

Equality Information Monitoring Report 2020-2021



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Introduction

Bolton NHS Foundation Trust is committed to eliminating discrimination, promoting equality of opportunity, fostering good relations, reducing health inequalities and providing an environment which is inclusive for patients, carers, visitors and staff.

Our aim is to ensure staff are consciously inclusive in their day to day practice and interactions with our diverse patients and within teams, responding to their individual needs. The Trust dedicates



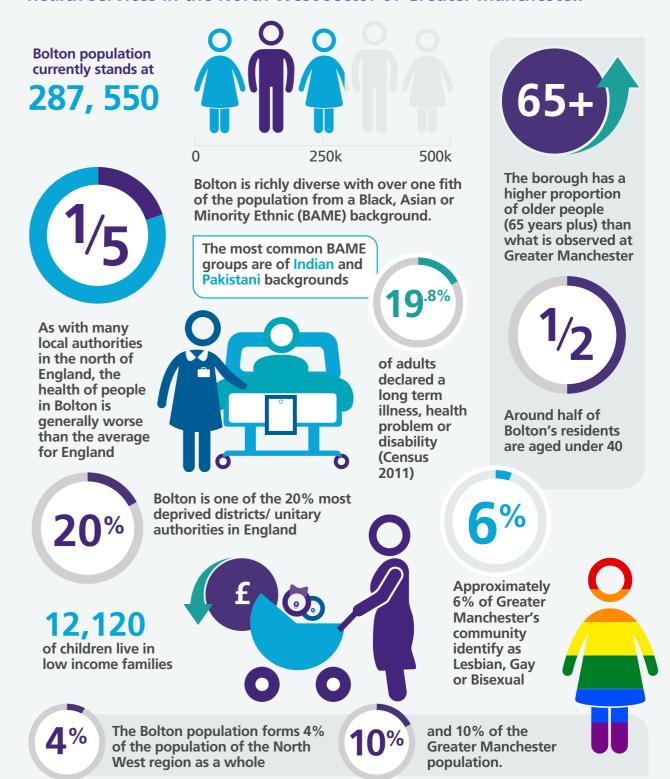
effort to ensuring a culture of respect by applying fair and inclusive working practices to ultimately deliver the highest standards of care. We recognise having a supportive staff culture leads to high levels of staff motivation and impacts positively on patient experiences and health outcomes. This way we can ensure the Trusts vision is achieved to deliver high quality, patient centred, accessible services and as an employer to provide a positive workplace culture free from bullying and harassment and discrimination and be the employer of choice.

The purpose of this report is to demonstrate how Bolton NHS Foundation Trust adheres to the Equality Act 2020 and complies with the general duty. It provides an overview of our workforce composition and patient access, celebrates our achievements and highlights any differential outcomes for patients and employees with protected characteristics. Collecting and using this equality information helps to inform the Trusts decision making and to monitor the equality impact of our activities on patients and staff. The report identifies future areas of improvement which will be aligned to the action plan associated with the equality objectives set out in the Equality, Diversity & Inclusion (EDI) plan.

Various sources of data are used within the report to demonstrate the level of progress. This includes the most recent census 2011 data. Patient data reports are based on the single visit/admission of a patient as opposed to number of times a patient has used our services.

2. Who are we

Bolton NHS Foundation Trust is a provider of hospital and community health services in the North West sector of Greater Manchester.



Deprivation & Disease Prevalence i

- When compared with the Greater Manchester region, Bolton ranks third highest for levels of deprivation.
- The health of people in Bolton is generally worse than the England average.
- Bolton is amongst the 20% most deprived local authorities in the country, ranking 46th out of the 317 English local authorities.
- 25% (14,900) of children live in low income families.
- Males have an average life expectancy of 82 years whilst females have a higher life expectancy at 78 years. These are lower than both the regional and national average at 83 and 80 years respectively. There are also inequalities in life expectancy dependent upon location. It is 11.3 years lower for men and 8.9 years lower for women in the most deprived areas of Bolton compared to the least deprived. The reasons for this are varied and include social factors such as poverty, high unemployment and poor housing and lifestyle factors.
- Bolton sees higher than average levels of alcohol related harm, smoking related deaths, and hip fractures in older people, more deaths from drug misuse and more hospitalisation for self-harm.

Disease Prevalence

 Cardiovascular diseases (CVD) death rates from CVD amongst the

- under 75s remain worse in Bolton than the England average an estimated 12.5% of people are living with these conditions. It is also the leading cause of health inequalities in Bolton.
- Cancers Bolton residents
 experience a higher rate of lung
 cancer than England whilst rates of
 breast and prostate cancer are lower
 in Bolton than average. Death rates
 from cancer amongst the under 75s
 are worse in Bolton than the
 England average.
- Respiratory diseases Rates are higher than average in Bolton including for COPD and asthma. Just over 6% of adults registered with general practitioners in Bolton suffer from asthma and 2% with COPD
- Diabetes There are more than 20,000 adults with a diagnosis of diabetes in Bolton. This equates to 8.4% of adults registered with general practitioners in Bolton and is higher than the England and North West average. It There are striking ethnic inequalities in diabetes prevalence, with South Asian ethnic groups more likely to develop diabetes.
- Mental health 10% of adults registered with general practitioners in Boltonsuffer from depression and this is similar to England as a whole and across Greater Manchester.

Further population demographic data broken down by protected characteristics can be found in section 4.

2.1 Equality Objectives

The Trust has developed its refreshed EDI Plan. It sets out the Trust's vision for EDI and its approach to creating an inclusive culture over the next four years in line with the Equality Act 2010. Each ojective links to our statutory, regulatory and contractual requirements as well the Trusts strategic aims and priorities. It focuses on the system redesign, community and staff engagement, co-designing workplace and patient experience improvements.

Ambition 1

Understand the needs of our community and provide services which meet those needs.

Ambition 2

Create a working environment in which all staff can reach their full potential.

Ambition 3

Recruit and cultivate a workforce that represents Bolton's diversity.

Ambition 4

Act on patient, staff and community feedback on how we can improve our approach to EDI.

3. Our Achievements

The Trust has taken forward significant pieces of work to develop EDI across our services and workforce. The following are some examples of our achievements and successes across the protected characteristic groups.

Disability

- In response to Covid 19 hospital visitor restrictions and to address communication difficulties resulting from staff wearing face masks and Personal Protective Equipment (PPE), an online BSL interpreter service and other accessible apps were rolled out on iPads to ensure effective communication particularly for people with hearing difficulties. Working closely with the Bolton Deaf Society, good practice guidance in communicating with deaf patients was produced, along with the development of easy read Covid specific resources.
- Relaunch of our Accessible Information Standard (AIS) working group. The Trust has made progress in ensuring that the move away from patient records to electronic systems takes account of the need to record people's information and communication needs.
- Wheelchair and Hearing loop initial audit conducted, findings of which will be incorporated into an improvement plan. We will be working with the estates management department to review

- accessibility including wheelchairs and hearing loops.
- The Trusts Admiral Nurse and Learning Disability Teams continue to provide specialist support to patients and carers.
- Awarded level 2 Disability Confident demonstrating progress in achieving equality for staff with disabilities and long-term health conditions. Actions have included rolling out a number of health and wellbeing initiatives and the launch of the reasonable adjustment passport.
- The Shiny minds app was launched to provide staff with interactive tools to support their mental health and wellbeing with thanks to NHS charities together for their financial support with this and other similar projects.

Gender reassignment

- Established a Transgender Equality Working Group to support improvements for transgender patients and staff. The group includes a range of people with lived experiences.
- Development of new ID badges allowing people to have their chosen pronoun on their badge.

Pregnancy and maternity

 Close working relations with the Trust's Specialist Cultural Liaison

- Midwife who is undertaking innovative, pioneering work, the very first of its kind within the UK.
- Delivery of cultural understanding and engagement training.

Race

- Strengthening the Trust's interpretation and translation complaints handling process leading to speedier response timeframes and reporting via regular monitoring and assurance meeting and detailed reports. The Trusts link workers also continue to identify issues and educate staff.
- In response to Covid, the Trust:
 - Worked collaboratively with local partner organisations to ensure effective key messages were disseminated within ethnic communities.
 - Covid risk assessments were carried out with staff at high risk including those from BAME communities and with disabilities to ensure appropriate support could be put in place to ensure their safety.
 - Ensured interpretation facilities were made available within online consultation platforms including British Sign Language (BSL) and Foreign language interpretation via our Link workers, as patients were no longer able to come into hospitals and clinics.

- Our Black, Asian & Minority Ethnic (BAME) staff network continues to play an active role in shaping a better future. The network has recently appointed a new Chair and Deputy Chair. The network is also advising senior management on matters, co-designing and reviewing strategies policies and procedures and creating a BAME safe space for BAME employees to discuss challenges and barriers. Membership of the forum includes both BAME colleagues and allies to ensure meaningful conversations and discussions. Colleagues who currently attend include staff from across the organisation.
- Delivering an innovative Bolton Accelerator Management Experience Programme. A leadership development programme for aspiring BAME colleagues, designed by the Trust which if successful then further cohorts will be funded and commissioned
- Launching the phase one of the reciprocal mentoring programme which has initially involved BAME employee mentoring Executive Directors/senior managers.
- Review of the Trust's recruitment and disciplinary processes leading to changes to ensure increased objectivity with this the disciplinary process and the development of recruitment managers guide.

Religion or belief

- The chaplaincy service in collaboration with the Staff **Experience and Inclusion Team and** the Bolton Community of Mosques (BCOM), work is underway to invest in new mosque facilities for staff and patients.
- The creation of an EDI calendar highlighting the key dates for the main seven religions and their impacts on inpatients, outpatients and staff.
- In response to the impact of COVID-19, limited visitor restriction and face to face chaplaincy support, a number of initiatives were put in place to ensure peoples emotional, communication and spiritual needs were met.
 - a) Promotion of Covid-19 Translated materials in 40+ languages within communities
 - b) The Trusts hospital link workers were deployed to work closely with the Covid-19 communication team to act as conduits between families and patients and adapted to provide a remote service.
 - c) Factsheets were disseminated reminding staff of the end of life care needs of patients from specific religions.
 - d) 50 'Quran' cubes and 5 Hindu devotional 'bhajan' cubes were secured and allocated to wards to provide comfort to

patients. Other religious items were also made available to patients.



