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	Silver	Actual word count
Word limit	**13,500**	**13,468**
Recommended word count		
1. Letter of endorsement	500	677
2. Description of the department	500	525
3. Self-assessment process	1,000	708
4. Picture of the department	2,000 (+1000 additional)	3100
5. Supporting and advancing women's careers	6,500	7029
6. Case studies	1,000	741
7. Further information	500 (+500 COVID-19)	193 (+495 COVID-19)

Name of institution	University of Birmingham	
Department	College of Medical and Dental Sciences	
Focus of department	**STEMM**	
Date of application	June 2020	
Award Level		**Silver**
Institution Athena SWAN award	**Date: April 2020**	**Level: Bronze**
Contact for application Must be based in the department		
Email		
Telephone		
Departmental website	www.birmingham.ac.uk/mds	

Acronym glossary

ACL	Academic Clinical Lecturer
ACRF	Academic Clinical Research Fellow
BAME	Black, Asian, and Minority Ethnic
BHP	Birmingham Health Partners
CROS	Careers in Research Online Survey
ECR	Early Career Researcher
EDI	Equality, Diversity, and Inclusion
FGA	Fellowship and Grants Academy
FT	Full Time
FTC	Fixed Term Contract
HR	Human Resources
ICAT	Integrated Clinical Academic Training
KIT	Keeping In Touch days
LGBT	Lesbian, Gay, Bisexual, Transgender
MDS	College of Medical and Dental Sciences
NIRSE	New Investigator Research Support and Engagement
PDR	Performance and Development Review
PERCAT	Postdoctoral/Early Researcher Career development And Training programme
PGR	Postgraduate Research student
PGT	Postgraduate Taught student
POD	People and Organisational Development
PT	Part Time
RA	Research Associate
RF	Research Fellow
R-only	Research-only contract
SAT	Athena SWAN Self-Assessment Team
SL	Senior Lecturer
SPL	Shared Parental Leave
SPLIT	Shared Parental Leave In Touch days
SRF	Senior Research Fellow
T-focussed	Teaching-focussed contract
T&R	Teaching and Research contract
UHBT	University Hospitals Birmingham NHS Foundation Trust
UG	Undergraduate student
UoB	University of Birmingham
WP	Widening Participation

Previous actions which have had an observable impact are noted throughout as (**2015 AP**) or (**2018 AP**). 2018 actions can be found in Appendix 1.

Areas where data suggests further work to do will be addressed through our new action plan. New actions are noted as (**2020 AP**) and listed at the end of each section. These do not follow the order of the application but the following thematic groupings:

Data and governance
Student pipeline
Staff pipeline
Family and carers
Organisation and culture
Intersectionality

INDICATES ACTION PLAN ITEMS WE HAVE COMPLETED

INDICATES IMPACT FOLLOWING IMPLEMENTATION OF ACTIONS

INDICATES ACTIONS IN OUR NEW ACTION PLAN

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.*

UNIVERSITY OF BIRMINGHAM

Pro-Vice-Chancellor and Head of the College of Medical and Dental Sciences
Professor David Adams
College of Medical and Dental Sciences
University of Birmingham
Edgbaston
Birmingham
B15 2TT

11 June 2020

James Lush
Athena SWAN Charter
Advance HE
1st floor, Napier House
24 High Holborn
London
WC1V 6AT

Dear James,

I wholeheartedly endorse this application. Equality, diversity, and inclusion (EDI) are important values to all working and studying in our College. Our society requires healthcare workers who reflect and understand the varied backgrounds and needs of the population, and it is our responsibility to ensure that we are recruiting, training, and supporting a diverse body of students who will go on to fulfil this role. Similarly, bringing the best research and teaching to fruition depends on us supporting the talent of all in the College of Medical and Dental Sciences (MDS), from students through to professors, to reach their full potential. Our work on equality therefore underpins our mission and strategy, and I embedded the Chair of the Athena SWAN Self-Assessment Team as a member of College Board in 2015 to ensure gender equality is considered in all elements of our strategy and action.

Having seen the positive impact of increasing numbers of senior women in MDS, I have an especially strong personal commitment to gender equality. I am Chair of the Mentoring and Outreach Group at the Academy of Medical Sciences, which has a successful women in medicine and science mentoring programme, and I am a member of the EDI Advisory Group of the Medical, Dental and Veterinary Schools Councils. These roles help me gain fresh perspectives and embed best practice in MDS.

Athena SWAN continues to provide a valuable framework to reflect on our practices, receive independent input, celebrate our achievements and identify areas for further improvement. I have worked with our SAT and senior team to remove identified barriers to equality and invest in initiatives that have helped with widespread culture change and gender inclusion. I am proud of our achievements, including changes to our recruitment and promotion processes, the latter resulting in the successful promotion of women to professor (n=12), reader (n=22) and senior lecturer (n=16) over five years.

As Head of College, I systematically push our measures to support women to take on major leadership roles, including provision of access to leadership programmes, coaching, targeted administrative support, and job plan adjustments. As a consequence, now 3 of our 8 Institute Directors and 2 of our 5 Heads of School are women, while 5 years ago no women held senior academic leadership roles. Numerous women have taken up major leadership roles beyond MDS, including Professor Una Martin (UoB Deputy Pro-Vice-Chancellor for Equalities; President, British & Irish Hypertension Society), Dr Emma Robinson (UoB Academic Registrar), Professor Helen Stokes-Lampard (Chair, Royal College of General Practitioners; Chair-Elect, Academy of Royal Medical Colleges); Professor Janet Lord (Advisor on Ageing, House of Lords); Professor Sudha Sundar (President, British Gynaecological Cancer Society); Professor Pamela Kearns (President, European Society of Paediatric Oncology); and Professor Wiebke Arlt (Editor-in-Chief, European Journal of Endocrinology).

I am proud of the many examples of our progress over the last 5 years, consequent to the systematic embedding of the Athena SWAN SAT action plan in MDS policies and initiatives. This has also been reflected in our most recent EDI survey with a further decrease in perceived discrimination, increased confidence in our EDI leads and College EDI policies as well as increased satisfaction with our annual appraisal and promotion processes.

However, I recognise that there is more to be done to progress (and maintain) gender equality, and the SAT analysis has identified several areas that will be targeted in our Athena SWAN action plan, prioritising outreach to potential male undergraduate applicants; additional academic support for students to reduce gender attainment gaps; increasing numbers of female clinical academics; further reducing discriminatory behaviour; enhancing our leadership training portfolio with a bespoke programme for female academics at the transitional point from career development to career establishment; and increasing our intersectional support, particularly for black women in light of recent events.

All the information presented in this application (including qualitative and quantitative data) is an honest, accurate, and true representation of the College. I take full responsibility to ensure delivery of our Action Plan, to maintain and further improve gender equality, and share best practice, within the University, regionally, and nationally.

Yours sincerely,

Professor David Adams
Pro-Vice-Chancellor and Head of the College of Medical and Dental Sciences
University of Birmingham, Edgbaston, Birmingham, B15 2TT United Kingdom

w: www.birmingham.ac.uk/mds

677 words

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 College of Medical and Dental Sciences (MDS) is the largest College in the University of Birmingham (UoB), both by staff numbers (**Figure 2.1**) and research awards (£87M in 2018/19).

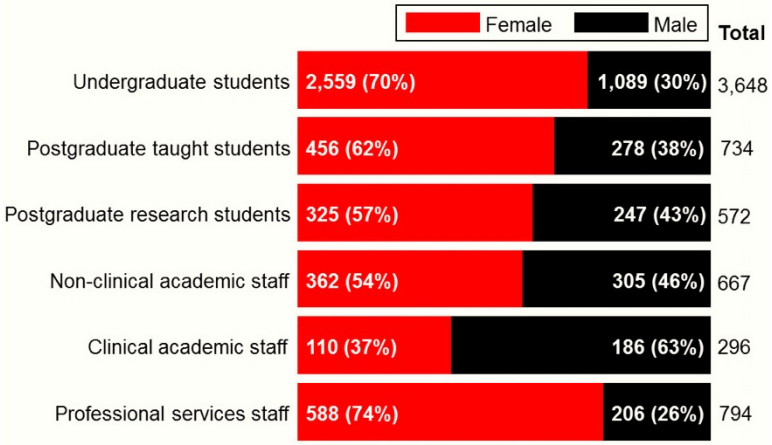


Figure 2.1 MDS staff and student headcounts (October 2019) by gender

Research-only staff make up 394 (234F 160M) of our non-clinical academics and 60 (25F 35M) of our clinical academics (**Section 4.2**). Technical staff make up 162 (104F 58M) of our professional services staff.

MDS collaborates with NHS partners to undertake research and train healthcare professionals and biomedical scientists. Our collaborative relationship is formalised through Birmingham Health Partners (BHP), an alliance with our major NHS partners (UHBT (University Hospitals Birmingham NHS Foundation Trust) and Birmingham Women's and Children's NHS Foundation Trust).

UoB was awarded Gold in the Teaching Excellence Framework in 2016 and 2019, and MDS programmes perform well in the National Student Survey (**Table 2.1**). We offer few Part Time (PT) courses; this is a national healthcare trend caused by external funding changes.

Table 2.1 National Student Survey scores for the five MDS UG subjects (2019)

	National ranking in Russell Group	Overall satisfaction (%)
Medicine	6th	93
Dentistry	7th	88
Nursing	5th	95
Pharmacy	5th	93
Biomedical Science	N/A	93

Table 2.2 Intersectionality of gender with other MDS UG student diversity characteristics (2019/20)

Diversity characteristic	Female (%)	Male (%)	Total	% of 2019/20 student numbers	Higher Education Statistics Agency 2017/2018 data - sector
BAME students	1,210 (68)	580 (32)	1,790	49%	37%
Disability	253 (75)	85 (25)	338	9%	Unavailable
International students[$]	141 (68)	66 (32)	207	6%	12%
Mature students (21 years+)	225 (70)	96 (30)	321	9%	28%
POLAR4 Quintile 1*	181 (69)	81 (31)	262	8%	8%**

*POLAR4 data for UK domiciled only. POLAR4 Quintile 1 represents the lowest undergraduate participation areas

**Data based on POLAR3 and not directly comparable with POLAR4

[$]International students defined as European Union and Overseas domiciled

Table 2.2 highlights the diversity of our student population, particularly with regards to race. Black, Asian, and Minority Ethnic (BAME) student numbers reflect the above average BAME population in Birmingham and the West Midlands (41% according to 2011 census data). We have a high local student recruitment rate due to our role as a large civic university and our aim to recruit more Widening Participation (WP) students (a group who tend to study close to home), and student feedback suggests that families from BAME backgrounds are more likely to encourage daughters to:

- live at home while studying (and therefore study nearby).
- study healthcare and life sciences

This means that we receive a high number of applications from female BAME students in the West Midlands (**Figure 2.2**). Putting this into context:

- From 2015-20, half of the students in Medicine, Dentistry, and Nursing were BAME, with higher numbers in Pharmacy (80%) and lower in Biomedical Sciences (40%).
- 15% of UG students came through WP programmes (2019) (Nursing 19%, Medicine & Dentistry 14%, Biomedical Sciences 8%, Pharmacy 3%), up from 7% (2015).
- 31% of our UG students have their parental home in the West Midlands (Nursing 52%, Pharmacy 43%, Dentistry 27%, Medicine & Biomedical Sciences 23% each). Overall, 70% of this group are female (Nursing 94%, Medicine 71%, Biomedical Sciences 62%, Dentistry 56%, Pharmacy 47%).

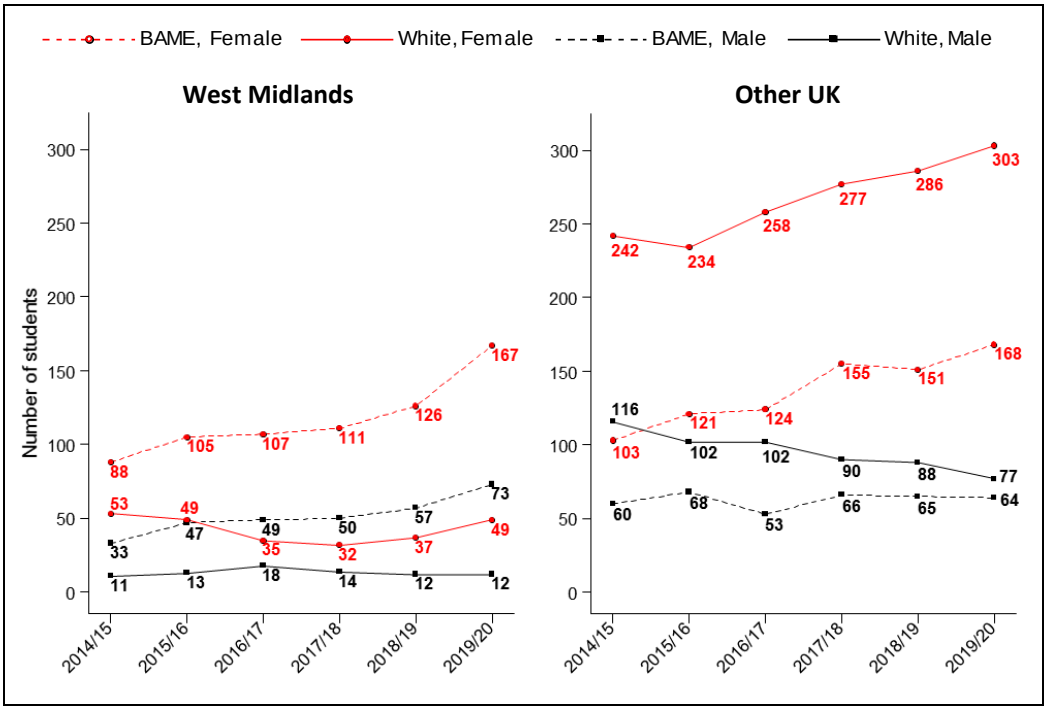


Figure 2.2 Numbers of MDS first year home UG students by race, gender, and region, showing the link between female BAME students and the West Midlands

In 2015, MDS restructured into eight institutes supported by our professional services team (**Figure 2.3**). The Institute of Clinical Sciences is home to five Schools delivering our UG programmes, each led by a Head of School.

Data	100%M in senior academic leadership positions in our previous structure
Action	Targeted encouragement for women to participate in the UoB Senior Leadership Programme and apply for senior positions in the newly formed institutes (**2015 AP**)
Impact	40%F Heads of School and 38%F Institute Directors (2020)

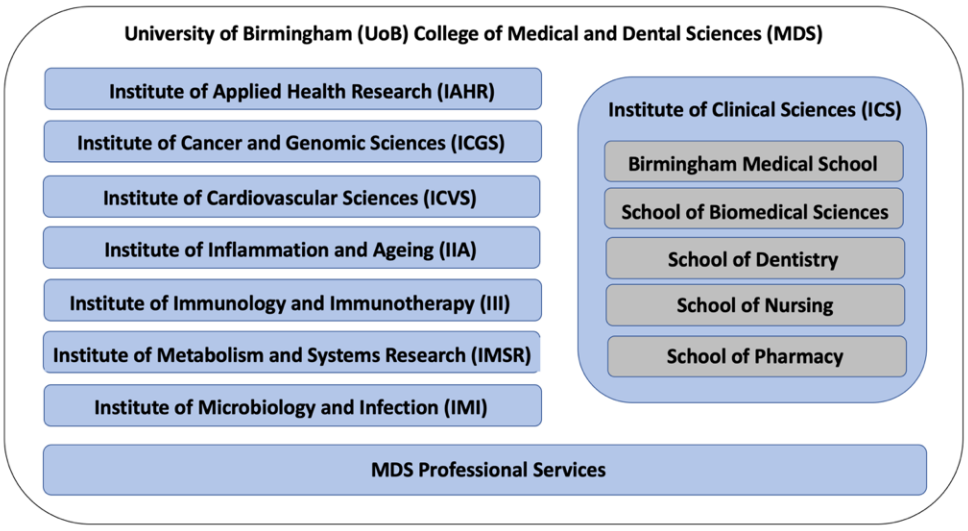


Figure 2.3 Structure of the College of MDS

MDS professional services are structured into Education; Administration; Infrastructure and Facilities; and Research & Knowledge Transfer (plus several Business Partners: Human Resources (HR), Finance, Planning, IT, Marketing, Alumni).

Our base is the Medical School, situated adjacent to UoB campus and in proximity to the Queen Elizabeth Hospital Birmingham and Birmingham Women's Hospital. The School of Dentistry is located within Birmingham Dental Hospital, 1km west of campus (**Figure 2.4**).

Figure 2.4 Aerial view of buildings of MDS, UoB campus and NHS partner hospitals.

525 words

3. THE SELF-ASSESSMENT PROCESS

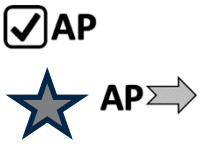
Recommended word count: Bronze: 1000 words | Silver: 1000 words

Describe the self-assessment process:

(i) a description of the self-assessment team

- Our SAT (**Figure 3.1**) represents 2% of our staff population alongside student representatives.
- The SAT is structured into an Oversight Group and three subgroups (**Table 3.1**). All subgroup leads are members of the Oversight Group (**Figure 3.2**).
- Staff SAT members are tasked with collecting and analysing data for specific sections of our application, while student members provide real-time feedback and data interpretation.
- The SAT was formed through an open call for new members, with some targeted invitations to ensure balanced representation.

Data	2015 SAT was 89%F 11%M
Action	Advertisements and targeted invitations to join the SAT with a focus on men (**2015 AP**)
Impact	2020 SAT is 64%F 36%M (still below staff gender ratio (60%F 40%M) – **2020 AP01**)



- SAT membership is recognised in academic workload allocation, agreed with line managers for professional services staff, and undertaken on a voluntary basis by students.

Figure 3.1 MDS Athena SWAN SAT

Figure 3.2 MDS Athena SWAN Oversight Group

- The SAT has diverse experiences including parent/caring responsibilities, different career/study stages, and job types.

Table 3.1 Membership of the MDS Athena SWAN SAT

Key: OE open ended; FTC fixed term contract; AC academic; PS professional services
FT full-time; PT part-time
UG undergraduate; PGT postgraduate taught; PGR postgraduate research
** = parent/carer/flexible worker*

Name (gender)	Job title and role	Contract type
Athena SWAN Oversight Group (including the Subgroup Leads)		
	Professor, Institute Director, College EDI Lead, **Chair of SAT**	OE, AC, FT
	Senior Lecturer, College Deputy EDI Lead	OE, AC, FT
	College Outreach, Equality and Diversity Officer	OE, PS, FT
	College Deputy Director of Operations (Administration)	OE, PS, FT
	College Head of Human Resources	OE, PS, FT
Subgroup for Advancing Women's Careers		
	Researcher Development Manager**, SAT Subgroup Lead**	OE, PS, FT
	Postdoctoral RF	FTC, AC, FT
	Royal Society Dorothy Hodgkin Fellow	FTC, AC, FT
	Reader	OE, AC, FT
	Senior Lecturer	OE, AC, FT
	Professor, Institute Director	OE, AC, PT
	Lecturer, Institute EDI Lead	OE, AC, FT
	Professor, Institute EDI Lead	OE, AC, FT
	Postdoctoral RF, Deputy Institute EDI Lead	FTC, AC, FT
	Senior Lecturer, PERCAT Director	OE, AC, FT
Subgroup for Organisational Culture and Communication		
	Clinical Lecturer, **SAT Subgroup Lead**	FTC, AC, FT
	Postdoctoral RF	FTC, AC, PT
	Senior Lecturer	OE, AC, FT
	Professor, Director of Birmingham Clinical Trials Unit	OE, AC, FT
	Institute Manager	OE, PS, FT
	Professor, College Director of Internationalisation	OE, AC, FT
	Professor	OE, AC, FT
Subgroup for Data and Student Experience		
	Professor, Institute EDI Lead, **SAT Subgroup Lead**	OE, AC, FT
	Senior HR Adviser	OE, PS, FT
	College Planning Partner	OE, PS, FT
	Programme Director (Nursing)	OE, AC, FT
	Senior Lecturer, Deputy Programme Director (Medicine)	OE, AC, FT
	Senior Lecturer, Programme Director (Biomedical Science)	OE, AC, FT
	Deputy Institute Manager	OE, PS, PT
	Birmingham Fellow	OE, AC, FT
	UG student (Pharmacy)	FT
	PGR student (PhD)	FT
	PGR student (PhD)	FT
	PGR student (PhD)	FT
	PGT student (Physician Associate)	FT
	PGR student (PhD)	FT
	UG student (Medicine)	FT
	UG student (Nursing)	FT
	PGR student (PhD)	FT

(ii) an account of the self-assessment process

- The current SAT was established in 2018. It is responsible for running surveys and focus groups, analysing quantitative and qualitative data, overseeing progress against the action plan, and assessing impact.
- The Oversight Group meets bimonthly; the SAT and subgroups meet termly.
- The SAT and its subgroups communicate between meetings via email.
- Meetings involve analysing data (e.g. staff/student numbers, promotions and attainment, survey results), comparing these to earlier data, and reviewing our action plan (and other actions to advance gender equality) to identify impact.
- The SAT communicates its work through weekly MDS newsletters, all-staff emails, Twitter @MDSEquality, presentations at staff fora and College-wide events (**2018 AP01**), and open dialogue at team meetings.
- The SAT have consulted with staff and students (**Table 3.2**) to assess progress against the action plan.

Data	335 staff completed the 2018 College EDI staff survey (62%F 28%M)
Action	Improved EDI communications infrastructure (**2018 AP03**)
Impact	130% increase in respondents to 2020 College EDI staff survey and increased male engagement (34%M)

Table 3.2 Surveys used by the SAT with participant numbers by gender

Survey	F	M	Nonbinary / prefer not to say	Total responses
College EDI staff survey (2018)	62%	28%	10%	335
College EDI staff survey (2020)	58%	34%	8%	778
College academic promotions survey (2019)	47%	41%	12%	17
College academic promotions survey (2020)	53%	43%	3%	30
College induction interviews (2019)	80%	20%	0%	10
PERCAT survey (2018)	N/A	N/A	N/A	78
PERCAT COVID-19 survey (2020)	63%	35%	2%	299
Careers in Research Online Survey (2017)	67%	33%	0%	113
Careers in Research Online Survey (2019)	68%	32%	0%	91
Fellowship and Grants Academy pilot mentoring survey	77%	23%	0%	13

- Student consultation has primarily been through student SAT members.
- The SAT reports to College Board (the most senior MDS committee led by the Head of College) and the SAT Chair is a College Board member to ensure accountability (**Figure 3.3**). The SAT also reports to the University SAT to streamline our approach to equality and share/receive best practice.
- College Board receives quarterly reports, and Athena SWAN is a standing agenda item at biweekly College Board meetings to enable timely feedback and senior support for the implementation of actions.
- The SAT work, engage, and consult with various internal and external partners:
    - HR and Student Services EDI Officers
    - UHBT EDI representatives
    - Professor Rob de Bruin from the Gold Athena SWAN department MRC Laboratory for Molecular Cell Biology, University College London
    - Medical Schools Council UK EDI/Athena SWAN Network
    - University of Amsterdam Medical School
    - University of Nottingham School of Medicine

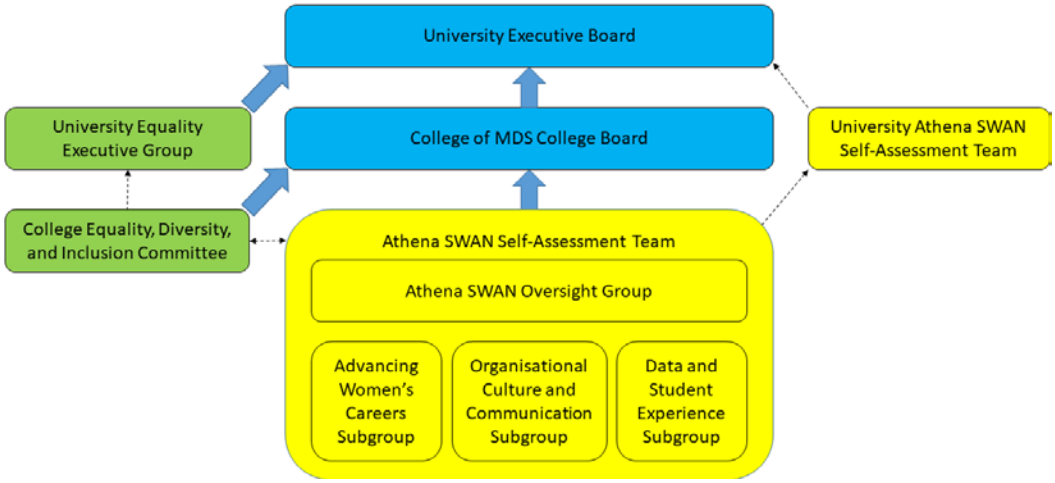


Figure 3.3 Athena SWAN reporting structure in MDS (thicker arrows represent formal reporting relationships)

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

- The Oversight Group will continue to meet bimonthly; each subgroup will meet termly; and the entire SAT will meet termly.
- The SAT will monitor progress against the action plan and carry out annual staff and student data analysis to assess impact.
- Following the publication of the Advance HE Athena SWAN review, we will align our work and action plan to meet the new framework and use the opportunity to engage even more staff and students with the Athena SWAN principles through our communication channels.
- SAT members will engage in open dialogue with their departments and student peer-groups as well as providing updates at team meetings.
- Biennial staff surveys will be undertaken and used with other surveys to assess progress and impact while identifying new areas of activity to be explored and developed through staff and student focus groups.
- The Oversight Group will report progress to College Board on a quarterly basis and ensure accountability where further action is required, including embedding responsibility for Athena SWAN actions in role descriptions.
- The SAT operates under Terms of Reference which facilitate succession planning by ensuring that membership is recorded and diversity maintained.
- In addition to natural turnover, the Oversight Group will annually review membership to ensure all staff and student groups remain represented.
- New members will be given an induction, handover, and choice of subgroup. They will be able to move between subgroups to aid personal development and encourage objectivity.

708 words

Actions	
2020 AP01	**Data and governance**
Target men to join the SAT	

4. A PICTURE OF THE DEPARTMENT

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

4.1 STUDENT DATA

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

All levels of study are female-dominated. MDS has focussed on improving male participation through challenging stereotypes and using diverse imagery and role models. Future plans include increasing targeted outreach to male school students.

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

N/A

(ii) Numbers of undergraduate students by gender

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

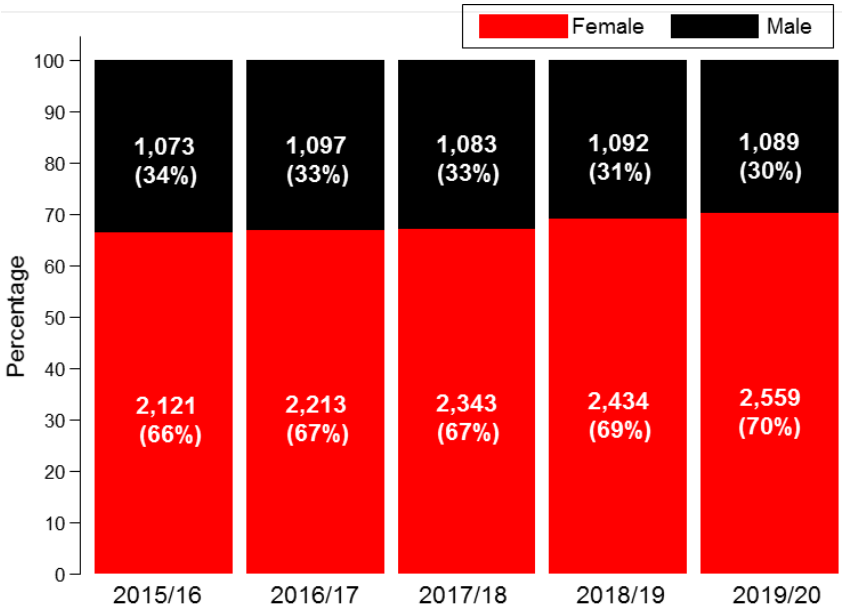


Figure 4.1.1 MDS undergraduate (UG) student numbers over the last 5 years

- UG student numbers have grown by 14% from 3,194 (66%F 34%M) in 2015/16 to 3,648 (70%F 30%M) in 2019/20 (**Figure 4.1.1**).
- MDS has five UG subjects (Biomedical Sciences, Dentistry, Medicine, Nursing, and Pharmacy), all Full Time (FT), as well as nine intercalating programmes for medical and dental students.
- Student numbers are shown in **Table 4.1.1** followed by subject-level numbers of applications, offers, and acceptances in **Tables 4.1.2-4.1.6**.
- The SAT have used Advance HE Student Statistical Report 2019 benchmarks (noting that these use a combination of subjects).

Table 4.1.1 Student numbers for the five MDS UG subject areas

		2015/16	2016/17	2017/18	2018/19	2019/20	Benchmark
Biomedical Sciences	**F**	239	269	351	388	429	
	M	126	134	135	135	133	
	Total	365	403	486	523	562	
	%F	**66**	**67**	**72**	**74**	**76**	**64[$]**
	%M	**34**	**33**	**28**	**26**	**24**	**36[$]**
Dentistry	**F**	271	260	249	257	253	
	M	154	159	154	155	161	
	Total	425	419	403	412	414	
	%F	**64**	**62**	**62**	**62**	**61**	**57***
	%M	**36**	**38**	**38**	**38**	**39**	**43***
Medicine	**F**	1,125	1,101	1,148	1,168	1,191	
	M	671	661	667	686	657	
	Total	1,796	1,762	1,815	1,854	1,848	
	%F	**63**	**63**	**63**	**63**	**64**	**57***
	%M	**37**	**37**	**37**	**37**	**36**	**43***
Nursing	**F**	304	349	384	397	430	
	M	9	18	18	17	22	
	Total	313	367	402	414	452	
	%F	**97**	**95**	**95**	**96**	**95**	**80****
	%M	**3**	**5**	**5**	**4**	**5**	**20****
Pharmacy	**F**	127	170	164	165	199	
	M	68	81	75	71	80	
	Total	195	251	239	236	279	
	%F	**65**	**68**	**69**	**70**	**71**	**80****
	%M	**35**	**32**	**31**	**30**	**29**	**20****
Intercalating students	**F**	55	64	47	59	57	
	M	45	44	34	28	36	
	Total	100	108	81	87	93	
	%F	**55**	**59**	**58**	**68**	**61**	N/A
	%M	**45**	**41**	**42**	**32**	**39**	N/A
Total	**F**	2,121	2,213	2,343	2434	2,559	
	M	1,073	1,097	1,083	1092	1,089	
	Total	3,194	3,310	3,426	3526	3,648	
	%F	**66**	**67**	**68**	**69**	**70**	N/A
	%M	**34**	**33**	**32**	**31**	**30**	N/A

**Data from medicine and dentistry category, no medicine or dentistry-specific data available.*

***Data from subjects allied to medicine category, no nursing or pharmacy-specific data available.*

[$]Data from biological sciences category, no biomedical sciences-specific data available

- These data show:
    - Medicine (63-64%F) and Dentistry (61-64%F) are both female-dominated above benchmark, with some progress towards benchmark in dentistry.
    - Nursing (95-97%) remains female-dominated. Only 11% of nurses on the Nursing and Midwifery Council Register (03/20) identify as male, and there was a decline in UG applications from mature men following the removal of NHS bursaries in 2017.
    - Pharmacy is below benchmark but increasingly female-dominated (65%F in 2015/16 to 71%F in 2019/20).
    - The proportion of women amongst intercalating students has increased (55%F in 2015/16 to 61%F in 2019/20) to better reflect medical/dental student gender ratios (**2020 AP46**).

