

# Equality Information 2019

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## 1. Introduction

NHS Kernow Clinical Commissioning Group (NHS Kernow) has legal duties to meet under the Equality Act 2010 and the Public Sector Equality Duty (PSED). This paper summarises our legal duties to our employees as well as those individuals affected by our policies and practices e.g. service users.

In all of the work we have undertaken as a commissioner of healthcare services for Cornwall and the Isles of Scilly, we have aimed to improve the health and wellbeing of the population. We have strived to ensure an equitable and comprehensive service for all, irrespective of age, disability, gender reassignment (trans or transgender), pregnancy and maternity, marriage and civil partnership, race, religion or belief, sex and sexual orientation.

During 2012/13 we used the national Equality Delivery System (EDS) to rate our equality performance with members of the local community. A refresh of the EDS took place in 2014 and the assessments provide another valid means for detailing our equality information; it is referred to as EDS2.

We continue to meet our duty to undertake robust equality analysis on decisions made through using Equality Impact Assessment (EIA) or Comprehensive Impact Assessment. Our Equality Impact Assessment and Comprehensive Impact Assessment procedures can be found on the NHS Kernow website and are a fundamental part of any services we re-commission.

## 2. Our public and our workforce

The data from the 2011 Census, which has been released to date, can be found [here](#). This 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 will take place in 2021.

In line with our “[Shaping our Future](#)” 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 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.

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.
- Religion and belief.
- Sex.
- Sexual orientation.

The Equality Delivery System 2 (EDS2) helps us to assess our performance in reducing inequalities and improving access and experience across all protected groups.

### **3. 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 four goals. The four goals are:

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 the EDS during the financial year 2011/12. Using EDS2 has helped us to understand our areas of strength and weakness. This information has informed our Equality Objectives and action plans.

During the winter of 2018 we ran an online survey to ask people how they felt that the NHS was performing as a commissioner and provider of services. The survey was also supplied to some of our stakeholder groups and taken to a local event. Detailed below are the results of the feedback we received, which includes an analysis of respondent by protected group. The graphs, found at appendix one, include a comparison to previous years' answers.

We plan to revisit this information during 2019/20 as we begin wider engagement on the new models of care as part of the Shaping our Future work.

It is clear from the information obtained from the survey we need to ensure more people are aware of how to make their views on service changes better, as well as keep members of the public informed on service changes.

We also asked people to make any comments about the outcomes which they felt needed to be brought to our attention. Issues which emerged from this include:

- Comments expressing concerns about access to mental health services.
- Communication from services requiring improvement.
- A lack of communication about strategic changes and changes in services to members of the public.
- Concerns about staffing and leadership.
- Transport needs not being considered when changes to services are made.
- Access to fertility treatment.
- Access to dental services.
- Emergency Department waiting room conditions requiring improvement.

Positive experiences were also reported by the people we spoke to. Items which emerged from this include:

- Maternity care described as positive.
- GPs providing a good service.
- Positive experiences at breast screening.
- Emergency Department care described as exceptional.

Considerable work is already underway to improve some of these reported issues. Specific examples of work being undertaken include:

- An equality objective being set around smooth transitions, with changes across services are informed by engagement of the public, professionals and local communities.
- An equality objective being set around promoting good communication with all people, with a specific focus on the NHS Accessible Information Standard.

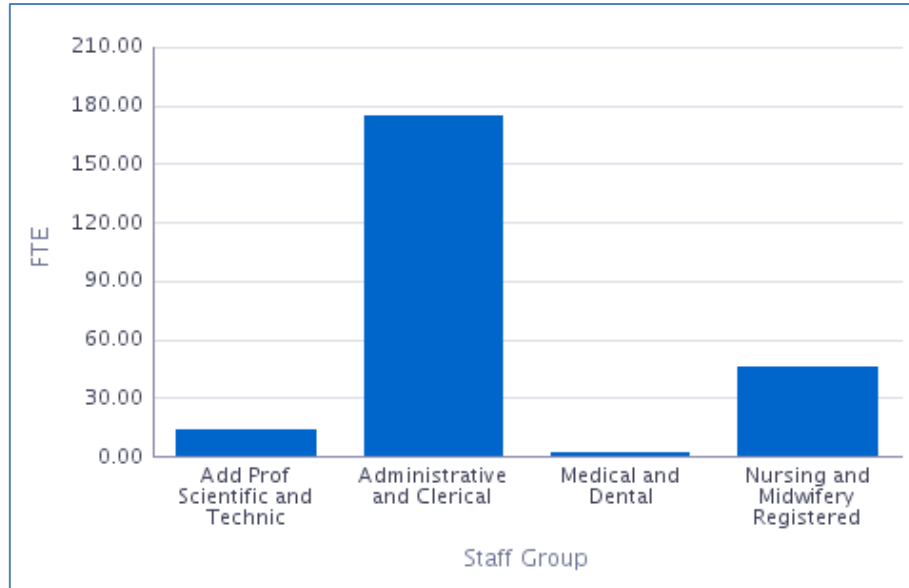
## **4. Our workforce**

All of the NHS Kernow colleague information represented in this report relates to data recorded on the Electronic Staff Record (ESR) system as at 31 October 2018. Recruitment data is sourced from the TRAC system, covering the twelve months January to December 2018.

### **Colleagues employed**

NHS Kernow employs 270 substantive colleagues, equating to 235.44 full-time equivalent positions (FTE).

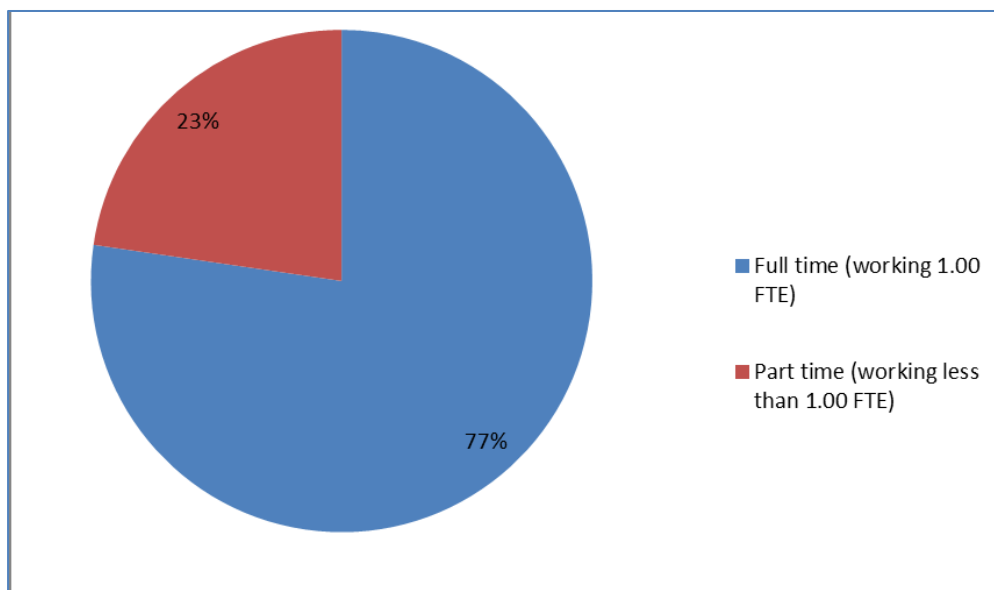
**Figure 1: NHS Kernow staff by main staff group (October 2018)**



The chart above illustrates that the majority of the NHS Kernow workforce (74 percent) are in the administrative and clerical staff group. Other colleague groups employed at NHS Kernow include qualified nurses, medical staff and pharmacists (included in the additional scientific and technical staff group above).

Figure two provides a breakdown of part-time and full-time workers. 23 percent of the workforce work on a part-time basis (contract hours of less than 37.5 hours per week).