- e) The Trust worked jointly with the Bolton Council of Mosques to recruit volunteers to provide support to Muslim inpatients and improve communication.
- f) Distributed Ramadhan packs to inpatients made up of key religious items.

Sexual orientation

- Participation in a variety of national and local events to affirm the Trusts commitment to inclusion including Bolton LGBT+ Pride, Black History Month, Equality Diversity and Human Rights Week and LGBT+ History Month.
- We held a series of listening session for our LGBQT+ employees to talk confidentially about their experience of working at the Trust and any concerns they may have. This is with a view to developing a LGBT+ Staff Forum in a way that meets the needs of our LGBT+ workforce.
- Roll out of the Rainbow Badge campaign strengthening the Trusts commitment to LGBT equality.

4. Our Patients and Employees

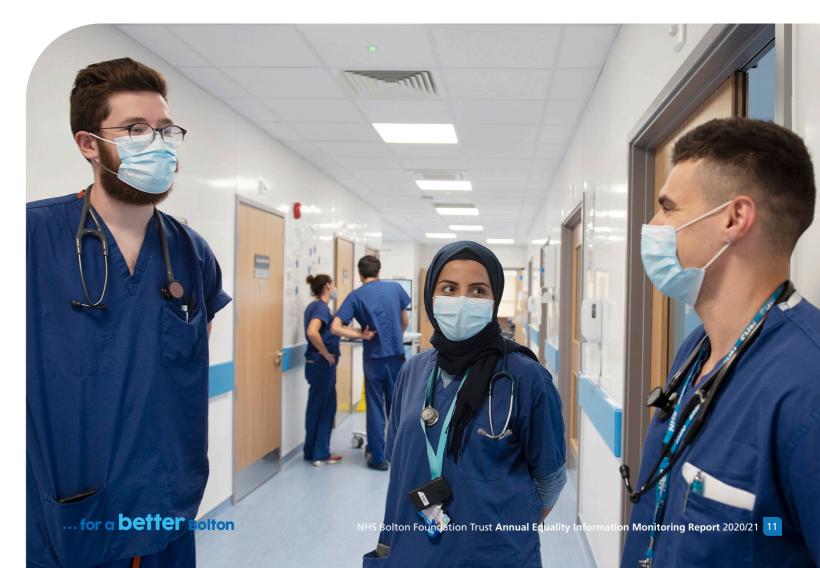
We are committed to ensuring that we operate fairly and equitably in all aspects of service delivery and employment. In order to put this commitment into practice, it is essential that we understand our patients and employees and their needs so that we can respond appropriately and effectively. Equality monitoring helps the Trust to determine how inclusive we are and whether we are offering equality of opportunity, access and treatment to all groups in the provision of services and employment. Any areas for improvement will be highlighted and taken forward within the Trusts EDI action plan.

A large selection of more recent estimate population demographic data used within this section has been extracted

from a variety of key local reports as listed below. This will also allow a greater appreciation of the changes taken place in the Bolton community. However, the 2020/2021 patient and workforce profiles are compared with the Census 2011 data which provide the most recent official data sets available.

The key reference documents used to extract recent population changes post 2011 census are:

- Bolton 2030 Vision delivery Plan 2019-2021
- Director of Public Health Annual report 2019-20
- Bolton Council Market Position Report 2017



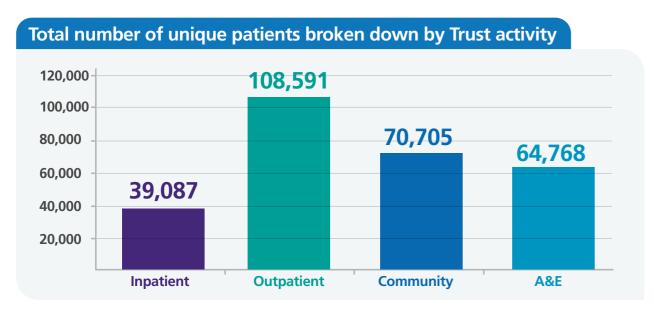
4.1 Our Patients

An analysis of the Trusts patient profile is offered below benchmarked against the local Bolton resident population, where applicable.

2020 population estimates suggest Bolton has a resident population of 287,550, whereas the GP registered population is higher at 312,8733. The Bolton population forms 4% of the population of the North West region as a whole, and 10% of the Greater

Manchester population. The total population of Bolton on Census day 2011 was estimated to be 276,800.

Between 1 April 2020 and 31 March 2021, 178,633 patients accessed Trust services, some of which accessed Trust services on more than one occasion amounting to 283,151 contacts in total. The types of activity patients accessed are shown in this table. Outpatient appointments were accessed most frequently.

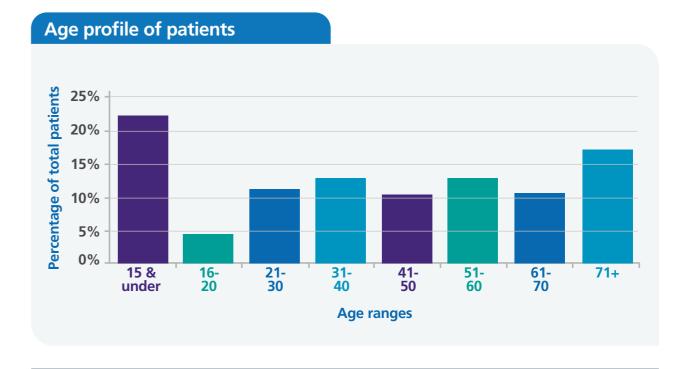


4.1.1 Age Profile

- 2020 ONS data shows the average age of the population in Bolton is slightly younger than England and the North West averages (38.9, 40.0 and 40.3 years respectively).
- Just over 1 in 5 of the population in Bolton is a dependent child (aged 0-15), and slightly just over 1 in 6 is of pensionable age (aged 65+).
- The population aged 65+ is expected to grow by almost 20% to around 57,300 people in 2025.
- People of all ages are using Trust services.
- Patients aged under 15 years have the highest usage of Trust services (21.9%) followed by patients aged over 71 years (17.1%).

 In comparison patients aged between 16 to 20 have the lowest usage of services. Health deteriorates with age thus these figures are expected.

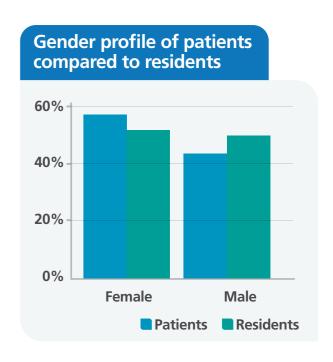
• Patients aged 21-30 continue to havethe highest rates of missed appointments (20.9%) whilst patients aged over 70 years of age are least likely to miss appointments (16.1%).



4.1.2 Gender profile

In mid-2018 Bolton was home to approximately 285,400 people, with 143,800 females and 141,600 males

- There continues to be an almost equal 50/50 split between men and women residing in Bolton. However, the Trusts patients profile indicates slightly more women access services (56%) compared to the local resident population (51%).
- Nine patients do have that their gender recorded.
- Almost equal numbers of female (17 %) and male (16.6%) patients missed appointments.



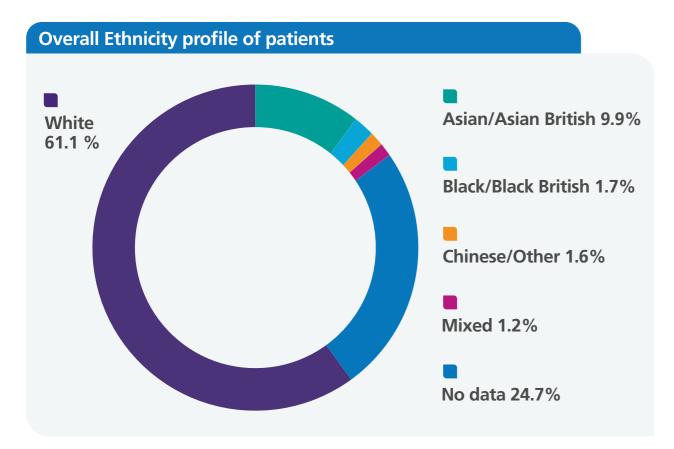
4.1.3. Ethnicity Profile

Bolton has a rich cultural diversity recent migration has seen changes to the makeup of the local community as Bolton is an asylum dispersal area and is part of the Refugee Gateway Programme. New African and Asian communities places such as Somalia, Oromo, Eritrea and Kurdistan have settled here. Alongside Eastern European communities, a significant number migrating from South Asia. The interpretation and translation services highlighted in the next section evidences this diversity. The census 2011 data used to compile this report, does not take account of this change in demographic therefore our community engagement approach will be bespoke to cater for specific needs. Recent estimates suggest 20.59% are from ethnic minority backgrounds, which is just over one

fifth of the resident population. This is an increase from 18.8% taken from the latest 2011 census. Children and young people under the age of 20 years make up 26% of the population of Bolton. 34.9% of school children are from a minority ethnic group.

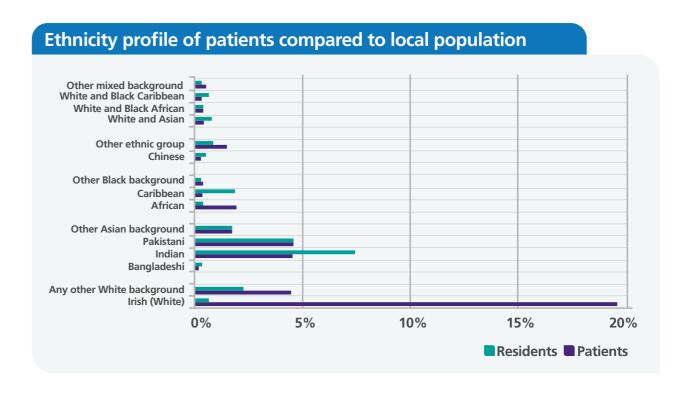
According to the 2011 census 87% of people living in Bolton were born in England. 18.8% of residents are from Black, Asian and Minority Ethnic Backgrounds. The largest minority ethnic group in Bolton is Indian making up 8% of the population. This was almost four times larger than the national average at

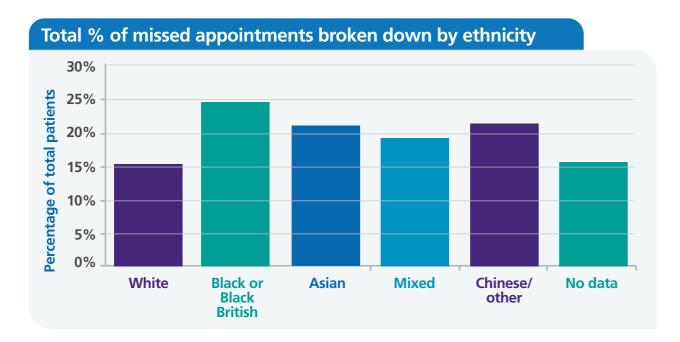
Pakistani was the second largest ethnic minority group, making up 4% of the population.



