

Workforce Equality Monitoring Report

2021-2024

People & Workplace

April 2025

Contents

Executive summary	3
1 Introduction	4
2 Definitions and data quality	4
3 Progress since the previous reporting period	5
4 Workforce diversity	7
5 Next steps	9
6 Appendix.....	10

Executive summary

This report describes the workforce diversity at Healthcare Improvement Scotland in respect of the protected characteristic groups defined in the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012 (as amended).

The report covers April 2021- March 2024 and provides trends and comparisons over three annual periods. Until March 2022, COVID-19 restrictions and guidance were being adhered to, including staff working from home. Hybrid working is now the mainstay for the majority of our workforce.

Consistent with previous years, our workforce is predominately women (77%) who also perform the majority of part time roles in the organisation. Across our workforce, a number of protected characteristic groups are under-represented, including staff: under 25 (1.4%), identifying as disabled (6.1%) and with a minority ethnic background (4.3%).

Our recruitment activity has increased over the last 3 years with 35% more applications submitted and 14% more job offers issued. White female applicants were the most successful during the recruitment process, receiving 80% of all job offers after submitting 68% of the applications. Applications from people in minority ethnic groups have increased by 20%, to 39% over the period. Overall job offers however have remained at 5.5%.

Pay gap analysis showed that whilst our gender pay gap has reduced by 5% over the period, there are still positive indices in favour of male pay – our gender pay gap is currently 10% mean and 9.1% median. Our ethnicity pay analysis indicated that whilst white staff had 5.4% higher mean pay, non-white staff have 1.9% higher median pay. Disabled staff experience the widest pay gap compared to non-disabled staff at 20.7% (mean & median).

1 Introduction

- 1.1** Healthcare Improvement Scotland's purpose is to ensure that the people of Scotland experience the best quality health and care services. Key to this is our ability to recruit from the widest talent pool and retain a diverse workforce. Our workforce must understand the importance of eliminating discrimination, tackling prejudice, advancing equality and promoting improved understanding between different groups, including raising concerns about differential treatment.
- 1.2** To support our equality aims and ensure compliance with the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012 (as amended), we publish our workforce equality monitoring data and provide information disaggregated by protected characteristics¹.

2 Definitions and data quality

- 2.1** This report uses anonymised data, which may be redacted or grouped where necessary to prevent possible identification of individuals and their characteristics.
- 2.2** Data used within the report are drawn from various sources, including:
- eESS, (NHSScotland's employee self-service system)
 - Jobtrain (NHSScotland's online recruitment system)
 - OLM/LearnPro/Turas Learn (NHSScotland's online learning platforms)
 - Scottish Census 2022 (population comparators)
 - Turas Data Intelligence (other NHSScotland Board comparators)
- 2.3** The report includes data relating to permanent and fixed-term staff only (payroll staff). It does not include other non-payroll workers such as those seconded in to our organisation, sessional workers, temporary agency staff or self-employed contractors who may provide specialist expertise from time to time.

¹ age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief and sexual orientation

3 Progress since the previous reporting period

We published our [Equality Mainstreaming report](#) in April 2021, including equality outcomes for 2021-2025 and updated on our progress in 2023. All of our equality reports are available on [Healthcare Improvement Scotland's website](#).

Two of our 2021-2025 equality outcomes relate to the diversity and wellbeing of our workforce. These are:

- A greater diversity of people are attracted and retained to work or volunteer with us and through sharing their relevant lived experience actively shape and strengthen Healthcare Improvement Scotland activities, and
- Our working practices support and encourage wellbeing and resilience for staff from all protected characteristic groups.

Key achievements in relation to delivering these outcomes during the 2021-25 reporting period have included:

- Establishing and supporting new staff equality networks for disabled, LGBT+ and minority ethnic employees as well as those with caring responsibilities.
- We also established a menopause café and undertook work to share best practice in supporting employees experiencing symptoms of the menopause.
- Participating in the [NHS Scotland Pride Badge Initiative](#)
- Participating in the NHS Scotland pilot of the [Equally Safe at Work](#) employer accreditation programme
- Taking a number of steps to ensure all our staff are aware of, informed about and trained in trauma-informed practice and principles appropriate to their role
- Establishing an improved Employee Assistance Programme and also making this available to our volunteers
- Launching our Workplace Transgender Equality Policy and Guidance
- Updating our Menopause Policy and guidance and launching an Inclusive Language Guide for staff
- Rolling out a new 'adjustment passport' to support disabled and neurodivergent colleagues, and those with health conditions. Involving people with lived experience in our project governance, including Early Intervention in Psychosis and Gender Identity Healthcare Standards
- Launching new ways of working to support flexibility
- Taking forward a succession plan focussed on diversity for our non-executive Board

Our mean gender pay gap has reduced by 5.3% over the last three years, leaving it at 10%. Our median pay gap has fallen by a similar amount, to 9.1%. We are disappointed that overall women continue to have less earning power within Healthcare Improvement Scotland as well as in NHS Scotland and the labour market more broadly. We have continued to take action that is within our power as an individual employer. For example, we have strengthened our commitment to flexible working and worked to improve the ability of staff and managers to identify and address experiences of gender based violence. Our equal pay statement was published as part of our

Equality Mainstreaming Report in 2021, and we will refresh this within our 2025 equality mainstreaming report.

Our ethnicity pay gap has increased by an average of 5.7%, leaving it at 5.4% overall. Employees with minority ethnic backgrounds have continued to be under-represented within our organisation and low numbers have meant that our pay gap calculations are especially sensitive to any staffing changes. Our ethnicity pay gap has come into existence recently. We hope to rectify and stabilise the gap through a number of actions that will be set out in our 2025 equality mainstreaming report and connected anti-racism plan.

We have an average disability pay gap of 20.7% - 3% higher than three years ago. Disabled people are significantly under-represented in the Healthcare Improvement Scotland workforce. We are actively evaluating the inclusiveness of our work practices and resources. For example, we have introduced an 'adjustment passport' to support disabled and neuro-divergent colleagues as well as those with health conditions to identify and implement changes to the work environment. We also continue to participate in the UK Government 'Disability Confident' scheme, offering guaranteed interviews to disabled candidates who meet the essential criteria for vacancies.

4 Workforce diversity

4.1 Workforce (refer to appendix 6.1 & 6.2 data)

- At the end of the reporting period (31 March), we employed 556 staff with 87.8% being permanent employees. Our workforce is 77% women - 58% of those work full time and 18.7% part time.
- A majority of our staff (58%) are aged 35-54 and 24.5% are aged 55 or over. Under 25's are the smallest age group we employ, accounting for 1.4% of our workforce.
- Most of our staff perform Band 3-8a roles (86%) and 12% hold senior positions (Band 8b+ including Senior Management) while 2% are medical staff.
- Our Senior Management team all work full time and 75% are women.
- Staff identifying as LGBTQ+ account for 6.1% of our workforce. This has risen from 4.7% 3 years ago.
- 6.1 % of our staff identify as disabled, which is broadly consistent with previous years.
- 4.3% of our staff identify as being from a minority ethnic group – this is broadly consistent with previous years.

