



Luton and Dunstable University Hospital

Annual Patient Equality Information Report

Year ending 31st March 2018

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1. INTRODUCTION

This report for year ending March 31, 2018 is the fourth annual comprehensive Patient Report. It 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 not only as a statutory requirement but as necessary 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
- To create good relationships with patients and families

**The protected characteristics are listed in the table below.*

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 4 separate systems and divisions of Outpatients, Inpatients, Emergency Department (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 in the future. The table below indicates the information collated in relation to the nine protected characteristics:

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
Maternity and Pregnancy				✓

***Pregnancy and maternity are also a protected characteristic**

The Trust actively encourages positive and negative feedback about its services as this is essential, helpful and welcomed as necessary for continuous service improvement.

2 SUMMARY

The reporting period is 1 April 2017 to March 31, 2018. There are comparisons with the years ending March 31st 2017 and also 2016 and 2015. Inpatients, Outpatients and the Emergency Department are measured in terms of attendances and admissions rather than individuals and so some attendance may be multiple by one individual.

As an overview of the key areas of the last 4 years of this report:

Total Patient attendance 2015 to 2018 shows:

- Total annual attendances have increased by 59545 or 10.75% between March 31st 2015 and March 31st 2018. By far the largest growth at circa 15.2% since March 2015 are Emergency and general Inpatient departments (see chart below).

Patient Attendance Years ending March 31st 2018, 2017, 2016 and 2015						% change 2015 to 2018
DIVISION	2015	2016	2017	2018	TOTALS	
Emergency department	91395	95506	101058	105238	393197	15.14%
Inpatient	78734	82839	87961	90838	340372	15.37%
Outpatient	366352	379486	398117	396491	1540446	8.22%
Maternity	14359	17239	17313	17568	66479	22.34%
and healthy births	2592	2738	2897	2842	11069	9.64%
	553432	577808	607346	612977	2351563	
percent increase		4.40%	5.11%	0.93%	10.75%	

- The percentage increase has lowered from an average of circa 4.5 - 5% per annum over 3 year to become 0.93% between March 2017 and March 2018. The chart shows this is attributed to Outpatients Attendances in year ending March 2018.

Patient Attendance Increases and decreases by division by number and percentage by year (Years ending 2016, 2017 and 2018)						
DIVISION	Years end 2015 to 2016 - %		Years end 2016 to 2017 - %		Years end 2017 to 2018 - %	
Emergency dept.	4111	4.5%	5552	5.8%	4180	4.14%
Inpatient	4105	5.8%	5122	5.2%	2877	3.4%
Outpatient	13134	3.6%	18631	4.7%	-1626	0.0%
Maternity	2880	20.1%	74	0.5%	255	1.57%
and healthy births	146	5.6%	159	5.8%	-55	-1.9%
	24230		29379		5631	

Patient Attendance by Gender

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

Patient Attendance by Gender ratio in 2015 to 2018								
DIVISION	2014/15		2015/16		2016/17		2017/2018	
	male	Female	male	female	male	female	male	female
Emergency	52.0%	48.0%	51.7%	48.3%	51.7%	48.3%	51.2%	48.8%
Inpatient	47.5%	52.5%	47.5%	52.0%	47.7%	52.3%	47.2%	52.9%
Outpatient	42.7%	57.3%	42.3%	57.8%	42.0%	58.0%	42.0%	58.0%
maternity	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Averages	47.4%	52.6%	47.2%	52.7%	47.1%	52.9%	46.8%	53.2%

Patient Attendance by ethnicity shows that there is 24-28% BME attendance across Emergency, Inpatients and Outpatients services. For maternity and healthy babies BME attendance is higher at between 39-48%. For the workforce, BME representation is 37-39%.

Attendance by Ethnicity year end March 2018 – and compared with years ending March 2015, 2016 and 2017 (showing also declaration levels)					
DIVISION	Ethnicity	2015 - %	2016 - %	2017 - %	2018 - %
Emergency department	White	60%	63.5%	62.5%	63.4%
	BME	24.0%	27.0%	27.6%	28.8%
	Unknown	16.0%	9.5%	9.9%	7.8%
Inpatient	White	70.0%	63.5%	68.5%	70.1%
	BME	23.5%	27.5%	24.9%	25.7%
	Unknown	6.5%	9.5%	6.6%	4.2%
Outpatient	White	60.0%	68.4%	68.8%	70.6%
	BME	24.0%	24.5%	25.7%	26.7%
	Unknown	16.0%	7.1%	5.5%	2.7%
Maternity	White	59.4%	51.1%	58.3%	61.6%
	BME	39.5%	48.4%	40.7%	38.1%
	Unknown	1.1%	0.6%	1.0%	0.4%
Healthy Births	White	52.0%	52.9%	53.7%	55.4%
	BME	47.7%	46.6%	45.4%	44.3%
	Unknown	1.6%	0.4%	0.8%	0.25%
Workforce	White	58.8%	59.8%	57.6%	56.0%
	BME	37.7%	37.7%	38.9%	40.0%
	Unknown	3.5%	2.5%	3.5%	4.0%

There is a need to look at BME representation through the age groups of the different services to see the changes in representation levels. In terms of a **representative workforce** - In the chart below, the workforce currently has good BME representation against patient population. It 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.

Ethnicity Profile Year Ending March 2018						
ethnicity	Emergency	Inpatient	outpatient	maternity	Healthy births	Workforce
White	63.4%	70.1%	70.6%	61.6%	55.4%	56.0%
BME	28.8%	25.7%	26.7%	38.1%	44.3%	40.0%
Unknown	7.8%	4.2%	2.7%	0.4%	0.25%	4.0%

3 EMERGENCY DEPARTMENT (ED)

3.1 General Attendance in ED- During this reporting period there was a total of 105,238 attendances in the Emergency Department (ED) which gives an accrued average increase of 4.82% (4614 attendances) each year since 2015. In real terms this is an overall increase in attendances by **15.14%** over a 3 year period since year end March 2015 (13843 more attendances in 2018 than in 2015).

Emergency Department Attendances with increases at years ending March 2015 to March 2018.					
	2015	2016	2017	2018	Total
Attendances	91395	95506	101058	105238	393197
Increase		4111	5552	4180	13843
Increase %		4.50%	5.81%	4.14%	15.14%
Average increase		4.82%	4614		

3.2 Attendance by Gender in ED - of the 105,238 attendances, 51,452 (48.8%) were female and 53,784 (51.2%) male 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 – Date of birth is required on documentation so declaration is high.

