

Workforce Equality Monitoring Report 2017/2018

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Executive summary

This report is produced annually to help us meet the requirements of the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012 (as amended).

Since the last reporting period (2016/17):

- the organisational headcount has increased by 4.9%, giving us an overall headcount of 426 staff as at 31 March 2018.
- the number of staff employed on a fixed term contract has increased by 1.7%.
- there has been a 1.1% increase in the number of 20 to 34 year olds we employ.
- staff turnover has decreased by 0.2%, and overall 1% since 2015/16.
- the number of staff identifying as having a disability has increased by 1.09%.
- there has been a slight increase in the percentage of staff that identify as minority ethnic.
- the gender split remains broadly the same 76.1% female staff and 23.9% male staff.
- the overall number of applications received decreased by 26.17%.
- there was 1.2% increase in the number of 20 to 24 year olds shortlisted for a job.
 The number of 20 to 24 year olds subsequently offered a job also increased by 0.5%.
- the number of successful applicants that identified as having a disability increased by 1.4%.
- the number of applications received from male applicants increased by 5.9%.
- our mean pay gap has reduced by 1.65%, giving a mean gap of 19.87%.
- our median pay gap has significantly reduced by 10.76%, giving a median gap of 13.42%. The reduction is largely attributable to the more even gender split within the Senior Manager and Clinical pay bands.
- the number of unknown or declined to disclose responses has increased across various protected characteristic groups. Data is collected twice, firstly during the application process and then again upon appointment. It has been noted that generally upon appointment, less information is provided.

1 Introduction

- **1.1** Healthcare Improvement Scotland is an organisation with many parts and one purpose better quality health and social care for everyone in Scotland.
- 1.2 To achieve this, we must ensure that we employ people who reflect the values of our organisation. It is therefore important that we recruit and retain a workforce that is committed to working together to understand and meet the needs of the diverse Scottish population.
- 1.3 As an organisation that fully embraces equality and values diversity, when recruiting, we seek to ensure that no barriers exist for people wishing to apply to work with us. Where an analysis of our workforce data has shown that certain groups of people are under-represented within our organisation, we have taken positive action to encourage applications from these groups. This helps us to attract applications from the widest talent pool available, and supports our aim to employ a workforce that reflects the diversity of the population.
- 1.4 Our people are extremely important to us. They make us who we are and, therefore, we are committed to making their experience of working with us as good as it possibly can be. We promote values intended to create a culture that encourages behaviours that will help us maintain a working environment in which everyone feels included, respected and valued.
- 1.5 To support our equality and diversity ambitions and to ensure compliance with the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012 (as amended), we publish an analysis of our workforce equality monitoring annually. This report provides information disaggregated by the protected characteristics¹ in relation to the following:
 - recruitment and promotion
 - numbers of part-time and full-time staff
 - pay and remuneration
 - training and development
 - · return to work of women on maternity leave
 - return to work of disabled employees following sick leave relating to their disability
 - appraisals
 - grievances
 - · disciplinary action, and
 - dismissals and other reasons for leaving.

¹ age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief and sexual orientation

2 Definitions and data quality

- **2.1** The data within the report refers to Healthcare Improvement Scotland (also referred to throughout the report as 'the organisation').
- 2.2 The data in this report reflects the position of the organisation as at 31 March 2018. At this time we employed 426 members of staff.
- 2.3 Where available, data for previous reporting periods has been included to show the year on year changes and where external data comparators were available, we have noted these within the data tables. When data is not available or the comparator data sets are not a direct read-across, it will be noted in that particular section. It is noted that some data consistency issues may exist across national documents and systems (currently the NHS Application Form and Staff Engagement Form are national documents that populate national systems). Healthcare Improvement Scotland has its own version of the application form which was developed to fit our automated recruitment management system (RMS).
- 2.4 Data used within the report is drawn from various sources: e:ESS (national employee self-service system), RMS (a bespoke Recruitment Management System) and e:KSF. External benchmarks are also shown in the report using Scottish Census data.
- 2.5 Data is collated twice. The data requested at the point of job application is recorded on RMS and informs our recruitment data. Data is requested again at the point of engagement on payroll forms and is recorded on e:ESS, and informs our workforce data. There are inconsistencies between data provided at these two points. For example, initial analysis suggests that there is more data supplied at the recruitment stage rather than at the engagement stage, once a job has been offered. The introduction of e:ESS which enables employees to directly update aspects of their own data offers us an opportunity to regularly remind staff of the importance of providing and updating their equality information.
- 2.6 The process used to identify if applications are from internal candidates relies on the system recognising if the candidate's details on their application matches those of an existing staff member. While compiling the information for this report, some inconsistencies in the data were noted and we will be seeking to improve the process for capturing this information for future reports.
- 2.7 It is important to note that the data used to report on organisational development and learning is restricted to formal classroom-based sessions and some e-learning modules. It does not include other approaches to learning such as accessing webinars, conferences, shadowing, personal learning or reflection, as our current system does not have the facility to record this effectively.
- 2.8 These different approaches to learning, and especially the value of reflection in all its forms, continue to be a significant focus of promotion and activity, as

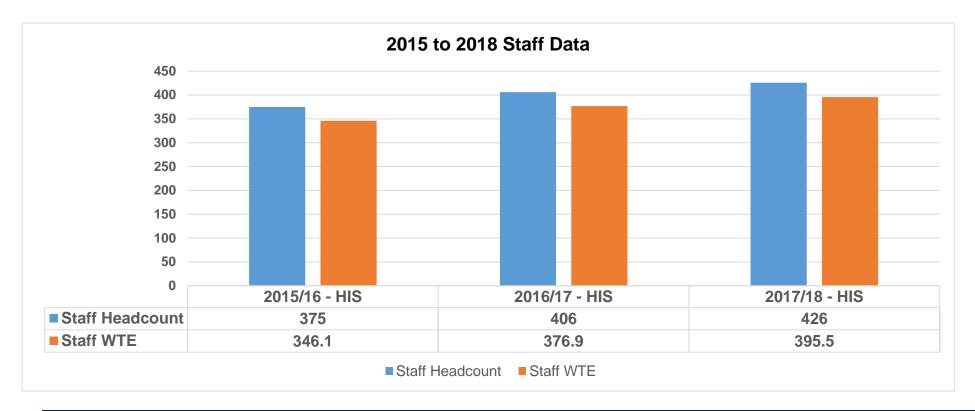
- we work towards nurturing a genuine learning organisation and culture. It is likely that this will have affected the overall numbers reported as accessing training.
- 2.9 The report includes data relating to permanent and fixed-term staff only and does not include staff recruited to seconded posts, temporary agency staff, self-employed contractors or sessional staff providing specialist clinical or technical expertise.
- **2.10** Information relating to job roles filled through the use of expressions of interest is not included. This process is occasionally used to fill short term needs.
- 2.11 Information relating to declined requests for training, secondment, a change of hours or work pattern is not currently collated centrally. Currently, line managers only routinely provide the People and Workplace Team with information about approved requests.

3 Progress since the previous reporting period

- 3.1 In April 2017, we drafted our Equality and Diversity Mainstreaming Action Plan 2017–2021, which contains all the actions arising from Healthcare Improvement Scotland's Equality Mainstreaming Report. The mainstreaming report was published as part of our legal duties under the Equality Act 2010, and included our Equality Outcomes and Equal Pay Statement. Three of the equality outcomes directly relate to the recruitment and retention of our staff.
 - Disabled staff and job applicants experience improved support and career opportunities within Healthcare Improvement Scotland.
 - Lesbian, gay, bisexual and transgender (LGBT) people who currently work with Healthcare Improvement Scotland, who wish to work with us or who wish to volunteer with us, experience improved opportunities.
 - Healthcare improvement Scotland will maintain an inclusive culture and environment, where staff understand the importance of equality and diversity in their work and interactions with others, and feel valued, respected and supported.
- 3.2 In June 2017, our Disability Confident Status was renewed for a further two-year period. The Disability Confident scheme is designed to help employers recruit and retain disabled people, helping to remove barriers to their participation.
- 3.3 Several actions relating to the improved experience of disabled staff and job applicants have still to be progressed and work is intended to begin on these within the current financial year.
- In September 2017, we submitted our first entry to Stonewall's Workplace Equality Index (WEI). The WEI is a benchmarking tool for employers to measure their progress on lesbian, gay, bi and trans (LGBT) inclusion in the workplace. Stonewall only publish information about the top 100 employers in the UK and while we did not place in the top 100, completing the index annually helps demonstrate our long term commitment to improving LGBT equality. Participating in the WEI is an opportunity for us to regularly review and improve our performance, and it is important to note that it has taken a number of years for top performing organisations in the WEI rankings to reach the stage that they are currently at.
- 3.5 As part of the NHSScotland and Stonewall Scotland partnership agreement, Stonewall has agreed to promote senior job roles using their social media.
- 3.6 To help maintain an inclusive culture and working environment where staff understand the importance of equality and diversity, we have encouraged staff to take part in awareness-raising activities intended to tackle prejudice and promote understanding.
- 3.7 In February 2018, we established our own rainbow flag campaign intended to promote LGBT equality during LGBT History Month. Staff were encouraged to

