Athena SWAN Silver Department award renewal application

Name of institution: Imperial College London

Date of application: 21 November 2012

Department: National Heart and Lung Institute

Contact for application:

Prof Clare Lloyd (Academic Lead)
Dr Emma Watson (Administrative Lead)

Email: c.lloyd@imperial.ac.uk and e.watson@imperial.ac.uk

Telephone: 020 7594 3102 and 020 7594 1427

Departmental website address: www.imperial.ac.uk/nhli

Date of previous award: 2009

Date of university Bronze and/or Silver SWAN award: Bronze, 2009

Level of award applied for: Silver

Athena SWAN **Silver Department** award renewals recognise that in addition to university-wide policies the department has made progress in promoting gender equality and addressing challenges particular to the discipline. It is expected that after three years Athena SWAN Bronze Department award holders should be at the stage to make a new application for a Silver Department award. However, in exceptional circumstances a Bronze Department renewal award submission can be made.

Not all institutions use the term 'department' and there are many equivalent academic groupings with different names, sizes and compositions. The definition of a 'department' for SWAN purposes can be found on the Athena SWAN website. Where the department unit that made the original application has changed, it is up to the new unit for submission to decide whether a renewal application is appropriate or whether a new award application should be made. If in doubt, contact the Athena SWAN Charter Coordinator well in advance to check eligibility.

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

At the end of each section state the number of words used.

Click <u>here</u> for additional guidance on completing this template.



List of abbreviations

BRC	NIHR Biomedical Research Centre
BRU	NIHR Biomedical Research Unit
CDOC	Career Development Opportunities Committee
Hol	Head of Institute
HoS	Head of Section
DPS	Director of Postgraduate Research Studies
HDRC	Higher Degrees Research Committee
ILW	Institute Lead for Women
MAC	Management Advisory Committee
NHLI	National Heart and Lung Institute
NIHR	National Institute of Health Research
PD	Postdoctoral Research Associates or Fellows
PRDP	Personal Review Development Plan
PGT	Postgraduate Taught
PGR	Postgraduate Research
RBH	Royal Brompton Hospital
RBHFT	Royal Brompton and Harefield NHS Foundation Trust
SAT	Self-Assessment Team
UG	Undergraduate

1. Letter of endorsement from the Head of Department – maximum 500 words

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

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



National Heart and Lung Institute Guy Scadding Building Dovehouse Street Royal Brompton Campus London SE3 6LY

Tel: +44 (0)20 7351 8626 Fax: +44 (0)20 7351 8629 Kim.fox@imperial.ac.uk www.imperial.ac.uk/medicine/people/kim.fox

Kim Fox, MD, FRCP, FESC Head, National Heart and Lung Institute

Ms Sarah Dickinson Senior Policy Adviser (Athena SWAN) Equality Challenge Unit 7th Floor Queen's House 55/56 Lincoln's Inn Fields London WC2A 3LJ

21 November 2012

Dear Ms Dickinson,

Ref: National Heart and Lung Institute (NHLI) Athena SWAN application for Silver renewal

I am emphatically committed to the Athena SWAN principles because I believe that this forms an essential basis for the good governance of a department. As Professor of Clinical Cardiology at NHLI and Consultant Cardiologist at the Royal Brompton Hospital, while juggling a dual career household with a young family, I feel I am well placed to understand the challenges faced by NHLI academics. This includes addressing an Institute based across geographically disparate campuses, composed of clinical and non-clinical members of staff.

One of my first priorities as Head of Institute was to affirm my commitment to the career development of NHLI's scientists and specifically, women. I met with NHLI's Academic and Administrative Athena Leads and we discussed the barriers to implementing the NHLI Athena SWAN Action Plan and what was required of me as Head of NHLI; including the actions that might make me unpopular with the old-school barons.

The biggest challenges facing me were the perceived issues surrounding transparency of management within the Institute and roles and responsibilities of Heads of Sections; all of which were male at the time of 2009's Athena application, despite NHLI being one of the departments in College with the most female professors.

One of my first actions was to set up a Management Advisory Committee, made up of key administrators and academics including Institute Leads, Heads of Sections and Heads of the BRC and BRUs, which meets monthly.

Identifying the need to support NHLI's Postdocs further, I appointed an academic as Institute Lead for Postdocs, providing Postdocs with the monitoring, support and

development already afforded to Postgraduate Research Students by means of the established role of Director of Postgraduate Studies.

I recently appointed a senior academic to lead NHLI's Research and Development strategy who will head up a new Career Development Opportunities Committee, which will be pivotal in facilitating the career progression of NHLI students, researchers, clinicians and academics and removing roadblocks to their success.

Aware that our 2009 Action Plan was deemed too ambitious by the Athena committee, we have produced a tighter plan. The new Action Plan centres on four key themes developed as a result of extensive Institute-wide workshops held in March 2012:

- Mentoring
- New starter package
- Research collaborations/interaction
- Management

The NHLI is committed to fostering a change in its work culture that will ultimately facilitate the career advancement of not only women but all our scientists in academia. I am confident that we can achieve our goals and I am pleased to state that NHLI's long term plan is to ultimately achieve the Athena Gold Award, which I hope will prove to be the measure of our success in this vision.

In the meantime, I am delighted to present you with our Athena SWAN Silver Renewal application. Please do not hesitate to contact me should you require any further information.

Yours truly,

View U ys

Kim Fox

Head, National Heart and Lung Institute

498 words

2. The self-assessment process – maximum 1000 words

Describe the Self-Assessment Process. This should include:

 a) A description of the self assessment team: members' roles (both within the department and as part of the team) and their experiences of worklife balance, parental leave, flexible working etc;

Staff were invited to be members of the Self-Assessment Team based on a number of factors which included but were not restricted to: Institute managerial experience, in a dual career relationship, campus base, staff with caring responsibilities, recent experience of the promotion process and those who had taken part in previous Athena initiatives.

Susannah Bloch

Clinical Research Fellow, PhD Student. Dual career family, two children, recent experience of maternity procedures (as staff and student). http://www1.imperial.ac.uk/medicine/people/susannah.bloch07/

Vania Braga

Reader, South Kensington Campus Dean, Deputy-Head of Molecular Medicine Section, NHLI Postgraduate Tutor. Two children, two grand-children, caring responsibilities. Flexible working. http://www1.imperial.ac.uk/medicine/people/v.braga/

Charlotte Dean

New lecturer. Dual career family with two young children. Commutes to London from Reading, flexible working to accommodate childcare. Honorary contract at MRC Harwell, works either from there or from home one day per week.

http://www1.imperial.ac.uk/medicine/people/c.dean/

Louise Fleming

New Clinical Senior Lecturer, Honorary Consultant Paediatrician (Royal Brompton Hospital). NHLI MD(Res) including maternity leave, returned on a part-time basis, followed by flexible working due to ill health. Maternity leave and successful Elsie Widdowson Fellowship. Dual career family with two young children.

http://www1.imperial.ac.uk/medicine/people/l.fleming/

Lisa Gregory

Research Associate. Two children, works part-time and flexibly. http://www1.imperial.ac.uk/medicine/people/l.gregory/

Uta Griesenbach

Reader, Section Representative for NHLI Higher Degrees Committee, undergraduate and postgraduate tutor. Administrative and teaching responsibilities. Flexible working covering parental responsibilities. http://www1.imperial.ac.uk/medicine/people/u.griesenbach/

Mark Griffiths

Clinical Reader, Consultant Intensivist, Deputy Head of Unit of Critical Care, Education Lead for the Respiratory BRU. Dual career family, two children, http://www1.imperial.ac.uk/medicine/people/m.griffiths/

Sian Harding

Professor, Head of Section. Maternity leave, flexible working, dual-career family.

http://www1.imperial.ac.uk/medicine/people/sian.harding/

Clare Lloyd

Professor, Head of Section, Institute Lead for Women, Athena Academic Lead. Dual career family and caring responsibilities for young children. http://www1.imperial.ac.uk/medicine/people/c.lloyd/

Tony Magee

Professor, Director of Postgraduate Research Studies; Head of Section. Flexible working, dual career family, young children. http://www1.imperial.ac.uk/medicine/people/t.magee/

Richard Mattin

Divisional Manager, Cardiovascular Sciences. Manages cardiovascular administrative team.

http://www1.imperial.ac.uk/medicine/people/r.mattin/

Sara McSweeney

Research Associate, NHLI Postdoc Committee. http://www1.imperial.ac.uk/medicine/people/s.mcsweeney/

Ruth O'Donnell

Communications and Events Administrator http://www1.imperial.ac.uk/medicine/people/r.odonnell/

Mark Paul-Clark

Lecturer, primary carer for 3 children, dual career family; wife undergoing chemotherapy. Flexible working; user of Imperial nursery. http://www1.imperial.ac.uk/medicine/people/m.paul-clark/

Sara Rankin

Professor, NHLI Tutor, Deputy Director of Postgraduate Research Studies, Institute Lead for Outreach. Recent experience of the promotion process. Caring responsibilities, dual career family with two children http://www1.imperial.ac.uk/medicine/people/s.rankin/

Anny Sykes

Clinical Lecturer; 50% in research and 50% in clinic. http://www1.imperial.ac.uk/medicine/people/annemarie.sykes/

Tanya Tolmachova

Research Fellow, Dual career family with two children.

http://www1.imperial.ac.uk/medicine/people/t.tolmachova/

Eleanor Tucker

Operations Manager, Respiratory Science. Manages respiratory administrative team.

http://www1.imperial.ac.uk/medicine/people/eleanor.tucker/

Emma Watson,

Research Manager, Athena Administrative Lead. http://www1.imperial.ac.uk/medicine/people/e.watson/

416 words

 an account of the self assessment process, with reference to year-onyear activities since the original Department award application, details of the self assessment team meetings, including any consultation with staff or individuals inside or outside of the university, and how these have fed into the submission;

All members of staff and all students were invited to join the Self-Assessment Process through the NHLI Newsletter, the NHLI Management Advisory Committee and targeted emails to all individuals within the Institute.

