

This report is produced in accordance with the Trust's responsibilities under the Public Sector Equality Duty. It contains the workforce equality data that is required to be published under the Specific Duties of the Public Sector Equality Duty.

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1. Background

The Equality Act 2010 came into force on the 1st October 2010, replacing the previous antidiscrimination legislation in the UK. Public sector organisations have specific responsibilities under the Act, namely the public sector Equality Duty which came into force on the 5th April 2011. It consists of a general duty comprising of three main aims, and specific duties. The purpose of Equality Duty is to embed equality considerations into the day-to-day work of public authorities to help tackle discrimination and inequality.

Equality Duty covers the following protected characteristics:

- Age;
- Disability;
- Gender reassignment;
- Pregnancy and maternity;
- Race (includes ethnic or national origins, colour or nationality);
- Religion or belief (includes no belief);
- Sex;
- Sexual orientation
- Marriage & Civil Partnership

The General Duty

Under the General Duty public bodies are required to have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010;
- Advance equality of opportunity between people from different groups;
- Foster good relations between people from different groups

What this means in practice is that these three aims should be considered as part of any decision making process e.g. delivering services, developing policies etc. In addition, public sector organisations have a duty to meet the needs of people with protected characteristics and reduce or eliminate the disadvantage that such groups suffer.

The Specific Duties

These duties require public bodies to set specific, measurable equality objectives and to publish information regarding their performance on equality. The information that needs to be published is as follows.

- equality objectives, at least every four years
- information to demonstrate their compliance with the equality duty, at least annually

This report forms part of our duty to publish an analysis of our equality monitoring data in line with the requirements of the Public Sector Equality Duty. This report covers the period 1st April 2023 to 31st March 2024.

2. The Trust

Liverpool Heart and Chest Hospital provide specialist services in cardiothoracic surgery, cardiology, respiratory medicine including adult cystic fibrosis and diagnostic imaging, both in the hospital and out in the community.

LHCH serve a catchment area of 2.8 million people, spanning Merseyside, Cheshire, North Wales and the Isle of Man, and increasingly we receive referrals from outside these areas for highly specialised services such as aortics.

Heart and lung disease continue to be amongst the biggest killers in the UK and the communities we serve are marked by increased prevalence of cardiovascular disease, higher levels of heart failure, hypertension, coronary artery disease and an ageing population.

Our reputation for strong performance is important in delivering the best care for our patients and high quality clinical services. This is underpinned by a culture of research and innovation, delivered in modern estate and facilitated by technology. New and upgraded clinical areas are designed with patients and families fully involved to deliver their needs.

As part of our long term plan, we aim to form strong clinical and organisational relationships where possible. There is clear evidence that partnerships improve patient care and enhance quality and we aim to collaborate with a range of other providers and professionals with the aim to extending access and improve quality.

Our vision is 'to be the best - leading and delivering outstanding heart and chest care and research'

The vision, 'to be the best', is underpinned by six strategic objective themes:

- 1. Delivering world class care
- 2. Advancing quality and outcomes
- 3. Increasing value
- 4. Developing people
- 5. Leading through collaboration
- 6. Improving population health

In 2019 the Trust was rated 'Outstanding' following inspection by the Quality Care Commission (CQC) and have retained this rating.

The Trust aims to provide 'excellent, compassionate and safe care for its patients and populations, every day' and has firmly embedded the values and behaviours expected of all its staff and volunteers, through IMPACT:

- Inclusivity
- Making a difference
- People centred
- Accountability
- Continuous improvement
- Teamwork

LHCH are also committed to building a workforce in which each employee can enjoy a strong sense of belonging and where diversity, difference and uniqueness are truly valued.

As well as being well-represented across all levels, we must ensure that people from marginalised groups, are actively and always included, and that this inclusion is felt authentically at a personal level.

Working towards a truly inclusive culture at LHCH, not only improves the experience of our workforce, but also offers significant benefits to our patients.

