

# Publication Report



## **Improving ethnic data collection for equality and diversity monitoring**

**April 2010 – March 2012**

**Publication date – 28<sup>th</sup> August 2012**

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## Introduction

The reduction of health inequalities is a key priority for the Scottish Government. Inequalities related to deprivation are well known, but there are also important health inequalities related to ethnic group and other aspects of the diversity of the Scottish population. Addressing ethnic inequalities in health requires accurate and complete information to target interventions and monitor progress towards reducing inequalities. This publication relates to the quality and completeness of information on ethnicity in hospital discharge and new outpatient appointment data.

## Key points

- For Scotland as a whole there have been substantial improvements in the recording of ethnic group. Over the last two years completeness of recording has increased from just over two-fifths to two-thirds for acute hospital discharges and has risen from just over one-quarter to almost half for new outpatients.
- Despite this improvement, the recording of ethnicity remains relatively low: a valid ethnic group code was recorded in only 67% of acute inpatient and day case records (SMR01) in the quarter ending March 2012 and only 48% of new outpatient appointment records (SMR00).
- In the most recent quarter the highest levels of recording for inpatients and day cases and for new outpatient appointments were in the Golden Jubilee National Hospital (GJNH).
- In the last two years Dumfries and Galloway, Forth Valley, Grampian, Lothian, Orkney, Shetland, Tayside and Western Isles Boards have made substantial improvements in recording in both SMR01 and SMR00 records.
- Figures for some Boards may have been affected by the implementation of the new NHS Patient Management System (PMS). More details are provided in the Background Information section.

## Results and Commentary

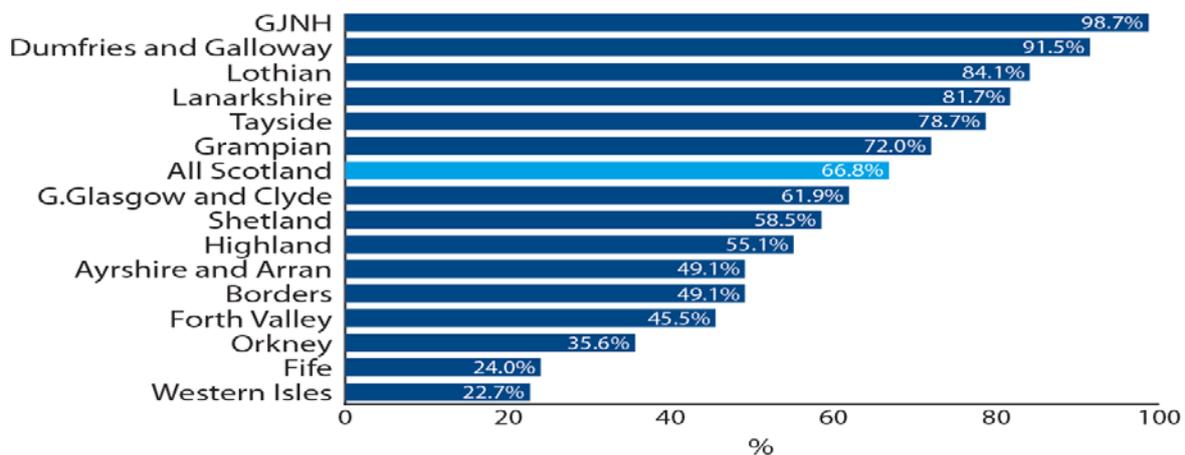
These results are for the period between April 2010 and March 2012 including the last quarter ending 31st March 2012.

### Inpatient and day case discharges

For acute inpatient and day case discharges (SMR01 data) the overall level of completeness for ethnic group recording was 66.8% for NHS Scotland for the quarter ending 31st March 2012 (see Figure 1). The highest levels of recording for this quarter were at the Golden Jubilee National Hospital (98.7%), Dumfries and Galloway (91.5%) and Lothian (84.1%). Lanarkshire (81.7%), Tayside (78.7%) and Grampian (72.0%) were all above the national average.

Completeness levels in most NHS Boards increased from quarter July – September 2011. The implementation of a new patient management system (PMS) has had an impact on SMR01; this may have affected the figures for some Boards where a decrease in the level of completeness was reported. Further information is provided in the Background Information section below.

