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Athena Swan renewal application form for departments

Applicant information

Name of institution	University of Oxford
Name of department	Nuffield Department of Surgical Sciences
Date of current application	14 January 2022
Level of previous award	Silver
Date of previous award	November 2016
Contact name	Emily Hotine
Contact email	emily.hotine@nds.ox.ac.uk
Contact telephone	01865 612294

Section	Words used
An overview of the department and its approach to gender equality	2217
An evaluation of the department's progress and issues	4057 (including additional 491 word COVID allowance and 481 word clinical discussion allowance)
New action plan*	
Appendix 1: Culture survey data*	
Appendix 2: Data tables*	
Appendix 3: Glossary*	
Overall word count	6274

*These sections and appendices should not contain any commentary contributing to the overall word limit

Overall word limit: 5500 words

Additional COVID word limit used: 500

Additional word limit for clinical staff commentary used: 500

In preparation for publication, some information in this document has been redacted in line with HESA's rounding and suppression methodology. This may affect cross-references and the table of contents.

1. An overview of the department and its approach to gender equality

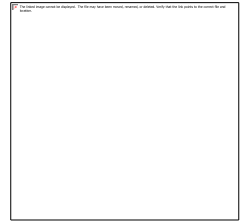
In Section 1, applicants should evidence how they meet Criterion A:

- *Structures and processes are in place to underpin and recognise gender equality work*

Recommended word count: 2500 words

a Letter of endorsement from the head of the department

Please insert (with appropriate letterhead) a signed letter of endorsement from the head of the department.



Ian G. Mills MA M.Biochem (Oxford), PhD

Acting Head of Department

11th January 2022

Dear Athena SWAN Manager,

It is my pleasure to endorse our Athena Swan renewal as Acting Head of the Nuffield Department of Surgical Sciences and can confirm that the information presented in the application (including qualitative and quantitative data) is an honest, accurate and true representation of the institution/department. Although I have only recently undertaken this role, I have been a member of our Equality, Diversity and Inclusion Committee (EDIC) since shortly after joining the department. I am proud of the dedication and hard work of our team in furthering our Athena Swan action plan in the pursuit of creating a truly equitable and fair working environment. We are excited to share the progress we've seen in our department as a result of that work. Some of the highlights of this work include:

1. Beginning our mental health pilot project, which has worked to increase male engagement with mental health and wellbeing and improved women's confidence in discussing mental health with their manager (Table 37). We have implemented a cohort of Mental Health First Aiders, a new monthly wellbeing bulletin and new wellbeing pages (including further resources) on our staff gateway, leading us to rank 1st in the division (and 1st in the University out of departments with more than 24 members) in wellbeing and workload questions in the 2021 University-wide survey, with greater gender parity in responses.
2. Creating the NDS Training Fund, which allows members of staff to apply for up to £1000 towards the cost of training. This fund has helped to address the gender disparities in staff experiences with career development and training opportunities. I am proud to say that the Fund has been used by 19 members of staff (10 women) since it was launched (Table 24).
3. Creating Journal of the Nuffield Department of Surgical Sciences (JNDS), allowing our students and postdoctoral scientists to publish their work, develop their skills and prepare themselves for further publications.

We are particularly proud of the JNDS, which was developed to give further opportunities to our under-represented students to engage in research and publish their work. Susie Black is one such student who has not only submitted to the journal, but has been acting as an assistant editor. She says, 'the journal opened the door to editing and publishing when I previously thought I was too junior...I now would have fewer barriers to writing papers and articles for myself.' Susie reports that writing and working for the journal has benefitted her when pursuing career opportunities.

2020-2021 has been the most challenging period our department has faced in recent memory, threatening to undermine the progress we've worked so hard to achieve. However, due to the resilience of our staff, the reactive innovation of our EDIC and the support of our senior leadership team, we have managed to find potential in even the most difficult of circumstances. I have personally served on our panel that supports staff to apply for Associate Professorships. Since the creation of this panel, we have had a 100% success rate in applications, with nearly half of applications being submitted by women.

Six members of our Management Executive Board (MEB) currently serve on the EDIC, allowing us to incorporate our EDI strategy into our business planning, and an update on our EDI work is a standing item on the agenda for MEB meetings. This has contributed to 86% of staff believing that the department is committed to promoting equality and diversity (F: 84%, M: 89%), which is 8% higher than the average for the division (Table 5).

As we look to the next five years, our priority remains the diversification of talent at our most senior levels. We aim to increase the number of women and Black and minority ethnic (BME) staff sitting on our MEB. Achieving this will take time and a comprehensive strategy that covers recruitment, promotion, development and wellbeing; we will need to nurture and support women in the department to facilitate their progression into senior roles while also targeting external applicants, encouraging women and BME staff to apply to senior roles and eradicating any bias that may exist in our recruitment processes. This work will be especially important as we emerge from a pandemic that has disproportionately impacted our female staff and their career development. When our Head of Department returns, he will continue championing this cause as he has done for the past 13 years.

We will continue to seek new and innovative interventions to address the challenges that we face, such as the low numbers of women in academic surgery across the UK. We will also look to share our experiences and successes in improving inequality with the wider university and industry, acting as a beacon of good practice in the area of health and wellbeing.

Yours sincerely,

Professor Ian Mills

Acting Head of the Nuffield Department of Surgical Sciences

University of Oxford

b Description of the department and its context

The Nuffield Department of Surgical Sciences is one of 16 departments within the University of Oxford's Medical Sciences Division, employing 171 members of staff. NDS is one of the few remaining academic surgical departments in the UK, covering clinical and non-clinical research by postgraduate researchers, senior researchers, clinical lecturers and professorial staff. This research is conducted by 71 academic and research staff, 29 of whom are women (41%) and is supported by 100 PTO staff, 71 of whom are women (71%).

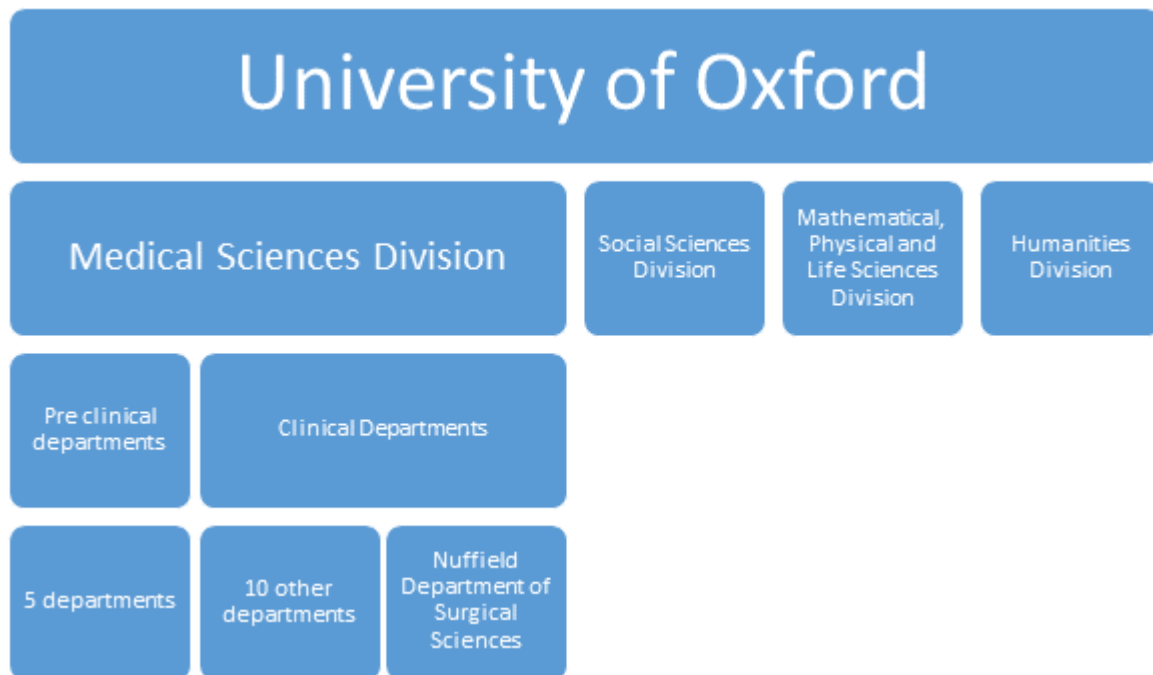


Figure 1 Representation of where NDS sits within the University of Oxford

Our PTO staff include administrators, project and trial managers, programmers, PAs, editorial staff and facility managers. NDS also employs a large number of technicians for biobanking, sample preparation and on-call transplant staffing activities.

NDS is based across several sites in Oxford, including the John Radcliffe Hospital, the Churchill Hospital and three University research buildings (Figure 2). This requires strong communication from the department and effective planning from the events committee when considering event venues and locations that cater to the whole department.

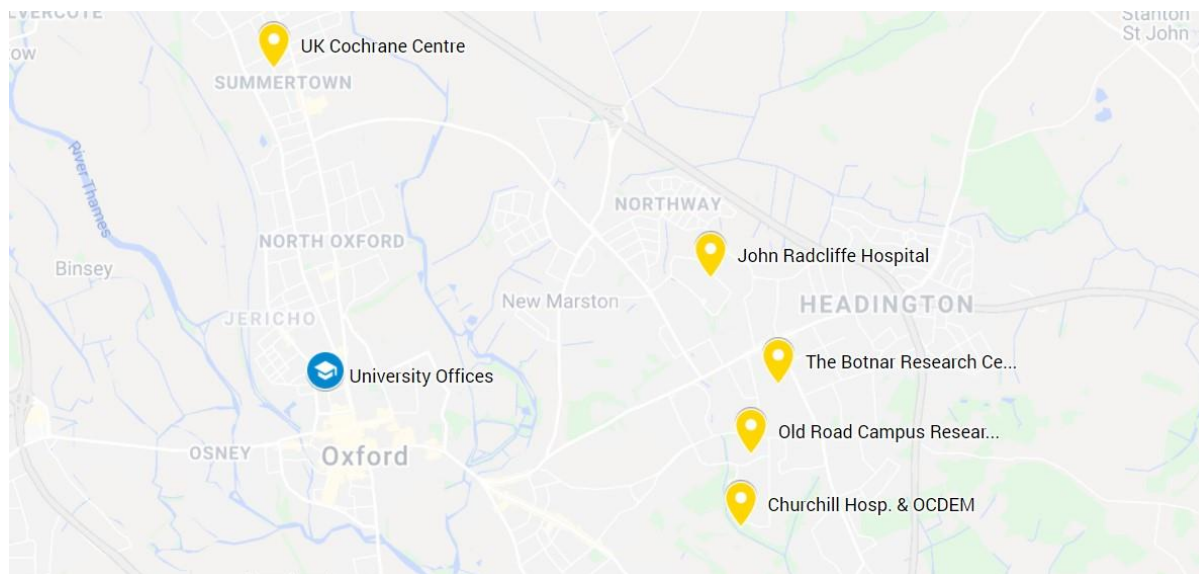


Figure 2 Map of NDS sites across Oxford (yellow) compared to the University offices (blue)

NDS hosts 58 postgraduate taught and postgraduate research students: 21 MSc students, 34 DPhil students and 3 MSc by Research students (Figure 18-Figure 21). Our DPhil students include clinicians and non-clinical students.

As a department that includes clinical and non-clinical research, many staff have joint contracts with Oxford University Hospitals, which further complicates monitoring staff workload and necessitates strong communication with staff and working relationships with the Trust. The department covers several disciplines: urology and surgical oncology, transplantation, neurosurgery and neurosciences, vascular and cardiothoracic, systematic reviews, safety and quality, and colorectal cancer research. Most of our researchers rely on external funding, meaning **[REDACTED]** are on fixed-term contracts (Figure 10).

The department contains eleven committees, some of which are responsible for related working groups. These committees cover such areas as research, equality, diversity and inclusion, communications and marketing, staffing, etc. Every member of staff is invited to serve on a committee, with full-time staff being expected to serve on at least one committee. Staff may view the remits of each committee on our staff gateway, where they can also register their preferred choices of committee to join. There are members of staff who serve on multiple committees to facilitate greater communication between them. This structure has contributed to 68% of our staff feeling they have the opportunity to contribute their views before decisions are made that affect them (12% higher compared to the overall University). Committees then report to the MEB (Figure 3). The MEB consists of 40 senior members of (mostly academic and research) staff in the department (F:6, M:34). This gender imbalance is largely due to the wider gender imbalance in senior academic and research staff, which we will seek to address in our new action plan (NAP2.12.6, NAP2.12.7, NAP3.1).

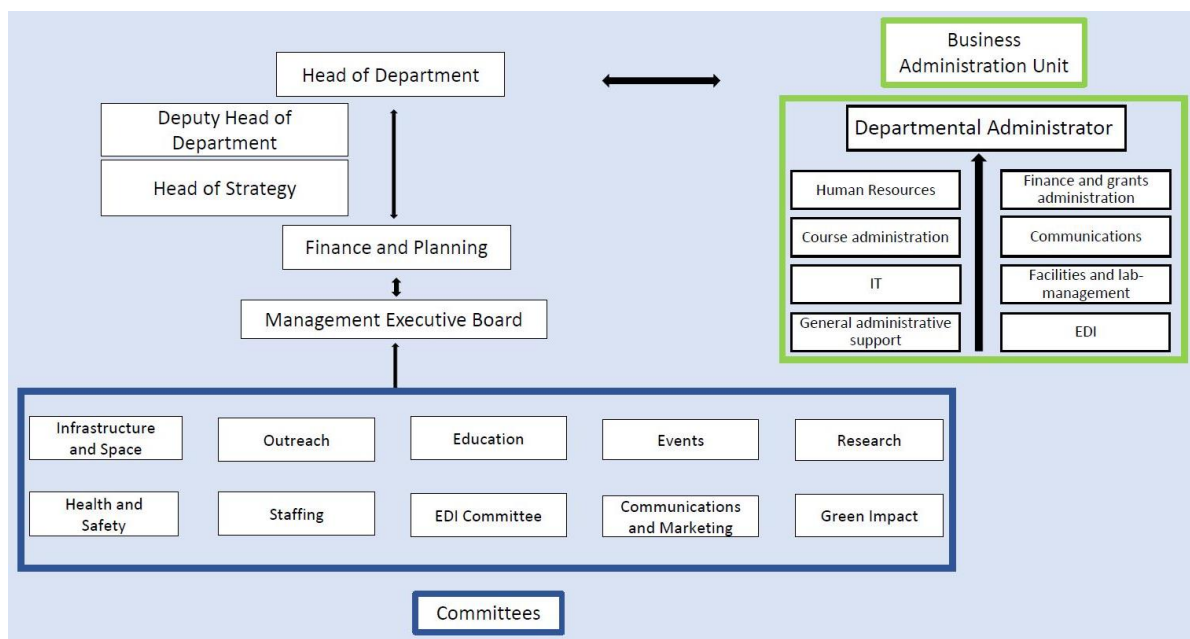


Figure 3 Reporting structure in NDS

c Athena Swan self-assessment process

Please provide an overview of who was involved in the preparation of this application, how it was prepared, and what plans are in place to support the department's future gender equality work.

The Self-Assessment Team

The self-assessment process is undertaken by the EDIC, which comprises 17 members of the department and is gender balanced proportional to overall staff gender. The EDIC represents different staff groups, working patterns, seniority, gender, ethnicity, staff with disabilities, etc. As with any committee, serving on the EDIC is recognised and valued in personal development reviews (PDR), and our academic lead is financially compensated for the additional workload serving on the EDIC and preparing the Athena SWAN submission involves. NDS expects all full-time staff to serve on at least one committee to ensure that the burden of serving on a committee does not disproportionately affect some members of staff above others. We keep a record of committee membership and regularly approach new staff to ensure they sign up or have provided a reason for opting out of serving.

In an effort to enhance student representation on the EDIC, we re-launched the departmental committees, instituting the new Joint Graduate Consultative Committee, which will be run by students. Our graduate studies administrator will sit on this committee and was recently invited to sit on the EDIC to facilitate communication between the two committees.

Recognising the additional burden associated with this work, the department also challenged the University-wide headcount cap to recruit a new Athena Swan Coordinator (ASC) in 2019. The ASC now handles the majority of the administrative burden and workload involved in the self-assessment and Athena Swan writing process.

[SELF-ASSESSMENT TEAM TABLE REMOVED]

Table 1 Membership of the NDS Equality, Diversity and Inclusion Committee

Consultation

The University administers a staff survey every other year. However, it was delayed in 2020 due to the Covid-19 pandemic, so the department ran a departmental survey in this year, including students in the analysis. The University survey was administered the following year in 2021. This meant that the gap between the 2020 and 2021 surveys was considerably shorter than normal. We believe the drop in participation may be due to a combination of ‘survey fatigue’ and a general noted drop in engagement from male staff throughout the pandemic and remote working. We will continue to monitor participation rates in future surveys, adjusting the incentives offered by the department whenever needed (NAP1.1).

Survey Year	Survey Closed	Participation Rate
2016 (university-wide)		66% (F: 66%, M: 34%)
2018 (university-wide)		73% (F: 58%, M: 42%)
2020 (departmental)	Monday 30 th November 2020	71% (F: 60%, M: 40%)
2021 (university-wide)	18 th May 2021	66% (F: 64%, M: 36%)

Table 2 Details of surveys administered and participation rates

The department also runs regular staff and student consultations, such as the NDS Race Forum and the interviews we conducted with those who had returned from a prolonged period of leave (CAP2.3).

Finally, we utilise polling and short surveys to assess the impact of individual interventions and to learn how to improve our EDI work. This may be through the use of polling platforms during our head of department Q&A sessions, or through surveys handed out to users of a particular service. We will continue running a departmental survey on alternating years to complement the university-wide survey and to facilitate ongoing monitoring of gender-based disparities in our students.

Conducting self-assessment and writing the application

We conduct a full self-assessment annually, undertaken by the ASC, by collating and analysing our staff survey data alongside our core staff data and our student recruitment, attainment and survey data. Understanding the need for a full and detailed self-assessment to inform learning and understanding of progress, we also interrogate turnover, training uptake and parental leave uptake on top of mandatory data sets. The results are then fed back to the EDIC (and to the MEB when approval is needed), where action points are devised and further investigations planned wherever necessary.

Although this process informs our Athena Swan strategy and submission, it exists independently of Athena Swan and is fully embedded into our culture and our method of self-evaluation and business planning. Writing our Athena Swan submission is overseen by the ASC, with input from the Departmental Administrator and academic lead. Writing the new action plan is a collaborative process undertaken by the entire EDIC. In devising our new action plan, members are asked to volunteer for at least one action that they would be happy to lead. Most members choose multiple actions. Members then have an input on the timescale for action implementation, which is designed to work with their own prior commitments and

working schedules. Maintaining and updating the action plan is also managed collaboratively by the EDIC.

Future plans for the SAT

The EDIC will continue to meet termly to discuss the department's EDI strategy and oversee the implementation of the action plan, which will remain a standing point on the agenda. After relaunching the committees in 2021, we will continue to monitor attendance of the EDIC and review its membership. To ensure membership is engaged, we will write annually to members of the EDIC with less than 50% attendance at meetings to review their membership and see what further support they may need in attending meetings. Succession and turnover will be managed through periodic advertisements of vacancies to the wider department. Minutes of every meeting will be written and shared on the departmental intranet to ensure transparency.

d Consideration of previous panel feedback

Further representation of associate professors on the team

We have increased APs on the EDIC from 1 to 4.

Further analysis of the turnover data.

We now collect turnover data at a more granular level, including leavers' role types in our analysis (Table 38). In collecting this data, we have seen that women are leaving the department at rates proportional to the number of women working in those grades. However, we will be changing the leavers' questionnaire so it can be submitted anonymously in an effort to increase uptake and confidence in the data (NAP1.2).

Stronger actions to increase the number of female applicants and appointments.

We identified that while applications and shortlisting for academic roles were balanced, women were less likely to be appointed, leading to 4.5 (Figure 15). Due to low turnover at senior levels, this action will be continued in our future action plan (NAP3.1, NAP3.2). This work will address another piece of feedback we received, which was to implement, 'further, proactive actions to recruit women to senior roles' (32).

Further action regarding research grant applications (success rate is higher for women than men, but the value of grants is lower for women than men).

After further analysis, success rates for grant applications were very similar (Table 39). However, women were less successful than men in the highest value applications, reflecting wider university trends. We implemented further actions in our action plan to address this (CAP3.5, CAP3.6).

2. An overview of the department and its approach to gender equality

In Section 2, applicants should evidence how they meet Criteria B and D:

- *Progress against the applicant's previously identified priorities has been demonstrated*
- *Evidence-based recognition has been demonstrated of the key issues facing the applicant*

Recommended word count: 3000 words

Please provide a critical evaluation of your most recent action plan and any other actions you have initiated since your award.

2.1. Evaluating progress against the previous action plan

a Previous Action Plan

Action Point	Objective and Rationale	Actions & Timescale	Responsible Individual(s)	Measure(s) of Success
1.1	<p>SAT will meet termly to discuss the implementation and progress of the action plan.</p> <p><i>Since formation of the SAT in 2012, the SAT has implemented action points advancing equality, diversity and inclusion in NDS</i></p>	<ul style="list-style-type: none"> i. Termly: continue termly SAT meetings with the action plan as a standing point on the agenda ii. Termly: action plan will be updated at least termly with actions completed and new actions added 	AS Champion	Deadlines for SAT and action plan are met.
1.2 (35)	<p>Staff and student surveys to be completed and results circulated.</p> <p><i>To date, survey data has been invaluable to observe positive impact of actions implemented and identify areas for improvement.</i></p>	<ul style="list-style-type: none"> i. Oct 2020: Departmental survey to be circulated to replace delayed University survey, and to include students ii. Trinity term 2020: results from surveys to be circulated in Head of Department Q&A 	AS SAT AS Coordinator	<p>Survey completed by 80% of staff by 2021.</p> <p>Action plan to be reviewed and updated following information from surveys.</p>
1.3	<p>Student recruitment, attainment and withdrawal data to be</p>	<ul style="list-style-type: none"> i. Annually: analyse data and compile a report on student figures to be shared with SAT and Education Committee annually. 	Director of Graduate Studies	Changes, trends and anomalies in student data are clearly identified within annual data reports and addressed as appropriate.