- People from all ethnic groups are accessing Trust services.
- The vast majority of patients are White (61%) although a much higher percentage 82% make up the local resident population indicating lower usage.
- A higher 14.4% of patients are from BAME backgrounds, compared to 13% the previous year
- Patients who identify as Asian or Asian British continue to make up the largest ethnic minority group (10% compared to 9% the previous year).
- 24% of ethnicity data is not captured of which 17.6% stated they did not wish to disclose this data.
- The proportion of Asian/ Asian British patients and mixed groups is lower than the resident population
- 'Chinese and other ethnic groups' and 'Black/Black British' communities have higher usage. This could be

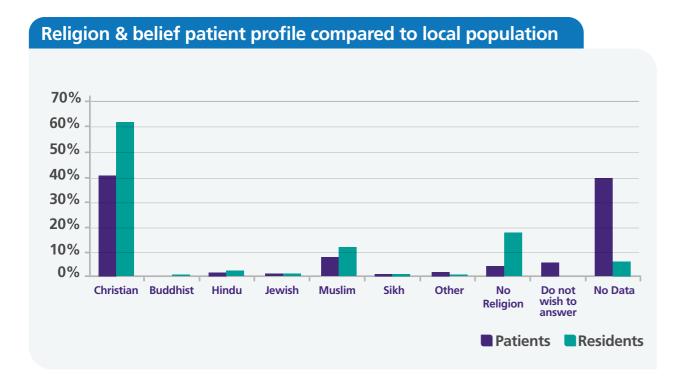
- explained by the lack of recent official census data available to offer an up to date comparison.
- A detailed breakdown of ethnicity group data indicates there are visible differences in usage of Trust services when comparing with local population. However, it is important to note again the diversity of Bolton has changed since the Census 2011 was conducted and being used for this analysis.
- 'White Irish" and 'White other' communities, 'African' 'Other ethnic group', 'Other mixed background' and 'Other Black background' groups have a higher usage of Trust services when compared to the local population figures.
- Indian, Caribbean, White and Asian Mixed, White & Black Caribbean (Mixed) and Pakistani have a lower usage of Trust services when compared to the local population.





 Black/Black British communities are more likely to miss appointments followed by Chinese and other ethnic groups. Within this broader groups 'Other Ethnic groups' and 'Other Black Ethnic Groups' have the highest rates.

4.1.4 Religion and Belief profile



 Muslims make up the second largest religious group to access services (7.7%) which is reflective of the local population (11.7%). This lower usage may in part be due to the presence of new and emerging communities many of which have migrated for work purposes, are of a younger age group and healthy

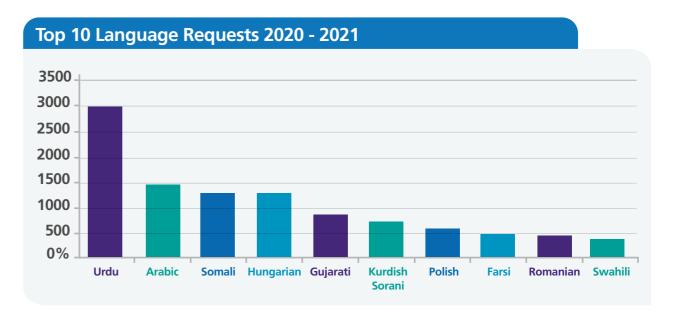
- and fit to work with less reliance on health services.
- 39.8% of patients have no data recorded.
- Christians are more likely to miss appointment (40.8%) followed by patients with no data recorded (39.8%)

4.1.5 Interpretation and Translation

All services have access to interpreting and translation services to ensure the communication and information needs of patients are met. Patient information is readily available in different languages and formats upon request. Formal contracts are in place with various service providers who can cater for over 200 languages and British Sign Language (BSL). The service is reviewed on a regular basis through the EDI Steering Group to ensure it continues to meet the needs of patients and staff. The Trust also employs two Link workers who, in the main, provide language interpretation in Urdu, Punjabi, Gujarati and Hindi.

The Trusts patient recording system capture details of patients' needs such as interpretation and translation needs.

- 14,502 language interpretation requests were completed by our providers - an increase of 2,025 sessions compared to 2019/2020.
- 22% were on the telephone and 78 % face to face
- These figures do not include interpretation appointments provided by the Trusts two link workers



A total of 65 foreign languages and dialects were catered for.

- The top 10 languages listed above continue to show Urdu is the most requested language.
- Overall the top 10 languages requested last year remain unchanged. However, Arabic has replaced Hungarian as the second most requested languages based on last year's figures and the demand for Kurdish Sorani has slightly

reduced from taking 9th position to 12th position.

A full list of languages and the total number of face to face and telephone interpretation appointments provided by our external provider are available in Appendix 3

BSL Interpreting

In 2020 to 2021 our external providers fulfilled 215 British Sign Language requests.

4.1.6 Disability profile

Trust patient profiling data is currently unavailable due to limitations with the data collection systems. Patient's communication needs are identified within case records however.

- In the 2011 census, 19.8% of adults declared a long term illness, health problem or disability which is higher than the national average at 16.2%. This equates to around 55,000 people. Recent estimates show an increase to 61,000 people.
- The 2011 Census shows that 10% of the Bolton population have a long

- term health condition or disability which limits their day to day activities 'a lot', this includes 20% of Bolton's population aged 65 years and over (13,642 people) rising to 56% of those aged 85 and over.
- The number of people broken down by type of disability are shown in the table below
- 30,649 (11%) people in Bolton stated they had caring responsibilities according to the 2011 census. Approximately 6,000 of these carers are aged over 65.

Type of disability	No. of residents
Physical/mobility impairment	16,160
Long standing illness or health condition	24,462
Hearing impairment	10,938
Visual impairment	5,613
Mental health issue	9,733

Type of disability	No. of residents
Learning disability/difficulty	2,494
Long standing illness or health condition	24,462
Older Age-related illness or disability	4,841
Other	12,627

Hearing loss

- In 2014, approximately 4,100 adults (3% of the adult population) have a sensory impairment that limits their day to day activities.
- 16.3% of total population nationally have measurable hearing loss. That works out at around 1 person in 6
- More than 40% of people over 50 years old have hearing loss, rising to 71% of people over the age of 70.
- 2 million people wear hearing aids but only 1.4 million use them regularly. Around 6.7 million people could benefit from hearing correction.

Sight impairments

- 2 million people live with sight loss nationally. Every day 250 people start to lose their sight in the UK
- In 2014, approximately 4,100 adults in Bolton reported they have a sensory impairment that limits their day to day activities.
- One in five people aged 75 and over are living with sight loss; one in two people aged 90 and over are living with sight loss nationally
- For those people age over 75 with

- a visual impairment, half of them are serious enough to be registered as blind or partially sighted.
- Nearly two-thirds of people living with sight loss are women.
- People from BAME communities are at greater risk of some of the leading causes of sight loss such as diabetes.
- Adults with learning disabilities are 10 times more likely to be blind or partially sighted than the general population.

Other disabilities

- Over 3000 residents are estimated to have dementia.
- At any given time 24,000 people are registered with depression. Depression is more common in the most deprived 20% of the local population, in the Pakistani population, and in the disabled and LGB populations.
- There are approximately 2.6% (5,586) adults with learning disabilities in Bolton. As at 31st March 2016 there were 626 adults with a learning disability accessing a long term service. Of these 17% are from an ethnic minority background with 8% Indian and 4% Pakistani.

Please note that 18% of patients did not prov

4.1.7 Sexual Orientation and **Gender Reassignment Profile**

- 94.6% of the population in the UK aged 16 years and over identify as heterosexual or straight. In 2018 2.2% of the UK population identified as lesbian, gay or bisexual (LGB)
- It is estimated that the LGB community make up 6% of the population in Greater Manchester. Estimates of sexual identity at local authority level for Bolton are considered unreliable for practical purposes.
- It is estimated that 1 in 15 people living in Great Britain identify as LGB+1.3% live with a partner of the same sex.

- The Trust does not record sexual orientation data in its entirety to allow a meaningful analysis to take place and nor is local data available.
- There are no estimates for the number of people in Bolton who identify as transgender or as gender identities other than male or female.
- There are estimated to be around 900 transgender adults within the Greater Manchester region in 2009. The actual figure however is considered to be much higher as the above figure only includes those who are seeking, intend to and have physically undergone gender reassignment surgery.

4.2 Equality in Complaints and Concerns

The Patient Advice & Liaison Service (PALS) offers help, support and advice to patients, relatives or carers, if they wish to make enquires, compliments or raise concerns in relation to the hospital. The Complaints department deal with official complaints raised by patients and carers if they are not satisfied with the Trusts attempts to resolve the concern in the first instance.

The PALS and complaints department routinely collect diversity monitoring data on age, gender and ethnicity. Patient information is available in different formats and opportunities are utilised to promote the service at community events. Patients and carers with language barriers are supported to raise concerns with the use of interpreting services and other accessible methods.

2019/2020	2020/2021		C		
Complaints 331	Complaints 206	This shows a reduction of 12% in PALS and of	7	7	1 in every 472 patients who utilised our services
PALS 1304	PALS 1142	PALS 38% in complaints when compared			accessed our PALS and complaints service

Equality monitoring

The Trust takes seriously that all members of the public should feel comfortable in accessing the PALS and complaints service and as such captures information on the patient's age, gender and ethnicity to support this. A summary of this data is provided which has been measured against patient profile activity.

Gender



A higher proportion of female patients contacted PALS for support which is above the Trust profile of female patients accessing our services (53%)

Complaints 66 **Female**

As with PALS, more of our female patients are accessing the complaints process with a higher percentage than those accessing our services (53%).