**Figure 1: Percentage of discharge episode records (SMR01) with a valid ethnic group by NHS Board of Treatment; quarter ending 31st March 2012**

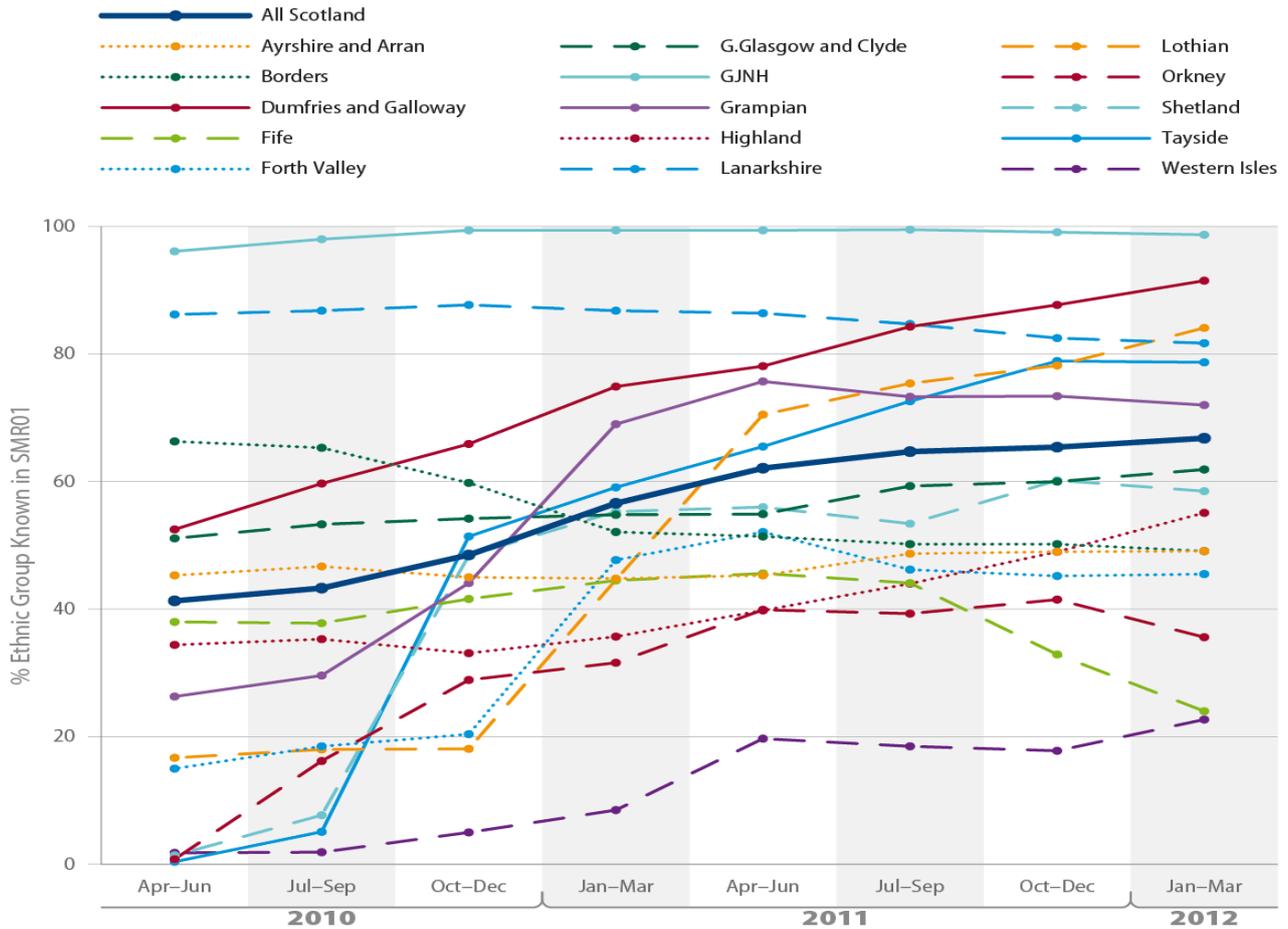


Note 1: that figures include as 'complete' those who declined to state their ethnic group. Please refer to the Guidance Notes below.

The overall level of completeness for Scotland rose from 41.3% in the quarter in April – June 2010 to 66.8% in January – March 2012 (see Figure 2). This increase has been driven by several Boards that have made significant progress during the past two years.

