

Royal Cornwall Hospitals Trust

Annual Equality Report

Equality Data of patients and workforce

2017/18

Introduction

Royal Cornwall Hospitals Trust is committed to delivering inclusive health services for all in a dignified and respectful way by a workforce who is equally respected. We recognise that all patients, staff and members of the public are individuals and we will strive to meet their needs. As an organisation we will endeavour to ensure that no one is discriminated against or treated unfairly due to age, disability, race, religion or belief, gender, sexual orientation, gender reassignment, marriage/civil partnership or pregnancy/maternity. Where necessary we will make every effort to ensure adjustments are made to prevent less equitable experiences occurring.

As part of the Equality Act 2010 and to support the Trust's General Equality Duty, the Trust is required to publish the equality data of people who use our services and the workforce it employs, on an annual basis. This helps us to identify if any groups are poorly represented in either patients accessing services or people working within those services; which will, in turn, enable improvements to be identified to increase participation.

Equality & Inclusion achievements for patients and the public for 2017/18

The Equality Strategy 2016-19 continues to be instrumental in the delivery of the Trust's equality objectives. The strategy outlines the equality data publications, reports, initiatives, audits and improvements that exist to improve accessibility for both patients and the workforce.

Work continues to improve accessibility and promote inclusion across our hospital sites with the introduction of a new fully accessible toilet and shower facility in the Tower Block building in Royal Cornwall Hospital, Truro. This facility also includes a new device called a Room Mate which supports people with sight loss to use the bathroom independently by giving an audio description of the layout of the room. This device has also been installed in one of the public toilets within the Ophthalmology Department and one of the assisted toilets near the entrance to Trelawney, with a further device installed in one of the assisted toilets in St Michaels Hospital.

Work has been undertaken to improve the collection of patients' equality data by explaining to staff the importance of knowing this information and how it can lead to service improvements. We have also provided information posters and literature for reception areas to explain to patients why providing this information will improve the service offered.

The Homeless Patient Advisor post has been jointly funded by Cornwall Housing, Cornwall Foundation Trust and Royal Cornwall Hospitals' Trust for at least a further year. This post has greatly improved the health inequalities that exist for homeless people.

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Patients

This section of the report will focus on the equality characteristics of the people who used the services of Royal Cornwall Hospital between 1st April 2017 and 31st March 2018. The total number of patient contacts in that time was 402,276 which is an increase of almost 14,000 in the last year. The characteristics we will focus on in the report are:

- Age
- Gender
- Ethnicity
- Religion or belief
- Disability
- Sexual orientation
- Transgender

Age

Age Range	New Outpatients Attended	New Outpatients DNA	OP total	in-patient elective	in-patient emergency	in-patient total	ED	maternity	grand total
0-19	24761	2660	27421	3379	11415	14794	18149	148	60512
20-29	14220	1982	16202	3665	8634	12299	11117	1953	41571
30-39	16411	1701	18112	4469	7591	12060	8481	1943	40596
40-49	18124	1389	19513	6239	3453	9692	8368	159	37732
50-59	23794	1256	25050	13208	4220	17428	9649	1	52128
60-69	27727	936	28663	14665	5349	20014	9689		58366
70+	44671	1496	46167	23917	17403	41320	23884		111371
	169708	11420	181128	69542	58065	127607	89337	4204	402276

The table shows that the age group who uses the Hospitals services most is 70+ and they are the largest user group for all types of services; outpatients, inpatients and A&E attenders. This age group is more likely to have complex or multiple health needs which require longer term treatment and care.

The majority of age groups show lower elective admissions than the previous year. It was recommended by NHS England through the winter period that elective admissions be reduced to ease the pressure on NHS and Social Care systems, which will have had an impact on this.

Gender

	OP Attended	DNA	OP Total	IP Elective	Emergency IP	IP Total	ED Total	maternity	Grand Total
Male	71217	5158	76375	32646	22662	55308	44486		176169
Female	98475	6262	104737	36892	35401	72293	44847	4204	226081
Unknown	16		16	4	2	6	4		26
Total	169708	11420	181128	69542	58065	127607	89337	4204	402276

The table shows that females are much more likely to access health services than men although the A&E usage is about the same, this is comparable with last year. The percentage gender split of patients is also similar to 2016/17 at 56% female and 43.8% males.

