



**Department Application from the School of Health  
& Human Sciences, University of Essex**  
Silver Award



<b>Name of institution</b>	University of Essex	
<b>Department</b>	School of Health & Human Sciences	
<b>Focus of department</b>	<b>STEMM</b>	
<b>Date of application</b>	April 2017	
<b>Award Level</b>	<b>Silver</b>	
<b>Institution Athena SWAN award</b>	<b>Date: September 2013</b>	<b>Level: Bronze</b>
<b>Contact for application</b> Must be based in the department	Professor Gill Green	
<b>Email</b>	gillgr@essex.ac.uk	
<b>Telephone</b>	01206 874144	
<b>Departmental website</b>	<a href="http://www.essex.ac.uk/hhs/">http://www.essex.ac.uk/hhs/</a>	

# 1. LETTER OF ENDORSEMENT FROM THE HEAD OF DEPARTMENT (496 WORDS)

**Recommended word count: Bronze: 500 words | Silver: 500 words**

An accompanying letter of endorsement from the head of department should be included. If the head of department is soon to be succeeded, or has recently taken up the post, applicants should include an additional short statement from the incoming head.

Note: Please insert the endorsement letter **immediately after** this cover page.



University of Essex

Equality Charters Manager,  
Equality Challenge Unit,  
7<sup>th</sup> Floor, Queens House  
55/56 Lincoln's Inn Fields  
London WC2A 3LJ

Dear Sir/Madam,

I am very pleased to endorse this application from the School of Health and Human Sciences (HHS) at the University of Essex for a Silver Athena SWAN award. Our achievements and future actions build upon the work undertaken since the School received the AS Bronze Award in April 2015. Key actions such as the implementation of a mentorship system, more focussed staff appraisals and promotion of flexible working has clearly impacted on staff career progression.

The ethos of Athena SWAN is strongly supported by myself, and clearly echoes the values held by HHS and the partners we work with. It provides a platform to facilitate the advancement of women and enhance our work to promote equality and diversity. The growing focus on activities to recognise barriers to opportunity for BAME and LGBT in addition to gender equality is welcomed within this application. This reflects both the areas that have been identified for further development in our action plan, (e.g. to increase equality and diversity training), as well as notable successes that are a reflection of the values and culture of the school (e.g. the contribution of HHS staff to the recent publication 'LGBT Perspectives – University of Essex Reader'). HHS makes an important contribution to the University SWAN work and a member of HHS staff Chairs the University SWAN steering group.

A key area of achievement has been to ensure that opportunities remain open and encouraging for all and that staff and students are able to balance work and family commitments through flexible working and study. There is more work to do here, and I want to ensure that HHS is an environment for all to thrive, not just survive. We need to be attuned to gaps in attainment and opportunities where they exist, and put in place actions to make a real difference to inequality.

From my own experience, I feel strongly that women starting out in their academic careers should have the opportunity to come together with more senior academics for support and advice. As such I welcome opportunities for individuals to share experiences to motivate and empower other colleagues to achieve their goals. As an example it was a privilege to be present and receive an award at the University's 'Motivational, Empowering and Inspirational Women's Awards' presented by our Chancellor Shami Chakrabarti earlier this year.

I have been closely involved with this application, attending the self-assessment team meetings. The developments planned for example in relation to workload models, appraisal and outreach activities are all mechanisms to support achievement of SWAN objectives. I confirm that the information presented in the application (including qualitative and quantitative data) is an honest, accurate and true representation of HHS. I give my full support to this application and Action Plan and feel confident that we can utilise the SWAN principles to further enhance the new School of Health & Social Care which will replace HHS in October 2017.

Head of School  
Vikki-Jo Scott

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## Notes on Application

### List of Acronyms

AS	Athena SWAN
ASE	Academic Staff primarily with Education Responsibilities
ASER	Academic Staff with Education and Research Responsibilities
ASR	Academic Staff primarily with Research Responsibilities
BAME	Black, Asian & Minority Ethnic
CPD	Continuing Professional Development
E&D	Equality and Diversity
EWN	Essex Women's Network
FD	Foundation Degree
FT	Full time
FTE	Full Time Equivalent
GEM	Gender Equality Charter Mark
HESA	Higher Education Statistics Agency
HHS	School of Health and Human Sciences
HoS	Head of School
HR	Human Resources
KIT	Keeping in Touch
LGBT	Lesbian, gay, bisexual, transgender
NIHR	National Institute of Health Research
PG	Post-graduate
PT	Part time
PGT/PGR	Postgraduate taught/Postgraduate research
REF	Research Excellence Framework
SAM	Subjects Allied to Medicine
SAT	Self Assessment Team
SLA	Service Level Agreement
STEMM	Science, Technology, Engineering Mathematics & Medicine
UG	Undergraduate
UoE	University of Essex
WAM	Workload Allocation Model

### Key to Symbols used in the document and definition:

✓ Impact of actions taken resulting from the HHS SWAN Bronze Award action plan 2015

❖ Good practice we are working towards and included in the current Action Plan for silver 2017.

## 2. DESCRIPTION OF THE DEPARTMENT (529 WORDS)

Recommended word count: Bronze: 500 words | Silver: 500 words

Please provide a brief description of the department including any relevant contextual information. Present data on the total number of academic staff, professional and support staff and students by gender.

HHS is part of the Faculty of Science and Health and is based across two campuses in Colchester and Southend, which are 50 miles apart. Two thirds of staff are based in Colchester and one third in Southend. A large proportion of activity within the School focuses on health and social work professional education.

The University of Essex (UoE) obtained an Athena Swan (SWAN) Bronze Award in September 2013 and a Gender Equality Charter Mark (GEM) in November 2014. The School of Health & Human Sciences received a SWAN Bronze Award in April 2015 which is referred to as HHS SWAN Bronze Award.



In Autumn 2016, a Strategic Review of HHS recommended that in August 2017, Physiotherapy and Sports Therapy leave HHS to join a new School and HHS will be renamed the School of Health & Social Care, within which there will be two distinct groupings: Nursing and Health Studies; and Allied Health, Oral Health and Social Work. The heads of each grouping (both women) were selected following an open application process and will report to the Dean of the School (the current female HoS). These 3 postholders will be joined by the Directors of Education, Research and Employability to form the Senior Leadership Team.

### CURRENT STAFF

Most staff in HHS have clinical qualifications and most students are training to become health and social care professionals. The majority of staff and students are female, reflecting the gender composition of the health and social care professions.<sup>1</sup> In December 2016 there were 110 academic staff (64% women), 37 professional services staff (81% women). In addition, there are 7 clinical

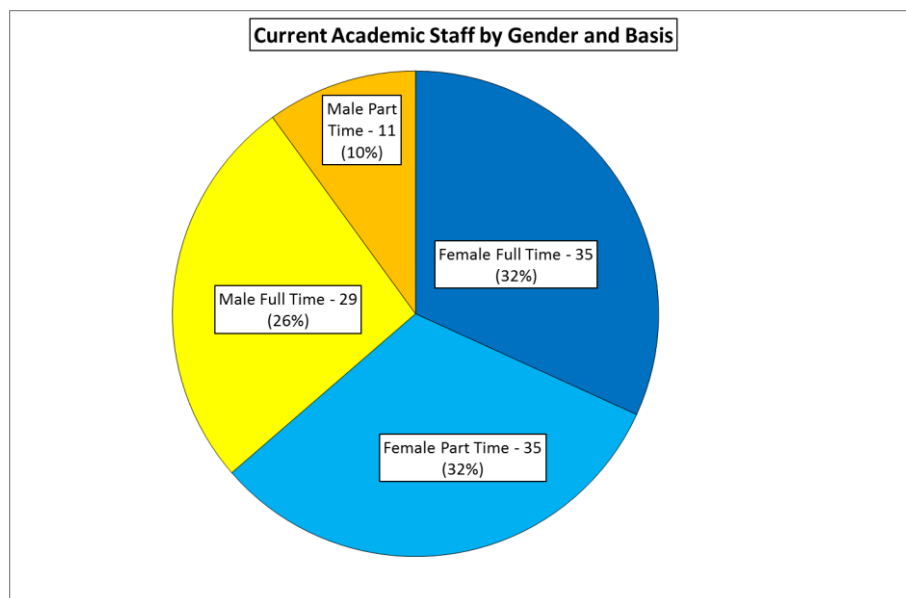
<sup>1</sup> **SOURCE:** NHS Workforce: Summary of staff in the NHS: Results from September 2014 Census Medical and Dental, Non-Medical and GP censuses Published 25 March 2015

lecturers (3 female) employed as part of a Service Level Agreement (SLA) and selected through collaboration with partner organisations and 10 women and 13 men who hold honorary titles. Neither of these groups are direct employees of UoE so are not included in the data below.

Whilst the predominance of females supports the promotion of women's careers, it is important that males as the minority gender are not alienated. We are also mindful of ethnicity and sexual orientation. The last two years have seen the number of BAME staff double from 5 to 10 (5 female). Currently 4 men and 3 women identify as LGBT and 1 person as 'other'.

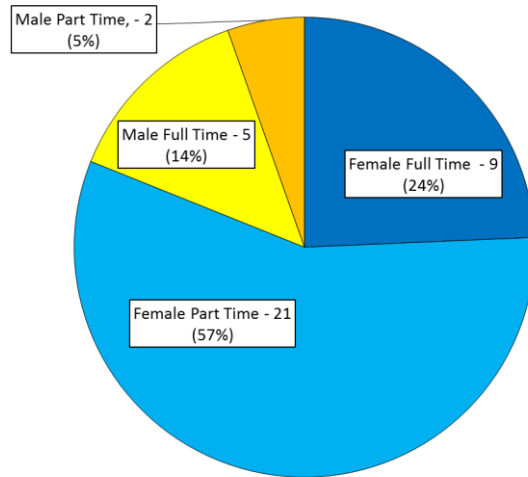
42% of academic (50% of female academic) and 62% of professional services (70% of female professional services) staff are on Part-Time (PT) contracts often combined with clinical work and/or carer commitments. Staff ages range from under 25 to over 65 with 67% aged 35-54.

Academic staff are predominantly employed on ASE (Academic Staff with Education responsibilities) contracts.<sup>2</sup>

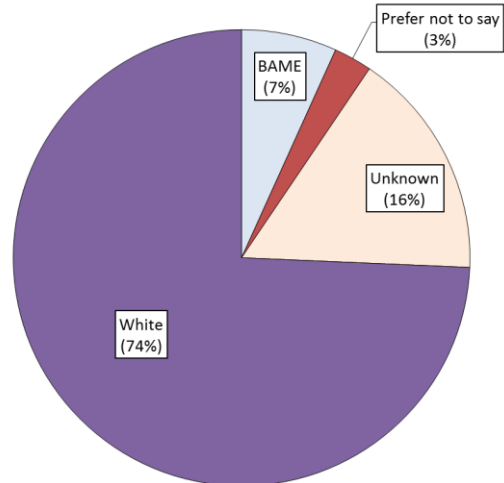


<sup>2</sup> Academic staff at the University of Essex are employed on different types of contracts:  
ASE staff have primarily teaching responsibilities  
ASR staff have primarily research responsibilities  
ASER staff have research and teaching responsibilities

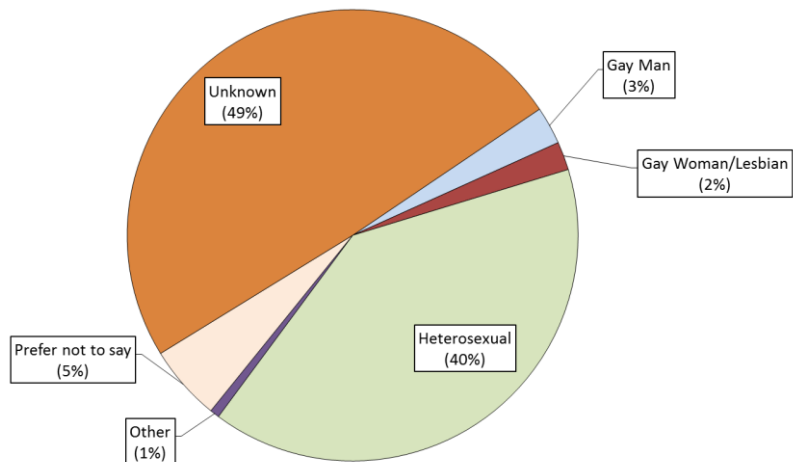
**Current Support Staff by Gender and Basis**

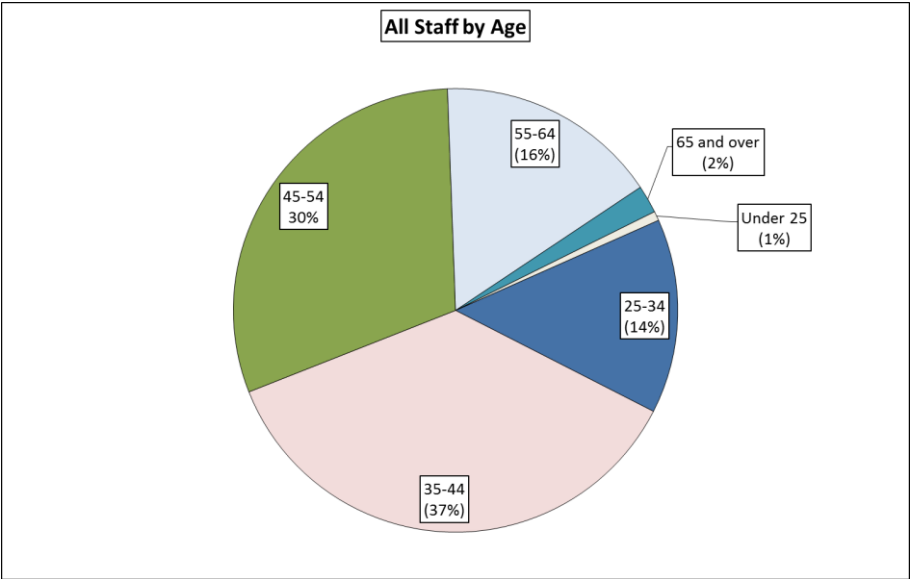


**All Staff By Ethnicity**



**All Staff by Sexual Orientation**





## CURRENT STUDENTS

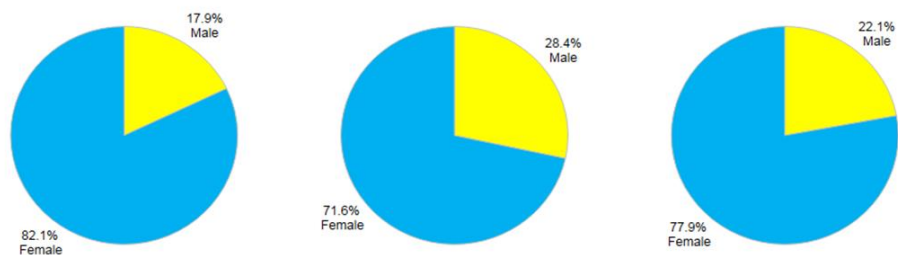
In April 2017 there were 1475 students (80% female), including 921 UG students (82% female, 26% BAME) and 457 PGT students (78% female, 33% BAME) and 95 PGR students (72% female, 24% BAME).

The gender profile of students in HHS broadly reflects the national statistics from HESA showing that 79.5% of all students in Subjects Allied to Medicine (SAM) (the grouping which most closely matches HHS students) are female<sup>3</sup>.

### Current Population - 2016/17 - Split by Gender

Department: Health and Human Sciences

*This includes all students on all stages in that level of study. Undergraduate includes foundation students where applicable.*

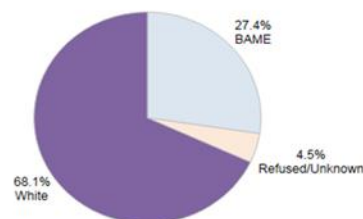


	Undergraduate		Postgraduate Research		Postgraduate Taught	
	Count	%	Count	%	Count	%
Male	165	17.9%	27	28.4%	101	22.1%
Female	756	82.1%	68	71.6%	356	77.9%
Grand Total	921	100.0%	95	100.0%	457	100.0%

### Current Population - 2016/17 - split by Ethnicity

Department: Health and Human Sciences

*This includes all students on all stages in that level of study. Undergraduate includes foundation students where applicable.*



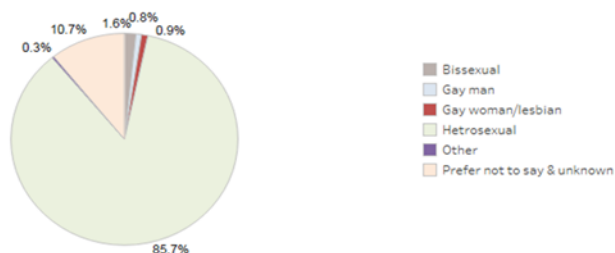
	Count	%
BAME	404	27.4%
Refused/Unknown	66	4.5%
White	1,003	68.1%
Grand Total	1,473	100.0%

<sup>3</sup> HESA data from Equality in higher education: statistical report 2015

### Current Population - 2016/17 - Split by Sexual Orientation

Department: Health and Human Sciences

This includes all students on all stages in that level of study. Undergraduate includes foundation students where applicable.

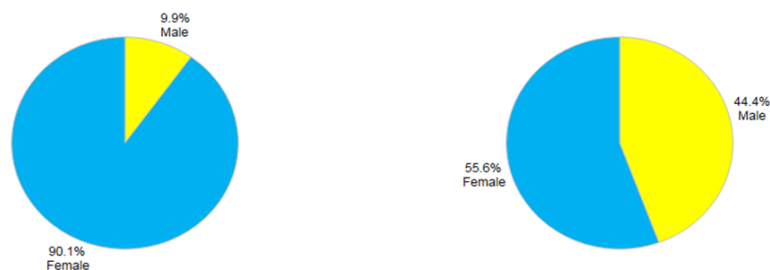


	Count	%
Bisexual	24	1.6%
Gay man	12	0.8%
Gay woman/lesbian	13	0.9%
Hetrosexual	1,262	85.7%
Other	5	0.3%
Prefer not to say & unkn..	157	10.7%
Grand Total	1,473	100.0%

In addition, there are 413 UG (90% female, 19% BAME) and 241 PGT (56% female, 15% BAME) students engaged on modular courses.

### Current Population - 2016/17 - Modular Study Students, Split by Gender

Department: Health and Human Sciences



	Undergraduate		Postgraduate Taught	
	Count	%	Count	%
Male	41	9.9%	107	44.4%
Female	372	90.1%	134	55.6%
Grand Total	413	100.0%	241	100.0%

### 3. THE SELF-ASSESSMENT PROCESS (957 WORDS)

Recommended word count: Bronze: 1000 words | Silver: 1000 words

Describe the self-assessment process. This should include:

- (i) a description of the self-assessment team (SAT)

The SAT formed in January 2014 to apply for a departmental SWAN Award in 2015 and was awarded a Bronze with very positive feedback. Since then, the SAT has overseen delivery of the SWAN Action Plan. Considerable progress and impact is evident in key areas: promotion, flexible working, work life balance, awareness of SWAN and E&D.

As part of the HHS SWAN Bronze Action plan:

- ✓ A SWAN lead for HHS was appointed and she also Chairs the UoE SWAN Steering Group (HHS SWAN Bronze Action 1.1). This is recognised in the HHS Workload Allocation Model (WAM).

The SAT includes a mix of staff in terms of seniority and length of employment and collectively has experience of induction, promotion, parental leave and caring responsibilities. The HHS LGBT champion is also a member. SAT membership is recorded on the WAM.

In October 2015, the membership of the SAT was reviewed and new staff invited to join to have the opportunity to shape strategy, particularly targeting under-represented groups (men, BAME, professional services staff and students). In addition, the SAT successfully applied for a 'frontrunner' (a student appointed under the UoE paid internship scheme) to provide support whilst gaining experience of working in a team.

Name	Role in SAT	Staff role	FT or PT	Relevant biographical Information	Key SWAN Experience	
<b>Gill Green</b>	Chair of SWAN SAT  Academic lead for SWAN	Academic Professor	FT	Has 3 now grown-up children in a dual career family.	<ul style="list-style-type: none"> <li>Promotion</li> <li>Has been on UoE Academic Staffing (promotions) Committee</li> </ul>	
<b>Vikki-Jo Scott</b>	SWAN Exec Team  Head of School	Academic Senior Lecturer	FT	Qualified nurse with two children.	<ul style="list-style-type: none"> <li>Promotion</li> <li>Moved from PT to FT</li> </ul>	
<b>Selena Hammond</b>	SWAN Exec Team  Survey team	Academic Lecturer	FT	Qualified Occupational Therapist who returned to work FT after maternity leave	<ul style="list-style-type: none"> <li>Promotion</li> <li>Currently on maternity leave</li> </ul>	
<b>Susan Smith</b>	SWAN Exec Team  Led data collection	Academic Research Adviser	PT	Has a research background and has two teenage children.	<ul style="list-style-type: none"> <li>Works in NIHR funded 'Research Design Service' in HHS</li> </ul>	
<b>Claire de Valmency</b>	SWAN Exec Team  Data collection team	Professional Services Contracts Administrator	PT	Working flexibly to support family commitments.	<ul style="list-style-type: none"> <li>Flexible Working</li> </ul>	

<b>Nikki Pockett</b>	SWAN Exec Team  Led on marketing until leaving	Student		Combined PT study with a FT job at UoE and supporting 2 children and a disabled family member.	<ul style="list-style-type: none"> <li>PG Student</li> <li>PG Mentor</li> <li>Promotion</li> </ul>	
<b>Nikki Williamson</b>	SWAN Exec Team	Academic Lecturer	FT	Qualified Occupational Therapist and MSc student.	<ul style="list-style-type: none"> <li>Promotion</li> <li>PG student</li> </ul>	
<b>Denise Green</b>	Leads on professional services initiatives	Professional Services School Manager	FT	Started as the Undergraduate Administrator and is now School Manager.	<ul style="list-style-type: none"> <li>Career Progression within department</li> </ul>	
<b>Christopher Green</b>	Provided critical ongoing feedback  Case study	Academic Senior Lecturer	FT	Nursing background. Parent with informal caring responsibilities.	<ul style="list-style-type: none"> <li>Promotion</li> </ul>	
<b>Teresa Eade</b>	Links SWAN to the mentoring scheme	Academic Senior Lecturer	FT	Speech and Language Therapy background., Parent and PT doctoral student	<ul style="list-style-type: none"> <li>Senior Fellow of the Higher Education Academy</li> <li>PGR student</li> <li>School Disability Liaison Officer</li> </ul>	
<b>Teresa Wagstaffe</b>	Links SWAN to student engagement	Academic Lecturer	PT	Qualified nurse	<ul style="list-style-type: none"> <li>Experience of Permanency and Promotion process</li> </ul>	

<b>Jade Shortland</b>	Links SWAN to professional services initiatives	Professional Services	PT	Achieved upgrade on returning from maternity leave.	<ul style="list-style-type: none"> <li>• Maternity leave</li> <li>• Flexible working</li> <li>• Successful HERA Application</li> </ul>	
<b>Colm Gregory</b>	Promotes SWAN among male colleagues	Academic	FT	Combines academic and practice life	<ul style="list-style-type: none"> <li>• Transferred from PT to FT</li> </ul>	
<b>Camille Cronin</b>	Leads on SWAN in Southend. Links SWAN to mentoring	Academic Senior Lecturer	FT	Throughout her career has balanced work, study and family commitments.	<ul style="list-style-type: none"> <li>• Transferred from PT to FT</li> <li>• Promotion</li> </ul>	
<b>Alison Taylor-Lamb</b>	Leads on induction information gathering	Academic	FT	Has experienced nursing within the military and NHS. Two children.	<ul style="list-style-type: none"> <li>• Induction</li> </ul>	
<b>Mary Kennedy</b>	Links SWAN to the innovative introduction of Schwartz Round	Academic	PT	A qualified nurse who held a range of senior position during her long career in the NHS.	<ul style="list-style-type: none"> <li>• Induction</li> </ul>	
<b>Winifred Eboh</b>	Links SWAN to BAME initiatives  Joined the SAT in March 2017	Academic	FT	Of Nigerian parentage, grew up in Manchester where nursing and midwifery training completed.	<ul style="list-style-type: none"> <li>• Induction</li> <li>• Combining FT work with PhD study and parenting</li> </ul>	
<b>Julia Greenwood</b>	University SWAN Co-ordinator. Links with HR and E&D Departments.	Professional Services	PT	Was working PT on returning from maternity leave.	<ul style="list-style-type: none"> <li>• Currently on maternity leave</li> </ul>	
<b>Caroline Bou-Habib</b>	Frontrunner to support HHS SWAN  Supports marketing and student engagement	Student Frontrunner	FT	Second year UG student from the EU	<ul style="list-style-type: none"> <li>• FT UG Student</li> </ul>	

(ii) an account of the self-assessment process

The SAT meets termly in core hours and rotating days to maximise attendance and a smaller SWAN Executive team (consisting of 5 SAT members at any one time including HoS) meets monthly and reports back to SAT.