4.2 Recruitment (refer to appendix 6.3 data)

- Applicant numbers have increased by 35% over the last 3 years with job offers also increasing by 14% over the same period.
- Women received 80% of job offers after submitting 68.5% of the applications. Whereas, 30% of applications were from men (an increase of 5% over the period) and received under 19% of all job offers.
- Whilst the number of applications from those indicating disability is broadly unchanged over the past 3 years, there has been a 6% increase in job offers made to disabled candidates – who now receive 16.5% of all job offers.
- The majority (61%) of applications received and job offers made (54%) were to applicants aged 25-44. Under 20's remain an under represented group.
- 60% of applications submitted were from white candidates, who received almost 93% of all job offers. Although applications from ethnic minority groups have increased by 20% over the past 3 years to account for 39% of all applications, job offers have remained broadly similar (currently 5.5%).

4.3 Turnover & Leavers (refer to appendix 6.5 data)

Our staff turnover (15.7%) is higher than 3 years ago (9.7%). This is largely due to a number of fixed term positions ending (c. 33% of leavers were on fixed term contracts). As per policy, all fixed term staff undergo a process of redeployment towards the end of their contract and every effort made to find suitable alternative employment before advertising vacancies.

- The majority (78.1%) of leavers in the period covered by this report were women – 57.8% were in full time roles and 19.3% part time.
- 87% of leavers reported being of white ethnicity and 7.8% as minority ethnic or other
- 78% of leavers identified as heterosexual and 6.3% reported being part of an LGBTQ+ community.

- A majority (51%) of leavers were in the 30-49 age groups and 29.7% were 55 or over.

4.4 Maternity & Parental leave

- 12.2% of staff were on either maternity, paternity, adoption or shared/parental leave last year, which is comparable with other years in the period. Those returning to work from maternity leave did so to their existing job role and pay band.

4.5 Carers leave

- 14.7% of our workforce took leave last year to fulfil caring responsibilities, this has increased from 9.4% 3 years ago.

4.6 Internal disputes & dismissals

- There were fewer than 10 disciplinary actions and grievances during the entire period.
- Dismissals accounted for 3% of those leaving in relation to end of fixed term contracts, where suitable opportunities through redeployment were unsuccessful. Apart from fixed term contracts ending, there were no other dismissals during the period.

4.7 Access to training (refer to appendix 6.6 data)

We use several e-learning platforms to deliver a range of formal training courses in addition to other informal/interactive sessions open to staff via workshops and peer groups. Only formal training recorded via our eESS Online Management system holds equality information and is referenced here.

- 84 facilitated and eLearning training sessions were delivered over the last 3 years, offering 1854 training opportunities for staff to access.
- 93% of the workforce attended training over the period.
- The protected characteristics of attendees broadly reflect the diversity of the workforce over the period.

4.8 Pay data & occupational segregation (refer to appendix 6.7 data)

- Our gender pay gap has continued to narrow over the last 3 years, with both the mean and median gaps reducing by 5%). Men have a 10% mean pay advantage and 9.1% median pay advantage.
- The majority of women work in Band 4-8a roles (85.7% women compared to 78.5% men) whereas the majority of senior Band 8b-8d roles are performed by men (10.8% of roles are held by men compared to 6.8% held by women).
- Our ethnicity pay gap data indicates there is 5.4% (mean) pay gap for those identifying as 'part of a minority ethnic group and a 1.9% (median) pay gap compared to the 'White combined' category.
- Our disability pay gap is 20.7% (mean and median) in favour of non-disabled employees. This has risen by 3% over the last 3 years. Most disabled staff (5.8%) work in Band 4-7 roles

5 Next steps

Since Covid-19 restrictions lifted in March 2022 following staff engagement, we have developed new ways of working to support flexible hybrid working for the majority of staff who now work a combination of both office and home working.

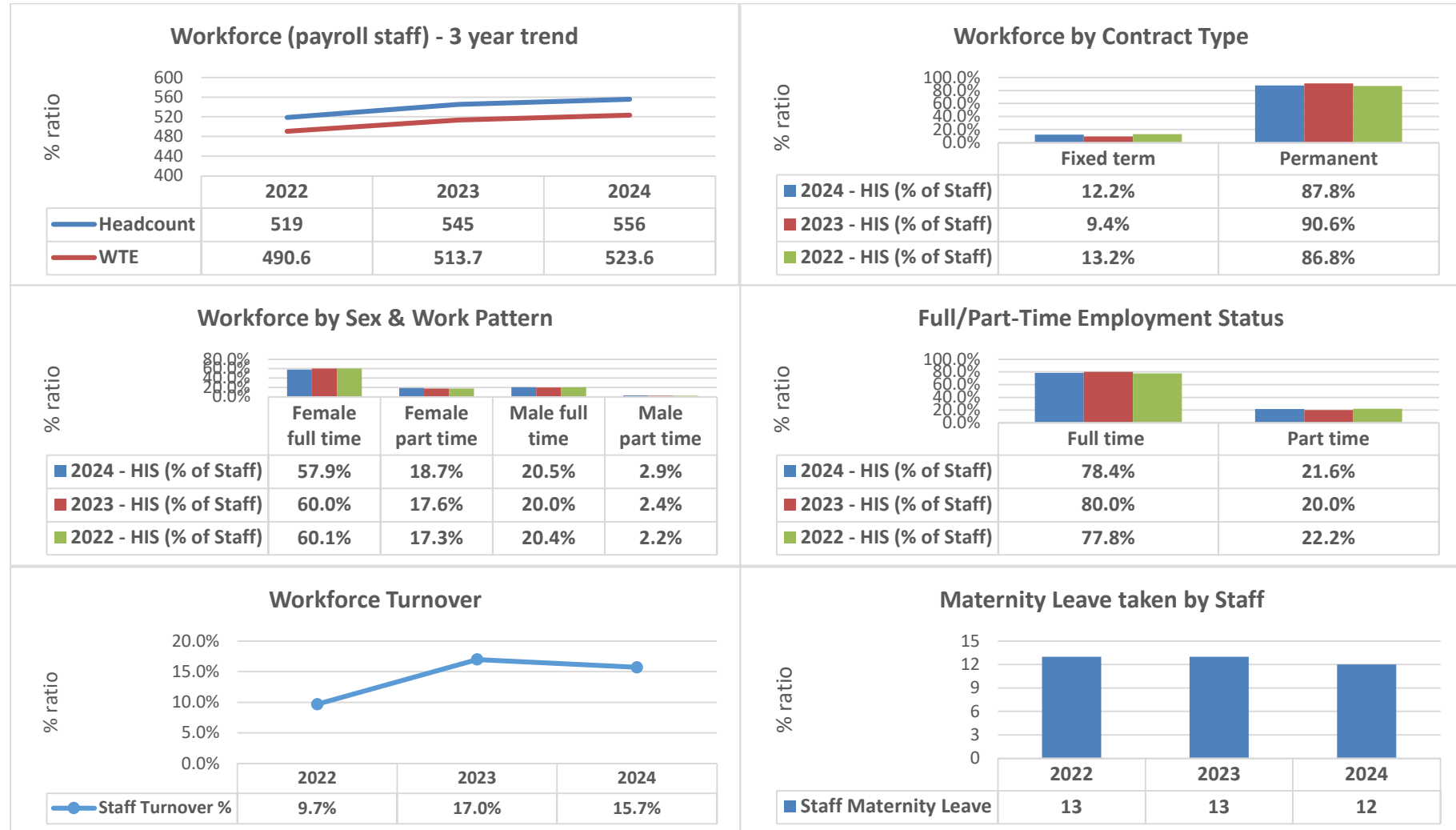
We have identified a number of actions to promote equality in relation to occupational segregation and pay. Since many of these activities sit alongside our equality mainstreaming activities, we are also continuing to look at ways to better align our scheduling of reports.

