



# Patient Equality Report

## 2020/21



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## 1.0 Introduction

Chelsea and Westminster Hospital NHS Foundation Trust (the Trust), which encompasses our two main hospital sites, Chelsea and Westminster Hospital and West Middlesex University Hospital, and our 12 community-based services.

2020/21 has been an incredibly busy year for the Trust and the NHS as a whole, as we responded to the COVID-19 incident.

Reflecting on our achievements against our strategic priorities, highlighted are a few of which we are particularly proud:

### **Our quality**

#### **Strategic priority 1: Deliver high-quality, patient-centred care**

Our values and strategic priorities drive us to continually improve and ensure that we put the quality and safety of care at the centre of everything we do.

### **Our people**

#### **Strategic priority 2: Be the employer of choice**

As a Trust, we employ more than approx. 6,400 staff. Over the past year, our focus on our people has, through a series of local, national and international work-streams, seen us achieve a marked reduction in our vacancy rates. The Trust's commitment to equality, diversity and inclusion was strengthened this year by the introduction of staff networks.

### **Our sustainability**

#### **Strategic priority 3: Delivering better care at lower cost**

Our excellent financial and operational performance continues to be of great pride to us, seeing us simultaneously achieving our financial plan while continuing to be one of the best performers against the national access standards.

The following sections provide an overview of the demographic profiles of our patients who have used the Trust services during 2020/21.

The sections have been divided into 4 services.

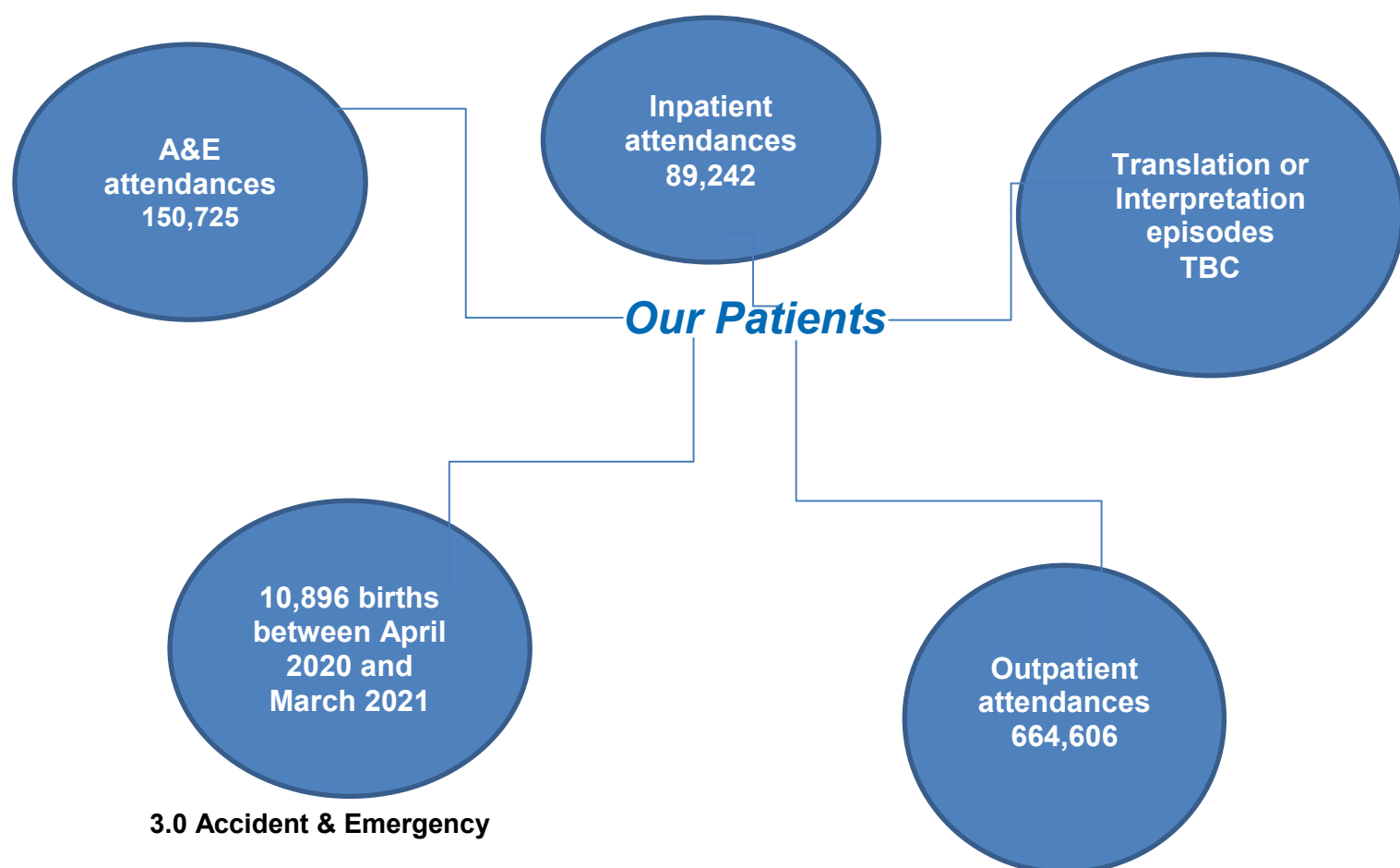
A&E, Maternity, Inpatients, Outpatients

For the purposes of this report, the following breakdown of ethnicity has been used. Non BAME incorporates patients that identify as White British, White Irish and Any Other White background.

