Focus on Inclusion / 2017

A publication about equality, diversity and inclusion at Moorfields Eye Hospital NHS Foundation Trust

Everyday inclusion
Contents

00. If you only read this 02
01. Everyday inclusion at Moorfields 05
02. Inclusion for innovation 09
03. Inclusion for all – our people, our patients 21
04. Inclusion for all - our partners, our communities 33
05. Conclusion 39
06. Appendix – diversity data 41
If you only read this

This year equality, diversity and inclusion has been a clear focus for Moorfields, as well as embedding The Moorfields Way. **These are examples of what we have achieved, look through the report to find out more.**

We are proud that the Care Quality Commission (CQC) rated our trust as ‘Good’. This is testament to the professionalism, dedication and commitment of our staff across the trust.
• Transform our theatres
• Enhance accessibility of information
• Listen to our patients and improve waiting times

• Launch our first staff network
• Do things differently to be more inclusive
• Value our staff

• Design clinics for patients with a learning disability
• Harness the talents of our communities
• Raise awareness of sight loss
The Moorfields Way four commitments.

**CARING**
so everyone feels listened to and valued

**ORGANISED**
so we don’t waste anyone’s time

**EXCELLENT**
so we always deliver a first class professional service

**INCLUSIVE**
so everyone feels involved, informed and part of a team
Everyday inclusion at Moorfields

“Our commitment to equality, diversity and inclusion is at the heart of our organisational culture. We hold ourselves to account to live The Moorfields Way behaviours – caring, organised, excellent and inclusive – in all we do, and encourage staff to feel empowered to think differently and drive change. Every day I see and hear of examples of our staff going the extra mile for patients. Our staff are our greatest asset and my priority is to create and support a culture in which their pride, enthusiasm and dedication is harnessed so that we’re at our best consistently.”

David Probert, chief executive, Moorfields Eye Hospital NHS Foundation Trust

To demonstrate what we do and what we are planning, we publish a Focus on Inclusion (FOI) report every year. It is also our way of showcasing our commitment to embedding inclusion and how we meet the Public Sector Equality Duty (PSED). Last year, we told you about our equality objectives for 2016 – 2020.

In 2017, we are going to look at how we have brought to life The Moorfields Way. We’ve focused on inclusion every day; this means that we’re making it real to everyone by embedding inclusion in everything we do. We are striving to be the very best we can be – we are taking the opportunity to be a pioneer in this field and enhance the daily experience of our staff, members, patients and communities.
Equality, Diversity and Inclusion for
- Our patients
- Our staff
- Our communities

Equality Act

Sexual orientation

Pregnancy & maternity

Gender reassignment

Disability

Sex

Race

Marriage & civil partnership

Age

Religion & belief
Moorfields equality objectives

In 2016, we set our equality objectives.

To improve the equality outcomes for patients, carers and visitors we are committed to:

• Improve the experience of people identified by the protected characteristics when waiting for their appointment
• Make information more accessible and specific to patients who have a clinical need.

To improve the equality outcomes for our workforce we are committed to:

• Increase the diversity of people in leadership and management roles
• Continue to build a strong and positive culture of inclusion
• Improve our collection of equality data.

To share our leadership of inclusion across our community we are committed to:

• Broaden our reach to voluntary partners in order to gain different perspectives.
We can do things differently when we are engaged with our staff, when we create a culture that welcomes and is open and receptive to new ideas from all.
02. Inclusion for innovation

We believe that to be the best we can be and provide excellent care to our patients, we need to create a culture of innovation.

We are pioneering and developing an innovative mindset for all and this is making positive changes at Moorfields.

Being inclusive is at the core of our journey. Empowering our staff to welcome and propose changes, be brave, make things better and listen to our patients, their family, friends and carers will give us the opportunity to make a real difference.
"I am really impressed with the work the theatre manager has managed to do in such a short time. Really well done!"

Theatre Porter

In January 2017, our CQC report highlighted that “patients thought the care they receive exceeds their expectations.”
Doing things differently. Transforming our City Road theatre

Following feedback from our staff on how theatres were delivering services, we implemented a new programme to transform our theatres at City Road. Staff were actively involved in the process and were empowered to transform the way we do things.

Our inclusive approach to improve services in theatres at City Road has:

- Reduced the number of agency staff employed and made better use of permanent staff
- Reduced the number of times information is handled and inputted to ensure consistent care
- Developed a Moorfields theatre group to ensure consistency in standards and best practice in caring and treating our patients
- Introduced monthly meetings with staff, and improved appraisal and mandatory training so staff are better motivated and valued
- Established a communication board to inform staff quickly of decisions.

