



## Departmental Restructuring Bronze and Silver Interim Award Application

### ATHENA SWAN INTERIM DEPARTMENT AWARDS

Recognise the work underway in departments to ensure that changes to the structure of the original award-holding department(s) do not adversely impact on gender equality in the department or any gender equality initiatives or Athena SWAN activities in place. Interim awards recognise that the department has taken action to ensure gender equality is embedded in the new structure, and to ensure the continuation of its actions to address the key issues identified by the self-assessment process.

### VALIDITY OF AWARDS AND ELIGIBILITY OF APPLICANTS

Interim awards will be valid for three years from the date of the application.

In order to apply for an interim award, the majority of any previous constituent units must hold Athena SWAN awards. Applicants may only apply for a Silver interim award if the majority of the previous constituent units held Silver awards.

### COMPLETING THE FORM

**DO NOT ATTEMPT TO COMPLETE THIS APPLICATION FORM WITHOUT READING THE PROVIDED GUIDANCE**

This form should be used for applications for Bronze or Silver Athena SWAN interim awards.

You should complete each section of the application applicable to the award level you are applying for.

Additional areas for Silver applications are highlighted throughout the form: 4.2, 4.4



If you need to insert a landscape page in your application, please copy and paste the template page at the end of the document, as per the instructions on that page. Please do not insert any section breaks as to do so will disrupt the page numbers.

## **WORD COUNT**

The overall word limit for applications are shown in the following table.

There are no specific word limits for the individual sections and you may distribute words over each of the sections as appropriate. At the end of every section, please state how many words you have used in that section.

We have provided the following recommendations as a guide.

Department application	Bronze	Silver
<b>Word limit</b>	<b>6,500</b>	<b>7,500</b>
<i>Recommended word count</i>		
1. Letter of endorsement	500	500
2. Description of the changes arising from restructure	1,000	1,000
3. Self-assessment process	1,000	1,000
4. Supporting and advancing careers	3,500	4,500
5. Further information	500	500

**Word Counts (we note the 500 extra words allocated for COVID impact). We have not included bulleted points in Tables.**

- 1. HoD letter = 781**
- 2. Description of restructure = 1079**
- 3. Self assessment = 753**
- 4. Supporting careers = 4822**
- 5. Further = 384**

**Total allowed for a Silver (+ COVID extension) = 8000**

**Total in this application = 7819**

<b>Date of application</b>	25/11/20
<b>Name of institution</b>	Imperial College London
<b>Name of department applying for award</b>	Metabolism, Digestion and Reproduction (MDR)
<b>Interim Award Level</b>	<b>Silver</b>
<b>Focus of department</b>	<b>STEMM</b>
<b>Previously constituted unit(s) holding awards</b>	<b>Department of Medicine Department of Surgery and Cancer</b>
<b>Details of previous award(s)</b>	<b>Date:</b> <b>Level:</b>
<b>Previously constituted unit(s) not holding awards</b>	<b>Department of Medicine Silver April 2018 and November 2014 Department of Surgery and Cancer Silver November 2018</b>
<b>Contact for application</b> Must be based in the department	Professor Dame Lesley Regan
<b>Email</b>	<a href="mailto:l.regan@imperial.ac.uk">l.regan@imperial.ac.uk</a>
<b>Telephone</b>	020 3312 1798
<b>Departmental website</b>	<a href="#">Department of Metabolism, Digestion and Reproduction   Faculty of Medicine   Imperial College London</a>

## 1. LETTER OF ENDORSEMENT FROM THE HEAD OF DEPARTMENT

**Recommended word count: 500 words**

An accompanying letter of endorsement from the head of department should be included.

Note: Please insert the endorsement letter **immediately after** this cover page.

## Faculty of Medicine

### Departmental Athena SWAN Silver Interim Award Applications

In August 2019 a revised organisational framework was launched for the Faculty of Medicine at Imperial which created smaller, more thematic departments, shaped by underpinning science and clinical alignment. Through this change, we have sought to widen academic engagement in the running of the Faculty to deliver scientific opportunity and drive support and career progression opportunities throughout.

A key intention in creating smaller units was to develop management structures within each grouping which were clear and consistent, but also representative, accessible and responsive to the needs of the members of that department. We sought to build these values into the reorganisation process itself as well as its outcome, starting with appointment to the academic leadership of the new departments through an open expression of interest call. We are delighted that the resulting departmental leadership team now comprises equal numbers of male and female Heads of Department (HoDs).

The reorganisation programme also included an Athena Swan/EDI workstream to ensure each new unit recognised and embedded equality programmes into its establishment. Since the new structure was created our academic HoDs have taken the lead in creating a supportive culture for their staff, working with their own academic group leads and as part of the wider Faculty leadership team to realise these goals for our whole academic community.



**Professor Jonathan Weber**

Ms Dani Glazzard  
Head of Athena SWAN, Advance HE  
First Floor Napier House  
24 High Holborn  
London WC1V 6AZ

20<sup>th</sup> November 2020

Dear Equality Charters Team,

It is with a great sense of duty and pride that I write our first departmental letter of support for an Athena SWAN award application. The central guiding principle of our reorganisation was to create a smaller and more cohesive department. This means alignment not just along research themes but, crucially, in the creation of processes that break down barriers to anyone who has the talent and ambition to contribute to our mission to deliver world-class research.

Our reorganisation was not performed on cost grounds and we did not experience any redundancies. Instead it was an opportunity to start afresh with a renewed commitment to a working culture that reflects what we truly believe – that addressing inequalities of opportunity because of gender, race or disability, benefits everyone. We have hit the ground running, with a vibrant People and Culture Committee (PCC), led by the inspirational Professor Dame Lesley Regan. Our PCC supports an Athena SAT that I count upon as an important conduit for understanding what we need to do to support our community to work more effectively, with a greater sense of justice, equity and compassion. As Head of one of our parental departments, Surgery and Cancer, I witnessed the power that a dedicated, embedded and supported Athena SWAN team can have to effect demonstrably positive change. I am pleased that we have already adopted all the examples of good practice from our previous awards. In our first promotions round we witnessed the success of three highly deserving women. We ensure that ALL eligible staff members are considered for promotion. Divisional Heads, who share my accountability to the College for keeping Athena SWAN principles central to the way we work, are helping support career development to be more personalised and effective.

We acknowledge that there is still plenty to do. In the absence of staff turnover with this reorganisation our gender balance, particularly at the highest levels, falls short of the ideal to which we aspire. In response we have opened up internal senior leadership positions and board membership to non-professorial staff that has allowed us to provide many more women with influential roles in the Department. Gender pay parity, a sensitive indicator of our commitment to equality, is under constant review and I am happy to report the absence of disparity in the Department

We will continue to work tirelessly and progressively to support our junior academics (now at gender parity). We actively promote our mentorship scheme which provide new recruits with opportunities in a safe space to discuss career options and plans. Furthermore our Away Days are now centred on our junior faculty members – fostering a culture where everyone feels that they have a voice. We are committed to progressive and transparent recruitment policies and we also recognise that our professional, technical and support staff are the lynchpin of our academic achievements, providing a bedrock of support and a paradigm of professional working practices that we have much to learn from. Finally, we will work hard on Principle 10 of the Charter and aim to be a beacon in the College for tackling intersectionality of barriers relating to race, LGBT+ matters, socioeconomic background and disability.

I am delighted to commend our application to you and confirm that the information presented is an honest and accurate representation of our Department.

Yours faithfully,

A handwritten signature in black ink, appearing to read 'Mark Thursz', written on a light-colored rectangular background.

**Mark Thursz MD FRCP**

Head of the Department of Metabolism Digestion and Reproduction

## Abbreviations

AP	Action Plan
BLM	Black Lives Matter
DEM	Division of Diabetes, Endocrinology and Metabolism
DoM	Department of Medicine
DOSC	Department of Surgery and Cancer
EDI	Equality, Diversity and Inclusion
F	Female
FoM	Faculty of Medicine
HoD	Head of Department
ICS	Institute of Clinical Sciences
ICU	Imperial College Union
IRDB	Institute of Reproductive and Developmental Biology
JLR	Job Level Review
LDC	Learning and Development Centre
LGBT	Lesbian Gay Bisexual and Trans
M	Male
MDR	Department of Metabolism, Digestion and Reproduction
NHLI	National Heart and Lung Institute
PCC	People and Culture Committee
PG	Postgraduate
PGR	Postgraduate Research
PGT	Postgraduate Taught
PFDC	Postdoc and Fellows Development Centre
PRDP	Personal Review and Development Plan
PTO	Professional, Technical and Operational (staff group)
SAT	Self Assessment Team
SPH	School of Public Health
UG	Undergraduate
WfH	Working from Home



## 2. DESCRIPTION OF THE CHANGES ARISING FROM RESTRUCTURE

Recommended word count: 1000 words

**The Department of Metabolism, Digestion and Reproduction (MDR) is a new department within Imperial's Faculty of Medicine (FoM).**

The Faculty of Medicine (FoM) launched a new departmental structure from 1 August 2019. This was created by the Dean of the Faculty (Professor Jonathan Weber) to enable individual departments to develop and promote their unique strengths and to ensure effective, clear and consistent approaches to supporting activity and collaboration across the Faculty. There are now a greater number of smaller departments, underpinned by scientific and clinical alignment. **The reorganisation was not driven by cost reduction and there were no redundancies as a result.**

There are now eight Departments within the Faculty; some remaining very similar to their previous configuration. Four new departments were created and the Department of Medicine (the largest department under the old structure) no longer exists. A high level overview of the transitioning of academic activity from the old to new structure is shown in Figure 2.1.

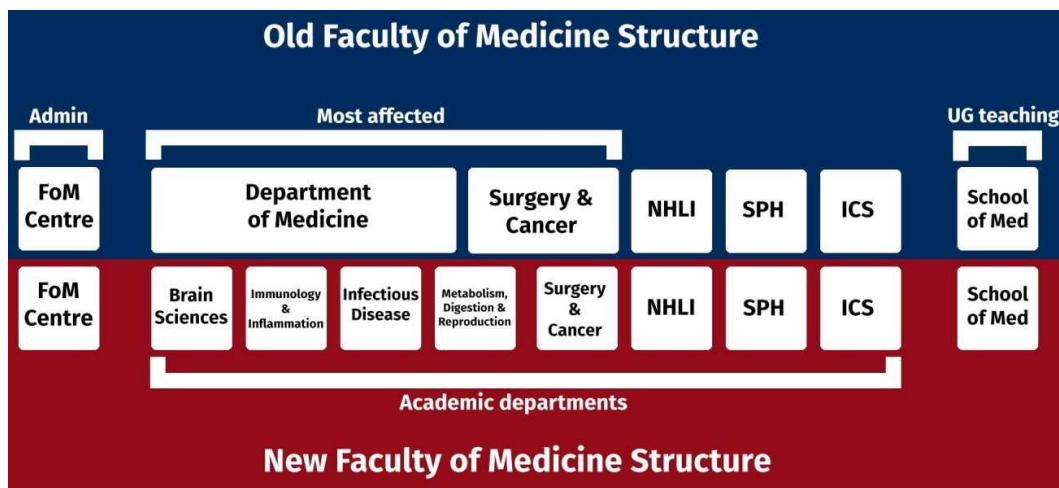


Figure 2.1: Summary of the reorganisation of Imperial College London Faculty of Medicine in 2019. The new Department of Metabolism, Digestion and Reproduction (MDR) was formed from Divisions within the former Departments of Medicine (DOM – no longer exists) and Surgery & Cancer (DOSC – now smaller). Other departments (NHLI – National Heart and Lung Institute, SPH – School of Public Health and ICS – Institute of Clinical Sciences) remain largely unchanged.

***The Job Interviews for the new HoD roles had a heavy emphasis on Athena Principles.***

In launching the reorganisation, the Dean signalled that he would 'look to our HoDs to champion and develop early and mid-career academics, leading by example to create a supportive culture for all staff'. The process was heavily influenced by staff feedback from departmental, Faculty and College level and aimed to embed many principles from our Athena SWAN action plans into reality. This included: the development of smaller departments which will foster greater unity, cohesion, collaboration and identity; transparent job descriptions for the HoDs with a major emphasis on commitment to leadership responsibility, improved working culture and career development.

Recruitment for the new HoDs was openly advertised (internally, as there were no recruitments). The interviews were run by a panel that included the Athena Lead from the former DoM and a representative for Education as well as Technical services. A significant proportion of the interview was dedicated to a discussion about departmental culture. The four new HoD appointments comprise two women and two men.

