

Improving ethnic data collection for equality and diversity monitoring NHSScotland

January – March 2017

Publication date – 29 August 2017

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Introduction

This release from the Information Services Division describes progress towards improving the completeness of ethnic group recording in acute inpatient and day case records (SMR01) and new outpatient appointment records (SMR00).

There are important health inequalities related to ethnic group. Reliable information on the ethnic group of people admitted to hospital in Scotland is essential to reduce inequalities and ensure services are delivered fairly. Addressing ethnic inequalities in health requires accurate and complete information to target interventions and monitor progress towards reducing inequalities. This publication describes the quality and completeness of information on ethnicity in acute inpatient and day case data and new outpatient appointment data.

Background

The UK Government's Equality Act requires public authorities to collect equality characteristics such as ethnicity to demonstrate that they are meeting the public sector equality duty.

The NHSScotland Quality Strategy commits the NHS in Scotland 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'.

What is ethnicity?

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.

Main points

- The level of ethnic group recording in inpatient and day case records in NHS Scotland has remained at around 80% over the last two years. In the most recent quarter it was 82%, varying from 44% to 94% between NHS Boards.
- Completeness of recording for new outpatient appointment records was 74% in the most recent quarter.
- In the most recent quarter, only NHS Dumfries & Galloway achieved completeness of recording above 90% for acute inpatient and day case records.

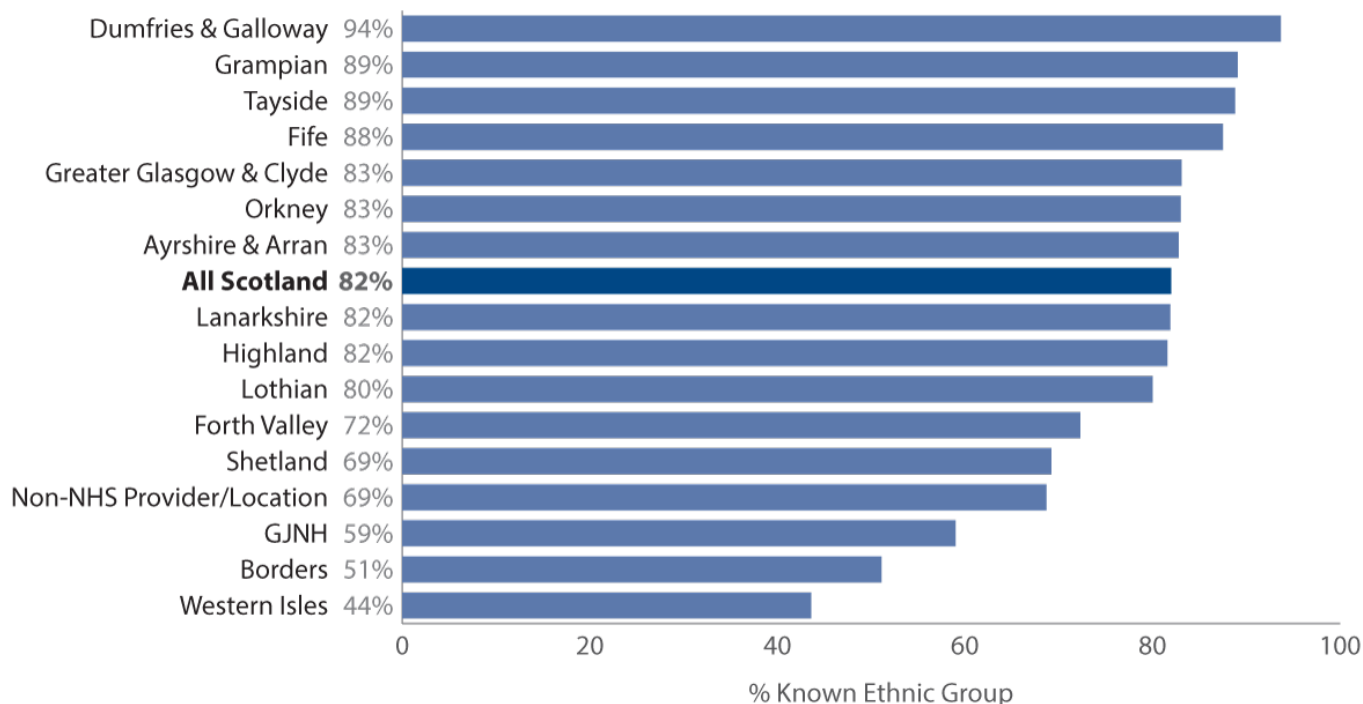
Results and Commentary

This publication reports on the percentage of records with a known ethnic group. The total number of records includes those where ethnic group was recorded as ‘Not Known’, ‘Refused/Not Provided by the Patient’ or left blank.