In preparation for this renewal application, the Institute held a series of workshops in March 2012. These were led by an independent Organisational Development Consultant from Imperial's Learning and Development Centre and centred on key career groups, as well as specifically female clinicians, identified as a target group requiring stronger support) and focussed on these fundamental themes:

- Blocks and obstacles to achieving potential
- Recruitment
- Retention and Progression
- Culture

Staff and students unable to attend the workshops were invited to email queries, suggestions or comments, in confidence, to the Athena Academic Lead or Administrator.

Workshops were attended by members of the Self-Assessment Team, past and present who were able to contribute to the workshops and feedback on the resulting report and NHLI's Athena Action Plan.

The report was circulated to the Institute Management Advisory Committee for dissemination and feedback to NHLI's Sections.

Furthermore, the Institute reflects on itself in a variety of ways which contribute to the Athena Self-Assessment Process. The Head of Institute holds an Annual Open Meeting which provides an opportunity for staff and students to discuss current issues and an invitation to work together towards influencing the path ahead. All staff throughout the Institute are invited and

everyone is strongly encouraged to attend by the Head of Institute. Discussions include a summary of the Institute's past year, its management structure, and presentations regarding funding, upcoming initiatives such as REF and the Institute's Athena SWAN action plan, its progress and in 2012, its renewal. Feedback is strongly encouraged before and after the meeting and a confidential online feedback form has been created and is circulated regularly.

The Institute also continues to hold parallel open meetings for all research students with the Director of Postgraduate Studies. All such meetings encourage feedback and open discussion in a safe, inclusive and protected non-punitive environment.

334 words

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

The Self-Assessment Team will meet three times a year to review the progress of the Action Plan and feedback on its implementation throughout the Institute. Meetings will be minuted and the SAT will report to the NHLI Management Advisory Committee (MAC), which includes all NHLI Heads of Sections. The SAT will also feedback to other relevant committees within the Institute when necessary, such as the Student Committee, Higher Degrees Committee, or the newly created Career Development Opportunities Committee. Minutes and progress will be available on NHLI's website.

The composition of the SAT now includes administrators working alongside academics in order to create an ideal environment to ensure that the Action Plan is implemented throughout the Institute and follows consistent and fair processes. Interactions between these groups will also foster the generation of ideas through sharing of experience and good practice – the interaction between those that implement change along with those that benefit from it.

Individuals from SAT will report back to the committee whether dissemination throughout the Institute is indeed filtering down (Action 1.8); and generate ideas on how to address issues of poor information distribution. SAT members will feed back new ideas and potential areas for development to the team.

Staff and student open meetings will continue to take place annually to evaluate the effectiveness of actions, and to inform on areas for improvement. We will also renew our workshops undertaken in March 2012 on a two-year basis, with the next ones planned for March 2014 (Action 1.4).

249 words

TOTAL: 999 words (Max 1,000)

3. A picture of the department – maximum 2000 words

 a) Provide a pen-picture of the department to set the context for the application, outlining in particular any significant changes since the original award.

NHLI was established as an independent research institute based at the Royal Brompton Campus and subsequently incorporated into Imperial's School of Medicine (1998).

It is one of the largest departments of Imperial's Faculty of Medicine, employing more than 100 academic and 150 research staff, hosting more than 180 research students and having more than 280 honorary members of staff; including those with conferred titles of Reader and Professor. It is headed by Professor Kim Fox who succeeded Professor Michael Schneider in September 2011.

NHLI has its scientific interests in cardiovascular and respiratory research including both clinical and basic science. A common complaint throughout NHLI is its geographic spread as it is currently located across 5 campuses, locations and associated hospitals. However, 2012 saw the relocation of most of the cardiovascular research groups to the Hammersmith Campus creating an enriched environment for collaboration, networking and scientific exchange.

The Institute is divided into 15 sections, all headed by a Head of Section, each reporting to the Head of Institute. Each section is administered by a Section Administrator who reports to the Respiratory and Cardiovascular Operations Managers, who are both members of the Self-Assessment Team. As of 2012 Heads of Sections have increased financial and management responsibilities and accountabilities. Significantly, all Heads of Sections were male at the time of NHLI's Silver Award in 2009, with four out of 15 now being female.

NHLI is associated with Imperial's Comprehensive Biomedical Research Centre (BRC) and the Royal Brompton Hospital's Cardiovascular and Respiratory Biomedical Research Units (BRU); all recently renewed by the National Institute of Health Research.

A number of development and leadership roles have recently been created, including the Institute Lead of Outreach, Institute Lead for Postdocs and Institute Lead for Research and Development.

Institute Leads, Heads of Sections and Heads of the BRC and BRUs are members of the newly created Management Advisory Committee, chaired by the Head of Institute and meeting on a monthly basis.

323 words

b) Provide data and a short analysis for at least the last five years (where possible with clearly labelled graphical illustrations) on the following, commenting on changes and progress made against the original action plan and application, and initiatives intended for the action plan going forward.

Student data

(i) Access and foundation male and female numbers – full and part time.

The Institute does not host such courses.

10 words

(ii) Undergraduate male and female numbers – full and part-time.

NHLI does not hold an undergraduate course but is responsible for the Cardiovascular and Respiratory Science BSc (Imperial College London MBBS, Year 4), which are undertaken on a full-time basis.

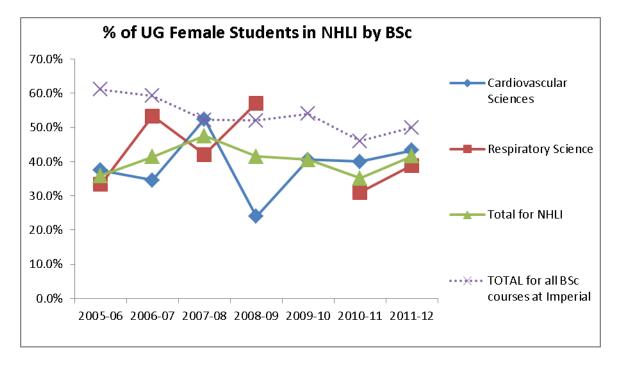
The number of students on each course is relatively small, and so we see fluctuations over time in the female percentage for each BSc making it difficult to identify any clear trends. However, the female percentage on BSc courses run by NHLI is below the female percentage of total BSc students at Imperial. Also, overall there has been a clear trend, with the female percentage for all BScs at Imperial decreasing from 58.7% to 46.5%.

Pursuing its 2009 Action Plan, NHLI will continue to strive to increase female undergraduates on these courses, through outreach activities to school children and lectures to the MBBS students, prior to their BSc choices. This will include visibility of role models in these clinical areas, as well as continued marketing of the courses.

NHLI's long term plan for education will include data gathering as well as creation and implementation of new actions to address this imbalance.

BSc		2005/6			2006/7			2007/8			2008/9					
NHLI	F	М	Total	Female %	F	М	Total	Female %	F	М	Total	Female %	F	М	Total	Female %
Cardiovascular Sciences	9	15	24	37.5%	9	17	26	34.6%	11	10	21	52.4%	6	19	25	24.0%
Respiratory Science	5	10	15	33.3%	8	7	15	53.3%	8	11	19	42.1%	16	12	28	57.1%
Total for NHLI	14	25	39	35.9%	17	24	41	41.5%	19	21	40	47.5%	22	31	53	41.5%
Total BSc Students	193	136	329	58.7%	158	124	282	56.0%	154	146	300	51.3%	197	173	370	53.2%

BSc		2009/10				2	010/11		2011/12			
NHLI	F	М	Total	Female %	F	М	Total	Female %	F	М	Total	Female %
Cardiovascular Sciences	15	22	37	40.5%	10	15	25	40.0%	13	17	30	43.3%
Respiratory Science					9	20	29	31.0%	7	11	18	38.9%
Total for NHLI	15	22	37	40.5%	19	35	54	35.2%	20	28	48	41.7%
Total BSc Students	177	168	345	51.3%	186	220	406	45.8%	192	221	413	46.5%



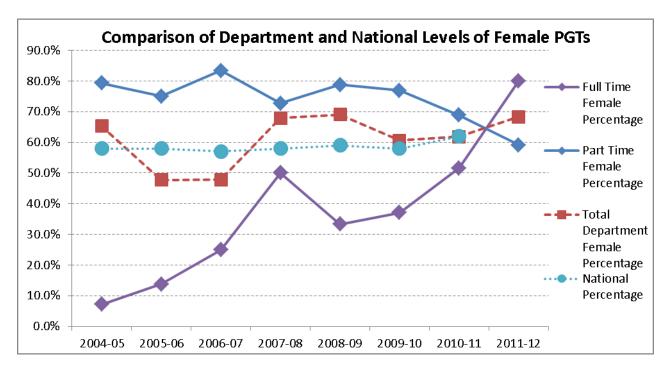
181 words

(iii) Postgraduate male and female numbers on and completing taught courses – full and part-time.

Numbers of students are greatly affected by the nature of the courses held within NHLI, which have changed over the years with courses terminating and starting periodically. The Institute has run and runs clinical masters which historically attract more male students.

NHLI also runs courses aimed at allied health professionals which as a profession has been traditionally viewed as being female dominated. Percentages on those courses have been of a minimum 50% female.

For the last four years, the percentage of female PGTs has been on or above the national average from HEIDI.