***The Department of Metabolism, Digestion and Reproduction (MDR) has a structure that reflects some of its constituent Divisions from within the former Departments of Medicine (DOM) and Surgery & Cancer (DOSC).***

MDR has arguably undergone the biggest realignments, with major units joining together from the former Department of Surgery and Cancer (for example the Institute of Reproductive and Developmental Biology, IRDB) and the former Department of Medicine (for example the Division of Diabetes, Endocrinology and Metabolism, DEM). Both parent departments were Silver Athena Award holders at the time of the reorganisation.

An organogram of the new MDR academic structure is shown in Figure 2. Whilst the four major MDR Divisions from different parent departments, their Sections remained intact and largely undisturbed (e.g. there were no changes to location of research groups or line management structure during the reorganisation). As a result, the day to day experience of most staff members was not significantly altered.

***The Department of Metabolism, Digestion and Reproduction (MDR) is geographically spread out and this is an important consideration for communications and cohesiveness.***

MDR staff are based at all of Imperial's campuses in London: South Kensington, Hammersmith Hospital/White City and St Mary's hospital, with smaller groups at Charing Cross and Chelsea & Westminster Hospitals (Figure 2.3).

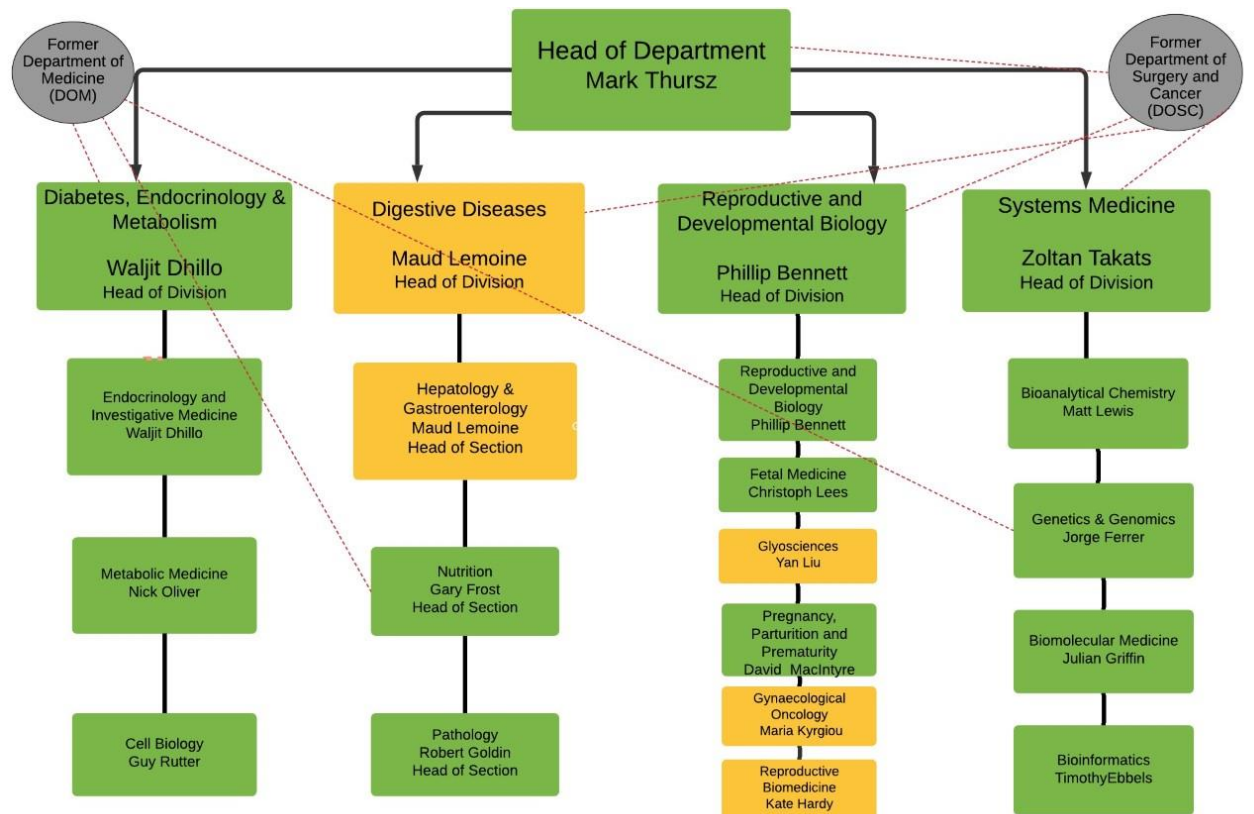


Figure 2.2: Organogram of the Divisions (top row) and Sections (columns) that make up the new Department of Metabolism, Digestion and Reproduction. Grey ovals denote which parental department they belonged to. Divisional/Section Leaders are named. As for the rest of this application, yellow denotes female and green males.

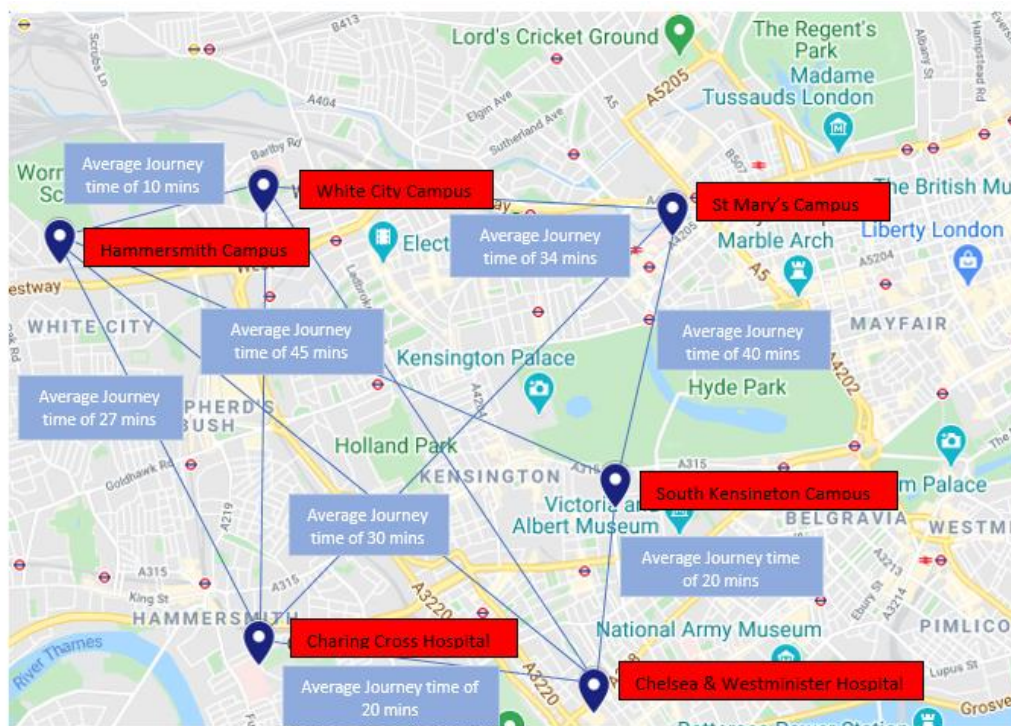


Figure 2.3: Campuses belonging to Imperial College London that house elements of the Department of Metabolism, Digestion and Reproduction (MDR).

***MDR is a research-intensive community aiming to attract the best scientists worldwide and provide them the space, freedom, support and synergies for their research to thrive.***

Our commitment to an inclusive working culture is the opening element of our mission statement:

1. **to build a strong and supportive academic community**
2. to deliver outstanding medical research,
3. to educate the next generation of leaders in medicine,
4. to apply the benefits of discovery to improve public health

***MDR is responsible for PhD and Masters students. It also hosts medical students for their intercalating BSc year, although admissions for this are decided centrally.***

Educationally, while some courses moved to new departmental homes aligned to the new structure there were no changes to the course leadership, quality, curricula, delivery format, location and scope for any courses of study.

Any effect on students was restricted to:

- a change of title for awarding department where qualifications are provided.
- some changes to support personnel and administration activity associated with the courses or individual student support (where such services are provided at a departmental level).

There were several communications to students (PGT and PGR):

- Briefing sessions to PG reps
- Student emails sent via course administrator / PGR administrator
- FAQs for students – shared as part of email message
- Letter to Imperial College Union leads
- Letter to offer holders with department change note.

***The gender split of the new MDR is reflective of its parent structures***

Among our 20 Section/Division leadership roles, 5 (20%) are held by women (see Figure 2). This matches the professorial split of the new department (19% F) and the equivalent figure for the parent Dept of Medicine (21%). There were no recruitments that occurred as part of the reorganisation. Nevertheless, the relative dearth of women in senior leadership roles remains a top priority area for improvement within MDR. In an attempt to address this imbalance, the senior executive board membership, which initially consisted of only male Heads of Division, was extended to include a representative champion for Equality and Diversity. A female Reader was chosen after an open call. (See ACTION PLANS 3.1, 3.3)

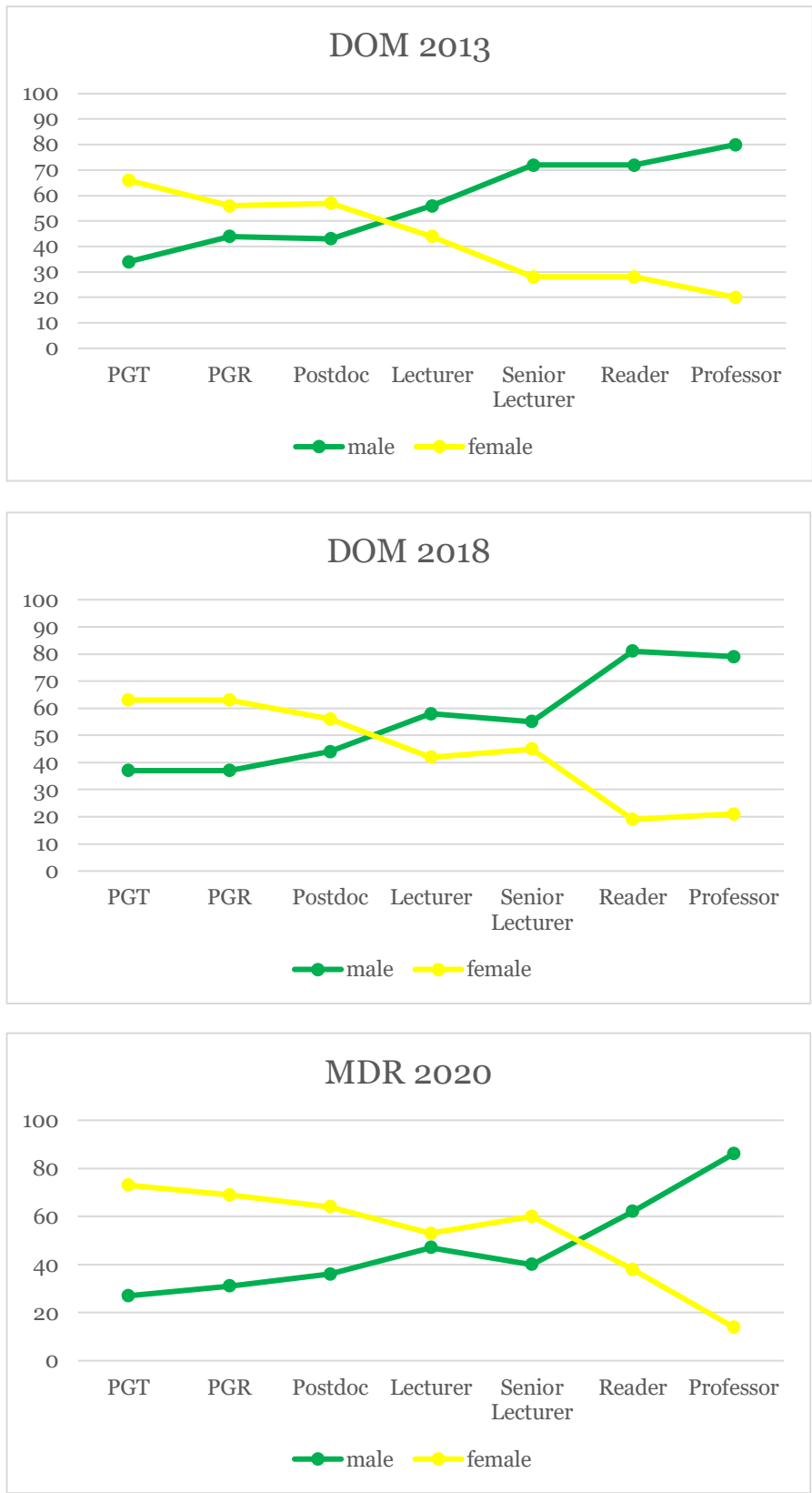
Table 2.1 summarises the gender split by job family in the new dept MDR with comparator columns for our parent Department of Medicine (which was much larger with over 1000 members of staff, and is now disbanded) and parent Department of Surgery and Cancer (which still exists but is smaller). We will monitor and develop actions relating to the under representation of men on some of our taught courses (ACTION PLAN 2.1)

