

Governing Body

1 September 2021 Corporate Assurance Report 2021-22 Qtr 1

Lead Executive:	Chris Edwards, Chief Officer
Lead Officer:	Ruth Nutbrown

Purpose:
To provide intelligence to Governing Body members on Corporate Business for the period April to June 2021 (Qtr 1 21-22).
Background:
This is a quarterly report presented to Governing Body members to provide assurance regarding the following elements of corporate business: Risk management, external assessment, corporate governance, information governance and staffing governance.
Analysis of key issues and of risks
There are no key risks highlighted in this report.
Patient, Public and Stakeholder Involvement:
Nil
Equality Impact:
Nil
Financial Implications:
Nil
Human Resource Implications:
Nil
Procurement Advice:
Nil
Data Protection Impact Assessment:
Nil
Approval history:
-
Recommendations:
That Governing Body members note the activity during the quarter.
Paper is for noting.

Corporate Assurance Report

Quarter 1

1 April to 30 June 2021

C o n t e n t s

Section	Sub-Section	Page
1	Risk management <ul style="list-style-type: none"> • Claims and legal issues / legal advice • Governing Body Assurance Framework (GBAF) • Risk Register • Internal Incident reporting 	1 1-2 2-3 3
2	Internal Assessments Conflicts of Interest audit	3
3	Corporate governance <ul style="list-style-type: none"> • Complaints <ul style="list-style-type: none"> • MP contacts • KO41 returns • Declarations of Interest <ul style="list-style-type: none"> • 28-day reminders • Self-Assessments • Emergency Preparedness, Resilience and Response (EPRR) Core Standards • Equality & Diversity • EU Exit • Health & Safety, Fire & Security 	3 4 4 4 4-5 5 5 5 5-6
4	Information governance <ul style="list-style-type: none"> • Data Security and Protection Impact Assessments (DSPT) • Data Protection Impact Assessments (DPIA) • Policies/Procedures • GP IG/DPO service • Freedom of information Requests (FOI) 	6 6 6 7 7
5	Organisational development & staffing governance <ul style="list-style-type: none"> • Staffing Governance 	7-9

Ref 1	Risk Management																																																																					
2021-22 CAR 390	<p>Claims and legal issues There has been no activity in this area during the quarter</p> <p>Legal Advice There has been no activity in this area during the quarter</p>																																																																					
2021-22 CAR 391	<p>Governing Body Assurance Framework (GBAF) The Assurance Framework is used for recording strategic risks (i.e. risks affecting achievement of the CCG's strategic objectives). The GBAF has had a full review on 25th June 2021.</p> <p>GBAF</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 12.5%;">Score</th> <th style="width: 12.5%;">Risk Rating</th> <th style="width: 12.5%;">End of Q4 (Jan-Mar)</th> <th style="width: 12.5%;">End of Q1 (Apr-Jun)</th> <th style="width: 12.5%;">End of Q2 (Jul-Sept)</th> <th style="width: 12.5%;">End of Q3 (Oct-Dec)</th> <th style="width: 12.5%;">End of Q4 (Jan-Mar)</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">1 – 5</td> <td style="text-align: center;">Low</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">6 - 11</td> <td style="text-align: center;">Medium</td> <td style="text-align: center;">1</td> <td style="text-align: center;">1</td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">12 - 15</td> <td style="text-align: center;">High</td> <td style="text-align: center;">4</td> <td style="text-align: center;">4</td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">16 - 20</td> <td style="text-align: center;">Very High</td> <td style="text-align: center;">1</td> <td style="text-align: center;">0</td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">25</td> <td style="text-align: center;">Extreme</td> <td style="text-align: center;">1</td> <td style="text-align: center;">1</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;">6</td> <td style="text-align: center;">6</td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p>Following the review and approval of the organisational objectives at Governing Body in February 2020 a new layout for the GBAF was introduced. There is a change of descriptors, instead of the first column talking about the risk to the objective this is now based around assurance. The risk ratings are the same as above.</p> <p>The current risk appetite linked to the risk matrix is shown in the table below.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;">Ref</th> <th style="width: 55%;">Strategic Objective</th> <th style="width: 40%;">Risk Appetite</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">1</td> <td>Quality - improve safety, patient experience and reduce variations in outcomes and health inequalities and ensure our providers' services are safe.</td> <td>A score of 12 = HIGH, Cautious - Preference for safe options that have a low degree of risk and may only have limited potential for reward.</td> </tr> <tr> <td style="text-align: center;">2</td> <td>Transformation & Delivery - Plan and contract for high quality, positive, equitable health outcomes within the Rotherham Place and across the wider SY&B system</td> <td>A score of 16 = VERY HIGH, Open Willing to consider all potential options and choose the one most likely to result in successful delivery, while also providing an acceptable level of reward and value for money</td> </tr> <tr> <td style="text-align: center;">3</td> <td>System sustainability - Deliver system wide improvements innovations and efficiencies across the Integrated Care Partnership, SY&B system, to support sustainable services</td> <td>A score of 12 = HIGH, Cautious - Preference for safe options that have a low degree of risk and may only have limited potential for reward.</td> </tr> <tr> <td style="text-align: center;">4</td> <td>Safeguarding – Work with partners to ensure all children and vulnerable adults are protected from harm, with continued focus on Child Sexual Exploitation.</td> <td>A score of 10 = MEDIUM, Minimal - Preference for ultra-safe options that are low risk and only have potential for limited reward</td> </tr> </tbody> </table>						Score	Risk Rating	End of Q4 (Jan-Mar)	End of Q1 (Apr-Jun)	End of Q2 (Jul-Sept)	End of Q3 (Oct-Dec)	End of Q4 (Jan-Mar)	1 – 5	Low	0	0				6 - 11	Medium	1	1				12 - 15	High	4	4				16 - 20	Very High	1	0				25	Extreme	1	1						6	6				Ref	Strategic Objective	Risk Appetite	1	Quality - improve safety, patient experience and reduce variations in outcomes and health inequalities and ensure our providers' services are safe.	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5	Leadership & Accountability - ensure that the CCG, and the Integrated Care Place Partnership is effective, well led and well governed, and fully supporting the ongoing development of the wider ICS	A score of 12 = HIGH, Cautious - Preference for safe options that have a low degree of risk and may only have limited potential for reward.
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The current GBAF can be found [here](#).