- share their pictures taken with the rainbow flag and these were shared internally and externally using the intranet and social media.
- 3.8 During Mental Health Awareness Week, our staff took part in See Me's Pass the Badge campaign, which encourages people to feel comfortable and confident to talk about mental health. See Me is Scotland's programme that seeks to tackle mental health stigma and discrimination.
- 3.9 The agreement to provide a comprehensive Employee Assistance Programme for all employees and members of their household was renewed. The support offered includes assistance with home or work issues, managerial support, life management consultancy (to help with legal, financial and consumer issues), and a counselling service. Counselling is provided through a network of independent counsellors, offering a range of expertise.
- **3.10** A Modern Apprentice was successfully recruited as a Trainee Administrative Assistant. The Modern Apprentice will undertake an SVQ Level 3 in Business Administration.
- 3.11 Our staff supported the shortlisting and recruitment process for the Glasgow Centre for Inclusive Living's NHSScotland Professional Careers Programme. This programme provides disabled graduates with an opportunity to gain work experience. We were delighted to welcome our second graduate to our organisation during 2017/18.
- 3.12 During March 2017, the People and Workplace Team refreshed and promoted guidance intended to support and improve dignity at work. The People and Workplace Team also delivered multiple training sessions aimed at tackling bullying or harassment at work. To help ensure as many staff as possible could benefit from the training, sessions took place on various days and times over both main sites.

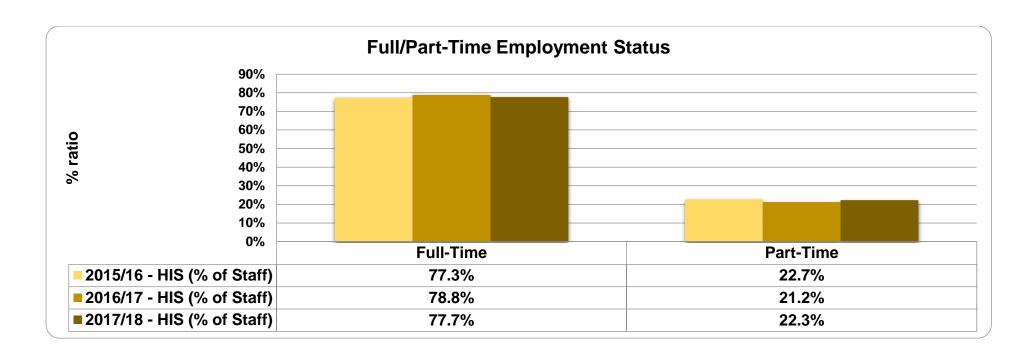
4 Workforce data



Commentary

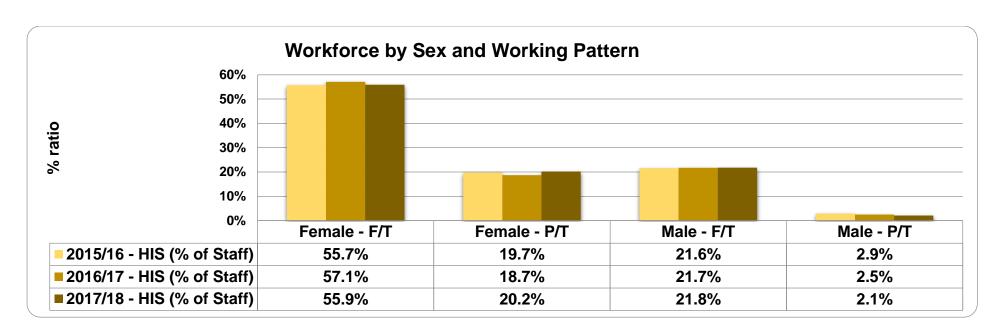
The organisational headcount of 426 is a 4.9% increase in this reporting period compared to the last, which is reflective of planned workforce increases in line with those outlined in the Local Delivery Plan and reflects the continued increase in demand for our services.

The ratio of full-time to part-time employees remains broadly unchanged to previous years.

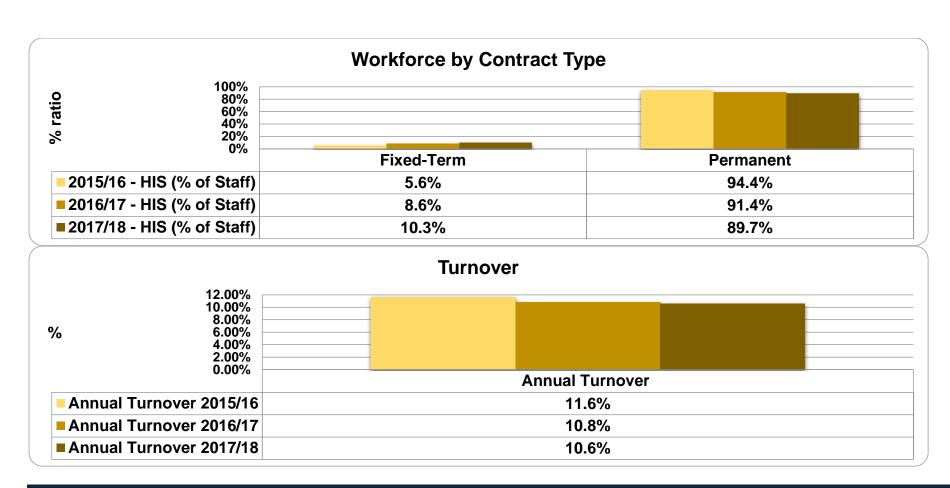


In order to support our staff manage a good life/work balance, the People and Workplace Team is proactively working with recruiting managers to consider if job roles would be suitable for non-standard work patterns. Every recruitment pack now specifically states that we are willing to consider alternative work patterns.

We are working towards enhanced reporting on the numbers of staff who work full-time hours on a non-standard work pattern and aim to provide this information during the course of this reporting year. We have a range of employees who work compressed hours or do some homeworking and we are increasingly moving away from standard ways of working.



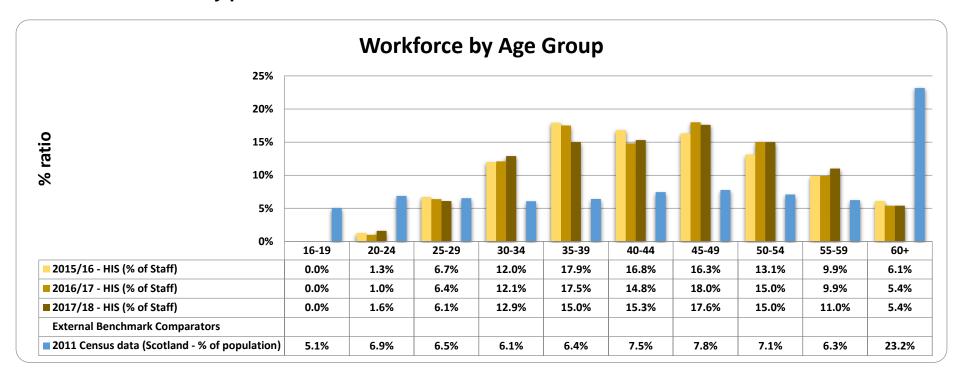
There has been a 1.2% decrease in the percentage of female staff working full-time and a 1.5% increase in the percentage of female staff working part-time. The percentage of male staff working full-time and part-time remains broadly the same as previous years.



The percentage of our workforce employed on a fixed term contract has increased by 1.7%. This is largely due to the increased number of projects, funded for a set period of time, that are directly recruited to externally, or to backfill internal secondments for the same reason. The use of fixed term contracts is monitored by the People and Workplace team to ensure appropriate use.

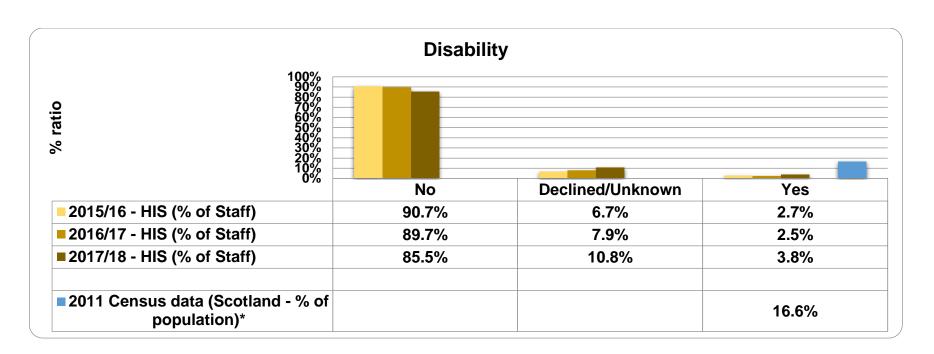
Staff turnover has decreased by 1% since 2015/16.