Dumfries & Galloway, Forth Valley, Grampian, Lothian, Orkney, Shetland and Tayside all saw substantial increases in recording between April 2010 and March 2012.

**Figure 2: Percentage of discharge episode records (SMR01) with a valid ethnic group by NHS Board of Treatment and quarter: quarters ending April 2010 to March 2012**



Note 1: that figures include as 'complete' those who declined to state their ethnic group. Please refer to the Guidance Notes below.

Note 2: That these figures may not correspond exactly with figures released previously as the data are extracted from dynamically updated databases. Note also that for this reason these data are subject to future corrections.

[SMR01-Ethnicity-Completeness](#) [22.0 KB] up to 31<sup>st</sup> March 2012 by NHS Board and quarter.

## New outpatient appointments

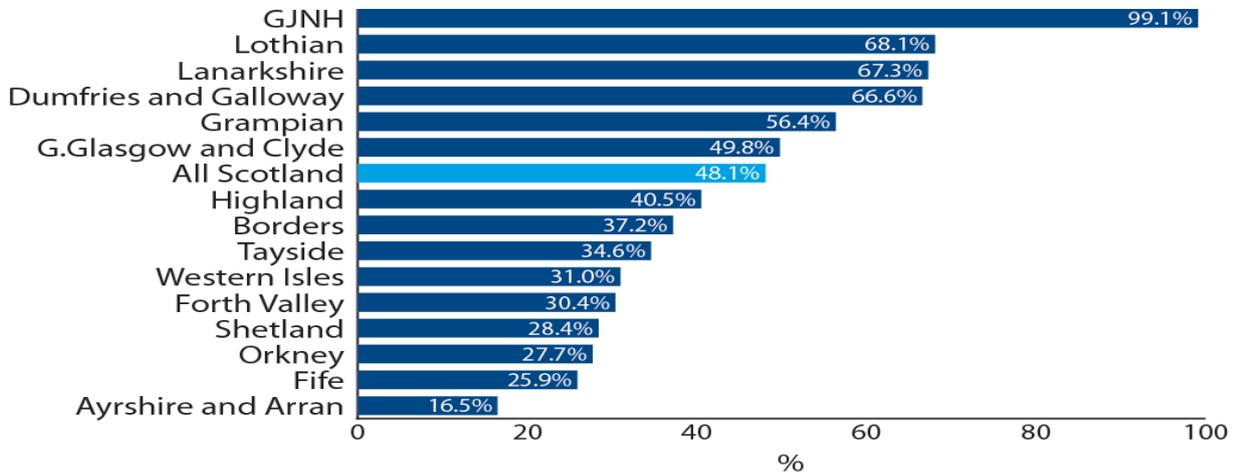
For new outpatient appointments (SMR00 data) the overall level of completeness for ethnic group recording was 48.1% for Scotland as a whole for the quarter ending March 2012 (see Figure 3). The highest levels of recording for this quarter were for the Golden Jubilee National Hospital (99.1%), Lothian (68.1%), Lanarkshire (67.3%), Dumfries & Galloway (66.6%) and Grampian (56.4%). These boards, together with NHS Greater Glasgow & Clyde (49.8%) were all above the national average.

The lowest levels of recording were in NHS Ayrshire and Arran (16.5%) and NHS Fife (25.9%).

It should be noted that the implementation of the new PMS in Ayrshire & Arran, Borders, and Lanarkshire has had a noticeable impact on the submission of SMR returns and that

ethnicity completeness figures for these boards should therefore be treated with caution. Further information is provided in the notes section below.

**Figure 3: Percentage of new outpatient appointment records (SMR00) with a valid ethnic group by NHS Board of Treatment; quarter ending 31st March 2012**