	<p>collated and analysed annually.</p> <p><i>Analysis of degree results and withdrawal data to date revealed no significant gender difference in degree completion rate. If this should change, access to the reasons for withdrawal will enable accurate interpretation of the reasons for the change, and therefore appropriate action.</i></p>		<p>Graduate Studies Administrator</p> <p>Athena SWAN Coordinator</p>	
1.4	<p>Staff recruitment, numbers by role and leavers data will be analysed at yearly intervals.</p> <p><i>We will continue to record and analyse this data to ensure gender parity of applications and appointments and assess success of initiatives like the childcare provision launched in 2016, and recruitment made via the NDS 'talent pool'.</i></p>	<p>i. Annually: continue to review and analyse the data.</p> <p>ii. Annually: report produced and reviewed by staffing committee and/or SAT</p> <p>iii. July 2019 – July 2021: adapt data collection processes to allow data to be collected and stored in one central hub, reducing administrative burden and facilitating easier analysis.</p>	<p>HR Manager</p> <p>Athena SWAN Coordinator</p>	<p>Report summarising staff data to be distributed to all staff annually.</p> <p>Explanation for 100% of staff leaving the department.</p> <p>Gender of leavers is proportional to number of staff at that grade</p>

1.5	<p>Continue to monitor the effectiveness of inductions</p> <p><i>The Induction Working Group improved and re-launched the induction process in 2015 to positive feedback in the 2016 survey. The 2017 survey revealed a gender disparity in the number of staff being offered a site-specific induction. Site-specific inductions are important to manage the split-site nature of NDS and maintain consistency in staff experience. Further analysis revealed that the language surrounding inductions differed in the survey versus day-to-day use, potentially causing confusion in how inductions were defined and skewing results.</i></p>	<ul style="list-style-type: none"> i. Bi-Annually: examine the results of the annual staff survey and determine if there are areas for improvement ii. 2017: Conduct a focus group of recent inductees to determine areas for improvement iii. Annually: surveys/probation forms to be used to determine gender disparities in inductions offered and usefulness, with disparities investigated and addressed iv. 2018: Identify specific sites where inductions could be improved v. Trinity 2021: implement new site-specific induction and buddy system in the department vi. November 2021: Simplify survey questions around inductions and increase consistency in the language used to refer to inductions 	Athena SWAN Coordinator	>90% effectiveness of both departmental and site-specific inductions with no gender disparity.
1.6	<p>Ensure committees are gender balanced</p>	<ul style="list-style-type: none"> i. 2019: the NDS committee structure to be adjusted to provide greater clarity over their remits. 	<p>Departmental Administrator</p> <p>All Committee Chairs</p>	Gender balanced committees by Oct 2021 (proportional to department numbers)

	<p><i>Committee membership (apart from the management committee) is currently voluntary. It is therefore important to monitor the gender balance of committees.</i></p>	<ul style="list-style-type: none"> ii. 2019-20 the membership of NDS committees to be reviewed and adjusted to maintain gender balance and ensure members remain engaged. iii. Bi-annually: monitor committee membership and attendance iv. Hilary term 2021: Implement new committee structure in the department v. Hilary term 2021: Ensure new starters are aware that they are expected to serve on at least one committee vi. Trinity term 2021: Create new webpages on the staff gateway for each committee vii. Trinity term 2021: rotate committee members and chairs in accordance with terms of reference viii. Ongoing: appoint future vacancies by advertisement and election 		<p>Every full-time member of staff to serve on a committee</p>
1.7	<p>Monitor workload and evaluate the need for workload allocation model</p> <p><i>Surveys have revealed a gender disparity in the amount of administrative work</i></p>	<ul style="list-style-type: none"> i. 2016-2020: Include workload allocation questions in annual survey ii. NDS to assist in the development of a workload allocation model for MSD iii. 2019: Investigate if workload allocation model is appropriate for NDS 	<p>Athena SWAN Coordinator</p>	<p>Identify changes in workload allocation, gender differences and perception of workload allocation</p>

	<p><i>undertaken by female academic staff versus male academic staff, as well as in perceptions over whether workload is allocated fairly. We will need to analyse the situation in greater detail to understand the reasons for the situation and correct it.</i></p>	<p>iv. 2020: If workload allocation model is found appropriate, trial model in NDS</p>		
<p>2.1 *</p>	<p>Enhance awareness of Health and Wellbeing</p> <p><i>NDS is committed to promoting the health and wellbeing of all staff. Aspects are currently advertised on the website and in the bulletin. However, in our 2018 survey and a recent health and wellbeing survey conducted within the department we saw a lack of engagement in male staff with health and wellbeing and a number of staff experiencing symptoms of low-mood, with women being more</i></p>	<p>i. 2016-2017: Create a focus group to identify best mechanism to formalise the programme</p> <p>ii. 2017-2018: Develop a programme of activities, training and information for managers and staff regarding mental and physical wellbeing at work (e.g. biodiversity walks, standing desks, stress management, mindfulness)</p> <p>iii. 2017-2018: Identify mental health awareness training for managers and develop a series of help documents for distribution</p> <p>iv. 2020: Train a cohort of Mental Health First Aiders to support department</p> <p>v. Hilary Term 2020: Create a mental wellbeing hub on the staff intranet where NDS members can find</p>	<p>Athena SWAN Coordinator</p> <p>Mental Health Pilot Project Group</p>	<p>At least 75% of staff stating they feel their line manager/department supports their mental wellbeing (with gender parity)</p> <p>Gender parity in engagement with the wellbeing bulletin</p> <p>Proportion of staff engaging with the wellbeing bulletin to match engagement with the departmental bulletin</p>

	<i>likely to express that they have concerns about their health and wellbeing and less likely to feel comfortable discussing their concerns with their line manager.</i>	resources and information on wellbeing support. vi. 2021: Create new wellbeing bulletin for department, raising awareness of mental health conditions and support within the University/department		
2.2	<p>Raise awareness of flexible working policies within the department to all staff</p> <p><i>Currently, flexible working is more likely to be undertaken by female staff, and male staff are more likely to say that their caring responsibilities impact their work in a way that is difficult to manage.</i></p>	i. 2017: Create a leaflet detailing family leave and flexible working policies ii. 2017: Flexible working policies to be highlighted in departmental inductions iii. 2021: Use survey to investigate whether male and female staff are equally comfortable requesting flexible working iv. 2017: Profiles and quotes from carers and part-time workers to be included on website v. 2019: Opportunities to formally discuss flexible working to be included in PDRs vi. 2021: Consultation with men in the department to be undertaken to investigate potential barriers to requesting flexible working	HR Manager	<p>Increase number of men working flexibly to 3 by 2021.</p> <p>Gender parity in response to questions over whether caring responsibilities impact their work.</p> <p>>85% positive responses to the survey question, "do you believe the department supports flexible working?"</p>
2.3 (33)	Support staff returning to work following a prolonged period of leave	vii. 2016: Run a focus group with staff who have returned to work following a prolonged period of leave	HR Advisor	>80% positive feedback in return to work interviews

	<p><i>Staff who have been on longer periods of leave have been supported in returning to work on a case by case basis. Because most staff who are on leave for longer periods are women, it is important to ensure that they are well supported on their return to work to maintain gender equality in the department. We would like to investigate whether further, universally applied support would be beneficial.</i></p>	<ul style="list-style-type: none"> viii. 2021: Introduce a 're-induction' for members of staff returning from leave ix. 2021: Promote Shared Parental Leave through new page on Staff Gateway 		<p>Identify if a policy to reduce teaching commitments (or similar) is required.</p>
<p>2.4 *</p>	<p>Strengthen departmental identity</p> <p><i>The split-site nature of NDS is a major factor in the success of the department, but can make the department feel fractured unless site-specific cultures are monitored and steps are taken to unite staff across sites. Feedback from staff surveys</i></p>	<ul style="list-style-type: none"> i. 2016-2021: Release fortnightly bulletin with events and information for all staff. ii. 2020: Creation of new Staff Gateway on NDS website and use to share departmental information to all staff across sites, replacing outdated intranet iii. 2016-2021: Continue running departmental Away Day iv. 2016-2021: Continue running regular head of department Q&A sessions 	<p>Departmental Administrator</p>	<p>Increase in positive response to survey question "I feel integrated into my department" from 81% to >90% without gender disparity</p>

	<p><i>identified a desire for stronger departmental identity</i></p>	<ul style="list-style-type: none"> v. 2016-2021: Continue to offer regular NDS social events vi. 2021: Run a departmental re-branding design competition to replace the department logo. vii. 2021: Increase integration across sites with “noticeboards” on the staff gateway viii. 2021: Distribute stationary and office ware with new NDS branding 		
<p>2.5 (34)</p>	<p>Identify the most effective mechanisms to eradicate bullying and harassment from NDS</p> <p><i>NDS operates a zero-tolerance policy on bullying and harassment, although survey data reveals that instances still exist within the department. Eradicating bullying and harassment is crucial to creating an inclusive environment.</i></p>	<ul style="list-style-type: none"> i. 2019: Bullying and harassment to be included as a standing topic in the NDS bulletin, re-enforcing the department’s zero-tolerance policy. ii. 2016: Creation of B&H working group iii. 2017-2018: Numbers of bullying and harassment advisors to be increased iv. 2018-2019: Mandatory bullying and harassment training introduced to department v. 2020: Bullying and harassment blog post published on website to reiterate stance against bullying and harassment. vi. 2021: share bullying and harassment data with the department to increase transparency and trust in the 	<p>AS Champion</p> <p>Bullying and Harassment Advisors (formerly B&H working group)</p>	<p>Bullying and harassment to be reduced from 8% to 5%</p>

		department's response to bullying and harassment.		
2.6 (34)	<p>Enhance the visibility of women within the department</p> <p><i>Ensuring women are well represented within the department is crucial in creating an inclusive, welcoming departmental culture and encouraging women within the department to progress into more senior roles. Equal representation has historically been difficult to achieve due to the lower numbers of female staff in more senior positions in the department.</i></p>	<ul style="list-style-type: none"> i. 2016: Create Women in Science section of the NDS website ii. 2016: Highlight successes and achievements of female staff and students on website iii. 2021: include request that research groups consider gender and ethnicity diversity when putting forward speakers for Surgical Grand Rounds 	Departmental Coordinator	<p>Increase in positive response to survey question "are women well represented in NDS" from 30% to 50%.</p> <p>Increase in proportion of female speakers at Surgical Grand Rounds to 50%.</p>
3.1	<p>Continue to monitor the PDR process to ensure uptake and follow-up</p> <p><i>PDRs are important development tools, and it is important that all staff are offered one and that they are useful in order</i></p>	<ul style="list-style-type: none"> iv. 2018: Update PDR forms to include section that acknowledges non-promotable tasks (e.g. service on the SAT) v. 2019: Develop new PDR information sheets to support line managers in holding effective PDRs 	HR team	<p>Greater proportion of male members of staff participating in non-promotive tasks (e.g. outreach) (from 37% to 50%)</p> <p>>90% of people finding PDR useful.</p>

	<i>to ensure equal opportunities for development across male and female staff.</i>	vi. 2016-2020: Monitor staff uptake of PDRs and PDR effectiveness through staff survey		
3.2 * (37)	<p>Expand awareness of and opportunities for career development</p> <p><i>After the success of the promotion and re-grading Q&A session hosted in the department, we want to ensure that information about career development and progression opportunities is promoted to all staff. We especially want to encourage women to consider their options for progression and development in order to nurture female staff into more senior positions.</i></p>	<p>i. 2017: Include section in PDR on necessary trainings and whether the role has changed/regrading is possible</p> <p>ii. 2017: Develop NDS Training Fund for staff development</p> <p>iii. 2020: create section on Staff Gateway for career progression and development, where all information regarding re-grading and development (including links to University's Career Service) can be found</p> <p>iv. 2021: Amend emails regarding PDR to ensure that all line managers are reminded to incorporate career development opportunities</p> <p>v. 2016-2020: monitor training uptake</p> <p>vi. 2021: create page on Staff Gateway about Training Fund</p>	HR Team Communications and Public Engagement Officer	<p>Increase in the proportion of staff who feel their line manager supports their career development from 78% to 90%.</p> <p>Increase in awareness of training opportunities from 60% to 90% with no gender bias.</p> <p>At least 4 applications to Training Fund annually.</p>
3.3 (32, 33)	Develop and publicise mentoring programmes and ensure everyone is aware of the mentoring available to them	<p>i. 2017: include information on available mentoring schemes in induction packs</p> <p>ii. 2021: include information on mentoring and other development</p>	Athena SWAN Coordinator HR Advisor	<p>Increase in staff (in all staff categories) participating in mentoring to 60% by Nov 2021</p> <p>Increase in awareness of mentoring schemes to 80%</p>

	<p><i>NDS took part in the divisional mentoring scheme and established a departmental mentoring scheme, leading to an increase in female mentees. In 2016, 36% of staff remained unaware of mentoring schemes available</i></p>	<p>opportunities for line managers to go over with staff in PDR</p> <p>iii. 2021: create an inter-departmental mentoring scheme with another department in the division to increase pool of potential mentors</p> <p>iv. 2021: promote mentoring scheme on staff gateway and in staff bulletin</p>	<p>Communications and Public Engagement Officer</p>	
<p>3.4</p>	<p>Generate greater teaching opportunities for junior researchers and monitor gender balance of uptake</p> <p><i>Teaching remains an important component for career progression and there is a gender imbalance in uptake.</i></p>	<p>i. 2021: consider creating new training course that will provide teaching opportunities for junior researchers</p> <p>ii. 2021: promote divisional teaching opportunities website on new staff gateway</p> <p>iii. Annually: monitor the gender balance of teaching activities within NDS</p>	<p>AS Coordinator</p> <p>Education Committee</p> <p>Director of Graduate Studies</p>	<p>Increase in number of researchers who say they have undertaken teaching to 50%</p>

<p>3.5 * (33)</p>	<p>Put in place a formal mechanism to support grant and fellowship applications from junior researchers</p> <p><i>Part of our strategy to encourage more women into senior positions is through ensuring female members of staff are supported through every stage of their career. Further, there is a lot of support in place for senior researchers applying for funding, but junior researchers are less aware of the process and the support that exists.</i></p>	<ul style="list-style-type: none"> i. 2021: Establish a list of successful grant holder who can provide funder-specific advice for junior researchers and post on the staff gateway ii. 2016-2020: Research Committee to identify researchers at the relevant career points iii. 2016-2020: NDS research office to target call searches for these individuals iv. 2016-2020: send individuals to grant writing workshops v. 2016-2020 Buddy researchers with a later stage researcher in their field 	<p>Grants Manager</p>	<p>>50% positive response to question, "The department provides adequate support in applying for grant funding for a fellowship or as a principal investigator or co-investigator."</p> <p>More than 50% of junior researchers submitting grant applications in 2021. Increase in number of successful fellowship applications from early career researchers from 3 to 5 per year from 2018</p>
<p>3.6 *</p>	<p>Increase career development support for early and mid-career researchers</p> <p><i>Self-assessment has identified a number of "pinch points" for women along the researcher career pipeline. The department will seek to address this</i></p>	<ul style="list-style-type: none"> i. 2019: Create Recognition of Distinction panel to support mid-career researchers in attaining associate professorships and University Research Lecturer positions ii. 2020: Create ECR network for early career researchers to share support on grant applications and create their own network and potential collaborations 	<p>Grants Manager</p>	<p>Increase in application rates from female postdoctoral researchers for funding.</p>

	<i>through offering additional support in their career progression.</i>	<ul style="list-style-type: none"> iii. Ongoing: Target individual early career researchers to encourage them to apply for relevant funding opportunities iv. April 2021: implement and advertise departmental COVID career fund to researchers, taking extra care to target female researchers 		
3.7 *	<p>Create handbooks for PIs, staff and students to clarify expectations, training requirements, departmental policies etc.</p> <p><i>As part of our desire to strive towards best practice in all policies and to ensure consistency of behaviour and treatment for all staff, we want to ensure this information is available in a clear and up-to-date format.</i></p>	<ul style="list-style-type: none"> i. 2020: Create Education page on staff gateway, including code of practice for supervisors and policies for students ii. 2019: Create guides for line managers on PDR and giving feedback iii. 2021: create line managers' toolkit, detailing information on how line managers are expected to treat their staff, and what the policies and procedures are. This will be available on the staff gateway 	<p>Graduate Studies Administrator</p> <p>Athena SWAN Coordinator</p>	<p>>70% positive response to the question "My department sets clear expectations of behaviour."</p> <p>Increase in confidence in line managers in administering HR policies to 75%</p>
4.1	Offer surgical and research placements to undergraduate students to encourage students to choose surgical and research specialties	<ul style="list-style-type: none"> i. 2019: Increase awareness of FHS ii. 2019: Increase number of female FHS students taking placements in the department 	<p>SAT</p> <p>Education Committee</p>	<p>2 placements offered per year, at least one female.</p>

	<p><i>A recent study⁴ found that women who have been exposed to medical research while in training were more likely to pursue a research career.</i></p> <p><i>We aim to offer more undergraduate placements to medical undergraduates to encourage a greater number of female students to pursue a career in surgical sciences</i></p>			
<p>4.2 (32)</p>	<p>Staffing Committee to oversee succession planning and inclusion of female candidates</p> <p><i>Women are not yet well represented in the department at senior levels. As a result, we intend to create succession plans for staff that work towards better representation of women and encourages female</i></p>	<p>i. 2017: Instruct principle investigators to create succession plans for their roles</p> <p>ii. 2020: Principle investigators to update their succession plans</p> <p>iii. Ongoing: Staffing Committee will identify female candidates within the department for senior academic roles when those roles are likely to become available.</p> <p>iv. Ongoing: Staffing Committee will ensure every PI has a relevant succession plan in place and will</p>	<p>Staffing Committee</p> <p>HR Manager</p> <p>HoD</p>	<p>20% of new senior appointments to be women</p>

	<i>applications to senior positions</i>	<p>have them update their plans every 3-5 years.</p> <p>v. Ongoing: any cases for direct appointments will be reviewed by the Staffing Committee, who will explore opportunities to approach female candidates.</p>		
4.3 (35)	<p>Ensure all staff, starting with panellists, have undergone bias training</p> <p><i>This would be beneficial for all staff, but particularly recruitment panels, in order to tackle any unconscious bias that could occur during the recruitment process. As we are struggling to recruit women to senior positions, this is something we want to ensure is not creating a barrier for female candidates.</i></p>	<p>i. 2018: all staff who serve on recruitment panels to have completed unconscious bias training</p> <p>ii. 2021: Completion rates tracked and monitored</p> <p>iii. 2019: Unconscious bias training to become mandatory for new starters</p>	<p>HR Manager</p> <p>HR Advisor/SAT member</p>	<p>100% of staff on recruitment panels will have completed unconscious bias training</p> <p>>90% of departmental staff will have completed unconscious bias training</p> <p>No gender disparity in successful applications to positions between male and female candidates</p>
4.4 (33)	Establish a 'Women in Surgical Sciences' group to encourage and support female surgeons to develop an	<p>i. 2017: Establish Women in Surgical Sciences group and develop a mission statement, terms of reference and application procedure for funding.</p>	HoD	<p>At least 4 surgeons (2 female) funded by 2018</p> <p>At least one female surgeon participating in Women in Surgical Sciences Group and successful in</p>

	<p>academic/research career</p> <p><i>Though the number of women in clinical surgery is increasing, the proportion remains close to 10% and in many cases, female surgeons are unlikely to take time from clinical practice to develop a research practice, either due to lack of funds or support.</i></p>	<ul style="list-style-type: none"> ii. Ring-fenced funding to buy out female clinicians' time, allowing them to start a research portfolio iii. 2017: Send application call for funding and encourage female surgeons to apply. 		<p>funding to progress to applying for independent funding by 2021</p>
<p>4.5 * (32)</p>	<p>Ensure senior recruitment process is fair and equitable</p> <p><i>Recruiting to senior positions in the department does not happen often, so it is all the more important to ensure that when it does happen, appointments are done fairly. Currently, the department uses professional networks of other senior members of staff to find top talent and advertise posts. This is problematic due to the</i></p>	<ul style="list-style-type: none"> i. 2020: Employ use of gender bias decoding software across all advertised vacancies ii. 2020: Advertise vacancies using social media, targeting networks for under-represented groups iii. Bi-annually: An observer will be invited to observe the recruitment process, from shortlisting to interview, to ensure there is no bias present in decision making processes 	<p>AS Coordinator</p> <p>HR Manager</p>	<p>50% increase in number of female applicants to senior roles</p>

<p><i>senior team being predominantly male. We will therefore review how we advertise and recruit to senior posts to encourage more female applicants</i></p>			
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b Methodology of action implementation

Implementation of the action plan is the responsibility of the EDIC, which meets on a bi-monthly basis, and is a standing item on the agenda, with each meeting focusing on one or two specific actions for further development and assessment. Tasks are allocated to committee members, who report back to the ASC, who ensures the action plan is updated.

We assess the effectiveness of actions and initiatives with quantitative analysis--using feedback surveys and engagement data--and qualitative analysis, through focus groups and free-text comments. This regular analysis of events and initiatives facilitates the continued assessment and editing of the action plan: where initiatives are deemed ineffective, the EDIC can quickly review the relevant action and add or adjust action points. For example, we created the NDS Slack Channel for staff to keep them connected during the pandemic. Despite 120 people (79% of the department) joining, active users were low. We saw much higher levels of satisfaction with wellbeing emails, so we developed the new 'Wellbeing Wednesday' bulletin (Table 34, Table 35, NAP4.2).

This regular assessment also allows us to add new actions as new information becomes available. As responses to career development questions showed gender imbalances in career development opportunities, we created a new series of webpages on career development, focusing on apprenticeship schemes, regrading and skills training (including recommended courses and providers) (Table 8, Table 9, CAP3.2, CAP2.4).

c Reflecting on red and amber actions, main barriers and facilitators to action implementation and achieving outcomes, and main learnings

Low staff turnover and recruitment rates at senior levels

Low staff turnover at senior levels and resulting low rates of recruitment is compounded by a lack of female talent at top levels in academic surgery, meaning some actions have been insufficient in meeting the desired objectives (CAP4.2).

Nationally, women make up 10.7% of clinical professors in surgery¹. We adjusted our recruitment to senior positions, including gender bias decoding, independent monitoring and utilising social media and women's/BIPOC network (CAP4.5). However, due to how infrequently senior recruitment occurs, it will take more time to see the impact of these actions (NAP3.1).

The lack of senior women in surgery has also impacted our goal to develop a mentoring programme to support female researchers (CAP3.3). Few female academics results in a small potential mentor pool, exacerbated by the fact that NDS is split over several sites, complicating the process of making matches and organising events and organising any events. We therefore adjusted this action in 2020 and will continue it into our new action plan (NAP2.12.5).

¹ <https://www.medschools.ac.uk/clinical-academic-survey>

To address these challenges, we have created a more comprehensive set of actions to address challenges at every point of the career pipeline (NAP2.12.3-2.12.7, NAP3.1).

MAIN LEARNINGS: We recognise the complexity of increasing representation of women in senior roles due to low turnover and have implemented several actions in the action plan that tackle challenges at various points of the career pipeline for women, nurturing women within the department into more senior roles as well as recruiting them externally (NAP2.12.3-2.12.7)

Affected actions: CAP3.3, CAP4.2, CAP4.5,
New/continued actions: NAP2.12.3, NAP2.12.4, NAP2.12.5, NAP2.12.6, NAP2.12.7, NAP3.1, NAP3.4

Limitations of actions and success measures

Most success measures have been met for CAP3.5. However, we found that a target of 50% of junior researchers submitting grant applications was unrealistic; researchers work on grants over a period of years, so most of our junior researchers would not be looking to submit grant applications at any given time. We achieved our other outcomes. In 2020, 90% of staff agreed that the department gives adequate support in applying for grant funding with a gender disparity (F: 78%, M: 95%). We developed our new action plan with a focus on career progression and grant support for researchers at various stages of their careers to eradicate this disparity (NAP2.7, NAP2.6)

CAP4.4 was reimaged, as the department set up the Women in Surgical Sciences group but found it ineffective in achieving the stated success measures. This was largely because individual needs could not be met through a single approach, especially with the low numbers of women at this point in their career in surgery in the department. As these women are embedded in Oxford University Hospitals, supporting them in developing a research career requires a collaborative approach with OUH, which is an ongoing effort. The department also felt the original action provided intervention at too late a stage in female surgeon's careers. To address this, we have begun developing a new mentoring scheme, which will be promoted to Academic Clinical Fellows (ACFs) when they join NDS (NAP2.53.3).