5 Workforce data by protected characteristics



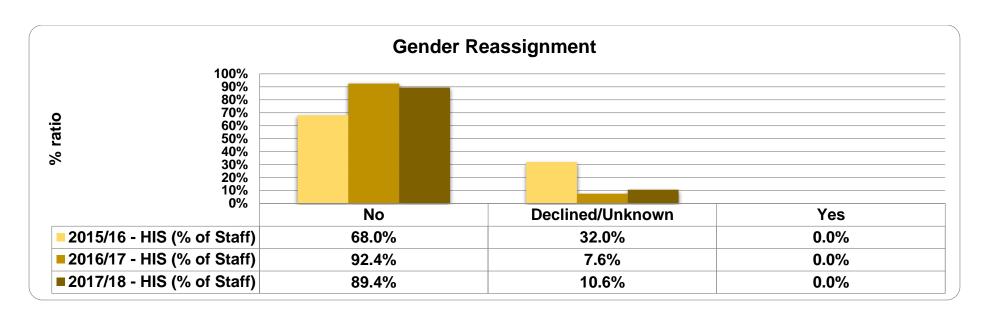
Commentary

There has been a 0.6% increase in the number of 20 to 24 years olds employed since the last reporting period. Our challenge continues to be the design of our roles and structures with relatively high qualification and experience requirements at administrator level.



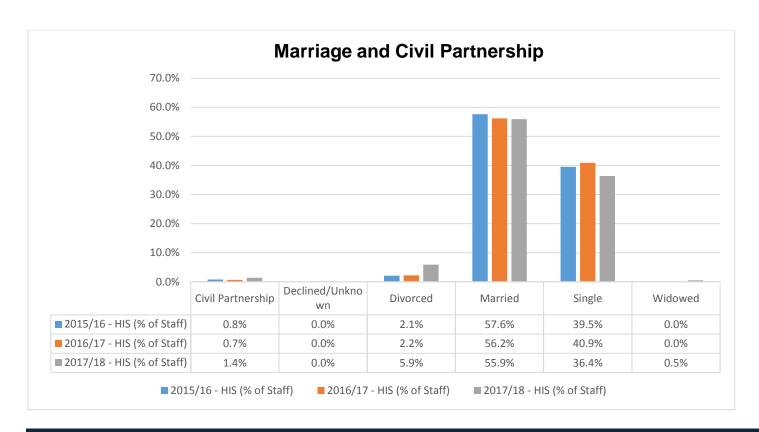
The percentage of staff identifying as having a disability or long-term health condition has increased by 1.3% from the previous reporting period². The percentage of people whose disability status is either unknown or they declined to respond increased by 2.9%. We note an increase in the instances of disability status not being provided at engagement stage. We will continue to encourage our employees to update their equality information through eESS self-service with the aim of improving the quality of our information over time.

² The closest data set within the 2011 Census is for 'economically inactive people aged 16 to 74 who identify as being long-term sick or disabled'. This wider definition of including long-term sick may account for a higher reported 'Yes' category with the 2011 Census data than would be expected if only those with a disability were surveyed, thus making it difficult to draw comparisons between Healthcare Improvement Scotland and this data set.



Gender Reassignment/Transgender Status is nil for this and previous reporting periods (0.0%).

Note: There is no comparable data for this category as it is not recorded in the 2011 Census.



The percentage of people in a civil partnership has increased by 0.67% since the previous reporting period.

Pregnancy and maternity

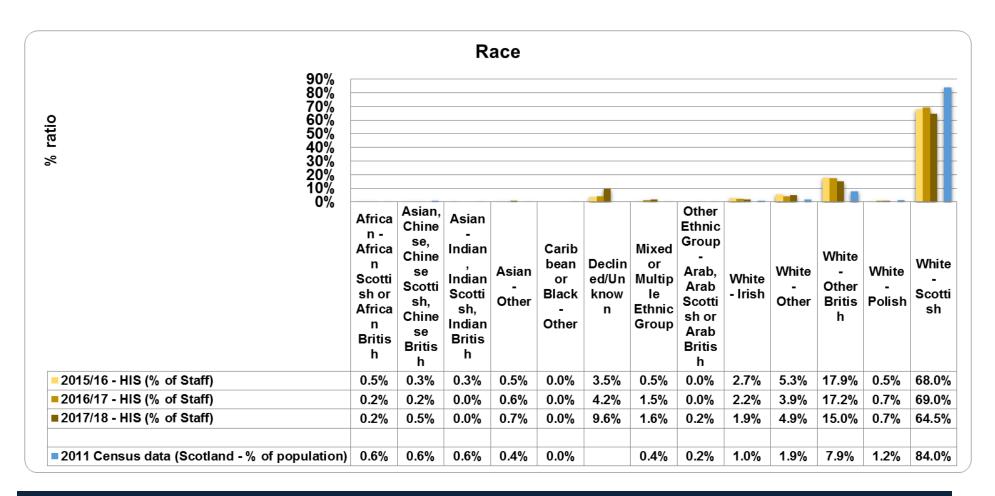
Commentary

This is the second time that we have formally reported data relating to pregnancy and maternity. As the numbers for this data set are very low, the amount of information we can report is limited, as additional details may make the employees referred to identifiable.

During this reporting period, 10 employees began maternity leave and 13 employees returned to work from maternity leave.

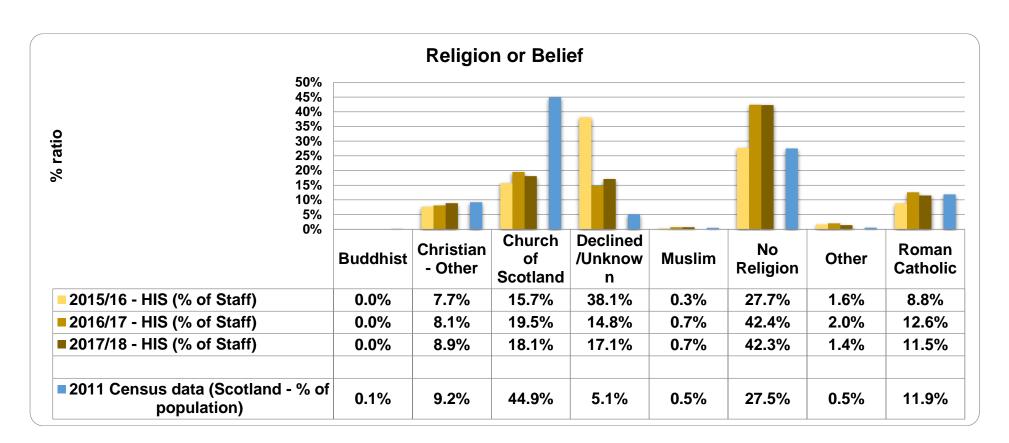
All employees who returned to work from maternity leave during this reporting period did so to their previous job role and previous pay band.

After returning from maternity leave, three employees submitted a flexible working request (reduction in hours per work), with all three being agreed. The other employees all returned on the same hours they had worked prior to their leave starting.

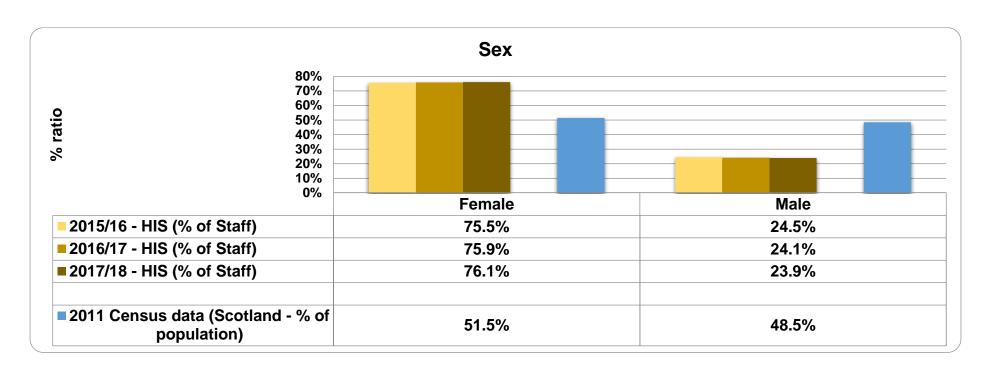


The breakdown for 2017/18 is broadly reflective of previous reporting periods but with a slight increase in the percentage of staff that identify as minority ethnic. There is also a significant increase in the percentage (5.4%) of unknown/declined responses.

Note: the 2011 Census does not have an option for declining to provide information for this characteristic. The ethnicity categories shown are ungrouped (showing current and previous staffing in each) and compared against the specific category within the Census, where this data is available.



