Paper ref: TB (12/20) 014

Sandwell and West Birmingham Hospitals

NHS Trust

Report Title	Gender Equality/Equity – Balance at the Top		
	Women Empowering Women		
Sponsoring Executive	Dr David Carruthers		
Report Author	Dr Sarb Clare- Lead of Women Empowering Wo	omen	
Meeting	Public Trust Board Da	ate	3 rd December 2020

1. Suggested discussion points [two or three issues you consider the Committee should focus on]

- 1- There is overwhelming evidence that Gender Balance and Diversity at the top of NHS organisations equates to **high quality safe robust care for patients**. Despite this with 77% of NHS workforce being female only 37% are within senior leadership roles nationally. Women need to be involved in strategic design, leading and delivery and to provide challenge, different perspective as well as ensuring female voices are heard.
- 2- The **NHS federation Heath and Care Women Leaders Network** aims to get equity of gender 50:50 within NHS Boards by 2020. There is significant work to do nationally. There are 16 recommendations.
- 3- There is **significant gender and ethnicity pay gap** which needs be addressed. One reason is the lack of women within senior leadership roles, applying to CEA and surgical specialities just to name a few.

2. Alignment to 2020 Visi	on	[indicate with an 'X' which Plan this pa	per	supports]	
Safety Plan	х	Public Health Plan		People Plan & Education Plan	x
Quality Plan	х	Research and Development		Estates Plan	
Financial Plan	x	Digital Plan		Other [specify in the paper]	

3. Previous consideration [where has this paper been previously discussed?]

4. Recommendation(s)

The Board is asked to:

- a. Consider the 16 recommendations made by the paper NHS Federation Health and Care Women Leaders network 50:50 within NHS Boards by 2020
- **b.** Look at solutions including role modelling, lift as you climb, mentoring, challenge of leadership stereotypes, male allies and advocate new leadership styles
- c. Create a clear open and safe culture and signposting for women and men to raise issues of sexism and inappropriate behaviour in the workplace as well as strategies in challenge as feedback implies a sense of fear to raise concern.

5. Impact [indicate with an 'X' which governance initiatives this matter relates to and where shown elaborate]						
Trust Risk Register						
Board Assurance Framework						
Equality Impact Assessment	ls	this required?	Υ		Ν	If 'Y' date completed
Quality Impact Assessment	ls	this required?	Υ		Ν	If 'Y' date completed

SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST

Report to the: Public Trust Board 2020

Gender equality/equity – Balance at the top Women Empowering Women

1. Introduction

- 1.1 The NHS has 77% female workforce but only in 37% are in leadership positions. There is clear evidence that balance at the top leads to high functioning organisations and high-quality safe care for patients. Non-white and those from nonprivileged backgrounds need representation.
- 1.2 The <u>issue</u> is women do not want to take on such roles due to lack of role models, challenging job plans that do not fit work/life balance as well as perceived lack of opportunities, unconscious bias and sexism just to name a few.
- 1.3 The solutions are proactive talent search, tailer made job plans, change in mindset, role modelling "you can be what you see", mentoring, male allies, lift as you climb and an open culture of raising concern.

2. What has been done so far? and ongoing plans

2.1 <u>Women Empowering Women National Conference</u> (Annex A) May 2019 was delivered which addressed the following issues from training, career progression, having children, sexism and inappropriate behaviour to work/life balance and well-being. 110 delegates attended and 3 babies.

Feedback – Highlights only (Annex B)

- 25% of respondents have felt discouraged to apply for an opportunity because of their gender
- 56% think their specialty does not have a significant representation of women in leadership roles
- 58% feel they are not achieving an adequate work life balance
- 70% feel they are underperforming in aspects of life
- Common themes social life, family life, finding a partner, personal health, exams, career progression, self-care
- 47% reported sexism and inappropriate behaviour in the workplace from colleagues and 73% reported abuse form patients. 67% do not want to speak up due to career progression, upset, not being believed to the process being too traumatic.

