



**Surrey and Borders
Partnership**
NHS Foundation Trust

**Annual Equality
Information Report
April 2016 – March 2017**

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Bengali

যদি আপনি এই ডকুমেন্ট অন্য ভাষায় বা ফরমেটে চান, তাহলে দয়া করে আমাদেরকে বলুন। 0300 5555 222

Cantonese

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Nepali

तपाईंलाई यो सूचनाको बारेमा धेरै जानकारी चाहिएमा अथवा अन्य भाषामा चाहिएमा हामी संग सम्पर्क राख्नु होला। 0300 5555 222

Punjabi

ਜੇ ਇਹ ਜਾਣਕਾਰੀ ਤੁਹਾਨੂੰ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ ਜਾਂ ਕਿਸੇ ਹੋਰ ਰੂਪ ਵਿਚ ਚਾਹੀਦੀ, ਤਾਂ ਇਹ ਸਾਥੋਂ ਮੰਗ ਲਓ। 0300 5555 222

Urdu

اگر آپ کو معلومات کسی دیگر زبان یا دیگر شکل میں درکار ہوں تو برائے مہربانی ہم سے پوچھئے۔

0300 5555 222

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Jargon Buster

This is a list of abbreviations used in this report. If any other terms come up that are unfamiliar, please do ask us for clarification.

Acronym	Meaning
BME	Black and Minority Ethnic
DART	Our electronic patient record system
DATIX	Our system for recording incidents, risks and near misses
LGBT	Lesbian, Gay, Bisexual and Transgender
WRES	Workforce Race Equality Scheme

Foreword from the Chief Executive



We are pleased to publish the 2016/17 Annual Equality Information Report highlighting key equality information on our workforce and people who use our services. This is one of the measures we use to ensure we are transparent in our decision-making processes and accountable to the populations we serve.

As one of the leading mental health and learning disability employers and service providers in southern England, we are very conscious of the responsibility we hold to tailor our services and working environment to best suit the people who use them.

This year we have made good progress with talking to people who use services about their disabilities and identifying people who use our adult mental health services who are also carers. These invaluable equality insights help us to meet people's individual needs and plan our services as well as providing insight about the mental health needs of these particular groups to local policy makers and commissioners.

We do however recognise that we have work to do to address equality amongst our staff, particularly the disproportionate number of staff from black and minority ethnic backgrounds who are involved in our disciplinary process. Work is underway to review this and other areas where we need to improve the experience of our staff.

Organisationally, 2016 heralded the start of a new four year equality journey, as we published six Equality Objectives that we aim to deliver by the end of 2020. These objectives consolidate our current equality commitments and outline changes we hope to bring within our Trust, for our staff, within our local communities, for the people who use our services and their families and carers. As part of this work we consulted staff and stakeholders about what our annual equality targets should be, and have produced an Equality Delivery Plan to help us monitor progress towards our actions and deliverables for 2017/18.

We very much look forward to reporting our positive progress against our equality objectives and improving people's experiences as a result in the coming years.

A handwritten signature in black ink, appearing to read 'Fiona Edwards'.

Fiona Edwards
Chief Executive

About Surrey and Borders Partnership

We are ambitious providers of mental health, drug and alcohol and learning disability services for people of all ages.

We provide a broad range of community services, integrated health and social care, early intervention and detection programmes, as well as highly specialised therapy and treatment. Our high quality care focuses on enabling people to live well with their conditions and to work towards recovery.

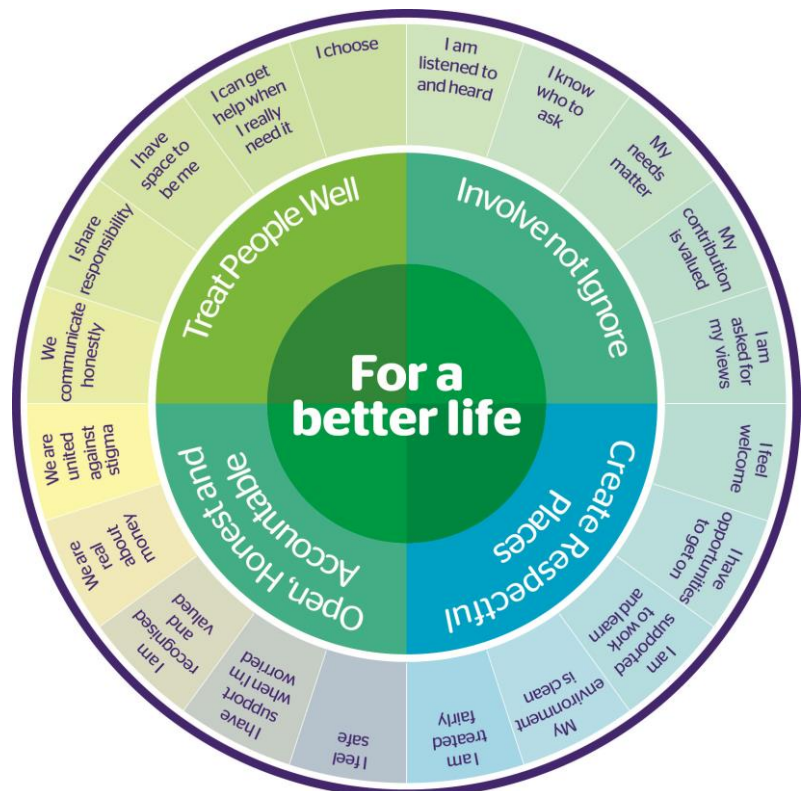
We have 2,404 people working with us, which equates to 2,173 whole time equivalent staff, plus 177 social care staff who work within our integrated teams. Many of these are highly-skilled professionals who work with a variety of partners in the private, public and voluntary sectors to ensure we deliver high quality care to our local population of 1.3 million. We seek to involve and engage people who use our services and their families in our community and we have around 6,500 public members of our Foundation Trust.

