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Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

Annual Equality Report 2021-2022

Our Values are....



Dyfodol  **Clinigol**
Clinical Futures

This document is available in Welsh and on request in a range of accessible formats.

Email: ABB.EDI@wales.nhs.uk

All publications are also available to download on our website
<https://abuhb.nhs.wales/>



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1. Foreword

Welcome to Aneurin Bevan University Health Board's Annual Equality Report covering the period April 2021 – March 2022. This report provides a snapshot of the work within the Health Board to advance Equality, Diversity and Inclusion during a very challenging time as well as a reflection of the work undertaken during April 2022 to March 2023.

In March 2020, following a formal consultation and ongoing engagement activities with the community we serve and our staff, we published a new Strategic Equality Plan (SEP) and Objectives for the period 2020-2024. [Strategic Equality Objectives 2020-2024.](#)

This report gives an overview of key work in relation to the delivery of our Strategic Equality Objectives and should be read in conjunction with other relevant Health Board publications. These include our Strategic Equality Plan (SEP), Annual Report, Annual Quality Statement, Population Needs Assessment, Integrated Medium Term Plan and Annual Report of the Public Health Director. These reports can be found by following the below link: <https://abuhb.nhs.wales/about-us/key-documents/>.

As the reporting period set out under the Equality Act and Public Sector Duty is for the retrospective year, this Annual Report describes and incorporates our work towards implementing our equality objectives during April 2021 to March 2022 as well as a reflection of the work also undertaken during April 2022 to March 2023. Given that we are publishing this Annual Report in March 2023, and this is the last year of the current Strategic Equality Objectives, it is sensible to bring the activities and actions completed up to date. This Annual Report will include the Equality Monitoring Data for 31 March 2022, but the activities will cover a two-year period.

The actions that were identified in the SEP were impacted by the Covid-19 pandemic, with many actions needing to be delayed or amended. Patient and community engagement was impacted greatly as we had to think differently about how we could provide services in a different way and for our services to be inclusive.

It has now been recognised that Covid-19 has further magnified inequalities for many people with protected characteristics and those who are socio-economically disadvantaged. Our Health Board area soon became the first and one of the worst-hit locations in Wales and the UK. The pandemic has further highlighted existing inequalities and has widened others. Older people, ethnic minority people and some disabled people, particularly those in care homes, have been disproportionately impacted by the pandemic.

We continue to work to maximise the opportunities presented to align the equality duties within this framework. There is a range of activity taking place across Aneurin Bevan University Health Board, to advance equality of opportunity, eliminate unlawful discrimination and foster good relations.

2. Background and Context

The Equality Act 2010:

The Equality Act 2010 protects people and groups from unfavourable treatment and makes it unlawful to discriminate, harass or victimize people because of a reason related to their protected characteristic(s).

The Public Sector Equality Duty:

Section 149 of the Equality Act 2010 requires us to demonstrate compliance with the Public Sector Equality Duty (PSED) which places a statutory duty on the Health Board to:

- Eliminate unlawful discrimination, harassment, and victimisation.
- Advance equality of opportunity between persons who share a relevant protected characteristic and those who do not.
- Foster good relations between those who share a relevant protected characteristic and those who do not.

Our Health Board also has a specific duty under the PSED to undertake the following actions:

- Publish information to demonstrate compliance with the Equality Duties, at least annually.
- Set equality objectives, at least every 4 years.

The Socio-economic Duty:

The Socio-economic Duty is a new duty introduced by the Welsh Government on 31st March 2021, implementing a previously dormant section of the Equality Act (2010). Its aim is to deliver better outcomes for those who experience socio-economic disadvantage. It further enhances current equality legislation and the Well-being of Future Generations (Wales) Act 2015 and Social Services and Well-being (Wales) Act 2014.

The Socio-economic Duty places a requirement on the Health Board that when taking strategic decisions, the Health Board has due regard for the need to reduce inequalities of outcome that result from socio-economic disadvantage.

During 2021-2022, the Health Board established a process to ensure Socio-economic Impact Assessments (SEIAs) are undertaken for decisions of a strategic nature, with a new impact assessment process introduced.

The Human Rights Act 1998:

The Human Rights Act 1998 set out universal standards to ensure that a person's basic needs are recognised and met. Public Bodies have a mandated duty to

ensure they have arrangements in place to comply with the Human Rights Act 1998. It is unlawful for a healthcare organisation to act in any way that is incompatible with the Human Rights Act 1998. In practice, this means we must treat individuals with:

- **Fairness**
- **Respect**
- **Equality**
- **Dignity**
- **Autonomy**

These are known as the FREDA principles.

3. Our Values and Purpose

Our Values



The Clinical Futures Strategy, with tackling health inequality at its core, remains resilient as the direction of the organisation. This plan sets out our ambitions to deliver the strategy over the next three years. We are optimistic we are on course to deliver, have charted a realistic delivery approach and are confident our actions will support us in achieving sustainability in order to meet the needs of our communities.



Clinical Futures seeks to improve population health, resilience and well-being and deliver care closer to home, primarily thorough primary and community services, all supported by a resilient hospital network.

4. Key Equality Achievements in 2021-2023

- Progress has been made in the delivery of our equality objectives and the range of information we are increasingly able to draw upon.
- Covid-19 recovery plans recognise the impact the pandemic has had on equality groups, looking at accessibility and specialist services.
- Pilot of SignLive – accessible interpretation for British Sign Language (BSL) users.
- Review of the Health Board’s EQIA process to make it more robust and supportive and to strengthen the scrutiny in governance and decision-making structures.
- Development of a Socio-economic assessment process, in line with the new duty.
- Establishment of Staff Equality Networks.
- Establishment of fortnightly Equality, Diversity and Inclusion (EDI) Newsletters, shared on the Health Boards Intranet pages.
- Establishment of an EDI Intranet page, with a training and resources library.
- Led and worked with partners and supported a range of awareness raising initiatives and campaigns such as Virtual Pride week celebrations.
- Provided Active Bystander training to 250 staff, including the Executive Team
- Provided basic BSL awareness sessions to over 350 staff, to support the pilot and roll out of SignLive

5. Delivering the Public Sector Equality Duty

The Equality Objectives we set out to deliver in our 4-year Strategic Equality Plan take account of all the Health Board’s work and activities, planning and delivering healthcare and policy development. Our Equality Objectives are also informed by gathering and analysing information from national and local sources and evidence and from impact assessments undertaken as well as from ongoing engagement with staff and service users.

In this section of our Annual Report, we outline in further detail our key progress during 2021-2022.

Engagement

The Health Board has worked in partnership with stakeholders to ensure that it actively engages and coproduces services with people who share protected characteristics.

Equality Impact Assessments

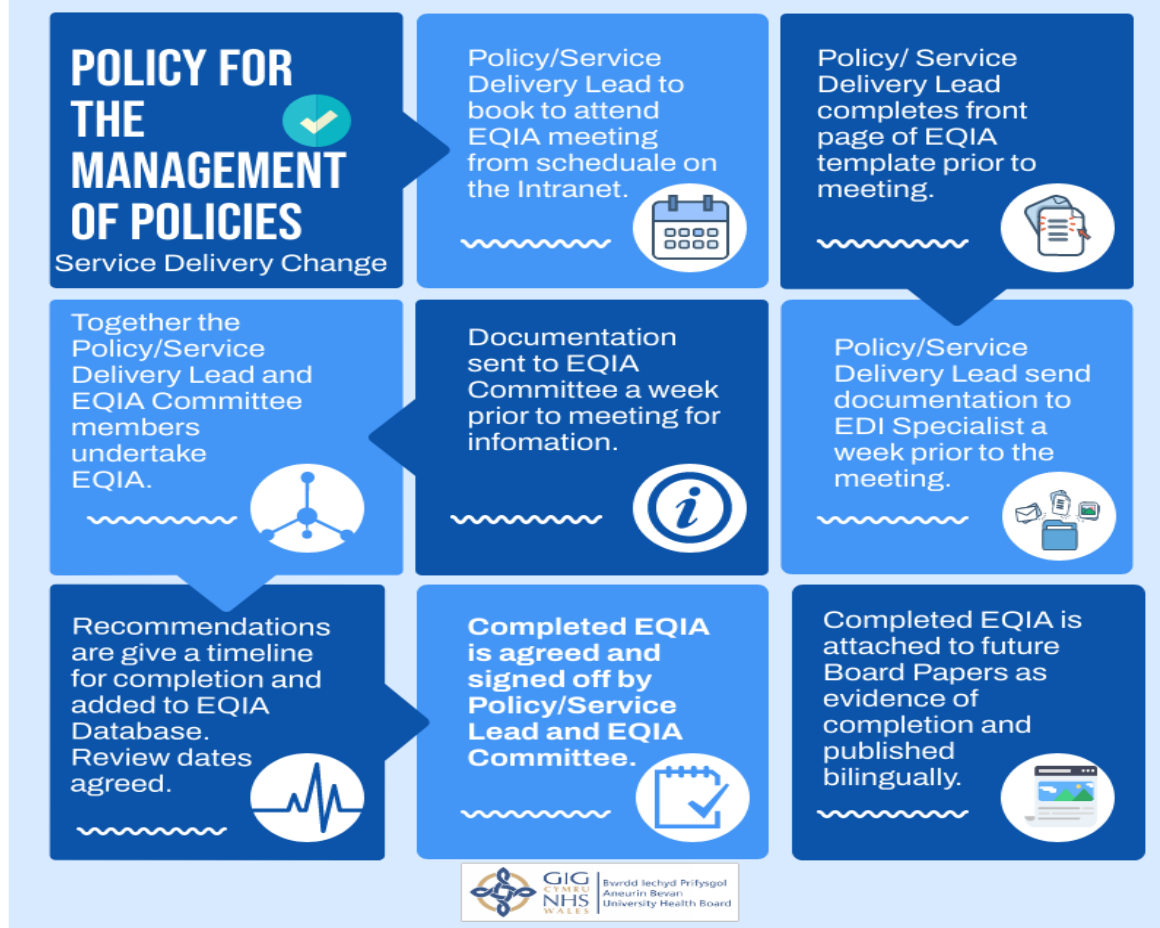
When we make decisions that potentially impact on communities, patients and our workforce, we have a statutory duty to assess the impact of our decisions on people who share protected characteristics.