Academic year	Cardiology	Medical Ultrasound Medical Ultrasound [Echocardiography]	Preventive Cardiology	Respiratory Medicine	Thoracic Medicine	Adult Critical Care	Cardio- Respiratory Nursing	Paediatric Critical Care
2004-05	0.0%			50.0%	20.0%	88.5%	88.2%	66.7%
2005-06	12.5%			38.9%	0.0%	100.0%	75.0%	
2006-07	16.7%			42.9%	57.1%	100.0%	77.8%	
2007-08	100.0%			33.3%		77.8%	85.7%	
2008-09			50.0%	44.4%		75.0%	100.0%	
2009-10		58.8%	48.0%	0.0%		100.0%	94.4%	
2010-11		55.6%	52.8%			100.0%	80.0%	
2011-12		69.6%	63.6%				73.9%	

	Po	Postgraduates Taught, Full-Time								
Academic year	Female	Male	Total	Female Percentage						
2004-05	1	13	14	7.1%						
2005-06	4	25	29	13.8%						
2006-07	7	21	28	25.0%						
2007-08	3	3	6	50.0%						
2008-09	3	6	9	33.3%						
2009-10	10	17	27	37.0%						
2010-11	16	15	31	51.6%						
2011-12	28	7	35	80.0%						

	Pos	Postgraduates Taught, Part-time							
Academic year	Female	Male	Total	Female Percentage					
2004-05	46	12	58	79.3%					
2005-06	27	9	36	75.0%					
2006-07	15	3	18	83.3%					
2007-08	16	6	22	72.7%					
2008-09	26	7	33	78.8%					
2009-10	30	9	39	76.9%					
2010-11	31	14	45	68.9%					
2011-12	26	18	44	59.1%					

	Ро	stgraduat	t, Total	National Picture (heidi data)	
Academic year	Female	Male	Total	Female Percentage	(A3) Clinical medicine
2004-05	47	25	72	65.3%	58%
2005-06	31	34	65	47.7%	58%
2006-07	22	24	46	47.8%	57%
2007-08	19	9	28	67.9%	58%
2008-09	29	13	42	69.0%	59%
2009-10	40	26	66	60.6%	58%
2010-11	47	29	76	61.8%	62%
2011-12	54	25	79	68.4%	

93 words

(iv) Postgraduate male and female numbers on research degrees and completion times – full and part-time.

NHLI has enjoyed gender parity within its research students for many years. However, NHLI is actively increasing its student and fellow recruitment in a variety of ways including seminars for supervisors to increase their awareness of student funding opportunities to open days for students from all scientific areas.

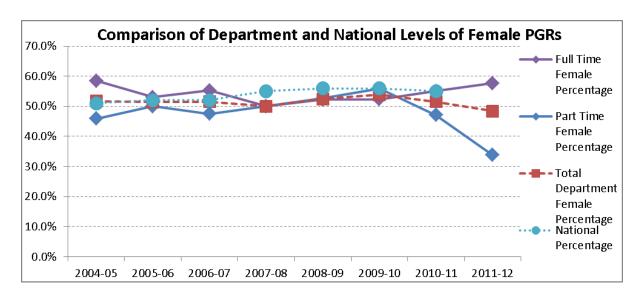
NHLI is continuing its clinical research fellow initiative which aims to engage with fellows in clinical training during conferences or training days. The initiative aims to improve opportunities for fellows wishing to undertake research as well as increase the proportion of female fellows undertaking cardiovascular research. NHLI's long term plan for education will also incorporate the NHLI Education Centre and its range of educational short courses as an opportunity to speak directly to clinicians in training who might be considering undertaking a taught course or research degree.

For the last seven years, the percentage of female PGRs has been on or very slightly below the national average from HEIDI.

	Postgraduates Research, Full-time							
Academic year	F	М	Total	F %				
2004-05	31	22	53	58.5%				
2005-06	35	31	66	53.0%				
2006-07	47	38	85	55.3%				
2007-08	36	36	72	50.0%				
2008-09	47	43	90	52.2%				
2009-10	56	51	107	52.3%				
2010-11	60	49	109	55.0%				
2011-12	64	47	111	57.7%				

	Postgraduates Research, Part-							
		†	time					
Academi	F	М	Total	F %				
c year				. , ,				
2004-05	28	33	61	45.9%				
2005-06	37	37	74	50.0%				
2006-07	38	42	80	47.5%				
2007-08	35	35	70	50.0%				
2008-09	40	36	76	52.6%				
2009-10	48	38	86	55.8%				
2010-11	41	46	87	47.1%				
2011-12	24	47	71	33.8%				

	Pos	tgraduate	ch, Total	National Picture (heidi data)	
Academic year	Female	Male	Total	Female Percentage	(A3) Clinical medicine
2004-05	59	55	114	51.8%	51%
2005-06	72	68	140	51.4%	52%
2006-07	85	80	165	51.5%	52%
2007-08	71	71	142	50.0%	55%
2008-09	87	79	166	52.4%	56%
2009-10	104	89	193	53.9%	56%
2010-11	101	95	196	51.5%	55%
2011-12	88	94	182	48.4%	



Our submission rate for PhD students for the last few years has been 100% within four years and is equal for male and female full-time students.

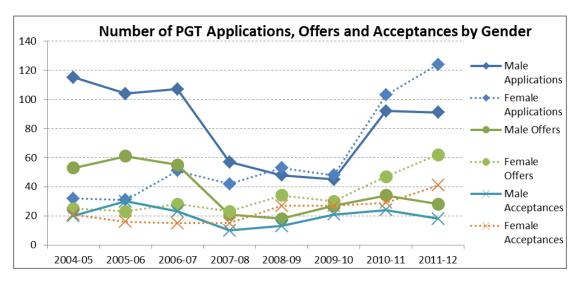
183 words

(v) Ratio of course applications to offers and acceptances by gender for undergraduate, postgraduate taught and postgraduate research degrees

PGT

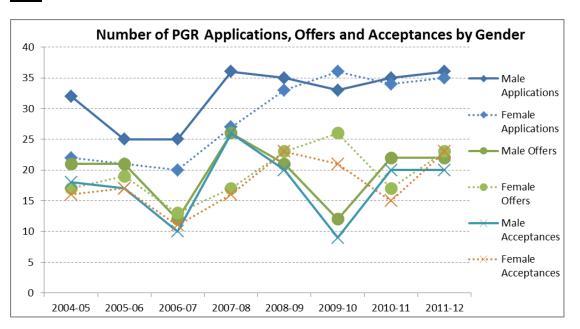
The number of applications (and so offers and acceptances) are related to the changing PGT courses on offer. In particular there were a significantly lower number of male applications in 2007-08, 2008-09 and 2009-10.

Generally, the female offer rate and female acceptance rate is higher than for male applicants.



		Female	Male	Unknown	Total	Female Percentage
	2004-05	32	115		147	21.8%
	2005-06	31	104	1	136	22.8%
	2006-07	51	107	3	161	31.7%
Applications	2007-08	42	57	1	100	42.0%
Applications	2008-09	53	48		101	52.5%
	2009-10	48	45		93	51.6%
	2010-11	103	92	1	196	52.6%
	2011-12	124	91	1	216	57.4%
	2004-05	25	53		78	32.1%
	2005-06	23	61	1	85	27.1%
	2006-07	28	55	1	84	33.3%
Offers	2007-08	23	21	1	45	51.1%
Ollers	2008-09	34	18		52	65.4%
	2009-10	30	27		57	52.6%
	2010-11	47	34		81	58.0%
	2011-12	62	28		90	68.9%
	2004-05	21	20		41	51.2%
	2005-06	16	30		46	34.8%
	2006-07	15	23		38	39.5%
Assentances	2007-08	15	10		25	60.0%
Acceptances	2008-09	27	13		40	67.5%
	2009-10	27	21		48	56.3%
	2010-11	29	24		53	54.7%
	2011-12	41	18		59	69.5%

<u>PGR</u>



		Female	Male	Unknown	Total	Female Percentage
	2004-05	22	32		54	40.7%
	2005-06	21	25		46	45.7%
	2006-07	20	25		45	44.4%
Applications	2007-08	27	36		63	42.9%
Applications	2008-09	33	35		68	48.5%
	2009-10	36	33		69	52.2%
	2010-11	34	35		69	49.3%
	2011-12	35	36		71	49.3%
	2004-05	17	21		38	44.7%
	2005-06	19	21		40	47.5%
	2006-07	13	12		25	52.0%
Offers	2007-08	17	26		43	39.5%
Ollers	2008-09	23	21		44	52.3%
	2009-10	26	12		38	68.4%
	2010-11	17	22		39	43.6%
	2011-12	23	22		45	51.1%
	2004-05	16	18		34	47.1%
	2005-06	17	17		34	50.0%
	2006-07	11	10		21	52.4%
A t	2007-08	16	26		42	38.1%
Acceptances	2008-09	23	20		43	53.5%
	2009-10	21	9		30	70.0%
	2010-11	15	20		35	42.9%
	2011-12	23	20		43	53.5%

The acceptance rate for both genders is similar throughout the period and generally very high.

64 words

Staff data

(vi) Female:male ratio of academic staff and research staff – researcher, lecturer, senior lecturer, reader, professor (or equivalent).

Data is based on 1st November snapshot annually and only covers College employees, and therefore not any honorary staff. Female Clinical Academics are the least well represented group and continues to be a long-term focus for NHLI, as per its 2009 Action Plan.

