



CLINICAL EXCELLENCE, QUALITY & SAFETY

Luton and Dunstable University Hospital

Annual Workforce Equality Information report

31st March 2016

1. Introduction

This report provides an overview of staff in post at Luton and Dunstable Hospital NHS Trust at the 31st March 2016 and helps to evaluate the Trust's performance in terms of Equality, Diversity and Human Rights. The report seeks to highlight any disparities such as indication of under-representation or potential unfair treatment to staff in relation to their individual characteristics such as age, gender, sexual orientation, ethnicity, transgender or belief.

Capturing this Equality Information helps support the Trust's management in considering and making informed decisions about potential future action needed for improvements in fairly and equitably managing its workforce. Also, this data collection and analysis is statutorily required under the Equality Act 2010, (Public Sector Equality Duty PSED) and for the NHS Equality Delivery System which supports delivery and compliance.

The data utilised was obtained from the Employee Staff Record (ESR). If numbers are small or insignificant these have been amalgamated to maintain staff anonymity or confidentiality.

2. Summary

Total Employees – At March 31st 2016, the Trust employed 3813 staff (which is a reduction in 67 staff or by 1.72% compared to staff in post at March 31st 2015).

- **Gender** - of the 3813 staff, 3099 are female (81.3%) and 714 are male (18.7%). This is an increase in the ratio of females from last year's data by 1.66% female and it is 6.3% above the NHS National average female ratio of 75%.
- **Age** – In 2016, the majority of staff (37%) continue to be in the 30 to 44 age band which is slightly higher than resident community's average age at 34.9%. The next largest group is the under 30's (22.5%) which means circa 60% of the workforce are under 44.

Between 2015 and 2016 there is a slight increase in staff aged over 50-54 in the workforce to 13.5% (0.8%) and over 55 to 14.8% (2%). These over-50 groups have shifted from being 25.41% to 28.3% of the workforce. This is a sizeable amount of staff close to or who may potentially be considering their future work-life plans such as if they would like to continue as they are, or desire to work more flexibly or less hours, or are considering retirement.

- **Disability** – The staff declaration of disability is very low at 1.6%. Both in 2015 and 2016 just over 50% of staff had not declared whether they are disabled or not. This prevents the Trust from having an accurate picture of disability in the workforce and, as for the NHS nationally, there is need to undertake initiatives and actions to both secure confidence in, and to attain a much improved percentage of declaration. This will ensure the monitoring and application of fairer treatment such as reasonable adjustment.
- **Ethnicity** – There is very little variation between the ratios of the March 2015 and 2016 data where just over 50% of the workforce are White British (50.17%) with over a third from BME communities (37.69%) and White other (9.65%). Only (2.49%) did not state their ethnicity. This indicates more confidence in disclosing their ethnic origin than disclosing belief or sexual orientation, which is common. This year we are more conscious of the Workforce Race Equality Standard (WRES) criteria which measures BME to White and so this ratio is 37.69%: 59.82%.
- **Religion or Belief** - In 2015, a significant number of staff (41.21%) have not disclosed their belief or non-belief. In 2016, this has improved slightly to 37.06% (by 4.15%) but it is

still the case that the figures cannot realistically be used for workforce analysis or be compared to the population profile. The largest declared religion is Christianity at 42%.

- **Sexual Orientation** - In 2015 41.48% of staff had not declared their sexual orientation. In 2016, this has reduced to 36.95% showing a slight improvement of 4.53%. The heterosexual ratio is 61.97% and LGBT is 1.08%, both slightly higher than in 2015's data. This holds a comparable lack of declaration and improvement statistic to Religion / belief. In both categories improved declaration levels are needed including improving how information is collected.
- **Pregnancy & Maternity** – In March 2015, 3.01% of the female workforce were on maternity leave. In 2016 this doubled to 6.65% and 206 employees on maternity leave.
- **Workforce by Marriage or Civil Partnership** – for partner / no partner status, the protected characteristic is marriage or civil partnership. In 2015, out of 3880 staff, 2,150 stated that they were married and 4 in a civil partnership. In 2016, out of 3813 staff, the number of married staff has declined by 124 whilst staff in a civil partnership increased to 10. Those in marriage remain the largest staff group at 53% with the second largest group being single at 35%.
- **Disciplinary** – In the last year ending in March 2015 there were 24 disciplinaries with a female to male ratio of 70.8%: 29.2%. With a total staff female to male ratio of 79.6%: 20.4%, this showed a 9.2% less favourable result for male. However results in year ending March 2016 have improved with 38% less disciplinaries than in 2015 (15) and a female to male ratio of 80%:20% which is more comparable to the total female to male ratio of 81%: 19% with a 1% less favourable result for male.

For ethnicity in year ending March 2016, the ratios were White 66.6%: BME 33.3% which is an improved proportion of BME compared with 2015 result. For ethnicity in 2016, the ratios were White 66.6%: BME 33.3% which is an improved proportion of BME compared with 2015 result.

3. General comments and recommendations

The Trust has collected, recorded and tracked data for a number of protected characteristics from staff or job applicants on ESR and had added new areas to the report this year.