As can be seen in the chart that follows this narrative, only 2 attendances this year did not declare gender compared with 1, 6 and 13 the previous three years. There has been very little variation between 2015 and 2018 in the % ratio of attendance attributed to each age band annually against total annual attendances. This shows stasis in the proportion of each age group attending ED over these years despite increased attendance.

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

- The older quartile has lower numbers in their groups.
- There is a marked rise in female attendance in the age groups from aged 75 upwards with a decline in male numbers.
- The over 95 group and the over 100 group have very small numbers against whole attendance but with a notable marked increase of attendance in these which indicates increases in longevity.

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<4 which in year ending amounts to 11.06% (12248). This has stasis over the last 4 years.
- Representation between 0 to 14 years of age is higher for male which is a consistent trend. Otherwise, attendance is reasonably balanced between the Genders with noticeably slightly more male presenting (see Gender above).

Emergency Department by age bands and gender in year ending March 2018 and compared to 2015 and 2017.									
Age band in years	Female	Male	not known	% male	Grand total	% in age band			variation 2018 to 2015
						2018	2017	2015	
0 to 4	5314	6933	1	56.6%	12248	11.6%	12.1%	11.8%	-0.2%
5 to 9	2481	3402		57.8%	5883	5.6%	5.7%	5.5%	0.1%
10 to 14	2611	3609		58.0%	6220	5.9%	6.1%	5.9%	0.0%
15 to 19	2890	3122		51.9%	6012	5.7%	5.8%	5.9%	-0.2%
20 to 24	3525	3367		48.9%	6892	6.5%	6.8%	7.5%	-1.0%
25 to 29	3808	3404		47.2%	7212	6.9%	7.0%	7.3%	-0.4%
30 to 34	3602	3337		48.1%	6939	6.6%	6.4%	6.6%	0.0%
35 to 39	3134	3101		49.7%	6235	5.9%	5.7%	5.3%	0.6%
40 to 44	2470	2660		51.9%	5130	4.9%	4.8%	5.4%	-0.5%
45 to 49	2608	2794		51.7%	5402	5.1%	5.2%	5.3%	-0.2%
50 to 54	2581	2803	1	52.1%	5385	5.1%	5.1%	5.0%	0.1%
55 to 59	2341	2319		49.8%	4660	4.4%	4.5%	4.2%	0.2%
60 to 64	1958	2074		51.4%	4032	3.8%	3.7%	3.7%	0.1%
65 to 69	1849	2124		53.5%	3973	3.8%	3.6%	3.5%	0.3%
70 to 74	1998	2069		50.9%	4067	3.9%	3.6%	3.4%	0.5%
75 to 79	2236	1924		46.3%	4160	4.0%	4.1%	4.0%	0.0%
80 to 84	2449	2155		46.8%	4604	4.4%	4.1%	4.1%	0.3%
85 to 89	2061	1637		44.3%	3698	3.5%	3.6%	3.2%	0.3%
90 to 94	1111	767		40.8%	1878	1.8%	1.9%	1.9%	-0.1%
95 to 99	381	162		29.8%	543	0.5%	0.5%	0.4%	0.1%
100+	44	21		32.3%	65	0.1%	0.1%	0.1%	0.0%
Total	51452	53784	2		105238	100%	100%	100%	

3.4 Attendance in ED by Ethnicity

From 105238 attendances at year end March 2018, 92.23% have a declared ethnicity which is an improvement on the previous year and sustains a year on year improvement on the 84.4% declaration at March 2015.

Declaration of ethnicity	2015	2016	2017	2018
	84.4%	90.50%	90.07%	92.23%

ED attendances are usually unplanned and can have transitory patients making this declaration result reasonable.

The Trust also measures by BME, White and Unknown attendances as part of the

Workforce Race Equality Standard WRES.

Attendance in ED by Ethnicity year end March 2018 – and compared with year end March 2015, 2016 and 2017						
Ethnicity	2015	2016	2017	2018	Numbers 2017	Numbers 2018
White	60%	63.5%	62.52%	63.4%	63180	66717
BME	24%	27%	27.55%	28.83%	27842	30341
Unknown	16%	9.5%	9.93%	7.77%	10036	8180
					101058	105238

See footnote - For the data above 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

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

Asian Ethnicity – From the chart which follows ED had 21156 Asian attendances in 2018 - circa a 10.1% increase from March 2017, and actually 40.2% since March 2015). Against this increase in the overall numbers of Asian attendances the percentage ratios across each of these groups show relatively proportional stasis.

Asian Ethnicity in ED year ending March 2018 - Compared to years ending March 2015, 2016 and 2017								
Ethnicity	2015	%	2016	%	2017	%	2018	%
Pakistani	8067	55.0%	9480	55.7%	10371	55.7%	11283	55.3%
Bangladeshi	2597	18.0%	2794	16.4%	3132	16.8%	3284	16.1%
Indian	1625	11.0%	2003	11.8%	2235	12.0%	2446	12.0%
Asian other	2268	16.0%	2745	16.1%	2898	15.6%	3387	16.6%
TOTAL	14557		17022		18636		20400	
Increased numbers			2465		1614		1764	
Percentage			16.9%		9.5%		9.5%	

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	

Asian Ethnicity	Increase between 2015 - 2018	
	plus	plus
Pakistani	3216	39.9%
Bangladeshi	687	26.5%
Indian	821	50.5%
Asian Other	1119	49.3%
	6599	40.1%

HIGH ASIAN INCREASES - The general increase in ED attendances since March 2015 is 15.14 % - the increase in Asian attendances during this period is 40.1% - This is a 25% difference in the increased attendance levels.

Asian attendances formed 19.4% of all ED attendances in year ending March 2018 – over half of these attendances are Pakistani at 53-55%

NB: This group does not include Mixed Asian and White, or Chinese

Black Ethnicity – From the chart which follows ED had 5939 attendances in 2018 compared to 21156 Asian attendances. There was a 27.3% increase in Black Ethnicity attendances from 2015 data to 2018 data compared to 40.2% in Asian Ethnicity attendances in the same period. Against this increase in the overall numbers of Black Ethnicity attendances the percentage ratios across each of these groups show relatively proportional stasis over these years.

Black Ethnicity in ED attendances year ending March 2018 – compared to years ending March 2015, 2016 and 2017								
Ethnicity	2015	%	2016	%	2017	%	2018	%
African	1915	41.0%	2016	37.2%	2120	38.7%	2273	38.3%
Caribbean	1799	38.5%	2171	40.1%	2232	40.7%	2350	39.6%
Black other	953	20.4%	1223	22.6%	1131	20.6%	1316	22.2%
TOTAL	4667		5410		5483		5939	
Increased numbers	743		73		456			
Percentage	15.9%		1.3%		8.1%			

BLACK AND ASIAN ATTENDANCE - The general increase in ED attendances since March 2015 is 15.14 % - the increases in Black ethnicity attendance during this period is 27.3%. This is a contrast to the much faster growth of the Asian group at 40.2%. There were 105238 attendances in 2018 of which BME are 28.8% (unknown 7.7%)-from this 28.8%, 19.4% are Asian and 5.6% Black. The rest of the BME populous is 3.8%.