AP

Table 4.1.2 Biomedical Sciences applications, offers, and acceptances by gender

Biomedical Sciences	15/16		16/17		17/18		18/19		19/20	
	F	M	F	M	F	M	F	M	F	M
Applications	684	418	915	475	1,117	521	1,220	469	1,272	523
Offers	544	346	747	381	961	427	1,062	382	1,087	423
Acceptances	154	85	180	85	241	99	254	81	258	78
% Applications to offers	80%	83%	82%	80%	86%	82%	87%	81%	86%	81%
% Offers to acceptances	28%	25%	24%	22%	25%	23%	24%	21%	24%	18%
% Applications to acceptances	23%	20%	20%	18%	22%	19%	21%	17%	20%	15%

Table 4.1.3 Dentistry applications, offers, and acceptances by gender

Dentistry	15/16		16/17		17/18		18/19		19/20	
	F	M	F	M	F	M	F	M	F	M
Applications	463	273	354	210	396	253	455	234	457	271
Offers	147	81	183	95	172	101	174	75	201	87
Acceptances	67	46	88	50	72	47	95	48	91	47
% Applications to offers	32%	30%	52%	45%	43%	40%	38%	32%	44%	32%
% Offers to acceptances	46%	57%	48%	53%	42%	47%	55%	64%	45%	54%
% Applications to acceptances	14%	17%	25%	24%	18%	19%	21%	21%	20%	17%

Table 4.1.4 Medicine applications, offers, and acceptances by gender

Medicine	15/16		16/17		17/18		18/19		19/20	
	F	M	F	M	F	M	F	M	F	M
Applications	2,436	1,533	1,588	998	1,967	1,224	2,134	1,252	1,942	1,126
Offers	465	272	505	303	559	312	657	331	686	305
Acceptances	292	179	304	206	333	184	350	190	341	175
% Applications to offers	19%	18%	32%	30%	28%	26%	31%	26%	35%	27%
% Offers to acceptances	63%	66%	60%	68%	60%	59%	53%	57%	50%	57%
% Applications to acceptances	12%	12%	19%	21%	17%	15%	16%	15%	18%	16%

Table 4.1.5 Nursing applications, offers, and acceptances by gender

Nursing	15/16		16/17		17/18		18/19		19/20	
	F	M	F	M	F	M	F	M	F	M
Applications	1,862	191	2,124	223	1,538	138	1,356	126	1,389	134
Offers	275	15	317	22	349	17	380	20	441	24
Acceptances	148	4	172	12	171	8	180	5	217	9
% Applications to offers	15%	8%	15%	10%	23%	12%	28%	16%	32%	18%
% Offers to acceptances	54%	27%	54%	55%	49%	47%	47%	25%	49%	38%
% Applications to acceptances	8%	2%	8%	5%	11%	6%	13%	4%	16%	7%

Table 4.1.6 Pharmacy applications, offers, and acceptances by gender

Pharmacy	15/16		16/17		17/18		18/19		19/20	
	F	M	F	M	F	M	F	M	F	M
Applications	481	294	583	291	599	323	662	306	735	362
Offers	342	187	398	187	470	228	557	226	595	270
Acceptances	64	36	84	40	72	28	87	34	113	55
% Applications to offers	71%	64%	68%	64%	79%	71%	84%	74%	81%	75%
% Offers to acceptances	19%	19%	21%	21%	15%	12%	16%	15%	19%	20%
% Applications to acceptances	13%	12%	14%	14%	12%	9%	13%	11%	15%	15%

- MDS has more female applicants and students for all UG programmes (**2020 AP11**). AP
- The main reason for the imbalance is high numbers of female applicants due to: AP
    - Our West Midlands location and commitment to WP (**Section 2**) (**2020 AP45**).
    - National trends for increased female applications to healthcare and life sciences.
    - Women performing better at GCSE and A-Level; as entry requirements for our programmes are higher than average, more men may be deterred from submitting an application due to predicted grades.
- Female students perform better in interviews (the final stage of the admissions process for Medicine, Dentistry, and Nursing), leading to higher proportions of offers to women.

Data	Men were underrepresented in Dentistry and Nursing in 2015 (64%F 36%M and 97%F 3%M respectively). Men had a lower application-to-offer percentage in Biomedical Sciences in 2018 (87%F 81%M)
Action	Pilot outreach activities targeted at men (2019) (**Section 5.6**) and improved gender balance at Open Days and in promotional materials (2018) (**2018 AP06**).
Impact	Dentistry is closer to benchmark in 2019 (61%F 39%M). Nursing is bucking the decreasing national trend for recruiting male nursing students and is closer to benchmark in 2019 (95F 5%M). Early 20/21 data for Biomedical Sciences suggests an application- to-offer rise to 86% for male applicants.

AP

- To encourage male student engagement with traditionally female-dominated subjects, MDS has:
    - Stopped using the UoB Unconditional Offer Scheme (2019) which favoured women due to reliance on GCSE results. (By 2017 it accounted for half the intake to Biomedical Science, with a steep rise in female applications while male applications remained static.)
    - Introduced the University Clinical Aptitude Test to Medicine admissions (2015) and increased the weighting of this test from 30% to 40% (2018). MDS research in 2016 showed that men perform better in this test (balancing GCSEs where women perform better) (**2020 AP12, AP13**). AP
    - Required all interviewers to complete EDI and Unconscious Bias training and required interview panels to be gender-balanced (2017).
    - Established an outreach feedback mechanism to better understand the long-term student pipeline (2019).
    - Updated Biomedical Science Offer Holder Day feedback forms to enable male/female feedback to be disaggregated (2020) (**2020 AP02**). AP
    - Encouraged male students to act as student ambassadors, and invited male alumni (to avoid overloading underrepresented male students).
- New actions will be implemented carefully to minimise any unwanted impact on numbers of BAME and POLAR 4 Quintile 1 students.
- Details on gender-specific student degree attainment for UG courses are summarised in **Tables 4.1.7-4.11.**

Table 4.1.7 Biomedical Sciences degree attainment by gender

Biomedical Sciences		14/15		15/16		16/17		17/18		18/19	
		F	M	F	M	F	M	F	M	F	M
Total	#	43	28	66	27	60	39	97	42	95	40
	#	10	4	17	9	13	7	23	8	18	6
1st	%	23%	14%	26%	33%	22%	18%	24%	19%	19%	15%
	#	28	20	41	16	40	26	61	26	68	26
2:1	%	65%	71%	62%	59%	67%	67%	63%	62%	72%	65%
	#	5	3	8	2	7	6	12	7	9	6
2:2	%	12%	11%	12%	7%	12%	15%	12%	17%	9%	15%
	#	0	1	0	0	0	0	1	1	0	2
3rd/Pass	%	0%	4%	0%	0%	0%	0%	1%	2%	0%	5%

Table 4.1.8 Dentistry degree attainment by gender

Dentistry		14/15		15/16		16/17		17/18		18/19	
		F	M	F	M	F	M	F	M	F	M
Total	#	50	14	56	18	46	32	44	24	44	19
	#	5	0	2	1	8	3	2	2	3	0
Honours & distinction	%	10%	0%	4%	6%	17%	9%	5%	8%	7%	0%
	#	2	1	1	0	1	0	2	0	0	0
Distinction	%	4%	7%	2%	0%	2%	0%	5%	0%	0%	0%
	#	7	1	1	0	3	3	4	2	4	1
Honours	%	14%	7%	2%	0%	7%	9%	9%	8%	9%	5%

Table 4.1.9 Medicine degree attainment by gender

Medicine		14/15		15/16		16/17		17/18		18/19	
		F	M	F	M	F	M	F	M	F	M
Total	#	241	131	225	133	214	131	226	142	239	142
	#	31	11	23	12	19	25	35	23	30	18
Distinction	%	13%	8%	10%	9%	9%	19%	15%	16%	13%	13%
	#	44	15	30	21	37	24	25	15	28	15
Honours	%	18%	11%	13%	16%	17%	18%	11%	11%	12%	11%

Table 4.1.10 Nursing degree attainment by gender

Nursing		14/15		15/16		16/17		17/18		18/19	
		F	M	F	M	F	M	F	M	F	M
Total	#	85	1	79	1	84	3	101	3	120	3
	#	18	0	16	0	15	0	46	1	48	3
1st	%	21%	0%	20%	0%	18%	0%	46%	33%	40%	100%
	#	34	1	31	0	46	1	28	0	42	0
2:1	%	40%	100%	39%	0%	55%	33%	28%	0%	35%	0%
	#	25	0	24	1	19	2	16	2	24	0
2:2	%	29%	0%	30%	100%	23%	67%	16%	67%	20%	0%
	#	8	0	8	0	4	0	11	0	6	0
3rd/Pass	%	9%	0%	10%	0%	5%	0%	11%	0%	5%	0%

Table 4.1.11 Pharmacy degree attainment*

Pharmacy		16/17		17/18		18/19	
		F	M	F	M	F	M
Total	#	36	24	45	17	40	20
	#	17	15	15	4	29	6
1st	%	47%	63%	33%	24%	73%	30%
	#	19	9	28	11	11	12
2:1	%	53%	38%	62%	65%	28%	60%
	#	0	0	2	2	0	2
2:2	%	0%	0%	4%	12%	0%	10%
	#	0	0	0	0	0	0
3rd/Pass	%	0%	0%	0%	0%	0%	0%

**only 3 years available due to date course was introduced*

- Female students attain higher across all UG programmes. This is partly explained by their higher average grades on entry.
- To mitigate this, early interventions were introduced for students with poor engagement or who need additional academic support:
  - Biomedical Science introduced attendance monitoring (2016), with students achieving <70% attendance meeting with their Head of Year and being directed to academic and/or wellbeing support. More male than female first year students were classed as poor attenders (19%F 27%M).
  - Any first year Biomedical Science student achieving less than 40% in a semester 1 assessment is contacted and offered advice/additional support (2016). Men receive proportionally more of these targeted interventions (33%M in 2019/20 compared to a 24%M cohort) (**2020 AP14**). AP
  - Following this pilot, Nursing introduced a similar initiative in 2019/20 where all students with <50% performance scores are required to attend a one-day study skills workshop. Nursing also increased the number of formative assessments, to identify students who need additional support prior to submission deadlines.

Data	21% of Biomedical Science students (27% of men) resat end-of-year exams in 2015/16
Action	Attendance monitoring and targeted interventions introduced (**2015 AP**)
Impact	14% of Biomedical Science students (20% of men) resat end-of-year exams in 2016/17 Male Biomedical Science students complete first year with the same average mark as female students despite having average one A-level grade lower

☑AP

"I wanted to say thank you for meeting with me a few weeks ago, for keeping in contact, it feels a lot better knowing someone was (and still is) keeping an eye on me."
Male student, 2016

- UoB's move to a semesterisation model, including biannual examination periods preceded by new assessment preparation weeks, is expected to have a further impact on reducing gender attainment gaps (**2020 AP15**). AP
- Annual reviews of UG student numbers and attainment will be operationalised to identify arising gender (and other) imbalances (**2020 AP03, AP04**). AP

(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.

- PGT enrolment occurs at different times of the year, so student numbers are presented from 2014/15 to 2018/19 for completeness.
- In 2018/19, MDS had 734 students (62%F 38%M) on 23 PGT programmes, including 397 (59%F 41%M) PT students.
- The SAT have used HESA 2019 benchmarks ("subjects allied to medicine" category). This suggests that MDS is consistently above benchmark for proportions of male students (both FT and PT).
- MDS PGT programmes are mainly designed to enhance the professional development of healthcare practitioners, so most students are mature students.
- There is little bridging from UG to PGT programmes as the majority (93%F 92%M over five years) of UG students go straight into professional roles associated with their degree.
- Biomedical Science put on roadshows and invite graduates to PGT Open Days.

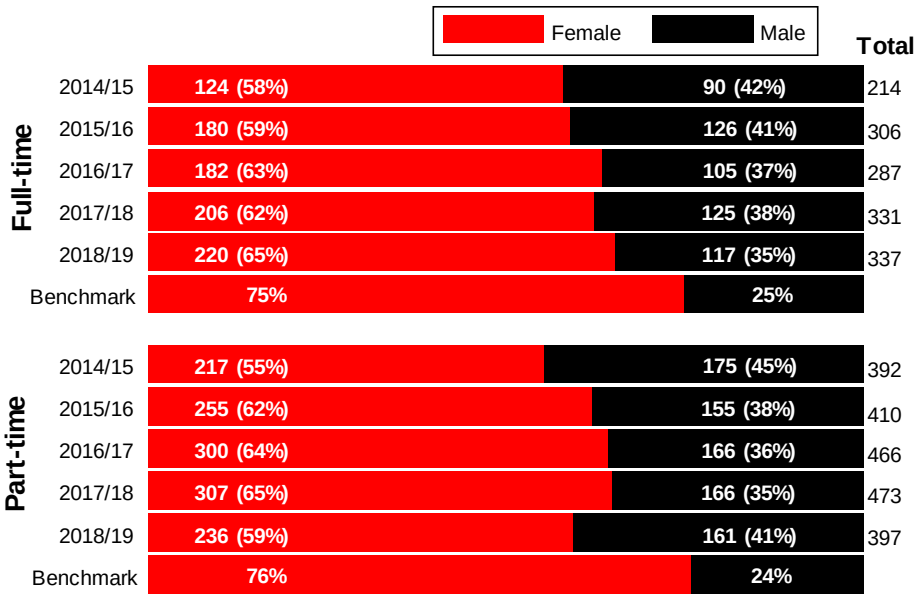


Figure 4.1.2 MDS PGT student numbers over the 5-year period 2014/15 to 2018/19

- The PGT gender imbalance has grown (**Figure 4.1.2**) due to slower growth in applications from men compared to women (**Table 4.1.12**) (**2020 AP17**). AP
  - MDS PGT programmes appeal to people in female-dominated professions including Public Health and Nursing. (Of the 734 students in 2018/19, Public Health, Nursing, and Physician Associate programmes account for 274 (37%) students of which 200 (73%) are female.)
  - There is less financial impetus for men to undertake a master's degree; male graduates without a masters already earn an average of £38,500 whereas women with a masters earn a median pay of £37,000 (Department for Education 2019 graduate labour market statistics).
- There are no consistent gender differences in proportions receiving or accepting offers.
- For both FT and PT, women outperform men in receiving merits (**Table 4.1.13**). Since 2016, proportionally more men achieve distinctions, though the performance of FT students was similar for women and men in 2018/19.

Table 4.1.12 MDS PGT applications, offers, and acceptances by gender

	2014/15		2015/16		2016/17		2017/18		2018/19	
	F	M	F	M	F	M	F	M	F	M
Applications	521	376	714	566	782	529	697	448	795	472
Offers	258	195	432	336	433	272	468	297	459	293
Acceptances	124	85	127	97	111	66	154	89	153	79
% Applications to offers	**50 %**	**52 %**	**61 %**	**59 %**	**55 %**	**51 %**	**67 %**	**66 %**	**58 %**	**62 %**
% Offers to acceptances	**48 %**	**44 %**	**29 %**	**29 %**	**26 %**	**24 %**	**33 %**	**30 %**	**33 %**	**27 %**
% Applications to acceptances	**24 %**	**23 %**	**18 %**	**17 %**	**14 %**	**12 %**	**22 %**	**20 %**	**19 %**	**17 %**

Table 4.1.13 MDS PGT degree attainment by gender and FT/PT

Classification	2014/15		2015/16		2016/17		2017/18		2018/19	
	F	M	F	M	F	M	F	M	F	M
FT										
Distinctions	10	5	19	13	15	13	25	21	25	15
Merit	28	14	43	25	53	21	51	18	40	23
Pass	23	26	22	30	40	16	24	27	37	22
Total	61	45	84	68	108	50	100	66	102	60
% Distinctions	**16%**	**11%**	**23%**	**19%**	**14%**	**26%**	**25%**	**32%**	**25%**	**25%**
% Merit	**46%**	**31%**	**51%**	**37%**	**49%**	**42%**	**51%**	**27%**	**39%**	**38%**
% Pass	**38%**	**58%**	**26%**	**44%**	**37%**	**32%**	**24%**	**41%**	**36%**	**37%**
PT										
Distinctions	12	6	13	12	15	14	20	16	27	18
Merit	29	22	33	20	29	22	57	26	38	16
Pass	26	41	26	28	35	25	53	28	36	28
Total	67	69	72	60	79	61	130	70	101	62
% Distinctions	**18%**	**9%**	**18%**	**20%**	**19%**	**23%**	**15%**	**23%**	**27%**	**29%**
% Merit	**43%**	**32%**	**46%**	**33%**	**37%**	**36%**	**44%**	**37%**	**38%**	**26%**
% Pass	**39%**	**59%**	**36%**	**47%**	**44%**	**41%**	**41%**	**40%**	**36%**	**45%**

(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.

- There is little bridging from our UG to PGR programmes as the majority of UG students go straight into NHS employment.
- There are four main pathways into PGR training at MDS:
  - Non-clinical candidates apply for a place on dedicated, externally funded PhD programmes or integrated MRes degrees.
  - Clinically qualified candidates are recruited from the Integrated Clinical Academic Training (ICAT) pathway (**Section 4.2**) into MRes, MD, and PhD degree. Through the BHP starter fellowship programme, MDS also helps non-ICAT clinicians to apply for Academic Clinical Research Fellowships.
  - International PGR students come fully funded by their government.
  - PT PhDs are offered to MDS employees, mainly taken by technicians and clinical fellows employed through project grant funding.

- The gender balance of FT PGRs has been consistently close to parity over the past five years (**Figure 4.1.3**) throughout a period of net expansion.
- The number of FT PGR students rose by 49% from 312 in 2014/15 to 466 in 2018/19 while the number of PT students dropped by 25% from 142 to 106.
- The proportion of female PT PGRs has increased (58% in 2014/15 to 70% in 2018/19) due to a decrease in the number of male PT PGRs caused by changed regulations for our PT MD option, increasing study time from 2 to 4 years, which made it less attractive as an application route. (Most female PT PGRs are MDS technicians.)
- Women are around 10% more likely to receive an offer than men (**Table 4.1.14**). Completion rates are high and in line with application numbers by gender (**Table 4.1.15**).

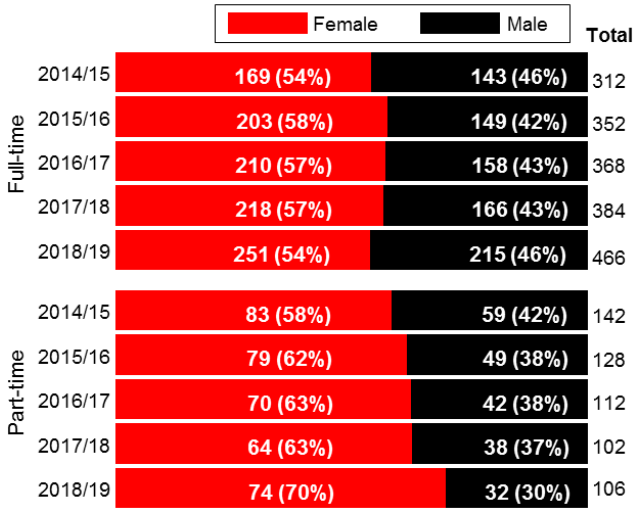


Figure 4.1.3 MDS PGR student numbers by gender and FT/PT

Table 4.1.14 MDS PGR student applications, offers, and acceptance by gender

	2014/15		2015/16		2016/17		2017/18		2018/19	
	F	M	F	M	F	M	F	M	F	M
Applications	282	251	289	254	252	209	248	223	351	304
Offers	128	87	148	98	140	95	147	111	185	130
Acceptances	94	60	125	76	100	58	99	84	132	96
% Applications to offers	**45%**	**35%**	**51%**	**39%**	**56%**	**45%**	**59%**	**50%**	**53%**	**43%**
% Offers to acceptances	**73%**	**69%**	**84%**	**78%**	**71%**	**61%**	**67%**	**76%**	**71%**	**74%**
% Applications to acceptances	**33%**	**24%**	**43%**	**30%**	**40%**	**28%**	**40%**	**38%**	**38%**	**32%**

Table 4.1.15 MDS PGR completion rates* by gender and FT/PT

	2010/11		2011/12		2012/13		2013/14		2014/15	
	F	M	F	M	F	M	F	M	F	M
FT										
Completion	40	16	51	38	52	44	43	40	52	39
Non-completion/ still studying	5	3	3	9	4	4	8	4	15	8
Total	45	19	54	47	56	48	51	44	67	47
% Completion	**89%**	**84%**	**94%**	**81%**	**93%**	**92%**	**84%**	**91%**	**78%**	**83%**
% Non-completion /still studying	**11%**	**16%**	**6%**	**19%**	**7%**	**8%**	**16%**	**9%**	**22%**	**17%**
PT										
Completion	9	12	25	18	14	12	14	16	14	6
Non-completion/ still studying	9	2	5	11	10	6	3	6	10	12
Total	18	14	30	29	24	18	17	22	24	18
% Completion	**50%**	**86%**	**84%**	**62%**	**58%**	**67%**	**82%**	**73%**	**58%**	**33%**
% Non-completion /still studying	**50%**	**14%**	**17%**	**38%**	**42%**	**33%**	**18%**	**27%**	**42%**	**67%**

**Dates are cohort start dates, e.g. students who started in 2014/15 would not be expected to complete until at least 18/19 based on 4 years full-time.*

(v) Progression pipeline between undergraduate and postgraduate student levels

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

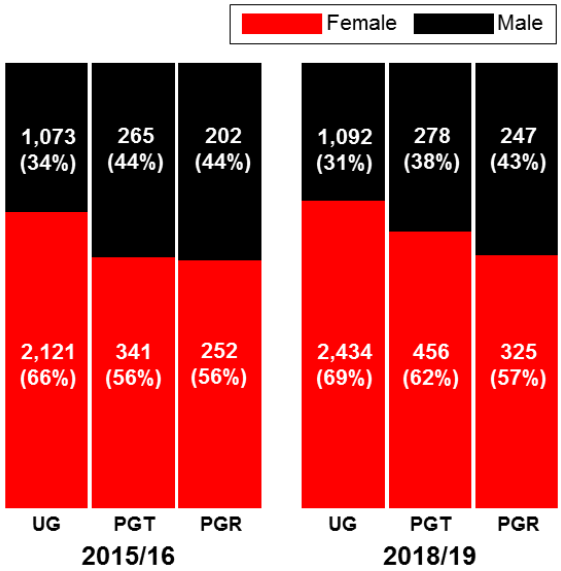


Figure 4.1.4 MDS UG, PGT, and PGR student numbers in 2015/16 and 2018/19

- Most UG students (excluding Biomedical Science students) are studying vocational healthcare courses, so they go into employment rather than PG study (**Table 4.1.16**). Most PGT students are healthcare professionals undertaking development opportunities. As such, the student pipeline is driven by NHS gender ratios (**Figure 4.1.4**).
- MDS encourages further study through Careers Network (**Table 4.1.17**) and medical/dental students' experiences of academic intercalation programmes (**Section 5.3**). Female engagement has increased mainly due to increasing numbers of female Biomedical Science students (**2020 AP18**). AP

Table 4.1.16 Graduate destinations for Biomedical Science compared to other MDS UG programmes*

	2014/15		2015/16		2016/17	
	F	M	F	M	F	M
Biomedical Science						
% Graduate employment	38	22	24	26	29	20
% Further study	35	50	62	61	52	70
Other MDS UG programmes						
% Graduate employment	94	91	84	92	84	93
% Further study	1	3	1	3	<1	0

**based on DLHE survey responses – most recent data available is 2016/17*

Table 4.1.17 Total engagement with Careers Network by Biomedical Science students

Academic Year		Engagement with careers service	
		F	M
2015-16	**#**	64	29
	%	69%	31%
2016-17	**#**	206	75
	%	73%	27%
2017-18	**#**	332	112
	%	75%	25%
2018-19	**#**	442	117
	%	79%	21%
2019-20	**#**	394	91
	%	81%	19%

"Staff evidently work really hard for students and care about our success and progression. Some members of staff go the extra mile in providing resources and advice."
Female student, 2019

Actions

2020 AP02 **Data and governance**

Roll out collection of gender information on Offer Holder Day feedback forms following pilot in Biomedical Science in order to enable disaggregation of male/female feedback and improve understanding of prospective male student's priorities and decision making processes

2020 AP03 **Data and governance**

Operationalise review of gender balance as part of annual admissions cycle review (to be considered intersectionally with other characteristics) so that any biases in processes can be identified and mitigated as early as possible

2020 AP04 **Data and governance**

Operationalise formal reporting of attainment by gender as part of Annual Review processes for each programme (with actions if required to mitigate any identified biases) and roll out any pilot initiatives having a positive effect

2020 AP11 **Student pipeline**

Develop and operationalise annual outreach activities targeted at male students (building on the success of "Healthcare Heroes")

2020 AP12 **Student pipeline**

Increase the weighting of UCAT (compared to GCSE) for Medicine admissions to enable more successful male applications

2020 AP13 **Student pipeline**

Use UCAT score earlier in Dentistry admissions processes (so that it forms part of the interview decision) to enable more successful male applications

2020 AP14 **Student pipeline**

All UG programmes to introduce targeted interventions for students identified as struggling academically after first Year 1 assessments (following successful pilots in Biomedical Science and Nursing) to reduce gender attainment gaps

2020 AP15 **Student pipeline**

All UG programmes to move to semesterisation model, including biannual examination periods preceded by assessment preparation weeks, to reduce gender attainment gaps

2020 AP16 **Student pipeline**

Require all Biomedical Science students to have contact with Careers Network, and encourage engagement (via personal tutors) with relevant events

2020 AP17 **Student pipeline**

Utilise NHS partnerships to influence increased PGT applications from male healthcare professionals, and promote male role models who are studying/have completed an MDS PGT degree to clinical academics and NHS colleagues

2020 AP45 **Intersectionality**

Work with the African Caribbean Medical Society, Birmingham Widening Access to Medical Sciences society, and the UHBT BAME Staff Network to provide BAME male role models as part of our outreach activities

2020 AP46 **Intersectionality**

Encourage more BAME medical and dental students to undertake summer studentships and intercalated degrees through targeted invitations, with a focus on women

4.2 ACADEMIC AND RESEARCH STAFF DATA

Women are overrepresented in non-clinical staff and underrepresented in clinical staff. Both of these groups have pipeline issues between Lecturer and SL which MDS has tried to address by introducing inclusive recruitment and promotion processes. Our key aims are to increase the proportions of senior and clinical female academics.

(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.

- The number of academic staff has grown by 11% since 2015 (**Figure 4.2.1**) but remained near gender balance (with similar growth in female and male non-clinical staff but a higher increase in male clinical staff (**Figure 4.2.2**)).

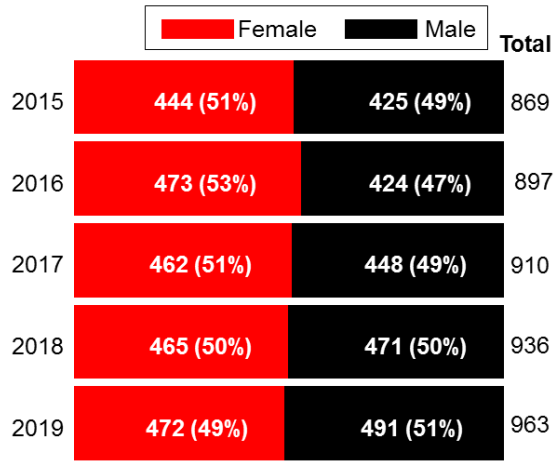


Figure 4.2.1 MDS academic staff by gender

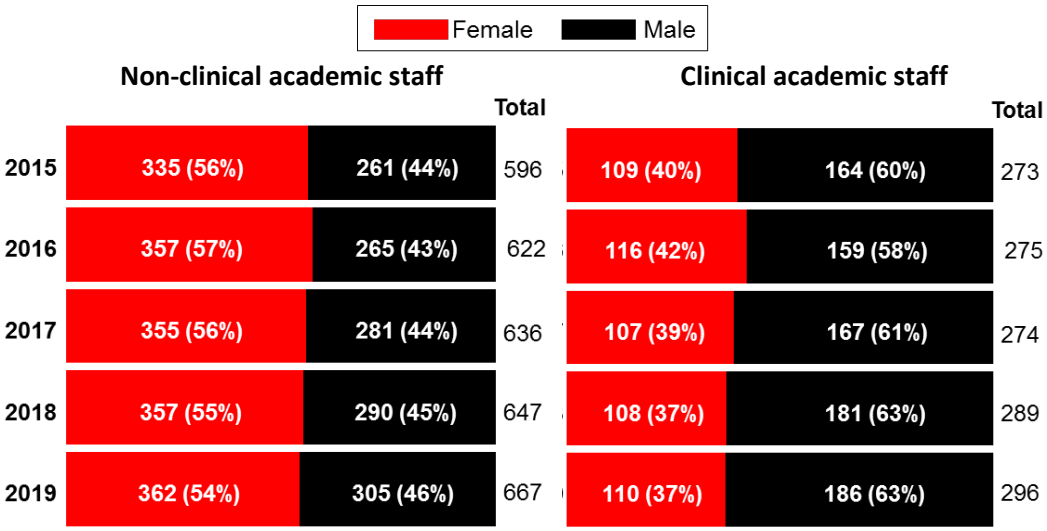


Figure 4.2.2 MDS academic staff by gender and non-clinical/clinical

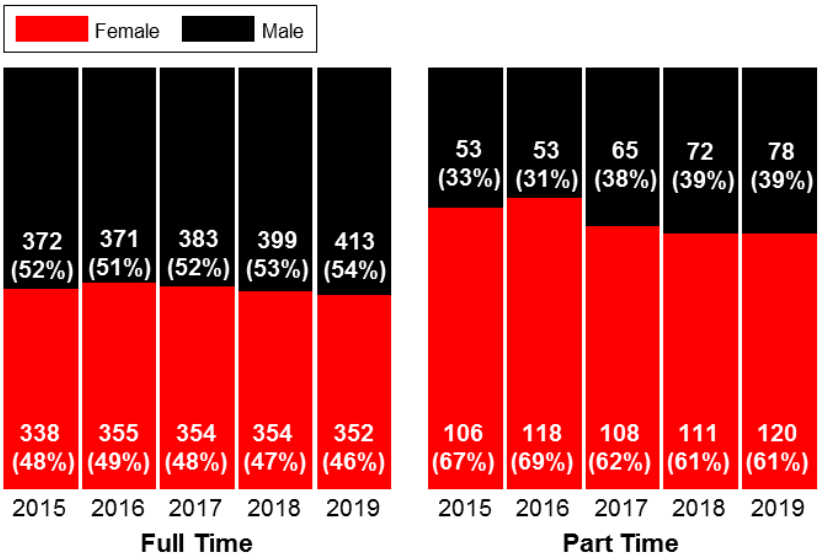


Figure 4.2.3 MDS academic staff by gender and FT/PT

Data	Fewer men worked PT in 2015 (67%F 33%M) (**Figure 4.2.3**)
Action	Improved promotion of PT and flexible working (**Section 5.5**) **(2015 AP)**
Impact	Increase in male PT staff (39%M in 2019)

AP

- UoB academics progress along established career pathways (**Figure 4.2.4**) which allow transition between contract functions specified as Teaching & Research (T&R), Teaching-focussed (T-focussed), or Research-only (R-only) (**Figure 4.2.5**).
- Increased focus has been given to T-focussed staff since UoB introduced a clear T-focussed pathway into recruitment and promotion criteria (2015).

