

Equality and diversity monitoring report

2022-23

Introduction

At West Suffolk Foundation Trust (WSFT) fairness, inclusivity and respect are at the very heart of our FIRST values, and we remain committed to these as we strive to deliver the best quality and safest care for our community. A part of this is ensuring compliance with our Public Sector Equality Duty.

The Public Sector Equality Duty (PSED) aims to:

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

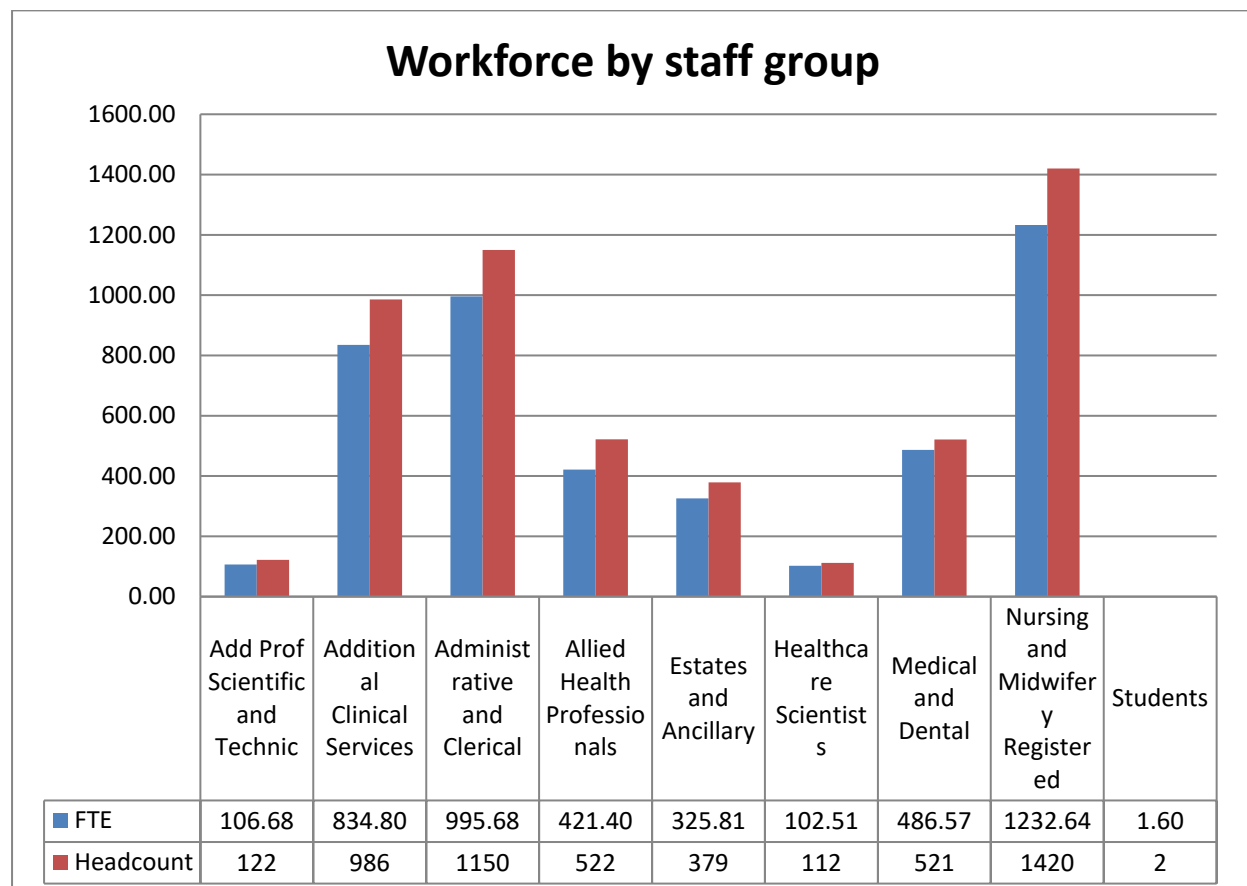
This report provides a snapshot of the Trust's equality and diversity profile as of 31 March 2023 alongside employee relations data for the year 1 April 2022 – 31 March 2023. Patient data provides insight into 1 April 2023 – 31 March 2024, when the Trust begun collecting protected characteristic data within satisfaction surveys.

Where it has been possible, we have analysed how we stand against the nine protected characteristics outlined within the Equality Act 2010:

- Age
- Disability
- Gender reassignment
- Marriage and civil partnership
- Pregnancy and maternity
- Race
- Religion and belief
- Sex
- Sexual orientation

Workforce profile by staff group

The Trust's total headcount as of 31 March 2023 was 5214. Registered nurses and midwives continue to be the largest single staff group, accounting for almost 30% of total staff in the Trust, followed closely by administrative and clerical and additional clinical services.



