





The Christie Equality, Diversity and Inclusion Annual report 2024



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This report has been produced to provide assurance that The Christie is meeting its statutory, regulatory and contractual requirements. In addition, this report also outlines the additional activities that the Trust has undertaken during January to December 2024 to advance equality and protect Human Rights.



Executive summary

Our governance and leadership



The Trust Board are committed to bringing focus, energy and accountability to this work, ensuring that it is embedded in all parts of the Trust's activity. The Board also recognise that they must continue to pay attention to the evolving and emerging needs of our people, and role model compassionate and inclusive leadership in all that we do.

> Our approach to equality, diversity and inclusion demonstrates how important this is in everything we do. We want to create an environment where all staff and patients have equality of opportunity and oppose all forms of unlawful or unfair discrimination.

This report provides an update on the achievements, progress and developments in relation to the EDI (equality, diversity and inclusion) agenda at the Trust.

While we have made great progress this year there are still areas that we need to improve upon in 2025. We are committed to working

together as a Trust to address inequalities wherever they may arise and provide the best possible outcomes to both patients and staff.

The Christie provides cancer care across the following sites:

- Withington Salford
- Macclesfield Oldham
- We also deliver outpatient services and

cancer treatments at multiple sites across Greater Manchester and Cheshire.

The Trust is committed to demonstrate inclusive leadership for equality, diversity and inclusion creating organisational and system wide changes to improve equality outcomes for patients their families and carers, service users and staff.

The Trust's governance below is built on the principle of leadership and inclusion.

- Workforce assurance committee
- Senior management committee (formally the Management Board)
- Patient experience committee

The senior management committee oversees the implementation of the EDI delivery plan. Performance against our plan is provided to the workforce assurance committee. This also includes assurance that the Trust is meeting its statutory, regulatory and other EDI duties and commitments.

Changes were made to the governance structure for EDI during 2024 in recognition of progress made and more frequent EDI conversations at

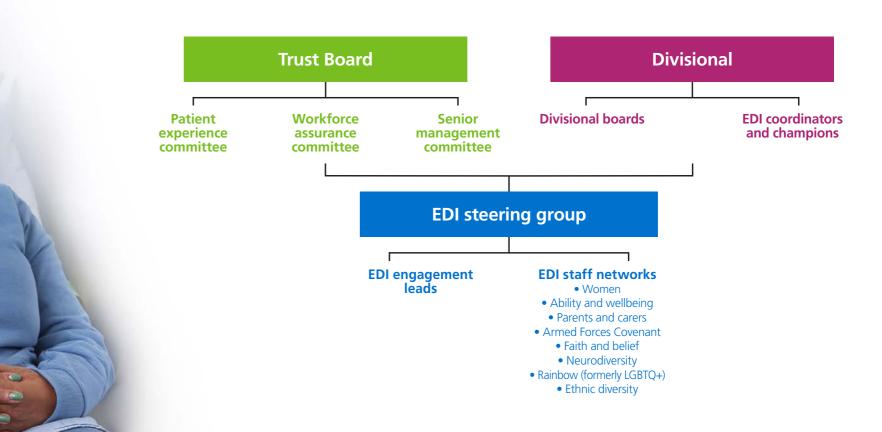
senior management committee. To remove governance duplication, the EDI programme board was disbanded in December 2023.

To ensure that our EDI staff networks have a place to escalate issues, an EDI steering group was created in June 2024, chaired by the EDI manager with secretariat support from the assistant EDI manager.

The purpose of the EDI steering group is:

- represent the voice of staff on EDI issues and provide a formal mechanism to raise issues or areas of concern
- to advocate on behalf of the EDI network groups
- to be consulted on strategic areas of work included in the inclusive culture strategy once launched in February 2025

Equality diversity and inclusion must be at the heart of our work.



Our governance and leadership (continued)

Our legal duties

Leadership development

Our Trust Board has nominated 8 executive sponsors to support our EDI staff network groups.

The Trust works in partnership with staff forum and staff side colleagues to consult, provide advice and support on key policy agendas that impact on staff across the organisation. Staff forum has been instrumental in leading on key policies, for example, our disability inclusion policy.

The Trust has a dedicated equality, diversity and inclusion team. The EDI team is based in the workforce division as part of the organisational development and engagement team.

A new EDI steering group was developed in June 2024 following a review and removal of the EDI programme board in November 2023. The EDI steering group is a staff led group to provide a voice and advocates for staff on EDI related

issues.

All divisions within the Trust have an EDI divisional implementation plan supported by the divisional leads and their EDI coordinator. Divisional leads report on the implementation of their plans to workforce committee and EDI coordinators submit regular reports to the EDI manager.

EDI champions have been nominated across divisions to support staff on EDI issues and raise any concerns to the EDI team or Freedom To Speak Up quardian.

Governors

The Trust has a partner governor on the council of governors from a national and Greater Manchester based charity, Can-Survive UK.

Can-Survive's mission is to provide culturally sensitive support services and information for, however not exclusive to, Black African, Black Caribbean and other culturally diverse communities living with or affected by cancer. This enables people to build confidence, resilience, and strength to overcome the challenges cancer brings.

The Trust also has governors representing their communities from all boroughs of GM





Under the General Duty The Christie is required to pay due regard to:

- eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act
- advance equality of opportunity between people who share a protected characteristic and those who do not
- foster good relations between people who share a protected characteristic and those who do not



The Specific Duty requires the Trust to:

- publish information on the performance of the General Duty (including information by protected characteristic) at least once per year
- set at least one equality objective as a minimum at least once
- publish information annually on its gender pay gap



Our equality, diversity and inclusion objectives

The NHS EDI improvement plan

Our EDI delivery plan aims to advance EDI at The Christie. It provides a framework to ensure the Trust meets its EDI aims, objectives and statutory duties. It incorporates actions arising from all our statutory reporting requirements listed below.

The EDI Delivery Plan identifies three strategic aims:

1



Workforce data and information

2



Governance, policy and decision making

3



Each aim has several underpinning objectives. The senior management committee monitors progress through the receipt of quarterly reports.

A new five-year inclusive culture strategy 2025 - 2030 led by the Board was consulted with key stakeholders and approved by the Trust Board in late 2024. The strategy will be launched in early 2025. Progress will be monitored by the senior management committee.

Published in **June 2023**, the NHS EDI improvement plan aims to improve equality, diversity and inclusion and to enhance the sense of belonging for NHS staff. It sets out six targeted high impact actions to address direct and indirect prejudice and discrimination, that exists through behaviour, policies, practices and cultures against certain groups and individuals across the workforce.

The six high impact actions are aligned to the annual Workforce Race Equality Standards (WRES), Workforce Disability Equality Standards (WDES) and the staff survey results.

