



Department Application Bronze and Silver Award



ATHENA SWAN BRONZE DEPARTMENT AWARDS

Recognise that in addition to institution-wide policies, the department is working to promote gender equality and to identify and address challenges particular to the department and discipline.

ATHENA SWAN SILVER DEPARTMENT AWARDS

In addition to the future planning required for Bronze department recognition, Silver department awards recognise that the department has taken action in response to previously identified challenges and can demonstrate the impact of the actions implemented.

Note: Not all institutions use the term 'department'. There are many equivalent academic groupings with different names, sizes and compositions. The definition of a 'department' can be found in the Athena SWAN awards handbook.

COMPLETING THE FORM

DO NOT ATTEMPT TO COMPLETE THIS APPLICATION FORM WITHOUT READING THE ATHENA SWAN AWARDS HANDBOOK.

This form should be used for applications for Bronze and Silver department awards.

You should complete each section of the application applicable to the award level you are applying for.

Additional areas for Silver applications are highlighted throughout the form: 5.2, 5.4, 5.5(iv)

If you need to insert a landscape page in your application, please copy and paste the template page at the end of the document, as per the instructions on that page. Please do not insert any section breaks as to do so will disrupt the page numbers.

WORD COUNT

The overall word limit for applications is shown in the following table.

There are no specific word limits for the individual sections and you may distribute words over each of the sections as appropriate. At the end of every section, please state how many words you have used in that section.

We have provided the following recommendations as a guide.

Department application	Silver	Actual Word Count
Word limit	12,000	
<i>Recommended word count</i>		
1.Letter of endorsement	500	581
2.Description of the department	500	516
3. Self-assessment process	1,000	935
4. Picture of the department	2,000	1,987
5. Supporting and advancing women's careers	6,500	7,788
6. Case studies	1,000	890
7. Further information	500	264
Plus additional 1,000 granted	1000	
	13,000	12,961

Name of institution	University of Brighton and University of Sussex
Department	Brighton and Sussex Medical School (BSMS)
Focus of department	STEMM
Date of application	30 November 2017
Award Level	Silver
Institution Athena SWAN award	For both University of Brighton and University of Sussex: Level: Bronze Date: April 2016
Contact for application <small>Must be based in the department</small>	Dr Natasha Sigala, Dr Jaime Vera or Jenny Holmes
Email	n.sigala@bsms.ac.uk j.vera@bsms.ac.uk j.holmes@bsms.ac.uk
Telephone	Dr Natasha Sigala: 01273 678939 Dr Jaime Vera: 01273 523087 Jenny Holmes: 01273 641229
Departmental website	www.bsms.ac.uk

Glossary

ACF	Academic Clinical Fellow
AFD	Academic Foundation Doctor
AFP	Academic Foundation Programme
AR	Academic and Research staff
AS	Athena SWAN
AUA	Association of University Administrators
BBSRC	Biotechnology and Biological Sciences Research Council
BMAT	Bio-Medical Admissions Test
BMBS	Bachelor of Medicine, Bachelor of Surgery
BSc	Bachelor of Science
BSMS	Brighton and Sussex Medical School
BSUHT	Brighton and Sussex University Hospitals NHS Trust
CISC	Clinical Imaging Sciences Centre
CPD	Continuing Professional Development
DME	Division of Medical Education
DRaKE	Director of Research and Knowledge Exchange
ECU	Equality Challenge Unit
E&D	Equality and Diversity
ERC	European Research Council
F	Female
FE	Further Education
FTE	Full-time equivalent
GMC	General Medical Council
HEKSS	Health Education (Kent, Surrey and Sussex)
HESA	Higher Education Statistics Agency
HoD	Head of Department
HR	Human Resources
HTA	Human Tissue Authority
InPulse	Weekly BSMS internal staff e-newsletter
IRP	Individual Research Project
IWD	International Women's Day (8 March)
JARB	Joint Approval and Review Board
KIT	Keeping-in-Touch Days
KSS	Kent, Surrey and Sussex [Deanery]
LETB	Local Education and Training Board
LGBT	Lesbian, Gay, Bisexual and Trans
M	Male
MD	Doctor of Medicine
MMI	Multiple Mini-Interview
MRC	Medical Research Council
MSc	Master of Science
NIHR	National Institute for Health Research
NSS	National Student Survey
NTD	Neglected Tropical Disease
PA-DA	Personal Assistant – Divisional Assistant
PCPH	Division of Primary Care and Public Health
PGCert ME	Postgraduate Certificate in Medical Education
PGR	Postgraduate Research

PGT	Postgraduate Taught
PhD	Doctor of Philosophy
PI	Principal Investigator
PST	Professional Services and Technical staff
Pulse	Biannual BSMS external comms magazine
PVC	Pro Vice Chancellor
RF	Research Fellow
SAT	Self-Assessment Team
SDU	Staff Development Unit (UoS)
SET	Science, Engineering and Technology
SG	BSMS Athena SWAN Steering Group
SHORE-C	Sussex Health Outcomes Research & Education in Cancer
SMG	School Management Group
SPT	Sussex Partnership NHS Foundation Trust
SSC	Student Selected Component, tutorial style component of each Module
STEMM	Science, Technology, Engineering, Mathematics and Medicine
TOIL	Time Off In Lieu
UG	Undergraduate
UoA	Unit of Assessment
UoB	University of Brighton
UoS	University of Sussex
WiP	Work in Progress
WP	Widening Participation

Additional word allowance

1000 additional words were kindly granted to BSMS by Kelsey Paske, Equality Charters Adviser from Athena SWAN via email on 13 July 2017. They are listed in the word count on each section and on the table on p3.

Note on tables

For ease of reading, zero values have been omitted from the more complex tables in this submission.

Staff survey – 7-point scale

Respondents answered questions on a 7-point scale (Strongly agree to strongly disagree). These have been combined into three categories (All agree, Neither agree nor disagree and All disagree) for the purpose of analysis.

Staff survey – F, M and All

The gender groups given were self-declared by the respondents. The “All respondents” group includes those who skipped the gender question or answered “prefer not to say” so this group is larger than F and M combined.

Staff totals

UoS HR data is generally provided at census date (31st March annually). Other numbers, such as staff survey or appraisal totals, are from different points in the year and may include UoB BSMS staff, so they will not always match.

Source for comparator data

Our comparator student data come from Equality in Higher Education: Statistical Report 2016 Part 2: Student published by the Equality Challenge Unit.

Our comparator staff data come from Equality in Higher Education: Statistical Report 2016 Part 1: Staff published by the Equality Challenge Unit, SET dept: clinical medicine.

Years of data

For questions that are new in the post-May 2015 process, we include the required three years of data. Where we have the data for more years (because it was collected for previous Athena SWAN processes), we include the longer timeframe.

Terminology around trans staff and students

We follow the ECU guidance on terminology for trans staff and students as found in Trans staff and students in HE and colleges: improving experiences, May 2017.

1. LETTER OF ENDORSEMENT FROM THE HEAD OF DEPARTMENT

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

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

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

Equality Charters Manager
Athena SWAN
Equality Challenge Unit
First Floor, Westminster Tower
3 Albert Embankment
London
SE1 7SP

Professor Malcolm Reed
Dean
Brighton & Sussex Medical School
Tel: +44 1273 877577
e-mail: m.reed@bsms.ac.uk

1 November 2017

Dear Equality Charters Manager,

I am delighted to write in support of this application for AS Silver.

I joined BSMS in December 2014 from Sheffield University School of Medicine which already had its Silver award and am very committed to helping BSMS achieve the same success for all its staff and students.

I chair the BSMS AS Steering Group which oversees the activities of the SAT and I present the AS updates at the School Management Group and Academic Board. I am also a mentor in our academic and research (AR) staff mentoring scheme and I personally liaise with individuals who are submitting promotion applications to provide greater support.

I see AS as a catalyst for reviewing and improving our policies and practices. In 2015, I required that all our **staff recruitment interviews are run with mixed-gender panels** and **recruitment training is mandatory** for all involved.

Since our first Bronze submission in 2013, we see positive impact from our actions for our AR staff including:

- An increase in understanding of the promotion process (p.53), and increase in the actual number of academic women applying for and achieving promotion (p. 55). This results from the **BSMS promotions workshop** that has run 4 times since 2014.
- As a result of the School restructure, **55% (11/20) leadership roles are now held by female staff**, including two Heads of Departments (HoDs) and our Undergraduate Course Lead (p.11).
- The **BSMS one-to-one mentoring scheme**, piloted in 2014/15 and funded to expand each subsequent year, has resulted in a shift from 68% of female respondents saying there were useful mentoring opportunities in 2014 to 83% in 2017 (p. 69).

We have been expanding our activities to include our Professional Services and Technical (PST) Staff. We sought their views through two years of staff survey, a focus group and a PST sub-group is part of our Inclusivity Team (SAT). This has resulted in a number of actions including: **clarification of policies** such as buddy

guidelines for new starters, information on overtime and flexible working (p. 92), and the **BSMS Café Club** (p. 83).

We now provide a **formal BSMS induction to every new member of staff** with presentations from our AS Project Officer and ECR Lead, and communicate our Inclusivity initiatives in our weekly electronic newsletter, InPulse.

We have been thinking carefully about **Inclusivity** in everything that we do for our students and staff, from promotional materials and role models, to mixed-gender interview panels and speaker invitations. This resulted in renaming our SAT AS committee to **Inclusivity Team** in December 2016 (p.16), which continues to be supported by a **BSMS AS Project Officer** and dedicated funds (£5000) to support Inclusivity initiatives (p.25).

Our staff consistently report that BSMS is a great place to work (p.96), but we acknowledge the work that needs to be done in increasing diversity, particularly for our clinical academics; supporting women at critical stages in career progression; and ensuring all staff have annual appraisals, priorities reflected in our Silver Action Plan.

I am pleased to say that our parent universities, the Universities of Sussex and Brighton, both Bronze award holders, have supported our departmental submission by providing data, advice and an internal review process.

I confirm that the information presented in this application (including qualitative and quantitative data) is an honest, accurate and true representation of the department. I fully endorse our application for Silver AS award and look forward to the continuation of the positive changes participating in this process has brought to the whole medical school community.

Kind regards

A handwritten signature in black ink, appearing to be 'M. Reed', with a large, sweeping flourish at the end.

Word count: 581

2. DESCRIPTION OF THE DEPARTMENT

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

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

BSMS, established in 2003, is a partnership between the universities of Sussex (UoS) and Brighton (UoB). Undergraduates and postgraduates are members of both universities and receive joint degrees. Student processes are led by UoB, while UoS leads for HR. Most staff (210, 183.2 FTE) are employed by UoS, with an additional 20 (12.2 FTE) employed by UoB. These UoB staff are included in BSMS AS activities, staff survey and consultations but, compliant with ECU employee definitions, are not in subsequent data tables.

BSMS facilities are dispersed with teaching and research buildings on both university campuses and in several hospitals.

In June 2015, the Dean started a staff consultation on restructuring the BSMS departments. As a result, staff are distributed into 6 departments (Figure 1) with formalised senior roles recruited to through an open application process. 11/20 leadership roles are now held by female staff (Table 1) (compared to 1/6 prior to the restructure) (SILVER ACTION 25).

Figure 1: BSMS departmental structure



Table 1: BSMS Senior Roles by department

Dean's Office	Dean	Malcolm Reed (M)
	Deputy Dean	Sube Banerjee (M)
Clinical & Experimental Medicine	Head:	Kevin Davies (M)
	Research Lead:	Pietro Ghezzi (M)
	Dep. Research Lead	Sarah Newbury (F)
	Teaching Lead:	Sumita Verma (F)
Global Health & Infection	Head:	Melanie Newport (F)
	Research Lead:	Gail Davey (F)
	Teaching Lead:	Bethany Davies (F)
Medical Education	Head:	Gordon Ferns (M)
	Research Lead:	Claire Smith (F)
	Teaching Lead:	Juliet Wright (F)
Neuroscience	Head:	Hugo Critchley (M)
	Research Lead:	Neil Harrison (M)
	Teaching Lead:	Natasha Sigala (F)
Primary Care and Public Health	Head:	Jackie Cassell (F)
	Research Lead:	Carrie Llewellyn (F)
	Teaching Lead:	Anjum Memon (M)
Professional Services and Technical Staff	Head:	Peter Pimblett-Dennis (M)
	School Manager	Pippa Robinson (F)

On 31/03/2017 (UoS census date), BSMS has a total of 210 staff (128 AR, 12 technical, 70 professional services) (Table 2).

57% (73/128) **AR staff** and 85% of PST (70/82) staff are female. This is in line with the 57% “Clinical Medicine” benchmark from ECU statistical report 2016, but masks a difference between our **clinical (medically qualified)** and non-clinical academic staff gender balance (clinical: 35% F; non-clinical: 71% F). 2016 data from the Medical Schools Council shows that UK medical schools’ gender balance for clinical staff is 28.6% F. Although we exceed this, there is more work to do in achieving gender balance in the clinical staff group (SILVER ACTION 6).

Our non-clinical staff group contains a higher percentage of F (71%) than our parent universities’ STEMM staff (UoB: 45%F, UoS: 37.5%F).

Table 2: BSMS staff gender breakdown by job grade and dept, as at census (31/03/ 2017)

	Clinical and Experimental Medicine		Global Health & Infection		Medical Education		Neuroscience		Primary Care and Public Health		Professional Services and Technical Staff		Totals as of 31 March 2017		
	F	M	F	M	F	M	F	M	F	M	F	M	F	F%	M
Clinical															
Dean								1							1
Professor (Clinical)		5	1	1		1		3	1	1			2	15%	11
Reader (Clinical)	2							2					2	50%	2
Senior Lecturer (Clinical)	2	2	1	1		3	1	2					4	33%	8
Lecturer (Clinical)		1		1		1	1						1	25%	3
Senior Teaching Fellow (Clinical)						1									1
Teaching Fellow (Clinical)					4	2							4	67%	2
Research Fellow (Clinical)	3	3	1					1					4	50%	4
Clinical total	7	11	3	3	4	8	2	9	1	1			17	35%	32
Non-clinical															
Professor (Non-clinical)	3	2	1			1	1						5	63%	3
Reader (Non-clinical)					1				1				2	100%	
Senior Lecturer (Non-clinical)	1			1	1	1	1	1		1			3	43%	4
Grade 9 - Research III	1												1	100%	
Grade 8 - Lecturer B	3		1			2	1	1	2				7	70%	3
Grade 8 - Research II	7	1	1	1				2		1	1		11	79%	3
Grade 8 - Teaching Fellow					1								1	100%	
Grade 7 - Research I	7	3		1				6	2	1	1		14	67%	7
Grade 7 - Lecturer A															
Grade 7 - Teaching Fellow			1		2	2							3	60%	2
Grade 6 - Research	2							7		1			9	90%	1
Non-clinical total	24	6	4	3	5	6	18	4	5	4			56	71%	23
AR staff total	31	17	7	6	9	14	20	13	6	5			73	57%	55
Comparator AR Staff Data													12480	53%	11090
	Clinical and Experimental Medicine		Global Health & Infection		Medical Education		Neuroscience		Primary Care and Public Health		Professional Services and Technical Staff		Totals as of 31 March 2017		
	F	M	F	M	F	M	F	M	F	M	F	M	F	F%	M
Professional Services															
Grade 10 Administrative Faculty												1			1
Grade 9 Administrative Faculty									2				2	100%	
Grade 8 Administrative Faculty									2		1		3	100%	
Grade 7 Administrative Faculty							1		1		9	2	11	85%	2
Grade 6 Clerical	1								6		2	1	9	90%	1
Grade 5 Clerical											12	2	12	86%	2
Grade 4 Clerical	1				1						14	2	16	89%	2
Grade 3 Clerical											9		9	100%	
Professional Services total	2				1		1		11		47	8	62	89%	8
Technical															
Grade 8 Technical							1				1		2	100%	
Grade 7 Technical							1	2			1		2	50%	2
Grade 6 Technical							1				1		2	100%	
Grade 5 Technical								1			1		1	50%	1
Grade 4 Technical							1					1	1	50%	1
Technical staff total							4	3			4	1	8	67%	4
PST staff total	2				1		5	3	11		51	9	70	85%	12
Comparator PST Staff Data													9595	74%	3385
All BSMS Staff	33	17	7	6	10	14	25	16	17	5	51	9	143	68%	67

Benchmark data from Equality in higher education: staff statistical report 2016 by Equality Challenge Unit, SET dept: clinical medicine.

Table 3: BSMS Student Gender Profile (Academic Year 2016/17)

	Undergraduate					Postgraduate taught					Postgraduate research				
	F		M		Total	F		M		Total	F		M		Total
	No.	%	No.	%		No.	%	No.	%		No.	%	No.	%	
BSMS	378	56%	297	44%	675	241	56%	188	44%	429	27	60%	18	40%	45
Benchmark	25170	56%	19950	44%	45120	6755	58%	4895	42%	11650	5025	57%	3715	43%	8740

In 2016/17, BSMS had 1149 students: 675 UG medical students, 429 PGT students and 45 PGR students (Table 3). There is 56% F or more in each student group, in line with the

national benchmark (Equality in Higher Education: Statistical Report 2016 Part 2: Student published by the ECU, Medicine and Dentistry).

The five-year BMBS degree course is our only UG programme. In years 1/2, students work primarily on campus and thereafter in local hospitals, community facilities and general practices. In their final year, students are based in five regional centres. NSS feedback has demonstrated consistently high levels of BSMS student satisfaction (> 90%). In 2017, overall satisfaction rating was 99%, making BSMS first amongst UK medical schools. In 2016/17, 94% of our UG students took up clinical training or clinical service posts and 6% progressed into clinical academic training after BMBS completion.

Our PGT students work in healthcare and study as part of their professional development. In 2015/16, 90% of PGT students were studying part-time, 68% were aged over 30 and 19% had Masters or Doctorate degrees. Our PGT courses cover a range of medical and healthcare topics and may be awards which can be completed full-time in one year or part-time over 2 – 4 years, or single modules as part of CPD.

Our PGR degrees (MPhil, PhD, MD) are in basic science, clinical subjects, ethics or social sciences. Over the last 4 years, 31/36 (86%) of PhD and MPhil students had first qualifications other than a medical undergraduate degree.

WORD COUNT: 516

3. THE SELF-ASSESSMENT PROCESS

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

Describe the self-assessment process. This should include:

- (i) a description of the self-assessment team
- (ii) an account of the self-assessment process
- (iii) plans for the future of the self-assessment team

Our SAT was established in 10/2012 with teaching, research and clinical, permanent and fixed-term, full-time and part-time staff. Since then, membership has expanded to include PST staff (COMPLETED BRONZE ACTION 2).

It was led by Professor Helen Smith until 2016. Following open recruitment, the Diversity Lead and Chair of the SAT is now shared between Dr Jaime Vera Rojas, a clinical Senior Lecturer, and Dr Natasha Sigala, a non-clinical Senior Lecturer. This combination of clinical and non-clinical perspective, as well as M/F lead, emphasise our ambition for the SAT to represent all staff. The role advertisement with clear duty description (workload allocation of 0.2), and the job-share outcome have been acknowledged as beacon of good practice by other schools at UoS. In 2014, budget was approved for a fixed-term BSMS AS Project Officer, whose contract has now been made permanent (COMPLETED BRONZE ACTION 9).

The Diversity Leads and Project Officer are also members of the UoB and UoS AS Committees and the E&D Forum (UoS).

To underline the importance of diversity work within BSMS, we decided to rename the SAT. A competition was launched for a name that would reflect involvement with all diversity strands and relevance to all staff and students. The suggestions received were voted on and we are now called the **Inclusivity Team**, a change marked by a presentation at the termly all-staff open meeting in 02/2017.

Inclusivity Team members self-nominate, and have a four-year-tenure (BRONZE ACTION 1).

BSMS has an AS Steering Group (SG), a sub-group of the School Management Group (SMG). It meets termly to review progress and agree the resources needed. SG composition links the operational insight of the core AS team (Diversity Co-Leads and Project Officer) with

the strategic view from the Dean and Medical School Secretary (COMPLETED BRONZE ACTION 8).

Our Inclusivity Team and SG (Table 4) comprises 11F (65%) and 6M (35%), in line with our overall staff gender balance (68%F). 30% of our staff are fixed-term and 31% are part-time. Within the Inclusivity Team, 12% are fixed-term and 24% are part-time. We will work for a more representative composition (BRONZE ACTIONS 1, 2 & 3, SILVER ACTION 1).

Table 4: Members of the BSMS Inclusivity Team and Steering Group

Name	Job Title and Department	Role type	F/M	Personal and professional profile	AS role or perspective
Khalid Ali	Senior lecturer in Geriatrics, BSMS	Clinical Academic. Permanent. Full-time.	M	Holder of NIHR grant, and PhD supervisor. He and his working wife care for 3 children	• Data analysis
Darren Beaney	Head of Admissions, Recruitment & WP	Professional Services staff. Permanent. Full-time	M	Responsible for admissions and widening participation. Married with two children.	Member of the Inclusivity Team
Gail Davey	Professor of Global Health Epidemiology, Global Health and Infection	Clinical Academic. Permanent. Full-time.	F	Holder of NIHR Award for NTD research. She and her partner jointly care for their children.	• Member of Mentoring sub-group
Julie Wilton	Communications Manager	Professional Services staff. Permanent. Part-time.	F	Responsible for internal and external communications for BSMS	Supporting communication of Inclusivity, inclusion in InPulse magazine and promotion of events
Natalie Edelman	PGR student	Non-Clinical PGR Student	F	Part-time doctoral student in sexual health at BSMS Also employed as researcher at UoB Two school-age children.	PGR student representative
Cassandra Gould van Praag	Research Fellow, Neuroscience	Non-Clinical, part-time, fixed-term	F	Joined BSMS from UoS in 2014. Early Career Researcher.	• Member of Mentoring sub-group
Jenny Holmes	Project Officer for AS, BSMS Support Services	Professional Services staff. Permanent. Part-time.	F	HR and employment research background. Two school-age daughters.	• Data collection and analysis • Member of the Steering Group, the Staff Survey and Mentoring sub-groups
Tracy Kellock	Programme Administrator for DME Postgraduate courses	Professional Services staff. Permanent. Full-time	F	Joined BSMS in January 2011. Previous background in project co-ordination and library posts	• Member of Staff Survey and PST sub-groups

Name	Job Title and Department	Role type	F/M	Personal and professional profile	AS role or perspective
Snezana Levic	Lecturer in Physiology	Non-clinical Academic staff. Permanent. Full-time.	F	Leads research projects on hearing mechanisms. She has one child.	Member of Inclusivity team Mentee
Jon Mason	Student Welfare Adviser	Professional Services staff. Permanent. Part-time.	M	Supports students with any welfare concerns.	• Member of Staff Survey and PST staff sub-groups
Peter Pimblett-Dennis	Medical School Secretary, BSMS Support Services	Professional Services staff. Permanent. Part-time.	M	Appointed Medical School Secretary in March 2002. Peter lives in Brighton with his civil partner.	Member of Steering Group
Charlotte Rae	Research Fellow, Neuroscience	Non-Clinical, fulltime, fixed-term	F	Joined BSMS in 2014. Early Career Researcher.	• Member of Career Development sub-group
Malcolm Reed	Dean	Clinical Academic. Permanent. Full-time.	M	Honorary Consultant Surgeon specialising in Oncology. Married with 2 university-age children.	Chair of Steering Group and member of SAT Mentor
Pippa Robinson	Medical School Manager, BSMS Support Services	Professional Services staff. Permanent. Full-time.	F	Joined BSMS in 2011. A single mother with flexible working arrangements to facilitate full-time work.	• Member of PST sub-group
Arianne Shahvisi	Lecturer in Ethics and Medical Humanities	Non-clinical academic. Permanent. Full-time.	F	Joined BSMS in 2015. Background in science and humanities. Lives with partner in Brighton.	• Lead of the Student sub-group
Natasha Sigala	Senior Lecturer in Neuroscience, Neuroscience	Non-clinical Academic staff. Permanent. Full-time.	F	Teaching Lead and Module leader for Neuroscience. She has two children.	• Inclusivity Co-Lead, BSMS • Co-chair, SAT • Member, Career Development sub-group
Jaime Vera	Senior Lecturer in HIV and Global Health, Global Health and Infection	Clinical Academic. Permanent. Full-time.	M	Honorary Consultant in HIV medicine. Married with 2 children.	• Inclusivity Co-Lead, BSMS • Co-chair, SAT • Member, Staff Survey sub-group • Mentee

We facilitate student involvement in different ways: as SAT members, via focus groups and gathering views through event attendance, annual feedback via E&D questions in the internal student survey. Despite this, we encounter barriers to student engagement with AS work. We are piloting a student sub-group that we expect will lead to better capture of student priorities and perspectives across the whole range of diversity strands. We will continue to monitor and review this (BRONZE ACTION 3, SILVER ACTION 2 & 17).

The Inclusivity Team and SG are supported by a number of sub-groups (Figure 2, Table 5). These allow more staff to be involved in inclusivity work, and ensure actions are responsive to the needs of each relevant staff group (COMPLETED BRONZE ACTION 5).

Figure 2: BSMS AS structure

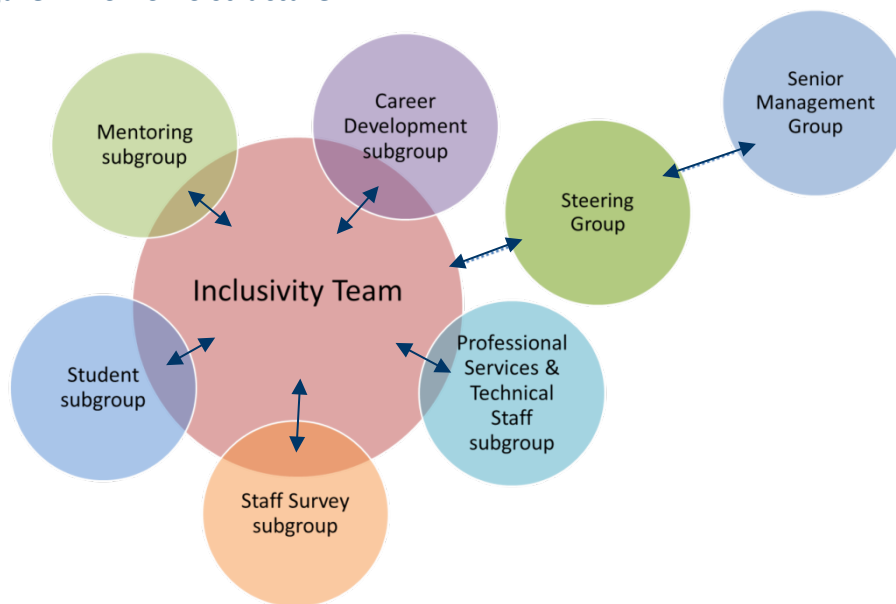


Table 5: Sub-groups with composition, meeting frequency and key responsibility

Group	Chair	Members	Meeting frequency	Key responsibility
Steering Group	Malcolm Reed, Dean	5	Termly	Oversight of all Inclusivity Team activities and budget approval
Inclusivity Team	Both Diversity Co-Leads	17	Every 6 weeks	Coordination of Inclusivity Team activities and preparation of submission
Career Development Subgroup	Natasha Sigala, Diversity Co-Lead	4	Termly	Creation of Early Career Researcher Lead post, organising of events including Promotions workshops, Career Progression Conference and Neuroscience day
Mentoring subgroup	Prof Gail Davey	3	Twice a year	Designing, coordinating and evaluating the AR staff mentoring scheme from the pilot for 6 Grade 9 AR women in 2014 to a scheme open to all AR staff at all grades in 2017/18 and on-going
Professional Services and Technical Staff subgroup	Pippa Robinson	12	Termly	Since 2016, reviewing the PST staff responses to the staff survey and delivering actions to address these such as the Networking Club and Skills Sharing Board
Staff Survey subgroup	Jaime Vera, Diversity Co-Lead	4	Twice a year	Planning, launching and analysing the annual staff survey
Student subgroup	Arianne Shahvisi	10	Termly	Launched in Sept 2017 with first meeting Oct 2017 as a better mechanism for capturing student views

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.

The group meets six-weekly at varying times and days of the week with circulation of materials a week in advance (BRONZE ACTION 4).

Our AS journey started with an all-staff survey in 2013. In 2014 we opted to use the HE Culture Survey for AR staff, which was the basis for the action plan and our successful Bronze submission in 11/2014.

The survey was repeated in summer 2015 before we applied for a Silver award in 11/2015. The feedback from our assessment panel was that “The panel commended BSMS for a good start, and noted that application showed the school to be on a good path. However, the panel considered this a premature application for silver, with more ambition, progress and impact needed to address key issues.”

We revised the staff survey in summer 2016 to include PST staff and adding new questions while keeping others to enable tracking of the impact of our actions. In 07/2017, we re-ran the staff survey and will continue annually. We believe that our high response rate is a good indication of staff engagement (Table 6) (BRONZE ACTION 32).

Table 6: Annual BSMS staff survey response rate*

Staff survey response rate

Year	Staffgroup	No of respondents	Response rate	Comment
2013	AR & PST	76	n/a	Recipient total not tracked
2014	AR	90/130	69%	Based on HE Culture survey
2015	AR	98/140	70%	Repeat of 2014 survey
2016	AR & PST	154/223	69%	Revised with new questions
2017	AR & PST	177/243	73%	Repeat of 2016 survey

*Difference in total numbers of staff with Table 2 (Total 210) is explained by different dates of census (March) and survey (July) and inclusion of UoB staff (N=20) in survey.

We consult staff and students through:

- Focus groups:
 - 2x with post-doctoral research fellows (12/2013 and 02/2014)
 - Female AR Staff (01/2015)
 - 3x with undergraduates (06/2015, 10/2017)
 - PGR students (06/2015)
 - PST staff (03/2016)
- Other surveys:
 - On-line survey of PGT students (09/2015)
 - E&D questions added to the end-of-year undergraduate survey (since 2014)
 - Post-event surveys for participants, e.g.:
 - Promotion workshops
 - BSMS Induction
- Sub-groups:
 - Mentoring
 - Career Development
 - PST Staff
 - Student

We also communicate our activities and plans to the wider school community through:

- Regular updates of BSMS Inclusivity webpages (Figure 3)
- Termly BSMS Open Meetings
- Dean's report to Academic Board (senior academic body of BSMS)
- Weekly electronic staff newsletter, InPulse

These events include Q&A sessions and feedback is sought at the end, either via paper or online questionnaires (COMPLETED BRONZE ACTION 6). All of this has led to high awareness of AS (COMPLETED BRONZE ACTION 7).

Figure 3: Screenshot of the Inclusivity Team intranet page

BSMS Inclusivity Team internal website

Welcome to the BSMS Staff Inclusivity website. This is intended to be a source of information for staff on the Athena SWAN project and wider Equality and Diversity related news and documents. If you have any questions about anything here, please contact Jenny Holmes (j.holmes@bsms.ac.uk).

Project status: Brighton and Sussex Medical School is fully committed to the Athena SWAN Charter and submitted an application for a Bronze Departmental Award on 28 November 2014. The Bronze award was granted in April 2015.

Key activities:

- Career Development and Progression**
 - Promotions workshop:** We have held a BSMS promotion workshop annually in September since 2014. Clare Mackie, PVC for Teaching and Learning, has spoken every year. Her slides are [Academic Promotions Workshop - Sept 2017.pdf](#). Each year, we have also had a personal perspective from a member of BSMS staff.
 - In 2014, Gail Davey [Promotion workshop papers \(Sept 2014\)](#)
 - In 2015, Carrie Newbury [Promotions talk 2015 CL.pdf](#)
 - In 2016, Hilda Kabe [Promotion Workshop 1 Sept 2016 Kabe.pdf](#)
 - In 2017, Sarah Newbury [Promotions workshop - Sarah Newbury.pptx](#)
- Training:** To support career development for all our staff, we are promoting opportunities available: [training for research staff](#), [teaching qualification information](#), and more general [Lifes and UoB staff development](#) opportunities.
- CV-writing workshop for funding applications:** CV-writing workshop for funding and grant applications was run by Sarah Kube in March 2015 and again in Sept 2015. Slides available here: [CV for Funding Applications.pdf](#)
- Mentoring workshop:** Professor Christine Bond from Aberdeen University ran a workshop on the role of mentoring in academic progression in May 2015. Slides are available here: [Getting on in academia Brighton workshop May 2015.pdf](#)
- Equality and Diversity & Unconscious bias training:** Online EAD training can be accessed via the UoB training site. Link: <http://brighton.ac.uk/staff/14003/eqdiv.htm> and details of how to register: <http://about.brighton.ac.uk/eqdiv/staff-development.php>

Research careers: There is lots of information available to support researchers at BSMS. The University of Sussex Research Office manages a mentoring scheme and provides many resources and training via its website: <http://www.sussex.ac.uk/staff/research/researchaff>

The University of Brighton also has many resources for Research Staff including the Early Career Researcher award being held on 21 September 2016

Policy Information:

- Induction:** Staff Induction Documents
- Maternity:** [Maternity](#)
- Meeting times policy:** [BSMS meeting times guidelines updated Sept 2014.pdf](#)
- Ethics statement:** [BSMS Equality and Diversity statement.docx](#)
- Inappropriate behaviour guidance:** [Inappropriate Behaviour in the Workplace FINAL.docx](#)
- Tax exemption for childcare costs:** [Tax exemption for childcare costs incurred while undertaking work-related training - The Athena Forum have published a statement confirming that researchers attending conferences and research visits meet the definition of 'work related training' set out by HMRC and childcare costs incurred as a result of the activity are exempt from tax. Read the full statement on the Athena Forum website. Guidance on how to claim this tax relief is available at the following site: <http://www.gov.uk/tax-relief-for-employees/childcare>. It is either done via an individual tax return \(if the person already does one\) or by using form P47.](#)

Unconscious bias resources:

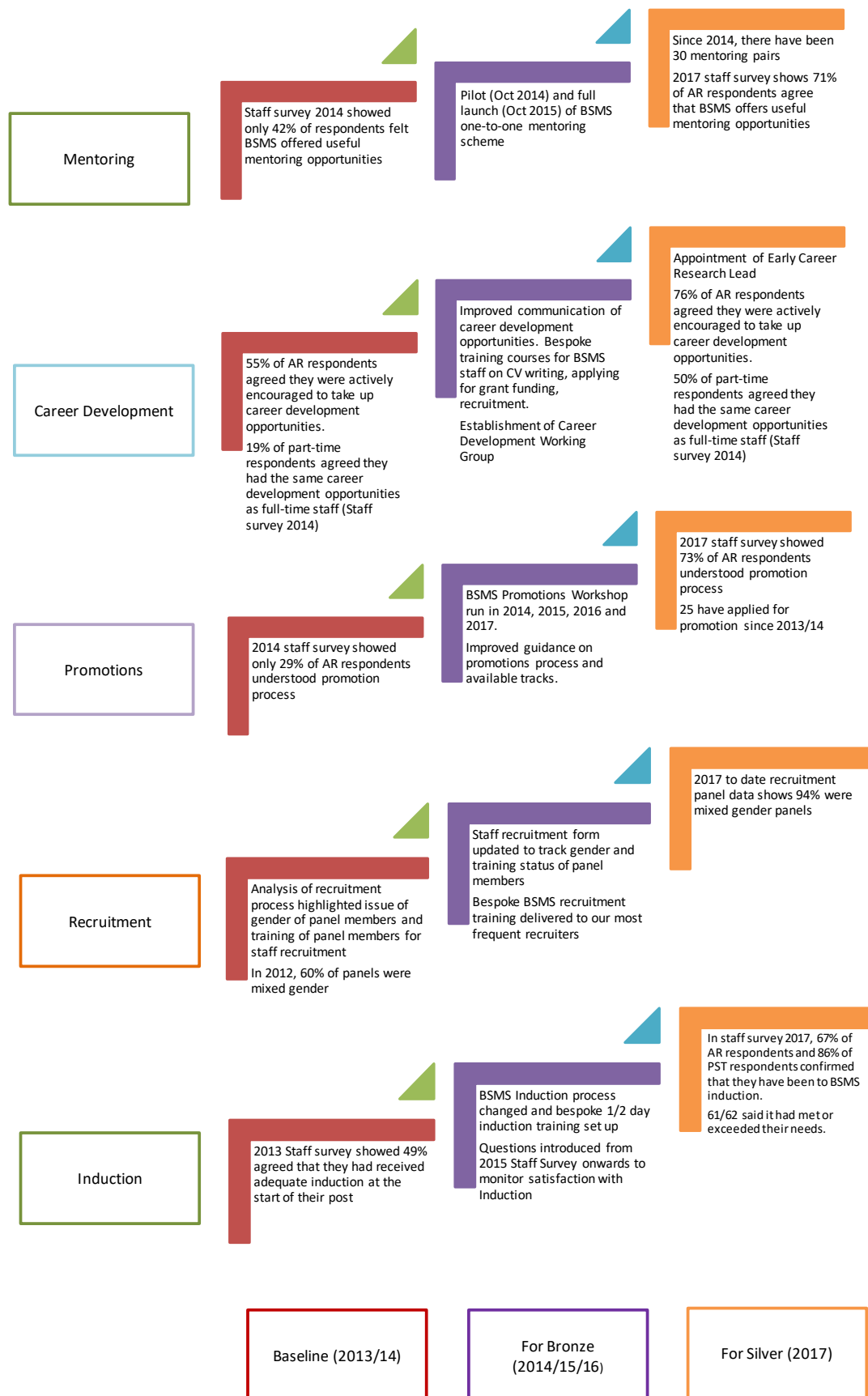
- Royal College of Surgeons guide to avoiding unconscious bias:** [avoiding_unconscious_bias_web.pdf](#)
- The Royal Society 2-minute film on Unconscious Bias:** <https://royalsociety.org/topics-policy/publications/2015/unconscious-bias/>
- Harvard Implicit Association Tests -** a resource to help you test your own biases: <http://implicit.harvard.edu/implicit/takeatest.html>
- BBC article on the validity of IAT with a link to a player of a more in-depth programme on the same topic:** <http://www.bbc.co.uk/news/magazine-40124783>
- Google -** blog post on bias including a 4-minute film and the explanation of why up to 16% of early YouTube videos were posted upside down: <https://googleblog.blogspot.co.uk/2014/09/you-dont-know-what-you-dont-know-how.html>
- BBC resource on Unconscious Bias as part of #100women2015:** <http://www.bbc.co.uk/news/science-environment-24919504>
- ECU literature review and training pack on unconscious bias in HE:** <http://www.ecu.ac.uk/guidance-resources/employment-and-careers/staff-recruitment/unconscious-bias/>
- Unconscious Bias in Doctors:** Green et al, [Implicit Bias among Physicians and](#)

Timeline (2):

Date	Event
September 2017	Separations of interest from BSMS mentees and mentors requested. Deadline: 30 October 2017
Mid October 2017	Fairings made by mid October
11 October 2017	Training for mentors and mentees
November 2017 onwards	Mentor pairs to start meeting after the training

Figure 4 shows our key areas of focus and progress since 2013.

