

St George's Healthcare NHS Trust Meeting our public sector equality duty April 2013/March 2014



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Foreword by the director of corporate affairs

The St George's Healthcare NHS Trust Board is committed to providing services that designed around the needs of the communities we serve, and delivered by a strong, engaged and dedicated workforce that truly reflects south west London.

As we bid to become a Foundation Trust, we are also committed to ensuring that our membership and Council of Governors is as diverse as the area we serve. It is vital that the people who will hold us to account over the coming years speak for the people who use and deliver our services. We include a brief summary of our public membership in this report.

Over the last five years the trust has delivered increasingly strong performance in both clinical and financial terms, establishing St George's Healthcare as one of the country's principle healthcare institutions. The Board is determined that the trust does not become complacent and continues to progress over the coming years. The information outlined in this report is of great importance to that progression and to the trust achieving the goals outlined in its 10 year plan.

We are working hard to improve our understanding of the patient experience through our services. Without a detailed understanding of who uses our services and their experiences whilst under our care it would be impossible to plan for the future. Similarly, without a detailed understanding of who delivers our services and making sure we make every effort to involve them in the development of these plans, we would not be able to consider ourselves an excellent employer.

This report demonstrates that we are on track. As we continue to embed and live our values, the future for St George's Healthcare promises to be both bright and diverse.

Yours sincerely

Peter Jenkinson Director of corporate affairs

Note: This report is the second annual report we are publishing within a 10 month reporting period. Our previous annual report covered a 12 month reporting period of October 2012 to November 2013.

From this report forward we are changing the equality reporting period from April 2013 to March 2014 (and annually thereafter) to align our reporting cycle to that of the trust's corporate annual report and to ensure we use patients and staff information in a consistent manner.

Our next annual equality report will cover the period April 2014 to March 2015 and we will publish this alongside out corporate annual report.

1.0 Introduction

St George's Healthcare NHS Trust is the largest healthcare provider in south west London, with nearly 8,000 staff providing a full spectrum of acute and community services.

Our main site, St George's Hospital in Tooting - one of the country's principal teaching hospitals - is shared with St George's, University of London, which trains medical students and carries out advanced medical research. St George's Hospital also hosts the St George's, University of London and Kingston University Faculty of Health and Social Care Sciences, which is responsible for training a wide range of healthcare professionals from across the region.

As well as acute hospital services, we provide a wide variety of specialist care and a full range of community services to patients of all ages following integration with Community Services Wandsworth in 2010.

A number of our services are members of established clinical networks which bring together doctors, nurses and other clinicians from a range of healthcare providers working to improve the quality of services for patients. These include the South London Cardiac and Stoke Network and the South West London and Surrey Trauma Network, for which St George's Hospital is the designated heart attack centre, hyper-acute stroke unit and major trauma centre.

Our 10 year plan

The St George's Healthcare Board agreed a new 10 year strategy for the trust at the December 2012 public Board after a year of development with our staff and partners.

We have developed this strategy to ensure that we deliver:

- Better health outcomes for all
- Improved patient access and experience
- Empowered, engaged and well-supported staff
- Inclusive leadership at all levels

Our mission is to provide excellent clinical care, education and research to improve the health of the populations we serve.

Our vision is to become an excellent integrated care provider and a comprehensive specialist centre for south west London, Surrey and beyond with thriving programmes of education and research.

Our values

Excellent, Kind, Responsible, Respectful

Our values are designed to inspire our staff to achieve our vision and set out the standards of behaviour we expect from all our staff. Our values were developed with our staff, patients and partners.

