



Meeting: Board Meeting
Meeting date: 29 July 2025
Title: Workforce Monitoring Report 2025
Responsible Executive/Non-Executive: Gareth Adkins, Director of People and Culture
Report Author: Gayle Macrae – EDI Lead Workforce

Report Recommendation:
The Board are asked to take substantial assurance that the publication of the report demonstrates compliance with the Public Sector Equality Duty, Specific Duties Scotland requirement to gather, use and publish employee information.

1 Purpose

This is presented to the Board for:

- Assurance

This report relates to a:

- Legal requirement
- NHS Board/Integration Joint Board Strategy or Direction

This report will align to the following NHSScotland quality

ambition(s): Safe, Effective and Person Centred

This report relates to the following Strategic Outcome(s)

Start Well		Thrive Well		Stay Well		Anchor Well	
Grow Well	x	Listen Well	x	Nurture Well	x	Plan Well	x
Care Well		Live Well		Respond Well		Treat Well	
Journey Well		Age Well		End Well		Value Well	
Perform well		Progress well		All Well Themes			

2 Report summary

2.1 Situation

The Workforce Monitoring Report is an annual report that must be published to demonstrate that NHS Highland meets the requirement as set out in the Public Sector Equality Duty to gather, use and publish employee information. The information within the report considers the workforce position as of 31st December 2024 for the period January 1st - December 31st 2024.

The Board are being asked to take substantial assurance that the publication of the report demonstrates compliance with the Public Sector Equality Duty, Specific Duties Scotland requirement to gather, use and publish employee information.

2.2 Background

The Public Sector Equality Duty is a legal requirement for public authorities to consider how they can improve society and promote equality in every aspect of their day-to-day business.

The PSED has 2 parts – the general duty and specific

duties. The general duty has 3 needs –

- To put an end to unlawful behaviour that is banned by the Equality Act 2010, including discrimination, harassment, and victimisation.
- To advance equal opportunities between people who have a protected characteristic and those who do not.
- To foster good relations between people who have a protected characteristic and those who do not.

The purpose of the specific duties is to help public authorities improve their performance on the general duties. To comply with the specific duties, public authorities must publish accessible information that shows how they are complying with the general duty.

To meet the requirements of the specific duties, NHS Highland must –

1. Report on mainstreaming the equality duty.
2. Publish equality outcomes and report progress.
3. Assess and review the equality impact of policies and practices.
4. Gather, use, and publish employee information.
5. Use information on the characteristics of members or board members gathered by the Scottish Ministers.
6. Publish gender pay gap information.
7. Publish equal pay statements.
8. Consider award criteria and conditions in relation to public procurement.
9. Publish in a manner that is accessible.

The Workforce Monitoring Report relates to point 4 and must be published annually on the NHS Highland website in an accessible format, (which is set out in point 9).

The data contained within the report was provided by the Workforce Systems Team who proactively assess data quality based on agreed principles to ensure that our workforce data is of high value to NHS Highland, and its stakeholders.

2.3 Assessment

NHS Highland’s Workforce Monitoring report details the position as of 31st December 2024, for the time period 1st January 2024 - 31st December 2024 unless otherwise highlighted. Some key points from the report are –

- The % of equalities data on e-ESS has increased, however this is mainly due to the interface between job train and e-ESS. We are proposing to run a campaign to raise awareness of the importance of colleagues sharing their equalities data. This campaign will target existing staff who joined prior to January 2023 which is when the interface came into operation.
- Nursing & Midwifery headcount is 2.3% higher than in 2023
- The % of males in the workforce has increased slightly year on year, females remain the dominant sex at 82%
- The only job families where the ratio of males is in close proximity to females is Medical & Dental and Medical Support. This is also the area where we see a significant gender pay gap occurring and further investigation into the causes of this will be carried out through the Equally Safe at Work Accreditation programme planned for 2025/26.
- The age bracket with the highest % of colleagues in Nursing & Midwifery and Medical & Dental is 50-54 years old. These job families could be impacted by retirements so may be useful to promote flexible retirement options targeted in these areas.
- Increase of 15,000 people applying to NHSH in 2024, almost 12000 of this came from persons of African ethnicity.
- Compared to 2023 there were 600 fewer vacancy forms submitted to recruitment
- The conversion rate for Allied Health Profession roles is 6.52% female and 0.95 % male although the number of applications received from both sexes are almost identical. The professional leadership team in this field will analyse the potential causes for this and build actions into their workforce plan.
- Large number of applications (3125) from males into Personal & Social Care however conversion rate of only 0.70% vs 4.69% of females. Potential causes of this will be analysed and actions developed in conjunction with our Employability Lead.

2.4 Proposed level of Assurance

This report proposes the following level of assurance

Substantial	<div><div>x</div></div>	Moderate	<div><div></div></div>
Limited	<div><div></div></div>	None	<div><div></div></div>

Comment on the level of assurance

The level of assurance is substantial as the report meets the needs as set out in the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012 to gather, use and publish information annually about the recruitment, development and retention of staff with protected characteristics.

3 Impact Analysis

3.1 Quality/ Patient Care

By understanding the demographics of our workforce, we can strive to create an inclusive culture which impacts positively on patient care.

3.2 Workforce

Monitoring of workforce profiles will raise awareness of potential workforce implications such as barriers to recruitment for certain ethnic groups. We can review our internal processes to ensure they are inclusive and accessible to all, which in turn makes NHS Highland an attractive employer. We can use the information to identify areas for improvement and introduce new initiatives such as unconscious bias training and awareness campaigns.

3.3 Financial

No known financial implications

3.4 Risk Assessment/Management

If the information contained within the report is not used to further the 3 needs as set out in the General Equality Duty, then the organisation risks not meeting its legal obligations in respect of Section 149 of the Equality Act 2010 (the public sector equality duty).

3.5 Data Protection

This report does not include personally identifiable information. Where numbers in a category/table are small, some figures have been rounded to one decimal place or expressed as 'less than five', to reduce the risk of inadvertently identifying individuals

3.6 Equality and Diversity, including health inequalities

This report demonstrates that NHS Highland is complying with the requirements of the Equality Act 2010, (Specific Duties) (Scotland) Regulations 2012. The publication of this report on our website, enables external monitoring bodies such as the Equality and Human Rights Commission for Scotland and the Scottish Human Rights Commission to monitor our compliance with current equality and diversity legislation and good practice guidelines. An EQIA is not required for purposes of publishing this report.

3.7 Other impacts

No relevant impacts.

3.8 Communication, involvement, engagement and consultation

This report has been published in collaboration with members of the workforce systems and workforce planning teams. The information contained within was also reviewed by the EDI Oversight group and Professional Leads who provided feedback and suggestions for amendments.

3.9 Route to the Meeting

This has been previously considered by the following groups as part of its development. The groups have either supported the content, or their feedback has informed the development of the content presented in this report.

- EDI Oversight Group 01/04/25 and 13/05/25
- People Portfolio Board 20/05/25
- Area Partnership Forum June 2025
- Staff Governance Committee July 2025

4.1 List of appendices

The following appendices are included with this report:

- Appendix 1 – Workforce Monitoring Report 2025



Workforce Monitoring Report 2024

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1 Introduction

The Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012 came into force on the 27th of May 2012. This requires public bodies such as NHS Highland to produce an Annual Workforce Monitoring Report covering all nine of the “protected characteristics”, as defined in the Equality Act 2010.

The nine “protected characteristics” are:

- Race
- Disability
- Sex (male or female)
- Religion or belief
- Sexual orientation
- Gender reassignment
- Age
- Pregnancy and maternity
- Marriage and civil partnership

The Regulations require that the Workforce Report must include details of:

- The number of staff and their relevant protected characteristics.
- Information on the recruitment, development, and retention of employees, in terms of their protected characteristics.
- Details of the progress the public body has made to gather and use the above information to enable it to better perform the equality duty.

2 Gathering Workforce Information

2.1 Specific Duties Required In Relation To Personal Information

Public authorities in England, Scotland and Wales are legally required to publish equality information under the specific equality duties. Data about people and their protected characteristics (also called “equality monitoring”) is shared and reported to build an evidence-based compliance with the public sector equality duties (PSED) and to meet the specific duties. Collecting and analysing equality information is an important way to develop an understanding how policies and practices affect those with protected characteristics. Public authorities should always use a proportionate approach to collecting personal information.

The national database is used to support workforce planning within NHS Scotland and ensures that NHS Highland meet or exceed our legal requirements in respect of equality and diversity monitoring. This information is held confidentially and used only for purposes of equality monitoring to ensure no group of staff are discriminated against or disadvantaged.

2.2 Data Collection

The workforce monitoring report for 2025 is based on NHS Highland employee data provided for the period of January 2024 to December 2024. The primary sources of data were from the national workforce systems, eESS (the Electronic Employee Support System, which is the HR information system), ePayroll, JobTrain (the recruitment system) and Turas Learn (the learning management system for health and social care staff).

Staff have the legal right not to disclose information about their protected characteristics, therefore any information supplied by staff is on a purely voluntary basis. As a result, the completeness of our information therefore varies by protected characteristic. The percentage of responses collated for each protected characteristic is shown below, this includes those who selected “prefer not to say”. Anything less than 100% is caused by no information being provided by the colleague.

Protected Characteristic 2023	% of Data Recorded on eESS	% of Data Recorded on eESS 2024
Race	80.8%	82.2%
Disability	84.2%	85.4%
Sex (male or female)	100.0%	100.0%
Religion / Faith	78.4%	79.8%
Sexual Orientation	81.1%	82.5%
Gender Reassignment	84.3%	84.4%
Age	100.0%	100.0%
Pregnancy and Maternity	100.0%	100.0%
Marital Status	100.0%	100.0%

The average volume of data collected per protected characteristic is 90.4% which is an increase of 0.5% since last year's report.

The Jobtrain and eESS systems were interfaced in January 2023 which meant that any new colleagues joining NHS Highland automatically had their personal details transferred from their job application into the internal HR systems. This accounts for, in part, the increase in information captured from 2023 to 2024.

In this report, where numbers in a category/table are small, some figures have been rounded to one decimal place or expressed as 'less than five', to reduce the risk of inadvertently identifying individuals.