In April 2005 we were established as a health and social care partnership trust and, in May 2008, we became an NHS Foundation Trust; the first mental health and learning disability trust in the South East Coast NHS region to gain this status.

Our overall income for the 2016/17 financial year was £164 million.

Our Strategy

Our core purpose is: “To work with people and lead communities in improving their mental and physical health and wellbeing for a better life; through delivering excellent and responsive prevention, diagnosis, early intervention, treatment and care.”



Population We Serve

We appreciate the significance of fully understanding the demographics of the local community that we serve in allowing us to continue to improve the quality of our care for each individual. This information plays an important role in service provision. We serve a population of 1.3 million, which is characterised by largely affluent communities. However, there are pockets of significant deprivation across the communities we serve specifically in areas of Woking, Aldershot, Spelthorne, Epsom & Ewell, Reigate, Banstead, Guildford, Hounslow, and Brighton.

Surrey

Surrey has a greater White British population (83.51%) than England as a whole (79.8%), and the majority of residents identify as Christian (62.8%). 10.3% of people living in Surrey are from a Black, Minority, Ethnic (BME) background with Woking having the highest BME population (13.2%), and Waverley the lowest (7.3%). Surrey's Gypsies & Traveller population is one of the largest in the country (at around 10,000). Surrey's male: female ratio is 49.1% and 50.9% respectively, reflecting national figures. There are more people aged 65 and over than the national average. 13.54% of people (or 153,354) report having a long term illness or disability limiting their daily activities.

North East Hampshire

Hampshire's population is similar to Surrey in many respects. The ethnic diversity in Hampshire is much lower than England as a whole (8.2% compared to 20.2% respectively) with 91.8% of people being White British. Christian is also the largest religious group in Hampshire (62.4%). Hampshire has an aging population with 64% of people aged between 18-64 years with those over the age of 75 making up 10% of the population (compared to 8% nationally). Almost 1 in 5 (18%) of people report having a long term illness or disability that restricts their daily activities.

Hounslow

Hounslow is characterised as being ethnically diverse and populated by younger people. 46% of the population identify as being Black, Asian or Minority Ethnic (BME). In 2011, 52% of people living in Hounslow were under the age of 35, with 19.1% being under the age of 15. Only 4.8% of people are aged over 75 years. 19% of the White population are over 60 years with 21% being 20 years of age compared to 34% of the BME population (being 20 years of age). Over 50.1% of the population are male. Christians are the largest religious group (42%) followed by Muslims (14%), Hindus (10.3%), Sikhs (9%) & Buddhists (1.4%) with 18% stating they are not religious.

Brighton & Hove

Brighton & Hove is also known for its young population: 16% of the population aged under 16, and 13% aged 65 or above. There is a large student population with full-time students aged over 16 accounting for 14.1% of residents (32,920). In 2011, 20% of the population (53,351 people) were from a BME background. It is estimated, lesbian, gay & bisexual residents aged 16 years or more represent 11-15% of the population which is higher than the national average. 16% of people report being disabled or having a long term health problem limiting their day-to-day activities.

Croydon

Croydon has the largest population of all London boroughs at 363,400.44.91% of the population are non-White. Other than English, the most common languages spoken are Tamil, Urdu, Gujarati and Polish. People over 65 represent nearly 13% of the population which is expected to grow by more than a fifth by 2021. Croydon is 48% male, 52% female. The majority of the population identify as Christian (56.42%), the next largest religious group is Muslim at 8.12% with 19.9% stating they have no religion. 16.96% of people of working age in Croydon report that they have a disability.

All data provided is from the Office of National Statistics 2011

Our Equality Objectives for 2016 - 2020

This year we implemented the NHS' Equality Delivery System 2 and published six new Equality Objectives to be delivered over the next four years to tackle equality and human rights issues for our staff, people who use our services and their carers. As part of this, we consulted staff and stakeholders about what our annual equality targets should be, and produced an Equality Delivery Plan to monitor progress towards our actions and deliverables for 2017/18.

Equality Objectives 2016 - 2020
1) Staff report that they are free from discrimination and abuse in the workplace
2) Improve the representation of staff with protected characteristics across the Trust to proportionately reflect the workforce profile
3) Develop strong partnerships with groups representing people with protected characteristics at a local and national level to inform service developments and improve access to services for everyone
4) People who use services and carers report they are involved with decisions about their care
5) Implement the Health Equality Framework (HEF) across all health services to ensure the health needs for people with learning disabilities are assessed and health outcomes are improved
6) Increase numbers of older people accessing Improving Access to Psychological Therapies (IAPT) services to reduce levels of mild/moderate depression and improve their health outcomes

Progress Made in 2016/17

- We consulted various teams and produced an organisational Equality Delivery Plan for 2017/18. The plan contains our equality commitments, actions and deliverables across the six equality objectives for the forthcoming year.
- Monitoring our performance against our equality and human rights objectives is included within our reporting to the Executive Board as part of our quality indicators. Progress against annual targets for each of the six objectives is monitored by the Chief Nurse's Directorate Management Team.
- Implementation of the Accessible Information Standard was another area of focus for 2016/17, to ensure that people with disabilities and sensory impairments can communicate with us and receive information in their preferred format. This work included developing a communications alert within our electronic health records system, adding key communications needs questions to our online assessment form and developing good practice examples of care plans and discharge summaries in easy read formats.
- We continue to support the NHS Workforce Race Equality Standard and have produced a specific action plan to drive forward change during 2017/18 in those areas where we are not performing to our required standards. This includes addressing the issue of more BME staff experiencing discrimination at work than other staff (see page 12).
- Going forward we are committed to adopting the Workforce Disability Equality Standard and rolling-out the Sexual Orientation Monitoring Standard once these become available. We will be working alongside all of our staff networks as we promote and deliver upon the above NHS equality standards and frameworks.