Figure 4: An overview of the self-assessment process and our achievements since Bronze



Our submission was reviewed by the UoS HR Assistant Director, a UoB assessment panel and 2 critical friends: Dr Bowater, Norwich Medical School, and Dr Murphy, MRC Cognition and Brain Sciences Unit.

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.

SAT and sub-groups will continue to meet at current intervals (BRONZE ACTION 10, SILVER ACTION 5).

Terms of reference will expand in 2018 with a focus on **intersectionality**, including the formation of an ethnicity sub-group in 2018 and a disability sub-group in 2019 (SILVER ACTION 3 & 4).

Investment will continue in the BSMS AS Project Officer, and budget (£5000) to support Inclusivity team activities (BRONZE ACTION 9).

Word count: 935 words

4. A PICTURE OF THE DEPARTMENT

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

4.1. STUDENT DATA

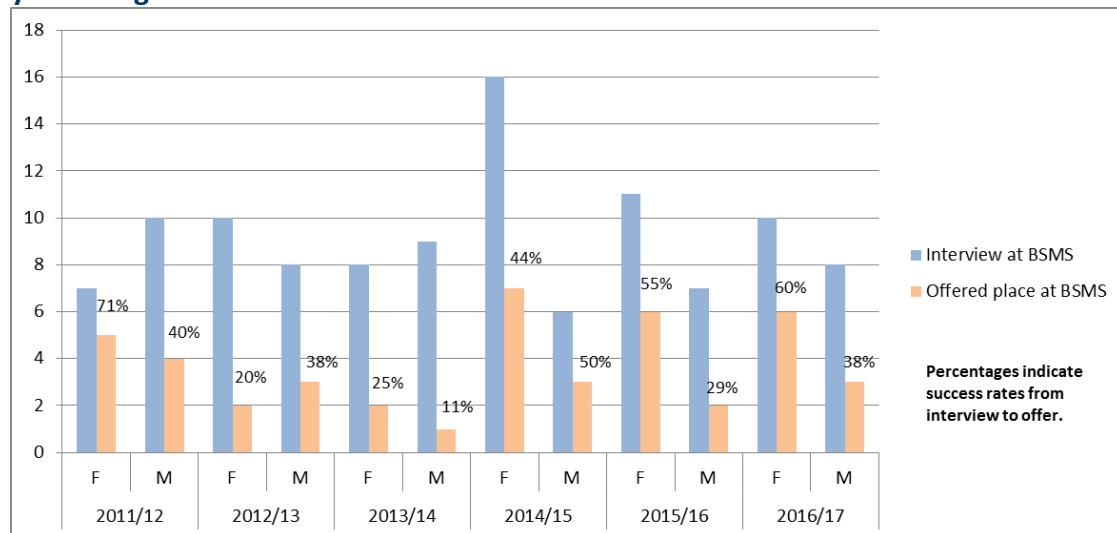
If courses in the categories below do not exist, please enter n/a.

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

BSMS assisted Sussex Downs College develop an access course. Students predicted distinction are offered BSMS interview.

Despite fluctuating numbers, females do better than males converting their interviews to offers (Figure 5).

Figure 5: Numbers of Sussex Downs (access) students interviewed and offered by year and gender



(ii) Numbers of undergraduate students by gender

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

Table 7: Numbers of undergraduate students by year and gender

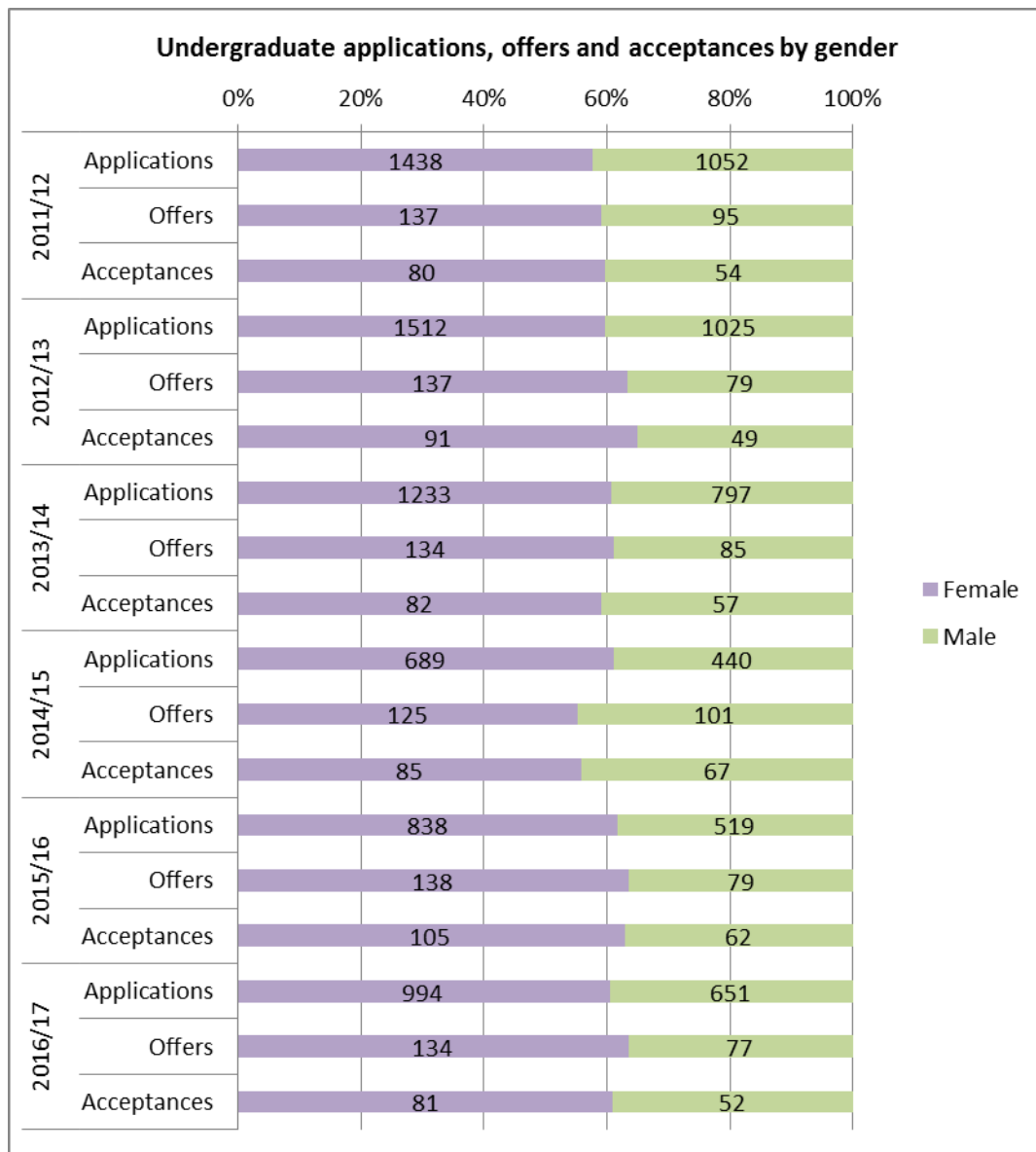
Academic Year	Female		Male		Total
	No.	%	No.	%	
2011/12	418	59%	287	41%	705
2012/13	409	57%	306	43%	715
2013/14	393	58%	279	42%	672
2014/15	394	60%	260	40%	654
2015/16	385	58%	281	42%	666
2016/17	378	56%	297	44%	675
Benchmark	25170	56%	19950	44%	45120

Female students have ranged from 56% to 60% slightly exceeding the national figure of 55.8% female for Medicine and Dentistry (Table 7), but in line with higher application rates by female candidates (Figure 6). We will continue to monitor student data and conduct our admission interviews in a fair and balanced way aiming to match the benchmark (COMPLETED BRONZE ACTION 22/ SILVER ACTION 5). All undergraduates study full-time due to the requirement for currency of knowledge. However, we provide special arrangements for students with serious illness or pregnancy, for example, a student with morning sickness during the exam period was allowed to sit her exams in the afternoons, or to take them in the resit period as a first attempt.

Since our Bronze submission in 2014, we have sought to better understand the female undergraduate experience. We have conducted separate focus groups (COMPLETED BRONZE ACTION 11) with females in Phase 1 (campus-based) and Phases 2 & 3 (hospital-based) which have resulted in specific initiatives:

- more proactive process for understanding the requirements of our student parents, particularly in relation to placements
- more focused career advice programme
- clearer guidance on bullying and harassment and inappropriate behaviour (COMPLETED BRONZE ACTION 12)

Figure 6: Undergraduate applications, offers and acceptances by year and gender



The proportion of females progressing from application, to offer, to acceptance is broadly consistent (Figure 6). This proportion slightly exceeds the benchmark for students. We will hold a focus group with our M students to better understand their experience of applying to the school (SILVER ACTION 27).

The Admissions Team removed the use of personal statements in the first stage of undergraduate selection as they were liable to unconscious bias. The BMAT test was introduced in 2014/15 as the scoring is more transparent. The number of applicants interviewed and subsequently offered a place remained the same and there was no impact on the gender balance (COMPLETED BRONZE ACTION 35).

In 2016/17, further changes were made to the selection and interview process to include multiple mini-interviews (MMI), which consist of five 10' discussions each with one or two assessors (Table 9).

There has been no change in gender balance in the UG cohort following this change of process.

The BSMS staff, students and NHS staff who form our admission interview panels receive training that highlights our School ethos and the importance of probing for evidence, while being aware of biases.

We achieved our action for mixed-gender interview panels in 2014/15 (Table 8) (COMPLETED BRONZE ACTION 22). The MMI process means this is no longer relevant so we are instead monitoring the overall balance of interviewer gender (Table 9).

Table 8: Numbers of undergraduate interview panels by year and gender of panellists

	Total number of ug interview panels	Mixed gender panels (2M1F or 2F1M)		All M panels		All F panels	
		Number	%	Number	%	Number	%
2013/14	99	87	88%	10	10%	2	2%
2014/15	103	103	100%	0	0%	0	0%
2015/16	101	101	100%	0	0%	0	0%

Table 9: Numbers of undergraduate interview panels by year and gender of panellists

2016/17 Undergraduate interviewer profile

By number of interviewers		
	No	%
F	64	53%
M	57	47%
Total	121	

Prior to Bronze submission, the ratio of female to male interviewers was 40:60 and 1/3 of undergraduate interviews were on Saturdays making it more difficult for staff with families to participate. Now, with one exception for students who cannot attend during the week, interviews are on weekdays enabling more staff to participate.

Attainment rates for the BMBS degree are similar for both genders (F average 98%, M 97%) (Table 10).

Table 10: Undergraduate degree outcomes

UG degree awards by gender	BM BS degree				Other outcome*:			
	F		M		F		M	
	No.	%	No.	%	No.	%	No.	%
2012/13	92	98%	65	97%	2	2%	2	3%
2013/14	75	96%	56	98%	3	4%	1	2%
2014/15	68	97%	41	98%	2	3%	1	2%
2015/16	84	98%	44	96%	2	2%	2	4%
2016/17	63	100%	61	98%	0	0%	1	2%
5 years combined	382	98%	267	97%	9	2%	7	3%

*Other possible outcomes include Exit Award (BSc Medical Science), Deceased, Repeat Yr5

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

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

Nationally, 58% of students on PGT courses in Medicine and Dentistry are female.

Our female intake varies around the benchmark but there continue to be differences between PGT courses with the proportions of females in 2016/17 ranging from 30% to 100% (Table 11).

Table 11: Postgraduate taught students by course, gender and year

No. of PGT students enrolled		2013/14				2014/15				2015/16				2016/17							
		F		M		F		M		F		M		F		M					
Course	PT/FT*	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%				
Anaesthesia and Perioperative Medicine	PT	11	69%	5	31%	6	75%	2	25%	4	57%	3	43%	5	63%	3	38%				
Cardiology	FT & PT	5	33%	10	67%	5	42%	7	58%	7	50%	7	50%	3	30%	7	70%				
Dementia Studies	FT & PT	12	71%	5	29%	8	57%	6	43%	5	42%	7	58%	20	77%	6	23%				
Leadership and Commissioning	FT & PT	3	75%	1	25%	4	67%	2	33%	2	67%	1	33%	9	64%	5	36%				
Medical Education	PT	9	47%	10	53%	10	50%	10	50%	9	38%	15	63%	18	62%	11	38%				
Medical Research	FT & PT	1	50%	1	50%	4	100%		0%	1	20%	4	80%	1	33%	2	67%				
Psychiatry	PT	2	29%	5	71%	3	60%	2	40%	0	0%	0	0%	6	75%	2	25%				
Public Health	FT & PT	10	67%	5	33%	7	70%	3	30%	9	75%	3	25%	7	88%	1	13%				
Simulation	FT & PT										0%	1	100%	5	42%	7	58%				
Global Health	FT & PT	10	77%	3	23%	7	64%	4	36%	14	82%	3	18%	18	82%	4	18%				
Clinical Radiology	FT & PT													11	37%	19	63%				
Paediatrics and Child Health	FT & PT													7	50%	7	50%				
Diabetes in Primary Care	FT & PT													1	100%		0%				
Clinical Physician Associate Studies	FT & PT													6	67%	3	33%				
Totals		63	58%	45	42%	54	60%	36	40%	51	54%	44	46%	117	60%	77	40%				
Comparator: PGT students in Medicine & Dentistry. Source: Equality in higher education: students statistical report 2016 by ECU														58%				42%			

Comparator: PGT students in Medicine & Dentistry. Source: Equality in higher education: students statistical report 2016 by ECU

58%

42%

*PT = part-time, FT = full-time

These disparities appear to arise because of gender imbalance in the clinical workforce from which these students come (Table 12). We cannot influence NHS recruitment but are pleased that our F% is higher in most cases than the pool suggesting that we may be succeeding in improving the pipeline from which our clinical academic staff come. We ensure that our marketing materials and modes of provision are appealing to a diverse audience (Figures 7, 8) (COMPLETED BRONZE ACTION 36).

Table 12: PGT student enrolment by gender compared to HEKSS Trainee Pool in that specialty

	PGT students enrolled at BSMS				HEKSS Trainee Pool	
	2014/15				October 2015	
	F		M		F	M
Course/Specialty	No.	%	No.	%	%	%
Anaesthesia	6	75%	2	25%	46%	54%
Cardiology	5	42%	7	58%	13%	88%
Psychiatry	3	60%	2	40%	49%	51%
Public Health	7	70%	3	30%	67%	33%
Total in year/trainee pool	54	60%	36	40%	53%	47%
	2016/17				October 2017	
	F		M		F	M
	No.	%	No.	%	%	%
Anaesthesia	5	63%	3	38%	39%	61%
Cardiology	3	30%	7	70%	24%	76%
Psychiatry	6	75%	2	25%	58%	42%
Clinical Radiology	11	37%	19	63%	52%	48%
Total in year/trainee pool	117	60%	77	40%	43%	57%

HEKSS = Health Education Kent, Surrey and Sussex, our Local Education and Training Board

Figure 7 Example pages from our undergraduate prospectus

What BSMS offers you



Early clinical experience
Our integrated degree combines academic knowledge and clinical experience from Year 1. Students visit GP surgeries or clinics in hospitals from the first week of the course. This builds their confidence and communication skills with patients and other healthcare staff.



Cadaveric dissection
Cadaveric dissection is a key part of the degree from Year 1, giving you a real understanding of human anatomy. This will enhance your learning experience, while developing professionalism, skills and respect for the anatomical donor.



BSMS students as researchers
Research features significantly in the curriculum to ensure your decision-making is informed by up-to-date clinical evidence. You will have the opportunity to engage in primary research, including applying for a summer studentship. All Year 4 students take up an Individual Research Project. We also encourage students to participate in local, national and international research and publish where possible.



Small group sizes
BSMS students benefit from being taught in small groups. This allows for a close, friendly learning environment, where students get to know staff and fellow students well.



Very satisfied students
BSMS achieved a score of 95% student satisfaction in the 2016 National Student Survey, putting us among the top UK medical schools.

The benefit of two universities in the same city
BSMS students are students of both the Universities of Brighton and Sussex and have equal access to the academic and recreational facilities of each. Both university campuses are next to one another.

Entry requirements
A-levels: A grades in three subjects, including Biology and Chemistry.
Scottish Highers: 370 points from 18 units with both Biology and Chemistry at minimum Advanced Higher A grade.
International Baccalaureate: 34 points with both Biology and Chemistry at minimum grade 6 at Higher level.
There are the essential academic entry requirements, see page 26 for more details.
(BSMS requires all UK/EU applicants to sit the BioMedical Admissions Test (BMAT))

University of Brighton
US
University of Sussex

Figure 8 Example pages from our postgraduate prospectus

World-class education

At BSMS we place the quality of the student's learning experience at the heart of all our activities, in an environment which is intellectually challenging and enjoyable for a diverse body of students and staff.

We deliver an exciting, relevant, balanced and well-taught range of postgraduate courses which emphasise the importance of research, both to inform teaching and also as a key skill for students.

Subject leadership is offered by professionals of the highest academic calibre, supported by a wide selection of high-quality speakers who are leading experts in their fields. BSMS is characterised by outstanding personal support for students and a commitment to listen and respond positively to student feedback.


Ensuring equality and diversity

At BSMS we are committed to a value-based curriculum, both inside and outside the classroom. We believe that all people involved with our school should feel welcome and respected, and be valued for the positive contributions they can make.

The school has a commitment to equality and diversity, including protected characteristics such as sex, race, disability, religion and belief, age, gender reassignment, pregnancy and maternity, marriage and civil partnership and sexual orientation.

BSMS strives to provide a higher education environment that is intellectually challenging and enjoyable for a diverse body of students and staff, underpinned by a relationship of mutual respect.

We believe that, as a result, we are helping equip students to provide best medical practice in a complex and changing healthcare system.

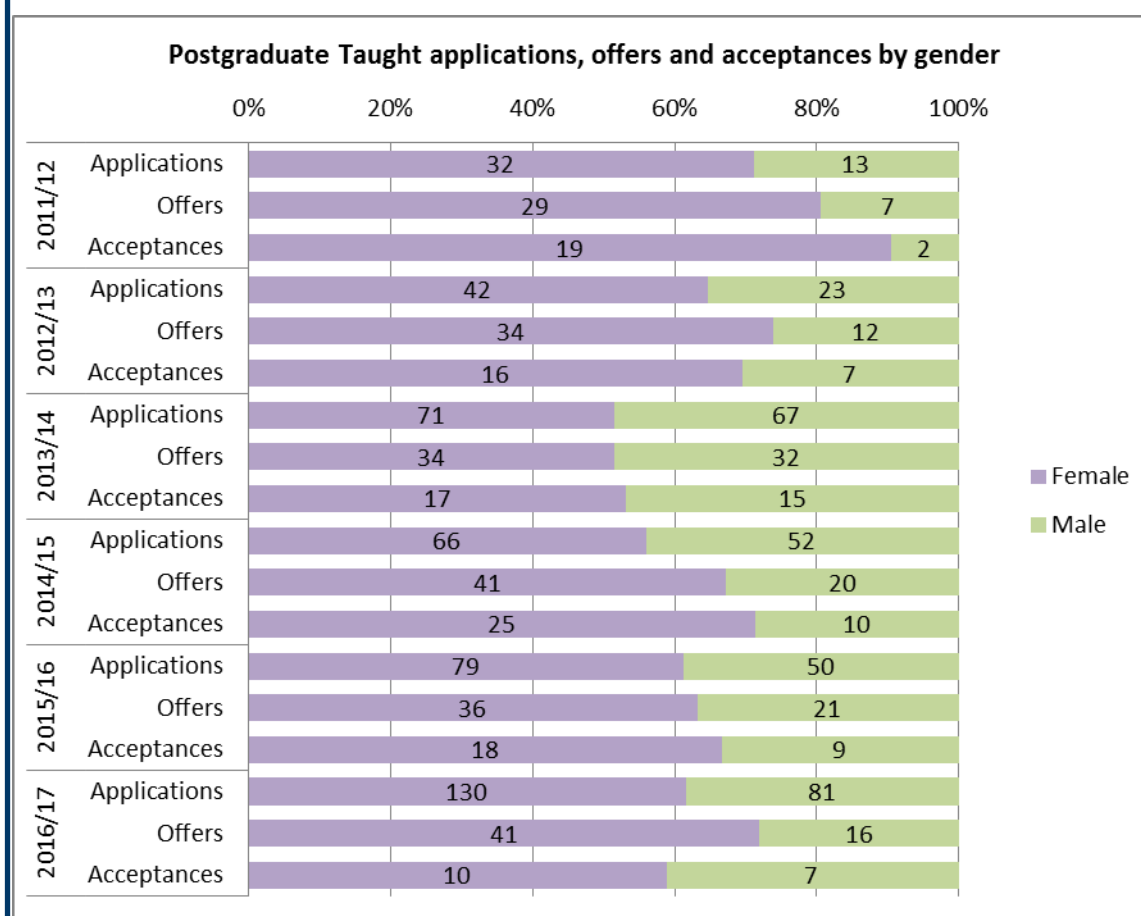


To better understand our PGT students' experience, we organised an on-line survey in 2015. The response rate was 18% (53/295), 72% respondents were female, 87% studying part-time and 65% employer-funded. While the low response rate is disappointing, it is in line with other surveys such as the UoB PGT Experience Survey 2016 where the BSMS PGT response rate was 16%. Students were asked whether they perceived any difference in their experience resulting from their gender with respect to five stages of their course. Most students reported not encountering any differences (>94% of respondents). We invited explanations of negative experiences but this yielded very limited data (Table 13). We will work with the teaching team to devise better ways to understand their students' experience (SILVER ACTION 24).

Table 13: Female & male PGT student survey response summary

Stage in the PGT student experience	Did you perceive any differences in your experience at this stage which you think are related to your gender identity?		Explanations given
	Yes		
	Number	%	
Before coming to BSMS	1	2%	None provided
Applying to and starting	2	4%	"But difficult to say as I don't know what happened to the men!"
Studying and research	3	6%	"Felt left out from the research team as staff while pregnant and after returning from maternity leave"
Support at BSMS	0	0%	Not applicable (no respondent said yes)
Culture at BSMS	1	2%	"My colleagues (who were male) all made an effort to improve their language when I was there and this was clearly related to my gender. However this made me feel more comfortable and welcome because they were making an effort not to make me feel uncomfortable "

Figure 9: PGT applications, offers and acceptances by year and gender



The number of PGT students applying has been rising over the last 6 years reflecting an increase in the number and quality of courses offered. We have had more female applicants than male and, in most years, women were more successful than their male counterparts at receiving offers (Figure 9). We will work with the PGT admissions team to understand why M applicants are less successful (SILVER ACTION 24).

Table 14: PGT degree attainment by year and gender

Awards* by course and year	2013/14			2014/15			2015/16			2016/17		
Course	F	F%	M	F	F%	M	F	F%	M	F	F%	M
Anaesthesia	1	100%		3	100%		1	50%	1	1	33%	2
Cardiology	2	67%	1	4	50%	4				2	50%	2
Commissioning & Leadership	5	71%	2	3	100%		3	75%	1	1	50%	1
Dementia Studies							6	60%	4	7	50%	7
Global Health	9	75%	3	4	50%	4	11	85%	2	14	78%	4
Medical Education	6	86%	1	9	56%	7	9	53%	8	20	67%	10
Medical Research (MRes)	1	25%	3	1	25%	3	1	50%	1	3	100%	
Public Health	14	88%	2	14	93%	1	8	73%	3	7	78%	2
Healthcare Leadership										3	75%	1
Clinical Radiology										1	50%	1
Clinical Education												1
Simulation										4		3
TOTALS	58	72%	23	46	64%	26	39	66%	20	63	65%	34

*Awards are PG Cert, PG Diploma and MA/MSc

BSMS has no apparent gender differences in degree attainment for PGT students (Table 14).

iv) Numbers of men and women on postgraduate research degrees

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

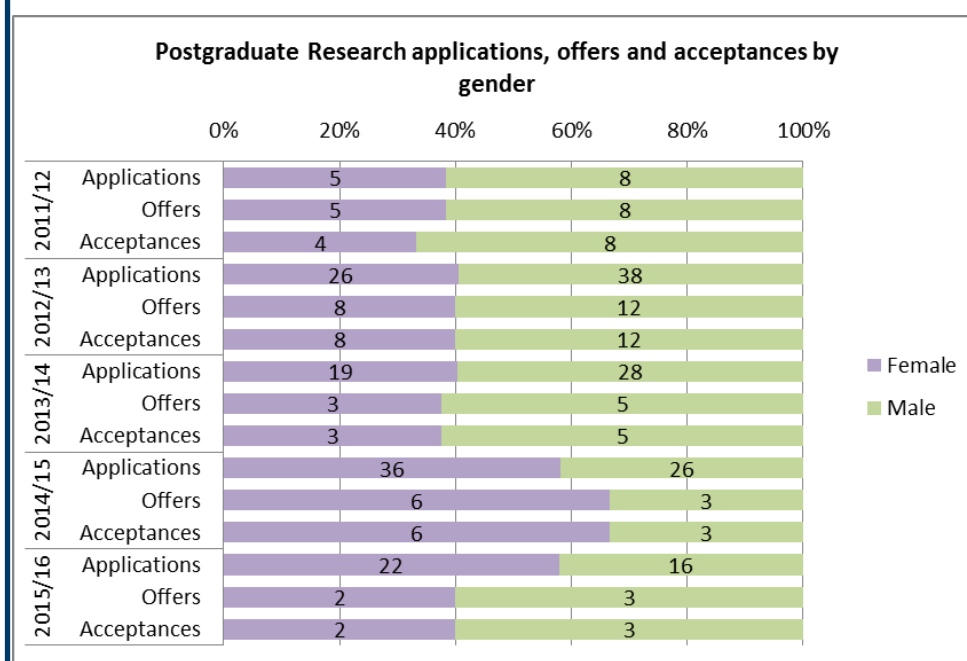
Table 15: PGR students on research degrees by year and gender

	PT MPHIL/PHD					FT MPHIL/PHD					PT MD					FT MD					Total students														
	Female		Male		Total	Female		Male		Total	Female		Male		Total	Female		Male		Total	Female		Male		Total										
	No.	%	No.	%		No.	%	No.	%		No.	%	No.	%		No.	%	No.	%		No.	%	No.	%											
2011/12						4	80%	1	20%	5						1	33%	2	67%	3	5	63%	3	38%	8										
2012/13						3	43%	4	57%	7	1	50%	1	50%	2			2	100%	2	4	36%	7	64%	11										
2013/14	1	100%			1	5	33%	10	67%	15			2	100%	2	2	100%			2	8	40%	12	60%	20										
2014/15						6	75%	2	25%	8			1	100%	1						6	67%	3	33%	9										
2015/16			1	100%	1	6	75%	2	25%	8	1	100%			1	3	60%	2	40%	5	10	67%	5	33%	15										
2016/17	1				1			2	100%	2	1	100%			1						2	50%	2	50%	4										
Comparator: Research postgraduate students in Medicine and Dentistry																														57.5%		42.5%			

Source: Equality in higher education: students statistical report 2016 by Equality Challenge Unit

PGRs can study for an MPhil, PhD or MD. The number of studentships varies each year ranging between 4 and 20 over the last 6 years (Table 15). The increase in 2013/14 was due to a number of extra studentships to mark the 10th anniversary of BSMS. As the number of students recruited each year is small, making it difficult to comment on gender balance, we have combined the last 6 years' data. Over this timeframe, we have had 67 students with 35 (52%) of them female, in line with the benchmark of 57.5%.

Figure 10: Postgraduate Research applications, offers and acceptances by gender



In three of the last five years, the proportion of females progressing from PGR degree applications to offers is broadly constant (Figure 10). Since 2012/13, we have seen no attrition between offer and acceptance. These data are monitored annually by the Director of Doctoral Studies.

All applicants undergo a three-person panel interview. Our preparatory work for Bronze AS in 2014 identified frequent use of single-gender recruitment panels. In response, the Director of Doctoral Studies requested supervisors use mixed-gender panels. This has been achieved with 100% of PGR students interviewed by a mixed-gender panel (Table 16) (COMPLETED BRONZE ACTION 23).

Table 16: PGR students interviewed with gender of panel

	PGR students interviewed							
	2013/14		2014/15		2015/16		2016/17	
	Number	%	Number	%	Number	%	Number	%
By all M panel	8	25%	2	8%	1	7%	0	0%
By all F panel	0	0%	0	0%	0	0%	0	0%
By mixed panel	24	75%	24	92%	13	93%	19	100%

Table 17: Awards to Postgraduate Research Students by gender, 2012-2017

	2011/12		2012/13		2013/14		2014/15		2015/16		2016/17	
	F	M	F	M	F	M	F	M	F	M	F	M
PT MPHIL/PHD				1					2			
FT MPHIL/PHD	3	2	3	3	3	1	3	3	7	4		2
PT MD									1	1		
FT MD			1			1			1			
TOTAL STUDENTS	3	2	4	4	3	2	3	3	11	5	0	2

	6-year period combined				
	Female		Male		Total
	No.	%	No.	%	
PT MPHIL/PHD	2	67%	1	33%	3
FT MPHIL/PHD	19	56%	15	44%	34
PT MD	1	50%	1	50%	2
FT MD	2	67%	1	33%	3
TOTAL STUDENTS	24	57%	18	43%	42

The numbers of PGR degrees attained broadly mirrors the proportion of female and male students (Table 17).

(v) Progression pipeline between undergraduate and postgraduate student levels

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

Medicine is not a direct pipeline from undergraduate to postgraduate studies. The majority of our UG students leave after their BMBS degree to go into further medical training (Table 18). Some of these graduates return as Academic Clinical Fellows or for other PGT and PGR qualifications. Conversely, many of our PGT and PGR students come from a general science background rather than a medical first degree.

Table 18: UG Students' destinations after BMBS

	2014/15		2015/16		2016/17	
Students:	No	%	No	%	No	%
on Clinical Training or Service posts	100	89%	120	89%	118	94%
on Academic posts	5	4%	14	10%	8	6%
on job overseas	4	4%	0	0%	0	0%
not applying for Foundation Programme	3	3%	1	1%	0	0%
Total student number	112		135		126	

We encourage our undergraduates to consider further opportunities with a number of career guidance activities, starting in Week 1 and including an annual Careers Fair event, which showcases different clinical specialties and academic medicine as career options. These events are open to all UG students and are well-attended. The Inclusivity team also attend these events to communicate our mission, and take the opportunity to canvass students' views and experiences of the School.

Better career advice was an action from our 2015 focus groups with female UG students (BRONZE ACTION 12). This has been delivered by the Careers Fair but also further career information sessions delivered through the curriculum team and a Speed-Dating-style Careers event which the Inclusivity Team organised in IWD week in 2015 (Figure 11). This was an event with 14 invited doctors from a variety of specialisms as well as academic medicine.

Figure 11: Students and academics at the Career “Speed dating” Networking event held for IWD in 2015

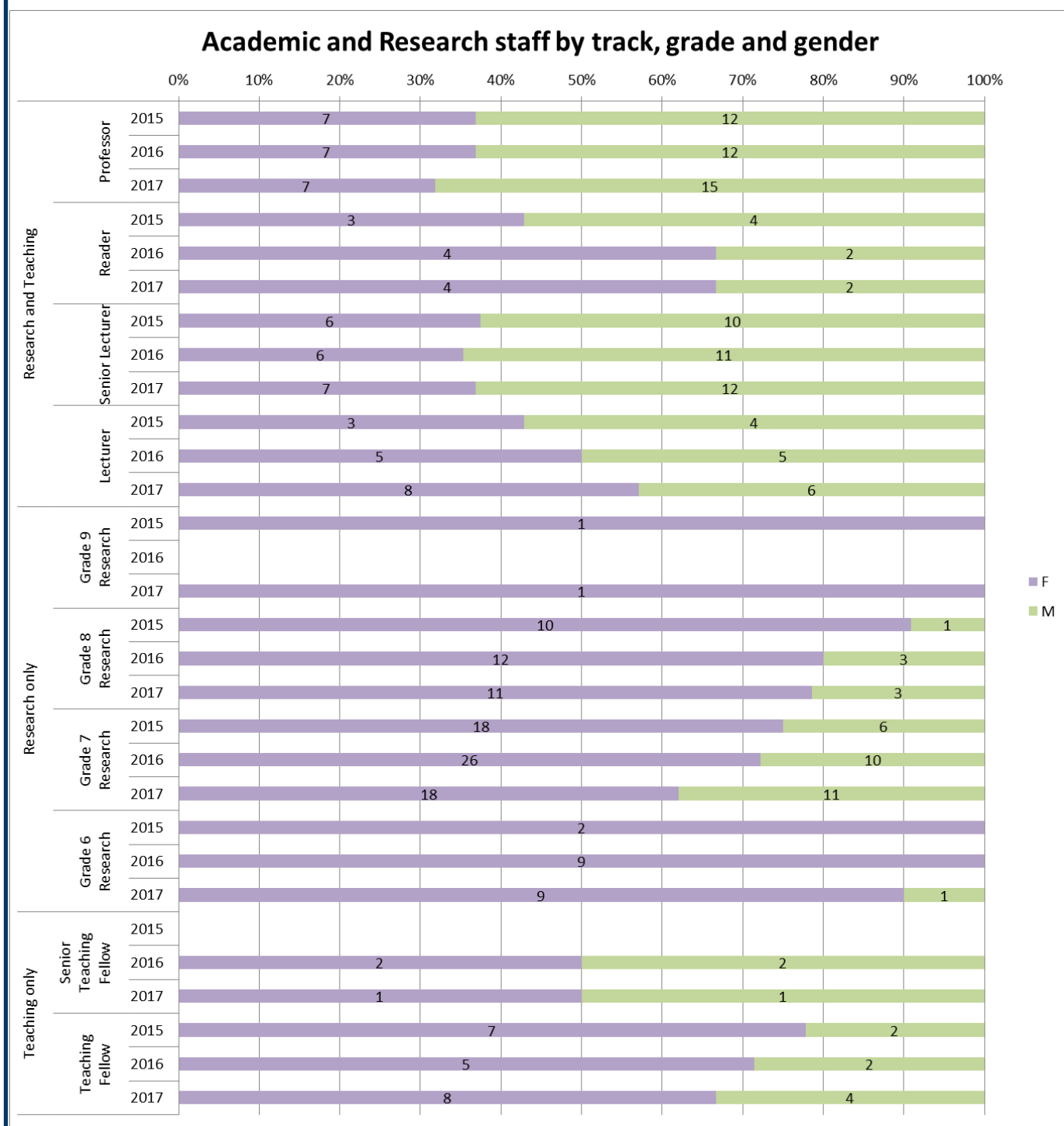


4.2. ACADEMIC AND RESEARCH STAFF DATA

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

Look at the career pipeline and comment on and explain any differences between men and women. Identify any gender issues in the pipeline at particular grades/job type/academic contract type.

Figure 12: Academic and research staff by gender and track



We provide the breakdown of our staff into teaching-only, research-only and teaching and research and note that the level of F staff in research and teaching is lower than in research-only (Figure 12). Within research-only, particularly at Grade 6, we note that there are very few M staff (ACTION SILVER 29).

In the context of BSMS, the more relevant categorisation is between clinical and non-clinical, provided below (Table 19).

The career pathways of clinical (n=49) and non-clinical (n=79) academic staff are very different and we have presented the data separately to highlight our gender imbalances and 'leaky pipelines' (Table 19 and Figures 13 and 14).