Unless stipulated, the figures provided in this report do not include Bank Staff or Doctors in Training.

2.3 Using The Workforce Report

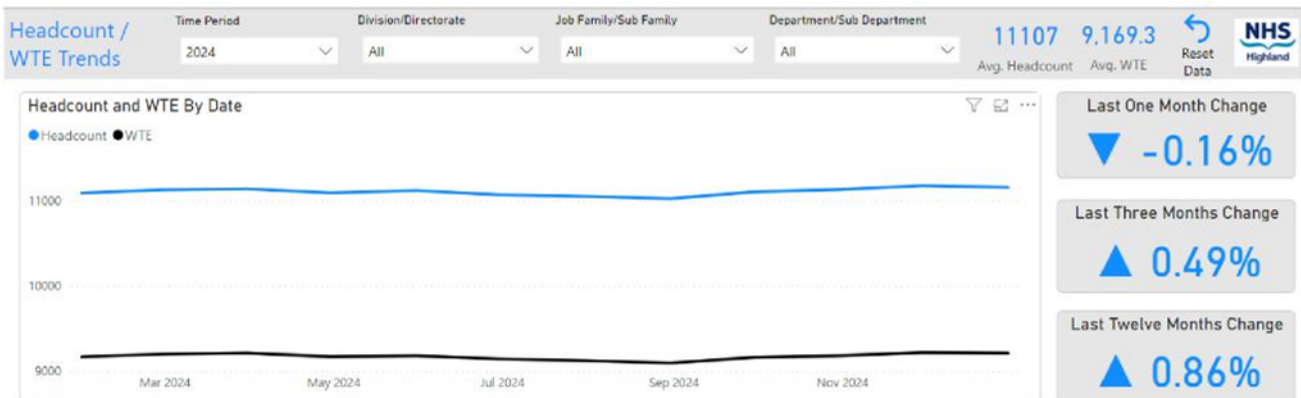
This report:

- Demonstrates NHS Highlands compliance with the requirements of the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012, as amended.
- Will be formally submitted for approval to the NHS Highland Staff Governance Committee. Following approval, it will also be widely circulated within the organisation and posted on the NHS Highland website.
- Will help the NHS Highland Board and others, to gauge whether NHS Highland employees and prospective employees are being treated fairly and equitably. Any evidence to the contrary highlighted by the report will be reviewed and appropriate follow up action taken.
- Provides evidence which will support the work undertaken by NHS Highland to create a workplace free from prejudice or discrimination.
- Gives the population of Highland, Argyll and Bute and prospective employees, information regarding how NHS Highland strives to treat its staff fairly and equitably.
- Enables external monitoring bodies such as the Equality and Human Rights Commission for Scotland and the Scottish Human Rights Commission to monitor our compliance with current equality and diversity legislation and good practice guidelines.

3 Current Workforce

As at 31st December 2024, the substantive headcount for NHS Highland was 11,158 persons which equates to 9,210 whole time equivalent (WTE), with whole time being 37 hours per week for staff on Agenda for Change Terms and Conditions as of 1st April 2024.

The overall substantive headcount remained steady throughout 2024, growing by 68 between January and December but with small ups and downs across the months.



Headcount trend for 1st January 2024 – 31st December 2024

As well as substantive and fixed term members of staff, NHS Highland also uses “Bank” workers, which provides flexibility to increase staff over and above its core staff cohort at busier times, and to cover unexpected absences, such as sick leave. As at 31st December 2024 there were 2615 sole bank workers, this is an increase of 91 bank workers on the same date in 2023. There are also 2646 colleagues who hold both a substantive and a bank contract meaning they can work extra hours either within their own area or a different discipline within NHS Highland.

NHS Highland	31 st December 2023	31 st December 2024
Contract Type	Persons in Post	Persons in Post
Bank Only	2524	2615
Bank & Substantive	2517	2646
Substantive Only	8553	8519
Total	13594	13780

Number of persons in post by contract type

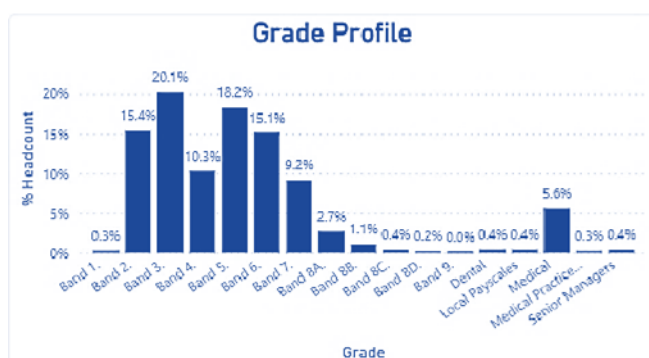
At the end of 2024, 37.7% of the workforce was in the Nursing and Midwifery job family (2.3% higher than the previous year). The next largest job family at 18.6% was Administrative Services (down 1.4% since 2023). The decrease in headcount within this job family can be partly attributed to transformation work that has been undertaken in Acute areas to redesign administrative job roles. There was a pause in recruitment into these areas whilst this work was in progress.

Job Family December 2023	Headcount 31 st	Headcount 31 st December 2024	Change in % of Workforce from 2023 - 2024
Administrative Services	2105	2076	-1.4%
Allied Health Profession	775	798	+3.0%
Dental Support	184	185	+0.5%
Healthcare Sciences	357	361	+1.1%
Medical and Dental	642	666	+3.7%
Medical Support	46	50	+8.7%
Nursing/Midwifery	4117	4211	+2.3%
Other Therapeutic	371	398	+7.3%
Personal and Social Care	1257	1262	+0.4%
Senior Managers	40	38	-5.0%
Support Services	1211	1160	-4.2%
Total	11063	11158	+0.9%

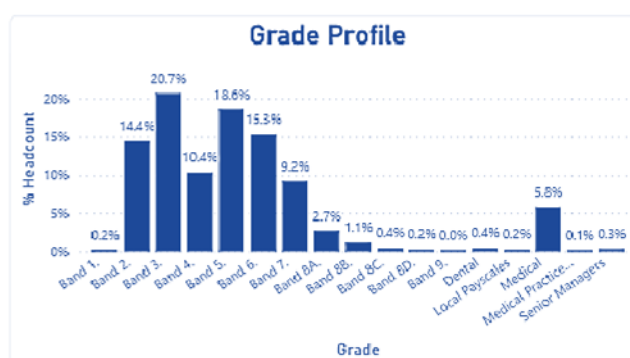
Number of persons in post by Job Family

The graphs below show the workforce split in terms of paybands for both 2023 and 2024. There has been an increase in the number of colleagues in Band 3 posts which may be attributed to a National job evaluation process over 2023/2024 which saw a large number of Band 2 Nursing staff be upgraded to Band 3.

31st December 2023

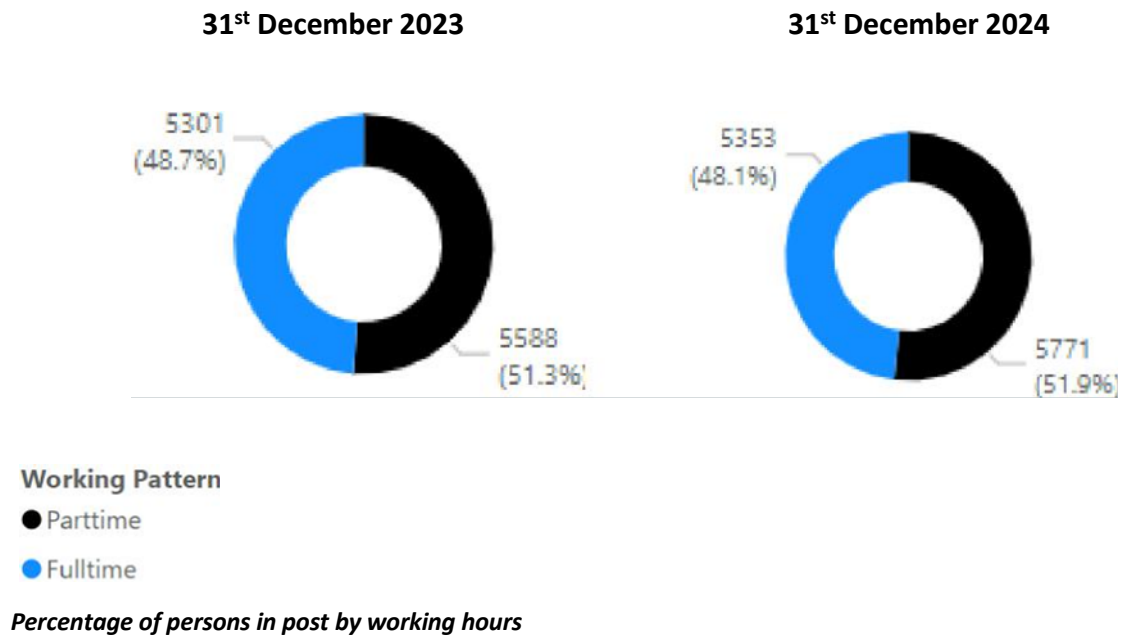


31st December 2024



Percentage of persons in post by salary banding

The workforce is split almost in half with regards to working hours and there has been a small shift in favour of part time working since 2023.



3.1 Ethnic Origin

NHS Highlands workforce is made up of 51.5% persons of White-Scottish origin which is less than the population of Highland (75.9% in the 2022 Census) and less than Argyll and Bute (74%). Since 2022, the headcount recorded of all ethnic groups has increased or remained the same, which correlates with a decrease in the number of persons not declaring any information or choosing “prefer not to say”.

The following table shows the headcount and the percentage of the total workforce each ethnic group represents.

