

Athena SWAN Silver department award application

Name of university:	University of Leicester			
Department:	Department of Cardio	ovascular Sciences		
Date of application:	November 2015			
Date of university Bronze At	hena SWAN award:	November 2014 renewal		
Contact for application:	Professor Tim Coats			
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Departmental website address: http://www2.le.ac.uk/departments/cardiovascular-sciences

Athena SWAN **Silver Department** awards recognise that in addition to university-wide policies the department is working to promote gender equality and to address challenges particular to the discipline.

Not all institutions use the term 'department' and there are many equivalent academic groupings with different names, sizes and compositions. The definition of a 'department' for SWAN purposes can be found on the Athena SWAN website. If in doubt, contact the Athena SWAN Officer well in advance to check eligibility.

It is essential that the contact person for the application is based in the department.

Sections to be included

At the end of each section state the number of words used. Click <u>here</u> for additional guidance on completing the template.

List of Abbreviations

Academic Clinical Fellow	ACF
Action Plan	AP
Athena SWAN	AS
Biomedical Research Unit	BRU
British Heart Foundation	BHF
Department of Cardiovascular Sciences	CVS
Departmental Equalities Officer	DEO
Departmental Executive Committee	DEC
Doctor of Medicine	MD
Doctor of Philosophy	PhD
Early Career Researcher	ECR
Glenfield General Hospital	GGH
Head of Department	HoD
Health Education East Midlands	HEEM
Higher Education Academy	HEA
Higher Education Statistics Agency	HESA
Human Resources	HR
International Women's Day	IWD
Keeping in Touch	КІТ
Leicester Learning Institute	LLI
Leicester Royal Infirmary	LRI
National Health Service	NHS
National Institute for Health Research	NIHR
Postgraduate Research	PGR
Postgraduate Taught	PGT
Principal Investigator	PI
Patient and Public Involvement/Engagement	PPI/E
Science, Technology, Engineering and Mathematics	STEM
Self-Assessment Team	SAT
Senior Lecturer	SL
Specific, Measurable, Achievable, Realistic, Time-bound	SMART
United Kingdom	UK
United Nations	UN
University Hospitals of Leicester NHS Trust	UHL
University of Leicester	UoL
Working Lives Committee	WLC

In the application we refer to staff and students using a number of generic and specific terms. The table below provides a context for these terms and the University grades they refer to:

Grade	Clinical	Non-clinical	Generic	
	MD / PhD Student	PhD Student	Students	
6	Academic Clinical Fellow	Research Assistant		
7	Clinical Research Fellow	Research Associate	Research Staff	
8		Research Fellow]	
0	Clinical Lecturer	Lecturer		
9	Senior Lecturer	Senior Lecturer	Academic Staff	
10	Professor	Professor		

1. Letter of endorsement from the head of department: maximum 500 words

An accompanying letter of endorsement from the head of department should explain how the SWAN action plan and activities in the department contribute to the overall department strategy and academic mission.

The letter is an opportunity for the head of department to confirm their support for the application and to endorse and commend any women and STEMM activities that have made a significant contribution to the achievement of the departmental mission.



21st November 2015

Dr Ruth E Gilligan Athena SWAN Manager Equality Challenge Unit 7th Floor, Queens House 55/56 Lincoln's Inn Fields London WC2A 3LJ College of Medicine, Biological Sciences and Psychology Department of Cardiovascular Sciences BHF Cardiovascular Research Centre Glenfield Hospital · Groby Road Leicester LE3 9QP · UK

BHF Professor of Cardiology & Head of Department Director, NIHR Leicester Cardiovascular Biomedical Research Unit **Professor Sir Nilesh J Samani** BSc MD FRCP DSc (Hon) FACC FESC FMedSci DL

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Dear Dr Gilligan

With successful implementation of our Bronze Action Plan, I am delighted to support my Department's application for an Athena SWAN Silver award.

Key Charter principles such as core hours (10am-4pm), mixed-gender selection panels and flexible working patterns are now firmly embedded. Yet cultural change goes much further, permeating all aspects of Departmental life, with regular discussion of gender issues, career progression and work-life balance at staff meetings, greatly improved communication (e.g. through a new monthly HoD newsletter), and a revised induction pack and website that provide information and links relevant to women in academic careers. Our innovative Working Lives Committee, established as part of our Bronze AP, has engendered wide engagement throughout the Department and put "listening into action". I am proud that our male academics have enthusiastically led/supported many of the initiatives – for example, already more than 90% have signed the UN HeforShe pledge (see Section 5).

At the time of our Bronze application we recognised that the gender make-up of the medical specialties from which we recruit our clinical academics posed a major challenge in effecting rapid

change in gender balance, especially in senior posts - less than 15% of cardiologists are women and there are only two female vascular surgeons in the UK. While seeking to proactively address this both in the near (e.g. by instructing search consultants to particularly identify suitable female candidates) and longer term (through engagement with our NHS and other partners), we have deliberately focused on early career female researchers and I am delighted to report substantial progress. We now have four female lecturers, from only one in 2012, with three of these transitioning from researcher positions within the Department. Key elements of our Silver AP are to maintain and enhance this pipeline through strong and relevant mentorship and support so that new lecturers can progress to senior academic posts. Part of this includes exposure to appropriate role models – for example, recently we invited Professor Jane Dacre, President of the Royal College of Physicians, who gave an inspiring talk on "The Future of Women in Medicine and Medical Research".

In 2014, we celebrated the appointment of Professor Alison Goodall from our Department as interim Pro Vice-Chancellor and Head of College and she continues in a strategic position as Deputy Head of College. I would like to particularly commend Dr Veryan Codd (post-doctoral associate appointed to Lecturer in 2013) for her role as the link between junior researchers in CVS and the University, and Ms Eleanor Jackson, Departmental Manager, for her unstinting championing of inclusivity in the Department. We have greatly benefited from the advice of Dr Kate Williams, the College Gender Equality Lead.

Personally, I have thoroughly enjoyed attending and contributing to the SAT, supporting and resourcing initiatives that have come forward, and promoting gender equality issues in clinical settings (see Section 5). My Department's Athena Swan journey is now firmly established and I look forward with great enthusiasm and commitment to the next phase.

Kind regards

Nilesh J Samani

(492 words)

2. The self-assessment process: maximum 1000 words

Describe the self-assessment process. This should include:

a) A description of the self-assessment team: members' roles (both within the department and as part of the team) and their experiences of work-life balance

Our self-assessment team (SAT) of seven men and eight women, based across two sites, reflects a wide range of departmental roles, academic grades, clinical specialisms and work/life experiences. Contribution to the SAT is recognised in our Workload Model with 20 hours of time allocated for preparing for and attending SAT meetings (rotated between locations to allow all staff to participate) and additional time for undertaking other SAT-related activities e.g. survey design.

The members are:



Matt Bown, Senior Lecturer in Vascular Surgery. SAT clinical liaison. Balances clinical commitments, academic duties and shares childcare with his wife, a Consultant Surgeon.

Pete Braund, Research Associate. Researcher representative. Gained his PhD through part-time study, working flexibly for several years with family caring responsibilities.

Tim Coats, Chair in Emergency Medicine. SAT Chair. Established Clinical Academic Group to represent gender equality issues in clinical settings. Balances on-call and academic commitments, married to a doctor who works full-time.

Veryan Codd, Lecturer in Cardiovascular Molecular Biology. Early Career Researcher (ECR) link for SAT at College level. In dual-career relationship, balances work with shared hobbies.

Matthew Denniff, Research Assistant. Researcher representative. Flexible working pattern for several years to share childcare and for commitments as a parent governor.

Eleanor Jackson, Departmental Manager, Departmental Equalities Officer (DEO). Exit interview lead, data presentation for SAT, crafted Dignity at Work Statement (see P26). Working pattern accommodates school governor commitments.

Dave Lodwick, Hon. Lecturer in Molecular Biology. Data analysis for SAT. Worked flexibly, shared care of now-grown-up daughter.

Kim Mason, HR and PGR Administrator. Administrative and data support to SAT. Worked part-time while children were young, continues to balance work with family's activities.

Aisling McMahon, Scientific Fellow. New joiner perspective. Recently returned to research following extended period of carer's leave.



Meeta Patel, full-time PhD student (2nd year). Co-leads student-specific component of annual surveys. Commutes from Birmingham.

Sukhvir Rai, Research Associate. Student to staff progression perspective. Recently undertook PhD in CVS, now working as post-doctoral researcher.

Glenn Rodrigo, Lecturer in Cardiovascular Science. Departmental Gender Equality Lead. Balances work-life and childcare responsibilities for four children with his wife who works full-time.

Nilesh Samani, Professor of Cardiology, HoD. Has clinical, University and external roles, and family commitments, providing significant work-life balance challenges.

Jodie Sandhu, Senior Research Technician, PhD student. Co-leads student-specific component of annual surveys. Balances full-time work with part-time PhD study and caring for three young children.

Emma Stringer, Career Development Fellow. ECR perspective. Balances full-time cross-site working with family life with two small children (see Case Study two).

(413 words)

b) an account of the self-assessment process: details of the self-assessment team meetings, including any consultation with staff or individuals outside of the university, and how these have fed into the submission

CVS's Athena SWAN (AS) journey began in spring 2012 with the creation of the SAT to:

- review processes, activity and culture across CVS, focusing on female academic careers but also considering genderneutral aspects contributing to overall departmental culture;
- consult (informally and through surveys);
- identify areas of good practice and those requiring improvement;
- gather relevant data and identify female attrition points and important information gaps; and



Figure 1: Staff and students celebrating our AS Bronze Award

• develop an Action Plan.

This resulted in our Bronze award in April 2013.

The SAT meets every **two months**. Membership has been reasonably stable: some new members have joined to replace students who have graduated, and to increase researcher representation (from one to four). The SAT has concentrated on implementing the Action Plan (AP) (incorporating feedback from the Bronze award process), to improve the recruitment, retention and progression of women in CVS, and on continuing consultation to inform progress. The SAT works closely with

our innovative **Working Lives Committee (WLC)**, established through our Bronze Action Plan to enhance the working culture, environment and work/life balance for <u>all</u> departmental staff and students (**Figure 2**).

Consultation: A **multi-faceted approach** to staff and student input at all levels has been an essential element of our self-assessment process.



Figure 2: Working Lives Committee poster

A staff and student survey is firmly embedded in our annual cycle. At the time of our Bronze award the survey was completed by 88 staff (70%), increasing to 109 (80%) in 2015.

AS is a standing item at our **All-Staff and PGR Meetings** and **Academic Staff Meetings**. These provide fora for (i) presenting findings of the annual surveys, (ii) updates on implementation of the Action Plan and (iii) receiving suggestions and feedback.

