

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 are 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	Bronze	Silver
Word limit	10,500	12,000
Recommended word count		
1.Letter of endorsement	500	500
2.Description of the department	500	500
3. Self-assessment process	1,000	1,000
4. Picture of the department	2,000	2,000
5. Supporting and advancing women's careers	6,000	6,500
6. Case studies	n/a	1,000
7. Further information	500	500

Word Count Extension

NDWRH has been granted an additional 1000 words for this application as we have both clinical and non-clinical staff, which are considered separately. These additional words have been used in Section 4.2.

	Tue 06/11/2018 09:27	
	Athena Swan <athena.swan@advance-he.ac.uk></athena.swan@advance-he.ac.uk>	
	RE: NDWRH, University of Oxford: Request for Additional Words	
To 📕 Laura Go	oude; □athenaswan@ecu.ac.uk	
Action Items	s +	Get more a
Hi Laura,		
Women's & both clinical	iks for your email. We are happy to grant an additional 1,000 words to the Nuffield Depa & Reproductive Health at the University of Oxford in the November 2018 round due to th al and non-clinical staff. The extra words are given to allow appropriate reflection, analys on of issues for the different staff groups, including analysis of the different pipelines.	neir having
	ude a copy of this email at the beginning of the application, and state clearly throughout words have been used.	where the
With best w	wishes,	
Jess		
Jessica I Equality Cha	Kitsell harters Adviser	
	<u>itsell@advance-he.ac.uk</u> 0 3870 6022	
www.advan	ince-he.ac.uk	
	Westminster Tower nbankment, London, SE1 7SP	
	vance HE on: acebook I <u>LinkedIn</u>	
* Ac	dvance HE	



Name of institution	University of Oxford				
Department	Nuffield Department of W Reproductive Health	'omen's &			
Focus of department	STEMM AHSSBL				
Date of application	30 th November 2018				
Award Level	Bronze <u>Silver</u>				
Institution Athena SWAN award	Date: April 2017	Level: Bronze			
Contact for application	Professor Stephen Kennedy				
Must be based in the department	Professor Stephen Kenned	dy			
	Professor Stephen Kenned stephen.kennedy@wrh.ox				
Must be based in the department					

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.

NUFFIELD DEPARTMENT OF WOMEN'S & REPRODUCTIVE HEALTH Medical Sciences Division



Stephen Kennedy Professor of Reproductive Medicine & Head of Department

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

22nd November 2018

Dear Athena SWAN Panel,

Athena SWAN Silver Application Nuffield Department of Women's & Reproductive Health (NDWRH), University of Oxford

I am delighted to support the department's application for an Athena SWAN Silver Award. A dedicated team, representative of all NDWRH staff and student members, have worked extremely hard on the present application for many months. I owe them my personal thanks for their enthusiasm and dedication.

Our actions to date have been transformative, brought about largely through the appointment early last year of a new Head of Administration & Finance from a commercial background. She has invigorated our previous Action Plan and spearheaded a range of much needed innovations, including: a) a new suggestion for improvements scheme (Brainwaves) and engagement platform (Peakon); b) refurbishment of departmental space (Project Rejuvenation), and c) most importantly, a commitment to tackle some of the challenges facing the HE sector, namely short-term contracts and limited career development opportunities for postdocs.

The changes already introduced have resulted in greater satisfaction, as evidenced by our staff surveys, and influenced everyone's approach to the important issues that affect both women and men, particularly gender equality, work-life balance and the working environment. We recognise much more needs to be achieved but we feel the new Action Plan establishes a clear path towards further improvement.

Athena SWAN has also strongly influenced our research strategy. In 2016, we brought The George Institute for Global Health into NDWRH and together we now focus on emphasising gender-based differences in health outcomes and improving the lives of women across the world, especially those living in low-resource settings. Reflecting our broader interests in the life-course of women, in



December 2017, we changed our name, through a department-wide democratic process, to NDWRH from the more limited Nuffield Department of Obstetrics & Gynaecology.

Our long-term plan is to create an Institute of Global Women's Health - a new state-of-the-art facility to support biomedical, social and data scientists, with a strong commitment to appoint leading women to senior academic roles. The initiative would solve one of the principal barriers to improving the working environment for all staff - the poor physical state of our current building, which was built in the early 70's.

My personal commitment to Athena SWAN is demonstrated by the assistance and encouragement given to senior and mid-career female academics in NDWRH seeking a fellowship and/or promotion in the University's Recognition of Distinction Exercise so as to correct our historical gender imbalance. In 2014-15, four Associate Professorships were awarded, all to men. Since then, one full Professorship (female), three Associate Professorships (two female; one male) have been awarded, as well as six mid-career Fellowships (all female).

The information presented in the application (including the qualitative and quantitative data) is an honest, accurate and true representation of the department.

Yours sincerely,

Stephen Kennedy Head of Department

Word Count: 444



ACARES	Academic and Research Staff
ACF	NIHR Academic Clinical Fellow
ACL	NIHR Academic Clinical Lecturer
AP	Associate Professor
ART	Assisted Reproductive Technology
AS	Athena SWAN
ASDWG	Athena SWAN Development Working Group
ASPB	Athena SWAN Project Board
ASWWG	Athena SWAN Wellbeing Working Group
BAP	Bronze Action Plan
BDI	Big Data Institute
ССТ	Certificate of Completion of Training
CIPD	Chartered Institute of Personnel and Development
CL	Clinical Lecturer
CR	Clinical Researcher
CRF	Clinical Research Fellow
СТА	Clinical Teaching Associate
DGS	Director of Graduate Studies
DPhil	Doctor of Philosophy (Oxford PhD)
EDU	Equality and Diversity Unit
EJRA	Employer Justified Retirement Age
EWG	Education Working Group (sub-group of new SLT)
F	Female
FTC	Fixed Term Contract
G	Grade, e.g. G6 = Grade 6
GSC	Graduate Studies Committee
HAF	Head of Administration and Finance
HE	Higher Education
Hilary	Second (spring) term in an Oxford academic year
HoD	Head of Department
HR	Human Resources
НТА	Human Tissue Act
IWD	International Women's Day
IRS	Institute of Reproductive Sciences
M	Male
MDP	Management Development Programme
Michaelmas	First (autumn) term in an Oxford academic year
MSc	Masters (Taught)



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MSc(Res)	Masters (by Research)
MSD	Medical Sciences Division
NIHR	National Institutes of Health Research
NDOG	Nuffield Department of Obstetrics & Gynaecology
NDWRH	Nuffield Department of Women's & Reproductive Health
NHS	National Health Service
O&G	Obstetrics & Gynaecology
OLI	Oxford Learning Institute
OUHFT	Oxford University Hospitals NHS Foundation Trust
PDR	Personal Development Review
PI	Principal Investigator
PGR	Postgraduate Research Students
PGRC	Postgraduate Research Committee
PGT	Postgraduate Taught Students
Prof	Professor
PRWG	People and Resources Working Group (sub-group of new SLT)
PSS	Professional and Support Staff
RoD	Recognition of Distinction
RSIV	Senior Researcher Grade (equivalent to Professor)
SAP15	Silver Action Plan 2015
SAP18	Silver Action Plan 2018
SAT	Self-Assessment Team
SCRF	Senior Clinical Research Fellow
SiP	Staff in Post
SLT	Senior Leadership Team
SMP	Statutory Maternity Pay
SPL	Shared Parental Leave
TGI	The George Institute for Global Health (UK)
TOR	Terms of Reference
Trinity	Third (summer) term in an Oxford academic year
U	Unknown
URL	University Research Lecturer
VBI	Value-based Interview
WIMM	Weatherall Institute of Molecular Medicine
	· · ·



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.

The **Nuffield Department of Women's & Reproductive Health** was established in 1937 and is one of the smaller clinical departments in MSD, encompassing multi-disciplinary research across the full spectrum of women's health.

	UNIV	ERSITY OF OXFORD							
Central Administrative Departments	Humanities	Mathematical Physical and Life Sciences	Medical Sciences	Social Sciences					
	Ν		VISION DEPARTMENT	ç					
Libraries and Museums		NEDICAL SCIENCES DI		5					
Libraries and Museums	Biochemistry	Clinical Medicine	Clinical Neurosciences	Experimental Psychology					
	Radcliffe Department of Medicine	Oncology	Orthopaedics, Rheumatology and Musculoskeletal Sciences	Physiology, Anatomy and Genetics					
	Paediatrics	William Dunn School of Pathology	Pharmacology	Population Health					
	Primary Health Care Sciences	Psychiatry	Surgical Sciences	Nuffield Department of Women's & Reproductive Health					
				The George Institute UK					

Figure 1 Organisational structure of the University of Oxford

In November 2015, **The George Institute UK** (then 9F:11M, now 13F:12M) joined NDWRH. This is the UK centre for a global, medical research organisation headquartered in Australia whose mission is to increase access to quality healthcare worldwide through high-impact clinical trials in non-communicable diseases and injury. A new major programme of research in Global Women's Health promotes a gendered perspective across research in addition to focusing on women-specific conditions. Underpinning this is a commitment to promote careers of female researchers globally;

Jane Hirst (AS Academic Lead in NDWRH) is actively helping the Australia office to submit an AS Bronze application.

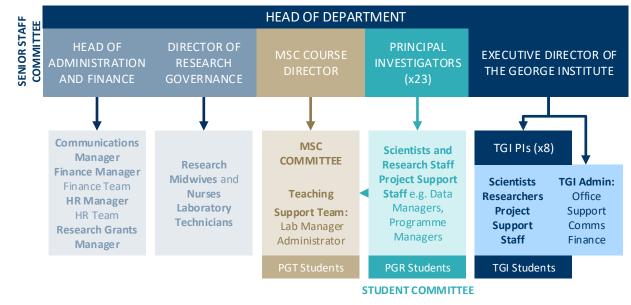
TGI UK staff have University contracts (and are considered throughout this application as core departmental staff), but are closely affiliated with TGI Global; the Executive Director has reporting lines to both.

What do we do?

- **Research** NDWRH has four overarching themes: Cancer, Global Health, Maternal & Fetal Health, and Reproductive Medicine & Genetics. We have expertise in genetic studies, the dissection of molecular, biochemical and cellular mechanisms underlying normal and aberrant reproductive tissue function, large-scale clinical studies in women's health, machine learning applied to big data and medical imaging, assisted reproduction and pregnancy complications, sex disaggregated data analysis and the study of growth and development across the first 1000 days of life.
- TeachingNDWRH has approximately 30 PGR students and delivers a one-year, taught MSc in
Clinical Embryology to approximately 20 students. The department has no
undergraduates, but delivers the O&G teaching programme for medical students in
the University.
- *Clinical* 16 clinical academics (8F:8M) have either OUHFT honorary or part-time contracts and undertake clinical work in O&G for the NHS Trust.

Changing our name (December 2017)

Changing from the Nuffield Department of Obstetrics & Gynaecology to the Nuffield Department of Women's & Reproductive Health (after in-depth consultation and a department-wide ballot) recognised the broadening scope of research undertaken and the need to be inclusive of diverse research interests.



NDWRH Structure

Figure 2 NDWRH structure



How are we funded?

The average annual income is approximately £10 million, of which around 40% is direct research income from Research Councils, industry and charitable foundations. On 31/07/2018, 70% of our staff FTE was funded from external sources, including research income and the NHS.

Where are we located?

NDWRH research groups are located across seven sites within a six-mile radius of central Oxford. The departmental administration team is primarily based at the Women's Centre. Winchester House houses the MSc in Clinical Embryology. This devolved structure creates challenges in maintaining an 'NDWRH' identity and departmental cohesion: 'Building a Collaborative Culture' is a top priority in our SAP18.

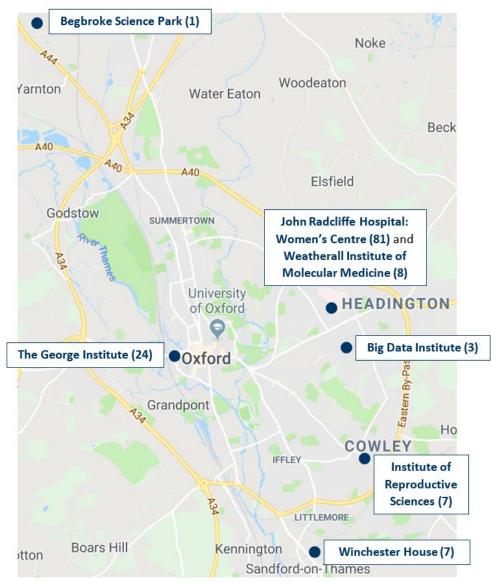
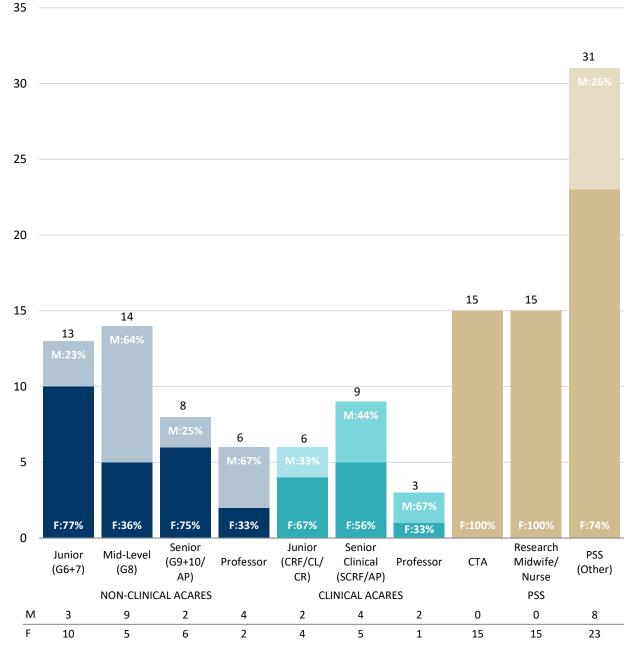


Figure 3 NDWRH sites and number based at each one

Our People Profile (31/07/2018)

- **120 staff** (86F:34M) including academic, research, technical and professional staff
- 33 PGR students (27F:6M) including DPhil and MSc(Res)
- 16 PGT students (13F:3M) studying the MSc in Clinical Embryology
- 15 Visitors (10F:5M) including academics and students





Staff numbers have increased by 35% since 2013; this trend is expected to continue with the recruitment of at least three new senior posts (*5.1.i, p.36*) and continued expansion of TGI.



Clinical Teaching Associates: lay women on variable hour contracts who use their own bodies to teach medical students how to examine women (4-6 evening sessions per month). These have been included here for completeness but are not considered core departmental staff, and do not appear in later data.

Research Midwives (13F)/Nurses (2F): classed as PSS, these staff members support research through patient recruitment, clinical trial administration and the collection, processing and management of biological samples. 100%F is unsurprising: nationally only 0.3% of midwives and 11.5% of nurses are male¹.

Hours

	PSS				TOTAL		
	F	Μ	Total	F	Μ	Total	TOTAL
Full-Time	18	4	22	22	21	43	65
run-rime	47%	50%	48%	67%	81%	73%	62%
Part-Time	20	4	24	11	5	16	40
	53%	50%	52%	33%	19%	27%	38%
Total	38	8	46	33	26	59	105

Table 1 Gender and staff type breakdown of hours (excluding variable hours CTAs)

75% of our part-time ACARES have additional employment elsewhere (usually the NHS or TGI Global).

Word Count: 620



¹ NMC (2017) Annual equality, diversity and inclusion report 2016-2017

3. THE SELF-ASSESSMENT PROCESS

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

Describe the self-assessment process.

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

A SAT was formed in November 2012 and oversaw the submission of our successful 2013 Bronze and 2015 Silver applications. During this period, the SAT met termly and membership fluctuated between 11 and 17 members from a variety of roles, remaining approximately 75%F in line with the departmental gender ratio. Specific working groups were formed as required to take forward actions.

Calls for membership are advertised at departmental meetings and by newsletter. If necessary, targeted emails help ensure that both genders are represented on each group.

Since our 2015 application, and in preparation for this application, the SAT has undergone a number of changes:



Jane Hirst appointed AS Academic Lead, and SAT reduced from 17 members to 8 (5F:3M) to increase focus and accountability for actions.

Four sub-groups were established to take forward specific SAP15 actions, chaired by SAT members:

HR (3F:1M) Graduate Studies (2F:1M) Academic Development (2F:1M) Workplace Culture (3F:1M)

Chairs provided a progress report at each SAT meeting, approximately once a term.

SAT invited representation from a PGR student (M) and Research Midwife (F) as these groups were not then represented; we felt strongly that it was important for all groups to have a voice.

By January 2018, progress had been made across all areas of the SAP15 so it was felt timely to restructure the SAT to focus on the 2018 Silver application. The 10-person team was divided into an **Athena SWAN Project Board (ASPB)** to oversee the project and provide overarching direction. The ASPB report into the senior leadership team on a twice-termly basis.

Two subgroups, the Athena SWAN Well-being Working Group (ASWWG) and Development Working Group (ASDWG), which replace the previous four working groups, sit under the ASPB. These were established through consultation with the SAT to focus on two broad areas to be delivered with gender equality and inclusion in mind.

Each group developed clear TOR with SMART objectives to be achieved over the following six months in preparation for the submission of this application.



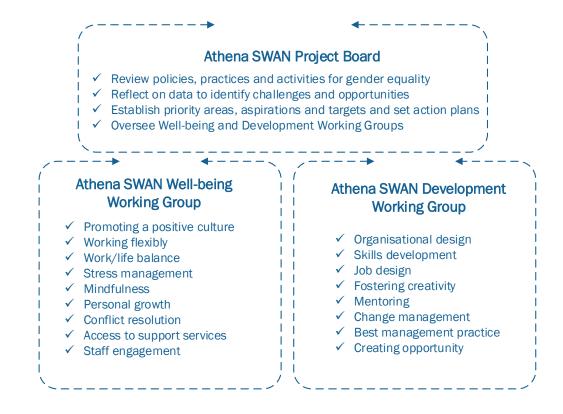


Figure 5 Broad areas of responsibility for the re-structured SAT (87 words)

The SAT is currently **79%F** (see below), which reflects the higher percentage of female staff and students (**71%F**), but we note that increased male representation can help embed Athena SWAN principles by signalling that it applies to everyone. As such, gender balance has been included in our annual review of SAT membership:

SAP18

3.7 On an annual basis, to review the gender balance across the SAT.



Head of Department; Professor of Reproductive Medicine; Honorary **Consultant Gynaecologist & Divisional Director, Women's &** Children's Services (until April 2018) in OUHFT. Joined 1999.

Athena SWAN Project Board



Professor of Reproductive & Genomic Epidemiology; Deputy Head of **Department: Director of Graduate** Studies: Co-Director of the Endometriosis CaRe Centre (20+staff). Full-time flexible hours; mother of 7 year old twin girls. Joined 2014.



Senior Fellow in Perinatal Health (40%); NHS Consultant Obstetrician (60%+after hours duties): Athena SWAN Academic Lead. Working across NDWRH and TGI. Married, with a Labrador and two cats. Joined 2013.



Clinical Trials Manager, promoted from Research Midwife. Working 4 days a week (one from home) to accommodate childcare. Joined 2014.



DPhil Student. Joined in 2016 as a Laboratory Technician; supported to start DPhil in October 2016.

HR & Communications Assistant; ASWWG Secretary. Joined in 2016 as an Administration Apprentice; started in current role on completing this in 2018.

Head of Admin and Finance; ASWWG Lead. Working full-time, one day a fortnight from home to manage workload. Married with three dogs. Joined 2017.



Lab Manager and **Principal Investigator.** Working full-time flexible hours. Joined 2005.



Communications Manager. Working 4 days a week (3 from home to facilitate childcare). Joined 2014.



Athena SWAN Wellbeing Group

HR Manager; ASDWG Lead. Working full-time compressed hours (Mon-Thurs) to undertake CIPD qualification. Joined 2015.





Deputy Director of TGI; Associate Professor of Cardiovascular Medicine; **Honorary Consultant**



MRC Clinical Training Fellow; DPhil Student; Welfare Rep (NDWRH Student Committee). loined 2017.





Scientific Director, Oxford **Centre for Fetal Monitoring Technologies; University** Research Lecturer; NIHR Cardiologist. Joined 2015. Career Development Fellow.

Working full-time flexible hours to take care of two small children (partner is away during the week). Joined 2007.



DPhil Student; Welfare Rep (NDWRH Student Committee). Started Oct 2017 after finishing taught MSc in dept.

HR & Graduate Studies Administrator; ASDWG Secretary. Working full-time flexible hours. Joined 2015.

Athena SWAN Development Group



(ii) an account of the self-assessment process

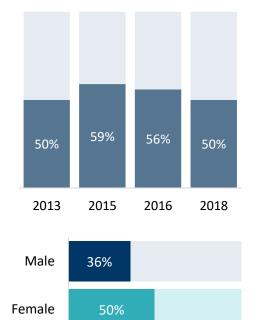
Consultation forms a central mechanism for the self-assessment process, providing continuous feedback to measure impact, modify plans and implement action.

THE SURVEY

NDWRH runs a biennial, web-based survey to canvas views from the whole department on a range of issues, including those relating to Athena SWAN. Results have been presented at departmental meetings, with opportunities for staff to comment. Issues raised through the 2018 survey results were used to structure discussions at our **2018 Away Day** (see below).