2009	F	М	Total	F %
Professor - Level E	11	12	23	47.8%
Reader - Level D	7	7	14	50.0%
Senior Lecturer - Level D	3	4	7	42.9%
Lecturer - Level C	5	8	13	38.5%
ACADEMIC STAFF TOTAL	26	31	57	45.6%
Research - Level D	1	3	4	25.0%
Research - Level C	12	11	23	52.2%
Research - Level B	60	43	103	58.3%
Research - Level A	20	8	28	71.4%
RESEARCH STAFF TOTAL	93	65	158	58.9%

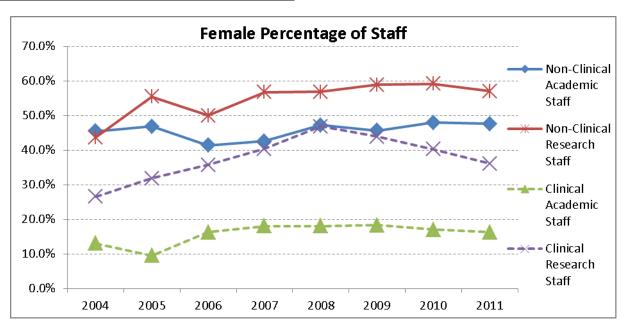
2009	F	М	Total	F %
Clinical Professor	2	27	29	6.9%
Clinical Reader	2	2	4	50.0%
Clinical Senior Lecturer	4	8	12	33.3%
Clinical Lecturer	1	3	4	25.0%
CLINICAL ACADEMIC STAFF TOTAL	9	40	49	18.4%
Clinical Research Fellow	1		1	100.0 %
Research - Clinical	24	32	56	42.9%

2010	F	М	Total	F %
Professor - Level E	12	10	22	54.5%
Reader - Level D	4	7	11	36.4%
Senior Lecturer - Level D	4	4	8	50.0%
Lecturer - Level C	3	4	7	42.9%
ACADEMIC STAFF TOTAL	23	25	48	47.9%
Research - Level D	1	4	5	20.0%
Research - Level C	13	13	26	50.0%
Research - Level B	70	41	111	63.1%
Research - Level A	13	9	22	59.1%
RESEARCH STAFF TOTAL	97	67	164	59.1%

2010	F	М	Total	F %
Clinical Professor	1	27	28	3.6%
Clinical Reader	2	2	4	50.0%
Clinical Senior Lecturer	4	7	11	36.4%
Clinical Lecturer	1	3	4	25.0%
CLINICAL ACADEMIC STAFF TOTAL	8	39	47	17.0%
Clinical Research Fellow	1	1	2	50.0%
Research - Clinical	26	39	65	40.0%

2011	F	М	Total	F %
Professor - Level E	11	10	21	52.4%
Reader - Level D	5	4	9	55.6%
Senior Lecturer - Level D	2	4	6	33.3%
Lecturer - Level C	2	4	6	33.3%
ACADEMIC STAFF TOTAL	20	22	42	47.6%
Research - Level D	1	4	5	20.0%
Research - Level C	13	15	28	46.4%
Research - Level B	66	41	107	61.7%
Research - Level A	13	10	23	56.5%
RESEARCH STAFF TOTAL	93	70	163	57.1%

2011	F	М	Total	F %
Clinical Professor	1	28	29	3.4%
Clinical Reader	2	2	4	50.0%
Clinical Senior Lecturer	4	8	12	33.3%
Clinical Lecturer	1	3	4	25.0%
CLINICAL ACADEMIC STAFF TOTAL	8	41	49	16.3%
Clinical Research Fellow	1	0	1	100.0 %
Research - Clinical	21	39	60	35.0%



43 words

(vii) **Turnover by grade and gender** – where numbers are small, comment why individuals left

Analysis of the data reflects the number of staff by grades rather than differences in gender. Furthermore, small data in some categories do not enable identification of a trend or disparity. NHLI enjoys high numbers of

research staff with parity of gender and this is reflected in parity of turnover of these grades for both male and female staff.

Research and Clinical Research staff leave NHLI either upon completion of their contract or appointment to another position within the College or the UK as part of their career progression whilst senior staff such as Professors have left the Institute through retirement and taking up of prestigious positions throughout the UK.

2008-09 Total Turnover	F	М	Total	F %
Professor - Level E				
Reader - Level D				
Senior Lecturer - Level D		1	1	0%
Lecturer - Level C				
ACADEMIC STAFF TOTAL	0	1	1	0%
Research - Level D		2	2	0%
Research - Level C	2	5	7	29%
Research - Level B	16	8	24	67%
Research - Level A	9	3	12	75%
RESEARCH STAFF TOTAL	27	18	45	60%

2008-09 Total Turnover	F	M	Total	F %
Clinical Professor		1	1	0%
Clinical Reader				
Clinical Senior Lecturer				
Clinical Lecturer				
CLINICAL ACADEMIC STAFF TOTAL	0	1	1	0%
Clinical Research Fellow				
Research - Clinical	7	8	15	47%

2009-10 Total Turnover	F	M	Total	F %
Professor - Level E	2	4	6	33%
Reader - Level D	1	1	2	50%
Senior Lecturer - Level D				
Lecturer - Level C	1	3	4	25%
ACADEMIC STAFF TOTAL	4	8	12	33%
Research - Level D				
Research - Level C	2	1	3	67%
Research - Level B	22	15	37	59%
Research - Level A	4	2	6	67%
RESEARCH STAFF TOTAL	28	18	46	61%

2009-10 Total Turnover	F	M	Total	F %
Clinical Professor	1	1	2	50%
Clinical Reader				
Clinical Senior Lecturer		2	2	0%
Clinical Lecturer	1		1	100 %
CLINICAL ACADEMIC STAFF TOTAL	2	3	5	40%
Clinical Research Fellow				
Research - Clinical	6	10	16	38%

2010-11 Total Turnover	F	M	Total	F %
Professor - Level E	1		1	100%
Reader - Level D		2	2	0%
Senior Lecturer - Level D		1	1	0%
Lecturer - Level C	2		2	100%
ACADEMIC STAFF TOTAL	3	3	6	50%
Research - Level D			0	
Research - Level C	2	2	4	50%
Research - Level B	19	12	31	61%
Research - Level A	6	3	9	67%
RESEARCH STAFF TOTAL	27	17	44	61%

2010-11 Total Turnover	F	М	Total	F %
Clinical Professor		2	2	0%
Clinical Reader			0	
Clinical Senior Lecturer			0	
Clinical Lecturer			0	
CLINICAL ACADEMIC STAFF TOTAL	0	2	2	0%
Clinical Research Fellow		1	1	0%
Research - Clinical	13	9	22	59%

110 words

TOTAL: 1,007 words (Max 2,000 words)

Supporting and advancing women's careers – maximum 5000 words

Please provide a report covering the following sections 4-7. Within each section provide data and a short analysis for at least the last three years (including clearly labelled graphical illustrations where possible) on the data sets listed, commenting on changes and progress made since the original application, and including details of successes and where actions have not worked and planned initiatives going forward.

Please also attach the action plan from your last application with an additional column indicating the level of progress achieved (e.g. zero, limited, excellent, completed).

4. Key career transition points

(i) Job application and success rates by gender and grade

The table below details an aggregate of junior research posts (e.g. postdocs and clinical research fellows) over the last three years.

Totals for the past 3 years		Applicants			Shortlisted			Interviewed			Appointed							
	Number of Posts	No Data / Did Not Want to Disclose	F	М	Total	% F	F	М	Total	% F	F	М	Total	% F	F	M	Total	% F
Non-Clinical Research	127	131	1000	812	1943	51%	7	3	10	70%	19	16	35	54%	41	13	54	76%
Clinical Research	28	22	39	80	141	28%	4	5	9	44%	2	6	8	25%	7	7	14	50%
Other	23	10	72	36	118	61%	3	0	3	100%	3	1	4	75%	7	1	8	88%

NHLI is recruiting stellar academics to ensure continuity in excellence and supporting its research strategy. Recruitment is based primarily on scientific excellence and women and men meeting this criteria are approached, with search committees including female academics.

Since 2010, NHLI has recruited or appointed the following academic positions

- Non-Clinical Lecturer 4 males and 1 female
- Clinical Senior Lecturer 1 male and 3 females
- Clinical Professor 1 male (PT)
- Non-Clinical Professor 2 male and 2 female (1 PT)

It is clear that our data is not yet complete, however having the Operations Managers on the SAT will improve historical data collection as well as current and future data gathering regarding academic recruitments and appointments (Action 1.7).

136 words

(ii) Applications for promotion and success rates by gender and grade

The table below represents the 2007-09 promotion data, for both clinical and non-clinical staff.

		Male			Female			
	Applications	Promotions	Success Rate	Applications	Promotions	Success Rate	Female % of Applications	Female % of Promotions
2007	4	3	75%	4	2	50%	50%	40%
2008	3	2	67%	8	8	100%	73%	80%
2009	12	8	67%	6	5	83%	33%	38%

2010 and 2011 data has been split into clinical and non-clinical academic promotions and is tabled below.

Non-Clinical Academic Staff

2010 Promotion Round	Male	Female
Total Number of Non- Clinical Academic Staff (2009)	31	26
Total Number of Applications	2	3
Percentage of Staff Applied	6.5%	11.5%
Total Number of Promotions	2	3
Success Rate	100%	100%

2011 Promotion Round	Male	Female
Total Number of Non-Clinical Academic Staff (2010)	25	23
Total Number of Applications	1	1
Percentage of Staff Applied	4.0%	4.3%
Total Number of Promotions	1	1
Success Rate	100%	100%

Clinical Academic Staff

2010 Promotion Round	Male	Female
Total Number of Clinical Academic Staff (2009)	40	9
Total Number of Applications	3	3
Percentage of Staff Applied	7.5%	33.3%
Total Number of Promotions	3	2
Success Rate	100%	75%

2011 Promotion Round	Male	Female
Total Number of Clinical Academic Staff (2010)	39	8
Total Number of Applications	2	1
Percentage of Staff Applied	5.1%	12.5%
Total Number of Promotions	1	1
Success Rate	50%	100%

There have been many comments within NHLI's workshops, networking events, and the 2011 College Survey regarding academic promotions, their process, perception of transparency of procedures and support for academics applying for promotion.