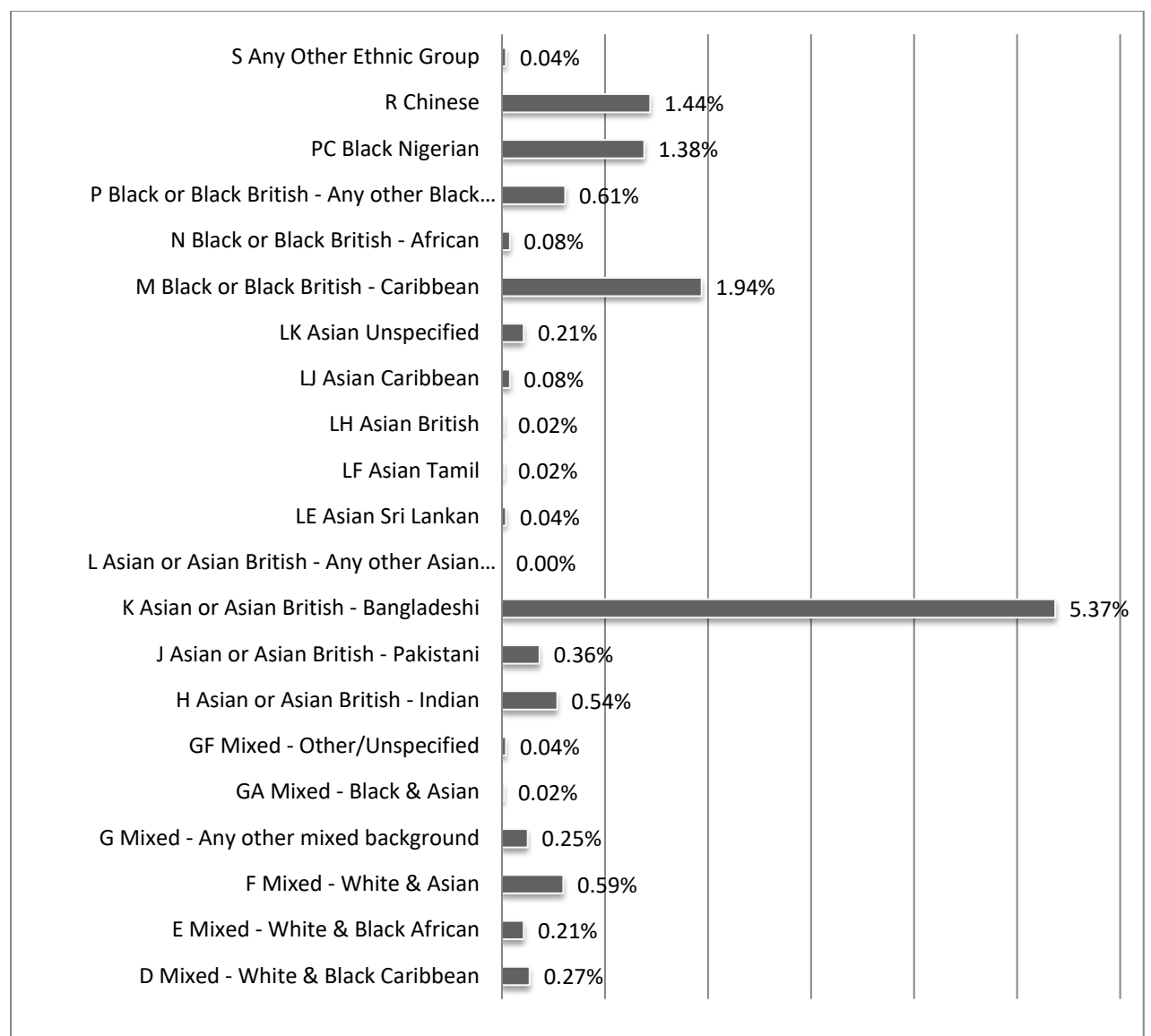
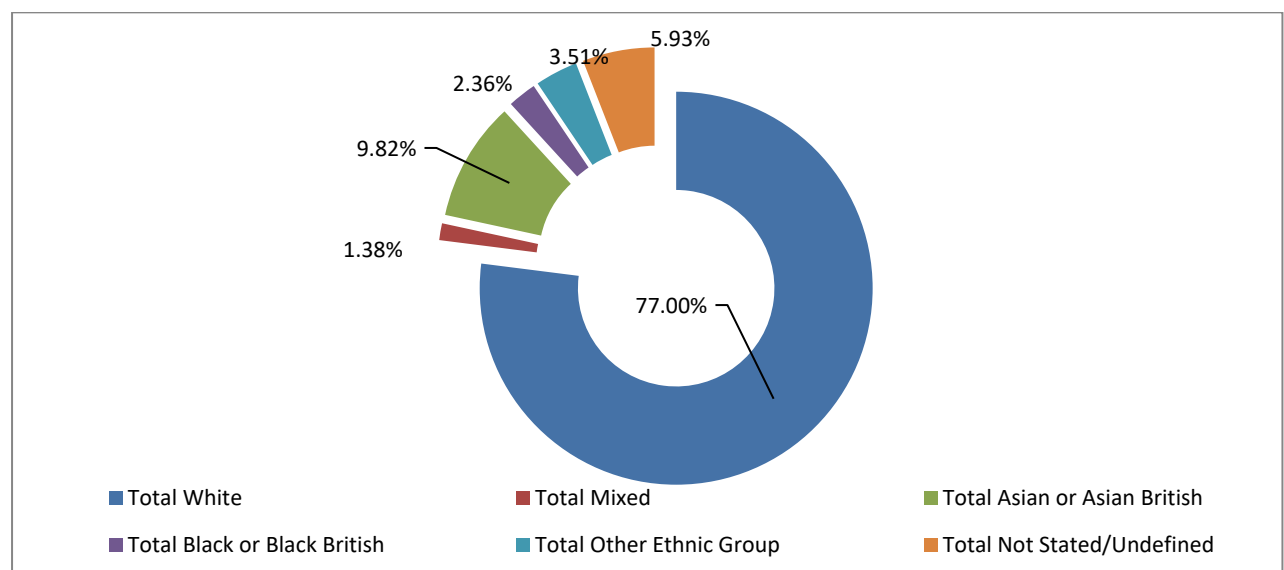
Workforce by ethnicity

Black, Asian and Minority Ethnic groups account for 17.07% of total Trust workforce and 10.5% of total 2022 Staff Survey respondents.

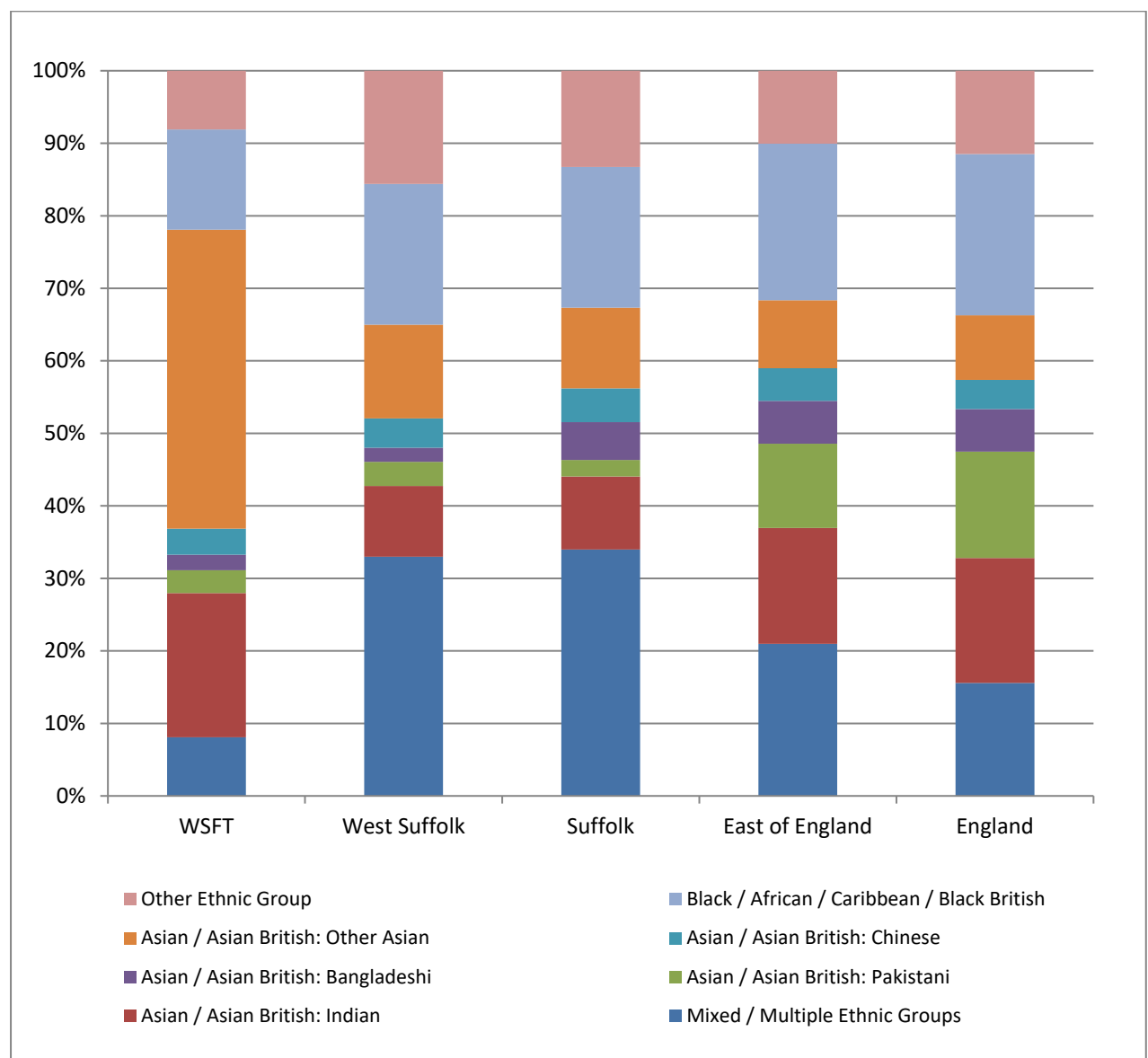
Whilst White groups make up 77.00% of the total workforce, this is not necessarily reflected across all staff groups:

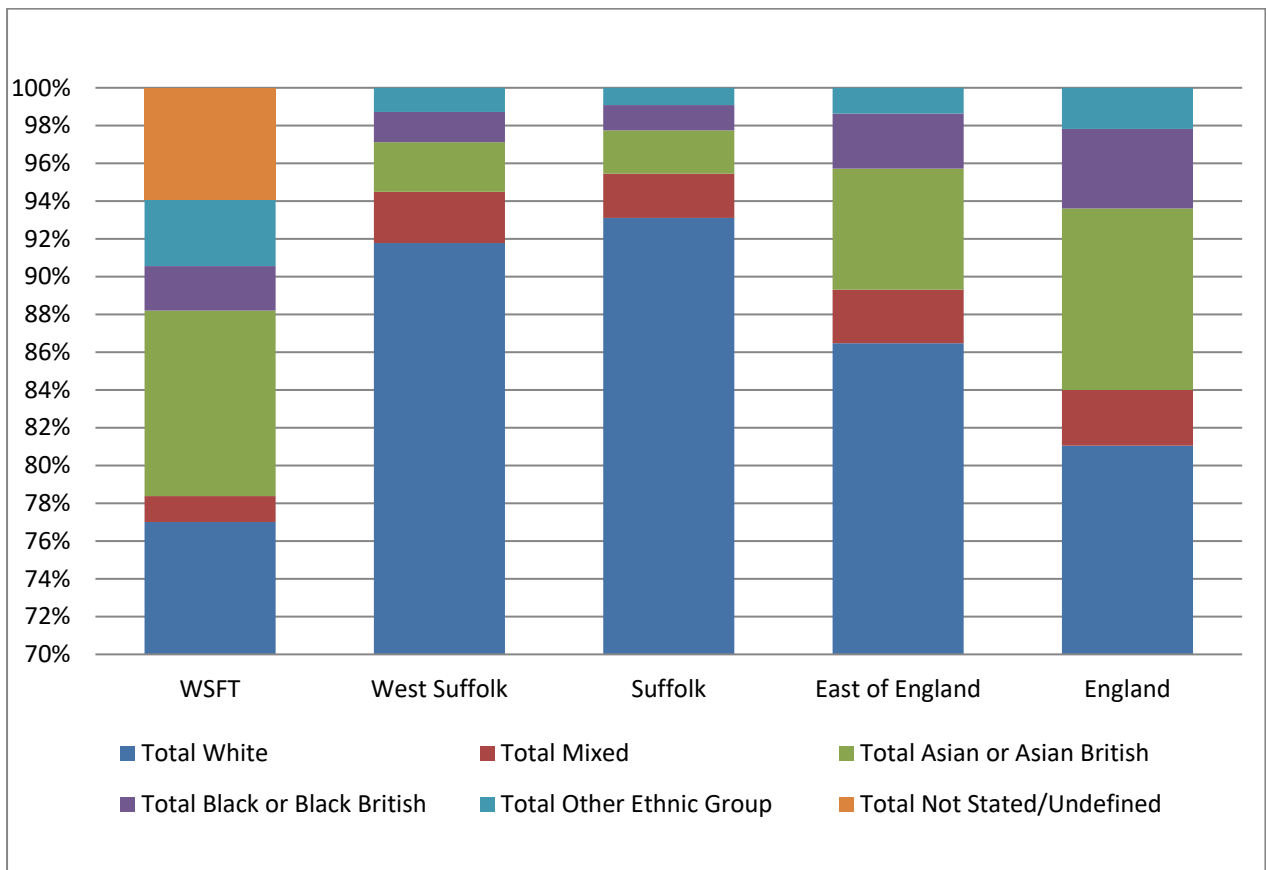
Staff Group	BME	White	Not Stated
Add Prof Scientific and Technic	19.67%	77.87%	2.46%
Additional Clinical Services	12.17%	80.73%	7.10%
Administrative and Clerical	4.43%	91.39%	4.17%
Allied Health Professionals	10.15%	85.82%	4.02%
Estates and Ancillary	9.23%	86.54%	4.22%
Healthcare Scientists	18.75%	65.18%	16.07%
Medical and Dental	44.53%	48.18%	7.29%
Nursing and Midwifery Registered	24.93%	68.38%	6.69%
Students	0.00%	100.00%	0.00%

Overall, 18.10% of those staff choosing to disclose their ethnicity stated they were from a minority ethnic group. Currently 94.26% of the workforce has chosen to disclose their ethnicity.

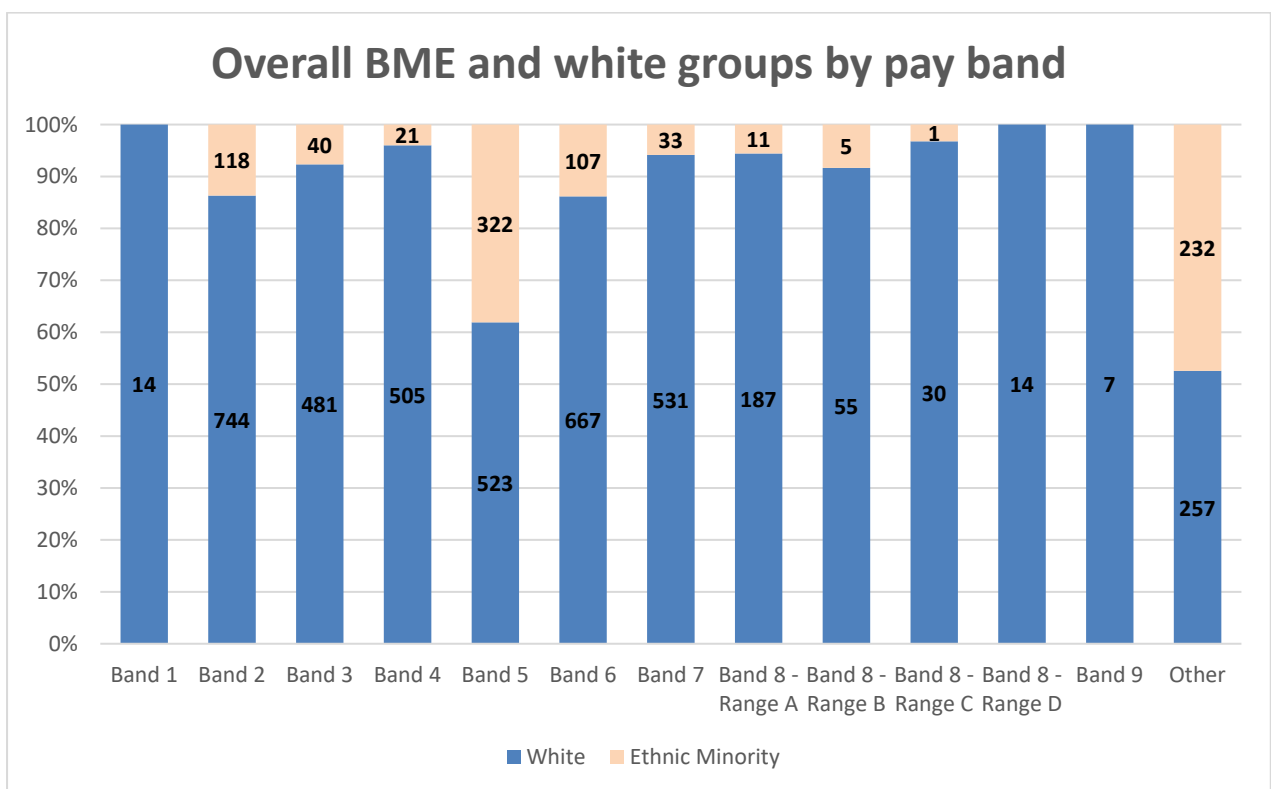


The charts below compare the overall ethnicity profiles for the Trust against census data for West Suffolk, Suffolk, East of England and England as a whole.