JOB FAMILY	New Dept MDR					Former Dept DoM					Former Dept DoSC				
	total	women	men	% women	% men	total	women	men	% women	% men	total	women	men	% women	% men
Non Clinical Academic and Research	119	65	55	55	45	378	185	193	49	51	220	109	111	50	50
Clinical Academic and Research	80	39	41	49	51	181	78	103	43	57	158	59	99	37	63
Professional, Technical and Operational	118	91	27	77	23	300	213	87	71	29	231	154	77	67	33
Postgraduate Taught Students	173	126	47	73	27	914	576	338	63	37	449	229	220	51	49
Postgraduate Research Students	280	194	76	69	31	281	176	105	63	37	329	177	152	54	46
TOTAL	770	515	246	67	32	2054	1228	826	60	211	1387	728	659	52	48

**Table 2.1: Overview of staff breakdown by broad job type in the new Department of Metabolism, Digestion and Reproduction (MDR). Comparator data is given for the former Departments of Medicine (DoM) and Surgery & Cancer (DoSC), both of which were 2018 Silver awardees and which contributed to our new make-up. We are pleased that the reorganisation has even further improved gender balance of academic and research staff members.**

The traditional “scissors diagram” representing academic career trajectory for MDR compared with the former DoM is shown in Figure 2.4. Pleasingly, the trend established at the start of our engagement with Athena in 2013 continues. **As a direct result of our Athena SWAN activities, with a particular focus on supporting mid-career women rise the ranks, we are seeing a closure of the scissor blades up to Reader level.**

**Figure 2.4: Traditional “scissors diagram” representing the leaky pipeline for female academics. We show staff breakdown in 2013 (former Department of Medicine, DOM), through to our latest figures for MDR, demonstrating the impact of Athena SWAN “closing the blades”.**



***There are no major differences in the number of staff members on different contract types since the reorganisation.***

Table 2.2 summarises the percentage of our staff members on either open-ended (versus fixed term) or part time (versus full time) contracts. There are no worrying gender imbalances, or obvious variation from parent levels. We have an Action Plan to investigate these contracts in more detail to understand to what extent equivalence of proportions eg amongst clinical academics, is a true reflection of best practice (ACTION PLAN 5.5)

<b>Job family</b>	<b>% women on open-ended contracts</b>	<b>% men on open ended contracts</b>	<b>% women on part time contracts</b>	<b>% men on part time contracts</b>
Non-clinical Academic	89 (92)	96 (83)	11	12
Non-Clinical Research	19 (27)	27 (34)	9	16
Clinical Academic	70 (81)	80 (87)	24	20
Clinical Research	0 (13)	0 (12)	15	6
Professional, Technical and Operational	48 (63)	55 (59)	18	3

**Table 2.2: Overview of job family breakdown by contract type or part time status in the new Department of Metabolism, Digestion and Reproduction (MDR). Where available, a comparator percentage from the former Department of Medicine is shown in brackets. No clinical researchers are currently on open-ended contracts since they are all doctors in training who need to return to clinical training after completion of a period of research.**




### 3. THE SELF-ASSESSMENT PROCESS

Recommended word count: 1000 words


- (i) details of how the self-assessment team has changed over the restructuring





Our new MDR People and Culture Committee (PCC), which encompasses our Athena SWAN SAT but is also committed (in our formal terms of reference) to engage across College and beyond on broader issues including Race, Disability, LGBT matters, Widening Participation and the global culture and career development opportunities afforded by our department to all.


**Table 3.1: Department of Metabolism, Digestion and Reproduction (MDR) People and Culture Committee (PCC).**





<i>Member</i>	<i>Affiliation (former dept in brackets)</i>	<i>Major areas of interest</i>	<i>Statement</i>
<p><i>Professor Dame Lesley Regan</i> <i>Professor of Obstetrics and Gynaecology</i></p> 	<p><i>Division of IRDB (DOSC)</i></p>	<p><i>Athena Lead for DOSC (Bronze 2015, Silver 2018), founding co-Lead for MDR</i></p>	<p><i>I strongly support workplace equality and diversity and actively promote equal opportunities for women in academia and introduced the mentorship program</i></p>
<p><i>Dr Vicky Salem</i> <i>Senior Clinical Lecturer and Consultant Endocrinologist</i></p> 	<p><i>Division of Diabetes, Endocrinology and Metabolism (DOM)</i></p> <p><i>Moving to Dept Bioengineering in November 2020</i></p>	<p><i>Athena Lead for DOM (Silver 2014 and 2018), founding co-Lead for MDR</i></p>	<p><i>I am passionate about promoting women in academia and reminding people of all the wonderful opportunities that being involved in the Athena mission has brought me</i></p>
<p><i>Yasmin Abdi</i> <i>Department Operations Assistant</i></p> 	<p><i>MDR centre (DoM)</i></p>	<p><i>PTO, data management</i></p>	<p><i>I'm proud to be part of the MDR team that has really galvanised our shared commitment to fighting inequalities</i></p>



<p><i>Toby Athersuch</i> <i>Senior Lecturer</i></p> 	<p><i>Division Bioinformatics</i>  <i>(DOOSC)</i></p>	<p><i>Athena, EDI, Societal Engagement Champion</i></p>	<p><i>As a student-turned-academic at Imperial, I have witnessed the recent impact of Athena SWAN; I am delighted to be able to help contribute to this transformation.</i></p>
<p><i>Veronique Azuara</i> <i>Reader in Stem Cell Biology</i></p> 	<p><i>Division of Reproductive and Developmental Biology (IRDB)</i>  <i>(DOOSC)</i></p>	<p><i>EDI/People &amp; Culture reps at Departmental Executive and Senior Management Board meetings; specific interest in early career development and mentoring on leadership and research strategy.</i></p>	<p><i>Over the years I have developed a genuine interest in developing others. I mentor research staff and younger PIs as part of our FoM Mentor Network and externally. This long-term investment in College makes sense to me since this is where I want to progress my career.</i></p>
<p><i>Dr Suzanne Barr,</i> <i>Senior Clinical Teaching Fellow</i></p> 	<p><i>MDR</i>  <i>(NHLI &amp; DOM)</i></p>	<p><i>Widening access in STEM Higher Education and in particular gender equity</i></p>	<p><i>Advocate for EDI and in particular gender equity in Higher Education. As a parent to two young children I also have first-hand experience of the additional challenges women face in academia</i></p>
<p><i>Ines Cebola</i> <i>Advanced Research Fellow</i></p> 	<p><i>Division of Systems Medicine</i>  <i>(DOM)</i></p>	<p><i>Mid career development, overseas inductions, outreach</i></p>	<p><i>I am strongly committed to promote and support other researchers, especially early career researcher, in their pursuit of equal opportunities in academia.</i></p>

<p><i>Leah Grey</i> <i>MDR Staffing Coordinator</i></p> 	<p>MDR (DOM)</p>	<p>PTO working group DATA management</p>	<p><i>I am proud to be contributing toward our EDI remit since joining Imperial in 2017.</i></p>
<p><i>Stephen Franks</i> <i>Clinical Professor of Reproductive Endocrinology</i></p> 	<p>IRDB, Section of Reproductive Biomedicine (DOCS)</p>	<p>REF</p>	<p><i>I have always been a strong advocate of equality in the workplace. I believe in supporting my colleagues in managing their careers and I am proud to be part of the mentorship scheme.</i></p>
<p><i>Matt Lewis</i> <i>COO Phenome Centre</i></p> 	<p>Division of Systems Medicine and National Phenome Centre (DOCS)</p>	<p>Team science, staff scientists and flexible working advocate</p>	<p><i>I am an advocate for flexible working as it contributes to the sustainability and performance of teams and the work/life balance of individuals. My strong focus is on developing positive, communicative and flexible work culture..</i></p>
<p><i>Jia Li</i> <i>Senior Lecturer</i></p> 	<p>Division of Digestive Diseases (DOCS)</p>	<p>Diversity, equality and inclusion; work-life balance</p>	<p><i>I am interested in promoting work-life balance for academics' wellbeing.</i></p>

<p><i>Victoria Male</i> <i>Sir Henry Dale Fellow and Lecturer</i></p> 	<p><i>Division of Pregnancy, Parturition and Prematurity,</i> <i>(DOSC)</i></p>		<p><i>My interest is finding solutions to the challenges faced by early and mid-career researchers trying to balance science with family responsibilities and developing new ways to acknowledge contributions that are often underappreciated.</i></p>
<p><i>Aldara Martin Alonso</i> <i>PhD student</i></p> 	<p><i>Division of Diabetes, Endocrinology and Metabolism</i> <i>(DOM)</i></p>	<p><i>Research Degrees Student Representative at MDR, PhD student in Endocrinology &amp; Investigative Medicine</i></p>	<p><i>I am particularly interested in supporting female PhD students to progress and achieve a sustainable career in academia.</i></p>
<p><i>Kevin Murphy</i> <i>Professor of Endocrinology and Metabolism</i></p> 	<p><i>Division of Diabetes, Endocrinology and Metabolism</i> <i>(DOM)</i></p>	<p><i>Admissions Tutor for Widening Participation in UG Medicine, Director of Postgraduate Studies (Research) across the 4 Depts that previously made up DoM.</i></p>	<p><i>I'm interested in widening participation across UG and PG studies. I designed and am academic lead for Pathways to Medicine, our UG widening participation in medicine programme co-funded by the Sutton Trust, and for our new Medical Schools Council WP summer school programme.</i></p>
<p><i>Marianna Norton</i> <i>Postdoctoral Research Assistant</i></p> 	<p><i>Division of Diabetes, Endocrinology and Metabolism.</i> <i>(DOM)</i></p>	<p><i>Post-doc representative for the Division of Diabetes, Endocrinology and Metabolism.</i></p>	<p><i>Helping voice the concerns and needs of PhD students and post-docs in the division since 2015 with the aim of developing a work environment we can all excel in. First as a PhD student representative and now a post-doc representative.</i></p>