Our data suggests that based on the percentage of female academics in the department, a higher proportion of female staff than male staff are going forward for promotion. Once put forward for promotion, they are either equally successful or more successful than their male counterparts. It is important to note the year on year fluctuations in both male and female percentages reflect the naturally low numbers of staff going forward for promotion year on year.

138 words

(iii) Impact of activities to support the **recruitment of staff** – how the department's recruitment processes ensure that female candidates are attracted to apply, and how the department ensures its short listing, selection processes and criteria comply with the university's equal opportunities policies

All NHLI staff involved in recruitment of staff must undertake appropriate training which includes equal opportunity training. All NHLI job adverts include details of its Athena Silver SWAN status and NHLI's webpages reflect the Institute's gender balance; taking advantage of the bespoke photography we have undertaken over the last few years.

All NHLI Section Administrators will have responsibility for Athena and its aims and are involved in all staff recruitments; as such they monitor that appropriate procedures are followed (Action 1.7).

The Institute is putting together a fellowship recruitment strategy similar to its clinical training initiative, which aims to attract outstanding scientists to the Institute and help them apply for fellowships to join the Institute, including help with grant writing and mock interviews.

123 words

(iv) Impact of activities to **support staff at key career transition points** – interventions, programmes and activities that support women at the crucial stages, such as personal development training, opportunities for networking, mentoring programmes and leadership training.

The Athena Workshops identified the need for clear, independent mentoring at every level. Stepping up our 2009 Action Plan, we will put in place robust focussed mentoring programmes including training for mentors and mentees for each level of staff within NHLI (Action 3.1). An initial survey to NHLI academic staff suggested that support for mentoring was very high, with a 50% response rate to the survey and only one negative response (Action 1.2).

Each NHLI academic was asked whether they would be interested:

- In having an academic mentor;
- In acting as an academic mentor for other academics within NHLI and FoM (depending on grade);
- In acting as academic mentor to NHLI Postdocs, thus continuing the Postdoc Development Scheme.

It was suggested that cross-department mentoring for senior academics within the Institute was necessary as it was deemed that the NHLI was too small for a programme to be effective for individuals of this seniority. The Institute has presented its proposition of cross-department mentoring to Faculty of Medicine management as well as the Faculty Opportunities Committee.

Student mentoring has been formalised for improved interactions between student and mentor (Action 2.1).

Continuing our strong support on Postdocs as per our previous application, the Hol has appointed a new NHLI Lead for Postdocs whose responsibility is the recruitment, retention and career development of NHLI postdoctoral research associates and fellows (Action 1.2); a role similar to the established Director of Postgraduate Research Studies.

NHLI is now developing and implementing a database to monitor training, mentoring and appraisals of postdocs (Actions 1.1. and 1.2) as well as specifically targeting those eligible for fellowships and other funding opportunities. Career, training and development days for postdocs will continue, led by the Institute Lead for Postdocs and the NHLI Postdoc Committee (Action 4.1.5).

294 words

5. Career development

(i) Impact of activities to support **promotion and career development** – appraisal, career development process, promotion criteria.

In the College's 2011 Staff Survey, only 57% of NHLI respondents undertook an annual appraisal (PRDP), which was significantly less than College and FoM average.

Since taking up his post in September 2011, the Head of Institute has addressed this issue with continued encouragement for the scheme as well as leading by example by undertaking the annual appraisals of the Management Advisory Committee. Heads of Sections must now ensure appraisals within their sections are undertaken prior to having their own. We expect the uptake of annual appraisals, and their value to career development, to increase significantly (Action 1.9).

Finally, the Head of Institute has recently appointed a senior academic to lead research and development within the Institute and who will chair the newly created Career Development Opportunities Committee.

128 words

(ii) Impact of activities to support **induction and training** – support provided to new staff at all levels, and any gender equality training.

Imperial's 2011 Staff Survey showed that 76% of NHLI respondents were satisfied with their access to training and development opportunities. Athena workshops highlighted the need to focus on new starters in order to maximise their chances of success.

As part of its new Action Plan, NHLI is setting up a range of tailored initiatives which will complement Imperial's induction programme and go above and beyond what is already in place. These initiatives will be focussed to each

levels within NHLI from existing induction programmes for research students through to postdocs and new academic appointments (Action 3.2).

Focusing inductions in this way has proven to be successful within the Institute with pro-active targeting of postdocs and new academics for future supervisory roles. Historically, uptake of the supervision workshops was very low. However, we have increased uptake of the workshops, resulting in over 40 postdocs and 120 academics attending the relevant supervision workshops.

These focussed induction initiatives will include information (Action 3.2.5) on NHLI organisational structure, funding opportunities, key administrative and academic contacts, recommended and required workshops. Such workshops will include research supervision, recruitment, line management and equality/diversity training.

For career development fellows and new academics, the induction programme will include a one-to-one meeting with the Head of Institute (Action 3.2.1), a targeted seminar to introduce them to the whole Institute (Action 3.2.2), as well as dedicated time with the NHLI web administrator to develop their webpages (Action 3.2.3) and a slot in the NHLI Newsletter to introduce themselves and their research to NHLI staff and students (Action 3.2.4).

257 words

(iii) Impact of activities that **support female students** – support (formal and informal) provided for female students to enable them to make the transition to a sustainable academic career, particularly from postgraduate to researcher, such as mentoring, seminars and pastoral support and the right to request a female personal tutor.

There is no difference in support for female or male students within NHLI. All students benefit from a formalised structure of support which includes each student having up to three supervisors, two degree assessors and a mentor. The mentor is independent from the supervisory arrangements and provides support to the student when and if required.

Since NHLI's 2009 Silver Award, the NHLI Student Mentor role has been formalised to facilitate interaction between students and their mentor (Action 2.1). Students are expected to meet their mentor at least three times during their degree, upon registration, within six months of starting and six months prior to completing. This helps build the relationship and ensures all students have equal and appropriate mentoring. Guidance on discussion topics is also provided.

NHLI also has a number of NHLI Tutors, both female and male, clinical and non-clinical which are campus based and provide further support to all students. At least one tutor attends each postgraduate induction.

Further support is available through NHLI's Postgraduate Office and Director of Postgraduate Studies as well as two College tutors.

Students are closely monitored so that any problems can be identified quickly and final thesis submission is not jeopardised. Interruption of Studies are put in place when appropriate. The overhaul of postgraduate research student procedures, monitoring and mentoring has resulted in submission data for NHLI Research Students to improve dramatically in the last few years, from 30% submission rate in 2003 to 100% submission of late.

NHLI holds an annual postgraduate research day where all students take an active role in chairing sessions, reviewing presentations or presenting their work (Action 4.1.4). The day gives all students experience of scientific meetings as it is recognised that some students may not have the opportunity to attend conferences.

Final year students are encouraged to apply for early career fellowships such as the Wellcome Trust Sir Henry Fellowship, when appropriate.

315 words

6. Organisation and culture

(i) **Male and female representation on committees** – provide a breakdown by committee.

Name of committee	Total	F	M	Female %
Management Advisory Committee	28	11	17	39
NHLI and Royal Brompton Campus Health & Safety Committee	19	11	8	58
Strategic Education Committee	12	7	5	58
NHLI Higher Degrees Committee	32	14	18	44
Short Course Committee	10	5	5	50
NHLI Athena Self-Assessment Team	19	15	4	79

The Career Development Opportunities Committee has just been established and does not yet have a full membership.

17 words

(ii) Female:male ratio of academic and research staff on fixed-term contracts and open-ended (permanent) contracts

Imperial members of staff can be considered for an open-ended contract after 4 years in employment.

New academic staff at lecturer or clinical senior lecturer on the first level of academic appointment, receive a fixed term contract in the first instance

unless their funder insists on open ended contract (such as HEFCE clinical senior lecturers) or unless they already have service with College that means they would qualify for open ended status as above.

Other levels of new academic staff would normally receive an open ended contract unless their funding was time limited, in which case they would receive fixed term for the duration of the available funding unless they already had 4 or more years of continuous service with College.

121 words

(iii) Representation on decision-making committees —evidence of gender equality in the mechanism for selecting representatives.

Committees within NHLI range from administrative, scientific, managerial and organisational. Adequate female representation based on NHLI's gender ratio of academic staff (including Readers and Professors holding honorary contracts) would equate to a 28% representation of female academic staff if based purely on gender. This percentage is reached in all NHLI's Institute committees described above. New committees, such as the Career Development Opportunities Committee will recruit openly, allowing representatives to put themselves forward. When selection is required, care will be taken to keep the gender and workload balances fair.

Importantly, since NHLI's 2009 submission, the percentage of Heads of Section who are female has risen from 0% to 27% which is now representative of the academic staff male:female ratio.

NHLI staff are encouraged to participate in activities beyond the Institute and many female staff sit on Faculty and College-wide committees including the Principal's Advisory Group, CBS Policy Committee and Education Sub-Committees. Imperial-wide roles held by NHLI female academics include Faculty Ambassador for Women and Senior Tutor.

165 words

(iv) **Workload model** – describe the systems in place to ensure that workload allocations, including pastoral and administrative responsibilities (including the responsibility for work on women and science) are transparent, fairly applied and are taken into account at appraisal and in promotion criteria.

NHLI has systems in place monitor workload within postgraduate and undergraduate teaching. When staff participation is required for Institute programmes such as the annual postgraduate day, studentship application reviews and interviews, or research afternoons, staff are invited to volunteer.