EQIA's are required for a wide range of decision making across the Health Board, including developing strategies or policies, or developing and reviewing services. The process of assessing the impact of a project or decision on equality is embedded within the Health Board's governance arrangements and ensures that decisions have taken account of the needs of those who share protected characteristics.

Our Health Board has developed a multi-disciplinary Equality Impact Assessment tool (EQIA), that includes the Wellbeing of Future Generations, Armed Forces Covenant, Socio-economic factors and Welsh Standards. The tool is supported by the development of an EQIA group, with representation across divisions, leads and Trade Union support. The role of the group is to strengthen the governance and scrutiny of EQIA's as well as a development tool. The review process ensures that the lead person/people completing the EQIA has a full understanding of what is needed, from data and evidence to engagement.

Encouraging decision makers to consider intersectional impact, the interconnected and overlapping disadvantage and potential discrimination faced by people who share more than one protected characteristic. The assessment tool also supports consideration of cumulative impact, in which the effects of a decision on people may add to or interact with the impacts of other decisions being made.

EQUALITY IMPACT ASSESSMENT PROCESS



Our Workforce

The statutory protected employment reports are published on the Health Board's website.

Information relating to the equality characteristics of our workforce is held in our electronic HR system, the Electronic Staff Record (ESR). Information on job applicants is gathered as part of the recruitment process via a national system known as NHS Jobs and this enables us to understand the profile of people applying to work for us, those who were shortlisted for interview, and those who were successful.

Over the past few years, the Health Board has aimed to improve the rate of completion for our workforce equality monitoring data, recognising that some staff are reluctant to complete their equality workforce data. This has been

discussed in the various staff networks that have now been established. Where we have aimed to explain that by having accurate equality staff data enables us to improve the visibility of our workforce who share protected characteristics. This also importantly informs our workforce planning and helps identify key themes and areas for action across all stages of the employment journey.

This year in addition to the Gender Pay Gap report, we have also published a Race Pay Gap report and the Annual Employment report is included in this report.

Our Gender Pay Gap report as at 31 March 2022 has been broken down to show three sets of data, the pay gap for Agenda for Change Staff, those that are outside of Agenda for Change, such as doctors, dentists and some senior managers and the combination of both. This is so we have more robust data on where the gaps exist, so we can identify ways to then close those gaps and support our staff.

In addition to the Gender Pay Gap, the Health Board had committed itself to undertake a Race Pay Gap Audit, to assist its Anti-racist Wales objectives. This first report will provide a baseline for each year's report to identify if initiatives such as Reverse Mentorship and Anti-racist training are having a positive impact on the closing of gaps.

Staff Training

When it comes to increasing staff awareness and understanding of Equality and the Public Sector Duty's specific responsibilities, the Health Board can look to the Treat me Fairly e-learning package. As of February 2023, we have achieved 85.37% mandatory equality training compliance, an improvement against the 82.10% completion rate achieved in 2021-2022. We continue to analyse results and target key staff groups.

6. Context of Covid-19

There have now been a number of reports and areas of research that has recognised that Covid-19 has further magnified and amplified inequalities for many people who share protected characteristics and those who are socio-economically disadvantaged. For some individuals, these inequalities may be further exacerbated by barriers to accessing healthcare, marginalisation from society or discrimination.

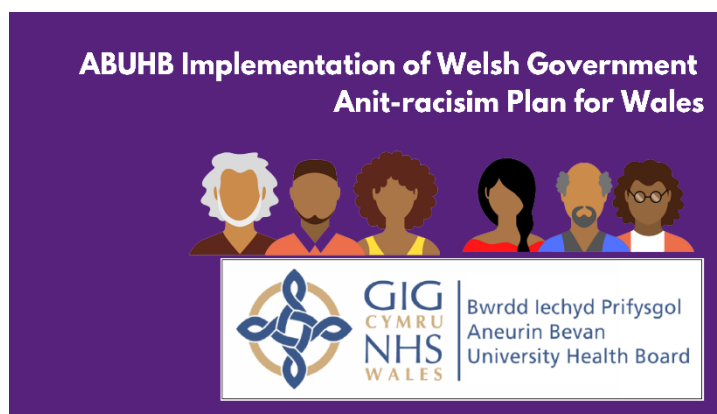
Whilst Covid-19 significantly impacted all areas of work throughout the Health Board, evidence continues to emerge that certain groups within our communities and workforce are disproportionately impacted.

The Person-Centred Care Team have for example recognised the impact Covid-19 has had on areas such as provision of volunteers support and training as well as the increased need to support the wellbeing of our Cancer patients. Which resulted in a bid to improve the support, particularly for those with protected characteristics.

When we look at the impact on our workforce we know through staff engagement surveys and via Occupational Health that Covid-19 has impacted on the way we work and deliver care and we continue to engage with our workforce to understand the impacts. Our Staff Wellbeing service provides a range of services to meet the differing emotional and psychological needs of our staff, and this will continue to develop over the next financial year.

7. Responding to Welsh Government Action Plans

In July 2022, the Welsh Government published its Anti-racist Action Plan for Wales, setting out the steps needed to be taken for Wales to be an anti-racist nation by 2030. The Health Board has responded to the action plan by creating its own actions, which will form part of the strategic equality objectives for 2024-28. The draft is currently out for staff engagement.



The LGBTQ+ Action plan was published in February 2023, and this is an area for the Health Board to include in future strategic objectives for 2024-28.

8. Delivering Our Strategic Equality Objectives

This section of our report outlines our progress in year three (of four) of our Strategic Equality Plan

Equality Objective 1

Work in partnership to reduce all hate crime.

March 2021 the Welsh Government introduced the Hate Hurts Wales Campaign. <https://gov.wales/hate-hurts-wales> The Health Board promoted the campaign on social media and via staff updates. It repeated this in 2022, reminding staff and the public of the route to report hate crimes in Wales. The short initial campaign led to a 122% increase in calls to Victim Support when compared to the previous year.

You can watch the campaign video here. <https://youtu.be/SbUG6FBkFHw>

The Health Board has continued to raise awareness and understanding among staff of how to report hate crime and support colleagues who are victims of abuse/hate crime. Work continues with multi agency partners to raise awareness and respond positively to victims of hate crime. This has included sharing information, resources and upcoming events and training opportunities.



Work has progressed in raising awareness of 'modern slavery' and the implementation of our action plan in relation to the Welsh Government Code on 'Ethical Employment in Supply Chains'.

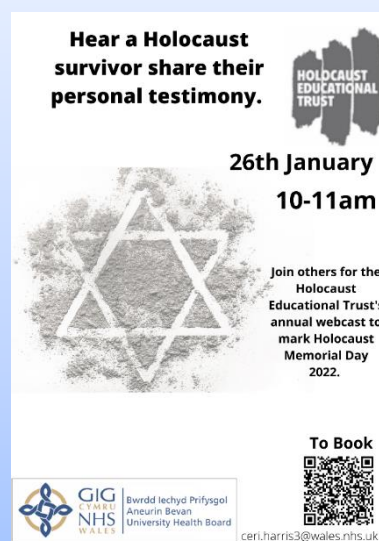
In February 2022, the Health Board was one of the first Health Boards in Wales to sign the Zero Racism Pledge, [Zero Racism Wales | Now is the time to take a stand](#) making a commitment to actively promote racial harmony and equity. To take a stand against racism and promote a more inclusive and equal workplace and society that gives every individual in Wales the right to feel safe, valued and included.