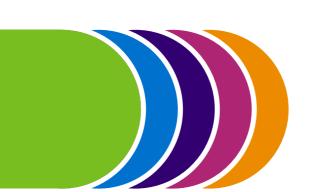
This plan aims to improve the outcomes, experience and culture for those with protected characteristics under the Equality Act 2010 (although it is not limited to these groups) and links to the NHS People Plan.

Ensuring our staff work in an environment where they feel they belong, can safely raise concerns, ask questions, and admit mistakes is essential for staff morale - which, in turn, leads to improved patient care and outcomes.

The six high impact actions were embedded into our EDI delivery plan July 2023 - October 2024 with oversight of the Trust Board.



Regulatory and contractual compliance



The Trust has several EDI requirements placed upon it through the NHS contract that it holds. These requirements include annual completion of the following:

- Workforce Disability Equality Standard (WDES) submission
- Workforce Race Equality Standard (WRES) submission
- Equality Delivery System 2022 (EDS) submission
- Gender pay gap (GPG) submission

We are also required to implement the NHS:

- Accessible Information Standard
- Veteran Aware accreditation
- Regional equality assurance framework (July 2024)

Workforce Race Equality Standard

The Trust submitted its Workforce Race Equality Standard (WRES) data in May 2024. The data sets out the profile of the workforce across the protected characteristics and the Trust's activities to advance equality amongst the workforce.

The WRES action plan 2023-2024 runs from November 2023 to October 2024. It was submitted to NHS England and published on the Trust website and Hive (our intranet) in October 2024.

Throughout 2024, quarterly progress reports on the WRES action plans were presented to the senior management committee.

The WRES North West regional report 2019-2024 provided a summary on our data submission which is benchmarked against other Trusts across the Greater Manchester region.

The area identified as best performance was:

 indicator 5: A reduction in incidents of harassment, bullying or abuse fr om patients, relatives or the public in the last 12 months against BAME staff.

The areas of improvement identified included the following:

- from the workforce data there are no representation of BAME staff in non-clinical roles from 8c to VSM.
- indicator 2: BAME staff are unlikely to be appointed following being shortlisted for a vacancy.

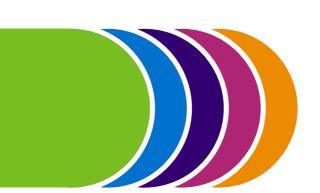
An action plan to address the areas of improvement is included in the WRES November 2024 - October 2025 action plan submitted to NHS England and the ICB (Integrated Care Board) on the 31 October 2024.

19.1% of our workforce are from a BAME background To show the Trust's progress during 2024, we have taken the metrics in the summary and compared data as of 1 January 2024 and 31 December 2024.

	WRES metric	Period start	Period end	
01	The percentage of BAME Workforce has increased.	January 2024 19.1%	December 2024 21.7%	Ø
02	The relative likelihood of White staff being appointed from shortlisting compared to BAME staff has increased . Ideally, the likelihood would be 1, indicating that White and BAME staff are equally likely to be appointed.	March 2024 x2.1	December 2024 x3.1	8
03	The relative likelihood of BAME staff entering the formal disciplinary process compared to White staff has decreased . However, due to the small numbers of disciplinary cases in the Trust, this metric can often vary significantly month on month.	January 2024 x4.6	December 2024 x1.1	Ø
05	The percentage of BAME staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months has decreased .	SS 2023 13.7%	SS 2024 9.6%	Ø
06	The percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months has decreased.	SS 2023 13.3%	SS 2024 11.6%	⊘
07	The percentage of BAME staff believing that their organisation provides equal opportunities for career progression or promotion has increased .	SS 2023 55.8%	SS 2024 61.6%	Ø
80	The percentage of BAME staff that have personally experienced discrimination at work from managers and colleagues in the previous 12 months has increased .	SS 2023 10.3%	SS 2024 11.9%	×
09	The difference between BAME staff representation in Board voting membership and in the workforce has increased . Ideally, the difference would be 0, indicating that the number of BAME board members are proportional to the workforce they represent.	January 2024 -3.1%	December 2024 -6.2%	×

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Regulatory and contractual compliance (continued)



Workforce Disability Equality Standard

The Workforce Disability Equality Standard (WDES) data was submitted to NHS England in May 2024.

The WRES action plan was submitted to NHS England and the ICB in October 2024 and is available on the Trust website.

Quarterly progress reports on the WDES action plans were presented to the senior management committee.

The WDES NW Regional report 2019-2024 provided a summary on our data submission which is benchmarked against other Trusts across the Greater Manchester region.

The area identified as best performance was:

• The data highlighted that from the workforce data that in non-clinical roles there was a good representation of disabled employees in 8c to VSM roles.

Areas for improvement were identified as the following:

- indicator 10 there was a lack of representation of disabled people on the Board
- indicator 5 that disabled employees did not feel that they had equal opportunity for career progression or promotion across the Trust
- indicator 4d that disabled employees were unlikely to report incidents of harassment, bullying and abuse in the workplace

An action plan to address the areas of improvement is included in the 2024-2025 action plan submitted to NHS England and the ICB on the 31 October 2024.

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6% of our workforce has reported that they have a disability

To show the Trust's progress during 2024 we have taken the metrics in the summary above and compared data as of 1 January 2024 and 31 December 2024.

	WRES metric	Period start	Period end	
01	The percentage of colleagues that have declared a disability has increased.	January 2024 6.7%	December 2024 7.3%	Ø
02	The likelihood of non-disabled staff being appointed from shortlisting compared to disabled staff has decreased .	March 2024 x1.2	December 2024 x0.7	×
03	The likelihood of disabled staff entering the formal capability process has decreased . There were no capability cases for colleagues with a disability in 2024.	January 2024 x1.7	December 2024 N/A	Ø
4 a	The percentage of Disabled staff reported experiencing harassment, bullying or abuse from patients and/or members of the public ¹ , from managers ² and from other colleagues ³ have increased .	SS 2023 111.0% 211.6% 317.8%	SS 2024 112.6% 212.8% 320.9%	8
4b	The percentage of disabled staff that stated that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it has decreased .	SS 2023 54%	SS 2024 51%	×
05	The percentage of disabled staff that believe that the Trust provides equal opportunities in career development has increased .	SS 2023 41%	SS 2024 54%	Ø
06	The percentage of disabled staff that reported that they have felt pressure from their manager to come to work despite not feeling well enough to perform their duties has increased .	SS 2023 15%	SS 2024 20%	×
07	The percentage of disabled staff that are satisfied with the extent to which their organisation values their work has increased .	SS 2023 39%	SS 2024 47%	②
80	The percentage of disabled staff that stated that their employers have made adequate adjustment(s) to enable them to carry out their work has decreased .	SS 2023 55%	SS 2024 53%	×
9a	The staff engagement score for disabled staff has increased .	SS 2023 6.8	SS 2024 7.2	•
10	The difference between disabled staff representation in Board voting membership and in the workforce has decreased .	SS 2023 -6.8%	SS 2024 -0.4%	

Equality and Health Inequality Analysis (EHIA)

The Trust is required to demonstrate how it pays due regard to the need to advance equality in its policies, decision making and the discharge of its functions in line with the Public Sector Equality Duty embedded in the Equality Act 2010.