General Recommendations

A significant piece of work is needed to reduce the level of unknown or undeclared returns by staff, across disability, religion or belief and sexual orientation. This is not uncommon nationally, as people find these sensitive to declare. However, appropriate staff engagement and communications will help in gaining staff confidence in declaring and will gradually reduce this lack of declaration over time.

Recommendations

Gender profile – The high total ratio of females at 81.3%, coupled with the fact that this ratio has increased by 1.66% from 2015's data, and is 6.3% above the NHS National average female ratio of 75%, indicates improvements are needed to the male ratio.

It would be realistic to aim initially to reflect the NHS average of 75% and then to improve on that. Societal drivers behind gender related career choices will influence this result for the Trust and the NHS and so reaching the local population gender ratio (50:50) is not realistic.

The Trust works to promote its careers and vacancies without gender bias and will explore further the disproportionate reduction in the numbers of male employees in nursing and midwifery this year, and the lack of male students and consider initiatives for improvements.

Age Profile - Age bands should match NHS England bands for accurate benchmarking. Also as the national workforce moves into 5 generations of staff in the work place who are known to have very different outlooks on work and life balance, the age bands should be broadened to capture this age range (such as capturing data in the 25-29, 20-24, under 20's, 55-59, 60-64, 65 plus age bands).

With people generally living and working longer there is a sizeable, growing percentage of the workforce reaching or in the higher age brackets who are close to or may potentially be considering their future work-life plans such as if they would like to continue as they are, or desire to work differently, more flexibly or less hours, or are considering retirement. There has been a 3% increase in the over 50 group to 28.3% of the workforce since last year.

Review of the options and flexibility offered e.g. around caring needs, partial retirement or part time working and the management of this e.g. in developing any supportive working arrangements and succession planning could be opportune. It is also known that younger generations in the workforce value work life balance and flexibility and so it may improve future satisfaction, wellbeing and retention by enabling ability to meet work and life demands.

Disability - The Trust, as for the NHS nationally, need to undertake initiatives and actions to both secure confidence in declaration and to attain a much improved percentage of declaration across the workforce. Across the NHS there is a level of discrepancy in the National Staff Survey declaration compared to National Electronic Staff Records ESR which suggests that the national level of disability across the NHS workforce could be as much as 17% from the results in the former as opposed to 3% in the records of the latter. The NHS staff survey is confidential and the ESR declaration of disability is at appointment and generally not updated.

Recruitment and Selection – the Trust is generally quite an ‘attractive’ employer for a wide number of diverse, prospective employees as shown by the healthy level of applications. As part of the WRES return this year the Trust is looking at the level of appointments from BME groups compared to the applicant pool and short listing to ensure that any unfair or unwitting treatment in the recruitment process is identified and minimised.

Communications – to improve the level of ‘buy in’ and understanding by staff, of the benefits of a diverse, leading employer being able to understand and utilise characteristic information, to help address any unfair outcomes in line with the **Equality Delivery System** and the Trust’s **Equality Objectives**.

Leavers – The Trust has looked further into reasons for leaving and added more categories to the voluntary resignation section to better understand this. There is still the category of Voluntary resignation / other reasons to address as this indicates that there is still a number of leavers with unknown reasons for leaving.

THE DETAILED REPORT FOLLOWS;

4. Workforce Profile

At 31st March 2016 the Trust employed 3813 staff of which the ratio of female to male is 81%:19%. This is a decrease in 67 staff from the 3880 staff employed in March 2015 with an increase in the female ratio from the 79.6%: 20.4% male in 2015. There were 989 leavers of which 22% were TUPE transfers.