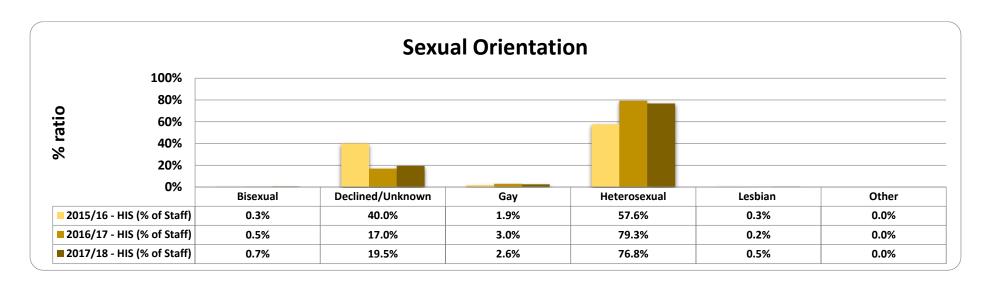
The data for 2017/18 is broadly reflective of previous reporting periods, although there is a 2.3% increase in the percentage of people whose religion or belief is either unknown or they declined to disclose.



There has been a slight decrease in the proportion of male staff within the organisation over the last year and a slight increase in the proportion of female staff, however this gender imbalance has remained fairly consistent over recent years.

This imbalance is broadly comparable to other NHS boards and achieving a gender balance across the NHS in Scotland remains a national challenge.

The gender split at pay band 4 is 92.21% female staff and 7.79% male staff. In order to address this imbalance, we have taken positive action by including a message in job adverts to encourage male applicants to apply for roles in this pay band.



The percentage of staff identifying as heterosexual decreased by 2.5%. The percentage of staff identifying as gay decreased by 0.4%. The percentage of staff identifying as bisexual increased by 0.2%. The percentage of staff identifying as lesbian increased by 0.3%.

Note: there is no comparable data within the 2011 Census Report for this protected characteristic.

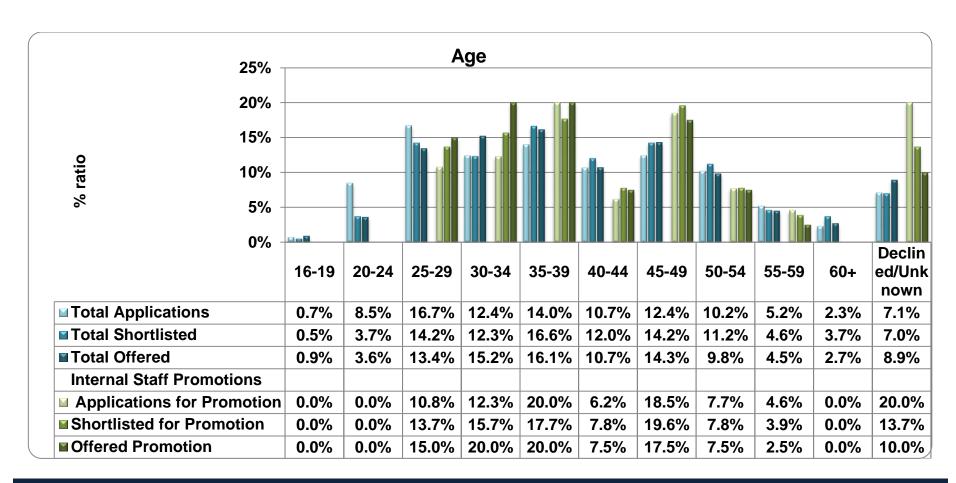
6 Recruitment and selection

The following recruitment and selection data shows the key stages of the applicant journey through the selection process reported by protected characteristics, with each stage showing a percentage of those progressed from the previous stage.

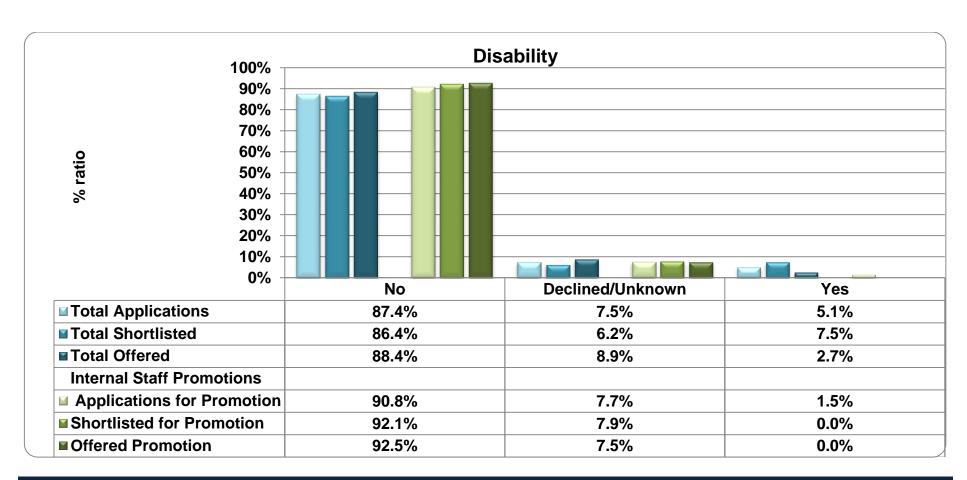
To enable some context of the percentages shown in the applicant journey, a summary of actual activity/number of applications, interviews and offers made is provided below for reference. This includes both temporary and permanent promotions undertaken as part of a formal recruitment process. This data does not include posts filled internally on a temporary acting-up basis or through informal expressions of interest, as this data is not currently captured.

Summary of recruitment activity during the reporting period

	2016/17	2017/18	+/- from previous year
Total Applications received		1388	-26.17%
Total Shortlisted for interview	446	374	-16.14%
Total offered a position	159	110	-30.82%
Internal candidates applying for promoted posts	90	65	-27.78%
Internal candidates shortlisted for promoted posts	64	51	-20.31%
Internal candidates offerd promoted posts	34	35	2.94%

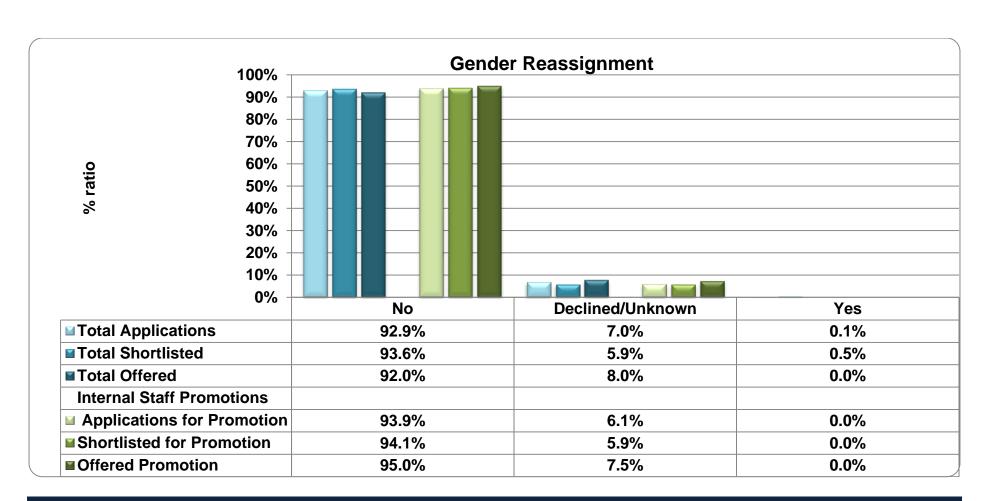


The percentage of applications received for each age range is broadly similar to the previous year's data. There was a slight increase in the percentage (1.2% increase) of 20 to 24 year olds being shortlisted. The percentage of those 20 to 24 year olds subsequently offered a job increased by 0.5%. The percentage of 25 to 29 year olds offered a job slightly decreased by 1.1%. The age ranges most active in applying for promotions were 35 to 39 (20%), 45 to 49 (18.5%). Staff in age range 35 to 39 were most likely to be offered a promotion (20% of the total number of people appointed).

