

Equality information 2021

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Introduction

This equality information report demonstrates how NHS Kernow Clinical Commissioning Group (NHS Kernow) is meeting its public sector equality duties under:

- Section 149 of the Equality Act 2010 (the public sector equality duty)
- The Equality Act 2010 (specific duties) Regulations 2011

NHS Kernow is committed to promoting equality and eliminating discrimination as an employer, and in ensuring the services we commission are accessible and inclusive.

We are committed to fulfilling our equality duties and obligations to reduce avoidable health inequalities in all aspects of our role and functions. We have a legal duty to eliminate unlawful discrimination and promoting equality of outcomes for our population. We aim to do this by ensuring that the values underpinning equality, diversity and human rights are central to our policy making, service planning, employment practices and commissioning.

For our staff, we recognise and value difference and aim to create a working culture and practices that recognise, respect and value difference for the benefit of the organisation and the individual.

The NHS, including NHS Kernow, has experienced unprecedented change in 2020 due to the COVID-19 global pandemic. Much of NHS Kernow's work during 2020 was impacted by COVID-19 and the need to support colleagues to work safely. The ability to collect some equality information during 2020 has been affected by COVID-19 and this is reflected in this paper. We anticipate that there will also be an impact on the gathering of some equality information during 2021.

Collecting and analysing equality information

Public authorities must ensure that they have sufficient information about equality issues to make informed choices and decisions. This equality information is rigorously considered before and at the time decisions are taken.

NHS Kernow collects and analyses equality information through:

- [using data](#) to understand potential impacts and reduce health inequalities
- [engagement and consultation](#) with members of the public and colleagues
- [undertaking robust equality analysis](#) on decisions made through using equality impact assessment (EIA) or full impact assessment (FIA)
- [monitoring of recruitment and workforce information](#)
- [analysis of provider performance](#) against contractual standards
- meeting national and NHS England [equality standards](#)

Using data

The [data from the 2011 census](#) reaffirms what we already knew; that we have a comparatively higher number of people aged over 60 living in the area than the rest of the country. We also have a growing population and an aging population. The next full census takes place in 2021.

In line with our [Cornwall and the Isles of Scilly Health and Care Partnership](#) aspirations, we will continue to work on projects to improve health outcomes as well as accessibility to and experience of NHS services for our population.

Full analysis of the census 2011 data helps inform NHS Kernow's commissioning intentions and is utilised in the [joint strategic needs assessment](#) (JSNA). This is the document we use to help plan health and social care services for Cornwall and the Isles of Scilly.

Engagement and consultation

NHS Kernow has a thorough and robust [engagement and consultation](#) process. We strive to ensure that engagement and consultation takes place appropriately, inclusively, and in partnership. A targeted approach is taken where a review or service change may affect a particular group of people, or a particular protected characteristic may be positively or negatively affected by a change.

Routine engagement takes place through our [patient participation groups](#) and [citizen advisory panel](#). During the COVID-19 pandemic, face to face engagement at events has not been possible. Face to face engagement at events is also expected to be limited during 2021. This has affected our ability to collect our usual monitoring of [equality delivery system 2 \(EDS2\)](#) outcomes.

NHS Kernow also works in collaboration with our partners via local equality committees, for example, the system equalities group, hate crime steering group and the Cornwall wide single equality objectives setting process.

Undertaking robust equality analysis

NHS Kernow is committed to ensuring that it demonstrates due regard to the general duty when making decisions about policies and services. We have embedded the requirement to undertake an equality analysis into our decision making processes.

This ensures that we continually work to understand and respond to the diversity of patient experience in health access, care and outcomes. We recognise and value the importance of using equality analysis to address health inequalities.

All committee reports require the author to consider how their report relates to equalities in general and to ensure that due regard is given to the general equality duty.

NHS Kernow offers support to colleagues who are likely to need to undertake an equality impact assessment (EIA) or full impact assessment (FIA). Our EIA and FIA

procedures can be found on the NHS Kernow website and are a fundamental part of our commissioning process.

Monitoring of recruitment and workforce information

We also continue to act as a responsible employer and meet the equality needs of our colleagues. In our recruitment and employment practices, and in planning our services for public, we are mindful of the inequalities experienced by people from all protected groups of:

- age
- disability
- gender reassignment
- marriage and civil partnership
- maternity and pregnancy
- race, including nationality and ethnic origin
- religion and belief
- sex
- sexual orientation

Colleagues are enabled to report, change and update their protected characteristic information through the use of the electronic staff record (ESR). An [analysis of recruitment and workforce information](#) can be found later in this paper.

