Equality, Diversity & Inclusion Report for the period: 01 April 2019 – 31 March 2020

**East Kent Hospitals Report for EDI People information 2019-2020**

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# Summary

This report provides evidence of East Kent Hospitals University NHS Foundation Trust (EKHUFT) Diversity & Inclusion performance. Overall, the data paints an improving picture resulting from Equality Diversity & Inclusion (EDI) activities during the year.

There continue to be areas for development generally would appear to focus on Pay Bands, providing opportunities for activities to improve access to promotion and recruitment into higher bands for minority groups. The Trust is working with the Black Asian or Minority Ethnic (BAME) Network to develop programs to support minority progression in the Trust.

* In Bands 8c, 8d, 9 and Exec. There are no staff who have declared a disability.
* Women continue to be over represented in grades from Apprentice to Band 7 and underrepresented above Band 7.
* The percentage of BAME staff in the Trust in 2020 has increased to 17.39% and the percentage who were promoted during the 20/21 has increased to 13.87.
* During the last four years, Full Time (FTE =1) workers were promoted proportionately more than Part Time (FTE<1) workers.
* During 19/20 Women accounted for 77.41% of the workforce availability and for 85.81% of sickness absence. Men are contracted to work for 21.78% but are responsible for 13.98% of absence. This pattern has existed since at least 2017 when this data was first reported.
* Those staff members over the age of 46 tend to take higher levels of sickness absence than those 45 years and younger. The highest levels of sickness absence were taken by those aged 46 to 60 years old.
* Generally white staff take higher levels of sickness than black staff.

# Rationale

This document is the EKHUFT response to The Equality Act 2010 (Specific Duties) Regulations 2011, which require each public authority to publish information to demonstrate its compliance with the duty imposed by section 149(1) of the Act (The Public Sector Equality Duty [PSED])

The information must include, in particular, information relating to persons who share a relevant protected characteristic who are its employees.

# Introduction

The public sector Equality Duty, in section 149 of the Equality Act 2010, requires public bodies to consider all individuals when carrying out their day to day work – in shaping policy, in delivering services and in relation to their own employees. It requires public bodies to have due regard to the need to:

a. eliminate discrimination

b. advance equality of opportunity and

c. foster good relations between different people when carrying out their activities

## Protected Characteristics

* + Age
  + Disability
  + Gender reassignment
  + Marriage and civil partnership
  + Pregnancy and maternity
  + Race
  + Religion and belief
  + Sex
  + Sexual orientation

# Data Collection

This report is based on data collected from the Electronic Staff Register (ESR).

# Report Style

To dramatically reduce the length and complexity of this document only those issues, which have been identified as statistically significant, are covered.

# Statistical Significance

Data has only been considered significant when numbers fall outside the range of plus (+) or minus (–) two standard deviations. The standard deviation is commonly used to measure confidence in statistical conclusions. The reported margin of error is typically about twice the standard deviation, the half-width of a 95 per cent confidence interval. In science, researchers commonly report the standard deviation of experimental data, and only effects that fall much farther than one standard deviation away from what would have been expected are considered statistically significant – normal random error or variation in the measurements is in this way distinguished from causal variation.

# Demographics

The demographic data used to produce this report has been based on data obtained in the 2011 census and ONS Mid-Year Estimates 2015. Comparisons have been made between trust data and population where appropriate. A more detailed summary of the East Kent population is published on the Equality pages of the EKHUFT web site

# Headcount

On 31 March 2020 the Trust employed 8666 people 551 more than on the same date last year

On 31 March 2019 the Trust employed 8115 people.

On 31 March 2018 the Trust employed 7928 people.

## Sex

79.19% of employees are female in contrast to the local population where 51.1% are female (ONS Mid-Year Estimates 2015). This situation is reflected across the NHS at large.

**Breakdown by Sex:**

**Female**

2017 77.98%

2018 77.92%

2019 79.19%

2020 78.70%

**Male**

2017 22.02%

2018 22.08%

2019 20.81%

2020 21.30%

## Race

The national census current population estimates suggest that 90.56% of the local population described themselves as White. The level of EKHUFT staff who describe themselves as White is noticeably less at 65.4% which is influenced by the of high number of staff who have not declared their ethnicity.

