



Department Application Silver Award



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		Actual
Word limit	13,000	13,000
<i>Recommended word count</i>		
1. Letter of endorsement	500	500
2. Description of the department	500	529
3. Self-assessment process	1,000	730
4. Picture of the department	2,000	2383
5. Supporting and advancing women's careers	7,000	7093
6. Case studies	1,500	1623
7. Further information	500	142

Name of institution	University of York and University of Hull	
Department	Hull York Medical School	
Focus of department	STEMM	
Date of application	April 2019	
Award Level	Silver	
Institution Athena SWAN award	Date:	Level:
University of York	September 2015	Bronze
University of Hull	October 2018	Bronze
Contact for application Must be based in the department	Dr Victoria Allgar (Athena SWAN Champion) Roxana Freeman (Athena SWAN Project Officer)	
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Departmental website	http://www.hyms.ac.uk/	

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Glossary of acronyms used in this report

ACF	Academic Clinical Fellow
AP	Action Plan
AS	Athena SWAN
ASWG	Athena SWAN Working Group
CCG	Clinical Commissioning Groups
CR	Clinical Researcher
CL	Clinical Lecturer
CSL	Clinical Senior Lecturer
CP	Clinical Professor
ECR	Early Career Researcher
ECU	Equality Challenge Unit
EDI	Equality, Diversity and Inclusion
EDIWG	Equality, Diversity and Inclusion Working Group
EDIC	Equality, Diversity and Inclusion Committee
EO	Executive Office
F	Female
FHS	Faculty of Health Sciences
HEE	Health Education England
HESA	Higher Education Statistics Agency
HR	Human Resources
HPEU	Health Profession Education Unit
HHTU	Hull Health Trials Unit
HYMS	Hull York Medical School
ICAHR	Institute for Clinical and Applied Health Research
IWD	International Women's Day
LM	Line managers
M	Male
MBBS	Bachelor of Medicine, Bachelor of Surgery
MB	Management Board
MD	Doctor of Medicine
MSAR	Medical School Annual Return
MSc	Master of Science
MSC	Medical Schools Council
NSS	National Student Survey
PCHPE	Postgraduate Certificate in Health Professional Education
PDR	Performance and Development Review
PG	Postgraduate
PGCME	Postgraduate Certificate in Medical Education
PGR	Postgraduate Research

PGT	Postgraduate Taught
PhD	Doctor of Philosophy
PI	Principal Investigator
REF	Research Excellence Framework
RO	Research Office
SAT	Self Assessment Team
SLT	Senior Leadership Team
SL	Senior Lecturer
TAP	Thesis Advisory Panel
TCS	Temperature Check Survey
T&R	Teaching and Research
WLAM	Workload Allocation Model
WP	Widening Participation
UG	Undergraduate

Icons used in this application:



Impact: Measureable improvement in gender equality resulting from our earlier actions within Athena SWAN



Beacon activity: Actions we have taken to disseminate good practice to others



Action: Concrete steps we will take in the future, motivated by the analysis in this report

Data used at the time of writing:

- Medical Schools Annual Return (MSAR) 2017/18 - <https://www.gmc-uk.org/education/reports-and-reviews/medical-school-reports>
- Higher Education Statistics Agency (HESA) 2017/18 - <https://www.hesa.ac.uk/data-and-analysis>.
- AdvanceHE, Equality in higher education: statistical report 2018 - <https://www.ecu.ac.uk/publications/equality-higher-education-statistical-report-2018>.
- Survey of Medical Clinical Academic Staffing Levels, Medical Schools Council 2018 - reports data at 31st July 2017 - <https://www.medschools.ac.uk/media/2491/msc-clinical-academic-survey-report-2018.pdf>.

Staff data represents the headcount of staff at 31st July each year.

Statistical tests were used to compare proportions between males and females, with $p < 0.05$ indicating statistical significance.

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.*



April 2018

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Dear Mr Greenwood-Lush

I am delighted to support this application for a Gold award and I confirm that the information presented in this application is an honest, accurate and true representation of the School.

As the School's previous Athena SWAN Champion, I led our successful applications for Bronze and Silver awards. I am also an external advocate of women's progression in medical schools through my role as co-chair of the Equality and Diversity Implementation Working Group of Medical Schools Council. Since my appointment as Dean in 2017, I have committed the School to funding a dedicated Athena SWAN Officer, appointed four Equality and Diversity Champions and set an annual budget to support our equality and diversity work.

The School has undergone significant cultural change since first engaging with Athena SWAN. Equality and Diversity, especially around gender, has simply become part of what we do. This doesn't mean we have addressed all the issues, and we are aware of the challenges ahead, but it does mean that we have taken the important step of embedding AS values fully into our Departmental culture, so that staff feel comfortable raising issues and have confidence they will be listened to.

Through the delivery of our actions, we have seen substantial improvement in the representation of women, particularly in senior academic positions. We have promoted two female staff to professor and made external appointments of a further three female professors since our Silver award in 2016, bringing our proportion of female professors to higher than the benchmark. This progress has been made possible by actively identifying those reaching the criteria for promotion and supporting them to apply. This approach has also accelerated the progression of lecturers to more senior roles. In addition, women are now highly visible in the School as academic leaders, chairing committees and leading both academic centres and PSS teams; thereby being role models to staff and students.

We hold high standard and inclusivity in equal regard for students, staff and partners. To empower our colleagues and set good role models for our students, we believe recognition and reward for staff contribution is an equally powerful drive as the passion for knowledge and patient care. To achieve this, we have hardwired the development and progression of all staff, including women in science, into the School's fabric and psyche.



Going forward, we will broaden the remit of our Athena SWAN SAT to become an Equality and Diversity and Inclusion Committee, which will assess equality issues in the school across all protected characteristics and take forward the Athena SWAN action plan.

I feel the responsibility of being a female Medical School Dean keenly; and while I am personally grateful to my role models (men and women) who facilitated my progression to this role without me experiencing gender bias, I am aware that for many female academics that is not the case. I want to lead a School where values of inclusivity, respect and empowering everyone to reach their potential are central to all we do.

Yours sincerely



Professor Una Macleod
Dean of HYMS

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.

Hull York Medical School, founded in 2003, is the joint medical school of the Universities of Hull (UoH) and York (UoY), 35 miles apart. Yorkshire and Humber is one of the most under-doctored regions with significant socio-economic deprivation and health inequalities.



At Hull, we sit within the Faculty of Health Sciences (FHS). Our Allam Medical Building (£28million Health Campus) gives medical students the opportunity to learn alongside other healthcare professionals. The Institute for Clinical and Applied Health Research (ICHR) houses our research groups and is receiving major investment in academic staff that will strengthen our research infrastructures.



Figure 1: Allam Medical Building, UoH



At York, we sit within the Faculty of Sciences. Being part of the School's research groups, our academic staff are also embedded in various host departments to maximize research potential. These are: Department of Biology (Gold, 2014), Psychology (Silver, 2016), Health Sciences (Bronze, 2015) and Archaeology (Bronze, 2018).



UNIVERSITY
of York

Figure 2: John Hughlings Jackson Building, UoY



Our Organizational Structure:

We align with our Universities' executive management structure (Figure 3) and academic governance (Figure 4). The Joint Board delegates the School's operational responsibility to the Dean, who chairs Management Board (MB). Athena SWAN (AS) is fully integrated into the School's decision-making structures, with the AS Champion on MB since 2013. For academic governance, our Board of Studies (BoS) reports to the Joint Senate Committee (JSC). The Senior Leadership Team (SLT) is gender balanced (Figure 5, 3F:2M).

Figure 3: Current executive management structure of the School with gender (* indicates on the Athena SWAN Self Assessment Team).

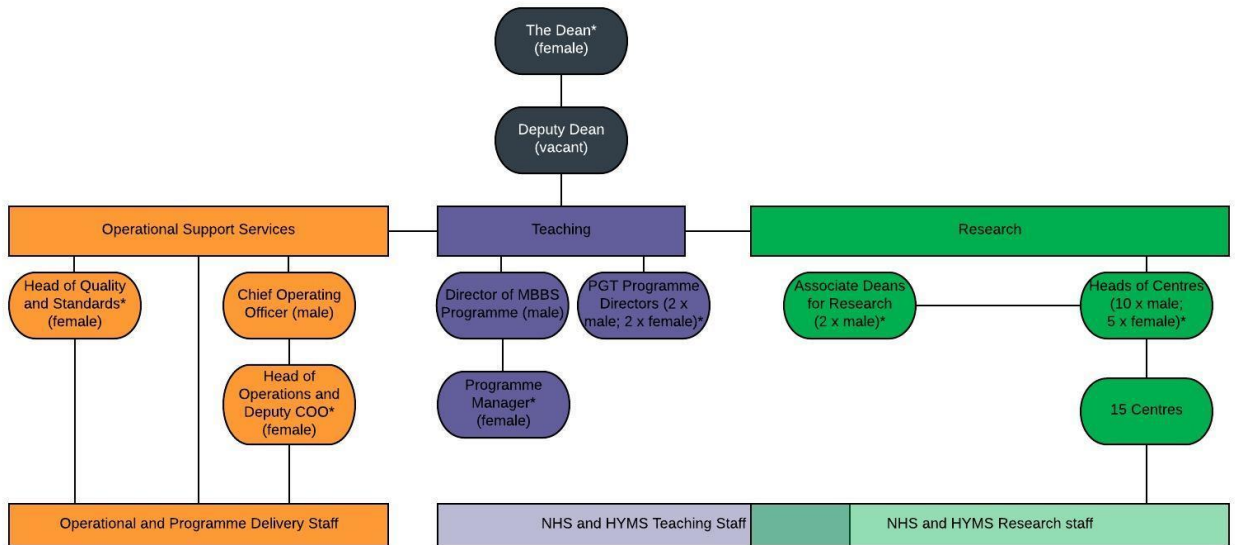


Figure 4: Current academic governance structure of the School

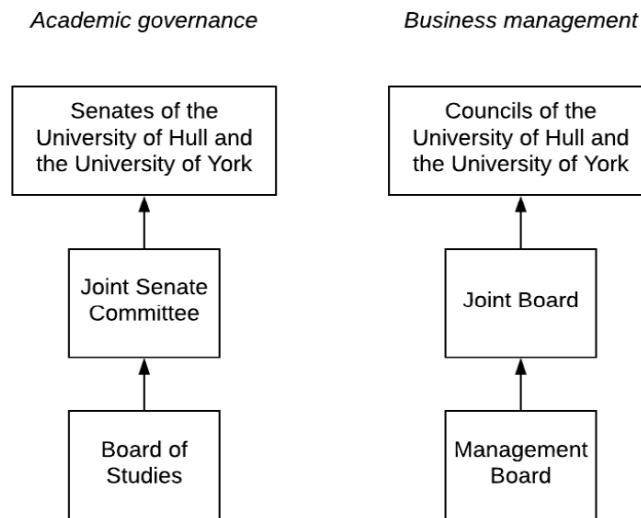


Figure 5: Senior Leadership Team



Our research:

Our unique partnership brings together the two Universities' expertise and offers a thriving environment for world-leading research. Our staff have a strong reputation – 85% of which is classed as 'world-leading' or 'internationally excellent' (REF 2014). All academic staff belong to one of the School's 13 research centres (Figure 6): 31%F Directors are female, which is higher than our Professorial staff profile (Figure 20).

85%

Figure 6: Research Centres with gender information



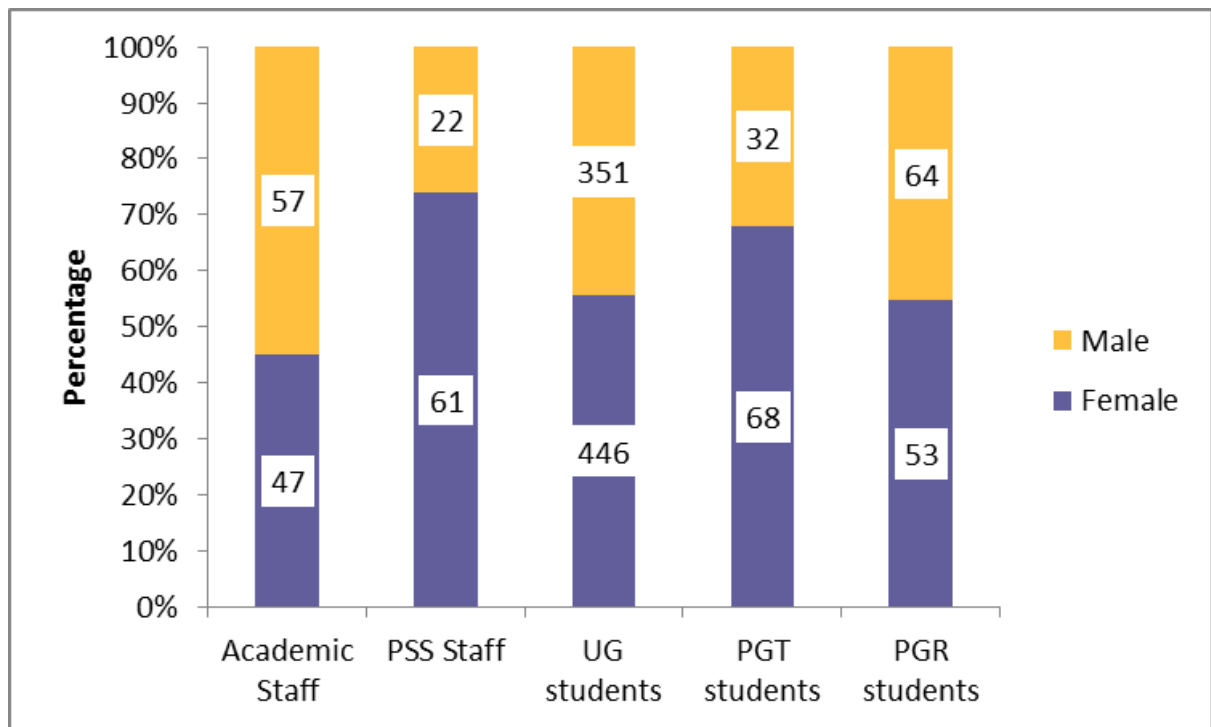
Staff and students:

Figure 7 shows our gender population.

Staff refer to their employed University’s policies and procedures (65% academic staff and 68% PSS staff employed by UoH). Many staff, particularly those who hold an academic and/or clinical role, have multiple responsibilities, including to other departments within the University and the NHS. Line management can be complex, with some staff having direct reports at Hull and York, so colleagues need to be aware of two Universities’ Human Resources (HR) approaches.

All students are allocated to a University (Hull or York) for the purposes of registration. To ensure fairness, parity, and consistency, we have a robust regulatory framework for our joint degree awards (policies, procedures, and Codes of Practice) for all students regardless of their university of registration. In 2017 we were awarded a 70% increase in our Bachelor of Medicine, Bachelor of Surgery (MBBS) degree numbers. Our previous annual cohort of 130 home students will increase to 220 by 2019/20; this was the largest allocation of additional medical student numbers awarded within the existing publicly funded sector.

Figure 7: Total number of staff and students in the School (2018)



Our Culture:

We listen to and value the experience of staff, as critical to delivering our vision and Strategy (2014) to “support the development and progression of all staff, including the careers of women in science to achieve the aims of Athena SWAN.” ‘All’ is the indispensable word here, and our staff and graduates live that vision, not just pay lip service to it.

WORD COUNT: 529

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

In 2014 Professor Macleod (then Deputy Dean) led our successful bid for a Bronze Award and appointed two Deputy Chairs for the Self-Assessment Team (SAT) to support the Action Plan implementation and Silver was awarded in 2016. Professor Macleod was appointed Dean and represents our School on the Medical Schools Council (MSC) (one of 7 female Deans out of 33 members).



In 2016, to increase PSS voice in post-May 2015 awards, two AS Champions were appointed: Academic and PSS Champion. They co-chair the SAT and provide representation from both staff groups.



Our SAT members (currently 18F:7M) represent academic and professional roles (see 3(iii) for Action to improve gender balance). Our School HR Advisers from each University are members (2F), the Dean (F and previous AS Champion) remains on the SAT, as do members of the Senior Management Team (2F). In 2017, the School appointed four Equality, Diversity and Inclusion (EDI) Champions (4F). They promote awareness of EDI in the day-to-day operation and to collaborate with the E&D Offices at both Universities and are now members of the SAT (4F). SAT members participate in university level AS groups to share good practice.












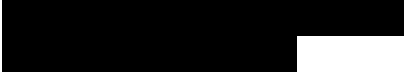








The AS Champions are members of the UK Medical Schools and Faculties Athena SWAN/EDI Leads group which exchange information and good practice around key topics.


Professor Macleod co-chairs (with the CEO) the Medical Schools Council Equality and Diversity Implementation Working Group, 2017-2020.

Table 1: Description of the Self-Assessment Team

Name (gender)	Job title	Expertise and role in SAT	[Redacted]
<p>Dr Victoria Allgar (F)</p> 	<p>Reader in Medical Statistics. Head of Centre for Health and Population Sciences</p>	<p>Co-Chair (Academic Lead)</p>	<p>[Redacted]</p>
<p>Joanna Micklethwaite (F)</p> 	<p>Project Officer</p>	<p>Co-Chair (Professional Support Staff lead)</p>	<p>[Redacted]</p>
<p>Professor Una Macleod (F)</p> 	<p>Dean of Hull York Medical School</p>	<p>Former Chair of Athena SWAN SAT.</p>	<p>[Redacted]</p>
<p>Ahmed Aburima (M)</p> 	<p>Research Fellow</p>	<p>Research Fellow</p>	<p>[Redacted]</p>
<p>[Redacted]</p>	<p>MBBS Undergraduate Year 3 student</p>	<p>MBBS Undergraduate</p>	<p>[Redacted]</p>
<p>[Redacted]</p>	<p>Postgraduate Research Student</p>	<p>Postgraduate Research Student</p>	<p>[Redacted]</p>

<p>Dr Peter Bazira (M)</p> 	<p>Senior Lecturer</p>	<p>Academic Lead for Widening Participation</p>	
<p>Nicki Collinson (F)</p> 	<p>Human Resources Manager</p>	<p>HR advisor for UoH</p>	
<p>Kit Fan (M)</p> 	<p>Academic Programmes Manager and strategic project manager for the expansion of the Medical School.</p>	<p>Lead for student experience working group Advisor on expansion</p>	
<p>Lisa Feasby</p> 	<p>Executive Office Manager</p>	<p>Lead for organisation and culture working group</p>	
<p>Professor Gabrielle Finn (F)</p> 	<p>Director of Health Professions Education Unit</p>	<p>EDI Champion Lead for career progression working group</p>	
<p>Laura Kate Foggett (F)</p>	<p>MBBS Undergraduate Year 4 student</p>	<p>MBBS Undergraduate</p>	
<p>Sarah Fordham (F)</p>	<p>MBBS Programme Manager</p>	<p>MBBS</p>	

			
Roxana Freeman (F) 	Athena SWAN Project Officer and HYMS Project Co-ordinator	Lead of Communications working group	
Dr Anna Hammond (F) 	Clinical Lecturer	EDI Champion Lead for organisation and culture working group	
Corrine Howie (F) 	Human Resources Manager	HR advisor for UoY	
Dr Liz Mitchell (F) 	Senior Lecturer	EDI Champion EDIWG Deputy Chair	
Alison Pettigrew (F) 	Head of Quality and Standards	Senior Leadership Team	

<p>Laura Sadofsky (F)</p> 	<p>Non-Clinical Lecturer</p>	<p>Represents non-clinical lecturers</p>	
<p>Dr Katherine Sanders (F)</p> 	<p>Lecturer</p>	<p>EDI Champion EDIWG Chair</p>	
<p>Paul Scott (M)</p> 	<p>E-Learning Manager</p>	<p>Data working group</p>	
<p>Nadine Smith (F)</p> 	<p>Head of Operations and Deputy Chief Operating Officer</p>	<p>Senior Leadership Team</p>	
<p>Professor Barry Wright (M)</p> 	<p>Director of Research Chair of Medical School Research Committee.</p>	<p>Previously Director of Student Support. Represents the Schools Research Directors</p>	

(ii) an account of the self-assessment process

Working groups: In 2016 we established Athena SWAN Working Groups (ASWGs) to support the full implementation of the AS Charter. Each has an Academic and PSS Lead and meet bi-monthly. While preparing this application, the ASWGs were assigned sections according to their expertise. The draft sections were edited by the AS Champions.

Table 2: Athena SWAN working groups

Working group	Academic lead	PSS lead
Data	██████████	██████████
Career Progression	██████████	██████████████████
Organisation and Culture	██████████████	██████████
Student Experience	██████████	██████████
Communication	██████████████████	

SAT Meetings: The SAT meets monthly, video-linked between the two Universities. Agendas are based around the updates from the ASWGs and the implementation of the Action Plan. We group meetings into themes to facilitate a larger body of work and increase engagement. The Dean and AS Champions meet bi-monthly to maintain strategic steer and to discuss new initiatives. The AS Champions sits on MB to respond to the standing item, which is to update and highlight any important School-wide issues.