3. Collection of Data

Workforce equality monitoring data is collected when an individual starts working at LHCH although staff can opt out of disclosing this information. This information is then stored in our electronic staff record system (ESR)

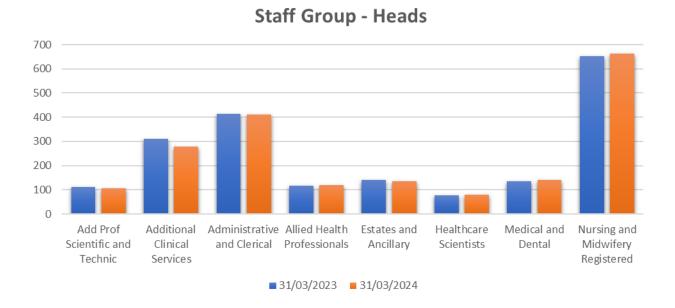
Communications will be sent out on a quarterly basis to engage with staff to review their ESR details. This will include their personal contact details – address, contact numbers, emergency contacts – along their Equality and Diversity information – Ethnic Origin, Sexual Orientation. New portlets in ESR have been implemented to help encourage staff to keep their personal information up to date.

4. Workforce Composition

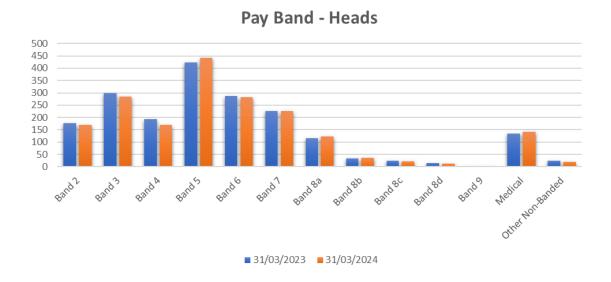
As at 31st March 2024, LHCH employed 1934 staff, this figure excludes Bank workers but includes staff on fixed-term contracts within the Trust. This is a decrease of 22 staff since 2023.

The following subsections break down the workforce by staff group, pay band and by each protected characteristic recorded in ESR. Comparisons have been drawn to the local Liverpool population as reported in the 2011 Census to consider alignment to local demographics.

(a) Workforce Breakdown by Staff Group



(b) Workforce Breakdown by Grade



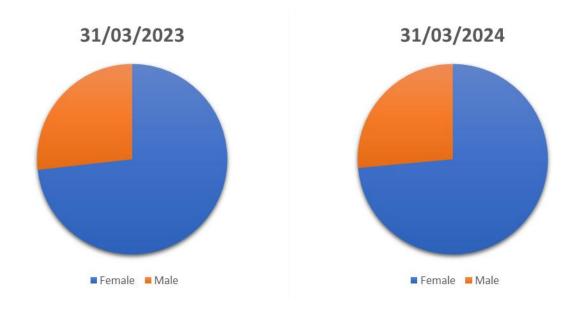
i. Gender

Gender Pay Gap: https://gender-pay-gap.service.gov.uk/

LHCH Gender Pay Gap Report:

https://www.lhch.nhs.uk/media/.resources/6603e519a005f1.01090234.pdf

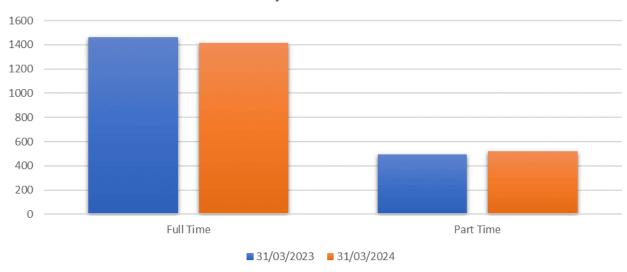
Of the 1934 staff currently employed by LHCH, 1422 are female and 512 male. This equates to 73.5 % female employees and 26.5 % male.



