

Luton and Dunstable University Hospital

Annual Patient Equality Information Report

Year ending 31st March 2017

Contents

1.	Introduction	
2.	Summary	
3.	Emergency Department (ED) Attendance	From page 5
3.1	General Attendance in ED	
3.2	Attendance by Gender in ED	
3.3	Attendance by Age Band and Gender in ED	
3.4	Attendance in ED by Ethnicity	
3.5	Attendance in ED by Age Band and Ethnicity	
3.6	Attendance by Religion or Belief in ED	
4.	Inpatients Attendance	From page 10
4.1	Inpatients Attendance in General	
4.2	Inpatients by Gender	
4.3	Inpatients by Age and Gender	
4.4	Inpatients by Ethnicity	
4.5	Inpatients by Religion or Belief	
5.	Outpatients Attendance	From page 14
5.1	Outpatients in General	
5.2	Outpatients by Gender	
5.3	Outpatients by Age Band and Gender	
5.4	Outpatients by Ethnicity	
5.5	Outpatients by Religion or Belief	
6.	Maternity and Births	From page 17
6.1	General Maternity Admissions	
6.2	Maternity by Age	
6.3	Maternity by Ethnicity	
6.4	Births - Gender	
6.5	Births – ethnicity	
7.	Patient complaints	Page 20
8.	Languages booked for Translation	Page 21
9.	Patients with Hearing or Vision Disability	Page 22

1. INTRODUCTION

This Patient Report for year ending March 31, 2017 analyses the data that the Trust holds in relation to people who use our services as part of evaluating and working to meet their Equality, Diversity and Human Rights needs and to improve their Patient Experience.

The Trust prepares and publishes equality information annually and this is the third year that the information has been published to this level and format. Provision of this key information is a statutory requirement needed to help the Trust in making decisions that improve quality of service, or in taking measures that promote equality of opportunity, or foster good relations or eliminate harassment and unlawful discrimination. This information helps us to:

- Identify who is accessing our services
- Identify if there is under-representation or any disadvantage faced by people based on their individual protected characteristics (*see below)
- Understand the needs of our patients
- Determine how we may address under-representation from specific groups
- Compare our performance with similar organisations
- Identify necessary service improvements.
- Make informed and better decisions about priorities, services and use of resources.

*The protected characteristics are Age, Ethnicity, Gender, Disability, Religion or Belief, Sexual Orientation, Transgender, Marriage and Civil partnership, Pregnancy and Maternity.

Currently our Patient Report mainly considers overall patient activity for Age, Ethnicity, Gender, and Religion or Belief, and Maternity and births. There are gaps within the information with regard to the rest of the protected characteristics. Also the information is not unified but provided by Outpatients, Inpatients, Accident and Emergency, and Maternity and Childbirth. Work is ongoing especially on the Trust's electronic data system to ensure that information gaps related to some protected characteristics are captured and made available.

2 SUMMARY

The reporting period is 1 April 2016 to March 31, 2017 - there are comparisons with last Year's report which was year ending March 31, 2016. Inpatients, Outpatients and Accident & Emergency are measured in terms of attendances and admissions rather than individuals. Some attendance may be multiple by one individual.

The Trust actively encourages positive and negative feedback about its services. Feedback supplied is essential, helpful and welcomed as necessary for continuous service improvement. The table below indicates the information collated in relation to the nine protected characteristics (PC);

Protected Characteristic	Inpatients	Outpatients	ED	Maternity*
Age	✓	✓	✓	✓
Gender	✓	✓	✓	✓
Ethnicity	✓	✓	✓	✓
Religion/belief	✓	✓	✓	✓
Disability	X	x	x	x
Sexual Orientation	X	x	x	x
Transgender	X	x	x	x
Marriage/Partnership	X	x	x	x

* Pregnancy and maternity are also a protected characteristic

As an overview of the key areas of the last 3 years of this report:

Patient attendance 2015 to 2017 shows that attendances have increased by 53609 over the 3 years.

Patient Attendance Years ending March 31st 2015, 2016 and 2017				
DIVISION	2015	2016	2017	TOTALS
Emergency department	91395	95506	101058	287959
Inpatient	78734	82839	87961	249534
Outpatient	366352	379486	398117	1143955
Maternity	14359	17239	17313	48911
	550840	575070	604449	1730359

Patient Attendance Increases by an average of 5% per year across all services apart from Maternity

Patient Attendance Increases by number and percentage				
DIVISION	Years end 2015 to 2016	%	Years end 2016 to 2017	%
Emergency department	4111	4.5%	5552	5.8%
Inpatient	4105	5.8%	5122	5.2%
Outpatient	13134	3.6%	18631	4.7%
Maternity	2880	20.1%	74	0.5%
	24230		29379	

Patient Attendance by Gender – Despite the circa 5% increase in attendance across services the ratio of male to female attendances remain consistently very similar. Male attendance is @ 4% higher than female for the Emergency department. Female attendance is @ 4.5% higher for Inpatient and @ 15% higher for outpatient than male.

Patient Attendance by Gender ratio						
DIVISION	2015/16		2016/17		2016/17	
	male	female	male	female	male	female
Emergency department	52.0%	48.0%	51.7%	48.3%	51.7%	48.3%
Inpatient	47.5%	52.5%	47.5%	52.0%	47.7%	52.3%
Outpatient	42.7%	57.3%	42.3%	57.8%	42.0%	58.0%
maternity	n/a	n/a	n/a	n/a	n/a	n/a
	47.4%	52.6%	47.2%	52.7%	47.1%	52.9%

Patient Attendance by ethnicity shows that there is 24-27% of BME attendance across Emergency, Inpatients and Outpatients services. For maternity and healthy babies there is between 39-48% BME attendance. For the workforce BME representation is 37-39%. There is a need to look at BME representation through the age groups of the different services to see the changes in representation levels.