Our **website** can **capture anonymous feedback** from staff and students on any aspect of CVS and this is fed into the regular meetings of the SAT and WLC. *Ad hoc* **surveys** and **focus groups** tell us about specific aspects of CVS activities, such as core hours. SAT leads from all College departments meet **bi-monthly** to exchange experience, ideas and good practice, which also feeds back into our activities. SAT members attend national and local Athena SWAN events.

The SAT is allocated an annual budget of £4,000 (5% of

recurrent budget) for activities such as meeting attendance, **funding places** on the Aurora leadership development programme (two staff in 2015) and **supporting events** (e.g. an International Women's Day event in March 2015, which was attended by over 40 staff).

The SAT received feedback on this submission from the UoL AS Executive, College Gender Equality Lead, Head and Deputy Head of College and the Vice-Chancellor. The submission was posted on CVS's website, to ensure the process was transparent and inclusive, and comments from 32 staff and students have shaped the application. We received expert advice from leaders of successful SATs, including Professor Sue Ziebland (University of Oxford).

(482 words)

c) Plans for the future of the self-assessment team, such as how often the team will continue to meet, any reporting mechanisms and in particular how the self-assessment team intends to monitor implementation of the action plan.

The SAT will continue to meet bi-monthly, reporting to the Departmental Executive Committee (DEC) with quarterly updates and a formal annual report, and communicating with the wider CVS through the several mechanisms described above. SAT membership will be refreshed by two to three members annually through an open call, with the aim of ensuring good gender, specialism and work/life balance.

To monitor implementation of the AP, the SAT will develop a **dashboard** with specific members responsible for monitoring progress of each action, to be reviewed at each SAT and WLC meetings, to ensure timely progress.

(95 words)

(Section 2: 990 words)

3. A picture of the department: maximum 2000 words

a) Provide a pen-picture of the department to set the context for the application, outlining in particular any significant and relevant features.

Cardiovascular Sciences (CVS) is a diverse and vibrant Department - academically successful, research intensive, with close links to the NHS, and a large body of staff and students eager to collectively build a cohesive and supportive community in which everyone's contribution is valued and whose shared vision is to have a real impact on the health and well-being of patients and the public. The Department is one of eight departments within the College of Medicine, Biological Sciences and Psychology which in turn is one of three Colleges in the University.

CVS has over 130 staff and approximately 80 PhD/MD students, including several staff members who are registered as part-time PGR students. Academics span the broad range of cardiovascular disciplines and include both clinical and non-clinical staff. We are world-renowned for our work in cardiovascular genetics and in clinical trials that have had major impact on patient care. CVS hosts two British Heart Foundation (BHF) Chairs and a National Institute for Health Research (NIHR) Biomedical Research Unit (BRU) in Cardiovascular Disease. **CVS is purely postgraduate** although staff contribute to undergraduate teaching of medical and biological sciences degrees.

CVS works closely with the University Hospitals of Leicester NHS Trust (UHL), with clinical academic staff contributing to many areas of service delivery. The Department is housed in dedicated laboratory and office facilities at two hospital sites, Leicester Royal Infirmary (LRI) and Glenfield General Hospital (GGH), linked by a regular free Hospital Hopper bus service.

The establishment of the **WLC** to complement the role of the SAT as part of our Bronze AP has been a very positive development that has been widely welcomed in CVS and served as a model elsewhere in the College. The WLC's remit is to drive continuous improvement of the working culture, environment and work/life balance of all staff and students, and its formation embeds the principles of equality and work/life balance into the management structure. The Committee's membership, with some



Figure 3: WLC meeting

overlap with the SAT, is drawn from all sections of CVS, and includes academic and research staff, technical and administrative staff, and postgraduate students (see P22).

Between them, SAT and WLC have since our Bronze award:

- fed into CVS's strategy to maximise individual potential (details in Section 4);
- championed the embedding of core hours (10am to 4pm);
- introduced a Dignity at Work statement;
- trialled video-conferencing to reduce travel;
- improved awareness of flexible working options and HR policies and procedures;
- refreshed the induction pack for new starters with an increased focus on equalities issues;
- created a Working Lives section on the website, including AS activities and links to the University *Women at Leicester* web pages;
- disseminated information about local activities, events and changes relevant to women in academic careers;
- established a monthly HoD's email newsletter to all staff, celebrating successes;
- provided Q&A and feedback options via the Working Lives web pages;
- created an outreach group actively involved as STEM Ambassadors;
- created a greater focus on development and career planning in appraisals.

(496 words)

b) Provide data for the past three years (where possible with clearly labelled graphical illustrations) on the following with commentary on their significance and how they have affected action planning.

Student data

(i) **Numbers of males and females on access or foundation courses** – comment on the data and describe any initiatives taken to attract women to the courses.

CVS does not offer foundation courses.

(ii) Undergraduate male and female numbers – full and part-time – comment on the female:male ratio compared with the national picture for the discipline. Describe any initiatives taken to address any imbalance and the impact to date. Comment upon any plans for the future.

CVS does not have undergraduate students.

(iii) Postgraduate male and female numbers completing taught courses – full and parttime – comment on the female:male ratio compared with the national picture for the discipline. Describe any initiatives taken to address any imbalance and the effect to date. Comment upon any plans for the future.

CVS does not have postgraduate taught students.

(iv) Postgraduate male and female numbers on research degrees – full and part-time – comment on the female:male ratio compared with the national picture for the discipline. Describe any initiatives taken to address any imbalance and the effect to date. Comment upon any plans for the future.



Figure 4a: PGR student numbers – non-clinical

Figure 4b: PGR student numbers – clinical

The gender balance in our **non-clinical** PGR student population is largely even, which is consistent with the benchmark (**Figure 4a**). Students can be full or part-time. In the last three years between four and six students per year have registered part-time, of whom 69% have been women. Since our Bronze award we have emphasised the option of this mode of study, which may be more attractive to students with caring roles, and will continue to offer and welcome flexible/part-time studentships as part of our PGR programme.

In contrast, the picture for **clinical** students is skewed towards males, although we are pleased to report an increase in female numbers, up from 8 (18%) in 2012-13 to 13 (29%) in 2014-15 (**Figure 4b**). We attribute this to our commitment, stated in our Bronze AP, to engage more actively with women in clinical training to encourage them to consider a period of research. Our gender difference reflects the national (and international) profile in cardiology, cardiac and vascular surgery (our three largest clinical specialities). Data from the Royal Colleges have shown that the proportion of female clinical trainees in these specialities remains below 20%¹. Our local AP will continue to mitigate these national barriers, by:

- (i) providing a cardiovascular stand at the undergraduate careers fair with a specific focus on why women should consider cardiovascular specialities (Action 3.2a);
- (ii) working with Health Education East Midlands (HEEM) to encourage women in their Foundation training to become Academic Clinical Fellows (ACF) (a key first step in a clinical academic career) and publicise how ACF posts can be undertaken flexibly.
 (Action 3.2c);
- (iii) providing strong mentorship during ACF training to support students to move on to PhD training (Action 2.1a-d);

¹ Census of Consultants and Higher Specialist Trainees in the UK, 2013-14, Royal College of Physicians, and Surgical Workforce 2011, A report from The Royal College of Surgeons of England in collaboration with the surgical specialty associations

- (iv) continuing to champion gender equality at HEEM (Deanery) and UHL (NHS Trust) level (see Section 5);
- (v) engaging with the recently launched BHF research strategy² and other national and international initiatives to increase the number of female researchers in cardiovascular science (Action 3.2b).

(407 words)

 (v) Ratio of course applications to offers and acceptances by gender for undergraduate, postgraduate taught and postgraduate research degrees – comment on the differences between male and female application and success rates and describe any initiatives taken to address any imbalance and their effect to date. Comment upon any plans for the future.



Figure 5: Ratio of PGR applications to offers and acceptances by gender

Overall we show a year-on-year increase in female conversion rates in the last three years (**Figure 5**) - from 20% (4/20) in 2012-13 to 58% (14/24) in 2014-15 - and given the data presented in **Figure 4b**, this at least partly reflects a higher offer and acceptance rate for female *clinical* applicants.

This year, for the first time in CVS's history, there are overall more new female PGR registrants than male.

We recognise that overall the number of female applicants remains below that of men and that further action is necessary to improve this (**Actions 3.1a-e**). The number of offers declined is small and does not show any differential trend. Most are because students have alternative offers, but we will continue to monitor for any gender imbalance.

Currently we are not able to break down the different routes of entry for students (open competition, self funded international students, staff applicants etc) and cannot distinguish between clinical and non-clinical PhD students in our data; these data issues are being addressed (Actions 4.1a-b).

(183 words)

² We fight for every heartbeat, Our Research Strategy 2015-2020, British Heart Foundation

(vi) Degree classification by gender – comment on any differences in degree attainment between males and females and describe what actions are being taken to address any imbalance.

CVS only registers students for postgraduate research degrees, which are ungraded.

Staff data

(vii) Female:male ratio of academic staff and research staff – researcher, lecturer, senior lecturer, reader, professor (or equivalent). Comment on any differences in numbers between males and females and say what action is being taken to address any underrepresentation at particular grades/levels

We first present the change in the overall gender profile of the academic and research staff in CVS between 2012-13 and 2014-15 (Figure 6). Then we separate by grade (Figures 7a and 7b) and further for non-clinical (Figure 8a) and clinical staff (Figure 8b).







Figure 6: Gender ratio of all academic and research staff

Figure 7a: Gender ratio of academic and research grades, 2012-13





100%



Figure 8a: Gender distribution of non-clinical academic and research staff by grade (number and percentage)

Figure 8b: Gender distribution of clinical academic and research staff by grade (number and percentage)

From these data, we recognise the following issues:

1. Overall, there has been further improvement in the gender balance of academic and research staff in the last three years (**Figure 6**). The proportion of female academic and research staff has tripled from 2009-10 (11%) to 2014-15 (33%). For **non-clinical** staff we are just short of the HESA benchmark (44% versus 41%, **Figure 8a**). For **clinical** staff (**Figure 8b**) there is no direct benchmark but comparison with other academic cardiovascular units for which data are publicly available (Kings, Oxford and UCL AS submissions) and figures published by the Medical Schools Council³ suggests that our overall proportion is broadly similar, reflecting the gender imbalance in the relevant clinical specialities; only 13% of consultant cardiologists in the UK and only 4% of UK cardiothoracic surgeons are female.

2. There is clear attrition in the proportion of female staff which starts at the research assistant to associate grades (**Figure 8a**), both of which are often subject to fixed term funding. Our analysis of applications at these two grades (**Table 2**) shows that this reflects a gender imbalance in the applications at the two grades and does not reflect any gender bias in success rates. The reason for this gender imbalance in applications is unclear and we will explore this using focus groups (**Action 4.5**). We have also proposed a review of promotion processes for these grades which disconnects promotion from funding source (**Action 2.3a**).