**Figure 2: NHS Kernow colleagues by employee category (October 2018)**



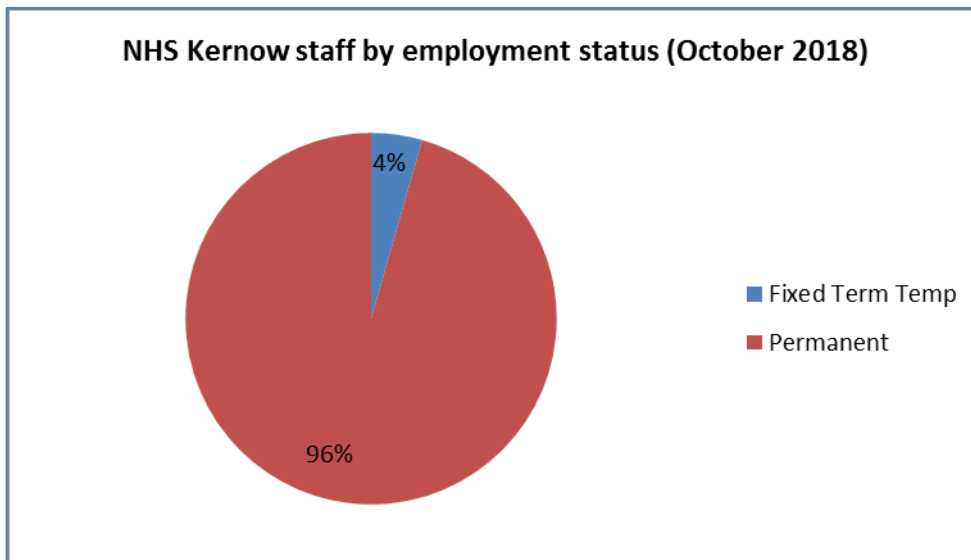
Colleagues are supported by NHS Kernow’s flexible working policy which enables colleagues and managers to consider a wide range of flexible working arrangements, subject to business need. These include:

- Part-time working.
- Job sharing.
- Flexi-time.
- Annual hours contracts.
- Term-time working.
- Voluntary reduced working time.
- Flexible retirement.

38.5 percent of females employed by NHS Kernow work on a part-time basis, compared to 32 percent of males who work part-time. The male proportion is higher in comparison with the male population of Cornwall working part-time (18 percent). The proportion of part-time working females in Cornwall is higher at 51 percent.<sup>1</sup>

The majority of NHS Kernow colleagues (96 percent) are employed on permanent contracts (up from 91 percent in 2015). This is comparable with approximately 91 percent<sup>2</sup> of the whole NHS Workforce (excluding bank workers) employed on permanent contracts.

**Figure 3: NHS Kernow colleagues by employment status (October 2018)**



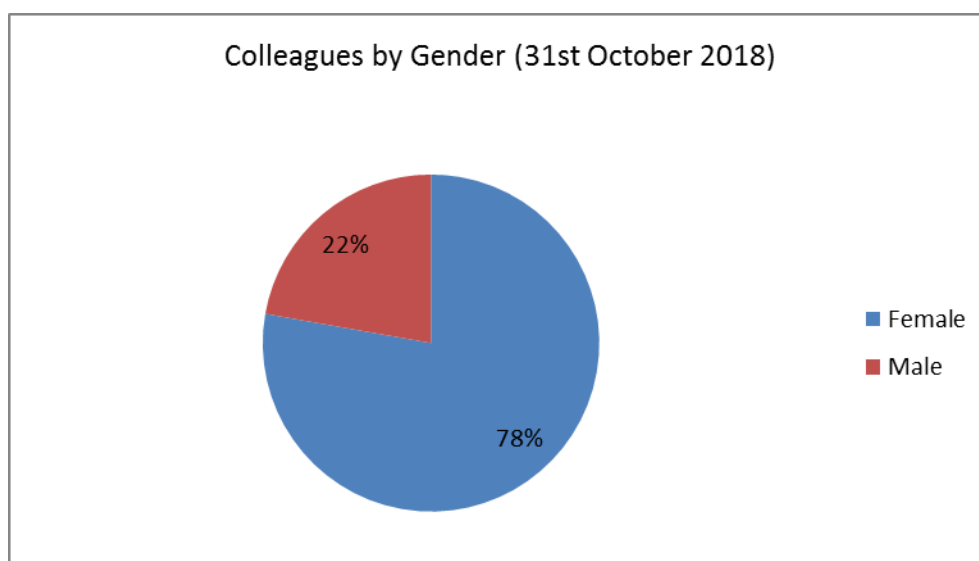
<sup>1</sup> Census data 2011

<sup>2</sup> NHS Digital: iView NHS Workforce staff in post by contract type Oct 2017 data (Jan 18)

## Gender

The NHS Kernow workforce is predominately female, representing 78 percent of total colleagues employed. This proportion is comparable with the overall NHS workforce in England with 77.3 percent of colleagues being female and 80 percent of the total Cornwall and Isles of Scilly workforce<sup>3</sup>.

**Figure 4: NHS Kernow colleagues by gender (October 2018)**



**Figure 5: NHS colleague gender breakdown comparison**

Colleague/population group	% female	% male
<b>NHS Kernow (October 18)</b>	<b>78%</b>	<b>22%</b>
NHS in England and Wales (Oct 17)	77.3%	22.7%
NHS in Cornwall (Oct 17)	80%	20%

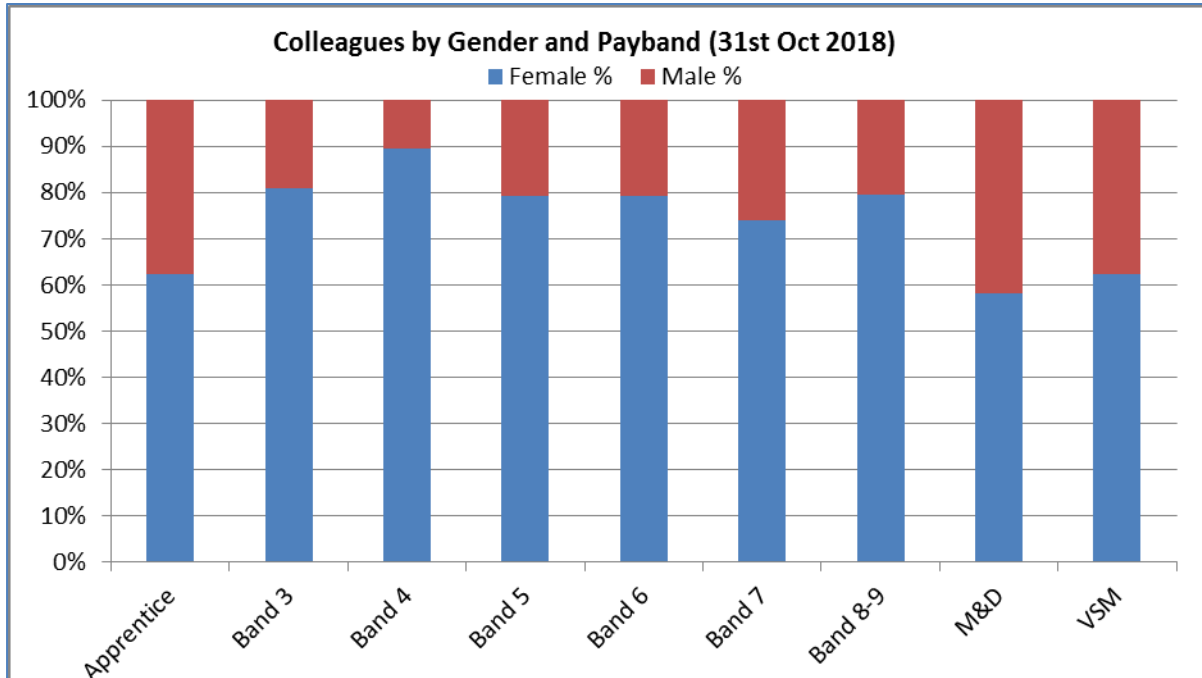
The table above shows that the NHS Kernow gender profile is consistent with that of the wider NHS. However it is different to the proportion of working age females in Cornwall (58.3 percent<sup>4</sup>) and the proportion of economically active females in Cornwall (71.1 percent).

Figure six below illustrates that, in general, there is a representative balance between gender breakdown across the pay bands compared to the overall gender split in the organisation (78 percent female, 22 percent male).