If nomination is necessary, staff are given the opportunity to turn down the work requested when they are over-committed in other areas (undergraduate exams, marking, postgraduate assessments, grant applications, etc).

The Head of Institute has clearly stated and endorsed the importance and value of activities such as teaching, management, administration, professional activities, student welfare, development opportunities and mentoring. These must be taken into consideration during annual appraisals and applications for promotion and as such documentation for these require descriptions of such activities.

121 words

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

Meetings, special events and social gatherings have a range of timings throughout the day. With a mix of clinical and basic scientists on several sites, it is a difficult task to accommodate the needs of full and part time staff as well as those with caring responsibilities or clinical commitments.

However, every effort is put in place to communicate events, both social and scientific, in sufficient time to enable any caring arrangements or clinical rotations to be put in place.

For example, annual lectures are scheduled to take place in the early evening but are timetabled at least six months in advance. These events are coupled with receptions before and after the event, are highly popular and attended to maximum capacity.

NHLI's geographic spread has often been a boundary to staff attending events and as such, NHLI now organises and pays for taxis and mini-buses for colleagues to travel together to such events. Increased attendance from cross-campus staff and students has already been noted.

Importantly, priority is taken not to organise key committee and research meetings during school and term breaks and the Institute is looking into the feasibility of setting up a network of childcare within its staff and students to enable attendance at evening events. Notably, NHLI staff had the highest percentage of satisfaction in the 2011 staff survey regarding childcare provision.

The Management Advisory Committee meetings are scheduled to take place during family-friendly hours, and members are able to send a deputy when required. Sections are responsible for organising their own meetings and Heads of Sections are expected to take timing into consideration. Monitoring of such meetings is taking place and reported back to MAC.

278 words

(vi) Culture –demonstrate how the department is female-friendly and inclusive and ensures visibility of women, for example external speakers. 'Culture' refers to the language, behaviours and other informal interactions that characterise the atmosphere of the department, and includes all staff (academic, technical and support) and students.

The 2011 Imperial survey indicated that the Institute staff had a lower experience than Faculty of Medicine or College of pressure that is considered unreasonable 'a lot of the time'. It also had a lower incidence than College or Faculty of discrimination experienced per capita in the previous 36 months.

In the same survey, NHLI results showed a higher incidence of discrimination, harassment or bullying witnessed per capita in the previous 36 months than College or Faculty.

The Athena workshops, 18 months later tackled these issues of discrimination, bullying and culture. When specifically questioned, no gender discrimination was reported. Each workshop was asked to describe the Culture of NHLI. Comments described NHLI as secretive, pocketed, non-celebratory, lacking in transparency and political but in contrast also described NHLI as friendly, collaborative and as having positive female role models. However, many commented on how the recent changes in management structure (including the MAC and increased Section responsibility) were having a positive effect on NHLI (Action 5.1.1). Workshop attendees were also asked how to address the issues, results of which are being reviewed through the SAT and MAC. Further workshops and surveys will continue to question the Institute on its culture and we expect to see the positive changes recently witnessed to continue (Actions 1.3 and 1.4).

NHLI organises a range of events throughout the year including prestigious lectures, research afternoons and social events providing all staff and students the opportunity to get involved, communicate and foster collaborations (Action 4.1.3). These events aim to break down geographical boundaries and promote interaction in an informal environment. It has recently launched a free NHLI Cinema Night to bring together administrators, technicians, academics and students in an inclusive environment enabling cross-professional interactions.

NHLI continues to disseminate its monthly newsletter, launched in 2007, which includes a letter from the HoI, as well as news items, prizes awarded to staff or students, staff appointments and promotions as well as facilities and opportunities available throughout the university. In the recent staff survey, a higher percentage of NHLI staff than those in College or Faculty found the Institute's communications useful.

An annual party is now organised to celebrate the achievements of NHLI's staff and students throughout the previous year, with the HoI congratulating all attendees personally. The Institute has an annual research thesis prize and

has submitted applications for its staff for the Rector's awards in recognition of pastoral care, work within equality and diversity and teaching.

In a change since its last award, the Hol writes personally to each research student congratulating them following the award of their degree and requests feedback on their time at the Institute.

NHLI has invested in professional photography of its staff and students to ensure female visibility across its online and printed publications and liaises on a regular basis with Imperial's communications department ensuring the website reflects the gender balance of the university and Institute.

482 words

(vii) Outreach activities – level of participation by female and male staff in outreach activities with schools and colleges and other centres, and how the department ensures that this is recognised and rewarded (e.g. in appraisal and promotion).

Following its 2009 Silver award, the Institute has appointed from its academic staff an Institute Lead for Outreach. It has also recently approved the appointment of a further two members of staff (academic and administrative) whose roles include assisting with public engagement activities as well as coordination of activities throughout the Institute.

The Hol has stressed that outreach and public engagement is of the utmost importance, both through the Management Advisory Committee and through Institute-wide communications. Such activities are important, necessary and are recognised activities during annual appraisals and in the promotion process.

The importance of outreach and public engagement, as well as recognition of recent activities, form part of the student induction process, as well as postdoc development days.

120 words

7. Flexibility and managing career breaks

(i) Maternity return rate

NHLI's maternity return rate for female academics is 100%. The College supports its female academic staff returning from maternity or adoption leave with its Elsie Widdowson Fellowship scheme. In 2009, there had been no recent NHLI applications for this scheme in stark contrast to six successful applications since. Athena Leads actively encourage potential staff to apply for this fellowship and assist in every aspect of the application, including reviewing the content and putting applicants in touch with previous fellowship holders.

NHLI Aggregate for 2004-11

Staff Type	Instances of Maternity Leave	Number of Returns	Number of Leavers	Return Rate
Non-Clinical Academic	2	2	0	100.0%
Non-Clinical Research	43	37	6	86.0%
Clinical Academic	5	5	0	100.0%
Research - Clinical	20	18	2	90.0%
TOTAL	70	62	8	88.6%

80 words

(ii) Paternity, adoption and parental leave uptake

Since 2006, 7 members of staff have taken paternity leave. There was one instance of adoption leave recorded in 2009 which was NHLI's Case Study for its 2009 Silver Application.

NHLI Aggregate for 2006-11

Ctoff Tuno	Instances of Determity Leave
Staff Type	Instances of Paternity Leave
Non-Clinical Academic	4
Non-Clinical Research	2
Clinical Academic	0
Research - Clinical	1
TOTAL	7

30 words

(iii) Numbers of applications and success rates for flexible working by gender and grade

Data on flexible working is not held centrally by Imperial's Human Resources department. Applications for flexible working are arranged between individuals and their line managers and are also not currently held centrally by NHLI (Action 1.6).

However, in the 2011 Imperial College Staff Survey 83% of NHLI staff who responded were satisfied with their flexible working hours.

57 words

(iv) **Flexible working** –numbers of staff working flexibly and their grades and gender, whether there is a formal or informal system, the support

and training provided for managers in promoting and managing flexible working arrangements, and how the department raises awareness of the options available.

NHLI's 2009 application, its SAT and its workshops revealed a disparity of openness and acceptance of flexible working which was heavily dependent on staff's line manager, research group or section. Recent workshops, Open Meetings and discussion with the Self-Assessment Team indicate that such a disparity may no longer exist.

NHLI's Hol has reinforced the support of the Institute for flexible working. Moreover, he has implemented a clearer definition of the managerial responsibilities of the Heads of Sections in order to ensure that policies such as flexible working are not only being supported but considered, each on a case by case basis.

Each Section is supported by a Section Administrator, reporting to the Operations Managers, who are both on the current SAT and. who will continue NHLI's 2009 Actions relating to flexible working. Each Section Administrator's role and job descriptions will include awareness of Athena and its aims and specifically, include assisting with the implementation of NHLI's Athena Action Plan and collection of data.

Together, they will review the Institute's flexible working applications on a local level and gather data on success rates of applications (Action 1.6).

186 words

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

Detailed one-to-one advice is available to all members of staff at all levels from the time of maternity or adoption leave initial discussions until their return to work. Staff and students on parental leave have continued access to their email and thus continue to receive Institute materials such as the NHLI Newsletter and Funding Bulletin, invitations to lectures as well as networking and social events.

Students' studies are interrupted for an equivalent time whilst they are on parental leave ensuring that their timed targets are moved accordingly, ensuring equal opportunities. When returning from leave, they are helped with any part-time study arrangements required, which may be independent from their employment.

The College supports its female academic staff returning from maternity or adoption leave with its Elsie Widdowson Fellowship scheme, which allows female academics to concentrate fully on their research work upon returning from maternity or adoption leave. The award allows the Institute to relieve the academic of any teaching or administrative duties in order to concentrate fully on research. Discussions in 2009 during our initial Silver application identified a near total lack of knowledge of this scheme which therefore became an important target in NHLI's Action Plan.

The Institute has since ensured that the scheme is widely known and has had six successful applications for the fellowship, including four for clinical academics.

Non-clinical academics have traditionally requested support to relieve them from administrative or teaching activities. Clinical academics must split their time between undertaking research or teaching and clinical duties. The fellowships have provided them with the opportunity to relieve them from these clinical duties. Upon returning from maternity leave, our successful fellowship holders have thus been able to concentrate 100% of their time on research for six to 12 months following their return.

In addition, the Institute's internal Postdoctoral Travel Award scheme enables postdocs to apply for funding to attend national and international conferences and meetings. Since our previous application, this has been broadened to include the possibility of applying for funds for caring responsibilities incurred when travelling to a conference, meeting or training.