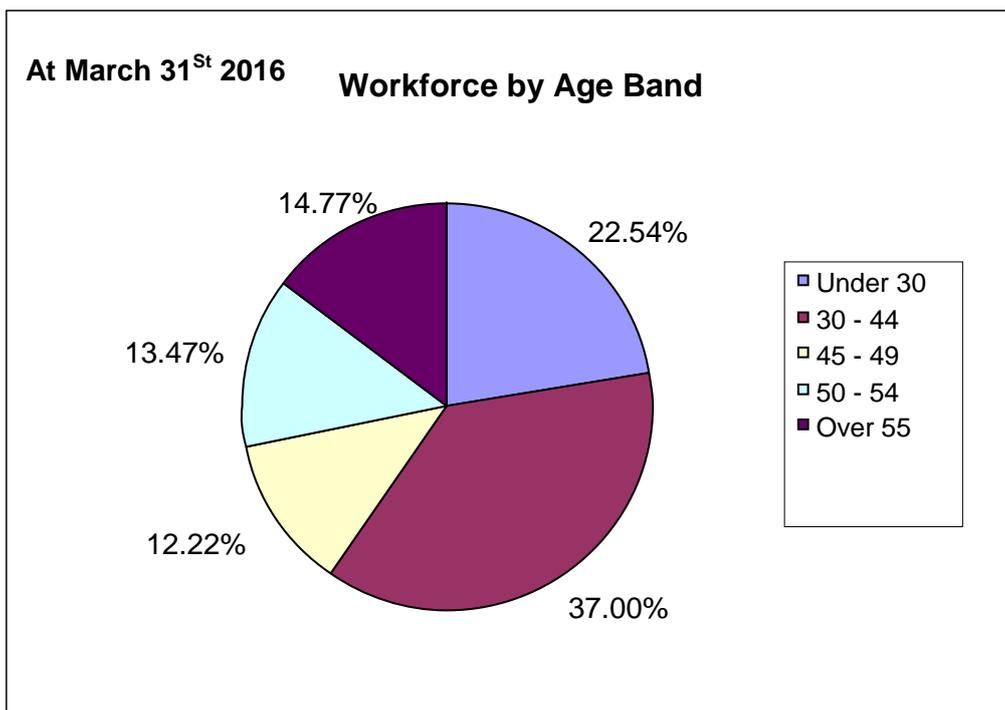
4.1 Workforce by Age band

As for 2015, in 2016, the majority of Trust staff (37%) fall within the 30 to 44 age band, followed by the under 30's (22.5%) which means circa 60% of the workforce are under 44. This is close to, but higher than the resident community's average age at 34.9%.

Workforce by Age at the 31 st March in 2015 and 2016			
	2015	2016	Difference
Under 30	22.6%	22.5%	-0.1%
Age 30-44	38.5%	37.0%	-1.5%
Age 45-49	13.5%	12.2%	-1.3%
Age 50-54	12.6%	13.5%	0.8%
Over 55	12.8%	14.8%	2.0%
	100.0%	100.0%	

Between March 2015 and March 2016 there is a slight increase in staff aged over 50-54 (0.8%) and over 55 at (2%). These over 50 groups have shifted from being 25.41% to 28.3% of the workforce. This is a sizeable percentage of staff who may potentially be considering their future work-life plans such as if they would like to continue as they are, or desire to work more flexibly or less hours, or are considering retirement.

The age bands should be the same as for NHS England to enable ready benchmarking. Also as the working world moves into 5 generations of staff in the work place with a different outlook on work and work life balance, the age bands should be broadened to capture this. (For instance, capturing the age bands 25 to 29, 20-24 and under 20's - Also the 55-59, 60-64, 65 and over age bands).



4.2 Gender by Staff Group - In 2015 and 2016 female staff are in the majority across most staff groups, apart from Estates and Facilities, and Medical and Dental staff. The ratio of Female to Male in 2015 was 79.6%: 20.4% and in 2016 was 81%:19%.

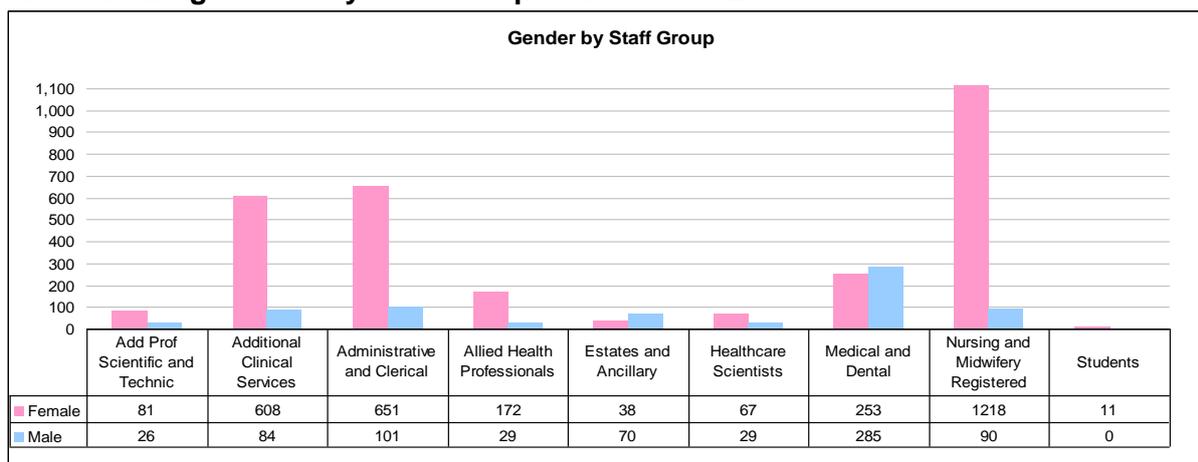
This level of difference between female and male employees is high. This is an NHS national phenomena and the NHS national average ratio for this is 75%.

There are societal drivers behind gender related career choices which will influence this result for the Trust and the NHS. However, the Trust works to promote its careers and vacancies without gender bias.

It has been noted from this year's data that there has been a disproportionate reduction in the numbers of male employees in Nursing and midwifery and also that there are no male students which will be explored further and explained.