**Figure 1**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **2017** | **2018** | **2019** | **2020** | **Pop.** |
| **A White - British** | 64.35% | 66.50% | 62.98% | 61.84% | 90.80% |
| **B Irish** | 0.92% | 0.80% | 0.95% | 0.89% | 0.70% |
| **C Any other White background** | 4.91% | 5.24% | 5.46% | 5.41% | 3.50% |
| **D White & Black Caribbean** | 0.29% | 0.27% | 0.30% | 0.38% | 0.40% |
| **E White & Black African** | 0.03% | 0.03% | 0.04% | 0.10% | 0.20% |
| **F White & Asian** | 0.39% | 0.42% | 0.37% | 0.40% | 0.40% |
| **G Any other mixed background** | 0.42% | 0.40% | 0.48% | 0.58% | 0.30% |
| **H Indian** | 5.22% | 5.19% | 5.26% | 5.47% | 0.60% |
| **J Pakistani** | 0.67% | 0.63% | 0.58% | 0.68% | 0.10% |
| **K Bangladeshi** | 0.23% | 0.19% | 0.26% | 0.30% | 0.20% |
| **L Any other Asian background** | 3.56% | 3.13% | 3.57% | 3.90% | 1.20% |
| **M Caribbean** | 0.32% | 0.28% | 0.38% | 0.45% | 0.20% |
| **N African** | 1.87% | 1.77% | 1.75% | 2.62% | 0.60% |
| **P Any other Black background** | 0.23% | 0.22% | 0.18% | 0.21% | 0.10% |
| **R Chinese** | 0.53% | 0.76% | 0.46% | 0.60% | 0.40% |
| **S Any Other Ethnic Group** | 1.08% | 1.04% | 1.33% | 1.70% | 0.30% |
| **Z Not Stated** | 15.00% | 13.16% | 15.65% | 14.47% | 0.0% |

17.39% of our staff describe themselves as BAME but only 5.0% of our local population describe themselves as BAME

**Figure 2**

1254 members of staff have chosen not to declare their ethnicity.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **2017** | **2018** | **2019** | **2020** | **Pop.** |
| **White** | 70.18% | 72.53% | 69.39% | 68.14% | 95.00% |
| **BAME** | 14.82% | 14.31% | 14.96% | 17.39% | 5.00% |
| **Z Not Stated** | 15.00% | 13.16% | 15.65% | 14.47% |  |

## Religion

The percentage of staff at EKHUFT who did not wish to disclose their religion/belief has reduced to 38.37%.

**Figure 3**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **2017** | **2018** | **2019** | **2020** | **Pop.%** |
| **No religion** | 8.45% | 8.27% | 9.53% | 11.31% | 27.57% |
| **Buddhism** | 0.55% | 0.57% | 0.67% | 1.10% | 0.52% |
| **Christianity** | 36.45% | 37.41% | 37.61% | 38.75% | 62.23% |
| **Hinduism** | 1.90% | 1.92% | 2.05% | 2.50% | 0.74% |
| **Not disclosed** | 47.15% | 46.51% | 43.73% | 38.37% | 7.47% |
| **Islam** | 1.08% | 1.02% | 1.45% | 1.96% | 0.82% |
| **Other** | 4.30% | 4.14% | 4.86% | 5.89% | 0.45% |
| **Judaism** | 0.03% | 0.03% | 0.02% | 0.02% | 0.12% |
| **Sikhism** | 0.08% | 0.13% | 0.09% | 0.10% | 0.09% |

## Sexual Orientation

Last year it was reported that 55.23% of EKHUFT Staff identified as Heterosexual. 43.50% chose not to disclose their sexual orientation leaving 1.28% of staff identifying as lesbian, gay, bisexual or Transgender (LGBT+).