345 words

TOTAL: 3,393 words (Max 5,000)

8. Any other comments – maximum 500 words

Please comment here on any other elements which are relevant to the application, e.g. other SET-specific initiatives of special interest implemented since the original application that have not been covered in the previous sections.

NHLI's SAT reflects the diversity, geography, hierarchy of the Institute. The combination of research, academic and administrative members is key to implementing our Action Plan and collating data for future goals, including feedback from staff and students throughout the Institute. This will also ensure that no one member of the SAT is over-committed with regards to the Action Plan.

Following the 2009 application process, it was highlighted that communication of NHLI's activities toward its Action Plan was poor which created a perception that activities were not being undertaken. Recent Open Meetings and Workshops have addressed this. There is a clear commitment and understanding of the whole Institute towards the Athena principles. This is shown by Section Meetings including Athena as a standing agenda item (Action 5.1.2). While this is not yet implemented throughout all NHLI sections,

it is one of the Head of Institute's aims via the Management Advisory Committee (Action 1.8).

The 2011 College Survey provided NHLI with essential information regarding the Institute, its staff, processes, culture and thus importantly overall perceptions of the Institute. The survey indicated worrying information about witnessing bullying, harassment or discrimination within the Institute. However, the survey unfortunately could not identify whether any action was undertaken following such incidents.

The Head of Institute is committed to ensure that NHLI is a supportive environment where staff feel able to report incidences (occurring or witnessed) of bullying, harassment or discrimination. His ultimate aim is that no such occurrences would take place within the Institute. As such, he will be instigating mandatory equality and diversity training throughout the Institute.

It is also clear that further data gathering is required and the above forms part of NHLI's long term plan of improving NHLI's working environment to be a supportive, encouraging and engaging place to develop one's career (Action 1.5).

Our aim is to undertake our Athena Workshops and a staff survey on a regular basis (Action 1.4 and 1.3). These provide invaluable data and perceptions of the Institute but uptake must be representative. The 2011 College Survey had a 43% uptake from the Faculty of Medicine staff and an estimated 30% response rate from NHLI staff. We aim to increase this rate significantly by engaging with staff and demonstrating the benefit of such data collection. This can be done in part by demonstrating how all data and feedback gathered so far has implemented change within the Institute.

A major achievement within the Institute since our last application was the salary review of all female professors in 2011 and female readers in 2012. Following this review, salaries have been adjusted to achieve parity between genders. This addresses a historical and traditional problem in the workplace as well as issues raised in the 2011 staff survey.

Although not yet formally announced, we are delighted that NHLI as a department has been awarded an Academic Opportunities Committee Award for the work that it has undertaken over a number of years to support women in science.

494 words

9. Action plan

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

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

10. Case study: impacting on individuals – maximum 1000 words

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

Dr Lisa Gregory

I have been employed as a postdoc in the leukocyte Biology section for eight years. During this time I have taken two maternity breaks of six months each. Returning to work after my second child I found the burden of combining family life and my role as a mother with a full time career overwhelming. I contemplated leaving scientific research for a less demanding job, although this undoubtedly would also have been less fulfilling. Following discussion with my Head of Group and line manager at our professional development review plan meeting a flexible part time working week was agreed. Working a four day week has enabled me to continue working in science, a job which I love, and hopefully make a positive contribution too in terms of supervising students, publishing scientific papers in peer reviewed journals and pursuing my research aims, with my equally important role as a mother to my two

Attending conferences is an important part of scientific research to exchange ideas with colleagues and world leaders in the field and to gain exposure and promote discussion of my own data. However, as a parent of young children conference attendance requires childcare arrangements to be put in place to cover my absence which incurs an additional financial burden. On two occasions I have been fortunate enough to receive an NHLI Foundation Travel Award for extra-ordinary costs relating to caring responsibilities from the NHLI to cover the cost of extra childcare. This award enabled me to attend and present data at the British Society of Immunology annual conference and attend a forthcoming Keystone symposia on pathogenic processes in asthma and COPD. The flexibility of my Head of Section and Imperial College London in allowing me to work part time and the recognition by NHLI and the College of the obstacles faced by working parents has facilitated my endeavours to combine a happy family life with a fulfilling scientific career.

http://www1.imperial.ac.uk/medicine/people/l.gregory/

Dr Sonya Babu-Narayan

I joined the clinical cardiology section of the National Heart and Lung Institute as a part time doctoral student in 2002 combining clinical research with clinical practice. In the latter years of my PhD, I noticed a shift within NHLI in attitudes towards research students. The support for doctoral students increased and more formalised structures of support, mentoring and good practice were put in place.

After completing my PhD, I returned to my full time NHS based clinical training. I was committed to a clinical academic career and NHLI supported this commitment. Following my PhD, I applied for several senior clinical research fellowships and was provided with support on the application, costing and content. This support was wide-ranging and was provided not only by administrators but also my sponsor, line manager and previous award winners, both within the Institute and importantly within the Brompton hospital

In May 2011, I was awarded a British Heart Foundation Intermediate Clinical Research Fellowship with 4 years research funding that allows me to dedicate 50% of my time to clinical research and 50% to clinical care and teaching.

Following this, I was appointed Clinical Senior Lecturer at NHLI in January 2012 for 5 years after staff at NHLI and Royal Brompton worked together to procure an additional 1 year's funding. This funding allows me to direct longer clinical studies with greater scientific value.

At the time of appointment in January 2012, I was 7 months pregnant. At this point I had been an employee of the NHS, not of the College. Despite this, Imperial extended their maternity package to me to financially improve my circumstances during my 6 months maternity leave.

Additionally, through the NHLI academic mentoring scheme, I was able to discuss and specifically plan returning to work after maternity leave. Balancing child care with maintaining the high academic standards I expect of myself are important concerns for me as a career mother without extended family support in London. As such, I will also now contribute to supporting future female academics returning to work through the new maternity buddy scheme whereby female academics can meet and provide a sounding board for one another.

During my maternity leave I was very keen not to miss important research meetings with collaborators and students. My Head of Section and others invited me to attend these meetings with my baby if I wished. NHLI and Section staff provided a welcoming culture. This was very important in facilitating keeping in touch and maintaining strong team relationships. I continued to receive NHLI communications as well as invitations to research and networking events.

Prior to my maternity leave, I was directed to the Elsie Widdowson fellowship and supported in putting an application together. I was successful in my application which commenced on my return from maternity leave. These

funds enable me to recover research time and output lost whilst on maternity leave.

The supportive approach of NHLI towards flexible hours, working from home and travel awards that do not exclude use for childcare costs are NHLI and College policies that allow me to pursue my wish to contribute clinical research that can improve the lives of patients whilst maintaining my roles as a doctor and mother.

http://www1.imperial.ac.uk/medicine/people/s.babu-narayan/

863 words

Action	Description of action	Action taken already and outcome at November 2012	Further action planned at November 2012	Progress Log	Responsibility	Timescale	Start date	Success Measure
1	Baseline Data and S	Supporting Evidence						
1.1	Postdocs	Questionnaire sent and database started	Online questionnaire	August 2012 questionnaire launched	CEA	Monthly	April 2012	Response rate
1.2	Mentoring	Survey sent to all NHLI Academics to identify mentoring needs across the Institute as well as recruiting mentees	Set up database with results	Ongoing	CEA	SPT 2013	AT 2012	Response rate
1.3	Staff survey		Liaise with HR; feedback from previous survey Set up new survey		Hol IM ILW RM SAT	2014	SPT 2013	Response rate
1.4	Athena Workshops	2012 Workshops undertaken	SAT Feedback 2012 workshops Set up 2014 Workshops	Ongoing	ILW RM SAT	ST 2014	ST 2014	Attendance
1.5.	Review cases of bullying, harassment, discrimination	Divisional and Operations Managers members of SAT			Hol	Annually	SPT 2013	Collection of data

1.6.	Flexible Working	Divisional and Operations Managers members of SAT	Section Administrators to review Flexible Working arrangements within sections		SA	Annually	SPT 2013	Collection of data
1.7.	Academic Recruitment	Divisional and Operations Managers members of SAT	Section Administrators and HR to ensure appropriate data collection	Ongoing	HR SA Divisional and Operations Manager	Annually	SPT 2013	Collection of data
1.8.	Dissemination of information	Set up of SAT	SAT to report back to committee on dissemination throughout NHLI	Ongoing	MAC SAT	Termly	AT 2012	Full dissemination
1.9	Uptake of annual appraisal (PRDP)	Hol requires confirmation of section appraisal prior to undertaking HoS PRDP		Ongoing	All managers	Annually	AT 2012	Response rate
2	UG and PG Studer	nts						
2.1	PG Mentoring	Formalisation of mentor role		Completed	DPS	Completed		
3	Key Career Transi	tion Points, Appointment	s and Promotions					
3.1	Mentoring							

3.1.1	Mentoring for Postdocs	Database launched and data gathering	Training day Mentor matching	Ongoing	ILP CEA PDC	Ongoing	AT 2012	Sustained level of uptake
3.1.2	Mentoring for senior academics (Reader and Professor)	Athena Workshops Mentoring Survey Plan for Cross-SID scheme pitched to SIDs and Faculty Opportunities Committee	Idea approved by other Heads of SIDs. List of NHLI Mentors being collected		FoM Faculty Ambassador for Women ILW	Longterm	AT2013	Uptake of scheme and feedback
3.2.	Maximising experien	ce of new starters and en	suring their succes	SS				•
3.2.1	Face to face meeting with Head of Institute on starting	Meetings for new 2012 starters taken place			Hol	Ongoing	SPT 2012	Feedback from Hol and new starter
3.2.2	Seminar to introduce new starters to NHLI (breakfast/lunch or afternoon seminar)	Piloted schemed for six months	Aim to refine scheme after feedback	SPT 2013	CEA HoS	Ongoing	SPT 2012	Attendance Feedback from new starter at end of probation period
3.2.3	Provide 1 hour slot with web manager to start professional and group web pages	Appointment of Communications and Events Administrator		Ongoing	CEA	Ongoing	SPT 2012	Webpage for new starter within six months of appointment

