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Powys Teaching
Health Board

**Powys Teaching
Health Board
Equality, Diversity &
Inclusion Annual Report
2023-2024**

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Foreword

In healthcare, equality isn't just a noble aspiration—it's a fundamental requirement. It's about ensuring that everyone, regardless of race, gender, age, disability, sexual orientation, or socioeconomic status, has equitable access to healthcare services. It's about creating an environment where all voices are heard and respected, where diversity is celebrated, and where everyone feels valued and supported.

We are proud of the progress we have made in an increasingly challenging environment; this report provides an overview, but only that, of the many hundreds of hours our dedicated staff have devoted to striving towards this goal.

I extend my sincere appreciation to everyone who has contributed to the work described in this report and to our ongoing dedication to equality. Together, we are creating a healthier, more inclusive future for all.

Hayley Thomas, CEO

As we present our Equality Annual Report, I'm proud to share the strides we've made toward building a healthcare system that values and respects every individual within our community. At Powys Teaching Health Board, we are committed to fostering an environment of equality, diversity, and inclusion in all aspects of our work.

This report reflects our dedication to ensuring that everyone, regardless of background or circumstance, receives the highest standard of care. It showcases our achievements and outlines our vision for the future. I'm particularly excited to announce the launch of our new Strategic Equality Plan (SEP) for 2024-2028, which will guide our efforts over the coming years to further embed equality and inclusion into our practices.

Our SEP and this report are a testament to our ongoing commitment to diversity and fairness. It represents a collaborative effort, reflecting the input of our staff, patients,

and community partners. With this plan, we aim to continue building a healthcare system where everyone feels valued, heard, and respected.

Debra Wood-Lawson
Executive Director of People and Culture and Board-level lead for Equality, Diversity and Inclusion

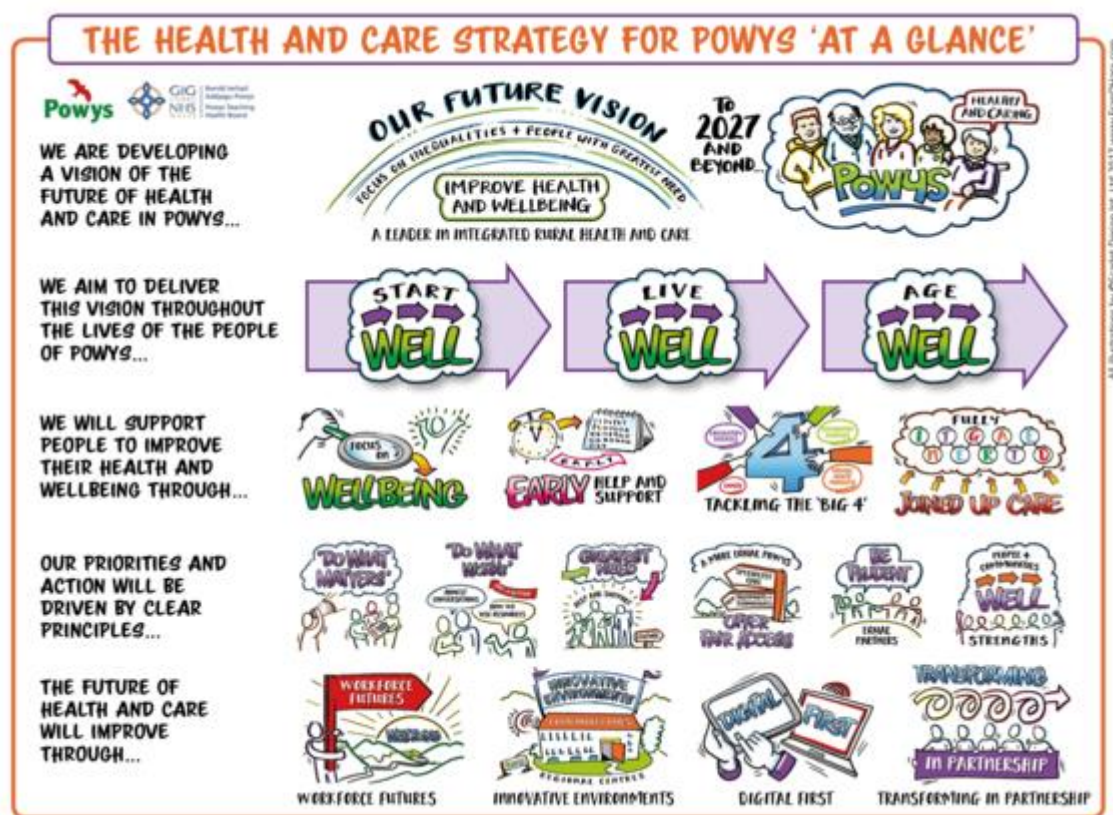
An Overview of 2023-24

Powys Teaching Health Board (PTHB) is committed to putting people at the centre of everything we do. Our vision is to create an organisational culture and environment that is accessible and inclusive for everyone. This includes our staff, those who receive care including their families and carers, as well as partners who work with us whether this is statutory organisations, Third sector partners and our communities.

Fairness & Equality represents one of the six core organisational values developed by our staff. Our values are the things that we believe are important in the way we live and work and represent the “guiding principles” behind our actions.

As a UK public sector organisation, we are also subject to the requirements set out in Public Sector Equality Duty and outlined in the Equality Act (2010) which, among other things, sets out our General Duty to reduce inequality of opportunity and foster good relations between groups of people.

Our [Strategic Equality Plan](#) (SEP) for 2020-2024 and objectives has been designed to sit alongside our 10-year Health and Care Strategy and our Integrated Medium Term Plan (IMTP) .



Each year, the Executive Lead for equality agrees an annual work plan to identify our priority actions for the year. Highlights from our work in 2023-24 include:

- Embedding the Equality for Managers' course into the management training, meaning that all PTHB managers now receive dedicated training on identifying discrimination and how to model good behaviour.
- Delivering Gender Awareness training to over 10% of the PTHB workforce, improving outcomes for patients of all genders including cisgender men and women.
- As part of our ongoing work under *Better Together* (formerly the Accelerated Sustainable Model), we have created new roles within Therapies which enable us to offer services which would formerly have been commissioned from neighbouring health boards/trusts.
- Achieving the Bronze Employer Recognition and Pride in Veterans standard from the MOD.
- Consulting on, drafting and publishing our new Strategic Equality Plan for 2024-2028.

This Annual Report is an overview of some of the health board's work to promote equality, diversity and inclusion throughout 2023-2024. It also outlines our intentions for the future to build upon the work already undertaken to continue to improve the health and wellbeing for individuals and reduce inequalities.

About the Powys Teaching Health Board Area

Powys Teaching Health Board occupies the same borders as the Powys County Council (PCC) area. At the time of the 2021 census there were 133,200 people living in Powys - a large, rural county of approximately 2000 square miles. This population density of 26 individuals per square kilometre is the lowest by far of Wales's local authority areas.

The rural nature of Powys means that whilst many services are provided locally through our community hospitals and services, there are no District General Hospitals within the health board area. This means that a significant proportion of secondary healthcare functions for Powys residents are commissioned from adjacent health boards, including over the border in England. A very significant proportion of PTHB's funding allocation is spent on commissioned services taking place outside of the health board, and the services that are offered directly are disproportionately concentrated in fields such as community care (compared to other Welsh health board areas).

A consequence of this is that the health board as an organisation is smaller than would be expected allowing for population alone, employing 2,522 staff (as of 31 March 2024), alongside volunteers. This total staff count represents fewer than a typical District General Hospital in other Welsh health boards. It reflects a very different mix of staff in terms of roles and specialisms, with a much greater proportion of allied healthcare professionals and correspondingly fewer medical and nursing staff. This needs to be borne in mind when comparing PTHB practice and performance with other health boards in Wales. Our operating model is different as it focuses on a mix of primary care, community / tertiary care and commissioned care. Due to the lack of centralised sites, the staff body is also quite disparate, and many staff live outside the county.