2020 has seen significant changes in the number of people choosing to identify their sexual orientation. The number of people who did not identify their sexual orientation has reduced by 8.57%

**Figure 4**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **2019** | **2019** | **%** | **2020** | **%** | **Difference** | **% Change** |
| **Bisexual** | 47 | 0.58% | 57 | 0.66% | 10 | 21.28% |
| **Gay or Lesbian** | 77 | 0.95% | 89 | 1.03% | 12 | 15.58% |
| **Heterosexual or Straight** | 4763 | 58.69% | 5562 | 64.18% | 799 | 16.78% |
| **Not stated** | 3222 | 39.70% | 2946 | 33.99% | -276 | -8.57% |
| **Other sexual orientation not listed** | 1 | 0.01% | 5 | 0.06% | 4 | 400.00% |
| **Undecided** | 5 | 0.06% | 7 | 0.08% | 2 | 40.00% |

# Grade

## Sex

Women continue to be over represented in grades from Apprentice to Band 7 and underrepresented above Band 7. The levels for doctors in training are evenly balanced. It is reassuring to note that there have been significant increases in the number of women employed as apprentices, consultants, senior managers and managers employed at Band 8B and 8D. This may suggest that our Gender Pay Gap action plan is resulting in positive change. It must be rec recognised that these changes in numbers will probably take some years before they impact on the Gender Pay Gap calculations.

**Figure 5**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **2017** | **2017** | **2018** | **2018** | **2019** | **2019** | **2020** | **2020** |
| **Band** | **Female** | **Male** | **Female** | **Male** | **Female** | **Male** | **Female** | **Male** |
| **Apprentice** | 6 | 16 | 28 | 12 | 17 | 12 | 12 | 3 |
| **AfC Band 1** | 30 | 14 | 29 | 12 |  | 1 |  | 1 |
| **AfC Band 2** | 1431 | 304 | 1431 | 304 | 1537 | 272 | 1638 | 303 |
| **AfC Band 3** | 684 | 83 | 684 | 89 | 686 | 78 | 730 | 98 |
| **AfC Band 4** | 419 | 84 | 435 | 96 | 460 | 84 | 550 | 105 |
| **AfC Band 5** | 1375 | 252 | 1293 | 227 | 1282 | 205 | 1314 | 201 |
| **AfC Band 6** | 1061 | 166 | 1049 | 169 | 1108 | 164 | 1131 | 175 |
| **AfC Band 7** | 573 | 146 | 609 | 151 | 673 | 144 | 737 | 164 |
| **AfC Band 8a** | 128 | 49 | 129 | 62 | 129 | 58 | 149 | 61 |
| **AfC Band 8b** | 67 | 35 | 75 | 33 | 76 | 31 | 82 | 35 |
| **AfC Band 8c** | 19 | 9 | 19 | 9 | 19 | 11 | 21 | 5 |
| **AfC Band 8d** | 5 | 2 | 7 | 2 | 14 | 5 | 17 | 6 |
| **AfC Band 9** | 1 | 2 |  | 2 |  | 2 |  | 2 |
| **Senior Manager** | 12 | 11 | 14 | 12 | 23 | 13 | 427 | 675 |
| **Medical Staff** | 348 | 572 | 380 | 566 | 402 | 609 | 12 | 12 |
| **Grand Total** | 6159 | 1745 | 6182 | 1746 | 6426 | 1689 | 6820 | 1846 |

Women are under-represented in all Bands above Band 7 except 8C.

## Race

In general, the Trust employs a higher proportion of Black Asian and Minority Ethnic (BAME) staff than found in the local population. Currently 15% of the Trusts employees are from BAME groups compared to 5% found in the East Kent population. There is a reduced proportion of BAME staff in all nonclinical bands. There is a much higher proportion of BAME Clinical grades.

**Figure 6**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | BAME | BAME | BAME | White | White | White | Not Stated | Not Stated | Not stated |
| Grade/Band | 2018 | 2019 | 2020 | 2018 | 2019 | 2020 | 2018 | 2019 | 2020 |
| **Apprentice** | 2 | 2 | 1 | 31 | 25 | 13 | 7 | 2 | 1 |
| **AfC Band 1** | 16 | 0 |  | 21 | 1 | 1 | 4 | 0 |  |
| **AfC Band 2** | 176 | 213 | 267 | 1298 | 1362 | 1423 | 261 | 234 | 251 |
| **AfC Band 3** | 31 | 37 | 50 | 640 | 631 | 694 | 102 | 96 | 84 |
| **AfC Band 4** | 32 | 34 | 86 | 440 | 451 | 502 | 59 | 59 | 67 |
| **AfC Band 5** | 288 | 309 | 341 | 953 | 940 | 954 | 279 | 238 | 220 |
| **AfC Band 6** | 146 | 171 | 209 | 905 | 920 | 924 | 167 | 181 | 173 |
| **AfC Band 7** | 55 | 65 | 83 | 623 | 670 | 723 | 82 | 82 | 95 |
| **AfC Band 8a** | 16 | 11 | 16 | 160 | 157 | 174 | 15 | 19 | 20 |
| **AfC Band 8b** | 4 | 3 | 2 | 91 | 88 | 98 | 13 | 16 | 17 |
| **AfC Band 8c** | 1 | 1 | 1 | 22 | 25 | 21 | 5 | 4 | 4 |
| **AfC Band 8d** |  | 0 |  | 8 | 17 | 18 | 1 | 2 | 5 |
| **AfC Band 9** |  | 0 |  | 2 | 2 | 2 |  | 0 |  |
| **Senior Manager** | 2 | 2 |  | 20 | 17 | 5 | 4 | 5 | 1 |
| **Medical Staff** | 406 | 366 | 449 | 350 | 317 | 340 | 190 | 328 | 313 |
| **All Staff** | 1175 | 1214 | 1507 | 5564 | 5623 | 5905 | 1189 | 1266 | 1254 |