Focus on... Holocaust Memorial Day

To mark Holocaust Memorial Day, the Health Board joined many organisations and schools across the UK with a webinar hosted by the Holocaust Educational Trust. Holocaust Survivor.

Eva Clarke BEM, gave her testimonial of the experiences of her mother Anka, who gave birth to Eva in a concentration camp. Eva shared the importance of standing up against hate and hateful propaganda.



Equality Objective 2

Work in partnership to reduce the incidence of domestic abuse, 'honour' based violence and elder abuse.

Working in partnership we have continued to work with the Southeast Wales Violence against Women, Domestic Abuse and Sexual Violence (VAWDASV) Partnership Board. This provides the governance vehicle for the regional partnership for related services. We are key partners in the delivery of the **Gwent Regional Violence Against Women, Domestic Abuse and Sexual Violence Strategy 2018-2023.**

The Health Board also marked the International Day for the Elimination of Violence against Women and the White Ribbon Campaign.





The Intranet pages of the Corporate Safeguarding team have been revamped and a new newsletter and Twitter account promoted publicising important information and training. [Safeguarding Intranet pages](#)



In the mass vaccination centres the Corporate Safeguarding team set up domestic violence awareness information areas promoting the 'Live Fear Free' helpline.

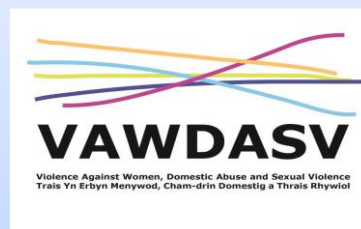


The **Independent Domestic Violence Advisor (IDVA)** has been based within the Emergency Department since April 2022 and is part of the Gwent IDVA Service that works in partnership with Violence Against Women, Domestic Abuse and Sexual Violence. Since April 2022, the IDVA have received and supported 168 direct referrals and provide indirect support to 27 members staff, offering advice, support and guidance. They have also delivered bespoke training to 161 staff on, Domestic Abuse, Stalking, Harassment and Honour based violence and Multi Agency Risk Assessment Conference referrals.

The **High Impact Service** provides a proactive approach to supportive care to patients with complex needs or vulnerabilities. The service aligns to the '*A Healthier Wales*' strategy by supporting the model of seamless health and social care with integrated services at the local and regional level, working to achieve the single whole system approach by strong multi agency/ interprofessional working to address the whole needs of an individual.

Focus on...National Training Framework for Violence Against Women.

To implement the National Training Framework for 'Violence Against Women', Domestic Abuse and Sexual Violence Act (2015), the Health Board are members of the Regional Training Group and have accredited trainers.



During 2022, the Health Board as part of our partnership with Hafan Cymru, ran Ask and Act sessions for staff via Teams. These were a half day course to;

- increase confidence and understanding of early identification,
- making a targeted enquiry and
- knowing referral pathways.

Equality Objective 3

Work in partnership with carers to continue awareness raising, provide information, and improve practical support for carers.

The Social Services and Wellbeing (Wales) Act 2014 (SSWBA) has significantly strengthened the legislative requirements for Health Boards and local government to integrate services in support of carers and the progress made to date with partner organisations provides an important foundation.



The Gwent Regional Partnership Board (RPB) was established (under Part 9 of the SSWBA) and has a duty to oversee implementation of the Act including the population needs assessment and subsequent area plans.

As part of the ongoing work, in partnership with local authorities and third sector providers, to improve access and understanding about dementia care the Health Board has been running a number of webinars during 2022. In September, October and November 2022, the Health Board as part of its partnership has held a series of webinars with under-represented groups looking at the barriers they face in accessing dementia services for themselves or those they care for. The webinars were aimed to Seldom Heard Voices in the Black, Asian and Minority Ethnic Community, Sensory Loss communities and the LGBTQ+ community.



Carers Week

A GAY DEMENTIA VENTURE.

A 35 minute, one-man play.
It opens on Sam and Derek's wedding day and goes on to explore the highs and lows of their lives as Derek's dementia progresses. Told from Sam's point of view, the play is a touching, sad, yet often funny, insight into the lives the couple.
The session will be virtual.



8th June 2022

10.30-12pm

OR

1-2.30pm

Email ABB.EDI@wales.nhs.uk or scan QR code to book



During Carers week we held two online forum theatre productions with the Purple Theatre company, looking at the experiences of a gay carer for his husband with dementia and the barriers to accessing appropriate care.

This session was made available to other Health Boards across Wales and the local authorities in Gwent. With over 200 attendees for the sessions.

In June, the Health Board also established a Carer@ABUHB staff network, to provide support for staff who are unpaid carers. The network are developing a carers guidance document to signpost staff to support.



As part of our work with the Carers Strategic Partnership, we continued to provide information such as leaflets for unpaid carers with relevant telephone numbers where they can access carers assessments and support as well as support to carers during the pandemic and national carers week, as well as administering the carer's small grant scheme.

Focus on ...Carer Friendly Accreditation

The Health Board commissioned Care Collective to undertake the Carer Friendly Accreditation on behalf of the Gwent Strategic Carers Partnership.



Carer Friendly is an initiative which aims to recognise, improve and increase access to information and support for unpaid carers. This is done through the Carer Friendly commitment campaign, the delivery of training, an accreditation scheme and signposting materials (available in both English and Welsh language). All of which are funded across the Gwent area and therefore available free of charge.

Carer Friendly Commitment: An accessible first step in becoming Carer Friendly and showing your support for unpaid carers. The aim of this is to have a wider reach and, therefore, a wider impact: helping to create communities and services that are more carer friendly. People can sign up to commit to being Carer Friendly in their capacity as an individual or on behalf of their service/organisation.

Supporting carers training workshops: The training session is currently delivered in person or through Microsoft Teams virtual platform. Training can either be booked as bespoke (closed) sessions for services and teams or can be accessed by individuals through bi-monthly open workshops (bookings for the open workshops are through Eventbrite). We also deliver supporting carers in the workplace workshops. These are aimed at enabling managers and service or team leaders to identify and support carers in the workplace setting.

Carers in the community awareness sessions: 30-minute carer awareness sessions to community councils and community groups across Gwent. The session will cover basic information about who unpaid carers are, the types of roles that they undertake and free localised support that is available to carers.

Carer Friendly accreditation: The accreditation scheme enables teams/services to enhance the support that they offer to carers and provides acknowledgement that reflects good practice. Carer Friendly, in collaboration with carers, have developed a set of six criteria which need to be evidenced in order for the accreditation to be awarded. We currently offer both basic and advanced Carer Friendly accreditation as well as a Carer Friendly Employers accreditation. We can provide exemplar tools and materials (in both English and Welsh) that can be used for convenience and will also assign a dedicated Carer Friendly Officer to guide teams/services through the process.

Equality Objective 4

Improve the wellbeing and engagement of our staff.

Improving the health and wellbeing of our staff continues to be an identified priority within the Integrated Medium-Term Plan (IMTP). The Health Board has maintained its Corporate Health Standard awards at both Gold and Platinum level.

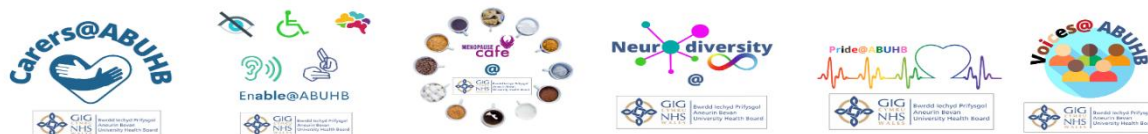
Our comprehensive Employee Wellbeing Service continues to deliver support to staff, and we continue to progress actions to support our long-term goal of the establishment of a 'Wellbeing Centre of Excellence'. The Employee Well-being service continues to provide expert clinical support through individual counselling and therapeutic support to Health Board staff and supports the priority placed on employee engagement and wellbeing within 'A Healthier Wales', the Royal College of Physicians 'Doing things differently: Supporting junior doctors in Wales' 2019, Health Education and Improvement Wales - [Health and Social Care Workforce Strategy - HEIW \(nhs.wales\)](#) and the Health Board's IMTP. It also supports a wide range of national strategic drivers identified within the All-Wales Staff Survey, NHS Wales Workforce Strategy, Well-being and Future Generations Wales (2015). During the pandemic the Employee Wellbeing Service was configured to form a 'hub and spoke' model to ensure staff were supported at this most challenging time.