Participation rates have been below the MSD benchmark (60% in 2018), and particularly low for men, students and ACARES, so in August 2018 we launched '**Peakon**', an online staff engagement platform, which sends out weekly 'pulse' surveys. Investment in this software:

- a) allows live tracking of trends;
- b) provides additional qualitative feedback for every question;
- c) facilitates immediate feedback to anonymous comments;
- allows us to clearly identify gender differences and take forward immediate remedial action; disparity in the 'Reward' score (fig.8) and associated comments has already prompted us to review starting salaries (ongoing) and implement a new policy around this (SAP18 2.1.iv).



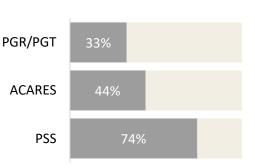


Figure 7 Graphs showing: a) overall response rate;
b) gender participation for 2018 survey (NB 6 unknown not shown); and
c) staff group participation for 2018 survey

Segments	Management Support ∣→	<u>Reward</u> →	<u>Strategy</u> →	Peer Relationships ∣→
Female Gender <u>at</u> 87		6.2	6.9	
Male Gender <u>#1</u> 33		7.1	7.0	

Figure 8 Peakon dashboard segmented by gender

IMPACT: After the first 3 months, the participation rate was **79%** and we have received **over 900 comments** providing input about the department. A dashboard with aggregated scores will soon be available on the Intranet.

Male participation has increased (to 72%, fig.9), as has student (78%) and ACARES (73%).

Segmente	Participation			
Segments	Aggregated	Last		
Female Gender 187	82%	40%		
Male Gender 133	72%	24%		

Figure 9 Participation rates by gender (09/11/18).

Aggregated scores indicate participation in the last 3 months.

SAP18

1.1.i Use Peakon to develop meaningful senior management reports on the progress of the SAP18 by the end of Trinity 2019

TERMLY MEETINGS AND THE 2018 AWAY DAY

NDWRH has also implemented fora for face-to-face consultation. In July 2017, we introduced departmental **Termly Meetings** with the HoD. These include news updates and a Q&A session, which from February 2018, was facilitated through **Mentimeter**. This allows the audience to submit, via a mobile website, anonymous comments that appear immediately on screen. The immediate impact was **increased participation rates** from 1 or 2 comments/questions per meeting to 34. The focus on anonymity allows a more inclusive approach.



Figure 10 Comments at the Termly Meeting via Mentimeter

Discussion of the 2018 Survey results at the May Termly Meeting formed the basis for our Away Day in June. A core part of the day was group work inviting attendees (88F:22M, including staff, students and visitors) to reflect on and feedback views on key priorities from the survey, including ACARES development, leadership, funding support and building a collaborative culture. One group specifically focused on gender equality. A number of suggestions from this day have been included in our SAP18, e.g.:

SAP18

- **2.4** Provide clear guidance on ACARES career pathways within the department.
- **2.17** To introduce a departmental open day
- **3.8** Build and implement an alumni database to expand collaboration and networking opportunities



Figure 11 Group work at the 2018 Away Day

SHARING AND REVIEWING GOOD PRACTICE

To find and share good, evidence-based practice:

- The HR Manager trained as an AS panellist and reviewed May 2018 applications;
- The AS Academic Lead and HR Manager attend the **MSD AS Network** (established to share good practice with divisional colleagues);
- Prof Krina Zondervan (Deputy HoD/DGS/ASPB Member) sits on the **MSD AS Steering Committee** (established to consider AS with a wider, strategic remit);
- Critical feedback was provided by Katherine Corr, MSD AS Advisor, and Adrienne Hopkins, Acting Head of the University's EDU.

(iii) plans for the future of the self-assessment team

Ongoing monthly meetings have been scheduled for the ASPB, ASWWG and ASDWG for 2018-19 to take forward new objectives identified in the SAP18. The groups have been integrated into our restructured leadership model (5.6.iii, p.64) and will be subject to review on an annual basis against achieved objectives.

To widen engagement with AS, we have included the following in our SAP18:

SAP18

1.2.i Create an AS Action Plan dashboard on the NDWRH Intranet by the beginning of the 2019/20 academic year.

Word Count: 998



4. A PICTURE OF THE DEPARTMENT

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

4.1. Student data

(i) Numbers of men and women on access or foundation courses: N/A

(ii) Numbers of undergraduate students by gender: N/A

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

(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.

Since 2008, NDWRH has run a one-year **MSc in Clinical Embryology**, providing graduates from either a scientific or clinical background with advanced theoretical and practical understanding of human reproductive biology, embryology, infertility and ART. This is typically a springboard for entry into academia (usually via PGR study, often within NDWRH) or clinical work (e.g. medical school, fertility companies or specialisation in fertility medicine).

The higher proportion of female students (Table 2) correlates with other UK institutions offering similar courses: the gender distribution for Leeds University's MSc in Clinical Embryology and ART is currently 17F:2M, with an aggregated benchmark of 84%F over the 2015-18 period.

	2015/16	2016/17	2017/18	2018/19	TOTAL
Female	17* (85%)	18 (100%)	13 (81%)	21 (91%)	69 (90%)
Male	3 (15%)	-	3 (19%)	2 (9%)	8 (10%)
TOTAL	20	18	16	23	77

Table 2 Gender profile of PGT students in NDWRH by intake year. One female student withdrew during the course in 2015/16.

	201	5/16	2016	2016/17		2017/18		2018/19		TAL
	F	М	F	М	F	М	F	Μ	F	Μ
Applications	44	11	59 4	8	46	20	46	18	195	57
Applications	80%	20%	88%	12%	70%	30%	72%	28%	77%	23%
Offers	32	5	31	4	26	6	32	8	121	23
Offers	86%	14%	89%	11%	81%	19%	80%	20%	84%	16%
Acceptances	19	3	18	0	13	3	21	2	71	8
Acceptances	86%	14%	100%	0%	81%	19%	91%	9%	90%	10%
App:off rate	73%	46%	53%	50%	57%	30%	70%	44% ^B	62%	40%
Off:acc rate	59%	60%	58%	0%	50%	50%	66%	25%	59%	35%

Fewer male on-course students is reflected in the number of applications received:

Table 3 Gender profile of admissions to PGT degrees by intake year

Α

Male applications increased between 2016/17 and 2017/18, reflecting an overhaul of the website in 2017 to ensure diverse representation, including adding more images of men and uploading alumni profiles (**5F:3M**). This is an ongoing project (*5.6.vii, p.69*).

Networking is important in recruiting graduates: course staff actively keep in touch with course alumni and many applicants interviewed for 2018/19 entry mentioned meeting our graduates at conferences and hospitals across the world. Having formed a strong network over the past



10 years we will explore how we can now leverage this to increase male applications in our SAP18.

B Aggregated figures indicate lower success rates for men for both offers and acceptances: investigating this further has been included in our SAP18 as it is unclear why this difference exists: applicants are assessed against set criteria to avoid bias and all panel members (1F:2M) have completed Unconscious Bias training. Funding is the primary cause for applicants withdrawing post-offer.

	2014/2015		2015/2016		2016/2017		2017/2018		TOTAL	
	F	М	F	Μ	F	Μ	F	Μ	F	Μ
Pass	11	-	14	2	15	-	11	2	51	4
Distinction	2	-	2	1	3	-	2	1	9	2
Fail	0	-	1	0	0	-	0	0	1	0
TOTAL	13	-	17	3	18	-	13	3	61	6
%Pass	85%	-	82%	67%	83%	-	85%	67%	84%	67%
%Distinction	15%	-	12%	33%	17%	-	15%	33%	18%	33%
%Fail	0%	-	6%	0%	0%	-	0%	0%	2%	0%

Table 4 Degree completion rates

Although exaggerated by small numbers, an action to investigate the higher percentage of male distinctions as an outcome of the admissions pipeline has been included in the SAP18 as we would expect equal distribution.

SAP18

С

5.2 i. Undertake a post-interview review of student recruitment processes for PGR and PGT at the end of 2018/19.

ii. Identify sources of applications to understand whether this affects the student gender balance.

iii. Explore options for using networks to increase male applications.

iv. Continue to monitor male distinction rates to see whether this remains higher than the female rate.



(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.

NDWRH offers a **DPhil** (3-4 years) or **MSc(Res)** (2-3 years) in Women's & Reproductive Health.

Both are full-time, but continuation fees are waived by MSD for students in the 4th (DPhil) and 3rd (MSc) years, so they can effectively be completed on a part-time basis. One Research Midwife is completing an MSc(Res) alongside her main post and NHS clinical work. Adjustments will also be made for on-course students for health or caring reasons.

	2015/16	2016/17	2017/18	2018/19	TOTAL
Female	8 (89%)	8 (80%)	13 (93%)	9 (82%)	38 (86%)
Male	1 (11%)	2 (20%)	1 (7%)	2 (18%)	6 (14%)
TOTAL	9	10	14	11	44

Table 5 Gender profile of PGR students in NDWRH by intake year (please note that some figures are higher than stated in Table 6: some students are admitted through other channels in the University and then routed to departments for enrolment).

Our PGR students are predominantly female, consistent with other UK universities offering similar courses: University College London's PhD in Women's Health was 81%F in 2015/16².

	201	5/16	201	2016/17		7/18	2018	8/19	TO	TAL
	F	М	F	Μ	F	Μ	F	Μ	F	Μ
Applications	10	1	13	2	21	5	18	5	62	13
Applications	91%	9%	87%	13%	81%	19%	78%	22%	83%	17%
Offers	7	1	12	1	15	3	14	4	48	9
Offers	88%	13%	92%	8%	83%	17%	78%	22%	84%	16%
Accontoncos	7	1	7	1	13	1	7	2	34	5
Acceptances	88%	13%	88%	13%	93%	7%	78%	22%	87%	13%
App:off rate	70%	100%	92%	50%	71%	60%	78%	80%	77%	69%
Off:acc rate	100%	100%	58%	100%	87%	33%	50%	50%	71%	56%

The balance reflects the proportion of applications received:

Table 6 Gender profile of admissions to PGR degrees by intake year

We are confident there is no bias in the admissions process. The panel comprises the prospective supervisor, female DGS (also member of the ASPB) and male MSc Course Director, all of whom have completed **Unconscious Bias** training. Aggregated application:offer rates indicate a marginally higher offer rate for female applicants (F77%:M69%) but note 1M=8%. Places are offered to a high percentage of applicants, reflecting the small number of places per year and the process whereby applications are to work with specific PIs rather than to a broader programme. Reasons for withdrawal primarily relate to an inability to obtain funding.

Action has consequently focused on encouraging male applicants:



In 2016, we redesigned the 'Study' section of our external website adding alumni profiles (including photographs, where provided), specifically including representation from students of both genders (**3F:2M**). We also added a list of projects offered by supervisors (ensuring male and female supervisors were represented) to demonstrate the breadth of research



² More recent data was not available

undertaken by NDWRH. The impact of this is demonstrated at **A**. Although actual figures are small, there has been a **steady increase in male applications** from 9% (prior to the change) to 19% (after the change), which has remained constant into the latest round.

There are no gender differences in thesis submission rates nor time taken to completion:

Gender	Average Time to Submission
Female	3.76 years
Male	3.77 years
Table 7 Average time	to submission for thoses submitted 2012 1

Table 7 Average time to submission for theses submitted 2013-18

SAP18

5.2 Undertake a post-interview review of student recruitment processes for PGR and PGT at the end of 2018/19.

(v) Progression pipeline between undergraduate and postgraduate student levels

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

NDWRH does not deliver an undergraduate course, but contributes to undergraduate teaching by organising the O&G course of the University's Medical Sciences degree and hosting 8-week projects for final year medical students. Since 2016, we have hosted 20F:6M (77%F:23%M), prefiguring the PGR and PGT gender balance. This point of the pipeline has been underutilised in encouraging men into the discipline (and supporting women into clinical academia³): an action has therefore been included in our SAP18:

SAP18

5.2 Run a workshop for undergraduate project students in the department about careers in clinical academia and about the field of clinical embryology.

³ Edmunds LD, Ovseiko PV, Shepperd S, Greenhalgh T, Frith P, Roberts NW, Pololi LH, Buchan AM., 'Why do women choose or reject careers in academic medicine? A narrative review of empirical evidence', *Lancet*, 2016 Dec 10;388(10062):2948-2958



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.

CAREER PIPELINES

ACARES in NDWRH are separated into **clinical** and **non-clinical**. Each group follows a different career pipeline: typical transition points are illustrated below, although neither pipeline is definitive: individuals can progress along a variety of routes.

NDWRH is primarily research-focused and the classification of our roles reflect this. Most researchers undertake some teaching, which is a prerequisite for an AP title, but we have no teaching-only roles. ACARES staff within NDWRH are not differentiated as academic or research staff.

Clinical

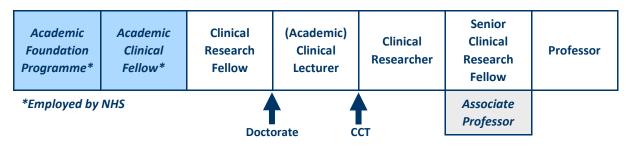


Figure 12 Clinical Academic Career Pipeline

The clinical academic career pipeline in England comprises several training stages designed to allow flexibility and mobility between research institutions. Medical school graduates can join the 2-year **NIHR Academic Foundation Programme (AFP)**, which includes dedicated time for academic activities such as research and teaching alongside the required Foundation training for junior doctors. This can be followed by an **NIHR Academic Clinical Fellowship (ACF)**, 3-4 years in duration, which combines specialist clinical training with 25% dedicated research time. An AFP is not a requirement to undertake an ACF, but candidates must demonstrate clinical competency and a commitment to research. The data generated during an ACF are typically used to apply for doctoral funding. Although a doctorate is essential for a successful career in academic medicine, passing through the AFP and ACF stages is not mandatory: clinicians can use other routes to obtain their doctorate.

Clinical Research Fellows (CRFs) are clinicians, typically without a postgraduate degree, engaged to work on clinical research projects to gain experience of research methodology. Some will undertake a DPhil or MSc(Res).

Clinical Lecturers (CLs) are fixed-term University positions, typically for 6 years, with 50% dedicated time for high-quality research for clinicians who have completed a doctorate. The remaining 50% is clinical training towards a Certificate of Completion of Training (CCT), which is usually achieved during the Clinical Lectureship followed by appointment to a senior academic position with an honorary NHS consultant contract. Academic Clinical Lecturers (ACLs) are funded by NIHR for 4 years; they are otherwise identical to CLs.

Clinical Researchers are typically first fellowship holders following a Clinical Lectureship (e.g. Clinician Scientists and Intermediate Clinical Fellows).

Although dependent on the funding body, **Senior Clinical Research Fellowships** are typically awarded to individuals with 3-5 years' postdoctoral research experience who hold a CCT. These posts are typically non-tenured (although see *4.2.ii*, *p.31*).

In addition, staff can be conferred academic titles, including **Associate Professor** and **Professor** (5.1.iii, p.41).

Non-Clinical Pipeline

Research	Postdoctoral	Researcher/	Senior	Senior	Senior
Assistant	Researcher	Research Fellow	Researcher	Researcher	Researcher
(Grade 6)	(Grade 7)	(Grade 8)	(Grade 9)	(Grade 10)	(RSIV)
Docto	orate	University Research Lecturer	Associate Professor	Profe	essor

Figure 13 Non-Clinical Pipeline

G6 **Research Assistants** work on research projects, but are not able to progress to a G7 role without completing a doctorate. The typical non-clinical career path following the completion of a doctorate is a G7 postdoctoral position, usually on an FTC. During this time, staff can try to secure independent funding to become **Research Fellows**. It is also typical for staff to move to academic posts at other universities or transition to industry.

Staff at G8 and above can apply for formal titles at the University of Oxford that recognise academic contributions and achievements (5.1.iii, p.41). Associate Professors and Professors can be both titular and formal posts: both are included under the relevant sections below.

ANALYSIS

Clinical

Α

		Female	Male	Total	%F	%M	MSD %F	Pipeline Notes
				Α			_	Pipeline Notes
	2014	5	6	11	45%	55%	45%	
Clinical	2015	6	5	11	55%	45%	46%	
Research	2016	3	4	7	43%	57%	45%	ST3
Fellow	2017	1	2	3	33%	67%	45%	
	2018	0	1	1	0%	100%	46%	
	2014	1	1	2	50%	50%	35%	
(Academic)	2015	1	1	2	50%	50%	38%	
Clinical	2016	1	1	2	50%	50%	29%	
Lecturer	2017	2	1	3	67%	33%	31%	
	2018	2	1	3	67%	33%	29%	-
	2014	0	0	0	0%	0%	20%	
Clinical	2015	0	0	0	0%	0%	36%	
Clinical Researcher	2016	B 2	0	2	100%	0%	44%	
Researcher	2017	2	0	2	100%	0%	58%	
	2018	2	0	2	100%	0%	56%	
	2014	3	2	5	60%	40%	34%	
Senior	2015	3	2	5	60%	40%	36%	
Clinical	2016	3	1	4	75%	25%	35%	Consultant
Research	2017	3	1	4	75%	25%	38%	
Fellow	2018	3	1	4	75%	25%	39%	
	2014	0	3	3	0%	100%	27%	
Associate	2015	0	3	3	0%	100%	33%	
Professor	2016	B 0	3	3	0%	100%	21%	Titular and non-titular
(Clinical)	2017	1	3	4	25%	75%	25%	(5.1.iii)
	2018	2	3	5	40%	60%	27%	
	2014	1	3	4	25%	75%	11%	
	2015	- 1	3	4	25%	75%	12%	
Professor	2016	1	3	4	25%	75%	13%	
(Clinical)	2017	- 1	3	4	25%	75%	13%	
	2018	1	2	3	33%	67%	13%	
	2014	10	15	25	40%	60%	32%	
	2015	11	14	25	44%	56%	34%	
TOTAL	2016	10	12	22	45%	55%	33%	
	2017	10	10	20	50%	50%	34%	
	2018	10	8	18	56%	44%	34%	

 Table 8 Clinical staff in NDWRH (snapshot taken on 31/07 each year)

From 2009-2016, NDWRH ran a clinical research fellowship training programme in partnership with OUHFT offering senior speciality trainees in O&G - or doctors with equivalent overseas experience - a 50% clinical role at the Horton Hospital in Banbury with the remaining 50% for research (often completing an MSc(Res)). In 2016, the hospital was downgraded to a midwifery-led unit, so the programme was no longer viable. These posts were not generally a pipeline into an academic career at the University as individuals often returned to hospitals in their own countries on completion of the programme.

As illustrated in Fig.12, the pipeline into clinical academia is usually via an ACF; we currently have 3 (**2F:1M**) associated with NDWRH.

Excluding CRFs, since 2014 the other clear trend has been the level of change in female roles compared to male roles (which have been relatively static). The overall number of female clinical academics has doubled (Fig.14): increasing from F36%:M64% (2014) to F59%:M41% (2018).

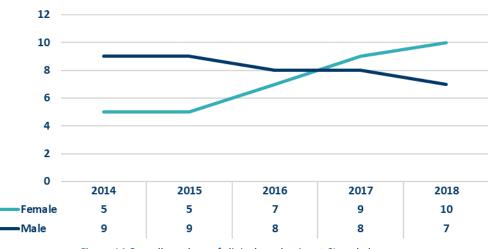


Figure 14 Overall numbers of clinical academics at CL and above

This partly reflects the younger average age of female compared to male clinicians in NDWRH (Table 9), who are accordingly at an earlier stage of their career (noting periods of maternity leave will have had an impact) and whom we have made a concerted effort to champion to support their progression along the career pipeline. This has included practical support for fellowship applications, advising on ACL applications and providing formal University contracts to NHS colleagues with research funding. Although we are above the MSD benchmark at senior levels, this supports of our long-term aim of a 50:50 gender split.

	Female	Male
Average tenure in senior clinical post in NDWRH	5.5 years	12.4 years
Median age of all clinical post holders	42.0	49.5

Table 9 Average age differences by gender

CASE STUDY: "I am an academic primary care physician. I started my DPhil in 2017, having obtained a college scholarship and financial support from TGI's Global Women's Health Programme to commence my studies. During my first year, I was successfully awarded an **MRC Clinical Research Training Fellowship**. I received excellent guidance and support for the application process from my supervisors. The wider department was also hugely supportive: I was invited to present my project at a departmental seminar, and was asked many questions by the audience in preparation for my interview. I also received mock interview practice from some senior PIs within the department, which was nerve-wracking but also very useful, as they gave me clarity on areas of my proposal I needed to tighten up. I hope to be able to provide the same level of support and guidance for others during my future career as a clinical academic."

