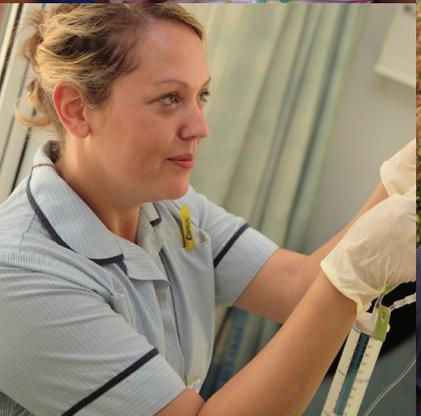


Equality and Diversity

ANNUAL REPORT 2006



Foreword by Director of Operations and Performance Management

“At St George’s, and central to how we work, is the belief that the patients must come first. We must promote respect for all citizens and those who come into contact with us. We must encourage our staff to act with integrity, value equality and diversity, listen to what people say to us, and strive for excellence.”

We are delighted to present our first Annual Diversity Report. The report summarises the progress we have made within our clinical services and employment activities with equality and diversity in mind.

In December 2005, the Trust collaborated with Wandsworth Primary Care Trust to share their Equality and Diversity Manager position. We also applied to the Charitable Trust Foundation and were successful in securing funding to recruit an Equality and Outreach Facilitator to support the work of the Manager.

The work of the Diversity team has focused on mainstreaming equality and diversity into our clinical services, making sure we provide patient centred care with diversity of needs in mind, building closer and meaningful relationships with local communities and working closely with our HR team to ensure that our employment activities were fair and equitable for all. Our Diversity work is largely underpinned by Human Rights legislation and a focus on achieving dignity and respect for all, irrespective of race, disability, gender, sexuality, age, deprivation, class or background.

St George’s employs a rich diversity of staff and one of our equality and diversity objectives is to ensure that all staff are given a fair opportunity at development and employment opportunities and that we achieve a representative and skilled workforce at all levels in the organisation.

The annual report sets out our objectives for Equality and Diversity, including what we have done so far, key achievements and what we are going to do in the forthcoming year. We have done some excellent work, but recognise there is more work to be done. At St George’s we constantly strive to make value for diversity, respect for people and equality for all a way of life.



Marie Grant
Director of Operations and Performance Management

What we said we were going to do by December 2006	What we achieved
To appoint an Equality and Diversity team.	<p>Appointment of Equality and Diversity Team</p> <p>Since December 2005, St George's has been sharing the Equality and Diversity Manager post with Wandsworth PCT. In July we appointed an Equalities and Outreach Facilitator (on a 2 year fixed term contract) to support our core Equality and Diversity work, but to also bring St Georges closer to the local communities we serve, by facilitating their involvement in services, decision making and planning activities.</p>
Re-structure the Diversity and Human Rights Committee	<p>Diversity and Human Rights Committee</p> <p>The Diversity and Human Rights Committee was re-structured in January 2006. The membership was reviewed and new terms of reference agreed. The committee now meets twice yearly. It offers strategic guidance and sets the direction and focus of our equality and diversity work. The committee is supported by three operational sub-groups- Health, Workforce and Procurement. The three groups are currently tackling race equality issues within a) clinical services, 2) workforce and 3) procurement. Their work will incorporate other equality issues, i.e. disability and gender.</p>
Race and equalities training for the Directors, the Board, Consultants and for Staff	<p>Equality and Diversity Training</p> <p>February and March, members of the Trust Board received Race equality awareness training. The revised Race Equality Scheme was approved by the board in March.</p> <p>May, started 'Equality in Employment' training sessions for Consultants commenced.</p> <p>June, sessions on equality and diversity were included in the Nursing Induction and Nursing Leadership programmes.</p> <p>November, held an equality and Diversity training session for F1 students.</p> <p>December, Senior Managers who were new to the Trust or newly promoted received diversity training</p> <p>Several team-based sessions were delivered this year, for nursing and clinical staff in Surgery, in the Neonatal unit and in Stroke.</p> <p>Corporate Induction Programme – equality and diversity is now part of the Trust programme</p>

	<p>Corporate Outpatients staff – equality and diversity training is mandatory for staff in this service. The whole day session includes data quality training with a focus on ethnicity monitoring</p>
<p>Develop an Impact Assessment (EIA) Template</p> <p>Build equality impact assessment process into the Guidance for Developing Policies</p> <p>Identify policies relevant to race and equalities duties and prioritise for assessments</p>	<p>Equality Impact Assessments (EIA's)</p> <p>February, developed a template for undertaking equality impact assessments (EIA). The EIA process is now built into the Trust's Guidance for Developing policies. As policies are impact assessed, key outcomes and findings are reported on St George's website http://www.stgeorges.nhs.uk/EDraceequality.asp</p> <p>March the Turnaround team conducted an Equality Impact Assessment (EIA) on its activities. The outcome was a satisfactory assurance that the programme has not inadvertently had any material detrimental impact on equality and diversity. However, a number of developmental opportunities were highlighted which have made Turnaround consider more carefully any foreseeable impacts on staff welfare, Trust diversity, and on the patient experience at St George's. The Turnaround Team will follow up on the EIA outcomes early next year and hope to demonstrate that they have put into practice many of the recommendations made in March.</p> <p>EIAs have also been built into the Trust's Business Planning process.</p>
<p>Review and Update the Trust's Race Equality Scheme</p>	<p>Review and update of the Race Equality Scheme, 2006 – 2008</p> <p>March, Race Equality Scheme and action plans for 2006 – 2008 were updated and published. The three working groups, Health, Workforce and Procurement are taking forward actions identified in the Scheme.</p> <p>The Health sub-group are reviewing ethnicity data within A&E and will be assessing how effectively the service is meeting the needs of local BME communities. The group are also undertaking an evaluation of the Interpreting services in the hospital and are looking to develop partnership work with St George's University Hospital.</p> <p>The Procurement sub-group, are working closely with Mosaic (a project established by the Department of Health in early 2004 to promote race equality through and in procurement) to embed race equality considerations into our procurement activities.</p> <p>The Workforce group are working closely with BME staff</p>