BAME includes patients who identify as Asian (Indian, Pakistani, Bangladeshi), Mixed (White Black/Asian), Black (Caribbean, African) and Other (Chinese and Any Other). These are in line with the Office of National Statistics' Census categories.

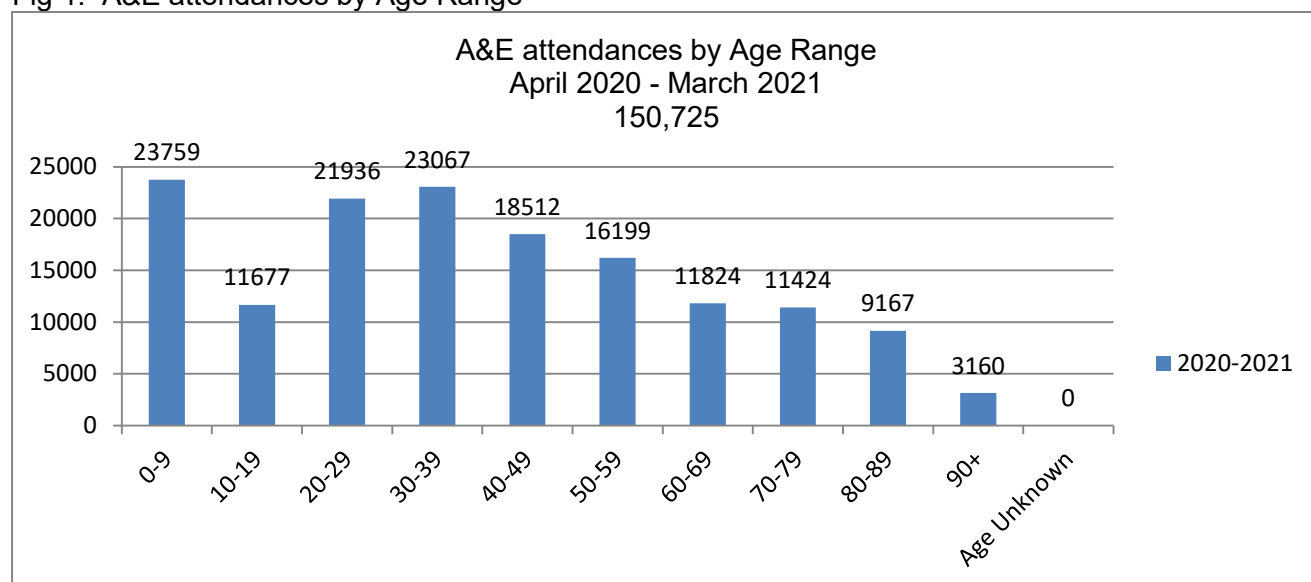
The Not Stated category also includes those who have chosen not to disclose their ethnic background.

## 2.0 Key Highlights April 2020 – March 2021



## 3.0 Accident & Emergency

Fig 1: A&E attendances by Age Range



\*The A&E data does not include patients who left the department without being treated

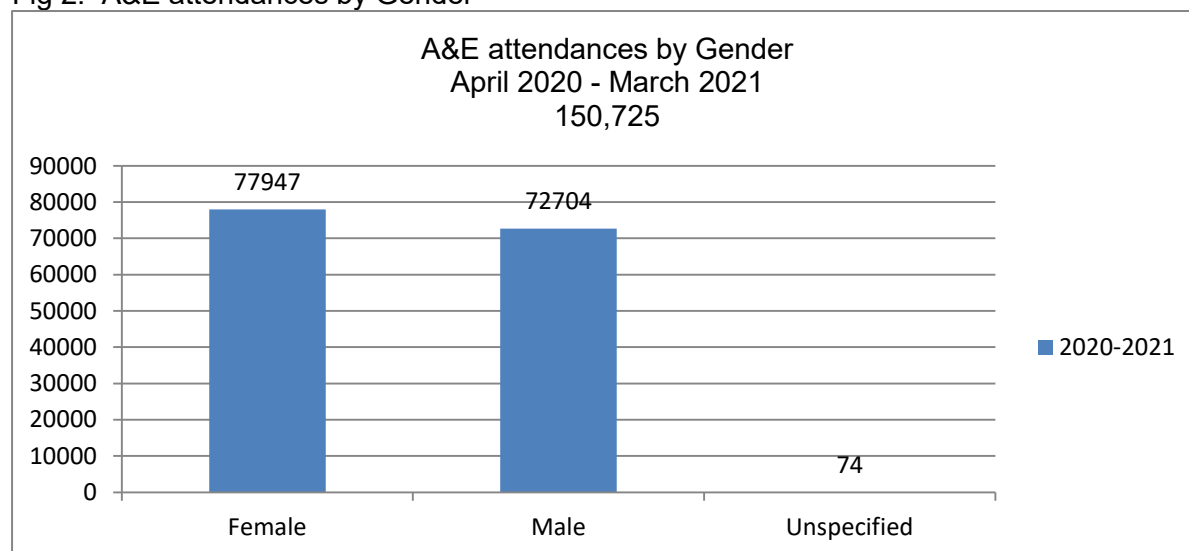
150,725 patients attended one the two Trusts A&E departments in the financial year April 2020 to March 2021. From April 2019 to March 2020 the number of patients who attended was 224,091 a 32.7% decrease in attendances in comparison of the two years.