Black Ethnicity	Increase 2015 to 2018	
African	358	18.7%
Caribbean	551	30.6%
Black Other	363	38.1%
	1272	

NB: There was an error in Black other numbers in last year's report showing a higher figure which has been adjusted this year)

NB: This group does not include Mixed White and Black African or Mixed White

and Black Caribbean, any other ethnic group or any other mixed background.

3.5 Attendance in ED by Age and Ethnicity

In years ending 2016 and 2017 the ratio of BME to White in ED attendance was 27.5% to

62.5% in this year's report it is 28.8 to 63.4% so still a comparable ratio with a slight increase to each due to improved levels of declaration.

The data in the chart 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. However, the percentage of BME representation in each age band is creeping up each year and this is marked too in the over 95's. 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. It should be noted that this is mainly due to Asian ethnicity attendance.

A&E Attendees by Age and Ethnicity at March 2017 and across each age band With Comparison to 2016 and 2017 percentages									
	By number 2018					By percentage 2018			2016/2017
Age band	White	Not known	BME	Total		White	not known	BME 2018	BME 2017 BME 2016
0 to 4	6422	336	5490	12248		52%	3%	45%	45% 45%
5 to 9	2891	256	2736	5883		49%	4%	47%	45% 42%
10 to 14	3445	371	2404	6220		55%	6%	39%	36% 35%
15 to 19	3370	729	1913	6012		56%	12%	32%	29% 27%
20 to 24	3986	947	1959	6892		58%	14%	28%	26% 24%
25 to 29	4328	781	2103	7212		60%	11%	29%	27% 28%
30 to 34	4009	734	2196	6939		58%	11%	32%	31% 31%
35 to 39	3378	713	2144	6235		54%	11%	34%	35% 34%
40 to 44	2833	560	1737	5130		55%	11%	34%	31% 31%
45 to 49	3335	558	1509	5402		62%	10%	28%	26% 23%
50 to 54	3624	554	1207	5385		67%	10%	22%	18% 19%
55 to 59	3297	409	954	4660		71%	9%	20%	19% 20%
60 to 64	2758	288	986	4032		68%	7%	24%	23% 21%
65 to 69	2929	246	798	3973		74%	6%	20%	16% 15%
70 to 74	3390	206	471	4067		83%	5%	12%	13% 15%
75 to 79	3364	167	629	4160		81%	4%	15%	16% 16%
80 to 84	3810	150	644	4604		83%	3%	14%	13% 11%
85 to 89	3289	101	308	3698		89%	3%	8%	8% 6%
90 to 94	1718	46	114	1878		91%	2%	6%	6% 5%
95 to 99	493	20	30	543		91%	4%	6%	2% 2%
100+	48	8	9	65		74%	12%	14%	5% 1%
Total	66717	8180	30341	105238		63.4%	7.8%	28.8%	

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, 2017 and now 2018 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 beliefs that are below 1%. (Apart from Hindu which is just below 1% in overall data).

Attendance by Religion and Belief in ED year end March 2018 compared with year ends March 2015 and 2017							Changes re: 2018 to 2015
Category of Belief	Numbers by year			Percentages by year			
	2015	2017	2018	2015	2017	2018	
Not specified	44854	51263	53977	49.1%	50.2%	51.3%	20.3%
Church of England	13660	13958	14110	15.0%	13.7%	13.4%	3.3%
Muslim	8637	9948	10575	9.5%	9.7%	10.0%	22.4%
None	6972	7305	7866	7.6%	7.2%	7.5%	12.8%
Christian	6207	6919	6859	6.8%	6.8%	6.5%	10.5%
Roman Catholic	6061	6904	6897	6.6%	6.8%	6.6%	13.8%
Other	4080	3730	3861	4.5%	4.7%	3.7%	-5.4%
Hindu	924	1031	1093	1.0%	1.0%	1.0%	18.3%
	91395	101058	105238				

With the year on year increased attendances it can be seen that the highest category increases are for not specified 20.3%, Muslim 22.4% and Hindu at 18.3% respectively. The groups are still small but it indicates a potential ongoing trend especially beside Asian Ethnicity increases.

4. INPATIENTS ATTENDANCE

4.1 Inpatients Attendance in General - The total of inpatient attendances for this reporting year is **90,838**. This was 12,104 more attendances than in year-end 2015. This is actually a **15.37%** increase between the years of 2015 and 2018 (a four year period).

Inpatients Attendance - 2015 to 2018					increase between 2015 / 2018 data	
	2015	2016	2017	2018		
numbers	78734	82839	87961	90838	12104	15.37%
increase		4105	5122	2877		
% increase		5.21%	6.18%	3.27%		
Total attendances between 2015 and 2018					340372	

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 **90,838** inpatient attendances, 48,011 were female and 44,827 were male. Even with the year on year increase in attendance the female to male ratio is much the same as last year 52.85% female to 47.15% male which is comparable to 2016 at 52.3% to 47.7% and 2015 at 52%:47.5%.

4.3 Inpatients by Age Band and Gender – All 90,838 attendances declared an age.

The table that follows this narrative shows inpatient admissions by Age and Gender, year ending March 2018. It also includes the percentage of total attendance by age band and has comparators to the Emergency Department and Inpatients.

- The percentage spread of attendance between age bands remains similar to 2015, 2016 and 2017 despite increased attendance. The marked highest group remains in the 0 to 4 years age band which is also a trend in Emergency Department 0-4 year age band.
- This high level of attendance in the 0<4 group amounted to 11.62% in 2018, 11.95% in 2017, 12.9% in 2016 and 11.8% in 2015. There continues to be a disproportionate attendance by male in this group at 54.77% and also in the 5>10 age group at 55.93%.
- Conversely to ED, Inpatient attendance is more likely for both Genders the older they are except for the 0>4 age group.
- As for previous years, 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 number of attendances in the 100+ group has increased to 50 in 2018 which reflects the increases seen in the Emergency Department.