MAIN LEARNINGS: We have taken further care when developing our new action plan, discussing the actions with our HR, Grants and Finance teams to ensure that the objectives we have used are relevant to the action and achievable.

We have also made some adjustments to our data collection processes to allow more granular data collection and conduct a more sensitive self-assessment (NAP1.1-1.5). This will be further supported by changes made by the University to the staff experience survey, which now allows for intersectional analysis.

Affected actions: CAP2.3, CAP2.4, CAP3.5, CAP4.4

New/continued actions: NAP1.1-1.5, NAP2.6, NAP2.7, NAP3.3, NAP4.3

Industry-wide barriers

CAP2.5 was completed, however further consultations with staff (and with the wider industry) have demonstrated the complexity of bullying and harassment in research and academia. The department has therefore decided to carry CAP2.5 into the new action plan (NAP5.1). We have already incorporated new survey questions on this topic to allow more robust data collection and sensitive intervention planning.

Further work is needed to achieve the original success outcomes of CAP2.6 despite having completed all actions and achieved half of our intended outcomes.

Particularly challenging has been increasing the proportion of female speakers at Grand Rounds, as teams select their own speakers and there is a significant gender imbalance in those disciplines and the industry at large. However, the department has been working to ensure women are equally represented at departmental events (such as the Away Day). We have had gender-balanced Chairs at the Away Day over 2017-2021 and we were showing an increase in female speakers until the pandemic (Table 21, Table 22), contributing to 89% of staff agreeing that the department actively champions women (Table 4). We recognise that there is much still to do to increase the representation of women in the department, especially at senior levels, so we will be prioritising this area in our new action plan, broadening our focus to include BIPOC staff (NAP3.2).

MAIN LEARNINGS: We have begun investigating more novel solutions to such barriers, such as an anonymous reporting tool for bullying and harassment (not currently available in the University) (NAP5.1). We have also implemented several actions in the new action plan that tackle challenges at various points of the career pipeline for women (NAP2.12.3-2.12.7)

Affected actions: CAP2.5, CAP2.6

New/continued actions: NAP3.2, NAP2.12.3, NAP2.12.4, NAP2.12.5, NAP2.12.6, NAP2.12.7, NAP5.1

Data collection and analysis, and administrative burdens

Having a small department and administrative team is a particular challenge in managing workload burdens, implementing our action plan and conducting our self-assessment processes, which largely fell to female PTO staff. This made it difficult for the team to monitor certain datasets that are not routinely collected and analysed (such as training data), impacting CAP4.3. In 2019, the department recruited our ASC, who now oversees the entire process and assumes that administrative burden. We also streamlined our data collection processes to ensure all necessary data could be collected in a single place and through routine processes, further reducing the burden for our HR team (CAP1.4).

We have engaged more senior male members of the department, recruiting them to champion EDI within their spheres of influence and to contribute to our action plan so

that the work is not disproportionately undertaken by female staff. By doing this and keeping the action plan as a standing item on the EDIC agenda, we have been able to ensure the action plan is implemented and updated on a regular basis (CAP1.2). However, 1.2 remains amber due to the drop in survey responses in the midst of the pandemic. To address this, will be offering incentives for completing the survey and ensuring we run no more than two department-wide surveys per year (NAP1.1).

Following the recruitment of the ASC, data collection and analysis became one of our greatest facilitators in successfully implementing our action plan. We now have the capacity to analyse data in further detail, revealing new areas of potential. For example, a more granular look at our staffing data revealed a significant gender imbalance in our Personal and Executive Assistant roles, which was coupled with fewer progression and development opportunities (Figure 12). This analysis led to a new pilot project reviewing occupational segregation in the department, which will continue into the new action plan (NAP2.12.2).

MAIN LEARNINGS: Every member of the EDIC volunteers for at least one action to work on and several members of the MEB are active members of the EDIC, allowing them to champion our EDI strategy throughout the department. We have also recognised that there is opportunity for collaboration with other similar departments, allowing us to draw on a larger number of people without duplicating efforts. We have begun to focus on building relationships with those departments and will continue to collaborate with other departments on such initiatives as mentoring (NAP2.5). We will continue refining and improving our data collection processes and we will use this information to conduct more intersectional analyses of the department (NAP1.3, NAP3.1-3.4, NAP5.3).

Affected actions: CAP1.1, CAP1.2, CAP1.3, CAP1.4, CAP1.5, CAP4.3

New/continued actions: NAP1.3, NAP2.12.2, NAP3.1, NAP3.2, NAP3.3, NAP3.4, NAP5.3,

COVID-19

The COVID-19 pandemic created further challenges for researchers in the department and across the industry. With many researchers placed on furlough and greater difficulty in accessing funding, work on CAP3.6 became more challenging. As research indicating significant gender disparities in the effects of the pandemic became more prevalent, the department decided to expand this action in the hopes of mitigating the effects of the pandemic once research could resume. We budgeted £30,000 for a new fund to support researchers whose careers had been stagnated by the pandemic. This fund has been applied to by 10 researchers, with all applicants either being successful or referred onto another source of funding (which they secured). The fund will also remain available for researchers wishing to attend conferences or undertake further training. We also encouraged a high number of researchers apply to the division's rebuilding research momentum fund: 8% of our academics applied and our staff accounted for 5% of all applications despite only accounting for 2% of total staff in the division, receiving over £25000 in additional support.

We knew the pandemic was disproportionately affecting the career prospects of our female and BIPOC staff. In 2021, we saw gender imbalances in awareness of career development opportunities (Table 25), so we created a new series of webpages on career development. We have already had success replacing the old intranet with the new staff gateway, which has proven more useful to female and BIPOC staff, so we are hopeful that these pages will be seen and used by them (CAP2.4, Table 19, Table 20). This action will continue in our new action plan (NAP3.2, NAP2.4). We also noted that job security was a theme present in both our 2020 and 2021 survey, which was exacerbated by the pandemic and likely to affect our female researcher's decisions to leave the industry. We decided to expand the NDS Training Fund to include provision for staff nearing the end of their fixed-term contracts, allowing them greater confidence in securing their next role (CAP3.2, NAP2.1).

Although the pandemic created many barriers to the implementation of our action plan, it did facilitate opportunities to forge ahead with our goal to enhance the department's support of health and wellbeing, so CAP2.2 was re-prioritised. We expanded this action point, creating the Mental Health Pilot Project and implementing our original actions in addition to several new ones.

The success of these efforts has been evident, with NDS achieving the highest divisional scores in the wellbeing section of the 2021 University staff experience survey. When compared to the wider university, we achieved the 5th highest score (the highest of any department with more than 24 members of staff). Most importantly, when asked to rate the effectiveness of the department's response to the pandemic, we achieved gender parity in responses, receiving scores of 4.2 from female staff and 4.1 from male staff (Table 11, Table 12). We aim to carry this work forward and share our learnings and success with other departments and institutions (NAP4.1-4.3).

Additional COVID word count: 490

MAIN LEARNINGS: We learned how to embed mental health and wellbeing into the departmental culture and the impacts of doing this on staff wellbeing and engagement. We also discovered the difficulties in launching new services tied to mental health and wellbeing, particularly because of the stigma around mental health, and the difficulties in engaging certain groups, e.g. male staff. Our aim for the future is to carry this learning forward in our own mental health work, focusing on ensuring the programme serves our staff from different cultures and further reducing gender disparities in this area (NAP4.1, NAP4.2).

Affected actions: CAP2.1, CAP2.4, CAP3.6

New/continued actions: NAP2.1, NAP2.4, NAP4.1-4.3

2.2. Key priorities for future action

Please describe the department's key issues relating to gender equality and explain the key priorities for action.

Identification of Key Priorities

The EDIC has thoroughly reviewed staff data, student data, survey data and mandatory datasets to assess our current action plan and areas of development. We have used this analysis and our learnings over the previous award period to identify our four key priority areas. Additional data that was analysed and has prompted new actions are included in Appendix 2.2.

Due to changes made to the way the University administers its staff surveys in 2021, we now have access to more intersectional data and departments can more easily benchmark their results against the wider university. This benchmark reveals that NDS outperforms the wider university/division in every core question (e.g. Table 3).

However, we have still seen a decrease in overall positive response rates, possibly because the 2020 survey was administered in November 2020, while the 2021 survey was administered in April 2021. We believe that these two surveys are therefore a more accurate measure of the impact of that lockdown than of general trends over time. It is also worth mentioning that where non-responses were omitted from analysis from 2016-2020, they have been included in 2021, bringing the overall positive response rate down. We will therefore continue to administer our surveys as the 2021 survey was administered (NAP1.1).

Our student data shows that women are better represented in our PGT courses compared to our PGR courses. This is largely due to the lower number of clinical women coming into the department to do their DPhils compared to men, which we will address via NAP3.5. There has been an attainment gap for PGT students historically, which we believe will be rectified by recent changes to award classifications (Table 14, Table 15). We will continue to monitor attainment data and will implement new actions if the gap does not close quickly (NAP1.5). We have had a 100% pass rate for PGR students in our previous award years. Our student survey analysis in 2020 was hindered by a low response rate; we will therefore prioritise incentivising students to complete the survey, which we will continue to run bi-annually (NAP1.1)

Priority 1: Bullying and Harassment

Our efforts to decrease instances of bullying and harassment experienced by women have been largely successful, with **[REDACTED]** of women having experienced bullying or harassment in 2021 compared to **[REDACTED]** in 2016. Further, our department has greater rates of reporting incidents, greater awareness of bullying and harassment processes (96%), and greater awareness of how to contact a harassment advisor (78%) compared to the division. However, we have seen an alarming and sudden increase in the number of men experiencing bullying and harassment (Table 23). We can see that from 2020 to 2021, academics and researchers experienced a greater deal of bullying and harassment, irrespective of gender, as have men in professional and support roles. Though rates remain low for

students, 53% know how to access a harassment advisor, which we will address in NAP5.1.

We have already done some investigations into barriers to reporting and mechanisms to eradicate bullying and harassment as part of our current action plan (CAP2.5). However, we were not anticipating this trend. It is currently unclear what impact the pandemic has had on bullying and harassment. However, we have seen very low satisfaction rates in the way in which bullying and harassment reports have been handled (Table 7). Numbers of respondents to this question were low, so we will seek to introduce a new question asking all staff if they are satisfied with the way bullying and harassment is handled to gain more clarity, while also working to improve support for those who have experienced it themselves (NAP5.1). We will also introduce a new training package for line managers to educate them on managing performance in a constructive way, reducing the risk of staff feeling they have received excessive criticism or patronising language (two of the most common forms of bullying and harassment our staff received)(Figure 22)(NAP5.2).

Priority 2: Career Development

In our most recent survey, career development was the second-most popular theme of answers to the question, ‘what single area of NDS do we most need to improve?’ (Figure 23-Figure 25). Career development is a particular area of improvement for our women in academic and research roles, as we’ve seen the pandemic compound historical gender imbalances; women’s satisfaction rates in career development questions have dropped at almost double the rate of men’s (Table 27, Table 28). We have therefore implemented a series of actions to address this (NAP2.12.3, NAP2.12.4, NAP2.12.6, NAP2.12.7).

We can also see BME staff are less likely to report feeling supported to think about their career by their line managers (Table 25). Disabled staff also have a lower overall satisfaction rate in career development, reporting that they are less clear about the development opportunities available to them (Table 26). It is therefore important that we offer training to our line managers that focuses on bringing these issues to their attention, making them aware of unconscious bias and how to combat it. We hope that this training, complemented by the work we’re doing to signpost to career development opportunities more clearly on the staff gateway, will equip them to support their female and BME reports in their career development (NAP2.4, NAP5.2, NAP3.4).

One aspect of development and progression that has remained a consistent area of difficulty for NDS has been in the prevalence of fixed-term contracts. There is a gender balance in the proportion of FT/OE compared to permanent contracts for staff (Figure 9, Figure 10, Figure 13). However, permanent posts become more common for researchers when they secure academic posts. Because we have fewer women progressing into these roles, the issue of fixed-term contracts is disproportionately affecting them.

This issue is challenging to address as research is funded by external bodies. The department cannot offer permanent contracts and fund these staff. To address the

insecurity that fixed-term and open-ended contracts cause, we will create further support for those who do not have permanent contracts in securing further work/funding and to support staff into more senior positions that come with permanent contracts (i.e. professorships) (NAP2.12.1, NAP2.12.3), which will complement our efforts to support early career researchers into applying for funding as PIs and progressing in their career.

Although we are performing well compared to the wider university, there is a clear desire for further career support amongst the entire staff body, particularly women (Table 27, Table 28, Figure 23). The department has been working to create new webpages on the staff gateway detailing training opportunities, organised in an easily searchable way. We will be carrying this action forward in our new action plan (NAP2.1, NAP2.4).

Priority 3: Representation

Our staff data reveals the lower proportion of women in academic and research roles at all levels in the department, particularly in senior roles, where only **[REDACTED]** of academic staff are women (Figure 6). Gender disparities are particularly evident in clinical career pathways; **[REDACTED]** (Figure 7, Figure 8). Men are equally likely to apply for grade 6-7 roles, but significantly less likely to be appointed (Figure 15). We will therefore investigate the reasons behind women having higher success rates in applying for lower grade research roles (NAP3.1).

Although numbers are too small to report in our department, we know that BME staff are under-represented in the University, particularly in professional and support roles, where they account for 8.6% of staff (compared to 22% for research staff and despite accounting for 20% of working-age adults in Oxford²) (Figure 26), leading to NAP3.2.

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<http://insight.oxfordshire.gov.uk/cms/system/files/documents/20150724%20Needs%20Analysis%20for%20Working%20Age%20Adults%20FINAL%20CORRECTED.pdf>

Increasing female representation in senior roles will require different interventions for clinical and non-clinical staff due to the differences in the way their contracts are usually held. Clinical staff may hold a full contract, honorary contract or part-time contract in the department, depending on how they were trained. Those who have secured ACF or ACL roles, as well as those who progress to professor level, are more likely to have their contract with us. Those who develop a research portfolio as a consultant are more likely to have their contract sit with the NHS and therefore won't appear in our staff data, making tracking the numbers of clinical researchers in our department more complex, although we have resolved to address this in our new action plan (NAP3.5). Appointments of ACFs and ACLs are managed by a central body, so we are limited in our ability to impact such appointments. However, we will work to encourage more female clinicians to establish a research portfolio. This has historically been achieved by utilising the professional networks of existing members of staff. However, professional networks are likely to reflect the demographics of those staff, and our senior staff are predominantly white and male, with men accounting for **[REDACTED]** of professors in NDS (Figure 6). We therefore will broaden our outreach in order to engage more diverse talent. We will therefore work to strengthen our working relationships with the OUH Trust's communications and professional development. We will also work to devise a strategy for supporting clinicians in establishing a research career through facilitating networking opportunities with NDS researchers (NAP3.5).

It is important to continue to encourage women to enter the department as clinical researchers early in their careers. We are expanding our outreach efforts after noticing that students from independent schools were securing a disproportionate number of spaces in our work experience programme (Table 29). We adjusted the success criteria of the programme to enable more equal access for applicants from state schools and saw an increase in the proportion of those students securing spaces. Following the success of our efforts, we will create a series of workshops that can be delivered within local schools with diverse student bodies and lower progression to top universities. These workshops will support students in writing applications and will encourage prospective medical students to consider a research career as well (NAP3.3).

In 2020, we implemented a new action to target senior recruitment processes in the department that aimed to review job descriptions and adverts with a gender bias decoder, and ensure posts were being advertised in areas where women and BME candidates would see them, rather than exclusively using our academics' own networks to identify candidates (CAP4.5). This action will be carried forward and further expanded with more actions targeting this area (NAP3.1).

We are hoping that these actions, combined with actions focusing on career development for female researchers, will result in more female and BME professors in NDS (NAP2.1-2.3).

We discovered that the department has been experiencing issues with occupational segregation. For example, we noted that every member of staff working in a PA or EA role are female and that this has been the case for several years (Figure 12). We also noted that this role had a lower salary ceiling with less scope for progression. We therefore decided to implement a pilot project to adapt the role to facilitate greater development opportunities for those performing it. This pilot project will be carried forward as an action in our new action plan (NAP2.1-2.2) with the goal of applying the principles of the project to other role types where occupational segregation is found to occur. We will also be looking to offer greater development opportunities within the department to allow staff to gain a wider range of skills, supporting them in their regrading application (NAP2.1-2.8).

Priority 4: Health and Wellbeing

The highlights of the core survey data include responses to questions on wellbeing (Table 10, Table 11, Table 12). The sharp downturn in positive responses in 2021 compared to 2020 has been evident and staff have themselves reported that COVID has had a negative impact on their wellbeing, particularly for women, proving the importance of health and wellbeing and the need to continue this work (Table 10, Table 36). Despite this downturn, NDS has outperformed the wider university, achieving the most positive response in the wellbeing and workload section of the survey in the division, and best in the university amongst departments with more than 24 members of staff. However, we are now also seeing gender disparities in this area, with 87% of women feeling their health and wellbeing is supported at work compared to 76% of men, while men are more comfortable discussing their mental health with their manager compared to women (Table 37). It is therefore important that the department continues this work for the benefit of its staff by focusing on engagement of the men in the department and eradicating the stigma around mental health so women gain confidence in discussing it. We will also carry forward our successes and acting as a beacon of best practice for the wider university.

Section 3: New action plan

In Section 3, applicants should evidence how they meet Criterion C:

- *An action plan is in place to address identified key issues*

Please provide an action plan covering the five-year award period.

a New Action Plan

*Names removed for publication

Action Point	Objective and Rational	Actions and Timescale	Individual(s) Responsible	Measure(s) of Success
1. Self-Assessment, Data Processing and Governance				
1.1 (12)	<p>Administer regular departmental survey alongside university-wide survey and monitor participation</p> <p><i>The departmental and university surveys are a crucial part of the department's self-assessment process. Running them annually and ensuring high participation is key in ensuring a thorough self-assessment</i></p>	<ul style="list-style-type: none"> i. Design and administer one departmental-wide survey every other year, alternating with university-wide survey and minimising any other surveys to avoid survey fatigue (bi-annually) ii. Monitor survey participation rates and collect gender-disaggregated participation data (annually) iii. Offer incentives to encourage participation in every survey (annually) iv. Analyse survey results and share summary with department, including 'you said, we did' section (annually) 	<p>ASC</p> <p>Departmental Administrator</p>	<p>Survey response rate to increase from 66% to 75% with gender balance in respondents by 2025 survey</p> <p>No more than two department-wide surveys conducted every year</p> <p>At least 5 student respondents in each demographic analysed (male PGT, male PGR, female PGT and female PGR)</p>

<p>1.2 (13)</p>	<p>Streamline data collection and conduct more granular analysis of staff data</p> <p><i>The University of Oxford is a long-established institution, so data collection processes are not always as efficient as we would like them to be. As we move forward with a continuous process of self-assessment and improvement, we will aim to streamline these processes to reduce administrative burden and we will review our datasets to ensure we are conducting a granular analysis of our data and devising sensitive interventions</i></p>	<ul style="list-style-type: none"> i. Adjust recruitment and interview data collection processes to enable easier visual reporting (Feb. 2022) ii. Adjust vacancy data to include columns on gender of panellists and year of vacancy, allowing for easy reporting (Feb. 2022) iii. Add role type to reward and recognition applicants spreadsheet (Feb. 2022) iv. Create new online version of leavers' survey to allow for anonymous responses (Mar. 2022) 	<p>ASC</p> <p>HR Manager</p>	<p>Analysis of reward and recognition success rates by gender and role type conducted</p> <p>New leavers' survey created and rolled out by Trinity term 2022.</p>
<p>1.3 (35)</p>	<p>Improve training data collection and monitoring</p> <p><i>Training data has historically been the most challenging data to collect and monitor as it is not always collected centrally and staff rarely inform the department when they have completed trainings, making it</i></p>	<ul style="list-style-type: none"> i. Implement new iPassport system with training module that can send annual training reminders and collect training certificates (Oct. 2022 – Oct. 2024) ii. Review training data annually and monitor effectiveness of new system 	<p>ASC</p> <p>HR Manager</p>	<p>>90% completion rates for unconscious bias training</p> <p>>90% completion rates for other EDI-related mandatory trainings (e.g. harassment training)</p>

	<i>challenging to ensure staff are completing the mandatory EDI-based trainings. We will therefore seek to implement a new system that can automatically track training data and notify staff when new trainings must be completed</i>			
1.4	<p>Run regular self-assessment of the department's staffing data</p> <p><i>The department's annual self-assessment is crucial in showing long-term staffing trends and success of our EDI strategy. We will therefore continue these annual self-assessments and use the information to review the current action plan and adjust our interventions when appropriate</i></p>	<ul style="list-style-type: none"> i. Run staff in post report and upload to the departmental staff in post master sheet (annually) ii. Run a self-assessment of the departmental data master sheet, which will be maintained on a weekly basis (annually) iii. Review the data for gender-based trends and use the analysis to inform and adjust the action plan where needed (annually) 	<p>ASC</p> <p>HR Manager</p>	<p>Self-assessment conducted and highlights reported to EDIC annually (every September/October)</p>
1.5 (39)	<p>Monitor attainment of students</p> <p><i>We have seen a gender-based attainment gap for PGT students in past years. We believe this will be rectified by recent changes to</i></p>	<ul style="list-style-type: none"> iv. Continue to monitor student attainment rates, implementing actions to further support for female students if deemed necessary (annually) 	<p>Graduate Studies Administrator</p>	<p>Equal proportions of male and female students achieving passes, merits and distinctions by 2025</p>