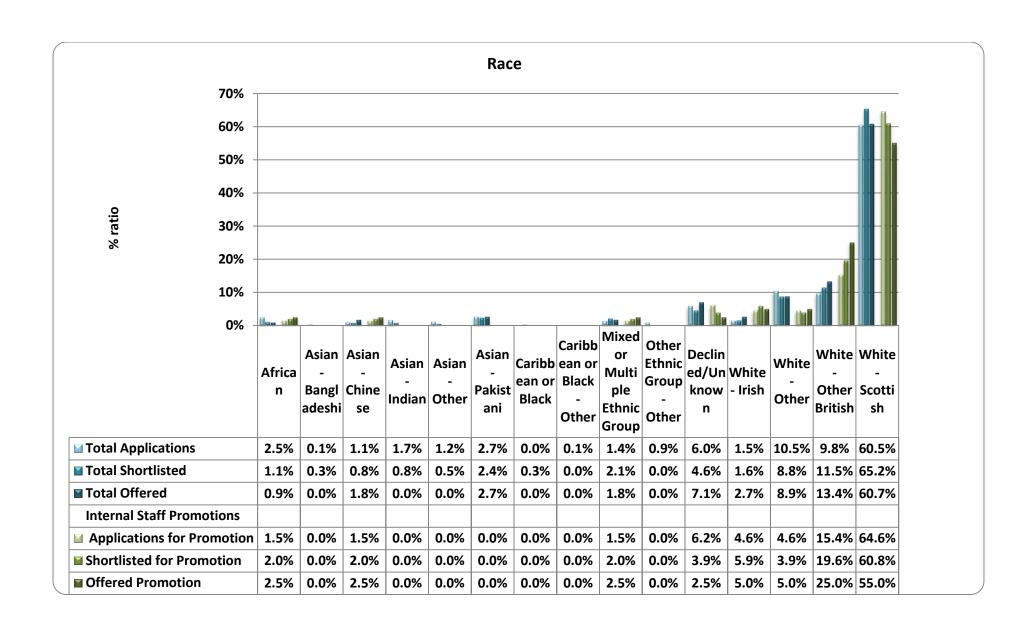


The percentage of applicants who disclosed a disability slightly decreased (0.2%) from the previous year. However, the percentage subsequently offered a job role increased by 1.4%. The percentage of applicants who identified as not having a disability and then were subsequently offered a job decreased by 2.2%.

Internal applications for promotion from staff who identified as having a disability decreased by 5.2%.

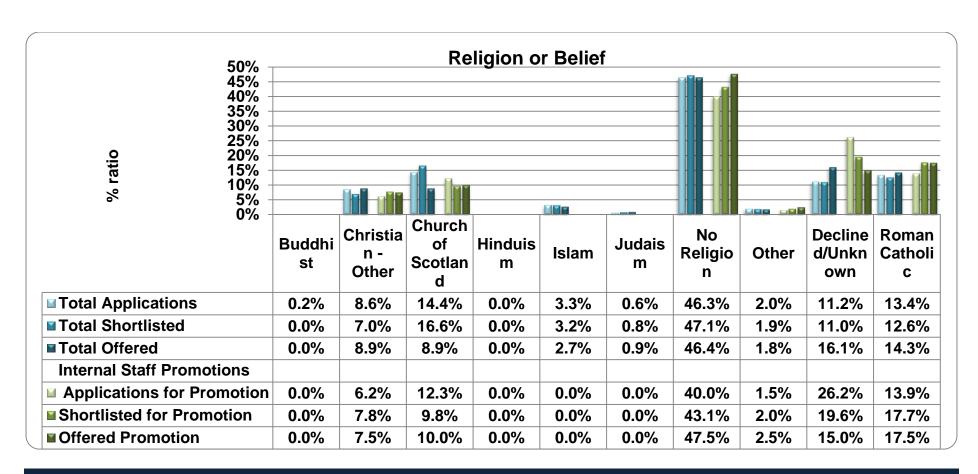


No staff identified as trans and, over the course of 2017/18, there was a very low number of job applicants who identified as trans. This is consistent with previous years.

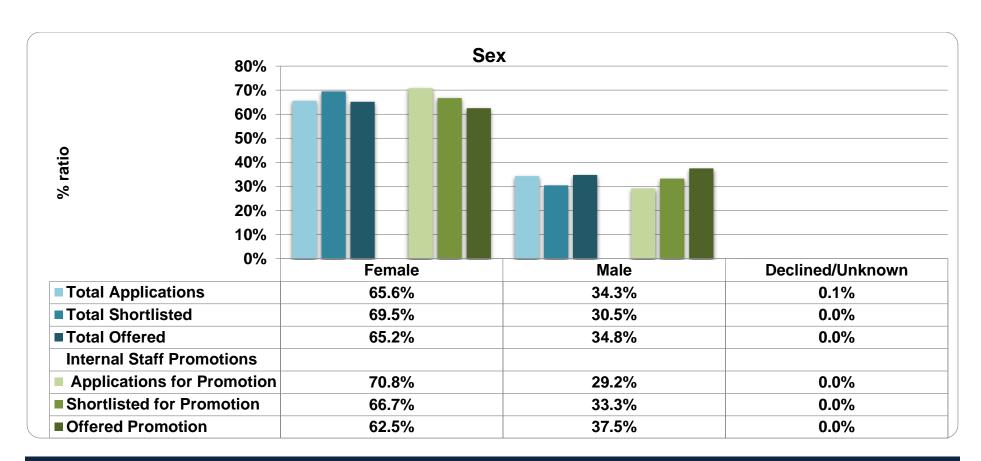


The percentage of applicants who identified as being from any white ethnic group increased by 2.1% from 2016/17. The overall percentage of applicants who identified as being from a non-white minority ethnic group increased by 0.4%. The percentage of applicants from any white ethnic group offered a job increased by 1.1% in comparison to 2016/17. The percentage of applicants whose ethnic origin was either not disclosed or was unknown decreased by 2.2%. The overall percentage of applicants who were subsequently identified as being from a non-white minority ethnic group increased by 2.9%.

Of the applications for promotion, 3.5% came from staff who identified as being from a non-white minority ethnic group. Of the successful applicants for promotion, 7.5% identified as being from a non-white minority ethnic group. Of the successful applicants for internal promotion, 90% identified as being from a white ethnic group, with the ethnic origin of 2.5% of the successful applicants for internal promotion being unknown.

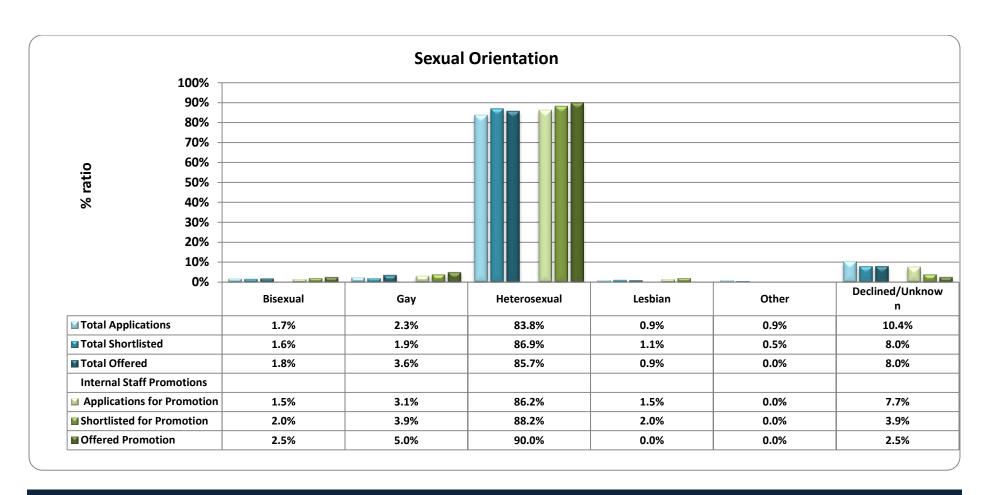


The percentage of applications received for each group is broadly reflective of the previous year's data and comparable with the current organisational profile, with a broad cross-section of groups progressing through each stage. However, there was a notable 1.4% increase in the percentage of Muslim applicants subsequently offered a job. The percentage of applicants whose religion or belief was either not disclosed or was unknown decreased by 3.8%.



The percentage of applications received from male applicants increased by 5.9% and the percentage of applicants whose gender was either not disclosed or unknown decreased by 6.3%. The percentage of male applicants offered a job has risen by 7.8% since 2016/17. The percentage of female applicants offered a job has decreased by 0.8%.

The percentage of applications for promotion from male candidates increased by 2.5% and those subsequently offered promotion increased by 14%.



The percentage of job applicants who identified as either lesbian or gay is broadly similar to previous years, although there was a notable 0.7% increase in applicants identifying as bisexual. The percentage of applicants subsequently offered a job who identified as gay decreased by 3.3%. In 2016/17, no applicants subsequently offered a job identified as either lesbian or bisexual, so this year's appointments mark an increase.

7 Organisational development and learning

7.1 Reported access to training

The data used for this analysis has been taken from the new e-ESS system. A report was produced by NSS colleagues to cover the period 1 April 2017 to 31 March 2018. This yielded a total headcount of 443 staff, but without names. (Please note that included in this figure are those who may have attended training but subsequently left the organisation during the period covered.)