There were decreases in attendances across all age ranges. As in previous years the paediatric A&E department is consistently the most attended service and still remains so,

however whilst it did see a decreases in numbers the 20–29 and in particular the 30–39 age ranges were almost at comparable levels. This data excludes births that occurred over the same period. Births are detailed in Figure 4.

The under 60's account for 76.3% of overall attendances whilst the over 60's accounted for 23.6% of overall attendances in April 2020 to March 2021

Fig 2: A&E attendances by Gender



A&E attendances by gender for April 2020 to March 2021 shows that females still account for the slight majority at 51.7% with males at 48.2%. Females' making up the slight majority of A&E attendances has remained consistent with the percentage differences having remained largely unchanged over the past two years.

For April 2020 to March 2021 attendances were either not recorded or unspecified is less than 1%.

Fig 3: A&E attendances by Ethnicity

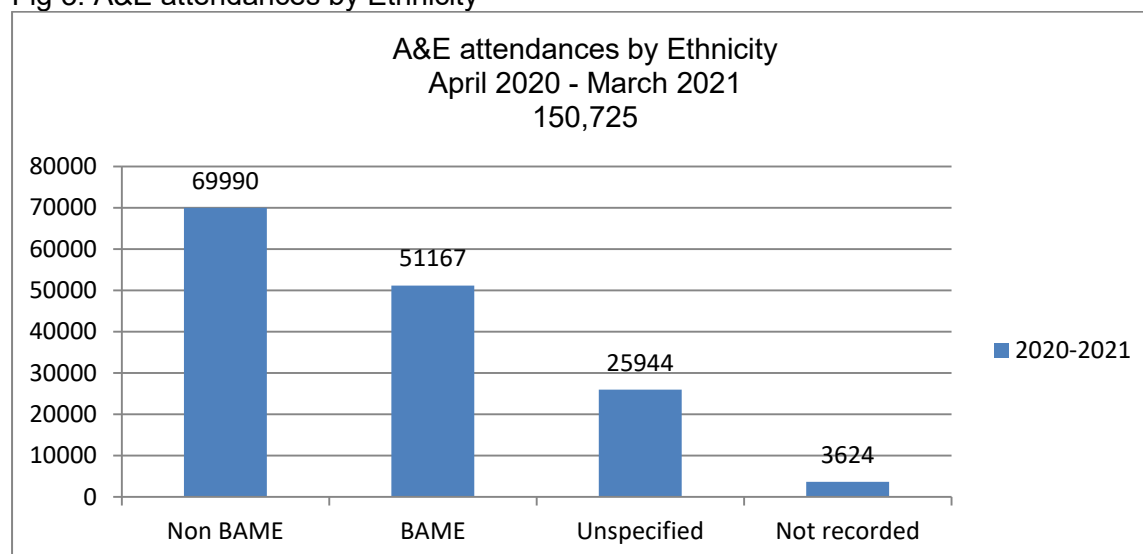
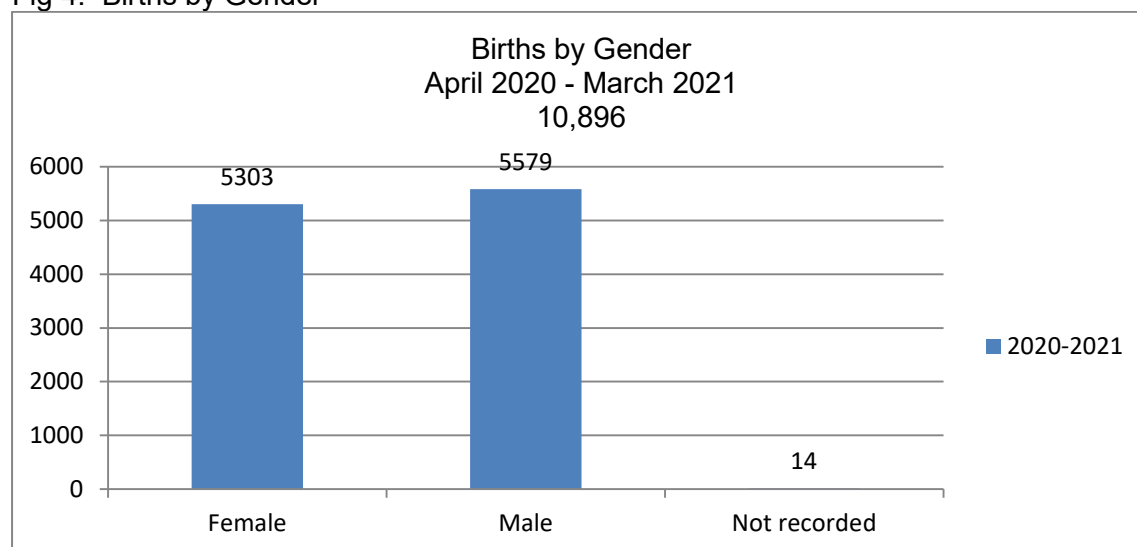