Risk Register

At the end of Q1 we had **13** risks on the risk register with **4** of these risks being rated as very high and have action plans to treat the risk. The high risks are:

- RR0 - Coronavirus (COVID19) Pandemic - CCG cannot deliver Strategic Plan or key waiting targets. Risk Rating **20**. Risk Appetite **16**.
- RR3 – Not maintaining accessible and high-quality primary care as a consequence of high level of demand. Risk Rating **16**. Risk Appetite **16**.
- RR15 – Failure to implement SEND reforms (part 3) of the Children and Families Act 2014/SEND Code of Practice. Risk Rating **16**. Risk Appetite **10**.
- RR16 - Risk of some hospital services not being sustainable. Eg Stroke / Gastro / Maternity / Paeds / Urgent Care Services are currently commissioned on South Yorkshire & Bassetlaw footprint and sustainability of hospital services is being reviewed. Risk Rating **16**. Risk Appetite **12**.

There are 3 risks rated above the Risk Appetite:

- RR0 - Coronavirus (COVID19) Pandemic - CCG cannot deliver Strategic Plan or key waiting targets. Risk Rating **20**. Risk Appetite **16**.
- RR15 - Failure to implement Special Educational Needs and Disability (SEND) reforms (part 3) of the Children and Families Act 2014/SEND Code of Practice. Risk Rating **12**. Risk Appetite **10**.
- RR 16 - Risk of some hospital services not being sustainable. Eg Stroke / Gastro / Maternity / Paeds / Urgent Care Services are currently commissioned on South Yorkshire & Bassetlaw footprint and sustainability of hospital services is being reviewed. Risk Rating **16**. Risk Appetite **12**.

There was 1 risk added in Q1.

- RR54 – CCG transitioning into ICS CCG must still deliver its duties during the transition year of 2021/22. Risk Rating **9**. Risk Appetite **9**.

There were 7 risks removed in Q1.

- RR5 – Reputational risks to NHS RCGG and individual risk to one or more Looked After Children. Risk Rating **16**. Risk Appetite **10**.
- RR14 – Failure to deliver A&E Standards. Risk Rating **16**. Risk Appetite **12**.
- RR17 - Risk of lack of support to victims of Child Sexual Exploitation (CSE) due to the scale of criminal proceedings (and political issues as commissioners still have oversight Children’s services at the council- this has now been handed back to RMBC end 2018). Risk that funding will not be on-going. Risk Rating **8**. Risk Appetite **10**.