Attendance by Ethnicity year end March 2017 – and compared with year end March 2015 and 2017				
DIVISION	Ethnicity	2015 - %	2016 - %	2017 - %
Emergency department	White	60%	63.5%	62.5%
	BME	24%	27.0%	27.6%
	Unknown	16%	9.5%	9.9%
Inpatient	White	70.0%	63.5%	68.5%
	BME	23.5%	27.5%	24.9%
	Unknown	6.5%	9.5%	6.6%
Outpatient	White	60%	68.4%	68.8%
	BME	24%	24.5%	25.7%
	Unknown	16%	7.1%	5.5%
Maternity	White	59.4%	51.1%	58.3%
	BME	39.5%	48.4%	40.7%
	Unknown	1.1%	0.6%	1.0%
Healthy Births	White	52.0%	52.9%	53.7%
	BME	47.7%	46.6%	45.4%
	Unknown	1.6%	0.4%	0.8%
Workforce	White	58.84%	59.82%	57.59%
	BME	37.71%	37.69%	38.92%
	Unknown	3.45%	2.49%	3.49%

Ethnicity Profile 2017						
ethnicity	Emergency	Inpatient	outpatient	maternity	Healthy babies	Workforce
White	62.5%	68.5%	68.8%	58.3%	53.7%	57.6%
BME	27.6%	24.9%	25.7%	40.7%	45.4%	38.9%
Unknown	9.9%	6.6%	5.5%	1.0%	0.8%	3.5%

Representative workforce - In the chart above, the workforce currently has good BME representation against the patient population. However, this has not been broken down into the different BME patient and staff groups to see how balanced the representation is across these. Also as can be seen from maternity and healthy baby data, diversity will increase

3 EMERGENCY DEPARTMENT (ED)

3.1 General Attendance in ED- During this reporting period there was a total of 101,058 attendances in the Emergency Department (ED) compared to 95,506 last year which shows an increase of 5552 attendances (5.81%). Last year's increase from the 91,395 year-end 2015 attendances was 4111 attendances (and 4.5 %).

3.2 Attendance by Gender in ED - Of the 101,058 attendances 48844 were female (48.3%) and 52212 were male (51.7) showing that attendances were 3.3% more male. Even with the 5.1% increase in attendances this year this ratio remains in stasis for the previous 2 years which were female to male 48.3%:51.7% and 48%: 52% respectively.

3.3 Attendance by Age Band and Gender in ED – The high age declaration level is due to date of birth being required on documentation. Only 1 attendance this year did not declare an age compared with 6 and 13 the previous two years.

Attendances in ED by Gender and Age Band in year end March 2017 - (and with % compared to year end March 2016 and 2015)							
Age band in years	Female	Male	Grand total	% in age band			% variation 2017 to 2015
				2017	2016	2015	
0 to 4	5124	7052	12176	12.05%	12.31%	11.80%	0.25%
5 to 9	2523	3232	5755	5.69%	5.63%	5.50%	0.19%
10 to 14	2533	3596	6129	6.06%	5.91%	5.90%	0.16%
15 to 19	2710	3097	5807	5.75%	5.82%	5.90%	-0.15%
20 to 24	3499	3391	6890	6.82%	7.13%	7.50%	-0.68%
25 to 29	3673	3412	7085	7.01%	7.22%	7.30%	-0.29%
30 to 34	3261	3249	6510	6.44%	6.41%	6.60%	-0.16%
35 to 39	2707	3022	5729	5.67%	5.55%	5.30%	0.37%
40 to 44	2296	2546	4842	4.79%	5.22%	5.40%	-0.61%
45 to 49	2579	2698	5277	5.22%	5.23%	5.30%	-0.08%
50 to 54	2550	2551	5101	5.05%	5.04%	5.00%	0.05%
55 to 59	2193	2391	4584	4.54%	4.28%	4.20%	0.34%
60 to 64	1760	1972	3732	3.69%	3.73%	3.70%	-0.01%
65 to 69	1668	1924	3592	3.55%	3.51%	3.50%	0.05%
70 to 74	1806	1793	3599	3.56%	3.36%	3.40%	0.16%
75 to 79	2069	2021	4090	4.05%	3.84%	4.00%	0.05%
80 to 84	2288	1829	4117	4.07%	4.11%	4.10%	-0.03%
85 to 89	2066	1519	3585	3.55%	3.33%	3.20%	0.35%
90 to 94	1147	752	1899	1.88%	1.80%	1.90%	-0.02%
95 to 99	359	139	498	0.49%	0.47%	0.40%	0.09%
100+	33	26	59	0.06%	0.07%	0.10%	-0.04%
Grand Total	48844	52212	101056	100%	100%	100.00%	

As can be seen from the chart preceding, there is very little variation in the percentage of attendees by each age group against total attendees for the last 3 years. This is despite a 4.5 to 5.8% increase in attendances each year which indicates stasis in the proportion of each age group attending ED over these years.

As for the last year, the aged 75 and upwards:

- The older quartile has lower numbers in their groups.
- There is an increasingly marked rise in female attendance in the age groups from aged 75 upwards with a decline in male numbers.

For the rest of the data groups below 75 years:

- Attendance is relatively more likely for both genders the younger they are especially for males up to the age of 19.
- The highest level of attendance occurs between the age of 0<5 which amounts to 12.05% (12176). This has stasis over the 3 years with an average of 12.05%. The disproportionate attendance by male in this group at 58% has also been a consistent ratio for 3 years as well.
- Otherwise, attendance is reasonably balanced between the Genders with noticeably slightly more male presenting (see Gender above).

3.4 Attendance in ED by Ethnicity

From 101,058 attendances 90.07% have a declared ethnicity which is comparable to the 90.5% declaration at year end March 2016. This sustains the circa 6% improvement on the 84.4% declaration at March 2016.

Declaration of ethnicity	2015	2016	2017
	84%	90.50%	90.07%

ED attendances are usually unplanned and can have transitory patients making this declaration result reasonable. It could still be improved upon since a small percentage may make a significant difference to outcomes and affect the reliability of data.

The definitions used in recording the proportion of Black and Ethnic Minorities (BME) and White British are that: (1) White includes White British and Any Other White and (2) BME includes all others except "unknown" or "not stated."¹

¹ These definitions meet the national reporting requirements Ethnic Category in the NHS data Model / Dictionary, and the Health and Social care Information Centre Data as based on the 2001 ONS Census categories for ethnicity. If groups are a significant minority and may be at risk of less favourable treatment this should be explored.