MRC Clinical Research Training Fellow and DPhil Student





Non-Clinical

		Female	Male	A	%F	%M	MSD %F	Pipeline Notes
	2014	0	0	0	0%	0%	75%	
	2015	0	1	1	0%	100%	72%	
Grade 6	2016	2	2	4	50%	50%	70%	
	2017	5	1	6	83%	17%	71%	
	2018	2	1	3	67%	33%	72%	
	2014	6	6	12	50%	50%	55%	
	2015	6	8	14	43%	57%	56%	
Grade 7	2016	6	5	11	55%	45%	56%	Doctorate required
	2017	6	3	9	67%	33%	55%	
	2018	8	2	10	80%	20%	55%	
	2014	2	2	4	50%	50%	54%	
	2015	2	1	3	67%	33%	51%	
Grade 8	2016	3	4	7	43%	57%	50%	
	2017	4	5	9	44%	56%	51%	
	2018	5	9	14	36%	64%	49%	
	2014	4	1	5	80%	20%	44%	
	2015	4	1	5	80%	20%	41%	
Grade 9+10	2016	4	3	7	57%	43%	45%	
	2017	5	1	6	83%	17%	46%	
	2018	6	1	7	86%	14%	50%	
	2014	0	1	1	0%	100%	28%	
Associate	2015	1	1	2	50%	50%	34%	Titular and non-titular
Professor	2016	0	1	1	0%	100%	41%	(5.1.iii)
	2017	0	1	1	0%	100%	38%	(012111)
	2018	0	1	1	0%	100%	37%	
	2014	0	1	1	0%	100%	32%	
Professor	2015	0	1	1	0%	100%	31%	Titular and non-titular
RSIV	2016	2	4	6	33%	67%	32%	(5.1.iii)
	2017	2	5	7	29%	71%	33%	()
	2018	2	4	6	33%	67%	35%	
	2014	12	11	23	52%	48%	54%	
	2015	13	13	26	50%	50%	55%	
TOTAL	2016	17	19	36	47%	53%	54%	
	2017	22	16	38	58%	42%	54%	
	2018	23	18	41	56%	44%	54%	

Table 10 Non-clinical staff in NDWRH (snapshots taken at 31/07 each year)

Overall, despite a 78% increase in non-clinical ACARES since 2014, the gender split has remained fairly balanced: our aim is to reflect this across all levels.

A We have few G6 roles, which are short-term project-based posts and usually a route into a doctorate rather than a G7 role (for which a doctorate is a prerequisite). The increase in 2016 and 2017 reflects support for G5 Technicians (*see below*).

B Small actual numbers and exploration of underlying causes suggests that this percentage shift from 2014 is natural variation which is likely to adjust in the future.

Table 11 demonstrates the changes between 2014 (50%F:50%M) and 2018 (80%F:20%M):

		Posts Added	Posts Reduced		
Female	10	6: Recruitment3: Direct appointments on grants1: TGI transfer	8	6: Leavers 2: Regrades	
Male	4	4: Recruitment	8	5: Leavers 3: Regrades	

Table 11 Change in G7 ACARES numbers between 31/07/2014 and 31/07/2018

There is no disparity in recruitment when reviewed at a granular level (*5.1.i, p.36*) but as we aim to be closer to the MSD benchmark (currently 55%F:45%M), we will continue to monitor recruitment and changes to the gender split here.

C This increase in G8 roles results from:

- a) Recruitment of Machine Learning Scientists (2F:2M in 2018 figures): 5.1.i, p.37
- b) Increased support for regrading, which accounts for **2F:3M** in 2018: 5.1.iii, p.39.
- The higher percentage of women reflects increased support we have provided for regrading over the last 2 years (*5.1.iii*, *p.40*) and will feed into future progression to address imbalance at levels above this. For example, the individual at **E** transferred to us at G10, and was quickly appointed as an AP. The following year she was awarded a Professorial title (*5.1.iii*, *p.41*). Overall, we note the small numbers of APs and will focus on providing additional support for staff to become eligible to apply (SAP18 2.11).
- **F** This increase resulted from TGI joining NDWRH in November 2015 with five existing professorial posts (**1F:4M**). There has been no recruitment at this level over the past 4 years, but the department will recruit three professorial positions one in Women's Health in 2019. A clear plan has been outlined to encourage female applicants (*5.1.i, p.37*). In MSD 35% of non-clinical professors are female: our aim is 50% over the next 4 years.

SILVER APPLICATIONS ONLY

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

This career path is not common in the University, but we are committed to encouraging anyone interested in developing research experience. We have encouraged technical staff to contribute to research papers and present work at conferences, enabling four Laboratory Technicians (3F:1M) to transition to G6 Research Assistants. Since 2015, a further two Research Technicians (2F) have left to undertake full-time PGR study, and we have supported one Research Midwife to undertake an MSc(Res) within NDWRH alongside her post.

(ii) Academic and research staff by grade on fixed-term, open-ended/permanent and zerohour 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.

		Fe	male %FTC	N	lale %FTC	то	TAL %FTC	2017 MSD %FTC	%FTC by Grade
Grade 6	Fixed Term Permanent	2 0	100%	1 0	100%	3 0	100%	96%	7%
Grade 7	Fixed Term Permanent	7 1	88%	2 0	100%	9 1	90%	95%	21%
Grade 8	Fixed Term Permanent	5 0	100%	8 1	89%	13 1	93%	85%	31%
Grade 9/10	Fixed Term Permanent	3 2	60%	0 1	0%	3 3	50%	64%	7%
Associate Professor	Fixed Term Permanent	0 0	-	0 1	0%	0 1	0%	0%	0%
Professor/RSIV	Fixed Term Permanent	1 1	50%	3 1	75%	4 2	67%	27%	9%
Clinical Research Fellow	Fixed Term Permanent	0 0	-	1 0	100%	2 0	100%	98%	4%
Clinical Lecturer	Fixed Term Permanent	2 0	100%	1 0	100%	3 0	100%	100%	7%
Clinical Researcher	Fixed Term Permanent	2 0	100%	0 0	-	2 0	100%	84%	4%
Senior Clinical Research Fellow	Fixed Term Permanent	1 2	33%	0 1	0%	1 3	25%	78%	4%
Associate Professor	Fixed Term Permanent	2 0	100%	0 3	0%	2 3	40%	25%	4%
Professor	Fixed Term Permanent	0 1	0%	0 2	0%	0 3	0%	15%	0%
TOTAL	Fixed Term Permanent	25 6	81%	16 10	62%	42 15	82%	87%	100%

Table 12 Contract type by position and gender on 31/07/2018. See 2017 MSD %FTC for divisional benchmarking. (**NB 'Permanent' includes open-ended contracts**)

The impact of FTCs has been a common theme in staff consultation. One researcher in the 2018 survey commented that "*short-term contracts affect every aspect of your life*".

G6-8 non-clinical researchers are usually appointed to externally-funded research projects, resulting in a high number of FTCs at this level (93%). This is proportionate with the MSD figure of 93% (2017). Two individuals (1F:1M) on permanent contracts have significant departmental responsibilities included in their roles.

The percentage of FTCs for non-clinical Prof/RSIV is disproportionate compared to MSD as all four FTCs are externally-funded by TGI (1M also has a fixed extension beyond the University EJRA). We are currently reviewing (in consultation with TGI) whether a move to open-ended/permanent contracts would be possible.



In July 2018, we undertook an **audit of contract types** for ACARES in response to: a) positive feedback about a new policy for open-ended contracts for Research Midwives (PSS) implemented in early 2018; b) continued dissatisfaction with ACARES FTCs surfacing in discussions at the 2018 Away Day, and c) a specific request by a G9 female to review her contract.

The audit outcome indicated some gender imbalance at G9/SCRF and above (excluding professors): although our proportion of FTCs at these levels (38%) is significantly lower than MSD overall (61%), we identified that 60% of females were on FTCs compared to 0% of males (compare to 31/07/2016 figures of 43% and 29% respectively).

This shift in percentages was partly attributable to the number of recently created fixed-term posts held by women through promotion or contract transfer between 2016 and 2018:

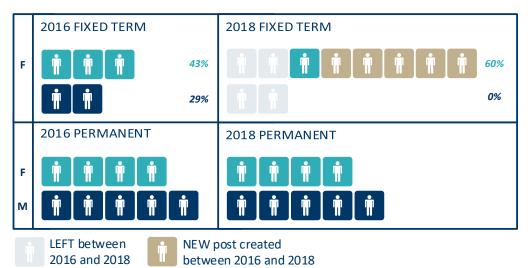


Figure 15 Staff changes at G9-10, SCRF and AP level (clinical and non-clinical) between 2016 and 2018

Although any issuance or renewal of an FTC must be objectively justified (and usually relates to external funding) this does not negate the impact on career progression or morale as demonstrated in the comment above. Women, therefore, were being unintentionally disadvantaged, and so we took immediate remedial action and moved all non-TGI staff on G9+, SCRF or AP contracts (5F) to permanent contracts. This is a change in approach, which carries considerable financial risk for the department, but the return on investment is increased productivity and retention, and the impact was immediate:

IMPACT: 'A permanent contract relieves a huge amount of anxiety. I do not have to worry about moving to a new location for a job, with the related financial losses in buying and selling a house, and the constant fear of being out of work. In terms of my research, a permanent contract enables me to plan longer term projects, and to take on students without the possibility that I would not be able to see them through to the end of their DPhil degrees.'

G9 Researcher



SAP18

- **2.2** Increase female confidence in negotiating contract terms by running a workshop focusing on 'asking for what you want', aimed particularly at women
- **2.3** Provide clear direction and policy for progression from fixed-term to open-ended or permanent contracts for G7 and G8 ACARES by the end of the 2018/19 academic year.

Support Provided

If it is not possible to offer continued employment, all University employees are allowed time off to attend interviews or training and have access to guidance from the Careers Service. NDWRH offers a meeting with the HR Manager to discuss options and tailored support, e.g. reviewing CVs and applications and interview practice. We arrange for University email addresses (and access to academic resources) to be extended for 6 months after the contract ends to facilitate completion of research papers.

The University redeployment process allows staff to discuss vacancies within their current department before wider advertisement, and, if suitable, can usually be offered the post without a formal application process. Since 2014, two G7 researchers have been successfully redeployed within NDWRH. This included applying for bridging funding (initially underwritten by NDWRH) for one to ensure that there was no break in service. One additional G7 researcher was offered the opportunity to provide interim cover for the Research Grants Manager to provide experience for exploring career paths outside of academia.

Zero-Hour Contracts

1M SCRF has a zero-hour contract by choice to provide flexibility to focus on other projects.

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

	-											
	Gra	Grade 6		Grade 7 Grade 8 G		Grade	Grade 9/10		RSIV/Prof		TOTAL	
	F	М	F	М	F	М	F	М	F	М	F	М
Number of staff in period	7	5	17	12	7	12	8	4	2	6	41	39
Leavers in period	5	4	9	7	1	4	1	1	0	2	16	18
% Left	71%	80%	53%	58%	14%	33%	13%	25%	0%	33%	40%	46%
Average years in NDWRH for staff in post 31/07/2018	1.2	2.5	3.0	2.3	5.9	3.9	9.8	10.7	3.5*	2.9*	5.2	4.1

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

Table 13 Non-clinical leavers between 2013 and 2018 (to 31/07/2018)

*83% transferred with TGI on 01/11/15

	CRF		CL		CR		SCRF/AP		Prof		TOTAL	
	F	м	F	м	F	м	F	м	F	м	F	м
Number of staff in period	11	13	3	1	3	0	7	5	1	3	25	22
Leavers in period	10	12	0	0	0	0	2	1	0	1	12	14
% Left	91%	92%	0%	0%	0%	0%	29%	20%	0%	33%	48%	64%
Average years in NDWRH for staff in post 31/07/2018	-	1.4	1.3	6.2	2.6	-	8.7	12.9	20.6	13.7	7.7	10.0

Table 14 Clinical leavers between 2013 and 2018 (to 31/07/2018)

Overall, NDWRH had **low turnover** for the period above (F20%:M23%, compared to MSD benchmark of ~40%). We have recorded reasons for leaving for 97% leavers through completion of a Leaver Form: in our SAP18 we will develop this by **introducing exit interviews** to gather richer qualitative information.

End of FTC (13F:14M)

High turnover at G6 reflects the proportion of FTCs (4.2.*ii*, p.30) and limited pre-doctorate progression opportunities (4.2.*i*, p.25); our focus on support for regrading (5.1.*iii*, p.39) has mitigated this slightly at G7. All G6 and just under half of G7 leavers were at or within 3 months of their contract end date. We supported two to transfer to PGR study in NDWRH at the end of their contract. There are no significant gender differences at these levels.

For clinical staff, 68% CRFs left on or within 3 months of their contract expiry, which is normal as these are fixed-term training posts. All SCRFs left on contract expiry; this will no longer apply (4.2.ii, p.31). There are no gender differences here, but the impact of FTCs is evident through comments on Peakon: even for high scorers on the question 'If you were offered the same job at another organisation, how likely is it you would stay at NDWRH?' opportunities for tenure are strong pull factors (more so than salaries), hence the inclusion of FTC considerations in our SAP18:

	 SAP18 2.3 Provide clear direction and policy for progression from fixed-term to open-ended or permanent contracts for G7 and G8 ACARES by the end of the 2018/19 academic year.
Resignation (13F:15M)	NDWRH has low turnover for G8+, indicating that staff are generally getting the career they need within NDWRH. However, those that left between G8-10 all resigned, and there is a gender difference here: 13%F compared to 31%M (2F:5M). The fact that 80% of these male leavers left for a new role within 18 months of appointment to G8 (through recruitment or regrading), taken with higher numbers of female G8-9 regrades (<i>5.1.iii</i> , <i>p.40</i>), suggests that men are more likely to look for opportunities elsewhere rather than wait for development opportunities within NDWRH. This will be addressed by establishing clearer career frameworks:
	SAP182.4 Provide clear guidance on ACARES career pathways within the department by April 2019.
Retirement (0F:3M)	All professorial leavers retired. The gender difference here reflects the older average age for male ACARES in NDWRH.

SAP18

1.3 Improve leaver data collection, including introducing exit interviews from 2020/21, to gain feedback from employees in order to improve aspects of the organisation, better retain employees, and reduce turnover.

Word Count: 3050



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.

Selection panels always have at least one member of each gender and selection is against advertised criteria. One panel member must have completed the University's 'Recruitment and Selection' online training, which covers topics including **unconscious bias**. Our previous HAF helped develop an 'Implicit Bias' course, which has been rolled out across the University. A member of the HR team sits on panels to provide advice and ensure process consistency. To promote inclusivity, we include as standard the following in advertisements: 'Applications for flexible working arrangements are welcomed and will be considered in line with business needs.'

In 2017, we introduced two new selection tools: **McQuaig** (an online psychometric assessment) and **Value-Based Interviews** (commonly used in OUHFT, these explore values, attitudes and behaviours and are completely separate from technical interviews). These tools reduce the potential for bias (including gender) by providing a broader range of information that can be tested against the advertised person specification to avoid: a) the panel making stereotypical judgements, and b) differences in how candidates are perceived on the basis of gender, such as the tendency for men to overstate success and a negative correlation of success and likeability for females⁴. McQuaig supports unsuccessful candidates by providing a feedback development report. We are the only MSD department to use these tools, and although it is too early to show clear impact, we will evaluate this in our SAP18.

ACARES recruitment undertaken since 2014 is reviewed below. We have not recruited any senior positions.

	2009 ·	- 2012	2012 – 2015			
	F	М	F	М		
ا معالم ما	8	13	26	28		
Applied	38%	62%	48%	52%		
	1	9	8	9		
Shortlisted	10%	90%	47%	53%		
	1	7	7	7		
Appointed	13%	87%	50%	50%		
Short:App	13%	69%	31%	32%		
Appoint:App	13%	54%	27%	25%		

Clinical Research Fellows

Table 15 CRF Recruitment 2009-15

CRFs, employed on clinical research training fellowships in partnership with the OUHFT, are no longer being recruited (*4.2.i, p.26*). However, clear gender disparity was noted whilst reviewing data for our previous Bronze and Silver applications (2012 and 2015, respectively), therefore as part of the BAP we reviewed the wording of the job description and advertisements and named a senior female clinician as the point of contact for enquiries. The second set of figures demonstrates the positive impact of these steps at all recruitment stages.

⁴ These two examples cited in Iris Bohnet, *What Works: Gender Equality by Design* (Cambridge, Massachusetts: The Belknap Press of Harvard, 2016).



Postdoctoral Researcher (G7)

	20	14	20	16	2017			2018			TOTAL		
	F	Μ	F	М	F	Μ	U	F	М	U	F	М	U
	21	36	17	25	8	6	1	12	10	2	58	77	3
Applied	37%	63%	40%	60%	53%	40%	7%	50%	42%	8%	42%	56%	2%
Shortlisted	6	10	4	6	3	0		6	2		19	18	
	38%	62%	40%	60%	100%	0%	-	75%	25%	-	51%	49%	-
Appointed	1	1	2	2	1	0		1	1		5	4	
	50%	50%	50%	50%	100%	0%	-	50%	50%	-	55%	45%	-
Short:App	29%	28%	24%	24%	38%	0%	-	50%	20%	-	33%	23%	-
Appt:Short	17%	10%	50%	33%	100%	0%	-	17%	50%	-	26%	22%	-

11 recruitments since 2014 resulted in 9 appointments (5F:4M):

Table 16 G7 Postdoctoral Researcher recruitment (NB no recruitments in 2015)

Aggregated figures indicate similar application rates (a higher percentage of male applications is expected as men are more likely to take a chance⁵). We note an increase in the percentage of female applicants from 2017 when we started including the flexible working statement, which may correlate (although we note that it is difficult to isolate sole cause). We reviewed whether there was any correlation between the recruiting PI's gender and the gender split of applicants; there appeared to be no relationship.

Research Assistants/Epidemiologists (G6)

	2016			2017			2018			TOTAL		
	F	Μ	U	F	Μ	U	F	Μ	U	F	Μ	U
Applied	16	10	0	17	4	1	12	9	1	45	23	2
	62%	38%	0%	77%	18%	5%	55%	41%	4%	64%	33%	3%
Shortlisted	3	3		9	1		6	1	-	18	5	
	50%	50%	-	90%	10%	-	86%	14%		78%	22%	-
Appointed	1	1		2	0		2	0	-	5	1	
	50%	50%	-	100%	0%	-	100%	0%		83%	17%	-
Short:App	19%	30%	-	53%	25%	-	50%	11%		40%	22%	-
Appt:Short	33%	33%	-	22%	0%	-	33%	0%		28%	20%	-

Four recruitments resulted in six appointments (5F:1M):

Table 17 G6 Research Assistant/Epidemiologist recruitment (NB data prior to 2016 not available)

Drilling down further suggests that women are more likely to apply for a G6 appointment when they are overqualified (hence the gender imbalance): in one 2017 Research Assistant recruitment 54% of female applicants had a PhD, compared to 0% of men.

Where PhD holders have been appointed, we have placed them on a point equivalent to G7, which mitigates the resultant gender inequity. However, this indicates that we need actively to consider a potential pipeline from G6-7, which does not currently exist (5.1.iii, p.39, SAP18 5.1.v).

⁵ Iris Bohnet, *What Works: Gender Equality by Design* (Cambridge, Massachusetts: The Belknap Press of Harvard, 2016).



Machine Learning Scientists (G8)

Four rounds resulted in six appointments (**2F:4M**). A prerequisite for this post was a doctorate in computer science (or similar), so a higher number of male applicants is expected (73% of UK PGR computer science students in 2016/17 were male⁶, which is consistent with 74%M applications). Aggregated figures indicate similar success rates between both genders for shortlisting and appointment.



	FEB	2017	J	UL 201	7	JAN	2018	JUN	2018		TOTAL	
	F	М	F	Μ	U	F	М	F	М	F	М	U
Applied	5	11	3	16	2	2	11	4	7	14	45	2
Applied	31%	69%	14%	76%	10%	15%	85%	36%	64%	23%	74%	3%
Shortlisted	1	3	2	6	0	1	6	3	3	7	18	
Shortiisteu	25%	75%	25%	75%	0%	14%	86%	50%	50%	28%	72%	-
Appointed	1	0	1	2	0	0	1	0	1	2	4	
Appointed	100%	0%	33%	67%	0%	0%	100%	0%	100%	33%	67%	-
Short:App	20%	27%	40%	38%	0%	50%	55%	75%	43%	50%	40%	-
Appt:Short	100%	0%	50%	33%	0%	0%	100%	0%	100%	29%	22%	-

Table 18 Machine Learning Scientist recruitments (F=Female, M=Male, U=Unknown). No recruitment prior to 2017.

Going Forward: 2019 Professorial Recruitments

We have had no senior recruitments since 2013, but we are recruiting three TGI professorial level posts in 2019. Our plans to ensure gender equality in recruitment include:

- Engaging head hunters to ensure that the search is broad and proactive (i.e. not reliant on women stepping forward);
- Ensuring visibility of the female interim Executive Director; and
- Aiming for a gender-balanced shortlist (our current longlist for the three posts is 48%F).

SAP18

5.1 To continue to refine and embed good staff recruitment practices to ensure that opportunities for bias are eliminated as far as possible.

⁶ Figures provided by the Higher Education Statistics Agency



(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.

All new employees have a set induction programme covering essential information such as Health & Safety and Information Governance, and role-specific inductions, e.g. Introduction to the Laboratory. Each staff member has an individual induction with the HR Manager as an introduction to HR policies and the opportunity to discuss individual needs. For ACARES, this often includes assistance for international staff who need, for example, to set up bank accounts and apply for National Insurance numbers.

We also send out targeted emails for the University-run 'Welcome Event for Research Staff', which has resulted in high uptake: 20 new ACARES (10F:10M) have attended since 2014, equating to 42% of starters (31% transferred from another research post within the University).