Age of patient

PALS - There is a good representation across all age groups

The majority of patients were 71+ which is expected as they are the largest group accessing services (42%) with 40 – 69 age group second (32%).

40% of the 71+ age group were the patient themselves with the remainder being from a relative or carer advocating for them. As most PALS are related to appointments this is to be expected.

COMPLAINTS - There is a good representation across all age groups

As with PALS, the majority of patients were 71+. The data also shows that patients in the age groups of 16-20 and 41-50 are less likely to complain

Interesting, only 16% of the 71+ age group were the patient themselves. The remainder were from someone advocating for them patient which is to be expected in this age group particularly for in-patients

Ethnicity of patient

PALS (7% data missing)

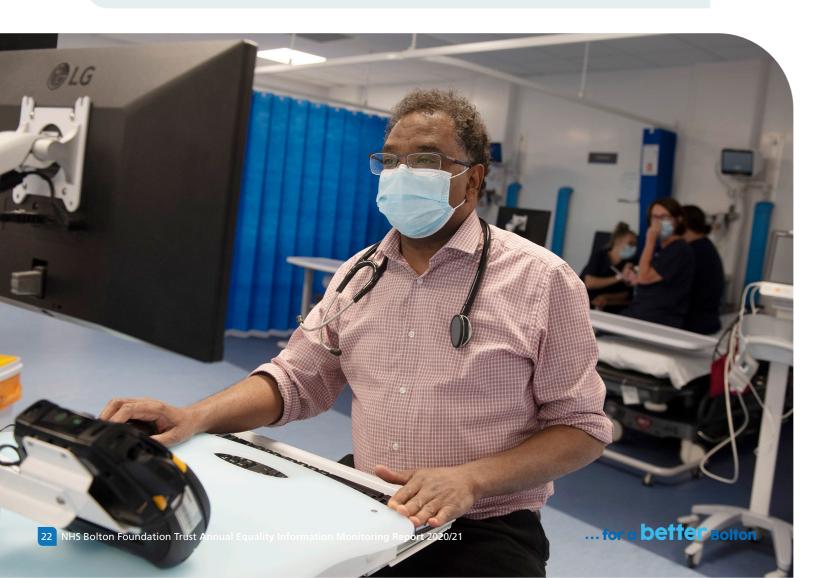
The majority of concerns are raised by White British communities (78%) which is higher than the profile of patients accessing our services (69%)

COMPLAINTS (9% data missing)

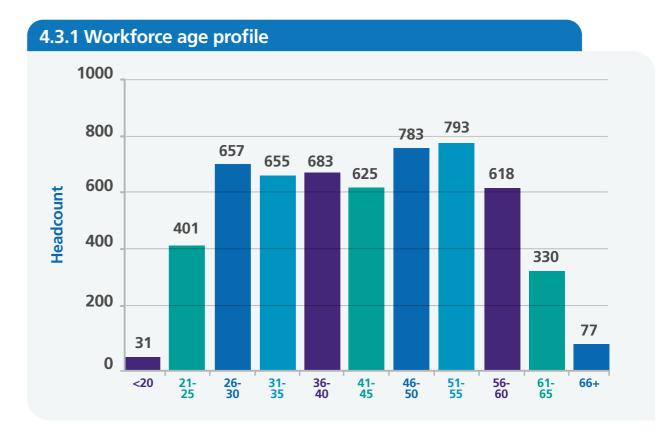
The majority of complaints are raised by White British communities (79%) followed by Indian and Pakistani communities which are the largest ethnic groups accessing Trust services (3% and 3% retrospectively)

What next?

- Further, improve equality monitoring data collection via LE2.2 and develop local monitoring at each patient's contact
- Review exiting publicity materials ensuring diverse images are used. Ensure inclusivity statements are added in different languages and formats
- Develop a folder with information in the most common languages and pictorial representation. To be placed across key locations across the Trust e.g. outpatient, BoltonOne
- Consult with diverse community groups including those for younger persons to raise awareness, identify barriers and improve access to the PALS and complaints service
- Review access to services for people with a disability
- Review and report on themes of concerns and complaints ensuring those that relate to equality, diversity and inclusion can easily be identified for collaborative working with the EDI team



4.3 Our Workforce



2020/21 the Trust employed 5797 staff, 144 more than the previous year (5653) from a variety of diverse backgrounds. The profile of staff has been broken down below by protected characteristics, highlighting representation by profession, staff group, pay bands and success rates at interview and turnover, where applicable. Any notable differences and comparisons to the previous year are reported within.

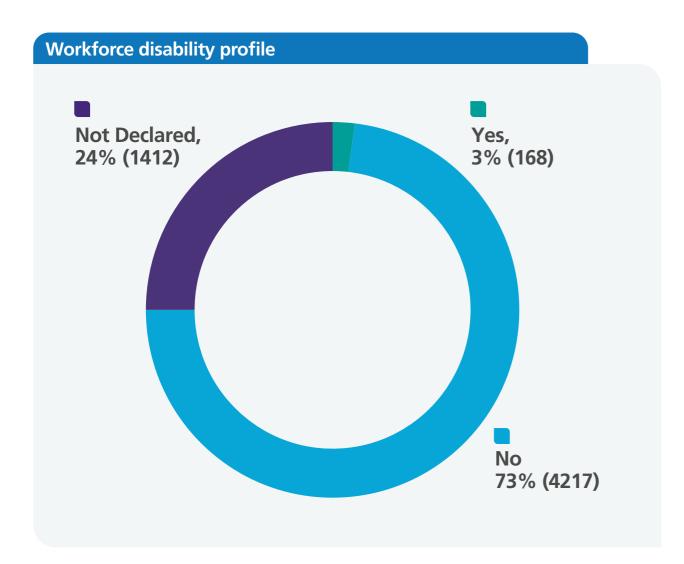
• The Trust has an ageing workforce with 56% of its staff aged over the age of 40 years. An older workforce requires the continuing development of health and wellbeing initiatives and a consideration of flexible working to support caring responsibilities.

- There is good representation of people of all ages in all pay bands and occupations with the exception
 - O Staff aged under 20 who are only to be found in administration and additional clinical services roles
 - Staff aged under the age of 35 are only found in band 8b and below posts However, considering experience and skills required to fulfil the requirements of more senior posts increases with age this is expected.

4.3.2 Disability profile

- The proportion of staff with a disability (3%) has slightly increased from the previous year at 2.5%.
 However, this figure is still lower when compared to the local population (19.8%).
- The level of non-disclosure within the Trust has improved from 26% the previous year to 24 % in 2020/21.
- Applicants with a disability have a 20% success rate at interview compared to 22% for those without.

- However, the highest success rate is for those that have not answered the question of which some may well have a disability of long term health condition.
- The Workforce Disability Equality Standard (WDES) report provides further data of the experiences of staff with a disability at the Trust. Please see: https://www.boltonft. nhs.uk/about-us/trust-publicationsand-declarations/equality-anddiversity/

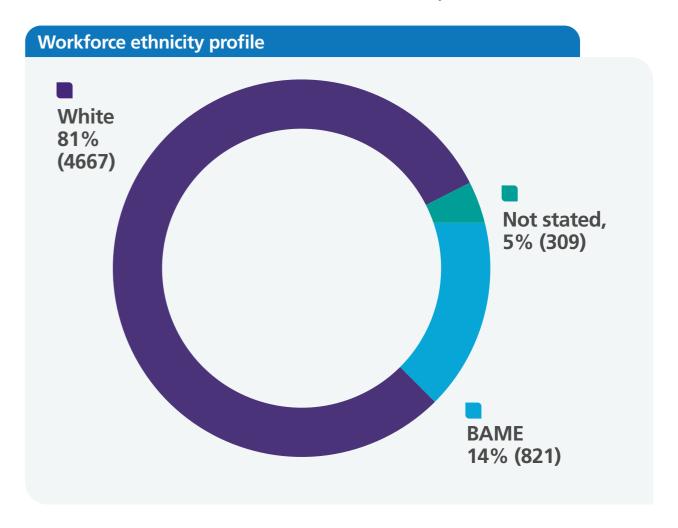


4.3.3. Ethnicity profile

- The majority of staff are White British and almost mirrors the 82% local population profile.
- 18% of the local population identify as Black, Asian and Minority Ethnic (BAME) compared with a 1% increase of BAME staff based on the previous year from 723 employees to 821 in March 2021, now making up 14% of the workforce.
- The local demographic has a large variation in BAME representation but a further breakdown of main ethnic groups is not available to identify any under representation

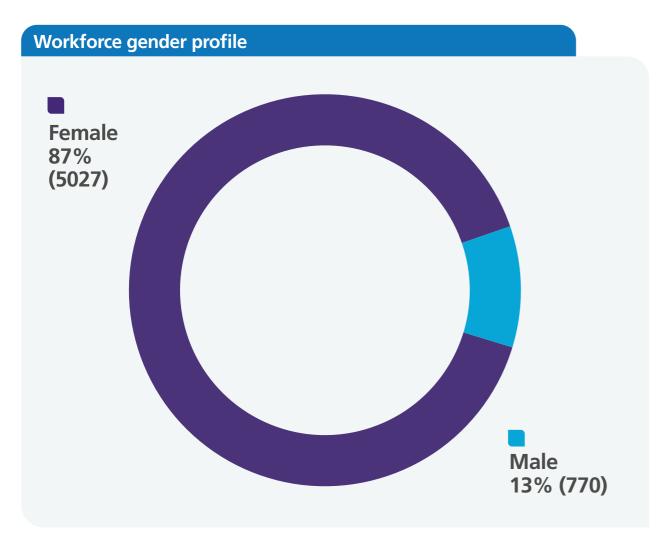
- within groups but should be considered in future reports.
- Nursing and Midwifery posts has the largest number of BAME staff (32%), followed by Dentistry and Medical (20%). This is in line with other Trusts.

The Workforce Race Equality Standard (WRES) report provides further data of the experiences of staff from a Black, Asian and Minority Ethnic background at the Trust. Please see: https://www.boltonft.nhs.uk/about-us/trust-publications-and-declarations/equality-and-diversity/



4.3.4. Gender profile

- The gender profile of staff continues to remain as predominantly female (87%) and is much higher than the local population rate at 49%. The national NHS workforce data indicates that this figure is the norm and that 77% of the national workforce is female. The Trusts figures are higher in comparison.
- Medical and Dentistry continue to employ a higher proportion of males (54%) whilst the other occupations have a higher representation of a female workforce in particular Nursing and Midwifery (94%) and Additional Clinical Services (91%) making these the least diverse in terms of gender mix.