<sup>3</sup> NHS Digital: iView NHS Workforce staff in post by gender Oct 2017 data (Jan 18)

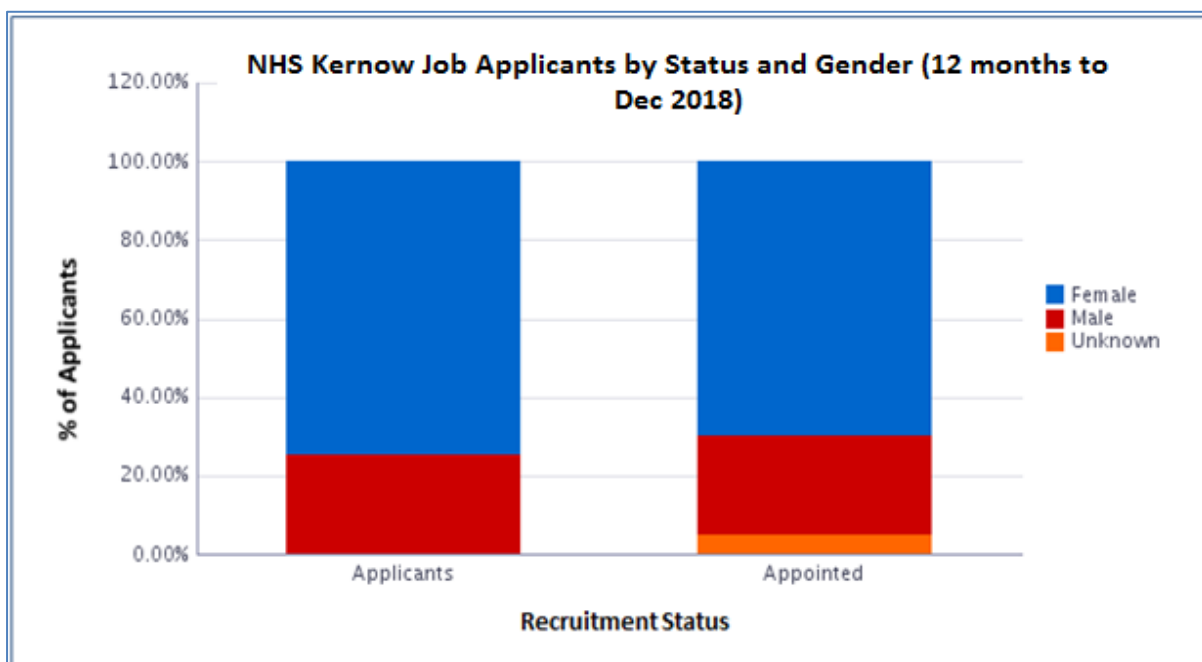
<sup>4</sup> Office of National Statistics, 2011 Census, February 2013

**Figure 6: NHS Kernow colleague by gender and pay band (October 2018)**



The chart in figure seven illustrates that the proportion of male and female applicants remains consistent through the recruitment process. These proportions are also consistent with the current NHS Kernow (and wider NHS) colleague profiles.

**Figure 7: NHS Kernow recruitment status by gender (12 months to December 2018)**





## Gender pay gap analysis

Employers with more than 250 members of staff have a duty to analyse and publish a report on their gender pay gap. NHS Kernow completed its first analysis which was based on March 2018 information.

The gender pay gap shows the difference between the average earnings of men and women which is expressed as a percentage of men's earnings. The full report is available on our website [here](#).

The gender pay gap is reported as an average on both a mean (average) and median (mid-point on a distribution) basis. Our data shows:

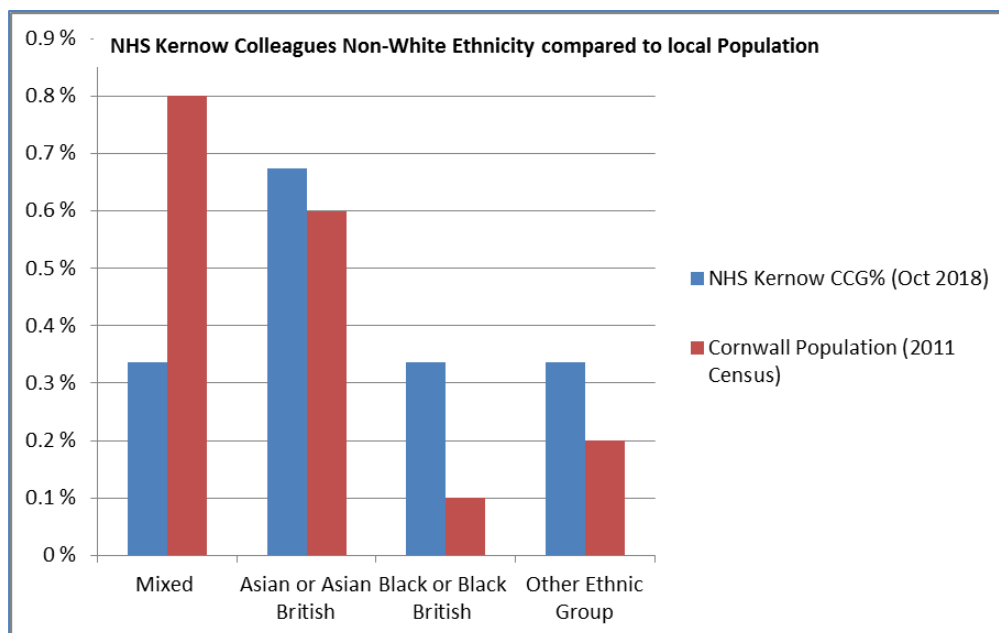
- We employ considerably more females than males – 78 percent of our workforce is female.
- Our mean gender pay gap is 25.3 percent which is a larger gap than the national gender pay gap in 2016/17 of 18.1 percent.
- Our median gender pay gap is 9.4 percent.
- Members of staff do not receive bonuses.

Further work on the gender pay gap will be undertaken to better understand the differences.

## Ethnicity

1.6 percent of the NHS Kernow workforce are from non-white ethnic groups (according to colleagues self-reporting their ethnicity), compared with 2.5 percent of the NHS workforce in Cornwall and the Isles of Scilly and 1.7 percent of the Cornwall and Isles of Scilly population.

**Figure 8: NHS Kernow colleagues by non-white ethnic group (October 2018)**



**Figure 9: NHS staff and population ethnicity comparison**

Colleague/population group	% white ethnic groups	% non-white ethnic groups
<b>NHS Kernow</b>	<b>98.4%</b>	<b>1.6%</b>
NHS in Cornwall <sup>5</sup>	91.8%	2.5%
Cornwall and Isles of Scilly population <sup>6</sup>	98.3%	1.7%

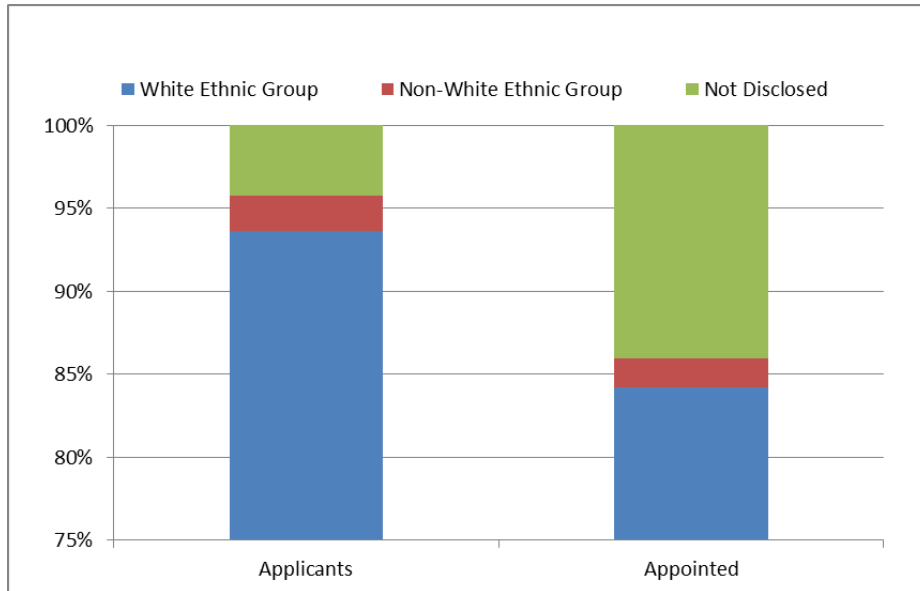
The proportion of colleagues from 'white' ethnic groups is higher within NHS Kernow than the wider NHS in Cornwall and Isles of Scilly, however there are higher numbers of colleagues (5.6 percent) in the wider NHS who have chosen not to disclose.

Figure 10 shows the proportion of applicants for NHS Kernow vacancies by recruitment status and ethnicity.

<sup>5</sup> NHS Digital: iView NHS Workforce staff by ethnicity Oct 2017 data (Jan 18)

<sup>6</sup> Office of National Statistics, 2011 Census, February 2013

**Figure 10: NHS Kernow recruitment status by ethnicity (12 months to December 2018)**

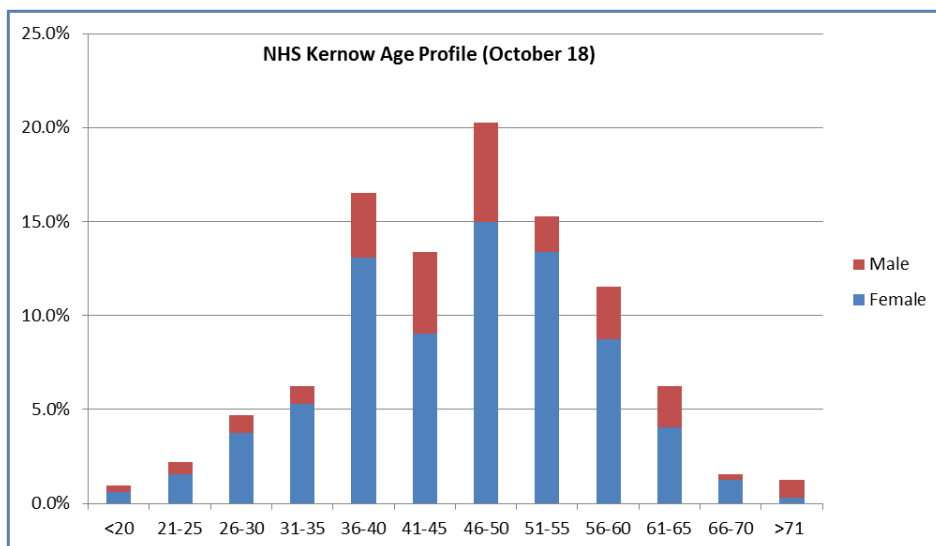


The proportion of applicants from non-white ethnic groups (2.13 percent) is higher than the proportion of non-white people living in Cornwall (1.8 percent). However the proportion appointed is slightly lower (1.75 percent).