Actions:

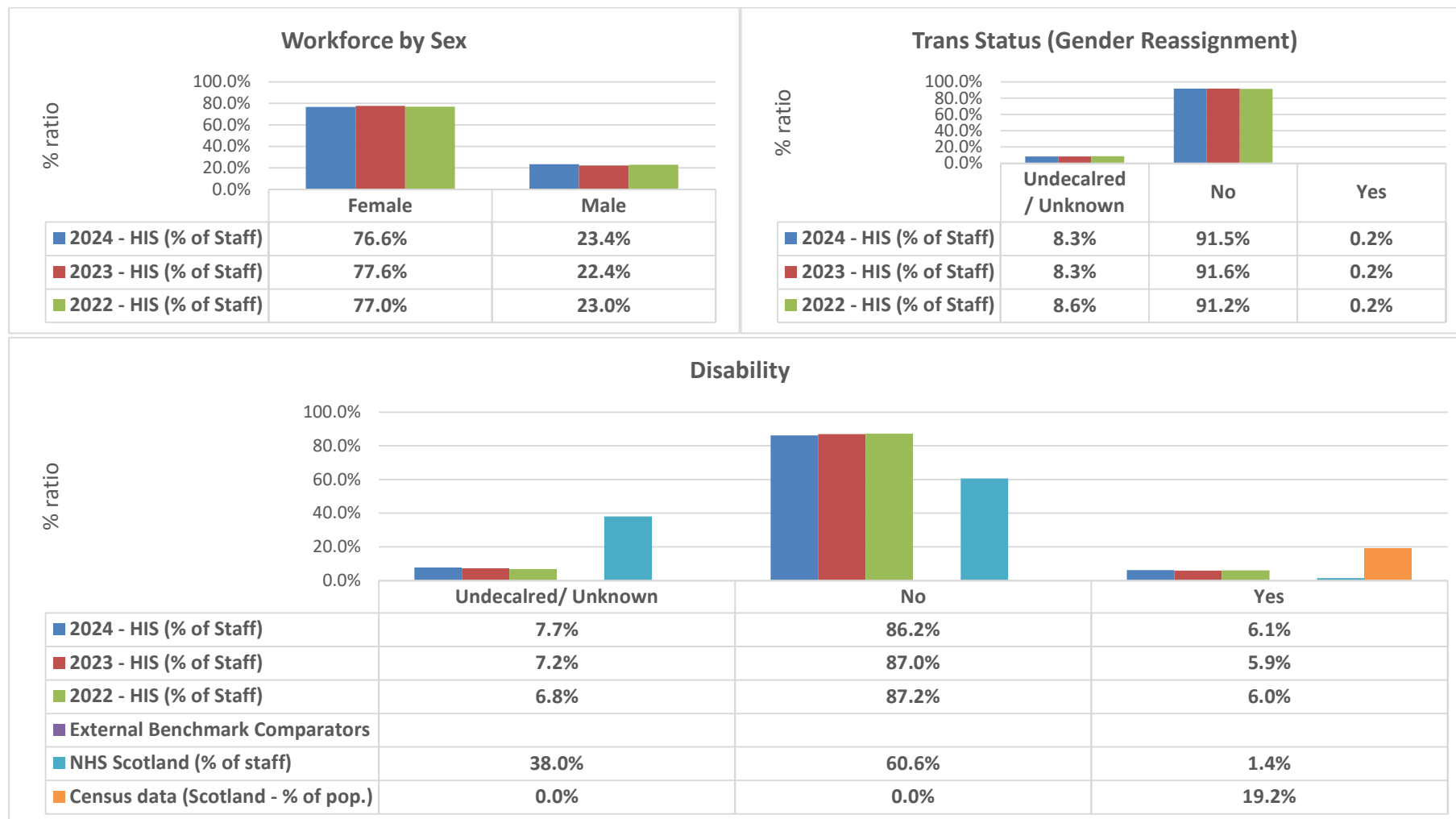
- **Age** – People under the age of 25 remain under-represented in Healthcare Improvement Scotland. We will review how we deliver Modern Apprenticeships and engage with partners to deliver graduate and internship programmes. We will undertake to diversify our volunteer cohort and support younger people to gain vital experience in understanding and contributing to our work. We will continue to consider wider approaches for attracting younger staff into the organisation.
- **Gender** - Women represent the majority of our workforce. While our gender pay gap has reduced over recent years, women still earn 10% less than male colleagues overall. We will build on improvement in this area by continuing to promote flexible working for all employees and reduce potential barriers to economic equality. We will also support staff with caring responsibilities and work with our staff Carer's Network to identify and deliver the improvements they need.
- **Disability** – We have a higher ratio of staff identifying as disabled than other NHS Scotland employers. This cohort does however remain under-represented compared to the wider Scottish population and at a significant pay disadvantage compared to non-disabled colleagues. We will continue to engage in the Disability Confident Employer scheme (level 2). We will also engage with our disabled and neuro-divergent staff to identify policy and practice improvements, including in relation to our recruitment processes. We will continue work to promote an inclusive and accessible work environment, including the roll-out and promotion of our adjustment passports.
- **Ethnicity** - We are conscious that the number of minority ethnic staff we employ, including those from visible minorities, is relatively small and that our pay gap data is reflective of this. We will continue to work on diversifying our organisation, which will include engaging with minority ethnic staff to ensure our policy and practice is inclusive and supportive, while undertaking our local anti-racism plan.
- **Disclosure rates** – Whilst our disclosure rates remain favourable compared to other NHSScotland employers, we will continue to remind staff to keep their personal data up to date via eESS and continue providing information sheets to candidates, explaining the importance of disclosing equality monitoring information when applying for posts.