Ethnicity

83% of the people who used the Trust's services were White British, 98.2% of the local community identify with this group. There was a total of 1.3% of patients who were from an ethnic minority background where 1.8% residents of Cornwall identify themselves in this way. There has been a slight decrease in the percentage of patients choosing not to disclose their ethnicity from 2.19% in 2016/17 to 2.11% in 2017/18.

DESCRIPTION	OP Attended	DNA	OP Total	IP Elective	Emergency	IP Total	ED Total	maternity	Grand Total
ANY OTHER ASIAN BACKGRND	232	11	243	91	85	176	107	16	542
ANY OTHER BLACK BACKGRND	70	9	79	31	17	48	42	3	172
ANY OTHER ETHNIC GROUP	239	29	268	75	68	143	132	10	553
ANY OTHER MXD BACKGRND	415	43	458	96	152	248	203	11	920
ANY OTHER WHITE BACKGRND	4580	386	4966	1581	1795	3376	2926	209	11477
ASIAN-ASIAN BRITISH	254	25	279	71	114	185	163	13	640
BLACK-BLACK BRIT	219	16	235	145	71	216	136	4	591
CHINESE	171	13	184	55	52	107	83	7	381
CORNISH	16281	1018	17299	7304	6130	13434	9857	307	40897
MXD WHITE & ASIAN	255	22	277	74	115	189	155	12	633
MXD WHITE & BLACK AFRICAN	116	22	138	41	59	100	92	1	331
MXD WHITE & BLACK CARRIB	267	24	291	50	107	157	193	9	650
NOT KNOWN	2764	531	3295	324	321	645	4172	21	8133
NOT STATED							4		4
Patient Declined	175	13	188	94	26	120	56	2	366
WHITE BRITISH	142977	9206	152183	59200	48695	107895	70671	3563	334312
WHITE IRISH	693	52	745	310	257	567	344	16	1672
PATIENT TOO UNWELL TO ASK					1	1	1		2
	169708	11420	181128	69542	58065	127607	89337	4204	402276

Religion or Belief

DESCRIPTION	OP Attended	DNA	OP Total	IP Elective	Emergency	IP Total	ED Total	maternity	Grand Total
AGNOSTIC	290	15	305	179	69	248	128	3	684
ATHEIST	814	70	884	399	365	764	417	37	2102
BUDDHIST	315	31	353	128	70	196	161	5	719
CHRISTIAN	91014	4504	95518	44011	28341	72352	43053	1513	212436
HINDU	102	7	109	31	47	78	55	5	247
HUMANIST	48		48	39	7	46	13		107
JEHOVAH'S WITNESS	751	36	787	277	196	473	337	8	1605
JEWISH	111	3	114	78	46	124	80	2	320
MUSLIM	171	7	178	56	90	146	137	15	476
PAGAN	213	19	232	99	40	139	80	1	451
SPIRITUALIST	228	16	244	101	68	169	112	3	528
OTHER	344	23	369	118	107	226	287	6	776
NOT RELIGIOUS	53831	4712	58543	19214	24888	44102	35761	1897	140303
UNKNOWN	10085	1891	22057	4535	3189	7724	8563	672	39016
PATIENT REFUSED	1299	88	1387	276	541	817	265	37	2506
TOTALS	159611	11422	181123	69541	58064	127604	89449	4204	402271

The types and numbers of religions and beliefs of patients are what you would expect to see in Cornwall. The percentage of unknown is slightly higher than 2016/17 at 10.32%.