	<p>groups to identify reasons for the lack of representation of BME staff in senior management positions and to identify developmental needs within this group. A series of focus groups with nursing staff will inform this process.</p>
<p>Develop a Disability Equality Scheme</p>	<p>Disability Equality Scheme 2006 – 2009.</p> <p>The Trust's Access Committee, made up of disabled patients, staff and users, and representatives from service areas have responsibility for promoting equality for disabled people. The Committee reports into the Director for Estates and Facilities who is also a member of the Diversity and Human Rights Committee. The Access Committee led on the development of the Disability Equality Scheme and undertook a consultation event in October with disabled people. The Disability Equality Scheme was developed and published on 4th December 2006, as required by Disability legislation (2005). The scheme will be implemented in 2007 and monitored by the Access Committee and progress reported into the Diversity and Human Rights Committee.</p>
<p>Integrate equality and diversity considerations into clinical services</p> <p>Evaluate and assess the impact of Maternity Services on patients, users from different racial backgrounds</p> <p>Evaluate and assess the impact of the Trust's Interpreting Services</p>	<p>Integrate equality and diversity considerations into clinical services</p> <p>September, an evaluation of the impact of current community midwifery services on diverse patient groups, in particular those from different racial backgrounds took place. The assessment revealed excellent practices within our Community midwifery services, including good patient centred care. The women told us 'how the midwives were considerate and responsive to their needs'. The assessment highlighted some gaps in the service. The Director of Midwifery developed an action plan to address the issues identified, this was approved by the Diversity and Human Rights Committee and a report on progress will be presented to the Committee in March 2007.</p> <p>The Equality and Outreach Facilitator works closely with one of the Senior Nursing Managers and the lead for Essence of Care, to undertake Observations of Care within clinical settings. The observations enable us to identify issues relating to respect and dignity and to draw up an action plan.</p> <p>The Equality and Diversity team continue to raise the profile of their work within clinical services namely in Breast Screening, GUM and within Sickle Cell and Thalassaemia.</p> <p>The Facilitator has begun to develop link with different people in clinical areas, and is bringing communities in to work closer with services. These links will lead to greater improvements in services we provide to diverse communities.</p>
<p>Develop Equality and Diversity web-pages</p>	<p>Equality and Diversity Web Pages</p>

	<p>In November, we developed and successfully launched the Equality and Diversity web pages. This is an informative and engaging site and will use this site to report on all our core activities.</p> <p>The site has links to diverse patient information and resources, including NHS language support sites. Link : http://www.stgeorges.nhs.uk/equalitydiversity.asp</p>
<p>Develop partnership working with Wandsworth PCT and other statutory agencies</p>	<p>Partnership Work</p> <p>In October and working in partnership with the School of Nursing and Wandsworth PCT, an equality and diversity training session was delivered at a multi-disciplinary training event held in Queen Mary's. The session also had some input from a Voluntary Sector based group - the Director of Wandsworth Community Empowerment Network delivered a session on Community Awareness and Engagement.</p> <p>In conjunction with Wandsworth PCT, we translated the Helpline and Support contact numbers from the maternity notes into the 9 most requested languages in Wandsworth.</p> <p>We are now working with Wandsworth PCT to improve ethnicity monitoring in St George's. An email message was sent by the Chose and Book lead at the PCT, to all GP practices in December, encouraging them to provide ethnicity monitoring data, when referring patients to the hospital.</p> <p>The Equality and Outreach Facilitator is developing links with community health workers in Wandsworth and in Merton, to share learning and to identify issues which affect the communities who use our services.</p> <p>Through the joint post and close working relationship with Wandsworth PCT, we have started to improve communication around equality and diversity and continue to share best practice.</p> <p>The Diversity team work closely with the Patient and Public Involvement team. Joint visits are made to community groups, information and resources are shared on an ongoing basis.</p>
<p>Build better and meaningful relationships with local communities – through events and patient involvement activities</p>	<p>Relationships with Local Communities</p> <p>Through the Equality and Outreach Facilitator, we have successfully made contacts with local communities and voluntary sector based organisations in Wandsworth and Merton. Most of these groups work with marginalised communities. A focus of St George's outreach work is to engage with communities and groups who do not have a high visibility in the local health sector.</p> <p>On 17th January 2007, the Trust will host a 'Building</p>

	<p>Communities Workshop'. The aim of the event is to build meaningful relationships with local communities, and to develop better and creative ways of involving and engaging them in our activities. A full report of the event will be made available in March.</p> <p>The Equality and Outreach Facilitator is involved in a number of committees within the Trust. The aim is to integrate equality and diversity considerations into how we plan and make decisions in the Trust. The Facilitator is involved in the Nutrition Committee, Patient and Public Involvement Committee, NSF for Older Persons Group and makes ad-hoc visits to other committees, groups and clinical service areas to feedback on comments and issues raised by communities.</p> <p>In November, the Facilitator attended the AGM for Wandsworth Multi-Faith network and through this has developed good links with faith communities. A faith and culture guide to support patient care was developed and reviewed with the assistance of the Wandsworth Multi-Faith Forum and the Chaplaincy service. This has been made available as an electronic resource for staff within the Trust. The guide is also being used by Wandsworth Primary Care Trust.</p>
Other Achievements	<p>PATIENT AND PUBLIC INVOLVEMENT (PPI) AND PATIENT ADVICE AND LIAISON SERVICE (PALS)</p> <p>The Trust's PPI and PALS team involve disabled people and groups within the Trust's activities and decision making processes. A representative from PALS sits on the Trust's Access Committee which ensures that the voices of disabled people are heard at all times. The membership of the various Trust groups and committees includes disabled lay representatives. These include the Access Committee, the Trust's Patient and Public Involvement Group and Patient Information Group.</p> <p>The PALS/PPI team have purchased a Simulation Package from Visual Impairment North-East, this consists of several sets of spectacles, which when worn, can give some idea of what a visually impaired person may see. They help to identify some of the problems experienced by the visually impaired and will be used during customer care training. A video which is used by Moorfields Eye Hospital during their induction called "Seeing it our way" where people with visual impairments share their experiences has been purchased and will be used in the Customer Care Training programme.</p> <p>The PALS/PPI team is also making a bid to the Charitable Foundation for funds to purchase a tape recorder/copier which will be used to record meetings, minutes etc so that our lay representatives who have hearing difficulties can be sent</p>

tapes of these.

