## ATHENA SWAN GOLD DEPARTMENT AWARDS

A Gold department award recognises sustained progression and achievement, by the department, in promoting gender equality and addressing challenges particular to the discipline. A well-established record of activity and achievement in working towards gender equality should be complemented by data demonstrating continued impact. Gold departments should be beacons of achievement in gender equality, and should champion and promote good practice to the wider community.

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 Gold department awards.
You should complete each section of the application.
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.

## ACRONYMS USED IN THIS APPLICATION

| ACF | Academic Clinical Fellow |
| :--- | :--- |
| ACL | Academic Clinical Lecturer |
| AP | Associate Professor |
| AS | Athena SWAN |
| BW | Better Workplace Group (our SAT) |
| CEBM | Centre for Evidence Based Medicine |
| CTU | Clinical Trials Unit |
| DGS | Director of Graduate Studies |
| DoH | Department of Health |
| E\&D | Equality and Diversity |
| E\&MCR | Early and Mid-Career Researchers |
| F | Female |
| FT | Full time |
| FTC | Fixed Term Contract |
| HERG | Health Experiences Research Group |
| HoD | Head of Department |
| HR | Human Resources |
| HTA | Health Technology Assessment |
| LTFT | Less-than-full-time |
| M | Male |
| MIMS | Monthly Index of Medical Specialities |
| MSD | Medical Sciences Division |
| NDPCHS | Nuffield Department of Primary Care Health Sciences <br> NIHR |
| National Institute for Health Research |  |
| NSPCR | NIHR School for Primary Care Research |
| OLI | Oxford Learning Institute |
| OUCAGS | Oxford University Clinical Academic Graduate School |
| PA | Personal Assistant |
| PDR | Personal Development Review |
| PGR | Post Graduate Research |
| RoD | Recognition of Distinction (the University's promotions exercise |
|  | which awards the title of professor to eligible staff; such staff are |
| referred to as titular professors) |  |
| SAPC | Society for Academic Primary Care |
| SDF | Staff Development Fund |
| WG | Working Groups |

## RESEARCH GRADES AND TITLES USED IN THIS APPLICATION

| Grade 6 | Research support post - may be working towards a PhD. |
| :--- | :--- |
| Grade 7 | Post-Doctoral Researcher at an early stage in their research <br> career. |
| Grade 8 | Researcher with responsibility for their own area of research and <br> seeking funding for their own proposals. Eligible to apply for URL <br> title. |
| Grade 9 | Researcher with a recognised research reputation and generally <br> leading a significant research project within an overarching <br> research programme. Eligible to apply for Associate Professor <br> Title. |
| Grade 10 | Researcher with a substantial reputation in their field and leading <br> a significant research programme. |
| University Research <br> Lecturer | A title awarded to research staff at grade 8 or above in <br> recognition of achievement in research, line management/ <br> supervision and good citizenship. |
| Academic <br> Lecturer | Clinical <br> Academic clinician with a DPhi//PhD in a y year, NIHR funded post <br> undertaking 50\% academic work and 50\% clinical work. |
| Clinical Lecturer | Clinician with purely teaching contract. |
| Clinical <br> Training | Research clinician undertaking a DPhil or In-Practice Fellowship on an <br> employment contract in the department. |
| Clinical <br> Researcher | Clinical researcher relatively new to research and not on the NHS <br> consultant pay scale. |
| Senior <br> Researcher | Academic GP on NHS consultant pay scale. <br> Clinical <br> Associate Professor <br> A defined permanent clinical academic post, filled by open <br> recruitment, with college association. Equivalent to a Professor <br> elsewhere. May also have a Titular Prof title. <br> Titular <br> Associate Professor <br> The title of Associate Professor can be awarded to staff at Grade <br> 9 or above in recognition of the excellence of their research; the <br> award of a title does not entail changes to the individual's <br> underlying post. <br> Titular <br> Professor <br> The title of professor can be awarded at grade 9 or above in <br> recognition of the excellence of their research; the award of a <br> title does not entail changes to the individual's underlying post. <br> University <br> Lecturer/Associate <br> Professor <br> A defined, permanent post, filled by open recruitment, with <br> college association. May also have a Titular Prof title.A defined, permanent post, filled by open recruitment, with <br> college association. |

## 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.

| Gold Department application |  |
| :--- | :--- |
| Word limit | 13,000 |
| Recommended word count | 500 |
| 1.Letter of endorsement | 500 |
| 2.Description of the department | 1,000 |
| 3. Self-assessment process | 2,000 |
| 4. Picture of the department | 7,000 |
| 5. Supporting and advancing women's careers | 1,500 |
| 6. Case studies | 500 |
| 7. Further information |  |


| Name of institution | University of Oxford |
| :---: | :---: |
| Department | Nuffield Department of Primary Care Health Sciences |
| Focus of department | STEMM |
| Date of Gold application | April 2017 |
| Date of current Silver award | April 2014 |
| Institution Athena SWAN award | Date: November 2013 Level: Bronze |
| Contact for application Must be based in the department | Sue Ziebland |
| Email | Sue.ziebland@phc.ox.ac.uk |
| Telephone | 01865289302 |
| Departmental website | www.phc.ox.ac.uk |

## 1. LETTER OF ENDORSEMENT FROM THE HEAD OF DEPARTMENT

Recommended word count: 500 words
An accompanying letter of endorsement from the head of department should be included. If the head of department is soon to be succeeded, or has recently taken up the post, applicants should include an additional short statement from the incoming head.

Note: Please insert the endorsement letter immediately after this cover page.

NUFFIELD DEPARTMENT OF

Radcliffe Observatory Quarter, Woodstock Road, Oxford. OX2 6GG
Tel: +44(0)1865 617851 • richard.hobbs @phc.ox.ac.uk • www.phc.ox.ac.uk
Professor Richard Hobbs, Head of Department, Professor of Primary Care Health Sciences

Ms Ruth Gilligan
Athena SWAN Manager
Equality Challenge Unit
First Floor, Westminster Tower
3 Albert Embankment
London SE1 7SP
28 April 2017

Dear Ms Gilligan,
I write to pledge my endorsement for the Nuffield Department of Primary Care Health Sciences' Athena SWAN Gold Award application. I confirm that the information in this application is an honest and accurate representation of the department.

When I joined in 2011 the department was small, occupying one floor of an open-plan office. Whilst realising our vision of becoming a world-leading centre of academic primary care, a major challenge was enhancing our culture of inclusivity and equal opportunity during a period of rapid growth and two office moves, which split our people over three buildings. Our commitment to Athena SWAN principles helped to nurture our supportive work environment during these major transitions.

A further challenge was to address the gender imbalance of our senior team, necessitating policies on new appointments and investment in our academic pipeline. In 2012 we had no women professors, but now celebrate four female professors and three female associate professors among our 18 senior staff. By adding discussion of grade descriptors to our performance development review (PDR) process, we increased regrade numbers at all levels and for all roles. Staff satisfaction with annual PDRs is very high, a policy I champion.

Our family-friendly workplace has progressive flexible working and family-leave policies. For example, our maternity leave checklist is used before, during, and after return from parental leave, successfully supporting staff to make plans, keep in touch and rapidly pick up careers on return. We encourage use of the university's 'returning carers fund' to finance training, support or conference attendance.

Latterly, we co-led an institutional equality objective to inspire women across the world and demystify academic careers, published at www.womeninscience.ox.ac.uk. One of our beacon activities, this portrays women's experiences of working in science illustrated with hundreds of clips from interviews.

To underline our commitment to a diverse and progressive culture, we renamed our SAT the Better Workplace Group. I am proud of the department-wide enthusiasm for this initiative, evidenced by the formation of nine new working groups in the last two years. As our department's academic successes continue, so has our ability to nurture workplace excellence. This is reflected in our positive survey feedback across numerous issues including induction, support for PDRs and career development, mechanisms for sharing information, promoting the visibility and contributions
of staff at all levels, and our culture of flexible working. Further, striving to support continuity of employment has resulted in high staff retention rates, increases in promotions and distinction awards, and staff reporting feeling valued and integrated.

As our beacon activities and actions show, we are committed to sharing good practice and contributing to institutional initiatives. Indeed, we have achieved high visibility for our equality agenda institutionally.

While we have come far over the past few years, our work will continue - in particular, we will focus on growing our academic pipeline and embedding equality across our teams. Department members at all levels are committed to creating and maintaining a better, more diverse and inclusive workplace and the range of ideas in our action plans are testament to their initiative and dedication.

Yours faithfully


Professor Richard Hobbs
Head of Department, Nuffield Department of Primary Care Health Sciences

## 2. DESCRIPTION OF THE DEPARTMENT

Recommended word count: 500 words
Please provide a brief description of the department, including any relevant contextual information. Present data on the total number of academic staff, professional and support staff and students by gender.

Our department undertakes research into the healthcare provided at primary care level (often, but not always, by GP practices). We are one of 16 departments that collectively form the Medical Sciences Division (MSD).

Figure 2.1: The University structure


We are a relatively new department, first established in 1998, and expanding rapidly since the arrival of the current Head of Department in 2011.

Over the past five years we have moved sites twice, a significant upheaval, but have now settled into the Radcliffe Primary Care Building in the heart of the Radcliffe Observatory Quarter in central Oxford. 35 members of the department (15\%) are in another building on the same site.


Figure 2.2: The Radcliffe Primary Care Building
We are predominantly a research department. The total annual income of the department is approximately $£ 16 \mathrm{~m}$ of which around $£ 11 \mathrm{~m}$ is research-related income.

We do not run an undergraduate course ourselves; students studying medicine at Oxford apply to the Medical School at divisional (MSD) level. We do, however, contribute teaching to the undergraduate medical course and we arrange placements for undergraduate medical students in GP practices. We

Figure 2.3: Research themes

don't run taught postgraduate courses (though we contribute teaching and curriculum planning to taught courses based in other departments) but do admit postgraduate research students. We also run successful short courses in qualitative research and evidence based medicine. Our research covers a wide range of health issues, develops and utilises specialist research methods, and seeks to improve health service delivery. Many of our projects engage clinicians, academic researchers, methodology specialists, trial managers and external collaborators. Our research, organised into 10 themes and 22 research groups, is office and field-
based). $19 \%(6 \% \mathrm{~F}, 13 \% \mathrm{M})$ of our staff headcount are part-time clinicians (mostly GPs). Non-clinical researchers include ethnographers, qualitative researchers, epidemiologists, health economists, and statisticians.

We currently have 27 DPhil students (52\% F), 117 academic and research (A\&R) staff ( $61 \%$ F) and 88 professional and support (P\&S) staff ( $86 \%$ F) (figure 2.4 ). Only 7 members of staff ( $2 \mathrm{~F}, 2 \mathrm{M}$ A\&R, $3 \mathrm{~F} P \& S$ ) are exclusively involved in teaching.

We also host 12 Academic Clinical Fellows (ACFs) (67\% F), who are junior doctors employed by the GP Deanery, an NHS body. These trainee doctors have completed at least two years of Foundation Training and are appointed to a four-year training programme in general practice and research. ACFs spend $25 \%$ of their time in research and for this portion of their time they are based in the department with academic supervision from our staff. They are a vital part of the clinical academic pipeline and so we have included them as members of the department.

Figure 2.4 Headcount of all members of the department


Oxford has a highly devolved structure and the department has its own administrative support including HR and finance. Many P\&S roles support research through project management, clinical trials management or research assistance. A 2016 re-categorisation exercise explains the shift in staff from A\&R to P\&S in Figure 2.4.

Management is overseen by our senior team ( $8 \mathrm{~F}, 11 \mathrm{M}$ ), comprising all staff with the title of Professor or Associate Professor, clinical and non-clinical, and 1 F nonclinical professor recruited in 2017.

Word count: 505

## 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.
(ii) an account of the self-assessment process.
(iii) plans for the future of the self-assessment team.

## (i) A description of the self-assessment team

We established a SAT in 2012 including representation from different research groups and grades, clinical and non-clinical staff and students. By 2013 the SAT had evolved (alongside our department-wide approach) to comprise nominated leads of a range of Working Groups (WGs). These groups initially tackled topics (e.g. visibility of women, part-time work, non-clinical research careers) for which our surveys and focus groups indicated a need. Nine new WGs emerged between 2014 and 2016 to address topics of interest to staff.

Core members of the group are the HoD, Administrator, HR Manager and Chair (who monitor the E\&D focus). The group currently includes 15 WG leads representing members from across the department. The expectation that every staff member will join a WG is raised in personal development reviews. Each WG has a champion, with responsibility for the WG's Action Plan at a senior level.

## SAT Working Group leads

| Working <br> Group (WG) <br> Lead | Focus/ topic | Comments (redacted) | WG Champion <br> (support for <br> the WG leads <br> within senior <br> team) |
| :--- | :--- | :--- | :--- |
| Anne-Marie <br> Boylan | Early-Mid career <br> researchers |  | Professor Carl <br> Heneghan |
| Susannah <br> Fleming | Support, <br> teaching, admin <br> and researchers |  | Professor Susan |
| Jebb |  |  |  |


| Anthony Harnden | Models of workload allocation | $\mathrm{n} / \mathrm{a}$ |
| :---: | :---: | :---: |
| Richard Hobbs | Head of Department | $\mathrm{n} / \mathrm{a}$ |
| Constantinos Koshiaris | DPhil student | TBC |
| Kamal Mahtani | Better PDRs | Professor Richard Hobbs |
| Suman <br> Prinjha | Emotional Impact of work | Professor Lucy Yardley |
| Dan RichardsDoran | Communications | Professor Trish Greenhalgh |
| Jenny Riga | Commuting | Professor Chris Butler |
| Helen Salisbury | Teaching | Professor <br> Andrew Farmer |
| James <br> Sheppard | Families \& Parttime | Professor <br> Richard <br> McManus |
| Nicola Small | Departmental Administrator | n/a |


| Melissa <br> Stepney | Better PDRs |  | Professor <br> Richard Hobbs |
| :--- | :--- | :--- | :--- |
| Katherine <br> Tucker | Mentoring |  | Assoc. Prof <br> Richard Stevens |
| Kay Wang | Health Care <br> Professionals |  | Professor Paul |
| Clare | Deputy <br> Departmental <br> Administrator <br> and HR Manager |  | n/a |
| Sue Ziebland | Chair and E\&D <br> lead for NDPCHS |  | n/a |
| Williams | Families \& Part- <br> time working |  | Professor <br> Richard <br> McManus |
| Mika |  |  |  |

The WGs, have formed, merged and hibernated as actions are identified, monitored via the staff survey and routine department data, and achieved.

ACTION 1.1 Maintain a primarily E\&D focus across the portfolio of Better Workplace Working Groups, while not excluding activities that pick up wider issues that matter to NDPCHS staff Review the activities in the group once a term against our strategic focus on E\&D.

## (ii) An account of the self-assessment process

Following consultation with Athena SWAN (AS) leads in other Oxford and external departments, who told us they had struggled to avoid the work being characterised as a 'women's issue', we made an early to secure broad engagement to promote equality without burdening senior women. We initially
focused on establishing working groups to apply best practice on providing information, timings for meetings, induction, mentoring, appraisals, transparency, career development, and opportunities for teaching, presenting and attending conferences.

## NEW ACTIVITY

Since 2015 nine new Better
Workplace working groups have been established for Models of Workload Allocation, Commuters, Emotional Impact of Research, Physical Activity at work, Green impact, Better PDRs, LGBT+, Early- and Mid-Career Researchers (E\&MCRs), and Support Teaching and Research staff (STAR).

After we achieved a Silver AS Award in April 2014 we decided to-re-name our 'selfassessment team' the Better Workplace Group. Gender equality is our overriding goal, but the result should be a better workplace for everyone. We have been invited to discuss our model for addressing E\&D issues with similar external departments, through Society of Academic Primary Care, and other Oxford departments - see section 5.6 (iii). We have drawn on the experiences of other Gold award departments through attending talks by AS leads and reading successful applications, published evaluations and analyses prepared by colleagues in MSD.

## Activity and report mechanisms

The Better Workplace group meets every eight weeks throughout the year. Better Workplace / AS progress reports have been a standing agenda item for the research committee, senior team and open meetings since 2013. The Better Workplace Chair and E\&D lead Sue Ziebland sits on the MSD AS committee, which is a mechanism for sharing good practice, taking collective action on broad concerns and feeding onto the central Gender Equality Advisory Group (GEAG). Members of the MSD committee and the University's Senior Equality Advisor have reviewed drafts of this application.

The Better Workplace group maintains momentum and the focus on E\&D topics, shares ideas, plans staff surveys and focus groups, publicises achievements and supports the establishment of new WGs.
2016 survey (new Item): 65\% of women and $\mathbf{7 2 \%}$ of men in 2016 saw the Better Workplace group as for everyone in the department.

63\% of women agreed that the department's Athena SWAN activities have been generally positive (3\% reported 'generally negative', the others 'not sure').

Each WG assesses, consults, prioritises, plans and implements actions within their topic areas, identifies survey items and reviews responses. They meet as often as they need (at least termly).

Surveys for research staff,
academics and students were conducted in 2012 and 2013 with a separate survey for administrative staff. In 2015/16 we combined the survey for all staff, adding department-specific items to a University-wide staff survey. This meant that some question wording changed. Our surveys have all achieved a response rate of $80 \%$ compared to a University average of $47 \%$.

Our staff surveys have been key in identifying and monitoring our Actions. In this application we present data from the surveys, with benchmarks from MSD. The denominator varies due to survey routing, e.g. some questions are only for line managers, or researchers. Otherwise percentages are based on 154 responses ( $70 \% \mathrm{~F}$ reflecting the gender split of the department).
(iii) Plans for the future of the self-assessment team

Our Better Workplace group will continue to have senior academic and P\&S leadership and commitment. WGs recruit new members and nominate new leads, with (wherever possible) a period of 'shadowing' for the new lead. Some WGs have achieved what they set out to do (e.g. the 'college' group, now hibernated) while others have merged, morphed or are newly formed.

Recent MSD research identified concerns that AS activities might disadvantage men, or burden early-career researchers and women. ${ }^{1}$ Our model aims to avoid this: six of our 15 WG leads and eight of the senior Champions are men.

ACTION 1.2 We will set up an internal department data monitoring and analysis group with an explicit E\&D focus which will report directly to the decision making committees every 6 months.

ACTION 1.5 Prepare survey items to include monitoring all current Action plan activities. Include items on disability at work, drawn from analysis of our interviews on Disability at Work (see Action 10.2) Run a staff survey every two years, supplemented with group discussions and interviews as needed to inform working group actions.

Our 2017-2022 plans also include actions to increase awareness of achievements in Better Workplace, and involve more men in the action plans.

[^0]
## NEW ACTIVITY

In December 2016 each working group chose a 'champion' from the Department's senior academic team. These 15 champions take responsibility at a senior level for their WG's Action Plans.

We believe that the Better Workplace group will achieve most if it adapts to changing circumstances, aims for impact beyond the individual or department and if we make sure that we communicate our progress in an engaging manner to the whole department. For example, by supporting early- and mid-career researchers (E\&MCRs) to be the corresponding author of a newsworthy paper, providing training in talking to the media, and celebrating achievements in our weekly newsletter and on our department website, we are not only encouraging the individual and their peers but also communicating to people who may be thinking of applying to work or study with us that we value and support our staff. Thus, wherever feasible, our activity for the next 3-5 years focuses on three levels: individual, department and the wider context to maximise the impact of our initiatives.

ACTION 1.3 We will review WG lead satisfaction with their 'Champion Inputs' at Better Workplace meetings and (if needed) discuss any difficulties with WG lead and Champion.

ACTION 1.4 Communicate Better Workplace successes for all staff in multiple ways - including on the website, in department newsletters, through case studies and at Committee and Open meetings.