Table 19: Academic and research staff by gender and track (as of 31 March of each year)

	2012			2013			2014			2015			2016			2017		
	F	F%	M	F	F%	M	F	F%	M	F	F%	M	F	F%	M	F	F%	M
Clinical																		
Professor (Clinical)	3	25%	9	3	21%	11	3	23%	10	3	23%	11	3	23%	10	2	14%	12
Reader (Clinical)	1	100%		1	33%	2			3		0%	3	1	33%	2	2	50%	2
Senior Lecturer (Clinical)	5	33%	10	5	33%	10	4	33%	8	4	36%	7	3	27%	8	4	33%	8
Lecturer (Clinical)	1	50%	1	1	100%								1	50%	1	1	25%	3
Senior Teaching Fellow (Clinical)													2	50%	2			1
Teaching Fellow (Clinical)	2	67%	1	2	67%	1	2	50%	2	3	60%	2	2	50%	2	4	67%	2
Research Fellow (Clinical)	1	100%		3	100%		4	67%	2	5	71%	2	5	50%	5	4	50%	4
Clinical total	13	38%	21	15	38%	24	13	34%	25	15	38%	25	17	36%	30	17	35%	32
Non-clinical																		
Professor (Non-clinical)	3	60%	2	3	75%	1	4	80%	1	4	80%	1	4	67%	2	5	63%	3
Reader (Non-clinical)	1	100%		1	100%		2	67%	1	3	75%	1	3	100%		2	100%	
Senior Lecturer (Non-clinical)	3	50%	3	4	67%	2	3	60%	2	2	40%	3	3	50%	3	3	43%	4
Grade 9 - Research III	1	100%		1	100%		1	100%		1	100%					1	100%	
Grade 8 - Lecturer B	3	43%	4	1	17%	5			4		0%	4	4	50%	4	7	70%	3
Grade 8 - Research II	6	86%	1	7	78%	2	11	92%	1	10	91%	1	12	80%	3	11	79%	3
Grade 8 - Teaching Fellow	3	75%	1	1	50%	1	2	100%		2	100%		1	100%		1	100%	
Grade 7 - Research I	13	87%	2	16	89%	2	11	73%	4	13	76%	4	21	81%	5	14	67%	7
Grade 7 - Lecturer A				1	100%					3	100%							
Grade 7 - Teaching Fellow				1	100%					2	100%		2	100%		3	60%	2
Grade 6 - Research	1	100%					1	100%		2	100%		9	100%		9	90%	1
Non-clinical total	34	72%	13	36	73%	13	35	73%	13	42	75%	14	59	78%	17	56	71%	23
Overall gender balance	47	58%	34	51	58%	37	48	56%	38	57	59%	39	76	62%	47	73	57%	55
Total Academic and Research Staff	81			88			86			96			123			128		

Figure 13: Clinical academic and research staff by gender and grade

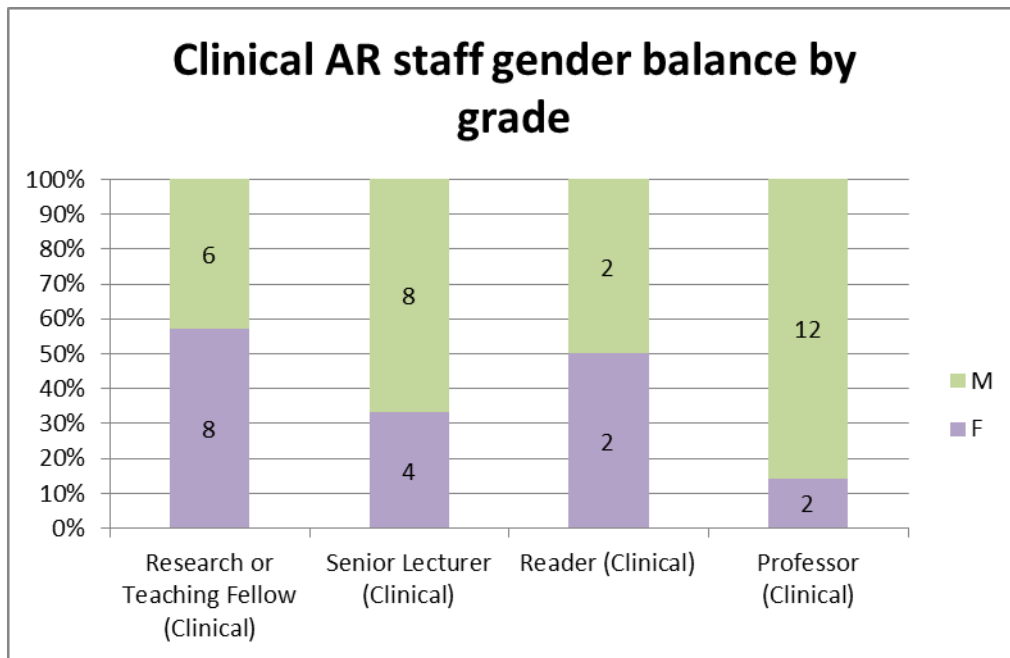
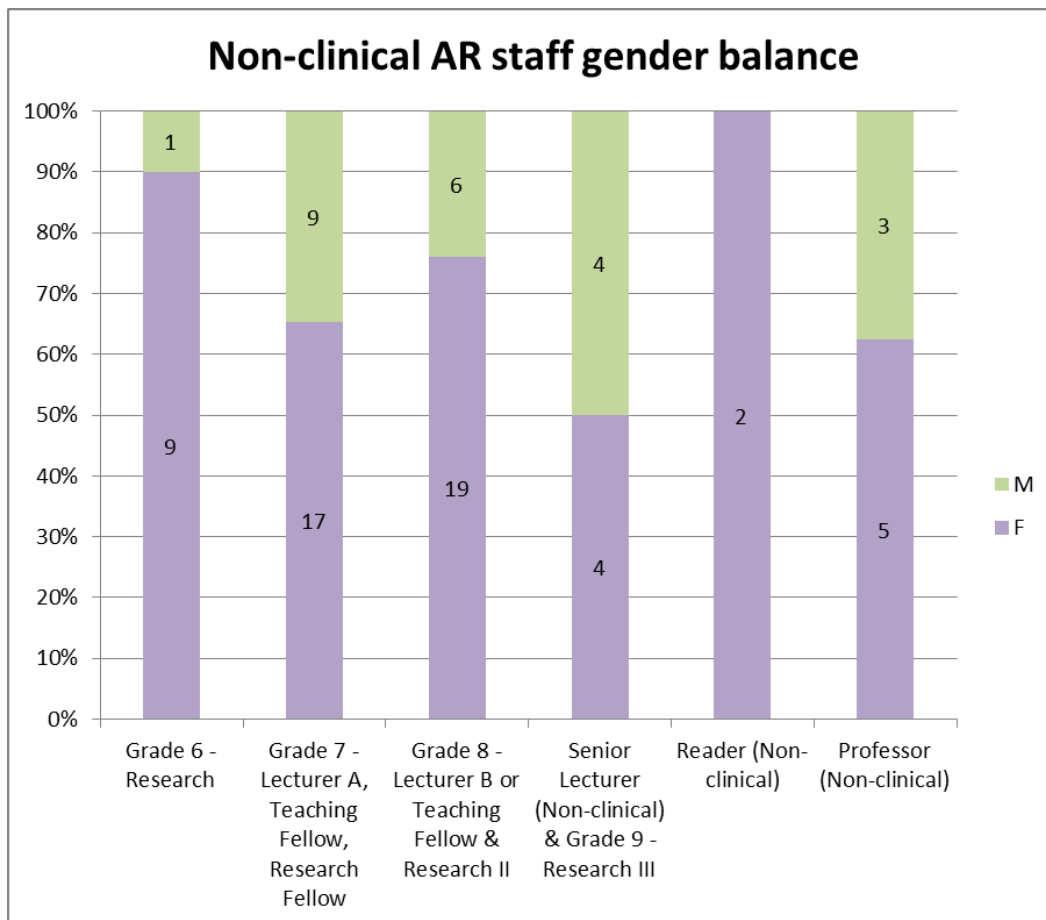


Figure 14: Non-clinical academic and research staff by gender and grade

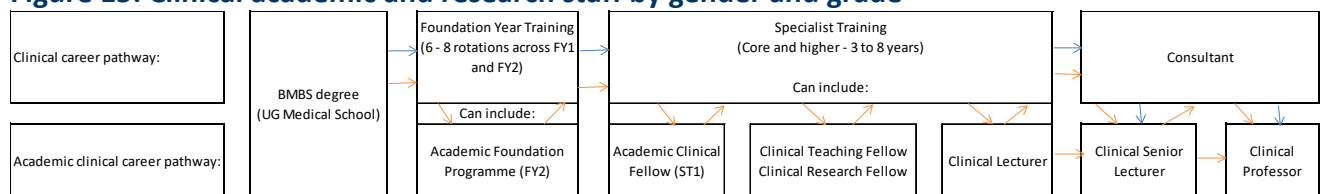


Clinical staff

35% of clinical academic staff are female. At teaching or research fellow grades, the proportion of females is 57% (8F, 6M) but reduces with seniority. Of 12 senior lecturers, only four (33%) are female and of 13 clinical academic professors, only two (15%) are female.

The apparent leaky pipeline at Clinical Research Fellows is partly explained by the NHS career pathway (Figure 15) and their expectation that their role with us is career development prior to returning to their primary clinical track.

Figure 15: Clinical academic and research staff by gender and grade



Individuals can zigzag between the clinical and the academic clinical career pathways at various stages of their careers (peach arrows) or can complete their clinical career pathway and then move into academic clinical roles after they have become a consultant (blue arrows). The more junior academic clinical roles are part of their training and may be funded by BSMS, HEKSS or NIHR and the individuals may be employed by BSMS or the NHS depending on the exact role.

Non-clinical staff

A high proportion (71%) of non-clinical academic staff are female. 63% (5/8) of non-clinical professors are female. There are more women than men in all but one grade grouping (Senior Lecturer / Grade 9 Researcher, 3/7, 43%). Our promotion support and mentoring scheme are already open to our male staff but we will investigate the data further to better understand this issue (SILVER ACTION 29).

To address under-representation of female clinical academics and to promote career progression of all female staff, we implemented a pilot mentoring scheme for Grade 9 women in 2014 which has been expanded in each subsequent year and is now open to all AR staff regardless of gender and grade. Other initiatives that benefit both clinical and non-clinical staff include an annual promotions workshop, promotion of female role models through activities around IWD, networking events, the career progression conference in 2016 and externally-led workshops on women in academia. While it is positive that our F

clinical academic gender balance exceeds the Medical Schools' Council data, we would still have hoped to see further change in our numbers following these actions. We will create a **Clinical Staff Lead** post similar to the **ECR Lead** in order to develop an action plan to support this group (SILVER ACTION 6).

SILVER APPLICATIONS ONLY

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

Our technical staff are valued professionals with no expected pathway for promotion from technical roles to academic ones. However, as with all our staff, we do encourage their career ambitions. Staff can apply for a fee-waiver scheme for part-time courses at UoB or UoS as well as a comprehensive staff development programme and are expected to discuss career progression with their manager as part of the appraisal process.

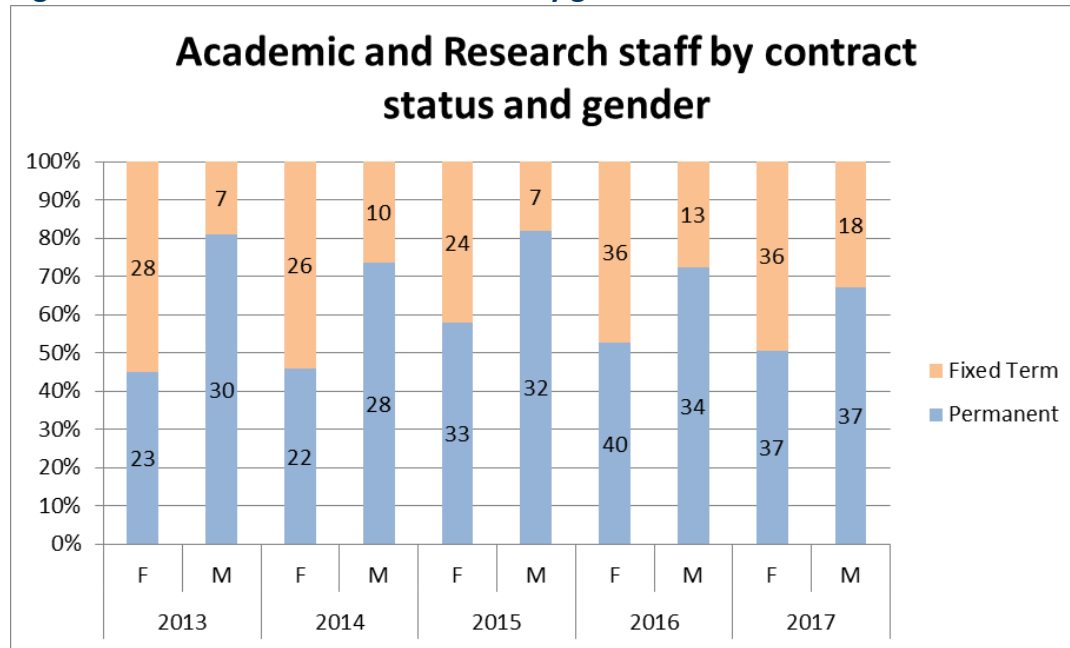
“Having previously worked in a fixed-term research role, I applied for the technical support post at BSMS on returning from a career break. Following support and training from my manager, I was able to apply for and be promoted to the role of Technical Services Manager when she left”.

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

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

58% (74/128) of our academic staff are on permanent contracts. The gap between the percentage of female and male staff on fixed-term contracts has reduced over the last 5 years (2013: F% fixed-term: 55%; M% fixed-term: 19%; 2017: F% fixed-term: 49%; M% fixed-term: 33%) (Figure 16).

Figure 16: Academic and research staff by gender and contract status



This reduction results from action taken by the Dean with UoS HR. We identified that a higher proportion of women rather than men were employed on fixed-term as opposed to indefinite contracts. UoS HR instigated a proactive annual review of staff employed on fixed-term contracts. This is in addition to the statutory right of individuals to claim indefinite status if employed on successive fixed-term contracts for >4 years (BRONZE ACTION 31). As a result of this review, 13 staff have moved from fixed-term to indefinite contracts.

We promote use of the UoS redeployment scheme to all our staff, including those approaching the end of a fixed-term contract. We also encourage those researchers to make use of coaching from the UoS Research Office (Figure 17).

Figure 17: Screenshot of free coaching available to Research Staff

Coaching for researchers

One to one coaching for researchers

Are you looking to advance professionally, but not sure of your next step? Do you want to improve your working relationships or your productivity? Are you looking to make a change in your work/life but not sure where to start?

Coaching can be useful if you are at a point where you are considering what your options might be for the future or if you are working towards achieving a specific goal e.g. promotion, progression, gaining independent funding. It is also useful if you are struggling with a particular issue or challenge in your professional life.

1:1 coaching appointments with a qualified coach are available for any member of Sussex research staff. Sessions are free, completely confidential and will last 1 hour. Depending on your requirements you may opt for a one-off appointment or a series of up to three coaching sessions. Using a non-judgemental and solutions focussed approach, your coach will work with you to find courses of action that are appropriate to your individual circumstances and will support you in overcoming challenges and achieving your goals.

To find out more about coaching or to book an appointment please use the form below.

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

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

Table 20: AR Leavers by year, grade and gender

Academic leavers by year, grade and gender

	2014/15		2015/16		2016/17	
	F	M	F	M	F	M
Professor (Clinical)					1	
Reader (Clinical)				1		
Senior Lecturer (Non-clinical)		1			1	
Senior Lecturer (Clinical)				1		
Lecturer B						1
Lecturer (Clinical)		2			1	2
Research Fellow (Clinical)			3			
Teaching Fellow					1	
Grade 7 Research (Non-clinical)	3	1			6	
Grade 8 Research II (Non-clinical)	1		1		1	
Grade 6 Research (Non-clinical)			1		2	
Total	4	4	5	2	13	3

Table 21: AR Leavers by year, grade and full-time/part-time status

Academic leavers by year, grade and full-time/part-time status

	2014/15		2015/16		2016/17	
	Full-time	Part-time	Full-time	Part-time	Full-time	Part-time
Professor (Clinical)					1	
Reader (Clinical)			1			
Senior Lecturer (Non-clinical)	1				1	
Senior Lecturer (Clinical)			1			
Lecturer B					1	
Lecturer (Clinical)	1	1			2	1
Research Fellow (Clinical)			2	1		
Teaching Fellow						1
Grade 7 Research (Non-clinical)	3	1			3	3
Grade 8 Research II (Non-clinical)		1		1		1
Grade 6 Research (Non-clinical)				1	1	1
Total	5	3	4	3	9	7

Table 22: AR staff reasons for leaving

Reason for leaving	Number of leavers		
	2014/15	2015/16	2016/17
Career development (Post at another university)	6	2	5
End of fixed term contract		2	3
Other			4
Return to clinical work	2	2	3
Retirement		1	1
Total	8	7	16

Leaver numbers were similar in 2014/15 and 2015/16 but have risen in 2016/17 appearing to be disproportionately amongst F and part-time staff. We will re-run the data in 2017/18 and take action if this is repeated (Tables 20, 21, 22) (SILVER ACTION 7).

In 2014, we attempted to gather feedback from departing staff via exit interviews. Return rate was low and we were uncertain about the reliability of

the information collected. Instead we have chosen to use our annual staff survey as a barometer of the engagement of our staff. As we have a consistently high survey return rate and as the question responses and free-text that we receive are fed into the agendas of the various sub-groups, we consider this a better mechanism for capturing the mood of our staff.

Word count: 1,987

5. SUPPORTING AND ADVANCING WOMEN'S CAREERS

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

5.1. KEY CAREER TRANSITION POINTS: ACADEMIC STAFF

(i) Recruitment

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

Figure 18: Gender split at recruitment stages by year



Table 23: Recruitment panel gender by year

	Panels with data	All M panels	All F panels	Mixed panels	% Mixed panels
2012	10	3	1	6	60%
2013	8	1	0	7	88%
2014	14	1	3	11	79%
2015	28	2	1	25	89%
2016	21	4	4	13	62%
2017 (to 15 Aug 2017)	32	2	0	30	94%

Change to recruitment form prompted by Athena SWAN intervention

BSMS recruitment is run through the UoS HR department. Our advertisements feature the following:

“The Universities of Brighton and Sussex are committed to equality and valuing diversity, and applications are particularly welcomed from women and black and minority ethnic candidates, who are under-

represented in academic posts in science, mathematics, medicine and engineering at the universities”.

We updated the BSMS “request to recruit form” to track gender balance (Table 23) and recruitment training status of our interview panels (COMPLETED BRONZE ACTION 24 & 25).

Between 2012-2016, there were 88 (14, 15, 19, 28, and 12 respectively) AR appointments (Figure 18). Female appointment percentage consistently exceeds application percentage. This apparent over-representation of F masks the gender imbalance for senior clinical staff, as well as junior research staff (SILVER ACTION 29). To support our recruiters, we continue to promote Recruitment and Selection and Unconscious Bias training via email, newsletters, and relevant materials on the Inclusivity intranet site. 14 members of staff (9 academic) were trained at our most recent recruitment and selection sessions. Discussion of the Royal Society film on unconscious bias for interview panels at our Summer Open Staff meeting was attended by 80 members of staff.

(ii) Induction

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

Induction has been a priority for improvement since the 2013 staff survey when 51% reported it inadequate. In response to that:

- We designed an induction information pack for managers
- From October 2014, BSMS-specific induction mornings are delivered termly

Induction day is rotated termly. New staff are invited each term in their first year if unable to attend initially. All presentations given are available on our staff intranet site and are emailed to all starters (COMPLETED BRONZE ACTION 13).

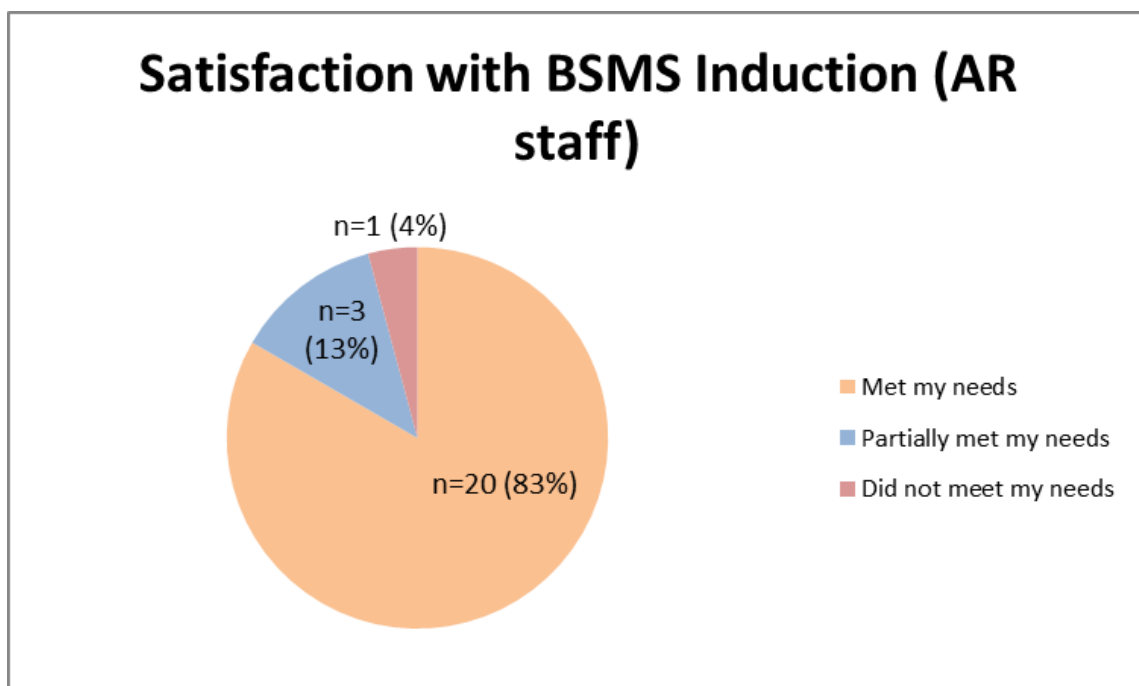
We collect feedback after each induction and they are consistently highly rated.



Feedback is incorporated into future sessions, e.g., dedicated time for networking has been built in the agenda. We include a presentation by the ECR Lead to ensure new researchers are well-supported and the AS Project Officer highlights relevant activities for new staff, such as the buddy and mentoring schemes (BRONZE ACTION 13).

The impact of changes to our induction process is evidenced in the 2017 staff survey which showed 96% (23/24) satisfaction (Figure 19).

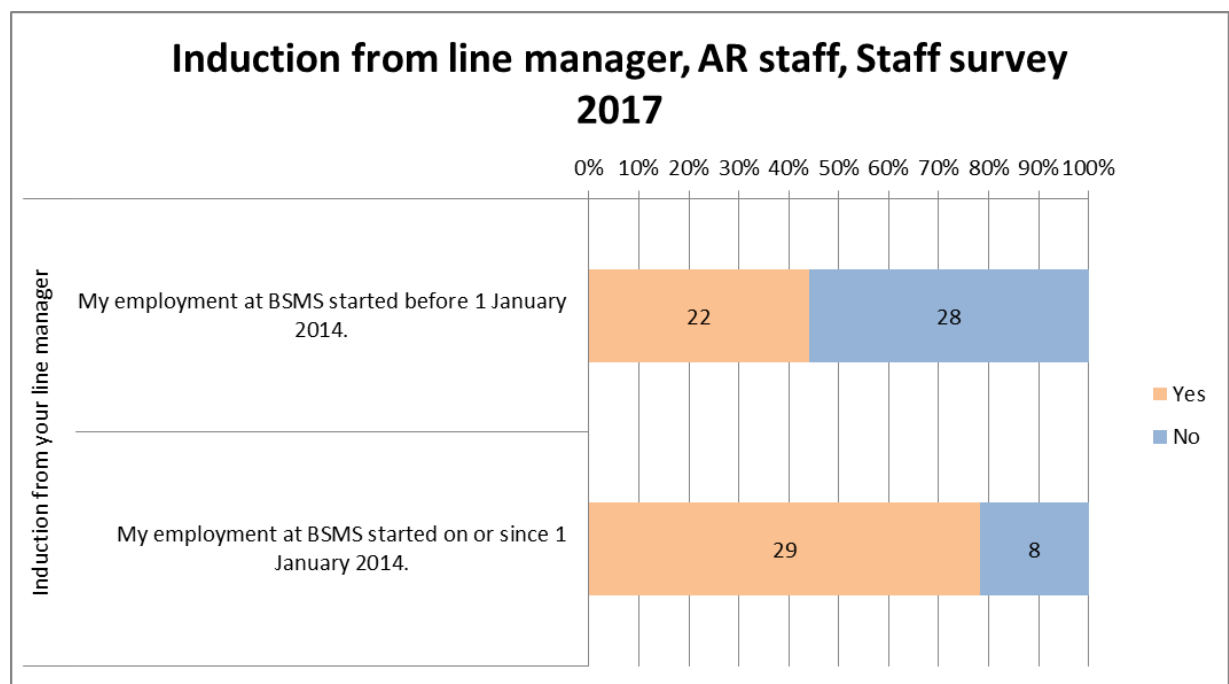
Figure 19: Satisfaction with BSMS Induction, AR staff, 2017



We continue to provide support for line managers on the induction process by improving the information available on our intranet, e.g. recent updates on managing maternity/parental/adoption leave and flexible working.

There is a big shift in staff reporting that they received an induction from their line manager. For those starting before 01/01/2014 (when many of the Inclusivity Team's changes started), only 22/50 (44%) stated that they had an induction from their manager. For those starting since 01/01/2014, that has improved to 29/37 (78%) (Figure 20). This is a big improvement but we are not complacent about the remaining 22%. We will continue to provide support to line managers to enable them to provide induction to all their staff (SILVER ACTION 8).

Figure 20: Staff receiving Induction from line manager, AR staff, 2017

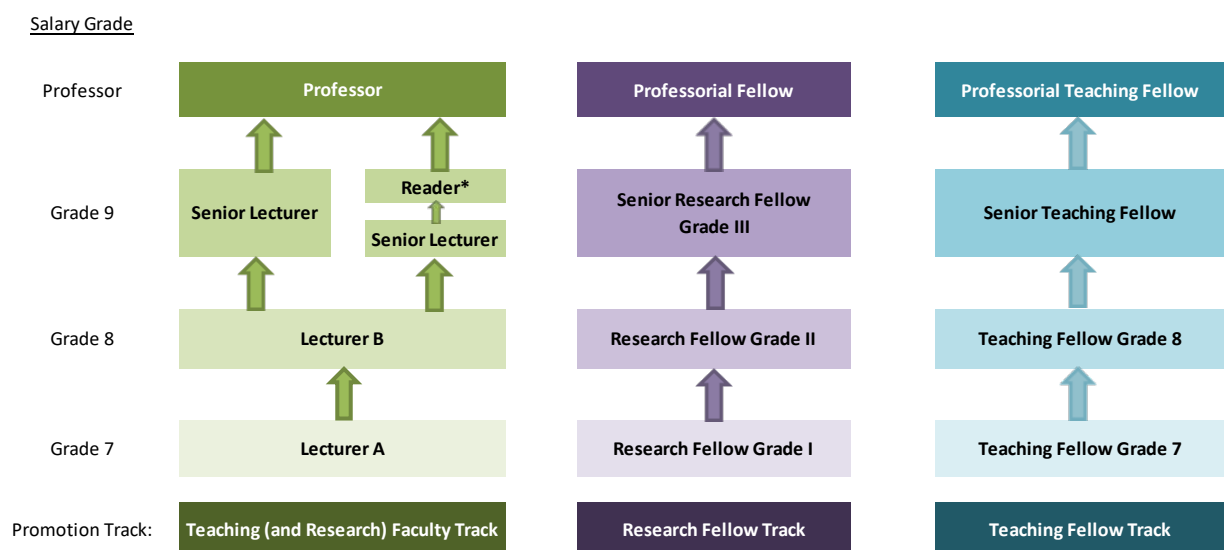


(iii) Promotion

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

UoS provides clear promotion tracks to AR staff (Figure 21). Information on the criteria, timescales and promotion process is on the intranet.

Figure 21: UoS Academic and research staff promotion tracks



*the title of Reader may be awarded to members of teaching faculty on any scale, but it is most usually used at Senior Lecturer level

The Dean reviews applications at an early stage. For the 2018 round, a new internal panel is established consisting of HoDs, the Deputy Dean, the Medical School Secretary and one BSMS E&D Officer. We will monitor the impact this has on numbers and success of applications and review (SILVER ACTION 26).

Our 2014 survey highlighted poor understanding of the promotion process (54% of female and 20% of male respondents, Figure 22). To counter this, the Inclusivity Team organised an **interactive promotions workshop** for all AR staff in 09/2014 with the UoS PVC, HR, and a recently-promoted BSMS member of staff. Following its success, this workshop has been replicated in other UoS STEMM schools and has become an annual event at BSMS. The 4th iteration took place in 09/2017 (total: 46 attendees) (COMPLETED BRONZE ACTION 29). All presentations are available on the intranet for staff unable to attend.

Feedback included:

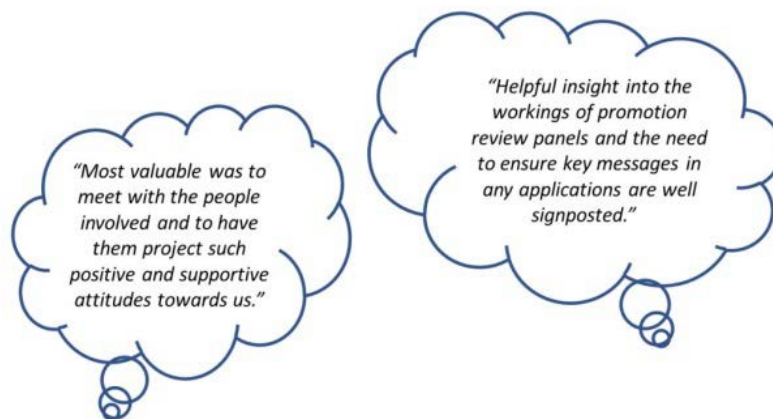
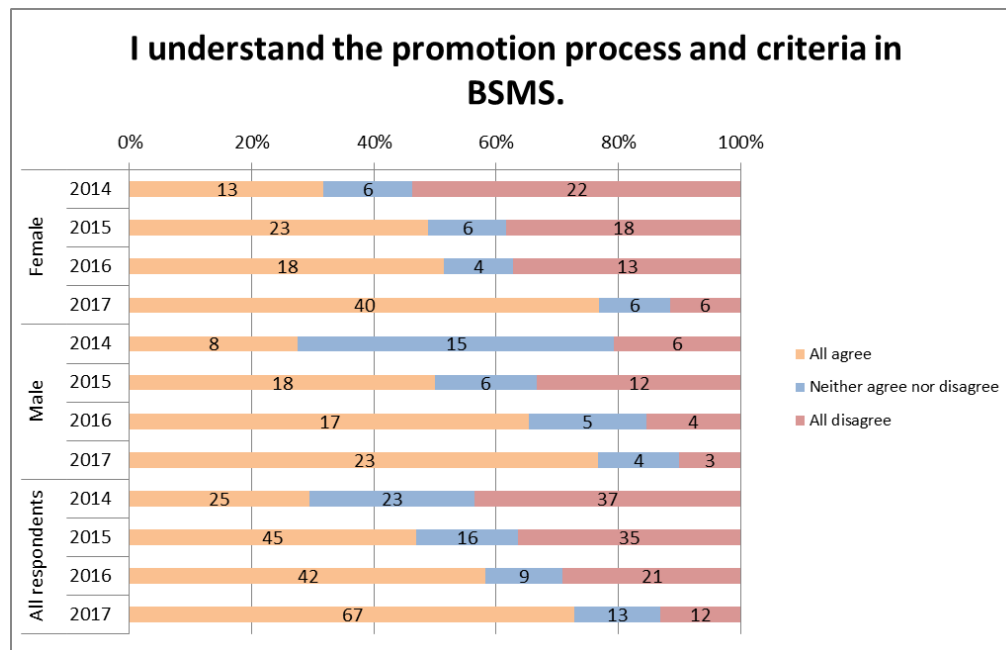


Figure 22: Understanding of the promotion process, responses to the staff survey in 2014- 2017.



The impact of the promotions workshops is seen in staff survey responses about understanding of the process (Figure 22). Agreement has improved considerably for both female and male staff increasing from 29% (25/85) in 2014 to 73% (67/92) in 2017 (BRONZE ACTION 29).

Numbers applying for and achieving promotion each year are small but this greater understanding has also translated into a higher number of female staff applying for and achieving promotion (Figure 23, Table 24).

Figure 23: Number of staff applying for promotion by gender and year

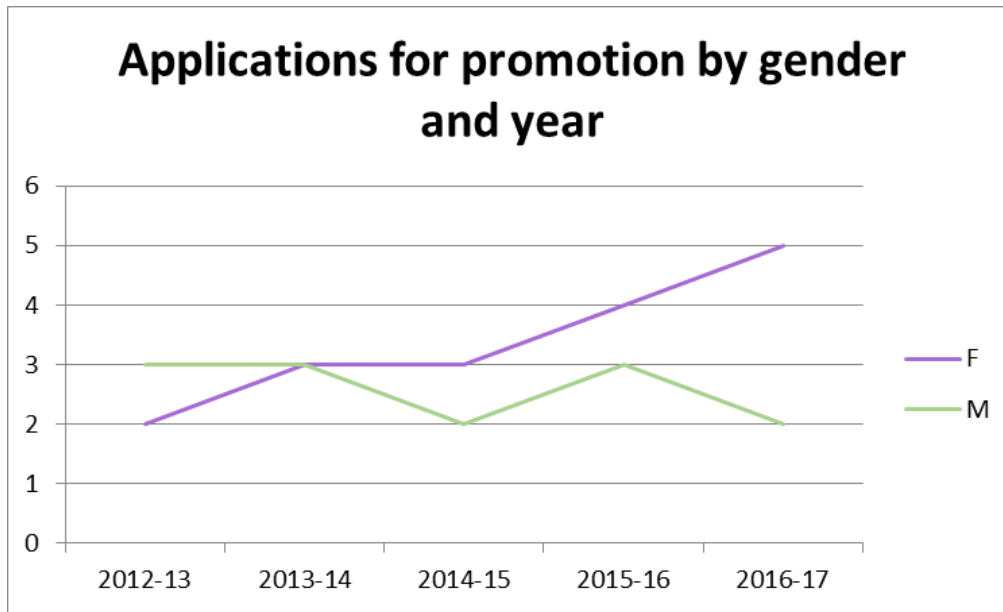


Table 24: Staff applying for and achieving promotion by gender and year with grade

(Table redacted for public distribution removing absolute figures and retaining % only.)

	Promotion to:	Application		Promotion			
		F	M	F	F%	M	M%
2012/13	Professor				0%		
	Reader						100%
	Senior Lecturer				100%		
	Total (all roles)				50%		100%
2013/14	Professor						
	Reader				0%		0%
	Senior Lecturer						50%
	Research Fellow II						100%
	Total (all roles)				67%		33%
2014/15	Reader				100%		
	Senior Lecturer						0%
	Research Fellow II				0%		
	Senior Teaching Fellow						100%
	Total (all roles)				33%		50%
2015/16	Professor						33%
	Reader				100%		
	Research Fellow II				100%		
	Lecturer B				100%		
	Total (all roles)				100%		33%
2016/17	Professor				50%		100%
	Reader						100%
	Research Fellow II				100%		
	Senior Research Fellow				100%		
	Teaching Fellow Grade 8				100%		
	Total (all roles)				80%		100%
5-year combined	Professor				50%		50%
	Reader				60%		80%
	Senior Lecturer				100%		33%
	Lecturer B				100%		
	Senior Research Fellow				100%		
	Research Fellow II				75%		
	Senior Teaching Fellow						100%
	Teaching Fellow Grade 8				100%		
	Total (all roles)				71%		62%

Combining 5-year data shows more female than male staff apply for promotion and that the female success rate is slightly higher than the male. Promotion application awareness and support is offered to all staff regardless of gender.

Since our Bronze application, we have also run two academic CV-writing workshops to improve success with promotion and funding applications (12 attendees, 7 female) (COMPLETED BRONZE ACTION 30).

Feedback included:



We will continue to promote these workshops and, along with our mentoring scheme and other initiatives, expect to maintain a good application and success rate for promotion (SILVER ACTION 26).

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

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

In 2008, BSMS submitted to the Research Assessment Exercise as a standalone unit. BSMS was then focused chiefly on the quality of teaching for its first undergraduate students. Staff responsible for the BSMS RAE submission have since left, and we cannot obtain a full dataset. All 32 eligible staff were submitted, 12 female (37.5%). In 2014, staff were submitted under different Units of Assessment (UoA) through either UoB or UoS.

In the RAE, BSMS had a much smaller number of staff compared to the REF, and had overall control of the submission process.

In 2014, 28% (11/39) of eligible BSMS female staff were submitted. This is smaller than the number of eligible male staff submitted 33% (17/51) (Table 25).

More female staff were eligible in the REF 2014 than the 2008 RAE (39 vs 12), because of higher staff numbers.

By supporting all staff with the research initiatives presented, we expect to increase the number of females returned in future REF submissions (SILVER ACTION 9).