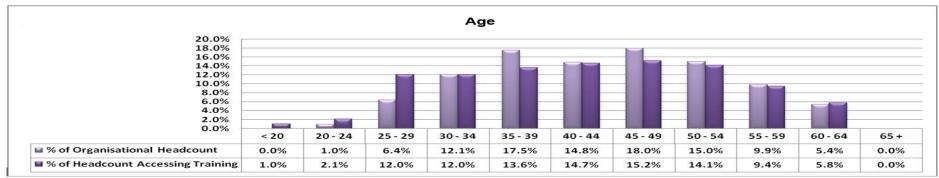
It is important to note that the way we consume learning is evolving and the training reported here as being accessed or attended will be only a proportion of all the training and development that staff have the opportunity to access. For example, at present we have no way of consistently or reliably capturing data regarding self-directed learning and reflection, shadowing, discussion groups, webinars, MOOCs (a MOOC is a massive open online course aimed at unlimited participation and open access via the web), conferences). It is hoped that the development of the TURAS platform will in time provide an interface that will help us to gain a clearer picture.

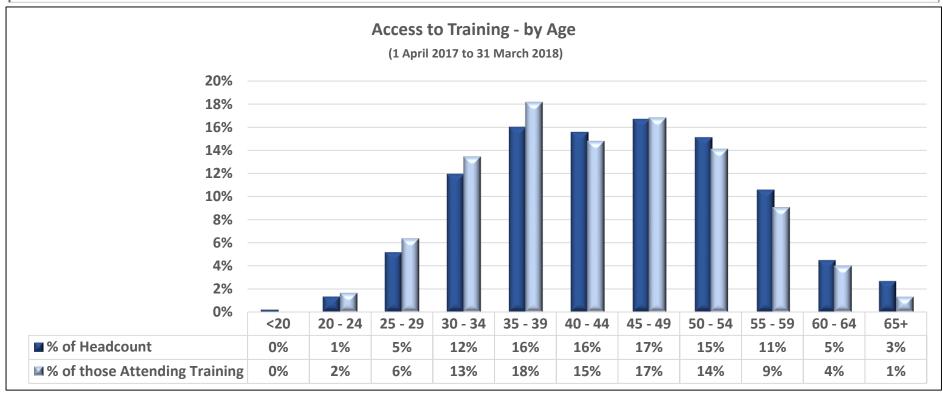
Healthcare Improvement Scotland received a total of five applications for the Continuing Education Bursary Fund in 2017/18, four of which were supported. As the numbers are so low we are unable to report additional details disaggregated by the protected characteristics due to this data potentially making people identifiable.

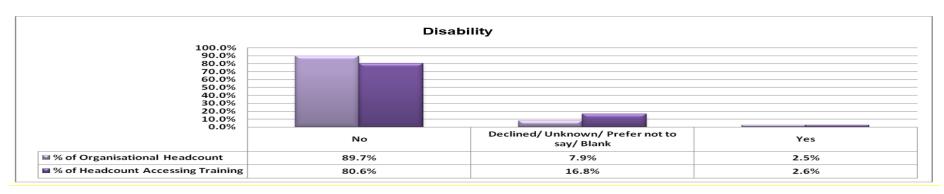
- Approximately 297 members of staff are reported as having accessed training in 2017/18, representing 67% of the total headcount. This is significantly more than the 47% reported in 2016/17 and is likely to be a more accurate reflection than last year when we were still between systems.
- The age profile of those reported as accessing training in 2017/18, is broadly in line with that of the organisation as a whole.
- There does appear to be a more noticeable delineation in terms of accessing training between those under 40 (more likely) or over age 40 (less likely).
- There does not appear to be any significant difference for any of the protected characteristics in relation to access to training, which remains largely in line with last year.

Key to graphs on pages 32-38:

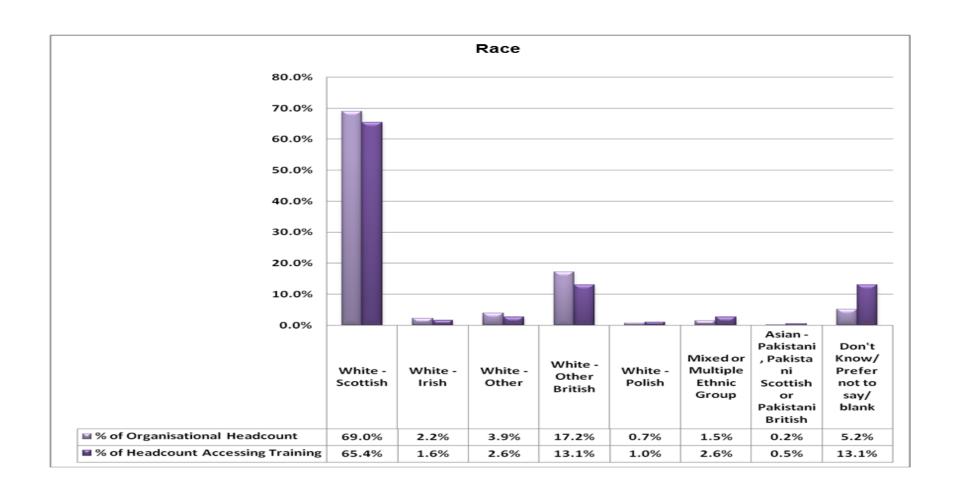
- purple graphs 2016/17
- blue graphs 2017/18