Staff experience data from surveys and workshops: Bi-annual university surveys have formed an important part of collecting quantitative data. The latest at York was 2017 and 2018 at Hull (This was a temperature check, with a reduced set of questions). Consultation within the School is conducted via internal surveys, feedback forms, committees, working groups, focus groups, MB monthly meetings, and feedback at open staff meetings, the latter instigated as part of the Sliver Award Action Plan (SAAP). A School Temperature Check Survey (TCS) took place in January 2019, providing data for this application and evidence of impact. The results were shared at an open staff meeting.



Our continued focus on creating and maintaining an inclusive environment has seen a consistently high proportion of staff reporting they have not experienced gender unfairness - TCS showed a high proportion stating they have not experienced gender bias (98%F:97%M) or because of other protected characteristics (100%F:97%M).

Consultation: Feedback on this application was provided critical friends at two UK Medical Schools, UoY AS Coordinator, UoH Head of EDI, and two AS Champions in UoY Faculty of Science who have gained Silver and Gold awards (Psychology, Biology).

This application and Action Plan was discussed and approved by the School's MB, which will receive quarterly reports on delivery of actions. This submission and previous applications are shared on our website and presented at the open staff meetings.

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

In 2018, we established an Equality Diversity and Inclusion Working Group (EDIWG) to support our expansion of MBBS students. The AS Champions sits on this group, providing a link to the AS agenda.

Going forward, the SAT remit will broaden to form a new School EDI Committee (EDIC). The EDIC will:

- Report to MB, with a standing item on the MB agenda.
- Be chaired by a member of the Leadership team, which will provide a direct mechanism for EDI views and AS issues to feed into department strategy, operations-level decisions and processes.
- Have Terms of Reference that include the 10 key AS Charter Principles.
- Hold responsibility for monitoring and assessing progress on the AS Action Plan and consider further mechanisms for improvement.
- Ensure the Schools' workload model will recognise EDIC membership and all AS activities.

Action Point 1: Establish a School Equality, Diversity and Inclusion group.

WORD COUNT: 730



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

From 2019/20 we will offer a six-year Gateway MBBS, which is a Widening Participation (WP) initiative. On successful completion of the Gateway year, students will progress to our five-year MBBS [Action Point 2].



Table 3 shows no gendered patterns for the interview rate ($p=0.85$), attended by 98% of applicants shortlisted, nor offers from applications ($p=0.39$). A higher proportion of females were offered a place – not statistically significant ($p=0.11$).

Table 3: Applications and offers for MBBS with a Gateway Year

Entry year	Gender	Applications Received	Interviewed	Offers made	% applicants interviewed	% offered / applications	% offered / interviewed
2020	Female	100	31	23	31%	23%	74%
	Male	51	17	8	33%	16%	47%
	Total	151	48	31	32%	21%	65%
	% Female	66%	65%	74%			

Action Point 2: This is a new programme and we need to ensure the process is fair and we support students to progress, so we will **review the application process and the progression from the Gateway Year on to five year MBBS programme to ensure gender parity.**

Action Point 3: To encourage more male WP applicants, we will increase visibility of AS work to A-Level students through direct contact with schools/colleges prior to application as part of our WP strategy.



(ii) Numbers of undergraduate students by gender

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

MBBS: Current cohort

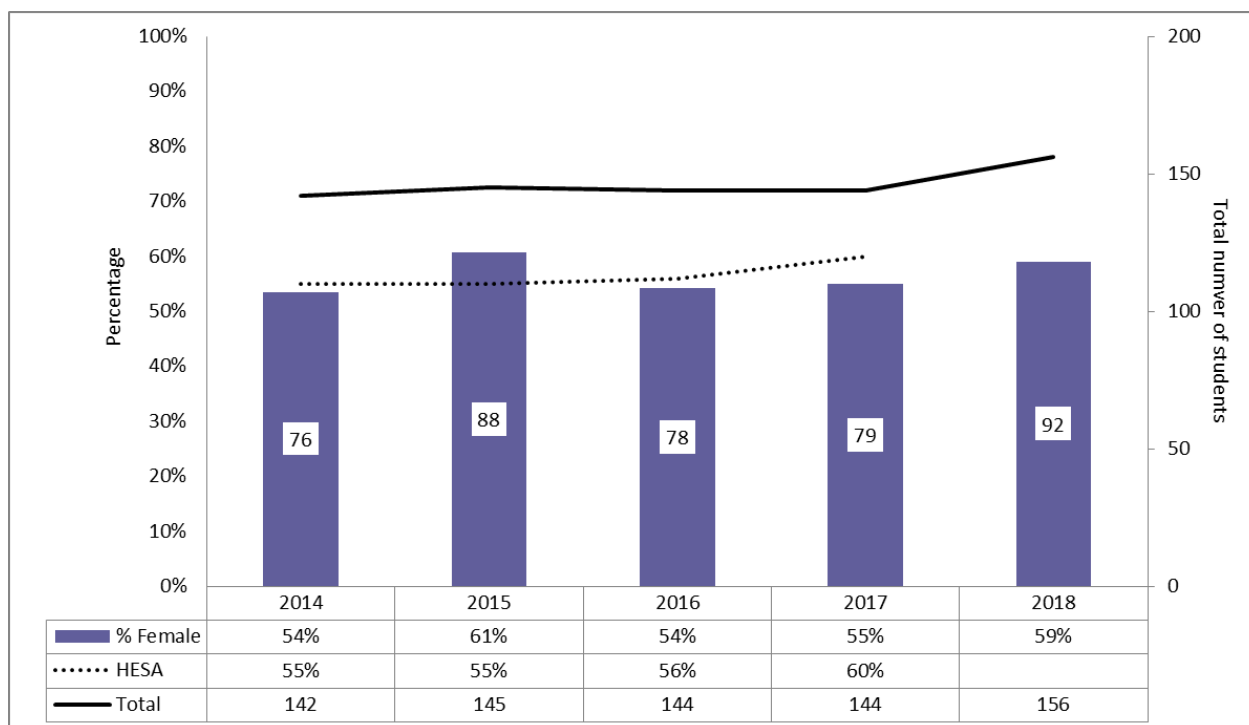
Our only UG programme, the 5-year MBBS, is full-time. Table 4 shows the cohort gender remains constant and around the MSAR sector average. The 2018 NSS shows high overall student satisfaction (78%).

Table 4: Total number of students on the 5-year MBBS programme

Academic year	Male	Female	Total	% Male	% Female	%F MSAR average
2014-15	343	389	732	47%	53%	-
2015-16	328	405	733	45%	55%	55%
2016-17	331	405	736	45%	55%	55%
2017-18	353	413	766	46%	54%	56%
2018-19	351	446	797	44%	56%	-

Females account for between 54% and 61% of the students enrolled (Figure 8), consistent with the HESA sector average.

Figure 8: MBBS enrolments



MBBS: Recruitment

- The proportion of female applicants has increased over time (peaking in 2019).
- The proportions of offers and enrolments vary. There are no clear gendered patterns.

Table 5: Applications, offers and enrolments for MBBS

Entry year	Gender	Applications Received	Offers made	Enrolments	% applicants made offers	% applicants enrolling	% offers enrolling
2014	Female	767	205	76	27%	10%	37%
	Male	661	179	66	27%	10%	37%
	%F	54%	53%	54%			
2015	Female	469	251	88	54%	19%	35%
	Male	413	216	57	52%	14%	26%
	%F	53%	54%	61%			
2016	Female	638	240	78	38%	12%	33%
	Male	496	190	66	38%	13%	35%
	%F	56%	56%	54%			
2017	Female	585	234	79	40%	14%	34%
	Male	374	170	65	45%	17%	38%
	%F	61%	58%	55%			
2018	Female	758	339	92	45%	12%	27%
	Male	471	186	64	39%	14%	34%
	%F	62%	65%	59%			
2019	Female	946	557		59%		
	Male	529	269		51%		
	%F	64%	67%				

We have a pool of 268 interviewers (50%M/50%F). During the selection day, applicants have two mini-interviews and it is embedded practice to ensure applicants are interviewed by male and females interviewers.

Figure 9: Interviewers at an MSSB interview day



We received an increase of 19% in applications for 2019 entry, which is in excess of the sector increase of 10%. Although there is increased competition in the sector, we are attractive to students. This demonstrates the impact of our improved recruitment strategies with AS principles embedded.

Action Point 3: Recognition of the continued increase in applications and a potential gender imbalance in the enrolments during for our expansion in student numbers in 2019, we will **maintain the gender balance in line with the sector averages.**

MBBS: Completions

Table 6 shows gender parity in graduates in the last 5 years and no gender difference in those graduating with honours (p=0.55).

Table 6: MBBS graduating numbers and with Honours.

Year Graduated	Graduating Numbers				Graduating with Honours				% Honours		
	Male	Female	Total	%F	Male	Female	Total	%F	%M	%F	%Total
2014	63	84	147	57%	10	9	19	47%	16%	11%	13%
2015	68	67	135	50%	4	5	9	56%	6%	7%	7%
2016	63	74	137	54%	10	7	17	41%	16%	9%	12%
2017	49	71	120	59%	4	8	12	67%	8%	11%	10%
2018	66	66	132	50%	10	10	20	50%	15%	15%	15%
All	286	380	666	57%	38	39	77	51%	13%	10%	12%

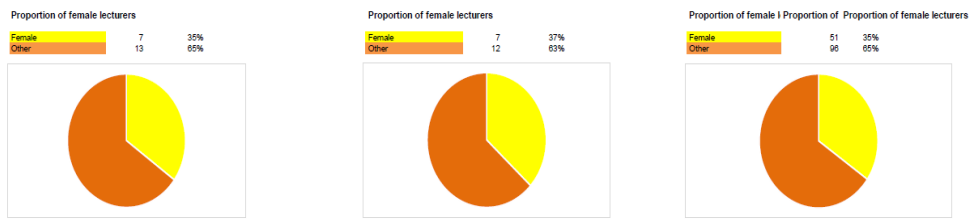
2016 Actions - applying a gender lens:

Plenary Lectures: We audited the gender of plenary lecturers - 26% (45/174) were female. Hence, students had less exposure to female lecturers than male. This was raised at MB. The MBBS Programme Director asked academics to be mindful of gender in planning lectures.



The gender profile of plenary lecturers is now monitored annually and reported to the MBBS Programme Board. In 2018, the proportion of plenary lectures given by female lectures had increased from 26% to 34%. This demonstrates the impact of our AS activity. We now communicate the proportion of lectures delivered weekly by females to students. This is through Blackboard on the "How are we doing" section (Figure 10).

Figure 10: Screenshot of the weekly summary of lectures delivered by gender



Gender in exams: We identified that there was gender bias in questions in the assessment papers:

As a result for all exam papers, gender pronouns were replaced by gender neutral pronouns. It demonstrates that we took action and are committed to mainstreaming structural and cultural changes.



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

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

The School has four PGT programmes (2M:2F Directors). In Postgraduate Taught Experience Survey 2018 (PTES), 80% of students were satisfied with their course.

Health Professions Education (HPE):

The flexible HPE programmes (certificate, Diploma and MSc) fit in around busy work schedules and home life. They are available part-time and by blended or distance learning. The degrees are accredited by AdvanceHE, with students eligible for Fellowship upon completion of the Certificate. In 2018, we launched HPE Unit (HPEU) to deliver postgraduate medical and health education, as well as facilitating and providing leadership and innovation in learning and teaching across the School.

As the cohorts are small, it is difficult to comment on gender. We have combined the programmes.

- Figure 11 shows an increase in female enrolments.
- Table 7 shows no clear gender patterns in the offer and enrolment rates.
- Table 8 gives a snapshot of awards and progressions at the end of each academic year. Over the last three years there have only been 5 failures, all for the certificate (2F:3M).

Figure 11: Enrolments on HPE programmes

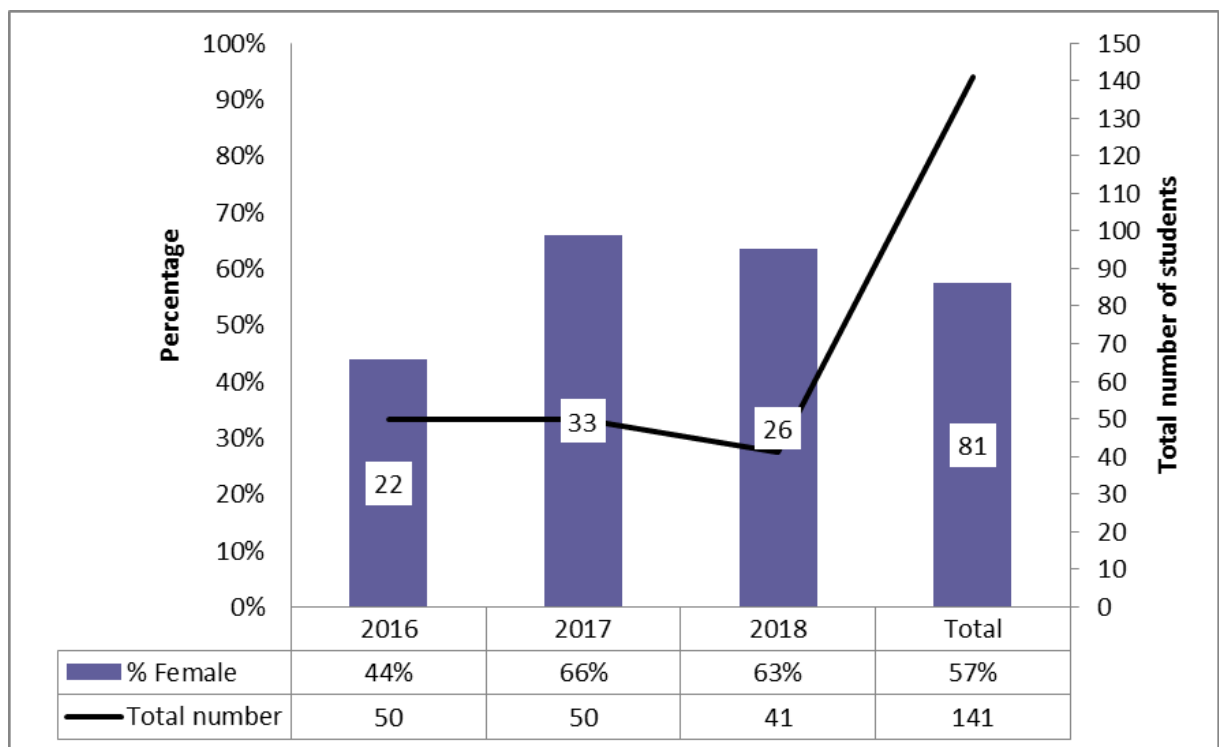


Table 7: Progression through the application system for Health Professionals Education programmes

Entry Year	Gender	Applications Received	Offers made	Enrolments	% applicants made offers	% offers enrolling	% applicants enrolling
2016	Female	24	24	22	100%	92%	92%
	Male	33	31	28	94%	90%	85%
	% Female	42%	44%	44%			
2017	Female	40	39	33	98%	85%	83%
	Male	24	23	17	96%	74%	71%
	% Female	63%	63%	66%			
2018	Female	36	35	26	97%	74%	72%
	Male	22	22	15	100%	68%	68%
	% Female	62%	61%	63%			
Overall	Female	100	98	81	98%	83%	81%
	Male	79	76	60	96%	79%	76%
	% Female	56%	56%	57%			

Table 8: HPE Awards and Progression (Certificate to Diploma, Diploma to MSc)

		Awarded			Progressed			Awarded or Progressed		
		Female	Male	%F	Female	Male	%F	Female	Male	%F
Certificate	2016	18	6	75%	1	0	100%	19	6	76%
	2017	11	9	55%	0	3	0%	11	12	48%
	2018	12	8	60%	2	0	100%	14	8	64%
	Total	41	23	64%	3	3	50%	44	26	63%
Diploma	2016	1	0	100%	0	4	0%	1	4	20%
	2017	1	0	100%	1	2	33%	2	2	50%
	2018	0	1	0%	0	5	0%	0	6	0%
	Total	2	1	67%	1	11	8%	3	12	20%
MSc	2016	0	1	0%						
	2017	0	3	0%						
	2018	2	1	67%						
	Total	2	5	29%						



Our commitment in 2016 was to develop and implement marketing of HPE programmes to be more inclusive and female friendly. Our measure of success was that “Cohorts of October 2017 and 2018 will see an increase in female applicants to at least 50% of applicants and level of enrolments continue to be at least 50%.” We have achieved this target in both 2017 and 2018.

MSc in Human Anatomy and Evolution:

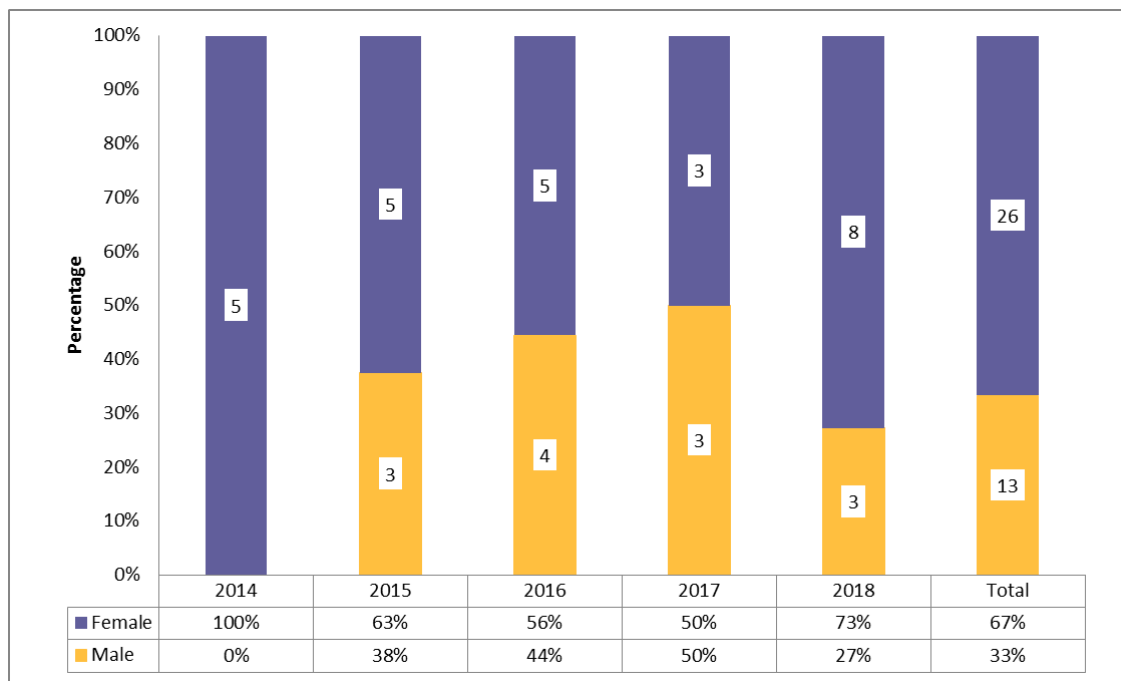
In 2016, based on staff and student feedback, we reduced the contact hours and condensed to a maximum of three days weekly, increasing flexibility for students. Classes are all scheduled to start after 10am. Since these changes we have seen an increase in the number of mature students who are returning to study (2M:1F). We have always offered part-time study, but the number choosing this option is small (2014:1F, 2015:0, 2016: 1M, 2017:1F and 1M, 2018:1M). Since 2017 we have offered a competitive annual scholarship of £2500 (1F 2017, 1M 2018).

- The student number is small and gender balanced (Table 9) but female enrolments increased in 2018 (73%F, Figure 12). This reflects the general increases of female students in Archaeology, a key target market for the programme.

Table 9: Total student cohort numbers on the MSc Human Anatomy and Evolution

Entry year	Male	Female	Total	% Male	% Female
2014	0	5	5	0%	100%
2015	4	5	9	45%	55%
2016	4	5	9	45%	55%
2017	3	3	6	50%	50%
2018	3	9	12	25%	75%

Figure 12: Enrolments on the MSc in Human Anatomy and Evolution



Recruitment:

- The programme has attracted an equal proportion of female applicants so far (54%F)
- The offer rate over the period is higher for females than male applicants, but numbers are small (2018: 100%F:88%M).
- The enrolment rate is slightly higher for females (56%F:43%M, p=0.25).

Table 10: Applications, offers and enrolments for MSc in Human Anatomy and Evolution

Year	Gender	Applications	Offers	Enrolments	% applicants made offers	% offers enrolling	% applicants enrolling
2014	Female	13	13	5	100%	38%	38%
	Male	3	2	0	67%	0%	0%
	%F	81%	87%	100%			
2015	Female	10	9	4	90%	44%	40%
	Male	10	6	4	60%	66%	40%
	%F	50%	60%	63%			
2016	Female	8	8	5	100%	63%	63%
	Male	12	9	4	75%	44%	33%
	%F	40%	47%	56%			
2017	Female	6	5	3	83%	60%	50%
	Male	7	6	2	86%	33%	28%
	%F	46%	45%	50%			
2018	Female	10	10	8	100%	80%	80%
	Male	8	7	3	88%	43%	38%
	%F	56%	59%	73%			
Overall	Female	47	45	25	96%	56%	53%
	Male	40	30	13	75%	43%	33%
	%F	54%	60%	67%			

- Table 11 shows 100% female completion rate.

