Athena SWAN: Bronze and Silver department applications

Athena SWAN Bronze Department Awards

Recognise that in addition to institution-wide policies, the department is working to promote gender equality and to identify and address challenges particular to the department and discipline.

Athena SWAN Silver Department Awards

In addition to the future planning required for Bronze department recognition, Silver department awards recognise that the department has taken action in response to previously identified challenges and can demonstrate the impact of the actions implemented.

Note: Not all institutions use the term 'department'. There are many equivalent academic groupings with different names, sizes and compositions. The definition of a 'department' can be found in the Athena SWAN awards handbook.

Completing the form

DO NOT ATTEMPT TO COMPLETE THIS APPLICATION FORM WITHOUT READING THE ATHENA SWAN AWARDS HANDBOOK.

This form should be used for applications for Bronze and Silver department awards.

You should complete each section of the application applicable to the award level you are applying for.

Additional areas for Silver applications are highlighted throughout the form.

If you need to insert a landscape page in your application, please copy and paste the template page at the end of the document, as per the instructions on that page. Please do not insert any section breaks as to do so will disrupt the page numbers.

Word Count

The overall word limit for applications are shown in the following table.

There are no specific word limits for the individual sections and you may distribute words over each of the sections as appropriate. At the end of every section, please state how many words you have used in that section.

We have provided the following recommendations as a guide.

Silver Department application	Word limit	Actual word count
Word limit	**12,000**	
Recommended word count		
1.Letter of endorsement	500	498
2.Description of the department	500	500
3. Self-assessment process	1,000	999
4. Picture of the department	2,000	1801
5. Supporting and advancing women's careers	6,500	6117
6. Case studies	1,000	998
7. Further information	500	463

Name of institution	King's College London
Department	Department of Palliative Care, Policy & Rehabilitation
Focus of department	**STEMM**
Date of application	January 2022
Date of current Silver award	**2016**
Contact for application Must be based in the department	Dr Sabrina Bajwah
Email	sabrina.bajwah@kcl.ac.uk
Telephone	
Departmental website	https://www.kcl.ac.uk/cicelysaunders

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1. LETTER OF ENDORSEMENT FROM THE HEAD OF DEPARTMENT

Recommended word count: 500 words

January 2022

Athena SWAN Manager
First Floor, Westminster Tower
3 Albert Embankment
London
SE1 7SP

Dear Athena SWAN Manager and Panellists,

As the new Director of Cicely Saunders Institute (CSI) (previously Professor Irene Higginson 2010-2020), it gives me great pleasure to endorse our Athena SWAN Silver renewal application. I am personally committed to challenging stereotypes and gender equality, having been a member of the CSI Athena SWAN Self-Assessment Team (SAT) and because of my personal experiences. I am part of a dual career family with two children.

I am enormously proud of the progress made by our SAT since the Silver SWAN award in 2016. I see a key role as Director as supporting the SAT and ensuring that our values are enacted department-wide to achieve and sustain our vision of identifying and addressing gender inequality. Our vision is closely aligned to my academic programme of work to reduce social exclusion and promote inclusivity and to the departmental programme to reduce health inequality associated with ethnicity and socioeconomic deprivation. To this end, I am responsible for key objectives in our action plan - demonstrating my personal commitment to gender equality.

We work hard to identify and eliminate barriers, co-create solutions, and promote equality of opportunity across gender and other protected characteristics. We continue to be committed to the self-assessment process through the challenging times of the COVID-19 pandemic, despite our SAT co-chair having frontline NHS commitments.

Since our last Silver award, we have:

- developed our professional services staff through creation of Research Projects and Coordination Assistant roles
- continued to address gender inequality and inequities within our department whilst achieving external impact through data analyses examining gender inequality,
- continued to develop our staff and students whilst impacting the sector nationally by founding the Palliative Care Athena SWAN network,
- secured research funding to improve services for people who are lesbian, gay, bisexual and/or trans (LGBT+).
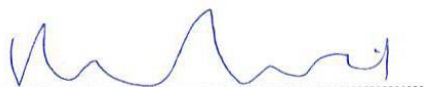
I am struck by the passion and commitment the SAT demonstrate and it is evident the department agree. 98% that they feel EDI is important to the department.

However, there are areas where we are committed on making more progress. We recognise that we are a female dominated science and there is work to be done to ensure gender equity. I hope my appointment as Director will contribute to attract more male staff and students. Going forward, our focus will be to attract more males to the sector, while maintaining focus on progression of female staff. We are committed to:

- continuing to strive towards recruiting more male staff and students within the department and on our MSc and PhD,
- decreasing the award gap between male and female students on the MSc,
- ensuring that female staff do not suffer from the "leaky pipeline" of academic promotion and work to have proportionate number of male and female staff in senior roles,
- continue to develop our professional services staff

The information presented in the application is an honest and accurate representation of our department. We have presented 10 years of data where possible in this application - demonstrating transparency and our commitment to the self-assessment process.

Your faithfully,

Professor Richard Harding
Cicely Saunders Institute Director

Acronyms and abbreviations	
ACCESSCare	Advanced Cancer Care Equality Strategy for Gender and Sexual Minorities
AP	Action Point
AS	Athena SWAN
BAME	Black, Asian & Minority Ethnic
CSI	Cicely Saunders Institute
Et al	Abbr. 'et alia' meaning 'and others'
FoLSM	Faculty of Life Sciences and Medicine
FTC	Fixed Term Contract
GSTT	Guy's and St Thomas' NHS Foundation Trust
HR	Human Resources
IoPPN	Institute of Psychiatry, Psychology & Neuroscience
KCH	King's College Hospital NHS Foundation Trust
KCL	King's College London
KHP	Kings Health Partners
Marie Curie	Marie Curie Cancer Care
MSc	Master of Science
NHS	National Health Service
NIHR	National Institutes for Health Research
NMPC	Nursing, Midwifery and Palliative Care
PDR	Performance Development Review
PGR	Post-graduate Research
PGT	Post-graduate Taught
PhD	Doctor of Philosophy
Post-doc	Post-doctoral researcher
PTES	Postgraduate Taught Experience Survey
RA	Research Assistant
RAE	Research Assessment Exercise
REF	Research Excellence Framework
RPCA	Research Projects and Coordination Assistant
SAT	Self-Assessment Team
SLAM	South London and Maudsley NHS Foundation Trust
STEMM	Science, Technology, Engineering, Medicine and Mathematics

2. DESCRIPTION OF THE DEPARTMENT
Recommended word count: 500 words
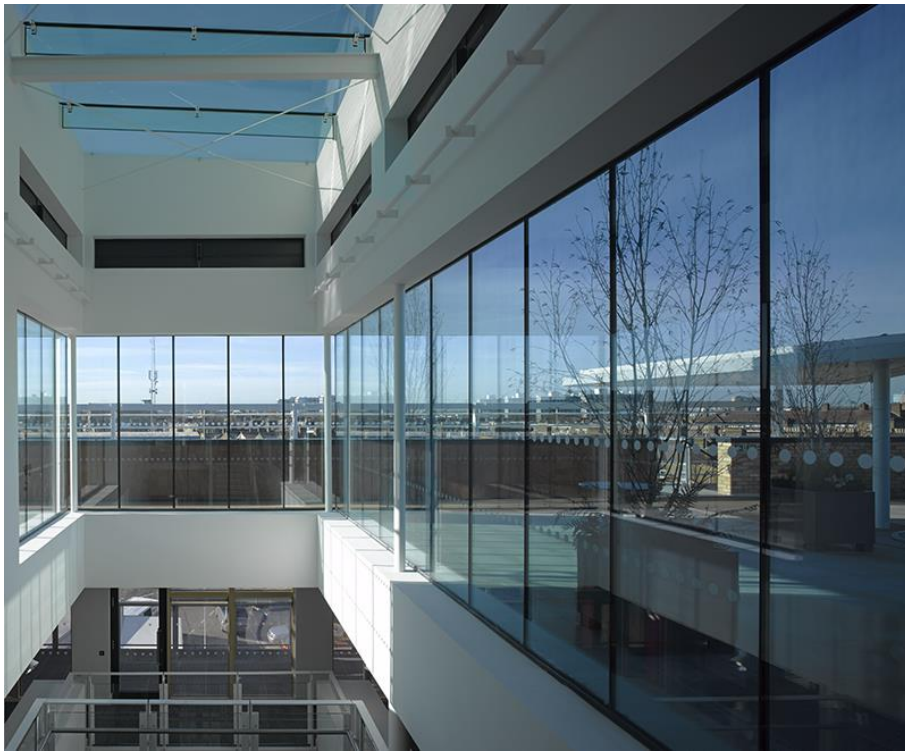
The Cicely Saunders Institute building

*Staff at the Cicely Saunders Institute of Palliative Care, Policy and Rehabilitation*

The Cicely Saunders Institute of Palliative Care, Policy and Rehabilitation (CSI) was founded in 1997. It is the world's first purpose-built institute for palliative care, bringing together academics, healthcare professionals, patients and carers. The building was designed to be welcoming, peaceful, and environmentally friendly.

EDI is central to our department values. From the outset we nurtured talent, irrespective of gender, and created an environment where all individuals, including those with clinical and caring commitments, can thrive. We pride ourselves on being an inclusive department where all staff participate in the running and decision-making of the department. Staff consistently report they are treated equally and feel valued (Figure 2.1).
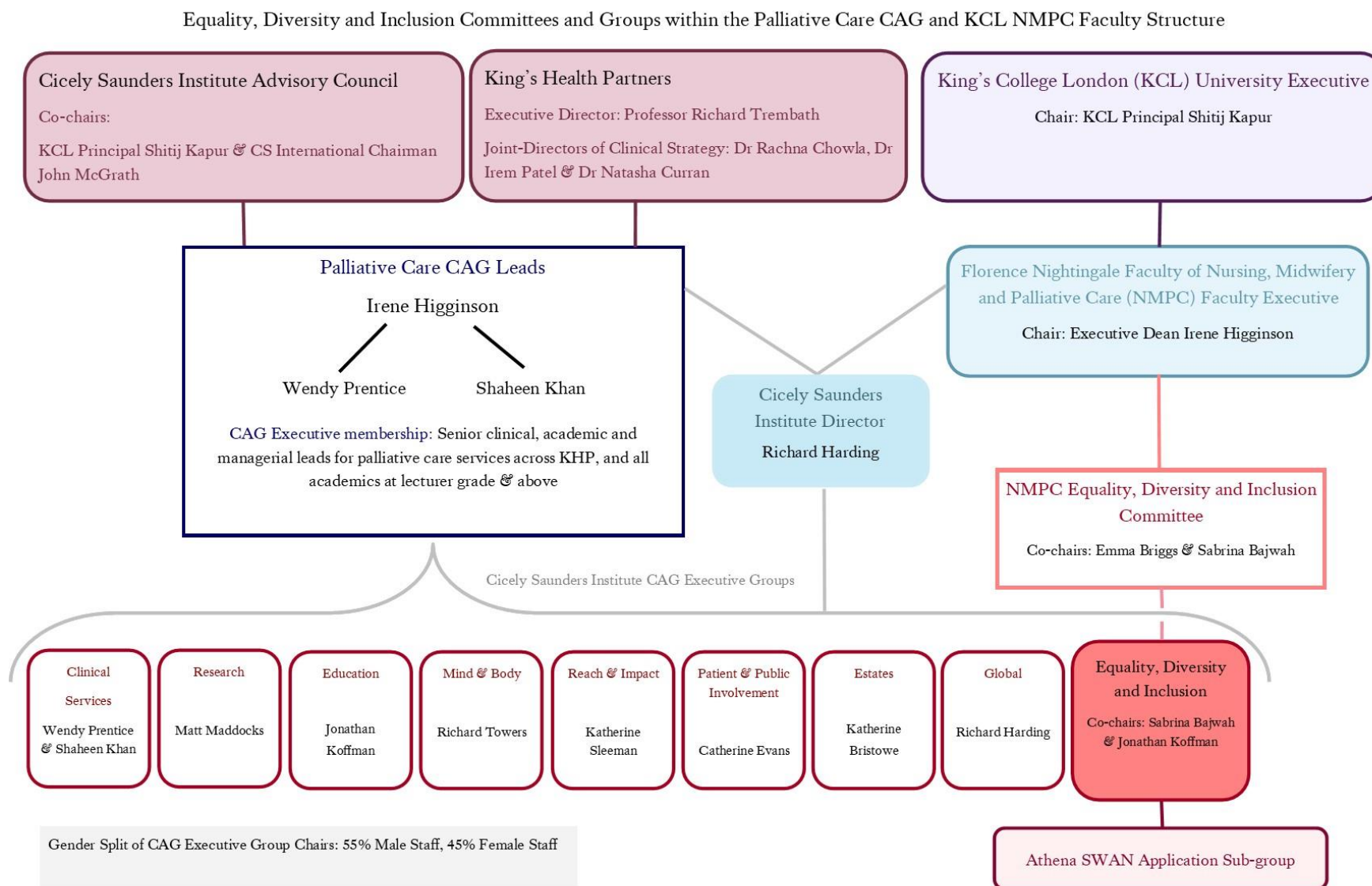
Figure 2.1 Percentage of staff who agree or strongly agree with the following statements from the EDI Surveys 2018, 2019 and 2021
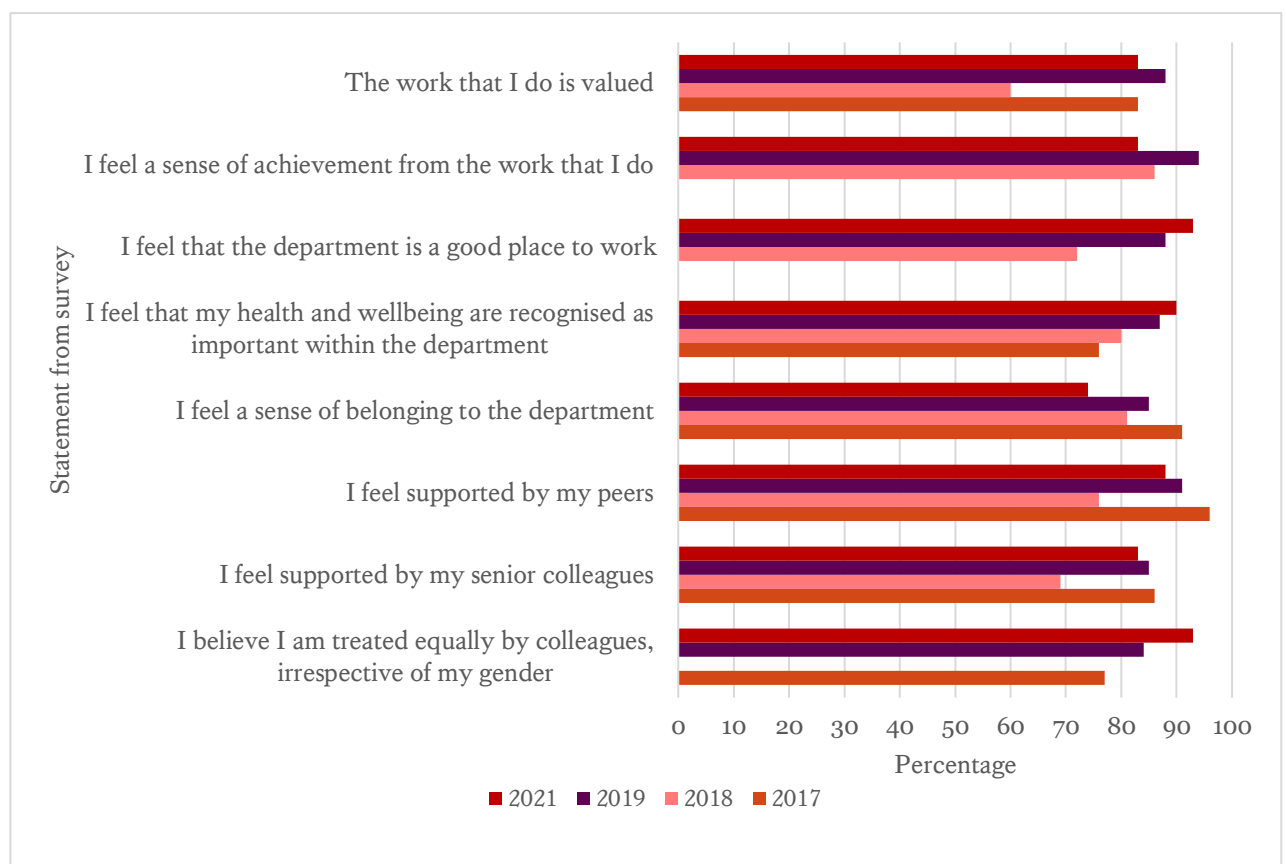
Previously a division in the Faculty for Life Sciences and Medicine, in 2017 we joined the Florence Nightingale Faculty of Nursing, Midwifery and Palliative Care (NMPC), one of nine faculties within King's College London (KCL). The Institute is also home to King's Health Partners (KHP) Palliative Care Clinical Academic Group (CAG), the only CAG to have an EDI executive group (Figure 2.2). The structure includes all senior leads for palliative care services across KHP (19F8M), including nine members from CSI (6F, 3M). We recognise the high proportion of males in our CAG and are working to ensure that female staff do not suffer from the "leaky pipeline" effect (**AP 4.2.1**).

"I am really proud of the diversity work that our department achieves. We have a flexible and responsive approach when challenges are identified and strong leadership"
Quote from 2019 survey

Figure 2.2 Structure of the Palliative Care Clinical Academic Group and KCL Nursing, Midwifery and Palliative Care (NMPC)

Equality, Diversity and Inclusion Committees and Groups within the Palliative Care CAG and KCL NMPC Faculty Structure

Cicely Saunders Institute Advisory Council

Co-chairs:

KCL Principal Shitij Kapur & CS International Chairman John McGrath

King's Health Partners

Executive Director: Professor Richard Trembath

Joint-Directors of Clinical Strategy: Dr Rachna Chowla, Dr Irem Patel & Dr Natasha Curran

King's College London (KCL) University Executive

Chair: KCL Principal Shitij Kapur

Palliative Care CAG Leads

Irene Higginson

Wendy Prentice   Shaheen Khan

CAG Executive membership: Senior clinical, academic and managerial leads for palliative care services across KHP, and all academics at lecturer grade & above

Cicely Saunders Institute Director

Richard Harding

Florence Nightingale Faculty of Nursing, Midwifery and Palliative Care (NMPC) Faculty Executive

Chair: Executive Dean Irene Higginson

NMPC Equality, Diversity and Inclusion Committee

Co-chairs: Emma Briggs & Sabrina Bajwah

Cicely Saunders Institute CAG Executive Groups

Clinical Services	Research	Education	Mind & Body	Reach & Impact	Patient & Public Involvement	Estates	Global	Equality, Diversity and Inclusion
Wendy Prentice & Shaheen Khan	Matt Maddocks	Jonathan Koffman	Richard Towers	Katherine Sleeman	Catherine Evans	Katherine Bristowe	Richard Harding	Co-chairs: Sabrina Bajwah & Jonathan Koffman

Gender Split of CAG Executive Group Chairs: 55% Male Staff, 45% Female Staff

Athena SWAN Application Sub-group

In September 2021, we are 49 academic, research and professional services staff (11M, 22%; 38F, 77.5%) (Figure 2.2), and 11 (9F, 2M) PhD students. Palliative Care is like nursing and midwifery whereby most staff are female. From 2018-2020, 82% of the NMPC faculty were female.

Figure 2.2. Gender split of staff within the department, September 2021 (snapshot)
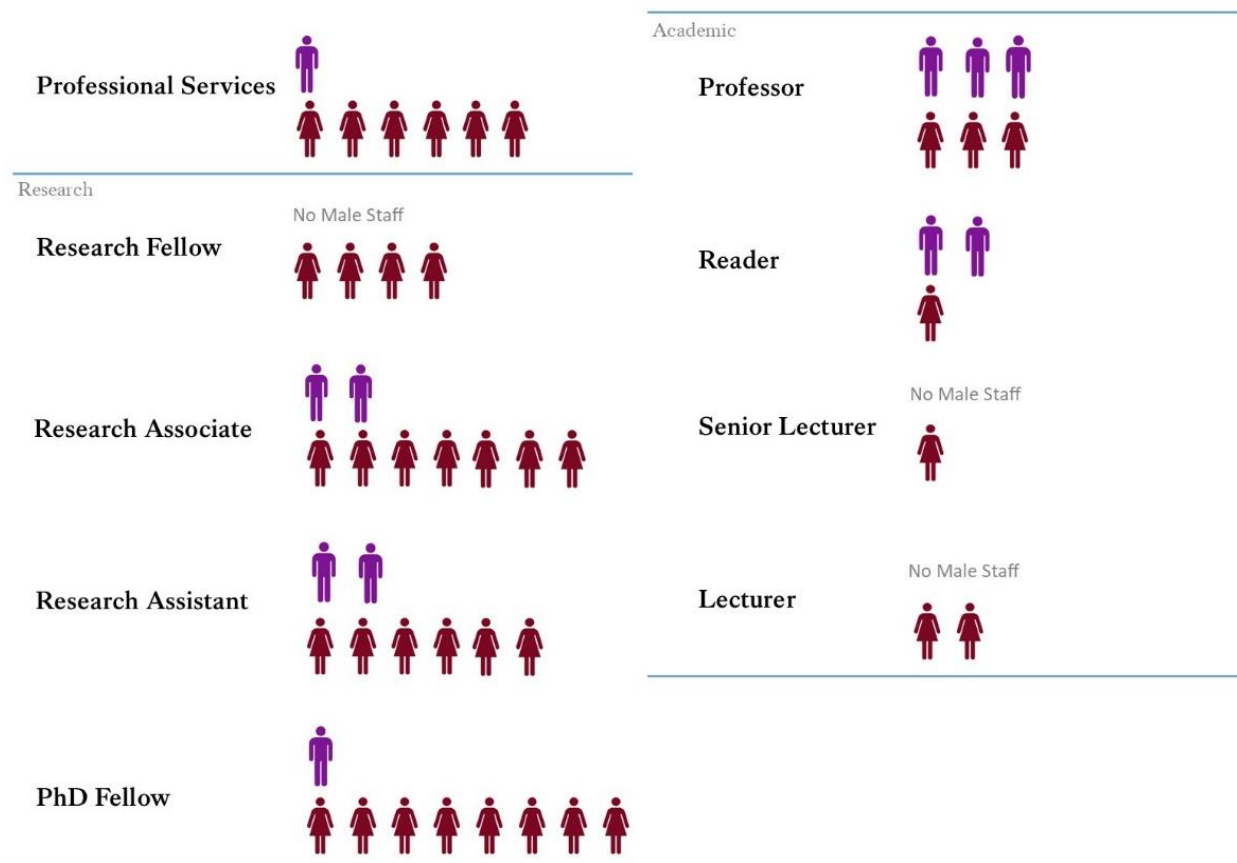
Note: RPCA staff incorporated under Research Assistant in this Figure

Figure 2.3 Gender split of department by student group and professional grade, 2012-2020
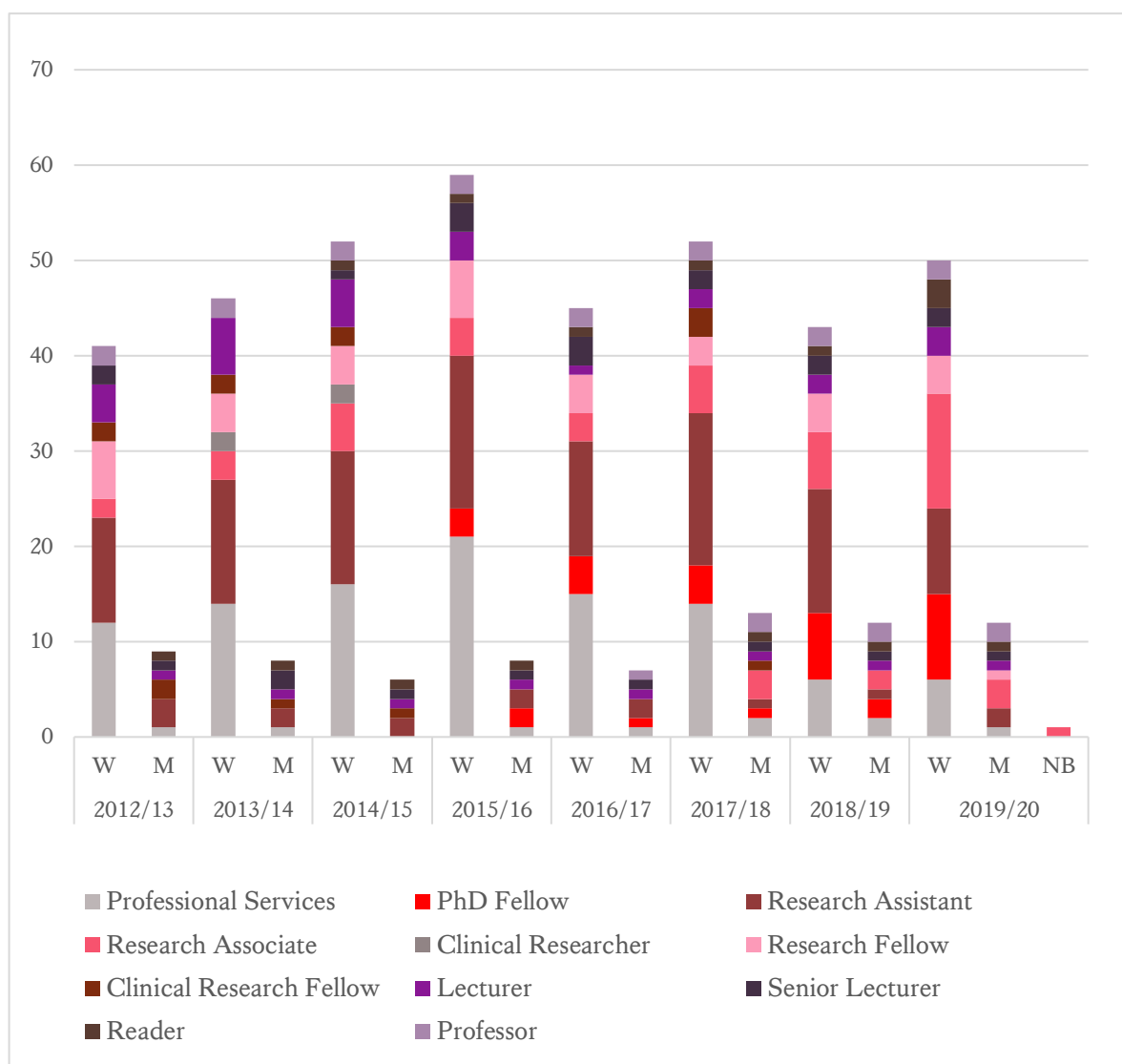
Source: KCL HR and Admissions data. M; Male, F; Female, NB; Non-Binary

Gender equity is at the core of our department and staff training a high priority. KCL's Diversity Matters training is compulsory for all staff. In 2020, 20% of staff (gender disaggregation unavailable) had attended the training in the 2.5 years previously. We now hold the session in house with the last session attended by 87.3% of staff (25% M). In house training also includes a Trans Matters session. 83% of the department attended the 2020 session (15% M) (**AP 3.2**). Following this session, a 'Trans Champion' has been appointed to progress actions (**AP 5.6.6**).

Palliative care is a female dominated field and we are striving to ensure our department is reflective of the field. Externally, we are promoting the field of palliative care to young people via our Young People's Advisory Group and KHP summer school (Section 5.6).

We champion improvement of palliative care services for people who are lesbian, gay, bisexual and/or trans and since 2014 we have gained research funding for this (ACCESSCare). Staff run conferences and deliver sessions on sexual orientation and

gender identity. We have also led work on improving palliative care services for those from ethnic minority groups- focussing on the intersectional discrimination of gender and ethnicity experienced by patients and families.

Screenshot of ACCESSCare webpage

Report on palliative and end of life care for Black, Asian and Minority Ethnic groups

Key achievements since 2016 Silver Award
- >90% of staff feel they are treated equally irrespective of gender and feel the department is a good place to work, an increase of 16% since 2017
- High levels of support across all areas felt within the department
- 87% of staff attended the Diversity Matters training in 2021, to be held annually going forward
- Trans Matters champion appointed to take forward actions to increase inclusivity

Action points going forward
AP 4.2.1 Increase the percentage of senior female academic staff to be reflective of department to mitigate against "leaky pipeline"
AP 3.2 Diversity and Trans Matters training is attended by more than 90% of the department
AP 5.6.6 Continue to promote Trans inclusion work

Total number of words in section 2: 500

3. THE SELF-ASSESSMENT PROCESS
Recommended word count: 1000 words

Describe the self-assessment process. This should include:

(i) a description of the self-assessment team

Our Athena SWAN Committee was established in December 2013. Recognising the importance of intersectionality, this group feeds into the Palliative Care CAG EDI Committee. All members meet monthly to address issues related to the Athena SWAN Charter, and broader EDI issues. We are committed to equality across all protected characteristics.

Since our last application, four members of the SAT remain. We actively encourage "rolling membership" to ensure the Athena SWAN values are embedded in the culture of the department and helping to inform our action plan and initiatives, Membership is voluntary. New members are welcomed and encouraged through invitation to observe meetings during induction period.

Palliative care is a health discipline that attracts more females, therefore a 50:50 gender balance is not realistic. Instead, we strive for our SAT group to be representative of our department and this is monitored annually **(AP 3.1).** Our SAT has 11 members, consisting of 9 female and 2 male members. This also includes students and staff across all grades and those with experience of working less than full time (LTFT). The SAT benefits from having co-chairs and senior leadership. This was especially important to support members of the SAT who had to increase clinical commitments in the last 18 months to work on the COVID-19 frontline (see Further Information). Three current members have caring responsibilities and four are professional services staff (Figure 5.5.7).