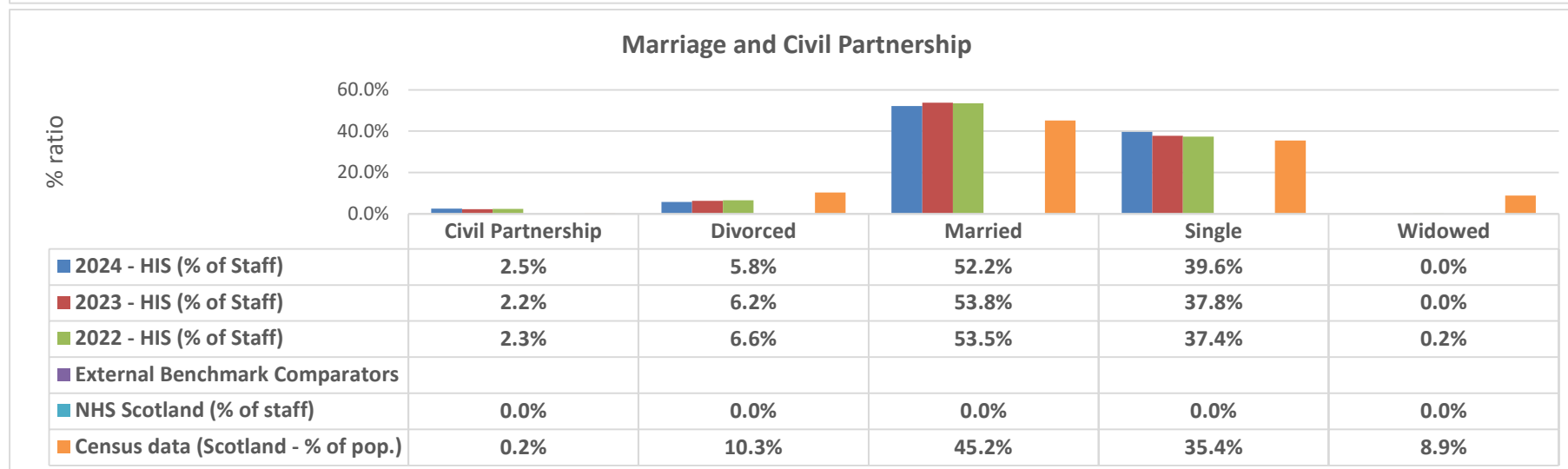
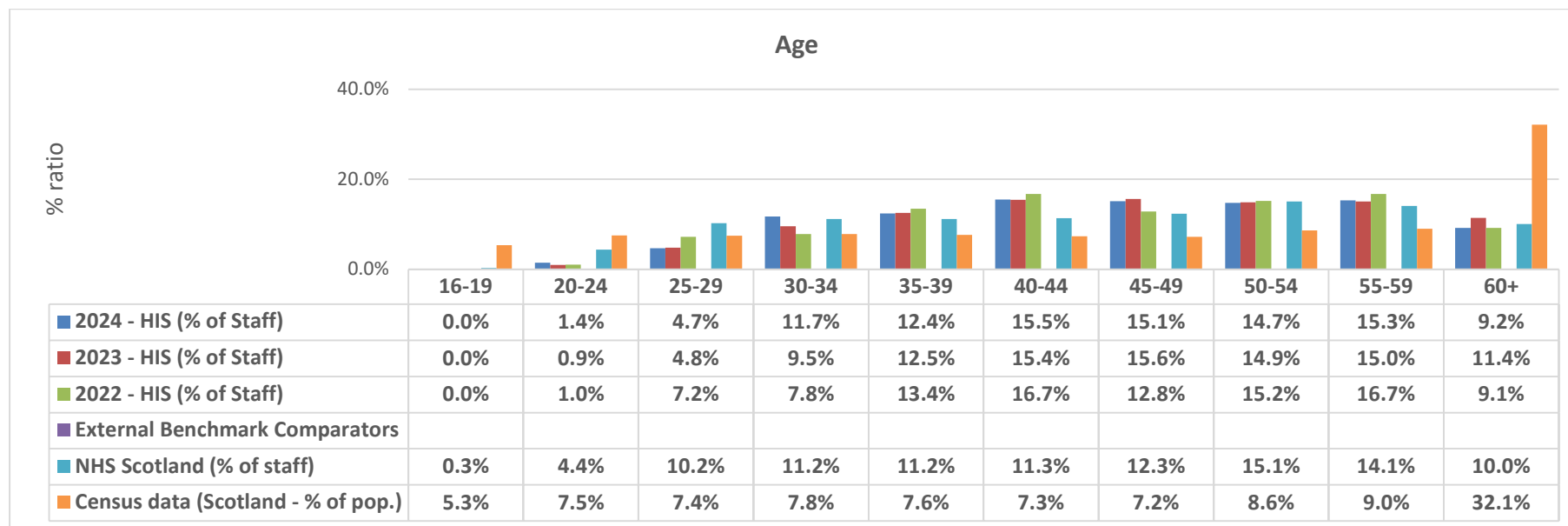
6 Appendix