## Age

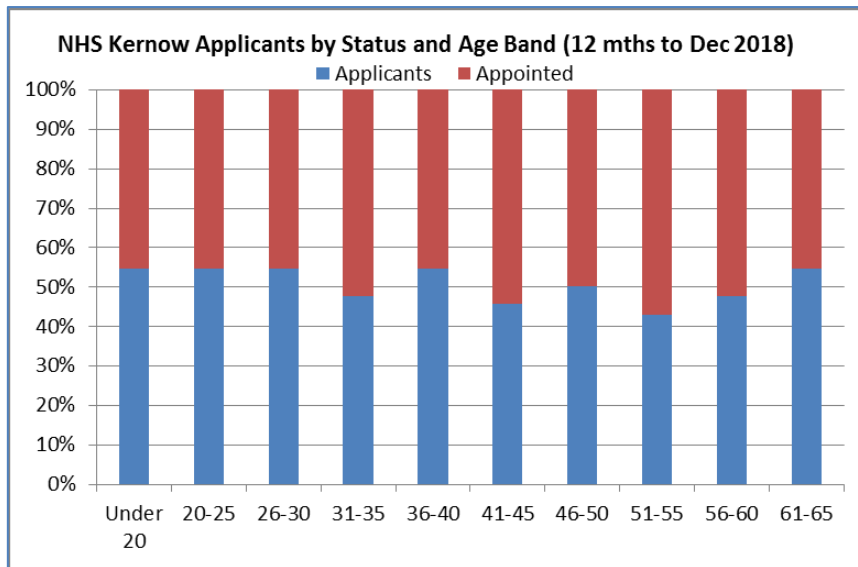
The chart in Figure 11 illustrates the age profile of colleagues within NHS Kernow by gender, with a consistent gender split across most age bands.

**Figure 11: NHS Kernow colleagues by age band (October 2018)**



The chart below in figure 12 shows that there is consistency across most age groups in relation to the proportion of job applicants at each stage of recruitment.

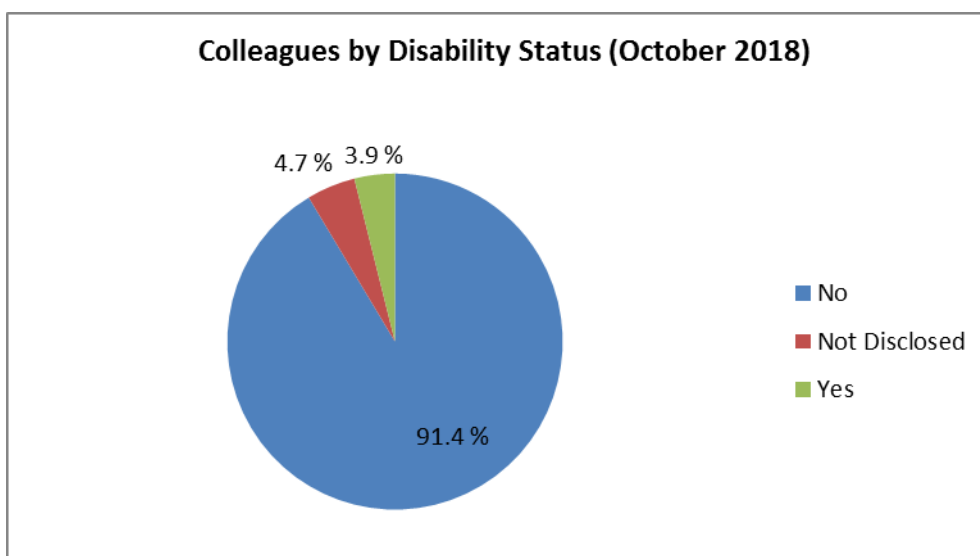
**Figure 12: NHS Kernow recruitment by status and age band (12 months to December 2018)**



## Disability

3.9 percent of the NHS Kernow workforce have declared themselves as having a disability. 4.7 percent of colleagues have chosen not to disclose whether they have a disability or not.

**Figure 13: NHS Kernow colleagues by disability status (October 2018)**



When compared with the wider NHS workforce the proportion of disabled NHS Kernow colleagues (as self-reported) is comparable. It is difficult to make comparisons with the local and national population due to the classification of disabled under the census definition. However, 10 percent 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'.

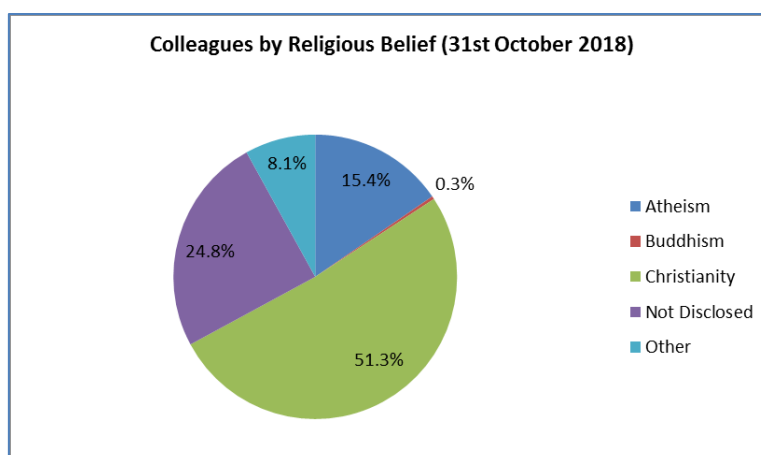
**Figure 14: NHS colleague and population disability comparison<sup>7</sup>**

Colleague/population group	% disabled	Comment
<b>NHS Kernow</b>	<b>3.9%</b>	
NHS in Cornwall <sup>78</sup>	3.8%	
NHS in England and Wales <sup>88</sup>	2.7%	
Cornwall and Isles of Scilly population <sup>9</sup>	10%	Census category defines anyone who has a long-term health problem or disability that limits their day to day activity a lot

## Religious belief

Over half of the NHS Kernow workforce (51.34 percent) have chosen Christianity as their religious belief. This is a higher proportion to the overall NHS workforce in Cornwall (46 percent) and in England and Wales (42 percent) and not dissimilar to the proportion of the Cornish population who state Christianity as their religious belief (60 percent).

**Figure 15: NHS Kernow colleagues by religious belief (October 2018)**



<sup>7</sup> Please note: Direct like for like comparison of disability figures is not possible with the ONS figures

<sup>8</sup> NHS Digital: iView NHS Workforce staff by disability status Oct 2017 data (Jan 18)

<sup>9</sup> Office of National Statistics, 2011 Census, February 2013

25 percent of NHS Kernow colleagues have not disclosed their religious belief (including those classified as ‘unknown’. Although higher than the population of Cornwall who did not disclose (8.5 percent), it is lower than the Cornwall NHS (32 percent) and England and Wales overall NHS proportion of non-disclosures (39 percent).