Inpatients by Age and Gender – 2017-2018 Percentages of attendance by age band						Data for Comparison to ED / Outpatients	
Age band	Female	Male	Grand Total	% of total in 2018	% of Total in 2017	ED Patients 2018	Out patients 2018
0 to 4	4774	5780	10554	11.62%	11.95%	11.64%	3.57%
5 to 9	1078	1368	2446	2.69%	2.70%	5.59%	2.90%
10 to 14	1047	1099	2146	2.36%	2.36%	5.91%	3.57%
15 to 19	1229	1098	2327	2.56%	2.52%	5.71%	3.20%
20 to 24	1641	1061	2702	2.97%	3.12%	6.55%	3.21%
25 to 29	2219	1200	3419	3.76%	3.98%	6.85%	5.31%
30 to 34	2432	1492	3924	4.32%	4.19%	6.59%	6.40%
35 to 39	2453	1639	4092	4.50%	4.38%	5.92%	6.21%
40 to 44	2247	1707	3954	4.35%	4.25%	4.87%	5.27%
45 to 49	2871	2088	4959	5.46%	5.41%	5.13%	6.10%
50 to 54	3133	2461	5594	6.16%	6.20%	5.12%	7.26%
55 to 59	3367	3027	6394	7.04%	7.41%	4.43%	7.26%
60 to 64	2962	2988	5950	6.55%	6.37%	3.83%	7.05%
65 to 69	3169	3288	6457	7.11%	6.98%	3.78%	7.51%
70 to 74	3454	3619	7073	7.79%	7.27%	3.86%	7.71%
75 to 79	3210	3308	6518	7.18%	7.75%	3.95%	6.87%
80 to 84	3089	2784	5873	6.47%	6.10%	4.37%	5.95%
85 to 89	2229	1838	4067	4.48%	4.44%	3.51%	3.38%
90 to 94	1046	810	1856	2.04%	2.09%	1.78%	1.05%
95 to 99	323	160	483	0.53%	0.48%	0.52%	0.21%
100+	38	12	50	0.06%	0.04%	0.06%	0.02%
Totals	48011	42827	90838	100%	100	100%	100%

- In terms of the female and male patterns of attendance level by age band these remain in a consistently similar pattern as can be seen in the chart below.

Inpatients Attendance by Age Bands 2018 - Variance Female to male 2018 and compared to 2017						
Age band	Total	% female	% male	Variance female to male		
				2018	2017	
0 to 4	10554	45.23%	54.77%	-9.53%	-9.53%	More male pattern
5 to 9	2446	44.07%	55.93%	-11.86%	-10.78	
10 to 14	2146	48.79%	51.21%	-2.42%	-8.08	
15 to 19	2327	52.81%	47.19%	5.63%	7.44	More female
20 to 24	2702	60.73%	39.27%	21.47%	24.24	
25 to 29	3419	64.90%	35.10%	29.80%	28.63	
30 to 34	3924	61.98%	38.02%	23.96%	24.95	
35 to 39	4092	59.95%	40.05%	19.89%	17.45	
40 to 44	3954	56.83%	43.17%	13.66%	14.03	
45 to 49	4959	57.89%	42.11%	15.79%	14.87	
50 to 54	5594	56.01%	43.99%	12.01%	14.66	
55 to 59	6394	52.66%	47.34%	5.32%	0.55	More balanced
60 to 64	5950	49.78%	50.22%	-0.44%	-3.02	
65 to 69	6457	49.08%	50.92%	-1.84%	-0.88	
70 to 74	7073	48.83%	51.17%	-2.33%	-3.28	
75 to 79	6518	49.25%	50.75%	-1.50%	-8.15	More female
80 to 84	5873	52.60%	47.40%	5.19%	8.4	
85 to 89	4067	54.81%	45.19%	9.61%	10.44	
90 to 94	1856	56.36%	43.64%	12.72%	17.07	
95 to 99	483	66.87%	33.13%	33.75%	42.38	
100+	50	76.00%	24.00%	52.00%	3.23	
Total	90838					

4.4 Inpatients by Ethnicity

Inpatient attendances are usually planned so the proportion of "not stated" should be lower than the Emergency Department. Any not stated should be addressed as even small numbers may make a significant difference to outcomes and reliability of data.

When recording the BME /White data for this year and from 2015 this respectively is:

Inpatient attendances BME to White Year ending March 2018 and compared to 2015 and 2017.							increase between 2015 / 2018 by no / %	
Ethnicity	2015	%	2017	%	2018	%		
White	54666	69.4%	60252	68.5%	63687	70.1%	9021	16.5%
BME	18987	24.1%	21921	24.9%	23373	25.7%	4386	23.1%
unknown	5081	6.5%	5788	6.6%	3778	4.2%	-1303	-25.6%
TOTAL	78734		87,961		90,838			

This year from the 90,838 inpatients, 95.84% declared their ethnicity which is a 2.3% improvement in declaration levels since 2015. Undeclared ethnicity is now 4.2%.

Between 2015 and 2018 there is a 23.1% increase in BME attendances against a 16.5% increase in White. This is due to increased attendance and increased declaration.

Asian Ethnicity – See the chart below - between year endings March 2015 and 2018 there was a **22.13% increase in Asian ethnicity attendances**. *This does not include Mixed Asian and White (381 attendances in 2018 and with a 24.5% increase from 2015) or Chinese (265 attendances in 2018 and 66.7% increase from 2015).*

The overall total increase in attendance for all Inpatients between years ending March 2015 and 2018 was 15.37%, but between March 2015 and 2018 there was a 22.13% increase in Asian ethnicity attendances.

Asian Ethnicity in Inpatient attendances year ending March 2018 (compared to March 2015 and 2017)							change between 2015 and 2018	
Ethnicity	2015	%	2017	%	2018	%		
Pakistani	7059	55%	8072	54%	8610	55%	1551	21.97%
Bangladeshi	2298	18%	2444	17%	2554	16%	256	11.14%
Indian	2028	16%	2349	16%	2388	15%	360	17.75%
Asian Other	1450	11%	1846	13%	2124	14%	1320	46.50%
Totals	12835	100%	14711	100%	15676	100%	3487	22.13%

However, the percentage of the different categories of Asian ethnicity remained proportionally similar over this period, with 53-55% Pakistani, 16-18% Bangladeshi, 15-16% Indian, but with a more marked increase for Asian other from a ratio of 11% to 14% of Asian attendance.

Black Ethnicity – **Black ethnicity inpatients increased in numbers by 16.7%** between March 31st 2015 and 2018. The largest increase has been in Black other by 53.47%. *This does not include Mixed White and Black African or Mixed White and Black Caribbean, any other ethnic group or any other mixed background.*

Black Ethnicity in Inpatient attendances year ending March 2018 (compared to March 2015 and 2017)							change between 2015 to 2018	
Ethnicity	2015	%	2017	%	2018	%		
Caribbean	2005	49%	2136	46%	2307	48%	302	15.06%
African	1653	40%	1807	39%	1788	37%	135	8.17%
Black other	475	11%	685	15%	729	15%	254	53.47%
TOTAL	4133		4628		4824		691	16.7%

4.5 Inpatients by Religion or Belief

Declaration of religion or belief of the 90,838 inpatient attendances in 2018 is proportionally similar to previous years. The “no declarations” for 2016, 2017 and 2018 have increased from 37.4% to 39.33% in 2018. There are 50 different belief categories. The protected characteristic for religion or belief also covers people with no belief, and this is also included in the data and is between 7.6 to 9% during this period.