2016/17 Developments

Workforce

Our Respect Programme was formally launched in 2014 to provide support to staff who may experience discriminatory abuse. During this reporting year we have expanded the size of the team leading this area of work to provide additional support to staff within the Trust, and have produced a variety of new supporting materials to help staff (see further details on page 12).

We continue to be a Stonewall Champion, which is Britain's good practice employers' forum on sexual orientation. In 2017, we ranked 204 out of 439 organisations who participated in Stonewalls Workplace Equality Index, this is higher than 2016 when we ranked 230 out of 398 organisations. We are working closely with our LGBT staff network to embed improvements to hopefully increase our ranking next year too.

Our four Equality Staff Networks (Black and Minority Ethnic Network, Disability Network, Lesbian, Gay, Bisexual & Transgender Network and Spirituality and Faith Forum) have continued to grow their membership base, and our LGBT Network has attracted a large number of straight allies. The Faith Network now runs weekly mindfulness sessions for staff at Farnham Road Hospital and has also delivered mindful training for staff. The Chair of our Disability Network has been contributing articles in our staff e-bulletin, sharing her experiences of how having a disability alters the things others can take for granted, which has been both enlightening and thought provoking.

All of the networks have been working with our Human Resources team and have begun a successful new initiative called, 'People before Process'. This has involved co-designing activity to reduce the over representation of BME staff in disciplinary processes: which gained a, 'Speaking Up Together' award at the first ever 'Freedom to Speak Up' awards in 2017.



Care Awards



Our CARE Awards, to recognise the achievements of individual staff members, teams and volunteers, received a record number of 164 nominations this year and the Awards ceremony was extended to include the first four teams to achieve Accreditation to our CARE Excellence Accreditation programme.

Our Environments

Our Estates Strategy has set out a significant transformation programme over the next 10 years for our built environment which will improve the quality of experience for people who use services, carers and families, visitors and staff. Continued investment in our built environment has led us to open new hubs for our community-based services this year in Redhill and Frimley. Modern and high quality consulting rooms, reception areas and staff offices have created positive surroundings for people using our services, their families and our staff. New premises are planned for Runnymede and Spelthorne in 2018. We have relocated our assessment and treatment service for people with a learning disability to refurbished premises in Epsom and continue to develop our plans for our second mental health hospital for people in north west, mid and east Surrey.

CARE Excellence Accreditation

The need to be more ambitious, and further challenge our services to become outstanding, led to the creation and launch of our internal CARE Excellence Accreditation process in 2015/16. Foundation Standards reviews are the first step towards accreditation. All services have undertaken a Foundation Standards self-assessment and peer review in 2016 and have subsequently been given a rating which reflects the CQC rating process. The CARE Excellence Accreditation pilot to move services from 'Good' to 'Outstanding' has been successful, and four services to date have achieved accreditation with five more on the way. These services are our Exemplar Services that have proved that they function well above baseline expectations and involve people well and deliver good outcomes. Other services can arrange visits to these services to see and share good practice (for further details, see page 20).

Community Engagement and Involvement

At Surrey and Borders our values include involving people in our work and our involvement groups are embedded in our governance arrangements. These include our Forum of Carers and people who Use Services (FoCUS), our Child and adolescent mental health Youth Advisors programme (CYA), our Carers Action Group, Recovery Colleges and Foundation Trust membership.

We particularly ensure we involve people in our service changes and developments. In the past year this has included work on our mental health hospitals redevelopment programme, with three co-design workshops in May 2016. Sixty five stakeholders talked to us about their requirements for a really good new mental health hospital, which helped to inform our critical success factors and benefits criteria for our second hospital. We have also involved people in the design and modelling for our multi-agency Single Point of Access service for people in mental health crisis, which is due to launch in 2018. Planning has involved a range of workshops, presentations and surveys throughout the year with people using our services and carers, including a week long session in August 2016 to plan the service model.

We are proud to have received our second gold star in 2016 as part of the Triangle of Care programme, which aims to better support carers and engage them in the planning of people's care and treatment. Our progress against the Triangle of Care is managed by our Carers Action Group, which was also involved in reviewing the self assessments from each team and giving feedback from local carers about our performance.



During the year we have reached out to our local communities with a focus on engaging with protected characteristics' groups that we have not recently linked with. This has included: working with Outline, the local charity supporting LGBT people; attending freshers fayres at universities; and talking to people at youth events run by the BME Forum.

Looking ahead, we will be continuing to involve people in the development of our new hospital facilities for people in north west, mid and east Surrey and the design of our Single Point of Access service for people in a mental health crisis.

Our Workforce in Detail

Workforce Composition

Ethnicity

29.6% of staff employed by the Trust are from a BME background. This has remained very stable in the last three years.