Effectiveness of induction has been monitored via the survey (indicating a high satisfaction rate: 87% found the departmental induction useful in 2013, rising to 100% by 2016) but response rates limit the usefulness of these data. Going forward, collecting information through Peakon will enable us to monitor induction more effectively as questions will be put to new starters closer to their induction and are designed to encourage addition of qualitative information; we have already made two additions to information provided as a result of feedback via Peakon.

Further plans include a half-day termly induction and networking session with the HoD as part of developing our collaborative culture; this is an important part of effective induction by creating informal informational and support networks⁷.

"The working culture of the Department is excellent. I want to say that when I joined I found a lot of people that took care of me and asked me if I was happy and settled in well."

2015 Survey Comment

SAP18

3.3 To introduce a mandatory half-day, termly induction for all new starters (including students) within the department by the end of Michaelmas 2019.

⁷ Rebekah Wilson, 'The experience of early career academics: the influence of governments, universities, and colleagues on academics' work - and what we can do', lecture delivered at the University of Oxford (19 April 2018).



(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.

There is no formal promotions process at Oxford: progression is primarily through applying for a higher grade post in open competition or, for staff whose role has grown such that they are required to work 'above' their grade, an application for regrading is submitted.

Regrading

Anyone who intends to submit a regrading application meets with the HAF/HR Manager/HoD (as appropriate) who ensure that it meets the requisite criteria and provide constructive comments on a draft application. There have been no unsuccessful applications. Had this been the case the individual would have been provided with feedback from the University Reward Team and the opportunity to re-apply the following year.

In 2015, we made a concerted effort to **raise awareness and understanding** of regrading as the 2015 survey indicated that only 34% staff (30%F:43%M) were clear about the process. This included a spotlight in the newsletter, redesigned Intranet pages and an additional question about regrading in the PDR. Overall (including PSS), the number of regrading requests submitted in 2016 more than doubled. Positive responses to the same question in 2018 rose to 60%.

Grade	Gender	2014	2015	2016	2017	2018*	Total by gender	% SiP	Total
6 to 7	Female	-	-	-	-	-	0	0%	0
6 to 7	Male	-	-	-	-	-	0	0%	0
7 4 9 9	Female	-	-	-	2	-	2	17%	4
7 to 8	Male	-	-	2	-	-	2	25%	
	Female	1	-	-	1	1	3	43%	3
8 to 9	Male	1	-	-	-	-	1	10%	
0 to 10	Female	-	-	-	-	-	0	0%	0
9 to 10	Male	-	-	-	-	-	0	0%	0
10 to RSIV	Female	-	-	-	-	1	1	50%	2
10 to RSIV	Male	-	-	-	-	1	1	100%	Z
Total	Female	1	0	0	3	2	6	16%	10
Total	Male	1	0	2	0	1	4	14%	10
	Total	2	0	2	3	3	10	15%	

Table 19 Regrading applications by year submitted until 31/07/18 (ACARES). All applications submitted were successful.

20% of applications (1F:1M) were part-time, which is proportionate to 20% part-time ACARES at G10 and below.

- **G6-7** None due to: **a)** few G6 posts and **b)** doctoral requirement for G7 (4.2.*i*, *p*.25). Support was provided for one G6 male to transition to PGR study within NDWRH.
- **G7-8** The HR Manager noted that both 2016 G7 regrades were male with less than 3 years' service, and that a number of G7 females had been in post for greater than 5 years without promotion. Therefore, she met with PIs who had potentially eligible staff to remind them of the process, resulting in two regrades for G7 females in 2017.

IMPACT: "Being regraded has had a huge impact on me: I feel my contribution is being recognised, that people care and it makes me feel more confident, particularly when I'm supporting students."

G8 Researcher (Female)

G8-9 A gender difference here: G8 is only 43%F, but there have been two female regrades since 2017 and no male ones. This is partly attributable to the number of recently created G8 posts (on 31/07/2018, 71% were less than 2 years) but taken with leaver data (*4.2.iii*, *p.34*) the data suggest that men are more likely to leave rather than wait for promotion: actions to address this have been included in the SAP18. 1M has been actively encouraged to submit an application.

G9-10 None here due to the relatively small number of posts.

G10-RSIV One G10 male submitted a regrade request in September 2017. We were aware of a G10 female at a similar level who had not submitted a request, so undertook an **internal pay audit**, which highlighted this inequity. We took immediate remedial action and she was successfully regraded to an RSIV salary in 2018:

IMPACT: "This not only made an enormous difference to me and my family, but also means I now feel rewarded appropriately for the work I do. It has also led to me discussing salary issues with my female peers in other departments within the University, highlighting substantial pay gaps compared to male peers, which they in turn are now trying to address."

Although potential instances of gender inequity outlined above were quickly rectified, it indicates that the current process - putting the responsibility on the individual to request a pay review - is disadvantaging women, which is consistent with research that suggests women are less likely to negotiate on pay⁸. A commitment to undertake an **annual pay review** has, therefore, been included in our SAP18 to enable us to approach staff proactively. In addition, as part of the relaunched PDR scheme (*5.3.ii*, *p.47*), clear indicators of expectations at each grade will be developed and publicised to ensure all staff feel more able to discuss regrading.

- **2.1** Increase information and transparency around pay and embed a regular annual pay review to ensure gender parity.
- **2.2** Increase female confidence in negotiating pay and contract terms by running a workshop focusing on 'asking for what you want', aimed particularly at women.

⁸ Iris Bohnet, *What Works: Gender Equality by Design* (Cambridge, Massachusetts: The Belknap Press of Harvard, 2016).



Academic Titles (clinical and non-clinical staff)

Annual exercises invite researchers to apply for a Professorial (G10/SCRF+), Associate Professor (G9+/CR+ and NHS Consultants) or University Research Lecturer (G8+/CR+) title. These do not change work duties but recognise substantial contributions to research, teaching and good citizenship. The application now invites disclosure of personal circumstances, where relevant.

		2014	2015	2016	2017	2018	Total Applied	Total Awarded	Success Rate
Duef	Female	-	1 (1)	-	-	-	1 100%	1 100%	100%
Prof	Male	-	-	-	-	-	0 0%	0 0%	-
URL	Female	-	1 (1)	-	1 (2)	-	3 75%	2 100%	66.7%
UKL	Male	-	-	-	-	0 (1)	1 25%	0 0%	0%
AP	Female	-	0 (1)	1 (1)*	-	1 (1)	3 33%	2 33%	66.7%
AP	Male	3 (3)	1 (2)	0 (1)	-	-	6 67%	4 67%	66.7%

Table 20 Successful URL and AP applications for University staff (number of applicants in brackets). Note that the scheme was paused for review between 2010-14.

***NHS Consultant**: included as the following year we appointed her to a part-time University contract to support her research.

The HoD has supported all applicants who wished to apply but, as with regrading, a core component of the SAP18 will be increasing transparency and proactivity; the need for this was made clear when one **successfully awarded** female AP commented that *'I don't think I would have put myself forward, having recently seen senior researchers have unsuccessful applications, however, Krina Zondervan* [Deputy HoD], who has been an incredibly supportive mentor over recent years, encouraged me to talk to the HoD and offered to read my application.'

SAP18

2.11 Increase the number of women with URL, AP and Professor titles within the department from 7 to 11 by the end of 2022.



(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.

2008 RAE

5F:12M submitted. We do not have access to eligibility data, which are held centrally.

2014 REF

	Female	Male	Total	%Female
Not Submitted	3	6	9	33%
Submitted	3	4	7	43%
Total Eligible	6	10	16	38%
% Eligible Submitted	50%	40%	44%	

Table 21 Submissions to the 2014 REF

The HoD is currently meeting all eligible staff in preparation for the 2021 REF.



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.

Induction

The core departmental induction (5.1.ii. p.38) is relevant for all staff, with role-specific inductions provided by managers:

MINI CASE-STUDY: RESEARCH MIDWIVES

A specific induction programme has been developed for our Research Midwives, involving the whole team. Underpinned by an induction pack containing useful lists of staff, studies and training courses, new starters spend time shadowing everyone in the team (plus other groups in MSD) to ensure good grounding in all studies and strong working relationships. Time is provided to complete mandatory and optional training courses, with regular meetings with managers to identify training that will be most helpful depending on the individual's previous experience. This is particularly important for those transitioning from a clinical setting, who are often still adjusting to the culture change. Senior managers also check in to ensure staff are feeling nurtured in their new roles.

Developing this induction programme is a continuous process as it is regularly adjusted in response to feedback provided by new starters in meetings.



Figure 16 The team of Research Midwives, Nurses and Technicians

Regrading

As with ACARES, there is no formal promotions route: staff can apply for a higher grade or be regraded. We provide the same level of support.

Grade	Gender	2014	2015	2016	2017	2018	Total by gender	% SiP	TOTAL
4 to 5	Female	-	-	2	1	1	4	57%	5
4 10 5	Male	-	-	-	-	1	1	50%	J
E to C	Female	-	1*	-	2	1	4	29%	5
5 to 6	Male	-	1*	-	-	-	1	100%	5
6 to 7	Female	-	1	3	-	1	5	33%	7
0107	Male	-	-	2	-	-	2	50%	/
7 to 8	Female	-	-	-	-	1	1	3%	2
100	Male	-	-	1	-	-	1	13%	Z
8 to 9	Female	-	1	-	-	-	1	25%	1
0109	Male	-	-	-	-	-	0	0%	T
Total	Female	0	3	5	3	4	15	22%	20
TOLAI	Male	0	1	3	0	1	5	36%	20
	Total	0	4	8	3	5	20	27%	

Table 22 Successful regrading applications by year submitted to 31/07/18 (PSS). All applications submitted were successful. Two applications (*) were regraded from support to research roles.

The higher number of female regrades reflects the PSS demographic (69F:14M in the period). The higher proportion of regraded men is exaggerated by small numbers, and the large group of G7 Research Midwives who are typically unable to progress to G8 due to the G7 requirements of the job.

Research Midwives are, however, often regraded at an earlier career point as they are typically recruited from a clinical setting at G6 and regraded to G7 once research experience has been accumulated, supported by the comprehensive induction and training programme outlined above. This accounts for 60% of G6-7 female regrades.

	SiP 2014-18	No. Regraded	% Regraded
Full-Time	48	12	25%
Part-Time	45	8	18%

Table 23 Regrading by full time and part time status

The percentage of regraded part-timers is expected to be slightly lower: many part-timers are Research Midwives who change hours more frequently (hence some regraded whilst full-time and later reduced hours).



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?

Training courses are primarily provided by the MSD and University, and advertised through the Intranet, newsletter and at PDRs. Reduced uptake (e.g. OLI Management) reflects low turnover since the courses were developed (particularly for PIs), but we are pleased to see that E&D remains high as we have reminded and encouraged staff to undertake the refresher courses (fig.18).

Additional internal management training is being developed as outlined in 5.4.i, p.53.

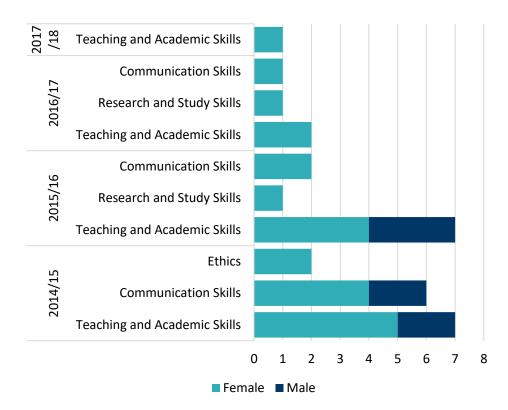


Figure 17 ACARES uptake of MSD Training Courses



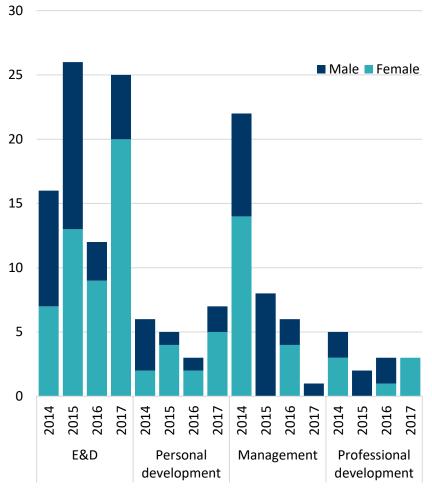


Figure 18 ACARES uptake of OLI Training

Laboratory Training

Mandatory training (e.g. Biological Safety, HTA) is largely provided by the University's Safety Office with 100% uptake for relevant staff, but consultation with students and ACARES emphasises the level of informal training that occurs in laboratory techniques, usually by G7-8 ACARES. This is a key area of development included in the SAP18 (particularly as 70% of lab-based G7-8 ACARES are female):

SAP18

2.10 To continue to embed and support teaching activities at G7 and G8, including formally recognising the level of informal teaching in the department, and providing opportunity and funding to gain a formal teaching qualification.



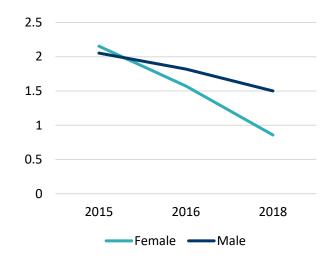
(ii) Appraisal/development review

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.

Personal Development Reviews (PDRs) were introduced to NDWRH for non-clinical staff in 2014 as part of the BAP (mandatory annual appraisal via OUHFT was already in place for clinical staff). Face-to-face training for staff and managers was delivered at this time by OLI (who also provide an online training course). Satisfaction was high after this first round (see fig.19). As this had dropped by 2016, the HR Manager produced a user-friendly PDR handbook and ran informal training and drop-sessions to remind managers of good practice.

	2014		20	2015		2016		2017	
	F	М	F	М	F	М	F	М	
Grade 6	-	-	100%	100%	100%	100%	100%	100%	
Grade 7	100%	100%	100%	100%	83%	60%	67%	67%	
Grade 8	100%	100%	0%	0%	33%	50%	40%	50%	
Grade 9+10	75%	100%	67%	50%	50%	0%	0%	0%	

Table 24 PDR uptake by gender by % eligible staff (those who had completed their probationary period). **NB** TGI not included in 2015 as many were completed in previous department that year.



In 2017, we considered moving to an online scheme in line with some other MSD departments, but the reduction in uptake in conjunction with declining satisfaction scores (fig.19) clearly indicated that a comprehensive review was required. In 2018 the HR Manager undertook this as a project for her Level 7 CIPD Diploma. One area of focus was mid-career researchers, with whom she conducted in-depth interviews:

Figure 19 Satisfaction rates (out of 3) with the PDR scheme (data taken from survey responses)



"Chatting with researchers was invaluable to understand broader issues that affected perceptions of PDR. Many commented that short-term contracts meant that it just wasn't worthwhile. Others felt that the lack of clear progression routes was unhelpful. Everyone wanted to retain a PDR scheme, but the outcome of the project suggests that we need to move away from an annual cycle to support discussions at a suitable time for the individual and develop bespoke schemes for different staff groups. Everyone agreed that moving it online and underpinning the scheme with clear signposts for career progression and access to resources would be really helpful."



Consultation with clinical academics also indicates a need to provide academic PDRs in conjunction with clinical appraisals to provide more focused academic support, which they are not currently receiving.

- **2.5** Develop and implement a new PDR scheme by the end of 2018/19, tailoring it to meet the needs of each group within the department, including clinical academics
- **2.6** As part of the PDR process, to provide every member of staff with the opportunity for a personalised learning and development plan (LDP) by the end of 2019/20.

Training			
In addition to this handhook, there are many extra resources to help both managers and staff in conducting meminiquit reviews. The Odrof Learning Institute (OI I) provides some courses and resources, which are listed here. We will also periodically provide training sections in the department. If you are involved in research, you may also find the following guides helpful: PDR: A Guide for Research Staff PDR: A Guide for PIS	Personal Development Review: Online Course This self-study course aims to provide an overview of the happens at each stage. It sho looks at some of the key ski effective PDR. Although this course is primarily aimed at in helpful for reviewees to understand the process. This is a short online course which you can take in your ow approximately 45 to 60 minutes to complete, but it does stiting—you can dip in and out as many times as you lea. Giving and Receiving Feedback	Is that are required for an evelowers, it can also be n time. It takes not have to be done in one not have to be done in one corto course	
	This is a face-to-face course designed to enable individual necessary skills to give and receive feedback in a clear, poor manner. You can sing up for this course through the OLLM	sitive and constructive	
	to will see the form? kept confidentially at the back of yr team will see is Section D (see below tat is Section D used. Completing Section D enables the l	w). HR team to collate development needs inf s which we can address within the depart hat you have attended is	copy, if necessary. The only section the HR ormation across the department to
			-
5 ,			
See how this works in practice, to make objectives easier t Annélia's job requires her to complete a monthly repor- hab been doing this, each report hab been that of types this to her kern month and the promised to take more dejectives on improving her report writing. In her PDR, Annelia suggested the objective: Improve my	o achieve. It for a collaborating body. Over the six months she I. You now routinely calt her report. You mentioned care. You also suggested she have one of her PDR	S PECIFIC M EASURABLE A CHIEVABLE	
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Figure 20 Excerpts from the PDR Handbook



(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.

Individual support has largely been *ad hoc*, which is feasible with small numbers, but as with promotion, consultation with staff indicates a need to provide an accessible and transparent framework to: **a**) ensure equity, particularly as women are less likely to self-promote, and **b**) develop planned and timely support for G6-8 to mitigate short FTCs. This will be the next step for our SAP18, building on a number of broader measures introduced since our BAP:

Research

We have provided financial support for research for new (1F:1M) and 'struggling' (1F) PIs.

Teaching and Supervision

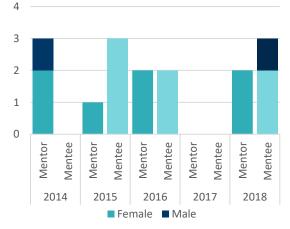
We are committed to formal recognition of **PGR student supervision** by registering postdoctoral researchers as co-supervisors. This supported four G7 researchers (2F:2M) in successful regrades. Our SAP18 includes establishing a working group to extend this commitment by recognising informal teaching in the laboratory, including providing the opportunity to undertake a formal teaching qualification.

Personal Development

In addition to supporting recruitment, McQuaig (*5.1.i, p.35*) provides self-development reports which are available to all staff. This has been taken up by 9F:2M ACARES.

Mentoring

Our 2013 Bronze application identified a need to provide mentoring, particularly for non-clinical ACARES (clinical academics had access to mentors through the Academy of Medical Sciences); we therefore volunteered to be one of six departments contributing to a pilot cross-divisional mentoring scheme for researchers. After a positive review in mid-2014, this was rolled out across MSD and all researchers in NDWRH were offered a place. Plans to extend this are included in the SAP18.





- **2.10** To continue to embed and support teaching activities at G7 and G8, including formally recognising the level of informal teaching in the department, and providing opportunity and funding to gain a formal teaching qualification.
- **2.13** To formalise and develop our support packages for new and struggling researchers, by the end of 2019/20.
- **2.18** Proactively encourage the existing mentor scheme and provide a series of lunchtime meet and greet sessions whereby potential mentees can meet mentors by the end of 2019/20
- **2.19** Develop a sponsorship scheme for mid-career women, with a 1-year pilot taking place from October 2021.



(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).

Students meet with the DGS, MSc Course Director and a mid-career researcher on an annual basis to review progress. As part of this we have added a section on the review form to facilitate discussion about specific career support (and plan to extend this to mirror staff PDRs).

Students have access to a wide range of support from MSD and the University, which NDWRH has supplemented by facilitating in-house career seminars run by the University Careers Service. We encourage students to gain experience in academic and management skills by presenting their work in seminars (including a mandatory 20-minute introduction in the first year to help their integration into the department, and a seminar in third year), establishing a Student Committee, and inviting participation on departmental committees, e.g. SAT. We provide budget (£200) and assistance for an annual student-led 'Graduate Studies Symposium' as an opportunity for students to share their work and build networks in a student-only environment. We have given students the freedom to decide how to structure this. Overall satisfaction is high (Table 25), but there are further areas that we can develop in our SAP18.

Consultation with student representatives on the ASDWG suggested a change of strategy to provide access to recently graduated students through building an **alumni database** so as to increase important information around the transition period between studying and starting employment⁹, and to open up resources around a range of potential career options. The broad range discussed in student meetings (above) is difficult to cover in a single event.