- ✓ SWAN activities are reported at UoE SWAN Steering Group meetings. They are also reported at termly staff meetings (HHS SWAN Bronze Action 1.2) and regularly feature in the monthly HHS staff newsletter.

To increase engagement of the wider staffing body:

- ✓ Following each SAT meeting, members take part in a SWAN promotional /social event held in the HHS foyer (HHS SWAN Bronze Action 5.7).
- ❖ 2017 Action 1.1: SAT will invite all staff to attend meetings in the future in order to further promote SWAN and provide opportunities for more junior staff to gain experience of committees.

The SAT identifies areas of activity and members volunteer to take them forward, e.g. carrying out interviews about the induction experience with newly appointed staff. In May 2016 SAT sent a survey based on UK Research Council's cultural analysis tool (also used in 2014) to HHS staff and students to identify changes and areas for further development.

- ✓ The staff survey was completed by 60% of academic staff (69% female) and 60% of professional services staff (79% female) surpassing the target 50% response rate (HHS SWAN Bronze Action 1.3)
- ✓ 228 students (80% female and 25% BAME) completed the survey. (HHS SWAN Bronze Action 1.3)

In addition, SAT identified staff with experience of specific issues relevant to career development (e.g. induction, parental leave, flexible working, conducting appraisals, applying for promotion, mentorship). Over 30 staff provided feedback about their experiences. Confidentiality was assured and anonymity safeguarded of those providing negative comments.

All SAT members reviewed and gave feedback on the current application.

The HHS SWAN Lead attends regional events to share best practice and raises awareness of SWAN across the University, contributing to a number of Essex Women's Network (EWN) events and promoting the good practice of the School.



*Professor Gill Green, HHS Athena Swan Lead, Essex Women's Network event, Nov 2016*

Colleagues from the University of East Anglia and King's College London were approached and provided detailed critical feedback on the application. In line with UoE SWAN practice, the application was also reviewed internally by colleagues in HHS and other departments, HR and members of the UoE Steering Group. This ensures that learning from critical feedback is shared within the University.

### **(iii) Plans for the future of the self-assessment team**

The Executive team and the SAT will continue to meet as described to oversee implementation of the 2017 Action Plan, keep in touch with SATs across the University and the sector, keep abreast of new gender, BAME and LGBT equality initiatives, carry out staff surveys, report HHS SWAN progress back to UoE SWAN Steering Group, contribute to the UoE SWAN Newsletter and promotional events.

- ❖ 2017 Action 1.2: SWAN lead will continue to feedback at staff meetings and UoE SWAN Steering Committee. It will report to the new Senior Leadership team of the School of Health & Social Care
- ❖ 2017 Action 1.3: SAT will replace 5 members each year, targeting specific groups, to broaden representation and increase representation of male and BAME staff and students.
- ❖ 2017 Action 1.4: SAT will continue to promote the ethos of SWAN and raise the profile of new initiatives and events.

#### 4. A PICTURE OF THE DEPARTMENT (1927 WORDS)

Recommended word count: Bronze: 2000 words | Silver: 2000 words

Throughout this application we are using the most recent figures that were available at the time of writing each section. The data are presented by academic year 2013/14, 2014/15, 2015/16. Student data are based on the figures recorded at the end of the academic year. Staff data are taken at 31st December for each academic year and are based on headcount rather than FTE. Professional and support staff are referred to as 'professional services'. There are some differences in the data compared to the application submitted in April 2015. This is a result of action taken from our previous submission where an action was set to improve data collection, (eg. Degree and modular students are now shown in separate tables to enable more meaningful comparison with HESA data which does not include modular students).

##### 4.1. Student data

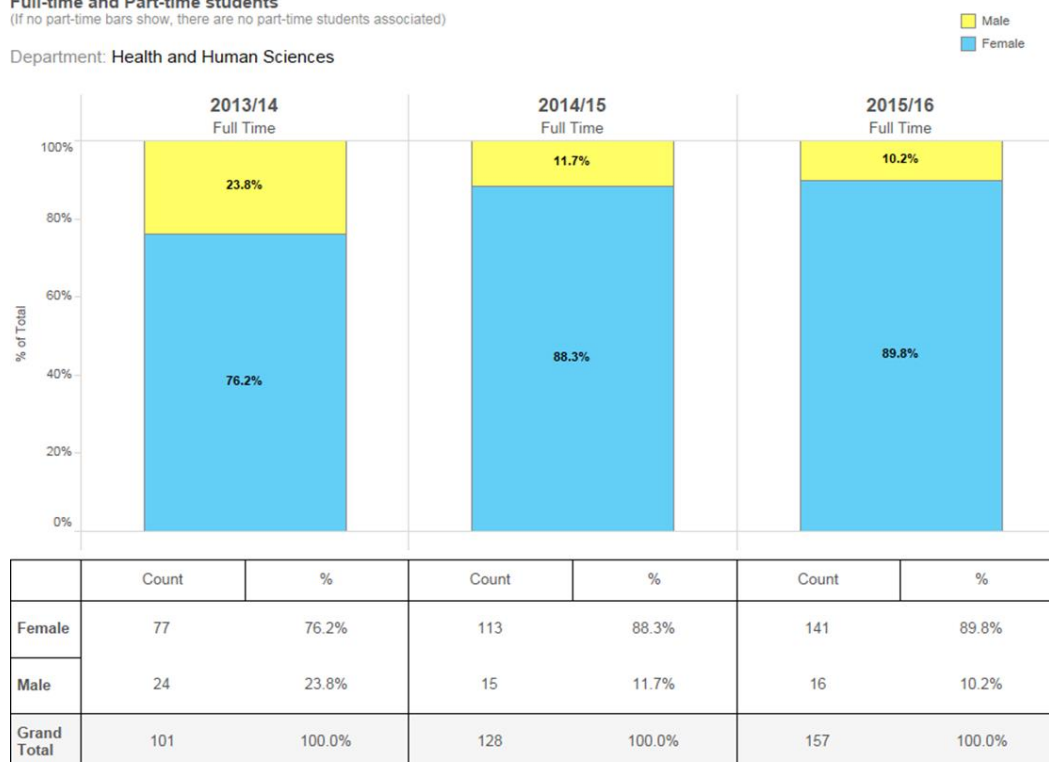
###### (i) Numbers of men and women on access or foundation courses

###### Number of Students by Gender: Foundation Degree

###### Full-time and Part-time students

(If no part-time bars show, there are no part-time students associated)

Department: Health and Human Sciences



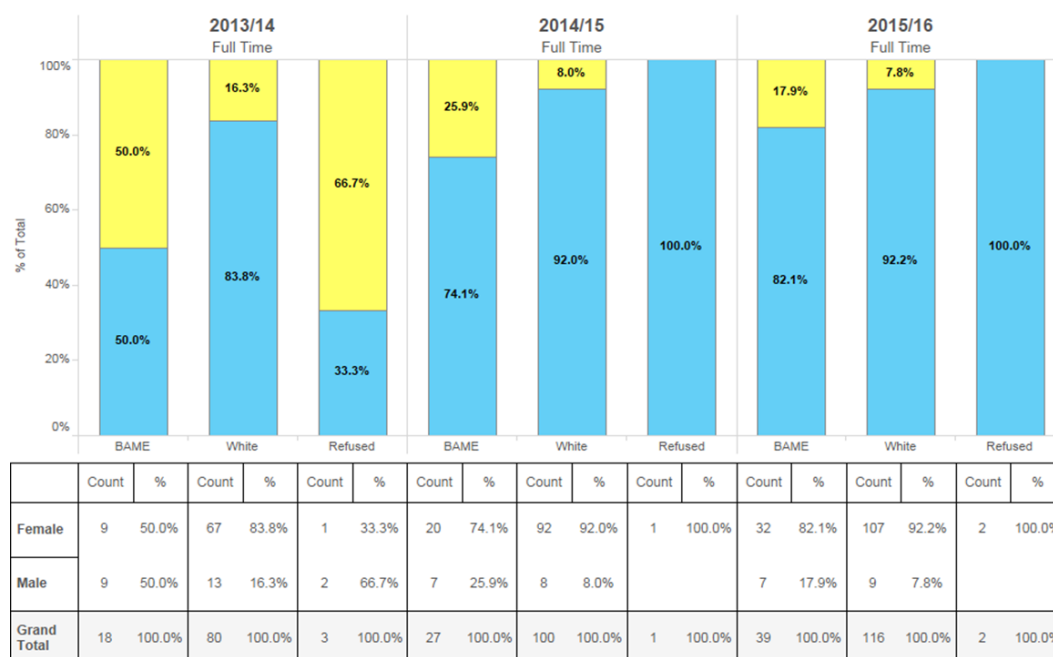
## Number of Students by Gender: Foundation Degree

### Full-time and Part-time students

(If no part-time bars show, there are no part-time students associated)

Department: Health and Human Sciences

Male  
Female



All FD students are FT. The proportion of women has increased over the last 3 years from 76% to almost 90% and the proportion of BAME students from 18% to 25%.

- ✓ FD student numbers have increased as new funding opportunities have emerged to assist professionalisation of individuals (predominantly women) in low paid applied health posts (HHS SWAN Bronze Action 2.1).

The FD programmes are moving to an Apprenticeship model of delivery with guaranteed funding.

- ❖ 2017 Action 2.1: Work with employers to generate applications from across the workforce, including those currently under represented and out of step with the gender/ BAME/ LGBT mix in the workforce population.

(ii) Numbers of undergraduate students by gender

Full- and part-time by programme. Provide data on course applications, offers, and acceptance rates, and degree attainment by gender.

**UNDERGRADUATE FULL TIME: COURSE APPLICATIONS, OFFERS AND ACCEPTANCE RATES**

	2013/14		TOTAL	2014/15		TOTAL	2015/16		TOTAL
	Male	Female		Male	Female		Male	Female	
Applications	200 (14%)	1247 (86%)	<b>1447</b> <b>(100%)</b>	392 (21%)	1466 (79%)	<b>1858</b> <b>(100%)</b>	438 (21%)	1638 (79%)	<b>2076</b> <b>(100%)</b>
Offers	37 (14%)	225 (86%)	<b>262</b> <b>(100%)</b>	115 (22%)	411 (78%)	<b>526</b> <b>(100%)</b>	104 (21%)	388 (79%)	<b>492</b> <b>(100%)</b>
Acceptance	24 (15%)	137 (85%)	<b>161</b> <b>(100%)</b>	52 (17%)	262 (83%)	<b>314</b> <b>(100%)</b>	57 (18%)	252 (82%)	<b>309</b> <b>(100%)</b>

The proportion of FT UG female applicants, offers and acceptances is consistently over 78%. This correlates with the national trend for nursing and allied health professions.

- ❖ 2017 Action 2.2: Organise focus groups to identify any barriers affecting under-represented groups (eg. Men) applying for programmes.
- ❖ 2017 Action 2.3: Ensure targeted outreach recruitment activities to reach under-represented populations.

**UNDERGRADUATE PART TIME: COURSE APPLICATIONS, OFFERS AND ACCEPTANCE RATES (OCCUPATIONAL THERAPY AND PHYSIOTHERAPY)**

	2013/14		TOTAL	2014/15		TOTAL	2015/16		TOTAL
	Male	Female		Male	Female		Male	Female	
Applications	51 (35%)	96 (65%)	<b>147</b> <b>(100%)</b>	52 (34%)	99 (66%)	<b>151</b> <b>(100%)</b>	60 (37%)	104 (63%)	<b>164</b> <b>(100%)</b>
Offers	3 (12%)	22 (88%)	<b>25</b> <b>(100%)</b>	4 (20%)	16 (80%)	<b>20</b> <b>(100%)</b>	8 (22%)	28 (78%)	<b>36</b> <b>(100%)</b>
Acceptance	3 (12%)	22 (88%)	<b>25</b> <b>(100%)</b>	4 (20%)	16 (80%)	<b>20</b> <b>(100%)</b>	8 (22%)	28 (78%)	<b>36</b> <b>(100%)</b>

Course applications for UG PT courses in occupational therapy and physiotherapy were made directly to HHS up until 2015/16. Females were more likely to be offered and accept a place.

- ❖ 2017 Action 2.4: At appraisal check that E&D training completed and make it a compulsory part of their training going forward.

## Number of Students by Gender

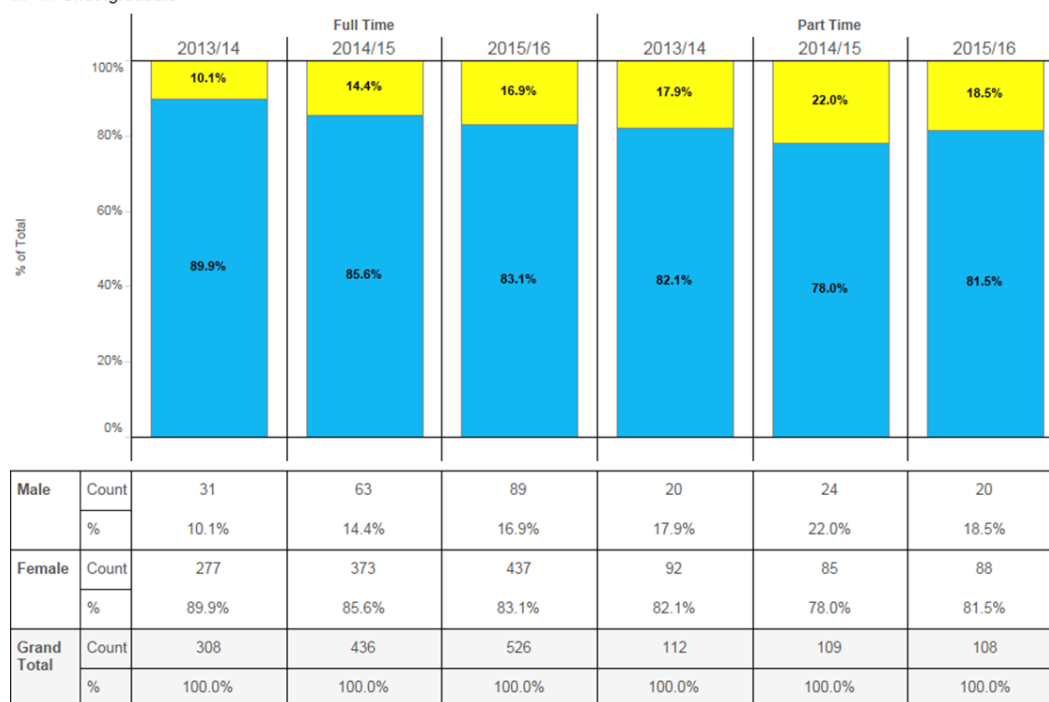
### Number of Full-time and Part-time students

(If no part-time bars show, there are no part-time students associated)

Department: Health and Human Sciences

Level: Undergraduate

Sex  
Male  
Female



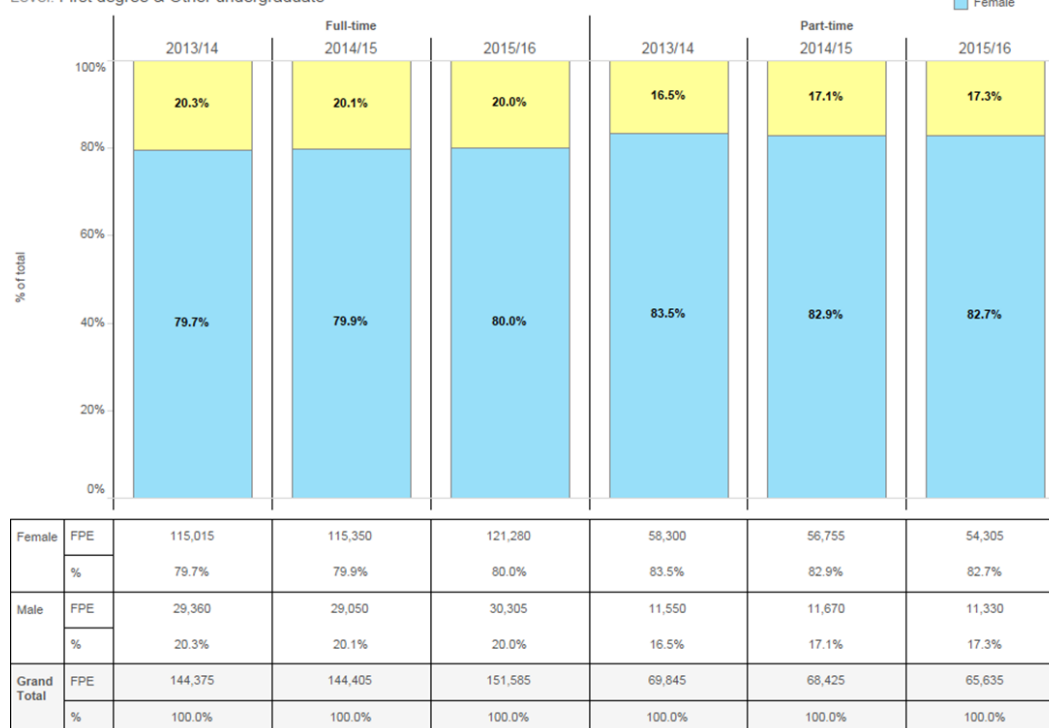
## HESA Data: Whole HE Sector

### Number of Full-time and Part-time students

JACs Subject: (2) Subjects allied to medicine

Level: First degree & Other undergraduate

Sex  
Male  
Female



### Number of Students by Gender

#### Number of Full-time and Part-time students

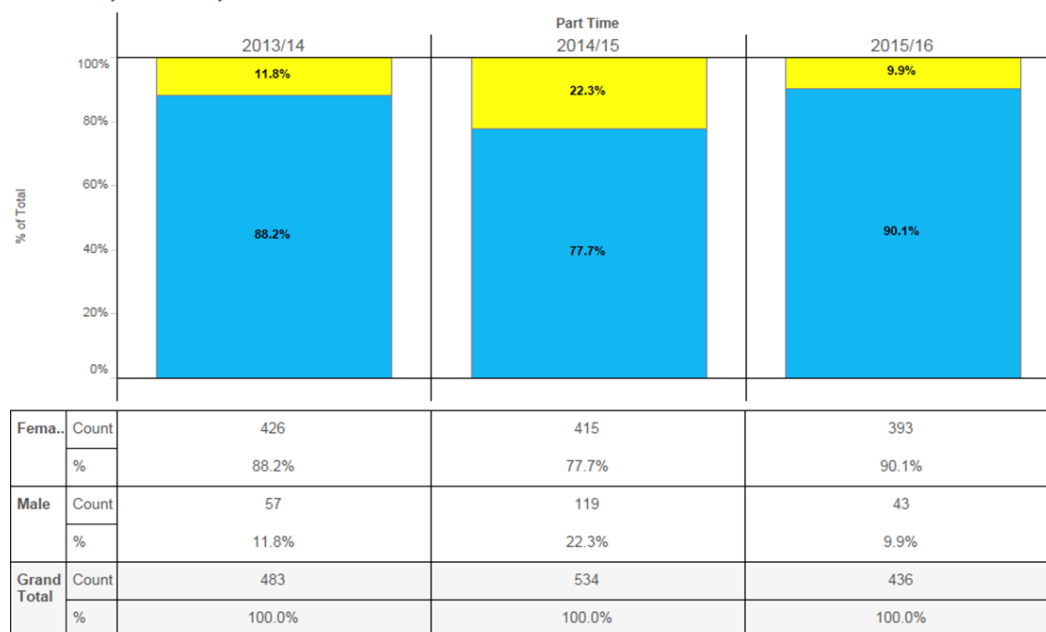
(If no part-time bars show, there are no part-time students associated)

Department: Health and Human Sciences

Level: Undergraduate

Sex  
 Male  
 Female

Modular study students only



The number of UG FT students has grown each year. The proportion of female FT students has fallen a little from 90% to 83% and proportion of female PT UG students has fluctuated between 78-82%. These figures are comparable with national figures for SAM.

The number of modular students has fluctuated a little although the proportion of females is consistently over 77%.

About 20% of non-modular, and 100% of modular students are PT.

- ✓ Mindful of the high proportion of PT students, HHS has devised a study environment to support students with multiple demands on their time, e.g. Teaching is offered at both campuses and sometimes in their workplace to facilitate student access. There are online modules and social media is used to enhance communication. (HHS SWAN Bronze Action 2.2)

## GENDER COMPOSITION BY DEGREE COURSE - 2015/16

Number of Full-time and Part-time Undergraduate students

			2015/16		2015/16	
			Full Time		Part Time	
Qualification Type	Course Title	Sex	Count	%	Count	%
Bachelor of Arts	Social Work	Female	43	87.8%		
		Male	6	12.2%		
Bachelor of Science	Health Care	Female			1	100.0%
Bachelor of Science	Health Care Practice	Female			12	92.3%
		Male			1	7.7%
Bachelor of Science	Health Studies	Female	3	100.0%		
Bachelor of Science	Nursing (Adult)	Female	263	95.6%		
		Male	12	4.4%		
Bachelor of Science	Nursing (Adult) Work Based Learning	Female	46	88.5%		
		Male	6	11.5%		
Bachelor of Science	Nursing (Mental Health)	Female	35	71.4%		
		Male	14	28.6%		
Bachelor of Science	Nursing (Mental Health) Work Based Learning	Female	9	60.0%		
		Male	6	40.0%		
Bachelor of Science	Occupational Therapy	Female			41	82.0%
		Male			9	18.0%
Bachelor of Science	Oral Health Science	Female	7	70.0%		
		Male	3	30.0%		
Bachelor of Science	Physiotherapy	Female			34	77.3%
		Male			10	22.7%
Bachelor of Science	Sports Therapy	Female	31	42.5%		
		Male	42	57.5%		
Grand Total			526	100.0%	108	100.0%

The gender balance varies by course with a high proportion of females on nursing courses and males on the sports therapy course. The proportion of female students in the new School of Health & Social Care (which does not include Sports Therapy or Physiotherapy) is likely to become even higher.

- ❖ 2017 Action 2.5: Monitor gender trends in the new School of Health & Social Care and take actions described above 2.2-2.4 to encourage males to apply.

BAME students make up 55% of students on Mental Health Nursing courses and 42% of students on social work courses and about 60% of BAME students are female. Analysis has shown some gap in attainment and attrition, which is being addressed (see section below on degree outcomes). More signposting to support mechanisms is also required.