	<i>award classifications, but will monitor and implement actions if this proves not to be the case (Table 14, Table 15)</i>			
2. Career Development and Progression				
2.1 (32, 37, 40)	<p>Support members of staff on fixed-term contracts</p> <p>Many staff, particularly researchers, are on fixed-term contracts (Figure 10). Consultations with staff has demonstrated the impact of fixed-term contracts on wellbeing and satisfaction (. Although the department cannot prevent the use of fixed-term contracts by funding bodies, it can provide greater support to staff on those types of contracts. Currently, only 47% of female and 22% of male staff on fixed-term contracts are aware of the Training Fund, and this problem exists for both PTO and academic and research staff. We will therefore need to increase awareness of the Fund and</p>	<ul style="list-style-type: none"> i. Advertise the new provision in the NDS Training Fund for those on fixed-term/open-ended contracts in the bulletin and in head of department Q&A sessions (bi-annually) ii. Monitor use of the fund by staff nearing the end of their contracts (Annually) iii. Incorporate signposting of the training fund into current process for staff nearing end of fixed term contracts and encourage them to book PDR to discuss next steps (Jan. 2022 – Jun. 2022) iv. Complete new training pages on NDS staff gateway, including pages and resources to support those on fixed-term contracts (Jan. 2022 – Jun. 2022) v. Contact University careers service and assess what support is lacking and needs to be provided by department (Oct. 2022) 	<p>ASC</p> <p>Departmental Administrator</p>	<p>50% of applications to NDS Training Fund to be from staff nearing the end of fixed-term contracts</p> <p>Increase in number of staff on fixed-term contracts being aware of NDS Training Fund to increase from 38% (2021) to 60%, with gender parity.</p> <p>Increase in number of staff on fixed-term contracts having had a PDR to increase from 65% to 75%</p> <p>Increase in female fixed-term staff reporting feeling supported to think about their professional development to increase from 53% to 70%.</p>

	its use to those on fixed-term contracts.	<ul style="list-style-type: none"> vi. Investigate creation of a departmental careers service (if needed), to include senior members of staff who can advise staff on potential next steps in their career (Oct. 2022 – Oct. 2023) vii. Organise talks from University careers service (bi-annually) viii. Incorporate findings from the divisional project on fixed-term contracts into the department's strategy (Jan. 2024 – Sep. 2024) 		
2.2 (35, 41)	<p>Run a pilot programme to review occupational segregation within the department</p> <p><i>We have noticed that for years, all our PA and EA staff have been women (Figure 12). We therefore want to ensure that the roles provide ample opportunity for development and progression while also seeking to recruit more diverse talent into these positions.</i></p>	<ul style="list-style-type: none"> i. Review PA and EA job roles and responsibilities, creating a system where they can undertake additional responsibilities (project management, web design) on departmental projects that require additional support, furthering their professional development and experience (Jan. 2023 – Sep. 2023) ii. Review PA and EA job descriptions to ensure language is not discouraging applications from under-represented groups (Sep. 2023 – Jan. 2024) iii. Review recruitment process to PA and EA roles, including review of essential criteria and 	EDIC member ASC Departmental Administrator	<p>Increase in proportion of male staff in these roles to increase from 0% to 30%</p> <p>4 successful regrading applications from PAs/EAs between 2022 and 2027</p>

		<p>assessment methods (Sep. 2023 – Jan. 2024)</p> <p>iv. Rename the PA and EA roles to a title that is gender-neutral (Sep. 2023)</p> <p>v. Begin tracking regrading application and success rates in PA/EA (or equivalent) roles (Sep. 2023)</p> <p>vi. Monitor regrading applications and success rates from staff in this role (Sep. 2023 – Sep. 2026)</p>		
<p>2.3 (32, 40)</p>	<p>Support under-represented researchers in Recognition of Distinction exercises</p> <p><i>There is a lack of representation of women and BME staff in professorial roles in NDS and the wider university (Figure 26). This results in fewer female and BME academics on permanent contracts, leading to greater job insecurity. We are resolved to support these members of staff in becoming ready to apply for professorial roles in the Recognition of Distinction exercise, as well</i></p>	<p>i) Continue to run AP panels annually (ongoing)</p> <p>ii) Use new PDR system to identify for those on track for the RoD exercise and provide additional support (Mar. 2023 onwards)</p> <p>iii) Review staff data annually to assess how many staff who are eligible have submitted versus how many are not eligible but could be nurtured into a position where they could be eligible</p> <p>iv) Incorporate long-term career planning and RoD preparation into PDR for researchers (Mar. 2023 onwards)</p>	<p>Academic Lead</p> <p>EDIC member</p>	<p>Five successful applications from BME and/or female staff to RoD exercise between 2022-2027</p>

	<i>as guiding them through the application process.</i>			
2.4 (32, 37, 40)	<p>Expand awareness of training opportunities for staff</p> <p><i>Consultations with staff reveal a strong desire for further support in identifying training opportunities and providers, as well as funding. Only 30% of all staff (and 19% of male staff) are aware of the NDS Training Fund, with numbers consistently low amongst PTO and academic and research staff. Our surveys have revealed that people are unsure of what training options are available to them (Table 25, Figure 23).</i></p>	<ul style="list-style-type: none"> i. Continue to advertise NDS Training Fund in bulletin, head of department Q&A sessions and staff gateway (ongoing) ii. Monitor uptake of training fund and check for gender imbalances annually iii. Complete new pages on staff gateway that signpost training providers and courses, including apprenticeships and further education (Sep. 2022 – Jan 2022) iv. Complete regrading page on new career development pages (Sep. 2022 – Dec. 2022) 	EDIC member ASC	<p>Increase in proportion of staff who are aware of Training Fund from 30% to 60% with gender parity</p> <p>Increase in proportion of staff who feel clear about the development opportunities available to them to increase from 61% to 70% with gender parity</p>
2.5 (32)	<p>Develop an inter-departmental mentoring scheme</p> <p><i>NDS currently does not have a mentoring scheme. Attempts to create a scheme have faced challenges due to the small number of potential mentors available within the department. We know that of</i></p>	<ul style="list-style-type: none"> i. Launch the scheme with an information presentation, giving details of how to join (Feb. 2022) ii. Targeted emails and calls to senior staff to recruit them as mentors (Feb. 2022) iii. Create mentor/mentee pairs and inform participants of their matches, facilitating their first meetings (Mar. 2022) 	HR Advisor EDIC member	<p>Increase in proportion of female academic staff who have been mentored from 8% to 50%</p> <p>Increase in all PTO staff who have been mentored from 17% to 50% with gender parity</p>

	<p><i>those who have been mentored, 88% found it useful. We also know that mentoring rates are low in our department for all staff, with a particularly significant gender disparity between male and female academic and research staff (Table 30, Table 31). We therefore see there is a need to create a scheme for PTO and academic and research staff, as well as 3rd year PGR students. We will partner with another department in order to do so.</i></p>	<ul style="list-style-type: none"> iv. Run pilot of the scheme, administering feedback surveys to participants at launch, 3 months, 9 months and end (Mar. 2022-Apr. 2023) v. Review the pilot scheme and implement necessary changes (Apr. 2023 – Jun. 2023) vi. Launch the official scheme to the wider department with another information session (Oct. 2023) vii. Add mentoring information to induction packs and new mentoring webpage an encourage new starters to enrol immediately (Oct. 2023) 		<p>Increase in proportion of staff who have been offered a mentor from 13% to 80% with gender parity</p>
<p>2.6 (32, 33, 40)</p>	<p>Enhance support for early career researchers</p> <p><i>Over the last five years, we have seen disparities in applications for fellowships from our early career researchers (18.75% of applicants being female compared to an average of 58.6% of early career researchers being female). We want to increase the proportion of our female</i></p>	<ul style="list-style-type: none"> i. Advertise opportunities for early career researchers within the department through targeted calls and through MEB meetings (ongoing) ii. Create a panel where researchers can have their fellowship proposals reviewed before they are submitted (Oct. 2022) iii. Identify early career researchers that may be eligible to apply for grants as PIs annually (annually) 	<p>EDIC member</p> <p>EDIC member</p> <p>EDIC member</p> <p>EDIC member</p>	<p>Increased number of early career fellowships from 23.9% of ECRs applying per year to 30%.</p> <p>Increase proportion of fellowship applications being submitted by women from 18.75% to 33%.</p>

	<i>researchers applying for fellowships</i>	<ul style="list-style-type: none"> iv. Engage the MEB in efforts to encourage line managers to support their staff into PI positions and build into PDR (Oct. 2022 – Oct. 2023) v. Run ECR workshops/seminar series and incorporate support for applying as a PI vi. Run NDS researcher career event to support researchers at every level with eventual progression to AP level (Oct. 2024) 		
2.7 (32, 33, 40)	<p>Increase support for mid-senior career researchers</p> <p><i>Our female academic and research staff are less likely to apply for larger grants and spend less time writing grants compared to their male peers (Table 39, Figure 30). The department recognises the need to increase administrative support for academic staff to free up time in our female academics' schedules to allow them to increase their publications and grant applications</i></p>	<ul style="list-style-type: none"> i. Increase career support for APs through new PDR process (Oct. 2023) ii. Run a series of interviews with researchers to identify what additional infrastructure is needed to allow them to delegate work that is non-promotive (Oct. 2023) iii. Use the restructuring of the PA and EA team to provide more flexible support to more academics (including female academics) to allow them to apply for larger grants (Feb. 2024 onwards) 	<p>Academic Lead</p> <p>EDIC member</p>	<p>Increase in number of research coordinators in department from one to two</p> <p>Female and male academics to receive equal support from administrative teams, particularly PAs and EAs.</p> <p>Increase in female applications for grants over £500k</p>

		<ul style="list-style-type: none"> iv. Secure a source of funding for an additional research coordinator (Jan. 2026) v. Recruit additional research coordinator (Jan. 2026 – Mar. 2026) 		
2.8 (41)	<p>Offer development opportunities within the department</p> <p><i>Many staff in the department still do not feel that they have the opportunity to develop and grow here (Table 25). We will therefore seek to facilitate conversations between staff about their roles and the skills they wish to develop, allowing them opportunities to shadow/speak to those who have those skills or who occupy roles that are of interest to them</i></p>	<ul style="list-style-type: none"> i. Facilitate discussions between staff so they can learn about new roles and areas of the department by creating a dedicated point of contact and advertising on staff gateway and in PDR (Sep. 2022 onwards) ii. Implement a shadowing system where staff can shadow colleagues in other roles for one day a week (over single or multiple weeks) to gain insight into and experience of other areas of the department (Sep. 2023) iii. Advertise shadowing system on staff gateway and in PDR appendix (Sep. 2023) 	<p>Graduate Studies Administrator</p> <p>EDIC member</p>	<p>Increase in proportion of staff who feel they have the opportunity to develop and grow here from 67% to 90% with gender parity</p> <p>Increase in staff who say they take time to reflect on, and plan for, their career development from 61% to 75% and maintain gender parity</p>
2.9	<p>Review and overhaul the PDR process in the department</p> <p><i>We have seen a gender disparity in PDR uptake and usefulness, with 46% of</i></p>	<ul style="list-style-type: none"> i. Create two new sets of PDR forms, one for academic and research staff and one for PTO staff (Sep. 2022-Mar. 2023) ii. Design new training questions for both PDR sets, including information on specific training 	<p>EDIC member</p> <p>ASC</p>	<p>Increase in proportion of female academic and research staff having had a PDR within the last 2 years from 46% to 75%</p>

	<p><i>female academics and researchers having had a PDR compared to their male colleagues (Table 32). Female academics are also only 50% likely to have found their PDR useful, compared to 73% for men (Table 33). We must therefore investigate ways to incorporate the aspects that our female staff have highlighted are important to them into PDR, while also splitting the PDR into separate processes for academics and researchers versus PTO staff.</i></p>	<p>and funding options for each role group, with links to the new staff gateway pages on career development and training options (Sep. 2022 – Dec. 2022)</p> <p>iii. Review the way in which PDR uptake is monitored and staff are encouraged to book PDR (Sep. 2022 – Dec. 2022)</p> <p>iv. Create appendices of resources, trainings and information to support line managers in supporting their staff to develop themselves (Jan. 2023 – Mar. 2023)</p> <p>v. Devise a system where HR can check with staff at regular intervals to ensure they are receiving the needed support to achieve their objectives (Jan. 2023 – Mar. 2023)</p> <p>vi. Incorporate long-term career planning and preparation for RoD applications into academic and researcher PDRs (Jan. 2023 – Mar. 2023)</p>		<p>Increase in proportion of staff who find PDR useful from 50% to 80%</p> <p>Increase in proportion of PTO staff who have had a PDR from 63% to 80% with gender parity</p> <p>Increase in proportion of staff who feel they are clear about the development opportunities available to them from 61% to 75%</p> <p>Increase in proportion of staff who feel they have the opportunity to develop and grow here from 67% to 90% with gender parity</p> <p>Increase in staff who say they take time to reflect on, and plan for, their career development from 61% to 75% and maintain gender parity</p>
3. Representation				
3.1	Increase representation of under-represented groups in academic roles through	<p>i. Continue to use gender bias decoding software across all advertised vacancies, expanding</p>	<p>ASC</p> <p>HR Manager</p>	<p>Increase in women applying to professor roles from 25% of all applicants to 50%</p>

(32, 35, 41)	<p>fair and equitable recruitment processes</p> <p><i>Recruiting to senior positions in the department does not happen often and there is a gender disparity in appointments to academic roles, so it is all the more important to ensure that when it does happen, appointments are done fairly (Figure 14). Currently, the department uses professional networks of other senior members of staff to find top talent and advertise posts. This is problematic due to the senior team being predominantly male. We will therefore review how we advertise and recruit to senior posts to encourage more female applicants.</i></p>	<p>to all recruitment materials (not just JDs) (Sep. 2022 onwards)</p> <ul style="list-style-type: none"> ii. Begin advertising vacancies across more social media platforms, targeting networks for under-represented groups (Sep. 2022 onwards) iii. Bi-annually: ASC to observe the recruitment process, from shortlisting to interview, to ensure there is no bias present in decision making processes iv. Add EDI selection criteria into senior job descriptions (Jan. 2023) v. Develop a diversity statement to be included in recruitment materials (Jan. 2023) vi. Incorporate learnings of the university inclusive recruitment project when released (Jan 2024) 	EDIC member	Gender balance of senior appointments to represent the gender balance of applicants to senior roles by 2025
3.2 (35, 41)	<p>Increase representation of under-represented groups in researcher and professional and support roles through fair and equitable recruitment processes</p>	<ul style="list-style-type: none"> i. Expand use of gender bias decoding software across all recruitment materials (Sep. 2022 onwards) ii. Advertise vacancies across more social media platforms, targeting networks for under- 	<p>ASC</p> <p>HR Manager</p> <p>EDIC member</p>	<p>15% of applications to professional and support roles to come from Black/Asian applicants by 2026</p> <p>Greater gender balance in PTO roles: increase in</p>

	<i>We know that Black and Asian staff are under-represented in the University and our department in professional and support roles compared to the population of Oxford, comprising 8.6% of professional and support staff compared to 20% of Oxford's population³. We can also see gender disparities in PTO roles (Figure 11) and in appointments to grade 6 and 7 roles for both research and PTO roles (Figure 15, Figure 17). One step in addressing this is in ensuring our recruitment practices are fair and equitable to all applicants regardless of ethnicity.</i>	<p>represented groups (Sep. 2022 onwards)</p> <p>iii. Bi-annually: An observer will be invited to observe the recruitment process, from shortlisting to interview, to ensure there is no bias present in decision making processes (ongoing)</p> <p>iv. Investigate gender disparities in appointments to grade 6 and 7 roles for both researchers and PTO staff (Jun. 2022 – Sep. 2022)</p> <p>v. Review current assessment methods used in recruiting to ensure they do not disadvantage specific groups (Sep. 2022 – Jan. 2023)</p> <p>vi. Review essential criteria for PTO roles (Sep. 2022 – Jan. 2023)</p>		number of male PTO staff from 29% to 50% by 2026
3.3 (35, 41)	Increase the department's outreach activity to target students from under-represented groups in local schools and, eventually, adults in the local community, helping them	<p>i. Find ways to incentivise PIs to invite FHS students into their groups by creating NDAs to protect researcher IP (Jan. 2022 – Mar. 2022)</p> <p>ii. Create protected spaces on the NDS work experience programme that are set aside</p>	<p>EDIC member</p> <p>EDIC member</p> <p>EDIC member</p> <p>EDIC member</p>	<p>Increase in proportion of applicants to NDS work experience programme coming from local state schools from 69% to 80%</p> <p>No more than 20% of students successfully</p>

	<p>access opportunities within the University.</p> <p><i>The department is seeking to increase its diversity in research roles as well as professional and support roles. Part of our work to achieve this should focus on supporting those at the start of their careers, whether they are students looking to enter a research career or adults looking to start their career with the University. We have historically had a disproportionate number of independent school students securing places in our work experience programme, which we will continue to address, while also encouraging applications from other under-represented groups (Table 29). Supporting these groups and gaining their feedback will be crucial in recruiting and then retaining this talent.</i></p>	<p>for state school applicants (Feb. 2022)</p> <p>iii. Adjust NDS work experience application forms to collect ethnicity and home postcode data (Feb. 2022)</p> <p>iv. Review and adjust work experience selection criteria to take certain factors into account, e.g. being a young carer and school performance (Feb. 2022)</p> <p>v. Work with contact in Oxfordshire LEP to design workshop with teachers that supports students in writing applications (Mar. 2022 – Oct. 2023)</p> <p>vi. Pilot the workshop in select local schools before reviewing (Oct. 2023 – Nov. 2023)</p> <p>vii. Review workshop feedback and implement into final workshop (Jan. 2024 – Sep. 2024)</p> <p>viii. Roll the workshop out to local schools with diverse student bodies and lower progression rates to Oxbridge universities (Oct. 2024)</p>	<p>Outreach Committee</p>	<p>gaining a place on the NDS work experience programme to come from independent schools in any year.</p> <p>>90% of students who undertake the finalised workshop stating that they found it helpful (with gender parity)</p> <p>>50% of applicants to work experience programme to come from BME backgrounds, in line with Oxfordshire school population demographics⁴</p>
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⁴ <https://insight.oxfordshire.gov.uk/cms/oxfordshire-schools-pupil-ethnicity-and-first-language-2020>

		ix. If successful, adapt workshop to support local adults in applying for university roles (Jan. 2025 – Sep. 2025)		
3.4 (35, 40)	<p>Support staff with disabilities to thrive in their roles</p> <p><i>In our most recent survey, we could see that disabled staff gave less favourable answers on questions regarding career development compared to staff without disabilities (Table 26). There is a need to investigate the barriers that exist for disabled staff and start to implement the interventions we have already devised.</i></p>	<ul style="list-style-type: none"> i. Organise an accessibility forum for staff to express their needs (October 2022) ii. Include discussions around disclosing new information in probationary reviews to allow staff to disclose any conditions once the department has earned their trust (Oct. 2022) iii. Incorporate advice for career development for disabled staff into new career development webpages (Oct. 2022-Jan 2023) iv. Allow new starters with disabilities to review their job descriptions before starting within the department to ensure adjustments are made and that they can carry out their responsibilities comfortably (Jan. 2023) v. Organise a meeting with disabled staff 1-2 months after starting to review their adjustments and ensure they are being supported (Jan. 2023) 	<p>EDIC member</p> <p>EDIC member</p>	<p>Increase in proportion of disabled staff who feel they have the opportunity to develop and grow here from 54% to 70%</p> <p>Increase in proportion of staff who feel they take time to reflect on their career development from 31% to 65%</p>

<p>3.5 (33, 41)</p>	<p>Encourage female clinicians into the department and into senior positions</p> <p><i>We are aware of a gender imbalance, particularly amongst clinical research staff (Figure 8). Encouraging female clinicians to establish a research portfolio is challenging as doing so often relies on using current staff members' professional networks to target individuals. However, this can lead to recruitment that exacerbates current gender and race inequalities. It is therefore important to find ways to engage a broader range of staff in the NHS who may wish to establish a research career but do not have the networks needed to know how to do so.</i></p>	<ul style="list-style-type: none"> i. Include an analysis of clinical researchers and academics that includes those with honorary contracts and assess gender balance of all clinical staff with research in NDS (Jul. 2022 onwards) ii. Use medical school specialty data to critically assess all future senior recruitment specialties to ensure they have a broader representation of women (Sep. 2022 onwards) iii. Research Committee to set out a strategy of engaging clinicians and encouraging them to establish a research portfolio by facilitating networking opportunities with researchers within the department (Sep. 2022 – Sep. 2023) iv. Investigate ways to encourage more ACFs into the department (Sep. 2022 – Sep 2023) v. Have the Marketing and Communications Committee work to establish a relationship with key figures in OUH, including staff development 	<p>EDIC member</p> <p>EDIC member</p> <p>Research Committee</p> <p>Marketing and Communications Committee</p>	<p>New programme of networking events aimed at female clinicians developed by Dec. 2023</p> <p>8 female OUH clinicians developing a research portfolio within NDS from 2022-2027</p> <p>All ACFs joining after Sep. 2022 to be offered a mentor, with 70% uptake in women</p>
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		teams and communications teams (Apr. 2022 – Dec. 2026) vi. Immediately enrol new ACFs into mentoring scheme when they start (Apr. 2023 onwards)		
4. Health and Wellbeing				
4.1 (37)	<p>Expand awareness of NDS/Oncology Wellbeing Support Service</p> <p><i>After running the Wellbeing Support Service for a year, we are aware that some staff may still be unaware of the service, as our MHFA-trained staff are reporting low uptake. We therefore aim to increase awareness of the service and will continue assessing the service to identify potential access barriers.</i></p>	<ul style="list-style-type: none"> i. Include the service in each Wellbeing Wednesday bulletin (ongoing) ii. Create a marketing campaign with a series of print and digital posters (Mar. 2022 – Oct. 2022) iii. Review ways in which staff can reach out to Mental Health First Aiders, including barriers to accessing support (Mar. 2022 – Oct. 2022) iv. Review ways of measuring uptake to ensure greater reporting from MHFA-trained staff (Mar. 2022 – Oct. 2022) v. Run MHFA training annually to maintain at least 12 MHFA-trained staff within NDS and Oncology (Oct.) vi. Add question to staff survey asking staff if they are aware of the NDS Wellbeing Support Service (Apr. 2022) 	EDIC member Mental Health Pilot Project Working Group	<p>>80% positive response rate to new survey question: are you aware of the NDS Wellbeing Support Service? At least 12 MHFA-trained staff acting as Wellbeing Guides within the department at all times</p> <p>>80% staff awareness of MHFA service by 2024</p>

<p>4.2 (32)</p>	<p>Ensure health and wellbeing are embedded in departmental culture</p> <p><i>We have made excellent progress with our health and wellbeing programme, which we now want to develop further and embed into our culture. We would also like to share our success with other departments in the University. However, we are still aware of a stigma that persists around mental health and gender disparities in feelings around mental health (Table 37)</i></p>	<ul style="list-style-type: none"> i. Continue writing and distributing the Wellbeing Wednesday bulletin (ongoing) ii. Monitor open rates of wellbeing Wednesday bulletin (ongoing) iii. Create mental health resources specific to female academics (Jan. 2022 – Oct. 2022) iv. Finalise and implement new health and wellbeing policy (Jan. 2022 – Jan. 2023) v. Monitor usefulness of the Wellbeing Wednesday bulletin by adding a survey question to the 2022 survey (Apr. 2022 onwards) vi. Devise a programme of wellbeing activities to support staff at work and working remotely (Jan. 2022 – Jan. 2024) vii. Increase training for line managers on mental health and wellbeing (Oct. 2022 – Oct. 2023) 	<p>EDIC member</p> <p>EDIC member</p> <p>Mental Health Pilot Project Working Group</p>	<p>Open rates of wellbeing bulletin to match open rate of departmental newsletter (>60%)</p> <p>>85% of staff to find wellbeing bulletin useful</p> <p>Increase in positive response rate to the question, ‘the department adequately supports my mental wellbeing’ from 83% to over 90%, including for clinical staff (male and female) and male PTO staff by 2027</p> <p>Increase in proportion of female academic staff who feel comfortable discussing their mental wellbeing with their line manager from 62% to 85%, in line with figures for male academics</p>
<p>4.3 (33)</p>	<p>Support staff returning to work following a prolonged period of leave</p>	<ul style="list-style-type: none"> i. Create and implement a ‘re-induction’ for staff returning to work Jan. 2022 – Mar. 2022) ii. Monitor effectiveness of re-induction through interviews 	<p>ASC</p> <p>HR Advisor</p>	<p>Designated spaces for mothers to breastfeed/express in each NDS site by 2027</p>