1.01 Aspirant Foundation Trust membership and diversity

We are pleased to report that as of November 2013, 12,237 individuals have supported the trust by joining us as members as we prepare to become a Foundation Trust. We have worked over 4 years to recruit members from our diverse communities. We are required to collect baseline information on members age, gender and ethnic group to ensure that we have a public membership that is broadly reflective of the communities we serve. The breakdown of this public membership is shown below:

| Gender | |
|--------|--------|
| Male | 39.40% |
| Female | 59.53% |

| Age bands | |
|-----------|--------|
| 14-16 | 0.54% |
| 17-21 | 8.78% |
| 22-29 | 14.95% |
| 30-39 | 16.44% |
| 40-49 | 13.48% |
| 50-59 | 12.32% |
| 60-74 | 19.91% |
| 75+ | 10.43% |

| Ethnic group | |
|-----------------------|--------|
| White / White British | 56.77% |
| Asian / Asian British | 17.24% |
| Black / Black British | 14.21% |
| Chinese / Other | 3.01% |
| Mixed Race | 4.69% |
| Not Stated | 4.07% |

The legislative context

1.1 Equality Act 2010

A single Equality Act for the UK was passed by Parliament and came into force in October 2010. The Act consolidated, strengthened and clarified the existing antidiscrimination legislation and brought in new measures that had direct implications for St Georges Healthcare NHS Trust.

The new Public Sector Equality Duty (PSED) came into force on the 5th April 2011 and the ban on age discrimination, the provision of goods, services and public functions came into effect during April 2012.

1.2 The General Duty

The PSED is supported by a General Duty. The trust must abide by the three principles of the General Duty:

- Eliminate unlawful discrimination, harassment, victimisation and any other conduct prohibited by the Act
- Advance equality of opportunity between people who share a protected characteristic and people who do not share it
- **Foster good relations** between people who share a protected characteristic and people who do not share it

The trust must do this by:

- Removing or minimising disadvantages suffered by people due to their protected characteristics
- Meeting the needs of people with protected characteristics
- Tackling prejudice and promoting understanding between people who share a protected characteristic and others

1.3 The Specific Duty

The PSED is also underpinned by a specific duty which requires us to publish equality information to demonstrate our compliance with the general duty. The PSED is a duty on Public Bodies and others carrying out public functions. It ensures that public bodies consider the needs of all individuals in their day to day work-in shaping policy, in delivering services and in relation to their own employees.

The new Equality Duty covers the following protected characteristics:

- Age
- Disability
- Gender Reassignment
- Marriage and Civil Partnership
- Pregnancy and maternity
- Race-this includes ethnic or national origins, colour or nationality
- Religion or belief (this includes lack of belief)
- Sex
- Sexual orientation

The trust has also adopted the Department of Health's Equality Delivery System (EDSV2). We have used the EDS to agree our corporate equality objectives and report on these annually in a separate document ¹

¹ <u>https://www.stgeorges.nhs.uk/about/living-our-values/equality-and-human-rights/</u>

1.4 Meeting our Public Sector Duty Equality

To demonstrate we have met the PSED the monitoring of staff and patients is carried out in a number of ways across the relevant protected characteristics. This information forms the basis of this report. A key aim of our Equality Delivery System (²EDS) is to improve the collection of data across the trust so that we are better able to demonstrate the impact of the equality work and better identify areas of need.

1.6 Data collection period

All of the data used for this report was recorded between 1st April 2013 and 31st March 2014.

2.0 St George's Healthcare as an employer

As of the end of March 2014 the trust employed 8047 staff with a full time equivalent (FTE) of 7447 members of staff.

Figures 1 and 2 show the full time equivalent (FTE) and headcount by division and staff group.

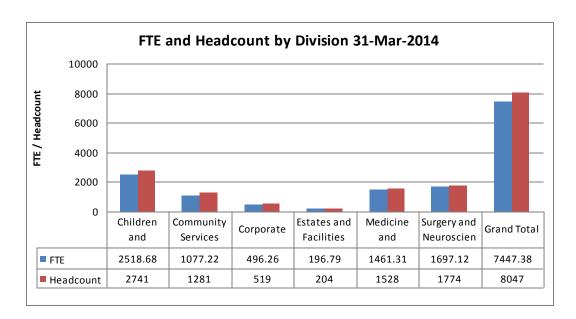
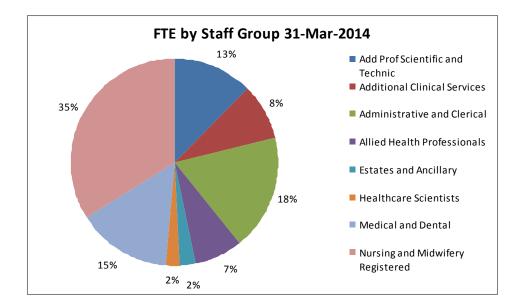