ii. Full time/part time comparison

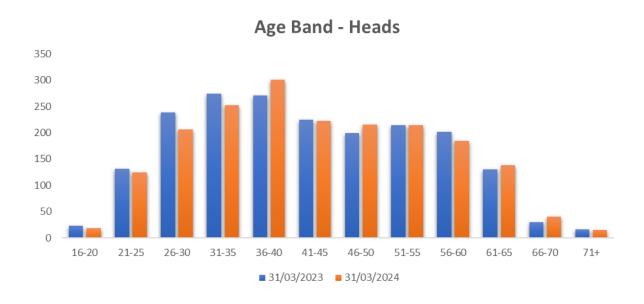
Based on the difference between 2023 and 2024 there has been a decrease of 3.28% (-48 heads) for 'Full Time' posts and an increase of 5.27% (+26 heads) for 'Part Time' posts.





iii. Age

Numbers remain fairly evenly spread between all age groups through the 26 to 60 age range with a peak at 31-35 and 36-40. The number of employees aged 61-65 has increased by 8.



The UK population has grown year on year since 1982. In mid-2020, the population reached 67.1 million, up from 66.8 million in mid-2019. The number of people of pensionable age relative of those of expected working age is increasing.

iv. Ethnic Origin

The chart below displays the ethnic origin breakdown of LHCH employees.

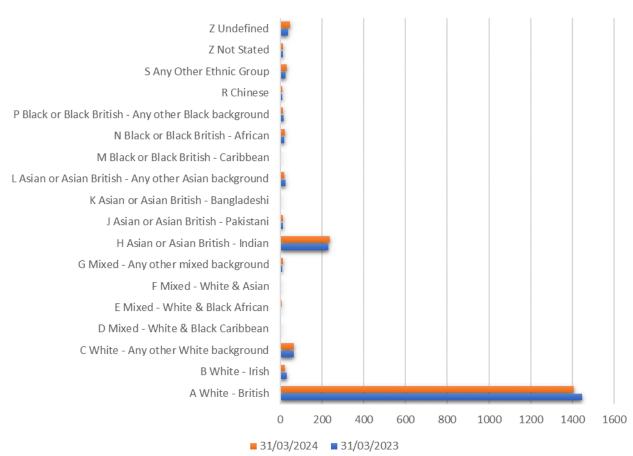
As at the 31st March 2024, 77.15% of the workforce identified themselves as white (including all white ESR categories). The white % of staff has decreased by 1.74%. Asian/Asian British - Indian between 2023 and 2024 has increased by 5 and remains the highest within the BAME groups at 12.25%.

3.05% (59) of Ethnic Origins in ESR were blank or Not Stated.

The 2021 Census found that within the North West region 85.6% of people were of White origin, with Asian or Asian British making up 8.4% of the population. This was followed by Mixed/ Multiple Ethnic Groups = 2.2%, Black/African/Caribbean/Black British = 2.3% and Other Ethnic Groups = 1.5%.

https://censusdata.uk/e12000002-north-west/ts021-ethnic-group

Ethnic Origin - Heads

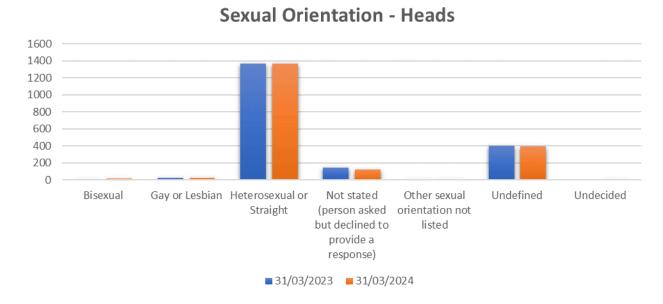


v. Sexual Orientation

At LHCH, **2.28%** of staff stated gay, lesbian or bisexual for sexual orientation. However, it should be noted that **6.46%** of sexual orientation fields within ESR are recorded as '*Not Stated when asked*' and **20.37%** are recorded as '*Undefined*' for sexual orientation which gives an incomplete overview.

