



British Orthopaedic  
Association

# DIVERSITY AND INCLUSION STRATEGY 2020

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# Foreword

The British Orthopaedic Association (BOA) is a registered charity founded in 1918 to represent orthopaedic surgeons within Great Britain. The Association provides a forum for research, education, advice and support on all aspects of healthcare management related to orthopaedic surgery.

Trauma and Orthopaedics (T&O) is a challenging and rewarding career but its future strength in a competitive environment depends on attracting and retaining the best applicants from a more diverse workforce, nurturing the talents of all of its members and delivering care through a workforce that better reflects the population it serves.

The BOA is committed to embedding the principles of diversity and inclusion across its core objectives, thus providing equal opportunities and eliminating discrimination in all areas.

The demographic break down of members of the T&O profession is difficult to establish. While figures on gender are available, protected characteristics, such as ethnicity, religion, disability and sexual orientation are harder to obtain. The BOA itself only monitors gender statistics, although our Action Plan commits us to work to change this.

Current figures show that surgery in general is neither attracting nor retaining a diverse workforce. 55% of medical students are female but by specialty training this has reduced to 30% and by consultant level it is 13%.

T&O is the second largest surgical specialty, however it has the lowest percentage of female surgeons across all grades with 7% at consultant and SAS grades and 19% at specialty training level<sup>1</sup>. This clearly suggests that action needs to be taken to address the imbalance and to nurture, develop and maintain interest in T&O as a career, from medical school onwards.

It should be acknowledged that the number of female surgeons in T&O has increased over the past decade (13-17% across all grades, 3-6% at consultant and Specialty and Associate Specialist (SAS) level, 13-19% at Specialty Registrar level and 15-30% in Core training) but the rate of change is insufficient to keep pace with the changing demographic at medical student level.

The BOA has circa 5,000 members, including 1905 consultants, 421 Post Certificate of Completion of Training (CCT) doctors, 318 SAS surgeons, 1041 higher level trainees, 143 Foundation doctors and 147 medical students. 12% of the total BOA membership is female, 7% at consultant level and 21% at trainee level<sup>2</sup> (appendix 1). Of the 125 female members at consultant level 30% (37) are within five years of CCT.

All organisations want to recruit from the widest pool of talent and to help them progress and deliver to the communities they serve. The government sponsored McGregor-Smith review<sup>3</sup> found that greater progress and positive outcomes are needed to ensure all organisations benefit from the wealth of diverse talent on offer. It is key to future productivity and performance. The Cabinet Office's Ethnicity facts and figures website and the Business in the Community (BITC) Race at Work Survey<sup>4</sup> highlight that ethnic minority staff still encounter significant disparities in employment and progression. Universities and business have both acknowledged their historical failure to embrace diversity and adopted a philosophy of change<sup>5</sup>. The creation of the Athena Swan Charter in 2015 encouraged academic institutions to commit to advancing the careers of women in science. The 30% club<sup>5</sup> was launched as a campaign within the UK in 2010 and has since spread to fourteen other countries. It has driven innovation, better corporate performance and increased share-holder satisfaction. Stonewall has established the UK Workplace Equality Index, a tool to measure LGBTQ+ inclusion<sup>6</sup>. Gender imbalance serves to highlight the wider issue of the diversity of the profession. Action is required to ensure that T&O is more attractive to under-represented groups. This strategy seeks to identify the obstacles, and sets out a plan to begin to address the issues.

<sup>1</sup> <https://digital.nhs.uk/data-and-information/find-data-and-publications/supplementary-information/2019-supplementary-information-files/medical-and-dental-staff-by-gender-specialty-and-grade-ah2667>

<sup>2</sup> Not all members chose to provide information on their gender

<sup>3</sup> <https://www.gov.uk/government/publications/race-in-the-workplace-the-mcgregor-smith-review>

<sup>4</sup> <https://www.bitc.org.uk/race/>

<sup>5</sup> The 30% Club campaign was set up by Dame Helena Morrissey in 2010 with the aim of achieving a minimum of 30% female representation on FTSE 100 boards. As of 2016, they extended the scope of this original target to a minimum of 30% women on FTSE 350 boards by 2020. The original target was reached in September 2018 and the extended target was reached in September 2019.