NHS Highland		2022	2023		2024	
Ethnicity	Headcount	% Total	Headcount	% Total	Headcount	% Total
African - African, African Scottish or African British	20	0.2%	34	0.3%	61	0.6%
African - Other	6	0.1%	12	0.1%	45	0.4%
Asian - Bangladeshi, Bangladeshi Scottish or Bangladeshi British	< 5	< 0.05%	< 5	< 0.05%	< 5	< 0.05%
Asian - Chinese, Chinese Scottish or Chinese British	9	0.1%	11	0.1%	13	0.1%
Asian - Indian, Indian Scottish or Indian British	36	0.3%	45	0.4%	61	0.6%
Asian - Other	71	0.7%	79	0.7%	89	0.8%
Asian - Pakistani, Pakistani Scottish or Pakistani British	13	0.1%	18	0.2%	20	0.2%
Caribbean or Black	N/A	N/A	N/A	N/A	< 5	< 0.05%
Caribbean or Black - Black, Black Scottish or Black British	< 5	< 0.05%	< 5	< 0.05%	6	0.1%
Caribbean or Black - Caribbean, Caribbean Scottish or Caribbean British	0	0.0%	< 5	< 0.05%	< 5	< 0.05%
Caribbean or Black - Other	< 5	< 0.05%	< 5	< 0.05%	< 5	< 0.05%
Mixed or Multiple Ethnic Group	37	0.4%	42	0.4%	48	0.4%
Other Ethnic Group - Arab, Arab Scottish or Arab British	10	0.1%	17	0.2%	20	0.2%
Other Ethnic Group - Other	21	0.2%	19	0.2%	18	0.2%
White - Gypsy Traveller	< 5	< 0.05%	< 5	< 0.05%	< 5	< 0.05%
White - Irish	78	0.7%	81	0.8%	83	0.8%
White - Other	340	3.2%	412	3.8%	448	4.0%
White - Other British	1236	11.7%	1323	12.2%	1365	12.3%
White - Polish	38	0.4%	57	0.5%	82	0.7%
White - Scottish	5283	50.0%	5498	50.6%	5719	51.5%
Not Declared	2161	20.5%	2083	19.2%	1972	17.8%
Prefer not to say	1197	11.3%	1129	10.4%	1052	9.5%

Number of persons in post by Ethnicity

In 2024, NHS Highland welcomed 21 Nurses through the North of Scotland international recruitment programme. NHS Highland, Grampian, Orkney, Shetland Western Isles and Tayside work together to provide employment opportunities for international applicants. Many of the colleagues who joined NHS Highland were from Nigeria although there were also applicants from Ghana and America.

Scotland Census 2022	Highland		Argyll and Bute		NHS Highland
Ethnicity	Headcount	% Total	Headcount	% Total	% Total
African - African, African Scottish or African British	51	0.02%	9	0.001%	0.6%
African - Other	364	0.15%	145	0.17%	0.4%
Asian - Bangladeshi, Bangladeshi Scottish or Bangladeshi British	256	0.11%	46	0.05%	<0.05%
Asian - Chinese, Chinese Scottish or Chinese British	513	0.22%	193	0.22%	0.1%
Asian - Indian, Indian Scottish or Indian British	704	0.30%	151	0.17%	0.6%
Asian - Other	872	0.37%	249	0.29%	0.8%
Asian - Pakistani, Pakistani Scottish or Pakistani British	391	0.17%	124	0.14%	0.2%
Caribbean or Black - Black, Black Scottish or Black British	13	0.001%	14	0.02%	0.1%
Caribbean or Black - Caribbean, Caribbean Scottish or Caribbean British	91	0.04%	37	0.04%	<0.05%
Caribbean or Black - Other	107	0.04%	31	0.04%	<0.05%
Mixed or Multiple Ethnic Group	1943	0.82%	663	0.77%	0.4%
Other Ethnic Group - Arab, Arab Scottish or Arab British	259	0.11%	100	0.12%	0.2%
Other Ethnic Group - Other	543	0.23%	199	0.23%	0.2%
White - Gypsy Traveller	263	0.11%	84	0.10%	<0.05%
White - Irish	1549	0.66%	853	0.99%	0.8%
White - Other	6185	2.63%	2102	2.45%	4.0%
White - Other British	38140	16.20%	16648	19.36%	12.3%
White - Polish	4506	1.91%	666	0.77%	0.7%
White - Scottish	178605	75.89%	63657	74.04%	51.5%

Population Data from 2022 Census vs NHSH workforce

In comparison to the population demographics displayed in the table above, NHS Highland employs a greater number of persons from the following ethnic backgrounds –

- African - African, African Scottish, or African British
- African - Other
- Asian - Indian, Indian Scottish, or Indian British
- Asian – Other
- Asian - Pakistani, Pakistani Scottish or Pakistani British
- Caribbean or Black - Black, Black Scottish or Black British
- Other Ethnic Group - Arab, Arab Scottish, or Arab British
- White – Other

In contrast, the organisation employs a disproportionate number of colleagues from the following ethnic groups –

- Asian – Bangladeshi, Bangladeshi Scottish or Bangladeshi British
- Asian – Chinese, Chinese Scottish, or Chinese British
- Mixed or Multiple Ethnic Group
- Other Ethnic Group – Other
- White – Gypsy Traveller
- White – Other British
- White – Polish

It is important to note, however, that 9.5% of the workforce chose “prefer not to say” as an option to answer this question and 17.8% have not declared any information therefore the above analysis may be affected by these omissions.

The table on the next page shows how many persons are in each job family split down by Ethnicity. The Senior Manager job family is predominately White-Scottish although 12 persons have not declared or chosen “prefer not to say” when prompted to record their ethnicity on eESS. Medical Support is another job family that appears to lack diversity of ethnicities although nine persons have not declared their ethnicity.

Ethnicity Admin Services	2024	2024 AHPs	2024 Dental Support	2024 Healthcare Sciences	2024 Medical & Dental	2024 Medical Support	2024 Nursing & Midwifery	2024 Other Therap - eutic	2024 Personal & Social Care	2024 Senior Manager	2024 Support Services
African - African, Scottish African or British African	< 5	6	0	< 5	12	0	24	0	12	0	< 5
African - Other	0	< 5	0	< 5	0	0	31	< 5	7	0	< 5
Asian - Bangladeshi, Bangladeshi Scottish or Bangladeshi British	< 5	0	0	0	< 5	0	0	0	< 5	0	< 5
Asian - Chinese, Chinese Scottish or Chinese British	< 5	0	0	0	8	0	0	< 5	0	0	0
Asian - Indian, Indian Scottish or Indian British	7	< 5	0	< 5	28	< 5	9	< 5	5	0	< 5
Asian - Other	11	< 5	< 5	5	12	0	36	< 5	< 5	0	15
Asian - Pakistani, Pakistani Scottish or Pakistani British	< 5	< 5	0	< 5	12	0	0	< 5	< 5	0	0
Caribbean or Black	0	0	0	0	0	0	< 5	0	0	0	0
Caribbean or Black - Black, Black Scottish or Black British	0	0	< 5	< 5	0	0	< 5	0	0	0	0
Caribbean or Black - Caribbean, Caribbean Scottish or Caribbean British	0	0	0	0	0	0	< 5	0	0	0	0
Caribbean or Black - Other	0	0	0	0	0	0	0	0	0	0	< 5
Mixed or Multiple Ethnic Groups	12	< 5	0	< 5	6	0	15	< 5	< 5	0	< 5
Other Ethnic Group - Arab, Arab Scottish or Arab British	< 5	< 5	0	< 5	13	0	< 5	< 5	0	0	0
Other Ethnic Group - Other	< 5	< 5	0	< 5	7	0	5	< 5	0	0	< 5
White - Gypsy Traveller/Roma	0	0	0	0	0	0	< 5	0	0	0	0
White - Irish	8	13	< 5	< 5	12	0	29	8	6	0	< 5
White - Other	67	22	5	22	61	< 5	163	20	28	< 5	60
White - Other British	264	128	12	57	141	7	492	56	96	8	109
White - Polish	20	< 5	0	< 5	0	< 5	18	< 5	7	0	28
White - Scottish	1174	434	141	187	211	25	2362	214	372	17	610
Prefer not to say	215	63	15	37	48	< 5	304	23	223	3	124
Not declared	308	101	10	26	82	9	660	47	498	9	228

Number of persons in post split down by Ethnicity and Job Family

3.2 Disability

The Equality Act 2010 defines disability as a person having:

- A physical or mental impairment
- An impairment that has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities.

A person is recognised as disabled whether their condition is either visible or hidden, and/or has a substantial and long-term (12 months or longer) impact on their ability to do normal daily activities. It should be noted that disability is also self-defined by the individual.

The number of staff who consider themselves to have a disability is 156, which is 1.4% of the workforce. The disability data is based on the answers given by staff when they joined NHS Highland. Currently, the disability status of staff is not changed during their employment unless the staff member voluntarily updates their information on eESS. Given that it is estimated that 27% of the Scottish population define themselves as disabled,¹ it is likely that the actual number of colleagues with a disability is higher. A campaign focusing on workforce equalities information is planned for 2025 to understand why over 28.9% of the workforce would “prefer not to say” whether they have a disability or fail to provide any information at all regarding this question.

It is worth noting however, that the percentage of people who choose “prefer not to say” as their answer, has fallen by 3.1% over the last 3 years.

Under the Equality Act 2010, employers have a legal responsibility to make reasonable adjustments for disabled staff. NHS Highland actively supports staff who require adjustments in their workplace. Staff are encouraged to have a discussion with their manager if they need reasonable adjustments to ensure positive impact on wellbeing and performance of the workforce.

A new Once For Scotland Reasonable Adjustments Guide is anticipated to be rolled out to all Scottish Health Boards in Spring 2025. This will provide managers with guidance on how to support colleagues who request adjustments in the workplace.

NHS Scotland also partners with the Business Disability Forum, an organisation who aims to improve the life experiences of disabled employees by removing barriers to inclusion. Being a partner brings benefits to NHS Highland such as access to their knowledge hub which contains lots of useful training resources and toolkits, as well as a dedicated business partner who can advise on how to improve inclusion and accessibility within the workplace.

NHS Highland		2022		2023		2024
Disability	Headcount	% Total	Headcount	% Total	Headcount	% Total
Yes	89	0.8%	110	1.0%	156	1.4%
No	6855	64.9%	7337	67.5%	7738	69.7%
Not Declared	1777	16.8%	1713	15.8%	1626	14.6%
Prefer not to say	1842	17.4%	1708	15.7%	1588	14.3%

¹ DWP [Family Resources Survey: 2022 to 2023](#), disability tables 4.1 and 4.4

3.3 Sex (Male or Female)

In both the Highland and Argyll and Bute area, the 2022 Scottish Census figures report that the population is made up of 49% males and 51 % females. Traditionally, most members of the Nursing, Midwifery and Allied Health Professions have been female, which means that all Health Boards in Scotland have a much higher proportion of female staff to male staff. The most recent NHS Scotland data release (up to 30th September 2024) reports that 78.8% of the whole of NHS Scotland's workforce is female and 22.2% is male. The workforce of NHS Highland is predominantly female (9,151 headcount), representing 82.4% of staff in 2024. The trend data over the previous three years in the table below shows that the male headcount % has increased and female has decreased slightly.