2016 Workforce Report - Workforce by Gender and Staff Group						
	March 31st 2015		March 31st 2016		Change in numbers	
	Female	Male	Female	male	Female	male
Add Professional Scientific and Technical	80	25	81	26	1	1
Add Clinical services	556	77	608	94	52	17
Admin and Clerical	625	98	651	101	26	3
Allied Health professionals	156	23	172	29	16	6
Estates and ancillary	150	155	38	70	-112	-85
Health care scientists	62	31	67	29	5	-2
Medical and dental	239	281	253	285	14	4
Nursing /Midwife Registered	1212	100	1218	90	6	-10
Students	10	0	11	0	1	0
Total staff by gender by year	3090	790	3099	724	9	-66
Total staff by year	3880		3823			
Percentage by gender	79.6%	20.4%	81%	19%		

Chart showing Gender by Staff Group at March 31st 2016



4.3 Gender pay gap

As for 2015, the results are reflective of the national NHS and Trust staff profile of having a majority of female staff across most staff groups.

Senior Grades Bands 7 to 9

The number of staff in these senior grades was 486 in 2015 and 530 in 2016. With regard to the Trusts total female to male ratio for 2016 of 81%:19% respectively, the overall representation of female to male across senior roles in Band 7 to Band 9 was 84.3%. This has some stasis as in 2015 this was 84.1%.

However, only 3 bands show proportional representation which are Bands 7 and 8a which match and exceed this at 89.8% and 82.43% respectively. Also Band 8d has close proportional representation at 80% which is a different result from 2015 due to a 13.5% increase in female representation at this level.

In the remaining Bands representation is from between 71% to 50% which is disproportional to the total of females employed of 81%.

Gender Pay Gap 2016 – Bands 7-9

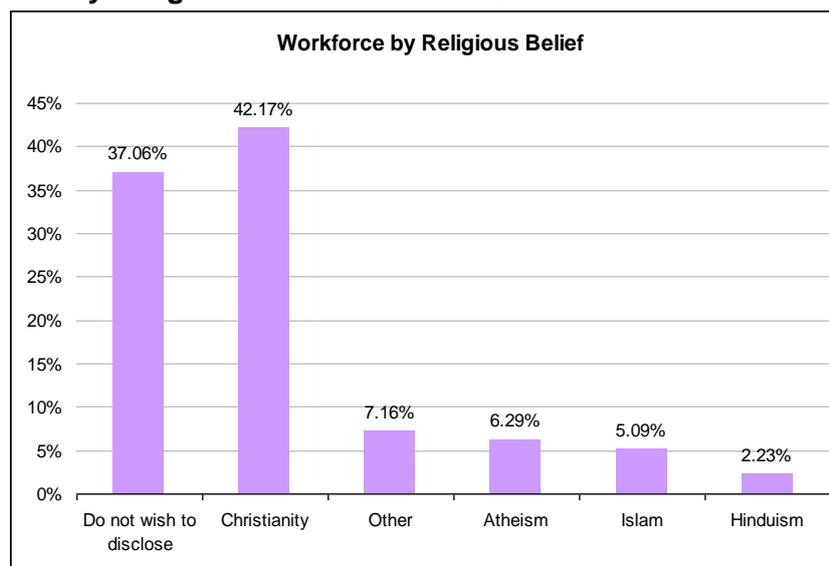
Gender Pay Gap 2016 – Bands 7-9 -				As of 31 st March 2016 -			
AFC Band	Staff numbers by gender 2016			% of females 2016	% of females 2015	% change 2015 – 2016	Male % in 2016
	Female	Male	Total				
Band 7	328	45	373	87.94%	89.28%	-1.34%	12.1%
Band 8a	70	13	83	84.34%	82.43%	1.91%	15.7%
Band 8b	27	11	38	71.05%	58.97%	12.1%	29%
Band 8c	11	9	20	55.00%	57.14%	-2.1%	45%
Band 8d	8	2	10	80.00%	66.67%	13.3%	20%
Band 9	3	3	6	50.00%	60.00%	-10.0%	50%
Grand Total	447	83	530	84.34%	84.16%		

4.4 Workforce by Religious Belief

In 2015, a significant number of staff (41.21%) had not disclosed their religious belief or non-belief. In 2016, this has improved slightly to 37.06% (by 4.15%) but it is still the case that the figures cannot realistically be compared to the population profile.

2016 Workforce by Religion - Belief - Non Belief			
Declaration	March 31 st 2015	March 31 st 2016	Variation
Not disclosed	41.21%	37.06%	-4.15%
Christianity	40.23%	42.17%	1.94%
Other	6.66%	7.16%	0.50%
Atheism	5.10%	6.29%	1.19%
Islam	4.64%	5.09%	0.45%
Hinduism	2.16%	2.23%	0.07%
	100.00%	100.00%	