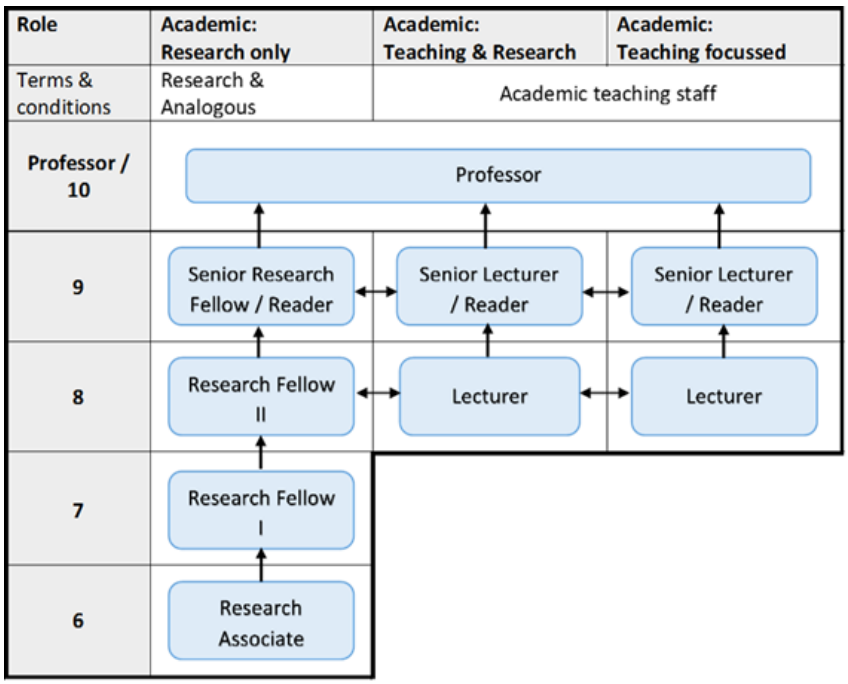


Figure 4.2.4 UoB academic career pathways

Data	Women were underrepresented in T&R staff (35%F) and men were underrepresented in R-only staff (36%M) (2015) (**Figure 4.2.5**)
Action	Introduction of inclusive recruitment processes (**Section 5.1**) (**2015 AP**)
Impact	Move towards gender balance with 40%F T&R staff and 43%M R-only staff (2019)

AP

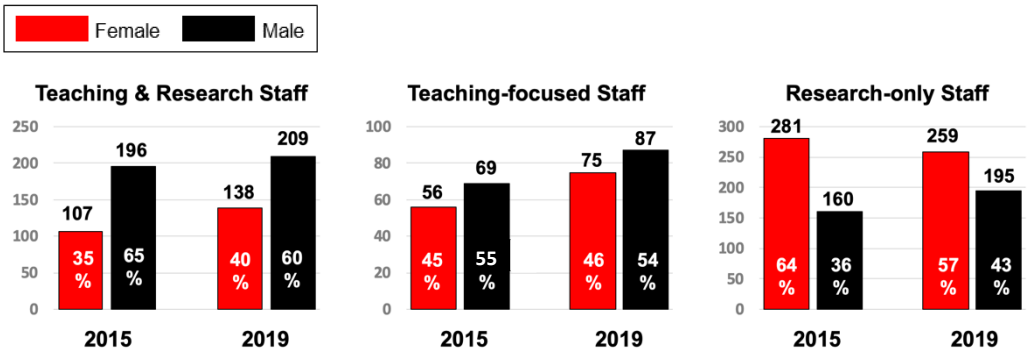


Figure 4.2.5 Change in academic staff numbers by contract function and gender from 2015 to 2019 (including clinical and non-clinical)

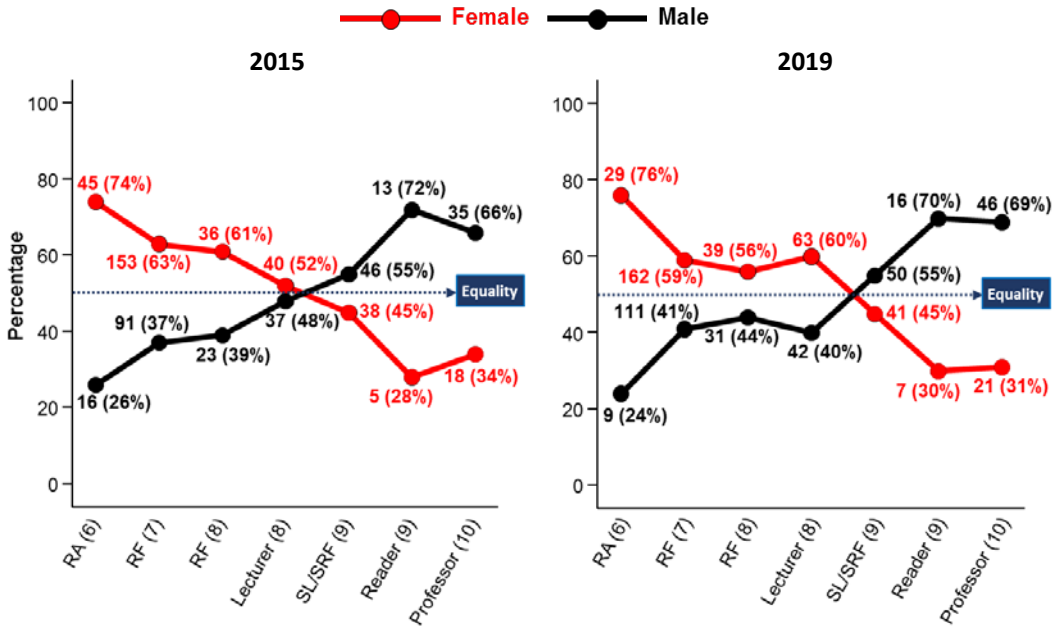


Figure 4.2.6 Non-clinical academic staff pipeline

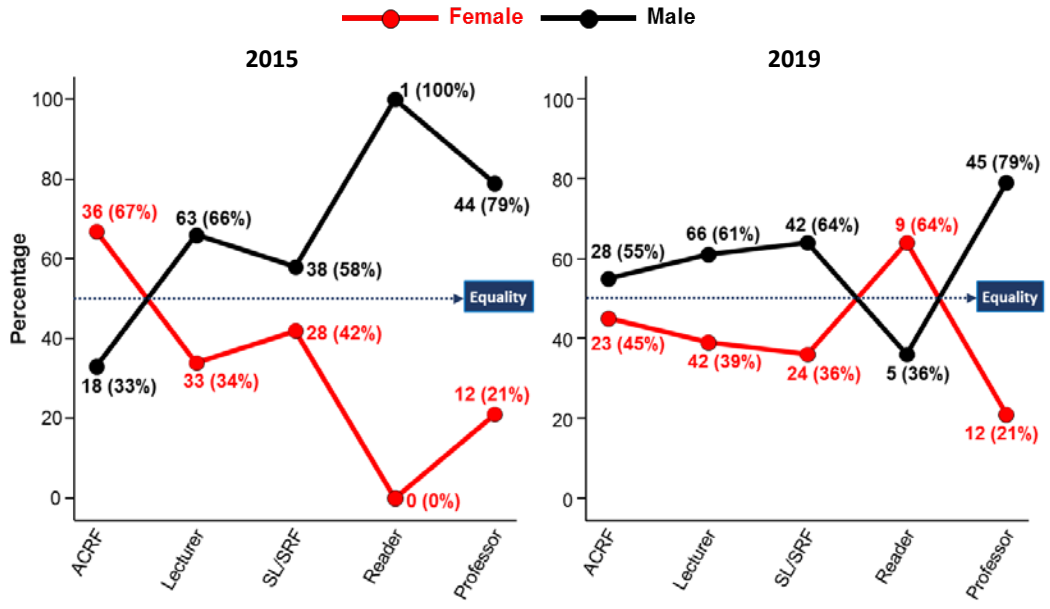


Figure 4.2.7 Clinical academic staff pipeline

- **Figures 4.2.6 and 4.2.7** show staff pipelines, with improved gender balance at junior levels and the gender crossing point moving to the right for both clinical and non-clinical staff since 2015 due to measures described in **Section 5**.

Table 4.2.1. Non-clinical academic staff by contract function and gender

		2015	2016	2017	2018	2019	Benchmark*
Teaching & Research	**F**	65	73	81	83	85	
	M	93	91	98	104	109	
	Total	158	164	179	187	194	
	%F	**41%**	**45%**	**45%**	**44%**	**44%**	**41%**
	%M	**59%**	**55%**	**55%**	**56%**	**56%**	**59%**
Teaching-focussed	**F**	29	28	30	36	43	
	M	28	29	30	31	36	
	Total	57	57	60	67	79	
	%F	**51%**	**49%**	**50%**	**54%**	**54%**	**52%**
	%M	**49%**	**51%**	**50%**	**46%**	**46%**	**48%**
Research-only	**F**	241	256	244	238	234	
	M	140	145	153	155	160	
	Total	381	401	397	393	394	
	%F	**63%**	**64%**	**61%**	**61%**	**59%**	**47%**
	%M	**37%**	**36%**	**39%**	**39%**	**41%**	**53%**

** Advance HE Staff Statistical Report 2019; generic data for all academic staff, as subject-specific information not broken down by contract function*

Data	Women were underrepresented in non-clinical T&R staff (41%F – **Table 4.2.1**) and men were underrepresented in non-clinical R-only staff (37%M) (2015)
Action	Improved training and career development support (**Section 5.3**) (**2015 AP**)
Impact	Move towards gender balance with 44%F non-clinical T&R staff (above benchmark) and 41%M non-clinical R-only staff (still below benchmark) (2019)

- Non-clinical T-focussed staff have grown by 40%, with women outpacing men.

Table 4.2.2 Non-clinical academic staff by grade and gender

Academic staff (non-clinical)		2015	2016	2017	2018	2019	Benchmark*
Professor (10)	F	18	17	18	21	21	
	M	35	38	40	40	46	
	Total	53	55	58	61	67	
	%F	**34%**	**31%**	**31%**	**34%**	**31%**	**21%**
	%M	**66%**	**69%**	**69%**	**66%**	**69%**	**79%**
Reader (9)	F	5	7	6	6	7	
	M	13	12	15	17	16	
	Total	18	19	21	23	23	
	%F	**28%**	**37%**	**29%**	**26%**	**30%**	N/A
	%M	**72%**	**63%**	**71%**	**74%**	**70%**	N/A
Senior Lecturer (9)	F	32	36	36	35	38	
	M	40	41	42	42	44	
	Total	72	77	78	77	82	
	%F	**44%**	**47%**	**46%**	**46%**	**46%**	N/A
	%M	**56%**	**53%**	**54%**	**54%**	**54%**	N/A
Senior RF (9)	F	6	7	8	7	3	
	M	6	9	8	7	6	
	Total	12	16	16	14	9	
	%F	**50%**	**44%**	**50%**	**50%**	**33%**	N/A
	%M	**50%**	**56%**	**50%**	**50%**	**67%**	N/A

Academic staff (non-clinical)		2015	2016	2017	2018	2019	Benchmark*
Lecturer (8)	F	40	43	53	58	63	
	M	37	34	36	40	42	
	Total	77	77	89	98	105	
	%F	**52%**	**56%**	**60%**	**59%**	**60%**	N/A
	%M	**48%**	**44%**	**40%**	**41%**	**40%**	N/A
RF (8)	F	36	38	34	36	39	
	M	23	23	26	27	31	
	Total	59	61	60	63	70	
	%F	**61%**	**62%**	**57%**	**57%**	**56%**	N/A
	%M	**39%**	**38%**	**43%**	**43%**	**44%**	N/A
RF (7)	F	153	157	162	159	162	
	M	91	94	97	101	111	
	Total	244	251	259	260	273	
	%F	**63%**	**62%**	**62%**	**61%**	**59%**	N/A
	%M	**37%**	**38%**	**38%**	**39%**	**41%**	N/A
RA (6)	F	45	52	38	35	29	
	M	16	14	16	15	9	
	Total	61	66	54	50	38	
	%F	**74%**	**79%**	**70%**	**70%**	**76%**	N/A
	%M	**26%**	**21%**	**30%**	**30%**	**24%**	N/A

** Advance HE Staff Statistical Report 2019; generic data for all academic staff, SET categories and all modes, as subject-specific information not broken down by grade; only information on % professor vs. non-professor provided*

- Non-clinical Lecturers/SLs are moving towards gender balance (**Table 4.2.2**).
- MDS has exceeded benchmark for female non-clinical professors (21%) and remained above 30%. However, the number of male non-clinical professors has grown at a faster pace (**2020 AP17, AP20, AP23**).
- **Figures 4.2.8-4.2.10** show non-clinical staff broken down by contract type.

AP

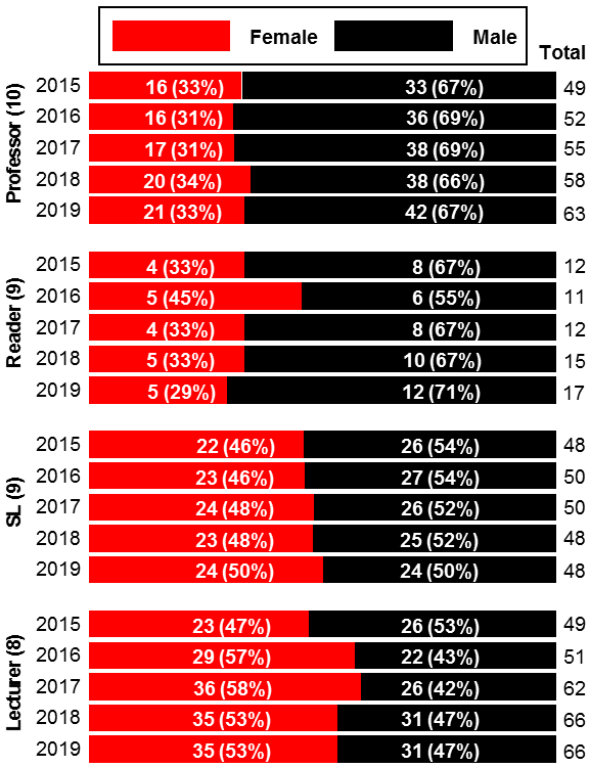


Figure 4.2.8 Non-clinical T&R staff by gender and grade

- T&R Professors and Readers are predominantly male, in line with applications (**Section 5**).

Data	T&R women were underrepresented at Lecturer (47%F) and SL level (46%F) in 2015
Action	Introduction of inclusive recruitment processes (**Section 5.1**) (**2015 AP**)
Impact	Gender balanced SLs (50%F) and increase in female Lecturers (53%F 47%M) in 2019

AP

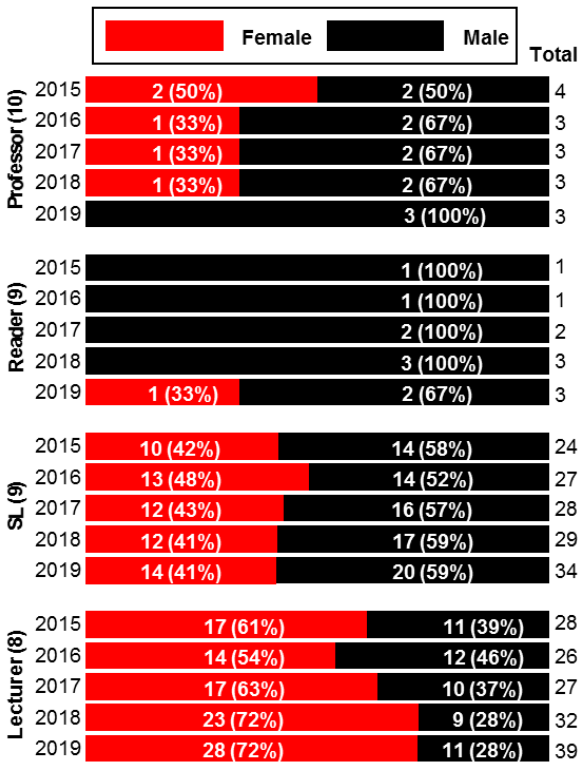


Figure 4.2.9 Non-clinical T-focussed staff by gender and grade

- Numbers of T-focussed Readers and Professors are low.

Data	Numbers of T-focussed SLs were low in 2015 (10F 14M compared to 22F 26M T&R)
Action	Improved appraisal and promotion support for T-focussed staff (**Section 5.1**)
Impact	14F 20M SL in 2019

AP

- Numbers of female T-focussed Lecturers have increased while numbers of male T-focussed Lecturers have remained static.

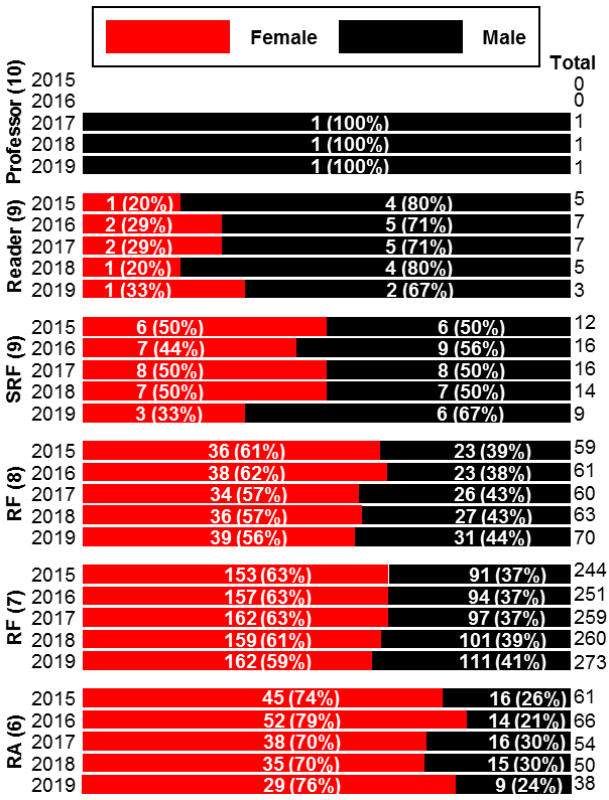


Figure 4.2.10 Non-clinical R-only staff by gender and grade

- Men are overrepresented in the few R-only Professors and Readers (primarily externally funded personal fellowships) (**2020 AP21**).
- Numbers of R-only grade 8 women and men have increased due to the "Birmingham Fellows" scheme, which recruits Early Career Researchers (ECRs) (6F 5M in 2018) onto 5-year R-only contracts (then open-ended T&R contracts).
- Numbers of R-only women and men at grade 7 have increased and moved toward gender balance, reflecting grant award success (**Section 5.3**).
- R-only grades 6 and 7 remain female dominated due to a female-dominated PGR pipeline (**Section 4.1**).

AP

- Most grade 6 staff are PhD students concluding their studies and preparing to transition to a grade 7 postdoctoral post to develop their academic career. A small number are senior technicians (another female-dominated group).

Table 4.2.3 Clinical academic staff by contract function and gender

		2015	2016	2017	2018	2019	Benchmark*
Teaching & research	**Female**	42	54	53	56	53	
	Male	103	95	97	102	100	
	Total	145	149	150	158	153	
	% Female	**29%**	**36%**	**35%**	**35%**	**35%**	**41%**
	% Male	**71%**	**64%**	**65%**	**65%**	**65%**	**59%**
Research Only	**Female**	40	37	25	22	25	
	Male	20	25	28	30	35	
	Total	60	62	53	52	60	
	% Female	**67%**	**60%**	**47%**	**42%**	**42%**	**47%**
	% Male	**33%**	**40%**	**53%**	**58%**	**58%**	**53%**
Teaching focussed	**Female**	27	25	29	30	32	
	Male	41	39	42	49	51	
	Total	68	64	71	79	83	
	% Female	**40%**	**39%**	**41%**	**38%**	**39%**	**52%**
	% Male	**60%**	**61%**	**59%**	**62%**	**61%**	**48%**

** Advance HE Staff Statistical Report 2019; generic data for all academic staff, as subject-specific information not broken down by contract function*

Table 4.2.4 Clinical academic staff by grade and gender

Academic staff (clinical)		2015	2016	2017	2018	2019	Benchmark*
Professor (10)	**Female**	12	10	12	13	12	
	Male	44	45	48	46	45	
	Total	56	55	60	59	57	
	% Female	**21%**	**18%**	**20%**	**22%**	**21%**	**21%**
	% Male	**79%**	**82%**	**80%**	**78%**	**79%**	**79%**
Reader (9)	**Female**	0	3	3	8	9	
	Male	1	4	3	6	5	
	Total	1	7	6	14	14	
	% Female	**0%**	**43%**	**50%**	**57%**	**64%**	N/A
	% Male	**100%**	**57%**	**50%**	**43%**	**36%**	N/A
Senior Lecturer (9)	**Female**	24	27	28	24	22	
	Male	36	31	36	36	35	
	Total	60	58	64	60	57	
	% Female	**40%**	**47%**	**44%**	**40%**	**39%**	N/A
	% Male	**60%**	**53%**	**56%**	**60%**	**61%**	N/A
Senior RF (9)	**Female**	4	3	3	2	2	
	Male	2	3	5	8	7	
	Total	6	6	8	10	9	
	% Female	**67%**	**50%**	**38%**	**20%**	**22%**	N/A
	% Male	**33%**	**50%**	**62%**	**80%**	**78%**	N/A
ACL (8)	**Female**	33	39	39	41	42	
	Male	63	53	52	63	66	
	Total	96	92	91	104	108	
	% Female	**34%**	**42%**	**43%**	**39%**	**39%**	N/A
	% Male	**66%**	**58%**	**57%**	**61%**	**61%**	N/A
ACRF (8)	**Female**	36	34	22	20	23	
	Male	18	22	23	22	28	
	Total	54	56	45	42	51	
	% Female	**67%**	**61%**	**49%**	**48%**	**45%**	N/A
	% Male	**33%**	**39%**	**51%**	**52%**	**55%**	N/A

** Advance HE Staff Statistical Report 2019; generic data for all academic staff, SET categories and all modes, as subject-specific information not broken down by grade; only information on % professor vs. non-professor provided*

Data	Women were underrepresented in clinical T&R staff (29% - **Table 4.2.3**) and there were no female clinical Readers in 2015 (**Table 4.2.4**)
Action	Improved promotion processes (**Section 5.1**).
Impact	35% female clinical T&R staff and 9F 5M clinical Readers in 2019

- Women remain underrepresented in clinical academic staff (**2020 AP20**).
- The MDS ICAT cohort comprises Academic Clinical Lecturers (ACLS) and Academic Clinical Research Fellows (ACRFs).
- ACRFs have looped out of clinical training to undertake full-time, externally funded PGR training. At the end of their PhD, they either return to full-time clinical training or become ACLs who divide their time into 50% postdoctoral research (with some teaching responsibilities) and 50% clinical training.

Data	Female ACLs were underrepresented in 2015 (34%F 66%M).
Action	Introduction of structured career development support (**Section 5.3**) (**2015 AP**).
Impact	Increase to 39%F ACLs by 2019.

- **Figures 4.2.11-4.2.13** show clinical staff broken down by contract type.

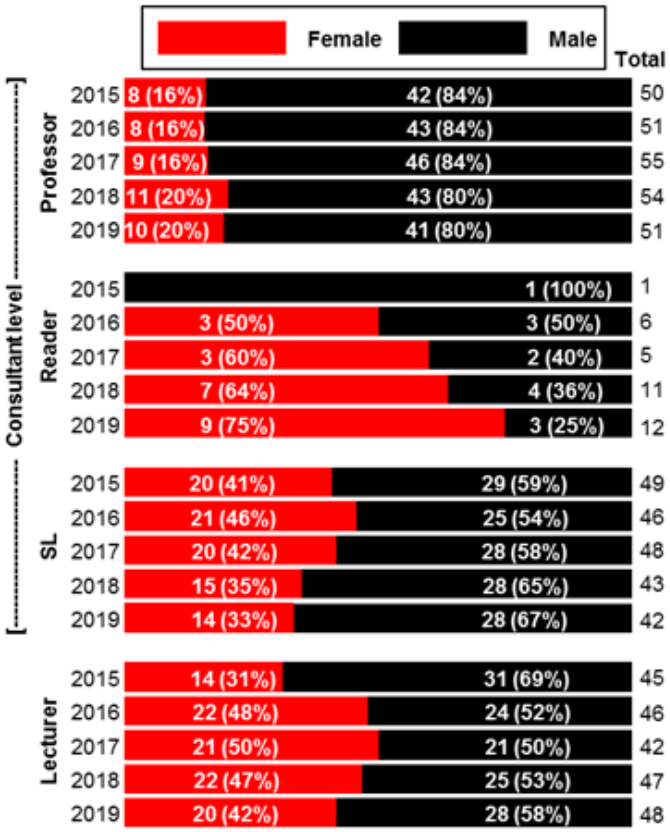


Figure 4.2.11 Clinical T&R staff by gender and grade

- Consultant-level academics are mostly on open-ended clinical T&R contracts at SL, Reader, and Professorial level.
- The number of female clinical T&R professors remains low (20%F) (**2020 AP20**).

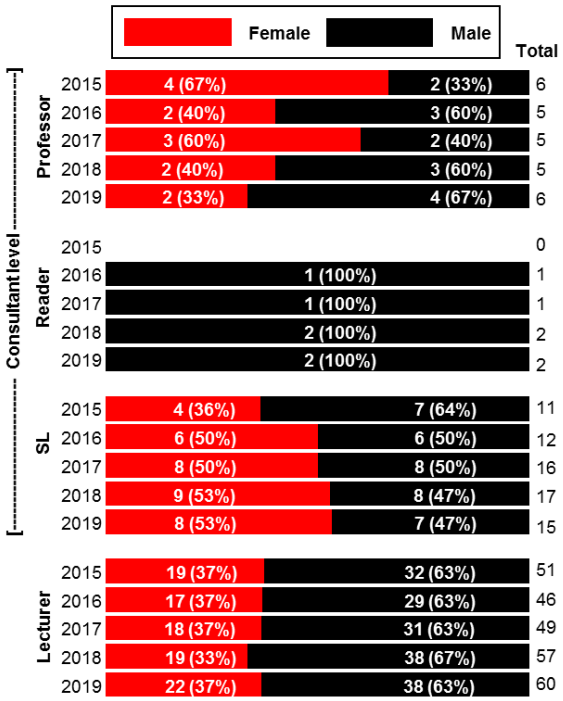


Figure 4.2.12 Clinical T-focussed staff by gender and grade

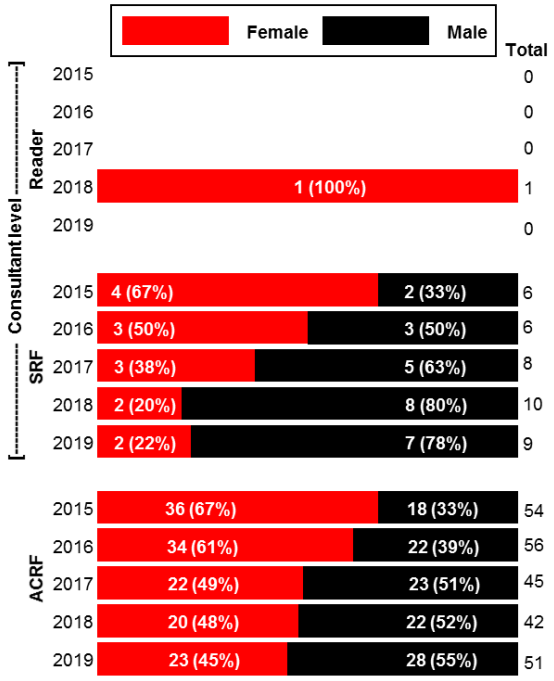


Figure 4.2.13 Clinical R-only staff by gender and grade

- Small numbers of senior clinical T-focussed academics are typically re-engaged retired Professors and Readers.
- Clinical T-focussed Lecturers and SLs are typically fractional contracts for subject specialists delivering small amounts of teaching (e.g. clinical dental tutors and GPs).
- Male overrepresentation at these levels reflects NHS employment gender ratios.

Data	Male ACRFs were underrepresented in 2015 (67%F 33%M)
Action	Introduction of inclusive recruitment processes (**Section 5.1**) (**2015 AP**)
Impact	ACRFs closer to gender balance in 2019 (45%F 55%M)

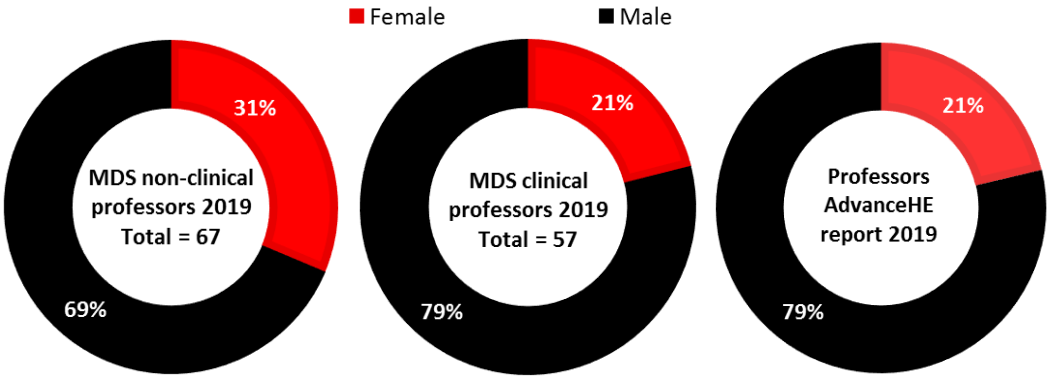


Figure 4.2.14 MDS professors by gender and non-clinical/clinical against benchmark

- **Figure 4.2.14** shows that MDS is above benchmark for female non-clinical professors, and at benchmark for female clinical professors.
- **Table 4.2.5** shows academic staff by gender and ethnicity.
- The gender ratio of white staff has remained static for both non-clinical and clinical academics.
- A higher proportion of clinical academics are BAME (32%) compared to non-clinical academics (22%) and all UHBT BAME staff (28%)).
- The proportion of male BAME non-clinical academics has increased, leading to a similar gender ratio across white and BAME staff.
- The proportion of female BAME clinical academics has decreased, increasing the underrepresentation of female BAME staff (2020 AP47 – also to be addressed through the College Race Equality Charter working group which has shared membership with the SAT). AP

Table 4.2.5 MDS academic staff by gender, non-clinical/clinical, and ethnicity*

		2015		2016		2017		2018		2019	
		BAME	White	BAME	White	BAME	White	BAME	White	BAME	White
Non-clinical academic	F	70	264	72	283	73	277	77	276	75	259
	M	36	223	44	218	53	224	59	223	63	218
	Total	106	487	116	501	126	501	136	499	138	477
	% F	66%	54%	62%	57%	58%	55%	57%	55%	54%	54%
	% M	34%	46%	38%	43%	42%	45%	43%	45%	46%	46%
Clinical academic	F	30	78	36	79	27	78	28	78	26	74
	M	56	106	55	103	59	106	63	115	60	117
	Total	86	184	91	182	86	184	91	193	86	191
	% F	35%	42%	40%	43%	31%	42%	31%	40%	30%	39%
	% M	65%	58%	60%	57%	69%	58%	69%	60%	70%	61%

**excluding "prefer not to say"*

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

- UoB focuses on celebrating and developing technical staff into recognised professionals in their field. The technical career pathway provides opportunities including progression up to grade 9 (**Figure 4.2.15**).
- As a founding signatory of the Science Council-led "Technician Commitment", UoB launched a Technical Academy in 2017 to enhance career development and widen technical career pathways (which can include transition to academic, senior technical, or commercial roles). All MDS technicians are able to attend Technical Academy events (primarily networking opportunities at UoB).
- Some Band 400 and Band 500 technicians undertake PT PhDs, and some academic grade 7/8 staff transition to technical posts for career development.