The Health Board's lead psychologist for employee wellbeing is leading the framework for employee wellbeing. A framework of support has been put into place including:

- Staff wellbeing plan developed.
- Access to wellbeing support on-line.
- Well-being resource on the intranet for staff
<https://aneurinbevanwellbeing.co.uk/>.
- Network of psychologists to support at a local level.
- Intensive care and emergency department spoke teams established.
- Weekly briefing from Head of Employee Well-being to all staff.
- Road to well-being programme being delivered virtually.
- Evidence based Well-being Strategy and first in Wales psychological therapy trauma pathway and low intensity psychoeducational support pathway.
- Mental Health support scheme for doctors extended to every frontline healthcare worker in Wales.

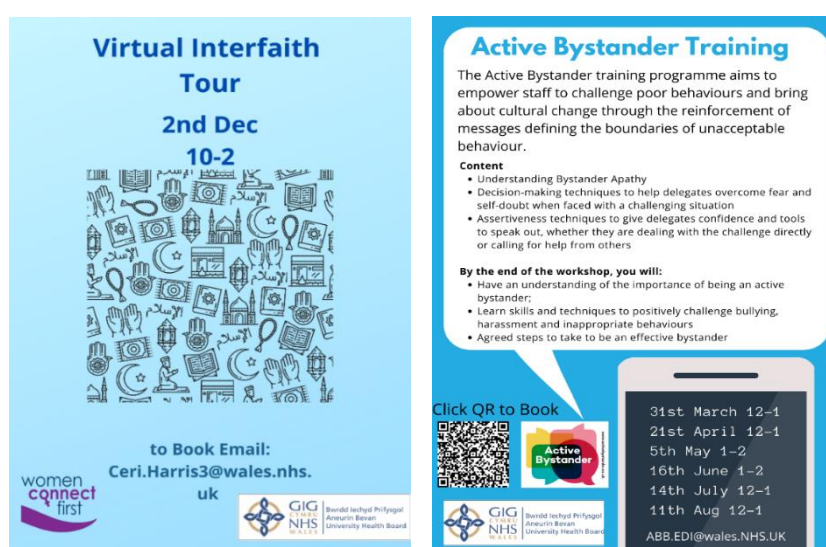
Staff Networks

Over the past 12 months, the Health Board's staff networks have grown as more staff are aware of the support available.



Training and Awareness

A number of training sessions and resources have been developed for staff to increase their awareness of EDI and support them in the workplace. Here are some examples.



Focus on... Melo



Melo is a website full of information, advice and free self-help resources approved by topic experts to help people look after their mental health and wellbeing. It has been developed by the Public Health Team at Aneurin Bevan University Health Board to help people gain knowledge, skills and confidence to look after their mental wellbeing. During 2022 the website was updated to make it easier to get around the site, with clear search bars and simplified sections and pages. They have also added:

- Over 270 free approved self-help resources
- Access to 40 free self-help courses
- Details of over 70 helplines and signposting to non-digital self-help resources
- Information on funded training for anyone working in Gwent.

[Melo Cymru - Mental Health & Wellbeing Resources, Courses & Support](#)

Equality Objective 5

Improve patient experience by ensuring services are sensitive to the needs of all and prioritise areas where evidence shows take up of services is lower or outcomes are worse.

Our Annual Quality Statement, IMTP and Annual Report of the Director of Public Health gave a comprehensive overview of the range of work that has been undertaken to reduce inequalities.

During this reporting period the Health Board, as part of the Gwent Public Services Board (PSB) became the first area in Wales to commit to become a Marmot region, signalling its strategic intent to work with the Institute of Health Equity to address inequity between communities across Gwent. This includes adopting the Marmot principles as the framework for collective action. The approach will be developed and delivered through the five-year Gwent Well-being Plan 2023-28, building on Gwent's assets of a diverse economy, rich culture and heritage, iconic natural environment and strong communities.



Why is Gwent a Marmot Region?

[Building a Fairer Gwent: Why we are a Marmot Region - YouTube](#)

The Marmot Principles

- **Give every child the best start in life.**
- **Enable all children, young people and adults to maximise their capabilities and have control over their lives.**
- **Create fair employment and good work for all.**
- **Ensure a healthy standard of living for all.**
- **Create and develop healthy and sustainable places and communities.**
- **Strengthen the role and impact of ill-health prevention.**
- **Tackle racism, discrimination and their outcomes.**
- **Pursue environmental sustainability and health equity together.**

Sensory Loss

All patient and public areas continue to work towards improving the experience for those with sensory loss. This continues to be supported by the Health and Care Standards Audit.

Focus on...Support for the Deaf Community

Over the past year, the Health Board has been piloting a video relay (VRS) and video remote interpreting (VRI) service for Deaf patients and those who use British Sign Language (BSL) through the Deaf owned business SignLive. The pilot focused on 8 key areas of the Health Board where emergency interpretation is needed. The service is to support communication needs when it a BSL interpreter has not been booked or is available. The areas in the pilot were:

- Urgent care
- Maternity
- Outpatients
- Mass Vaccination Centres
- Covid-19 Test Centre
- Putting Things Right
- Booking Centre
- A pilot GP practice



This was expanded in November 2022 to include cancer services.

Following the success of the pilot, more iPads have been purchased and as of February 2023, the service was expanded across the Health Board. The exceptions being GP practices, Dentists and Opticians who are private practices will need to procure the services themselves.

During the pilot the Health Board encountered some IT barriers that have now been resolved. As a result, the technology used for this service has enabled the Health Board to access other interpretation technology.

Insight, which is a part of Language Line, will be rolled out by the end of the financial year. Providing VRS and VRI for up to 150 community languages via desktops, iPad and work mobiles. This will make a significant difference in enabling communication with the global majority for whom English is a second language.

Accessibility

Over the last 12 months, the Person-Centred Care team, alongside Cancer Services and Clinical Psychology have been developing a need led service for patients with protected characteristics. Looking at the barriers they face, from attitudinal, communication and cultural needs. This is a three-year project that was funded by NHS Charities.

The Health Board has a Patient Information Unit that promotes accessibility guidance for staff producing information for patients and the public. The Patient Information Unit continues to update its intranet pages and publicise this widely

to increase staff awareness of the service and information on offer. This includes guidance for staff on producing accessible information.

A lower uptake of Covid-19 testing within ethnic minority communities has seen a range of positive action initiatives undertaken to ensure equality of access. This included creating a 'drop in' facility at the mass testing centre, tailored communications, and the use of community influencers to spread the word. This is a model we have continued to use since the Covid-19 vaccination became available and when we entered Flu season and the Covid-19 Autumn boosters.

Equality Objective 6

Improve the access, experience, and outcomes of those who require Mental Health and Learning Disability services.

The Health Board's vision for mental health is underpinned by:

- Together for Mental Health Strategy.
- Together for Children and Young People Service Improvement Plans; the Mental Health Measure (Wales) 2010.

As well as local integrated strategies developed in partnership with local authorities, and other statutory legislation and policy drivers.

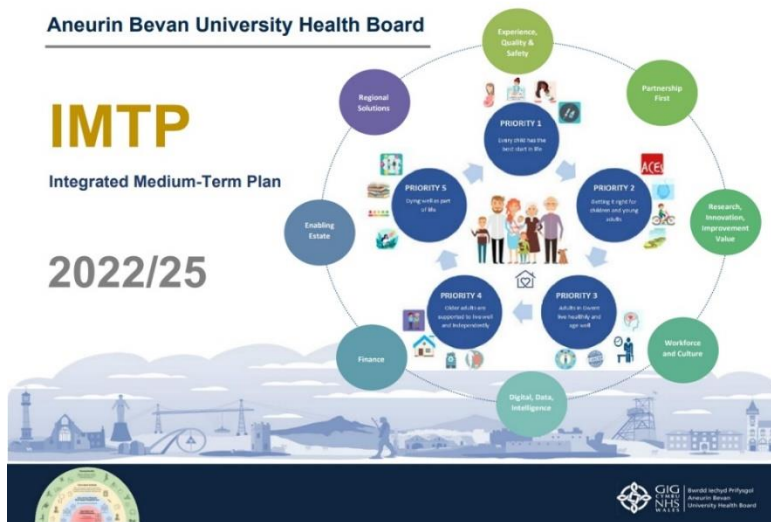
Based on these strategies and plans, our approach focusses on the following key principles:

- An emphasis on creating a culture and environment that is safe, therapeutic, respectful, and empowering. This includes a foundation of Inspirational leadership and a well-trained, competent workforce in sufficient numbers.
- A vision of services that are integrated, evidence-based and high quality; services which offer accessible information that will allow services users to experience hope and optimism about their future and their recovery and will empower them to develop their care in partnership with those that deliver care or offer support.
- An emphasis on working towards recovery and promoting independence where possible, by providing the information and support required to sustain and improve mental health and to self-manage mental health problems.
- Ensuring that people are treated and supported in environments and services that tackle stigma and discrimination.
- Developing services in partnership with the people that use them, including the design and evaluation of such services.
- Ensuring that the physical environment offers single sex facilities, usually in single rooms; gender safe communal areas; family areas; privacy and safety; and dignity for children and young people.