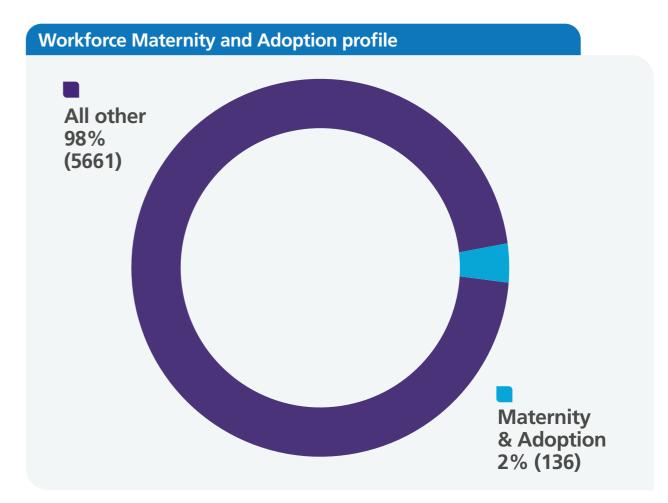


4.3.5 Gender Reassignment profile

The Trust does not record the number of staff who identify as Trans. However, the Trust has supported a number of employees through transition.

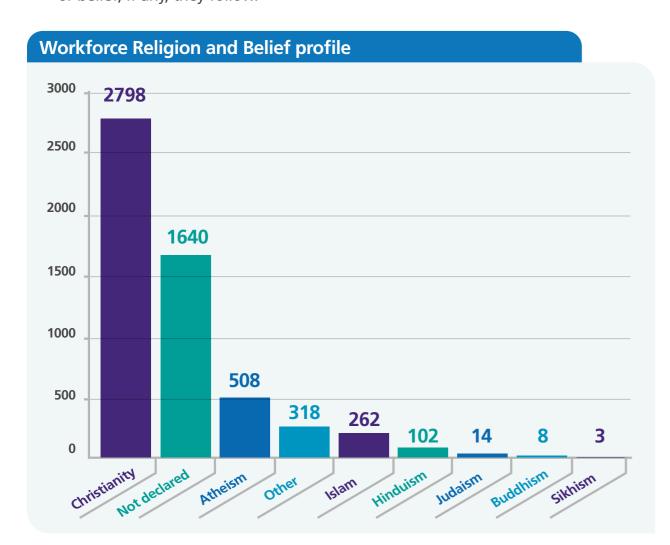
4.3.6. Maternity, Adoption and Other Leave profile

• Staff are taking up Maternity and Adoption leave. Paternity requests are not currently reportable.



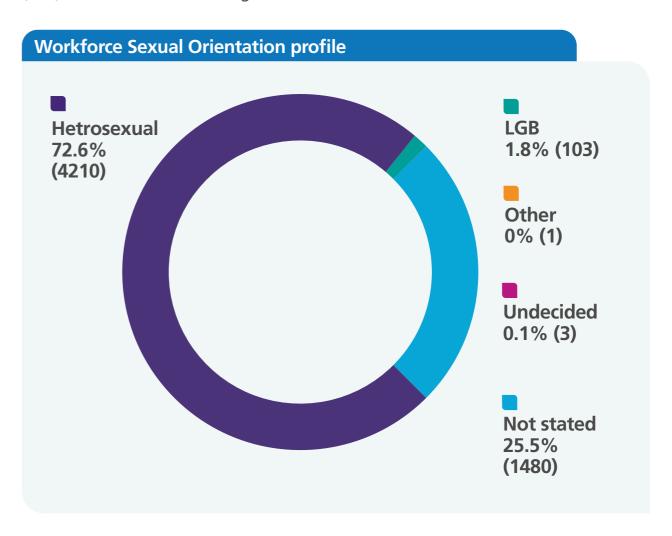
4.3.7 Religion and Belief profile

- Staff who identify as Christians (49%) compared to the local population (62%) and Muslim staff at and 5%, compared to 12% of the local population, makeup the largest workforce and residential religious group.
- There has been an increase in the number of staff reporting their religion and belief with a rise of 3% from the previous year but still leaving a 26% gap in data as staff have not disclosed which religion or belief, if any, they follow.
- Christianity remains the dominant religion of employees in all professions apart from Medical and Dentistry where 20% are Christian compared to 47% from other religious groups, although 32% of data is not declared.
- Applicants who identify with other non-Christian religions have a slightly lower likelihood of being appointed (20%) compared to Christian staff (23 %) although 28% of data is not recorded.



4.3.8 Sexual Orientation profile

Staff now have a larger variety of sexual orientation fields to select from in the Electronic **Staff Record (ESR) data recording system.** The data shows heterosexuals make up the majority of the workforce (73%) whilst 2 % of staff identify as Lesbian, Gay or Bisexual (LGB). This is lower than the regional estimate between 5 to 7%.



... for a better Bolton

5. Recommendations

On a four yearly basis the Trust is required to refresh its equality objectives making use of the key equality data highlighted in the annual compliance reports.

The following key recommendations to improve patient and workforce experience, and outcomes, are based on the data analysis within the report and are aligned to the EDI plan and EDI Team Work Programme.

Recommendations:

- 1. Launch new EDI plan with updated four yearly objectives.
- 2. Work with our Business Intelligence Team to review data collection

- activity and implement a robust process for recording equality data across the Trust.
- 3. Implement the sexual orientation monitoring standard within patient data recording systems.
- 4. Launch a new EIA template and toolkit alongside training programme.
- 5. Implement the Accessible Information Standard to identify, record, flag, share and meet the information and communication support needs of patients, service users, carers and parents with a disability impairment or sensory loss.





- 6. Engage, involve and empower the diverse communities in Bolton to help redesign our systems in line with the EDI plan.
- 7. Work with the Disability & Health Conditions Staff Network to contribute to changing policy and practice to improve the lived experiences of our workforce, patients and service users. Actions will be rolled out as per the Workforce Disability Equality Standard (WDES) action plan.
- 8. Promote the Covid 19 EIA across the Trust to address health inequalities and remove barriers to accessing appropriate services for our communities and improved lived experiences for our workforce.
- 9. Work with the Trust's People Development Team to launch an accessible, bold and challenging EDI training programme to ensure

- the Trust delivers on its ambitions of being a diverse and inclusive employer
- 10. Improve staff declaration of protected characteristics within ESR and ensure categories are inclusive, in collaboration with the Workforce Deployment Team.
- 11. Conduct staff listening events and launch staff networks with LGBTQ+ staff and those with a disability and long term health condition to identify good practice and areas for improvement.
- 12. Improve the recruitment, workplace experience and career progression of BME staff through implementation of the WRES action plan.
- 13. Reduce the gender pay gap through implementation of the action plan.



Appendix 1: Patient Profile Data

1. Overall number of unique patients broken down by gender (Unique patients).

Gender	Sum	%
Female	160,428	56.7%
Male	122,712	43.3%
Not Known	1	0.0%
Not Specified	10	0.0%
Total	283,151	100%

2. Gender of unique patients who DNA-ed compared to total number profile of patients.

	Total (Unique Patients)					
Gender	DNAs	%	Patients	%	% DNA of Unique Pts	
Female	16,540	56.7%	97,314	56.0%	17.0%	
Male	12,652	43.3%	76,365	44.0%	16.6%	
Not Known	0	0.0%	0	0.0%	0.0%	
Not Specified	0	0.0%	0	0.0%	0.0%	
Total	29,192	100%	173,688	100%	16.8%	

3. Patient profile broken down by age across Trust activity (unique patients).

Age group	Total Unique Patients	%
15 & under	38,048	21.9%
16 - 20	6,995	4.0%
21 - 30	19,882	11.4%
31 - 40	21,734	12.5%
41 - 50	17,974	10.3%
51 - 60	20,546	11.8%
61 - 70	18,730	10.8%
71 +	29,778	17.1%
Total	173,687	100%

4. Rate of DNA across Community and Outpatients Services and compared against overall Trust activity

	Total (Unique Patients)					
Age group	DNAs	%	Patients	%	% DNA of Unique Pts	
15 & under	5,633	19.3%	38,048	21.9%	14.8%	
16 - 20	1,281	4.4%	6,995	4.0%	18.3%	
21 - 30	4,160	14.3%	19,882	11.4%	20.9%	
31 - 40	4,410	15.1%	21,734	12.5%	20.3%	
41 - 50	3,379	11.6%	17,974	10.3%	18.8%	
51 - 60	3,553	12.2%	20,546	11.8%	17.3%	
61 - 70	2,683	9.2%	18,730	10.8%	14.3%	
71 +	4,092	14.0%	29,778	17.1%	13.7%	
Total	29,191	100%	173,687	100%	16.8%	

6. Total number of patients broken down by ethnicity and type of activity (unique patients).

Ethnicity	Unique Patients	%
Asian or Asian British		
Bangladeshi	229	0.1%
Indian	7,407	4.3%
Pakistani	7,401	4.3%
Any other Asian background	2,088	1.2%
Total	17,125	9.9%
Black or Black British		
African	2,249	1.3%
Caribbean	268	0.2%
Any other Black background	384	0.2%
Total	2,901	1.7%
Chinese/Other Ethnic Groups	;	
Chinese	287	0.2%
Any other ethnic group	2,508	1.4%
Total	2,795	1.6%
Mixed		
White and Asian	589	0.3%
White and Black African	337	0.2%
White and Black Caribbean	432	0.2%
Any other mixed background	709	0.4%
Total	2,067	1.2%
White		
British	102,901	59.2%
Irish	608	0.4%
Any other White background	2,558	1.5%
Total	106,067	61.1%
Not Stated	29,505	17.0%
Unknown	13,227	7.6%
Grand Total	173,687	100.0%