Data	Women were underrepresented in senior technical roles (grades 7-9) in 2015
Action	Adoption of Technical Academy principles and career support and development
Impact	Gender balance at grade 7 and slightly more women than men at grades 8-9

AP

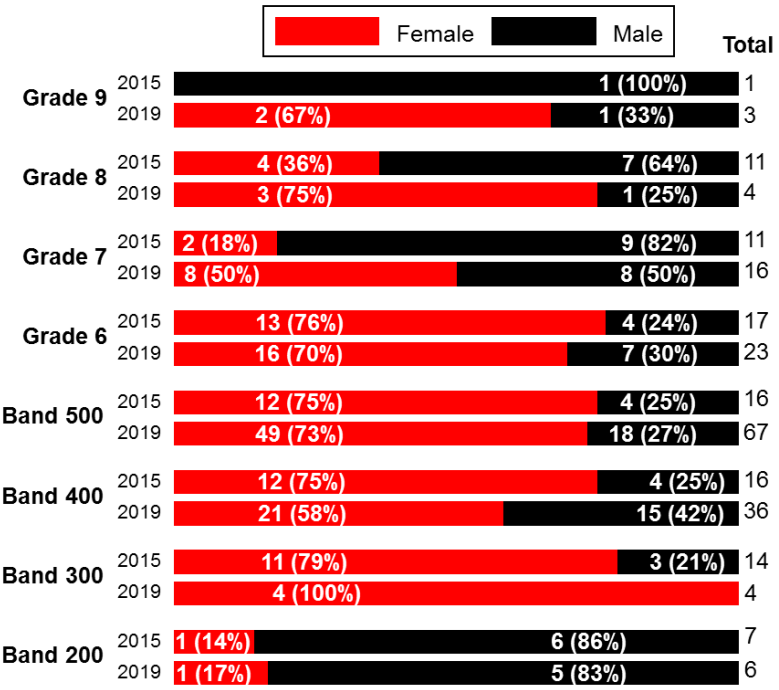


Figure 4.2.15 Technical staff by gender and grade (2015 compared to 2019)

- **Table 4.2.6** shows staff engagement with development opportunities (**2020 AP26**).

AP

Table 4.2.6 Feedback from the 2018 Higher Education Technical Summit*

Proportion of staff who:	F%	M%
…have attended at least one conference	46	50
…have engaged with training opportunities	53	86
…are satisfied with training opportunities	60	40

**a biannual conference for technical staff*

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

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

- No MDS staff are on zero-hour contracts. Some specialist healthcare staff are bought in on a casual basis to deliver specific elements of teaching and assessment, and some students to provide work experience.
- UoB redeployment policy is that staff approaching the end of FTCs receive priority in shortlisting and appointment to suitable vacancies. HR staff provide support to ensure that redeployees can be quickly connected to vacancies and supported to continue their employment.
- Fixed Term Contracts (FTCs) are used for small numbers of senior academics to support retirement arrangements, transition to senior NHS posts for clinical staff, or externally funded personal fellowships (with a commitment to convert the FTC to an open-ended contract at the end of the fellowship). ACRFs and ACLs are employed on FTCs due to clinical training programme requirements.
- Data on FTCs and open-ended contracts are provided in **Table 4.2.7** for non-clinical academic staff and **Table 4.2.8** for clinical academic staff.
- High levels (>95%) of non-clinical grade 8-10 academics have been maintained on open-ended T&R and T-focussed contracts, with no difference by gender.
- The number and proportion of female non-clinical academics on FTCs has increased (**Figure 4.2.16**) due to an increase in externally funded postdoctoral RFs (aligned to sector trends where external research funds are awarded for a fixed period) and a female-dominated PGR pipeline (**2020 AP07**, **AP22**).

AP

Data	Few female non-clinical lecturers on open-ended contracts in 2015 (32F)
Action	Workforce growth driven by expansion of teaching programmes Introduction of inclusive recruitment processes (**Section 5.1**)
Impact	53F non-clinical lecturers on open-ended contracts in 2019

AP

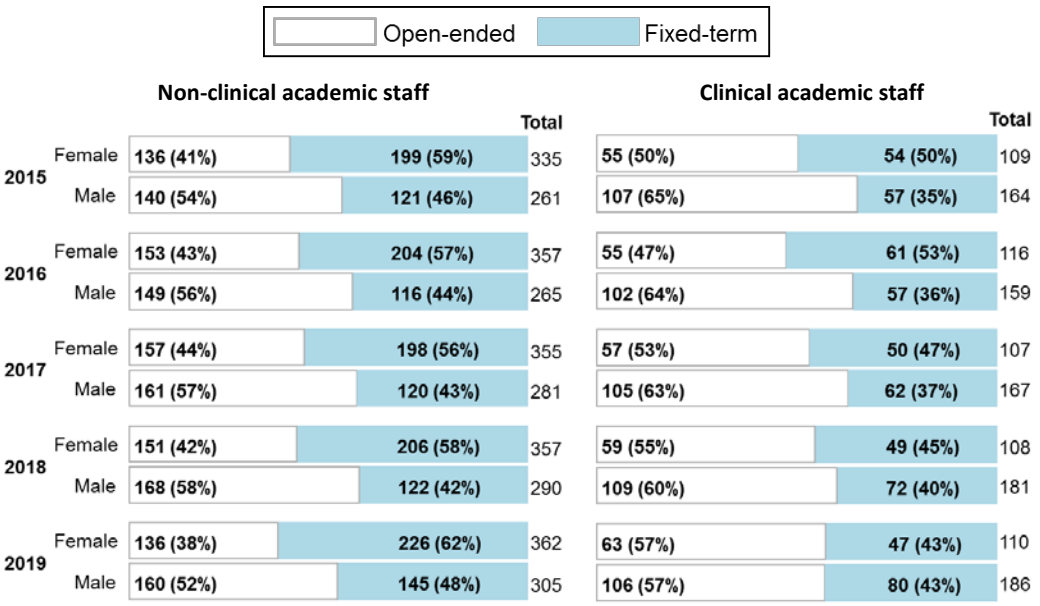


Figure 4.2.16 MDS academic staff by gender and contract type

Table 4.2.7 Non-clinical academic staff by contract type, grade, and gender

F = fixed-term; O=open-ended

		2015		2016		2017		2018		2019	
Grade		**F**	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**	**M**
Professor (10)	**Fixed-term**	0	3	0	2	1	1	1	2	2	3
	Open-ended	18	32	17	36	17	40	20	39	19	43
	Total	18	35	17	38	18	41	21	41	21	46
	%Fixed-term	**0%**	**9%**	**0%**	**5%**	**6%**	**2%**	**5%**	**5%**	**10%**	**7%**
	%Open-ended	**100%**	**91%**	**100%**	**95%**	**94%**	**98%**	**95%**	**95%**	**90%**	**93%**
Reader (9)	**Fixed-term**	0	1	0	0	0	1	0	0	0	0
	Open-ended	5	12	7	12	6	14	6	17	7	16
	Total	5	13	7	12	6	15	6	17	7	16
	%Fixed-term	**0%**	**8%**	**0%**	**0%**	**0%**	**7%**	**0%**	**0%**	**0%**	**0%**
	%Open-ended	**100%**	**92%**	**100%**	**100%**	**100%**	**93%**	**100%**	**100%**	**100%**	**100%**
SL (9)	**Fixed-term**	1	4	1	1	0	1	1	1	1	2
	Open-ended	31	36	35	40	36	41	34	41	37	42
	Total	32	40	36	41	36	42	35	42	38	44
	%Fixed-term	**3%**	**10%**	**3%**	**2%**	**0%**	**2%**	**3%**	**2%**	**3%**	**5%**
	%Open-ended	**97%**	**90%**	**97%**	**98%**	**100%**	**98%**	**97%**	**98%**	**97%**	**95%**
SRF (9)	**Fixed-term**	1	1	1	3	1	3	1	2	0	1
	Open-ended	5	5	6	6	7	5	6	5	3	5
	Total	6	6	7	9	8	8	7	7	3	6
	%Fixed-term	**17%**	**17%**	**14%**	**33%**	**13%**	**38%**	**14%**	**29%**	**0%**	**17%**
	%Open-ended	**83%**	**83%**	**86%**	**67%**	**88%**	**63%**	**86%**	**71%**	**100%**	**83%**
Lecturer (8)	**Fixed-term**	8	6	6	4	8	4	10	5	10	5
	Open-ended	32	31	37	30	45	32	48	35	53	37
	Total	40	37	43	34	53	36	58	40	63	42
	%Fixed-term	**20%**	**16%**	**14%**	**12%**	**15%**	**11%**	**17%**	**13%**	**16%**	**12%**
	%Open-ended	**80%**	**84%**	**86%**	**88%**	**85%**	**89%**	**83%**	**88%**	**84%**	**88%**
RF (8)	**Fixed-term**	21	10	25	9	18	10	21	11	29	19
	Open-ended	15	13	13	14	16	16	15	16	10	12
	Total	36	23	38	23	34	26	36	27	39	31
	%Fixed-term	**58%**	**43%**	**66%**	**39%**	**53%**	**38%**	**58%**	**41%**	**74%**	**61%**
	%Open-ended	**42%**	**57%**	**34%**	**61%**	**47%**	**62%**	**42%**	**59%**	**26%**	**39%**
RF (7)	**Fixed-term**	127	82	125	84	135	86	139	88	155	107
	Open-ended	26	9	32	10	27	11	20	13	7	4
	Total	153	91	157	94	162	97	159	101	162	111
	%Fixed-term	**83%**	**90%**	**80%**	**89%**	**83%**	**89%**	**87%**	**87%**	**96%**	**96%**
	%Open-ended	**17%**	**10%**	**20%**	**11%**	**17%**	**11%**	**13%**	**13%**	**4%**	**4%**
RA (6)	**Fixed-term**	41	14	46	13	35	14	33	13	29	8
	Open-ended	4	2	6	1	3	2	2	2	0	1
	Total	45	16	52	14	38	16	35	15	29	9
	%Fixed-term	**91%**	**88%**	**88%**	**93%**	**92%**	**88%**	**94%**	**87%**	**100%**	**89%**
	%Open-ended	**9%**	**13%**	**12%**	**7%**	**8%**	**13%**	**6%**	**13%**	**0%**	**11%**

Table 4.2.8 Clinical academic staff by contract type, grade and gender

		2015		2016		2017		2018		2019	
Grade		**F**	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**	**M**
Professor	**Fixed-term**	0	1	0	2	0	5	1	7	1	8
	Open-ended	12	43	10	44	12	43	12	39	11	37
	Total	12	44	10	46	12	48	13	46	12	45
	%Fixed-term	**0%**	**2%**	**0%**	**4%**	**0%**	**10%**	**8%**	**15%**	**8%**	**18%**
	%Open-ended	**100%**	**98%**	**100%**	**96%**	**100%**	**90%**	**92%**	**85%**	**92%**	**82%**
Reader	**Fixed-term**	0	0	1	1	1	0	1	0	2	0
	Open-ended	0	1	2	3	2	3	7	6	7	5
	Total	0	1	3	4	3	3	8	6	9	5
	%Fixed-term	**–**	**0%**	**33%**	**25%**	**33%**	**0%**	**13%**	**0%**	**22%**	**0%**
	%Open-ended	**–**	**100%**	**67%**	**75%**	**67%**	**100%**	**88%**	**100%**	**78%**	**100%**
SL	**Fixed-term**	3	8	5	6	8	10	8	11	4	10
	Open-ended	21	28	22	25	20	26	16	25	18	25
	Total	24	36	27	31	28	36	24	36	22	35
	%Fixed-term	**13%**	**22%**	**19%**	**19%**	**29%**	**28%**	**33%**	**31%**	**18%**	**29%**
	%Open-ended	**88%**	**78%**	**81%**	**81%**	**71%**	**72%**	**67%**	**69%**	**82%**	**71%**
SRF	**Fixed-term**	4	1	2	2	0	4	0	7	1	5
	Open-ended	0	1	1	1	3	1	2	1	1	2
	Total	4	2	3	3	3	5	2	8	2	7
	%Fixed-term	**100%**	**50%**	**67%**	**67%**	**0%**	**80%**	**0%**	**88%**	**50%**	**71%**
	%Open-ended	**0%**	**50%**	**33%**	**33%**	**100%**	**20%**	**100%**	**13%**	**50%**	**29%**
Lecturer	**Fixed-term**	14	29	20	24	20	20	19	25	16	29
	Open-ended	19	34	19	29	19	32	22	38	26	37
	Total	33	63	39	53	39	52	41	63	42	66
	%Fixed-term	**42%**	**46%**	**51%**	**45%**	**51%**	**38%**	**46%**	**40%**	**38%**	**44%**
	%Open-ended	**58%**	**54%**	**49%**	**55%**	**49%**	**62%**	**54%**	**60%**	**62%**	**56%**
ACRF	**Fixed-term**	33	18	33	22	21	23	20	22	23	28
	Open-ended	3	0	1	0	1	0	0	0	0	0
	Total	36	18	34	22	22	23	20	22	23	28
	%Fixed-term	**92%**	**100%**	**97%**	**100%**	**95%**	**100%**	**100%**	**100%**	**100%**	**100%**
	%Open-ended	**8%**	**0%**	**3%**	**0%**	**5%**	**0%**	**0%**	**0%**	**0%**	**0%**

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

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

- There is no significant difference between women and men (**Table 4.2.9**).
- Exit interviews by line managers (or HR if preferred) are offered to all leavers, with small numbers undertaken each year. The main reasons given for leaving are retirement or successful application to a more senior external position.
- Retention rates for FT women have increased from 93% to 95% (compared to 92% to 95% for men). Retention rates for PT staff remain high at 92% for women and 87% for men (primarily due to PT men retiring).
- Grades with high percentages are SRF (9) for non-clinical (due to small numbers making percentages appear large – **Table 4.2.10**), and Lecturer for clinical (due to ACLs finding more senior posts in anticipation of end of FTC – **Table 4.2.11**).

Table 4.2.9 Turnover of all MDS academic staff by gender and FT/PT (focusing on resignation rather than end of FTC)

		2015		2016		2017		2018		2019		Benchmark*
		F	M	F	M	F	M	F	M	F	M	
FT	Leavers	23	29	21	35	24	36	26	28	17	21	
	Staff No.	338	372	355	371	354	383	354	399	352	413	
	Turnover	7%	8%	6%	9%	7%	9%	7%	7%	5%	5%	17.7%
PT	Leavers	9	7	8	3	12	1	9	4	9	10	
	Staff No.	106	53	118	53	108	65	111	72	120	78	
	Turnover	8%	13%	7%	6%	11%	2%	8%	6%	8%	13%	17.7%

**Advance HE Staff Statistical Report 2019; generic data for all academic staff, SET categories, all modes, including clinical and non-clinical*

Table 4.2.10 Turnover of non-clinical academic staff by gender and grade

		2015		2016		2017		2018		2019	
Grade		F	M	F	M	F	M	F	M	F	M
Professor (10)	Leavers	1	5	1	0	2	0	1	3	3	1
	Staff No.	18	35	17	38	18	41	21	41	21	46
	Turnover	6%	14%	6%	0%	11%	0%	5%	7%	14%	2%
Reader (9)	Leavers	0	0	0	0	1	0	1	0	1	0
	Staff No.	5	13	7	12	6	15	6	17	7	16
	Turnover	0%	0%	0%	0%	17%	0%	17%	0%	14%	0%
SL (9)	Leavers	3	2	2	2	0	1	3	2	1	1
	Staff No.	32	40	36	41	36	42	35	42	38	44
	Turnover	9%	5%	6%	5%	0%	2%	9%	5%	3%	2%
SRF (9)	Leavers	0	1	0	0	0	2	0	1	1	2
	Staff No.	6	6	7	9	8	8	7	7	3	6
	Turnover	0%	17%	0%	0%	0%	25%	0%	14%	33%	33%
Lecturer (8)	Leavers	2	2	1	6	4	3	3	2	1	5
	Staff No.	40	37	43	34	53	36	58	40	63	42
	Turnover	5%	5%	2%	18%	8%	8%	5%	5%	2%	12%
RF (8)	Leavers	3	1	0	1	3	3	2	2	2	1
	Staff No.	36	23	38	23	34	26	36	27	39	31
	Turnover	8%	4%	0%	4%	9%	12%	6%	7%	5%	3%
RF (7)	Leavers	15	9	14	13	9	13	15	9	10	6
	Staff No.	153	91	157	94	162	97	159	101	162	111
	Turnover	10%	10%	9%	14%	6%	13%	9%	9%	6%	5%
RA (6)	Leavers	4	3	5	0	8	2	4	0	1	1
	Staff No.	45	16	52	14	38	16	35	15	29	9
	Turnover	9%	19%	10%	0%	21%	13%	11%	0%	3%	1%

Table 4.2.11 Turnover of clinical academic staff by gender and grade

		2015		2016		2017		2018		2019	
Grade		F	M	F	M	F	M	F	M	F	M
Professor	Leavers	0	2	2	2	0	4	1	3	0	4
	Staff No.	12	44	10	46	12	48	13	46	12	45
	Turnover	0%	5%	20%	4%	0%	8%	8%	7%	0%	9%
Reader	Leavers	0	1	0	0	0	1	0	0	0	0
	Staff No.	0	1	3	4	3	3	8	6	9	5
	Turnover	N/A	100%	0%	0%	0%	33%	0%	0%	0%	0%
SL	Leavers	1	1	1	3	2	2	0	0	1	1
	Staff No.	24	36	27	31	28	36	24	36	22	35
	Turnover	4%	3%	4%	10%	7%	6%	0%	0%	5%	3%
SRF	Leavers	0	0	1	0	0	0	0	0	0	0
	Staff No.	4	2	3	3	3	5	2	8	2	7
	Turnover	0%	0%	33%	0%	0%	0%	0%	0%	0%	0%

		2015		2016		2017		2018		2019	
Grade		**F**	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**	**M**
Lecturer	**Leavers**	3	9	2	11	6	5	4	7	4	8
	Staff No.	33	63	39	53	39	52	41	63	42	66
	Turnover	**9%**	**14%**	**5%**	**21%**	**15%**	**10%**	**10%**	**11%**	**10%**	**12%**
ACRF	**Leavers**	0	0	0	0	1	1	1	3	1	1
	Staff No.	36	18	34	22	22	23	20	22	23	28
	Turnover	**0%**	**0%**	**0%**	**0%**	**5%**	**4%**	**5%**	**14%**	**4%**	**4%**

Actions

2020 AP07 **Data and governance**

Begin to collect data on the gender of ECRs who co-supervise PGRs and who are named on bids

2020 AP18 **Staff pipeline**

Headhunt women to apply for Reader and Professor positions, and include encouragement within job advertisements for women to apply

2020 AP20 **Staff pipeline**

Work with NHS partners to encourage female applications for clinical posts and promotions

2020 AP21 **Staff pipeline**

Introduce a new leadership and mentoring programme called "MDS SUSTAIN" in partnership with the Academy of Medical Sciences for female RF (8)s, Lecturers, ACRFs, and ACLs, building on the successful FGA pilot mentoring scheme, and ring-fence 30% of the places for clinical academic staff

2020 AP22 **Staff pipeline**

Develop revised Learning and Development plan to provide enhanced career development support and advice for staff on FTCs

2020 AP23 **Staff pipeline**

Encourage staff to apply for promotion earlier in the year, introduce institute-level mock interviews, and run annual women-only promotion roadshows

2020 AP26 **Staff pipeline**

Introduce MDS-specific PDR reviewer training (with specific reference to our revised College-level PDR forms) to supplement mandatory UoB training and facilitate consistent appraisal experience for MDS staff

2020 AP47 **Intersectionality**

Work with University Hospitals Birmingham NHS Foundation Trust BAME Staff Network to understand barriers and promote opportunities for female BAME staff to become clinical academics, and ensure that ACL interview panels include an EDI representative to further reduce unconscious bias

3100 words (including additional 1000)

5. SUPPORTING AND ADVANCING WOMEN'S CAREERS

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

5.1 Key career transition points: academic staff

Improved inductions have led to equal levels of satisfaction for women and men, and expanded REF eligibility means that more women will be submitted in 2021. There is more work to do on recruiting female clinical academics and supporting women and PT staff to apply for promotion.

(i) Recruitment

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

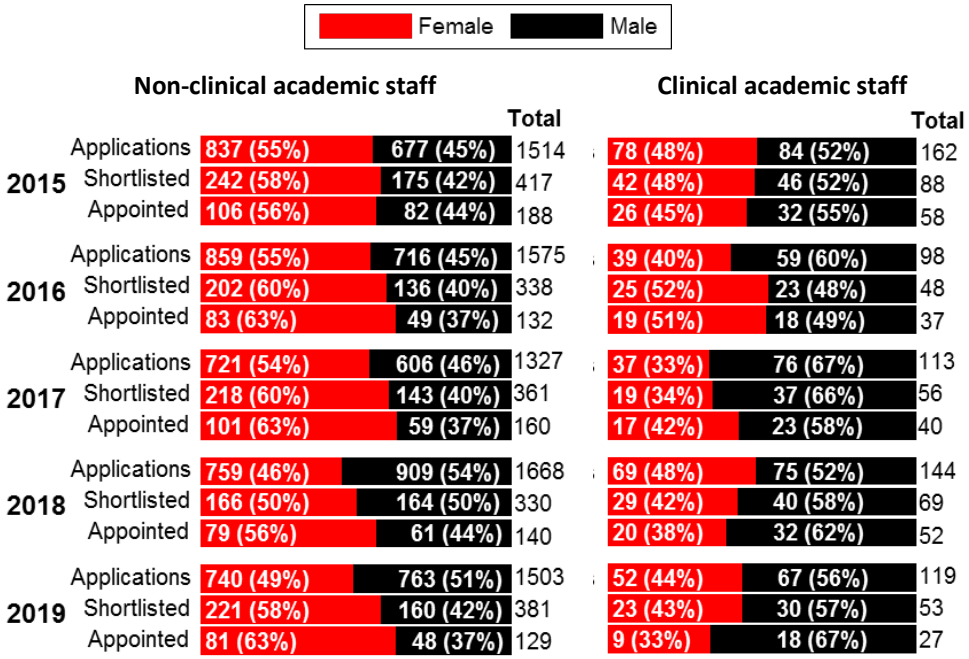


Figure 5.1.1 MDS academic staff recruitment (combined across all grades)

Data	Men were underrepresented in non-clinical applications in 2015 (55%F 45%M) (**Figure 5.1.1**)
Action	Improved advertising and recruitment processes (**Table 5.1.1**)
Impact	Non-clinical applications near gender balance in 2019 (49%F 51%M) (although men remain less likely to be appointed, particularly at Lecturer/RF (8) – **2020 AP19**)

AP

AP

- Women are more likely to be shortlisted and appointed to non-clinical posts (**Table 5.1.2**). This is reversed for clinical posts (**Table 5.1.3**) in line with higher numbers of men at these levels in the NHS (37%F 63%M, NHS Employers data 2020) (**2020 AP06, AP20, AP30**).
- Data are unavailable for longlisted candidates and declined offers.
- Grade 8 is the entry grade for non-clinical Lecturers. These are mostly open-ended contracts, reflecting strategic investment in the workforce. Vacancies are always advertised (including information about Athena SWAN) to provide development opportunities for ECRs looking to progress an academic career.

AP

Table 5.1.1 Continuous improvements to the MDS staff recruitment process

Year	Alteration
2015	Shortlisting process required to record justification for decisions (to mitigate bias)
	Mandatory Recruitment and Selection training for panel members
2018	Athena SWAN/EDI principles included in all job advertisements and EDI competencies in all new job descriptions
2019	Gender balanced interview panels and engaging with BAME Network interview panel representatives to promote diversity
	Accommodating personal circumstances (e.g. offering to reschedule interviews due to disability or caring responsibilities)

Table 5.1.2 Non-clinical academic recruitment by gender and grade

	Applications					Shortlisted					Appointed					Success rate*	
Year	**F**	**M**	**Total**	**%F**	**%M**	**F**	**M**	**Total**	**%F**	**%M**	**F**	**M**	**Total**	**%F**	**%M**	**%F**	**%M**
Professor (10)																	
15	8	13	21	**38**	**62**	2	7	9	**22**	**78**	2	5	7	**29**	**71**	**25**	**38**
16	7	15	22	**32**	**68**	0	4	4	**0**	**100**	0	1	1	**0**	**100**	**0**	**7**
17	1	0	1	**100**	**0**	1	0	1	**100**	**0**	1	0	1	**100**	**0**	**100**	**–**
18	1	4	5	**20**	**80**	0	1	1	**0**	**100**	0	1	1	**0**	**100**	**0**	**25**
19	3	7	10	**30**	**70**	0	0	0	**–**	**–**	0	0	0	**–**	**–**	**0**	**0**
Reader (9)																	
15	4	13	17	**24**	**76**	0	7	7	**0**	**100**	0	3	3	**0**	**100**	**0**	**23**
16	0	2	2	**0**	**100**	0	2	2	**0**	**100**	0	1	1	**0**	**100**	**–**	**50**
17	0	1	1	**0**	**100**	0	1	1	**0**	**100**	0	1	1	**0**	**100**	**–**	**100**
18	3	7	10	**30**	**70**	1	2	3	**33**	**67**	1	2	3	**33**	**67**	**33**	**29**
19	0	0	0	**–**	**–**	0	0	0	**–**	**–**	0	0	0	**–**	**–**	**–**	**–**
SL (9)																	
15	22	43	65	**34**	**66**	8	10	18	**44**	**56**	3	4	7	**43**	**57**	**14**	**9**
16	17	9	26	**65**	**35**	7	6	13	**54**	**46**	3	4	7	**43**	**57**	**18**	**44**
17	3	3	6	**50**	**50**	2	1	3	**67**	**33**	1	1	2	**50**	**50**	**33**	**33**
18	24	59	83	**29**	**71**	3	8	11	**27**	**73**	2	2	4	**50**	**50**	**8**	**3**
19	19	37	56	**34**	**66**	4	9	13	**31**	**69**	1	2	3	**33**	**67**	**5**	**5**
SRF (9)																	
15	8	2	10	**80**	**20**	5	2	7	**71**	**29**	3	2	5	**60**	**40**	**38**	**100**
16	18	14	32	**56**	**44**	3	4	7	**43**	**57**	1	2	3	**33**	**67**	**6**	**14**
17	0	1	1	**0**	**100**	0	1	1	**0**	**100**	0	1	1	**0**	**100**	**–**	**100**
18	7	7	14	**50**	**50**	1	2	3	**33**	**67**	1	0	1	**100**	**0**	**14**	**0**
19	0	0	0	**–**	**–**	0	0	0	**–**	**–**	0	0	0	**–**	**–**	**–**	**–**
Lecturer (8)																	
15	24	30	54	**44**	**56**	10	12	22	**45**	**55**	8	7	15	**53**	**47**	**33**	**23**
16	79	124	203	**39**	**61**	20	18	38	**53**	**47**	12	6	18	**67**	**33**	**15**	**5**
17	73	76	149	**49**	**51**	26	14	40	**65**	**35**	13	7	20	**65**	**35**	**18**	**9**
18	120	169	289	**42**	**58**	25	31	56	**45**	**55**	11	10	21	**52**	**48**	**9**	**6**
19	58	93	151	**38**	**62**	15	14	29	**52**	**48**	5	4	9	**56**	**44**	**9**	**4**
RF (8)																	
15	57	50	107	**53**	**47**	10	12	22	**45**	**55**	6	4	10	**60**	**40**	**11**	**8**
16	12	11	23	**52**	**48**	9	5	14	**64**	**36**	5	3	8	**63**	**38**	**42**	**27**
17	11	28	39	**28**	**72**	5	8	13	**38**	**62**	4	6	10	**40**	**60**	**36**	**21**
18	45	99	144	**31**	**69**	14	24	38	**37**	**63**	7	6	13	**54**	**46**	**16**	**6**
19	19	15	34	**56**	**44**	11	5	16	**69**	**31**	8	2	10	**80**	**20**	**42**	**13**
RF (7)																	
15	436	389	825	**53**	**47**	130	104	234	**56**	**44**	51	49	100	**51**	**49**	**12**	**13**
16	360	345	705	**51**	**49**	93	71	164	**57**	**43**	41	26	67	**61**	**39**	**11**	**8**
17	415	373	788	**53**	**47**	136	98	234	**58**	**42**	63	36	99	**64**	**36**	**15**	**10**
18	417	439	856	**49**	**51**	95	84	179	**53**	**47**	46	37	83	**55**	**45**	**11**	**8**
19	419	516	935	**45**	**55**	129	113	242	**53**	**47**	43	33	76	**57**	**43**	**10**	**6**

	Applications					Shortlisted					Appointed					Success rate*	
Year	F	M	Total	%F	%M	F	M	Total	%F	%M	F	M	Total	%F	%M	%F	%M
RA (6)																	
15	278	137	415	67	33	77	21	98	79	21	33	8	41	80	20	12	6
16	366	196	562	65	35	70	26	96	73	27	21	6	27	78	22	6	3
17	218	124	342	64	36	48	20	68	71	29	19	7	26	73	27	9	6
18	142	125	267	53	47	27	12	39	69	31	11	3	14	79	21	8	2
19	222	95	317	70	30	62	19	81	77	23	24	7	31	77	23	11	7

**For each gender, success rate = number appointed/number of applications*

Table 5.1.3 Clinical academic recruitment by gender and grade

	Applications					Shortlisted					Appointed					Success rate*	
Year	F	M	Total	%F	%M	F	M	Total	%F	%M	F	M	Total	%F	%M	%F	%M
Professor																	
15	0	0	0	–	–	0	0	0	–	–	0	0	0	–	–	–	–
16	0	5	5	0	100	0	3	3	0	100	0	3	3	0	100	–	60
17	1	2	3	33	67	0	2	2	0	100	0	1	1	0	100	0	50
18	3	3	6	50	50	2	0	2	100	0	2	0	2	100	0	67	0
19	0	6	6	0	100	0	1	1	0	100	0	1	1	0	100	–	17
Reader																	
15	0	0	0	–	–	0	0	0	–	–	0	0	0	–	–	–	–
16	0	0	0	–	–	0	0	0	–	–	0	0	0	–	–	–	–
17	0	1	1	0	100	0	1	1	0	100	0	1	1	0	100	–	100
18	0	0	0	–	–	0	0	0	–	–	0	0	0	–	–	–	–
19	0	1	1	0	100	0	0	0	–	–	0	0	0	–	–	–	0
SL																	
15	3	7	10	30	70	1	5	6	17	83	1	5	6	17	83	33	71
16	3	3	6	50	50	3	2	5	60	40	3	2	5	60	40	100	67
17	4	12	16	25	75	3	5	8	38	62	3	4	7	43	57	75	33
18	7	6	13	54	46	2	3	5	40	60	1	2	3	33	67	14	33
19	5	4	9	56	44	5	3	8	62	38	1	2	3	33	67	20	50
SRF																	
15	0	1	1	0	100	0	1	1	0	100	0	1	1	0	100	–	100
16	0	0	0	–	–	0	0	0	–	–	0	0	0	–	–	–	–
17	0	2	2	0	100	0	2	2	0	100	0	1	1	0	100	–	50
18	0	0	0	–	–	0	0	0	–	–	0	0	0	–	–	–	–
19	0	0	0	–	–	0	0	0	–	–	0	0	0	–	–	–	–
ACL																	
15	41	41	82	50	50	26	22	48	54	46	14	14	28	50	50	34	34
16	19	30	49	39	61	14	4	18	78	22	10	2	12	83	17	53	7
17	20	36	56	36	64	8	12	20	40	60	7	6	13	54	46	35	17
18	45	49	94	48	52	18	28	46	39	61	10	21	31	32	68	22	43
19	39	44	83	47	53	15	18	33	45	55	6	11	17	35	65	15	25
ACRF																	
15	34	35	69	49	51	15	18	33	45	55	11	12	23	48	52	32	34
16	17	21	38	45	55	8	14	22	36	64	6	11	17	35	65	35	52
17	12	23	35	34	66	8	15	23	35	65	7	10	17	41	59	58	43
18	14	17	31	45	55	7	9	16	44	56	7	9	16	44	56	50	53
19	8	12	20	40	60	3	8	11	27	73	2	4	6	33	67	25	33

**For each gender, success rate = number appointed/number of applications*

(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.