Table 3.1 Gender and Professional Position Split of SAT 2014, 2016, 2021

Date	Male to Female Ratio (M:F)	Number of SAT with academic or research roles	Number of SAT with professional services roles
2014	2:7	8	1
2016	4:9	9	4
2021	2:9	8	3

Table 3.2 Members of the AS SAT, including members from all grades and some new members of staff

	Sabrina Bajwah Clinical Senior Lecturer	*Sabrina joined in 2018. Works clinically 50% FTE in NHS. Co-Chair of the EDI group. Two periods of maternity leave and one bereavement leave. Part of dual career family unit. Benefits from working flexibly. Part of the maternity working group and widening participation group.*
	Jonathan Koffman Reader	*Jonathan is Co-Chair of the group. Jonathan commenced as researcher and MSc course coordinator. He undertook his PhD in the department and has progressed to be Reader in Palliative Care. He has three daughters and works flexibly from home.*
	Sabah Boufkhed Research Associate	*Sabah joined the CSI in February 2020 on a fixed term contract.*
	Debbie Braybrook Research Associate	*Debbie joined in 2018. On a fixed-term contract (FTC), with time split across two projects. Part of the FTC working group. Benefits from flexible working.*
	Joanna Davies PhD Training Fellow	*Joanna joined in 2013. Successfully won funding from the KCL carers fund to support her return from maternity leave in 2019. Benefits from part-time and flexible working. Part of the maternity working group. Received funding on return from maternity leave.*
	Bella Millett Research Administrator	*Bella joined in 2019 in a professional services role. She supports the administrative tasks of the CSI's EDI meetings. She benefits from informal flexible working.*
	Hannah Scott Research Assistant	*Hannah joined the CSI in 2020 on a fixed term contract and is the Trans Matters Champion for the department.*

	Debbie Tonkin Institute Business Manager	*Debbie joined the SAT in 2016 when she was promoted to the role of Institute Business Manager, leading professional services. Benefits from informal flexible working. Part of the FTC working group.*
	India Tunnard Research Project and Coordination Assistant	*India joined the department in a professional services role in 2017. In 2019 she was promoted to a hybrid research and professional services role. Both positions have been on fixed term contracts. In 2020, she became the deputy chair of the institute's EDI committee.*
	Mark Willis MSc Senior Administrator	*Mark joined the SAT in 2016, focusing on student related issues in his professional services role. Part of the MSc working group.*
	Emel Yorganci Research Assistant and PhD Fellow	*Emel joined in 2017. She is a part of the maternity working group and widening participation group. She was supported through a period of compassionate leave.*

Source: CSI Athena SWAN SAT records

Vision

Through the self-assessment process, we formulated a strategy aligned to our CSI vision- *excellence in clinical care, research, and education and training* and the Athena SWAN key principles.

"Our vision for the future is to continue to identify gender inequality across the Clinical Academic Group and beyond- to shed light on and improve opportunities across all protected characteristics."
CSI Palliative Care EDI Executive.

Strategy

Systematically gathering quantitative and qualitative data- Through our EDI surveys, we can gather both quantitative and qualitative data on the experiences and views of our staff. We have used the data from our surveys with data sources from within the University to inform and develop our action plans.

Co-development of our EDI strategy is very much at the centre of our approach. We have raised awareness through our department meetings, induction, training, and our annual co-production meetings to review our action plan **(AP.3.3)**. Where staff issues are highlighted, small working groups are formed within the SAT **(AP 1.3)**. We communicate the news of our work via Twitter after every meeting.

Impact
Our 2021 EDI survey demonstrates high levels of awareness and support of the EDI work **–88% (87% of F and 89% of M respondents) agreed or strongly agreed that they feel the department is committed to improving Equality Diversity and Inclusion** (**AP 3.3**). This has remained consistently high (scores >90%) in the last three years, having increased from 73% in 2015.

Working widely within KCL - The CSI EDI Committee works closely with the Faculty EDI Committee. This close collaboration ensures that our aims are aligned with Faculty- and University-wide EDI activity. This collaboration is supported through a number of shared members, and the CSI EDI Committee co-chair is also the co-chair of the Faculty wide EDI Committee.

Beacon activity work- at the centre of our strategy is the wish to act as a beacon for other departments within the University and for the wider palliative care community. This has led to several activities which have disseminated and implemented Athena SWAN principles across the wider University and beyond (see section 5.6). This includes our work within the palliative care CAG and working across executive groups, particularly improving the diversity of our Patient and Public Involvement members (**AP 1.1**).

We are expanding our best practices and influencing others within the University. We have played a key role in shaping the new Faculty action plan (launched July 2020), allowing us to align our action plan to theirs. Our action plan has also been developed to align with University-wide EDI activities where possible and appropriate. The diagram below (Figure 3.1) shows these relationships and shows the ways in which we inform and contribute to Faculty and University EDI activity.

Figure 3.1 CSI EDI Committee reporting and connections
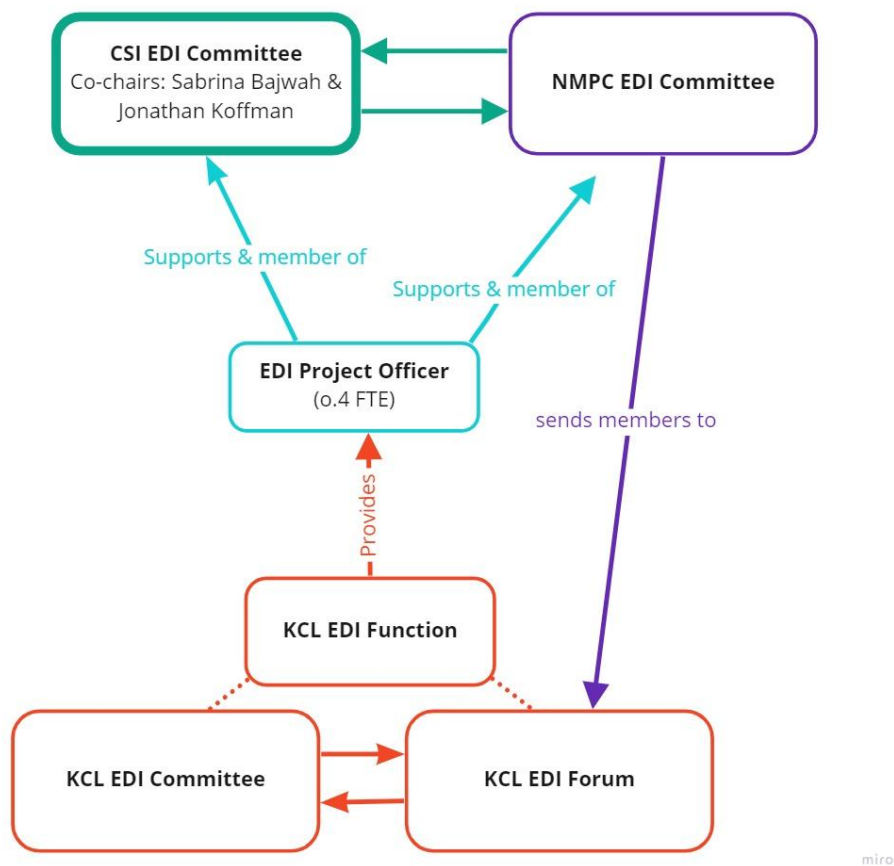
(ii)   an account of the self-assessment process

Figure 3.1 SAT activities since first Athena SWAN award
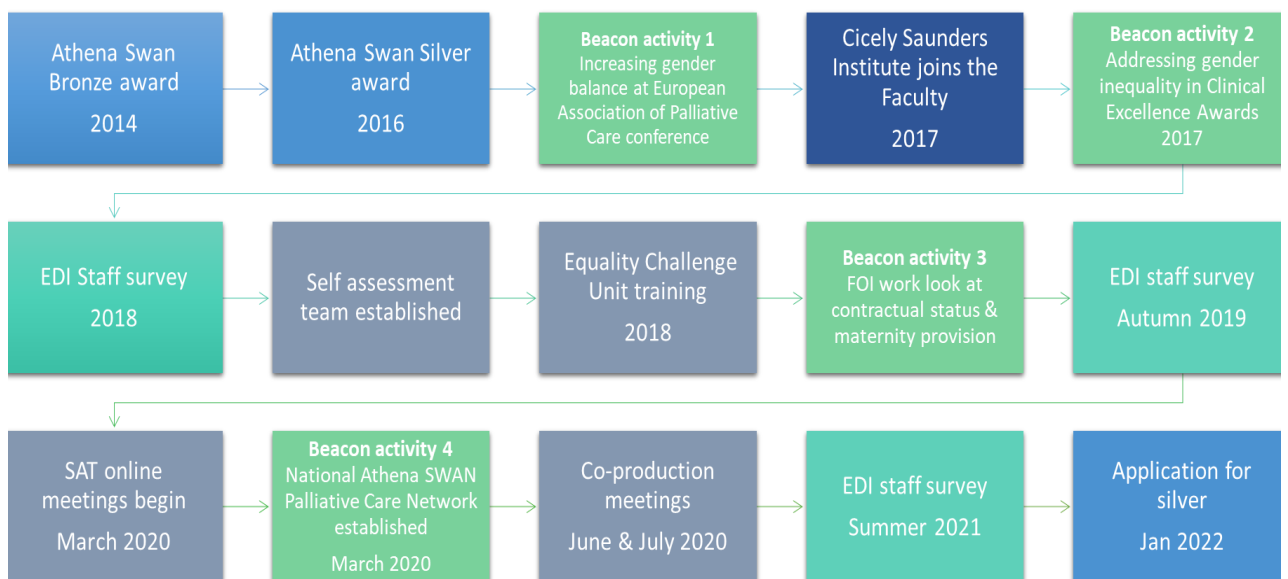
The SAT has met at least monthly since our 2016 Silver award to progress our action plan. Meetings have a structured agenda addressing AS initiatives and action points recorded. The SAT uses SharePoint (accessible by the entire department) to collate resources and manage activities. SAT working groups have been developed to complete specific tasks and to support outreach and beacon activities. For example, we have a working group focused on fixed term contracts.

After reviewing surveys conducted through the University and Faculty, we established our own annual staff surveys (2019 - 2021) to assess engagement, views on equality, transparency in our working practices, job satisfaction, training and support, career development and work-life balance. This survey was reviewed and then adopted by the wider Faculty. Our survey shows that staff have appreciated the development of this survey. To assess impact, we annually monitor data from the University by gender and grade on recruitment, appraisal, promotions, and mentoring.

"Thank you for developing this survey, it is an important tool for staff to express themselves."
Quote from 2019 survey

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

The SAT will continue to meet monthly to progress our action plan. We will ensure that staff time on this committee is acknowledged in our work allocation model (**AP 5.6.7**).

The SAT will continue to report to both the Palliative Care CAG and the Faculty EDI Committee and the Faculty Executive Committee through bi-monthly reports. Staff will be kept updated on AS work through reporting at departmental meetings, and yearly co-production meetings after our EDI survey to ensure that our action plan remains relevant. We will continue to lead the Athena SWAN Palliative Care Network, meeting every 6 months, and promote Athena SWAN principles within KCL and the wider Palliative Care community.

"This workplace is the most inclusive place I have worked in. It comes from the people involved in EDI and to a management receptive of these messages"
Quote from 2021 survey

Key achievements since 2016 Silver Award

- SAT currently includes staff from all grades, genders and ethnicities. Membership is monitored.
- Deputy chair (appointed June 2020) holds dual professional services and research role.
- 88% agreed or strongly agreed that they feel the department is committed to improving Equality Diversity and Inclusion
- A department EDI action plan is co-produced through an annual co-production meeting
- Increased department access to EDI resources via SharePoint

Action points going forward

AP 3.1 Maintain EDI/SAT committee representative of the department
AP 3.3 To maintain strong department awareness of the SAT/EDI Committee's work
AP 1.3 Continue to identify inequality issues affecting staff working in palliative care
AP 1.1 Increase diversity of Patient and Public Involvement group
AP 5.6.7 Work conducted for the SAT to be acknowledged in a formal workload allocation model

Total number of words in section 3: 999

4.   A PICTURE OF THE DEPARTMENT
Recommended word count: 2000 words

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

(iv)   Numbers of men and women on access or foundation courses
N/A

(v)   Numbers of undergraduate students by gender
N/A

(vi)   Numbers of men and women on postgraduate taught degrees

The CSI runs one of the world's leading MSc, PG Diploma and PG Certificate in Palliative Care ("MSc"). The course can be undertaken on a full-time basis over a one-year or part-time over a two-years. Typically, overseas students who are not working at the time of their studies attend on a full-time basis. Part-time students tend to work in clinical settings alongside their studies. In total, 193 (n=167, 85% F and n=26, 15% M) students have completed our course since 2012.

In 2017 we received 97% student satisfaction (data from KCL student survey, gender cannot be disaggregated). We refine the course each year using student feedback. Problems previously encountered by students with term time accommodation have been remedied. In addition, all modules now operate from 9.30am to 2.00pm to accommodate students with caring commitments for example, school drop-off and pick-up times.

> **Impact**
> In 2018 and 2019 we received 100% student satisfaction an increase from 97% in 2017 (KCL student surveys not completed in 2020, gender cannot be disaggregated
>
> *"I really appreciate that you improved this module based on the feedback on the previous module. I really liked the combination of pre-recorded sessions, literature and the live sessions. I think the sessions were interactive and easy to engage in."*
> Quote from student Postgraduate Taught Experience Survey

From September 2022 the course will begin in September to ensure out students benefit from access to KCL scholarships, student welcome initiatives and English courses, previously unavailable due to a January start. This is included in all promotional materials and feedback from students has been positive so far.

Course applications, offers and acceptance rates

Our MSc consistently attracts more female than male students (Table 4.1). All MSc applications are assessed anonymously according to strict criteria based only on applicant's academic credentials, profession and its relevance to the field, their personal statement and supporting references. Previously 100% of admission interviews panels were made up of male and female staff, but we no longer hold interviews. Now all applications are reviewed by male and female staff. All staff involved in making decisions about student entry have received Diversity Matters training (or previously Good Practice in Recruitment and Selection and Unconscious Bias).

Table 4.1 Conversion from applications to formal offers accepted by gender for the MSc, PG Diploma and PG Certificate in Palliative Care for the period 2012-2021 (n=280).

	2012		2013		2014		2015		2016		2017		2018		2019		2020		2021	
	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M
Application	51	12	29	8	35	6	55	9	43	14	35	8	54	11	42	4	28	7	41	3
Offer	40	6	25	5	30	6	32	7	25	8	17	5	41	5	39	4	25	7	41	3
Accepted Offer	36	6	21	4	24	3	28	7	21	5	11	2	34	5	28	1	21	7	35	2
% applications / acceptances	71	50	70	64	78	50	51	78	49	36	31	20	61	44	67	25	78	100	88	67

Figure 4.1.1 Percentage of female and male students on MSc Palliative Care 2012-2021

Percentage of female and male students on MSc Palliative Care 2012-2021
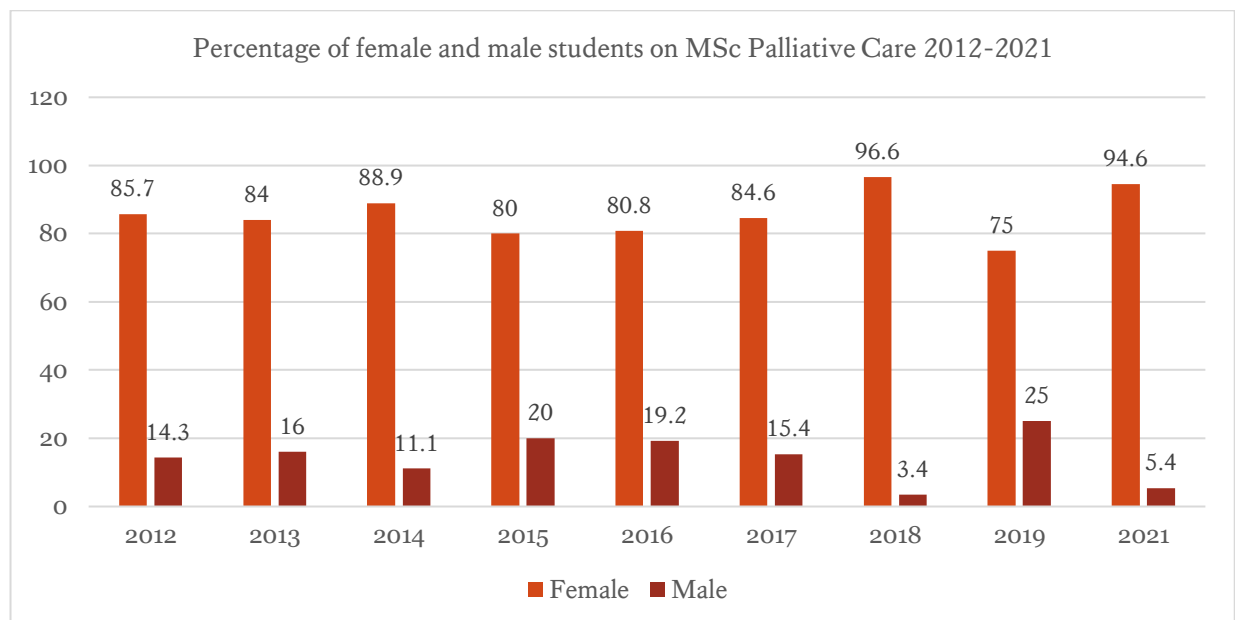
*Please note, there is a slight discrepancy if we compare the number of course admissions with the number of accepted offers with enrolment numbers for the years 2013, 2015, 2016 and 2018. This is because a small number of prospective students withdrew after accepting their offer, but before official enrolment.

Enrolment by gender

From 2012 – 2021, a total of 280 students successfully enrolled on the MSc and between 75% and 95% are female. In this female heavy science, only 25% of practitioners are male this is reflective of the sector (Benchmark data: Cardiff University' MSc/PG Dip in Palliative medicine has 25% male). In 2018, we noted that the number of male students had reduced to 3.4% (see Figure 4.1.1). As a result, we have actively promoted the inclusive nature of the MSc through social media channels and all photographic images for the MSc (see below). We have included male students and male role models.

> **Impact**
> In 2019, there was an increase in male applications to 25%, an increase from 3.4% in 2018.

Screen shot of Tweet and event poster promoting inclusivity of MSc

In 2021, the percentage of male students has decreased to 6%. We have attracted many more female applications this year and less male applications, significantly reducing the percentage of males on the course. Most of our students work clinically alongside their MSc studies. Palliative care is a healthcare speciality on the frontline of COVID-19. It is unclear how this uncertain year, has influenced application rates. We will continue to monitor this and actively attract more male applicants. We will continue to promote male role models through events (**AP 5.6.4**) Specifically, we are committed to revising our gender proportions to align with our comparator (Cardiff University's multi-professional MSc/PG Dip in Palliative Medicine has 25% male) and to palliative care

practice (over 75% of doctors in palliative medicine are female [Royal College of Physicians data 2020]) (**AP 4.1.2**).

Enrolment by gender for full or part-time attendance
Students choose to attend the MSc on either a full or part-time basis. A part-time basis typically chosen to accommodate their need to continue to work clinically. Most students attending the programmes do so on a part-time basis over the last 10 years, and as with the overall course, the majority are female.

Figure 4.1.2. Breakdown of gender for each cohort by cohort part-time or full-time attendance for the period 2012-2021
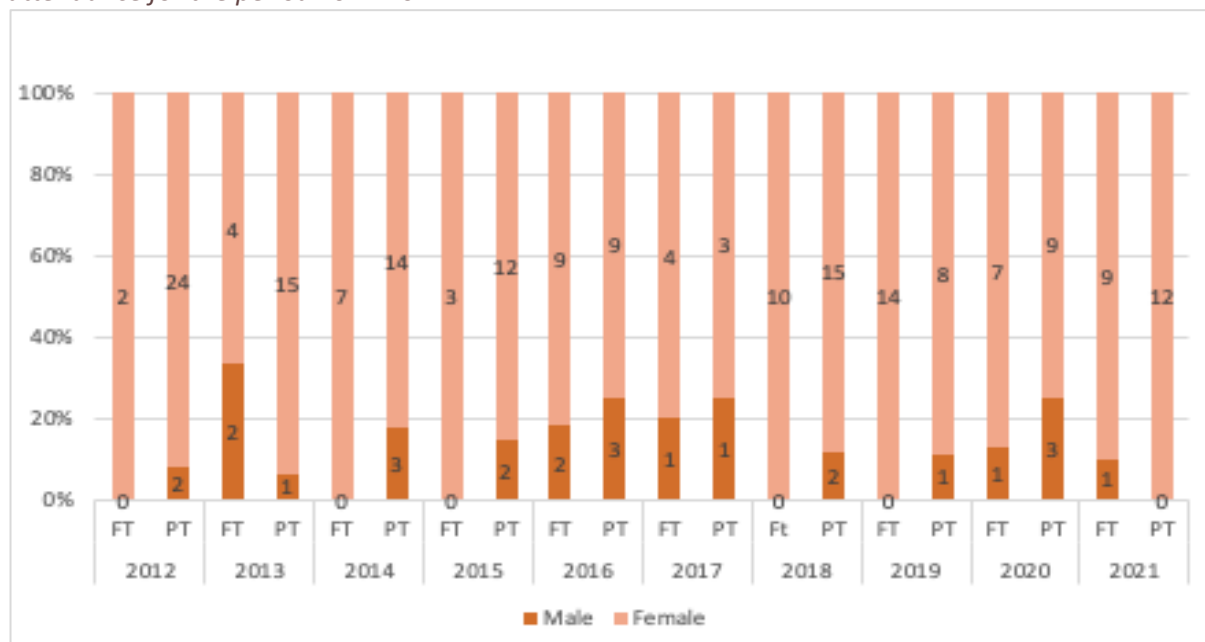
Degree classifications
In total, 193 students have completed the MSc since 2012. A further 70 students are currently on the course, and 17 students have withdrawn since 2012 of whom three (18%) were male and 14 (82%) were female. Within the course, potential bias is reduced through anonymous marking of assessments for each module and the student's final research study project.

Figure 4.1.3 highlights all programmes (MSc, Postgraduate Certificate and Postgraduate Diploma combined) and the table 4.2 presents data from each programme, in relation to the number of female and male students and their final award across grade boundaries (50-59%, 60-69% and 70% and above). To maintain consistency across years, despite University changes in classifications, we present grade boundaries.

Our data closely reflect the achievements of female students shared by Cardiff University where we are aware a similar proportion of female students have graduated with distinction-level grades for the years 2015-2018. Numbers are small but males may be underachieving on our MSc compared to females with only 8% of males achieving distinction in the last 10 years compared to 22% of females. Going forward, we will survey current and former students to understand male student experience and identify strategies to support male students (**AP 4.1.1**).

Figure 4.1.3: Grade boundaries by postgraduate taught students from 2012 – 2021
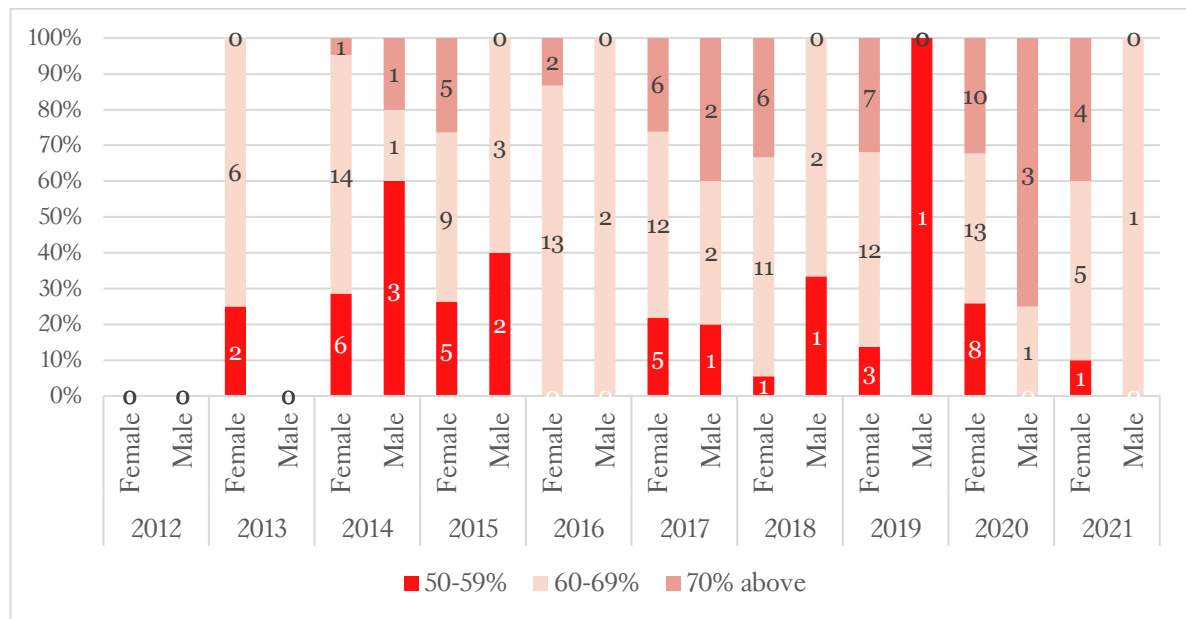
*We would like to highlight that the graph shows 0 students graduating in 2012. This is because our data starts from when students enrolled (which is 2012).

Table 4.2 Grade boundaries by gender for the period 2012 to 2021

Programme	Grade boundary	Female n (%) (n=167)	Male n (%) (n=26)
MSc	70% above	37 (22.2)	2 (7.7)
MSc	60-69%	78 (46.7)	8 (30.8)
MSc	50-59%	23 (13.7)	4 (15.4)
PG Diploma	70% above	1 (0.6)	2 (7.7)
PG Diploma	60-69%	10 (6.0)	3 (11.5)
PG Diploma	50-59%	1 (0.6)	2 (7.7%)
PG Certificate	70% above	3 (1.8)	2 (7.7%)
PG Certificate	60-69%	7 (4.2)	1 (3.8%)
PG Certificate	50-59%	7 (4.2)	2 (7.7%)

Figure 4.1.4 Number of students receiving 70% and above by year and gender
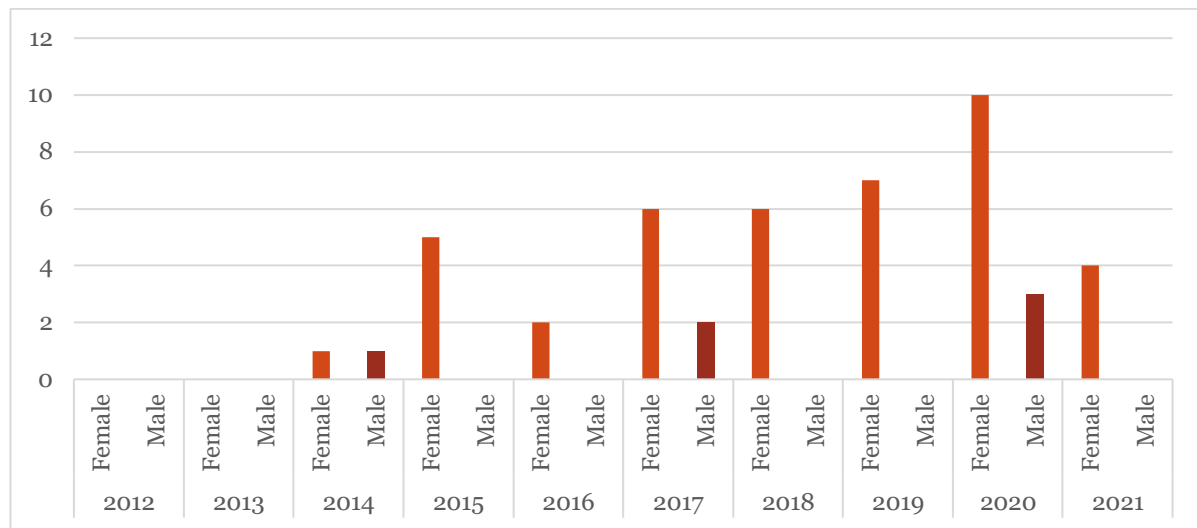
Impact: Progression of MSc students

Sabrina Bajwah completed the MSc in 2004 whilst working clinically as a GP. She was able to fit in the MSc around her NHS and family commitments supported by the flexibility of the course, completing it part-time. The MSc provided her with the building blocks for a Clinical Academic career. She subsequently completed a PhD within the department and was appointed Clinical Senior Lecturer in 2017. She co-chairs the CSI EDI committee.

Shaheen Khan is a consultant in palliative care. He completed the MSc in 2011 part-time. The course allowed him to develop valuable research and leadership skills. He uses these skills in his everyday clinical practice and his leadership roles of joint lead for the King's Health Partner's Palliative Care Clinical Academic Group and joint clinical director for Integrated Local Services.

Numbers of men and women on postgraduate research degrees
Full- and part-time. Provide data on course application, offers, acceptance and degree completion rates by gender.

In 2012, 0% of PhD applicants to the department were male. In 2016, after our last submission, we have actively promoted and targeted males to our PhD programme. This includes appointing Dr Matthew Maddocks as PhD co-ordinator, who acts as a point of contact for all applicants. Dr Maddocks has been a role model and has actively encouraged and supported male students.

> **Impact**
> There has been an improvement over the last 10 years in the percentage of applications from male students, from 0% male applicants in 2012 to 40% in 2021 (see Table 4.3).

However, we are aware that the translation into offers and acceptances onto the course does not always follow. The percentage of those who apply and then go on to accept their place on the course differs for male and female applicants. This ranges from 28-100% for female applications and 0-50% for male. We hope to address this going forward (**AP 4.1.2**).

