Workforce Sexual Orientation Equality Standard

South East London Integrated Care Board

Equality, Diversity and Inclusion Team
2024-2025

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1. Introduction

1.1. The Workplace Sexual Orientation Equality Standard (WSOES) offers organisations valuable insights into the experiences of their Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, and Asexual+ (LGBTQIA+) staff, helping them to drive positive change and fostering inclusivity within the workplace.

1.2. It was developed by University Hospitals of Morecambe Bay NHS Foundation Trust in collaboration with Lancashire LGBT, the WSOES is gaining national interest, although not yet mandatory.

1.3. The WSOES includes eight metrics comparing LGBTQIA+ staff experiences with non-LGBTQIA+ colleagues.

1.4. NHS organisations can use this data to improve inclusivity and employee wellbeing, leading to better service for our patients and improved performance. Early adoption by SEL ICB will be giving us an advantage.

1.5. Currently the WSOES is being discussed for national adoption. Monitoring for inclusion for LGBTQIA+ staff can be achieved through initiatives like the WSOES, LGBTQIA+ Health Inclusion Framework and the People's Promise.

1.6. The metrics use data from the Workforce Data and the NHS Staff Survey, which is anonymous, ensuring staff are not identifiable.

1.7. As this is SEL ICB's first year with WSOES, the data within this report will serve as a benchmark for future reports.

2. Summary of Findings

2.1. **Metric 1:** 5.4% of SEL ICB's workforce identify as LGBTQIA+, slightly below the 5.5% representation in the South East London population.

2.2. **Metric 2:** The data is showing us that heterosexual/straight applicants are 1.4 times more likely to be appointed following shortlisting compared to LGBTQIA+ applicants.

2.3. **Metric 3:** No LGBTQIA+ staff have gone through the disciplinary process in the last 2 years.

2.4. **Metric 4:** Information on non-mandatory training being undertaken by staff is currently not collected.
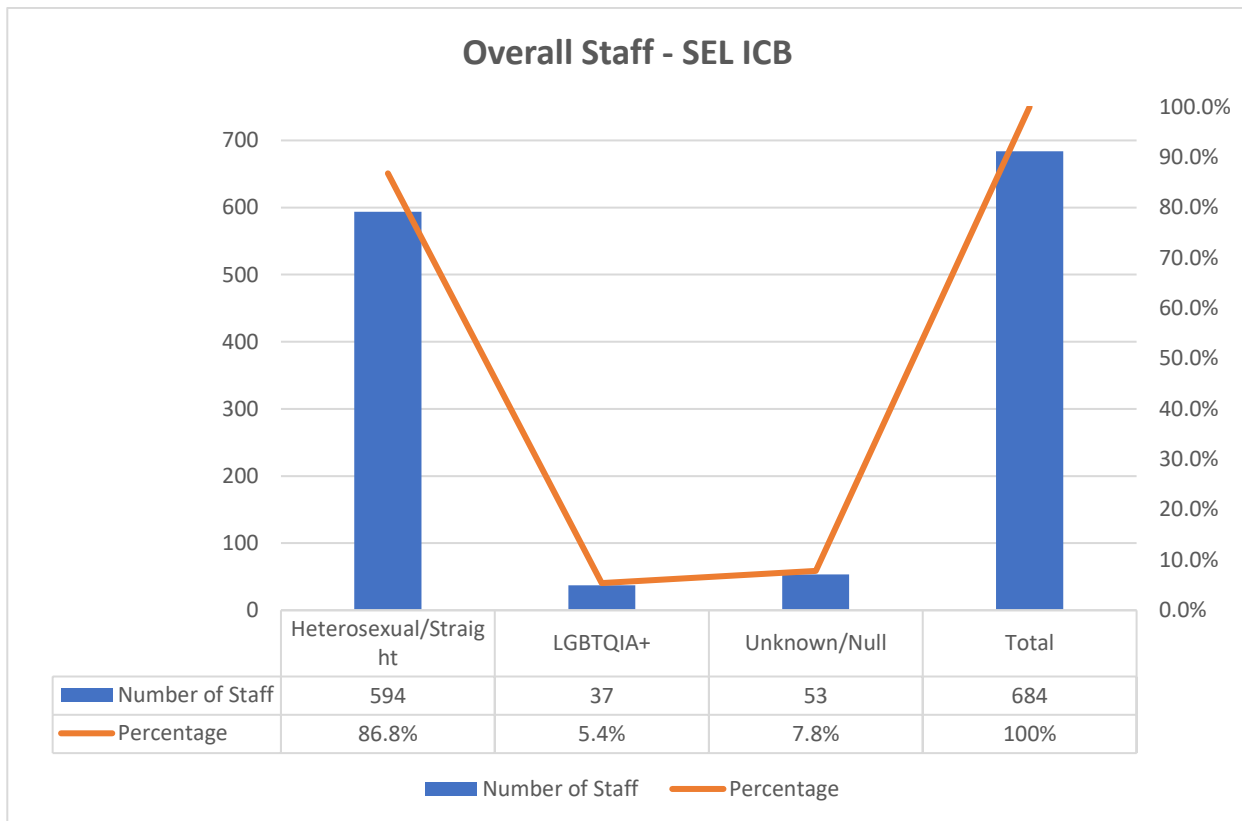
2.5.   **Metric 5:** 35.7% of Gay or Lesbian staff and 27.3% Bisexual staff believe that the organisation is providing equal opportunities for progression and promotion compared 52.6% of heterosexual/straight staff. 42.4% of staff chose to prefer not to say.