Word count: 990 (not including the SAT leads table)

## 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.
(i) Numbers of men and women on access or foundation courses
n/a
(ii) Numbers of undergraduate students by gender
n/a
(iii) Numbers of men and women on postgraduate taught degrees
n/a
(iv) Number of men and women on postgraduate research degrees

Full- and part-time by programme. Provide data on course applications, offers, and acceptance rates, and degree attainment by gender.

There are currently 27 doctoral students ( $52 \%$ women) in the department; the numbers are small but the figures show that the even distribution of male and female students has been maintained over the last 5 years (Figure 4.1.1). Currently 4 doctoral students are part-time (3F). Our students, with funding from competitive schemes including NIHR, MRC and Wellcome Trust, include GPs, social and behavioural scientists, qualitative researchers, health service researchers and statisticians, reflecting the expertise and interests of the supervisors.

Figure 4.1.1 Number of research postgraduate students


One of the Actions from 2013 was to increase opportunities for mid-career researchers to supervise. Through our PDRs we have identified research staff who would like to supervise doctoral students and found opportunities for them to join supervision teams as a third, or second, supervisor to build their skills before becoming a lead supervisor. All supervisors are required to attend training. We are pleased that the pool of supervisors has improved, and in 2016 $66.6 \%$ of our students had at least one female supervisor (see Figure 4.1.2)

Figure 4.1.2 Percentage of students with one or more female doctoral supervisor


Figure 4.1.3 Postgraduate research application and offer data


We have seen an increase since 2012 in applications for doctorates, from 1F, 1M in 2012-12, to 18F, 14M in 2015-16. A Silver Action was to improve the 'Study with us' section on the department website. Acceptances have increased from one in $12 / 13$ to six in $15 / 16$. Our current planned intake is 6 (set by MSD); we aim to increase to 10 . Our last intake (2016) shows a significant ratio (9) of female applicants to acceptances. We believe that this is an anomalous year, but have discussed and evaluated this with the Director of Graduate Studies, putting in place actions to ensure there is no bias at the point of selection (ACTION 1.2).

ACTION 3.1 The Director of Graduate studies will ensure that all members of the doctoral appointments panel have completed unconscious bias training and are reminded on the day of our commitment to E\&D.

One member will attend all of the appointments panels to observe all interviews with an E\&D monitoring role. This member will intervene if necessary to balance the selection process.

Figure 4.1.4 PGR completions


Figure 4.1.5 Average months to PGR completion per cohort


Given small numbers of DPhils it is hard to draw conclusions from completion data (Figures 4.1.4, 4.1.5), although women may complete in slightly less time than men.

One woman from the 2011/12 cohort and one from the 2013/14 cohort temporarily suspended their studies for maternity leave. The department supported these students with 26 weeks of additional stipend. Our policy (described on our intranet) to mirror the maternity benefits available to employed staff arose through the AS Student WG (Silver Action).
(v) Progression pipeline between undergraduate and postgraduate student levels

Identify and comment on any issues in the pipeline between undergraduate and postgraduate degrees
n/a

### 4.2 Academic and research staff data

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

Look at the career pipeline and comment on, and explain any differences between, men and women. Identify any gender issues in the pipeline at particular grades/job type/academic contract type.

Figure 4.2.1 Proportion and number of A\&R FTE's compared to local and national average in medicine


We have 117 A\&R staff ( $71 \mathrm{~F}, 46 \mathrm{M}$ ), with only 10 permanent academic posts. There are more women than men at every grade except the most senior (grades 10 and professorial posts), where overall $37 \%$ are women ( $7 \mathrm{~F}, 12 \mathrm{M}$ ). This is a major change since 2012 when there was only one woman at Grade 10 and no female Professors.

Table 4.2.1 Headcount of staff by grade/title 2016

|  | Female | Male | TOTAL |
| :--- | :--- | :--- | :--- |
| Grade 6 | 1 | 1 | 2 |
| Grade 7 | 24 | 6 | 30 |
| Grade 8 | 24 | 7 | 31 |
| Grade 9 | 5 | 3 | 8 |
| Grade 10 | 2 | 2 | 4 |
| Titular Professor | 2 | 1 | 3 |
| Total non-clinical headcount | 58 | 20 | 78 |
| Academic Clinical Lecturer | 3 | 2 | 5 |
| Clinical Lecturer | 2 | 2 | 4 |
| Clinical Research | 2 | 2 | 4 |
| Clinical Research Training | 4 | 5 | 9 |
| Senior Clinical Research | 1 | 4 | 4 |
| Associate Professor | 1 | 1 | 2 |
| Titular Professor (all Clinical Readers) |  | 2 | 2 |
| Statutory Professor | 13 | 26 | 39 |
| Total clinical headcount | 71 | 46 | 117 |
| Grand Total |  |  | 9 |

Key


Permanent post with college association
Includes one emeritus non-permanent post

1F Grade 10 and 1F, 1M Grade 9's are Titular Associate Professors.
1F Grade 9 and 2F Grade 8's hold the University Research Lecturer title.

## Non-clinical staff

Our non-clinical researchers, in all grades, are predominantly female. By 2016 head count, $74 \%$ of non-clinical staff were female, $76 \%$ Grades $6-9$ and $57 \%$ Grade $10+$. When adjusted for FTE this is $73 \%$ F overall, $73 \%$ F in Grades 6-9 and 70\%F in Grade 10+.

Like many clinical medicine, departments, NDPCHS research staff include specialists and methodologists from a wide variety of health research backgrounds including statistics, health policy research, and social sciences.

Figure 4.2.2 FTE's in research posts


Figure 4.2.3 FTE's in senior non-clinical posts


The gender breakdown is strikingly reversed in clinical posts, where only 4 (19\%) of 21 senior post holders are women. There are only 205 senior academic GPs in the country of which $20 \%$ are female. In 2012 we were already working on our clinical academic pipeline, focussing on entry level support for ACFs. We recognised that an attrition point for women was this early period as they began new families when trying to establish dual clinical and academic careers. We worked with the GP Deanery to enable part-time posts. This has led to five female ACFs continuing their academic careers. Of these two have completed their ACF posts and both are employed in the department, one as an Academic

Clinical Lecturer (ACL) and one in a bridging post. We hope that our investment in the ACF posts will contribute to more women as senior clinical academics.

Figure 4.2.4 Career path for an academic GP


Figure 4.2.5 Clinicians in research and training posts (FTE)


Figure 4.2.6 Clinicians in senior posts (FTE)


Our action plans from 2012 and 2013 aimed to increase the number and proportion of women at senior levels: we have had good success in non-clinical
staff, we have recruited a senior female clinician and our clinical pipeline is showing improvement at the junior level. 9 of the 10 permanent clinical posts are held by men. Change in these posts can only happen slowly as and when existing postholders retire or leave.

ACTION 4.1 Develop a written policy for ACF career development for all ACFs and supervisors.

Facilitate early identification of projects for newly appointed clinical researchers which fit with our department research themes.

ACTION 4.2 Ensure that details of funding opportunities which may be of interest to ACFs and early career clinical researchers are circulated on the departmental email bulletin together with information on eligibility criteria and how to apply.

ACTION 4.3 Create area on intranet to clarify career progression infrastructure and signpost clinical researchers to opportunities for doctoral research funding, fellowship schemes, and other clinical investigator schemes for which they may be eligible. Include video extracts from the women in science interviews to illustrate how senior women scientists developed dual careers in medicine and academia.

Invite senior clinical academics to speak about their own career progression pathways at a department open meetings.

## My manager:

- actively encourages me to take up career development opportunities AGREE 83\% (82\% of women) Benchmark: $69 \%$ of Oxford MSD
- values my contributions AGREE 96\% (95\% of women)

Benchmark: 92\% of Oxford MSD

- supports my personal development AGREE $85 \%$ ( $83 \%$ of women)

Benchmark: 78\% of Oxford MSD

- gives feedback

AGREE 89\% (87\% of women)
Benchmark: 83\% of Oxford MSD

## Related items from past NDPCHS surveys:

- In 2013, 78\% of women and 79\% of men were 'happy with their career progression' compared to $73 \%$ of staff in 2012.
- In 2013, 80\% agreed 'I feel valued in the department for the work I do' compared to 69\% in 2012.
(ii) Where relevant, comment on the transition of staff between technical and academic roles

There are 43 staff in research support roles (mostly in the CTU) who might be in a position to transition to research roles. In 2015 the department recognised this, as a result of survey feedback, and used external funding to pilot a competitive application process, widely advertised in the department, for two places on the part-time MSc in Evidence Based Health Care, a modular course to build research skills. There were 3 F applicants, two staff working in the CTU and an administrator in the statistics group. All were high quality applications and the department topped up the funding; all are now nearing completion of their MS . Recognising the volume of work involved, the employees were also given paid study leave.

ACTION 5.2 Review the success of the three MSc places for P\&S staff funded through the department in 2015 - consider extending the funding for future cohorts of P\&S staff.
(iii) Academic and research staff on fixed-term, open-ended/permanent and zero-hour contracts by grade and gender

Comment on the proportions of men and women on these contracts. Comment on what is being done to ensure continuity of employment, and to address any other issues, including redeployment schemes.

Figure 4.2.7 Academic and Research staff by contract time


Figure 4.2 .7 shows the proportion of staff on different contract types. Overall, $74 \%$ of women and $70 \%$ of men are employed on fixed-term contracts (FTCs).

Our small number of Associate Professors (Clinical Reader and University Lecturer) and Statutory Professors are recruited on permanent contracts to retirement. Most other staff are supported by external research grants funded for a limited time and join on FTCs. Our policy (since 2010) is to transfer staff to open-ended contracts, provided:

1. They have at least 4 years' University service; and
2. There is a reasonable prospect of continued funding.

As a rapidly expanding department many staff do not yet meet these transfer criteria. We compare favourably to the University as a whole, where $90 \%$ of researchers are on FTCs.

Four staff members have worked with variable-hours contracts during the last five years. One woman (grade 6) in 2012; two men (grade 6 and grade 7) in 2013 and one woman (grade 7) from 2015-16.

Variable hours contracts are only used with the agreement of the individual concerned and where the level of work needed is variable or unpredictable. For instance a mental health service user who was engaged to undertake qualitative interviews with other service users (this was part of the project design) needed flexibility in terms of working hours, depending on participants' availability for interview.

Another variable-hours employee is semi-retired and does occasional transcription work.

The Department has an excellent track record in securing continuity of employment for our FTC staff. We follow the University policy on priority candidates and, wherever possible, offer alternative roles to individuals whose contacts are concluding. We do not advertise posts where there is a suitable internal candidate whose employment is ending. We usually manage to continue contracts in the department, making use of specific department funds to bridge contracts for E\&MCRs. (see Table 5.3.2).

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

Comment on the reasons academic staff leave the department, any differences by gender and the mechanisms for collecting this data.

Table 4.2.2 A\&R leavers by grade and gender and full/part time status

| Grade | Contract type | 2012 |  | 2013 |  | 2014 |  | 2015 |  | 2016 |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | F | M | $F$ | M | $F$ | M | F | M | F | M |
| Grade 6 | FT |  |  |  |  |  |  | 4 |  | 1 |  |
|  | PT | 1 |  |  |  | 1 |  | 1 | 1 |  |  |
| Grade 7 | FT | 2 |  |  | 2 | 1 |  | 2 |  | 4 |  |
|  | PT |  |  | 2 |  |  |  | 2 |  | 2 |  |
| Grade 8 | FT | 1 |  |  | 1 | 2 |  | 1 | 1 |  | 1 |
|  | PT |  |  |  |  | 1 |  | 2 |  | 3 |  |
| Grade 9 | FT |  |  |  |  |  |  | 2 |  |  |  |
|  | PT |  |  |  |  |  |  |  |  |  |  |
| Clinical Research | FT |  |  |  |  |  |  |  |  |  |  |
|  | PT | 1 | 1 | 1 | 1 | 1 |  |  | 1 | 1 |  |
| Senior Clinical Research | FT |  |  |  |  | 1 | 1 |  |  |  | 1 |
|  | PT | 1 |  |  | 1 | 2 | 1 |  | 2 |  | 2 |
| Associate Professor | FT |  |  |  |  |  |  |  | 1 |  |  |
|  | PT |  | 1 |  |  |  |  |  |  |  |  |
| Titular Professor | FT |  |  |  |  |  |  |  |  |  |  |
|  | PT |  |  |  | 1 |  |  |  |  |  |  |
| TOTAL |  | 6 | 2 | 3 | 6 | 9 | 2 | 14 | 6 | 11 | 4 |

During this period, only three senior staff (all M) have left, to retire or move to another post. Over the last 5 years, only 10 research staff members have had their contracts ended on grounds of redundancy due to there being no further funding available. Some left because a period of training (usually a fellowship) came to an end or because they chose to move on rather than accept an offer to stay (see Table 4.2.3). For example, 1F G8 left for an Assistant Professor post at Warwick, 1M G8 researcher for a fellowship at Leeds, 1F G6 took up a post at the University of Washington.

Table 4.2.3: Reasons for leaving

|  | 2012 | 2013 | 2014 | 2015 | 2016 | TOTAL |  |  |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| Reason for leaving | F | M | $F$ | $M$ | $F$ | $M$ | $F$ | $M$ | $F$ | $M$ | $F$ | $M$ |
| End of contract | 5 | 3 |  | 3 | 3 | 1 | 5 | 3 | 4 | 1 | $\mathbf{1 7}$ | $\mathbf{1 1}$ |
| Retirement |  | 1 |  | 1 |  |  |  |  | 2 |  | $\mathbf{2}$ | $\mathbf{2}$ |
| Early retirement |  |  |  |  |  |  |  |  |  | 1 | $\mathbf{0}$ | $\mathbf{1}$ |
| Family | 1 | 1 | 1 | 1 | 2 |  | 2 |  | 2 |  | $\mathbf{8}$ | $\mathbf{2}$ |
| Career move |  | 1 | 1 | 1 | 3 | 1 | 3 | 2 | 2 | 2 | $\mathbf{9}$ | $\mathbf{7}$ |
| Further study | 1 |  | 1 |  |  |  | 2 |  |  |  | $\mathbf{4}$ | $\mathbf{0}$ |
| Other |  |  |  |  |  |  | 1 |  | 1 |  | $\mathbf{2}$ | $\mathbf{0}$ |

Figure 4.2.8 Percentage turnover of research staff


Our retention rates compare very favourably (16\%) against University rates for research staff (25\%). Note that \% retention is skewed by low numbers in male staff.

Word count: 1374 (includes 108 in text box)

## 5. SUPPORTING AND ADVANCING WOMEN'S CAREERS

## Recommended word count: 7000 words

### 5.1. Key career transition points: academic staff

## (i) Recruitment

Break down data by gender and grade for: applications; long-and shortlisted candidates; offer and acceptance rates. Comment on how the department's recruitment processes ensure that women (and men where there is an underrepresentation in numbers) are encouraged to apply.

Figure 5.1.1 Recruitment by gender


Figure 5.1.2 Recruitment by gender and grade


In all 65 women and 23 men were appointed during this period. We advertise posts widely and shortlist against the essential and desirable criteria. We ensure a mixed interview panel and offer the post to the best candidate.

For non-clinical posts we have more women applicants, who are more likely to be shortlisted and slightly more likely to be appointed. The larger number of women applicants reflects the prevalence of health services research and qualitative social scientist posts (spheres favoured by women).

## Clinical posts

The picture is different with the clinical posts, where there are more men in post and more male applicants. In 2012 we appointed two men to clinical reader posts for which no women applied. Our 2012 Action plan established a small advisory group to suggest women who might be encouraged to apply for new senior posts.

Two senior permanent clinician posts were advertised in 2014. The advisory group identified women to approach: one man and two women applied for the first post, and a man was appointed. Two women and one man applied for the second, and a woman was appointed. We sought to appoint both of the women but after a few months of negotiations the applicant decided to stay at her current position.
In 2012 the department had no women at professor level, there are now 4 female professors (a third of our total professors) and 3 female associate professors.

We state on job advertisements that women (and people from ethnic minorities) are underrepresented at senior levels.

## Cost of living in Oxford

An issue which affects recruitment and retention of staff is that Oxford is the UK's least affordable city in which to live and work.

Our new Commuters WG found that while 51\% of respondents (slightly more women) commute from outside Oxford; $20 \%$ of the women and $5 \%$ of men reported that their 'current commute would discourage them from working in the department in the future'.

Following survey feedback we improved signposting to information on our website and improved secure cycle storage. We have always prioritised staff with caring responsibilities in parking permit applications.

ACTION 8.7 Prepare and gather information for commuters for the intranet and induction pack
(ii) Induction

Describe the induction and support provided to all new academic staff, at all levels. Comment on the uptake of this and how its effectiveness is reviewed.

The induction process is identical for all staff, although researchers are given role specific information, for example, on research integrity, the Oxford Research Staff Society, and safety leaflets for researchers who work out in the field visiting participants. Researchers are invited to a centrally run induction day.

The HR Manager (or a deputy) meets with new staff on their first day for an induction meeting. Line managers take over for role-related induction. Induction includes exchanging information, from IT access arrangements to ensuring the contract is understood. A checklist is shared between the HR Manager and the line manager. Information includes University and department policies, leave arrangements, how to set up a profile on the department website, key contacts and where to find key documents, information on flexible working, season ticket loans and training.

New starters receive a lot of information on their first day, some in hard copy and some electronically, so opportunities will be taken to streamline and index where possible so that people can find information more easily. We hold 3 month follow-up meetings to check how things are going and re-signpost to any information as necessary. Induction materials are kept under review and up-todate.

## SILVER ACTION ACHIEVED

There has been a marked improvement in satisfaction with inductions for new members of staff, from 77\% finding their department induction useful in the 2012 survey, to 91\% in 2013 and 93\% (97\% of women) in 2016.

As a benchmark 61\% of the MSD survey agree with this item.

In 2012 when we started our AS activities our induction wasn't always meeting needs as well as staff would like. Awareness of where to find information was also patchy, so we set up an induction working group to improve the process and content. This group disbanded when all action points had been implemented and our surveys showed a marked improvement in satisfaction. We monitor the effectiveness of the induction programme through the staff survey.

Provide data on staff applying for promotion and comment on applications and success rates by gender, grade and full- and part-time status. Comment on how staff are encouraged and supported through the process.

Figure 5.1.3 Academic and Research - promotions and regrades


Oxford does not have a formal promotions process. Promotion is achieved by one of two routes: applying for an advertised post at a higher grade, or developing in post and taking on new responsibilities so that they meet the criteria for a higher grade. There is a University procedure for evaluating the revised job description, and where this is confirmed as being at a higher grade, the individual is promoted. Our four case studies illustrate this process.

Figure 5.1.4 Non-clinical researcher progression


Staff are encouraged through the PDR process to work towards promotion - one of our Silver Action Plans was to increase awareness of the criteria for regrading. While the numbers are not large, we can see that there has been a steady increase in promotions to grade 8 , including both men and women.

## SILVER ACTION ACHIEVED

The introduction of improved PDR procedures, including distribution of grade descriptors with all PDR forms Awareness of the criteria increased from $37 \%$ to $63 \%$, and there has been an increase in the number of women (and men) who have successfully applied for re-grading and promotion.

The University's annual Recognition of Distinction (RoD) exercise provides progression for research staff at Grades 9 and above. The title of Professor is conferred on those who demonstrate exceptional achievements in research, teaching and citizenship. Successful APs are awarded a salary increase of £2.6k p.a. Researchers can also apply for the titles of Associate Professor (at Grade 9 or above) and University Research Lecturer (at Grade 8 or above). The criteria for conferment of titles are widely published.

Due to the small number, and low turnover, of permanent academic posts the RoD exercise has been an important route to increase the number of women in senior roles. In 2012, five women held the title of URL. With department encouragement, we now have three women holding the title of URL, three holding the title of AP and two holding the title of Professor (and two other female professors by 2017).