NHS Highland	2022		2023		2024	
Sex (Male or Female)	Headcount	% Total	Headcount	% Total	Headcount	% Total
Female	8732	82.7%	8963	82.5%	9151	82.4%
Male	1831	17.3%	1906	17.5%	1956	17.6%

Number of persons in post by Sex

With a female dominated workforce, it is not surprising to note that all job families have a higher ratio of females to males. The only job families where the ratio of males falls within a 10% range of females are Medical & Dental and Medical Support. The breakdown of the job families by sex are outlined in the following table.

NHS Highland	Male		Female	
Job Family	Headcount	% Total	Headcount	% Total
Administrative Services	316	15.0%	1782	85.0%
Allied Health Profession	94	11.9%	692	88.1%
Dental Support	< 5	0.5%	186	99.5%
Healthcare Sciences	149	41.8%	207	58.2%
Medical and Dental	314	48.0%	340	52.0%
Medical Support	21	45.0%	26	55.0%
Nursing / Midwifery	371	8.9%	3787	91.1%
Other Therapeutic	66	17.1%	320	82.9%
Personal and Social Care	135	10.7%	1124	89.3%
Senior Managers	16	40.9%	23	59.1%
Support Services	477	40.2%	709	59.8%

Number of persons in post split down by Sex and Job Family

3.3.1 NHS Highland Board Members

As at 31st December 2024, the NHS Highland Board comprised 21 members made up of 5 Executive Members and 16 Non-Executive/Stakeholder Members. The reduction of 2 female members was due to their term of service ending and these vacant positions will be recruited to in 2025.

NHS Highland	2023		2024	
Role	Male	Female	Male	Female
Executive Director	2	3	2	3
Non-Executive Director and Employee Director	8	10	8	8

Number of Board Members in post by Sex

3.4 Religion or Belief

As with other protected characteristics, staff are asked to provide information regarding their religious and faith beliefs. Over the last few years the quality of information provided has improved, with more people providing information on religion and beliefs in 2024 than the previous years. Of those who provided information, the largest proportion of staff identify themselves as “No Religion” (33.1%: 2.2% higher than the previous year) or “Church of Scotland” (16.3%: 0.7% down on 2023).

NHS Highland	2022		2023		2024	
Religion or Belief	Headcount	% Total	Headcount	% Total	Headcount	% Total
Another Religion or Body*	N/A	N/A	N/A	N/A	< 5	< 0.05%
Buddhist	25	0.2%	27	0.3%	32	0.3%
Christian - Other	882	8.4%	943	8.7%	1018	9.2%
Church of Scotland	1872	17.7%	1850	17.0%	1810	16.3%
Hindu	33	0.3%	35	0.3%	39	0.4%
Jewish	< 5	< 0.05%	5	0.1%	5	< 0.05%
Muslim	49	0.5%	62	0.6%	71	0.6%
No Religion	3015	28.5%	3353	30.9%	3673	33.1%
Pagan*	N/A	N/A	N/A	N/A	< 5	< 0.05%
Roman Catholic	647	6.1%	688	6.3%	719	6.5%
Sikh	< 5	< 0.05%	5	0.1%	7	0.1%
Other	126	1.2%	143	1.3%	152	1.4%
Prefer not to say	1484	14.1%	1410	13.0%	1337	12.0%
Not declared	2422	22.9%	2348	21.6%	2241	20.2%

Number of persons in post by Religion or Belief

*Note these are new options for selection introduced in 2024

Across Scotland, the 2022 census showed a similar picture with most people declaring they have no religion, 51.1% up from 36.7% in 2011.

	2022 Census	Figures	
Religion or Belief	% Highland Population	% Argyll and Bute Population	% NHS Workforce
Buddhist	0.28%	0.28%	0.3%
Christian - Other	7.62%	6.63%	9.2%
Church of Scotland	23.44%	26.97%	16.3%
Hindu	0.14%	0.10%	0.4%
Jewish	0.04%	0.08%	<0.05%
Muslim	0.48%	0.38%	0.6%
No Religion	54.33%	48.46%	33.1%
Roman Catholic	6.25%	9.17%	6.5%
Sikh	0.02%	0.06%	0.1%
Other	0.26%	0.22%	1.4%
Not declared	6.58%	7.04%	20.2%

Population Data from 2022 Census vs NHS Workforce split down by Religion or Belief

3.5 Sexual Orientation

There has been a decrease year on year in the number of staff who choose “prefer not to say” and those who do not complete their information. This is a positive indicator that staff feel more open to share their sexual orientation and that they trust that their data will be used appropriately.

NHS Highland	2022		2023		2024	
Sexual Orientation	Headcount	% Total	Headcount	% Total	Headcount	% Total
Bisexual	55	0.5%	76	0.7%	99	0.9%
Gay	29	0.3%	27	0.3%	25	0.2%
Gay/Lesbian	26	0.3%	46	0.4%	66	0.6%
Heterosexual	6462	61.2%	6890	63.4%	7276	65.5%
Lesbian	23	0.2%	22	0.2%	20	0.2%
Other	20	0.2%	24	0.2%	24	0.2%
Other sexual orientation*	N/A	N/A	N/A	N/A	< 5	< 0.05%
Prefer not to say	1808	17.1%	1724	15.9%	1648	14.8%
Not declared	2140	20.3%	2059	19.0%	1949	17.5%

Number of persons in post by Sexual Orientation

***Note this is a new option for selection introduced in 2024**

NHS Scotland introduced the NHS Scotland Pride Badge and Pride Pledge in June 2021 for staff to show their commitment to support equality for LGBTQ+ and other marginalised people. LGBTQ+

and minority ethnic people still face challenges in relation to employment and negative attitudes towards them.

In 2025, NHS Highland plans to relaunch its LGBTQ+ staff network. The network will be instrumental in supporting LGBTQ+ colleagues, participating in local events such as Highland and Oban Pride and consulting on organisational initiatives. Through working closely with the LGBTQ+ network, NHS Highland hopes to understand why 32.3% of colleagues choose “prefer not to say” or do not declare their sexual orientation when asked about equalities information.

3.6 Gender Reassignment

eESS allows members of staff to amend their personal details, including equalities information. Until April 2024, it contained the question -

“Have you, are you or do you plan to undergo gender reassignment (changing gender)?”

Members of staff had the option to respond “Yes”, “No”, “Don’t know (not declared)” or “Prefer not to say”.

The language of eESS, in the context of trans individuals, was out of date, and misrepresented the process of transition as a chiefly medical exercise. Because of this and to align with the Census and the advice of the Scottish Government and LGBTQ+ organisations, the question was amended in April 2024 to ask -

“Do you consider yourself to be trans or have a trans history?”

The answer options for this question are: “Yes”, “No”, “Prefer not to say” with an additional question – “If yes, please describe your trans status, for example, non-binary, trans man, trans woman”.

There has been a reduction in the number of staff who choose “prefer not to say” or “don’t know/not declared” over the last 3 years, in conjunction with an increase in the number of staff members identifying as transgender. (The figures have been rounded up/down due to low numbers so showing as 0.1% for each of the years)

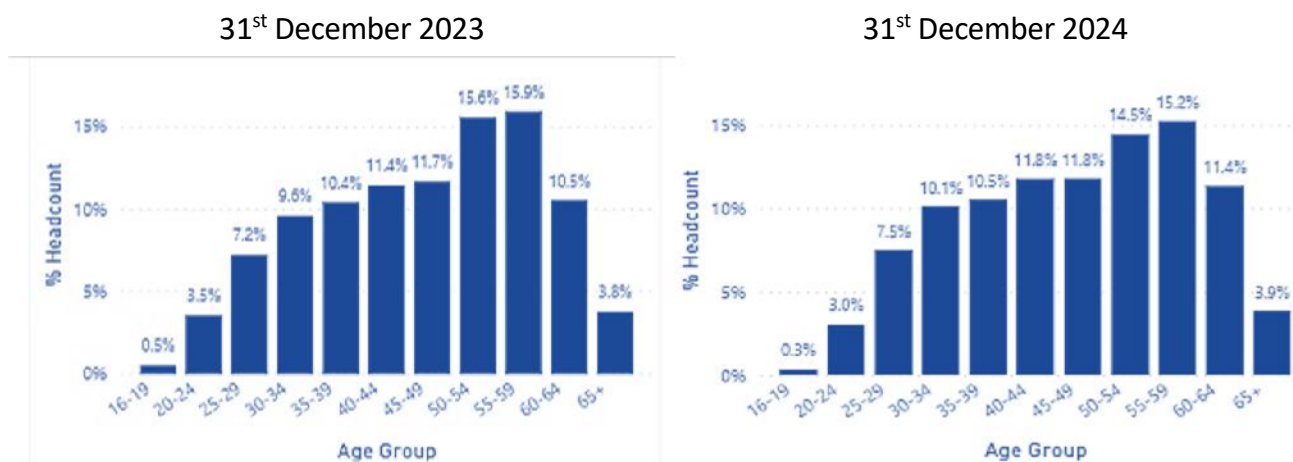
NHS Highland	2022	2023	2024
Transgender	% of Workforce	% of Workforce	% of Workforce
Yes	0.1%	0.1%	0.1%
No	63.4%	64.9%	67.2%
Prefer not to say	19.5%	18.6%	17.1%
Not declared	17.0%	16.4%	15.6%

Percentage of persons in post by Transgender status

3.7 Age

The profile of the workforce by age allows the organisation to look at the current workforce and assist in workforce planning at an organisation, departmental or team level.

The shape of the age profile of the workforce has remained relatively similar from 2023 to 2024.



