

Meeting the general equality duty

Title: patient profile

Which of the three aims is this information relevant to?

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

How does this information help us to show we are paying due regard to advancing equality?

By looking at our patient profile by protected characteristic we can look at which groups are accessing our services. It enables us to look at patterns of service uptake and understand our patient flows. This can help us identify and understand any potential inequalities of access. A heightened awareness can help us to take a more proactive approach in ensuring equity of access across all the protected characteristic groups.

There is a very positive consistent decrease in the levels of non attendance for outpatient appointments across the Trust, we term these as “do not attends” or DNAs. In women and children’s services we have also seen a positive decrease in DNAs of BME women. This is further explained in the information that follows. Furthermore, there has been a change in the ratio of DNAs between male to female, over this past year they have become much more consistent whereas previously female DNAs were higher.

Any other comments / actions

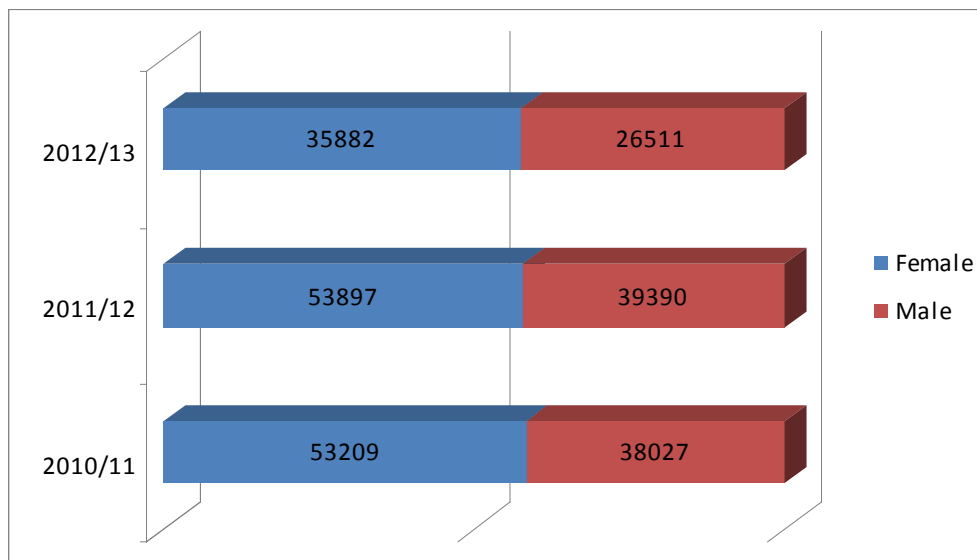
N/A

Patient Profile – Buckinghamshire Healthcare NHS Trust

Data provided as at 05/12/12 (for 2012/13)

Section One – Inpatients (incl day cases)

Inpatients	2010/11	2011/12	2012/13	Totals
Female	53209	53897	35882	142988
Male	38027	39390	26511	103928
Total	91236	93287	62393	246916



We currently provide acute and community services across Buckinghamshire and beyond. The overall decrease of inpatient numbers should not cause concern as it is in line with national drivers to move care closer to home and treat more people in their local community. This also reflects the advances in treatments and the way that care can be delivered which is enabling this transition to be achieved. Whilst there will always be a need for inpatient care for those who are acutely unwell, the overall reduction in inpatient numbers is expected as a result of this national shift.

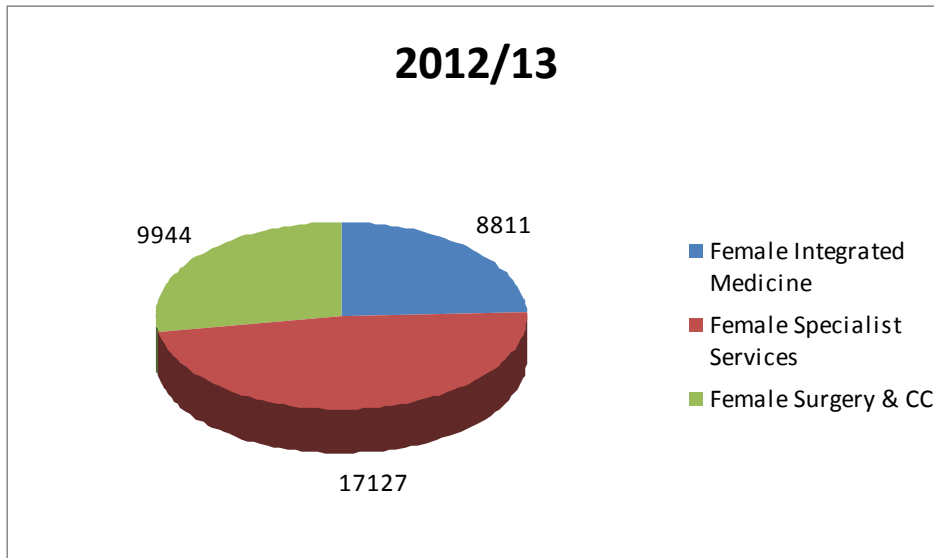
“Better Healthcare in Buckinghamshire” was a programme of changes implemented in Autumn 2012. The programme aimed to review the healthcare needs of the local population whilst, maximising the best use of resources and facilities to deliver improved patient outcomes. Plans also had to take account of the current and future growth in population that we are seeing. Some of the changes will have impacted on the inpatient numbers reflected here due to changing pathways, as was described in the public consultation process. The