Figure 5.1.5 Senior structure

| Permanent post with <br> college association | Statutory Professor <br> Clinical Reader/Associate Professor <br> Associate Professor (previously University Lecturer) |
| :--- | :--- |
| Title conferred by | Titular Professor Grade $9+$ <br> Recognition of Distinction <br> Titular Associate Professor Grade $9+$ <br> University Research Lecturer Grade 8+ |

Figure 5.1.6 shows our progress in promoting women through the titles conferred by recognition of distinction over the past five years.

Figure 5.1.6 Senior titles and positions


Three of our case studies (Lisa Hinton, Ly-Mee Yu and James Sheppard) show how clarity and support during this process has helped with promotion.
(iv) Department submissions to the Research Excellence Framework (REF)

Provide data, by gender, on the staff submitted to REF versus those that were eligible. Compare this to the data for the Research Assessment Exercise 2008. Comment on any gender imbalances identified.

Table 5.1.1 REF 2014 Submissions (headcount)

|  | F | M |  | Total |  |
| :--- | :---: | :---: | :---: | :---: | :---: |
| Not submitted | 2 | $33 \%$ | 4 | $67 \%$ | 6 |
| Submitted | 6 | $30 \%$ | 14 | $70 \%$ | 20 |
| Eligible Total | $\mathbf{8}$ | $31 \%$ | 18 | $69 \%$ | 26 |

Table 5.1.2 RAE 2008 submissions (headcount)

|  | $F$ |  |  | M | Total |
| :--- | :--- | :--- | :--- | :--- | :---: |
| Not submitted | 1 | $50 \%$ | 1 | $50 \%$ | 2 |
| Submitted | 5 | $38 \%$ | 8 | $62 \%$ | 13 |
| Eligible Total | 6 | $40 \%$ | 9 | $60 \%$ | 15 |

In 2008 there were no women at professorial level in the department. In 2014 there was no gender difference in submission for eligible staff - but few staff were eligible. By 2017 seven of the 18 professors/AP's are held by women, which should increase the headcount of women in the next REF.

ACTION 2.4 We will improve encouragement and support for E\&MCRs to become co-applicants (at Grade 7) and PIs (at grade 8) through training, reminders to group leads and grant applicants and working with the E\&MCR working group leads and E\&MCR representatives on the Research Committee.

Research committee meetings attended by all group leads (or their deputies) will include reminders of this policy at meetings during 2017-18 to ensure that the practice is embedded.
5.2 Key career transition points: professional and support staff
(i)

Induction
Describe the induction and support provided to all new professional and support staff, at all levels. Comment on the uptake of this and how its effectiveness is reviewed.

See 5.1 (ii). The induction process is identical for all staff (with no surveyreported differences in satisfaction between $A \& R$ and $P \& S$ ), although some of the materials differ. For administrative staff there is more emphasis on meeting the central administration team, understanding the work of the department and admin systems access. In the CTU there is an induction that introduces staff to role specific procedures and processes.

## (ii) Promotion

Provide data on staff applying for promotion, and comment on applications and success rates by gender, grade and full- and part-time status. Comment on how staff are encouraged and supported through the process.

Some P\&S staff have been re-graded in post, where the individual has developed in parallel with the role. There are often opportunities for development and progression throughout the University and P\&S staff move between departments, or central finance. In the last three years 4F of our PAs have been promoted into

## SILVER ACTION ACHEVED

18 women with P\&S roles were promoted or regraded in 2013-14.

The increase in applications for re-grading and promotions followed implementation of our 2013 Actions to include grade descriptors at PDRs. Also see section 5.1 . (iii). research support/project management roles.

The CTU has standardised job descriptions for most roles. (Figure 5.2.1 for trial managers, a similar transparent hierarchy exists for data management, statisticians and programmers). Progression through the grades is via application for an advertised post to ensure that everyone has the opportunity to be considered.

Figure 5.2.1 Trial Manager career pathway

| Trial |
| :---: |
| Administrator |
| Grade 4 |$>$| Trial Co- |
| :---: |
| ordinator |
| Grade 5 |$>$| Associate Trial |
| :---: |
| Manager |
| Grade 6 |$\gg$| Trial Manager |
| :---: |
| Grade 7 |$\quad$| Senior Trial |
| :---: |
| Manager |
| Grade 8 |

Approximately half of the promotions/regrades in Figure 5.2 .2 were CTU staff. Suitably qualified people can be hard to recruit in this field, we have developed staff 'in-house' by supporting development/training, giving internal candidates
the opportunity to apply for roles as they become available and providing feedback when unsuccessful.

Figure 5.2.1 Professional and Support - promotions and regrades


We take a similar approach with administrative staff (both in the central admin team and in research groups) where training is a significant investment and recruitment (against other university departments) quite competitive. Our policy, illustrated by our case studies, is to progress existing staff wherever appropriate.

ACTION 5.1 Linking to the Staff Profiles area on the department website provide example career trajectories from P\&S at different points in their careers.

### 5.3 Career development: academic staff

(i) Training

Describe the training available to staff at all levels in the department. Provide details of uptake by gender, and how existing staff are kept up to date with training. How is its effectiveness monitored and developed in response to levels of uptake and evaluation?

## SILVER ACTION ACHIEVED:

- 2015 survey (new item): My line manager actively encourages me to think about career development.

AGREED by 83\% (82\% of women)
Benchmark 69\% of MSD

- 2013-15 survey (similar item): My manager/supervisor takes an interest in my career development.

2015: AGREED by 84\% (82\% of women)
2013: AGREED by $82 \%$ ( $80 \%$ of women)

Through PDRs staff and line managers are encouraged to identify training needs, many of which can be satisfied through the University's wide array of training, development and mentoring schemes. Whenever training opportunities, or needs, arise the member of staff would discuss these with their line manager.

The department's Staff Department Fund (SDF) is used to support career development of researchers when grant funding is limited or not available, making grants up to $£ 750$ per academic year and $£ 200$ for training courses. The application forms (on the staff intranet) are reviewed by a sub-committee and decisions made within two weeks.

## Internal University training

The University offers many free courses to all staff though the Oxford Learning Institute (OLI), including teaching and learning, management and leadership, and core transferable skills. OLI courses are available online or face-to-face. Oxford University Computing Services offer many computing and software courses. The MSD has numerous specialist methods and generic courses for doctoral students and researchers, including writing skills, project management, balanced
"(line management) is a new role for me and I plan training to support me in areas where I require development."

Anon comment, 2016 survey
researcher, ethics in research and research design.
The department's weekly newsletter announces specific training opportunities. Records on courses attended between June 2011 and June 2016 show 640 staff attendances at IT courses.

During 2012-2016 OLI offered 216 separate training courses; 94 (61F:35M) individuals attended 70 different courses. The gender breakdown of attendees by year is in Figure 5.3.1.

Figure 5.3.1 Academic staff attendance at OLI training courses


In 2015, recognising that many of our staff have substantial research careers but need teaching skills to progress, we offered, via a competitive process advertised in the department newsletter, funded places for research staff to undertake a course in Teaching Evidence Based Medicine. All who have applied have been successful for far ( 2 F and 1 M in 2015; 4 F and 1 M in 2016)

As part of the 2013 Action Plan we organised bespoke courses within the department, including sessions run by external speakers. Courses run by our own staff include 'Writing Grant Applications' attended by 20 E\&MCRs (14F) in 2016. See section (v) below.

Researchers have training in public engagement and communications through our in-house team and other MSD and University staff. This prepares researchers to develop public engagement plans, discuss their research with patients and the public, and engage with the media.

## Monitoring effectiveness

A 2015 department workshop on science writing for blogs and other outlets was attended by (13F; 5M) early-career researchers. $92 \%$ agreed that the course
helped them feel more confident about writing a blog post; several have since written for department and University blogs, The Conversation (2M), and The Guardian (1F). One female attendee also contributed to an international news story on tobacco research.

The OLI use an online survey for all course attendees. They adapt and change course structure and content using these evaluations. Our internal courses always include evaluation. We respond to feedback when planning subsequent courses.
ACTION 2.1 Full day writing workshops for research staff across grades and specialties will be held once a term. These workshops, modelled on those run by HERG, involve each participant presenting a few slides about a paper they are in the process of writing followed by a group discussion and summary of advice for the paper.

ACTION 2.5 Prepare a document for the intranet on tips for productive grant writing. The document will include extracts from the womeninscience.ox.ac interviews with senior women sections talking about how they secured their first fellowship and grant funding.

ACTION 2.7 We will expand the NDPCHS grant writing workshops to two per annum.

ACTION 6.1 Develop a clear policy about training courses and professional development, including opportunities for shadowing and secondments, and the funding available for staff and students based on job function and grade. Make this available on the department intranet. Where courses are put together internally, be clearer about who is eligible.

PDR training needs will be monitored against uptake annually, with feedback to line managers HR and data monitoring group.

Review Staff Development Fund process.
Clarify career paths and provide examples for different types of staff on the intranet.

ACTION 6.2 Ensure that all staff taking on (or with existing) line management responsibilities are offered training and their own mentoring, line management and peer support so that they feel equipped to carry out their duties effectively.'

Use focus group discussions with line managers to identify emerging issues about gaps in line management training. If desired, following these groups, establish and evaluate a peer learning set for line managers at grade 8 and above.

The University offers training in line management; this training will be promoted in multiple ways including through the weekly newsletter, the annual PDR and targeted emails.
(ii) Appraisal/development review

Describe current appraisal/development review schemes for staff at all levels, including postdoctoral researchers and provide data on uptake by gender. Provide details of any appraisal/development review training offered, and the uptake of this, as well as staff feedback about the appraisal/development review process.

The department has operated a personal development review (PDR) process since its inception. Earlier (2012 and 2013) actions included improving the PDR forms and increasing awareness of the structure and process for re-grading. Since 2013 a 'grade descriptors' document attached to the PDR form prompts staff and their line managers to discuss whether there is a case to be made for re-grading. Completed forms are returned to the HR manager; reminders are sent to all staff. Staff who line manage are required to complete online training (via OLI). Our survey shows a steady increase in the proportion of staff reporting that their PDR was useful, although uptake of PDR has been patchy among P\&S staff. Recognising the central role that PDRs play in career development we established a Better PDRs working group with the Head of Department as Champion.

## SILVER ACTIONS ACHIEVED

- 2016 survey: 91\% of respondents (90\% of women) AGREE that their last PDR (within 2 years) was useful. Benchmark MSD (83\%)
2013: AGREED by 80\%
2012: AGREED by 71\%
- 2016 survey: $94 \%$ of respondents (94\% of women) reported feeling comfortable discussing their training and development needs with their manager. Benchmark MSD 81\%
Similar items from 2013 survey: 78\% of women and 79\% of men reported being 'happy with the rate of their career progression' compared to $73 \%$ in 2012.

The University has identified in its institutional action plan the need to continue to improve and embed PDR across all departments. The department's PDR WG will contribute to this action by sharing good practice.

ACTION 9.1 From 2017 we will move to undertaking PDR annually in April/May for all staff. We will provide flexibility for clinicians who would prefer a different time of year to enable their University PDR to inform their NHS appraisal. A series of "case studies", available to read on the staff intranet page, of experiences of PDR.

ACTION 9.2 All line managers to complete PDR training via Oxford learning Institute. We will organise a peer learning set for staff who line manage to share good practice and improve PDR skills and confidence.
(iii) Support given to academic staff for career progression

Comment and reflect on support given to academic staff, especially postdoctoral researchers, to assist in their career progression.

Most A\&R staff are in research-only posts so we put considerable effort into supporting researchers to gain experience of submitting grant application, from an early stage of their career. This is discussed further in section 5.3 (v).

A Better Workplace working group for early and mid-career researchers (E\&MCRs) has been established. A representative of this group sits on each of the department committees.

The 2013 Action Plan included peer 'action learning' sets for grade 7 and 8 researchers. Groups comprising 8-10 people from different research groups, initially guided by one of the senior staff, were intended to provide 'an educational process for people to work and learn together by tackling real issues and reflecting on their actions'. Evaluation after 12 months showed that while valued by many, not everyone considered the group a good use of their time. Future (voluntary) peer learning sets will focus on specific topics eg line management (ACTION 6.2) The department provides bridging funds for E\&MCRs waiting to hear about a funding application, or to write grant applications. The bridging funds are used across grades 7-9 and clinical grades. Over the period 45 women and 16 men have had their posts bridged for varying lengths of time.

Requests for bridging used to be handled informally by requests from line managers to the HR team. To improve transparency we introduced a competitive application process for bridging funds In 2016/17, advertised through the weekly newsletter, with applications reviewed by a panel.

ACTION 6.3 Clarify and refine the criteria for staff who might apply for bridging funding, including what effective performance would look like in each role.

- Draft criteria for eligibility.
- Draft timeframes for application, consideration and allocation of funding.
- Obtain feedback from EMCR and clinical researchers groups.
- Identify senior staff to review and modify criteria as appropriate.
- Present criteria and timeframes to Department Research Committee.
- Finalise and identify strategy for disseminating criteria effectively.

Figure 5.3.2 Total Months of Bridging Support


## Networking and Conferences

Attendance at conferences is discussed during annual PDRs and all research staff are encouraged to submit abstracts (see Staff development fund 5.3i).

The Society for Academic Primary Care holds a regional meeting which the department hosts in rotation; this is widely attended by Oxford staff. Clinical and E\&MCRs are particularly encouraged to present in this supportive environment with good networking and also to use the NSPCR networking, training and peer learning opportunities. Staff at all levels help organise meetings, workshops and conferences that we host on a regular (eg Evidence Live) or rotating (eg SAPC, UKSBM) basis. Clinical and E\&MCRs are given communication and media training and opportunities to chair seminars, meetings and talks at conferences we arrange.

ACTION 2.8 Internal, external and supervision opportunities are available; these should continue to be communicated to and encouraged among interested E\&MCR staff, using the annual PDR and interim discussions when opportunities arise.

ACTION 7.1 Set up a new sharepoint site for minutes of all meetings. Notify staff through the Weekly News that minutes have been published. Use multiple methods to give feedback on key issues including summarizing decisions in the department newsletter and at the termly department Open meeting.
(iv) Support given to students (at any level) for academic career progression

Comment and reflect on support given to students (at any level) to enable them to make informed decisions about their career (including the transition to a sustainable academic career).

The Director of Graduate Studies (DGS) has two annual pre-arranged meetings twice a year with all students to discuss all aspects of their study and future plans and is otherwise available to meet on request. All supervisors sign our supervisor code of practice which includes: 'Supervisors have a role in ensuring that students develop the research skills, transferable skills and understanding of career options that they will need to progress in their careers; they should encourage the student to obtain knowledge and information about career opportunities'.

The University's Careers Service offers tailored advice, and runs events throughout the year. The department communicates any advisory events available through the weekly newsletter or through direct emails from the postgraduate training administrator.

As a new Action in 2016, designed to help integrate doctoral students, the senior leads of each NDPCHS research group gave a 10 minute presentation about their groups work to the new student intake. This practice is planned to continue and expand to all new starters.

ACTION 3.2 A new FAQ document will be created with the DPhil students for the intranet and given out at inductions. This includes showing students where to find minutes of department committee meetings.

Gather feedback from the new students starting in 2017 and annually \& report to BW group at last meeting of year.

ACTION 3.4 Include discussions about future plans and development opportunities in at least one of the DGS meetings in the second year of study (before Confirmation).

ACTION 3.5 All Department committees have had a DPhil representative since 2016 (the PGS committee has always had a student rep).

The DPhil working group lead will use multiple approaches including the regular doctoral students meetings, as well as emails and posters in the students' coffee room to exchange feedback and information between the doctoral students and committee meetings.
(v) Support offered to those applying for research grant applications

Comment and reflect on support given to staff who apply for funding, and what support is offered to those who are unsuccessful.

We recognise that becoming a co-applicant is an essential part of career development. In 2016 the research committee adopted a policy whereby senior staff will always consider which of the department's E\& MCRs might be invited to be a co-applicant on any grant application.

The Statisticians and the Qualitative Researchers run well attended, regular 'clinics' for colleagues at all levels of experience. These are advertised via the weekly newsletter. In February 2016 department staff ran a wellreceived workshop on 'Writing Grant Applications' which will be repeated in 2017.

NDPCHS supports staff to apply for personal fellowships at all levels including in-practice training, doctoral, postdoctoral career development, senior and research professor fellowships. We have considerable experience of supporting applications, and re-applications, to the major funders. The department's
"The finance team are great and I've had a lot of support from more experienced colleagues."
"My department provides excellent support for preparing and submitting grant applications."

2016 survey: Anonymous comment
"Phenomenal amounts of support given to me - we are very lucky to have so much compared to other departments."

2016 survey: Anonymous comment on support for research grant applications. research committee reviews and provides feedback on fellowship outlines at every stage; named supervisors and mentors contribute to the development of the applications pre-submission. Mock interview panels with senior staff are convened for all shortlisted candidates.

The MSD has drawn attention to some gender disparity in applications for

The interviews for the Womeninscience.ox.ac.uk website which we collected and analysed include video clips from senior women scientists recounting their experiences of applying for funding and the importance of not giving up when a proposal is rejected. www.womeninscience.ox.ac.uk/topics/funding
external funding - we are contributing to, and learning from, good practice across the Division. This includes encouragement to apply, support during the applications process, access to more experienced senior staff, involvement as co-applicants, sharing 'tips for success', training in good practice for grant writing, internal peer reviews, practice interviews, and reviewing unsuccessful applications.

Our 2016 survey shows that support in NDPCHS is valued, reflecting the emphasis we put on this area: of those who reported that they 'had ever' applied for research funding while working in the department satisfaction with support from finances was $93 \%$ (and $95 \%$ of women). Satisfaction with support from more experienced colleagues was reported by $95 \%$ ( $97 \%$ of women).

ACTION 2.2 Prepare a document for the intranet on tips and options for productive writing.

The document will include extracts from the womeninscience.ox.ac interviews with senior women sections talking about how they wrote their early papers.

ACTION 2.3 An annual audit will be conducted via Symplectic system, of peer reviewed publications papers first authored by E\&MCRs, taking account of part time work and family leave.

Data on REF able publications by E\&MCRs to be presented to the research committee annually.

ACTION 2.6 We will monitor future grant applications with a post-doctoral researcher (grade 7 or 8) as a co-applicant.

The E\&MCR group will gather experiences from grade $7 \& 8$ researchers of department support for grant applications. We will repeat (and possibly expand) items on satisfaction with department support for research and fellowship applications in future surveys.

### 5.4 Career development: professional and support staff

## (i) Training

Describe the training available to all professional and support staff, at all levels, in the department. Provide details of uptake by gender, and how existing staff are kept up to date with training. How is its effectiveness monitored and developed in response to levels of uptake and evaluation

P\&S staff have access to department and University-provided training, including line management training. Administrative staff also attend systems training appropriate to their role (e.g. Oracle financials, CORE HR). We have supported P\&S staff to gain professional or other qualifications (e.g. a member of the finance team is doing her ACCA). HR and finance teams attend regular briefings run by the central university and networking sessions run by MSD.

During 2012-16 74 (66F:6M) individuals attended 60 different OLI courses. The gender breakdown of attendees by year in figure 5.4.1.

Figure 5.4.1 Professional and support staff attendance at OLI Training


As shown in Section 2.3 'Staff growth to 2016' the department's P\&S staff expanded rapidly -2012-2014, levelling off in 2015 and 2016. The apparent 'drop' in course attendance reflects the new appointments: existing staff have completed key training and there were fewer new staff, who would be particularly encouraged to attend courses to familiarise themselves with University processes. Thereafter training is in response to career development needs or specific to new roles.

The University also runs a conference series for all administrative staff with the aim of skills development and networking. The programme is circulated by email and all departmental P\&S staff are actively encouraged (by the Deputy Departmental Administrator \& HR Manager) to attend. This year 14 administrative staff from the department attended at least part of the day.
(ii) Appraisal/development review

Describe current appraisal/development review schemes for professional and support staff, at all levels, and provide data on uptake by gender. Provide details of any appraisal/development review training offered, and the uptake of this, as well as staff feedback about the appraisal/development review process.