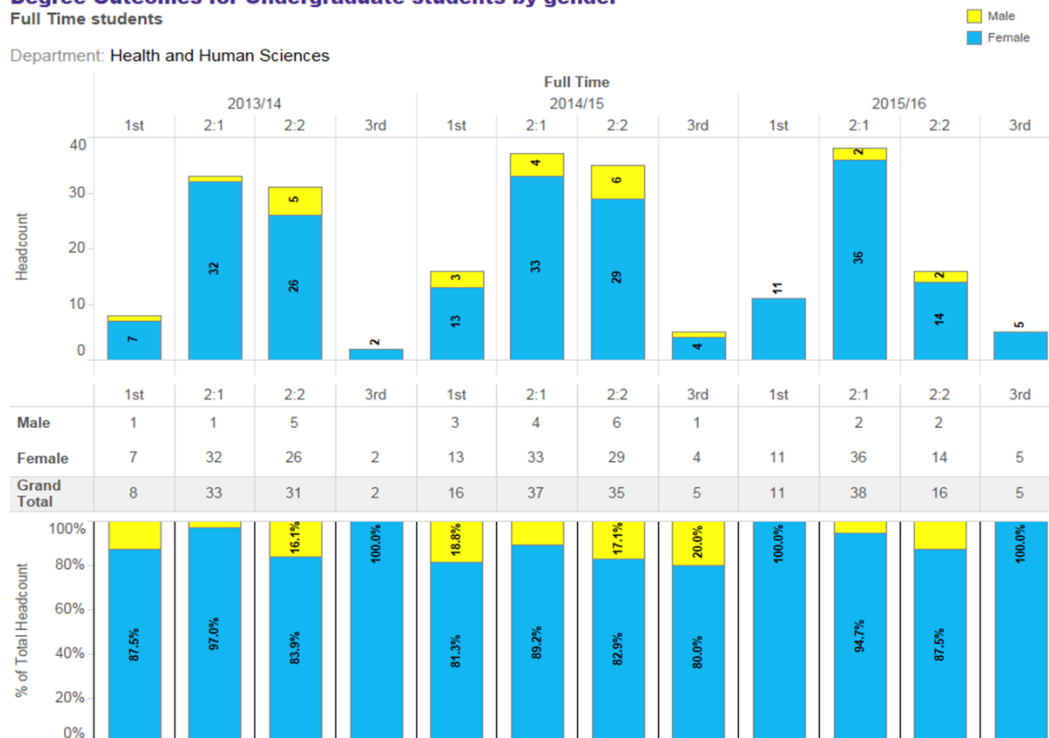
- ❖ 2017 Action 2.6: Target BAME students to engage with UoE peer-mentoring scheme.

## Full Time Degree outcomes

### Degree Outcomes for Undergraduate students by gender

Full Time students

Department: Health and Human Sciences

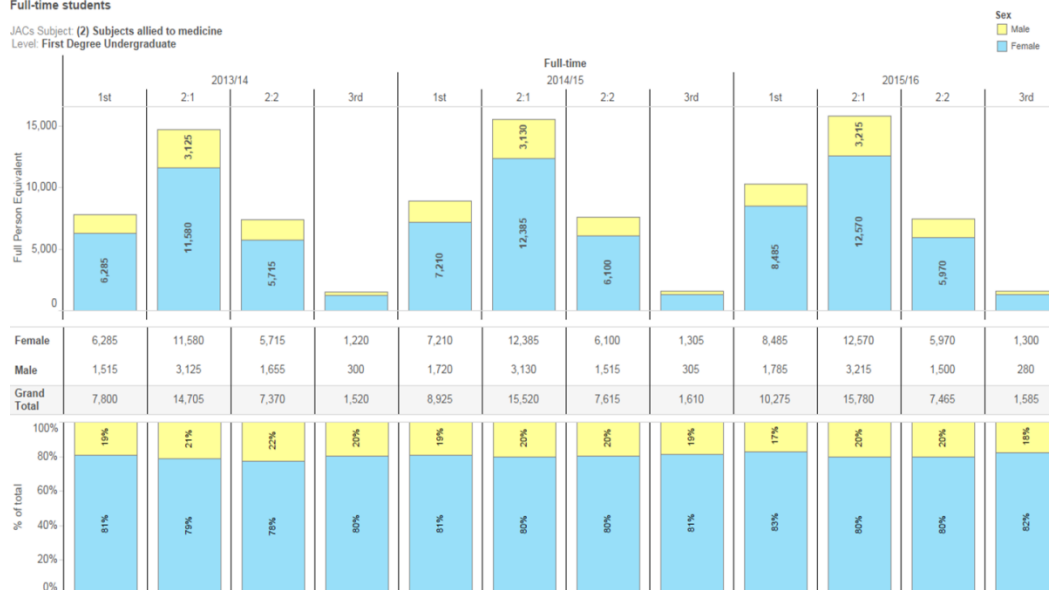


## Benchmark data

### HESA Data: Whole HE Sector

Full-time students

JACs Subject (2) Subjects allied to medicine  
Level: First Degree Undergraduate



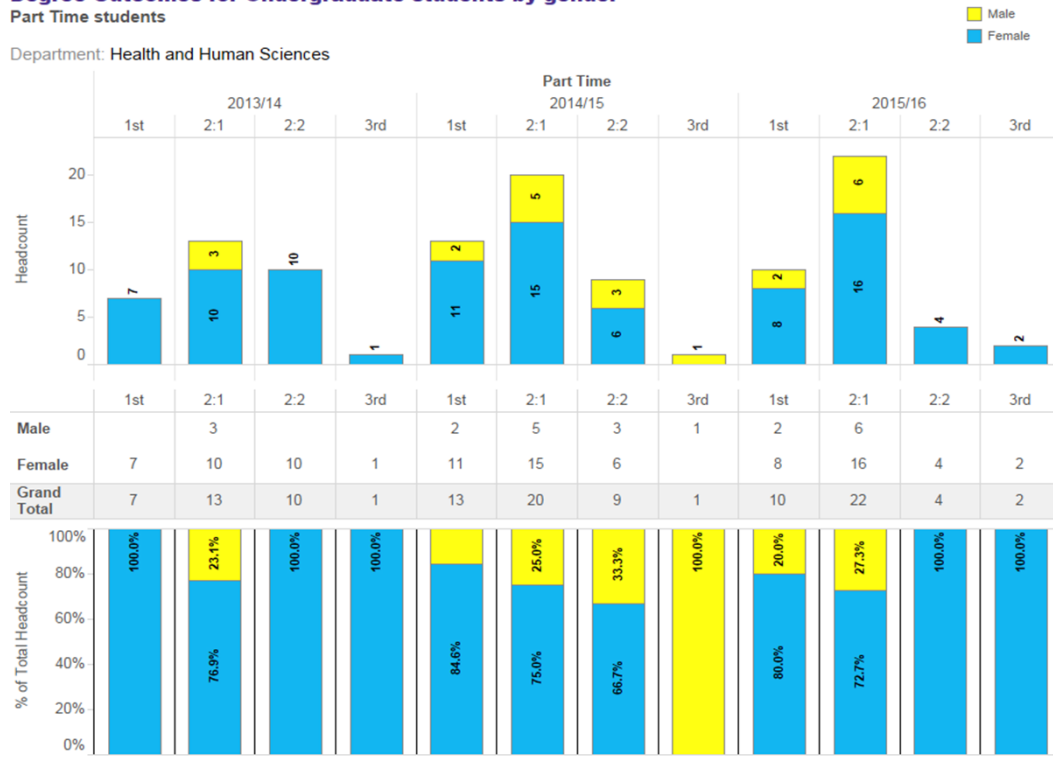
Discrepancies between % of total and Full Person Equivalent are due to rounding of figures to allow publication. All data is rounded to the nearest 5 FPE, however % of total will calculate from the specific number.

## Part Time Degree outcomes

### Degree Outcomes for Undergraduate students by gender

Part Time students

Department: Health and Human Sciences

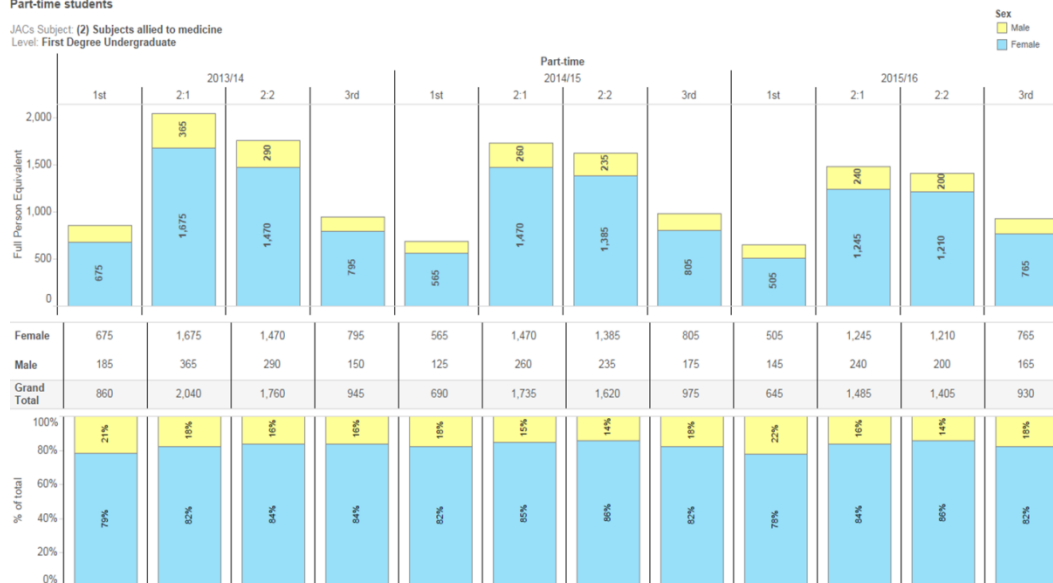


## Benchmark data

### HESA Data: Whole HE Sector

Part-time students

JACs Subject (2) Subjects allied to medicine  
Level: First Degree Undergraduate



Discrepancies between '% of total' and 'Full Person Equivalent' are due to rounding of figures to allow publication. All data is rounded to the nearest 5 FPE, however '% of total' will calculate from the specific number.

There are no clear gender trends, reflecting the national picture, and no discernible difference between FT and PT students. However, BAME students consistently achieve lower degree classifications. The following factors were identified as contributory: a) many BAME students live in London and there is a relationship between distance from placement/campus base and attainment/attrition; b) many had not experienced study in the UK previously; c) whilst all students meet the minimum tariff entry requirement, BAME students tend to have a lower tariff on entry. The delivery of programmes across both campuses and the appointment of a HHS Literacy and Numeracy tutor has already resulted in the degree attainment gap narrowing. In 2013/14 one-quarter (3/12) of BAME students achieved a first or 2:1 and by 2015/16 this had increased to one half (11/22), which is getting closer to the rate of 63-80% for white students.

- ❖ 2017 Action 2.7: Raise awareness of the University Talent Development Centre at a staff meeting so that staff promote it more effectively to students.
- ❖ 2017 Action 2.8: Offer pre-sessional courses on campus to students to enhance their skills.

(iii) Numbers of men and women on postgraduate taught degrees

Full- and part-time. Provide data on course application, offers and acceptance rates and degree completion rates by gender.

**PGT FULL TIME: COURSE APPLICATIONS, OFFERS AND ACCEPTANCE RATES**

	2013/14		TOTAL	2014/15		TOTAL	2015/16		TOTAL
	Male	Female		Male	Female		Male	Female	
Applications	164 (23%)	538 (77%)	<b>702 (100%)</b>	138 (22%)	479 (78%)	<b>617 (100%)</b>	127 (21%)	485 (79%)	<b>612 (100%)</b>
Offers	57 (25%)	172 (75%)	<b>229 (100%)</b>	48 (20%)	187 (80%)	<b>235 (100%)</b>	23 (12%)	174 (88%)	<b>197 (100%)</b>
Acceptance	31 (23%)	106 (77%)	<b>137 (100%)</b>	43 (21%)	164 (79%)	<b>207 (100%)</b>	19 (11%)	148 (89%)	<b>167 (100%)</b>

**PGT PART TIME: COURSE APPLICATIONS, OFFERS AND ACCEPTANCE RATES**

	2013/14		TOTAL	2014/15		TOTAL	2015/16		TOTAL
	Male	Female		Male	Female		Male	Female	
Applications	47 (30%)	110 (70%)	<b>157 (100%)</b>	46 (37%)	78 (63%)	<b>124 (100%)</b>	48 (44%)	62 (56%)	<b>110 (100%)</b>
Offers	46 (29%)	110 (71%)	<b>156 (100%)</b>	46 (37%)	77 (63%)	<b>123 (100%)</b>	48 (44%)	62 (56%)	<b>110 (100%)</b>
Acceptance	46 (29%)	110 (71%)	<b>156 (100%)</b>	46 (38%)	76 (62%)	<b>122 (100%)</b>	48 (44%)	62 (56%)	<b>110 (100%)</b>

The percentage of female applicants for FT PGT programmes is consistently about 70%

❖ See 2017 Actions 2.2-2.3

In 2013/14 the gender ratio between applications and offers for FT PGT was very similar although in 2015/16 females were proportionally more likely than males to be offered and accept a place. We have fed this information back to HHS staff involved in the admissions process (which includes a face to face interview).

❖ See 2017 Action 2.4

This gender bias is not apparent among PT PGT applications and the proportion of men applying has increased reach year reaching 44% in 2015/16.

### Number of Students by Gender

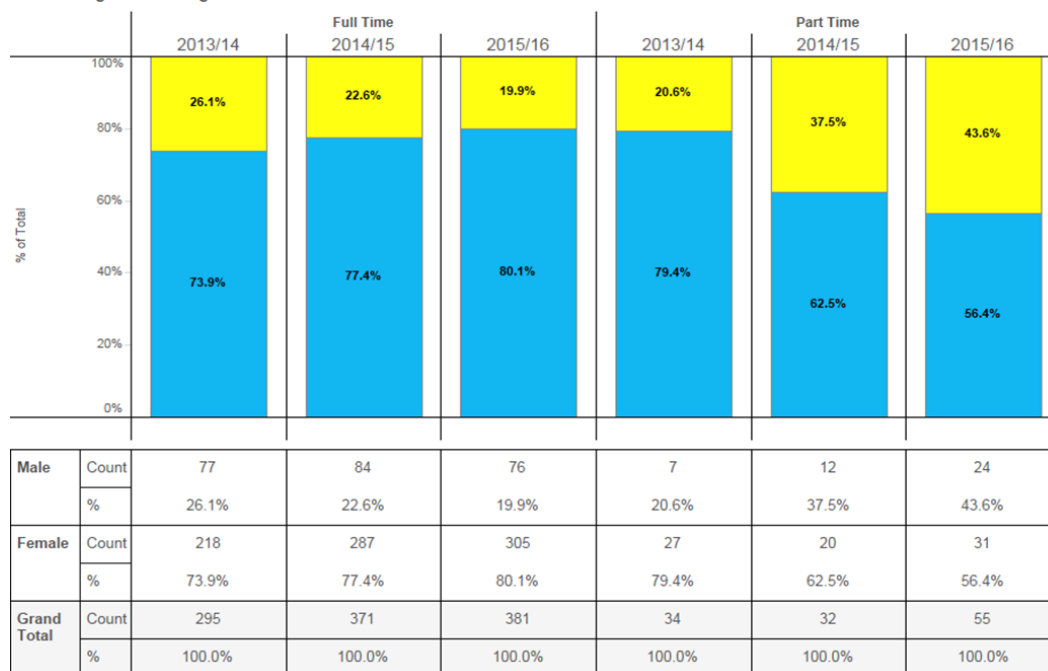
#### Number of Full-time and Part-time students

(If no part-time bars show, there are no part-time students associated)

Department: Health and Human Sciences

Level: Postgraduate Taught

Sex  
Male  
Female



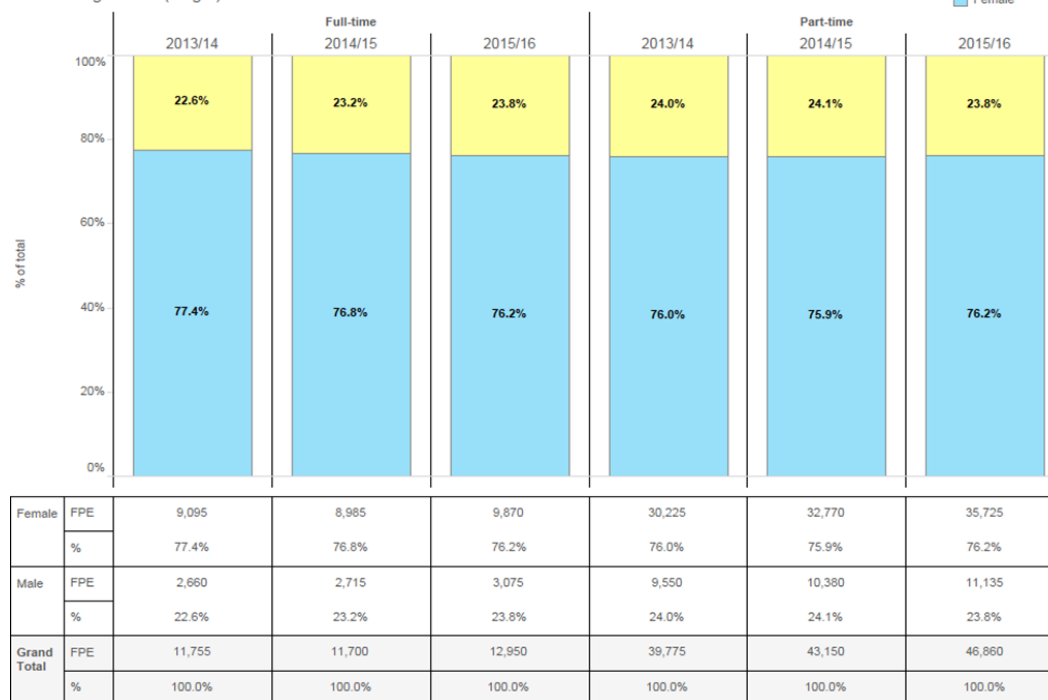
### HESA Data: Whole HE Sector

#### Number of Full-time and Part-time students

JACs Subject: (2) Subjects allied to medicine

Level: Postgraduate (taught)

Sex  
Male  
Female



## Modular PGT students

### Number of Students by Gender

#### Number of Full-time and Part-time students

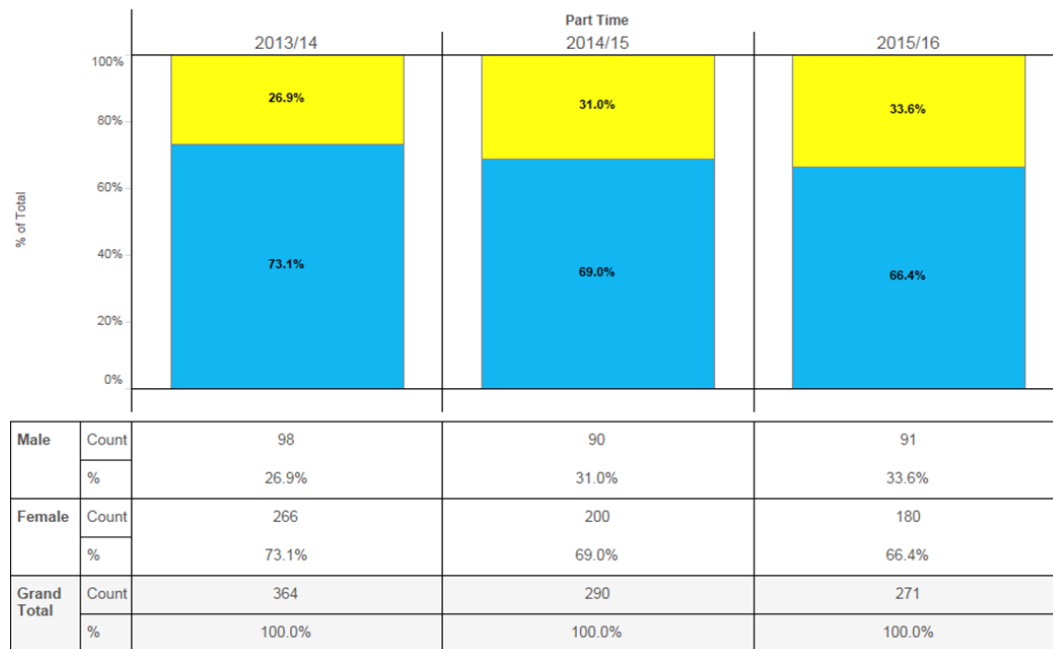
(If no part-time bars show, there are no part-time students associated)

Department: Health and Human Sciences

Level: Postgraduate Taught

Sex  
Male  
Female

Modular study students only



The proportion of female FT PGT students has increased annually from 74%-80% which equates with HESA data for the whole sector. The proportion of female modular students is also comparable. However, there is more equal gender balance among PT PGT students with the proportion of men increasing to 44% in 2015/16.

The ethnic composition of PGT students has remained steady in the last 3 years with 24-27% of FT PGT students identifying themselves as BAME and 12-15% of PT PGT students. The proportion of female BAME students is pronounced in Nursing accounting for (45/96) 47% of the total in 2015/16.

The Occupational Therapy team recently conducted focus groups with BAME students to discuss how current practice could be more inclusive and we intend to roll this out across the school

- ❖ 2017 Action 2.9: Discuss inclusivity, particularly of BAME female students, at Staff-Student Liaison Committees to get recommendation about how current practice could be more inclusive.