Table 4.3 Applications, offers and acceptances for postgraduate research degrees at the Cicely Saunders Institute for the period 2012-2021

| | 2012 | | 2013 | | 2014 | | 2015 | | 2016 | |
	F	M	F	M	F	M	F	M	F	M
Applicants n(%)	2 (100)	0 (0)	4 (66.6)	2 (33.3)	4 (100)	0 (0)	4 (57)	3 (43)	7 (63)	4 (37)
Applicants who gained offers n(%)	2 (100)	0 (0)	4 (100)	2 (100)	0 (0)	0 (0)	0 (0)	1 (33)	5 (71)	2 (50)
Applicants who accepted their place n(%)	2 (100)	0 (0)	4 (100)	2 (100)	0 (0)	0 (0)	0 (0)	1 (33)	5 (71)	2 (50)

| | 2017 | | 2018 | | 2019 | | 2020 | | 2021 | | |
	F	M	F	M	F	M	F	M	F	M	NB
Applicants n(%)	2 (33)	4 (66)	8 (57)	6 (43)	8 (66)	4 (33)	14 (61)	9 (39)	5 (50)	4 (40)	1 (10)
Applicants who gained offers n(%)	1 (50)	0 (0)	6 (75)	3 (50)	4 (50)	1 (25)	6 (43)	2 (22)	5 (100)	1 (25)	0 (0)
Applicants who accepted their place n(%)	1 (50)	0 (0)	6 (75)	2 (33)	5 (62.5)	0 (0)	4 (29)	1 (11)	3 (60)	0 (0)	0 (0)

Figure 4.1.5: Postgraduate research (PGR) degree students registered at the Cicely Saunders Institute for the period 2012-2021
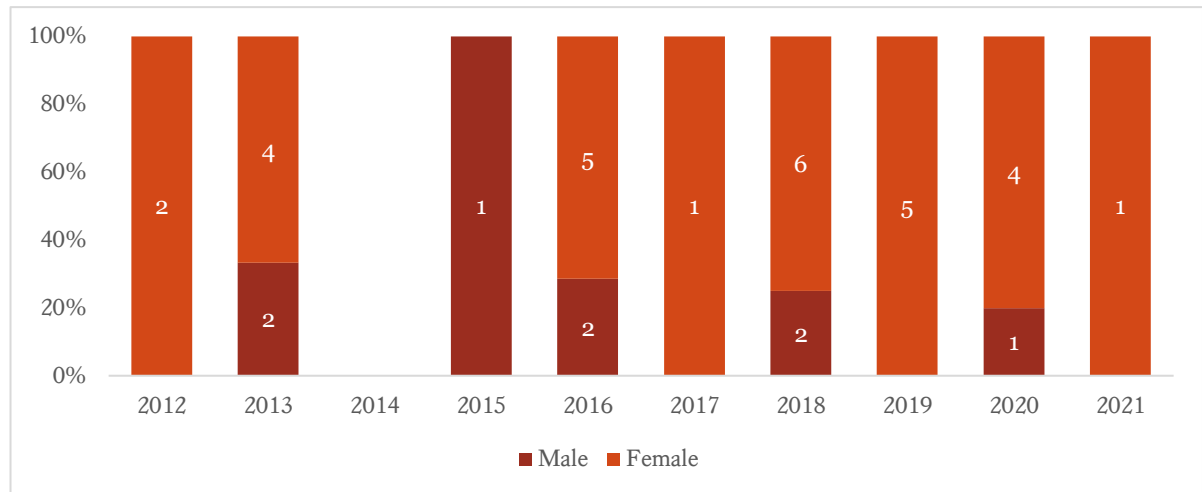
We are pleased that our PhD student population is reflective of the field of Palliative care with a total of 28 female (78%) and 8 male (22%) students registered from 2012-2021. Since 2012, 20 students have completed their PhD; 15 female (75%) and 5 male (25%). This is consistent with our PhD population and indicates no gender bias in completion.

Figure 4.1.6: Postgraduate research (PGR) degree students who have completed in the period 2012-2021
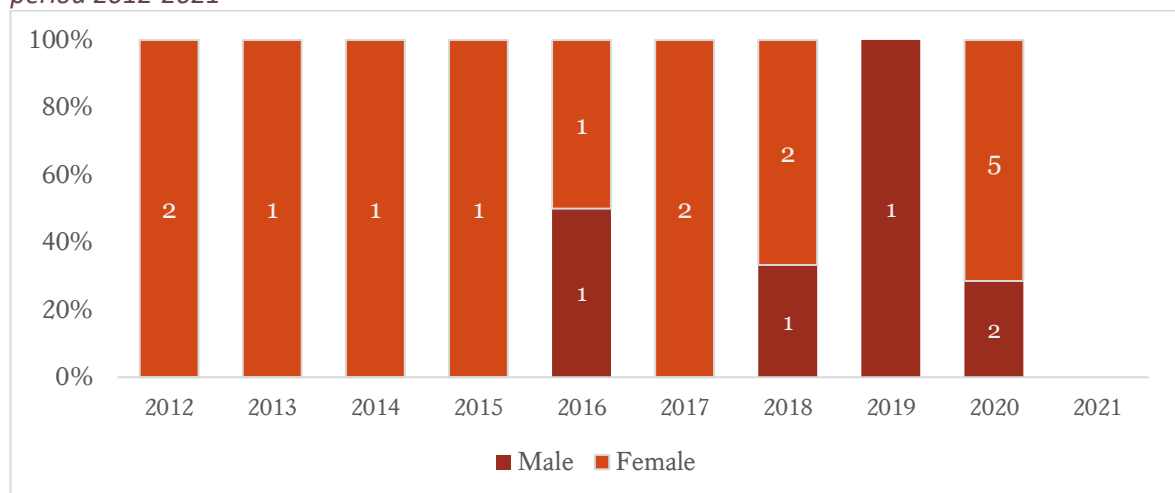
(viii) Progression pipeline between undergraduate and postgraduate student levels
        Identify and comment on any issues in the pipeline between undergraduate and postgraduate degrees

This category is not directly relevant to our institute as we do not offer any undergraduate courses. However, we are extremely proud of the nine (all female) MSc alumni who have continued their postgraduate studies and undertaken their PhD's with us. It is an area of concern that none of the male MSc students have progressed to PhD within the department. On reflection, the majority of those progressing from MSc to PhD have done so whilst undertaking Research Assistant positions attached to research project grants. Currently individuals are alerted to opportunities by their

tutor/dissertation supervisor on an ad hoc basis. We will seek to address this gender gap by sharing all Research Assistant and PhD Scholarship opportunities with all students on the MSc programme. We will further encourage all MSc students to apply for PhDs through whole group activities, e.g. meet and greet events with PhD students, research career sessions (**AP 4.1.3**). Finally, we will actively address a possible gender imbalance in our recruitment strategies by providing more male role models for MSc students. (**AP 4.1.2 & 3**)

Key achievements since 2016 Silver Award
- In 2018 and 2019, the MSc programme received 100% student satisfaction, 3% increase from 2017
- MSc start date moved from January to September and timings of lectures have been amended to ensure more equity for students.
- 100% of course leads attend Diversity Matters training. Previously 100% of course leads had attended KCL's Good Practice in Recruitment and Selection and Unconscious Bias training
- 2015-2019 all admission interview panels included male and females. Interviews are now no longer held. All applications reviewed by male and female staff
- Increase in male PhD applicants

Action points going forward
AP 4.1.1 To address the MSc award gap and better support our male student population
AP 4.1.2 To ensure fair selection process including ensuring male students and staff are included in all promotional materials and events
AP 4.1.3 To support male MSc students to apply for PhDs within the department
AP 5.6.4 Promote men in palliative care through events, providing male staff and students with visible role models

4.2. Academic and research staff data

(i)   Academic staff by grade, contract function and gender: research-only, teaching and research or teaching-only

In our previous application, there were small numbers of male staff members within the department (30% of academic staff and 11% of research staff). We have actively tried to address this with promotion of males within all our outward facing media and on our department website.

> **Impact**
> In 2021, 38% of academic staff and 21% of research staff are male. An increase from 30% and 11% respectively, in 2016 (see Figure 4.2.1).

We are still working to improve this to 25% for research staff to bring us into line with the palliative care speciality as a whole (**AP 4.2.1**).

While increasing numbers of male staff is important, concurrently we are committed to addressing issues surrounding the development of female staff. In recent years the leaky pipeline may be increasing within our department with the percentage of women in academic positions lower than those in research positions (Figure 4.2.3). Of note, the percentage of female Professors has decreased to 50% since 2018. We will monitor and increase female recruitment at senior levels to achieve 75% women at senior levels by 2025. **(AP 4.2.1)**.

Figure 4.2.1. Percentage of female research and academic staff since 2012
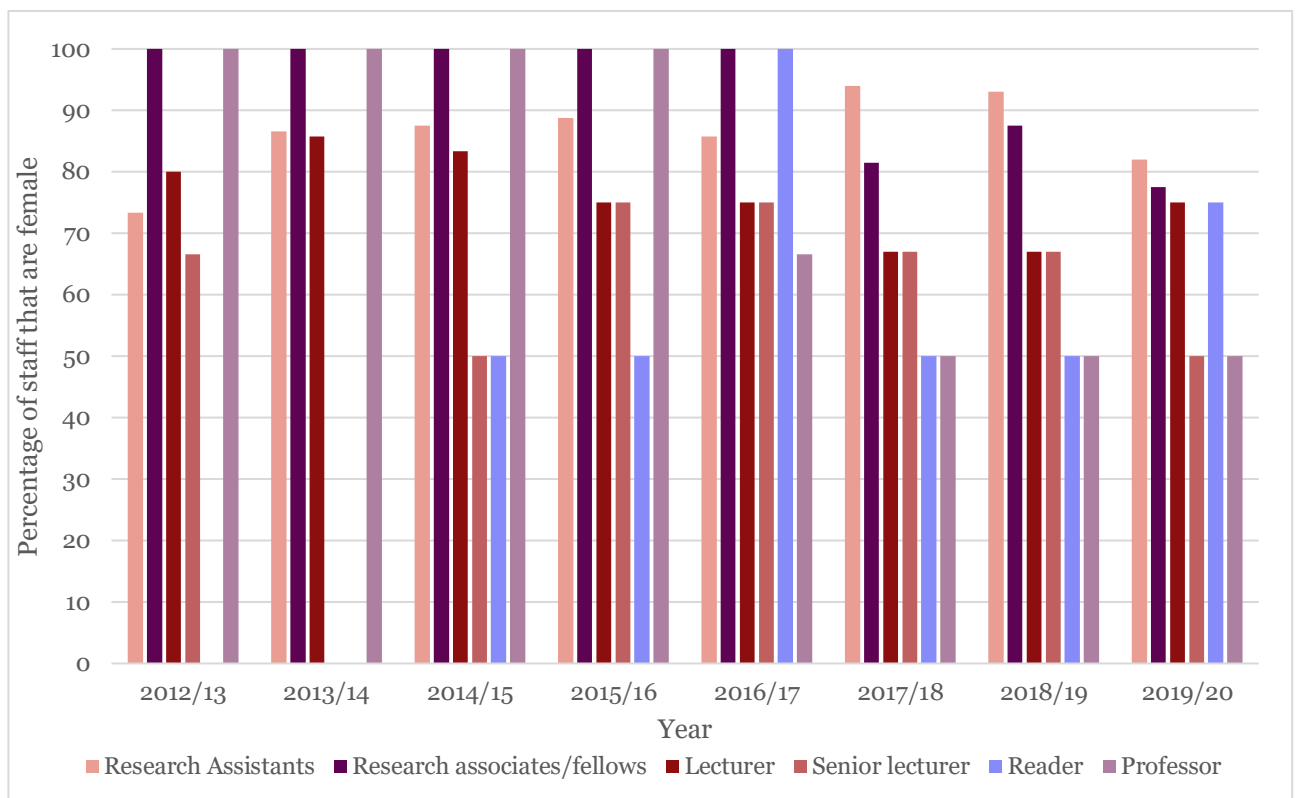
(ii)   Where relevant, comment on the transition of staff between technical and academic roles.

N/A

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

We have no staff employed on zero hours contracts.

As a research institute, we currently have 41 staff (85%) on fixed-term contracts (FTC) (see Figure 4.2.2). This due to contracts linked to research projects with funded time periods. Over the last 10 years, the proportion of male research staff on FTC has decreased while we have seen an increase for female research staff.

In 2018, the staff survey suggested that we needed to focus our work to achieve better outcomes.

"Having multiple successive FTC has had a negative effect on me personally and professionally. It has made it very difficult to plan for my future in terms of family and location, and I feel disempowered by the constant threat of losing my job"
Quote from 2018 staff survey

Therefore, in 2018 we created a small FTC working group. The group are particularly focused on the development, retention, and progression of those on FTC. The group developed the Department Opportunities document to support staff development. Future work plans to examine the determination of contract length with Principal Investigators through anonymous interviews (**AP 1.3 and AP 5.1.1**).

Figure 4.2.2 Gender Split of Academic and Research Staff on Fixed-Term Contracts 2012-2020
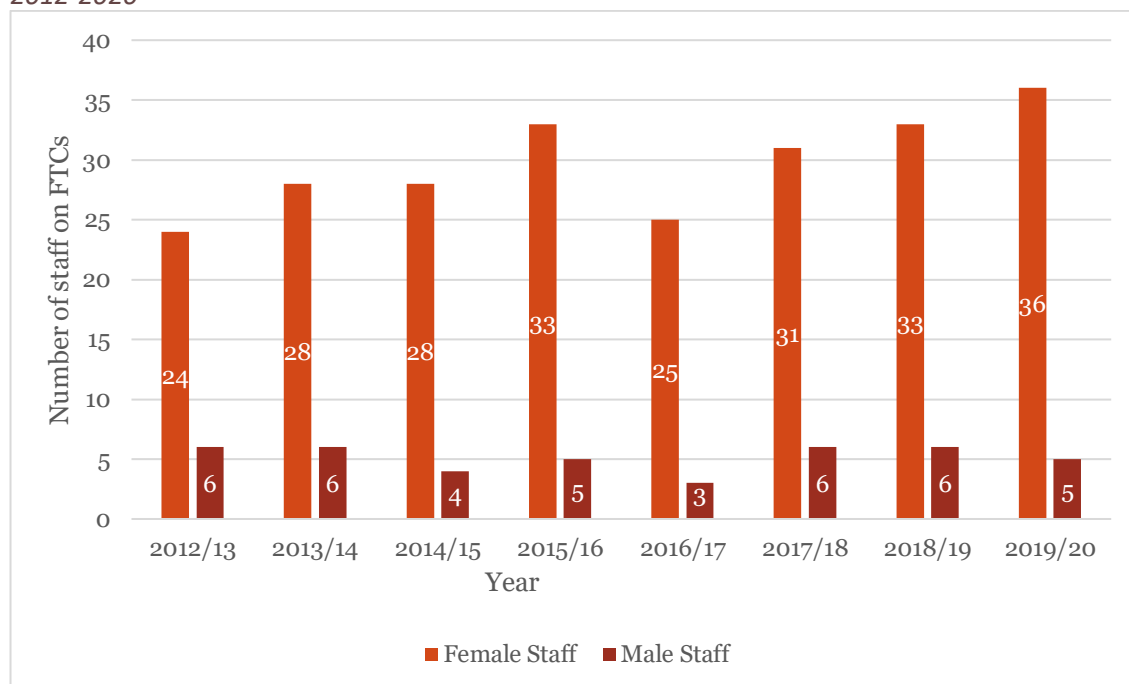
Table 4.4. Breakdown of research and academic staff on fixed-term or permanent contracts by gender

	Female FTC	Female Perm	Male FTC	Male Perm
2012/13				
Research	**20 (95.2)**	**1 (4.8)**	**5 (100)**	**0 (0)**
- Clinical Research Fellow	2	0	2	0
- Research Fellow	5	1	0	0
- Research Associate	2	0	0	0
- Research Assistant	11	0	3	0
Academic	**4 (50)**	**4 (50)**	**1 (33.3)**	**2 (66.6)**
- Professor	0	2	0	0
- Reader	0	0	0	1
- Senior Lecturer	1	1	0	1
- Lecturer	3	1	1	0
2013/14				
Research	**23 (95.8)**	**1 (4.2)**	**4 (100)**	**0 (0)**
- Clinical Research Fellow	2	0	2	0
- Research Fellow	3	1	0	0
- Clinical Researcher	2	0	0	0
- Research Associate	3	0	0	0
- Research Assistant	13	0	2	0
Academic	**5 (62.5)**	**3 (37.5)**	**2 (50)**	**2 (50)**
- Professor	0	2	0	0
- Reader	0	0	0	1
- Senior Lecturer	0	0	1	1
- Lecturer	5	1	1	0
2014/15				
Research	**24 (96)**	**1 (4)**	**3 (100)**	**0 (0)**
- Clinical Research Fellow	2	0	1	0
- Research Fellow	3	1	0	0
- Clinical Researcher	2	0	0	0
- Research Associate	5	0	0	0
- Research Assistant	14	0	2	0
Academic	**4 (44.4)**	**5 (55.5)**	**1 (33.3)**	**2 (66.6)**
- Professor	0	2	0	0
- Reader	0	1	0	1
- Senior Lecturer	0	1	0	1
- Lecturer	4	1	1	0
2015/16				
Research	**28 (96.6)**	**1 (3.4)**	**4 (100)**	**0 (0)**
- Research Fellow	5	1	0	0
- Research Associate	4	0	0	0
- Research Assistant	16	0	2	0
- PhD Fellow	3	0	2	0
Academic	**4 (50)**	**4 (50)**	**1 (33.3)**	**2 (66.6)**
- Professor	0	2	0	0
- Reader	0	1	0	1
- Senior Lecturer	2	1	0	1

- Lecturer	2	1	1	0
2016/17				
Research	**23 (100)**	**0 (0)**	**3 (100)**	**0 (0)**
- Research Fellow	4	0	0	0
- Research Associate	3	0	0	0
- Research Assistant	12	0	2	0
- PhD Fellow	4	0	1	0
Academic	**2 (28.6)**	**5 (71.4)**	**0 (0)**	**3 (100)**
- Professor	0	2	0	1
- Reader	0	1	0	0
- Senior Lecturer	2	1	0	1
- Lecturer	0	1	0	1
2017/18				
Research	**29 (100)**	**0 (0)**	**5 (100)**	**0 (0)**
- Research Fellow	4	0	0	0
- Research Associate	5	0	3	0
- Research Assistant	17	0	1	0
- Clinical Research Fellow	3	0	1	0
Academic	**2 (25)**	**6 (75)**	**1 (20)**	**4 (80)**
- Professor	0	2	1	1
- Reader	0	2	0	1
- Senior Lecturer	1	1	0	1
- Lecturer	1	1	0	1
2018/19				
Research	**30 (100)**	**0 (0)**	**5 (100)**	**0 (0)**
- Research Fellow	4	0	0	0
- Research Associate	6	0	2	0
- Research Assistant	15	0	2	0
- PhD Fellow	5	0	1	0
Academic	**3 (37.5)**	**5 (62.5)**	**1 (20)**	**4 (80)**
- Professor	0	2	1	1
- Reader	0	1	0	1
- Senior Lecturer	2	1	0	1
- Lecturer	1	1	0	1
2019/20				
Research	**33 (100)**	**0 (0)**	**5 (83.3)**	**1 (17)**
- Research Fellow	4	0	1	0
- Research Associate	10	0	3	0
- Research Assistant	9	0	0	1
- PhD Fellow	9	0	1	0
Academic	**3 (33)**	**6 (66)**	**0 (0)**	**6 (100)**
- Professor	0	3	0	3
- Reader	2	0	0	1
- Senior Lecturer	0	1	0	1
- Lecturer	1	2	0	1

2020/2021 Data not yet available from KCL HR Department

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

Since 2012, 82% of research staff who have left the institute have been female. This is aligned to the proportion of female research staff we have in the department. Seven (13.2%) leavers worked part time, all of whom were female. Only one Research Fellow who left in 2015/16 was on an open-ended contract. Every other member of research staff who has left the institute in the last 10 years has been on a FTC.

Since 2012, 60% of academic staff leavers were female. No leavers worked part time and two were on a FTC.

We recognise that we do not formally interview leavers. We will introduce leavers interviews to learn how we might retain staff better and develop actions, where needed, to improve retention (**AP 4.2.2**).

Table 4.5 Academic leavers by grade and gender

	2012/13		2013/14		2014/15		2015/16		2016/17		2017/18		2018/19		2019/20		
	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	NB
Research	4	1	5	1	2	0	8	1	2	0	4	0	8	1	8	1	1
- Fellow	-	-	1	1			1		1		1					1	
- Associate	-	-	1		1		1						2		4		1
- Assistant	-	-			1		4		1		3		4		4		
- PhD Fellow	-	-	3				2	1									
Academic	1	0	0	0	0	0	1	0	1	1	0	0	0	0	0	1	0
- Professor																	
- Reader										1							
- Senior lecturer	1																
- Lecturer							1		1							1	

*Gender not available by role for research staff 2011-2013
Data not yet available for 20/21

Key achievements since 2016 Silver Award
- Increase in percentage of male academic and research staff
- Development and use of 'Department Opportunities' document to support staff development and increase opportunities at end of contract

---

Action points going forward
AP 4.2.1 Monitor data and mitigate against leaky pipeline for academic females in department
AP 1.3 and AP 5.1.1 Continue to work to mitigate against the insecurity of FTC
AP 4.2.2 Conduct leavers interviews for all leavers

Total number of words in section 4: 1801

5. SUPPORTING AND ADVANCING WOMEN'S CAREERS
Recommended word count: 6500 words

5.1. Key career transition points: academic and research staff
(i)   Recruitment
        1)   job application and success rates by gender and grade

All recruitment materials use gender-neutral language. Vacancies are advertised on internal and external websites (e.g. 'jobs.ac.uk'). Opportunities are highlighted at department meetings and internal candidates supported to apply, as a result we've seen members of staff promoted. Academic and teaching posts are advertised across levels (e.g. Lecturer/Senior Lecturer/Reader) to welcome candidates across a range of backgrounds and seniority. Our commitment to EDI is explicit in the recruitment materials.

needs for palliative care, supporting PhD fellows and leading in dissemination and impact strategy and delivery. There is potential for the postholder to bring expertise and interests from a range of methodological approaches including (but not limited to) health services research, outcome measurement, routine data analysis, health economics, statistics, and complex intervention development and testing.

The post holder will work with Professor Richard Harding and Professor Irene Higginson, the two BUILD-pall PhD fellows (one clinical and one non-clinical, to be appointed), the wider academic and research team at the Cicely Saunders Institute, partners nationally and internationally to disseminate and maximise impact of findings, our PPI network (Patient and Public Involvement) and ensure that the Trustees of Cicely Saunders International are fully informed of progress. They will also be a key point of contact for Institute staff in the process of running programme research projects, including applications to Research Ethics Committees, and day to day project management.

This post will be offered on a fixed-term contract for 3 years
This is a full-time post - 100% full time equivalent

Key responsibilities

- To take a leading role in the delivery and expansion of the BUILD-Pall led by the Cicely Saunders Institute
- To support the BUILD-Pall PhD fellows
- To liaise with colleagues within KCL and collaborating partners in applying for research funding
- To develop a personal research plan leading new analyses, grant writing and peer review outputs
- To undertake analysis and reporting of data under line management of Professors Harding & Higginson.
- To disseminate the research undertaken by the Institute locally, nationally and internationally
- To create educational resources and to evaluate these resources, and examine the reach and impact of these resources in relation to identifying funding opportunities and furthering the reach of palliative care research
- To keep to agreed deadlines in all aspects of the CSI research programme

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Equality, diversity and inclusion

King's is an inclusive and welcoming university. We embrace diversity and want everyone to be able to bring their whole selves to work and succeed. We promote flexible working as a key enabler of inclusion.

Screenshot of recent CSI job advert

Shortlisting is carried out by a minimum of two people (1F; 1M) and against set criterion. Panel members are required to undertake 'Diversity Matters' training that include unconscious bias, inclusive working practices, micro-aggressions, and inappropriate language. Since our Silver application, 100% (n=28) of people involved in recruitment panels have completed training; 100% of staff at lecturer level and above have completed training; 95% of all staff have completed training.

In 2021, 78% of staff (77% F, 78% M) agreed that "The recruitment process is transparent and accountable". The number of posts and applicants varies by year, but the proportion of applicants shortlisted has previously shown preference to female candidates. To mitigate against this, we made male and female representation on interview panels compulsory. From January 2015 to 2018, 100% of panels included male and female staff. We are committed to panel diversity but recognise this comes with a potential for over-burdening male staff. Therefore, since 2018, gender diversity has been desirable but not compulsory, we now strive for 80% of our interview panels to include male and female staff (**AP 5.1.3**). Going forward, we will develop a reciprocal relationship with a male-dominated department to enable gender diversity on panels without over-burdening CSI staff (**AP 5.1.3)**.

Table 5.1 Recruitment data

		2013-14		2014-15		2015-16			2016-17			2017-18			2018-19		
		F	M	F	M	F	M	U	F	M	U	F	M	U	F	M	U
Research Assistant	Applicants	114	32	32	11	88	169	0	149	55	3	74	21	3	61	24	0
	Shortlisted	9	3	14	1	8	6	0	20	14	1	29	4	1	15	6	0
	Appointed	2	0	3	0	4	0	0	8	1	0	8	0	0	3	1	0
	% appointed/ applications	2	0	9	0	5	0	0	5	2	0	11	0	0	5	4	0
Research Associate /Fellow	Applicants	30	22	54	6	28	9	0	18	6	2	22	11	2	21	12	0
	Shortlisted	5	0	13	1	7	2	0	8	1	0	7	3	1	4	4	0
	Appointed	2	0	2	0	1	1	1	2	0	0	2	2	0	1	1	0
	% appointed/ applications	7	0	4	0	4	11	-	11	0	0	9	18	0	5	8	0
Academic	Applicants	3	2	N/A	N/A	N/A	N/A		17	34	2	5	3	1	0	0	0
	Shortlisted	3	2	N/A	N/A	N/A	N/A		*	*		2	1	1	0	0	0
	Appointed	1	1	N/A	N/A	N/A	N/A		1	2	0	0	1	0	0	0	0
	% appointed/ applications	33	50	N/A	N/A	N/A	N/A		6	6	0	0	33	0	0	0	0

		2019-20			2020-21		
		F	M	U	F	M	U
Research Assistant	Applicants	32	6	0	156	49	56
	Shortlisted	7	0	0	-	-	-
	Appointed	2	0	0	-	-	-
	% appointed/ applications	6	0	0	-	-	-
Research Associate /Fellow	Applicants	23	11	0	19	7	5
	Shortlisted	7	3	0	-	-	-
	Appointed	3	1	0	-	-	-
	% appointed/ applications	13	9	0	-	-	-
Academic	Applicants	8	1	0	4	3	1
	Shortlisted	3	0	0	-	-	-
	Appointed	1	0	0	-	-	-
	% appointed/ applications	13	0	0	-	-	-

Source: KCL HR data

*missing data

2013-16, No Senior Lecturer, Reader or Professor vacancies advertised; NB. Data for 20-21 is incomplete as we only have application data. The number of posts and applicants varies considerably by year, but the proportion of applicants shortlisted has previously shown preference to female candidates.