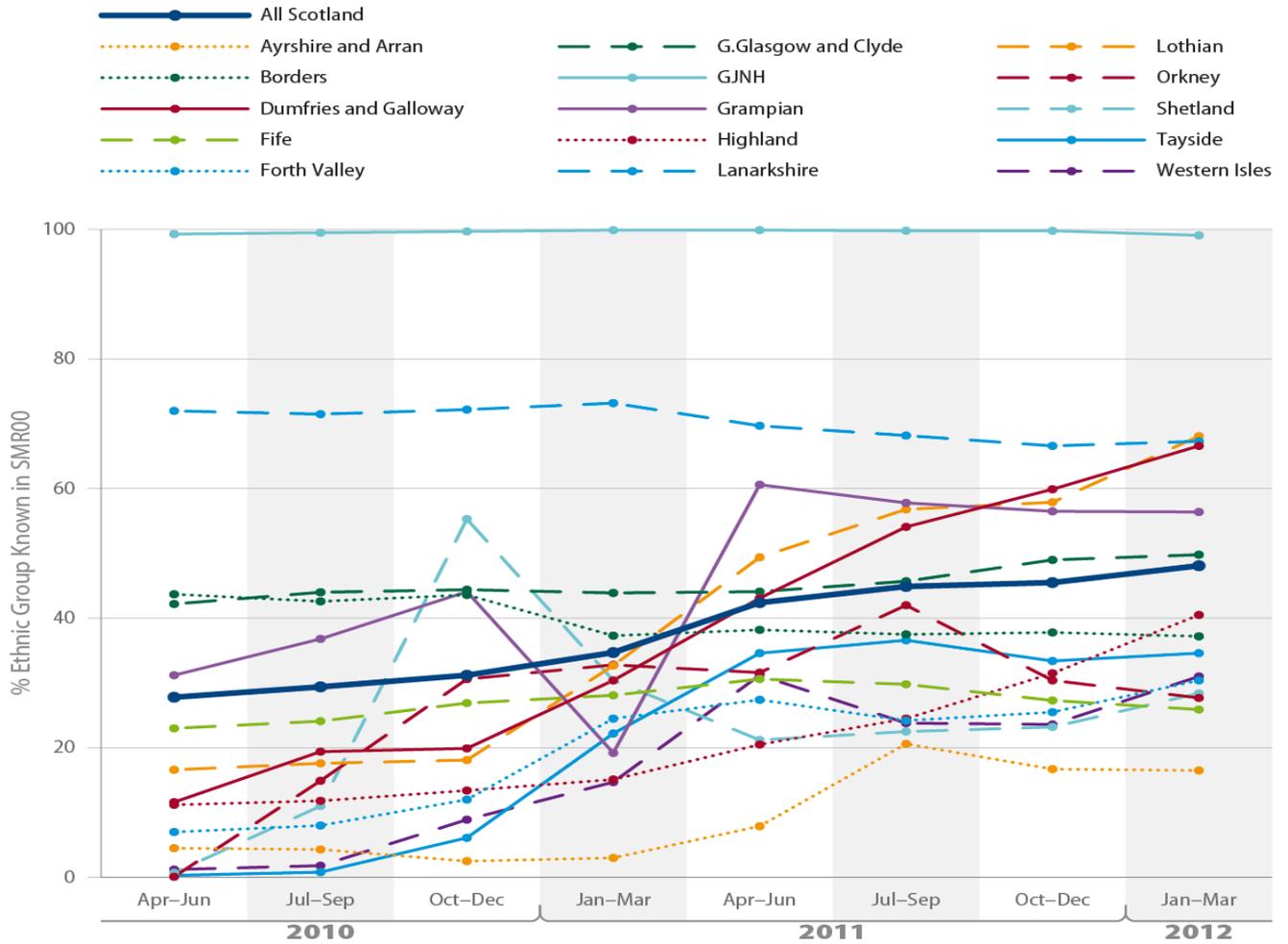


Note 1: that figures include as 'complete' those who declined to state their ethnic group. Please refer to the Guidance Notes below.

Improvements have been made in recording on SMR00, although the levels remain lower than for SMR01. The overall level of completeness for Scotland rose from 44.9% in the quarter July - September 2011 to 48.1% in January- March 2012 (see Figure 4). As with SMR01, this increase has been driven by several Boards that have made significant progress during the past two years.

Golden Jubilee National Hospital maintained high levels of recording during this period. There were notable rises in completeness in Lothian, Dumfries & Galloway, Grampian, Forth Valley, Highland, Western Isles and Shetland.

**Figure 4: Percentage of new outpatient appointment records (SMR00) with a valid ethnic group by Health Board of Treatment and quarter: quarters ending April 2010 to March 2012**



Note 1: that figures include as 'complete' those who declined to state their ethnic group. Please refer to the Guidance Notes below.

Note 2: That these figures may not correspond exactly with figures released previously as the data are extracted from dynamically updated databases. Note also that for this reason these data are subject to future corrections.

[SMR00-Ethnicity-Completeness](#) [23.0 KB] up to 31st March 2012 by NHS Board and quarter.