Ethnicity, sum by headcount	31 March 2015 %	31 March 2016 %	31 March 2017 %
White – British	59.2	59.2	58.8
White – Irish	2.0	2.2	2.1
White – Any other White background	9.2	9.1	9.5
Mixed – White and Black Caribbean	0.3	0.2	0.2
Mixed – White and Black African	0.3	0.4	0.4
Mixed – White and Asian	1.1	1.1	1.1
Mixed – Any other mixed background	1.1	1.1	1.3
Asian or Asian British – Indian	3.5	3.0	3.3
Asian or Asian British – Pakistani	1.0	1.1	1.3
Asian or Asian British – Bangladeshi	0.2	0.2	0.1
Asian or Asian British – Any other Asian background	6.4	6.1	6.1
Black or Black British – Caribbean	103	1.7	1.9
Black or Black British – African	8.2	8.9	8.6
Black or Black British – Any other Black background	1.0	0.8	0.8
Chinese	0.6	0.5	0.4
Any other Ethnic Group	4.0	3.7	3.5
Not Stated	0.5	0.6	0.7
Grand Total	100	100	100

Gender

The gender split of our workforce has changed over the last three years with the percentage of female staff increasing by over 2.5%.

Gender, sum by headcount	31 March 2015 %	31 March 2016 %	31 March 2017 %
Female	71.88	72.85	74.51
Male	28.13	27.15	25.49
Grand Total	100	100	100

Age

The number of staff in the under 35 range has increased which is positive for our age profile as we need to replace staff who are retiring. The highest percentage of our staff are within the 46-55 range. We need to continue to monitor the age profile of our workforce and encourage younger workers to join our Trust by increased participation in careers fairs and giving more opportunities for work experience and apprenticeships.

Age, sum by headcount	31 March 2015 %	31 March 2016 %	31 March 2017 %
18 – 25	3.13	3.28	4.02
26 – 35	15.13	17.48	18.35
36 – 45	26.49	25.44	24.69
46 – 55	35.10	33.48	34.11
56 – 65	18.39	18.16	16.56
66 +	1.77	2.16	2.28
Grand Total	100	100	100

Religion and Belief

Surrey has a larger Christian population than represented by our staff which could be explained by the higher number of White British people in the local population, than within our staff, where the religious belief has traditionally been Christianity. The numbers of staff who do not wish to disclose their religion/ belief has gradually reduced across the majority of professional staff groups over the last three years. There is a wide and positive diversity of religious belief in all professions within our Trust.

Religion and Belief, sum by headcount	31 March 2015 %	31 March 2016 %	31 March 2017 %
Atheism	10.5	11.5	12.4
Buddhism	1.5	1.5	1.4
Christianity	53.5	53.1	52.6
Hinduism	5.3	5.0	5.4
Islam	4.6	4.4	4.2
Judaism	0.2	0.2	0.2
Other	7.2	8.3	8.6
Sikhism	0.6	0.4	0.6
Not disclosed	16.5	15.6	14.5
Grand Total	100	100	100

Sexual Orientation

2% of our workforce positively identify as being LGBT but over 12% of staff do not wish to disclose their sexual orientation. Whilst the number of staff not disclosing has reduced steadily over the last few years our staff are less likely to disclose their sexuality than any other protected characteristic. This may be because they do not feel it is in the interests of the Trust to know this but could also be because they do not feel safe to be 'out' at work.

Sexual Orientation, sum by headcount	31 March 2015 %	31 March 2016 %	31 March 2017 %
Bisexual	0.4	0.4	0.4
Gay	1.0	0.9	0.9
Heterosexual	81.7	83.7	85.2
Lesbian	0.7	0.7	0.7
Not disclosed	16.2	14.2	12.7
Grand Total	100	100	100

Disability

The number of staff with a disability is the same as last year. We employ less staff with a disability compared to the local population. However, accurate comparisons are not possible as the Surrey demographics are from people of all ages, not just of working age (noting that the upper working age limit has now been removed). The Trust has employed an additional three staff with a learning disability and seeks to increase this number. Data is continuing to improve with more staff declaring whether they have a disability or not.

Disability, sum by headcount	31 March 2015 %	31 March 2016 %	31 March 2017 %
No	86.6	88.2	89.4
Yes	5.7	5.4	5.4
Not disclosed	7.7	6.4	5.1
Grand Total	100	100	100

For further information about our workforce please see our full Workforce Equality & Diversity Report April 2016 – March 2017 which is available to view online at www.sabp.nhs.uk/aboutus.

NHS Staff Survey Results for the Workforce Race Equality Standard

The scores presented below are those which are reviewed as part of the Workforce Race Equality Standard (WRES) reporting for 2016/17. Our results are slightly more positive than the average for mental health Trusts overall but we note that the employee experience is less positive for BME staff.

			Our Trust %	Average (median) for mental health %
KF26	Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months	White	27	31
		BME	38	38
KF21	Percentage of staff believing that the organisation provides equal opportunities for career progression or promotion	White	90	89
		BME	81	79

We have produced a WRES action plan to drive forward change during 2017/18 in those areas where we are not performing to our required standards. This includes addressing the issue of more BME staff experiencing discrimination at work than other staff. We have also been co-designing and co-producing how we work together through our 'People Before Process' initiative to improve the experience of our staff from BME communities. The programme has found new ways of working together to address over representation of BME staff in our disciplinary processes. This has resulted in changes to our policies and procedures and has initiated action learning for senior leaders and Staff Network Chairs.