3. The gender disparity becomes even more pronounced at the lecturer level and beyond (**Figure 8a and 8b**). In the last three years we have made some progress in addressing the gap at the lecturer level; 30% are now female. We attribute this to early success with our refreshed mentoring initiative for ECR staff introduced as part of our Bronze AP which has enabled two female non-clinical ECRs to transition to independent lectureships (see Section 4, "Job application and success rates by gender and grade") and one female Clinical Fellow to be competitively appointed to alectureship. (So far in 2015-16, we have appointed a further new female clinical lecturer).

4. Change in the profile at more senior level is going to be gradual, as turnover at these grades is slow and, as previously indicated, there is a limited pool of women for clinical posts.

We will continue to ensure that our job profiles (including opportunities for flexible and part-time working and our description of the friendly and cohesive culture in CVS) and recruitment processes (including training in unconscious bias, and gender balance of recruitment panels) encourage talented women to apply and to be appointed, and will continue to proactively seek to identify suitable female candidates for posts (**Actions 3.1a-e**). However, we believe that ultimately real progress in addressing the gender imbalance will only be achieved by "growing our own" – identifying potential at an early stage, recognising specific needs, eliminating barriers to progress in more detail below in Section 4 "Support for staff at key career transition points" and in **Actions 2.2 to 2.4**.

(657 words)

³ A Survey of Staffing Levels of Medical Clinical Academics in UK Medical Schools as at 31 July 2014, A Report by the Medical Schools Council

(viii) **Turnover by grade and gender** – comment on any differences between men and women in turnover and say what is being done to address this. Where the number of staff leaving is small, comment on the reasons why particular individuals left.



Table 1: Reasons for staff leaving the Department from2012 to 2015

Staff turnover is low (**Table 1**). Of two resignations among **academic staff**, one clinical SL moved to a post abroad and one took up a Chair in another institution. The three individuals under the "Other" category are colleagues moving across to a primary NHS position but retaining honorary appointments in CVS. Two non-clinical male academic staff took up the University-wide opportunity of voluntary redundancy and two colleagues retired. We made a positive decision to

reinvest the funds for these latter posts into new non-clinical lectureships, to which we appointed two highly promising female ECRs to establish them on a tenure track.

Amongst **research staff** leaving, the majority were clinical research fellows returning to the NHS to continue clinical training at the end of fixed-term research contracts. As discussed earlier, one of the female Fellows was subsequently appointed to a Clinical Lectureship. The resignations in this group relate to individuals leaving for other positions and there was no gender bias.

CVS now both collects data on the reasons for staff leaving and undertakes exit interviews (actions from our Bronze Plan); exit interviews were completed with 69% of leavers in 2013-14 and 95% in 2014-15 by the Departmental Manager (a member of SAT and WLC). Emerging themes are anonymised and discussed by SAT and WLC, reported annually to the DEC and to academic staff meetings by the WLC Chair. So far feedback in exit interviews has reinforced messages from staff surveys and no new themes have emerged.

(257 words)

(Section 3: 2000 words)

4. Supporting and advancing women's careers: maximum 5000 words

Key career transition points

- a) Provide data for the past three years (where possible with clearly labelled graphical illustrations) on the following with commentary on their significance and how they have affected action planning.
 - (i) Job application and success rates by gender and grade comment on any differences in recruitment between men and women at any level and say what action is being taken to address this.

The number of vacancies at different grades, applications and success rate by gender for the last three years are shown in **Table 2**; as those at lecturer level and above were too few (none in some years), the yearly data have been pooled.

2012-15	Number of vacancies	Female applicants (and appointees)	Male applicants (and appointees)	Female applicant success rate	Male applicant success rate
Non-clinical					
Professor	1	0	1 (1)		100%
Lecturer	5	2 (2)	13 (2)	100%	15%
Research Fellow	1	1 (1)	0	100%	
Research Associate	17	81 (7)	119 (9)	9%	8%
Research Assistant	24	305 (13)	236 (8)	4%	3%
Clinical					
Clinical Professor	1	2 (0)	8 (1)	0%	13%
Clinical Reader/SL	3	0	4 (3)		75%
Clinical Lecturer	5	1 (1)	7 (4)	100%	57%
Clinical Research Fellow	21	20 (5)	40 (15)	25%	38%

Table 2: Vacancies at different grades, applications and success rates by gender

Application rates for non-clinical research posts are high from both genders and female applicants are slightly more successful. For clinical and senior non-clinical posts we received proportionately fewer applications from women, reflecting the comparatively low number of females within the associate specialties.

In relation to these data, since 2013 we have:

- 1. Made a clear statement in job advertisements about our commitment to AS Charter principles.
- 2. Sought to identify suitable female candidates for academic vacancies both through personal efforts by the HoD and principal investigators (PIs) and by instructing search companies (**Action 3.1b**). We have found this to be effective, for example, resulting in a strong female candidate for a current clinical Chair vacancy.
- 3. Focused on "growing our own" by recognising and nurturing our ECR staff (particularly women), providing strong mentorship including where appropriate external mentors, encouraging networking and providing support in time and money for leadership programmes such as the Aurora programme (Action 2.4). We have demonstrated early success of this policy with the appointment of three new female lecturers from our ECRs in the last three years (see Case Study one).
- 4. Worked with our external partners including UHL and HEEM to identify and overcome barriers to progression and increase the pool of women entering cardiovascular specialities (see Section 5 and Actions 3.1a-e).

(272 words)

(ii) Applications for promotion and success rates by gender and grade – comment on whether these differ for men and women and if they do explain what action may be taken. Where the number of women is small applicants may comment on specific examples of where women have been through the promotion process. Explain how potential candidates are identified.

CVS has a robust and inclusive policy for identifying individuals that merit consideration for promotion, irrespective of gender. Career progression is discussed at every appraisal, ensuring preparedness for when the University announces its annual round; information is circulated to all members of staff and self-nomination welcomed. The DEC directly reviews the position of **all** members of staff at relevant grades, taking account of contributions across the spectrum of academic activity and departmental citizenship. The group lead (if appropriate) and a designated member of the DEC work with every identified individual to compile the strongest possible case, including a personally prepared letter of support from the HoD. Feedback from the University is discussed with any unsuccessful applicant by the HoD, and measures put in place to address any issues raised.

'As a BHF Fellow, I was mentored by a very senior member of staff in my application for promotion from grade 7 to 8.' Female ECR, 2012 Since 2012 there have been three applications for promotion from academic staff; two were successful (a male Clinical Senior Lecturer to Chair and a male nonclinical Lecturer to Senior Lecturer) and one unsuccessful (a male Clinical Senior Lecturer to Chair).

Due to very few female staff in academic grades (**Figures 8a/b**) there were no female applications. For promotion within research grades, there have been three applications, two female of which one was successful, and one male which was unsuccessful.

In addition, the University has a Merit Award Scheme through which several individuals in CVS were recognised for their contribution. Of 13 applications in the last 3 years, 8 were successful - 5/8 female (62.5%) and 3/5 male (60%).

(274 words)

- b) For each of the areas below, explain what the key issues are in the department, what steps have been taken to address any imbalances, what success/impact has been achieved so far and what additional steps may be needed.
 - (i) Recruitment of staff comment on how the department's recruitment processes ensure that female candidates are attracted to apply, and how the department ensures its short listing, selection processes and criteria comply with the university's equal opportunities policies

In addition to standard University procedures which conform to equal opportunities policies, including use of non-gender specific language in advertisements and job descriptions, and incorporation of the Athena SWAN logo, since 2013 CVS has introduced:

• Updated web pages promoting staff and student working lives. Information specifically directed at women includes Charter work, positive female images, and links to University policies on family-friendly and flexible working, maternity, paternity and parental leave, support and facilities for childcare, wellbeing, and career development.

- A formal commitment to mixed gender interview panels, achieved in 85% of panels since January 2013, by working across the College with female colleagues, so that reciprocal arrangements for interviewing are in place. We achieved >95% in 2015, and we will maintain this by including more junior staff on panels, providing development opportunities and avoiding overload on senior female staff (Action 2.6).
- All interviews held within core hours with consideration given to travel time; option of a Skype interview to accommodate caring responsibilities; and interview material sent to all applicants emphasises our commitment to meet interview childcare costs.

The impact of our changes is evidenced through staff feedback on the recruitment process:

"I saw the advertisement for the post in the BMJ. I found the post description attractive for my career aspiration as a Clinical Academic and there was a clear statement about equal opportunities and an Athena Swan logo in the advert. My interview occurred during core hours and allowed me adequate time to travel. I was greeted by two welcoming female members of staff. The interview panel consisted of two male and two females. I was provided with information on how to apply for accommodation on site which was incredibly helpful to help me settle in the new environment as a bridge to finding a suitable new home in Leicester."

Female Clinical Research Fellow, 2014

(306 words)

(ii) Support for staff at key career transition points – having identified key areas of attrition of female staff in the department, comment on any interventions, programmes and activities that support women at the crucial stages, such as personal development training, opportunities for networking, mentoring programmes and leadership training. Identify which have been found to work best at the different career stages.

We identified two key transition points within the career pathway where the proportion of women drops significantly – Researcher to Lectureship and Lectureship to Senior Lectureship (**Figure 9**). We recognise that in time there will be a further transition point to tackle, from SL/Reader to Chair.



Figure 9: Our support for key transition points in the career pathway in CVS

A: Researcher to Lecturer:

Since our Bronze award we have focused primarily on the first "leak" in the pipeline and developed initiatives (both generic and female-targeted) to support research staff to progress to an academic career (**Figure 9**). Key initiatives include:

1. All ECRs having the opportunity of being **mentored** (by a female mentor if they choose through enlisting colleagues across the College), providing support and advice outside the

immediate research group. We recognise that uptake so far has been patchy, with 37% of ECRs reporting having a mentor, with no gender imbalance. We will proactively allocate mentors to all research staff (Action 2.4c).

2. A senior academic lead working as a **Departmental Research Advisor** to provide independent careers advice and guidance to researchers. We will augment this with a guarterly Q&A





forum including the HoD and Academic Committee chair, offering advice on the development of research careers (**Action 2.3f**).

- 3. Provision of funds for a College-wide initative to support two female staff each year to undertake the Aurora leadership development programme. In parallel, we encourage female staff to apply for University and College-funded places on this programme which is being expanded (Action 2.4a).
- 4. Establishment of a well-attended monthly forum (Café Cardiologique), organised by the researchers themselves, to facilitate sharing of scientific knowledge, peer-networking and development of presentational skills in a collegiate atmosphere (**Figure 10**).
- 5. Proactive invitation to key female role models in cardiovascular academic medicine to give seminars (see **HoD letter** and **Action 1.1**).