P\&S staff have the same PDR process as A\&R, described in section 5.3 (ii). The department's policy is that all staff should have an annual PDR, once they have been working in the department for a year and have passed probation. However, in last year, only a third of the P\&S staff have a record of a PDR. In our 2016 autumn survey $80 \%$ (16) of women P\&S and $100 \%$ (2) of the P\&S men who reported having a PDR said it was 'useful.'

ACTION 9.1 From 2017 we will move to undertaking PDR annually in April/May for all staff. We will provide flexibility for clinicians who would prefer a different time of year to enable their University PDR to inform their NHS appraisal. A series of "case studies", available to read on the staff intranet page, of experiences of PDR (anonymised if preferred).

ACTION 9.2 All line managers to complete PDR training via Oxford learning Institute.

We will organise a peer learning set for staff who line manage to share good practice and improve PDR skills and confidence.
(iii) Support given to professional and support staff for career progression

Comment and reflect on support given to professional and support staff to assist in their career progression.

Staff in P\&S roles have varied career paths. The CTU has developed a clear progression route for these staff, in other areas, where numbers are fewer, progression may require a different role or opportunities beyond the department. All admin staff meet with their line managers weekly, in addition to annual PDRs. Mentoring is available with external colleagues, for example the Departmental Administrator has received mentoring from an experienced Administrator and has provided mentoring to external finance and administration staff. Involvement on committees and networking groups outside the department is encouraged: for example the Communications Manager is part of an MSD Communications Group. The UAS Conference in March 2016 included pilot sessions on careers in HR, Finance and Departmental Administration.

ACTION 5.3 Encourage participation in the UAS conference on careers in $H R$, finance, Department administration and development

ACTION 5.4 Invite P\&S staff to focus groups to discuss how the department might improve integration and interest in pursuing a long term career in the University. Feedback to the BW group and develop measures in response eg invite in-house training, establish peer support groups, identify new items for P\&S staff in the 2018 staff survey

ACTION 8.5 Develop case studies of women and men who have developed their careers while working part time

ACTION 8.6 Create guidelines for staff and their line managers explaining what part-time working entails and what to consider when deciding whether or not to become a part-time member of staff. Develop guidelines on what should be expected from part-time workers in terms of rates of progression - these will be incorporated with the grade descriptors for PDRS.

### 5.5 Flexible working and managing career breaks

Note: Present professional and support staff and academic staff data separately
(i) Cover and support for maternity and adoption leave: before leave

Explain what support the department offers to staff before they go on maternity and adoption leave.

Our AS Silver application showed that our support for maternity or adoption leave was strong, but managed case-by-case. As part of our Action Plan we formalised our family and caring leave support with a checklist including specific actions for HR and line managers, to ensure parity in support. The checklist, operated from when the staff member announces the pregnancy or adoption, ensures that each individual knows about annual leave, KIT days, where to find information about childcare, nursing facilities on return etc. It helps ensure that the individual and the line manager create a plan to minimise career disruption before the leave begins. (see Case Study Jessy Morton).

In 2015 we prepared a short film, with interviews with A\&R women and men across MSD, about their thoughts about becoming a parent. This film has been used to stimulate discussion in Division level workshops for clinical and E\&MCRs. The womeninscience.ox.ac.uk project, led by this department, includes a section called 'When is the Best Time to have Children', featuring eleven clips from interviews with senior women scientists talking about their own experiences (Figure 5.5.1).
"The returning carer's fund allowed me to attend the annual international meeting of the Society for Research on Nicotine and Tobacco in 2016. This was a really important conference for me to attend in terms of reconnecting with key contacts after being on maternity leave, and I couldn't have gone without the returning carer's fund."
(ii) Cover and support for maternity and adoption leave: during leave

Explain what support the department offers to staff during maternity and adoption leave.

During family leave we communicate with the employee according to the plan agreed via the checklist. The line manager has responsibility for informing the HR Manager of any KIT days worked to ensure payment. The department sends new parents a bunch of flowers from the whole department. New babies are announced in the newsletter and parents are invited to bring the baby in as often as they would like. A plan for a maternity cover post (or not) is one of the items on the checklist. For most roles we employ temporary cover during maternity leave, the department picking up maternity pay costs to free up funds


Figure 5.5.1 - detail from the Women in Science website
on the grant for maternity cover. Personal training fellowships are extended in agreement with the funder.
(iii) Cover and support for maternity and adoption leave: returning to work

Explain what support the department offers to staff on return from maternity or adoption leave. Comment on any funding provided to support returning staff.

We are flexible about how returners use accrued holiday time: it can be used for a phased return through working less than full-time (remaining time being taken as annual leave). Phased returns can also involve temporary changes to working patterns. The family leave checklist includes 're-induction' items, such as meeting new team members and discussing training needs. All eligible staff are encouraged to apply to the University's 'Returning carers fund' through which any member of research staff returning from at least 6 months caring leave can apply for up to $£ 10,000$ funding to help re-establish their work through (for example) attending a conference (with someone to help look after the baby), or employing some temporary research assistance. Since the scheme began in 2014, five female NDPCHS staff have received funding through this route, one wrote a blog about the opportunity this gave her.
(iv) Maternity return rate

Provide data and comment on the maternity return rate in the department. Data of staff whose contracts are not renewed while on maternity leave should be included in the section along with commentary.

Provide data and comment on the proportion of staff remaining in post six, 12 and 18 months after return from maternity leave.

Table 5.5.1 Number of academic and research staff (A\&R) and professional and support staff (P\&S) returning from maternity leave

|  | $<6$ <br> months |  | $6$ months |  | $12$ months |  | 18 months |  | Left |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Year returned | A\&R | P\&S | A\&R | P\&S | A\&R | P\&S | A\&R | P\&S | A\&R | P\&S |
| 2012 |  |  |  |  |  |  | 1 |  |  |  |
| 2013 |  |  |  | 1 |  |  |  |  |  | 1 |
| 2014 |  |  | 1 |  | 1 |  | 3 | 2 |  |  |
| 2015 |  | 1 | 1 | 1 |  | 2 |  |  |  |  |
| 2016 |  |  | 2 |  |  | 1 |  |  |  |  |

There have been relatively few (18) maternity leaves 2012-16. We are pleased that all but one (a P\&S staff member whose partner's job relocated overseas) have returned. We have not ended any fixed term contracts on redundancy grounds during maternity leave. This has been achieved by a number of methods, adapted for the individual circumstance: e.g. arrangements to suspend and extend fellowships; identifying funding ahead of time or an extension to contract in the expectation that we would have identified a project/funding by the time of return. Two researchers, who returned from maternity leave in 2014, have since left the
"I've returned with a renewed vigour for the work of our group. This year is the Cochrane Tobacco Addiction Group's 20th anniversary, and to mark it we are conducting a priority setting exercise. Speaking to people about this project, and seeing our reviews put to such good use, will help push me through this year's to do list. I hope the Returning Carers' Fund is around for years to come so that others can benefit like I did."
department, one to a more senior post at another University and the other to return to her home country for family reasons.
(v) Paternity, shared parental, adoption, and parental leave uptake

Provide data and comment on the uptake of these types of leave by gender and grade. Comment on what the department does to promote and encourage take-up of paternity leave and shared parental leave.

There have been six instances of paternity leave in the last five years, two Clinical Lecturers and three Grade 7/8 research staff. All took two weeks' leave. It is our policy to grant special leave to fathers who don't have sufficient service to qualify for paid paternity leave (we have already done this for two G7, one G8).

One man took shared parental leave (see case study) and one (Grade 7 A\&R) woman took adoption leave.

On our department website the section on 'Working for our family friendly department' (See Figure 5.5.2) has prominent links to University polices on 'Family Leave', also signposted at induction. The HR manager sends a link about the shared parental leave provisions to all expectant parents, when the pregnancy is notified.

## (vi) Flexible working

Provide information on the flexible working arrangements available.
It is department policy to be flexible about start and finish times so that people can work around carer responsibilities, commuting time and other commitments. Many people (currently 73 people, including 4 who work termtime only) work flexibly or have part-time hours and working at home for a day a week. The breakdown is:

| A\&R men: 20 | A\&R women: 31 (including 2 term-time only) |
| :--- | :--- |
| P\&S men: 0 | P\&S women: 22 (including 2 term-time only) |

The University policy for flexible working is published on the website. Our NDPCHS policy (published on our website) is to listen to the needs of the individual and make things work for the staff member in whatever way we can, dealing with operational constraints in a mutually agreed way. To date this mutual approach has worked well and formal University procedures to manage requests for flexible working have not been used.

Several staff have changed their hours during the last year (including from fulltime to part-time and vice versa). Part-timers often change the hours that they work to suit changing circumstances, whether temporarily or longer-term.

Nine people have taken periods of unpaid leave (under a week, or between 1 and 16 weeks) for personal reasons. We have supported others experiencing major life events to take time off when needed or work flexibly from home and from overseas (eg when they have needed to return to family). For instance in the last year, we have given paid time-off and adjusted working hours for a member of staff with a sick relative and for three others dealing with bereavement and granted time-off and temporary remote working for two people with caring responsibilities.

## SILVER ACTIONS ACHIEVED

The department website homepage includes sections on 'Athena SWAN', 'Working with us' and ' A family friendly department', which includes information about the University Newcomers club, equal career opportunities, flexible and tele working, family leave, carers and information on Oxfordshire schools.
'The department website is my first port of call for information.'
2012 survey: $43 \%$ of staff AGREED
2013 survey: $69 \%$ of staff AGREED
2016 survey: $83 \%$ of women and $81 \%$ men AGREED

We have prominent links (as above) to the University policies on 'Flexible and teleworking'. Our staff survey suggests that staff are content with their options to work flexibly, so we will continue to monitor through our surveys.
(vii) Transition from part-time back to full-time work after career breaks

Outline what policy and practice exists to support and enable staff who work part-time after a career break to transition back to full-time roles.

We are flexible in both directions; the funding implications of part-time to full are assessed, though no requests have ever been refused. Increases to full-time are usually when the part-time hours were always intended to be a temporary measure. The Families and part-time working group has new actions to help identify and address these transitions.

ACTION 8.5 Develop case studies of women and men who have developed their careers while working part time.

ACTION 8.6 Create guidelines for staff and their line managers explaining what part-time working entails and what to consider when deciding whether or not to become a part-time member of staff develop guidelines on what should be expected from part-time workers in terms of rates of progression - these will be incorporated with the grade descriptors for PDRS.

### 5.6 Organisation and culture

## (i) Outreach activities

Provide data on the staff and students from the department involved in outreach and engagement activities by gender and grade. How is staff and student contribution to outreach and engagement activities formally recognised? Comment on the participant uptake of these activities by gender.

Table 5.6.1 Involvement in outreach and engagement activities by gender and grade (2015-2016)
$\begin{array}{|l|l|l|l|l|l|l|l|l|l|l|}\hline & \text { No. } & \% & \text { Student }\end{array}$ Visitor $\left.\begin{array}{ll}\text { Grade } \\ 5\end{array}\right)$


All clinical and A\&R staff are encouraged to contribute to outreach and engagement, as an important contribution to career development. One aim of our outreach is to recruit patients and public into our research involvement activities. Outreach also gives staff and students opportunities to develop communication skills and raise their research profiles. $55 \%$ percent of department members taking part in these activities since 2015 (excluding repeat involvement) are women.

Outreach and engagement activities vary in format and audience and have included department-wide open days in 2012 and 2013 involving several departmental staff and students as part of the Alumni Weekend. Since then our strategy has changed so we focus on reaching into the community.

Figure 5.6.1 Sharing engagement activities via the departmental internal newsletter


DPhil student Jack O'Sullivan reaches Famelab Oxford final

Surfer Jack explains why he moved from sunny Australia to treezing England, and puts some of the issues surrounding overdiagnosis of cancer into perspective.

Famelab is an international communications compettion, designed to engage and entertain by breaking down science, tech and engineering concepts into three minute presentations.

Watch Jack on YouTube

The annual Oxfordshire Science Festival provides an ideal platform for community engagement, with senior clinical researchers and E\&MCRs taking part in talks, panel sessions and hands-on activities. In 2015, researchers Dr Rachna Begh, Dr Nicola Lindson-Hawley and Dr Beth Shinkins wowed visitors with sugar and fizzy drink demonstrations on the ScienceGrrl stand, which celebrated the role of women in science. In 2016 department members engaged hundreds of people in Oxford City with our tobacco addiction research.

Our researchers regularly venture outside of Oxfordshire to engage the public. In 2015, Academic Clinical Fellow Dr Helen Ashdown presented to a packed public audience at the IgNobel ceremony in the USA, and graduateentry medical student Henry Drysdale embarked on a Skeptics in the Pub national tour. Our staff and students participate in schools outreach. The CEBM are currently developing the EvIdeNce into Schools and TEachINg (EinSTein) project, which involves taking the methods of EBM into schools to foster critical thinking, and DPhil student Jack O'Sullivan participated in "I'm a Scientist Get Me Out of Here", followed-up with a 3-minute stand-up routine in the FameLab Oxford Finals.

Outreach and engagement activities celebrated through the departmental internal newsletter and website and encouraged and recognised on staff PDRs (Figure 5.6.1) and through University awards, where staff have had recent success (Vice Chancellor's Public Engagement Award and OxTalent Awards).

ACTION 8.3 Encourage more male researchers to take up Comms training and get involved in public engagement activities in the department - actively seek men to take part.

## (ii) Visibility of role models

Describe how the institution builds gender equality into organisation of events. Comment on the gender balance of speakers and chairpersons in seminars, workshops and other relevant activities. Comment on publicity materials, including the department's website and images used.

Improving the visibility of women has been a key element since we started to work on our first AS application in 2011. At the time, we had no women in senior positions, and women's achievements could go unnoticed. We have both
increased the number of women in senior roles and improved recognition of staff contributions at all levels.

## ACHIEVEMENT

2016 survey: 79\% (78\% of women) reported that they feel rewarded for what they do.

MSD Benchmark: 67\%.

The department's website is one of our 'Beacon activities'. Images are chosen to reflect the inclusive and family friendly nature of the department. By design the website has profiles and photos for every member of staff, regardless of job role or career stage. Throughout the site we have carefully balanced images of women and men, including in the 'DPhil student projects' section (Figure 5.6.2).

Figure 5.6.2 DPhil student project website page


Of the department's ten main research themes, six have at least one woman among the research leads. $60 \%$ of our doctoral students now have at least one female supervisor. Our weekly newsletter, distributed to all staff, highlights new publications, awards and achievements from all staff, which has increased the profile of many women.

## SILVER ACTIONS ACHIEVED

2016 survey (new item): 'the department's seminars help me to understand the departments work'.

96\% of women, and 75\% of men AGREED
2016 survey: 'I have opportunities to present my research in the department'.
2016: 95\% of staff AGREED
2013: 97\% AGREED
2012: 77\% of women and 84\% men AGREED
'Women are well represented at a senior level in the department. '

2016 survey: 32\% of women and 16\% of men DISAGREED with this statement.

2013 survey: 59\% of women and 27\% of men DISAGREED.

2012 survey: 73\% of women and 47\% of men DISAGREED.

We have a well-attended programme of weekly seminars, organised by a committee drawn from all research groups, with talks from members of the department and external speakers. In 2016 we had a 50:50 gender balance among speakers. Chairs are chosen according to relevance to the topic rather than gender; at least $50 \%$ of chairs are women.

We have organised several national and international conferences and always ensure that at least half of the invited keynote speakers are women.

With Green Templeton College we organise a series of lectures named for Dr Ann McPherson, a clinical reader in our department who died in 2011. These talks have been presented by high profile speakers (4F, 1M).

The reception areas have a collection of framed, informal photos of women and men who work here engaged in various aspects of our clinical and research work.

We have tracked staff views about whether women are well represented at a senior level since 2012. We have shown a steady improvement at each survey, particularly from women.

## (iii) Beacon activity

Demonstrate how the department is a beacon of achievement, including how the department promotes good practice internally and externally to the wider community.

We believe that benefits accrue from a multilevel approach. Our AS activities are intended to promote consistent good practice at the level of the individual, department, institution and wider community.

## Sharing good practice

We are committed to sharing good practice with others. Our distributed, whole department engagement with AS has attracted interest from other departments in Oxford and beyond. The Better Workplace chair (Prof Ziebland) sits on the Division's AS committee and has supported colleagues in the Social Science Division and the Said Business School to initiate their own applications.

## Oxford Women in Science

Sue Ziebland and RDM colleague Chris Price successfully applied for funding from the University VC's Diversity Fund to collect interviews with successful Women in Science. The project has been an important contribution to the University's institutional action plan, which had identified that many researchers were unclear about how to forge a career in academic science.

We collected 39 interviews in 2015 which were analysed and presented on a public website in context with hundreds of video and audio clips from the interviews under the following headings:

Deciding on a career in science
Careers beyond academic science
Messages for others thinking about a career in science
Getting funding for a PhD and being a graduate student
Obtaining fellowship funding and other grants
Publishing results
Role models, mentors and sponsors
Career development and progression
When is the best time to have children?
Taking parental leave
Child care
Work-life balance
Part-time and flexible working
Changing the culture in science
Athena SWAN

The material was published in April 2016 as www.womeninscience.ox.ac.uk. Postcards were printed to distribute to schools and at conferences. The site has averaged over 700 users per month during the first year, with a total of more than 2,300 video views and 230 video shares on social media. Data suggest it is reaching the target demographic: $72 \%$ of visitors to the site are female, $20 \%$ are aged 18-24 yrs, 8\% visit the site via Facebook. The researcher, Dr Alison Chapple, has been invited to present the study at conferences (eg BSA 2015), to other Universities (Leicester Medical School 2016) and as a plenary at the 2016 BMA Women in Medicine conference. Articles based on the study have been submitted to peer reviewed journals, including a recently published paper drawing both on MSD survey responses and our interviews:

Pavel V. Ovseiko ${ }^{\underline{1}}$ Alison Chapple ${ }^{\dagger} \stackrel{2}{2}$, Laurel D. Edmunds ${ }^{\dagger}=$ Sue Ziebland ${ }^{2}$ Advancing gender equality through the Athena SWAN Charter for Women in Science: an exploratory study of women's and men's perceptions Health Research Policy and Systems 2017 15:12

To date, the article has been accessed over almost 2000 times, and has an Altmetric Attention Score of 70.

In 2017 the Oxford Division of Mathematical Physical and Life Sciences commissioned us to collect an additional 15 interviews with senior women scientists including engineers, physicists, mathematicians and chemists. These are underway and will be added to the Women in Science site in spring 2017.

We also applied successfully for funding for a series of interviews on experiences of Disability at work, with a wide range of University staff. This will be published online using a similar format to the 'women in science' project and will be published in spring 2017.

ACTION 10.1 Launch an expansion to our womeninscience.ox.ac.uk website, based on digital video interviews with senior scientists to include women scientists in MPLS (maths physics and life sciences).

ACTION 10.2 We are currently developing a website based on digital video interviews with university staff with a range of disabilities. The approach is similar to the womeninscience.ox.ac.uk project and will be launched in summer 2017.

## The Department website

In early 2011 we were one of three departments to be involved in a project to create an academic website that met the needs of researchers while ensuring that the website was also audience focussed. From the outset, we were keen to ensure that then needs of all researchers, regardless of seniority, were taken into account - and that junior
"I definitely think the ORCA page on the website has really helped the growth of the group. When I meet people it's somewhere for me to refer them to, which clearly shows the group's affiliation and legitimacy. This has been useful for forming and sustaining collaborations with colleagues - a lot of us are the only conversation analysts in our departments."

NDPCHS DPhil Student, 2017 women, in particular, were given the opportunity to raise the profile of their work.

The project began with consultations, surveys and working groups involving stakeholders across the department and externally at all levels.