Figure 3 above shows that Non BAME patients accounted for 46.4% of service users and remains higher than BAME service users which at 33.9% for April 2020 to March 2021.

In April 2019 to March 2020 Non BAME patients accounted for 43.9% of attendances and BAME accounted for 32.5%. The number of attendances where ethnicity was either unspecified or not recorded has for April 2020 – March 2021 was 13.1%.

#### 4.0 Maternity

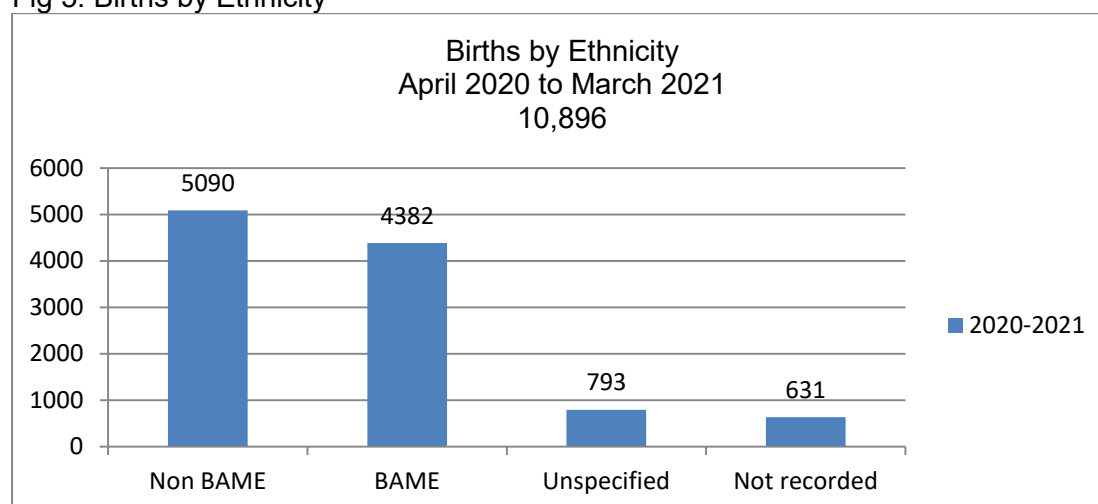
Fig 4: Births by Gender



There number of births across maternity services from April 2020 to March 2021 was 10,896; this is a decrease of 5.2% compared to April 2019 to March 2020 where the number was 11,470.

The average monthly birth rate for April 2020 to March 2021 was 908 per month down from 955 for the previous year. More male babies were born in both years April 2019 to March 2020 and April 2020 to March 2021 accounting for 51% of all births. The number of not recorded or unspecified is below 1%.