Future initiatives (Actions 2.2a-g and 2.3a-f) include:

- progression planning to be instigated within 6 months of appointment and as part of every annual appraisal;
- consideration of promotion even if grant funding is not available;
- support to apply for **Associate** HEA Fellowships;
- providing technical, financial and statistical support through Departmental budgets to ECRs for developing their own work and/or for visiting other institutions;
- additional training for PIs/supervisors on promotion criteria;
- recognising significant contribution to student supervision by formal title of 'Associate Supervisor';
- providing support sessions for developing Fellowship applications including mock interviews;
- creating Fellowships at Grade 8 to facilitate a transition from Research Associate to Lecturer.

B: Lecturer to Senior Lecturer:

At lecturer level, in addition to the above, our enhanced support since our Bronze award includes:

- 1. start-up funds of £5,000 to establish their research programme;
- 2. grant support and review throughout a grant preparation process by senior colleagues;
- 3. during periods of maternity leave (and in future, shared parental leave), additional support and funds to maintain research momentum (see **Case Study two**. This is being extended (**Actions 2.7a-d**).

We see strong mentorship and leadership development as key elements for transitioning of lecturers to higher grades and our Silver Action Plan (**Actions 2.4a-e**) focuses on:

- one-to-one mentorship with a senior member of CVS or College (if more appropriate);
- attendance as observers at CVS Executive meetings;
- formal progression planning including an annual career development review with HoD;
- support for higher level networking;
- supporting personal development by nomination for decision-making or strategic committees;
- expanding shadowing opportunities, including outside CVS, following a successful trial.

(571 words)

Career development

- a) For each of the areas below, explain what the key issues are in the department, what steps have been taken to address any imbalances, what success/impact has been achieved so far and what additional steps may be needed.
 - (i) Promotion and career development comment on the appraisal and career development process, and promotion criteria and whether these take into consideration responsibilities for teaching, research, administration, pastoral work and outreach work; is quality of work emphasised over quantity of work?

In 2010, it was recognised that **appraisal** rates were low; all staff were reminded of the importance of the appraisal process and signposted to web-based training sessions on appraisals. There has been a substantial increase in appraisal completion rates in the last five years (**Table 3**). We have identified further actions to make this universal (**Actions 2.8a-c**).

Appraisal co	ompletion rate				
2010	35.8%				
2011	52.9%				
2012	80.3%				
2013	84.5%				
2014	84.4%				
Table 3: Appraisal					
сот	pletion				

'My appraisal is productive, I take the opportunity to talk about my progression; they are positive and have helped for my career to push on - definitely.' Male Lecturer, 2015 focus group In 2012, our survey showed only 58% of staff expressed

satisfaction with the **objectives** set at appraisal. In response, we hosted training sessions for all supervisors on effective objective setting using SMART criteria and

constructive feedback. In our latest survey 84% of staff reported that they had been provided with SMART objectives in their most recent appraisal (with no gender difference) and we aim to achieve 100% by 2017 (**Actions 2.8a-c**).

Also, 72% (no gender difference) felt 'actively encouraged' to take up **career development opportunities**, and the same percentage reported being encouraged and given opportunities to represent CVS. We publicise staff development opportunities on our website. In future we will introduce a personal development time of 0.5 days a month (**Action 2.2a**), and increase the local delivery of staff development sessions to remove the need to travel (**Action 1.3e**).

Promotion is a key discussion point within annual appraisals. The University's **promotion criteria** have primarily focused on research and teaching activities, placing emphasis on quality of work. In response to feedback from staff, in 2015 a University working group on career enhancement was convened to re-design the promotions process and to recognise wider contributions to pastoral, outreach and administrative work. Departmental staff contributed to this through focus groups and we are delighted that a new promotions process will be launched in 2016.

(314 words)

(ii) Induction and training – describe the support provided to new staff at all levels, as well as details of any gender equality training. To what extent are good employment practices in the institution, such as opportunities for networking, the flexible working policy, and professional and personal development opportunities promoted to staff from the outset?

This has been an important part of our work since our AS Bronze award, informed by staff surveys and exit interviews. An updated induction pack includes:

- a letter of welcome from the HoD, outlining our culture and values;
- practical information about resources and facilities, key contacts, and procedures;
- HR information, including flexible working; maternity, paternity and parental leave; nursery provision; and the childcare voucher scheme;
- link to the University Equal opportunities policy and contact details for the DEO;
- staff and student training and development opportunities within CVS and in the wider University, including a link to the Concordat and the Leicester Learning Institute (LLI);
- links to the Department's Working Lives web pages, University AS website, Women at Leicester pages, policies related to work/life balance and support for parents, the University's promotion procedures, merit awards, appraisal documentation, and the University Wellbeing website.

New starters are introduced to all CVS staff by email, welcomed in the HoD's monthly newsletter, and introduced at All-staff Meetings. To aid integration, CVS provides social spaces for informal networking, and hosts an extensive seminar programme to inform and to stimulate discussion around research.

'very welcoming to new staff and students - the department is incredibly supportive of care commitments – friendly' 2014 survey – gender not specified

(208 words)

(iii) Support for female students – describe the support (formal and informal) provided for female students to enable them to make the transition to a sustainable academic career, particularly from postgraduate to researcher, such as mentoring, seminars and pastoral support and the right to request a female personal tutor. Comment on whether these activities are run by female staff and how this work is formally recognised by the department.

We actively support female students so they are well equipped to transition to a sustainable academic career:

- PGR students have a supervisory committee and students can request a female member.
- A mentor is identified for all students; for female students, we have developed collaborations with other Departments in the College, as well as other institutions, to ensure they can draw on the widest and most appropriate expertise to support them to become independent researchers.
- CVS provides a range of training opportunities, including project-related and transferable skill-based sessions. Attendance is facilitated by a combination of on-line and core hours/term-time delivery and future courses will support video-conferencing access or local site delivery (Action 1.3a).
- Specific training to support teaching is provided by workshops held at the LLI.
- All students are supported to make a research presentation during their first year and are given individual feedback by members of the Academic Committee. Other initiatives include (i) 'Friday Seminars' to provide an informal opportunity for the development of presentation skills, and to build confidence by presenting short updates on research work or to practise conference presentations; (ii) Café Cardiologique (described previously), run by our junior researchers.
- The Department also supported the Biotechnology Young Entrepreneur Scheme 2015; three female and two male students participated.

• From a pastoral perspective, the Leicester Student Union Mature Postgraduate Student Group offers guidance and support for mature students, families and friends. This is especially valued by females taking a career break and returning to study, and information is widely disseminated across CVS.

These initiatives are supported by male and female academic staff and all activity is recognised as part of our Workload Model (see below).

(275 words)

Organisation and culture

- a) Provide data for the past three years (where possible with clearly labelled graphical illustrations) on the following with commentary on their significance and how they have affected action planning.
 - (i) Male and female representation on committees provide a breakdown by committee and explain any differences between male and female representation. Explain how potential members are identified.

CVS has four main committees (gender balance shown in Table 4):

- The Executive Committee (HoD, Deputy HoD, College CVS research theme lead, Academic Committee Chair, Department Manager and Finance Officer) deals with day-today operational matters. Membership is determined by role, not person.
- The Academic Committee

 comprises a broad mix of clinical
 and non-clinical academics at
 different grades, ECR
 representative, DEO and student
 representatives (MD and PhD), and
 deals with all student-related
 matters. Two-year membership is
 by inviting self-nomination from
 staff in relevant categories. We
 plan to increase the involvement
 of ECR representatives which will
 help to to expand female
 representation (Action 2.2d).

		s (and % o bership)		(and % of bership)			
Executive Comm	Executive Committee						
2012-13	3	(60%)	2	(40%)			
2013-14	3	(60%)	2	(40%)			
2014-15	3	(50%)	3	(50%)			
Academic Committee							
2012-13	4	(31%)	9	(69%)			
2013-14	3	(21%)	11	(79%)			
2014-15	3	(25%)	9	(75%)			
Research Strate	gy Boar	d					
2012-13	2	(14%)	12	(86%)			
2013-14	2	(14%)	12	(86%)			
2014-15*	6	(17%)	29	(83%)			
Working Lives C	ommitt	ee					
2012-13							
2013-14	10	(67%)	5	(33%)			
2014-15	10	(67%)	5	(33%)			

*RSB replaced with mtgs of all academic staff

Table 4: Gender ratio in membership of CVS committees

 The Research Strategy Board used to consist only of Professors. As part of our Bronze AP, this has (since 2014-15) been replaced by bimonthly meetings of the full Academic Staff and Fellows. Although this has not changed the gender balance greatly, it means that all academic staff can input from an early stage in their career. • The **Working Lives Committee** includes representation from across CVS: senior and junior academic, research, administrative and technical staff across locations, and PGR students. Membership (for two years) is by advertisement and self-nomination. WLC has attracted huge interest and has strong female representation (5 male: 10 female).

The DEC monitors gender representation on each committee and reviews terms of reference annually.

(235 words)

(ii) Female:male ratio of academic and research staff on fixed-term contracts and open-ended (permanent) contracts – comment on any differences between male and female staff representation on fixed-term contracts and say what is being done to address them.

	Nor	n-clinical	research st	Clinical research staff					
	Fixed-term*		Open-ended		Fixed-t	Fixed-term*		Open-ended	
	Female	Male	Female	Male	Female	Male	Female	Male	
2012-13	11	13	1	1	10	23	0	1	
2013-14	17	14	1	1	9	19	0	1	
2014-15	19	16	1	3	6	20	0	1	
	Non	-clinical d	academic s	taff	Cl	inical acc	ademic staj	ff	
	Non Fixed-i		academic s Open-e	••	Cl Fixed-t		ademic staj Open-e	-	
				••			-	-	
2012-13	Fixed-	term*	Open-e	ended	Fixed-t	term*	Open-e	ended	
2012-13 2013-14	<i>Fixed</i> - Female	term* Male	Open-e	ended Male	Fixed-t Female	t erm* Male	Open-e	ended Male	

*Fixed-term contract or subject to fixed-term funding

Table 5: Fixed term & open ended contracts

Across the different categories there is no gender disparity (average 96% female and 93% male researchers, 35% female and 35% male academics) in staff that are on fixed-term funding. All staff employed for two or more years are eligible for redundancy pay and are actively considered for redeployment within the University (placed on a redeployment register).

(64 words)

- b) For each of the areas below, explain what the key issues are in the department, what steps have been taken to address any imbalances, what success/impact has been achieved so far and what additional steps may be needed.
 - (i) Representation on decision-making committees comment on evidence of gender equality in the mechanism for selecting representatives. What evidence is there that women are encouraged to sit on a range of influential committees inside and outside the department? How is the issue of 'committee overload' addressed where there are small numbers of female staff?

Since our AS journey began we have been more mindful of trying to achieve gender equality in the balance of committees (see above). For Departmental committees, selection is either by role or advertised vacancy. For College/University committees, the HoD takes advice from the DEC or

relevant staff groups, ensuring that individuals are not being "over-committed". Such membership is discussed at the bimonthly Academic Staff Meetings and staff encouraged to inform the HoD if they have specific interests.