Ethnic Categories 2001	
A – White –British	J – Asian or Asian British -Pakistani
B – White –Irish	K – Asian or Asian British - Bangladeshi
C – Any other white background	L – Any other Asian background
D – Mixed White and Black Caribbean	M – Black or Black British -Caribbean
E – Mixed White and Black African	N – Black or Black British -African
F – Mixed White and Asian	P – Any other Black background
G – Any other mixed background	R – Chinese
H – Asian or Asian British –Indian	S – Any other ethnic group
Z – not stated	

Based on this definition, the data the last 3 years respectively is:

Attendance in ED by Ethnicity year end March 2017 – and compared with year end March 2015 and 2017				
Ethnicity	2015 - %	2016 - %	2017 - %	2017 by attendances
White	60%	63.50%	62.52%	63180
BME	24%	27%	27.55%	27842
Unknown	16%	9.50%	9.93%	10036
				101058

The Trust serves large ethnic groups that warrant further analysis as follows:

Asian Ethnicity – ED had 19207 Asian attendances in 2017. This is circa a 9.3% increase from March 2016, and 20% from March 2015) – The overall % increase is significant in this group as between March 2015 and March 2017 this is 31.9% which is twice the 15% general increase in attendances. Against this 31.9% increase in the overall numbers of attendances of Asian ethnicity the percentage ratios across each of these groups show relatively proportional stasis in percentages.

Asian Ethnicity in ED year ending March 2017 Compared to years ending March 2016 and March 2015						
Ethnicity	2015	%	2016	%	2017	%
Pakistani	8067	55%	9480	54%	10371	54%
Bangladeshi	2597	18%	2794	16%	3132	16%
Indian	1625	11%	2003	11%	2235	12%
Asian other	2268	16%	3286	18%	3469	18%
TOTAL	14557		17564		19207	

*31.9%
increase in
Asian
Attendances
since March
2015*

Black Ethnicity – Despite ED having a 13% decrease in Black ethnicity attendances in year ending March 2016 against year ending March 2015, there has still been an overall 15.9% increase since year ending March 2015 with the 10724 Black ethnicity attendances in 2017. This is proportional to the general increase in attendances.

Black Ethnicity in ED attendances year ending March 2017 – compared to years ending March 2015 and 2016						
Ethnicity	2015	%	2016	%	2017	%
Caribbean	1799	19%	2171	27%	2232	21%
African	1915	21%	2016	25%	2120	20%
Black other	5537	60%	3851	48%	6372	59%
TOTAL	9251		8038		10724	

*15.9% increase
in Black
ethnicity
Attendances
since March
2015*

3.5 Attendance in ED by Age and Ethnicity

In last year's report the ratio for BME to White in ED attendance was 27%: 63.5%, this year it is 27.5% to 62.5% so despite a 5.8% increase in all total ED attendances, this has been a

proportional increase.

The data that follows shows that there is a very high % of BME represented in the 0-10 age groups and an increasingly low % representation at the age groups from aged 45 upwards and particularly from age 65 onwards. This will reflect the increasing diversity of the patients in the area over time and the potential ratios of BME to white in the future.

A&E Attendees by Age and Ethnicity at March 2017 and across each age band With Comparison to 2016 percentages									
Age band	By number					By percentage			
	White	Not known	BME	Total		White	not known	BME 2017	BME 2016
0 to 4	6231	493	5452	12176		51%	4%	45%	45%
5 to 9	2842	347	2566	5755		49%	6%	45%	42%
10 to 14	3357	543	2231	6131		55%	9%	36%	35%
15 to 19	3191	947	1667	5805		55%	16%	29%	27%
20 to 24	3969	1100	1821	6890		58%	16%	26%	24%
25 to 29	4228	949	1908	7085		60%	13%	27%	28%
30 to 34	3657	835	2019	6511		56%	13%	31%	31%
35 to 39	2961	772	1996	5729		52%	13%	35%	34%
40 to 44	2644	693	1505	4842		55%	14%	31%	31%
45 to 49	3227	679	1371	5277		61%	13%	26%	23%
50 to 54	3503	657	941	5101		69%	13%	18%	19%
55 to 59	3209	485	890	4584		70%	11%	19%	20%
60 to 64	2489	373	870	3732		67%	10%	23%	21%
65 to 69	2735	292	565	3592		76%	8%	16%	15%
70 to 74	2886	250	463	3599		80%	7%	13%	15%
75 to 79	3250	204	636	4090		79%	5%	16%	16%
80 to 84	3408	173	536	4117		83%	4%	13%	11%
85 to 89	3173	137	275	3585		89%	4%	8%	6%
90 to 94	1704	76	119	1899		90%	4%	6%	5%
95 to 99	466	24	8	498		94%	5%	2%	2%
100+	50	7	3	60		83%	12%	5%	1%
Total	63180	10037	27842	101058					

3.6 ATTENDANCE BY RELIGION OR BELIEF IN ED

The Chart below shows that there is still a high level of non-declaration for belief. This is consistently 49-50% of attendances in 2015, 2016, and 2017 and despite the increases in overall attendances annually. ED collects the data for 42 categories of belief or non-belief and this includes a category for other (as in not listed). "Other" as listed below covers all beliefs in this "other" category plus any that are below 1%.