Analysis of provider performance

NHS Kernow holds contracts with providers and for each contract there is a monitoring process. This enables providers and commissioners to raise issues, concerns, feedback and relay good practice. Through the NHS standard contract, commissioners request information about the performance of the provider. Equality considerations for access to the service and a statement of what equality related information the provider should produce is part of this contract and contract review process.

Equality standards

Equality delivery system 2

The EDS2 is a national NHS tool which enables NHS organisations to engage with stakeholders to assess performance against 18 outcomes which support 4 goals.

1. Better health outcomes.
2. Improved patient access and experience.
3. A representative and supported workforce.
4. Inclusive leadership.

The NHS first began to use EDS during the financial year 2011 to 2012. Using EDS2 has helped us to assess our performance in reducing inequalities and improving access and experience across all protected groups. This information has informed

our equality objectives and action plans. NHS England is due to launch EDS3 and further information is expected during 2021 to 2022.

Workforce race equality standard (WRES)

The [WRES](#) requires organisations to demonstrate progress against a number of indicators of workforce equality for people with a black, Asian and minority ethnic background. We recognise our role in asking providers to report on their performance against the WRES framework from 1 July 2015, as well as paying due regard to the standard in its own workforce practices. Paying due regard to WRES as an employer and a commissioner is reflected in our equality and human rights strategy. NHS Kernow's WRES report and action plan are available on the NHS Kernow website.

NHS accessible information standard

The [accessible information standard](#) is a way of ensuring that the NHS and adult social care is meeting people's communication needs. The standard seeks to make information easy to understand and available in different formats where people need this. Implementing the NHS Accessible Information Standard has been incorporated into the work of the Cornwall accessible communications group. This multi-agency group was established to improve all forms of communication between public sector organisations and patients, clients and the wider population of Cornwall and the Isles of Scilly.

The [public sector accessibility regulations](#), which came into effect on 23 September 2020, have been implemented by the NHS Kernow communications team. It has meant improvements to the accessibility of the NHS Kernow website and information produced by NHS Kernow with a specific focus on digital inclusivity.

Gender pay gap

The [gender pay gap](#) requires all employers with 250 or more employees to publish annually figures setting out the average pay gap between men and women. NHS Kernow's gender pay gap report and action plan are available on the NHS Kernow website.

Our public

Public perception of equality and diversity

We have routinely used a survey to understand the impact of our commissioning activities on people with protected characteristics. Where possible, the same questions have been used to facilitate a comparison over time. These questions are disseminated at events with members of the public. Due to COVID-19 and the restrictions which came into effect in March 2020, this has not taken place during 2020.

Our workforce

Analysis of recruitment and workforce information

All of the NHS Kernow colleague information represented in this report relates to data recorded on ESR as at 29 April 2021.

Colleagues employed

NHS Kernow employs 265 substantive colleagues, equating to 248.11 full-time equivalent positions.

NHS Kernow staff by main staff group

The majority of the NHS Kernow workforce (74%) is in the administrative and clerical staff group. Other colleague groups employed at NHS Kernow include qualified nurses, medical staff and pharmacists.

NHS Kernow colleagues by employee category

A person who works part-time has contracted hours of less than 37.5 hours per week. 23% of the workforce work on a part-time basis. This is a drop from 35% in October 2019. 31.6% of females employed by NHS Kernow work on a part-time basis, compared to 6.7% of males who work part-time. The male proportion is lower in comparison with the male population of Cornwall working part-time (18%). The proportion of part-time working females in Cornwall is higher at 51%.

We support our colleagues through NHS Kernow's [flexible working policy](#) which enables colleagues and managers to consider a wide range of flexible working arrangements, subject to business need. These include:

- part-time working
- job sharing
- flexi-time
- annual hours contracts
- term-time working
- voluntary reduced working time
- flexible retirement

NHS Kernow colleagues by employment status

90% of NHS Kernow colleagues are employed on permanent contracts. This percentage has been relatively consistent since 2015.