Fig 5: Births by Ethnicity

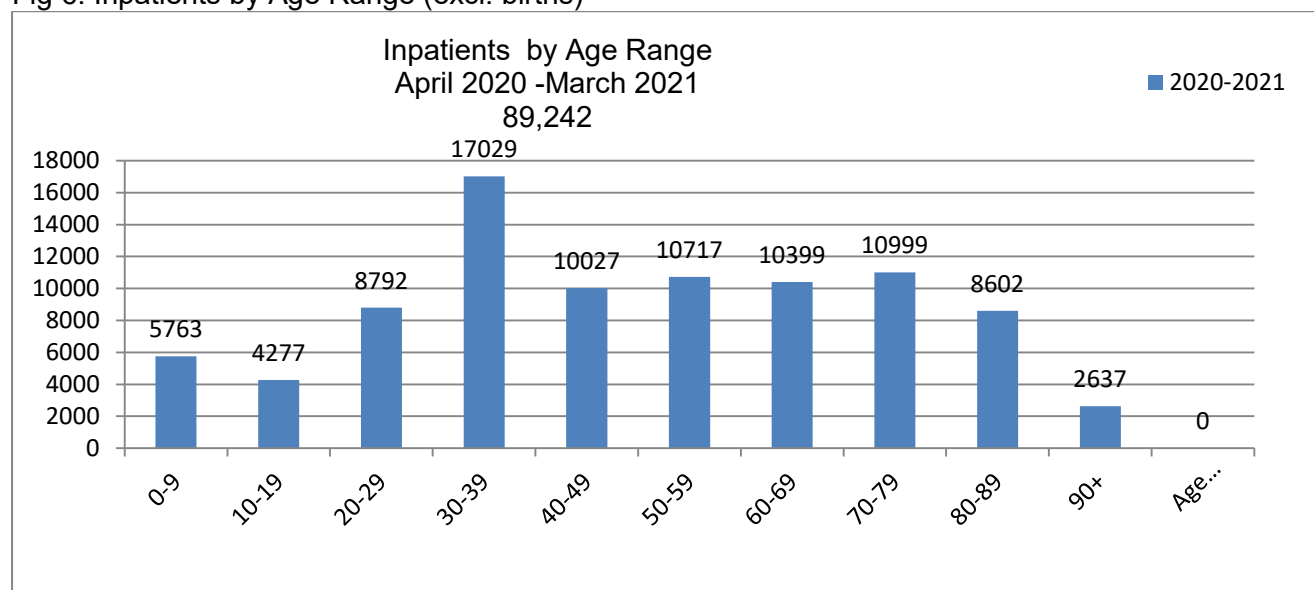


Of all births in April 2020 to March 2021 Non BAME accounted for 46.7% and BAME accounted for 40.2%. In the previous year April 2019 to March 2020 Non BAME accounted for 47.3% of births and BAME 38.5%.

Unspecified or Not Recorded for April 2020 to March 2021 was 13% and 14% for April 2019 to March 2020.

## 5.0 Inpatients

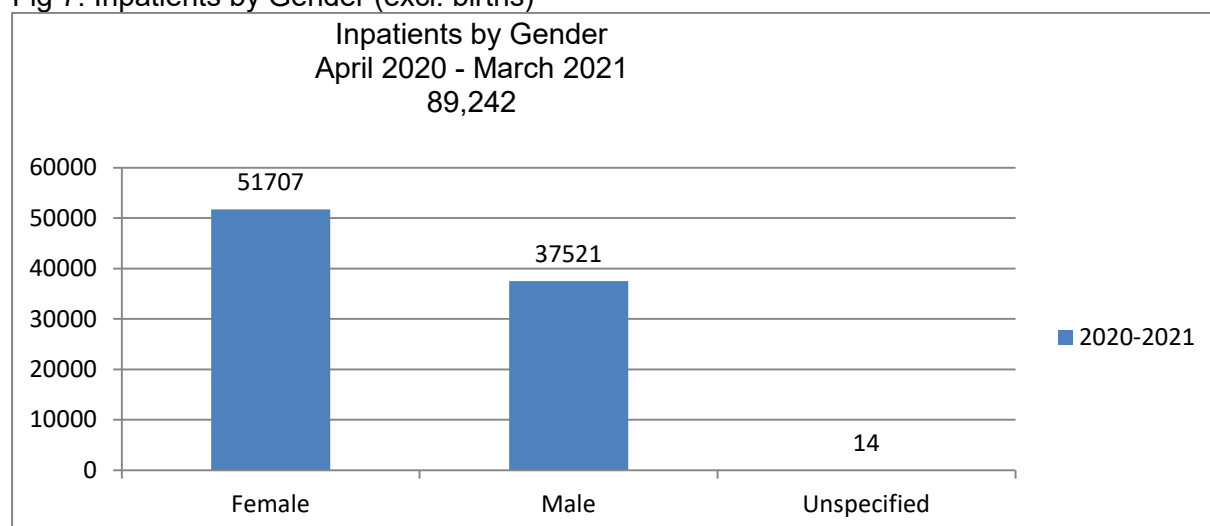
Fig 6: Inpatients by Age Range (excl. births)



The number of inpatient admissions for April 2020 to March 2021 was 89,242. In comparison the number of admissions for April 2019 to March 2020 was 134,588 a reduction of 33.6% on the previous year, and in keeping with this there were falls in numbers across all age ranges

The 30–39 age range were most frequent users of this service as they have been over previous years being 19.0% of service users.