7. DNA Rate % of patients by comparison of numbers attending the Trust and broken down by ethnicity (unique patients).

	Total (Unique Patients)			
Age group	DNAs	%	Patients	% DNA of Unique Pts
Asian or Asian British				
Bangladeshi	50	0.2%	229	21.8%
Indian	1,385	4.7%	7,407	18.7%
Pakistani	1,898	6.5%	7,401	25.6%
Any other Asian background	463	1.6%	2,088	22.2%
Total	3,796	13.0%	17,125	22.2%
African	540	1.8%	2,249	24.0%
Caribbean	68	0.2%	268	25.4%
Any other Black background	96	0.3%	384	25.0%
Total	704	2.4%	2,901	24.3%
Chinese / Other Ethnic Grou	ıps			
Chinese	37	0.1%	287	12.9%
Any other ethnic group	597	2.0%	2,508	23.8%
Total	634	2.2%	2,795	22.7%
Mixed				
White and Asian	112	0.4%	589	19.0%
White and Black African	69	0.2%	337	20.5%
White and Black Caribbean	92	0.3%	432	21.3%
Any other mixed background	125	0.4%	709	17.6%
Total	398	1.4%	2,067	19.3%
White				
British	16,626	57.0%	102,901	16.2%
Irish	103	0.4%	608	16.9%
Any other White background	543	1.9%	2,558	21.2%
Total	17,272	59.2%	106,067	16.3%
Not Stated	4,341	14.9%	29,505	14.7%
Unknown	2,046	7.0%	13,227	15.5%
Grand Total	29,191	100%	173,687	16.8%

8. Patient profile broken down by Religion and Belief Group (unique patients).

Religion and belief	Total Unique Patients	%
Buddhist	53	0.0%
Christian	70,914	40.8%
Hindu	1,909	1.1%
Jew	83	0.0%
Muslim	13,348	7.7%
Sikh	32	0.0%
Do not wish to answer	8,795	5.1%
None	7,043	4.1%
Unknown/Not Specified	69,194	39.8%
Other	2,316	1.3%
Total	173,687	100%

9. DNA Rate % of patients by comparison of numbers attending the Trust and broken down by Religion and Belief Group (unique patients).

	Total (Unique Patients)				
Age group	Age group	%	Patients	% DNA of Unique Pts	
Buddhist	9	0.0%	53	0.0%	
Christian	11,931	40.9%	70,914	40.8%	
Hindu	329	1.1%	1,909	1.1%	
Jew	15	0.1%	83	0.0%	
Muslim	3,396	11.6%	13,348	7.7%	
Sikh	3	0.0%	32	0.0%	
Do not wish to answer	1,717	5.9%	8,795	5.1%	
None	1,429	4.9%	7,043	4.1%	
Unknown/Not Specified	9,944	34.1%	69,194	39.8%	
Other	418	1.4%	2,316	1.3%	
29,191	29,191	100.0%	173,687	100.0%	

Appendix 2: Workforce Profile Data

Overall staff profile

ВМЕ	Total	%
BME	821	14.2%
White	4667	80.5%
Not Stated	309	5.3%
Grand Total	5797	100%

Disability	Total	%
Yes	168	2.9%
No	4217	72.7%
Not Declared	1412	24.4%
Grand Total	5797	100%

Religious Belief	Total	%
Atheism	583	10.1%
Buddhism	8	0.1%
Christianity	2915	50.3%
Hinduism	111	1.9%
Islam	310	5.3%
Jainism	2	0.0%
Judaism	16	0.3%
Other	346	6.0%
Sikhism	4	0.1%
Not declared	1502	25.9%
Grand Total	5797	100%

Religious Belief	Total	%
All Other Religions	1380	23.8%
IDNWTD	1502	25.9%
Christianity	2915	50.3%
Grand Total	5797	100%

Age Band	Total	%
<=20 Years	33	0.6%
21-25	427	7.4%
26-30	675	11.6%
31-35	696	12.0%
36-40	697	12.0%
41-45	658	11.4%
46-50	768	13.2%
51-55	756	13.0%
56-60	679	11.7%
61-65	332	5.7%
66+	76	1.3%
Grand Total	5797	100%

SO	Total	%
Heterosexual	4210	72.6%
LGB	103	1.8%
Other SO not listed	1	0.0%
Undecided	3	0.1%
IDNWTD	1480	25.5%
Grand Total	5797	100%

Employee category	Total	%
Full Time	3078	53.1%
Part Time	2719	46.9%
Grand Total	5797	100%

Maternity	Total	%
All other Assignment Status'	5661	97.7%
Maternity & Adoption	136	2.3%
Grand Total	5797	100%
Gender	Total	%
Female	5027	86.7%
Male	770	13.3%
Grand Total	5797	100%
Age Band	Total	%
< Band 1	11	0.2%
Band 1	1	0.0%
Band 2	957	16.5%
Band 3	660	11.4%
Band 4	530	9.1%
Band 5	1222	21.1%
Band 6	1133	19.5%
Band 7	538	9.3%
Band 8a	220	3.8%
Band 8b	73	1.3%
Band 8c	12	0.2%
Band 8d	11	0.2%
Band 9	15	0.3%
Medical	400	6.9%
VSM	14	0.2%
Grand Total	5797	100%

Staff groups

ВМЕ	вме	White	Not Stated	Grand Total
Add Prof, Sci & Tech	44	121	8	173
Add Clin Services	128	1153	80	1361
Admin	103	1002	38	1143
AHP	83	395	22	500
Estates	1	3	-	4
HCS	32	75	15	122
Med & Den	167	185	48	400
Reg Nur & Mid	262	1727	98	2087
Students	1	6	-	7
29,191	29,191	100.0%	173,687	100.0%

Gender	Female	Male	Grand Total
Add Prof, Sci & Tech	133	40	173
Add Clin Services	1245	116	1361
Admin	985	158	1143
AHP	412	88	500
Estates	2	2	4
HCS	92	30	122
Med & Den	183	217	400
Reg Nur & Mid	1968	119	2087
Students	7		7
Grand Total	5027	770	5797

Sexual Orientation	LGB	Heterosexual	Other SO not listed	Undecided	IDNWTD	Grand Total
Add Prof, Sci & Tech	4	129			40	173
Add Clin Services	23	989		1	348	1361
Admin	17	844			282	1143
AHP	11	384			105	500
Estates	0	3			1	4
HCS	3	76			43	122
Med & Den	10	266			124	400
Reg Nur & Mid	35	1513	1	2	536	2087
Students	0	6			1	7
Grand Total	103	4210	1	3	1480	5797

Disability	No	Yes	Not Declared	Grand Total
Add Prof, Sci & Tech	130	6	37	173
Add Clin Services	1015	34	312	1361
Admin	863	37	243	1143
AHP	394	19	87	500
Estates	4			4
HCS	82	1	39	122
Med & Den	223	4	173	400
Reg Nur & Mid	1499	67	521	2087
Students	7			7
Grand Total	4217	168	1412	5797

Religious Belief	Christianity	All other religions	IDNWTD	Grand Total
Add Prof, Sci & Tech	69	62	42	173
Add Clin Services	710	295	356	1361
Admin	589	257	297	1143
AHP	238	156	106	500
Estates	3	0	1	4
HCS	44	32	46	122
Med & Den	81	191	128	400
Reg Nur & Mid	1176	386	525	2087
Students	5	1	1	7
Grand Total	2915	1380	1502	5797

Staff Groups	<=20 Years	21-25	26-30	31-35	36-40	41-45	46-50	51-55	56-60	61-65	66+	Grand Total
Add Prof, Sci & Tech		11	22	35	23	21	21	16	12	8	4	173
Add Clin Services	16	93	185	155	159	130	162	177	182	79	23	1361
Admin	17	81	82	108	109	105	162	182	177	98	22	1143
AHP		40	77	82	80	61	68	47	29	16		500
Estates							1	1	2			4
HCS		9	13	17	19	21	14	9	13	5	2	122
Med & Den		42	38	34	48	64	57	48	39	24	6	400
Reg Nur & Mid		151	258	265	257	253	281	276	225	102	19	2087
Students					2	3	2					7
Grand Total	33	427	675	696	697	658	768	756	679	332	76	5797

Recruitment and selection

Ethnic Origin	White	вме	Not stated	IDNWTD
No. of shortlisted applicants	2392	779	25	36
No. appointed from shortlisting	471	110	12	5
Relative likelihood of shortlisting/appointed	19.69%	14.12%	48.00%	13.89%

Gender	Female	Male	IDNWTD
No. of shortlisted applicants	2125	506	3
No. appointed from shortlisting	482	116	0
Relative likelihood of shortlisting/appointed	22.68%	22.92%	0.00%

Religion	All other Religions	Christianity	IDNWTD
No. of shortlisted applicants	1029	1346	258
No. appointed from shortlisting	206	318	73
Relative likelihood of shortlisting/appointed	20.02%	23.63%	28.29%

Age	No. of shortlisted applicants	No. appointed from shortlisting	Relative likelihood of shortlisting/appointed
Under 20	62	27	43.55%
20 - 24	369	89	24.12%
25 - 29	495	103	20.81%
30 - 34	407	94	23.10%
35 - 39	352	73	20.74%
40 - 44	266	50	18.80%
45 - 49	251	58	23.11%
50 - 54	210	56	26.67%
55 - 59	146	31	21.23%
60 - 64	62	14	22.58%
65+	14	3	21.43%
Not stated	-	-	-

Sexual Orientation	Heterosexual	LGB	IDNWTD	Undecided
No. of shortlisted applicants	2440	107	84	3
No. appointed from shortlisting	555	91	27	0
Relative likelihood of shortlisting/appointed	22.75%	85.05%	32.14%	0.00%

Disability	No	Yes	IDNWTD
No. of shortlisted applicants	2482	100	52
No. appointed from shortlisting	561	20	17
Relative likelihood of shortlisting/appointed	22.60%	20.00%	32.69%

Transgender	No	Yes	IDNWTD
No. of shortlisted applicants	65	0	2569
No. appointed from shortlisting	35	0	563
Relative likelihood of shortlisting/appointed	53.85%	-	21.92%