<sup>6</sup> <https://www.stonewall.org.uk/creating-inclusive-workplaces/workplace-equality-indices/uk-workplace-equality->



## **BOA Vision**

An inclusive surgical profession that inspires, attracts and retains the best talent from a wide variety of backgrounds

We believe that achieving this vision will promote better quality patient care

# BOA Diversity Mission Statement

To lead the profession to challenge the status quo, stimulate cultural change and improve diversity and inclusion across Trauma and Orthopaedics. To create an inclusive culture that values diversity and for each member to feel respected and included.

## BOA Diversity Principles

1. We are committed to equality of access to a T&O career and to the services of the Association.
2. The following groups are under-represented within T&O and the BOA itself:
  - Women
  - Black, Asian and Minority Ethnic
  - Disability
  - LGBTQ+
3. We expect all orthopaedic surgeons to maintain a work environment that values and respects diversity.
4. All interactions with colleagues, staff, patients, and families should reflect the values of fairness, dignity, and respect.
5. We will review our practices and procedures regularly to monitor progress.
6. We will promote the diversity of our organisation.
7. If failings are demonstrated, we will address them.



# Strategic Objectives

## 1. Commitment and Communication

- To gather data and understand the needs of minority groups within the BOA and the T&O profession.
- Clearly demonstrate a commitment to addressing that under representation.
- Collect and communicate information specific to diversity and encourage research into issues in this area.
- Challenge comments suggesting that some groups may not be suitable for a career in T&O).

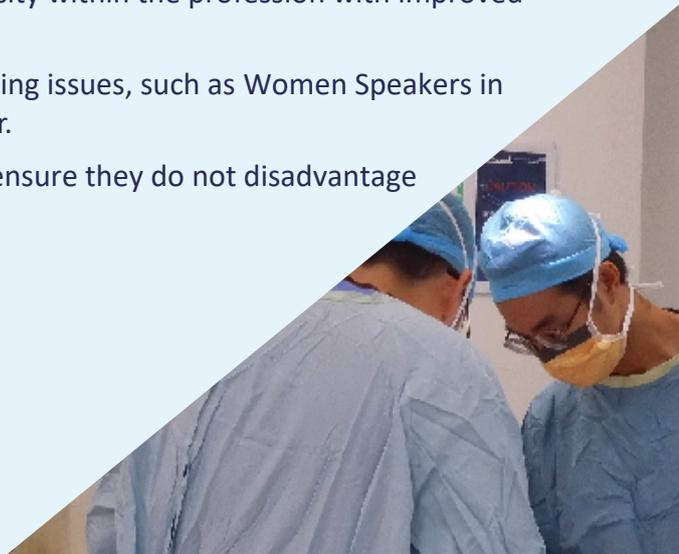
## 2. Leadership

- Cultivate and support an inclusive culture within T&O.
- Strengthen the diversity of BOA Leadership.
- Understand the unique professional and personal challenges minority groups face in leadership roles.
- Encourage our Specialist Societies to adopt a similar approach and review their current practices.
- Support the identification and dissemination of best practice.
- Connect with other bodies, including the NHS and Professional Bodies to promote awareness of and tackle issues relating to diversity.
- Encourage under-represented members' participation in leadership programmes, such as the BOA Future Leaders Programme and the RCS Emerging Leaders Programme.

## 3. BOA Congress and Educational Events

- Promote visibility by increasing the diversity of chairs, speakers and invited guests at the BOA Annual Congress, educational events and courses.
- Work with the Specialist Societies to challenge the status quo and ensure invitees comprise a mix of grades and experts in the field and promote diversity within the profession with improved presence from under-represented groups.
- Connect with other organisations who are championing issues, such as Women Speakers in Healthcare<sup>1</sup> and encourage BOA members to register.
- Review activities such as awards and fellowships to ensure they do not disadvantage families with children.

<sup>1</sup><https://www.womenspeakersinhealthcare.co.uk/>



## 4. Recruitment

- Increase awareness of T&O as a career option, especially for medical students, with the aim of driving greater diversity within the profession.
- Encourage BOA members to contribute to wider careers activities such as participation in Inspiring the Future.
- Work with the Royal Colleges and Specialist Advisory Committee (BOA) to identify the barriers and areas where the BOA can effect change
- Provide clear careers information on T&O and use this to challenge perceptions of the specialty.