Figure 5.1.1 Percentage of Academic and Research staff who agree or disagree with statement 'From what I have seen the department / Faculty undertakes recruitment and selection fairly and transparently'
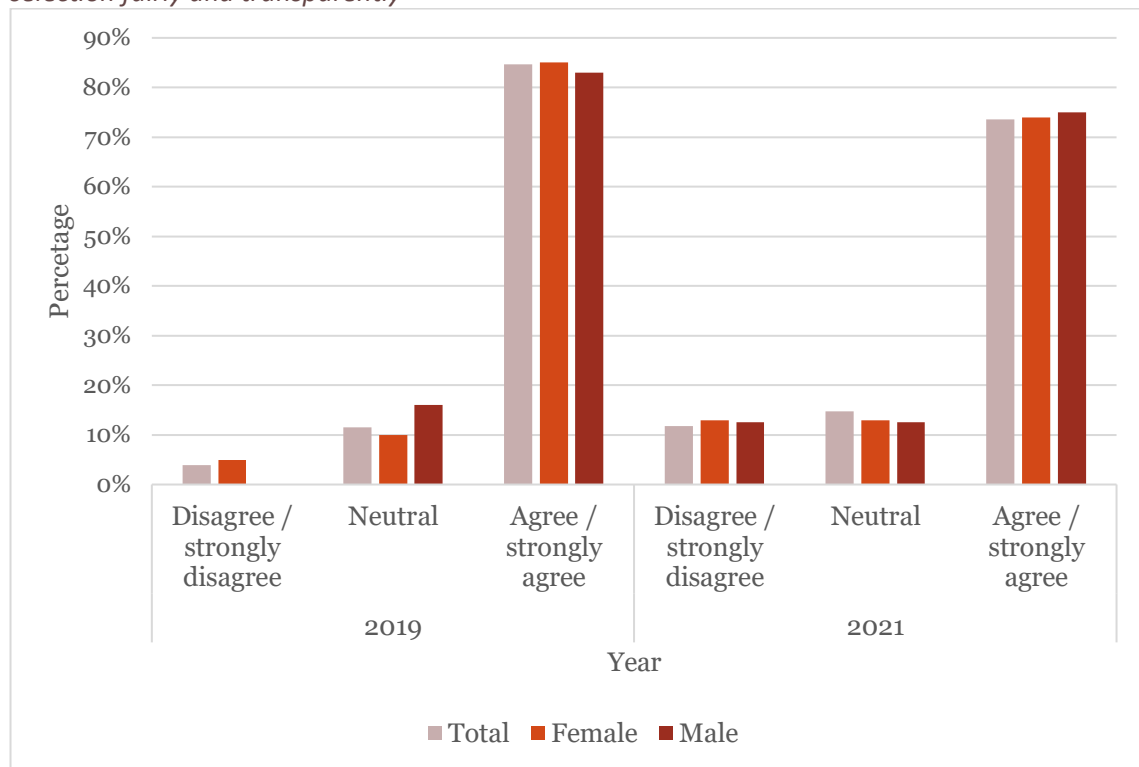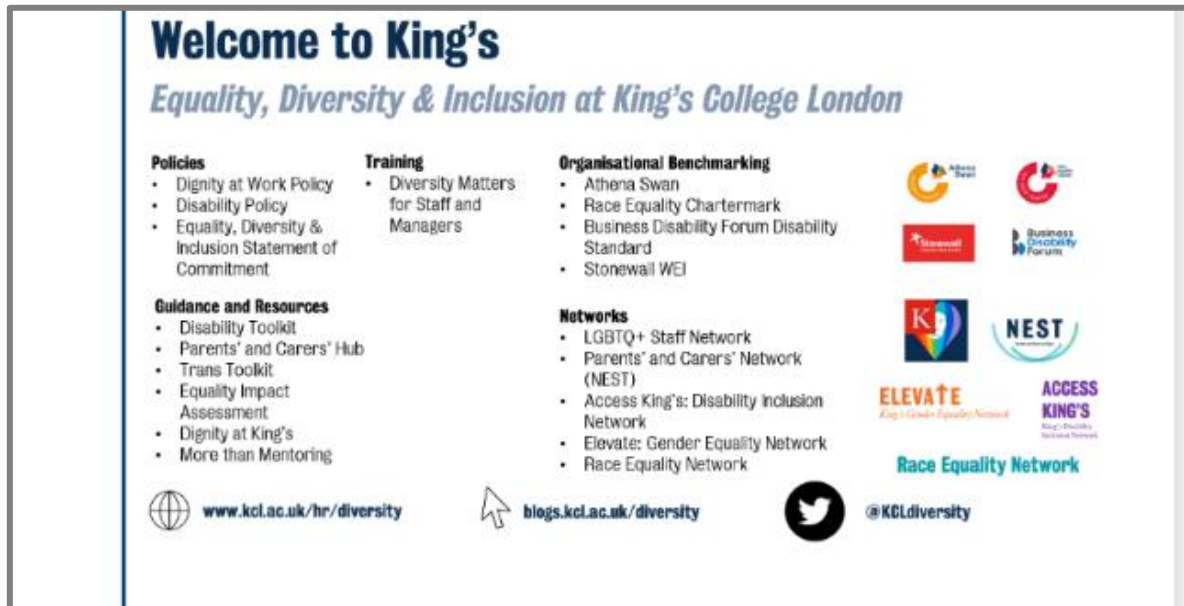

(ii)   Induction

The staff induction is vital and the same irrespective of professional grade or position. In 2019, only 47% of new staff had found the induction helpful. In response, we did the following (please note, items in bold are since 2019):

We revised the information provided in the induction making it **more succinct.** On their first day, new members of staff are provided with:

- A welcome pack including information on the department, peer support groups, social events, department wide development sessions, **department opportunities** and annual leave policies. **Information is also provided about all nine executive groups, including EDI, and new staff are encouraged to undertake 'Diversity Matters' training** (see section 2).
- A 'buddy'. This is a member of staff of similar grade/role who works on a different project or team to provide peer support.
- A welcome meeting with their line manager to discuss any requirements eg working hours, caring commitments, and flexible working.

New members of staff are also given a tour of the building, introduced to colleagues and the **staff photo board and EDI noticeboard.** New staff are directed to the Welcome to King's EDI webpage.

Screenshot of Welcome to King's EDI page

> **Impact**
>
> Through our actions, there has been a 20% increase in reports of helpful inductions from 47% in 2019 to 67% in 2021
>
> *"Induction was great, and my buddy was great, really supportive and helped me settle into the department really well."*
> Quote from 2021 survey

We will continue to evaluate our induction. We acknowledge that it is more difficult to join a department remotely and have sought to ensure new staff feel supported and welcomed during the COVID-19 pandemic (**AP 5.1.2**).

Table 5.2. Induction and new staff welcome data

	2015	2017	2019	2021
Department induction was helpful (% strongly agree/agree)	72	75	50 (64% F/33% M)	67 (50% F/25% M)
New starter assigned a buddy (% yes)	-	62.5	65 (77% F/15% M)	60 (67% F/0% M)

(iii)   Promotion

Academic staff can apply to new positions when vacancies are created or via the formal KCL annual academic promotion process. We actively tried to improve knowledge through departmental meetings, PDRs and emails from both the business manager and CSI Director.

In 2015-2018 we identified a leaky pipeline, where more male than female staff were achieving academic promotion (see Figure 5.1.3).
Our actions have included initiatives aimed at promoting career progression for females, particularly within the academic community:

These include
- Mentoring (4F; 2M);
- Promotions workshops (7F; 3M);
- Opportunities to deputise on decision-making committees;
- Funds to support return from career breaks and to cover childcare costs when attending conferences/training (1F);
- Leadership development programmes (4F supported to attend):

Impact
Our 2018-2020 data demonstrates an increase in female academics receiving promotions (2015-2018: 20% of all promotions female, 2018-2020: 75% of all promotions female). Since 2016, we have had no unsuccessful applications for promotions.

Figure 5.1.2 Gender split of successful academic promotions via University promotions process
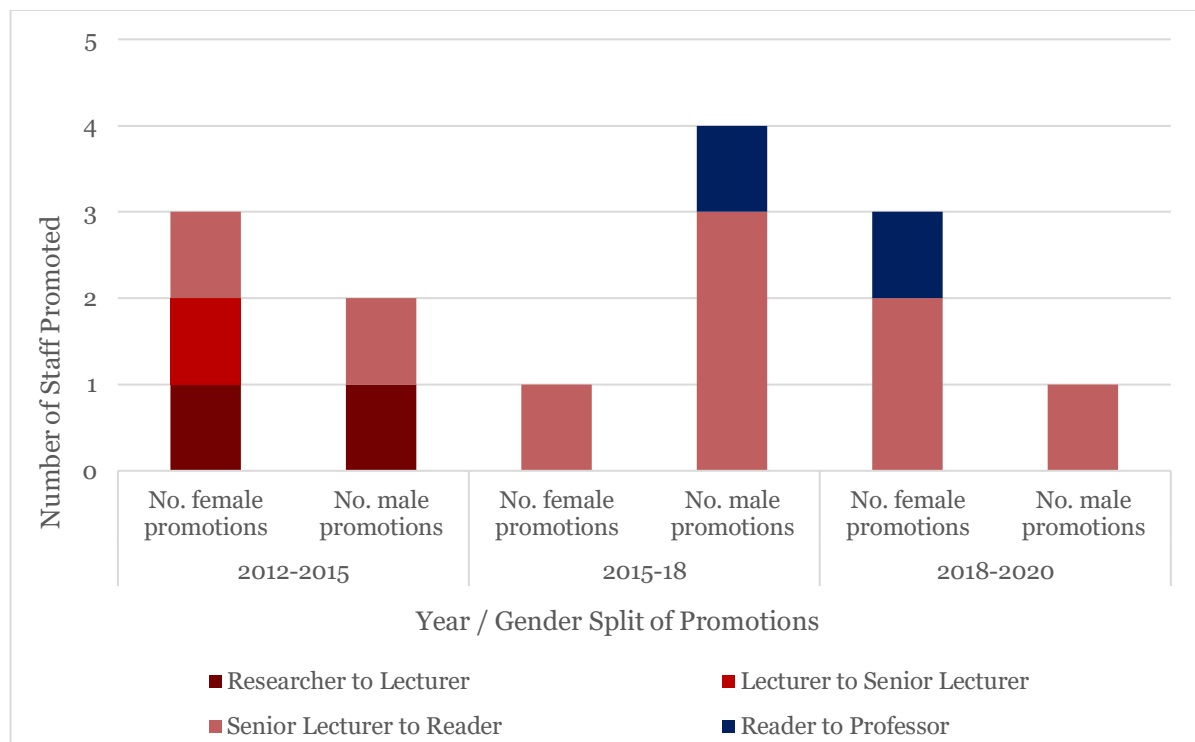
Source: KCL HR data *NB. Only one unsuccessful application, one female staff member, senior lecturer to reader, 2013-14*

> **Impact**
> In 2015 the proportion of academic staff members stating that the promotions process is transparent improved (from 20% in 2013 to 36% in 2015) but was still low. To address this, in department meetings and PDR workshops, we have actively encouraged the discussion of aspiration and wishes, career development and promotion. In 2021, 100% of PDRs involved discussion on aspiration and wishes and action plan for career development.

However, 33% (78% F, 22% M) of staff still report the criteria for promotion are not clear, we will continue to work to reduce this (**AP 5.3.2**)

(iv)   Department submissions to the Research Excellence Framework (REF)

In the 2008 Research Assessment Exercise (RAE) three females and two males were returned. In the 2014 REF we returned 12 eligible staff members (9F, 3M), 92% (12/13), the largest percentage within KCL (Table 5.3). We included seven Early Career Researchers (ECRs) (6F, 1M), four who originally joined our department as Research Assistants (Figure 5). To increase the proportion of female staff returned further, we did the following:

- Monthly departmental meetings where staff are encouraged to bring papers they are writing for input from all staff
- Monthly departmental methodological skills sessions supporting writing skills
- Faculty "How to write a 3* or 4* paper" sessions (quarterly)
- Faculty two-day workshops 'Writing for Publications and Grants'

> **Impact**
> In the 2021 REF, we returned 16 members of staff (11F, 5M), this was 100% of eligible staff and double those returned in 2008. Five of the eleven females (no males) were ECRs.

Figure 5.1.3 REF return 2001-2021

Grouped bar chart titled "REF return 2001-2021." Y-axis: "Number of M / F" from 0 to 12. X-axis: "REF Submission Year" showing 2001, 2008, 2014, 2021.

- 2001: Females eligible = 4, Females returned = 2
- 2008: Males eligible = 2, Males returned = 2, Females eligible = 5, Females returned = 3
- 2014: Males eligible = 3, Males returned = 3, Females eligible = 10, Females returned = 9
- 2021: Males eligible = 5, Males returned = 5, Females eligible = 11, Females returned = 11

Legend: Males eligible, Males returned, Females eligible, Females returned

Source: KCL Central data and local records

Key achievements since 2016 Silver Award
- 100% of recruitment panels have undertaken Diversity Matters training
- Both male and female staff are represented on 100% of interview boards until 2018
- 78% of staff agree the recruitment process is transparent and accountable in 2021
- Induction process for new staff has been revised with a 20% increase in staff reporting it was useful
- 100% of PDRs include discussions on career development
- Initiatives implemented to support female staff in their career progression which have been well attended and resulted in increased in successful promotions
- Increase in number of staff returned in 2021 REF and percentage of male and female staff returned is in line with department gender split

Action points going forward
AP 5.1.1 Create more equality and understanding around fixed term contracts
AP 5.1.2 Ensure there is a sense of belonging and inclusion within the department
AP 5.1.3 Ensure equitable recruitment
AP 5.3.2 Staff have a clear understanding on the criteria for pay and promotion processes

5.2. Key career transition points: professional and support staff

(i) Induction

Please see section 5.1 (ii). Our induction process is the same for all staff and PhD students.

(ii) Promotion

There is no formal promotions process for Professional Services (PS) staff, although PS staff can apply for more senior roles within and outside of KCL. PS staff are co-line managed by an academic and the Institute Business Manager. This arrangement gives PS staff support and guidance to develop research skills. The Business Manager has oversight of PS initiatives across KCL and opportunities for operational skills development. This dual support has resulted in multiple staff promotions (see impact boxes).

PDR discussions highlighted that PS staff felt there was a lack of opportunity to progress to researcher roles. In response, a new 'Research Projects and Coordination Assistant' (RPCA) role was created. This role is intended as a stepping-stone between administrator and research assistants. The roles sit within the Professional Services team but are research contracts.

> **Impact**
> In the last ten years multiple PS staff have been promoted into new roles within the department. Most recently, one temporary member of PS staff has been appointed to a Research Assistant role and another applied for a promotion from a grade 4 to grade 5 role and was successful.

Impact: Promotion of PS staff

Joanna Davies joined the department in 2012 as Executive Assistant. She developed her statistics skills on the Research Methods and Statistics MSc module and in 2013 made the transition to Research Assistant. She was supported to apply and win a competitive PhD scholarship.

Debbie Tonkin joined in 2014 as a Project Administrator/PA. After 2 years, Debbie was supported by senior colleagues to apply for the Business Manager post. She was successful and mentored by the CSI Director. Debbie been given multiple opportunities to enhance her skills beyond the duties of the role.

Harry Watson joined the department on a temporary basis as a Research Administrator in 2020. Through regular meetings and discussions with academics and the CSI Director, his ambition for a research career was realised and he successfully obtained a Research Assistant role in 2021.

Key achievements since 2016 Silver Award
- Creation of RPCA roles to develop PS staff who wish to have a research career
- Multiple promotions of PS staff, supporting their development in both research and operations

5.3 CAREER DEVELOPMENT: ACADEMIC STAFF

(i) Training

"I have received great support in being able to apply for courses and support in grant applications."
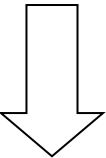Quote from 2021 survey

We provide a comprehensive suite of development activities for all staff (Figure 5.3.1). This continues to evolve, depending on the need. In addition, bespoke training activities have been developed depending on the 'transition point' of staff. We provide tailored support to early career researchers including grant writing workshops, sessions on writing a 3 star and 4-star paper and chairing national and international speaker sessions. All research staff are also actively encouraged to meet with external speakers.
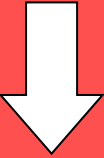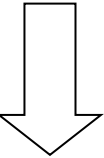
> **Impact**
> In 2019, 77% of all academic staff had effective PDR discussions (76% F; 75% M) around training. Subsequently, research staff members were encouraged to take up to 10 days training a year in addition to in house training. Leadership courses were highlighted and supported with funding. 2021 survey data, shows an improvement of effective PDR discussions for female staff from 77% to 83%.

However, only 67% of male staff reported effective conversations in 2021 compared to 75% in 2019. We will continue to aim to improve this and specifically support the training needs of male staff **(AP 5.3.1)**.

Figure 5.3.1 Development Activities for PhD Students and Academic Staff

	CSI initiatives	KCL initiatives
Students	Networking lunches with external speakers 2 supervisors and supervision panel PhD progress committees PhD support group PhD Day - Celebrating postgraduate research Exposure to peer review process with CSI Director Cicely Saunders Institute Seminar Series Journal Club Evidence Update Methodological Skills workshop Researchers Exchange Department Exchange Lecture Series	KCL Graduate School offers career development workshops
Post Doc	Mentoring workshop Post Doc support group Active discussion of promotion at PDR Exposure to peer review process with CSI Director Engagement in grant applications underway Cicely Saunders Institute Seminar Series Evidence Update Journal Club Methodological Skills workshop Researchers Exchange Department Exchange Lecture Series	Mentoring Public Speaking Master class Research Staff Network Promotions workshops Media Training
Lecturer	Mentoring workshop Informal mentoring	More than Mentoring Mutual Mentoring

	Peer review of grant applications Proactive interviews for fellowships Active discussion of promotion at PDR Cicely Saunders Institute Seminar Series Evidence Update Journal Club Methodological Skills workshop Lecture Series Researchers Exchange Department Exchange All lecturers offered a departmental mentor	Aurora Leadership StellerHE Development Programme Research Staff Network Promotions workshops Media Training King's Academy products
Senior Lecturer 	Mentoring workshop SLs offered departmental mentor Active discussion of promotion at PDR Practice interviews Cicely Saunders Institute Seminar Series Evidence Update Journal Club Methodological Skills workshop Researchers Exchange Department Exchange Lecture Series	More than Mentoring Mutual Mentoring Aurora Leadership Development Programme Research Staff Network Promotions workshops Media Training
Reader 	Mentoring workshop External mentoring Leadership courses R offered departmental mentor Active discussion of promotion at PDR Practice fellowships interviews Cicely Saunders Institute Seminar Series Evidence Update Journal Club Methodological Skills workshop Researchers Exchange Department Exchange Lecture Series	More than Mentoring Mutual Mentoring Aurora Leadership Development Programme Media Training
Professor	Mentoring workshop External mentoring Leadership courses Active discussion of promotion at PDR Cicely Saunders Institute Seminar Series Evidence Update Journal Club Methodological Skills workshop Researchers Exchange Department Exchange Lecture Series	More than Mentoring Mutual Mentoring Aurora Leadership Development Programme Research Staff Network Promotions workshops Media Training

(ii)   Appraisal/development review

Between June and September, all staff participate in PDR. This supplements regular review meetings, and focuses on career reflections, development, and goals. Web-based downloadable training resources are provided by KCL to ensure consistency and guidance. We are committed to guiding those in more senior positions in best practice with regards to EDI considerations during the PDR process (**AP 5.3.1**). Since 2019, we have actively encouraged staff to attend the 'How to get the best from your PDR session' run by KCL and run training sessions within the department.

Impact

Insights from the annual staff survey provide evidence for continual improvement. Comparison of the years 2019 (69% - 76% of female staff 50% of male staff) and 2021 (82% - 79% of female staff and 100% of male staff) identify an improvement among staff agreeing the PDR process was useful for them and in 2021 0% of staff reported the PDR as not useful. Below, we similarly draw on the annual staff survey data to provide more specific details from staff perceptions of their satisfaction with the PDR process and specifically their discussion with their line manager. We can particularly see improvements around discussions of career development and academic citizenship, such as membership on executive groups.

Figure 5.3.2 Academic staff members' perceptions of satisfaction with the PDR process. Percentage based on number of staff who answered 'yes effectively' or 'yes somewhat effectively' to the listed survey questions
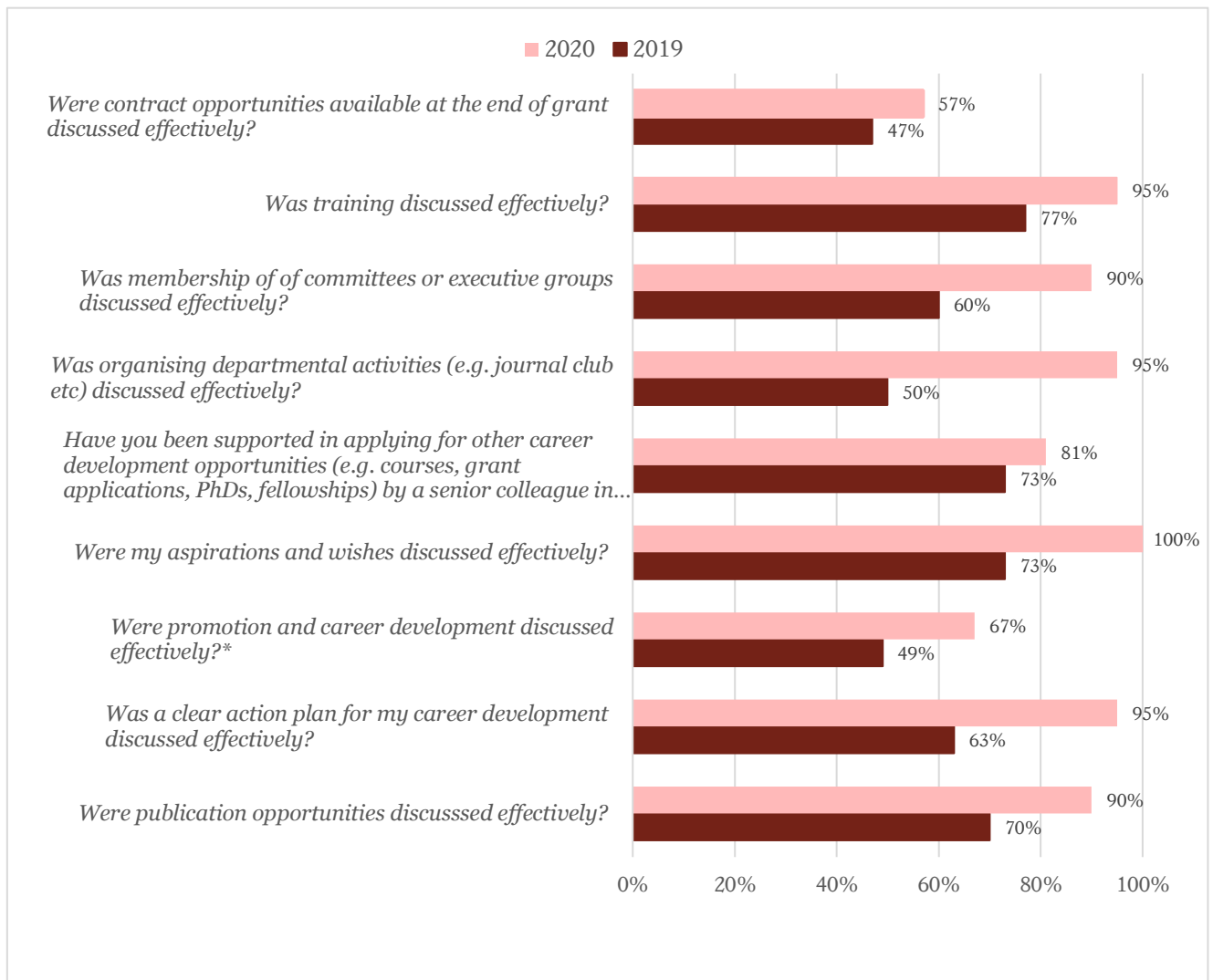
*Variation in this question between 2019 and 2020 surveys. 2019 had a question for effective discussions on promotion and career development separately. These were merged into one question in the 2020 survey. 49% in 2019 is based on the average answers of the two questions.

(iii)   Support given to academic staff for career progression

Recognising our leaky pipeline for female academic staff, we have actively supported female staff to attend leadership courses. This has included discussion of available courses in department meetings and PDR sessions.

Impact

Courses attended include:

- NIHR Ashridge Leadership Programme (1 F, BAME attendee who has now been promoted to Professor),
- STELLAR Higher Education Programme (1 F senior clinical lecturer attendee)
- Academy of Medical Sciences Leadership Programme (1 F senior lecturer attendee who has now been promoted to Professor).

"I am very well supported in my development and achieving my ambitions"
Quote from 2019 survey

"There's lots of support from senior members of the department when you want to advance."
Quote from 2021 survey

Ahead of KCL's annual promotion, we notify all eligible staff. Candidates who have personal circumstances (such as parental leave, part-time working or disability) that have affected their output can submit a personal circumstances form. The personal circumstances form goes to a separate panel led by EDI representative which makes recommendations to the promotions panel. Unsuccessful candidates are supported with feedback by the Chair of the Health Faculties. We are committed to supporting academic staff for career progression. (AP **4.2.1**)

(iv)   Support given to students (at any level) for academic career progression

Many members of staff have undertaken modules of the MSc to develop skills and have been supported to apply for a PhD. MSc students are supported in publishing of their research projects.

Of our PhD student cohort, nine students hold research assistant job contracts (8F, 1M), seven were research assistants prior to commencing PhDs (6F, 1M). Holding a dual student and staff role allows for the student to be involved in other projects and aspects of research outside of their PhD. All PhD students have permanent desk space, roles within the department structures and access to training.

Impact: Progression of PhD students
Cheng-Pei Lin applied to complete a PhD to improve patient care through high-quality research. He benefited from a multidisciplinary team and supportive environment to complete his PhD abroad and in his second language. After completing, Cheng-Pei gained a position in the department as a Research Associate before gaining an Assistant Professor role in his home country of Taiwan. He maintains links with the CSI with an honorary contract.

Simon Etkind joined the department as an Academic Clinical Fellow. This enabled him to participate in research studies and to develop his own research questions. This training allowed him to apply for a PhD. Since completing his PhD, Simon has returned to clinical practice. Support from CSI colleagues allowed him to gain an Academic Clinical Lectureship in Cambridge.

(v)   Support offered to those applying for research grant applications

Staff can attend the Faculty two-day workshop on applying for grants (3F attendees) and access one-to-one support from line managers. Researchers bring their draft applications to department (for junior and senior researchers) and CAG (for academic staff Figure 5.3.3 shows since 2017, success rates between male and female academics are similar. We closely monitor the total value of grants awarded too (Figure 5.3.4)

Impact
The accumulative impact of these initiatives has shown an improvement in average grant success rate at the CSI of 23% M: 31% F 2009-2014 vs 55% M: 48% F 2014-2020

Figure 5.3.3 Gender Split of Percentage of Successful Grant Applications by Year 2009-2020

Year	Female staff success	Male staff success
2019-2020	31%	43%
2018-2019	38%	45%
2017-2018	64%	67%
2016-2017	17%	63%
2015-2016	50%	50%
2014-2015	58%	38%
2013-2014	45%	0%
2012-2013	0%	17%
2011-2012	50%	60%
2010-2011	17%	40%
2009-2010	41%	0%

Success rate of grant applications in percentage

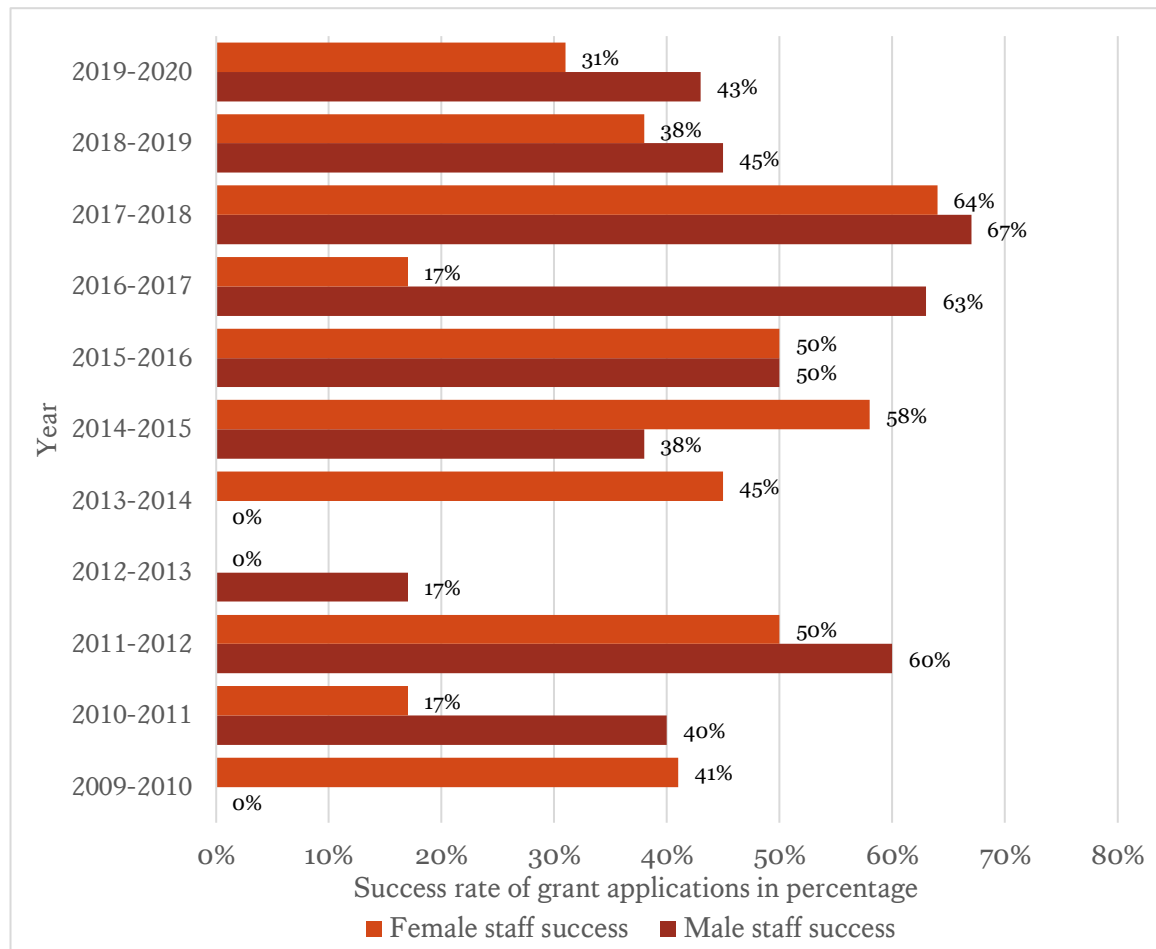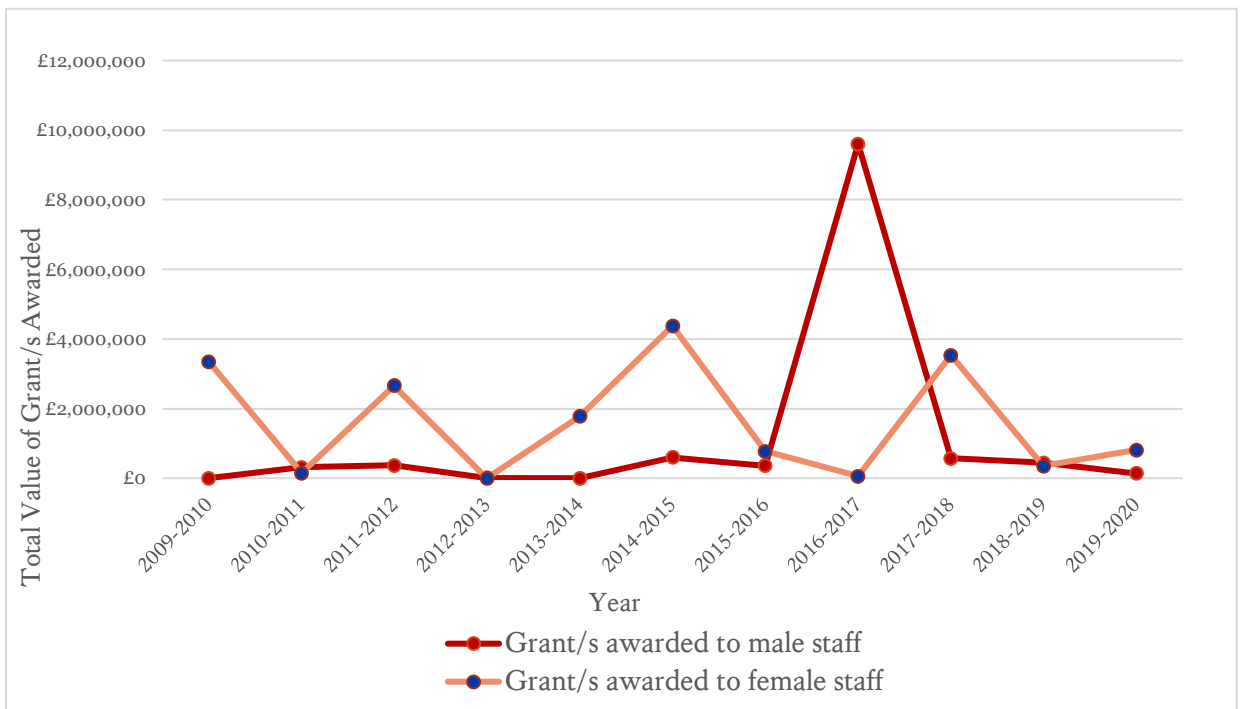■ Female staff success ■ Male staff success

Figure 5.3.4 Gender Split of Total Value of Grants Awarded 2009-2020

Key achievements since 2016 Silver Award
- >90% of staff report effective conversations around training in PDR
- 0% of staff disagreed/strongly disagreed that their PDR was useful. 63% agree/strongly agree it was useful
- A member of staff has been supported to gain a fully funded place on STELLAR HE programme in January 2021
- 100% of staff aware of how to book training and 95% found department skills sessions useful
- As a result of initiatives, there has been an increase in successful grant applications

Action points going forward
AP 5.3.1 Increase in usefulness of PDRs and effective discussions within PDRs, specifically supporting the training needs of male staff
AP 4.2.1 Support more staff to undertake STELLAR HE programme

5.4 Career development: professional and support staff

(i)   Training

Professional services (PS) staff are encouraged to attend the Wednesday meeting series available to research staff. To support training, PS staff have access to Skillsforge (online booking system) and Linkedin learning, as academic staff do. However, in 2019 staff reported that training opportunities for PS staff were not clear:

"Training opportunities for professional services aren't promoted - not sure what there is available and relevant to my role."
Quote from 2019 survey

We have therefore:
- Instigated admin team meetings twice a month. The meetings are Chaired and minuted on a rota to give PS staff the opportunity to gain confidence. Staff can feed back on useful training and highlight opportunities and King's central directorates have provided training sessions.
- PS staff are encouraged to attend training relevant not only to their current roles, but also for those skills they want to improve to further their careers.

