforce Profile of the Trust

This section on the report contains a number of factsheets in relation to the workforce profile of the Trust, reporting on each protected characteristic for the period 1 April 2019 to 31 March 2020.

As at 31 March 2020 there were 4,606 members of staff employed by the Trust.

Of the total staff employed by the Trust, 2,507 employees (54%) work on a full time basis and 2,099 employees (46%) work part time.

Gender

The Trust employs 3,914 female members of staff and 692 male members of staff.

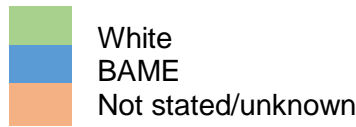
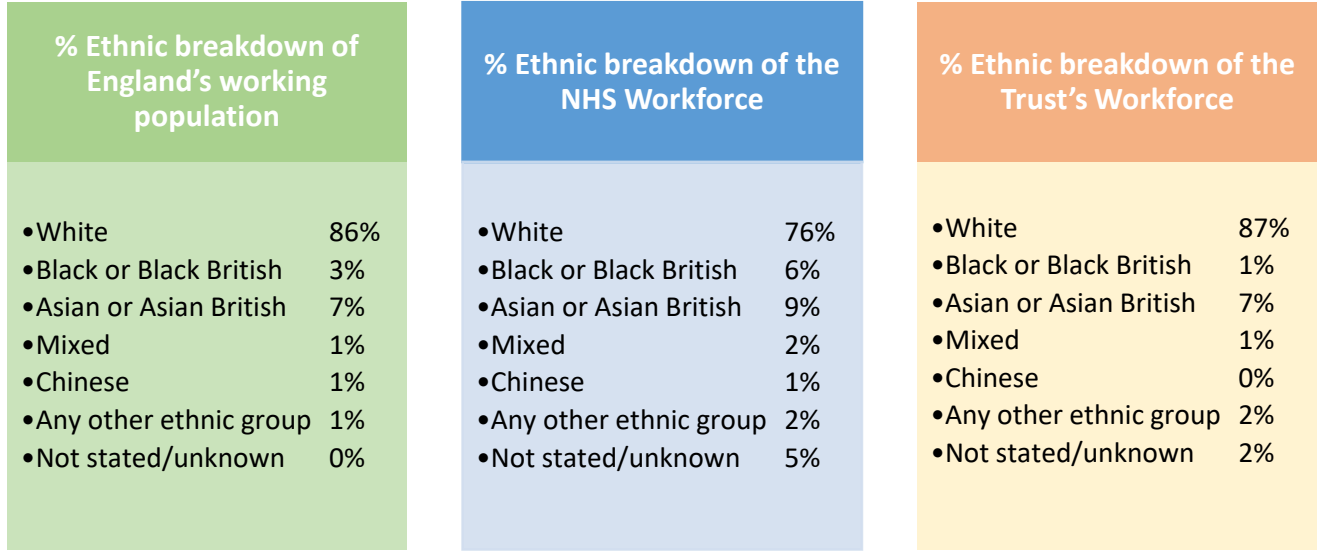


60% of very senior manager roles in the Trust are held by women.

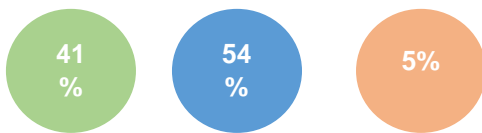


Ethnicity

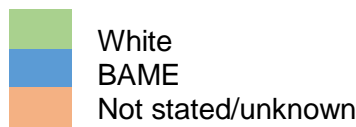
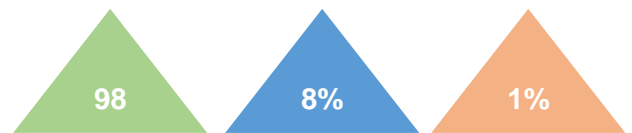
The Trust employs 4,017 White employees and 517 BAME employees. A further 72 employees have chosen not to declare their ethnicity.