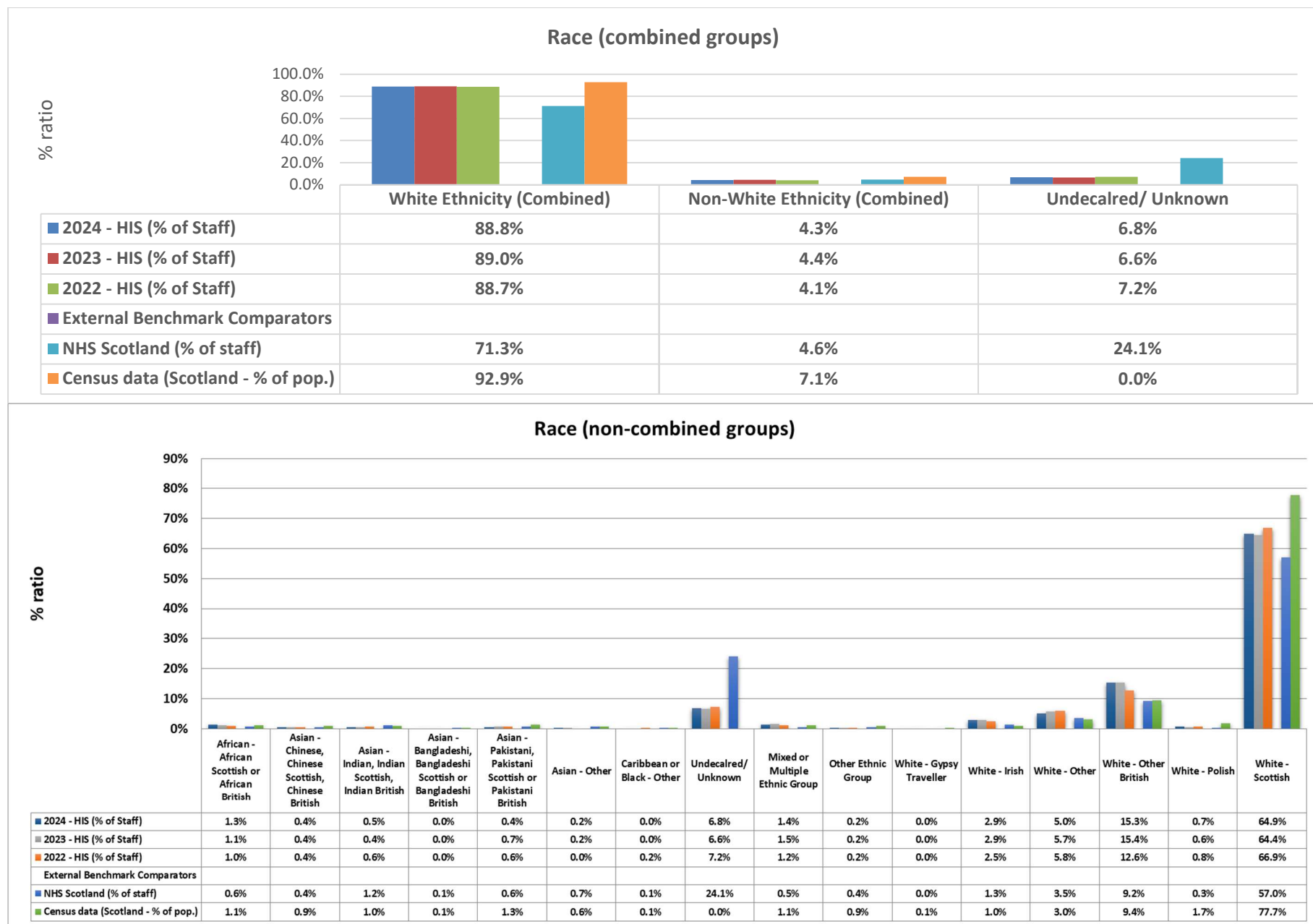
6.1 Workforce profile data

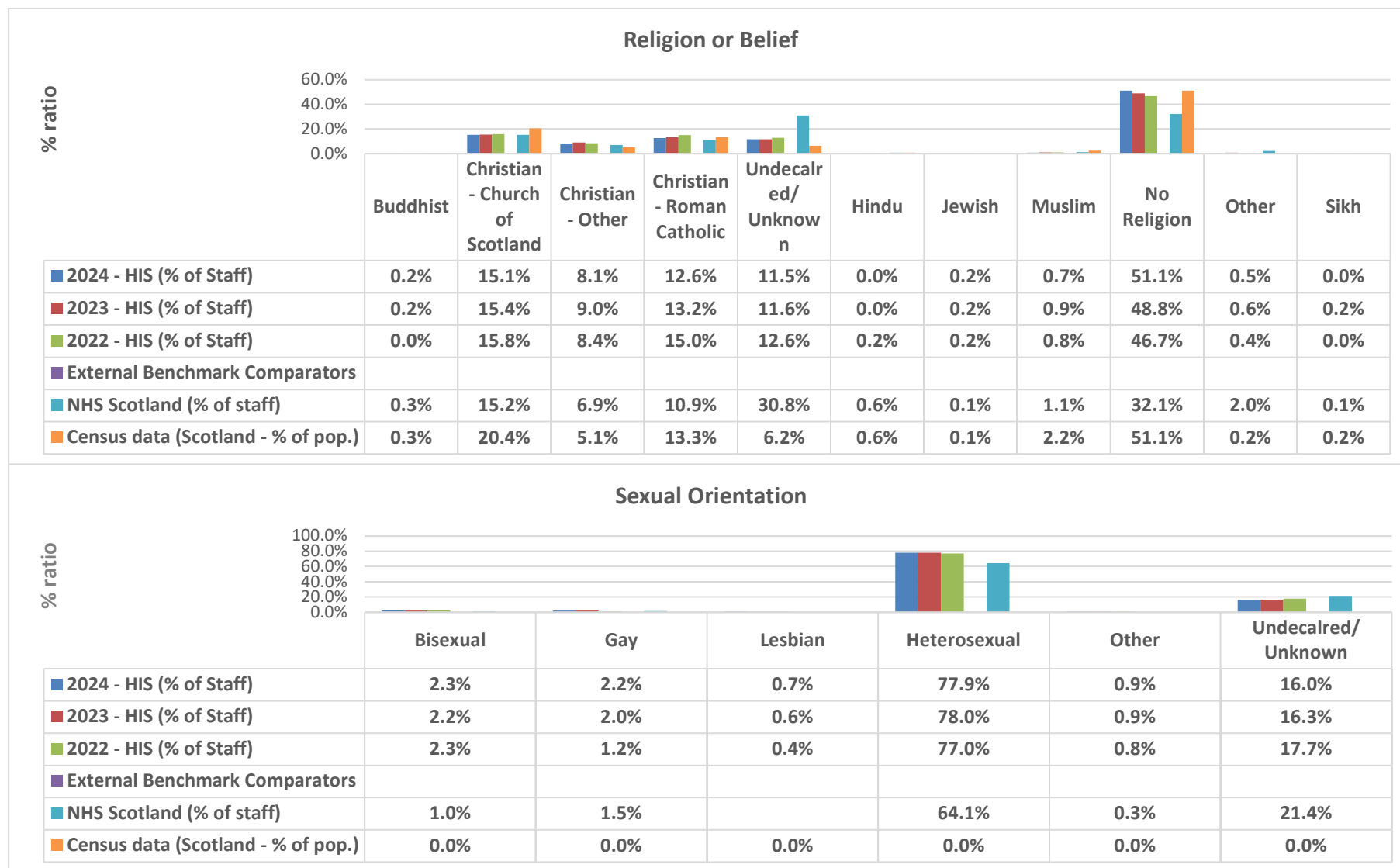


6.2 Workforce data by protected characteristics