## Disability

**Figure 7**

Figures for 2020.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Band/Grade** | **Not Disabled** | **Not Declared** | **Disabled** | **Grand Total** |
| **Apprentice** | 4 | 11 |  | 15 |
| **Band 1** | 1 | 0 |  | 1 |
| **Band 2** | 1268 | 603 | 70 | 1941 |
| **Band 3** | 584 | 207 | 37 | 828 |
| **Band 4** | 441 | 189 | 25 | 655 |
| **Band 5** | 992 | 468 | 55 | 1515 |
| **Band 6** | 884 | 363 | 59 | 1306 |
| **Band 7** | 601 | 270 | 30 | 901 |
| **Band 8A** | 153 | 50 | 7 | 210 |
| **Band 8B** | 76 | 38 | 3 | 117 |
| **Band 8C** | 16 | 10 | 0 | 26 |
| **Band 8D** | 14 | 9 | 0 | 23 |
| **Band 9** | 2 | 0 | 0 | 2 |
| **Medical Staff** | 428 | 663 | 11 | 1102 |
| **Senior Manager** | 15 | 8 | 1 | 24 |
| **Grand Total** | 5479 | 2889 | 298 | 8666 |

The UK Government’s Office for Disability Issues states that 16% of working age adults have a disability. 3.44% of staff employed by EKHUFT have declared a disability.

33.34% of EKHUFT staff chose not to declare whether or not they have a disability a 2% reduction since last year

In Bands 8c, 8d, and 9. There are no staff who have declared a disability.

# Promotion

This section compares headcount to promotion. Promotion is defined as, when a member of staff moves to a higher band.

## Race

**Figure 8**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Ethnicity** | **2017** | **2018** | **2019** | **2020** | **Workforce** |
| **BAME** | 7.29% | 10.59% | 12.12% | 13.87% | 17.39% |
| **Not Stated** | 8.33% | 16.47% | 8.33% | 8.76% | 14.47% |
| **White** | 84.38% | 72.94% | 79.55% | 77.37% | 68.14% |

In the Year ending 31 March 2017, 7.29% of those promoted identified themselves as BAME when BAME staff constituted 14.82%of our staff.

In The Year ending 31 March 2018 10.59% of those promoted identified themselves as BAME.

The proportion of BAME staff promoted increased by 3.3% 2018, which is significant improvement but which still needs to be a focus of activity.

The percentage of BAME staff in the Trust in 2020 has increased to 17.39% and the percentage who were promoted during the 20/21 has increased to 13.87.

## Sex

**Figure 9**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Sex** | **2017** | **2018** | **2019** | **2020** | **Workforce** |
| **Female** | 90.63% | 75.29% | 84.09% | 80.29% | 78.70% |
| **Male** | 9.38% | 24.71% | 15.91% | 19.71% | 21.30% |

Proportionately women were more likely to be promoted in 2017 and men more likely in 2018

## Working Pattern

**Figure 10**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Working pattern** | **2017** | **2018** | **2019** | **2020** | **workforce** |
| **Full Time** | 69.79% | 76.47% | 78.79% | 81.02% | 69.40% |
| **Part Time** | 30.21% | 23.53% | 21.21% | 18.98% | 30.60% |

During the last four years, Full Time (FTE =1) workers were promoted proportionately more than Part Time (FTE<1) workers.