2.6.   **Metric 6:** Gay or Lesbian staff are 15.5% likely to experience bullying from managers compared to heterosexual/straight staff. Staff who are bisexual reported a lower number of 9.1%. 15.6% of staff chose to prefer not to say.

2.7.   **Metric 7:** Gay or lesbian staff experienced more discrimination at work from colleagues by 15% compared to heterosexual/straight staff (0% bisexual staff). 29% of staff chose to prefer not to say.

2.8.   **Metric 8:** The difference between LGBTQIA+ Board members and LGBTQIA+ staff (workforce) is (minus) -5%. The difference between heterosexual Board members and heterosexual staff (workforce) is (minus) -23%.

3. Metric 1: Percentage of colleagues in each of the Agenda for Change Bands 1-9 and VSM compared with the percentage of colleagues in the overall workforce.

3.1. Overview of SEL ICB staff overall [Graph 1 and Table 1]:

Overall Staff - SEL ICB

	Heterosexual/Straight	LGBTQIA+	Unknown/Null	Total
Number of Staff	594	37	53	684
Percentage	86.8%	5.4%	7.8%	100%

3.2. **Overview:** The SEL ICB workforce is predominantly heterosexual/straight (86.8%), with LGBTQIA+ staff representing 5.4%. This is a slight underrepresentation compared to the 5.5% LGBTQIA+ population in the community we serve.

3.3. It should be noted that the number of staff that have chosen to not share their sexual orientation is 7.8%. This may indicate that, while the data is relatively complete, there may be a reluctance among staff to disclose their sexual orientation, potentially due to stigma, discrimination, or negative impacts on their career progression. Alternatively, staff may be unsure of how to update the details on their electronic staff record.

3.4.   Overview of SEL ICB staff in non-clinical roles [Table 2]:

AfC band clusters	No. Heterosexual/ Straight	% of Heterosexual/ Straight	No. of LGBTQIA + staff	% of LGBTQIA + staff	No. of unknown staff	% of unknown staff	Total
Cluster 1: <1 to 4	30	90.9%	1	3.0%	2	6.1%	33
Cluster 2: 5 to 7	187	87.8%	14	6.6%	12	5.6%	213
Cluster 3: 8a and 8b	134	84.8%	10	6.3%	14	8.9%	158
Cluster 4: 8c to VSM	110	85.9%	5	3.9%	13	10.2%	128
Other	10	90.9%	0	0.0%	1	9.1%	11
Total	471	86.7%	30	5.5%	42	7.7%	543

3.5.   **Non-clinical staff:** The non-clinical workforce consists primarily of heterosexual/straight staff (86.7%), with LGBTQIA+ staff making up 5.5% of the non-clinical workforce, which is representative of the community we serve. Most LGBTQIA+ employees are in bands 5-8b (24 out of 30), but heterosexual/straight staff are significantly more prevalent across all bands.