Table 25: Eligible and submitted staff by gender to REF 2014 by UoA

	Eligible		Submitted		%Submitted	
	F	M	F	M	F	M
UoA 03: Allied Health Professions, Dentistry, Nursing and Pharmacy	30	40	4	6	13%	15%
UoA 04: Psychology, Psychiatry and Neuroscience	4	5	3	5	75%	100%
UoA 05: Biological Sciences	3	6	2	6	67%	100%
UoA 23: Sociology	1		1		100%	
UoA 29: English Language and Literature	1		1		100%	
Total	39	51	11	17	28%	33%

SILVER APPLICATIONS ONLY

5.2. KEY CAREER TRANSITION POINTS: PROFESSIONAL AND SUPPORT STAFF

(i) Induction

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

(ii) Promotion

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

(i) Induction

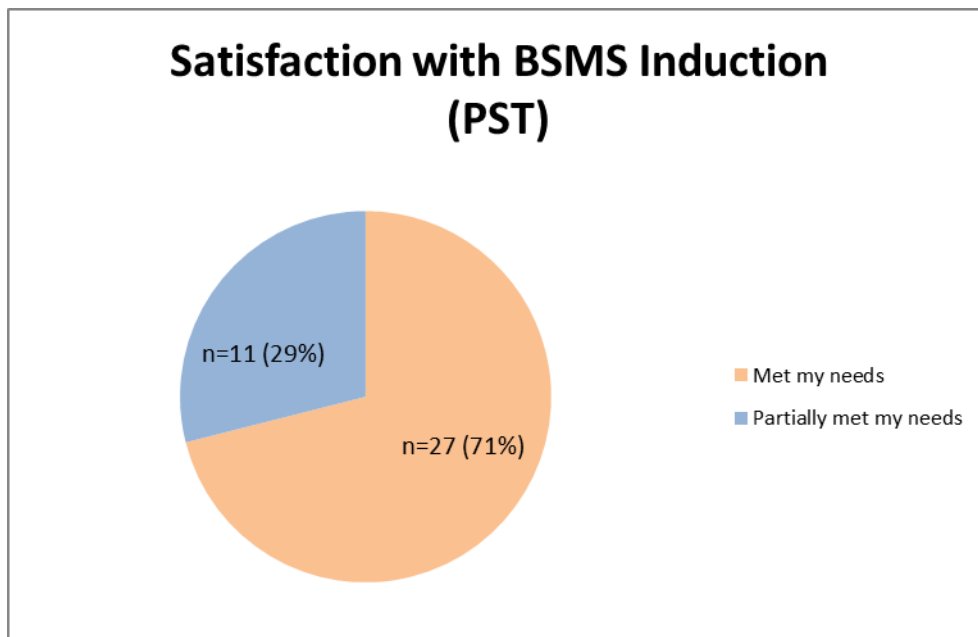
The improvements to induction apply to PST staff, 66 of whom have attended the BSMS induction since 10/2014.

PST staff also receive an induction tailored to job role and working environment from their line manager.

Further improvements have been designed by the PST sub-group, for example, researching and writing the guidelines that we now use to ensure that all new staff are allocated a buddy to support them in their early months at BSMS.

The 2017 survey showed high satisfaction with induction amongst staff who started since 01/01/2014 (BSMS induction launch) (Figure 24).

Figure 24: Satisfaction with BSMS Induction, PST Staff, Staff survey 2017



"Thank you very much for the extremely informative induction last week. I felt that the speakers' presentations provided a great overview of BSMS and some of its services. It was a great event to network with other new starters."

(Grade 5 member of Professional Services staff, F)

(ii) Promotion

There is no formal mechanism for applying for promotion for PST staff. The main progression avenue is via recruitment to more senior roles.

This is a key topic for the PST sub-group who developed initiatives to enable PST staff to gain experience towards future career progression (see 5.4(iii)).

5.3. CAREER DEVELOPMENT: ACADEMIC STAFF

(i) Training

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

Both parent universities offer training opportunities for all staff, the NHS trusts for staff with clinical or patient-related research duties, and bespoke training funded by BSMS. BSMS also supports training opportunities identified by staff themselves, e.g. conferences, and has a dedicated Staff Development Fund which covers related expenses, including extra childcare costs.

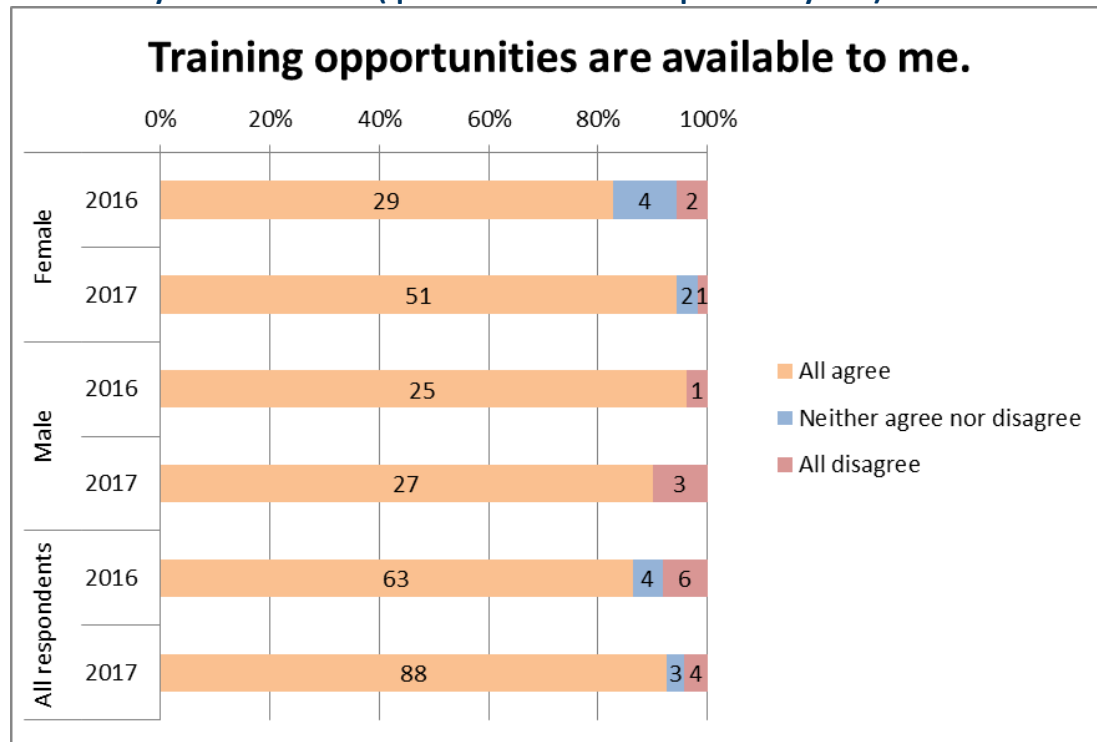
UoS SDU courses are taken up by good numbers of AR staff (Table 26). Courses offered range from a few hours (e.g. Time management, Social Media in Academia) to annual programmes that take a few days each month (e.g. PGCert, Leadership Programmes).

Table 26: UoS SDU training events for BSMS AR staff

	Academic & Research Staff					
	Number of staff trained			Number of training events		
	F	M	Total	F	M	Total
2014/15	24	3	27	34	7	41
2015/16	24	13	37	47	19	66
2016/17	12	9	21	28	12	40

Events are advertised in university-wide emails or by NHS and departmental administrators. In the latest survey, over 92% (88/95) of respondents agreed that training opportunities were available to them, improving from 86% (63/73) in 2016 (Figure 25).

Figure 25: AR Staff responses to: "Training Opportunities are available to me", Staff survey 2016 and 2017 (question not asked in previous years)



Staff report they are actively encouraged to take up career development opportunities. The percentage has improved for all AR staff: for F staff from 56% (23/41) in 2014 to 83% (45/54) in 2017; for M from 63% (19/30) to 70% (21/30) in 2017 (Figure 26). This results from more consistent dissemination of career development opportunities and represents impact of implementing actions regarding use of our intranet and InPulse, where there is a dedicated space for updates and event advertising (COMPLETED BRONZE ACTION 26).

Figure 26: AR Staff responses to annual staff survey question: "I am actively encouraged to take up career development opportunities"

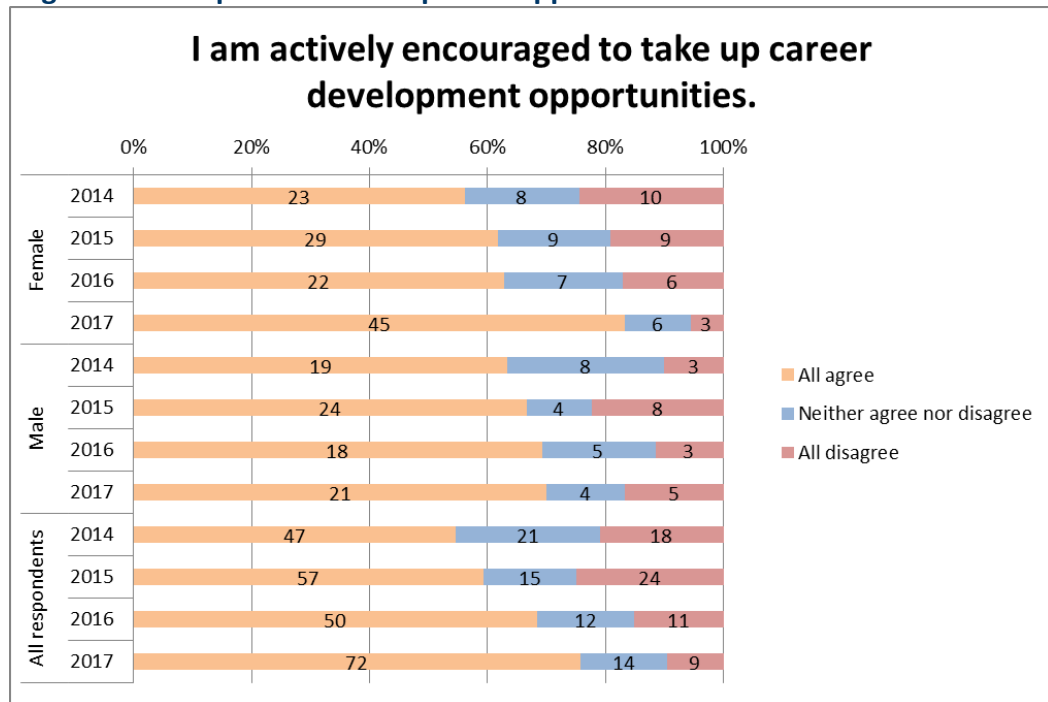
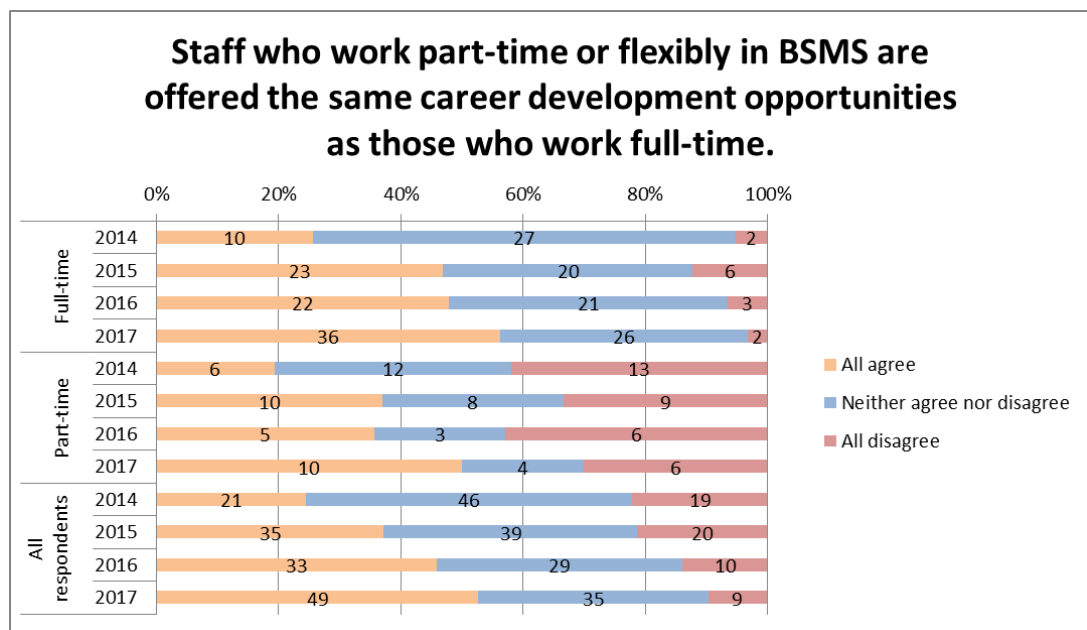


Figure 27: AR Staff responses to Staff who work part-time or flexibly in BSMS are offered the same career development opportunities as those who work full-time.



In 2014, we found that 42% (13/31) of part-time staff disagreed that they had the same career opportunities as full-time staff (Figure 27). Since 2014, we have increased the number of School-wide events provided, and advertised UoS career development events using personalised invitations, targeted circulation

lists, webpages, announcements at staff meetings and requests for managers to promote involvement (BRONZE ACTION 26).

Responses to the 2017 survey show improvement for part-time staff (M + F) reflecting on parity of opportunity, agreement increased from 19% (6/31) to 50% (10/20). We are pleased with this improvement but acknowledge that there is still further distance to go to support the remaining 50% (SILVER ACTION 10).

(ii) **Appraisal/development review**

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

Our policy is for all staff to have an annual appraisal summarised in a written appraisal agreement. Appraisal of non-clinical staff uses the UoS system while clinical academics undergo Follett-style joint academic–NHS appraisals. HoDs are responsible for ensuring all eligible staff are appraised; compliance is monitored internally and reported to UoS HR and UoS Council (Table 27).

Table 27: AR Staff appraisal numbers

Academic staff appraisals	No. of staff eligible for appraisal	No. of staff appraised	Appraisal rate
2011/12	38	14	37%
2012/13	38	32	84%
2013/14	68	59	87%
2014/15	95	80	84%
2015/16	91	84	92%
2016/17	87	72	83%

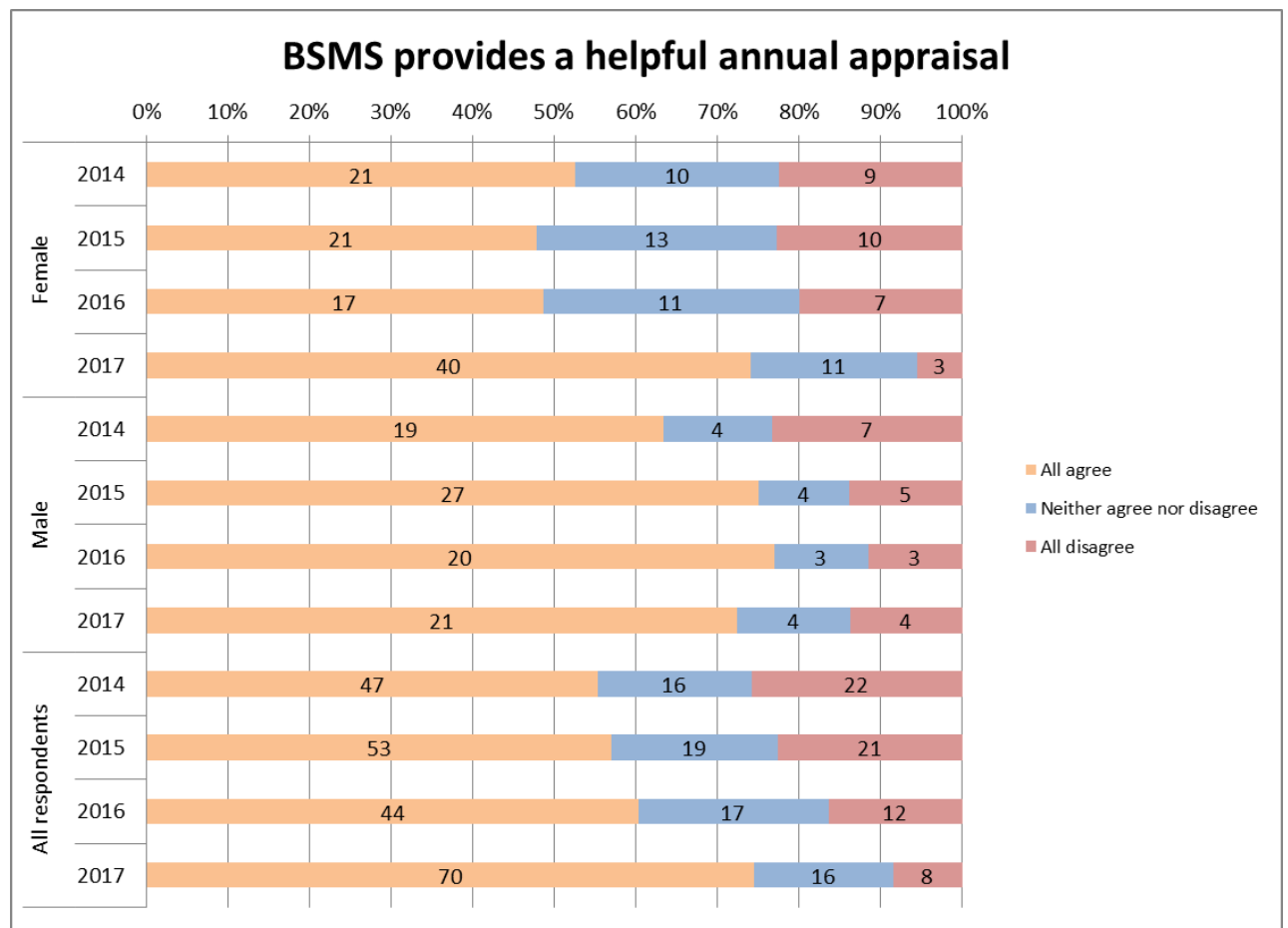
Note: staff may not have had an appraisal due to being on maternity/sick leave, new in post or shortly to leave the school.

In 2014, our staff survey showed that only 53% of F staff and 63% of M staff found their appraisal helpful. We took action including making training of appraisers mandatory and organising bespoke training sessions for senior staff (BRONZE ACTION 28). Since 2014 and as a result of these actions, we have seen an improvement in satisfaction with appraisal so that, in 2017, 74% of F (40/54) and 72% of M (21/29) found their appraisal helpful (Figure 28). We will continue

to require that managers are trained before they appraise, particularly newly promoted managers (SILVER ACTION 11).

A main focus for our Silver Action Plan is to ensure the HoDs have the necessary support to perform and monitor appraisals for all their staff (AR and PST), to increase the rate of appraisal amongst staff (SILVER ACTION 11).

Figure 28: BSMS provides a helpful annual appraisal, AR staff survey responses



(iii) Support given to academic staff for career progression

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

In 2015, the Career Progression sub-group identified the need for focus on ECR careers. They produced a description for the new role of Early Career Research Lead (ECR Lead), aiming to have a dedicated source of support, guidance and information for BSMS postdoctoral researchers. Prof. Sarah Newbury was

appointed to this role after open recruitment in 01/2016 (COMPLETED BRONZE ACTION 14). Example actions include:

- ECR Lead asked HoDs to nominate postdoctoral researchers for the UoS Spotlight on Researchers resulting in 2 out of 12 profiles representing BSMS.
- BSMS postdoctoral committee formed, and gained funding from UoS for annual Research Days (26/10/2016, 17/11/2017) (approximately 50 attendees)
- Research Day led by Dr Charlotte Rae specifically for ECRs in Neuroimaging, funded by the UoS "Researcher Led Initiative" (35 attendees).
- Events included scientific talks, presentations, and networking time. PhD students as well as PIs were also invited.
- Postdoctoral committee reports are sent to the BSMS Research sub-committee and the Inclusivity team.

To celebrate IWD we co-organised a Career Development symposium with the UoS School of Life Sciences on 08/03/2017. A number of male (4) and female (10), local, national and international scientists discussed their career paths, including academia, industry, scientific publishing, research councils and charities. The symposium included networking time and attracted over 120 attendees, including sixth form students, undergraduates, postgraduate and postdoctoral researchers and staff, including UoS VC. The feedback we received (n=29) was overwhelmingly positive, with 100% stating the symposium met (partially, completely or exceeded) their expectations. Comments included:

“An insight into careers in science. I am always surrounded by people who are high achievers and at the pinnacle of their careers which makes decisions about my own prospects very unsure and intimidating. This conference gave me an insight into how winding a path to the end of this kind of career is and that to go in an indirect route that suits you best isn't a failure but a success to be celebrated, that passion should be the most important drive in your career choices. The diversity, individuality and range of careers discussed at not just the professional level, but more importantly at the personal level, has given me invaluable confidence in my future career choices and has made me more open to the diverse range of paths i can take to be able to choose those which are best suited to my needs and not to feel forced to those which look more successful”.

“The main message was that there is a variety of ways to progress in your chosen career, and scientific training is valuable in many professions.”

“the conference was empowering”

“I really enjoyed the mix of internal and external speakers, and the balance of genders and different career stages. Thank you for organising.”

“The scale and scope of the event made it very worthwhile, and was much bigger than either department probably could have managed alone.”

Furthermore we have collected “career timelines” of AR staff. This series of slides were projected on screens during the IWD Career Development Day and are available on our intranet. The career timelines reflect individual pathways of clinical and non-clinical AR staff, combined with milestones of their life as a way to provide a variety of role models and highlight multiple ways to reach career goals (Figure 29).

Figure 29: Example of a Timeline, the Dean of the Medical School

(Timeline redacted for public distribution)

Another initiative to highlight AR staff and student research achievements is showcasing research posters as part of our IWD events (COMPLETED BRONZE ACTION 38).

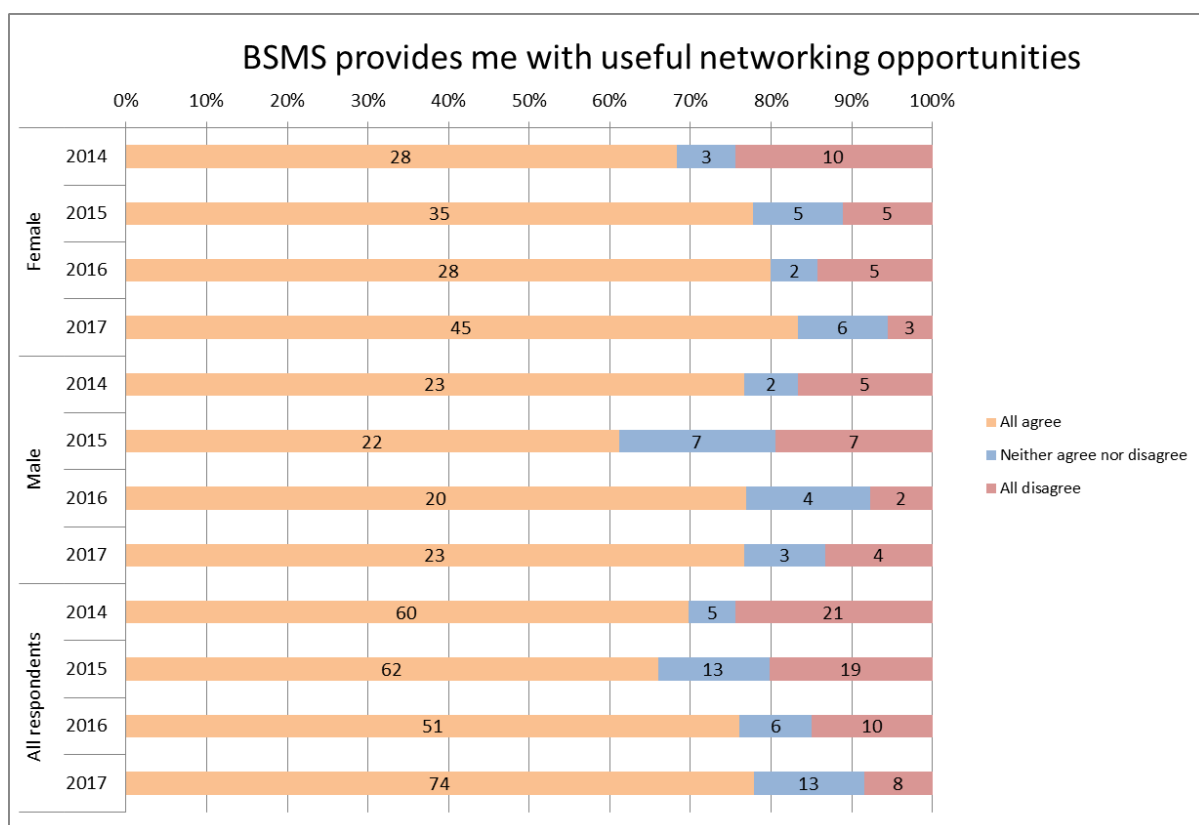
Networking

We recognise the importance of networking in creating a sense of community, exchange of information and career progression, particularly for a school across multiple sites. We now include networking opportunities for all events: termly open staff meetings, induction, workshops, etc. All the networking and training events are shared on the school event calendar for maximum visibility.

This was in response to staff feedback in 2014, when only 68% (28/41) of F staff agreed there were useful networking opportunities (Figure 30). The result has been a steady increase in agreement, which in 2017 reached 83% (45/54).

Implementing our action plan in 2015 led to M staff drop in satisfaction with networking opportunities as the AS activities were perceived by M staff to be specifically for F staff. In 2016 we changed our name to Inclusivity team, and made clear that all our initiatives were open to both M and F staff, which was reflected in rising M satisfaction in 2016 and 2017. Overall we consider the actions we have taken in this area to have had important and measurable impact.

Figure 30: BSMS provides me with useful networking opportunities, AR Staff, Staff survey



Mentoring

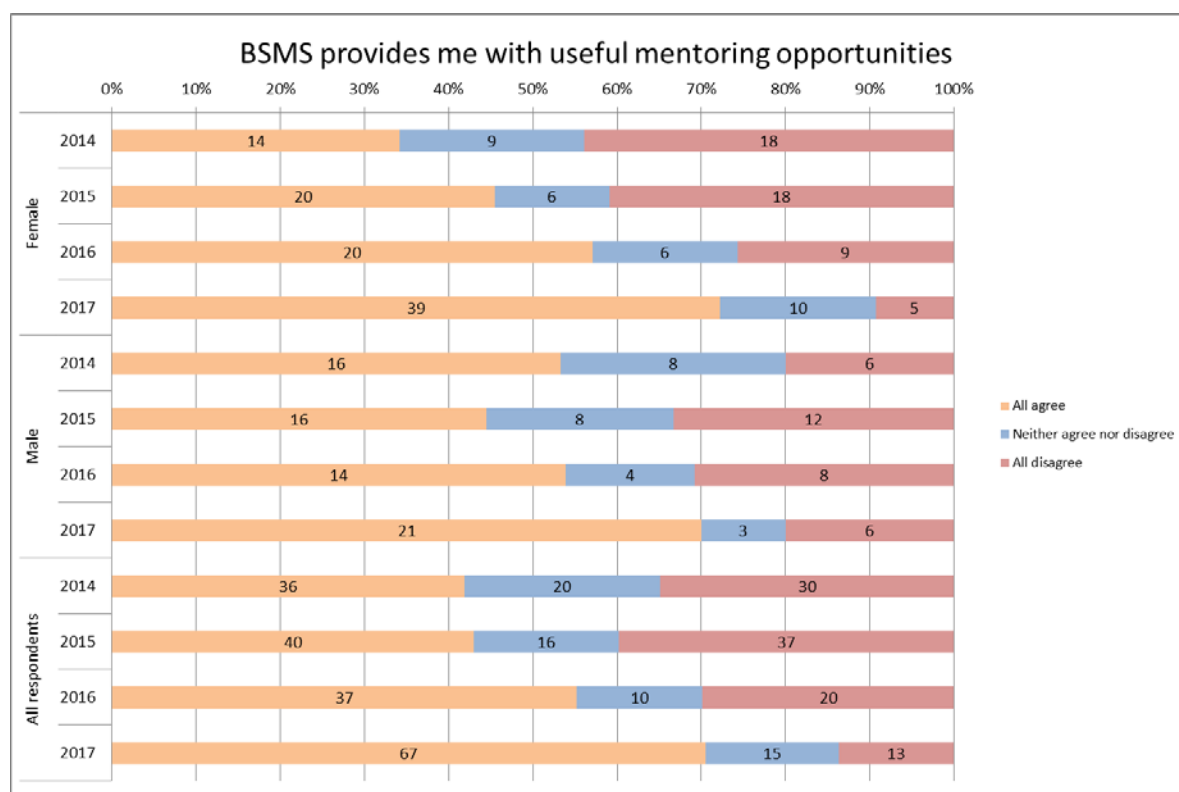
BSMS keenly supports mentoring that provides guidance adapted to individual situations and career stages. The BSMS Mentoring scheme was piloted in 2014/15, implementing one of our Bronze award actions (COMPLETED BRONZE ACTION 34). At the time, 34% (14/41) of F and 54% (16/30) of M AR staff agreed that BSMS provided useful mentoring opportunities (Figure 31). BSMS now runs the bespoke mentoring programme with annual training of mentees and mentors by an external consultant. It has been expanded from only Grade 9 F staff, to all M and F staff in Grades 6-10. We allow joiners at any time of the year to accommodate new staff. This is promoted during BSMS staff Induction. We run an annual mentoring survey to monitor satisfaction. In 2016/2017 we had 9 pairs of mentors and mentees, 6 mentees and 3 mentors replied to our survey: all mentees reported an increase of confidence in relation to the key issue they needed mentoring for, 2/3 took action on that issue, the mentoring experience met or exceeded their expectations, and they would all be interested in becoming mentors themselves in the future; all mentors also said they were happy to mentor again, and that the experience met their expectations.

Some of the comments we have received include:



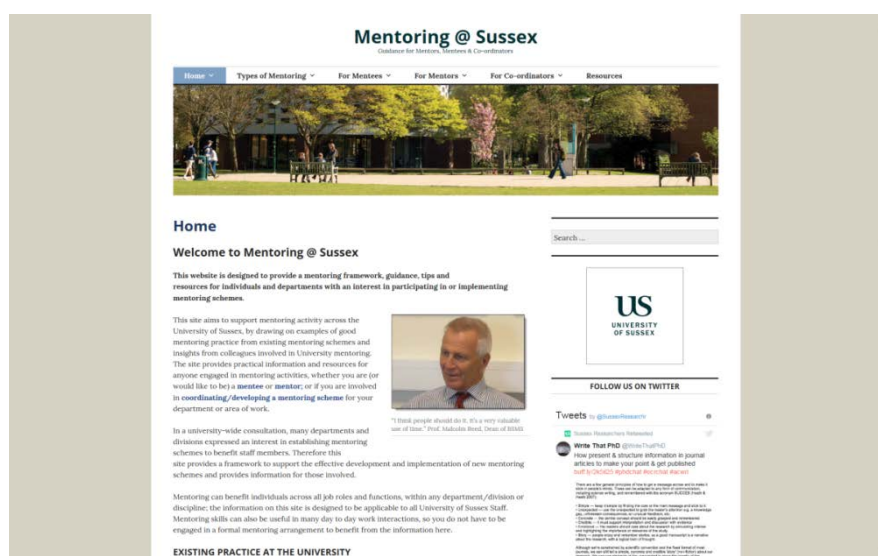
These actions had significant impact: agreement for useful mentoring opportunities increased from 34% (14/41) in 2014 to 72% (39/54) in 2017 for F AR staff, and from 54% (16/30) to 70% (21/30) for M AR staff (Figure 31).

Figure 31: BSMS provides me with useful mentoring opportunities, AR Staff, Staff survey



The success and impact of our mentoring scheme is recognised by the UoS, which asked for our input in designing a University-wide mentoring framework (Figure 32). BSMS staff also have access to the schemes offered by our parent universities, e.g. mentoring circles (group mentoring) and individual coaching sessions.

Figure 32: Screenshot of UoS mentoring website showing quote from BSMS Dean

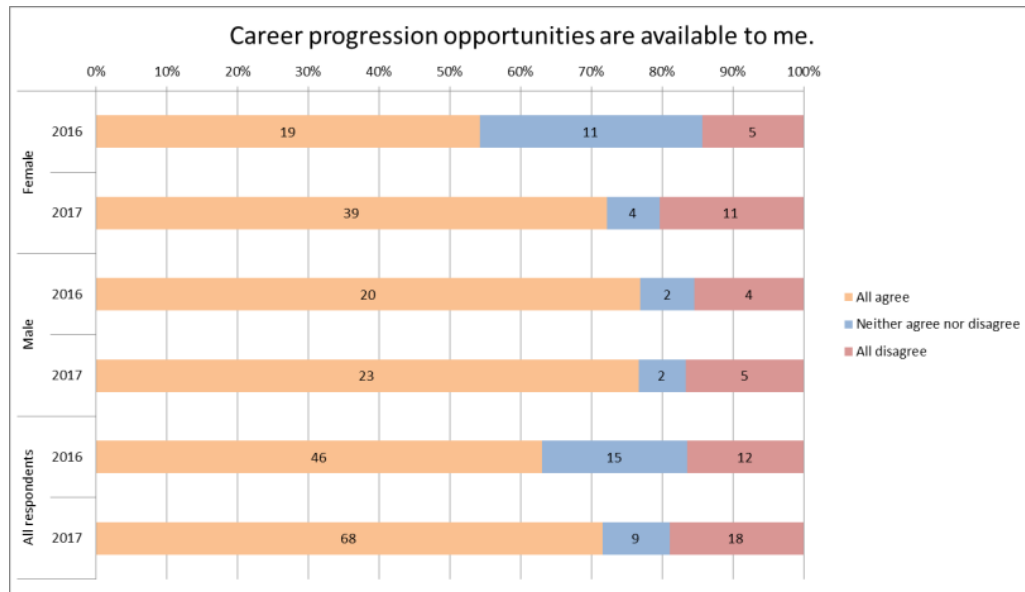


BSMS also has a dedicated budget to support career development opportunities identified by staff themselves. The funds are awarded by application to the School Secretary. In 2015/16, 23 staff were funded to attend a total of 7 courses and 16 conferences and in 2016/17, 21 staff were funded to attend 2 courses and 19 conferences (£21,771 spent over 2 years on self-identified career development activities).

Staff responses to **career progression opportunities** improved substantially in the last 2 years: for female staff from 54% (19/35) in 2016 to 72% (39/54) in 2017; and for male staff from 77% (20/26) to 85% (23/27) (Figure 33). Our actions that contributed to that are:

- Creation of the ECR Lead role
- Mentoring scheme
- Staff development fund, including support of extra childcare costs
- Coordinated dissemination of information through InPulse and targeted emails within departments.
- Events and initiatives to promote diverse role models
 - Portraits of inspirational women
 - Career Development symposium
 - Research poster exhibition
 - Career timelines

Figure 33: AR Staff responses to Career progression opportunities are available to me, Staff survey 2016 and 2017 (this was not asked in previous years)



In response to the free-text feedback on training and career opportunities, we will promote more management and leadership courses (SILVER ACTION 12), and increase support for grant writing (SILVER ACTION 13).

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

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

Undergraduate students

We recognise the gender imbalance in our clinical AR staff, and we believe that promoting academic careers needs to start with our undergraduates, while they are still gathering information about future careers.

Academically, each undergraduate is supported by an academic tutor in years 1 and 2, and a clinical academic tutor in years 3-5. Academic tutors help with academic skills, such as essay writing and presentations. Clinical academic tutors oversee the transition into full-time clinical study and later the progression from medical student to doctor.

We held 2 focus groups with our UG students (19 F) in 2015 and some expressed the need for their caring responsibilities to be better recognised, for instance, when allocating placements. Since 2015/16, the details of caring responsibilities are requested (rather than waiting for students to volunteer details) and are taken into account when allocating clinical placements (COMPLETED BRONZE ACTION 12).

BSMS has two well-established initiatives to encourage academic careers:

- INSPIRE programme (funded by the Academy of Medical Science and the Wellcome Trust) engages medical undergraduates with research. Now in its third year, funding for conference attendance has been awarded to 59 undergraduates (44F, 15M).
- Fourth-year students undertake an eight-month research project with an experienced researcher. All projects are presented at a BSMS conference with panel discussions and prizes for the best presentations. These projects often also result in external conference presentations, publications and professional society prizes.

We also encourage our students to take the opportunity for an intercalated degree with information in the Student Handbook and on our website, and a timetabled lecture in year 2. Our undergraduates were also invited to the Career Development symposium we organised in 2017.

More recently (18/10/2017) an UG student working group was launched. Some of the issues identified are now incorporated into our Silver Action Plan (expand the consent training to all year groups, SILVER ACTION 17).

Postgraduate students

PGR students have regular documented meetings with their supervisors. Supportive annual Progress Reviews are conducted independently. For part-time students, expectations are proportionate to hours of study.

There is an annual BSMS PGR student symposium. In 2017, there were 39 attendees (22F, 17M), 11 oral presentations by current students (7F, 4M), and 8 poster presentations by 1st/2nd year PGR students (6F, 2M).

Focus group discussion with female PGR students in summer 2015 highlighted a need for more information about support available. The School Manager revised the PGR handbook to provide better guidance to this group (BRONZE ACTION 12).

BSMS has had a successful NIHR Integrated Academic Training Programme for over ten years with many Academic Clinical Fellows (16F, 11M). Trainee representatives attend quarterly meetings of the Academic Training Steering Group where female career progression and AS initiatives are discussed. To date 3F ACFs have achieved prestigious PhD fellowships (1 MRC, 2 Wellcome Trust), and 2M ACFs have achieved fellowships (NIHR, Fulbright Commission). The ACFs have a successful peer-mentoring scheme, run by two female trainees, in which trainees are organised into academic “families” to provide mentoring opportunities for Academic Foundation Programme (AFP) trainees, of which we have 18 posts annually. The majority of our AFP trainees for 2017/18 are female (60:40) and, in 2016/17, 10% of BSMS graduates achieved AFP places (8F, 6M).

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

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

Researchers at BSMS are supported in a number of ways by:

- their line managers
- the BSMS ECR Lead who runs networking events, training and a website
- the BSMS Departmental Research Leads who are accessible contacts for researchers preparing funding applications to ensure support and constructive feedback at an early stage
- the BSMS Director of Research and Knowledge Exchange (DRaKE) who provides feedback and ensures the application highlights strengths of the research environment
- the UoS Research Staff Office provides general career development training, coaching, mentoring and other support
- the UoS Research Development Office has staff dedicated to BSMS for advising on and processing funding applications
- the Research Design Service (RDS) South East

UoS organises events and workshops around specific funders and specific calls (e.g. Wellcome Trust, ERC). In 04/2017, BSMS organised a specific research day inviting the NIHR Chief Scientific Adviser, to explain priorities and funding streams, including young researcher presentations, Q&A sessions and networking time. BSMS further organised two grant-writing workshops as part of the last Research Day (07/2017), one led by the DRaKE with emphasis on improving rejected funding applications, and one by the Academic Site Lead of the RDS South East.