The Trust has recently appointed a Patient and Public Communications Project Manager part of whose role it will be to go out into the community and make links with and involve local interest groups.

CANCER SERVICES

In 2005/6, the cancer team at St George's Hospital invited cancer patients and their carers to join in three projects. A total of 333 patients and 19 carers took part in focus groups, completed questionnaires or participated in a colorectal cancer patient meeting. A separate focus group was held to seek the experiences of cancer patients from black and minority ethnic group backgrounds. Patients told us they appreciate the high quality service provided by skilled, dedicated and caring staff. Following this project, action plans were developed by each cancer team and many of the identified actions have been implemented, including a project to ensure we always offer patients a copy of their GP letter.

MATERNITY SERVICES

In 2005 The Tamil Health Advocacy Service was set up with support from local PCT's. The Midwives identified a need for this service in 2003 because of language barriers and cultural differences which they encountered. Since the introduction of the Tamil Health Advocacy Service, focus groups have been held within the local community to explore the service needs from the women's point of view, issues that are important to them and how their needs can be met in the future. This has been a very successful service, an evaluation report about the service will be available soon.

SAFEGUARDING ADULTS

Safeguarding Adults is now the term used for Adult Protection and is aimed at safeguarding adults who are vulnerable by reason of age, illness, capacity or disability. At St George's we have developed systems and policies to ensure that vulnerable adults are protected and that any incidents of abuse are reported, investigated and action taken as appropriate. Intensive training has taken place in elderly care at ward level, with all Ward Sisters and Matrons and also to the Consultants and junior doctors. Staff have been made aware that a number of actions can constitute abuse and that patients must be listened to and believed. Training also takes place in Accident and Emergency to front line staff as often cases of abuse are picked up when patients attend A&E.

All staff attending the Trust Induction Programme receive a short session on Adult Protection. In addition there is a half

day programme for more in depth training for managers and front line staff run by the Education and Training Department.

Partnership Working

The Deputy Director of Nursing is a member of the Partnership Boards for Adult Protection at both Merton and Wandsworth Councils and St George's has contributed to the development of joint policies. The Risk Management team are working to set up a data filed on DATIX (risk management data base) so that the Trust can closely monitor all allegations of abuse and track the action taken.

LEARNING DISABILITY

A Learning Disability Project was completed in 2005 and it demonstrated that there needed to be some improvements to health access for patients with learning disabilities, who attend the Trust, it also highlighted areas of very good practice. We have worked with a local charity that support people with learning disabilities over the past year and they have provided training to all nurses on the Induction Programme which has been well evaluated. Training has been provided for all Nurse Practitioners in the Pre Admission Clinics in surgery, so that elective surgical admission can be planned with the patient and their carer/key worker.

We plan to bid for some funding in the coming year to involve people with learning disabilities in re auditing some aspects of our services to see if they have improved.

PROMOTING SCIENCE RELATED CAREERS TO PAKISTANI AND BANGLADESHI CHILDREN – SOUTHFIELDS COMMUNITY COLLEGE

In 2006, the Trust supported a science related programme organised by Southfields Community College to develop further interest in science related careers amongst black and minority ethnic students. The programme which was supported by the General Manager for Neurosciences and Trauma and Orthopaedics, generated a lot of interest amongst staff within the unit. In July two teachers from the college had placements within different departments - the teachers shadowed a series of staff from science based jobs, these included a theatre technician, a plaster technician, a radiographer, a physiologist. In September, the Trust became involved in a Smart Mentoring initiative, where children from the college logged onto a secure website and were given an opportunity to ask online questions to a series of technician staff based at the Trust. Finally in late autumn, students visited the Trust where they were offered a series of interactive sessions using amongst other things, plaster casts. This was a hugely successful programme and the

	teams who hosted the teacher placements were rewarded with an award at the College's annual awards evening.
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Priorities for 2007

- To organise a 'Building Communities Event' in January 2007
- Take forward the Disability Equality priorities and actions
- Advance the race equality priorities and evaluate its impact on different groups
- Continue to review how effectively the clinical services recognise diversity and promote equality, with a focus on Stroke, Sickle Cell and A&E.
- Work with Corporate Outpatients team to mainstream equality considerations into how the outpatient service is organised and delivered
- Develop and publish a Single Equalities Strategy
- Mainstream Equality Impact Assessments into the work of committees, the Board, Management Team and Trust Executive Group
- Develop Key performance Indicators for Equality and Diversity
- Organise a Diversity and Equality event for staff
- Continue to improve workforce and service monitoring, in particular by age, gender, disability, ethnicity and publish results annually
- Work with the Communications department to improve communication on equality and diversity
- Continue to improve the Equality and Diversity web-pages
- Continue to engage with local communities and facilitate their involvement within decision making in the Trust
- Develop closer working relationships and partnerships with local PCT's to ensure that St George's continue to improve services with equality and diversity in mind,
- Follow up on actions developed by the Maternity Services as a result of the Diversity assessment in 2006, and do further equalities work in the post-natal area.