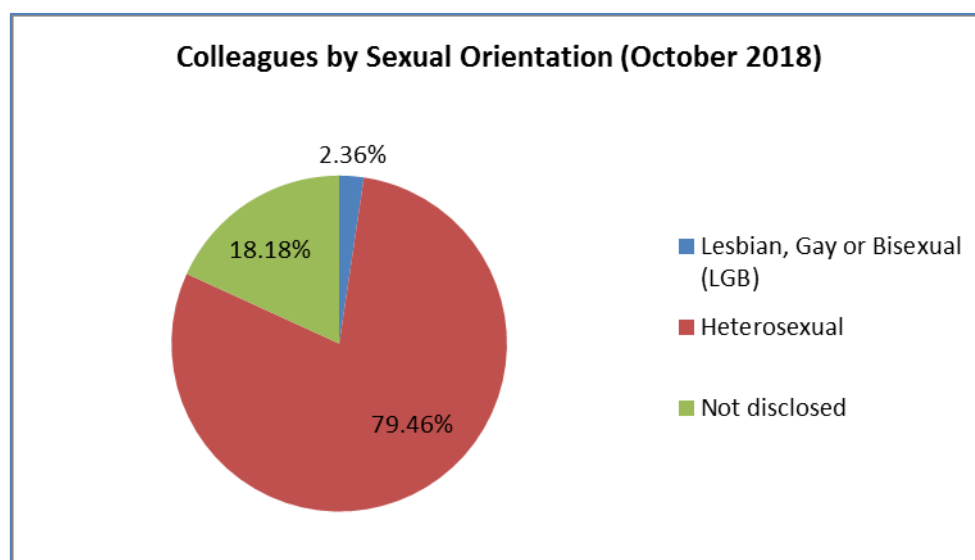
**Figure 16: NHS colleague and population religious belief comparison**

Colleague/population group	Majority religion	Non-disclosure
<b>NHS Kernow</b>	<b>51% Christianity</b>	<b>25%</b>
Cornwall and the Isles of Scilly population <sup>10</sup>	60% Christianity	8.5%
NHS in England and Wales <sup>11</sup>	41% Christianity	39%
NHS in Cornwall <sup>12</sup>	46% Christianity	32%

## Sexual orientation

Four fifths of the NHS Kernow workforce (80 percent) declared themselves as being heterosexual, with 18 percent not wishing to declare their sexual orientation.

**Figure 17: NHS Kernow colleagues by sexual orientation (October 2018)**



2.36 percent of the workforce stated that they were lesbian, gay or bisexual (LGB). There is currently no accurate data on the number of lesbian, gay, or bisexual people

<sup>10</sup> Office of National Statistics, 2011 Census, February 2013

<sup>11</sup> NHS Digital: iView NHS Workforce staff by religious belief Oct 17 data (Jan 18)

<sup>12</sup> NHS Digital: iView NHS Workforce staff by religious belief Oct 17 data (Jan 18)

in England or Cornwall to make a robust comparison with the workforce. However, the government estimates that between five and seven percent of the population are gay, lesbian or bisexual (DTI, 2004).

When compared to the total NHS workforce in Cornwall and the Isles of Scilly, the profile is comparable, as illustrated in the table in Figure 18.

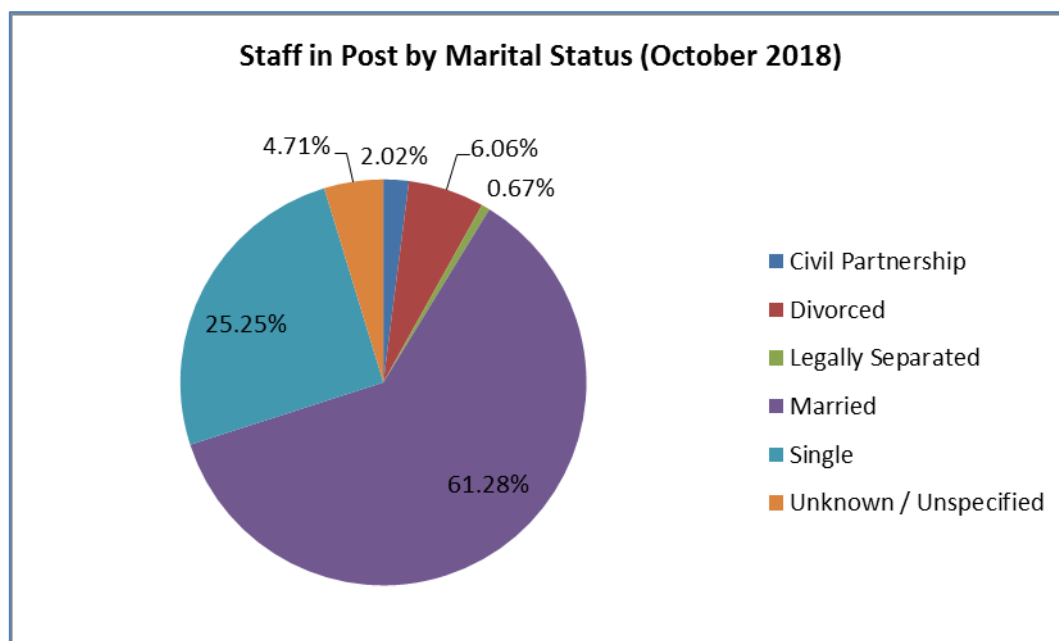
**Figure 18: NHS colleagues sexual orientation comparison**

Colleague/population group	Majority sexual orientation	Lesbian, gay, bisexual (LGB)	Non-disclosure
<b>NHS Kernow</b>	<b>80% heterosexual</b>	<b>2.36%</b>	<b>18.18%</b>
NHS in England and Wales <sup>13</sup>	65% heterosexual	1.7%	33.5%
NHS in Cornwall <sup>14</sup>	75% heterosexual	1.4%	24%

## Marital status

The chart below illustrates the marital status of NHS Kernow colleagues.

**Figure 19: NHS Kernow colleagues by marital status (October 2018)**



The proportion of colleagues who have declared their marital status is not dissimilar to the marital status proportions of people in the Cornwall and the Isles of Scilly according to the 2011 census.<sup>15</sup>

<sup>13</sup> NHS Digital: iView NHS Workforce staff by sexual orientation Oct 2017 data (Jan 18)

<sup>14</sup> NHS Digital: iView NHS Workforce staff by sexual orientation Oct 2017 data (Jan 18)

## **Maternity**

As at 31 October 2018, six 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 (on-line and face to face). 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, including personal success and motivational leadership, which have an emphasis on better understanding of individual differences. Dignity at work sessions have also been offered to colleagues.

## **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**

The workforce data in this paper is broadly comparable to previous years' data. NHS Kernow colleagues information has been examined with regards protected characteristics. No areas of concern have been identified.

### **Colleagues survey: staff perception of equality and diversity**

The equality and diversity staff survey has been run on a number of occasions. The numbers of responses received is reflected in the below table:

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<sup>15</sup> Census data 2011

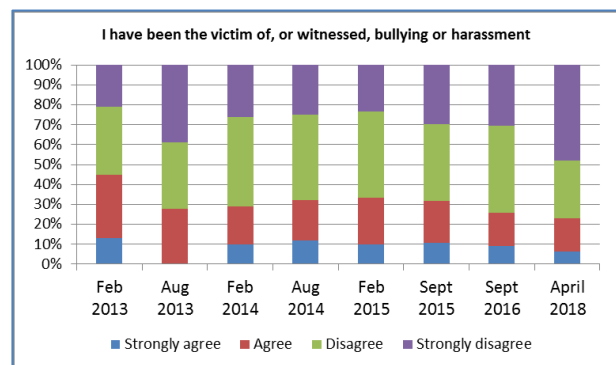
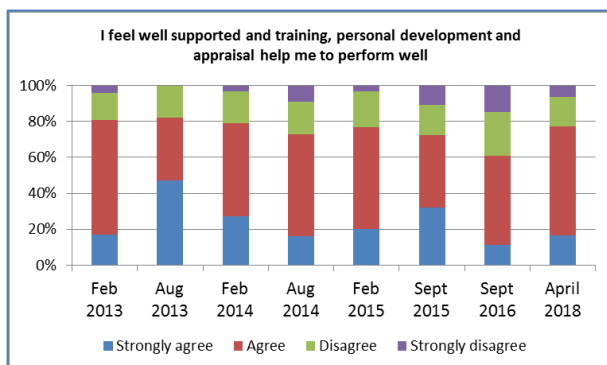
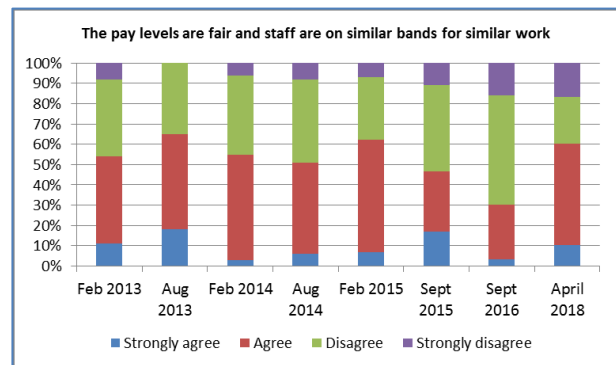
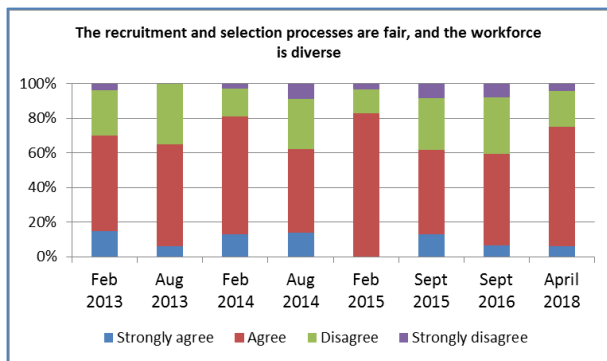


