## Athena SWAN Bronze Department Award Application

Name of University: Sheffield Hallam University
Department: Nursing \& Midwifery
Date of application: 4 December 2015
Date of University Bronze Athena SWAN award: August 2010 (renewed March 2013)
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## Table of Contents

1. Letter of Endorsement from the Head of Department. ..... 3
2. The Self-Assessment Process ..... 5
3. A Picture of the Department: ..... 9
4. Supporting and Advancing Women's Careers: ..... 21
5. Any other comments: ..... 38
6. Action plan ..... 40
Appendix 1: List of Abbreviations Used. ..... 48
List of Tables
Table 1: Department of Nursing \& Midwifery SAT Team. ..... 6
Table 2: Inspirational Teacher Nominations by Gender 2013/14 ..... 10
Table 3: Nursing \& Midwifery - Enrolments - Overview ..... 11
Table 4: All first degree enrolments by mode of study with sector comparison ..... 12
Table 5: Three-Year Pre-Reg Nursing (ADNS) - Enrolments - Overview ..... 13
Table 6: Three-Year - RTP Enrolments - Overview ..... 14
Table 7: All PGT enrolments by mode with sector comparison ..... 14
Table 8: Ratio of course applications to offers and acceptances by gender - UGT/PGT ..... 16
Table 9: Degree classification by gender ..... 17
Table 10: Male:Female Ratio of Academic Staff by Full Time and Part Time ..... 19
Table 11: Turnover by Level and Gender ..... 20
Table 12: Applications/Success rates by Grade/Gender ..... 22
List of Figures
Figure 1: Male:Female First Degree Mental Health Enrolments ..... 12
Figure 2: PGT enrolments all modes MH ..... 15
Figure 3: Academic staff by gender SHU N\&M and HESA ..... 18
Figure 4: Academic staff by grade and gender ..... 18
Figure 5: Percentage of Job Applications and Success Rates across N\&M Department ..... 21
Figure 6: Recruitment panel by gender and level of vacancy - N\&M ..... 24
Figure 7: \% Gender Representation on Decision Making Committees ..... 30

## 1. Letter of Endorsement from the Head of Department

## Sheffield Hallam University

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Date: $3^{\text {rd }}$ November 2015

To whom it may concern,
As Head of Department for Nursing and Midwifery at Sheffield Hallam University I am delighted to endorse this application for the Athena SWAN Bronze award for the department. This application is the culmination of dedicated work which has taken place over the past 18 months and has had significant contributions from all of the department staff who include academic, technical and administrators.

Being a member of the self-assessment team I have been keen to be closely involved with the developments and progression of this application and whilst we have identified areas which we will be committed to improving and have indicated in our action plan, I have been impressed by some of our practices particularly in supporting staff to take career breaks and propose part-time or flexible working arrangements to meet their competing demands to gain a satisfactory work-life balance.

This application provides a clear 'roadmap' for where we have come from and provides guidance and actions that are needed for us to achieve in order to progress our application to a future silver award submission.

Our biggest challenge during this self-assessment process has been identifying the data sources. Much of the work of the team has been to locate and cleanse the data to ensure that this is specific to the department. We have tested these findings in our focus groups to ensure their accuracy and we feel content that we have now developed some good sources and processes for maintenance of data as we move forward. Maintaining this momentum throughout this next period will be a key focus for the Athena SWAN SAT team with dissemination and awareness raising targeted to much of our department activity.

We have had a period of a very stable workforce during the past 8-10 years and whilst this brings with it a consistency of practice and a supportive environment to both work and study in, as seen by our nominations for inspirational teacher award, it has resulted in our staff demographic being concentrated in the 45 years and over group resulting in some focused
work being needed on our people strategy over the next 3-5 years. People who come into nurse and midwifery education do so as a second career, having first worked within clinical practice. This often means that whilst practice experience is critical for informing teaching, it results in a more mature in age workforce. Within our departmental strategy, ongoing work to ensure that practitioners and recent alumni now in practice can experience working in education is developing at a pace, with secondee opportunities and visiting lecturer's sessions being heavily promoted. Feedback from students and staff has been very positive as these seconded lecturers bring with them a contemporariness and authenticity to our curriculum as they straddle both education and practice. This has resulted in a number of alumni making the permanent move into education and fostering the next generation of nurse and midwifery educators.

Our gender profile is also very reflective of the sector and is predominantly female. Whilst we have acknowledged this, the team are keen to ensure that processes in place are applicable to both genders as within Nursing and Midwifery males are an under-represented group. The work here that we have identified will extend into schools and colleges promoting health care practice and nursing and midwifery particularly as professions for both genders.

The very positive aspect of this application has been the chance to reflect on the very dedicated team of teachers that we have across the department and their commitment to providing an excellent learning experience for the students. This is not only reflected in our good degrees, excellent retention data and strong recruitment but also in our working with our partners externally predominantly across the NHS where students take up their first point of employment. The wealth of experience of nurses and midwifes who remain in the South Yorkshire region providing high quality care to the local population is testament to the dedication and commitment that all of the academic, technical and administrative staff have to the student learning. I believe this is a very positive position to begin our Athena SWAN journey and I am committed to ensure that we increase our opportunities for all issues relating to gender and equality in order for those who wish to access the profession are enabled to do so.

Yours sincerely


Toni Schwarz
Head of Department for Nursing and Midwifery Faculty of Health and Wellbeing

## 2. The Self-Assessment Process

a) A description of the self-assessment team: members' roles (both within the Department and as part of the team) and their experiences of work-life balance

The Athena SWAN (AS) initiative was presented to staff at the bi-monthly Department meeting and staff were invited to submit an expression of interest to join the SelfAssessment Team (SAT). An email was sent Department wide to ensure those who did not attend were aware of the opportunity. The inaugural meeting of the Department of Nursing and Midwifery (N\&M) SAT was held in September 2014.

Membership of the SAT represents the diversity of nursing fields, demographic and responsibilities within the Department (Table 1). The full time/part time ratio of the SAT was 17:2 with a gender split of 6 males: 13 females. Members of the SAT had a variety of work/life experiences. For example, one member is being supported to be able to act as carer for adult son with severe and complex learning difficulties. Another SAT member with a long-term spinal condition has benefited from local flexible hours to accommodate return to work on 3 occasions. SAT members were given protected time within their Academic Work Plan (AWP) to work on the submission. However, in practice, there were times where some found it challenging to fully contribute during peak teaching times (Action 1.1a).
b) An account of the self-assessment process: details of the self-assessment team meetings, including any consultation with staff or individuals outside of the university, and how these have fed into the submission.

SAT meetings are scheduled bi-monthly taking into account members working patterns. A Department SharePoint site was established to enable SAT members to store and access data. SAT members also have access to the Sheffield Hallam University (SHU) AS SharePoint site and the University has an open AS site on the intranet for all Departmental Champions and SAT groups.

The N\&M AS Champion attends the SHU Champions meetings to exchange ideas and information as well as hearing from specialists such as the student management information manager. Support has been provided by the Central SHU SAT, for example acting as critical friends for Departmental applications. The SAT liaised with Human Resources (HR), and Strategic Planning and Intelligence to obtain staff and student data respectively. However, a significant issue was the limited gender monitoring processes both at Department and central university levels (Actions 1.2 and 1.2a).

Table 1: Department of Nursing \& Midwifery SAT Team

| Name | Role | SAT Role |
| :--- | :--- | :--- |
| Toni Schwarz | Head of Department, <br> Nursing and Midwifery | Leadership Support |
| Cath Burke | Senior Lecturer, Midwifery <br> Supervisor of Midwives | Athena SWAN Champion <br> Staff data |
| Andy Finch | Senior Lecturer, Adult Nursing. <br> Member of the Nursing Admissions Team. | Representation on Groups and <br> Committees. |
| Tracey Briggs | Senior Lecturer, Adult Nursing | Flexible working |
| Sarah Burns | Lecturer, Learning Disability Nursing and <br> Social Work. | Organisation and culture |
| Roger Makin | Senior Lecturer, Children's Nursing | Career development |
| Clare de Normanville | Principal Lecturer: UK Business <br> Development Lead | DMG Liaison <br> Staff Data |
| Janine Timms | Technical Team Leader in Health | Faculty Professional Services <br> Representative |
| Chit Stuart | Senior Lecturer, Midwifery | Student data |
| Marion Rice | Senior Lecturer, Mental Health | Flexible working |
| Jill Collins | Project Manager, Women in SET Team | Central SAT representatives and |
| Trish Elwis | Diversity Support Officer, Equality and <br> Civersity team | Criend |
| Rhodri Rowlands | Business Intelligence Analyst |  |
| Keir Blockley | People MI Data Specialist | Staff \& Student data |
| Samanty Undergraduate Recruitment Lead |  |  |

The Nursing and Midwifery Athena SWAN Self-Assessment Team


L-R: Clare de Normanville, Janine Timms, Tracey Briggs, Sarah Burns, Cath Burke, Dr Toni Schwarz


Roger Makin.


Andy Finch

N\&M Department staff have been consulted in a number of ways to get a view of their perceptions including:

- The National ASSET survey completed by $72 \%$ of staff ( 28 male and 68 female) ;
- regular updates/information exchanges at Department meetings; and
- a focus group that included male and female staff from other STEMM Departments in the Faculty of Health and Wellbeing. This multi-departmental approach was adopted to allow a synergistic identification of cross-departmental AS issues.

In addition, Department data from the SHU Employee Opinion Survey (EOS) conducted in 2014 was cross-referenced with the ASSET data to triangulate findings. From this, the SAT developed an action plan intended to address the issues identified.
c) Plans for the future of the self-assessment team, such as how often the team will continue to meet, any reporting mechanisms and in particular how the self-assessment team intends to monitor implementation of the action plan.