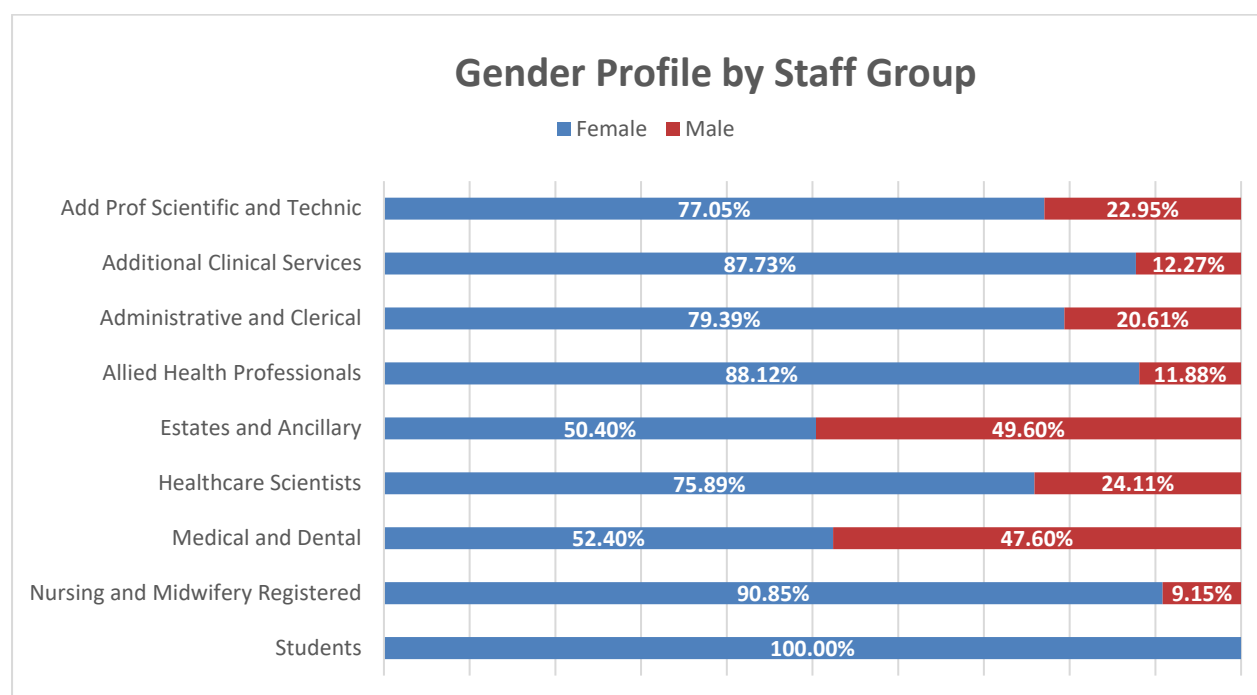
Paybands 2 - 6 show a larger distribution of ethnic minority groups, with the largest being in Band 5. There are fewer people from an ethnic minority in pay bands 8b and above, with a wider distribution in other bands.



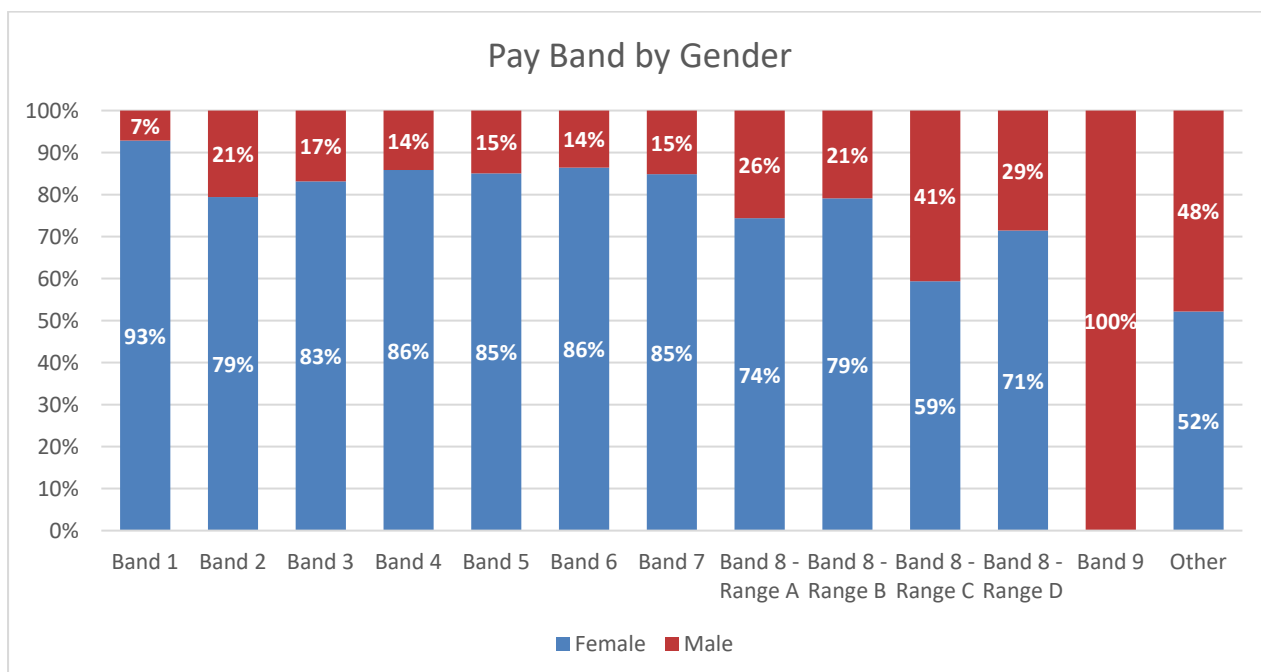
Workforce profile by gender

80.03% of the Trust's workforce is female, with the majority of these staff working in Nursing, Admin and Healthcare Support posts. Male staff members represent 19.97% of the workforce with a more even distribution in the medical and dental roles (Female 52.40%, Male 47.60%) and Estates and Ancillary roles (Female 50.40%, Male 49.60%).

Female staff members work almost equally part-time (38.49%) and full-time (41.54%), with the remaining 17.32% of male staff members working full-time and 2.65% part-time. Overall, 58.86% of Trust staff work full-time, with 41.14% working part-time.