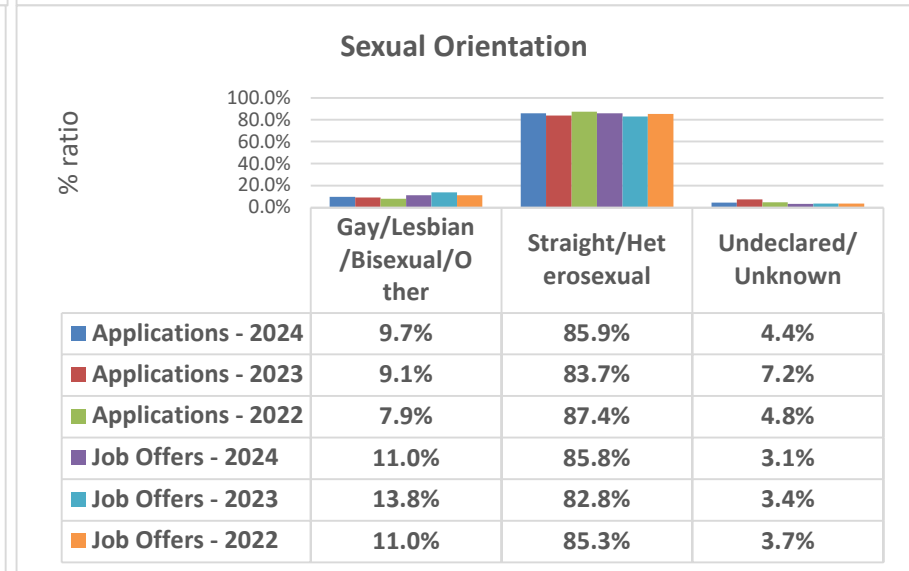
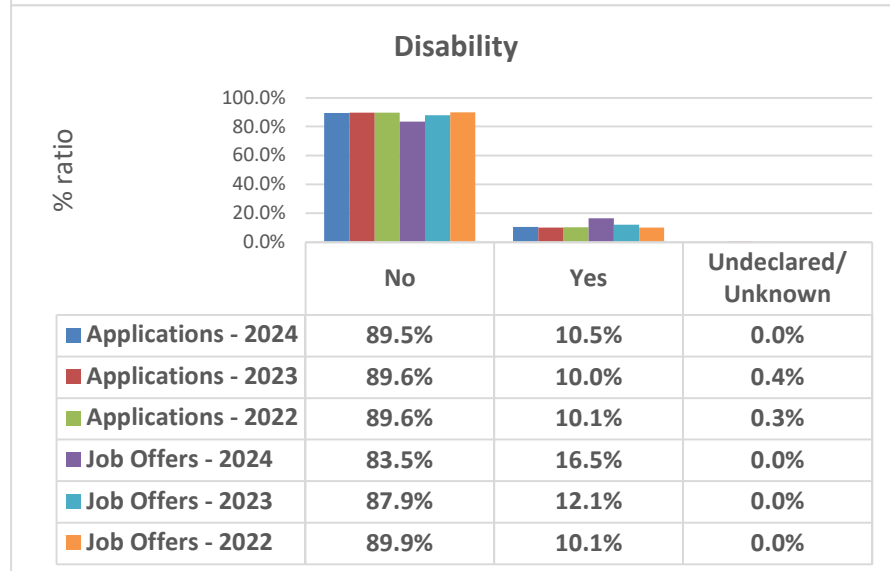
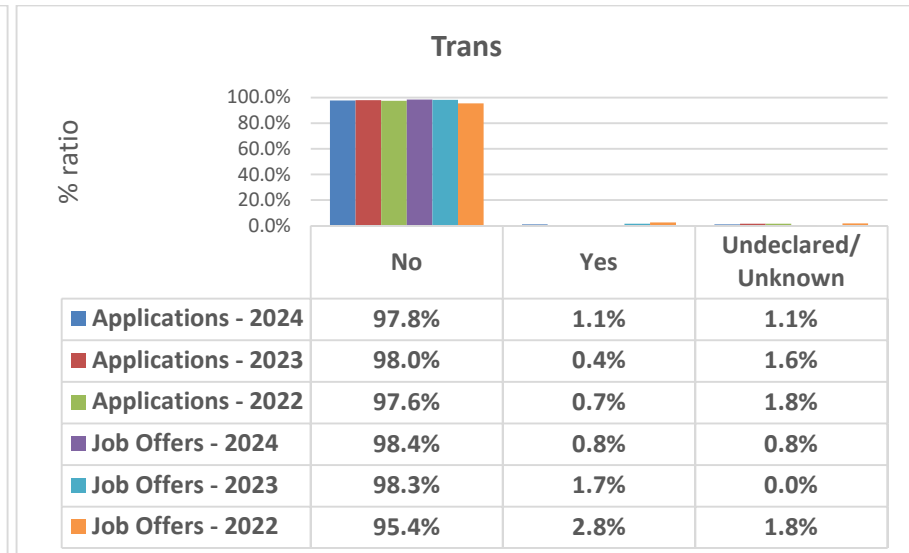
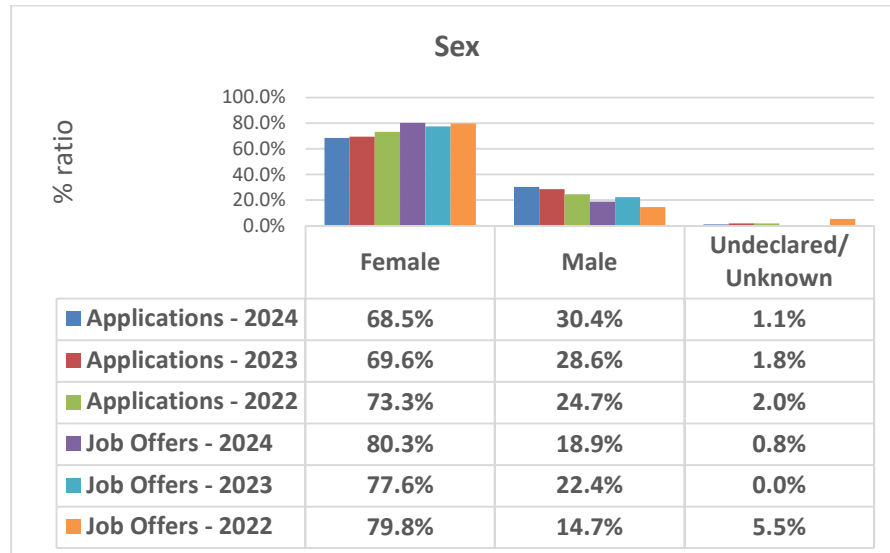