Disability

Disability	New Outpatients Attended	New Outpatients DNA	Total Inpatients	Total A&E	Total Overall	As a % of All Disability	% New Outpatients DNA Rate
AUTISM	186	21	210	211	607	1.4%	10.14%
BRITISH SIGN LANGUAGE	8	1	5	0	13	0.0%	11.11%
COGNITIVE IMPAIRMENT	372	27	282	166	820	1.9%	6.77%
EASY READ	28	2	15	9	52	0.1%	6.67%
HEARING IMPAIRED	5037	174	3528	1889	10454	23.7%	7.16%
INTERPRETER REQUIRED	16	2	7	3	26	0.1%	11.11%
LEARNING DIFFICULTY	37	2	20	22	79	0.2%	5.13%
LEARNING DISABILITY	1356	154	985	787	3128	7.1%	10.23%
MOBILITY IMPAIRMENT	5660	300	4618	2435	12713	28.8%	5.03%
PATIENT HAS A DISABILITY	376	27	346	165	887	2.0%	6.70%
SIGHT IMPAIRED	439	21	333	217	989	2.2%	4.57%
SPECIAL NEEDS	5	2	35	6	46	0.1%	28.57%
SPEECH IMPAIRMENT	330	26	232	131	693	1.6%	7.30%
VISUAL IMPAIRMENT	1960	75	1680	964	4604	10.4%	3.69%
No Disability	4000	169	3855	1152	9007	20.4%	4.05%
Grand Total	19810	1003	16151	8157	44118	100.0%	4.82%

The most common impairment is mobility, followed by hearing impaired. 9007 people selected the “no disability” tab which means that 342,536 people left this section blank when completing their patient registration form. This is fractionally better than last year which was 351,361. We have supplied information cards to reception staff to show to patients when completing their forms to explain why we ask for this personal information.

This year’s data reveals that there were fewer patients using the hospital’ services who had hearing, sight loss or mobility difficulties even though more patients were seen overall. This would suggest that a proportion of patients who left this data field blank do have support needs. Work will continue to educate patients on the benefits of disclosing their support needs.

Sexual orientation

	OP Attended	DNA	OP Total	IP Elective	Emergency IP	IP Total	ED Total	maternity	Grand Total
BI-SEXUAL	193	19	212	74	78	152	103	9	476
DECLINED	3843	196	4039	1578	997	2575	1418	31	8063
GAY	137	14	151	78	16	94	43		288
HETEROSEXUAL	31818	1439	33257	16625	8901	25526	10800	753	70336
LESBIAN	139	4	143	50	20	70	42		255
Unspecified	133578	9748	143326	51137	48053	99190	76931	3411	322858
Total	169708	11420	181128	69542	58065	127607	89337	4204	402276

In 2016 93.4% of the population identified themselves as heterosexual, just over 1 million (2.0%) of the UK population aged 16 and over identified themselves as lesbian, gay or bisexual (Office of National Statistics). This is not reflective of the data the Trust holds for similar aged patients using our services ie. from 16-25 year old patients 0.3% have identified themselves as non-heterosexual. If the population of Cornwall were reflective of these statistics there would be over 8,000 people identifying as LGB, therefore it would suggest that the data we hold is incomplete.

Transgender

OP Attended	DNA	OP Total	IP Elective	Emergency	IP Total	ED Total	maternity	Grand Total
444	14	458	202	94	296	135	135	889
444	14	458	202	94	296	135	135	889

The table above shows the number of attendances of patients identifying as transgender. The table below reveals the number of attendances for the last three years and shows how many individual people this equates to.

	2015/16	2016/17	2017/18
Attendances	877	1011	889
Total people	310	334	499

Workforce

Equality Achievements for 2017/18 relating to the workforce



In spring 2018 the Trust achieved level 2 accreditation within the Disability Confident Scheme. This scheme replaces the previous Two Tick system which supports the fair recruitment and retention of staff who have support needs, such as, disabilities or long term health issues. The new scheme is much more rigorous to evidence and has three levels of accreditation by the Department of Work and Pensions. The Trust has been awarded level 2 Disability Confident Employer and has plans to gain level 3, Disability Confident Leader.

The Trust continues to support the facilitation of staff networks and currently supports a Minority Ethnic group, Disability Advisory Team, a Staff Carers Network and signposts staff to the public sector LGBTQ virtual group. There are aspirations to join an NHS initiative to improve the experiences of staff and patients who are non-heterosexual and to possibly facilitate a Women's' Network to support the career progression of females in predominantly male work areas.