Table 11: Graduation Completions for MSc in Human Anatomy and Evolution

Cohort Year	Male completions	Female completions	Total completions	Completion rate for males	Completion rate for females
2014-15	0	5	5 out of 5	NA	100%
2015-16	3 (1 withdrawn)	4	7 out of 8	75%	100%
2016-17	3 (1 LoA until 2019)	5	8 out of 9	75%	100%
2017-18	1 (1 LoA until 2019)	1	2 out of 3	50%	100%
Total	7	15	22 out of 25	67%	100%

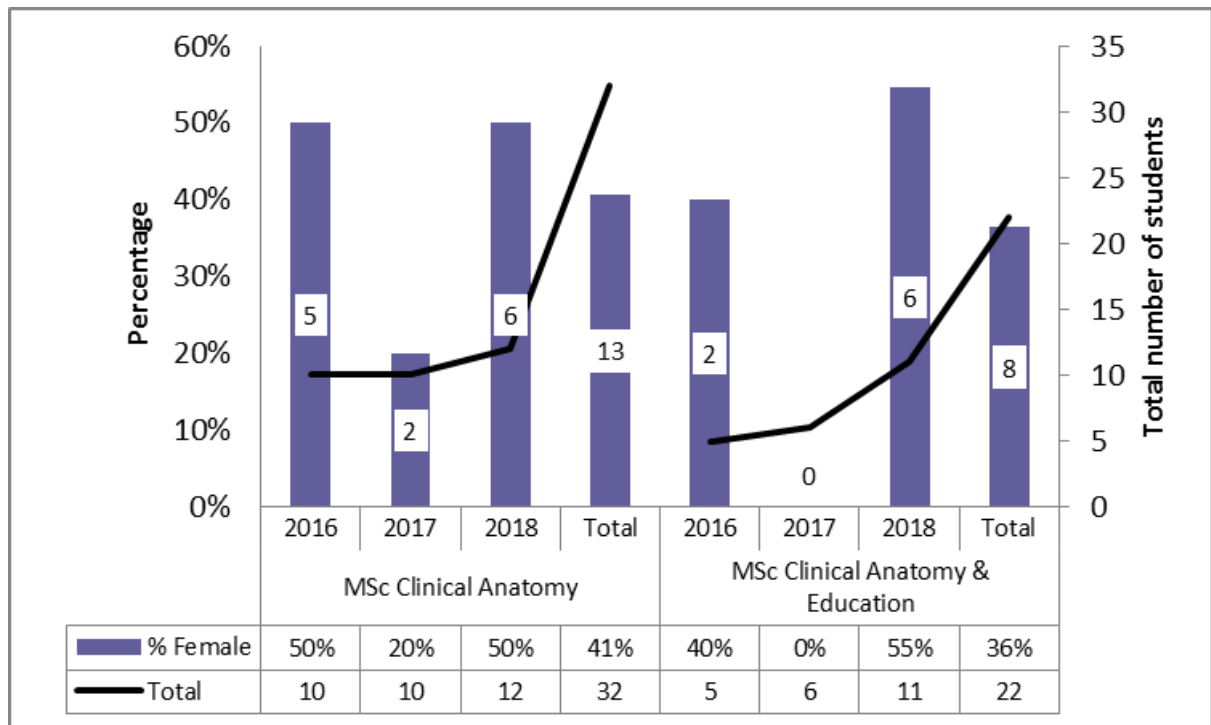
MSc in Clinical Anatomy / MSc Clinical Anatomy & Education:

The programme enrolled its first cohort in 2016, targeting at applicants with a healthcare, anatomy, or human/mammalian biology background and intercalating medical students.

It is flexible with core modules and elective modules, enabling students to suit their individual interests, personal circumstances, future careers and goals. Students can study full time over one year, or part-time over two/three years. All students in the last 3 years studied full-time.

- Figure 13 shows an equal proportion of males and females enrolled on both programmes in 2018.

Figure 13: Enrolments on the MSc in Clinical Anatomy / MSc Clinical Anatomy & Education



Recruitment:

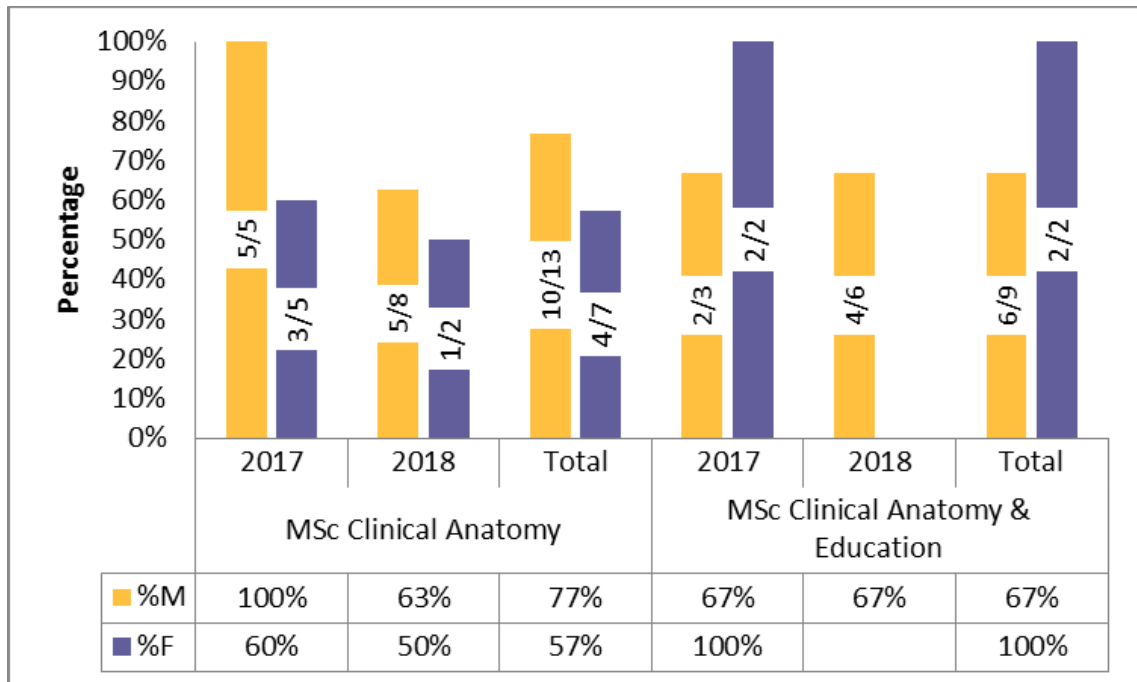
- Programmes have attracted a slightly lower proportion of female applicants so far: MSc in Clinical Anatomy: 47%F and MSc Clinical Anatomy & Education: 42%F (Table 12).
- There is no gender difference in offer rates.
- Overall enrolment rates are slightly lower for women than men – not statistically significant (p=0.59).

Table 12: Applications, offers and enrolments for MSc Clinical Anatomy / MSc Clinical Anatomy & Education

	Year	Gender	Applications	Offers	Enrolments	% applicants made offers	% offers enrolling	% applicants enrolling
MSc in Clinical Anatomy	2016	Female	14	11	5	79%	45%	36%
		Male	19	15	5	79%	33%	26%
		%F	42%	42%	50%			
	2017	Female	23	18	2	78%	11%	9%
		Male	22	14	8	64%	57%	36%
		%F	51%	56%	20%			
	2018	Female	17	11	6	65%	55%	35%
		Male	21	13	6	62%	46%	29%
		%F	45%	46%	50%			
	Total	Female	54	40	13	74%	33%	24%
Male		62	42	19	68%	45%	31%	
%F		47%	49%	41%				
MSc Clinical Anatomy & Education	2016	Female	8	6	2	75%	33%	25%
		Male	13	10	3	77%	30%	23%
		%F	38%	38%	40%			
	2017	Female	10	4	0	40%	0%	0%
		Male	14	10	6	71%	60%	43%
		%F	42%	29%	0%			
	2018	Female	15	15	6	100%	40%	40%
		Male	18	14	5	78%	36%	28%
		%F	45%	52%	55%			
	Total	Female	33	25	8	76%	32%	24%
Male		45	34	14	76%	41%	31%	
%F		42%	42%	36%				

- Figure 14 shows no overall gender differences in the completion rates.

Figure 14: Completion rates for MSc Clinical Anatomy / MSc Clinical Anatomy & Education



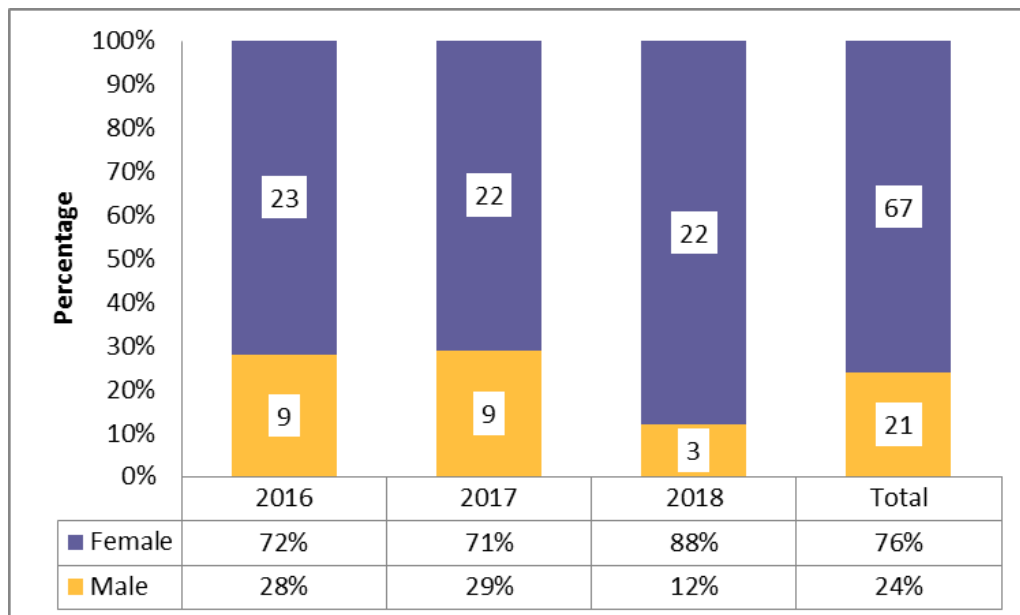
MSc in Physician Associate Studies:

Started in 2016, this two-year full-time programme meets the requirements of the National Competence and Curriculum Framework for Physician Associates. Graduates are eligible to sit the National Licensing Examination to gain entry into the profession. We successfully organised a recruitment fair in 2018 inviting regional employers - 24 out of 27 graduates were recruited within the region (17F and 7M). This will be repeated in 2019.

Figure 15: Physician Associate cohort in 2018

- Figure 16 shows that 76% of students enrolled are female. The programme requires students to have a Biosciences Degree, which nationally has a high proportion of females enrolled (HESA 64%F).

Figure 16: MSc in Physician Associate Studies enrolments



Recruitment:

- Table 13 shows the number of applicants has increased from 170 in 2016 to 248 in 2017, but decreased in 2018 following funding changes. The programme attracts a high proportion of female applicants.
- The overall application to offers rate is higher for females than males ($p=0.002$) [[Action Point 4](#)].
- The enrolment rate is higher for males than females – not statistically significant ($p=0.12$).
- The first cohort graduated in 2018 with a higher completion rate for females (87%F (20/23)) than males (78%M (7/9)) – not statistically significant ($p=0.60$).

Table 13: Applications, offers and enrolments for MSc in Physician Associate Studies

Entry year	Gender	Applications	Offers	Enrolments	% applicants made offers	% offers enrolling	% applicants enrolling
2016	Female	112	33	23	29%	70%	21%
	Male	58	13	9	22%	69%	16%
	% Female	66%	72%	72%			
2017	Female	174	36	22	21%	61%	13%
	Male	74	10%	9	14%	90%	12%
	% Female	70%	78	71%			
2018	Female	113	43%	22	38%	51%	19%
	Male	39	4	3	10%	75%	8%
	% Female	74%	91%	88%			
Overall	Female	399	112	67	28%	60%	17%
	Male	171	27	21	16%	78%	12%
	% Female	70%	81%	76%			

Action Point 4: Gain gender parity in the offer rate for Physician Associate Studies



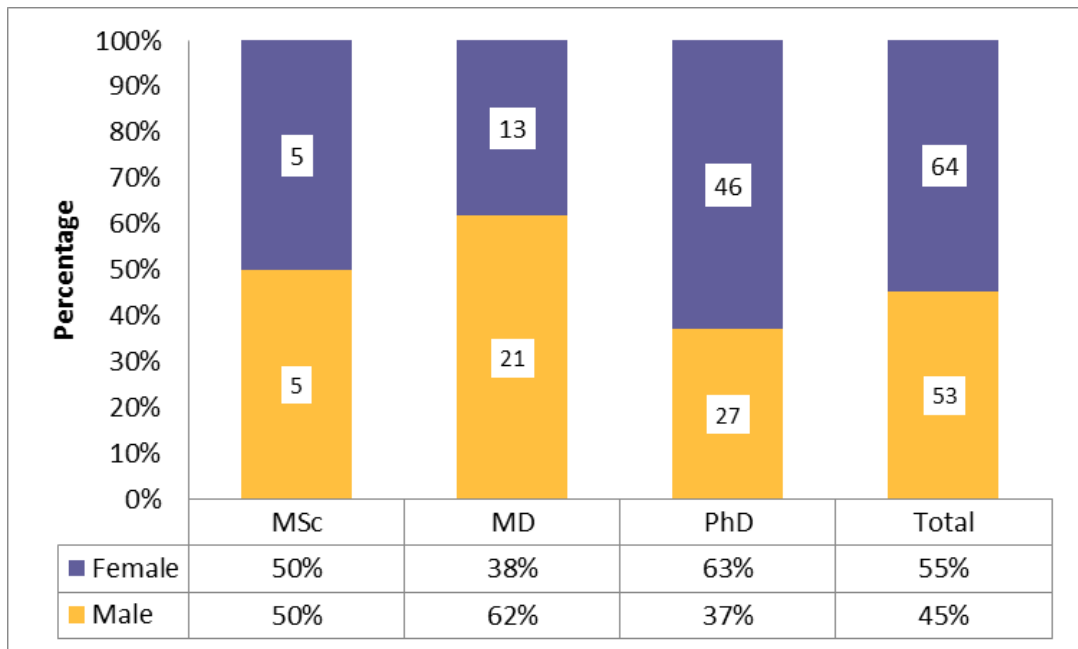
(iv) Numbers of men and women on postgraduate research degrees

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

PGR students can study for an MSc by thesis, PhD, or MD. In 2018/19, we have 117 PGR students (55%F), who are either registered, in writing-up period, or under exam (Figure 17):

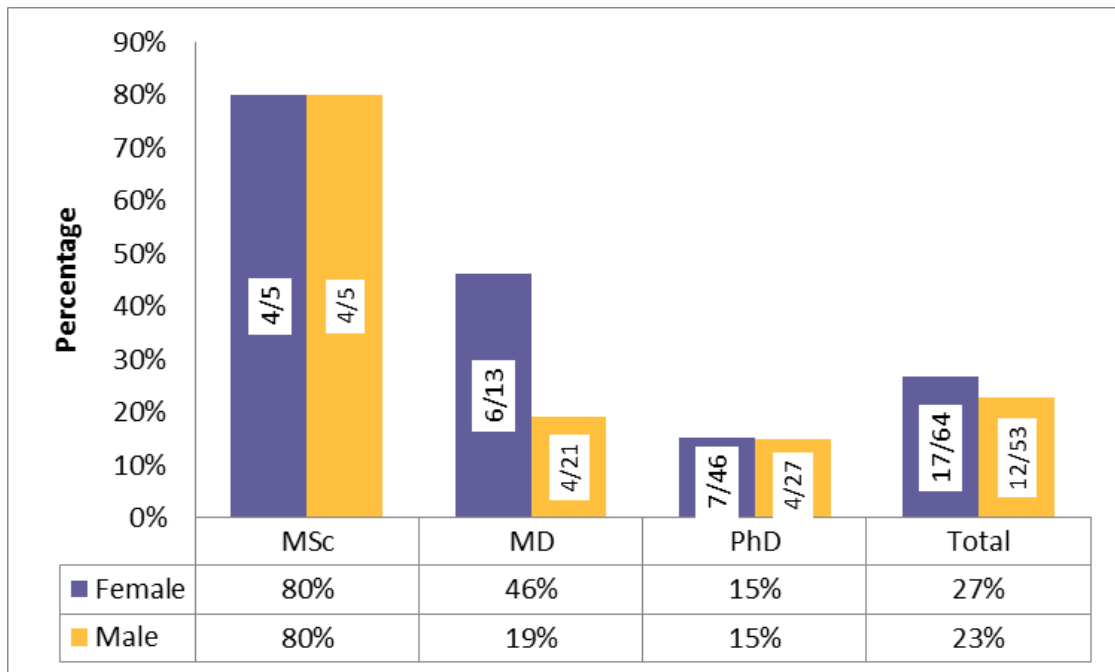
- 50%F of MSc by Thesis students.
- 38%F of MD students. The commonest disciplines are Cardiology and Surgery that is in line with the MSC report (2017) in which almost a third of doctors training to be surgeons are female, up from a quarter in 2012, but it remains the specialty with the lowest proportion of female doctors.
- 63%F of PhD students compared to 57.3% of all registered PhD students in Medicine and Dentistry were women (HESA).

Figure 17: 2018/19 cohort of postgraduate research students by gender



- Figure 18 shows overall a slightly higher proportion of part-time female PGR students are than males. There is gender parity for MSc and PhD, whereas for MD, there is higher proportion of part-time females (46%F) than males (19%M).

Figure 18: Proportions of part-time postgraduate research students by gender

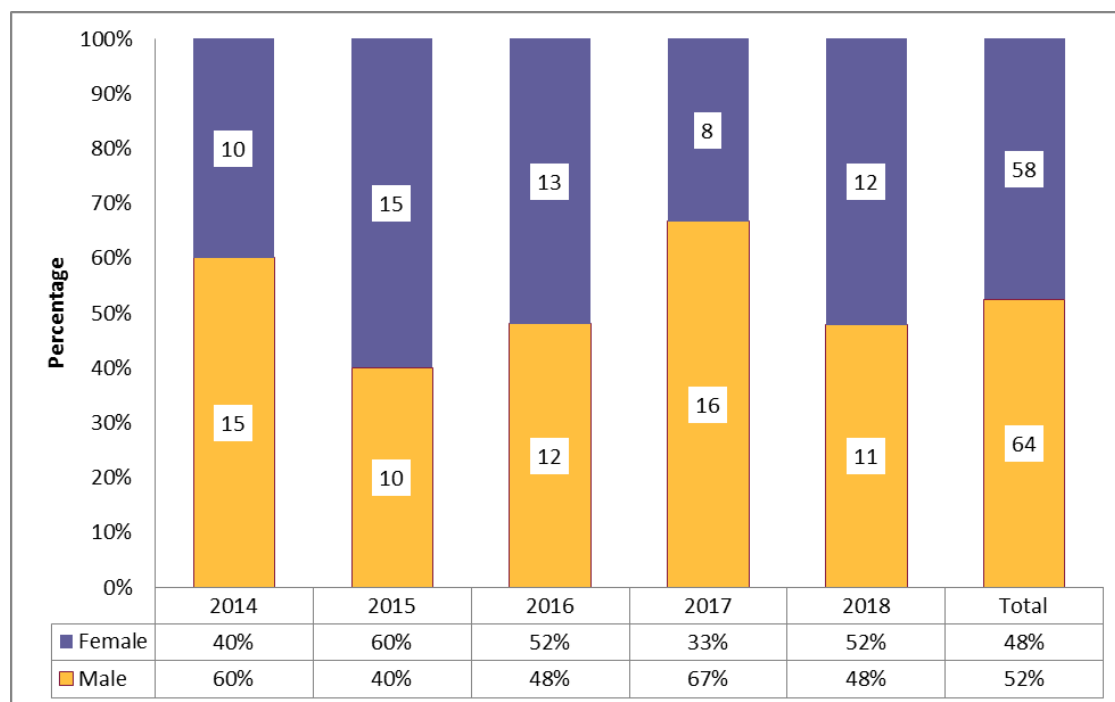


Enrolments:

As the student number recruited to each programme is small, making it difficult to comment on gender balance, we have combined the programmes.

- For 2018 entry, 52% of students enrolled were female (Figure 19). Our overall pattern resonates with national data – 55.7%F of first year PhD students in Medicine and Dentistry (HESA).

Figure 19: Postgraduate research enrolments



Recruitment:

- In 2018, half of the applicants are female (Table 14).
- Offer and enrolment rates are gender balanced.

Table 14: Applications, offers and enrolments for postgraduate research

Entry year	Gender	Applications	Offers	Enrolments	% applicants made offers	% offers enrolling	% applicants enrolling
2014	Female	44	15	10	34%	67%	23%
	Male	88	29	15	33%	52%	17%
	%F	33%	34%	40%			
2015	Female	48	15	15	31%	100%	31%
	Male	58	10	10	17%	100%	17%
	%F	45%	60%	60%			
2016	Female	69	17	13	25%	76%	19%
	Male	70	19	12	27%	63%	17%
	%F	50%	47%	52%			
2017	Female	70	15	8	21%	53%	11%
	Male	76	17	16	22%	94%	21%
	%F	48%	47%	33%			
2018	Female	47	12	12	26%	100%	26%
	Male	48	12	11	25%	92%	23%
	%F	49%	50%	52%			
Overall	Female	278	74	58	27%	78%	21%
	Male	340	87	64	26%	74%	19%
	%F	45%	46%	48%			

- Table 15 shows the PGR degree completions. The completion proportions (49%F) are in line with the enrolment proportion (48%F, Table 14).