> The equality and health inequality analysis process has gathered much momentum during 2024 following its launch in June 2023. The process is supported by the document ratification committee to ensure it is being followed.

During 2024, accountable committee chairs and deputies attended 1.5 hour EHIA workshops and staff a 3-hour workshop to increase awareness around impact on protected characteristic, social inclusion groups and health inequalities.

The Greater Manchester Integrated Care Board (GM ICB) have expressed interest in the Trust EHIA process and template and are in the process of developing a similar approach to ensure that there is consistency across the region.

The Equality Delivery System 2022

All NHS provider organisations are required to undertake a self assessment against the new Equality Delivery System (EDS) 2022 framework which addresses EDI performance in both workforce and service delivery. Our EDS 2022 submission was made to NHS England and the ICB in March 2024.

The framework has three domains which we self-assess ourselves against and then go through a period of stakeholder verification:

- domain 1 commissioned or provided services,
- domain 2 workforce health and wellbeing
- domain 3 inclusive leadership

Domain 1: commissioned or provided services

	outcome	score
1A	Patients (service users) have required levels of access to the service	2
1B	Individual patients (service users) health needs are met	2
1C	When patients (service users) use the service, they are free from harm	2
1D	Patients (service users) report positive experiences of the service	2
	Overall rating – achieving	8

Domain 2: workforce health and wellbeing

	outcome control of the control of th	score
2A	When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions	2
2B	When at work, staff are free from abuse, harassment, bullying and physical violence from any source	2
2C	Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source	2
2D	Staff recommend the organisation as a place to work and receive treatment	2
	Overall rating – achieving	8

Domain 3: Inclusive leadership

	outcome	scor	e
3A	Board members, system leaders (Band 9 and VSM (very senior managers) and those with line management responsibilities routinely demonstrate their understanding of, and commitment to, equality and health inequalities	2	
3B	Board/committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed	2	
3C	Board members and system leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients	2	
	Overall rating – achieving	6	

Scoring and rating criteria: 0 = Underdeveloped – under 8 1 = Developing – 8 - 21 2 = Achieving – 22 - 32 3 = Excelling - 33

Once all assessments had been completed, the overall ratings for the 3 domains were calculated together to give a total of 22 which means the Trust's overall EDS Organisational Rating is 'achieving'.

Much progress was made on our 2023 submission across all 3 domains. The foundation of domain 1 was to improve our equality data for patients across all services. This led to the development of a protected characteristic board and a revised patient registration form in consultation with patients.

In April 2024 an external audit was carried out by the auditors MIAA on the effectiveness of the EDS process. The outcome of the audit saw the Trust receive a Substantial assurance rating that indicated that 'there was a good system of internal control designed to meet the system objectives, and that controls are generally being applied consistently'.

An annual internal audit was completed in November 2024 to ensure that there was a robust equality assurance process in place.

The EDS 2022 working group allocates leads for each domain and provides support with the self- assessment and evidence gathering process, including engagement with key stakeholders to determine the final scoring and rating. The EDS submission for 2024 was approved by the senior management committee in March 2024. Quarterly progress reports are presented to the senior management committee to monitor the implementation of the action plan.

A copy of the EDS 2022 submission is available on the Trust website: equality-delivery-system-march-2024_final.pdf



Equality and Health Inequality Analysis (EHIA) (continued)



Equality delivery system domain 1 case studies

Susy Pramod, Lead Nurse for Tissue Viability, developed 'equitable care -addressing skin tone bias in wound care'.

Accurate skin assessment is key to pressure ulcer prevention. It has been shown that a lack of accurate assessment means that patients with dark skin tones are more likely to be diagnosed with higher-category pressure ulcers, leading to poorer outcomes (Oozageer Gunowa et al, 2017).

The Christie stands as one of Europe's largest cancer treatment centres. Given its diverse patient demographic, it is important for the staff to have the training and awareness to be able to provide optimal care for all and prevent potential patient harm for patients facing pressure ulcer risks.

The nurse training package was based around the best practice statement addressing skin tone bias in practice and use of the skin tone tool (Dhoonmoon et al, 2021).

The training highlighted the need to measure and document baseline skin tone as part of the aSSKINg bundle, with skin tone assessment included in ongoing patient aSSKINg bundle assessments and any changes in skin tone detected through skin inspection triggering repeat PURPOSE T pressure ulcer risk assessment.

Nursing Awards

FINALIST

To increase awareness of the skin tone assessment a presentation was delivered at the following institutions:

- round table conference with John Ashcroft (NHS) Impact) and Prof Bola Owolabi Director, National Healthcare Inequalities Improvement Programme).
- the national nurses and midwifery QI network.
- the South West region during Black History Month with support from Calvin Josephs (Assistant Clinical Quality and Improvement Director).

In 2024 Susy was a finalist at the Nursing Times



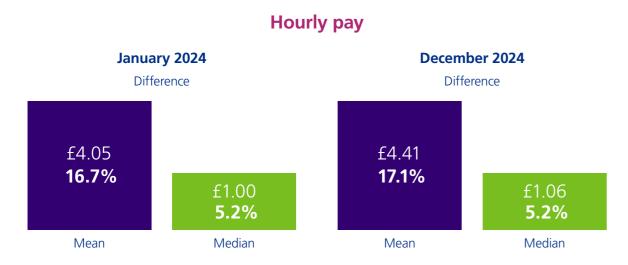


- 50+ people attended the engagement event
- 7 women attended the first sisters' group.
- 2 men attended the first brothers' group and volunteers will be recruited to Work in the community to increase attendance.
- Translation services are provided for visits at Maggie's.
- food for the first couple of sessions was provided by a local catering company for free.
- Increase engagement and promotion of



Gender pay gap

The Trust published its gender pay gap report in March 2024 and submitted this in line with national requirements.



The gap in average hourly pay between men and women has increased in 2024 by £0.36, leading to a difference in pay of £4.41 in December 2024. However, the median difference in pay has maintained.



The gap in average bonus pay between men and women has increased in 2024 by £987.91. The median for bonus pay is typically the same for both genders, as most bonus pay is a standard amount.