impact of this will have been to reduce emergency admissions from November 2012. More information is available on this service change via our website.

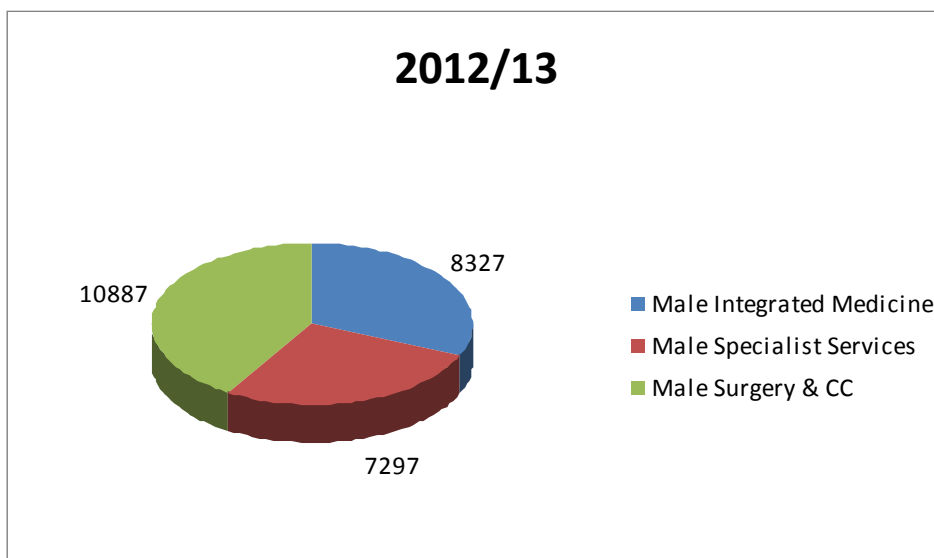
A risk impact assessment, which included an equality impact assessment, was undertaken and is included as part of this collection of information.