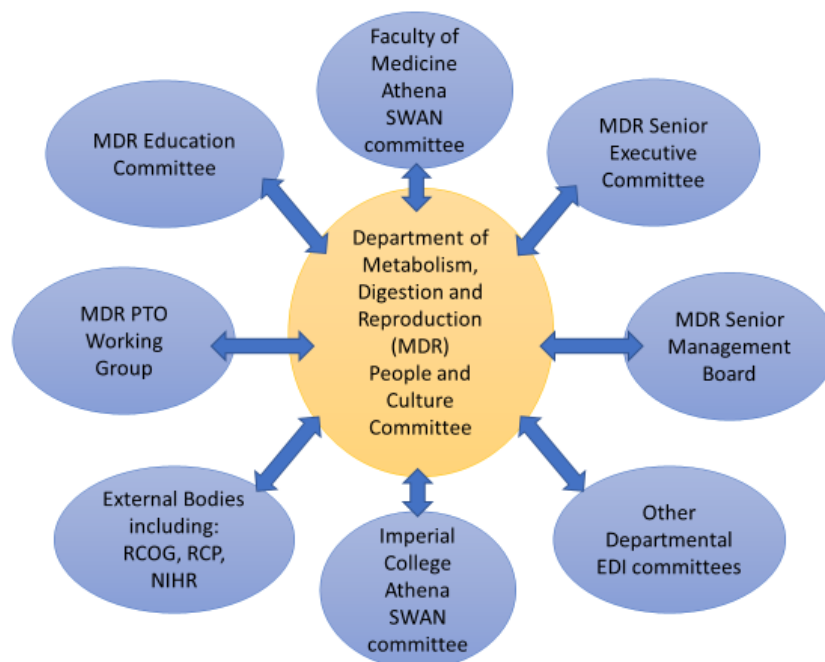
<p><i>Bryn Owen</i> <i>Non Clinical Lecturer</i></p> 	<p><i>Division of Diabetes, Endocrinology and Metabolism</i>  <i>(DOM)</i></p>	<p><i>Mid career engagement and a new dad with a partner also in academia</i></p>	<p><i>I've been at Imperial as an undergraduate, postgraduate, and member of staff. I've seen a lot of change in the Faculty, and I know that we can achieve more.</i></p>
<p><i>Alejandra Thomas</i> <i>Senior Lecturer</i></p> 	<p><i>Division of Diabetes, Endocrinology and Metabolism,</i>  <i>(DOM)</i></p>	<p><i>Mid career engagement</i></p>	<p><i>Joined the department in 2015 as Senior Fellow, then Lecturer and now Senior Lecturer. Strongly support equal opportunities for women, parents and minorities in academia. Mum of 2, full time researcher and MSc coordinator</i></p>
<p><i>Joanna Thompson</i> <i>Departmental Manager</i></p> 	<p><i>MDR</i>  <i>(former Deputy Departmental Manager DOM)</i></p>	<p><i>PTO lead</i></p>	<p><i>An integral part of my role is helping to shape the culture in the Department. As a working parent of four teenagers, I have been able to take advantage of the flexible working opportunities that Imperial College provides.</i></p>
<p><i>Mark Thursz</i> <i>Clinical Professor of Hepatology and Head of Department</i></p> 	<p><i>MDR, Head of Department</i>  <i>(Former HoD DOSC)</i></p>	<p><i>Departmental Culture change</i></p>	<p><i>Addressing inequalities of opportunity because of gender, race or disability is fundamental to creating a thriving community that delivers truly relevant and world-class research. Our PCC is fully empowered to help make that happen.</i></p>

<b>ADVISORY MEMBERS</b>	<i>These regular attenders of our People and Culture Team meetings have important roles at Faculty and College level to support EDI initiatives. They provide essential knowledge and bridges with our broader Athena/EDI community.</i>	
<i>Rob Bell</i>	<i>Imperial College London Athena SWAN Co-ordinator</i>	<i>I act as a link between departments and central College, advising on good practice and raising awareness of activities. I volunteer as an Athena SWAN assessor.</i>
<i>Nicholas Wood</i>	<i>Faculty of Medicine Centre – Programme Manager (Data)</i>	<i>I’m committed to leveraging data approaches to identify and overcome barriers to achieving a just and diverse working environment.</i>
<i>Benjie Coleman</i>	<i>MDR Communications Manager</i>	<i>I am proud to support our Department in being a welcoming and equitable place to work, and help communicate the great work our People and Culture Committee does for the advancement of equality, representation, and progression, for all.</i>
<i>Liz Elvidge or Fiona Richmond</i>	<i>Organisational Development and Inclusion</i>	<i>Representing the award winning Postdoc and Fellows Development Centre and our Learning and Development centre we work to consolidate and promote career development support across the College.</i>
<i>Christopher Peters</i>	<i>Athena Lead and Chair of Culture and Engagement Committee for the new Department of Surgery and Cancer</i>	<i>I am delighted to act as a liaison between the Surgery and Cancer and MDR Departments which have many similar aims. This has allowed us to work together on joint projects for the benefit of our staff and students.</i>
<i>Paula Phillips</i>	<i>Faculty of Medicine Centre - Institutional Affairs Manager</i>	<i>I have an HR background and am a Chartered Member of the CIPD. I have been committed to improving the world of work for all staff in the Faculty of Medicine for the past 18 years.</i>

The new MDR People and Culture committee (PCC) sprang into action in the same month as the department came into existence (August 2019). Our two “parent” departments held Silver Athena SWAN awards: the Department of Medicine (DOM) Bronze 2012, Silver 2014 and Silver 2018 and the Department of Surgery & Cancer (DOSC) Bronze 2016 and Silver 2018. The Athena lead for the former DoM, Vicky Salem, and the Athena lead for the former DOSC, Lesley Regan, came together to form the new MDR People and Culture Committee at the request of the HoD. This was in order to carry over know-how and to help fully embed our Athena heritage from the outset.

An open call was then sent out to all members of the new MDR department to join the nascent PCC (Table 3.1) and we are delighted that 8 of the new members have not had any previous roles on equality and diversity committees. As before, over a third of our People and Culture committee are male. We have ensured representation from our PhD student, postdoc and teaching communities, something that was previously lacking and was on the DoM Action Plan (ACTION PLAN 1.1). We will engage our professional, technical and operational (PTO) working group on matters specific to their experience (ACTION PLAN 1.2). Our PCC members link into many other EDI-focussed committees across the college and our Athena Lead has a standing slot at Senior Management Board (Figure 3.1).

**Figure 3.1: Diagram to show how members of our People and Culture Committee (PCC), which homes our departmental SAT, link in and share membership with other committees.**



(ii) details of any equality impact assessment undertaken

Plans for the reorganisation of the Faculty of Medicine were first communicated in August 2018 by the incoming Dean, Professor Weber. This was undertaken in line with College change management policy, and staff were consulted and kept informed throughout. The Departments received at least monthly updates thereafter by email as well as real-time updated information eg new departmental organograms on the website. Roadshows with senior faculty leadership were regularly undertaken at all sites to provide updates and listen to audience questions. The Faculty confirmed their commitment to “promote equality and diversity in the reorganisation exercise”.

There were no redundancies. Nevertheless, MDR and the PCC still recognise that the reorganisation may have had some more subtle impacts that could feasibly be gendered. The first approved Action of the new PCC was to send out a biannual MDR (departmental) Athena survey in mid 2020. This departmental survey will occur every other year alternating with the wider College staff survey in order to gain more relevant information about our departmental culture and SWAN issues. We intended the first permutation of this survey to also include a section regarding perceptions/impact of the reorganisation (SEE ACTION PLAN 1.3). However, we have decided to put this on hold due to the great disruption caused by COVID-19.

The PCC has studied the results of the MDR COVID-19 Wellbeing Survey (see the final section “Other Information”). This college level survey does not allow for breakdown of responses by gender. The PCC notes international reports that the impact of the COVID-19 Pandemic on academic output may fall particularly hard on women, especially those with caring responsibilities. As such we will survey the particular impact of COVID-19 on our staff and student members with a view to looking at gender disparities. An impact statement will also be taken into account at promotions. (ACTION PLAN 1.4)

- (iii) details of how the principles of the Athena SWAN Charter have been considered and embedded during the restructuring process

The ten Athena principles are core features of the MDR PCC and we have worked from the outset to ensure that they and previous Athena best practice initiatives have been carried over and firmly embedded in our new department. Table 3.2 highlights a few of the areas in previous Silver awards held by our parent departments and how they have been embedded.

**Table 3.2: Examples of how Athena (Silver) Best Practice was carried over and embedded from our parent departments (DoM and DOSC) into the new Department of MDR. In Column 1, we have made reference to where each of these particularly applies to Principles 1-10 of the Athena SWAN Charter.**

Athena Area	Old depts (DoM and DOSC)	New dept (MDR)
<p>Data</p> <ul style="list-style-type: none"> <li>Principle 3 – data monitoring is vital to ensure an understanding of where inequalities exist</li> </ul>	<ul style="list-style-type: none"> <li>area of relative weakness</li> </ul>	<ul style="list-style-type: none"> <li>Dedicated MDR data manager for PCC (SAT member LG)</li> <li>Centralised data support for Athena SWAN from Faculty (SAT member NW)</li> </ul>
<p>Communications</p> <ul style="list-style-type: none"> <li>Principle 1, 8, 9 – communications are the most important conduit for embedding our cultural attitudes</li> </ul>	<ul style="list-style-type: none"> <li>regularly audit the gender balance of our images</li> <li>expand good news stories about ALL members of staff</li> </ul>	<ul style="list-style-type: none"> <li>Communications manager (SAT member BC)</li> <li>Established PCC section on dept website with links to Imperial-wide EDI activities</li> <li>Good news stories highlighting our successful women (see Section 4.6)</li> <li>Regular webinars with new HoD allowing open Q+As, including one with the Athena Lead.</li> </ul>
<p>Promotions</p> <ul style="list-style-type: none"> <li>Principles 2, 3, 5, 9 – sustainable structural changes eliminate advancement biases against women</li> </ul>	<ul style="list-style-type: none"> <li>A major success from both DoM and DOSC applications</li> <li>Overhauled the process so that it was no longer reliant on self-application</li> </ul>	<ul style="list-style-type: none"> <li>ALL academic staff members are considered and those not ready are identified for specific career development support.</li> <li>This year MDR promoted three women and one man (see Section 4.1)</li> </ul>
<p>Mentoring</p> <ul style="list-style-type: none"> <li>Principles 1, 2, 5 – mentoring is a crucial element of career development support but such relationships sometimes need help to develop</li> </ul>	<ul style="list-style-type: none"> <li>2014 DoM mentoring scheme as part of its Athena initiatives.</li> <li>This has grown and is now College wide</li> </ul>	<ul style="list-style-type: none"> <li>Refreshed advertising and pairings for the new MDR.</li> <li>departmental administrator for the mentoring scheme (SAT member LG)</li> <li>Central support for uptake and quality monitoring (SAT member NW)</li> <li>Commitment to increased uptake (see ACTION PLAN 3.6)</li> </ul>



Athena Area	Old depts (DoM and DOSC)	New dept (MDR)
<p>Recruitment</p> <ul style="list-style-type: none"> <li>Principles 2, 3, 5, 9 – sustainable structural changes eliminate recruitment biases against women</li> </ul>	<ul style="list-style-type: none"> <li>A major Athena success for both DoM and DOSC (above and beyond College-level guidance) was to actively invite female candidates to apply</li> <li>JDs specifically mentioning possibility of multiple hires in academic job share roles</li> </ul>	<ul style="list-style-type: none"> <li>No recruitments yet in MDR but this process is ready to be applied</li> <li>All JDs will be vetted for gender neutral language and options for flexible working (SAT member JT).</li> </ul>
<p>Senior/top down support for Athena SWAN</p> <ul style="list-style-type: none"> <li>Principle 8</li> </ul>	<ul style="list-style-type: none"> <li>Athena Leads have a standing (top spot) report in the Senior Management Board (SMB) meetings</li> </ul>	<ul style="list-style-type: none"> <li>Continued direct integration with SMB</li> <li>HoD attends all PCC meetings to ensure immediate sign off on decisions</li> <li>Explicit job roles for all senior academics highlighting commitment to career development</li> </ul>
<p>PRDP (personal review and development plan)</p> <ul style="list-style-type: none"> <li>Principles 2,3,5,9 – regular conversations about career development and what can be done to help transition to the next goal</li> </ul>	<ul style="list-style-type: none"> <li>DOM PRDP completion rate was 73%</li> </ul>	<ul style="list-style-type: none"> <li>HoD commitment to 100% completion</li> <li>We are already at 83%</li> <li>We will audit the quality of these meetings in 2021/22 (See ACTION PLAN 4.2)</li> </ul>
<p>Gender pay gap</p> <ul style="list-style-type: none"> <li>Principle 4</li> </ul>	<ul style="list-style-type: none"> <li>DoM was the only member of the FoM to report on this in our 2018 Silver Application</li> </ul>	<ul style="list-style-type: none"> <li>PCC lead Prof Dame Lesley Regan and dept manager have undertaken to investigate gender pay gap in full in early 2021 with HoD permission to publish the top line results.</li> </ul>
<p>Support for Research grants</p> <ul style="list-style-type: none"> <li>Principle 2</li> </ul>	<ul style="list-style-type: none"> <li>DoM and DOSC provided data to show that women proportionately did as well as men on grant application success rates with targeted support eg interview practice</li> </ul>	<ul style="list-style-type: none"> <li>We will continue to collect this data on research grant support, particularly for mid career fellowships, and offer targeted support where necessary.</li> </ul>

Athena Area	Old dept (DoM and DOSC)	New dept (MDR)
Postdoc champions <ul style="list-style-type: none"> <li>• Principle 5</li> </ul>	<ul style="list-style-type: none"> <li>• Post doc away days</li> <li>• Post doc funding to cover childcare for conferences</li> </ul>	<ul style="list-style-type: none"> <li>• PCC senior academic member VA is postdoc champion.</li> <li>• Established an MDR postdoc group and mailing list</li> <li>• Postdoc representation on PCC</li> <li>• Several events already organised (see Section 4.3)</li> </ul>
Intersectionality <ul style="list-style-type: none"> <li>• Principle 10</li> </ul>	<ul style="list-style-type: none"> <li>• area of relative weakness</li> </ul>	<ul style="list-style-type: none"> <li>• We are the first department to host a Black Lives Matters seminar (see Section 4.6)</li> <li>• Commitment to staff engagement process looking at issues of intersectionality with race and gender identity (See ACTION PLAN 1.5)</li> </ul>

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

Once this re-organisation submission is complete, we will put out an open call for a new Athena Co-Lead in November 2020, with a 6 month period of handover. We will invite new members to join the committee by open call annually and leadership of the PCC will be reviewed (and opened up to reselection) every 5 years (ACTION PLAN 1.1). As agreed in our September 2020 PCC meeting our primary staff consultation goals for 2021 are our staff culture survey (ACTION PLAN 1.3, 1.4) and specific Focus Groups intersecting with the Faculty's work on race and ethnicity (ACTION PLAN 1.5)

(v) plans for future Athena SWAN award applications

If successful in this application for Silver, we believe that our department's commitment and new infrastructure place us in a position to apply for a Gold award in 2023. We will be monitoring quantitative data annually and will use qualitative data from the College-wide Staff Survey (2021, 2023) and our own planned COVID-impact survey and Athena survey (2021). Our major strategic aims for this will be:

1. 100% uptake of annual appraisal as a meaningful platform for career development discussions and improved working culture of support and transparency
2. Outstanding mentoring and mid-career support structures
3. Zero tolerance on bullying and harassment.