Attendance by Religion and Belief in ED at year end March 2017 - and compared with year end March 2015 and 2016						
Category of Belief	Numbers by year endings:			Percentages by year endings		
	2015	2016	2017	2015	2016	2017
Not specified	44854	47827	51263	49.1%	50.1%	50.2%
Church of England	13660	13758	13958	15.0%	14.4%	13.7%
Muslim	8637	9336	9948	9.5%	9.8%	9.7%
None	6972	6818	7305	7.6%	7.1%	7.2%
Christian	6207	6985	6919	6.8%	7.3%	6.8%
Roman Catholic	6061	6098	6904	6.6%	6.4%	6.8%
Other	4080	3761	3730	4.5%	3.9%	4.7%
Hindu	924	923	1031	1.0%	1.0%	1.0%
	91395	95506	101058			

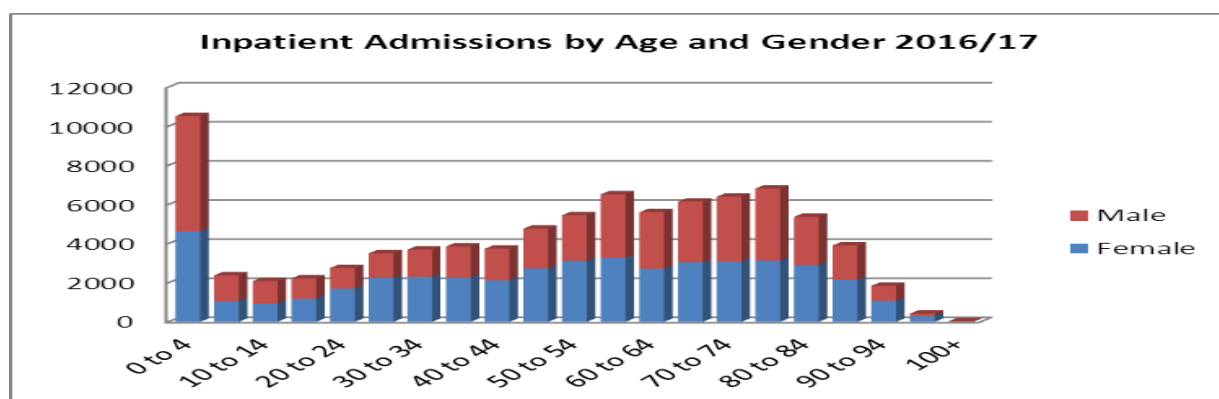
4. INPATIENTS ATTENDANCE

4.1 Inpatients Attendance in General - The total of inpatient attendances for this reporting year is **87,961**. Last year attendances were 82,839, so this shows a **5.8%** increase in attendances (5,122). The year ending March 2015 it was 78,734 with a **5.21%** increase in attendances (4105) by March 2016.

This figure does not include the number in maternity and well babies – see section (6). Also attendances rather than individuals are measured and so some individuals will have multiple attendances.

4.2 Inpatients by Gender - Of the 87,961 inpatient attendances, 46,068 were female and 41,893 male. Even with the increase in attendance the female to male ratio is much the same as last year which is 52.3% female to 47.7% male (against 52.4%:47.6% in 2016)

4.3 Inpatients by Age Band and Gender – All 87,961 attendances declared an age.



The table below shows inpatient admissions by Age and Gender, year ending March 2017. It also includes the percentage of total attendance by age band. There is very little variation between this years and last year's percentage of total attendance by age band.

Inpatients by Age and Gender – 2016-2017					ED Patients 2017	Out patients 2017
Percentage of the total attendances by age band						
Age band	Female	Male	Grand Total	% of Total Attendances		
0 to 4	4629	5886	10515	11.95	12.05%	3.63%
5 to 9	1059	1315	2374	2.70	5.69%	2.92%
10 to 14	956	1124	2080	2.36	6.06%	3.38%
15 to 19	1192	1027	2219	2.52	5.75%	3.15%
20 to 24	1707	1041	2748	3.12	6.82%	3.41%
25 to 29	2251	1249	3500	3.98	7.01%	5.57%
30 to 34	2304	1384	3688	4.19	6.44%	6.43%
35 to 39	2262	1590	3852	4.38	5.67%	5.95%
40 to 44	2129	1605	3734	4.25	4.79%	5.21%
45 to 49	2734	2026	47s60	5.41	5.22%	6.13%
50 to 54	3125	2326	5451	6.20	5.05%	7.22%
55 to 59	3278	3242	6520	7.41	4.54%	7.24%
60 to 64	2716	2885	5601	6.37	3.69%	6.98%
65 to 69	3045	3099	6144	6.98	3.55%	7.60%
70 to 74	3093	3303	6396	7.27	3.56%	7.49%
75 to 79	3129	3684	6813	7.75	4.05%	7.05%
80 to 84	2909	2458	5367	6.10	4.07%	6.01%
85 to 89	2158	1750	3908	4.44	3.55%	3.29%
90 to 94	1077	763	1840	2.09	1.88%	1.12%
95 to 99	299	121	420	0.48	0.49%	0.19%
100+	16	15	31	0.04	0.06%	0.01%
Grand Total	46068	41893	87961	100.00	100%	100%

- However, all age groups showed an increase in numbers reported compared to last year except for the two age groups 80-85 years and 100 plus years, where we saw a fall in the number recorded.
- The percentage spread of attendance remained similar to 2016 with the highest group remaining in the 0 to 4 years age band
- As for last year, in the 80 onwards quartile, numbers decline in the groups for male and female with a marked higher level of female attendance from 85 onwards. This may be attributed in part to females having more longevity, etc.
- The highest level of attendance occurs between the age of 0<5 which amounts to 11.95 % (10515) compared to 12.9% (10100) in 2016. All other figures were similar compared to 2015/16 data, with the spread and ratios being similar.

- Conversely to ED, attendance is more likely for both Genders the older they are except for the 0>5 age group. The highest level of attendance occurs between the age of 0<5 which amounts to 12.9% (10100) in 2016 and was 11.8% (10778) in 2015. There is also disproportionate attendance by male in this group at 55.93% and with the 5>10 age group where it is 59.47%.