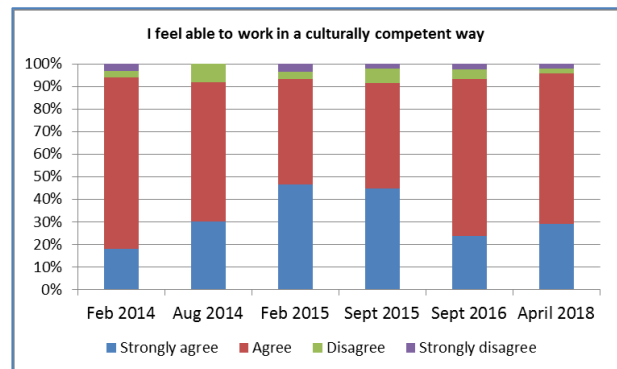
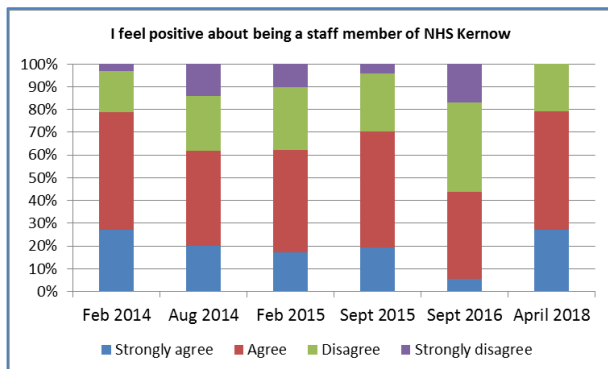
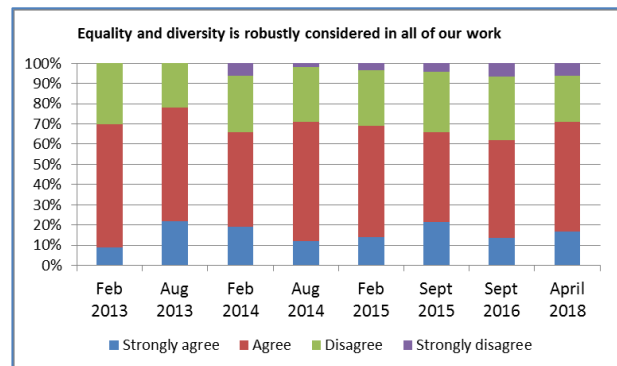
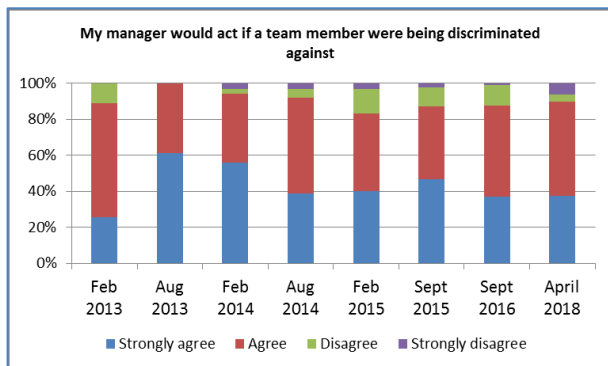
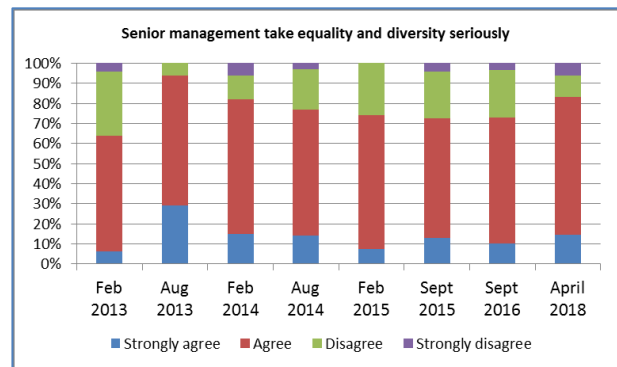
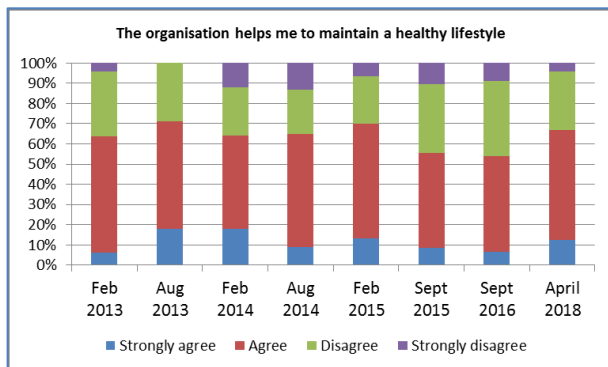
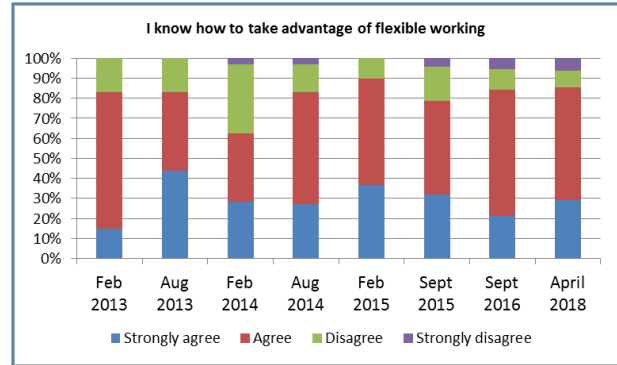
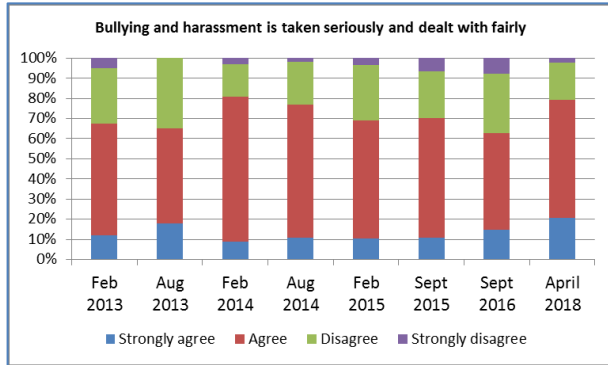
Date of survey	Number of responses
February 2013*	47
August 2013	18
February 2014	33
August 2014	66
February 2015	30
September 2015	47
September 2016	89
April 2018	48

\*This relates to colleagues in the Primary Care Trust, prior to the transition to the Clinical Commissioning Group.

The April 2018 survey results demonstrate a significant improvement against 11 of the 12 questions, with responses similar to those pre-dating 2016. The twelfth question relates to working in a culturally competent way and the responses to this have been high throughout the five year period.

The questions in the colleagues survey relate to the outcomes in the Equality Delivery System 2:





As can be seen from the above, the April 2018 survey results rectify the downward trend in perceptions evident in September 2015 and 2016 to several questions. In particular:

- The pay levels are fair and staff are on similar bands for similar work.
- I feel well supported and training, personal development and appraisal help me to perform well.
- I have been the victim of, or witnessed, bullying and harassment.
- Bullying and harassment is taken seriously and dealt with fairly.
- The organisation helps me to maintain a healthy lifestyle.
- I feel positive about being a staff member of NHS Kernow.

Colleagues also remain aware of how to take advantage of the flexible working options NHS Kernow offers. The proportion of colleagues completing the survey who perceived pay levels are fair and staff are on similar bands for similar work has doubled from 30 percent to 60 percent. This does mean, however, that for 40 percent of colleagues, equality of pay remains an issue.

These results are consistent with the improved feedback contained in the national staff survey undertaken in October 2017. All survey results have been shared with NHS Kernow's Workforce Committee. The results from the national staff survey undertaken in October 2018 are not available at the time of writing.

## **How we support our workforce**

We continue to support colleagues from all protected groups, and the work we have done to do this can be seen in the EDS2 analysis for the goal 'A representative and well supported workforce'.

Feedback supplied by colleagues to the equality and diversity surveys informed the last reconfiguration of director's portfolio's which aimed to ensure colleagues were aligned to meet the business needs of the organisation. By ensuring that colleague feedback is known and can be taken into account, this will help to inform any other workforce reviews.