Partly as a response to our unique context, we have forged strong partnerships with colleagues in other sectors, such as Powys County Council, Dyfed-Powys Police and Powys Association of Voluntary Organisations (PAVO).

Information on how we intend to improve services for the people of Powys can be found on our website under the [Key Documents](#) section which includes copies of our annual reports, annual quality statements, strategies and plans.

Diversity within Powys

PTHB appreciates the diversity of our population and the need to treat one another with dignity and respect. Alongside our values we have specific legal obligations as a service provider and employer. In line with the Public

Sector Equality Duty, this report focuses on the health board's activity in relation to promoting equality and tackling discrimination for our patients and wider population on the basis on the relevant protected characteristics of Age, Disability, Pregnancy and Maternity, Race and Ethnicity, Religion and Belief, Sex, Sexual Orientation and Gender Reassignment.

In keeping with the area's rural character, the demographic profile of Powys' population is quite different to the Wales average for some figures:

- Age – 27.8% of the population of Powys are aged 65 and over. This is the highest of any local authority area in Wales, where the average proportion in this group is 21.3%.
- Disability – 18.1% identified as having a disability, lower than the Wales average of 21.1%. 7.6% described their disability as limiting their day-to-day activities 'a lot'; this figure was the joint lowest in Wales.
- Race – 94.9% of the population described their Ethnicity as White (Welsh, English, Scottish or British), rising to 97.7% when including all other White groups (including Irish, European and all Traveller groups); these figures are among the highest in Wales and correspondingly the proportion of the population identifying as Black, Asian or other non-white groups is one of the lowest in Wales at just 2.2%, compared to 6.2% for the whole of Wales.

A sparse population spread across a large rural land mass, means that PTHB faces many challenges when seeking to address inequality of access, inequality of opportunity and ultimately, tackling health inequalities for people who live within Powys. We have a particular challenge around understanding and addressing socio-economic inequalities and ensuring that that people in lower income brackets who are particularly feeling the impact of the current cost of living crisis, are able to access the services they need. This has been acknowledged by reports from [Public Health Wales](#) and [the Nuffield Trust](#). Our [SEP](#) includes more details about these challenges and outlines our aims and objectives to reduce inequality, which are aligned to our IMTP.

SEP Objectives 2020-2024

In the development of its SEP, PTHB agreed a set of Strategic Equality Objectives for 2020-2024 which include 3 broad long-term aims each with an overarching equality objective. These are:

Long-term Aim 1: Engagement

To ensure strong and progressive equality and human rights protections for everyone in Powys.

Equality Objective:

We will promote a positive attitude towards equality and diversity across our organisation. Our processes of continuous engagement to develop and deliver services will be informed by local needs, with the aim of improving access to healthcare services and reducing inequalities.

Long-term Aim 2: Service Delivery

The needs and rights of people who share protected characteristics are at the forefront of the design and delivery of our healthcare services.

Equality Objective:

We will work with our population, staff and partners to shape the design and delivery of our services.

Long-term Aim 3: Workforce

PTHB is a leading, exemplar, inclusive and diverse organisation and employer.

Equality Objective:

We will have an engaged workforce who have positive working relationships with their managers and colleagues in an environment where they feel safe and are supported to manage their own wellbeing.

The activity taking place during in 2022-23 and described in this plan has been mapped against each of these Equality objectives. As the period covered by these objectives is now coming to an end, we have developed a new SEP for the 2024-2028 period which we will report against in future Equality Annual Reports.

Activity during 2023-2024

The following activity has taken place during 2023-2024, and in each case the activity has been cross-referenced to one or more of the Long Term Aims/Equality Objectives outlined in our SEP (see above):

Communication of Key Messages, Information and Staff Development Sessions (Objectives 1 and 3)

PTHB has continued to promote positive messages internally and on social media relevant to the broader Equality agenda, as part of a regular Equality calendar to ensure that particular dates are recognised and promoted.

We have promoted a series of Equality-relevant events, development opportunities and messages for our staff such including, but not limited to:

- Celebrating Equality Week as NHS Wales with a range of lunchtime sessions (May 2023)
- Refugee Week Q&A session with Hamed Amiri, author of *The Boy with Two Hearts* (June 2023).
- Promoting the "I am not Hard to Reach" `#Privilege Cafe session on Engagement with "hard to reach" groups (June 2023)
- Powys Council Webinar on working with adults exiting prostitution (September 2023).
- Digital Skills Framework sessions aimed at developing the digital competence of older adults, including staff.
- Black History Month (October) & the #MyNameIs campaign
- International Pronouns Day (18th October)
- Sensory Loss Awareness Month (November)
- Transgender Awareness Week (November)
- LGBTQ+ History month: Virtual screening of "I Shall be Whiter than Snow", an award-winning film about the experience of LGBTQ+ patients made in collaboration with NHS Wales staff.
- BSL Week (18th-24th March)



Memorandum

To: All PTHB Staff
From: PTHB Safeguarding Team
Date: 14th August 2023
Subject: Exiting Prostitution Webinar
Target Audience: Any member of staff working with directly or indirectly with Adults.
Powys Local Authority are inviting PTHB Staff to join the next multi-agency event which has been co-designed by survivors and exited women of the sex industry. It aims to raise awareness of prostitution and commercial sexual exploitation of adult women. The session will share information about the Exiting Prostitution Toolkit and how this is currently being utilised in Powys to promote the safety of women.
The session is on 21st September 2023



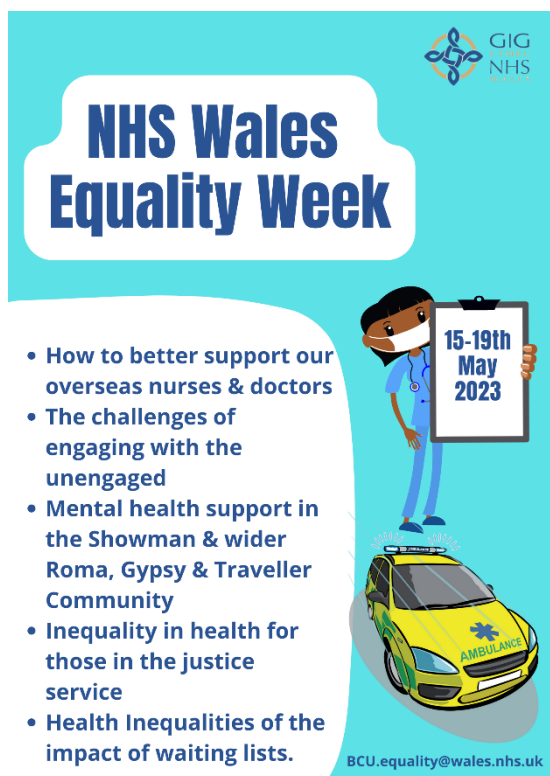
Rhagenwau ar Teams / Pronouns on Teams

PTHB - Workforce & OD
Equality and Welsh Language Officer

Isod mae cyfarwyddiadau ar sut i restru eich rhagenwau ar Teams. Mae hwn yn gyfle gwych ac rydym yn eic cynwysoldeb yr holl staff.

Yn gyntaf, cliciwch ar eich eicon ar ochr dde uchaf y sgrin ar Teams. Yna o'r rhestr cliciwch ar y tab sy'n cynnwys eich enw / e-bost. Yna fe welwch y botwm i newid eich rhagenwau. Ychwanegwch y rhagenwau sy'n gywir i chi'ch hun a chliciwch arbed.