The SAT will continue to meet bi-monthly, reporting to the Head of Department (HoD) and the Central SAT. In terms of implementation, the SAT will prioritise action points and members take a lead for each point, dependent upon their input into the application and expertise. These leads, supported by identified members of the Departmental Management Group (DMG) will co-opt support as required and facilitate working groups to implement and evaluate changes. Outcomes of the SAT work and AS activities will be disseminated across the Department using agreed communication structures (Actions 1.3, 1.3a, and 1.3b), and reported into the Central SAT and Equality \& Diversity (E\&D) Board. All Departmentwide decision-making groups and committees will have AS as a standard agenda item to ensure two-way feedback and feed forward of issues and information (Action 1.3c). Additionally, AS Department information will be made available on the SHU external website (Actions 1.3d, 1.3e and 1.3f).

## 3. A Picture of the Department:

a) Provide a pen-picture of the Department to set the context for the application, outlining in particular any significant and relevant features.
Sheffield Hallam University ${ }^{1}$ is the third largest university in the UK and Nursing and Midwifery has been established here for 30 years and is now situated within the Faculty of Health and Wellbeing. The Department is one of the largest healthcare education providers in England with a total population of approximately 3000 students, both full time (FT) and part time (PT), undertaking undergraduate (UG) and postgraduate (PG) courses. It was ranked by the 2016 Guardian University League Table at 13th out of 70 Higher Education Institutions (HEls) offering N\&M courses, and the 2016 Complete University Guide ranked the Department 44th from 72 other providers.

The Department offers courses in a wide range of nursing fields including adult, child, mental health and midwifery. The Department also delivers specialist teaching in areas such as Health Visiting, District Nursing, acute and critical care, as well as palliative care. This range of courses with the large student population makes for a complex portfolio of provision.

The Department is commissioned to provide UG and PG education by Health Education England (HEE) via HE North and HE Midlands Local Education and Training Boards (LETB). Students are recruited onto courses from a wide geographical area, including a small but growing population of international students; the latter being recruited mainly to the Department's PG portfolio.

All nursing UG programmes are subject to Professional Statutory and Regulatory Bodies, including the Nursing and Midwifery Council (NMC), Health and Care Professions Council and General Pharmaceutical Council. Education activity within the Department is focused on research led teaching. Staff engage in research activity with colleagues based in the Centre for Health and Social Care Research (CHSCR) that informs teaching practice. Moreover inter-professional learning is a fundamental tenet of the Departments learning philosophy and UG nursing students undertake inter-professional modules each year. These modules enable students to work with students from other health disciplines whilst interacting with practice based situations to gain understanding of the service user's perspective. This ensures our students gain collaborative skills and improves their employability.

All Department staff are eligible to be nominated by students for the SHU Inspirational Teacher annual awards. The awards panel are blinded as to gender and grade. During the assessment period, there was 1 male award winner in 2011/12 and 1 female winner in 2012/13. Central data on gender split for nominations and awards is only available from 2013/14 (Table 2).

[^0]Table 2: Inspirational Teacher Nominations by Gender 2013/14

| 2013/14 |  | Male | Female | \% Male | \% Female |
| :--- | :---: | :---: | :---: | :---: | :---: |
| Nominations | 67 | 11 | 59 | $16 \%$ | $84 \%$ |
| Faculty <br> Nomination | 2 | 1 | 1 | $50 \%$ | $50 \%$ |

The Department currently consists of 127 academic staff working to a whole time equivalent (WTE) of 111, 94 FT and 33 PT staff. In 2006, following the transfer of the UG N\&M provision to SHU from The University of Sheffield, a significant number of staff were transferred over under locally agreed TUPE arrangements.

Staff have been recruited from a wide range of clinical backgrounds and expertise that enriches the student learning experience and forges strong partnerships with placement partners. The Department is made up of predominantly Senior Lecturers (SL) with one FT female working at Senior Staff Grade (SSG) and the remainder Associate Lecturers, Lecturers and Principal Lecturers (PL).

The Department has excellent staff retention; only 19 teaching staff left SHU (8 male and 11 female) during September 2011 - August 2014. These were for a variety of reasons including retirement, promotion and returning to clinical practice. Four male and 15 female members of staff were recruited at an equivalent WTE as replacements. $71 \%$ of staff have been in the Department for 4 years or more, with the majority of these joining or pre-dating the transfer of staff from the University of Sheffield. This has resulted in the age profile of the Department being heavily skewed towards 45 years and over ( $84 \%$ ).

Whilst the Department benefits from this experience and expertise, it does require succession planning to be managed (Action 2.1) as a sizeable group of staff may potentially leave/retire in a short time period (Actions 2.1a and 2.1b). As part of this process a number of joint posts (4 female) have been established with clinical practice, as have secondments from clinical practice ( 1 male:3 female) providing clinicians with opportunities to engage in HEI learning and research activities (Actions 2.1c and 2.1d). During the assessment period SHU initially adopted a "grow your own" scheme that encouraged alumni to return to teach sessions with support from current academic staff. As a result, one person (female) joined SHU on a secondment and subsequently secured a FT Lecturer post. This practice is now embedded within normal working procedures (Action 2.1e).

A new HoD was appointed during 2013/14, who initiated a staff consultation regarding Departmental structure. This resulted in the formation of professionally aligned teams reflecting the policy drivers and practice imperatives that will provide a firm foundation for the implementation of the AS action plan.
b) Provide data for the past three years (where possible with clearly labelled graphical illustrations) on the following with commentary on their significance and how they have affected action planning.

## Student data

i) Numbers of males and females on access or foundation courses - comment on the data and describe any initiatives taken to attract women to the courses.

The Department does not provide access or foundation courses.
ii) Undergraduate male and female numbers - full and part-time - comment on the male: female ratio compared with the national picture for the discipline. Describe any initiatives taken to address any imbalance and the impact to date. Comment upon any plans for the future.

Table 3: Nursing \& Midwifery - Enrolments - Overview ${ }^{2}$

| Level of study | 2011/2 |  |  | 2012/3 |  |  | 2013/4 |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | M | F | Total | M | F | Total | M | F | Total |
| First <br> Degree ${ }^{1}$ | 78 | 1,054 | 1,132 | 78 | 1,127 | 1,205 | 98 | 1,293 | 1,391 |
| Other $\mathbf{U G}^{2}$ | 223 | 1,725 | 1,948 | 167 | 1,431 | 1,598 | 139 | 1,139 | 1,278 |

## ${ }^{1}$ First Degree courses:

- Three year FT pre-registration N\&M courses, leading to both an academic award at Bachelors level from the university and professional registration with the NMC.
- One year FT post registration courses for Community Nursing and Specialist Community Public Health Nursing for Health Visiting and School Nurses.
- Three year PT Post Registration Health and Social Care Practice course
- One year PT Post Registration Top-up Degree for nurses and midwives with a diploma.


## ${ }^{2}$ Other UG provision:

- Three year pre-registration Advanced Diploma in Nursing Studies (ADNS)
- Level 6 credit bearing modules for mentor preparation; non-medical prescribing and return to practice.

[^1]
## First Degrees

Table 4: All first degree enrolments by mode of study with sector comparison

| Mode | Year | SHU Count |  |  | SHU \% |  | Sector \% |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | $\mathbf{M}$ | $\mathbf{F}$ | Total | $\mathbf{M}$ | $\mathbf{F}$ | $\mathbf{M}$ | $\mathbf{F}$ |
| All | $2011 / 2$ | 78 | 1,054 | 1,132 | $7 \%$ | $93 \%$ | $10 \%$ | $90 \%$ |
|  | $2012 / 3$ | 78 | 1,127 | 1,205 | $6 \%$ | $94 \%$ | $9 \%$ | $91 \%$ |
|  | $2013 / 4$ | 98 | 1,293 | 1,391 | $7 \%$ | $93 \%$ | $9 \%$ | $91 \%$ |
|  | $2011 / 2$ | 60 | 753 | 813 | $7 \%$ | $93 \%$ | $9 \%$ | $91 \%$ |
|  | $2012 / 3$ | 65 | 946 | 1,011 | $6 \%$ | $94 \%$ | $9 \%$ | $91 \%$ |
|  | $2013 / 4$ | 90 | 1,154 | 1,244 | $7 \%$ | $93 \%$ | $9 \%$ | $91 \%$ |
| PT | $2011 / 2$ | 18 | 301 | 319 | $6 \%$ | $94 \%$ | $13 \%$ | $87 \%$ |
|  | $2012 / 3$ | 13 | 181 | 194 | $7 \%$ | $93 \%$ | $12 \%$ | $88 \%$ |
|  | $2013 / 4$ | 8 | 139 | 147 | $5 \%$ | $95 \%$ | $12 \%$ | $88 \%$ |

Data indicates that the overall percentage of male nursing UG students (6-7\%) is lower than the sector average ( $9-11 \%$ ), particularly for the PT courses (Action 2.2). The exception to this is in mental health ( MH ) nursing where male enrolment is higher than the sector norm (Figure 1) (Action 2.2a). The reasons for this are currently unclear and we will investigate this with our admissions team and investigate how other HEl have dealt with this issue (Actions 2.2b 2.2c and 2.2d).

Figure 1: Male:Female First Degree Mental Health Enrolments


The Department is working with local nurseries, primary and secondary schools on initiatives to encourage males to consider careers in N\&M (see section 4, page 35). Moreover, SHU has strong links with local Further Education (FE) Colleges through the University's Associate School and College Partnership (ASCP). This partnership aims to widen
participation by supporting students from local schools and colleges who maybe considering moving on to higher education. The Access and Business and Technology Education Council (BTEC) courses provided by the colleges prepare students in the subjects that are essential for entry to the pre-registration N\&M undergraduate degrees. The Department's Recruitment Team facilitates seminar sessions for the Colleges' Access BTEC students to support them in their applications for N\&M courses.

## Other Undergraduate Provision

The male:female numbers for the Advanced Diploma in Nursing Studies (ADNS) are in line with the sector norms for first degrees with 2013/14 being above the sector norm (Table 5). In September 2013, nursing became an all degree programme at SHU to meet the requirements of the NMC (following the Midwifery course which made the same transition in 2008). Consequently, the ADNS is no longer available although these nurses have the opportunity to top-up their academic qualification to degree level. The last intake was in September 2012 as it was replaced by the BSc (Hons) Nursing (all fields).