Inpatients by gender

Female by division



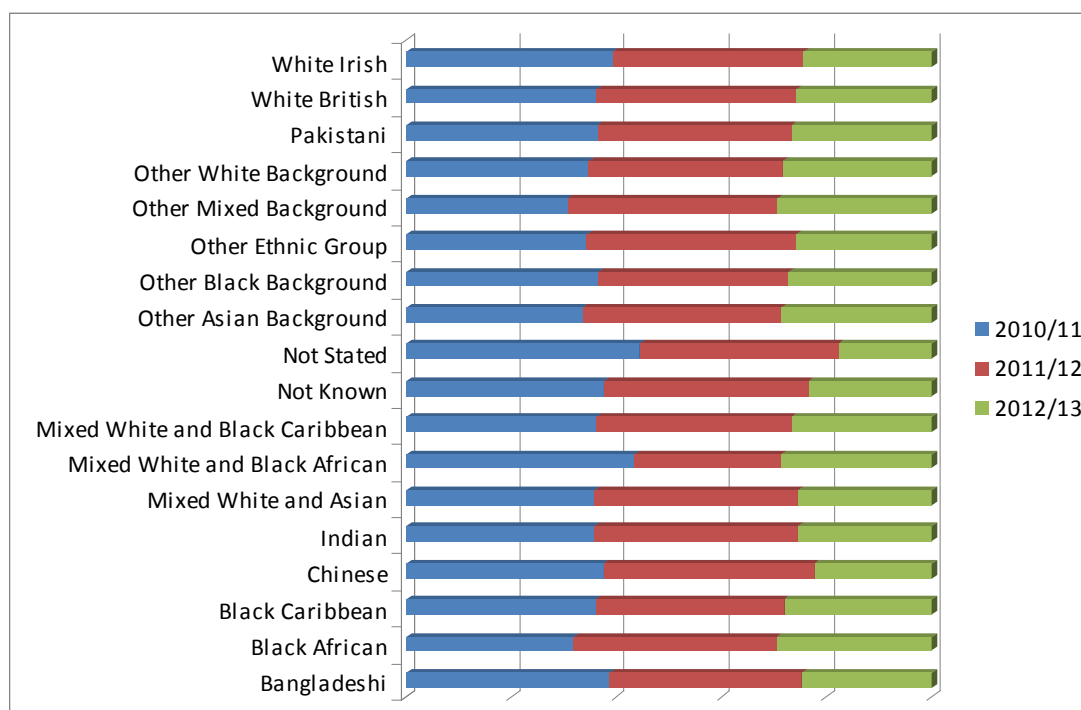
Male by division



Inpatients by ethnic group

Whilst the numbers of inpatients by ethnic group appear to have markedly fallen in comparison to the previous two years, this must be interpreted in light of the overall decrease in the number of inpatients for 2012/13. No one group appears to be disproportionately affected from these figures.

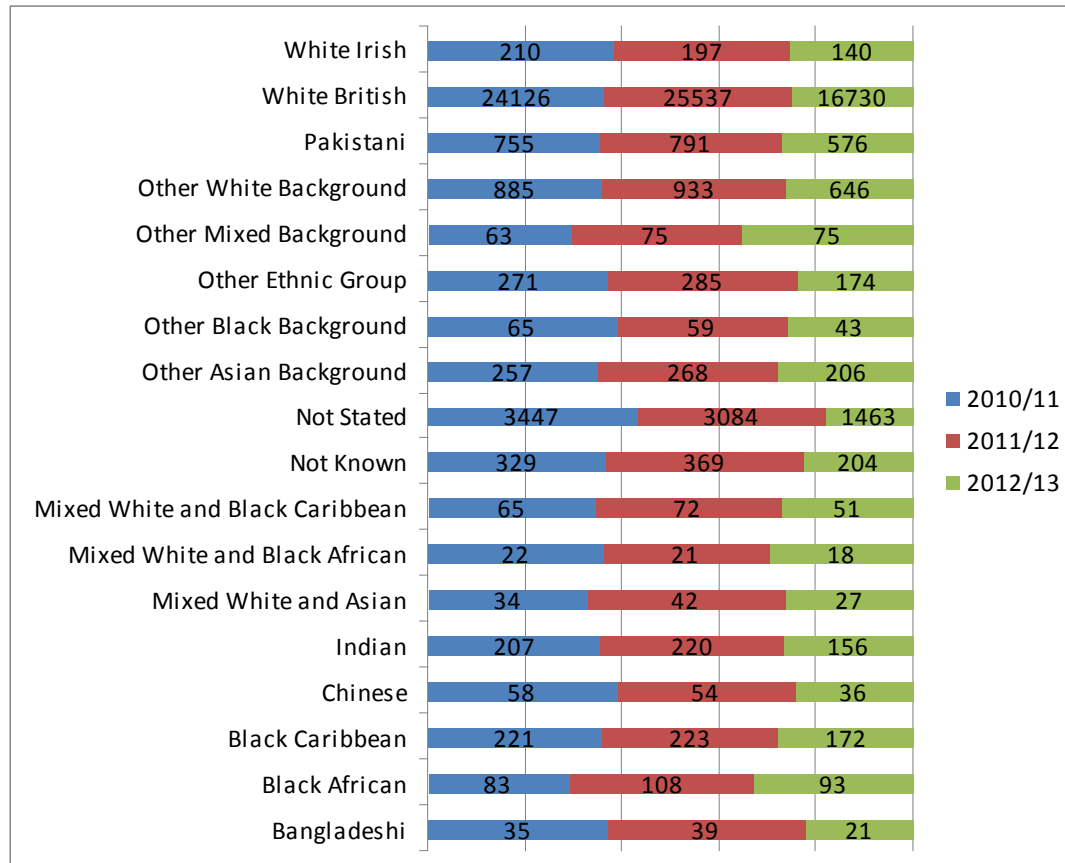
	2010/11	2011/12	2012/13	Total
Bangladeshi	147	138	94	379
Black African	400	480	370	1250
Black Caribbean	713	708	557	1978
Chinese	192	205	115	512
Indian	821	883	585	2289
Mixed White and Asian	242	261	171	674
Mixed White and Black African	168	109	111	388
Mixed White and Black Caribbean	380	387	280	1047
Not Known	887	912	553	2352
Not Stated	10270	8711	4106	23087
Other Asian Background	902	1015	775	2692
Other Black Background	182	180	136	498
Other Ethnic Group	782	904	585	2271
Other Mixed Background	358	466	345	1169
Other White Background	3297	3476	2687	9460
Pakistani	4046	4094	2970	11110
White British	66795	69752	47547	184094
White Irish	654	606	406	1666
Grand Total	91236	93287	62393	246916