- RR49 – Vulnerability of voluntary sector partners post covid-19. Risk Rating **9**. **Risk Appetite 9**.
- RR54 – EU Exit Access to prescription drugs. Risk Rating **12**. **Risk Appetite 12**.
- RR55 – Dispensing/endorsing (non-party activity). Risk Rating **12**. **Risk Appetite 12**.

RR10 - Financial pressures in social care may result in reduction in investments upon which healthcare services are reliant. Risk Rating **12**. **Risk Appetite 12**.

Score	Risk Rating	End of Q4 (Jan-Mar)	End of Q1 (Apr-Jun)	End of Q2 (Jul-Sept)	End of Q3 (Oct-Dec)	End of Q4 (Jan-Mar)
1 – 5	Low	0	2			
6 - 11	Medium	4	4			
12 - 15	High	9	2			
16 - 20	Very High	5	4			
25	Extreme	0	0			
		20	12			

- RR46 - The CCG is required to manage fraud risk in line with its overall risk management policy. A range of risks exist relating to potential fraud and are identified as part of the counter fraud risk assessment process. This risk assessment has identified 28 Primary Fraud Risk areas and is documented separately. Rather than duplicate the 28 areas within this register, this entry in the risk register is to acknowledge a separate risk assessment exists. [Has no specific risk rating. The risk rating is set out in the Counter Fraud Risk Assessment.](#)

The current Risk Register can be found [here](#).

2021/22
CAR 392

Internal Incident Report

Several incidents of verbal abuse and threatening behaviour have been reported during the quarter and are specific to the Continuing Healthcare Team. Evidence collated from these reported incidents is being considered to inform the management of this issue.

2

Internal Assessments

2021/22
CAR 393

Internal Assessment

Work is ongoing on the Conflict of Interest Report by audit and upon completion will be shared in the quarter 2 report.

3

Corporate Governance

2021/22
CAR 394

Complaints, MP contacts and KO41 returns

Complaints

During the quarter 10 complaints have been received, all were acknowledged within the requisite timeframe of 3 working days.

A complaint has been raised regarding the decline of funding for chiropractic treatment. An explanation was given stating that chiropractic treatment is not routinely offered via the NHS. Advice was given to contact their GP to discuss alternative treatment. Closed

	<p>Four complaints were regarding services offered to a patient receiving care in the community, the complaints covered a wide range of issues. Responses have been provided or are in the preparation stage. Ongoing</p> <p>One complaint relates to the unacceptable waiting times for assessment by CAMHS. A response has been sent; however, further contact has been made by the complainant as they remain dissatisfied, a further response is being considered. Ongoing</p> <p>A patient is dissatisfied that they have been declined funding to receive pain relieving injections for lower back pain. The rationale for the decision to decline funding has been explained to the patient by letter. Closed</p> <p>Three complaints have been received from the relative of a patient undergoing assessment for Continuing Healthcare. The complaints relate to an individual involved in the completion of the DST and the validity of the DST completed. Investigation is ongoing a preparation of response letters is underway. Ongoing</p> <p>MP contacts Five contacts have been received during the quarter from MPs, these relate to:</p> <ol style="list-style-type: none"> 1) Registration with a GP practice of choice and relates to a patient in the community referred to above. 2) Registration with a GP practice, investigation revealed that a misunderstanding had taken place and the patient was registered. 3) A MP raised a concern that a patient had been issued with a parking ticket whilst parked at the Rotherham Health Village. The CCG was unable to comment or offer any resolution on this matter. 4) An issue was raised regarding the provision of CHC funding as the patient no longer meets the criteria for funding. Ongoing 5) A query regarding NHS dentistry was signposted to NHS England for response. Closed <p>KO41 return The quarter 4 2020-21 was successfully submitted to NHS Digital – Complaints Data Collection.</p>
2021/22 CAR 395	<p>Declarations of Interest, 28-day reminders and Self Assessments The 2021-22 Declarations of Interest Register was published on our website and 28-day reminders continue to be issued, with any changes to the declarations being recorded made to the registers and republished on our website.</p> <p>Conflict of Interest - Self-Assessment submissions on breaches and training compliance remain in pause with no indication as to when they will be resumed. However, during the pause no reports of any breaches taking place have been reported.</p>
2021/22 CAR 396	<p>Emergency Preparedness, Resilience and Response (EPRR) Core Standards Reinforced Aerated Autoclaved Concrete (RAAC) Tabletop Exercise The RAAC Evacuation Tabletop exercise took place on 12th May 2021. Mrs Ruth Nutbrown was in attendance for the CCG. The aim of the exercise was to support systems and organisations in exploring the impact on service delivery at</p>