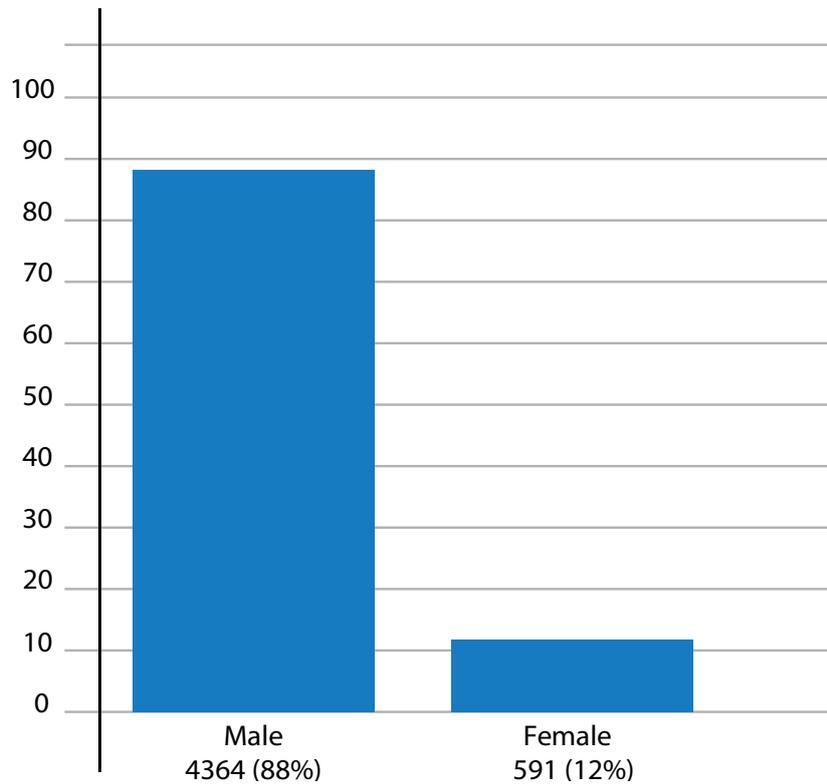
## 5. Career Support

- Increase student and trainee participation within the Association.
- Provide practical careers information and support across all grades.
- Promote mentorship and networking opportunities.
- Support the membership groups that are currently under represented within the Association (trainees, SAS, AHP).