ANNUAL DIVERSITY REPORT DECEMBER 2006 HUMAN RESOURCES

Introduction

This report summarises the main actions that the Human Resources Department has undertaken during the period of 1 April 2006 - 31 March 2007, to promote equality of opportunity for all diverse groups and eliminate unlawful discrimination within the Trust.

During this period, the Trust's Equality and Human Rights Committee has continued in its role to lead on diversity issues within the Trust. The Group, has been chaired by the Director of Operations since March 2006.

Over the last 12 months, the HR Department has worked towards achieving a number of national targets to the benefit of all staff. Progress has included assimilating all staff onto the NHS Agenda for Change pay structure, achieving Improving Working Lives Practice Plus Status, introducing the NHS Knowledge and Skills Framework, implementing the national NHS Electronic Staff Records (ESR) System and also the NHS E- Recruitment System.

Areas of Achievement

Agenda for Change

All staff have now been assimilated onto AFC, a fair system of pay for NHS employees which supports modernised working practices and equal pay for work of equal value. The HR department have implemented a process for reviewing any concerns that employees may have regarding their banding or the AFC process.

IWL Practice Plus

The Trust was awarded Improving Working Lives Practice Plus accreditation in December 2005, following a rigorous validation process. Equality and Diversity is a key IWL area, in which the Trust achieved top scores overall. There were a lot of positive comments received from the IWL Validators and an action plan has been developed to take forward identified areas for development, for example, enhancing the representation of BME staff in senior management positions. (The table below shows the Nursing and Midwifery staff

group). This work is now underway, and is being done by the Equality and Diversity Workforce Working Group.

Band	BME	White	unknown	% BME	% white
5	535	208	46	67.8%	26.36%
6	262	250	34	52.94%	45.79%
7	76	180	16	27.94%	66.18 %
8	3	53	3	5.6%	94.3%

Implementation of E Recruitment

The Trust began using E Recruitment – the NHS electronic recruitment system in May 2005 and this has enabled job opportunities at St George’s to be widely accessible to all diverse groups.

The system supports the elimination of any potential bias in the recruitment process; for example, managers do not have access to applicants’ names or any other personal details prior to and at the point of short-listing. Disabled applicants are highlighted to the recruiting manager by the recruitment team to ensure that the applicant is guaranteed an interview, if they meet the minimum criteria.

The E Recruitment system has enabled more robust equality monitoring to be carried out throughout the recruitment cycle, right up to appointment. This will enable the Trust to identify any areas of concern and put strategies in place to address any required action.

Implementation of ESR

The Trust was one of the early implementers of the Electronic Staff Records (ESR) in August 2005. To date all staff employed by the Trust are inputted onto the system for Payroll and Human Resources purposes. The system has brought about a vast improvement in the way workforce information is maintained and monitored. The Trust is now able to report on new areas like the NHS KSF/appraisals and training, in addition to the general monitoring information. All staff have the responsibility to positively promote equality written into their job descriptions and KSF outlines. The KSF outlines provide a comprehensive, fair and consistent support for career development and progression.

Workforce

The Trust employs a diverse workforce, which is representative of the population it serves. Currently Black and Minority Ethnic (BME) staff make up 41% of the total workforce, which is significantly more diverse than the local population (22.05% BME population in Wandsworth - 2001 Census). The Trust has got a BME/Staff Support Network, however, membership and the activities have reduced over the past year. Action is now being taken, by the Workforce group to identify whether there is a demand for such a network group specifically for BME staff or for a staff network that is open to all staff in the Trust.

Fairness and Flexibility Training

Throughout the last year the HR department has run training courses on the following modules

- Equality and Diversity
- Bullying and Harassment
- Sickness and Disability

- Recruitment and Selection
- Balancing Work and Personal Life

Equality and Diversity is the first module of the Fairness and Flexibility (F&F) programme which is mandatory training for managers. This has helped raise awareness amongst Managers and staff alike. It has also enabled managers gain a better understanding of Trust policies and procedures. This ensures that fairness and consistency prevails within the organisation and also raises staff morale and motivation which has a direct impact on patient care.

A new training session, Performance Management has just been added to the F&F modules to support managers in their role in developing staff within their departments and to enable a better understanding of the Trust Capability policy.

The department has trained over 300 managers over the last year. In addition, the HR staff continue to run bespoke training for their designated service areas, attend Trust Induction, run an Equality and Diversity session on Nurse & HCA Induction training.

LEGISLATION

Age

Age Discrimination Legislation came into effect in October 2006 and the HR department has reviewed the Retirement Policy and procedure, this has been circulated for comments and will be discussed at the next HR Advisors meeting in December. Other related policies that are currently under review to ensure compliance with the legislation include the Recruitment and Selection Policy and Procedure. Equality Impact Assessments will be conducted on all new and revised policies.

Disability

The HR lead for Disability, worked closely with the Equality and Diversity team to develop the Employment section for the Disability Equality Scheme. HR have now set up a database for recording the number of “reasonable adjustments” requested and those which have been implemented

The Trust has adopted a number of initiatives to support the recruitment and retention of disabled people and has continued working towards meeting the commitments of the two ticks symbol. The Trust continues to work with a number of specialist organisations such as Remploy Interwork and Generate to promote the recruitment and retention of disabled people.

Gender

The Gender Equality duty comes into force in April 2007 and the Trust is in the process of setting up a working party to produce and publish an equality scheme identifying gender equality goals and an action plan. The HR department have started to look at the Gender Equality duties for employment, for example, the return rate of employees from maternity leave. This involves monitoring and updating the maternity database on a regular basis and producing reports on a quarterly basis to the HR Advisors meetings to identify any areas for improvement.