Staff Reported Incidents and Discrimination at Work

Protected Characteristic	31 March 2015 %	31 March 2016 %	31 March 2017 %
Age	3	1	2
Disability	6	6	4
Race	54	51	29
Religion and Belief	3	6	5
Gender	11	2	5
Sexual Orientation	5	4	1
Carer	N/A	N/A	1

Source: DATIX

Future Priorities and Targets

In the coming year, our Trust-wide actions will focus on our lowest staff scores compared with our sector, which will include an improvement in the number of employees reporting that they believe our Trust and management have an interest in, and take action on, health and wellbeing, as well as providing equal opportunities for career progression or promotion. We particularly want to focus on increasing the number of staff that report having had an appraisal and on decreasing those that report experience of violence or discrimination at work. We want to target some actions with our Staff Networks, where particular minority groups have highlighted concerns.

We have in place a health and wellbeing action plan, where we are specifically considering how to encourage staff to be more active, for the prevention of musculoskeletal problems and in support of mental health. In 2017/18 we will be reviewing our health and wellbeing strategy and refreshing the action plan underpinning this. We held two staff survey engagement meetings in April 2017 and plan to do more engagement work with our staff, particularly on their experience in the workplace of violence and aggression, discrimination and equal opportunities for career progression.

The Executive Board will monitor performance against these plans on a quarterly basis through Staff Survey update reports.

People Who Use Our Services in Detail

Each year we publish an Access to Services report, which allows us to review the demographics of people who have used our services over the reporting period. From this we can monitor the representation of people with protected characteristics and highlight any over or under representation. Data for this report was extracted from our electronic records system using our Data Analysis and Reporting Tool (DART) for all of the protected characteristics with the exclusion of pregnancy. The comparison data of the local population is based on the relevant census 2011 data.

Summary of Performance

The 2016/17 data about people who use our services highlighted some of the following trends and areas of improvement:



There has been an increase in the number of people reporting having caring responsibilities, rising from 0.7% in 2014/15, to 2.53% in 2015/16 reaching 5% in 2016/17. The service that consistently has the most people identifying as providing a caring role is those accessing Adult Mental Health Services: which increased from 5% in 2015/16, to 9.3% in 2016/17. This 9.3% figure is comparable to the local population, giving us significant insight into the potential impact of caring duties upon people's mental health.

NB The data for those with caring responsibilities, is currently only based on those people who use services who also have a caring role within a mental health capacity



We have made significant improvements in our reporting practices to know about the numbers of people identifying as having a disability. In 2015/16 the disability identification of 66.71% of people accessing our services was, 'unknown'. In 2016/17 this has reduced to 40% (with 60% of people reporting their disability status in 2016/17).



We are currently unable to report on the following protected characteristics 'pregnancy & maternity' and 'transgender'. Further work is needed to improve data gathering and reporting for these groups.



We lack data to know about the sexual orientation of people using our services. Further work is needed to improve data gathering and reporting in this area.

Age

People accessing our Older People’s Mental Health Service accounted for 31% of the total number of people using services in 2016/17, the number of people falling into the broad age range of 20 to 69 years old, or working age adults, makes up just over 46% of the total number of people who use our services. The age data has remained virtually identical to last year.

The 2011 census recorded 172,165 people aged 65+ living in Surrey. This is an increase of 13% since 2001. 30,043 people were aged 85+, an increase of 25.7% since 2001. In Surrey in 2012 there were 15,456 people living with dementia, predicted to rise to 19,000 by 2020. In 2013 the Hampshire 65+ population was 263,134 and is projected to grow to 304,967 by 2020. Furthermore, it is estimated that by 2020, 31% (24,042) of those aged over 65 years in Hampshire will be living with dementia, of who half will be over 85 years of age.

In Surrey, it is estimated that there are 278,248 children and young people aged 0-19 with 54% concentrated in the northern, more urban districts and boroughs of Elmbridge, Epsom and Ewell, Runnymede, Spelthorne, and Surrey Heath. In Hampshire, those under 18 account for almost 21% of the population. A recent increase in birth rate has resulted in a greater proportion of the population being aged under five. These population changes will have a direct effect of the types of services required by our local population.

The table below outlines the age of people accessing our services in 2016/17.

Age	Adult Mental Health Services	Children & Young People’s Services	Learning Disabilities Services	Older People’s Mental Health Services	Specialist Services	Grand Total
0-14	1	3867	19			3897
15-19	653	2368	247		274	3548
20-29	2757	177	809	1	710	4458
30-39	2407	66	459		502	3437
40-49	2487	37	452	8	490	3476
50-59	2218	14	374	65	405	3077
60-69	827	6	240	884	272	2230
70-79	103		113	3208	378	3806
80-89	10		27	5280	618	5937
>90			1	1780	280	2063
Grand Total	11463	6535	2741	11226	3929	35894

Caring Responsibilities

The data for those with caring responsibilities is currently only based on those people who use services who also have a caring role within a mental health capacity. Overall, we have seen an increase in the number of people reporting having caring responsibilities, rising from 0.7% in 2014/15, to 2.53% in 2015/16 reaching 5% in 2016/2017. The service that consistently has the most people identifying as providing a caring role is those accessing Adult Mental Health Services; and this increased from 5% in 2015/2016, to 9.3% in 2016/2017. This particular figure matches local population data where 9.6% of the local population identify as caring regularly for a friend or relative. Also, drawing on local data we know that most carers in the local population are providing less than 20 hours per week, however, 11,000 are providing 20-49 hours per week and 18,500 residents reported that they were caring for a friend or relative for more than 50 hours per week.