	<p><i>Most staff undertaking prolonged periods of leave are female. Following interviews with staff who have returned to work after a prolonged period of leave, we saw that a re-introduction to the department when returning to work could be beneficial. We were also made aware of further steps the department could take to support returning mothers. We are also conscious that the pandemic may have left returning staff feeling particularly isolated and removed from the workplace, so we will seek to address this.</i></p>	<p>following people's return to work and review suggestions for improvement (Mar. 2022 onwards)</p> <p>iii. Establish secure spaces for working mothers to breastfeed or express milk when they are at work in the departmental refurbishment plan (Mar. 2022 – Mar. 2025)</p> <p>iv. Encourage returning staff to use the NDS Training Fund/Returning Carers' Fund to overcome barriers to returning to work (Mar. 2022 onwards)</p>		
5. Culture				
5.1 (39)	<p>Investigate trends in incidents of bullying and harassment and work to eradicate bullying and harassment in the department</p> <p><i>We have found an increase in incidents of bullying and harassment experienced by</i></p>	<p>i. Investigate anonymous chat services for those who have experienced bullying and harassment (Jan. 2022 – Jan. 2023)</p> <p>ii. Investigate ways of hosting a dialogue with staff who have experienced bullying and harassment (Jan. 2022 – Apr. 2022)</p>	<p>Bullying and Harassment Advisors</p> <p>Academic Lead</p> <p>Departmental Administrator</p>	<p>Increase in satisfaction with the way bullying and harassment reports are handled from 17% to 60%</p> <p>>80% positive responses to new survey question: I am satisfied with the way bullying and harassment are handled in the department</p>

	<p><i>academic and research staff and male professional and support staff (Table 23). It is therefore clear that the department needs to monitor this trend and investigate barriers to reporting and the prevalence of bullying and harassment that is specific to male staff and academic and research staff.</i></p>	<ul style="list-style-type: none"> iii. Create a clearer pathway for bullying and harassment processes (Jan 2022 – Oct. 2022) iv. Consider disciplinary options for those who commit acts of bullying/harassment (Apr. 2022 – Oct. 2022) v. Add a new question to the survey asking all staff if they are satisfied with how bullying and harassment are handled in NDS (Apr. 2022) vi. Improve awareness of how to contact harassment advisors in students through student inductions and in student pages on staff gateway (Apr. 2022 – Oct. 2022) vii. Look into training a specific harassment advisor for students (Apr. 2022 – Oct. 2022) viii. Have at least one member of staff who can deliver bullying and harassment training in the department by Feb. 2023 		<p>Decrease in incidents of bullying and harassment from 9% to under 5%, with incidents among male PTO staff falling back in line with rates among female staff by 2027.</p>
<p>5.2 (39)</p>	<p>Create new training package for line managers</p> <p><i>The pandemic has changed a lot about the way staff work,</i></p>	<ul style="list-style-type: none"> i. Speak to colleagues in division about training packages they've used and recommend (Sept. 2022) 	<p>ASC</p> <p>Staffing Committee</p>	<p>>85% of staff feeling valued and recognised for the work they do</p>

	<p><i>requiring a new outlook for line managers. We aim to support line managers by offering training that helps them with the traditional core competencies of a manager, while also equipping them to support staff with disabilities, mental health conditions etc., and in understanding the barriers that face staff from specific groups. We have also seen that excessive criticism is the most common form of bullying/harassment experienced (Figure 22). By educating line managers on giving constructive feedback will reduce instances of bullying/harassment related to this behaviour and an overall reduction in bullying and harassment</i></p>	<ul style="list-style-type: none"> ii. Obtain quotes from training providers for bespoke training packages that include EDI-focused training modules (Mar. 2022 – Oct. 2022) iii. Report to the Management Executive Board to gain input on training packages (Oct. 2022) iv. Have select members of staff trial training options (Sep. 2022 – Jan. 2023) v. Roll out training package to line managers, gaining input and feedback, before reviewing (Jan. 2023 – Jun. 2023) vi. Devise a list of supplementary trainings and resources around EDI topics (Jun. 2023 – Jan. 2024) vii. Finalise training package and roll out to new line managers twice a year (Jan. 2024) 		<p>>75% of staff receiving regular and constructive feedback on their work</p> <p>>85% of line managers feeling confident managing performance and giving feedback</p> <p>>85% of staff feeling that their line manager supports their wellbeing</p> <p>Reduction in reported incidents of excessive criticism from 8 to 2 per year and an overall reduction in instances of bullying and harassment from 9 to 3 by 2027</p>
<p>5.3 (35)</p>	<p>Ensure the department is supporting its LGBT+ staff</p> <p><i>Numbers of staff who identify as LGBT+ are low, so it's important to work to consult with them, identify their needs</i></p>	<ul style="list-style-type: none"> i. Ensure trans issues are taken into consideration when carrying out the departmental refurbishment plans Jan. 2022 – Jan. 2025) ii. Create a standard email signature for the department 	<p>EDIC member</p> <p>ASC</p> <p>Infrastructure and Space Committee</p>	<p>One member of the department undertaking allies training per year</p> <p>Barriers to LGBT+ staff identified and solutions incorporated into action plan</p>

	<p><i>and ensure they are catered for in the department.</i></p>	<p>that includes pronouns (Jun. 2022 – Sep. 2022)</p> <ul style="list-style-type: none"> iii. Include information about including your pronouns in emails signatures in induction packs (Sep. 2022 onwards) iv. Encourage staff to attend the allies workshop by advertising in the bulletin and on the staff gateway (ongoing) v. Signpost to University LGBT+ harassment advisors on the staff gateway (ongoing) vi. Investigate creating an LGBT+ MHFA post (Apr. 2022 – Oct. 2022) vii. Organise an event or system whereby LGBT+ members of staff can safely give feedback and comments about what barriers they feel they face in their careers and what action the department can take to address these (Oct. 2022 – Oct. 2023) viii. Ensure LGBT+ issues are considered in Wellbeing Wednesday bulletins and in the mental health pilot project (ongoing) 		
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Appendix 1: Culture survey data

Please present the results of the core culture survey questions, and if desired, the results of any additional survey questions or consultation.

Some data labels and percentages have been removed prior to publication, in accordance with HESA's rounding and suppression methodology

1.1. Core Survey Data

My line manager values my contributions/I feel valued and recognised for the work I do*	Gender	Positive response rate				
		2016	2018	2020	2021	2021 UBM
Academic and Research	F	89%	100%	93%	69%	
	M	90%	100%	100%	79%	
	All	89%	100%	97%	76%	
Professional and Support	F	92%	100%	98%	89%	
	M	100%	100%	100%	71%	
	All	94%	100%	98%	86%	
All Staff	F	91%	100%	97%	86%	
	M	94%	100%	100%	76%	
	All	92%	100%	98%	82%	73%

Table 3 Approximation to core question: my contributions are valued in my department. *The wording of this question was adjusted in 2021. Benchmarked against wider university (39).

My department actively champions female staff	Gender	Positive response rate			
		2016	2018	2020	2021
Academic and Research	F			78%	
	M			100%	
	All			93%	
Professional and Support	F			85%	
	M			91%	
	All			86%	
All Staff	F			83%	
	M			97%	
	All			89%	

Table 4 Approximation to core question: department leadership actively supports gender equality. This question was asked in our departmental survey, so no benchmark is available (34).

My department is committed to promoting equality and diversity	Gender	Positive response rate	
		2021	2021 BM

Academic and Research	F	85%	
	M	91%	
	All	89%	
Professional and Support	F	84%	
	M	86%	
	All	85%	
All Staff	F	84%	
	M	89%	
	All	86%	78%

Table 5 Approximation to core question: department leadership actively supports gender equality. This question was added at a divisional level, so the divisional response rate is the only available benchmark (5, 9).

My department is supportive of flexible/home working	Gender	Positive response rate		
		2020	2021	BM 2021
Academic and Research	F	100%	77%	
	M	100%	100%	
	All	100%	92%	
Professional and Support	F	88%	93%	
	M	79%	93%	
	All	85%	93%	
All Staff	F	90%	90%	
	M	90%	97%	
	All	90%	93%	79%

Table 6 Approximation to core question: the department enables flexible working. This question was added at a divisional level, so the divisional response rate is the only available benchmark.

[TABLE REDACTED DUE TO IDENTIFIABLE NUMBERS]

Table 7 Approximation to core question: I am satisfied with how bullying and harassment are addressed in my department. Numbers too low to disaggregate by gender. This question was added to the department-specific question set in 2021 so no benchmark is available (39).

My line manager supports me to think about my development	Gender	Positive response rate				
		2016	2018	2020	2021	BM 2021
Academic and Research	F	76%	92%	77%	25%	
	M	89%	100%	95%	75%	
	All	73%	97%	88%	58%	

Professional and Support	F	74%	76%	90%	64%	
	M	92%	79%	91%	64%	
	All	78%	77%	90%	63%	
All Staff	F	75%	80%	87%	57%	
	M	90%	91%	94%	71%	
	All	80%	85%	89%	61%	54%

Table 8 Approximation to core question: my line manager supports my career development. Benchmarked against wider university (2.9).

My line manager encourages me to take up development opportunities	Gender	Positive response rate				
		2016	2018	2020	2021	BM 2021
Academic and Research	F	72%	83%	75%	38%	
	M	78%	95%	95%	67%	
	All	75%	91%	88%	57%	
Professional and Support	F	64%	71%	76%	51%	
	M	82%	57%	83%	50%	
	All	67%	67%	77%	51%	
All Staff	F	66%	74%	75%	49%	
	M	79%	79%	91%	61%	
	All	70%	76%	81%	53%	42%

Table 9 Approximation to core question: my line manager supports my career development. Benchmarked against wider university.

I feel my department supports my mental wellbeing/my health and wellbeing are adequately supported at work	Gender	Positive response rate			
		2016	2018	2020	2021
Academic and Research	F	-	-	100%	71%
	M	-	-	95%	79%
	All	-	-	97%	70%
Professional and Support	F	-	-	95%	91%
	M	-	-	100%	86%
	All	-	-	97%	90%
All Staff	F	-	-	97%	87%
	M	-	-	97%	76%
	All	-	-	97%	83%

Table 10 Approximation to core question: my mental health and wellbeing are supported in my department. This question was added to the departmental survey in 2020 and the department-specific question set in 2021, so no benchmark is available (43).

How would you rate the department's response to the pandemic (2020)	Gender	Average rating (1 being poor, 5 being excellent)
Academic and Research	F	4.1

	M	4.1
	All	4.1
Professional and Support	F	4.3
	M	4.3
	All	4.3
All Staff	F	4.3
	M	4.2
	All	4.2

Table 11 Approximation to core question: my department has taken action to mitigate the adverse gendered impact of the Covid-19 pandemic on staff. This question was specific to the departmental survey in 2020, so no benchmark is available (37, 43).

My department has given me adequate support through the COVID-19 pandemic	Gender	Positive response rate			
		2016	2018	2020	2021
Academic and Research	F	-	-	-	92%
	M	-	-	-	96%
	All	-	-	-	95%
Professional and Support	F	-	-	-	91%
	M	-	-	-	86%
	All	-	-	-	90%
All Staff	F	-	-	-	91%
	M	-	-	-	92%
	All	-	-	-	92%

Table 12 Approximation to core question: my department has taken action to mitigate the adverse gendered impact of the Covid-19 pandemic on staff. This question was added to the department-specific question set in 2021, so no benchmark is available (37, 43).

I have been feeling optimistic about the future	Gender	Positive response rate	
		October 2020	
Academic and Research	F	100%	
	M	100%	
	All	100%	
Professional and Support	F	93%	
	M	100%	
	All	94%	
All Staff	F	95%	
	M	100%	
	All	96%	

Table 13 Positive response rates to the question, 'to what extent do you agree that you've been feeling optimistic about the future?' 27 responses (F: 74%, M: 26%). This question was asked in the departmental survey in 2020, so no benchmark is available.

Appendix 2: Data tables

Please present the mandatory data tables, and if desired, any additional datasets.

[SOME DATA LABELS AND PERCENTAGES REMOVED ACCORDING TO HESA'S ROUNDING AND SUPPRESSION METHODOLOGY]

2.1. Mandatory Data

a Students at PGR level

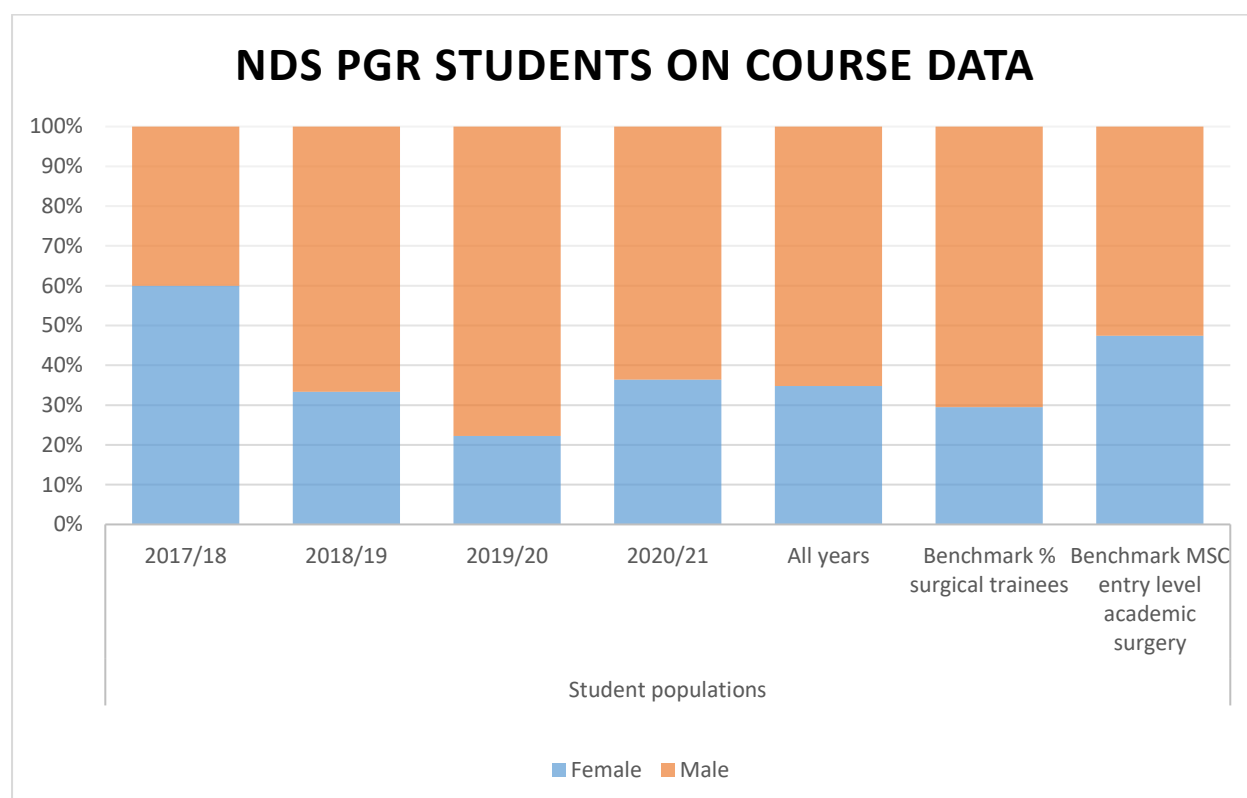


Figure 4 Students at PGR level. Benchmarks from Medical Schools Council.

b Students at PGT level

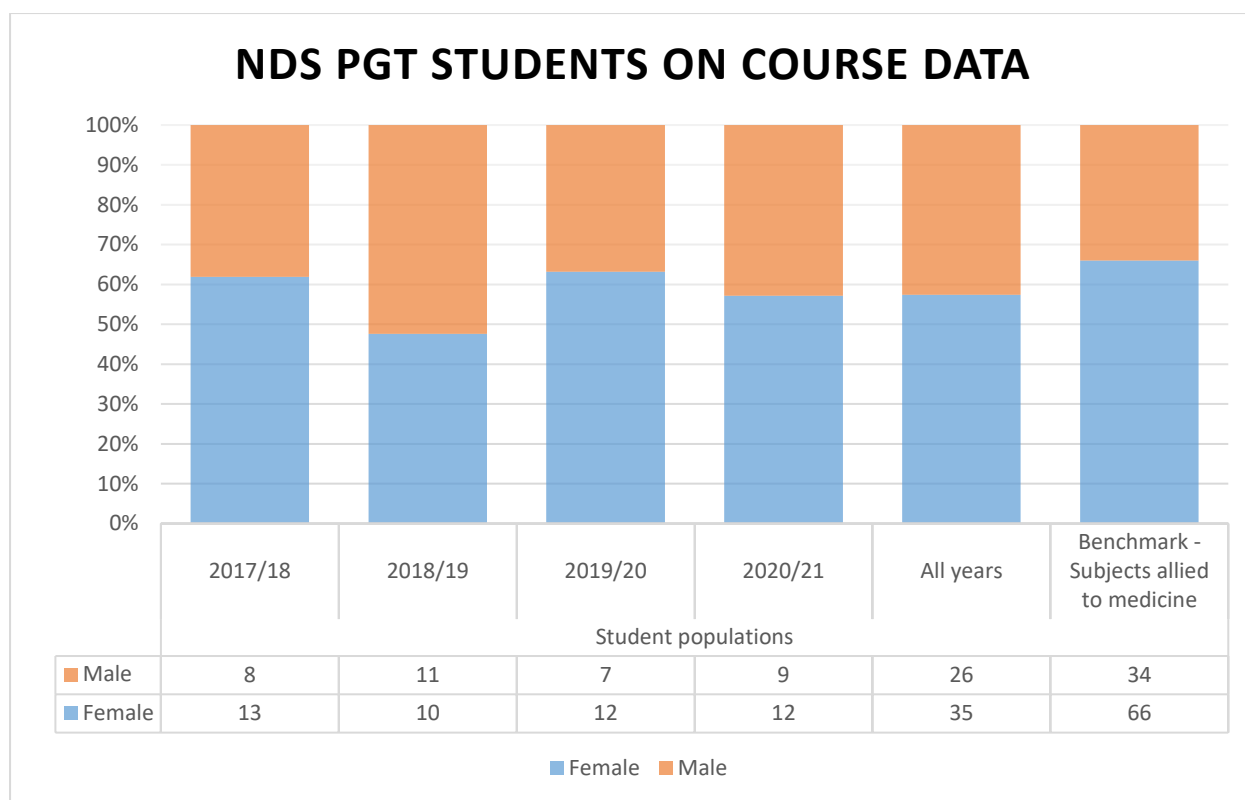


Figure 5 Students at PGT level. Closest available benchmark data is Russell Group PGT Subjects Allied to Medicine.

c Degree attainment for students

[PERCENTAGES REMOVED ACCORDING TO HESA METHODOLOGY]

	Year	Male	Female	% of all Female Students for Year	% of all Male Students for year
2017/18	Pass	6	13		
	Merit	-	-		
	Distinction	2	0		
2018/19	Pass	10	8		
	Merit	1	2		
	Distinction	0	0		
2019/20	Pass	3	6		
	Merit	2	5		
	Distinction	2	1		
2020/21	Pass	2	1		
	Merit	3	8		
	Distinction	4	3		
2017-2021	Pass	21	28	60%	60%
	Merit	6	15		

	Distinction	8	4		
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Table 14 Degree attainment rates for PGT students. *Merits introduced 2018/19. Percentages calculated as percentage of whole gendered cohort for that year (39).

Intake Year	Gender	Pass (%)	Fail (%)
2013	M	4 (100%)	0 (0%)
	F	7 (100%)	0 (0%)
2014	M	5 (100%)	0 (0%)
	F	4 (100%)	0 (0%)
2015	M	10 (100%)	0 (0%)
	F	15 (100%)	0 (0%)
2016	M	13 (100%)	0 (0%)
	F	3 (100%)	0 (0%)

Table 15 Attainment rates for PGR students (39).

d Academic staff by grade

* Advance HE contract functions (teaching, research and teaching and research) broadly map to our Academic/Research roles. Staff are split by contract function throughout the below data. Teaching and research = academic, research only = researcher.

**Due to changes made to data collection in 2019, only data from 2019 onwards is available and presented here.

[DATA LABELS REMOVED ACCORDING TO HESA METHODOLOGY]

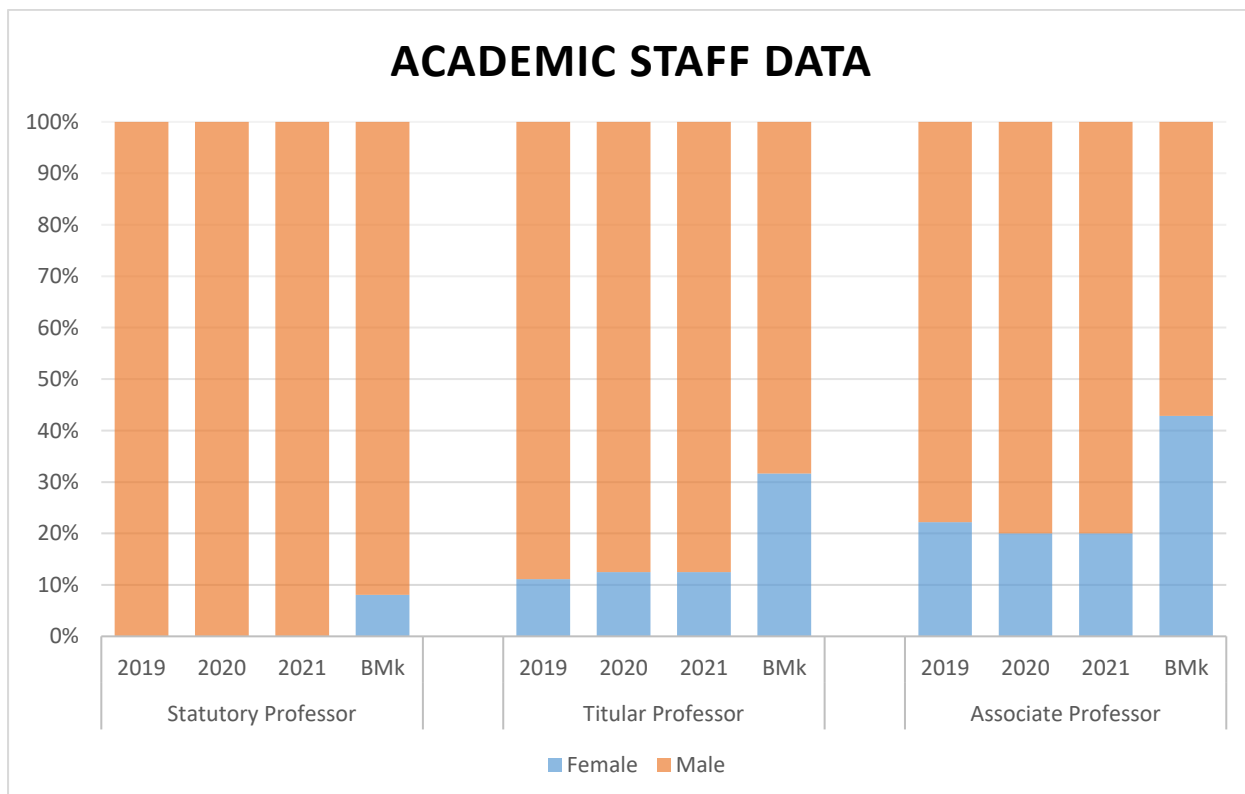


Figure 6 All academic staff by grade. Appropriate benchmarks included in clinical-specific data (41).