Table 15: Postgraduate research degree completion numbers

	Completion year	2014	2015	2016	2017	2018	Total
MSc by Thesis	Male	0	2	0	4	2	8
	Female	2	3	3	4	2	14
	% Male	0%	40%	0%	50%	50%	36%
	% Female	100%	60%	100%	50%	50%	64%
	Total	2	5	3	8	4	22
MD	Male	3	6	4	6	7	26
	Female	0	3	3	2	1	9
	% Male	100%	67%	57%	75%	88%	74%
	% Female	0%	33%	43%	25%	13%	26%
	Total	3	9	7	8	8	35
PhD	Male	1	3	2	12	3	21
	Female	7	4	3	7	9	30
	% Male	13%	43%	40%	63%	25%	41%
	% Female	88%	57%	60%	37%	75%	59%
	Total	8	7	5	19	12	51
Total	Male	4	11	6	22	12	55
	Female	9	10	9	13	12	53
	% Male	31%	52%	40%	63%	50%	51%
	% Female	69%	48%	60%	37%	50%	49%
	Total	13	21	15	35	24	108

(v) Progression pipeline between undergraduate and postgraduate student levels

Identify and comment on any issues in the pipeline between undergraduate and postgraduate degrees.

Medicine is not a direct pipeline from UG to PG studies. The majority of our MBBS graduates continue their medical training. Some graduates may return as Academic Clinical Fellows (ACFs) or for other postgraduate qualifications.

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.

Staff at Hull and York are graded using different framework. Table 16 maps the academic grades used at each university to the categorisation used in this application.

Table 16: Definition of the roles and grades used to categorise staff data by University

Academic staff grade	Grades	
	Hull	York
Researcher	Research Band 6/7/8	5 / 6
Lecturer	T&R 7/8 T&S 6/7/8	7
Senior Lecturer (SL)	T&R 9 T&S 9 Research Band 9	8, 8R
Reader	Reader	8R
Professor	Professor Band 10	Professor / Chair
Clinical Researcher (CR)	Clinical Research fellow	
Clinical Lecturer (CL)	Clinical Lecturer	
Clinical Senior Lecturer (CSL)	Clinical Senior lecturer (Consultant) Clinical Associate Professor	
Clinical Reader (CR)	Clinical Reader	
Clinical Professor (CP)	Professor Band 10 Professor Chair	

Findings:

- The overall proportion of academic staff who are female has increased (45%F in 2018 (MSC: 41.9%F).
- The proportion of female researchers has increased over time - all are on research-only contracts (Table 17).
- There has been a notable increase in the proportion of Lecturers who are female – with an increasing proportion on a Teaching and Research (T&R) contract.
- The proportion of female SLs has increased. In 2018, 89% of SLs were on T&R contracts – only three on Teaching only contracts (1M:2F).
- Due to promotion, Readers has increased from 7 in 2016 to 11 in 2018 (2018: 55%F).
- The proportion of female Professors has increased (26%F in 2018 - higher than the MSC benchmark 20.7%F), as a result of 3 new appointments and one female promoted from Reader to Professor.

Figure 20: Academic staff by gender

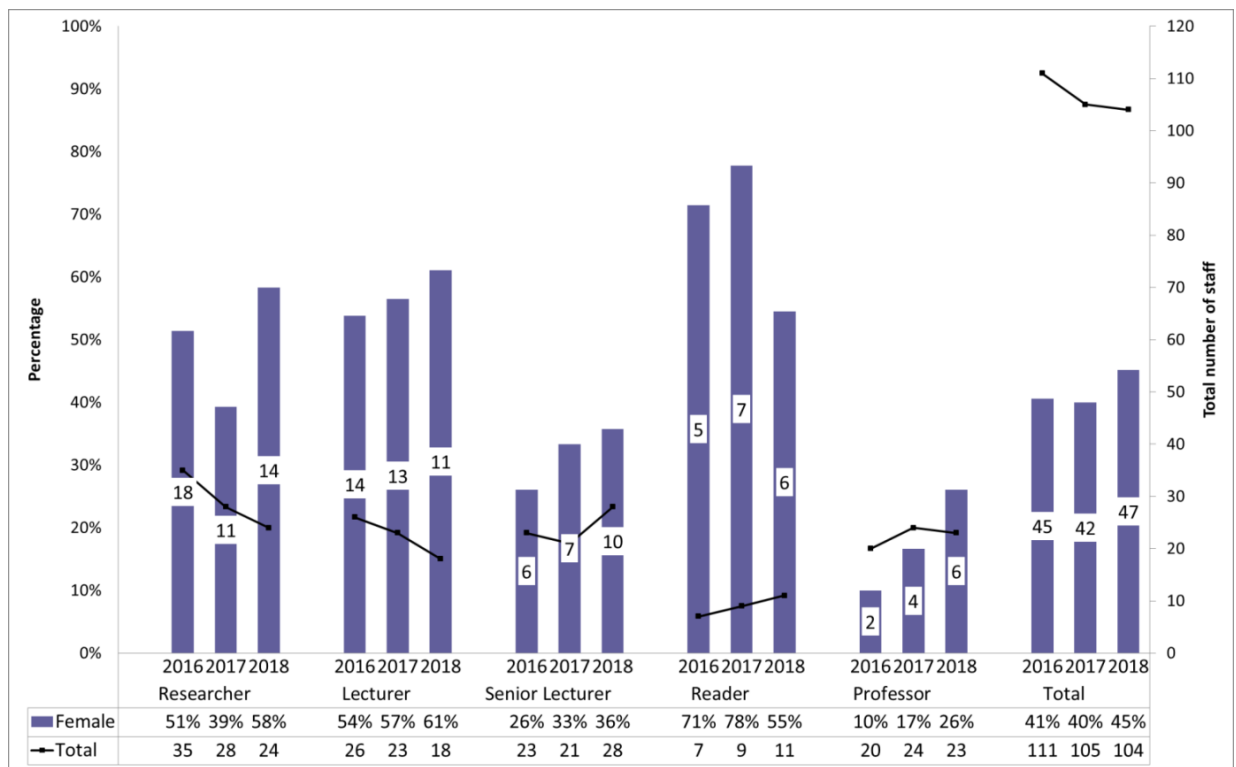


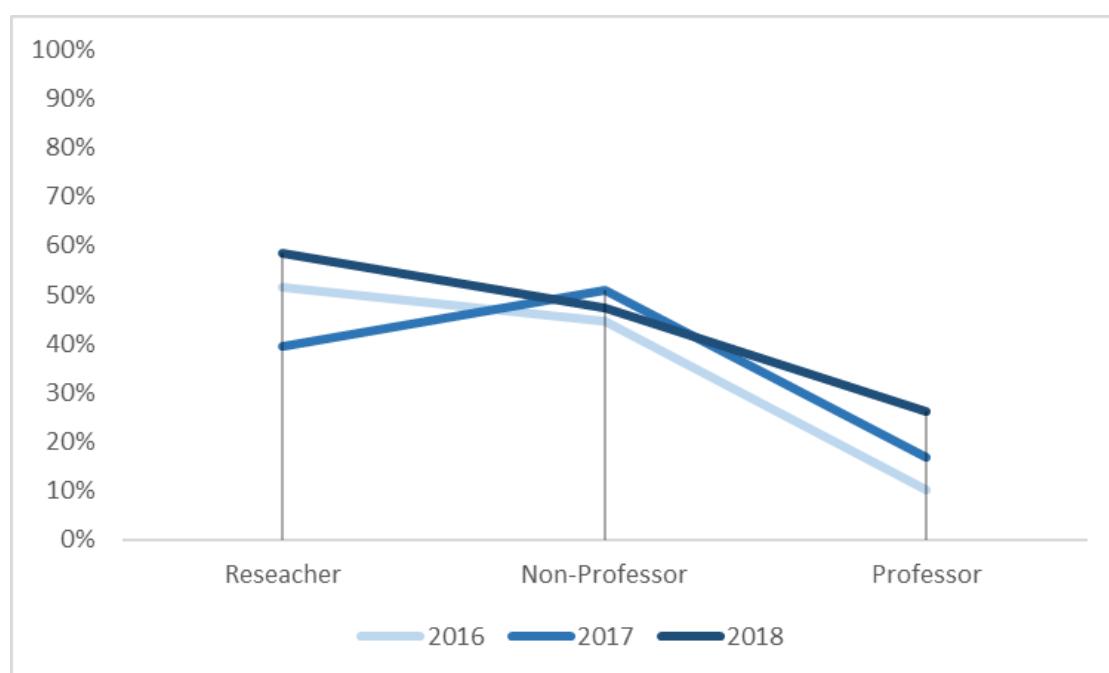
Table 17: Number and proportion by contract function and gender

Year	Grade	Research only			Teaching and Research			Teaching only			Totals		
		Male	Female	%F	Male	Female	%F	Male	Female	%F	Male	Female	%F
2016	Researcher	17	18	51%			-			-	17	18	51%
	Lecturer	3	2	40%	7	12	63%	2	0	0%	12	14	54%
	Senior Lecturer			-	16	5	24%	1	1	50%	17	6	26%
	Reader			-	2	5	71%			-	2	5	71%
	Professor	1	0	0%	16	2	11%	1	0	0%	18	2	10%
2017	Researcher	17	11	39%			-			-	17	11	39%
	Lecturer	4	2	33%	5	9	64%	1	2	67%	10	13	57%
	Senior Lecturer			-	13	5	28%	1	2	67%	14	7	33%
	Reader			-	2	7	78%			-	2	7	78%
	Professor	1	0	0%	18	4	18%	1	0	0%	20	4	17%
2018	Researcher	10	14	58%			-			-	10	14	58%
	Lecturer	5	3	38%	1	6	86%	1	2	67%	7	11	61%
	Senior Lecturer			-	17	8	32%	1	2	67%	18	10	36%
	Reader			-	5	6	55%			-	5	6	55%
	Professor	1	0	0%	16	6	27%			-	17	6	26%



Pipeline: Figure 21 shows a year-on-year reduction in the difference in female representation between Researcher and Professor. This narrowing gap is due to our effort in recruitment (5.1(i)) and promotion (5.1(iii)).

Figure 21: Career Progression Pipeline (%F)

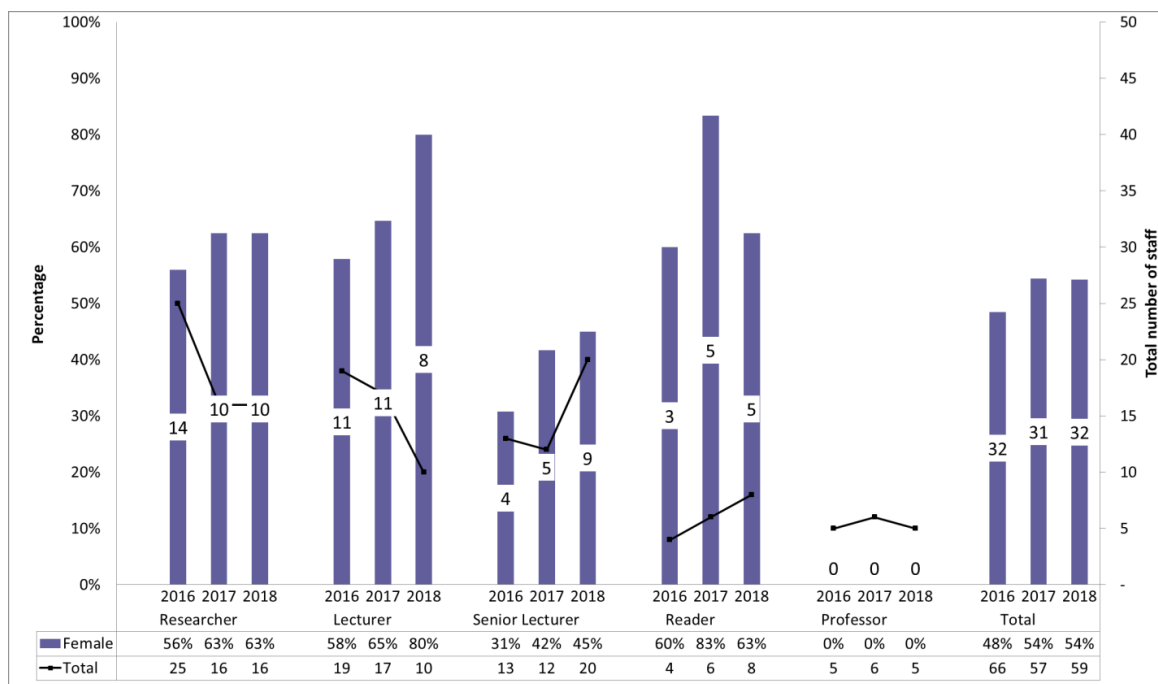


Clinical and Non-Clinical: The more relevant categorisation of academic staff in the School is clinical or non-clinical.

Non-Clinical:

- Figure 22 shows that overall females are well represented (2018:54%F).
- The proportion of female Researchers, Lecturers and SLs has increased over time.
- Although the numbers are small, we have doubled the number of Readers from 4 in 2016 to 8 in 2018 – more than half of them are female (2018: 63%F).
- We have a small number of non-clinical professors. After the census date, one female Senior Lecturer was promoted to Professor, increasing the proportion from 0%F to 17%F.

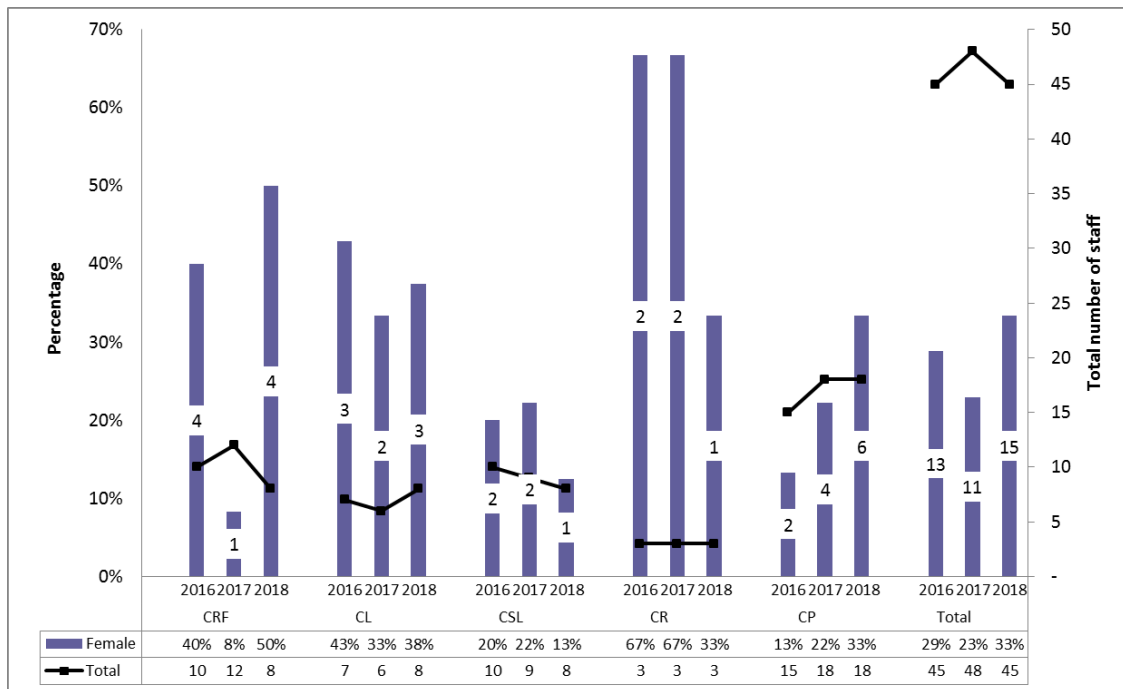
Figure 22: Non-clinical academic staff by gender



Clinical:

- Figure 23 shows the proportion of female clinical academic staff has increased from 29% in 2016 (MSC: 28.6%F) to 33%F in 2018.
- Increase in the proportion of female CRFs to 50%F in 2018 (no benchmark data).
- The number of CLs only increased from 7 in 2016 to 8 in 2018, and the proportion of females is 38%F in 2018 (MSC: 41.2%F).
- The proportion of female CSLs fell from 20% in 2016 to 13% in 2018, but this was due to successful promotion (2F).
- While the number of CRs remains constant (3), one female CR was promoted to CP in 2018 and one male was appointed, hence the proportion of females fell from 67%F in 2016 to 33%F in 2018.
- The combined CSL and CR is 34%F (above MSC: 31%F).
- Female CPs increased from 13%F in 2016 to 33%F in 2018 (above MSC: 17.9%F).

Figure 23: Clinical academic staff by gender



(ii) Where relevant, comment on the transition of staff between technical and academic roles.

We employ a small number of technical staff (2M:3F). We support their career progression and encourage discussions during PDR. Staff can transition between categories by applying for a new role in a different staff category or through role review. Following the PDR and role re-evaluation, the role of one female technician was upgraded.

We support technical staff to transition to academic roles by offering mentoring (5.3 (iv)) and training opportunities (5.3 (ii)).

During 2018, we employed a further technician (F). This has enabled the senior technician and Deputy Mortuary Manager to have protected time to develop her role, thereby supporting career progression.

(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.

- No staff are employed on zero-hour contracts.
- All Senior Lecturers and above are on continuing contracts.
- Figure 24 shows no gendered patterns in the proportions of researchers and lecturers on fixed term contracts.

Figure 24: Proportion of Researchers and Lecturers on fixed term contracts by gender



In line with both university policies, researchers not recruited to an open contract move to one after six years or their fourth contract. Bridge funding is available for staff moving from externally funded research projects where there is a gap in end dates and confirmed start dates, ensuring that talented staff are retained. For example, a male research fellow was bridge-funded for 3 months between research grants.

The School follows university policies for fixed term contracts. In cases where further work or funding is not available, staff are notified in writing and invited to meet with their line manager to discuss the situation, the individual's career plans, any assistance available to support, and options for seeking redeployment elsewhere within the University.



We always aim to ensure talented staff are retained. In 2017, three contract research staff (2F/1M) were successful when applying for prestigious fellowships supported by Yorkshire Cancer Research, continuing their employment within the School.

It is policy that staff appointments on our new PGT programmes are fixed term until the programme is established (after 2 years generally). A female Lecturer was originally appointed on fixed term contract and after two-years has moved onto continuing contract.

(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 18 shows that staff turnover is low.
- For Researchers and Lecturers, we would expect staff to leave as they reach the end of their fixed-term contracts.
- Two female SLs left in the last three years (1M): One left for a Chair appointment at another university and another for personal reasons.
- One female Professor retired and was not replaced.

Table 18: Staff turnover by grade and gender

Academic year	Male	Female	% Female
2015-16			
Researcher	3	2	40%
Lecturer	1	1	50%
Senior Lecturer	1	1	50%
Professorial	1	1	50%
2016-17			
Researcher*	9	12	57%
Lecturer	6	2	25%
Professorial	2	0	0%
2017-18			
Researcher	6	2	25%
Lecturer	0	1	100%
Senior Lecturer	0	1	100%
Professorial	1	0	0%

*Corresponds to the end of a large programme grant

At the monthly MB meeting, a list of leavers (and new starters) is provided by the Executive Office which identifies trends. Both universities ask leavers to complete an exit questionnaire and offer the opportunity of an exit interview. Our HR representatives felt that this was a good mechanism and we should not replicate existing university procedures. However, so far no School staff have participated in a formal exit interview. We will implement a School exit interview process to gather feedback on reasons for leaving and cultural experience of women [Action Point 5].



Action Point 5: Better understand why staff that leave the School choose to do so.

WORD COUNT: 2383

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.

- New posts advertised via both Universities, facilitated by the respective HR department in line with equal opportunities policies.
- Flexible and part-time working are advertised, as is our AS commitment.
- Interview panels are mixed-gendered (since 2015). Panel members undertake mandatory training: unconscious bias, equality and diversity and recruitment policies.
- Interviews are either face-to-face or via skype.
- Table 19 shows that half of all applicants were female.
- Figure 25 shows that female applicants are more likely to be interviewed ($p=0.02$) but there is parity in the offer rate ($p=0.77$).