Table 5: Three-Year Pre-Reg Nursing (ADNS) - Enrolments - Overview

| Year | SHU Count |  |  | SHU \% |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | $\mathbf{M}$ | F | Total | M | F |
| $2011 / 2$ | 129 | 1,093 | 1,222 | $10 \%$ | $90 \%$ |
| $2012 / 3$ | 92 | 772 | 864 | $10 \%$ | $90 \%$ |
| $2013 / 4$ | 60 | 418 | $478^{1}$ | $13 \%$ | $87 \%$ |

${ }^{1}$ Reflects course run out and replacement by BSc (Hons)
The Department provides Continuing Professional Development (CPD) opportunities for qualified nurses and midwives to study at UG level by the provision of the three level 6 credit bearing modules. These are commissioned and funded via HEE LETBs that has resulted in a stable level of enrolments. Of particular note is the Return to Practice (RTP) module for Adult Nursing and Health Visiting that provides the opportunity for nurses to return to the profession after a career break of five years or more. Data indicates that the course is primarily accessed by females, which may be as a result of women being more likely than men to take career breaks for family/carer reasons. However, we will review this to identify barriers to male nurses who wish to return to practice (Action 2.3a). The course was not commissioned in 2013/14 but following an initiative by the Department of Health the course is once again running. Sector data for uptake of RTP courses is currently not available.

Table 6: Three-Year - RTP Enrolments - Overview

| Year | SHU Count |  |  | SHU \% |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | M | F | Total | M | F |  |
| $2011 / 2$ | 1 | 6 | 7 | $14 \%$ | $86 \%$ |  |
| $2012 / 3$ | 0 | 9 | 9 | $0 \%$ | $100 \%$ |  |
| $2013 / 14$ | Course did not run |  |  |  |  |  |

iii) Postgraduate male and female numbers completing taught courses - full and parttime - comment on the male:female ratio compared with the national picture for the discipline. Describe any initiatives taken to address any imbalance and the effect to date. Comment upon any plans for the future.

SHU PGT student numbers are consistent with sector norm average and owing to the small numbers of males the percentage differences are not significant. Total numbers have varied year on year, but the ratio of male:female has remained stable.

Table 7: All PGT enrolments by mode with sector comparison

| Mode | Year | SHU Count |  |  | SHU \% |  | Sector \% |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | Female | Male | Total | Female | Male | Female | Male |
| All | $2011 / 2$ | 285 | 147 | 432 | $66 \%$ | $34 \%$ | $78 \%$ | $22 \%$ |
|  | $2012 / 3$ | 308 | 111 | 419 | $74 \%$ | $26 \%$ | $79 \%$ | $21 \%$ |
|  | $2013 / 4$ | 287 | 95 | 382 | $75 \%$ | $25 \%$ | $80 \%$ | $20 \%$ |
| FT/SW | $2011 / 2$ | 84 | 14 | 98 | $86 \%$ | $14 \%$ | $79 \%$ | $21 \%$ |
|  | $2012 / 3$ | 100 | 13 | 113 | $88 \%$ | $12 \%$ | $81 \%$ | $19 \%$ |
|  | $2013 / 4$ | 107 | 14 | 121 | $88 \%$ | $12 \%$ | $81 \%$ | $19 \%$ |
| PT | $2011 / 2$ | 201 | 133 | 334 | $60 \%$ | $40 \%$ | $77 \%$ | $23 \%$ |
|  | $2012 / 3$ | 208 | 98 | 306 | $68 \%$ | $32 \%$ | $78 \%$ | $22 \%$ |
|  | $2013 / 4$ | 180 | 81 | 261 | $69 \%$ | $31 \%$ | $79 \%$ | $21 \%$ |

As with UG numbers, the number of male students undertaking MH PGT courses is above sector norms, with female students below sector norms (Figure 2.) (Actions 2.3b and 2.3c).

Figure 2: PGT enrolments all modes MH

iv) Postgraduate male and female numbers on research degrees - full and part-time comment on the male:female ratio compared with the national picture for the discipline. Describe any initiatives taken to address any imbalance and the effect to date. Comment upon any plans for the future.

Students undertaking research degrees are located within the CHSCR who are submitting a separate application.
v) Ratio of course applications to offers and acceptances by gender for undergraduate, postgraduate taught and postgraduate research degrees - comment on the differences between male and female application and success rates and describe any initiatives taken to address any imbalance and their effect to date. Comment upon any plans for the future.

Data indicates the percentage of applications to offers is higher for men, but there does not appear to be an obvious reason for this. The Department offers Open Days and recruits on values, i.e., applicants who demonstrate the values expected of a nurse, e.g., compassion. Therefore, we will investigate the acceptance process to identify any issues such as unconscious bias that may be influencing this (Actions 2.2c and 2.2d). The PG preregistration nursing course is included in this data and commissioned numbers have increased during the last three years.

Table 8: Ratio of course applications to offers and acceptances by gender - UGT/PGT

|  | Year |  |  | UGT |  |  | PGT |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | 2011/2 | 2012/3 | 2013/4 | 2011/2 | 2012/3 | 2013/4 |
|  | Total Apps |  | 6,132 | 5,908 | 5,235 | 709 | 747 | 968 |
| Applications | Count | M | 564 | 508 | 393 | 128 | 126 | 135 |
|  |  | F | 5,568 | 5,400 | 4,842 | 475 | 583 | 764 |
|  | Proportion | M | 9\% | 9\% | 8\% | 27\% | 20\% | 17\% |
|  |  | F | 91\% | 91\% | 92\% | 73\% | 80\% | 83\% |
|  | Apps to Acceptances | M | 34\% | 26\% | 34\% | 26\% | 28\% | 25\% |
|  |  | F | 26\% | 25\% | 28\% | 32\% | 24\% | 19\% |
| Offers | Count | M | 209 | 152 | 159 | 44 | 51 | 47 |
|  |  | F | 1,680 | 1,673 | 1,756 | 168 | 184 | 195 |
|  | Acceptances to Offers | M | 37\% | 30\% | 40\% | 34\% | 40\% | 35\% |
|  |  | F | 30\% | 31\% | 36\% | 35\% | 32\% | 26\% |
| Acceptances | Count | M | 189 | 133 | 132 | 33 | 35 | 34 |
|  |  | F | 1,428 | 1,358 | 1,375 | 152 | 140 | 143 |
|  | Offers to Acceptances | M | 90\% | 88\% | 83\% | 75\% | 69\% | 72\% |
|  |  | F | 85\% | 81\% | 78\% | 90\% | 76\% | 73\% |

vi) Degree classification by gender - comment on any differences in degree attainment between males and females and describe what actions are being taken to address any imbalance.
"Good honours" (1st or $2: 1$ ) were achieved by $76-85 \%$ of female students and $64-77 \%$ of male students. Across the degree classifications, student attainment for both male and female was consistent until 2013-14 where $3^{\text {rd }}$ class classification for males increased to $25 \%$. Against sector norms though, the percentage of males achieving a first is lower whilst the proportion of females achieving a $3^{\text {rd }} /$ pass is higher. However, this represents small numbers of students and therefore cannot be seen as significant. The current data only recognises students undertaking a first degree and not the Advanced Diploma in Nursing studies (ADNS) with a top-up year.

Table 9: Degree classification by gender

| Year | Degree Class | SHU Count |  | SHU \% |  | Sector \% |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | M | F | M | F | M | F |
| 2011/2 | 1st | 2 | 118 | 2\% | 98\% | 8\% | 92\% |
|  | 2:1 | 7 | 100 | 7\% | 93\% | 8\% | 92\% |
|  | 2:2 | 4 | 53 | 7\% | 93\% | 10\% | 90\% |
|  | 3rd/Pass | 1 | 15 | 6\% | 94\% | 14\% | 86\% |
|  | Total | 14 | 286 | 5\% | 95\% | 10\% | 90\% |
| 2012/3 | 1st | 7 | 142 | 5\% | 95\% | 8\% | 92\% |
|  | 2:1 | 13 | 130 | 9\% | 91\% | 8\% | 92\% |
|  | 2:2 | 5 | 56 | 8\% | 92\% | 9\% | 91\% |
|  | 3rd/Pass | 1 | 25 | 4\% | 96\% | 11\% | 89\% |
|  | Total | 26 | 353 | 7\% | 93\% | 8\% | 92\% |
| 2013/4 | 1st | 9 | 147 | 6\% | 94\% | 9\% | 91\% |
|  | 2:1 | 5 | 134 | 4\% | 96\% | 8\% | 92\% |
|  | 2:2 | 3 | 39 | 7\% | 93\% | 8\% | 92\% |
|  | 3rd/Pass | 3 | 9 | 25\% | 75\% | 11\% | 89\% |
|  | Total | 20 | 329 | 6\% | 94\% | 9\% | 91\% |

## Staff Data

vii) male:female ratio of academic staff and research staff - researcher, lecturer, senior lecturer, reader, professor (or equivalent). Comment on any differences in numbers between males and females and say what action is being taken to address any underrepresentation at particular grades/levels
The Male:Female staff ratio within $N \& M^{3}$ has remained stable during the past 3 years and reflects Higher Education Statistics Agency (HESA) data ${ }^{4}$ for Nursing \& Paramedical studies (Figure 3).

[^2]Figure 3: Academic staff by gender SHU N\&M ${ }^{5}$ and HESA


Figure 4: Academic staff by grade and gender


The current workforce is predominantly female with the majority of the team graded at SL. At SL and PL levels the proportion of male:female is $1: 3$, with Lecturer and Associate Lecturer having very small numbers but increased ratios of 1:4 and 1:2 respectively. There is

[^3]no suggestion currently that males are disproportionately promoted ahead of females although this will be monitored.