Women across a range of grades (to avoid committee overload on the few senior women) are representing the Department on influential committees, such as College Research Committee (professor), College Enterprise Committee (professor), Central Research Facility Management Board (fellow) and Early Careers Research Group (lecturer).

We are also proud to report that a female professor in the Department was selected to be the Interim Head of College and PVC in 2014-15, and is now Deputy Head of College.

(154 words)

(ii) Workload Model – describe the systems in place to ensure that workload allocations, including pastoral and administrative responsibilities (including the responsibility for work on women and science) are taken into account at appraisal and in promotion criteria. Comment on the rotation of responsibilities e.g. responsibilities with a heavy workload and those that are seen as good for an individual's career.

Since our Bronze application, CVS has developed a workload monitoring and planning model which is used to inform decisions about fair allocation of responsibilities and opportunities. The model was developed with active engagement of academic staff to ensure ownership, and tariffs are reviewed annually at an Academic Staff Meeting. The model records teaching, research, research supervision, clinical work (where applicable), outreach, mentoring, committee membership (including SAT and WLC) and other administrative duties (inside and outside CVS and University). The components are reviewed at each staff member's annual appraisal (for clinical staff this is done jointly with UHL) and any changes are approved by the DEC.

(105 words)

(iii) Timing of departmental meetings and social gatherings – provide evidence of consideration for those with family responsibilities, for example what the department considers to be core hours and whether there is a more flexible system in place.

'The hours of the meeting times are working well. There is sufficient advance notice of meetings given to allow time to be scheduled to attend these within the core working hours. They do finish on time and allow greater attendance at the departmental seminars.' Anon response to poll on core hours, 2014 In 2012, after seeking staff opinion via the WLC website, we established core hours of 9.30am to 4.30pm and in 2014 these were further reduced to 10am to 4pm. All Departmental committee meetings, staff meetings, training sessions, social events and, wherever possible, seminars and lectures take place between these hours, and are scheduled outside school holidays. We use a shortened day for our Departmental away day in order to

accommodate part-time staff. Following a suggestion to the WLC, we established a Social Committee who organise lunchtime social events and are planning weekend family events.

From staff comments we were aware that travel time between sites was a significant dis-incentive to women working less than full time being involved in Departmental activities. To enable more

junior staff (higher proportion of women) to attend committee meetings we have trialled fitting WLC meeting times with the free inter-site bus service. Following positive feedback this will be extended to all committee meetings (**Action 1.3b**). We will also raise awareness of the 'hot desks' at each site to minimise the impact of travel time (**Action 1.3c**) and develop an upload system for online access so key seminars and meetings can be viewed at any convenient time (**Action 1.3f**). We have invested in video-conferencing equipment for committee meetings and will be extending its use to become routine (**Action 1.3d**).

(275 words)

 (iv) Culture –demonstrate how the department is female-friendly and inclusive.
 'Culture' refers to the language, behaviours and other informal interactions that characterise the atmosphere of the department, and includes all staff and students.

In the feedback on our Bronze award submission, the panel recognised a genuine effort to improve departmental culture, and progress is reflected in recent survey comments, citing developments including the WLC, improved communications, and flexible working options as reasons.

The key changes that we have introduced since the Bronze award are detailed on page 9.

89% of staff say they understand our reasons for taking action on gender equality (2014 survey), which have included:

- appointment of a Departmental Gender Equality Lead (complementing the DEO) to link to the wider University equalities programme and in particular look at the intersection between gender and other equalities issues (Action 1.6a-b);
- encouragement to staff (via email and posters) to attend College and University-wide gender equality events;
- inviting prominent female speakers to give lectures with a plan to have women as 50% of scientist and 30% of physician speakers (Action 1.1b) with a broader range of topics (Action 1.1c);

'The monthly newsletter is useful because it gives everyone an idea of what's going on and it's also nice to hear about people's achievements and success.' PGR student, 2014 survey

• encouraging all male staff to support the University's partnership in the UN HeForShe gender equality movement (see **Section 5**).

On International Women's Day (IWD) (8 March 2015) 40 men and women from CVS and the Department of Infection, Immunity and Inflammation held an event to celebrate successes, identify challenges and provide an opportunity for feedback. We plan to make it an annual event (Action 1.5a) and continue to support the University events (Action 1.5b). We also plan to create an annual named lecture in honour of a prominent female Leicester physician or scientist (Action 1.1a).



Figure 11: CVS staff and students at IWD event 2015

We have not been afraid to tackle challenging cultural issues. Some survey comments highlighted a need to embed values of dignity and respect in our working environment and relationships, and in response to this, the WLC developed a **Dignity at Work Statement**. We were the first Department to do this, and since then a similar policy has been adopted University-wide. Our statement was introduced by the Chair of the WLC, reinforced by the HoD in his monthly newletter, and a training session on promoting a positive working culture was given at an All Staff Meeting.

We plan to broaden communications (Actions 1.4a-b), enabling those working part-time to remain in touch by facilitating more information exchange between members of CVS (Action 1.4c).

Informal networking and friendships are facilitated by enhanced social spaces at each site, and on the basis of comments received via the website feedback, staff and students have also established a Social Committee.

(443 words)

(v) Outreach activities – comment on the level of participation by female and male staff in outreach activities with schools and colleges and other centres. Describe who the programmes are aimed at, and how this activity is formally recognised as part of the Workload Model and in appraisal and promotion processes.

Both male and female members take part in outreach activities. In addition to the large volume of work on public and patient engagement regularly undertaken by investigators for research studies and clinical trials in our NIHR Biomedical Research Unit (including a dedicated PPI/E officer),

'I became involved in media and outreach activities as a STEM Ambassador. I received hands-on media training from the University's Press Office, and the College gave me £2,000 for outreach at local schools around World Stroke Day.' Female lecturer, 2015 younger staff as well as PGR students have registered as STEM Ambassadors (onsite induction was attended by 11 female and 7 male CVS staff and students in 2015) and CVS staff arranged 'Pint of Science' public events that were featured on local radio. A newly appointed female lecturer, a STEM Ambassador, serves on the committee of the local British Science Association branch. Whilst CVS has supported these enthusiastic individuals, it has not

sought to direct grassroots activity. We will establish a budget and work with our newly appointed outreach lead (a member of the newly formed College Outreach and Public Engagement Committee) to coordinate and target additional outreach activities to medical students and foundation year doctors, promoting careers in Cardiovascular Science (Actions 3.2a-e). The CVS outreach lead will also bring activities being organised throughout the University and other entities to the attention of CVS staff and students.

Capture of data on outreach activity has been inconsistent and difficult to feed into our Workload Model as well as appraisal and promotion. A University-wide system has been developed to record this information and we will encourage CVS staff to record their activity so that it can be systematically recognised and rewarded (**Action 4.4a**).

(285 words)

Flexibility and managing career breaks

- a) Provide data for the past three years (where possible with clearly labelled graphical illustrations) on the following with commentary on their significance and how they have affected action planning.
 - (i) Maternity return rate comment on whether maternity return rate in the department has improved or deteriorated and any plans for further improvement. If the department is unable to provide a maternity return rate, please explain why.

Between 2012 and 2014, four out of eight staff returned following maternity leave (**Table 6**). Of those who did not, three (one research, one technical, one administrative) were on fixed-term contracts which ended, and one (technical) resigned to take up a more senior position elsewhere. In 2014-15, three staff (one lecturer, one research fellow (see **Case study two**), one technician) returned from maternity leave, each on a phased return, and one on a permanent part-time basis at her request. One, a Clinical Research

Number (and r	eturners)
2012-13	4 (3)
2013-14	4 (1)
2014-15	6 (5)
Table 6: Staff taking ma	aternitv leave

 Table 6: Staff taking maternity leave

 and return rate

Fellow, left to return to clinical training, and two women still on maternity leave have indicated their intention to return, one on a part-time basis at her request.

(120 words)

(ii) Paternity, adoption and parental leave uptake – comment on the uptake of paternity leave by grade and parental and adoption leave by gender and grade. Has this improved or deteriorated and what plans are there to improve further.

Data on paternity leave are shown in **Table 7**. Most took one week, rather than the full entitlement of two, followed by a week of annual leave. We suspect that this reflects the

University's policy of full pay for the first week only. We will explore this through focus groups and if confirmed, make representations to the University to alter the policy (**Action 4.2a**).

A presentation on shared parental leave was made at our last All Staff and PGR Meeting, and in the post-meeting evaluation, 70% of respondents said this was helpful or very helpful. Recent informal enquiries indicate interest in shared parental leave from male staff likely to become eligible and CVS will encourage them to consider the option. There were no parental or adoption leave requests

Grade	Length of leave
2012-13	
1 x Clinical Research Fellow	1 week
1 x Research Associate	2 weeks
2013-14	
1 x Clinical Lecturer	1 week
2 x Clinical Research Fellow	1 week each
1 x Research Associate	2 weeks
2014-15	
1 x Clinical Lecturer	1 week
2 x Clinical Research Fellow	1 week each
Table 7: Paternity leav	e uptake

in the period (but one parental leave taken so far in 2015-16). We will monitor uptake of shared parental leave (**Action 4.3a**).

(155 words)

(iii) Numbers of applications and success rates for flexible working by gender and grade – comment on any disparities. Where the number of women in the department is small applicants may wish to comment on specific examples.

Since our Bronze application, all requests for flexible working (9 female, 2 male) have been agreed:

- two female management/administrative staff compressed their full-time hours to allow
- more time for caring responsibilities;
 two female research assistants and one female technician adjusted their hours temporarily to
- accommodate school holiday childcare;
- one male research assistant adjusted his working pattern to accommodate school drop-off and collection times;
- two female technicians, one male technician and one female administrator moved to part-time working; and

'I came back after a big career break. I applied for a full time job and when I came for interview I asked whether they would consider part time and they let me do that and whenever I have asked for flexible working around school holidays there has been no problem.' Female Research Assistant, 2015 focus group

• one female clinical academic has been granted extended leave of absence.

(146 words)

- b) For each of the areas below, explain what the key issues are in the department, what steps have been taken to address any imbalances, what success/impact has been achieved so far and what additional steps may be needed.
 - (i) Flexible working comment on the numbers of staff working flexibly and their grades and gender, whether there is a formal or informal system, the support and training provided for managers in promoting and managing flexible working arrangements, and how the department raises awareness of the options available.

Academic and research staff at all grades can work flexibly with the option of home-working. There is a commitment to this culture through the provision of remote desktop facilities. The formal policy for flexible working is available on the University website (linked from our 'Working Lives' pages), and designated departmental managers support and advise those who wish to formally request flexible working. Video-conferencing facilities are available to enable full participation in meetings and seminars wherever possible. Online polls are used to arrange timings for meetings, taking into account the needs of those working flexibly.