This new approach is a tangible example of The Moorfields Way in action by:

- Creating a culture of inclusion
- Engaging staff
- Better patient care
Making information more accessible

One of our equality objectives is ensuring that information is accessible and specific to our patients’ needs, many of whom have sight loss. We believe that this is crucial to ensure we are an inclusive trust that provides excellent patient care.

In the second half of 2016 we established a patient engagement panel to review and contribute to the work of the Accessible Information Standard (AIS) implementation project. The AIS patient panel advises, challenges and approves the work of the AIS from a patient perspective.

The group has already reviewed and made proposals to improve the outpatient booking forms and is developing a communication questionnaire that we will use for all new patients.

“We are leading change working in partnership”

Part of our focus on inclusion is about sharing our expertise and enhancing the lived experience for everyone.

“How can we help you.”
The Accessible Information Standard is an NHS England requirement to embed a consistent approach to communicating with patients across the NHS. It will ensure that people can access the information they need in a format that is appropriate to them. It will:

1. Identify need
2. Record need
3. Flag need
4. Share need
5. Meet the need
“I have been concerned about losing my place in the past, not so this time with using the pager”
Enhancing patients’ experience. Waiting times

The Moorfields Way and our focus on inclusion is helping us to innovate and do things differently so that we can enhance the experience for all our patients.

Patients told us that waiting in clinics was frustrating. They were reluctant to leave the waiting room to get a coffee or use the bathroom in case they missed their turn to see the nurse or doctor. Patients, especially those with hearing loss, have also said they miss their turn simply because they cannot hear their name being called.

As a three week trial, we gave pagers to patients who wish to leave waiting area. It gave them much more flexibility and confidence.

75% of patients told us they would like to use the pagers again

Patient feedback:

“Excellent idea, felt that I could go to the toilet without having to worry about losing my place”

“It felt good to be able to stretch my legs without having to worry”

83% of patients found the pager useful
Inclusion for us is all about being real, being yourself and doing simple things that make a difference for everyone.
We promote a culture where good ideas come from all our staff. Simple everyday inclusion from staff makes a real difference.

Patients told us that they wanted to have a visible way to identify staff and know their name. In 2016, staff were given new name badges that we designed with the RNIB to ensure they are easy to read. We removed job titles from badges because, regardless of our role at Moorfields, we are here to help the person in front of us.

The idea of implementing the #hellomynameis campaign at Moorfields came from our outpatient and diagnostic Matron and one of our lead nurses.

The chief executive and director for nursing and allied health professions strongly support this initiative.

This demonstrates the power of our people, living The Moorfields Way and the trust’s commitment to build a culture of inclusion that leads to better care for patients.

@Moorfields

“My friend had a cataract operation at Potters Bar and really appreciated and noticed #hellomynameis It made a difference.”

Twitter feedback
Listening to our patients

We want to ensure that we deliver excellence for everyone. Listening to feedback is crucial to improve how we care and find new ways to innovate.

This year we have started to invite patients to come to our board and share their stories. This provides invaluable insight to how we deliver our care and how we are creating an inclusive culture.

As a result, we have made some improvements to our communications with patients about their care and their appointments.

/ You can find out about two of our patients’ stories here:

Mavis’ story

Sheila’s story
Embedding inclusion
What’s next?

We are proud of the progress we have made this year, being more inclusive has led to a number of positive changes and helped us to innovate. It has improved how our staff feel at work and how we care for our patients, as evidenced in staff and patient surveys.

We know we still have a lot to do to truly embed an inclusive culture, where people can take brave decisions and do things differently. We see this as a great opportunity for all of us at Moorfields.

To embed inclusion we will:

• Ensure best practice is shared across all the trust to foster innovation

• Empower people to be brave

• Set up and disseminate a clear process to carry out equality impact assessments so we assess our behaviours to ensure they are inclusive

• Join up all our equality, diversity and inclusion work by creating an inclusion action group.
Percentage of staff who are aware of The Moorfields Way

Sept 2015: 92% (562 respondents)
Sept 2016: 96% (365 respondents)

Percentage of staff who said they have seen a change as a result of The Moorfields Way

Sept 2015: 26%
Sept 2016: 45%
03. Inclusion for all. Our people, our patients

Inclusion is about every one of us, our staff, our patients, their friends and family, our communities and our partners. Making sure everyone is included is fundamental to delivering excellence, being organised and making sure that people feel that they are cared for.