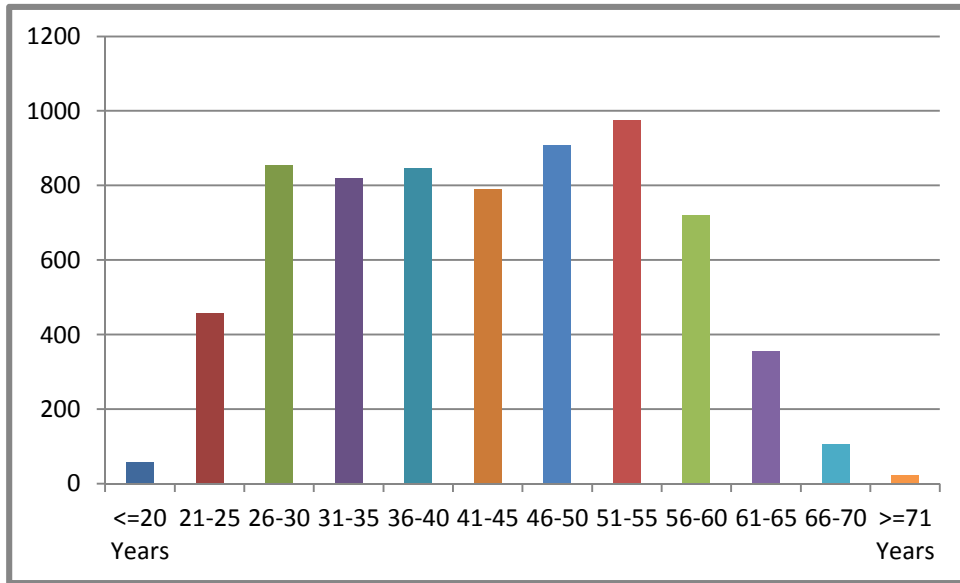
The Trust launched a campaign in November 2017 named Respect Each Other. This campaign is focused on improving communication and relationships in the workplace with the emphasis on valuing and respecting each other.

There have been improvements in the National Electronic Staff Register to enable staff to update more of their own personal data to improve data collection and reporting.

Training for staff on equality topics continues to be offered with topics including transgender awareness, Easy Read training and Equality Impact Assessment training for managers.

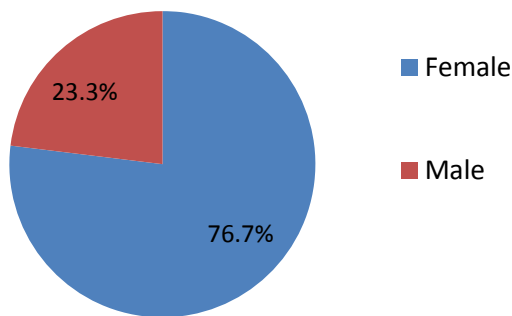
There has been an increase in the size of the workforce since 2016/17 from 6,574 to 6,905; this number includes Kernowflex staff who are non-substantive.

Age



There has been no significant change in the age ranges of staff in the last year.

Gender



There has been a slight increase in male employees in the last year of 0.2%. The ratio of the gender split is typical of the NHS as a whole.

Gender pay gap

All organisations with 250 or more employees are now required to publish their gender pay gap.

The gender pay gap differs from equal pay.

Equal pay deals with the pay differences between men and women who carry out the same jobs, similar jobs or work of equal value. It is unlawful to pay people unequally because of their gender.

The gender pay gap shows the differences in the average pay between men and women. The Trust is confident that men and women are paid equally for doing the same job; however, the greater proportion of men than women in senior roles creates a gender pay gap. There may be multiple factors responsible for this, such as, culture, family and work-life balance (women make up the vast majority of part-time workers in the Trust). All of these can impinge on female employees' career progression, especially into senior leadership roles. It is important to note though that 87% of female workers thought that the Trust offered fair career progression in the 2017 staff survey.