Acute Inpatient and day case records

For acute inpatient and day case records the completeness of recording of known ethnic group was 82% for NHSScotland for the quarter ending 31 March 2017 (Figure 1). The highest levels of recording for this quarter were in NHS Dumfries & Galloway (94%), NHS Tayside and NHS Grampian (89%). The lowest levels of recording were in NHS Western Isles (44%) and NHS Borders (51%).

Figure 1: Percentage of acute inpatient and day case records with a known ethnic group by NHS Board of treatment; quarter ending 31 March 2017



Note 1: Figures exclude those who declined to state their ethnic group. Please refer to Appendix A1.

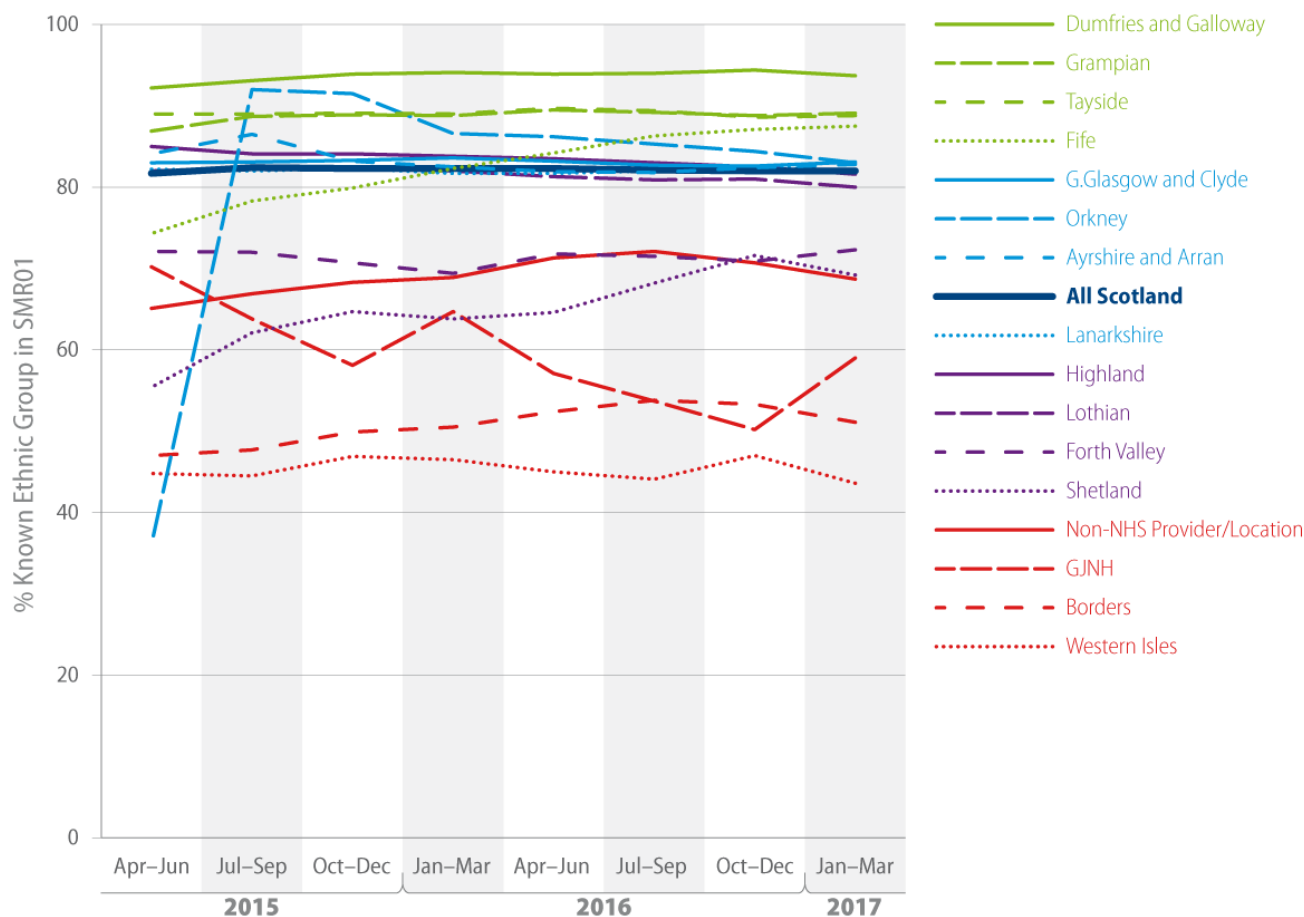
Note 2: Figures may not correspond exactly with figures released previously as the data are extracted from dynamically updated databases and for this reason these data are subject to future corrections.