Diolch i chi am gymryd yr amser i ychwanegu'r nodwedd hon.



NHS Wales Equality Week

15-19th May 2023

- How to better support our overseas nurses & doctors
- The challenges of engaging with the unengaged
- Mental health support in the Showman & wider Roma, Gypsy & Traveller Community
- Inequality in health for those in the justice service
- Health Inequalities of the impact of waiting lists.

BCU.equality@wales.nhs.uk



BSL WEEK
MARCH 18TH - 24TH 2024

WHAT'S ON?

- Monday 18th**
12pm - 1pm
An interpreter's experience working within Healthcare.
- Tuesday 19th**
12pm - 1pm
BSL Deaf Health Inequality in Wales.
- Wednesday 20th**
12pm - 1pm
"Deaf-Disabled or Linguistic-Minority?" - Redefining equality frameworks for Deaf people.
- Thursday 21st**
12pm - 1pm
"Why is a diverse workforce important?" - What you can do.
- Friday 22nd**
12pm - 1pm
An Introduction to BSL - Useful signs for working in Healthcare.

All talks will take place on MS Teams, please scan the individual QR code or search "BSL Week 2024" on the intranet to attend your desired talk. If you have any questions please email VUNHST.Equality&Diversity@wales.nhs.uk

These events have typically been held in collaboration with other organisations across NHS Wales, providing opportunity for staff to share experiences and network with their colleagues in other health boards. This is particularly important for a smaller organisation like PTHB.

Public Events and Engagement (Objective 1)

In addition to these online events Staff Members of the Health Board attended events across Powys throughout the year in person; these included the Ghurkha Parade in Brecon in July 2023 (a focal point for the local Nepalese community which is centred around the Ghurkha barracks there), as well as Pride events in Hay and Brecon.



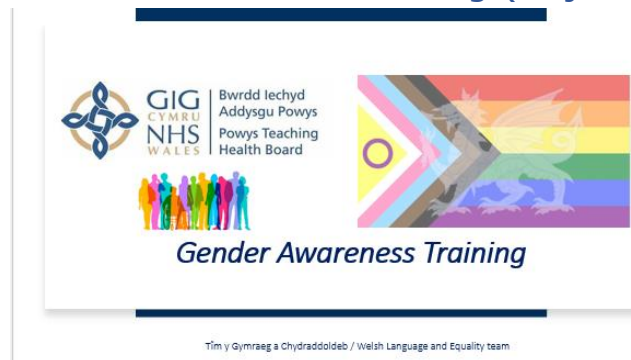
The Health Board believes that supporting these events is an important part of its place in the Powys community; our stands during the Pride events enabled us to promote the Health Board as an employer as well as promoting services which may not have been familiar to the public. However, participation at these events also formed part of the consultation process for our new Strategic Equality Plan 2024-25, with flyers distributed inviting members of the public to participate (see below).



Strategic Equality Plan 2024-28: Public Engagement and Consultation (Objective 1)

As part of the process of developing our new Strategic Equality Plan for 2024-28, PTHB participated in a region engagement and consultation exercise in collaboration with other Mid and West Wales public sector organisations, including Hywel Dda University Health Board, Dyfed-Powys Police, Mid & West Wales Fire & Rescue and Bannau Brycheiniog National Park, and others. This consultation exercise invited the public to share their views on inequality to help organisations identify their priorities for the next five-year Strategic Equality Plan cycle. More details of this consultation exercise are available as part of the SEP itself, published on the PTHB website.

Gender Awareness Training (Objectives 2 and 3)



The development and provision of a training course in this area was identified as a priority during 2021-22 following not only due to an increase in the number of patients whose gender identity differed from the sex they were assigned at birth, but also in response to issues

highlighted around the treatment of male and female patients accessing our services. Accordingly, a training session was developed in collaboration with the health board's LGBTQ+ staff network and incorporating the lived experience of members of LGBTQ+ communities. The resulting Gender Awareness Training has been extremely popular and was delivered to a total of 318 members of staff (12.6% of Health Board staff).

Equality for Managers Training (Objectives 2 and 3)

All Managers in PTHB now undergo mandatory Equality training as part of the Management Training Program. This two-hour session led by the PTHB Equality team provides staff who are new to PTHB or new to management with a range of skills in identifying workplace harassment and discrimination. A total of 34 staff undertook this training in 2022-23; however, as the training is now a routine part of this course the figure will rise significantly in coming years.

Pride in Veterans Standard (Objective 2 and 3)

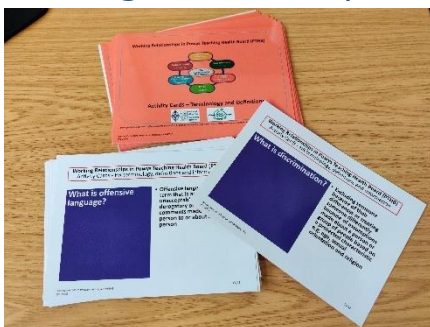


PTHB is proud to have achieved the Pride in Veterans standard from the MOD, a certification which recognises the positive impact of our policies and procedures as an employer on ex-armed forces personnel from LGBTQ+ communities. It also shows our commitment to ensure our services have awareness and understanding of the findings of the Independent Review into the service and experience of LGBT veterans who served prior to 2000, and the impact that both serving during this time and the publication of the review may have had on them.

PTHB have also been awarded the Bronze Employer Recognition Scheme, again from the MOD. This certificate recognises positive impact of our policies and procedures as an employer on ex-armed forces personnel, current serving personal and their families. This is to help both the transition from the forces into civilian life with guaranteed interviews as well as supporting those who wish to service in a reservist role or require support whilst partners are service away from home.

These awards provide evidence of our duty of due regard with respect to the Armed Forces Covenant that we are looking after those who have and do service to protect our county to the best of our ability. PTHB is hoping to improve on both awards over the next few years.

Working Relationships in Powys Teaching Health Board (Objective 3)



As part of our ongoing commitment to promoting good management practice, manager managers across the health board have been distributed a pack of activity cards to stimulate professional discussion of issues such as workplace discrimination and inclusive language alongside other areas of professional practice.

Health Disability Activity Pathway (Objective 2)

PTHB has continued to promote positive messages internally and on social media relevant to the broader Equality agenda, as part of a regular Equality calendar to ensure that particular dates are recognised and promoted.

Repatriation of Therapies Specialisms (Objective 2)

As part of our ongoing work under *Better Together* (formerly the Accelerated Sustainable Model), we have created new roles within Therapies such as a Consultant Clinical Psychologist for Neurological Conditions. These new roles enable us to offer services which would formerly have been commissioned from neighbouring health boards/trusts. This brings services closer to Powys residents, making them easier to access for all our patient with reduced travel and waiting times. The benefit is particularly likely to be felt by older individuals, those from poor socio-economic backgrounds and those with disabilities and their carers, as these are the patient groups most impacted by poor travel accessibility.

Primary & Community Care Academy (Objectives 2 and 3)

As part of the ongoing development of Primary Care services in the PTHB area, the PTHB Primary Care team has run a development program providing primary care staff with a range of professional



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a Chymunedol **Powys**

Primary & Community
Care Academy **Powys**

development opportunities. These have included training on Equality-related fields, such as Deaf Awareness, Autism Awareness, Dementia Awareness and Chaperoning as well as a range of other subjects, with over 30 individuals undertaking at least one Equality-related session on the program so far.

Digital Capability Framework (Objective 3)

In collaboration with Health Education Improvement Wales, PTHB has promoted the Digital Capability Framework to promote Digital Inclusion support staff with developing digital skills; this is of particular use to our older staff members who may not have had the opportunity to develop digital skills as part of their initial education.