All colleagues are encouraged to take part in the NHS Kernow Staff Voice promotions. Actions taken include:

- Developed health and wellbeing strategy and plan.
- NHS Kernow is a Mindful employer.
- Signed up to the Charter for Employers who are positive about mental health; committing to showing a positive and enabling attitude to employees and job applicants with mental health issues.
- Secured access to Headspace mindfulness app for all employees free of charge.
- Secured a staff room at the largest site which facilitates colleagues to take their lunch breaks.

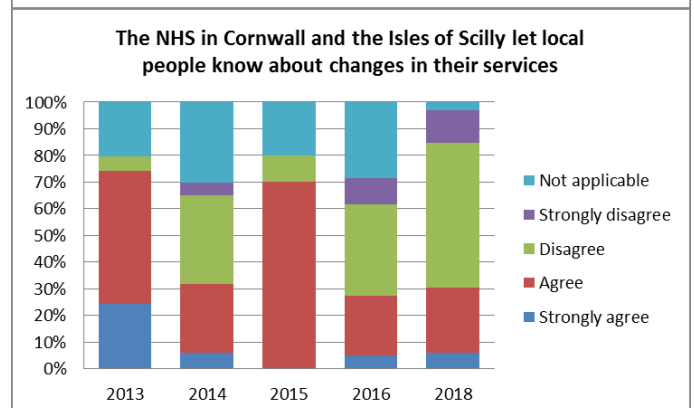
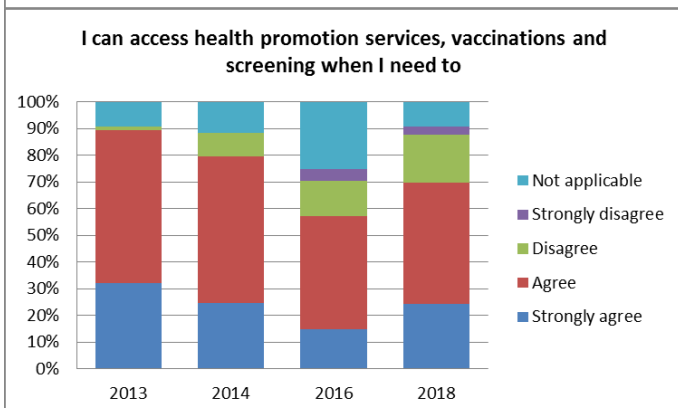
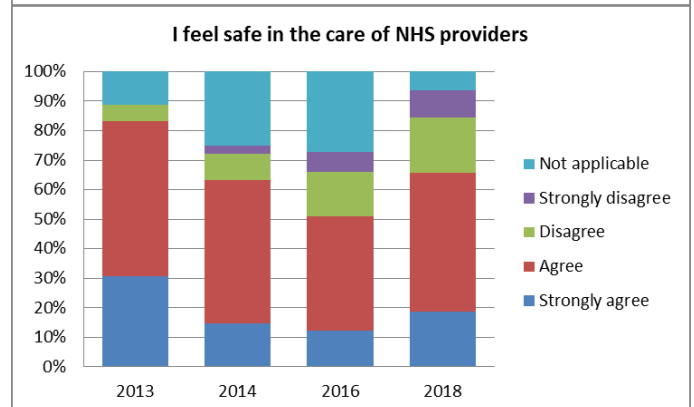
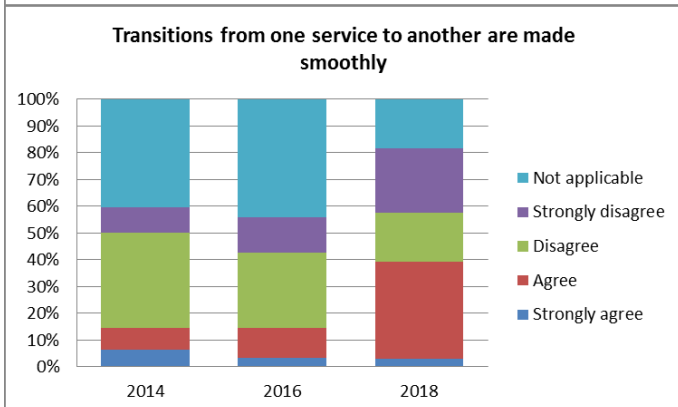
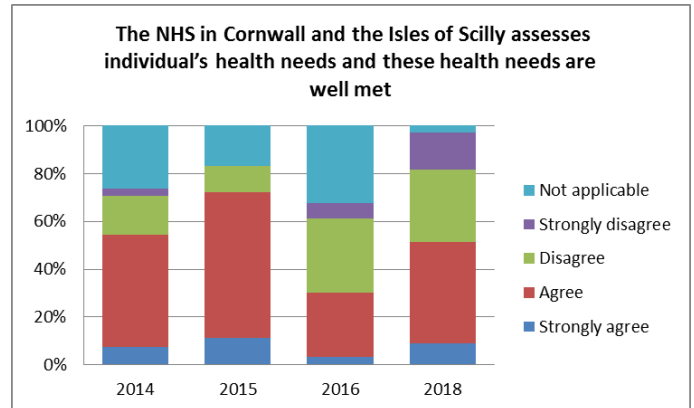
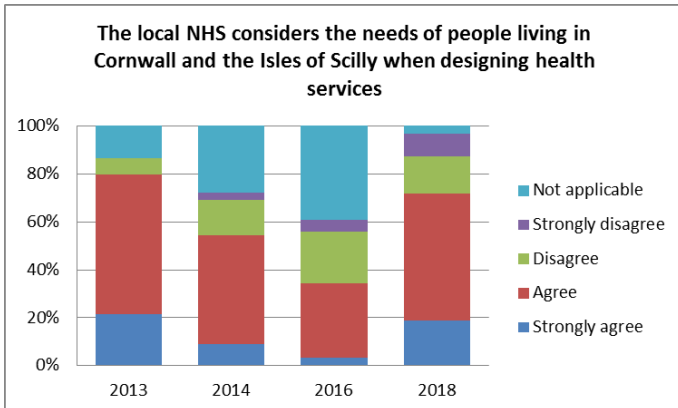
- Healthy eating leaflets promoted across the different work sites.
- Developed a number of walking charts which promote the benefits of colleagues undertaking physical activity within their legally required breaks.
- Promoted 'park runs' in various locations across Cornwall.
- Promoted the availability of Cornish Way cycle route maps to colleagues to encourage cycling to work.
- Provided information about staying safe around the sea.
- Regular director's briefings across all main sites.
- Health and safety committee established.
- Time off policy promotes two days paid volunteering leave, now available pro-rata to all colleagues.
- Acceptable behaviour policy established which seeks to protect colleagues from being bullied or intimidated particularly from service users or the public and confirms the actions this organisation will take.
- Lone worker policy and stress in the workplace policy finalised and promoted to colleagues.
- Homeworking policy and sickness absence and well-being both had significant reviews.
- Lunch and learn session provided on the NHS Accessible Information Standard and an organisational self-assessment tool developed.
- Celebrated NHS-70, with celebrations taking place across the bases.
- Signed up to Stonewall's diversity champions programme.
- Promoted training, leadership, coaching and mentoring and personal success programmes courses to colleagues.
- In 2018, colleagues have taken part in wear it pink day, food bank collections, nurses day, raising money for Women's Centre Cornwall, Litterless Cornwall, stoptober, go sober for October, world mental health day, get active workplace challenge, Macmillan coffee morning, and NHS organ donor sign-up.
- Healthy weight checks available in two sites. Diabetes awareness health checks sessions held to raise awareness during diabetes week. Raising awareness of sugar consumption.
- ACAS ran dignity at work workshops which specifically aimed to increase awareness around diversity and discrimination.
- Resilience and wellbeing at work sessions available for colleagues.
- Supporting mental health for line managers workshops
- Colleagues having the opportunity to decide how to spend the staff lottery money allocation.
- Relaunched 'colleague of the quarter' colleague awards.
- Mental health first aiders available to support colleagues.
- Suicide prevention literature and access to psychological therapies available for all colleagues. World suicide prevention day promoted.
- Renewed the workplace sign up to the positive about disability two ticks symbol, which has been converted to the Disability Confident Scheme.
- Additional colleagues were trained in 2018 to provide first aid coverage.