In order to research our response to this question, we added the following four questions to our staff surveys in 2016 and 2017:

- What sources of support have you accessed when preparing research grant applications? (Figure 34)
- What other sources of support would you like to see provided? (free-text)
- I am given support when unsuccessful in applying for research grant applications (Figure 35)
- Please add further comments about support for research grants here if you would like to (free-text)

Figure 34: AR Staff responses to What sources of support have you accessed when preparing research grant applications?, Staff survey 2017

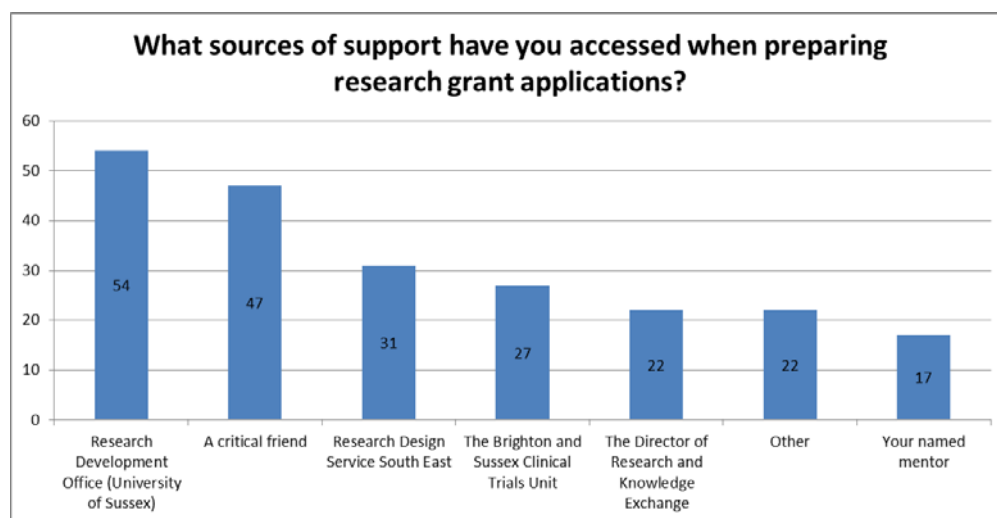
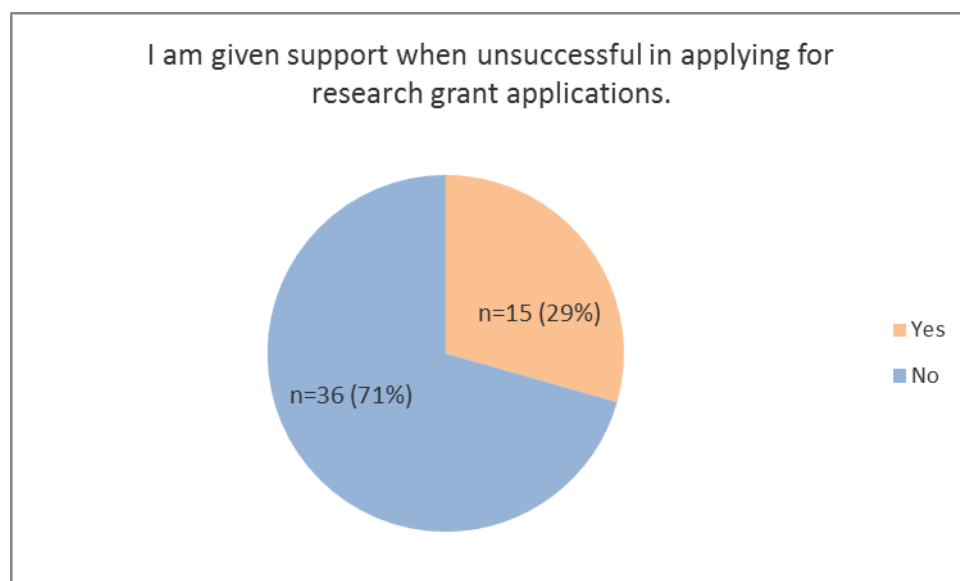


Figure 35: AR Staff responses to I am given support when unsuccessful in applying for research grant applications, Staff survey 2017



Free-text feedback on support needed after an unsuccessful grant application included:

- “an independent person’s input into any feedback received”
- “a process of critical review at that stage would help to reshape an application for further submission”

We have collated the responses to these questions and are working with the BSMS DRaKE and the departmental research leads on an action plan to address these. We will monitor feedback in next year's survey (SILVER ACTION 14).

5.4. CAREER DEVELOPMENT: PROFESSIONAL AND SUPPORT STAFF

SILVER APPLICATIONS ONLY

(i) Training

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

(ii) Appraisal/development review

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

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

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

(i) Training

PST staff are encouraged to attend training provided by our parent universities and can apply for BSMS career development funds as well as for fee waiver at UoB, UoS and City College, the local FE provider. We track the numbers of staff trained and the number of training events at UoS (Table 28). There is a section in the annual appraisal for discussion of training opportunities.

Table 28: UoS SDU training events for PST staff

	Professional Services & Technical staff					
	Number of staff trained			Number of training events		
	F	M	Total	F	M	Total
2014/15	19	3	22	35	6	41
2015/16	25	5	30	40	12	52
2016/17	25	2	27	50	2	52

Within BSMS, we run an annual training event in December for all PST staff which combines presentations on key topics with networking to enable our staff across different sites to meet and discuss relevant work issues.

We also support membership of the AUA for our staff who can attend the annual conference and other training opportunities.

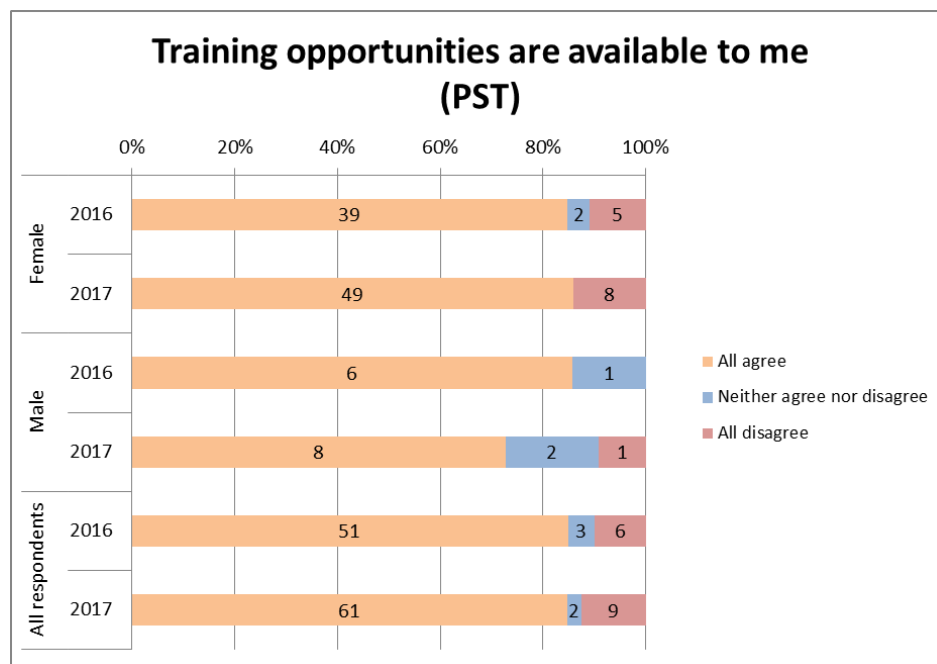
In 02/2017, the AUA PGCert in HE Administration, Management and Leadership was advertised to all PST staff, and one member is now enrolled. We pay the course fees and give time to attend.

PST staff can apply to the staff development fund for training or networking opportunities provided outside the Universities, e.g. attendance at Leadership Foundation training and CASE and ASME conferences.

The Dean's Executive Assistant runs our PA-DA network which has regular meetings with a skill-sharing focus.

We have included PST staff in our annual staff survey since 2016 and can see that 85% (61/72) agree that training opportunities are available to them (Figure 36). We will continue to promote opportunities to them via targeted email and advertising in InPulse as well as emphasising to managers the importance of training for PST staff (SILVER ACTION 15).

Figure 36: PST staff response to Training opportunities are available to me, staff survey



(ii) Appraisal/development review

The main focus of the appraisal process is to support and develop staff, to help them make an effective contribution to the success of the school as well as their own work satisfaction. Our PST staff are expected to have an annual appraisal and it is compulsory that managers and staff attend appraisal training.

Our completion rate for appraisals is reported annually to the central HR department and we achieve a high completion rate (Table 29).

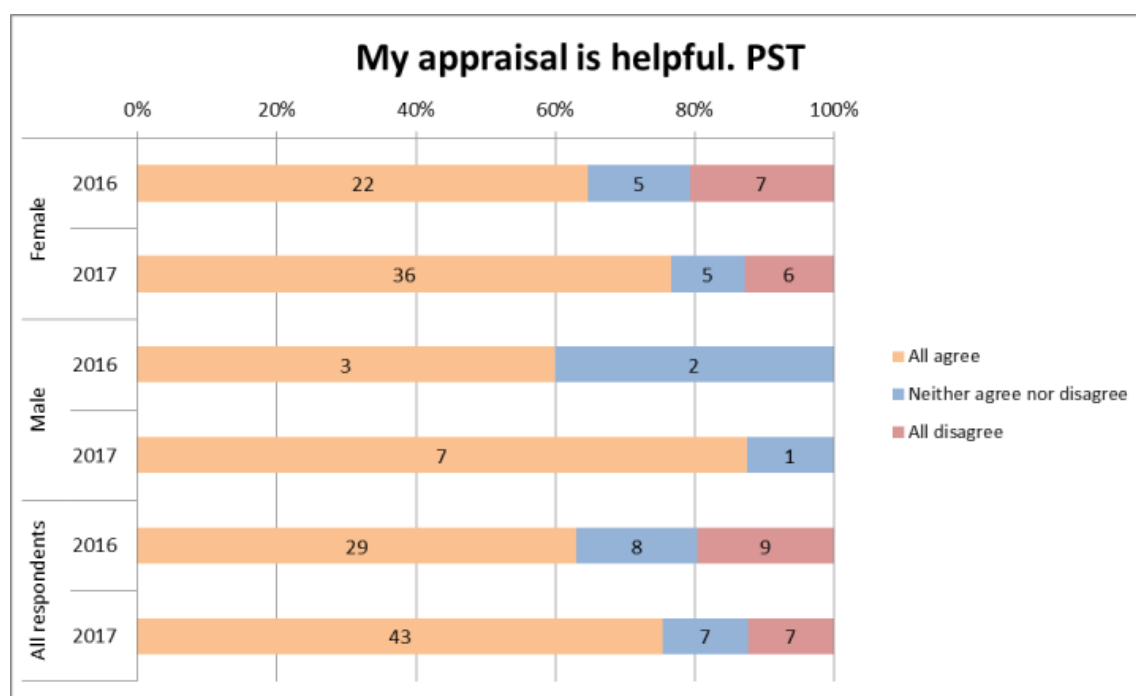
Table 29: PST Staff appraisal numbers

Professional Services and Technical Staff	No. of staff eligible for appraisal	No. of staff appraised	Appraisal rate
2013/14	67	60	90%
2014/15	72	72	100%
2015/16	96	89	93%
2016/17	79	66	84%

Note: staff may not have had an appraisal due to being on maternity/sick leave, new in post or shortly to leave the school.

In 2016, we saw that agreement that the appraisal was helpful was rather low (63%, 29/46) (Figure 37).

Figure 37: PST staff response to “My appraisal is helpful”, staff survey



We promoted appraisal training to all our managers and can see an improvement in agreement in the 2017 survey to 75% (43/57). We will continue to promote this training and to monitor the satisfaction (SILVER ACTION 11).

We have also looked at the free-text comments from the survey which included:

“Generally useful – sets some goals for the upcoming year which is helpful but I would prefer more regular discussions about my performance and what we can work on”.

We are working with SDU to put together a training plan for new managers to support them in managing well, including the need for regular meetings between line managers and their staff (SILVER ACTION 12)

(iii) Support given to Professional and Support Staff for career progression

In common with most other HEIs, there is no mechanism for promotion within roles for PST staff and we see a much less favourable response to our question on career development opportunities (Figure 38) than training (Figure 36). For career progression, the emphasis is on gaining skills and experience that will enable staff to be recruited into more senior posts. We are committed to helping our staff develop and have been using feedback from our staff surveys in 2016 as a basis for the work done by the PST sub-group.

Free-text feedback in staff survey:

“Support to progress within Professional Services with a combination of training and being able to participate in project work. A Professional services career development pathway might be an initiative that BSMS could consider. This could be useful in providing a broader skill set for support across Prof. Servs at BSMS.”

In its first year, the PST sub-group put together two key initiatives in relation to career progression:

- Café Club: a networking club for PST staff across the school. Each month staff who want to take part are paired with someone in a different team (and usually a different site) and given a refreshments voucher for the on-site café. The purpose is to enable staff to build their networks and to provide advice and information on each other's roles, as well as a discussion on their career progression and interests. There have been 21 pairings to date since May 2017. We will survey participants and review the structure of the club to ensure it remains useful and relevant (SILVER ACTION 15).

- Skills-sharing board: there were requests in our survey for a mechanism to find out about and take on project work within the school that would aid skills-building in particular areas. A skills-sharing board has therefore been set up which allows staff to post about available projects. One example was the handbook for BSMS external examiners which was advertised on the board and completed by a member of PST staff in another team. The board is also used to share tips and knowledge.

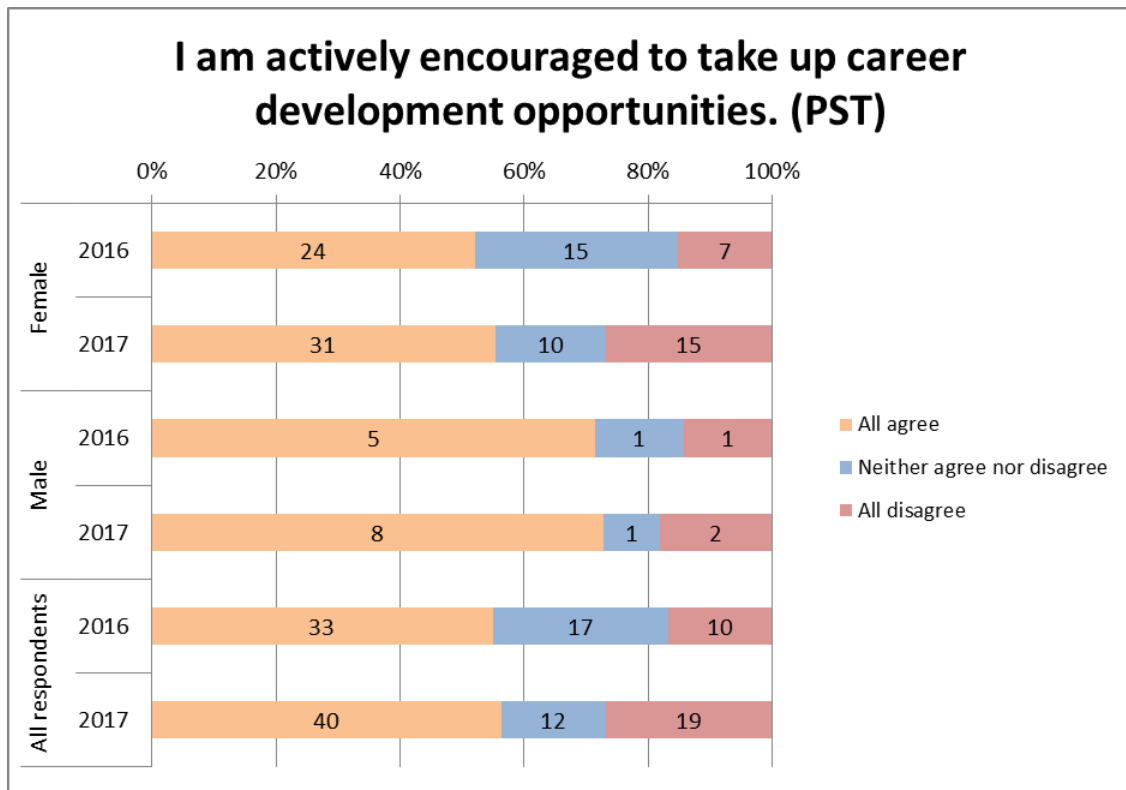
We have looked at the possibility of including our PST staff in the BSMS mentoring scheme but the feedback from the staff survey is that they would prefer to be mentored outside BSMS. UoB has recently launched a PST mentoring scheme, which we are promoting to our staff. We are also liaising with SDU and the mentoring teams at UoS (SILVER ACTION 16).

We are also working with SDU at UoS to put together a training bundle for Grade 4 PST staff to highlight the training that will be most useful to them in progressing to higher level roles. This is a key group of staff who anecdotally feel 'stuck' and find it difficult to progress (SILVER ACTION 15).

These initiatives are the beginning of work which will continue into 2018 and beyond using the free-text feedback from the 2017 staff survey.

The improvement in response to our actions in relation to career development is very modest so far (F: from 52% to 55%, M: from 71% to 72%) (Figure 39). We will continue work in this important area (SILVER ACTION 15).

Figure 38: PST Staff survey response: I am actively encouraged to take up career development opportunities, Staff survey 2016 & 2017



5.5. FLEXIBLE WORKING AND MANAGING CAREER BREAKS

Note: Present professional and support staff and academic staff data separately

(vi) Cover and support for maternity and adoption leave: before leave

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

BSMS is committed to supporting our staff before, during and after maternity or other forms of leave. We follow the HR and health and safety advice provided by UoS and supplement that with additional bespoke BSMS support.

Within BSMS, we have guidance for staff and managers on our intranet page.

We created a simplified maternity flowchart which was circulated to all managers and advertised in our internal newsletter (BRONZE ACTION 18).

Similar flowcharts are being created for adoption, shared parental and paternity leave (SILVER ACTION 20).

In addition to the manager's checklist (written by BSMS) and guidance to managers on discussions around work cover and communication with their staff, we organised a training session for managers on handling maternity leave as part of our IWD events in 2016 (BRONZE ACTION 18).

Work has been done by the Inclusivity team on the RCUK maternity policy and investigating how other funders apply this. BSMS has 59 researchers attached to 37 different funding grants. A member of the Inclusivity Team contacted a selection of funders to find out how maternity would be treated in terms of funders' deadlines, possible extensions, use of grant to pay for cover and childcare. We wanted to explore how we could ensure all researchers were treated consistently regardless of the funder. We are taking this forward on a case-by-case basis for the small number of staff this applies to (BRONZE ACTION 19, SILVER ACTION 18).

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

Our staff and managers work together to decide what support the member of staff will need during maternity leave. We encourage staff to use KIT days to attend training, conferences or trial days in the run-up to returning from leave. Staff and managers are also expected to have a pre-departure discussion about the level of involvement they wish to have while on leave, whether that be to have no work contact while off, some email contact or involvement via KIT days.

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

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

We aim to make the return to work as smooth as possible and provide a range of facilities to achieve that. These include on-site breastfeeding facilities and on-site nurseries at UoS, UoB and NHS sites.

For older children, there are activity camps at UoS during the school holidays.

We promote the family-friendly and flexible working policies that are available as well as providing other relevant information such as the HMRC guidance on taxation of childcare costs.

The BSMS Career development fund is available to all staff and can be used where there are additional childcare costs due to conference attendance.

One of our non-clinical senior lecturers who had been 0.9 FTE prior to her maternity leave returned to work 0.5 FTE when her baby was six-months-old, and, at eight months, increased this to 0.8 FTE. This flexibility supported her in balancing her work in the initial return phase. We are pleased that she achieved promotion to Reader in the year after her return.

(iv) Maternity return rate

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

Table 30: Maternity return data for AR Staff

Academic and Research Staff					
Academic Year	Returned to work after mat leave	In post 6 months later	In post 12 months later	In post 18 months later	Contract type
2012/13	Y	Y	Y	Y	
2012/13	N	N	N	N	Fixed-term
2012/13	Y	Y	Y	Y	
2013/14	Y	N	N	N	Fixed-term
2013/14	N	N	N	N	Fixed-term
2014/15	Y	Y	Y	Y	
2014/15	Y	Y	N	N	Fixed-term
2014/15	Y	Y	Y	Y	
2015/16	Y	Y	Y	future date	
2015/16	Y	Y	Y	future date	
Return/Retention rate	80% (8/10)	70% (7/10)	60% (6/10)	50% (4/8)	

10 AR staff have been on maternity leave over last 4 academic years. Our maternity return rate is 80% (8/10), with retention gradually dropping to 50% (4/8) 18 months later (Table 30). The 4 who have either not returned or left since returning were all on fixed-term contracts which finished due to funding ending. We will continue to provide support to all staff recently returned from a career break including **access to a fund to support their research and more flexible hours for those recently returned from a career break (SILVER ACTION 30)**. In addition, for those on fixed-term contracts who often struggle to achieve contract extensions as they are on leave at critical times in this process, we will **extend their contracts by the length of time of their break**, so that they are not disadvantaged by it (e.g. extension of 6 months, if a 6-month break was taken) (SILVER ACTION 19).

Table 31: Maternity return data for PST Staff

Professional Services and Technical Staff

Academic Year	Returned to work after mat leave	In post 6 months later	In post 12 months later	In post 18 months later
2012/13	N	N	N	N
2012/13	Y	Y	Y	Y
2012/13	Y	Y	Y	Y
2013/14	Y	Y	Y	Y
2014/15	Y	Y	Y	Y
2014/15	Y	N	N	N
2014/15	Y	Y	Y	Y
2015/16	Y	Y	N	N
2015/16	Y	Y	Y	future date
2015/16	Y	N	N	N
Return/Retention rate	90% (9/10)	70% (7/10)	60% (6/10)	56% (5/9)

10 PST staff have been on maternity leave over last 4 academic years. Our initial maternity return rate is 90% (9/10), gradually dropping to 56% (5/9) 18 months after return (Table 31).

Since 2013, we have sent all our maternity returners the BSMS-specific maternity-returner questionnaire 3 months after their return. Feedback is collated and acted upon (COMPLETED BRONZE ACTION 17). This led to the maternity flowchart diagram. Respondents were aware of UoS's maternity policy. They requested that all information (payroll, HR, pension, KIT days, flexible working) is collated in one place and that managers receive training in maternity support. Additional information is now available for staff and their line managers through the BSMS intranet, with clear links to UoS policies (COMPLETED BRONZE ACTION 18).

SILVER APPLICATIONS ONLY

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

Included in tables 30 and 31 above

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

Provide data and comment on the uptake of these types of leave by gender and grade. Comment on what the department does to promote and encourage take-up of paternity leave and shared parental leave.

There is very low uptake of these forms of leave within BSMS. In the last six years, there have been no requests for adoption leave or shared parental leave. As context, we know that, of 2150 staff at UoS, only 5 individuals have taken shared parental leave and nobody has taken adoption leave in the last 3 years (BRONZE ACTION 20).

In BSMS, since 2012, there have been 2 instances of parental leave and 6 requests for paternity leave.

We will continue to promote these policies to all our staff and managers (SILVER ACTION 20).

(vi) Flexible working

Provide information on the flexible working arrangements available.

BSMS supports a range of flexible working; 27 formal flexible working requests (23F, 4M) have been made and approved in the last 6 years (Table 32).

Table 32: Formal flexible working requests by year

		AR	PST	Total
2011/12	F	1	1	2
	M		1	1
2012/13	F	3	2	5
	M			
2013/14	F	1	1	2
	M			
2014/15	F	1	1	2
	M			
2015/16	F	2	4	6
	M	1		1
2016/17	F	2	4	6
	M	1	1	2
Total	F	10	13	23
	M	2	2	4

These numbers are only formal (those that have gone through HR) flexible working requests. In our Bronze submission, we explained that, anecdotally, many more arrangements (such as shifted hours to accommodate school runs or working from home on a set day) have been agreed informally. We therefore introduced some questions about flexible working into our staff survey from 2015 and we can show that 34 AR and 30 PST staff (both F and M) have an informal flexible working arrangement in place (Figures 39 and 40) (COMPLETED BRONZE ACTION 16).

Figure 39: I have an informal flexible working arrangement, AR, 2017 staff survey

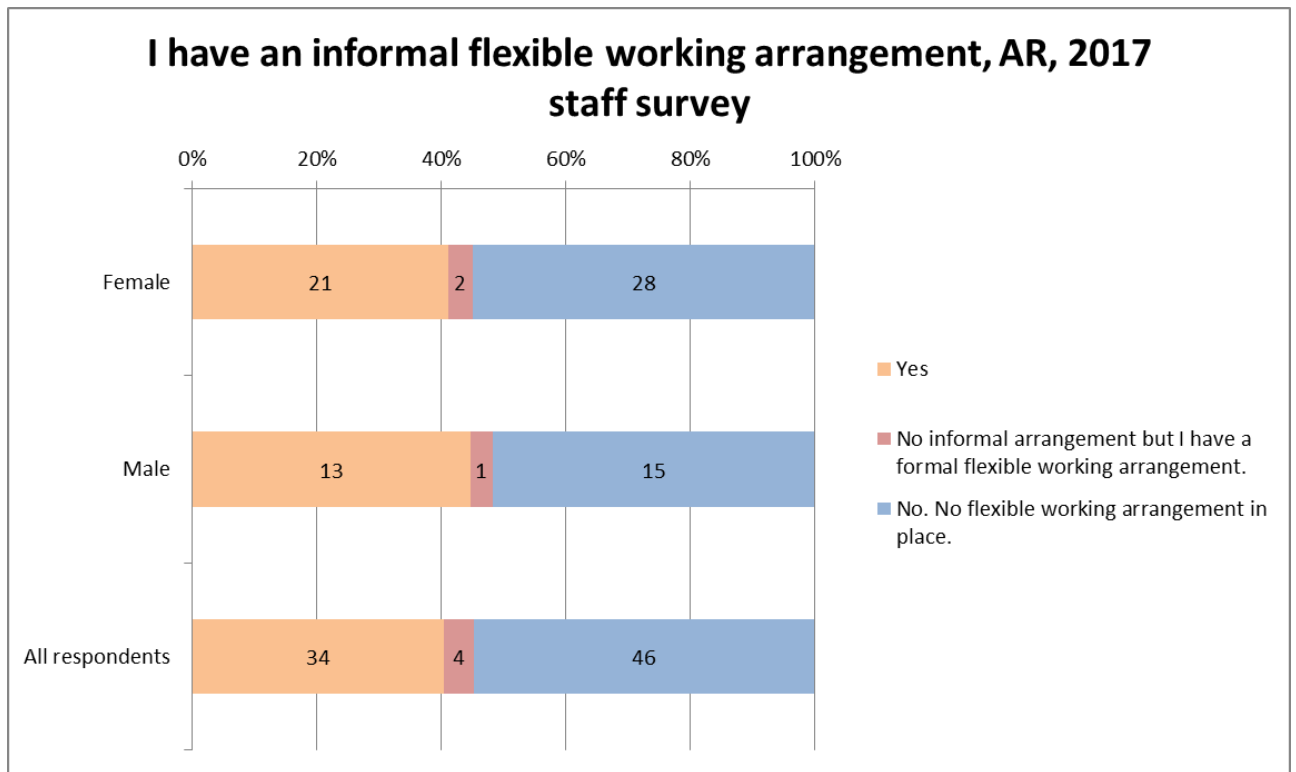
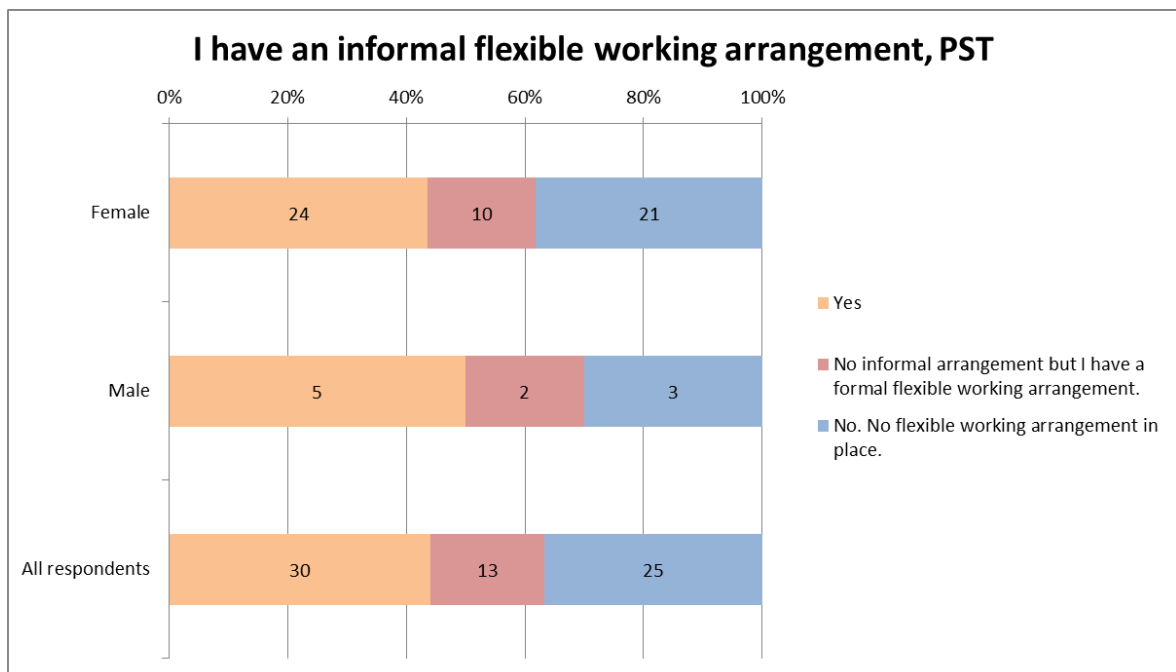


Figure 40: I have an informal flexible working arrangement, PST, 2017 staff survey



Since 2015, we have also been publicising our flexible working policy. More detailed policy guidance was written following the PST focus group in March

2016. As well as flexible working, this also addresses common questions around TOIL and overtime. The policy was presented to the PST sub-group for feedback, was promoted to all staff via InPulse and is available on our intranet.

We have been tracking staff confidence that managers are supportive of flexible working arrangements and are pleased that, for AR staff, this is increasing following these actions (Figure 41). For PST staff, we only have two years of staff survey data and although the number of staff agreeing has increased (from 43 to 49), this is a % decrease (from 78% 43/55 to 71% 49/69) (Figure 42). We will continue to promote flexible working for PST staff and to provide guidance to line managers and will monitor this again in the staff survey in 2018 (SILVER ACTION 21).

Figure 41: My line manager is supportive of requests for flexible working arrangement, AR

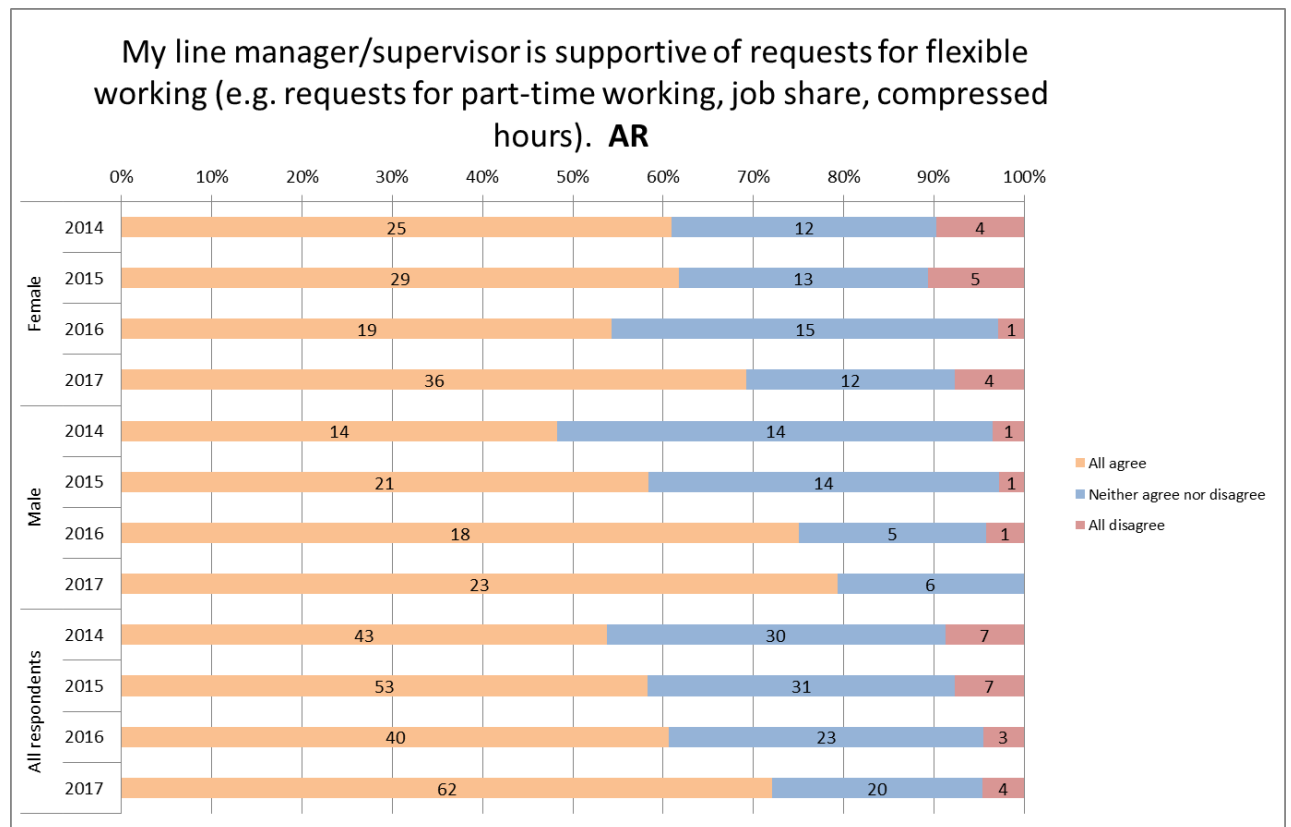
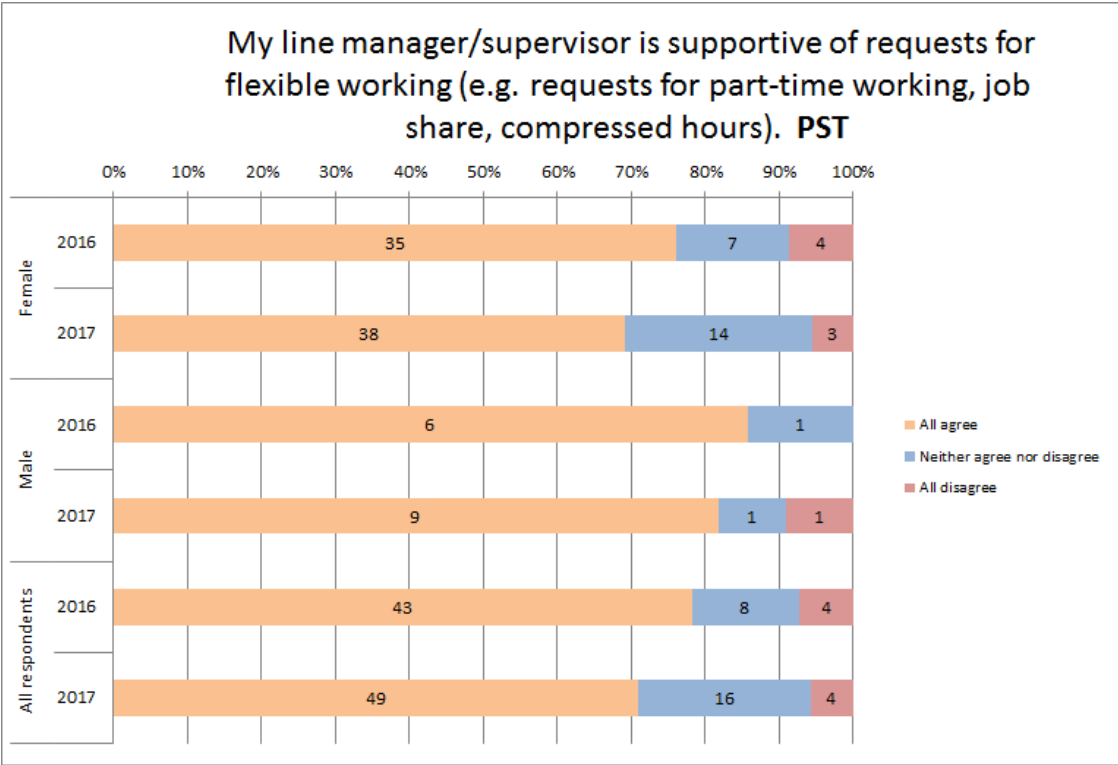


Figure 42: My line manager is supportive of requests for flexible working arrangement, PST



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

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

Requests from staff who want to transition from part-time to full-time are made under the flexible working policy. We provide information on this policy to staff and managers via the manager's toolkit on our intranet.

We encourage all staff to achieve a good work-life balance and encourage them to review this as their work and life circumstances evolve and support bespoke solutions to increasing hours as illustrated in this case study:

Redacted case study for public distribution:

RF/Lecturer:

I was working on a part-time research-only contract. My line manager supported me in getting teaching experience and responsibilities to prepare myself for a teaching and research role. I was then appointed to an additional part-time Lecturing role, in a competitive process, making my position full-time. I believe my success was thanks to the experience I had accrued, due to the support of my line manager. My line manager has been very supportive in my working my full-time hours flexibly so that I can still meet my childcare commitments around school hours.