IMTP

Integrated Medium-Term Plan

2022/25



The Health Board's 2022-25 IMTP looked at mental health services across age groups, such as the Mental Health Resilience in Children and Young adults and recognised that the Covid-19 pandemic had a measurable impact on the mental well-being of children and young people, exacerbated by the repeated closure of schools during successive pandemic waves. With schools now fully open again and restrictions

being lifted, it is imperative to take every opportunity to support the recovery of children and young people's mental well-being. Welsh Government recently launched its 'Framework for Embedding a Whole School Approach to Emotional and Mental Well-being'. This approach to emotional and mental well-being was at the core of the 'Iceberg' model that we have been implementing with our partners to ensure that children and families getting the right help, first time, at the right time informs service planning, delivery, and measures of success. We are transitioning from our Iceberg model to the NYTH/NEST National Framework.

The Health Board has well established mechanisms in place across every state primary (195) and secondary (35) school through our school nursing teams and school in reach programs. Within schools' students can use QR codes to access services and book discrete sessions with our school nurses, psychologists or school councillors. We piloted the whole school approach model in Blaenau Gwent and Torfaen supporting school communities to develop their thinking around whole school approaches to well-being. This year our plans reflect the mental health and resilience of children and young adults at one of the highest priorities for the Health Board over the coming year and beyond.

When it comes to transforming adult mental health services, the Health Board support a rights-based approach that explicitly promotes the recovery model, with the empowerment and involvement of service users throughout the life course. Our mental health and learning disability services have a long history of strong community focused services with a well-developed network of generic and specialist services across communities that are supported by specialist local inpatient services. Our services are delivered through multi-disciplinary teams in collaboration with our public and third sector partners.

Headlines

- 9,200 PEOPLE ON WAITING LIST
- 4,600 ARE WAITING FOR PRIMARY CARE OR ADULT MENTAL HEALTH SERVICES
- AVERAGE DAYS TO FIRST CONTACT INCREASED BY 4 DAYS (29 – 33 DAYS)
- PATIENT ACUITY INCREASING
- MENTAL HEALTH ACT ADMISSIONS INCREASING

The detrimental impact of Covid-19 on the mental health and well-being of the Welsh population has been significant (Wales Wellbeing Survey, 2020/21). Recent studies published by the Centre for Mental Health (2021 report) forecast that demand is likely to exceed capacity threefold over the next three to five years, with significant

increases in conditions such as severe anxiety and depression and a disproportionate impact on individuals with existing mental health conditions. Even if the actual increase in demand is a fraction of that predicted, it means that mental health and learning disabilities services face a huge challenge in increasing the service capacity to meet this new demand at a time when significant backlogs for some services existed before the pandemic and have significantly increased over the last two years. Demand for mental health services is sharply increasing and we need to find ways of supporting people earlier within the community, to better support crisis prevention and recovery.

Learning Disabilities Service Review

The Learning Disabilities Services Review was completed in 2021, the impact of the recommendations on people affected by the change are being evaluated. One of the immediate outcomes is the proposed new service model based on three 'agile' teams (highly skilled and well supported workforce) across Gwent to respond flexibly and effectively to crisis and engage early in transition. A business case is being developed to take forward the model which focuses on specialist health assessment, interventions, and expert advice with improved experiences for service users including those with complex needs and challenging behaviours.

Equality Objective 7

Improve the experience of lesbian, gay, bisexual and transgender (LGBT) service users and staff.

The Health Board has a long-established staff Lesbian, Gay, Bisexual and Transgender Advisory virtual Group. We continue to participate in engagement activities with the wider LGBT community.

Throughout the reporting period further work has been undertaken to increase awareness of the needs of transgender and non-binary people.

In June 2022, the Health Board published its Trans Training Toolkit, providing awareness and support for staff to provide person centred care to patients and families who are non-binary, transgender or intersex.

[Caring for Trans Patients in ABUHB \(office.com\)](https://www.abuwb.nhs.uk/office.com)

We continue to maintain membership of the Stonewall Diversity Champions programme.



For the second year the Health Board came together with all the other NHS Wales organisations to hold a Pride event in August 2022.



Eleven NHS organisations took part in the Pride Cymru parade held in Cardiff in August. This was the first Pride Parade since the pandemic and NHS Wales were asked to lead the parade through Cardiff.



Focus on....Compassionate Care showcased in Iris Film

Over the past 18 months, Aneurin Bevan University Health Board have been working in partnership with Velindre NHS Trust and the Iris Film festival as part of their Iris in the Community work.

Based on the true story of a lesbian couple, Kim and Roseann, who were married at Velindre Hospital, Cardiff in 2018 whilst Kim was receiving treatment for cancer. This emotional film is a touching love story between two women and is also a celebration of the amazing staff who work for our NHS and the importance of compassionate care. The film stars Rebecca Harries and Lynn Hunter, supported by a cast of NHS professionals.

The film premiered on the opening night of the Iris Film Festival in October, as part of their best of Welsh screenings and was picked to be one of the films taken on tour around the UK as part of Iris on the move.

The Health Board has just been informed that it has also been selected for the Amsterdam LGBTQ+ film festival, with the winner announced in April 2023.



The film is a love story of both Kim and Roseann as well as the NHS.

Equality Objective 8

Gender and Pay – Develop a fuller understanding of the reasons for any differences in pay and take the necessary action to address this.

Throughout the reporting period we have continued to encourage staff to complete their equality related data on their Electronic Staff Record (ESR) as an integral part of ESR training, through specific promotional activities and regular communication messages on the ESR carousel. Despite the Health Board's move to online payslips for all staff, which has seen more staff logging into their online ESR account, significant gaps in our information remain. From an intersectional perspective, this continues to hamper a more detailed understanding in relation to gender and other protected characteristics such as ethnicity, disability, sexual orientation, and religion/belief.

It remains clear from the employment data that men continue to be underrepresented in the Health Board (as is the case across NHS Wales), however they are overrepresented in some job roles such as trade and estates related occupations and are disproportionately represented in the higher management banded posts.

The age and gender profile of the workforce together with anecdotal feedback from staff continues to identify that the menopause is a significant issue.



In November 2021, the Health Board introduced monthly virtual Menopause cafés, which support the implementation of the All-Wales Menopause Policy and the availability of awareness and support sessions for staff by the Health Board's menopause specialist nurse, who also runs a specific clinic for staff. The Menopause cafés provide a safe space for staff to talk about their menopause experiences and share tips. Over the next 12 months the cafés will alternate from virtual to physical sessions so more staff can attend.

Proportionally more women than men work part time, our anecdotal information identifies childcare and other carer responsibilities as one of the main reasons for this. We have developed an Agile Working Strategy to help staff with more flexible options for working.

Our roll out of Group 1 'Violence Against Women, Domestic Abuse and Sexual Violence' training continues to indicate a significant number of mainly historical disclosures that is also likely to be having a negative impact on women's progression within the workforce. We have continued to raise awareness and understanding of the effective implementation of our Health Board policy: "Supporting Staff Who Are Victims of Domestic Violence". This became increasingly important as the emerging evidence of increased domestic abuse became apparent during the lock down required as part of the management of

the pandemic.



Each year the health board publishes its Gender Pay Gap report, to identify if the pay gap between men and women is closing. In this year's report the data is broken down into agenda for change staff and those outside agenda for change, such as doctors, dentists and some senior managers. This gives a clearer picture of where the gaps exist as well as help the Health Board understand what changes it can make in those specific areas.

This year the Health Board also published its Race Pay Gap report with the aim to identify support for our minority ethnic staff to progress in the Health Board.

Other examples of work undertaken in 2022-23

- Published Trans Training Toolkit for staff with over 600 staff accessing the training since June 2022.
- Led on the development of NHS Wales Equality Week in May 2022, with over 750 NHS staff from across Wales taking part.
- Draft response to Anti-racist Wales Action plan out for staff consultation
- Training sessions on the Social Model of Disability and Reasonable Adjustments.

Seen Project

As part of the Health Board's work for the Anti-racist action plan, a bid was submitted to Welsh Government to invite staff and members of the public to identify and celebrate those from the Black, Asian and Minority Ethnic community that do or have worked in healthcare and/or are connected to Gwent to create 10 pieces of art to be displayed at 10 sites across the Health Board.

Going forward, the Health Board will be working with schools and Coleg Gwent to inspire the next generation of NHS staff.