The result of this consultation was simple but fundamental. The survey demonstrated clearly that individual researcher profiles were key, that most internet searches were for academic profiles and that a profile page enables researchers to present their work to the academic community and to funders. Researchers wanted the freedom to update their biographies themselves, wanted up to date publication lists and the ability to link out to key collaborations or associations. Throughout the development process we worked closely with the 2 other departments involved in the pilot, taking on the feedback and issues that arose for them, picking up and sharing good ideas, so that the end result was a bespoke online platform that works really well for the academic community and our external stakeholders.

The website has continued to develop and 11 of 16 departments in MSD, plus MSD itself, two further divisions are now using the same platform, with over 3000 self-managed academic profiles across the University. We continue to be a strong voice contributing to the ongoing development and improvement of the platform and continue to pioneer new features, such as the capability for researchers to contribute their own blog posts.

Visibility of women was a Silver Action and is now well embedded. We have deliberately built a stock of images of women in the workplace and families, and these have also been used in an institutional leaflet raising awareness of Gender Equality and Athena SWAN, and on the MSD web pages for Returning Carers.

ACTION 10.3 Through membership of the MSD Athena SWAN committee, share progress on areas including:

- PDRs
- Induction
- Support for students
- Department website profiles for all staff, all roles.
(iv) Culture

Demonstrate how the department actively considers gender equality and inclusivity. Provide details of how the Athena SWAN Charter principles have been, and will continue to be, embedded into the culture and workings of the department.

Our department website features AS prominently on the home page with links to the Charter. The Better Workplace Group includes women and men members from all research groups, and at all levels of seniority. Better Workplace is dynamic and new groups form, merge and re-emerge as required.

Considering the 10 AS principles since 2013 we have reduced obstacles to sustainable careers (Principle 5) and made progress on improving retention of women in the clinical and research specialist pipelines at key transition points including return from carers leave, between post doc, mid-career and senior research roles (Principles 2 and 3).

We involve staff at all levels of the organisation (Principle 8). We have made some progress on inter-sectionality through our

## ACHIEVEMENT

2016 survey: 93\% (93\% of women) would recommend working in the department to a friend.

MSD benchmark: 87\%.
'My perception is that this has definitely made a difference - just need to maintain it now that we have the Silver Award that is necessary for NIHR funding ...'
'I think that these have been transformational.
'Really helped to drive change.'
'...very good for parents.'
2016 survey: Anon free text comments about Athena SWAN activity in NDPCHS.

Disability at work project, which will contribute an understanding of work issues and items for future surveys. Also, the increase in senior women has also increased the visibility of non-clinical researchers, which is one of the important divides (also related to status and pay) in our department (Principle 10). We have policies for short term contracts (Principle 6). A senior academic reviewed LGBT issues and concluded that NDPCHS practice in this area is currently sound (Principle 7). Any gender pay gap (principle 4) is being monitored at the Institutional level.

## (v) Timing of departmental meetings and social gatherings

Describe the consideration given to those with caring responsibilities and part-time staff when scheduling departmental meetings and social gatherings.

Since 2012 all of the department seminars and committee meetings have been held between 10 am and 4 pm . Once a term the senior department team follow their meeting with an optional and informal dinner at an Oxford college. This is always well-attended.

We host a very popular Christmas party, held at a college, for all staff, with a sit down evening meal, an (optional) fancy dress theme and a disco. Every two years we hold a department summer garden party for families, with games and an ice cream van. These are very well attended.

## SILVER ACTION ACHIEVED

2016 survey (new item): 'department meetings are scheduled to take account of caring responsibilities'.

90\% (93\% of women) AGREED.

MSD benchmark: 86\%


## support friendly environment

```
                            good opportunities
                            University admin location research
                Relaked departiment
            place
            culture
            nice helpu@gymat
            best projects helpful inspiriny
            beautiful building positive excellent
            enjoy Flexibl
    interesting
            immediate
                people
            team Flexibility development
                        Oxford atmosphere staff
        colleagues supportive
                    working
```

Figure 5.6.3 Department staff party photos, and wordcloud of free text comments from 2016 staff survey.
(vi) HR policies

Describe how the department monitors the consistency in application of HR policies for equality, dignity at work, bullying, harassment, grievance and disciplinary processes. Describe actions taken to address any identified differences between policy and practice. Comment on how the department ensures staff with management responsibilities are kept informed and updated on HR polices.

NCPCHS has a dedicated HR manager embedded in the department who is available to all staff to discuss any issues that relate to HR polices. The HR team also includes a personnel assistant. In addition, two staff are trained as harassment officers (one male, one female). Advice given is consistent and the majority of issues are resolved through informal means. Only one complaint of bullying has been raised formally through the bullying and harassment policy and this was managed promptly and all parties reported that they were satisfied with the outcome. The responses in our survey suggest that this is not a major concern in this department. In the 2016 survey three people said they had ever
experienced bullying in the department and $90 \%$ of women and $80 \%$ of men know where to find information about bullying and harassment policies, should they ever be needed.

Policies are referenced in contracts of employment and induction documents and there are links to them on the department webpages. Major changes would be publicised via our weekly staff newsletter. There are posters to identify what both staff and students should do if they feel they are subject to inappropriate behaviour and gives details of who the harassment officers are.

## (vii) Workload model

Describe any workload allocation model in place and what it includes. Comment on ways in which the model is monitored for gender bias and whether it is taken into account at appraisal/development review and in promotion criteria. Comment on the rotation of responsibilities and if staff consider the model to be transparent and fair.

Our work to date has focused on the workload of senior staff. A survey of senior staff gathered information about the percentage of working time these staff spend on different activities (see table 5.6.2).

Table 5.6.2 Female/Male comparison of workload breakdown on key activities (Senior staff only)

|  | 2016 <br> F | 2013 <br> F | 2016 <br> M | 2013 <br> M |
| :--- | :---: | :---: | :---: | :---: |
| Teaching \& Supervision | $15 \%$ | $13 \%$ | $25 \%$ | $11 \%$ |
| Admin \& Management | $20 \%$ | $13 \%$ | $15 \%$ | $13 \%$ |
| Research | $39 \%$ | $45 \%$ | $30 \%$ | $57 \%$ |
| Reviewing grants and papers for funding <br> bodies \& journals | $6 \%$ | $4 \%$ | $5 \%$ | $6 \%$ |
| Department, university and college <br> committees | $9 \%$ | $13 \%$ | $12 \%$ | $13 \%$ |
| External / national committees and examining | $8 \%$ | $17 \%$ | $9 \%$ | $15 \%$ |

NB. Does not add up to $100 \%$ due to part-time and clinical work.
Comparing these data with a 2013 workload survey suggests that the senior women and men are spending more time on administration and management and less time on research. Men report more teaching and supervision while women report more time on research, as might be expected from their
underlying roles (ACTION 7.4). External and national committee membership is reported at a lower percentage than in 2013, but this is heavily influenced by individual activity (eg in 2013 one senior woman was a government advisor spending much time on external committee work - her role has now changed).

The survey provides a benchmark for PDR discussions. PDR forms include a specific item about internal and

## ACHIEVEMENT

'There is a fair and transparent way of allocating work in my department'

2016 staff survey: 64\% (62\% of women) AGREED

MSD Benchmark: 69\% agreed.
external committees, funding boards, examining and reviewing. University promotion criteria require demonstration of citizenship within and beyond the department as well as activity in administration, line management, research and teaching.

This approach works well in managing individual workloads but our survey responses show that there is still room for improvement around transparency of workload.

Work to develop a workload model is being co-ordinated at divisional level, and a model has been piloted in the Department of Physiology, Anatomy and Genetics. We have appointed a senior academic to contribute to the project (ACTIONs 7.3, 8.2. 8.5). Internally, we have started by improving transparency around the roles of senior staff: we will publish on the intranet a summary of the Seniors involvement in internal and external, national and international committees (ACTION 7.3).

ACTION 7.2 Examine the reasons for the apparent drop in the gender difference among the senior team in the \% of time spent on research and teaching.
ACTION 7.3 Publish on the department intranet details of the external, national and international committee activity of senior team.
(viii) Representation of men and women on committees

Provide data for all department committees broken down by gender and staff type. Identify the most influential committees. Explain how potential committee members are identified and comment on any consideration given to gender equality in the selection of representatives and what the department is doing to address any gender imbalances. Comment on how the issue of 'committee overload' is addressed where there are small numbers of women or men.

Figure 5.6.4 Gender of committee members, excluding multiple membership


Figure 5.6.5 Committee membership by job role, excluding multiple membership


We have three decision-making committees: Research Committee, Teaching Committee, Graduate Studies Committee. Some men and women sit on multiple committees, taking the group of committee members as a whole, $40 \%$ are women. All committees include a student representative and a representative of the E\&MCRs.

Committee obligations are not heavy for any member of staff, although the HoD and Departmental Administrator attend all. Committee members have identified others who can deputise for them if they are unable to attend. As well as encouraging more female members, this enables E\&MCR staff to 'step up', providing them with the opportunity to participate in decision making.

By the 2016 survey, following the appointment of a Communications Manager who leads the Better Workplace 'Transparency, information sharing and Communications' working group (formed in 2014) 98\% of the department's respondents agreed that the internal newsletter, department website (92\%)
staff open meetings ( $90 \%$ ) and research group meetings (92\%) are effective methods of sharing information.

ACTION 8.2 Seek more balance between men and women chairing department open meetings.

ACTION 8.4 Balance committees which do not have an appropriate gender balance.
(ix) Participation on influential external committees

How are staff encouraged to participate in other influential external committees and what procedures are in place to encourage women (or men if they are underrepresented) to participate in these committees?

All of the senior members of the department have roles on external committees, including university decision making committees and/or Oxford college governing bodies, as panel members, chairs or Directors of national funding bodies, and roles as external examiners, on trial monitoring committees and government advisory bodies. All seniors also have national or international roles.

The department includes five current NIHR Senior Investigators, of whom two are women.

Seniors largely make their own decisions about whether to accept invitations while applications for substantial new roles would be discussed with their line manager. Workload is reviewed with an explicit item on the annual PDR form.

Mid-career researchers who have experience of grant holding, first authored publications and a record of peer reviewing, are encouraged, to consider applying for membership of grant funding committees. This is viewed as an excellent way both to broaden and sharpen research design skills. When calls for new members of committees are released these are circulated to heads of research groups and brought to the attention of team members. Action: Data monitoring.

Word count: 7728

## 6 CASE STUDIES: IMPACT ON INDIVIDUALS

Recommended word count: 1500 words
Three individuals working in the department should describe how the department's activities have benefitted them.

The subjects of the case studies should include a member of the self-assessment team and a member of professional or support staff. The case studies should include both men and women.

More information on case studies is available in the awards handbook.
(i) Lisa Hinton, Grade 9 researcher (redacted)

## (ii) Jessy Morton, Office Manager



I joined the Department in April 2012 as a full- time grade 3 reception/admin assistant. After 16 years of retail managerial experience, 2 years of administration in HEl and becoming a single parent after a dramatic divorce, this was an amazing opportunity to demonstrate and develop my administration skills in the new environment. I had been living in England for 10 years and am originally from Venezuela

My first line manager was Executive Assistant for the Head of Department. The induction from the whole admin team was welcoming, professional and immediately left me with a feeling of belonging. This was the first time I felt part of something since arriving in England.

I was really impressed with the support I received if my child fell ill and I could not make it to work. In contrast with previous employers, NDPCHS senior managers were caring, supportive and clearly understood how stressful a child's illness can be for a single parent.
My line manager encouraged me to try different roles including assisting the HR officer with recruitment, a PA role, helping to organise an office move and managing the office for the remaining research teams. I had opportunities to organise small events including leaving parties, the Jubilee party, baby showers, retirement celebrations and dinners at University colleges. In April 2013 I was appointed as a PA and Admin Assistant, full-time grade 4.

By 2014, things got even better for me in terms of family and working life. My second child was born in February 2014. I had a formal meeting with my line manager to plan my maternity leave and return. Understanding the procedures, KIT days and holiday allowance meant I had guilt-free family time with my newborn.

I returned in September 2014. My line manager highlighted career development opportunities and I successfully applied for a newly created full-time grade 5 Office Manager role. Allowed to work flexible time, this has opened up new opportunities including assisting on the writing and editing of the Departmental newsletter and organising the staff Christmas Party (150+ people), the Staff and Family Summer Party (230+ people), special coffee break events, small office moves (under 25 desks/people) and assisting with the 250+ people office move. I was encouraged to
 complete Health and Safety officer training, First aid, and OLl's Introduction to Management. In 2016 I received an Excellence Award.

My current line managers Nicola Small and Clare Wickings have given me wonderful support and in February 2016 I felt confident enough to start an Undergraduate course on Social Psychology. My hope is to become a primary care academic researcher.
(iii) James Sheppard, Grade 8 researcher and SAT member


I am a non-clinical researcher in my early 30s. Like many post-doc researchers, I face the challenges of short fixed-term contracts, balancing time spent on my immediate research responsibilities and maximising opportunities for career progression. To me, career progression in academia is not just about promotion and increased responsibility; it is simply
about sustaining the academic career which I love.
In September 2013 I took up a 3 year MRC Strategic Skills Population Health Scientist Post-doc Fellowship. I was quick to settle in thanks to the excellent induction and welcome I received. Fellowship funding meant I could lead my own research and take up an extensive training programme. In 2014, following my PDR, I applied for re-grading to grade 8 . Unfortunately my application was rejected because I was not supervising enough students/staff, but the department was very supportive in providing opportunities to supervise MSc students, academic clinical fellows and a new DPhil student. This increased responsibility was sufficient to secure my regrading to grade 8 at the second attempt in 2015.

In June 2015, I was blessed with the birth of my first child, Lily and became the first person in NDPCHS to be eligible for the new shared parental leave, which I heard about through the department's Better Workplace Family Friendly working group. Our HR manager made sure that I understood what was involved and my line manager encouraged me to take an increased period of leave. He said "You will never look back on your life and wish you had spent a little more time at work, but you may look back and wish you had spent a bit more time with your kids". That has stuck with me and was a key factor in my decision to take 6 weeks additional (paid) leave in the first 6 months after Lily's birth. I remain unique amongst my peers outside Oxford in having taken up shared parental leave.

Working in the NDPCHS is enjoyable and the supportive, family friendly and encouraging environment gives me the confidence that I will be able to both sustain an academic career in academia and raise a family. In addition to encouraging academic excellence, I am also empowered to maintain a healthy work-life balance, leaving work early on at least two days a week so that I can spend time with my daughter before she goes to bed. Such a positive environment should not be underestimated, and I feel very privileged to have been part of it for the last 3 years.

## (iv) Ly-Mee Yu, Grade 10, Deputy Director Academic of PC-CTU



I joined the Department in April 2013 as the Lead Trial Statistician of the Primary Care Clinical Trials Unit (PC-CTU) after 10 years working as a support senior statistician. It has not always been straightforward to provide academic input to the design and analysis of clinical research but the Department (particularly my previous and current line managers, Professors Andrew Farmer, Rafael Perera, and Chris Butler, and the Head of Department, Professor Richard Hobbs) have recognised and valued my work.

The Department has supported my career progression. In the space of four years, I have built a team of trial statisticians and increased the CTU capacity to about 60 members of staff. I have also completed my DPhil and became the Deputy Director Academic of the PC-CTU in 2015. I was awarded an Associated Professorship (July 2016) and promoted to Grade 10 (November 2016). I have supported career development among other CTU members through PDRs and the Department's Awards for Excellence. Having these schemes and a flexible working environment are important in the CTU where over $80 \%$ of staff are women and also makes the unit a good place to work: a male colleague who recently joined attested that the PDRs, award schemes and flexible work environment encouraged him to apply for this position.

## Word count: 1469 (not including titles)

## 7 FURTHER INFORMATION

## Recommended word count: 500 words

Please comment here on any other elements that are relevant to the application.

Tracking our progress through regular staff surveys, focus groups and a thriving set of working groups, we have demonstrated whole-department engagement in Athena SWAN and achieved a steady reduction in gender differences on survey items: by the 2016 survey all statistically significant gender differences on questionnaire responses had disappeared.

Staff perceptions, assessed in the September 2016 staff survey, show nearly two thirds see our Athena SWAN activities as 'positive' and intended for 'everyone'. However, some staff reported that they 'didn't know' or hadn't heard of the initiatives, and a couple thought it had harmed men's careers.

Word count 96

## 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.

## Action Plan Aims and Objectives for Nuffield Department of Primary Care Health Sciences

## Athena SWAN Application April 2017

Our working groups, including groups with a new remit, and newly-formed groups:

- DPhil students
- Clinical Researchers
- Support, teaching, admin and researchers STAR (previously Non-clinical staff)
- Transparency, Information Sharing, Internal Communications and Visibility (previously Visibility)
- Early \& Mid-Career Researchers (E\&MCRs) (new since 2015)
- Better Personal Development Review (new since 2015)
- Commuters (new since 2015)
- Data Monitoring (new 2017)

WGs with a monitoring brief:

- Workload Allocation (new since 2015)
- Family-friendly \& part-time working
- Mentoring