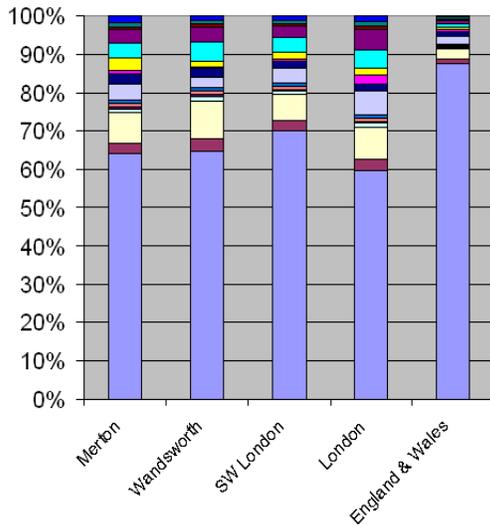
All 3 Divisional HR Managers have attended Equality and Diversity Conferences recently and have reported back to the team. This enables shared learning and has as ensured that the department is kept informed of new legislative duties and the practical implications.

SMART – Time and Attendance Project

The Smart – Time and Attendance project is another way that the Trust is looking at ensuring that there is fair treatment for all in terms of employment practices across the Trust. The system will be piloted in 13 departments across the Trust by early 2007 and the plan is that it will be rolled out to the rest of the Trust later in the year. The system, a security system will record time and attendance at work, covering all forms of absence e.g. sickness, carers leave, etc. as well as overtime, on-call, time off in lieu etc. The SMART system has the capacity to run reports and this will be of great benefit to line managers ensuring equality, consistency and fair treatment for all across the Trust.

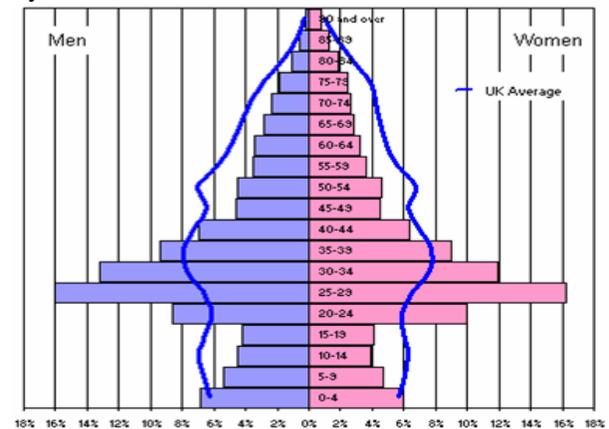
APPENDIX A OUR LOCAL POPULATION IN WANDSWORTH

Ethnic origin in Wandsworth, Merton, South West London, England and Wales (2001)



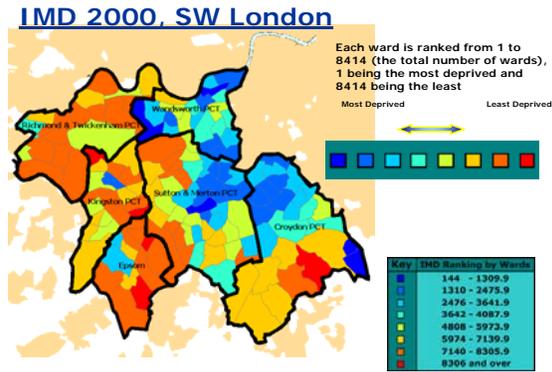
Age and Sex - London Borough of Wandsworth

Percentage of the population in Wandsworth by age and sex, compared with the national average in England and Wales (represented by the blue line).



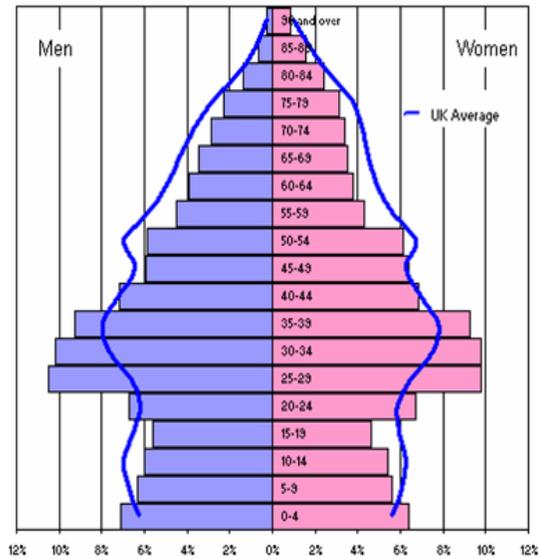
Wealth

South West London also has large variations in the level of deprivation, with people in the local community ranging from the most affluent to the most deprived in the country (as demonstrated in the chart below).



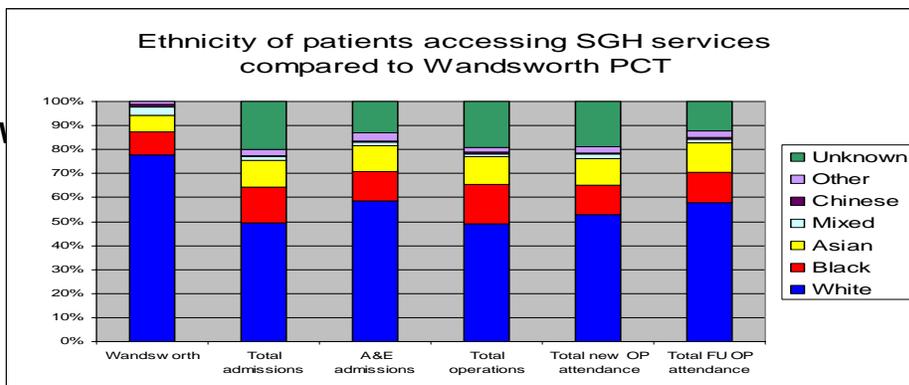
Age and Sex - London Borough of Merton

Percentage of the population in Merton by age and sex, compared with the national average in England and Wales (represented by the blue line)