Ethnicity pay gap reporting

The ethnicity pay gap reporting (EPGR) was produced for the first time in June 2024 as part of our legal requirement under the Equality Act 2010. It is not a requirement for organisations to publish their EPGR to the government portal but this will be introduced shortly. The Trust will align the EPGR to the gender pay gap report in March 2025 and both will be published on the Trust website.

The table below summarises the hourly pay difference between White and black, Asian and minority ethnic (BAME) staff at the beginning and end of 2024.

Hourly	January 2024		December 2024	
	Mean	Mean	Mean	Mean
BAME	£22.02	£17.64	£22.02	£22.02
White	£21.56	£18.78	£21.56	£21.56
Gap	-£0.45	£1.14	£0.51	£2.00

In January, BAME staff were paid on average £0.45 per hour more than White staff. However, during the year the gap reversed, resulting in BAME staff being paid on average £0.51 less than White staff.

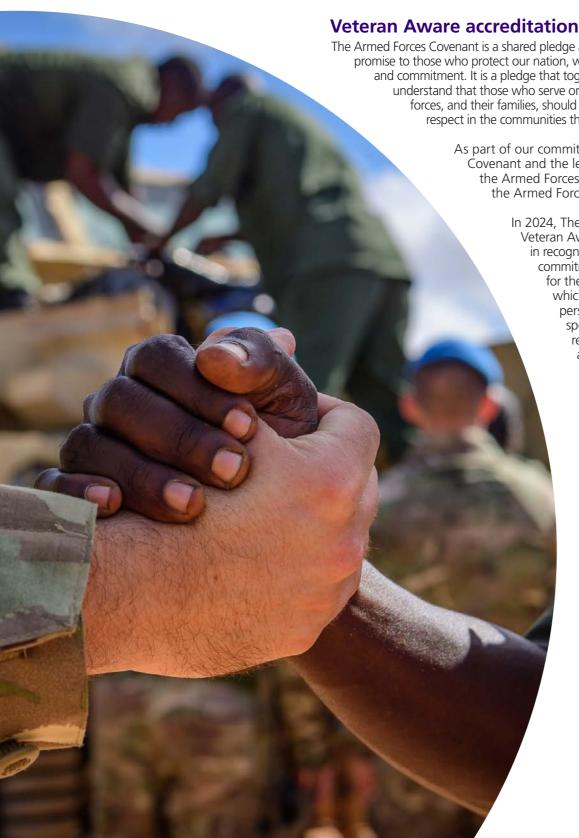
Bonus	January 2024 Mean Mean		December 2024	
			Mean	Mean
BAME	£6184.96	£4696.00	£10704.34	£7527.00
White	£6797.93	£4696.00	£10981.24	£7527.00
Gap	£612.97	£0.00	£276.90	£0.00

In January, BAME staff received on average £613 less in bonus pay than White staff. This gap has reduced over the year to £277. The median for bonus pay is typically the same for both ethnicities, as most bonus pay is a standard amount. An action plan to address these issues is currently being developed.

18 19

Veteran working group

Health inequalities



The Armed Forces Covenant is a shared pledge across organisations based on a promise to those who protect our nation, who do so with honour, courage, and commitment. It is a pledge that together we acknowledge and understand that those who serve or have served in the armed forces, and their families, should be treated with fairness and respect in the communities they serve with their lives.

> As part of our commitment to the Armed Forces Covenant and the legal requirement as part of the Armed Forces Bill 2021, the Trust signed the Armed Forces Covenant.

> > In 2024. The Christie was awarded NHS Veteran Aware silver accreditation status in recognition of our continued work and commitment to improving NHS care for the Armed Forces community which includes regular and reservist personnel, veterans, cadets, spouses and families. The Trust resubmitted its year one accreditation application, which was awarded in June 2024.

> > > To continue to embed and advance our work as part of the Veteran Aware standard and the Defence Employer Recognition Scheme, the veteran working group monitors the implementation of the action plan and submission for accreditation and provides quarterly reports to the senior management committee.





Research shows that the main drivers of health inequalities are social determinants i.e. where people live, access to employment and start in life (Bibby, 2018). There is also increasing evidence that the health inequalities divide can be further exacerbated by the way health services are designed, delivered, funded and the quality of care they receive (NHS Providers, 2024).

NHS Providers (2024) recommend that services can address health inequalities by:

- ensuring fair access, experience, and outcomes across different groups in the population
- acting as an anchor institution to support work on the wider determinants of health (NHS Providers, 2023a)

Reducing health inequalities has been a key strategic priority for the Trust with 'The Christie at' sites developed to deliver treatments closer to home and enable treatments to be more accessible. This strategic commitment has continued as demonstrated by the 4 pillars of our current strategy each having reducing health inequalities embedded.

The Trust's recently developed health inequalities dashboard suggests that 35% of The Christie patients live in the most deprived areas of Greater Manchester and are therefore at risk of significant health inequalities and worse cancer outcomes.

There has been recent guidance by NHS Providers to help Trusts to meet the obligations to reduce health inequalities. The Trust has completed the NHS Providers self-assessment tool to measure where the organisation is against these recommendations and highlight areas for development.

Results of the self-assessment shows that the Trust has a firm basis on which to address health inequalities including the following key areas of work:

- in-house development of comprehensive EHIA tool
- social value work including, community engagement to develop and design of services, local recruitment partnerships, 10-20% social value weighting in all contacts, environmental sustainability programme
- working across the GM system as key contributors in population health and GM Anchors committees

A development plan has been developed for reducing health inequalities which focuses on three key areas:

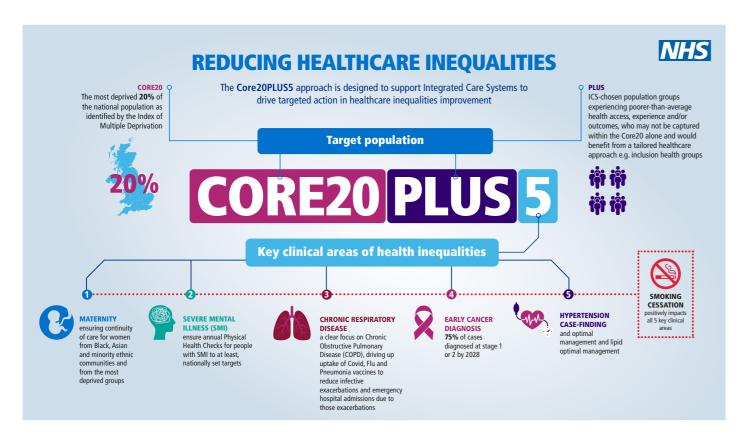
- further development of the health inequalities dashboard including data analysis and embedding into operational planning
- embedding use of EHIA as core business
- building public health capacity

Reducing health inequalities has been a key strategic priority for the Trust with 'The Christie at' sites developed to deliver treatments closer to home and enable treatments to be more accessible.