- **3.8** Build and implement an alumni database to expand collaboration and networking opportunities beyond current members of the department
- 6.1 Increase teaching opportunities for postgraduate students
- 6.7 Instigate a student PDR Programme from October 2019

How satisfied are you with	NDWRH	MSD
All aspects (overall)	100%	94.3%
Seminar programme for PGR	100%	89.4%
Development of communication skills as a result of my course	95.8%	89.0%
Learning experience (overall)	92.3%	88.9%
Careers Service	90.0%	93.2%
Getting time from academic staff when I need it/personal support with learning	83.3%	89.5%
Gaining confidence about managing a research project	82.4%	86.2%
Learning that will help me get a good job	70.0%	79.4%
Guidance on long-term job opportunities and careers from academic staff	57.9%	69.2%
Opportunities to teach	56.3%	64.1%
Opportunities for work experience/ work placements as a part of my studies	52.6%	67.6%
Table 25 2017 Results from Student Barometer (26 respondents, including PGR and PGT)		

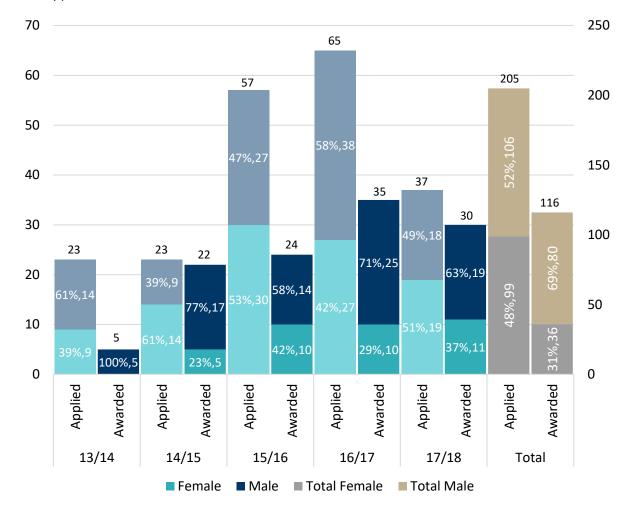
⁹ Rebekah Wilson, 'The experience of early career academics: the influence of governments, universities, and colleagues on academics' work - and what we can do', lecture delivered at the University of Oxford (19 April 2018).

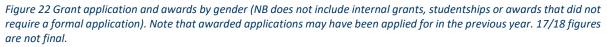


(v) Support offered to those applying for research grant applications

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

Expanded grants support through appointing a **Director of Research Governance** (2014) and **Research Grants Manager** (2016) has improved our grant application and award rates. In addition to providing capacity to handle a higher volume, these posts have been proactive in identifying and disseminating funding opportunities and providing clear guidance on funder requirements, which has been invaluable to PIs (see Case Study 2, p.72). The HAF or HoD discuss unsuccessful applications with applicants on an *ad hoc* basis.





Application rates are fairly gender balanced, but females have a lower success rate: in total, 36% for females, 75% for males. This indicates a need for further support, particularly for mid-level ACARES for whom successful grant and fellowship applications are a first step to an independent academic career. This gender difference arises because of the higher number of males in senior positions, with more grant application experience. Clear actions have been identified for the SAP18.



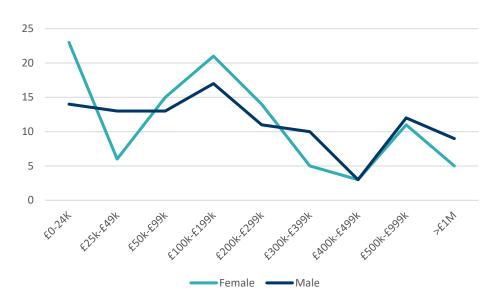


Figure 23 Grant applications by amount (2013-2018)

There are no strong gender differences in the value of applications, which indicates that women are sufficiently confident to apply for larger grants.

- **2.8** Expand and develop the grants team to better support PIs by the end of Hilary 2019.
- **2.8.i** Recruit a Grants Administrator to support the administrative work of the Research Grants Manager and to provide capacity as the department grows.
- **2.8.***ii* Take a new approach by proactively engaging with PIs, rolling out a broader grants support package, e.g. implementing 'mock panels', peer reviews, whiteboard sessions etc.

- 5.4. Career development: professional and support staff
- (i) Training
- (ii) Appraisal/development review
- (iii) Support given to professional and support staff for career progression

(i) Training

Staff have access to a range of University – training courses through the OLI, IT Services and the Language Centre which are flagged at induction, on the Intranet and follow-up emails from the HR Manager after PDRs.

	F	Μ	Total
Assertiveness	8	1	9
Emotions at Work	2	0	2
Feedback Conversations	7	0	7
Presentation Skills	6	0	6
Project Management	4	0	4
Time Management	2	1	3

Table 26 Examples of training attended by PSS since 2013

Our focus has been on delivering bespoke management training in response to training needs data collected via PDRs. In 2016, we piloted an internally-run one-day 'Management Essentials' workshop (for PSS and ACARES) outlining key management skills through trainer presentations and group discussions. All 12 attendees (8F:4M) provided positive feedback. However, management training remained a high priority in the 2016 and 2017 PDRs, so a more comprehensive 'Management Development Programme' (MDP) was developed and delivered by the HR Manager as part of her CIPD qualification and piloted with the Research Midwives. The course focused on management theory and techniques in addition to practical skills, with a strong emphasis on group discussions, self-reflection and social learning. Feedback was positive:

"It really was a very helpful practical course and I feel that my confidence...will definitely be enhanced as a result."

"I liked that it was a safe, open learning environment where we felt at liberty to discuss anything from poor to exceptional management styles."

Impact is evidenced by survey data. From 2016, we asked managers to indicate confidence in handling management activities such as PDR, performance management, supporting career development and implementing HR policies. Aggregated results show: **a**) **an overall increase in confidence** in response to the management training offered and **b**) **continued gender differences** in confidence, indicating that this remains an important area of focus. The MDP is currently being reconfigured to roll out department-wide in a flexible, modular way to ensure equal access for all staff (including ACARES). It will retain a strong focus on small group work, creating an environment to ensure women in particular are not deterred from participating.

	20	16	2018		
	F	Μ	F	Μ	
Confident	59%	75%	74%	93%	
Not Confident	41%	25%	26%	7%	

Table 27 Survey data showing confidence in handling management activities

SAP18

2.13 To continue to develop the in-house Management Development Programme (MDP) to target other mid-career level groups, by the end of August 2020.

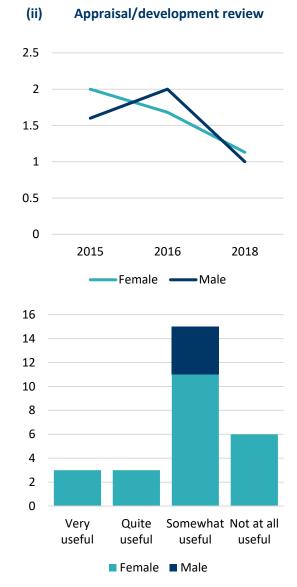


Figure 24 a) Satisfaction trend (score out of 3) over time, based on survey data, and b) 2018 survey responses on PDR usefulness

SAP18

- **2.5** To develop and implement a new PDR scheme by the end of 2018/19, tailoring it to meet the needs of each group within the department.
- **2.6** As part of the PDR process, to provide every member of staff with the opportunity for a personalised learning and development plan (LDP) by the end of 2019/20.
- **2.8** To provide mandatory training for line managers and supervisors in managing PDRs by the end of Sept. 2019.

PDR was launched for PSS at the same time as ACARES, and the same scheme was used; the two groups' response to the current scheme was similar, with declining satisfaction rates (although it has been useful to identify training needs, as described above).

Developing a tailored scheme for PSS is therefore included in the provisions outlined in *5.3.ii, p.47*. A draft form specifically for the Research Midwives (with whom the HR Manager also consulted as part of her project) is currently in development, underpinned by a competency framework developed by the NIHR.

A particular element for PSS (although also applicable for ACARES) will be the capacity to tailor at an individual level in terms of focusing the discussion around moving up, staying put or moving out (e.g. retirement) as there is often greater variety in needs in the same job role, e.g. the age range of Research Midwives is 34 years, compared to G7 ACARES which is only 21.

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

NDWRH provides tailored support based on individual needs (usually established during PDRs) encompassing financial and/or time assistance.

MINI CASE-STUDY: THE HR TEAM



"I joined NDWRH in 2016 as a Business & Administration Apprentice. After completing this scheme in April 2018, I was appointed as a Grade 4 HR Assistant and have just begun my Level 3 CIPD qualification via the University's Work-Learn-Develop Scheme (funded by Apprenticeship Levy) with dedicated 20% training."

Danielle, HR & Communications Assistant



"Having completed Levels 3 & 5 CIPD in my previous department, I was keen to continue progressing. My manager agreed to part-fund the Level 7 CIPD, but more importantly, supported my application to work compressed hours and provided allocated study days in work time. I hope to complete in January and, with additional support from my manager, gain chartered CIPD status within the next 6 months."

Laura, HR Manager

Survey responses indicate that management support for development is generally high, with a marked improvement between 2016 and 2018 due to additional support and training (5.4.i, pg.53). Reponses support individual feedback that development conversations happen outside PDRs, but that the relaunched scheme will be important to provide dedicated time and access to information and resources.

	20	16	20	18	MSD :	2016*
	F	М	F	М	F	М
My manager supports me to think about my professional development	76%	100%	85%	100%	77%	80%
My manager actively encourages me to take up career development opportunities	59%	100%	77%	100%	69%	71%
I feel comfortable discussing my development needs with my manager	76%	100%	96%	83%	81%	82%
I take time to reflect on, and plan for, my career development	71%	100%	69%	83%	75%	82%
I am clear about the development opportunities available to me	71%	100%	65%	83%	59%	67%
I have the opportunity to take on new responsibilities or develop new skills	82%	100%	81%	100%	78%	81%

 Table 28 Survey responses from PSS (NB small numbers of male responses: 2018=6 and 2016=2)

 *Note that MSD benchmark is ACARES and PSS combined as data by staff type were not available

NDWRH provides gender-specific support by facilitating applications to the University-run '**Springboard**' scheme, an award-winning development programme designed and developed by women for women. Six women have completed the programme since 2015, which has been well-received:

'I think as women, we can be quick to...downplay our achievements. Springboard helps you...focus on the positives, no matter how small.'

([I]t was a wonderful opportunity to meet with women from other disciplines in a confidential, incredibly open and safe environment.'

SAP18

2.7 Support and encourage external long-term career development for PSS by introducing a dedicated L&D budget for programmes of two years or more by the end of 2020/21.



5.5. Flexible working and managing career breaks

Present professional and support staff and academic staff data separately

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

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

The University offers a generous maternity package (26 weeks at full pay, 13 weeks on SMP and 13 weeks unpaid) to minimise pressure to return to work early for financial reasons. Additional support provided by NDWRH includes meeting the HR Manager, who provides clarity on relevant University policies, discusses possible arrangements for flexible working and annual leave, and helps draw up a maternity plan that meets the mother's needs. University resources such as 'My Family Care', a specialist provider of family-friendly employee benefits, are also discussed.

For externally-funded staff, we advise on funding implications and discuss options. For example, we **negotiated a deferred fellowship** start date for a researcher due to go on maternity leave within 5 months of the agreed commencement who also had temporary acute caring responsibilities for her partner (*see Case Study 1, pg.71*). This allowed her time and flexibility to concentrate on managing her family responsibilities, fitting work around her needs rather than the fellowship, and allowing her to start the research without a period of interruption on her return. Where possible, we ensure provision for family leave is covered in grant applications; if not, we cover maternity pay costs to allow grant-holders to apply for a no-cost extension.

In 2015, we trialled a '**Parent Buddy**' scheme, providing a list of volunteers with practical experience who could talk to potential, new or existing parents. The formal scheme ultimately lacked engagement, but feedback suggests that informal referrals by the HR Manager have been useful. A new section of the Intranet is currently under development with more comprehensive information on maternity options (including an online 'maternity plan' to assist in calculating dates and pay implications) and so the scheme will be re-visited, reviewed and re-launched as part of this.

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

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

'Keeping in Touch' days are discussed during pre-leave support and have been taken up by six women since 2015 as an effective way to keep in contact with teams and attend events.

(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.

Phased returns are discussed and supported (*see vii*), including retaining maternity cover posts for longer to ensure effective handover (where possible and with associated costs). We have supported one successful application to the University-run Returning Carers Fund, and have supported a clinical academic returning from maternity leave by funding alternative Research Midwife support when the original externally-funded post-holder went on long-term sick leave.

(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.



Since 2013, the return rate has been 85%. Two researchers' FTCs expired during their leave; we provided additional support by arranging continued access to a University account (with associated access to resources) for the equivalent period of their leave once they had returned.

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.

Of those who returned, 11 periods of leave were taken by nine women: three are currently in the same post, five are in a higher grade post, and one (highlighted below) left within 12 months but has been rehired after a brief period within the NHS (and is currently back on maternity leave with full contractual benefits as we did not consider this a break in service).

	6 moi	nths+	12 mo	12 months+ 18 months		
	ACARES	PSS	ACARES	PSS	ACARES	PSS
2013					2	2
2014					1	
2015	1					1
2016		•		1		
2017	1	1				

Table 29 Maternity longevity data

(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.

	ACARES	PSS	Total					
Grade 6	1	2	3					
Grade 7	2	1	3					
Total	Total 3 3							
Table 3	Table 30 Uptake of paternity leave since 2013 (all male)							

Paternity leave uptake appears low but matches NDWRH's gender profile, which has fluctuated only slightly from a 68%F:32%M ratio over the last 5 years. 19 individuals (68%F:32%M) have taken family leave in the same period. No one has taken SPL, although 1F's partner took SPL in another organisation.

When relaunching the parent section of the Intranet (5.5.*i*, *above*), we will ensure equal weight is given to maternity, paternity and SPL, and review to ensure no implicit bias towards parenting roles is apparent before publication. NDWRH is introducing a new policy allowing **additional flexibility for new fathers**, particularly focused on the early postnatal period to allow couples more support in establishing parenting roles.

SAP18

4.1 Discourage gender biases in parenting roles by developing our support for fathers.

(vi) Flexible working

	2013	2015	2016	2018
Female	-	-	26 (54%)	24 (57%)
Male	-	-	11 (65%)	11 (73%)
Unknown	-	-	0 (0%)	4 (80%)
Total	-	-	37 (53%)	39 (63%)
			ACARES: 69%	ACARES: 69%
			PSS: 51%	PSS: 60%

Provide information on the flexible working arrangements available.

Table 31 Survey respondents who are working flexibly (formally or informally). This question was not asked prior to the 2016 survey.

	2013	2014	2015	2016	2017	2018*	TOTAL
Female	1	3	4	2	8	7	25
Male	0	0	0	2	0	0	2
Total	1	3	4	4	8	7	27

 Table 32 Number of formal flexible working applications received (all were approved, some with adjustments)

 *to 31/07/2018

NDWRH has always supported flexible working, but the 2016 survey indicated that 27%F:0%M PSS and 37%F:20%M ACARES found the process to be non-transparent. We have, therefore, made a concerted effort over the last 18 months to increase information and relax rules around flexible working to support staff in achieving a good work/life balance.

Flexible working is often undertaken informally (demonstrated by the difference between survey respondents and formal applications), especially amongst ACARES. Staff and managers agree working patterns without a formal flexible working application or requiring reference to HR. We have recently **streamlined the process** for making a formal request by reducing the form, moving it online and implementing a straightforward approval process for simple cases. A formal request may be required: **a**) where there is an impact on pay and/or leave, and/or **b**) to ensure provision for making a statutory request where agreement cannot be reached with the manager (in which case a fuller process is followed). The University's policy follows the statutory minimum (one request every 12 months after 26 weeks of service), which we aligned with until early 2017. We have since changed our policy to accept flexible working requests at any time and with any frequency (on a temporary basis if required) providing the request meets operational needs. Simplifying the process was important to ensure equal access as formal arrangements are more common for PSS (83%F).

We encourage new staff to consider flexible working by promoting at recruitment (5.1.*i*, *p*.35) and induction, and reminded existing staff through a presentation at a Termly Meeting (2017). The impact is that applications doubled in 2017, and this trend appears to be continuing.

"I originally applied for flexible working when my eldest child started school. This was a difficult procedure, even though the request was subsequently granted and worked well for me. Over the last year the attitude to flexible working in the department has changed considerably. My feeling is that there is a move towards supporting us to work whenever is most suitable for us whether that be around childcare, roadworks or body clocks."

Female Associate Professor





Figure 25 Peakon score (out of 10) for the question 'My work schedule is flexible enough to deal with family or personal life'

(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

Before or during career breaks, the HR Manager discusses options for returning, including outlining ways that annual leave can be used for a phased return, which is more common than a reduction in hours (temporary or permanent). The same principle applies to both part-time and full-time staff in managing a return to contracted hours.



5.6. Organisation and culture

(i) Culture

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

NDWRH's inclusive, supportive working environment is apparent in our 2018 survey: 80% of comments about why people liked working in the department cited friendliness and support. This has been reinforced by:

- Launching departmental Away Days (2014);
- Employing a Communications Manager (2014 see 5.6.vii, p.68);
- Renaming and rebranding (2017)
- Mentimeter (2018 *see 3.ii, p.18*)
- Launching an annual 'Wellbeing Week' (2018);
- Implementing the Social Club (2018); and
- Integrating TGI through cross-attendance at events and seminars; active inclusion on committees; and creating an administration team presence at the TGI site.

A recent cultural shift towards **greater change and innovation**, led by a change in HAF, has enabled us to implement a range of new policies and initiatives over the last 18 months, and has provided excellent groundwork for implementing our ambitious SAP18:

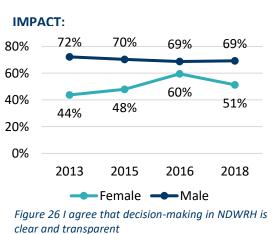
IMPACT: 'It is clear that the culture is shifting... [There is] a sense of positivity about working in the department.'

'In the last few months things have improved hugely; it feels as if someone is taking an interest in how the department runs and how it feels to work there and as if new times are ahead :)'

2018 Survey Comments

Increasing transparency has remained a high priority since our BAP. Actions have included:

- Launching a departmental intranet and newsletters (2014);
- Publishing Senior Staff Meeting minutes (2015);
- Opening up committees (e.g. SAT 2016)
- Introducing Termly Meetings (2017);
- 2018 Away Day (including publishing a 'Fact Book' setting out core information such as our financial position and staff breakdown);



We anticipate that the recent reduction in female agreement is a partial response to the current level of

change (see above), which has resulted in: a) higher expectations for levels of transparency and b) introduction of new, as-yet-embedded initiatives. Implementing the new leadership model and formalising processes in the SAP18 should remedy this. We will add this question to Peakon to enable live tracking and additional qualitative and deeper data.



(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 polices.

HR policies are published on the Intranet, with updates flagged in the newsletter and at Termly Meetings. As outlined in *5.4.i, p.53,* as a result of additional training, along with encouraging staff to talk through cases with the HR team, **confidence in management processes has risen** by 16% for females and 19% for males over the last two surveys (Table 27). Areas of policy including grievance and disciplinary procedures are undertaken by HR in partnership with managers to ensure consistency in implementation.

Our 2013 Bronze application indicated a need to focus on bullying and harassment. To identify differences between policy and practice, we ask the following questions in our survey:

	20	13	20	15		20 16			2018	
	F	Μ	F	Μ	F	Μ	U	F	Μ	U
Have you experienced harassment, Star	f 2 4%	0 0%	8 17%	2 7%	5 10%	1 6%	2 40%	4 9%	1 7%	1 17%
during the last year? Student	s 0 0%	0 0%	1 6%	0 0%	3 15%	0 0%	-	2 15%	0 0%	0 0%
Have you witnessed harassment, Star	f 8 22%	1 6%	8 17%	4 15%	8 17%	1 6%	1 20%	8 19%	0 0%	0 0%
during the last year? Student	s 3 20%	0 0%	2 11%	0 0%	8 40%	0 0%	-	1 8%	0 0%	0 0%

Table 33 'Yes' responses to survey questions on Fair Treatment and Bullying & Harassment and % of respondents. Please note question 1 was not asked until the 2016 survey. Only 1M student completed the survey in 2018.

Cases are not always brought to the department's attention, but where they have been, action has been immediately taken: a case of peer-to-peer bullying reported in 2016 was successfully resolved through engaging an external mediator. Our focus has, therefore, been on training and information, including:

- Appointing three Harassment Advisors (1F:2M, increased from 1M in 2013) who provide confidential and impartial advice;
- Creating a dedicated section of the Intranet for staff and students to access resources, including those external to NDWRH (2014);
- Participating in 'Anti-Bullying Week' (from 2015) by running awareness events, including attaching informational leaflets to payslips to ensure information is disseminated (2016);
- Implementing a mandatory requirement for all staff, students and visitors to complete online modules on *Dealing with bullying and harassment in the workplace, Equality and Diversity* and *Unconscious Bias* (2015).

Overall, staff awareness of policies and support has increased from 88% (2015) to 94% (2018). Focusing on activity for the first time in our BAP (2013) resulted in the initial increase in survey reporting (staff are less likely to tolerate poor behaviour) but all these activities have since contributed to a downward trend.

Yet responses to this question are clearly gendered (noting the low male response rate may skew the data). In response, in April 2018, we engaged an external HR consultant to run confidential 'Valuable Conversation' events for all staff and students to obtain further qualitative information. Unfortunately, this consultant was unable to run these events: a new consultant has now been engaged and these events are now taking place. The ASWWG will also consider initiatives to target stress reduction, which is often an underlying cause for bullying behaviour, and a further female Harassment Advisor will be appointed.

SAP18

- **2.9** To continue to develop the in-house Management Development Programme (MDP) to target other mid-career level groups, by the end of August 2019.
- **3.2** Develop an NDWRH Charter based on positive behaviour by the end of 2018/19.
- **3.9** Address the gender imbalance of experience of bullying and harassment and ensure effective support is being provided to the Harassment Advisors.
- 3.9.i Actively recruit an additional female advisor by the end of Hilary 2018/19.
- 6.5 Introduce mandatory equality and diversity workshops for supervisors and line managers

(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.