This is an area that we will continue to focus on. (**AP 5.3.3**)

(ii)   Appraisal/development review

The PDR process is the same for all staff.

In 2019, PS staff reported that promotion was not discussed in 65% of PDRs. In addition, aspiration and wishes were not discussed in 15%.

In addition, to the changes in the PDR process (Section IV), we have improved the PDR process for PS staff. Both line managers are present at PDRs, with the academic leading on research focussed objectives, and the Business Manager leading on the operational objectives, with both able to advise on career development opportunities whether the individual is looking for a research or PS career trajectory.

Impact
In 2021 staff survey, there was improvement of the staff survey responses with all responding PS staff stating that aspiration and wishes, career development and promotion were discussed effectively or somewhat effectively (Figure 5.2.1).

Figure 5.4.1 Survey responses to effectiveness of PDR questions, professional services staff only
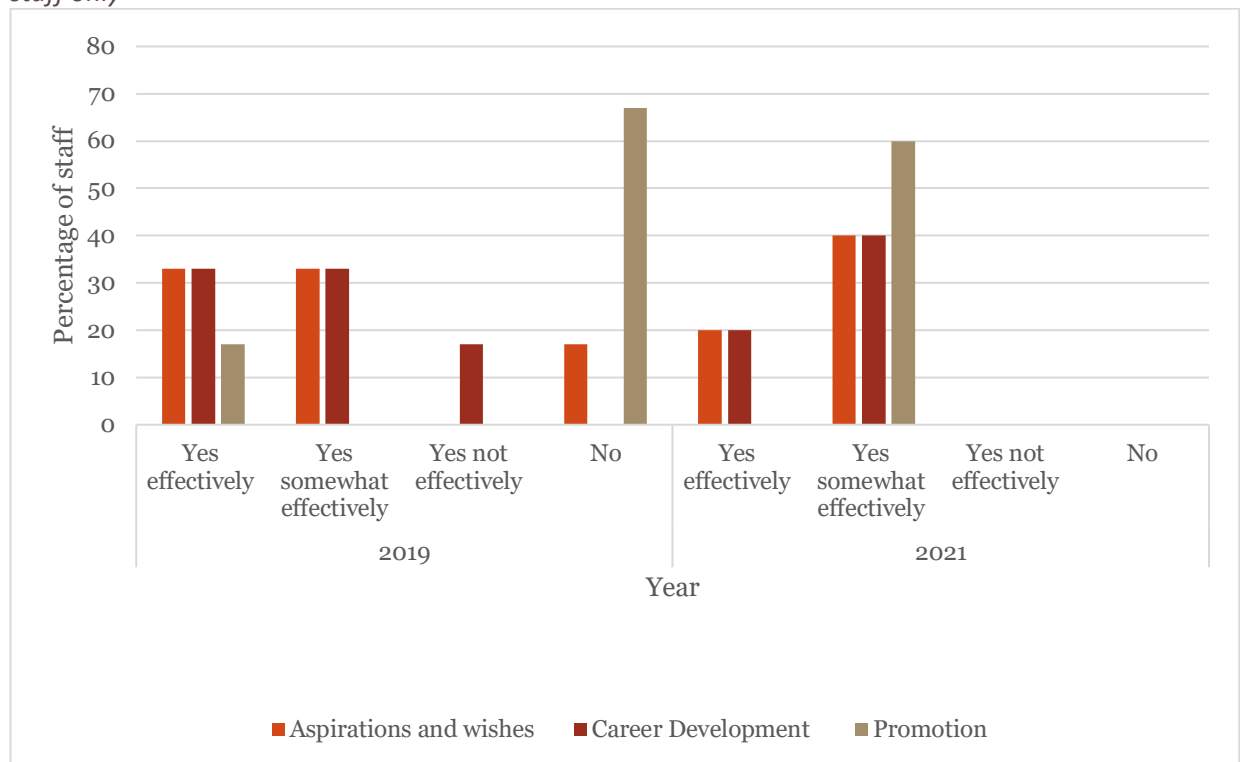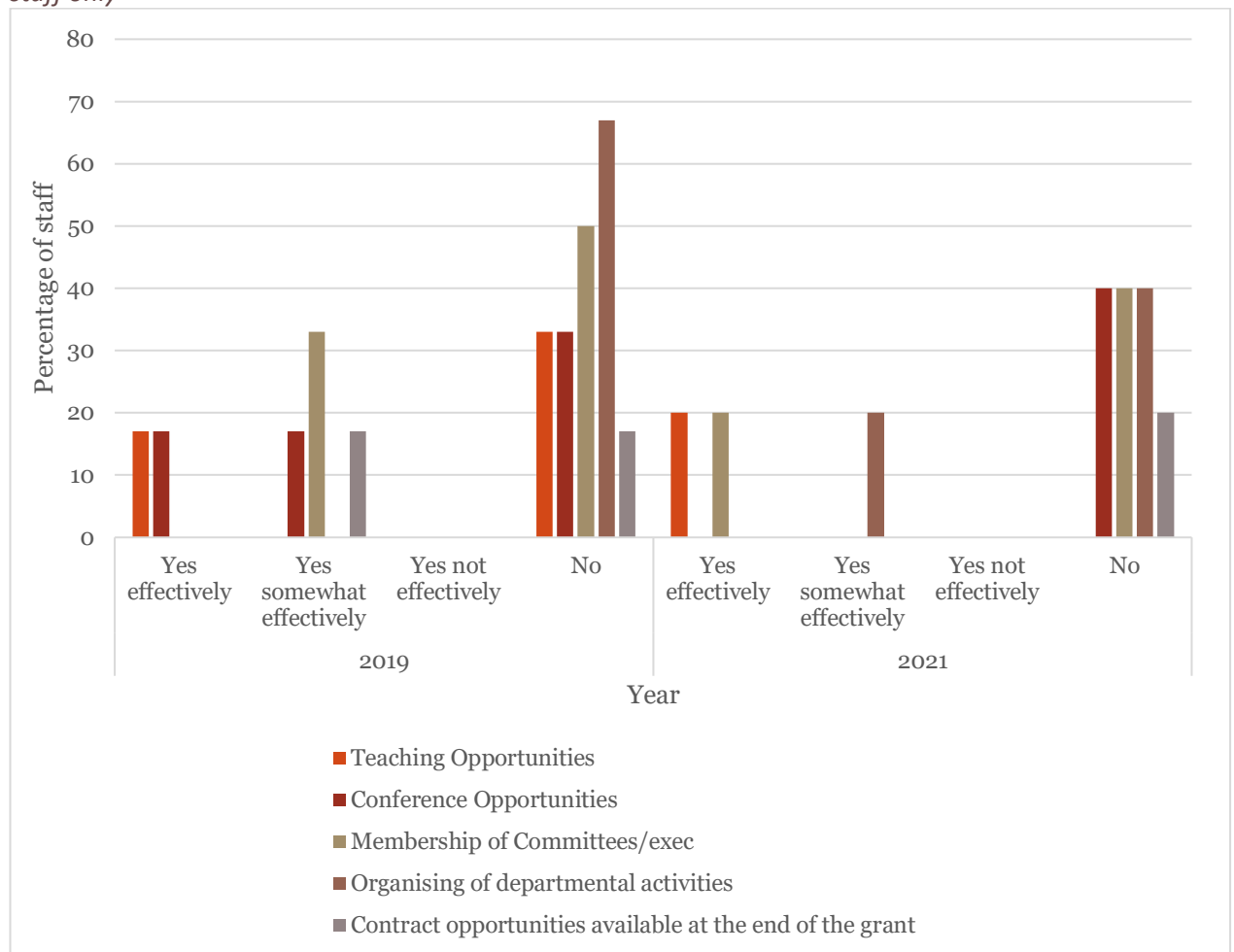

NB data not disaggregated by gender as small numbers of male PS staff

(iii)   Describe current appraisal/development review schemes for professional and support staff, at all levels, and provide data on uptake by gender.

PDRs are the same for PS and all other staff. However, PS staff have more than one career trajectory. Some wish to become researchers, whereas others wish for an administrative or managerial career. Aspirations are discussed at induction, probation meetings and PDRs to ensure that goals align. The Business Manager offers regular catch-up meetings with all PS staff where progression is discussed more informally and internally advertised opportunities for promotion to higher grade roles within KCL are highlighted.

PS staff are encouraged to take part in teaching, conference opportunities and membership of executive committees. The PDR discussions are reflected in Figure 5.4.2.

Figure 5.4.2 Survey responses to effectiveness of PDR questions, professional services staff only

Figure 5.4.2 chart. Y-axis: Percentage of staff (0 to 80). X-axis grouped by response category and Year (2019 and 2021).

Legend:
- Teaching Opportunities
- Conference Opportunities
- Membership of Committees/exec
- Organising of departmental activities
- Contract opportunities available at the end of the grant

NB data not disaggregated by gender as small numbers of male PS staff

In 2019, 100% of PS staff felt that their most recent PDR was useful. Whilst no one felt that their appraisal was not useful in 2021, 17% were neutral to its usefulness. To improve staff reports of usefulness of PDRs, we will continue to ask staff for their feedback and develop a working group to progress actions (**AP 5.3.1**).

Impact: Progression of Professional Services Staff

India Tunnard joined the CSI in 2017 and due to the PDR process, in 2019 she was promoted to a Research Project and Coordination Assistant role. See more in Case Studies.

Mark Willis joined the department in 2015 as a temporary member of staff. He gained a contract as the MSc Coordinator in 2017. After 4 years in the role and with line managers and senior staff support, Mark applied for and successfully gained a promotion to Senior MSc Coordinator.

Key achievements since 2016 Silver Award
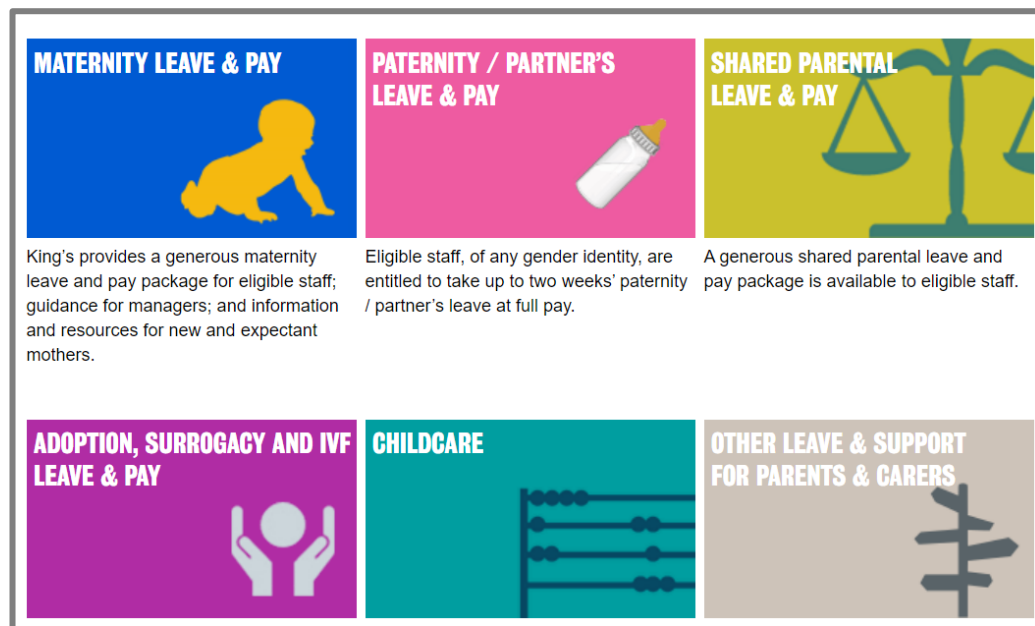- 83-100% of PS staff report usefulness of PDR in 2019 and 2021 surveys

Action points going forward
AP 5.3.3 Staff are made aware of appropriate training opportunities

5.5 Flexible working and managing career breaks

(iv) Cover and support for maternity and adoption leave: before leave
Staff are supported by the practices laid out in University's schemes for maternity, paternity/partner's and adoption leave, there is no difference for those on FTC.

Prior to, during and after leave, line managers and staff benefit from the Parents' & Carers' Hub developed within the wider University and contributed to by CSI team; a suite of online resources that includes a maternity guide for managers, checklists and risk assessments to ensure statutory and well-being requirements are addressed.

MATERNITY LEAVE & PAY

King's provides a generous maternity leave and pay package for eligible staff; guidance for managers; and information and resources for new and expectant mothers.

PATERNITY / PARTNER'S LEAVE & PAY

Eligible staff, of any gender identity, are entitled to take up to two weeks' paternity / partner's leave at full pay.

SHARED PARENTAL LEAVE & PAY

A generous shared parental leave and pay package is available to eligible staff.

ADOPTION, SURROGACY AND IVF LEAVE & PAY

CHILDCARE

OTHER LEAVE & SUPPORT FOR PARENTS & CARERS

Screenshot of Parents' and Carers' Hub website

Our 2018 survey highlighted that reliance on fixed-term contracts (FTC) and a lack of adequate maternity provision for fixed-term workers was having an adverse impact on staff.

"The experience of becoming pregnant on a fixed term contract with no guaranteed job after maternity leave was extremely stressful e.g. The worry about being forced to pay back maternity leave"
Quote from 2018 survey

These concerns triggered the development of the FTC working group. This team conducted work exploring the interaction between contractual status and maternity provision. Data were obtained using a data request made to 24 Russell Group universities in the UK (including KCL), alongside analyses of their maternity policy documents. This allowed a comparison of the likelihood of returning to work following maternity leave for those on FTC versus open-ended contracts and described variation between universities in the maternity provision. We found that odds of returning to work after maternity leave at KCL were 59% lower for staff on fixed term compared to open-ended contracts. Importantly, maternity provision for FTC workers varies between

institutions. These findings have been shared within our department, Faculty EDI and Executive teams and with the Principal of KCL. As maternity pay is funded centrally, we have recommended to the University that additional maternity pay does not need to be repaid and short-term extension of FTC be granted. The paper is undergoing revisions for the Journal Gender, Work & Organization. We hope this work will influence policy within and beyond the University.

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

During leave, employees can take up to 10 Keeping in Touch (KIT) days, academic staff can keep up to date with their work during their leave, but this choice is up to the individual. PDRs can take place during KIT days, including academic promotion discussions, and they can be considered for pay recognition as usual.

Offering KIT days has been inconsistent over recent years, particularly in 2021. While this might be a symptom of the move to remote working due to COVID-19 pandemic, we are committed to ensuring practices are more consistent (**AP 5.5.1**).

Figure 5.5.1 Staff EDI Survey Responses to 'Were you offered opportunities for KIT days?'
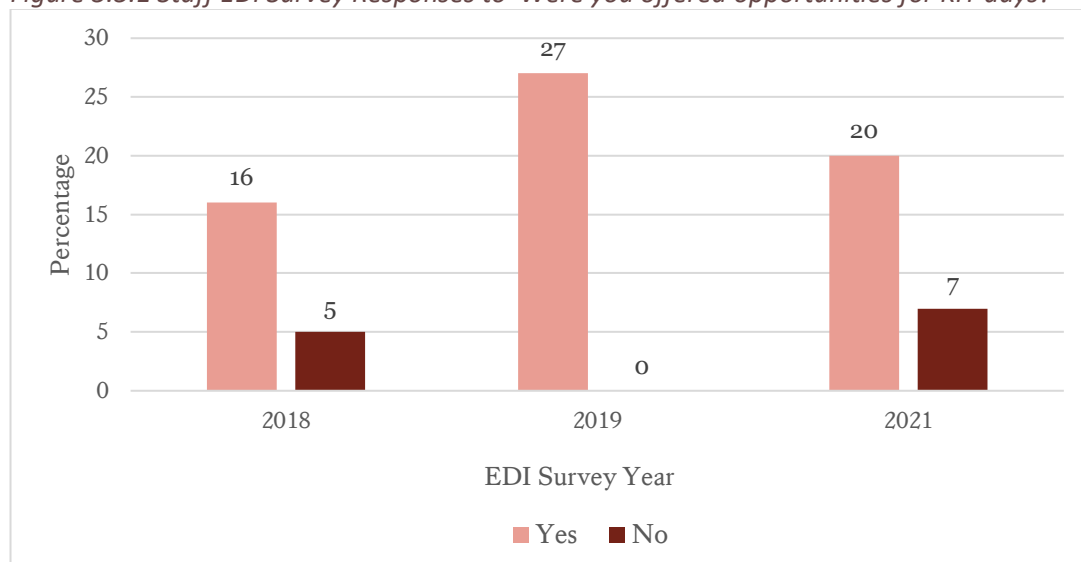
(vi) Cover and support for maternity and adoption leave: returning to work

Following leave, staff work with their line manager and HR advisor to plan their return, update risk assessments and review workload. A re-introduction to the workplace takes place, introducing new colleagues and sharing any new or revised policies. Workload is discussed and planned. For mothers who wish to breastfeed, we provide a private room and facilities. Line managers are advised to have discussions and inform the returners about available support eg Parents' & Carers' Fund- support of up to £10,000 to enable progression of research outputs and mitigate against the impact of the extended leave.

A Carer's Career fund also exists so staff can apply for up to £250 to cover additional care costs to attend work events.

> **Impact**
> In 2018, only 31% of staff were aware of the Carer's Career Development Fund. We have actively promoted this through our departmental meetings, and this has increased to 45% in the 2021 survey (52% F, 33% M). One member of female staff applied in 2019 and was successful.

We are however committed to improving this further. We will do this through development of a local document with links to all relevant policies and development funds available (**AP 5.5.1**).

> **Impact**
> In 2018 and 2019, a significant proportion of returners did not feel supported (Figure 5.5.2). Since then, we have encouraged staff to join the Parents and Carers Network, which is KCL-wide network providing support to staff with caring responsibilities. We always encourage staff and students to bring children to social events. Our 2021 survey data shows staff feel more supported.
>
> *"I was worried about how things would work when i returned but my line manager and the wider department have been really supportive and flexible"*
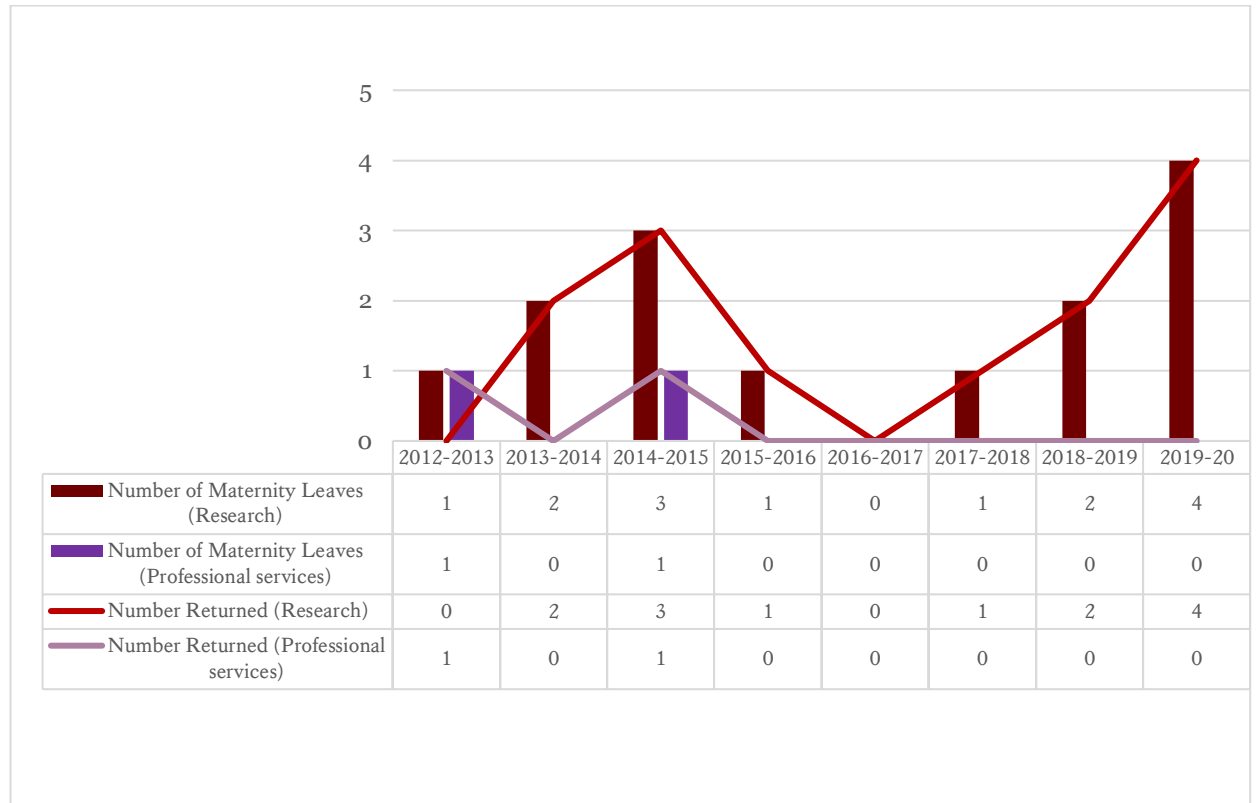> Quote from 2021 staff survey

Figure 5.5.2 Staff EDI Survey Responses to 'Did you feel supported as you transitioned back into your role from maternity, paternity or adoption leave?'
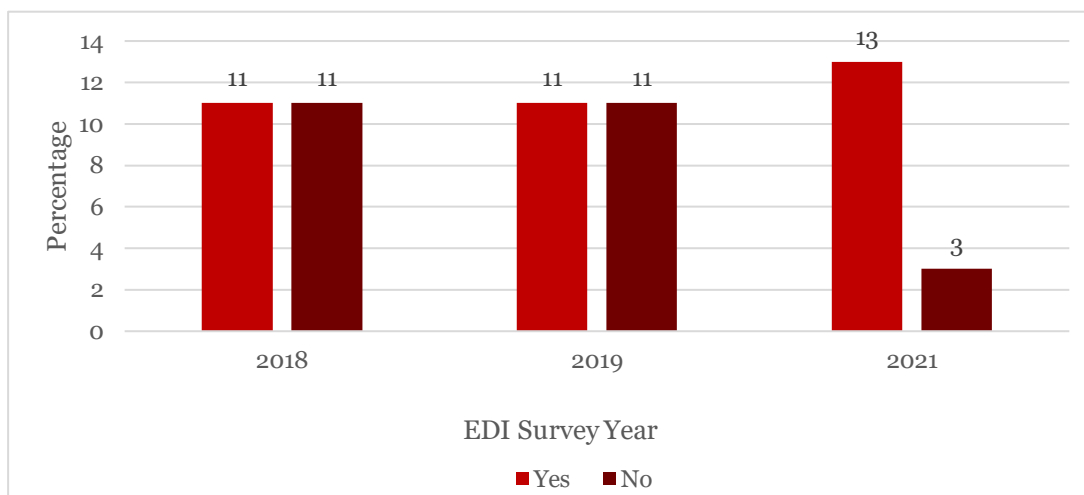
(vii)   Maternity return rate

Our return rate after maternity leave is high (Figure 5.5.3). For those returning, they continued to be in post 18 months after return, demonstrating that staff are supported in their return and in balancing work and family life.

Figure 5.5.3 Maternity leavers and returners: research and professional services staff 2012-2020

|	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-20
Number of Maternity Leaves (Research)	1	2	3	1	0	1	2	4
Number of Maternity Leaves (Professional services)	1	0	1	0	0	0	0	0
Number Returned (Research)	0	2	3	1	0	1	2	4
Number Returned (Professional services)	1	0	1	0	0	0	0	0

Source: KCL HR data

No one within the department has taken adoption leave in the last 10 years. We work to the University's policies on adoption.

(viii)   Paternity, shared parental, adoption, and parental leave uptake

One male staff member has had children in the last ten years and on both occasions, he was supported to take shared parental leave (Section 6).

Figure 5.5.4 Gender Split of Maternity, Paternity and Shared Parental Leave 2016-2020
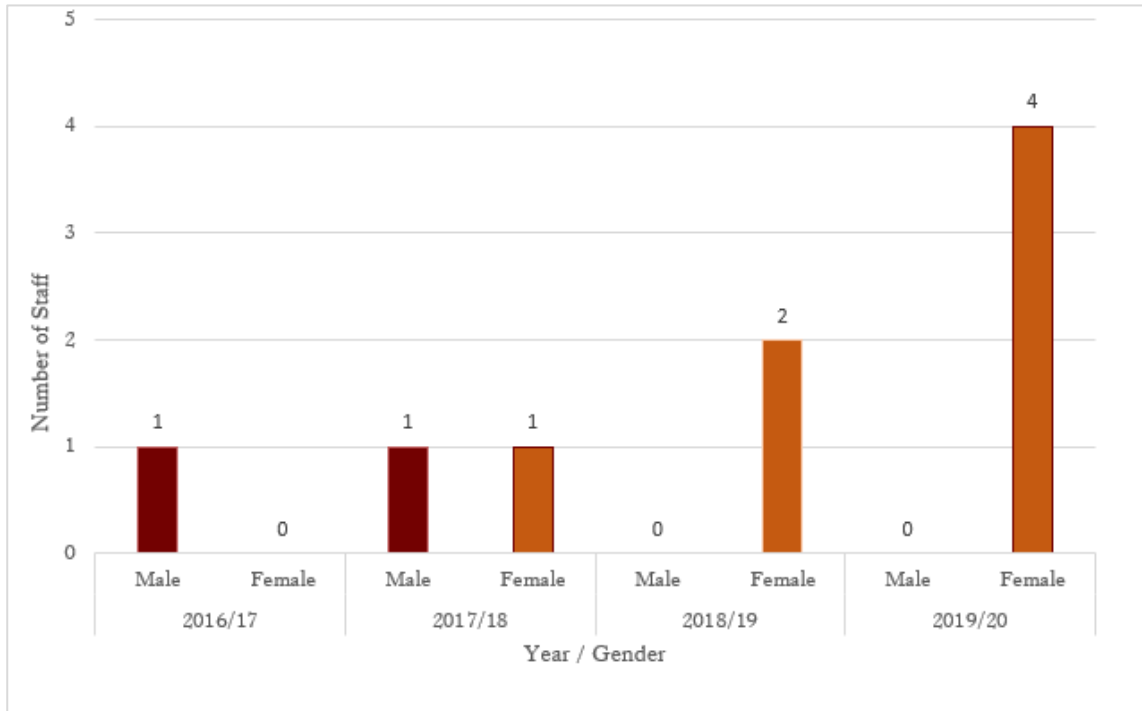
In 2021, three people took some form of long-term leave and all felt supported. All were offered KIT days, two discussed flexible working options, one was offered a phased return.