Percentage of persons in post by Age group

Data from the Scotland Census 2022 is included in the following table to illustrate the age demographic of Highland, Argyll, and Bute. The NHS Highland workforce data is also included by means of comparison.

The data in the table would suggest that NHS Highland employ proportionately lower numbers of 16-19 year olds compared to the local populations. It is also demonstrated in the above graphs, that the numbers of under 25's in the workforce has declined from 2023 to 2024 by 0.7%.

To try and combat this decline, the NHSH Employability Strategy 2025 – 2028 sets out key aims in 2025 which are: to focus on school engagement, promote career pathways, develop an apprenticeship strategy and review delivery of work experience.

Age Range	% of Highland Population	% of Argyll & Bute Population	% of NHS Highland Workforce 2024
16-19	3.8%	3.5%	0.4%
20-24	4.5%	4.0%	3.2%
25-29	5.0%	4.3%	7.4%
30-34	5.6%	5.0%	9.9%
35-39	5.8%	5.1%	10.5%
40-44	6.0%	5.2%	11.6%
45-49	6.1%	5.9%	11.8%
50-54	7.6%	7.8%	15.0%
55-59	8.3%	8.9%	15.4%
60-64	7.6%	8.5%	11.0%
65+	7.6% (65-69 group)	7.5% (65-69 group)	3.8%

Population Data from 2022 Census vs NHSH workforce split down by Age

Age Group / Job Family	< 20	20 - 24	25 - 29	30 - 34	35 - 39	40 - 44	45 - 49	50 - 54	55 - 59	60 - 64	65+
Administrative Services	0.2%	1.8%	6.1%	8.5%	9.5%	12.2%	11.5%	15.9%	16.7%	12.8%	4.9%
Allied Health Profession	0.2%	3.9%	10.1%	12.4%	11.4%	15.8%	12.1%	13.6%	12.2%	6.8%	1.5%
Dental Support	0.5%	3.0%	2.9%	13.7%	16.4%	14.4%	12.6%	15.9%	14.4%	5.9%	0.9%
Healthcare Sciences	0.3%	2.6%	9.3%	12.2%	13.7%	12.0%	11.7%	15.0%	13.1%	8.0%	2.4%
Medical and Dental	0.0%	0.2%	4.6%	5.0%	12.4%	13.6%	17.6%	18.5%	16.1%	7.7%	4.5%
Medical Support	0.0%	0.0%	13.1%	12.6%	17.0%	8.0%	16.3%	18.1%	11.5%	2.1%	2.1%
Nursing / Midwifery	0.4%	4.6%	9.2%	12.4%	10.9%	11.1%	11.4%	15.4%	13.8%	8.8%	2.2%
Other Therapeutic	0.5%	2.9%	8.4%	14.3%	14.1%	14.3%	12.2%	14.4%	10.2%	7.2%	1.6%
Personal and Social Care	0.5%	2.7%	5.4%	7.0%	8.6%	9.9%	11.8%	13.4%	18.4%	16.7%	5.6%
Senior Managers	0.0%	0.0%	0.0%	0.0%	6.2%	8.2%	15.1%	17.9%	30.8%	9.0%	12.9%
Support Services	1.4%	3.0%	4.6%	5.3%	8.3%	9.2%	10.1%	12.2%	19.9%	17.8%	8.3%

Percentage of persons in post split down by Age and Job Family

3.8 Pregnancy and Maternity

Maternity leave in NHS Highland can be taken for up to 52 weeks, made up of paid and unpaid elements. All colleagues must complete a maternity leave form to notify the organisation of their intention to take maternity leave. Included in the form are options that the colleague can choose regarding their return to work, namely –

- I intend to return to work
- I am undecided whether I will be returning to work
- I do not intend to return to work.

At present NHS Highland does not have an automated system for recording the above options and therefore the analysis of number of returners after maternity leave is not available for this report. An electronic solution is under ongoing development to enable this data to be recorded and analysed.

3.9 Marriage and Civil Partnership

The below table shows the marital status of NHS Highlands workforce as at 31st December 2024, 100% of staff provided their data in respect of this question. The workforce has a high percentage of married and single staff at 52.1% and 41.6%, respectively. It may be reasonable to deduce that “Single” should not be taken as the opposite of “Married” as more people choose not to marry due to social, economic, or health reasons, but are nevertheless in an enduring relationship.

NHS Highland	2022		2023		2024	
Marital Status	Headcount	% Total	Headcount	% Total	Headcount	% Total
Civil Partnership	82	0.8%	105	1.0%	137	1.2%
Divorced	476	4.5%	492	4.5%	501	4.5%
Married	5694	53.9%	5769	53.1%	5789	52.1%
Single	4256	40.3%	4449	40.9%	4625	41.6%
Widowed	55	0.5%	54	0.5%	55	0.5%

Number of persons in post by Marital status

4 Recruitment and Retention

A total of 1,999 persons joined the organisation in 2024, 812 less than in 2023. All jobs are advertised on the NHS Scotland careers website and applications made on Jobtrain, which is the National NHS Scotland recruitment portal. All applications are made online which can be a barrier for those whose first language is not English, people with learning disabilities or people with lower levels of digital skills.

A total of 59,172 applications were made to join NHS Highland, 3.38% of these applications were successfully appointed into a role.

There has been a decline in the number of ATR (Authority To Recruit) forms submitted to recruitment over the last three years, along with an increase in the number of applications received. This will contribute to a lower conversion rate for posts as more people are applying for less positions.

Year	Number of ATRs submitted	Number of
2022	3852	24,116
2023	3049	44,428
2024	2470	59,172

NHS Highland receives several applications from overseas workers who do not meet the visa eligibility or professional registration criteria, this results in a proportion of applications having to be refused at shortlisting stage. Applications are also generated by automated “bots” which provide false information such as NMC registration pins which are not genuine.

This issue affects jobs advertised from every job family within the organisation although it is most prevalent for Nursing/Midwifery posts. Some of these job adverts can attract over 100 applicants which all need to be reviewed and shortlisted individually.

At present, due to system constraints, it is not possible to determine the true numbers of applications declined due to false information and those not shortlisted for genuinely not meeting the minimum criteria.

Most of the applications for Nursing/Midwifery roles which are declined due to registration or visa ineligibility come from African countries which may account for the low conversion rate in the following table.

4.1 Ethnic Origin

Ethnicity No. Applicants	2023	2023 Successful Applicants	2023 Conversion Rate	2024 No. Applicants	2024 Successful Applicants	2024 Conversion Rate
African - African, Scottish African or British African	9324	46	0.5%	26126	62	0.24%
African - Other	13494	39	0.3%	8664	10	0.12%
Asian - Bangladeshi, Bangladeshi Scottish or Bangladeshi British	295	2	0.7%	316	4	1.27%
Asian - Chinese, Chinese Scottish or Chinese British	113	6	5.3%	142	5	3.52%
Asian - Indian, Indian Scottish or Indian British	3558	26	0.7%	5511	35	0.64%
Asian - Other	1152	28	2.4%	544	5	0.92%
Asian - Pakistani, Pakistani Scottish or Pakistani British	2981	9	0.3%	3389	8	0.24%
Caribbean or Black	83	5	6.0%	472	6	1.27%
Caribbean or Black - Black, Black Scottish or Black British	132	6	4.6%	65	1	1.54%
Caribbean or Black - Caribbean, Caribbean Scottish or Caribbean British	23	1	4.4%	10	0	0.00%
Mixed or Multiple Ethnic Groups	193	22	11.4%	370	28	7.56%
Other Ethnic Group - Arab, Arab Scottish or Arab British	463	14	3.0%	433	8	1.85%
Other Ethnic Group - Other	457	8	1.8%	1703	13	0.76%
White - Gypsy Traveller	1	0	0.00%	5	0	0.00%
White - Irish	109	25	22.9%	176	29	16.4%
White - Other	1424	189	13.3%	1410	127	9.01%
White - Other British	2155	475	22.0%	1904	330	17.33%
White - Polish	434	72	16.6%	474	64	13.50%
White - Scottish	7586	1812	23.9%	7001	1244	17.77%
Not Declared	133	1	0.8%	0	0	0.00%
Prefer not to say	318	25	7.9%	446	20	4.48%

Number of applications received by Ethnicity

Ethnicity Admin Services	2024	2024 AHPs	2024 Dental Support	2024 Healthcare Sciences	2024 Medical & Dental	2024 Medical Support	2024 Nursing & Midwifery	2024 Personal & Social Care	2024 Other Therap- eutic	2024 Senior Manager	2024 Support Services
African - African, Scottish African or British African	1995	1617	112	826	827	9	14719	4468	132	4	1417
African - Other	341	408	53	174	57	0	5794	1362	20	1	454
Asian - Bangladeshi, Bangladeshi Scottish or Bangladeshi British	34	3	1	12	168	1	50	26	0	0	21
Asian - Chinese, Chinese Scottish or Chinese British	16	22	0	14	40	0	22	6	5	1	16
Asian - Indian, Indian Scottish or Indian British	871	667	25	355	1008	7	1454	617	109	2	396
Asian - Other	57	63	1	30	169	0	136	46	0	0	42
Asian - Pakistani, Pakistani Scottish or Pakistani British	213	346	15	82	2048	5	354	143	34	1	148
Caribbean or Black	41	23	0	11	21	3	256	92	4	0	21
Caribbean or Black - Black, Black Scottish or Black British	5	6	0	3	4	0	3	5	0	0	4
Caribbean or Black - Caribbean, Caribbean Scottish or Caribbean British	1	0	0	0	1	0	4	2	0	0	2
Mixed or Multiple Ethnic Groups	42	21	1	32	97	1	108	28	15	1	24
Other Ethnic Group - Arab, Arab Scottish or Arab British	13	18	1	11	338	1	27	7	7	0	1
Other Ethnic Group - Other	147	88	4	80	437	2	679	155	10	1	101
White - Gypsy Traveller/Roma	1	1	0	0	5	0	1	1	0	0	7
White - Irish	24	27	0	14	10	0	56	13	12	0	17
White - Other	250	93	2	84	210	6	441	126	47	1	147
White - Other British	415	130	14	66	102	7	626	223	62	4	255
White - Polish	96	23	0	21	2	1	124	28	10	0	169
White - Scottish	1807	350	68	255	96	13	2437	684	202	6	1083
Prefer not to say	95	25	0	19	42	1	134	51	9	2	53

Number of applications received split down by Ethnicity and Job Family

4.2 Disability

All the Boards in NHS Scotland support the Disability Confident scheme. This scheme guarantees an interview to anyone with a recognised disability if their application meets the minimum job criteria. The applicant can also request reasonable adjustments to the recruitment process such as allowing extra time to a standard interview or viewing the interview questions in advance. In 2024, NHS Highland had a conversion rate of successful applicants with a disability which was more than three times that of applicants with no disability. Out of the 1456 applicants who answered “Yes”, 105 requested an adjustment to their interview. The most common conditions to request adjustments for were Dyslexia, followed by Hearing Impairments and Autism.