5.6. ORGANISATION AND CULTURE

(i) Culture

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

As part of our commitment to the AS Charter principles, particularly the underrepresentation of women in academic medicine (principle 3), we have initiatives that support their academic careers and promote a positive and inclusive culture, e.g.:

- job advertising wording
- unconscious bias training of selection panel members
- promotions workshop
- mentoring scheme
- promotion of female role models

The BSMS Research Away Day included an activity called the **Privilege Walk**, and a lecture on Power and Privilege in Research and how it affects women and minorities. This was attended by over 80 members of staff. Comments we received included:

"The exercise made us all consider the balance between "earned" status, opportunities, and effort. The way in which institutions favour easy paths and hold to simple performance outcomes was brought to mind in relation to hierarchies of privilege and disadvantage".

Professor on indefinite contract, M.

We demonstrate our commitment to the AS Charter principles on removing obstacles faced by women at major points of career development (principle 5) by:

- observing core working hours for meetings and networking events
- supporting formal and informal flexible working arrangements

- promoting information on maternity rights and provisions to all BSMS students and staff
- focus groups and surveys to chart the issues affecting career progression
- BSMS staff development fund for conferences and training
- ECR Lead role
- Academic Clinical Lead role (SILVER ACTION 6)
- contract extension for maternity breaks in fixed-term contracts (SILVER ACTION 19)
- returners fund (SILVER ACTION 30)
- BSMS postgraduate and ECR conference days
- BSMS PhD and postdoctoral conference attendance funds
- IWD Career events among other initiatives (BRONZE ACTION 37)

Staff consistently agree that BSMS is a great place to work (Figures 43, 44). For F AR staff this improved from 82% to 90%, while for M this is stable at 87%. For F PST staff this improved from 85% to 93% over 2 years, while for M agreement improved from 85% to 90%.

Figure 43. AR staff responses to the question that BSMS is a great place to work for years 2014 – 2017.

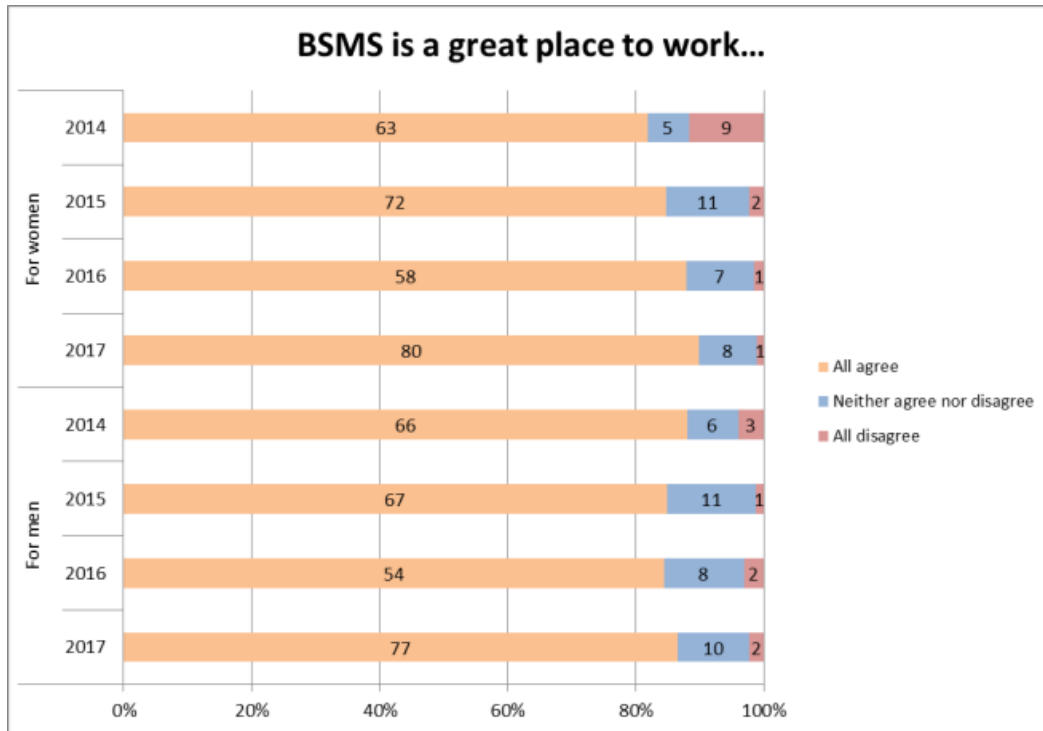
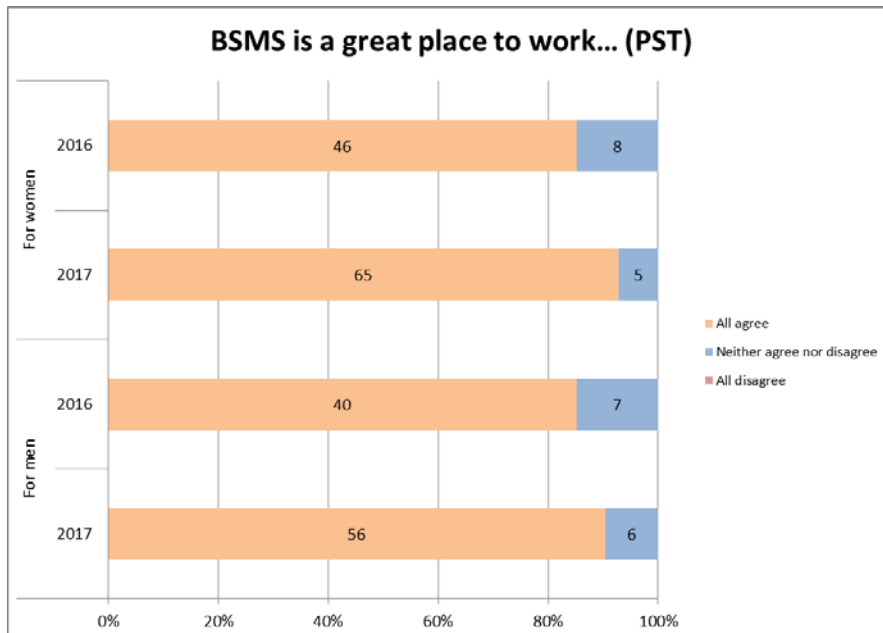


Figure 44. PST staff responses to the question that BSMS is a great place to work for years 2016 & 2017.



Staff also agree that BSMS culture has improved over the last 3 years (Figures 45 & 46). Agreement for F AR is at 90%, for M AR at 87%, while for F PST at 84%, and M PST at 86%.

Figure 45. AR staff responses to the question that culture at BSMS has improved over the last three years.

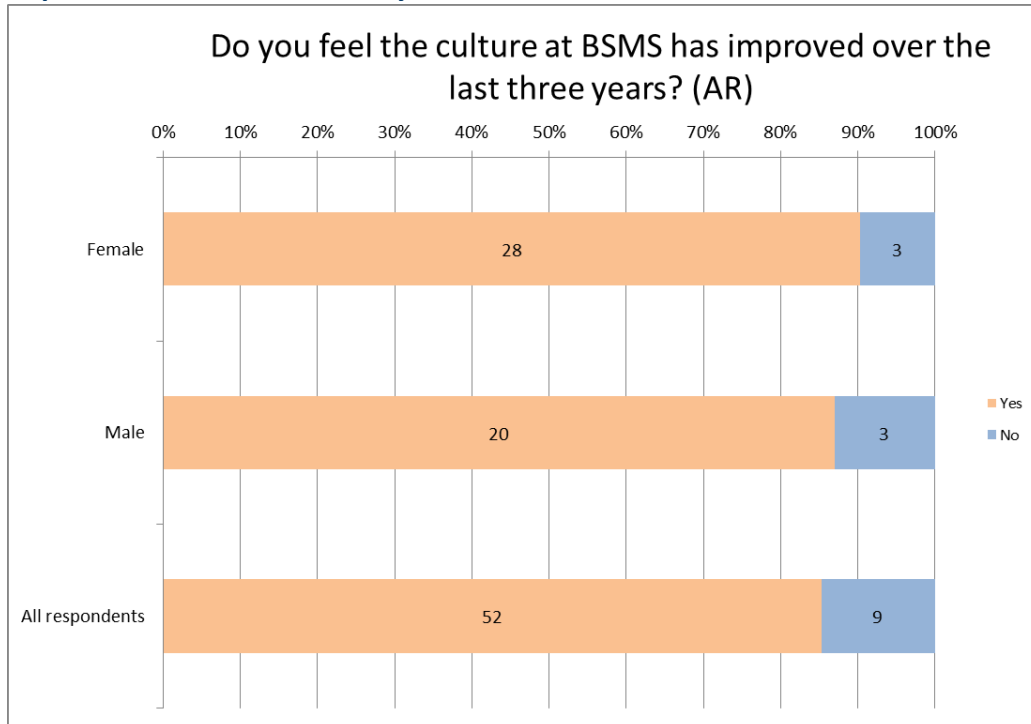
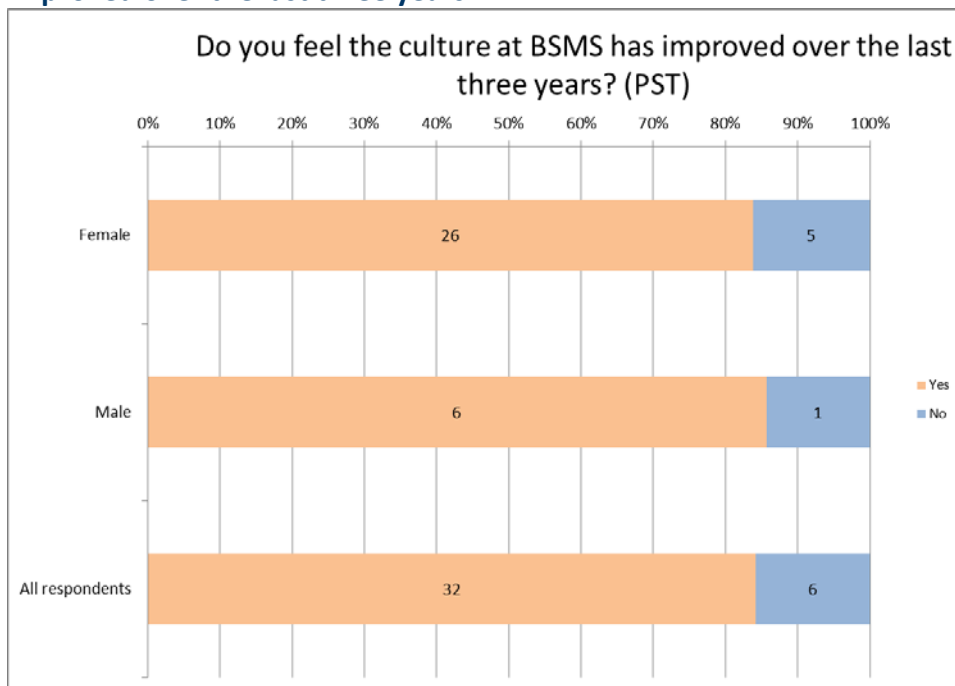
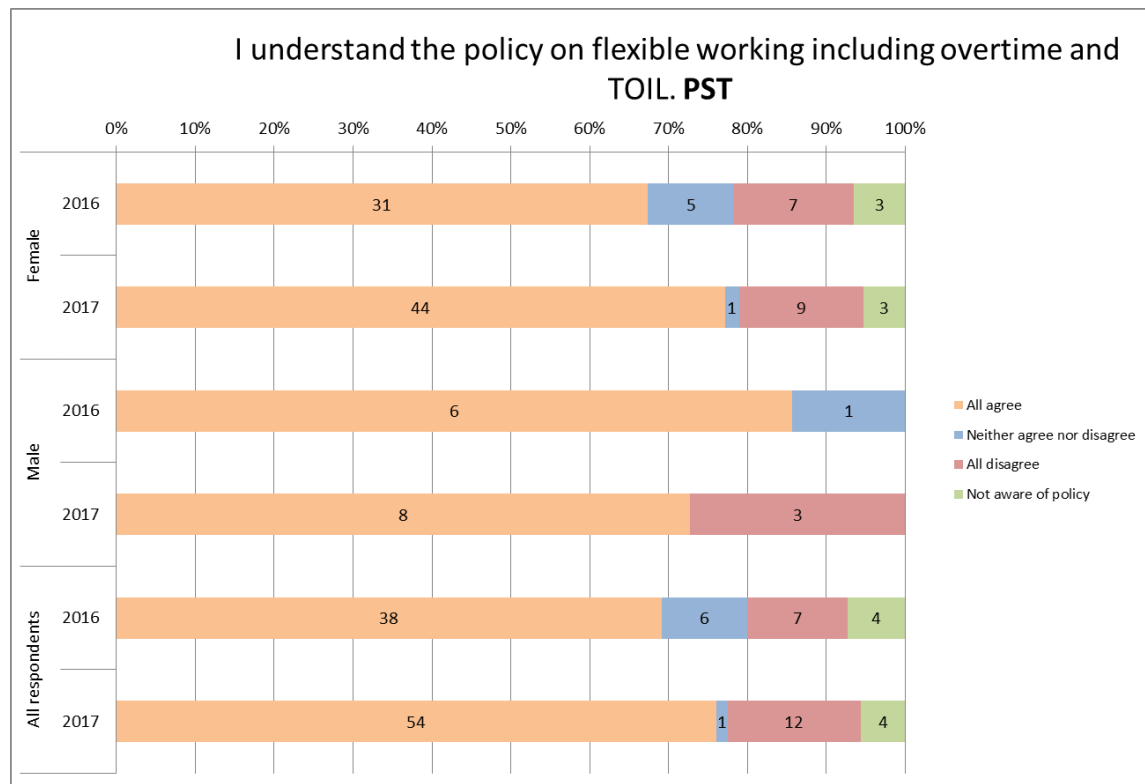


Figure 46. PST staff responses to the question that culture at BSMS has improved over the last three years.



We believe that the actions we took with the **Café Club for PST staff**, the **PST sub-group of the Inclusivity team** and greater use of InPulse for news from all sections of BSMS has helped improve the sense of belonging and wellbeing. For example, the PST focus group showed that staff did not always understand the policy on overtime and TOIL. Following training of line managers and targeted dissemination of information, understanding of the policy increased from 69% (38/55) in 2016 to 76% (54/71) in 2017 (Figure 47).

Figure 47. PST staff responses to “I understand the policy on flexible working policy”.



With respect to students, we emphasise equality, diversity and inclusivity as features of BSMS culture throughout the curriculum and in our prospectus. We include E&D questions to end-of-year surveys since 2013/14 (Table 33). The question asks about inclusivity in general terms, e.g. disability, gender and race. 91%-93% of the students agree that BSMS is an inclusive environment, while free-text comments indicate disagreement refers to social background (“too many wealthy, privately educated people”) and race (“not enough people of colour”).

The **BSMS Ethos statement** that addresses E&D is included in student handbooks and presented at Induction. It was created as a joint action between Student Support and the Inclusivity team in 04/2014. Extract:

“At BSMS we strongly believe that our curriculum must be value-based, both inside and outside the classroom; and that all people involved with our school should feel welcome and respected, and should be helped to feel confident about themselves and valued for the positive contributions they can make. The school has a commitment to [E&D] including protected characteristics such as gender, race, disability, religion, age and sexuality.”

Table 33: Student responses to E&D questions

Student Questionnaire - Equality and Diversity Responses

Do you think BSMS is an inclusive environment?

		Year 1	Year 2	Year 3	Year 4	Year 5	All Years
2013/14	No of responses	118	81	99	88	40	426
	Yes*	111	75	89	78	40	393
		94%	93%	90%	89%	100%	92%
	No*	6	2	7	1		16
		5%	2%	7%	1%		4%
	Other*	1	4	3	9		17
		1%	5%	3%	10%		4%
2014/15	No of responses	135	136	93	98	68	530
	Yes*	127	118	86	89	65	485
		94%	87%	92%	91%	96%	92%
	No*	5	6	1	2		14
		4%	4%	1%	2%		3%
	Other*	3	12	6	7	3	31
		2%	9%	6%	7%	4%	6%
2015/16	No of responses	122	132	41	89	80	464
	Yes*	116	115	33	83	75	422
		95%	87%	80%	93%	94%	91%
	No*	2	0	5	3	2	12
		2%	0%	12%	3%	3%	3%
	Other*	4	17	3	3	3	30
		3%	13%	7%	3%	4%	6%
2016/17	No of responses	128	111	101	67	73	480
	Yes*	114	106	92	66	68	446
		89%	95%	91%	99%	93%	93%
	No*	1	4	3	1	5	14
		1%	4%	3%	1%	7%	3%
	Other*	13	1	6	0	0	20
		10%	1%	6%	0%	0%	4%

*Based on textual analysis of responses

We provide formal learning opportunities in the curriculum for the students to challenge perceptions and reflect on issues of E&D and inclusivity, e.g. SSCs offered to UG students include "Understanding Gender", and "LGBT patients in a straight world: Meeting the healthcare needs of marginalised groups."

Following a suggestion from the MedSoc Welfare and Inclusivity Officer to run a **compulsory workshop on sexual consent**, we delivered one for all students starting in 2017 as a one-off session during Induction Week. The delivery of this two-hour training workshop required coordination between School Office, MedSoc, local Sexual Health Service, and a local sexual violence charity.

This year BSMS inaugurated a **series of talks on “Diversity in Medicine”**, open to staff and students on an early afternoon slot, followed by panel discussion and networking time. Topics are selected to address diversity issues from a medical angle, to increase scientific knowledge and improve clinical practice. The first talk, The Science behind Unconscious Bias took place on 27/11/2017. Future topics will include trans patients and their needs (03/2018), obesity and mental health.

Panel discussion at first termly “Diversity in Medicine” talk, November 2017



(ii) HR policies

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

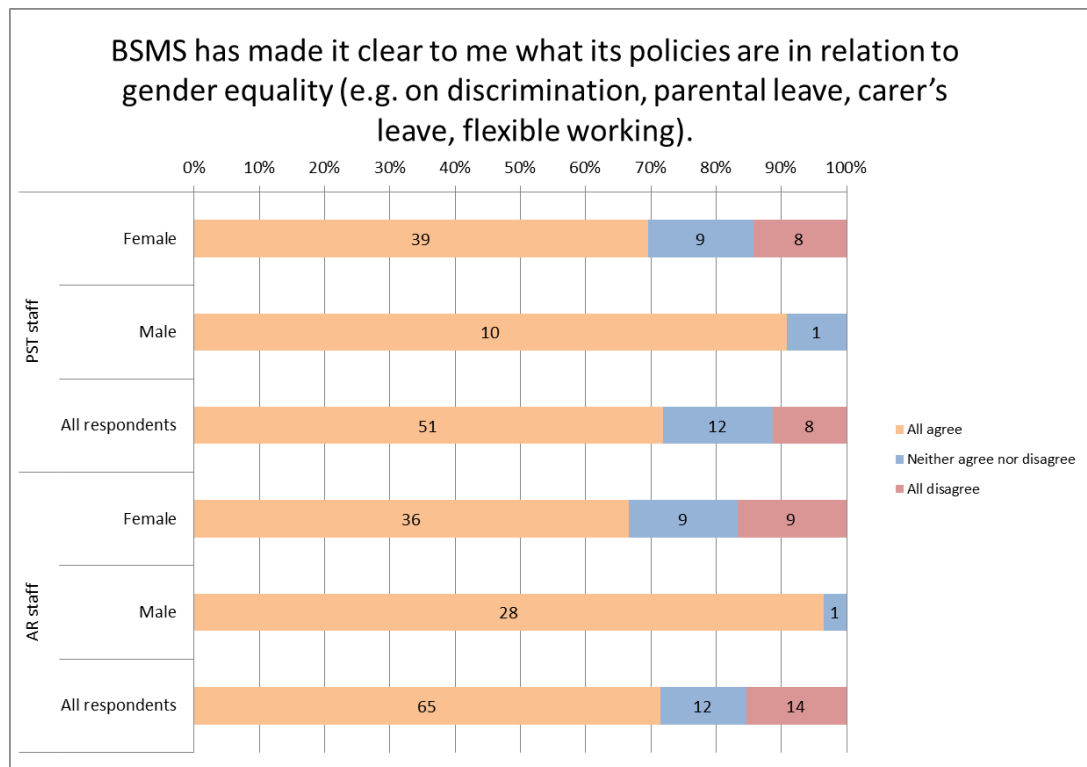
Our dedicated HR Adviser guides managers and staff on HR policies and practices, and ensures that managers take a consistent approach.

To supplement this, we promote important policies to staff and to managers via:

- campaign on bullying & harassment poster
- InPulse articles on policies
- managers toolkit area of SharePoint
- mandatory training for managers (e.g. recruitment, appraisal training)
- highlighting key policies during BSMS induction for new staff

We asked staff whether they feel a selection of the policies were clear (Figure 48). Across both PST and AR staff, the response was positive with over 70% of staff agreeing (PST 72%, 51/71, AR 71%, 65/91). We will continue our current activities to ensure we reach the remaining 30% (SILVER ACTION 22).

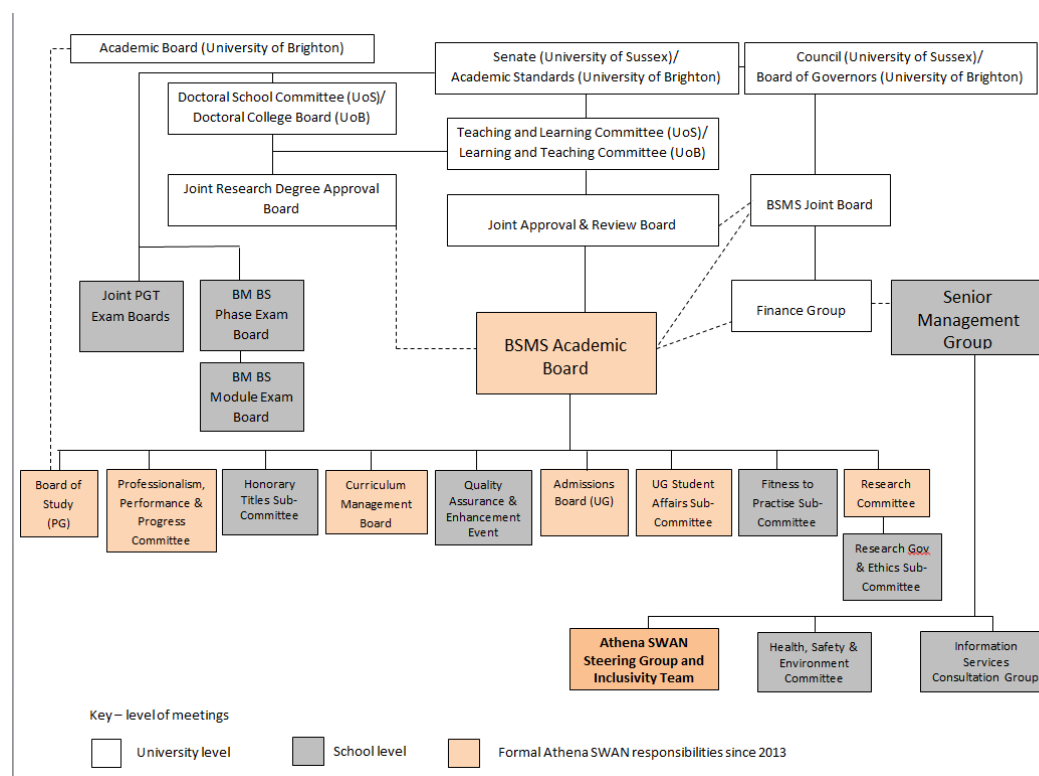
Figure 48. PST and AR staff responses to “BSMS has made it clear to me what its policies are in relation to gender equality (e.g. on discrimination, parental leave, carer’s leave, flexible working).”



(iii) Representation of men and women on committees

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

Figure 49: BSMS committee structure



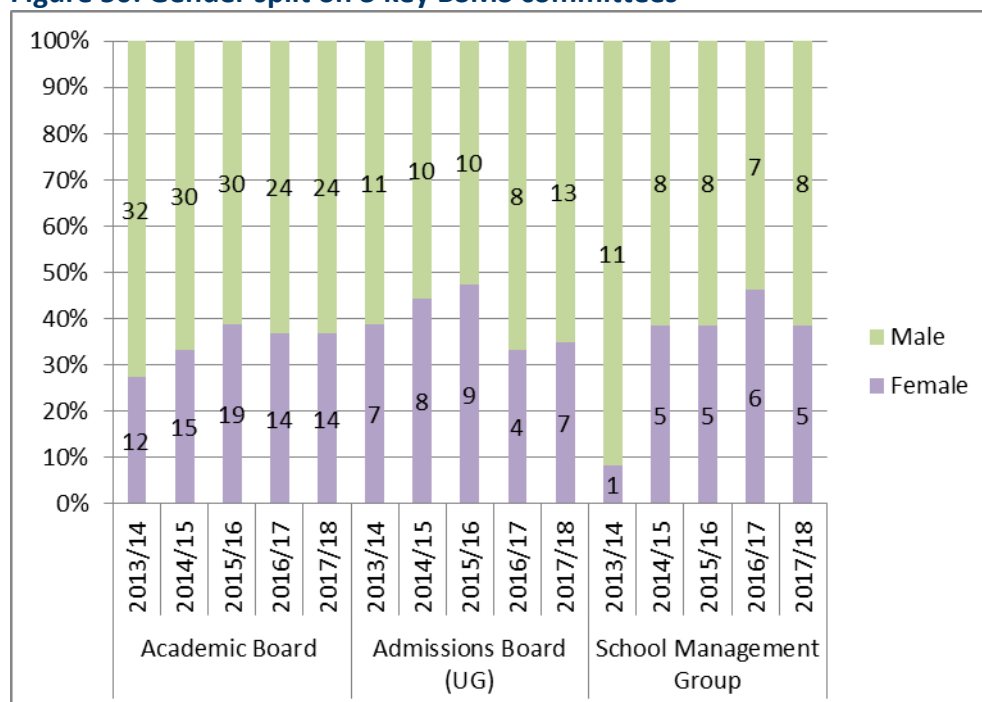
The BSMS committee structure is informed by the governance and reporting structures of our parent universities (Figure 49). The committee handbook lists membership of each committee including its gender balance to ensure this is considered.

Table 34: Gender split on BSMS committees

At start of academic year:	2013/14			2014/15			2015/16			2016/7			2017/8		
	Female		Male	Female		Male	Female		Male	Female		Male	Female		Male
	No.	%	No.	No.	%	No.	No.	%	No.	No.	%	No.	No.	%	No.
Academic Board	12	27%	32	15	33%	30	19	39%	30	14	37%	24	14	37%	24
Board of Study (PG)	13	41%	19	10	40%	15	12	48%	13	11	44%	14	11	46%	13
Professionalism, Performance & Progress Committee	4	50%	4	9	69%	4	7	58%	5	7	58%	5	7	58%	5
Honorary Titles & External Examiners	2	40%	3	2	40%	3	2	29%	5	3	43%	4	3	43%	4
Curriculum Management Board	9	45%	11	15	63%	9	24	71%	10	12	63%	7	12	63%	7
Admissions Board (UG)	7	39%	11	8	44%	10	9	47%	10	4	33%	8	7	35%	13
Student Affairs Sub-Committee	7	54%	6	26	72%	10	26	72%	10	23	66%	12	23	66%	12
Research Gov & Ethics Sub-Committee	8	50%	8	10	56%	8	9	60%	6	9	56%	7	9	56%	7
Research Sub-Committee	4	27%	11	4	29%	10	6	40%	9	9	53%	8	9	53%	8
School Management Group	1	8%	11	5	42%	7	5	42%	7	6	46%	7	5	38%	8
Health, Safety & Environment	9	60%	6	10	71%	4	10	77%	3	10	77%	3	10	77%	3
Total (all committees combined)	76	38%	122	114	51%	110	129	54%	108	108	52%	99	110	51%	104
School academic staff gender split	51	58%	37	48	56%	38	57	59%	39	76	62%	47	73	57%	55

BSMS has 11 committees (Table 34). The membership of most is dictated by function and expertise. The gap between female committee membership and the proportion of female staff narrowed from 20 percentage points in 2013/14 (38% F committee members, staff F% of 58%) to 6 percentage points in 2017/18 (51% F committee members, staff F% of 57%) (BRONZE ACTION 27, SILVER ACTION 23). There are annual variations in the proportion of female staff on our three key BSMS committees but over the five years this has increased. Female members of SMG have increased from one to 5 over five years (Figure 50).

Figure 50: Gender split on 3 key BSMS committees



(iv) Participation on influential external committees

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

Staff are encouraged to participate in external committees, and this is supported by allocating time in individual job plans. 47 members of staff participate in local, national and international committees (Figure 51). In 2017, male respondents are still more likely to participate in them compared to females (79% vs 40%), however the number of female respondents participating in external committees increased since 2016 (21 vs 12).

Female staff that reported having been encouraged to represent BSMS externally increased (17 in 2016 vs 39 in 2017) (Figure 52).

The main reasons identified for lack of participation were insufficient information about how to get involved and type of committee appropriate for their level of seniority.

To address this, line managers are now advised to discuss external committees during appraisal which will lead to changes in job plans to accommodate such participation. The BSMS staff development fund includes support to attend committee meetings and conferences. This is promoted in InPulse, so members of staff are aware of this opportunity.

Figure 51: Staff survey; I participate in external committees

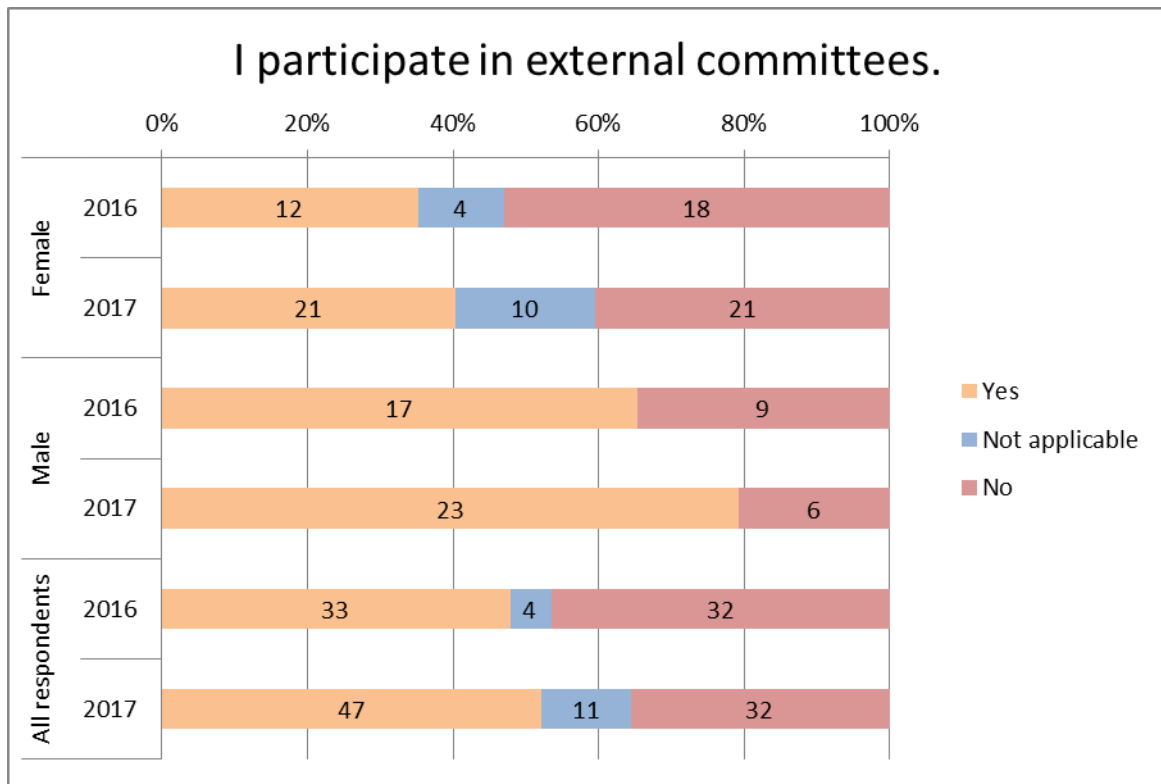
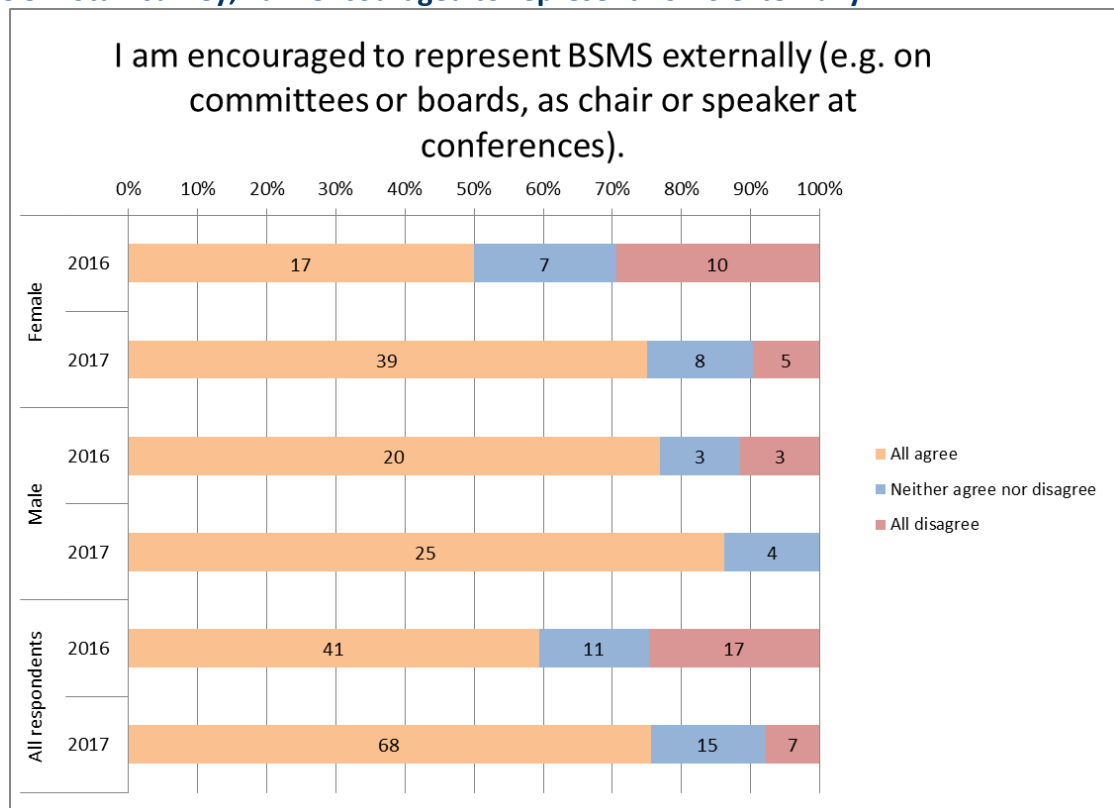


Figure 52: Staff survey; I am encouraged to represent BSMS externally



(v) **Workload model**

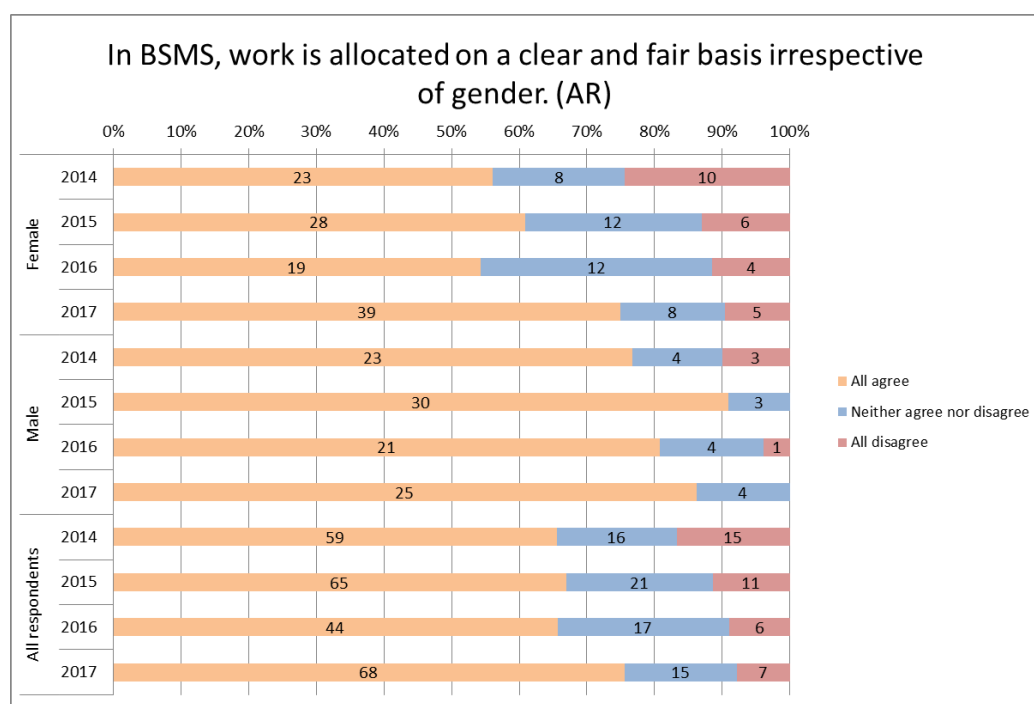
Describe any workload allocation model in place and what it includes. Comment on ways in which the model is monitored for gender bias and whether it is taken into account at appraisal/development review and in promotion criteria.

Comment on the rotation of responsibilities and if staff consider the model to be transparent and fair.

BSMS has a workload allocation model. The Medical School Secretary, Medical School Manager and Dean review the distribution of module leadership, examining, committee and other citizenship responsibilities quarterly. Contracted hours are considered when allocating tasks. Many roles (e.g. committee chairs and some Director posts) rotate three-yearly. Changes to the categories collected are reviewed each year to make sure there is no disadvantage to any groups of staff, e.g. since 2015/16, mentoring and interviewing responsibilities have been added and further refinements, including outreach activities, have been made (BRONZE ACTION 33).