Inpatients by ethnicity by division

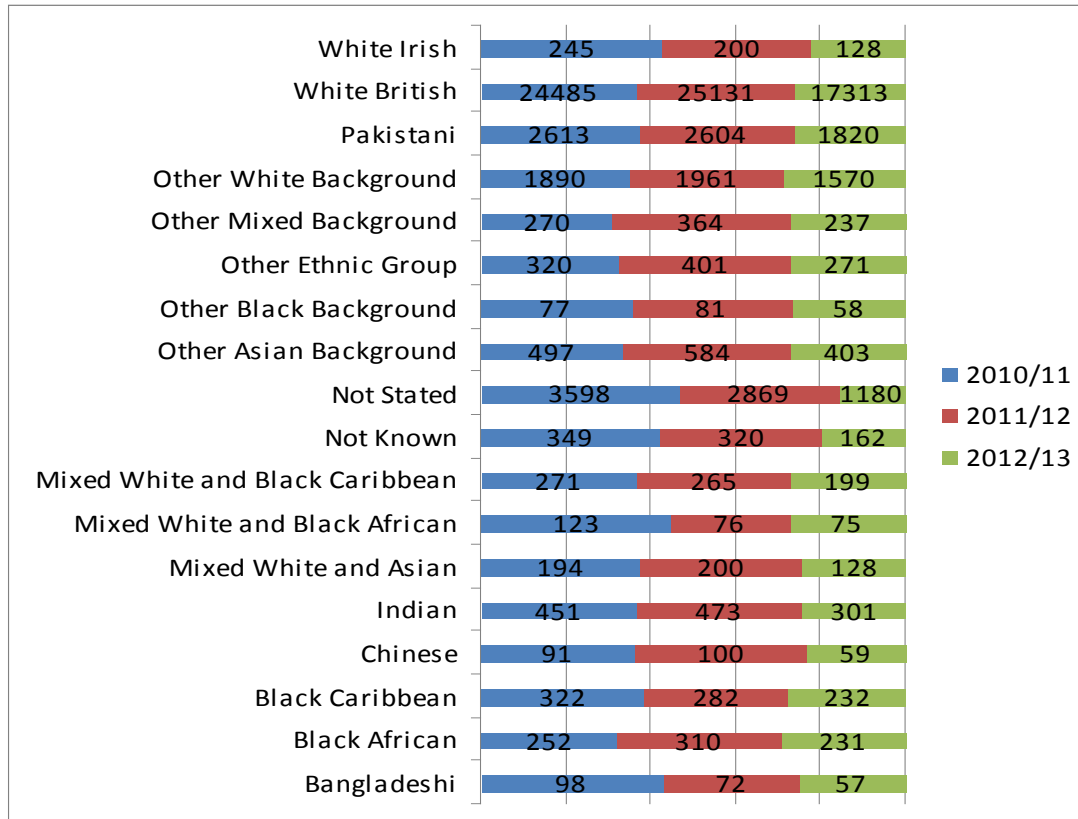
Surgery and Critical Care Division

Inpatients (incl day cases) by ethnic group



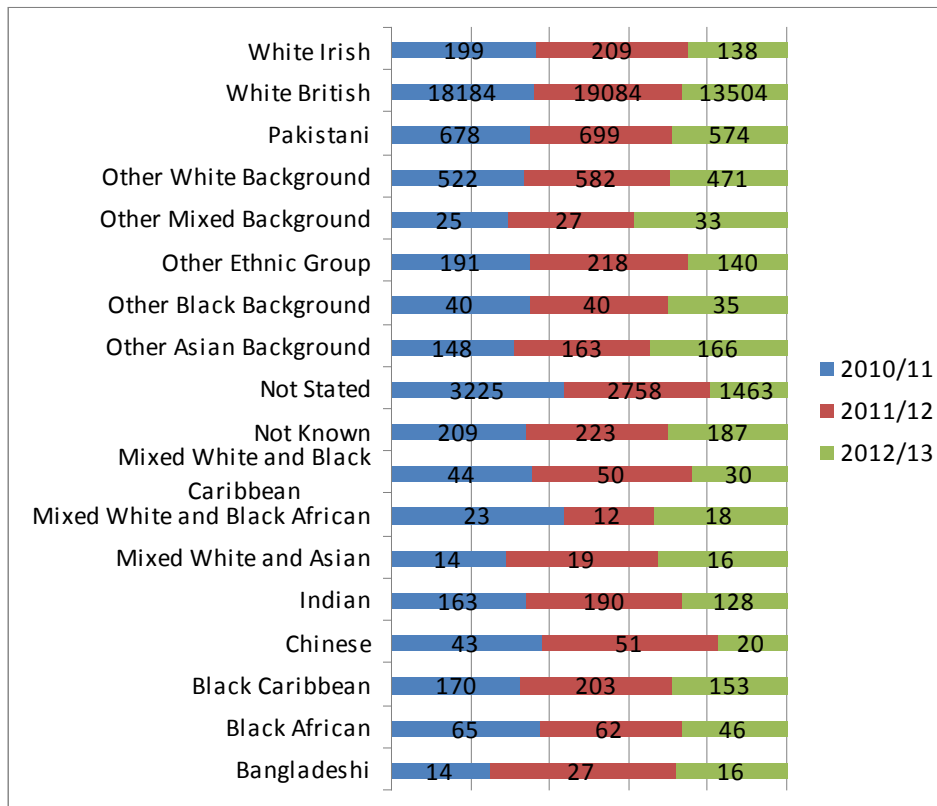
Specialist Services Division

Inpatients (incl day cases) by ethnic group



Integrated Medicine Division

Inpatients (incl day cases) by ethnic group

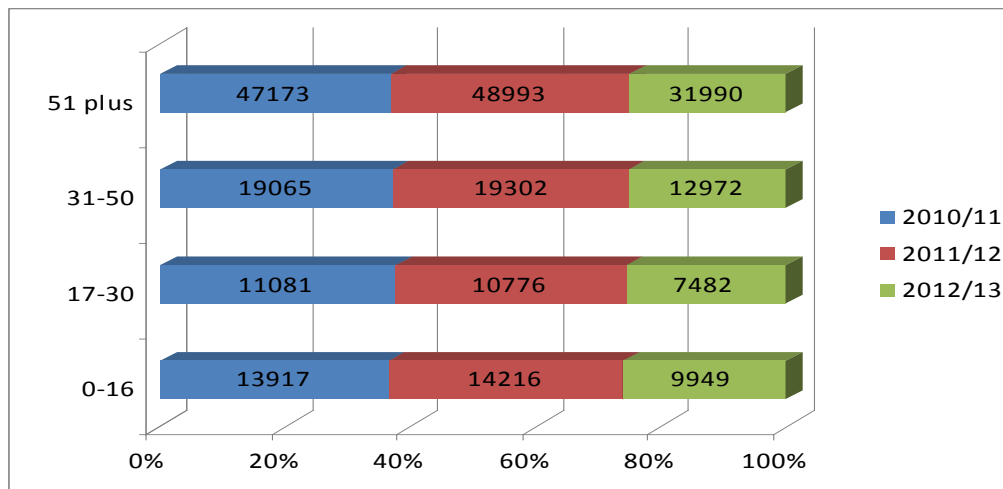


Inpatients by age

Comparative data 3 years

Inpatients (incl day cases) by age	2010/11	2011/12	2012/13	Total
Row Labels				
0-16	13917	14216	9949	38082
17-30	11081	10776	7482	29339
31-50	19065	19302	12972	51339
51 plus	47173	48993	31990	128156
Total	91236	93287	62393	246916

There is a decrease in numbers across all age groups, which is aligned to the decrease in the overall number of inpatients. A more significant decrease is seen in the age group 51 plus. Whilst this is also the largest group in numbers, it is also indicative of some of the changes to patient pathways explained previously. This includes the implementation of services that enable patients to be treated in the community or in their own homes which helps patients avoid an inpatient stay.