WGs with a less explicit E\&D focus: Staff Wellbeing (new 2015), Physical Activity (new 2015), and Green Impact (new 2015)

| 1. Maintain a Better Workplace structure that promotes gender equality whilst operating for the benefit of all members of the department |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Objectives | Actions for 2017-2021, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| Maintain E\&D focus in Better Workplace activities | 1.1 Maintain a primarily E\&D focus across the portfolio of Better Workplace Working Groups, while not excluding activities that pick up wider issues that matter to NDPCHS staff <br> Monitor the focus on E\&D throughout the Working Group activities. <br> Review the activities in the group once a term against our strategic focus on E\&D. <br> BW chair | $\begin{aligned} & 3 \times \text { per year } \\ & 2018-2021 \end{aligned}$ | Better Workplace includes some WGs and actions that are not strictly E\&D issues. Eg Green Impact, Wellbeing and Physically Active at Work. We wish to encourage these 'grass roots' interests without losing track of E\&D | All Better Workplace activities to include an E\&D focus, wherever feasible. <br> At least 80\% of the Actions to have an E\&D focus |


| 1. Maintain a Better Workplace structure that promotes gender equality whilst operating for the benefit of all members of the department |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Objectives | Actions for 2017-2021, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| Formalise internal monitoring of department data for E\&D issues | 1.2 We will set up an internal department data monitoring and analysis group with an explicit E\&D focus which will report directly to the decision making committees every 6 months. The group will monitor all staff and student data on appointments, training, promotions, awards and recognition, bridging funds, and staff retention, and report to the Better Workplace Group, Senior Management team and Research Committee every 6 months <br> Administrator and Chairs of department committees | Autumn 2017 <br> every 6 <br> months 2018-2021 | While the WGs have identified a wide range of Actions for the next four years, based on our current data, including survey and focus groups, E\&D issues can emerge with little warning. For example, we are concerned to see that (although the numbers are small) women applying for doctorates were less likely than men to be offered a place in the last intake (2016) Internal data monitoring and senior team engagement through reports to main committees will help us to identify and rectify issues as they emerge | Inclusion of data monitoring reports on internal committee agenda every six months. <br> Timely identification and actions to address any E\&D issues that emerge through the data monitoring. |


| Objectives | Actions for 2017-2021, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| :---: | :---: | :---: | :---: | :---: |
| Support working group leads to influence <br> strategic planning in the department | 1.3 We need to ensure that senior level support enables the working groups to fulfill their actions. <br> We will review WG lead satisfaction with their 'Champion Inputs' at Better Workplace meetings and (if needed) discuss any difficulties with WG lead and Champion. <br> Chair of Better Workplace with WG leads | 2017-2021 | In 2016 Better Workplace meetings the Working group leads raised the need for more visible senior team support for their action plans This led to a new initiative (since December 2016) for each Better Workplace working group to have a senior team 'Champion'. | E\&D embedded in department's strategic plans <br> WG leads report that their senior team Champions are accessible and responsive |


| Objectives | Actions for 2017-2021, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| :---: | :---: | :---: | :---: | :---: |
| Communicate successes | 1.4 Communicate Better Workplace successes for all staff in multiple ways - including on the website, in department newsletters, through case studies and at Committee and Open meetings <br> Comms lead and BW chair | 2017-2021 | A MSD level survey identified a perception (at least) that men might feel disadvantaged or marginalized by an apparent focus on women's careers and that Athena SWAN workload frequently falls to women, especially early- and midcareer researchers <br> These concerns were also evident in some of the free text comments in the NDPCHS 2016 survey | The \% reporting that the BW group is "for everyone in the department" should be increased from 66\% (2016) overall to $80 \%$ by 2018 survey and $85 \%$ by 2020. |


| 1. Maintain a Better Workplace structure that promotes gender equality whilst operating for the benefit of all members of the department |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Objectives | Actions for 2017-2021, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| Gather data on staff experiences | 1.5 Prepare survey items to include monitoring all current Action plan activities. Include items on disability at work, drawn from analysis of our interviews on Disability at Work (see Action 10.2) <br> Run a staff survey every two years, supplemented with group discussions and interviews as needed to inform working group actions <br> Chair of Better Workplace with WG leads | $\begin{aligned} & 2018 \\ & 2020 \\ & 2022 \end{aligned}$ | The department has achieved very good response rates ( $80+\%$ ) with each of the staff surveys to 2016. Surveys are vital but can be blunt tools if we want to illuminate why people have concerns (for example about workload allocation or transparency about bridging funds) or, indeed, why they feel valued and well integrated at the level of their team and department but less so in the wider university. <br> For this next 4 year period we will use more qualitative approaches to data collection (we have considerable expertise in these methods) including interviews and focused discussion groups. | Improve our understanding of the issues that matter to staff, design better questionnaire items for the 2018 survey and maintain a survey response rate of $80 \%$ or more. |


| 2. Improve career and development opportunities for all research staff |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Objectives | Actions for 2017-2021, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| Ensure all researchers maintain an effective publications record | 2.1 Full day writing workshops for research staff across grades and specialties will be held once a term. These workshops, modelled on those run by HERG, involve each participant presenting a few slides about a paper they are in the process of writing followed by a group discussion and summary of advice for the paper E\&MCR working group leads | Autumn 2017 <br> and at least annually | There is good practice in NDPCHS in supporting E\&MCRs to publish. This will now be shared across all research groups | Evaluation of workshops at least 90\% of attenders who would recommend to a colleague. <br> Data monitoring to show broad attendance from E\&MCRs across research groups. |
|  | 2.2 Prepare a document for the intranet on tips and options for productive writing. <br> The document will include extracts from the womeninscience.ox.ac interviews with senior women sections talking about how they wrote their early papers. <br> E\&MCR working group leads | From 2018 | Consultation with staff has shown that researchers have different preferences for eg protected 'writing hours' quiet times workshops and writing retreats. Options needed for staff who work part time or have caring responsibilities | Document published on intranet Spring 2018 |


| 2. Improve career and development opportunities for all research staff |  |  |  |
| :--- | :--- | :--- | :--- | :--- |
| Objectives | Actions for 2017 - 2021, (and <br> person/position responsible) | Timescale <br> (start/end <br> date) | Justification |


| 2. Improve career and development opportunities for all research staff |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Objectives | Actions for 2017-2021, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
|  | 2.4 We will improve encouragement and support for E\&MCRs to become coapplicants (at Grade 7) and PIs (at grade 8) through training, reminders to group leads and grant applicants and working with the E\&MCR working group leads and E\&MCR representatives on the Research Committee . <br> Research committee meetings attended by all group leads (or their deputies) will include reminders of this policy at meetings during 2017-18 to ensure that the practice is embedded Research Committee chair and E\&MCR representative | 2018-2020 | Becoming a co-applicant is an important stage in career progression <br> The department's research committee has agreed (2016) a policy that all grant applications should include an EMCR where feasible. <br> Line managers should already be discussing grant writing with staff at grade 7 and grade 8; especially at annual PDR. | In 2018 we expect at least half of new applications to include an E\&MCR as co-applicant, increasing to 75\% by 2020. <br> All grade 8 staff who have been in the department for 3 years or more to be a co-applicant on a grant |


| 2. Improve career and development opportunities for all research staff |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Objectives | Actions for 2017-2021, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| Support research staff to become coapplicants and PIs on grant proposals | 2.5 Prepare a document for the intranet on tips for productive grant writing. <br> The document will include extracts from the womeninscience.ox.ac interviews with senior women sections talking about how they secured their first fellowship and grant funding <br> E\&MCR working group leads | Autumn 2018 | 2016 survey data shows that the 61 respondents) who have applied for funding ( 34 of whom ( $56 \%$ ) were women). | Publish the document on the intranet Autumn 2018 |
|  | 2.6 We will monitor future grant applications with a post-doctoral researcher (grade 7 or 8) as a coapplicant. <br> Data monitoring group <br> The E\&MCR group will gather experiences from grade 7 \&8 researchers of department support for grant applications. We will repeat (and possibly expand) items on satisfaction with department support for research and fellowship applications in future surveys,BW chair and E\&MCR working group leads | Spring 2018 | In 2016 there were 117 A\&R staff in the department including 52 at grades 7 and 8 . <br> The survey respondents who had applied for grants in the department were highly satisfied with the support they received from admin and finances ( $93 \%$ all, $95 \%$ of women) and senior colleagues (95\% all, $97 \%$ of women). | Increase the proportion of A\&R staff who have applied for funding by at least 10\% in 2020 <br> As well as expanding the proportion of coapplicants and PIS among E\&MCRs we need to maintain the high levels of satisfaction with support for research grant applications |


| 2. Improve career and development opportunities for all research staff |  |  |  |
| :--- | :--- | :--- | :--- | :--- |
| Objectives | Actions for 2017 - 2021, (and <br> person/position responsible) | Timescale <br> (start/end <br> date) | Justification |

2. Improve career and development opportunities for all research staff

| Objectives | Actions for 2017-2021, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| :---: | :---: | :---: | :---: | :---: |
| Improve E\&MCR opportunities for teaching | 2.8 Internal, external and supervision opportunities are available; these should continue to be communicated to and encouraged among interested E\&MCR staff, using the annual PDR and interim discussions when opportunities arise. <br> 1. Clarify what current and planned teaching opportunities are available. <br> 2. Work with the teaching group to draft a 'how to' guide to getting involved in teaching, including a list of contact details for each of the teaching leads (linked to the teaching group's objectives). <br> 3. Obtain feedback on the guide from the E\&MCR and the teaching group. <br> 4. Disseminate on the staff intranet. <br> 5. Disseminate termly in the departmental newsletter. <br> Anne-Marie Boylan, Jamie HartmannBoyce, Veronika Williams. | The guide will be drafted and disseminated by September 2017. | There are various opportunities for teaching in the department, but free text survey comments suggested that not all staff knew how to get involved. <br> Teaching is an important career development opportunity and $16 \%$ (25/154, 22 of whom are women) of respondents said they would like support to develop their teaching skills. | Monitor item on staff survey - by 2018 no more than $10 \%$ of people who would like to be involved in teaching should be without opportunity to do so <br> By September 2017, the How To guide will be available on the intranet. <br> Reminders about teaching will be disseminated via the departmental newsletter at least once a term in 2017/18 and 2018/19. |

## 3 Improve the selection, induction, and integration of DPhil students in the Department

| Objectives | Actions for 2017-2022, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| :---: | :---: | :---: | :---: | :---: |
| Improve the process for selecting doctoral students | 3.1 The Director of Graduate studies will ensure that all members of the doctoral appointments panel have completed implicit bias training and are reminded on the day of our commitment to E\&D. <br> One member will attend all of the appointments panels to observe all interviews with an E\&D monitoring role. This member will intervene if necessary to balance the selection process. <br> DGS and BW chair | Applications for 2018/19 intake | We have been successful in attracting more applicants for doctoral study with us. We have limited funding and capacity for doctoral students and the process is very competitive. Our most recent (2016) intake saw a large (9 fold) gap between applications from women and accepted offers. We believe this is an anomaly but need to make sure that the process is not biased against women applicants. | Data shows gender equivalence between applications and acceptances for doctoral study |

3 Improve the selection, induction, and integration of DPhil students in the Department

| Objectives | Actions for 2017-2022, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| :---: | :---: | :---: | :---: | :---: |
| Improve induction for doctoral students | 3.2 A new FAQ document will be created with the DPhil students for the intranet and given out at inductions. This includes showing students where to find minutes of department committee meetings Daniel Long <br> Gather feedback from the new students starting in 2017 and annually \& report to BW group at last meeting of year <br> DPhil Students WG lead | From October 2017 <br> Annually | The 2016 survey indicated more could be done for new students during induction, 63.3\% found it useful 'to some extent'. <br> All students meet the DGS in their final year to find out future plans and gather any comments or feedback about the doctoral programme as a whole | 2018 student survey to show an increase in percentage of students who agree the induction is useful, rising from $63 \%$ to $75 \%$, and to 95\% by 2022 |

## 3 Improve the selection, induction, and integration of DPhil students in the Department

| Objectives | Actions for 2017-2022, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| :---: | :---: | :---: | :---: | :---: |
| Improve integration of students in department and with research groups | 3.3 We will establish the presentations from all of the research group leads (or their deputies) as part of DPhil inductions - and invite all new members of staff to attend. Daniel Long <br> A well-attended seminar featuring a series of DPhil 3minute presentations began in 2016. We will continue to run these at least once a year as part of the department's main seminar series. <br> All supervisors continue to be invited to attend annual student presentations followed by a college dinner DGS <br> Organise DPhil journal club four times a year DPhil Students WG lead | Annually 2017-2021 | DPhil students are joining a large department with strong inter-disciplinary research traditions. In 2016 as part of induction all of the department's research group leads gave a brief presentation to the new doctoral students about their groups' work. 2016 survey open text comments indicated some concerns about isolation partly due both to physical isolation (in a separate building) and connections to research teams. <br> The 2016 survey indicates that 84\% of students feel supported and able to make effective use of their supervisors. | At least 75\% of doctoral students should report in the survey that they feel 'integrated' into the department <br> Monitor attendance at the student seminars to ensure representation across research groups and seniority <br> Maintain or increase the proportion of students who feel supported by supervisors |

## 3 Improve the selection, induction, and integration of DPhil students in the Department

| Objectives | Actions for 2017-2022, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| :---: | :---: | :---: | :---: | :---: |
| Improve information for doctoral students about career development opportunities | 3.4 Include discussions about future plans and development opportunities in at least one of the DGS meetings in the second year of study (before Confirmation) <br> DGS | From 2018 | The DGS has at least two meetings per year arranged with each of the doctoral students, who are also welcome to arrange additional meetings as required. | By the 2020 student survey, increase the percentage of students who agree that they are clear about the development opportunities available to them, rising from $73 \%$ to 85\%. |

## 3 Improve the selection, induction, and integration of DPhil students in the Department

| Objectives | Actions for 2017-2022, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| :---: | :---: | :---: | :---: | :---: |
| Improve transparency and awareness of information for doctoral students | 3.5 All Department committees have had a DPhil representative since 2016. (the Graduate Studies committee has always had a student rep). <br> The DPhil working group lead will use multiple approaches including the regular doctoral students meetings, as well as emails and posters in the students' coffee room to exchange feedback and information between the doctoral students and committee meetings <br> DPhil Students WG lead | From 2017 | In the 2016 survey 74\% of students reported that management and decision making processes were not transparent. | At least 80\% of DPhil students to respond positively to 2018 and 2020 survey items about transparency, and awareness of information. |

4. Build the career progression pipe line for clinical researchers, and for women in particular

| Objectives | Actions for 2017-2022, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| :---: | :---: | :---: | :---: | :---: |
| Increase the proportion of Academic Clinical Fellows (ACF) who complete their post and secure further academic funding | 4.1 Develop a written policy for ACF career development for all ACFs and supervisors <br> Clinical researchers WG lead <br> Facilitate early identification of projects for newly appointed clinical researchers which fit with our department research themes. Kay Wang/ Paul Aveyard as ACF leads | Autumn 2017 | ACFs are an important part of the academic clinical pipeline but are selected and employed by the Deanery, an NHS body. The timing of the ACF often corresponds with initiating a family, and in the past many ACFs have not returned to the academic side of their work. Balancing academic, clinical and family commitments is hard and we need to be flexible and supportive to keep these clinical researchers. | Maintain (or increase) the number of clinical academics in the department, with gender equality at ACF retention |
| Career development for ACFs and early career clinicians | 4.2 Ensure that details of funding opportunities which may be of interest to ACFs and early career clinical researchers are circulated on the departmental email bulletin together with information on eligibility criteria and how to apply. Clinical researchers WG lead |  | Clinical researchers usually work part time in the department and may take longer to become familiar with formal and informal information routes. <br> Our actions since 2012 have improved our retention of female ACFS (including negotiating with the deanery for part time contracts) | All ACFs within the last 6 months of their post should have evidence of at least one documented discussion about future career plans and potential funding options with their academic supervisor or the ACF lead |

4. Build the career progression pipe line for clinical researchers, and for women in particular

| Objectives | Actions for 2017-2022, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| :---: | :---: | :---: | :---: | :---: |
| Support integration and retention of clinical researchers in the department | 4.3 Create area on intranet to clarify career progression infrastructure and signpost clinical researchers to opportunities for doctoral research funding, fellowship schemes, and other clinical investigator schemes for which they may be eligible. Include video extracts from the women in science interviews to illustrate how senior women scientists developed dual careers in medicine and academia (KW/PA/AF/KM). <br> Invite a senior clinical academics to speak about their own career progression pathways at a department open meetings (KW/PA/AF/KM). | Winter 2017/18 <br> Spring 2018 and then annually | There are currently only 205 senior academic GPs in the UK, with a male to female ratio of 95 to 24 (BMA data) who comprise only around 3\% of the total number of GPs registered with the GMC. <br> Academic supervisors, GP trainers, and trainees have expressed uncertainties about how to organise clinical and academic activities for staff whose working hours are split between clinical and academic commitments. <br> Clinical researchers who work part time in the department can face particular challenges for integration. <br> 2016 survey only $40 \%$ of clinical researchers reported that they were aware of structures for promotion and regrading | Maintain (or increase) the number of female clinical academics <br> Publish the new area on the website by end of 2017 <br> Increase by 10\% clinical researchers reporting that they feel integrated into a team (2016 68\% agreed) and integrated into the department (from current 63\%) by 2018 <br> By the 2018 staff survey at least 60\% (from 40\% 2016) of clinical researchers aware of promotion and regrading structures, increasing to 70\% by 2020 |

## 5.Support career progression, retention and opportunities for professional and support staff

| S.Support career progression, retention and opportunities for professional and support staff |  |  |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :---: | :---: |
| Objectives | Actions for 2017 - 2022, (and <br> person/position responsible) | Timescale <br> (start/end <br> date) | Justification |  |  |  |


|  | 5.3 Encourage participation in the UAS conference on careers in HR, finance, Department administration and development | 2017/18 | Staff in P\&S roles have varied career paths and while we have made progress in structuring the progression route for CTU staff, offering training, and supporting individuals with their development through the PDR and line management structure, we could do more to consider career progression. | Increase the proportion of P\%S staff attending training events by 10\% from 2016 (when 19 P\&S staff, including 16 women attended) |
| :---: | :---: | :---: | :---: | :---: |
| Support integration of P\&S staff with the department | 5.4 Invite P\&S staff to focus groups to discuss how the department might improve integration and interest in pursuing a long term career in the University. Feedback to the BW group and develop measures in response eg invite in-house training, establish peer support groups, identify new items for P\&S staff in the 2018 staff survey STAR WG and HR manager | 2018/19 | P\&S staff often have transferable skills - only $50 \%$ report that they would like to pursue a career in academia. | Increase proportion of $\mathrm{P} \& \mathrm{~S}$ staff who report that they wish to pursue a career in academia long term from $50 \%$ to $65 \%$ by 2018 <br> At least 75\% of P\&S staff to report that they feel integrated into the department in 2020 survey |


| 6 Improve career pipeline for all staff, including awareness of development opportunities |  |  |  |
| :--- | :--- | :--- | :--- | :--- |
| Objectives | Actions for 2017 - 2022, (and person/position <br> responsible) | Timescale <br> (start/end <br> date) | Justification |


| 6 Improve career pipeline for all staff, including awareness of development opportunities |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Objectives | Actions for 2017-2022, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| Improve management skills | 6.2 Ensure that all staff taking on (or with existing) line management responsibilities are offered training and their own mentoring, line management and peer support so that they feel equipped to carry out their duties effectively' <br> Use focus group discussions with line managers to identify emerging issues about gaps in line management training. If desired, following there groups, establish and evaluate a peer learning set for line managers at grade 8 and above HR and Better Workplace Chair <br> The University offers training in line management; this training will be promoted in multiple ways including through the weekly newsletter, the annual PDR and targeted emails. <br> HR Manager and data monitoring group | 2017 onwards 2018 onwards | In the 2016 survey 37\% of those who currently line manage reported that they would value support or training in line managing staff. <br> Satisfaction with line managers is generally high in the department, but free text comments indicate that this varies. | Reduce the proportion of staff who line manage who indicate that they are in need of training by $10 \%$ in 2018 and by another $10 \%$ by 2020. <br> Survey responses on opportunities to develop new skills to be maintained or increased (2016 86\% staff agree ) |


| Objectives | Actions for 2017-2022, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| :---: | :---: | :---: | :---: | :---: |
| Improve transparency about eligibility for bridging funding for E\&MCRs and clinical researchers | 6.3 Clarify and refine the criteria for staff who might apply for bridging funding, including what effective performance would look like in each role. <br> - Draft criteria for eligibility. <br> - Draft timeframes for application, consideration and allocation of funding. <br> - Obtain feedback from EMCR and clinical researchers groups. <br> - Identify senior staff to review and modify criteria as appropriate. <br> - Present criteria and timeframes to Department Research Committee. <br> - Finalise and identify strategy for disseminating criteria effectively. <br> James Sheppard, Chrysanthi Papoutsi, Dan Richards-Doran, Senior member of staff (tbc). | 2017-2020 | The E\&MCR leads have identified this topic as an area of concern to staff | Criteria defined and agreed by Summer 2018. <br> A question added to the staff survey in 2019 asking about awareness of bridging funding and what criteria must be met to be eligible success will be defined at $80 \%$ of E\&MCRs and ACFS being aware of funding criteria by 2019, and 90\% by 2020. |

## 7. Improve transparency of department decision making and (senior) workload

| Objectives | Actions for 2017-2022, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| :---: | :---: | :---: | :---: | :---: |
| Improve awareness of access to minutes of committee meetings and key issues | 7.1 Set up a new sharepoint site for minutes of all meetings. Notify staff through the Weekly News that minutes have been published. <br> Use multiple methods to give feedback on key issues including summarizing decisions in the department newsletter and at the termly department Open meeting Comms manager | Senior- <br> level <br> meetings: <br> April <br> 2017. <br> All <br> minuted <br> meetings: <br> End 2018. | Although minutes of all committee meetings are available on the intranet in the 2016 staff survey only $40 \%$ agree that minutes of departmental committee meetings are shared effectively. | By the 2018 staff survey, there will be an increase in the percentage of staff who agree that information is shared appropriately within the department, from $79 \%$ to $85 \%$, with no difference by gender. <br> By the 2018 staff survey, there will be an increase in the percentage of staff who agree that decision making processes are clear and transparent, from $61 \%$ to $80 \%$, with no difference by gender. |