Health inequalities (continued)

Our workforce

Core20plus5 ambassadors programme



Over 600 Core20plus5 health inequalities ambassadors (Cohort 3: November 2024 -November 2025) have been recruited across the UK, with 3 in our Trust. They will be working within the NHS and wider systems and are committed to narrowing healthcare inequalities and ensuring equitable access, excellent experience, and optimal outcomes for all. The Core20PLUS populations who are more likely to experience healthcare inequalities include people living in areas of high deprivation, ethnic minority communities and inclusion health groups.

Ambassadors will be supported to enhance their knowledge, skills and insights to tackle healthcare inequalities and form local, regional and national networks with others who seek to improve healthcare inequalities. They will be offered platforms to actively develop their influencing skills and network to champion healthcare inequality improvement and will form an expert reference group for regional and national bodies seeking to narrow healthcare inequalities.

The ambassadors will be required to work on developing specific health inequality improvement project for their organisations or in collaboration with other NHS providers and communities to ensure that this is embedded into the organisations work.

It is expected that the healthcare inequalities improvement project will be presented in November 2025 as posters at future ambassadors events.

Our aim is, "for a representative and supported workforce". We will be an employer of choice that recruits and develops staff fairly taking appropriate action whenever necessary, so that talented people choose to join, remain and develop within the Trust. Strong equality, diversity and inclusion at all levels will underpin consistently good patient care across all services.



Workforce equality profile

The workforce equality profile from 2024 provides an overview of the Trust workforce. and is available on the Trust website. This information will be reviewed annually to ensure that the diversity of the workforce is captured and monitored.

This supports our compliance with the Public Sector Equality Duty requirements.

The annual workforce profile is information on the equality characteristics of the staff employed by the Trust.

The information that is presented on the Trust's workforce covers:

- composition of the workforce
- composition of the workforce by pay band or grade It is published once per year covering the period of an operational year (April to March)

This report relates to the period January to December 2024. The workforce profile is produced to:

- understand what the diversity of The Christie's workforce looks like
- monitor the effectiveness of our equality, diversity and inclusion policies and processes in relation to the workforce
- to help us to make improvements in our employment policies and practices to ensure all staff have equal opportunities to employment, development and a good employment experience
- comply with our legal duties in relation to the Public Sector Equality Duty, under the Equality Act 2010. All of the information contained in this report is taken from the Trust electronic staff record (ESR) system

Staff provide this information to the Trust on appointment and staff can update the information themselves or have the information updated on their behalf with their permission.



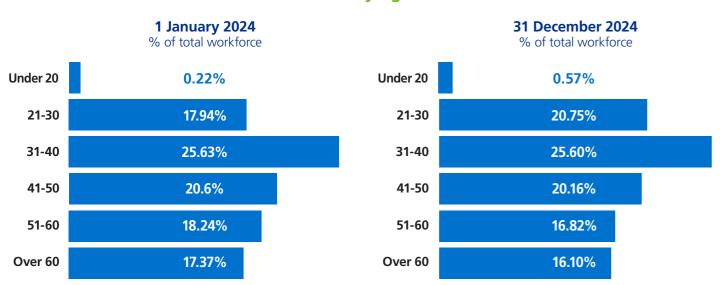
Our workforce (continued)

Overview and analysis of our workforce data

Age

The majority of the Trust's workforce (over 67%) are between 21-50 years of age. 25.6% of the Trust's workforce are 31-40. The least represented age is Under 20 (0.57%) followed by Over 66 (16.10%).

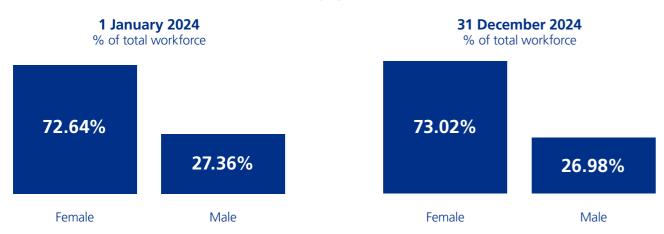
Workforce by age band



Gender

The Trust has a predominately female workforce (73.02%). Males make up 26.98% of the workforce. This is a typical employment pattern within the NHS. The split for full time staff is 67.97% female to 32.03% male, compared to 87.64% female in part time employment to 12.36% male in part time employment.

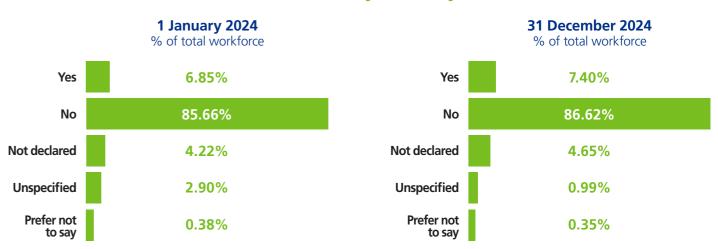
Workforce by gender



Disability

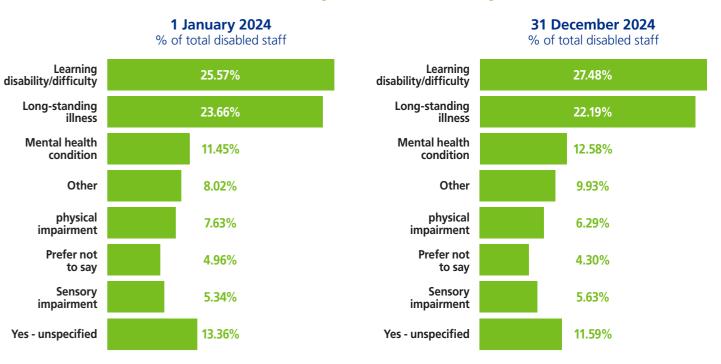
The data shows that 4.65% of the workforce have "not declared" their disability status. 7.4% of staff have declared that they have a disability, and 0.99% have not specified whether they have a disability (declined to provide the information).

Workforce by disability



27.48% of those who declared a disability stated, "learning disability/difficulty" as the nature of disability and 22.19% stated "long standing illness". 11.59% did not specify the nature of their disability.

Workforce by nature of disability



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Our workforce (continued)

Ethnicity

The data shows that 3.49% of staff have not provided their ethnicity data. In the Trust, 10.39% of staff are Asian/Asian British; 6.16% are Black/Black British, and 74.94% are White.