Figure 1: FTE and headcount by division 2013-14

 $^{^{2}}$ We will report on our annual progress with our EDS objectives by the 31^{st} March 2014. More information on the national EDS programme can be found at

http://www.england.nhs.uk/ourwork/gov/edc/eds/. The EDS was refreshed at a national level by NHS England in November 2013.

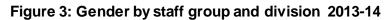
Figure 2: FTE by staff group 2013-14

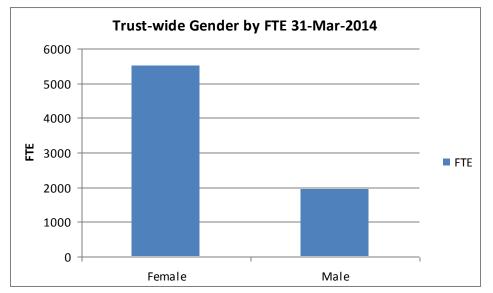


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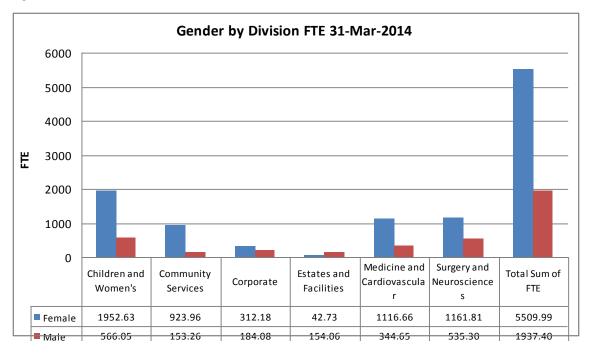
- The largest staff group is nursing and midwifery, comprising of 34% of staff.
- Medical staff account for 15% of the workforce.

2.1 Gender









2.2 Age

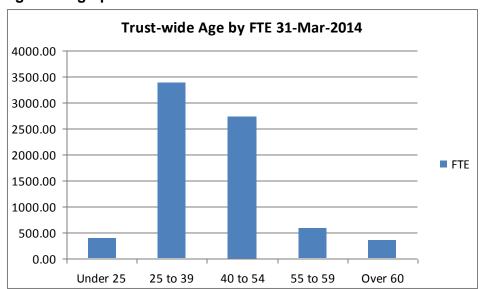


Figure 4: Age profile of the Trust 2014-15

Fig 5: Age by Division 2014-15

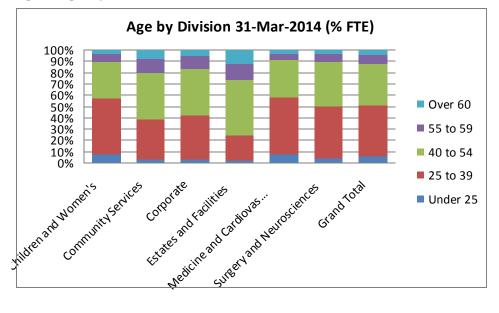
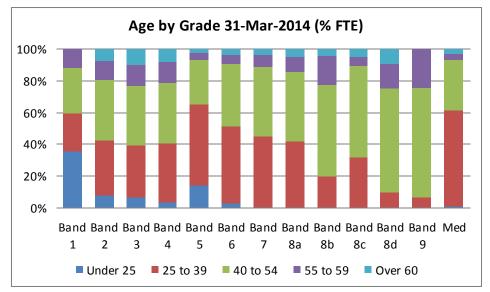