Caring Responsibilities	Adult Mental Health Services	Children & Young People's Services	Learning Disabilities Services	Older People's Mental Health Services	Specialist Services	Grand Total
Yes	1061	152	67	382	50	1714
No	10402	6383	2674	10844	3879	34215
Grand Total	11463	6535	2741	11226	3929	35894

Disability

There is a steady increase in the number of people known to our services who identify as having a disability. In 2015/16 the reporting figure for this group was 11%, increasing to 14% for 2016/17. Our data is comparable with local population and the 13.5% who identify as having a long-term illness or disability. People with learning disabilities account for 7.64% of the total number of people using services in 2016/17.

In Surrey 21,233 adults are estimated as having a learning disability, which represents 2.37% of Surrey's adult population. Of these 16,914 people are aged 18-64 and 3,891 are aged 65 and over. As such, the numbers of people with learning disabilities accessing our services, proportionately, are three times higher than those in the local population.

Disability	Adult Mental Health Services	Children & Young People's Services	Learning Disabilities Services	Older People's Mental Health Services	Specialist Services	Grand Total
Yes	2475	799	1244	1572	156	6256
No	5519	3835	610	5037	421	15438
Unknown	3469	1901	887	4617	3352	14235
Grand Total	11463	6535	2741	11226	3929	35894

Ethnicity

The ethnic breakdown of people who use our services has slightly changed from the previous reporting periods. In 2014/15 just over 75% of all people who use our services identified as White, this increased to 82.56 % in 2015/2016 and dropped slightly to 78.5% in 2016/2017. Almost 16% of the data is unknown which might account for these level variances. Asian or Asian British is the next largest ethnic category after White, making up almost 2% of the total people using our services, followed by mixed at 1.6%. These results are largely comparable to the 2011 census data for Surrey.

Ethnicity	Adult Mental Health Services	Children & Young People's Services	Learning Disabilities Services	Older People's Mental Health Services	Specialist Services	Grand Total
White	9108	4781	1977	9330	2987	28210
Mixed	227	251	41	32	32	583
Any Other Group	154	43	28	63	51	340
Asian or Asian British	294	109	63	111	79	657
Black or Black British	144	34	27	30	33	268
Chinese	39	10	5	19	3	76
Data not recorded	1092	1015	431	1409	603	4556
Unknown	405	292	169	232	141	1239
Grand Total	11463	6535	2741	11226	3929	35894

Gender

The gender split for people accessing our services has stayed very similar to last year, with 55% of people using the Trust services being female. The gender ratio is broadly comparable to that of the local population, which stood at 51% females and 49% males in 2011. Women accessing older people's mental health services represent 19.5% of the total number of people accessing our services.

Gender	Adult Mental Health Services	Children & Young People's Services	Learning Disabilities Services	Older People's Mental Health Services	Specialist Services	Grand Total
Female	6232	3374	1127	7000	2129	19879
Male	5228	3160	1614	4226	1797	16043
Unknown	3	1			3	7
Grand Total	11463	6535	2741	11226	3929	35894

Marriage and Civil Partnerships

The largest group using our services is single people, who account for 41% of the people we see, this has risen from 38.66% in 2015/16 and 32.8% in 2014/15. The majority of single people by number are in Adult Mental Health Services whilst in terms of proportion, they are in Learning Disabilities Services. In 2016/17 51% of people accessing Adult Mental Health Services were single, and 73% of people accessing our Learning Disability Services were single.

Marriage & Civil Partnership	Adult Mental Health Services	Children & Young People's Services	Learning Disabilities	Older People's Mental Health Services	Specialist Services	Grand Total
Divorced / Civil Partnership dissolved	675	6	16	466	60	1224
Married / Civil Partner	2335	71	127	4584	640	7762
Separated	454	3	23	64	51	595
Single	5804	5267	2016	597	921	14628
Widowed / Surviving Civil Partner	106	1	14	2149	95	2366
Data not recorded	179	196	147	507	119	1149
Not disclosed	259	10	26	643	38	976
Unknown	1651	981	372	2216	2005	7229
Grand Total	11463	6535	2741	11226	3929	35894

Sexual Orientation

There are significant data gaps relating to the sexual orientation of people accessing our services. We expect to see improvements next year as we further embed and align our electronic reporting system DART across the Trust. Neither the 2001 or 2011 census asked for information on sexual orientation however, according to Census 2001 data there were an estimated 5,700 young people in Surrey aged 11-16 that are LGBT and questioning their sexuality.

Sexual Orientation	Adult Mental Health Services	Children & Young People's Services	Learning Disabilities	Older People's Mental Health Services	Specialist Services	Grand Total
Bisexual	244	71	34	7	17	374
Female lesbian	118	20	8	6	5	157
Heterosexual	6584	1355	900	5580	476	14912
Homosexual	7	7	4	1		19
Male homosexual	85	8	11	6	7	117
Sexual orientation	1273	475	609	3292	282	5934
Data not recorded	2077	3105	500	1294	3050	10035
Not disclosed	838	657	389	955	73	2914
Unknown	237	837	286	85	19	1467
Grand Total	11463	6535	2741	11226	3929	35894

Religion & Belief

31% of people using our services report they are Christian compared to 62.8% in the wider population. Overall, 21% of people report having no religion, this number increases to 33% within Children & Young People's services and falls to 12%, for those accessing older people's services. The proportion of Christians in the local population reduced by 12% between 2001 and 2011, while those reporting to have no religion increased to represent a quarter of the population. 1% of people report as being Muslim and almost half of those people (177 out of 356) are accessing our Adult Mental Health Services. We lack descriptive data for 28% of people who are accessing our services. Further work is required to improve data gathering and reporting in this area.