APPENDIX B

Profile of Patients who use St George's Services, by ethnicity



APPENDIX C

Top most requested languages at St Georges

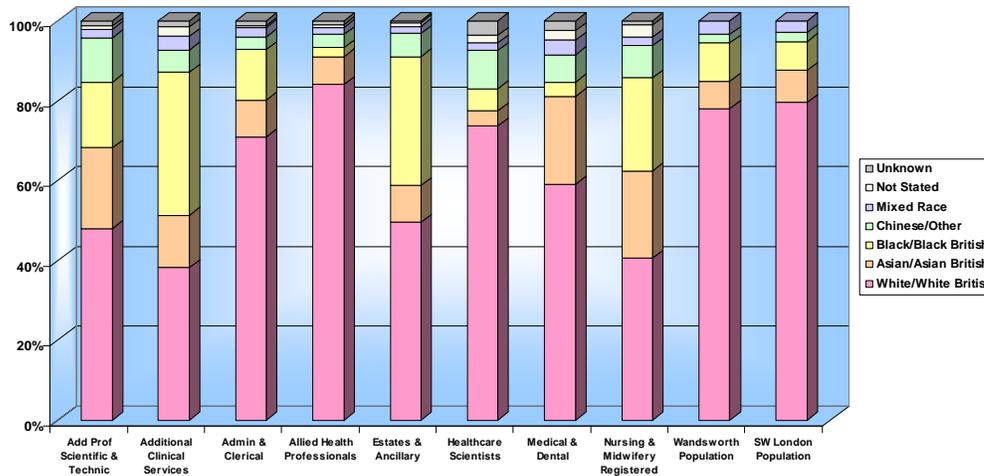
St Georges provides interpreting and translation support. This service is monitored by the Patient Advisory Liaison Service (PALS). The top 9 most requested languages in St Georges are

- Urdu
- Gujarati
- Somali
- Polish
- Arabic
- Bengali
- Tamil
- Farsi
- Spanish

APPENDIX D

Workforce Monitoring by Ethnicity, Age and Gender (2006)

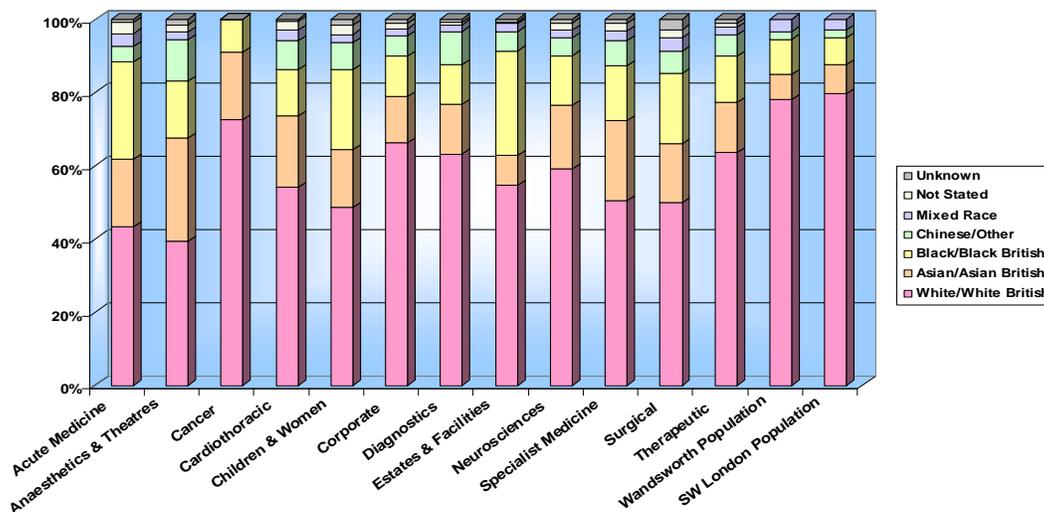
Current Workforce Profile by Ethnicity



Ethnicity by Staff Group

This chart shows the current ethnic profile of our workforce by staff group. The last two bars show the ethnicity of our local population for comparison. Most staff groups are more ethnically diverse than our population, with the exception of Allied Health Professionals.

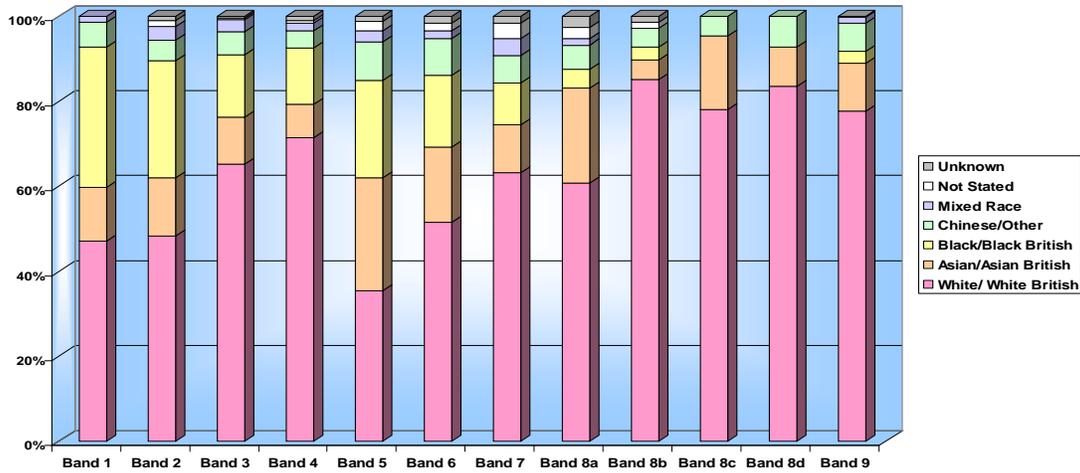
2) Ethnicity by Directorate



This chart shows our workforce ethnicity by directorate. All directorates have a percentage of staff from minority ethnic background. This is higher than that reported in the 2001 census for our local area. The Trust has a BME network and a Multi-Faith group and is