## GENDER COMPOSITION BY DEGREE COURSE - 2015/16

Number of Postgraduate Taught Full-time and Part-time students

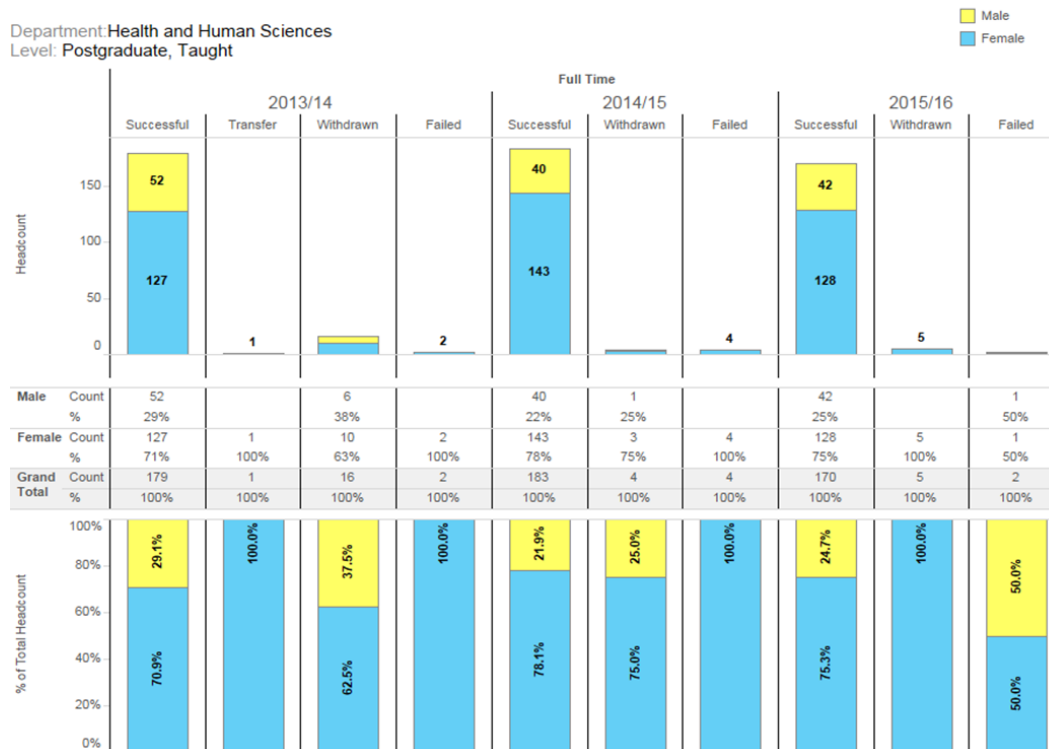
			2015/16		2015/16	
			Full Time		Part Time	
Qualification Type	Course Title	Sex	Count	%	Count	%
Graduate Certificate	Psychological Well-Being Practitioner (Low Intensity)	Female	6	54.5%		
		Male	5	45.5%		
Master of Arts	Health and Organisational Research	Female	1	50.0%		
		Male	1	50.0%		
Master of Public Health	Public Health	Female			2	100.0%
Master of Science	Advanced Periodontal Practice	Female			2	66.7%
		Male			1	33.3%
Master of Science	Health Care Practice	Female			6	100.0%
Master of Science	Health Research	Female	2	100.0%		
Master of Science	Infection Control	Female			3	100.0%
Master of Science	Medical and Clinical Education	Female			2	100.0%
Master of Science	Nursing (Pre-Registration)	Female	76	79.2%		
		Male	20	20.8%		
Master of Science	Occupational Therapy (Pre-Registration)	Female	63	88.7%		
		Male	8	11.3%		
Master of Science	Periodontology	Female			1	50.0%
		Male			1	50.0%
Master of Science	Physiotherapy (Pre-Registration)	Female	35	58.3%		
		Male	25	41.7%		
Master of Science	Speech and Language Therapy (Pre-Registration)	Female	50	87.7%		
		Male	7	12.3%		
Postgraduate Certificate	Advanced Musculoskeletal Assessment	Male			2	100.0%
Postgraduate Certificate	Health Care Practice	Female			1	50.0%
		Male			1	50.0%
Postgraduate Certificate	Medical and Clinical Education	Female			6	54.5%
		Male			5	45.5%
Postgraduate Certificate	Psychological Well-Being Practitioner (Low Intensity)	Female	71	87.7%		
		Male	10	12.3%		
Postgraduate Certificate	Public Health	Female	1	100.0%		
Postgraduate Certificate	Ultrasound Guided Musculoskeletal Interventions	Female			4	25.0%
		Male			12	75.0%
Postgraduate Diploma	Health Care Management	Male			1	100.0%
Postgraduate Diploma	Health Care Practice	Female			1	100.0%
Postgraduate Diploma	Infection Control	Female			2	100.0%
Postgraduate Diploma	Medical and Clinical Education	Female			1	50.0%
		Male			1	50.0%
<b>Grand Total</b>	<b>Total</b>	<b>Total</b>	<b>381</b>	<b>100.0%</b>	<b>55</b>	<b>100.0%</b>

## POSTGRADUATE TAUGHT COMPLETION, FULL TIME STUDENTS

### Postgraduate Completion split by gender

Full Time students

Department: Health and Human Sciences  
Level: Postgraduate, Taught



Successful completion rates for PGT students were over 91% in 2013/14 and over 96% in 2014/15 and 2015/16. There is no discernible gender or ethnic difference in attainment. The success rates among PT PGT students are 100% in the last 3 years.

#### (iv) Numbers of men and women on postgraduate research degrees

Full- and part-time. Provide data on course application, offers, acceptance and degree completion rates by gender.

### PGR FULL TIME: COURSE APPLICATIONS, OFFERS AND ACCEPTANCE RATES

	2013/14		TOTAL	2014/15		TOTAL	2015/16		TOTAL
	Male	Female		Male	Female		Male	Female	
Applications	23 (43%)	30 (57%)	53 (100%)	27 (52%)	25 (48%)	52 (100%)	16 (35%)	30 (65%)	46 (100%)
Offers	4 (21%)	15 (79%)	19 (100%)	10 (40%)	15 (60%)	25 (100%)	5 (25%)	15 (75%)	20 (100%)
Acceptance	2 (17%)	10 (83%)	12 (100%)	3 (21%)	11 (79%)	14 (100%)	1 (7%)	13 (93%)	14 (100%)

The proportion of males and females applying for FT PGR degrees is roughly equal but females are more likely to be offered and more likely to accept a place.

❖ See 2017 Action 2.4

A possible explanation is that overseas applicants (most of whom are male) are less likely to accept a place.

❖ 2017 Action 2.10: Individualised welcome information to be sent to PGR students once a place is offered to increase acceptance rates.

### PGR PART TIME: COURSE APPLICATIONS, OFFERS AND ACCEPTANCE RATES

	2013/14		TOTAL	2014/15		TOTAL	2015/16		TOTAL
	Male	Female		Male	Female		Male	Female	
Applications	4 (50%)	4 (50%)	8 (100%)	4 (80%)	1 (20%)	5 (100%)	6 (67%)	3 (33%)	9 (100%)
Offers	3 (43%)	4 (57%)	7 (100%)	4 (80%)	1 (20%)	5 (100%)	6 (67%)	3 (33%)	9 (100%)
Acceptance	2 (33%)	4 (66%)	6 (100%)	2 (100%)	0 (0%)	2 (100%)	5 (62.5%)	3 (37.5%)	8 (100%)

For PT PGR applications, in 2014/15 and 2015/16, there were more men applying, receiving offers and accepting a place than women although the numbers are too small to draw conclusions.

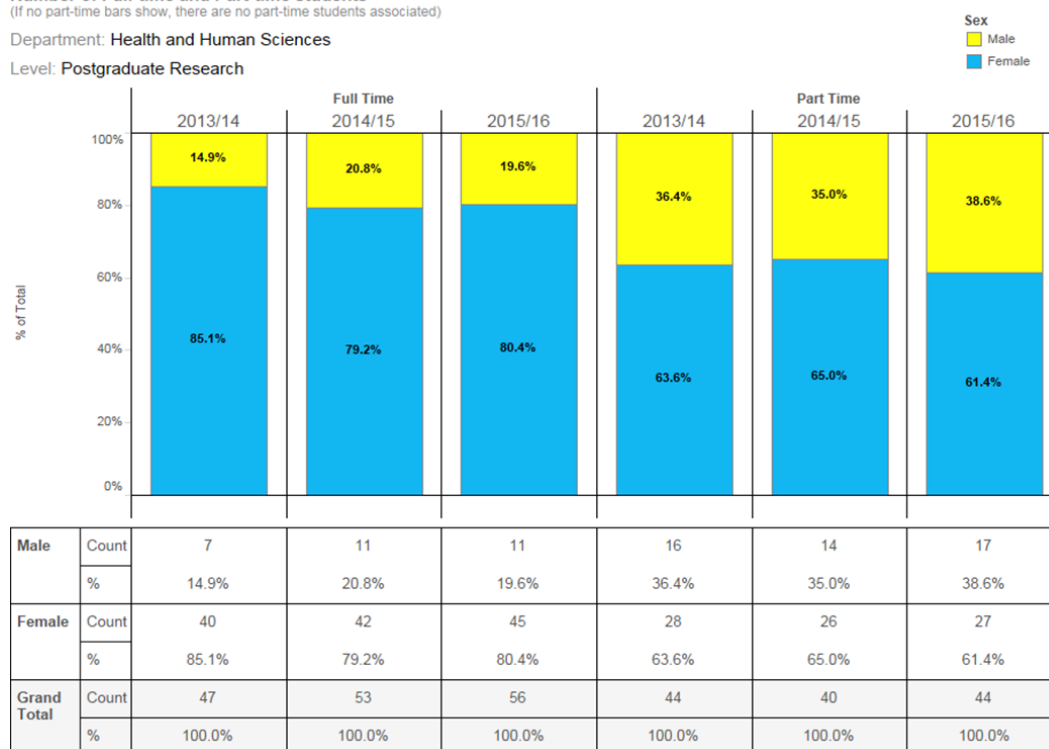
### Number of Students by Gender

#### Number of Full-time and Part-time students

(If no part-time bars show, there are no part-time students associated)

Department: Health and Human Sciences

Level: Postgraduate Research

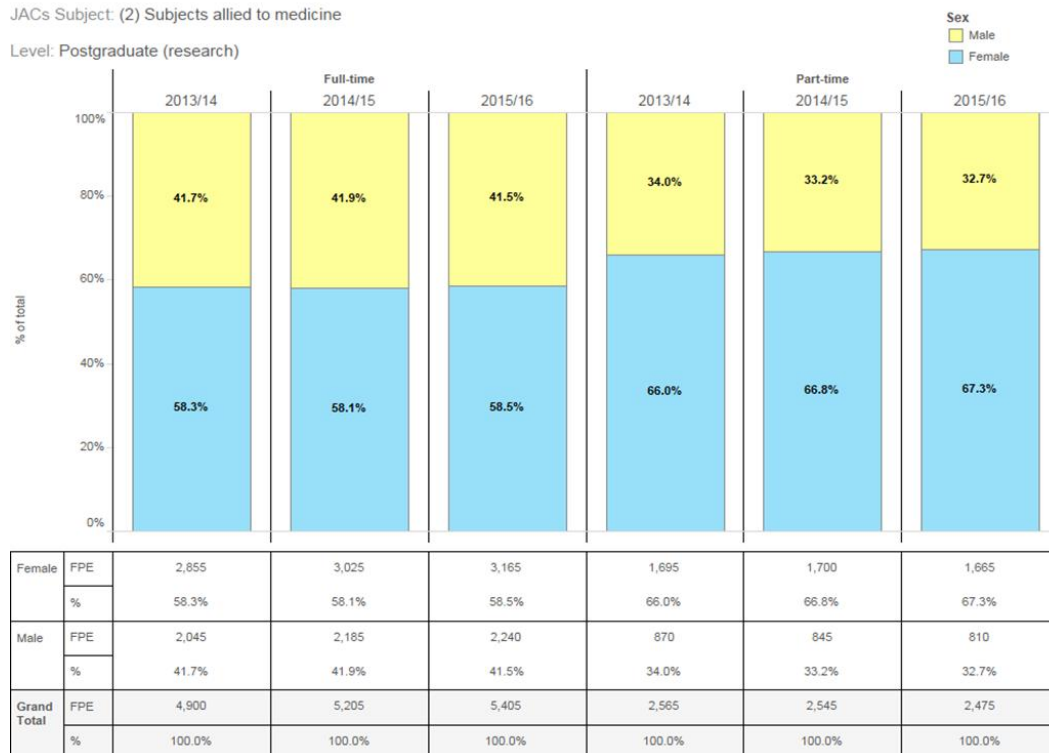


### HESA Data: Whole HE Sector

#### Number of Full-time and Part-time students

JACs Subject: (2) Subjects allied to medicine

Level: Postgraduate (research)



The proportion of females on FT PGR courses has consistently been higher than the national figure for SAM due to a high proportion of students on the clinical psychology programme, which attracts predominantly female applicants (see

table below). To address this shortlisting is done without knowing applicants' gender; males are on every interview panel; male staff do most outreach. This has resulted in at least 1-2 males in each cohort of 10.

The gender composition of PT PGR students is comparable to national data. The ethnic composition of PGR FT and PT students varies each year from 20-25% identifying as BAME which broadly matches the proportions in the national data.

### **GENDER COMPOSITION BY DEGREE COURSE - 2015/16**

Number of Postgraduate Research Full-time and Part-time students

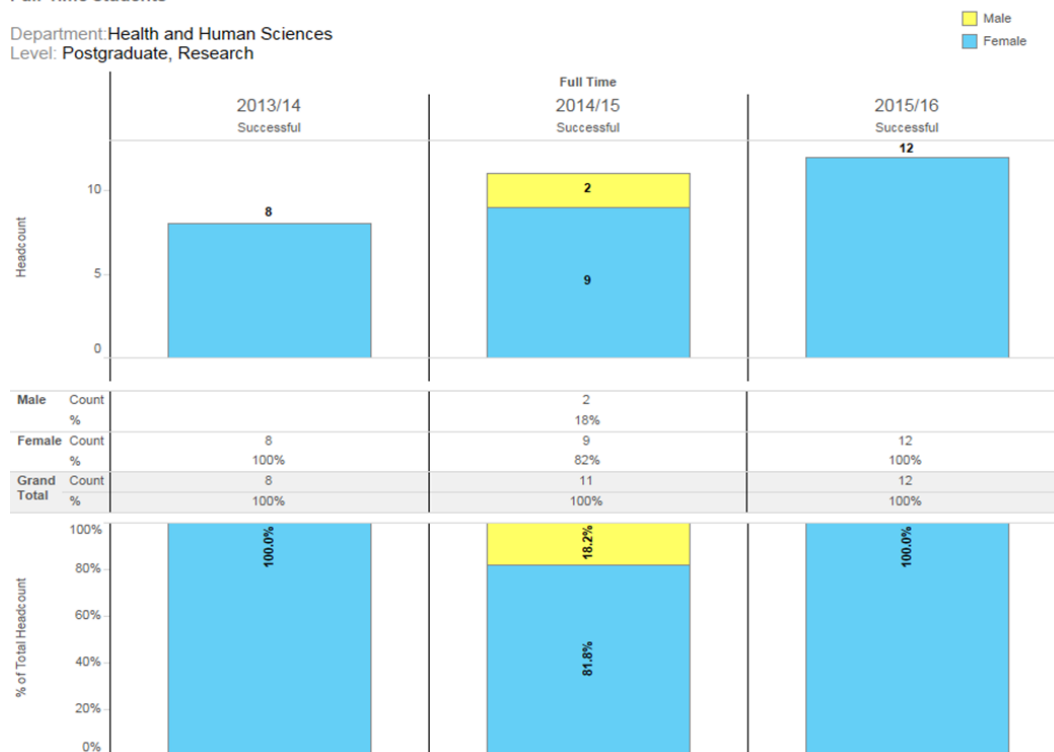
			2015/16		2015/16	
			Full Time		Part Time	
Qualification Type	Course Title	Sex	Count	%	Count	%
Doctor of Philosophy	Applied Psychology	Female	1	100.0%		
Doctor of Philosophy	Health Studies	Female	2	50.0%	1	25.0%
		Male	2	50.0%	3	75.0%
Doctor of Philosophy	Nursing Studies	Female			1	100.0%
		Male	1	100.0%		
Doctor of Philosophy	Occupational Therapy	Female	1	100.0%	1	100.0%
Doctor of Philosophy	Physiotherapy	Male	1	100.0%	2	100.0%
Doctor of Philosophy	Public Health	Male	1	100.0%	2	100.0%
Doctor of Philosophy	Social Policy	Female	1	100.0%		
Doctorate	Applied Psychology	Female			2	50.0%
		Male			2	50.0%
Doctorate	Clinical Psychology	Female			1	100.0%
Doctorate	Clinical Psychology (D Clin Psych)	Female	40	88.9%	1	100.0%
		Male	5	11.1%		
Doctorate	Counselling Psychology (D Couns Psych)	Female			2	100.0%
Doctorate	Health Care Education	Female			5	62.5%
		Male			3	37.5%
Doctorate	Health Service Management	Female			2	66.7%
		Male			1	33.3%
Doctorate	Nursing	Female			7	77.8%
		Male			2	22.2%
Doctorate	Physiotherapy	Male			1	100.0%
Doctorate	Public Health (Health Visiting)	Female			1	100.0%
Doctorate	Social Care Education	Female			1	100.0%
Doctorate	Social Care Practice Management	Female			1	100.0%
Master of Philosophy	Public Health	Male	1	100.0%		
Master of Science (by Dissertation)	Health Studies	Female			1	50.0%
		Male			1	50.0%
Grand Total			56	100.0%	44	100.0%

## COMPLETION OF POSTGRADUATE RESEARCH DEGREES – FULL TIME

### Postgraduate Completion split by gender

Full Time students

Department: Health and Human Sciences  
Level: Postgraduate, Research

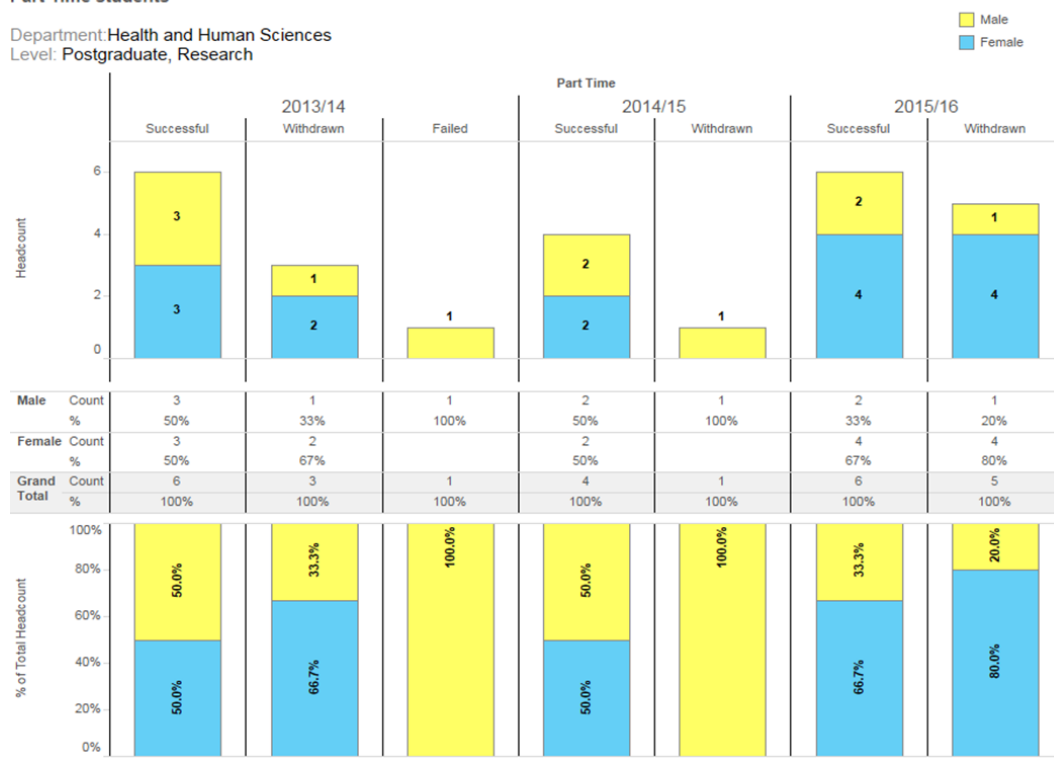


## COMPLETION OF POSTGRADUATE RESEARCH DEGREES – PART TIME

### Postgraduate Completion split by gender

Part Time students

Department: Health and Human Sciences  
Level: Postgraduate, Research



All FT PGR students have achieved a degree but only 16/26 (61%) of PT PGR students. Lack of successful completion is due, with one exception, to students withdrawing. According to one programme lead, “we have provided pastoral support, agreed flexible return dates to suit those on maternity leave, accommodated paternity leave, adjusted placements for those with carer responsibilities”. Nevertheless, some students feel unable to continue, often prompted by an unforeseen life event.

- ❖ 2017 Action 2.11: Further development of online PGR training courses and social media communication to support PT students.
- ❖ 2017 Action 2.12: Consult with the PGR Staff-student liaison committee to identify developments that may help PT student retention.
- ❖ 2017 Action 2.13: Promote the UoE peer mentorship scheme more proactively to PT PGR students, as well as an induction session to identify potential barriers to completion with tailored referral to support.

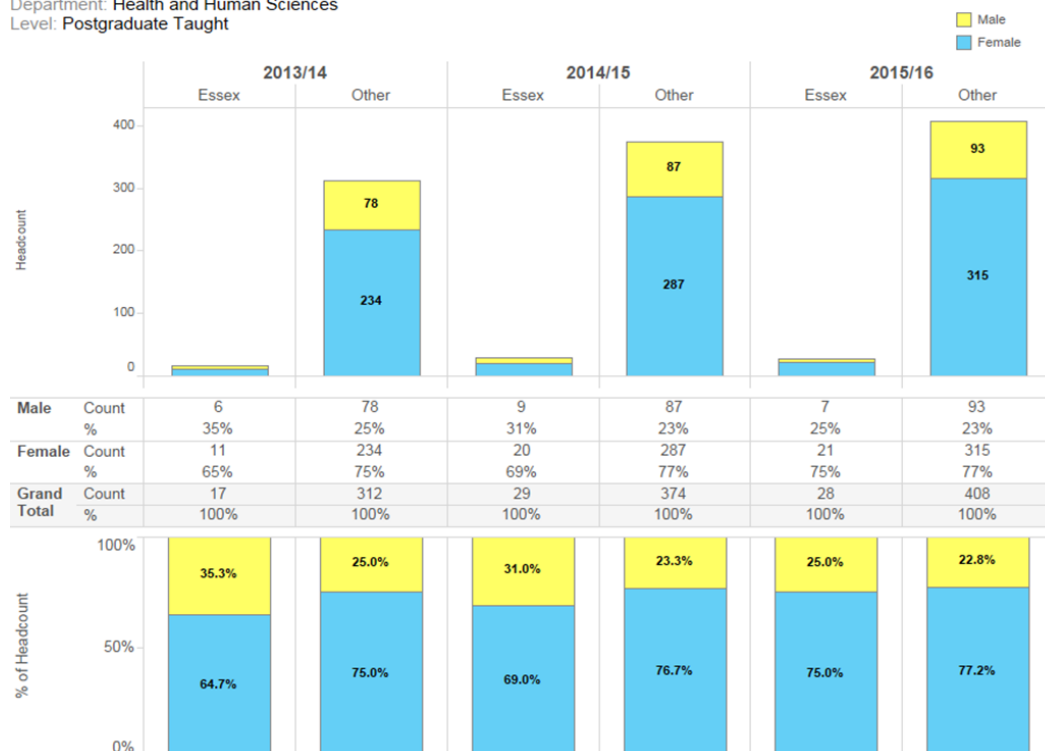
(v) Progression pipeline between undergraduate and postgraduate student levels

Identify and comment on any issues in the pipeline between undergraduate and postgraduate degrees.