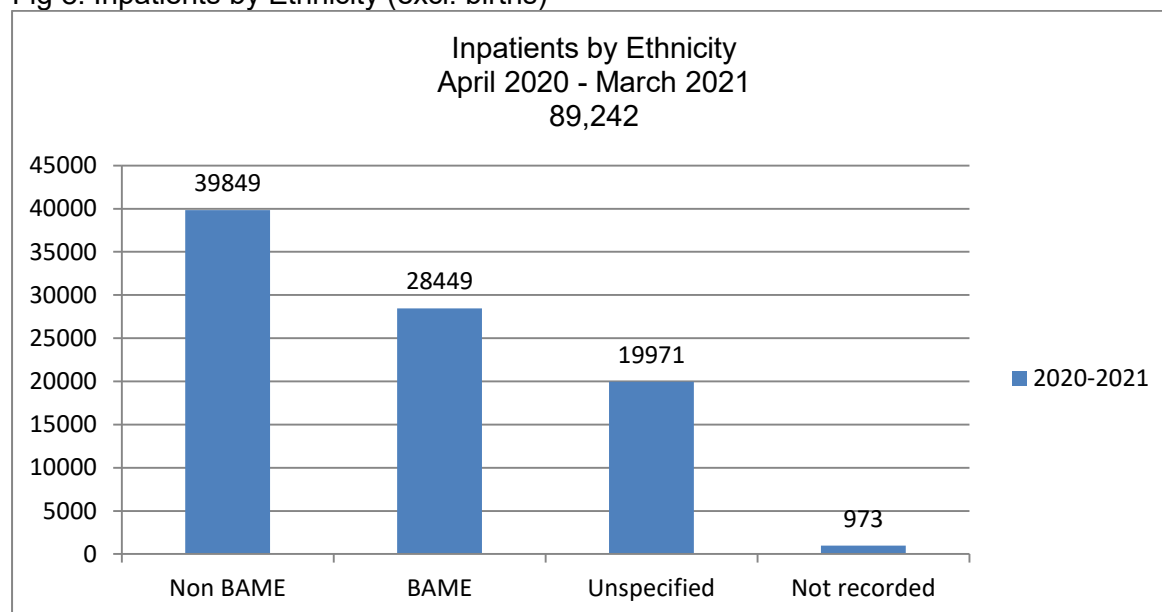
Fig 7: Inpatients by Gender (excl. births)



Inpatient attendances by gender show that females make up of 57.9% of service users in April 2020 to March 2021; this figure was 56.8% for April 2019 to March 2020. Males accounted for 42% in April 2020 to March 2021 and 43.1% for April 2019 to March 2021.

Not recorded and unspecified by gender is less than 1% in both years.

Fig 8: Inpatients by Ethnicity (excl. births)

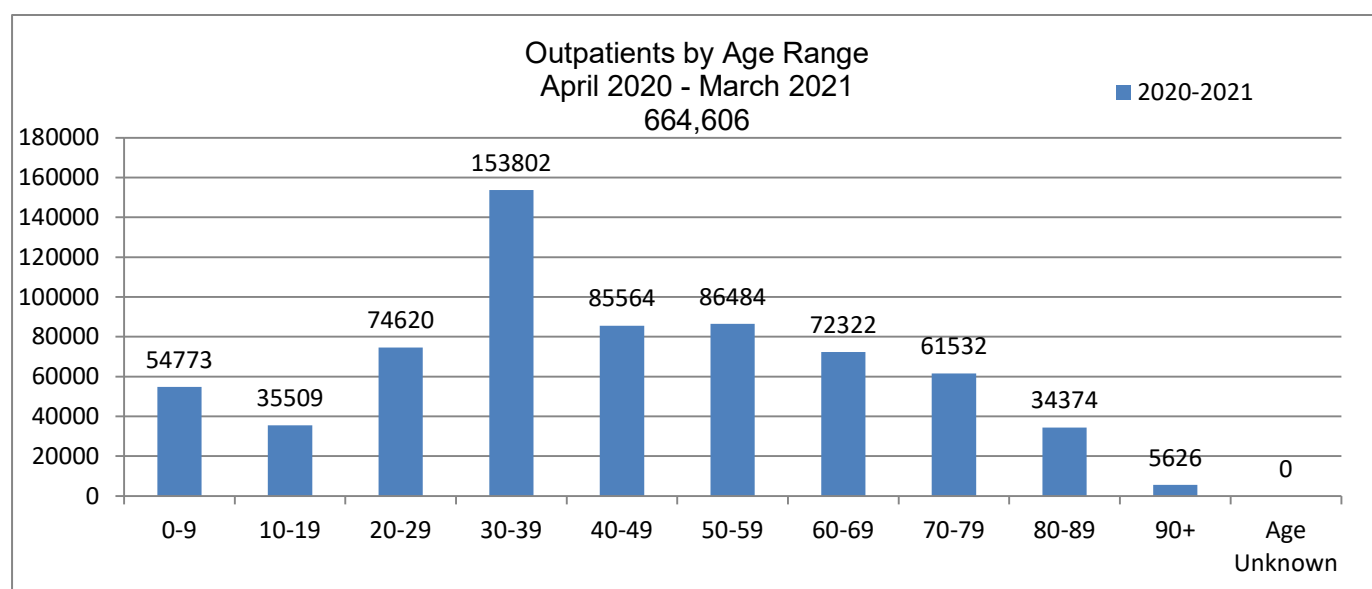


In April 2020 to March 2021 Non BAME patients accounted for 44.6% of inpatients and 44.1% in April 2019 to March 2020. BAME patients accounted for 31.8% of inpatients in April 2020 to March 2021 and 31.3% in April 2019 to March 2020

The percentage of unspecified or not recorded has decreased by 44% from an increase of 25% of attendances the previous year.