	F	emale					Male		TOTAL
	ACARES	PSS	PGR	TOTAL	ACARES	PSS	PGR	TOTAL	TOTAL
Soniar Staff	10	2	0	12	15	0	0	15	27
Senior Staff	37%	7%	0%	44%	56%	0%	0%	56%	27
Athena SWAN SAT	4	5	2	11	3	0	0	3	14
Athena Swan Sat	29%	36%	14%	79%	21%	0%	0%	21%	14
Department Safety	2	4	1	7	2	0	0	2	9
Committee	22%	44%	11%	78%	22%	0%	0%	22%	9
Lab Management	1	2	2	5	1	1	0	2	7
Committee	14%	29%	29%	71%	14%	14%	0%	29%	/
MSc Committee	1	1	0	2	4	0	0	4	6
wise committee	17%	17%	0%	33%	67%	0%	0%	67%	0
Student Committee			7	7			0	0	7
Student Committee	-	-	100%	100%	-	-	0%	0%	/
PGR Committee	3	2	5	10	2	0	0	2	12
PGR Committee	25%	17%	42%	83%	17%	0%	0%	17%	12
Brainwaves	1	4	1	6	0	0	0	0	6
Committee	17%	67%	17%	100%	0%	0%	0%	0%	0
Social Club	1	1	0	2	0	1	0	1	3
Social Club	33%	33%	0%	67%	0%	33%	0%	33%	3
TOTAL	23	19	18	60	27	2	0	29	89

 Table 34 NDWRH committees in approximate order of influence
 Influence

Committee membership is mostly *ex officio*. All PIs are invited to the Senior Staff Committee. TGI are represented by the Executive and Deputy Directors, who engage with TGI people through local channels. Feedback at the 2018 Away Day indicated lack of clarity around this committee, which we are addressing in the SAP18 by implementing a new leadership model (the 'SLT') comprising an Executive Board, a People Committee, a Teaching Committee, and a Research Committee. This will increase staff influence in how the department is managed, but, as it will correspondingly increase workload membership will be 50% *ex officio* and 50% self-nomination against advertised person specifications. A review in July 2019 has been included in the initial TOR: if positive, we will consider the impact of gender and workload in the 2019-20 iteration, in consultation with staff.

Calls for volunteers are put out to the department for the Social Club and Brainwaves Suggestion Scheme Committee. An annual review of membership has been incorporated into the TOR for both.

SAP18

- **3.1** Introduce and implement a new departmental leadership model by the end of 2018/19 to provide staff with greater input and transparency in how the department is run.
- **3.6** To monitor the representation of men and women on departmental committees, taking into account the impact of gender and workload, by the end of 2018/19.

(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?

All senior staff (16F:12M) sit on influential external committees, both national (e.g. clinical and scientific societies, guideline groups, research charities and RCOG) and international (e.g. clinical special interest groups, journals and publication committees, the European Research Council, WHO). We support and encourage staff on an *ad hoc* basis: more focused, strategic support, particularly for mid-career staff, will be included in our SAP18 and embedded in the new career framework:

SAP18

2.16 To improve the support provided by the department for those wishing to gain experience on an external committee by the end of 2019/20



Executive Committee of the British Andrology Society 20 June 2017

General

Congratulations to Celine Jones (Laboratory Manager for NDOG's MSc in Clinical Embryology) who has been elected to the Executive Committee of the British Andrology Society.

Figure 27 Celebrating external committee membership



(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.

Workload is principally research-oriented; therefore, either self-directed or directed by the appropriate PI. Formalised roles (e.g. Deputy HoD and DGS) are recognised through additional allowances. We have previously reviewed workload models piloted in other departments but concluded that similar detailed models would not be appropriate as formal administrative burden is low. In 2015, 79% ACARES agreed that their workload was reasonable and 89% agreed that workload allocation was transparent and fair.

However, these scores have since dipped to 58% and 56% respectively with clear gender imbalance (fig.28), although it is not clear why. This is therefore a priority area to address in our SAP18. Workload is currently considered in our PDR scheme; the decline in PDR participation may have contributed to the decreased workload satisfaction and so consideration of this will be an integral part of the relaunched scheme (and underlying development framework). In the meantime, we have made a number of changes to streamline administrative processes on the back of comments made through Peakon.

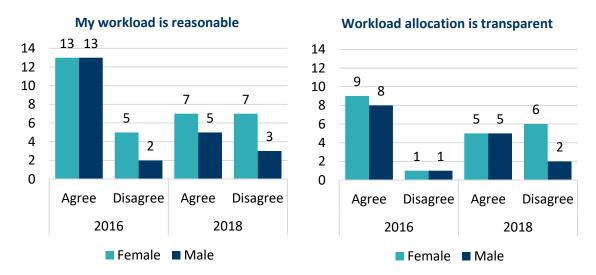


Figure 28 Reduction in ACARES workload scores suggests that this should be a priority area

SAP18

2.15 To review workload holistically within the department for ACARES to include research, teaching, clinical commitments, committee work and family commitments.



(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.

			2013			2015			2016			2018	
		F	Μ	U	F	Μ	U	F	Μ	U	F	Μ	U
In NDWRH, meetings are scheduled to take caring responsibilities into account	Agree	18	15	-	33	24	-	28	11	2	30	14	4
	Disagree	5	0	-	2	0	-	2	2	0	2	0	0
	Neither or N/A	29	6	-	31	4	-	18	4	2	10	0	1
	% Disagree	10%	0%	-	3%	0%	-	4%	12%	0%	5%	0%	0%

NDWRH has no formal policy for meeting times but survey responses are predominantly positive:

Table 35 Survey responses around meeting times

In response to 10% disagreement in 2013, the HoD emailed PIs with a reminder about good practice, resulting in an improved 2015 response. We continue to monitor this via Peakon to address individual difficulties as caring needs are diverse. Our recent focus on flexible working has been beneficial, in particular encouraging **remote meeting participation**; our Communications Manager, for example, now joins weekly operational meetings via Zoom to enable her to work from home, which facilitates school drop-off and pick-up.

Departmental seminars are 1pm on Tuesdays to ensure that they fall within core working hours. For one-off events that happen outside normal working hours, additional measures are put in place. For our 2018 Away Day, we offered **financial support** for parents who needed to fund additional childcare, recognising the earlier start and later finish due to travel. Although our 80th Birthday celebrations took place in the evening, families were invited and **children specifically catered for**. For both events, we provided significant notice so that arrangements could be put in place. Our annual Christmas event is held at lunchtime.

Senior Staff meetings are held over lunchtime; the new model (*5.6.iii, p.64*) – with smaller groups – will help accommodate both diverse caring needs and clinical commitments.



(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.

EVENTS

NDWRH events are primarily internal social events, but we encourage visibility of role models by supporting the female Deputy HoD to be as equally prominent as the male HoD; for example, delivering departmental news at Termly Meetings and chairing Away Day sessions. One particular gender-focused event was **International Women's Day 2018** to which we invited two of our senior female academics to talk about their experiences as women in academia, and set up a photo booth to encourage everyone to come and pose with an inspirational quote about women and equality.



Figure 29 Some of the (many!) images taken at IWD 2018

SEMINARS

NDWRH runs weekly seminars for invited speakers, research groups and students. Internal speakers mirror the departmental demographic. The gender split of external speakers between 01/01/16 and 31/07/2018 was 15F:19M, and represented both mid-career and senior speakers. To facilitate equal access to seminars (particularly due to split sites and clinical commitments) where permitted, we record and upload seminars to the Intranet (on an opt-out rather than opt-in basis to maximise participation): 58% ACARES and 67% students attend regularly and a further 23% ACARES and 20% students have listened to a broadcast.



INTERNAL COMMUNICATIONS

NDWRH hired a Communications Manager in 2014 as part of our BAP, enabling implementation of a range of new communication channels.

In 2014, we installed a TV screen in the NDWRH Reception in the Women's Centre and launched an internal newsletter, which are used (among other things) to announce successes, including ACARES, PGR and PGT students, and PSS:



The GDm-Health app allows pregnant women to track their blood glucose levels and stay in touch with their healthcare team.



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XFORI

Nuffield Department of Women's & Reproductive Health ۲ MEDICAL SCIENCES DIVISION A monthly e-newsletter for staff and students. If you have any news or events to promote please email OXFORD Tuesday 22nd May 2018

Department News



Dr Jenny Tran wins Asian Women of Achievement Award

Dr Jenny Tran (from The George Institute) is already a medical doctor. Rhodes scholar, and one of Forbes' '30 under 30', and she can now add Asian Women of Achievement award-winner to her list of accolades

Dr Tran (pictured second left) was named joint winner in the Young Achievers category for her work in chronic disease research and public health. The awards were announced at a ceremony in London on 9th May 2018, in the presence of Her Royal Highness The Countess of Wessex, Tulip Siddig MP, and Baroness Amos, Director of the School of Oriental and African Studies at the University of London. Well done Jenny!

MRC Clinical Research Training Fellowship



Congratulations to Shobi Nagraj, (first year DPhil student) who has been awarded an MRC Clinical Research Training Fellowship for her DPhil study entitled: SMARTHealth Pregnancy

Shobi's work addresses community-level identification and ongoing postpartum follow-up of pregnant women at high risk of future cardiometabolic disorders in rural India, using mobile Health (mHealth) as a tool for health systems strengthening.

Wellbeing of Women Scholarship



Congratulations to Nina Wietek (MSc by Research student) who was awarded an Entry Level Scholarship by Wellbeing of Women.

The scholarship will support her in carrying out her MSc (Res) project on developing a novel method of identifying pre-cancerous lesions (serous tubal intraepithelial carcinomas or STICs) in ovarian cancer

Figure 30 Example section from NDWRH newsletter



Cancer risk '27% higher for women with diabetes'



A major review led by Dr. Sanne Peters at the TGI, which involved almost 20 million people, found women with diabetes are 27 per cent more likely to develop cancer. For men, the risk increased by 19 per cent compared to those who do not have the condition.

The study suggests Britain's growing diabetes epidemic could lead to The study suggests Britain's growing diabetes epidemic could lead to scaring cancer rates in the coming years. It found women with diabetes had a higher risk of kidney, oral and stomach cancers, and leukaemia. The findings published in Diabetologia (the journal of the European Association for the Study of Diabetologia (the journal of the need for more research into the role diabetes plays in developing cancer. They also demonstrate the increasing importance of sex specific research.

Figure 31 Example TV slides



IMAGES

In 2017 NDWRH undertook 'Project Rejuvenation' to revitalise artwork around the department. The SAT had oversight to ensure fair gender representation, for example, a new timeline display was reviewed by a number of senior academics (male and female) to ensure that all achievements were reflected (rather than requiring self-nomination, which often disadvantages women¹⁰). We are also using this approach to create an 'Inspirational Women' display: we have received 27 nominations so far celebrating the important work undertaken by women in NDWRH. This is particularly important as we work on equalising the gender balance in the most senior positions.



Project Rejuvenation included a review of existing photographs around the department for gender balance: as a result we have given a photograph of

Figure 32 Anne Anderson (1937-83)

Anne Anderson (1937-83), an inspirational researcher in women's health in NDWRH and after whom our lecture theatre is named, higher prominence to counterbalance the display of photographs of previous holders of the prominent Nuffield Professorship (all men).

Careful consideration is given to selecting images for our website. In 2017, the Communications Manager coordinated a photoshoot of MSc students, with a primary objective of developing a bank of images representing ethnic and gender diversity to help attract a more diverse range of prospective students. These images have been used on our website and Intranet, and by other MSD departments.



Figure 33 Example image from the 2017 photoshoot used on our website

SAP18

2.8 Systematically celebrate the accomplishments of women within the department by the end of the 2019/20 academic year to support our efforts to address gender imbalance at the highest levels

¹⁰ Iris Bohnet, *What Works: Gender Equality by Design* (Cambridge, Massachusetts: The Belknap Press of Harvard, 2016).



(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.

Outreach and engagement - including media interviews, policy papers, visiting schools and patient involvement days - has been undertaken across research groups, and is recognised in PDRs and the Reward & Recognition Scheme. This activity has not been monitored centrally by the department but it has been identified as an area that requires attention. Our first step in 2018 was providing a £2,000 fund for outreach activity, open to bids from anyone in the department:

'Having access to departmental funding allowed us to participate in the Headington Festival and IF Oxford Science & Ideas Festival. These were great opportunities for public outreach and great experiences for my CV.'

DPhil Student

The SAP18 expands on this initiative.

Part of our outreach strategy will focus on school-age students, aimed at helping to attract more men into clinical embryology. In 2017 and 2018 our MSc Course Director (M) and Lab Manager (F) successfully hosted two secondary school students (1F:1M) in partnership with the charity Science Oxford, winning an award in 2018 for excellent engagement with local schools, which was celebrated on our TV (fig.34).



Figure 34 Celebrating excellent outreach on our TV screen

SAP18

2.17 a) Provide financial support for outreach and public engagement activities for staff and for students by the end of February 2019.

b) Promote outreach and public engagement opportunities within the division by the end of Trinity 2019.

c) Introduce a departmental open day, by 2019/20, to facilitate opportunities for engagement within the department.

6.2 Provide outreach and public engagement opportunities for students as part of their development, by the end of 2018/19.

Word Count: 6956



6. FURTHER INFORMATION

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

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

7. 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.



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NDWRH Athena SWAN Silver Action Plan 2018-2022						
Objective	Actions	Justification	Success Measures			

PRIORITY ONE: EFFECTIVE DATA MANAGEMENT

This is essential to measure progress and implement evidence-based initiatives.

1.1	Using both quantitative and qualitative methods to strengthen the department's capacity to measure and understand its people, including differences in gender experience, by the end of 2018/19. Responsibility: HAF Timescale: 9 months Reference: 3.ii	 Use Peakon to develop meaningful senior management reports on the progress of the SAP18 by the end of Trinity 2019. 	New Activity: Peakon software provides meaningful qualitative and quantitative data based on regular weekly pulse surveys. These are delivered by via email to each person in the department and consist of four questions, based on one of the key drivers:• Engagement • Autonomy • Growth • Recognition • Meaningful work • Accomplishment • Goal setting • Reward• Strategy • Strategy • Peer relationships • Freedom of opinions • Workload • Environment • Organisational fit • Management support	 Regular, monthly reports for the SLT in place by the end of the 2018/19 academic year.
			received in a timely way, facilitating a bottom-up rather than traditional top-down approach. Data are reliable because there is a strong focus on confidentiality as all responses are submitted anonymously.	
			Need: A biennial survey does not provide sufficiently rich data for a comprehensive analysis of issues. With a new leadership structure in place from November this year, there is a need to provide the Senior Leadership Team (SLT) with meaningful information on how we are progressing and what areas need addressing.	
			We have already seen triangulation of data through the survey, information gathered at the NDWRH Away Day and, more recently, through 'Valuable Conversation' events. The next step is ensuring that information reaches the SLT in a meaningful way, so that they can take action and proactively manage issues as they arise.	

		NDWRH Athena SWAN	Silver Action Plan 2018-2022	
Obje	ective	Actions	Justification	Success Measures
1.2	To continue developing an open and transparent culture by ensuring that every member of the department can see progression on the SAP18. Responsibility: Communications Manager Timescale: 12 months Reference: 3.iii	i. Create an AS Action Plan dashboard on the NDWRH Intranet by the beginning of the 2019/20 academic year.	 New Activity: The dashboard will be available to everyone in the department on a dedicated INDWRH Intranet page to view our progress against the SAP18. The dashboard will be updated on a regular monthly basis. Need: Currently the department provides updates on the AS Action Plan at Termly Meetings. Metrics taken directly from Peakon relating to satisfaction in 15 areas are not currently shared. The new dashboard will enable us to do this and provide feedback on the work being carried out by the two AS working groups. People within the department have indicated that they want greater transparency and understanding of the department's strategy, and the new dashboard will help to facilitate this. 	 The successful launch of the dashboard by 2020/21. Increased aggregate score from Peakon for Strategy from 6.8 to 8.5 by July 2022.
1.3	To improve leaver data collection, including introducing exit interviews from 2020/21 to gain feedback from employees so as to improve aspects of the organisation, better retain employees, and reduce turnover. Responsibility: HR Manager Timescale: 24-36 months Reference: 3.iii	 i. Increase recording of leaver destination. ii. Source best practice around exit interviews and consider potential outsourcing to an external agency by 2019. iii. In early 2020, ascertain how data will be used, in line with GDPR regulations, and when and how data will be gathered. iv. Write appropriate guidelines for conducting exit interviews and publish on the NDWRH Intranet by end 2019/20. v. Run pilot scheme for 6 months during 2020/21. vi. Following feedback, launch the project in full in 2021/22. 	New Activity: The department currently does not carry out exit interviews. The department has recognised the gap in understanding the reasons why people leave, and whether there is any correlation to inequalities. The introduction of exit interviews will help to close any information gap. Need: Currently, we do not collect data from exit interviews and therefore are unable to understand where people move to and why. The introduction of exit interviews will allow us to improve our offering, allow us to record leaver destination and ensure that no inequalities are hiding in incomplete data sets.	 100% of leaver destinations captured. Exit interviews offered from 2021/22 with 75% response rate in the first year.

NDWRH Athena SWAN Silver Action Plan 2018-2022			
Objective	Actions	Justification	Success Measures

PRIORITY TWO: EQUITY, TRANSPARENCY AND SUPPORT IN CAREER DEVELOPMENT

This has been a core priority running through the whole application. Support for development has often been ad hoc; there is now a clear need to formalise these processes to ensure equal access without requiring self-promotion and greater transparency.

2.1	Increase information and transparency around pay and embed a regular annual pay review to ensure gender parity. Responsibility: HR Manager Timescale: 4 months Reference: 5.1.iii	 i. Implement an annual audit of pay each April from 2019. ii. Produce report for SLT with recommendations. iii. Expand the information on University pay scales on the NDWRH Intranet. iv. Implement a clear policy on starting salaries and publish on the NDWRH Intranet. 	 New Activity: Undertaking a regular review of pay across the department to ensure there is parity and fairness and a clear and transparent justification for any differences identified. Need: The department has already identified and rectified a number of anomalies during 2017/18. During 2018/19 and beyond, the department will embed this process to avoid further discrepancies, with a report to the SLT on findings and recommendations for change. Feedback from Peakon has also indicated that staff are unclear about the process for calculating pay, so as part of our drive for transparency we will provide clear and accessible guidance. 	 To increase aggregate Peakon score for Reward from 6.4 to 7.5 and Recognition from 7 to 8.5, by the end of 2018/19.
2.2	Increase female confidence in negotiating contract terms by running a workshop focusing on 'asking for what you want', aimed particularly at women by the end of July 2019. Responsibility: HAF Timescale: 8 months Reference: 4.2.ii/5.1.iii	 i. Ascertain how many women would find such a workshop helpful by carrying out a short pulse survey by the end of January 2019. ii. Based on the findings, develop an appropriate workshop and run a pilot during May 2019. iii. Undertake a review of the feedback from the workshop in order to: a] continue and develop further or b] develop other assistance, e.g. factsheets which can be made available on the Intranet, by the end of Trinity 2019. 	New Activity: To explore the use of workshops to help women ask for what they want. Women have indicated that they find asking for a pay rise or a regrade very difficult. The workshop will provide tools to address such concerns, looking at assertive techniques and negotiation skills. If the uptake is more than nine, and the outcome of the workshop positive, further workshops will be considered. Need: During 2017/18, a number of women within the department have asked for advice in the area of salary negotiations and/or assertiveness. In order to provide support, the department will devise a workshop that deals with 'asking for what you want'.	 Minimum sign-up of 10 people for the pilot workshop. 90% positive feedback from pilot workshop.

	NDWRH Athena SWAN Silver Action Plan 2018-2022				
Obje	ctive	Actions	Justification	Success Measures	
2.3	Provide clear direction and policy for progression from fixed-term to open-ended or permanent contracts for G7 and G8 ACARES by the end of the 2018/19 academic year. Responsibility: PRWG Timescale: 8 months Reference: 4.2.ii	 i. During Hilary 2018/19, to consult with key stakeholders for the implementation of a new process for moving staff on G7 and G8, with 5 years' service or more, to either openended or permanent contracts. ii. Once confirmed, publish this policy on the NDWRH Intranet. 	New Activity: To consider whether the department can move staff with more than 5 years' service to open-ended or permanent contracts. Need: Data collected from the AS Survey, Peakon, Away Day and 'Valuable Conversation' interviews have indicated that staff feel extremely dissatisfied with the University system of fixed-term contracts. In the last 18 months, the department has moved a number of staff previously on fixed-term contracts to permanent or open-ended ones with a careful rationale in each case. We will consider whether the extra duties performed by ACARES at G7 and G8 are significant enough to warrant a move to either one of these contracts. Currently only 10% of G7 ACARES within the department hold a permanent contract, and only 7% at G8.	 To increase aggregate Peakon score for Recognition from 7 to 8.5 and Management Support from 7.9 to 8.5 by the end of 2018/19 To increase the number of permanent contracts within the department for G7 by 20% and G8 by 14% the end of 2019/2020. 	
2.4	Provide clear guidance on ACARES career pathways within the department by April 2019. Responsibility: ASDWG Timescale: 6 months	 i. Devise clear guidance on career routes (and associated resources) including alternative pathways by the end of April 2019. ii. Publish guidance information on the NDWRH Intranet by the end of July 2019. iii. During September 2019, brief, and provide training where necessary, to HR and Senior Leaders, on the pathways, so that advice is consistent and clear. iv. Offer workshops to discuss pathways and provide advice. iii. Review biennially and communicate updates. 	New Activity: For the progression of individuals and the department, clear guidance on career pathways is essential. The department therefore wishes to formulise information to ensure the relevant information is clear and consistent. Need: The need for clarity around career pathways has been raised through a number of fora. It is clear that there is a gap in knowing how to progress and what are the anticipated timelines. It is therefore considered essential to provide information to ensure there is a clear understanding of the different routes and pathways to progression.	 Published guidelines of career pathways and associated resources on the NDWRH Intranet by September 2019. Increased Peakon Growth score from 7.1 to 8.5 and Management Support from 7.9 to 9.0, by end of 2021/22. 	