Disability	2023 No. Applicants	2023 Successful Applicants	2023 Conversion Rate	2024 No. Applicants	2024 Successful Applicants	2024 Conversion Rate
No	42839	2597	6.1%	56993	1767	3.10%
Not known	133	1	0.8%	86	11	12.79%
Prefer not to say	0	0	0.00%	0	0	0.00%
Yes	1456	213	14.6%	2094	221	10.55%

Number of applications received by Disability status

4.3 Sex (Male or Female)

Job Family Applicants	Female Applicants	Successful Female	Female Conversion Rate	Male Applicants	Successful Male Applicants	Male Conversion Rate
Administrative Services	4093	264	6.45%	2325	38	1.63%
Allied Health Professions	1917	125	6.52%	2000	19	0.95%
Dental Support	211	16	7.58%	89	2	2.25%
Healthcare Sciences	1151	42	3.65%	926	30	3.24%
Medical and Dental	2327	59	2.54%	3332	58	1.74%
Medical Support	38	3	7.89%	19	2	10.53%
Nursing and Midwifery	19705	679	3.45%	7723	94	1.22%
Other Therapeutic	453	53	11.70%	218	9	4.13%
Personal and Social Care	4946	232	4.69%	3124	22	0.70%
Senior Managers	8	2	25.00%	15	0	0.00%
Support Services	1815	136	7.49%	2526	97	3.84%
Grand Total	36664	1611	4.39%	22297	371	1.66%

Number of applications received split down by Sex and Job Family

A larger number of females to males applied for roles in 2024. Further analysis is required to understand the low conversion rate for male applicants into Allied Health Profession roles which include professions such as Physiotherapist, Dietician and Occupational Therapist.

Medical and Dental roles receive a larger number of male applicants yet the number of appointments are almost exactly the same as the number of female appointments.

The conversion rates for males in Personal and Social care is almost 4% lower than female applicants, further analysis is needed to understand why.

4.4 Religion or Belief

The conversion rates of applicants from different religions vary between 0.0% for people of Jewish faith and 11.2% for Church of Scotland. As previously mentioned, a high number of applications come from overseas (predominantly Africa) which do not meet the visa requirements to work in the UK and therefore their applications are rejected. This may account for the high number of applications and lower conversion rates for Muslim and Christian candidates which are the 2 main religions in Africa. A new Religion or Belief, Pagan, was introduced in 2024 for candidates to select.

Religion or Belief Applicants 2023	Number of	Successful Applicants 2023	Conversion Rate 2023	Number of Applicants 2024	Successful Applicants 2024	Conversion Rate 2024
Another Religion or Body	408	68	16.7%	337	21	6.2%
Buddhist	388	12	3.1%	562	11	2.0%
Church of Scotland	1706	368	21.6%	2324	260	11.2%
Hindu	1842	5	0.3%	2908	16	0.6%
Jewish	19	2	10.5%	24	0	0.0%
Muslim	6478	38	0.6%	8186	28	0.3%
None	7456	1594	21.4%	7291	1171	16.1%
Other - Christian	20209	357	1.8%	28450	242	0.9%
Roman Catholic	4303	206	4.8%	7545	151	2.0%
Sikh	59	4	6.8%	77	2	2.6%
Pagan*	-	-	-	67	5	7.5%
Not Given	133	1	0.8%	0	0	0.0%
Prefer not to say	1427	156	10.9%	1402	92	6.7%

Number of applications by Religion or Belief

***Note these are new options for selection introduced in 2024**

4.5 Sexual Orientation

In 2024, candidates were successfully appointed from each of the sexual orientation categories monitored. The conversion rate for candidates who declared themselves as gay/lesbian was almost three times that of heterosexual/straight candidates. This suggests that the shortlisting and interview processes appear fair and free from discrimination based on sexual orientation.

Orientation Applicants	2023 No.	2023 Successful Applicants	2023 Conversion Rate	2024 No. Applicants	2024 Successful Applicants	2024 Conversion Rate
Bi-Sexual	1408	66	4.7%	1494	52	3.48%
Gay/Lesbian	472	62	13.1%	452	44	9.73%
Heterosexual/Straight	39692	2547	6.4%	54504	1796	3.30%
Not Known	133	1	0.8%	15	4	26.67%
Other	599	10	1.7%	458	7	1.53%
Prefer not to say	2124	125	5.9%	2250	96	4.27%

Number of applications received by Sexual Orientation

4.6 Gender Reassignment

As mentioned in Section 3.6, until April 2024 the question applicants had to answer relating to gender reassignment on Jobtrain was -

“Have you, are you or do you plan to undergo gender reassignment (changing gender)?”

As this question misrepresented gender transition as a medical exercise, this may have resulted in the applicants choosing “prefer not to say” or not declaring any information. It is not possible to determine which of the applicants choosing these options may have identified as trans or have a trans history and were successfully appointed.

Transgender	No. Applicants	Successful Applicants	Conversion Rate
Yes	233	8	3.4%
No	42256	2694	6.4%
Prefer not to say	331	18	5.4%
Not Declared	1608	91	5.7%

Number of applications received by Transgender status

4.7 Age

In 2024, people were employed from all the age ranges monitored in NHS Highland. The highest conversion rates were recorded in the 50-65+ age brackets.

Age Band No. Applicants	2023	2023 Successful Applicants	2023 Conversion Rate	2024 No. Applicants	2024 Successful Applicants	2024 Conversion Rate
<20	647	105	16.2%	624	65	10.42%
20-24	3673	275	7.5%	4010	173	4.31%
25-29	12714	367	2.9%	15888	290	1.83%
30-34	10005	403	4.0%	14176	265	1.87%
35-39	7098	355	5.0%	10523	270	2.57%
40-44	4666	338	7.2%	6965	243	3.49%
45-49	2099	276	13.2%	3153	209	6.63%
50-54	1648	321	19.5%	1876	215	11.46%
55-59	1023	237	23.2%	1103	153	13.87%
60-64	447	95	21.3%	510	92	18.04%
65+	86	21	24.4%	101	13	12.87%
DOB not given	322	18	5.6%	244	11	4.51%
Grand Total	44428	2811	6.3%	59173	1999	3.38%

Number of applications received by Age

Age Band Services Dental	Admin	AHPs	Dental Support	Healthcare Science	Medical &	Medical Support	Nursing & Midwifery	Other Therapeutic	Personal Social Care	Senior Manager	Support Services
<20	122	12	2	19	0	0	208	29	52	0	180
20-24	530	299	18	339	88	4	1945	95	398	0	294
25-29	1265	1358	60	576	3347	26	6678	170	1709	2	697
30-34	1389	1093	76	455	1375	11	6837	135	1904	4	897
35-39	1121	475	71	324	472	5	5429	76	1783	4	763
40-44	739	379	48	189	184	3	3587	0	1234	3	529
45-49	457	149	12	98	98	3	1389	40	548	2	357
50-54	365	64	10	41	42	2	798	34	258	3	259
55-59	242	71	2	28	26	1	357	19	111	5	241
60-64	129	23	1	12	19	2	142	5	55	0	122
65+	32	2	0	1	8	0	3	0	8	0	20
DOB N/A	73	6	0	7	23	0	61	5	26	0	28
Grand Total	6464	3933	300	2091	5682	57	27471	678	8087	23	4387

Number of applications received split down by Age and Job Family

4.8 Pregnancy and Maternity

This information is not currently accessible from the National Jobtrain system.

4.9 Marriage and Civil Partnership

This information is not currently accessible from the National Jobtrain system.

5 Completion Of Training

The following mandatory training courses have been included in this analysis, based on completion rates as at 31st December 2024:

- Introduction to Equality, Diversity and Human Rights
- Fire Safety
- Hand Hygiene
- Why Infection Prevention Matters
- Moving and Handling Module A
- Public Protection
- Staying Safe Online
- Violence and Aggression

Of 13780 employees in eESS as of 31st December 2024, 13705 (99.5%) were successfully matched to training data available in TURAS. Of the matched employees, 2611 (19.1%) are Bank only.

NHS Grampian holds the training information for the Doctors in Training population.

As at 31st December 2024, the completion rates for the whole organisation for the nine mandatory training courses included in this analysis are –

Course Name	Completion Rate
Introduction to Equality, Diversity and Human Rights	68.2%
Fire Safety	66.4%
Hand Hygiene	88.5%
Safe Information Handling	70.4%
Moving and Handling Module A	71.7%
Public Protection	67.5%
Staying Safe Online	63.2%
Violence and Aggression*	49.2%
Why Infection Prevention Matters	87.3%

***New mandatory training course introduced in June 202**

The average overall completion rate for the organisation is 70.3%, up 1% since 2023.

5.1 Ethnic Origin

Based on the overall average completion rate given above (70.3%) it is reasonable to suggest the following ethnic groups are falling short of the organisations overall performance –

- Asian - Chinese, Chinese Scottish or Chinese British
- Asian - Bangladeshi, Bangladeshi Scottish or Bangladeshi British
- Asian - Indian, Indian Scottish or Indian British
- Asian - Other
- Asian - Pakistani, Pakistani Scottish or Pakistani British
- Caribbean or Black – Other
- Mixed or Multiple Ethnic Group
- Other Ethnic Group - Arab, Arab Scottish or Arab British
- Other Ethnic Group – Other
- White – Irish
- White – Other
- White – Other British

Whilst completion rate is lower for some ethnic groups, it is not always clear if this is due to ethnicity or other factors, such as poor completion rate generally for the team/area in which people work. For example, “Asian - Pakistani, Pakistani Scottish or Pakistani British” and “Other Ethnic Group – Other” are the two groups with the lowest completion rates for all employees (where

there are 5 or more employees in the group). Within these groups, more than 60% of employees work within Raigmore Hospital, which has a lower completion rate, 65.0%, when compared to the organisation rate of 70.3%.