Figure 6: Age by Grade (% FTE) 2013-14



2.3 Ethnicity

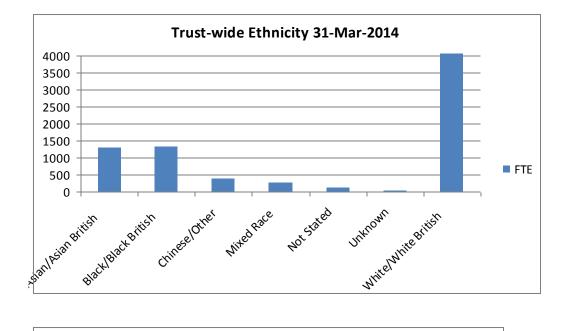
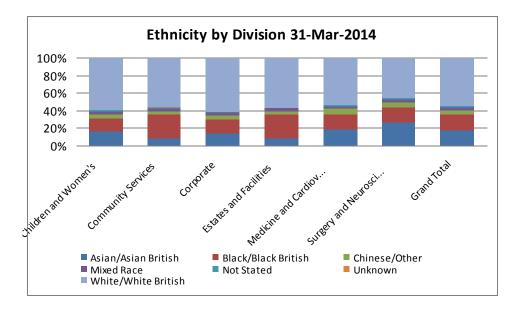


Figure 7 and 7.1: Trust-wide Ethnicity and by Division 2013-14



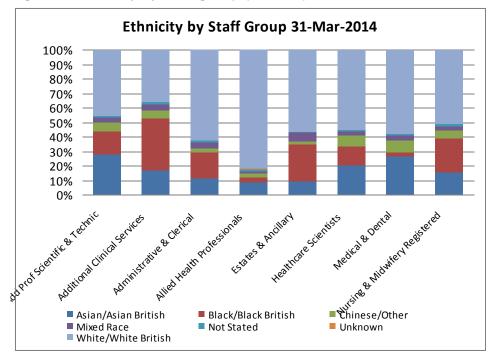


Figure 8: Ethnicity by staff group (2013-14)

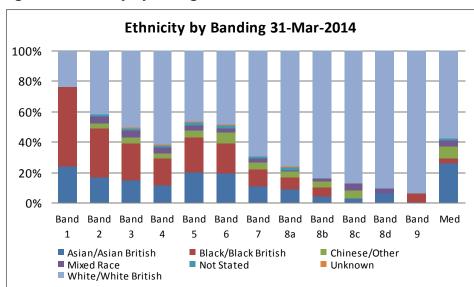
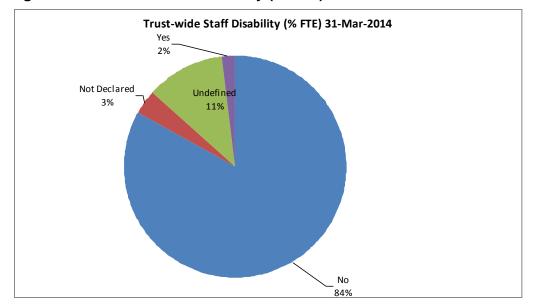


Figure 9: Ethnicity by staff grade 2013-14

2.4 Disability





Comment:

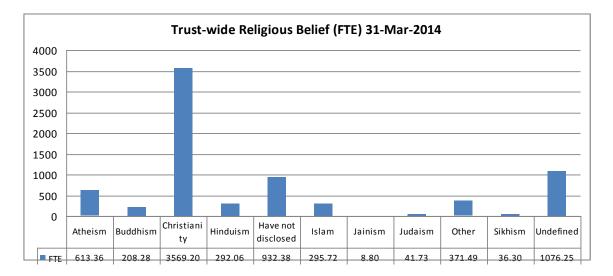
- 2% of staff have disclosed themselves as having a disability.
- Disability is defined under Section 6 of the Equality Act as a physical or mental impairment that has a substantial and long-term adverse affect on a person's ability to carry out normal day-to-day activities³. In the 2011 Census, 8.5% of the population in England reported that their daily activities were limited a 'lot'. ⁴ National research and other information has identified that under-reporting of disability to employers is a widespread challenge throughout public sector organisations and in the wider community.