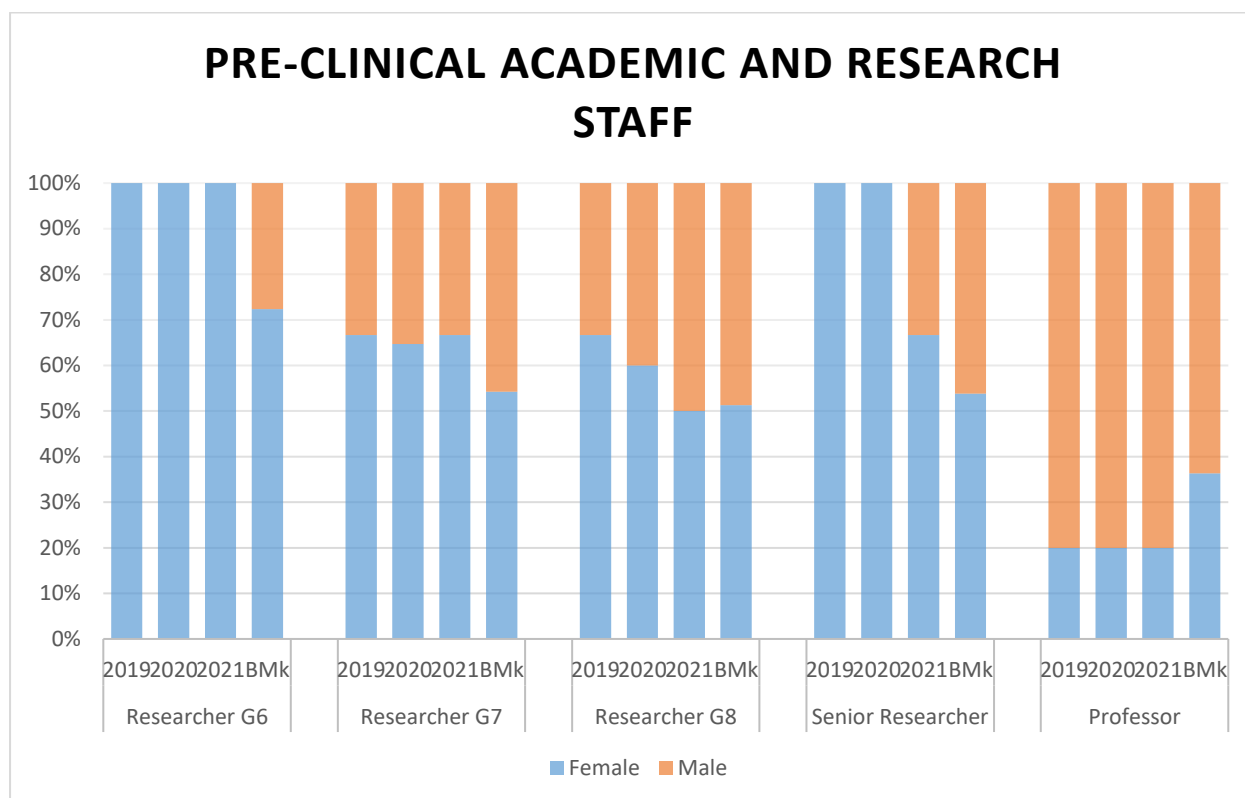


Figure 7 Pre-clinical academic and researcher staff by grade. Benchmarked against divisional data (41).

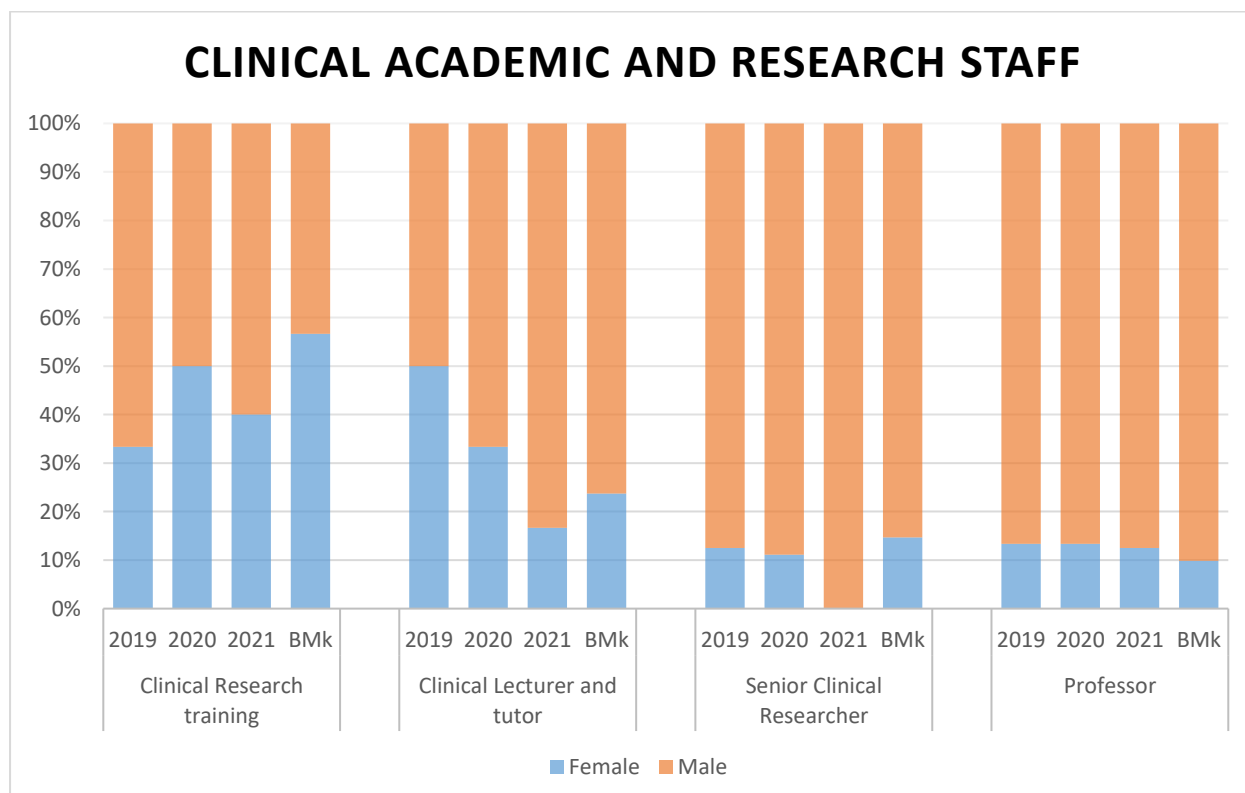


Figure 8 Clinical academic and research staff by grade. Benchmarked against Medical Schools Council data⁵ (41).

e Academic staff by grade and contract type

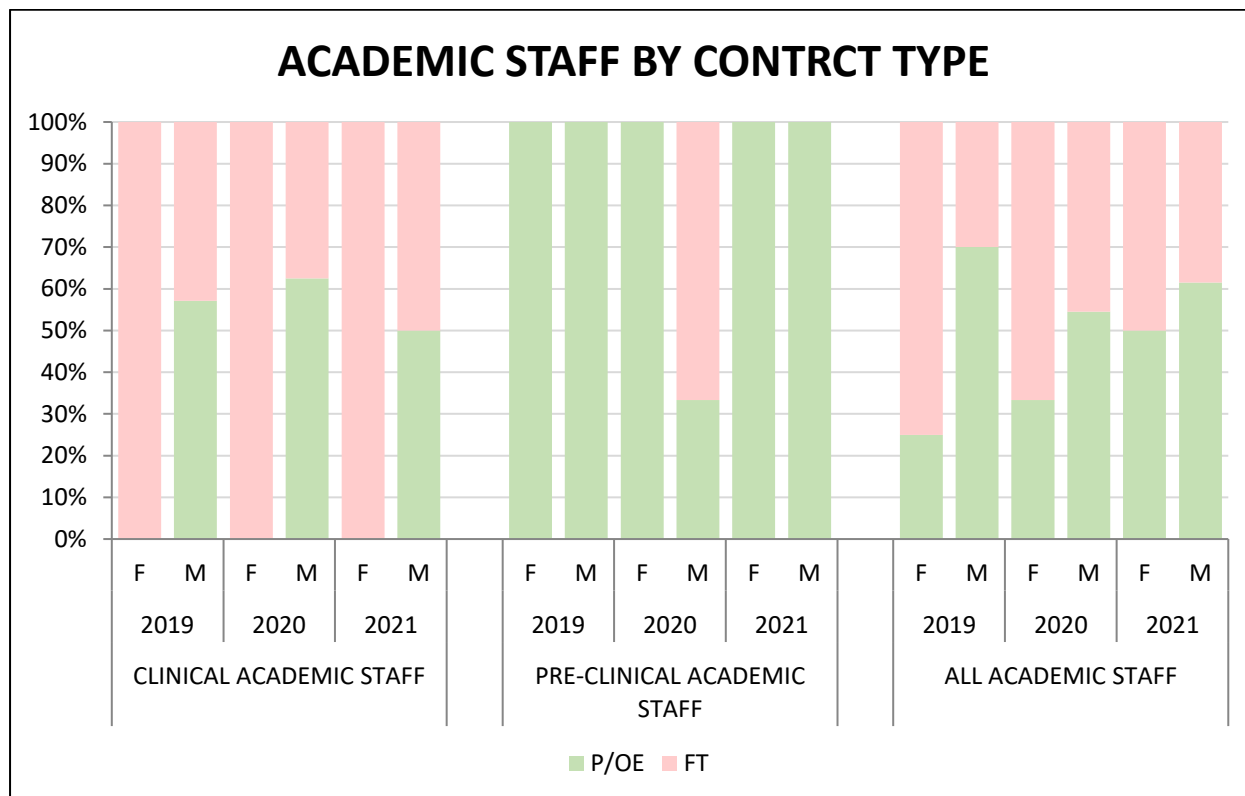


Figure 9 Academic staff by gender and contract type (fixed-term versus permanent/open-ended externally funded) (40).

⁵ <https://www.medschools.ac.uk/clinical-academic-survey>

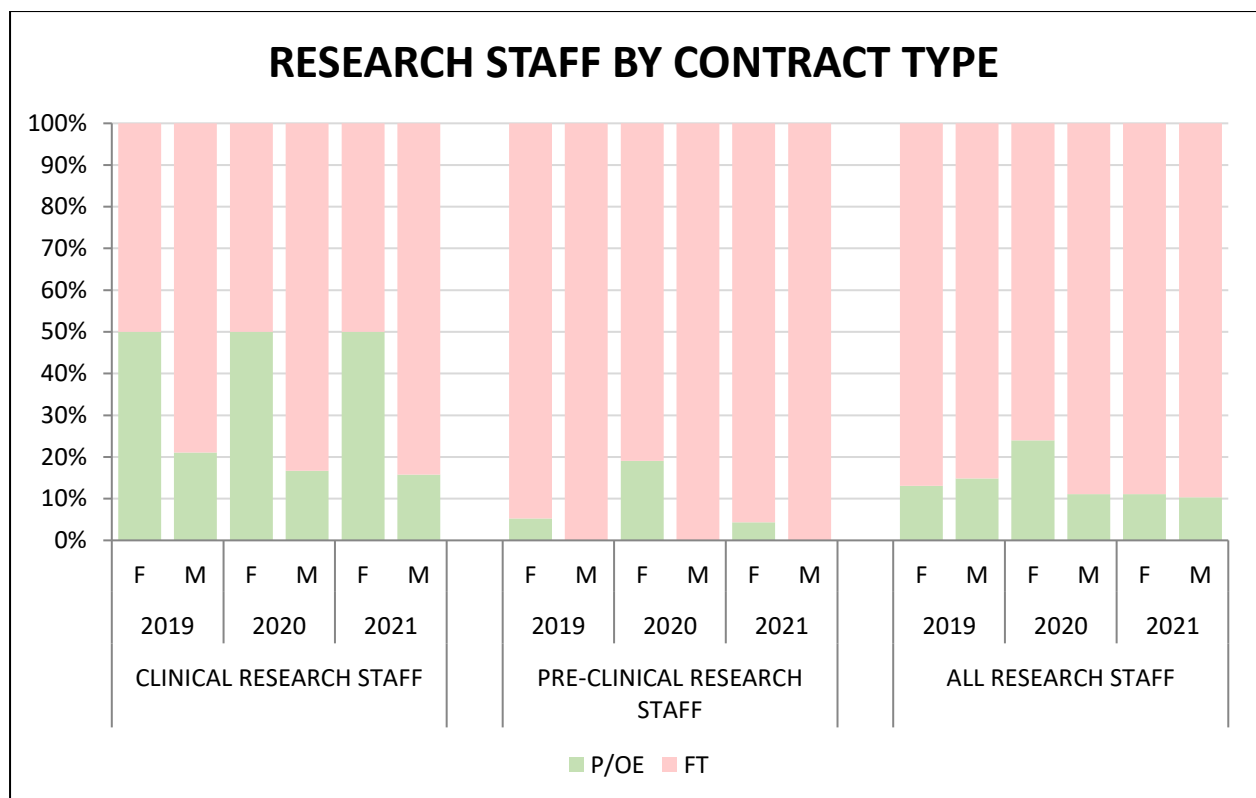


Figure 10 Research staff by gender and contract type (fixed-term/open-ended versus permanent) (40).

- f Professional, technical and operational staff/professional and support staff by job family

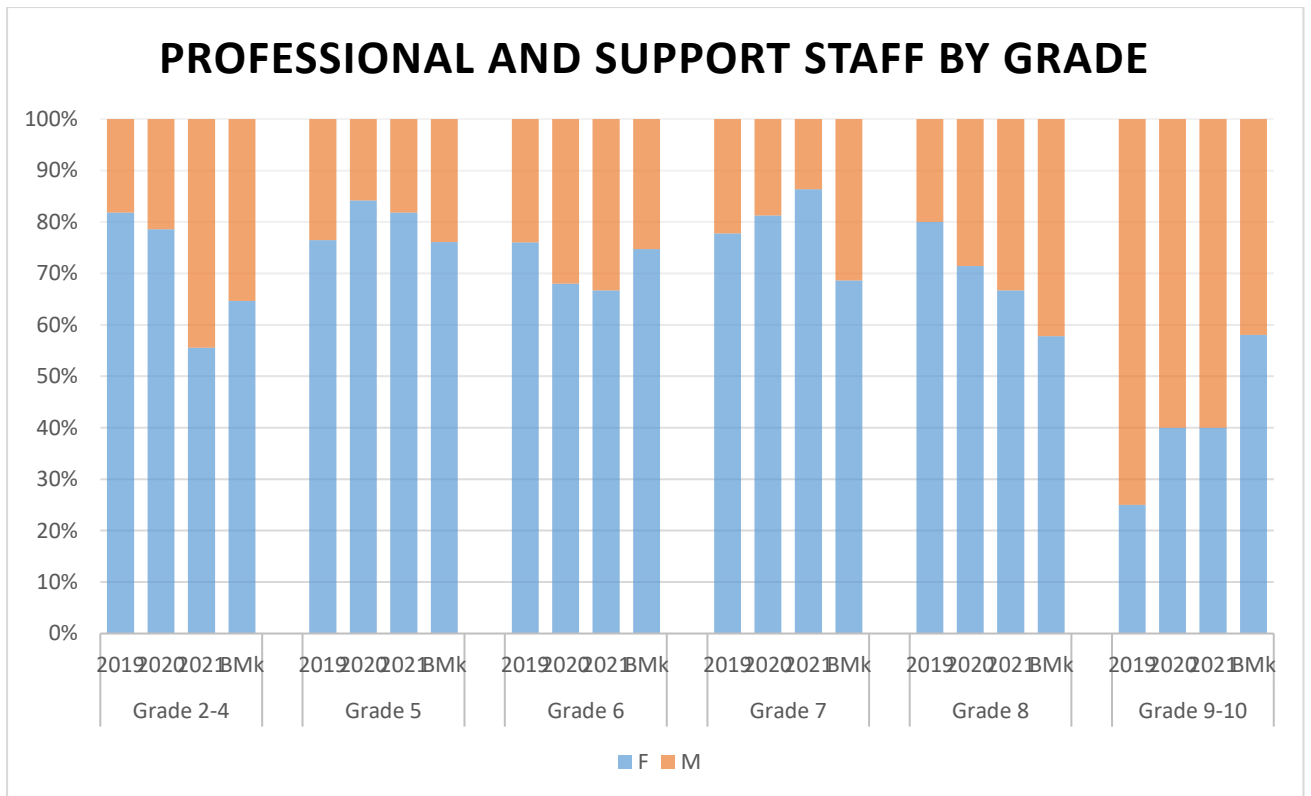


Figure 11 Professional and support staff by grade and gender. Benchmarked against divisional data.

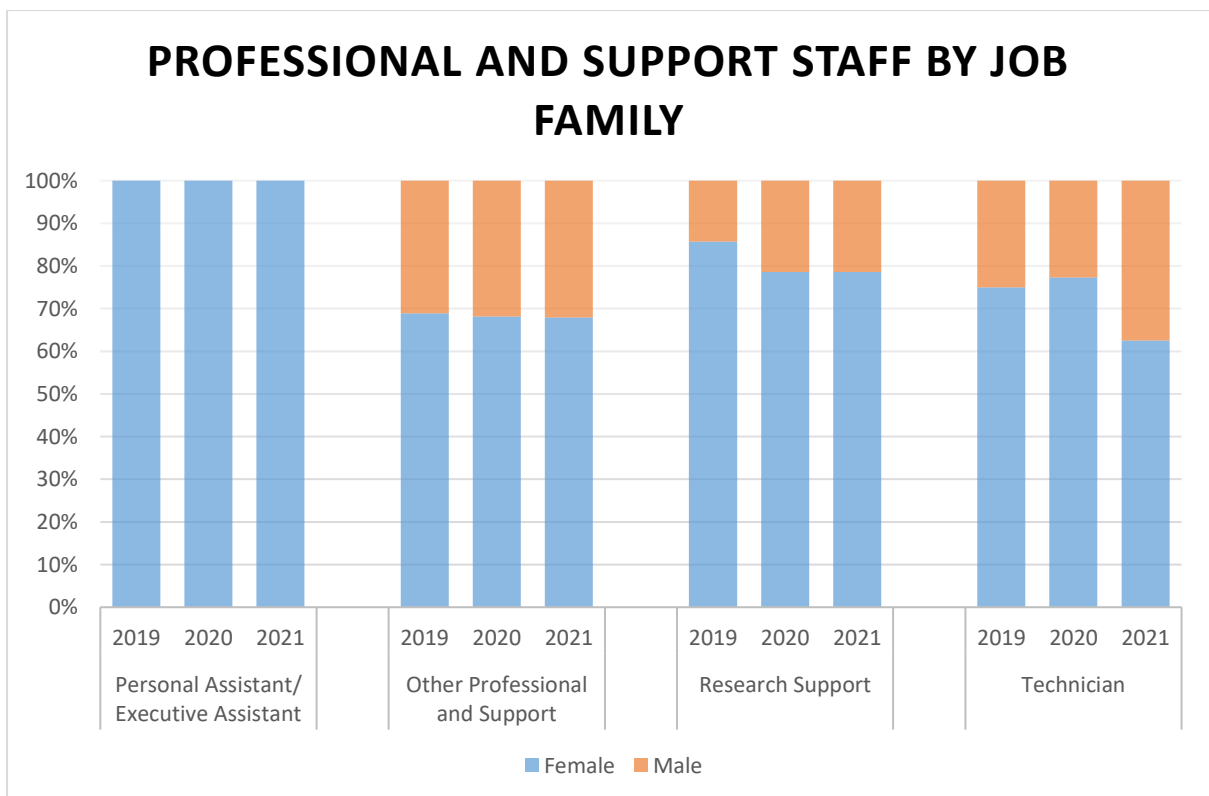


Figure 12 Professional and support staff by job family (2.2, 35, 41).

g Professional and support staff by contract type

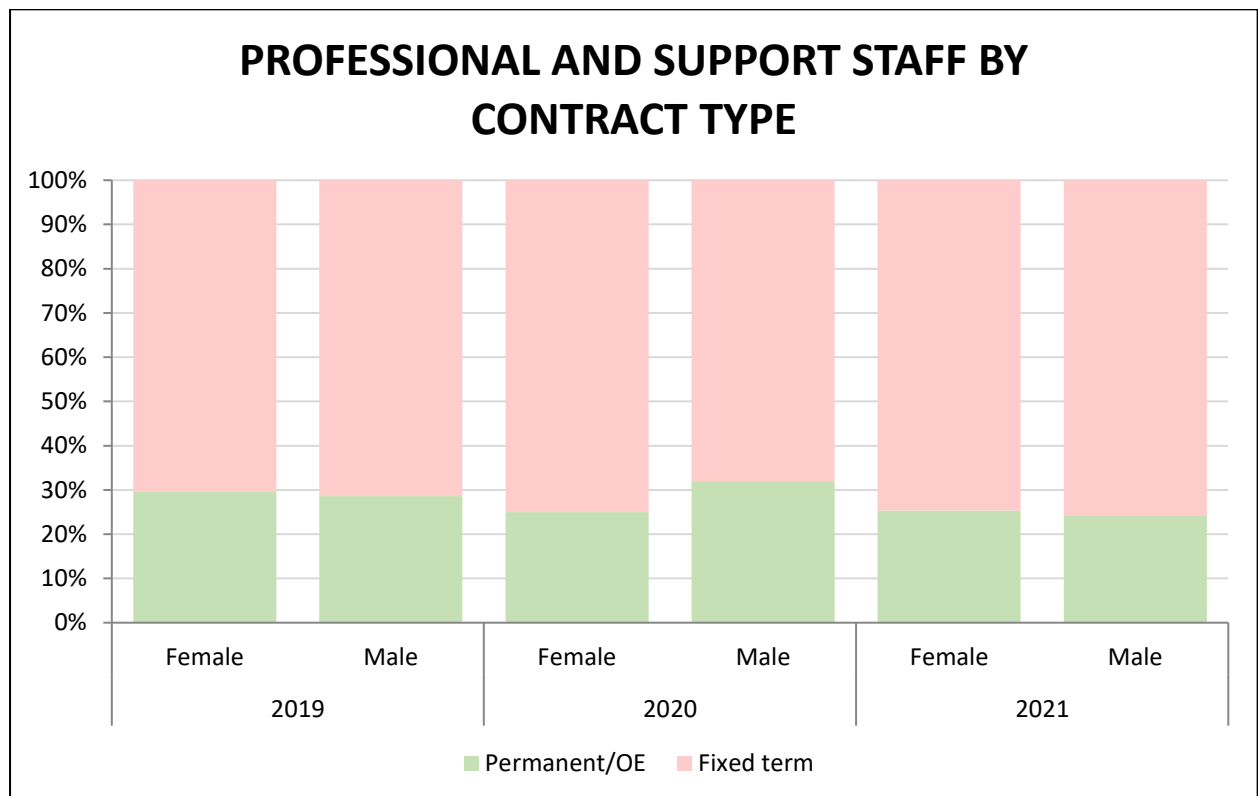


Figure 13 PS staff by contract type (40).