A report published by the Office for National Statistics (2022 data) found that an estimated 3.3% of the UK population identify as being gay, lesbian or bisexual which has increased of 0.2% since 2021. 93.4% of the population identify as being Heterosexual or straight and 3.3% recorded as "Other / Do not know or refuse".

https://www.ons.gov.uk/peoplepopulationandcommunity/culturalidentity/sexuality/bulletins/sexualidentityuk/2021and2022

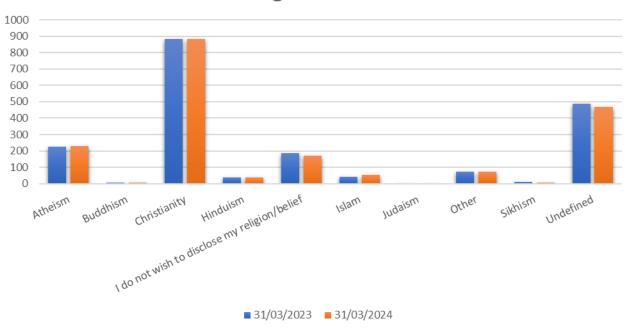


vi. Religious Beliefs

The graph below shows the religious beliefs of employees. Christianity remains the most prevalent religion/belief reporting at 45.71% which is up from 45.14% for the previous year. This remains lower than the demographic figure for Liverpool of 59.7% (Census 2021). https://censusdata.uk/e47000004-liverpool-city-region/ts030-religion#data

24.30 % of records within ESR are recorded as 'undefined' and a further 8.79% stated 'I do not wish to disclose my religion/belief'. Of those employees that have a complete record 45.71% stated Christianity as their religious belief with Atheism second with 11.94% followed by Other with 3.72%. The 2021 Census breakdown of religious beliefs within the North West is as follows; Christianity 52.5%, No Religion 32.6%, Not Stated 5.3%, Muslim 7.6%, Buddhist 0.3%, Hindu 0.7%, Jewish 0.4%, Sikh 0.2% and Other 0.4%. https://censusdata.uk/e12000002-north-west/ts030-religion#data

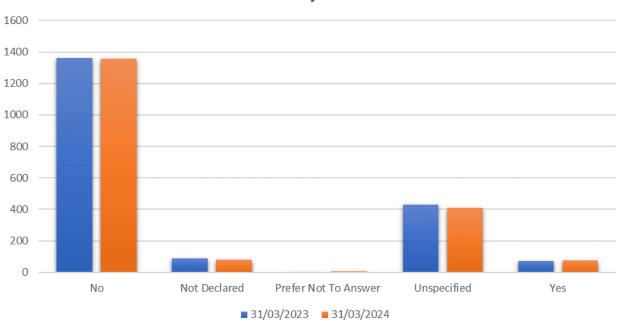
Religion - Heads



vii. Disability

Currently 3.98% of LHCH staff state that they have a disability, however this is in contrast to the number of employees who self-identify as having a disability or long-term illness on the National Staff Survey were the percentage is much higher. 21.20% of ESR records are recorded as 'Unspecified'.

Disability - Heads



5. Gender Re-assignment

Due to the fact that data regarding gender reassignment is protected sensitive information, the Trust does not currently collect this data. LHCH is in the process of developing a gender re-assignment staff policy to help provide support and increase awareness. Gender neutral facilities have been made available throughout the trust for both staff and patients, new capital projects will also create gender neutral changing facilities for patients. Gender reassignment is also considered under all Equality Impact Assessments that are undertaken as part of any Cost Improvement Programmes and Service Redesign/Development.

6. Pregnancy & Maternity

The Trust does not collect data on members of staff that are pregnant, but staff on maternity leave is recorded in ESR.