## **Glossary**

Ethnicity is "the social group a person belongs to, and either identifies with or is identified with by others, as a result of a mix of cultural and other factors including language, diet, religion, ancestry and physical features traditionally associated with race". (Bhopal, 2004). Ethnicity is essentially self-defined and may change over time. Classification of ethnicity is based on categories that include common self-descriptions, are acceptable to respondents and that identify variations that are important for research or policy. Ethnicity is different from country of origin, since many countries include more than one ethnic group.

## List of Tables

Table No.	Name	Time period	File & size
1	<a href="#">Percentage of discharge episode records (SMR01) with a valid ethnic group by Health Board of Treatment and Quarter</a>	Quarters ending June 2010 – March 2012	Excel [22kb]
2	<a href="#">Percentage of new outpatient appointment records (SMR00) with a valid ethnic group by Health Board of Treatment and Quarter</a>	Quarters ending June 2010 – March 2012	Excel [23kb]

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## Further Information

Further information can be found on the [ISD website](#)

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## Appendix

**A1 – Background Information**

The NHSScotland Quality Strategy committed NHSScotland to understanding the needs of different communities, eliminating discrimination, reducing inequality, protecting human rights and building good relations by breaking down barriers that may be preventing people from accessing the care and services that they need. The UK Government's Equality Act requires public authorities to collect equality characteristics such as ethnicity to demonstrate that they are meeting the new public sector equality duty.

All health information systems should be able to collect and share diversity information to support individual care, identify inequalities, monitor progress towards reducing those inequalities and demonstrate compliance with equalities legislation.

The Scottish Health Council Patient Focus Targets 2007/08 provided an incentive for NHS Boards to increase the routine collection of information on ethnic group within acute hospital discharge records (SMR01) and new outpatient appointment records (SMR00). In September 2009 the Director of Healthcare Policy and Strategy wrote to all NHS Board Chief Executives seeking improvement in equalities data collection and monitoring, particularly in the recording of ethnicity in SMR00 and SMR01. This letter required Boards to produce an action plan to improve recording, outline how progress will be measured and to include plans for widening equality data collection. NHS Health Scotland and the Information Services Division will offer Boards support to improve equality data capture and monitoring. Complete routine equalities data would allow the NHS to monitor services to ensure that all the people of Scotland are being treated fairly and equally, help assess the health needs of different groups and enable the NHS to monitor progress towards reducing inequalities. In summary, the current lack of data means that NHS Scotland is unable to monitor inequalities in the health of the Scottish population by ethnic group (or by disability, sexual orientation or other determinants of inequality). The fact that ethnic group is recorded in hospital discharge data in England in over 90% of episodes demonstrates that better recording is feasible. The current low level of recording highlights the need for further action to improve information about the health of different ethnic groups in Scotland.

Discharge statistics are derived from data collected on discharges from non-obstetric and non-psychiatric hospitals in Scotland (SMR01). Data from January to March 2012 are provisional.

New outpatient statistics are based on new attendances at outpatient clinics in all specialties in Scotland (except A&E and Genito-Urinary Medicine). The analysis is based on a subset of the dataset comprising patients who received a new appointment at a consultant-led outpatient clinic.

A new patient management system (PMS) is currently being implemented in a phased approach across 5 NHS Boards. There has been a noticeable impact on the submission of SMR returns. Data should therefore be interpreted with caution. More information on the completeness of SMR returns is available on the ISD website at: <http://www.isdscotland.org/Products-and-Services/Hospital-Records-Data-Monitoring/SMR-Completeness/>

The percentage with a valid ethnic group relates to records completed with a valid ethnic group or patient refusal codes only. Records completed with 'Not Known' codes or left blank are not deemed to be a valid ethnic group.

Patients are not compelled to provide information about their ethnic group and a 'declined to provide' response is included in the total of valid codes in these figures.