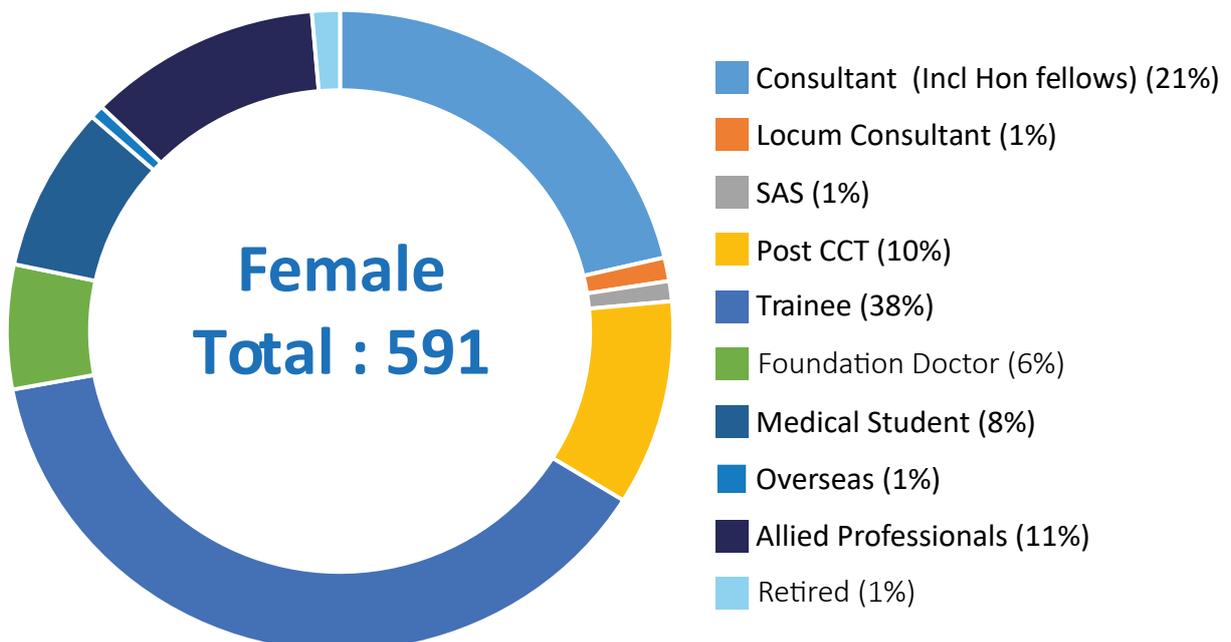
# BOA Members and Council

## BOA Total Members



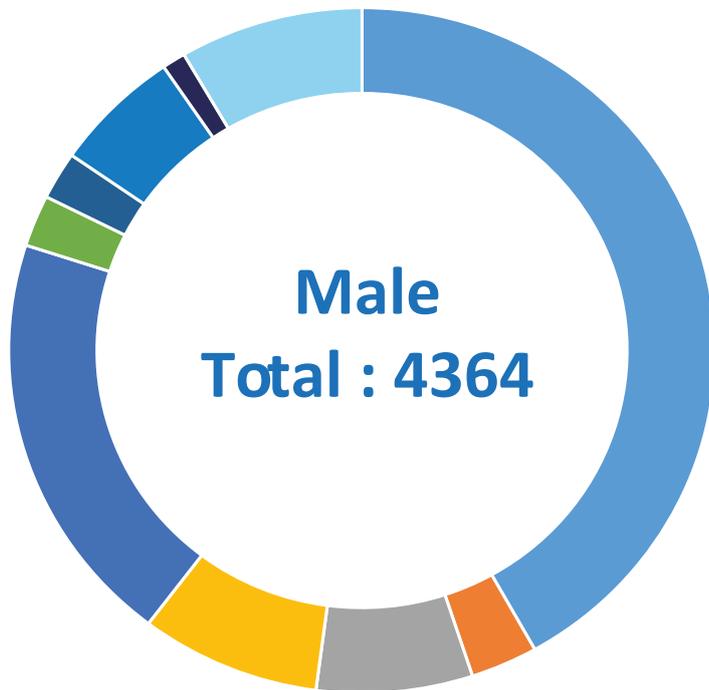
## BOA Membership Female

### Breakdown of Females by Membership Category



Notes : Percentages equal 99% due to rounding

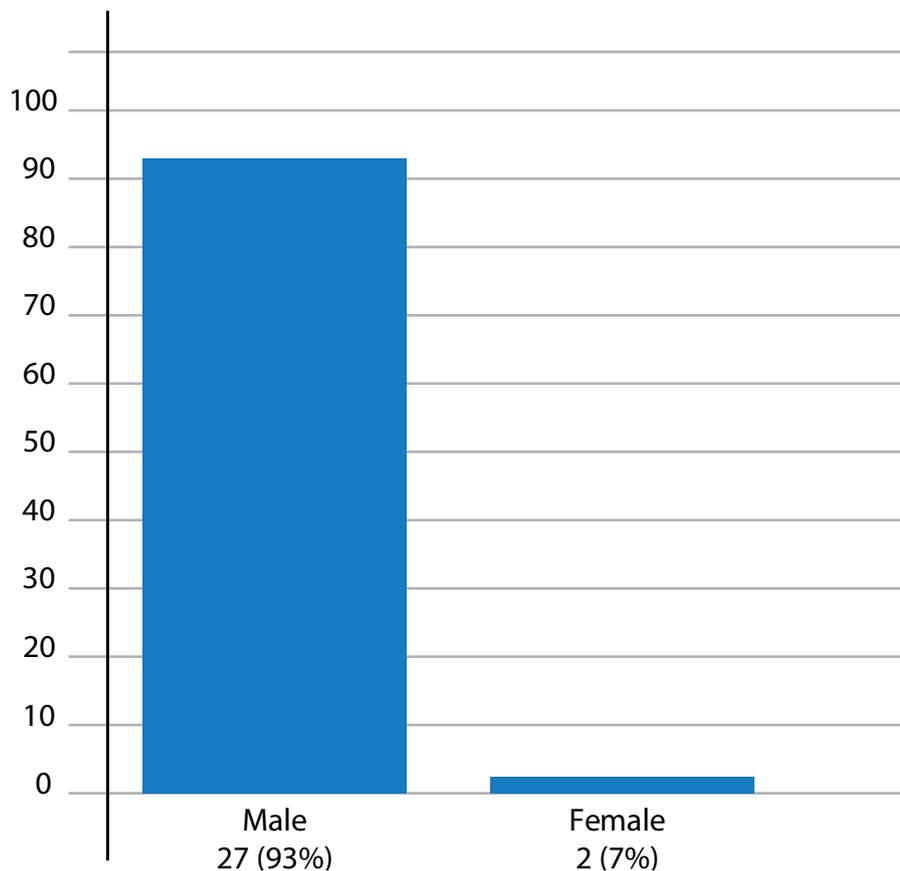
# BOA Membership Males



## Breakdown of Males by Membership Category

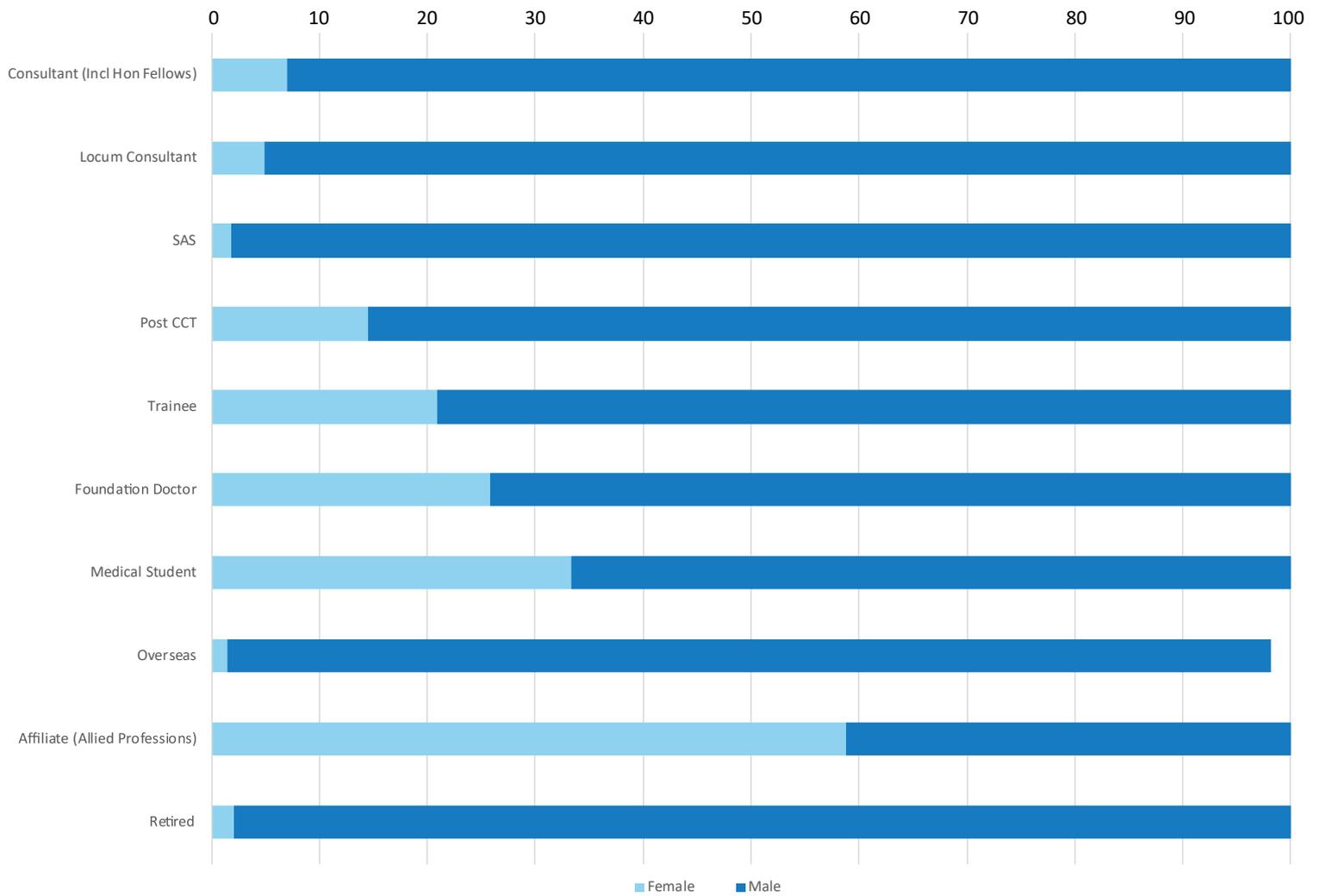
- Consultant (Incl Hon fellows) (42%)
- Locum Consultant (3%)
- SAS (7%)
- Post CCT (8%)
- Trainee (20%)
- Foundation Doctor (2%)
- Medical Student (2%)
- Overseas (6%)
- Allied Professionals (1%)
- Retired (8%)

# BOA Council



Notes : Percentages equal 99% due to rounding

# % of overall membership at each grade



Notes : Percentages equal 99% due to rounding