

2021 Probate Diversity Survey Response Template

Firm name:

Condy Mathias Eldercare Limited

Firm number (starting C00):

C004209667

Number of participants:

3

NUMBER OF RESPONSES

Aggregate the number of responses to ea

1 ABOUT YOU

Please indicate which category of role best describes your position in the firm.

ICAEW Chartered Accountant

Partner	2
Manager	0
Qualified	0
Training	0

Other Chartered Accountant

Partner	1
Manager	0
Qualified	0
Training	0

Other accountant

Partner	0
Manager	0
Qualified	0
Training	0

Legally qualified

Partner	0
Manager	0
Qualified	0
Training	0

Other legal

Partner	0
Manager	0
Qualified	0
Training	0

Other profession

Partner	0
Manager	0
Qualified	0
Training	0

Direct support staff

Partner	0
Manager	0
Qualified	0
Training	0

Other

Partner	0
Manager	0
Qualified	0
Training	0

Prefer not to say

0

Total number of responses

3

2 AGE

From the list of age bands below, please indicate the category that includes your current age in years.

16 - 24

0

25 - 34	0
35 - 44	0
45 - 54	2
55 - 64	1
65 and over	0
Prefer not to say	0

Total number of responses **3**

3 SEX / GENDER

a. Which gender do you identify with?

Male	2
Female	1
Other	0
Prefer not to say	0

Total number of responses **3**

b. Is the gender you now identify with different from the sex you were assigned at birth?

Yes	0
No	3
Prefer not to say	0

Total number of responses **3**

4 DISABILITY

a. Do you consider yourself to have a disability according to the definition in the Equality Act?

Yes	0
No	3
Prefer not to say	0

Total number of responses **3**

b. Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?

Yes, limited a lot	0
Yes, limited a little	0
No	3
Prefer not to say	0

Total number of responses **3**

c. If you have answered "Yes" to any of the previous two questions, please identify which of the below health problems or disabilities apply?

Cognitive / learning	0
Digestive / continence	0
Manual dexterity	0
Mental health	0
Mobility	0
Physical coordination	0
Physical strength	0
Sensory	0
Not applicable	0
Other	0
Prefer not to say	0

Total number of responses **0** *Question not yet started*

5 ETHNIC GROUP

What is your ethnic group?

Asian/Asian British

Bangladeshi	0
Chinese	0
Indian	0
Pakistani	0
Other Asian	0

Black/African/Caribbean/Black British	
African	0
Caribbean	0
Other	0
Mixed/multiple ethnic groups	
White and Asian	0
White and Black African	0
White and Black Caribbean	0
Other	0
White	
British/English/Welsh/Northern Irish/Scottish	3
Irish	0
Gypsy or Irish Traveller	0
Other	0
Arab	
Arab	0
Other	
Other ethnic group	0
Prefer not to say	0
Total number of responses	3

6 FAITH

What is your religion or belief?	
Buddhist	0
Christian	2
Hindhu	0
Jewish	0
Muslim	0
Sikh	0
Any other religion	0
No Religion	1
Prefer not to say	0
Total number of responses	3

7 SEXUAL ORIENTATION

What is your sexual orientation?	
Bisexual	0
Gay man	0
Gay woman/lesbian	0
Heterosexual/straight	3
Other	0
Prefer not to say	0
Total number of responses	3

8 SOCIO-ECONOMIC BACKGROUND

a. What is the highest level of qualification achieved by either of your parent(s) or guardian(s) by the time you were 18?

At least one has a degree level qualification	0
At least one has A Level or vocational qualifications	0
Qualifications below A Level / vocational	1
I don't know	0
No formal qualifications	2
Not applicable	0
Other	0
Prefer not to say	0
Total number of responses	3

b. What type of school did you mainly attend between the ages of 11 and 16?

A state-run or state-funded school	2
Attended school outside the British Isles	0

Independent or fee-paying school	0
Selective on academic, faith or other grounds	1
Non-selective	0
I don't know	0
Prefer not to say	0

Total number of responses 3

9 SOCIAL MOBILITY

a. What is the highest level of qualification you hold, or if you are a qualified accountant or lawyer, held prior to becoming qualified?

Degree level	2
A Level or vocational qualification	1
Qualifications below A Level	0
No formal qualifications	0
I don't know	0
Not applicable	0
Other	0
Prefer not to say	0

Total number of responses 3

b. Did either (or both) of the following apply at any point during your school years?

i. Did your household received income support?

Yes	0
No	3
I don't know	0
Prefer not to say	0

Total number of responses 3

ii. Were you entitled to free school meals?

Yes	0
No	3
I don't know	0
Prefer not to say	0

Total number of responses 3

iii. Thinking back to when you were aged about 14, which best describes the sort of work the main / highest income earner in your household did in the

Modern professional occupations such as: teacher/lecturer, nurse,	0
Clerical and intermediate occupations such as: secretary, persona	0
Senior managers and administrators usually responsible for planni	1
Technical and craft occupations such as: motor mechanic, fitter, in	1
Semi-routine manual and service occupations such as: postal worl	0
Routine manual and service occupations such as: HGV driver, var	0
Armed forces personnel for example soldier, airman, naval or milit	1
Middle or junior managers such as: office manager, retail manage	0
Traditional professional occupations such as: accountant, solicitor	0
Short term unemployed (claimed Jobseeker's Allowance or earlier	0
Long term unemployed (claimed Jobseeker's Allowance or earlier	0
Inactive (excluding those that are retired)	0
Retired	0
Not applicable	0
I don't know	0
Other	0
Prefer not to say	0

Total number of responses 3

10 CARING RESPONSIBILITIES

a. Are you a primary carer for a child or children under 18?

Yes	0
No	3
Prefer not to say	0

Total number of responses 3

b. Do you look after or give any help to or support any family members, friends, neighbours or others because of either: long term physical or mental	
No	3
Yes, 1-19 hours	0
Yes, 20-49 hours	0
Yes, 50 or more	0
Prefer not to say	0

Total number of responses **3**

11 MARITAL STATUS

What is your marital or civil partnership status?

Single (never married or never registered a same-sex civil partner)	0
Married	3
In a registered same-sex civil partnership	0
Separated (but still legally married or still legally in a same-sex civil partnership)	0
Divorced or formally in a same-sex civil partnership which is now dissolved	0
Widowed or surviving partner from a same-sex civil partnership	0
Other	0
Prefer not to say	0

Total number of responses **3**

12 MATERNITY

a. Have you taken maternity or paternity leave in the last 5 years?

Yes	0
No	3

Total number of responses **3**

b. If yes:

i. Did you return to your current employer after the leave?

Yes	0
No	0
Not applicable	0

ii. Did your current employer give you additional leave for ante-natal appointments?

Yes	0
No	0
Not applicable	0

iii. Has your employer offered you flexible working arrangements?

Yes	0
No	0
Not applicable	0

iv. Has the ability to work from home been an important aide in your return to work?

Yes	0
No	0
Not applicable	0

Total number of responses **0**