2.2 Actions led by Dr Clare

- <u>Women's Clinician Network</u> has been set up. A private email that doctors can access to contact with regards to mentoring, career advice to talk in confidence. A network has been created.
- <u>CEA Applications Workshop</u> for Female Consultants Nov 2019- (Annex C) Women do not apply to CEA although having the same chance of being successful as their male colleagues. A 2-hour workshop was delivered to inform and persuade female Consultants to apply. There was an improvement in female applications from 25.9% to 36.4% and Less than full time from 3.7% to 4.5% of eligible Consultants applying to the scheme after this workshop. Successful women in CEA applications presented at the event.

• FEARLESS – February 2020 Workshop (Annex D)

This 4-hour workshop was focused defining sexism, inappropriate behaviour, how to challenge and how to escalate formally and informally. 50 delegates. Feedback was more sessions were desperately needed as this was a common daily occurrence and need for learning strategies to cope and escalate such behaviours.

Empowerment Awards July 2020

13 Empowerment Awards were given to staff ranging from nursing, medical, management and administration to individuals within the organisation from the Women Clinicians Network who define empowerment. The men were regarded as **male allies**. The following were the recipients-

- Keeley Hopcraft- AMU ward Manager
- Scott Shenton- FIT tester
- Dr Saikat Dhar- Neurology SpR
- Craig Simpson General Manager Admitted Care
- Dr Asif Naveed- ED Consultant
- Becky O'Dwyer- ITU Clinical Lead
- Dr Mike Blaber- Junior Doctor Well-being lead
- Karen Parry- Postgraduate Dept Manager
- Dr Jen Hancox- CMT
- Stephanie Coates Matron
- Mr Edward Harper- General Surgeon
- Dr Edwards Fogden= Consultant Gastroenterologist
- Dr Vaish Kumar- Chief Registrar
- Menopause like Madonna 8th July 2020 postponed due to Covid 19 to 2021 NHS female workers have admitted they have had to retire early due to peri/menopause symptoms and struggling to work and not receiving support from employers. It is a condition that is not talked about and a taboo. In view of this a conference has been arranged to improve knowledge, be aware of treatments and share strategies om how to deal with symptoms in particular focusing on the workplace.

2.3 This work has been presented nationally and published. Other initiatives by Dr Clare include a **Tedx talk** On "Women Empowering Women" launch 28th November, **podcast** launching 2021 and **website** <u>www.womenempoweringwomen/org.uk</u> to signpost women for advice, mentors and help with both professional and personal advice.

3. Summary / Conclusions

- 3.1 Women are the largest proportion of the NHS workforce and bring different leadership traits in comparison to male colleagues these include collaboration, strong insight and self-awareness to compassion and vulnerability which are essential for a caring organisation. They are essential to influence, design and voice strategy within the NHS. Gender and diversity balance within the top of the organisation is a mandate.
- 3.2 Women need support, encouragement and pro active measures to entice them into leadership roles. This would include strategies including authentic role modelling, mindset change, male allies and lift as you climb just to name a few.
- 3.3 The organisation needs to have heightened awareness of unconscious bias within the system, culture and people. Clear pathways/strategies where men and women can raise concern about unprofessional behaviour in the workplace must be communicated and promoted for an open culture. Awareness that those from ethnic minority and non-privileged backgrounds face much more challenge and struggle.
- 3.4 Dr Clare has led several local and national initiatives to address the above and SWBH is ahead of the curve and an exemplar for many Trusts; more work needs to be done.

4. Recommendations

- 4.1 The CLE/Board is asked to:
 - a. Provide a strategy to address the gender and diversity gap and review the recommendations outlined by the NHS Federation.
 - b. Provide a proactive strategy to develop and encourage upcoming talent to take on opportunities within leadership roles. This would include non-traditional job plans and focus on ethnic minority and those from non-privileged backgrounds.
 - c. Promote pathways for escalation for inappropriate behaviours and sexism in the workplace. Ensure voices are heard and no SEXISM culture promoted.