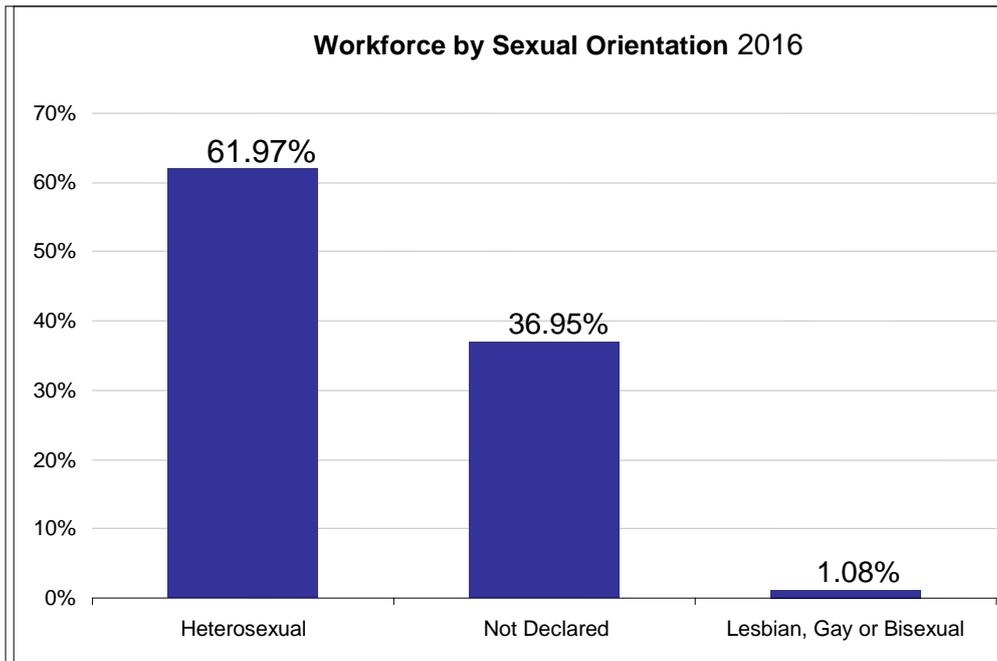
Workforce by Religion or Belief at March 31st 2016



4.5 Workforce by Sexual Orientation

At March 31st 2015, 41.48% of staff had not declared their sexual orientation. At March 31st 2016 the figure is 36.95% and so there is a slight improvement of 4.53%. This is a similar lack of declaration and improvement statistic to Religion or belief but in both categories improvements to the declaration level are needed including improving how this information is collected.

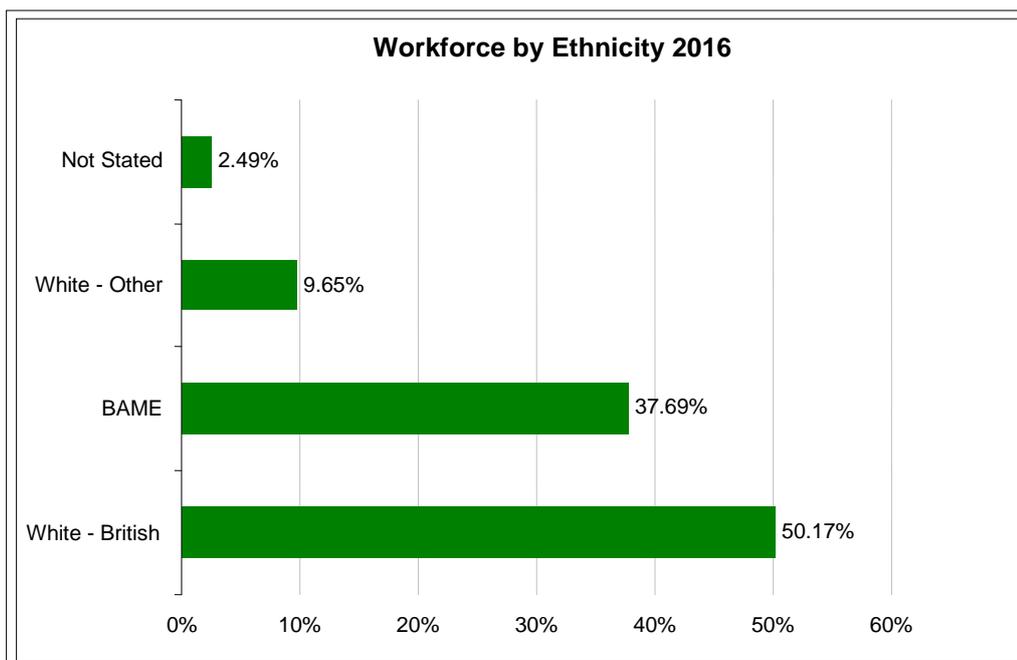
2016 Workforce by Sexual Orientation			
Declaration	March 2015	March 2016	Variation
Heterosexual	57.52%	61.97%	4.45%
Not Declared	41.48%	36.95%	-4.53%
LGBT	1.00%	1.08%	0.08%
	100.00%	100.00%	



4.6 Workforce by Ethnicity

In 2016 a small percentage of staff have not declared their ethnicity, 2.49%, which is an improvement on last year's figure of 3.45%. This indicates that staff are more comfortable about disclosing their ethnic origin than religion, belief or sexual orientation. Just over 50% of the workforce is White British and over a third is BME.