Powys Council Libraries Collaboration (Objectives 2 and 3)

This is an exciting collaboration with Powys County Council whereby a range of public libraries across the county have been set up to facilitate the public to attend healthcare appointments carried out via AttendAnywhere or other online systems. This is a vitally important service supporting older people who may not use the Internet at home, or individuals who may not be reliably able to do so due to their domestic or financial situation.

Website Accessibility Improvements (Objectives 1 and 2)

A random audit by the Government Digital Service highlighted several issues relating to accessibility on the PTHB website. As part of the response to this audit an action plan was developed and carried out, completing several accessibility improvements such as updating the Standard Operating Procedure on document accessibility, improvements to the accessibility of Board papers, and rejecting documents prior to upload online which fail to meet a certain level of accessibility.

More than Just Words Framework (Objectives 1, 2 and 3)

Highlights of our Welsh Language development work include developing a Welsh language for managers' training course and the development of a new Welsh in Healthcare Strategy; full details of our work on *More than Just Words* and the Welsh Language Standards is detailed in the PTHB Welsh Language Standards Annual Report 2023-24.

Anti Racist Wales Action Plan: 2023-24 Update

The Welsh Government's [Anti-Racist Wales Action Plan](#) was launched in June 2022. It includes several actions which public bodies, including PTHB needs to undertake in support of the government's ambition for an Anti-Racist Wales.

During 2023-24 the Health Board carried out the following actions:

Priority Action 1: Leadership

- All board members now have personal objectives related to anti-racism, ensuring that they incorporate anti-racism into their roles.
- The board have formally appointed an Executive Equality Champion in the form of the Executive Director of People and Culture.
- The PTHB Board undertook a half-day development session on Equality, Diversity, Inclusion and the Welsh Language incorporating Anti-Racism and
- Via Staff and Patient Stories, the experiences of people of colour are being brought to the attention of the board; one staff story featured included a staff member describing their experiences of racism in the Welsh NHS.

Priority Action 2: Workforce

- We have incorporated learning around Anti-Racism into the PTHB Equality for Managers Training program, including sections on microaggressions and an explanation of how Anti-Racism differs from other approaches to inequality. This is empowering our managers to adopt an anti-racist approach to their own professional practice.

Priority Action 3: Data

- Through a targeted information campaign, we have worked hard to encourage staff completion of Equality data, including ethnicity, on ESR. This effort has borne fruit, with Ethnicity data now available for 90.2% of our staff as of March 31st 2024, an increase from 86% from the previous year. The number of staff from non-White ethnic groups in our statistics has risen disproportionately, suggesting that these groups were less likely to have completed their Ethnicity data than their white peers, although PTHB also underwent overseas recruitment exercises in 2023-24.
- We have carried out an analysis of Ethnicity in relation to staff pay (see Appendix B).

- We have contributed to the development of the Workforce Race Equality Standard; we will be reporting against this standard during 2024-25 via the appropriate channels and in the next Annual Report.

Priority Action 4: Access to Services

Maternity and Neonatal Support Program

As part of our Equality, Diversity and Inclusion progress within Powys maternity services, we have signed up and committed to the Diverse Cymru Cultural Competency scheme to assist us on this journey. We have formed an EDI improvement team in maternity which is led by our Interim Head of Midwifery and our Maternity & Neonatal SSP Champion. We have regular team meetings and one to one support with our link in Diverse Cymru to develop our cultural competencies action plan. Later in the year, Diverse Cymru are providing us with 2 face to face training days for staff. Diverse Cymru have also presented at our Shire Meeting in February and informed us about the service they provide and the support they can offer us as part of this scheme.

We are currently focused on the following points as part of our action plan:

- Ensure we improve our maternity ethnicity data to have an accurate picture of our maternity population.
- A review of our Powys general ONS data to have an increased understanding of ethnicity, language and religion within our community.
- Review of our social media, information and leaflets to ensure inclusivity.
- Language line app has been installed on staff's phones and laptops to ensure we provide visual interpretation services.
- 5 members of our maternity workforce attended the RCM Wales St Davids Day conference on the 1st March – focused on inclusivity in maternity.
- Education - Diverse Cymru are providing us with 2 face to face sessions on EDI this year to increase staff awareness.
- Regularly linking with the local equality team within PTHB to progress our work and access any training/support that could be provided.
- Communication - Quarterly EDI Maternity Newsletter released with 'hot topic' areas to share good practice and EDI updates.
- Ensure we align with PTHB strategic equality plan 2024-2028.

Other

PTHB are awaiting further developments from the Welsh Government around other aspects of the Anti-Racist plan such as the Aspiring Board Members program and the Anti-Racist Education program.

Moving Forward: Priorities for 2024-25

Our new SEP outlines nine new strategic priorities for the next planning / reporting cycle:

1. As part of Better Together (formerly the Accelerated Sustainable Model), we will design and develop our services according to the principle of providing services as close as possible to people's homes, decentralising services, using online technologies and other approaches to avoid needing to send patients out of county where possible.
2. Work to address known health inequalities within our population and take steps to identify and address others.
3. Improve access to our services and sites for individuals whose needs are different from others.
4. In accordance with the Better Together Model / Workforce Futures, ensure that Powys Teaching Healthboard is an employer of choice for individuals with diverse needs.
5. Improve the health board's ability to accommodate the religious needs of its staff and patients.
6. We will develop an organisational culture that is inclusive and supportive of all our staff and has a zero-tolerance approach to the harassment of staff by patients or others, including sexual harassment.
7. Ensure that our feedback mechanisms collect the views of staff and patients of all groups.
8. Carry out the actions identified in the local PTHB Anti-Racist Action Plan.

Our initial intention as a Health Board is to focus on objectives 3 and 4 during 2023-24, however this is subject to change should new opportunities or challenges arise which cause us to prioritise other areas.

Further information

More information on Equality, Diversity and Inclusion at Powys Teaching health board can be obtained by contacting the team (powys.equalityandwelsh@wales.nhs.uk). Please also contact the team if you have any queries about individual activities touched on in this report.

Further information on the health board's broader initiatives and achievements throughout 2023-2024 can be found in the [Annual Reports](#) section on the health board's website.

For further information on the health board's OD Framework, please [contact the health board](#) and ask to speak to a member of the WOD team who will be able to assist you further.

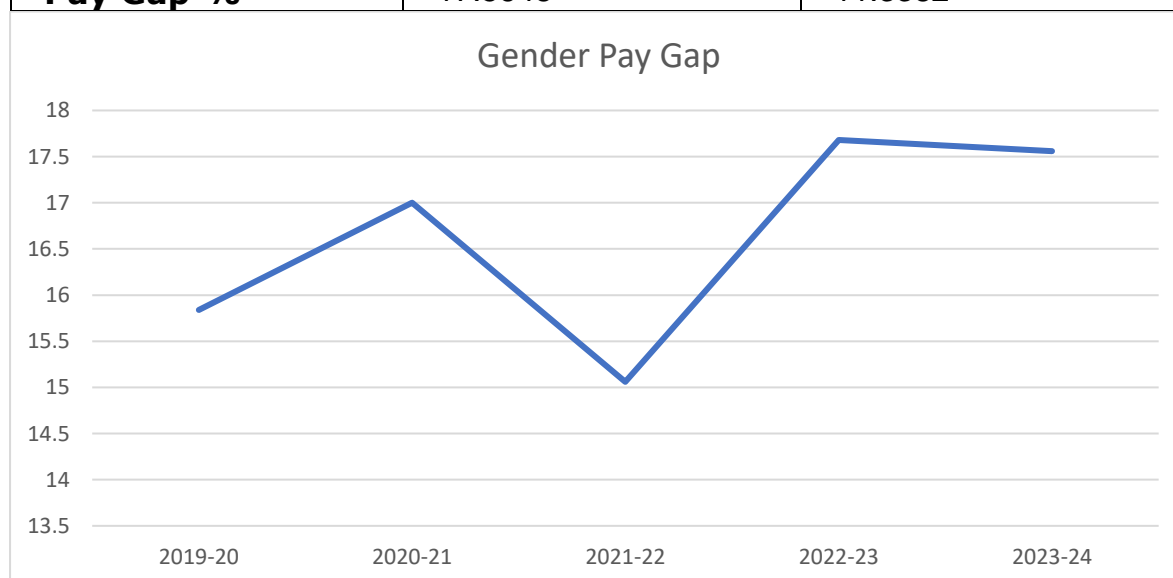
Appendix A: Gender Pay Gap Reporting & Analysis

Note: All the information in this section reflects the situation as of 31st March 2024.