Sex

NHS Kernow's workforce is predominately female, representing 79% of total colleagues employed. This proportion is comparable with the overall NHS workforce

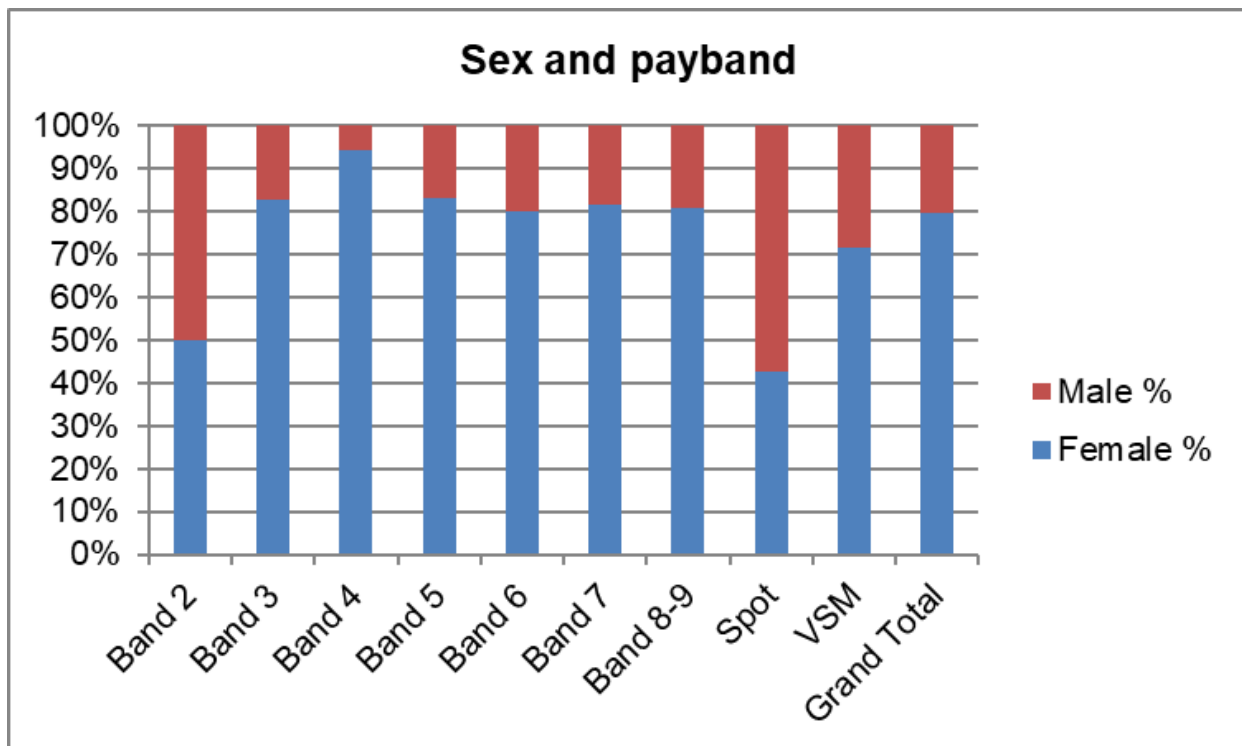
in England with 77% of colleagues being female and 80% of the total Cornwall and Isles of Scilly workforce.

NHS colleague sex breakdown comparison

Colleague or population group	% Female	% Male
NHS Kernow (April 2021)	79	21
NHS in England and Wales (October 2017)	77.3	22.7
NHS in Cornwall (October 2017)	80	20

The table above shows that the NHS Kernow sex profile is consistent with that of the wider NHS. However it is different to the proportion of working age females in Cornwall (58%) and the proportion of economically active females in Cornwall (76%).

The graph below illustrates that, in general, there is a representative balance between sex breakdown across the pay bands compared to the overall gender split in the organisation.



The proportion of male and female applicants remains relatively consistent through the recruitment process. These proportions are also consistent with the current NHS Kernow (and wider NHS) colleague profiles. The data shows that 68% of applicants to roles at NHS Kernow were female. There were relatively few appointments made in the year to 29 April 2021, and of those appointed, 87.5% were female.