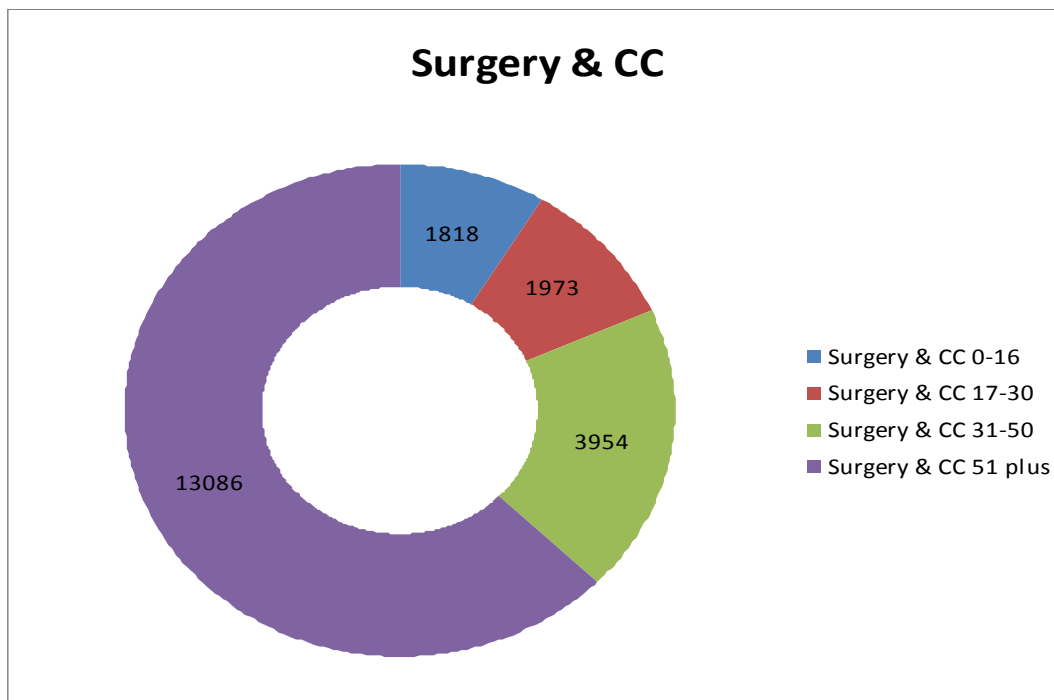


Inpatients by age by division

The information below is a breakdown of age groups per division and the age groups do correspond to expectations of the services within those divisions. As can be seen below, specialist services has a much more even spread across the age groups, with 0-16 and 31-50 being the largest in number. This is consistent with expectations for the range of services provided within this division which includes services such as paediatrics / children and young people, obstetrics and gynaecology, our national spinal injuries centre and many more.

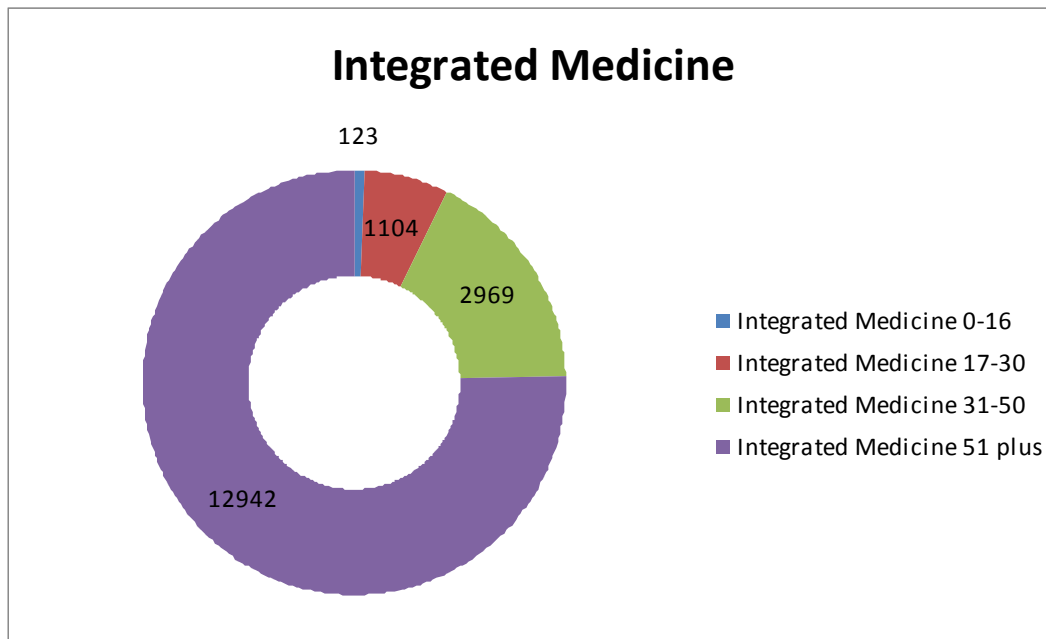
Surgery and Critical Care Division.

Age groups	Sum of Number of Inpatients
Surgery & CC	20831
0-16	1818
17-30	1973
31-50	3954
51 plus	13086
Total	20831



Integrated Medicine Division

Age groups	Sum of Number of Inpatients
Integrated Medicine	17138
0-16	123
17-30	1104
31-50	2969
51 plus	12942
Total	17138



Specialist Services Division

Age groups	Sum of Number of Inpatients
Specialist Services	24424
0-16	8008
17-30	4405
31-50	6049
51 plus	5962
Total	24424



Section Two - Outpatients

“Do not attends” (DNA)

A DNA is defined as a patient who does not arrive for an appointment and does not let us know. This is different to cancellations which are recorded when patients let us know in advance that they cannot attend and many of these appointments can be reallocated to other patients.