(ix)   Flexible working

All staff can request to work flexibly and remotely through formal and informal processes. The types of flexible working arrangements available are part-year/term-time, job sharing, flexible working hours, and remote working. Our systems don't record informal flexible arrangements. Since March 2020, due to COVID-19 pandemic, all staff have worked remotely and flexibly. We are extremely proud of our ability as a department to adapt to this change.

Our staff survey indicates that we may have depreciating levels of awareness of ability to work flexibly (Figure 5.5.5) although many report doing so (Figure 5.5.6), perhaps influenced by COVID-19 pandemic. We will seek to understand what changes in behavior and practice that have been learnt that can be embedded going forward. We have developed guidance on working flexibly and remotely and hope it will result in an increase in awareness. We are committed to ensuring everyone can work flexibly and remotely where desired (**AP 5.5.2**).

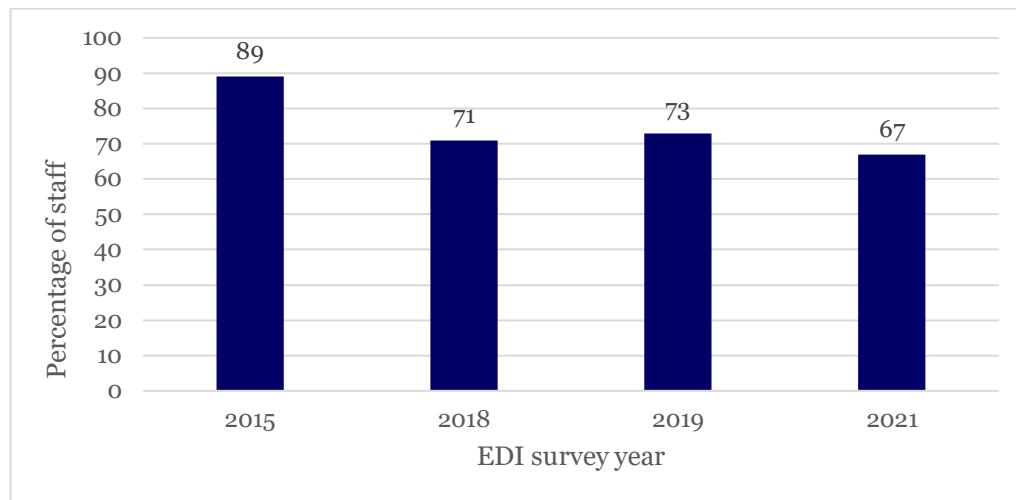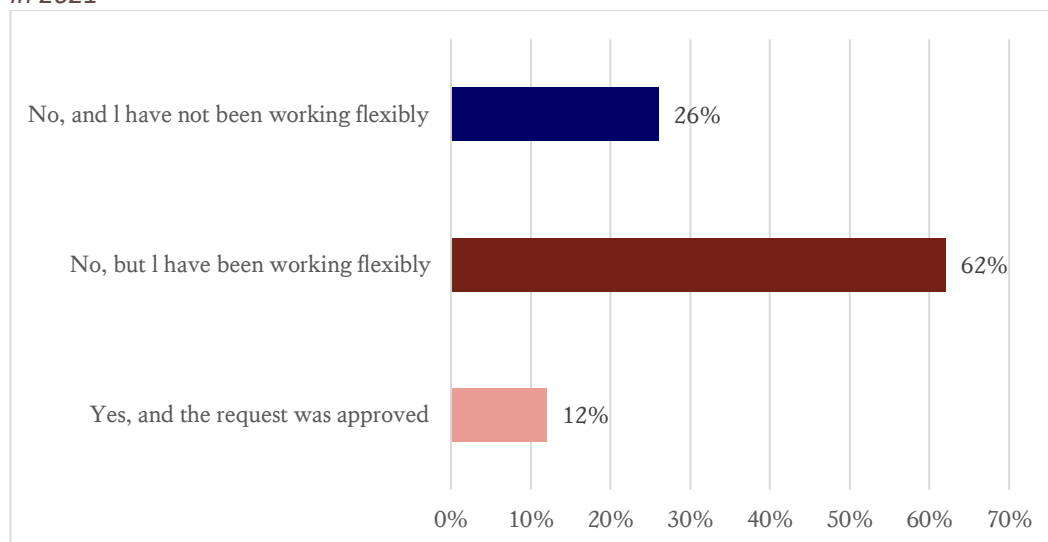*Figure 5.5.5 Percentage of staff aware of ability to work flexibly*

Figure 5.5.6 Staff responses to 'Have you applied to work flexibly during the last year?' in 2021

The COVID-19 pandemic has increased awareness of staff with competing responsibilities. In 2021, we identified that 53% (74% F, 26% M) of staff had caring responsibilities. 35% had childcare responsibilities (67% F, 33% M), 19% had adult caring responsibilities (88% F, 13% M), 5% said they have 'other' responsibilities (100% F) and 5% (100% F) had multiple caring responsibilities. We will continue to monitor this and provide support as needed (**AP 5.5.2**).

Of those with caring responsibilities, 80% agreed/strongly agreed that their line managers had been supportive of these caring responsibilities.

''I hope that the ability to work remotely will be down to staff preference to ensure a good work/life balance. Working remotely has allowed me to work more flexibly with caring responsibilities.''
Quote from 2021 survey

In 2017 and 2019, 55-60% of staff worked from home when needed and 24% had fixed working from home days. Due to COVID-19, all staff have worked remotely and 100% of staff wish to continue to do so 2 or more days per week (94%) (Figure 5.5.7). These findings are reflected in our return to campus plan (**AP 5.5.2**)

Figure 5.5.7 Staff responses on 2021 survey to 'How many days a week would you hope to work remotely?'
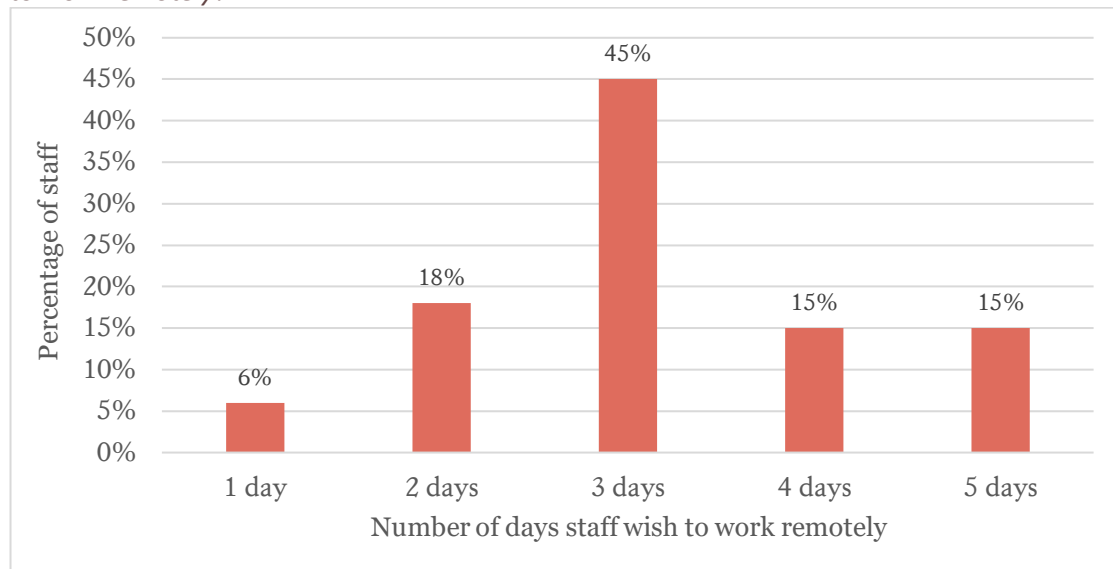
We are committed to ensuring that no group within our department are regularly excluded from meetings within their normal working hours. In 2021, no staff members mentioned seldom or never being able to attend meetings. Our new meetings guidance aims to support those with caring responsibilities by suggesting meetings are held between 10am and 4pm (**AP 5.5.3**) and we annually circulate carers leave guidance for those who need short term cover (**AP 5.5.1**).

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

In discussion with line managers, part-time staff can apply to increase their hours and plan a phased increase in their responsibilities. We have had no applications for part-time staff to return to full time work after a career break in the last 10 years.

Impact: Support provided to those taking career breaks

Joanna has taken two periods of maternity leave in the last 4 years. She discusses the support she has received:

"I have been well supported by my supervisors… I found the KIT days really useful for getting back into work. Flexible working arrangements allow me to work from home frequently, making family life easier.
I was encouraged by my supervisor to apply to the Parent and Carers fund and was successful in winning funding for support following my return. Structural support like maternity pay and KIT days are critical, but the informal support is also really important"

Key achievements since 2016 Silver Award
- Recommendations made at University level to address maternity provision for those on fixed term contracts
- Information on breastfeeding rooms has been collated and shared with all staff
- Career break policies have been circulated, included in public spaces and on public SharePoint increasing awareness by 14%
- More staff feel supported when returning to work after a career break

Action points going forward
AP 5.5.1 >80% of staff should be aware of the Carer's Career Development Fund
AP 5.5.1 Learn from colleagues on how best to encourage uptake of KIT days and share practices
AP 5.5.1 All polices pertaining to career breaks and available funds to support breaks are collated into a local document for the department
AP 5.5.2 100% of staff should be able to work remotely if they wish. >80% of staff should have their remote working request met
AP 5.5.3 >80% of meetings and events between 10.00 am and 16.00 pm to maximise inclusivity
AP 5.5.2 Staff with caring commitments are well supported
AP 5.5.1 Policies for short term cover for career breaks is circulated annually

5.6 OUTREACH ACTIVITIES

Since our 2016 Silver Award, staff of all levels (including PhD students) have been involved in outreach activities. While we do not formally record staff participation, they will be included in our work allocation model (**AP 5.6.7**). Examples include:

- Research Open House (2017)
- Conversation Starters (2017 & 2018)
- The Departure Lounge (2019)
- ON EDGE: The sound of anxiety – Science Gallery London exhibition (2019)
-

"I feel motivated to start conversations with my patients & encourage the medics to think about what they are doing"
- *Quote from 2017 Conversation Starter attendee*

PhD student organisers at public events

To attract young people, particularly males, one clinical academic (M), one RPCA (F) and one Research Associate (F) developed a Young People's Advisory Group (YPAG) with male students from a local school. The findings were published to support others to run a YPAG.

Screenshot of YPAG publication

We participate in KHP's Summer School (**AP 5.6.5**), providing local GCSE students (~30% M) a chance to learn more about palliative care.

Table 5.4. Breakdown of staff involved in KHP summer schools by gender and professional grade

	2019		2020		2021	
	F	M	F	M	F	M
RPCA	1				1	
Phd Student			2	1	1	
Research Associate					1	
Lecturer		1				
Reader		1		1		
Clinical team member	2	1			1	
Senior member of clinical team	1					1
Clinical academic	1		1			

"Very interactive and good to learn about how to get into medicine and different ways you can, no matter the culture"
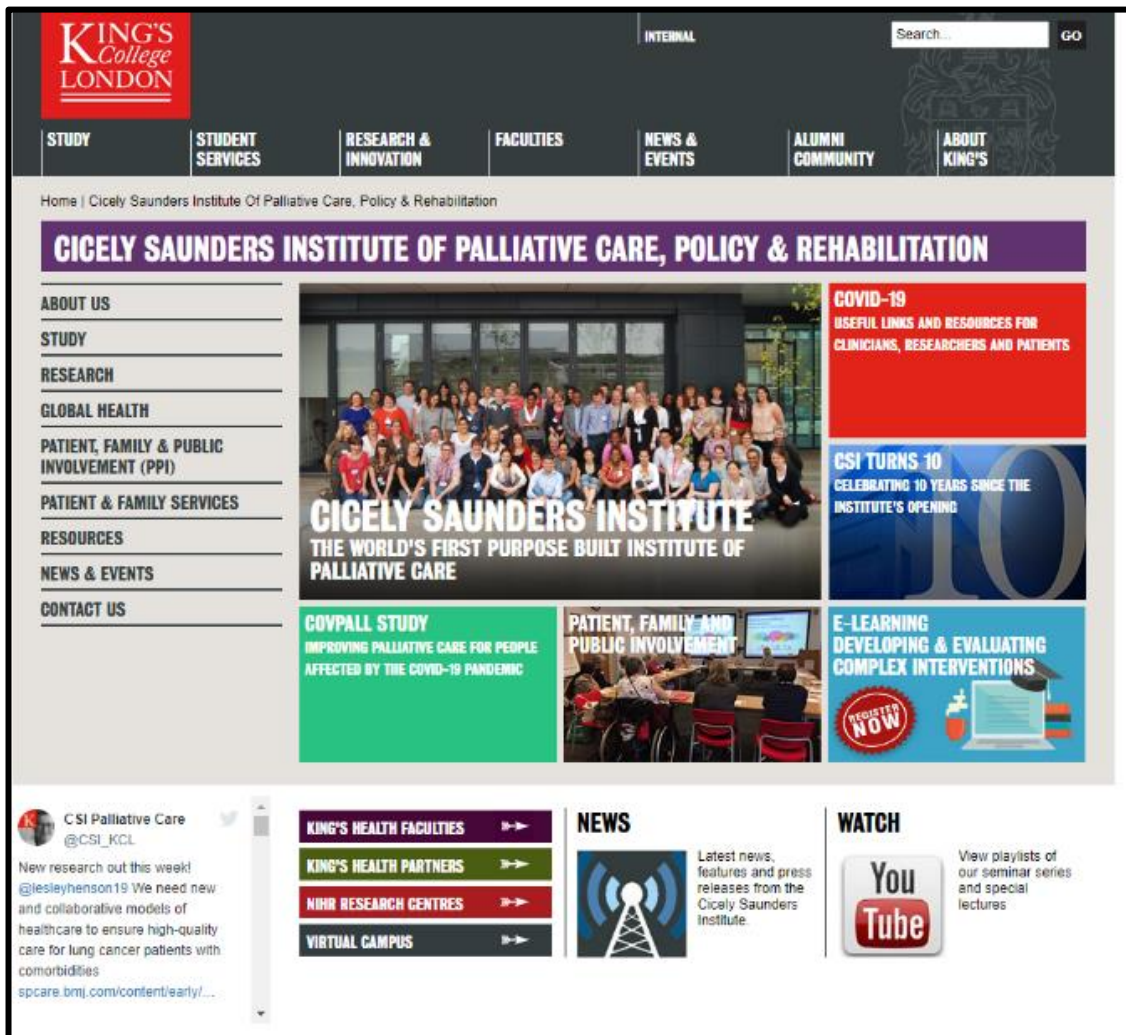Quote from male student 2019

Four students King's Health Partner's Summer School

(i)   Visibility of role models

Our website showcases the diversity within our department.

CSI website home page promoting diversity of department

In all events, we strive to ensure gender and ethnic diversity and inclusivity. All events are free and provide opportunity for networking. Examples of events:

Open Seminars
Since 2013, we have held 88 Open Seminars (63F: 31M speakers). Previously we have inferred gender, going forward we will employ a system to collect demographic data. (**AP 5.6.3**).

Annual lectures
Our most prolific event attracts worldwide audiences and speakers. Since 2011, we have had seven female and five male speakers at these lectures.

International Women's Day (IWD) events
Since 2020, we have held two IWD events that raised awareness of issues in palliative care affecting women. In 2022, we will use this platform and International Men's Day to hold an event promoting men in palliative care, not only raising the profile of men within our department but the wider palliative care community (**AP 5.6.4**).

Conferences

In 2019, we held the "ACCESSCare" conference bringing together stakeholders to improve care for LGBT+ people facing advanced illness. Speakers included people who identified as non-binary, trans, female and male.

Speakers at ACCESSCare Conference, 2019

(ii)   Beacon activity

Promotion of good practice within the university

Appointment of 'Trans Champion'

Following our 2020 Trans Matters training, attended by 83% of staff (15% of attendees were male), we identified actions for a more trans inclusive environment, including appointment of a 'Trans Champion'. We are the first KCL department to do this. The Trans Champion will be supported by the department to achieve actions and promote the work (**AP 5.6.6**).

Inclusive language guidance

In 2020, we developed an inclusive language document (**AP 5.6.2**). This was initially developed for those teaching on the MSc to support accessibility and inclusivity. The document has been adopted by the faculty and shared at University level.

Impact

The Vice Dean of Education shared the guidance more widely with colleagues within the university to support KCL's inclusive education agenda and it is now available on the Faculty website.

The guidance has since also been picked up by Guys and St Thomas' NHS Foundation Trust and King's College Hospital Palliative Care clinical teams where they have reported that it has facilitated the delivery of more inclusive clinical care.

Pronouns on staff profiles webpages

In 2021, a member of the EDI committee (and ACCESSCare team) spearheaded the addition of pronouns onto staff profiles. The template for staff profiles in the Faculty now includes a field for pronouns as standard and we will work to ensure this is the standard for all KCL staff (**AP 5.6.6**).
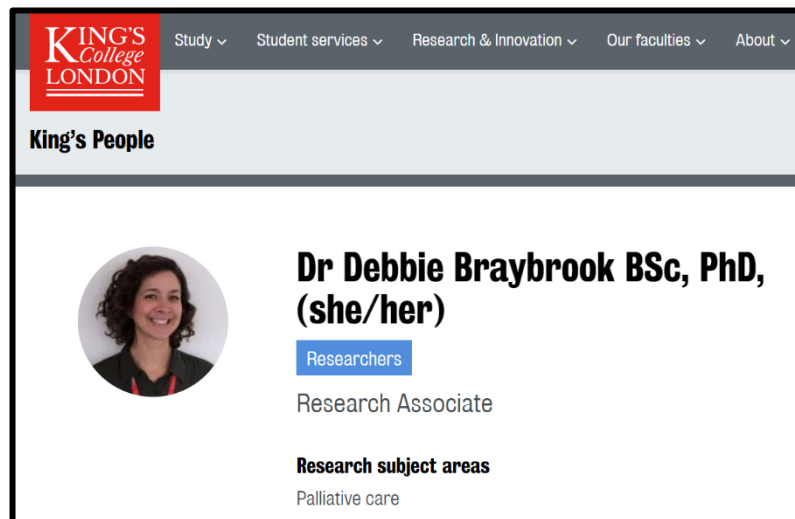
Screenshot of external staff profile webpage

Promotion of good practice externally

Beacon activity 1

In 2016, we analysed the gender balance of speakers at the European Association of Palliative Care (EAPC) annual conference revealing a 'leaky pipeline'. The majority (74%) of speakers in 2016 were female, reflecting the palliative care sector. However, females made up only 55% of the invited plenary speakers. This work was subsequently published (see below).

Screenshot of our published work on gender bias at the EAPC. Sleeman KE, Koffman J, Higginson IJ. Leaky pipeline, gender bias, self-selection or all three? A quantitative analysis of gender balance at an international palliative care research conference. BMJ Support Palliat Care. 2017 Mar 7.

The EAPC have announced an annual award for Women in Palliative Care, with the inaugural award (2019) presented to Katherine Sleeman who led the work.

Photo of Professor Katherine Sleeman receiving award for Women in Palliative Care at EAPC 2019

Impact

This work has also prompted other fields to examine the gender equality of speakers at other major conferences.
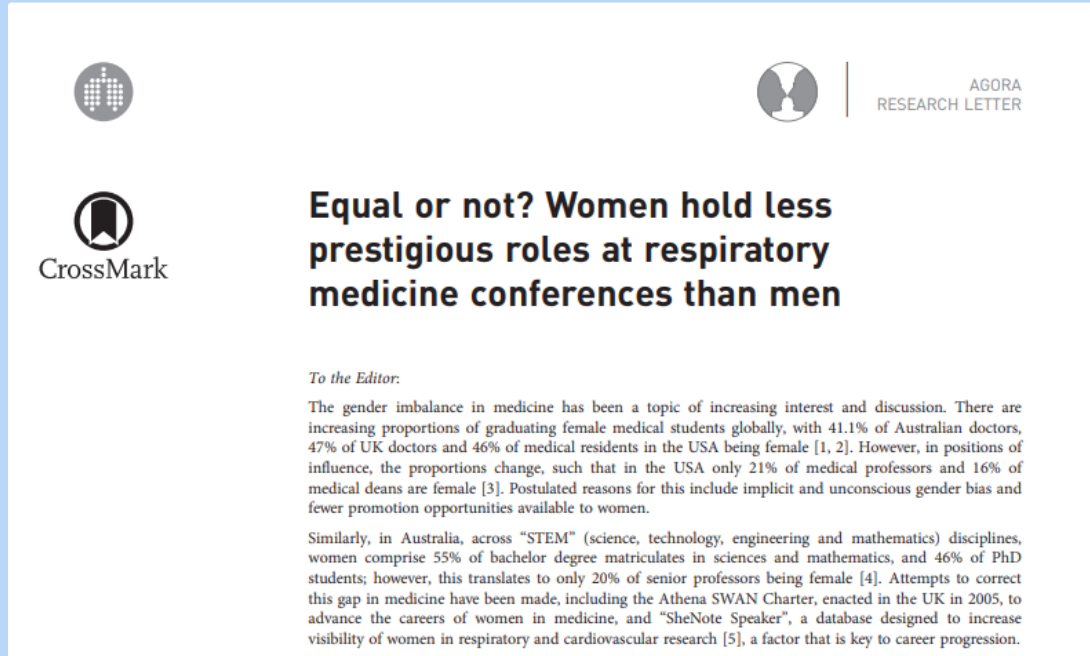
Screenshot of paper on gender equality in respiratory conferences

Beacon activity 2

Clinical Excellence Awards (CEAs) form the majority of bonus pay and are part of a competitive renumeration system for clinical academics. After an unsuccessful application for a CEA in 2017, a data request was submitted.

The findings highlighted a gender pay gap between consultants at the Kings' College Hospital (KCH) NHS Trust and that no consultants who had completed maternity leave in the previous five years had received a CEA.

Impact

Dr Bajwah worked with KCH to rewrite the CEA policy and delivered a support session to support female, part-time and ethnic minority Consultants. Subsequently, in the 2018 round, 13/13 of the female applicants who had taken maternity leave were awarded (vs 0/9 in 2017).

Further work has examined (for the first time) associations of gender and ethnicity and the intersectional bonus pay gap for consultants nationally. These analyses demonstrated that the average mean bonus pay gap between White male and BAME female Consultants was 46% in favour of White male Consultants. This has been published in BMJ Leader.

Brief report

Intersectional effects of gender and ethnicity? A quantitative analysis of bonus pay gap data for Shelford Hospital consultants

Sabrina Bajwah [1,2] Adejoke Oluyase[1]

[1]Cicely Saunders Institute of Palliative Care, Policy and Rehabilitation, King's College London, London, UK
[2]Department of Palliative Care, King's College Hospital NHS Foundation Trust, London, UK

ABSTRACT
Background Male hospital consultants earn 13% more than their female counterparts. The intersectional effects of ethnicity and gender are not known.
Objective To describe and analyse the mean bonus pay gap in terms of gender and ethnicity for consultants across the Shelford Group.

A significant amount of research has been conducted on the superimposing or intersectional effects of gender and ethnicity outside of medicine.[4] Organisations have been shown to play a key role in generating and perpetuating inequality in bonus pay outcomes.[4] There is a paucity of information and research on the intersectional effects and

Screenshot of Paper published in BMJ Leader on intersectional effects of gender and ethnicity on bonus pay gap.

Beacon activity 3

Flyer for the Palliative Care Athena SWAN Network

In 2018, we founded the Palliative Care Athena SWAN Network. The network is open to all palliative care departments in the UK. The Athena SWAN values are at the core of our Terms of Reference. We aim to share learning and initiatives to drive forward change through support and mentorship.

Impact

In 2018, the network began with two other departments, and we have grown to seven. Meetings are held every six months. We promote on Twitter, where our followers have grown from 145 in August 2020 to 253 in October 2021. In a recent evaluation, 100% of members found the network relevant and useful, and 80% agreed that the network offers support, opportunity for mentorship and is useful for promoting EDI in their own institution (see Figure 5.6.2).

Members indicated that they are keen for CSI to act as a mentor. We are committed to further developing this network and addressing the current gender imbalance **(AP 1.2)**.

Figures 5.6.1 Membership of the Palliative Care Athena SWAN Network
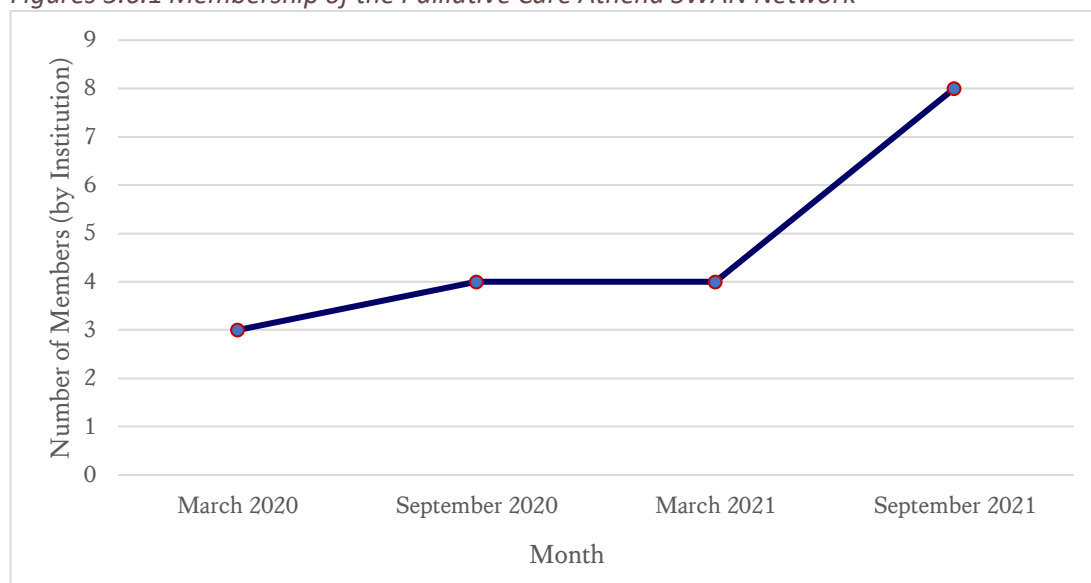
Figure 5.6.2 Members Responses to Network Evaluation

'The Athena SWAN Palliative Care Network is relevant and helpful'

20%
80%

■ Agree   ■ Strongly Agree

'The Athena SWAN Palliative Care Network offers me peer advice, support or the opportunity for mentorship'

20%
40%
40%

■ Agree
■ Strongly Agree
■ Neutral

'The Athena SWAN Palliative Care Network is useful for promoting Equality, Diversity and Inclusion (including Athena SWAN values) in my own institution'

20%
20%
60%

■ Strongly Agree
■ Agree
■ Neutral

Virtual meeting held September 2021

(iii)   Culture

The CSI has an inclusive and supportive culture. This is demonstrated in our email signatures, rainbow lanyards and monthly EDI department meeting updates.

CSI researchers wearing rainbow to demonstrate commitment and support to the LGBT+ community.

Name Qualifications
Job title
Pronouns:

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Florence Nightingale Faculty of Nursing, Midwifery & Palliative Care
King's College London
Bessemer Road
London SE5 9PJ

E: email address | T: 0207 848 ext | F: 0207 848 5517

Working hours: 9.00-5.00

Our mission is to pioneer the very best in palliative care and rehabilitation by integrating cutting edge research, skilled multi-professional care, and innovation in engagement and education.
Visit our webpages for information about our projects, open seminars, free resources in outcome measurement, education and training. http://www.kcl.ac.uk/palliative

Follow the Cicely Saunders Institute on Twitter: @CSI_KCL

We are a World Health Organisation Collaborating Centre:
https://www.kcl.ac.uk/nursing/departments/cicelysaunders/about/partners.aspx

Proud of our commitment to diversity and inclusion

Screenshot of email signature template included in induction pack

Bullying and harassment

"I'm happy to say I haven't personally experienced bullying at the CSI in recent years, but I think increasing awareness about what form bullying can take in academic settings, how to report it (i have no idea!) and what line managers can do."
Quote from 2019 survey

We are delighted that our staff report feeling they are treated equally irrespective of their gender - 84% in 2019 (90% F agreed/strongly agreed, 100% M and 50% of those who identify as gender fluid/non-binary), and 93% in 2021 (76% F; 60% M).

In 2019 and 2021 no incidents of bullying or harassment related to sex were reported. However, female staff report incidents related to pregnancy/maternity in 2019 and abuses of power (Table 5.6) in 2019 and 2020. We also note unacceptable incidents pertaining to race. We are seeking to eradicate all incidents (**AP 5.6.2**).

Table 5.6 Staff survey reports of bullying and harassment

In the past 12 months I have personally experienced or witnessed bullying or harassment concerning:	2019			2020		
	Yes %	No %	Don't know %	Yes %	No %	Don't know %
Age	0	100 (n=32)	0	0	97.6 (n=40)	2.4 (n=1)
Disability	0	100 (n=32)	0	0	97.6 (n=40)	2.4 (n=1)
Gender reassignment		100 (n=32)		0	97.6 (n=40)	2.4 (n=1)
Marriage/civil partnership		100 (n=32)		0	97.6 (n=40)	2.4 (n=1)
Pregnancy/maternity						
Race						
Religion/Belief	0	100 (n=32)		0	97.6 (n=40)	2.4 (n=1)
Sex	0	96.9 (n=31)	3.1 (n=1)	0	97.6 (n=40)	2.4 (n=1)
Abuse of power						
Physical abuse/intimidation	0	96.9 (n=31)	3.1 (n=1)	0	97.6 (n=40)	2.4 (n=1)

In 2020, we held bullying and harassment training during a usual meeting time attended by 30F 6M staff and students. During this training, staff and students were supported to address bullying and harassment, in particular:

- Recognising and responding to bullying
- How to prevent bullying
- How to create a positive culture including reporting
- Increased awareness of bullying and harassment resources

Impact
Our actions increased staff awareness of how to report bullying and harassment (Figure 5.6.3) from 45% (67% F, 33% M) in 2019 to 81% (76% F, 21% M) in 2021. Our actions also increased confidence in department addressing bullying and harassment effectively from 27% (78% F, 22% M) in 2019 to 38% (56% F, 31% M) in 2021.