Focus on: Spiritual and Pastoral Support 2022

The Health Board continued to provide 24-hour urgent pastoral care to our patients upon request. We adapted our approach to providing spiritual and pastoral support to any patients, visitors and staff of all beliefs during 2021. Examples of our work include:

- Supporting the last rites for patients, working with clinical teams and our pastoral support, including virtual services being provided.
- Held a vigil for Trans Day of Remembrance in the chapel at the Grange.
- Held Virtual Interfaith events, giving staff an opportunity to learn more about providing appropriate care to our patients of faith, especially in area such as births and death.
- Video messages and information were provided on social media and via the intranet in the EDI newsletter on different religious festivals.

Focus on... Equality Campaigns 2022-2023

- International Day Against Homophobia, Transphobia & Biphobia – training and support provided
- Welsh and Equality month – Looking at the connections and barriers faced in intersectional communities.
- Windrush Day, marking the anniversary of the arrival of the Windrush generation
- UK LGBTQ+ History Month
- UK Pride Month.
- South Asian Heritage Month
- UK Black History Month
- Mental Health Awareness Week
- International Women's Day
- International Men's Day
- International Non-Binary Day
- Sensory Loss Awareness Month
- World AIDs Day
- International Day of Persons with Disabilities & Disability History
- Human Rights Day
- Holocaust Memorial Day
- Hate Crime Week

NHS Wales Equality Week



GIG
CYMRU
NHS
WALES



ABB.EDI@wales.nhs.uk



Click or email
to book



Mon 16th 12-1pm

Leadership & NHS Wales Priorities

Join us to hear from
our speakers about the
Equality priorities in
Wales.

- Sue Tranka Chief Nursing Officer for Wales
- Richard Desir - Nursing Officer
- Welsh Government Equality Unit

Tues 17th 12-1.30pm

Healthcare for those seeking Sanctuary

We will be joined by Hassem Amiri - whose families story is told in the book *The Boy with Two Hearts*. As he shares his experience of what happened to his family when they reached the UK.

Learn more about the process in place to access healthcare and how we can provide inclusive support to those seeking sanctuary.

Wed 18th 12-1pm

Experiences of Working in the NHS with Sensory Loss

A session where we listen to the experiences of NHS staff with sensory loss share their experiences of working in the NHS.

Thur 19th

The Gay Dementia Venture

As this is also Dementia week we invite staff to join one of the forum theatre sessions available.

- 10.30-12pm
- 1-2.30pm

Join Sam, who is a carer for his husband Derrick, who has Dementia. He will share the highs and lows via a virtual play. Followed by a Q&A session with Sam.

Thurs 19th 12-1pm

Learning Disability and Neurodiversity What is the difference and why does it matter?

So you know the difference between a learning disability and neurodiversity?

This session will explain terminology and identify ways we can create a more inclusive workplace for our staff, patients and families.

Fri 20th 12-1.30pm

Identity, Othering and Belonging

We have all had to fill in a form, but what does it feel like if you can't see yourself in the categories on that form and you have to click 'other'.

This session will explore the use of statistics, types of other, psychological impact and the risks 'othering' brings in a healthcare setting.

9. Conclusion

Aneurin Bevan University Health Board remains committed to advancing equality, promoting human rights and reducing health inequalities. This annual report highlights our key achievements during 2021 – 2022 and 2022 - 2023 to ensure that our services reflect and respond to the needs of our people and that we comply with our statutory equality and socio-economic duties. This annual report aims to show how we continue to work to ensure that equality, diversity and inclusion are mainstreamed and fully embedded in the planning and delivery of our services both now and to meet the future needs of the population and our workforce across Gwent.

Covid-19 has been ever present in all our work across the Health Board in this reporting period, and awareness and understanding of health inequalities has been brought into sharper focus with the differential impact Covid-19 has had on the people we serve who share protected characteristics and those who experience socio-economic disadvantage. Our equality objectives have been further revised to reflect this developing evidence and we will continue to drive and monitor implementation during the final year of our Strategic Equality Plan.

During 2022-2023, we established and developed our Staff Networks, encouraging them to get involved with the Anti-racist and LGBTQ+ action plans as well as awareness raising activities, and this is something we intend to further support. This ongoing engagement is invaluable in helping us maintain an understanding of the barriers experienced by some groups and by working together to identify improvements. We know that the impact of the Covid-19 pandemic will continue to highlight and may exacerbate existing health inequalities. As such it is important as ever to plan and deliver our services from the founding principle of equality, human rights and inclusion.

Finally, we recognise that Aneurin Bevan University Health Board has faced significant challenges over the last two years, and this has delayed some areas of equality, diversity and inclusion work from progressing. As we look to develop and engage with our stakeholders for the development of the next four-year Strategic Equality Objectives (2024 to 2028) and plan, we would like to thank and note our appreciation for all our stakeholders, staff and partners who have continued to support and help the Health Board deliver the third year of its Strategic Equality Plan.

Appendix 1 – Annual Equality Monitoring Report

EMPLOYMENT INFORMATION 31 MARCH 2022

Introduction

The Equality Act 2010 legally protects people from discrimination in the workplace and in wider society. Aneurin Bevan University Health Board produces data yearly. The information provided relates to 31 March 2022 and includes:

Section 1: Gender – Staff in Post (SIP)

Section 2: Staff Group

Section 3: Age Profile

Section 4: Disability

Section 5: Ethnicity

Section 6: Marital Status

Section 7: Religion/Belief/Non-Belief

Section 8: Sexual Orientation

Section 9: Staff Group by Gender and Working Patterns

Section 10: Contract Type

Section 11: Full Time Average Pay by Gender and Staff Group

Section 12: Average Part Time Hourly Rate by Gender and Staff Group

Section 13: Agenda for Change Pay Grade Percentage Breakdown by Gender

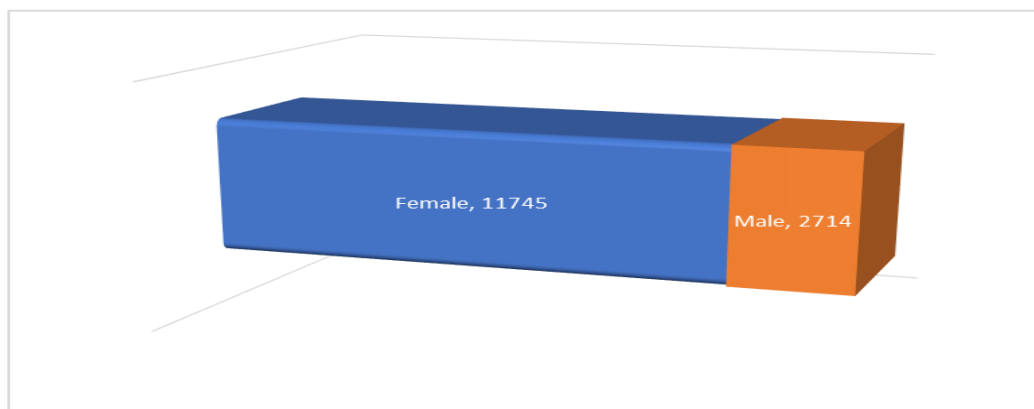
Section 14: Medical & Dental % Breakdown by Role

Section 15: Leavers Data

Overview

1. Gender - Staff in Post (SIP)

Our workforce is predominately female (over 80%), which is reflective of the majority of NHS Health Boards in Wales. Gender breakdown by headcount equates to Female – 11,745 and Male – 2,714, total headcount is 14,459.

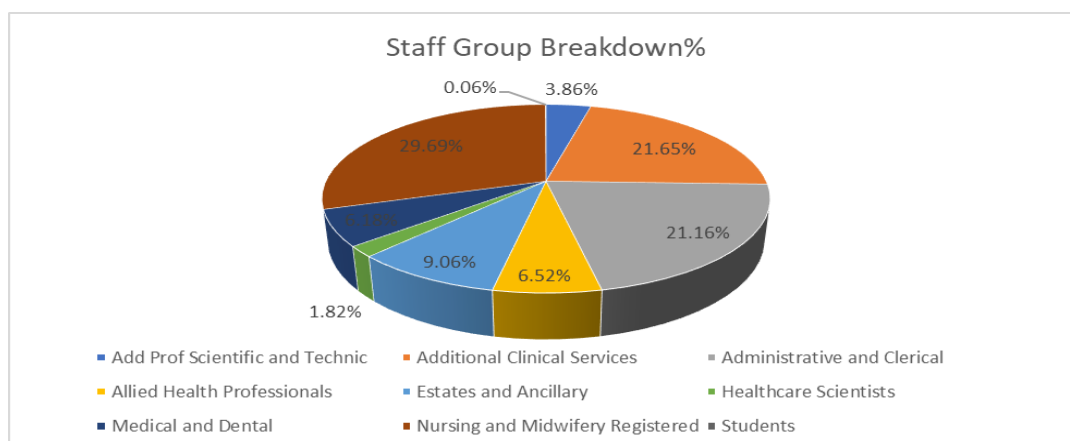


2. Staff Group

The largest staff group is Nursing & Midwifery, which amounts to just under 30% of our workforce.