## PGT CONVERSION

### Postgraduate Students who previously studied at Essex University

Department: Health and Human Sciences  
Level: Postgraduate Taught

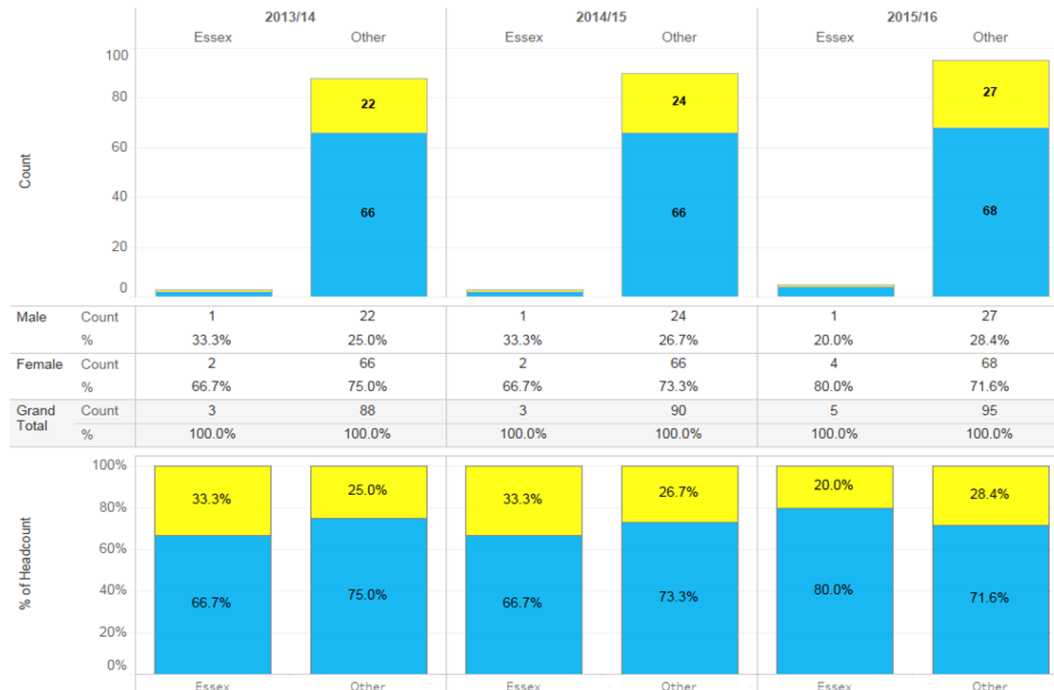


## PGR CONVERSION

### Postgraduate Students who previously studied at Essex University

Department: Health and Human Sciences  
Level: Postgraduate Research

Male  
Female



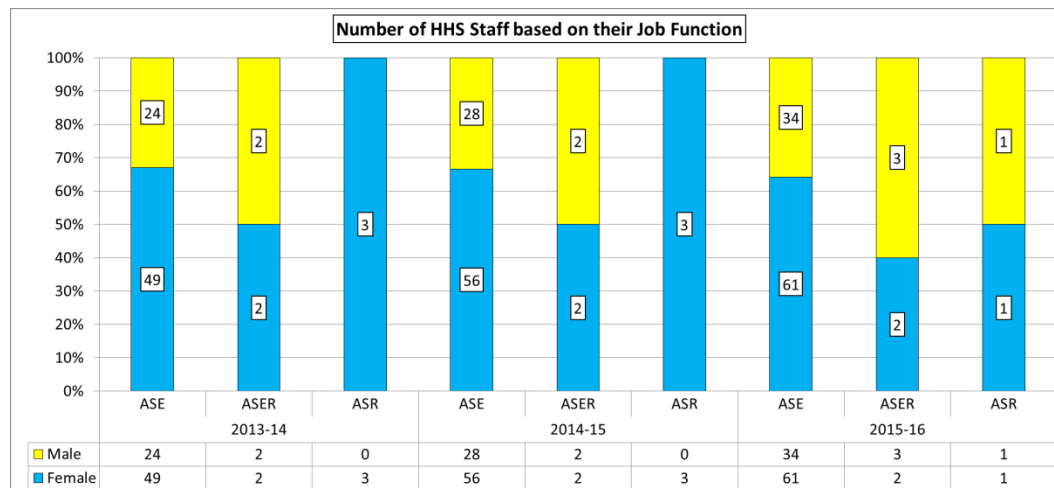
The proportion of HHS PGT and PGR students who did their first degree at Essex is low as there is not a natural progression from UG to PG study in HHS because UG students seek employment in their chosen profession post-qualification. For HHS students, PG qualifications are likely to be sought later in the profession. The gender balance of Essex UG students who become PG students at HHS is comparable with those enrolling from elsewhere.

- ❖ Action 2.14: Contact HHS alumni 2-3 years post-qualification to see if graduate study is of interest.
- ❖ Action 2.15: Develop innovative pathways, e.g. an Advanced Clinical Practice apprenticeship pathway, which will open up PT PGR programmes that are both paid and work based.

## 4.2. Academic and research staff data

### (i) Academic staff by grade, contract function and gender: research-only, teaching and research or teaching-only

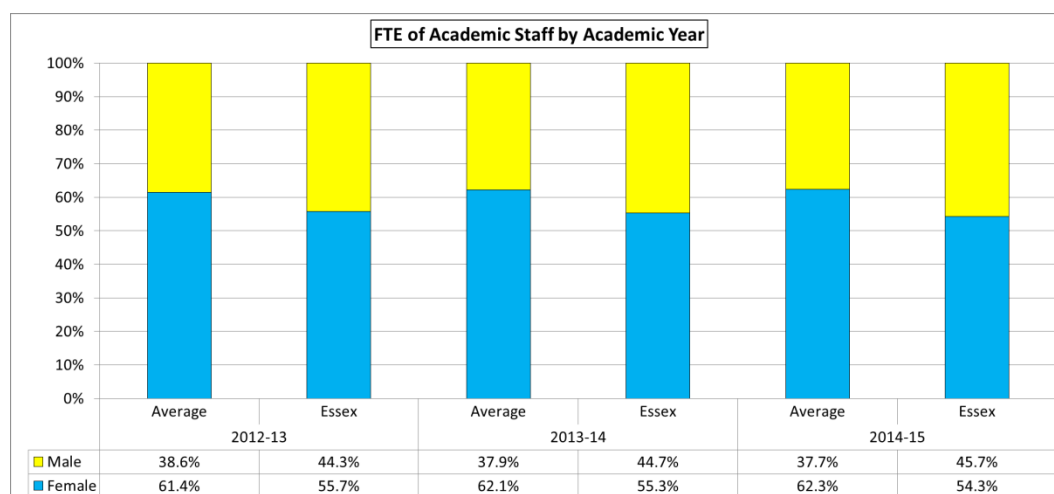
Data are presented by headcount rather than FTE with the exception of the data comparing HHS figures to the national data.



The proportion of female academic staff declined from 67% in 2013/14 to 62% in 2015/16. Compared to benchmark data, the proportion of male staff is higher than the national picture for 'Medicine, Dentistry and Health' and the gender balance is more equal (46% male compared to 38%).

❖ 2017 Action: 3.1: To maintain an equal gender balance in the new School of Health & Social Care, encourage male applicants for staffing posts, eg. By featuring more men in publicity, outreach activities and interview panels.

## BENCHMARKING DATA



Footnote to table:

Data source: Published HESA Staff Return

Measure: All staff with an academic employment function of 'Teaching Only', 'Teaching and Research' or 'Research Only', In the cost-centre group 'Medicine, Dentistry or Health'

## HHS STAFF BY JOB FUNCTION AND BY POSITION/GRADE

Category	Grade	2013/14			2014/15			2015/16		
		F	M	Total	F	M	Total	F	M	Total
ASE	Lecturer G7	1		1	1		1			0
	Lecturer G8	10	5	15	17	5	22	23	9	32
	Lecturer G9	25	13	38	25	16	41	27	18	45
	Senior Lecturer G10	11	6	17	11	7	18	9	6	15
	Professor G11	2		2	2		2	2	1	3
<b>Total ASE</b>		<b>49</b>	<b>24</b>	<b>73</b>	<b>56</b>	<b>28</b>	<b>84</b>	<b>61</b>	<b>34</b>	<b>95</b>
ASER	Lecturer (R) G9	1		1			0			0
	Senior Lecturer (R) G10		1	1	1	1	2	1	1	2
	Reader G10			0			0			0
	Professor G11	1	1	2	1	1	2	1	2	3
<b>Total ASER</b>		<b>2</b>	<b>2</b>	<b>4</b>	<b>2</b>	<b>2</b>	<b>4</b>	<b>2</b>	<b>3</b>	<b>5</b>
ASR	Research Officer G7	1		1			0			0
	Senior Research Officer G8	1		1	2		2	1	1	2
	Research Fellow G9	1		1	1		1			0
<b>Total ASR</b>		<b>3</b>	<b>0</b>	<b>3</b>	<b>3</b>	<b>0</b>	<b>3</b>	<b>1</b>	<b>1</b>	<b>2</b>
<b>Total Staff</b>		<b>54</b>	<b>26</b>	<b>80</b>	<b>61</b>	<b>30</b>	<b>91</b>	<b>64</b>	<b>38</b>	<b>102</b>

Women are well represented at all grades, including professorial level, and in leadership roles. Since 2004, there have been 4 HoSs (it is a rolling position), 3 of whom have been female. This has, in part, been achieved in response to HHS Bronze Action 2.5, via:

- ✓ A culture of active mentoring, eg. The current HoS worked as Deputy to the previous HoS and leadership training ( see Section 5.3.i)

The numbers of staff on ASER or ASR contracts are too low to identify trends. Both ASER females in HHS were submitted to REF2014.

For staff on ASE contracts, the proportion of females at lower grades (7-8) is consistently higher than for higher grades (9-11). We have addressed this through: promoting opportunities for flexible working; HoS actively encouraging junior female staff to apply for promotion; development of a robust mentorship scheme.

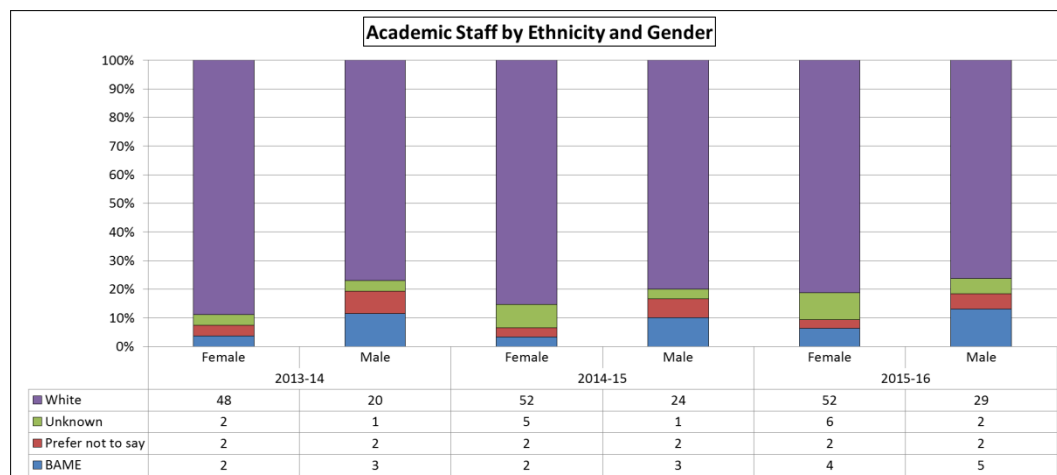
- ✓ These measures have resulted in more female staff applying and obtaining promotion (see Section 5:1:iii below)

Female staff in junior grades are more likely to work PT. Whilst promotion applications from PT staff are considered pro-rata, PT workers have less time to develop their careers and therefore may need more support to progress.

- ❖ 2017 Action 3.2: Run a workshop about career progression with PT staff to identify areas to enhance their opportunities and support that is available.

HHS staff are becoming more ethnically diverse which is seen as important given the growing diversity of the student body. This has been achieved in part through the inclusion of the following statement on job advertisements “We particularly welcome applications from those from an ethnic minority as they are under-represented in the School”. Feedback from BAME staff is that care is needed to ensure a level playing field for career progression.

- ❖ 2017 Action 3.3: Consult further with BAME staff to identify obstacles and areas to enhance opportunities and inclusivity.



## SILVER APPLICATIONS ONLY

Where relevant, comment on the transition of technical staff to academic roles.

There are few technical staff as many technical duties are included in professional service staff's administrative role. There are currently 3 dedicated technical staff (all female and PT) who are included in the support for professional services staff described in Section 5.2 and 5.4. On reflection more bespoke support is merited.

- ❖ 2017 Action 3.4: Review career development opportunities for technical staff and consult with other Schools about this.
- ❖ 2017 Action 3.5: Invite a technical staff representative to join the SWAN SAT.

There are two academic support posts (both female staff) that were initially appointed as Grade 7, a bespoke literacy & numeracy post and a post to promote public involvement in research. The role holders were encouraged to develop the role and both were subsequently upgraded when the criteria for Grade 8 was met.

(ii) Academic and research staff by grade on fixed-term, open-ended/permanent and zero-hour contracts by gender

Comment on the proportions of men and women on these contracts. Comment on what is being done to ensure continuity of employment and to address any other issues, including redeployment schemes.

**ACADEMIC STAFF BY GRADE, BASIS, TYPE AND GENDER**

Grade	Type/Basis	2013/14			2014/15			2015/16		
		F	M	Total	F	M	Total	F	M	Total
UEG07	<b>Fixed Term</b>	1		1			0			0
	Part Time	1		1			0			0
	<b>Permanent</b>	1		1	1		1			0
	Part Time	1		1	1		1			0
UEG08	<b>Fixed Term</b>	3		3	4		4	3	1	4
	Full Time	1		1	1		1			0
	Part Time	2		2	3		3	3	1	4
	<b>Permanent</b>	8	5	13	15	5	20	21	9	30
	Full Time	4	3	7	8	4	12	7	6	13
	Part Time	4	2	6	7	1	8	14	3	17
UEG09	<b>Fixed Term</b>	3		3	1		1	1		1
	Full Time	1		1			0			0
	Part Time	2		2	1		1	1		1
	<b>Permanent</b>	24	13	37	25	16	41	26	18	44
	Full Time	11	10	21	13	11	24	15	13	28
	Part Time	13	3	16	12	5	17	11	5	16
UEG10	<b>Permanent</b>	11	7	18	12	8	20	10	7	17
	Full Time	9	5	14	10	6	16	7	6	13
	Part Time	2	2	4	2	2	4	3	1	4
UEG11	<b>Permanent</b>	3	1	4	3	1	4	3	2	5
	Full Time	2	1	3	2	1	3	2	1	3
	Part Time	1		1	1		1	1	1	2
	<b>Fixed Term</b>			0			0		1	1
	Part Time			0			0		1	1
<b>Total</b>		<b>54</b>	<b>26</b>	<b>80</b>	<b>61</b>	<b>30</b>	<b>91</b>	<b>64</b>	<b>38</b>	<b>102</b>

Only a small number of staff (less than 7 each year) are on fixed term contracts mainly working on bespoke fixed term research projects.

- ✓ There is regular review of all staff on fixed term contracts to: a) ensure that there is career planning well before the end of the contract and, b) see if they can be moved onto a permanent contract (HHS SWAN Bronze action 5.2).

The majority are employed PT for the NIHR Research Design Service. They are all encouraged (and supported by HHS) to apply for research funding to develop their own research careers. Future careers are routinely discussed at annual appraisal and often raised during monthly meetings with their line manager. HR are currently assessing these posts re justification for making them permanent.

- ❖ 2017 Action 3.6: Provide further support and opportunities for staff on fixed term contracts to obtain secure employment.

### (iii) Academic leavers by grade and gender and full/part-time status

Comment on the reasons academic staff leave the department, any differences by gender and the mechanisms for collecting this data.

#### HHS ACADEMIC STAFF: LEAVERS 2013-2016

	2013/14				2014/15				2015/16			
	Male		Female		Male		Female		Male		Female	
	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT
grade 7	0	0	0	0	0	0	0	1	0	0	0	0
grade 8	0	1	1	0	0	0	0	0	0	1	2	1
grade 9	0	0	2	0	0	0	0	0	0	1	0	1
grade 10	0	0	1	0	0	0	2	0	0	0	2	1
grade 11	0	0	0	0	0	0	0	0	0	0	0	0
sub-total	1		4		0		3		2		7	
TOTAL	5				3				9			

In the last 3 years 14 females and 3 male staff have left, 6 were on Grade 8, 4 on Grade 9 and 6 on Grade 10. The numbers are too small to detect a clear gender trend.

- ✓ Following an action from the (HHS SWAN Bronze 2.9, 2.10) the University now records reason for leaving via an exit questionnaire and all leavers are offered an interview with HoS.

The reasons for leaving are varied. Most are planned, eg. Retirement (n=4), Promotion to a post elsewhere (n=3) or related to wider life events (eg. Death in service (n=2) or geographical relocation (n=2)).

- ❖ 2017 Action 3.7: Continue to monitor turnover rates and gender of leavers and analyse exit interviews for reasons for leaving.

## 5. SUPPORTING AND ADVANCING WOMEN'S CAREERS (6881 WORDS)

Recommended word count: Bronze: 6000 words | Silver: 6500 words

### 5.1. Key career transition points: academic staff

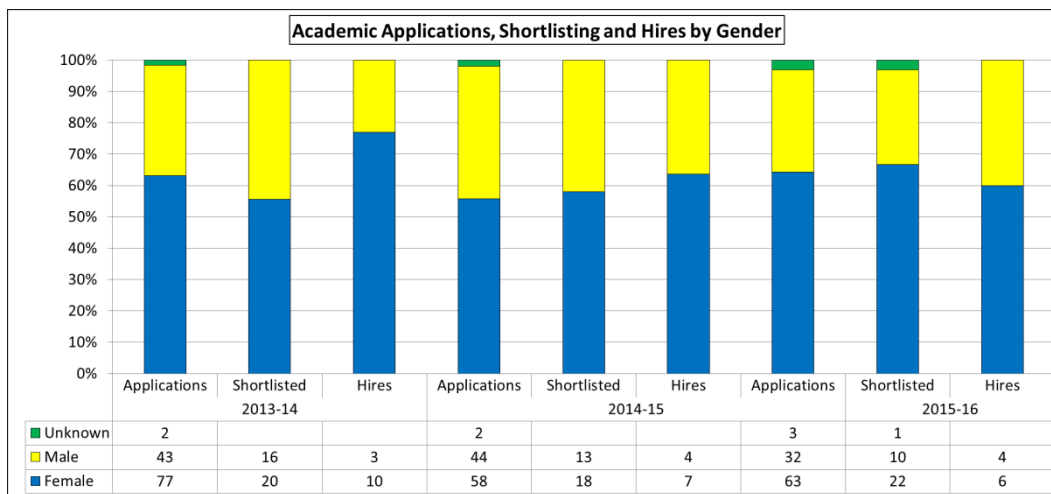
#### (i) Recruitment

Break down data by gender and grade for applications to academic posts including shortlisted candidates, offer and acceptance rates. Comment on how the department's recruitment processes ensure that women (and men where there is an underrepresentation in numbers) are encouraged to apply.

#### HHS ACADEMIC STAFF: APPLICATIONS, SHORTLISTING AND HIRES BY GENDER AND GRADE

Category	Grade	Stage	2013-14				2014-15				2015-16			
			F	M	U	Total	F	M	U	Total	F	M	U	Total
ASE	Unknown	Applications					4	12		16	1	1		2
		Shortlisting						4		4				
		Hires												
	G7	Applications									6	5		11
		Shortlisting									5			5
		Hires									2			2
	G8	Applications	39	21		60	50	30	2	82	41	19	1	61
		Shortlisting	16	10		26	17	8		25	13	9	1	23
		Hires	9			9	6	3		9	4	3		7
	G9	Applications	1			1	1			1	4	3		7
		Shortlisting					1			1		1		1
		Hires					1			1		1		1
	G10	Applications									2	1		3
		Shortlisting												
		Hires												
ASR	G8	Applications	7	1		8					8	1	1	10
		Shortlisting	2	1		3					4			4
		Hires	1			1								
ASER	G9	Applications	20	14	2	36								
		Shortlisting	1	3		4								
		Hires		2		2								
	G10	Applications	10	7		17								
		Shortlisting	1	2		3								
		Hires		1		1								
	G11	Applications					3	2		5	1	2	1	4
		Shortlisting						1		1				
		Hires						1		1				

NOTES: F=Female, M=Male, U=Unknown



✓ There are more female applicants, interviewees and hires but no significant gender inequalities are apparent in the hiring process due to an inclusive approach to recruitment (HHS SWAN Bronze Action 3.1):

- NHS and UoE values relating to inclusion are at the forefront of the application process. All recruitment literature promotes UoE work-life balance policy and encourages BAME applicants.
- The SWAN logo is displayed on all advertisements.
- Staff on selection panels have completed recruitment and selection training (which includes unconscious bias training).
- Selection panels are gender mixed.

✓ Posts are routinely advertised as FT or PT and we have surpassed the target set in HHS SWAN Bronze Action 3.4 action plan for over 75% of FT posts to be advertised as flexible. In 2015/16, of the 14 academic posts: 1 was advertised as FT (a condition of the funding agency); 5 were advertised as PT and 8 were advertised as flexible, ie. FT or PT. This attracts more applicants and ensures that the working hours of new appointments optimize their work-life balance. Thus far it has been mutually beneficial. For example, in the Sports Therapy programme, 3 recent appointments (2 male, 1 female) applied for a PT position for a flexible FT/PT post in order to combine this with either clinical work, child care or their own business.

❖ 2017 Action 4.1: Continue to monitor posts that are advertised as flexible and take up the flexible or PT option.

## (ii) Induction

Describe the induction and support provided to all new academic staff at all levels. Comment on the uptake of this and how its effectiveness is reviewed.

- ✓ The University has a new on-line staff Induction course which all new staff are informed and allocated time to complete (HHS SWAN Bronze Action 4.5).

In the last 3 years 14 staff (7 female 7 male) have taken part in UoE induction courses/events.

### HHS ACADEMIC STAFF: ATTENDANCE AT INDUCTION EVENTS

	2013/14		2014/15		2015/16	
Induction event	Female	Male	Female	Male	Female	Male
Academic and research staff induction			1	2	2	3
Education and research staff induction					3	1
Induction networking event for professional services staff: how do YOU fit?				1		
Induction event for professional services staff: the University's goals, vision and values					1	
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>3</b>	<b>6</b>	<b>4</b>

In addition all are given information on relevant policies and procedures, training opportunities and support groups. The HHS induction plan includes a checklist covering:

- E&D online training (mandatory for all staff).
- Information about flexible working, discretionary and other types of leave, harassment and stress management.
- Details of initiatives to promote gender equality e.g. SWAN.
- Information on relevant support groups eg. Parents' Support Network, Essex Women's Network (EWN). In addition,

- ✓ All new staff are allocated a mentor (HHS SWAN Bronze Action 4.7).

- ✓ A SAT member interviewed 3 new members of staff to gather data about induction (HHS SWAN Bronze Action 4.8). They reported that the structured induction from UoE and HHS was helpful. They were introduced to key people, including a mentor and found the environment friendly. All reported that from thereon, a self-management approach was expected. This was welcomed by some, but less so by those who had previously worked in a highly structured workplace or who were new to academia.

- ❖ Action 4.2: Send routine reminder to new staff about the Mentorship Scheme 3 months after their appointment.
- ❖ Action 4.3: Organise training for probationary supervisors
- ❖ Action 4.4: Hold a social event for new staff to meet others and provide feedback of their experience.

### (iii) Promotion

Provide data on staff applying for promotion and comment on applications and success rates by gender, grade and full- and part-time status. Comment on how staff are encouraged and supported through the process.

#### HHS ACADEMIC STAFF: APPLICATIONS FOR PROMOTION 2013-2016

PROMOTION TO	2013/14				TOTAL	*2014/15				TOTAL	2015/16				TOTAL
	Male		Female			Male		Female			Male		Female		
	FT	PT	FT	PT		FT	PT	FT	PT		FT	PT	FT	PT	
grade 8	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0
grade 9	0	0	0	0	0	1	1	2	2	6	2	0	1	3	6
grade 10	3	0	4	0	7	3	0	4	0	7	1	0	2	0	3
grade 11	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0
No of applications successful	1	0	1	0	2	0	1	4	0	5	2	0	2	2	6
No of applications unsuccessful	2	0	3	0	5	4	1	3	2	10	1	0	1	1	3
<b>TOTAL No. of applications received</b>	<b>3</b>	<b>0</b>	<b>4</b>	<b>0</b>	<b>7</b>	<b>4</b>	<b>2</b>	<b>7</b>	<b>2</b>	<b>15</b>	<b>3</b>	<b>0</b>	<b>3</b>	<b>3</b>	<b>9</b>

Note: \*In 2014/15, two applications were subsequently withdrawn

No data are presented for 2016/17 academic year as outcomes fall after the Athena Swan application submission deadline

Applications for promotion are increasing and broadly reflect the staff gender composition. Women are more likely to be successful (9/19 compared to 4/12 for men) because they tend to await encouragement from senior staff once confident criteria have been met. Only 7/31 applications were from PT staff although the trend is for the numbers to increase and further action is planned:

- ❖ See 2017 Action 3.2.