	All Employees		Substantive	Employee
Ethnicity	Headcount	Completion Rate (%)	Headcount	Completion Rate (%)
African - African, African Scottish or African British	111	72.3	72	74.2
African - Other	60	86.1	51	87.6
Asian - Bangladeshi, Bangladeshi Scottish or Bangladeshi British	< 5	29.6	< 5	29.6
Asian - Chinese, Chinese Scottish or Chinese British	21	52.9	15	68.1
Asian - Indian, Indian Scottish or Indian British	78	58.5	63	63.1
Asian - Other	110	69.9	91	72.3
Asian - Pakistani, Pakistani Scottish or Pakistani British	27	42.4	17	58.8
Caribbean or Black	< 5	0.0	N/A	N/A
Caribbean or Black - Black, Black Scottish or Black British	7	77.8	6	75.9
Caribbean or Black - Caribbean, Caribbean Scottish or Caribbean British	< 5	92.6	< 5	100.0
Caribbean or Black - Other	< 5	27.8	< 5	0.0
Mixed or Multiple Ethnic Group	62	64.2	45	70.1
Other Ethnic Group - Arab, Arab Scottish or Arab British	23	54.6	22	57.1
Other Ethnic Group - Other	20	48.3	17	54.9
White - Gypsy Traveller	< 5	77.8	< 5	77.8
White - Irish	109	58.3	82	69.4
White - Other	615	67.7	460	72.7
White - Other British	1820	67.0	1381	75.7
White - Polish	108	77.7	88	82.3
White - Scottish	7018	72.4	5746	77.3
Not Declared	2331	67.8	1915	74.4
Prefer not to say	1173	71.1	1016	75.8
Grand Total	13705	70.3	11094	76.0

Training completion rates by Ethnicity

5.2 Disability

The performance rate for colleagues with a disability is higher than those without.

		All Employees	Substantive	Employees
Disability	Headcount	Completion Rate	Headcount	Completion Rate
Yes	231	74.1	172	80.7
No	9834	70.4	7818	76.3
Prefer not to say	1713	72.3	1528	75.8
Not Declared	1927	67.1	1576	74.2
Grand Total	13705	70.3	11094	76.0

Training completion rates by Disability

5.3 Sex (Male or Female)

Both sexes are above the organisational average for completion of training in terms of substantive employees. There is no evidence to suggest discrimination on the grounds of sex when it comes to access to training opportunities.

		All Employees	Substantive	Employees
Sex (male or female)	Headcount	Completion Rate %	Headcount	Completion Rate%
Female	11207	71.9	9143	77.0
Male	2498	62.7	1951	71.5
Grand Total	13705	70.3	11094	76.0

Training completion rates by Sex

5.4 Religion or Belief

Pagan, Sikh and Hindu colleagues appear to have the lowest completion rates of the various religions or beliefs. Further analysis is needed to identify the areas where these colleagues work and understand whether the completion rates are related to their job type, geographical location or something else such as a language barrier.

	All Employees		Substantive Employees	
Religion or Belief	Headcount	Completion Rate	Headcount	Completion Rate
Another Religion or Body	8	73.6	5	80.0
Buddhist	37	73.6	34	74.2
Christian - Other	1238	68.0	954	75.0
Church of Scotland	2141	71.7	1790	76.1
Hindu	53	48.8	43	56.6
Jewish	7	57.1	5	62.2
Muslim	91	52.1	68	57.8
No Religion	4758	72.3	3780	78.2
Other	188	67.3	149	73.2
Other - Christian	113	68.1	75	71.0
Pagan	< 5	0.0	< 5	0.0
Roman Catholic	906	70.0	714	75.5
Sikh	7	42.9	7	42.9
Not Declared	2627	68.5	2172	75.3
Prefer not to say	1529	69.3	1297	74.4
Grand Total	13705	70.3	11094	76.0

Training completion rates by Religion or Belief

5.5 Sexual Orientation

Colleagues who have declared themselves to be gay or gay/lesbian appear to have a slightly lower than average training completion rate.

The LGBTQ+ staff network, planned for launch in 2025, may be able to provide some insight regarding any barriers to accessing training.

	All Employees		Substantive Employees	
Sexual Orientation	Headcount	Completion Rate	Headcount	Completion Rate
Bisexual	143	69.5	100	79.7
Gay	32	55.9	26	65.0
Gay/Lesbian	98	66.8	73	74.1
Heterosexual	9236	70.9	7355	76.7
Lesbian	22	67.2	19	73.1
Other	26	67.1	24	69.0
Other Sexual Orientation	< 5	100.0	< 5	100.0
Not Declared	2284	68.6	1890	75.1
Prefer not to say	1861	69.5	1604	73.9
Grand Total	13705	70.3	11094	76.0

Training completion rates by Sexual Orientation

5.6 Gender Reassignment

There is no evidence to suggest discrimination on the grounds of gender reassignment when it comes to access to training opportunities.

	All	Employees	Substantive	Employees
Transgender	Headcount	Completion Rate	Headcount	Completion Rate
Yes	17	73.2	14	76.2
No	9395	71.0	7452	77.1
Prefer not to say	2043	71.7	1821	75.0
Not Declared	2250	65.7	1807	72.7
Grand Total	13705	70.3	11094	76.0

Training completion rates by Transgender status

5.7 Age

It is interesting to note that the lower completion rates in the age category are at opposite ends of the scale, the under 20s and over 65s. It could be assumed that those over 65 may have lower levels of digital competency than colleagues in the other age ranges however this cannot be substantiated.

All Employees			Substantive Employees	
Age Group	Headcount	Completion Rate	Headcount	Completion Rate
< 20	78	61.7	37	57.4
20 - 24	557	71.0	337	79.1
25 - 29	1073	69.9	830	76.3
30 - 34	1422	69.5	1123	76.5
35 - 39	1431	69.6	1170	76.0
40 - 44	1585	70.6	1309	76.5
45 - 49	1527	71.4	1299	76.8
50 - 54	1833	73.4	1608	77.4
55 - 59	1945	72.0	1694	75.7
60 - 64	1577	71.1	1261	76.1
65+	677	55.3	426	65.0
Grand Total	13705	70.3	11094	76.0

Training completion rates by Age

5.8 Pregnancy and Maternity

This information is not currently recorded. All training records are currently held in TURAS. The training and management system does not currently integrate across to eESS (the Human Resource system) directly to assist in collection of this data.

5.9 Marriage and Civil Partnership

All marital statuses with the exception of “widowed” are close to the organisational average for completion of training. As may be expected, a large proportion of those in the “widowed” category also fall within the older age ranges, with 31% being aged 65+ suggesting a link to age being a greater contributing factor than marital status. However, 51% of those widowed fall within the age ranges 55 – 59 and 60 – 64 which have slightly higher than average training completion rates.

	All Employees		Substantive Employees	
Marital Status	Headcount	Completion Rate	Headcount	Completion Rate
Civil Partnership	201	70.3	147	75.7
Divorced	620	74.1	503	79.8
Married	6969	70.4	5730	75.9
Single	5847	69.7	4661	75.8
Widowed	68	63.4	53	66.0
Grand Total	13705	70.3	11094	76.0

Training completion rates by Marital status

6 Promotion

The tables on the following pages contain information relating to colleagues who have received an increase to their grade in 2024. Although this information can be indicative of promotion opportunities, it can also be attributed to an increase in grade due to other processes such as a job evaluation outcome or organisational change. Therefore, the information cannot be wholly associated with promotion opportunities and should be read in that context. The figures are for staff on Agenda for Change terms and conditions only and do not include Bank colleagues. Figures only include those staff who were employed as of 31st December 2023 and remained employed as of 31st December 2024 to allow a direct comparison.

6.1 Ethnic Origin

The data does not suggest any barriers to promotion based on Ethnic Origin for the majority of groups, though in some groups the numbers are too small, making it more difficult to identify any barriers.

Ethnicity	% of AfC Substantive Workforce	% of Staff with Increased Grade
African - African, African Scottish or African British	0.3%	0.8%
African - Other	0.3%	1.7%
Asian - Bangladeshi, Bangladeshi Scottish or Bangladeshi British	< 0.1%	0.0%
Asian - Chinese, Chinese Scottish or Chinese British	< 0.1%	0.0%
Asian - Indian, Indian Scottish or Indian British	0.2%	0.2%
Asian - Other	0.7%	1.3%
Asian - Pakistani, Pakistani Scottish or Pakistani British	< 0.1%	0.0%
Caribbean or Black - Black, Black Scottish or Black British	< 0.1%	0.0%
Caribbean or Black - Caribbean, Caribbean Scottish or Caribbean British	< 0.1%	0.0%
Mixed or Multiple Ethnic Group	0.4%	0.8%
Other Ethnic Group - Arab, Arab Scottish or Arab British	< 0.1%	0.2%
Other Ethnic Group - Other	0.1%	0.0%
White - Gypsy Traveller	< 0.1%	0.0%
White - Irish	0.6%	0.4%
White - Other	3.6%	4.0%
White - Other British	11.4%	12.6%
White - Polish	0.7%	1.1%
White - Scottish	53.1%	54.7%
Prefer not to say	10.0%	6.9%
Not Declared	18.3%	15.2%

Percentage of staff with increased grade by Ethnicity

6.2 Disability

The data does not suggest any barriers to promotion based on Disability status.

Disability	% of AfC Substantive Workforce	% of Staff with Increased Grade
Yes	1.2%	2.3%
No	68.5%	74.1%
Prefer not to say	15.3%	10.1%
Not Declared	15.0%	13.5%

Percentage of staff with increased grade by Disability status

6.3 Sex (Male or Female)

Sex	% of Substantive Workforce	% of Staff with Increased Grade
Female	84.8%	86.3%
Male	15.2%	13.7%

Percentage of staff with increased grade by Sex

6.4 Religion or Belief

The data does not suggest any barriers to promotion based on Religion or Belief.