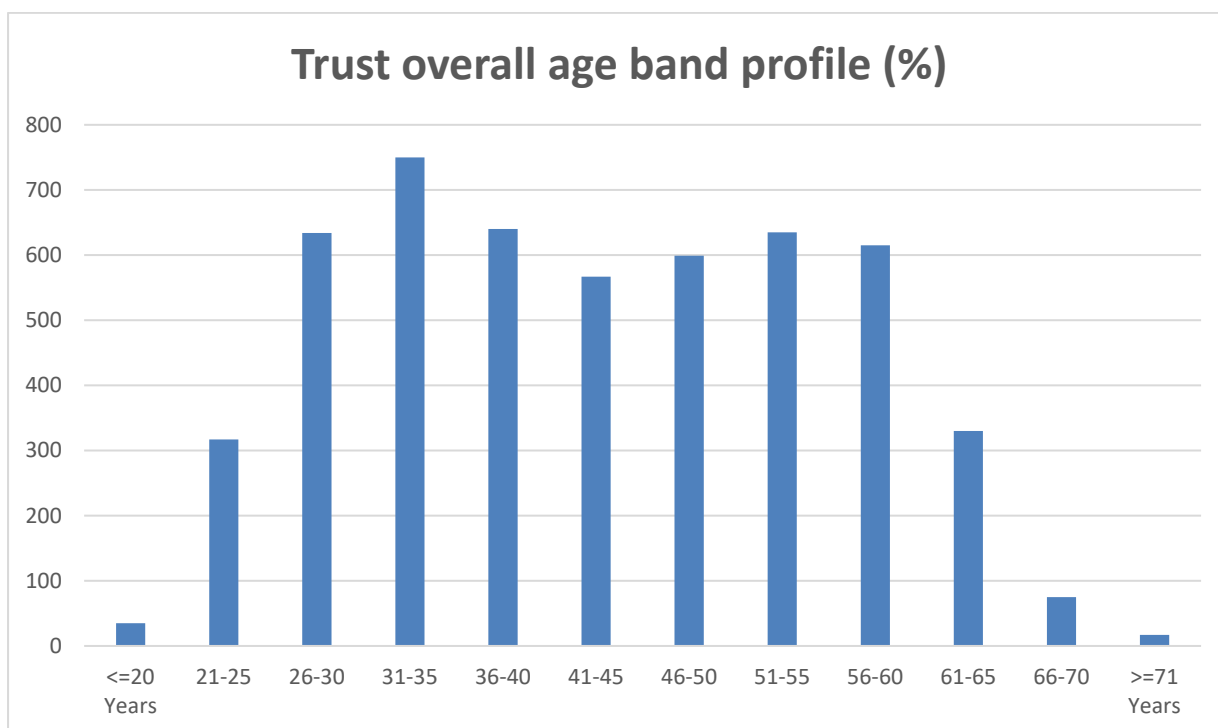
Pay band data by gender displays an approximate reflection of the Trust's 80/20 gender split. At band 8 and above the distribution of male/female staff at higher bands starts to change and we start to see an increase in the number of male senior staff:



Workforce profile by age

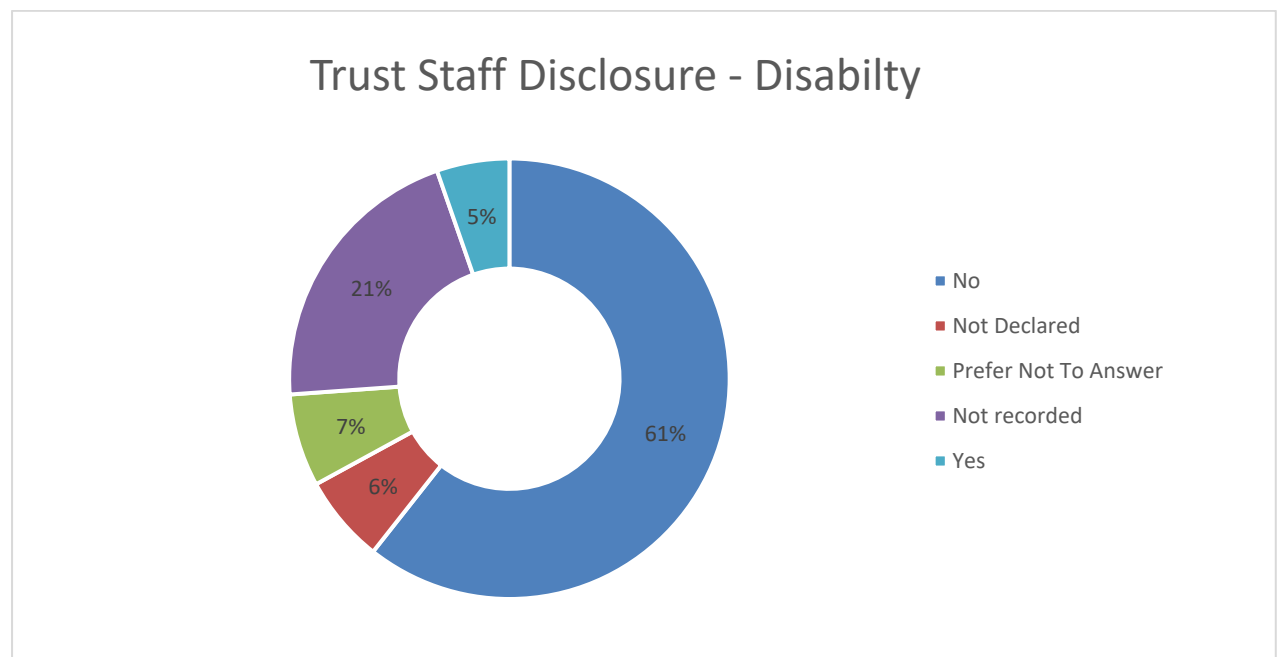
The average age for staff within the Trust is 43.6 years old. For female staff it is 43.9 and for male staff, 42.8.

- Approximately 47% of the workforce falls within the 36 – 55 age group.
- There are 422 employees over 60, 17 of these are over the age of 71.



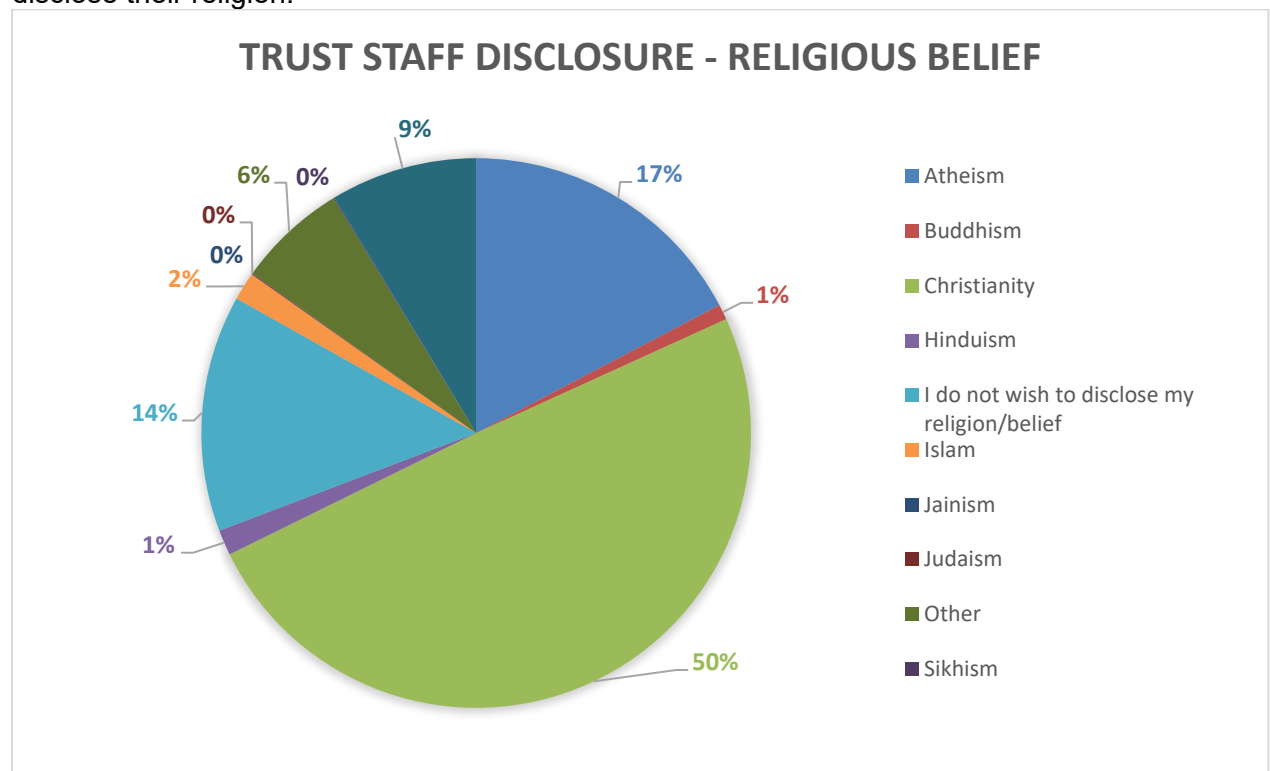
Workforce by disability and health condition

Trust data shows that 5.3% of staff members have a recorded disclosure regarding disability. 60.6% are recorded as not having a disability, 6.8% preferring not to answer, while almost 27.2% of data is unrecorded or not declared.