/Staff feedback on the impact of The Moorfields Way:
“People talk about the commitments, now we have a standard to work towards.”

“People are more conscious of others.”

“More clinics, improvements in waiting times, better communications and facilities while patients are waiting to be seen. We get positive feedback from patients. The Moorfields Way means better quality of care.”

“I feel more inclusive and part of the wider Moorfields team.”

In this section, we look at what we have done so far on our journey to build an inclusive working environment and what we need to do in the future.
At Moorfields we believe that employee networks are a great asset to make us more inclusive and provide a pipeline for new ideas.
staff objective

Our first employee network Moorability

One key component of The Moorfields Way is to encourage people to take part in conversations that affect them and shape solutions. To facilitate this, in 2016, we launched our first employee network.

The network was created at the request of staff to improve the visibility, experience and potential of employees who have a disability. Moorability is a forum for all employees with a disability or those who are interested in the network.

/The network objectives are:

01 Raise awareness and understanding of the diverse needs of our workforce

02 The network will be recognised as a place where staff can share their experience and seek support

03 The forum will promote acceptance and inclusion of staff with disabilities.

We hope that Moorability will help us develop a deeper understanding of the different needs and expectations of our staff, patients and communities.
“Managers are more inclusive, considerate and approachable. Senior clinicians have engaged with The Moorfields Way and their enthusiasm has spread to colleagues.”*

*from quarterly Staff, Friend and Family test
Making our senior executives more visible

We are creating more opportunities for our senior executive team to be more visible and known to staff. We want to make sure that all staff feel able to access senior leaders with ideas, foster innovation and to raise their own career aspirations. It also makes it easier to raise any concerns that may help us to deliver excellence or be more organised.

In 2016 we moved our senior executive offices into the City Road hospital to increase accessibility of senior managers. Our senior managers are getting out and about and staff are saying they are more visible. This demonstrates a commitment to inclusive leadership.

Our chief executive David Probert regularly spend time with different teams. He also writes a monthly blog, asking for direct views and ideas from staff and takes part in staff inductions.

“Managers are more visible.”*
“A good day for me is when my work is appreciated, not just by patients but by my managers and colleagues as well.”
People add value when they feel valued

As part of The Moorfields Way, staff told the trust that one of the most important things we can all do to improve our working experience is to positively appreciate and recognise our staff for the work they do. A simple recognition and saying thank you is very important. This is one of the ways we make inclusion an everyday experience.

Staff can now nominate someone as ‘employee of the month’ if they have demonstrated the four commitments of The Moorfields Way: caring, organised, excellent, and inclusive.

Employee of the month is a fun and enjoyable scheme that helps the trust to find best inclusive practices.

We also have a programme of staff recognition called Moorfields star. A new category will be through patient nomination.

We have listened to staff and changed our recognition programme to fit within The Moorfields Way and ensure that all colleagues feel valued.
Clinical governance meeting

We recognise that one of the most effective ways to instill change is to be brave and to try new approaches.

At a recent clinical governance meeting staff decided to do things differently. Rather than our traditional approach of ‘telling’ colleagues about a problem and then ‘telling’ them about the solution, everyone in the room was invited to find a collective and creative solution to a problem. All views were valued and having the opportunity for an inclusive approach to problem solving was appreciated. This demonstrates how inclusion for all can lead to innovation and excellence in everything we do.

Clinical governance meetings are team based and focus on improving clinical care. A wide variety of hospital staff are included and given opportunities to talk about issues and contribute ideas that lead to improvement.

We’re encouraging a culture in which every voice is listened to and every colleague has an opportunity to contribute.
The NHS Staff Survey is a good measure of how we are doing against The Moorfields Way. In response to the 2015 survey, we have:

- Created an online equality, diversity and inclusion training module to improve accessibility.
- Continually developed and increased the number of volunteer contact officers.
- Taken a closer look at the wellbeing of our staff and teamed up with the NHS Healthy London partnership to host a healthy living week.
- Continue to roll out our unconscious bias training programme.