Table 10: Male:Female Ratio of Academic Staff by Full Time and Part Time

| Year | Level | Full Time |  |  |  |  | Part Time |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | M | F | Total | M \% | F\% | M | F | Total | $\begin{aligned} & \mathbf{M} \\ & \% \end{aligned}$ | F \% |
| $\begin{aligned} & 2011- \\ & 2012 \end{aligned}$ | Associate Lecturer |  |  | 0 |  |  | 2 | 1 | 3 | 67\% | 33\% |
|  | Lecturer |  |  | 0 |  |  |  |  | 0 |  |  |
|  | Senior Lecturer | 21 | 53 | 74 | 28\% | 72\% | 2 | 18 | 20 | 10\% | 90\% |
|  | Principal Lecturer | 3 | 9 | 12 | 25\% | 75\% |  | 3 | 3 | 0\% | 100\% |
|  | SSG |  | 1 | 1 | 0\% | $\begin{gathered} 100 \\ \% \end{gathered}$ |  |  | 0 |  |  |
| $\begin{aligned} & 2012- \\ & 2013 \end{aligned}$ | Associate Lecturer |  |  | 0 |  |  | 2 | 4 | 6 | 33\% | 67\% |
|  | Lecturer |  |  | 0 |  |  |  |  | 0 |  |  |
|  | Senior Lecturer | 20 | 56 | 76 | 26\% | 74\% | 3 | 16 | 19 | 16\% | 84\% |
|  | Principal Lecturer | 4 | 10 | 14 | 29\% | 71\% |  | 2 | 2 | 0\% | 100\% |
|  | SSG |  | 1 | 1 | 0\% | $\begin{gathered} 100 \\ \% \\ \hline \end{gathered}$ |  |  | 0 |  |  |
| $\begin{aligned} & 2013- \\ & 2014 \end{aligned}$ | Associate Lecturer |  |  | 0 |  |  | 2 | 4 | 6 | 33\% | 67\% |
|  | Lecturer | 1 | 2 | 3 | 33\% | 67\% |  | 1 | 1 | 0\% | 100\% |
|  | Senior Lecturer | 19 | 56 | 75 | 25\% | 75\% | 3 | 20 | 23 | 13\% | 87\% |
|  | Principal Lecturer | 3 | 11 | 14 | 21\% | 79\% |  | 2 | 2 | 0\% | 100\% |
|  | SSG |  | 1 | 1 | 0\% | $\begin{gathered} 100 \\ \% \\ \hline \end{gathered}$ |  |  | 0 |  |  |

Overall levels of PT working have remained stable during the 3 years reviewed with 27-28\% of females and $14-17 \%$ of males working PT. Proportionally there is no gender discrepancy between grades.

Data at field level was reviewed, although disaggregation had to be undertaken drawing on a variety of informal sources such as supervisor lists; email etc., as the information has not been collated previously. Therefore the data is incomplete (it omits AL for example) and cannot be validated (Action 1.2b).

However, the trends within this data seemed to indicate that across all fields, the breakdown of male:female is congruent with sector norms. Midwifery for example is $100 \%$ female whilst mental health is predominantly male although female staff in the MH team are more likely to work PT. In adult nursing, the workforce is primarily female and PT staff are generally female, although in 2011/12 there was one male member of staff who worked PT. Child field have a $20 \%: 80 \%$ split of male:female and all staff in this field team are FT. Learning disabilities field is 1:2 male:female with $100 \%$ working FT.
viii) Turnover by grade and gender - comment on any differences between men and women in turnover and say what is being done to address this. Where the number of staff leaving is small, comment on the reasons why particular individuals left.

Table 11: Turnover by Level and Gender ${ }^{6}$

| Year | Level | Male |  |  |  |  | Female |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | Count |  |  | Avg | Turnover \% | Count |  |  | Avg | Turnover \% |
|  |  | Leavers | Start | End |  |  | Leavers | Start | End |  |  |
| $\begin{gathered} 2011- \\ 2012 \end{gathered}$ | Associate Lecturer | 1 | 3 | 2 | 2.5 | 40\% |  | 1 | 1 | 1 | 0\% |
|  | Lecturer |  |  |  | 0 |  |  |  |  | 0 |  |
|  | Senior Lecturer | 2 | 25 | 23 | 24 | 8\% | 2 | 76 | 71 | 73.5 | 3\% |
|  | Principal Lecturer |  | 3 | 3 | 3 | 0\% | 2 | 10 | 12 | 11 | 18\% |
|  | SSG |  |  |  | 0 |  |  | 1 | 1 | 1 | 0\% |
| $\begin{gathered} 2012-2013 \end{gathered}$ | Associate Lecturer |  | 2 | 2 | 2 | 0\% |  | 2 | 4 | 3 | 0\% |
|  | Lecturer |  |  |  | 0 |  |  |  |  | 0 |  |
|  | Senior Lecturer | 1 | 23 | 23 | 23 | 4\% |  | 70 | 72 | 71 | 0\% |
|  | Principal Lecturer | 1 | 3 | 4 | 3.5 | 29\% |  | 11 | 12 | 11.5 | 0\% |
|  | SSG |  |  |  | 0 |  |  | 1 | 1 | 1 | 0\% |
| $\begin{gathered} 2013- \\ 2014 \end{gathered}$ | Associate Lecturer |  | 2 | 2 | 2 | 0\% | 1 | 4 | 4 | 4 | 25\% |
|  | Lecturer |  |  | 1 | 0.5 | 0\% |  |  | 3 | 1.5 | 0\% |
|  | Senior Lecturer | 2 | 23 | 22 | $22$ | 9\% | 5 | 72 | 76 | 74 | 7\% |
|  | Principal Lecturer | 1 | 4 | 3 | 3.5 | 29\% |  | 12 | 13 | 12.5 | 0\% |
|  | SSG |  |  |  | 0 |  | 1 | 1 | 1 | 1 | 100\% |

In the period 2011-14, 19 members of staff left, 8 male and 11 female (Table 11). Most of these were SL and PL. There was an increase in leavers in 2013-14 owing to retirement which is consistent with the Departments age demographic however this will continue to be monitored (Action 2.1c)

[^4][^5]
## 4. Supporting and Advancing Women's Careers:

## Key career transition points.

a) Provide data for the past three years (where possible with clearly labelled graphical illustrations) on the following with commentary on their significance and how they have affected action planning.
i) Job application and success rates by gender and grade - comment on any differences in recruitment between men and women at any level and say what action is being taken to address this.

Figure 5: Percentage of Job Applications and Success Rates across N\&M Department


The ratio of male:female applications mirror the overall male:female ratio within the sector. There appears to be an over-representation of male applicants (Figure 5), however Table 12 indicates that applications by males at L/SL were more likely to be successful in 2011-12, 2012-13 but the success rate for females at SL and above is greater (Actions 3.1, 3.1a and 3.1b).

Table 12: Applications/Success rates by Grade/Gender

|  |  | Male |  |  | Female |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Year | Level | Applied | Successful | $\begin{gathered} \text { Success } \\ \% \end{gathered}$ | Applied | Successful | $\begin{gathered} \text { Success } \\ \% \end{gathered}$ |
| $\begin{aligned} & 2011- \\ & 2012 \end{aligned}$ | L (0) ${ }^{1}$ |  |  |  |  |  |  |
|  | L/SL (5) | 19 | 2 | 10.53\% | 38 | 3 | 7.89\% |
|  | SL (0) |  |  | - |  |  |  |
|  | PL (3) | 6 | 0 | 0.00\% | 11 | 3 | 27.27\% |
|  | SSG (0) |  |  |  |  |  |  |
| $\begin{aligned} & 2012- \\ & 2013 \end{aligned}$ | L (0) |  |  |  |  |  |  |
|  | L/SL (2) | 3 | 2 | 66.67\% | 4 | 0 | 0.00\% |
|  | SL (1) | 0 | 0 | 0.00\% | 2 | 1 | 50.00\% |
|  | PL (0) |  |  |  |  |  |  |
|  | SSG (0) |  |  |  |  |  |  |
| $\begin{aligned} & \text { 2013- } \\ & 2014 \end{aligned}$ | L (1) | 0 | 0 | 0.00\% | 6 | 1 | 16.67\% |
|  | L/SL (5) | 3 | 0 | 0.00\% | 24 | 5 | 20.83\% |
|  | SL (1) | 0 | 0 | 0.00\% | 2 | 1 | 50.00\% |
|  | PL (0) |  |  |  |  |  |  |
|  | SSG (1) | 0 | 0 | 0.00\% | 4 | 1 | 25.00\% |

${ }^{1}$ Number of Vacancies
ii) Applications for promotion and success rates by gender and grade - comment on whether these differ for men and women and if they do explain what action may be taken. Where the number of women is small applicants may comment on specific examples of where women have been through the promotion process. Explain how potential candidates are identified.

NB: The data for this section has been compiled from local records held in the department (Actions 1.2c and 3.1a).

Internal promotion is managed and supported by HR, is open and competitive and is advertised along with a person specification for the role upon the Staff Intranet. Where a role requires staff from a particular field of nursing, these roles are ring fenced to staff from that field, with shortlisting and interview using a panel member external to the Department/University, to provide unbiased evaluation of candidates.

During the assessment period, 2 males and 4 females were internally promoted; 4 (2 males and 2 females) from SL to PL; 1 PL (female) to acting deputy HoD and one female to an internal secondment from PL to acting SSG. These promotions reflect the overall Department gender ratio of 1:3. External promotions also occurred with 1 female SSG left for an external promotion and 1 female SL is currently on a 3 year secondment to a senior position at the Higher Education Academy. Additionally, 2 Associate Lecturers (ratio 1:1) have achieved full time permanent contracts within the Department and the Department is
actively encouraging more Associate Lecturer posts in an effort to increase opportunities for staff in practice to join SHU as a career choice.