Note 3: Figures are not comparable to reports prior to February 2016 due to a change in reporting from valid ethnic group to known ethnic group.

The completeness of recording for NHSScotland has remained steady at 82% from quarter April –June 2015 to quarter January - March 2017 (Figure 2).

The majority of NHS Boards have maintained progress over this period, however recording of known ethnic group remains persistently low in NHS Western Isles and NHS Borders. Recording at GJNH has improved by 9 percentage points in the last quarter to reach 59%.

Figure 2: Percentage of acute inpatient and day case records with a known ethnic group by NHS Board of treatment and quarter: quarters ending June 2015 to March 2017



Note 1: Figures exclude those who declined to state their ethnic group. Please refer to Appendix A1.

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

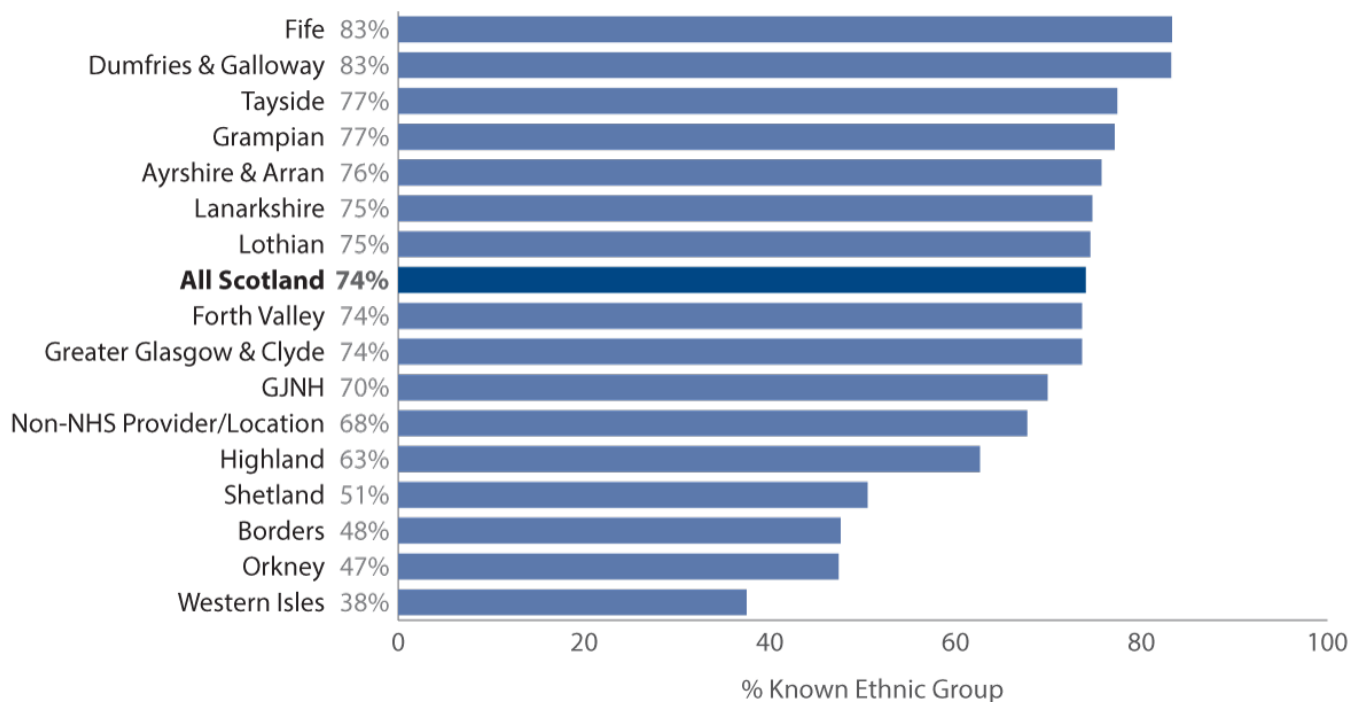
Note 3: Figures are not comparable to reports prior to February 2016 due to a change in reporting from valid ethnic group to known ethnic group.

[SMR01-Ethnicity-Completeness](#) [13.0 KB] up to 31 March 2017 by NHS Board and quarter.