Next we will:

- Empower staff to create new employee networks and other ideas that support a culture of inclusion.
- Improve working conditions and communication to make sure staff feel informed and included.
- Take strong actions to embed The Moorfields Way, improve staff experience to reduce issues of harassment, bullying and discrimination raised in the survey.
- Improve diversity at all levels in the trust.
- Create a handbook on equality, diversity and inclusion.
**133,563,897**
Total steps

**231**
Pedometers

**5**
Million burned calories

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**NHS staff survey 2015**
766 respondents

<table>
<thead>
<tr>
<th>Compared to all NHS trusts Moorfields is:</th>
<th>Compared to other acute specialist trusts Moorfields is:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Joint first for overall staff engagement</td>
<td><strong>1st</strong> for overall staff engagement</td>
</tr>
<tr>
<td><strong>2nd</strong> for staff satisfaction with the quality of work and care they are able to deliver</td>
<td><strong>1st</strong> for recognition and value of staff by managers and the trust</td>
</tr>
<tr>
<td><strong>3rd</strong> equal for staff motivation</td>
<td><strong>1st</strong> equal for staff motivation</td>
</tr>
<tr>
<td><strong>5th</strong> for recognition and value of staff by managers and the trust</td>
<td><strong>2nd</strong> equal for support from a line manager</td>
</tr>
</tbody>
</table>
04. Inclusion for all. Our partnerships, our communities

We are the leading provider of eye health services in the UK and a world-class centre of excellence for ophthalmic research and education. **Our reputation is for providing the highest quality ophthalmic care.**
patient & community objective

Care for patients with learning disabilities
Including everyone can mean creating services to better meet the needs of our communities.

The department of optometry and orthoptics has put in place specific clinics for patients who have a learning disability.

These specific clinics run four times a year and help to better meet the needs of this group of patients.

Educating and embedding inclusive behaviours
Part of our role is to educate others about eye care and the experience of those people with sight loss.

Our learning and development team have designed an engaging film on ‘leading and guiding’ to raise awareness of the perspective of our patients with sight loss. It has been widely shared on social media, including by the Royal National Institute of Blind People (RNIB).
Inspiring the inclusive leaders of tomorrow

Our trust has a responsibility to engage with our diverse communities to foster the leaders of tomorrow. This is crucial to ensure we continue to meet the needs of our diverse range of patients and staff.

Moorfields set up a community project in 2015 specifically for Black and Minority Ethnic (BME) students, undergraduates and young adults. It provides BME people with the opportunity to talk with business leaders, have exposure to job shadowing and possible work experience. At one of the sessions, participants received a presentation about the clinical education and research activities at Moorfields and looked at the challenges facing the trust over the next five years. The objective was to inspire students to focus on possible career opportunities arising in the future.

Feedback from students showed that they were inspired by the opportunity to hear from senior leaders in the NHS, and that it helped them to focus on achieving their career aspirations.
This is an example of how The Moorfields Way commitments to inclusion and care make things better for our communities.
patient & community objective

Working in partnership with our communities
Including everyone, getting organised, promoting excellence and making sure people know we care - an example at Moorfields Eye Centre at St George’s Hospital, South London

Nurses at Moorfields Eye Centre at St George’s Hospital have been working in partnership with communities to ensure patients come to their appointments fully prepared.

Talks and presentations were organised in these communities to empower patients to find out more about eye care and appointments at the trust.

These talks have a particular focus on hypoglycemia, which is when the level of blood glucose drops below normal.

Following the session, patients arrive at their appointments better prepared and there has been an improvement in their care.

This is an example of how The Moorfields Way commitment to inclusion and care make things better for our communities.
We know that we still have a lot of work to do to meet our equality objectives and embed diversity and inclusion in everything we do. We will focus on implementing The Moorfields Way, empowering staff to be inclusive and continuing to listen to them and to our patients, their carers, friends and family.
05. Conclusion

We hope this report has provided you with insight into what Moorfields has done to meet its equality objectives and how we make inclusion part of what we do every day. The Moorfields Way has given us a clear focus and has delivered tangible equality benefits for our staff, our patients, their friends and family and our community.

There are many more real life inclusion stories being implemented at Moorfields such as creating a dementia friendly hospital, working with research partners to improve the quality of our care and taking forward actions relating to national schemes such as the Workplace Race Equality Standard.

We are putting together all our plans for equality, diversity, and inclusion to drive changes in a strategic way and to continue to embed The Moorfields Way.

This year, listening to our patients, our staff, our partners and communities has given us invaluable insight into what we need to do and what we need to change to become a truly inclusive organisation.
Ever wondered what happens to your feedback on the Friends and Family Test cards? The patient experience committee meets four times a year to review your comments and to allocate improvement ideas appropriately. In 2016, the trust received 99,104 responses.