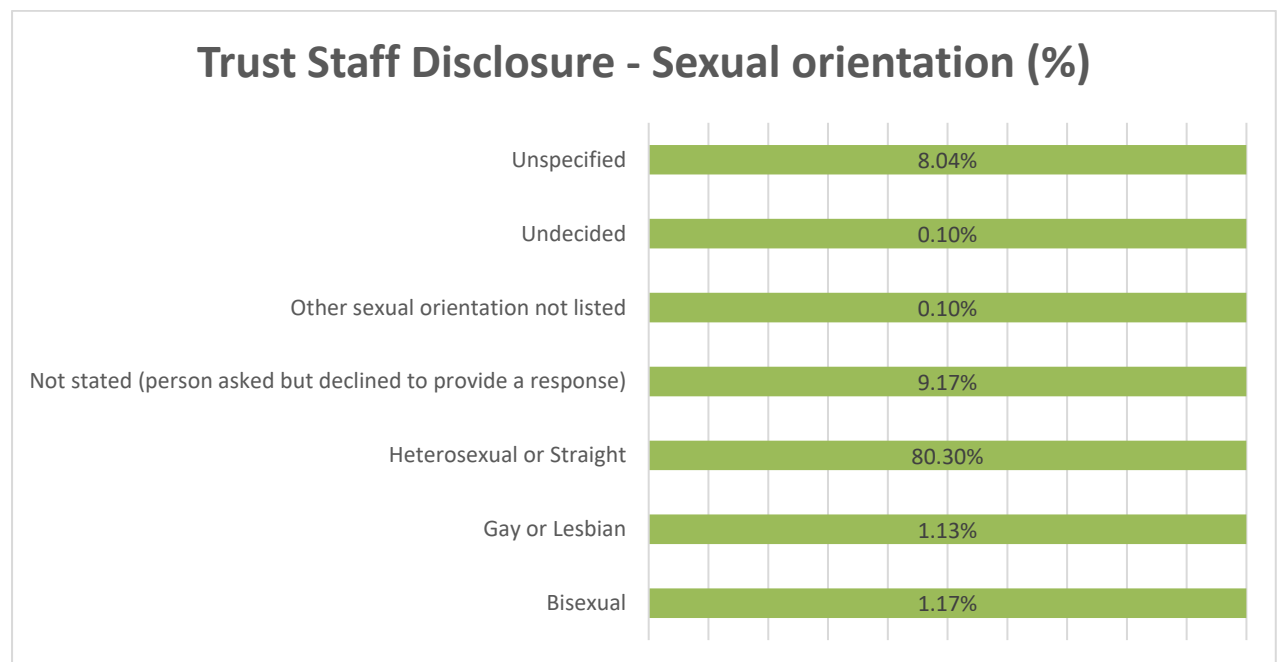
Workforce by religious belief

The Trust currently shows a diverse range of faiths, with fewer staff choosing not to disclose their religion.



Workforce by sexual orientation

More staff members have chosen to disclose their sexual orientation since last year. The number of staff members choosing not to disclose their sexual orientation has fallen by 1%.



Employee relations data

All formal investigations for disciplinary, capability, grievance, bullying, harassment and recruitment complaints are monitored for age, ethnicity, gender and disability to identify any trends that may indicate discrimination. Sickness absence is monitored separately.

'Investigations' listed are those where a member of staff was investigated under the managing conduct policy with no further action taken following the investigation.

From 1st April 2022 to 31st March 2023, the Trust conducted a total of 38 formal investigations as follows:

	Number of cases
Conduct Expected Behaviour (Disciplinary)	16
Performance (Capability)	3
Early Resolution (Grievance)	12
Probations	3
Respect for Others (Bullying & Harassment)	3
Recruitment Discrimination	1
TOTAL	38

Ethnic Background – out of the 38 cases the following numbers and percentages are listed as involving colleagues from a specific background:

28 cases (74%) White British

1 case (2.6%) Black British Caribbean

1 case (2.6%) Filipino

2 Cases (5.2%) Estonian

2 Cases (5.2%) Portuguese

1 case (2.6%) Black British African

1 case (2.6%) Polish

1 case (2.6%) British Asian

1 case (2.6%) South African

This shows a total of 10 cases (26%) involving colleagues from an ethnic minority background. This is proportionate to the workforce demographic for this period (White British categories 76%, all other categories combined 24%)

Three of these cases (8%) involved a colleague with a disability, this is proportional with the 6.27% of employees that have declared a disability. This does not give cause for concern in relation to the workforce demographic.

Thirty cases (79%) involved female colleagues and 8 cases (21%) involved male colleagues. This is in-line with the workforce demographic for this period (79.7% female, 20.3% male).

The age range of colleagues involved in investigations was 23-64.

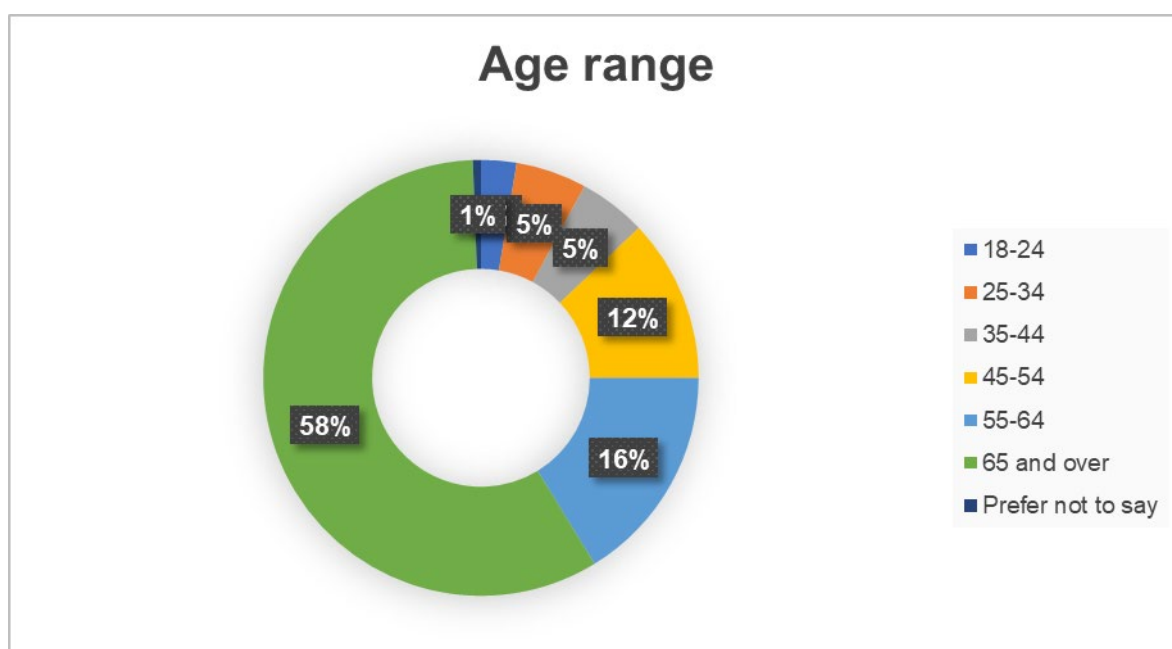
Due to the small number of individuals involved in each category of investigation, it is not possible to provide further analysis of the protected characteristics without compromising confidentiality.