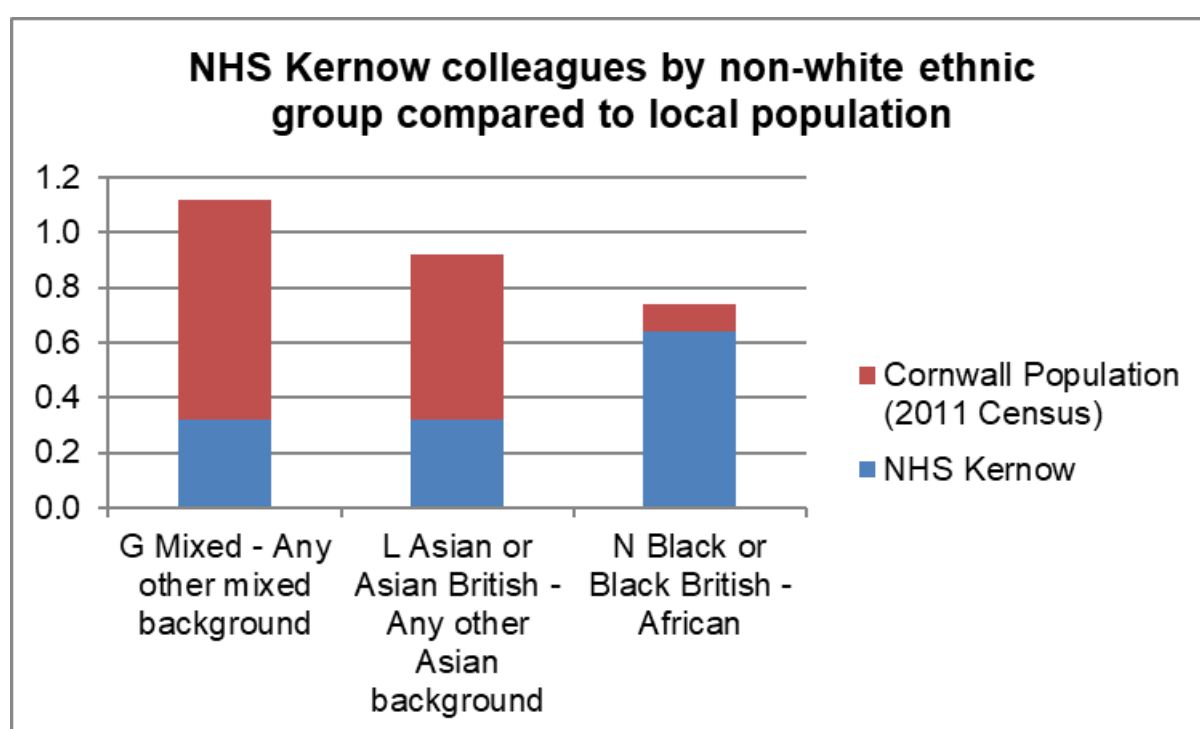
Further information about our [gender pay gap](#) analysis and action plan is available on the NHS Kernow website.

Ethnicity

1.3% of the NHS Kernow workforce are from non-white ethnic groups. Colleagues self report their ethnicity on ESR. This compares with 2.5% of the NHS workforce in Cornwall and the Isles of Scilly and 1.7% of the Cornwall and Isles of Scilly population.

The graph below illustrates that there are small numbers of people from non-white backgrounds in the Cornwall and Isles of Scilly population and working within NHS Kernow. NHS Kernow's colleagues who are non-white are broadly representative of the Cornwall population according to the 2011 census.

NHS Kernow colleagues by non-white ethnic group compared to local population



NHS colleagues and population ethnicity comparison

Colleague or population group	% white ethnic groups	% non-white ethnic groups
NHS Kernow (April 2021)	98.7	1.3
NHS in Cornwall (October 2017)	91.8	2.5
Cornwall and Isles of Scilly population (census 2011)	98.3	1.7
NHS in England and Wales (March 2019)	75.56	19.73

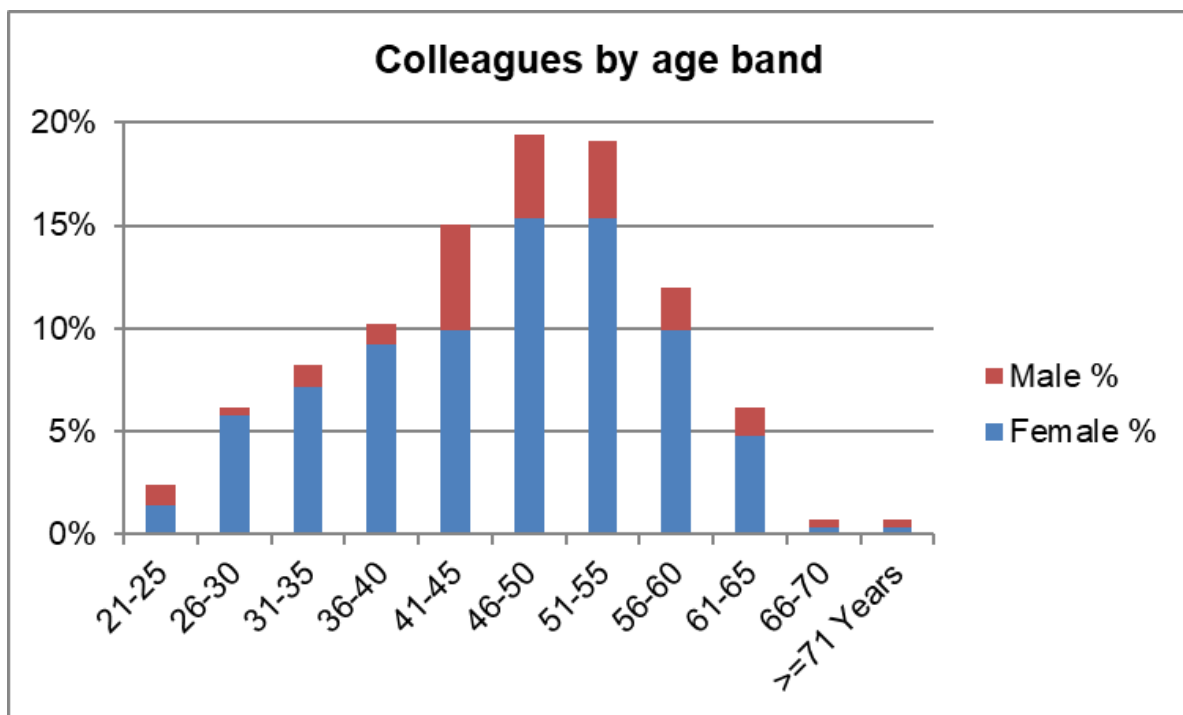
The proportion of colleagues from white ethnic groups is higher within NHS Kernow than the wider NHS in Cornwall and Isles of Scilly. 4.7% of colleagues in the wider NHS have chosen not to disclose their ethnicity.