Attendance by Age Bands 2017 Variance Female to Male 2017					
Age band	Total	% female	% male	Variance female to male	
0 to 4	10515	44.02	55.98	-11.95	More male pattern
5 to 9	2374	44.61	55.39	-10.78	
10 to 14	2080	45.96	54.04	-8.08	
15 to 19	2219	53.72	46.28	7.44	More female
20 to 24	2748	62.12	37.88	24.24	
25 to 29	3500	64.31	35.69	28.63	
30 to 34	3688	62.47	37.53	24.95	
35 to 39	3852	58.72	41.28	17.45	
40 to 44	3734	57.02	42.98	14.03	
45 to 49	4760	57.44	42.56	14.87	
50 to 54	5451	57.33	42.67	14.66	
55 to 59	6520	50.28	49.72	0.55	
60 to 64	5601	48.49	51.51	-3.02	More balanced
65 to 69	6144	49.56	50.44	-0.88	
70 to 74	6396	48.36	51.64	-3.28	
75 to 79	6813	45.93	54.07	-8.15	
80 to 84	5367	54.20	45.80	8.40	More female
85 to 89	3908	55.22	44.78	10.44	
90 to 94	1840	58.53	41.47	17.07	
95 to 99	420	71.19	28.81	42.38	
100+	31	51.61	48.39	3.23	
Total	87961				

4.4 Inpatients by Ethnicity

Attendances are usually planned so the proportion of "not stated" should be lower than A&E. Any "not stated" should be addressed as it may affect the reliability of data – even small numbers may make a significant difference to outcomes. When recording the more generic proportion of BME and White the data for last year and this year respectively is:

Inpatient attendances BME to White 2017				
Ethnicity	2016	%	2017	%
White	57210	63.50%	60252	68.50%
BME	19920	27.50%	21921	24.92%
Not declared	5709	9.50%	5788	6.58%
TOTAL	82839	100%	87,961	100%

This year from the 87,961 inpatients 82173 (93.42%) declared their ethnicity which is a 2.92% decrease in unknown ethnicity levels compared to 9.5% last year.

Asian Ethnicity –Between years ending March 2015 and 2016 there was a 10.11% increase in Asian ethnicity attendances, between 2016 and 2017 this was 4.1%. The overall increase in these 3 years is 14.61%. However, the percentage of the different categories of Asian ethnicity remained proportionally the same. See the chart below. The overall total increase in attendance for Inpatients between years ending March 2015 and 2016 was 5.21%, and this year was 5.06% so there is a higher proportional increase for Asian attendance over the 3 years by circa 4%.

Asian Ethnicity in Inpatient attendances Years ending March 2015, 2016 and 2017							change in numbers and % between 2015 and 2017	
Ethnicity	Attendance							
	2015	%	2016	%	2017	%		
Pakistani	7059	55%	7617	54%	8072	54%	1013	14.4%
Bangladeshi	2298	18%	2349	17%	2444	17%	146	6.4%
Indian	2028	16%	2208	16%	2349	16%	321	15.8%
Asian Other	1450	11%	1958	14%	1846	13%	396	27.3%
	12835	100%	14132	100%	14711	100%	1876	14.6%

Black Ethnicity – Black ethnicity inpatients increased in numbers by 15.05% between March 31st 2015 and 2016 but decreased by -3.11% between March 31st in 2016 and 2017. This makes the weighted overall increase between 2015 and 2017 at 11.47%.

For both Black Asian and Black Ethnicity there was either reduced (6%) or lower inpatient attendance (18%) than in 2016.

Black Ethnicity in Inpatient attendances Years - March 2015, 2016 and 2017							change in numbers and % between 2015 and 2017	
Ethnicity	2015	%	2016	%	2017	%		
Caribbean	2005	49%	2470	52%	2136	46%	131	7.0%
African	1653	40%	1771	37%	1807	39%	154	9.0%
Black other	475	12%	514	11%	664	14%	189	14.0%
TOTAL	4133		4755		4607		474	11.5%

4.5 Inpatients by Religion or Belief

Declaration of religion or belief of the 87,961 attendances in 2017 is similar to the 82,839 attendances in 2015 where no information is known for 37.8% and 37.3% respectively. There are 50 different categories. The protected characteristic for religion or belief also covers people with no belief, and this is also included in the data and is consistent to data in 2015 (7.5%), 2016 (7.6%) and 2017 (7.6%) which is a consistent proportional increase.

INPATIENT ATTENDANCES BY RELIGION OR BELIEF 2017				
Declared Belief or no Belief	2015 - 2016	%	2016- 2017	%
Church of England	17202	20.77%	17330	19.7%
Not specified*	30940	37.35%	33248	37.8%
Muslim	8031	9.69%	8420	9.6%
Christian	8408	10.15%	8264	9.4%
Roman Catholic	7138	8.62%	7526	8.5%
None	6289	7.59%	7951	9.0%
Hindu	1207	1.46%	1299	1.5%
Methodist	715	0.86%	824	0.9%
Other (not stated)	591	0.71%	564	0.6%
Other stated (36 below 0.5%)	2318	2.80%	2535	2.9%
Total	82839	100.00%	87961	100.00%

For the “Other stated” religions in the category in the chart above, there are 40 categories of Other Religions or Beliefs stated but not listed separately as each have a below .5% number of responses. A further 0.6% (564) selected “other” which means their Religion or Belief is not listed, which is a reduction on the .85% (668) in 2015. Further work is still required as this is one of the most commonly collected protected characteristics.

5 Outpatient Attendance

5.1 Outpatients in General - The total of outpatient attendances for this reporting year is **398,117**. The total last year was 379,486, showing an increase of 18,631 (4.68%). The previous year's increase on attendances of 366,352 was 13,134 (3.59%) and so there is an accrued upward trend.

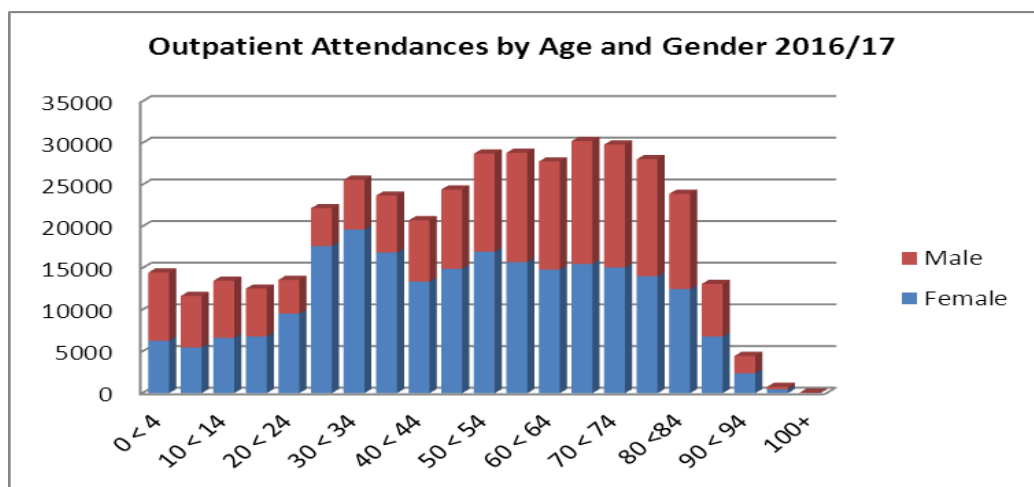
5.2 Outpatients by Gender - Of the 398,117 attending 58% were female: 42% male. The female to male ratio is similar to last and previous years which were 57.75%: 42.25% and 57.3%: 42.7% respectively.