No significant trends or causes for concern have been identified during the analysis.

Conclusion: workforce data

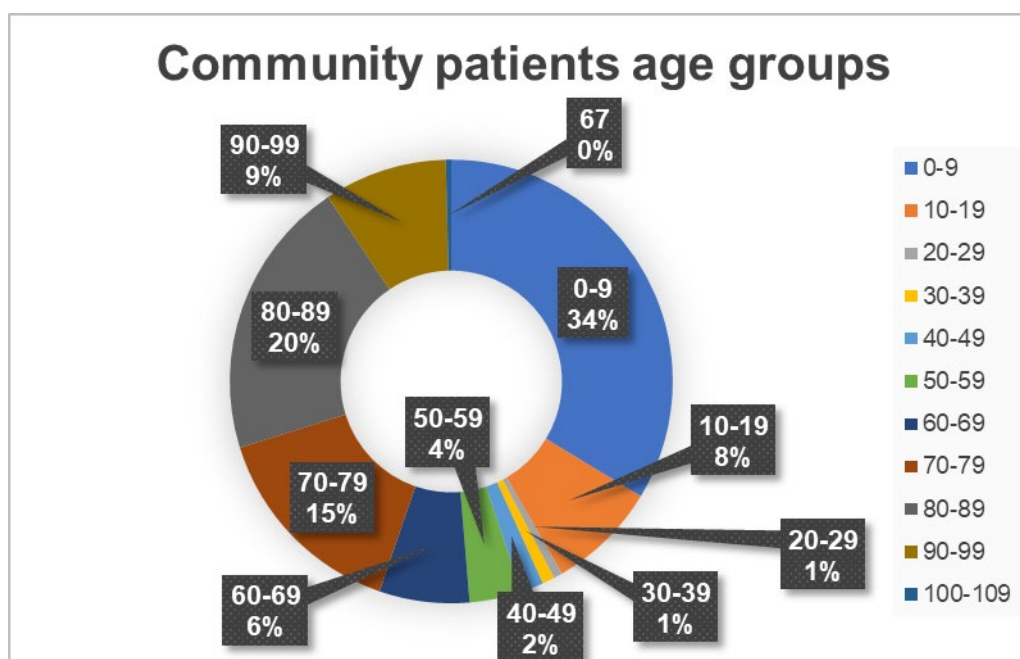
The data presented here complements that already reported through WRES, WDES and the gender pay gap report. Relevant actions to address underrepresentation of and inequalities for groups with protected characteristics, particularly in more senior roles, are captured within our Inclusion Workplan.

Inpatients by age group



58% of respondents were over the age of 65, with the second highest ranking being between 55-64 and third 45-54. This correlates with data that those 65 and over were the highest percentage of inpatients between September – December 2023, which was used as a snapshot period.

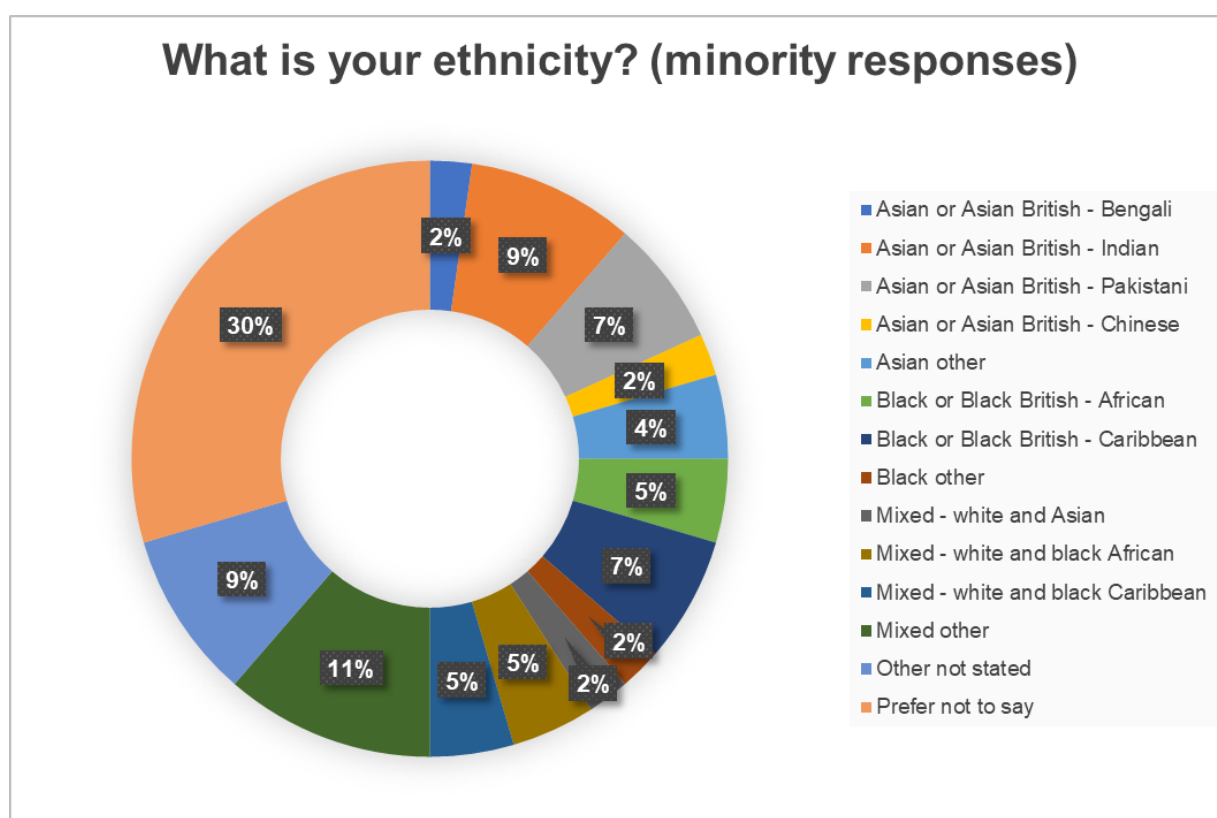
Collection of data will be categorised further to ensure responses of 65 and over are able to be analysed more robustly.



In the community, the highest percentage age group was those between 0-9 due to our integrated community paediatrics service which covers the whole of Suffolk. For adult services, the majority of our patients are between 80-89 years old.