As per UK legislation, as an organisation with over 250 employees PTHB is obliged to report on its Gender Pay Gap including the average and median hourly rates earned by men and women.

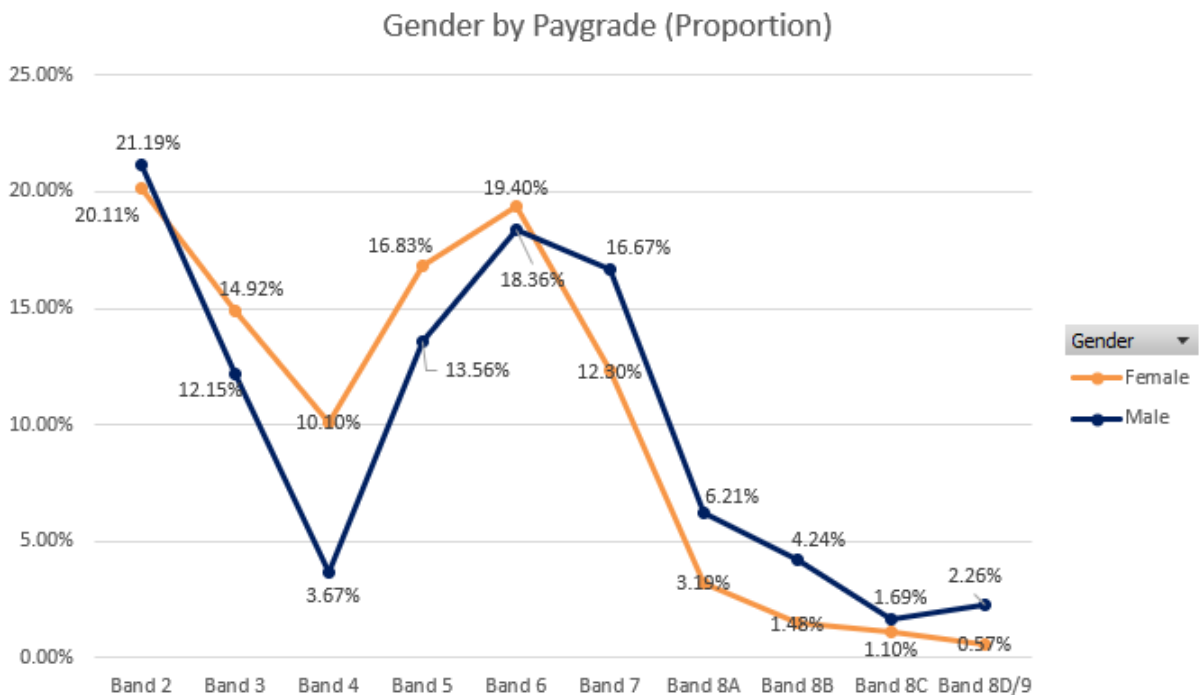
As of 31st March 2024, the Gender Pay Gap in Powys Teaching Health Board was as follows:

Gender	Avg. Hourly Rate	Median Hourly Rate
Male	22.5713	19.3878
Female	18.6067	17.1896
Difference	3.9646	2.1982
Pay Gap %	17.5648	11.3382



PTHB first reported on the Gender Pay Gap in 2019-20. Since then, the figures each year have been relatively similar. This year's figure of 17.5% is almost the same as last year (17.7%). Of our 2,522 staff, 2,137 are women (85%) and 385 are men (15%). This is very similar to other NHS Wales organisations; however, our gender pay gap of 17.5% is a little above the UK average (14.3% in 2022) but compares favourably to other NHS Wales organisations.

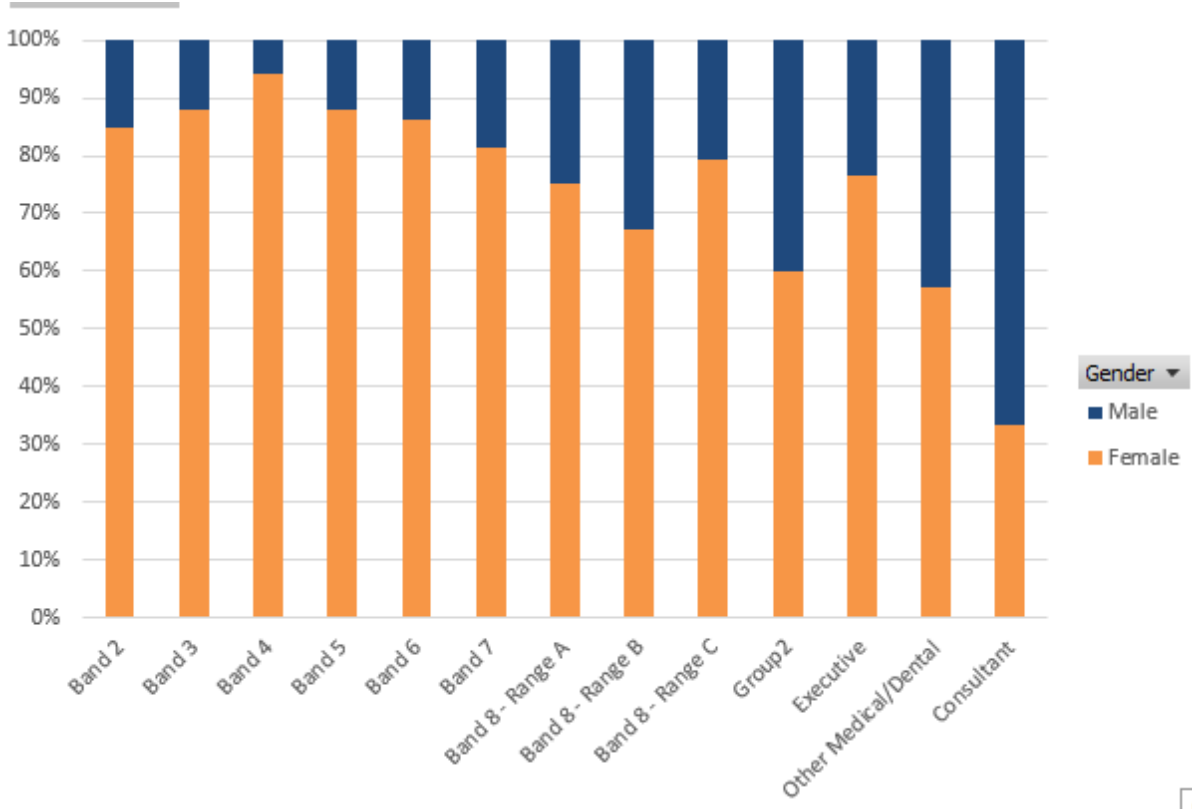
(note: due to small numbers, in the following graph Bands 8D and 9 have been merged)