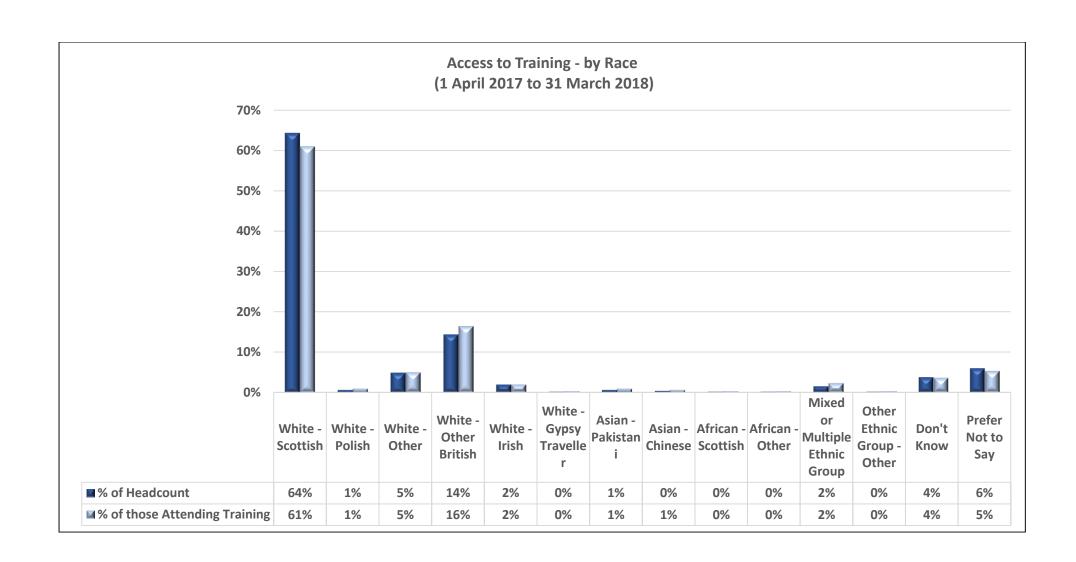


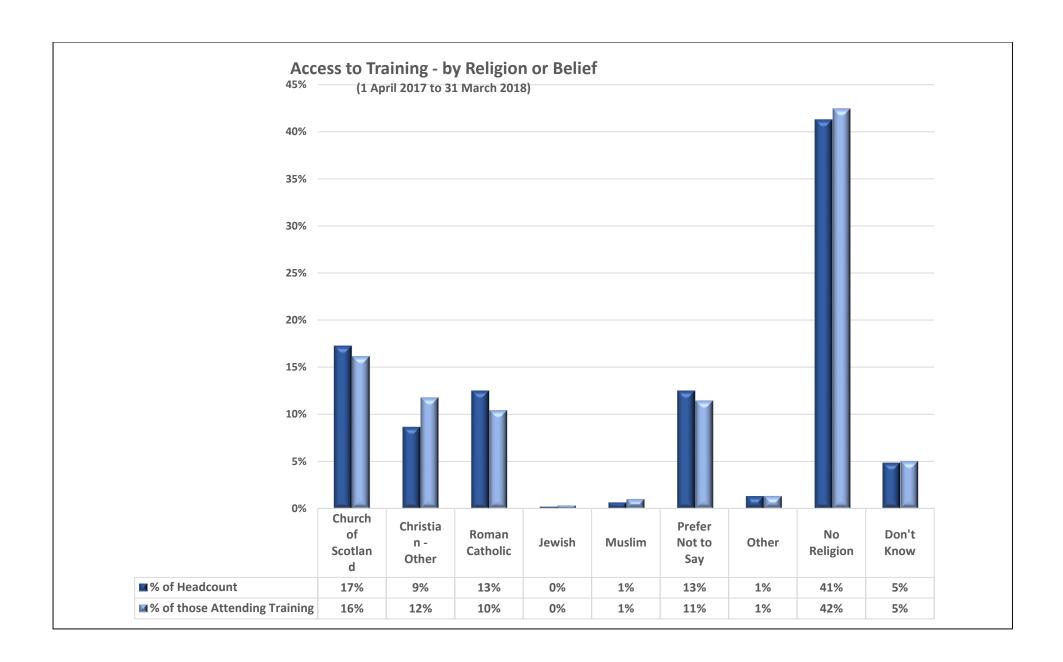


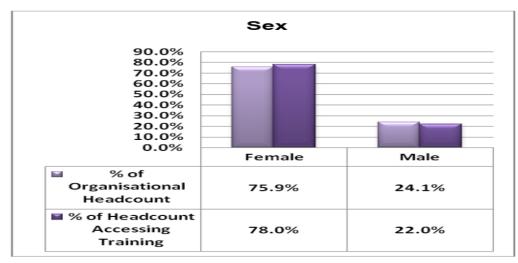


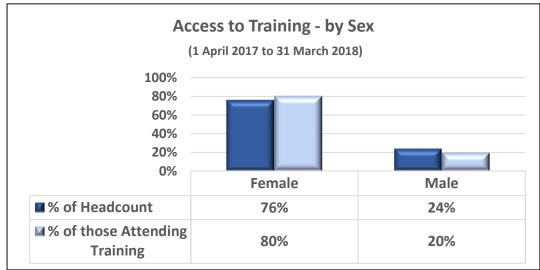


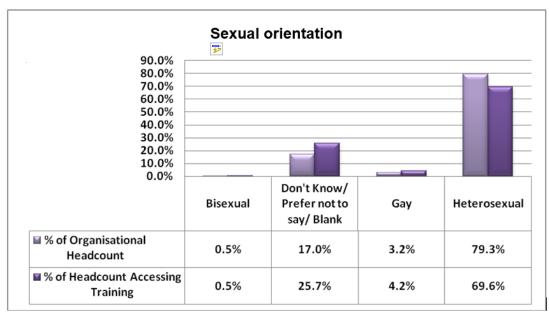


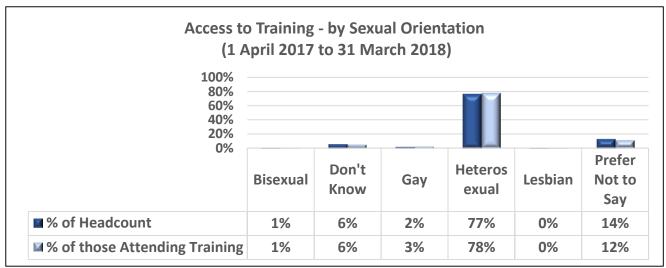








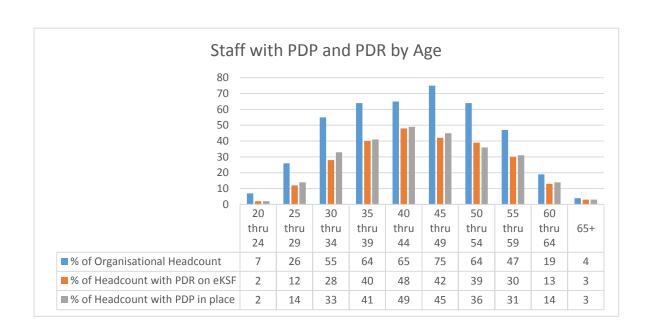


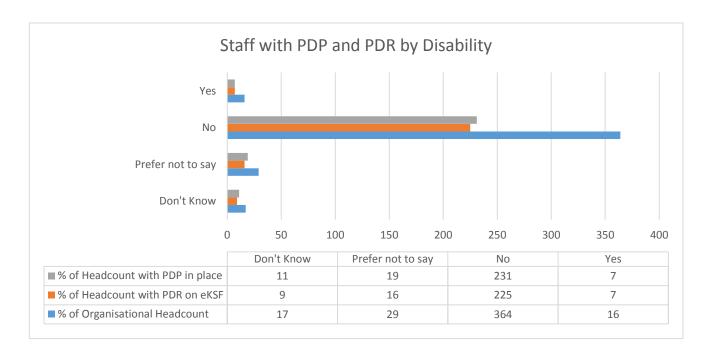


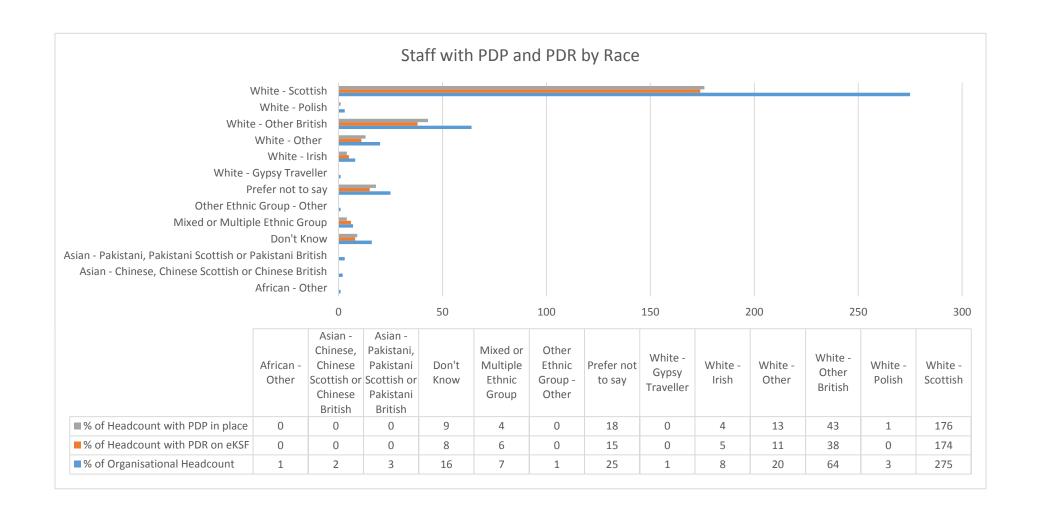
7.2 Appraisals and personal development

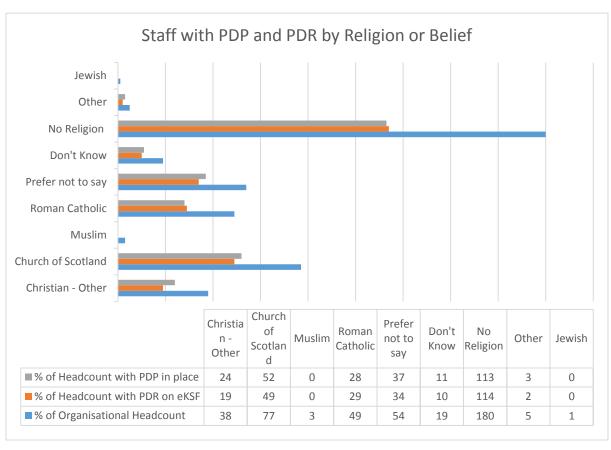
The data on which these observations are drawn are subject to the limitations below and may explain the apparent differences for the above categories.

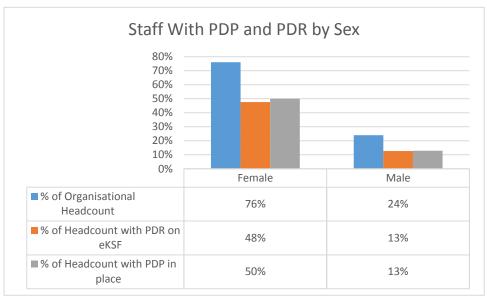
- Internal monitoring of PDR and PDP activity has shown that not all staff
 participating in the process are correctly recording completion of their PDR and
 PDP meetings on the tracker as requested. Unfortunately the eKSF reporting
 system is now no longer available to report from. Consequently, the data may not
 be a true reflection of PDR and PDP activity.
- From the start of 1 April 2018, we began to use a new reporting tool, Turas Appraisal, which will provide the reporting for 2018/19.
- The organisational demographic profile does not take into account that some staff would not have been due a PDR during this period due to having been on a period of long term leave, secondment or commencing a new role in the organisation. This affects 143 staff.