3.6.   From band 8C onwards, LGBTQIA+ representation decreases, suggesting possible barriers or limited opportunities for advancement. Additionally, the percentage of staff with undisclosed sexual orientation is notably high across all bands, indicating a reluctance to disclose.

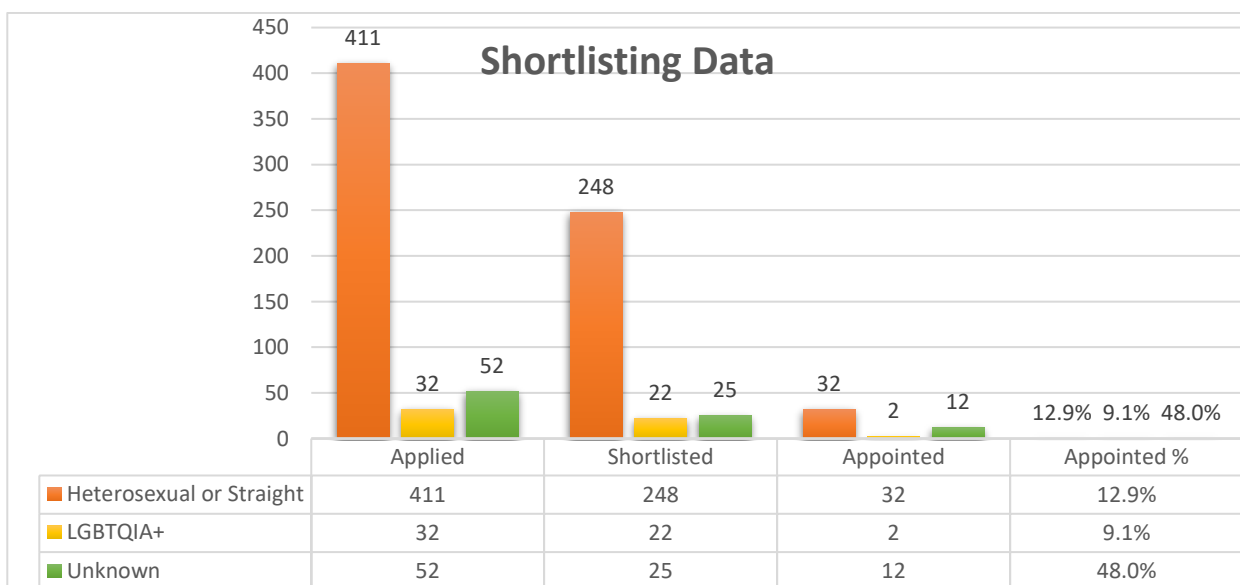**3.7.**   Overview of SEL ICB staff in clinical roles [Table 3]:

AfC band clusters	No. Heterosexual/ Straight	% of Heterosexual/ Straight	No. of LGBTQIA + staff	% of LGBTQIA + staff	No. of unknown staff	% of unknown staff	Total
Cluster 1: <1 to 4	0	0%	0	0%	0	0%	0
Cluster 2: 5 to 7	29	100%	0	0.0%	0	0%	29
Cluster 3: 8a and 8b	49	83.1%	3	5.1%	7	11.9%	59
Cluster 4: 8c to VSM	26	86.7%	2	6.7%	2	6.7%	30
Other	19	82.6%	2	8.7%	2	8.7%	23
Total	123	87.2%	7	5%	11	7.8%	141

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3.8. **Clinical staff:** Heterosexual/straight staff make up 87.2% of clinical roles, while LGBTQIA+ staff represent 5%, this is a 0.4% underrepresentation compared to the community we serve. Heterosexual/straight staff have higher representation on all bands.