5.3 Outpatients by Age Band and Gender

Usually 100% declaration of gender is a standard record but this year there was 20 undeclared attendances which is an increase of 9 on 2015/16 (and too low a percentage to record). See the chart that follows.

Unlike representation results in A&E and Inpatients, there is a more proportional representation of the 0<5 group at (3.82%) when compared with other groups. There is still a disproportionate representation of male in this group. The table below illustrates Outpatient attendances by gender and age 2016/17, as well as percentages relating to each age group and gender, and overall figures.

Outpatient Attendances by Gender and Age 2017 Percentage of total attendances by age band 2017 compared to 2016								
Age band	No. Female	No. Male	Not known	Grand Total	% female	% male	% of band 2016	% of band 2017
0 < 4	6289	8173	5	14467	43.47	56.49	3.82%	3.63%
5 < 9	5475	6169		11644	47.02	52.98	3.36%	2.92%
10 < 14	6624	6852		13476	49.15	50.85	3.20%	3.38%
15 < 19	6808	5730		12538	54.30	45.70	3.47%	3.15%
20 < 24	9546	4040		13586	70.26	29.74	5.30%	3.41%
25 < 29	17644	4534		22178	79.56	20.44	6.24%	5.57%
30 < 34	19619	5975	5	25599	76.64	23.34	5.87%	6.43%
35 < 39	16868	6833	2	23703	71.16	28.83	5.32%	5.95%
40 < 44	13379	7355		20734	64.53	35.47	6.16%	5.21%
45 < 49	14935	9486	3	24424	61.15	38.84	3.02%	6.13%
50 < 54	16957	11771		28728	59.03	40.97	7.30%	7.22%
55 < 59	15721	13120	1	28842	54.51	45.49	7.10%	7.24%
60 < 64	14821	12974		27795	53.32	46.68	7.01%	6.98%
65 < 69	15484	14753	4	30241	51.20	48.78	7.75%	7.60%
70 < 74	15074	14745		29819	50.55	49.45	7.25%	7.49%
75 < 79	14011	14045		28056	49.94	50.06	7.34%	7.05%
80 < 84	12474	11441		23915	52.16	47.84	5.85%	6.01%
85 < 89	6805	6305		13110	51.91	48.09	3.31%	3.29%
90 < 94	2390	2068		4458	53.61	46.39	1.11%	1.12%
95 < 99	449	306		755	59.47	40.53	0.21%	0.19%
100+	26	23		49	53.06	46.94	0.02%	0.01%
Totals	231399	166698	20	398117			100%	100.00%
	58%	42%						



5.4 Outpatients by Ethnicity

From the 398,117 attendances 94.97% declared their ethnicity (last year was 92.92%).

Ethnicity In Outpatients Attendance Year ending March 31st 2016 and 2017					Change between 2016 and 2017	
Ethnicity	Numbers 2016	% in 2016	Numbers 2017	% in 2017	Number Change	% increase / decrease
White	259542	68.39%	273,872	68.80%	14,330	5.52%
BME	93063	24.52%	102636	25.70%	9,573	10.20%
Unknown	26881	7.08%	21609	5.50%	-5,272	-19.61%
	379486	100.00%	398,117	100%	18,631	4.9%

However the above chart indicates that declaration has improved by nearly 20% since 2016 reducing the level of unknown ethnicity.

Asian Ethnicity - From the chart below there has been an overall increase in Asian attendances by 7.7% with relatively proportional percentages across the 4 groups between 2016 and 2017.

Asian Ethnicity in Outpatient attendances at year end March 2017 and compared to year end March 2016					Change between 2016 and 2017	
Ethnicity	Numbers 2016	% in 2016	Numbers 2017	% in 2017	Number Change	% increase
Pakistani	34321	52.36%	35704	50.59%	1383	-1.8%
Bangladeshi	11039	16.84%	12103	17.15%	1064	0.3%
Indian	12309	18.78%	13012	18.44%	703	-0.3%
Asian other	7878	12.02%	9750	13.82%	1872	1.8%
TOTAL	65547	100%	70569	100%	5022	7.7%

Black Ethnicity - From the chart below there has been a 9.3% increase in Black Ethnicity attendances in Outpatients with an increase in all 3 categories but notably Black African at 4.4%

Black Ethnicity in Outpatient attendances at year ending March 2017 And compared against year ending March 2016						
Ethnicity	2016	%	2017	%	Number change	% increase / decrease
Caribbean	10599	46.06%	11015	47.9%	416	1.8%
African	8071	35.08%	9073	39.4%	1002	4.4%
Black other	4339	18.86%	5069	22.0%	730	3.2%
TOTAL	23009	100%	25157	100%	2148	9.3%

5.5 Outpatients by Religion or Belief

The level of no declaration at year end 2017 is 32.9%, a slightly lower level than last year and still a high level of non declaration. There is relatively little change between the proportions by percentage in each group listed.