Comparison 2015 - 2016 Workforce by Ethnicity			
Declaration	2015	2016	Variation
Not Declared	3.45%	2.49%	-0.96%
BME	37.71%	37.69%	-0.02%
White British	49.87%	50.17%	0.30%
White Other	8.97%	9.65%	0.68%
	100.00%	100.00%	



In the future the Trust needs to align ethnicity reporting to the Workforce Race Equality Standard WRES and NHS National Requirements so that when recording the proportion of Black and Ethnic Minorities BME and White British the definitions of BME and White are that:

- White” staff include White British, Irish and Any Other White
- Black and Minority Ethnic” includes all others except “unknown” or “not stated.”¹

Based on the data year and

March 31 st 2016 Workforce by Ethnicity			
Declaration	March 2015	March 2016	Variation
Not Declared	3.45%	2.49%	-0.96%
BME	37.71%	37.69%	-0.02%
White British	58.84%	59.82%	0.98%
	100.00%	100.00%	

this definition, below for last this year respectively is:

4.7 Nursing and Midwifery by Ethnicity

The nursing and midwifery workforce is a significant proportion of our frontline staff for patients, their carers or visitors. There is near stasis in this group between March 2015 and March 2016 apart from a 2.17% increase in White other. There is a slightly lower level of non declaration in March 2016 at 2.14%. Nearly 50% of these staff are

¹ These definitions meet the national reporting requirements Ethnic Category in the NHS data Model / Dictionary, and the Health and Social care Information Centre Data as based on the 2001 ONS Census categories for ethnicity. Any significant proportion of ‘not stated’ should be addressed – this may affect the reliability of data as small numbers may make a significant difference to outcomes. If groups are a significant minority and may be at risk of less favourable treatment this should be explored.

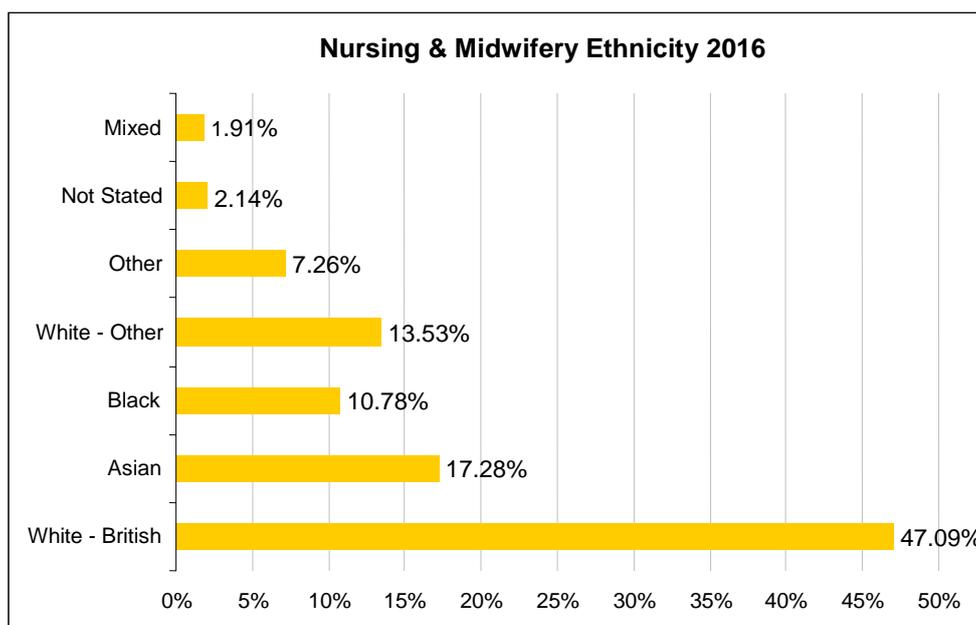
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White British with 37% declaring themselves as other than white of which 30% are BME.

Nursing and Midwifery by Ethnicity at March 31st 2016			
Declaration	March 2015	March 2016	Variation
Mixed	1.75%	1.91%	0.16%
Not stated	2.44%	2.14%	-0.30%
Other	8.00%	7.27%	-0.73%
White Other	11.36%	13.53%	2.17%
Black	11.43%	10.78%	-0.65%
Asian	17.92%	17.28%	-0.64%
White British	47.10%	47.09%	-0.01%
	100.00%	100.00%	

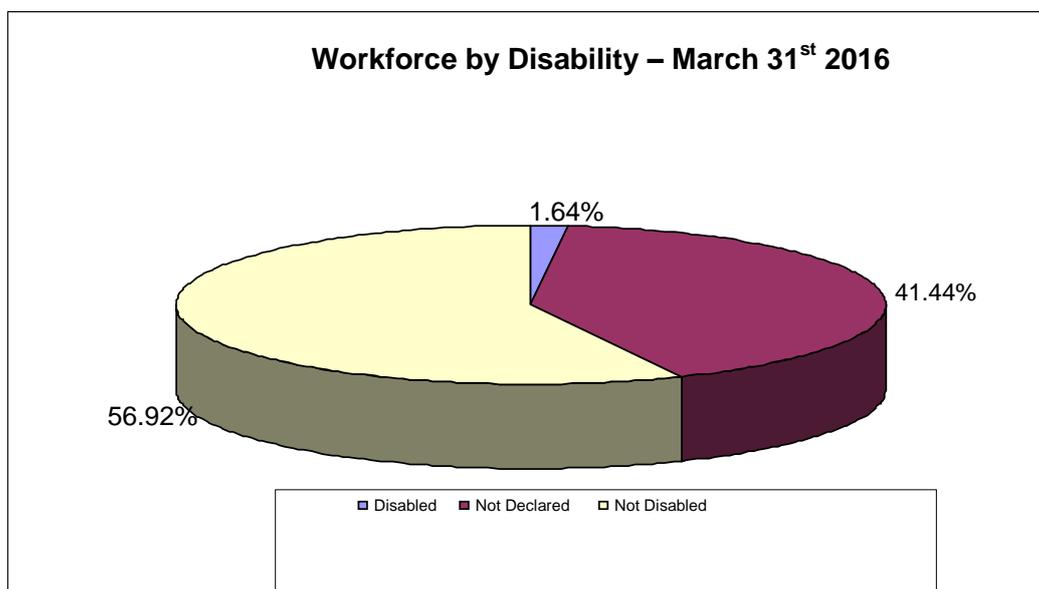
For the WRES which measures BME to White staff, the ratio is 37.24%: 60.26% which is low BME representation for a front line service.