All members of academic staff are eligible to apply and are sent details of the promotion process and the criteria annually.

- ✓ Annual appraisal is a key opportunity for discussing promotion and feedback from 12 (over half) appraisers suggests that such discussion is routine (HHS SWAN Bronze Action 4.1)

Further on-going and systematic promotion support is provided via:

- ✓ The HHS Mentorship Scheme (HHS SWAN Bronze Action 3.2). (see section 5.3.iii). For example, one on-going mentorship pairing resulted in the mentee successfully obtaining permanency and gaining an understanding of what is required to achieve promotion.
- ✓ Line managers encourage those applying to consult colleagues for peer-support and senior staff to ensure they address promotion criteria.
- ✓ Senior staff review applications to determine whether departmental support is justified. If not supported, applicants are informed which criteria have not been met and encouraged to seek mentorship and apply again in the future (HHS SWAN Bronze Action 3.3). For example, a BAME female lecturer who failed to get support in 2014/15 was mentored to submit an improved application in 2015/16 resulting in successful promotion to Senior Lecturer.
- ✓ All applicants who are rejected by the UoE Academic Staffing Committee, are given face-to-face feedback by HoS (HHS SWAN Bronze Action 3.3)
- ✓ This process has resulted in a more equal gender balance among staff applying for promotion.

There is regular UoE training about preparing for permanency and promotion which 7 staff (5 female, 2 male) have attended.

Academic staff can apply for bonuses and increments and in the last 3 years more women than men have applied for increments reversing the previous gender trend.

#### HHS ACADEMIC STAFF: INCREMENTS AND BONUS APPLICATIONS 2013-2016

	2013/14				TOTAL	2014/15				TOTAL	2015/16				TOTAL
	Male		Female			Male		Female			Male		Female		
	FT	PT	FT	PT		FT	PT	FT	PT		FT	PT	FT	PT	
Applications received for a salary increment	0	0	0	0	0	1	0	2	0	3	3	0	3	0	6
No of applications successful	0	0	0	0	0	0	0	2	0	2	2	0	3	0	5
Applications received for a bonus	0	0	0	0	0	1	0	0	0	1	2	0	2	0	4
No of applications successful	0	0	0	0	0	1	0	0	0	1	2	0	2	0	4

*There were no applications in the 2013/14 academic year as a formal process was not in operation at that time (discretionary only)*

- ✓ All 5 females who applied for an additional salary increment and the 2 who applied for a bonus were successful (HHS SWAN Bronze Action 4.3).

There were no applications for increments or bonuses from PT staff.

- ❖ 2017 Action 4.5: Run an internal promotion workshop to promote dialogue between senior and junior staff.
- ❖ 2017 Action 4.6: Compile a bank of successful applications for staff to view (with consent)
- ❖ 2017 Action 4.7: Continue to monitor and encourage discussion of promotion at appraisal, to include setting out expectations and understanding of the criteria.
- ❖ 2017 Action 4.8: Encourage more applications for increments/bonuses from PT staff through routine discussion at appraisal

#### (iv) Department submissions to the Research Excellence Framework (REF)

Provide data on the staff, by gender, submitted to REF versus those that were eligible. Compare this to the data for the Research Assessment Exercise 2008. Comment on any gender imbalances identified.

In 2008, a number of staff with clinical backgrounds were appointed on ASER contracts but not returned to the REF. They were subsequently voluntary transferred to ASE contracts, which had not existed when they were appointed.

In 2008 and 2014 a small number of staff on ASER contracts were returned as part of the Sociology Unit of Assessment.

#### HHS SUBMISSIONS TO THE RESEARCH ASSESSMENT EXERCISE 2008

Unit of Assessment	Eligible for submission		TOTAL	Submitted		TOTAL	Not submitted		TOTAL
	Male	Female		Male	Female		Male	Female	
*UoA11 Nursing & Midwifery	4	3	7	0	0	0	4	3	7
*UoA12: Allied Health Professions and Studies	7	9	16	0	0	0	7	9	16
UoA41: Sociology	3	3	6	3	3	6	0	0	0

**Notes:** \* Staff from HHS were linked to this UoA although a submission was not made to it

## HHS SUBMISSIONS TO THE RESEARCH EXCELLENCE FRAMEWORK 2014

Unit of Assessment	Eligible for submission		TOTAL	Submitted		TOTAL	Not submitted		TOTAL
	Male	Female		Male	Female		Male	Female	
UoA23: Sociology	2	2	4	1	2	3	1	0	1

There is now a clear ambition and commitment from UoE to have a health-related submission in REF 2020.

✓ A small number of staff will transfer from ASE to ASER contracts to support this. In addition, a Florence Nightingale Chair (female) in Mental Health Nursing was appointed in August 2016 and the Strategic Review of HHS has recommended a further 3 ASER appointments (HHS SWAN Bronze 3.8).

❖ Action 4.9: For ASER staff in HHS to increase by 100% (ie. From 5 -10) by 2020 and retain the current gender balance.

### SILVER APPLICATIONS ONLY

#### 5.2. Key career transition points: professional and support staff

##### (i) Induction

Describe the induction and support provided to all new professional and support staff, at all levels. Comment on the uptake of this and how its effectiveness is reviewed.

##### (ii) Promotion

Provide data on staff applying for promotion, and comment on applications and success rates by gender, grade and full- and part-time status. Comment on how staff are encouraged and supported through the process.

(i) The induction of professional services staff is similar to that of academic staff (see section 5.1.1). All are contacted beforehand to check whether any adjustments are needed, eg. A new staff member gave notification of a previous condition and support was put in place prior to her starting employment.

On the first day of work the new member of staff meets with the School Manager or her Deputy and is taken through a staff induction checklist (see section 5.1.i above for details) and arranges follow-up appointments to address any concerns.

All appointments at all levels in the last 3 years have been assigned a mentor, who is an experienced colleague. The feedback is positive with a recent

appointee commenting: “The induction was good and covered all requirements. The mentoring has been excellent. He has been very supportive and happy to answer any queries I’ve had. He has made settling in very easy.”

In addition, 5 professional services staff (4 female, 1male) of different grades have attended a variety of targeted UoE induction events, all of which are evaluated by the Learning & Development team at UoE.

#### HHS PROFESSIONAL SERVICES STAFF: ATTENDANCE AT INDUCTION EVENTS

	2013/14		2014/15		2015/16	
Induction event	Male	Female	Male	Female	Male	Female
Induction networking event for professional services staff: welcome to the University				1		
Induction networking event for professional services staff: Excellence in Research and Education			1			
Education and research staff induction						1
Induction event for professional services staff: the University’s goals, vision and values						2
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>3</b>

- ❖ 2017 Action: See 4.2-4.4 above.
- ❖ 2017 Action 4.10: Consult with professional services staff to identify what more support could be in place at induction.

(ii) There is no system for promotion for professional services staff. The postholder can only be upgraded through the Higher Education Role Analysis (HERA) process whereby the role is upgraded if there is a requirement to take on additional responsibilities. This is identified during appraisal where the line-manager or the role holder themselves may suggest a HERA application.

## PROFESSIONAL SERVICES STAFF: APPLICATIONS FOR HIGHER EDUCATION ROLE ANALYSIS 2013-16

Upgraded to	2013/14				TOTAL	2014/15				TOTAL	2015/16				TOTAL
	Male		Female			Male		Female			Male		Female		
	FT	PT	FT	PT		FT	PT	FT	PT		FT	PT	FT	PT	
Grade 3	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0
Grade 4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Grade 5	0	0	0	1	1	0	0	1	0	1	0	0	0	0	0
Grade 6	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2
<b>Number successful</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>2</b>
<b>Total received</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>2</b>

In the last 3 years there were 5 applications (all successful) to HERA (all female 2FT, 3PT). Staff are fully supported in their applications with extensive feedback from the School Manager before sending to HoS.

If staff are unsuccessful in being upgraded they are given substantial feedback and on-going support from their line manager. One unsuccessful application in 2012/13 was encouraged to apply again a year later when additional responsibilities had been taken on and was successful.

Staff can also apply for a lump sum or additional increment. An email is sent out annually encouraging all staff that meet the criteria to apply. They are invited to discuss this with the School Manager and HoS who will support this if it meets the criteria. In addition there can be group applications for where a team meets the criteria. Staff report the support they receive as helpful but this has not been systematically evaluated.

After the applications are signed off at department level they are sent to a UoE Academic Staffing committee for review.

## HHS PROFESSIONAL SERVICES STAFF: INCREMENTS AND BONUS APPLICATIONS 2013-2016

Grade	2013/14				TOTAL	2014/15				TOTAL	2015/16				TOTAL
	Male		Female			Male		Female			Male		Female		
	FT	PT	FT	PT		FT	PT	FT	PT		FT	PT	FT	PT	
3	0	0	1	*1	2	*1	0	0	0	1	*1	0	1	0	2
4	0	0	0	0	0	*1	0	0	*1	2	1	0	0	1	2
5	0	0	1	2	3	1	0	*2	0	3	0	0	*2	3	5
6	0	0	1	1	2	0	0	1	0	1	0	0	0	0	0
7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8	0	0	1	0	1	0	0	0	0	0	0	0	*2	0	2
<b>Number successful</b>	<b>0</b>	<b>0</b>	<b>4</b>	<b>4</b>	<b>8</b>	<b>3</b>	<b>0</b>	<b>3</b>	<b>1</b>	<b>7</b>	<b>2</b>	<b>0</b>	<b>5</b>	<b>4</b>	<b>11</b>
<b>Total received</b>	<b>0</b>	<b>0</b>	<b>4</b>	<b>4</b>	<b>8</b>	<b>3</b>	<b>0</b>	<b>3</b>	<b>1</b>	<b>7</b>	<b>2</b>	<b>0</b>	<b>5</b>	<b>4</b>	<b>11</b>

Each \* refers to an application for an increment rather than a bonus

2013/14: 1 successful increment application (F), 7 successful bonus applications (all F)

2014/15: 4 successful increment applications (2M, 2F), 3 successful bonus applications (1M, 2F)

2015/16: 3 successful increment applications (1M, 2F), 8 successful bonus applications (1M, 7F)

All applications have been successful and male and female and FT and PT staff at all levels have achieved an increment or a bonus suggesting more should be encouraged to apply.

❖ 2017 Action 4.11: Consult with professional services staff more systematically to evaluate current process and encourage more applications for increments and bonuses.

### 5.3. Career development: academic staff

#### (i) Training

Describe the training available to staff at all levels in the department.  
Provide details of uptake by gender and how existing staff are kept up to date with training. How is its effectiveness monitored and developed in response to levels of uptake and evaluation?

HHS promotes UoE training opportunities including training for a teaching qualification and/or fellowship with the Higher Education Academy. 83% of HHS staff have a teaching qualification.

## HHS ACADEMIC STAFF: UPTAKE OF TRAINING

	2013/14		2014/15		2015/16	
Training	Female	Male	Female	Male	Female	Male
Equality & Diversity	30	11	6	5	2	5
Future leaders	1		1		1	1
Springboard: a personal development programme for women	1					
Women in science: academic promotion	1		1	1		
Women in science network: getting to know the network - 'speed-dating' and lunch	1					
Annual staffing review: preparing for permanency and promotion			3	1		
Appraisal and personal development scheme: appraiser training			1		1	1
Coaching skills for Managers (leading to ILM level 3 award in Coaching)					1	1
Unconscious bias			1			
Strategic leaders				3		
How to get the best from your appraisal					1	
Using coaching as a management tool					2	
<b>TOTAL</b>	<b>34</b>	<b>11</b>	<b>13</b>	<b>10</b>	<b>8</b>	<b>8</b>

UoE has two in-house leadership programmes; Future Leaders, - an introductory leadership course, and Strategic Leaders which equips senior staff for leadership roles.

- ✓ Leadership programmes are discussed at appraisal (HHS SWAN Bronze 2.6) (although places available are limited). They are promoted on the HHS SWAN webpage (HHS SWAN Bronze Action 5.4). In the last 3 years 3 HHS academic staff (all male) completed the Strategic Leaders course and 4 staff (3 female) completed Future Leaders.
- ✓ All who undertook these courses subsequently took on leadership roles, eg. one female is now Deputy Director of Research.
- ✓ HHS promotes external leadership courses (HHS SWAN Bronze 2.6) and 1 female is currently engaged with Leadership Foundation Aurora training to equip her to step up to a management role.



*Current University of Essex Aurora Programme delegates (including HHS staff member on the right) - a women-only leadership development programme to help address the under-representation of women in senior posts in higher education.*

HHS has a 'Staff Development' fund to support staff engagement with activities relevant to their role e.g. attend a workshop or conference. In 2015/16, 42 staff (28 women and 14 men) received this funding.

E&D training has been completed by 59 academic staff (38 female) and 1 staff has attended unconscious bias training (although 4 more are currently doing so). Following Strategic review, there is now a clear strategy to increase numbers.

- ❖ See 2017 Action 2.4
- ❖ 2017 Action 5.1: At appraisal check Unconscious Bias training complete and incorporate into training plan.

#### (ii) [Appraisal/development review](#)

Describe current appraisal/development review schemes for staff at all levels, including postdoctoral researchers and provide data on uptake by gender. Provide details of any appraisal/review training offered and the uptake of this, as well as staff feedback about the process.

Staff are appraised at least annually to discuss progress against objectives, workload, future plans, training and flexible working. In 2013 appraisers attended a bespoke training course and since then 4 staff (2 female, 2 male) have completed UoE appraiser training.

In the 2016 staff survey, 67% of respondents agreed that 'promotion and career progression are always discussed during annual appraisal', a 19% increase on those who agreed in 2014.

To improve the effectiveness of appraisal (HHS SWAN Bronze Action 4.1).

- ✓ Appraisal is discussed annually by senior staff
- ✓ There is an appraisal checklist including promotion, mentorship and flexible working. All appraisers contacted in January 2017 reported using the checklist to promote discussion which impacts on appraisees' development plans.

❖ 2017 Action 5.2: Survey appraisees to gather their views about the effectiveness of appraisal.

There is a UoE course about 'how to get the most out of your appraisal', which 1 academic female staff attended and reported to be beneficial.

❖ 2017 Action 5.3: Promote training for all staff about appraisal

- ✓ There is also evidence that contact between appraisers and appraisees occurs regularly (HHS SWAN Bronze Action 4.2). One appraiser commented "Discussion outside of the formal appraisal system, followed up at appraisal has led to flexible day planning for an appraisee with a new (step)parenting role."

### (iii) Support given to academic staff for career progression

Comment and reflect on support given to academic staff, especially postdoctoral researchers, to assist in their career progression..

The appraisal system operates through line management channels and is complemented by the Mentorship Scheme which operates through peer-support (HHS SWAN Bronze Action 2.8).

- ✓ Mentors list their expertise and those seeking mentorship contact the Co-ordinator who identifies a mentor. Many staff with NHS experience feel equipped to offer mentorship. In addition, 8 staff (5 female, 3 male) undertook the UoE Coaching course 2015/16.
- ✓ The Mentorship Scheme offers wide ranging support including long term career development mentorship as well as support for specific aspects, e.g. Developing a new module.
- ✓ Staff can also seek a mentor from outside the School and two members of staff (both female and one BAME) received HHS funding for this (HHS SWAN Bronze Action 3.7).
- ✓ Take-up of mentorship is increasing. There were 12 pairings in 2015/16 when it was piloted and an additional 11 pairings by January 2017.
- ✓ Mentoring is incorporated into the WAM (HHS SWAN Bronze Action 3.6)



46 staff responded to a survey to evaluate the Mentorship Scheme. Mentors reported receiving satisfaction from the role with one noting that it was “Rewarding to support others, there is also reciprocity that allows the mentor to develop and challenge their own thinking and assumptions - it is not a purely one way relationship.”

Mentees were overwhelmingly positive listing the following benefits: access to expert advice; getting a broader perspective; developing coping strategies; managing workload; support with a new area of work; developing research; introduction to new ideas/concepts; guidance to understanding systems; mutual and moral support.

Key impacts in terms of career progression are:

“Encouraging me to consider my developmental needs/wants.”

“Full support and encouragement to develop both personally and professionally. personal confidence.”

One mentee noted “successful movement in the right direction, outcomes achieved” and another that it “Might help with the imposter syndrome!” implying that it could give herself confidence to progress her career.

- ❖ 2017 Action 5.4: Run workshops about the Mentorship Scheme to promote potential advantages to encourage more staff to engage with it.

UoE runs promotion and permanency workshops, which in at least one case resulted in a successful promotion application. In addition the EWN have run academic promotion workshops. The number of promotion applications and the number that have been successful have increased (see section 5.1.iii).

The few postdoctoral research staff mainly work for the NIHR Research Design Service. Their role trains them to write high quality grant proposals and 3 of the 4 currently in post have attracted NIHR funding.

HHS is keen to grow research activity and currently supports the doctoral studies of 5 female and 5 male staff from clinical backgrounds. This does not guarantee promotion but maps onto the promotion criteria.

#### (iv) Support given to students (at any level) for academic career progression

Comment and reflect on support given to students at any level to enable them to make informed decisions about their career (including the transition to a sustainable academic career).

Most students are on professional training degrees and generally find subsequent employment in their chosen profession. All programmes include pastoral support and 86% of female students and 80% of male students agreed that HHS offers help to progress from their study to STEMM career/health professional job. In 2014/15, 100% of UG, 98% of PGT and 92% PGR students in HHS had found work one year later.

In response to the HHS SWAN Bronze Action 4.10:

- ✓ A research career workshop has been incorporated into the doctoral training programme.
- ✓ Doctoral students participate in, and present at, departmental seminars.

Post-doctoral research positions are reliant on staff obtaining research funding.

- ❖ 2017 Action 5.5 Increase grant income to increase the number of postdoctoral opportunities for successful PhD students.
- ❖ 2017 Action 5.6 Increase opportunities for graduate teaching assistant opportunities
- ❖ 2017 Action 5.7 Provide support to students applying for post-doctoral fellowships or positions.

PGR students are allocated £2500 over 3 years to attend career development workshops e.g. 'applying for academic posts', 'getting published' or to attend conferences. In addition, 3 PGR female students attended the following courses in 2013/14: Effective use of voice; Assertive communication; Why successful people often feel like frauds – the Imposter Syndrome.

(v) Support offered to those applying for research grant applications

Comment and reflect on support given to staff who apply for funding and what support is offered to those who are unsuccessful.

Research is encouraged among all staff to encourage career development. In response to HHS SWAN Bronze Action 4.1 to develop the research potential of ASE staff:

- ✓ UoE covers course fees for FT staff doing PG courses at UoE and HHS makes up the remaining amount for PT staff.
- ✓ HHS successfully applied for Faculty funding for 4 ASE staff to have dedicated study leave to develop their research.

Other measures that have been put in place to encourage/ support research grant applications:

- ✓ UoE Research Office and the Research Design Service promotes funding opportunities, provides ongoing support for applicants and runs grant-writing workshops.
- ✓ The Mentorship Scheme includes staff offering research mentorship. 3 people (all female) have requested this support.
- ✓ Applicants who are unsuccessful at applying for funding are encouraged to seek mentorship and/or to get support from the Research Design Service.

The number of grants obtained has subsequently increased (2 in 2013/14; 3 in 2014/15; 5 in 2015/16).

## SILVER APPLICATIONS ONLY

### 5.4. Career development: professional and support staff

#### (i) Training

Describe the training available to staff at all levels in the department. Provide details of uptake by gender and how existing staff are kept up to date with training. How is its effectiveness monitored and developed in response to levels of uptake and evaluation?

#### (ii) Appraisal/development review

Describe current appraisal/development review schemes for professional and support staff at all levels and provide data on uptake by gender. Provide details of any appraisal/review training offered and the uptake of this, as well as staff feedback about the process.

#### (iii) Support given to professional and support staff for career progression

Comment and reflect on support given to professional and support staff to assist in their career progression.

#### (i) Training

In the last 3 years, professional services staff attended the following UoE courses, which are open to both academic and support staff. The training clearly has impact as staff have gone on to progress in the following ways: taken on significant leadership roles; taken part in recruitment selection panels; become mentors.

### HHS PROFESSIONAL SERVICES STAFF: UPTAKE OF TRAINING

	2013/14		2014/15		2015/16	
Training	Male	Female	Male	Female	Male	Female
*Equality & Diversity	4	19		2		2
Springboard: a personal development programme for women		1				
Strategic leaders		2		1		
Unconscious bias				2	1	1
Using coaching as a management tool						1
<b>TOTAL</b>	<b>4</b>	<b>22</b>	<b>0</b>	<b>5</b>	<b>1</b>	<b>4</b>

NOTES: E&D training was undertaken by Professional services staff grade 4-9

Springboard & strategic leaders: grade 10

Unconscious bias: grades 4, 5, 10

Coaching as a management tool: grade 6

There is a trend for female staff to be proportionally more likely to have done this type of training.

❖ 2017 Action 5.8: Encourage more men to engage with leadership/coaching and unconscious bias training if relevant to their role.

In addition, there are other in-house courses available to professional services staff at all levels and in 2015/16 staff attended the following courses: Time Management (All staff are encouraged to attend); Minute taking; IT courses – including file management, outlook, excel and ECDL qualification; Disability Awareness; Academic Offences; Student Support; Management essentials; Making the most of your Appraisal; Appraiser training; Performance management. In addition, there is a free UoE online training programme of courses that staff are encouraged to engage with during their working hours and report finding helpful.

Training requirements and opportunities are discussed at appraisal and if a training opportunity is relevant the appraisee is advised to apply. Once staff have completed training the manager meets with them to discuss how this enhances their work and sharing of skills between staff. The training is also monitored by evaluation forms distributed by the UoE Learning and Development centre.

❖ 2017 Action 5.9: Monitor impact of training more systematically.

Staff are encouraged to look for external courses to develop their role. One who currently has funding and work place release commented: ““The Level 3 Diploma in Management has provided me with a new challenge and helped build my confidence. I now have a better understanding of my role. I appreciate the roles of colleagues. It has developed my knowledge that I can use to develop and progress in my profession”.

#### (ii) and (iii) Appraisal and Support for career progression

The School Manager or her Deputy carry out appraisals and both have attended the relevant training. The appraisal includes looking at objectives, training requirements and career progression. The appraisal checklist is used and in the staff survey 100% of male and 93% of female professional services staff agree that promotion and career progression are always discussed at appraisal.

In addition to HERA and salary upgrades, there are other opportunities for career progression as there are other positions within UoE and HHS is a fast growing School, with new posts being advertised regularly. Staff are encouraged at appraisal and/or at regular updates to apply for higher grade positions either

within the HHS or UoE. An example is someone who started employment as Grade 4 Administrative Assistant, progressed within HHS to a Grade 6 and was then seconded to a Grade 7 position in another department.

Professional services staff are also given opportunities wherever possible to sit on influential committees, eg. extenuating circumstances.

To enhance career progression, staff are also encouraged to use the school Mentoring Scheme. In the staff survey 100% of male and 82% of female professional services staff agreed that HHS provides them with useful mentoring.

There is a perception that job opportunities are more restricted for PT staff with one commenting that many professional services jobs are not advertised as flexible.

❖ 2017 Action 5.10: Increase number of professional services posts advertised on a flexible FT/PT basis.

## 5.5. Flexible working and managing career breaks

### (i) Cover and support for maternity and adoption leave: before leave

Explain what support the department offers to staff before they go on maternity and adoption leave.