Out Patient Attendances by Religion or Belief Year end March 2017 (and compared to Year end 2016)						
Declared Belief or no Belief	Number 2016	Number 2017	% in 2016	% in 2017	Number variation	% Variation
Church of England	79017	79816	20.8%	20.0%	799	-0.77%
Not specified*	126069	130871	33.2%	32.9%	4802	-0.35%
Muslim	37904	44336	10.0%	11.1%	6432	1.15%
Christian	42618	42119	11.2%	10.6%	-499	-0.65%
Roman Catholic	31471	34185	8.3%	8.6%	2714	0.29%
None	36003	41077	9.5%	10.3%	5074	0.83%
Hindu	7165	7668	1.9%	1.9%	503	0.04%
Methodist	3403	3453	0.9%	0.9%	50	-0.03%
Other (not stated)	2209	2188	0.6%	0.5%	-21	-0.03%
Other stated (42 below 0.5%)	13627	12404	3.6%	3.1%	-1223	-0.48%
Total	379486	398117	100%	100%	18631	

6 Maternity and births

6.1 General Admissions – There were 17313 females admitted for maternity care in 2016-2017 which is a 0.5% increase on the 17239 admitted in 2015-2016.

6.2 Maternity by Age – By the chart below; as for the last 2 years the 25 to 34 age groups account for the most maternity admissions which combined amount to 10653 or 61%.

Also the next 2 levels of admissions are the same age bands as for the last 2 years, with similar proportions in percentages the 20>24 years group at 16.2% and the 35>39 years group at 15.1%.

Only in 2016 were there admissions in the 50-55 age range of which there were 6.

Maternity admissions at year end March 2017 (and compared to Years ending March 2015 and 2016 2015 - 2016								
age band	Mar-15	Mar-16	Mar-17	% in 2015	% in 2016	% in 2017	variation 2015 to 2017	% 2015 2017
10 to 14			1			0.0%	1	0.0%
15 to 19	548	724	649	3.8%	4.2%	3.7%	101	-0.1%
20 to 24	2656	3009	2812	18.5%	17.5%	16.2%	156	-2.3%
25 to 29	4463	5300	5450	31.1%	30.7%	31.5%	987	0.4%
30 to 34	4153	4992	5113	28.9%	29.0%	29.5%	960	0.6%
35 to 39	2052	2618	2613	14.3%	15.2%	15.1%	561	0.8%
40 to 44	445	562	616	3.1%	3.3%	3.6%	171	0.5%
45 to 49	42	28	59	0.3%	0.2%	0.3%	17	0.0%
50 to 55		6	0	0.0%	0.0%	0.0%	0	0.0%
Total	14359	17239	17313	100%	100%	100%	2954	20.6%

Again the admissions in the youngest and oldest age groups on the spectrum are the lowest number of admissions. The 40>45 year group has increased to 59 compared to 28 last year and 42 in 2015/16.

6.3 Maternity by Ethnicity

Of the 17313 females admitted, 99.43% declared ethnicity which is similar to the 99.43% and 98.90% declared in 2015 and 2016 respectively. The ratio of White to BME is 58.2% to 40.73%

BME to White in Maternity admissions 2017			
Ethnicity	2017 number	% in 2016	% in 2017
White	10087	51.08%	58.27%
BME	7052	48.35%	40.73%
Unknown	174	0.57%	1.00%
Total	17313		100%

The largest proportion of the 6964 Asian Admissions continue to be Asian other and Pakistani in very much the same proportions

Asian Ethnicity in Maternity Admissions Year ending March 2017(and compared to year ends 2015 and 2016)					
Ethnicity	2017	2015 - %	2016- %	2017- %	variation 2015 / 17
Pakistani	2875	59.40%	32.70%	32.73%	-26.67%
Bangladeshi	1180	39.50%	11.20%	11.17%	-28.33%
Indian	681	1.10%	6.90%	6.86%	5.76%
Asian other	463	7.50%	49.20%	49.24%	41.74%
Total number/ year		4327	5199	6964	

From the chart below, there is a progressive increase for African admissions and a decline in Caribbean and Black Other.

Black Ethnicity in Maternity Admissions 2017				
Ethnicity	2017	2015- %	2016 - %	2017- %
Caribbean	275	57.90%	48.50%	22.29%
African	721	34.70%	40.00%	59.49%
Black other	216	7.40%	11.50%	17.82%
TOTAL	1212			

6.4 Births - Gender – In 2016/7 2897 healthy babies were born an increase of 5.48% more than in 2016. Of these 1379 were female and 1518 male a ratio of 47.6:52.4 which is similar to the ratios recorded for 2014/15 and 2015/16.

6.5 Births – ethnicity - Of the 2897 babies 99.2% had a declared ethnicity leaving 24 babies with unknown ethnicity. This is an increase on last year's figures of 10 and 99.6% respectively

Ethnicity in Healthy Babies			
Ethnicity	Attendance	% in 2016	% in 2017
White	1557	52.9%	53.74%
BME	1316	46.6%	45.41%
Unknown	24	0.37	0.82%
	22897	100.00%	100.00%

7 PATIENT CONCERNS AND COMPLAINTS FROM 1 APRIL 2016 TO 31 MARCH 2017

The Patient Advisory and Liaison Service (PALS) and the Complaints Department are valuable sources of information regarding any concerns or dissatisfaction with our services. The information also helps us to know when the services provided at the Hospital do not meet the needs of patients from protected groups such as patients of different age, gender or ethnicity.

New requirements and equality legislation place greater emphasis on the collection of equality data, and any such information gathered is handled on an anonymised basis. Last year we reported on this data against 631 complaints and the year before that on 671 complaints. (It should also be noted that we had 4602 compliments last year).

The data this year includes the informal concerns received which were resolved without the need for a formal approach as well as the complaints that are investigated through the NHS Complaints Regulations. This gives a higher number to report data on so that in the period 1 April 2016 to 31 March 2017 the Trust received 839 concerns and complaints. The information supplied is detailed in below.

By gender: (See the chart below). Last year we had a very high level of non declaration of gender at 53.9% which has been reduced this year to 4.6%. This 49.2% improvement gives more validity to our data. The increased declaration is for both genders and also indicates that mostly female will raise concerns or complaints

Gender	15/16	%	16/17	%	variance
Female	184	29.2%	500	59.6%	30.4%
Male	107	17.0%	300	35.8%	18.8%
Not stated	340	53.9%	39	4.6%	-49.2%
Totals:	631	100.0%	839	100.0%	

By age: The level of non-declaration has improved from 19.7% to 11.6% but needs to be improved further. The age bands do not use the 5 or 10 year age band ranges which help analysis and as are used by the Service Divisions of Outpatient, Inpatient, Emergency Dept and Maternity. This will be reviewed for data comparability across the age bands and against the level of attendance in patient age bands as a whole.