	<p>an organisational level, and on a wider ICS and regional level in the event of a RAAC evacuation.</p>
2021/22 CAR 397	<p>Equality and Diversity The Equality and Diversity Steering Group met on 21st May 2021. The RCCG Workforce Race Equality Standard 20/21 was discussed and the RCCG EIA database.</p>
2021/22 CAR 398	<p>EU Exit Correspondence was received on 30th June 2021 stating the EU has now formally adopted 'adequacy decisions' for the UK. These allow for the ongoing free flow of personal data from the EU/EEA to the UK.</p> <p>This means personal data can continue to flow freely between Europe and the UK following agreement by the European Union to adopt 'data adequacy' decisions. Formal adoption of the decisions under the EU General Data Protection Regulation (GDPR) and Law Enforcement Directive (LED) allows personal data to flow freely from the EU and wider European Economic Area (EEA) to the UK.</p> <p>The decisions mean that UK businesses and organisations can continue to receive personal data from the EU and EEA without having to put additional arrangements in place with European counterparts.</p> <p>NHS organisations had previously been asked to ensure that appropriate safeguards were in place. While these are no longer required, they remain good practice. The Department for Digital, Culture, Media and Sport (DCMS) recommend that as a sensible precaution, UK organisations should keep a record of regular personal data transfers they receive from EU counterparts, and be ready to put alternative arrangements in place to allow these to continue should EU adequacy decisions cease to be in effect in the future.</p> <p>Correspondence was also received about the EU Settlement Scheme which is open to all EU, EEA and Swiss citizens in the UK closes on 30th June 2021. The Settlement Scheme will allow EU, EEA, and Swiss citizens to continue to live and work in the UK beyond June 2021. The Home Office has recently updated their guidance on employer right to work checks in light of the end of the scheme.</p>
2021/22 CAR 399	<p>Health & Safety, Fire and Security Annual Inspections The Annual CCG inspections were undertaken at Oak House on the 15th April 2021. The visit to Oak House adhered with Government and infection control guidance with regards social distancing and the use of hand sanitisers.</p> <p>The inspections found 1 high risk hazard and 3 low risk hazards within the CCG demised areas which require remedial action. Of the risks identified, the high-risk hazard has been rectified.</p> <p>Fire risk assessment</p> <ol style="list-style-type: none"> 1. (Low risk) - Potential risk of fire spread in the event of a fire due to the amount of equipment / office supplies / documentation stored in the open plan office.

Premises inspection

1. (Low risk) - Potential risk of musculoskeletal injury to persons attempting to retrieve equipment due to the unsafe stacking and positioning of office equipment and paper within the room.

Security Inspection

1. (Low risk) - Staff are currently working from home and only attend site when necessary. There is no process in place to challenge unfamiliar persons within the 2nd floor office. GP Federation Covid call centre utilises the north side of the second floor, there is no process in place to prevent call centre staff from entering the south side.
2. (High risk) Patient personal identifiable information and business bank details was discovered in the general waste. Breach of Data Protection Act 2018. Worked in conjunction with the IG Lead to investigate and understand as not primarily security related.

A comparison with the previous year's inspection findings.

	2021	2020	2019	2018	2017	2016
Fire risk assessment	1	1	5	2	6	6
Premises inspection	1	2	2	3	3	15
Security audit	2	0	0	0	0	2
<i>Total</i>	4	3	7	5	9	23

Policies, Procedures & Assessments

The following documents went through the Governance process.

- Incident Management Policy

4**Information Governance**2021/22
CAR 400**Data Security and Protection Toolkit (DSPT)**

The CCGs 20/21 DSPT was successfully submitted 23rd June 2021 in advance of the deadline of 30th June 2021 with all 42 assertions met.

Data Protection Impact Assessments (DPIA)

The following DPIAs have been:

Completed and approved this quarter, ensuring that the CCG remains compliant with Data Protection legislation:

- Telemedicine Clinical Partnerships

Considered but after reviewing a DPIA was not required:

- Covid Vaccine Monitoring GP Data

Policies/Procedures

Following the rollout across the CCG of Office 365 on the national NHS tenant known as N365, a draft N365 Policy and Procedure has been developed and is currently awaiting approval via the IG Group before progressing through the governance process.

