



BOARD OF DIRECTORS MEETING IN PUBLIC 19 JULY 2018

Public Sector Equality Duty Report

PURPOSE

- 1 The purpose of this paper is to provide assurance of compliance with the Public Sector Equality Duty to have due regards to the need to:

Eliminate unlawful discrimination, harassment, victimisation and any other conduct prohibited by the Equality Act.

Advance equality of opportunity between people who share a protected characteristic and people who do not share it, and

Foster good relations between people who share protected characteristic and people who do not share it.

- 2 The Equality Duty is also supported by specific duties, set out in regulations. The specific duties require SCAS to publish relevant, proportionate information demonstrating our compliance with the Equality Duty annually; and to set and publish specific equality objectives, at least every four years.

In addition to overseeing the ongoing EDS2 compliance agenda SCAS has focused on the renewal of the Workforce Race Equality Standard (WRES), preparing for the NHS Workforce Disability Standard (WDES) and the implementation of the Accessible Information Standard.

EXECUTIVE SUMMARY / TOP THREE ISSUES FOR BOARD ATTENTION

Equality Delivery System2 – (EDS2)

- 2 EDS2 is a set of 18 equality outcomes grouped into four goals. These outcomes focus on the issues providing most concern to patients, carers, communities, NHS staff and Boards. It is against these outcomes that performance is analysed, graded and actions determined.

The four EDS2 goals are:

1. Better health outcomes for all
2. Improved patient access and experience
3. Empowered, engaged and included staff
4. Inclusive leadership at all levels

SCAS is currently at the end of year 2 of a 4 year EDS action plan, with the rag rating now at

99% achieving. The achieved rating is a combination of community stakeholder assessments and the annual signing off of the objectives set by our community partners at the Equality and Diversity Steering Group.

3 **Accessible Information Standard.**

On the 24th June 2015 NHS England approved the new Accessible Information Standard, the standard is mandatory for all NHS organisations (Section 250 Health and Social Care Act 2012) from July 2016.

The aim of the Accessible Information Standard is to make sure that people who have a disability or sensory loss get information that they can access and understand, and any communication support that they need when using NHS or adult social care services. The Standard makes clear that the type of accessible information or alternative format, and the type of communication support people need, varies considerably. For Deaf people, the Standard states that required support may include British Sign Language (BSL) interpretation support from a speech-to-text-reporter or note-taker, support to use a hearing aid and / or to lip-read.

This standard was introduced sometime after the introduction of the Equality Delivery System and although EDS2 addresses "Improved patient access and experience" it does not include the specifics of the AIS.

All ambulance sector AIS leads met in March 2017 and concluded that the sector could demonstrate that it was already meeting some of the standards but had concerns about others. The collective wrote to NHSE highlighting the areas of concern.

In April 2018 NHSE responded acknowledging that some elements of the standard "would not apply" to ambulance Trusts, but directed further discussions with our respective Clinical Commissioning Groups SCAS is scheduled to meet with the commissioners at the end July 2018.

4 **Patient/workforce Data Collection.**

The collection of protected characteristic data is vital for demonstrating that the Trust is meeting the needs of its diverse communities, it also provides an opportunity to identify patterns of health issues affecting different protected characteristics and identifying possible complaint trends.

The recorded equality data for the Trust at the end of December 2017 shows a continuous decline in the recording of data ("Not recorded"). Whilst age, pregnancy and gender are within acceptable parameters, ethnicity (54%) sexual orientation (56%) and religion/belief (82%) not recorded does not provide the Trust with meaningful data.

This report does not include the Trusts workforce data; this is reported on and published twice yearly.

CONCLUSIONS

- 11 This report provides an overview of progress against key parts of the Public Sector Equality Duty whilst acknowledging areas for improvement and challenges for the organisation. Whilst there have been a number of areas of good practice to celebrate, there remains an improvement needed around some of the more basic structures of the organisation in relation to equality monitoring and initial recruitment.

- 12 Appendix 1 provides a breakdown of the objectives set in 2016 for the EDS2 which it is felt show a realistic position for the Trust. Locally and nationally the Trust has a good reputation for equalities and this will be further built on throughout the 2019-20.

SOUTH CENTRAL AMBULANCE SERVICE EQUALITY DATA

SCAS in keeping with its Equality duty seeks to harvest equality data from a range of sources, specifically; we record data on ethnicity, gender, age, religion/belief, pregnancy, sexual orientation and disability from our electronic patient record. For the year ending 31st December 2017 SCAS attended 375,882 calls to patients. The patient equality data is as follows:-

AGE

Category	Count	% of total
0-10	25339	6.74%
11-20	22186	5.90%
21-30	35260	9.38%
31-40	29720	7.90%
41-50	31300	8.32%
51-60	34777	9.25%
61-70	38506	10.24%
71-80	55204	14.68%
81-90	71930	19.10%
91-100	25658	6.82%
101-120	503	0.13%
Not Recorded	5499	1.46%
Total	375882	100.00%