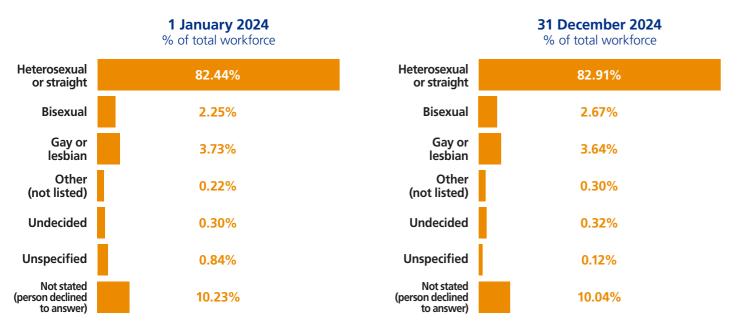
Workforce by ethnicity



Sexual orientation

The data shows that 10.04% of staff have not disclosed their sexual orientation. 82.83% of staff are heterosexual/straight and 6.6% are bisexual, gay or lesbian, or another sexual orientation.

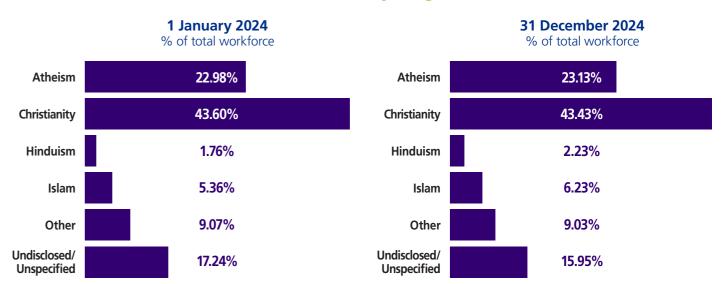
Workforce by sexual orientation



Religious belief

The data shows that 16.1% of staff have not disclosed their religious belief. 60.81% of staff have declared a religious belief, and 23.05% of staff are atheist.

Workforce by religious belief



Armed Forces community

During 2024 The Christie commenced gathering data on veteran status and is dedicated to being veteran aware, and to improving care for staff who are members of the Armed Forces community, military veterans, reservists, cadets, volunteers, and their families.



Our patients

The Trust will create a culture based on positive attitudes towards welcoming the diversity of patients, their families and carers that meets the diverse needs. The Trust will continually improve by embedding inclusion principles and standards into everyday practice and placing them at the heart of policy and planning.



Demographic data is predominantly generated

from the patient registration form provided to

Our patients (continued)

Health and wellbeing



One of the areas of work that the Trust will focus on is to ensure that the diversity of those responding to surveys reflects the patient population of the Trust.

Patient experience

The year 2024 has been busy, seeing new ward developments, further expansion of 'The Christie at' sites and continued positive patient experience reported.

Wards 14 and 15

In 2024, two new wards on the Withington site, wards 14 and 15 were opened. These modern, spacious wards have been built with patients and staff in mind, as they have increased the area around the bed spaces and there are only a maximum of 2 patients in the bed areas, with an increased ratio of single ride rooms.

The building of these two 10 bedded wards will allow a programme of refurbishment to take place which will further improve the patient, relative and staff experience across the Withington site.

Patient experience surveys

In 2024 there was much work done to understand the experience received by patients and those important to them when they are accessing the services provided by The Christie.

The NHS national inpatient survey and the national cancer patient experience survey results provide annual feedback on a wide range of aspects of care, from diagnosis to end of treatment and across outpatient and inpatient care. The Christie performed very well in both surveys and was identified as a high performing Trust following the results from the inpatient survey.

Similarly positive experiences are reported through our NHS Friends and Family Test results with satisfaction levels sitting on average at about 95% across our inpatient and outpatient services.

One of the areas of work that the Trust will focus on is to ensure that the diversity of those responding to surveys reflects the patient population of the Trust.

Patient registration

In 2024 a protected characteristic board was established with the purpose of improving the completeness of protected characteristic data that is provided by patients at the point of registration.

Recording patient demographics and protected characteristics data is essential to making sure that services are inclusive for everyone.

Ensuring that key information on a patient's record is completed and up to date can help staff make appropriate arrangements for individuals to access care in the right conditions and have an overall better experience of services.

A new contact and services form was developed in consultation with patients which was launched in September 2024. A paper and digital version was developed and can be accessed via a QR code and increase the awareness both for patients and employees of the importance of data completeness.

Accessible Information Standard (AIS)

A module on the Accessible Information Standard is now accessible on The Christie Learning Zone, our digital learning platform for staff. This module can be accessed by all staff and is designed to increase awareness of the AIS across the workforce.

Increasing staff awareness will positively impact on patient experience as we ensure that appropriate steps are taken to identify and address any communication and information issues that may be affecting patients and those important to them. As a Trust, it is important that we create the conditions to support a healthy workplace by promoting health and wellbeing and creating a positive working environment. This will help prevent stress, improve colleague engagement and enable our colleagues to be at their best.







Your Health





Your Support

We have a healthy workplace steering group whose purpose is to provide Trust-wide representation where members agree regular healthy workplace key themes and initiatives, highlight issues, and create defining actions for those identified issues.

Members are responsible for ensuring they communicate healthy workplace initiatives to their divisions ensuring increased levels of engagement and ensuring colleagues are encouraged to participate in events.

We have an on-site colleague engagement stall where we promote a variety of wellbeing campaigns throughout the year such as men's health week, smoking cessation and financial education.

The Trust have been using the NHS health and wellbeing framework organisational diagnostic tool as an evaluation tool is used every 6 months to review whether our interventions could be more impactful and help us to tailor our wellbeing offers.

Good wellbeing means that we:

- feel valued and recognised for our work
- have a sense of belonging/part of a team
- have psychological safety at work
- have permission to access activities and support

This could include physical support that helps colleagues to be at their best, to make the working day easier and the psychological care to help colleagues mental health and wellbeing.

Several new initiatives to support colleague health and wellbeing were introduced during 2024:

- expressing room to support returning parents
- on-site counselling via Health Assured
- the 'real lunch hour' (in partnership with our staff side colleagues)
- trained 45 mental health first aiders
- art classes to support colleagues with stress/mental health conditions via occupational health referral
- The menopause supporting your team workshops (for those with line management responsibility)



Health and wellbeing (continued)



Colleague health and wellbeing support guide

A new colleague health and wellbeing guide has been developed which outlines support available and how this can be accessed.

The guide can be accessed online via HIVE and in print for those colleagues who might not have regular access to HIVE. The guide will be reviewed and updated every 6 months.

Figure 1 below shows a breakdown of the information in the guide.