#### HHS ACADEMIC AND SUPPORT STAFF: PARENTAL & ADOPTION LEAVE 2013-2017

	2013 - 2017			TOTAL
	Paternity Leave	Maternity leave	Adoption leave	
Academic staff	1	7	1	9
Support staff	0	4	0	4
<b>No. of applications received</b>	<b>1</b>	<b>11</b>	<b>1</b>	<b>13</b>

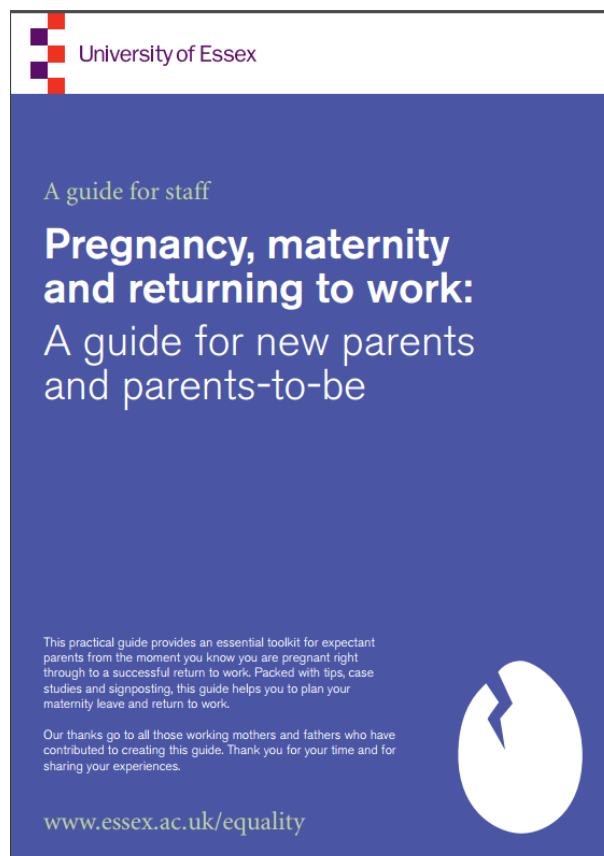
*Maternity leave: 1 member of staff is still on maternity leave (at 10 Jan 2017).*

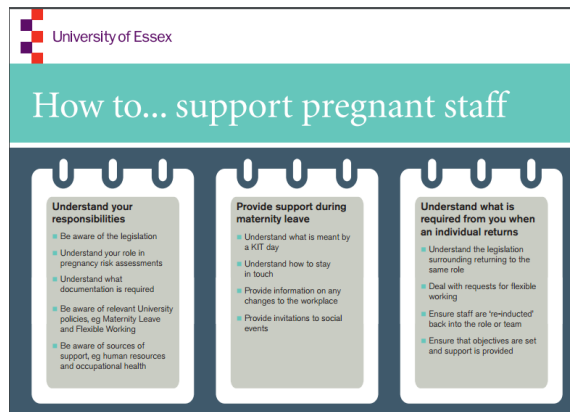
In the last 3 years, 9 academic staff have taken parental leave. This includes 7 taking maternity leave (1 of whom took shared parental leave with their partner), 1 paternity leave and 1 adoption leave. In the same period 4 professional services staff have taken maternity leave.

HHS staff who are pregnant or adopting meet with their line manager and HoS (in addition to HR) to:

- conduct a risk assessment
- entitlements
- arrangements for leave
- work handover
- cover of work
- Keeping In Touch (KIT) days
- return to work arrangements

They are made aware of the UoE booklet for staff going on maternity leave with guidance about support available, case studies and signposting to family friendly policies. They are also made aware of a dedicated parent and baby room for women to breastfeed or rest during the day and the UoE Parent to be Seminars.





UoE has also developed a reference guide for managers on 'how to....support pregnant staff'. All managers in HHS are aware of this and refer to it should they need to.

✓ Those going on maternity leave are offered pairing with a colleague recently returned from maternity leave (HHS SWAN Bronze Action 6.5).

- ❖ 2017 Action 6.1: Encourage line managers to use above guide to inform discussion before/ during and after parental leave.
- ❖ 2017 Action 6.2: Continue to offer pairings between colleagues going and returning from maternity leave.

### (ii) Cover and support for maternity and adoption leave: during leave

Explain what support the department offers to staff during maternity and adoption leave.

During maternity/adoption leave the individual's supervisor keeps in regular contact. Individuals are strongly encouraged to make use of their 10 KIT days and all have done so. Staff report that these are invaluable for "keeping them in the loop" and preparing for a return to work. The HoS meets with individuals before they return to discuss flexible working, workload and objectives for the coming months. In two cases this has resulted (at the returnees request) in a reduction in hours worked.

Their responsibilities are covered by other staff where possible, often those who work PT who are happy to increase their FTE, or via a temporary appointment. In at least 3 cases, temporary maternity cover has subsequently led to permanent employment.

(iii) Cover and support for maternity and adoption leave: returning to work

Explain what support the department offers to staff on return from maternity or adoption leave. Comment on any funding provided to support returning staff.

There is a University Nursery on the Colchester campus which is used by staff and students.

Further to an action in the UoE Institutional Bronze action plan, the University has a 'Returning Parent Career Development Fund' which provides funding for childcare for staff to attend conferences etc outside contracted hours.

✓ This has been actively promoted 'by displaying it prominently in all the kitchens used by HHS staff (HHS Bronze action 6.3) and has been accessed by one member of HHS staff. We have provided feedback to UoE SWAN Steering Group about potentially making the Fund more flexible in order to increase take-up.

❖ Action 2017 6.3: HHS will support extension of Parent Career Development Fund to professional services staff and to allow carers (not just parents) to use it.

There is a UoE Parent's Support Network (and online Network to link up with staff members at Southend) and Parent Mentoring Scheme. 2 members of HHS staff are parent mentors and many attend Parent Support Network events.

### **Parent Mentor Profiles**

#### **Name: Selena Hammond**

**Job title:** Lecturer in Occupational Therapy

**Place of work:** School of Health and Human Sciences

**Contact details:** [shammond@essex.ac.uk](mailto:shammond@essex.ac.uk)



**Profile:** Selena returned to work at the University after a period of maternity leave in February 2013 to work full time but on a flexible basis. Selena has experience of using child minders and also the childcare voucher scheme. *'When I returned to work after maternity leave I wanted to be able to continue to develop within my career as well as spending time with my son. Flexible working has enabled me to achieve this'.*

Selena's advice for parents having maternity leave:

- Identify possible options for returning to work (i.e. either part time or flexible working) before taking the maternity leave.
- Use Keeping in Touch (KIT) days during maternity leave to keep up to date with changes within the team, School and the programmes, and to make the transition to returning to work more manageable.
- Utilise support from Human Resources as required – they are very knowledgeable.

HHS actively signposts this support from its SWAN web page and encourages individuals to participate in these activities.

❖ Action 6.4: HHS staff member to run a workshop for the Parents Support Network on a child related health topic.

(iv) **Maternity return rate**

Provide data and comment on the maternity return rate in the department. Data of staff whose contracts are not renewed while on maternity leave should be included in the section along with commentary.

100% of academic and professional services staff have returned to work following maternity leave and have stayed in post 18 months after returning. We aim to maintain a 100% return to work rate in accordance with the SWAN Bronze Award Action Plan.

**SILVER APPLICATIONS ONLY**

Provide data and comment on the proportion of staff remaining in post six, 12 and 18 months after return from maternity leave.

See above paragraph.

(v) **Paternity, shared parental, adoption, and parental leave uptake**

In the last 3 years:

- 1 academic staff member took paternity leave and returned.
- 1 academic female member of staff arranged shared parental leave and noted that while she was able to get information from speaking to HR, HHS managers were not always aware of the processes, eg. That UoE has increased shared parental pay above the statutory minimum to encourage more staff to utilise the scheme.

❖ Action 6.5: Ensure senior staff in HHS are better informed about processes around shared parental leave.

1 academic female member of staff has taken adoption leave. HHS worked with HR to put her in touch with a colleague recently returned from adoption leave, which she found “invaluable; both in the sense of managing work balance / impact on work life, but going forward in terms of sharing experiences of living with a child in a post-trauma state.”

Whilst we have attempted to raise awareness of paternity, shared parental and adoption leave support (HHS SWAN Bronze Action 6.1), the results from the staff survey showed that over half of HHS staff were not aware of parental leave processes and this was particularly marked among male staff.

❖ Action 6.6: Increase awareness about support for men who take parental leave particularly among male staff

#### (vi) Flexible working

Provide information on the flexible working arrangements available.

### HHS ACADEMIC AND SUPPORT STAFF: FLEXIBLE WORKING REQUESTS AND OUTCOMES 2013-2016

	2013/14		TOTAL	2014/15		TOTAL	2015/16		TOTAL
	Male	Female		Male	Female		Male	Female	
Academic staff	0	2	2	2	3	5	0	4	4
Support staff	0	1	1	0	1	1	0	4	4
No of applications successful	0	3	3	2	4	6	0	7	7
No of applications unsuccessful	0	0	0	0	0	0	0	1	1
Total No. of applications received	0	3	3	2	4	6	0	8	8

NOTES: 16 of 17 requests were successful for the period 2013-16

Reasons for flexible working requests (n) from 2013-16 included: Reduction in hours, including full-time to part-time (7); Compression of hours (4); Request for period of unpaid leave (1); Change of campus base (2); Change of working days (3).

In 2016 UoE approved a new work life balance policy in order to encourage flexible working and increase the numbers taking advantage of flexible working arrangements. This has supported work that was already on-going in HHS linked to the HHS SWAN Bronze Action plan to promote flexible working and encourage more staff to put in formal applications. This is promoted at induction (it is on the checklist), through posters in HHS and the website. Line manager are aware of the policy and it is on the appraisal checklist.

- ✓ The number of flexible working requests has increased as a result from 3 in 2013/14 to 6 in 2014/15 to 8 in 2015/16 (HHS SWAN Bronze Action 6.2).
- ✓ The number of requests from women has increased each year and all but 1 have been successful (HHS SWAN Bronze Action 6.4). The unsuccessful applicant applied again at a later date and was successful.
- ✓ The proportion of academic staff in the survey agreeing that HHS is responsive to flexible working increased from 46% in 2014 to 70% in 2016. In addition 80% of academic staff and 75% of professional services staff also agree that HHS has a good culture around flexible working.

However, the number of men who have put in flexible requests is very low (2 in 3 years) suggesting the need for a more targeted promotion of the flexible working policy.

❖ 2017 Action 6.8: Encourage more men to apply for flexible working by raising awareness.

- ✓ The proportion of academic staff agreeing that “staff working part-time/flexibly in HHS are offered the same opportunities as full-time” has increased from 30% in 2014 to 54% in 2016 and 65% of professional services staff also agree. Whilst this is going in the right direction, and the data re promotion suggests that career progression of PT staff is improving, we need to ensure that people on PT contracts are aware of, and supported to use, the same opportunities.

❖ See 2017 Action 3.2.

Flexible working is requested for a number of reasons. A member of support staff applied for flexible working when on maternity leave and again two years later when using nursery childcare. On both occasions she reported that the School Manager and HoS were very supportive of the request and was pleased with the outcome, noting “I feel HHS values its staff and can be flexible when necessary”.

Another female staff member successfully applied for flexible working to give her more time to spend on her PhD. She also noted that the School was very supportive when she requested leave for a week due to a family issue. When asked if HHS has a good culture around flexible working she commented: “Yes, and when I look at other staff who are also on flexible working, I get the same impression.”



(vii) Transition from part-time back to full-time work after career breaks

Outline what policy and practice exists to support and enable staff who work part-time after a career break to transition back to full-time roles.

The new UoE work life balance policy now specifically mentions this in response to the Institutional Bronze action plan.

There are no examples in HHS of this happening after a career break but a female Lecturer has successfully used the flexible working policy, supported by her line manager, to go from FT to PT and back to FT to accommodate medium-term caring responsibilities.

## 5.6. Organisation and culture

(i) Culture

Demonstrate how the department actively considers gender equality and inclusivity. Provide details of how the Athena SWAN Charter principles have been, and will continue to be, embedded into the culture and workings of the department.

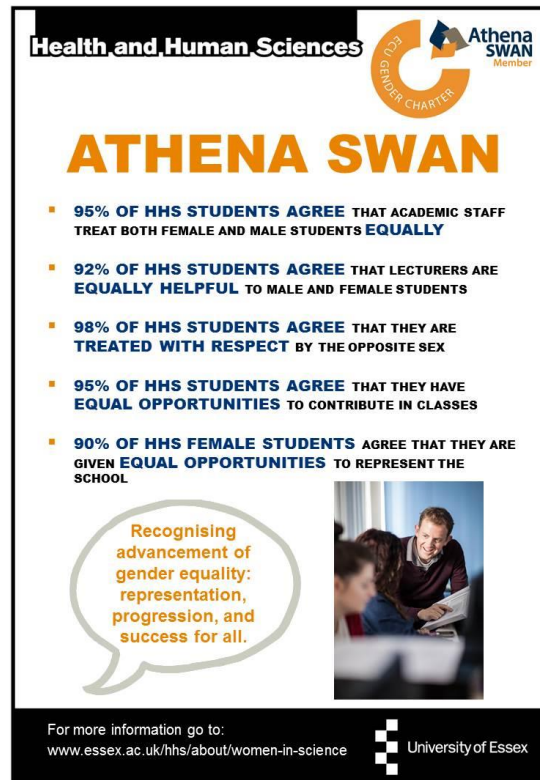
The School has embraced the Athena SWAN Charter principles with enthusiasm.



*HHS Academic and Professional Services staff with the School Athena Swan banner on display in the open social space, Colchester building foyer*

HHS regularly contributes to University activities to promote equality and inclusivity: Chairing the Athena SWAN University committee; being a founding member of the University Women's Network; running a stand at events to celebrate international women's day; 5 members of staff contributed to the 2017 publication 'LGBT+ Perspectives - a UoE Reader'; regular contribution to events run by the UoE LGBT alliance.

- ✓ SAT act as a conduit to promote new initiatives (HHS SWAN Bronze action 2.7). SAT has raised awareness of SWAN, developing and displaying promotional materials, and in the 2016 staff survey surpassed the target of 80% awareness of SWAN (HHS SWAN Bronze Action 1.4) and E&D more generally (HHS SWAN Bronze Action 5.8).
- ✓ 75% of academic and 95% of professional service staff claim that staff are treated on their merits irrespective of gender, and 85% academic and 95% of professional services staff are aware of SWAN.
- ✓ The student survey showed that students overwhelmingly agreed that students get equal opportunities (see the poster below). Female and male student responses were similar but the proportion of white students agreeing with these statements is approximately 5% higher than among those who identify as BAME. This suggests that further work is required to enhance inclusivity.



*Poster promoting Athena Swan and HHS student views from the 2016 student survey*

❖ See 2017 Action 2.9 about inclusivity



### Athena SWAN Charter

- Representation, progression and a working environment that promotes gender equality in higher education and research.
- Equal opportunities for all academic and professional services staff and students.
- Advancing careers, promoting inclusivity and fostering a healthy work life balance.



The School of Health and Human Sciences was awarded the Athena SWAN Bronze Departmental Award in October 2015. HHS is committed to equality and development of an inclusive culture promoting dignity and respect, qualities that are also endorsed by the values of the NHS constitution with which all staff and students engage.

### Contact information:

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HHS Athena SWAN Lead  
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E gillgr@essex.ac.uk

► [www.essex.ac.uk/hhs/about/women\\_in\\_science](http://www.essex.ac.uk/hhs/about/women_in_science)



University of Essex

*HHS Poster promoting the Athena Swan Charter to staff and students*

❖ See 2017 Action 2.9.

As gender labels are becoming more fluid, feedback from staff queried whether too much emphasis is placed on a binary gender distinction of male/female and whether this terminology is exclusive.

- ❖ 2017 Action 7.1: Run a workshop to discuss moving beyond binary gender distinctions
- ❖ 2017 Action 7.2: Disseminate achievement stories and profiles of BAME and other role models in HHS staff newsletter and the HHS website.
- ❖ 2017 Action 7.3: Further promotion of LGBT activities.

## (ii) HR policies

Describe how the department monitors the consistency in application of HR policies for equality, dignity at work, bullying, harassment, grievance and disciplinary processes. Describe actions taken to address any identified differences between policy and practice. Comment on how the department ensures staff with management responsibilities are kept informed and updated on HR policies.

UoE has demonstrated commitment to the SWAN Charter principles, eg. in 2016, UoE was named as a Top 100 Employer by Stonewall and successfully closed the professorial gender pay gap. SWAN is central to this activity and HHS has played a key role: the academic SWAN lead for the UoE is from HHS and there is additional HHS representation on the UoE SWAN SAT and task & finish groups relating to appraisal and flexible working.

There is also evidence of innovations developed by non-managerial staff informing policy. A Lecturer with a health and social care background has introduced Schwartz Rounds, which are widely used in the NHS. These provide a structured forum for staff to discuss the social and emotional aspects of their work and are associated with helping staff feel more supported, less stressed and increasing levels of compassion and empathy in the workplace. A steering group has been formed (9 women, 3 men), HR have been consulted and are supportive of HHS plans to run a pilot among HHS staff and nursing students.

- ❖ 2017 Action 7.4: Pilot Schwartz Rounds and evaluate impact on HHS staff and students in terms of enhancing well-being in the workplace.

HR policies are discussed at termly meetings of senior staff and general staff meetings and concerns/suggestions are fed back. The HoS also invites feedback at informal drop-in staff forums where concerns can be raised.

- ✓ Policies and information are displayed on HHS kitchen noticeboards covering: flexible working; shared parental leave; parents network; Essex Women's Network; mentoring; staff development fund.



- ✓ Policies are further disseminated in the monthly HHS staff newsletter to all staff.
- ✓ The HHS SWAN website is regularly updated and the HHS facebook is currently running a 'video about gender equality in HHS' competition for students, to enhance student engagement.



#### Useful Athena Swan resources

There many opportunities, resources and support networks available for women in science, both within and outside our University. Further information can be found below and on the main university [Athena SWAN resources page](#).

#### Career development

▶ Leadership
▶ Training and funding opportunities
▶ Mentoring
▶ Annual review process

#### Family friendly policies and occupational health

The School actively promotes a family friendly working environment for staff, implementing a range of family friendly policies to support working parents and parents to be. These include flexible working, compressed hours, childcare vouchers, flexible benefits, family leave and maternity keeping in touch days. Further information on these opportunities, as well as information for pregnant staff, their managers and students can be found on the [Human Resources policies page](#).

#### Support for working parents

The University has recently created a 'support for working parents' package, which includes a Parents' Support Network, Parents Mentoring Scheme and regular Parents-to-be Seminars. The School is supportive of staff with caring responsibilities and encourages working parents and parents-to-be to take advantage of these useful resources.

Good quality childcare is a key concern for working parents. The University has an on-site [nursery](#) which offers exceptional day care to children from 3 months to 5 years. In addition, the [Wivenhoe Park Holiday Club](#) offers holiday childcare for primary school age children in its own dedicated space within the Day Nursery.

CHUMS (Children's Holidays at the University of Essex Multi-activity Sports) offers a holiday activity camp for children, aged from eight to fourteen, on-site at the University Sports Centre. The University operates the flexible benefits and [childcare vouchers](#) schemes to support working parents with the costs of childcare. Essex County Council provides further [support for finding quality childcare](#) in the Essex area.

*Screenshot of HHS Athena SWAN Website*

### (iii) Representation of men and women on committees

Provide data for all department committees broken down by gender and staff type. Identify the most influential committees. Explain how potential committee members are identified and comment on any consideration given to gender equality in the selection of representatives and what the department is doing to address any gender imbalances. Comment on how the issue of 'committee overload' is addressed where there are small numbers of women or men.

	2013/14			2014/15			2015/16		
	F	M	Total	F	M	Total	F	M	Total
Teaching, Learning & Quality Assurance (TLQE)	7	5	<b>12</b>	10	4	<b>14</b>	11	6	<b>17</b>
Research	9	4	<b>13</b>	10	4	<b>14</b>	11	5	<b>16</b>
Senior Staff	15	9	<b>24</b>	13	8	<b>21</b>	15	9	<b>24</b>
Subject leads	10	4	<b>14</b>	7	7	<b>14</b>	7	8	<b>15</b>
Extenuating Circs	4	4	<b>8</b>	6	4	<b>10</b>	5	3	<b>8</b>

✓ Women are proportionally represented on key committees in HHS (HHS SWAN Bronze Action 5.5).

There is relative stability in committee membership and grades of staff and gender composition do not change a lot. In terms of grades of staff in 2015/16:

TLQE: 5 Senior Lecturers (4 female); 10 Lecturers (5 female) and 2 professional services staff (both female)

Research: 2 Professors (1 female); 9 Senior Lecturers (5 female), 4 Lecturers (3 female) and 1 professional services staff (female)

Senior Staff : 5 professors (4 female) and 18 Senior Lecturers (10 females) and 1 professional services staff (female)

Subject leads: 2 professors (2 female); 9 Senior Lecturers (5 female) ; 4 Lecturers (0 female)

Extenuating Circs: 2 Senior Lecturers (female); 3 Lecturers (2 female) and 3 professional services staff (2 female)

Committee membership is overseen by the HoS and the process of inviting staff to join committees (with the exception of senior staff and subject leads committees) is as inclusive as possible. Some membership is dictated by role, eg.

Research Director and Deputy are on the Research Committee. For wider membership, the HoS regularly e-mails invitations to staff to join committees.

In addition, there are Task & Finish groups to oversee specific initiatives: eg. WAM review and revision; and Schwartz Rounds in 2016/17. The HoS asks a staff member to lead such activities and they then e-mail staff to invite them to be part of the group.

To facilitate engagement with committees from junior and part-time staff (HHS SWAN Bronze Action 5.1):

- ✓ Discussion about committee membership is on the appraisal checklist to ensure that staff are aware of the link between 'citizenship' and promotion (there are criteria at every grade linked to citizenship).
- ✓ Staff are made aware that they can request to observe committees although few have elected to do so.

❖ 2017 Action 7.5: add committee observation to the appraisal checklist so that staff are encouraged to do this.

- ✓ In the 2016 staff survey 77% (compared to 66% in 2014) of academic staff agreed they were encouraged and given opportunities to participate in influential committees either inside or outside the School.

❖ 2017 Action 7.6: Rotate committee membership more regularly to give more staff opportunities to gain additional experience for promotion and career progression.

Going forward the new School of Health & Social Care will have a Senior Leadership Team (see Section 1) and key roles will be gender balanced (see 2017 Action 3.1).

#### (iv) Participation on influential external committees

How are staff encouraged to participate in other influential external committees and what procedures are in place to encourage women (or men if they are underrepresented) to participate in these committees?

Women and men in HHS are well represented on a range of influential committees. The number of male and female senior staff is sufficiently large to prevent committee overload. This is monitored and addressed at appraisal.

Examples of HHS membership of External Committees include: Council of Deans; NIHR Research panels; Executive group of NIHR INVOLVE.

Influential UoE committees other than those attended by specific role-holders, eg. Director of Education.

A female member of HHS was on a working group examining professorial salaries.

There has been a female from HHS on the Academic Staffing committee for the last 6 years.

A female HHS staff is on the UoE Senate.

- ✓ All these activities are included on the WAM to avoid overload (HHS AS Bronze Action 5.3).
- ✓ HHS promotes and encourages staff to attend programmes which prepare staff for leadership roles (see Section 5.2(i)) and encourage committee participation (HHS SWAN Bronze Action 5.4).
- ✓ In the 2016 staff survey 59% of academic staff (compared to 48% in 2014) and 80% of professional services staff agreed that 'HHS 'provides me with leadership and management opportunities'.