Staff Group	Female	%	Male	%	Grand Total	%
Add Prof Scientific and Technic	417	2.88%	141	0.98%	558	3.86%
Additional Clinical Services	2728	18.86%	403	2.79%	3131	21.65%
Administrative and Clerical	2478	17.14%	580	4.01%	3060	21.16%
Allied Health Professionals	789	5.46%	154	1.06%	943	6.52%
Estates and Ancillary	816	5.64%	494	3.42%	1310	9.06%
Healthcare Scientists	183	1.27%	80	0.55%	263	1.82%
Medical and Dental	401	2.77%	493	3.41%	894	6.18%
Nursing and Midwifery Registered	3925	27.14%	369	2.55%	4294	29.69%
Students	8	0.06%		0.00%	8	0.06%

Total Staff in Post by Staff Group and Percentage Breakdown



3. Age Profile

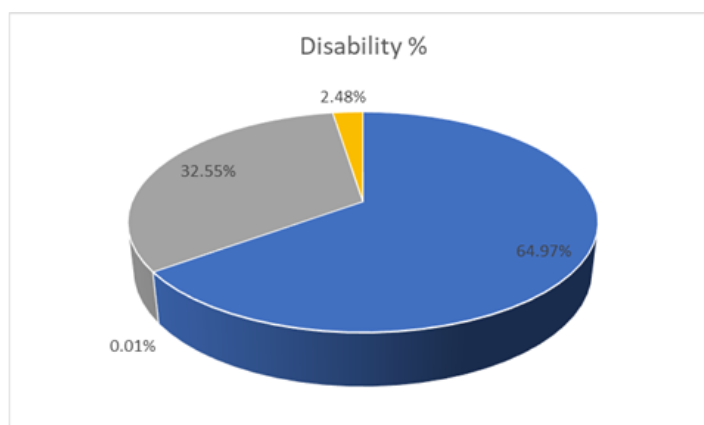
Over 30% (36.37%) of our workforce are aged over 50. Employees aged 71 and over has increased this year from 61 to 70 heads.

Age Band	Female	Male	Grand Total	%
<=20 Years	50	15	65	0.45%
21-25	708	142	850	5.88%
26-30	1174	297	1471	10.17%
31-35	1407	349	1756	12.14%
36-40	1391	366	1757	12.15%
41-45	1290	283	1573	10.88%
46-50	1400	329	1729	11.96%
51-55	1662	348	2011	13.91%
56-60	1625	317	1942	13.43%
61-65	827	200	1028	7.11%
66-70	154	55	209	1.45%
>=71 Years	57	13	70	0.48%
Grand Total	11745	2714	14459	100.00%

4. Disability

32.55% of data is Unspecified, so the full data is not available. The collection of disability data has improved by 18.45% from March 2018. In 2018 only 49% of staff had completed this information compared to 67.45% in March 2022.

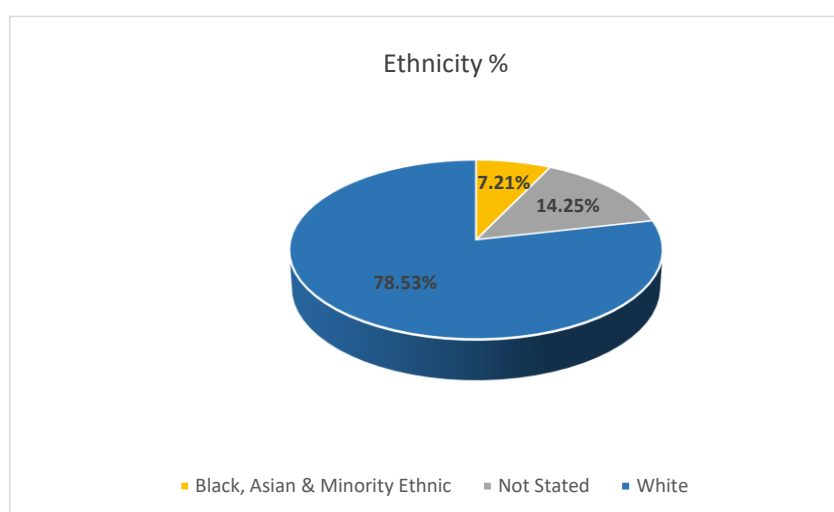
Disability	Grand Total	%
No	9395	64.97%
Prefer Not To Answer	1	0.01%
Unspecified	4705	32.55%
Yes	358	2.48%
Grand Total	14459	100.00%



5. Ethnicity

Over 78% of employees identified as White. Within our workforce database, we have 47 different Ethnic Origins identified which breakdown ethnicity further.

Ethnicity	FTE	PEOPLE	FTE	PEOPLE
Black, Asian & Minority Ethnic	951.53	1,043	7.75%	7.21%
Not Stated	1,611.95	2,061	13.13%	14.25%
White	9,711.90	11,355	79.12%	78.53%
Grand Total	12,275.38	14,459		



6. Marital Status

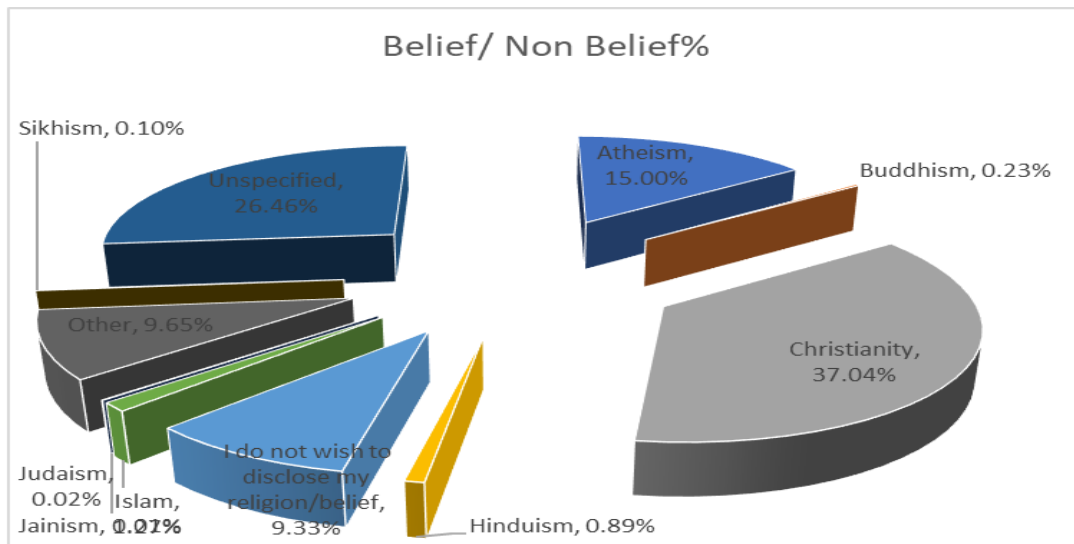
Less than 10% of marital status data has not been provided and over 52% of employees identify as civil partnership/ married.

Marital Status	Female	Male	Grand Total	%
Civil Partnership	200	41	241	1.67%
Divorced	779	76	855	5.91%
Legally Separated	95	14	109	0.75%
Married	6023	1265	7288	50.40%
Single	3586	859	4445	30.74%
Unknown	970	457	1429	9.88%
Widowed	92	2	94	0.65%
Grand Total	11745	2714	14459	100.00%

7. Religion/ Belief/ Non-Belief

9.33% of the workforce have expressed that they do not want to disclose their religion/ belief and another 26.46% are unspecified.

Religion, Belief, Non Belief	Female	Male	Grand Total	%
Atheism	1670	499	2169	15.00%
Buddhism	22	11	33	0.23%
Christianity	4526	831	5357	37.05%
Hinduism	71	57	128	0.89%
I do not wish to disclose my religion/belief	1059	288	1349	9.33%
Islam	110	73	183	1.27%
Jainism	2		2	0.01%
Judaism	1	2	3	0.02%
Other	1197	199	1396	9.65%
Sikhism	11	4	15	0.10%
Unspecified	3076	750	3826	26.46%
Grand Total	11745	2714	14459	100.00%



8. Sexual Orientation

Under 27% of the workforce have not disclosed their sexual orientation and 2.97% have identified they have declined to provide the information. Over 65% of the workforce have identified as heterosexual/ straight.