All Medical and Dental Staff



Agenda for Change Staff



Consultants



SAS Doctors



Doctors in Training



Bands 8a-9



Bands 5-7



Bands 1-4



Age

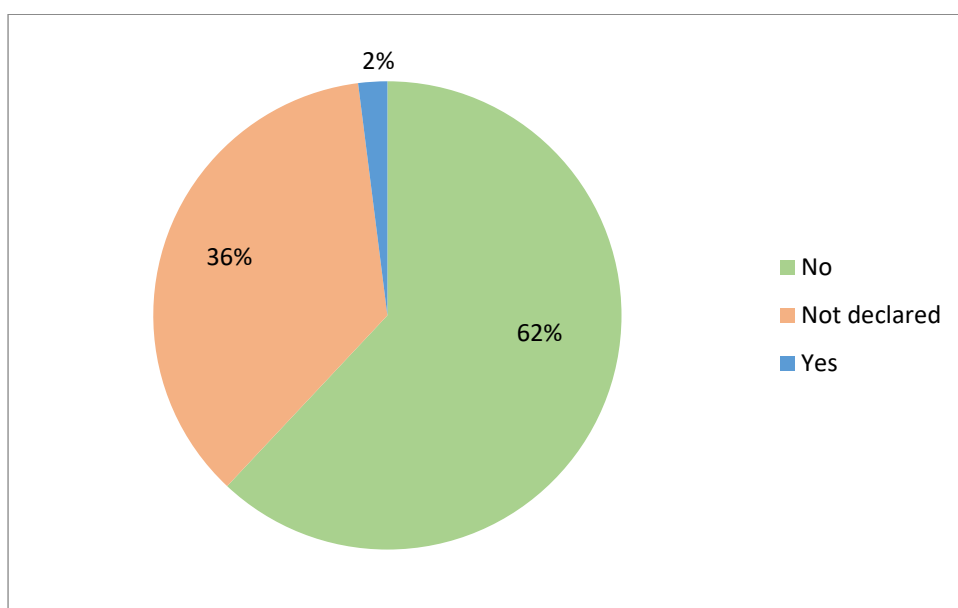
Of the 4,606 individuals employed by the Trust, the majority of staff are aged 51 to 55, closely followed by age 46 to 50 and then 56 to 60.

Age breakdown of England's working population	Age breakdown of the NHS Workforce	Age breakdown of the Trust's Workforce
•Under 25 12%	•Under 25 6%	•Under 25 6%
•25 to 34 23%	•25 to 34 23%	•25 to 34 22%
•35 to 44 22%	•35 to 44 24%	•35 to 44 23%
•45 to 54 21%	•45 to 54 28%	•45 to 54 27%
•55 to 64 18%	•55 to 64 18%	•55 to 64 20%
•65 and over 4%	•65 and over 2%	•65 and over 2%

Disability

Our data indicates that the majority of our employees (62%) have declared that they do not have a disability, as compared to 2% of employees who have declared that they do have a disability.

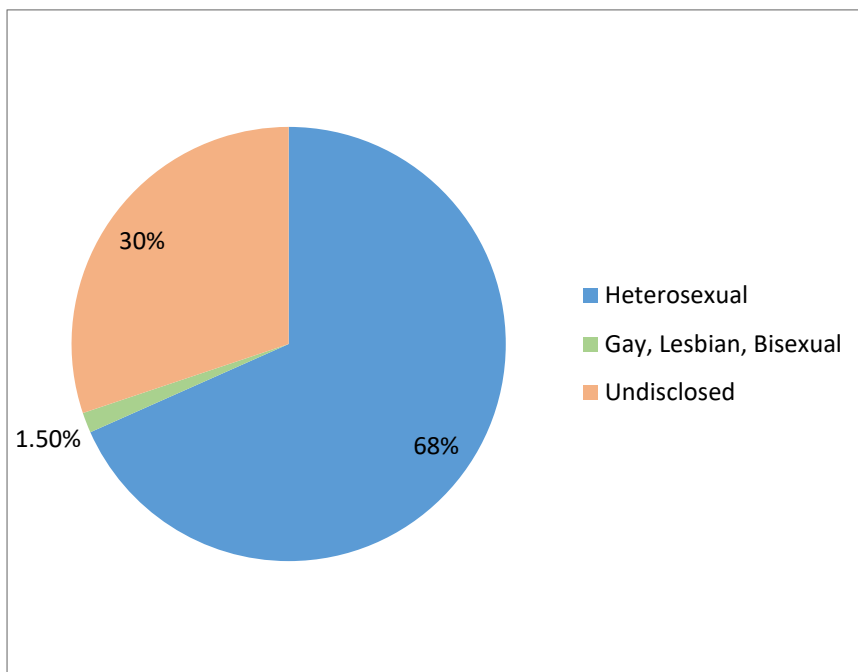
The information we hold relating to staff and disability continues to improve as there has been a reduction in the number of staff who have not declared their disability status from 40% in 2018/19 to 36% in 2019/20.