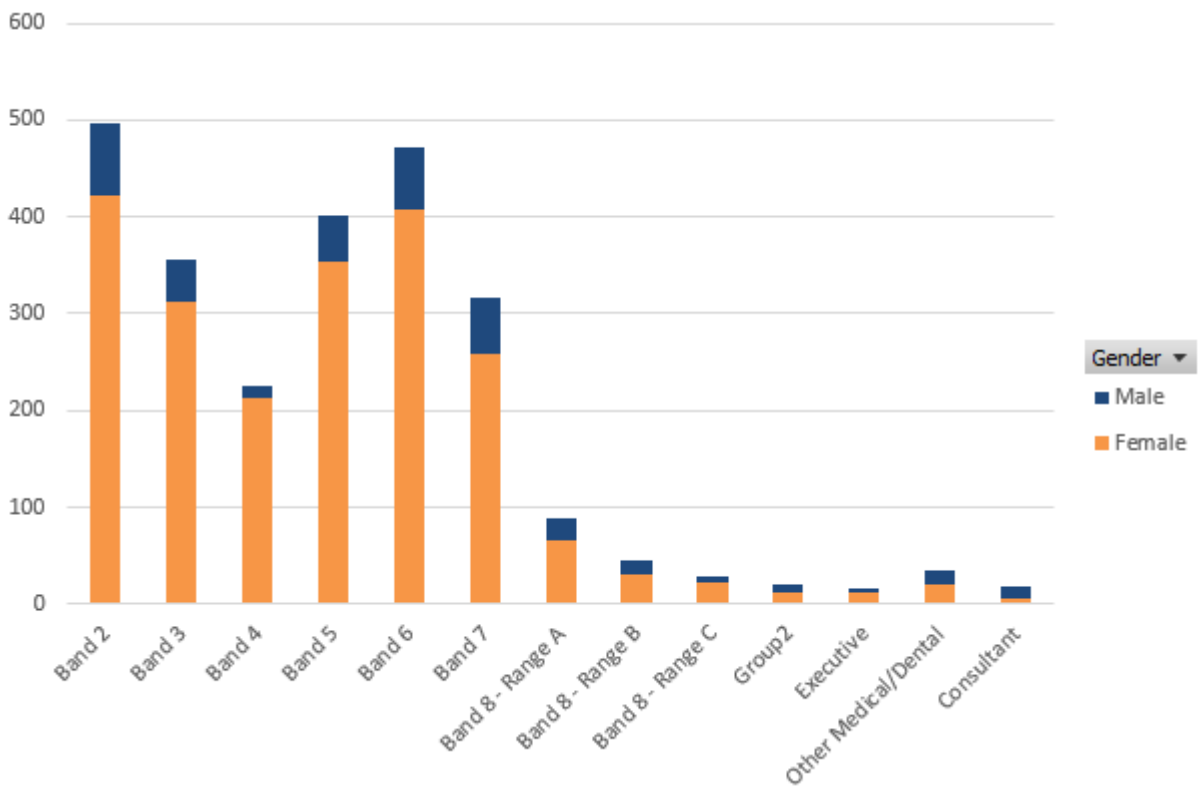
Graph A: the proportion of men and women at each AFC Pay Band, as a % of all men and women at PTHB. For example, 21.19% of men employed by the health board are in Band 2 and 12.3% of women are in Band 7.

Because the salaries and terms and conditions of almost all staff are dictated by Agenda for Change and other frameworks with strictly delineated roles and pay bands, there is no reason to suggest that Equal Pay (women being paid less than men to do the same work) is an issue in PTHB.

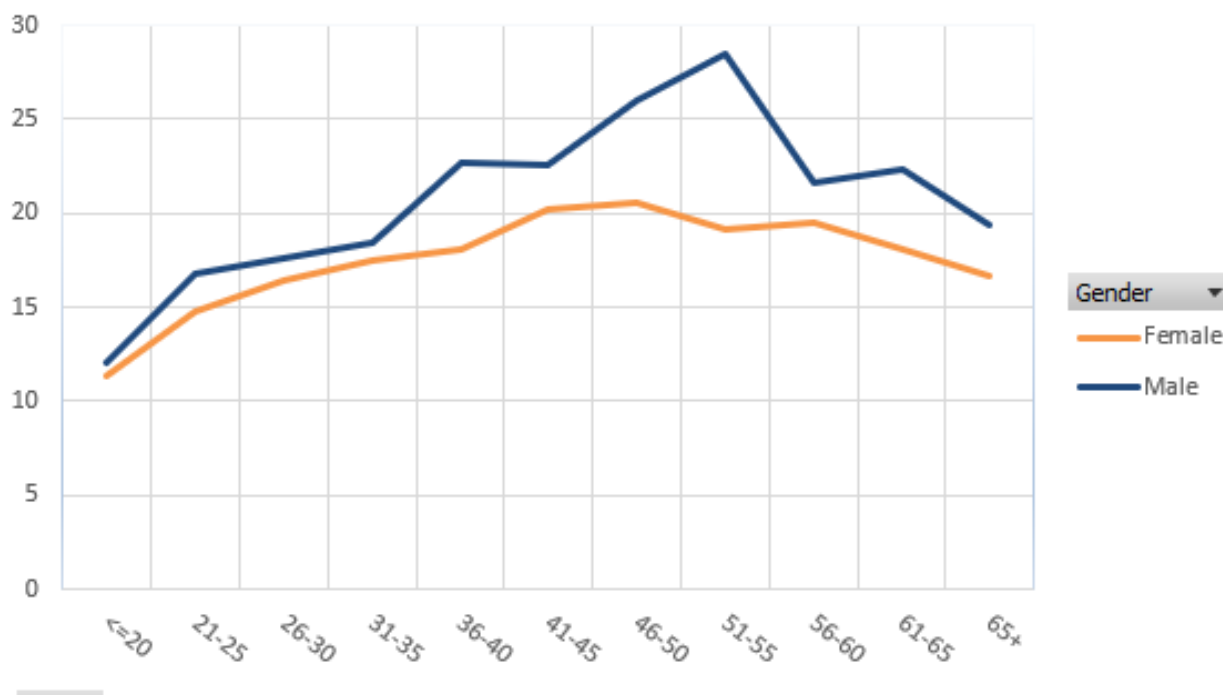
Instead, the gender pay gap is the consequence of the difference in the kind of roles occupied by men and women in the health board, as shown by graphs B & C below. Whilst women are well represented at all levels of the organisation, the fact that men are comparatively better represented at higher levels of the organisation causes the gender pay gap observed. Some of the less well-paid roles within the organisation are stereotypically associated with women e.g. healthcare support worker, catering assistant, domestic assistant. However, in the lowest pay band (Band 2), men are in fact proportionately more represented than women (Graph A).



Graph B: Gender by pay grade (proportions of total)



Graph C: Gender by pay grade (absolute numbers)



Graph D: Average hourly rate of pay for men and women, plotted by age.

PTHB collects data via the recruitment system *Trac* which shows the number of men and women applying for roles at PTHB, their relative success at being invited to interview and subsequently being appointed:

	% of Applications Invited to Interview	% of Interviewees successfully appointed.
Men	9.8%	21.6%
Women	16.0%	39.4%

This shows that a given female applicant for a role at PTHB is more likely to be invited to interview, and more likely to be successfully appointed at interview, than their male counterpart. This is counter-intuitive, given the gender pay gap, but mirrors findings in similar organisations; it may be evidence for a “confidence gap” (documented in [various sources](#)) which suggests men are more likely than women to apply for roles when they are less confident they will be successful.