h Applications, shortlists and appointments made in recruitment to academic posts

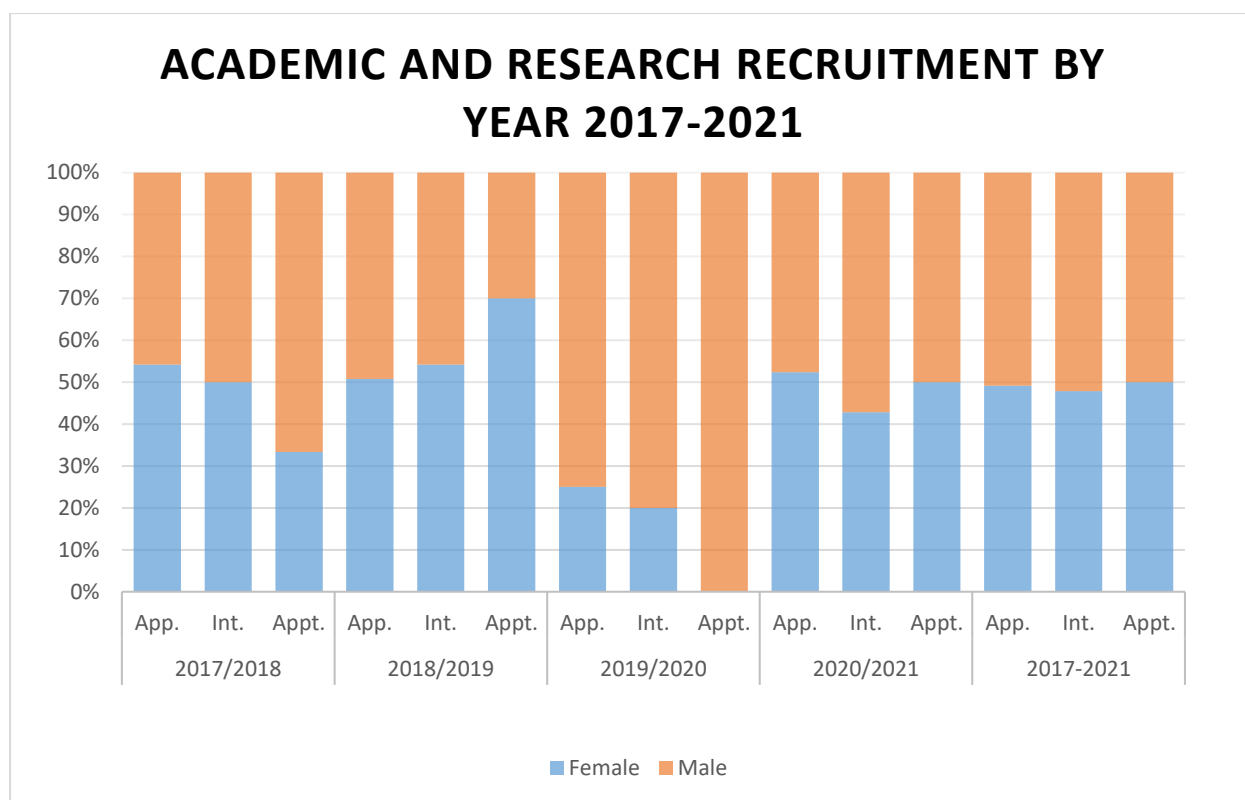


Figure 14 Applications, shortlist and appointments made in recruitment to academic and research posts by year (13).

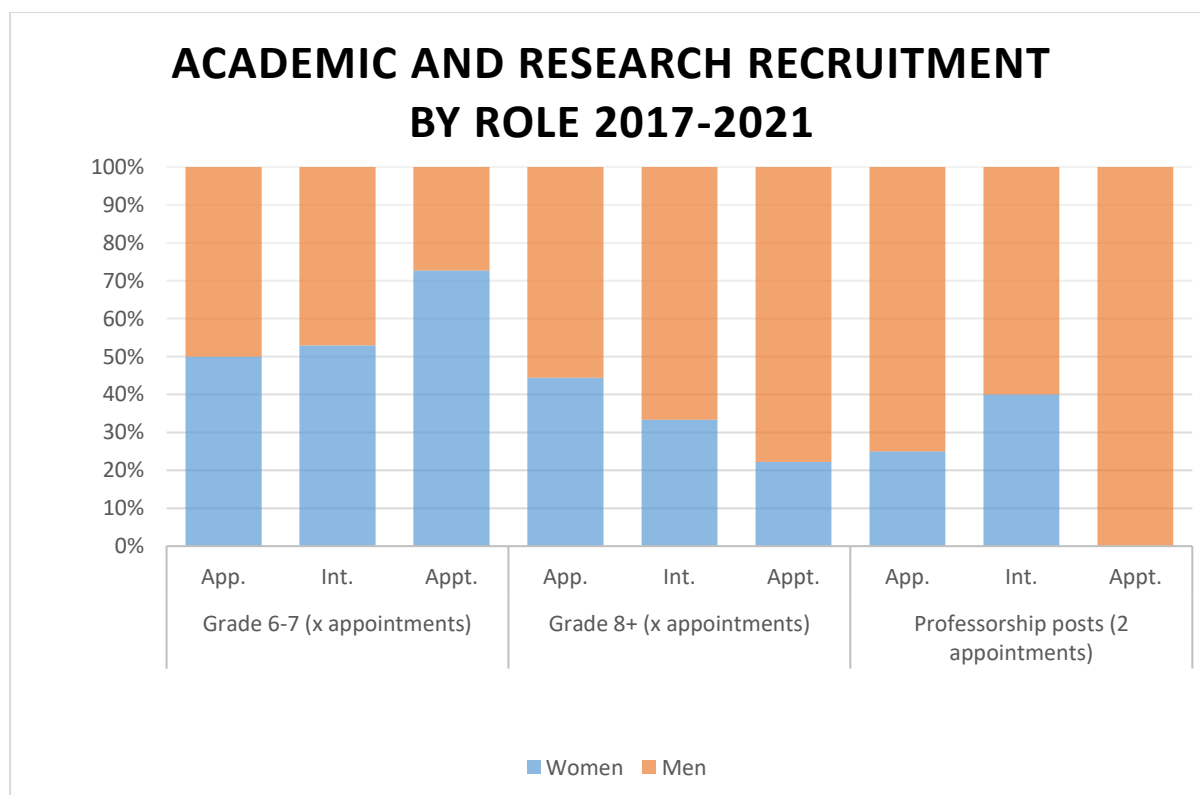


Figure 15 Applications, shortlists and appointments to academic and research posts by role (3.2, 41).

i Applications, shortlist and appointments made in recruitment to PTO posts



Figure 16 Applications, shortlist and appointments made to professional and support roles by year (3.2).

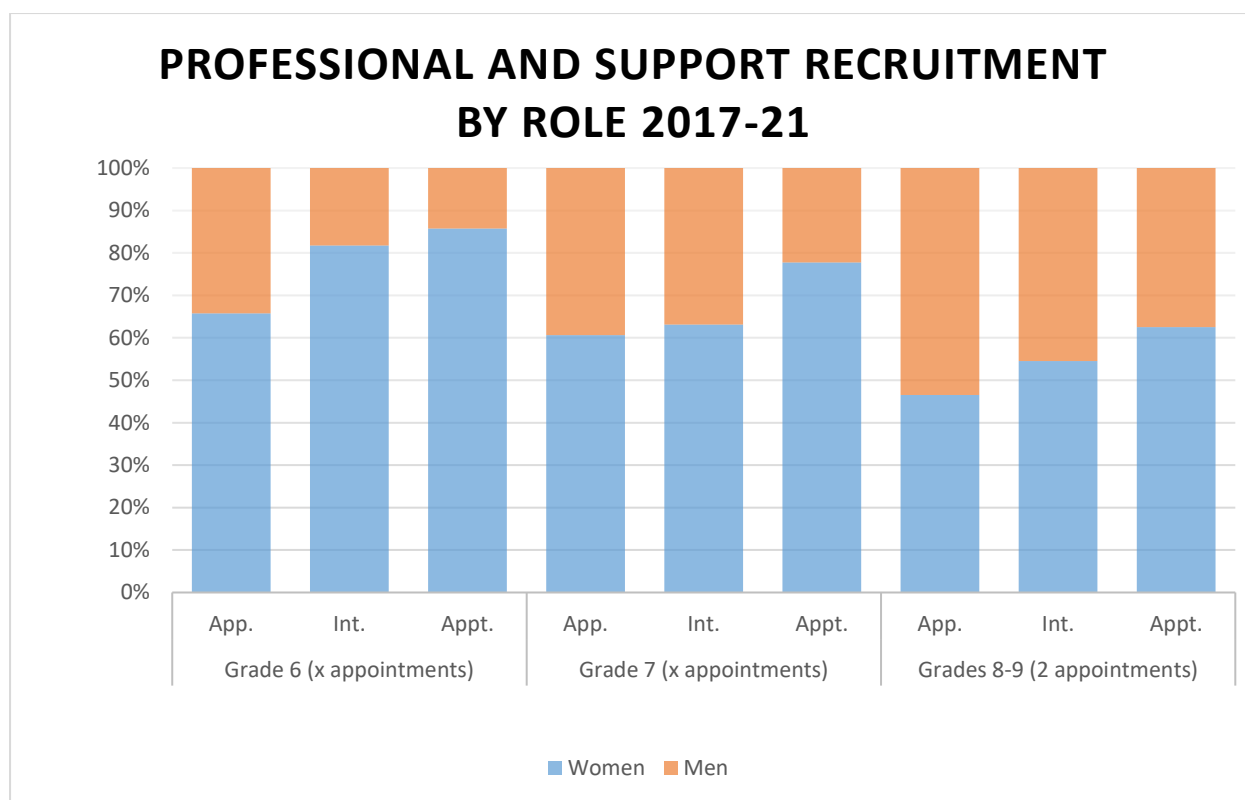


Figure 17 Applications, shortlist and appointments made to professional and support roles by grade (3.2).

j Applications and success rates for academic promotion

	Female		Female success rate	Male		Male success rate
2017	Applied	Awarded		Applied	Awarded	
2018	Applied	Awarded		Applied	Awarded	
2019	Applied	Awarded		Applied	Awarded	
2020	Applied	Awarded		Applied	Awarded	
2021	Applied	Awarded		Applied	Awarded	
2016-2021	Applied	Awarded		Applied	Awarded	
	5	4		10	9	

Table 16 Researcher applications and success rates for regrading (2.4, 2.6).

Female	Female success rate	Male	Male success rate
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2017	Applied	Awarded		Applied	Awarded	
2018	Applied	Awarded		Applied	Awarded	
2020	Applied	Awarded				
2021	Applied	Awarded		Applied	Awarded	
2017-2021	Applied	Awarded		Applied	Awarded	
	7	5		10	9	

Table 17 Applications and success rates to the Recognition of Distinction exercise (2.3, 2.7)

k Applications and success rates for PTO progression

	Female		Female success rate	Male		Male success rate
2017	Applied	Awarded		Applied	Awarded	
2018	Applied	Awarded		Applied	Awarded	
2019	Applied	Awarded		Applied	Awarded	
2020	Applied	Awarded		Applied	Awarded	
2021	Applied	Awarded		Applied	Awarded	
2017-2021	Applied	Awarded	85%	Applied	Awarded	
	13	11		4	4	

Table 18 Professional and support staff applications and success rates for regrading (2.4)

2.2. Additional Data

a Staff and Student Numbers

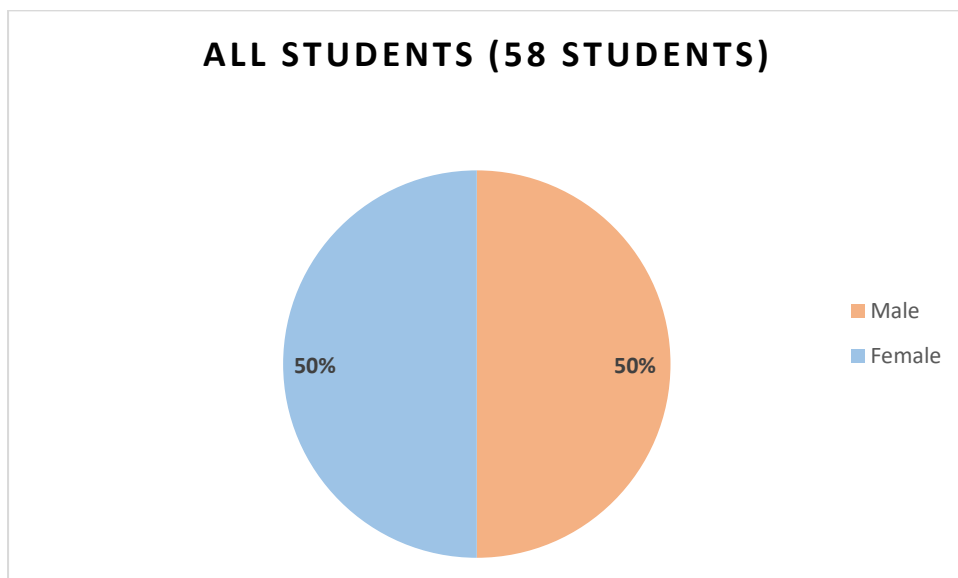


Figure 18 NDS students by gender (9).

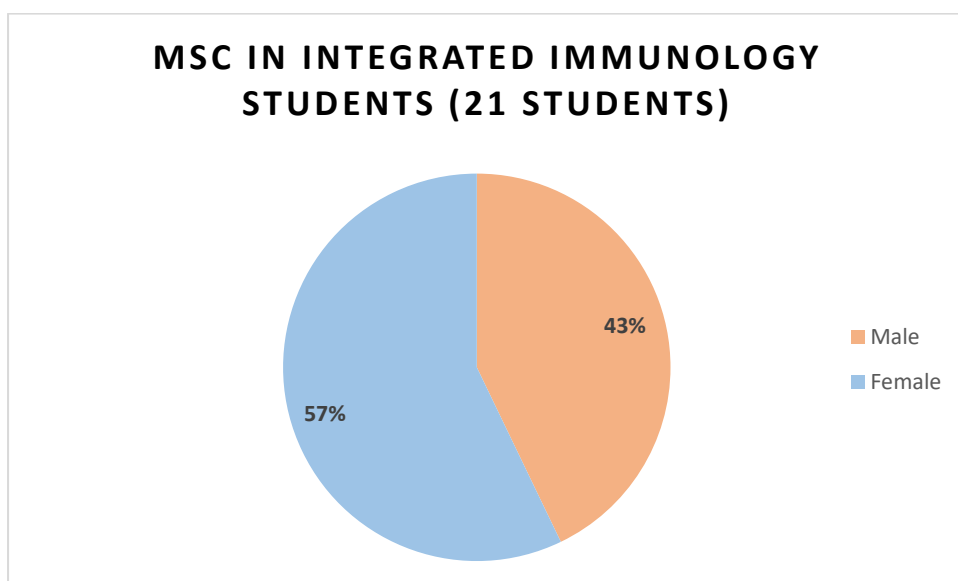


Figure 19 MSc in Integrated Immunology students by gender (9).

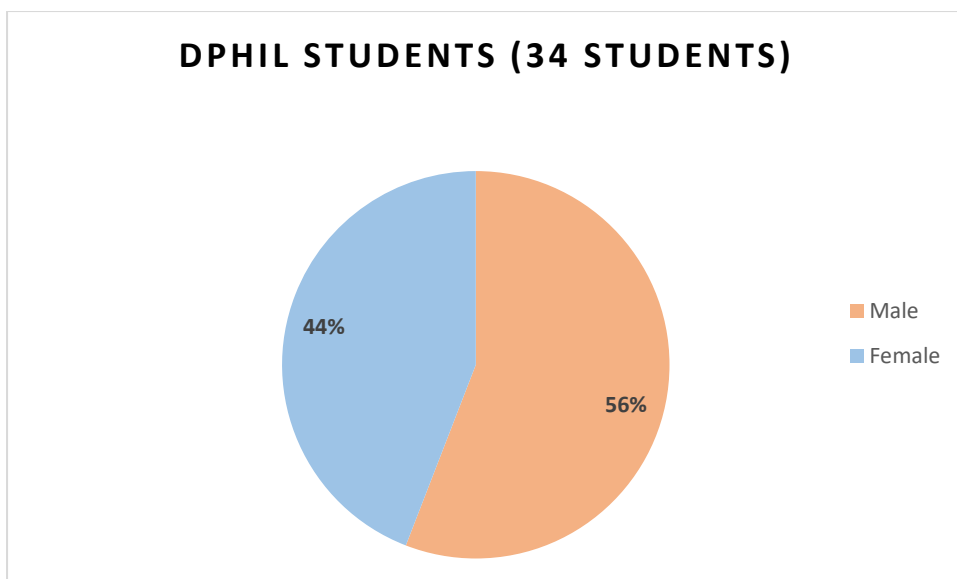


Figure 20 DPhil students by gender (9).

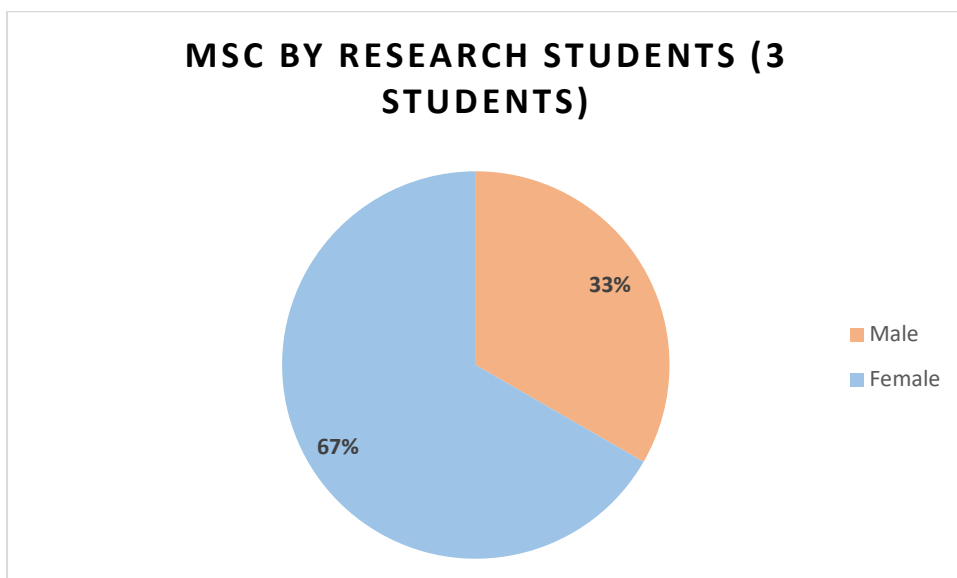


Figure 21 MSc by Research students by gender (9).

b Culture

[SOME FIGURES REDACTED]

I find the staff gateway a useful source of information (2021)	Positive response rate
BME	
White	
Female	71%
Male	65%

All staff	68%
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Table 19 Proportion of staff who find the new (not yet completed) staff gateway to be a useful source of information (2021) (37).

[SOME FIGURES REDACTED]

I find the intranet a useful source of information (2021)	Positive response rate
BME	
White	
Female	58%
Male	68%
All staff	61%

Table 20 Proportion of staff who found the staff intranet to be a useful source of information (2021) (37).

	Male	Female	%Female
2017	10	18	64.29%
2018	13	6	
2019	16	6	
2020	11	7	
2021	6	3	

Table 21 NDS Away Day speakers by gender (34).

	Male	Female	% Female
2017			
2018			
2019			
2020			
2021			

Table 22 NDS Away Day Chairs (34).

c Bullying and Harassment Data

I have experienced bullying and harassment in the last 12 months	Gender	Positive response rate			
		2016	2018	2020	2021
Academic and Research	F				
	M				

Professional and Support	All				
	F				
	M				
All Staff	All				
	F				
	M				
	All				

Table 23 NDS staff who have experienced bullying and harassment within the last 12 months. (5.1, 39).

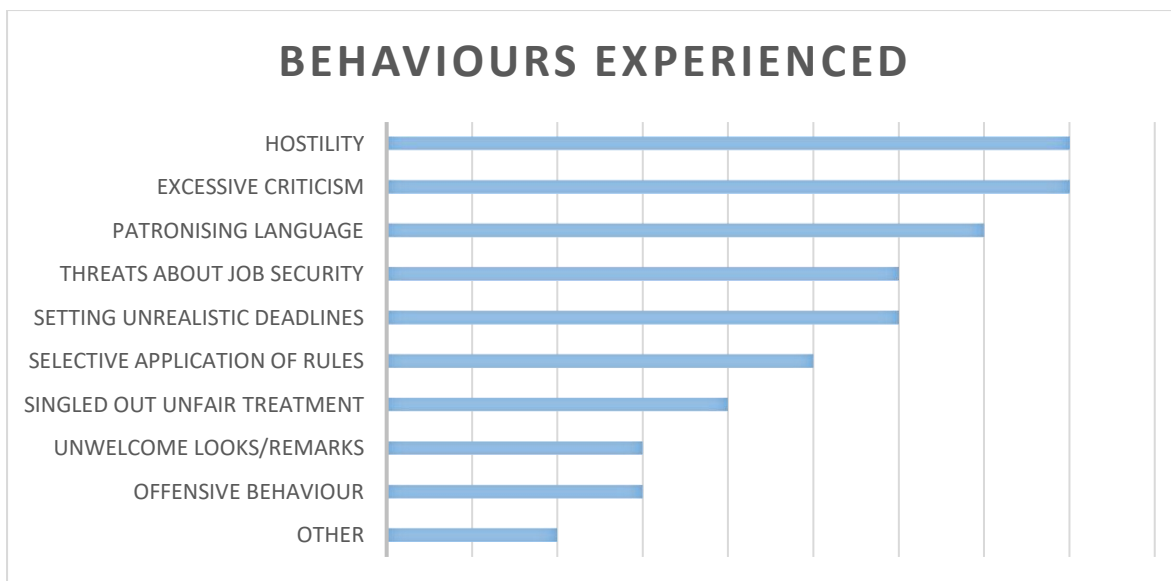


Figure 22 Most common forms of bullying and harassment experienced by NDS staff (2021) (5.2, 39).

d Career Development and Representation

Year	Male	Female	% Female
2017-2018	3	1	
2018-2019	1	3	
2019-2020	3	1	
2020-2021	2	5	
2017-2021	9	10	

Table 24 NDS Training Fund successful applicants 2017-2021 (Letter of endorsement from the head of the department) (5).