The Trust has tried to reduce the number of DNAs over the past year and some of the contributing factors in reducing our DNA rate appear to be showing some marked overall improvements as demonstrated below:

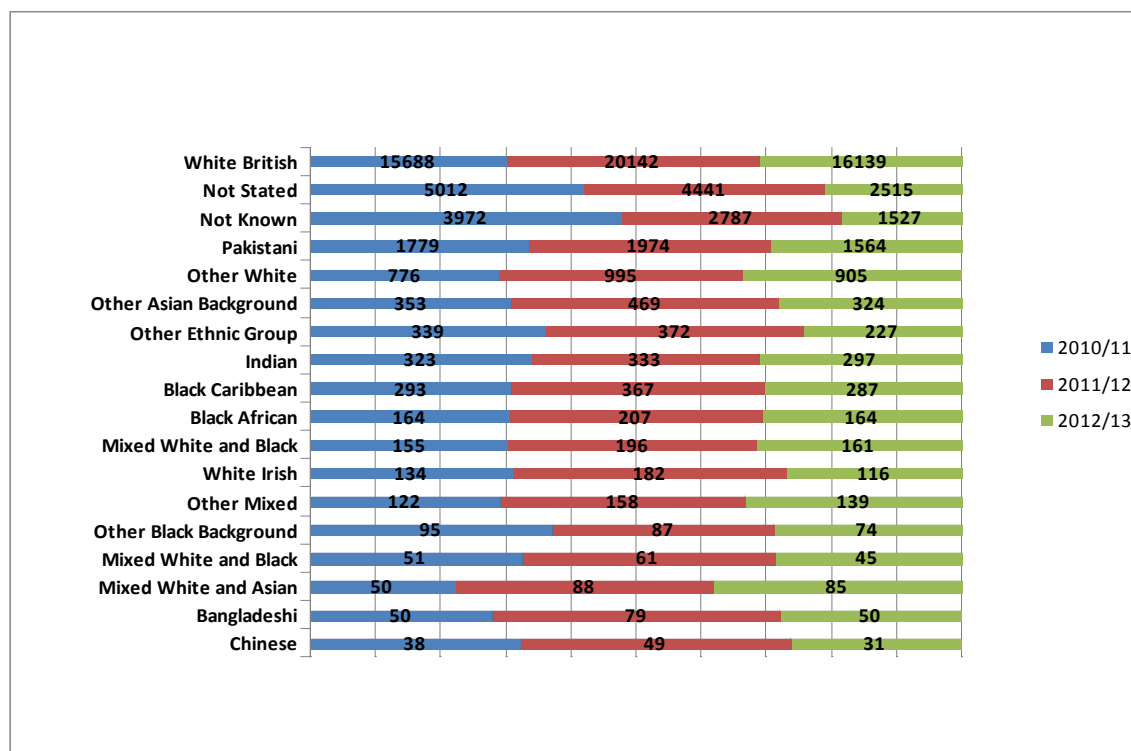
- Some services have implemented a texting service to remind patients of forthcoming appointments.
- The Trust is increasing its use of Choose and Book which enables patients to agree a suitable appointment thereby decreasing the risk of a DNA
- The Trust has implemented further upgrades to our appointment booking system which enables agreeable follow up appointments to be made at the desk before the patient leaves.

Those patients who did not attend their appointment, broken down by ethnic group.

Ethnic Category	2010/11	2011/12	2012/13
Chinese	38	49	31
Bangladeshi	50	79	50
Mixed White and Asian	50	88	85
Mixed White and Black African	51	61	45
Other Black Background	95	87	74
Other Mixed Background	122	158	139
White Irish	134	182	116
Mixed White and Black Caribbean	155	196	161
Black African	164	207	164
Black Caribbean	293	367	287
Indian	323	333	297
Other Ethnic Group	339	372	227
Other Asian Background	353	469	324
Other White Background	776	995	905
Pakistani	1779	1974	1564
Not Known	3972	2787	1527
Not Stated	5012	4441	2515
White British	15688	20142	16139
Grand Total	29394	32987	24650

See graph below - this information should be read in the context of the overall patient profile.