Religion & Belief	Adult Mental Health Services	Children & Young People's Services	Learning Disabilities	Older People Mental Health Services	Specialist Services	Grand Total
Baha'i	1	1		1		3
Buddhist	54	9	7	6	2	78
Christian	2958	1583	758	5587	396	11289
Hindu		1	1	1		3
Jain	1			1		2
Jewish	1	1				2
Muslim	177	79	43	43	13	356
Not Religious	3214	2128	584	1371	226	7532
Other	1028	225	436	711	180	2580
Pagan	40	6	3		3	52
Sikh	22	3	1	16	1	43
Zoroastrian				4		4
Not recorded	2490	1516	542	1839	2878	9272
Not disclosed	350	244	66	283	31	977
Unknown	1127	739	300	1363	199	3736
Grand Total	11463	6535	2741	11226	3929	35894

Our Performance in Detail

CARE Excellence Accreditation

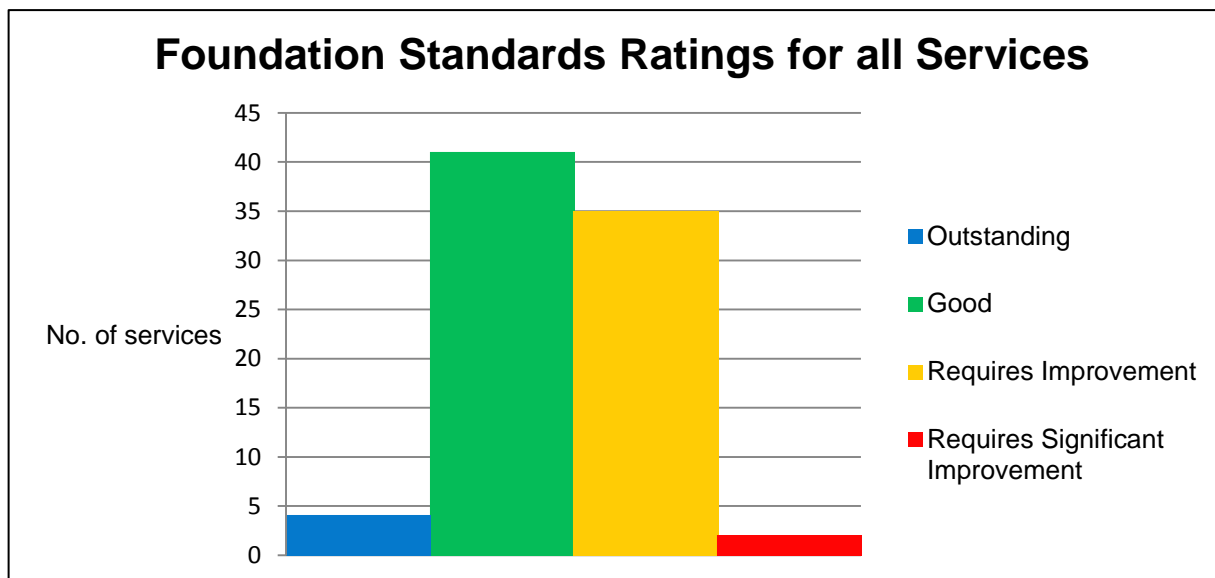
The CARE Excellence Accreditation Foundation Standards were introduced in 2015/16. The standards were developed as an important quality assurance tool, aimed at linking the quality monitoring of service delivery with our Trust's Vision and Values. Each service is expected to score 85% or more overall, and score 85% or more against each of the sub-sections of the standards. Within the outcomes, services have to evidence that staff respect and promote the diversity and human rights of all team members.

The Mandatory Outcomes for equality and diversity include the following:

- At least 90% of records to have all protected characteristics details recorded in SystmOne "Client Demographics > Additional Personal Information". Teams not achieving the required level are re-reviewed against this outcome irrespective of the outcome of the rest of the review
- The other Foundation Standards outcomes include the delivery of same sex accommodation (where applicable), mandatory training, and health & safety and workforce risk assessment

The chart below, shows the ratings of all services against our four levels of excellence:

Outstanding	CARE Excellence Accreditation
Good	Score of 95% and achieved all mandatory standards
Requires Improvement	Score of below 95% and above 84% or score of 95% or above but not achieving all the mandatory standards
Requires Significant Improvement	Score of below 85%



In 2016/17 four services achieved accreditation. These are our Exemplar Services that have proved that they function well above baseline expectations and involve people well and deliver good outcomes. Other services can arrange visits to these services to see and share good practice.

Use of Mental Health Act

The total number of Places of Safety Orders (Section 135 and Section 136) made in 2016/17 was 872, increasing from 816 since the previous reporting period, which is in line with national trends. The majority of people detained under Section 135/136 were White British (91%). With the next highest ethnic group being Black (1.72%). White British people are slightly over-represented when compared to the ethnic diversity of the population.

2016 Community Mental Health Survey – Patient Experience and Involvement

Service teams encourage people using services to complete experience and satisfaction surveys. Below, are summary scores showing people’s feedback to our services in comparison to other trusts in England.