## 7. Improve transparency of department decision making and (senior) workload

| Objectives | Actions for 2017-2022, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| :---: | :---: | :---: | :---: | :---: |
| Improve workload gender balance transparency (senior team) about committee membership and external commitments | 7.2 Examine the reasons for the apparent drop in the gender difference among the senior team in the \% of time spent on research and teaching <br> Workload WG lead and BW Chair | Autumn $2017$ | Comparing 2013 and 2016 reported workload suggests that the senior women and men in the department are spending more time on administration and management and less time on research. Men report more teaching and supervision (25\% vs 15\%) while women report more time on research (39\% vs 30\%). <br> Feedback from other departments has suggested that attempts to increase workload transparency may feel threatening to E\&MCRs, hence we have initiated this with senior team members. | Removal of gender differences in reported time on internal committees, admin, teaching and research, unless these are explained by particular features of the role |


| 7. Improve transparency of department decision making and (senior) workload |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Objectives | Actions for 2017-2022, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
|  | 7.3 Publish on the department intranet details of the external, national and international committee activity of senior team <br> Workload allocation WG | 2018 | The 10 senior women and 13 senior men in the department contribute to a wide range of department, university and external (national and international) committees: this is useful information for the department which should be transparent. | 2018 agreement with survey items on 'fair and transparent allocation of workload' to increase from 64\% (62\% of women) to over 70\% <br> 2020 these items to increase to 75\% of staff |

8. Maintain department culture as inclusive, flexible and family friendly

| Objective | Actions for 2017-2022, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| :---: | :---: | :---: | :---: | :---: |
| Ensure a gender balance in department roles | 8.2 Seek more balance between men and women chairing department open meetings. <br> Nicola Small | To discuss at summer 2017 seniors committee. | Currently the department Open meetings are always chaired by a women, usually from E\&MCR grades. <br> Chairing the meetings is a good opportunity for E\&MCR staff and we believe this should be available to all genders. | Gender balance in Open meeting chairs |
|  | 8.3 Encourage more male researchers to take up Comms training and get involved in public engagement activities in the department - actively seek men to take part. <br> Dan Richards-Doran | From June 2017 (festival) onwards. | While women have good representation on external events, we do not know if this is deliberate or accidental. There needs to be agreement at a senior level to maintain this and monitor performance. | Increase by 10\% the number (from 33 in 2015-16) and gender balance (men currently at 45\%) taking part in department Outreach activities |
|  | 8.4 Balance committees which do not have an appropriate gender balance. <br> Trish Greenhalgh | To discuss at summer 2017 seniors committee. | The Graduate studies and Teaching Committees are predominantly male, these need to be balanced. | Agree the gender balanced membership of the GDS and teaching Committees at the Summer 2017 seniors meeting |

## 8. Maintain department culture as inclusive, flexible and family friendly

| Objective | Actions for 2017 - 2022, (and <br> person/position responsible) | Timescale <br> (start/end date) | Justification | Success measure |
| :--- | :--- | :--- | :--- | :--- |
| Improve awareness <br> about part time <br> and flexible <br> working <br> opportunities in <br> the department | 8.5 Develop case studies of <br> women and men who have <br> developed their careers while <br> working part time <br> (for example our case study <br> Lisa Hinton who has a term <br> time only contract and has <br> recently been promoted to a <br> Grade 9 research post) | Spring 2018 | There has been an increase in <br> staff requests for part time <br> work but free text comments <br> from our department survey <br> suggest some people want to <br> work part-time but are <br> concerned, or unsure, about <br> the potential effect on their <br> working life. | Maintain the low proportion <br> (<2.5\%) of people who report <br> feeling discouraged from <br> working part-time in the next <br> department survey. |

## 8. Maintain department culture as inclusive, flexible and family friendly

| Objective | Actions for 2017-2022, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| :---: | :---: | :---: | :---: | :---: |
| Improve clarity about expectations for career progression while working part time or after career breaks | 8.6 Create guidelines for staff and their line managers explaining what part-time working entails and what to consider when deciding whether or not to become a part-time member of staff. These will be put on the intranet, advertised in the newsletter and added to the PDR template James Sheppard, Veronika Williams, Clare Wickings <br> We will work with the new EMCR and PDR working groups to develop guidelines on what should be expected from parttime workers in terms of rates of progression - these will be incorporated with the grade descriptors for PDRS. <br> James Sheppard, Veronika Williams, Kamal Mahtani, Clare Wickings | Summer 2017 to Autumn 2018 2018-2020 | In the 2016 staff survey, 46\% of people who have worked part time reported feeling that their career progression was hindered by working part-time. <br> It is to be expected that milestones and achievement required to gain promotion may take longer for part-time workers to achieve, and there is a need for more clarity about expectations to guide career development. | The proportion feeling that their career progression is being hindered (taking into account that progression may be slower) should be reduced to less to than $20 \%$ of part time workers by the department survey in 2020. |

## 8. Maintain department culture as inclusive, flexible and family friendly

| Objective | Actions for 2017 - 2022, (and <br> person/position responsible) | Timescale <br> (start/end date) | Justification | Success measure |
| :--- | :--- | :--- | :--- | :--- |
| Acknowledge and <br> reduce the impact <br> of commuting on <br> department staff | 8.7 Prepare and gather <br> information for commuters for <br> the intranet and induction <br> pack, including existing <br> information for flexible <br> working and some additional <br> and department specific <br> information such as <br> information on nearby parking <br> (costs, location etc.), <br> University car parking permits <br> and temporary parking that <br> can be booked in advance for a <br> short-term period of time. <br> Information will also be <br> provided about off peak <br> permits, car share schemes, <br> season tickets for public <br> transport and any discounts <br> for University Staff, as well as <br> accommodation for short or <br> long term stay. Commuters <br> WG lead | Oxford has again in 2017 <br> been identified as the least <br> affordable UK city. 62\% of <br> the staff travel more than <br> $>30$ minutes to work (Staff <br> Survey 2016). | By 2020 survey reduce by 5\% <br> (from 20\%) the proportion of <br> commuting women who say <br> that their commute would <br> 'discourage them from <br> working in the department in |  |
| the future' |  |  |  |  |

## 9. Ensure that all staff complete a useful and documented annual PDR

|  | Actions for 2017-2022, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| :---: | :---: | :---: | :---: | :---: |
| Improve adherence and perceived value of an annual PDR | 9.1 From 2017 we will move to undertaking PDR annually in April/May for all staff. We will provide flexibility for clinicians who would prefer a different time of year to enable their University PDR to inform their NHS appraisal. Responsible: <br> Richard Hobbs and Clare Wickings, supported by the department Senior Management Team A series of "case studies", available to read on the staff intranet page, of experiences of PDR (anonymised if preferred) Responsible: Melissa Stepney and Kamal Mahtani | April May 2017 onward. <br> Summer 2020 | NDPHCS policy is that every member of staff should have an annual PDR and all staff and line managers receive reminders to conduct the PDR and submit the paperwork. <br> Staff who have had a recent PDR report finding them useful - but our 2016 survey suggested that some staff were unsure whether they were entitled to have a PDR. By introducing a PDR month for all staff (with flexibility for clinical researchers who are required to have an NHS appraisal) we will consolidate the focus and ensure that every member of staff has an annual PDR | By the end of 2018 all employees to have completed their PDR and line managers to have submitted the paperwork to HR <br> At least 95\% of staff to rate their PDR as 'useful' on the 2020 survey |

## 9. Ensure that all staff complete a useful and documented annual PDR

|  | Actions for 2017-2022, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| :---: | :---: | :---: | :---: | :---: |
| Ensure staff conducting PDRs receive training and support to increase confidence in the value of the PDRs | 9.2 All line managers to complete PDR training via Oxford learning Institute Responsible: Senior Management Team led by Richard Hobbs and Clare Wickings <br> We will organise a peer learning set for staff who line manage to share good practice and improve PDR skills and confidence <br> MS/KM and OLI staff | March 2018 | In our 2016 survey, across a range of items, most line managers described themselves as 'quite confident' ( $63 \%$ of women, $45 \%$ of men) rather than 'very confident' ( $20 \%$ of women 45\% of men) in conducting PDRs, supporting staff and 57\% of women and 55\% of men reported ' quite confident' while $22 \%$ of women and $40 \%$ of men said they were 'very confident' in managing staff performance and giving feedback | In the 2018 survey confidence in ability to conduct PDRs to increase by $10 \%$ and by 2020 by $20 \%$ with no gender difference |


| 10. Beacon activity |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Objectives | Actions for 2017-2022, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| Help to demystify academic careers in science | 10.1 Launch an expansion to our womeninscience.ox.ac.uk website, based on digital video interviews with senior scientists to include women scientists in MPLS (maths physics and life sciences). <br> New interviews will expand the collection to 54 interviews which are copyrighted for use for training, research and publishing <br> Lead researcher Sara Ryan and BW Chair | Summer 2017 | Role models are important. The women in science interviews include rich detail, analysed and grouped in themes including 'deciding on a career in science', 'getting published' 'securing funding' ' having a family' flexible working and views on E\&D issues and Athena SWAN. | Increase the site visits from 2016 average of 700 per month to 800 per month in 2017 and 1000 per month for 2018 |

## 10. Beacon activity

## Objectives

Find out what matters to staff with disabilities and develop information and support resources

Actions for 2017-2022, (and person/position responsible)
10.2 We are currently developing a
website based on digital video interviews with university staff with a range of disabilities. The approach is similar to the womeninscience.ox.ac.uk project and will be launched in summer 2017

Drawing on analysis of the narrative interviews we will identify questionnaire items on experience of disability at work to include in future Divisional and University level surveys

Lead researcher Sara Ryan and BW Chair
$\left.\begin{array}{|l|l|l|}\hline \begin{array}{l}\text { Timescale } \\ \text { (start/end } \\ \text { date) }\end{array} & \begin{array}{l}\text { Justification }\end{array} & \text { Success measure }\end{array} \left\lvert\, \begin{array}{l}\text { Summer 2017 } \\ \text { The intersection of } \\ \text { disability with other } \\ \text { gender, sexuality and } \\ \text { ethnicity } \\ \text { contributes to different } \\ \text { experiences at work. }\end{array} \quad \begin{array}{l}\text { Incorporation of } \\ \text { questionnaire items } \\ \text { to reflect the issues } \\ \text { that matter to Oxford } \\ \text { staff with disabilities }\end{array}\right.\right\}$

| 10. Beacon activity |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Objectives | Actions for 2017-2022, (and person/position responsible) | Timescale (start/end date) | Justification | Success measure |
| Share good practice and contribute to institutional AS Actions | 10.3 Through membership of the MSD Athena SWAN committee, share progress on areas including <br> - PDRs <br> - Induction <br> - Support for students <br> - Department website profiles for all staff, all roles <br> BW chair ( member of MSD AS committee) | Summer 2017 onwards | A comparison between NDPCHS staff survey data and MSD data suggests that the good practice is more embedded in our department - and some of our actions will be adaptable or transferable to other departments (for example our maternity leave checklist) | Institutional uptake of resources and approaches developed in NDPCHS |

## Action plan for Nuffield Department of Primary Care Health Sciences Athena Silver Award November 2013: updated with achievements to 2017

## 1 Supporting and Advancing Women's Careers

1i To make the department a more attractive place for women at all levels to work and to progress their careers'

| Actions (and lead responsibility) for |  |  |
| :--- | :--- | :--- | :--- |
| $\mathbf{2 0 1 3}$ to $\mathbf{2 0 1 6}$ | Justification (in 2013) | Success measure |

1i To make the department a more attractive place for women at all levels to work and to progress their careers'

| Actions (and lead responsibility) for 2013 to 2016 | Justification (in 2013) | Success measure | 2017 update on 2013 actions |
| :---: | :---: | :---: | :---: |
| appropriate plans for returns from maternity leave. CW and line managers <br> Athena Swan progress reports on agenda for all department and senior team meetings Sue Ziebland <br> Continue to monitor applications staff appointments, fellowships, promotions and re-grading request results HR lead Clare Wickings <br> Continue to highlight grade structures and opportunities for career development in PDRs CW and all line managers <br> Review actions and achievements in January 2015 and set new actions as appropriate SAT <br> SEE ALSO next section on 'visibility' | represented at a senior level in the department <br> In our 2013 survey 13 people (9 women) disagreed with the statement 'I feel someone in the department takes an interest in my career' compared with 21 people in 2012: this shows an improvement but needs further actions. | in their career by 2016 <br> Autumn 2014 survey: at least $85 \%$ of women should be aware of the University's Springboard programme for women. | line manager. <br> We have maintained returners after maternity leave <br> $93 \%$ (93\% of women) of department staff reported in 2016 that they would recommend working in the department to a friend. <br> 93\% (95\% of women) reported that they feel integrated into their team. <br> MORE WORK TO DO 2016 survey: $24 \%$ overall (29 female and 10 male respondents) disagreed that someone in the department takes an interest in their career. This still does not meet our (ambitious) 100\% target. <br> In the 2016 survey only $64 \%$ of women survey respondents reported that they were aware of the Springboard programme. |

## 1ii Increase the visibility of women in the department

| Actions for 2013 to 2016 | Justification | Success measure |  |
| :---: | :---: | :---: | :---: |
| We will be proactive in encouraging women and non-clinical researchers to contribute items about their achievements on the department website Louise Locock and in the weekly bulletins Dawn Fraser <br> We will review, annually, images of men and women in the department and on the website (which newcomers to the department find useful). <br> Dawn Fraser <br> Review actions and achievements in January 2015 and set new actions as appropriate SAT | In our 2012 staff survey a third of research staff (and more women and non-clinical researchers) reported feeling that that their research was not valued within the department. <br> For some years we have had a weekly email bulletin that includes staff publications and other achievements in the department but we have noticed that women have sometimes been less likely than the men to announce their achievements. | Increase the percentage of women who feel that their research is valued in the department from 77\% in 2013 to $90 \%$ by 2015 <br> Increase the percentage of staff who think that women are well represented at senior level in the department from 51\% in 2013 to $65 \%$ by 2015 <br> All researchers should feel that they have opportunities to present their work in the department (currently $97 \%$ report this compared to $90 \%$ in 2012) | ACHIEVED <br> In 2016 the survey item had changed but results were encouraging: 2016 survey shows that 96\% (95\% women) feel their line manager values their research. <br> $68 \%$ of survey respondents now agree that 'women are well represented at senior levels in the department ${ }^{\prime}$ compared with $51 \%$ in 2013. <br> NEARLY THERE 2016 survey - 84\% (84\% of women) reported having the opportunity to present their work in the department. |

1iii To increase awareness of the contribution that women make to Primary Care Health Sciences

| Actions for 2013 to 2016 | Justification | Success measure |  |
| :---: | :---: | :---: | :---: |
| Professor Susan Jebb and Professor Sue Ziebland will present inaugural lectures in 2014 <br> We will continue to monitor attendance at seminars and the gender balance of presenters and chairs Susannah Fleming/Jenny Hirst <br> Individuals responsible for programmes of invited seminars and workshops will continue to make sure that (wherever feasible) equal numbers of women and men are invited to present. <br> The 2014 Ann McPherson memorial lecture will be presented by another leading woman. <br> Review actions and achievements in January 2015 and set new actions as appropriate SAT | There are relatively few senior women in the department. Role models are important and there are senior (clinical and non-clinical) women in other Universities, leading the Royal Colleges etc. | Ensure a balanced distribution of male and female speakers on seminar lists <br> Staff survey items on visibility and feeling valued for research | ACHIEVED <br> 2016-2015, 59\% of presenters were women. In 2016, 57\% were women. <br> As already acknowledged, $68 \%$ of survey respondents now agree that 'women are well represented at senior levels in the department' compared with $51 \%$ in 2013. <br> As already acknowledged, our 2016 survey shows that $96 \%$ (95\% women) feel their line manager values their research. <br> In 2014, 2015 and 2016 the annual Ann McPherson memorial lectures were presented by women. |

## 2. Department Culture

2i Develop a culture that respects and demonstrates the value of multi-disciplinary approaches and fosters co-operation between research groups

| Actions for 2013 to 2016 | Justification | Success measure |  |
| :---: | :---: | :---: | :---: |
| We will continue to develop seminar and workshop series that invite participation from across the department and university Susannah Fleming, Jenny Hirst <br> We will improve line management and appraisals through training for line managers. <br> SAT, Spring 2014 <br> We will establish peer learning sets for post docs and mid career researchers. Richard MacManus Spring 2014 <br> Review actions and achievements in January 2015 and set new actions as appropriate SAT | Primary care research is multidisciplinary by nature; clinical and non-clinical research staff are usually appointed for their particular specialist skills. They may not have had opportunities to work in multidisciplinary teams before joining us and may benefit considerably from learning from colleagues familiar with other methods and approaches. <br> The statistics group has been running a statistics clinic for several years; the Clinical Trials Unit started a similar clinic in 2012. | Repeat staff survey items eg on feeling valued within the department. <br> All line managers to have attended training by March 2015 <br> $60 \%$ of post doc researchers to regularly attend peer learning sets September 2014. | ACHIEVED <br> Feeling valued, as above <br> 2016 survey - 75\% of staff who supervise others know where to get training or support. <br> All grade 7 and 8 researchers attended peer learning sets during 2015-16. |

## 2ii Improve internal communication

| Actions for 2013 to 2016 | Justification | Success measure |  |
| :---: | :---: | :---: | :---: |
| We will gather views of the department Open meetings in the Spring meeting and through the 2014 staff survey Sue Ziebland <br> Continue to encourage contributions to the department weekly news and website from all sections of the department <br> Dawn Fraser and admin leads <br> Review actions and achievements in January 2015 and set new actions as appropriate. <br> SAT <br> Web pages to be checked once a month and information revised if necessary ongoing <br> Nicola Small and Clare Wickings | All department meetings, seminars and workshops are held between 10 am and 4 pm <br> At an Athena Swan meeting of approx 40 members of the department we found that no one thought that our department Open meetings worked very well now that the department has grown so much and is split over three sites <br> The SAT also felt there was a need to develop wider awareness, respect and interest in the work of the different research groups in the department | $85 \%$ of staff to report that the department website is their first port of call for information by the 2015 staff survey. <br> 90\% of staff to agree with the statement that 'I feel my views are listened to' by 2014 survey. | NEARLY ACHIEVED 2016 survey - 82\% of staff reported that the department web pages would be their first port of call for information. <br> MORE WORK TO DO 2014 survey $-77 \%$ of staff agree that they felt their views are listened to. This result remained unchanged in 2016. |

2iii Encourage a family friendly environment in the department and promotes this image on the website

| Actions for 2013 to 2016 | Justification | Success measure |  |
| :---: | :---: | :---: | :---: |
| A young families group will be set up in autumn 2014 to identify and resolve any issues relevant to those returning from parental leave. <br> Ulla Raisanen <br> Hold an annual open day in 2014 and 2015. <br> Review actions and achievements in January 2015 and set new actions as appropriate. SAT | The 2012 staff survey found that most people in the department have, or expect to have, a caring responsibility (mainly for children but significant numbers with adult caring). <br> The families group have found that there are many university and local resources but they are not well signposted in the department. <br> There appears to be enthusiasm and volunteers for buddying (55\%of all staff) and, especially for new colleagues and improved induction experience. <br> The annual open day in 2012 and 2013 has attracted a high staff involvement by researchers; an opportunity to learn about and share work between teams; children were made welcome and attended to see what parents do. | By the 2014 staff survey at least 90\% of staff should know where to find all the key information about support for families, caring responsibilities etc. | ACHIEVED <br> 2016 survey - 97\% of staff knew where to find all the key information about support for families, caring responsibilities and so forth. |

## 2iv To promote a culture that supports staff to maintain a work life balance

| Actions for 2013 to 2016 | Justification | Success measure |  |
| :---: | :---: | :---: | :---: |
| Continue to encourage staff to attend university courses on managing work life balance and arrange in house courses for staff. <br> Department admin/ SAT <br> Monitor uptake of part time working. HR leads <br> Review actions and achievements in January 2015 and set new actions as appropriate. SAT | In the 2012 survey we found that a sizeable minority (up to 37\%) thought that they were not managing their work life balance well and more than half of the department were worried about how they might manage in the future. <br> The department has supported many staff in flexible working, home working and term time working yet (as is appropriate) this support is not always very visible. The re-design of our department website and the inclusion of videos of staff in the 'working with us' section has given us an opportunity to make sure that people in the department are aware of the support that is available to them. | Reduce the \% of staff who report that they are not managing their work life balance by another 5\% in 2014 and 2015. | ACHIEVED <br> 2016 survey showed an improvement since 2012 with $16 \%$ (19\% of women) now reporting that they are not managing their work-life balance successfully at the moment. <br> MORE WORK TO DO 57\% (43\% of women) reported having concerns about how they will manage their worklife balance in the future. |

2v Recognise the value and contributions of part time staff and support career development for them

| Actions for 2013 to $\mathbf{2 0 1 6}$ | Justification | Success measure |  |
| :--- | :--- | :--- | :--- |
| This group achieved all of its action <br> points in 2012-13 and has thus been <br> (honorably!) disbanded. | In 2012 more than 2/3 of part time <br> staff report a reasonable workload <br> (comparable to full-time staff) and <br> manage their life-work balance <br> The SAT will monitor responses to part <br> time working and work life balance on <br> the 2014-16 surveys. | No specific actions or targets for <br> successfully at the moment (again <br> comparable to full-time staff). <br> However, free text comments show <br> that many part time staff feel they are <br> working beyond their paid hours and <br> that they are would like greater clarity <br> about how expectations: both in <br> terms of output (e.g. research papers) <br> and practicalities (e.g. availability for <br> meetings on 'off days'). |  |

## 2vi Encourage information sharing and peer support among DPhil students

## Actions for 2013 to 2016

Continue DPhil lunches and make them more regular. The original organizer has now finished her DPhil and so we need to identify a new volunteer to arrange these.
Deadline: Lunches are on-going. New lunch organiser will be identified before January 2014.