Figure 25: Recruitment rates by gender (2015 to 2018)

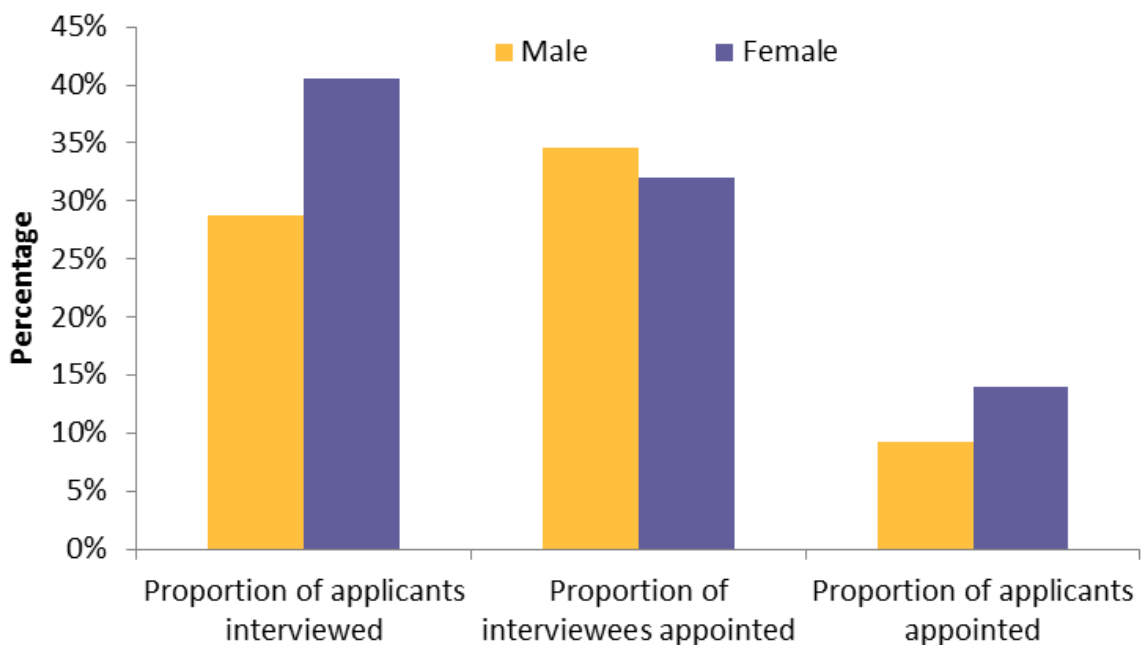


Table 19: Academic recruitment by gender

Academic year	Applied			Interviewed			Appointed			% Interviewed /Applied		% Appointed /Interviewed	
	F	M	%F	F	M	%F	F	M	%F	F	M	F	M
2015/16													
Researcher	42	26	62%	19	10	66%	10	5	67%	45%	38%	53%	50%
Lecturer	28	27	51%	8	7	53%	2	1	67%	29%	26%	25%	14%
Senior Lecturer													
Professor	4	3	57%	2	1	67%	0	1	0%	50%	33%	0%	100%
Total	74	56	57%	29	18	62%	12	7	63%	39%	32%	41%	39%
2016/17													
Researcher	45	29	61%	16	7	70%	2	5	29%	36%	24%	13%	71%
Lecturer													
Senior Lecturer	11	9	55%	2	4	33%	1	2	33%	18%	44%	50%	50%
Professor	3	0	100%	2	0	100%	2	0	100%	67%		100%	
Total	59	38	61%	20	11	65%	5	7	42%	34%	29%	25%	64%
2017/18													
Researcher	52	53	50%	25	17	60%	7	1	88%	48%	32%	28%	6%
Lecturer	16	23	41%	5	5	50%	3	2	60%	31%	22%	60%	40%
Senior Lecturer	4	11	27%	3	2	60%	1	0	100%	75%	18%	33%	0%
Professor	2	3	40%	2	0	100%	1	0	100%	100%	0%	50%	
Total	74	90	45%	35	24	59%	12	3	80%	47%	27%	34%	13%
Total													
Researcher	139	108	56%	60	34	64%	19	11	63%	43%	31%	32%	32%
Lecturer	44	50	47%	13	12	52%	5	3	63%	30%	24%	38%	25%
Senior Lecturer	15	20	43%	5	6	45%	2	2	50%	33%	30%	40%	33%
Professor	9	6	60%	6	1	86%	3	1	75%	67%	17%	50%	100%
Total	207	184	53%	84	53	61%	29	17	63%	41%	29%	35%	32%

In 2016 we committed to head-hunt potential female applicants, particularly for senior roles. We aimed to appoint two new female Chairs by 2018. We have appointed three.

In 2016 we set a target that no less than 50% of new female academic appointees over the next 3 years. By removing gender-biased language from all job advertisements and recruitment documentation, offering less than full-time contracts and ensuring a female point of contact for all job ads, we have achieved 63%F within 2 years.



(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.

University-level inductions ensure that staff feel connected to their employing university and the School.

Improvements since 2016:

- New checklist consistently used across two universities.
- Mandatory training (EDI and unconscious bias).
- EO supports clinical staff with any NHS administrative processes.
- New confidential questionnaire for new starters - returned to the AS Champion.
- New T&R staff, have more research time to develop their research with teaching load reduced in the first two years - normal load resumed in Year 3.
- New T&S colleagues, have an additional of 15% time allocation for professional training and development in the first two years (e.g. undertaking the PGCAP or equivalent), in addition to the 5% allocated time to all staff for CPD.
- Termly half-day School induction, welcomed by the Dean, 'speed-dating' with diverse teams across two universities, including EDI and AS. Following feedback, we now provide lunch for staff to network.



The new School induction event has had positive feedback :

"Good to meet key members of other HYMS teams and 'putting a face to a name.' Academic staff

(iii) 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.

- The criteria for academic promotion rounds cover the full range of activities weighted to the individual profile, including leadership and citizenship.
- The promotions panel considers staff who have had a significant period of absence and the Dean's supporting statement.
- The criteria are posted on our online platform "BoomerangOnline".
- In 2016 we committed to develop promotions workshops - two workshops have taken place.
- Staff have a focused PDR discussion about promotion.
- At the end of the annual PDR process LMs discuss potential promotions with the Dean who reviews PDR forms and conducts one-to-one meetings. This is followed by a concerted programme of specific encouragement by the Dean and senior staff in the School.
- Staff who are considered close to being ready are offered support to help them meet the promotion criteria [[Action Point 6](#)].
- Figure 20 shows an increase in both male and female applications in the last two years.
- The mid-career success rate has significantly improved.
- All unsuccessful applicants have supportive mentoring e.g. Female Professor (2017) has been supported to reapply in the 2018/19 round.
- Since the census date, one female member of staff has been promoted from SL to Professor and 6 have applied in 2019 cycle.

Table 20: Promotions applications and promotions

	Lecturer to Senior Lecturer		Senior Lecturer to Reader		Reader to Professor		Total	
	Male	Female	Male	Female	Male	Female	Male	Female
2014								
Applied	0	1	1	1	0	0	1	2
Promoted	0	1	1	1	0	0	1	2
Success rate	-	100%	100%	100%	-	-	100%	100%
2015								
Applied	0	0	2	1	0	0	2	1
Promoted	0	0	0	1	0	0	0	1
Success rate	-	-	0%	100%	-	-	0%	100%
2016								
Applied	0	0	3	1	0	0	3	1
Promoted	0	0	0	1	0	0	0	1
Success rate	-	-	0%	100%	-	-	0%	100%
2017								
Applied	0	2	3	1	1	1	4	4
Promoted	0	2	3	1	1	0	4	3
Success rate	-	100%	100%	100%	100%	0%	100%	75%
2018								
Applied	4	1	1	0	0	1	5	2
Promoted	4	1	1	0	0	1	5	2
Success rate	100%	100%	100%	-	-	100%	100%	100%
2019*								
Applied	1	1	2	0	1	1	4	2
Promoted								
Success rate								
Totals								
Applied	4	4	10	4	1	2	15	10
Promoted	4	4	5	4	1	1	10	9
Success rate	100%	100%	50%	100%	100%	50%	66%	90%

*Outcome not yet know



In 2016 we committed to support career progress - particularly mid-career - resulting in an increase in promotion applications from Lecturer to SL (100% success rate). In the TCS, 79% stated that they understood the promotions process and criteria (80%F:78%M, p=0.876).

Action Point 6: Develop further strategies to facilitate applications for 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.

In 2008, we focused on quality teaching for our first MBBS students. Staff responsible for the 2008 REF submission have since left, and we cannot obtain a full dataset.

Table 21 shows a higher percentage of eligible females was returned than males ($p=0.40$). 85% of our researchers were classed as 'world-leading' or 'internationally excellent'. Staff leading the process had mandatory EDI training to reduce bias in decision making. The six impact case studies were shared equally between men and women.

Table 21: Academic staff returned in REF in 2014

	No of male returnable staff	No. of male Staff returned	No of female returnable staff	No. of female staff returned
Hull	25	12 (48%)	7	6 (86%)
York	16	10 (62%)	11	6 (55%)
Total	41	22 (54%)	18	12 (67%)

As an inclusive department, for REF 2021 all academic staff will be returned. Our staff will be returned in five units of assessment (3 York: 5 Hull). At Hull, the established Research Committee will continue to lead the submission. At York, the newly established Departmental Research Committee (DRC) will support all staff regarding processes and ensures transparency e.g. outputs and grading. The DRC and EDIG will work collaboratively to conduct a gender analysis of the REF submission and develop a transparent process around paper selection ([Action Point 7](#)).

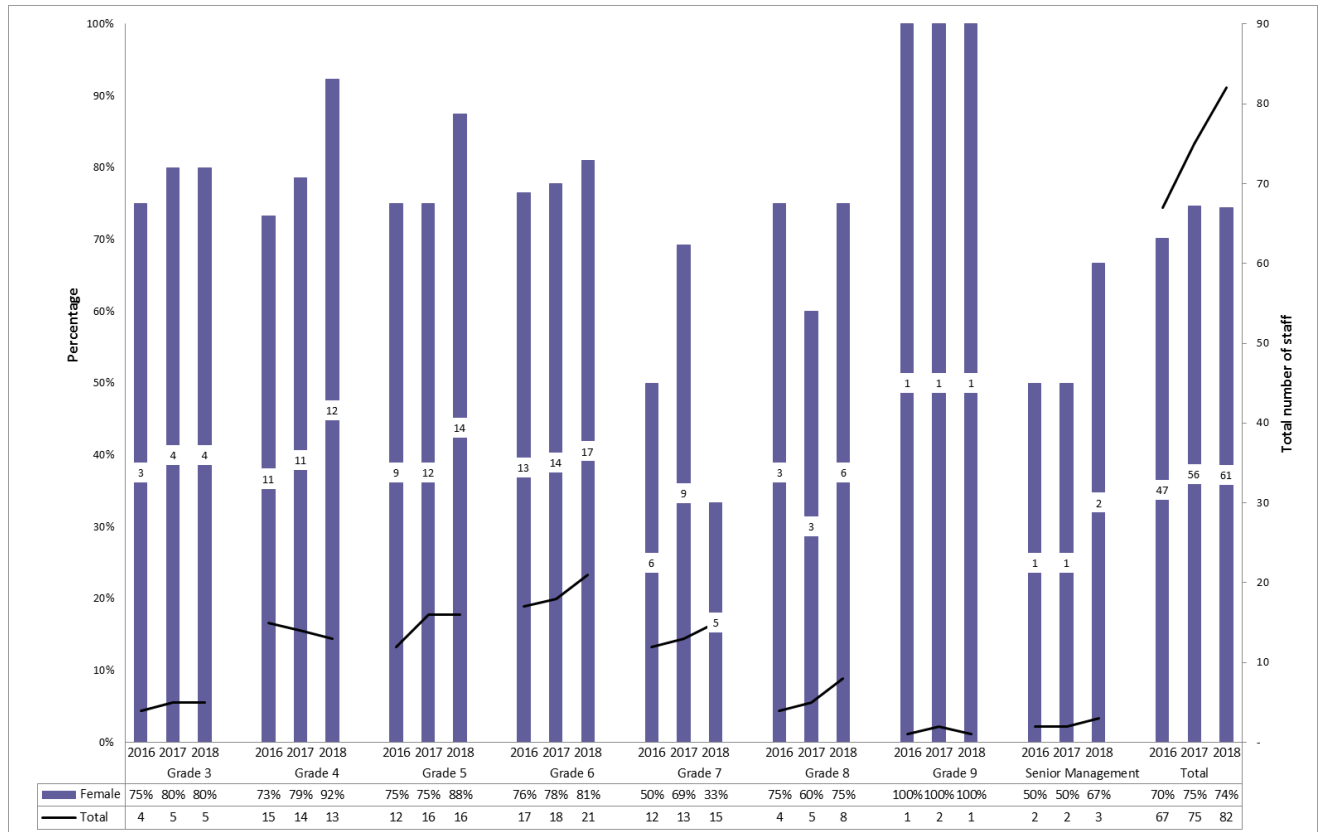
Action Point 7: Analyse publications submitted to REF by gender and develop a transparent process around paper selection.



5.2. Key career transition points: professional and support staff

The overall proportion of female PSS has remained stable and consistent across grades.

Figure 26: PSS staff by gender



(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.

PSS staff follow the same induction process as academic staff. Effectiveness is monitored through the feedback forms.



The School Induction Event has received positive feedback:

“The whole thing was fantastic. I came away feeling it put the finishing touches on things which I'd only grasped the foundations, and that things finally fell into place.” PSS staff

(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.

PSS are not eligible to apply for promotion but can advance their careers in two ways (progress to a new role or re-grade an existing post). The School encourages internal applications (Table 22).

Table 22: PSS internal progression to a new higher grade (2016-2018)

Gender	Former role	New higher grade role
F	Executive Officer	Programme Manager
F	Executive Administrator	PGT Administrator
F	Finance Manager	Head of Operations and Deputy Chief Operating Officer
M	Assessment Officer	Assessment Manager
M	Marketing and Communications Administrator	Marketing and Communications Officer

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?

- Annual PDR, with focus on training.
- Access to a wide range of free training courses from both Universities, irrespective of their employing university – promoted on BoomerangOnline.
- Flexible courses (online/face-to-face) to fit around staff needs.
- Compulsory training courses (Table 23).
- University leadership courses: 2016 (2M), 2017 (1F), 2018 (1F:1M).
- Participate in projects, attending and presenting at conferences.
- New teaching staff complete Postgraduate Certificate (PGCert) in Higher Education as part of successful probation.
- Head of Quality and Standards supports staff applications Fellowships of the Higher Education Academy (HEA) (Case Study 2).
- Ring-fenced budget for external staff development activities. The weekly SLT meeting approves applications and ensure it is fairly distributed. In 2017/18 half of the awardees were female – an increase from 36%F in 2015/16 (Table 25).

Table 23: Compulsory training

Line Managers	All Staff
Recruitment & Selection	Unconscious bias

Performance Review & Development	Health and safety procedures
	Information security requirements
	Equality and Diversity
	GDPR

Table 24 shows an increase in University training opportunities completed. This reflects our efforts to increase training uptake by advertising on BoomerangOnline, and during induction and PDR.

In the TSC, 65% (69%F:57%M) of academic staff stated that they were encouraged to take training courses to contribute to a stronger CV (55% in 2017).

Table 24: Academic Training courses

Year when training was completed	Female	Male	Total	% Female
2015	19	21	40	48%
2016	44	46	90	49%
2017	70	80	150	47%
2018	58	59	117	50%
Total	191	206	397	48%

Table 25 Staff Development Fund awards to academic staff by gender

2015/2016			2016/2017			2017/2018		
Female	Male	% Female	Female	Male	% Female	Female	Male	% Female
13	23	36%	17	14	55%	20	20	50%

Our universities surveys show increase in staff engaging with training, notably at Hull 83% felt supported to access appropriate training, learning and development in the last year (76%, 2016) and 81% felt that they training they had undertaken had an impact on performance.

(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.

Despite complexity across two universities, our EO ensures PDR completion and requires full-participation, apart from exceptional circumstances or colleagues on probation (which is reviewed separately). Table 26 shows high agreement on a range of aspects of PDR.

Table 26: Universities' survey findings

Survey	Question	%
York 2017	Valued opportunity for PDR	79%
	PDR was useful in reviewing strengths and weaknesses	76%
	Useful in providing constructive feedback on areas for development	66%
	Clear objectives for the coming year	93%
	PDR useful for identifying training needs.	55%
Hull 2018	Clear understanding about what they had to achieve in their job	89%
	PDR meeting was useful	81%
	Clear objectives as part their PDR	95%

New PDR forms have been introduced at both universities since our last application and now include more self-reflection, longer term career aspirations (including preparation for promotion) and training. It includes a prompt to consider Athena SWAN and EDI contributions.

In the TCS, 81% stated that career progression is now discussed in PDR (76%F:85%M, $p=0.447$) [Action Point 8].

We will assess the impact of the new PDR process [Action Point 8]

Action Point 8: We will assess the impact of the new PDR process



(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.

Support is provided on a personalised basis, covering the breadth of research and career pathways. Primary support includes PDR (5.3(ii)), training (5.3(i)), and promotion (5.1(iii)).

Mentoring: Our survey in 2016 showed:

- A quarter of respondents (12% in 2014) had a mentor since joining the School (31% academic and 14% PSS).
- 18% had been a mentor (23% academic and 7% PSS).
- Two-thirds indicated that they would like to participate in the mentoring programme.

Table 27 shows the key factors that staff identified as important gains from mentoring.

Table 27: Factors from the survey that were identified as important gains from mentoring

Factors	% rated as important/very important
Expand knowledge of career path and options	88%
Improve job satisfaction and morale	82%
Develop interpersonal and communication skills	65%
Develop teaming capabilities	65%
Gain knowledge of a different function	56%
Improve networking capability	56%
Expand knowledge of the School	53%
Learn how to balance work and life	44%



We relaunched our mentoring programme in 2017, with broadened remit to include PSS. We have shared this best practice with the Department of Psychology (UoY) when they were developing their AS Action plan.

In 2017 (York) and 2018 (Hull) academic and PSS mentoring training sessions were delivered to the School by the Head of Learning and Development (UoH). In 2017, 11 mentees (10F and 1M) and in 2018 6 mentees (3M;3F) were matched to a mentor by the mentoring lead (AS Champion). Mentors were either from within the School or in the wider universities.

The SAT gathers mentee's feedback as part of regular review:



Educational Facilitator and PBL Tutor (F) enrolled as a mentee in 2017 and in 2018 this member of staff was appointed as Deputy Director Admissions in 2018:

'I am a medic with no previous experience of being mentored but was encountering an administrative problem at the university. The mentor regularly contacted me to explore how the approach was progressing and offered to become directly involved if required. The problem was resolved within an agreed time frame. I found the mentoring process supportive and empowering. As a consequence I felt valued by the university with improved job satisfaction'.

Technical staff member (F) enrolled as a mentee in 2017 and since appointed Deputy Mortuary Manager:

"I find that speaking confidentially to someone outside my team is incredibly useful. Getting a different, impartial perspective has helped me deal with a few situations that seemed complicated at first. My role is developing quite quickly and the support that mentorship offers gives me more confidence."

Recommendations to MB resulted in mentoring been included in all job descriptions and part of the workload model (5.6(vii)). All new staff are now assigned a mentor, which is on the induction checklist (5.1(ii)). We will continue to promote mentoring [Action Point 9].



In 2016, 31% of academic staff and 12% of PSS stated that they had a mentor since joining the School. In the TCS, 38% academic (50%F:26%M, $p=0.138$) and 21% PSS (21%F:20%M)) stated they have a current mentor. This shows increased engagement with mentoring in the School.

Action Point 9: Encourage staff to engage with mentoring particularly at transitional points in their career and to progress to more senior positions within the School.

Through the **NIHR Integrated Academic Training Programme** our Academic Clinical Fellows (ACFs, currently 9F:4M) have been part of our SAT for most of its duration and contributed to all our awards. We support ACFs' career progression. The highlights:

- Three have gone on to become NIHR CLs.
- Two have undertaken MDs.
- Seven have undertaken or are undertaking PhD.
- Two (1F, 1M) have won highly competitive NIHR Doctoral Training Fellowships.
- One (F) has been appointed as a Public Health Speciality trainee in Yorkshire and the Humber and is appointed as an editorial board member of the British Journal of General Practice.
- One (M) has presented internationally at North American Primary Care Research Group Conference 2017.



- One (F) presented at the 5th Global Mental Health Summit in Johannesburg in 2017.



The adoption of an integrated career pathway for clinical academics, as championed through the Yorkshire Deanery and fully supported by the School, demonstrates our commitment to AS. This means that NHS and university service are mutually recognised. Staff now qualify for benefits such as paid maternity and paternity leave and maintaining pensions rights. This has resulted in national guidance and organisations such as the Wellcome Trust adopting it.



The benefits of the integrated career pathway is illustrated in Case Study 3.

Academic Women's Groups: Both universities have groups that support and discuss women's issues in academia. At York, the AS Champion sits on the Women's Forum (WF), an all-female group focussing on gender equality. Hull addresses the underrepresentation of women in research through bespoke initiatives, e.g. the in-house PoWER programme for Women Achieving Excellence in Research and Minerva Network for Academic Women.

AURORA: Our MB approved funds to support one member of staff to attend AURORA on an annual basis. In the last 2 years two staff have attended the programme (1 Academic, 1 PSS).