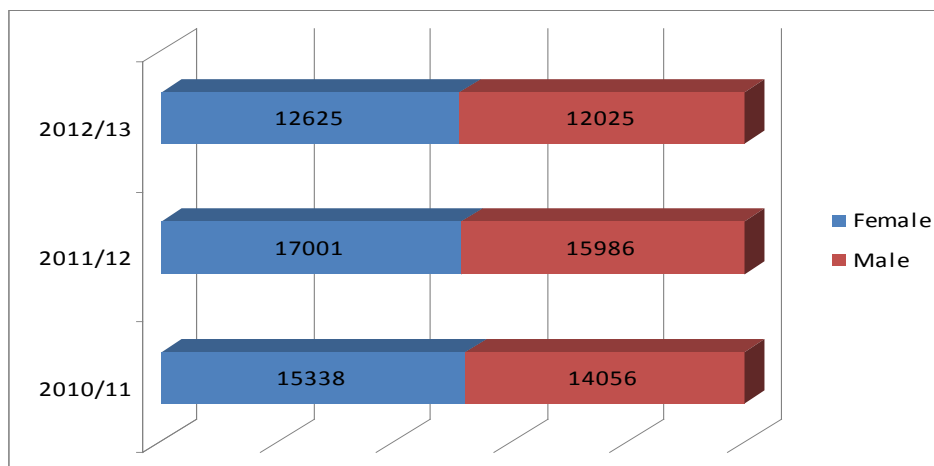
Those outpatients who did not attend their appointments broken down by ethnicity 2012/13 as at the 5th December 2012



Outpatient DNAs by gender

Outpatients who did not attend their appointments broken down by gender, for 2012/2013, as at 5th December 2012. The chart and graph also shows comparative data for 10/11 and 11/12. Interestingly, the ratio of male to female is more consistent for 2012/13 with only 600 being the difference. In both previous years the ratio of female DNA's were higher by more than a 1000.

DNA	2010/11	2011/12	2012/13
Female	15338	17001	12625
Male	14056	15986	12025



DNAs by ethnicity for women and children services.

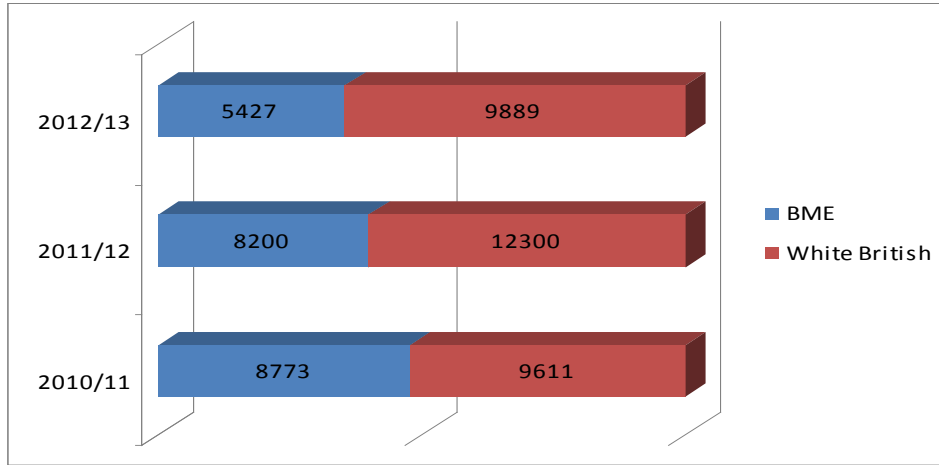
Comparative data across the three years demonstrates a healthy decrease of DNAs across the various protected groups recorded.

In women and childrens services there has been a substantial improvement in the number of BME women failing to attend over the past year i.e. Better rates of attendance and less DNAs. In maternity services which is part of womens and childrens services, they already have DNA guidance which requires pro active action to follow up on any woman who does not attend their appointment. However, further action targeting language needs appears to have made further improvements.

The improved decrease in the DNA rate for BME women is positive and appears to be the result of an initiative to ensure that all pregnant women who need an interpreter have one. This has improved levels of understanding and engagement with their care and our service. This could be a significant contributing factor in this improvement. Language needs include those who may also need british sign language interpreters as a result of a hearing loss.

Importantly, better engagement and attendance means mum and baby are accessing the service appropriately and getting the right level of care. In turn this improves outcomes and safety for all concerned.

DNA	2010/11	2011/12	2012/13
BME	8773	8200	5427
White			
British	9611	12300	9889



Outpatient DNAs by age

Those outpatients who did not attend their appointments broken down by age for 2012/2013, as at the 5th December 2012. The chart and graph also shows comparative data for 10/11 and 11/12.

Age	2010/11	2011/12	2012/13
0-16	5474	6322	4820
17-30	5290	5558	4253
31-50	7820	8614	6322
51+	10810	12493	9255