## 4. SUPPORTING AND ADVANCING CAREERS

Recommended word count: Bronze: 3500 words; Silver: 4500

### 4.1. Key career transition points: academic staff

#### (i) Recruitment

***Faculty and College have established procedures for advertising, shortlisting and appointing which promote gender equality.***

The Faculty has been keen to ensure that the reorganisation has been used as an opportunity to drive equality in recruitment practice. For example, we use Textio (an augmented writing tool proven to improve the diversity of applicants) and consider specific networks and organisations to help widen the audiences for our job adverts. It is also expected that all recruitment panels be gender balanced (conveners are prompted to arrange this by HR) and trained (ACTION PLAN 5.1).

In addition to our Silver Athena logo, our parent department of Surgery and Cancer became the world's first academic or healthcare organisation to be awarded **Mumsnet** Family Friendly accreditation in June 2018. This was subsequently adopted Faculty Wide.

***The new dept of MDR will continue to implement best practice (in addition to Faculty and College guidance) from its parent departments, particularly search panels and the explicit development of job-share options***

Our parent department of Medicine Silver submission showcased examples of shared appointments that resulted from actively approaching potential female candidates who might not otherwise have put themselves forward. Since the reorganisation, there has been no academic recruitment in MDR but we are committed in future rounds to:-

1. identify and encourage potential candidates from under-represented groups (Action Plan 5.3)
2. offer job share opportunities (Action Plan 5.4).

#### (ii) Induction

There have been no substantive changes to FoM induction policy or process since the reorganisation. All new starters at Imperial are inducted through the Imperial Essentials programme, which provides key information that new staff need to know in the first six months. All new staff are also invited to Imperial Insights, a College run half-day induction event.

In addition the Dept MDR has engaged on three additional improvements to our induction procedure for which we aim to demonstrate clear evidence of further impact in our next Athena application:

1. Welcome videos from our HoD, Athena Lead and Departmental Manager with a heavy focus on the expectations of departmental working culture (ACTION PLAN 5.7).

2. MDR “probation forms” which clarifies and formalises the path to consolidated appointment. The appointees will have additional support from an allocated academic advisor (internal or external to the Department) as well as an academic mentor (within the Department). They will have an annual review with their line manager and the academic advisor as well as a more formal mid-probation review with the HoD, allowing for any issues to be brought forward and dealt with, ensuring successful appointment at the end of the probation (ACTION PLAN 5.6).

(iii) Promotion

***The new dept of MDR will engage with FoM on a more transparent recruitment model for internal leadership positions***

We listened to the feedback from one of our Athena consultation exercises that certain (particularly senior) positions appeared to be issued in an “anointed not appointed” style.

The Faculty has now adopted the use of the open expression of interest (EOI) recruitment model. This was utilised successfully when our HoDs were approached to apply for appointment and other Faculty level academic leadership positions such as Campus Directorships. MDR has engaged with this and moreover we have opened up our departmental senior leadership roles to experienced non-professorial academics, as an effective means of widening the diversity of our applicant pool and providing more women with leadership opportunities (ACTION PLAN 3.1). This includes: a new Head of Division (Professor Maud Lemoine), the role of Director of PGT Education (Professor Kate Hardy), EDI Champion on the Senior Executive Committee (Dr Veronique Azuara) and Director of Research Strategy (Dr Aylin Hanyaloglu).

***A major success of our parent departments’ promotion policies (driven by previous Athena Action Plans) was to ensure that ALL staff members are considered annually for promotion. This has already been adopted by MDR.***


Since its inception MDR has completed one round of promotions. The academic promotions procedure has been clarified and a single point of contact established (SAT member LG). Clear promotion guidelines were made available to all eligible staff. Documents and reminders were sent out on a regular basis.

Imperial College London

Home College and Campus Science Engineering Health Business

### Women in MDR celebrated in the latest round of academic promotions

by Benjamin Coleman  
02 September 2020



**The Department of Metabolism, Digestion and Reproduction is proud to announce four academic promotions, three of which are women.**

Well done to Professor Maud Lemoine, a Professor and Honorary Consultant in Hepatology; Professor Siwan Thomas-Gibson, a Professor of Practice in gastrointestinal endoscopy; Dr Alejandra Tomas Catala, a Non-Clinical Senior Lecturer; and Professor Amer Sam, a Professor of Education and Consultant Endocrinologist.

**FEATURED**  
 Professor Maud N Lemoine  
 Department of Metabolism, Digestion and Reproduction  
 Professor Amer Sam  
 Faculty of Medicine Centre  
 Dr Siwan Thomas-Gibson  
 Department of Surgery & Cancer  
 Dr Alejandra A D Tomas Catala  
 Department of Metabolism, Digestion and Reproduction

Promotions documentation explicitly took into account administration, pastoral, outreach, mentoring and diversity activities, as well as caring responsibilities or parental leave. Quality of research was emphasised over quantity and teaching contribution was emphasised especially at lower grades, while research, mentoring and international reputation were emphasised at higher grades. Importantly the MDR promotion committee included all Divisional Leads, who had been instructed to consider ALL of the academics in their groups. The panel also included academic reps (Senior Lecturer and Reader) and an Athena SAT representative (ACTION PLAN 3.4). Four applicants (3F and 1M) were

supported by the department for consideration at the arbitrating central promotions panel and all were successful (see insert). Those identified as being close but not quite ready for promotion (6M and 1F) have received offers of personalised support to help them strengthen their applications for next/subsequent rounds.

(iv) Department submissions to the Research Excellence Framework (REF)

There have been no changes to the processes or policy associated with submissions to the REF associated with the reorganisation. As presented in our recent DoM Athena submission, we had excellent (proportional) gender representation in our REF submissions with excellent consideration of parental leave breaks and flexible working. We have appointed a member of our SAT team (Professor Steve Franks) to monitor this for MDR moving forward.

## 4.2. KEY CAREER TRANSITION POINTS: PROFESSIONAL AND SUPPORT STAFF

### (i) Induction

Professional, Technical and Operational (PTO) job roles range from administrative support, service, management and specialist computational and technical roles, providing key support to academic and research staff. We recognise that they are the lynchpin of our academic mission. There have been no substantive changes to induction policy or process since the reorganisation. The MDR PTO Working Group aims to develop an updated induction pack more specific to our new department and job families as well as welcome videos (see ACTION PLAN 1.2 and 5.8).

### (ii) Promotion

There is no regular promotion process for PTO staff as there is for Academic staff. PTO staff have two options to move to more senior positions, either Job Level Review (JLR) or application to internal or external vacancy, both of which are strongly encouraged and supported within the Department.

The reorganisation provided an opportunity to create different PTO posts, enabling the promotion of staff across different operational areas. There were no job losses or downgrades.

The Faculty was committed to uphold open and transparent processes for recruitment into these new positions, that were advertised across the Faculty but limited to staff already within the FoM who would be impacted by the reorganisation. Appointment panels were held to ensure the recruitment process was conducted fairly. Individual meetings were held with unsuccessful candidates to provide them with constructive feedback.

Within MDR, we have successfully seen the following PTO 'promotions':

- Joanna Thompson (F) - Deputy Departmental Manager move to Departmental Manager
- Mike Johns (M) - Lab Manager from another department (NHLL) promoted into the Senior Lab Manager role for MDR

MDR also champions and encourages cross Departmental transfer to allow progression and the following staff have moved to new roles from/to another Department:

- Kenny Oniti (F)– Operations Trainee moved into a permanent position as a Research Operations Administrator in Life Sciences
- Claire Wade (F) – Operations Trainee moved into a permanent post as Course Administrator for the MSc in Human Reproductive Biology
- Chris Sanders (M) – Division Manager, moved to Research and Finance Manager in the Department of Bioengineering
- Chris Bamikole (M) was seconded into a Lab Manager post in MDR from the Department of Life Sciences for a 9-month period, after which we were able to turn this into a substantive post

The JLR exercise takes place three times a year. To be successful for JLR, applications must demonstrate that the duties and responsibilities of a role has grown significantly such that the position itself should be upgraded. Applicants are supported throughout the process from their line manager and local administrative teams, helping them strengthen their applications. Unsuccessful candidates are provided feedback to improve their applications for the next eligible round and to continue to submit in the current round. This year this situation applied to one (F) member of staff.

A major finding of the PTO consultation project that was commissioned for our previous (DOM) Athena application was that PTO staff wanted more opportunities to take up training and development that would increase their chances of successfully progressing to a higher-grade role. A lateral move between different roles within the PTO family is now recognised to be beneficial to career development with the increased breadth of new skills giving greater opportunities for advancement. MDR are looking to secondment opportunities as a way to support progression of individuals (see ACTION PLAN 3.5)

PTO staff can also be rewarded through the annual Pay Relativity Exercise, which is used to recognise both one-off and sustained exceptional contributions from individuals, to address significant misalignments of an individual's salary in comparison to others in College who hold a similar role, and to aid retention of staff based on external benchmark data. In MDR, 7 PTO staff were put forward in the 2019 Pay Relativity Exercise, all of whom were female and successful.

#### **4.3. Career development: academic staff**

##### **(i) Training**

New Heads of Department are committed through their role description 'to foster an environment where staff are encouraged to develop their careers and seek appropriate training and mentoring'

A review of the EDI training undertaken in the new MDR revealed

- 27 people undertook Active Bystander Training
- 18 did the online EDI module
- 15 attended a course on how to confront Bullying and Harassment
- 17 attended mental health awareness courses
- 23 attended training for recruitment panels, which incorporates diversity awareness
- 28 have completed Unconscious Bias Training (UBT)

Overall 27% of all of our staff (academic and PTO) had undertaken at least one EDI related training course since our last (parental departments) application. The MDR PCC, with active participation and support from the departmental senior management board, is committed to increasing this. We will start by mandating a bespoke online UBT course that we have commissioned for our new department (ACTION PLAN 5.2).

(ii) Appraisal/development review

***The reorganisation provided an opportunity to improve our PRDP processes***

All staff have an annual Personal Review and Development plan (PRDP) with their line manager. In this meeting, the staff Portfolio of Activity is reviewed, an ongoing overview of all activities, outputs, and plans. All activities are recognised as part of holistic PRDP review. This includes contributions to EDI activities, clinical activities and other measures of esteem. The reorganisation process has not altered the overall framework for this.

Effective leadership commitment to PRDP was signalled as a key responsibility for Heads of Department, 'to ensure that all staff receive regular and effective appraisal.'

***The new Dept MDR is committed to 100% PRDP completion and is providing guidance to ensure that the quality of the process is high***



**I've had mine, have you had yours?  
Personal Review and Development Plan (PRDP)**

The Department of Metabolism, Digestion and Reproduction is committed to creating a supportive, inclusive and highly motivated staff community. One of the ways we do this is through the annual Personal Review and Development Plan process (PRDP).