"The development days were extremely useful. I particularly enjoyed the action learning sets and the excellent, inspirational external speakers" Lecturer

"I would recommend it for colleagues who are in or about to begin leadership roles. I have developed some excellent professional relationships and I have learned a lot – which I look forward to putting into practice." PSS

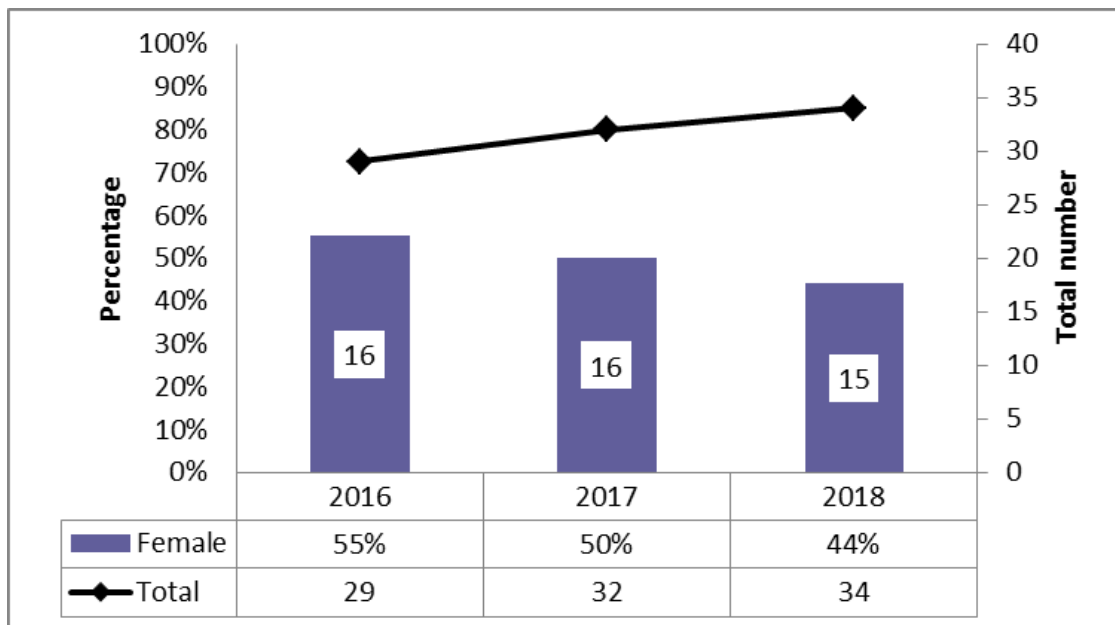
(iv) Support given to students (at any level) for academic career progression

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).

Undergraduate:

Our innovative UG medical curriculum is shaped by problem-based learning (PBL) with Year 1 and 2 students assigned to a PBL group. Figure 27 shows that PBL tutors are gender balanced. They are important role models for students in a clinically relevant context. The Director of PBL is female.

Figure 27: PBL tutors



A **personal mentor scheme** for students (Year 3 onwards) was established in 2015, providing a first point of contact for pastoral and academic support as well as careers' guidance, as students rotate in clinical placements. In 2018/9, there are 104 personal mentors (48%F).

The School has invested in additional student support capacity and our **Schools Support Team** has 2,000 student contacts a year, providing support for personal, financial, health, mental health, learning and professionalism needs. This is to help students through their education and fully recognise the importance of all students receiving an equal experience throughout their time with us. Since 2016 there has been 1M and 1F Director. We are investing in additional staff to preserve the quality of this service as our medical school expands.

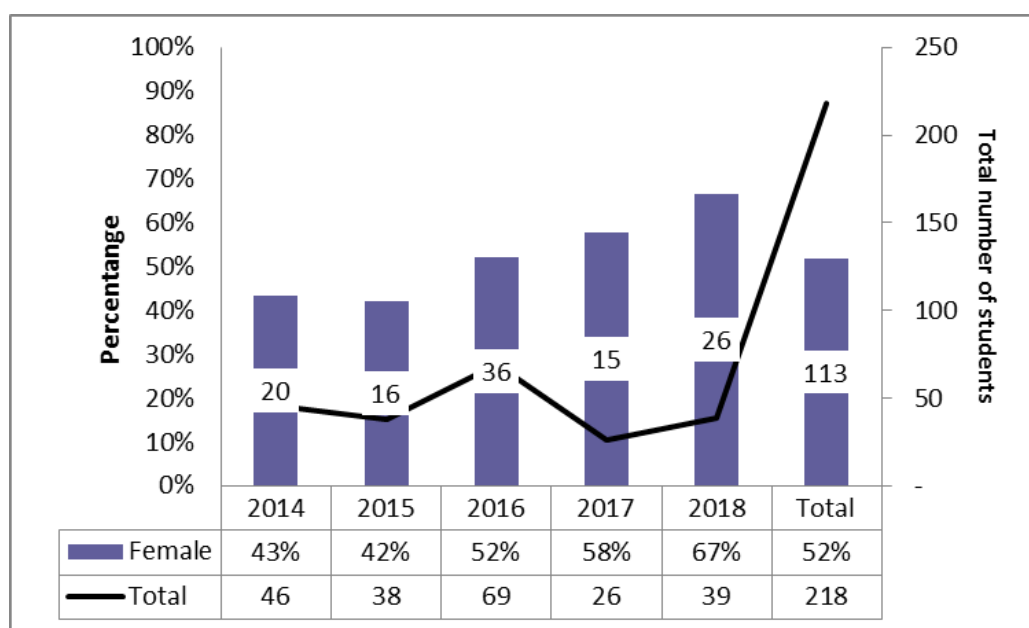


To share good practice, since 2017, we hold an annual 'Hull York Medical School Student Support Conference' - attended by representatives from UK Medical Schools. In May 2019, the 3rd conference will focus on support to address inequalities, including support for BME and Widening Participation students.

The careers of medical UGs are complex, multifaceted and influenced by their experiences of teaching and perceptions of the NHS environments. Similar to many medical schools, we offer our students practical careers guidance to fulfil the requirements of specific career pathways.

Some of our students take a year away from medicine to undertake another degree to strengthen their career prospects (**Intercalation**). In 2018 we ran tailored briefing events to all students in Year 1 for the first time, in addition to Year 2 sessions, to inform students of the benefits of intercalation, the opportunities available and support their applications. National benchmarking is difficult as these programmes vary. Male students are less likely to intercalate (Figure 28) and we will investigate why [Action Point 10]. We host a national intercalation website, providing a directory of intercalated degrees across the UK. Annually the site has 30k unique views, proving that it is a useful national resource for all medical students.

Figure 28: Number of Intercalated students



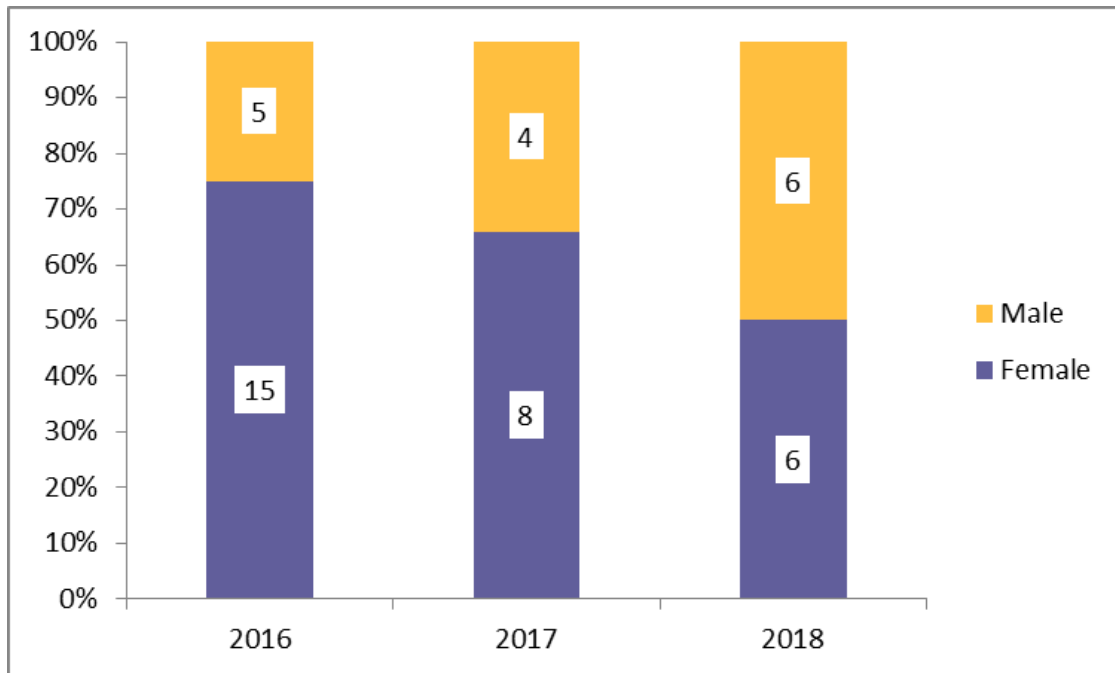
Action Point 10: We will investigate the reasons why male students are less likely to intercalate.

Mandatory **careers events** are held in Years 3 and 5 to prepare students for choosing different careers pathways and the practicality of the Foundation Year application process. These events engage students with academics and clinicians from a wide range of disciplines. We ensure diversity of our speakers to facilitate stronger role-modelling.

INSPIRE, funded by the Wellcome Trust/ Academy of Medical Sciences, aims to encourage medical and dental students to gain experience and understanding in research and potentially consider it as a long-term career. A programme of seminars and workshops has been offered to students annually since 2013. Annually students work on a research project with an academic staff. We achieved gender parity in 2018 (Figure 29). Students attend our annual PGR Research Conference to present their work. The programme has a female lead.



Figure 29: INSPIRE summer project students by gender



Scholarship and Special Interest Programme: Year 3 and 4 students work as independent scholars to pursue their intellectual interests via a longitudinal research project, refining their skills as researchers and developing their professional network.

MedlyBlog.com is a medical education project created by a final year MBBS student (F). It supports students' personal and professional development by offering writing experience (with student-led editorial support and expert review from senior staff). The main barrier to students attending national conferences is cost and the conference reporter programme eliminates these barriers through the use of press passes. Students have attended a range of conferences including: the British Society for Heart Failure, the Society of British Neurological Surgeons, and the Royal College of Psychiatrists.

Longitudinal Integrated Clerkship (LIC) will be piloted in 2019/2020 for students to spend Year 4 in rural GPs. Research shows that LIC students are more 'work ready' by their clinical teachers than those on block rotations. We are looking to have a gender balanced [Action Point 11].

Action Point 11: We will review the gender of the LIC cohort and the staff involved.



Postgraduate: We collaborate with the two Universities' Careers Services to provide one-to-one career guidance to support PGT careers. PG Virtual Open Days, led by the University of York, allow prospective students to learn more about our programmes. Table 28 shows the attendance at these events are gender balanced.

Table 28: Attendees at the Postgraduate Virtual Open Day by gender

Gender	November 2017	February 2018	June 2018
Male	4 (57%)	18 (50%)	7 (54%)
Female	3 (43%)	18 (50%)	6 (44%)
Total	7	36	13

In 2018, we held a focus group to address the challenges faced by PGR students. Key themes were:

- Applicants felt uncomfortable raising the need for flexibility in interviews, fearing it would be looked upon negatively.
- Funded PhDs are normally advertised as full time, with no part time option.
- Working from home makes balance easier and supervisors were supportive of this.
- Concerns about life beyond PhD and availability of part-time research posts.

Responding to the feedback, we will improve issues around work-life balance [[Action Point 12](#)]. We do support flexibility, e.g. The HPEU has four PhD students who are all female. One is a mother studying by distance learning and another has changed her programme to part-time in order to facilitate home commitments.

Action Point 12: To improve PGR experiences around work-life balance

Each PGR student has regular documented meetings with their supervisors and a bi-annual **Thesis Advisory Panel (TAP)**. The TAP reviews the student's progress and professional development. In the School it is embedded practice that we consider gender when TAP members are nominated, to ensure balance.

The School also considers gender of **Viva examiners**, e.g. if we have a female student and male examiners are nominated, we ensure a female Chair is in place. PGR students have access to **Student Support**.

Our annual **PGR Conference** – attended by 79 staff and students (58%F) in 2018 – enables PGR students to share their research with a wider audience and meet other researchers within and beyond their field of study. There is gender parity in the awards (Table 29).



Table 29: Gender for prize winners at the Postgraduate Research Conference

	Best oral presentation	Best poster presentation	Best 3 minute thesis presentation
2016	F	M	M
2017	F	F	M
2018	F	F	M

Figure 30: The School's PGR Conference

(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.

Support and advice for our researchers (staff and students) is provided by the School's Research Office (RO), based at Hull.

A Methods Hub (MH), based at Hull, offers methodological expertise and facilitates a step change in research: good methodological input into studies is critical to obtaining funding. The newly formed (2018) Hull Health Trials Unit (HHTU) provides further support. The Director of the HHTU is female.

To co-ordinate research activity and support those applying for research grants, we appointed three Directors of Research (3M) in 2017. They promote research grant development, peer review, and network opportunities. Senior staff support more junior academics in the preparation and submission of applications, e.g. joint CI applications, commenting on drafts, co-working on applications and with supervision both before and after submission.

Academic staff are part-funded by the NIHR Research Design Service. This gives staff methodological support in developing research applications and offers workshops, such as developing a high-quality funding application, public involvement in research and applying for an NIHR training fellowship. These events are advertised internally through BoomerangOnline.

Procedures for grant application sign-off vary. For staff who are employed by York, they follow the procedures of the department/faculty in which they are embedded, whereas staff who are employed by Hull there is a Research Portal containing information on the Medical School approvals process. Support to those who are unsuccessful is provided by senior staff.



The support offered is comprehensive. In the TCS, only 15% (16%F:15%M) stated that it would benefit career development to get further information and advice on applying for grants.

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?

Staff have access to the training courses detailed earlier in 5.3 (i).

There has been an increase in training opportunities (Table 30) taken and in Staff Development Fund awards (Table 31). PSS staff are also supported to take leadership courses (2016 (3F:1M), 2017 (3F), 2018 (1F:1M)).

Table 30: PSS Training

Year when training was completed	Female	Male	Total	% Female
2015	40	19	59	68%
2016	47	22	69	68%
2017	112	31	143	78%
2018	76	38	114	67%
Total	275	110	385	71%

Table 31: PSS Staff Development Fund awards by gender

2015/2016			2016/2017			2017/2018		
Female	Male	% Female	Female	Male	% Female	Female	Male	% Female
9	4	69%	8	3	73%	10	6	63%

Staff taking up secondment roles are encouraged to attend training relevant to their new roles:

"I felt supported in my secondment role, attending training specific to my role made me more confident and efficient in my day to day work" Project Coordinator (F)

(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.

PSS staff undertake the same PDR process as academic staff (5.3 (ii)).

In the TCS, 71% stated that career progression is discussed in PDR (77%F:50%M, p=0.107) [Action Point 8] and 68% stated they were encouraged to training to contribute to a stronger CV (74%F:50%M).



(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.

Every member of PSS is part of an allocated team, with monthly team meetings. These important meetings provide a networking and support infrastructure, as well as integral development opportunities, such as that gained from having a rolling chair and initiation of templates, for example Standard Operating Procedures.

Due to the current size and configuration of the School there are no immediate plans to have a School specific PSS fora, although there are numerous opportunities for colleagues to come together to support and guide each other. PSS Networking Fora are promoted in the two universities and staff are encouraged and supported to attend.

Line Managers, HR, and Business Administration teams provide support for training, mentoring, and networking opportunities. The School encourages staff to apply for secondment roles for their professional development and to apply for higher grade roles (5.2(ii)).

The universities both offer a Springboard programme which is a three-month personal and professional development programme specifically developed and written for women. In 2018/9, one of the School's staff enrolled.

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.

Due to our dual university structure, once a member of staff informs their LM, the EO act as liaison between the member of staff and the employing central HR. Meetings are held to discuss any issues and arrangements are made for covering teaching, research, administration and managerial responsibilities. Staff are given paid time off to attend appointments.

We've introduced safe working policies and regular monitoring for potentially hazardous environments such as the anatomy laboratories (use of formaldehyde) specifically to reassure and support staff and students who are pregnant, seeking to become pregnant or breastfeeding. Supportive equipment, such as an alternative chair, is available through the School's Health and Safety Officer.

A student in the early stages of pregnancy expressed concern around participating in practical anatomy sessions due to the presence of formaldehyde. The Senior Mortuary Technician researched 'safe' levels and was able to reassure the School and the student that the levels in the laboratory were well below the nationally recognised safe limit. This monitoring is now a regular activity to maintain this reassurance.



(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 maternity leave staff are offered (or can request) up to ten Keeping In Touch (KIT) days and Shared Parental Leave in Touch (SPLIT) days. Staff retain access to their workplace email address throughout their time away, should they wish to use it. Contact is at the instigation of the person on leave, however major developments or changes may be communicated by letter to a home address. Staff are invited to social events during leave.

(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.

Towards the end of leave, staff have a 'return to work' meeting with the HoD (academic staff) or their LM (for PSS). Staff are supported in their return through a variety of means e.g. reduced workload, flexible working and part-time working. We've supported extended handover periods prior to and on the return from maternity leave, e.g. our Assessment and Progression Manager was due to return to her role just prior to the final year examinations. We supported the continuation of her maternity cover post for a month following her return to enable those assessments to be delivered by the person who had planned them.

In Hull, staff can make use of the dedicated breastfeeding room and at York there are spaces on campus allocated for staff wishing to breastfeed or express milk in private.

(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.

Eight staff have taken maternity leave in the last three years with all staff still in post. We support staff who want to return to work on reduced hours, e.g. a Reader returned to work 0.6fte compared to 0.9fte pre-maternity leave. Both full-time PSS staff returned to work part-time (0.8fte), with one member of staff gradually increasing her hours. The Research staff all returned full-time.

Table 32: Maternity Leave

	2015/2016	2016/2017	2017/2018
Researcher	0	2	2
Senior Lecturer	1	0	0
Reader	0	1	0
PSS	0	2	0

(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.

In the last 2 years, seven staff took paternity leave, with 57% taking the maximum of two-weeks leave (Table 33). The EO makes staff aware that they can take shared parental leave but most chose not to do so, preferring to use their annual leave to extend their paternity leave. One PSS took one week paternity leave and then annual leave to take a further three weeks off.

In 2018 a Reader (F) took three weeks unpaid parental leave, which combined with annual leave allowed her to take the school summer holidays away from work. No staff has taken adoption leave in the last three years.

Table 33: Paternity Leave

	2016/2017		2017/2018	
	1 week	2 Weeks	1 week	2 Weeks
Researcher				4
SL	1			
PSS	1		1	

In the TCS, 94% stated that they felt 'supported by my department before during and on return from maternity/adoption/shared parental leave,' (93%F: 100%M).

(vi) Flexible working

Provide information on the flexible working arrangements available.

Flexible hours is accepted working practice in the School and we trust staff to carry out their responsibilities without necessarily being on site all the time.

- Many staff have flexible work patterns and work from home, helping them maintain a healthy work life balance. A number of staff work part-time: (2018: Academic 21%F;18%M, PSS 25%F;28%M).
- Staff with children are able to structure the work around family friendly hours, e.g. one of our technical members of staff (F) who works in term time only.
- Several of our staff collect their children from child care or school and have flexibility to attend school events e.g. nativity plays.
- For academic staff differential working patterns do not adversely affect promotion and this can be stated in the consideration of individual circumstances form.
- The majority of flexible working is taken up by local agreement and is not formally recorded.



- Any request for flexible working that requires a change in employment contract then a formal process is implemented e.g. change in hours, job share and job splitting and term-time only working.



Feedback from staff on flexible working:

“I am now in a full-time leadership role but a flexible approach to my diary remains very important to facilitate drop off, pick up and key events at my son’s school.” (Head of Quality and Standards (F))

“I was able to take advantage of flexible working, which made my return from maternity leave much easier. I came back part-time (0.8FTE), moved to full-time hours over four days and have now returned to a standard five-day week. My line manager encourages me to work flexibly in order to balance my commitments at work and home. Without this support, I would not have felt able to apply for promotion within a year of returning to work.” (MBBS Programme Manager, F)

“The ability to work flexibly allows me to undertake drop off and collect my son from childcare. I also greatly appreciated the ability to work from home when he was unwell, the set-up of the School means that video conferencing for meetings is ‘business as usual’ so I was able to fully participate from home.” (PSS, M)



Survey data demonstrates the impact of our flexible working environment:

York survey (2017): 72% felt that the School had policies and practices to help achieve the right balance between work and home-life, 88% said they were able to work flexibly (80% in 2014), which included flexitime (62%), homeworking (50%) and part-time working (19%).

Hull survey (2018): 69% felt that they have a good work-life balance and 73% stated that their LM enabled them to find a good work-life balance (68%, 2016).

In the TCS, a high proportion of staff worked flexibly and felt it was supported by the School (Table 34).

Table 34: TCS findings for flexible working

	PSS		Academic		Total	
	Male	Female	Male	Female	Male	Female
I work flexibly	90%	84%	61%	80%	72%	83%
Flexible working is supported by the School	100%	82%	95%	83%	97%	83%

(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 do not distinguish between types of career break. Our approach is very supportive and flexible and essentially as described above.

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.