Concluding Remarks about the PTHB Gender Pay Gap

- The fact that women are well represented at all levels of the organisation (Graph B e.g. over 70% of the executive, including the CEO) may suggest that a lack of senior female role models is unlikely to be a factor.
- The same fact, taken with the *Trac* data, may suggest that *systemic* sex discrimination at an *organisational* level is unlikely to be a cause

of the gender pay gap: the majority of interviewees and successfully appointed applicants are women as are the majority of interview panel members. Of course, this does not preclude sex discrimination from being a factor in individual cases.

- It is notable (Graph D) that the gender pay gap is negligible for the youngest staff groups (20-35), but jumps significantly afterwards, peaking at 51-55 before falling somewhat, though largely due to male income falling (presumably due to retirements).
- This may suggest that the gender pay gap would be expected to fall in the future. However, it is also possible that the above can be explained by differing approaches to career and other considerations (e.g. family commitments). The average age of a first time mother in the UK is now 30.9 (ONS) and a [CPP paper](#) found that women are significantly more likely than men to see their careers impacted by caring responsibilities.
- The gender pay gap of 17.7% is lower than other (generally larger) Welsh health boards. This contrast is likely to reflect the lower proportion of the PTHB workforce from medical professions.

Appendix B: Ethnicity Pay Reporting & Analysis

Note: All the information in this section reflects the situation as of 31st March 2024.

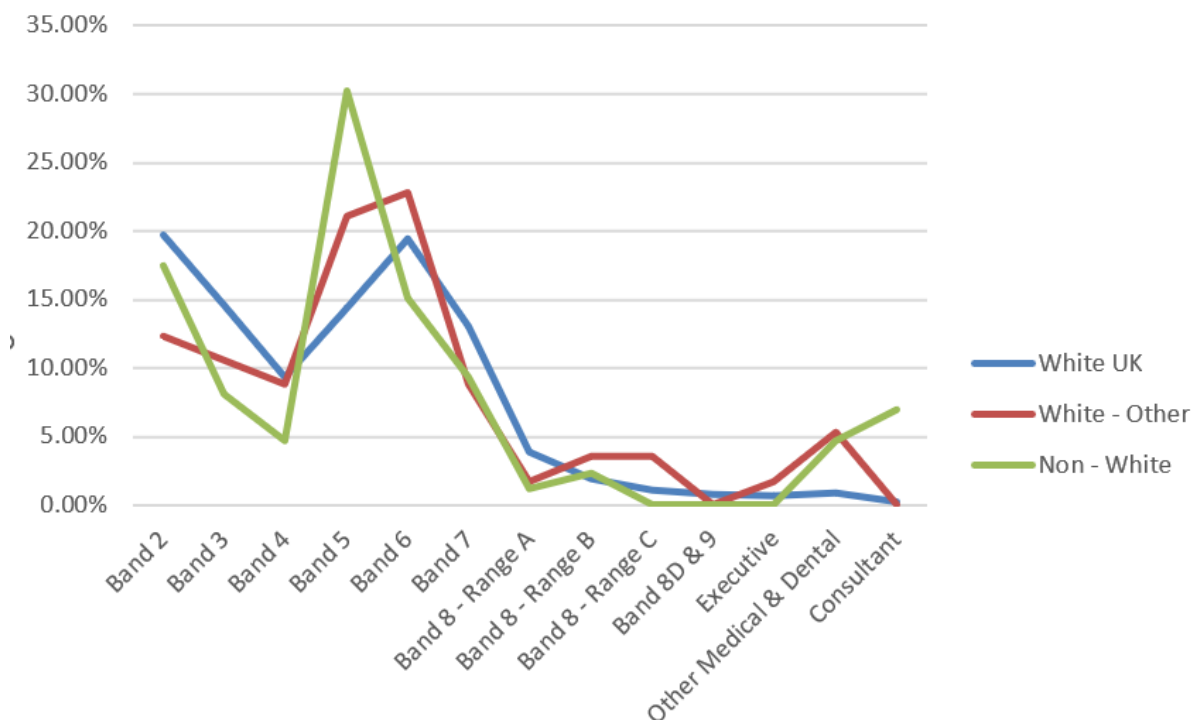
There is no statutory requirement to report on ethnicity and pay. However, PTHB has committed to reporting this voluntarily as per our local Anti-Racist Action Plan (see above).

Ethnicity	Avg. Hourly Rate
White - UK	18.84737307
Non - White	21.22246208
White - Other	21.37277064

Out of a total of 2,522 staff, 2,190 described their Ethnic Group as White and 86 as a non-White group; a further 246 are unknown (either because they have not filled in the form, or because they chose not to provide this information).

With the unknowns removed, this shows that **3.78%** of the staff body are from minority ethnic groups, with the remainder being white.

These groups break down by pay grade as follows:



Graph shows the proportion of White versus Minority Ethnic staff at each AFC Pay Band, as a % of the total of White or Minority Ethnic staff.

As shown in the above graph, minority ethnic staff are more likely than their white peers to be in Band 2 and Band 5, and significantly more likely to be in medical roles and consultants. This all likely reflects overseas

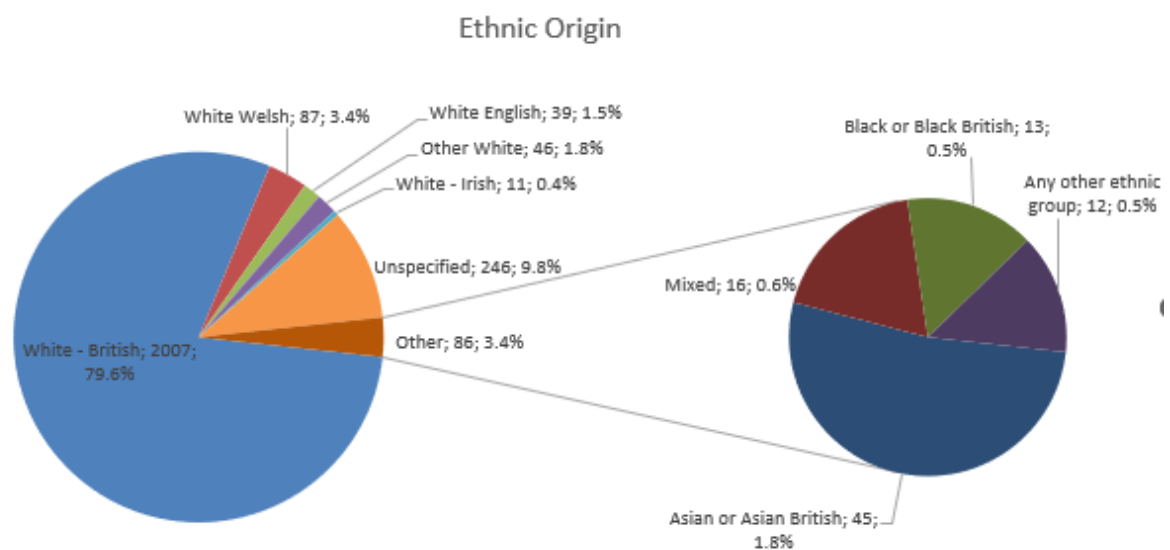
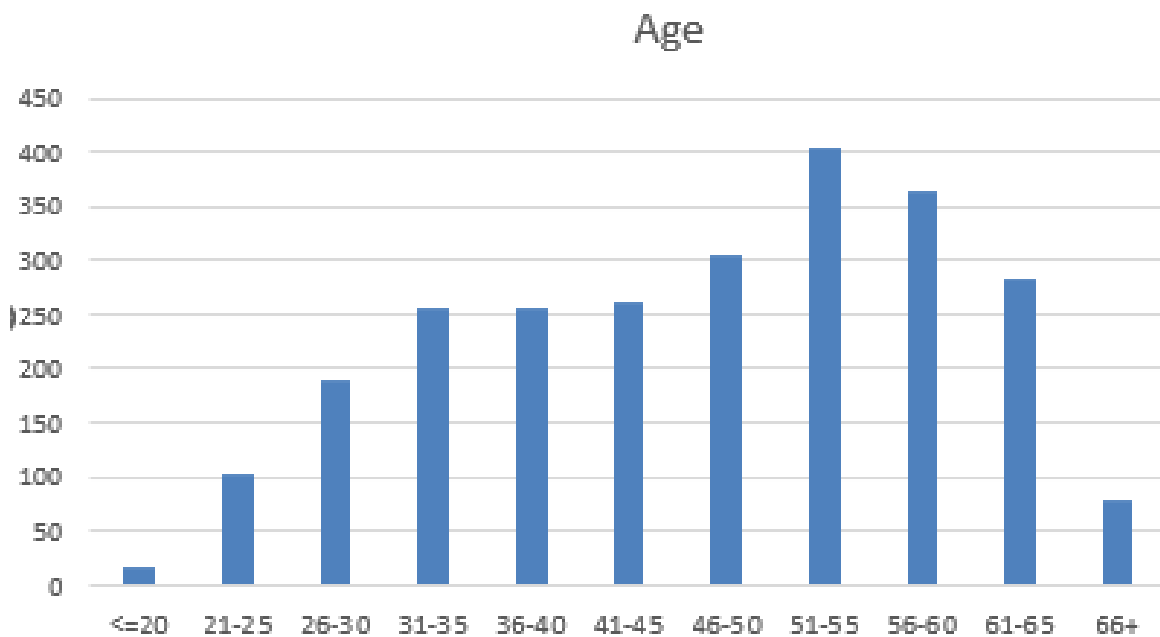
recruitment of nursing and medical staff and migration of others on care worker visas: removing these staff groups from the data produces a very similar pay profiles between different ethnicities, though it should be borne in mind that doing this reduces the non-white group to a very small number, with individuals having significant effects on statistics.