This greater clarity on the work allocation model and the advertising of roles and positions have led to greater satisfaction with work allocation. For our female staff, agreement has increased from 56% in 2014 to 75% in 2017 and for male staff from 77% to 86% (although slightly lower than in 2015) (Figure 53).

Figure 53: work is allocated on a clear and fair basis, staff survey responses



(vi) Timing of departmental meetings and social gatherings

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

The core hours for BSMS academic activities are 9am-5pm. These differ from clinical activities (8am-6pm) and UoS core teaching hours (9am-6pm). We have restricted our core hours further since 2016/17 (COMPLETED BRONZE ACTION 15). Already all whole-school meetings are held between 10am and 3pm and management meetings between 10am and 4pm from 2016/17. Concerns about the early-evening timing of inaugural lectures have been partially addressed by filming these events and making them available online. A refinement to the school's meeting policy has been the recommendation that regular meetings are held on different days each time. All staff have been made aware of this change via InPulse.

Greater discussion about work-life balance and the promotion of meeting times policy has led to greater satisfaction with how meetings are completed within core hours to accommodate those with caring responsibilities (61% in 2014 to 91% in 2017 for AR; 76% in 2016 to 80% in 2017 for PST staff) (Figures 54, 55). Agreement that social activities at BSMS are welcoming has increased from 68% in 2014 to 80% in 2017 for female staff, and 90% in 2014 to 97% in 2017 for male staff (Figure 56) with similar results for PST staff (Figure 58). These results demonstrate the impact of our actions to increase participation of all staff with networking and social activities, which align with the results showing BSMS as a great place to work (Figures 43, 44).

Figure 54: Meetings in BSMS are completed in core hours, AR staff survey responses

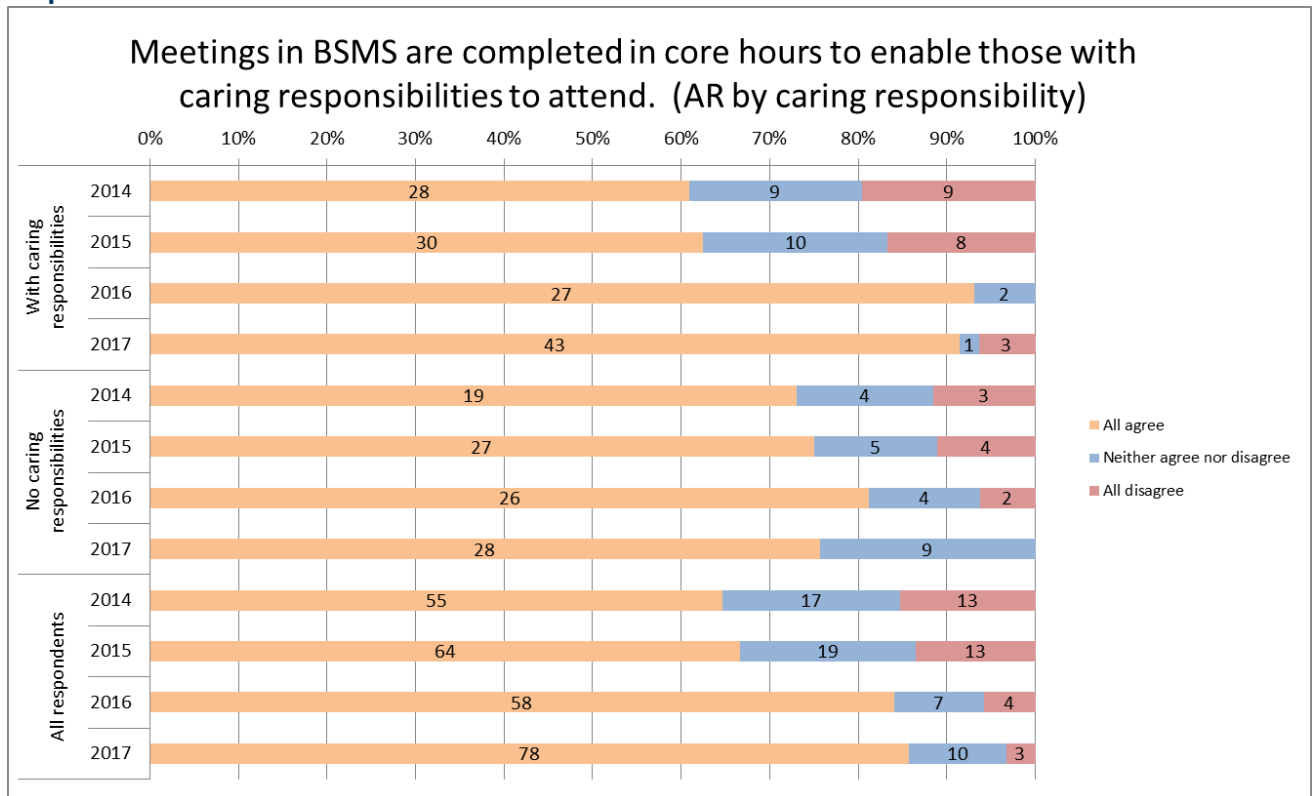


Figure 55: Meetings in BSMS are completed in core hours, PST staff survey responses

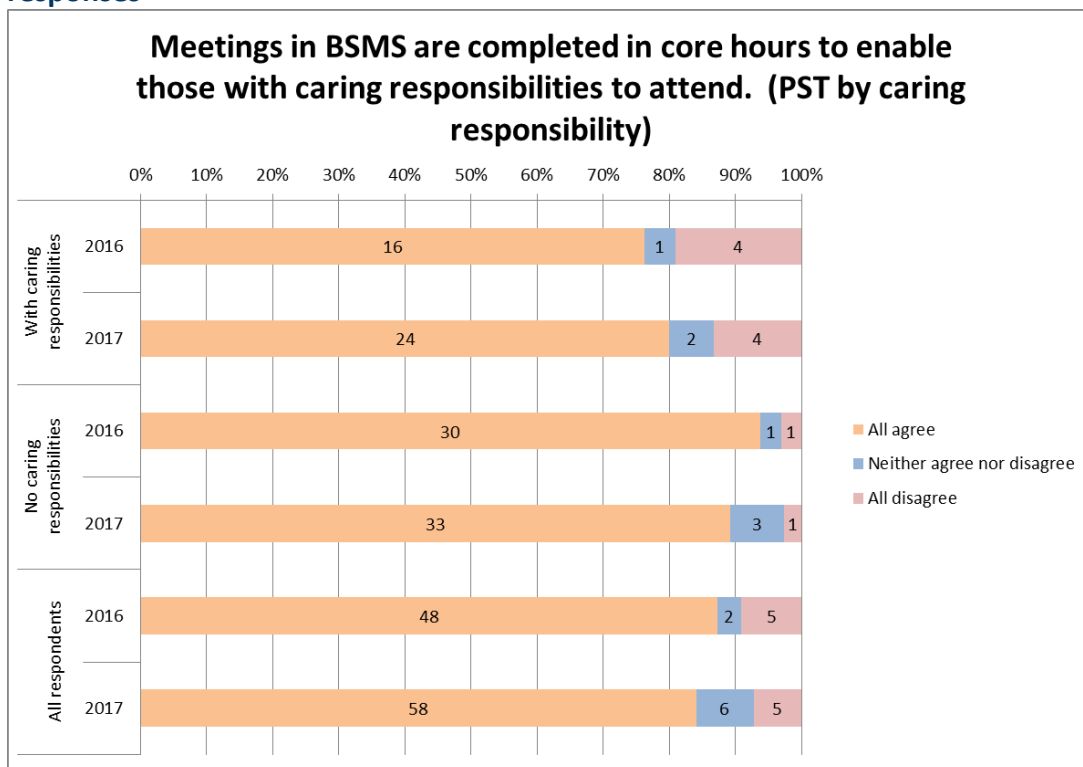


Figure 56: Work-related social activities are likely to be welcoming to both women and men, AR staff survey responses

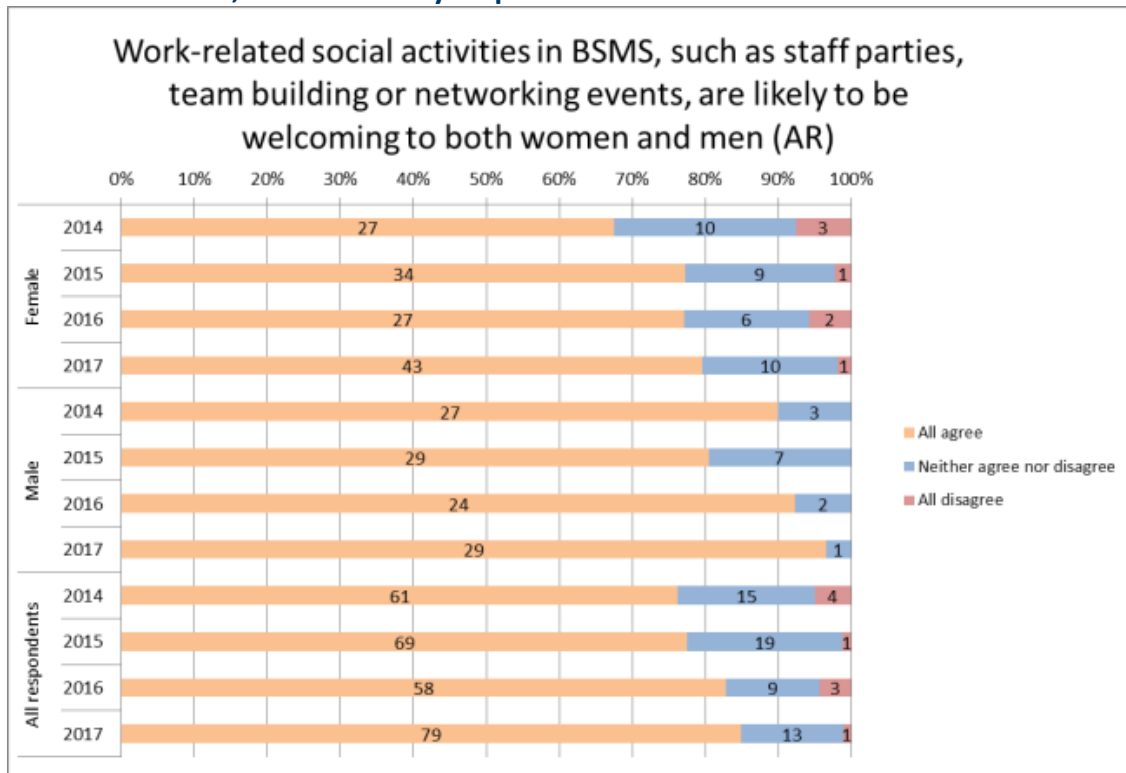
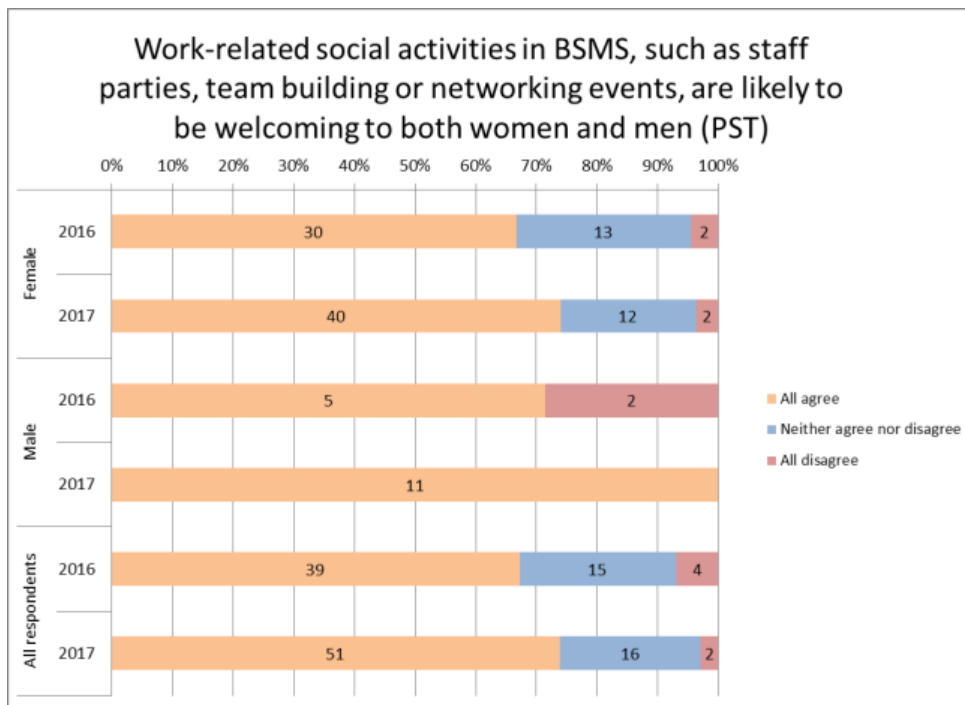


Figure 57: Work-related social activities are likely to be welcoming to both women and men, PST staff survey responses



(vii) Visibility of role models

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

BSMS has a number of seminar series including the PCPH weekly talk and the WiP events and also contributes to seminars organised by the parent universities and the NHS trusts. We are mindful of gender balance when organising talks and events, e.g. during our last Research Away Day there were 12 oral presentations given by 6F and 6M AR staff, and 3 workshops run by 2F and 1M faculty members; during the IWD Career Day, we had 5M and 9F speakers; a mini-symposium on neurodegeneration involved 5F and 5M speakers (Figure 58). The BSMS Communications team always screen promotional materials and images used in InPulse and Pulse (printed magazine) for inclusivity and diversity (Figure 59).

Figure 58: Speakers on a recent BSMS symposium

brighton and sussex
medical school

US
UNIVERSITY
OF SUSSEX

Mini-Symposium
(supported by the Guarantors of Brain)
**Generic Disease Mechanisms in Motor
Neurone Disease and other
Neurodegenerative Disorders**

**Brain Lecture: Professor Dame Pamela Shaw,
Sheffield Institute for
Translational Neuroscience**

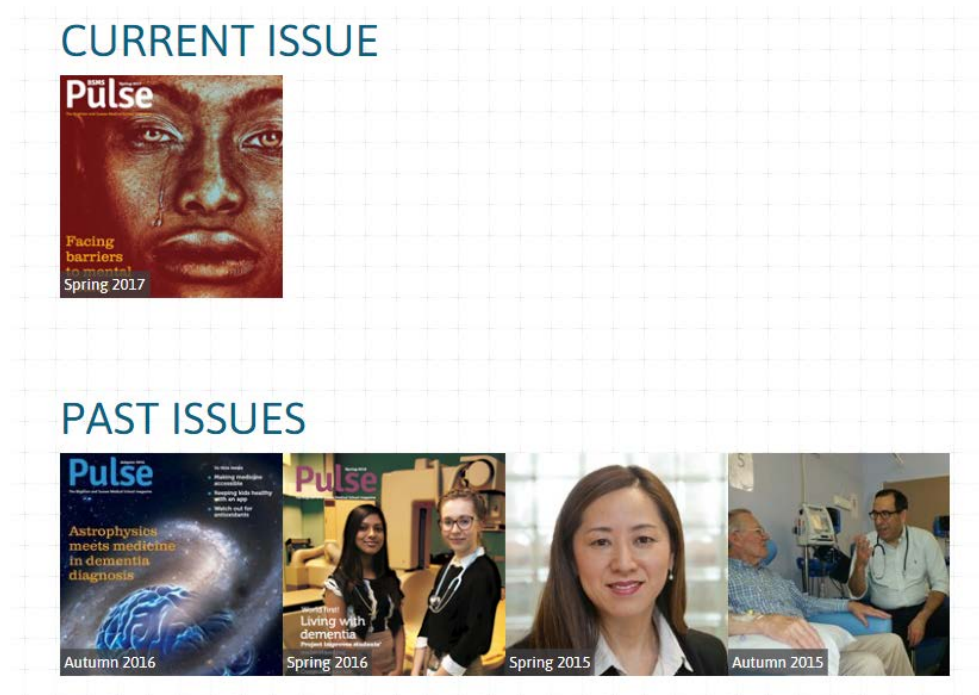
Speakers include:
Dr Folma Buss, Cambridge
Dr Marwa Elamin, BSMS
Dr Kurt de Vos, Sheffield
Prof Elizabeth Fisher, UCL
Dr Diego Gomez-Nicola, Soton
Prof Sarah Guthrie, Sussex
Dr Majid Hafezparast, Sussex
Prof Nigel Leigh, BSMS
Prof Martin Turner, Oxford

The symposium will feature experts in the field of neurodegeneration, who will explore key research developments with a particular focus upon motor neurone disorders.

Friday 23 June 2017, 9.00-5.30

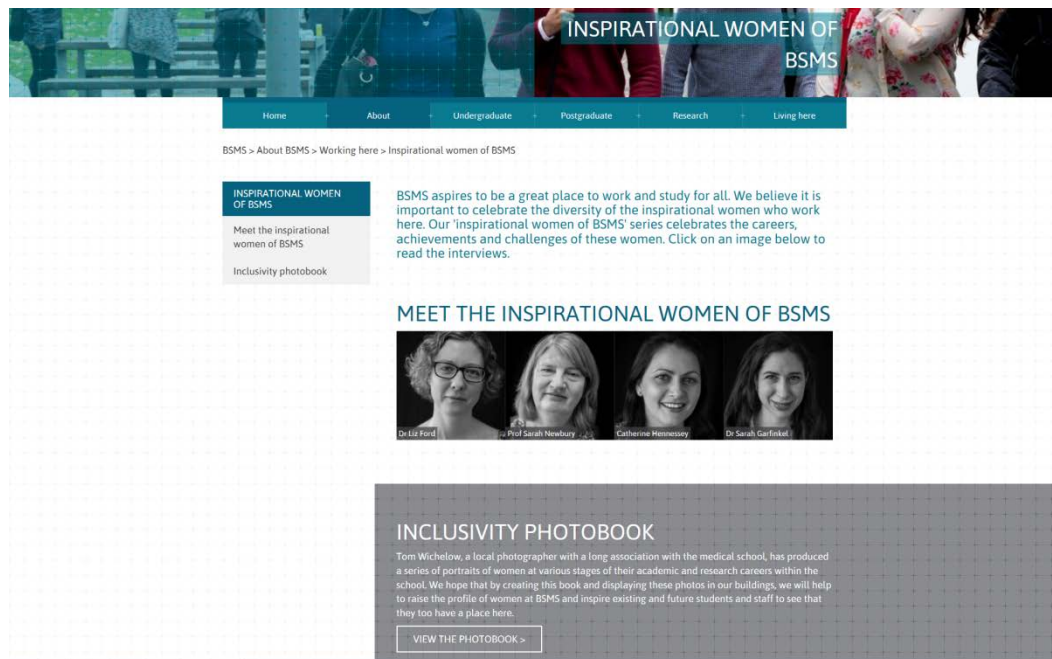
Chowen Lecture Theatre, BSMS Teaching Building, University of Sussex
Please register for your place at: https://bit.ly/mini_symposium
Any enquiries please email: p.butler@bsms.ac.uk

Figure 59: Screenshot of covers used for Pulse, the BSMS printed magazine



In 2016, to celebrate the diversity of the women who work at BSMS, we commissioned 24 portraits of AR staff and students in different roles and career stages. These are displayed on the BSMS website as an online photobook and in two buildings of the school. The people portrayed have given interviews about their careers that are published in InPulse and on the BSMS website (Figure 60). Our intention is to raise the profile of women at BSMS and inspire existing and future students and staff to see that they too have a place here (COMPLETED BRONZE ACTION 39).

Figure 60: Screenshot of BSMS website showing “Inspirational Women” pictures and links to complete photobook



The last 4 BSMS Honorary Graduates are female. They give a number of talks to students and staff and are great ambassadors for their disciplines (Figure 61).

2014 Prof. Dame Valerie Beral

2015 Prof. Alice Roberts

2016 Prof. Valerie Lund, CBE

2017 Prof. Dame Pamela Shaw

Figure 61 Prof. Alice Roberts, BSMS honorary graduate 2015, clinical anatomist and Prof. of Public Engagement in Science at the University of Birmingham.



The Inclusivity team events are clearly advertised as open and relevant to all, which has increased M staff satisfaction and engagement with AS activities.

To address the gender imbalance in academic medicine, we think carefully about the gender balance of teachers and examiners the undergraduate students meet on their five-year journey at BSMS, starting from Week 0, Induction week, visible academic role models, personal tutors as well as the examiners of their clinical skills. The following tables demonstrate percentages with good or improving gender balance, which we believe will have a long-term positive effect in attracting more female doctors into academic medicine (Tables 35, 36, 37 & 38).

Table 35: Gender balance of presenters at UG Induction Week

	Gender of Induction presenters						
	F		M		Not recorded		Total
	No.	%	No.	%	No.	%	
2011/12	6	29%	12	57%	3	14%	21
2012/13	12	55%	9	41%	1	5%	22
2013/14	13	57%	9	39%	1	4%	23
2014/15	15	50%	14	47%	1	3%	30
2015/16	14	47%	15	50%	1	3%	30
2016/17	14	58%	9	38%	1	4%	24

Table 36: Gender balance of Academic Leaders within BSMS

	Gender split of BSMS Academic Leaders (Director of UG Teaching & Learning, Phase and Module Leadership, Year 5 Specialty Leads, Directors and Year 5 Sub-Deans)			
	F	F%	M	Total
2013/14	11	26%	31	42
2014/15	21	37%	36	57
2015/16	25	41%	36	61
2016/17	29	45%	35	64

Table 37: Gender balance of ATs and CATs (Academic Tutors (Years 1 and 2) / Clinical Academic Tutors (Years 3-5))

Gender split	Academic Tutors				Clinical Academic Tutors			
	F	F%	M	Total	F	F%	M	Total
2011-12	10	48%	11	21	14	30%	33	47
2012-13	9	38%	15	24	13	32%	28	41
2013-14	9	45%	11	20	14	33%	28	42
2014-15	12	52%	11	23	12	33%	24	36
2015-16	13	54%	11	24	16	41%	23	39
2016-17	13	54%	11	24	17	43%	23	40

Table 38: Gender balance of OSCE examiners, combined years

	Female	F% of known gender examiners	Male	Gender Unknown	Total Examiners
OSCE examiners	367	45%	443	104	914

(viii) Outreach activities

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

Since its foundation, BSMS has been committed to widening participation. The School organises three undergraduate open days annually for prospective students. Since 2013, there has been an equal gender balance of presenters. Senior staff of both genders visit local schools and colleges to advise on career choice, university selection, and interview techniques.

BSMS academics engage with the public in a range of events including the BSMS Annual Debate, the Brighton Science Festival and Brighton Festival, as well as events on campus and in collaboration with our partner NHS trusts. More female engagement is actively encouraged; for example, in the 2014 BSMS Festival Debate, one of the four-member invited panel was female but, in 2017, three of the six panel members, including the chair, were female.

Our workload allocation model now includes outreach activities (BRONZE ACTION 33).

Table 39: Key outreach projects, 2016/17

BrightMed (BSMS WP Programme) 2016/17

	F	F%	M	Total
External	4	80%	1	5
Staff	3	50%	3	6
Student	39	62%	24	63
Total	46	62%	28	74

BrightWAMS (student society) 2016/17

	F	F%	M	Total
Student	19	61%	12	31

Teddy bear hospital (BSMS Paediatric Society) 2016/17

	F	F%	M	Total
Student	32	68%	15	47

The Outreach team also organise initiatives (BrightMED, BrightWAMS, Teddy Bear hospital) with high levels of student participation (Table 39). The F% in these is higher than the overall student F% (56%). The AS Project Officer and the WP Officer will work together to create a clearer reward system for all students involved and to address this gender imbalance (SILVER ACTION 28).

Word count: 7,788

SILVER APPLICATIONS ONLY

6. CASE STUDIES: IMPACT ON INDIVIDUALS

Recommended word count: Silver 1000 words

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

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

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

FURTHER GUIDANCE FROM HANDBOOK IS:

Case studies provide an opportunity to focus on the career progression of two individuals working in the department, and to show how the inclusive culture and working practices of the department have enabled them to pursue an academic career.

One of these case studies should be a member of the self-assessment team, and the other should be someone else in the department. No more than two case studies should be put forward, even if within the word limit.

The case studies should be written by the individuals and can be from women or men. They should describe how the department's activities have benefitted them and demonstrate the support they have received.

Charlotte Rae, Inclusivity Team member, Case study

I first became aware that gender would directly impact my career progression when a PhD student. Sitting in my department's weekly seminar, I realised that 90% of the PhD students, 50% of the postdoctoral scientists, and 0% of the PIs in the room were female.

I felt frustrated and powerless to see how I could be part of changing these statistics. I have since come to feel that one of the most powerful mechanisms for change we can employ as individuals, and as institutions, is visibility of diverse role models. In addition, I have also since discovered that by participating in group efforts to promote inclusivity in academic science, such as the BSMS Inclusivity team, I can be empowered to be part of changing such statistics by combining forces with colleagues across disciplines, stages of career, and backgrounds.

I joined BSMS as a Research Fellow (Grade 7) in 2014, in my first postdoctoral position since completing my PhD at the University of Cambridge. From my start date, the SAT's activities were highly visible in terms of regular events, and regular notices in the School e-mail bulletin. This reassured me that inclusivity was on the School's agenda.

The second Inclusivity activity to impact on me, in 2016, was a School-wide email invitation for interested staff members to join the SAT, and add their voice and skillset to its endeavours. I was keen firstly to add my skills to the team, and secondly, to satisfy my own curiosity about the current institutional processes in place to promote inclusivity in academic science. I have felt empowered in adding my reflections and contributions to the group.

Soon after joining the SAT and career development sub-group, it came to my attention through attending our meetings that we ran an annual Promotions Workshop, because historically, certain demographics of staff (namely, women) have been less likely to successfully apply for promotion. I felt a moral imperative as a female SAT member to attend.

The Workshop was very clear on the University career progression pathways, and provided a supportive and reassuring atmosphere that the School and HR supported merited promotion applications, rather than seeing them as a financial burden. I realised that my CV met the criteria for the next Grade. Despite clear support from my line manager, and even though the School would have met a surplus, I was hesitant to make an application because my salary is paid from grant funding. However, because I was a SAT member, and knew the School needed merited applications to be made, I felt confident enough to submit an application. I also realised that it was an opportunity to act as a role model for other Research Fellows. My application for promotion to Grade 8 (May 2017) was successful.

This year, my mentor, allocated through the BSMS mentorship scheme, is coaching me with my next career progression steps, focusing on fellowship applications. I remain a member of the career development sub-group.

491 words

From outside the Self-Assessment Team:

Heike Rabe, Reader and consultant neonatologist

(Case study redacted for public distribution)

WORD COUNT: 399

Combined: 890

7. FURTHER INFORMATION

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

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

The Inclusivity Team is proud of the actions and impact that we have achieved over the years since our last submission:

- An increase in the actual number of AR women applying for and achieving promotion (COMPLETED BRONZE ACTION 29)
- A greater number of AR female staff feeling encouraged to take up career development opportunities has improved from 56% in 2014 to 83% in 2017 (COMPLETED BRONZE ACTION 26)
- Induction for all BSMS staff (COMPLETED BRONZE ACTION 13)
- The BSMS one-to-one mentoring scheme has become an established part of the career provision at BSMS (COMPLETED BRONZE ACTION 34)
- Appointing the ECR Lead role and resulting initiatives for ECR staff (COMPLETED BRONZE ACTION 14)
- Café Club – a funded networking club for PST staff to address some of the silos that our various sites and specialisms can create (SILVER ACTION 15)
- A skills sharing and project board – to enable staff to share knowledge and skills as well as to advertise project work that is available (SILVER ACTION 15)

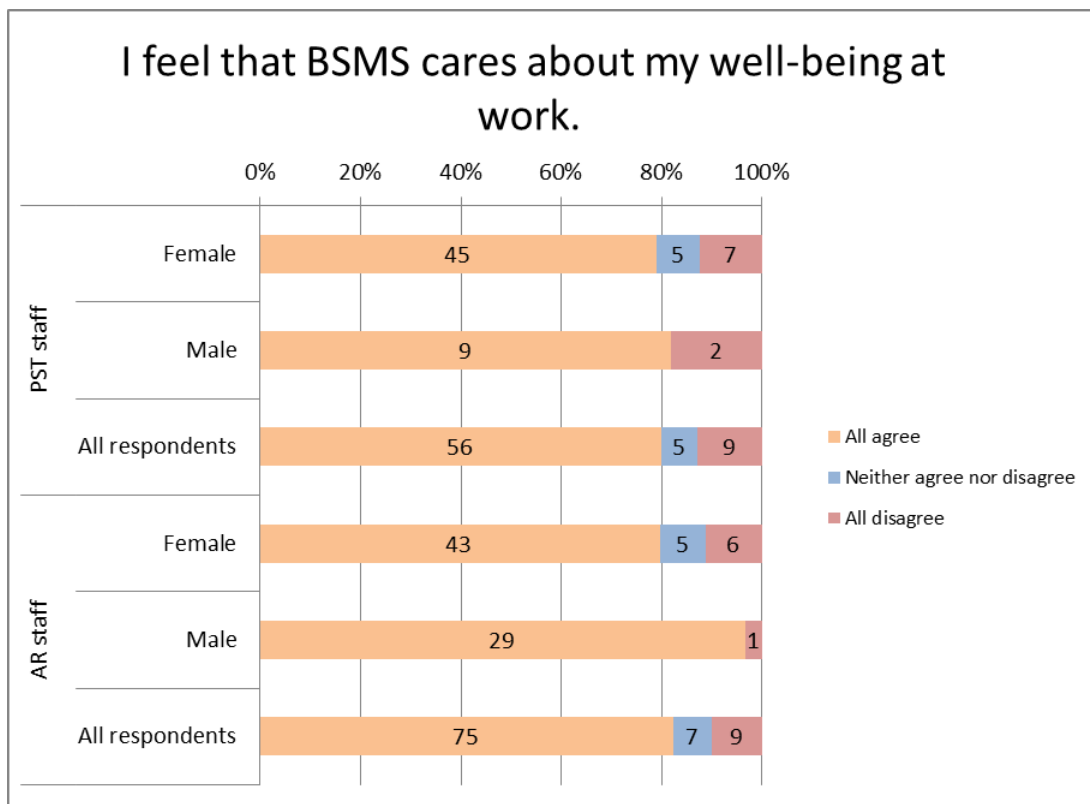
We are also pleased that we have widened the involvement in AS work by establishing a range of sub-groups and that the change of our branding to Inclusivity has made clear that we are for all staff which contributes to the very positive response we get to “BSMS is a great place to work” (Figures 43 & 44) and agreement that “BSMS cares about my wellbeing” (Figure 62).

Over the next 4 years, we will:

- appoint a clinical staff lead (SILVER ACTION 6)

- extend fixed-term contracts of staff taking maternity to other career breaks by the length of their break (SILVER ACTION 19)
- encourage mentoring for PST staff (SILVER ACTION 16)
- expand to ethnicity (2018) and disability (2019) (SILVER ACTIONS 3 & 4)

Figure 62: PST and AR staff responses to “I feel that BSMS cares about my well-being at work”, Staff survey 2017



WORD COUNT: 264

8. ACTION PLAN

The action plan should present prioritised actions to address the issues identified in this application.

Please present the action plan in the form of a table. For each action define an appropriate success/outcome measure, identify the person/position(s) responsible for the action, and timescales for completion.

The plan should cover current initiatives and your aspirations for the next four years. Actions, and their measures of success, should be Specific, Measurable, Achievable, Relevant and Time-bound (SMART).

See the awards handbook for an example template for an action plan.

Please find attached our action plans.

We have provided two action plans:

- our **Bronze** Action Plan, now updated with an additional column showing current status and **colour** coding to indicate progress
- a **Silver** Action Plan – this is **cross-referenced to pages in the submission text**

Updated Bronze Action Plan

Below is our Bronze application with details of the progress made in the right hand column. The colour-coding reflects progress at the point of submitting our Silver application. Some actions have been carried forward onto our Silver action plan and the final column gives the Silver action plan number for cross-referencing.