ETHNICITY

Category	Count	% of total
Asian Other	587	0.34%
Bangladeshi	127	0.07%
Black African	189	0.11%
Black Caribbean	184	0.10%
Black Other	460	0.27%
Chinese	152	0.08%
Indian	864	0.051%
Mixed Other	231	0.13%
Mixed White/Asian	148	0.087%
Mixed White/Black African	411	0.24%
Mixed White/Black Caribbean	212	0.12%
Not Stated	66564	39.33%
Other Ethnic Group	373	0.22%
Pakistani	823	0.48%
White (British)	94458	55.81%
White (Irish)	417	0.24%
Other white	3224	1.90%
Not Recorded	206458	54%
Total	375882	100%

Sexual Orientation

Category	Count	% of total
Bisexual	156	0.041%
Gay	287	0.076%
Heterosexual	17521	4.66%
Lesbian	36	0.009%
Refused/Declined	52583	13.98%
Not stated	92547	24.62%
Not Recorded	212752	56.60%
Total	375882	100%

Disability

Category	Count	% of total
No	46039	12.24%
Yes	9324	2.48%
Not stated	320519	85%
Total	375882	100%

RELIGION/BELIEF

Category	Count	% of total
Atheism	1180	0.31%
Buddhism	117	0.031%
Christianity	7744	2.06%
Hinduism	188	0.05%
Islam	678	0.18%
Judaism	34	0.009%
Other	3110	0.82%
Refused/Declined	54042	14.37%
Not Recorded	308789	82.15%
Total	375882	100.00%

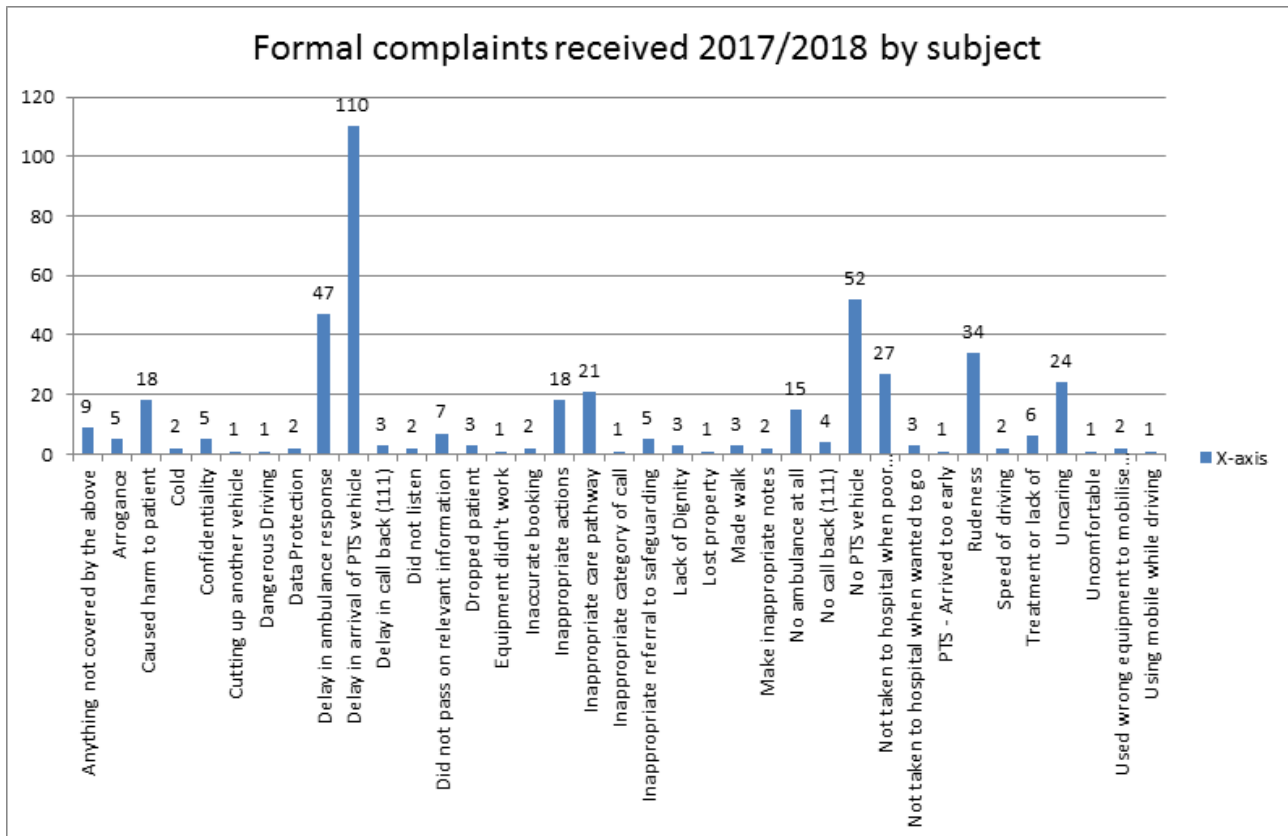
Pregnancy

Category	Count	% of total
No	71974	19.14%
Yes	1811	0.48%
Not recorded	302097	80.37%
Total	375882	100%

GENDER

Category	Count	% of total
Female	196890	52.38%
Male	173716	46.21%
Not Recorded	5276	1.40%
Total	375882	100%

The total number of formal complaints for the year ending 31st March 2018 was 443, none of these were protected characteristics related.



RECOMMENDATIONS TO THE BOARD

13 .The Board is asked to note and approve this report for publication.