Sexual Orientation

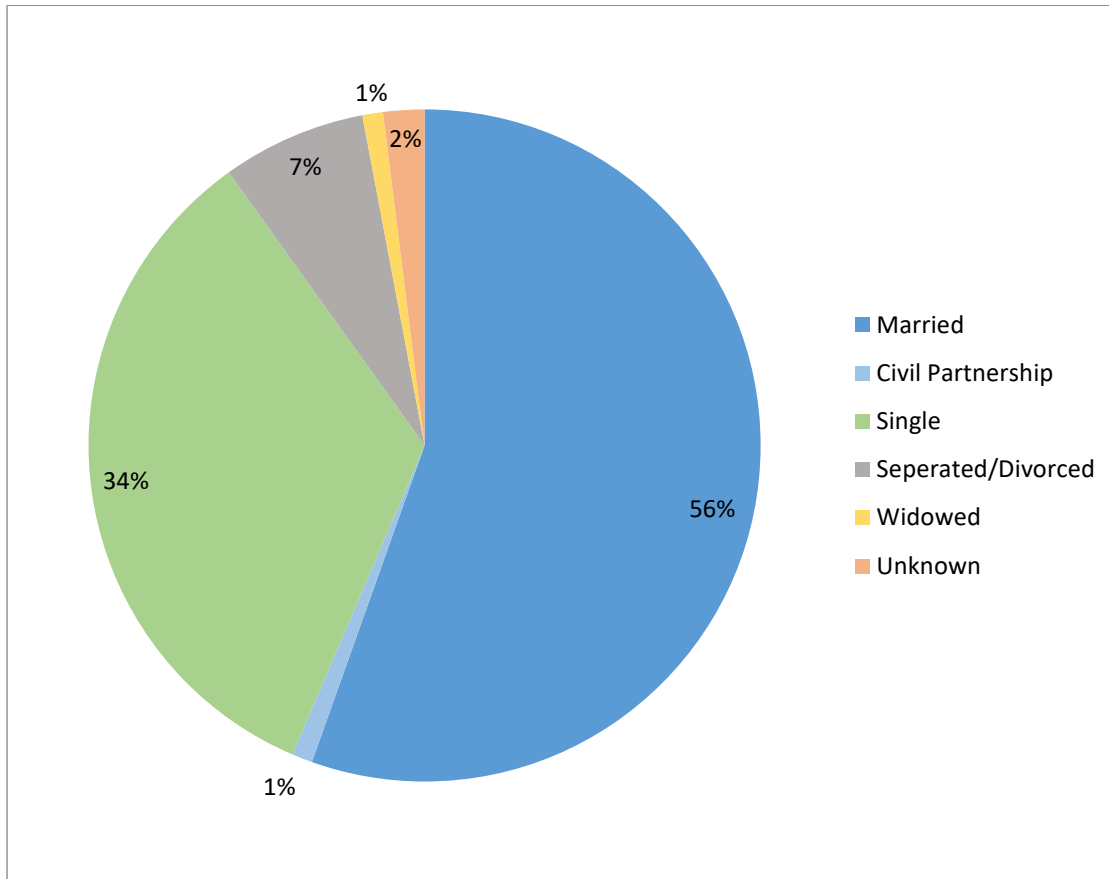
70% of our employees have declared their sexual orientation, whereas 30% have chosen not to declare their status. The number of staff choosing not to declare their status has reduced by 3% since 2018/19.

Of those employees who have chosen to declare their status, 68% of our employees have declared their sexuality as heterosexual, with a further 1.5% employees who have declared their status as gay, lesbian or bisexual.



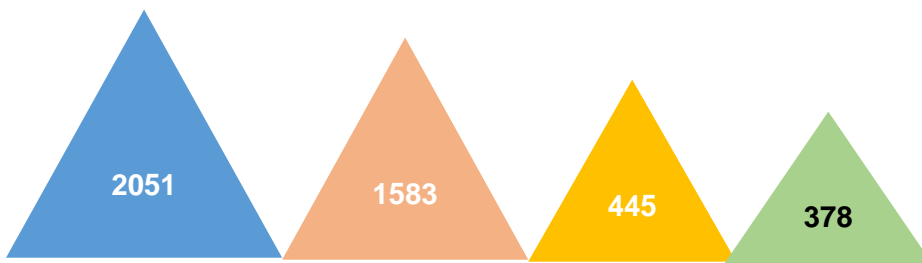
Marital Status

The marital status of our workforce profile indicates that 56% of our employees are married, with a further 0.5% who have indicated that they are in a civil partnership and 34% of our employees are recorded as single.



Religion and Belief

45% of our employees have recorded their religion as Christian, whereas 34% of staff have chosen not to declare their religion and 10% of staff have declared that they are Atheist.



Pregnancy and Maternity

5.5% of our staff (248 employees) have taken maternity/adoption or paternity leave in the last year.

Gender Reassignment

At present we are not able to report on this equality strand as these details are not captured on the standard documents/application forms that are used to gather personal details.

However, any member of staff currently undergoing gender reassignment is supported throughout their transition by their manager and an employee relations advisor, in relation to employment matters and workplace considerations.