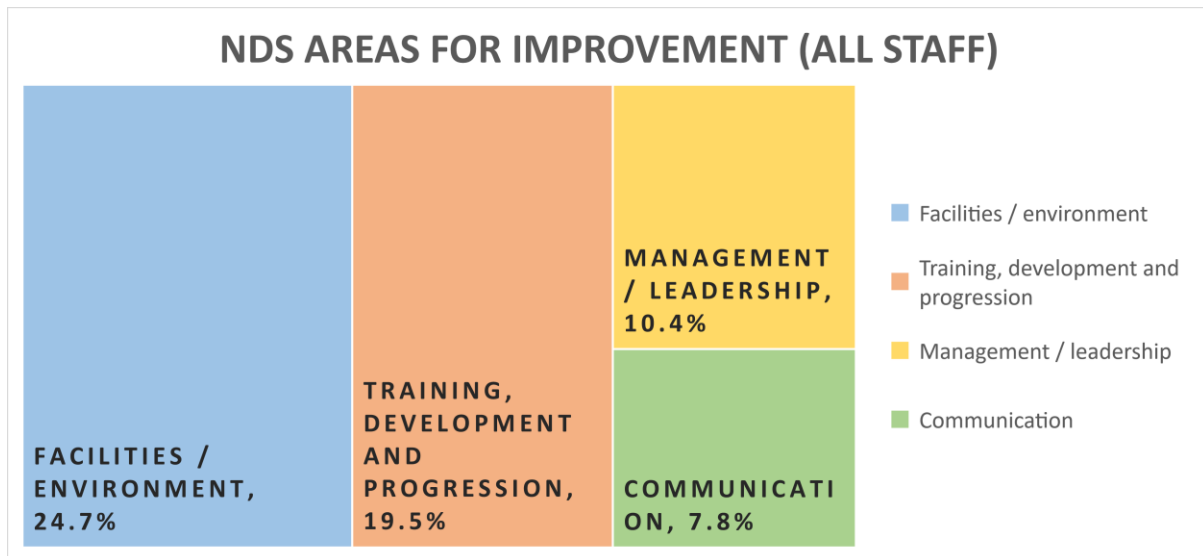


Figure 23 Top responses to the question, ‘what single thing do we most need to improve in the department?’ in 2021 (33, 40).

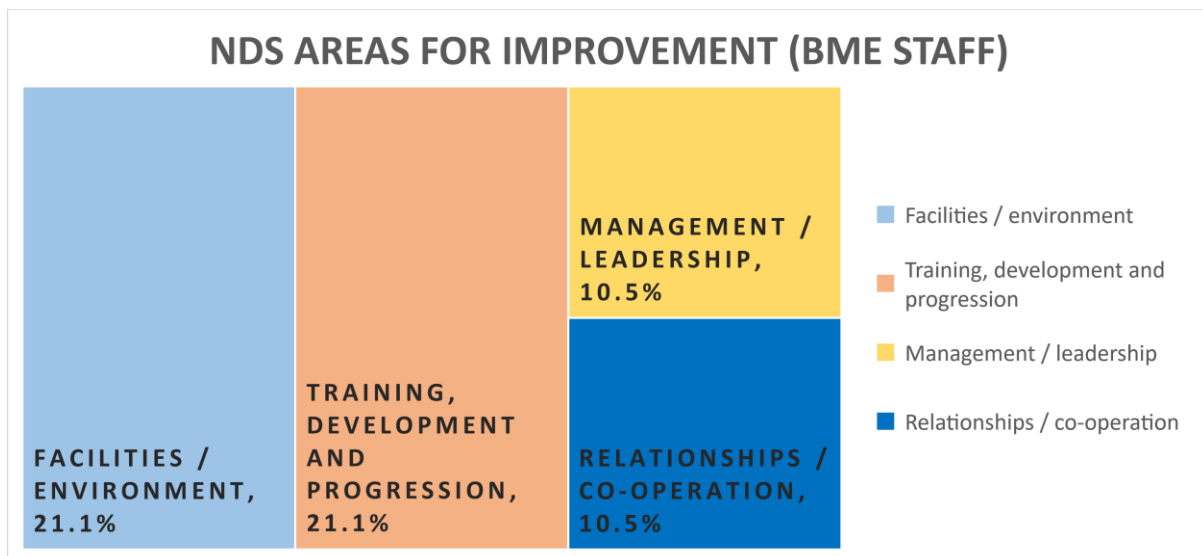


Figure 24 Top responses to the question, ‘what single thing do we most need to improve in the department?’ from BME staff in 2021 (40).

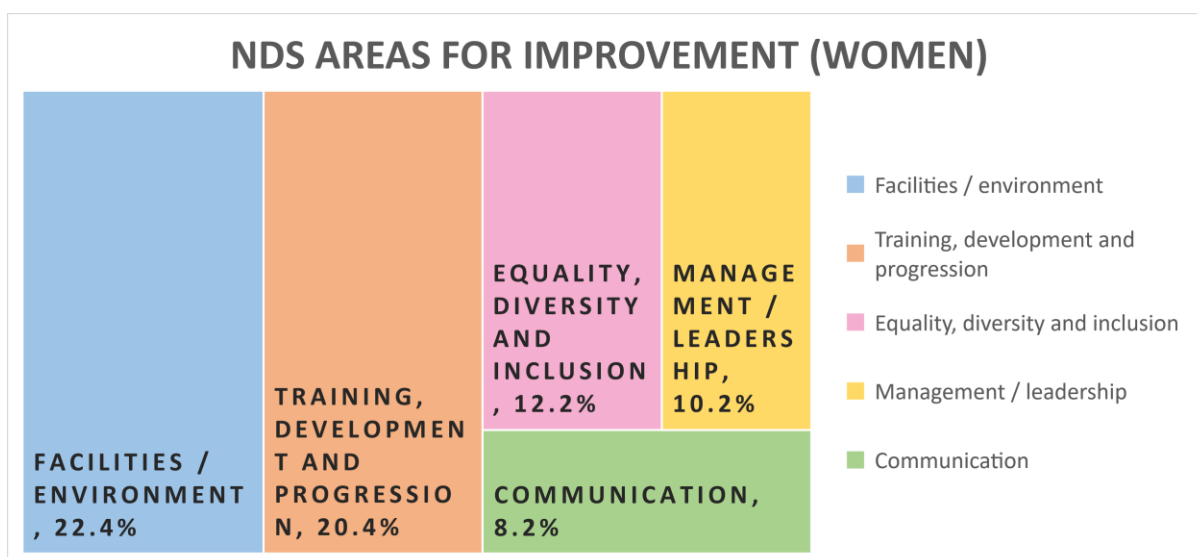


Figure 25 Top responses to the question, 'what single thing do we most need to improve in the department?' from female staff in 2021 (40).

	BME Female	White Female	All Female	BME Male	White Male	All Male	All BME	All White
I am clear about the training and development opportunities available to me			60%			61%		
I take time to reflect on, and plan for, my career development			60%			63%		
I have the opportunity to develop and grow here			66%			71%		
I am actively encouraged to take up development opportunities			49%			61%		
I am supported to think about my professional development			57%			71%		

Table 25 Intersectional analysis of 2021 favourable survey responses to career development questions (40).

	All staff	Staff with disabilities
I am clear about the training and development opportunities available to me	64%	
I take time to reflect on, and plan for, my career development	64%	
I have the opportunity to develop and grow here	69%	
I am actively encouraged to take up development opportunities	54%	
I am supported to think about my professional development	69%	

Table 26 Analysis of 2021 favourable survey responses to career development questions for disabled and non-disabled staff (3.4, 40).

I am supported to think about my development	Gender	Positive response rate				
		2016	2018	2020	2021	2021 BM
Academic and Research	F	76%	92%	77%	25%	
	M	89%	100%	95%	75%	
	All	83%	97%	88%	58%	
Professional and Support	F	74%	76%	90%	64%	
	M	92%	79%	91%	64%	
	All	78%	77%	90%	64%	
All Staff	F	75%	80%	87%	57%	
	M	90%	91%	94%	71%	
	All	80%	85%	89%	62%	56%

Table 27 Positive staff response rates to the question, 'I am supported to think about my development' by role type, gender and year, benchmarked against the wider university (40).

I am encouraged to take up career development opportunities	Gender	Positive response rate				
		2016	2018	2020	2021	2021 BM
Academic and Research	F	72%	83%	75%	38%	
	M	78%	95%	95%	67%	
	All	75%	91%	88%	57%	
Professional and Support	F	64%	71%	76%	51%	
	M	82%	57%	83%	50%	
	All	67%	67%	77%	51%	
All Staff	F	66%	74%	75%	49%	
	M	79%	79%	91%	61%	

	All	70%	76%	81%	53%	45%
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Table 28 Positive staff response rate to the question, 'I am encouraged to take up career development opportunities' by role type, gender and year, benchmarked against the wider university (40).

Successful Work Experience Applicants	Male	Female	State School	Independent School	% Female	% Independent School
2017	4	6				
2018	4	6				
2019	4	6				
2020	2	10				
2021	5	7				
2017-2021	19	35	42	12	65%	22%

Table 29 Successful work experience applicants by gender and school type (3.3, 41).

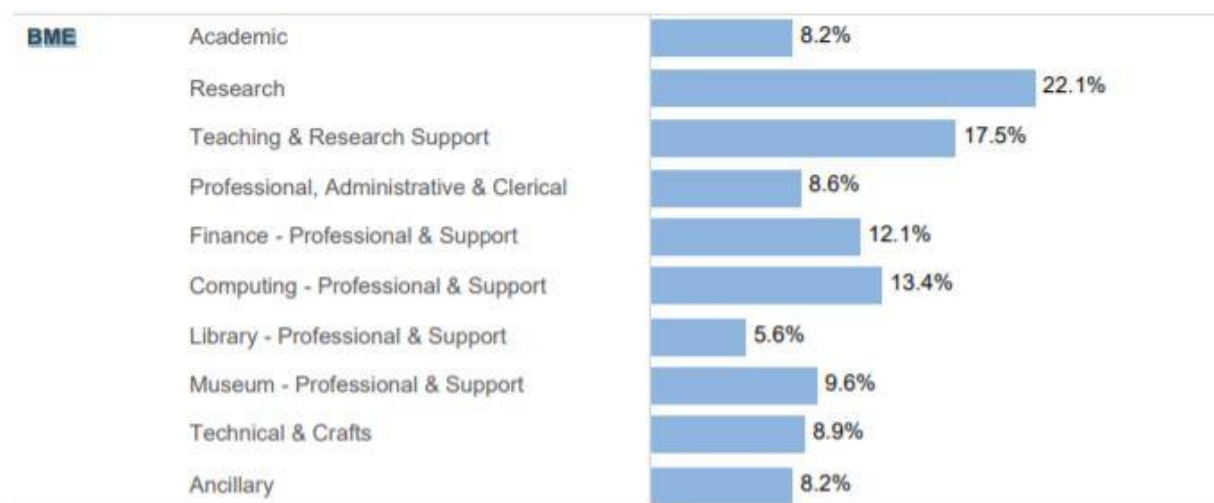


Figure 26 University ethnicity profile by staff group (July 2020) (3.2, 3.1, 2.3, 2.2, 41).

I have been offered a mentor	Gender	Positive response rate	
		2021	2021 University BM
Academic and Research	F	25%	
	M	23%	
	All	24%	
Professional and Support	F	9%	
	M	8%	
	All	9%	

All Staff	F	12%	
	M	16%	
	All	13%	13%

Table 30 Staff who have been offered a mentor (2.5).

I have been mentored by someone other than my line manager	Gender	Positive response rate	
		2021	2021 University BM
Academic and Research	F	8%	
	M	46%	
	All	32%	
Professional and Support	F	18%	
	M	14%	
	All	17%	
All Staff	F	16%	
	M	34%	
	All	22%	27%

Table 31 Staff who have been mentored by someone other than their line manager (2.5).

I have had a PDR within the last two years	Gender	Positive response rate	
		2021	2021 University BM
Academic and Research	F	46%	
	M	63%	
	All	57%	
Professional and Support	F	67%	
	M	50%	
	All	63%	
All Staff	F	63%	
	M	58%	
	All	61%	72%

Table 32 Proportion of staff who have had a PDR within the last two years (2.9).

My PDR was useful	Gender	Positive response rate	
		2021	2021 University BM
Academic and Research	F	50%	
	M	73%	
	All	67%	
Professional and Support	F	78%	
	M	86%	
	All	80%	
All Staff	F	74%	

	M	77%	
	All	75%	61%

Table 33 Proportion of staff who found their PDR useful (2.9).

e Wellbeing Data

Selected Theme/Focal Point	Response favourability			Comparison
Wellbeing & Workload	75%	17%	8%	+15

Wellbeing & Workload questions

Impact	Question	Theme	Response favourability			Comparison
🎯	My health and wellbeing are adequately supported at work	Wellbeing & Workload	83%	10%	6%	+15
🎯	My department takes people's caring responsibilities into account when scheduling meetings	Wellbeing & Workload	73%	26%	1%	+8
🎯	I can meet the requirements of my job without regularly working excessive hours	Wellbeing & Workload	69%	17%	15%	+16
🎯	I am able to strike the right balance between my work and home life	Wellbeing & Workload	76%	13%	11%	+19

Figure 27 NDS 2021 responses to wellbeing and workload questions compared to division (37).

How satisfied were you with the NDS Slack Channel?

	Male	Female
Very satisfied	4	6
Satisfied	7	17
Neither satisfied nor dissatisfied	28	38
Dissatisfied	0	0
Very dissatisfied	0	0
% Satisfied	28%	38%

Table 34 Answers to the question, 'how satisfied were you with the NDS Slack Channel?' (2020) (32).

How satisfied were you with the regular departmental emails?

	Male	Female
Very satisfied	10	21
Satisfied	21	32
Neither satisfied nor dissatisfied	8	7
Dissatisfied	0	1
Very dissatisfied	0	0
% Satisfied	79%	87%

Table 35 Answers to the question, 'how satisfied were you with the regular departmental emails?' 2020) (32).

Survey Question	“Often”/“All of the time”		
		M	F
My work makes me feel stressed	Pre-COVID		
	Post-COVID		
	Difference		
I am able to cope well with work-related stress	Pre-COVID		
	Post-COVID		
	Difference		
My line manager/supervisor supports my wellbeing	Pre-COVID		
	Post-COVID		
	Difference		
My department supports my wellbeing	Pre-COVID		
	Post-COVID		
	Difference		

Table 36 Impact of COVID on staff feelings of wellbeing (surveyed November 2020) (39, 43).

I feel comfortable discussing my mental wellbeing with my line manager	Gender	Positive response rate	
		2020	2021
Academic and Research	F	53%	62%
	M	43%	83%
	All	50%	75%
Professional and Support	F	73%	84%
	M	81%	79%
	All	75%	83%
All Staff	F	69%	80%
	M	59%	81%
	All	65%	80%

Table 37 Increase in proportion of staff who feel comfortable discussing their mental wellbeing with their line manager (4.2, 43).

f Leavers data

Role Group	Year	Female Proportion of Leavers	Female Proportion of Department
Academic and Research	2016		
	2017		

Professional and Support	2018		
	2019		
	2020		
	2016		
	2017		
	2018		
	2019		
	2020		

Table 38 Proportion of female leavers compared to proportion of female staff by role group (13).

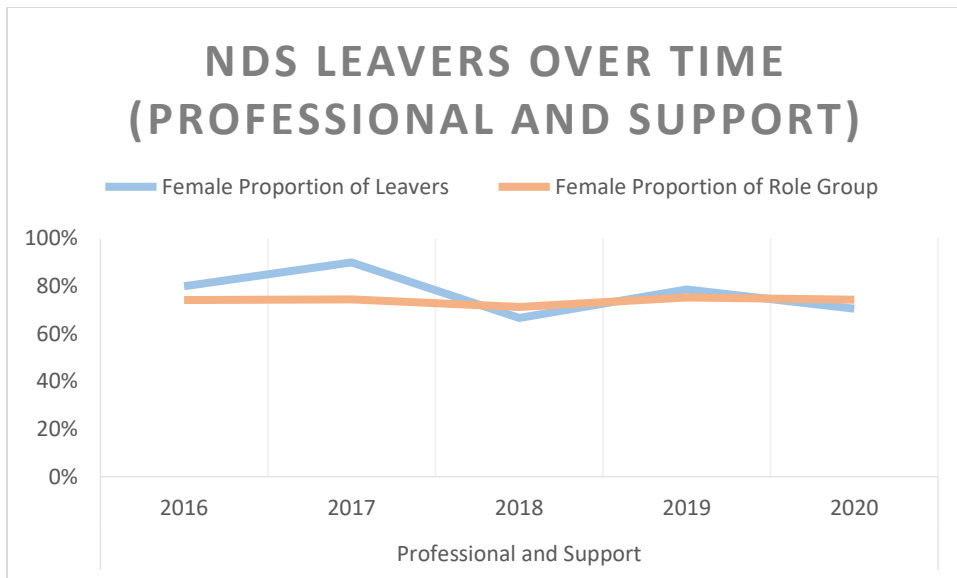


Figure 28 Proportion of female professional and support staff leavers compared to overall proportion of female professional and support staff (13).

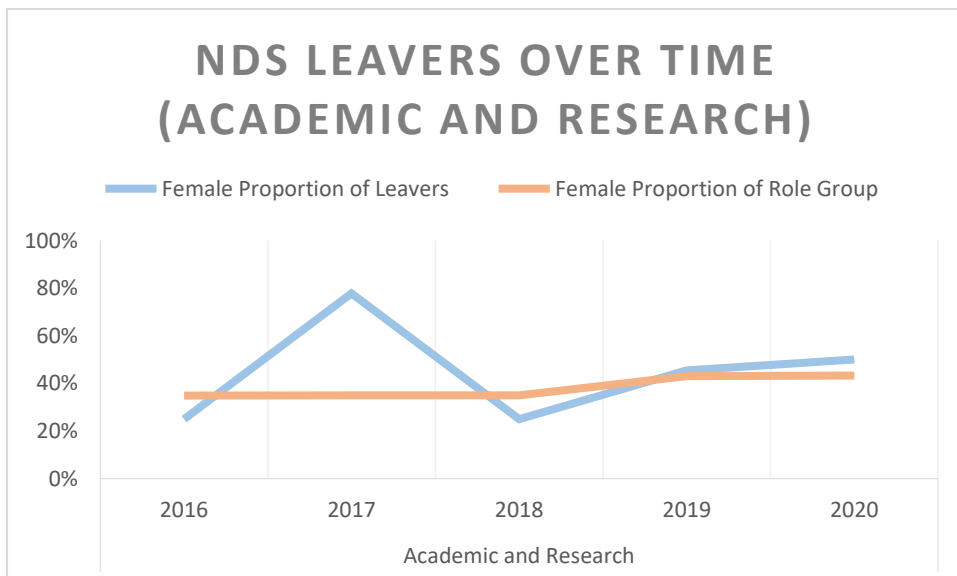


Figure 29 Proportion of female academic and research leavers compare to overall proportion of female academic and research staff (13).

g Grants data

	£0-99K		£100-399K		£400-999K		£1M+		Total	
	Applied	Awarded	Applied	Awarded	Applied	Awarded	Applied	Awarded	Applied	Awarded
Male	53	22	44	6	22	7	15	6	134	41
Female	38	15	25	6	10	0	2	0	75	21
Male Success Rate	42%		14%		32%				31%	
Female Success Rate	40%		24%						28%	

Table 39 NDS grant application and award rates by gender and award amount (13).

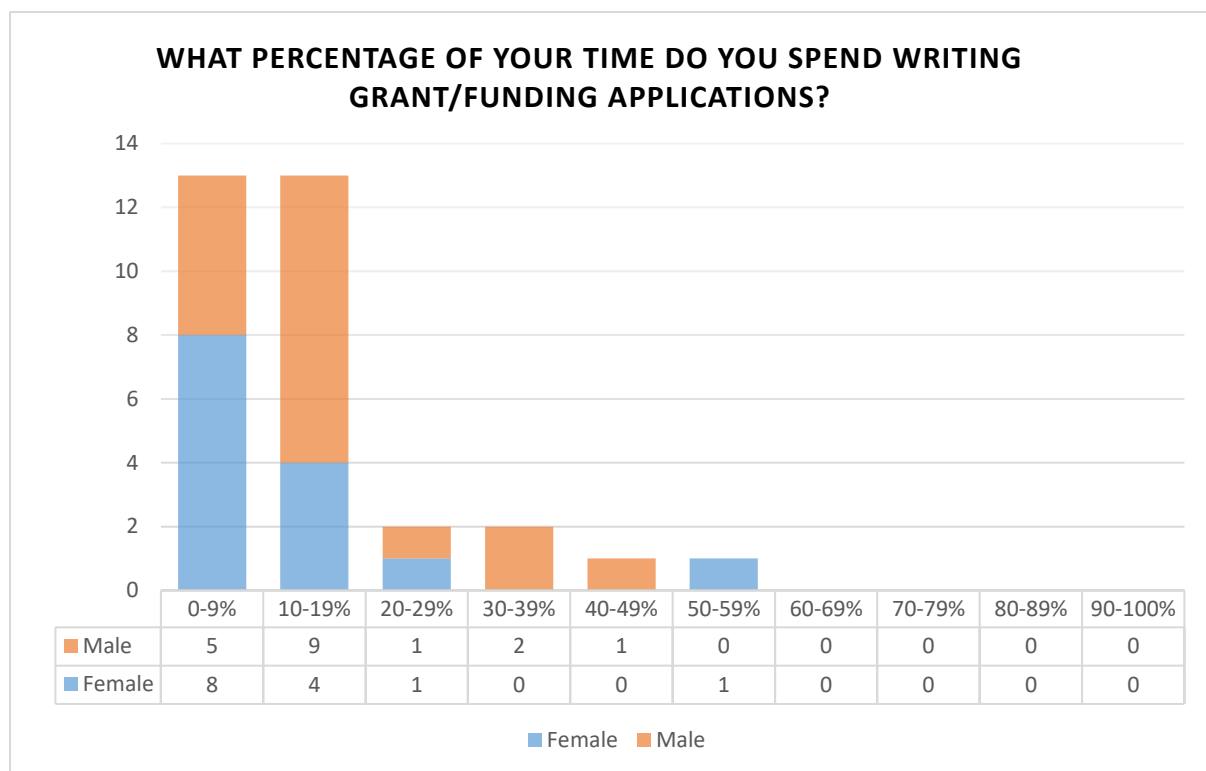


Figure 30 Proportion of time spent by academic and research staff on writing grants/funding applications (2.7, 2.6).

Appendix 3: Glossary

Please provide a glossary of abbreviations and acronyms used in the application.

Abbreviation	Meaning
ACF	Academic clinical fellow
ACL	Academic clinical lecturer
ASC	Athena Swan Coordinator
BIPOC	Black, indigenous and people of colour
BME	Black and minority ethnic
CAP	Current action plan
EDIC	Equality, Diversity and Inclusion Committee
Hillary (term)	The second term of the academic year, beginning in January and ending in March
HOD	Head of department
MEB	Management Executive Board
Michaelmas (term)	The first term of the academic year, beginning in October and ending in December
NAP	New action plan
NDS	Nuffield Department of Surgical Sciences
OCDEM	The Oxford Centre for Diabetes, Endocrinology and Metabolism
PDR	Personal Development Review
PI	Principle investigator
SAT	Self-assessment team
Trinity (term)	The third academic term of the year, beginning in April and ending in June