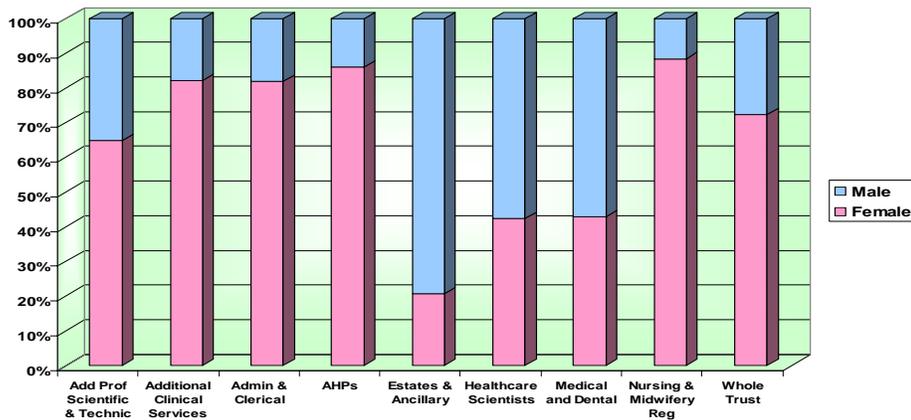
currently working on a project looking at developing a representative workforce at all levels and in all areas of the organization.

3) Workforce Salary Breakdown by Ethnicity



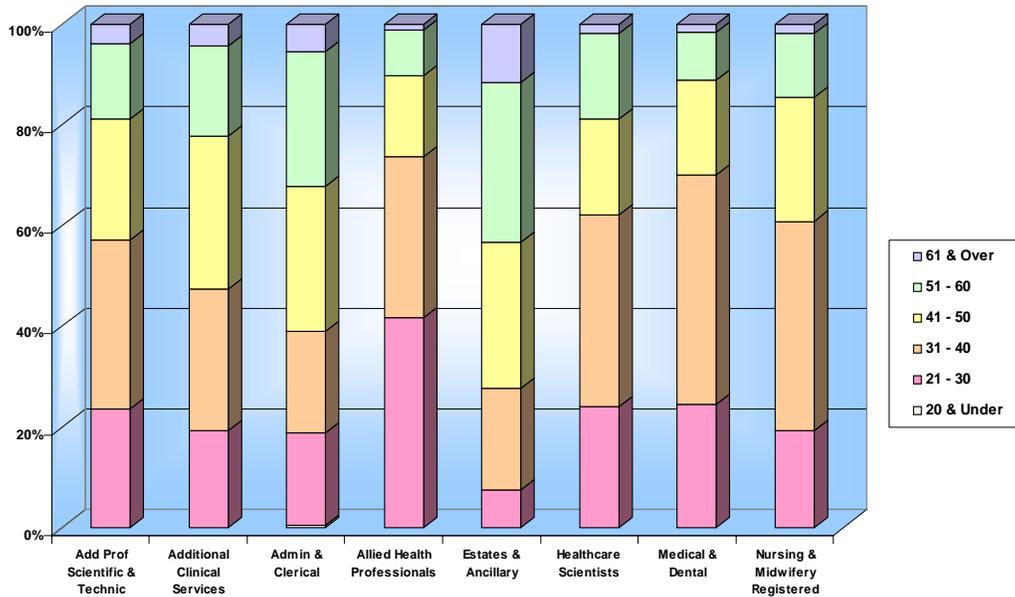
This graph illustrates the percentage of different ethnic groups which fall into each agenda for change pay band (all staff). Our staff who are not paid under agenda for change have been included in the band which accurately reflects their current salary. All staff earning over £88K are included in the band 9 category. The chart shows a high percentage of BME staff in Bands 1 – 6, this then drops in bands 7 – 9.

4) Workforce Gender



The graph above shows the gender profile of our workforce in different staff groups. At present just over 70% of our staff are female. The staff groups with the highest percentage of female employees are Nursing & Midwifery and Allied Health Professionals. The Estates and Ancillary staff group currently have the highest percentage of male staff in the trust. The HR department have already set out a number of action points to work towards improving the gender imbalance in the organization. The action plan will be published as required under Gender Equality duties.

5) Workforce Age Profile



This graph shows the percentage of staff working in different age bands by staff group. The staff group with the highest proportion of employees approaching retirement is currently Estates and Ancillary. The Trust has recently reviewed the Retirement policy and is looking at number of succession planning initiatives.

6) Recruitment Activities

	Nov 05 to Oct 06			
	Applicants	Shortlisted	Appointed	Success Rate*
White	5885	915	253	27.65
Asian	8945	362	65	17.96
Mixed	651	69	8	11.59
Black	4929	502	77	15.34
Chinese	345	25	6	24.00
Other	1430	99	31	31.31
Not stated	279	37	17	45.95
Total	22464	2009	457	22.75

*Appointed staff as a percentage of those shortlisted

From November 2005 to October 2006 there were 886 vacancies in the Trust. The table above shows the ethnic groupings of those who applied, those who were shortlisted and then those who were subsequently appointed to posts. The Trust uses the NHS Jobs Website to advertise most vacancies so they can be accessed by members of all ethnic groups.

The Trust appears to attract a very high number of applications from BME communities. Future monitoring will need to show positions to which the different groups apply for.

	Nov 05 to Oct 06			
	Applicants	Shortlisted	Appointed	Success Rate*
Male	9136	520	107	20.58
Female	13273	1479	350	23.66
Not Stated	55	10		
Total	22464	2009	457	22.75

This table gives a breakdown of the gender of applicants to advertised posts. The Trust has over an 70% female staff group and this chart shows a high proportion of applicants from this group, and they are twice more successful than male colleagues. Again future monitoring must show positions to which the different genders apply for, to help us address gaps or likely inequalities. This should be an action within the Gender equality scheme.

7) Appraisals

This information will be available shortly.