³ <u>https://www.gov.uk/rights-disabled-person/overview</u>

⁴ http://www.ons.gov.uk/ons/dcp171776_296743.pdf

2.5 Religious Belief



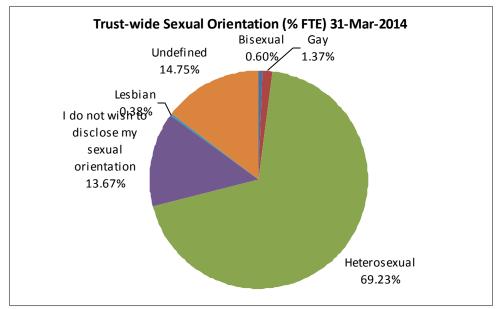


Comment:

- The trust's largest declared faith groups include Christians, Hindus, Buddhists and Muslims.
- We note that a significant number of staff have declared themselves as Atheists
- A very large group of staff are undefined by these belief categories and / or do not wish to disclose any religious or faith / no faith belief .

2.6 Sexual orientation

Figure 12: Trust-wide Sexual Orientation (% FTE) 2013-14



Comment:

- Monitoring staff sexual orientation remains underdeveloped due to underreporting – a third of staff either do not declare their sexuality or refuse to disclose.
- The 2011 and previous census reports have not include this question, so accurate estimates of the distribution of sexual orientation in the UK are not available for a comparative analysis.

2.7 Pregnancy and Maternity (data invalid for this period)

The trust has a number of policies in place to support pregnant staff at work, in taking maternity leave and returning to work.

Comment:

 214.41 FTE staff were on maternity and adoption leave as on 31st October 2012. This was a reduction of 20 FTE staff over last years figures.

2.8 Marriage and civil partnership

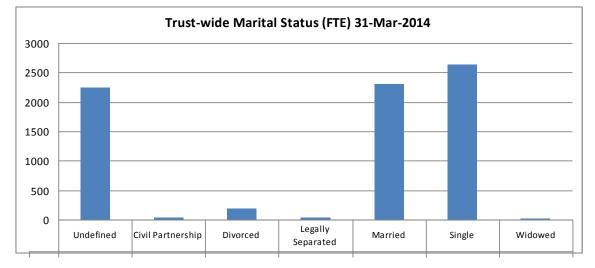


Figure 13: Trust-wide Marriage and Civil Partnership (2013-14)

Comment:

• The trust collects information on a voluntary basis to the status of marriage and civil partnership when staff are applying for new jobs.

2.9 Appraisal

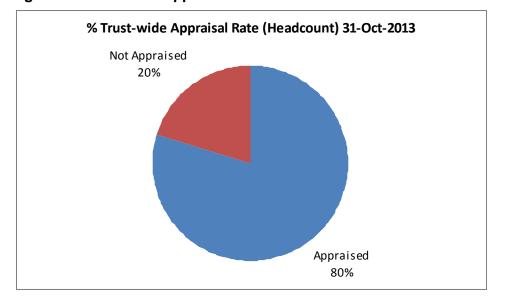
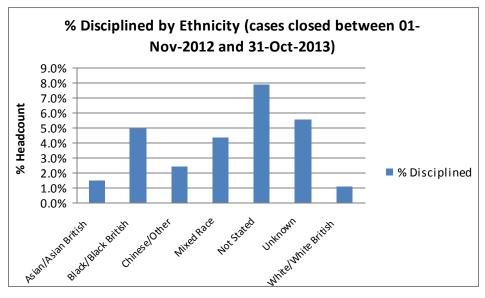


Figure 14: Trust-wide Appraisal- Trust wide 2012-13

Comment:

- 80% of staff had received an appraisal by the end of October 2013.
- This was a 20% increase over the previous reporting period.
- There are no differences in appraisal rates between men and women.

2.10 Disciplinary and Dismissals



. Figure 15: Percentage of staff disciplined by ethnic group 2012-13

Comment:

 168 staff received a disciplinary last year. This was a reduction of 38 staff over the previous reporting period.

- 27 staff were dismissed. This was the same figure as previously reported.
- More staff from black and black British groups (4.95%) and are disciplined then white and white British groups (1.06%). There has been a reduction in these ratios since 2006, to when we first began publishing equality related information.
- A programme of work is being undertaken by the trust in relation to improving the staff experience and to educate managers in effective people management.