New outpatient appointment records

For new outpatient appointment records (SMR00), the completeness of recording of known ethnic group was 74% for NHSScotland for the quarter ending 31 March 2017 (Figure 3). The highest levels of recording for this quarter were in NHS Fife and NHS Dumfries & Galloway (83%). The lowest levels of recording were in NHS Western Isles (38%), NHS Orkney (47%) and NHS Borders (48%).

Figure 3: Percentage of new outpatient appointment records with a known ethnic group by NHS Board of treatment; quarter ending 31 March 2017



Note 1: Figures exclude those who declined to state their ethnic group. Please refer to Appendix A1.

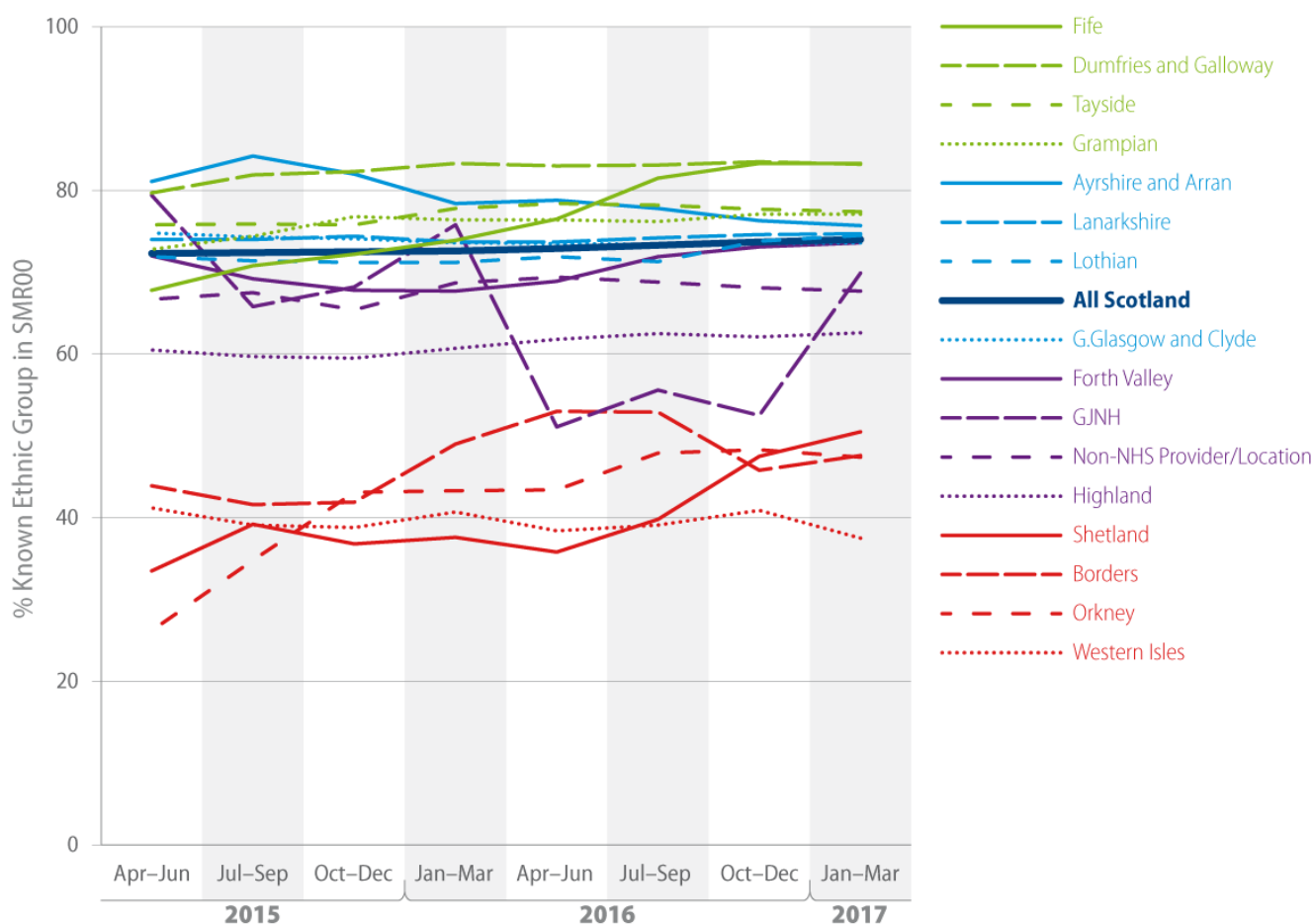
Note 2: Figures may not correspond exactly with figures released previously as the data are extracted from dynamically updated databases and for this reason these data are subject to future corrections.