As the Department is predominantly female, successful promotion applicants tend to be female, except for in areas where males are predominant in practice e.g. MH Nursing. However, the ASSET survey indicated that $55 \%$ of staff have not been 'invited or encouraged' to apply for a post at a 'higher level' and the 2014 Employee Opinion Survey (EOS) data for the department indicated that only $49 \%$ strongly agreed/agreed with the statement "I believe there are adequate opportunities for my career development in Sheffield Hallam University" and this will be investigated and processes put in place to encourage and support internal applicants (Actions 3.2a and 3.2b).
b) For each of the areas below, explain what the key issues are in the Department, what steps have been taken to address any imbalances, what success/impact has been achieved so far and what additional steps may be needed.
i) Recruitment of staff - comment on how the Department's recruitment processes ensure that female candidates are attracted to apply, and how the Department ensures its short listing, selection processes and criteria comply with the university's equal opportunities policies

All staff recruitment is undertaken in line with the SHU's Equal Opportunities Policy. Appointments are based on a candidate's ability to match the skills, competencies, attributes and experience as set out in a 'Person Specification', which helps to ensure there is no gender bias.

Recruitment and selection activity is supported by SHU HR who advise and check on job applications and provide recruitment and selection training for interview panel chairs and any other internal or external panel members. This training includes the SHU Equality \& Diversity and Unconscious Bias e-learning packages that are mandated for panel chairs, and are available for all staff (Action 3.3a).

Wherever possible, interview panels will comprise of male and female members. Figure 6 demonstrates four occurrences where the gender balance was either 100\% female (midwifery interviews) or predominantly male (Mental Health Nursing) that reflects the gender balance of these subject fields and the sector. Currently, the selection process to ensure gender balance for interview panels is not formalised and action will be taken to rectify this (Actions 1.2d, 3.4a and 3.4b).

Figure 6: Recruitment panel by gender and level of vacancy - N\&M


Posts are advertised as open to PT and job shares, depending on business needs. Job advertisements signpost the SHU recruitment website which provides information concerning flexible working, annual leave entitlements, maternity, paternity and adoption leave and the Health and Wellbeing service. The website also refers to the University's AS membership, and displays the AS logo. There is a large nursery based on campus with extended opening times. The university also participates in the national childcare voucher scheme. The university offers flexible working for those with caring responsibilities and generous maternity and adoption leave. This information is reinforced as part of the Department induction process that has a dedicated Blackboard site and booklet that all new staff are given access to on commencement by their line manager.
ii) Support for staff at key career transition points - having identified key areas of attrition of female staff in the Department, comment on any interventions, programmes and activities that support women at the crucial stages, such as personal development training, opportunities for networking, mentoring programmes and leadership training. Identify which have been found to work best at the different career stages.
As previously stated, the Department has an excellent record of staff retention. Exit interview data is unavailable from HR owing to confidentiality. However, local data suggests
that the main reasons for leaving during the assessment period were external promotion and retirement.

The Department, however, recognises that the key areas of transition are new starters and progression. For new starters, those without a teaching qualification attend the 1 year PG Certificate of Higher Education course. This also enables new staff to network with other new staff across the university and with external partners. To this end, AWP for newly appointed staff reflects a reduced teaching load in the first year together with time allowed for attendance and completion of course work.

Progression and development is supported through the annual formal appraisal that all staff receive. Completion of appraisal and 6 monthly follow-up is monitored at Faculty level to ensure all staff benefit. Appraisal allows staff to discuss work planning, progression against agreed objectives and the set objectives for the following year. The ASSET survey suggests that $72 \%$ of staff found it a useful or valuable process. As part of a Faculty wide initiative all teaching is peer reviewed on an annual basis. The data collected acts as a peer supported development tool which is also discussed as part of the appraisal process and used to identify future training objectives. Some of these objectives will be identified within the AWP, others through self-managed time (SMT). All staff are encouraged to use the 23 days per annum of SMT for research and learning activities. Staff use these days to maintain their skills and knowledge in their field in terms of teaching, research and practice. This includes attending conferences, learning and teaching events and mandatory updates, maintaining clinical skills, undertaking research in practice and publication activities. It was noted that during the assessment period, no formal arrangements were in place to ensure all staff had the opportunity to attend conferences/study days. This has now been addressed to ensure equity (Action 3.2.c). Staff also hold positions as independent practitioners, or have roles within NHS Trusts and professional interest groups including clinical skills networks and policy development groups. Some staff act as external examiners, editorial board members, Governors, trustees and Supervisors of Midwives, however this data is not routinely collated
(Action 1.2e).
There is a wide range of personal development, leadership training, networking and mentoring programmes accessible to all staff. The ASSET survey indicated that $75 \%$ of respondents were aware of the training opportunities with $82 \%$ agreeing that they were encouraged to undertake activities that contributed towards their career.

## Career Development

a) For each of the areas below, explain what the key issues are in the Department, what steps have been taken to address any imbalances, what success/impact has been achieved so far and what additional steps may be needed.
i) Promotion and career development - comment on the appraisal and career development process, and promotion criteria and whether these take into consideration responsibilities for teaching, research, administration, pastoral work and outreach work; is quality of work emphasised over quantity of work?

Promotion and temporary acting-up opportunities are advertised via the HR website and all staff in the Department notified by e-mail. ASSET Survey data indicated there was little evidence of staff perceiving any gender bias in the promotion process. However, as previously identified, it showed a significant need to promote greater awareness of the promotion process and criteria both within the university and the Department.

Appraisal systems are used to identify career goals and staff are able to identify with their Line Managers any training, development or extended roles and experience (e.g. module leadership) which would be helpful in enhancing their academic profile, and subsequently improving promotion prospects. Such extended roles enhance opportunities for people management and reflect some of the responsibilities of a PL. These development roles are circulated to all staff inviting expressions of interest.

The University has recently developed an 'Aspirant PL' course and the Department will establish processes to ensure that staff are aware of the opportunity and supported to access the course. In addition SHU is a member of AURORA, Women into HEI Leadership and again the Department is looking at how it supports female staff to access the programme (Action 3.2d). Other career development support activities, mapped to the SHU Leadership Attributes Framework, are available through HR and are advertised on the staff intranet (Action 3.2e).

However, $21 \%$ of ASSET Survey respondents felt that absence of mentoring had had a detrimental effect on their career to date. Mentorship in all roles is available but only on an informal basis. At induction every new starter is encouraged by their line manager to identify a buddy to support them in adapting to their new role. This buddy system has evolved into an informal peer support and information pathway for new starters known as "NewSHUs". However, the current informal buddy system puts the onus on the new starter and we will look at ways to make this easier, including looking at holding a central register of department staff willing to act as a buddy (Action 3.2f).

The University has a standard progression route for the transition from Lecturer to SL. When a staff member reaches the top spinal point on the Lecturer scale, they are automatically considered for progression to SL by their line manager after assessment that the person has
fulfilled all the requirements expected at their current grade. However, this is generally only considered through the appraisal process and the Department needs to review how this is promoted (Action $\mathbf{3 . 2 g}$ ). At top of the SL pay spine, staff are able to apply for an exceptional contribution award within the University. Applications are considered by an objective panel, and during the submission period. Data on applications and success rates is not available owing to issues of confidentiality.

During 2011-2014 the number of PL roles increased (2 males:4 females). At SHU, PL roles are only available when there is a vacancy rather than there being an automatic progression. PLs have line management responsibilities and a Management and Leadership course was developed and delivered by HR to support transition into the role. SHU now runs a University wide leadership development programme that includes mentorship. Existing leaders and managers are also offered a suite of development opportunities that are designed to build on each other, as they progress through their career at the University. A senior lecturer (female) who had been identified as an aspiring PL by her line manager was supported to attend a seminar series to develop academic leadership. As part of this the SL was able to develop skills around facilitating challenging debate and discussion; questioning established approaches and taking a much more considered approach in organising informal mentoring arrangements. The SL has subsequently successfully applied for a PL position in the Department.

All development contains consistent core themes and messages to support the principles of the SHU 'People Strategy' (2011-2013) and is based on positive leadership and management behaviours. This training is provided over different days, times and formats to ensure accessibility by all.

Academic progression is also supported through use of Self-Managed Time (SMT) and study leave up to one day per week pro-rata. 15 staff members are currently post-doctoral ( 5 male, 10 female). The Department is supporting 1 male and 11 female staff to undertake level 8 study at doctoral/professional doctorate level. The Department also has a female Reader in Nursing Informatics and university processes are in place for staff to seek promotion to Reader status.
ii) Induction and training - describe the support provided to new staff at all levels, as well as details of any gender equality training. To what extent are good employment practices in the institution, such as opportunities for networking, the flexible working policy, and professional and personal development opportunities promoted to staff from the outset?

All new staff attend the University specific induction training days that outline the Universities policies and procedures regarding flexible working and staff benefits, etc. They are also are provided with a local half-day induction session on their first day by their line manager, where they are orientated to their new working environment and introduced to other team members. Regular monthly meetings are then scheduled for the first 6 months
in post to support the transition into role. A Blackboard (SHU Virtual Learning Environment) site for staff induction site is available for all new Department staff. Following excellent feedback, the site has been shared Faculty wide. New members of staff are provided with a staff induction booklet and details of the informal 'buddy' system. Additionally they are encouraged to network with other new starters through the NewSHUs pathway.
iii) Support for female students - describe the support (formal and informal) provided for female students to enable them to make the transition to a sustainable academic career, particularly from postgraduate to researcher, such as mentoring, seminars and pastoral support and the right to request a female personal tutor. Comment on whether these activities are run by female staff and how this work is formally recognised by the Department.

All students are allocated an Academic Advisor (AA) at the start of their course. This AA oversees the student's progress and will often be the first point of contact for pastoral, personal and academic issues. Allocation of AAs is field dependent and not related to gender. Students identifying a need for their $A A$ to be of the opposite gender would normally continue in the same tutorial group but be allocated another AA for one-to-one support.

Each cohort is allocated a Student Support Officer (SSO) who will offer advice on University regulations, including extensions and extenuating circumstances. Their role also may include pastoral and personal support of varying complexity; and referral onto other University services including counselling services. In 2011/12 the SSO gender mix was 1 male:2 females. However since 2012/13 the SSO team is all female, but the facility exists to offer support from a male SSO from a different Department if requested by the student. Students can access additional support from the Learning Centre, which is open 24 hours a day, to develop academic writing and research skills.