3.9. In clinical roles, the higher percentage of undisclosed sexual orientations highlights that staff may be uncomfortable in sharing their sexual orientation.

4. Metric 2: Relative likelihood of LGBTQIA+ staff being appointed from shortlisting

4.1. **Shortlisting Data [Graph 2 and Table 4]:**

	Applied	Shortlisted	Appointed	Appointed %
Heterosexual or Straight	411	248	32	12.9%
LGBTQIA+	32	22	2	9.1%
Unknown	52	25	12	48.0%

4.2. **Overview:** Of shortlisted applicants, 12.9% of heterosexual/straight candidates were appointed, compared to 9.1% of LGBTQIA+ candidates, a statistically significant difference. However, only 32 applications (6.5%) were from LGBTQIA+ individuals, compared to 83% from heterosexual/straight applicants and 10.5% from unknown. This indicates a need to attract more LGBTQIA+ applicants.

4.3. **Likelihood:** The data is showing us that heterosexual/straight applicants are 1.4 times more likely to be appointed following shortlisting compared to LGBTQIA+ applicants.

4.4. **Note:** It should be noted that a relative likelihood of 1 indicates that there is no difference: i.e. non-disabled applicants are equally as likely of being appointed from shortlisting as disabled applicants.

4.5. Although the organisation has a close representation of the LGBTQIA+ community we serve, it should be trying to achieve parity within this section and should look to increase applications from the LGBTQIA+ Community.

5. Metric 3: Relative likelihood of LGBTQIA+ colleagues entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation.

5.1. No LGBTQIA+ staff have entered the formal disciplinary process in the last 2 years.

6. Metric 4: Relative likelihood of LGBTQIA+ colleagues accessing non-mandatory training and CPD.

6.1. SEL ICB currently does not have a process for tracking non-mandatory training completed by staff. However, there is a training interview panel in place for non-mandatory training requests over £500. Additionally, all staff have access to NHS Elect and NHS Leadership Academy courses.

7. Metric 5: Percentage of LGBTQIA+ colleagues who believe SEL ICB provide equal opportunities for progression or promotion.

7.1. National Staff Survey Data [Table 5]:

Sexual Orientation	SEL ICB
Heterosexual/Straight	52.6%
Gay or Lesbian	35.7%
Bisexual	27.3%
Other	-
Prefer not to say	42.4%

7.2. **Overview:** LGBTQ+ staff data reveals a significant disparity in the belief that the organisation provides equal opportunities for progression or promotion. Only 35.7% of gay or lesbian staff share this belief, compared to 52.6% of heterosexual/straight staff, a 16.9% gap. The difference is even greater at 25.3% when compared to bisexual staff.

7.3. Additionally, the 42.4% of colleagues chose to prefer not to say, which may indicate a lack of confidence in the perception of equal opportunities.

8. Metric 6: Percentage of LGBTQIA+ colleagues experiencing harassment, bullying or abuse from managers in last 12 months.

8.1.   National Staff Survey Data [Table 6]:

Sexual Orientation	SEL ICB
Heterosexual/Straight	13.1%
Gay or Lesbian	28.6%
Bisexual	9.1%
Other	-
Prefer not to say	15.6%

8.2.   **Overview:** LGBTQIA+ staff, particularly gay and lesbian employees, were 15.5% more likely to experience bullying from managers compared to their heterosexual/straight counterparts.

8.3.   More Heterosexual/straight staff experienced harassment, bullying or abuse from managers by 4% compared to bisexual staff. It should also be noted that there is a high percentage (15.6%) that chose to prefer not to say, which may indicate that some individuals may have experienced such issues but do not want to share.

9. Metric 7: Percentage of LGBTQIA+ colleagues experiencing harassment, bullying or abuse from colleagues in last 12 months.