Of concern is that in 2019 and 2021, 100% of those who disagreed that staff addressed bullying and harassment effectively were female and 55% (60% F; 44% M) did not know whether the department addressed bullying and harassment effectively. We intend to

explore these results in our co-production meeting and implement initiatives to increase staff confidence (**AP 5.6.2**).

Figure 5.6.3 Staff belief in department addressing bullying and harassment effectively
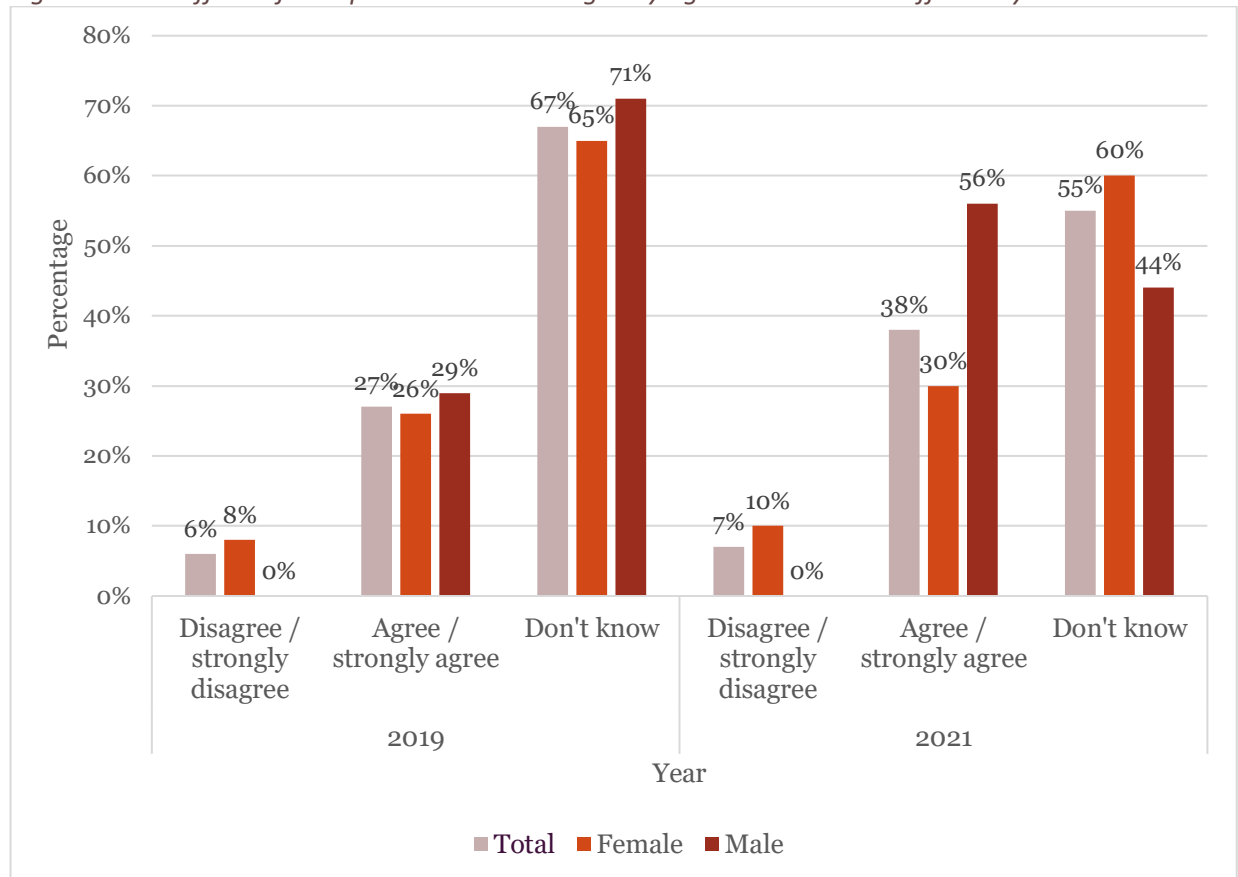
(iv)   Timing of departmental meetings and social gatherings

As 53% (74% F; 26% M) of staff have caring responsibilities, we facilitate flexible and remote working by allocating one day per week to departmental meetings and seminars. To support those with childcare responsibilities, meetings occur between 10am and 4pm. This is reinforced in our 'Chairing meetings guidance' to support return to campus. We will monitor on the return to campus and work to understand why staff may not be able to attend meetings **(AP 5.5.3).**

> **Impact**
> In 2019, 55% report always able to attend required meetings (78% F, 22% M). As a result of our actions, our 2021 staff survey found that 74.2% of respondents (76% F, 16% M) were always able to attend required meetings.

Timing of social gatherings is planned carefully. Department events are held partly in working hours.

Staff summer party held on building rooftop garden

PhD dinner with a PhD student bringing their child

(v)   HR policies

The Business Manage is part of the Faculty Operations Group, comprising of key operational leads from PS groups. Any change to HR policy is channelled through this group. Line managers can approach the Business Manager for HR related matters to direct them to the appropriate resources.

During the PDR cycle, line managers attend training. The CSI Director reviews all PDR forms to identify issues relating to HR policies and will discuss with line managers as needed.

EDI sessions such as Trans Matters and Bullying and Harassment training include relevant HR policies.

(vi)   Workload model

We use the Education Database to record teaching related activity. Some committee roles are represented in the database as 'central organisational roles', but no other activities are represented. The University does not have a comprehensive workload model.

We have recognised this as an issue and our survey highlighted how staff do not feel workload is allocated fairly (Figure 5.6.4). Therefore, we reviewed work allocation models and shared this work with the Faculty EDI Committee and the Palliative Care Athena SWAN Network. We will present our work and suggestions for an improved model to the Faculty Executive (**AP 5.6.7**).

"With regard to workload, I feel often that some people have slightly less departmental responsibilities than others which is sometimes frustrating"
Quote from 2019 survey

Figure 5.6.4 EDI staff survey responses to the statement 'I feel that workload is allocated equally'
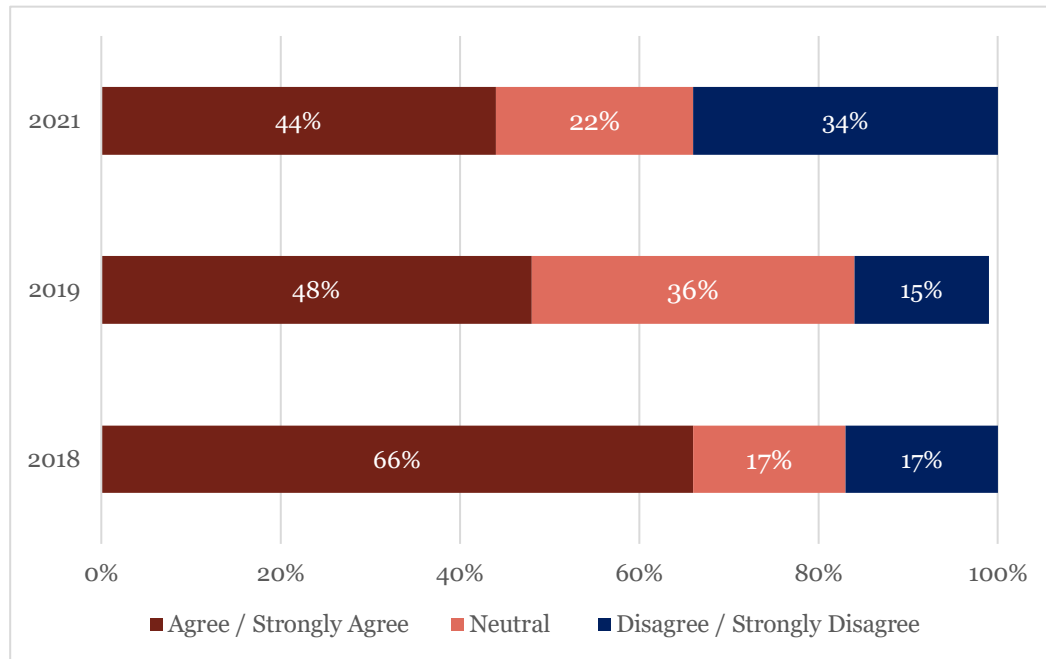
Figure 5.6.5 EDI staff survey responses to the statement 'I feel that I have good work-life balance'
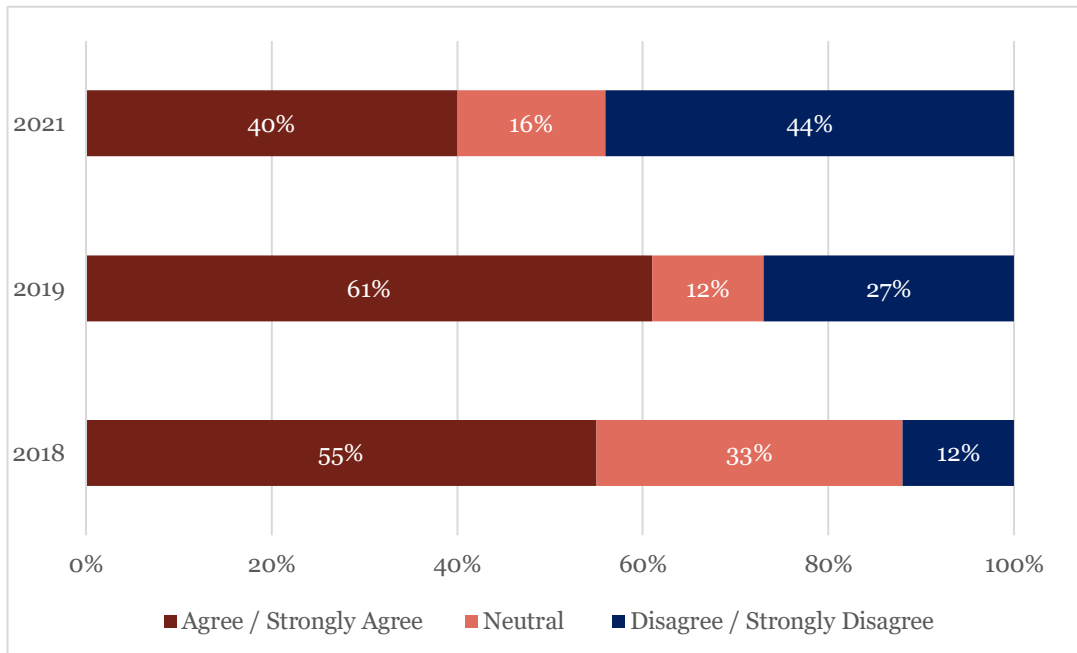
Figure 5.6.6 EDI staff survey responses to the statement 'I feel there is a long hour culture within the department'
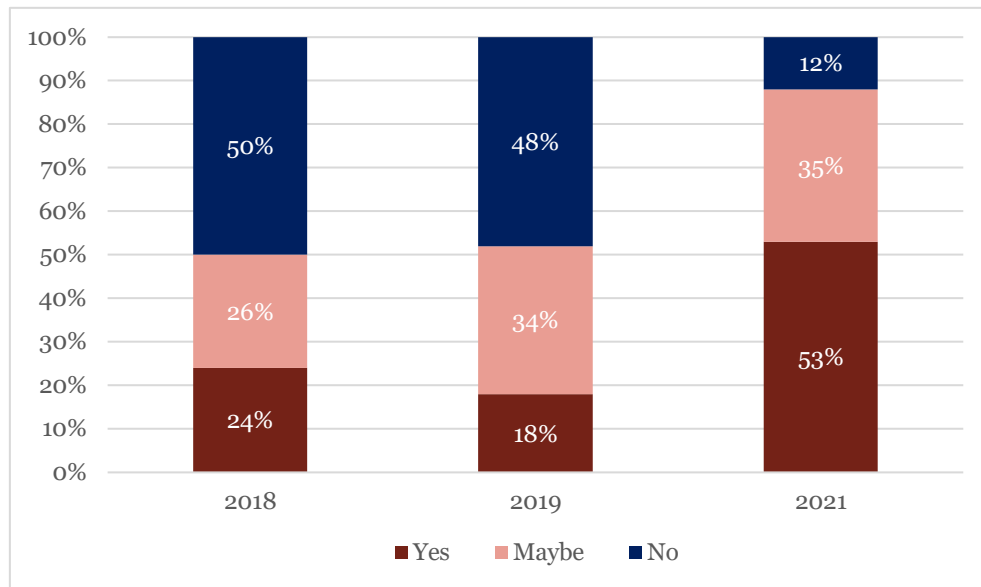
In 2021, 44% of staff (30% F; 11% M) felt that they did not have a good work-life balance and 53% said there was a long hour's culture (27% F; 33% M) (Figure 5.6.6. and Figure 5.6.7). We have shared findings with the department. We are committed to monitoring this problem and finding improvement strategies in our co-production meeting (**AP 5.6.1 and AP 5.6.7**).

(vii)   Representation of men and women on committees

Table 5.7 Membership, male/female ratio, frequency of meetings and AS SAT membership of committees

Committee	Membership	Ratio (W:M)	Frequency of meeting	SAT Member
Clinical Academic Group Executive	11 x senior academic staff, 1 x business manager, 1 x professional services, 1 x Medical Director and 1x Assistant Medical Director St Christopher's Hospice, 5 x clinical consultants, 1x Pharmacist, 1 x service manager, 4 x nursing leads	16:9	Monthly	SB, JK, DT
MSc Board	11 x senior academic staff, 1x Professional services 5 x Post Doc. Researcher, 1 x PhD Student, 3 x MSc student representatives, 1 x Clinical consultant, 1x honorary Senior Lecturer, 1x St Christopher's Spiritual Care lead, 1x St Christopher's Senior Educationalist, 1x St Christopher's CARE Lead	17:9	Quarterly	SB
CSI Executive groups				
Education, Staff Development and Training	1x Administrator, 1x Senior Academic	0:2	Three times a year	JK
Patient and Public Involvement	2x Research Associates, 3x Research Assistants, 2x Senior Academics, 2x PhD Fellows, Pre-doctoral Clinical Fellow	8:2	4 times a year	IT
Reach and Impact	1x Research Assistant, 3x Research Associate, 3 x PhD Fellow, 2 x senior academics, Pre-doctoral Clinical Fellow.	10:0	Every 6 weeks	
Estates	4x Professional Services, 1x Senior Academic, 1x Research Associates, 1x PhD Student	6:1	Roughly every 2 months	DT
Research Quality and Strategy	3x Senior academics, 1x PhD Student, 2x Research Assistant, 3x Research Associate, 1x Research Fellow	4:6	Three times a year	

Abbreviations: KCL King's College London, KHP King's Health Partners, KCH King's College Hospital NHS Trust, GSTT Guy's and St Thomas' Trust, SLAM (South London and Maudsley) NHS Foundation Trust, IoPPN Institute of Psychiatry, Psychology & Neuroscience, CSI Cicely Saunders Institute

The most influential committee is the Clinical Academic Group (CAG) Executive, comprising of department staff at lecturer grade and above. Importantly, there is wide representation of both gender and ethnicity on this committee. Of note, the Research Quality and Strategy has a higher male representation. We will monitor this going forward.

Participation on influential external committees

Staff participation on external committees (Figure 5.6.7) raises the individual's and the Department's profile and contributes to promotion. Staff participate during their normal working hours.

Figure 5.6.7 Participation of staff on external committees and gender split
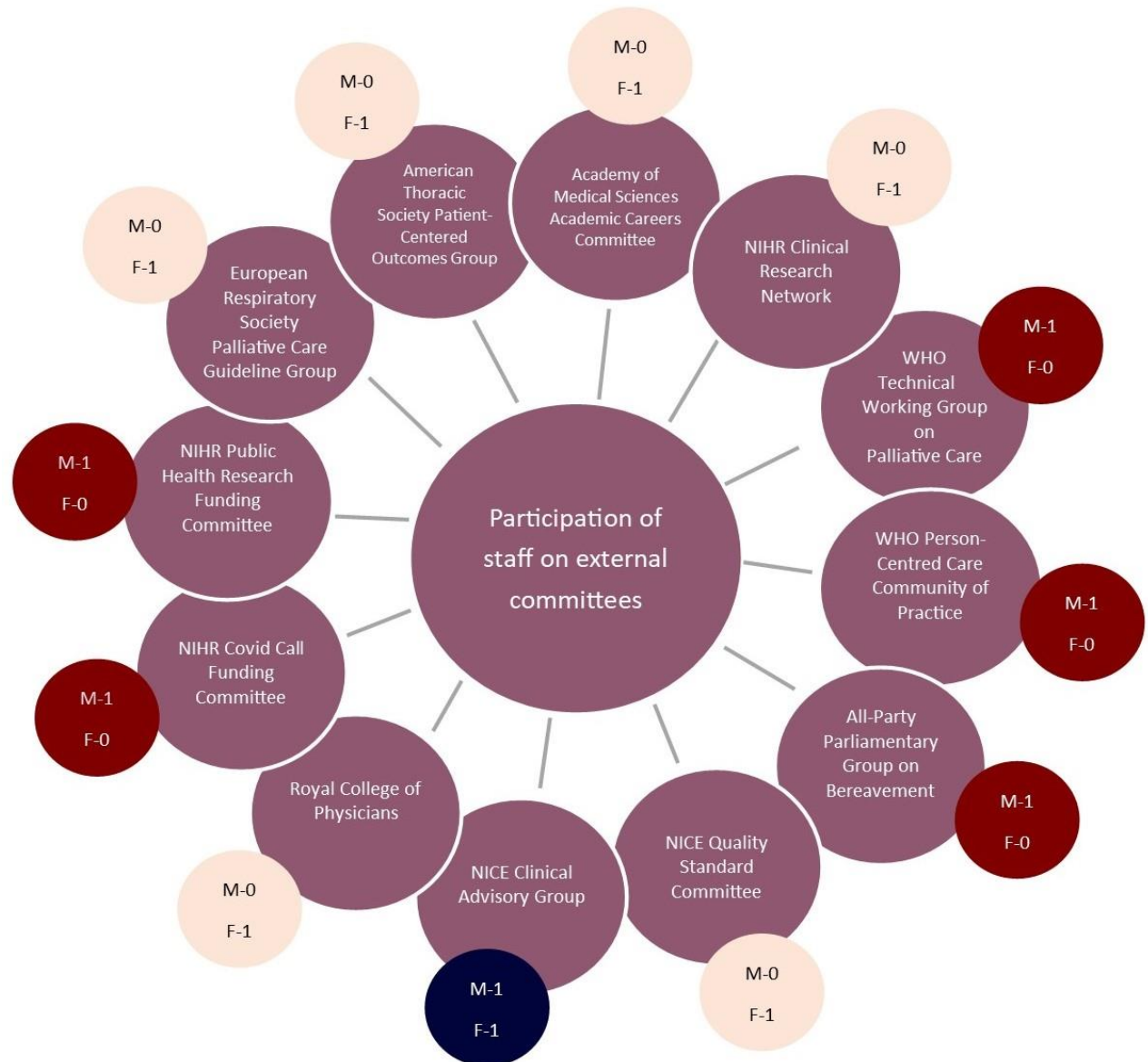
M = Male member of staff on external committee F = Female member of staff on external committee

Key achievements since 2016 Silver Award

- Outreach events held by staff and students of all genders and grades
- The disaggregated demographic data of invited speakers is now collected as standard
- Inclusive language guidance created at CSI has been shared within NMPC Faculty and wider University
- Championed for inclusion of pronouns on staff profile pages within NMPC Faculty on website
- Identification of 'leaky pipeline' in percentage of female EAPC conference plenary speakers which has led to the EAPC actively addressing this and collecting more demographic information on all delegates. Other disciplines have also begun to examine the gender equity within their own conferences
- 83% of staff attended Trans Matters training in 2020
- First KCL department to appoint a Trans Champion
- Identification of CEA award gap which has led to a rewrite of award guidance, enabling those who have taken maternity leave to receive the award
- We have established the first Palliative Care Athena SWAN Network
- Training and guidance on bullying and harassment has been disseminated

Action points going forward

AP 1.2 Continue to develop Athena SWAN Palliative Care Network

AP 5.6.7 Make work allocation fairer, reducing staff frustrations and inclusive of outreach activities

AP 5.6.5 Continue to contribute and encourage widening participation

AP 5.6.3 Ensure gender equity of invited speakers

AP 5.6.4 Continue to promote important gender issues in palliative care and the work of men to increase visibility of role models

AP 5.6.6 Continue to support Trans inclusion work and promote within the university

AP 5.6.2 Inclusive language guidance maintained

AP 5.6.6 Champion for inclusion of pronouns on all KCL staff profiles on website

AP 5.6.2 All reports of bullying and harassment are addressed and increase staff confidence that reports will be addressed effectively

AP 5.5.3 No staff are routinely excluded from meetings

AP 5.6.1 Changes to work-life balance are monitored in staff survey and explored in co-production meeting to understand if caused by COVID-19 or more persistent problem

Total number of words in section 5: 6117

6.   CASE STUDIES: IMPACT ON INDIVIDUALS
Recommended word count: 1000 words

Hamid:

Hamid Benalia is a Research Associate on a fixed term contract in the department. He is in a dual career family. In 2018 the department supported Hamid to take shared parental leave. Hamid explains how the department supported him and how his case study shows that, within the CSI, support for shared parental leave is not just reserved for those in senior positions or permanent contracts:

'In 2018, I took 4 months of paternity leave, taking over my partner's maternity leave through a shared parental leave arrangement. The department's management team, my line manager and colleagues supported me at all stages of my paternity leave: when I first announced it, whilst away and when returning to work. I had a great amount of support from the department on general questions I had and from Human Resources who helped me understand my rights around paternity leave such as the legal aspects and salary. I was also able to schedule several "keep in touch" days, and I was allowed the flexibility to decide when and how these days will be organised, so they could fit around my caring responsibilities.

At all times, the department have shown consideration of my needs: due to my son's health issues and difficulties in finding childcare that met our requirements, I had some challenges. The department and my line manager showed flexibility and consideration, allowing me to amend my return-to-work date. This was further shown after I had returned to work, where I was able to attend multiple health appointments and take emergency leave as needed. Again, my colleagues, line manager and department supported me through this.

Currently at work, I can work flexibly, so I can drop and pick up my children from school. The department policy around not having meetings before 9am and after 4pm is key in enabling me to meet my parental responsibilities.'

Sabrina:

Dr Sabrina Bajwah is a Clinical Senior Lecturer in Palliative Care. She describes herself as a British Pakistani female and the mother of 2 young children. She is in a dual career family. She joined the department as a MSc student in 2003, later returning as a PhD student in 2011. In 2017, to transition to an independent researcher, she applied and was successfully appointed as a Clinical Senior Lecturer. This post is a joint clinical academic role (50:50) between KCL and King's College NHS Foundation Trust. Sabrina explains how on-going mentorship, support and flexibility within the department have helped progress her academic career:

'Irene [previous CSI Director] and the senior management team encourage and support individuals to achieve their career ambitions and build self-confidence to compete at a national level for grants. Over the last ten years, Irene has provided me with 1:1 supervision and advice, enabling my progression from MSc to PhD to Clinical Senior Lecturer. When my maternity leave was not taken account of when awarding Clinical Excellence Awards at King's College Hospital, Irene and the department supported me in submitting a data request and working with the hospital board to get the policy changed. With Irene's support and guidance, my achievements were acknowledged, and I was subsequently awarded two Clinical Excellence Awards in the next round."

The CSI's attitude towards maternity leave and flexible working has allowed me to have two children whilst achieving in my career in a dual career family. At all points in the last 10 years, I have been able to change my working hours to accommodate my caring responsibilities and family life. I have two children, the youngest of whom is now four and my caring needs have varied as my family has grown. The department also supported me through a recent period of bereavement leave when I required extended leave.

There's an ethos of collaboration and support rippling through the Institute, championed by senior staff who actively support those with parental responsibilities. As a woman from an ethnic minority group, I feel fully supported and actively encouraged progress. Effective line-management at the CSI has connected me with an official mentor. This professional interaction has been integral to setting my long-term career goals. In addition, I have been supported to be a mentor to an ethnic minority mentee within KCL and I was supported to apply and win a fully funded place on the STELLAR HE Leadership course. The CSI and senior management team have actively supported the EDI committee, including the Widening Participation projects conducted with local schools. My work reaching out to under-represented students from local primary and secondary schools is actively encouraged.'

India:
India Tunnard joined the CSI in 2017 as a Research Administrator on a 2-year fixed term contract (FTC). In July 2019, she was promoted to a Research Project and Coordination Assistant (RPCA) role on a 5-year FTC. The RPCA roles are designed to enable those in professional services to move into a research role and India's career has been an example of that. India explains how she has been consistently supported to progress her career from administration into research:

'My promotion was enabled by the support I received from line managers after stating my intention to progress into a research position during my personal development review. My line managers ensured I received relevant training and experience that would support my progression.

Since my promotion, I have had the opportunity to undertake the two-week Research Methods module on the MSc in Palliative Care. This gave me the opportunity to refresh my knowledge gained during my MSc.

In 2020, I was supported to apply for a NIHR Pre-Doctoral fellowship which was successful. This fellowship will provide me with the time and funds to pursue research training in a field I am interested in. It was not just the support I received from my line manager, but the support from the entire team and CSI infrastructure was also instrumental to my success. The intended outcome of the fellowship is a strong NIHR Doctoral Fellowship application which I plan to complete at the CSI too.'

Total number of words in section 6: 998

7. FURTHER INFORMATION

The last 18 months have been difficult for the department. We are closely affiliated with King's College Hospital which serves an inner-city ethnically diverse and socioeconomically deprived population of 700,000. King's College Hospital has experienced very high levels of COVID-19 with close to 9,000 patients admitted with COVID-19 since the start of the pandemic. Many of our Clinical Academics (including our Co-chair of the SAT) had to return to clinical work fulltime to meet the national frontline COVID-19 response. The challenges of home working and meeting a nationwide clinical need over the last 18 months have challenged how we have been able to meet our actions over the last two years. Our ongoing committed to delivery of the Athena SWAN values during a challenging time demonstrates that these values are embedded within our department.

We are particularly proud of our ability to adapt to the needs of staff during COVID-19 where many staff were required to change working patterns due to clinical or caring commitments.
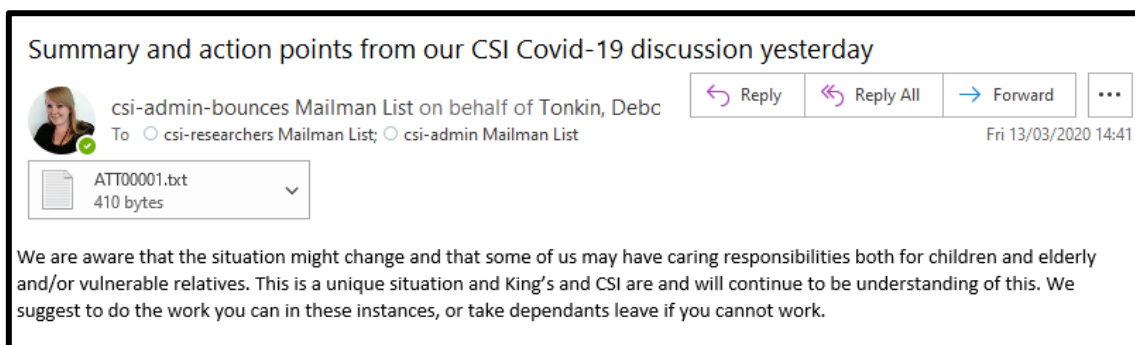
Screenshot of email from Business manager and CSI Director, March 2020

Our handling of COVID-19 demonstrated our embedded and intersectional approach to gender equality. The response was to prioritise the safety and wellbeing of our staff and students, particularly parents and carers. While keeping our community safe and transitioning to revised ways of educating, studying, researching, and working. We recognised the international effects and differential experiences of our community and acted to avoid compounding existing structural, societal inequalities and impacts. We did this through:

1. Furlough implementation:

   - Rates of women furloughed were proportionate with the populations of women in those roles
   - Clarity for parents and carers in furlough eligibility due to childcare/caring commitments
   - Provided managers' guidance (avoiding gendered assumptions)

2. Promotion round 2021 included COVID-19 issues in personal circumstances (2020 round relied on inputs up to Feb 2020 so was not impacted).

We have balanced this with managing the mental health and emotional needs of the members of our department, many of whom have been dealing with unprecedented stresses within their clinical work.