In order to recruit and retain a diverse workforce there is a need to demonstrate that the organisation encourages flexible working for all. There is an indication

The distribution chart may be explained by the promotion data. The proportion of part-time staff above band seven is significantly below the average for the Trust.

The numbers of part time staff employed above Band 7 are proportionately low. If we are to retain re-employ and recruit we must be able to demonstrate that flexible working is not a bar to promotion.

## **Disability**

**Figure 11**

|  |  |  |  |
| --- | --- | --- | --- |
| **Disability** | **% Promoted 2017** | **% Promoted 2018** | **% in Workforce** |
| **Not Disabled** | 67.71% | 67.65% | 61.30% |
| **Not Declared** | 29.17% | 30.00% | 35.08% |
| **Disabled** | 3.13% | 2.35% | 3.62% |

# Sickness

In the following section, Worktime refers to the total time that staff are normally available for work shown as a percentage for each relevant group.

## Sex

**Figure 12**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Mean last 4 yrs.** | **Mean last 4 yrs.** | **2020** | **2020** |
| **Sex** | **Absence** | **Worktime** | **Absence** | **Worktime** |
| **Female** | 86.02% | 78.22% | 85.81% | 77.41% |
| **Male** | 13.98% | 21.78% | 14.19% | 22.59% |

During 19/20 Women accounted for 77.41% of the workforce availability and for 85.81% of sickness absence. Men are contracted to work for 21.78% but are responsible for 13.98% of absence. This pattern has existed since at least 2017 when this data was first reported.

This issue could be reviewed in relation to a menopause policy and the appropriate

## 

## Disability

**Figure 13**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Mean last 4 yrs.** | **Mean last 4 yrs.** | **2020** | **2020** |
| **Disability** | **Absence** | **Worktime** | **Absence** | **Worktime** |
| **Not Disabled** | 59.78% | 63.13% | 65.27% | 64.38% |
| **Not Declared** | 33.66% | 33.22% | 29.61% | 32.06% |
| **Disabled** | 6.56% | 3.66% | 5.12% | 3.56% |

This chart shows the ratio between available working time and sickness. Figures in excess of 1 indicate proportionally higher rates of sickness than work time availability. Figures below 1 indicate lower rates of sickness than availability

People who classified themselves as disabled in general took higher levels of sickness absence than those who did not. A high proportion of staff have chosen not to declare their status. This issue could be reviewed in relation to Disability Leave.

## Age

**Figure 14**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Age Band** | **% Absence 2017** | **% Worktime 2017** | **% Absence 2018** | **% Worktime 2018** | **% Absence 2019** | **% Worktime 2019** |
| **16 - 20** | 0.34% | 0.57% | 0.58% | 0.56% | 0.78% | 0.71% |
| **21 - 25** | 5.26% | 7.01% | 4.33% | 6.16% | 4.58% | 6.60% |
| **26 - 30** | 8.34% | 12.30% | 8.04% | 12.00% | 8.77% | 12.69% |
| **31 - 35** | 9.23% | 11.20% | 9.94% | 11.43% | 10.08% | 12.02% |
| **36 - 40** | 8.83% | 11.89% | 9.94% | 12.10% | 11.15% | 11.60% |
| **41 - 45** | 10.37% | 12.86% | 11.76% | 13.04% | 11.55% | 12.91% |
| **46 - 50** | 15.09% | 13.67% | 16.25% | 13.55% | 14.08% | 12.82% |
| **51 - 55** | 18.22% | 14.63% | 18.24% | 14.46% | 16.18% | 13.52% |
| **56 - 60** | 16.37% | 10.29% | 13.33% | 10.92% | 14.26% | 10.89% |
| **61 - 65** | 6.30% | 4.38% | 6.04% | 4.47% | 7.24% | 4.92% |
| **66 - 70** | 1.10% | 0.80% | 0.92% | 0.90% | 0.65% | 0.88% |

Those staff members over the age of 46 tend to take higher levels of sickness absence than those 45 years and younger. The highest levels of sickness absence were taken by those aged 46 to 60 years old.