9.1.   National Staff Survey Data [Table 7]:

Sexual Orientation	SEL ICB
Heterosexual/Straight	13.6%
Gay or Lesbian	28.6%
Bisexual	0%
Other	-
Prefer not to say	29%

9.2.   **Overview:** Gay or lesbian staff experienced more discrimination at work from colleagues by 15% compared heterosexual/straight staff. In contrast, Bisexual respondents reported no incidents of harassment, bullying, or abuse.
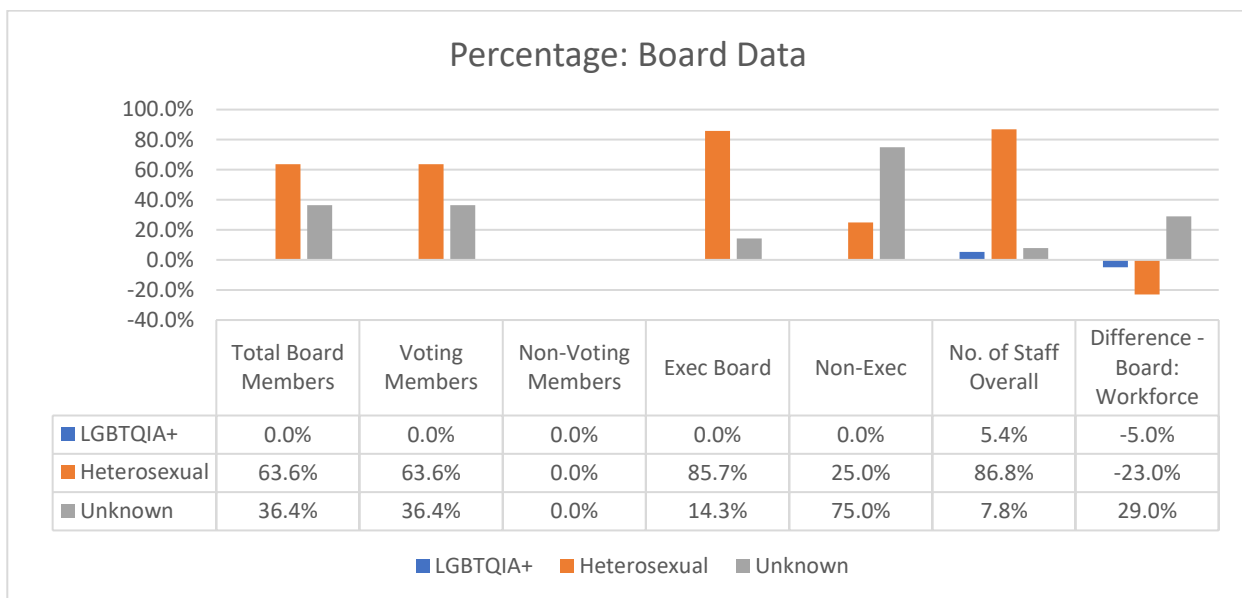
9.3.   It should be noted that there is a high number of staff who have chosen prefer not to say, which may suggest that some individuals may have experienced such issues but have chosen not to disclose their experience.

10. Metric 8: Percentage difference between the Board voting membership and overall LGBTQIA+ workforce.

10.1. Board Data [Table 8 and Graph 3]:

	LGBTQIA+	Heterosexual/straight	Unknown	Total
Total board members	0	7 (63.6%)	4 (36.4%)	11
Voting members	0	7 (63.6%)	4 (36.4%)	11
Non-voting	0	0	0	0
Exec board members	0	6 (85.7%)	1 (14.3%)	7
Non exec	0	1 (25%)	3 (75%)	4
No. of staff overall	37 (5,4%)	594 (86.8%)	53 (7.8%)	684 (100%)
Difference-Board: Workforce	**-5.00%**	**-23.00%**	**29.00%**	

	Total Board Members	Voting Members	Non-Voting Members	Exec Board	Non-Exec	No. of Staff Overall	Difference - Board: Workforce
LGBTQIA+	0.0%	0.0%	0.0%	0.0%	0.0%	5.4%	-5.0%
Heterosexual	63.6%	63.6%	0.0%	85.7%	25.0%	86.8%	-23.0%
Unknown	36.4%	36.4%	0.0%	14.3%	75.0%	7.8%	29.0%

10.2. Please note that the data above pertains to board members employed by the ICB, not the Partnership Board.

10.3. There are a total of 11 Board members: 63.6% are Heterosexual; 0% identify as LGBTQIA+ and 36.4% are Unknown. All Board members are voting members.