Age band	15/16	%	16/17	%	variance
0 to 5 years	13	2.1%	12	1.4%	-0.6%
6 to 17 years	19	3.0%	33	3.9%	0.9%
18 to 25 years	32	5.1%	48	5.7%	0.6%
26 to 55 years	197	31.2%	281	33.5%	2.3%
56 to 64 years	56	8.9%	87	10.4%	1.5%
65 to 74 years	80	12.7%	103	12.3%	-0.4%
75 years plus	110	17.4%	178	21.2%	3.8%
Not stated	124	19.7%	97	11.6%	-8.1%
Totals:	631	100.0%	839	100.0%	

By ethnicity: There is still a high level of non-declaration of ethnicity which affects the validity of the data. This has also increased from 28.2% to 39.6%. The Department will be looking to address and improve this during the course of this current year.

	2015-2016		2016-2017	
Ethnicity	No	%	No	%
White	363	57.53%	405	48.27%
BME	90	14.26%	102	12.16%
Not declared	178	28.21%	332	39.57%
Totals	631		839	

Ethnicity	15/16	%	16/17	%	variance
White - British	345	54.7%	373	44.5%	-10.2%
White - Irish	5	0.8%	8	1.0%	0.2%
White - other white	13	2.1%	24	2.9%	0.8%
Mixed white / black Caribbean	1	0.2%	2	0.2%	0.1%
Mixed white and Asian	2	0.3%		0.0%	-0.3%
Other mixed	2	0.3%	2	0.2%	-0.1%
Indian	16	2.5%	10	1.2%	-1.3%
Pakistani	38	6.0%	23	2.7%	-3.3%
Bangladeshi	4	0.6%	13	1.5%	0.9%
Other Asian	3	0.5%	6	0.7%	0.2%
Black Caribbean	12	1.9%	26	3.1%	1.2%
Black African	7	1.1%	7	0.8%	-0.3%
Other Black	1	0.2%	8	1.0%	0.8%
Chinese	2	0.3%	1	0.1%	-0.2%
Other ethnic category	2	0.3%	4	0.5%	0.2%
Not stated	178	28.2%	332	39.6%	11.4%
Totals:	631	100.0%	839	100.0%	

The complaints department is aware of the diverse population served by the Trust and endeavours to continue to collect data on the number of complaints received from the various 'protected groups' in order to identify how complainants access the service and whether any improvements to the way in which information is distributed to the population served needs be made.

Patient Advice and Liaison (PALS) and Complaints leaflets explaining the NHS complaints procedure are available in wards and outpatient clinics, information can also be accessed via the Trust website and the public can obtain information by telephoning the PALS / Complaints department).

The Trust continues to monitor and evaluate the services we provide. Completed equality and diversity questionnaires are returned in a pre-paid envelope to the Patient Affairs department. An equality and diversity monitoring questionnaire and pre-paid envelope was trialled again for the period April 2016 – May 2016 inclusive, and which was sent to all complainants with the acknowledgement letter to complete and return (completion of the questionnaire is voluntary). The results of this feedback will be reviewed.

8 - Languages booked for Translation

Last year only the top 6 booked languages were in the report and without total bookings a full comparison cannot be made. The top 6 languages by popularity were Polish, Urdu, Bengali, Romanian, Punjabi and British Sign Language. This year the top six languages were the same and each have increased in usage. 38 different languages were requested. There were 2826 language support requests in three quarters that we have data for, and with an average of 942 requests per quarter this could have made this potentially circa 3786 requests over the year.

Use of Translation and Interpreting Services in year ending March 2017 * NB

*DNA = New contract started in July therefore data not available in quarter one.

Language	Jul-Sep	Oct-Dec	Oct-Dec	Total	%
1. Polish	314	324	245	883	31.26%
2. Bengali	173	131	118	422	14.94%
3. Urdu	133	127	138	398	14.09%
4. Romanian	116	125	151	392	13.88%
5. BSL	36	36	29	101	3.58%
6. Hindi	16	24	22	62	2.19%
7. Albanian	16	13	30	59	2.09%
8. Punjabi	47	1	10	58	2.05%
9. Hungarian	26	12	10	48	1.70%
10. Russian	11	10	22	43	1.52%
11. Arabic	5	19	15	39	1.38%
12. Portuguese	14	15	10	39	1.38%
13. Italian	13	15	9	37	1.31%
14. Spanish	8	14	15	37	1.31%
15. Lithuanian	7	10	13	30	1.06%
16. Mandarin	13	6	6	25	0.88%
17. Tamil	7	4	13	24	0.85%
18. Pahari	15	3	3	21	0.74%
19. Mirpuri	0	5	15	20	0.71%
20. Turkish	4	7	8	19	0.67%
21. Cantonese	3	5	2	10	0.35%
22. Pashtu	4	6	0	10	0.35%
23. Greek	0	4	5	9	0.32%
24. Slovak	5	3	1	9	0.32%
25. Czech	4	1	0	5	0.18%
26. Somali	0	0	5	5	0.18%
27. Farsi	2	0	1	3	0.11%
28. Twi	0	0	3	3	0.11%
29. Bosnian	1	1	0	2	0.07%
30. Bulgarian	1	0	1	2	0.07%
31. French	1	1	0	2	0.07%
32. Gujarati	1	1	0	2	0.07%
33. Kashmiri	0	0	2	2	0.07%
34. Bravanese	1	0	0	1	0.04%
35. Dari	0	0	1	1	0.04%
36. Kurdish	0	1	0	1	0.04%
37. Swahili	1	0	0	1	0.04%
38. Tigrinya	0	1	0	1	0.04%
	998	924	903	2826	

9. Patients with Hearing or Vision Disability - 2015 – 2016 - In this period we had 650 patients with a diagnosis of conductive, sensorineural or other Hearing loss, and 153 patients with a diagnosis of H540 Blindness binocular or severe visual impairment binocular. This is important information for our Assistive Information Projects.