**Figure 15**

## Ethnicity

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Ethnicity** | **Mean % Absence 2017-19** | **Mean % Worktime 2017-19** | **% Absence 2020** | **% Worktime 2020** |
| **BAME** | 9.06% | 15.24% | 10.58% | 17.22% |
| **Not Stated** | 12.66% | 13.46% | 12.16% | 14.25% |
| **White** | 78.29% | 71.30% | 77.26% | 68.53% |

Generally white staff take higher levels of sickness than black staff. This chart shows a comparison between the ratios of sickness to available work time. Positive numbers indicate a high ratio of sickness to work availability, negative figures indicate a lower ratio

# Other Diversity and Inclusion Activity

## NHS Employers Diversity and Inclusion Alumni

The Trust is an NHS Employers Diversity and Inclusion Alumni Member.

The diversity and inclusion alumni programme supports participating trusts to progress and develop their equality performance and to build capacity in this area. At the same time the programme provides an opportunity for partners to offer advice, guidance and demonstrations of good practice in equality and diversity management to the wider NHS. Partners are supported to achieve this via:

* Continuous improvement around equality and diversity within their own organisation.
* Raising awareness of what constitutes sustainable, outcome-focused improvement in managing equality and diversity across their region.
* Acting as a thermometer by which NHS Employers can determine the key issues facing the wider NHS, so that advice and guidance is relevant and up to date.
* Contributing to the development of emerging good practice and providing a channel for collecting case studies from which others can learn, within the wider context of NHS initiatives.
* Contributing to a broader understanding of equality and diversity, across both the NHS and the wider public sector, in the context of quality, innovation, productivity and disease prevention.

## Kent Surrey & Sussex (KSS) Diversity Leads Group

The KSS Diversity Leads Group is attended by our Head of Diversity and Inclusion. The KSS Leadership Academy is supporting the KSS Inclusion Network

1. A leadership development programme on leading, influencing and facilitating change - specifically for ED&I leads, or people leading on ED&I

2. A programme of mentoring for ED&I leads

3. Coaching for ED&I leads and focused Coaching for people from groups underrepresented at senior levels

4. Support for ED&I leads attending leadership development programmes

## enei

The Employers Network for Equality & Inclusion (enei) is the UK's leading employer network covering all aspects of equality and inclusion issues in the workplace. The enei e-quality standard is a pioneering benchmarking tool that helps organisations audit their diversity and inclusion performance across the 9 “Protected Characteristics” in the Equality Act 2010 as well other groups such as carers and ex-offenders.

East Kent Hospitals has recently re-joined the network and look forward to meeting with our account manager to discuss how enei can support the trust.

## Two Ticks and Age Positive

The trust displays the Disability Confident Employer logo. Disability Confident Employer is level 2 in the scheme and we are working with partners to achieve level 3, Disability Confident Leader. We also display the we’re supporting ‘Age Positive’ logos on all job adverts.

## Diversity and Inclusion (D&I) Steering Group

The D&I steering group chaired the Director of Human resources. Steering Group standing members include Chief Nurse and Director of Quality, Director of Communications and Engagement. The Chairs of our BAME Network, Disabled staff council LGBT+ Network and Staff Side Committees and a representative from Healthwatch Kent are also members.

The steering group provides leadership to the achievement of Equality Diversity and Inclusion in employment and service provision within EKHUFT

## Conscious Inclusion training

Susan Abbott Diversity and Inclusion Officer has developed a three hour Conscious Inclusion training Course that is being offered to all members of the Trust and has been very well received by everyone who has attended. All courses have been on hold during COVID but it is hoped to restart in summer 2021

## Managing Workplace Relationships Course

Susan Abbott, D&I officer has developed a Managing Workplace Relationships Course’. All courses have been on hold during COVID but it is hoped to restart in summer 2021

**Course Rationale**

East Kent Hospitals University NHS Foundation Trust is committed to transforming the Trust and making it a better place for both patients and employees. The Managing Workplace Relationships course will be offered by in the Summer 2021 and will play an integral part in this.

Aim of Managing Workplace Relationships

To provide managers with the opportunity to explore the skills and knowledge needed to manage diverse teams well.

Objectives: by the end of the half-day programme participants will:

* Appreciate some of the challenges of managing teams/individuals from a different culture or background
* Have an opportunity to have an open and honest discussion about workplace relationships in a safe environment
* Explore strategies for addressing the performance of individuals and teams.