FoM and College have listened to the Athena committees and there is a global consensus that we should be using PRDP as a major platform to engage in regular, constructive, holistic and empowering discussions about career development.



## Testimonials

*MDR champions the PRDP process as a way of encouraging a frank, two-way conversation between staff and management. PRDPs can help increase employee's effectiveness, job satisfaction and longer-term potential. I found that working on my own PRDP gave me a great opportunity to consider the best ways of leading a new Department and effectively managing a larger team. I want everyone in the Department to have a similar positive experience to mine.*



*Professor Mark Thursz, Head of Department*

MDR is committed to a 100% PRDP completion goal (ACTION PLAN 4.1) with the HoD leading by example (see insert). PRDP forms have been reviewed in our SAT and we were satisfied that they are fit for purpose.

In fact the current postdoc specific form was developed as the result of a former completed Athena Action Plan and has since been adopted by other departments via the PDFC.

MDR clinical staff are currently completing their annual NHS appraisal but are not required to complete the College PRDP process. The FoM Board committee, with the support of all the HoDs, has agreed that in the future College employed clinical academics should also complete the College PRDP process. Thus the MDR PCC will ensure that every staff member is included for the 2021 PRDP round (ACTION PLAN 4.3).

It is important that PRDP is not a tick box exercise. In a SAT meeting dedicated to PRDP the MDR PCC has agreed to identify a dedicated staff coordinator for PRDP reminders and a central collection of data. We have added an option for people to opt in to the possibility of having their PRDP audited for quality, an exercise we will undertake in early 2022 (ACTION PLAN 4.2).

**We currently stand at 83% completion rate which is already a great improvement on the old DoM which was 74%**

### (iii) Support given to academic staff for career progression

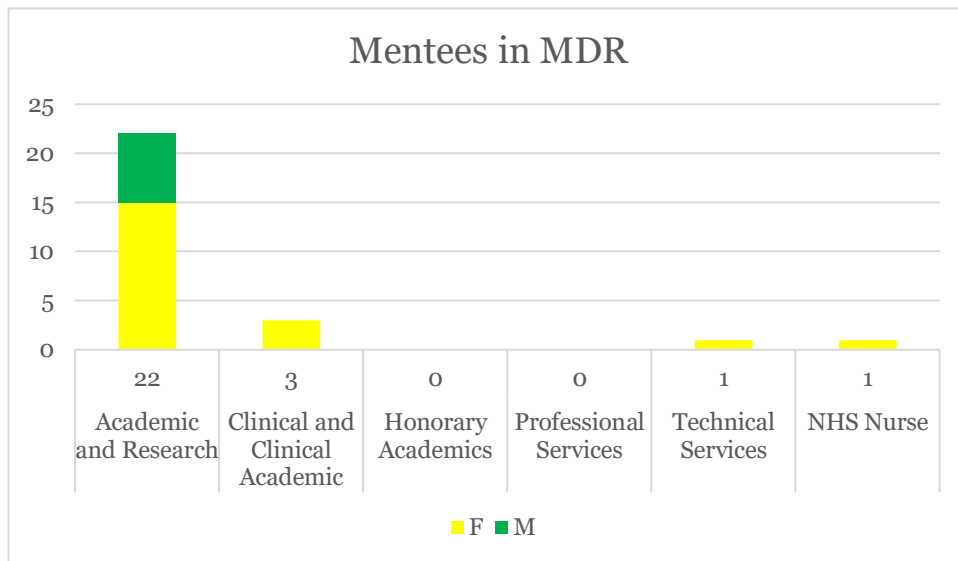
Support for career progression is now a central and explicit expectation of all of our line managers, academic or otherwise, in the MDR. This is exemplified by the job description of our HoD which includes: 'To ensure that all staff have access to mentorship and encourage them to seek a mentor.'

## MENTORING

In our parent department (DoM) Silver 2014 application we established a departmental Mentoring Scheme. Professor Regan also set up an extremely successful scheme in DOSC for their first Silver application. These successes prompted Faculty-wide uptake. The Faculty of Medicine worked with the college Learning and Development Centre to expand our parent departments' mentoring scheme to encompass all sections of the University. This is a major success of our Athena SWAN programme. This scheme is available to both academic and professional support staff. The Faculty provides administrative support when cross departmental matching is needed, to provide training for prospective mentors and to monitor quality and impact.

MDR SAT member Leah Grey administers our departmental mentor pairs. MDR currently has 27 active mentorship pairs (20/27 mentees are women). 21/27 mentors come from within our own department of which 70% are women. A breakdown of MDR mentees by gender and job family is given in Figure 4.1. We will ensure that our mentoring scheme is regularly advertised and refreshed (ACTION PLAN 3.6).

**Figure 4.1: Overview of MDR active mentoring pairs in November 2020. We will refresh and target increased uptake of mentoring opportunities by our next application**



### COACHING AND SPRINGBOARD

Imperial College offers a range of coaching options such as coaching training for managers, team coaching and coaching as a bespoke development opportunity. The Coaching Academy has a pool of 50 coaches across the College from a range of professional backgrounds. We will continue to highlight the coaching opportunities to increase the numbers involved at key career development stages (ACTION PLAN 3.3).

In MDR 8 women have recently engaged with the College’s Springboard Women’s Development Programme. In our last application we ensured that all of our female senior lecturers were offered the opportunity to attend the Academic Women’s Programme and this was associated with a 100% success at subsequent promotion rounds. MDR aims to ensure that these opportunities continue to be offered to all academic women from Lecturer position upwards (ACTION PLAN 3.3).

## POSTDOC CHAMPIONING

One of our PCC and SAT members (VA) also acts as postdoc champion for the MDR and an early achievement was to establish a postdoc working group, with elected reps for all Divisions and Campuses, two of whom also sit on our SAT. Other achievements include:

1. Monthly meeting between all postdoc reps and the postdoc champion to organise events and discuss concerns (Teams-based during lockdown).
2. Established mailing list for easy communications with all our postdocs:
  - a. Cascading information from PFDC (postdoc and fellow development centre)
  - b. Emails of support through COVID including links to broader support and wellbeing offerings
3. Information about teaching opportunities (ACTION PLAN 3.7)
  - a. Links to live Q+A sessions with the Provost and Dean for early career researchers
  - b. Faculty updates
  - c. Departmental newsletter
4. Reminding postdocs about their contractual right to 10 “development days”, with ideas of how to utilise them (ACTION PLAN 3.8)
5. Representation by a postdoc in Divisional management meetings.
6. A celebration of MDR’s postdocs with an online “Portraits” article (See Section 4.6).
7. Online seminar for our postdocs entitled “Diversity and Role of Women in STEM” delivered by Dr Liz Elvidge (17F and 2M attended)

### (iv) Support offered to those applying for research grant applications

The research strategy team structure was consolidated to provide support across the four new departments, bringing consistency in processes with dedicated research managers facing departments to ensure that they understand specific requirements of departments that they are looking after. Informal early internal review of major grants is both strongly encouraged and facilitated. In our last Athena application we showed that support was offered uniformly across grades and genders and that our female academics were proportionately slightly more successful than men. We also demonstrated particular success amongst mid-career women achieving their first independent fellowship.

MDR is committed to continuing to monitor this data.

#### 4.4. CAREER DEVELOPMENT: PROFESSIONAL AND SUPPORT STAFF

##### (i) Training

In line with our expectations for ALL staff we will encourage an increase in EDI training across our PTO community (ACTION PLAN 5.2)

##### (ii) Appraisal/development review

Consistent with our aspirations for the academic and research families, we aim to achieve 100% annual uptake of PRDPs in the PTO job families. Where some PTO members may have an academic as their reporting line manager, MDR will offer either mentoring or alternative PRDP opportunity with a person who is better qualified to understand the specific career development needs of the PTO job family (ACTION PLAN 4.4).

##### (iii) Support given to professional and support staff for career progression

The mentoring scheme has been enhanced and is now available to all departments to facilitate recruitment of mentors and matching them with mentees. This scheme is available to both academic and PTO staff, although in MDR only 1 PTO member is currently engaged with this. We will promote this (ACTION PLAN 3.6).

Departmental manager (and SAT member JT) has regular (weekly) one-to-ones with the team that directly report to her and MDR also has set up fortnightly PTO meetings for the broader admin team. In line with this, senior lab manager Mike Johns hosts a fortnightly meeting for all technical staff. Both have an open-door policy.

PTO staff members are regularly encouraged to attend training courses and participate in continued professional development. Whenever possible, staff are given permission to work flexibly to allow them to attend regular external educational courses. Below we provide a case report from the Section of Bioanalytical Chemistry, which homes a large number of technical staff members.

## CASE STUDY FOR PTO WORKING CULTURE –IMPERIAL PHENOME CENTRE



The MRC-NIHR National Phenome Centre (Section of Analytical Chemistry) is **open to the whole UK research community** (academic and industry) and offers a wide range of services in metabolic phenotyping on a collaborative project basis or as a fee-for-service offering. There are 19 staff members (11F) including 13 at Level 3 or 4 technical or professional services roles. We believe that **working to well defined and communicated objectives creates opportunity for constructive flexibility**

**servicing to accommodate lifestyle factors that are otherwise viewed as detractors from success in a demanding academic environment.**

**All staff** within the Phenome Centre work flexibly, not just parents and carers, provided two conditional prerequisites are met:

- clearly defined and communicated objectives
- dedicated staff who are committed to a high level of achievement in the workplace

The former prerequisite is a responsibility of the management staff, which must be regularly reviewed, acknowledged and affirmed by all staff (i.e. management must clearly relay objectives, and all staff must demonstrate clear understanding). Any staff failing to meet the latter prerequisite are coached, monitored and if necessary, performance managed. To date (eight years in operation), this has not been an issue, likely because a positive feedback loop predicated on the benefits and trust inherent in allowing flexible working has been established which fosters a self-sustaining positive team ethos with a constructively high bar for engagement.

Core working hours are (10am – 4pm), all staff are optionally welcome to a single working from home (WfH) day. We have constructed our team such that all technicians have a diverse workload which includes some administrative and computational/informatic work (i.e. technicians are vertically integrated in parallel workflows rather than horizontally integrated) which has ultimately proven to be a winning formula for staff development, integration, satisfaction, and productivity. This design concept ensures that even lab-based staff are able to work flexibly. As a result our response to COVID has been quite seamless!

We are proud of our staff retention success: More than half of the group of 18 staff members are original hires (with 8 years employment); four of our staff have transferred into the Centre from the academic Division (including graduating students). Of those who have left the group (only 8 members of staff), each has been for an advanced job opportunity (often outside of the UK, e.g. moving back home) and they have been supported by the Centre in doing so.

Imperial College London

Home College and Campus Science Engineering Health Business

### The Real Working Mums of Bioanalytical Chemistry

by Benjamin Coleman  
06 March 2020

As part of Women@Imperial week and International Women's Day, we met with Dr Maria Gomez-Romero to discuss her experiences of being a working mother.

In this interview, Maria, the Mass Spectrometry and Chromatography Manager in the Department of Metabolism, Digestion and Reproduction, dispels the stigma around flexible and home working, highlights the policies and tech that support new mothers at Imperial and underlines the benefits these policies are having on the working culture of the newly formed Section of Bioanalytical Chemistry.

FEATURED

Dr Maria Gomez-Romero  
Department of Metabolism, Digestion and Reproduction

Dr Matthew R Lewis  
Department of Metabolism, Digestion and Reproduction

MORE

Human Resources (HR)  
Department of Metabolism, Digestion and Reproduction

#### 4.5. Flexible working and managing career breaks

- (i) How has the reorganisation been communicated to those on a career break and what support will be available to them on return.

College policies related to parental leave were not impacted by the reorganisation and have not changed. In the new MDR there was only one staff member on parental leave during the time of the reorganisation:

Martha Hill-Cousins a PTO level 3b member of staff went on maternity leave in October 2018, shortly after the first communication around the reorganisation of the Faculty of Medicine had been announced. Prior to Martha going on leave, she had a meeting with her line manager to agree whether she would like to be kept informed of announcements relating to the reorganisation whilst on leave and her preferred mechanism for receiving these. Whilst on maternity leave an opportunity for a level 4 Division Manager role in a different Department was advertised and Martha successfully applied for this. Since her return to this permanent position she works part-time.