Key increases between 2015 and 2018 have been not specified at 15.48%, Muslim at 10.26%, none at 30.12%.

Inpatient Attendances by Religion or Belief Year ending March 2018 (compared to 2016 and 2017)							Increase /decrease 2018 to 2015	
Declared Belief or no Belief	2015	%	2017	%	2018	%		
Not specified*	29690	37.7%	33248	37.8%	35728	39.3%	6038	20.3%
Church of England	16889	21.5%	17330	19.7%	17624	19.4%	735	4.4%
Muslim	7504	9.5%	8420	9.6%	8855	9.8%	1351	18.0%
Christian	7424	9.4%	8264	9.4%	7821	8.6%	397	5.3%
Roman Catholic	6498	8.3%	7526	8.5%	7606	8.4%	1108	17.1%
None	5897	7.5%	7951	9.0%	8183	9.0%	2286	38.3%
Hindu	1092	1.4%	1299	1.5%	1275	1.4%	183	16.8%
Methodist	850	1.1%	824	0.9%	762	0.8%	-88	-10.4%
Other (not stated)	668	0.8%	564	0.6%	695	0.8%	27	4.0%
Other stated (36)	2222	2.8%	2535	2.9%	2289	2.5%	67	3.0%
Total	78734		87961		90838			

For the “Other stated” religions in the category in the chart above, are not listed separately as each have a below .5% number of responses. A further 0.7% (695) selected “other” which means their Belief is not listed. There is need to improve declaration level as non-declaration increases circa 1% a year. In 2018 39.3% equates to 30942 attendances.

5 Outpatient Attendance

5.1 Outpatients in General - The total of outpatient attendances for this reporting year is **396,491** against 366,352 year ending March 2015. This is an 8.22% increase in attendances compared to 2015 albeit not as much as the circa 15% increases in ED and Inpatients. The last 4 years have seen an accrued upward trend in numbers and a delayed capture date for year end March 2017 would account for the higher last year to this year's numbers.

Year ending	Number	Number - % increase / decrease on previous year
March 2018	396,491	(1626) (.4%)
March 2017	398,117	18631 and 4.68%
March 2016	379,486	13134 and 3.59%
March 2015	366,352	---

5.2 Outpatients by Gender – Of the **396,491** attending **58% were female: 42% male** which is the same as last year and similar to years ending March 2016 and 2015. This year, the gender of one patient was not determined. Last year there 20 attendances without gender determined and 11 the previous year. These are too low a percentage to record.

5.3 Outpatients by Age Band and Gender - Unlike representation results in ED 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 in 2018 and compared to 2016 and 2017, as well as percentages relating to each age group and gender, and overall figures.

Outpatients by Age Band and Gender at year ending March 2018 – and compared to years ending March 2016 and 2017									
Age Band	Female 2018	Male 2018	Grand Total	2018 % female	2018 % Male	% of band 2016	% of band 2017	% band 2018	Variation to 2016
0~4	6214	7947	14161	43.9%	56.1%	3.8%	3.6%	3.6%	-0.2%
5~9	5428	6073	11501	47.2%	52.8%	3.4%	2.9%	2.9%	-0.5%
10~14	6840	7321	14161	48.3%	51.7%	3.2%	3.4%	3.6%	0.4%
15~19	6806	5893	12699	53.6%	46.4%	3.5%	3.2%	3.2%	-0.3%
20~24	8900	3842	12742	69.8%	30.2%	5.3%	3.4%	3.2%	-2.1%
25~29	16329	4714	21043	77.6%	22.4%	6.2%	5.6%	5.3%	-0.9%
30~34	19419	5940	25359	76.6%	23.4%	5.9%	6.4%	6.4%	0.5%
35~39	17589	7028	24617	71.5%	28.5%	5.3%	6.0%	6.2%	0.9%
40~44	13229	7672	20901	63.3%	36.7%	6.2%	5.2%	5.3%	-0.9%
45~49	14868	9309	24177	61.5%	38.5%	3.0%	6.1%	6.1%	3.1%
50~54	17181	11594	28776	59.7%	40.3%	7.3%	7.2%	7.3%	0.0%
55~59	16047	12719	28766	55.8%	44.2%	7.1%	7.2%	7.3%	0.2%
60~64	14949	12995	27944	53.5%	46.5%	7.0%	7.0%	7.0%	0.0%
65~69	14932	14849	29781	50.1%	49.9%	7.8%	7.6%	7.5%	-0.2%
70~74	15692	14892	30584	51.3%	48.7%	7.3%	7.5%	7.7%	0.5%
75~79	13939	13292	27231	51.2%	48.8%	7.3%	7.1%	6.9%	-0.5%
80~84	12030	11557	23587	51.0%	49.0%	5.9%	6.0%	5.9%	0.1%
85~89	6954	6438	13392	51.9%	48.1%	3.3%	3.3%	3.4%	0.1%
90~94	2257	1905	4162	54.2%	45.8%	1.1%	1.1%	1.0%	-0.1%
95~99	488	342	830	58.8%	41.2%	0.2%	0.2%	0.2%	0.0%
100+	53	24	77	68.8%	31.2%	0.0%	0.0%	0.0%	0.0%
Total	230144	166346	396491			100%	100%	100%	

The number or attendance for females at 100 plus years has doubled to 53 but males remain constant at 23-24. There has been a surge in the 45-49 age group the last 2 years especially for females totalling 3.1% which equates to 12291 attendances. However, all other bands remain fairly consistent.

5.4 Outpatients by Ethnicity

Declaration of ethnicity – This year declaration is 97.3% (10745 non-declared attendances). The declaration for 2017 and 2016 was 94.97% and 92.92% respectively. This shows year on year improvement. The reasons for non-declaration are listed below. 1126 attendances are recorded as actively refused to give. The rest may be passive reasons.

