

Health Research Authority

Equality Information and Objectives

April 2018

1.0 Background

1.1 The Equality Duty

As a public sector organisation, the Health Research Authority (HRA) recognises its general and specific public duty identified in section 149(1) of the Equality Act 2010 towards people with characteristics protected by the Act and its legal and moral responsibility for ensuring equality of opportunity and respect for diversity.

The Public Duty

This covers:

- Eliminating unlawful discrimination (both direct and indirect), harassment and victimisation;
- Advancing equality of opportunity between different groups; and
- Fostering good relations between different groups.

The nine protected characteristics are:

- Age including specific ages and age groups;
- Disability including cancer, HIV, multiple sclerosis, and physical or mental impairment where the impairment has a substantial and long-term adverse effect on the ability to carry out day-to-day activities;
- Gender re-assignment where people are proposing to undergo, are undergoing or have undergone a process (or part of a process) for the purpose of reassigning the person's sex by changing physiological or other attribute of sex;
- Marriage and civil partnership;
- Pregnancy and maternity;
- Race including colour, nationality and ethnic or national origins;
- Religion or belief, including a lack of religion or belief, and where belief includes any religious or philosophical belief;
- Sex;
- Sexual orientation, meaning a person's sexual orientation towards persons of the same sex, persons of the opposite sex and persons of either sex.

The HRA recognises the benefits that can arise from the implementation of equality and diversity principles:

- Flexible provision of service(s) ensuring high levels of satisfaction with those services;
- Engaging people from different cultural backgrounds allows a better understanding of need and creates a diverse workforce which reflects the wider community;
- A diverse workforce provides different viewpoints and will help the HRA to find innovative ways to improve both working conditions and service provision;
- A diverse workforce helps to provide greater flexibility within working practices e.g. different religions have festivals on different dates thereby supporting different attendance patterns that respect the individual as well as providing continuous service provision; and
- Valuing staff and ensuring they feel they have been treated fairly improves morale, motivation, job satisfaction and reduces staff turnover.

1.2 The Health Research Authority

On 1 January 2015 the HRA became a Non Departmental Public Body (NDPB) established under the Care Act provisions of 2014. The HRA is tasked with protecting and promoting the interests of patients and the public in health and social care research, including publishing policy and guidance on the good management and conduct of research and promoting transparency in research. In accordance with the Care Act 2014, its main purposes are to co-ordinate and standardise practice relating to the regulation of health and social care research, recognise and establish Research Ethics Committees (RECs), be a member of UK Ethics Committee Authority (UKECA); and provide approvals for the processing of confidential information relating to patients.

The HRA appoints and manages 67 RECs, and works with colleagues in the Devolved Administrations to provide a UK wide REC service working to HRA Standard Operating Procedures (SOPs).

It also appoints and manages the independent Confidentiality Advisory Group (CAG) which provides advice about the appropriate use of confidential patient information without consent in the National Health Service (NHS) for research and other purposes; such as the commissioning of health services. The HRA is formally responsible for approving CAG's advice for applications relating to research and for advising the Secretary of State for purposes outside of research.

1.3 Meeting its Duty under the Act

To meet its general duty the HRA has an Equality Policy, raises awareness among staff and REC / CAG members by implementing a mandatory training programme, ensures equality is considered as part of business planning objective setting, undertakes Equality Analyses* and publishes relevant information.

The HRA is committed to ensuring that all its practices are carried out in a fair, reasonable and consistent manner and will promote human rights and equality and diversity and will not discriminate against any staff, potential staff, members, partners, service users or anyone that deals with the HRA in any way.

The HRA will promote equality and integrate an anti-discriminatory approach into all areas of its work. It will ensure that barriers to accessing services and employment are identified and removed, and that no person is treated less favourably on the grounds of their age, disability, gender reassignment, marriage, civil partnership, pregnancy, maternity, race, religion, belief, sex or sexual orientation.

Anyone that deals with the HRA will receive equitable treatment whether they are receiving a service, providing a service, applying for a job, tendering for a contract or any other relationship.

1.4 Equality Objectives

- Develop an Equality Policy;
- Ensure all directly employed staff, secondees, agency workers, contractors, volunteers, members, new recruits etc. (this is not an exclusive list) have the ability to raise issues or concerns either through their Line Managers or through defined processes such the Staff Partnership Forum or the Bullying and Harassment / Grievance / Raising Concerns / Complaints Policies;
- Be a Disability Confident Employer;
- Conform to best practice recruitment policies and practices;
- Publish relevant equality data that is made available to the public and informs policy and decision making;
- Undertake an Equality Impact Analysis (EIA) when taking forward any policy (*defined by the Equality and Human Rights Commission (EHRC) as a function, strategy, procedure, practice, project, or decision*) so that the needs of protected groups are integrated into our business activity:
- Ensure all directly employed staff, secondees, agency workers, contractors, volunteers and members complete mandatory Equality & Diversity training;
- Undertake an equality survey of volunteer members every 2 years; and
- Ensure the HRA website complies with all accessibility requirements.

* An Equality Impact Analysis is an examination of a proposed function, strategy, procedure, practice, project, or decision to see if it could adversely affect those with protected characteristics.