- New starters are welcomed by their Institute Manager and line manager on their first day, assigned a mentor/buddy, given an institute induction pack, and introduced to key people within their Institute and the College.
- They are invited to a UoB Central Induction featuring EDI-related information such as staff networks. Fewer men attend (**Table 5.1.4**) (**2020 AP38**). AP

Table 5.1.4 MDS staff attendance at Central Induction by gender compared to new starters (including academic and professional services staff)

Year	2015	2016	2017	2018	2019
Female attendees	46	55	50	93	81
Male attendees	31	23	27	57	39
Female new starters	174	167	233	176	176
Male new starters	119	104	147	136	112
%F attending	**26**	**33**	**21**	**53**	**46**
%M attending	**26**	**22**	**18**	**42**	**35**

- Mandatory training at UoB consists of diversity in the workplace; health and safety; data protection and information security; and fire awareness. HR work with line managers to implement this training. Uptake will be recorded for the first time in our new HR system (**2020 AP08**). AP

Data	Low proportions of MDS new starters attended Central Induction in 2015 (26%F 26%M)
Action	New MDS induction process and checklist piloted in 2017, then operationalised (**2018 AP09**)
Impact	Increased attendance by 2019, particularly for women (46%F 35%M)

AP

- The MDS induction working group meets quarterly to review procedures and satisfaction, reporting into Professional Services Senior Management Team.
- Interviews were undertaken with new starters (2019) to gain feedback on the revised induction process. This showed an 80% satisfaction rate with no significant differences in gender, FT/PT, or grade.
- Staff receive a phone call from their Institute Manager three months after starting to review how their induction has gone (2020).

"When I started working at UoB in 2016 there was no induction process in place. I took a lot of time to find out how to get my ID card and access sorted, which mandatory trainings to attend, and who key staff in my institute and the college are. I felt a little lost."
Female academic, 2016

"When I started in 2019, the induction process, especially being greeted by a colleague first thing in the morning, made me feel welcome on my first day. It was very helpful to have contacts to go to and to be introduced to key people in the institute"
Female academic, 2019

(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.

- Academic staff apply for promotion through an annual process which is communicated to all staff via Institute Directors.
- MDS seeks to support out-of-round applications, particularly for R-only staff, to reflect the pace and progression of their career development following award of qualification and experience that can be obtained at ECR stages.

Table 5.1.5 MDS academic promotions by gender and grade

% Applied = Applied/No. potentially eligible; Success rate=number approved/number applied.

		2015/16		2016/17		2017/18		2018/19		2019/20	
Grade		**F**	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**	**M**
Professor	**Applied**	0	2	2	4	3	2**	2**	5	7	7
	Approved	0	1	2	4	2	0	2**	3	6	6
	No. SL/SRF/ Readers*	71	98	83	100	84	109	82	116	81	113
	%Applied	**0%**	**2%**	**2%**	**4%**	**4%**	**2%**	**2%**	**4%**	**9%**	**6%**
	Success rate	**0**	**50%**	**100%**	**100%**	**67%**	**0%**	**100 %**	**60%**	**86%**	**86%**
Reader	**Applied**	3	4	9	5	10	7	10**	6	9	8
	Approved	2	1	3	2	4	4	7	2	6	4
	No. SL/SRF*	66	84	73	84	75	91	68	93	65	92
	%Applied	**5%**	**5%**	**12%**	**6%**	**13%**	**8%**	**15%**	**6%**	**14%**	**9%**
	Success rate	**67%**	**25%**	**33%**	**40%**	**40%**	**57%**	**70%**	**33%**	**67%**	**50%**
SL/SRF	**Applied**	5	2	3	5	6**	3	4	3	5**	7
	Approved	3	2	3	2	3**	1	2	2	5**	6
	No. Lecturers/ RF(8)/ACRF*	145	141	154	132	148	137	155	152	167	167
	%Applied	**3%**	**1%**	**2%**	**4%**	**4%**	**2%**	**3%**	**2%**	**3%**	**4%**
	Success rate	**60%**	**100%**	**100%**	**40%**	**50%**	**33%**	**50%**	**67%**	**100%**	**86%**
All	**Applied**	8	8	14	14	19	12	16	14	21	22
	Approved	5	4	8	8	9	5	11	7	17	16
	No. of eligible staff*	216	239	237	232	232	246	237	268	248	280
	%Applied	**4%**	**3%**	**6%**	**6%**	**8%**	**5%**	**7%**	**5%**	**8%**	**8%**
	Success rate	**63%**	**50%**	**57%**	**57%**	**47%**	**42%**	**69%**	**50%**	**81%**	**73%**

**Number of academic staff at particular grades but not all are eligible for promotion (e.g. includes recently promoted or appointed).*
***Includes one PT staff member.*

Data	Low proportions of eligible staff applied for promotion in 2015 (4%F 3%M) with no female professorial applications (**Table 5.1.5**) Success rates were low in 2015 (63%F 50%M)
Action	Improved promotion advertisement and support (**Table 5.1.6**) (**2018 AP07**)
Impact	Increased proportions applying in 2019 (8%F 8%M) with female proportions increasing from 0% to 9% for Professor and 5% to 14% for Reader (**Figure 5.1.2**) Increased success rates (81%F 73%M)

- From 2015-2020 successful applications included 16 T-focussed staff (8F 8M), 23 clinical staff (11F 12M), and 3 PT staff (3F 0M) (**2020 AP24**).

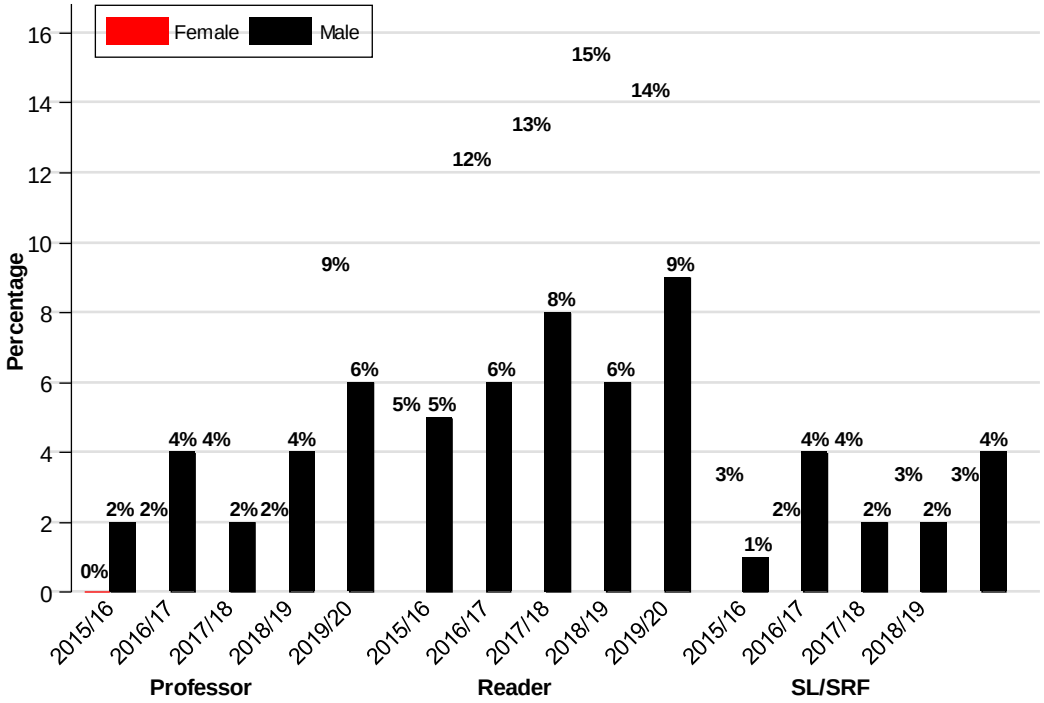


Figure 5.1.2 MDS academic promotions by gender, grade, and year (shown as a proportion of eligible staff)

- Promotion panels are held at institute-level; successful applications are reviewed at college-level, then approved at university-level.
- Unsuccessful applicants are invited to a feedback meeting with their Institute Director (and for senior promotions, the Head of College) to discuss how to improve their application next time.
- UoB policy is that promotions panels must actively consider family leave and career breaks as contextual information (if disclosed).
- Alongside teaching and research, promotion panels consider "administration and leadership" which includes outreach, committee membership, academic citizenship, and collegiality such as mentoring junior colleagues and tutoring students (aspects of work which female staff are more likely to undertake).
- Pay is standardised in line with University pay structures.

Data	Women were less satisfied with the academic promotion process than men in 2018 (25%F 83%M) Women received less support than men with writing their application, and men were less satisfied with the interview process in 2019 (38%F 85%M and 80%F 67%M, respectively)
Action	Improved promotion advertisement and support (**Table 5.1.6**) (**2018 AP07**)
Impact	Women are more satisfied with the academic promotion process in 2020 (**Table 5.1.7**) (but with a slight drop in male satisfaction – **2020 AP23**) Women receive more support writing their application in 2020 and women and men are both more satisfied with the interview process (**Table 5.1.8**)

AP

AP

"I have observed improvements in transparency of promotions procedures over the last 5 years"
Female Professor, 2020

Table 5.1.6 Continuous improvements to the MDS promotion process

Year	Alteration
2015	Promotion panellists required to have undertaken Recruitment and Selection training.
2016	Annual "Promotion Roadshow" introduced to deliver information and top tips.
	Prospective promotion candidates formally discussed by Institute Directors, the Deputy Head of College, and the College Head of HR.
2018	Promotion Roadshows feature an EDI representative and include a Q&A session with a recent successful promotion applicant.
	College Promotion Panels include an EDI representative.
2019	Institute Promotion Panels include an Institute EDI Lead.
	Guidance to support applicants approved and implemented in response to staff feedback, including introduction of institute "Career Development Leads" to mentor applicants (following successful pilot in the Institute of Applied Health Research).
	Institute-specific Performance and Development Review (PDR) review committees introduced to identify candidates ready for promotion and provide targeted encouragement and support.

Table 5.1.7 MDS EDI survey results relating to promotion by gender

	F% yes		M% yes	
Question	**2018**	**2020**	**2018**	**2020**
Were you satisfied with the academic promotion process (applicants in the last year)?	25	71	83	68

Table 5.1.8 MDS promotion survey results by gender

	F% yes		M% yes	
	2019	**2020**	**2019**	**2020**
Did you receive support with writing your application?	38	85	85	86
Did you feel that the interview gave you an opportunity to present your case for promotion?	80	67	100	100

(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.

- UoB does not have access to RAE 2008 data by gender.

Table 5.1.9 MDS staff eligible to be submitted, and actually submitted, to REF 2014

	F	M
Full Time Equivalent eligible to be submitted	129.8	260.4
% of total eligible to be submitted	33%	67%
Full Time Equivalent submitted	88.7	178.8
% submitted (of eligible)	67%	69%

- Similar proportions of eligible women and men were submitted to REF 2014 (**Table 5.1.9**). Fewer women were eligible as female-dominated areas including nursing and pharmacy did not submit.
- 100% of women and men on T&R contracts (**Section 4.2**) are eligible and will be submitted for REF 2021.
- UoB follows national REF guidelines in handling mitigating circumstances (such as family leave); staff are invited to disclose, and reduction of required outputs is communicated to staff and line managers.

Actions

2020 AP06 **Data and governance**

Formalise systematic monitoring of ACRF/ACL applications and acceptances split by internal/external candidates (and gender) to assess the efficacy of our internal training and continuity of our clinical academic pipeline

2020 AP08 **Data and governance**

Use the new HR system to monitor:

- Mandatory training completion

2020 AP19 **Staff pipeline**

Require an EDI representative on all non-clinical Lecturer/RF (8) interview panels to further reduce unconscious bias

2020 AP20 **Staff pipeline**

Work with NHS partners to encourage female applications for clinical posts and promotions

2020 AP23 **Staff pipeline**

Encourage staff to apply for promotion earlier in the year, introduce institute-level mock interviews, and run annual women-only promotion roadshows

2020 AP24 **Staff pipeline**

Publish case studies on College intranet pages to encourage increased applications from PT and T-focussed staff

2020 AP30 **Family and carers**

Introduce a policy to waive qualifying service period for family leave pay for clinical trainees (which can discourage movement between the NHS and Higher Education)

2020 AP38 **Organisation and culture**

Systematically follow up with all new starters to ensure they have completed their induction checklist within six months

SILVER APPLICATIONS ONLY

5.2 Key career transition points: professional and support staff

Women are overrepresented in professional services. Our evaluation of induction and promotion does not reveal significant issues, but staff satisfaction with these transition points will remain under regular review.

(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.

- New professional services staff follow the same induction process as academic staff (**Section 5.1**) with their line managers leading the process.
- Mandatory training uptake will be recorded for the first time in our new HR system (**2020 AP08**). AP
- The MDS induction working group reviews processes for both academic and professional services staff, and both of these groups were represented in the 2019 induction evaluation (**Section 5.1**) which revealed no differences in satisfaction based on gender.

"I was contacted before I started my role and made to feel very welcome. On my first day in post, there was a clear plan and an induction schedule to follow, which was very reassuring. 3 months after I started I was contacted by a member of HR to find out my experiences and if I felt all aspects of my induction had been covered."
Female professional services staff member, 2019

(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.

- As elsewhere in the sector, professional services staff gain promotion by applying to a higher grade post. Grades are determined by HR according to fixed, openly available criteria.
- Vacancies are openly advertised, and suitable staff are encouraged to apply by line managers.
- **Figure 5.2.1** shows MDS bucking the national trend of fewer women in senior professional services positions whilst aligning with the trend of male underrepresentation at other levels.
- Unsuccessful applicants are offered feedback via HR.

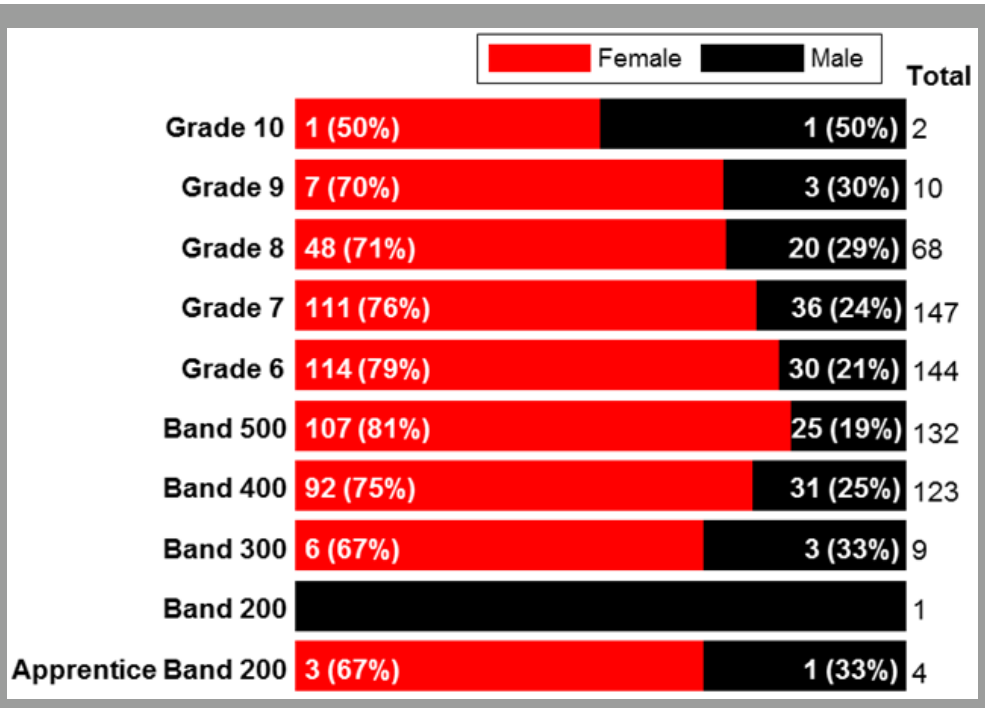


Figure 5.2.1 Non-technical professional services staff by gender and grade (2019)

Actions

2020 AP08 **Data and governance**

Use the new HR system to monitor:

- Mandatory training completion (2021)

5.3 Career development: academic staff

Training and career development allows MDS to address pipeline issues, and this is the focus when developing opportunities. Staff feedback indicates growing engagement and satisfaction; future plans involve improving male engagement with mandatory and management training, while developing bespoke leadership training for female staff to encourage higher numbers of senior promotions.

(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?

- University level training and development opportunities are provided by:
  - People and Organisational Development (POD)
  - Library Services: Research Skills
  - LinkedIn Learning institutional subscription (2020)
- College level training is provided by:
  - Postdoctoral/Early career Researcher Career development And Training (PERCAT)
  - Research Development Support Office
  - Fellowship and Grants Academy (FGA – 2018)
  - New Investigator Research Support and Engagement (NIRSE)
- Training opportunities are publicised via email, posters, TV screens, and weekly newsletters (**2018 AP09**) and discussed during appraisal.
- All training is organised in core hours due to staff feedback, with flexibility built in for staff with caring and/or clinical commitments.
- Feedback is captured within two days of training and is consistently good, with no difference between genders.
- POD attendance data cannot be split into academic and professional services. Results from the 2020 College EDI survey suggest that 36% of female and 24% of male academics attended a POD course in 2019; of these, 92% of each found the course useful.

Manager training

Data	Low numbers of MDS staff completed an appraisal training course in 2015/16 (30F 13M) (**Table 5.3.1**)
Action	Introduction of induction checklist including mandatory training in 2017 (**Section 5.1**)
Impact	Higher numbers of MDS staff undertook appraisal training in 2018/19 (67F 19M)

- Larger numbers of staff took Recruitment and Selection training immediately following its introduction in 2015.
- Women are consistently more likely than men to undertake manager training (**Table 5.3.1**), partly explained by higher numbers of women being recruited to junior managerial grades such as Lecturer as well as female staff being overrepresented in professional services (**2020 AP26**, **AP42**).

Table 5.3.1 POD manager training programmes with MDS uptake (combined academic and professional services) by gender

		2015/16		2016/17		2017/18		2018/19	
		F	M	F	M	F	M	F	M
Introduction to the PDR Process (Academic and Academic-Related)	#	14	6	13	8	19	5	36	13
	%	70	30	62	38	79	21	73	27
PDR for reviewers of support staff	#	16	7	24	6	26	1	31	6
	%	70	30	80	20	96	4	84	16
Recruitment and Selection	#	38	30	85	33	73	32	31	21
	%	56	44	72	28	70	30	60	40
Unconscious Bias	#	26	9	17	5	21	7	22	3
	%	74	26	77	23	75	25	88	12

Leadership

- The University offers a range of leadership programmes, including a BAME leadership programme (Aditi – 2016) and funding for the Aurora programme.
- **Table 5.3.2** shows growing numbers of women completing leadership training.
- PDRs for Lecturers and RFs have revealed demand for bespoke leadership training at earlier career stages (**2020 AP21**).

AP

Table 5.3.2 POD leadership courses with MDS uptake (combined academic and professional services) by gender

Key: A=academic, PS=professional services

	Suitable for	2014-15		2015-16		2016-17		2017-18		2018-19	
		F	M	F	M	F	M	F	M	F	M
Senior Leadership Programmes	A, PS	4	2	11	9	4	12	5	10	7	7
Research Team Leader Courses	A	1	2	2	4	7	2	11	4	5	7
ILM Levels 2,3,5	A, PS	-	-	3	0	4	2	8	7	3	0
Aurora (Women's Leadership Programme)	A	5	0	5	0	5	0	3	0	0	0
Aditi Leadership Programme	A, PS	-	-	-	-	1	1	1	2	1	0
Total number of leadership programme participants		**10**	**4**	**21**	**13**	**21**	**17**	**28**	**23**	**16**	**14**

ECRs

- The Life Science Researcher Development Manager (appointed 2019) has expanded development opportunities for researchers, particularly ECRs where there are larger numbers of female staff (**Section 4.1**). This has included reviewing the support available for ECRs to transition to academic roles and developing programmes for postdocs applying for their first grant (2019).
- ECRs receive weekly newsletters detailing development courses, deadlines for grant and fellowship applications, and schemes to support women in science.
- There were 53 events for ECRs (including clinical trainees) to choose from in 2019 (**Figure 5.3.1**).
- The community-led PERCAT team provide training and career development support for ECRs including programmes linked to the pipeline e.g. a "From PERCAT to Professor" conference to tackle issues surrounding career progression for postdocs, and an annual postdoctoral research gala to provide opportunities to showcase research and network.

- PERCAT runs monthly lunchtime masterclasses on tailored career development topics (average attendance 20 in 2019 (62%F 38%M)).
- Feedback from the 2018 PERCAT survey (not split by gender) showed that:
  - 66% of respondents felt PERCAT was supporting their career development.
  - 75% of respondents were likely or extremely likely to recommend PERCAT to their colleagues.
  - 88% of people who attended training found it relevant and helpful.

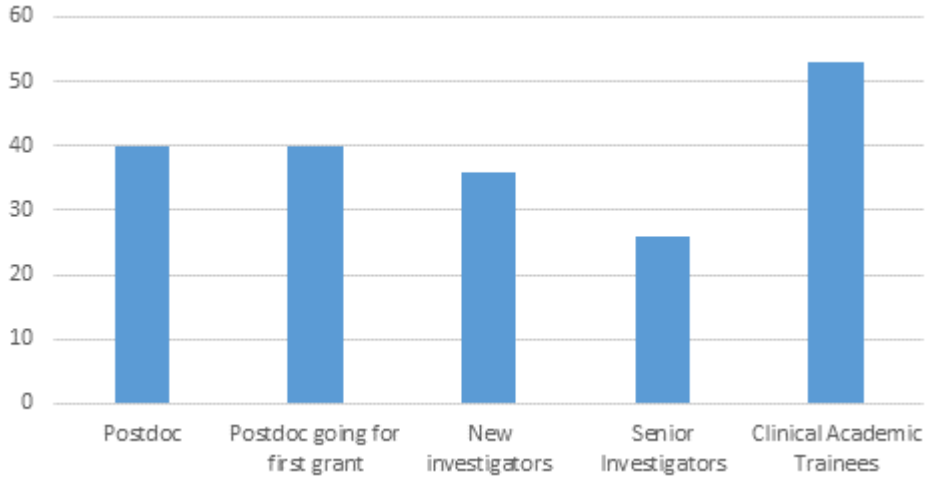


Figure 5.3.1 Number of MDS training/development events for different groups (2019)

"I am about to submit the paper which I started to write in the workshop and I have submitted 3 other papers, I found the techniques in the course to be very helpful"
Female "two day writing" attendee, 2019

Lecturers and above

- A New Investigator training package is in development for Lecturers and SLs to support them in their early career stages, including dedicated training for first-time Principal Investigators. This will be structured around development topics identified in individual feedback sessions and from surveys.
- For senior academic staff, shadowing and deputising opportunities are available (**Section 5.6**).

Table 5.3.3 MDS EDI survey results relating to training by gender (academic)

	F% yes		M% yes	
Question	**2018**	**2020**	**2018**	**2020**
Do you feel that you have access to relevant training and/or development programmes that will help you to meet your career needs?	83	80	79	86
Do you feel supported with your professional development within MDS?	N/A	73	N/A	74

Data	Men were slightly less likely to feel that they had access to relevant training and development programmes in 2018 (83%F 79%M – **Table 5.3.3**)
Action	Training opportunities have been strategically reviewed and developed in response to pipeline and appraisal issues (**2018 AP10**)
Impact	Male satisfaction with training and development programmes has increased from 79% in 2018 to 86% in 2020 (however, female satisfaction has slightly decreased from 83% to 80% – **2020 AP25**)

(ii) Appraisal/development review

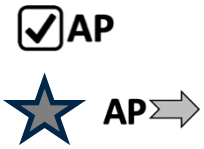
Describe current appraisal/development review schemes for staff at all levels, including postdoctoral researchers and provide data on uptake by gender. Provide details of any appraisal/review training offered and the uptake of this, as well as staff feedback about the process.

- All staff undergo annual mandatory PDRs. Uptake will be recorded for the first time in our new HR system (**2020 AP08**).
- Clinical academics have a joint clinical appraisal, which focuses on NHS service delivery. Their UoB PDR is held at least a week beforehand to ensure sufficient time and support for academic objectives.
- PDRs cover achievements in relation to previously agreed objectives; identify challenges and priorities for the coming year; consider long-term objectives and aspirations; and identify staff ready for promotion (**Section 5.1**).
- UoB reviews the PDR scheme every 3 years in partnership with trade unions (latest 2019).
- PDR reviewers undertake mandatory training (**Table 5.3.1**).
- PDRs are linked to the workload allocation model (**Section 5.6**) to ensure academic staff give equitable attention to different activities.

Table 5.3.4 MDS EDI survey results relating to appraisal by gender (academic) – more detailed questions asked in 2020

	F% yes		M% yes	
Question	**2018**	**2020**	**2018**	**2020**
How satisfied are you with the PDR process?	55	N/A	49	N/A
Do you receive constructive feedback on your performance within MDS?	N/A	69	N/A	75
Did your last appraisal/probationary/PDR meeting provide you with useful work goals and personal development goals?	N/A	73	N/A	82
Did your last appraisal/probationary/PDR meeting provide you with a clear plan for your future development?	N/A	62	N/A	72

Data	Staff were generally dissatisfied with their PDR process, with lowest satisfaction in men (55%F 49%M)
Action	The 2019 review saw the introduction of a new PDR form including mandatory discussions about development activities, recognition of outreach and EDI-related activities, and discussion about work-life balance (**2018 AP11**)
Impact	Staff satisfaction increased for both women and men (**Table 5.3.4**) (but with more work to do – **2020 AP26**)



(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.

- Enhancements to career progression support have focussed on the elements of the pipeline where MDS aimed to make the most difference:
  - High percentage of female ECRs compared to the female percentage of all academic staff – to support their career development
  - Female Lecturers and SLs – to support their career progression and contribute to improved gender balance at Reader and Professor levels
- The UoB Coaching Academy offers tailored support from a qualified coaching practitioner, and training for managers who wish to learn coaching skills. MDS has higher uptake by women (**Table 5.3.5**).

Table 5.3.5 POD Coaching with MDS uptake (combined academic and professional services) by gender

	2015/16	2016/17	2017/18	2018/19	2019/20
F	8	14	8	6	7
M	0	6	4	1	2

"Coaching has made me analyse why I behave in a certain way and given me insight into some of my actions and reactions to situations. It was invaluable in helping me to get a better work life balance."
Female academic, 2019

- Support for teaching practice development is provided by HEFi (Higher Education Futures Institute) (**Table 5.3.6**).

Table 5.3.6 MDS HEFi Course Completion Rates 2016-19

	2016/17		2017/18		2018/19	
Course	**F**	**M**	**F**	**M**	**F**	**M**
Postgraduate certificate in Higher Education (60 credit M level) ⇨ Fellowship of the HEA	2	2	4	2	5	0
Introduction to Academic Practice for Doctoral Researchers (20 credit M level) ⇨ Associate Fellowship of the HEA	0	0	2	1	1	1

- UoB has an Advance-HE accredited "**Beacon Scheme**" to award Fellowship as an alternative pathway to gaining Advance-HE accredited teaching qualification.
  - Beacon Professional Recognition allows anyone employed by UoB who teaches or supports learning to apply for recognition. Two thirds of staff in **Table 5.3.7** are ECRs or technicians.
  - The increasing focus on the Teaching Excellence Framework has increased the attractiveness of teaching qualifications as a route to an open-ended contract (which particularly benefits female ECRs, reflected in the greater number of women (14) holding the higher senior fellow awards compared to men (5)).
  - There are 80 MDS staff (49F 31M) enrolled on the Beacon scheme applying for all three levels of award (half ECRs or technicians).

Table 5.3.7 MDS staff gaining an Advance HE-accredited teaching qualification from 2016-2020

	2016		2017		2018		2019		2020		Total	
	F	M	F	M	F	M	F	M	F	M	F	M
AFHEA	-	-	1	3	2	4	3	1	3	1	9	9
FHEA	2	-	-	1	3	2	2	2	4	5	11	10
SFHEA	2	1	2	1	1	1	7	2	1	-	13	5
											33	24

Data	2017 Careers in Research Online Survey (CROS) data indicated that few staff had undertaken training in teaching or lecturing (37%F 32%M) (**Figure 5.3.2**)
Action	Improved advertisement of the Beacon Scheme (2017) and bespoke MDS Beacon Scheme workshops for eligible staff (2017 and 2018) (**2015 AP**)
Impact	2019 CROS data shows an increase in both women and men undertaking training in teaching or lecturing (50%F 59%M)

AP

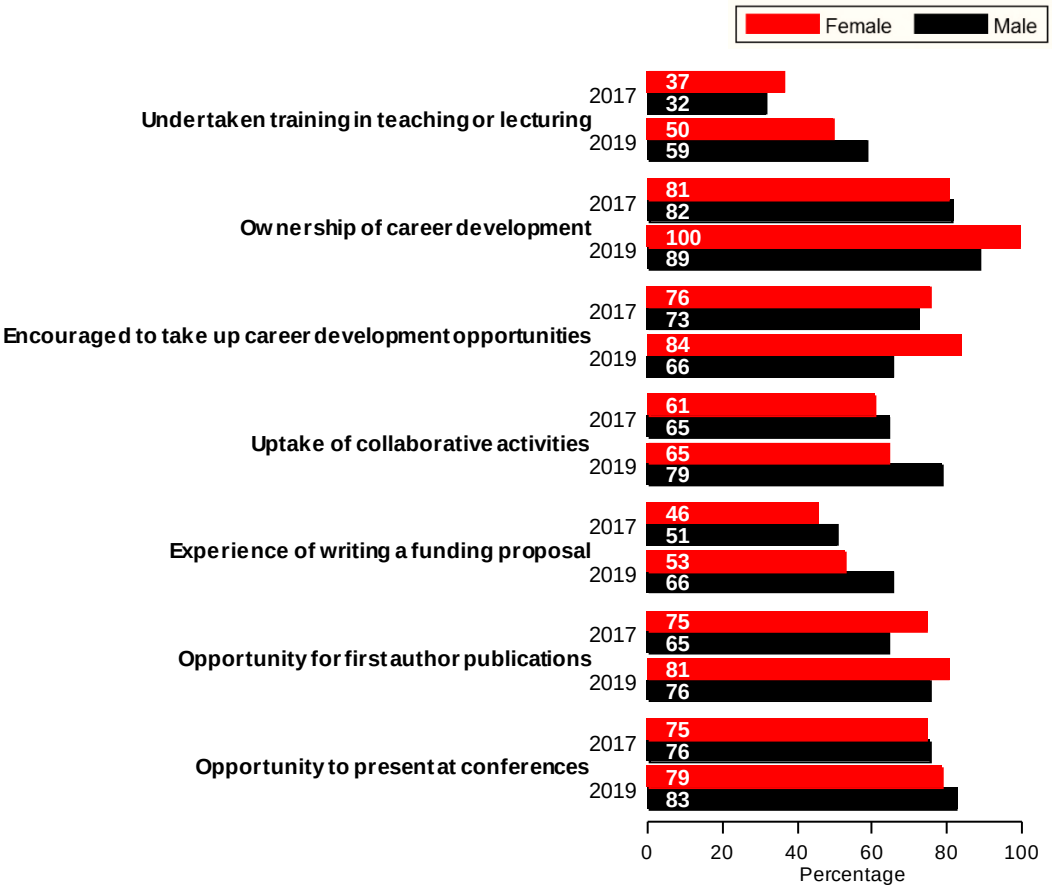


Figure 5.3.2 CROS data 2017 and 2019

Fellowship and Grants Academy (FGA)

- The FGA provides ECRs with support and training on their journey to research independence. It coordinates and signposts training opportunities, offers CV guidance and skills needed for research independence, and aims to address the persistent gap between numbers of male and female funding proposals.
- A 6-month pilot mentoring scheme took place for FGA members. To date 21 mentors (67%F 33%M) have been trained, ranging from newly independent fellows to senior professors. 21 mentees signed up (16F 5M) and eighteen pairs were matched (15F 3M mentees, 11F 6M mentors).
- Results from the FGA pilot mentoring survey indicated that 100% of participants were happy with the mentor they were matched with, would recommend mentoring to colleagues, and were satisfied with the programme, while 60% felt they were likely to achieve their goals or had already achieved their goals.
- There are 164 people (37%F 63%M) on the FGA mailing list (**2020 AP37**) of

  (61%F 39%M) have attended more than two events.