Outpatients Ethnicity Declaration year ending March 2018		
Categories	Number	%
Not Known / not stated	1227	0.30%
Not stated - ask patient	8392	2.12%

Refused to give	1126	0.28%
	10745	2.70%

Outpatient's attendances have increased 8.22% compared to 2015 when there were 366,352 attendances. The percentages for ethnicity in 2015 were White 68.8%, BME 24.3% and not known 6.9%. Declared BME attendances have increased 18.9% since 2015 which is a higher increase than for White attendances at 11% in total and their ratio has increased from 24.3% in 2015 to 26.7% in 2018 (a 2.4% increase which in 2018 equates to 9515 attendances). This data increase has come from increased attendances and reducing unknown ethnicity.

Ethnicity In Outpatients Attendance Year ending March 31st 2018 (compared to years ending 2015 and 2017)								
Ethnicity	2015	% in 2015	2017	% in 2017	2018	% in 2018	Variation 2018 to 2015 no and %	
White	252140	68.8%	273872	68.8%	279752	70.6%	27612	10.95%
BME	89084	24.3%	102636	25.7%	105888	26.7%	16804	18.86%
Unknown	25128	6.9%	21609	5.5%	10851	2.7%	-14277	-56.84%
	366352		398117		396491		30139	

Asian Ethnicity – Asian outpatient attendances totalled 61139 in 2015 and 71652 in 2018. This is a difference of 10513 attendances of which circa 51% are Pakistani, 18% Indian, 19% Bangladeshi and 12% Asian other. BME are 26.7% of the 396491 attendances in 2018 and at 18.1%, Asian form 68% of BME.

Asian Ethnicity in Outpatient attendances year end March 2018 compared to year end March 2015					Increase 2015 to 2018	
Ethnicity	2015	% in 2015	2018	% in 2018	no	%
Pakistani	32820	53.7%	36953	51.6%	4133	12.6%
Bangladeshi	10809	17.7%	12832	17.9%	2023	18.7%
Indian	11578	18.9%	13464	18.8%	1886	16.3%
Asian other	5932	9.7%	8403	11.7%	2471	41.7%
TOTAL	61139	100%	71652	100%	10513	17.2%

Against the general attendance increase of 8.44%, there is an overall increase in Asian attendances by 17.2% between years ending March 2015 and 2018 keeping relatively consistent proportions / percentages across 3 groups between 2015 and 2018. However there is a marked accrued increase on Asian Other which although only currently 11.7% of the Asian Group, has increased 41.7% over the 4 year ends. *This group does not include Mixed White and Asian or Chinese*

Black Ethnicity - From the chart below against the general attendance increase of 8.44%, there has been a 15.3% increase in Black Ethnicity attendances in Outpatients between years ending March 2015 and March 2018. The highest increases have been across African and Black other. This group does not include *This does not include Mixed White and Black African or Mixed White and Black Caribbean, any other ethnic group or any other mixed background.*

BME are 26.7% of the 396491 attendances in 2018 and at 18.1%, Black Ethnicity forms 5.81% of this 26.7% BME percentage and with Asian at 18.1%, the remaining BME populus is 2.79%.

Black Ethnicity in Outpatient attendances year end March 2018 compared to year end March 2015					Increase 2015 to 2018	
Ethnicity	2015	% in 2015	2018	% in 2018	no	%
African	7333	36.65%	9000	39.02%	1667	22.7%
Caribbean	10496	52.45%	11221	48.65%	725	6.9%
Black other	2181	10.90%	2846	12.34%	665	30.5%
TOTAL	20010	100%	23067	100%	3057	15.3%

5.5 Outpatients by Religion or Belief

Between the years ending 2015 and 2018, whereas outpatient attendance numbers have increased 8.44%, the proportion of those who have declared Church of England and Christian belief in 2018 has decreased by 4.3% and 0.4% (or 3565 attendances) in 2018. Muslim has increased 17% or 6462 attendances, not known by 10.8% or 13174 attendances and none or no belief by 19.4% or 6970 attendances.

A high level of attendances at 34.2%, still do not specify a religion or belief. The Other stated religion or beliefs (each of which are less than 0.5% of the total), number 42- 43 across the 3 years.

Out Patient Attendances by Belief Year end March 2018 (compared to 2015)							
Belief or no Belief	2015	2018	% in 2015	% in 2018	variation	% Variation	% change
Not known *	122228	135402	33.4%	34.2%	13174	0.75%	10.8%
Church of England	79461	76058	21.7%	19.2%	-3403	-2.52%	-4.3%
Muslim	37904	44366	9.5%	11.2%	6462	1.69%	17.0%
None	36003	42973	9.3%	10.8%	6970	1.54%	19.4%
Christian	40536	40374	11.1%	10.2%	-162	-0.92%	-0.4%
Roman Catholic	30816	33463	8.2%	8.4%	2647	0.24%	8.6%
Hindu	6633	7431	1.8%	1.9%	798	0.07%	12.0%
Methodist	3624	3228	1.0%	0.8%	-396	-0.19%	-10.9%
Other (not stated)	2045	2391	0.6%	0.6%	346	0.00%	16.9%
Other stated (42-43 below 0.5%)	13809	10805	3.6%	2.7%	-3004	-0.87%	-21.8%
Total	379486	396491	100%	100%	18631		

6 Maternity and births

- 6.1 General Admissions** – There were 17568 females admitted for maternity care in Year ending March 2018 which is a 0.5% increase on the 17239 admitted in 2015-2016.

Maternity Admissions in year ending March 2018 compared to March 2016 and 2017			
Year	Number	Increase	%
2016	17239		
2017	17313	74	4.3%
2018	17568	255	14.7%
Totals	52120	329	19%

- 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 circa 60-61%.

Also the next 2 levels of admissions are the same age bands as for the last 2 years, which is the 20>24 years group and the 35>39 years group but with a trend of decrease in the former and increase in the latter. The proportions in the 40 to 49 age group and the 15-19 group remain similar but this year has seen a further 5 births in the 50-55 age group bringing the total over a 4 year period to 11 births in this group.

Maternity admissions at year end March 2018 (and compared to Years ending March 2015, 2016 and 2017)									variation 2015 to 2018	
age band	Mar-15	Mar-16	Mar-17	Mar-18	% in 2015	% in 2016	% in 2017	% in 2018		
10 to 14			1	2			0.0%	0.0%	2	0.0%
15 to 19	548	724	649	663	3.8%	4.2%	3.7%	3.8%	115	0.0%
20 to 24	2656	3009	2812	2563	18.5%	17.5%	16.2%	14.6%	-93	-3.9%
25 to 29	4463	5300	5450	5326	31.1%	30.7%	31.5%	30.3%	863	-0.8%
30 to 34	4153	4992	5113	5452	28.9%	29.0%	29.5%	31.0%	1299	2.1%
35 to 39	2052	2618	2613	2927	14.3%	15.2%	15.1%	16.7%	875	2.4%
40 to 44	445	562	616	547	3.1%	3.3%	3.6%	3.1%	102	0.0%
45 to 49	42	28	59	82	0.3%	0.2%	0.3%	0.5%	40	0.2%
50 to 55		6	0	5	0.0%	0.0%	0.0%	0.0%	5	0.0%
Total	14359	17239	17313	17567	100%	100%	100%	100%	3208	20.6%
increase %	<div> <div>2880</div> <div>74</div> <div>254</div> </div> <div>20.10% 0.43% 1.47%</div>									

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 82 compared to previous years at 59, 28 and 42. There have been 11 maternities over the age of 50 since 2015.