Students can take temporary withdrawal from the course for maternity or any other personal reasons, and re-join the course with a later cohort. There is an onsite nursery which is available to students and funding is available to help finance places.

All N\&M students are provided with a three year training plan which identifies periods of study, placement ( $50 \%$ of the course is out on placement) and annual leave, enabling students to plan and develop a work life balance. In addition the annual academic timetable is made available to students from the start of the course.

All students are supported by SHU to gain employment through portfolio and CV development sessions, interview technique workshops, and joint NHS recruitment fairs. Due to midwifery statutory status, student midwives participate in annual supervisory reviews throughout the course in preparation for independent practitioner status.

Students are actively encouraged to participate in a number of extra-curricular activities to support development of a professional profile and academic career development in the
future. Such activities include acting as course representatives, or student ambassadors (supporting open days and recruitment events), participation in course revalidation, peerassisted learning, student led conferences and professional use of social media. These opportunities are advertised in a number of ways to students, through email, course and level inductions; social media and via Course Blackboard sites. Students self-nominate and where more than one student comes forward, a student election is held. Students are provided with support and training to help them settle into their roles from the Students Union.

SHU offers extensive support for students with disabilities or other specific educational needs. The needs of individual students are discussed with an assessor from the Disabled Student Support Team, who will then recommend an appropriate support strategy. A Learning Contract is then drawn up and circulated to members of the administrative team, and relevant academic staff.

In addition all placement areas have a dedicated Link Lecturer who takes overall responsibility for ensuring that practice-learning experiences are organised in a timely and effective manner and supporting any students deemed to be 'at risk', i.e., those students whose attendance, lack of progression in practice, commitment and/or academic work gives Academics, clinical staff and SSOs cause for concern. Link lecturers undertake a listening or 'first point of contact' service for students who encounter personal difficulties and refer students to the SHU Counselling service or Student Union services as appropriate.

## Organisation and Culture

a) Provide data for the past three years (where possible with clearly labelled graphical illustrations) on the following with commentary on their significance and how they have affected action planning.
i) Male and female representation on committees - provide a breakdown by committee and explain any differences between male and female representation. Explain how potential members are identified.

Figure 7: \% Gender Representation on Decision Making Committees


Though there are variations in composition of committees across the committees illustrated, only two committees are not representative of the male:female ratio of the Department, the Mental Health Forum and Course Management Team. The MH Forum has a predominance of males. This is reflective of the predominance of males in this field and the subsequent gender imbalance among academics in that field when compared with the rest of the Department. The course management team structure is currently $3 \mathrm{M}: 3 \mathrm{~F}$ and reflects the fact that the staff who expressed interest in these roles did so on the basis of developing their academic careers rather than a gender issue. However, we will continue to monitor this (Action 3.5a).

Overall, the data suggests there is no overt gender imbalance on any of the other decision making committees within the Department. No one male sits on all the groups listed, though some sit on several groups.

Representation on committees is generally decided through an individual's expression of interest, or by being nominated, by agreement, owing to specific expertise. Calls for expressions of interest are circulated to the Department and line managers also nominate staff based on career development needs and existing expertise identified during staff appraisal. All staff within the department have AWP time allocated to General Academic Duties that includes committee attendance. Membership of some groups is restricted depending on level of seniority, e.g., DMG is at PL and SSG level.
ii) Male:Female ratio of academic and research staff on fixed-term contracts and openended (permanent) contracts - comment on any differences between male and female staff representation on fixed-term contracts and say what is being done to address them.

All academic staff in the Department are on permanent contracts this also includes Associate Lecturers. No staff are employed on fixed-term or open ended contracts. Secondees from the NHS into the Department have contracts that are negotiated on an individual basis. However, up until 2013/14, the Department did not have a clear strategy for managing or monitoring secondees. This changed in March 2014 when the DMG agreed key principles when identifying potential secondees so as to maximise the opportunity for both the secondee and the department. These principles ensure that the secondee is appointed to meet a department need and the benefits to the secondee are articulated. In addition, all secondees are seconded into the department for 0.4 FTE , with secondments being for either 6 months or 1 year depending on the department and secondees needs.
b) For each of the areas below, explain what the key issues are in the Department, what steps have been taken to address any imbalances, what success/impact has been achieved so far and what additional steps may be needed.
i) Representation on decision-making committees - comment on evidence of gender equality in the mechanism for selecting representatives. What evidence is there that women are encouraged to sit on a range of influential committees inside and outside the Department? How is the issue of 'committee overload' addressed where there are small numbers of women staff?

The Department ASSET Survey suggests that $71 \%$ of respondents are not members of any Faculty/Departmental committee. Discussion in the focus group, however, identified that understanding of what constitutes a decision making committee was unclear, and therefore this evidence may be unreliable (Actions 3.5b and 3.5c). There is currently no single
repository for the information required to illustrate the gender balance of these committees (Action 1.2 g ).

The Department has no formal quotas for gender representation on decision making committees but recognises there is a need to avoid overburdening individuals with multiple committee attendances. This is reviewed during AWP and appraisal meetings with line managers. Given the ratio of male:female across the Department, there does not appear to be an issue with committee overload for either gender.

Where committees are formed by a process of self-nomination, all individuals have an equal opportunity to volunteer. Opportunities to join committees are considered in the individual's AWP/appraisal, and line managers are expected to play an active role in encouraging staff to identify areas of interest. Recognition of individuals' workload or administrative commitments and acknowledgment of time needed to facilitate their engagement may involve re-negotiating elements of individuals' existing AWP with their line managers to facilitate their attendance on the committee and we plan to monitor this in terms of gender representation (Action 3.5a).
ii) Workload model - describe the systems in place to ensure that workload allocations, including pastoral and administrative responsibilities (including the responsibility for work on women and science) are taken into account at appraisal and in promotion criteria. Comment on the rotation of responsibilities e.g. responsibilities with a heavy workload and those that are seen as good for an individual's career.

SHU has an agreed academic contract with capped teaching hours, i.e., a maximum of 462 face-to-face teaching hours of which 1 hour prep would be allocated for every hour of teaching. SMT is also available for study activity as well as scholarly activity and professional linking. There are Faculty guidelines in regard to AWP but these can be adapted by each Department; e.g. in nursing, hours are allocated for linking with placements which may be unusual or non-existent in other Departments. AWP is done yearly by reviewing previous years and forward planning for the following year. It is done on an individual basis and forms part of the appraisal process. It is not fixed at a specific point and can be reviewed on an ad-hoc basis if changes occur to the individual or to their role; e.g. promotion, new role, illness, maternity leave, flexible working hours etc. It is a transparent process and peer groups can see work plans to ensure parity and equity and balance to work planning.

Amendments can be made in the work plan in regard to reasonable adjustments. These go in the notes section which then feeds into timetabling. This may be restricted hours for teaching due to carer responsibilities or to illness, disability or maternity. This may include being unable to work in certain buildings or not teaching before or after a certain time. For example one female SL has a son with mental and physical disabilities, flexible working arrangements have allowed her to undertake her caring responsibilities whilst still maintaining a FT post. These include protected teaching hours, a parking permit and an
understanding that she may need to be flexible in needing to take leave if her son is unwell or there is a break down in care arrangements. For PT workers, who have roles that have set hours allocated e.g. module leader, their remaining AWP is calculated pro-rata in regard to WTE.

All roles are made available for applications / expression of interest when they are redefined or revalidated. They may be reallocated or re-evaluated if the person needs to step down due to illness, pregnancy or perhaps a change in their wider role. An AWP database manages the process; hours are added and removed accordingly by PLs.
iii) Timing of Departmental meetings and social gatherings - provide evidence of consideration for those with family responsibilities, for example what the Department considers to be core hours and whether there is a more flexible system in place.

Meetings usually occur within core working hours, defined as 09:00-17:00. Although currently not official Department policy, this approach ensures an inclusive working environment and family friendly culture, maximising the opportunity for those who work part time or flexibly to attend (Action 3.6a). For any staff who are unable to attend meetings, minutes are circulated via email and, for the Departmental meetings, via the HoD blog (Action 3.6b).

Monthly Departmental meetings occur on alternate Mondays and Wednesdays, enabling more PT workers to attend regularly. Field specific teams also meet approximately monthly, meeting dates and times being set in advance to allow attendance to be planned. For smaller committee meetings, 'Doodle' polling (or similar) is utilised to determine when most staff can attend. The Department will monitor this to ensure that this does not result in some members of staff being consistently unable to attend meetings (Action 3.6c)

Key Social events and staff celebrations, e.g. retirements, are circulated via the email system, as are Faculty Christmas and Summer events. A number of smaller team/field social events are held on a regular basis, negotiated in advance within the team, on varied days and as either lunch or tea events, allowing those working part time/flexibly and/or commuting to attend.

Staff are encouraged to attend annual Departmental away days to support team building. To increase attendance, these are held at times when staff are most likely to have reduced teaching commitments. Away days are planned well in advance and staff notified via email.

A number of informal social groups exist, e.g. the 'Collegiate Crafters', a social lunchtime meeting for staff to share crafting skills and support each other in development of new skills. Numbers attending are not monitored as this is an informal group.
iv) Culture -demonstrate how the Department is female-friendly and inclusive. 'Culture' refers to the language, behaviours and other informal interactions that characterise the atmosphere of the Department, and includes all staff and students.

The Department workforce is predominantly female (78\%), reflecting sector and professional norms. Most staff share inter-professional office spaces enhancing understanding, professional development and networking. The Department has use of several social spaces including office kitchens, catering outlets, outdoor picnic areas and a gymnasium. In some areas of the Campus, social spaces are used by both staff and students, allowing meetings of both a professional and a social nature, and creating an inclusive, friendly and supportive atmosphere. According to the ASSET survey, $91 \%$ of respondents strongly agreed that their working environment was friendly. The Department is also fortunate to be located in a fully accessible suburban campus with much green space and wildlife.

SHU provides IT systems that allow remote working off campus which further enables staff to work flexibly; the ASSET survey responses showed that $95 \%$ felt they were able to work remotely. It is likely that the remainder are required to be on site during core working hours due to the nature of their roles, e.g. members of technical services teams. Within these teams, however, flexible working is enabled by supporting PT contracts.