AP

New Investigator Research Support and Enterprise (NIRSE)

- NIRSE (2019) is a two-year rolling programme which provides a forum for MDS researchers setting up their first independent research group to discuss shared challenges with more experienced research group leaders.
- NIRSE currently has 80 new investigators signed up (50%F 50%M).

Academy of Medical Sciences Starter Grants

- Academy of Medical Sciences Starter Grants for ACLs are a crucial stepping stone in their transition to career development/establishment fellowships (**Table 5.3.8**).

Table 5.3.8 Applications for Academy of Medical Sciences starter grants with outcomes by gender

	2015	2016	2017	2018	2019
Applications					
F	2	3	3	4	2
M	5	2	2	2	4
Total	7	5	5	6	6
Awards					
F	0	0	1	2	1
M	2	0	1	2	1
Total	2	0	2	4	2

Data	0F applications prior to 2015
Action	Introduction of targeted encouragement to women to apply (2015) (**2015 AP**) Introduction of support panels for applicants to discuss their applications with senior academics prior to submission (2017)
Impact	Female applications increased 2015-2016 (but no awards) 44%F success rate 2017-2019

AP

(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).

UG

- Biomedical Science students receive career advice from Careers Network.
- Although the main objective for healthcare courses is to train students for vocational careers in clinical practice, MDS provides support to Birmingham Medical Leadership Academy and Birmingham Academic Medicine Society, student-led societies which organise frequent events (including national conferences and intercalation showcases) to raise awareness of and encourage careers in academic medicine.
- 196 summer studentships have been funded from 2016-2019 (144F 52M – **Table 5.3.9**) (2020 AP46). AP

Table 5.3.9 Summer Studentships awarded

2016/17		2017/18		2018/19	
F	M	F	M	F	M
51	23	57	21	36	8

- Academy of Medical Sciences funding (£54,665 over seven years) has enabled MDS to use the INSPIRE programme to support students considering careers in clinical academia. Through and alongside this, MDS has:
  - Hosted annual networking dinners, enabling students and academics to form mentoring relationships which have resulted in research opportunities for students (37F 12M in 2020 compared to 24F 16M in 2015).
  - Introduced a training programme for students applying to the Academic Foundation Programme (2020 AP05), including workshops on academic medicine and the application process, as well as interview preparation. AP

PGT

- Careers Network have a dedicated PGT Careers Adviser (2018).
- Careers Network provide online resources for PGT students with information about skills required for academic careers.

PGR

- Careers Network have a dedicated PGR Careers Adviser.
- HEFi runs a PGR course called “Introduction to Learning and Teaching in Higher Education” which addresses core aspects of teaching.
- PGR supervisors in MDS undertake training at both College and University-level to support them with the professional development of their PGRs, including providing advice on academic careers and transition to postdoctoral roles.

(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.

- MDS Research Development and Support Team provide support for all research staff with preparing and submitting applications, including:
  - disseminating funding opportunities;
  - running workshops targeting particular schemes, funders, or skills;
  - gathering and disseminating funder intelligence;
  - supporting grant application writing e.g. through grant clinics;
  - mock interviews to prepare candidates for interviews with funders.
- Dedicated support is provided to senior academics considering nomination for Fellowship of the Academy of Medical Sciences (FMedSci), with targeted encouragement to female and BAME candidates to apply.

Data	Women were underrepresented in staff gaining FMedSci (12 Fellows elected 1999-2009, 1F 11M)
Action	An improved support framework for FMedSci applicants was introduced in 2010
Impact	The proportion of female successful FMedSci applicants has increased to 30%F (10 Fellows elected 2010-2020, 3F 7M)

- "Research Fingerprinting" is part of UoB's Research Professional platform subscription (2020). This generates a weekly personal funding alert for researchers based on individual profiles.
- Staff receive support from a range of people if their application is unsuccessful, including the Research Development and Support Team and the Director of Research. Staff are encouraged to take ownership of the type of support required (e.g. improving the application or reworking it for other funders), rather than being constrained by a prescriptive framework.
- Since 2015, MDS staff have been awarded about 11,000 grants and research funding awards, with 32% of these awarded to women. There is an upward trend in the number of awards to women since 2015 (**Table 5.3.10**).
- FGA events are well attended by women (61%F 39%M, roughly proportional to the ECR population), and women submitted 70% of applications and represented 79% of awardees in 2019 (**Figure 5.3.3**). (35%F applications through the FGA were successful compared to 21%M.)

Data	Fewer eligible female PIs submitted grant applications (19%F 27%M in 2015) with lower success rates (34%F 44%M – **Table 5.3.10**)
Action	FGA introduced (2018)
Impact	29% of eligible female PIs submitted grant applications in 2019 (compared to 24%M) with a 42% success rate (43%M)

Table 5.3.10 Grant applications submitted by a Principal Investigator (not including co-applicants) with outcomes by gender

	2015	2016	2017	2018	2019
Number of eligible Principal Investigators (Lecturer/SL/SRF/Reader/Professor)					
F	118	139	147	149	144
M	208	203	214	226	225
Total	326	342	361	375	369
Number of applications*					
F	67	69	77	73	99
M	127	115	116	113	123
Total	194	184	193	186	222
Number of awards*					
F	23	29	33	40	42
M	56	54	58	53	53
Total	79	83	91	93	95
Success rates					
% F	34%	42%	43%	55%	42%
% M	44%	47%	50%	47%	43%
% Overall	41%	45%	47%	50%	43%
% of eligible Principal Investigators making an application*					
F	57%	50%	52%	49%	69%
M	61%	57%	54%	50%	55%
Total	60%	54%	53%	50%	60%
% of eligible Principal Investigators obtaining a grant funding award*					
F	19%	21%	22%	27%	29%
M	27%	27%	27%	23%	24%
Total	24%	24%	25%	25%	26%

** (applicants are only counted once in a given year even if they submitted more than one application)*

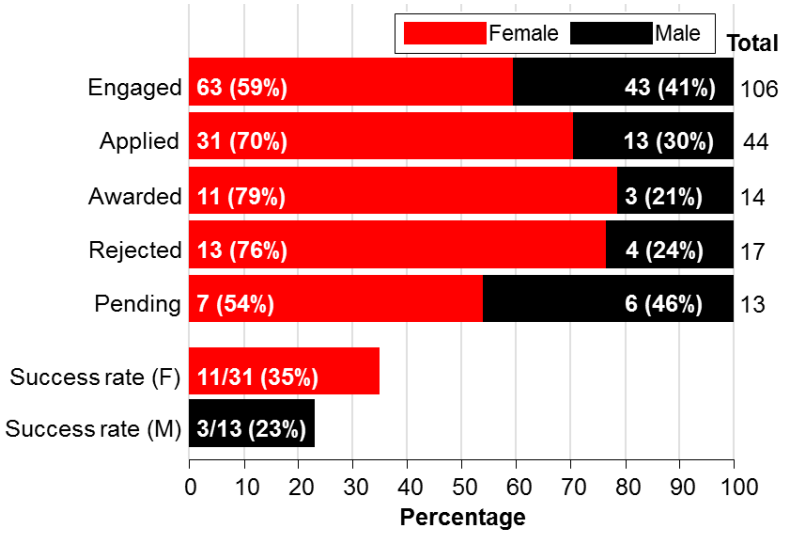


Figure 5.3.3 Impact of the FGA on funding applications

- Staff feedback suggests that women are more likely to apply for grants when they feel they meet all of the criteria, increasing the chance of success but potentially resulting in missed opportunities for more speculative higher risk awards. To mitigate this, MDS provides seedcorn funding for ECRs through the Wellcome Trust Institutional Strategic Support Fund:
    - Research Development Fund (**Table 5.3.11**).
    - Critical Data Award and Accelerator Fellowship (**Table 5.3.12**).

Table 5.3.11 College Research Development Fund applications (47%F applicants 46%F awardees 2015-20)

	Applied		Funded		Success rate	
	F	M	F	M	%F	%M
2015	21	17	11	6	52	35
2016	46	40	1	10	39	25
2017	20	31	7	15	35	48
2018	21	26	13	19	62	73
2019	16	27	11	18	69	67

Table 5.3.12 Total Wellcome Trust Institutional Strategic Support Fund applications October 2016 – November 2019

Response mode funding activity	Career Development	Frontier Science	Public Engagement	Total
Number of applications	132	4	25	161
M%	51%	75%	40%	51%
F%	49%	25%	60%	49%
Number of awards	42	4	16	62
M%	29%	75%	31%	36%
F%	71%	25%	69%	64%

Actions

2020 AP05 **Data and governance**

Begin to monitor gender split of successful and unsuccessful applications to the Academic Foundation Programme

2020 AP08 **Data and governance**

Use the new HR system to monitor:

- PDR completion

2020 AP21 **Staff pipeline**

Introduce a new leadership and mentoring programme called "MDS SUSTAIN" in partnership with the Academy of Medical Sciences for female RF (8)s, Lecturers, ACRFs, and ACLs, building on the successful FGA pilot mentoring scheme, and ring-fence 30% of the places for clinical academic staff

2020 AP25 **Staff pipeline**

Link training to PDRs to ensure that all staff are expected and supported to undertake a baseline amount of training each year

2020 AP26 **Staff pipeline**

Introduce MDS-specific PDR reviewer training (with specific reference to our revised College-level PDR forms) to supplement mandatory UoB training and facilitate consistent appraisal experience for MDS staff

2020 AP37 **Organisation and culture**

Build information about FGA, NIRSE, and the new female-only leadership and mentoring programme (MDS SUSTAIN) into academic inductions

2020 AP42 **Organisation and culture**

Explicitly incorporate outreach/WP and training/development into the workload allocation model and analyse breakdown by gender

2020 AP46 **Intersectionality**

Encourage more BAME medical and dental students to undertake summer studentships and intercalated degrees through targeted invitations, with a focus on women

SILVER APPLICATIONS ONLY

5.4 Career development: professional and support staff

Our aim is to further encourage male participation and satisfaction with professional services career development opportunities.

(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?

- Mandatory training is the same for academic and professional services staff (**Section 5.1**).
- Training advertisement and evaluation is the same for academic and professional services staff (**Section 5.3**).
- Combined uptake for academic and professional services staff is shown in **Table 5.3.1** for management courses and **Table 5.3.2** for leadership courses.
- The College EDI staff survey showed that 49% of female and 55% of male professional services staff had attended a POD course in 2019. Of these, 95% of women and 92% of men found the course useful.
- POD introduced a Management Development Programme for professional services staff in 2019. 6 MDS staff (5F 1M) have completed this.
- Male satisfaction with training has dropped in 2020 (**Table 5.4.1**) (**2020 AP28**).

AP

Table 5.4.1 MDS EDI survey results relating to training by gender (professional services)

	F% yes		M% yes	
Question	**2018**	**2020**	**2018**	**2020**
Do you feel that you have access to relevant training and/or development programmes that will help you to meet your career needs?	86	83	85	73
Do you feel supported with your professional development within MDS?	N/A	81	N/A	68

(ii) Appraisal/development review

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

- Professional services staff have mandatory annual PDRs to review achievements and progress against objectives agreed with their line manager. There is an annual 100% completion rate.
- UoB reviews the PDR scheme every 3 years in partnership with trade unions (latest 2019).
- PDR reviewers undertake mandatory training (**Section 5.3**).
- A 'levelling' process undertaken by Professional Services Senior Management Team ensures there is no gender-bias for financial rewards in terms of number rewarded and proportions of eligible staff.

Data	Staff were generally unsatisfied with their PDR process (50%F 50%M)
Action	The 2019 review saw the introduction of mandatory discussions about development activities, recognition of outreach and EDI-related activities, and discussion about work-life balance (**2018 AP11**)
Impact	Staff satisfaction increased for both men and women (**Table 5.4.2**) (but with more work to do – **2020 AP27**)

Table 5.4.2 MDS EDI survey results relating to appraisal by gender (professional services) – more detailed questions asked in 2020

	F% yes		M% yes	
Question	**2018**	**2020**	**2018**	**2020**
How satisfied are you with the PDR process?	50	N/A	50	N/A
Do you receive constructive feedback on your performance within MDS?	N/A	79	N/A	75
Did your last appraisal/probationary/PDR meeting provide you with useful work goals and personal development goals?	N/A	75	N/A	68
Did your last appraisal/probationary/PDR meeting provide you with a clear plan for your future development?	N/A	58	N/A	55

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

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

- Coaching is available via the Coaching Academy (**Table 5.3.5**).
- UoB has a "Birmingham Professional" staff development and engagement programme with events promoted by all-staff email and some organised within MDS (e.g. "An introduction to LGBT" and "EDI in professional services" (2019), "Work-life balance" (2020)).

"Initiatives taken by the EDI committee are not just a tick-box exercise as can be perceived by some, but rather that all members of staff should have a genuine desire to actively foster change for the good of all."
EDI in professional services attendee, 2019

"I have attended many Birmingham Professional sessions and have always found them really useful. They not only cover work aspects, but also wellbeing and general life aspects that interest me."
Female professional services staff member, 2019

- MDS Birmingham Professional events are always fully booked, and since September 2019 281 women and 61 men have attended (representing 48% of female and 30% of male professional services staff – **2020 AP28**). AP
- 39% of the 108 UoB attendees at the 2019 Higher Education Technical Summit were MDS staff (74%F 26%M compared to 65%F 35%M total technical staff numbers).

Actions

2020 AP27 **Staff pipeline**
Design and implement MDS PDR forms for Professional Services staff, drawing on best practice from the revised academic staff PDR form

2020 AP28 **Staff pipeline**
Explicitly encourage Professional Services staff to attend Birmingham Professional events through their PDR

5.5 Flexible working and managing career breaks

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

MDS has reviewed and continuously improved policies and practice in relation to flexible working and career breaks. Our main aims are to ensure that family leave is as streamlined and uncomplicated as possible, and to promote uptake of Shared Parental Leave (SPL) and flexible working by men (to normalise family friendly working and to encourage family responsibilities to be shared equitably).

(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.

- HR meet with all staff planning maternity/adoption leave to discuss their circumstances and answer questions.
- College EDI Committee created a family leave information pack (2019) to signpost staff to available support (**2018 AP14**) (2020 AP09). This pack encourages staff to discuss communication preferences and whether to apply for promotion during leave with their line manager. ☑AP
- Staff on FTCs who have been employed by UoB for one year prior to leave are no longer required to repay University maternity/adoption pay if they do not return because their contract expires (2019).
- Designated parking is provided to facilitate attendance at antenatal appointments and Keeping In Touch (KIT)/Shared Parental Leave In Touch (SPLIT) days (2016). AP⇨

"With my first pregnancy there was limited support and I had to be very proactive to get appropriate information. This was different with my second pregnancy. I valued the awareness senior staff had to prepare my leave and the support I received to get on with my work and enjoy my pregnancy."
MDS staff parent, 2019

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

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

- Workload is covered for staff on maternity/adoption leave, with backfill provided by a College fund to reduce pressure for staff on leave to return early.
- Staff are encouraged to take KIT/SPLIT days. Uptake will be recorded for the first time in our new HR system (2020 AP08). AP⇨
- The MDS Protect and Support scheme was introduced in 2019 following a 3-year pilot. This supports clinical staff on family leave to bridge their research, usually by hiring a technician. To date, 4 female ACLs have received funding.
- Three female Lecturers have taken part in a pilot to extend this to non-clinical academic staff (2020 AP32) (2019). AP⇨

"Being able to employ a lab technician whilst on maternity leave has meant that my research continues during this time. This ensures that when I return to work I will have preliminary data for grant applications and means I can continue to progress my career"
Female academic, 2019

- MDS has a dedicated breastfeeding/expressing room, and (since 2019) a "privacy pod" in another building which can be used for breastfeeding/ expressing (e.g. during KIT days) and for pregnant staff to rest (**Figure 5.5.1**).
- Users of the breastfeeding/expressing room are invited to complete an optional log to monitor usage (2019) – this has been completed 31 times.
- The College has a reciprocal arrangement with UHBT that MDS staff can use their breastfeeding facilities.

Figure 5.5.1 Privacy Pod

"I kept in touch and I was kept in the loop for everything which meant I didn't struggle when coming back from leave."
Female academic, 2020

"I attended several KIT days in the lead up to coming back to work which helped prepare me for the workload and eased me back into my role nicely."
Female academic, 2020

(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.

- UoB allows six months remission from teaching or administration for academic staff, covered by the same fund as workload cover during leave and promoted through the family leave information pack. Uptake will be recorded for the first time in our new HR system (**2020 AP08**). AP
- HR meet with staff prior to return to create a support plan which could include temporary reduction of hours, change in working pattern, or change in duties.
- MDS hosted a workshop on 'Family and Academia' in 2019, with 100% of attendees stating that they found this useful or very useful (**2020 AP39**). AP
- MDS provides Wellcome Trust Institutional Strategic Support Fund "continuity funding" to support academic staff returning from long-term absence (including family leave).
- The MDS Parents and Carers Fund provides funds for caring costs for staff attending conferences and external development events.

Data	No staff applied for continuity funding before 2019 Few eligible staff applied to the MDS Parents and Carers Fund, particularly in 2018 (4F 0M) (**Table 5.5.1**), and few staff were aware of it (37%F 26%M) (**Table 5.5.2**)
Action	Advertisement of these funds was improved, particularly by promoting them in the family leave information pack and staff induction pack MDS Parents and Carers Fund was relaunched with eligibility expanded to include carers and professional services staff (2019)
Impact	Three staff have successfully applied for continuity funding since 2019 (3F 0M) Uptake and awareness of the MDS Parents and Carers Fund have each increased (9F 2M and 40%F 32%M respectively) (but with more work to do – 2020 AP33)

AP

AP

Table 5.5.1 Approved applications to MDS Parents and Carers Fund by gender

F			M		
2017	**2018**	**2019**	**2017**	**2018**	**2019**
6	4	9	2	0	2

Table 5.5.2 MDS EDI survey results relating to MDS Parents and Carers Fund by gender

	F% yes		M% yes	
Question	**2018**	**2020**	**2018**	**2020**
Are you aware of the MDS Parents and Carers Fund to help working parents and carers pay for childcare/other caring costs while they attend external events?	37	40	26	32

"The Parents and Carers Fund is a very good example, and shows that the College will facilitate carers to take career enabling opportunities which otherwise may not be practical."
Male staff member, 2020

"The fact that the College acknowledges and supports caring responsibilities is energising and motivating and makes attending important events easier psychologically."
Female professor, 2020

(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.

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

- 71% of non-returners were staff who found another job due to their FTC expiring during leave (**Table 5.5.3**).
- Some staff returned then left due to the expiry of FTCs.
- These data represent high return and retention rates (in comparison to overall academic retention rate (**Section 4.2**) which does not include expiry of FTCs).

Table 5.5.3 MDS maternity return rate from 01/2014 – 12/2018

Professional services									
On maternity leave		Returned to work		Staff retention					
				After 6 months		After 12 months		After 18 months	
2014	23	22	96%	21	91%	18	78%	17	74%
2015	14	12	86%	11	79%	11	78%	11	78%
2016	13	12	92%	12	92%	11	85%	10	77%
2017	15	13	87%	13	87%	12	80%	-	-
2018	13	12	92%	-	-	-	-	-	-
Total	**76**	**69**	**91%**	**57**	**88%**	**52**	**80%**	**38**	**76%**
Academic									
On maternity leave		Returned to work		Staff retention					
				After 6 months		After 12 months		After 18 months	
2014	23	23	100%	21	91%	21	91%	19	83%
2015	31	29	94%	25	81%	23	74%	19	61%
2016	29	29	100%	27	93%	22	76%	22	76%
2017	22	19	86%	17	77%	14	64%	-	-
2018	32	28	88%	-	-	-	-	-	-
Total	**137**	**128**	**93%**	**90**	**86%**	**80**	**76%**	**60**	**72%**

(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.

- The College uses the term "partner" leave rather than "paternity" leave to be more inclusive of LGBT families, following staff feedback. Uptake will be recorded for the first time in our new HR system (2020 AP08). AP
- Two women took adoption leave (both in 2018) and two men took SPL (2018 and 2019) (**2018 AP17**) (2020 AP34). All returned and remain at MDS. ☑AP
- SPL pay is enhanced beyond statutory provision (2018) in line with existing enhancements to maternity/adoption pay to encourage partners to share leave and provide staff with flexibility in childcare arrangements (**Table 5.5.4**). AP
- SPL is promoted in the family leave information pack so that staff who would otherwise take partner leave can find out about SPL more easily.
- **Table 5.5.5** suggests high satisfaction for both men and women with their experience of family leave. However, women felt less supported (2020 AP31). AP

"I took SPL for the birth of my third daughter in 2019. It came up as an option whilst having lunch with our head of department. The intranet information on the topic was clear and my colleagues worked closely with me to set this up. It was a unique experience, even though I considered myself an experienced dad! Being able to share those first months with the family without the pressures from work allowed me to provide much-needed day-to-day help and contributed to bonding as a family."
Male staff member and third time father, 2019

Table 5.5.4 UoB family leave pay

Type of leave	Maternity/Adoption	Partner	Shared Parental
Number of weeks at full pay	18	2	18

Table 5.5.5 MDS EDI survey results relating to family leave by gender (questions asked for first time in 2020)

Question	F% yes	M% yes
Did you feel supported by the College when planning your leave?	80	94
Did you find it easy to find information you needed to help you plan your leave?	87	89
Did you discuss how your workload would be covered during your leave with your line manager?	80	78
Were you aware of your entitlement to KIT or SPLIT days?	87	100
Did you feel well supported during your leave?	73	94
Did you find the degree of contact with the University during leave appropriate?	80	83

(vi) Flexible working

Provide information on the flexible working arrangements available.

- Formal flexible working applications are made to line managers using a standard HR process. Uptake will be recorded for the first time in our new HR system (**2020 AP08**). AP
- Options are outlined on the intranet and include part time, working from home, reduced hours (temporary or permanent), staggered start and finish times, job share, term-time only, seasonal, compressed hours, and flexible working patterns to facilitate breastfeeding.
- Changes to working patterns can be adopted for a trial period then reviewed.
- These options are promoted by the Institute Directors and Senior Management Team and reviewed/discussed routinely as part of one-to-one discussions.
- Many staff work flexibly on an informal basis agreed with line managers
- Men are less aware of flexible working options (**Table 5.5.6**). (**2020 AP35**). AP

Table 5.5.6 MDS EDI survey results relating to flexible working by gender

	F% yes		M% yes	
Question	**2018**	**2020**	**2018**	**2020**
Are you aware of the flexible working options available to staff?	72	78	71	68
Do you currently have formal flexible working arrangements?	N/A	20	N/A	12
Do you currently have informal flexible working arrangements?	N/A	34	N/A	28

"I am able to pursue my career whilst also being a present mother - it's wonderful!"
Female academic, 2020

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

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

- Requests for PT working after career breaks for any reason are accommodated. Staff are then entitled request to transition to FT working, including phased transition if desired, at any time (**2020 AP36**). AP

"I have a great line manager who helped me with a phased return to work after having time off."
Male academic, 2020

Actions

2020 AP08 **Data and governance**

Use the new HR system to monitor:

- KIT/SPLIT days
- Workload remission
- Partner leave
- Flexible working arrangements

2020 AP09 **Data and governance**

Gather evidence on satisfaction with:

- Family leave information pack

2020 AP31 **Family and carers**

Ensure that ECRs receive targeted advertisement for opportunities to provide cover for teaching/admin responsibilities during family leave

2020 AP32 **Family and carers**

Introduce a non-clinical version of the Protect and Support scheme

2020 AP33 **Family and carers**

Review the MDS Parents and Carers Fund by:

- Increasing the claim limit
- Opening it to PGRs
- Expanding its scope to include KIT/SPLIT days
- Expanding its scope to include influential external committee meetings

2020 AP34 **Family and carers**

Further encourage take-up of partner leave entitlement and SPL using expert Birmingham Business School-led research to inform our practice (e.g. by publishing case studies of people who have taken SPL on College intranet pages), and invite all staff taking partner leave to meet with HR to discuss SPL

2020 AP35 **Family and carers**

Publish case studies of people with flexible working arrangements, with a focus on men, on College intranet pages

2020 AP36 **Family and carers**

Develop a buddy scheme for staff who are new to flexible working, or returning to FT work after a career break

2020 AP39 **Organisation and culture**

Run annual Family and Academia events and broaden scope to include all academic staff with a focus on ECRs

5.6 Organisation and culture

Survey results have informed our analysis of organisational culture. While progress has been made, particularly by College EDI Committee, there are a number of areas for improvement, including support for staff undergoing menopause and ensuring all staff and students feel included on a day-to-day basis.

(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.

- MDS appointed an Outreach, Equality and Diversity Officer (2018) to support academic leads with WP and EDI objectives.
- College EDI Committee (formed 2018) oversees strategic EDI initiatives. This facilitates best practice sharing across institutes and encourages College-wide culture change (assessed by the SAT).
- This committee includes academic EDI Leads from each institute (5F 3M); professional services EDI Leads (2F 0M); representatives from UoB's BAME, Parents & Carers, Rainbow, Women's, and Enabling Staff Networks; student and student-facing representatives; and NHS representatives (**2018 AP05**). ☑AP
- College EDI Committee reports to College Board. The student representative is one of the University "Student Equality and Diversity Ambassadors" which helps to link activities to University-wide initiatives.
- The EDI leads are diverse in terms of gender, career stage, and other protected characteristics. They provide input to EDI events and initiatives (e.g. "Bring Your Family to Work Day" (**Figure 5.6.1**), which has become an annual event in response to staff feedback following a 2019 pilot).
- Senior Management roadshows (introduced 2018) and termly College Assemblies regularly feature Athena SWAN/EDI.
- A dedicated equality Twitter account @MDSEquality was created in addition to updated webpages (2018), and all MDS staff newsletters include monthly EDI updates (**2018 AP02**) (2019). ☑AP
- The volunteer-led student Medical Society includes dedicated groups for African Caribbean, Christian, Jewish, Muslim, international, and LGBT students.
- Many clinical staff and healthcare students work at UHBT, so we actively share best practice, ensure that policies are streamlined and equitable, and jointly address EDI issues. Examples of this collaboration include the co-organisation of Black History Month and LGBT History Month conferences in 2019 (**2018 AP04**). ☑AP
- A 2018 evaluation of medical students' experience of clinical placements revealed persistent (though nationally consistent) discrimination and harassment towards ~10% of students, primarily women. This led to the development of a College-wide online form for students to report such incidents, encouraging increased reporting and increased faith that reports will be acted upon.

Figure 5.6.1 Lab activities at Bring Your Family To Work Day

Table 5.6.1 MDS EDI survey results relating to culture by gender

	F% yes		M% yes	
Question	**2018**	**2020**	**2018**	**2020**
Do you find the current EDI communications within the College useful?	37	56	31	58
Are you aware of the College EDI website?	19	63	15	62
Do you feel that any issues raised to your EDI Lead are/would be taken seriously and acted upon?	84	91	97	97
Do you feel that the College listens to and responds to the views of staff?	N/A	74	N/A	77

"MDS is extremely inclusive. This is driven from the top down and has become an expectation and is embedded within our culture."
Male professional services staff member, 2020

Data	Few staff found College EDI communications useful in 2018 (37%F 31%M) (**Table 5.6.1**) Few staff were aware of the College EDI website (19%F 15%M) Women were less likely in 2018 to feel that issues raised to their EDI Lead would be taken seriously and acted upon (84%F 97%M)
Action	Improved EDI communications infrastructure (**2018 AP01**), and increased promotion of EDI Leads and College EDI Committee (**2018 AP05**)
Impact	More staff find College EDI communications useful in 2020 (56%F 58%M) More staff are aware of the College EDI website (63%F 62%M) Women are increasingly likely to feel that issues raised to their EDI Lead would be taken seriously and acted upon (91%F)

☑AP

"Since the new structure of the EDI committee and additional professional services support the communications and awareness of EDI initiatives and events have definitely increased"
Male professional services staff member, 2020

(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 written and approved at University-level, including Fairness and Diversity; Harassment and Bullying; and Grievance.
- The College HR team grew from two to five people (2018), ensuring that HR policies are locally embedded and consistently in MDS.
- Policies are cascaded to staff via management courses/training programmes, regular HR workshops, and line manager's guidance toolkits.
- MDS has a zero tolerance approach to discrimination and harassment, and information on harassment is given in inductions, handbooks, and College webpages (all of which are reviewed annually).
- The number of staff (particularly women) experiencing discriminatory behaviour has decreased (**Table 5.6.2**). However, women are less satisfied with inclusion and day-to-day interactions than men (**2020 AP40**). AP

Table 5.6.2 MDS EDI survey results relating to discrimination by gender

	F% yes		M% yes	
Question	**2018**	**2020**	**2018**	**2020**
In the past year, have you experienced any behaviour in MDS which you would describe as discriminatory?	23	10	14	8
Do you feel overall that MDS has a zero tolerance approach to discriminatory behaviour?	N/A	73	N/A	79

(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.