6.3 Maternity by Ethnicity

Of the 17568 females admitted, 99.64% declared ethnicity which is similar to the high level

of declaration in 2015, 2016, 2017. Although the ratio of BME is much higher in the maternity inpatients than in other divisions (current ratio at 38.07% BME to 61.60% White), the level of BME to White across the 3 years has declined by 10% between 2016 and 2018.

Ethnicity in Maternity admissions year ending March 2018 (and compared to % in 2016 and 2017)						
Ethnicity	2017	2018		2016%	2017%	2018%
White	10087	10819		51.1%	58.3%	61.60%
BME	7052	6686		48.4%	40.7%	38.07%
Unknown	174	63		0.6%	1.0%	0.36%
Total	17313	17568		100%	100%	100%

Asian attendances - Total attendances fluctuate more in Maternity but Asian figures within this remain quite high. The percentage of 5 of Asian attendances in 2018 is 28.5%. Of this the majority are Pakistani which form 55% of Asian attendances.

Asian Ethnicity in Maternity Admissions Year ending March 2017(and compared to year ends 2015 and 2016)									
Ethnicity	2015	2016	2017	2018	2015 by %	2016 by %	2017 by %	2018 by %	2015 / 17
Pakistani	2531	2279	2875	2736	58.3%	32.7%	55.3%	54.6%	-3.8%
Bangladeshi	850	778	1180	1219	19.6%	11.2%	22.7%	24.3%	4.7%
Indian	601	478	681	622	13.9%	6.9%	13.1%	12.4%	-1.4%
Asian other	357	3428	463	436	8.2%	49.2%	8.9%	8.7%	0.5%
Total number/ year	4339	6963	5199	5013					
increase decrease		2624	-1764	-186					

Black Ethnicity attendances - 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 year ending March 2018								
Ethnicity	2015	2016	2017	2018	2015	2016	2017	2018
Caribbean	329	200	275	294	30.2%	18.3%	22.7%	25.5%
African	548	471	721	555	50.3%	43.0%	59.5%	48.2%
Black other	213	424	216	302	19.5%	38.7%	17.8%	26.2%
TOTAL	1090	1095	1212	1151				

6.4 Maternity by Religion or belief

Religion and Belief in Maternity Inpatients and in General Inpatients at year ending March 2018					Variation
	INPATIENTS		MATERNITY		
Declared Belief or no Belief	2018	%	2018	%	

Church of England	17624	19.40%	323	1.84%	-17.6%
Not specified*	35728	39.33%	2922	16.63%	-22.7%
Muslim	8855	9.75%	4420	25.16%	15.4%
Christian	7821	8.61%	2273	12.94%	4.3%
Roman Catholic	7606	8.37%	1430	8.14%	-0.2%
None	8183	9.01%	5382	30.64%	21.6%
Hindu	1275	1.40%	301	1.71%	0.3%
Methodist	762	0.84%			
Other (not stated)	695	0.77%	28	0.16%	-0.6%
Other stated (36 below 0.5%)	2289	2.52%	172	0.98%	-1.5%
Orthodox			176	1%	
Sikh			141	0.80%	
Total	90838	100%	17568	100%	

6.5 Healthy Births by Number and Gender

In 2017/18 2842 healthy babies were born. After increases in 2016 of 5.6% and in 2017 of 5.8%, this year saw a 1.93% decrease which gives an average increase over the 3 years of 3.16%. Over the 4 year period the ratio of female to male has not changed much and averages out at 49% female to 51% male.

Healthy Births by number and gender year ending March 2018 - with comparisons to 2015, 2016 and 2017							
Year	Female	Male	Total	% female	% male	total	variation
2015	1267	1325	2592	48.9%	51.1%	100%	
2016	1365	1373	2738	49.9%	50.1%	100%	146
2017	1379	1518	2897	47.6%	52.4%	100%	159
2018	1397	1445	2842	49.2%	50.8%	100%	-55
Totals	5408	5661	11069				
percentage	48.9%	51.1%					
Average							3.16%

- 6.6 Births – ethnicity** - Of the 2842 babies 99.8% had a declared ethnicity leaving just 7 babies with unknown ethnicity which is improved declaration on last year's figures of 24 babies with unknown ethnicity.

Ethnicity in Healthy Births year ending March 2018 with comparisons to 2017 and 2016					
Ethnicity	Attendance		% in 2018	% in 2017	% in 2016
	2018	2017			
White	1575	1557	55.42%	53.74%	52.90%
BME	1260	1316	44.33%	45.41%	46.60%
Unknown	7	24	0.25%	0.82%	0.37%
	2842	2897	100%	100%	100%

7 PATIENT CONCERNS AND COMPLAINTS FROM 1 APRIL 2017 TO 31 MARCH 2018

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. We reported on this data for the last 4 years with complaints at year end March 2015 (671), at 2016 (631), at 2017 (839) and at 2018 (824).

It is very hard to quantify the number of compliments or thanks that the Trust receives which may have been by cards, letters or other communications. However those recorded amount to 3326 for year ending March 2018.

From 2017 the data included 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 in 2017 and 2018 as opposed to a surge in concerns. The information supplied is detailed below.

By gender: (See the chart below). In year ending March 2016 there was still a very high level of non- declaration of gender at 53.9% which reduced to 4.6% in 2017 (and was 6.7% in 2018). This 49.2% improvement gives more validity to our data. The increased declaration is for both genders and also indicates that it is mostly likely that females will raise concerns or complaints.