Future plans include:

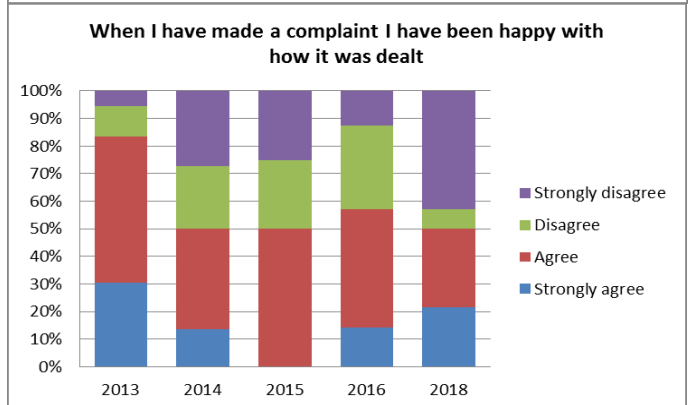
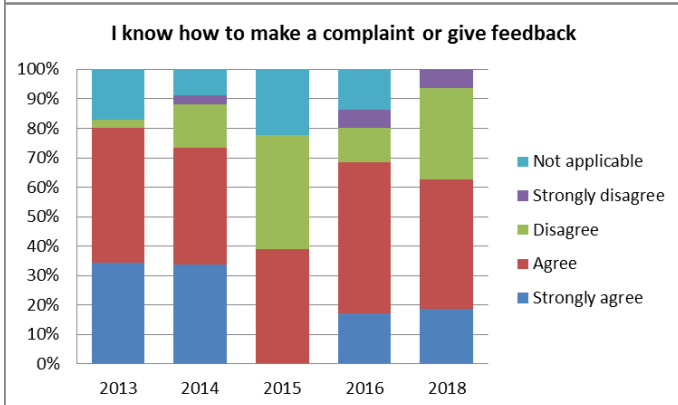
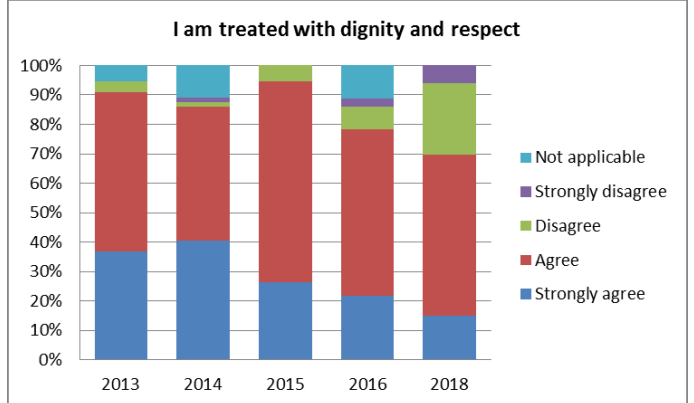
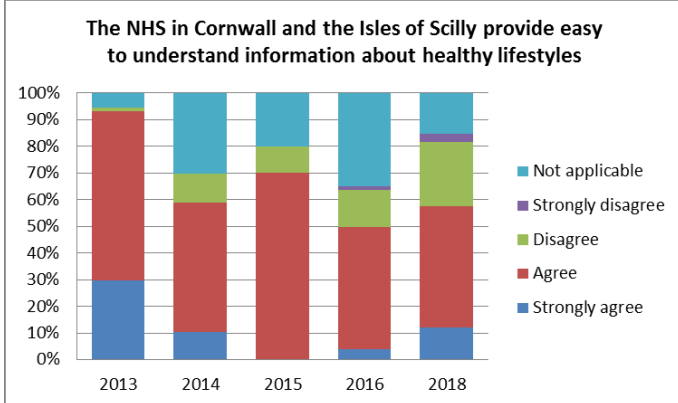
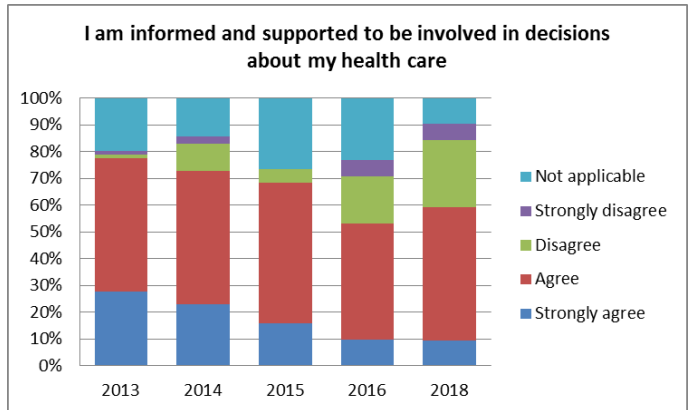
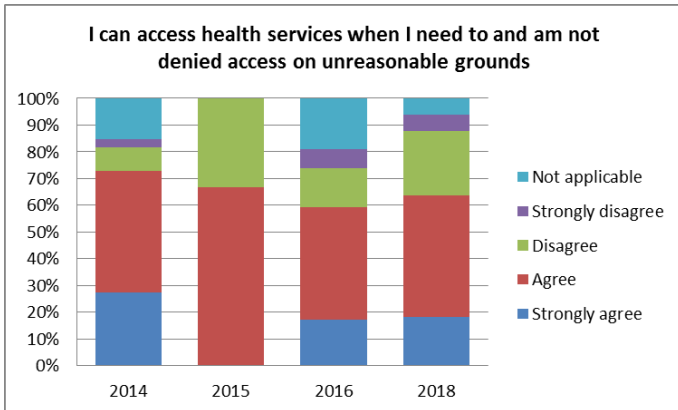
- Further analysis of the gender pay gap differential.
- Train more mental health first aiders to support colleagues and promote this service further.
- Working with Stonewall to become diversity champions.
- Continue to run resilience workshops on an ongoing basis.
- Follow-up session on team and individual resilience within the work context being commissioned.
- Identify and train dignity at work and whistleblowing champions/advisors to support colleagues who may have concerns.
- Videoing 'colleague stories' regarding training experiences, such as mental health for line managers to encourage others to attend.
- Videoing 'colleague stories' regarding their experience of working / relocating to work in NHS Kernow supporting the recruitment of diverse workforce.

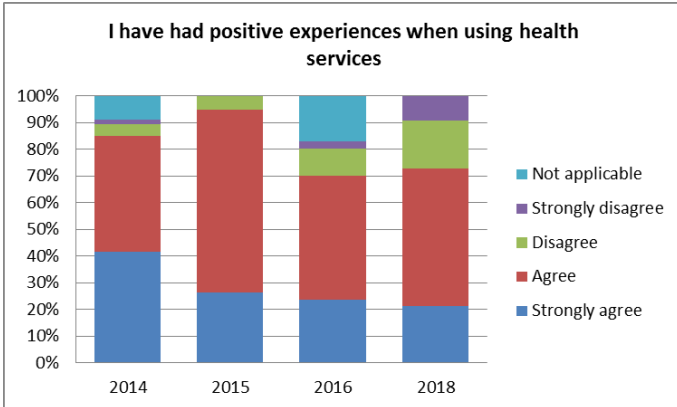
# Appendix 1: Equality Diversity System 2 survey responses

## Better health outcomes



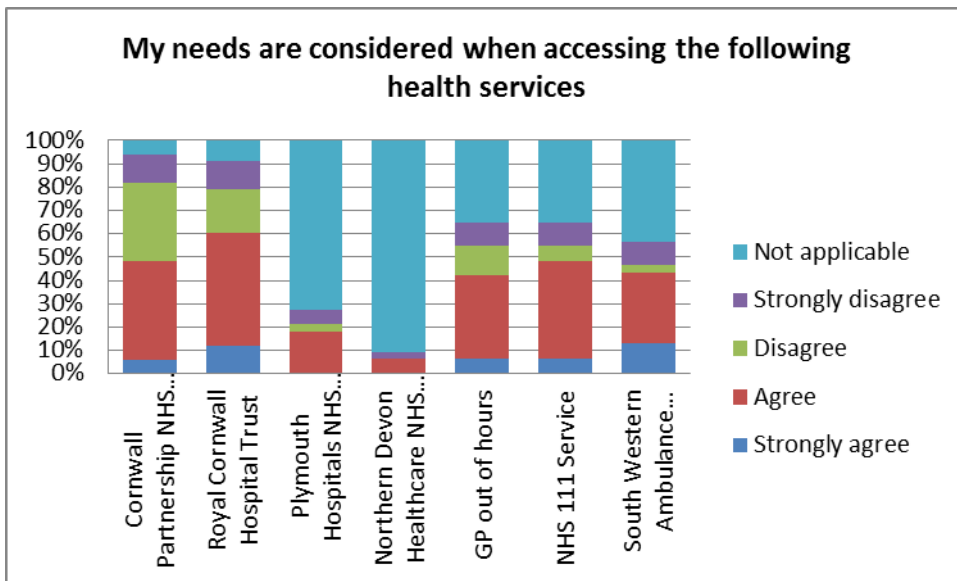
## Improved patient access and experience





Please note: the 'not applicable' option has been removed from the question "When I have made a complaint I have been happy with how it was dealt".

The graph below shows the 2018 responses to the following question.



The equality and diversity characteristics of people who responded to the 2018 surveys are below.