University members of staff are required to undertake E\&D training by way of e-learning. As part of the University's commitment to E\&D, the University's e-learning module, is continuously reviewed and updated with new legislation including the Equality Act and contains an emphasis on gender. This module is currently not mandatory for all staff, nor are scores monitored although HR are looking into this. In the meantime the Department will consider ways of introducing a local monitoring approach to identify and support staff that may have identified development needs through undertaking the module (Action 3.3b). In addition an 'Unconscious Bias' e-learning module is available to all staff.
v) Outreach activities - comment on the level of participation by female and male staff in outreach activities with schools and colleges and other centres. Describe who the programmes are aimed at, and how this activity is formally recognised as part of the workload model and in appraisal and promotion processes.

The N\&M Admissions team support outreach initiatives including Open Days and are allocated time for recruitment within their AWP. The key team reflects the male:female ratio within the Department ( $22 \% \mathrm{M}: 78 \% \mathrm{~F}$ ).

The Department links annually with a number of schools and colleges to provide outreach activities and to promote N\&M as professions. 25 events were attended in 2013-14 and were aimed at over 16s. Other Faculty wide events, mainly supported by the Technical Services Team, offer contact opportunities to under 16s such as taster sessions to introduce Year 10, 11 and 12 students to the various health care roles via "Who am I in Health and

Social Care" workshops. Data on male:female pupil attendance is not available for the submission period, but is now routinely collected and will be monitored (Action 2.2e)

Individual school and college visits are supported by the Outreach Team to SHU's health specialist training area where they can meet current students of both genders, visit the training facility and access information relating to applications and courses. They also promote AS activities in Science Week, and support our academic and Professional Services staff to visit school and colleges to promote their areas of expertise.

A representative from the DMG sits on the Advising the Advisers: Health and Social Care Recruitment Partnership Group that provides opportunities for teachers and advisers to receive information and support regarding applications to Health and Social Care courses and share best practice in this area. This also enables the University to share key messages with this critical group. We will continue to explore future options for utilising this group for separate focus groups to discuss changes to our courses and to look at gender diversity (Action 2.2f). Traditionally recruitment of female students is not an issue; however there are proportionally fewer applications from males (see student data) (Action 2.2).

## Flexibility and managing career breaks

a) Provide data for the past three years (where possible with clearly labelled graphical illustrations) on the following with commentary on their significance and how they have affected action planning.
i) Maternity return rate - comment on whether maternity return rate in the Department has improved or deteriorated and any plans for further improvement. If the Department is unable to provide a maternity return rate, please explain why.

The maternity rate for the Department is low, reflecting the age demographic of the Department with $94.5 \%$ of female staff being $35-45$ years old and $78 \% 45+$. During the last three years 2 members of staff took maternity leave with a $100 \%$ return rate to PT working.

Information on the university's maternity, parental adoption, and paternity leave policy and procedures can be found on the staff intranet pages. Keeping in touch (KIT) days are promoted, where staff are entitled to carry out 10 days' work with full pay during statutory maternity leave without affecting their leave entitlements. Both members of staff who took maternity leave in this time period took advantage of this by choosing to come into work for one day prior to returning to their posts in order to again ease the process. Staff receive a letter regarding entitlements from HR when their pregnancy is notified to HR by their Line Manager. Where both parents are employees of the University, maternity leave may be shared, subject to mutually agreeable arrangements being made with the Faculty/Directorate(s) concerned. In addition up to 18 weeks unpaid parental leave can be taken. According to the two individuals that took maternity leave in this time period, both accessed the intranet information independently prior to meeting with Line Managers and
their entitlements under the policies were reinforced by their Line Managers. Both had a work place assessment including a change of office chair.
ii) Paternity, adoption and parental leave uptake - comment on the uptake of paternity leave by grade and parental and adoption leave by gender and grade. Has this improved or deteriorated and what plans are there to improve further.

There has been no formal application for paternity or adoption leave in the AS assessment period. The ASSET survey indicates that there were 8 responses to question 17 in regards to child related leave but this would seem to be outside of the 3 year time window required for AS. This includes one member of staff who successfully applied for adoption leave. PT hours are considered and negotiated on an individual basis as is 'term time' only working. There is flexibility through parental leave to take time off when children require care. In addition the ability to work flexibly and/or work from home is available wherever possible for academic staff (see section 5). Several staff members have noted the ability to work from home has greatly relieved the pressure on family situations where children have been ill (see section 5).
iii) Numbers of applications and success rates for flexible working by gender and grade comment on any disparities. Where the number of women in the Department is small applicants may wish to comment on specific examples.

In the last three years there have been no new formal applications for flexible working, however, the numbers of PT staff have increased, some owing to staff taking flexible retirement and others owing to term time only contracts. We will continue to monitor this (Action 3.6d).
b) For each of the areas below, explain what the key issues are in the Department, what steps have been taken to address any imbalances, what success/impact has been achieved so far and what additional steps may be needed.

## i) Flexible working

Academic staff can work flexibly on an informal basis and formal flexible working can be negotiated as per University policies and procedures. New staff are informed of this on their induction to the Department by line managers. These include reduction of hours post maternity leave and term time only working. Several members of staff are on permanent part time contracts including 5 male academic staff at associate and senior lecturer level and 28 female academic staff from researchers to principal lecturers. One member of senior academic staff has protected teaching hours (i.e. teaching only allocated between 10am and 4 pm ) negotiated through AWP due to carer responsibilities.

Staff are entitled to paid time off work to attend antenatal and adoption related appointments. In addition, the Department supports staff who need to attend hospital/medical appointments that can only be arranged during core hours. Cover for work will be discussed with individual Line Managers identifying appropriate personnel to deliver any teaching sessions. Staff returning from maternity leave or long term sickness are supported through phased return arrangements planned with the staff member in advance.

Timetables are planned a year in advance to allow staff to manage annual leave and scholarly activities, such as conferences around teaching commitments.
(4758 words)

## 5. Any other comments:

Please comment here on any other elements which are relevant to the application, e.g. other STEMM-specific initiatives of special interest that have not been covered in the previous sections. Include any other relevant data (e.g. results from staff surveys), provide a commentary on it and indicate how it is planned to address any gender disparities identified.

This process has been very challenging and has highlighted multiple system issues that, once rectified will enable the department to succinctly evidence the support that it provides to students and staff.

We are pleased to note that our 1:3 male to female ratio within the department reflects the national picture of registrants with the NMC. We plan to further develop strategies to encourage men and other under-represented members of our community into N\&M careers through increasing contact with nurseries and schools and by offering work experience within the department for year 10 students for the first time in 2016. We will encourage schools to nominate mixed groups with equal numbers of boys and girls for these activities as a first stage in this process.

In 2013 we invited 14-16 year olds from the local community to learn lifesaving skills. Volunteer students and teaching staff facilitated the skills sessions and participants were awarded a certificate of attendance which students felt was valuable to their personal development portfolios. The aim was that teenagers would leave the session seeing one of the many things that the university had to offer in terms of health teaching and that they would take away with them skills that can potentially save a life.

Our new HoD is committed to addressing student and staff progression needs specifically in light of the increased age profile of the department by offering lecturer posts with built in progression routes at key transition points and buddying systems such as the New SHU's initiative used in 2014-15, and we are currently looking at how this can be monitored (Action 3.2f).

We are also proud of our ability to work flexibly to individuals and the Department's advantage and this is best illustrated by comments from colleagues:
"The response from the organisation was excellent, enabling and understanding of the practical and emotional repercussions of so many events colliding at once. Of course issues are still continuing but these are not having an impact on work in such a dramatic way. Never the less support has been consistent and sensitive".
"Without the full support and understanding of the Department in regards to carers needs I would be unable to fully commit to my role. Therefore the Department has fully committed itself to carer's rights under the disability discrimination act and supported family friendly polices"

Athena SWAN Bronze Submission, Department of Nursing and Midwifery, Sheffield Hallam University
"This was an extremely difficult period in my family life throughout which Sheffield Hallam University could not have been more supportive".
"SHU as an organisation has been incredibly supportive, supporting flexible working patterns that have enabled me to manage work and home life. This is far beyond anything I could have expected or would have experienced from my previous employer".
(447 Words)

## 6. Action plan

1. The Self-Assessment Process

|  | Action | Description of action | Action to date | Responsibility ${ }^{7}$ | Timescale | Success measure |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1.1 | Governance of Athena SWAN | a. Workload \& AWP for SAT activities to be reviewed to ensure SAT members able to attend Departmental SATs, Champion Network meetings and associated activities. | Highlighted as an issue to Line Managers. | HoD/DMG <br> PL Line Managers <br> Athena SWAN Champion | March 2016 | SAT members and Champion promote the work of Athena SWAN and manage the action plan, reporting to DMG, HoD and ultimately SHU's Equality and Diversity Board (EDB) |
| 1.2 | Programme of gender monitoring to be developed beyond existing processes in order to ensure robust data collection and reporting systems | a. Consider a single repository for storing gender specific information for future submissions. <br> b. Develop monitoring processes at field specific level <br> c. Develop processes for collating recruitment and selection data for both internal/external applicants as separate data sets. <br> d. Monitor gender balance of interview panels. | Gaps in data collection activity highlighted. <br> Ongoing discussions regarding responsibility for local versus central data collection and collation. <br> Developed good relationships with Strategic Planning and Intelligence and HR Management Information Teams. | HoD, <br> DMG <br> Athena Swan Champion <br> Central SAT | $\begin{aligned} & \text { September } \\ & 2016 \end{aligned}$ | Robust systems are in place and reliable data gathered ${ }^{8}$ <br> Data for Silver AS Submission available on demand. |