#### (v) Workload model

Describe any workload allocation model in place and what it includes. Comment on ways in which the model is monitored for gender bias and whether it is taken into account at appraisal/development review and in promotion criteria. Comment on the rotation of responsibilities and if staff consider the model to be transparent and fair.

The current HHS WAM was introduced in 2015 to provide an opportunity for review and planning of workload allocation for the following academic year. This is undertaken alongside annual appraisal where individuals can raise concerns around workload and career development. The WAM is mandatory and comprehensive including all teaching, pastoral, administrative and outreach activities. Staff identify their workload in a range of areas which broadly align with the University criteria for permanency and promotion.

- ✓ SWAN activities are included in the WAM, eg. For both the SWAN lead and SAT members but are not consistently recorded (HHS SWAN Bronze Action 5.6).

- ❖ 2017 Action 7.7: Ensure that the WAM is fully integrated with the values of SWAN, eg. Define specific WAM % for SWAN lead and SAT membership

The WAM is transparent and all individual workloads are available for staff to review. It is a mechanism to monitor whether PT staff, new staff and those

returning from parental leave have proportionately lower workloads. It also enables the identification of workload inequalities among staff, which HoS uses to allocate unforeseen work which emerges during the year.

The HoS review of WAM forms in 2016 and identified some lack of consistency and inequalities (not gender based) as well as difficulty in using it to make group comparisons. A Task & Finish group has been constituted to revise the WAM to achieve the following :

- ❖ 2017 Action 7.8: Align the WAM more closely with promotion criteria by ensuring all staff take part in a range of activities.
- ❖ 2017 Action 7.9: That there is more detailed guidance to ensure greater consistency in completion of WAM.
- ❖ 2017 Action 7.10: that data is easier to extract to make comparisons between groups of staff and to ensure that taking on an extra responsibility leads to a reduction in workload elsewhere.

Senior roles and committee membership in HHS are rotated and all academic staff are alerted to vacancies in an e-mail from the HoS inviting expressions of interest.

✓ In order to promote opportunities for all staff, all roles are open to FT and PT applicants (HHS SWAN Bronze Action 4.4).

- ❖ 2017 Action 7.11: Consider a more explicit process of succession planning for key roles.

#### (vi) Timing of departmental meetings and social gatherings

Describe the consideration given to those with caring responsibilities and part-time staff around the timing of departmental meetings and social gatherings.

Finding time for meetings is challenging as: a) HHS is split site; b) many staff are employed PT working on different days.

To address this:

- Dates and times of key meetings are published well in advance.
- The day on which key meetings take place and their location varies to enable all staff to attend some meetings.

- Minutes are available on the HHS staff intranet.
- Video conferencing is arranged whenever possible.

✓ 2017 Action 7.12: lobby UoE for more meeting rooms to have video conferencing facilities so that use becomes routine for all meetings

In addition, an action from the 2015 application has resulted in the following impact (HHS SWAN Bronze Action 5.7):

✓ School staff meetings which were held outside core hours, now always take place within core hours (10am-3pm). This also raises staff awareness of the core hours policy. In the 2016 staff survey 75% of academic staff (compared to only 50% in 2014) agreed that the majority of meetings in HHS are completed in core hours.

✓ Departmental seminars take place at lunchtime.

✓ For those unable to attend staff meetings, the HoS runs a monthly informal Staff Forum. Social gatherings in the School generally take place around morning coffee time or lunchtime. These include a variety of activities which are open to all: weekly lunchtime walks (10 mainly female staff is the norm); fund-raising cake sales; charity fun runs; retirement farewells; SWAN promotional events. These take place in open social spaces so it is difficult to estimate numbers.

#### (vii) Visibility of role models

Describe how the institution builds gender equality into organisation of events. Comment on the gender balance of speakers and chairpersons in seminars, workshops and other relevant activities. Comment on publicity materials, including the department's website and images used.

As a school with a higher proportion of female than male staff and students, we ensure that all materials include images of women and men. We also ensure that the images reflect the diversity of the staff and student body.



Images of the UoE Undergraduate Prospectus showing Diversity

Departmental seminars are chaired by the female Deputy Director of Research. In 2015/16 two-thirds of the seminars were presented by a female speaker. At the annual staff-student research conference there were 15 female and 6 male oral and 27 female and 11 male poster presentations.

5/7 Chairs of the Committees listed in 5.4 (iii) are currently female.

There are currently a number of women in leadership positions in HHS (eg, HoS and Dean of Health) who act as visible role models in: student induction week, interview panels; strategic committees both inside the University and on regional and national bodies. Success stories are profiled in the monthly staff newsletter.

### (viii) Outreach activities

Provide data on the staff and students from the department involved in outreach and engagement activities by gender and grade. How is staff and student contribution to outreach and engagement activities formally recognised? Comment on the participant uptake of these activities by gender.

Staff with clinical roles in partner organisations and 'Link Lecturers' promote links and outreach with health and social care agencies. Outreach has traditionally been focussed on health and social care employers as HHS has been allocated commissioned places. Furthermore, the establishment of student placements has built robust links with, and regular staff visits, to local hospitals, community trusts and schools where students have placements.

HHS are involved in a range of community engagement initiatives. One recent innovative outreach projects is the 'Virtual Dementia Tour' where 'suits' and machines enable the public to physically experience some common symptoms of dementia. HHS staff are currently working with 5 acute hospitals to study the impact of the 'Virtual Dementia Tour' in clinical areas.



*HHS Staff and Students with the Virtual Dementia bus on tour*

As funding for health professional courses has changed the focus has shifted to more traditional recruitment outreach, e.g. schools.

The UoE and HHS are aware of the need to promote recruitment among under-represented groups, eg. BAME students and, for HHS, male students.

❖ See 2017 Action 2.3

Outreach is included in the WAM and acknowledged in the promotion criteria, which includes 'Citizenship'. There are no apparent gender inequalities in outreach, but cannot report accurate figures due to incomplete reporting of Outreach in the WAM. The revised WAM will address this.

❖ See 2017 Actions 7.9 and 7.10

However, some outreach is reactive and can be difficult to predict in advance. This has advantages in terms of responsiveness and reach but means that it may not always be entered onto the WAM which is completed prior to the start of the academic year.

#### SILVER APPLICATIONS ONLY

##### 6. CASE STUDIES: IMPACT ON INDIVIDUALS

Recommended word count: Silver 1000 words

Two individuals working in the department should describe how the department's activities have benefitted them.

The subject of one of these case studies should be a member of the self-assessment team.

The second case study should be related to someone else in the department. More information on case studies is available in the awards handbook.

Further information

**Recommended word count: Bronze: 500 words | Silver: 500 words**

Please comment here on any other elements that are relevant to the application.

## 6. ACTION PLAN

### HHS Athena SWAN Action Plan – 2017

Action number	Objective	Rationale i.e. what evidence is there that prompted this objective?	Further action planned	Time-frame	Person responsible	Measure of success
1.1	To promote SWAN by encouraging more engagement with SAT	To broaden people inputting to SWAN  To provide opportunities for more junior staff to gain experience of committees	To invite all staff to attend SAT meetings	October 2017	SAT Chair	At least one new observer at each SAT meeting
1.2	Improve SWAN feedback loop in new School structure	Restructure of HHS to new School of Health & Social Care	Embed feedback into new School structures	October 2017	SWAN Lead and Dean of School	Regular feedback at staff meetings and to the new Senior Leadership team
1.3	Broaden representation and flow of SAT membership	Some groups are underrepresented on SAT	Target more male and BAME staff and students to join SAT	January 2018	SAT Chair	Number of male staff to increase to 4, BAME to 2 and students to 4.
1.4	SAT will continue to promote the ethos of SWAN and raise the profile of new initiatives and events.	Already engage fully with key UoE gender events, but need to broaden.	To more systematically engage with UoE events and initiatives targeted at BAME and LGBT staff and students	October 2017	SAT	Engagement with at least 1 event annually targeted at each of the following groups: women; BAME groups; LGBT groups.
2.1	Generate applications from across the workforce, including those currently under represented.	To ensure FD students more closely match the gender/ BAME/ LGBT mix in the workforce population.	Work with employers as new Apprenticeship programmes are rolled out.	January 2018	Dean of School and FD programme leads	Increase male FD students from 10% to 30%  Increase BAME students from 25% to 30%
2.2	To identify barriers affecting men applying for UG programmes	To get a better gender balance in UG programmes	Organise focus groups with male students	Before October 2018	SAT	Increase male applicants to UG programmes from 20% to 30%

Action number	Objective	Rationale i.e. what evidence is there that prompted this objective?	Further action planned	Time-frame	Person responsible	Measure of success
2.3	Ensure targeted outreach recruitment activities to reach under-represented populations.	To increase UG applications from under-represented groups	Broaden and develop innovative outreach activities to reach under-represented groups, eg. BAME and LGBT.	October 2018	Senior Leadership Team and Programme Leads	Increase male, BAME and LGBT applicants to 30%; 25%; 10% respectively.
2.4	To ensure all staff have completed E&D training	There are still a few staff yet to complete this training	At appraisal check E&D training complete and if not make it a compulsory part of their training the following year	From October 2017	Senior Leadership Team	100% of staff have completed E&D training
2.5	Monitor gender trends in the new School of Health & Social Care to encourage more male UGs	The new School of Health & Social Care will not include Sports Therapy and Physiotherapy that have traditionally had more male students	See above 2.1, 2.2, 2.3 with a particular focus on men.	October 2018	SAT and Senior Leadership Team	Increase male students from approx 20%-30%
2.6	Target BAME students to engage with UoE peer-mentoring scheme	Reduce attrition of BAME UG students by promoting available peer support	Work with UoE peer-mentoring team	March 2019	UG Programme Leads and tutors	Narrowing of gap in attrition between BAME and non-BAME UG students
2.7	Increase engagement of students, particularly BAME students, with the UoE Talent Development Centre.	To narrow BAME attainment gap by encouraging weaker students to take advantage of this support.	Raise awareness of the Talent Development Centre at a staff meeting so that staff promote it more effectively to students	Nov 2017	Dean of School and Programme Leads	Increase in engagement of HHS students with Talent Development Centre
2.8	Offer pre-session courses on campus to incoming HHS students to enhance their skills.	To narrow BAME attainment gap by providing support prior to course commencement.	To evaluate the uptake and impact of pre-session courses.	October 2018	SAT	A narrowing of BAME attainment gap from 30% to 10%.
2.9	Enhance inclusivity, particularly of BAME female students	BAME students less likely to agree HHS offers equal opportunities	Place E&D and inclusivity on the agenda at the regular Staff-Student Liaison committees	October 2018	Senior Leadership Team and Programme Leads	No ethnic difference in student views about inclusivity in the student survey

Action number	Objective	Rationale i.e. what evidence is there that prompted this objective?	Further action planned	Time-frame	Person responsible	Measure of success
2.10	To increase acceptance rates of FT PGR applicants	To encourage more overseas applicants (most of whom are male) to accept an offer	Individualised welcome information to be sent to PGR students once a place is offered	October 2018	Deputy Director of Research	An increase in the proportion of male PGR FT acceptances to 30% of total.
2.11	To reduce the number of PT PGR students withdrawing – use of social media	Provision of more support	Further development of online PGR training courses and social media communication	May 2018	Programme Leads	To increase success rate of PT PGR students from 62% to 80%.
2.12	To reduce the number of PT PGR students withdrawing – student consultation		Consult with the PGR Staff-Student liaison committee about support needs	October 2018	Programme Leads	
2.13	To reduce the number of PT PGR students withdrawing – peer support and induction		Promote peer mentorship more proactively. At induction discuss potential barriers to completion.	October 2019	Programme Leads	
2.14	Retain contact with HHS UG alumni to encourage further study	To increase number of HHS UGs returning for PG study	Contact HHS alumni 2-3 years post-qualification to see if graduate study is of interest.	May 2019	Dean of School	Increase number of HHS students returning for PG study from 5 to 8 per annum.
2.15	Develop new innovative pathways to encourage HHS UG alumni to encourage further study	There are new opportunities to offer apprenticeship programmes to PT PGR students that are both paid and work based	Develop an Advanced Clinical Practice apprenticeship pathway for PT PGR students.	October 2018	Dean of School	
3.1	To maintain an equal gender balance in the new School of Health & Social Care	Need to encourage more male applicants for staffing posts given the revised scope of the new School	Feature more men in publicity, outreach activities and interview panels	From August 2017	Senior Leadership team	50/50 gender balance among staff (measured by FTE)
3.2	Targeted career progression support for PT staff	PT staff have less time and perceive they have fewer opportunities to progress	Run a workshop to identify areas to enhance their opportunities and raise awareness of support that is available	March 2019	SAT	Equal promotion rates for PT and FT staff

Action number	Objective	Rationale i.e. what evidence is there that prompted this objective?	Further action planned	Time-frame	Person responsible	Measure of success
3.3	Identify obstacles and areas to enhance opportunities for BAME staff and inclusivity for all	BAME staff have provided feedback that this action should be routine	Consult regularly with staff to ensure equality of opportunity and inclusivity	January 2018	SAT	That there is no difference by ethnicity in response to survey questions about opportunities and inclusivity.
3.4	Enhance career development opportunities for technical staff	There is currently no bespoke career pathway for technical staff in HHS.	Consult with other Schools who have a bespoke pathway.	January 2019	SAT	To develop a clearer pathway for progression of technical staff.
3.5	Include technical staff in the SWAN SAT.	There is currently no representation SAT	Invite a technical staff representative to join.	August 2017	SAT Chair	Increased representation on SAT.
3.6	To provide further support and opportunities for staff on fixed term contracts	Staff on fixed term contracts need support particularly towards the end of their contract	Continue dialogue with HR about transition to permanency.  Regular discussion about career with line manager	October 2018	Line managers	Fixed term staff at end of contract find secure employment.
3.7	Continue to monitor turnover rates and gender of leavers and reasons for leaving	To ensure that no clear gender or other trends emerge	Regular review of exit interviews	March 2018	SAT	To respond quickly to any issues that emerge.
4.1	Continue to monitor posts that are advertised as flexible.	To ensure that advertising jobs flexibly remains routine	Annual monitoring and report to Senior Leadership Team	October 2018	SAT	That 80% of all FT academic posts are advertised flexibly.
4.2	Ensure new staff are aware of the Mentorship Scheme	To remind new staff about scheme once they have settled in	Send routine reminder to new staff about the Mentorship Scheme 3 months after their appointment	From January 2018	Mentorship Co-ordinators	100% of staff are aware of Mentorship Scheme
4.3	To improve support from probationary supervisors	To provide more systematic support for new staff	Organise training for probationary supervisors	January 2019	SAT and Senior Leadership Team	New staff report feeling more supported.

Action number	Objective	Rationale i.e. what evidence is there that prompted this objective?	Further action planned	Time-frame	Person responsible	Measure of success
4.4	To provide more support to new staff	To provide a welcome and networking opportunities for new staff to meet others.	Hold a social event for new staff to meet others and provide feedback of their experience	January 2018	SAT and Senior Leadership Team	New staff report feeling welcome
4.5	To provide more support for promotion - promote dialogue	To share understanding between senior and junior staff about the promotion experience	Run an internal promotion workshop between senior and junior staff	June 2018	SAT and Senior Leadership Team	Workshop complete and 75% of staff report in survey that they feel supported.
4.6	To provide more support for promotion – provide examples	To provide more information	Compile a bank of successful applications for staff to view (with consent)	Sept 2018	SAT	Number of successful promotion applications increases to an average of 7 a year.
4.7	To provide more support for promotion – information and line manager support	To continue to encourage discussion of promotion at appraisal	Discussion at appraisal, to include setting out expectations and understanding of the criteria	Sept 2018	Senior Leadership Team	
4.8	Encourage more applications for increments/ bonuses from PT staff	PT staff are less likely to apply for increments/bonuses	Discussion at appraisal	Sept 2018	Senior Leadership Team	Number of PT staff applying for promotion to increase to 3 per year
4.9	Increase number of ASER staff	To support an independent health REF submission in 2020	Support REF-able ASE staff transfer to ASER contract.  New ASER appointments	From October 2017	Senior Leadership Team	ASER staff to increase by 100% (ie. From 5 -10) by 2020
4.10	To ensure professional services staff are well-supported at induction	More evaluation of current system is required.	Consult with professional services staff to identify what more support could be in place at induction	June 2018	SAT and School Manager	Short evaluation of induction with recommendations for further action.
4.11	To retain current rate of HERA upgrades and increase number of successful increment/bonuses applications	More evaluation of current system is required.	Consult with professional services staff to evaluate current process.	Nov 2018	SAT and School Manager	2 HERA upgrades a year and increase in numbers applying for increments or bonuses to 12 a year.

Action number	Objective	Rationale i.e. what evidence is there that prompted this objective?	Further action planned	Time-frame	Person responsible	Measure of success
5.1	To encourage more staff to do unconscious bias training	To increase E&D understanding among staff	At appraisal check Unconscious Bias training complete and incorporate into training plan	From October 2018	Senior Leadership Team	50% of staff have completed unconscious bias training
5.2	To gather appraisees views of the appraisal process	To enhance the appraisal system	Survey appraisees to gather their views about the effectiveness of appraisal	March 2018	SAT	80% of staff surveyed agree the appraisal is helpful
5.3	To raise awareness of appraisal among appraisers and appraisees		Promote UoE training for all staff about appraisal	Nov 2019	SAT	5 staff follow the appraisal training course each year
5.4	Encourage more staff engagement with the Mentorship Scheme	The evaluation shows engagement with the scheme is beneficial	Run workshops to promote potential advantages	May 2018	Mentorship Co-ordinators	40% of staff to have engaged with the scheme by 2020
5.5	Provide more postdoctoral opportunities for PhD students	There are limited opportunities as most doctoral students find work in their chosen profession.	Increase grant income to increase the number of postdoctoral positions.	On going	Director of Research	To have 4 postdoctoral positions by 2020
5.6			Increase graduate teaching assistant opportunities	On-going	HoS and Programme Leads	To have 4 such positions by 2020
5.7			Provide support to students applying for post-doctoral fellowships or positions.	July 2019	Director of Research	To have 4 PhD students engaged in post-doctoral research by 2020
5.8	To have a more equal gender balance among professional services staff engaging with leadership/ coaching and unconscious bias training	Few male professional services staff currently engage with this training.	Encourage more men to engage with such training if relevant to their role.	From October 2017	School Manager	To achieve an equal gender balance
5.9	To evaluate training of professional services staff	To ensure that it has the required impact.	Monitor impact of training more systematically	April 2018	School Manager	Effectiveness of training logged

Action number	Objective	Rationale i.e. what evidence is there that prompted this objective?	Further action planned	Time-frame	Person responsible	Measure of success
5.10	To provide more opportunities for PT professional services staff	To create more PT posts where feasible	Increase number of professional services posts advertised on a flexible FT/PT basis	October 2017	School Manager	Increase in FT professional posts that are advertised as flexible
6.1	To encourage use of maternity guide developed by UoE	To ensure line manager are appropriately informed	Encourage line managers to use the UoE guide to inform discussions before/ during and after parental leave	April 2018	SAT and Senior Leadership Team	Staff report greater knowledge about maternity process in staff survey
6.2	To encourage peer-support for people on maternity leave	Feedback has thus far been positive.	Continue to offer pairings between colleagues going and returning from maternity leave.	On-going	Senior Leadership Team and line managers	Positive feedback from those who are paired.
6.3	To increase use of the Parent Career Development Fund among HHS staff	Use has thus far been low	HHS will support extension of Parent Career Development Fund to professional services staff and to allow carers (not just parents) to use it.	July 2017	HoS	Increase in uptake among HHS staff
6.4	Contribute to the Parent's Support Network	To demonstrate HHS support and input	HHS staff member to run a workshop for the Parents Support Network on a child related health topic	Feb 2019	SAT	Workshop delivered with positive feedback
6.5	To raise awareness and knowledge about shared parental leave	The staff survey and staff experience suggested that staff are not well informed	Promote information about shared parental leave processes so staff are better informed	June 2018	SAT	70% of male and female staff report knowledge about parental leave, including shared parental leave, in staff survey
6.6	To raise awareness and knowledge about support for parental leave among male staff		Promote information about parental leave, particularly to male staff, so they are better informed	June 2018	SAT	
6.7	For flexible working requests to be more gender balanced	Men are much less likely to apply for flexible working	Encourage more men to apply by raising awareness	April 2019	SAT	Increase in male staff applying for flexible working

Action number	Objective	Rationale i.e. what evidence is there that prompted this objective?	Further action planned	Time-frame	Person responsible	Measure of success
7.1	Opening discussion about binary gender categorisation	Feedback suggests that not everyone identifies as male or female	Run a workshop to discuss gender categorisation	Nov 2018	SAT	Increased reference to transgender and other categories in HHS publicity and teaching materials
7.2	Greater visibility of gender/BAME /other role models, activities and achievement	To promote and celebrate achievement	Disseminate achievement stories and profiles in HHS staff newsletter and the HHS website.	On-going	SAT	10 achievements / activities of HHS staff publicised each year.
7.3	Promote LGBT activities	To be more inclusive	Eg. Promote the LGBT reader through presentations from staff who have contributed at a departmental seminar	October 2017	SAT and Deputy Director of Research	An increase in LGBT awareness and openness reported in the staff survey.
7.4	Evaluate usefulness of Schwartz Rounds	Potential to enhance staff and student well-being in the workplace	Pilot Schwartz Rounds and evaluate impact on HHS staff and students	April 2018	Schwartz Rounds Task and Finish Group	If the pilot shows benefits, embed Schwartz Rounds among staff and students
7.5	Encourage committee observation	To enhance development opportunities for junior staff	Add committee observation to the appraisal checklist	October 2017	Senior Leadership Team	10 observers at key committees per year
7.6	To give more staff more opportunities to be on committees	Membership of committees tends to be somewhat static	Rotate committee membership more regularly.	Sept 2019	Senior Leadership Team	Each committee (where possible) to change at least 3 members per annum
7.7	Ensure that the WAM is fully integrated with the values of SWAN	Membership of SAT not consistently reported on the WAM	Define specific WAM % for SWAN lead and SAT membership	January 2018	WAM Task & Finish Group	SWAN activities consistently reported on WAM.
7.8	Use the WAM to encourage staff engagement with a range of activities	Some staff workloads make it difficult for them to meet all the promotion criteria	Align the WAM more closely with promotion criteria by ensuring all staff take part in a range of activities.	January 2018	WAM Task & Finish Group	Greater range of activities for individual staff logged on the WAM


Action number	Objective	Rationale i.e. what evidence is there that prompted this objective?	Further action planned	Time-frame	Person responsible	Measure of success
7.9	Greater consistency in completion of WAM	More guidance is required	Clearer guidance about how to complete the WAM	January 2018	WAM Task & Finish Group	Greater consistency to enable more accurate comparisons
7.10	Modify the WAM so it is easier to make comparisons between groups of staff	WAM provides clear data on individuals but group comparison is very laborious	that data is easier to extract to make comparisons between groups of staff and to ensure that taking on an extra responsibility leads to a reduction in workload elsewhere.	January 2018	WAM Task & Finish Group	Group, eg. Gender, comparisons are easy to make
7.11	To have more succession planning for key roles	To make the transition smoother.	Implement a more planned and explicit process.	May 2018	Senior Leadership Team	Key roleholders are aware of transition at least 6 months prior to taking up role
7.12	To improve video conferencing facilities to assist cross-campus discussions/ meetings	Need for better communication,	Lobby UoE for more meeting rooms to have video conferencing facilities.	From May 2017	Dean of School	Video conferencing becomes routine for all meetings and departmental seminars



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## LANDSCAPE PAGE

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