2.11 Grievance

8 staff raised a formal grievance in this reporting period. This was a reduction of 2 grievances over the last reporting period. Due to the small number of staff raising a grievance it is not possible to analyse grievances by protected group.

3.0 St George's Healthcare as a service provider

3.1 Maternity Services

| Total number of women | 5806 | |
|--------------------------------------|------|---------|
| Key ethnic groups [°] | | |
| | | // |
| White British, White Irish, White | 0070 | 49.59% |
| Other | 2879 | 0.440/ |
| Mixed | 140 | 2.41% |
| Asian / Asian British- Indian | 916 | 15.78% |
| Pakistani, Bangladeshi, Other Asian. | 010 | 10.7070 |
| Black / Black British, Caribbean, | 638 | 10.98% |
| African, Other Black | | |
| Other / Chinese | 80 | 1.38% |
| | | |
| Any other ethnic group | 1153 | 19.86% |
| - | | |
| Age | | |
| Under 25 | 716 | 12.3% |
| 05.04 | 0500 | 00.00/ |
| 25-34 | 3520 | 60.6% |
| 35-44 | 1556 | 26.9% |
| | 1000 | 20.070 |
| 44-54 | 12 | 0.3% |
| | | |
| Religion / No religion | | |
| Atheist | 0 | 0% |
| | | 0.40/ |
| Buddhist | 23 | 0.4% |
| | | |

⁵ (compressed using 2011 census categories)

| Christian | 1497 | 25.8% |
|--------------------------|------|-------|
| Hindu | 116 | 2.0% |
| Islam | 578 | 10%, |
| Jewish | 5 | 0.1% |
| Sikh | 11 | 0.2% |
| Other belief or religion | 3576 | 61.6 |
| Not disclosed | 0 | 0.% |

Disability status of women using maternity status (2013-2014)

505 (8.7%) of women attending maternity services said they had a disability, and 91.3% said they did not have a disability.

3.2 Acute Hospital Division Services (2013-2014)

| | A&E | Inpatient | Outpatient |
|-------------------|---------|-----------|------------|
| Total number | 130,710 | 134,532 | 652,296 |
| Gender | | | |
| Female | 49.61% | 52.53% | 58.44 |
| Male | 50.39% | 44.47% | 41.44 |
| Age | | | |
| Under 25 | 31.39% | 18.55% | 14.42% |
| 25-34 | 18.45% | 11.98% | 16.53% |
| 35-44 | 12.47% | 11. 40% | 14.10% |
| 45-54 | 10.72% | 12.18% | 13.63% |
| 55-64 | 7.60% | 12.89% | 13.37% |
| 65-74 | 7.01% | 14.44% | 14.08% |
| 75-84 | 7.0% | 13.38% | 10.66% |
| 85+ | 4.87% | 5.17% | 3.21% |
| Key ethnic groups | | | |
| White British | 22.41%, | 37.19% | 32.42% |
| White Other | 11.76% | 14.13% | 12.43% |
| Mixed | 1.94% | 2.36%, | 1.43% |
| Asian | 8.87% | 13.67% | 10.82% |
| Black | 8.53 | 13.79% | 10.05% |
| Other | 5.49% | 7.30% | 4.46% |

| No data | 40.99% | 11.56% | 28.09% |
|---------------|--------|--------|--------|
| Religion/ No | | | |
| religion | | | |
| Buddhist | 0.15% | 0.24% | 0.25% |
| Christian | 19.75% | 30.34% | 1.46% |
| Hindu | 1.60% | 2.89% | 2.57% |
| Islam | 3.86% | 6.32% | 5.52% |
| Jewish | 0.13% | 0.19% | 0.00% |
| Sikh | 0.10% | 0.23% | 0.20% |
| Other | 39.29% | 54.84% | 41.26% |
| Not disclosed | 35.14% | 4.94% | 48.75% |

