

Chairs/Steering Group Seen in Health Network seeninhealth@outlook.com seeninhealth.org

27 January 2025

Dear Office for Statistics Regulation (OSR),

Request to declassify NHS staff survey data

We are writing to you as the Chairs of the Sex Equality and Equity Network for NHS employees (SEEN in Health) which launched on 11 May 2024.

Our mission is to create an environment in the NHS where staff are encouraged to raise issues related to the protected characteristic of sex and feel safe doing so – speaking up for themselves as employees and on behalf of patients. This is critical both to their rights and wellbeing as employees of the NHS, and as a workforce dedicated to delivering high quality and safe care in the NHS.

We aim to ensure that workplace-based policies and training resources are compliant regarding the protected characteristic of sex and reflect the responsibilities of NHS organisations under both the Equality Act (EA10) and Public Sector Equality Duty (PSED).

We have been inundated with concerns from NHS employees in relation to the staff survey (**www.nhsstaffsurveys.com/survey-documents/**). As the biggest employer in Europe this survey should be a rich source of data, but its questions demonstrate bias, contrary to the PSED, and will prevent NHS employers from both understanding and protecting staff from discrimination.

Many staff are boycotting the survey as a result.

Some examples are listed below:

- Question 15, "Does your organisation act fairly with regard to career progression/promotion, regardless of ethnic background, gender, religion, sexual orientation, disability or age?", fails to ask the respondent if their employer acts fairly in respect of all protected characteristics. Despite the introduction of the Worker Protection (Amendment of Equality Act 2010) Act 2023 and previous staff surveys indicating high rates of sexual harassment of women (which is likely to be under-reported due to the perennial issue of flawed questioning on sex), this question does not ask if their employer acts fairly regardless of their sex. It also fails to account for whether staff who may need protection under the protected characteristic of gender reassignment or belief are being treated fairly by the NHS.
- Question 16 fails to ask the respondent if they have experienced sex discrimination, despite the NHS introducing the Sexual Safety in Healthcare charter this year. As with the previous question 'gender' has no legal basis and the NHS cannot assume that all respondents will understand that gender, in this instance, presumably refers to sex.
- Question 17 asks respondents about their experiences of unwanted behaviour of a sexual nature. It is unclear how, given the phrasing of question 16 and the errors [options] in question 27 analysts will be unable to determine progress made to reduce sexual harassment towards women.
- Question 27 a and b ask for information on gender that best describes them. Analysts will not be able to determine with any degree of accuracy, the sex of respondents due to the conflation of the terms sex and gender. The survey also compels, by way of not including an option to state 'do not have a gender identity' in 27a, respondents to acknowledge a belief they may not have. We understand this alone has deterred many staff from completing the survey, leading to result bias.

NHS data is used to inform internal activity, from recruitment and communications to staff network endorsement and policy.

For example, NHS Confederation's Health and Care LGBTQ+ Leaders Network use data on gender, not sex, to leverage favourable policies, claiming that "LGBTQ+ staff represent one in 20 of the NHS workforce...persistent inequity in staff experience...LGBTQ+ Leaders Network conducted its largest ever survey...to delve deeper...to better understand the trends...".

Please refer to www.nhsconfed.org/publications/illusion-inclusion-lgbtq-staffexperience-healthcare

Trends cannot be identified from flawed data: gender cannot be assumed a like-for-like replacement for sex, and survey respondents are most likely to exclude those who recognise sex as binary as a result.

We believe the survey contravenes the **Code of Practice for Statistics** and would propose that NHS staff data relating to sex, discrimination, unwanted behaviour of a sexual nature, gender and sexual orientation are declassified until such a point that the NHS uses clear, sexed language.

We appreciate your consideration of these issues and look forward to your response.

Kind regards,

SEEN in Health Chairs