Note 3: Figures are not comparable to reports prior to February 2016 due to a change in reporting from valid ethnic group to known ethnic group.

Improvements have been made in recording for new outpatient appointment records; although the level remains lower than for acute inpatient and day case records. The completeness for NHSScotland rose slightly from 72% in the quarter April –June 2015 to 74% in January- March 2017 (Figure 4).

The majority of NHS Boards have maintained steady progress over this period. Recording by GJNH has improved substantially in the last quarter, rising by 17 percentage points to 70%. Recording of known ethnic group has been persistently low in the Island boards but NHS Shetland has improved steadily, rising by 15 percentage points over the last year to attain 50%.

Figure 4: Percentage of new outpatient appointment records with a known ethnic group by NHS Board of treatment and quarter: quarters ending June 2015 to March 2017



Note 1: Figures exclude those who declined to state their ethnic group. Please refer to Appendix A1.

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

Note 3: Figures are not comparable to reports prior to February 2016 due to a change in reporting from valid ethnic group to known ethnic group.

[SMR00-Ethnicity-Completeness](#) [13.0 KB] up to 31 March 2017 by NHS Board and quarter

List of Tables

Table No.	Name	Time period	File & size
1	Percentage of acute inpatient and day case records (SMR01) with a known ethnic group by NHS Board of treatment and quarter	Quarters ending June 2015–March 2017	Excel [13kb]
2	Percentage of new outpatient appointment records (SMR00) with a known ethnic group by NHS Board of treatment and quarter	Quarters ending June 2015–March 2017	Excel [13kb]

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Further Information

The latest Improving Ethnic Data Collection for Equality and Diversity Monitoring report along with all previous reports can be found on our [Equality and Diversity publications page](#).

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Appendices

A1 – Background Information

The NHSScotland [Healthcare Quality Strategy](#) (May 2010) 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 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.

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. The 2013 Audit Scotland report "[Managing NHS waiting lists](#)" noted the importance of recording information on patients' additional needs, such as disability or requirements for a translator. A subsequent [report](#) from the Scottish Parliament's Public Accounts Committee recommended that NHS Boards should ensure that they took account of additional support needs. Recording of ethnic group has obvious relevance to these needs. NHS Health Scotland and the Information Services Division 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. While the general picture is improving, it remains the case that for some NHS Boards lack of data means that they are unable to monitor inequalities in the health of their local population by ethnic group. The fact that ethnic group is recorded in hospital discharge data in England in over 90% of episodes demonstrates that further improvements are possible and highlights the need for further action to improve information about the health of different ethnic groups in Scotland.

Acute inpatient and day case statistics are derived from data collected on discharges from non-obstetric and non-psychiatric specialties in Scotland (SMR01). Data from January - March 2017 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.

The percentage with a known ethnic group relates to records completed with known ethnic group codes only. Patients are not compelled to provide information about their ethnic group however records completed with codes 'Not known' or 'Refused/Not provided by patient' whilst valid, are not deemed to be a known ethnic group and therefore not included in these figures.

It should be noted that the figures presented in reports from February 2016 are calculated differently to earlier publications. Previously, the total figure included records where the patient did not provide or refused to provide this information - these records are no longer included in the completeness.

The data monitored in this publication have been used to compare hospital admission rates by ethnic group in Scotland in a [report](#) published on the website of the Scottish Public Health Observatory.

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 Day case (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	12 June 2017 (SMR01) and 13 June 2017 (SMR00)
Release date	29 August 2017
Frequency	Twice-yearly
Timeframe of data and timeliness	Data from 2005 to 2017. 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 ISD Data Dictionary
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: http://www.isdscotland.org/products-and-Services/Data-Support-and-Monitoring/SMR-Completeness/
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 published guidelines .
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 known ethnic group by NHS Board of Treatment by patient type (i.e.

	inpatients/day cases and new outpatients). Since first release, this publication reported on the percentage with a valid ethnic group recorded but from February 2016 it has reported on the percentage with a known ethnic group (excludes recording of code '98' – 'Refused/Not Provided by the Patient'.
Disclosure	The ISD protocol on Statistical Disclosure Protocol is followed.
Official Statistics designation	Official Statistics
UK Statistics Authority Assessment	N/A
Last published	28 February 2017
Next published	27 February 2018
Date of first publication	25 November 2008
Help email	elizabeth.cole@nhs.net
Date form completed	01 August 2017

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.

Standard Pre-Release Access:

Scottish Government Health Department

NHS Board Chief Executives

NHS Board Communication leads

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](#).