- Most committee membership (**Figure 5.6.2**) is linked to named leadership positions which are openly advertised by all-staff email (**2018 AP19**) (2019). ☑AP
- Opportunities are created to prepare for leadership roles (informed by PDRs, promotions, and succession planning). These include shadowing, deputising, and encouragement to attend senior leadership programmes.
- Fewer women than men feel that appointment processes are open and transparent (**Table 5.6.3**) (**2020 AP41**). AP

Data	In 2017 women were underrepresented on: • College Board (32%F 68%M) • College Research Committee (38%F 62%M) • College Promotion Panel (40%F 60%M)
Action	All leadership positions openly advertised by all-staff email since 2019 (**2018 AP19**) Targeted invitations to senior women
Impact	In 2019: • Improved gender balance on College Board (42%F 58%M) • College Research Committee gender balanced (50%F 50%M) • College Promotion Panel near gender balance (56%F 44%M) (**Table 5.6.4**)

AP

Table 5.6.3 MDS EDI survey results relating to committee vacancies by gender (questions asked for first time in 2020)

Question	F% yes	M% yes
Do you feel that the College has an open and transparent mechanism for filling vacancies?	56	63

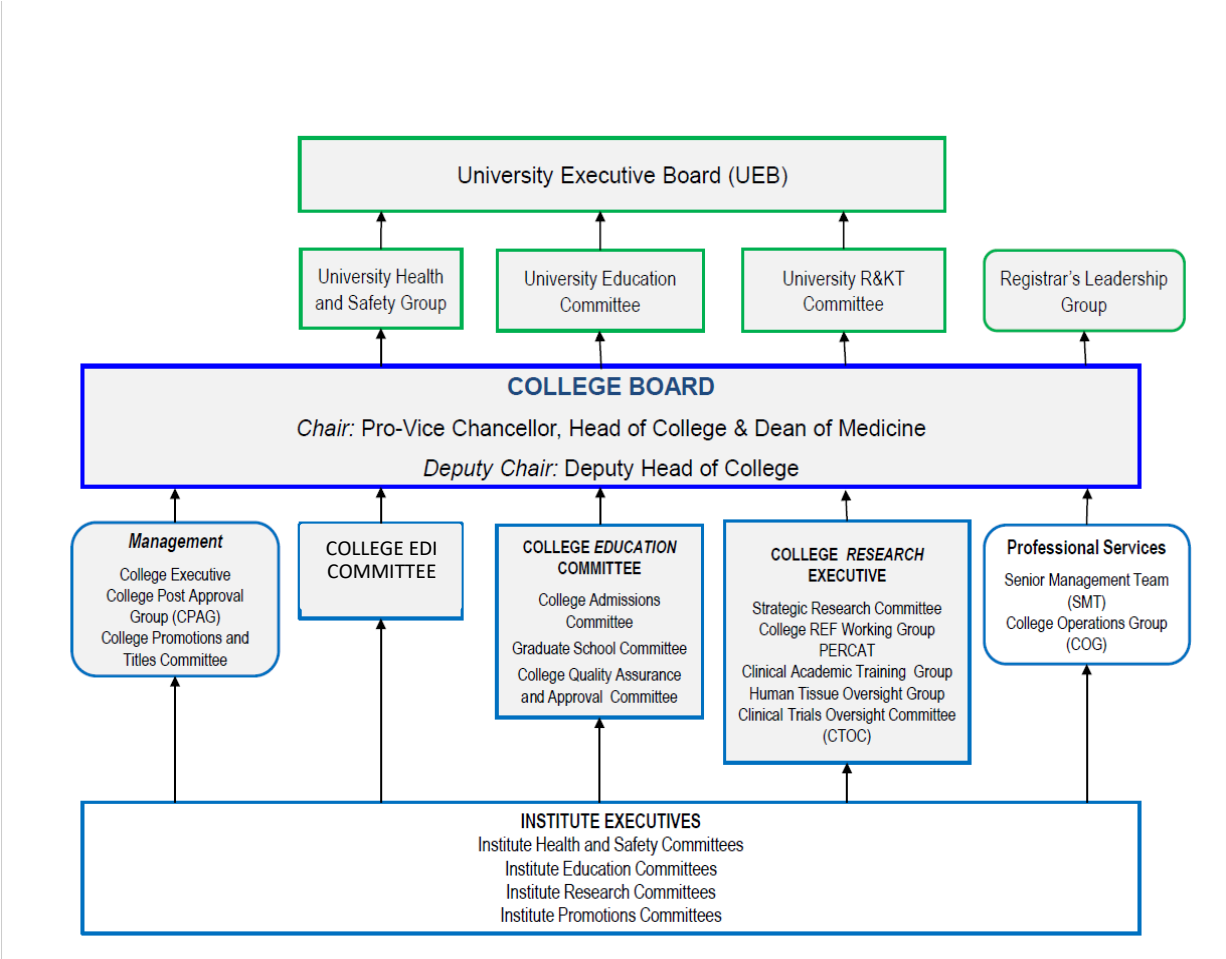

Figure 5.6.2 Governance structure of the major College committees

Table 5.6.4 Gender and staff type breakdown for MDS committee membership

	F			M			Academic			Professional services			Student			External		
Committee (gender of chair)	17/18	18/19	19/20	17/18	18/19	19/20	17/18	18/19	19/20	17/18	18/19	19/20	17/18	18/19	19/20	17/18	18/19	19/20
College Board (M)	32%	33%	42%	68%	67%	58%	77%	78%	79%	23%	22%	21%	-	-	-	-	-	-
College Education Committee (M)	24%	45%	48%	76%	55%	52%	70%	64%	67%	24%	27%	24%	6%	9%	9%	-	-	-
College Research Committee (M)	38%	53%	50%	62%	47%	50%	67%	67%	67%	28%	30%	30%	-	-	-	5%	3%	3%
College Promotions Panel (M)	40%	50%	56%	60%	50%	44%	90%	90%	89%	10%	10%	11%	-	-	-	-	-	-
College Post Approval Group / Finance Committee (F)	38%	50%	50%	62%	50%	50%	50%	50%	50%	50%	50%	50%	-	-	-	-	-	-
Professional services Senior Management Team (F)	71%	71%	71%	29%	29%	29%	-	-	-	100%	100%	100%	-	-	-	-	-	-
College EDI Committee (F)	N/A	71%	76%	N/A	29%	24%	N/A	62%	57%	N/A	24%	29%	N/A	5%	5%	N/A	9%	9%

(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?

- 105 MDS academics (39%F 61%M) hold positions on influential funder panels (2018). Half are professors, and the other half are grade 8-9 staff.
- The MDS Research and Knowledge Transfer Office systematically identify and promoted external committee opportunities (2018), with targeted encouragement for female academics to apply.
- MDS has several funder-specific committees (separate to governance structure) whose remit includes promoting panel/board vacancies.
- The revised PDR process (**Section 5.3**) includes discussion of external committee membership and leadership positions.
- External committee membership is recognised in Workload Allocation Model and promotion criteria (within "citizenship").
- Survey results (**Table 5.6.5**) suggest that women are more likely to perceive barriers to participation, including family commitments and the location/timing of meetings (**2020 AP33**).

AP

Table 5.6.5 MDS EDI survey results relating to external committee membership (questions asked for first time in 2020)

Question	F% yes	M% yes
Do you perceive barriers to participation in external committees?	31	18

"I have appreciated the encouragement and support within MDS that has allowed me to take up external roles within the University and nationally."
Female academic, 2020

"I have had the opportunity to be involved in high profile national activities that required the approval and support of the head of college. I have always had this approval, and it has always been accompanied by a discussion of what extra support I would need to carry out the work."
Female academic, 2020

(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.

- Our workload model includes teaching, research, administration, citizenship, and College roles (including EDI Leads and SAT members).
- The software cannot currently monitor equality issues (**2020 AP10**). However, the model is linked to PDRs which are used by Institute Directors to capture teaching load and maintain equal distribution across different staff groups. AP
- The model was created in 2019 by a committee that reports into College Board, led by the Director of Education and including academic representation from each institute and an EDI representative.
- The model will be reviewed annually by this committee and approved by College Board.
- Points are allocated using data (e.g. number of teaching hours supplied by module leads) and self-declaration (e.g. number of hours dedicated to College leadership roles).
- The model allows for role rotation and workload rebalancing to accommodate personal circumstances such as family leave or caring responsibilities.
- Since the model is new, perceptions of its efficacy have not been assessed yet (**2020 AP09**). AP

(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.

- College policy is that core internal meetings should be held between 10-3pm to accommodate staff with caring responsibilities, and on different days and different times of day to accommodate staff who are PT, clinical, or flexible workers. Meetings are held outside these hours only if all members agree on a suitable alternative.
- Satisfaction data is not available (**2020 AP09**). AP
- Academic staff can feed into timetabling processes to avoid being allocated teaching at specific times (e.g. school finish times).
- All key events are planned several weeks in advance, such as the College Christmas event which is always held during core hours during a week with fewest teaching responsibilities.
- Ad hoc social gatherings are organised by individual teams and tailored to the requirements of their team members.

"My team use Doodle polls to organise meetings. Attendance can be in person, dial in, or through web-based platforms. This enables me to work from home during school holidays and hold later meetings with overseas partners. Team socials are always during the day."
Female academic, 2019

(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.

- MDS aims to provide a diverse range of role models, recognising the importance of:
  - Female role models to demonstrate successful careers for ECRs.
  - Male role models to improve gender balance of prospective students.
- The College runs gender-specific WP activities including:
  - Healthcare Heroes (2019) to showcase men in healthcare careers to year 9 boys (this will become an annual event led by our outreach team).
  - A "men in nursing" social media campaign (International Men's Day 2019).
  - The launch of children's book "My daddy is a nurse" (2020) which was read to a local primary school class by a male nursing student, followed by a male-dominated panel Q&A (**Figure 5.6.3**).

Figure 5.6.3 Nursing student panel at the book launch of "My daddy is a nurse" in February 2020.

- Publicity materials, including course brochures, social media, and webpages, are annually reviewed to ensure that diversity (including gender balance) is reflected while avoiding imagery which promotes gender stereotypes.
- Since 2017, the "Distinguished Lecture Series" has included 40%F speakers.
- External institute-level seminar speakers are monitored by gender (**2018 AP10**) (2019). This shows a gender imbalance in most institutes, predominantly favouring men (**Table 5.6.6**) (**2020 AP43**).
- Birmingham Heroes (**Figure 5.6.4**) is a series of UoB campaigns to demonstrate the relevance of our research to the public. All eleven MDS campaigns have deliberately showcased equal numbers of women and men.

AP

AP

Table 5.6.6 Gender of external seminar speakers in 2019*

Institute	F	M	Total	F%	M%
Institute of Applied Health Research	11	3	14	79%	21%
Institute of Cancer and Genomic Sciences	6	16	22	27%	73%
Institute of Cardiovascular Sciences	6	9	15	40%	60%
Institute of Inflammation and Ageing	5	6	11	45%	55%
Institute of Immunology and Immunotherapy	10	15	25	40%	60%
Institute of Metabolism and Systems Research	8	13	21	38%	62%
Institute of Microbiology and Infection	12	24	36	33%	67%
Total	58	86	144	40%	60%

**(Institute of Clinical Sciences not shown as no seminars before 10/2019*

Figure 5.6.4 Example of a Birmingham Heroes campaigns featuring MDS staff

(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 is recognised in workload allocation and promotion criteria (within "citizenship") (**2020 AP42**). AP
- The main MDS outreach programmes are geared towards WP, so only West Midlands state school students are eligible. A small number of eligible schools are single-sex. For reasons outlined in **Section 2**, predominantly female students engage with these programmes (**Table 5.6.7**) (**2020 AP11, AP45**). AP
- Informal outreach activities such as school visits are also arranged within MDS, delivered both by staff and a student widening access society.
- As men are underrepresented on UG programmes, MDS encourages men to support outreach wherever possible (also helping to redress the balance for female staff who are often overrepresented in outreach) (**Table 5.6.8**).
- The College involves alumni and local healthcare professionals (who support this work voluntarily) to reduce the workload for underrepresented groups (e.g. male nursing staff and students).

Table 5.6.7 Students completing main MDS outreach programmes by gender

	2014-15		2015-16		2016-17		2017-18		2018-19	
Activity	**F**	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**	**M**
Access to Birmingham	124	45	120	45	116	59	120	50	164	55
Routes to Professions: Medicine	47	25	47	23	49	24	46	27	57	28
Routes to Professions: Dentistry	N/A	N/A	N/A	N/A	5	4	11	5	20	14
Total	171	70	167	68	180	87	177	82	241	97
Percentage	71	29	71	29	67	33	68	32	71	29

Table 5.6.8 Proportions of MDS staff who reported active engagement with outreach by gender and grade

	F		M	
Grade	**2018**	**2020**	**2018**	**2020**
Professor	20%	29%	42%	33%
Reader	0%	40%	0%	75%
SRF	0%	0%	0%	67%
SL	47%	17%	45%	27%
RF	34%	0%	20%	0%
Lecturer	53%	33%	45%	36%
RA	17%	100%	33%	0%

Actions

2020 AP09 **Data and governance**

Gather evidence on satisfaction with:

- Core hours
- Workload model

2020 AP10 **Data and governance**

Develop mechanism to analyse workload allocation model data by gender

2020 AP11 **Student pipeline**

Develop and operationalise annual outreach activities targeted at male students (building on the success of "Healthcare Heroes")

2020 AP33 **Family and carers**

Review the MDS Parents and Carers Fund by:

- Increasing the claim limit
- Opening it to PGRs
- Expanding its scope to include KIT/SPLIT days
- Expanding its scope to include influential external committee meetings

2020 AP40 **Organisation and culture**

Promote our zero tolerance policy for discrimination and harassment, embed this in staff inductions, and run campaigns to encourage formal reporting

2020 AP41 **Organisation and culture**

Develop formal guidance document for appointment of committee members in recognition of the importance of committee positions to career development

2020 AP42 **Organisation and culture**

Explicitly incorporate outreach/WP and training/development into the workload allocation model and analyse breakdown by gender

2020 AP43 **Organisation and culture**

Require gender balanced invitations to seminar speakers

2020 AP45 **Intersectionality**

Work with the African Caribbean Medical Society, Birmingham Widening Access to Medical Sciences society, and the UHBT BAME Staff Network to provide BAME male role models as part of our outreach activities

7029 words

7. FURTHER INFORMATION

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

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

- Gender equality is one aspect of a range of EDI initiatives within MDS. For example, the College sponsored and hosted:
    - A panel discussion about the intersection of faith and LGBT identities (2019).
    - A seminar about the history of black doctors in Birmingham (2019).
    - The national LGBT STEMinar conference (2020).
- MDS staff frequently support the Birmingham Women in Science and Engineering student society, which has held "Equal in STEM" workshops on areas such as mental health and race equality (2020).
- MDS research areas include a number of themes relevant to women's health including miscarriage and fertility, gender-based violence, and a portfolio of clinical trials in women's health.
- College EDI Committee created an information pack for staff with caring responsibilities (who are more likely to be women) (2019).
- 2020 survey results showed that only 10% of women agreed that the impact of menopause in the workplace was sufficiently addressed (**2020 AP44**). MDS began to address this issue in 2019 with "MDS Talks Menopause", a lunchtime event for World Menopause Day (**2018 AP21**).

Actions

2020 AP44	Organisation and culture
Create new intranet resources for women's health/menopause, and repeat "MDS Talks Menopause" event annually	

193 words

COVID-19

- UoB responded early to the pandemic, giving staff and students two weeks' notice of the move to restricted campus operations and making accommodation freely available to key workers. The University nurseries also remain open for children of key workers.
- Most core UoB operations are continuing to operate remotely, including staff and student wellbeing support.
- Within MDS:
    - Non-clinical academics and professional services staff have been exceptionally supported to take up NHS secondments, while clinical academics have been relieved of marking and supported to increase clinical duties (33F 55M, proportional to the clinical academic staff gender ratio (**Figure 4.2.2**).
    - MDS COVID-19 research includes high impact research by several female professors, including a study on the disease's effects on pregnancy.

- Staff with commitments outside work such as childcare/home-schooling have been supported to work flexibly and reassured by the Head of College that MDS does not expect usual levels of productivity.
- College EDI Committee introduced a "buddy scheme" for staff with parent/caring responsibilities. To date, 38F 2M have signed up; early feedback suggests that this has been well received and useful.
- Staff development sessions have continued online to minimise the impact of restricted working on career development, and the frequency of sessions has been increased to maximise flexibility for staff with additional commitments outside work.
- A dedicated website supporting mental health and wellbeing for staff, students, and the community has been launched.

"It's in unprecedented times that you really appreciate an employer who supports their staff. In this respect, UoB has been great."
Female staff member, 2020

- MDS has undertaken a survey of PGRs and ECRs to assess the impact of the COVID-19 situation on their work and wellbeing, with 78% of eligible staff participating. Results shows some differences based on gender (**2020 AP29**): AP⇨
  - Women were more likely to feel useless (37%F 29%M), restless (68%F 57%M), and lacking companionship (60%F 53%M).
  - Men were more likely to feel isolated (28%F 34%M), worthless (29%F 32%M), depressed (21%F 28%M), and lonely (48%F 57%M).
  - 85% of women and 70% of men with caring responsibilities worried about their children. More women than men worried about future prospects, job security, finances and internet access.
  - A higher proportion of women reported negative impacts of the disruption on their work, including project delivery (70%F 62%M), manuscript completion (47%F 32%M), manuscript impact (44%F 33%M), and networking and conference presentations (63%F 57%M).
  - However, women were also more likely to report positive impacts such as more time to write (41%F 36%M), analyse data (59%F 52%M), read literature (68%F 53%M), and plan experiments (50%F 43%M).
  - Women were more likely to feel supported by the University during lockdown, including advice on working remotely (70%F 56%M), access to training (58%F 33%M), and arrangements to remain in touch with colleagues (48%F 38%M).
  - Women were more likely to report concerns about project delivery being hindered by decreased access to training (55%F 42%M), help from colleagues (71%F 65%M), and collaborations (59%F 49%M).

Actions

2020 AP29 **Staff pipeline**
Enhance usual support and communication measures for PGRs and ECRs in recognition of the impact of COVID-19, and rerun dedicated surveys as the situation develops to help to identify further measures that will minimise disruption and ensure equitable satisfaction for both men and women

495 words

Action plan

Reference	Planned action / objective	Rationale	Timeframe	Person(s) responsible	Success criteria and outcome
Section 1 Data and governance					
AP01	Target men to join the SAT	Equitable engagement of men and women in gender equality activity (we currently have 36% men in the SAT compared to 40% men in MDS – **Table 3.1**)	July 2020 then review annually	SAT Chair	SAT minimum 40% male (to reflect MDS gender ratio) by May 2021
AP02	Roll out collection of gender information on Offer Holder Day feedback forms following pilot in Biomedical Science in order to enable disaggregation of male/ female feedback and improve understanding of prospective male student's priorities and decision making processes	Male applicants are underrepresented to MDS UG programmes, and male applications to acceptances are generally lower (**Tables 4.1.2-4.1.6**)	2021 then annually Analyse data and implement new actions from 2022	MDS Admissions Lead working with UG programme admissions leads	New actions identified and implemented to increase UG male applications and applications to acceptances
AP03	Operationalise review of gender balance as part of annual admissions cycle review (to be considered intersectionally with other characteristics) so that any biases in processes can be identified and mitigated as early as possible	UG male applications to offers are generally lower (**Tables 4.1.2-4.1.6**)	November 2021 then annually Analyse data and implement new actions from 2022	MDS Admissions Lead working with UG programme admissions leads	New actions identified and implemented to increase UG male applications to offers

Reference	Planned action / objective	Rationale	Timeframe	Person(s) responsible	Success criteria and outcome
AP04	Operationalise formal reporting of attainment by gender as part of Annual Review processes for each programme (with actions if required to mitigate any identified biases) and roll out any pilot initiatives having a positive effect	Male students have lower attainment in all MDS UG programmes (**Tables 4.1.7-4.1.11**)	October 2020 then annually Analyse data and implement new actions from 2022	MDS Director of Education working with UG Programme Directors and MDS Quality Office	New actions identified and implemented to increase UG male attainment
AP05	Formalise systematic monitoring of gender split of successful and unsuccessful applications to the Academic Foundation Programme	The Academic Foundation Programme forms an important part of our long-term clinical academic pipeline, but it is not currently possible to assess whether there is a gender imbalance in either applications or acceptances	2021 then annually Analyse data and implement new actions from 2022	Head of Clinical Academic Training	100% of Academic Foundation Programme applications and acceptances have a record of gender to enable identification of future trends
AP06	Formalise systematic monitoring of ACRF/ACL applications and acceptances split by internal/external candidates (and gender) to assess the efficacy of our internal training and continuity of our clinical academic pipeline	While it is possible to review the gender split of applications and acceptances for ACRF and ACL posts, it is not currently possible to map these to UoB alumni and staff to identify how many internal candidates apply and are accepted	2021 then annually Analyse data and implement new actions from 2022	Head of Clinical Academic Training working with College Head of HR and Institute Directors	100% of data on ACRF/ACL applications can be split by internal/external candidates and gender

Reference	Planned action / objective	Rationale	Timeframe	Person(s) responsible	Success criteria and outcome
AP07	Formalise systematic data collection of the gender of ECRs who co-supervise PGRs and who are named on bids	These are important career development opportunities which are not currently formally recorded; gathering data will enable any disparities based on gender to be identified and mitigated	July 2021 Analyse data and implement new actions from 2022	MDS PGR Lead and Deputy Director of Operations (Research and Knowledge Transfer) working with Institute Directors and Institute Managers	100% of data is captured and recorded
AP08	Use the new HR system to monitor: • Mandatory training completion • PDR completion • KIT/SPLIT days • Workload remission • Partner leave • Flexible working arrangements	Old systems did not enable the systematic capture of data about these important aspects of staff experience. Using our new system to formally capture and monitor this data will allow more formal identification of any issues based on gender/caring responsibilities	From 2021 Analyse data and implement new actions from 2023	Institute Managers, Deputy Directors of Operations working with Head of HR	100% of training, appraisal, KIT/SPLIT days, workload remission, partner leave, and flexible working applications and arrangements are captured in the new HR system by 2025
AP09	Gather further evidence on satisfaction with: • Family leave information pack • Core hours • Workload model	The College does not yet have data on satisfaction with the family leave information pack, core hours policy, or workload allocation model. Satisfaction is likely to vary by gender, so gathering data to quantify this will help to identify and mitigate any issues	December 2022 Analyse data and implement new actions from 2023	College EDI Committee	New actions identified and implemented to increase satisfaction with the family leave information pack, core hours policy, and workload allocation model

Reference	Planned action / objective	Rationale	Timeframe	Person(s) responsible	Success criteria and outcome
AP10	Develop mechanism to analyse workload allocation model data by gender	Our purchased software platform cannot currently report on data split by gender or other protected characteristics, which means that women may inadvertently be taking on more teaching or admin responsibilities	July 2021 Analyse data and implement new actions from 2023	College Workload Allocation Model Lead	Annual gender split reported, with no difference in responsibilities by 2024
Section 2 Student pipeline					
AP11 (key action)	Develop and operationalise annual outreach activities targeted at male students (building on the success of "Healthcare Heroes")	Male students are underrepresented on MDS outreach programmes (**Table 5.6.7**) and male applicants are underrepresented to MDS UG programmes (**Tables 4.1.2-4.1.6**)	Plan in October 2020 Run event in July 2021 then annually	College Lead for Outreach and WP	Minimum 35% male students on outreach programmes by 2024 10% increase in applications from male students per UG programme by 2024
AP12	Increase the weighting of UCAT (compared to GCSE) for Medicine admissions to enable more successful male applications	UG male applications to offers are generally lower (**Tables 4.1.2-4.1.6**) and MDS research shows that men score higher on UCAT	For 2022 intake	Medicine Admissions Tutor	Medicine admissions minimum 45% male by 2024 intake
AP13	Use UCAT score earlier in Dentistry admissions (to influence who is invited to interview) to enable more successful male applications	UG male applications to offers are generally lower (**Tables 4.1.2-4.1.6**) and MDS research shows that men score higher on UCAT	For 2022 intake	Dentistry Admissions tutor	10% increase in male Dentistry applications to offers by 2024

Reference	Planned action / objective	Rationale	Timeframe	Person(s) responsible	Success criteria and outcome
AP14 (key action)	All UG programmes to introduce targeted interventions for students identified as struggling academically after first Year 1 assessments (following successful pilots in Biomedical Science and Nursing) to reduce gender attainment gaps	Male students have lower attainment in all MDS UG programmes (**Tables 4.1.7-4.1.11**)	January 2021	MDS UG Programme Directors with Year 1 Academic Leads	Reduce all UG gender attainment gaps to maximum 5%
AP15	All UG programmes to move to semesterisation model, including biannual examination periods preceded by assessment preparation weeks, to reduce gender attainment gaps	Male students have lower attainment in all MDS UG programmes (**Tables 4.1.7-4.1.11**)	October 2020	Director of Education	Reduce all UG gender attainment gaps to maximum 5%
AP16	Require all Biomedical Science students to have contact with Careers Network, and encourage engagement (via personal tutors) with relevant events	Male Biomedical Science students' engagement with Careers Network is low in comparison to gender ratios (**Table 4.1.17**)	October 2021	MDS Careers Consultant and Biomedical Science Senior Tutor	Biomedical Science student engagement with Careers Network is proportional to overall gender ratio

Reference	Planned action / objective	Rationale	Timeframe	Person(s) responsible	Success criteria and outcome
AP17	Utilise NHS partnerships to influence increased PGT applications from male healthcare professionals, and promote male role models who are studying/have completed an MDS PGT degree to clinical academics and NHS colleagues	Men are underrepresented in applications and acceptances to MDS PGT programmes (**Table 4.1.12**)	January 2021	MDS PGT Lead	45% of PGT students are male by 2024
Section 3 Staff pipeline					
AP18	Headhunt women to apply for Reader and Professor positions, and include encouragement within job advertisements for women to apply	Female applications to senior academic vacancies have reduced for non-clinical staff (**Table 5.1.2**) and frequently do not appear at all for clinical staff (**Table 5.1.3**)	October 2020 onwards	Head of College and Institute Directors	Female applications to all academic posts (clinical and non-clinical) are minimum 40% of applications by 2024
AP19	Require an EDI representative on all non-clinical Lecturer/RF (8) interview panels to further reduce unconscious bias	Male applicants to non-clinical Lecturer/RF (8) posts are appointed at lower rates (**Figure 5.1.1**)	January 2021	College Head of HR working with Institute Managers	Gender balanced appointments to non-clinical posts by 2024
AP20 (key action)	Work with NHS partners to encourage female applications for clinical posts	Women are underrepresented at almost every stage of the clinical pipeline (**Figure 4.2.7**) and recruited to clinical posts less than men (**Figure 5.1.1**)	July 2021	Head of Clinical Academic Training	Minimum 40% clinical staff are female and 45% clinical appointments are female by 2024

Reference	Planned action / objective	Rationale	Timeframe	Person(s) responsible	Success criteria and outcome
AP21 (key action)	Introduce a new leadership and mentoring programme called "MDS SUSTAIN" in partnership with the Academy of Medical Sciences for female RF (8)s, Lecturers, ACRFs, and ACLs, building on the successful FGA pilot mentoring scheme, and ring-fence 30% of the places for clinical academic staff	Women are underrepresented at SL, Reader, and Professor level on both the non-clinical pipeline (**Figure 4.2.6**) and the clinical pipeline (**Figure 4.2.7**), and PDRs have identified a lack of leadership training for staff at junior grades	First intake in September 2021 then annual Review of effectiveness in 2022	Head of College, College Lead for EDI, and Institute Directors working with College Head of HR, POD, and Life Sciences Researcher Development Manager	Minimum 90% of participants feel the programme has positively benefitted their career in a dedicated survey by 2024
AP22	Develop revised Learning and Development plan to provide enhanced career development support and advice for staff on FTCs	Women are overrepresented on non-clinical FTCs, particularly at early career stages (**Table 4.2.7**)	October 2021	College Head of HR with POD and Life Sciences Researcher Development Manager	Ratio of F:M ECRs is equivalent to ratio of F:M Lecturers by 2024
AP23	Encourage staff to apply for promotion earlier in the year, introduce institute-level mock interviews, and run annual women-only promotion roadshows	Women remain only 71% satisfied with the academic promotions process (with men at 68% satisfaction) (**Table 5.1.7**)	2021	College Head of HR working with Head of College and Institute Directors	Minimum 90% satisfaction with the academic promotion process for both male and female staff from 2023
AP24	Publish case studies on College intranet pages to encourage increased applications from PT and T-focussed staff	Few PT or T-focussed staff apply for promotion; these groups are female-dominated, so encouraging applications should have a positive impact on gender balance of promotion applications	July 2022	College EDI Committee with MDS Marketing team	10% increase in PT/T-focussed applications for promotion by 2022

Reference	Planned action / objective	Rationale	Timeframe	Person(s) responsible	Success criteria and outcome
AP25	Link training to PDRs to ensure that all staff are expected and supported to undertake a baseline amount of training each year	Uptake of various training opportunities is low (**Tables 5.3.1, 5.3.6, 5.3.7**) due to staff feeling unable to fit this around other commitments Fewer female technicians engage with training opportunities, and fewer male technicians are satisfied with the training opportunities on offer (**Table 4.2.6**)	January 2021	Institute Directors, Deputy Directors of Operations working with POD	Minimum 80% of staff take a minimum of one day of training/ development per year by 2023, assessed in PDRs, with no difference by gender No difference in technical staff engagement with training, and at least 80% satisfaction with no difference by gender
AP26	Introduce MDS PDR reviewer training (with specific reference to MDS PDR forms) to supplement mandatory UoB training and facilitate consistent appraisal experience for MDS staff	Female academics are less satisfied than men with PDRs (**Table 5.3.4**)	February 2021	Institute Directors working with POD	Gender gap in all College EDI staff survey questions relating to appraisal reduces to 5% or less by 2024
AP27	Design and implement MDS PDR forms for Professional Services staff, drawing on best practice from the revised academic staff PDR form	Professional Services staff are less satisfied with PDRs than academic staff, and male professional services staff are less satisfied with PDRs than female professional services staff (**Table 5.4.2**)	January 2021	Deputy Director of Operations (Administration) working with College Head of HR	Minimum 65% satisfaction with PDRs for Professional Services staff, measured by survey results, with no difference by gender

Reference	Planned action / objective	Rationale	Timeframe	Person(s) responsible	Success criteria and outcome
AP28	Explicitly encourage Professional Services staff to attend Birmingham Professional events through their PDR	Male Professional Services staff are less likely to attend Birmingham Professional events and to feel supported with their professional development (**Table 5.4.1**)	January 2021	Deputy Directors of Operations	60% of professional services staff attend at least one College Professional Services event per year, assessed by PDRs, with proportional male engagement
AP29	Enhance usual support and communication measures for PGRs and ECRs in recognition of the impact of COVID-19, and rerun dedicated surveys as the situation develops to help to identify further measures that will minimise disruption and ensure equitable satisfaction for both men and women	The PERCAT COVID-19 survey highlighted various issues which had a disproportionate impact on either male or female respondents	September 2021	Head of College	<5% gap between men and women in all questions on future COVID-19 wellbeing surveys
Section 4 Family and carers					
AP30	Introduce a policy to waive qualifying service period for family leave pay for ACLs (which can discourage movement between the NHS and Higher Education)	Women, who are more likely to take extended periods of family leave, are underrepresented at almost every stage of the clinical pipeline (**Figure 4.2.7**)	September 2022	Head of College and College Head of HR	5% increase in proportion of female applicants to clinical training programmes by 2024

Reference	Planned action / objective	Rationale	Timeframe	Person(s) responsible	Success criteria and outcome
AP31	Ensure that ECRs receive targeted advertisement for opportunities to provide cover for teaching/admin responsibilities during family leave	Fewer women felt well supported during family leave than men (**Table 5.5.5**), with anecdotal evidence suggesting that staff taking extended periods of leave (who are more likely to be women) feel they need to return early to relieve the pressure on colleagues This would also provide valuable development opportunities for non-clinical ECRs who are more likely to be women (**Table 4.2.2**)	New guidelines approved by College Board in 2022	Institute Directors and Institute Managers working with Head of PERCAT	Over 90% of staff feel well supported during family leave for both men and women from 2021 onwards.
AP32	Introduce a non-clinical version of the Protect and Support scheme	Feedback from the clinical version of the scheme has been positive, and awardees feel more supported during their family leave. Having equitable provision for non-clinical academics will make MDS a more attractive place to work for women; improve promotion applications by mitigating decreased research outputs; and make SPL more attractive for male researchers	September 2022	Head of College working with College Lead for EDI and College Head of HR	Maternity retention rate (excluding FTCs) increases to 100% after 12 months by 2024