	NDWRH Athena SWAN Silver Action Plan 2018-2022			
Objective		Actions	Justification	Success Measures
2.5	To develop and implement a new PDR scheme by the end of 2018/19, tailoring it to meet the needs of each group within the department, including clinical academics Responsibility: ASDWG Timescale: 9 months Reference: 5.3.ii/5.4.ii	 i. By the end of April 2019, review the needs of each group to adjust the PDR to reflect these. For example, for ACARES, ensuring that it is underpinned by the career pathways developed in 2.4, and for Research Midwives, ensuring that it is underpinned by the NIHR competency framework. ii. Design the new PDR form, ensuring that it caters for those moving up, staying put or moving on (e.g. retirement) by the end of July 2019. iii. Roll out the new process by October 2019. iv. In Michaelmas 2020/21, review experiences and understand what changes may be required for the next cycle. 	New Activity: The current PDR system will be replaced during 2019/20. The department recognises its limitations and wishes to improve the offering, ensuring that it is tailored for different career pathways. Need: The current PDR scheme does not cater for the different career paths within the department and staff have indicated frustration and dissatisfaction with it. It is a paper- based system and implemented in Michaelmas each year. The department recognises a need to improve the offering to staff and to have a more effective process in place. We are currently consulting with staff with a view to providing a new system in 2019/20.	 80% completion rate during 2019/20. 90% completion rate during 2020/21. 100% completion rate during 2021/22. Feedback from each PDR cycle is 90% positive.
2.6	As part of the PDR process, to provide every member of staff with the opportunity for a personalised learning and development plan (LDP) by the end of 2019/20. Responsibility: HR Manager Timescale: 18 months Reference: 5.3.ii/5.4.ii	requirements and develop a personalised plan that meets	New Activity: Please also see 2.5. As part of the pilot for the new PDR scheme, every member of staff will be given an individual LDP for the next 12 months, which will be tracked by HR. Need: The need for clarity around career pathways has been raised through the biennial survey, Peakon and individual interviews with members of the department. People want the opportunity to develop and grow; this will help ensure appropriately tailored support.	 Increased aggregate score on Peakon in the following categories: Growth 7.1 to 8 Accomplishment 7.4 to 8 Recognition 6.9 to 8 Goal Setting 8 to 9.5 Management support 7.7 to 8.5

	NDWRH Athena SWAN Silver Action Plan 2018-2022				
Objective		Actions	Justification	Success Measures	
2.7	Support and encourage external long-term career development for PSS by introducing a dedicated L&D budget for programmes of 2 years or more by the end of 2020/21. Responsibility: SLT Timescale: 30 months Reference: 5.4.iii	 i. Develop clear guidelines for PSS when applying for long-term (more than 2 years) L&D programmes, e.g. HR, finance and accounting, by the end of 2020/21. ii. Include options for 'learning holidays' for those on maternity/paternity leave, or with other caring duties. iii. Introduce paid study leave and financial support for books/learning materials. 	New Activity: To include departmental sponsorship and support for long-term L&D programmes, such as CIPD, CIMA etc. to increase development opportunities for PSS. Need: There is no formal process for requesting support for long-term L&D. Going forward the department will take a strategic approach to learning and development, and will provide greater clarity to those wishing to develop their qualifications further.	 Published guidance on long-term training and development opportunities by the end of 2020/21. Improved aggregate score on Peakon for Growth 7.1 to 8.5 by the end of 2021/22. Improved aggregate score on Peakon for Accomplishment from 7.4 to 9.0 by the end of 2021/22. 	
2.8	To provide mandatory training for line managers and supervisors in managing PDRs by the end of September 2019. Responsibility: HR Timescale: 10 months Reference: 5.3.ii/5.4.i/5.4.ii	 i. Prior to the launch of the new PDR system in October 2019, set up a number of workshops for mandatory training for line managers, focussing on dispelling bias in areas such as expedience, distance and similarity. ii. In June 2020, to undertake a short survey for reviewees, following the rollout of the new PDR to understand how further improvements could be made. iii. Embed training for line managers from 2020/21 onwards. 	New Activity: Prior to the new PDR launch, to provide comprehensive training for line managers, to ensure consistency, fairness and understanding of what is required. The training will consider bias and how this can impact the outcome of PDRs. Need: To ensure the new scheme is effective, managers need appropriate support. We need to ensure they are confident in delivering a positive process with clear understanding of how to set meaningful SMART goals, as well as how to recognise personal biases.	 100% attendance for training by the end of September 2019. 75% positive outcome of survey following launch of new PDR system. Increased aggregate score on Peakon for Meaningful Work, from 7.9 to 8.5 by the end of 2019/20. 	

	NDWRH Athena SWAN Silver Action Plan 2018-2022			
Objective		Actions	Justification	Success Measures
2.9	To continue to develop the in-house Management Development Programme (MDP) to target other mid- career level groups by the end of August 2019. Responsibility: HR Manager Timescale: 24 months Reference: 5.4.i	 i. During Hilary 2018/19, identify groups that will benefit from MDP training and develop the programme in a modular way to suit the different groups. ii. Begin targeted management training from Trinity 2018/19, to include groups such as new PIs and newly promoted PSS. iii. From 2019/20, embed the MDP programme as a regular, annual tool to assist managers within the department. 	New Activity: Following the successful rollout of an MDP for Research Midwives in 2017/18, to use the model for other mid-tier groups within the department. This new activity will take a strategic approach to L&D and allow individuals to increase their skills and broaden their understanding of general management practices. Need: The MDP was developed in-house in 2017 specifically for Research Midwives. There has been a request from a number of PIs to provide similar training and it will be customised to suit different groups.	 Consistent positive feedback of 95% or more about the quality of the MPD provision from 2018- 2022. Increased aggregate score on Peakon for Management Support from 7.9 to 8.5 by the end of 2018/19. Improved aggregate score on Peakon for Organisational Fit, from 7.5 to 8.5 by the end of 2019/20.
2.10	To continue to embed and support teaching activities at G7 and G8, including formally recognising the level of informal teaching in the department, and providing opportunity and funding to gain a formal teaching qualification. Responsibility: New Working Group: Lab Manager; MSc Course Director; G7/8 ACARES; PGR; HR Manager Timescale: 12 months Reference: 5.3.i/5.3.iii	 i. To set up a formal process for recognising teaching activities including identifying an appropriate teaching qualification by the end of December 2019. ii. To link to the advice and guidance provided for career pathways (2.4) ensuring consistency and clarity. 	New Activity: To develop the support we provide to researchers at G7 and G8 by formally recognising teaching in the laboratory, including the opportunity to undertake a formal teaching qualification. Need: Informal teaching in the laboratory is integral to the successful running of the department and enabling junior members to gain essential technical skills. It often falls to G7/8 ACARES, taking time away from their own research. We therefore want to recognise this formally, and ensure that it supports their own personal development as well as those they are teaching.	 Process set up and running by the end of 2018/19. Take-up of scheme is 25% during 2019/20. Aggregate Peakon score for Recognition increases from 7.1 to 8.5 from 2018/19. Aggregate Peakon score for Growth increases from 7.1 to 8.5 from 2019/20.

	NDWRH Athena SWAN Silver Action Plan 2018-2022				
Objective		Actions	Justification	Success Measures	
2.11	Provide additional support for women in applying for URL, AP and Professor titles. Responsibility: SLT Timescale: 42 months Reference: 5.1.iii	 i. Provide clear guidance for applications for the schemes by October 2019, embedding this in the career pathway framework (2.4) ii. Ensure SLT members understand the process and can therefore advise others by the end of Michaelmas term 2019. iii. Provide the opportunity of a guidance meeting with two senior members of the SLT, in order to provide support and direction from Hilary 2020. 	New Activity: Currently only the HoD provides guidance to members of the department wishing to progress to URL, AP or Professor titles. This can prove problematic in terms of accessibility. Through additional training of senior members of staff, the pool of people providing advice will increase. It will also provide development opportunities within the SLT and assist with the department's succession plan. In tandem, we will embed this as a clear step in the career pathway framework to enable staff to focus development towards this at a more junior point in their career. Need: There is no formal system in the department, and only the HoD provides advice. The new system will provide clarity and parity within the department. It will also provide development opportunities for senior managers and ensure that the department is seen to be transparent in its handing of such matters.	 Publication of guidance around application by the end of 2019. Increased success rate in applications for each of these three roles from 66.7% to 80% department, by 2022. Increased Peakon aggregate score for Growth from 7.1 to 8.5. 3 further successful applications by 2022. 	
2.12	To review the support provided to Academic Clinical Fellows (ACFs) by 2019/20. Responsibility: ASDWG Timescale: 18 months Reference: 4.2.i	 i. Review the support that the department provides to ACFs, and how this could be improved by the end of 2019/20. ii. Run a focus group in Michaelmas 2019 to understand further ACF experiences of the department and further support they would require. iii. Develop dedicated Intranet support for ACFs including networking opportunities, by the middle of 2019/20. 	New Activity: The department will review the support it provides to ACFs and how this can be improved. Need: Feedback received from this group indicates that more can be done to support them. ACF positions are a pipeline into clinical academia in the department, so it is important to engage and provide them with career advice and support as they are developing their early careers	 Launch of new intranet pages by Hilary 2019/20. Positive feedback from a second focus group in Michaelmas 2020. 	

		NDWRH Athena SWAN	Silver Action Plan 2018-2022	
Objective		Actions	Justification	Success Measures
2.13	To formalise and develop our support packages for new and struggling researchers by the end of 2019/20. Responsibility: SLT Timescale: 18 months Reference: 5.3.iii	 i. Establish the criteria for providing financial support packages to new and struggling PIs within the department by the end of August 2019. ii. Consider other interventions e.g. Whiteboard sessions and/or Project Review Board. iii. Evaluate the benefits of a CV Review Service and how this could assist people within the department by the end of 2019. iv. Establish a formalised departmental mechanism for reviewing fellowship applications by the end of 2019. 	New Activity: To provide a comprehensive formal support service for new and/or struggling PIs within the department, ensuring that the process is equitable and fair, and allows NDWRH to monitor impact more effectively. Need: There is no formal process for applying for funds for new or struggling PIs. Although support has been provided, it has not been formalised, making it difficult to understand impact and creating a belief that there is lack of transparency. This new objective will ensure we develop a formal and fair process.	 Published policy and procedure outlining the support available and the process for applying for it, by October 2019. Increased aggregate score on Peakon for Growth from 7.1 to 8.5 by the end of 2021/22. Increased aggregate score on Peakon for Accomplishment from 7.4 to 8.5 by the end of 2019/20.
2.14	Expand and develop the grants team to better support PIs by the end of Hilary 2019. Responsibility: HAF/Research Grants Manager Timescale: 6 months Reference: 5.3.v	 i. Recruit a Grants Administrator to support the administrative work of the Research Grants Manager increase capacity as the department grows. To be in post by end of Hilary 2019. ii. From Trinity 2019, take a new approach by proactively engaging with PIs, rolling out a broader grants support package, e.g. implementing 'mock panels', peer reviews, whiteboard sessions etc. (see also 2.13), and offering more individualised, strategic support. iii. By the end of Michaelmas 2019, assess whether more administrative support is needed to ensure PIs and researchers are focusing on their science. 	 New Activity: A change of approach is needed, in order to better support our PIs. The new Grants Administrator will provide capacity for the Research Grants Manager to engage proactively with PIs in order to identify and develop further support. Need: Currently the department has a Research Grants Manager supporting 24 PIs. As the department continues to expand, it is clear that further support is needed, particularly at application stage due to the gender differences in success rates. The Grants Assistant post will be critical in developing a grants team. 	 The department's current rate of success with grant and project applications is 30%. To increase the success rate to 45% by 2019/20. Increased aggregate score on Peakon for the following categories: Accomplishments from 7.4 to 8.5 by the end of 2019/20. Workload from 7.4 to 8.5 by the end of 2019/20

	NDWRH Athena SWAN Silver Action Plan 2018-2022				
Objective		Actions	Justification	Success Measures	
2.15	To review workload holistically within the department for ACARES to include research, teaching, clinical commitments, committee work and family commitments. Responsibility: PRWG Timescale: 12 months Reference: 5.6.v	 i. Use Peakon data to identify differences in a) staff groups/levels and b) gender by January 2019 to identify priority areas ii. Consultation with individual staff groups to understand why workload has increased over the last two year iii. Revisit methods of workload modelling and present recommendations (if any) to SLT by Trinity 2019 iv. Review administrative processes to ensure these are time efficient for users 	New Activity: Investigating the causes behind declining satisfaction with workload and identifying appropriate action that we could take to remedy this. Need: There has been a clear reduction in satisfaction with workload over the last two years, which is particularly apparent for women. Further information is required to understand the causes behind this and put appropriate action in place.	1. Increase ACARES workload score in Peakon from 7.0 to 8.0 by the end of 2019/20	
2.16	To improve the support provided by the department for those wishing to gain experience on an external committee by the end of 2019/20. Responsibility: SLT Timescale: 18 months Reference: 5.6.iv	 i. Consult with staff in order to understand the barriers to participating in external committees by the end of Michaelmas 2019. ii. Provide guidance on how to access external committees by the end of Hilary 2020. iii. As part of the new PDR, ensure there is an opportunity to discuss and develop external participation with line managers by Trinity 2020. iv. Ensure committee participation is recorded as part of PDR to enable the department to track participation rates. v. Publish external committee opportunities by Trinity 2020. 	New Activity: To ensure that staff are able to access and contribute to external committees and that the department understands any gender-related issues which may prevent women and/or men from contributing to such activities. Need: Many of the senior staff sit on influential external committees, both national and international. However, the department recognises that for other groups, e.g. mid- career staff, it is more difficult to find suitable opportunities. The department wishes to identify opportunities, provide encouragement and better understand how it can support its people going forward.	 Establish a base line in terms of participation rates, for different groups within the department. Establish a formal process to support those wishing to participate on external committees, by the end of 2019/20. 	

	NDWRH Athena SWAN Silver Action Plan 2018-2022				
Obje	ective	Actions	Justification	Success Measures	
2.17	 a) To provide financial support for outreach and public engagement activities for staff and students by the end of February 2019. b) To promote outreach and public engagement opportunities within the MSD by the end of Trinity 2019. c) To introduce a department open day, by 2019/20, to facilitate opportunities for engagement within the department. Responsibility: ASWWG Timescale: 3-18 months Reference: 5.6.viii 	 i. Set a budget for outreach and public engagement work within the department and publish guidance on criteria and how to apply for funds by the end of February 2019. ii. Develop a dedicated intranet page advertising opportunities within Medical Science Division by the end of Trinity 2019. iii. Celebrate outreach and public engagement work within the department by the end of Trinity 2019. iv. Begin to track outreach activity so that we can see where further support can be provided by the end of Trinity 2019. v. Introduce a department open day to increase awareness of the work undertaken and to provide opportunities for outreach activities for students and staff within the department. The first open day to take place during Trinity 2020. 	New Activity: During 2017/18, the department provided a small budget towards public engagement and outreach work. However, this was not formalised, so it is the intention to provide clear guidance and develop a small panel of people to review applications and assess any requests for funds. This new activity will build upon the work so far, but ensuring a fair process for all. Need: Outreach and public engagement are core components for progression. The department does not formally record the work carried out by individuals and has provided little support. A small budget to support outreach and public engagement activities will help support people development, while creating greater opportunity for grant applications and career progression.	 To establish a benchmark for outreach and public engagement work across the department by the end of 2019/20. A successful open day in 2019/20, with an external attendance rate of 90%. Increase outreach and public engagement activities by 20% by the end of 2020/21. 	

	NDWRH Athena SWAN Silver Action Plan 2018-2022				
Objec	ctive	Actions	Justification	Success Measures	
2.18	Proactively encourage the existing mentor scheme and provide a series of lunchtime meet and greet sessions whereby potential mentees can meet mentors, by the end of 2019/20 Responsibility: ASDWG Timescale: 18 months Reference: 5.3.iii	 i. Raise awareness of mentor scheme with regular news articles from those involved in the scheme by the end of 2018/19 ii. Set up three lunchtime meet and greet sessions during 2018/19 to promote the scheme and encourage uptake. iii. During 2018/19, educate/talk to line managers about the benefits of mentoring to encourage buy-in to the schemes. iv. Raise awareness of the scheme by introducing at induction by the end of 2018/19. v. Between 2019 and 2022 continue to promote, support and monitor department numbers to understand how the process can be improved. 	New Activity: Through proactively promoting the scheme and providing further information (e.g. at induction), or events such as lunchtime meet and great, it is hoped that the uptake will increase. The department believes that mentoring is key to developing individuals and will continue to encourage people to be either mentors or mentees. Need: Although the department has offered the scheme to staff, uptake has been slow. In 2017, no one took up the scheme. However, in 2018, there are two mentors and three mentees within the department.	 By the end of 2019/20 to Increase the uptake of mentorships by 25% from 2018. To see a steady increase of 10% take- up during years up to 2022. 	

		NDWRH Athena SWAN	I Silver Action Plan 2018-2022	
Objec	ctive	Actions	Justification	Success Measures
2.19	Develop a sponsorship scheme for mid-career women, with a 1-year pilot taking place from October 2021. Responsibility: SLT/ASDWG Timescale: 36 months Reference: 5.3.iii	 i. Working with MSD to develop and facilitate a 'sponsorship' programme for women within MSD, ensuring clear guidance on application and nomination. ii. Design the sponsorship scheme following consultation with different stakeholder groups. iii. Advertise the pilot during 2019/20, using sponsors and case studies to attract potential candidates. iv. Following the pilot, review process and receive feedback from those involved during 2020/21. 	 New Activity: Support for women's progression can go beyond networking and fora, towards sponsorship roles. There is evidence to show sponsorships can provide greater opportunities and support for women. The new initiative would identify strong leadership candidates for a 2-day programme aimed at boosting careers. Individuals will be paired with senior 'advocates' to create individual development plans. The process will include regular 'check ins' with the sponsor, after an initial face-to-face meeting. Those nominated will also develop a sense of community with others within the group to provide support and encouragement. Need: The Peakon data show that accomplishment scores are low at 7.1 for women (compared to men, who score 8.1). To address this, the sponsorship programme will provide a mechanism to access senior advocates in a formal setting. The pilot with MSD would provide a greater pool of advocates and a wider network of women to engage and connect. 	 Successful launch of programme October 2020. 95% of places taken during pilot period. 95% positive feedback from those involved in the pilot.
2.20	Create a dedicated progression page on the Intranet, linking new opportunities from training activities, to outreach and public engagement, fellowships etc., by the end of Hilary 2019/2020. Responsibility: Communications Manager Timescale: 15 months	 i. Set up small consultation groups to understand what information they would value for the progression page to be completed by the end of Michaelmas 2019/20. ii. Create and promote a new progression page based on the evidence collected by the end of Hilary 2019/20. iii. Monitor the usefulness of the site. 	New Activity: A dedicated page to provide a one-stop shop for everyone. It will debunk any myths around progression and help educate those who are new to the department. Need: Currently, information is <i>ad hoc</i> across the department and notification of opportunities is mainly through emails from Research Services/grants team and/or HR. Comments left on Peakon indicate that our people do not feel adequately informed.	 Page on Intranet up and running by the end of Hilary 2019/20 75% hit rate to site within first 6 months. Contribution to an increased aggregate Peakon score for Communications score from 5.9 to 7.5 by the end of 2019/20.

NDWRH Athena SWAN Silver Action Plan 2018-2022			
Objective	Actions	Justification	Success Measures

PRIORITY THREE: BUILDING A POSITIVE, COLLABORATIVE CULTURE

There is strong feedback that people in the department want to increase collaboration and networking, not only for social support, but to widen important informational networks.