Annex A: Women Empowering Women Conference May 2019 Annex B: Poster of feedback from Women Embowering Women Conference 2019 presented at Faculty Of Medical Leadership and Management and Society Acute Medicine Conference Annex B: CEA Breakdown Data Annex C: Fearless Workshop Feb 2020

Dr Sarb Clare MBE Deputy Medical Director Consultant Acute Medicine SWBH NHS Trust

References

- 1. NHS digital. Narrowing of NHS gender divide but men still the majority in senior roles. 8 March 2018. <u>www. digital.nhs.uk/news-and-events/latest-news/narrowing-of-nhs-gender-divide-but-men-still-the-majority-in-senior-roles</u> [accessed 9 September 2019].
- 2. Action For Equality The Time is Now. 50:50 Women On Boards 2020. Health and Care Women's Network. https://www.nhsconfed.org/resources/2020/09/action-for-equality-the-time-is-now
- 3. Royal College of Surgeons. Statistics Women in Surgery. <u>www.rcseng.ac.uk/careers-in-surgery/women-in-surgery/statistics/</u> [accessed 9 September 2019].
- 4. Rimmer A. Five facts on women in NHS leadership roles. BMJ. 2017 Apr 5;357:j1701.
- 5. Gipson AN, Pfaff DL, Mendelsohn DB, Catenacci LT, Burke WW. Women and leadership: Selection, development, leadership style, and performance. The Journal of Applied Behavioral Science. 2017 Mar;53(1):32-65.

WEST MIDLANDS	WOME EMPOV WOME	VERING
	owerment and inspir female physicians.	ation
@acuteme	edswbh @s	cfaloon
22VIL	DMAY 2	010
ZZINL		019
Conference for CMTs,	AL - POSTGRADUATE SpRs and Consultants. RCP CPD event please email irenebay	points applied.
REGISTRATION		08:30 - 09:00
MORNING SESSION CH THE IMPOSSIBLE IS NOT		09:00 - 09:10 DR S CLARE
THE JOURNEY AND FUT	JRE OF FEMALE PHYSICIANS	09:10-09:40 DR EVAUX
THIS GIRL CAN! SISTERH		09:45 - 10:15 DR M PATEL 10:15 - 10:20 MR TOBY LEWIS
BREAK		10:20-10:35
MORNING WORKSHOP		
10:35 - 11:35	Management & Leadership	Becoming a Med SpR
11:35 - 12:30	Teaching & Education	Research & Academia
LUNCH AND NETWORK	ING	12:30 - 13:30
AFTERNOON SESSION	CHAIR: DR S CLARE	
	GY OF GENDER IN THE WORKPLACE	13:30 - 14:30 DR H BOWDEN-JONES OBE
Q & A PANEL	OOBS	14:30-15:00 15:00-15:40 JOHN MCNALLY
DON'T SPEAK TO MY BO		
DON'T SPEAK TO MY BC	OPS	
AFTERNOON WORKSH		Being the Medical
	OPS Babies and all that LTFT training and work life balance	Being the Medical Consultant Self-Care



WOMEN EMPOWERING WOMEN

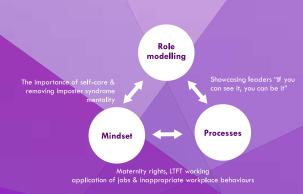
Sandwell and West Birmingham NHS Trust

S. FALOON, M. YAN, S. CLARE

BACKGROUND

77% of NHS workers are female yet only 37% are in senior positions.¹ Wa have represented the majority of medical school cohorts for over a decade however only comprise 36% of consultants, 13% of surgeons and 25% of medical directors.¹⁻³

onal free conference to enable,





METHODS

The conference involved talks from women in leadership roles, including the President of the Medical Women's Federation, and workshops such as Resea & Academia, Management & Leadership and Teaching & Education. Further workshops focused on maternity issues, LTFT working and self-care.

SURVEY

We conducted an anonymous survey of the delegates to assess how about key issues such as:



harassment in the workplace

Total of 53 respondents

70% feel they are underperforming in aspects of life 58% feel they are not achieving adequate work life balance 56% felt their specialty does not have significant representation of women in

25% felt discouraged to apply for an opportunity because of their gender

73% have experienced inappropriate sexual comments or behaviour from a

47% have experienced inappropriate sexual comments or behaviour from a colleague or senior staff member



26% did not escalate for a combination of reasons including fear of repercussions for their career, trauma or unclear/difficult escalation procedures 7% escalated but did not receive adequate support

CONCLUSIONS

If we are to tackle issues, such as lack of women in senior leadership positions and sexual harassment in the workplace, then such innovative days must be an embedded feature within each organisation.