During the period April 23 - March 2024 a total of 105 staff were recorded as being on maternity leave. This is an increase on the previous year.

7. Marital Status

There has been a 3% increase in staff declaring that they are married compared to 2023. The data shows that staff reporting as divorced has increased by 8.6% and there 120 unknown/blank records in ESR.

8. Recruitment

The Recruitment Team use the TRAC recruitment system to record vacancy posts and use a number of sites to advertise the posts. The systems capture equality information from the application forms, with multiple reporting options to help understand the data.

Although monitoring is collected from applicants recruiting managers are unable to see these details until shortlisting has taken place. The aim of this is to prevent managers from not shortlisting based on their personal details or right to work status and thereby indirectly discriminate. It also prevents recruiting managers to shortlist based on gender.

The table below provides annual recruitment data associated with disability: -

Disclosed a Disability	Number of Applications*	Recruited **	% of All Applicants who Declared a Disability who were recruited	% of All Applicants who were Recruited who declared a disability
Yes	196	9	0.26%	3.35%
No***	3266	257	7.31%	95.54%
Prefer not to say****	53	3	0.09%	1.12%

Total	3515	269	7.65%	100.00%

Source: * Number of Applications > NHS Jobs > Equal Opportunities Progress > Period 01/04/2023 - 31/03/2024

Source: **Number recruited > not available from NHS Jobs report so taken from number of starters in ESR in period 01/04/2023 - 31/03/2024

*** Recruited > No includes 'No' and 'Unspecified' from ESR

**** Recruited > Prefer not to say includes 'Not Declared' from ESR

LHCH is proud to have been awarded the Disability Confident Employer (previously referred to as Two Ticks) and has taken a pro-active approach to the pending introduction of WDES (Workforce Disability Standard in 2019.



The Trust have been successfully accredited as 'Veteran Aware' by the national steering group for the NHS Veteran Covenant Healthcare Alliance and have also been successful in our Employer Recognition Scheme (Silver) application. This means that LHCH has been accredited as exemplars of the best care for veterans, helping to drive improvements in NHS care for people who serve or have served in the UK armed forces and their families.

9. Staff Survey / Workforce Race & Disability Equality Standard

LHCH survey response rate was 64% compared to NHS average of 50%. This was an decrease of 5% from 2022. Achieving a high response rate to the NHS Staff Survey is very important for the quality and utility of the findings, as the higher the survey response rate, the more confident we can be that the survey findings are representative of our workforce.

The results found that 65.74% of respondents answered that they believe that the Trust acts fairly with regard to career progression/promotion regardless of ethnic background, gender, religion, sexual orientation, disability, or age.

The Trusts WRES/WDES 2024 results have been published on the Trust website

Liverpool Heart and Chest Hospital | Equality, Inclusion, Diversity and Belonging (Ihch.nhs.uk)

Overall, there has been some positive improvements in our WRES and WDES results, whilst also highlighting some key areas of focus over the next 12 months.

LHCH STAFF SURVEY TOP RESULTS 2023



RESPONSE RATE 1,209 STAFF = 64%

OUR PEOPLE ARE OUR MOST IMPORTANT ASSET

Note. 2023 results for 'We are safe and healthy' have not been reported due to an issue with the data. Please see https://www.nhsstaffsurveys.com/survey-documents/ for more details.

10. Policies and Procedures

All policies/procedures are consulted on prior to being ratified. An equality impact assessment must also be carried out for each policy. These enable us to determine whether the policy/procedure is likely to have an adverse impact on any particular group of staff. If this is found, we can then put steps in place to address this.

11. Pay

The revised NHS Terms and Conditions (2018 pay reform) sets out clear rates of pay for all bands and details the new pay progression process whereby staff must be compliant with certain criteria; Appraisal in the past 12 months, 100% mandatory training compliance, no capability or disciplinary action. Depending on the band the years until eligible pay progression could be between 2-5 years.