Sexual Orientation	Grand Total	%
Bisexual	116	0.80%
Gay or Lesbian	236	1.63%
Heterosexual or Straight	9814	67.87%
Not stated (person asked but declined to provide a response)	428	2.96%
Other sexual orientation not listed	10	0.07%
Undecided	9	0.06%
Unspecified	3846	26.60%
Grand Total	14459	100.00%

9. Staff Group by Gender and Working Patterns

Staff Group	Female					Male					Grand Total
	Full Time	%	Part Time	%	Total	Full Time	%	Part Time	%	Total	
Add Prof Scientific and Technic	208	49.88%	209	50.12%	417	111	78.72%	30	21.28%	141	558
Additional Clinical Services	1052	38.56%	1676	61.44%	2728	299	74.19%	104	25.81%	403	3131
Administrative and Clerical	1325	53.43%	1153	46.49%	2480	493	85.00%	87	15.00%	580	3060
Allied Health Professionals	428	54.25%	361	45.75%	789	139	90.26%	15	9.74%	154	943
Estates and Ancillary	76	9.31%	740	90.69%	816	300	60.73%	194	39.27%	494	1310
Healthcare Scientists	117	63.93%	66	36.07%	183	68	85.00%	12	15.00%	80	263
Medical and Dental	258	64.34%	143	35.66%	401	427	86.61%	66	13.39%	493	894
Nursing and Midwifery Registered	2182	55.59%	1743	44.41%	3925	284	76.96%	85	23.04%	369	4294
Students	7	87.50%	1	12.50%	8		0.00%		0.00%		8
Grand Total	5653	48.13%	6092	51.87%	11745	2121	78.15%	593	21.85%	2714	14459

10. Contract Type

Under 10% of the workforce are on Fixed Term contracts.

Gender	Fixed Term Temp	Permanent	Grand Total
Female	995	10750	11745
Male	374	2340	2714
Grand Total	1369	13088	14459

11. Full Time Average Pay by Gender and Staff Group

Staff Group	Female	Male	Grand Total
Add Prof Scientific and Technic	£40,977.55	£42,561.59	£41,528.74
Additional Clinical Services	£21,296.34	£21,463.84	£21,333.41
Administrative and Clerical	£30,037.28	£36,889.06	£31,893.29
Allied Health Professionals	£36,293.39	£37,082.56	£36,486.85
Estates and Ancillary	£21,015.68	£23,224.56	£22,778.08
Healthcare Scientists	£37,728.13	£38,639.01	£38,062.94
Medical and Dental	£80,499.76	£82,327.88	£81,641.00
Nursing and Midwifery Registered	£35,315.44	£35,457.68	£35,331.82
Students	£38,346.43		£38,346.43
Grand Total	£33,665.84	£42,103.54	£35,967.62

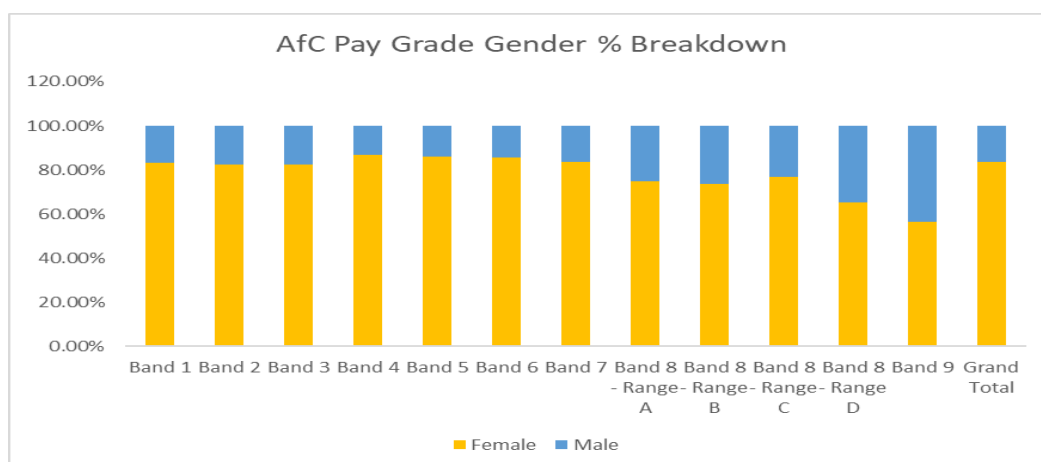
12. Average Part Time Hourly Rate by Gender and Staff Group

Part time contracted hours can vary between 1 and 37 hours, therefore, the average hourly rate has been calculated rather than average actual salary.

Staff Group	Female	Male	Grand Total
Add Prof Scientific and Technic	£25.49	£25.61	£25.50
Additional Clinical Services	£10.91	£11.00	£10.92
Administrative and Clerical	£12.37	£15.03	£12.56
Allied Health Professionals	£20.97	£20.17	£20.93
Estates and Ancillary	£10.16	£10.20	£10.17
Healthcare Scientists	£22.24	£20.05	£21.91
Medical and Dental	£46.75	£50.59	£47.97
Nursing and Midwifery Registered	£18.05	£18.55	£18.08
Students	£20.01		£20.01
Grand Total	£15.20	£17.97	£15.45

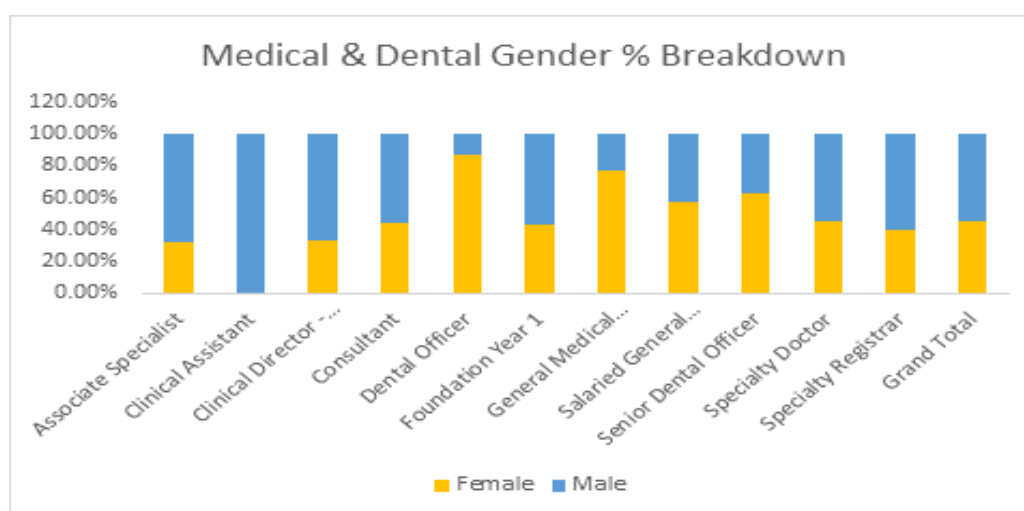
13. Agenda for Change Pay Grade % Breakdown by Gender

Pay Band	Female	Male
Band 1	83.33%	16.67%
Band 2	82.27%	17.73%
Band 3	82.58%	17.42%
Band 4	86.68%	13.32%
Band 5	86.18%	13.82%
Band 6	85.62%	14.38%
Band 7	83.44%	16.56%
Band 8a	74.94%	25.06%
Band 8b	73.50%	26.50%
Band 8c	76.80%	23.20%
Band 8d	65.31%	34.69%
Band 9	56.52%	43.48%
Grand Total	83.68%	16.32%



14. Medical & Dental Gender % Breakdown by Role

Role	Female	Male
Associate Specialist	31.82%	68.18%
Clinical Assistant	0.00%	100.00%
Clinical Director - Medical	33.33%	66.67%
Consultant	44.47%	55.53%
Dental Officer	87.50%	12.50%
Foundation Year 1	42.86%	57.14%
General Medical Practitioner	76.92%	23.08%
Salaried General Practitioner	57.14%	42.86%
Senior Dental Officer	62.50%	37.50%
Specialty Doctor	44.92%	55.08%
Specialty Registrar	39.80%	60.20%
Grand Total	44.85%	55.15%



15. Leavers Data

Half of all leavers are over 50 years of age.

Age Band	Female	Male	Grand Total	%
Under 20	20	5	25	1.70%
21-25	92	27	119	8.11%
26-30	130	39	169	11.51%
31-35	103	33	136	9.26%
36-40	91	24	115	7.83%
41-45	74	10	84	5.72%
46-50	66	20	86	5.86%
51-55	147	17	164	11.17%
56-60	234	30	264	17.98%
61-65	175	36	211	14.37%
66-70	69	13	82	5.59%
Over 71	13		13	0.89%

N.B. Due to the constant movement of junior doctors, Medical and Dental data is not included in this data.