Pay band

ВМЕ	ВМЕ	BME %	Not Stated	Not Stated %	White	White %	Grand Total	Grand Total %
< Band 1	2	0.2%	1	0.3%	8	0.2%	11	0.2%
Band 1	1	0.1%		0.0%		0.0%	1	0.0%
Band 2	99	12.1%	42	13.6%	816	17.5%	957	16.5%
Band 3	51	6.2%	23	7.4%	586	12.6%	660	11.4%
Band 4	48	5.8%	41	13.3%	441	9.4%	530	9.1%
Band 5	260	31.7%	63	20.4%	899	19.3%	1222	21.1%
Band 6	116	14.1%	57	18.4%	960	20.6%	1133	19.5%
Band 7	52	6.3%	21	6.8%	465	10.0%	538	9.3%
Band 8a	15	1.8%	8	2.6%	197	4.2%	220	3.8%
Band 8b	7	0.9%	3	1.0%	63	1.3%	73	1.3%
Band 8c		0.0%	1	0.3%	11	0.2%	12	0.2%
Band 8d	1	0.1%		0.0%	10	0.2%	11	0.2%
Band 9	1	0.1%	1	0.3%	13	0.3%	15	0.3%
Medical	167	20.3%	48	15.5%	185	4.0%	400	6.9%
VSM	1	0.1%		0.0%	13	0.3%	14	0.2%
Grand Total %	821	100.0%	309	100.0%	4667	100.0%	5797	100.0%

Disability	No	No %	Not Declared	Not Declared %	Yes	Yes %	Grand Total	Grand Total %
< Band 1	5	0.12%	5	0.35%	1	0.60%	11	0.2%
Band 1	1	0.02%		0.00%		0.00%	1	0.0%
Band 2	721	17.10%	215	15.23%	21	12.50%	957	16.5%
Band 3	501	11.88%	142	10.06%	17	10.12%	660	11.4%
Band 4	380	9.01%	129	9.14%	21	12.50%	530	9.1%
Band 5	909	21.56%	265	18.77%	48	28.57%	1222	21.1%
Band 6	828	19.63%	276	19.55%	29	17.26%	1133	19.5%
Band 7	395	9.37%	128	9.07%	15	8.93%	538	9.3%
Band 8a	162	3.84%	49	3.47%	9	5.36%	220	3.8%
Band 8b	59	1.40%	12	0.85%	2	1.19%	73	1.3%
Band 8c	9	0.21%	3	0.21%		0.00%	12	0.2%
Band 8d	9	0.21%	2	0.14%		0.00%	11	0.2%
Band 9	12	0.28%	2	0.14%	1	0.60%	15	0.3%
Medical	223	5.29%	173	12.25%	4	2.38%	400	6.9%
VSM	3	0.07%	11	0.78%		0.00%	14	0.2%
Grand Total %	4217	100.0%	1412	100.0%	168	100.0%	5797	100.0%

Sexual Orientation	Heterosexual or Straight	Heterosexual or Straight %	LGB	LGB %	IDNWTD	IDNWTD %	Other SO not listed
< Band 1	6	0.1%	1	1.0%	4	0.3%	
Band 1	1	0.0%	0	0.0%		0.0%	
Band 2	707	16.8%	19	18.4%	231	15.6%	
Band 3	488	11.6%	7	6.8%	165	11.1%	
Band 4	367	8.7%	6	5.8%	156	10.5%	
Band 5	926	22.0%	21	20.4%	273	18.4%	1
Band 6	816	19.4%	15	14.6%	301	20.3%	
Band 7	394	9.4%	11	10.7%	133	9.0%	
Band 8a	151	3.6%	7	6.8%	62	4.2%	
Band 8b	54	1.3%	5	4.9%	14	0.9%	
Band 8c	9	0.2%	1	1.0%	2	0.1%	
Band 8d	9	0.2%	0	0.0%	2	0.1%	
Band 9	12	0.3%	0	0.0%	3	0.2%	
Medical	266	6.3%	10	9.7%	124	8.4%	
VSM	4	0.1%	0	0.0%	10	0.7%	
Grand Total %	4210	100.0%	103	100.0%	1480	100.0%	1

Religious belief	Christianity	Christianity %	All Other Religions	All Other Religions %	IDNWTD	IDNWTD %	Grand Total	Grand Total %
< Band 1	2	0.03%	6	0.43%	3	0.20%	11	0.2%
Band 1	1	17.29%	0	0.00%		0.00%	1	0.0%
Band 2	504	11.90%	207	15.00%	246	16.38%	957	16.5%
Band 3	347	9.09%	143	10.36%	170	11.32%	660	11.4%
Band 4	265	21.85%	112	8.12%	153	10.19%	530	9.1%
Band 5	637	20.14%	313	22.68%	272	18.11%	1222	21.1%
Band 6	587	10.98%	248	17.97%	298	19.84%	1133	19.5%
Band 7	320	3.84%	91	6.59%	127	8.46%	538	9.3%
Band 8a	112	1.34%	42	3.04%	66	4.39%	220	3.8%
Band 8b	39	0.21%	18	1.30%	16	1.07%	73	1.3%
Band 8c	6	0.14%	2	0.14%	4	0.27%	12	0.2%
Band 8d	4	0.24%	3	0.22%	4	0.27%	11	0.2%
Band 9	7	2.78%	4	0.29%	4	0.27%	15	0.3%
Medical	81	0.10%	191	13.84%	128	8.52%	400	6.9%
VSM	3		0	0.00%	11	0.73%	14	0.2%
Grand Total %	4217	100.0%	1412	100.0%	168	100.0%	5797	100.0%

Staff groups	<=20 Years	<=20 Years %	21-25	21-25 %	26-30	26-30 %	31-35	31-35 %	36-40	36-40 %	41-45	41-45 %	46-50	46-50 %	51-55	51-55 %	56-60	56-60 %	61-65	61-65 %	66+	66+ %	Grand Total	Grand Total %
< Band 1	8	24.2%	2	0.5%	1	0.1%		0.0%		0.0%		0.0%		0.0%		0.0%		0.0%		0.0%		0.0%	11	0.2%
Band 1		0.0%		0.0%		0.0%		0.0%		0.0%		0.0%	1	0.1%		0.0%		0.0%		0.0%		0.0%	1	0.0%
Band 2	16	48.5%	75	17.6%	100	14.8%	95	13.6%	106	15.2%	79	12.0%	102	13.3%	135	17.9%	155	22.8%	67	20.2%	27	35.5%	957	16.5%
Band 3	7	21.2%	42	9.8%	74	11.0%	77	11.1%	62	8.9%	59	9.0%	80	10.4%	99	13.1%	90	13.3%	59	17.8%	11	14.5%	660	11.4%
Band 4	2	6.1%	48	11.2%	70	10.4%	44	6.3%	53	7.6%	41	6.2%	79	10.3%	77	10.2%	76	11.2%	35	10.5%	5	6.6%	530	9.1%
Band 5		0.0%	182	42.6%	214	31.7%	169	24.3%	133	19.1%	128	19.5%	135	17.6%	95	12.6%	93	13.7%	61	18.4%	12	15.8%	1222	21.1%
Band 6		0.0%	33	7.7%	145	21.5%	170	24.4%	171	24.5%	144	21.9%	146	19.0%	144	19.0%	119	17.5%	50	15.1%	11	14.5%	1133	19.5%
Band 7		0.0%	3	0.7%	21	3.1%	68	9.8%	83	11.9%	79	12.0%	103	13.4%	86	11.4%	66	9.7%	27	8.1%	2	2.6%	538	9.3%
Band 8a		0.0%		0.0%	5	0.7%	27	3.9%	31	4.4%	40	6.1%	40	5.2%	41	5.4%	30	4.4%	5	1.5%	1	1.3%	220	3.8%
Band 8b		0.0%		0.0%	6	0.9%	10	1.4%	7	1.0%	14	2.1%	11	1.4%	16	2.1%	7	1.0%	1	0.3%	1	1.3%	73	1.3%
Band 8c		0.0%		0.0%	1	0.1%	2	0.3%		0.0%	1	0.2%	2	0.3%	4	0.5%	1	0.1%	1	0.3%		0.0%	12	0.2%
Band 8d		0.0%		0.0%		0.0%		0.0%	2	0.3%	3	0.5%	3	0.4%	3	0.4%		0.0%		0.0%		0.0%	11	0.2%
Band 9		0.0%		0.0%		0.0%		0.0%	1	0.1%	5	0.8%	4	0.5%	5	0.7%		0.0%		0.0%		0.0%	15	0.3%
Medical		0.0%	42	9.8%	38	5.6%	34	4.9%	48	6.9%	64	9.7%	57	7.4%	48	6.3%	39	5.7%	24	7.2%	6	7.9%	400	6.9%
VSM		0.0%		0.0%		0.0%		0.0%		0.0%	1	0.2%	5	0.7%	3	0.4%	3	0.4%	2	0.6%		0.0%	14	0.2%
Grand Total %	33	100.0%	427	100.0%	675	100.0%	696	100.0%	697	100.0%	658	100.0%	768	100.0%	756	100.0%	679	100.0%	332	100.0%	76	100.0%	5797	100.0%

	Atheism	Atheism %	Buddhism	Buddhism %	Christianity	Christianity %	Hinduism	Hinduism %	Islam	Islam %	Jainism	Jainism %	Judaism	Judaism %	Other	Other %	Sikhism	Sikhism %	IDNWTD	IDNWTD %	Grand Total	Grand Total %
< Band 1	5	0.9%		0.0%	2	0.1%		0.0%	1	0.3%		0.0%		0.0%		0.0%		0.0%	3	0.2%	11	0.2%
Band 1		0.0%		0.0%	1	0.0%		0.0%		0.0%		0.0%		0.0%		0.0%		0.0%		0.0%	1	0.0%
Band 2	71	12.2%	2	25.0%	504	17.3%	12	10.8%	38	12.3%	1	50.0%	2	12.5%	81	23.4%		0.0%	246	16.4%	957	16.5%
Band 3	55	9.4%		0.0%	347	11.9%	8	7.2%	27	8.7%		0.0%		0.0%	53	15.3%		0.0%	170	11.3%	660	11.4%
Band 4	48	8.2%		0.0%	265	9.1%	13	11.7%	20	6.5%	1	50.0%		0.0%	30	8.7%		0.0%	153	10.2%	530	9.1%
Band 5	155	26.6%	2	25.0%	637	21.9%	7	6.3%	90	29.0%		0.0%	2	12.5%	57	16.5%		0.0%	272	18.1%	1222	21.1%
Band 6	122	20.9%	1	12.5%	587	20.1%	10	9.0%	44	14.2%		0.0%	6	37.5%	65	18.8%		0.0%	298	19.8%	1133	19.5%
Band 7	35	6.0%		0.0%	320	11.0%	7	6.3%	25	8.1%		0.0%	1	6.3%	23	6.6%		0.0%	127	8.5%	538	9.3%
Band 8a	19	3.3%	1	12.5%	112	3.8%	1	0.9%	6	1.9%		0.0%	1	6.3%	14	4.0%		0.0%	66	4.4%	220	3.8%
Band 8b	10	1.7%		0.0%	39	1.3%	1	0.9%	4	1.3%		0.0%		0.0%	3	0.9%		0.0%	16	1.1%	73	1.3%
Band 8c	1	0.2%		0.0%	6	0.2%		0.0%		0.0%		0.0%		0.0%	1	0.3%		0.0%	4	0.3%	12	0.2%
Band 8d	1	0.2%		0.0%	4	0.1%		0.0%	1	0.3%		0.0%		0.0%	1	0.3%		0.0%	4	0.3%	11	0.2%
Band 9	2	0.3%		0.0%	7	0.2%		0.0%	1	0.3%		0.0%		0.0%	1	0.3%		0.0%	4	0.3%	15	0.3%
Medical	59	10.1%	2	25.0%	81	2.8%	52	46.8%	53	17.1%		0.0%	4	25.0%	17	4.9%	4	100.0%	128	8.5%	400	6.9%
VSM		0.0%		0.0%	3	0.1%		0.0%		0.0%		0.0%		0.0%		0.0%		0.0%	11	0.7%	14	0.2%
Grand Total %	583	100.0%	8	100.0%	2915	100.0%	111	100.0%	310	100.0%	2	100.0%	16	100.0%	346	100.0%	4	100.0%	1502	100.0%	5797	100.0%