Short-term informal arrangements for flexible working are agreed on an individual basis, usually by the line manager. As our staff survey indicates, these are largely dealt with positively (96% of respondents felt their manager had been supportive). Requests for time off to support acute personal issues are dealt with sympathetically. We plan to formalise this existing informal good practice to extend

'Compassionate and flexible when members of staff have a problem.' Female support staff, 2012 survey

flexible working so there are three days per annum for all staff when they can work from home without obtaining prior permission of their line manager, to fit with caring for relatives (**Action 1.8a**).

Longer-term requests are discussed with individuals in consultation with HR; to date no request of this type has been turned down, as shown above.

Information regarding flexible working policies is included as part of the induction process. Since our first survey, there has been a marked improvement in awareness of equality and work-life balance policies with 97% (42% in 2012) feeling they have been kept informed of developments. New policies related to work-life balance, such as shared parental leave, are explained at All-staff Meetings.

(288 words)

(ii) Cover for maternity and adoption leave and support on return – explain what the department does, beyond the university maternity policy package, to support female staff before they go on maternity leave, arrangements for covering work during absence, and to help them achieve a suitable work-life balance on their return.

When a member of staff informs us that she is pregnant, an initial confidential meeting is arranged with the Departmental Manager. This is to assure the staff member of CVS's full support during and after her pregnancy, plan an initial timetable, undertake a risk assessment and implement any required changes. Attendance at the University's Maternity Workshop is encouraged.

Regular meetings are held to discuss further adjustments, workload and maternity cover and to agree a preferred method and level of contact during leave. Keeping in Touch (KIT) days are embedded and events that may be of interest are flagged up (if agreed with the staff member). Prior to return, issues such as flexible working, phased return to work and adjusted work-load are mutually agreed. On return, there are return-to-work meetings with both the line manager and Departmental Manager to ensure that everything goes smoothly, with ongoing informal monitoring. Breast feeding/expressing facilities are available at all sites and are detailed on our Working Lives web pages.

Cover whilst on maternity leave may take the form of a temporary appointment, or in the case of academic staff, allocation of additional technical support. We are mindful of the potential for research momentum to be lost when academic staff take maternity leave and have recently funded a visiting scientist to cover for one of our Fellows. We will give automatic priority access to technical support, during and 'Throughout my pregnancy and maternity leave, CVS accommodated autonomous and flexible working, facilitating reallocation of research funds to provide cover. Colleagues were extremely supportive during long periods of morning sickness and one even accompanied me on a research trip to help lift heavy equipment. I used 'KIT' days, email and Skype, with a staggered return to work enabling me to enjoy precious time with my daughter.' Female lecturer, 2015

for 12 months after maternity, reduced administration and teaching for 12 months, and a grant of up to £5,000 to support research (Actions 2.7a-d).

The College has a Conference Carer's Fund which staff may apply to for a grant to cover additional caring costs associated with conference attendance. This helps to prevent exclusion of staff with caring responsibilities from important developmental and networking opportunities. So far, one member of CVS has applied for and received funding. We plan to include case studies on our website to encourage more staff to apply (**Action 2.5a**).

Our support for female staff taking maternity leave will be extended to staff taking Shared Parental Leave (**Action 2.7d**); we see this provision making a significant contribution to positive culture change and wish to encourage its full consideration by staff.

repeat this every three years. (484 words)

academia. Departmental funding has been identified to support a **Daphne Jackson Fellowship** and we plan to advertise this opportunity in 2016 (**Action 1.2a-b**). If there is sufficient demand we will

We recognise the significant barrier that a career break can have on women returning to

(Section 4: = 4974 words)

5. Any other comments: maximum 500 words

Please comment here on any other elements which are relevant to the application, e.g. other STEMM-specific initiatives of special interest that have not been covered in the previous sections. Include any other relevant data (e.g. results from staff surveys), provide a commentary on it and indicate how it is planned to address any gender disparities identified.

We are proud of what we have achieved so far in our AS journey and the opportunity this has provided to reflect on the culture and practices within CVS. Here we provide more detail on three initiatives, alluded to earlier, that we are leading, and whose impact on gender equality is felt within and beyond CVS:

Influence on Health Education East Midlands Academic School

Over the last two years the Chair of the CVS SAT has created an awareness of AS processes at the East Midlands Academic Board (responsible for NIHR Academic Clinical Fellowships and Lectureships). AS is now a standing agenda

item with analysis of applications, shortlisting and appointment by gender for the first time in 2014, with the intention that data be reviewed annually. The Board has noted that there were no women on the 2014 interview panels (apart from lay representatives) and will ensure that this changes for the autumn 2015 appointments round. We will continue to influence this group (Action 3.2d).

Influence on the local NHS Trust

The number of applications for clinical academic posts in CVS is limited by the gender imbalance in the base clinical specialties. This is difficult to change from within the University, so over the last two years the Chair of the CVS SAT has formed a "Women in Medicine" group

within the University Hospitals of Leicester NHS Trust. The Chair of the CVS SAT obtained expressions of interest and chaired the first two meetings in 2014. This group now has a female Chair, who works with the endorsement and support of the UHL Medical Director and Chief Executive. We will continue to contribute our AS experience to NHS processes (**Action 3.2e**).



Caring at its best

NHS Trust

HeForShe

The University participates in the "IMPACT 10X10X10" initiative of the UN HeForShe programme (10 world leaders, 10 world leading universities and 10 world leading businesses). This programme, initiated by UN Women Solidarity Movement, engages men as agents of change for the achievement of gender equality. The AS process in CVS has already been led and supported by men, so HeForShe is a natural extension. Within CVS, all male academic staff have signed the UN HeForShe pledge.

We are in the process of making an appointment as the CVS Focal Point (Action 1.7a) to work with our Local Champion (Prof Paul Boyle, Vice-Chancellor), and are developing a CVS HeForShe strategy (Action



1.7b). This will focus on communications and advocacy: involving men in conversations about gender equality, recruiting opinion leaders as advocates, driving online and offline conversations, and role modelling (photographs and impact cases) on the CVS website (**Action 1.7c**).

CVS events aimed at men include:

- Promoting attendance at a workshop series promoting work-life balance for men, partnered with the Timewise Foundation.
- Promoting the uptake of shared parental leave, by:
 - Paying those on shared parental leave a higher rate than is legally required, to incentivise shared leave-taking.
 - Holding a workshop series for future parents.
 - Publicising shared parental leave at Departmental meetings.

(499 words)

6. Action plan

Provide an action plan as an appendix. An action plan template is available on the Athena SWAN website.

The Action Plan should be a table or a spreadsheet comprising actions to address the priorities identified by the analysis of relevant data presented in this application, success/outcome measures, the post holder responsible for each action and a timeline for completion. The plan should cover current initiatives and your aspirations **for the next three years**.

7. Case study: impacting on individuals: maximum 1000 words

Describe how the department's SWAN activities have benefitted **two** individuals working in the department. One of these case studies should be a member of the self-assessment team, the other someone else in the department. More information on case studies is available in the guidance.

Case study one: Dr Victoria Haunton, Clinical Lecturer

I came to Leicester in 2007 as a core medical trainee under the Modernising Medical Careers programme, and stayed to take up a registrar post in General Internal Medicine at Leicester Royal Infirmary (LRI) the following year. I wanted to practise clinical medicine and had never considered an academic career pathway. However, during my registrar rotations, I was fortunate to work with clinical academics from CVS, who encouraged me to undertake a Doctorate of Medicine, which I did from 2011 to 2014.

During my MD I benefited from strong supervision and outstanding mentorship, and had access to world-class training in all areas of academia. Afterwards, I was supported in applying for a NIHR Clinical Lectureship – a post that I was appointed to in 2014, and which I remain in today as just one of 12 academic trainees in my speciality nationally. My line manager and supervisors in CVS have recognised and nurtured my skills and potential (as they do others) by actively including me in local, national and international collaborations with more senior academics, and provided support for my career development through encouraging submissions for international prizes and awards, such as the European Neurological Society Young Neurologist in Training grant.

Their approachability and flexibility enabled me to tackle the difficult challenge of balancing my 50:50 clinical and academic commitments and trial different ways of working, including rolling three-month blocks and a split working week. Monthly catch-ups with my supervisors provide a valuable opportunity to discuss any issues.

I am keen that others have the kind of opportunities I have been given, and therefore make time to mentor and support junior clinical researchers and students. I have adapted the University's guide to mentoring for CVS, and I was inspired to join CVS's Working Lives Committee, which has provided a fantastic opportunity to help enhance the working culture, environment and work/life balance of all Departmental staff and students.

Outside the University, I have key roles with the national Parkinson's Excellence Network and with the British Geriatrics Society, and care has always been taken to ensure that there is sufficient flexibility in my timetable to enable me to attend relevant meetings and events that are essential to my personal and professional development. I was encouraged in seeking a mentor external to the Department and University, whose own career and lifestyle best reflects my hopes and aspirations: Dr Helen Roberts, Associate Clinical Professor at the University of Southampton, and I meet and speak with her regularly.

(420 words)

Case study two: Dr Emma Stringer, Career Development Fellow, SAT member

Following the end of a research contract in the Department of Biochemistry, I joined the Department of Cardiovascular Sciences (CVS) in September 2011 on a five-year contract as a Research Development Fellow (slightly junior to a Research Fellow, because of my relative lack of experience). I found this position through the university's redeployment process.

Shortly after I joined CVS I was encouraged by the Head of Department to apply for and was awarded competitive Wellcome Trust Seed Funding towards my research into atherosclerosis (thickening of the arteries). Due to the above average length of my contract (normally 2-3 years) and the supportive environment created by CVS, I have been able to progress my career in a new strand of research as well as start a family; I had my first child in August 2012 and my second in April 2015.

During both pregnancies, I had regular meetings with my research group lead to establish suitable maternity leave timings. I was really keen for my projects to continue while I was on leave and CVS actively sought ways during both periods of leave to help me achieve this, including providing extra technical support and part-funding a visit from one of my collaborators in Poland, to progress the work in my absence. Knowing that vital research was continuing proved invaluable in helping me to cope with a very challenging new role as a mother.

After both six-month maternity breaks, I requested that I have an extended phased return of a few days a week for at least six weeks, which was agreed without hesitation. This made the transition back to full-time employment much more manageable and gave my children time to adapt to the change in routine. The introduction of core working hours has also helped me with family commitments to achieve a better work-life balance.

Since I joined CVS in 2011, I have seen a number of significant changes, largely as a result of engagement with the Athena SWAN Charter, that have really benefited me. I enjoy being a member of the SAT, which allows me to contribute my perspective as a researcher and new parent.