3.2.4	Write a focus slot in the NHLI Newsletter on starting	Appointment of Communications and Events Administrator		Ongoing	CEA	Ongoing	SPT 2012	Inclusion in NHLI Newsletter within three months of appointment
3.2.5	Provide a tailored information pack	Gathering information		Ongoing	CEA RM Operations and Divisional Managers ILP ILW	Ongoing	SPT 2013	
3.2.6	Provide mentoring – see section 3.1. for career development fellows – for new academic appointments	Ensure provision of mentor			Line managers Operations and Divisional Managers	Ongoing	SPT 2013	Feedback from new starter at end of probation period
4	Career Advice and	Support						
4.1	Increase scientific int	teraction and collaboration	n between staff					
4.1.1	Increase new media options for Postdocs and PGRs; e.g. Facebook, Twitter	Discussed at MAC	Discuss at other relevant committees	Ongoing	Postdoc Committee PGR Committee	Ongoing	ST 2013	Use of media

4.1.2	Open access to Postdoc and PGR distribution lists to share reagents, techniques, etc	Postdoc list opened	Open PGR list Announce new access	Ongoing	Postdoc Committee PGR Committee	Ongoing	AT 2012	Feedback from committees Use of lists
4.1.3	Research Days	Discussed at MAC Input requested	Establish potential themes	Ongoing	MAC RM HoS CDOC	Ongoing	SPT 2013	Themes put forward Event attendance
4.1.4	PGR Day	Established day – held annually		Ongoing	HDRC RM Postgraduate Administrator	Ongoing		Attendance Feedback
4.1.5	Postdoc Day	Established day – held every two years	Engage postdocs in proposing topics	Ongoing	ILP Postdoc Committee CEA RM	Ongoing		Attendance Feedback
5	Culture, Communic	ations and Departmenta	l Organization					
5.1	Increase transparence	cy of management and de	cision making					
5.1.1	Implementation of Management Advisory Committee	Completed		Monthly meetings held	Hol	Ongoing	AT 2011	2014 Staff Survey outcomes

5.1.2.	Define Head of Section role	Discussed at MAC	Liaise with HR Refine role	Ongoing	Hol IM RM	Ongoing	SPT 2013	Document detailing roles and responsibilities of a HoS within aligns to Athena principles
5.1.3.	Implementation of defined Head of Section role				Hol IM		AT 2013	HoS engaging with new role 2014 Staff Survey outcomes Uptake of appraisals
6	Career breaks/flexi	ble working						
6.1	Continue 2009 Action Plan							

Notes and Key to Action Plan:

Start Date	Code
Already embedded/completed	
Autumn Term 2012	AT2012
Spring Term 2013	SPT2013
Summer Term 2013	ST2013
Autumn Term 2013	AT2013

Spring Term 2014	SPT2014
Summer Term 2014	ST2014
Academic Year 2011-2012	AY2011-2012
Completed since March 2012	Completed

Abbreviations

CDOC	Career Development Opportunities Committee
CEA	Communications and Events Administrator
DPS	Director of Postgraduate Research Studies
FoM	Faculty of Medicine
Hol	Head of Institute
HoS	Head of Section
IM	Institute Manager
ILP	Institute Lead for Postdocs
ILW	Institute Lead for Women
MAC	Management Advisory Committee
NHLI	National Heart and Lung Institute
PDC	Imperial Postdoc Development Centre
PGR	Postgraduate Research

PRDP	Personal Review Development Plan
RM	Research Manager
SA	Section Administrator
SAT	Self-Assessment Team
SID	School, Institute or Department

NHLI Athena SWAN Application

Action Plan - May 2009 - Updated

Ref	Description	Responsibility	Timetable	Status	Comments
1.1.	Women in Academic Medicine	Faculty Ambassador for Women Faculty Research Theme Leaders Head of Institute Career Development Opportunities Committee Institute Lead for Women	Research & information gathering – summer 2009 onwards Annual reports from January 2010 onwards	Ongoing,	3 out of 5 clinical academics recruited since 2009 have been female. This is a long term aspiration for the Institute – already improving (see section 5.1)
1.2.	Monitoring of Studentship Applications and Recruitment	Research Manager Postgraduate Administrator Director of Postgraduate Studies	Trial summer 2009 Launch October 2009	Ongoing	
2.1.	Increase Communication of the Promotion Process	Head of Institute Institute Manager Operations and Divisional Managers Head of Section Section Administrators (Various) Academic Mentors	In line with Imperial's academic promotion timetable	Completed	All staff emailed to highlight application deadlines; Reminders sent HoS sent emails to identify staff ready for promotion
2.2.	Increase Recruitment of Female Scientists	Faculty Research Theme Leaders	To be co-ordinated with 1.1.		
2.2.1.	Increase Outreach Activities to School Pupils	Communications and Events Administrator Outreach Officer Career Development Opportunities Committee	Research & information gathering – summer 2009 Outreach activities from 2010	Ongoing	Appointment of Institute Lead for Outreach to coordinate activities across the NHLI; recruitment of member of administrative staff to help Lead achieve goal

2.2.2.	Monitor and Increase Participation of BSc's	Director of Undergraduate Studies Undergraduate Administrator	Research & information gathering – summer 2009 Launch 2010	Revised: future action	Being incorporated into wider educational strategy for NHLI
2.2.3.	Increase Recruitment of Clinical Research Fellows	Research Manager Director of Postgraduate Studies Career Development Opportunities Committee	Trialled February 2009 Launch June 2009	Ongoing	First Clinical postgraduate "fair" held. Research Manager attended national Respiratory and Cardiovascular society meetings to advertise research at NHLI. Initial positive feedback, but data gathering over minimum of 5 years necessary to see effect. This is a long term goal and initiatives are ongoing
2.2.4.	'Women in Clinical Academia' Day	Faculty Ambassador for Women	Co-ordinated with 1.1. Launch 2010	Revised	Incorporated into Faculty Ambassador role as Institute too small to see effect.
3.1.	Academic Mentors	Head of Institute Operations and Divisional Managers Career Development Opportunities Committee Institute Lead for Women Learning and Development Centre Institute Lead for Postdocs Centre for Educational Development Human Resources	Research & information gathering – winter 2009 Launch 2011	Expanded and incorporated into new Action Plan	Clarified Mentor role for PGR students Identified need for widening mentor system for Postdocs Clarified role of mentor (Academic Advisor) for probationary Lecturers and Clinical Senior Lecturers Further development incorporated into new action plan
3.2.	Interim Professional Development Day		Launch Autumn 2009	Cancelled	Not adopted - after canvassing opinion, staff felt that this was not going to address the issues brought

4.1.	Communications and Information		Ongoing		up as a result of poor take up of annual appraisal. Appraisal uptake increased; monitoring to ensure near full capacity.
4.1.1.	NHLI Induction Information Pack	Operations and Divisional Managers Research Managers Human Resources Manager Institute Lead for Women Institute Lead for Postdocs	January 2010	Ongoing and included in new Action Plan for new recruits	Recognised the need to provide tailored information for each level of staff. Induction packs have been successful, now given to all new recruits and are coordinated with contacts page on the website
4.1.2.	Improved Divisional Staff Communications	Head of Institute Group, Section Administrators & PAs	Summer 2009	Ongoing Action 1.3; 1.4 and 1.8 in new action planned designed to gather relevant metrics.	Done via website, all staff current encouraged to develop their PWP, New FTE appointed as Communications and Events administrator to do this. Key communications are sent directly from Hol.
4.1.3.	NHLI Athena Annual Report	Athena Lead Athena Administrator	2010	Revised	Workload was too high without proper administrative support. New administrative staff now appointed with Athena remit. Annual reports were given verbally to Institute.
4.2.	Committees and Management Roles	Head of Institute Institute Lead for Women Committee Chairpersons	Autumn 2009 with regular reviews	Reviewed in Oct 2009, balanced	All committees feed into the new Management Advisory Committee and are reviewed

		Senior Academic Staff			annually for gender balance.
4.3.	Visibility of Academic Women	Communications and Events Administrator Research Manager Course Administrators Career Development Opportunities Committee	Ongoing		All staff have been encouraged to update and develop their PWP. Athena leads have regular contact with College media group to ensure all material reflects the actual gender balance of the College and the Institute specifically. Also to ensure that there is adequate representation of women at planned events (e.g. speakers at events). Professional photography of NHLI academics undertaken to update website and literature with gender balanced images
5.1.	Elsie Widdowson Fellowships	Institute Lead for Women Operations and Divisional Managers Section Administrators	May 2009		Now been added to NHLI website under the "useful links" Lobbied HR to make sure that all staff receive information on the fellowship when they register their pregnancy with HR. Athena leads taken an active role in helping potential candidates with their applications NHLI been very successful with these awards (6 academics – 4 from clinical academics have been awarded in the NHLI since 2009).
5.2.	Flexible Working	Institute Lead for Women	October 2009 with yearly	Ongoing	Flexible working actively

		Heads of Sections Operations and Divisional Managers Section Administrators	review	Action 1.6 of new Plan will collect data.	supported and Hol has stated at MAC that the policy is available and staff are able to discuss with their managers Success marked by increased visibilities of senior academics working flexibly
5.3.	Postdoctoral Travel Awards including Caring Responsibilities	Research Manager Institute Lead for Postdocs PostDoc Committee	September 2009	Embedded - completed	Scheme has been rolled out to Institute