Sexual Orientation	Heterosexual or Straight	LGB	IDNWTD	Other SO not listed	Undecided	Grand Total
< Band 1	6	1	4			11
Band 1	1	0				1
Band 2	707	19	231			957
Band 3	488	7	165			660
Band 4	367	6	156		1	530
Band 5	926	21	273	1	1	1222
Band 6	816	15	301		1	1133
Band 7	394	11	133			538
Band 8a	151	7	62			220
Band 8b	54	5	14			73
Band 8c	9	1	2			12
Band 8d	9	0	2			11
Band 9	12	0	3			15
Medical	266	10	124			400
VSM	4	0	10			14
Grand Total %	4210	103	1480	1	3	5797

Gender	Female	Male	Grand Total
< Band 1	10	1	11
Band 1	1		1
Band 2	879	78	957
Band 3	598	62	660
Band 4	488	42	530
Band 5	1108	114	1222
Band 6	1025	108	1133
Band 7	480	58	538
Band 8a	166	54	220
Band 8b	52	21	73
Band 8c	11	1	12
Band 8d	7	4	11
Band 9	11	4	15
Medical	183	217	400
VSM	8	6	14
Grand Total %	5027	770	5797

Disability	No	Not Declared	Yes	Grand Total
< Band 1	5	5	1	11
Band 1	1			1
Band 2	721	215	21	957
Band 3	501	142	17	660
Band 4	380	129	21	530
Band 5	909	265	48	1222
Band 6	828	276	29	1133
Band 7	395	128	15	538
Band 8a	162	49	9	220
Band 8b	59	12	2	73
Band 8c	9	3		12
Band 8d	9	2		11
Band 9	12	2	1	15
Medical	223	173	4	400
VSM	3	11		14
Grand Total %	4217	1412	168	5797

Religious belief	Christianity	All Other Religions	IDNWTD	Grand Total
< Band 1	2	6	3	11
Band 1	1	0		1
Band 2	504	207	246	957
Band 3	347	143	170	660
Band 4	265	112	153	530
Band 5	637	313	272	1222
Band 6	587	248	298	1133
Band 7	320	91	127	538
Band 8a	112	42	66	220
Band 8b	39	18	16	73
Band 8c	6	2	4	12
Band 8d	4	3	4	11
Band 9	7	4	4	15
Medical	81	191	128	400
VSM	3	0	11	14
Grand Total %	2915	1380	1502	5797

	Atheism	Buddhism	Christianity	Hinduism	Islam	Jainism	Judaism	Other	Sikhism	IDNWTD	Grand Total
< Band 1	5		2		1					3	11
Band 1			1								1
Band 2	71	2	504	12	38	1	2	81		246	957
Band 3	55		347	8	27			53		170	660
Band 4	48		265	13	20	1		30		153	530
Band 5	155	2	637	7	90		2	57		272	1222
Band 6	122	1	587	10	44		6	65		298	1133
Band 7	35		320	7	25		1	23		127	538
Band 8a	19	1	112	1	6		1	14		66	220
Band 8b	10		39	1	4			3		16	73
Band 8c	1		6					1		4	12
Band 8d	1		4		1			1		4	11
Band 9	2		7		1			1		4	15
Medical	59	2	81	52	53		4	17	4	128	400
VSM			3							11	14
Grand Total	583	8	2915	111	310	2	16	346	4	1502	5797

Staff Groups	<=20 Years	21-25	26-30	31-35	36-40	41-45	46-50	51-55	56-60	61-65	66+	Grand Total
< Band 1	8	2	1								5	11
Band 1							1					1
Band 2	16	75	100	95	106	79	102	135	155	67	27	957
Band 3	7	42	74	77	62	59	80	99	90	59	11	660
Band 4	2	48	70	44	53	41	79	77	76	35	5	530
Band 5		182	214	169	133	128	135	95	93	61	12	1222
Band 6		33	145	170	171	144	146	144	119	50	11	1133
Band 7		3	21	68	83	79	103	86	66	27	2	538
Band 8a			5	27	31	40	40	41	30	5	1	220
Band 8b			6	10	7	14	11	16	7	1	1	73
Band 8c			1	2		1	2	4	1	1		12
Band 8d					2	3	3	3				11
Band 9					1	5	4	5				15
Medical		42	38	34	48	64	57	48	39	24	6	400
VSM						1	5	3	3	2		14
Grand Total	33	427	675	696	697	658	768	756	679	332	76	5797

Appendix 3: Interpretation language requests

A full list of languages and the total number of face to face and telephone interpretation appointments provided by our external provider are listed in the table below.

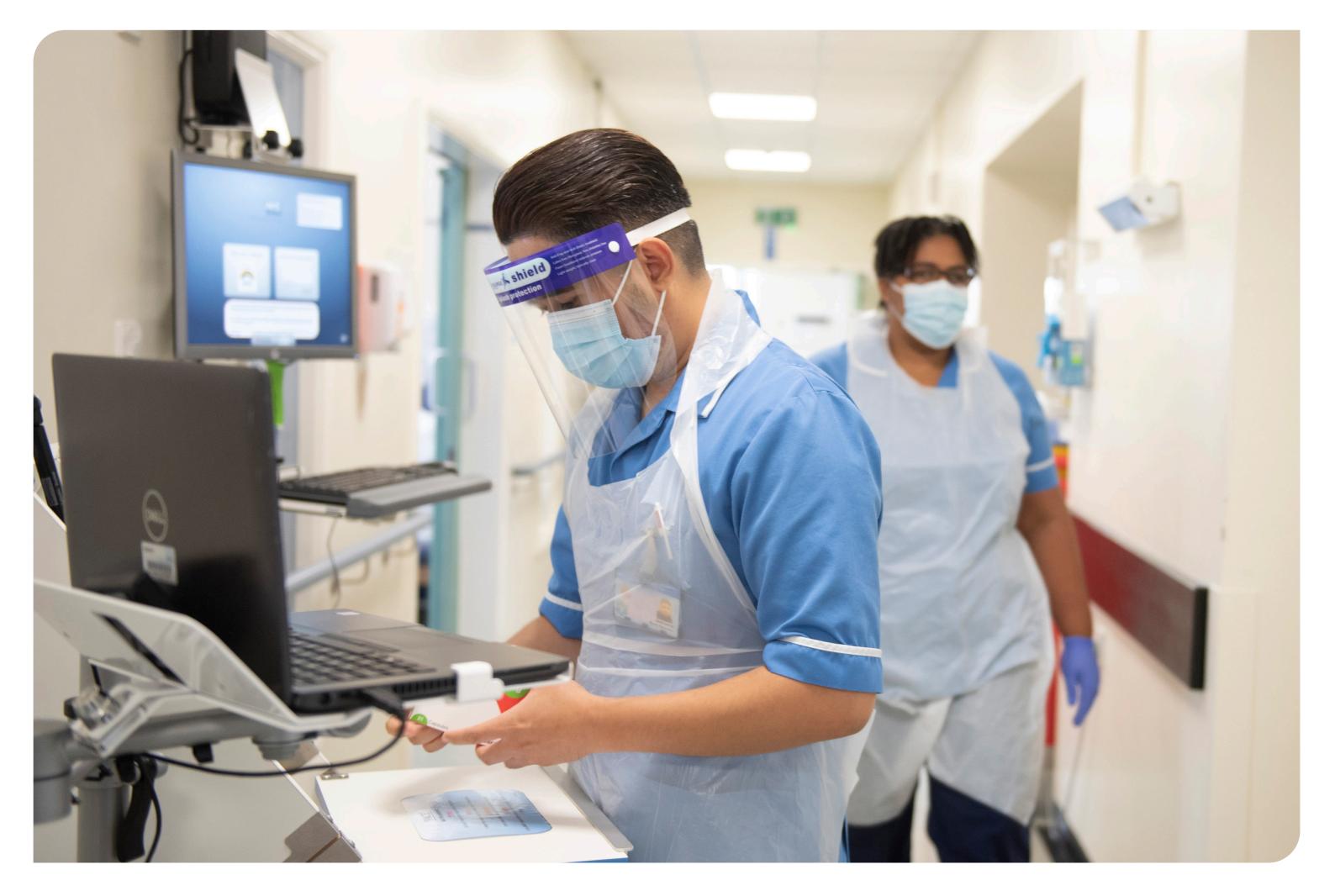
• Urdu	3002
• Arabic	1440
• Somali	1351
Hungarian	1338
• Gujarati	895
Kurdish Sorani	778
• Polish	625
• Farsi	502
Romanian	489
• Swahili	429
• Punjabi	354
• Oromo	323
 Portuguese 	315
• Czech	279
• Slovak	262
• Pashto	257
• Spanish	230
Bengali	222
Tigrinya	215
Mandarin	130
Albanian	120
Turkish	109
Amharic	95
• Cantonese	95
• Italian	94
• French	89
• Russian	67
Lithuanian	62
 Vietnamese 	56
• Hindi	54
• Dari	29
Bulgarian	28
Behdini	22

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