We assessed the proportion of applicants for NHS Kernow vacancies by recruitment status and ethnicity. The proportion of applicants from non-white ethnic groups was 12.8%. This is higher than the proportion of non-white people living in Cornwall, which is 1.7% according to the 2011 census. There were relatively few appointments made in the year to 29 April 2021, and of those appointed 66.6% declared themselves as being white, with the remainder not disclosing their ethnicity.

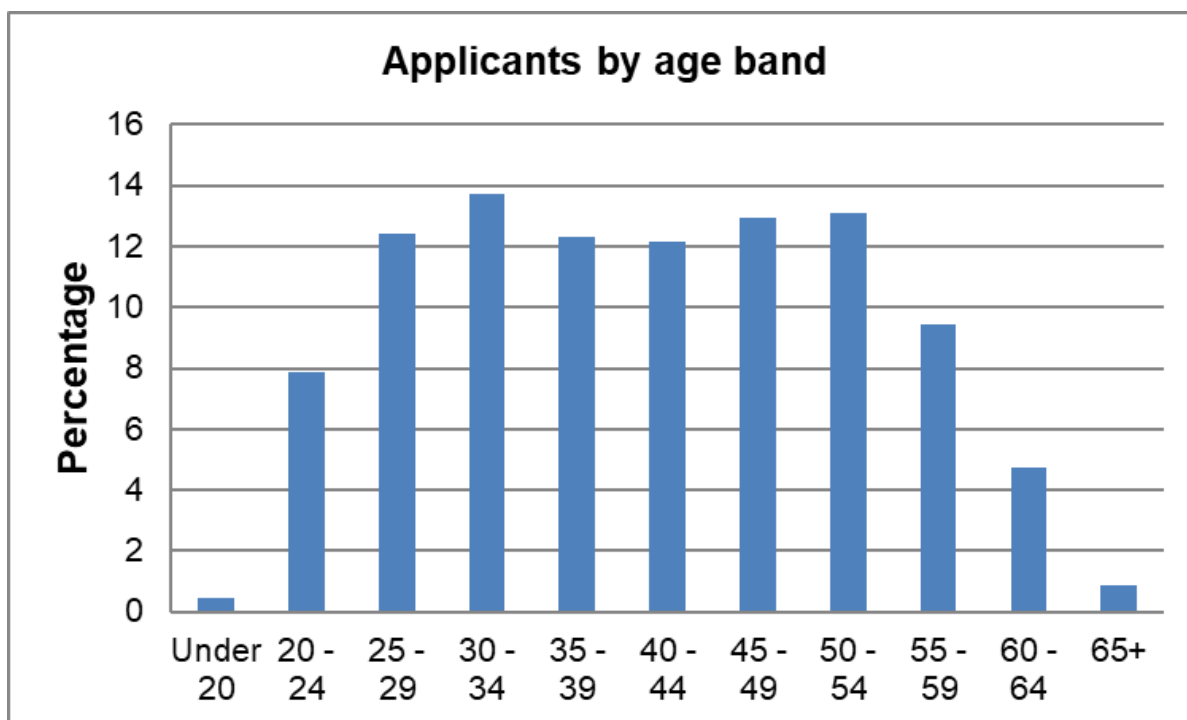
Further information about our [WRES](#) analysis and action plan is available on the NHS Kernow website.