10.4. There are 7 executive members: 85.7% are Heterosexual and 14.3% are unknown.

10.5. The difference between LGBTQIA+ Board members and LGBTQIA+ staff (workforce) is (minus) -5%.

10.6. The difference between Heterosexual Board members and Heterosexual staff (workforce) is (minus) -23%.

11. Overview

Data from the 2023/2024 WSOES report shows that improvements are required in the following areas:

- LGBTQIA+ representation within higher Agenda for Change (AfC) and VSM bandings within clinical and non-clinical roles.
- Shortlisting and recruitment training – encouraging applications from the LGBTQIA+ population.
- Recording of non-mandatory training and CPD.
- Reducing discrimination, bullying, harassment and abuse experienced by staff.
- Providing equal opportunities for promotion and progression.
- LGBTQIA+ representation at Board and executive level.

12. Mitigating Actions

Metric	Theme	Action	Main lead	Review date
1 to 2	Recruitment and representation	Redesign the SEL ICB recruitment internet page layout to be more welcoming, user-friendly, and accessible, this will include: • A "What It Means to Work with Us" section highlighting values, mission, and staff experiences. • Videos showcasing staff at all levels within SEL ICB (i.e. regarding the reasonable adjustments we offer etc.) • Links to employee testimonials, benefits, and career growth opportunities. • Statement about why we are collecting equalities data/who can see it to encourage a higher disclosure rate.	Recruitment	November 2025
		Develop an Offline, Accessible Application Form for example a fillable PDF application form that's simple to read, complete, and submit.	Recruitment	November 2025
		Create Concise Job Descriptions by working with hiring managers to rewrite job descriptions to focus on essential duties, required qualifications, and key responsibilities	Recruitment	November 2025
		Develop and implement a process where applicants can request interview questions in advance.	Recruitment	November 2025
		Create a process for panel members' short biographies and headshots which are shared with candidates once interviews have been scheduled.	Recruitment	November 2025
		Select and train inclusion representatives to participate in interview panels, ensuring diverse perspectives are represented.	Recruitment	November 2025
		Design additional recruitment training sessions and explore the potential for "Train the Trainer" recruitment workshops (through Enact) to equip SEL ICB staff with the skills needed to carry out a fair and equitable recruitment processes.	OD	November 2025

5	Equality Opportunities and progression	Review 2024 staff survey data to understand colleague experiences and integrate findings into the OD plan for FY 25/26, following which further actions will be developed and updated in the next report.	OD	November 2025
6 to 7	Bullying and harassment	Revitalise the mediation service, including training more staff to become mediators	OD	November 2026
		Increase the number of trained Mental Health First Aiders.	OD	November 2025
		Design and deliver enhanced line management training.	OD	November 2025
		Refresh the appraisal process to ensure staff have an opportunity raise concerns.	OD	November 2025
		Create and implement a Sexual Safety Charter.	OD	November 2025
		Strengthen and actively promote the Speak Up process	HR	November 2025
	Support for staff	Develop and Deliver training on workplace adjustments and the Access to Work process.	EDI	November 2025
		Develop awareness raising sessions, through ad hoc events or the Equalities Forum	EDI	November 2025
		Develop and implement a formal workplace adjustments policy.	HR	November 2025
		Advertise ICS leadership training for SEL ICB staff.	OD	November 2025
		Create a rewards and recognition program to help staff feel valued.	OD	November 2026
		Participate in the development of the ICS conference and awards session.	EDI	March 2025
		Provide managers with templates to recognise colleagues' contributions.	OD	November 2026
		New ways of working: Integrate a "Wall of Praise" into meetings to celebrate achievements.	OD	November 2026
4	Recording non-mandatory training	The training request form will be digitised, with mandatory fields for demographic and diversity data to ensure accurate information capture.	OD	December 2024