Figure 1 shows the current health and wellbeing support offered to colleagues

- Occupational health
- Physiotherapy
- Evecare
- Flexible working
- Menopause support
- Practitioner Health service
- Sexual safety in healthcare charter
- Wellbeing podcasts/webinars
- Health service discounts

Mindfulness sessions

Annual summer garden party

Randomised coffee trials

Staff art classes

Christie-mas quiz

Real lunch hour

- Blue Light card
- Your Your health support Your Your happiness fitness
- Employee assistance programme
- Salary finance
- · Mental health first aiders
- Smoking cessation/alcohol advice
- Library service
- Trade unions
- Freedom to Speak Up Guardian
- Support for veteran staff
- Expressing room
- Health and wellbeing awareness days/weeks
- Free on-site yoga
- Cycle to work scheme
- Annual rounders tournament
- Walking Wednesdays
- Health Assured wisdom app
- Doing our Bit fitness platform

In addition, colleagues can also find support via:

- human resources for employee matters, employment relations, pay and conditions of employment and HR policies, advice and guidance.
- trade unions to help resolve issues or problems related to work and home, provides employment representation, support and advice.
- chaplaincy and spiritual care offer pastoral care, spiritual and religious support, processing feelings and prioritising goals. Provides empathetic listening and therapy and can be contacted via email or telephone.

We continue to organise a monthly menopause cafe online which enables greater accessibility for colleagues to attend from

across the Trust.

Menopause

Women over 50 are the fastest growing demographic in the workplace within the UK, but many women across the country feel the need to guit their jobs, reduce their hours, and pass up promotions due to the menopause. At our Trust, to ensure that colleagues feel supported at work, we have signed up to the Menopause Workplace Pledge to make the Trust a supportive and understanding place for colleagues who are going through or are affected by the menopause.

In signing the Menopause Workplace Pledge, we commit to:

- recognising that the menopause can be an issue in the workplace, and need support
- talking openly, positively, and respectfully about the menopause
- actively supporting and informing our colleagues affected by the menopause

We continue to organise a monthly menopause cafe online which enables greater accessibility for colleagues to attend from across the Trust. There is a menopause page on HIVE to support those unable to attend the menopause cafes.

Discussions have highlighted that for those colleagues who are unable to discuss menopause in their communities have valued the opportunity to listen, learn and/or share their experiences with others.

Sexual safety charter

The Trust has signed up to the NHS sexual safety charter which reiterates our ongoing commitment to ensure that those who work, train, and learn have the right to be safe and feel supported at work.

The charter requires us to commit to 10 principles and to implement the actions it sets out to improve safety at work. We will not tolerate unwanted, inappropriate, or harmful sexualised behaviours in the workplace and are committed to taking action to prevent and address this.

We have made significant progress to fulfil our commitments to the sexual safety charter. Key achievements include the launch of a sexual safety policy, the development of a reporting system, a programme of education and training and a comprehensive communication campaign.



Chaplaincy and spiritual care

EDI Staff Network Groups

In 2024 the chaplaincy and spiritual care team recruited several new volunteers, plus a new honorary chaplain, ensuring complete coverage of all major inpatient wards. This meant that on average the team was able to review 70-100 patients per month.

> In terms of breakdown of religion and belief, the percentage of patients reviewed was as follows: 64% Christian, 3% Jewish, 14% Muslim, and 19% non-religious.5 Buddhist patients were also reviewed over the year, along with 3 Hindus, 1 Quaker, and 1 Rastafarian.

The team was also involved in the marking of several religious festivals including Ramadhan, Sukkot, Diwali, Hanukah and Advent/Christmas, as well as promoting Islamophobia Awareness Month in November. Inter-Faith Week, also in November, was marked by the offering of free multi-faith snacks, and the opportunity for staff/ patients/carers to leave prayers, thoughts and wishes on a special prayer tree.

The team facilitated a training session for catering on the dietary needs of Jewish patients and carers, following some negative feedback, and was also involved in the provision of a second prayer space for Muslim staff, patients and carers during Ramadhan. This resulted in much positive feedback, especially from female users.

Finally, the team continued to deliver religious/spiritual care training around end of life needs on regular supportive care study days and was also involved in the re-launch of a faith and belief EDI staff network group.

A review of the 4 EDI staff network groups was completed in November 2023. As a result of the review and consultation with colleagues it was agreed that this would be extended from 4 to 8 EDI staff network groups.

The 8 EDI staff network groups that support colleagues:

- ethnic diversity group
- rainbow (formerly LGBTQ+)
- · faith and belief
- ability and wellbeing
- neurodiversity (new)
- parents and carers (new)
- Armed Forces community (new) women and gender Identity (renamed women's group)





Volunteers and members

Events and celebrations

The Trust's Chief Executive, Roger Spencer, thanked our volunteers for their support, commitment and hard work that they have shown over 2024.

Volunteers are important in making our patients' and their families' lives that bit easier when they are feeling at their most vulnerable.

It is great to see the diversity of our volunteer numbers are steadily increasing, and we continue to be grateful for the support that volunteers give to our patients and their families.



Unity in diversity: celebrating different cultures at The Christie.A very successful annual culture celebration was held on Tuesday 24 September to showcase the work of The Christie in the local community and to encourage people from underrepresented groups in particular to become Trust members.



The Unity in diversity event was opened by Marcella Turner, Chief Executive of Can-Survive UK, and a governor at the Trust. The main speaker for the event was our Chair, Edward Astle, who gave an update on the work that we are doing around equality, diversity and inclusion.

Held in the education centre, the event featured some key speakers before delegates were offered a tour of some of the facilities The Christie offers to accommodate patients from various faiths and cultures. The aim was to educate people that The Christie is for everyone.

Delegates also had the chance to join in a mindfulness art activity, speak with some exhibitors and sample some of the delicious food that we offer to cater for our patients who may follow diets according to their faith/beliefs.

The main events that were promoted and celebrated during 2024 were:

Women's International Day: 8 March 2024 with a series of blogs and articles on the Hive page.

Neurodiversity Week: 18 – 24 March 2024 was promoted by the neurodiversity EDI staff network group with a series of blogs on the Hive page.

Ramadhan during 10 March to 9 April 2024 and included the promotion of the new prayer guidance for managers

Nil by Mouth Campaign – to show colleague solidarity and raise awareness during Ramadan supported by the Faith and belief EDI staff network group.

Armed Forces Week: 24 – 29 June 2024 was an opportunity to demonstrate our support for the men and women who make up the Armed Forces community which was supported by the veteran working group members.

Armed Forces Day: 29 June 2024 includes those currently serving troops to service families, veterans and cadets. The Trust celebrated this event by inviting members of the armed forces community to attend the event where the executive sponsor presented the silver Defence Employer Recognition scheme to

Pride Manchester: 23 – 26 August 2024 organised by the rainbow EDI staff network group.

veterans from the veteran working group.