Peer review - We need to identify reasons why people have not taken up these opportunities and assess whether it is worth continuing with. We will discuss and promote 'Student Peers' during DPhil meeting and send flyer around again. We will carry out on-going assessment of its success and decide by Oct 2014 whether it is worth continuing. Abi Eccles

We would like to further improve the student information on departmental website. We will review the content for the 'Study with Us' page on the departmental website and make some suggestions Dawn Fraser

Expanding DPhil community to include interested members in of wider department. Abi Eccles

Review actions and achievements in January 2015 and set new actions as appropriate. SAT

Justification
The independent nature of the DPhil community can leave some students feeling isolated.

Students receiving stipend funding are often unsure about their entitlement to maternity/ paternity sickness and compassionate leave etc.

Students are often unsure what input to expect from their supervisors, their college and their department.

Expansion of community will support others in department considering applying for a DPhil, help make networks with wider department and improve the DPhil community (energy and numbers).

Success measure
The 2015 survey should indicate that students feel more supported and able to make effective use of their supervisors.

Maintain, or increase, attendance at student lunches.

Responses to survey questions about the availability of supervisors for meetings, feedback and career development should all be positive among the DPhil student group.

2013 actions update
ACHIEVED
2015/16 - 95\% of students reported that their supervisor is supportive.

2015/16 - 95\% of students agree their supervisor provides helpful feedback, and 84\% agreed their supervisor has an interest in their career; 100\% felt someone had an interest in their career.

## 3. Mentorship

3i Ensure that there is good awareness of existing mentorship schemes and establish a department scheme to suit the needs of all academic staff

| Actions for $\mathbf{2 0 1 3}$ to $\mathbf{2 0 1 6}$ | Justification | Success measure |
| :--- | :--- | :--- |
| Monitor PDR forms for notes of <br> discussion of mentoring and training as <br> mentors (HR). <br> $\mathbf{2 0 1 3}$ onwards | 2012 - Mentoring has been identified <br> as an important part of career <br> development for researchers. | Increase the number of women who <br> report having a mentor by 10\% by <br> end of year 1 of mentoring scheme. <br> (Sept 2014) |
| Helen Atherton, Kath Tucker, Daniela <br> Goncalves and Mentoring working <br> Group will: | The mentoring scheme was launched <br> in Sept 2013 and we expect to see an <br> improvement in the number of people <br> with mentors in the coming months. | Ensure that all staff who have <br> registered with the scheme have <br> received training by end of year 1 of <br> mentoring scheme (Sept 2014). |
| Review mentoring scheme in light of <br> staff questionnaire and first year uptake, <br> identify any changes required and <br> implement as necessary. <br> 2014-16 | The scheme requires monitoring and <br> iteration as it progresses. | Maintain high levels of staff <br> awareness of mentoring schemes <br> available as assessed in staff surveys <br> in 2014-16. |
| Create ongoing training schedule with <br> the University of Oxford Learning <br> Institute, another training session to be <br> scheduled in Jan 2014. |  |  |
| Host quarterly coffee mornings for staff <br> to provide information on the mentoring <br> scheme. Jan 2014 onwards. |  |  |
| Continue to increase the pool of <br> mentors, focusing on junior members of |  |  |

2013 actions update ACHIEVED
By the 2014 survey there was a 10\% increase in the numbers aware of mentoring schemes.

Training was provided in the department for all new mentors in 2014.

2016 survey - 36\% of staff have a mentor or have been offered one within the Dept.
$12 \%$ (10\% of women) of 2016 survey respondents said they were not aware of mentorship schemes available to them

| staff to encourage peer mentoring <br> relationships. Feb 2014 |  |  |
| :--- | :--- | :--- | :--- |
| Building on success of information |  |  |
| dissemination, broaden range of existing |  |  |
| mentoring schemes we advertise plus |  |  |
| other personal development schemes |  |  |
| that are relevant. June 2014 |  |  |

## 4. Induction, welcome and information working group

$4 i$ To make sure that all staff joining the department feel welcome and .....

| Actions for 2013 to 2016 | Justification | Success measure | 2013 actions update |
| :---: | :---: | :---: | :---: |
| The 2013 newcomers group will invite new members to a lunchtime get together in 6 months' time. <br> February, May 2014 <br> Sophie Pask <br> 2014: Open the newcomers' lunches and drinks to the Department to encourage networking. <br> In October/ November 2014 organising the lunches will be shared with the next intake of newcomers (and so on). <br> October 2014 <br> Review actions and achievements in January 2015 and set new actions as appropriate. <br> SAT | The recent expansion of the department and the split over 3 sites has made it more difficult for staff to be able to recognise and provide informal welcome to new colleagues. <br> The 2012 survey suggested that satisfaction with induction varied considerably by research group and site location. <br> Consultations by the working group suggest that inductions may be less successful because of the growth of the department, and the recent relocations (requiring a split site). <br> There also seems to be considerable variation between research groups in induction processes. | Continue to increase the percentage of recent recruits who report being satisfied with their induction to 95\% of new staff by 2015. | ACHIEVED <br> 2016 survey - 93\% (97\% of women) recruited in the previous two years reported that their team Induction was useful. |

4ii ....are quickly integrated ...

| Actions for 2013 to $\mathbf{2 0 1 6}$ | Justification | Success measure | 2013 actions update |
| :--- | :--- | :--- | :--- |
| Continue to bring old information up to <br> date, and add new information to the <br> website. | Inductions need to reach a common, <br> high, standard and not be dependent <br> on the particular research group or <br> line manager. | As above |  |
| Documentation to be produced <br> regarding departmental decision making. |  |  |  |
| Continue to ask newcomers asked for <br> suggestions for induction pack. |  |  |  |
| All line managers to encourage |  |  |  |
| networking and attendance to coffee |  |  |  |
| mornings. |  |  |  |
| Review actions and achievements in |  |  |  |
| January 2015 and set new actions as |  |  |  |
| appropriate. |  |  |  |
| SAT |  |  |  |

4iii ... and know where to find key information if and when they need it

| Actions for 2013 to 2016 | Justification | Success measure | 2013 actions update |
| :---: | :---: | :---: | :---: |
| Continue to collate and update resources on department website on a monthly basis <br> Dawn Fraser <br> Monitor internal and external hits on the website and intranet <br> 6 monthly Dawn Fraser <br> Review actions and achievements in January 2015 and set new actions as appropriate SAT | In our staff survey in 2012: between a third and half of staff members did not know where to find key information for example about training, re grading, codes of practice on harassment and bullying or sabbatical and study leave or career planning resources in the university | Continue to improve the proportion of staff who know where to find key information in staff surveys in 2014 and 2016 | ACHIEVED <br> 2016 survey - 94\% of staff agree that information is shared effectively through the department newsletter. <br> $82 \%$ ( $81 \%$ of women) of staff know where to find information about key policies and services. |

4iv Promote research staff membership of Oxford colleges

| Actions for 2013 to 2016 | Justification | Success measure | 2013 actions update |
| :---: | :---: | :---: | :---: |
| Promotion of internal website pages on college membership <br> Dec 2013 <br> Inclusion of college membership information in induction pack <br> Dec 2013 <br> Inclusion of college membership discussion on PDR <br> April 2014 <br> Investigate new opportunities for research staff to integrate with colleges. <br> Jan 2015 <br> Louise Locock, Susannah Fleming <br> Review actions and achievements in January 2015 and set new actions as appropriate SAT | While the department has little control over membership of Oxford colleges we can share information about different types of membership and support colleagues to apply when research fellowships are advertised <br> Membership of Oxford colleges within the department is highly gendered (58\% of men, but only $16 \%$ of women are members). <br> Currently, 44\% of non-members believe they are ineligible, with around a quarter not knowing how to apply, or never having considered applying | Reduce the proportion of staff who are not college members reporting that they do not know how to join or have not considered it to less than 15\% for each answer by 2014 <br> Increase the number of female staff who are members of colleges OR have chosen not to join a college to $30 \%$ by 2016 | NEARLY ACHIEVED 2016 survey - $18 \%$ of research staff do not know how to join a college; $17 \%$ have not considered it. <br> 2016 survey - $25 \%$ of women respondents have an affiliation with an Oxford college and another 4\% are not interested in a college affiliation at the moment. |

## 5. Clinical researchers' working group

## 5i Develop a department culture that respects and demonstrates the value of multi-disciplinary (including clinical) approaches to research and fosters cooperation between research groups

| Actions for 2013 to 2016 | Justification | Success measure |  |
| :---: | :---: | :---: | :---: |
| Update a database/register of healthcare professionals in the department containing details of each person's clinical and academic skills, means of contact. This could be accessed via the departmental intranet, and would include an 'opt out' option. <br> The clinical working group will monitor uptake/number of staff registering details and record number of individuals who have created a profile at 1 year as well as number of individuals sought for skills on a quarterly basis Dec 2014 <br> Clinical researchers joining the department will be offered the opportunity to add their details to the database as part of their induction process. <br> Clinical researchers (Kamal Mahtani, Marie-Lucie Gibbons) | The clinical staff in the department are mainly GPs and research nurses. <br> The clinical and research skills and interests of researchers are not always easy to identify when planning a grant application or other cross research group collaboration | To increase awareness and demonstrate utility of the database, researchers who develop collaborations and contacts as a result of consulting the database will be encouraged to make these known to the clinical researchers' working group leads, who will liaise with the departmental administrative team to raise awareness through departmental updates. <br> Uptake/number of staff registering details and record number of individuals who have created a profile at 1 year as well as number of individuals sought for skills on a quarterly basis 2014-16. | ACTION SUPERCEDED <br> It has been judged that the clinical researcher's database is no longer needed due to the detailed profile information available on the public facing website for every member of staff. |

5ii To provide support for dual clinical and academic continuing professional development, especially in relation to personal development plans and appraisals

| Actions for 2013 to 2016 | Justification | Success measure |  |
| :---: | :---: | :---: | :---: |
| Clinical researchers of intermediate seniority (e.g. qualified pre-doctoral clinicians and early postdoctoral clinicians) will complete a personal development review which they will adapt from the review template for senior academics on an individual basis. Dan Lasserson December 2014 <br> Review actions and achievements in January 2015 and set new actions as appropriate. SAT | In the 2012 staff survey only 43\% of clinical staff felt that their appraisals were adequate for their needs. <br> $40 \%$ of female clinical staff and $26 \%$ of male clinical staff did not feel that their PDRs were beneficial (half of clinical PDRs relate to clinical work which is determined by external agents). <br> $38 \%$ of female clinical staff and $16 \%$ of male clinical staff felt that there was no one in the department who took an interest in their career. | No members of staff should feel that there is no one in the department who takes an interest in their career. <br> Clearer guidance on preparation for appraisals. <br> Clearer direction with planning future clinical and academic goals. <br> Evidence of completed personal development reviews from clinical researchers of intermediate seniority. | MORE WORK TO DO <br> This was a (rightly) ambitious target, which we have not yet achieved. <br> 2015 survey 78\% (75\% women) reported that someone in the department takes an interest in their career. This does not meet our (over ambitious) 100\% target. <br> 2016 survey $95 \%$ of the academics who had had a recent PDR reported they had found it useful. |

## 5iii To review clinical mentorship for departmental research nurses in addition to usual line manager

| Actions for 2013 to 2016 | Justification | Success measure |  |
| :---: | :---: | :---: | :---: |
| Review the clinical line management of nursing staff in 12 months (October 2014). <br> Review actions and achievements in January 2015 and set new actions as appropriate SAT | In the 2012 staff survey more clinical women 8 (50\%) than men 3 (16\%) said that they would like to have a mentor. <br> 8 (50\%) women clinical staff think their line manager takes an interest in their career, (compared with 34 (76\%) of non-clinical women). | Reduce the number of staff reporting that they 'do not have a mentor but would like one' to less than $10 \%$ of women in department <br> *Re-evaluate need for clinical line manager for research nurses by conducting another focus group in 12 months. | ACHIEVED <br> In the 2016 survey, all of the clinical women who responded (although only 74\% of the clinical men) said that they were aware of the mentoring schemes available to them. <br> There were further discussions about the need for clinical line managers for nurses in 2015, which was felt to no longer be a requirement (related to the co-location of staff in the (then new) building. |

## 6. Non clinical researchers working group

| Actions for 2013 to 2016 | Justification | Success Measure | 2013 actions update |
| :---: | :---: | :---: | :---: |
| Continue to provide opportunities for NCRs to present their work in the department, in seminars and poster sessions Susannah Fleming, Jenny Hirst 2014-16 <br> Focus on research by non-clinical staff to be included in MSD newsletter Dawn Fraser <br> 2014-16 <br> Arrange talk on publicising research by media office. Dawn Fraser <br> June 2014 <br> Review actions and achievements in January 2015 and set new actions as appropriate SAT | Most of the research staff in the department are not from clinical backgrounds, but from a variety of research specialties including statistics, epidemiology, social sciences (anthropology, history, sociology, psychology) <br> Three quarters of members of the department described themselves as having a 'non-linear career path'. | Aim for at least $85 \%$ of women to feel their research is valued in the department by 2014 and for at least $60 \%$ to feel valued within the wider Medical Sciences Division by 2014 | ACHIEVED <br> The 2016 survey showed that over $90 \%$ ( $95 \%$ of women) respondents feel valued for the work they do in their team and $77 \%$ ( $79 \%$ of women) in the department. <br> 91\% (92\% of women) felt integrated into the department's social and networking. <br> MORE WORK TO DO <br> Only half of staff reported feeling valued within the wider Medical Sciences Division. |

## 6ii Improve PDR and annual appraisals for NCR staff

| Actions for 2013 to 2016 | Justification | Success measure | 2013 actions update |
| :---: | :---: | :---: | :---: |
| Continue a programme of annual PDRs for all staff. <br> Continue to implement updated PDR Clare Wickings <br> Training for PDRs to be attended by all line managers during 2014 <br> Review actions and achievements in January 2015 and set new actions as appropriate SAT | Progress has been made with PDRs, but it is felt that more improvements can be made. <br> The group has identified that experiences of PDRs vary considerably between groups and need to have core components. | All members of the department should feel that someone takes an interest in their career (no more than $10 \%$ of women to respond that no one does at 2014 staff survey). <br> PDRs should be thought beneficial by at least 75\% of staff by 2014 survey. | ACHIEVED <br> 2014 survey - 86\% of women felt that their manager/supervisor takes an interest in their career; <br> 2016 survey: $91 \%$ of respondents agree that their last PDR was useful. 96\% (95\% of women) reported that their manager valued their contributions; 89\% (87\% of women) reported getting helpful feedback from manager and 94\% (94\% of women) said they felt comfortable discussing training and development needs with their manager. |

## 6iii Improve opportunities for staff to supervise students

| Actions for 2013 to 2016 | Justification | Success measure | 2013 actions update |
| :---: | :---: | :---: | :---: |
| Arrange seminar on supervision and cosupervision opportunities within the department and MSD. <br> April 2014 <br> Develop information for the website on supervision opportunities. <br> June 2014 <br> Consider gender balance of supervisors for new DPhil students. <br> August 2014 / 2015 / 2016 <br> Susannah Fleming / Jennifer Hirst <br> Review actions and achievements in January 2015 and set new actions as appropriate. SAT | There is a gender disparity in who supervises students ( $42 \%$ of men, vs $14 \%$ of women) in the department. <br> Although the department has only a small number of DPhil students, limiting the opportunities for supervising these students, there are also opportunities to supervise students on courses elsewhere in the division, such as MSc dissertations, and final year undergraduate projects. | A proportionate number of men and women should be supervising students by 2016. | ACHIEVED <br> There are currently an equal number (17) of women and men supervising students. <br> In 2016-17 we have 28 students currently enrolled, of whom 19 have at least one female supervisor. <br> Fourteen doctoral students submitted within the last 5 years and of these, 6 had at least one female supervisor. |

## 7. Outreach

## 7.i To improve outreach to the community , including local state secondary and primary schools

| Actions for 2013 to 2016 | Justification | Success measure |  |
| :---: | :---: | :---: | :---: |
| Develop a strategy for outreach work including commitment from every research group to contribute activity in a local school during Academic year 2013-14. <br> Uptake from schools will be monitored. Make contact with all local Oxford state secondary schools and discuss options for contributing to eg PHSE lessons and debates about the role of health research. <br> June 2015 <br> Extend contacts to state primary schools and start a primary school programme about health research. June 2016 <br> We will share resources via Oxford Sparks that we find to be useful for schools and find 2 or 3 of us to provide biographies for their scientist sessions especially including women and anyone who has had a less conventional route into our work. <br> Sue Ziebland \& Richard McManus, Review actions and achievements in | Individuals and groups in the department have taken part in a wide range of outreach activities to promote public understanding of science (and science understanding of public); often this is ad hoc eg a member of staff who is delivering some microbiology sessions at her daughter's primary school. <br> This is rewarding for the researchers involved and has potential benefits for the community - especially if the outreach work involves women, younger and less conventional staff. | Contribution to the programmes from across the research groups (women and men, clinical and nonclinical researchers). <br> Feedback from teaching staff will be used to revise and develop the contributions. | ACTION SUPERCEDED <br> Our outreach activities have developed considerably since we wrote our 2013 Action Plan and the 'Outreach Group' is no longer needed now that the department has appointed a full time Communications Manager who has developed a department comms strategy and works closely with staff at all levels. We have also appointed a Public and Patient involvement lead who helps to engage the public in shaping our research activities. <br> The Communications manager also leads the |


| January 2015 and set new actions as <br> appropriate. SAT |  | transparency, <br> information sharing and <br> visibility Working Group. |
| :--- | :--- | :--- |


[^0]:    ${ }^{1}$ Pavel V. Ovseiko,Alison Chapple, Laurel D. Edmunds, Sue Ziebland. Advancing gender equality through the Athena SWAN Charter for Women in Science: an exploratory study of women's and men's perceptions Health Research Policy and Systems 2017 15:12