Key to colours:	Success measure
	Achieved
	Partially achieved or modified
	Not achieved

Description of action	Action taken already and status at November 2017	Responsibility	Success Measure	Progress comment
1 Improve representativeness of SAT by setting tenure for membership	SAT formed in Nov 2012 and new members recruited as old members have left (eg to replace staff going on maternity leave)	Chair of SAT	Balanced and active group	- Membership of SAT reviewed through the year - Tenure of SAT membership agreed as a maximum tenure of 4 years - See SILVER ACTION PLAN 1
2 Expansion of Athena SWAN to PST staff - Initial data collection process - Focus Group - Staff Survey	To date, our Athena SWAN analysis and initiatives have been focused on academic and research staff. We would like to ensure that all BSMS staff receive these benefits. We will start with reviewing routinely collected data and holding focus group to help understand the broad issues before planning our all staff survey The breadth of SAT membership will increase as it takes on a broader diversity remit (including professional services and technical staff and other diversity strands)	Athena SWAN Project Officer SAT Medical School Manager Staff Survey Working Group	Summer 2016 (for data collection and focus groups) H	PST focus group was held in March 2016. PST working group has been formed and met three times so far and additional members of PST staff are on the Inclusivity Team PST staff included in staff survey 2016 and 2017 ON-GOING ESTABLISHED PROCESS. NOT TRACKED IN SILVER ACTION PLAN
3 Improve representativeness of SAT by including students	No UG student members at present. Creation of Student working group run by Arianne Shahvisi	Chair of SAT	Greater undergraduate awareness and involvement in Inclusivity Team	- 2 UG and 1 PGR student recruited in 2015 - UG students have graduated - Creation of new UG working group - see SILVER ACTION PLAN 2
4 Maintain SAT meeting frequency	SAT meetings take place every 6 weeks. Day and time of meeting is rotated to avoid clashes and absence of part-time staff. Materials and agenda are circulated in advance so those who cannot attend can participate by email.	Dean	SAT meetings continue with at least 60% engagement	- 6-weekly SAT meeting schedule maintained - SAT has met a further 14 times since our Bronze submission - Target attendance achieved - ON-GOING ESTABLISHED PROCESS. NOT TRACKED IN SILVER ACTION PLAN

5 Maintain activity of SAT working groups	Develop SAT sub-groups to work on specific topics (eg staff survey, mentoring etc)	Chair of SAT	Progress reports from sub-groups to include in AS silver application	SAT subgroups met regularly outside of the SAT meetings and provided updates to meetings and for the submission on their specific projects. - ON-GOING ESTABLISHED PROCESS. NOT TRACKED IN SILVER ACTION PLAN
6 Communicate SAT activities widely at open meetings and in internal newsletter	SAT currently disseminates activity at termly open meetings, in monthly school newsletter and on BSMS internal and external Athena SWAN webpages.	SAT Communications Manager	AS activities documented in the minutes of all open meetings and AS featured in each newsletter	- Internal AS page updated regularly - Athena SWAN has featured in all issues of InPulse (school-wide e-newsletter) and at most staff open meetings - Regular updates to externally-facing BSMS AS page - Greater presence in external and internal bulletins - Use of posters/tv screens in BSMS facilities to promote IWD and awareness of Athena SWAN - ON-GOING ESTABLISHED PROCESS. NOT TRACKED IN SILVER ACTION PLAN
7 Assess awareness of Athena SWAN through staff survey	SAT currently raises awareness at termly open meetings and in monthly school newsletter and on BSMS internal and external Athena SWAN webpages.	SAT	At least 80% awareness of Athena SWAN in Staff Survey by 2016	- Target achieved early - 2015 Staff Survey awareness of Athena SWAN was 80% - AWARENESS ESTABLISHED. NOT TRACKED IN SILVER ACTION PLAN
8 Strengthen engagement of Athena SWAN steering group with SAT	Currently Steering Group meets termly	Dean	Steering Group meetings continue with at least 75% attendance	- Steering group attendance has exceeded 75% in 2015, 2016 and 2017 - Membership of the Steering Group has been streamlined to make it more strategic (Dean, School Secretary, Athena SWAN Co-Leads and Athena SWAN Project Officer) and has continued to meet termly - Steering group members are invited to all SAT meetings and attend whenever possible. They are sent the agenda and minutes in advance so they can contribute in absentia - ON-GOING ESTABLISHED PROCESS. NOT TRACKED IN SILVER ACTION PLAN

9 Re-appointment of BSMS Athena SWAN Project Officer	<ul style="list-style-type: none"> - The coordination of Athena SWAN related activities has been facilitated by the appointment of a dedicated BSMS Athena SWAN Project Officer - In order to continue growth and expand to other diversity issues and other staff groups this investment needs to be sustained and expanded 	Steering Group	<p>Initially extension of fixed term contract from Dec 2015 then in Aug 2017 conversion to permanent contract.</p> <p>AS budget of £5000 reconfirmed</p>	<p>All actions completed.</p> <p>- ON-GOING SITUATION. NOT TRACKED IN SILVER ACTION PLAN</p>
10 Monitor gender balance for: <ul style="list-style-type: none"> - linked access course - UG students - PGT students - PGR students - Academic & research staff 	Gender balance of each group has been analysed for the last six years.	SAT	Gender balance data collated in Summer 2015 and then annually thereafter	<ul style="list-style-type: none"> - 2015, 2016 and 2017 gender balance data has been collated and presented in Silver submission - Data have been discussed with the Directors of Undergraduate Teaching, Medical Education and Postgraduate Studies (as appropriate) <p>See SILVER ACTION 5.</p>
11 Conduct focus group with female students from each year group to better understand their experiences of studying at BSMS (including those who completed an access course)	We wish to understand better the experience of being a female student at BSMS.	Director of Student Support	Focus groups held Feedback collated and appropriate actions scheduled	<ul style="list-style-type: none"> - 3 focus groups conducted in June 2015: <ul style="list-style-type: none"> • UG Phase 1 • UG phase 2 & 3 • PGR - PGT students were surveyed electronically (between Aug and Sept 15) - Actions resulting from these are described in ACTION 12 <p>COMPLETED ACTION. NOT TRACKED IN SILVER ACTION PLAN.</p>

<p>12 Follow-up from student focus groups</p> <p>Monitor the completion of these plans</p>	<p>- Focus groups held (UG x2 and PGR face-to-face; PGT by online survey)</p> <p>- Analysis and discussion of issues raised by UG and PGR were done by SAT July 2015</p> <p>Resultant actions for UG include:</p> <ul style="list-style-type: none"> - greater career development support - policies on bullying and harassment and - proactive process for gathering info on student caring needs <p>Actions for PGR students include updating the PGR Student Handbook which has been completed</p>	<p>Director of Student Support</p>	<p>Actions implemented.</p>	<ul style="list-style-type: none"> - Greater career development - achieved by proactively adding career strand to ug curriculum. Regular events and a careers fair established. - Bullying and Harassment policy - achieved with policy on inappropriate behaviour giving more support to students who encounter difficult situations from staff, students or patients. - Student caring needs - achieved by proactively asking for information by Clinical Placements Officer prior to allocating placements - PGR Handbook - thoroughly revised by School Manager and re-issued. <p>COMPLETED ACTION FOR UG AND PGR. NOT TRACKED IN SILVER ACTION PLAN.</p> <p>FOR PGT, SEE SILVER ACTION 24</p>
<p>13 Improve staff induction processes</p>	<p>Since November 2012, more detailed induction information has been available to managers and new starters via the BSMS intranet. The School Manager meets all new staff after one week and a formal induction morning is now organised termly</p>	<p>Medical School Manager</p>	<p>At least 80% satisfaction with induction amongst staff who started since 2014</p>	<ul style="list-style-type: none"> - Feedback requested by email after each event and responses reviewed - A question about induction was introduced in the 2015 Staff Survey - Induction programme has been modified to include introductions of attendees and networking time - 80% satisfaction with induction amongst new starters demonstrated in 2015, 2016 and 2017 Staff Survey <p>COMPLETED ACTION FOR BSMS INDUCTION. NOT TRACKED IN SILVER ACTION PLAN.</p> <p>FOR LINE MANAGER INDUCTION, SEE SILVER ACTION 8</p>

14 Appointment of Early Career Development Lead (0.2 wte for 2 years) Review role and resource requirements after 18 months.	Early career academics have expressed concerns about lack of training, career advice, advocacy, mentorship in focus groups and surveys In response, the SAT subgroup on career development have developed a job description for an Early Career Development Lead. This new post will be in place from January 2016.	SAT Career Development sub-group	Appointment of ECR Lead completed. Actions for this staff group underway.	Completed and in place COMPLETED ACTION. NOT TRACKED IN SILVER ACTION PLAN.
15 Facilitating access to academic and networking meetings for all staff	Meeting policy written in 2013, updated and re-distributed in October 2014. Identify those meetings (academic and networking) still scheduled outside core hours and identify ways to facilitate participation	SAT	More meetings held within core hours or other ways to facilitate participation identified	- Meeting policy promoted to all staff via internal newsletter and Heads of Division by email in 2015 and again in 2016 - Increased satisfaction with hours and meetings (F AR staff: 61% in 2014 to 78% in 2017, M AR staff: 66% in 2014 to 100% in 2017) COMPLETED ACTION. NOT TRACKED IN SILVER ACTION PLAN.
16 Increase awareness of flexible working arrangements	Formal flexible working arrangements (fwa) identified. Anecdotally there are many informal arrangements. Use 2015 staff survey to identify informal fwa by grade	SAT staff survey sub-group	- staff survey updated to include question on informal flexible working arrangements - data confirms there is a much higher level of flexible working informally than formally tracked	- Question was asked - 2015 staff survey shows that 24 staff have informal FWA (increase from 3 identified formally) - In 2017 staff survey, this is 34 AR and 30 PST staff COMPLETED ACTION FOR AR STAFF. NOT TRACKED IN SILVER ACTION PLAN. FOR PST STAFF, SEE SILVER ACTION 21
17 Improving maternity support by monitoring experience through questionnaire sent to maternity returners	Conducted survey of maternity returners carried since 2013/14 and updated maternity information available on staff intranet. In addition, UoS HR have conducted focus groups including BSMS staff. BSMS School Manager sends questionnaire to all maternity returners	Medical School Manager	- maternity questionnaires sent - feedback received and acted upon	- Questionnaires are being sent routinely and feedback collected - Example of positive experience included in Silver submission ON-GOING ESTABLISHED PROCESS. NOT TRACKED IN SILVER ACTION PLAN

18 Improving maternity support by providing specific training event for all BSMS managers to ensure all familiar with new forms and process	New maternity information has now been made available for individual staff and line managers through the BSMS intranet. We need to train managers to ensure they are confident with the processes and support their staff	Staff Development Unit	- line manager maternity training event held in 2016	- line manager maternity training event held in 2016 COMPLETED ACTION.
19 Improving maternity support by modelling impact of adapting Research Council statement within BSMS by considering potential number of individuals affected and possible costs	SAT is aware of Research Council statement on maternity and impact on grant funding and wishes to minimise differences between researchers on RCUK funding and others.	Career development sub-group & Steering Group Finance Officer	Impact of Research Council statement quantified Follow-on action identified	- Presented to Research sub-committee in March 2015 - Liaison with BSMS Finance Officer for modelling completed - Member of Inclusivity Team has contacted a selection of other funders to understand how they would treat researchers around maternity See SILVER ACTION PLAN 18
20 Monitoring paternity, adoption and parental leave uptake	UoS HR data shows that very few requests are made. Continue to monitor requests and outcomes and develop appropriate actions if necessary	SAT and UoS HR	Up-to-date information available for analysis	- 2015, 2016 and 2017 data has been reviewed. 0 requests for adoption leave. 6 for paternity leave. COMPLETED ACTION SEE ALSO SILVER ACTION 20
21 Supporting pregnant female students so their pregnancy has minimal impact on their studies	Support processes are already in place for pregnant students. Review adequacy of support provided in the maternity returns questionnaire and make appropriate adjustments if necessary	Director of Student Support	Sustained satisfaction with support provided	- New student maternity questionnaire is in place and feedback noted from those returned ON-GOING ESTABLISHED PROCESS. NOT TRACKED IN SILVER ACTION PLAN

22 Improve recruitment processes to minimise risk of gender bias for undergraduate students	<p>Data relating to ug, pgt and pgr student applications have been analysed. In addition, for undergraduates, gender balance of interview panels has been analysed and found to be sub-optimal.</p> <p>Initiate process to collect interview panel gender balance data routinely and to analyse annually</p> <p>Introduce process to minimise use of single gender panels</p>	Director of Undergraduate Studies	<p>Gender of panel members routinely collected from 2015/6 onwards</p> <p>>95% mixed gender panels by 2016</p>	<p>- System for collection of gender of UG student recruitment panel members implemented</p> <p>- 100% mixed gender panels in 2015 & 2016</p> <p>- New MMI process in 2017 so action no longer applicable</p> <p>COMPLETED ACTION</p>
23 Improve recruitment processes to minimise risk of gender bias for postgraduate research students	<p>Data relating to ug, pgt and pgr student applications have been analysed. Process in place to collect interview panel gender balance data routinely and to analyse annually and to minimise use of single gender panels</p>	Director of Doctoral Studies	<p>Gender of panel members routinely collected from 2015/6 onwards</p> <p>>95% mixed gender panels by 2016</p>	<p>- Introduction of PGR student recruitment panel members monitoring system</p> <p>- 92% panels were mixed gender in 2015</p> <p>- 100% panels were mixed gender in 2016</p> <p>ON-GOING ESTABLISHED PROCESS. NOT TRACKED IN SILVER ACTION PLAN</p>
24 Improving staff recruitment panel gender balance and training of panel members by monitoring on request to fill form	<p>BSMS is currently collecting recruitment panel data until a new HR system is in place (expected 2015/16). Devise improved process for collecting panel gender balance & training status</p>	Athena SWAN project officer/Medical School Manager	Process established	<p>Recruitment "Request-to-fill" form modified to record:</p> <p>i) gender of panel</p> <p>ii) individuals' recruitment training status</p> <p>- Recruitment & Selection training status of panel members checked by Medical School Manager for compliance prior to interview</p> <p>ON-GOING ESTABLISHED PROCESS. NOT TRACKED IN SILVER ACTION PLAN</p>

25 Improving staff recruitment panel gender balance and training of panel members by requiring each recruitment panels to include a minimum of one trained person	<p>Collect and analyse data on interview panels</p> <p>Identification of pool of those most frequent recruiters in need of training by Spring 2015</p>	Dean's PA & SAT	Complete dataset of recruitment panel information collected	<ul style="list-style-type: none"> - Data on panel members now collated and reviewed by Medical School Secretary - Improving % of gender mixed panels (from 46% of panels having mixed gender panels to 94% in 2017) - Training in Recruitment and Selection has been promoted to all staff and to SMG - Since our Bronze submission, UoS R&S training sessions have been promoted (January 2015, April 2015, May 2015 and Nov 2015) and a bespoke training session took place in October 2015 - 16 staff (of whom 9 SMG members) have attended training since Bronze submission <p>ON-GOING ESTABLISHED PROCESS. NOT TRACKED IN SILVER ACTION PLAN</p>
26 Increase career development opportunities for women by publicising training opportunities to all staff	Questions in staff survey 2014 showed that 24% of F and 10% of M disagreed they were encouraged to take up opportunities. 42% of part-time staff disagreed.	Communications Manager	Better take-up of career development opportunities	<ul style="list-style-type: none"> - Improving dissemination of career development events using direct emails and our weekly newsletter since 2015. - F staff survey response improved from 56% (23/41) in 2014 to 83% (45/54) in 2017, for M staff from 63% (19/30) to 70% (21/30) in 2017. - When asked about opportunities for part-time staff, agreement increased from 19% (6/31) to 50% (10/20). <p>COMPLETED ACTION. SEE ALSO SILVER ACTION 10</p>
27 Improve access to Officerships and committees for female staff by monitoring gender balance of Officerships and committees	<ul style="list-style-type: none"> - Officership and committee vacancies are now advertised and data collected on all applications - Female Director of Undergraduate Teaching & Learning appointed in 2015 	Dean SAT	Improved gender balance on committees	<p>The gap between female committee membership and the proportion of female staff narrowed from 20 percentage points in 2013/14 (38% F committee members, staff F% of 58%) to 6 percentage points in 2017/18 (51% F committee members, staff F% of 57%)</p> <p>SEE ALSO SILVER ACTION 23</p>

28 Increase appraiser competence and training by promotion of appraisal training to all staff	Staff survey question in May 2014 in relation to usefulness of appraisal received indicated 55% satisfaction	Communications Manager	Increased satisfaction with appraisal process in 2015 staff survey question (and increasing in future years)	<ul style="list-style-type: none"> - Number of staff receiving appraisal has increased from 59 (2014) to 72 (2017) - Appraisal training has been promoted to all staff - Satisfaction with appraisal has improved (55% in 2014, 74% in 2017) <p>COMPLETED ACTION</p> <p>SEE ALSO SILVER ACTION 11</p>
29 Improving awareness of the promotions process by conducting further promotions workshops	Staff survey question in 2014 Materials added to intranet so accessible to all staff and link distributed in the staff newsletter in Oct 2014	Career development sub-group SAT	Promotions workshop becomes an annual event in BSMS training calendar Staff survey 2015 shows better understanding of promotions process (and improving each subsequent year)	<p>Annual promotions workshop was held in Sept 2015 and repeated in 2016 & 2017. 2017 staff survey demonstrates better understanding of promotions process (29% agreement in 2014 increased to 73% agreement in 2017)</p> <p>ON-GOING ESTABLISHED PROCESS.</p>
30 Organise CV-writing workshops for female staff	CV-writing workshop commissioned and provided twice (12 attendees, March 2015 & Sept 2015)	Career development sub-group SAT	Further CV-writing workshops held	<p>Subsequent CV-writing workshop held in March 2016 One-to-one coaching session trialled & evaluated in Sept 2015 (3 participants)</p> <p>COMPLETED BRONZE ACTION</p>
31 Continue to monitor gender balance of fixed-term staff	Gender balance of fixed-term & permanent staff has been analysed Focus groups were held in 2013/14 Proactive process for transition of fixed-term to permanent staff	UoS HR and BSMS Dean	Gender balance of fixed term staff monitored	<ul style="list-style-type: none"> - 2015/16 & 2016/17 contract conversion process carried out by Dean and UoS HR - Gap between % of F and of M staff on permanent contracts has decreased. <p>ONGOING PROCESS. NOT TRACKED IN SILVER ACTION PLAN.</p>
32 Dissemination of results of annual survey on culture amongst academic staff and researchers.	<ul style="list-style-type: none"> - 2015 Staff survey 2015 undertaken with 70% response rate - Analysis has informed Silver submission but we still need to discuss results, beyond SAT and Steering Group. Booked for all staff meeting 2 March 2016 	SAT staff survey sub-group	Staff survey findings shared with all staff and engagement with staff survey remains high.	<p>2015 & 2016 staff survey findings shared with all staff via open meeting and internal website</p> <p>ONGOING PROCESS. NOT TRACKED IN SILVER ACTION PLAN.</p>

33 Workload allocation model to capture all facets of academic endeavour	The workload allocation model is being developed iteratively. New elements were included at the start on 15/16.	Medical School Manager & Dean	Expanded workload allocation model in place and satisfaction with it improving in staff survey.	- workload allocation model was expanded to add further elements and will continue to be reviewed as needed. COMPLETED ACTION
34 Formalise and extend the BSMS mentoring programme for academics	Our one-year pilot of 1:1 mentoring for female senior academics was evaluated positively. We now need to extend to more junior grades	SAT mentoring subgroup	Mentoring scheme running annually and high levels of satisfaction with mentoring on offer	- Mentoring scheme has been expanded to all AR staff from Grade 6 to Grade 10 - Satisfaction with availability of mentoring has improved from 34% to 72% for F AR staff - Scheme will continue to run annually ONGOING PROCESS. NOT TRACKED IN SILVER ACTION PLAN.
35 Evaluate changes to student selection process on gender balance (impact of BMAT) Admissions Team to monitor applicant numbers over future years and gender balance in applications	In 2014/15 BMAT replaced the UCAS personal statement in initial assessment of UG applicants. This change was made as BMAT is considered to be more transparent and better predictor. However this has resulted in 14/15 in a drop in the number of applicants On-going monitoring necessary to ensure no adverse impact on gender balance	Admissions team	Gender balance of ug starters tracked.	No impact on gender balance found. Further changes to UG recruitment process include MMI. ONGOING PROCESS. NOT TRACKED IN SILVER ACTION PLAN.
36 Analyse promotional recruitment material and job descriptions for unconscious bias	Any promotional literature for student and staff recruitment and job descriptions for staff may contain unconscious bias. We will issue guidance to those writing job descriptions and work with the Comms team on promotional literature to address this	Chair of SAT Comms Team	Analysis complete.	Action completed. Comms Team monitoring publications and prospectuses going forward. ONGOING PROCESS. NOT TRACKED IN SILVER ACTION PLAN.

<p>37 Modify timings and increase target audiences for celebrations of International Women's Day to facilitate greater staff and student involvement</p> <p>For 2016, plan a range of activities spread over greater timeframe (whole of March 2016) and to include events for staff, UG, PGT & PGR students</p>	<p>We celebrated IWD in 2015 with 7 events. The feedback on content was very positive but many reported that the concentration of events within one week had precluded their full involvement because of time constraints. Respondents requested that in future years the celebrations span several weeks.</p>	<p>Athena SWAN Project Officer</p> <p>SAT</p> <p>Communications Team</p>	<p>IWD events held with good levels of participation by staff and students</p>	<p>March 2016, IWD was celebrated with events over a number of weeks. In March 2017, there was one large event (the Career Progression conference held jointly with Life Sciences) as well as the creation of career time lines and the virtual poster display. We continue to review events for IWD each year.</p> <p>ONGOING PROCESS. NOT TRACKED IN SILVER ACTION PLAN.</p>
<p>38 Expansion of IWD poster display to include female students' research</p>	<p>We celebrated the achievements of our female academics with a scientific research poster display of 28 posters in three different sites for a week during the 2015 International Women's Day week-long celebrations.</p> <p>Female students have asked if they can contribute to future events and we plan to facilitate this from 2016 onwards</p>	<p>Athena SWAN Project Officer</p> <p>SAT</p> <p>Communications Team</p>	<p>Participation in poster display on-going and includes students.</p>	<p>In March 2016 and March 2017, our poster display did include posters by students.</p> <p>ONGOING PROCESS. NOT TRACKED IN SILVER ACTION PLAN.</p>
<p>39 Increased profile of Athena SWAN with portraiture project of female researchers</p>	<p>BSMS has a long association with Tom Wichelow, portraiture photographer who has previously exhibited work about and by our students. We have asked Tom to work with an early career female photographer to create a series of portraits that promote women in medicine and science</p>	<p>Chair of SAT</p>	<p>Portrait project completed and displayed in buildings and on website.</p>	<p>The portraits have been displayed on two of our sites and a set of accompanying interviews have been published in our internal newsletter and on our external website.</p> <p>ONGOING PROCESS. NOT TRACKED IN SILVER ACTION PLAN.</p>

Silver Action Plan (November 2017)

Action Point & Planned Action	Rationale/background	Key outputs and milestones	Responsibility	Timescale and Priority*	SMART Measure of Success
1 Improve representativeness of Inclusivity Team in relation to fixed-term and part-time staff by targeting a recruitment campaign for new Inclusivity Team members to fixed-term and part-time staff. p17	The gender balance on the Inclusivity team now matches the school balance and will continue to be monitored. Further emphasis is needed on fixed-term vs permanent and part-time vs full-time membership. Currently 30% of staff are fixed term and 31% are part-time. The Inclusivity Team is 12% fixed-term and 24% part-time.	- Recruitment campaign for new Inclusivity Team members targeted at fixed-term and part-time staff launched (Spring 2018). - New staff on Inclusivity Team (Summer 2018) - % on Inclusivity Team matches % in staff group	Dean Co-Leads of Inclusivity Team	Spring 18 (and on-going as Inclusivity Team membership evolves) H	Diverse and active SAT with participation from these groups in proportion to their size in the school (for fixed-term staff to move the % from 12% to 30%, for part-time staff to move from 24% to 31%).
2 Improve representativeness of the Inclusivity Team in relation to students by monitoring outcomes from the student group p20	After various models of student involvement, our new student working group was launched in Oct 2017 and will be run by Arianne Shahvisi.	2nd student group meeting due in Spring 2018	Co-Leads of Inclusivity Team Arianne Shahvisi	Review end of 2017/18. M	Ground rules agreed and info feeding from/into Inclusivity Team. Involvement of students in every year group. Student agreement that BSMS is inclusive is currently 93%. Target improvement to 95%.
3 Expansion of Inclusivity work to non-gender strands by creating an ethnicity working group p25	To date, our Athena SWAN analysis and initiatives have been focused on gender. We would like to expand our work to look at ethnicity and will start an ethnicity working group in Spring 2018. This group will look at existing data, apply the framework of AS to it and look at alternative kite marks to guide our further data collection, analysis and action planning.	- Amend SAT terms of reference (Spring 2018) - Launch Ethnicity working group (Spring 2018) - Assess existing data under the AS framework (Summer 2018) - Research ethnicity-related frameworks/kite marks (Autumn 2018) - Establish action plan as appropriate (Autumn 2018) - Build additional data collection requirements into staff survey 2019 (Spring 2019) - Ongoing review of data and action plans (Summer 2019 onwards)	Athena SWAN Project Officer Inclusivity team Ethnicity subgroup	Spring 2018 - Summer 2019 and onwards H	Establishment of ethnicity working group Data analysis completed Key data for monitoring success of BAME staff and students agreed. Monitoring in place and rates improving. We are not able to quantify these targets as we have not yet got baseline data. This action plan will be updated when we have the data.

<p>4 Expansion of Inclusivity work to non-gender strands by creating an disability working group</p> <p>p25</p>	<p>To date, our Athena SWAN analysis and initiatives have been focused on gender. We would like to expand our work to look at disability and will start an disability working group in Spring 2019. This group will look at existing data, apply the framework of AS to it and look at alternative kite marks to guide our further data collection, analysis and action planning.</p>	<ul style="list-style-type: none"> - Amend SAT terms of reference (Spring 2019) - Launch Disability working group (Spring 2019) - Assess existing data under the AS framework (Summer 2019) - Research disability-related frameworks/kite marks (Autumn 2019) - Establish action plan as appropriate (Autumn 2019) - Build additional data collection requirements into staff survey 2019 (Spring 2020) - Ongoing review of data and action plans (Summer 2020 onwards) 	<p>Athena SWAN Project Officer</p> <p>Inclusivity team</p> <p>Disability subgroup</p>	<p>Spring 2019 - Summer 2020 and onwards</p> <p>H</p>	<p>Establishment of disability working group</p> <p>Data analysis completed</p> <p>Key data for monitoring success of disabled staff and students agreed.</p> <p>Monitoring in place and rates improving.</p> <p>We are not able to quantify these targets as we have not yet got baseline data. This action plan will be updated when we have the data.</p>
<p>5 Monitor gender balance for:</p> <ul style="list-style-type: none"> - access course - UG students - PGT students - PGR students - Academic & research staff - Professional Services and Technical staff <p>pp 26-48</p>	<p>Gender balance of each group has been analysed for the last three to six years. We understand the need to continue this data collection annually to review the success of our actions and to identify any changes or trends.</p>	<p>Annual data monitoring process in summer/autumn of each year</p>	<p>Athena SWAN Project Officer</p>	<p>Annually</p> <p>M</p>	<p>Repeat analysis annually, compare against benchmark and develop further actions if not approaching parity or benchmark as appropriate.</p> <p>More quantified targets are included in relation ot specific actions listed for each group.</p>
<p>6 Create new Clinical Staff Lead post to provide additional support for clinical staff</p> <p>p44</p>	<p>We see a gender difference between our clinical and non-clinical staff, particularly at higher levels. Lots of actions (such as mentoring scheme, training, promotions workshop) have taken place but have not shifted this gender imbalance so, in November 2017, the Steering Group approved the creation of a new Clinical Staff Lead (modelled on the Early Career Researcher Lead) to focus on this issue, gather additional data and develop and deliver an action plan to support this group.</p>	<ul style="list-style-type: none"> - Prepare proposals and business case for Steering Group and SMG to consider (DONE) - Role description written (Spring 2018) - Role advertised and appointed to (Summer 2018) - Action plan devised (Winter 2018) - Success measures of that action plan tracked (Winter 2019) 	<p>Dean</p> <p>Co-Leads of Inclusivity Team</p>	<p>Autumn 2017 - Winter 2019</p> <p>H</p>	<p>Clinical Staff Lead in Post, action plan agreed and underway.</p> <p>Improving gender balance in clinical staff pipeline (currently 35% of clinical staff are F - target 40% for winter 2019)</p>

<p>7 Investigate numbers of female and part-time leavers by reviewing data again in summer 2018 and if necessary carrying out further data collection to establish any common issues.</p> <p>p47</p>	<p>2016/17 seems to be a blip year with higher rates of leavers amongst female and fixed-term staff than in previous years. Preliminary analysis does not reveal any concerns but this will be monitored in 2017/18 and appropriate action taken if repeated.</p>	<p>- Summer 2018, leaver data reviewed and % female and % fixed term calculated and compared to staff population</p>	<p>Athena SWAN Project Officer</p> <p>Inclusivity Team</p> <p>Medical School Manager</p>	<p>End 2017/18</p> <p>M</p>	<p>Leaver data analysed. If 2017/18 similar to 2016/17, take further actions in relation to F and part-time leavers.</p>
<p>8 Improve line manager skill and ability in relation to staff induction</p> <p>p52</p>	<p>Rates of staff receiving induction from their line managers has improved to 29/37 (78%) (Figure 20). We will give line managers clearer guidelines and training to ensure all are carrying out inductions with their new staff</p>	<p>- Line manager training bundle promoted to all line managers (Spring 2018)</p> <p>- Question re induction from line manager in staff survey (summer 2018)</p> <p>- Line manager attendance at training tracked (autumn 2018)</p>	<p>Comms Team</p> <p>Athena SWAN Project Officer</p>	<p>Spring / Summer 2018</p> <p>H</p>	<p>Improvement in staff survey response rate to line manager induction (currently 78%; target 85%)</p>
<p>9 Increase the number of female staff returned in future REF submissions</p> <p>p58</p>	<p>In previous RAE and REF returns, relatively small numbers of F staff were submitted. By supporting all staff with the research initiatives presented throughout this application, and in particular in section 5.3, we aim to increase the number of female staff returned in future REF submissions.</p>	<p>- Presentation of research-related staff survey findings at Spring Research subcommittee (Feb 2018)</p> <p>- action plan to respond to this created (Summer 2018)</p> <p>- planning of 2021 REF submission with gender equality in mind</p>	<p>DRaKE</p> <p>Research Subcommittee</p> <p>Departmental Research Leads</p> <p>Co-Leads of Inclusivity Team</p>	<p>Next REF: 2021</p> <p>L</p>	<p>% of female researchers submitted to REF matches % of female academic and research staff</p>
<p>10 Improve uptake of career development events for all staff by</p> <p>i) better dissemination</p> <p>ii) looking at the barriers to attending in particular for part-time staff</p> <p>p64</p>	<p>Since 2015, we have been improving dissemination of career development events using direct emails and our weekly newsletter. "I feel encouraged to take up career development opportunities" has substantially improved for all AR staff over the 4 year period. For F staff from 56% (23/41) in 2014 to 83% (45/54) in 2017, for M staff from 63% (19/30) to 70% (21/30) in 2017.</p> <p>When asked about opportunities for part-time staff, agreement increased from 19% (6/31) to 50% (10/20). We are pleased with this improvement but acknowledge that there is still further distance to go to support the remaining 50%.</p>	<p>- dedicated section in InPulse on career development activities</p> <p>- increased availability of training on-line to facilitate access for those who work part-time</p>	<p>Comms Team</p> <p>SDU</p> <p>Athena SWAN Project Officer</p>	<p>2018 and on-going</p> <p>M</p>	<p>- improved response rate to the relevant questions in staff survey (for part-time staff: from current 50% to 60%, for all staff from current 76% to 80%)</p> <p>- greater attendance at training by all staff</p>

11 Improve the quality of the appraisal process by training all appraisers to ensure appraisal is helpful p65 & 82	Since 2014, we have seen a gradual improvement in satisfaction with appraisal so that, in 2017, 74% of F (40/54) and 72% of M (21/29) agreed that their appraisal is helpful. We will continue to require that all managers are trained before they appraise and will ensure that newly promoted managers are also aware of this training	- dates of appraisal training communicated to all existing and new managers - appraisal rate improving - satisfaction with appraisal improving in next staff survey	Comms Team SDU Athena SWAN Project Officer	Each annual appraisal round starting Spring 2018 H	- appraisal rate improving (from current 83% to 90%) - satisfaction with appraisal improving in next staff survey (from current 74% to 80%)
12 Increase access to line manager training p73 & 82	We have worked with UoS SDU to produce a bundle of training sessions for existing and new managers. These will be promoted to all managers.	- 2018 line manager training bundle dates set - dates advertised to all managers	Comms Team SDU	Spring 2018 and annually afterwards H	- high levels of management training
13 Provide training on grant writing p73	Part of the feedback from the research section of the staff survey was about wanting more support for grant writing so we will organise more training.	- training course on grant writing commissioned and advertised to all staff	SDU UoS Research Officer Research Leads	Summer 2018 and annually afterwards M	- high numbers attending grant writing workshop
14 Increased support for researchers p78	We have collated the responses to the staff survey research questions and are working with the BSMS DRaKE and the departmental research leads to generate an action plan to address these.	- Presentation of staff survey findings to Research subcommittee (21 Feb 2018) - DRaKE and committee action plan created - Action plan implemented	DRaKE Research Subcommittee Departmental Research Leads Co-Leads of Inclusivity Team	2018 for first action plan and activities. Further iterations in following years M	greater satisfaction with the support for researchers expressed in staff survey (from current 29% agreement "have received support" to 50% by 2019 and 60% by 2021)
15 Greater understanding of career progression for PST staff p80, 83 & 123	There is no "track" for promotion for PST staff. The PST working group has been using the staff survey responses and free text to formulate actions to address this including café club, skills sharing board and UoB mentoring scheme and is working with SDU to produce a Grade 4 training bundle of key training courses for PST staff.	- evaluate café club in May 2018 (one-year anniversary) - promote Grade 4 training bundle to all PST staff - promote UoB mentoring scheme to all PST staff - organise career progression event for PST staff (Dec 2018)	Athena SWAN Project Officer Inclusivity Team School Manager SDU Staff Survey Working Group	Throughout 2018 and ongoing H	Promotion of training opportunities & Grade 4 "bundle" Café Club evaluation completed and any changes made Greater satisfaction with career progression opportunities expressed in staff surveys each year (from current 56% to 60% in 2019 and 65% in 2021)

16 Promote mentoring to PST staff p83 & 124	We have looked at the possibility of including our PST staff in the BSMS mentoring scheme but the feedback from the staff survey is that they would value the opportunity to be mentored outside of the school so we have liaised with our parent universities. UoB has recently launched a scheme which our staff can take part in.	- promote UoB mentoring to all staff - continue to work with UoS to create a PST mentoring scheme	SAT Mentoring sub-group	Throughout 2018 and ongoing H	65% satisfaction amongst Professional Services and Technical staff with mentoring opportunities
17 Take action following feedback from the student group p74	The student group met in October 2017 and generated a number of actions including expansion of consent training to all students	Student group lead, School Manager and AS Project Officer to meet in Jan 2018 -2nd student group meeting due in Spring 2018 - expanded consent training for all students in 2018/19	Student group lead School Manager AS Project Officer	Review end of 2018/19. M	Actions generated from student group discussions Consent training delivered to 95% students
18 Monitor BSMS case-by-case response for non-RCUK funded staff on maternity leave p85	The UoS research office lists BSMS as having 59 researchers attached to 37 different funding grants. A member of the Inclusivity Team contacted a selection of these funders to find out how maternity would be treated in terms of funders' deadlines, possible extensions, use of grant to pay for cover and childcare as we wanted to explore how we could ensure all researchers were treated consistently regardless of the funder. We received a mixed response so BSMS is exploring its own case by case response for the small number of staff this applies to.	- track number of staff who fall into this category in 2018 - monitor support given by BSMS	Dean Inclusivity Team	Throughout 2018 and ongoing H	Non-RCUK researchers receiving support from the school
19 Extension of fixed term staff contracts by the length of their maternity or other leave p87, 96 & 124	We have a drop in our maternity retention rate that occurs in those who have been back 12 months. For AR staff, the 4 who have not returned or who have left since returning were all on fixed term contracts. We will continue to provide support to staff on fixed term contracts and will develop more tailored support such as access to a fund to support their research and more flexible hours for those recently returned from a career break.	- devise communication for fixed term staff taking a career break (maternity or other) informing them of new policy of extending fixed term end date by length of time spent on leave - track number of staff this applies to - monitor post-maternity and other leave retention following this change	Dean Inclusivity Team HR	Communication in Spring 2018 Tracking and monitoring as arises H	Improvement in post-maternity or other career break retention from late 2018 onwards

20 Promotion of info in relation to parental, paternity, adoption and shared parental leave p85 & 89	There is very low uptake of these forms of leave within BSMS. In the last six years, there have been no requests for adoption leave or shared parental leave. As context, we know that, of 2150 staff at UoS, only 5 individuals have taken shared parental leave and nobody has taken adoption leave in the last 3 years. Since 2012, there have been two instances of parental leave and 6 requests for paternity leave (all 6 for ordinary paternity leave and none for additional paternity leave). We will continue to provide information about these policies to all our staff and managers.	- communication of policy and guidance to all staff - Create flowcharts for adoption, parental and paternity leave - communication/training for managers on supporting staff before, during and after all types of leave - tracking of take-up	HR All managers Athena SWAN Project Officer	2019 and annually thereafter M	- greater understanding of policies around leave from current 72% for PST staff and 71% for AR staff of expressed understanding of HR policies to 80% for both groups (Figure 48)
21 Promotion of flexible working to PST staff p92	We have been tracking the confidence that managers will be supportive of flexible working arrangements. We will continue to promote flexible working for AR & PST staff and to provide guidance to line managers and will monitor this again in the staff survey in 2018.	- communication of policy and guidance to all staff - communication/training for managers on supporting staff around flexible working - tracking of take-up	HR All managers Athena SWAN Project Officer	2018 and annually thereafter M	- greater understanding of policies around leave (as above to 80%) - greater satisfaction with support from line managers reported in staff survey
22 Promoting awareness and knowledge of policies on Gender Equality p102	Our 2014 staff survey highlighted only 32% of female staff felt BSMS had made the policies on gender equality clear. In 2017, across both PST and AR staff, the response is positive with over 70% of staff agreeing (PST 72%, 51/71, AR 71%, 65/91). We will continue with our current activities that highlight the HR policies in order to ensure the remaining 30% are reached.	- continue promoting policies to staff - track understanding through staff survey	Comms Staff Survey working group	2018 and annually thereafter M	- greater awareness expressed in staff survey 2018 and annually after (as above to 80%)
23 Monitor proportion of women officers and on senior committees i) Monitor membership ii) collate data on % of female applicants and appointees p105	The gap between female committee membership and the proportion of female staff narrowed from 20 percentage points in 2013/14 (38% F committee members, staff F% of 58%) to 6 percentage points in 2017/18 (51% F committee members, staff F% of 57%).	We will continue to ensure that promotion and career progression opportunities are such that more staff are able to apply for positions on committees when they come up; to ensure that these are always in open competition; that the meeting policy is adhered to so these committees are not excluding people due to their scheduling and continue to be mindful of the e&d statement in our committees handbook	Dean Inclusivity Team	On-going with annual data monitoring Target achieved for 2020	Continued upward trend in committee F gender balance to match F% in staff cohort

24 Devise different ways to engage with the PGT students to understand their experiences of applying to and studying at BSMS p33 & 34	Online survey carried out of PGT students. Low response rate (18%; 53/295). The low response rate from this student group while disappointing is in line with other surveys such as the UoB Postgraduate Taught Experience Survey 2016 where the BSMS PGT student response rate was 16%. We will work with their teaching team to devise better ways to understand their experience such as focus groups or questionnaires from their module leaders.	- engage with DME & Admission staff team - together devise better means of judging PGT student satisfaction - track satisfaction with experience at BSMS and with application process	Inclusivity Team DME staff team	2019 M	Better engagement with PGT students
25 Monitor gender balance in senior leadership positions p11	Action on open recruitment and increasing opportunities has led to 11/20 senior staff positions being held by women.	Annual monitoring of this group	Dean Inclusivity Team	Annual M	Continued gender balance in this group
26 Improve rates of F staff applying for and achieving promotion p53 & 57	Annual promotions workshops have been held in Sept 2014, 2015, 2016 & 2017. 2017 staff survey demonstrates better understanding of promotions process (29% agreement in 2014 increased to 73% agreement in 2017) New process of internal panel being introduced in 2018. Impact to be monitored.	Promotions workshop held in 2018 and annually thereafter Staff survey shows better understanding of promotions process (and improving each subsequent year) Numbers of women applying for and succeeding in promotion increases	Career Development working group	Annual H	Better understanding reflected in staff survey (from current 73% to 80%, Figure 22) Greater numbers of staff applying for and achieving promotion
27 Hold focus group with M UG students to understand their experiences of applying to BSMS p28	The proportion of females progressing from BMBS course application, to offer, to acceptance is broadly consistent and slightly exceeds the benchmark for students. We will hold a focus group with our M students to better understand their experience of applying to the school.	- engage with Admissions staff team - hold M UG focus group - develop action plan accordingly	Inclusivity Team Admissions staff team	2019 M	Focus group held More quantified measures will be devised when we have the findings from the focus group

28 Hold focus group with M UG students to understand their experiences of student outreach at BSMS p117	The Outreach team also organise a number of initiatives (BrightMED, BrightWAMS, Teddy Bear hospital) with high levels of student participation. The F% in these is higher than the overall student F% (56%). The AS Project Officer and the WP Officer will work together to create a clearer reward system for all students involved and to address this gender imbalance	- engage with WP Officer & Outreach team - hold M UG focus group - develop action plan accordingly	Inclusivity Team WP team	2019 M	Focus group held Levels of student participation by gender in these groups to match the cohort gender balance.
29 Further data analysis of application pipeline in research roles p43 & 50	We have provided the breakdown of our staff into teaching only, research only and teaching and research and note that the level of F staff in Research and Teaching is lower than in Research only. Within research-only, particularly at Grade 6, we note that there are very few M staff. We will relook at the by grade job application data to see whether there is any pattern and interview M staff in Research roles to understand their experience of applying.	- more detailed analysis of recruitment data - hold M research staff focus group - develop action plan accordingly	Inclusivity Team HR	2019 M	Focus group held Clearer understanding of experience and data by role type. Once we have these, more quantifiable targets will be set.
30 Creation of returners fund and other support for those returning from maternity or other career break p87 & 96	We will support to all staff recently returned from a career break with access to a returners' fund to support their research and more flexible hours.	- establish fund and guidance - publicise to staff and managers - track take-up of fund - track satisfaction in maternity returner's survey and staff survey	Dean Inclusivity Team HR	Communication in Spring 2018 Tracking and monitoring as arises H	Increase in post-maternity or other career break retention from late 2018 onwards



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