Reference	Planned action / objective	Rationale	Timeframe	Person(s) responsible	Success criteria and outcome
AP33	Review the MDS Parents and Carers Fund by: • Increasing the claim limit • Opening it to PGRs • Expanding its scope to include KIT/SPLIT days • Expanding its scope to include influential external committee meetings	The Parents and Carers Fund is not widely utilised, particularly by men (**Table 5.5.1**) Female staff report more barriers than male staff to joining influential external committees (**Table 5.6.5**)	July 2021	College EDI Committee	Minimum 60% awareness of the Parents and Carers Fund for both men and women by 2022 Fewer than 15% of staff report barriers to joining influential external committees by 2023 with no difference by gender, and fewer staff identify caring responsibilities as a barrier
AP34	Further encourage take-up of partner leave entitlement and SPL using expert Birmingham Business School-led research to inform our practice (e.g. by publishing case studies of people who have taken SPL on College intranet pages), and invite all staff taking partner leave to meet with HR to discuss SPL	Partner leave entitlement is not widely known about (annual leave is often taken instead) and SPL is underutilised due to low awareness and perceived complexity	July 2021	Institute Directors and Institute Managers working with College Head of HR	100% of partner leave is captured in the new HR system by 2023 SPL is taken at least twice per year (subject to eligibility) by 2023

Reference	Planned action / objective	Rationale	Timeframe	Person(s) responsible	Success criteria and outcome
AP35	Publish case studies of people with flexible working arrangements, with a focus on men, on College intranet pages	Men are less aware than women of flexible working options (**Table 5.5.6**)	July 2021	College EDI Committee working with College Head of HR and MDS Marketing team	Awareness of flexible working options (measured by the College EDI staff survey) reaches 85% by 2023 with no difference by gender Uptake of formal flexible working reaches 60%F 40%M by 2024
AP36	Develop and implement a buddy scheme for staff who are new to flexible working, or returning to FT work after a career break	MDS currently does not provide systematic support for staff who are new to flexible working or returning to FT work after a career break	July 2022	College EDI Committee working with Head of College and Institute Directors	Minimum 70% satisfaction in a dedicated survey with no difference by gender
Section 5 Organisation and culture					
AP37	Build information about FGA, NIRSE, and the new female-only leadership and mentoring programme (MDS SUSTAIN) into academic inductions	Although a higher proportion of staff actively engaged with the FGA are women, women are less likely to join the FGA mailing list (37%F compared to a 62%F ECR population)	September 2020	College induction working group	20% of the eligible population engage with FGA and NIRSE, with F:M ratio in proportion to the population
AP38	Systematically follow up with all new starters to ensure they have completed their induction checklist within six months	Lower proportions of male new starters attend Central Induction (**Table 5.1.4**)	July 2021	Institute Managers, Deputy Directors of Operations	Minimum 60% of new starters attend Central Induction per year by 2023 with no difference by gender

Reference	Planned action / objective	Rationale	Timeframe	Person(s) responsible	Success criteria and outcome
AP39	Run annual Family and Academia events and broaden scope to include all academic staff with a focus on ECRs	100% of attendees found this pilot event useful, but it mainly focussed on lab-based researchers so could be broadened out to be more relevant to all academic staff	October 2020 then annually	College EDI Committee	Minimum 70% satisfaction with work-life balance by 2024 (measured by the College EDI staff survey) with no difference by gender
AP40 (key action)	Promote our zero tolerance policy for discrimination and harassment, embed this in staff inductions, and run campaigns to encourage formal reporting	Women experience more discriminatory behaviour than men (**Table 5.6.2**)	January 2021	Head of College, College induction working group and College EDI Committee working with College Head of HR and MDS Marketing team	Annual anonymous discrimination reporting (measured by the College EDI staff survey) drops below 1% by 2024 with no difference based on gender
AP41	Develop formal guidance document for appointment of committee members in recognition of the importance of committee positions to career development	Fewer women than men feel that the College has an open and transparent mechanism for filling vacancies (**Table 5.6.3**) and some committees still have gender imbalances (**Table 5.6.4**)	Guidelines in place by January 2021	College EDI Committee	More than 70% of staff feel that committee vacancies are filled in an open and transparent way by 2022 with no difference by gender All major committees are minimum 40%F 40M by 2024

Reference	Planned action / objective	Rationale	Timeframe	Person(s) responsible	Success criteria and outcome
AP42	Explicitly incorporate outreach/WP and training/development into the workload allocation model and analyse breakdown by gender	Outreach/WP and training/development are not explicitly included within the workload allocation model, which leads to low engagement with outreach (**Table 5.6.8**) and incomplete monitoring of who is involved, and uptake of training is low (**Tables 5.3.1, 5.3.6, 5.3.7**) due to staff feeling unable to fit this around other commitments	October 2021 then annual	College Workload Allocation Model Lead with College Lead for Outreach and WP	Staff participation in outreach/WP by gender is proportional to the gender split of MDS staff
AP43	Require gender balanced invitations to seminar speakers	Most institutes still have a significant imbalance in gender split of invited speakers (**Table 5.6.6**)	October 2021	Head of College and Institute Directors	Minimum 40% male and 40% female invitations to seminar speakers per year MDS-wide and in each institute
AP44	Create new intranet resources for women's health/menopause, and repeat "MDS Talks Menopause" event annually	Only 10% of women agreed that the impact of menopause in the workplace was sufficiently addressed	October 2021	College EDI Committee with MDS Marketing team	Minimum 50% of women believe there is adequate support in MDS around menopause, measured by College EDI staff survey results, by 2023

Reference	Planned action / objective	Rationale	Timeframe	Person(s) responsible	Success criteria and outcome
Section 6 Intersectionality					
AP45	Work with the African Caribbean Medical Society, Birmingham Widening Access to Medical Sciences society, and the UHBT BAME Staff Network to provide BAME male role models as part of our outreach activities	Male BAME students are underrepresented (**Figure 2.2**)	January 2021	College Lead for Outreach and Widening Participation	Minimum 35% of BAME UG students are male by 2024
AP46	Encourage more BAME medical and dental students to undertake summer studentships and intercalated degrees through targeted invitations, with a focus on women	Anecdotal evidence indicates that completion of an intercalated degree is a predictor of engagement with clinical academia, and completion of summer studentships is a predictor of intercalation; encouraging BAME female students to intercalate and undertake studentships will improve the long-term pipeline for female BAME clinical academics (who are underrepresented (**Table 4.2.5**))	October 2021	College Lead for Intercalation working with Institute Directors, the Dean of Birmingham Medical School and the Head of the School of Dentistry	Proportion of BAME women undertaking summer studentships and intercalated degrees is equivalent to proportion of female BAME medical and dental students

Reference	Planned action / objective	Rationale	Timeframe	Person(s) responsible	Success criteria and outcome
AP47 (key action)	Work with BAME Staff Networks at partner NHS Trusts to understand barriers and promote opportunities for female BAME staff to become clinical academics, ensure that all ACL interview panels include an EDI representative to further reduce unconscious bias, and implement MDS Race Equality Charter action plan	Female BAME clinical academics are underrepresented (**Table 4.2.5**)	July 2021	Head of College, College Head of HR, Institute Directors, Institute Managers, and Head of Clinical Academic Training working with BHP	Minimum 35% of BAME clinical academics are female by 2024

Appendix 1: 2018 action plan

AP number	Action	Objective/Rationale	Output	Success Measure	Owner	Timescale
Application section 1. Letter of endorsement						
AP01	To improve awareness, engagement and commitment to the Athena SWAN principles	To ensure that we maintain the cultural changes within the College and to ensure that all staff are fully informed and able to access all the necessary support available to them.	Review existing communications including mode of delivery and frequency as well as other relevant branding to ensure it maintains its impact and is reaching all staff.	Branding and communications seen to be useful by wider staff. Measured via a focus group plus positive wider feedback from the MDS E&D survey.	College Deputy Lead for Equality and Diversity with MDS Communications team	June-August 2018
			Provide Athena SWAN branding for staff to include on their email footer.	By October 2018: 25% of all staff use Athena SWAN on their email footer.	Institute Managers	June 2018 with annual reminders
			Host Athena SWAN awareness events for all staff such as stands at existing Staff Wellbeing events within the College.	Number of staff who visit Athena awareness stands/events: by the end of 2019 at least 30% of staff should have attended an event.	College Deputy Lead for Equality and Diversity	Two events per year from 2019
			Improve Athena SWAN website as part of larger review of E&D website.	50% of staff have used website after one year based on College E&D Survey with at least 80% of staff aware of the website - assessed by question in MDS E&D survey.	College Deputy Lead for Equality and Diversity and E&D/Outreach Officer with MDS Communications team	Website update in place by end of August 2018.
			Disseminate branded e-Card to all staff in College to highlight recent policy changes and initiatives.	• Track the impact of the e-card by following the number of clicks on the links to policy changes and initiatives as a consequence of the e-card – number of visits will increase following circulation of e-card.	E&D/Outreach Officer with MDS Communications team	August 2018 for first e-card and repeated twice yearly

				• Awareness assessed by question in College E&D Survey.		
AP02	Work to form E&D networks outside the College.	Establishing links with groups involved in Athena SWAN and E&D activity both within the University and nationally will allow us to share our successful initiatives and examples of good practice and learn from the experiences of others.	Build an online profile visible both within the College and externally	Active College E&D Twitter account with Increasing numbers of internal and external followers and retweets each year.	E&D/ Outreach Officer	June 2018 onwards
			Continue to develop collaborations with E&D teams in other Colleges facilitating joint learning through meetings and running combined events for staff.	• Regular meetings between E&D teams from other Colleges. • Joint Athena SWAN events run.	College Deputy Lead for Equality and Diversity to coordinate	Ongoing
			Present successful initiatives and learn about Athena SWAN activity at other institutions	Members of College E&D team attending E&D conferences e.g. ECU Annual Conference and presenting and networking with those involved in E&D at other Institutions	College Deputy Lead for Equality and Diversity and/or E&D/Outreach Officer to attend	From 2019
Application section 3. The self-assessment process						
AP03	Undertake annual MDS E&D survey	To generate benchmark data for monitoring performance and to facilitate ongoing and better understanding of female staff lived experiences and workloads.	• Survey circulated annually to all staff covering both awareness and experience of Athena SWAN and E&D activity as well as seeking suggestions for future activity. • Returns analysed and reported to Athena SWAN Oversight Committee.	• >75% return rate each year	E&D/Outreach Officer and College Deputy Lead for Equality and Diversity	First survey in September 2018 then annually

AP04	Develop relationships with NHS partners on issues of gender equality, women's health and broader inclusion issues	We have already made links with our local partner NHS Trusts and will work to further deepen and develop these relationships.	To establish regular meetings with Heads of Inclusion and Diversity at UHB and HEFT.	• Regular meetings established (twice a year). • Good practice shared and put into practice within College.	College Lead for Equality and Diversity	From September 2018
			To identify further opportunities to co-sponsor E&D events.	Co-sponsorship of relevant events (two per year by 2022)		From January 2019
			To provide time/resources for College staff to attend relevant E& D events in Trusts.	College staff attending relevant events at UHB/HEFT. Those attending feedback to relevant groups within College.		From July 2018
AP05	Establish formal governance and reporting structure for issues relating to Equality and Diversity including Athena SWAN	To raise the profile of Equality and Diversity activity and ensure action through formal reporting structures.	• Recruit E&D Leads representing each Institute within College and Professional Services. • Publicise the Leads and their role via College communication channels and via the E&D website.	80% of MDS staff know of, and can contact their E&D Lead and feel that issues raised are taken seriously and acted upon - as assessed in MDS Staff E&D survey.	College Deputy Lead for Equality and Diversity	June 2018
			Form new MDS E&D committee with membership comprising the Institute E&D Leads, Professional Services E&D Lead and other individuals representing relevant staff and student groups.	• MDS E&D Committee established and meeting regularly (6 times per year). • E&D activities are enacted College-wide through Institute E&D Leads • Committee reports Athena SWAN activity to Athena SWAN Oversight committee twice a year.	College Deputy Lead for Equality and Diversity	Committee formed in August 2018
			Form new Athena SWAN Oversight Committee with members draw from current Athena SWAN SAT and with	Committee established and meeting regularly (twice a year) to monitor ongoing progress of activity relevant to Athena SWAN including Action	College Lead for Equality and Diversity	Committee formed in September 2018

			representation across College.	Plan and receive updated data analysis.		
Application section 4. A picture of the department						
AP06	To identify and address issues leading to gender imbalances on teaching programmes	To understand and rectify the underlying causes of gender imbalance in student populations, at application stage, at offer stage and in degree awarded. We will continue to monitor this on all programmes within the College but with a particular focus on Nursing, Dentistry and MPH where specific issues have been identified.	**Nursing**			
			Analysis of data from University-run central admissions team to identify reasons why male students do not pass the initial admission stage	• Identification of reasons why applications from male students do not pass the initial admission stage of application to Nursing. Compare with national trends through discussions with admissions tutors at other institutions and publically available data.	Nursing Programme Lead and Admissions Tutor	Summer 2018 for analysis of historical data with new data analysed annually after each applications round.
			Remove inappropriate barriers to male applications and acceptance of offers (real or perceived). Outreach team to use student focus groups to survey current students' attitudes and identify reasons for gender imbalances within current student populations.	Data used to develop strategies to improve the gender balance: • Further development of school outreach activity targeting male students. •Male staff and students involved at all Open Days and Applicant Visit Days. •Promotional material includes male staff and students • Improvement of gender ratio to that of at least sector average by 2020/21 intake.		Changes implemented for 2020/21 entry applications round.
			Dentistry			
			Understand underlying reasons for difference between male and female students in offers made and offers accepted by analysis of applicant data and focus groups with existing students	Identification of reasons why there are gender differences in offers made and offers accepted.	Dentistry Programme Lead and Admissions Tutors	Summer 2018 for analysis of historical data with new data analysed annually after each applications round.

			to understand rationale behind offer acceptance.			
			Revise admissions strategies to improve gender balance in offers made and to remove inappropriate barriers to female offer acceptance (real or perceived).	• Clear guidance on website and at Open Days about how to make a successful application. • Clear visibility of female staff and students on promotional material and website and at Open Days.		Changes implemented for 2020/21 entry applications round.
			Master in Public Health (MPH)			
			Monitor applications to the MPH course with regards to gender	Data regarding applicants to the MPH course is collated and analysed on an annual basis.	MPH Programme Lead	From 2019/20 entry admissions round
			Address gender imbalance for applications to MPH programme.	• Promotional material revised to include male staff and students. • Male staff present at Open Days		From 2020/21 entry admissions round
AP07	To further improve the proportion of female staff at senior levels and share best practice across the College.	To improve promotion processes to ensure they are fair, gender balanced and take caring responsibilities into consideration. To ensure all suitable applicants apply for promotion, and are supported to do so, as it is known that female staff are currently less likely to apply than an equivalently qualified man.	Ensure Institute and College Promotion Panels have equal gender balance and all members of panel are aware of the principles of Athena SWAN.	50/50 gender balance on Promotion Panels by 2021.	College HR Lead	From 2018/19 promotion round, fully implemented by 2021/22 promotion round.
			Athena SWAN representative on College Promotion Panel	Appointment of AS representative(s) to Promotion Panels for 2018/19 promotion round		2018/19 promotion round
			Ensure that parental leave and caring responsibilities are mandatory discussion points in the decision-making process at each stage by inclusion in panel paperwork.	• Consideration of impact of family/caring commitments at Promotion Panels in 100 % of cases (where it has been stated in the paperwork).		2018/19 promotion round

				• Increased promotion success for staff with family/caring commitments		
			Provide support, including: • Annual workshop delivered through HR. • Guidance and support provided through Leads for Career Development and Equality within each Institute. • Provision of senior mentors to all applicants pre-interview.	• Correlation between uptake of support and success rates. • Increase number of female staff applying for promotion to senior level. • 30% female staff at each senior level. • Survey of those who applied for promotion to assess their experience shows enhanced satisfaction of staff.		From 2018/19 promotion round with annual monitoring and evaluation.
			Establish Institute-specific panels to assess each staff member annually in regard to promotion criteria to ensure that all staff are appropriately considered, not just those putting themselves forward.	• 75% of applicants identified by the review panel applying for promotion by 2022 • A balanced cohort of applicants applying for promotion.		From 2019/20 promotion round
AP08	Monitoring academic leavers	To identify whether issues relevant to Athena SWAN are responsible for staff voluntarily leaving the University	All academic staff voluntarily leaving their role at the university receive exit interviews.	• All staff formally offered an exit interview from April 2018. • Improvement from current very low (currently not formally recorded) uptake levels so that, by Jan 2021, 80% of staff leaving the university have undertaken an exit interview.	Institute Managers	Offered from January 2019
			The anonymised reports from exit interviews are shared with Head of Institute and College E&D Lead and used to assess whether	Data analysis and actions needed presented to College Board for consideration and action.		From July 2019

			additional actions are required to support individuals and/or address key reasons for leaving.			
Application section 5. Supporting and advancing women's careers						
AP09	Improving recruitment and induction practices.	To ensure recruitment and induction processes support recruitment and retention of female staff and ensure all staff are aware of Athena SWAN principles	Evaluate the induction process currently being piloted in IAHR by surveying all new starters and their Line Managers about their experience.	• Head of HR and College Deputy E&D Lead will look at outcomes with IAHR Manager. • Good practice incorporated into College induction process from January 2019.	IAHR Manager	July to September 2018
			Design and implement a new induction checklist which embeds the key principles of and opportunities related to Athena SWAN within the mandatory induction modules.	• College-wide induction checklist is implemented. • 80% of new starters recruited from October 2018 onwards have completed the new mandatory training within 3 months of employment.	College HR Lead working with Institute Managers	October 2018
			Assess academic staff satisfaction with new induction check list.	• 80% of new starters complete a survey to assess the usefulness of the new induction module. • Feedback is reported to Athena SWAN Oversight committee	Institute Managers	January 2019 onwards
			Evaluate the effectiveness of induction processes for professional services staff which have been in place for since 2017 by surveying existing staff who went through the process, all new starters and Line Managers about their experience.	• Evaluation completed including recommendations for further developments. • Feedback is reported to Athena SWAN Oversight committee.	College Head of Administration	November 2018 for review by College Operations Group in 2019

			To monitor gender data for applications, shortlisting and appointments to clinical academic posts.	Analysis of recruitment data is reported to College board for action as needed.	College HR team	June 2018 onwards
			Monitor impact of the University's new holistic staff recruitment process by a survey for all new starters experience of process.	• Positive feedback on process. • Issues raised addressed in College and wider issues fed forwards to University HR department	College HR team	June 2018 onwards
			Continue to notify all staff of mandatory and recommended E&D training opportunities by email and through College bulletins.	End of 2019: Higher participation rates for mandatory and recommended training modules as compared to 2017-18 benchmarks. 2020 onwards - For mandatory training modules, 100% uptake by staff.	Head of College	ongoing
			Inclusion of record of completion of mandatory training as part of induction and PDR process.	Data available on completion rates of mandatory training.	Heads of Institutes with Institute Managers	From September 2018 for induction and for 2019 PDR round
AP10	To improve career development opportunities within the College	The availability of a broad range of appropriate personal and professional development opportunities is crucial to ensure the progression of all College staff.	• Undertake an annual collation of the training needs of academic and professional services staff in MDS from PDR records. • Discuss provision of appropriate training with the central People and Organisational Development (POD) Unit.	• Dataset is generated annually • By 2022, MDS E&D survey shows >75% of MDS staff feel that they have access to training and development programmes that will help them to meet their career development needs.	Heads of Institutes and Institute Managers with College HR Lead	October 2018 using 2018 PDR data.
			• Continue to provide a programme of development events organised at times when working parents are able to attend, on different	• MDS E&D survey shows staff find sessions beneficial. • Increased staff attendance by full diversity of staff in College seen over 4 years.	• Some organised at Institute level, some by Professional services and some	Ongoing – record keeping commencing in September 2018.

			days of the week to accommodate part-time workers, with a diverse range of internal/external speakers. • Formalise monitoring of this activity to ensure compliance with Athena SWAN/E&D principles including registers to capture numbers and profile of attendees. • Line Managers reminded of importance of staff being able to attend.	•Speaker profiles show improved diversity over 4 years including move to 50% female speakers by 2020.	by College Deputy Equality and Diversity Lead. •E&D/Outreach Officer to collate data and report to Athena SWAN Oversight Committee.	
			Develop a Leadership programme(s) aimed at postdoctoral fellow level for those without personal fellowships. Applications are encouraged from groups under represented at senior level.	• Leadership programme available and running annually. • Participants are surveyed to assess satisfaction and career progress and are seen to be moving into leadership positions.	College Lead for Equality and Diversity with POD	Developed from September 2018 with first cohort in 2019.
AP11	To ensure the PDR appraisal process is fair and constructive for female staff	The PDR process show be an opportunity to support the progression of female staff members and therefore must capture all activities undertaken to ensure equitable workloads across genders and that credit is given for the types of activities that tend to be delivered more often by female staff.	To increase the number of female PDR appraisers so that female staff have the opportunity to complete their PDR with a female appraiser.	•All female members of staff offered a female appraiser in the 2019 round. • 50% of PDR appraisers are female in the 2019 PDR round.	Head of College with Heads of Institute	Data capture in September 2018 followed by 9 month period for assessor recruitment and training
			Staff asked about satisfaction with PDR in MDS E&D survey.	75% positive feedback from female staff in survey following the annual PDR.		From September 2018
			• PDR process to include a mandatory discussion of and plan for development	75% of PDR records to include plan for development activities in 2019 round,		For 2019 PDR round

			activities for the coming year. • Ensure time is allocated within job plans to undertake development activities agreed at PDR	increasing to 100% by 2020 round.		
			PDR process to include a mandatory discussion of importance of health and wellbeing and maintaining a good work:life balance including using annual leave allowance.	Included in PDR paperwork for 2019 round with 100% completion by 2020 round		For 2019 PDR round
			Include time spent on development activities in the data collected in the College Workload Allocation Model.	College Workload Allocation Model able to capture data on development activities	College Planning Partner	For 2019 data collection
AP12	Improve provision and uptake of mentoring and coaching.	Although staff already have access to mentoring and coaching schemes, feedback and uptake suggests that we could do more to promote these and ensure what we offer meets the needs of all staff. We will ensure that tailored and flexible mentoring is available to all staff, irrespective of grade or funding stream, and from an early career stage.	• Provide seminar(s) and information to promote existing mentoring opportunities available to staff. • Provide case studies of existing formal and informal mentoring arrangements on E&D website	• Increase in number of visits to mentoring page of website following seminars/advertisements • Positive feedback on awareness in annual MDS E&D survey • Increased uptake of mentoring by College staff from 2018 benchmark	College Deputy Lead for Equality and Diversity with POD	From January 2019
			Use MDS E&D survey and focus groups to explore staff needs and expectations of mentoring/coaching.	Analysis of data generated from survey and focus groups used to inform approach to mentoring/coaching provision within College.	College Deputy Lead for Equality and Diversity	September 2018 onwards
			To develop a bespoke mentoring scheme within the College that ensures that all staff are offered access to	• Sufficient College staff trained to provide mentors to all staff who request one.	College Deputy Lead for Equality and Diversity with POD	Launched in September 2019

			a mentor. Female staff should be able to request a female mentor if preferred.	• Positive feedback on experience of having a mentor from annual MDS E&D survey. • 20% uptake of the mentoring scheme after one year with an increase in following two years.		
			College-wide implementation of buddy scheme successfully piloted in the Institute of Immunology and Immunotherapy for new Lecturers/ Senior Research Fellows during probationary period.	• 75% uptake of scheme by eligible staff. • Positive feedback on scheme assessed by follow up questionnaire.	College Deputy Equality and Diversity Lead will work with Institute of Immunology and Immunotherapy to rollout scheme	Launched in September 2019
			At key transition points during career development offer coaching through POD. Impact assessed by follow up questionnaire	• 75% uptake of the coaching scheme by eligible staff. • Improved career progression by those receiving coaching e.g. obtaining personal fellowships, promotion.	College Deputy Lead for Equality and Diversity with POD	Available from September 2018
AP13	Improve support offered to female PG students	Recent PG student surveys and completion data suggest that we can do more to support our female PG students who often have more complex circumstances than UG students particularly those combing work with part-time study and those at the final stage of PhD studies.	Increase our programme of workshops for part-time PG students – offered by a mixture of delivery methods including distance-learning and online to facilitate participation	• Positive feedback from students attending workshops in PG student surveys, • Increased proportion of part-time PG students attending workshops compared to 2017 benchmarks.	College Leads for PGT and PGR	From October 2018
			Pilot a new "finishing" workshop for those near the end of their PhD	• Surveys and focus groups with participants identify workshop as a positive and useful experience. • Improved gender equality on PGR completion rates.	College Lead for PGR	From January 2019

AP14	Provide support to those returning to work after parental leave.	To ensure all eligible staff benefit we need to make sure that existing schemes for supporting those returning to work are clearly signposted and staff are encouraged to make use of them.	• Advertise University policy to provide exemption from teaching and administration on return from parental leave via website and College newsletter. • Information provided to all staff who are planning parental leave at earliest opportunity.	Increased uptake from 2017 benchmark. By 2022 all eligible staff participate.	College Deputy Lead for Equality and Diversity and Institute Managers.	From July 2018
AP15	Further develop the piloted 'PDR and Support' scheme.	The scheme supports academic staff both during maternity/parental leave and also following their return to work. It provides funds for technical /other support to maintain their research whilst on parental leave as well as help with childcare costs to facilitate conference attendance.	College-wide promotion of the 'Protect and Support' scheme including processes and timelines.	A higher percentage of eligible staff making applications to the scheme compared to the pilot version with at least 50% of eligible staff will make an application to the scheme by end of 2020.	College Lead for Equality and Diversity	College-wide relaunch in September 2018.
			Monitor applications and awards of funding in relation to Institute and grade of applicants to assess flexibility and value of the scheme.	Applicants and those receiving funding are evenly distributed across Institutes and grades.		Annually from September 2019.
			Evaluate the impact of the 'Protect and Support' scheme on research outputs and outcomes of those receiving funding.	Activity and development trajectories of recipients are not different to staff who have not taken parental leave.		Annually from September 2019.
			Wider promotion of existing scheme to provide funding for childcare to enable staff to present work at conferences.	Increase in uptake compared to 2017/18 benchmark when there were 5 recipients.		College-wide relaunch in September 2018.
AP16	Install new systems for data collections	In order to be able monitor and report on activities that have relevance for Athena SWAN, we will ensure that there is consideration of E&D needs in the development of	• Ensure PDR completion can be recorded within the new cloud-based HR system. • Ensure that the new cloud-based HR system is capable	Functionality has been established in the new cloud-based HR system to ensure that PDR completion, training and development uptake by	College HR Lead	Expected to be available in 2020

		the new MDS cloud-based HR system.	of producing reports that show uptake, by gender, of all training and development activities. • Ensure that the new cloud-based HR system can record maternity, paternity, shared parental and adoption leave uptake.	gender, and uptake of parental leave can be recorded and reported upon.		
		Implementation of new Simitive Workload Allocation Management system.	Ensure generation of data on workload distribution by gender is possible	Availability of workload data classified by gender to allow more equal allocation of workload in all areas of activity.	College Planning Partner	For 218/19 academic year
AP17	Improve uptake of paternity leave and shared parental leave	We would like to encourage the uptake of paternity leave and shared parental leave. We have a significant number of families where both parents work within MDS and so these schemes will provide indirect benefits to a number of female staff. We do not currently have a system for formally collating uptake of paternity leave as it is often arranged informally at a local level or new fathers take annual leave. We will ensure all staff eligible for paternity leave/share parental leave are supported and aware of their rights and entitlements.	Quantify current paternity leave uptake	Data collated on historical paternity leave eligibility and uptake through survey and Institute records	College HR Lead	By end of 2018
			Establish system to formally record uptake of paternity leave.	Data is available on uptake of paternity leave		January 2019
			Fathers-to-be offered a meeting with HR staff to explain paternity leave offer and shared parental leave	All new fathers formally offered paternity leave and shared parental leave.		From January 2019
AP18	Improve awareness of availability of flexible working	As female staff proportionally have more caring responsibilities, flexible working can be crucial to allow them to achieve a work:life balance that works for their family. It is therefore important that we	• Link to relevant HR pages describing the modes of flexible working from the E&D website.	At least 90% positive answers to staff survey of awareness	E&D/ Outreach Officer to ensure information is accessible via E&D website. Institute Managers	September 2018

		continue to ensure the awareness and visibility of the different modes of flexible working available to staff in the College.	• Ensure line managers are able to provide guidance/HR referral to their staff.		reminded of need to promote awareness among their staff.	
			Provide case studies showcasing successful examples on website	Case studies are available and are being accessed on website	E&D/ Outreach Officer with MDS Communications Team	September 2018
AP19	Ensure involvement with College Committees and roles is equitable.	Developing clear Terms of Office and Role Descriptors for College roles and committee membership will ensure managers and staff understand the roles they are asked to perform and how much time they will take, thus enabling work balance and reducing committee over-load	Write clear descriptors for each College committee to define frequency and length of meetings, amount of preparatory reading expected and Terms of Office for members	All advertised College committees have clear descriptors and Terms of Office for members	College Head of Administration	By April 2019
			Advertise all vacant roles and committee memberships across College to ensure all staff have the opportunity to express an interest.	• Membership of College committees is more evenly distributed across College staff. • Staff feel they are aware of opportunities available within College (assessed by MDS Staff E+D survey)		Already in place for College roles. From Jan 2019 for committee membership
AP20	Ensure a broad and diverse range of academic staff engage fully with outreach activities.	Outreach activity is an important part of the outward face of the University and is a one way to demonstrate that we fully engage in the principles of E&D including Athena SWAN. It is also a crucial part of the student recruitment process and it is important that a diverse range of staff are involved to provide relatable role models. For staff, it is important that such activity is recognised and that the associated workload is distributed between both genders.	Analysis of existing data on participation in Outreach with particular emphasis on apparent differences between male and female research fellows with PERCAT network to conduct survey/focus group.	Reasons behind gender differences identified and actions implemented to address real or perceived issues.	College Lead for Outreach	July-December 2018
			Formalise data capture on engagement with outreach as part of routine job planning and reporting	Approaches to capturing data on engagement with outreach are embedded and data is available for analysis.	Heads of Institutes and College HR Lead	For 2019 PDR round
			Communicate the value of outreach to senior	Discussion point at College Board	Head of College	September 2019

			management with an emphasis on the value of diverse visible role models			
			Dissemination of outreach value and expectation to participate to all staff by senior management	• Increased percentage of staff at all grades participating in MDS outreach activities by the end of 2019. Assessed by College E&D survey and analysis of data collected by new system. • Gender equality in participation rates.	Heads of Institutes	September 2019
Application section 7. Further information						
AP21	To improve awareness of, and support for, women's health issues	We have focussed on maternity-related aspects of women's health to date but recognise that there are other health issues specific to women that can also significantly impact on female staff. We will work to improve awareness of and access to support for those experiencing women's health issues.	• Institute Managers to attend training session run by appropriate clinical member of staff working in Women's Health. • Information disseminated to all staff via email and website to promote awareness and support mechanisms available.	• Feedback from MDS E&D survey indicates awareness of women's health issues. • Uptake of support increases year on year.	College HR Lead and Institute Managers	From July 2019