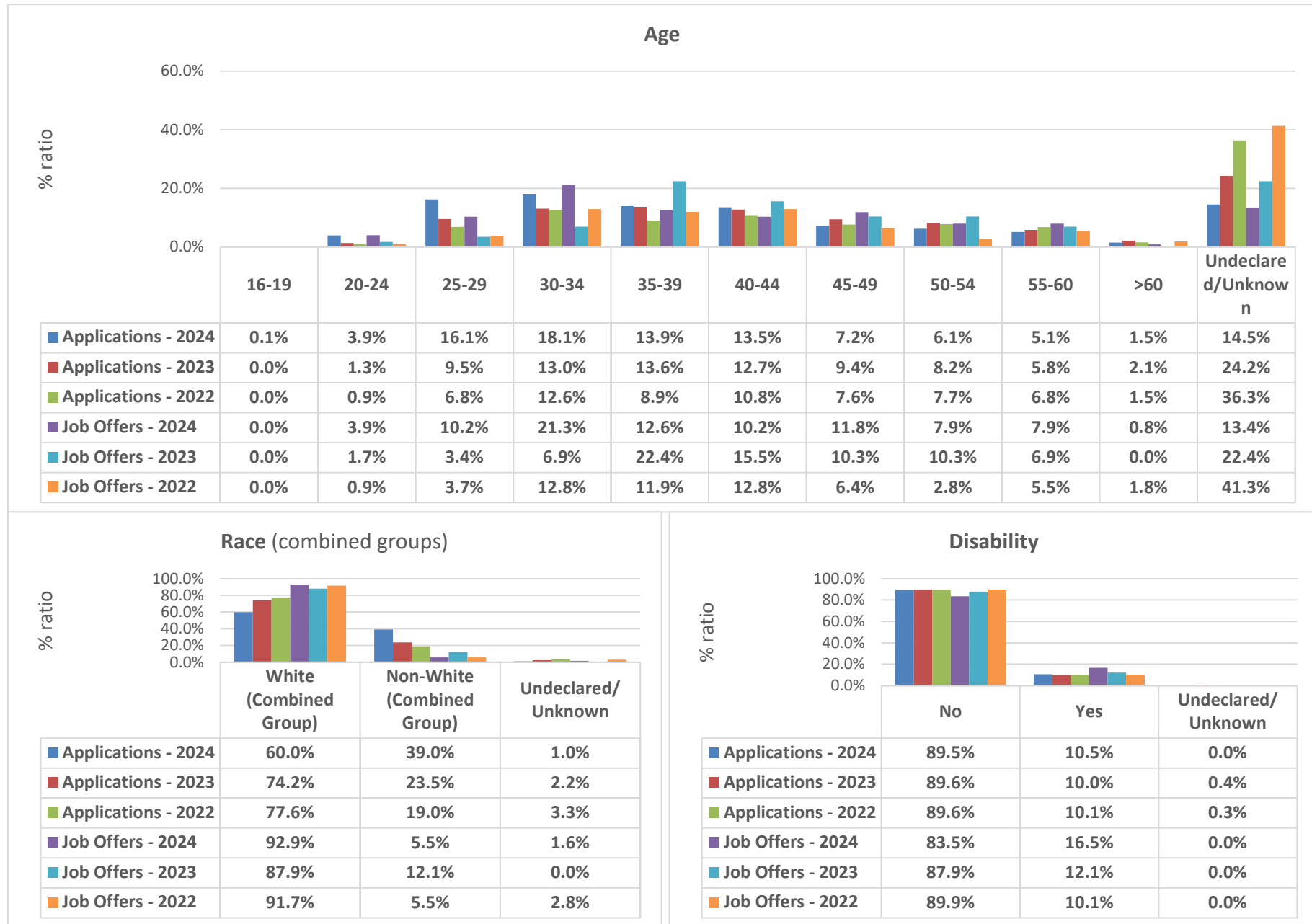


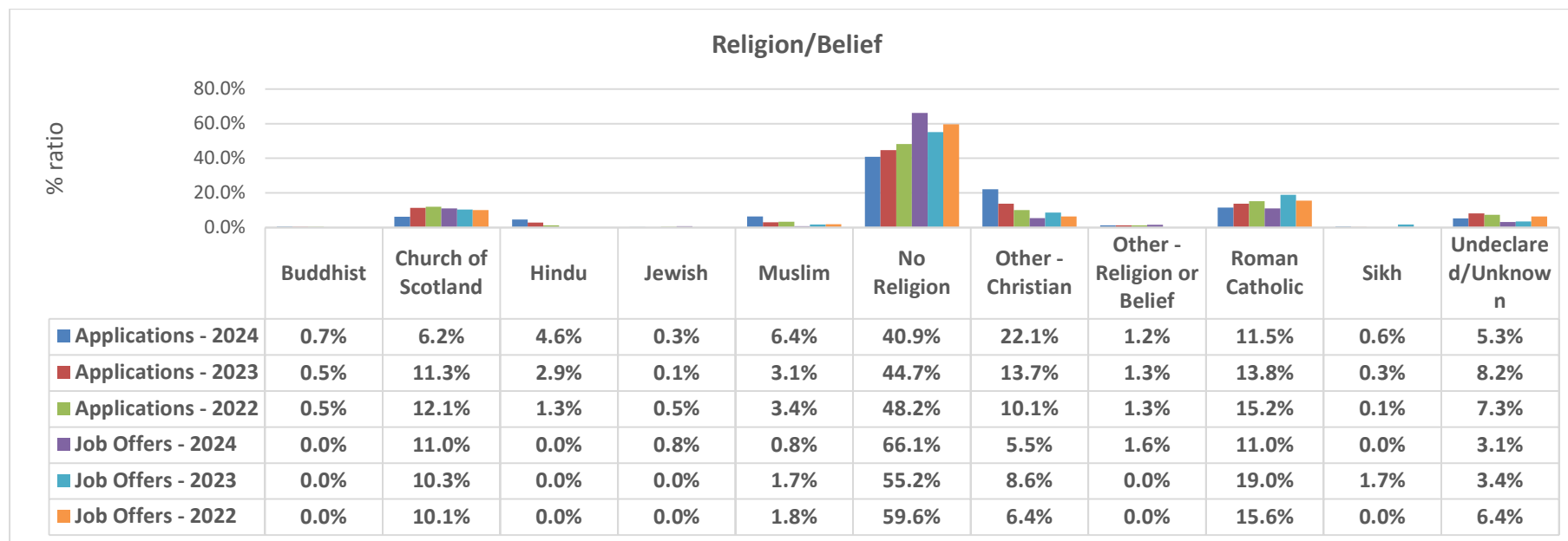




6.3 Recruitment data by protected characteristics







6.4 Summary of recruitment activity during period

	2024	2023	2022	+/- Change over period
Applications	2100	998	1360	35.2%
Job Offers	127	58	109	14.2%

6.5 Leavers by protected characteristics

Category as % of Leavers	
4.1 Contract Type	
Fixed Term	32.80%
Permanent	67.20%
4.2 Sex by work pattern	
Female	78.10%
Female Whole Time	57.80%
Female Part Time	20.30%
Male	21.90%
Male Whole Time	19.30%
Male Part Time	2.60%
4.3 Working Pattern	
Whole Time	77.10%
Part Time	22.90%
4.4 Grouped Ethnicity	
Non-White (Combined Group)	7.80%
White (Combined Group)	87.00%
Undeclared/Unknown	5.20%
4.5 Religion	
Christian - Other	9.90%
Church of Scotland	13.00%
Undeclared/Unknown	10.90%
Hindu	0.50%
Jewish	0.50%
Muslim	2.10%
No Religion	42.70%
Other	1.60%
Roman Catholic	18.20%
Sikh	0.50%
4.6 Sexual Orientation	

Gay/Lesbian/Bisexual/Other	6.30%
Undeclared/Unknown	15.60%
Heterosexual	78.10%
4.7 Disability	
Undeclared/Unknown	4.20%
No	87.50%
Yes	8.30%
4.8 Age Group	
Under 20	1.60%
20 - 24	2.10%
25 - 29	5.70%
30 - 34	11.50%
35 - 39	16.70%
40 - 44	12.00%
45 - 49	10.90%
50 - 54	9.90%
55 - 59	9.90%
60+	19.80%
4.9 Trans	
No	96.40%
Undeclared/Unknown	3.60%
4.10 Reason for leaving	
Resignation/New Employment/Other	26.40%
Retirement	20.80%
Undeclared/Unknown	52.80%

6.6 Access to training by protected characteristics

% Course attendance by Protected Characteristics	
By Gender	
Female	76.10%
Male	23.90%
By Religion	
Buddhist	0.20%
Christian - Other	7.90%
Church of Scotland	14.50%
Jewish	0.20%
Muslim	0.60%
No Religion	49.90%
Other	0.60%
Roman Catholic	12.90%
Undeclared/unknown	13.30%
By Sexual Orientation	
LGBTQ+/other	5.90%
Heterosexual	75.90%
Undeclared/unknown	18.20%
By Grouped Ethnicity	
Non-white (combined)	4.20%
White (combined)	87.50%
Undeclared/unknown	8.30%
By Disability	
No	84.70%
Yes	6.10%
Undeclared/unknown	9.20%
By Age	
20 - 24	0.90%

25 - 29	4.20%
30 - 34	10.50%
35 - 39	12.00%
40 - 44	14.90%
45 - 49	15.80%
50 - 54	14.50%
55 - 59	15.80%
60+	11.20%
By Trans	
No	90.20%
Yes	0.20%
Undeclared/unknown	9.60%

6.7 Pay data & Occupational segregation

The measures used are the mean and the median, as recommended by Close the Gap: [Pay gap guide | Close Your Pay Gap](#). Occupational segregation is the concentration of staff across different job roles (horizontal segregation), and different pay bands (vertical segregation).