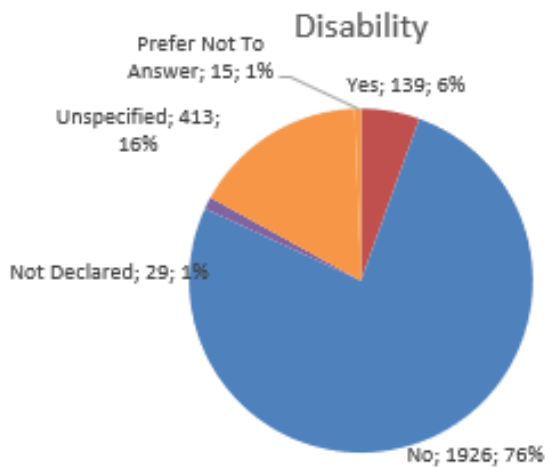
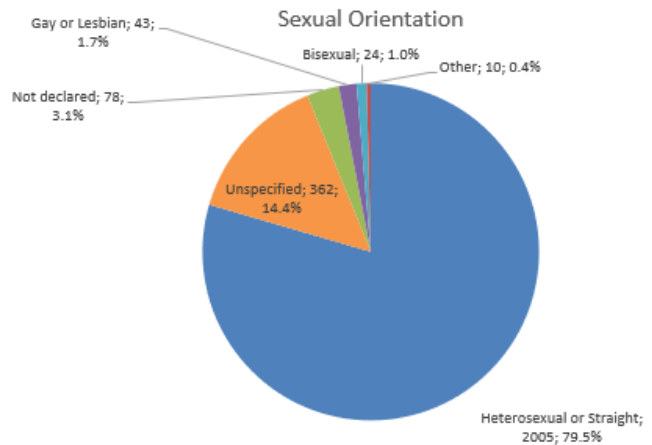
Appendix C: Workforce Data

Note: All the information in this section reflects the situation as of 31st March 2024.

Powys Teaching Health Board employs 2,522 substantive individual members of staff—a decrease of 16 since March 2023, ending an upwards trend over the last few years. In this section, these staff are broken down by Relevant Protected Characteristics (see above for Sex/Gender).

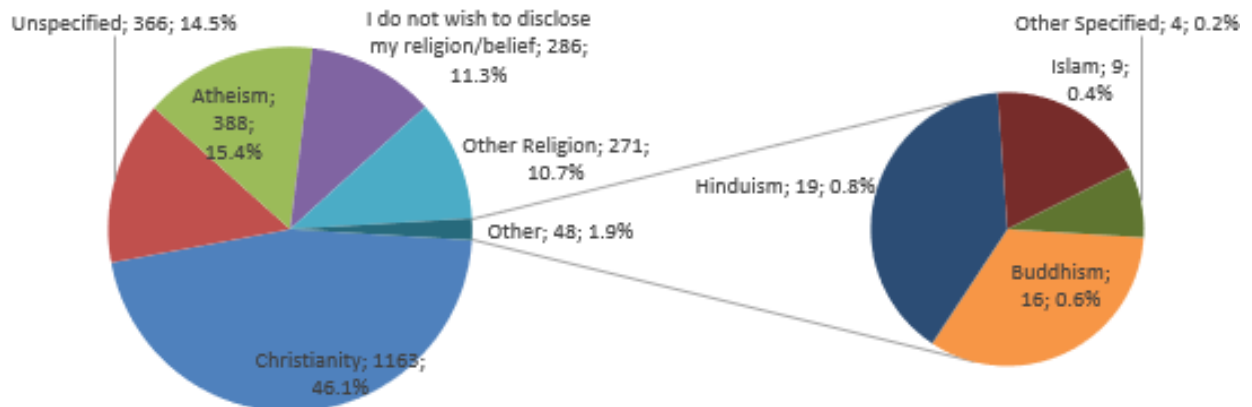
Some small groups may be merged or hidden in the following graphs to preserve anonymity.





In the above graphs, *Unspecified* means no information is held on that individual (they did not fill this element of the form); *Not declared* means that the individual was asked but declined to provide a response.

Religious Belief



In the above graph, *Unspecified* means that no information is held on that individual (they did not fill in that part of the form). *Other Religion* means that they chose to describe their religion as 'Other'. *Other (Specified)* means the individual chose a specific named religion from among the

options, but too few individuals chose these religion, and to preserve anonymity these groups have been merged.

Compared to last year, there has been a noticeable decrease in the number and percentage of “unspecified” returns in all categories:

Category	2022-23		2023-24	
Ethnic Origin	334	13.2%	246	9.8%
Disability	632	25%	413	16%
Sexual Orientation	516	20.3%	362	14.5%
Religious Belief	518	20.4%	366	14.5%

This is likely due to efforts during the year to increase data completion rates as part of the Anti-Racist action plan (although these efforts were targeted those whose ethnicity was unspecified it is likely these individuals would have had other data missing also and would then have filled all missing data fields).

Compared to 22-23, the PTHB workforce is slightly younger. The numbers reporting the largest categories for each characteristic grew, but by less than smaller categories. Therefore, it could be said that the PTHB workforce is less likely to be white, heterosexual or Christian compared to one year ago.

Note on Data:

Powys Teaching Health Board uses the ESR system to collect and store this data, which does not hold data on Gender Reassignment or Pregnancy and Maternity. The data is also very likely influenced by the structure and limitations of the ESR system. For example, the ability to specify one’s Ethnicity as ‘White Welsh/English/Scottish’ is a comparatively recent addition; staff who have been in the organisation for a long time may not have been prompted with these options. This likely explains the significantly higher proportion identifying as ‘White British’ compared to the figures in other sources e.g., Census information.