Outreach activities for MBBS

- We have a track record in recruiting students from lower socio-economic backgrounds. In 2016, our POLAR3 Quintile 1 (lowest higher education participation) was 9.2% (sector target 8%) and Quintile 2 was 15.4% (sector target 12%). We achieved 2023 targets set out by the MSCI six years ahead of schedule.
- We're committed to recognising applicants with the best potential regardless of background and our Widening Participation (WP) Strategy helps address under representation. Our WP and Outreach events and activities included over 2225 students in the 2017/18 academic year - led by our WP/Outreach Officer (F), supported by the Admissions Tutor (M) and WP lead (M).
- Aligning with our WP Strategy, our summer residential attracts a higher proportion of females (Figure 31). The participants have applied for our MBBS: 2016, 15/39 (38%F) and 2017, 28/46 (61%F). HESA data shows that the number of women entering medicine is rising, however we need to engage more males in WP programmes [Figure 31].

Figure 31: Summer school residential by gender

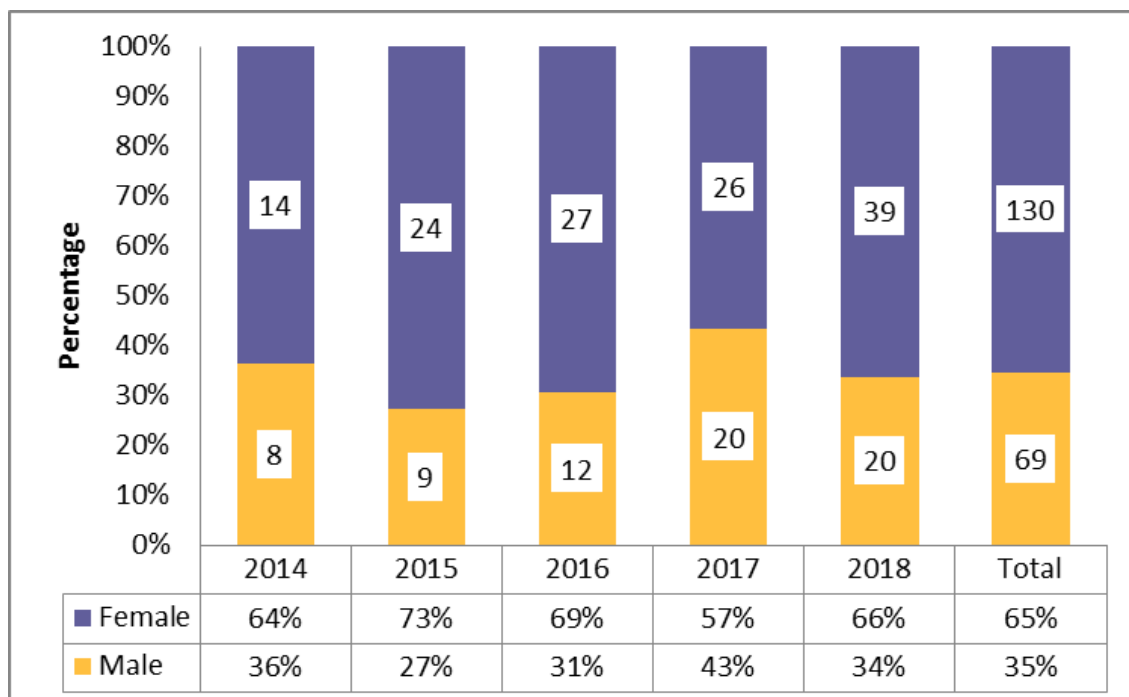


Figure 32: Picture of the summer school residential by gender

Our **Pathways to Medicine** programme, funded by HEE, is a 2-year programme with local sixth form students - We are one of only two medical schools participating in this programme. It is predominately attended by young women (Table 35). Over the past 3 years 10 students have applied to the School (7F:3M).

A first year MBBS student (F) in feedback stated *‘without the Pathways to Medicine Programme I would never be where I am now. The Programme allowed me to stand out from the crowd at interview, gave me opportunities to develop as a person and strive to reach my dream of becoming a doctor’*.

Table 35: Pathways to Medicine programme by gender

Academic year	Female	Male	Total	% Female
2015/16	25	8	33	76%
2016/17	25	18	43	58%
2017/18	33	11	44	75%
Total	83	37	120	69%

We support the **WP schemes run through both universities**: In 2018, 5 students progressed into the medical school (3F:2M).

To deliver our WP and outreach activities we work with **ambassadors** from our current student body. We have 133 registered ambassadors from across all 5 year groups of the MB BS programme (90F:43M, 68%F).

Public Engagement by staff:

Our scientists take part in a range of public engagement. The following highlight some of the events attended by our staff:

Staff joined peers from Hull, University of Leeds and University of Bradford to take part in the 2017 soapbox science event, which celebrates women in science. Staff (2F) engaged passers-by on subjects as diverse as muscle names and airway irritants.

Figure 33: Picture of Soapbox Science event

The School celebrated the 70th birthday of the NHS in Hull. Staff, students, graduates and members of the public gathered to watch the building light up blue to pay the NHS tribute.

Figure 34: Picture of the 70th birthday of the NHS

Staff attended the British Science Festival in Hull (2018). The event allowed the public to experience yoga with muscles highlighted in UV paint, showing the complexity of human musculature. This led to the BBC filming the lecture at the School.

Figure 35: British Science Festival in Hull

In 2018, a city-centre pub in Hull was transformed into a science lab on Valentine's Day, as staff performed a live dissection of a cow's heart in front of a sold-out audience.

Figure 36: Science lab on Valentine's Day

Staff were invited to contribute to the Royal Institution's famous Christmas Lecture series. The lectures aired on BBC4 on 26-28th December 2018 and the team provided the expert anatomical body paintings.

Public lecturers:

- In Hull, the annual **Allam Lecture** and is attended by staff and students from local and regional universities and hospitals, to sixth form colleges and members of the public. In 2018, prizes were given for the outstanding oral presentations (2M and 1F) and poster presentations (2M and 2F).
- In York we host the annual public **John Snow Lecture**. In 2018, the speaker was Dr Iona Heath, former President of the Royal College of General Practitioners – in the last five-years 3F and 2M speakers.

(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.

Publicity materials:

A **new brand and visual identity** was launched in 2017. The new website was designed to ensure females were equally represented in the images. Our home page shows images of 3M and 3F staff and students (Figure 37).

Figure 37: School's website home page:



Our website also highlights the achievements of our staff:

Figure 38: Website snapshots of achievements of our female staff



An important role model for both staff and students in our School is our female Dean. In 2018 she received an **award for her Services to Medicine** at the inaugural English Women's Awards. The awards provide an opportunity and platform for women to inspire others.

In 2018, Professor Christina van der Feltz-Cornelis was recognised as one of eight senior academics by the **UoY as an Inspirational Research Leader**, making major contribution to the School's research impact and standing.

Figure 39: UoY Inspirational Research Leader



The FHS at Hull was delighted to welcome **Her Majesty The Queen** to officially open the Hull Allam Medical Building in 2017. Figure 40 shows HM accompanied by the Hull Vice-Chancellor, the Dean of the FHS and our Dean (all women).

Figure 40: Visits of Her Majesty The Queen



International Women's Day (IWD): Each year, we invite a female senior academic to deliver a talk at our annual IWD seminar. Open to staff and students, it is video-linked between York and Hull, to maximise attendance (Figure 41).

Figure 41: International Women’s Day in 2019

Seminar Series: All staff and students can attend the seminar series in the embedded departments at York, HPEU seminar series and ICAHR. The organisers ensure gender balance (Table 36) and are advertised through BoomerangOnline.

Table 36: Gender balance of speakers in seminars in 2017/18

	Male	Female	Total	% Female
Department of Health Sciences (UoY)	15	16	31	52%
Biology (Centre for Immunology and Infection (UoY))	23	12	35	34%
Psychology (UoY)	11	8	19	42%
HPEU (UoY and UoH)	3	5	8	63%
ICAHHR (UoH)	5	5	10	50%
Total	57	46	103	45%

Invited speakers: We invite external speakers to talk to students. For example in November 2018, students were invited to attend a lecture by Professor Wendy Burn (President of the Royal College of Psychiatrists) who gave a talk entitled Brain in the Mind. We also advertise events on BoomerangOnline at both universities that promote women.

Figure 42: Snapshot of BoomerangOnline advertising events that promote 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.



Given our extensive experience in working towards full implementation of an Athena SWAN agenda and a gender neutral working environment, we are ideally placed to share the benefits of this experience and knowledge by participating in Beacon activities and we take an active role within the University and externally.

External:

- The adoption of the recognition of NHS/university service within the pathway for clinical academics, as championed through the Yorkshire Deanery and fully supported by the School, demonstrates clearly our commitment to the Athena SWAN principles (Case Study 3).
- The School's national conference "Hull York Medical School Student Support Conference" is a platform to share good practice (5.3(iv)).
- The Dean is a role model to our staff and students and was awarded for her Services to Medicine at the inaugural English Women's Awards in 2018. She had undertaken beacon activity including:
 - Co-chair (with CEO) of MSC Equality and Diversity Implementation Working Group (2017-2020).
 - Invited panel member (2018) to share experiences of the barriers faced on the journey to leadership at the 'Women leading in education network Yorkshire and Humber.'
 - Invited (2019) to York Medical Society in celebration of IWD to share reflections on women in medicine.
- AS champion represents the School on UK Medical Schools and Faculties AS/EDI Leads group to share and disseminate good practice.
- AS Champion, and the Dean, review AS applications from other medical schools, acting as a critical friend.
- Collaboration (2019) with colleagues at Birmingham, Plymouth, Kings, Oxford and Bristol universities for a tender "Why are senior clinical academics male? – understanding the attractiveness of and attrition in clinical academic careers for doctors and dentists in the UK" as part of the NIHR gender inequalities call.
- Successful WP programme of events/outreach.

Universities:

- **At York**, the AS champion shares the Schools good practice and experience in the application process by:
 - Representing the School on the Women's forum.
 - Representing the School AS Science Faculty Working Group.
 - Buddy system with Psychology SAT.
 - Supporting development of a Sliver award for Department of Health Sciences, including sitting on the SAT.
- **In Hull**, we were the first School to receive an Athena SWAN award, getting this before the University had received its own Bronze award (as we were considered a department of York). We have therefore advised extensively on bronze and silver departmental applications. The AS Champion sits on:
 - University Athena SWAN Steering Group, as does the Dean.
 - FHS AS Champions group, instigated by our AS champion.
 - University Equality, Diversity and Inclusion Committee.
- Student Staff Committee presented at the York University Student Union Showcasing Excellence Conference (5.6 (iii)).

Internal:

We have championed ways to better the career development of our staff and students:

- Successful mentoring, open to both PSS and academic staff, has benefitted many staff to aid career progression. The model has been adopted by other university departments.
- Embedded AS principles for students, e.g. MBBS interview process and TAP panels.
- Dedicated resource - 20%fte AS Project Officer and budget for events.
- Annually, the School funds a place on the AURORA programme.
- Improved PDR process, with training and promotion now a formal part of annual PDR.
- Workload model providing a more transparent mechanism to help equalise loads.
- Commitment to gender equality of speakers in seminars and our annual IWD seminar.

Action Point 13: Through our beacon activities, that we promote the benefit of our activities – both internally and externally – to disseminate gender equality and INSPIRE others to reach AS ambitions.



(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 strategy states that “We will be a high performing organisation which provides an inclusive and supportive environment for all students, staff and partners.”



The strategic objectives demonstrate our commitment to AS Charter principles and its impact can be demonstrated by survey findings:

- York survey (2017), 87% believed the School was committed to equality of opportunity for all staff.
- Hull survey (2018), 82% stated that the School was supportive and inclusive - 69% were positive on a university level and 69% at faculty level.

Our TCS will provide annual data to measure meaningful change in the School [[Action Point 14](#)].

Action Point 14: Measure meaningful change in our working and culture across the School which can be difficult to capture

We will increase awareness of gender equality through embedding the SAT in the EDIC and the strategy [[Action Point 15](#)].

Action Point 15: Increase awareness of why gender equality matters to the School and to individuals who work and study here to maintain staff and student engagement

The School’s Strategy is being updated and a gender-balanced working group has been tasked with defining the School’s values. With AS principles embedded, they are identifying staff development needs regarding values based working e.g. in recruitment of staff and students, probation, PDR, rewards and promotion, staff development, workload allocation and budget planning [[Action Point 16](#)].

Action Point 16: Ensure that the School’s new values and School strategy reflect the AS principles.



Awards:

We have two awards ceremonies for students rotated between York and Hull - our Student Prizegiving Ceremony (Years 1-4) and Graduation Ceremony (Table 37).

Table 37: Student prizes awarded

Academic year	Female	Male	Total	% Female
2015/16	31	21	52	60%
2016/17	25	17	42	60%
2017/18	29	18	47	62%
Total	85	56	141	60%

Staff contribution is recognised at the School's Teaching Excellence Awards in May - nominations are from staff and students (Table 38). We also present a 'Women in Science' award (Case study 3), implemented as part our AS work.

Table 38: Prizes awarded at the School's Teaching Excellence Awards

Year	Speakers			Prize winners		
	Female	Male	% Female	Female	Male	% Female
2016	2	3	40%	6	12	33%
2017	2	2	50%	8	12	40%
2018	2	3	40%	11	10	52%
Total	6	8	43%	25	34	42%

For a small School, many of our staff have won **prestigious awards** from both Universities (Table 39). These are important markers of esteem for promotion (Academic Staff) and career progression for PSS.

Figure 43: University-wide award winners



Table 39: University-wide staff awards

UoY Vice Chancellor's Teaching Awards	Recognise exceptional contribution to teaching	2017: Senior Lecturer (M) 2017: Senior Lecturer (F) 2018: Senior Lecturer (F)
UoH Employee Awards	Excellence in Research	2017: Professor (F)
UoY Students' Union Excellence Awards	Recognition of outstanding work as academic supervisor to students.	2018: SL (F)
UoY Staff Excellence Scheme	Staff excellence	2018: 1M:3F (PSS)
UoH Student-led Teaching and Support Awards	Gone the extra mile to support students	2018: Assessment and Progression Coordinator (F) 2019: Postgraduate Research Administrator (F)
UoH Student-led Teaching and Support Awards	Making a Difference in the Workplace	2018: Head of Quality and Standards (F)

Staff newsletter:

- A new-look staff monthly newsletter was created responding to an internal communications staff survey (2017).
- Features a staff profile - in its first year, 6 of these were female colleagues (academic and PSS).
- In March 2018, it was themed to celebrate International Women's Day.
- In the TSC, 75% believed communication in the School was effective.

Student representation within the School has grown substantially during the past academic year. Student representatives across the MBBS and PG programmes, sit on all our School committees. Excellence in student representation has been recognised by the Universities: Course Rep of the Year (F, 2017) and School Rep of the Year (M, 2018), for the work done on communication to and from the student body, and on student voice.

In June 2018, the work of our Student Staff Committee on student voice was presented at the York University Student Union Showcasing Excellence Conference. This was to share good practice around internal structure of student representation and matters raised by the student body.



(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.

Departmental meetings: In 2015 we introduced core hours for meetings (10am - 4pm) to accommodate commitments and promote work-life balance. Video-linked meetings are quotidian for us to reduce travel between two campuses and enable clinicians to attend in multiple NHS sites. If a meeting is held outside core hours, advance notice is given to allow for any necessary arrangements. We annually re-assess the necessity of holding meetings held outside core hours.



In the TCS, 85% stated that departmental meetings are held at times they can attend (83%F:90%, p=0.367).

Social gatherings: Our Staff Social Committee is currently led by a female PSS, joined by PSS and academic colleagues. Events run throughout the year, including charity fund-raising and festive celebrations.

Figure 44: Staff events

(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 policies.

- We work closely with our dedicated HR Advisers in both universities to ensure policies and procedures are promoted and understood across the School – Both advisors sit on MB.
- Monthly meetings are held with EO, SLT and the HR of both universities to ensure consistency and collaborative working.
- As part of the staff induction process, staff are directed to the universities' online HR policies ensuring that the most current versions are the reference.
- Significant changes to policy and staff development opportunities are announced through the universities' staff newsletters and also promoted on BoomerangOnline.

(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.

- Although workload models exist in Hull and in embedded departments in York, we have created a model that works across two universities and suits our diverse academic staff with multiple commitments including clinical.
- The model was considered by the MB in 2018.
- A gender-balanced Working Group was formed to test the mock model before wider consultation, with full implementation planned by August 2019 [Action Point 17].
- The model promotes work-life balance through the principles of equity, transparency, and flexibility. Unlike many models in the sector which do not count research time, our model counts the essential components of academic workload – teaching, research, scholarship, academic administration/citizenship, and professional development.
- The School's workload model recognises EDIC membership and AS activities.
- The annual workload data will be analysed and we look forward to evidence the impact of the workload model on our staff in the academic year 2019-20 [Action Point 17].

Action Point 17: Ensure all academic staff have workload agreed within academic year 2018/19 and annual workload data will be analysed in the academic year 2019-20



(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.

In 2016, the SAT reviewed committee membership and found reasonable gender balance. However the role of Chair remains predominantly male. Noting that, MB recommended that the terms of references for all committees should include a requirement to review membership at the end of each academic year. All terms of reference now state that they have “powers to co-opt up additional members to redress perceived imbalances or deficiencies in expertise.”

The impact of the review is in an increase in proportion of females on committees and more female Chairs (Table 40).



Table 40: Internal Committee membership by gender

Committee	2016/2017				2017/2018			
	Chair	Male	Female	% Female	Chair	Male	Female	% Female
Management Board	F	8	7	47%	F	8	12	60%
Board of Studies	M	14	11	44%	M	15	13	46%
MBBS Programme Board	M	13	5	28%	M	9	8	47%
Postgraduate Board	M	8	12	60%	F	9	12	57%
Board of Examiners	M	4	3	43%	M	3	4	57%
Fitness to Practise Committee	M	11	11	50%	F	10	11	52%
Student Support committee	M	15	22	59%	F	22	24	52%
Ethics Committee	M	6	8	57%	M	6	8	57%
Athena SWAN SAT	F	5	17	77%	F	7	18	72%

- It is not the School policy to require every staff member to participate in a committee and it is dependent, in part, on their roles within the School.
- New members are recruited through open-advert on BoomerangOnline, with staff providing a statement of suitability for the role.
- All committee Chairs now have a deputy, which supports career progression.
- All agendas have a standing item for EDI issues.

- Committee overload is scrutinized by:
 - Monitoring committee membership and attendance records.
 - Discussion during PDR.
 - Rotation of membership and Chairs as defined in the terms of reference.

We have established working groups for expansion, reporting to MB, ensuring gender balance (Table 41).

Table 41: Composition of MBBS Expansion Working Groups

Expansion Working Group	Gender of Chair/Co-chair	Membership	Remit
Strategic Planning and Development Group	F/M	5F:4M	Strategic direction
MBBS Expansion Group	F/M	5F:6M	Education and student experience
Academy of Primary Care Group	F/M	28F:18M	Establish a transformation hub
Projects and Process Improvement Group	M/F	9F:6M	Support expansion

(ix) Participation on influential external committees

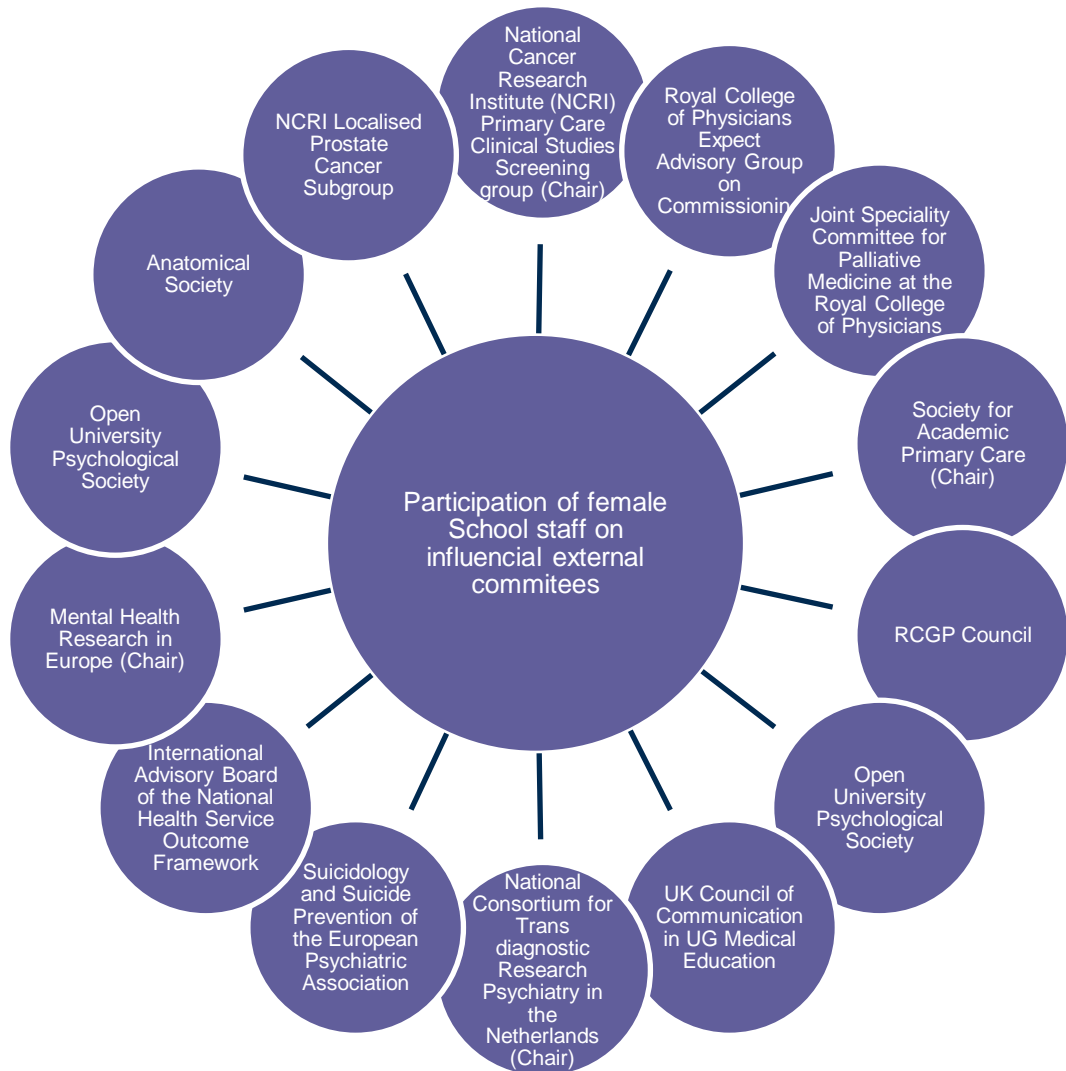
How are staff encouraged to participate in other influential external committees and what procedures are in place to encourage women (or men if they are underrepresented) to participate in these committees?