Withington Pride LGBTQ Community Festival: 21 September 2024, attended by the rainbow EDI staff network group.

Black History Month: October 2024 which included a weekly blog on Hive by Mani Hallarthur an EDI champion.

Disability History Month:

14 November – 20 December 2024 included weekly blogs on the Hive page.

Schwartz Rounds

Schwartz Rounds continue to provide a structured forum at the Trust for all staff, clinical and non-clinical, to come together regularly to discuss the emotional and social aspects of working in healthcare. The purpose of these events is to understand the challenges and rewards that are intrinsic to providing care, not to solve problems or to focus on the clinical aspects of patient care.

It can help staff feel more supported in their jobs, allowing them the time and space to reflect on their roles. Evidence shows that staff who attend Rounds feel less stressed and isolated, with increased insight and appreciation for each other's roles. They also help to reduce hierarchies between staff and to focus attention on relational aspects of care.

The underlying premise for the Schwartz Rounds is that the compassion shown by staff can make all the difference to a patient's experience of care, but provide compassionate care staff must, in turn, feel supported in their work.

In November 2024 in response to the recent disturbances across the country a Schwartz Round on racism in the workplace was organised which 30 staff attended.

EDI Divisional Implementation Plans and process

Education and learning

To support the implementation of the Trust EDI delivery plan, each division produced a divisional EDI divisional implementation plan.

They nominated an EDI coordinator to support the coordination of their

plans and provide quarterly progress updates to the EDI manager.



EDI training resources have been developed based on materials provided by VinciWorks and Ciphr eLearning. The EDI training courses and modules will be accessible on the Trust's Christie Learning Zone in 2025.

Foundation EDI in the workplace course

The foundation in equality, diversity and inclusion in the workplace course has been developed and delivered by the EDI team to support the EDI coordinators, EDI champions and Freedom to Speak Up Guardian in their role. This has been delivered during 2024 to improve collaboration, networking, and conversation in embedding EDI across the Trust.

> The course is increasing awareness and understanding on EDI related issues and providing colleagues with confidence in dealing with issues in the workplace. The facilitators provide a psychological safe environment for participants to feel comfortable to participate in the course.

> > There course contains six modules and runs through to March 2025.

Learning outcomes

- 1. Discover how the principles of EDI apply to the workplace.
 - 2. Understand the importance of the Equality Act 2010 in supporting colleagues with a protected characteristic.
 - 3. Understand the importance of challenging unconscious bias and microaggressions in the workplace.
 - **4.** Understanding the impact that bullying and harassment has in the workplace.
 - **5.** Understand how the culture can impact on effective communication and the importance of language in the workplace.
 - **6.** Creating a safe and positive workplace based on respect and allyship.

The course is increasing awareness and understanding on EDI related issues and providing colleagues with confidence in dealing with issues in the workplace.

Education and learning (continued)

The Christie Institute for Cancer Education

The Christie Institute is committed to ensuring equity, diversity, and inclusion are embedded within all aspects of education. In 2023, the school invested in employing an equality, diversity and inclusion (EDI) education lead to demonstrate this commitment.

Education

Provided by our EDI education lead, colleagues can access a range of bespoke equity, diversity, inclusion, and belonging education to support individual, organisation, and learner growth and development.

Colleagues also have access to weekly reflective sessions, 'Listen and act', which provide an opportunity for all colleagues (across the school) to come together to reflect, listen to, and share thoughts/insights and experiences around equity, inclusion, and belonging.

This includes discussing best practices, challenges, personal/professional experiences, and broader issues happening in the world around us to support widening of perspectives by engaging with colleagues who 'see' things differently.

Governance

The EDI education lead has also established a governance structure to sustain ongoing work. The equality, diversity, inclusion and belonging (EDIB) working group consists of 2-3 elected members from each team (16 members in total) who meet monthly to ensure issues raised in the EDIB forum, an open platform for colleagues to address best practices/ concerns are addressed.

This has led to the creation of a range of task and finish groups, such as cultural competence and inclusive recruitment, which focus on specific work areas. So far, these groups have supported the development of the faith, belief, and spirituality guide, as well as inclusive working environments education and online guides.

Outreach

Our career development practitioner has led incredible work developing our links and partnerships with local colleagues and organisations and was nominated for a Nursing Times award for developing our supported internship programme, which provided young care leavers with work experience at The Christie.

Workforce

The education team continues to commission, promote and support Schwartz Rounds for the whole Trust workforce to access, and over the last 12 months, we have seen an increase in engagement with Schwartz Rounds, which we hope to build upon.

We have also reformed the study leave application process for all CPD, apprenticeships, observer ships, and work experience applications to include equality monitoring questions (including carer and veteran status). This data is being used to track and identify any issues with access to educational opportunities and support the development of targeted interventions to address any identified needs.

Health inequity and inclusion

Our EDI education lead has also driven work on health inequity; between March- June 2024. The Christie Institute hosted a series of four free study days that explored cancer and exclusion, and brought together a range of multi-disciplinary professionals and experts by experience to talk about inequity of care for people who may be socially excluded.

This helped to broaden people's understanding of the social, economic, and commercial determinants of health and the impact of inequality and social exclusion on cancer screening, diagnosis, care, treatment, and outcomes. The series was attended by over 1,200 people from Africa, Asia, Australia, Europe, Ireland, and the UK. You can read more about the series and its impact here: National Health Executive: July/August 2024.





Institute hosted
a series of
four free study
days that
explored cancer
and exclusion

Respectful resolution toolkit

Conclusion

The respectful resolution toolkit was co-created with 'A Kind Life' to create a positive, values-led culture. The toolkit has been developed to resolve issues of bullying or inappropriate behaviour, whether one off or repeated (see ACAS definition of bullying).

We have progressed many things during 2024 and now look ahead to 2025. We'll be bringing in our new inclusive culture strategy and new methods of engagement to further our process of integrating equality, diversity and inclusion into everything we do.



Respectful resolution approach is based on reflection, empathy, dialogue, de-escalation, and the principles of natural justice.

The focus on the respectful resolution toolkit during 2024 has been around the implementation of step 1 - creating a safe culture.

This step begins to raise awareness, tackle and prevent inappropriate behaviour and its impact on teams in the workplace.

Teams across the Trust use stage 1 of the toolkit to have culture, values and behaviour focused conversations within teams. Specific sessions for managers have also been run for managers with support from the Maguire Advanced Communications Unit and the Trust's organisational development team.



Respectful resolution approach is based on reflection, empathy, dialogue, de-escalation, and the principles of natural justice.