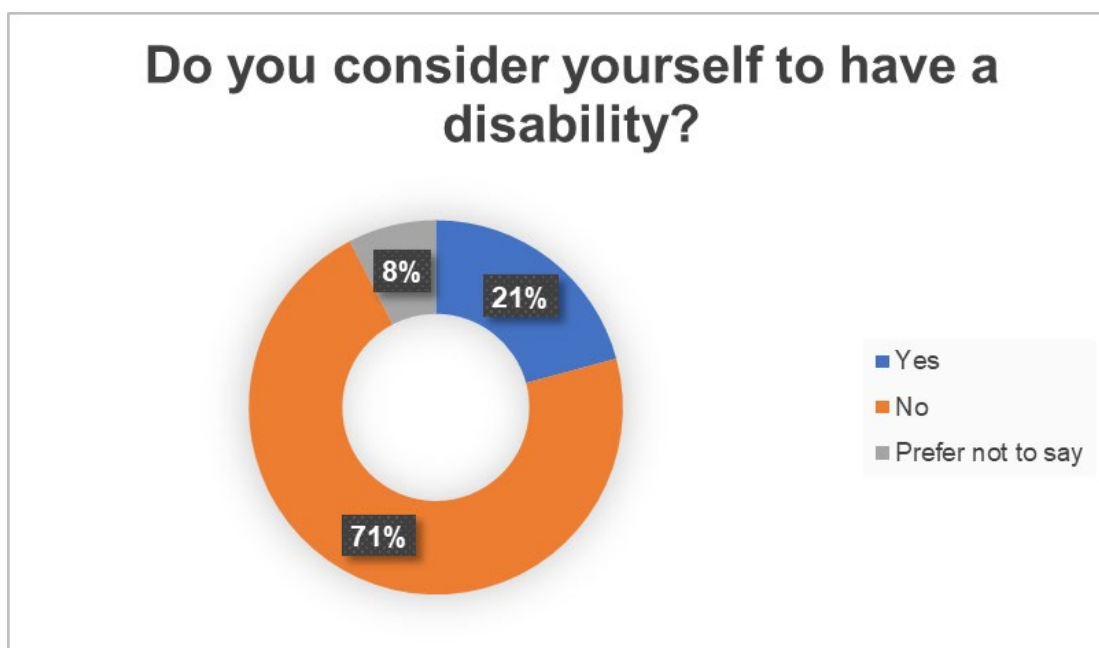
Inpatients by ethnicity

92% of responses were from people of White ethnicity. Further analysis has been undertaken on those in minority ethnic groups (in this case, all other groups listed below and those responding 'prefer not to say'). The breakdown is as follows, with the majority group preferring not to say what their ethnicity is. 11% of respondents stated they were 'mixed other' and 9% with Indian heritage and 9% Asian 'other'.



Of these groups, inpatient attendances in quarter three were also highest for 'Any other ethnic group' and 'Asian other', however overall White groups made up the majority of inpatient stays (82%).

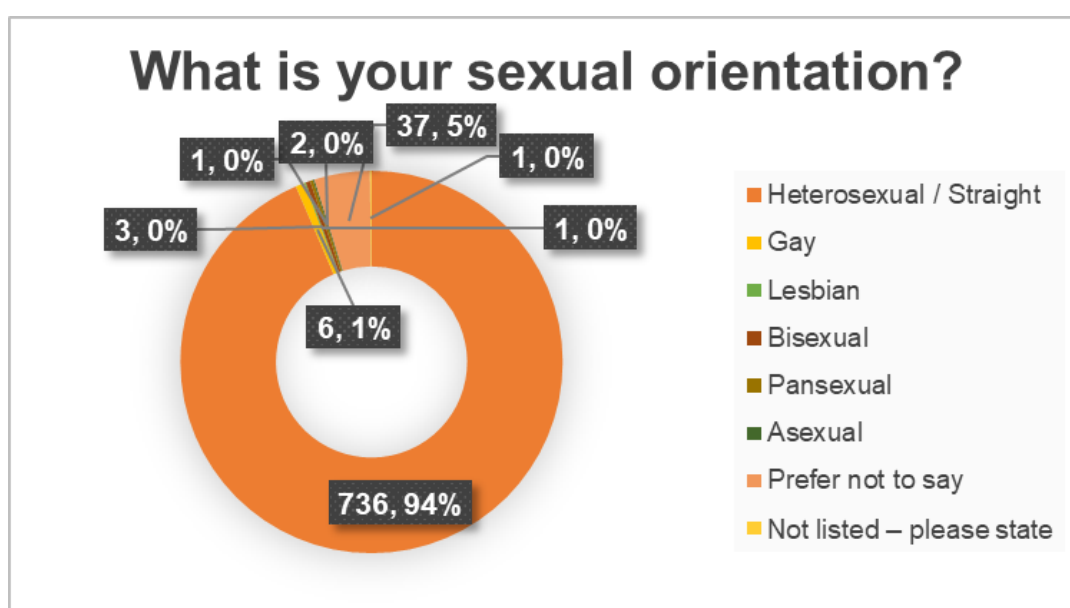
Inpatients by disability



71% of respondents stated they did not consider themselves to have a disability, and 21% stated that they do have a disability. This percentage is slightly higher than national averages found in the 2021 census data (Office for National Statistics, 2021) whereby 17.7% of people residing in England are disabled under the Equality Act (2010).

Of the respondents who were happy to let us know more about their disability, the majority of people disclosed that they had arthritis. This was followed by people with chronic obstructive pulmonary disease (COPD) and people with visual or hearing impairments.

Inpatients by sexual orientation



94% of respondents identified as heterosexual or straight, with the second highest sexual orientation being 'prefer not to say' followed by gay. All other categories had at least one respondent.

Inpatients by religion or faith



Of those that left a comment to describe their religion or faith, responses were Church of England or Roman Catholic.

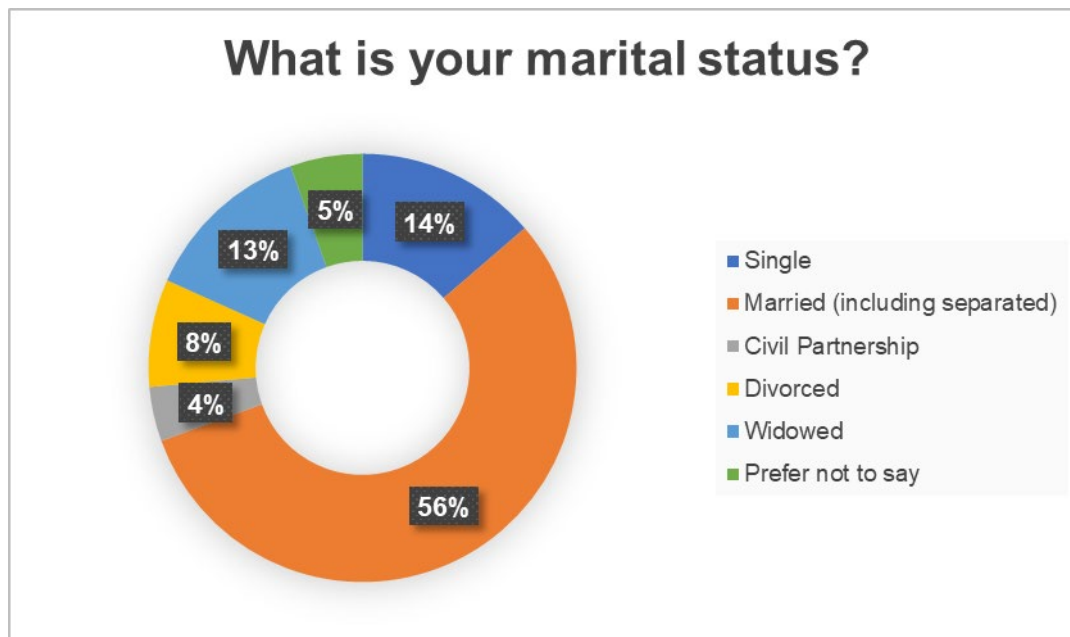
Inpatients by pregnancy status



94% of respondents are not and have not been pregnant in the last 12 months. 25 people stated they were pregnant at the time of responding or had been pregnant in the past year, making up 3% of those responding.

Inpatients by marital status

Although marital status and civil partnership is not necessary to collect under the Public Sector Equality Duty for patients, this data is available to us. It shows that the majority of inpatients described themselves as married or separated, with the next highest category as 'single'.



Conclusion: patient data

More work is required surrounding general data collection of person demographics on attendance to hospital or in the community to ensure we can analyse the true breakdown of protected characteristics. At present, data collection is inconsistent with many patients' medical records stating 'not known' for ethnicity, sexual orientation, disability, and religion/fait. This means it is not possible to accurately assess how peoples' experiences differ depending on their protected characteristic, creating challenges in identifying disparities in this data.

However, other data sources are drawn upon to understand this including: patient satisfaction data; census data; public health data; complaints and feedback.

We are working on ensuring data collection can be routinely updated, including means of patients updating this information themselves.