Age

The chart below illustrates the age profile of colleagues within NHS Kernow. The chart shows that males and females are represented across all age bands in NHS Kernow's workforce.



The chart below shows that there is consistency across most age groups in relation to the proportion of job applicants at each stage of recruitment.



Disability

5.4% of the NHS Kernow workforce have declared themselves as having a disability. 6.1% of colleagues have not declared whether they have a disability or not, with a further 4.8% marked on ESR as unspecified. 83.7% of the NHS Kernow workforce have declared themselves as not having a disability.

When compared with the wider NHS workforce, the proportion of disabled NHS Kernow colleagues is slightly higher. It is difficult to make comparisons with the local and national population due to the classification of disabled under the census definition. However, 10% of the Cornwall and the Isles of Scilly population declared themselves as having a 'long-term health problem or disability that limits their day to day activity a lot'.

NHS colleagues and population disability comparison

Colleague or population group	% with a disability
NHS Kernow (April 2021)	5.4
NHS in Cornwall (October 2017)	3.8
NHS in England and Wales (March 2019)	3.3
Cornwall and Isles of Scilly population (census 2011)	10

Religious belief

46% of the NHS Kernow workforce have chosen Christianity as their religious belief. This is the same proportion to the overall NHS workforce in Cornwall. This is less than the 60% of the Cornish population who state Christianity is their religious belief.

26.2% of NHS Kernow colleagues have not disclosed their religious belief (including those classified as unspecified). Although higher than the population of Cornwall who did not disclose (8.5%), it is lower than the Cornwall NHS (32%) and England and Wales overall NHS proportion of non-disclosures (33.7%).

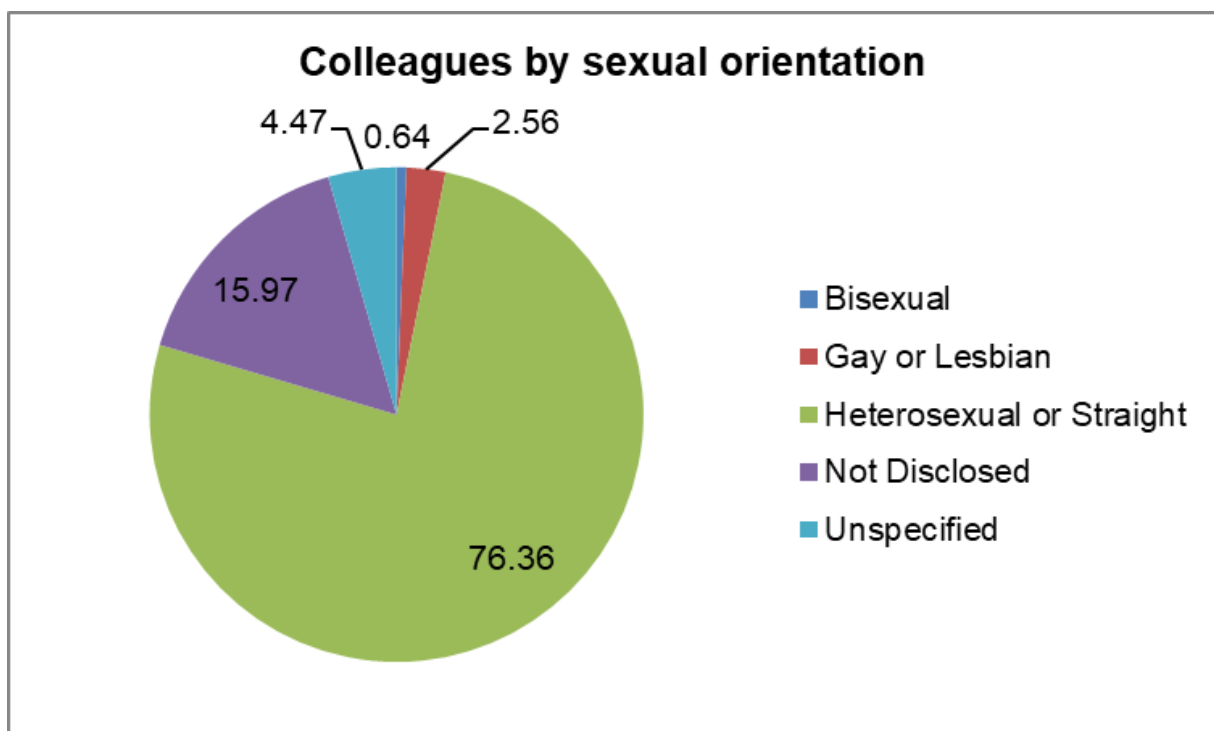
NHS colleagues and population religious belief comparison

Colleague or population group	Majority religion %	Non disclosure %
NHS Kernow (April 2021)	46	26.2
NHS in Cornwall (October 2017)	46	32
NHS in England and Wales (March 2019)	42.5	33.7
Cornwall and Isles of Scilly population (census 2011)	60	8.5

The percentage of non-disclosure of religious belief has increased for NHS Kernow.