3. Department wide initiatives include:
   - 'virtual' coffee breaks (two per week) - (average weekly attendees 7).
   - A weekly Open plan office where people worked with open virtual connections (average weekly attendees 7)
   - Rise and stretch weekly activity with morning virtual yoga sessions (average weekly attendees 5)

4. Conveying appreciation and support and recognising increased commitments for all members of staff was also incredibly important in maintaining morale.
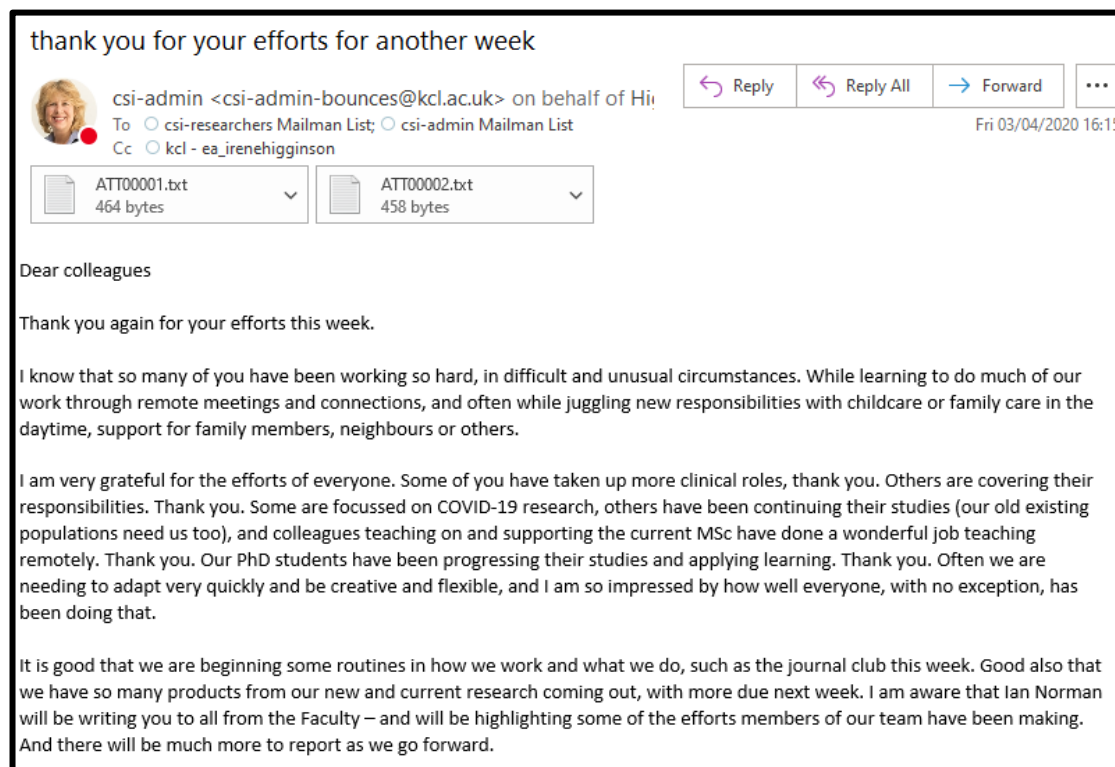
Screenshot of an email from CSI Director, April 2020

Our return to campus has been planned through multiple consultations with staff, including on the 2021 staff survey. We have strived to ensure those with caring responsibilities are catered to without groups of staff being excluded.

We continue to balance a clinical response to COVID-19 whilst remaining committed to our Athena SWAN values. In the long term, we are planning to merge CSI Athena SWAN activity with Faculty activity.

Total number of words in section 7: 463

8. ACTION PLAN

The action plan should present prioritised actions to address the issues identified in this application.

Please present the action plan in the form of a table. For each action define an appropriate success/outcome measure, identify the person/position(s) responsible for the action, and timescales for completion.

The plan should cover current initiatives and your aspirations for the next four years.

Actions, and their measures of success, should be Specific, Measurable, Achievable, Relevant and Time-bound (SMART).

See the awards handbook for an example template for an action plan.

LANDSCAPE PAGE

If you require a landscape page elsewhere in this document, please turn on SHOW/HIDE ¶ and follow the instructions in red. This text will not print and is only visible while SHOW/HIDE is on. Please do not insert a new page or a page break as this will mean page numbers will not format correctly.

Action point	Planned action	Rationale	Key milestones and outputs	Time frame Start	End	Person responsible	Success criteria
1. Beacon activities							
AP 1.1	Increase the diversity of our public involvement members and participants within our research by working with our Public Involvement executive group	Across our research, we work with members of the public to help shape and develop our work, ensuring its relevance to the people it intends to serve. A preliminary review of the characteristics of this group show they are predominantly female and white. During a department away day, staff felt increasing the diversity of this group may help empower more diverse participation in our research projects.	1. To work with current Public Involvement members to plan and target underrepresented groups identified in the 2021 PPI audit	Jan 2022	Dec 2022	IT and CH department PPI coordinator	Strategy co-developed and recruitment begun
			2. To annually audit PPI characteristics to monitor diversity	Oct 2022	Oct 2025		2022 PPI audit demonstrates increase in membership from groups identified in 2021 audit as under-represented.
			3. To review the diversity of participants within our studies	Jan 2024	Dec 2024		Participants in our published studies are representative of local area where around 61% are from an ethnic minority
			4. To share learnings and work with the NMPC Faculty EDI on their actions around inclusive research practices	Jan 2023	Dec 2025		Learnings are shared and working links strengthened

| AP 1.2 | To continue to develop Athena SWAN network of academics and researchers working in palliative care across the UK to collectively pursue the goals of the Athena SWAN charter | In March 2020 we launched the Palliative Care Athena Swan Network a collection of academics working in Universities across the UK. The purpose is mutual support and collaboration in achieving the goals of the Athena SWAN Charter, including providing mentorship to other groups applying for Athena SWAN Awards. We have agreed a vision for the group (see page 64) and are scheduled to meet every 6 months.

Our 18-month evaluation of the network showed that all members believe the network is relevant and helpful, particularly in thinking through Athena Swan initiatives within their own departments. We will continue to evaluate our work with this network to ensure benefit to all members. | 1. To continue to develop the network and offer mentorship to other departments applying for Athena SWAN awards | Feb 2022 | Dec 2025 | SBa | Mentor another department to successfully achieve higher Athena SWAN award |
			2. Work to explore if there are linkages to be made with or via the Athena Connect network	Jan 2023	Dec 2025		Our Palliative Care Network has established links with other organisations through opportunities for shared learning, collaborative events and shared membership
			3. Run evaluation of network early 2023 (18 months after first evaluation)	Feb 2023	Dec 2024		Evaluation demonstrates that the network is relevant and helpful
			4. Increase membership annually by 20% a. particularly increasing attendance from males working in palliative care	Jan 2022	Dec 2025		Membership is increased 20% annually with 5% increase in male representation per meeting until male attendance at 25%
			5. Continue to build Twitter platform	Jan 2022	Dec 2025		Tweet after every meeting and Twitter followers increase 20% annually
AP 1.3	Identify inequity issues affecting academic and research staff	In recent staff surveys, we have identified issues around lack of transparency around length of fixed term contracts and stress	1. To continue to run small task groups to address inequality issues	Jan 2022	Dec 2025	SBa/JK	Relevant issues are highlighted and groups formed to address these issues as required

	working in palliative care and collect and use evidence to ask for change in policy at a local and national level to improve equality, diversity and inclusion.	of fixed term contract ending while on a career break (specifically maternity leave) and having to repay pay received during that time. A guaranteed 3-month contract upon return to work would alleviate this problem. Both of these issues disproportionally affect our female colleagues. We hope by successfully addressing these issues within our department, we can push for change outside of our department.	2. Fixed term contracts working group to examine the determinants of contract length through interviews with Principal Investigators	Jan 2023	Dec 2024	Fixed term contracts working group	Reduction in staff reporting issues with fixed term contracts.

AP 3.1	To ensure the EDI/Self-assessment team (SAT) committee is representative of the department	Our field is typically one which attracts more female members of staff than male. Therefore, we believe that the gender and professional roles are proportional to the department we work in.	By June 2022, the SAT/EDI committee are representative of the department and characteristics of the group are monitored	June 2022	Dec 2025	SBa	The EDI committee is representative of the department in terms of gender and professional grade
AP 3.2	To hold Diversity and Trans Matters training annually	We are keen to ensure that EDI and Athena SWAN principles are at the core of our department.	Training is held bi-annually on Diversity and Trans Matters	Jan 2022	Dec 2025	HS - Trans Matters champion	Diversity/trans Matters training attended by >90% of department
AP 3.3	To maintain good awareness of the EDI/SAT committee and	We are keen to ensure that EDI and Athena SWAN principles are at the core of our department. This includes promotion of our	1. Build Twitter platform	Jan 2022	Dec 2025	BM	Increase in number of tweets from CSI account mentioning EDI by 20% per year

				Start	End	Lead	Success measure
	the work undertaken	EDI work department wide, including the Clinical Academic Group, and externally.	2. Department wide initiatives during allocated department meeting slots, such as trainings and co-production meeting	Jan 2022	Dec 2025	SBa	Monthly updates to the department on EDI initiatives
			3. Regular updates to the Clinical Academic Group on Action Plan	Jan 2022	Dec 2025		Monthly updates to CAG on EDI initiatives
4. Picture of department							
4.1 Students							
AP 4.1.1	To address the MSc award gap	We have identified a gender award gap in our MSc cohorts. Which we are committed to reducing. We also wish to explore any impact of COVID-19 on the award of our students. We will work to address any issues highlighted and seek to mitigate them going forward.	1. To survey current and former students to obtain their insights into studying on the MSc, Postgraduate Diploma & Certificate in Palliative Care a. Identify strategies to support male students to achieve at the same rate as their female counterparts	Jan 2022	Dec 2023	MW - MSc &PhD coordinator and CES MSc lead	Understanding of student experience of impact of hybrid teaching and strategies implemented to mitigate against any issues Award gap is reduced to 10% by 2027
			2. Collect data on, review and ensure diversity of lecturers and course committee members on the MSc course at course committee meetings	Jan 2022	Dec 2027	MW - MSc & PhD coordinator and CES MSc lead	MSc lecturers and course committee members are diverse in terms of gender (25% Male)
			3. To work with NMPC Faculty on their	Jan 2022	Dec 2027	DB and Tommy Dickson	Shared learning and knowledge. Working links

				attainment gap action plan				are strengthened and joint initiatives are forged
AP 4.1.2	Ensure a fair selection process for postgraduate taught students.	We recognise a problem in the number of male students enrolled in our MSc course. Over the last 10 years, the number of males has fluctuated between 3 and 25%. This is a priority for us to address going forward. Inequity for our MSc cohorts has been realised and therefore we have moved from a January intake to September. This will commence September 2022. This will mitigate against students being unable to: • apply for KCL scholarships which are open for September intakes only • undertake pre-sessional English language courses that are typically run in summer months • maintain their accommodation	1. To aim to increase the enrolment of male students by 5% each year until males represent at least 25% of the study body a. Percentage of males enrolled is reviewed at MSc course committee meetings held 3x per year 2. To continue to closely review the relationship between gender and the number of applicants, offers and acceptances 3. Applications are reviewed by female and male staff 4. To ensure that both male and female graduate students are used to promote the MSc in the MSc, Postgraduate Diploma & Certificate in Palliative Care in: - Online publicity material, e.g. case studies	Jan 2022	Dec 2027	JK, MW - MSc &PhD coordinator and CES MSc lead	Increase to 25% of male students over the next 5 years

		over summer months • participate in college fresher activities	- Testimonials and photographs in enquiry booklet - Present at promotional events				
			5. To ensure that both male and female teaching staff are represented in photographs throughout the MSc in the MSc, Postgraduate Diploma & Certificate in Palliative Care Enquiry booklet				
AP 4.1.3	Ensure equality in progression between MSc and PhD study	Through gathering data for this application, we have identified a leaky pipeline. None of our male MSc students have progressed to PhDs within the department. We are very keen to understand why this has occurred and seek to address this.	1. To actively support male MSc students to apply for PhD programmes within the department by actively advertising PhD opportunities to MSc students. For example, through meet and greet sessions with PhD students and research career sessions	Jan 2022	Dec 2027	MW - MSc & PhD coordinator, CES MSc lead and MM PhD Coordinator	Male MSc students applying for PhD programmes within the department make up 25% of all applications from MSc students by 2027
			2. To provide MSc students with more male role models through personal tutors, lecturers and speakers which will be reviewed by the MSc course committee	Jan 2022	Dec 2027		

			3. Include qualitative questions in survey of former students to explore reasons for not progressing onto PhD	Jan 2022	Dec 2023		
4.2 Academic staff							
AP 4.2.1	Increase gender balance and ethnic diversity in staff appointments at all levels	Between April 2016 and December 2019 the proportion of men in the department has remained stable for academic staff at around 30-40%. The proportion of men in research roles has increased from 11% to 18% and in professional services from 7% to 17%, we aim to increase this further.

The 2020 co-production meeting suggested lack of diversity at professorship level is an issue with higher ethnic minority and female representation in at junior researcher levels. Perhaps linking to this, the 2021 co-production meeting highlighted problems around lack of clarity on the KCL promotion process. | 1. To increase female academic staff in senior positions within the department to reflect the percentage of female research staff to mitigate against "leaky pipeline" | Jan 2022 | Dec 2027 | RH | No leaky pipeline for female staff within the department, the percentage of females in senior positions is reflected research staff and wider field |
| | | | 2. To work with NMPC Faculty to increase the number of job applications from males and ethnic minority groups
a. Review potential use of positive action statement in all job advertisements | June 2022 | Dec 2027 | JK | The percentage of male members of staff within the department is increased to 25% by 2027 |
			3. Hold annual 'Diversity/Trans Matters' training during department meeting time slot annually	Jan 2022	Dec 2027	IT	100% of line managers and those on interview panels attend Diversity Matters training
			4. Training held to provide clarity on the KCL promotion process	June 2022	June 2023	IT	Increase in staff reporting promotion process as transparent
			5. Individuals are supported to apply for	Jan 2022	Dec 2027	RH	At least one individual in the department to be

			and complete the STELLAR HE programme				supported and funded to apply for the STELLAR HE programme by January 2023
AP 4.2.2	Understand the reasons staff leave the department and any possible gender differences	We currently do not hold interviews with members of staff who leave the department. After consideration, we wish to reinstate these interviews to understand if there are any gender differences in leavers.	Implement leavers interviews or surveys and begin to identify and between group differences	Jan 2023	Dec 2027	RH	Leavers interviews or surveys have been implemented and work has begun to identify any patterns in leavers 100% of leavers have exit interview/survey

5. Supporting and advancing women's careers

5.1 and 2 Key career transition points: academic staff and professional and support staff

AP 5.1.1	Create more equality and understanding around fixed term contracts	Fixed term contracts disproportionally affect females within our department. Fixed term contracts make planning a family and applying for mortgage more difficult. As well as establishing a career as an independent researcher due to inherent uncertainty of FTCs.	1. Provide all staff with an understanding of how length of fixed term contracts is determined	Sept 2022	Sept 2023	Fixed term contracts working group with support from RH/SBa/JK	Reduction in staff stating issues with fixed term contracts in staff survey
			2. EDI committee work with CSI senior team to push for improvement of KCL policies for fixed term contract holders. For example, pushing for college wide end of contract meeting detailed below	Sept 2023	Sept 2024		CSI senior team push for improvement in FTC policies
			3. Meeting implemented 3-6 months prior to end of contact between person on FTC and line manager to discuss end of contract opportunities	June 2023	Dec 2027		End of contract meeting is implemented, and staff are supported at the end of their contracts

			4. Fixed term contracts working group to consider how to initiate conversation with UK research funders on how to alleviate issues around FTCs	Sept 2024	Sept 2025		
AP 5.1.2	From the beginning, ensure there is a consistent **sense of belonging and inclusion** for new staff within the department	In previous surveys it was identified that the induction process was not useful for all new staff, and some were not assigned a buddy. The buddy process is designed for the new member of staff to be supported settling into the department by a peer who does not work on the same projects as them.

In 2020 we revised the induction process. The induction is now online with links to all relevant resources. In the 2021 survey, 67% of staff found their induction useful. This is an increase but not where we would like this, although this could be a symptom of COVID-19. The annual co-production meeting highlighted that new members of staff may feel unsettled again when returning | 1. Actively monitor effect of multiple actions on sense belonging and inclusion reported in staff survey
a. and discuss any problems arising in annual co-production meetings | 2022 | 2025 | SBa | Staff survey reports >90% of staff feel a good sense of belonging within the department |
			2. Ensure all new staff are given a full induction a. and allocated a buddy	2022	2025	DT	100% of new staff report the induction as useful and they have been assigned a buddy
			3. Ensure department is aware of the requirements of a buddy	2022	2025	DT	100% of staff know what is required of buddies within the department
			4. Staff who joined whilst working remotely are supported when transitioning back into working in the office a. Buddies are reinstated b. In person coffee mornings and lunch breaks are implemented	2022	2023	EY and return to campus group	No instances of staff who joined 2020-2021 feeling unsupported when returning to the office

		to the office and that they will need supporting. Looking forward, we want to ensure that our Faculty staff survey incorporates and comprehensively addresses the core themes of Advance HE's Culture Survey.	5. To work with the NMPC Faculty to improve the staff induction process	2022	2023	EY	Knowledge is shared and working links strengthened
AP 5.1.3	Ensure equitable recruitment	To ensure gender equity, we previously made gender diverse interview panels compulsory. However as a result of this, we recognised this overburdened select male staff members. We have now adjusted our target. Going forward, we plan to develop reciprocal relationships with male dominated STEM departments to ensure diverse interview panels.	1. To ensure 80% of interview panels are made up of male and female staff	2022	2027	DT	80% of interview panels are made up of male and female staff
			2. To develop reciprocal relationships with STEM departments that have a high percentage of male staff to increase diversity of interview panels	2023	2027	SBa	At least one male member of staff on all interview panels
5.3 Career development: academic staff and professional services staff							
AP 5.3.1	Increase in reported effective discussions in PDRs	100% of professional services (PS) staff who had had a PDR in the 2019 survey felt that their most recent appraisal was useful. Whilst no one felt that their appraisal was not useful in the 2021 survey, 17% were neutral to its usefulness.	1. Continue to update and use the department opportunities document to consider opportunities in PDR sessions a. Promote Centre for Research Staff Development within department	Jan 2022	Dec 2025	IT	<10% of staff report PDR is not useful, and ineffective, or opportunities not discussed in PDRs an >80% of staff report department opportunities are transparent in staff survey

		The 2021 staff survey indicated that staff do not think the following opportunities are discussed effectively in PDRs: teaching 11%, conference attendance 24%, membership to executive groups 14%, end of contract opportunities 28% and promotion/career development 24%.	2. Continue to encourage staff to attend 'How to get the best from your PDR' session run by KCL	May 2022	July 2025	IT	Increase in staff satisfaction with PDR process to 100%
			3. Ensure roles outside of paid job role are discussed within the PDR, such as role in EDI committee and outreach activities	May 2023	July 2025	IT/SBa	Work allocation model considers citizenship roles such as EDI committee member and outreach activities are incorporated into the PDR
		More specifically, we saw an 8% drop in our 2021 survey in male staff reporting effective PDR conversations around training.	4. Develop working group to review the PDR process and ways to improve. a. Specifically identifying initiatives to improve male training needs	Jan 2023	Dec 2024	SBa	No gender differences in reports of effective discussions in PDRs
AP 5.3.2	Staff have a clear understanding of the pay and promotion process	60% of staff in the 2021 and 56% in the 2018 staff surveys report that the criteria for promotion aren't transparent. This became an important line of conversation in our 2021 co-production meeting.	Hold a methodological skills session on the KCL pay and promotions process	June 2022	June 2022	IT	>80% of staff report pay and promotion processes are transparent
AP 5.3.3	Training opportunities are clear to all staff and students	Our 2021 staff survey demonstrated staff uncertainty around appropriate training available for their role.	PS staff are notified of training opportunities specifically for them	Jan 2022	Dec 2023	DT	No reports of confusion around appropriate training available
5.5 Flexible working and managing career breaks							
AP 5.5.1	Staff are supported to	In our 2021 survey, only 45% of staff were aware of the Carer's Career Development Fund	1. Increase awareness around the Carer's Career Development	Jan 2022	Dec 2023	BM	>80% of staff are aware of the Carer's Career Development Fund

	take career breaks	In our 2018 survey, the experience of becoming pregnant on a fixed term contract was highlighted as an area for concern	Fund and career break policies through regular circulation of policies and physical copies of policies in central location				
		Our survey data also shows inconsistencies with the way Keeping In Touch days are used.	2. Review use of career break policies and funds and collate in one local document	Jan 2024	Dec 2027	BM/SBa	Staff survey indicates staff have consulted policies where required
		As our 2021 survey indicated that a large number of our staff are carers, and the move to flexible/remote working has allowed them to fit in their caring responsibilities in a more beneficial way, we will move to ensure all staff are aware of policies that support cover during short career breaks. We hope this will mitigate against any undue stress faced by staff in the future.	3. Learn from colleagues on how best to improve uptake of KIT days while remote working and share procedures with line managers a. Review in department meeting and annual co-production meeting b. Work with NMPC Faculty colleagues to learn about initiatives	Jan 2022	Dec 2027	SBa and maternity working group	Consistent use of KIT days
			4. Short term career break policies are circulated annually	Jan 2022	Dec 2027	SBa/BM	All staff aware of short term cover available and no reports of carers being unsupported to take short career breaks
AP 5.5.2	Increase in use of flexible and remote working for all	Staff surveys in the last 3 years have indicated that 87-90% have never applied to work flexibly or remotely, despite	1. Ensure all staff are able to work remotely and flexibly a. Specifically ensuring that those with caring	Jan 2022	Jan 2023	SBa/JK	100% of staff report to work remotely

				Start	End	Lead	Success measure
		around 35% of staff holding caring responsibilities. COVID-19 has required us all to work remotely and more flexibly which we have successfully achieved. Both 2020 and 2021 co-production meetings highlighted need for clear guidance on flexible/remote working when COVID-19 is over. Old guidance and application process to work flexibly was not clear and did not recognise change in need. In our 2021 staff survey, 75% of staff stated that they wished to work 3 or more days from home.	commitments are supported as needed				
			2. All staff report that remote and flexible working requirements are fair and transparent	Jan 2022	Dec 2027	SBa/JK	100% of staff report fairness around remote and flexible working in the staff survey
			3. In 2021 the EDI committee developed guidance to facilitate hybrid meetings when the department returns to campus. We will ensure this guidance is used and adhered to	Jan 2022	Jan 2023	IT	A culture of good practice hybrid meetings is developed with within the department with only positive impact on staff
AP 5.5.3	Ensure no staff are routinely excluded from attending department meetings	Our 2021 staff survey found that nearly 75% of staff were always able to attend required meetings. We are cognisant that this may fluctuate as we return to campus and are committed to monitoring that no one is disadvantaged. In our 2021 staff survey, we identified that 34% of our staff members had caring	1. Monitor 2022 survey to identify if meeting attendance is an issue	May 2022	Oct 2022	IT	>80% of staff report being able to attend meetings within their working hours
			2. As per the newly developed guidance, ensure meetings are held between 10am and 4pm to maximise inclusivity	Jan 2022	Dec 2027	IT	>80% of meetings are held between 10am and 4pm

		responsibilities (for: Children 27%, Adults 5%, Other 2%).					
5.6 Organisation and culture							
AP 5.6.1	Ensure all staff are experiencing a **work-life balance**	There has been a sharp increase in staff reporting a long hours culture within the department, 53% stated yes and 35% stated maybe in the 2021 staff survey. This may be a complex combination of COVID-19 causing recruitment freezes, increase in caring commitments, reduction in peer and line manager face to face support and reduction in leisure activities. However, we are committed to ensuring this is not prolonged.	1. Consider department email signature template that acknowledges flexible working hours (e.g. 'In our Institute we work flexibly. Whilst it suits me to email now, I do not expect a response or action outside of your own working hours') a. Ensure this is included in the induction	Jan 2022	Dec 2022	DB/DT	Email signature includes working hours
			2. Monitor responses to 2022 Faculty survey to observe feelings as staff return to campus a. Discuss strategies for staff to achieve better work-life balance in annual co-production meeting	May 2022	Oct 2027	SBa/IT	<20% of staff report a long hours culture within the department. >80% of staff reports a good work-life balance by 2027
			3. Work with Faculty EDI group to achieve action 'Increase our understanding of the working culture in the Faculty to inform strategy to improve workload and work hours culture'	Jan 2023	Dec 2027	SBa	

AP 5.6.2	Reports of **bullying and harassment** are addressed	Our surveys have highlighted instances of bullying and harassment. While these numbers are small, they are persistent. In 2021 we held a bullying and harassment training session to ensure all staff know how to report instances. Our survey also indicated that staff do not believe the department/Faculty would effectively address incidents of bullying and harassment reported. Staff in the co-production meeting want to push for the bullying and harassment training to be held annually and made compulsory for all staff. We also worked within the Bullying and Harassment working group to develop new guidance and policies across the university. We continue to share KCL wide initiatives related to bullying and harassment. In 2021, we developed an inclusive language document to support and increase awareness around inclusive language. This	1. Bullying and harassment training is made compulsory and added to induction	Jan 2022	June 2022	RH	Bullying and harassment training is compulsory within the department and added to induction
			2. Bullying and harassment training held annually and attended by >90% of department	Feb 2022	Feb 2027	IT	>90% of staff attend bullying and harassment training
			3. Explore staff lack of confidence in department handling incidents of bullying and harassment effectively in co-production sessions a. implement initiatives to increase confidence	May 2022	Oct 2024	SBa	>90% of staff believe the department/Faculty would handle reports of bullying and harassment effectively
			4. All staff report knowing how to report instances of bullying and harassment	May 2022	Oct 2022	SBa	100% of staff report knowing how to report
			5. Monitor use and regularly update the inclusive language document	Jan 2022	Dec 2027	EY	Inclusive language document is updated and circulated annually
			6. To work with NMPC Faculty EDI committee to develop initiatives to reduce incidents of bullying and harassment	Jan 2022	Dec 2027	SBa	

		has been shared widely within the university.					
AP 5.6.3	Ensure **gender equity** in speakers of all events	Speakers at our events can act as role models to our staff, therefore we believe it is important to ensure diversity of our speakers.	Work with coordinator to monitor equity of speakers of open seminars and annual lectures	Jan 2022	Dec 2027	DB + department seminar coordinator	Equitable numbers of male and female speakers across all open seminars and annual lectures
AP 5.6.4	Continue to raise awareness of issues affecting women in palliative care and promote the work of men in palliative care	We believe it is important to recognise International Women's Day and particularly the work on gender inequality within palliative care. However, we recognise the female-dominance within the field and therefore, will work to promote men in palliative care on International Men's Day. We hope that by developing initiatives such as this, we can contribute to increasing men within the field of palliative care and specifically in our staff and student populations.	1. Annually hold IWD events that are free, at an appropriate time of the day and open to the public	March 2022	March 2027	IT & EY	IWD events are held annual with a range of speakers presenting their work on gender inequity within palliative care
			2. Hold event on IMD to promote men in palliative care and then annually	October 2022	November 2027	SBa	The work of men in palliative care is promoted to the department and externally to increase visibility of role models in the field
AP 5.6.5	Continue to contribute and encourage widening participation	We believe it is important to contribute to our local community, particularly students who may be underprivileged.	1. Continue to run KHP summer school session involving a range of staff	July 2022	July 2027	IT	KHP summer school session held annually with positive feedback from students
			2. Work with Faculty EDI committee to create and implement widening participation strategy	Jan 2023	Dec 2027	EY	Further widening participation initiatives are developed and implemented

AP 5.6.6	Continue to promote work on Trans inclusion	Trans Matters training was held for the whole department in May 2020. This training highlighted ways we can become more inclusive of trans and gender non-binary people. We have begun work pushing for the university to include an option pronouns field on all staff online profiles. Faculty communications team have been extremely helpful in supporting us with this. We intend to continue to work with them to push the initiative forward.	1. To continue to support our Trans champion to develop and achieve the actions laid out in the trans inclusion action plan	Jan 2022	Dec 2027	All	Trans inclusion initiatives are taken up and implemented within the department
			2. To work with wider university network of EDI champions to address inequality and promote inclusive environments	Jan 2022	Dec 2027	HS – Trans champion	
			3. To continue work on encouraging the university to include pronouns field on all online staff profiles	Jan 2022	Dec 2022	DB & Zoe Dunlop, NMPC Communications manager	Pronouns field added as standard on KCL staff profile templates and published on public facing webpages
AP 5.6.7	Make work allocation fairer through implementation of work allocation model	The last two staff surveys have highlighted that staff do not feel the allocation of teaching, marking and supervising student was transparent. In the 2019 survey 50% of staff strongly agreed/agreed that their workload allows them to meet the objectives in their PDR. This increased to 67% in 2021. However, there were some concerning comments around working additional	1. Continue to consider the best work allocation model for our department a. to include work within the SAT/EDI committee and other non-paid job role responsibilities b. to be discussed at the next co-production meeting	Jan 2022	June 2023	SBa/JA	
			2. Work allocation model implemented, and use is evaluated	June 2023	Dec 2025		Work allocation model agreed and in situ. >80% of staff report the work allocation model is useful

		hours to achieve such objectives.

The 2021 co-production meeting highlighted issues around staff being required to absorb work loads of colleagues who leave the role or go on a career break.

Work around work allocation models has begun.

In 2018, we introduced a 'list of developmental opportunities' for staff to see allocation and availability of opportunities and increase transparency. This is routinely circulated with PDR information to be considered within the PDR process | 3. Use work allocation model to analysis any inequality in workload allocation | July 2023 | Dec 2027 | | Inequality in workload allocation has been identified and work progressed to address |
| | | | 4. Share learning and work with the NMPC Faculty to develop a work allocation model that is useful to all | June 2023 | Dec 2027 | | >80% of staff report the work allocation model is useful in staff survey |
| | | | 5. To consider ways to improve work being unfairly allocated on already busy staff when their colleagues leave the role | Jan 2022 | Jan 2024 | | 0 reports of staff feeling overburdened when a colleague leaves |