- (ii) Cover and support for maternity and adoption leave: before, during and after leave

Policies related to parental leave (before, during and after leave) were not impacted by the reorganisation and subject to the College's policies. We will ensure information about support for parenting (action 4a) and caring (action 4b) are consolidated on the departmental website.

Early on after our inception we had our first request for shared parental leave from Dr Ed Chambers. Ed is a Lecturer in our department and as part of a PCC recommendation we will ensure that the probation reviews of men returning from shared parental leave are extended. Ed has agreed to work with us to improve the visibility of our policies on shared parental leave and to ensure that both men and women returning from parental leave receive the support they deserve to continue successful academic careers (ACTION PLAN 3.9).

- (iii) Flexible working

There were no changes to existing flexible working policies as a result of the reorganisation. We will produce data for our next full application that unpick why there are an equivalent number of male and female clinical academics in our department on part time contracts (See Table 2.2 and ACTION PLAN 5.5).

The impact of the COVID-19 pandemic is discussed at the end of this application.

**Moving forward we hope that the working from home (WFH) experience will usher in a new departmental culture that promotes flexible working attitudes (See Section 4.4 iii).**

## 4.6. Organisation and culture

### (i) Culture

***At Faculty of Medicine level the reorganisation was designed to deliver a positive effect on culture.***

The reorganisation was driven by a desire to effect positive culture change. We set up a new group Faculty Culture Initiatives Management Group. This will share resources, reduce duplication, and ensure that we effectively embed positive behaviours and approaches. The Management Group reports directly to the Dean of the Faculty of Medicine and brings together experience and expertise from the full range of our activities. A member of this group also sits on our MDR PCC (PP).



The reorganisation provided an opportunity to review departmental governance structure. As part of this we have introduced the role of Mental Health Champion (taken on by Professor Dame Lesley Regan).

***The new MDR is working to achieve a cohesive identity underpinned by our Athena principles.***

We believe that as a smaller unit post re-org, communication amongst colleagues has been made easier and we can build a better departmental identity. We acknowledge that a barrier to this is that we have a presence on multiple campuses (see Figure 2.3). To tackle this we have ensured that management meetings revolve around campuses (now more online meetings!) and we are working to consolidate as many groups as possible into geographically aligned bases or build bridges across sites. As an example, we have organised a lab management forum that crosses sites and encourages lab managers from one campus to undertake safety assessments of labs on other sites, in order to promote cross-campus idea generation.

We have established a Working Culture page on our website, MDR newsletter (BC – comms manager and SAT member) and a Twitter feed (see below). We will ensure that the work of our PCC and Athena team is actively communicated through these channels.



At the inception of our new department we had an Away Day that introduced the new structure and research themes. The opening talk from our new HoD invited the Athena Leads to talk openly about our ambitions for a better working culture

We have agreed that Divisional Away Days need to focus on our junior and mid careerists. The opening Away Day for the Division of Diabetes, Metabolism and Endocrinology ensured: gender balanced chairing of all sessions, a chance to share collaboration ideas, ONLY PhD students were permitted to ask the first questions after talks. This produced fantastic feedback regarding a sense that the department was a place where everyone had a voice.

Our Athena Lead and Departmental manager will work with the full approval of our HoD to produce a transparent report on pay and provide data, if any exists, on gender and ethnicity pay-gaps. Our parent department was the first to do this in the College (ACTION PLAN 7.1).

#### (ii) HR policies

There has been no effect of the reorganisation on HR policies, which continue to be implemented by the HoD and staff with managerial responsibilities.

The HoD welcome email, sent to everyone at the inception of our new department, set out commitment to a diverse and productive working culture, free of harassment, and with the overriding message being an open door policy to hear about any concerns. Along with this came a commitment to the implementation of the Athena SWAN charter.

Further detailed information was also provided about: the new structure, who to report to, lines of communication and a reminder to update personal web pages.

At the same time the MDR website was organised with a section on working culture and signposting to resources on HR procedures, policies and support (ACTION PLAN 6.2).

#### (iii) If applicable, how was gender equality considered in any redundancies

n/a



(iv) Representation of men and women on committees

Committee	Male	Female
Senior Executive Committee	6	3 (33%)
Senior Management Board	23	13 (36%)
Education Committee	18	18 (50%)
People and Culture Committee	9	15 (63%)
Safety Committee	8	3 (25%)

The Senior Executive Committee (HoD and Divisional Heads) was originally lacking any representation from a female academic. This has been partially redressed with the appointment of Professor LeMoine as the new Divisional Head of Digestive Diseases and establishing an EDI representative on that committee (Dr Veronique Azuara).

(v) Workload model

The Dean of FoM is leading the College workload model group, aiming to produce a new College workload policy in 2021 (SAT member JT is contributing).

(vi) Timing of departmental meetings and social gatherings

There has been no change in the timing of departmental meetings and social gatherings as a result of the reorganisation. MDR sets an expectation of core hours for group meetings/events between 1000-1600.

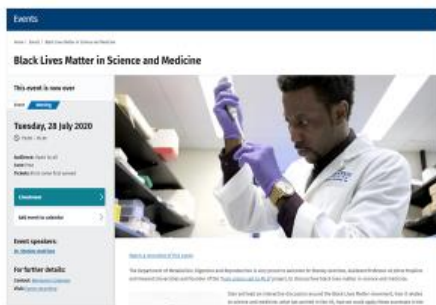
MDR has also promoted the following COVID-related (WFH) messages on its website: new online meeting protocols (eg ending at 10 minutes to the hour to encourage screen breaks), no expectation that staff respond outside of normal working hours to email, a Wellbeing Day on 3 July, and new guidance implemented supporting maximum flexibility for those with caring responsibilities.

(vii) Visibility of role models

We are acutely aware of respecting and celebrating our diversity. We will continue to audit our communications to ensure they represent the full vibrancy of our community (ACTION PLAN 6.1).

In our previous application (DoM 2018) it was noted that women were under represented in invited seminars in the Division of Diabetes, Endocrinology and Metabolism (<20% invited talks). This was highlighted to seminar organisers and this year, within its new home of MDR, the new Diabetes Network seminar series has had 5 women and 3 men speaking. We note that this has been helped by the increase in online webinars, which we hope will provide a legacy for encouraging more talkers who might otherwise have not wished to travel. We will continue to monitor the representation of a diverse range of speakers in our seminar series (ACTION PLAN 6.3).

The panel of photos below highlights some of our work to promote diversity including: proudly hosting Dr Stan Andrisse from Johns Hopkins, who led a sold-out webinar on BLM in Science, which incorporated break-out sessions that encouraged the audience to discuss issues of race; ensuring that the successes of our female PIs are celebrated; raising the profile of our postdocs; honouring our senior female academics and showing our appreciation for our PTO staff.



**Director of Postgraduate Studies – Postgraduate Taught Courses**

Congratulations to Professor Kate Hardy, Head of the [Section of Reproductive BioMedicine](#), who has been appointed as the new 'Director of Postgraduate Studies – Postgraduate



**Women in Clinical Academia**

*Dr Victoria Salem will talk about two recent studies that she has led. By interviewing women who have left their careers in clinical academia, and grounding the analysis in social and feminist theories, she will discuss the themes associated with the so-called 'leaky pipeline' and set this against her own experiences of the system. She will also talk about some remarkable results of an intervention at a national medical conference to improve female visibility.*



**Best Neuroendocrinology talk at SfE BES**

Congratulations to Aldara Martín-Alonso for winning the best Neuroendocrinology oral presentation at the Society of Endocrinology BES conference.



**New paper - Cancer-fighting immune cells work less well in obesity**



Congratulations to Dr Tricia Xie on her recent funding success.

**Well done to all Principal Investigators in the Department who have recently been awarded**

**Dr Tanweer Beleil, Research Associate, Department of Metabolism, Digestion and Reproduction**



After a ten-year career break, I joined Dr Macintyre and Professor Bennett's team as a research associate at the [Institute of Reproductive and Developmental Biology](#), Imperial College London. This opportunity was made available to me after being awarded the Daphne Jackson Fellowship, sponsored by Imperial College London and the Genesis Research Trust.

**SUPPORT STAFF**

**Christopher Bamikole, Laboratory Manager and Section Safety Coordinator, Department of Metabolism, Digestion and Reproduction**



"My role is centred on helping people, from senior academics who need resources and space for their groups to conduct experiments, to ensuring the safety of junior researchers."



**FLIER: Future Leaders in Innovation, Enterprise and Research programme**

MDR's Dr Muireann Coen and Dr Rasha Al-Lamee have been selected for the FLIER programme. The initiative aims to develop [leaders of the future](#) who can create collaborations across academia, industry, the NHS and government to drive innovation.



**Lesley Regan made Dame in New Year Honours**

Professor Lesley Regan was made a Dame in the New Year Honours list for services to women's healthcare. Professor Regan is a Clinical Professor at Imperial in the [Department of Metabolism, Digestion and Reproduction](#). She is also Head of Obstetrics and Gynaecology at St Mary's Hospital, and [President of the Royal College of Obstetrics and Gynaecology](#) - the first woman to hold the role in 64 years. An internationally

**(viii) Outreach activities**

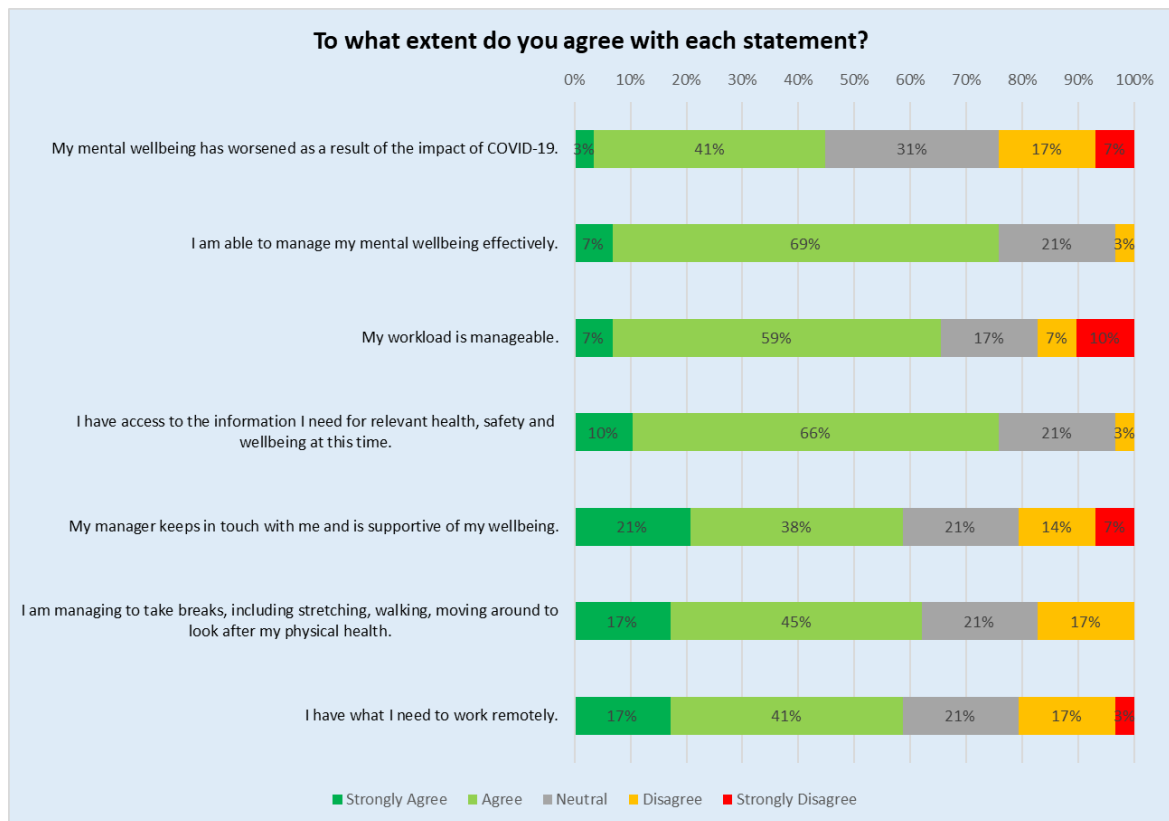
The PCC has recognised that accurate recording of outreach activity is lacking. The College survey on outreach does not provide granular information by gender and may under report certain activities, for example interaction with social media. Outreach cannot therefore be adequately reflected in the holistic assessment of a person's contribution to our community, for example at promotion discussions. PCC members VM, TA and IC will lead a review of this and have designed a question relating to this in our inaugural staff (PCC) survey (ACTION PLAN 1.6).