## 6.0 Outpatients

Fig 9: Outpatients by Age Range



\* The outpatient data only shows patients who attended an appointment and excludes cancellations or those who did not attend.

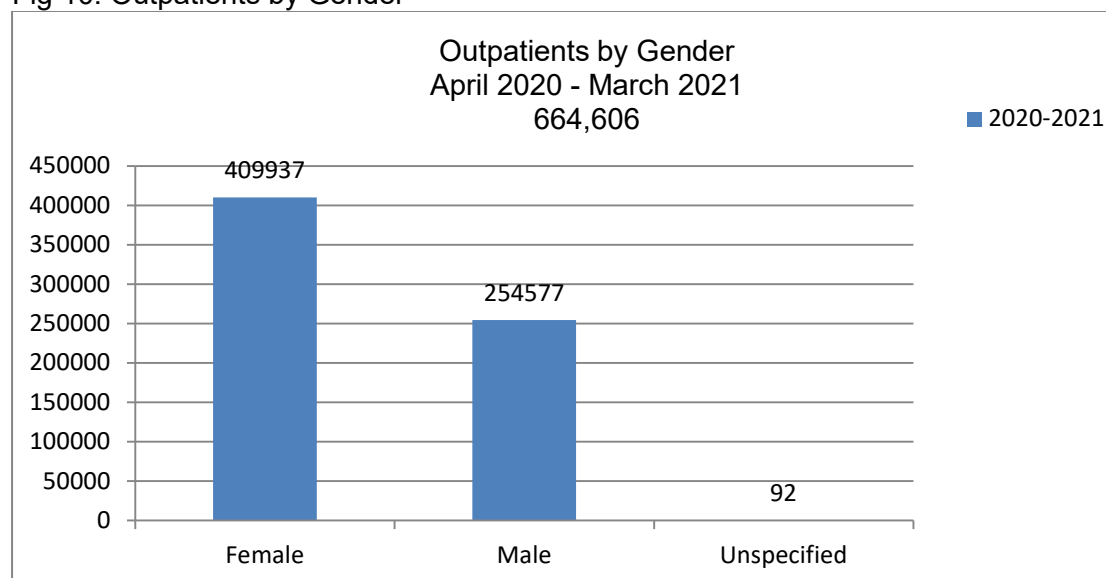
There were 664,606 outpatient attendances in April 2020 – March 2021. In the same period April 2019 to March 2020 there were 811,124 a reduction of 18%.

The 30-39 age range makes up the most frequent service users.



The under 60's as a whole account for 73% of users in April 2020 to March 2021 with the over 60's at 26.1% of the total.

Fig 10: Outpatients by Gender

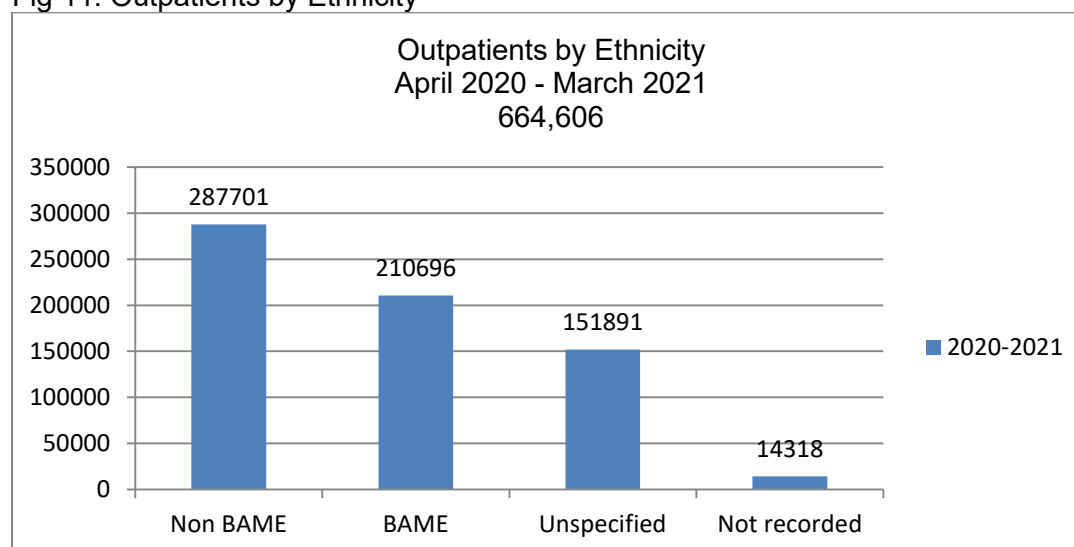


Females make up the majority of attendances at 61.6% with males at 38.3% in April 2020 to March 2021. Females also make up the majority of attendances for April 2019 to March 2020 at 61.2% with males at 38.6%.

In both of these years this will be the first time females have been the majority service users.

The number of unspecified has increased in April 2020 to March 2021 was 92 which is less than 1%.