Many initiatives are being generated at our trust including the establishment of a Women's Clinician Network. This network aims to:

- Promote leadership & develop a mentoring scheme
- Provide confidential support to women
- Provide education on inappropriate workplace behaviours & escalation procedures.

ceterences: L. NHS diaital. Narro

arrowing of NHS gender divide but men still the majority in senior roles. 8 March 2018. www. digital. events/latest-news/narrowing-of-nhs-gender-divide-but-men-still-the-majority-in-senior-roles [accessed 9

3 Rim

CEA

2018

	Eligible Consultants(240)	Applicants (54)	Successful applicants (44)	Unsuccessful applicants (10)
Academics	2 (0.8%)	1 (1.85%)	1 (2.27%)	0
Female consultants	81 (33.75 %)	14 (25.9%)	12 (27.27%)	2
Consultant from ethnic minorities	152 (63%)	43 (79.6%)	33 (75%)	10
Part time consultants	40 (16.6%)	2 (3.7%)	2 (4.54%)	0
30-39 years old	11 (4.58%)	1 (1.85%)	1 (2.27%)	0
40-49 years old	117 (48.75%)	36 (66.66%)	30 (68.18%)	6
50-59 years old	84 (35%)	14 (25.92%)	11 (25%)	3
60+ years old	28 (11.66%)	3 (5.55%)	2 (4.54%)	1

2019

	Eligible Consultants(235)	Applicants (22)	Successful applicants (19)	Unsuccessful applicants (3)
Academics	7(2.97%)	0 (0%)	0 (0%)	0
Female consultants	79 (33.61%)	8 (36.36%)	7 (36.84%)	1
Consultant from ethnic minorities	153 (65.10%)	17 (77.27%)	14 (73.68%)	3
Part time consultants	53 (22.55%)	1 (4.54%)	1 (5.26%)	0
30-39 years old	19 (8.08%)	2 (9.09%)	2 (10.52%)	0
40-49 years old	101 (42.97%)	14 (63.63%)	11 (57.89%)	3
50-59 years old	84 (35.74%)	4 (18.18%)	4 (21.05%)	0
60+ years old	31 (13.19%)	2 (9.09%)	2 (10.52%)	0



3rd Event by SWBH Women's Clinician Network | Regional Event

FEARLESS

Strategies for response, courage and reflection for female clinicians.

5TH FEBRUARY 2020 | SANDWELL EDUCATION CENTRE

3 RCP CPD points approved

SPEAKERS

Chair-Dr Sarb Clare

Dr Sarb Clare Welcome -Women's Clinician Network

"She believed she could, so she did!"

13:00-13:10

15:00-15:15 BREAK

Dr Mark Anderson We will and can make change together! Raffaela Goodby Organisational well-being for our female doctors

Dr Sarah Faloon

What is the issue we

Feedback from "Women

Empowering Women"

need to solve?

13:10-13:40

"We care for our doctors caring for patients"

15:15-15:35

15:35-16:05

16:30 FEEDBACK AND CLOSE

SWBH.ACUTEMEDICALSECRETARIESAMU1@NHS.NET

FACULTY

- DR SARB CLARE- LEAD OF SWBH WOMEN'S CLINICIAN NETWORK,
- DEPUTY MEDICAL DIRECTOR, ACUTE MEDICAL CONSULTANT - DR Sarah Faldon- Core medical trainee west midlands deanery
- RICHARD EURNELL- DRBANISATIONAL DEVELOFMENT SPECIALIST TRAINER
- DR WARK ANDEFSON-SWBH RESPONSIBLE OFFICEF. DEPUTY MEDICAL DIRECTOR. CONSULTANT EASTRDENTEROLOGIST
- Report Subscripting Castrockier Scholst
 Report Subscripting Condry-Subscripting Conditions
 Report Subscripting Condition Statement

Richard Burnell Strategies for response

"Kind Heart, Fierce Mind, Brave Spirit"

13:40-15:00

ALL Q & A Panel

16:10-16:30

@acutemedswbh

REGISTER VIA EMAIL

@scfaloon