Nursing and Midwifery by Ethnicity at 31st March 2016			
Declaration	2015	2016	Variation
BME	39.10%	37.24%	-1.86%
White	58.46%	60.62%	2.16%
Not stated	2.44%	2.14%	-0.30%
	100.00%	100.00%	



4.8 Workforce by Disability – At March 2015, 47.7% of staff had not declared if they are disabled or not, in 2016 non declaration has decreased by 6.3% to 41.4%. This level of non declaration does not give the Trust an accurate picture of disability within the workforce, or assist in detection of potential less favourable treatment or then handling of enabling initiatives such as reasonable adjustments.

Workforce by Disability at March 31 st 2016		
Status	2015	2016
Disabled	1.5%	1.6%
Not Disabled	50.8%	56.92%
Not declared	47.7%	41.4%
	100.0%	100.0%



4.9 Workforce by Marital Status

Marriage / Civil Partnership – The protected characteristic is marriage or civil partnership. Out of the total workforce at March 31st 2016 of 3813 staff, 53% were married and 0.37% were in a civil partnership. The second largest group is Single people who make up 35% of the workforce.

2016 Workforce by Marital status					
Declaration	2015	2015%	2016	2016	Variation
Civil partnership	4	0.10	14	0.37	10
Widowed	31	0.80	29	0.76	-2
Legally separated	49	1.26	47	1.23	-2
Unknown	134	3.45	200	5.24	66
Divorced	177	4.56	166	4.35	-11
Single	1335	34.41	1331	34.92	-4
Married	2150	55.41	2026	53.13	-124

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	3880	100.00	3813.00	100.00	

4.10 Workforce by Pregnancy and Maternity - As at 31st March 2015 there were 93 employees on maternity leave which was 3.01% of the female workforce. In March 2016, 206 employees were on maternity leave which amounts to 6.65% of the female workforce and is over double the amount of last year.

4.11 Discipline - In year ending March 2015 there were 24 disciplinaries with a female to male ratio of 70.8%: 29.2%. Compared to the total staff female to male ratio of 79.6%: 20.4%, this showed a 9.2% proportionally less favourable result for male. Results in March 2016 have improved results. There were 38% less disciplinaries than in 2015 (15 rather than 24) with female to male ratio of 80%:20% which is more comparable to the total female to male ratio of 81%: 19% with a 1% less favourable result for male.

For ethnicity in year ending March 2016, the discipline ratios were White 66.6%: BME 33.3% which is an improved proportion of BME compared with 2015 result.

4.12 Grievance - This year (year ending March 31st 2016) we have added Grievance to our data analysis which shows that in the year ending March 31st 2016, the complainant grievance ratio female to male was 100%: 0% with an ethnicity ratio white 60%: BME 40%. The small numbers of grievances (5) and the new addition of this data means that any further analysis is unwarranted.

4.12 Promotions

Promotions and ethnicity - In the year ending March 31st 2015, promotions by ethnicity were reported. In March 2016 we have looked at broader areas than ethnicity.

For Ethnicity – in year ending March 2015 from a total of 677 staff promotions 364 (53.7%) were categorised as White and 259 (38.2%) from BME and mixed heritage backgrounds. In 2016, from the 391 promotions the ratio of White to BME/ mixed ethnicity was 58.3%: 25.5%.

Promotions by Ethnic Origin Year ending March 31 st 2016	Total	%
White British	228	58.3%
White other	15	3.8%
BME	98	25.1%
Mixed	2	0.5%
Any other Ethnic Group	45	11.5%
Not stated	3	0.8%
	391	100%

In year ending March 2016, promotions by gender by female to male ratio were 89.3%: 10.7% which by the total ratio of female to male staff of 81%:19% shows a less favourable result for male of 8.3%. With male staff making up only 19% of staff in

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the Trust and only an average of 25% across the NHS, this coupled with disproportionate male leaver results warrants further exploration.

Promotions by Gender Year ending March 31 st 2016	Total	%
Female	349	89.3%
Male	42	10.7%
Grand Total	391	100%

Promotions by religious belief show that the highest declared religion across the Trust (42.17% - Christianity) is also the highest by promotion at 56.5%. However the level of non disclosure is high for this characteristic and this affects accurate analysis for this area.