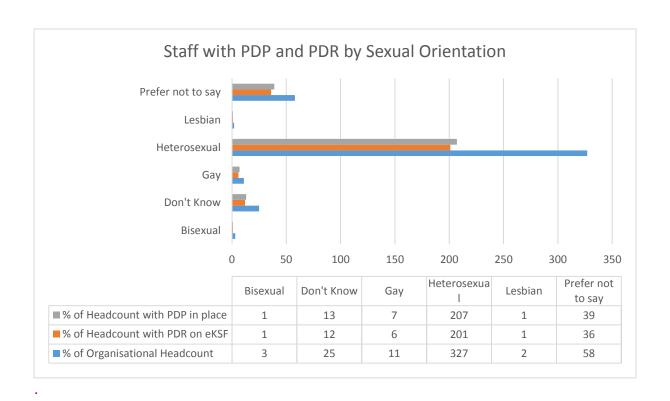












8 Pay data

8.1 Occupational segregation data

Occupational segregation is the concentration of staff based upon their protected characteristics:

- in different job roles (horizontal segregation), or
- at different pay bands (vertical segregation).

Where staff numbers are below 10 and where it may make someone identifiable, we have used <10 in the tables to indicate this. Where it is possible to work out this missing data from the other information we have published, we have replaced the number with an asterisk. Percentages have been rounded up to the nearest 2 decimal places.

Disability

Table 1

Job Family	Band	Disabled Employments	Non-Disabled Employments	Unknown/Declined to disclose	Total Employments
Administrative Services	3	0	2	0	2
	4	5	64	8	77
	5	8	73	6	87
	6	0	53	12	65
	7	1	78	11	90
	8A	1	43	5	49
	8B	1	19	3	23
	8C	0	9	0	9
	8D	0	5	1	6
Senior Managers	Senior Managers	0	6	0	6
Medical and Dental	Clinical	0	12	0	12
Total		16	364	46	426

Race

Table 2

Job Family	Band	Asian - Chinese			Declined/ Unknown	Mixed or Multiple Ethnic Group	Other Ethnic Group - Other	White - Irish	White - Other	White - Other British	White - Polish	White - Scottish	White - Gypsy Traveller
Administrative													
Services	3	0	0	0	0	0	0	0	0	0	0	2	0
	4	1	1	1	7	3	0	0	4	8	0	52	0
	5	1	0	0	8	1	0	1	4	8	3	61	0
	6	0	0	0	8	1	0	0	2	13	0	36	0
	7	0	1	0	9	2	0	4	7	11	0	56	1
	8A	0	0	0	4	0	1	3	1	8	0	32	0
	8B	0	1	0	4	0	0	0	0	6	0	15	0
	8C	0	0	0	0	0	0	0	1	3	0	6	0
	8D	0	0	0	1	0	0	0	0	1	0	4	0
	Senior												
Senior Managers	Managers	0	0	0	0	0	0	0	0	2	0	4	0
Medical and	_												
Dental	Clinical	0	0	0	0	0	0	0	1	4	0	7	0
Total		2	3	1	41	7	1	8	20	64	3	275	1

Sex

Table 3 shows the number of female staff and male staff employed at each pay band.

Table 3

Pay Band	Female Employments	Male Employments	Total Employments
3	2	0	2
4	71	6	77
5	69	18	87
6	41	19	60
7	68	23	91
8A	38	11	49
8B	17	9	26
8C	6	4	10
8D	5	1	6
Senior			
Managers	3	3	6
Clinical	4	8	12
	324	102	426

Table 4

Job Family	Pay Band	Percentage of Female Employments	Percentage of Male Employments
Administrative			
Services	3	100.00%	0.00%
	4	92.21%	7.79%
	5	79.31%	20.69%
	6	68.33%	31.67%
	7	74.73%	25.27%
	8A	77.55%	22.45%
	8B	65.38%	34.62%
	8C	60.00%	40.00%
	8D	83.33%	16.67%
Senior	Senior		
Managers	Managers	50.00%	50.00%
Medical and			
Dental	Clinical	33.33%	66.67%

Table 5

Job Family	Pay Band	Female Employments	Female average hourly pay	Male Employments		Gender Pay Gap Male to Female %	Total Employments
Administrative							
Services	3	2	£10.61	0	£0.00	N/A	2
	4	71	£11.32	6	£10.81	-4.72%	77
	5	69	£13.46	18	£13.79	2.39%	87
	6	41	£16.56	19	£16.86	1.78%	60
	7	68	£19.54	23	£19.91	1.86%	91
	8A	38	£23.76	11	£24.23	1.94%	49
	8B	17	£27.98	9	£27.01	-3.59%	26
	8C	6	£35.59	4	£30.21	-17.81%	10
	8D	5	£43.09	1	£44.49	3.15%	6
Senior	Senior						
Managers	Managers	3	£39.60	3	£45.19	12.37%	6
Medical and							
Dental	Clinical	4	£51.82	8	£51.82	0.00%	12

Table 6

Job Family	Pay Band		Percentage of 102 Male Employments
Administrative			
Services	3	0.62%	0.00%
	4	21.91%	5.88%
	5	21.30%	17.65%
	6	12.65%	18.63%
	7	20.99%	22.55%
	8A	11.73%	10.78%
	8B	5.25%	8.82%
	8C	1.85%	3.92%
	8D	1.54%	0.98%
Senior	Senior		
Managers	Managers	0.93%	2.94%
Medical and			
Dental	Clinical	1.23%	7.84%

Table 7

Job Family	Pay Band	Part-time Female Employments	Part-time Male Employments
Administrative Services	3	0	0
	4	18	0
	5	20	0
	6	12	1
	7	15	1
	8A	9	1
	8B	6	0
	8C	1	0
	8D	1	0
	Senior		
Senior Managers	Managers	0	0
Medical and Dental	Clinical	4	6

The gender pay gap

In April 2017, as part of our Equality Mainstreaming Report, we published details of our gender pay gap, calculated for the first time using the best practice guidance published by Close the Gap in 2016. Our pay gap calculations below have again been based on the Close the Gap method.

There are two measures of the gender pay gap: the mean and the median. The mean average is calculated by adding all individual employees' hourly rates of pay and dividing by the total number of employees. The median average is calculated by listing all employees' hourly rates of pay and then finding the midpoint.

The mean pay gap

To calculate the mean pay gap, we first determined the basic hourly rate of pay for each employee. We then used the following formula to calculate the percentage difference.

$$\frac{A-B}{A}$$
 X 100 A = mean hourly rate of pay of male employees -£22.70 B= mean hourly rate of pay of female employees -£18.19

This provides a mean pay gap of 19.87%.

Our mean pay gap has reduced by 1.65% in comparison to our 2016/17 data.

The median pay gap

To calculate the median pay gap, we determined the midpoint of the salary scale for both female and male staff and used the following formula.

This provides a median pay gap of 13.42%.

Our median pay gap has reduced by 10.76% in comparison to our 2016/17 data.

9 Disciplinary action and grievances

Due to the very low number of grievances raised during the reporting period we are unable to report on information relating to this, as it could lead to the people involved being identifiable.

10 Dismissals

The only dismissals we have carried out in the reporting period are "End of Fixed Term Contract Dismissals", where we have been unable to find suitable opportunities through redeployment, or where the post holder chose not to consider redeployment. There have been four cases of End of Fixed Term Contract Dismissals during the reporting period.

11 Shared parental leave

One staff member took shared parental leave during this reporting year and returned to the same post.

12 Adoption leave

One staff member took adoption leave during this reporting year and returned to the same post.

13 Carers

In March 2018, staff were invited to inform us if they identified as a carer. As defined by the Scottish Government funded initiative, Carer Positive, a carer is 'someone who provides unpaid care by looking after an ill, frail or disabled family member, friend or partner'.

Seventeen members of staff identified as being a carer and three were supported to take a period or periods of carers leave during this reporting year.

14 Parental leave

Twenty-eight staff members took a period or periods of parental leave during this reporting year.

15 Disability – return to work after absence

All staff who identified as having a disability and who had absences relating to their disability, returned to the same job role and pay band following their period of absence. There have been no instances of redeployment or loss of employment as a result of disability or ill health.

16 Future steps

- While the number of staff who identified as having a disability has increased by 1.3% from the last reporting period to 3.8% of our workforce, this remains a relatively low number. As a Disability Confident Employer, we will seek to take actions to ensure that staff feel confident to disclose their disability and ensure that they are appropriately supported.
- We will continue to participate in the Stonewall Workplace Equality Index and seek to ensure that we promote a culture where staff who identify as lesbian, gay, bisexual or trans feel comfortable to be themselves.
- We will continue to seek ways to employ more young people, and to offer Modern Apprenticeships and work experience placements, and to consider the best means of engaging with care-experienced young adults as potential employees.
- We will continue to consider ways to support staff with caring responsibilities and to better publicise to staff and their managers the options available.
- We will review our Equal Pay Statement by April 2019 and consider what actions will support improvements to our gender pay gap.
- We will review the processes used to collate workforce equality data and seek to ensure that data is captured accurately and consistently.

17 Contact information

If you would like us to consider producing this report in an alternative format, please contact our Equality and Diversity Advisor:

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You can read and download this document from our website. We are happy to consider requests for other languages or formats. Please contact our Equality and Diversity Advisor on 0141 225 6999 or email contactpublicinvolvement.his@nhs.net

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