## 5. FURTHER INFORMATION

Recommended word count: 500 words

The COVID-19 Pandemic hit very shortly after the formation of our new department. Approximately 25% of our staff are clinically trained and many were deployed to the front lines of the pandemic response. These contributions were celebrated on the College website. Others helped in support positions, for example development and validation of testing platforms and others still diverted their research efforts to directly address the COVID response. There was also a huge effort to redesign teaching courses to allow transition to on-line learning.

In addition to the changes in clinical and research activities, the COVID-19 pandemic brought with it a seismic shift in working practises with staff not at the frontline being asked to work from home. The results of our COVID Wellbeing survey are summarised here:



**Table 5.1: Department of Metabolism, Digestion and Reproduction (MDR) breakdown of the college COVID Wellbeing Survey. Data provided cannot be split by gender (something the MDR PCC will tackle Action Plan 1.4). Our negative scores do not differ from the rest of the Faculty of Medicine, although they were slightly higher than College as a whole, which may reflect a greater burden on clinical staff.**

In response, the HoD worked closely with the PCC to address some of the key concerns triggered by all these changes. The department for example provided:

- weekly meetings with the HoD to update staff and keep engagement
- a webinar with open questions to the HoD and the PCC chair to discuss any concerns
- online discussion forum for Postdocs
- regular MDR email bulletins
- continual advice from the EDI on initiatives and wider support for mental well-being offered by the College during the pandemic
- provision of laptops and other necessities for working-from-home
- full acceptance that staff with caring responsibility only work as they see fit
- further embedding of tools enabling flexible working practises (e.g. videoconferencing apps etc)

We are working to support all staff returning to their normal roles. Everyone has a 'safety induction' by lab managers upon return to site and many new safety practises has been put in place.

The EDI/SAT noted widespread reports that the impact of the COVID-19 pandemic may fall particularly hard on women and/or carers. This includes reports that women cannot work as effectively from home if they continue to take on more than an equal share of childcare. Women may thus have been less productive in the academic arena (paper submissions and grant applications) than men during this time. In our first PCC survey we will include a section on COVID impact. MDR is also fully committed to comprehensively take the impact of COVID-19 into account at promotion considerations, as has since been ratified at College level.

## ACTION PLAN

Reference	Action/Objective	Rationale	Present on previous AP?	Responsible	Success Measure/Target
<b>STAFF CONSULTATION AND ATHENA EMBEDDING</b>					
1.1	Ensure regular SAT membership rotation	To ensure a good balance of representation of staff groups, grades, campuses and student representation	DOSC and DoM 2018	Regan and Thursz	We have successfully increased PhD and post doc representation as per previous AP 1. We will increase male membership to 50% by 2022 with targeted recruitment 2. Leads refreshed every 5 years via EOI
1.2	Grow a PTO working group for MDR	Our parent departments had specific PTO working groups to ensure that the particular development needs of this family were being actively assessed and developed	New for MDR	Thompson and Grey	1. To have an identified PTO working group by our next full Silver application 2. To provide full data on PTO training (EDI and coaching) and increase this by 25% by next Athena application
1.3	Bi-annual MDR Departmental People and Culture Survey	To get staff feedback that is Athena SWAN specific	New for MDR	Grey, ALL PCC	1. First MDR specific PCC survey early 2021 2. Evidence of metric improvement in 5 domains by the repeat survey in 2024

1.4	COVID specific impact survey	To look for a gendered impact of COVID, particularly on academic career progression	New for MDR	Regan and Thompson	1. To have this element weaved into the first MDR PCC survey early 2012 2. To insert COVID-specific statements of impact in all promotions documents in 2021 and 2022.
1.5	To undertake staff consultation on issues relating to race, sexuality and gender identity	To engage with intersectionality (principle 10) of the Athena SWAN guiding principles.	New for MDR	Thursz and Thompson	1. To have data on this from the first MDR PCC survey early 2021 2. To establish focus groups with particular groups who are happy to discuss these issues relative to the culture of MDR 3. To produce a report of this for our department by October 2021 4. To establish 5 interventions and indexed outcome measures for the next formal Athena SWAN application.
1.6	Capture better outreach data	Outreach work may be undervalued.	New for MDR	Male and Athersuch	1. To add in a section on Outreach in the new MDR survey 2. To raise awareness of social media based Outreach work - to produce a piece in the MDR newsletter about this by end of 2021

<b>STUDENTS</b>					
<b>2.1</b>	<b>Wider faculty collaboration on rebalancing MSc streams with particular gender disparities</b>	<b>The proportion of men choosing our PGT courses has declined over the last two years to &lt;30%</b>	<b>New for MDR</b>	<b>Barr, Li and Murphy</b>	<b>1. Monitor and understand why the proportion of men choosing our PGT courses is going down with clear Action Plan to respond by next application.</b>
<b>CAREER DEVELOPMENT AND ACADEMIC PROMOTION</b>					
<b>3.1</b>	<b>Open up senior academic leadership positions to non-professorial candidates and ensure all are openly advertised</b>	<b>To encourage more women to step into leadership roles</b>	<b>New 2020</b>	<b>Thursz and Thompson</b>	<b>1. 25% increase in the number of women in academic leadership roles by 2022 2. Demonstrable data for internal leadership position applications, shortlisting and evidence that those who applied but were not appointed were identified for future opportunities - data available for next Silver Athena application</b>
<b>3.2</b>	<b>Clinical Lecturer exit interviews and focus groups in collaboration with the DOSC</b>	<b>Add to the evidence base for retention of mid career female clinical academics</b>	<b>DOSC and DoM 2018</b>	<b>Salem and Peters</b>	<b>Publication under review November 2020</b>



3.3	Encourage all female academic staff to attend tailored leadership and development courses eg Imperial's Academic Women's Programme (LDC)	To encourage more women to step into leadership roles	DOSC and DoM 2018	Grey	1. By December 2020 we will have identified what leadership training has been offered or attended by all our female academic staff 3. By 2022 we will ensure that all of our female academic staff have had the opportunity to attend leadership training if desired.
3.4	Consider ALL potential applicants for academic promotion and those identified as not quite ready, offer tailored development support	Women may not put themselves forward for promotion	DOSC and DoM 2018	Thursz, Thompson, Grey	1. Maintain proportionally representative promotion rates regardless of gender and ethnicity.
3.5	Encourage secondment opportunities for PTO staff	Secondment opportunities provide an opportunity to increase job satisfaction and upskill.	New for MDR	Thompson	1. To introduce a centralised database of opportunities reviewed by Dept Manager 2. 25% increase in positive feedback metrics on career development opportunities for PTO staff on survey

3.6	Develop the MDR engagement with the College and the FoM mentoring scheme. Particularly target female clinical academics and PTO members of staff. We will do this with regular and targeted email campaigns and prompt it during the PRDP process.	Mentoring is widely accepted as an integral part of progressive and supportive career development support, but we recognise that such relationships do not always develop organically.	New for MDR	Grey, Thompson, Woods and Regan	1. 25% increase in the number of females in active mentoring relationships by 2022 2. Steady or increased rates of reported satisfaction with the scheme on biannual feedback monitoring
3.7	Develop a teaching platform for MDR to connect postdocs with teaching opportunities and training in education	Postdocs has expressed a wish for more teaching opportunities and we recognise this is important for successful lectureship applications	New for MDR	Azuara, Norton, Alonso	1. Establish a web-based tools to link postdocs with teaching opportunities 2. To show an increase in satisfaction with teaching opportunities on survey
3.8	Encourage all postdocs to take their contractual 10 "Development Days". This is now prompted on the postdoc PRDP form.	Postdoc career development must be a priority over demands from their PIs!	New for MDR	Azuara, Norton, Alonso	1. Ensure all sections are monitoring it. 2. 80% uptake by end 2021
3.9	Improve communications about the possibility of shared parental leave	Particularly important to encourage shared parental leave as a means of empowering women back to work.	New for MDR	Chambers, Owen	1. To produce accurate paternity leave data 2. To increase uptake of shared parental leave by men in MDR

APPRAISAL					
4.1	100% PRDP completion rate for all staff	We are committed to using the PRDP process as a platform for meaningful and constructive career development discussions	New for MDR	Thursz, Grey	1. 100% compliance by end 2021
4.2	Carry out the PRDP form sampling exercise	Quality of the PRDP process is important - not just a tick box exercise.	New for MDR	Cebola	1. Data from Quality Assessment report early 2022 2. Produce MDR PRDP guidelines based on the outcomes of the PRDP Quality control project
4.3	Extend College PRDP process to clinical academics in addition to their NHS appraisals.	Clinical academics do not get adequate academic career development support via their clinical appraisal	New for MDR	Franks	1. 100% uptake by 2022
4.4	To reassign or widen the PRDP process to alternative reviewers if the skills of the line manager do not align with what is required to support the staff member being appraised.	Many staff members (especially senior professional support or teaching staff) feel that their line managers (often senior academics) lack the skill set to be able to adequately advise on their specific career development needs	New for MDR	Athersuch	1. Quality review to assess this element in 2022 2. Starting with PTO staff to ascertain that all PRDPs were satisfactory in terms of the line manager involved

**RECRUITMENT, INDUCTION, TRAINING and FLEXIBLE WORKING**

5.1	Have a minimum of one female and one male panel member in all recruitment panels with three or more members	To reduce bias or a threatening environment in interviews	DOSC and DoM 2018	Thomspon and Grey	1. Data confirming 100% compliance by 2022
5.2	Increase the number of people who are involved in line management and recruitment process who have undertaken E+D and UBT training	We are committed to UBT as a means of tackling bias	New for MDR	Thursz, Thompson and Grey	1. Introduce bespoke online MDR training for UBT 2. 100% completion of UBT training by 2022
5.3	Employ the 'search committee' approach in order to target female and BAME candidates for recruitment, especially at the more junior levels and clinical professor levels	Women may not apply for jobs unless given extra confidence to do so.	DOSC and DoM 2018	Thompson	1. Data on this to be presented to PCC at every recruitment round and published in our Athena application
5.4	To write all job applications with the possibility of job sharing	To widen the number of potential candidates	New for MDR	Thomspon and Grey	1. Audited 100% compliance on all job adverts for MDR by next application
5.5	To examine the nature of all part time contracts	There are many men on part time contracts but this not actually reflect part time working - rather mixed contract types.	New for MDR	Thompson	1. To provide textured data on contract types for the next Athena application

5.6	Revised MDR probation forms	To ensure new academics are supported through to tenure	New for MDR	Toams and Male	1. All new starters to have an identified mentor and evidence of structured career development discussions
5.7	Welcome videos online from HoD, Dept Manager and Athena Lead	To provide visible messages about our expectations for working culture	New for MDR	Thompson	1. Increase in positive ratings on induction experience compared with College average of staff survey
5.8	PTO staff specific induction forms	This was a success for our postdocs and we acknowledge that campus and job-family specific information is particularly helpful	New for MDR	PTO working group	1. Increase by 25% PTO approval ratings of induction process by 2024
<b>COMMUNICATIONS</b>					
6.1	Annual audit of MDR website for diverse images and appropriate language	We are committed to visually celebrating our diversity	New for MDR	Coleman	1. Ensure a proportionate representation of our entire staff base in terms of images and stories

6.2	Roll out MDR newsletter with emphasis on early and mid-career successes and female role models	We are committed to a department where everyone feels valued.	New for MDR	Coleman	1. Above College average rating on satisfaction scores with visibility of leadership and communications as ascertained on staff survey
6.3	Monitor the gender and ethnicity of our invited seminar speakers	An important mechanism for raising the profile of academics from under represented groups.	DOSC and DoM 2018	Owen	1. Increase the presence of female speakers by 10% year on year until gender parity 2. Increase the number of speakers from other diverse backgrounds by 10% annually
<b>JUSTICE</b>					
7.1	MDR commitment to tackling the Gender Pay Gap	An absolute cornerstone of our commitment to transparency.	New for MDR	Thursz, Thomspson and Regan	Gender Pay Gap is reported at College Level but not departmental. We commit to this exercise for ethnicity and gender in MDR. Topline results will be reported by early 2022.