## A2 – Publication Metadata (including revisions details)

Metadata Indicator	Description
Publication title	Improving ethnic data collection for equality and diversity monitoring
Description	Biannual monitoring of the recording of ethnic codes on Inpatient and Daycase (SMR01) and New Outpatient (SMR00) records of NHSScotland.
Theme	Health and Social Care
Topic	Equality and Diversity
Format	Excel workbooks and PDF
Data source(s)	SMR00, SMR01
Date that data are acquired	24 July 2012 (SMR01); 26 July 2012 (SMR00)
Release date	28th August 2012
Frequency	Twice-yearly
Timeframe of data and timeliness	Data from 2005 to 2012. There have been no delays in reporting.
Continuity of data	Continuous data
Revisions statement	N/A
Revisions relevant to this publication	N/A
Concepts and definitions	Definitional Rules and Codes are available from the <a href="#">ISD Data Dictionary</a>
Relevance and key uses of the statistics	Planning and research
Accuracy	N/A
Completeness	More information on the completeness of SMR returns is available on the ISD website at: <a href="http://www.isdscotland.org/Products-and-Services/Hospital-Records-Data-Monitoring/SMR-Completeness/">http://www.isdscotland.org/Products-and-Services/Hospital-Records-Data-Monitoring/SMR-Completeness/</a>
Comparability	The use of consistent definitions across Scotland allows comparisons within Scotland. The definitions of ethnicity used are similar but not identical to those used in England, Wales and Northern Ireland.
Accessibility	It is the policy of ISD Scotland to make its web sites and products accessible according to <a href="#">published guidelines</a> .
Coherence and clarity	Statistics are presented within Excel spreadsheets. NHS Board and national figures are presented graphically.
Value type and unit of measurement	Percentage of records with a valid ethnic group by NHS Board of Treatment by patient type (i.e. inpatients/day cases and new outpatients).
Disclosure	The <a href="#">ISD protocol on Statistical Disclosure Protocol</a> is followed.
Official Statistics designation	Non-National Statistics
UK Statistics Authority Assessment	N/A
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Help email	Mageed Abdalla <a href="mailto:m.abdalla@nhs.net">m.abdalla@nhs.net</a>
Date form completed	28/08/2012

## **A3 – Early Access details (including Pre-Release Access)**

### **Pre-Release Access**

Under terms of the "Pre-Release Access to Official Statistics (Scotland) Order 2008", ISD are obliged to publish information on those receiving Pre-Release Access ("Pre-Release Access" refers to statistics in their final form prior to publication). The standard maximum Pre-Release Access is five working days. Shown below are details of those receiving standard Pre-Release Access and, separately, those receiving extended Pre-Release Access.

#### **Standard Pre-Release Access:**

Scottish Government Health Department  
NHS Board Chief Executives  
NHS Board Communication leads  
NHS Health Scotland

#### **Extended Pre-Release Access**

Extended Pre-Release Access of 8 working days is given to a small number of named individuals in the Scottish Government Health Department (Analytical Services Division). This Pre-Release Access is for the sole purpose of enabling that department to gain an understanding of the statistics prior to briefing others in Scottish Government (during the period of standard Pre-Release Access).

Scottish Government Health Department (Analytical Services Division)

## A4 – ISD and Official Statistics

### About ISD

Scotland has some of the best health service data in the world combining high quality, consistency, national coverage and the ability to link data to allow patient based analysis and follow up.

Information Services Division (ISD) is a business operating unit of NHS National Services Scotland and has been in existence for over 40 years. We are an essential support service to NHSScotland and the Scottish Government and others, responsive to the needs of NHSScotland as the delivery of health and social care evolves.

**Purpose:** To deliver effective national and specialist intelligence services to improve the health and wellbeing of people in Scotland.

**Mission:** Better Information, Better Decisions, Better Health

**Vision:** To be a valued partner in improving health and wellbeing in Scotland by providing a world class intelligence service.

### Official Statistics

Information Services Division (ISD) is the principal and authoritative source of statistics on health and care services in Scotland. ISD is designated by legislation as a producer of 'Official Statistics'. Our official statistics publications are produced to a high professional standard and comply with the Code of Practice for Official Statistics. The Code of Practice is produced and monitored by the UK Statistics Authority which is independent of Government. Under the Code of Practice, the format, content and timing of statistics publications are the responsibility of professional staff working within ISD.

ISD's statistical publications are currently classified as one of the following:

- National Statistics (ie assessed by the UK Statistics Authority as complying with the Code of Practice)
- National Statistics (ie legacy, still to be assessed by the UK Statistics Authority)
- Official Statistics (ie still to be assessed by the UK Statistics Authority)
- other (not Official Statistics)

Further information on ISD's statistics, including compliance with the Code of Practice for Official Statistics, and on the UK Statistics Authority, is available on the [ISD website](#).