Gender in complaints year ending March 2018 compared to Years ending 2017 and 2016							
Gender	15/16	%	16/17	%	17/18	%	Variance 2017/ 2018
Female	184	29.2%	500	59.6%	459	55.7%	-3.90%
Male	107	17.0%	300	35.8%	310	37.6%	1.82%
Not stated	340	53.9%	39	4.6%	55	6.7%	2.07%
Totals:	631	100%	839	100%	824	100%	

By age: The level of non-declaration has improved from 19.7% at year end March 2016 to 7.4% at year end March 2018. 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 Department 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 in concerns / complaints year ending March 2018							
Age band	15/16	%	16/17	%	17/18	%	variance 2017/2018
0 to 5 years	13	2.1%	12	1.4%	21	2.5%	1.15%
6 to 17 years	19	3.0%	33	3.9%	28	3.4%	-0.50%
18 to 25 years	32	5.1%	48	5.7%	48	5.8%	0.13%
26 to 55 years	197	31.2%	281	33.5%	312	37.9%	4.36%
56 to 64 years	56	8.9%	87	10.4%	82	10.0%	-0.45%
65 to 74 years	80	12.7%	103	12.3%	98	11.9%	-0.41%
75 years plus	110	17.4%	178	21.2%	174	21.1%	-0.08%
Not stated	124	19.7%	97	11.6%	61	7.4%	-4.20%
Totals:	631	100%	839	100%	824	100%	

By ethnicity: There is still a high level of non-declaration of ethnicity which affects the validity of the data. This increased between years ending 2016 and 2017 but in 2018 reduced to 25.7%. This is still a quarter of instances without declared ethnicity which the Trust will look to address and improve on during the course of this current year.

Ethnicity in concerns and complaints year ending March 2018 compared to Years ending 2017 and 2016							
Ethnicity	15/16	%	16/17	%	17/18	%	Variance 2017/ 2018
White - British	345	54.7%	373	44.5%	431	52.3%	7.81%
White - Irish	5	0.8%	8	1.0%	13	1.6%	0.58%
White - other white	13	2.1%	24	2.9%	40	4.9%	1.95%
Mixed white / black Caribbean	1	0.2%	2	0.2%	3	0.4%	0.16%
Mixed white / Asian	2	0.3%		0.0%	3	0.4%	0.36%
Other mixed	2	0.3%	2	0.2%	2	0.2%	0.04%
Indian	16	2.5%	10	1.2%	21	2.5%	1.35%
Pakistani	38	6.0%	23	2.7%	42	5.1%	2.40%
Bangladeshi	4	0.6%	13	1.5%	10	1.2%	-0.29%
Other Asian	3	0.5%	6	0.7%	12	1.5%	0.76%
Black Caribbean	12	1.9%	26	3.1%	11	1.3%	-1.77%
Black African	7	1.1%	7	0.8%	13	1.6%	0.78%
Other Black	1	0.2%	8	1.0%	3	0.4%	-0.64%
Chinese	2	0.3%	1	0.1%	0	0.0%	-0.10%
Other ethnic category	2	0.3%	4	0.5%	8	1.0%	0.47%
Not stated	178	28.2%	332	39.6%	212	25.7%	-13.87%
Totals:	631	100%	839	100%	824	100%	

Ethnicity BME : White in concerns and complaints year ending March 2018 compared to Years ending 2017 and 2016							
	2015-2016		2016-2017		2017-2018		
Ethnicity	No	%	No	%	No	%	variance 2017/2018
White	363	57.5%	405	48.3%	484	58.7%	10.5%
BME	90	14.3%	102	12.2%	128	15.5%	3.4%
Not declared	178	28.2%	332	39.6%	212	25.7%	-13.8%
Totals	631	100%	839	100%	824	100%	

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

In years ending March 2016 and 2017, the top 6 booked languages by popularity were Polish, Urdu, Bengali, Romanian, Punjabi and British Sign Language.

This year the top 4 remain the same but the 5th and 6th languages requested are Albanian and then BSL and Arabic.

In 2017, circa 3769 requests were made across 38 different languages, in year ending 2018 this is 5383 requests over 36 different languages. This is a 42.8% increase. However, it is unclear if telephone interpreting and translation were included in totals last year. In which case the level of face to face interpreting is 4693 in 2018 and the increase would be 24.5%.

In 2018, the top 4 languages continue to form a high percentage of the total language requests at 80.47% (against 77.7% in year ending 2017). Polish is by far the largest at 28.9% with Urdu 18.1%, Romanian 18.36% and Bengali 15.12%.

Rare languages are the more difficult to provide for particularly at short notice or in

emergency. The rarest languages do not remain the same each year, in 2017 there was need for Slovak (12), Twi (4), Bosnian (3), Bravanese (1), Swahili (1) and Sinhalese (1) none of which was required in 2018. In 2018, new requests were Yoruba (4), Ukrainian (2), Thai (3), Vietnamese (2).

This year, notable increases were seen in certain groups outside of the key core languages, which were in the languages of Albanian, Arabic, Russian and Lithuanian, and the Asian Languages of Punjabi, Hindi, Pashto, Gujarati.

With Urdu 18.10%, Bengali 15.12% and 10 other Asian Languages at 5%, Asian Languages form 38.2% of all requests.

Level of translation and Interpretation Requests Year ending March 2018						
Language	Face to Face	Telephone	Translation	Total	%	
Polish	1415	133	8	1555	28.90%	4332 80.47% KEY CORE
Urdu	874	97	3	974	18.10%	
Romanian	840	142	6	988	18.36%	
Bengali	704	105	5	814	15.12%	
Albanian	103	21		123	2.29%	996 18.5% CORE OTHER LANGUAGES
BSL	95			95	1.76%	
Arabic	94	14		108	2.01%	
Punjabi	80	8		87	1.62%	
Portuguese	70	10		80	1.48%	
Russian	64	10		74	1.38%	
Lithuanian	52	11		63	1.18%	
Italian	45	4	2	51	0.95%	
Hindi	38	2	1	41	0.77%	
Tamil	34	1		35	0.65%	
Pahari	27	1		28	0.53%	
Spanish	21	3	2	26	0.49%	
Mirpuri	20			20	0.36%	
Somali	20	2		22	0.41%	
Pashto	19	2		21	0.39%	
Turkish	16	7		23	0.43%	
Gujarati	15	10		25	0.47%	
Hungarian	11	23		34	0.63%	
Cantonese	8	15		23	0.43%	
Bulgarian	4	12		16	0.30%	
Mandarin	7	3		10	0.18%	56 1.03% RARE LANGUAGES
Kurdish	2	8		10	0.18%	
Yoruba	4	0		4	0.08%	
Dari	3			3	0.06%	
French	2	3	1	7	0.12%	
Greek	2			2	0.04%	
Kashmiri	2			2	0.04%	

Ukrainian	2			2	0.04%	
Farsi	1	5		7	0.12%	
Czech		1		1	0.02%	
Thai		3		3	0.06%	
Tigrinya		2		2	0.04%	
Vietnamese		2		2	0.04%	
TOTALS	4693	661	29	5383		
GRAND TOTAL						
	87.20%	12.30%	0.50%			

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.
WE HAVE NO UPDATE TO THIS