“I am always grateful for the excellent care Moorfields gives when I attend for regular checks. Today in particular I was seen by a nurse who really went the extra mile to make me feel at ease and informed about what was going on, and by a doctor who again took a lot of time to review my notes and ensure I understood the current issues with my retina.”

Friends and Family Test

96% of people who feedback in the Test cards, said they would recommend Moorfields to friends and family.
Between October 2015 and October 2016, 81,557 patients attended A&E. Note: these patients may have attended more than once that year.

A&E attendance by gender
There has been no change in the proportion of male and female patients attending A&E compared with 2015.

48% male
52% female
**A&E attendance by age group**

There is little variation in the attendance of patients of different age groups when split by gender.

![Age Group Attendance Chart]

**A&E attendance by ethnicity**

There has been little change in terms of the ethnic background of patients attending A&E between 2014-15 and 2015-16. This is fairly representative of the London population by ethnic groups (2011 Census).

![Ethnicity Distribution Chart]
Inpatients

Between October 2015 and October 2016, Moorfields received 27,846 inpatients. Note: these patients may have attended more than once that year.

Inpatients by gender

There has been little change in the proportion of male and female inpatients compared with 2015.

- **Male**: 48%
- **Female**: 52%

Inpatients by gender and age

There has been little change in the age and gender of inpatients compared with 2015.

- <16: 3% (female), 4% (male), 3% (total)
- 16-39: 10% (female), 15% (male), 12% (total)
- 40-59: 19% (female), 23% (male), 21% (total)
- 60-79: 49% (female), 44% (male), 47% (total)
- 80+: 18% (female), 15% (male), 17% (total)
Inpatients by ethnicity

There has been little changes in terms of the ethnic background of inpatients since last year.

- 15% Asian
- 9% Black
- 1% Chinese
- 1% Mixed
- 14% Other
- 39% White
- 20% Unknown
Outpatients
Between October 2015 and October 2016, Moorfields received 206,853 outpatients.

Outpatients by gender
There has been no change since last year in the proportion of men and women outpatients.

48% male
52% female

Outpatients by gender and age
There has been no change since 2015 in the genders and age of outpatients attending Moorfields.

- <16: 10% female, 17% male, 11% total
- 16-39: 15% female, 16% male, 15% total
- 40-59: 24% female, 27% male, 25% total
- 60-79: 37% female, 34% male, 36% total
- 80+: 14% female, 11% male, 13% total
Outpatients by ethnicity

There has been no change since last year in the ethnic background of outpatients.

- 34% white
- 13% Asian
- 9% Black
- 1% Chinese
- 1% Mixed
- 16% Other
- 25% Unknown

Moorfields Eye Hospital / Focus on Inclusion 2017
Current workforce by gender
Moorfields employs 2,025 staff. 68% of staff are female (1,387) and 32% are male (638). This is broadly the same as in 2015.
### Current workforce by gender and pay band

<table>
<thead>
<tr>
<th>Pay Band</th>
<th>Female</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ad-hoc/Other</td>
<td>63%</td>
<td>37%</td>
</tr>
<tr>
<td>Band 1</td>
<td>55%</td>
<td>45%</td>
</tr>
<tr>
<td>Band 2</td>
<td>27%</td>
<td>73%</td>
</tr>
<tr>
<td>Band 3</td>
<td>29%</td>
<td>71%</td>
</tr>
<tr>
<td>Band 4</td>
<td>28%</td>
<td>72%</td>
</tr>
<tr>
<td>Band 5</td>
<td>24%</td>
<td>76%</td>
</tr>
<tr>
<td>Band 6</td>
<td>19%</td>
<td>81%</td>
</tr>
<tr>
<td>Band 7</td>
<td>27%</td>
<td>73%</td>
</tr>
<tr>
<td>Band 8-9</td>
<td>39%</td>
<td>61%</td>
</tr>
<tr>
<td>Speciality Registrar</td>
<td>43%</td>
<td>57%</td>
</tr>
<tr>
<td>Speciality Doctor</td>
<td>60%</td>
<td>40%</td>
</tr>
<tr>
<td>Associate Specialist</td>
<td>47%</td>
<td>53%</td>
</tr>
<tr>
<td>Consultant</td>
<td>44%</td>
<td>56%</td>
</tr>
<tr>
<td>Other Medical Grade</td>
<td>44%</td>
<td>55%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>68%</strong></td>
<td><strong>32%</strong></td>
</tr>
</tbody>
</table>

At Moorfields, women are overrepresented in Band 1 to 8-9 and as Speciality doctors. Note speciality registrar and other doctors constitute less than 30 employees.
Current workforce - proportion of men and women in each ethnic group

This graph presents the proportion of men and women in each ethnic group. Overall there is little difference between the proportion of men and women who are Asian, Chinese and White. However, more women are from black background and slightly more men come from mixed backgrounds.