6.7.1 Gender Pay gap by year – differences compared to the 'Male' reference group

	2021/22	2022/23	2023/24
Mean Gender Pay Gap	15.3%	12.8%	10.0%
Median Gender Pay Gap	14.9%	14.0%	9.1%

6.7.2 Ethnicity pay gap by year – differences compared to the 'White-combined' reference group

Mean	2021/22	2022/23	2023/24
1. White - combined	reference group	reference group	reference group
2. Non-white - combined	0.7%	-7.6%	-5.4%
3. Declined/UnKnown	-3.7%	1.7%	6.5%
Median	2021/22	2022/23	2023/24
1. White - combined	reference group	reference group	reference group
2. Non-white - combined	17.1%	0.0%	1.9%
3. Declined/UnKnown	-0.3%	1.9%	3.8%

6.7.3 Disability pay gap by year – differences compared to the 'No' reference group

Mean	2021/22	2022/23	2023/24
1. No	reference group	reference group	reference group
2. Yes	-17.7%	-23.5%	-20.70%
3. Declined/UnKnown	4.4%	4.1%	6.90%
Median	2021/22	2022/23	2023/24
1. No	reference group	reference group	reference group
2. Yes	-19.5%	-24.4%	-20.70%
3. Declined/UnKnown	0.0%	3.8%	0.70%

Occupational Segregation

6.7.4 Disability (horizontal by band)

	Undeclared/			Grand
	+ No disability	+ Disability	+ UnKnown	Total
Job Family/Band				
ADMINISTRATIVE SERVICES				
Band 3	*	*	*	*
Band 4	10.8%	*	*	12.4%
Band 5	12.9%	*	*	15.6%
Band 6	12.1%	*	*	14.6%
Band 7	24.3%	*	2.5%	28.2%
Band 8A	12.2%	*	*	13.1%
Band 8B	4.9%	*	*	5.6%
Band 8C	*	*	*	*
Band 8D	*	*	*	*
MEDICAL AND DENTAL	*	*	*	2.2%
OTHER THERAPEUTIC	2.7%	*	*	3.6%
SENIOR MANAGERS	*	*	*	*
Grand Total	86.2%	6.1%	7.7%	100.0%

6.7.5 Race (horizontal by band)

	Non-White (Combined Group)	White (Combined Group)	Undeclared/ UnKnown	Grand Total
Race				
Admin. Services				
Band 3	0.0%	*	0.0%	*
Band 4	*	11.7%	*	12.4%
Band 5	*	14.2%	*	15.6%
Band 6	*	13.1%	*	14.6%
Band 7	*	24.3%	*	28.2%
Band 8A	*	11.5%	*	13.1%
Band 8B	*	5.0%	*	5.6%
Band 8C	0.0%	*	0.0%	*
Band 8D	0.0%	*	*	*
Medical	0.0%	*	*	2.2%
Other Therapeutic	*	2.7%	*	3.6%
SENIOR MANAGERS	*	*	0.0%	*
Grand Total	4.3%	88.8%	6.8%	100.0%

6.7.6 Sex (horizontal by band)

Sex (Horizontal by Band)	Female	Male	Grand Total
ADMINISTRATIVE SERVICES			
Band 3	50.0%	50.0%	100.0%
Band 4	91.3%	8.7%	100.0%
Band 5	80.5%	19.5%	100.0%
Band 6	77.8%	22.2%	100.0%
Band 7	73.2%	26.8%	100.0%
Band 8A	74.0%	26.0%	100.0%
Band 8B	64.5%	35.5%	100.0%
Band 8C	57.1%	42.9%	100.0%
Band 8D	90.0%	10.0%	100.0%
MEDICAL AND DENTAL	50.0%	50.0%	100.0%
OTHER THERAPEUTIC	75.0%	25.0%	100.0%
SENIOR MANAGERS	85.7%	14.3%	100.0%
Grand Total	76.6%	23.4%	100.0%

6.7.7 Sex (Average Pay & Differential)

	Female Average	Male Average	% Difference
ADMINISTRATIVE SERVICES			
Band 3	£14.06	£13.02	-7.9%
Band 4	£15.00	£14.73	-1.8%
Band 5	£17.49	£17.11	-2.2%
Band 6	£20.85	£21.23	1.8%
Band 7	£25.57	£25.63	0.2%
Band 8A	£30.35	£30.00	-1.2%
Band 8B	£35.97	£35.50	-1.3%
Band 8C	£39.08	£42.59	8.2%
Band 8D	£49.40	£50.32	1.8%
MEDICAL AND DENTAL	£57.86	£60.66	4.6%
OTHER THERAPEUTIC	£35.46	£33.90	-4.6%
SENIOR MANAGERS	£51.56	£68.64	24.9%

6.7.8 Sex (vertical by band)

Sex (Vertical by Band)	Female	Male	Grand Total
ADMINISTRATIVE SERVICES			
Band 3	*	*	*
Band 4	14.8%	4.6%	12.4%
Band 5	16.4%	13.1%	15.6%
Band 6	14.8%	13.8%	14.6%
Band 7	27.0%	32.3%	28.2%
Band 8A	12.7%	14.6%	13.1%
Band 8B	4.7%	8.5%	5.6%
Band 8C	*	2.3%	*
Band 8D	2.1%	*	*
MEDICAL AND DENTAL	*	4.6%	2.2%
OTHER THERAPEUTIC	3.5%	3.8%	3.6%
SENIOR MANAGERS	*	*	*
Grand Total	100.0%	100.0%	100.0%

6.7.9 Part time Employments by Sex

Part Time by Sex	Female	Male	Grand Total
ADMINISTRATIVE SERVICES			
Band 4	93.8%	6.3%	100.0%
Band 5	92.9%	7.1%	100.0%
Band 6	85.0%	15.0%	100.0%
Band 7	92.3%	7.7%	100.0%
Band 8A	85.0%	15.0%	100.0%
Band 8B	60.0%	40.0%	100.0%
Band 8D	100.0%	*	100.0%
MEDICAL AND DENTAL	60.0%	40.0%	100.0%
OTHER THERAPEUTIC	100.0%	*	100.0%
Grand Total	86.7%	13.3%	100.0%

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