Medical staff also have a system which aligns different role types with defined salaries and progression scales.

On appointment to any role, the HR Recruitment Team ensures that the appointee is placed on the appropriate point of the relevant band based on previous service / experience.

Additional earnings (i.e. Enhancements, overtime, on-call etc.) which although standardised could result in staff earning more than others.

12. Employee Relations

In line with the 'Improving People Practices' (IPP) requirements, a review of disciplinary activity at LHCH during 2022/23 is reported to the Board of Directors on an annual basis. The IPP guidance links with other NHS Improvement guidance on developing a more compassionate and just culture and features within the NHS People Plan. This work aligns closely with our Trust values, is reflective of LHCH as a responsible and caring employer and supports our ambition to be the best place to work.

There was a decrease in the overall number of Employee Relation Cases in 2023-2024, but there was a noted difference in the complexity of cases.

Over the last 12 months (1st April 2023 – 31st March 2024) there were 17 formal disciplinary cases. 11.76% of employees (23/24) who were subject to disciplinary procedures were recorded as BAME. The safeguarding of employee's wellbeing during a formal process remains paramount and is monitored closely with independent pastoral care being identified at the start of every case. There has not been any identified case of harm to an individual who has been the subject of an investigation or disciplinary procedure.

13. Conclusion

This report is intended it meets our PSD requirements and will be published on the LHCH Internet page.

The Trust refreshed its EDIB Strategy in 2022 which sets out our ambition to have a culture of belonging and trust, and to understand, encourage and celebrate diversity in all its forms. The EDIB strategy is supported by an operational action plan with a number of thematic actions designed to support delivery of the strategy.

Year 2 of the action plan has been developed and will further support the drive EDIB work forward. The monitoring and review of equality related activities for both our patients and workforce is undertaken through the Trust's established EDIB Steering Group.

Assurance on activity and progress against the EDIB action plan will be provided to the People Committee on a quarterly basis.



Equality, Diversity, Inclusion & Belonging Strategy (EDIB)

To have a culture of belonging and trust and to understandencourage and celebrate diversity in all its forms

Our Pledges - Big Picture

Celebrate and support diversity, inclusion and the belonging of our people and build an inclusive culture through our staff inclusion networks.

- Encourage people from diverse backgrounds to access and develop their NHS Careers and ensure the workforce is representative of the communities that we serve
- Develop and improve our equality performance and increase diversity within our board and senior leadership
- Commit to a more concerted and systematic approach toreducing health inequalities and addressing unwarranted variation in care, particularly within underrepresented groups

How we will do this - Equality Objectives

- Enhance the visibility of all EDIB activity across the organisation, engage and encourage our employee voice and build grow our LHCH Belong Inclusion Network
- 2. Overhaul our recruitment, promotion and flexible working practices, increase leadership diversity across the organisation and widen employment opportunities to support our community
- 3. Improve experiences for our ethnic minority and disabled workforce as outlined in the Workforce Race / Disability Equality Standard (WRES/WDES) and Anti Racist Framework
- 4. Create a compassionate and inclusive culture through a review and refresh of our leadership training and development programme and EDIB training offer
- Improve the quality of our equality information to facilitate better decision making and ensure compliance with the Public Sector Equality Duty (PSED) and other national equality requirements
- Reduce the barriers experienced by patients, individuals and specific groups who engage with LHCH and identify how to address issues in relation to health inequalities to support better outcomes for all
- Improve patient access and experience to reduce the inequality gap, ensuring patients with learning difficulties and/or language needs are able to access our services

What success will look like:

- Reduce the number of people reporting personal experience of harassment, bullying or abuse.

 Achieve Employee Recognition (ERS) Silver and Veterans Aware Accreditation

- Increased diversity in our workforce composition

 Improved results from national standards e.g. WRES/WDES and EDS2/3
 Improved patient and staff experience as measured by the patient and staff survey (top score for People Promise (we havieed had counts and we are compassionate and