Sexual orientation

76.4% of the NHS Kernow workforce declared themselves as being heterosexual, with 20.45% not wishing to declare or specify their sexual orientation.



3.2% of the workforce stated that they were lesbian, gay or bisexual. There is currently no accurate data on the number of lesbian, gay, or bisexual people in England or Cornwall to make a robust comparison with the workforce. However, the government estimates that between 5% and 7% of the population are gay, lesbian or bisexual.

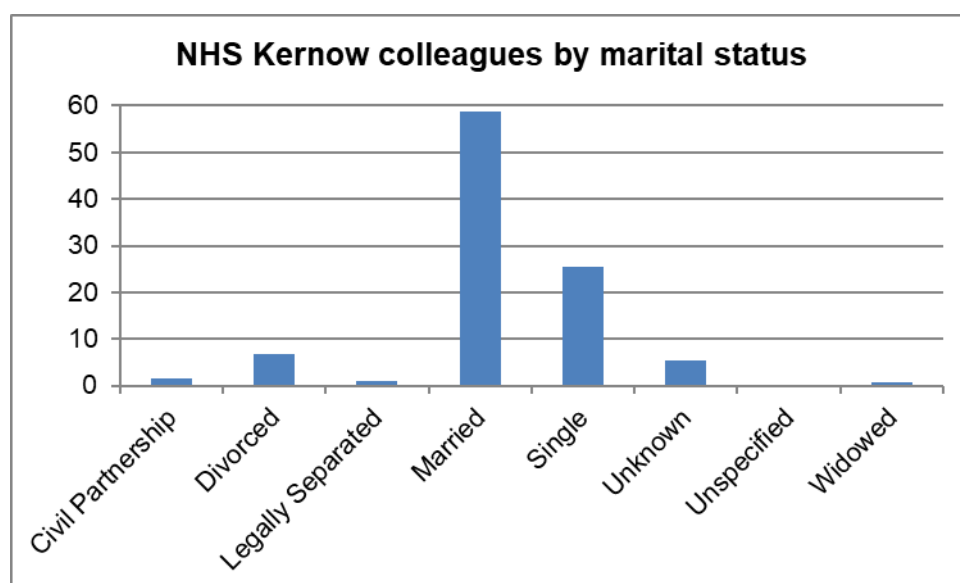
Slightly more of NHS Kernow’s workforce has declared themselves as lesbian, gay or bisexual than the average for the NHS. NHS Kernow’s non-disclosure rate is better than the NHS average but has increased slightly since 2019.

NHS colleagues sexual orientation comparison

Colleague or population group	Majority sexual orientation %	Lesbian, gay, or bisexual %	Non-disclosure or unspecified %
NHS Kernow (April 2021)	76.4 heterosexual	3.2	20.45
NHS in Cornwall (October 2017)	75 heterosexual	1.4	24
NHS in England and Wales (March 2019)	67.38 heterosexual	2.0	30.58

Marital status

NHS Kernow colleagues by marital status



The chart above illustrates the marital status of NHS Kernow colleagues

The proportion of staff who declared themselves as being married or single are not dissimilar to the marital status of people in the Cornwall and Isles of Scilly, according to the 2011 census.

NHS Kernow colleagues and population marital status comparison

Colleague or population group	Marital status %
NHS Kernow (April 2021)	58.8 married 25.6 single

Colleague or population group	Marital status %
Cornwall and Isles of Scilly population (census 2011)	50 married 28 single

Maternity

As of 29 April 2021, 6 employees were absent from work on maternity, paternity or adoption leave. All NHS Kernow colleagues have access to occupational maternity, paternity or adoption leave entitlements and colleagues who are absent on maternity leave are also entitled to 'keep in touch' days to enable them to keep up to date with work issues and developments.

NHS Kernow colleague information has been examined with regards to protected characteristics. No areas of concern have been identified.

Mandatory training

All colleagues are required to complete mandatory training. Analysis of completion rates did not highlight any major differences between the proportion of colleagues in post and training completion by any of the protected characteristics.