Fig 11: Outpatients by Ethnicity



Data for outpatient attendances by ethnicity for April 2020 to March 2021 shows that 43.2% of attendees were Non BAME, for April 2019 to March 2020 this was 43.7%. BAME attendees accounted for 31.7% in April 2020 to March 2021 and 30.2% in April 2019 to March 2021

## 9.0 Religion by Service

**Fig 12: Top Religions By Service (April 2020 – March 2021)**

Religion	Inpatients	A&E	Outpatients
All other religions	69244	123748	538260
Buddhist	82	93	718
Christian (all other denominations)	8671	11073	53271
Hindu	1023	1036	6602
Jewish	98	121	595
Muslim	3054	5116	19526
No religion	2778	3522	18180
Not Declared	241	342	4637
Patient Religion Unknown	3072	4523	16732
Roman Catholic	17	2	148
Sikh	962	1149	5937
<b>Total of all denominations</b>	<b>89242</b>	<b>150725</b>	<b>664606</b>

The Trust collects data on the religious beliefs of patients of all denominations. The top most recorded individual religious beliefs by service are shown in the above. Only a very small number of patients would appear to refuse to declare their religious belief when asked (Not Declared). More accurate recording of patients' religious belief is addressed through the Trust patient equality objectives.

## Learning Disabilities, Autism or Both

The Trust has continued to make progress in improving services for patients with a learning disability, autism or both by developing its approach to inclusion, information sharing, access to services, by providing support and partnership working with their families/carers. We continue to enhance the experience of our patients by working towards recommendations from NHSE/I and the Learning Disability Mortality Programme (LeDeR).

The Trust's Learning Disability Steering group met virtually during the second wave of the pandemic. The group includes departmental representatives, a Trust Governor, parents of patients a learning disability, the Assistant Head of Queensmill School and representatives from local charities and services.

The monthly Level 2 training session for all levels of Trust staff continued virtually during the lockdowns with the support of Richmond Mencap. They made two videos for us with their service users, talking about their experiences of being a patient and also the with a service user demonstrating Makaton signing.

In September, 2020 we welcomed our third intake of Project SEARCH interns at the West Middlesex Hospital site. This project focusses on providing on the job training for young people with a learning disability, autism or both. During the lockdowns, the team continued to provide twice weekly virtual training/learning and a weekly team meeting to socialise by and sharing their experiences of the pandemic with each other and the Project SEARCH team. In March, 2021 the interns and the Project SEARCH team returned to the hospital, having been fully briefed on Covid-19 safety measures, were individually risk-assessed and had had at least one vaccination.

## Accessible Information Standard (AIS)

The Trust continues to work towards full compliance with the AIS identifying patients with a communication need and raising awareness to all staff.

A working group has been established to oversee this project which will be a long term on-going commitment.

The below table identifies the Trust level of compliance as at July 2020

Fig:13: AIS Compliance at December 2020

Domain	Description	Actions required	Compliance
1. Identify	Identify communication needs (as opposed to disability) as part of an individual's first or next interaction with the Trust	Development of the Accessible Information Policy	Completed November 2017 <b>Green</b>
2. Record and flag	Communication needs to be clearly visible in records.	Cerner change request to be instigated to add flags for written communication needs and communication needs during care	<b>Amber</b>
3. Share	Information needs to be shared between departments in the Trust and with other providers, as appropriate.		Dependent on 2, above <b>Amber</b>
4. Meet the need – patient information leaflets	Information provided in in the appropriate accessible format	Patient information leaflets to be migrated to the hospital website, which has extensive accessibility features	In Implementation, migration from patient leaflets to Trust website to utilise RectieMe software <b>Green</b>
5. Meet the need – letters	Information provided in in the appropriate accessible format	Appointment and other patient letters to be provided in the appropriate format	There will be partial compliance when the Care Information Exchange is running <b>Amber</b>
6. Meet the need – use of interpreters during care	Information provided in in the appropriate accessible format	Face-to-face or remote interpreters to be available during care	<b>Green</b>

As part of the action from the Accessible Working Group a physical audit of the Trust IT infrastructure and Trust estate has been commissioned.

AccesAble has been commissioned and is due to start a week long physical inspection and audit of the Trust site in May and will generate an action plan for the Trust to consider – this covers all aspects of the building, the wards/depts. and the facilities provided to patients and members of the public

## **Interpretation & Translation**

Continuing effective patient care depends upon the accurate exchange of information. It is therefore the aim of the Trust to ensure that a range of interpreter and translator services are provided for people whose first language is not English and also those who communicate via sign language.

These services are provided by accessing the use of telephone interpreters and where required face to face interpreters within the permitted specialities.

Interpreting; relates to the spoken word.

Translation; relates to the written word (transferring ideas expressed in writing from one language to another).

It has not been possible to provide the data of access to interpretation services at the point of writing this report as the Interpretation Provider has not been submitted them to the Trust.

The Trust does not have direct access to the system to review the data and is reliant on the Provider supplying it. Due to the Covid-19 pandemic the Provider has been unable to do this