3.1	Introduce and implement a new departmental leadership model by the end of 2018/19 to provide staff with greater input and transparency in how the department is run. Responsibility: HoD Timescale: 9 months Reference: 5.6.iii	le ye ii. Ca O ex w m iii. M av iv. A iv. A fo vi. A fo vi. A fo vi. A to to th ar to to th ar to to th ar to to th ar st vii. A	Devise a new structure for the eadership team, to be piloted for one ear by the end of September 2018. Communicate the new structure at the Detober 2018 Termly Meeting, explaining how the new system will work and how information will be nanaged. Make information on the new model wailable to all staff by the end of lovember 2018. Appoint an independent assessor to eview the system by attending meetings and meeting working group members by the end of July 2019. Ollowing the 1 year pilot, review the process with the participants, the ssessor and the department to letermine next steps. As part of this review, assess the workload with a gendered perspective o identify [a] any differences and [b] he impact this may have on other reas of members' roles and [c] steps o address this. At the beginning of September 019/20, inform the department the putcome of the pilot, with agreed next teps. add a transparency question to Peakon o enable us to track changes.	 New Activity: Following a consultation process, the new leadership model will be rolled out in Michaelmas 2018. It will provide greater transparency and opportunities for members from Grade 9 upwards to play a more active role in the development of the department. The pilot will be shadowed by an external consultant to observe how the new system works. Decisions will be clearly communicated through shared minutes on the NDWRH Intranet. The new structure also provides opportunities for staff to develop leadership skills and for the department to consider succession planning. If the process is successful, then staff can rotate through a number of sources state there is dissatisfaction with the current leadership structure. In addition, the department needs to consider succession planning and, following consultation with senior staff, it was agreed to pilot a new leadership model based on three working groups reporting into an Executive Team. Each working group has clear terms of reference and the groups are small with a maximum of five standing members. The new leadership model is very different to other departments within MSD and provides a more egalitarian approach to leadership and management. 	 95% positive feedback from those involved in the process. Increase in Peakon aggregate score for Strategy from 6.8 to 8 by the end of 2018/19. Increase in Peakon aggregate score for Communications from 5.8 to 7.5 by the end of 2018/19. Increase in Peakon aggregate score for Autonomy from 8.1 to 9.5 by the end of 2018/19.
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		NDWRH Athena SWAN	Silver Action Plan 2018-2022	
Obje	ective	Actions	Justification	Success Measures
3.2	Develop an NDWRH Charter based on positive behaviour by the end of 2018/19. Responsibility: ASWWG in consultation with Rebecca Nestor, external consultant Timescale: 12 months Reference: 5.6.ii	 i. Between August and December 2018, provide opportunities for feedback on the culture of the department through organised anonymised interviews with an external consultant in order to understand better the culture of the department and where problems or issues exist. ii. Provide initial feedback to staff in late November 2018, via two lunchtime seminars to test the views of the interviewees in order to create further insight. iii. Identify underlining behaviours that staff recognise and value, consultation process to test hypothesis by the end of January 2019. iv. Consult on the draft Charter with the department during March/April 2019. v. Final draft of Charter May 2019 vi. Launch event for Charter, June 2019. viii. Cascade the Charter through policies and procedures during July and August 2019. viiii. Review process, gain further feedback from staff, through termly meetings and survey, January/Feb, 2020. 	New Activity: Just as bad behaviour spreads, so does good behaviour. The Charter's purpose is to reinforce positive conformity and to define what is acceptable and what is valued within the department. The Charter will allow every member of staff to input what they value and how they believe behaviour should be conducted. It will help define what it means to be a 'citizen' within the department. It will be distilled into other areas such as, job design, recruitment, induction, PDRs, and more. Need: NDWRH recognises that more can be done to eradicate bad behaviour/bullying within the department. As part of that, it wishes to pilot a departmental Charter that allows all its members to agree on shared beliefs and values. The department will continue to use other methods, such as Harassment Advisors, zero tolerance to bullying etc., but considers that a fresh approach will also contribute to a sense of community, and therefore strengthen engagement.	 90% attendance at the launch event of charter to be hosted in June 2020. Positive feedback on process through Peakon, interviews and review in Hilary 2020.

		NDWRH Athena SWAN	Silver Action Plan 2018-2022	
Obje	ctive	Actions	Justification	Success Measures
3.3	To introduce a mandatory half-day, termly induction for all new starters (including students) within the department by the end of Michaelmas 2019. Responsibility: SLT Timescale: 12 months Reference: 5.1.ii	 i. To design and develop a comprehensive half-day strategy and direction induction by 2019/20 and to include: ✓ An outline of the work undertaken by different research teams within the department. ✓ A comprehensive introduction to Athena SWAN and the work being undertaken by the department as part of the SAP18. ✓ The outline of the departmental charter, including why it was devised and how it cascades down into every aspect of departmental life. ✓ In the first year to offer the induction to existing staff and to reinforce the direction of the department. 	New Activity: To introduce three half-day inductions, spread across the academic year, to include an introduction to Athena SWAN, the NDWRH Charter and to provide information on equality and diversity in order to embed NDWRH's principles at the beginning of each incumbent's life cycle within the department. Need: Currently the department provides a morning induction for all new starters, but this is largely practical and process driven, concentrating on operational matters such as Health & Safety and Information Governance. The new half day will allow new people within the department to understand the strategic direction and help them to understand how their roles fit into the bigger picture. Existing staff will also be invited to attend in the first year, helping to build the department's desire to improve transparency and provide clear guidance around direction of travel.	 In the first year, 100% attendance rate for all new starters and 65% for existing staff. 90% positive responses to induction on Peakon. To impact positively the Peakon aggregate score for Strategy, from 6.8 to 7.5.
3.4	Systematically celebrate the accomplishments of women within the department by the end of the 2019/20 academic year to support our efforts to address gender imbalance at the highest levels Responsibility: ASWWG Timescale: 18 months Reference: 5.6.vii	 i. Embed the 'Inspirational Women' campaign 2018/19, to identify key achievements through photographic displays and narrative across the department. ii. Celebrate the achievements of nominated women at the February 2019 Termly Meeting. iii. Establish an NDWRH accomplishment cycle by the end of the academic year 2019/20, ensuring key achievements are equitably recognised. iv. Continue to build and embed International Women's Day within the department, creating opportunities for women to network across MSD. 	New Activity: By creating photographic displays, the department is helping to establish female role models to help address gender imbalance at the highest levels. Introducing an accomplishment cycle will also help to raise the profile of women who may otherwise go unrecognised for their contribution to science. Need: The department must do more to celebrate women in science. Women scientists lag their male colleagues in the rate they receive major awards or recognition and women are less likely to assert their achievements. The systematic identification and celebration of women's achievements can narrow gender-based gaps.	 Increased aggregate Peakon score for women: Accomplishments from 7.1 to 8.5, Reward from 6.2 to 8.0, and Recognition from 7.0 to 8.0, by the end of 2019/20.

		NDWRH Athena SWAN	Silver Action Plan 2018-2022	
Objective		Actions	Justification	Success Measures
3.5	Introduce gender workshops as part of a wider diversity campaign by 2020/21 in order to [a] educate managers and understand the different behaviours, preferences and concerns of men and women, making a clear distinction between actual differences and stereotypes; and [b] to understand the organisational conditions that contribute towards differences between the experiences of men and women, in order to make changes where needed. Responsibility: PRWG Timescale: 36 months	 i. During 2019/20, to develop workshops that challenge the stereotyping of men and women in the workplace, emphasising research that makes it clear that men and women do not have fundamentally different priorities. ii. Following the first year of implementation, to analyse issues raised within the workshops in order to identify what changes are needed within the department to facilitate greater gender equality. 	New Activity: The workshops will help to establish an even footing, while continuing to embed equality and diversity in the workplace. Need: The workshops will form part of the equality and diversity programme within the department. Peakon data clearly show that, in most areas, men score higher satisfaction rates than women.	 Participation rate within the department is 75% in the first year, increasing to 85% in the second. Increased Peakon score for peer relationships from 7.5 to 8.5 at the end of 2021/22.
3.6	To monitor the representation of men and women on departmental committees, taking into account the impact of gender and workload, by the end of 2018/19. Responsibility: ASWWG Timescale: 9 months Reference: 5.6.iii	 i. To establish an annual survey on stress in the workplace based on the HSE guidelines, by the end of 2018/19. ii. To ensure that the review of the new leadership model at the end of 2018/19 takes into account workloads and gender balance. iii. To review all committees and develop a strategy for balancing gender by the end of 2018/19. 	New Activity: We realise than more can be done to understand workloads, gender balance and stress levels. However, to do so, data need to be collected. The introduction of a stress survey will help establish where there are problems. In addition, we will review committee composition and actively seek gender balance, through regular reviews of membership and terms of reference. Need: We need to ensure there is no gender imbalance in additional, voluntary, committee work due to the impact this can have on time available for research, which is often the main route to progression, and that this additional work is not causing additional stress.	 Increase male committee membership from 29% to 40% by the end of 2021. Following the first stress audit, have an established baseline by the end of 2018/19. To move from an aggregate score on Peakon for Workload from 7.4 to 8.5 by the end of 2019/20.

		NDWRH Athena SWAN	Silver Action Plan 2018-2022	
Obje	ctive	Actions	Justification	Success Measures
3.7	On an annual basis, to review the gender balance across the SAT. Responsibility: ASPB Timescale: Annually Reference: 3.i	 i. Review SAT groups annually every July to ensure that membership is not more than 80%F. ii. Actively recruit and engage men in the department, to develop greater gender balance across the SAT. 	New Activity: To formalise the process of reviewing groups on an annual basis, to ensure that men are fairly represented. Need: In order to ensure equitable representation of voices in the department, it is crucial that the SAT have reasonable gender balance for each of their working groups.	 Consistent gender balance, year on year within SAT groups.
3.8	Build and implement an alumni database to expand collaboration and networking opportunities beyond current members of the department by the end of 2020/21. Responsibility: ASDWG Timescale: 30 months Reference: 5.3.iv	 i. During 2019/20, review existing data to identify gaps and to expand membership. ii. Analyse existing data to establish a base line for alumni interactions over the last 3 years by the end of 2019/20. iii. Make contact with those alumni not already on the department's list by the end of 2019/20. iv. Create an accessible database with GDPR guidance on accessing information, by Hilary 2021. v. Set up a review of the database (including data management guidance) by the end of 2021/22. 	New Activity: An alumni database can help with recruitment of male students through interaction opportunities, as well as providing opportunities for collaboration and networking for staff and students. Need: The department has recognised untapped resources that could be leveraged through having a formal alumni database, particularly in supporting students into first jobs in academic or clinical careers.	 The establishment of the database by the end of 2019/20. To increase alumni contact/collaborations by 15% in the first year (2020/21).
3.9	Address the gender imbalance of experience of bullying and harassment and ensure effective support is being provided to the Harassment Advisors. Responsibility: HR Manager Timescale: 6 months Reference: 5.6.ii	 i. Actively recruit an additional female advisor by the end of Hilary 2018/19. ii. Discuss with the Harassment Advisors how we can continue to develop them and provide opportunities for a regular check-in with HR. iii. Continue to raise awareness through equality and diversity workshops. 	New Activity: The department currently has 1F and 2M Harassment advisors, and wishes to increase this to 2F:2M, as the gender balance is not currently proportional to the gender of staff experiencing bullying and harassment. In addition, it wishes to ensure there is a mechanism for each advisor to receive CPD and to meet with HR and discuss any issues. Need: Although bullying and harassment incidents have declined since 2013, women report more incidences of either experiencing or witnessing bullying and harassment.	 Successful recruitment of female Harassment Advisor by the end of Hilary 2018/19. Reduced bullying and harassment incidences by a further eight percent, by 2019/20.

NDWRH Athena SWAN Silver Action Plan 2018-2022			
Objective	Actions	Justification	Success Measures

PRIORITY FOUR: FAMILY FRIENDLY

Satisfaction with provisions for women is generally high, but we need to ensure that equal attention is given to fathers and partners.

4.1	Discourage gender biases in parenting roles by developing our support for fathers by the end of Trinity 2019. Responsibility: HR Manager Timescale: 9 months Reference: 5.5.v	 i. Implement new policy allowing new fathers additional time off and flexibility after returning from paternity leave by the end of 2018/19. ii. Expand information for fathers on the new Parents' Portal on the NDWRH Intranet by the end of 2018/19. iii. Review the Parents' Portal to ensure there is no gender bias by the end of 2018/19. iv. Promote articles supporting parental leave at least twice a year by the end of 2018/19. 	 New Activity: NDWRH is introducing a new policy allowing additional flexibility for new fathers, particularly focused on the early postnatal period to allow couples more support in establishing parenting roles. The Parents' Portal (a new subsection of the NDWRH Intranet) provides an opportunity to expand information, while we can do more to embed the ethos of flexible working for fathers by promoting articles that support and champion flexible working. Need: Our focus has previously been primarily on mothers due to the visible impact periods of leave can have on career progression. The department is now keen to provide additional support for new fathers to promote gender equality in parenting roles, and has identified that couples would benefit from additional flexibility, particularly in early stages. 	 Positive feedback about paternity provisions from a focus group to be run at the end of 2019/20.
4.2	To consult with parents to see how the department can continue to support and improve its family friendly policies. Responsibility: HR Manager Timescale: 12 months Reference: 5.5	 Set up a consultation process from 2019/20 with parents to see what improvements can be made. 	New Activity: Embedding a consultation process to ensure that our offer is inclusive and fits in with modern life. Need : To continue to improve our offering to staff and to consult regularly, to see where issues may arise, or improvements can be made.	1. Successful implementation of recommendations from consultation with positive feedback from second focus group run in 2020/21.

NDWRH Athena SWAN Silver Action Plan 2018-2022			
Objective	Actions	Justification	Success Measures

PRIORITY FIVE: GENDER-BALANCED RECRUITMENT

Ensuring gender-balanced recruitment is essential to embed Athena SWAN principles from the very earliest stage of the employee life-cycle, and work towards a gender-balanced staff profile, particularly at the highest levels.

5.1	To continue to refine and embed good staff recruitment practices to ensure that opportunities for bias are eliminated as far as possible. Responsibility: HR Manager Timescale: 9 months Reference: 5.1.i	 i. Introduce feedback questionnaires to a sample of candidates to build a greater understanding of the recruitment experience by the end of 2018/19 (and then year on year). ii. Introduce a recruitment workshop at the beginning of 2019/20 for recruiting managers to help to embed the use of McQuaig and VBI interviewing. iii. Make McQuaig and/or VBI interviewing mandatory for all recruitments by the end of 2019/20. iv. Embed the use of headhunters for all external senior recruitment by the end of 2018/19 to ensure the search is broad and proactive. v. Consider potential career pathways 	New Activity: To continue to build on the work that has been carried out to eliminate bias at recruitment stage and better understand the recruitment experience. Need: The department recognises that further work is required to embed gender-balanced recruitment.	 By the end of 2018/19, to have gained feedback from candidates on the recruitment experience. 85% attendance at recruitment workshops by the end of 2019/20. 100% embedded use of VBI and/or McQuaig, by the end of 2019/20.
		 v. Consider potential career pathways and development opportunities at recruitment stage, including supporting regrading when candidates are overqualified. 		

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Obje	ctive	Actions	Justification	Success Measures
5.2	Improve gender balance in student recruitment Responsibility: DGS/MSc Course Director Timescale: 9 months Reference: 5.1.i	 i. Undertake a post-interview review of student recruitment processes for PGR and PGT at the end of 2018/19. ii. Identify sources of applications to understand whether this affects the student gender balance. iii. Explore options for using networks to increase male applications. iv. Continue to monitor male distinction rates to see whether this remains higher than the female rate. v. Run a workshop for undergraduate project students in the department about careers in clinical academia and the field of clinical embryology. 	 New Activity: The department wishes to improve it male application rate to ensure we are accessing high-quality talent from both genders. Need: Male students are underrepresented across the board, and the department would like to understand whether it can improve recruitment processes to increase male applicant rates. Although the MSc programme only recruits 10% male applicants, these students appear to do better than their female counterparts. The department wishes to investigate this further. In addition, the department also wishes to explore how it can improve the progression pipeline between undergraduate and postgraduate student levels. 	 An increased rate of 20% male applicants in all areas of student recruitment by the end of 2021.

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Objective	Actions	Justification	Success Measures

PRIORITY SIX: IMPROVE THE DEPARTMENTAL OFFERING TO PGR STUDENTS

Providing PGR students with a solid foundation in academic skills is essential to support entry into academia.

6.1	Increase teaching opportunities for postgraduate students by the end of 2020/21, ensuring that there is a fair and unbiased application process. Responsibility: EWG Timescale: 36 months Reference: 5.iii.iv	 i. Establish a base line and assess how many teaching opportunities we have provided to PGR students in the last 2 years by the end of 2019/20. ii. Develop a formal programme of teaching opportunities by the end of 2020/21. iii. At the end of 2021/22, seek independent evaluation to understand where improvements can be made. 	New Activity: The department recognises that further support for postgraduate students wishing to pursue an academic career is necessary. It wishes to improve its offering by providing a formal process for assessing teaching opportunities and then advertising these to its students. Need: Currently teaching opportunities are limited and the department does not have a formal process for recording teaching episodes for its students. It recognises that formalising processes will allow greater organisation and participation, while ensuring the process is fair and unbiased.	 To increase the number of available postgraduate teaching opportunities from 2019/20 by 15% by the end of 2020/21. Increased Peakon score for student Management Support from 7.9 to 9 by the end of 2021/22.
6.2	Provide outreach and public engagement opportunities for students as part of their development, by the end of 2018/19.	See 2.17		
6.3	Review existing environment and quality of provision for all PGR students working at the Women's Centre by the end of Hilary 2018/2019. Responsibility: Office Supervisor Timescale: 6 months	 i. Remove students from areas without natural light and ventilation to new space in the converted seminar room, by the end of Michaelmas 2018. ii. In parallel, provide adequate equipment including new computers by the end of Michaelmas 2018. iii. Ensure that communications regarding changes to the environment are regularly provided. iv. Establish a Visitor Policy by the end of Hilary 2018/19, limiting the number of visitors to the department and 	 New Activity: To provide students working at the Women's Centre with better working space and equipment by the end of Hilary 2018. Need: The department recognises that the space provided for PGR students at the Women's Centre can be improved, but it also acknowledges that it is limited to what it can provide based on the age of the building and the available space, which is leased through the Trust. Over the last 18 months and as part of Project Rejuvenation, the department has improved the physical space through redecoration and furniture and equipment updates. However, with further growth it recognises that 	 New office space completed and students relocated. Increased aggregate score on Peakon for Environment for students based at the Women's Centre, from 7.1 to 8.0 by the end of 2018/19.

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Objective		Actions	Justification	Success Measures	
		 ensuring that staff and students are given priority access to suitable working space. v. Put in place regular reviews with supervisors and the facilities team to address any needs or concerns by the end of 2018/19. 	more must be done and has developed a plan to make further improvements.		
6.5	Introduce mandatory equality and diversity workshops for supervisors and line managers from 2019/20 onwards. <i>See also 3.4</i> Responsibility: HR Manager Timescale: 12 months Reference: 5.6.ii	 i. Design a suitable programme, following consultation with existing students and staff, which incorporates examples of issues that have been effectively dealt with within the department by the end of Trinity 2018/19. ii. In 2019/20, introduce a series of E&D workshops (two per term) iii. At the end of 2019/20, evaluate training and assess impact. 	New Activity: Introduce regular equality and diversity workshops across the academic year to provide opportunities for open discussion and debate, and foster greater confidence and understanding of how to deal with issues when they occur. Need: Although staff and students complete online training for unconscious bias, bullying and harassment in the workplace and equality and diversity, the department considers it would be helpful to run its own workshops specifically focusing on equality and diversity, and with an emphasis on culture and working together. Diverse student nationalities mean it is particularly important to raise awareness of cultural differences so that these do not impede progress with students' studies.	 100% capture rate by the end of 2019/20. 80% positive response to workshops provided by the end of 2019/20. 	
6.6	To offer McQuaig Development Report to all students to support their growth by the end of Trinity 2019. Responsibility: HR Manager Timescale: 12 months Reference: 5.iii.iv	 i. Publicise the benefits of the McQuaig system to all staff and students by identifying champions/pioneers to encourage others to use McQuaig (e.g. supervisors and students) and run newsletter articles during Hilary and Trinity 2018/19, outlining the perspective from each side. ii. Provide clear guidance to supervisors and students on its use, offering further support when requested, including a workshop in Trinity 2019 for staff and supervisors. 	 New Activity: The department has invested in McQuaig as a psychometric evaluation tool, and can provide development reports at no additional cost. It is easy to understand and does not require additional training. Those who have used it find it extremely useful as a development tool and the department wishes to develop further its use in the future. Need: Students have indicated that they want more support in their development. McQuaig is a tool that can be used to assist with this and has been used effectively, if not consistently, since 2016/17. Formalising the process will ensure all students have equal access to both the report and follow-up support. 	 75% uptake during 2019/20. 80% positive feedback from pulse survey at the end of 2019/20. 	

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Objective		Actions	Justification	Success Measures
6.7	Instigate a student PDR Programme from October 2019. See also 2.5 and 2.6 Responsibility: DGS/HR Manager Timescale: 12 months Reference: 5.iii.iv	 i. In consultation with PGR students, supervisors and the DGS, to develop a suitable online PDR for students by the end of 2018/19. ii. Provide an L&D plan for each student in line with career pathway guidance by the end of 2018/19. iii. Launch the new student PDR in October 2019/20. iv. Review the process following the first round in Trinity 2020, with adjustments as necessary. 	New Activity: By mirroring the staff PDR, students will have a more effective process to discuss career progression and L&D opportunities. It also helps prepare them for working life and will ensure there is a further mechanism to raise concerns. Need: Students meet with the DGS, MSc Course Director and a mid-career researcher on an annual basis to review progress, but it would be beneficial to provide access to an online system to support this so that activity can easily be tracked throughout the year.	1.80% positive feedback from round one.