2.0 Equality Information

2.1 Gender Pay Gap

The gender pay gap shows the difference in average earnings between women and men. It's an area the government has committed to addressing and organisations with 250 or more employees are now obliged to publish annual statistics. The HRA has fewer than 250 employees but as this is an area we are committed to, we have carried out and published the same analysis as larger organisations would be expected to.

The results show that the average hourly rate is 10.8% higher for men with the median being 19.9%. This does not mean that men get paid more than women for doing the same job as this is highly unlikely given the NHS pay grade structure and employment practices the HRA uses. What it does show however is that the lower average pay for women reflects the fact that there are fewer women in middle to senior management roles than in other areas of the organisation.

The HRA is proud that women are well represented across the workforce but appreciates that more can be done and will be taking work forward through the Board and the Staff Partnership Forum to determine actions to help address the issue identified.

The HRA has followed the guidance from the Department of Health and Social Care and presented the report in the agreed standard NHS Reporting template that divides all employees into 4 equal quartiles.

Snapshot Date: 31 Mar 2017

		%
1. Mean gender pay gap. Ordinary Pay		10.76
2. Median gender pay gap. Ordinary Pay		19.89
3. Mean gender pay gap. Bonus pay in the 12 months ending 31 March		0.00
4. Median gender pay gap. Bonus pay in the 12 months ending 31 March		0.00
5. The proportion of male and female employees paid a bonus in the 12 months ending 31 March 2017	Male	0.00
	Female	0.00
6. Proportion of male and female employees in each quartile		
Quartile	Female %	Male %
First (lower) Quartile	71	29
Second Quartile	87	13
Third Quartile	69	31
Fourth (Upper) Quartile	63	37

2.2 Equality Information for Staff (as at March 2018)

Gender	Number	%
Female	155	73.81%
Male	55	26.19%
Grand Total	210	100.0%
Ethnic Origin (Grouped)	Number	%
Asian or British Asian	17	8.10%
Black or Black British / Mixed / Other ethnic group	20	9.53%
Not Stated/Undefined	14	6.67%
White	159	75.71%
Grand Total	210	100.00%
Religious Belief	Number	%
Atheism	57	27.14%
Christianity	62	29.52%
Hinduism / Islam / Judaism	12	5.72%
I do not wish to disclose my religion/belief / Undefined	58	27.62%
Other	21	10.00%
Grand Total	210	100.00%

Disabled	Number	%
No	180	85.71%
Not Declared / Undefined	19	9.04%
Yes	11	5.24%
Grand Total	210	100.00%
Age Range	Number	%
18-20	0	0.00%
21-25	12	5.71%
26-35	74	35.24%
36-45	58	27.62%
46-55	40	19.05%
56-75	26	12.38%
Grand Total	210	100.00%
Sexual Orientation	Number	%
Bisexual / Gay / Undefined	15	7.14%
Heterosexual	165	78.57%
I do not wish to disclose my sexual orientation	30	14.29%
Grand Total	210	100.00%

2.3 Equality Information for Volunteer Members (as at July 2016)

There were 334 responses to the survey which represents approximately 1/3rd of the total so is therefore statistically valid.

Age	Responses	Percent
Under 18	0	0.00
18 - 20	0	0.00
21 - 25	1	0.30
26 - 30	4	1.20
31 - 35	18	5.39
36 - 40	24	7.19
41 - 45	28	8.38
46 - 50	29	8.68
51 - 55	35	10.48
56 - 60	49	14.67
61 - 65	51	15.27
66 - 70	41	12.28
71 - 75	21	6.29
76 - 80	13	3.89
81 or over	4	1.20
I do not wish to disclose this information.	6	1.80
Not stated	10	2.99

Sex	Responses	Percent
Male	150	44.91
Female	172	51.50
Not stated	12	3.60
Ethnicity	Responses	Percent
African	4	1.20
Any other Asian background	4	1.20
Any other Black background	0	0.00
Any other ethnic group	4	1.20
Any other mixed background	0	0.00
Any other White background	22	6.59
Bangladeshi	3	0.90
Caribbean	1	0.30
Chinese	7	2.10
English/ Welsh/ Scottish/ Northern Irish/ British	256	76.65
Indian	14	4.19
Irish	3	0.90
Pakistani	3	0.90
White and Asian	1	0.30
White and Black African	0	0.00
White and Black Caribbean	0	0.00
I do not wish to disclose this information	5	1.50
Not stated	7	2.10
Religion	Responses	Percent
Buddhist	1	0.30
Christian	137	41.02
Hindu	11	3.29
Jewish	7	2.10
Muslim	7	2.10
Sikh	2	0.60
Other Religion	7	2.10
No Religion	130	38.92
I do not wish to disclose this information	25	7.49
Not stated	7	2.10
Disabled	Responses	Percent
No	274	82.04
Yes, limited a little	39	11.68
Yes, limited a lot	5	1.50
I do not wish to disclose this information	7	2.10
Not stated	9	2.69
Disability type	Responses	Percent
Physical impairment	16	4.79
Long-standing illness	15	4.49
Sensory impairment	5	1.50
Mental health condition	2	0.60
Other	5	1.50
I do not wish to disclose this information	0	0.00

Sexual orientation	Responses	Percent
Heterosexual	274	82.04
Bisexual	4	1.20
Gay	9	2.69
Lesbian	0	0.00
Other	1	0.30
I do not wish to disclose this information	30	8.98
Not stated	16	4.79