Nevertheless, we will work hard to address this imbalance by continuing to offer flexible working, providing unconscious bias training for managers, and fostering an inclusive culture. The gender split of the most senior leadership is even in the Trust, which is very positive, however, the disparity in female representation in the general senior levels is not as good which leads to a significant pay gap identified below.

Headline Gender Pay Gap Figures

The gender pay gap is defined as the difference between the mean or median hourly rate of pay that male and female colleagues receive.

The mean pay gap is the difference between average hourly earnings of men and women. The median pay gap is the difference between the midpoints in the ranges of hourly earnings of men and women. It takes all salaries in the sample, lines them up in order from lowest to highest, and picks the middle-most salary.

These figures are based on hourly rate of pay as at 31 March 2018 and bonuses (incentives and clinical excellence awards) paid in the year to March 2018.

Royal Cornwall Hospitals Trust 

26.8%

paygap

National Average

18.4%

(Office of National Statistics 2017)

The gender pay gap at RCHT is higher than the UK national average quoted above, however, the national figure does not include bonuses which the Trust's does. The pay gap is largely attributed to the fact that the gender split for consultants is 64.5% male and 35.5% female (this is over 1% more females than the previous year). Part of the gender pay gap relates to the Clinical Excellence Awards for consultants who perform "over and above" the standard expected of their role. There were 51 awards granted this year comprising of 20 females and 31 males.

Across all roles we recognise there is much to do to close the gap. Personal choices our colleagues make around their working patterns have been a key driver in our gender pay gap. At RCHT 40% of substantive staff work part time, of which 91.8% are female employees. While the Trust is confident that men and women are paid equally for doing equivalent jobs across our hospitals, the main reason for the gender pay gap is that there are fewer women in senior roles and a higher proportion of women in lower bands.

Gender Bonus Gap

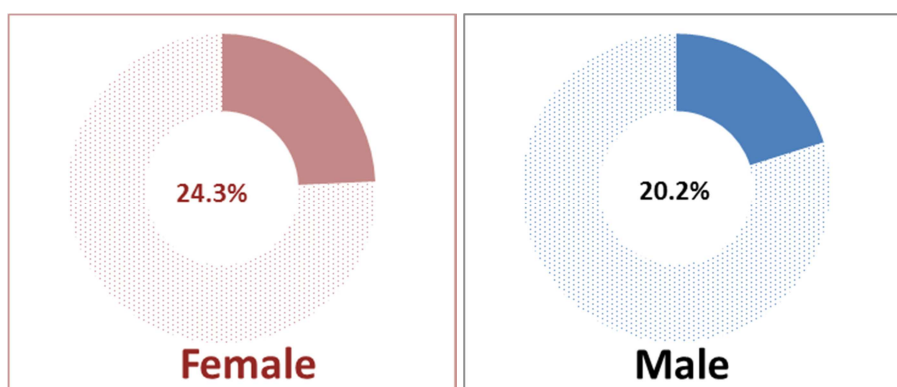
2016/17

	Mean %	Median %
Gender Pay Gap	25.9%	9.6%
Gender Bonus Gap	86.6%	55.3%

2017/18

	Mean %	Median %
Gender Pay Gap	26.8%	10.7%
Gender Bonus Gap	89.0%	66.2%

The average gender pay gap is higher between male and female colleagues receiving bonus payments (incentives & clinical excellence awards). This is mainly due to the Clinical Excellence Awards as more male than female colleagues achieve them. Non-medical staff can receive bonus incentives such as working additional bank shifts to meet demand for hard to fill shifts as well as preceptee incentives paid to attract and retain newly qualified nurses (these incentives ceased to be offered in January this year which will have a further impact on the pay gap for next year).