Staff participation on external committees is an important mechanism that raises both individual and the School's profile, and contributes to promotion. All staff are supported to participate on university committees and this is in the workload model.

In 2018, we audited staff to gain information on membership of external committees - a selection of these is shown in Figure 45.

Several female staff received prestigious invitations to give lectures, including international conferences e.g. Australia, Canada, Germany, Italy, Holland, Sweden, Denmark and the USA. These invitations are important for the reputation of a small medical school and we support all staff to attend where possible by freeing up commitments and ensuring financial support (See Table 25).

Figure 45: Female staff participation on external committees (some examples)



WORD COUNT: 7093

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.

Case Study 1 (York Academic, Member of SAT, Female)

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

Case Study 2 (PSS, Non-member of SAT, Male)

[Redacted text block 1]

[Redacted text block 2]

[Redacted text block 3]

[Redacted text block 4]

Case Study 3 (Clinical Academic, Non-member of SAT, Female)

[Redacted text block]

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WORD COUNT: 1623

7. FURTHER INFORMATION

Recommended word count: 500 words

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

As the School is a joint medical school across two Universities, we faced particular challenges in collecting all the staff and student data required for this application. Different models of working exist in Hull and York with regard to academic appointments. In York, the embedded departments all hold an AS award and staff are included in the data presented for their submissions, so their research team members do not appear in the data presented here. It may therefore appear that there are fewer postdoc researchers than would be expected for the number of academic staff.

We will work together with School and Universities to create a School central Athena SWAN database, which continuously collects all relevant data. We will ensure all staff and student data is available for annual review to understand trends & to feed into action plan [[Action Point 18](#)].

Action Point 18: Improve staff and student data collection

WORD COUNT: 142

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.

Reference	Planned action/ objective	Rationale	Key outputs and milestones	Timeframe		Person responsible (include job title)	Success criteria and outcome
				Start	End		
Action Point 1	Establish a School Equality, Diversity and Inclusion Committee.	Sharing good practice from Athena SWAN to other protected characteristics is an effective way to promote equality, diversity and inclusion.	Establish the Equality and Diversity and Inclusion Committee (EDIC).	Oct-19	Nov-19	Dean	Chair appointed and the group established by November 2019 with gender parity in membership.
			Build an Equality, Diversity and Inclusion webpage and move the existing Athena SWAN page under this page.	Nov-19	Feb-20	AS Champion	School's EDI Website developed and AS page moved under this page.
			Develop the terms of reference for the EDIC and publish on the Schools Equality, Diversity and Inclusion website.	Nov-19	Mar-20	EDIC Chair	Term of reference published on the website.
			Formal annual review of the action plan each year. In the action plan review,	Nov-20	Nov-23	AS Champion	First review held by Nov 2020.

Reference	Planned action/ objective	Rationale	Key outputs and milestones	Timeframe		Person responsible (include job title)	Success criteria and outcome
				Start	End		
			completed actions will be signed off, ongoing actions will be updated, and, as appropriate, new actions driven by the data will be added. The new edition of the action plan will be presented to MB, at the all-staff meeting and published on the School Athena SWAN web pages.				
Action Point 2	Review the application process and the progression from the Gateway Year on to five year MBBS programme to ensure gender parity.	This is a new programme and it is important to review the process to develop actions to address the appeal of the programme. It is necessary to develop mechanisms to support these widening participation students in their progression onto the 5-year MBBS to ensure gender parity.	Review the application process for the 2019 intake and prepare a report for Board of Studies.	Oct-20	Nov-20	Director of the Gateway Year and Admissions Tutor	Report prepared and presented at the Board of Studies.
			Undertake a focus group with students who enrolled to explore what attracted them to the course and develop a strategy to increase the course appeal to male students.	Jan-20	Feb-20	Director of the Gateway Year	We understand why students apply to the course and by 2023 gain gender parity (33%M in 2019).
			Ensure marketing materials and webpages include diverse representation.	Jul-20	Ongoing thereafter	Marketing and Communication Manager and WP lead	Appropriate marketing materials produced for the first year and to be further developed

Reference	Planned action/ objective	Rationale	Key outputs and milestones	Timeframe		Person responsible (include job title)	Success criteria and outcome
				Start	End		
							following focus groups (<i>including testimonial and case studies from students</i>).
			Ensure balance of gender of students ambassadors at open days.	Jun-20	Annually	Admissions Tutor	Ambassadors will represent the current and future cohort proportionally.
			Review progression by gender onto the 5-year programme and develop actions to support students.	Jul-20	Annually	Director of the Gateway Year	Parity in the progression of male and female students.
			Focus group with first cohort of students who progress to establish how best to support them on their first year of the 5-year MBBS e.g. personal tutor which we have in place for year 3-5 students.	Jul-21	Jul-21	Director of the Gateway Year	Focus group and support mechanism implemented to ensure gender parity.
Error! Reference source not found.	Increase visibility of EDI and AS work to A-Level students through direct contact with schools/colleges	We are aware that there are specific demographic categories that are under-represented on our programmes and we need to understand why and	Increase visibility of EDI and AS work to A-level students in WP initiatives by EDI members taking part in outreach activities acting as role models.	Nov-19	Nov-23	WP lead, WP Officer, EDIC Chair, Admissions Tutor	Positive feedback received by students at outreach events.

Reference	Planned action/ objective	Rationale	Key outputs and milestones	Timeframe		Person responsible (include job title)	Success criteria and outcome
				Start	End		
	prior to application as part of our WP strategy.	ways to improve their representation.	Enhance A-Level students' understanding of their opportunities to apply for our programmes.	Nov-19	Nov-23	WP lead, WP Officer, Admissions tutor	Increase of number of applications from male candidates from a more diverse background.
			Using focus group finding in AP2, develop a strategy to engage more males in the summer school WP programmes.	Jan-20	Nov-23	WP officer	Increase of proportion of male attendees at the summer school, as well as increase of male applicants, in order to have gender equality by 2023 (50% male / 50% female).
Action Point 3	Maintain sector averages in the MBBS.	There is an increase in the number of MBBS places nationally and has resulted in increased competition across the sector. We have had above sector increase in applications and 64% of applicants for 2019 entry were female. The offer rate was 59%F and 51%M.	Promotional material for the MBBS, Open Day and website reviewed with a gender audit.	Nov-19	Dec-19	MBBS Admissions Tutor	Review successfully completed and clear action plan in place.
			Depending on the findings of the audit, make required changes to the promotional material.	Dec-19	Mar-20	Marketing and Communication Manager and Admissions Tutor	The cohort will be in line with national benchmark data

Reference	Planned action/ objective	Rationale	Key outputs and milestones	Timeframe		Person responsible (include job title)	Success criteria and outcome
				Start	End		
							over the next 3 years.
			In the recruitment of student ambassadors, we will encourage male ambassadors. In 2018/19 68% of our ambassadors were female vs 56% in the current cohort.	Oct-19	Nov-19	Admissions Tutor	In 2019/20 the ambassadors will represent the current cohort proportionally.
			Review the interview process by comparing scores across the stations by gender to identify any areas which may indicate stations which may favour males or females. The stations are: 2 mini interviews, scenario station and group exercise. We will develop revised process if disparities are identified.	Jan-20	May-20	Admissions Tutor	There will be no differences in interview scores by gender for each station and total score.
			Maintain gender balance on interview panels	Dec-19	Annually	Admissions Tutor	100% of interviews will be mixed gender at each cycle.

Reference	Planned action/ objective	Rationale	Key outputs and milestones	Timeframe		Person responsible (include job title)	Success criteria and outcome
				Start	End		
Action Point 4	Gain gender parity in the offer rate for Physician Associate Studies	The offer rate to males (16%) is lower than to females (28%) but the conversion to enrolment from offer is higher (78%M;60%F).	Gather data on the reasons why candidates are not made an offer and act on the findings, including reviewing promotional material if required.	May-20	Annually	Director of Physician Associate Studies	The cohort for 2021 entry will have parity on the offer rate.
Action Point 5	Better understand why staff that leave the School choose to do so.	Although the number of leavers is small we need to better understand why staff leave the School and ensure we identify any 'red alerts' in reasons for leaving (e.g. lack of flexibility, blocks to promotion) and incorporate findings into action plan.	Working within the current university exit process, which includes feedback on reasons for leaving and cultural experience in the School, we will seek to gain greater understanding of the reasons for staff departures through one-to-one interviews with Athena SWAN champion.	Nov-19	Monthly as required	Executive Office Manager	Annual review of the reasons for leaving do not relate to lack of gender inclusive and diverse culture or arrangements within HYMS. Identify issues that HYMS can remedy to increase retention.
Action Point 6	Develop strategies to facilitate applications for promotion.	Our improved promotion processes are embedded within departmental culture. We need to develop further strategies to facilitate applications, for example support advancement to professorial grades e.g. we	We will hold a "Pathways to Professor" workshop to start the process of supporting promotion applications to Professor. This will be led by professors who have achieved promotion through diverse	Mar-20	Jul-22	AS champion	Workshop delivered and positive feedback regarding the effectiveness of it received. At least 2 female SL/Readers will be promoted to

Reference	Planned action/ objective	Rationale	Key outputs and milestones	Timeframe		Person responsible (include job title)	Success criteria and outcome
				Start	End		
		have 39 (41%F) academic staff who are currently at Senior Lecturer or Reader grade.	achievements including teaching excellence.				Professor by 2022.
			Produce a database on staff who would be willing to share their promotion CVs across the school and in the embedded departments and provide access to staff who are close to promotion.	Oct-19	Oct-20	AS champion	Database produced and more eligible staff applying for promotion.
			Feedback from staff who are provided individual bespoke support and feedback going through the promotions process will be evaluated.	Oct-20	Annually	AS champion	Over the next four years the percentage of women putting themselves forward for promotion will be at least equal to the % of men, with equal success rates. We will maintain as an aspirational target that by 2020, 50% of S/Ls will be women


Reference	Planned action/ objective	Rationale	Key outputs and milestones	Timeframe		Person responsible (include job title)	Success criteria and outcome
				Start	End		
							(2016). We will maintain as an aspirational target in our action plan that by 2025, 50% of Professors will be women (2016).
			Identify through annual performance review and encourage staff to attend leadership programmes (University or AURORA).	Sep-19	Annually	AS Champion	Identified staff to attend and successfully complete programme to the maximum capacity permitted (at both Universities and AURORA).
			We will support one participant to return to AURORA as a role model	Jan-20	Oct-20	Dean	Member of staff returning to AURORA to contribute as a role model.

Reference	Planned action/ objective	Rationale	Key outputs and milestones	Timeframe		Person responsible (include job title)	Success criteria and outcome
				Start	End		
Action Point 7	Analyse publications submitted to REF as function of gender and develop a transparent process around paper selection.	At Hull, the Research Committee (RC) is well established and led by the Research Director. The RC is responsible for REF. At York, where we have embedded staff, the REF submissions are managed through the embedded department. A York RC to be established to support York staff, aligning with the research strategy of the school, and to monitor process in response to external requirements, e.g. REF.	York Research Committee established, with terms of reference which include AS principles.	May-19	Sep-19	Research Director (York)	York Research Committee established, with the terms of reference published on the website.
		Understand any differences in REF returns by gender e.g. number of publications returned, and internal quality assessment (3*, 4* etc).	REF returns analysed by gender. Report produced by RCs and presented to the EDIC.	After REF submission	3 months after REF submission	Research Directors (York and Hull)	Gender parity in the analysis.
		Ensure that both M and F staff feel that REF decisions are transparent.	Policy developed by Research Directors (RCs) and monitor staff views after REF through a survey of staff.	Dec-19	After REF submission	Research Directors (York and Hull)	Positive feedback from more than 70% of staff about REF process.

Reference	Planned action/ objective	Rationale	Key outputs and milestones	Timeframe		Person responsible (include job title)	Success criteria and outcome
				Start	End		
Action Point 8	We will assess the impact of the new PDR process.	PDRs have been improved to help staff to develop their objectives and aid discussion of promotion readiness (for academics). New PDR forms have been introduced at both universities since our last application and now includes more self-reflection (what has gone well and what hasn't gone so well), longer term career aspirations (including promotion) and training needs. In the TSC, 81% stated that career progression is discussed in PDR.	Explore staff opinions on the process and assess impact through focus groups and staff survey data.	Oct-19	Annually	Executive Office Manager	Increase in the % of staff that report the PRR gave constructive feedback on areas for development. At least 80% of staff record positive responses in university surveys (66% UoY 2017 and 72% UoH 2018).
			Help researchers focus on identifying strategic career development and training requirements as part of PDR.	Jan-20	Mar-20	Head of Learning and Development	Increase % researchers reporting PDR is useful in identifying training needs and development opportunities in staff surveys to 80% (was 55% in 2018).

Reference	Planned action/ objective	Rationale	Key outputs and milestones	Timeframe		Person responsible (include job title)	Success criteria and outcome
				Start	End		
Action Point 9	Encourage staff to engage with mentoring particularly at transitional points in their career and to continue their career at the Medical School and progress to more senior positions within the School.	Although the School's mentoring programme has seen good uptake by academic and PSS staff, there is still a high number of staff unaware of the mentoring opportunities	Promote the School and universities' mentoring programmes to all staff and select mentors from both within and outside of the University who can serve as role models and professional contacts for issues/advice arising.	Oct-19	Report annually	AS Champion	Gender parity in uptake in the new UoY mentoring programme by gender. 100% of all new staff will be assigned a mentor.
			Identify through annual performance review and encourage staff to attend leadership programmes. Gain feedback on the leadership programme through qualitative interviews on completion.	Sep-19	Nov-23	AS Champion	Equal proportion of males and females attending leadership programmes over the 4 years and demonstrating benefit through the interviews.
Action Point 10	We will investigate the reasons why male students are less likely to intercalate.	The proportion of students that are male who choose to intercalate is falling over time and is not proportionate to the student cohort.	To gather feedback from male students who intercalate to understand why they made the decision to intercalate.	Oct-19	Nov-22	Intercalation Lead	Development of clear findings, report writing.
			Develop a strategy to improve male student engagement.	Dec-22	Nov-23	Intercalation Lead	An increase in the proportion of males in line with the MBBS cohort

Reference	Planned action/ objective	Rationale	Key outputs and milestones	Timeframe		Person responsible (include job title)	Success criteria and outcome
				Start	End		
							over the next 4 years.
Action Point 11	We will review the gender of the LIC cohort and the staff involved.	The Longitudinal Integrated Clerkship will be piloted for 2019/2020 and it is important to monitor the gender balance of the cohort and the staff involved. Only 7 students (all female) have applied.	To gather feedback from students who take the Longitudinal Integrated Clerkship.	Jul-21	Nov-22	Longitudinal Integrated Clerkship Lead	Development of clear findings, report writing.
			Develop a strategy to improve male student engagement through their learning experience.	Dec-22	Nov-23	Longitudinal Integrated Clerkship Lead	Gender parity of the cohort will be ensured.
Action Point 12	To improve PGR experiences around work-life balance.	Focus group of postgraduate students seemed to indicate issues around flexibility.	Train PhD supervisors to improve the PhD experience through emphasising positive role models from academic staff around p/t working, flexible working, etc. Train TAP Chairs to explore work life balance in one-to-one TAP discussion and include a section on TAP form as a prompt. Annual survey of PGR students to gauge work-life balance.	Sep-19	Aug-20	PG programme Chair	Students report feeling supported during postgraduate studies as evidenced in an increase in positive responses in the PGR survey. Review completed sections on TAP forms on work-life balance to identify trends.

Reference	Planned action/ objective	Rationale	Key outputs and milestones	Timeframe		Person responsible (include job title)	Success criteria and outcome
				Start	End		
Action Point 13 	Through our beacon activities, that we promote the benefit of our activities – both internally and externally – to disseminate gender equality and INSPIRE others to reach AS ambitions.	To recognise the benefits of sharing good practice with other departments.	Act as a 'critical friends' to other Departments in the University of York and University of Hull.	Nov-19	Nov-23	AS champion	Become a critical friend to two or more Departmental SATs and departments are supported by us to receive Gold/Silver/Bronze awards.
							At least one new initiative developed by the School through critical friendship.
		To recognise the benefits of sharing good practice with other Medical Schools and through UK Medical Schools and Faculties Athena SWAN/EDI Leads group to develop actions in both their Schools and within our School.	Invite teams from other Medical Schools to visit the School.				At least one team per year visits the School.
			Through membership of the UK Medical Schools and Faculties Athena SWAN/EDI Leads group develop a directory of critical friends				At least one new initiative developed by the School through critical friendship.
							Directory of critical friends developed and used by two or more medical schools in

Reference	Planned action/ objective	Rationale	Key outputs and milestones	Timeframe		Person responsible (include job title)	Success criteria and outcome
				Start	End		
							supporting their AS applications with positive feedback.
Action Point 14	Measure meaningful change in our working and culture across the School, which can be difficult to capture at University level.	It is important to obtain detailed information from all staff regarding their experiences, to better understand some of the university survey results and put them in context and to engage with them regarding ways to further improve staff experience.	School Temperature Check survey was conducted in January 2019 across the School and this will be conducted annually to measure change within the School over the four year period	Jan-20	Jan-23	AS champion	School Temperature Check conducted annually.
Action Point 15	Increase awareness of why gender equality matters to the School and to individuals who work here to maintain staff engagement.	Staff and students across the school need to understand how our aims and achievements benefit them.	EDIC to develop a School vision and strategy for EDI, including gender equality, based on our core values and ambition.	A paper presenting terms of reference for EDIC presented at MB in April 2019.	Dec-19	EDIC Chair	First School EDI vision and strategy delivered.
			Annual EDI updates at School staff meetings to include gender equality.	Jul-20	Jul-23	EDIC Chair	Annual updates delivered (2019-2023).

Reference	Planned action/ objective	Rationale	Key outputs and milestones	Timeframe		Person responsible (include job title)	Success criteria and outcome
				Start	End		
			To increase profile of AS within the School by improving web presence and enhancing the website to include news, case studies of good practice, and reporting progress against goals.	Nov-19	Annually	Communication Team	Web pages published and staff and student have been made aware of the pages. Pages well used.
Action Point 16	Ensure that the School's new values and School strategy reflect the AS principles.	The Schools Strategy is currently being updated.	New School Strategy.	Sep-19	Dec-20	Dean	New school strategy with Athena SWAN principles embedded.
Action Point 17	Ensure all academic staff have workload agreed within academic year 2018/19 and annual workload data will be analysed in the academic year 2019-20.	The need for a WLAM has been recognised in the school for some time; to date a significant proportion of academic staff in the school have utilised WLAMs in cognate departments.	<p>Ensure all academic staff have workload agreed within academic year 2018/19.</p> <p>Use workload model to analyse workload by gender for 2019-20 academic year. If disparities are apparent then action will be taken.</p>	A paper presenting key drivers for a School workload allocation model was presented to MB in October 2018.	<p>Jul-19</p> <p>Aug-21</p>	Head of Operations and Deputy Chief Operating Officer	In place for all academic staff within academic year 2019/2020 and gender parity in workload in 2020/2021.

Reference	Planned action/ objective	Rationale	Key outputs and milestones	Timeframe		Person responsible (include job title)	Success criteria and outcome
				Start	End		
Action Point 18	Improve staff and student data collection.	As the School is a joint medical school across two Universities, we faced particular challenges in collecting all the staff and student data required for this application.	We have made progress e.g. Annual MB reports from the student admissions team is now split by gender. However we will work together with the School and University teams to create a School central Athena SWAN database, which continuously collects all relevant data.	Apr-20	Nov-23	SAT Chair and Executive Office Manager	All staff and students data (100%) available each spring for annual review to understand trends & to feed into action plan.




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