- **Asian**: 20% female, 23% male
- **Black**: 11% female, 19% male
- **Chinese**: 3% female, 3% male
- **Mixed background**: 4% female, 6% male
- **Not stated**: 7% female, 9% male
- **Other**: 5% female, 4% male
- **White**: 41% female, 44% male
Current workforce by ethnicity

42% of Moorfields staff come from a white background and 50% are from Black and Minority Ethnic backgrounds. There has been little change in the ethnic composition of Moorfields’ workforce compared with 2015.
Current workforce by ethnicity and pay band

Note: This chart only presents white and non-white staff. Staff who have not stated their ethnicity have been included in the calculation but are not presented on the graph to make it more meaningful. This explains why the total does not add up to 100%.

Overall 50% of staff are from non-white backgrounds. They are less represented in Band 8-9 (33%), consultant (40%) and other medical grades (37%). Non-white people are overrepresented in the lowest pay band (except band 4).
Disability

Current workforce by disability
Only 1% of Moorfields staff have declared a disability. In the UK, 5.7% of the UK working population has a disability.
**Religion**

**Current workforce by religion and belief**

Over 50% of Moorfields staff have not declared or decided not to declare their religion. Among those who declared their religion/belief, the majority are Christian (29.2%) and Muslim (6.5%). There has been little change compared with 2015.
Sexual orientation

Current workforce by sexual orientation
Less than 50% of Moorfields staff have disclosed their sexual orientation, in part as staff have not updated their personal records. It is difficult to make meaningful analysis of the data for this purpose. At present only 1% of staff have identified themselves as lesbian, gay or bisexual.

- 48% heterosexual
- 52% not stated/ Do not wish to disclose
- 0.9% lesbian, gay, bisexual

Current workforce age profile
Overall staff at Moorfields are aged between 25-54 (77%). 18% of Moorfields employees are over 55.
Proportion of applied, shortlisted and appointed staff by gender

Overall the proportion of men and women who were appointed is in line with the proportion of those who applied and were shortlisted.

In terms of success rates, at shortlisting stage it is 23% for women and 19% for men. At appointment stage the success rate is similar for both genders.
Ethnicity

Proportion of applied, shortlisted and appointed staff by ethnicity
Note BME = Black and Minority Ethnic.

- **applied**
  - BME: 65%
  - White: 31%
  - Not stated: 4%

- **shortlisted**
  - BME: 60%
  - White: 37%
  - Not stated: 4%

- **appointed**
  - BME: 46%
  - White: 42%
  - Not stated: 12%

The proportion of staff who are from Black and Ethnic Minorities decrease at each stages of the recruitment process. 65% of applicants and 46% of appointed are from BME background.

The success rate for BME candidates is 20% at shortlisting stage (26% for white applicants) and 2% at appointment stage (4% for white applicants)
Disability

Data of disabled applicants is not included as the disclosure rate is too small to make meaningful interpretation.

Age

Proportion of applied, shortlisted and appointed staff by age

Overall the proportion of staff from different age groups is broadly in line between applicants, shortlisted and appointed. The success rate is slightly higher for people aged 35-44 (4% instead of 3% average).
Religion - belief

Proportion of applied, shortlisted and appointed staff by religion - belief

Overall, the proportion of applicants, shortlisted and appointed staff is similar for all the different religions (and absence of religion).

The only group that is not in line is for the Islamic faith. 20% of applicants are Muslims but 10% are appointed.

The overall success rate is 3% for all applicants. Applicants who are Muslims are the only ones who have a success rate under 3%.
Sexual orientation

Data of applicants by sexual orientation is not included as the disclosure rate is too small to make a meaningful interpretation.

“Our diversity data has given us invaluable insights to drive change and design our plans to achieve our equality objective and create an inclusive organisation.”
Everyday inclusion at Moorfields
We would like to thank the staff at Moorfields and the patient forum who contributed to this year’s Focus on Inclusion.

This report has been produced with the support of Inclusive Employers and Strudel.
https://www.inclusiveemployers.co.uk
https://www.strudel.co.uk