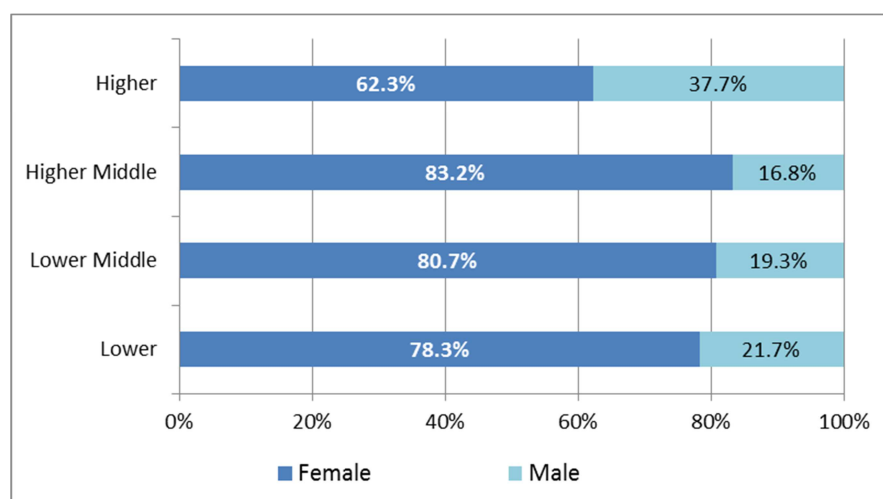


Proportion of male and female colleagues receiving a bonus (clinical excellence award or incentive payment)

24.3% of female colleagues received a bonus payment compared to 20.2% of male colleagues during the year to 31 March 2018. In 2016/17 31.3% of females and 26.2% of males received bonuses.

Gender Pay Gap by Pay Scale

This chart shows the gender split when we order hourly rate of pay from highest to lowest and group into four quartiles. Data is shown in graphical format below.



Although there is a higher proportion of female than male colleagues at the Trust, higher proportions of females occupy the lower to middle higher quartiles than men. For the higher quartile, although female colleagues form a higher percentage than men this represents 20% of total females at the Trust. Conversely, the higher quartile represents a lower proportion of male colleagues than females but equates to 39% of all men working at the Trust.

Proposal of actions to reduce the gap

Further analysis is needed before we can fully understand the issues that lead to this pay gap. Further data will aid the investigation by examining if work role, age, length of service and whether the person is full or part time are factors which need to be considered. When this is understood a meaningful action plan can be produced to focus on reducing the gap.

Ethnicity

Ethnicity	Headcount
White British	5533
White Irish	36
White other	183
Cornish	323
White European	76
Mixed White	6
White/Black	21
White/Asian	22
Any Other dual heritage	26
Asian/Asian British	95
Black/Black British	31
Chinese	16
Any Other Ethnic group	25
Unknown	29
Not stated	483
Total	6905

Religion/Belief

Religious Belief	Headcount
Atheism	1010
Buddhism	28
Christianity	2831
Hinduism	28
I do not wish to disclose	2268
Islam	21
Jainism	2
Judaism	2
Other	649
Sikhism	2
Unspecified	64
Total	6905

There has been no significant change in the workforce's ethnicity or beliefs over the last year.

Disability

	Headcount	%
No	5,760	83.4
Not Declared	285	4.1
Prefer Not To Answer	592	8.6
Unspecified	31	0.4
Yes	237	3.4
Grand Total	6,905	100.0

The number of staff declaring they have a disability has slightly increased since the 2016/17 report from 3.2% to 3.4%. Further work needs to be done to reduce the number of staff who choose not to disclose.

Sexual Orientation

Bisexual	31
Gay	42
Heterosexual	4928
I do not wish to disclose my sexual orientation	1812
Lesbian	28
Unspecified	64

The increase in the workforce in the last year has led to an increase in all the categories of sexual orientation.

Focus for the year ahead

The Trust will continue to focus on the Equality Strategy 2016-19 by ensuring compliance with all equality standards laid down by NHS England and to ensure that there are good communication links with service users. Any equality related initiatives will be rolled out to improve people's experiences within the Trust, such as, the Respect Each Other Campaign which has been introduced to help tackle bullying and harassment.

The Trust will maintain its focus on improving the accessibility of all three sites to ensure services are available to all to support positive experiences.

The Trust will continue to support the facilitation of staff networks with the aim of improving staffs mental wellbeing in the workplace.