Promotions by Religious Belief Year ending March 31 st 2016	Total	%	% All Trust Staff
Atheism	31	7.9%	6.29%
Christianity	221	56.5%	42.17%
do not wish to disclose	80	20.5%	37.06%
Islam	14	3.6%	5.09%
Other	45	11.5%	9.39%
Grand Total	391	100%	100%

Promotions by age show that these are much more likely to occur in the aged 30-44 age group followed by more likely to occur in the aged 45-49 age group.

Promotions by Age Band Year ending March 31 st 2016					
Age bands	Total	% of promotions	Workforce bands	% of the workforce	Variation in % of the workforce
Aged 22- 29	63	16.1%	Under 30	22.50%	-6.39%
Aged 30 - 34	68	17.4%	Age 30-44	37.00%	11.85%
Aged 35 -39	48	12.3%			
Aged 40 - 44	75	19.2%			
Aged 45 - 49	56	14.3%	Age 45-49	12.20%	2.12%
Aged 50 - 54	48	12.3%	Age 50-54	13.50%	-1.22%
Aged 55 - 59	20	5.1%	Over 55	14.80%	-6.36%
Aged 60 - 64	13	3.3%			

4.13 Starters

During 2015 there were 761 new starters to the Trust, in 2016 there were 831.

Starters by Staff Groups and by Ethnicity Year ending March 31st 2016							
Staff groups	Total	BME	% BME	White	% White	not stated	% not stated
Add Prof Scientific	16	11	1.32%	5	0.60%		0.00%
Additional clinical services	241	95	11.43%	143	17.21%	3	0.36%
Admin and Clerical	98	37	4.45%	61	7.34%		0.00%
Allied Health Professionals	40	16	1.93%	24	2.89%		0.00%
estates and ancillary	43	20	2.41%	23	2.77%		0.00%
Health care scientists	13	5	0.60%	8	0.96%		0.00%
Medical and dental	236	135	16.25%	74	8.90%	27	3.25%
Nursing Midwifery	138	38	4.57%	99	11.91%	1	0.12%
Students	6		0.00%	6	0.72%		0.00%
	831	357	42.96%	443	53.31%	31	3.73%

From the new starters, there was a 3.73% non declaration rate mainly from Medical and Dental staff. The ratio of BME to White in all starters was 42.96% to 53.31%

When compared to the BME: White ratio for the workforce in 2016 37.69%: 59.82% this is a better ratio to see in starters. However most of this increase is in Additional clinical services and medical and dental as opposed to Nursing and midwifery or admin and clerical.

4.14 Leavers

In 2016 there were 989 leavers who have been compared to the 629 leavers in 2015 and analysed by gender, race, and reasons for leaving.

Gender - during the year ending March 2015, there were 629 leavers with a female to male ratio of 71.8%: 28.2% which against the total staff female to male ratio of 79.6%: 20.4% showed an 8.2% less favourable result for male. In year ending March 2016, from the 989 leavers the ratio of female to male was 70.1%: 29.2% which against the total staff female to male ratio 81%:19% again shows a less favourable result for male.

Ethnicity – from the leavers in 2015 332 (52.8%) are classified as being White British and White Other and 276 (43.9%) from mixed heritage and BME categories. This was a disproportional result for mixed and BME leavers.

Looking at the reasons for leaving in 2015, the main reason for leaving at 26.59% was voluntary resignation / not known.

To explore unknown reasons for leaving and potentially the results for male or for Mixed / BME leavers, from October 2015 the Trust's starter and exit questionnaires process changed to help the Trust to understand better why staff / staff groups join

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and/or leave the organisation. As a result of this, more categories for voluntary resignation were added which give more known reasons for leaving in 2016 as can be seen in the chart below.

Compared Reasons for Leaving in Years ending March 31st 2015 and 2016		
Leaving reasons	% of all leavers 2014 -15	% of all Leavers 2015 - 16
Employee Transfer - TUPE		22.65%
End of Fixed Term Contract	21.82%	19.41%
Retirement Age	9.08%	4.85%
Voluntary Resignation - Relocation	13.85%	9.10%
Voluntary Resignation - Work Life Balance	7.48%	5.86%
Voluntary Resignation - Other/Not Known	26.59%	21.74%
Voluntary resignation other reasons	15.61%	
Voluntary Resignation - Promotion	New categories added October 2015 – reference right hand column total % across these in 2016 = 9.50%	4.95%
Voluntary Resignation - Child Dependants		1.72%
Voluntary Resignation - To undertake further education or training		1.52%
Voluntary Resignation - Better Reward Package		1.31%
TOTAL	94.43%	93.11%

From the chart above there is still the category of Voluntary Resignation other not known to be addressed which shows at 21.74%.

In 2016, 22.65% staff transferred out of the Trust by reason of TUPE Transfer. This is part of the 31.6% result for corporate division

Leavers by Division in year ending March 31st 2016		
Division	Total	%
Corporate	313	31.6%
Diagnostics, Therapeutics and Outpatients	98	9.9%
Medicine	238	24.1%
Surgery	214	21.6%
Women's & Children's	126	12.7%
Grand Total	989	100%