	<p>GP IG/DPO service The CCG combined IG/DPO service has answered twelve queries raised by practices and one theme identified has been addressed in the 2nd of two 'Rotherham Practice GP IG/DPO Service Bulletins' delivered in this quarter.</p>																																																		
<p>2021/22 CAR 401</p>	<p>Freedom of Information Requests During Quarter 1 of 2021, 36 requests were received all of which (100%) were acknowledged within two working days.</p> <p>This compared with Quarter 1 in 2020/21 when 24 requests were received.</p> <table border="1" data-bbox="359 564 1380 645"> <thead> <tr> <th>2019/20</th> <th>2020/21</th> </tr> </thead> <tbody> <tr> <td>Quarter 1 – 24</td> <td>Quarter 1 - 36</td> </tr> </tbody> </table> <p>Of the 36 requests, 31 (86%) were responded to within 20 working days with 6 being responded to on the 20th working day, albeit still within the requisite timeline. 5 (14%) remain part way through the responses process and still within the 20-day response timeline.</p> <p>The table below describes the type of requester and the number of requests:</p> <table border="1" data-bbox="376 891 1399 1456"> <thead> <tr> <th>Requester Type</th> <th>Number</th> <th>%</th> </tr> </thead> <tbody> <tr><td>Unknown</td><td>13</td><td>36</td></tr> <tr><td>Publications</td><td>7</td><td>19</td></tr> <tr><td>Healthcare Service Providers</td><td>4</td><td>11</td></tr> <tr><td>Charity</td><td>3</td><td>7</td></tr> <tr><td>Researcher/Student</td><td>2</td><td>6</td></tr> <tr><td>NHS</td><td>2</td><td>6</td></tr> <tr><td>Media</td><td>2</td><td>6</td></tr> <tr><td>Marketing</td><td>1</td><td>3</td></tr> <tr><td>Solicitors</td><td>1</td><td>3</td></tr> <tr><td>Consultancy</td><td>1</td><td>3</td></tr> <tr> <td>Total</td> <td>36</td> <td>100%</td> </tr> </tbody> </table> <table border="1" data-bbox="453 1489 1323 1767"> <thead> <tr> <th>The most common themes this quarter have been:</th> <th>%</th> </tr> </thead> <tbody> <tr><td>Care Homes/Continuing Healthcare/PUPoC</td><td>17</td></tr> <tr><td>Medical Products/Condition Specific</td><td>17</td></tr> <tr><td>Covid</td><td>11</td></tr> <tr><td>Staffing</td><td>11</td></tr> </tbody> </table>	2019/20	2020/21	Quarter 1 – 24	Quarter 1 - 36	Requester Type	Number	%	Unknown	13	36	Publications	7	19	Healthcare Service Providers	4	11	Charity	3	7	Researcher/Student	2	6	NHS	2	6	Media	2	6	Marketing	1	3	Solicitors	1	3	Consultancy	1	3	Total	36	100%	The most common themes this quarter have been:	%	Care Homes/Continuing Healthcare/PUPoC	17	Medical Products/Condition Specific	17	Covid	11	Staffing	11
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Leavers	1	0	1
Gender		Headcount	
Female		99	
Male		26	
Sexual Orientation		Headcount	
Gay/Lesbian		3	
Heterosexual		104	
Unspecified		2	
Not stated (person asked but declined to provide a response)		16	
Sexual Orientation		Headcount	
Gay/Lesbian		3	
Heterosexual		104	
Unspecified		2	
Not stated (person asked but declined to provide a response)		16	
Disability		Headcount	
No		114	
Not Declared		5	
Unspecified		2	
Yes		4	
Religious Belief		Headcount	
Atheism		9	
Christianity		83	
Hinduism		2	
Islam		1	
Not disclosed		21	
Other		7	
Sikhism		1	
Unspecified		1	
Ethnic Origin (headcount)		Headcount	
White British		112	
White – Any Other White background		2	
Asian or Asian British – Indian		4	
Asian or Asian British – Pakistani		1	
Asian or Asian British – Any other Asian background		1	
Not Stated		5	
Age (headcount)		Headcount	
<20		0	

	21-30	6	
	31-40	20	
	41-50	43	
	51-60	44	
	61-65	12	