3.3 Community Division (2013-2014)

| | QMH OP | QMH IP | MIU | RiO | SystemOne |
|----------------------|--------|--------|--------|---------|-----------|
| Total | 98,021 | 694 | 16,514 | 596,842 | 64,571 |
| Gender | | | | | |
| Female | 54.7% | 59.4% | 51.8% | 62% | 0.0% |
| Male | 45.3% | 40.6% | 48.2% | 38% | 100.00% |
| Key ethnic groups | | | | | |
| Asian/ Asian British | 5.7% | 5.3% | 3.5% | 9.9% | 4.1% |
| Black/ Black British | 4.2% | 4.6% | 3.6% | 15.8% | 12.2% |
| Mixed | 2.1% | 1.7% | 3.0% | 4.1% | 5.1% |
| Not known | 3.6% | 0.4% | 1.0% | 8.3% | 1.6% |
| Not stated | 6.5% | 0.7% | 2.3% | 1.8% | 1.8% |
| Other ethnic | 4.0% | 0.7% | 2.5% | 2.8% | 4.6% |
| groups | | | | | |
| White | 73.8% | 86.6% | 84.1% | 58.6% | 70.6% |
| Age | | | | | |
| under 25 | 8.5% | 0.0% | 35.7% | 30.9% | 11.6% |
| 25-34 | 8.6% | 1.3% | 15.3% | 7.8% | 34.2% |
| 35-44 | 10.7% | 2.3% | 12.1% | 6.0% | 28.4% |
| 45-54 | 12.4% | 4.5% | 12.8% | 3.7% | 17.8% |
| 55-64 | 13.3% | 6.1% | 9.0% | 5.1% | 4.7% |
| 65-74 | 18.7% | 13.0% | 7.8% | 10.0% | 3.1% |

| 75-84 | 17.4% | 31.3% | 4.9% | 19.8% | 0.2% |
|-------|-------|-------|------|-------|------|
| 85+ | 9.3% | 41.6% | 0.0% | 16.1% | 0.0% |

St George's Healthcare provides community services to the population of Wandsworth. These are a wide range of services, including district and community nursing, school health visitors, rehabilitation services, and services in partnership with social services. We report above on the main IT systems used within Community Services.

| System code | What the system records (service level) |
|-------------|--|
| QMH | Queen Mary's Hospital, Roehampton. In-patient (IP) and Outpatient Services(OP) |
| MIU | Minor Injuries Unit at Queen Mary's Hospital |
| RiO | Children's services and adult therapies |
| SystemOne | HMP Wandsworth |

All of these services above use different IT systems for recording individual patient level information. Additionally, there are specialist services providing out-patient services which are not included in this report. As we improve and update our information systems, we hope to be include a fuller range of Community Services activity within this report in the future.

It should be noted that for community services provided in people's homes and other sites, patients are recorded separately as an individual appiontment for each visit. Our Community Services Wandsworth division also manages and provides a range of services at Queen Mary's Hospital, Roehampton and St Johns Therapy Centre, Battersea and Community clinics in the borough . Additionally, we provide health services to offenders at HM Prison, Wandsworth, the largest prison in the country.

4.0 Conclusion

This report demonstrates that St George's Healthcare is monitoring, reporting and publishing workforce equality data in line with our statutory employment duties.

The trust is increasing its recoding and reporting of equality information in relation to patient activity. The trust recognises that there is always room for improving both the

collection of information related to protected groups, and in understanding what this information means and how it can be used to review and improve services, processes and systems.

The trust's equality and human rights committee will continue to review and monitor any issues raised in this information and take action where necessary. This information will be shared throughout the trust and with the trust's partners and stakeholders.

The trust is firmly committed to developing a workforce which reflects the communities we serve, and to support an environment in which staff our supported to deliver excellent patient care. In the years ahead the trust will continue to build on work already done to deliver personal, fair and diverse health services that meet the needs of our patients and the communities that we serve.

Contact us

If you would like to discuss any aspect of this report or would like to find out more about the trust's equality and human rights committee, please contact Wilfred Carneiro on 020 8725 4175 or at <u>wilfred.carneiro@stgeorges.nhs.uk</u>