This change in culture means I feel comfortable when attending routine appointments or even fun events with my children. On a few occasions I have had to leave work with no notice to attend to childcare matters and have received the complete support of the Departmental Manager, HoD and my colleagues.

In summary, CVS has provided me with an environment within which I feel valued as a scientist and supported in my need to achieve a good work-life balance. As I progress and continue to supervise staff I have been able to encourage them to explore and utilise family-friendly policies, such as shared parental leave, which the University now offers, as appropriate.

(478 words)

Department of Cardiovascular Sciences Athena SWAN Action Plan 2016 to 2018

Our Action Plan is both reflective of our progress to date and also forward-facing. It specifies the additional activities which we will be carrying out which are either focussed specifically on women, or which apply to both sexes but will particularly benefit women. We have grouped our actions into four key themes: culture, personal development and career progression, outward-facing initiatives, and data improvements. Initial work has aready been undertaken on most of these - the current situation is summarised in the "Actions to date" column. An "Implementation by" timeline is provided.

Each section with blue highlight contains the action numbers (starting 'BA') from our 2012 Bronze application, with a summary report of progress against that action (additional details are in the main application document).

Key to Prioritisation:

Top Priority
Intermediate
Lower Priority

1. Culture	2				
c	Action Number	Action	Progress		
ction Pla	BA3.3	Provide training on objective setting	Training for PIs and supervisors on objective setting and delivering feedback delivered in CVS in April 2014 (12 attendees) and June 2015 (17 attendees).		
Bronze A	BA3.6	Enhance role of DEO within CVS	DEO member of Academic Committee and AS SAT since 2012, and Working Lives Committee since 2013.		
Update from	BA4.1	Implement structural change within the Department by the creation of a Working Lives Committee and appoint a senior academic to lead	WLC established Sept 2013, chaired by Deputy HoD and now embedded within Departmental structure; other departments in the College have now copied the same model and it is being promoted across the University as an example of good practice by the University Athena SWAN Executive.		
	BA4.2	Change of meeting times into 'core' hours	From July 2014, all Departmental committee and staff meetings held within core hours		

					10 - 4. Local school h	oliday dates are	included on our wel	psite and avoided.
	BA4.3 To link our staff with the wider University policies Athena SWAN webpages on our Working Lives we with appropriate information and links integrating University and external Athena SWAN webpages.			ebsite and populate ng with wider		ite live early 2014. Increased staff awareness of policies on y, parental leave, and flexible working when measured in our survey (83%).		
	BA4.4	Document an	nd implement Departmental Worklo			odel introduced September 2014 after wide consultation; this CVS pending the introduction of a new University-wide model.		
Action No. & priority	Objective	Actions taken to date Further Actions		Further Actions		Who is responsible	Implementation by	What will success look like?
1.1	Increase visibi role models ir	•	Professor Jane Dacre, President of the Royal College of Physicians, gave well-attended lecture on 'Women and Medicine – The Future", Nov '15	a. Establish new annual lecture, named in honour of a prominent female Leiceste physician or scientist, and integrate as key event in College lecture series		Academic Committee Chair	1 st lecture to coincide with March '17 IWD	New lecture becomes established feature of CVS's annual cycle
	2 Support a female career- break returner by sponsoring and hosting a Daphne Jackson Fellowship		Several high-profile women e.g. Prof Barbara Casadei, Prof Rhian Touyz and Dr Emanuela Costanza, have given seminars	 b. Widen process for nominating speakers to encourage all academic and research staff to nominate speakers 		Seminar programme organiser	Year on year increases – reaching target by July '17	At least 1 in 3 external speakers being women
			in 2014 and 2015	c. Broaden subject ra cultural issues as w clinical/scientific e. medicine	•		Sept '17	Programme shows diverse range of topics
1.2			Interest registered with University Daphne Jackson Trust contact	a. Fellowship funding from Van Geest Fu endowment fund) Jackson fellow fund three years	nd (a Departmental for one Daphne	Gender Equality Lead & SAT	Dec '16	Advertisement published
				b. Advertise and appo DJ Trust	pint Fellow through		July '17	Appointment made

1.3	Reduce time impact of cross-site travel specifically for part-time staff in meetings, events and training	Video-conferencing equipment installed, and trialled in departmental meetings Hot-desks made available at both sites WLC meeting times made compatible with inter-site bus service Some University staff development sessions held at local sites	 a. Expanded use /normalisation of Skype and video-linking b. All Dept committee times to be bus service compatible (timetable to all Chairs) c. Raise awareness of hot-desks for use before/after meetings d. Trial video-conference committee participation e. Work with other College depts and HR to significantly increase staff development sessions offered locally f. Upload of video of key meetings for remote access 	Dept Manager	July '16 July '16 July '16 July '16 July '17 Dec '18	 Responses to specific questions in 2018 staff >85% of staff report tele/video conference participation >50% of staff development sessions offered locally >90% of staff report that inter-site working is not a barrier to participation Women working less than full time no longer report that travel time is a barrier to participation
1.4	Broaden departmental communications, with less 'top-down' approach and greater involvement of staff and students at all levels	HoD monthly email replaced by broader monthly newsletter Regular emails to welcome new starters Established pattern of all- staff/student meetings and annual away day Key developments at University and College level communicated via newsletters and staff/student meetings Brief 'what I do' talks successfully trialled at All-staff Meeting (very positive feedback)	 a. Expansion of newsletter to include sections for WLC and Social Committee, plus expanded news of personal achievements and a "my news" section for staff and students b. Biographies and photos of new staff (with consent) to be included with announcements. c. Establish regular 'what I do' talks from staff at All-staff meetings, so that in a diverse CVS we know what our colleagues are doing 	WLC Dept Manager HoD & Dept Manager	Jan '16 Jan '16 May '16	5% per year continued increase in staff satisfaction with communication in surveys, with respondents reporting they have frequent access to relevant and helpful information By 2017, >90% staff expressing satisfaction with communication and transparency

1.5	Embed the celebration of female achievement	Successful IWD event held at Glenfield, March '15; University programme extensively promoted CVS senior female staff nominated for University IWD 'Inspirational Women' event	 a. Glenfield IWD celebration to become annual event b. CVS input at College IWD events, for staff/students at LRI 	SAT & Gender Equality Lead	March '16	Annual IWD events at satellite sites attended by 30% of CVS staff Raised awareness of female role models and increased aspiration Prominent contributions from CVS staff and students to College IWD events
1.6	Develop and embed role of Departmental Gender Equality Lead	Departmental Gender Equality Lead appointed following call for volunteers	a. Develop and implement CVS gender equality strategy (the Athena SWAN action plans) to link with the wider College strategy	SAT & Gender Equality Lead	Dec '16	Presentation of plans to All- staff Meeting of how CVS fits into the wider University gender equality strategy
			b. Evaluate and plan around the intersection of gender and other diversity issues		March '18	Presentation to DEC of evaluation of effects at intersection with other diversity issues and to feed into University strategy
1.7	Foster male advocacy of gender equality	High take-up of HeforShe pledge amongst male academic staff (>90%)	a. Appoint CVS HeForShe focal point	WLC & Gender Equality Lead	March '16	Appointment made
		Male academic leading on Athena SWAN activity	 Develop CVS HeforShe strategy to include introduction at induction 		Dec '16	Publication of HeForShe strategy on CVS Website
						Enhanced dissemination and discussion of gender issues within CVS
			c. Sustained track record of male advocacy in gender equality activity		Dec '18	Sustained male engagement with the gender equality agenda measured by >30%

1.8	Extension of fle working	exible	CVS gives positive response to requests for short-term flexible working for caring responsibilities – discussed on an individual basis. Positive feedback on this in staff surveys (76% satisified)	a. Formalise existing i practice - 3 days pe when they can wor with caring for rela obtaining prior per manager	r annum for all staff k from home to fit tives without	Dept Manager & HoD	Jan '17	 male attendance at gender equality events >95% of men reporting awareness of Athena SWAN activity in survey Policy published on CVS website; feedback from staff surveys demonstrating awareness and 90% positive feedback on implementation 	
2. Person	al Development	and Career Pr	ogression						
	Action Number	Action		Progress					
Update from Bronze Action Plan	BA2.2	to take resp Fellows. Pos career advic Departmen	Appointment within CVS Academic Committee of a senior academic to take responsibility for post-doctoral Research Associates / Fellows. Post-holder responsible for systems for: (a) mentoring, (b) career advice, (c) female role models invited to present at Departmental Seminars, and (d) encourage female academics to engage with College "Early Career Researcher Committee"			Research staff advisor appointed September 2013. Meetings have included an update on the University Concordat action plan. Open-door policy between meetings. This has influenced College change with the model copied in all departments. All of the planned initiatives have taken place and are described in the submission or in other action points (e.g. 1.1).			
from Bronze	BA2.3		female academics are facilitated to archer" Committee and Athena SW ersity	-	Information on events is circulated regularly and research and academic staff are encouraged to attend. CVS attendance at University's annual Athena SWAN event is high.				
Update	BA3.1	Put in place Associates /	a mentoring system for post-docto ' Fellows	ral Research	College-wide mentoring scheme for research staff established. We have connected our staff with the College scheme rather than create additional structures. Specific mentors are allocated from within CVS for newly appointed staff. Of early career research staff, 37% of staff report having a mentor, with no significant gender difference (please see action 2.1 for further plans).				
	BA3.2	Establish a (Committee of senior female academ	We have encouraged CVS staff and external contacts, including relevant clinical colleagues to become mentors through the College scheme. To date there are 24 female					

		and outside	and outside the Department who will act as mentors		mentors available to CVS colleaguesGrant training and development meetings are now organised and publicised via the Cardiovascular Theme Lead. Both joint workshops and individual meetings are available. Access to internal peer review of grants before submission.				
	BA3.4 Improve		vareness of University grant applicat	tion training					
Action No. & priority	Objective		Actions taken to date			Who is responsible	Implementation by	What will success look like?	
2.1	Improve mentor provision for PG	•	Voluntary mentoring system in operation, but uptake poor (see BA 3.1)	 a. Mentors to be assigned to all PG students b. Mentors to meet with students at least once a term c. Research staff encouraged to be PGR mentors d. Option to choose mentor of same gender 		Academic Committee Chair	Sept '16	100% assignment of mentors to students 90% PGR survey responses report access to appropriate mentoring	
2.2	2 Enhance development of early career researchers		Briefing on Concordat principles to all PIs; personal development opportunities circulated to all staff and students; University and College research staff events publicised widely; some staff development sessions offered locally Research Fellows (grade 8) currently eligible to sit on	 a. Formal commitment to 0.5 days per month quota for release for personal development b. Identification of funding for travel grants to facilitate developmental visits to our network of international collaborators and other centres c. ECRs to register as "Associate Supervisors" 		DEC & Research staff advisor	Dec '15 Dec '16	6 days personal development activity per year reported by 80% of research staff by autumn '17 Positive feedback on the availability of support in staff survey	
			academic committee as ECR representative ECRs encouraged to seek recognition for research student				July '16	All female ECRs have served as "Associate Supervisor" by Dec '18	