Religion	% of AfC Substantive Workforce	% of Staff with Increased Grade
Buddhist	0.3%	0.4%
Christian - Other	8.3%	8.6%
Church of Scotland	17.2%	13.3%
Hindu	0.2%	0.0%
Jewish	0.1%	0.0%
Muslim	0.2%	0.6%
No Religion	32.5%	40.8%
Other	1.4%	2.3%
Roman Catholic	6.6%	7.4%
Sikh	< 0.1%	0.2%
Prefer not to say	12.3%	8.4%
Not Declared	21.0%	17.9%

Percentage of staff with increased grade by Religion or Belief

6.5 Sexual Orientation

The data does not suggest any barriers to promotion based on Sexual Orientation.

Sexual Orientation	% of AfC Substantive Workforce	% of Staff with Increased Grade
Bisexual	0.9%	1.5%
Gay	0.2%	0.4%
Gay/Lesbian	0.6%	1.1%
Heterosexual	66.2%	70.7%
Lesbian	0.2%	0.6%
Other	0.2%	0.2%
Other Sexual Orientation	< 0.1%	0.0%
Prefer not to say	14.4%	10.3%
Not Declared	17.3%	15.2%

Percentage of staff with increased grade by Sexual Orientation

6.6 Gender Reassignment

The number of staff declaring themselves as Transgender is too small to identify if there are any barriers to promotion in this group.

Transgender	% of AfC Substantive Workforce	% of Staff with Increased Grade
Yes	0.1%	0.0%
No	66.3%	74.7%
Prefer not to say	18.0%	14.3%
Not Declared	15.5%	14.3%

Percentage of staff with increased grade by Transgender status

6.7 Age

Whilst it appears that those aged 45 and over are not increasing their grade at a proportional rate, this could be down to a number of factors such as responsibilities outside of the workplace or coming towards the end of a career leading to people not wishing to take on more responsibilities at work. There is no evidence to suggest that opportunities for promotion are limited in older age groups.

Age Group	% of AfC Substantive Workforce	% of Staff with Increased Grade
Under 20	0.2%	0.4%
20 - 24	2.4%	4.8%
25 - 29	6.7%	10.3%
30 - 34	10.1%	13.7%
35 - 39	10.4%	17.1%
40 - 44	11.6%	13.5%
45 - 49	11.6%	10.3%
50 - 54	14.9%	11.6%
55 - 59	15.9%	12.4%
60 - 64	12.3%	5.3%
65+	3.9%	0.6%

Percentage of staff with increased grade by Age

6.8 Pregnancy and Maternity

This information is not currently recorded. The payroll information system does not currently integrate across to eESS (the Human Resource system) directly to assist in collection of this data.

6.9 Marriage and Civil Partnership

Marital Status	% of AfC Substantive Workforce	% of Staff with Increased Grade
Civil Partnership	1.3%	0.8%
Divorced	4.7%	3.4%
Married	50.9%	47.8%
Single	42.6%	47.6%
Widowed	0.5%	0.4%

Percentage of staff with increased grade by Marital status

7 Leavers

The tables containing leavers data on the following pages include those who were substantive employees and left the organisation in 2024.

7.1 Ethnic Origin

Ethnicity	% of Substantive Workforce	% of Leavers
African - African, African Scottish or African British	0.6%	0.8%
African - Other	0.4%	0.4%
Asian - Bangladeshi, Bangladeshi Scottish or Bangladeshi British	< 0.05%	0.4%
Asian - Chinese, Chinese Scottish or Chinese British	0.1%	0.1%
Asian - Indian, Indian Scottish or Indian British	0.6%	1.0%
Asian - Other	0.8%	0.6%
Asian - Pakistani, Pakistani Scottish or Pakistani British	0.2%	0.8%
Caribbean or Black	< 0.05%	0.1%
Caribbean or Black - Black, Black Scottish or Black British	0.1%	0.1%
Caribbean or Black - Caribbean, Caribbean Scottish or Caribbean British	< 0.05%	0.0%
Caribbean or Black - Other	< 0.05%	0.0%
Mixed or Multiple Ethnic Group	0.4%	0.8%
Other Ethnic Group - Arab, Arab Scottish or Arab British	0.2%	0.2%
Other Ethnic Group - Other	0.2%	0.5%
White - Gypsy Traveller	< 0.05%	0.0%
White - Irish	0.8%	0.8%
White - Other	4.0%	4.5%
White - Other British	12.3%	15.6%
White - Polish	0.7%	1.2%
White - Scottish	51.5%	45.7%
Not Declared	17.8%	16.4%
Prefer not to say	9.5%	10.1%

Percentage of leavers by Ethnicity

7.2 Disability

Disability	% of Substantive Workforce	% of Leavers
Yes	1.4%	2.5%
No	69.7%	69.1%
Not Declared	14.6%	13.6%
Prefer not to say	14.3%	14.8%

Percentage of leavers by Disability status

7.3 Sex (Male or Female)

Sex	% of Substantive Workforce	% of Leavers
Female	82.4%	75.4%
Male	17.6%	24.6%

Percentage of leavers by Sex

7.4 Religion or Belief

Religion or Belief	% of Substantive Workforce	% of Leavers
Another Religion or Body	< 0.05%	0.1%
Buddhist	0.3%	0.5%
Christian - Other	9.2%	10.9%
Church of Scotland	16.3%	16.1%
Hindu	0.4%	0.4%
Jewish	< 0.05%	0.1%
Muslim	0.6%	1.7%
No Religion	33.1%	29.3%
Pagan*	< 0.05%	0.0%
Roman Catholic	6.5%	5.9%
Sikh	0.1%	0.2%
Other	1.4%	1.5%
Prefer not to say	12.0%	13.6%
Not declared	20.2%	19.8%

Percentage of leavers by Religion or Belief

7.5 Sexual Orientation

Sexual Orientation	% of Substantive Workforce	% of Leavers
Bisexual	0.9%	2.0%
Gay	0.2%	0.1%
Gay/Lesbian	0.6%	1.0%
Heterosexual	65.5%	63.9%
Lesbian	0.2%	0.1%
Other	0.2%	0.6%
Other Sexual Orientation	< 0.05%	0.0%
Prefer not to say	14.8%	15.0%
Not Declared	17.5%	17.3%

Percentage of leavers by Sexual Orientation

7.6 Gender Reassignment

Transgender	% of Substantive Workforce	% of Leavers
Yes	0.1%	0.4%
No	67.2%	68.0%
Prefer not to say	17.1%	16.7%
Not Declared	15.6%	14.9%

Percentage of leavers by Transgender status

7.7 Age

Age Group	% of Substantive Workforce	% of Leavers
Under 20	0.4%	1.3%
20 - 24	3.2%	4.2%
25 - 29	7.4%	8.9%
30 - 34	9.9%	8.8%
35 - 39	10.5%	6.5%
40 - 44	11.6%	5.7%
45 - 49	11.8%	6.2%
50 - 54	15.0%	7.9%
55 - 59	15.4%	15.0%
60 - 64	11.0%	19.5%
65+	3.8%	16.2%

Percentage of leavers by Age

7.8 Marriage and Civil Partnership

Marital Status	% of Substantive Workforce	% of Leavers
Civil Partnership	1.2%	0.9%
Divorced	4.5%	4.0%
Married	52.1%	54.3%
Single	41.6%	40.0%
Widowed	0.5%	0.8%

Percentage of leavers by Marital status

8 Conclusion

It is important to acknowledge that collecting workforce data provides evidence to support Equality Outcomes and targeted actions to have “due regard” to the Public Equality Duty defined in the Equality Act 2010, Part 11, Chapter 1, Section 149:

- (a) Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited under the Act;
- (b) Advance equality of opportunity between persons who share a relevant protected characteristics and persons who do not share it;
- (c) Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

The NHS Highland Workforce Monitoring Report 2025, shows that:

- NHS Highland is a fair and equitable employer in terms of the nine protected characteristics with areas for further improvement identified.
- The data gathered fulfils our duty to report the requirements set out in the Equality Act 2010 General Duty and the Specific Duties Scotland Regulations 2012.
- The diversity data showed proportionate promotion and completion of training in all protected characteristics. This indicates an equal opportunities employer and promoting a non-discriminatory workplace.
- The diversity data provided is a tool to monitor impact and outcome for different groups of employees. It helps identify current and future needs and possible inequalities.
- Any gaps identified may be investigated to understand causes and solutions.

Some significant difficulties remain with having to work with different employee systems to extract data relating to the protected characteristics profile of the NHS Highland workforce. In an acknowledgement of the limitations on the currently available data for this report, gaps have been identified and remedial actions will be developed in line with the [NHS Highland Equality, Diversity and Inclusion Workforce Strategy 2023-2028](#)

NHS Highland will continue to work on improving the quality of data collected which will -

- Enable a more complete evidence-based approach to demonstrating progress against our Equality Outcomes for 2025-2029.
- Help us evaluate the effectiveness of the Equality, Diversity and Inclusion Strategy 2025-2028 and the Employability Strategy 2025-2028.
- Enable more areas to be reported on in future Workforce Monitoring Reports including employee relations cases linked to protected characteristics.
- Provide supporting evidence as to how EDI practices are mainstreamed within NHS Highland
- Be reviewed by the Staff Networks who, through sharing lived experience, will assist us in identifying improvements.

This is not an exhaustive list, NHS Highland will continue to review workforce data and identify how the organisation can improve the experience of staff with protected characteristics.

9 Equal Pay Statement

In compliance with the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012, NHS Highland produced an [Equal Pay Statement in 2025](#).

10 Recommendations

The NHS Highland Workforce Monitoring Report is a publication that can encourage better evidence-informed decision making with increased transparency and accountability that will lead to a real change. The NHS Highland Staff Governance Committee will be asked to endorse the content of the report.

11 Publicising the Report

The Workforce Monitoring Report 2025 will be submitted to the NHS Highland Area Partnership Forum and the NHS Highland Staff Governance Committee for approval. The report will be available on the NHS Highland website once approved.

12 Comments and Feedback

All comments on the report will be warmly welcomed.

By email to: nhsh.EDlteam@nhs.scot

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13 Acknowledgements

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NHS Highland

June 2025