8) Leavers (Nov 2005 – October 2006)

These tables show the numbers of leavers from St. Georges by ethnicity, gender and age. These are then compared to the percentage of staff in these groups who are currently employed.

Leavers by Ethnicity

Ethnicity	Number of Leavers	% Leavers	% Staff
White/White British	681	53.88	53.76
Asian/Asian British	216	17.09	16.87
Black/Black British	122	9.65	16.92
Chinese/Other	64	5.06	6.79
Mixed Race	24	1.90	2.48
Not Stated	61	4.83	1.82
Unknown	96	7.59	1.36
Total	1264	100	100

This chart shows a much lower leaving rate for BME staff when compared to those from white backgrounds. Again future monitoring must indicate areas within the Trust where there is high turnover to enable us to identify and address possible issues in those areas.

Leavers by Age

Age	Number of Leavers	% Leavers	% Staff
Under 20	6	0.47	0.47
21 – 25	148	11.71	6.85
26 – 30	394	31.17	16.95
31 – 35	287	22.71	18.37
36 – 40	156	12.34	15.03
41 – 45	92	7.28	12.77
46 – 50	56	4.43	11.16
51 – 55	41	3.24	8.16
56 – 60	28	2.22	7.53

61 – 65	45	3.56	2.42
66 – 70	11	0.87	0.27
Total	1264	100	100

This chart shows that we have more staff in the 26 – 45 age bracket leaving the Trust. Wandsworth’s Public Health Report indicate that we have a young, mobile population and the chart clearly supports this evidence.

Gender	Number of Leavers	% Leavers	% Staff
Male	465	36.79	27.60
Female	799	63.21	72.40
Total	1264	100	100

Male employees in the Trust make up 30% of the staff group, and this figure shows there is high turnover, amongst a staff group, which is under-represented. This is an action which must be followed up in the Gender Equality Scheme.

9) Capability Cases Capability Cases Jan – Dec 2006

Gender M/F

Outcome	White	Asian	Black	Chinese	Others	Mixed	unknown
Action Planning	1M		1M 1F				
Stage 1			1F 1F				
Stage 2		1F			1F		
Hearing					1F		
Dismissal							

- There were a total of 8 capability cases involving 2 male and 6 female members of staff.
- 7 members of staff are at various stages of the capability procedure, with one member of staff invited to attend a hearing.
- A Performance Management module has been added to the Fairness and Flexibility Training as it was discovered that many managers were not managing underperformance within the Trust. The new module which has already been piloted amongst a number of managers has been well received and would enable managers have a better understanding on the Trust policy for managing performance and ensure that there is consistency in the way staff are supported and managed throughout the Trust.

10) Disciplinary Cases

Ethnicity	2005	Gender		2006	Gender
White	9	F		9	M
	4	M		3	F
Asian	1	M		1	F
Black	5	F		7	F
	4	M		2	M
Chinese					

Others	1	F			
Mixed					
Unknown				2	1M 1F
Total	24			24	

- There were a total number of 24 disciplinary cases in both years and almost a fair split between both sexes.

2005

Outcome							
	White	Asian	Black	Chinese	Others	Mixed	unknown
No Action		1					
Informal Warning			3		1		
1st Formal Warning	4		1				
Final Formal Warning	4						
Dismissal	2		5				

2006

Outcome							
	White	Asian	Black	Chinese	Others	Mixed	unknown
No Action							
Informal Warning			2				
1st Written warning	2		1				
Final Written Warning	2		1				1
Dismissal	4	1	4				

- The majority of disciplinary cases seem to involve staff from white and black ethnic groups.
- There are a couple of cases still awaiting an outcome or awaiting an appeal hearing and this could account for the slight difference in the total number of cases and the outcome figures.
- Whilst it seems that there was a higher number of black staff dismissed in 2005 this seems to have balanced out between the two groups in 2006
- There was a Fairness & Flexibility (F&F) training drive in 2004/2005, whereby F&F training became mandatory for all managers this was to ensure that all managers understood their responsibility in relation to Equality and Diversity and how to apply Trust policies fairly. Prior to this period, there had been an average of 5/6 Employment tribunal cases per year. This year, 2006, has seen a significant reduction in the number of Tribunal cases and this could be attributed to the raising of awareness through F&F training, KSF briefing sessions and other developmental opportunities provided throughout the Trust.

11) Grievance Cases

Ethnicity	2005	Gender		2006	Gender
White	2	F		2	M F
Asian	1	F		1	F
Black	3	F		2	F
Chinese					
Others	3	F			

Mixed					
Unknown					

12) Harassment and Bullying Cases

Ethnicity	2005	Gender		2006	Gender
White	2	1M 1F			
Asian	1	F			
Black	1	F		3	F
Chinese					
Others	3	F			
Mixed					
Unknown					

- There has been a decrease of over 30% in grievance cases in 2006
- Bullying and Harassment cases have reduced to less than half the number of cases in 2005
- This is in line with the Staff survey results indicating that the Trust is considered a fair employer
- This could also be due to the F&F training as there is a module on Bullying and Harassment which has helped raise awareness amongst staff /managers but has also assisted managers in dealing with and managing such issues in a fair and professional manner in line with legislation and best practice.

13) Sickness Cases

2005

Outcome	White	Asian	Black	Chinese	Others	Mixed	unknown
Redeployment							
Review Extended	2F						
Ill Health Retirement							
Dismissal	2M 2F	1F					

2006

Outcome	White	Asian	Black	Chinese	Others	Mixed	unknown
Pending							1F
Redeployment							
Review Extended	1M						
Ill Health Retirement	2F						
Dismissal	1F						1F

- Majority of the sickness cases in both years 2005/2006 have involved staff of white ethnicity.
- There are a higher number of sickness cases involving female staff than male staff
- The outcomes show a reduction in the number of dismissals in 2006. (5 to 2)

December 2006

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