		supervision by registering as "Associate Supervisors"	d. ECRs to be encouraged to serve as members of the Academic Committee, to gain exposure to decision-making committees		July '16	All ECRs have had the opportunity to serve on a decision-making committee by Dec '18
			e. ECRs and PGRs encouraged and supported to apply for HEA Associate Fellowship		July '17	Increase in number of HEA Associate Fellowship applications from female candidates
			f. ECRs to be encouraged to bid for technical support for work that falls outside the remit of their primary project and to apply for consumables funds for generating their own preliminary data/hypothesis development		July '17	High awareness (> 80%) of scheme in staff surverys Successful ECR bids to departmental funds Increase in successful female aplications for fellowships
			g. All ECRs will be allocated a mentor, with the option of gender choice		July '16	100% report meeting mentor in staff survey in 2017
2.3	Support female research staff to progress to senior researcher or first academic posts	DEC reviews all eligible staff in each promotion round; encouragement to all PIs and research staff to include discussion of progression in appraisals	a. Disconnection of promotion and open- ended funding: Grade 6 & 7 research staff are put forward for promotion, irrespective of funding source	HoD, DEC, Dept Manager, Research staff advisor and all PIs	July '18	Increase in number of successful promotions cases from research staff on fixed- term contracts, reflecting gender balance
			 b. Progression planning to continue to be an explicit goal of appraisal and reporting to be mandatory 		July '17	PDP objective related to promotion to be included in all appraisal outputs
			c. Additional briefing for PIs/line managers on promotion criteria for groups of staff they supervise		July '16	Increase in number of successful promotion cases, reflecting gender balance

			 d. Raise awareness amongst PIs and research staff of concept of Grade 8 & 9 researcher (as alternative pathway to Lecturer and SL) e. For <u>newly appointed staff</u>, formalised 		July '16 Sept '16	Increased awareness amongst PIs and mentors of this promotion route, measured via annual survey 5-year Personal Research
			promotion planning process to be instigated within 6 months of appointment with line manager			Plan agreed with all research staff within 6 months of appointment
			f. Establish quarterly Q&A forum with HoD and Academic Committee chair, offering advice on the development of research careers		Sept '16	Positive feedback in annual survey on improved preparedness Increase in female fellowship applications and success rate
2.4	Develop female Lecturers and Clinical Lecturers to progress to SL and then Chair	Lecturers to been offered a mentor	 All female Lecturers, and above, to be offered leadership training e.g. Aurora (or Leadership Matters programme for SL and above) 	HoD, DEC, SAT & all PIs	Dec '18	Female lecturers progess within 5 years of appointment to an SL position
		leadership programme; in 2015, the number of funded places on the programme has been doubled by the College	 b. Lecturers to be invited to observe Executive Committee meetings as part of leadership development training 		Dec '16	
		Since 2014 a College shadowing programme has been in place	 c. All lecturers to be allocated a mentor on appointment, with option for same gender mentoring 		Jan '16	
			 Formal progression planning including an annual career development review with HoD 		Dec '16	
			e. Support for higher level networking such as visiting other centres and opportunities to participate in the activities of external bodies (e.g. BHF)		July '17	

2.5	Increase opportunities for conference attendance for research staff and students	PG Travel Fund established in 2008; University and College Carer's Conference Fund established 2014 (and accessed by CVS researcher); low awareness and uptake identified for both	a. Raise awareness of opportunities and funds through items in newsletter and by including case study on website	Dept Manager	July '16	Increased uptake of available funds with additional 5 staff/students attending conferences per year
2.6	Enhance ECR interviewer skills, and increase the pool of female interviewers	Experienced research staff trained and taking part in interview panels	a. Introduce peer interviewing for research posts (subject to completion of 'Recruitment and Selection' training)	Dept Manager & Pls	July '17	All staff offered the opportunity to undertake interview training and to interview Maintain >95% female participation on interview panels
2.7	Enhance support during maternity leave for senior research and academic staff, to prevent loss of research momentum	Individualised support, depending on needs of researcher, including access to additional technical support, KIT days, meetings with Dept Manager, phased return or reduced FTE as required	 a. Priority access to pool technical support during and for 12 months following, maternity leave b. £5,000 research grant from Departmental funds 	HoD & DEC	March '16	Academics and senior research staff maintain momentum in research during and after maternity leave Support publicised on website and communicated across Dept >90% of female and male academics aware of this
			c. Reduced administration and teaching load for 12 months following return			
			d. Publicise availability of this support to men who may be planning shared parental leave			support (including for SPL) in 2017 staff survey
2.8	All staff having an annual appraisal, with SMART	See Table 3 for current completion rates	a. Repeat training of PIs, including setting SMART objectives	HoD & DEC	July '16	100% appraisal of eligible staff

objectives	Training of PIs in objective setting, now 84% of staff report SMART objectives	 b. PIs will not be able to have their own appraisal until they have appraised all of their staff 	Sept '17	
		c. PIs who did not appraise >95% of their team in the previous year not eligible to bid for Departmental funding	Sept '18	

3. Outward-Facing Initiatives

	Action	Action			Progress				
	Number				1.105.000				
on Plan	BA3.5	Consider met specialty	Consider methods to raise the intake of women into the Cardiology specialty			Via HEEM Academic School, Chair of SAT has secured Deanery monitoring of applications and success by gender in clinical academic training in the East Midlands, with Charter principles disseminated and regular analysis of data collected.			
Bronze Action	BA2.4	HR support fo				Implemented in 2012 as interim measure to ensure transparency of the recruitment process for junior posts, reviewed 2013 and based on positive staff feedback, only continued for posts at grade 8 and above.			
te fr	BA2.5	Policy of fema	ale representation on all recruitmer	Policy introduced in Sept 2013. 85% of panels since then have had mixed gender panels.					
	BA2.1		nprove departmental information in job advertisements to make it nore appropriate for female applicants			'About the Department' section of CVS website redeveloped to include information about working/studying in the department, staff and student development, facilities, staff profiles, and views on working and studying here.			
	BA1.4	Improve awareness of part-time MD/PhD opportunities			In the last three years between 4 and 6 MD / PhD students per year have registered part-time, of whom 69% have been women.				
Action No. & priority	Objective Actions taken to date Further Actions			Who is responsible	Implementation by	What will success look like?			
3.1	female candid	Increase applications from female candidates for allAll advertisements refer to equal opportunities and AS Chartera. Amend standardise and job description welcome applicatio		s to explicitly	HoD, Dept Manager & SAT	Feb '16	Year on year increase in applications from female candidates, to close the		

	posts, particularly senior positions	part-time working publicised through prominent statement on website Search consultants for new chair post instructed to seek female candidates Grassroots outreach by STEM Ambassadors	 All search committees/ consultants (for senior posts) to continue to be instructed to maximise approaches to females 	HoD	Feb '16	gender gap, and with success rates at least equal to male colleagues No bias evident in annual
			c. Advertisements and job descriptions to be systematically reviewed for unconscious bias in the Dept, to enhance current central HR processes	Gender Equality Lead & SAT	Sept '16	analysis of recruitment data
			d. Advertisements to include both male and female informal contacts for enquiries	Dept Manager	Feb '16	
			e. Further enhance the 'About the Department' section of the CVS website to include case studies of staff and students who have worked flexibly or been supported through maternity and carer's leave, and more explicitly link to these pages in all advertisements	WLC & SAT	July '16	
3.2	Increase and refocus outreach activity, to improve engagement of	reach activity, to rove engagement of nen in CV clinical Ambassador training by staff	a. Cardiovascular stand at UG careers fair	WLC and Outreach Lead	w T ca su ti fr	Increase in the proportion of women gaining an National Training Number in cardiovascular medical and
	specialties		b. Engagement with BHF strategy to increase number of women researchers in cardiovascular science	HoD, PIs & SAT		surgical specialities, and in the number of applications from women (with continued success rates at least equal
			c. Careers events with HEEM to encouraging women in their Foundation training to become Academic Clinical Fellows / Lecturers	Outreach Lead & HEEM		to male applicants) for all clinical academic posts Enhanced dissemination of good practice
			d. Continuing to advocate for gender equality issues to remain active within	SAT Chair & HEEM		

the HEEM Academic Board		
e. Support the NHS Leicester Women in Medicine Group and bring experience of Athena SWAN actions into NHS Diversity activity	SAT Chair	

4. Data Improvements

4. Data m	nprovements								
n Pla	Action Number	Action		Progress					
sronze Actio	BA1.1	Improve da about gend	ta collection to better inform Depar er issues	tmental senior staff	Database redeveloped and additional administrative support committed to better capture staff and student data. Substantially improved data collection as reflected in this application.				
Update from Bronze Action Pla	BA1.2	Exit intervie	Exit interview to be held with Dept Manager for all leavers			In 2014/15, 25 interviews were conducted out of 26 leavers (94% - up from 69% in 2013/14). Feedback is anonymised, and an annual summary reported to Working Lives Committee, Executive Committee and all academic staff, with actions identified.			
	BA1.3	Staff survey			Annual staff and PGR surveys now well established.				
Action No. & priority	Objective		Actions taken to date	Further Actions		Who is responsible	Implementation by	What will success look like?	
4.1	Improve collection of PGR applications data		Application data currently collected, but not broken down by routes of entry	a. Break down data into different routes of entry; open competition, self-funded, staff applicants, named fellowship		Dept Manager	Dec '16	Data available to enable Academic and Executive Committees to review applications data and analyse trends by entry route	
				 b. Lobby Graduate Scl distinguishing clinic registrants for PhD 				Graduate School data system changed to include these fields	

4.2	Explore why many male staff only take 1 week of paternity leave	Data collected on uptake – most take one week of paternity leave plus one week of annual leave	a. Survey staff who have taken 1 week of paternity leave in last 5 years to ask why 2 nd week of entitlement not taken, with focus groups if required	Gender Equality Lead	March '16	If common reason relates to University policy of only statutory paternity pay rate for 2 nd week, to change University policy
4.3	Collect data on uptake of shared parental leave (SPL)	No SPL yet taken	a. Collect data on awareness and uptake of shared parental leave	Dept Manager	July '16	Data available for SAT to review
4.4	Improve data collection on outreach activity and feed into workload model	Database recently established by College	a. Increase awareness of need for staff to record data on their outreach activity through College system	Outreach Lead	July '16	All CVS outreach activity captured and recognised in workload model and promotion cases
4.5	Understand gender discrepancy in application rates for research assistant and research associate posts	Collection of and reflection on applications data (see Table 2)	a. Undertake focus groups with existing staff at both grades in both genders	Gender Equality Lead	July '17	Increase in applications from females at grade 7