[^6]|  | Action | Description of action | Action to date | Responsibility ${ }^{7}$ | Timescale | Success measure |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | e. Develop processes to collate data on external roles held by staff, e.g., trustees, independent practitioners etc. |  |  |  |  |
| 1.3 | Publicity of Athena Swan: Increase awareness of information and initiative across the Department | a. Department-wide awareness raising through newsletters, website, targeted presentations and emails. | Draft AS submission circulated to whole Department for comment. Feedback from colleagues was very positive. <br> AS now on agendas for N\&M Department; DMG; N\&M away days; Faculty UG/PG Recruitment Groups meeting agendas. <br> A Representative of SAT attended the Women in Science week workshop, and fed back information and ideas to SAT group. <br> A member of the Department SAT attended the recent PG <br> Recruitment Science fair to publicise N\&M \& AS <br> Staff profiles have been submitted for inclusion the "Our People" section of the staff recruitment website. <br> Publicity issues raised by this submission have been discussed at Central SAT | Chairs of <br> Department <br> Groups/ <br> Committees. <br> Athena Swan Champion. <br> Nominated committee members <br> HoD/DMG <br> SAT <br> Communications marketing team, <br> HR and central SAT <br> All staff | December 2015 - for meeting agendas <br> Review every 6 months | Nominated committee member will report to meeting and feedback to AS Champion issues/actions. <br> A broad range of staff have been facilitated to support events representing AS principles <br> Athena Swan publicity available and visible both in physical and virtual environments <br> Banner stand and promotional material with AS logo in use at open days and outreach events |
|  |  | b. Future presentations at key Department events, e.g., N\&M Staff away day. |  |  |  |  |
|  |  | c. All dept. meeting agendas e.g. N\&M Dept Meeting, DMG, will have Athena SWAN as standing item and regularly review |  |  |  |  |
|  |  | d. Central SAT to coordinate |  |  |  |  |
|  |  | University wide branding |  |  |  |  |
|  |  | e. Faculty/departments to review consistent faculty branding for AS |  |  |  |  |
|  |  | f. Include AS logo on Department e-mail signature. |  |  |  |  |

## 2. A Picture of the Department




|  | Action | Description of action | Action to date | Responsibility | Timescale | Success measure |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 2.3 | Explore ways to address gender imbalance in post graduate education. | a. Review RTP recruitment to identify any barriers to male applicants <br> b. Investigate and try to identify why PG MH nursing attracts higher than sector norm levels of male applicants. <br> c. Investigate how other HEI providers have dealt with the issue of encouraging female applicants onto PG MH CPD courses. | SHU has increased advertising of post graduate courses during the assessment period. <br> Reviewing marketing materials to represent E\&D <br> PG CPD courses incorporate part time, and distance learning. Additionally courses are modular, allowing students to build credit towards a masters qualification that is personalised and maximises flexibility | Communications and marketing team <br> Trust <br> Partnership Group <br> Athena Swan Champion | Review July 2016 and annually thereafter | Diversity of applications better than sector norms. |

## 3. Supporting and Advancing Women's Careers

|  | Action | Description of action | Action to date | Responsibility | Timescale | Success measure |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 3.1 | Understand gender differences in staff recruitment and selection to all levels within the Department | a. Monitor recruitment and selection data for both internal/external applicants as separate data sets <br> b. Respond to issues raised by data where required. | Raised with DMG <br> Regular reporting of HR stats received by AS Champion | DMG <br> Athena Swan Champion <br> PL Line <br> Managers | Review July 2016 and annually thereafter | Workforce that is representative of culture and demographic <br> Equity of opportunity reported by all genders in ASSET and EoS |
| 3.2 | Support staff to access appropriate personal and career development opportunities | a. Investigate the reasons why staff feel they do not have adequate opportunities for career development. <br> b. Develop process to encourage applications for promotion <br> c. Monitor conference and study day attendance to ensure equity <br> d. Identify and support aspirant female leaders to access the AURORA programme <br> e. Audit the current systems for communicating development opportunities and identify gaps and areas for improvement <br> f. Review existing Mentoring programmes / buddy systems to identify areas of good practice that can be integrated into a single departmental process | All requests for study leave and conference attendance are monitored by line managers in line with appraisal and Department objectives. <br> Local informal mentoring/buddy programmes have been identified <br> Findings of ASSET survey has been shared with staff <br> Appraisal system allows managers to identify staff personal progression/ career development aspirations and support them in achieving these | HoD/DMG <br> PL Line Managers HR <br> Athena Swan Champion <br> Central SAT | Review July 2016 and annually thereafter | Single departmental support system for staff <br> Register of mentors/buddies established <br> Internal staff progressing within department <br> Equity of opportunity reported by all genders in ASSET and EoS |


|  | Action | Description of action | Action to date | Responsibility | Timescale | Success measure |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | g. Review how progression routes between lecturer and Senior lecturer grades is promoted across the Department. |  |  |  |  |
| 3.3 | To ensure the Department manages unconscious bias and continues to promote equality and diversity | a. Ensure all interview panel chairs complete the e-learning packages for Equality \& Diversity and Unconscious bias. <br> b. Develop a monitoring system to ensure all staff undertake the e-learning packages for Equality \& Diversity and Unconscious bias on a triannual basis. | As from April 2015, all new staff have been required to undertake the e-learning packages for Equality \& Diversity and Unconscious bias | HoD/DMG <br> PL Line Managers HR <br> Athena Swan Champion | Review July 2016 and annually thereafter | $100 \%$ of new staff complete the e-learning packages for Equality \& Diversity and Unconscious bias <br> $100 \%$ of all staff complete/ triennial refreshers for Equality \& Diversity and Unconscious bias |
| 3.4 | Ensure staff recruitment and selection processes promote equality and diversity | a. Develop a process for ensuring gender balance for interview panels <br> b. Explore working with other departments to ensure gender balance | Raised with DMG | HoD/DMG <br> PL Line Managers HR <br> Athena Swan Champion | Review July 2016 and annually thereafter | R\&S panels representative of all genders |
| 3.5 | Increase transparency of decision making systems and processes within the department | a. Monitor gender and individual representation on decision making committees <br> b. Identify ways to communicate the decision making systems and processes to the wider Department. | The recent Department refresh has enabled a review of current groups and committees \& decision making responsibilities. <br> The HoD, regularly updates the Department via an online Blog. | $\begin{aligned} & \hline \text { HoD } \\ & \text { PVC } \end{aligned}$ | Review July 2016 and annually thereafter | ASSET survey data indicates all staff aware of decision making processes and responsibilities. <br> All staff aware of opportunities to influence decisions. |


| Action |  | Description of action | Action to date | Responsibility | Timescale | Success measure |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | c. Publicise the key decision making committees and groups and how staff can be involved in the process. | The Faculty Pro-Vice Chancellor (PVC) sends regular email updates on Faculty and University issues <br> The Faculty SharePoint site details al the faculty Governance structures. |  |  |  |
| 3.6 | Ensure that staff working flexibly or PT are not disadvantaged. | a. Formalise current practice to not hold meetings outside of core working hours <br> b. Audit communication systems to ensure that flexible workers and PT staff receive meeting minutes etc. <br> c. Ensure times and days of meetings are varied to ensure that flexible/PT staff do not consistently miss out on meetings. <br> d. Method of monitoring formal application for flexible working. | A number of groups have already committed to ensuring meetings held at different days/times, e.g., the Clinical Simulation Group. <br> Minutes of meetings held are now held on SharePoint. | HoD/DMG <br> Group Chairs <br> PL Line <br> Managers <br> HR <br> Athena Swan <br> Champion | Review July 2016 and annually thereafter | ASSET \& EoS data shows that PT \& flexible staff do not feel disadvantaged in anyway. |

## Appendix 1: List of Abbreviations Used.

AA Academic Advisor
ADNS Advanced Diploma of Nursing
ASCP University's Associate School and College Partnership
ASSET Athena Survey of Science Engineering and Technology
AWP Academic Work Plan
AL Associate Lecturers
BTEC Business and Technology Education Council
CHSCR Centre for Health and Social Care Research at SHU
CPD Continuing Professional Development
DMG Department Management Group
E\&D Equality \& Diversity
EOS Employee Opinion Survey
HEE Health Education England
HEI Higher Education Institution
HESA Higher Education Statistics Agency
HoD Head of Department
HR Human Resources
FE Further Education
FT Full time
LETB Local Education and Training Boards
N\&M Nursing \& Midwifery
NMC Nursing and Midwifery Council
PG Postgraduate
PGT Postgraduate Taught
PL Principal Lecturers
PT Part Time
RTP Return to Practice
SAT Self-Assessment Team

SHU Sheffield Hallam University
SL Senior Lecturer
SMT Self-Managed Time
SSG Senior Staff Grade
SSO Student Support Officer
UG Undergraduate
WTE Whole Time Equivalent


[^0]:    ${ }^{1}$ previously Sheffield City Polytechnic

[^1]:    ${ }^{2}$ Data on student enrolments is taken from the University's HESA Student Return.

[^2]:    ${ }^{3}$ Research staff are based within the CHSCR and not part of this application.
    ${ }^{4}$ SHU data does not include paramedical studies.

[^3]:    ${ }^{5}$ Data from SHU Core portal and HR data

[^4]:    (1960 Words)

[^5]:    ${ }^{6}$ Leaver figures are for the whole year period therefore the end figure is not guaranteed to be start figure minus leavers owing to the following: a) an individual may change grade during the year; b) an employee may change department during the year period but would not be classed as a leaver as they are still at SHU. The University's leavers and turnover calculations are for leavers who leave SHU, not internal transfers; c) new starters in period will be included in the end figure.

[^6]:    ${ }^{7}$ Roles/groups highlighted in Bold indicates the Lead role to co-ordinate activity
    ${ }^{8}$ SHU is currently introducing a new management information system called Tableau which has a number of key advantages over previous reporting systems in that it will enable staff to interrogate data and identify issues more readily themselves. Initially the focus will be on student data, but the system will be extended to include staff data also. Multiple sets of custom filters can be saved and recalled on demand, with charts and tables available to be exported as images for use in Athena Swan applications. Data can also be downloaded for further analysis in other software. Data for all departments will be updated at the same time at key points in the year. The latest Tableau reports will always be available on the intranet with datasets being expanded to include 5 years as standard