All NHS Kernow colleagues have also been given the opportunity to attend and complete a range of developmental training courses.

Employee relations

The level of formal employee relation cases within the organisation is so low that it is not possible to draw any conclusions with any statistical significance.

Summary of workforce data

The workforce data in this paper is broadly comparable to previous years' data. We recognise that there are some limitations on the data available. NHS Kernow has small numbers of employees. Where protected characteristics have not been declared, this has a large effect on the data available for examination. Colleagues are encouraged to keep their ESR data up to date and an ESR data cleanse is scheduled in 2021. The available data has been examined with regards to protected characteristics. No areas of concern have been identified.

How we support our workforce

NHS Kernow has experienced unprecedented change in 2020 due to the COVID-19 global pandemic. Much of NHS Kernow's work during 2020 was impacted by COVID-19 and the need to support colleagues to work safely. We also worked with our partners to coordinate an emergency response to support the people of Cornwall and the Isles of Scilly in accessing vital healthcare services. Actions taken include:

- risk assessments completed to understand the health risk to each colleague, enabling mitigating actions to take place

- enabling colleagues to work from home
- having a process to enable access to an office space for those who need this, for their health and wellbeing
- development and review of strategies and policies, especially those with a focus on supporting people to work remotely
- sharing events and listening events to understand how NHS Kernow can better support colleagues in the context of COVID-19, agile working and the establishment of an integrated care system
- promoting the uptake of the COVID-19 vaccines, including through sharing videos featuring people from a BAME background
- sharing easy read information about COVID-19
- providing advice and guidance for colleagues working from home with children

In addition to the COVID-19 response, colleagues have continued to work on local promotions. Actions taken include:

- regular virtual team briefings
- relaunched colleague of the quarter colleague awards
- promotion of the employee assistance programme
- promotion of the staff wellbeing support line
- information and training sessions delivered regarding the accessibility regulations 2018
- use of a health needs analysis survey to better understand the needs of NHS Kernow employees and how the organisation can support people
- secured access to Headspace mindfulness app and for all employees free of charge
- promotion of a free online mental health support tool
- advertised the availability of mental health first aiders to support colleagues and offered training opportunities to become a mental health first aider
- virtual lifestyle assessments offered to support mental health and wellbeing
- free access to Step into Health; a qualification offered via a distance learning course focusing on healthy lifestyles and positive sustainable changes
- offer of a sleep and wellbeing workshop
- online healthy eating sessions
- resilience training offered to colleagues
- sessions offered on joint pain advice in the workplace
- health and wellbeing workshops offered
- free yoga and mindfulness membership
- suicide first aid training offered
- virtual food bank collection
- offer of a pre-retirement seminar, to support those seeking to retire in the near future
- establishment of a menopause support group
- advertising opportunities for people to attend the multiagency networks, including lesbian, gay, bi, trans, queer or questioning (LGBTQ+) employee network group, black, Asian and minority ethnic (BAME) network meeting and disability staff network
- Acas and EASS webinar offered about discrimination at work

- information and awareness raising of topics including international day of zero tolerance for female genital mutilation, information about the 'freedom to speak up', mental health safety plans, 'speak out' to stand together against child sexual exploitation, mental health awareness week, spotting the signs of abuse, couch to 5k, domestic violence, risk of developing type 2 diabetes, fertility support group, the Cornwall bereavement network, world mental health day and self-care week

Staff perception of equality and diversity

The equality and diversity colleague survey was repeated during April 2019. It was not possible to repeat this in 2020 due to the impact of the COVID-19 pandemic.

NHS Kernow also undertook engagement with colleagues on the EDS2 goals; a representative and supported workforce, and inclusive leadership. This was undertaken via staff away days in December 2019, which were attended by approximately 140 staff members.

Next steps

We will continue to meet our equality and diversity legal duties, many of which are outlined in this paper. We remain committed to promoting equality and eliminating discrimination as an employer, and in ensuring the services we commission are accessible and inclusive.

There is increasing national emphasis being placed on equality and diversity, as well as managing inequalities and reducing variation. Reducing inequalities in the services we commission is considered a principal risk on the governing body assurance framework. NHS Kernow has signed up to the 7 co-produced recommendations of the Cornwall and Isles of Scilly leadership board.

The setting of equality objectives will be informed by the information in this paper, colleague survey data, EDS2 staff engagement events, public feedback, ESR data and the national staff survey results. The most up to date data available will be used. We recognise that the COVID-19 pandemic will have an effect on the completeness of this data. NHS Kernow will also work within the Cornwall wide single equality objectives setting process.