Health and social care workers 2016	SABP score (out of 10)	Lowest national score	Highest national score	Surveys completed
Overall in the last 12 months, did you feel that you were treated with respect and dignity by NHS mental health services?	8.4	7.7	8.9	234
Did this person listen carefully to you?	8.0	7.3	8.6	229
Were you given enough time to discuss your needs and treatment?	7.5	6.8	8.2	229
Did the person or people you saw understand how your mental health needs affect other areas of your life?	6.6	6.2	7.8	221
Were you involved as much as you wanted to be in agreeing what care you will receive	7.0	6.6	8.2	174
Were you involved as much as you wanted to be in discussing how your care is working?	7.4	6.8	8.5	141
Were you involved as much as you wanted to be in decisions about which medicines you receive?	7.3	6.3	7.7	193
Were you involved as much as you wanted to be in deciding what treatments or therapies to use?	7.1	6.4	8.2	99
Have NHS mental health services involved a member of your family or someone else close to you as much as you would like?	6.7	5.5	7.5	156

Source: 2016 Community Mental Health Survey

2016 Community Mental Health Survey – Response Rate

The response rate to the Community Mental Health Survey for our Trust was slightly higher than the average response for other Trusts and the protected characteristics of respondents is largely in line with the population of the people who use our adult mental health services. We did however receive higher numbers of responses from people aged 18-35 compared to other Trusts. Overall, involvement and feedback on the Community Mental Health Survey was in line with other Trusts. However, we will be undertaking work to try and increase the numbers of people providing feedback about our services, though the Community Mental Health Survey.

	SABP	All trusts
No of respondents	240	13254
Response rate (percentage)	29%	28%
Gender		
	%	%
Male	39	44
Female	61	56
Age group		
	%	%
18-35	24	14
36-50	20	22
51-65	18	25
66 and older	39	39
Ethnic group		
	%	%
White	93	87
Multiple ethnic group	2	2
Asian or Asian British	3	4
Black or Black British	0	3
Arab or other ethnic group	0	1
Not known	2	4
Religion		
	%	%
No religion	30	23
Buddhist	0	1
Christian	59	65
Hindu	0	1
Jewish	0	1
Muslim	1	3
Sikh	1	1
Other religion	4	3
Prefer not to say	5	4
Sexual orientation		
	%	%
Heterosexual/straight	88	88
Gay/lesbian	3	2
Bisexual	3	2
Other	2	1
Prefer not to say	3	6

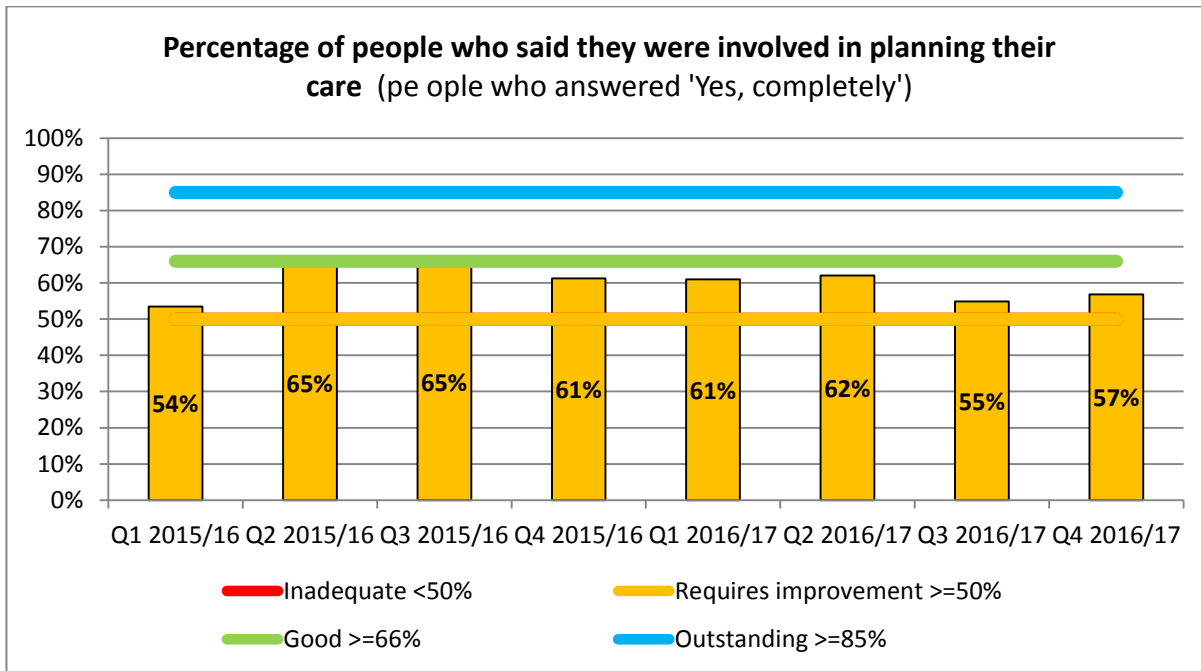
Source: 2016 Community Mental Health Survey

Patient, Family and Carer Experience of Our Services

Your Views Matter is our real time experience tracker for people who use services and carers. The feedback is used to ensure we continually improve the quality of our services. Feedback relating to involvement and overall satisfaction in the services we provide are summarised below.

Your Views Matter – Involvement in Planning Care

57% of people surveyed said they were ‘completely’ involved in their care planning; although 90% of people within our older people’s community services and 70% of people using our Windmill House drug and alcohol inpatient service answered ‘yes completely’.



Source: Your Views Matter Surveys

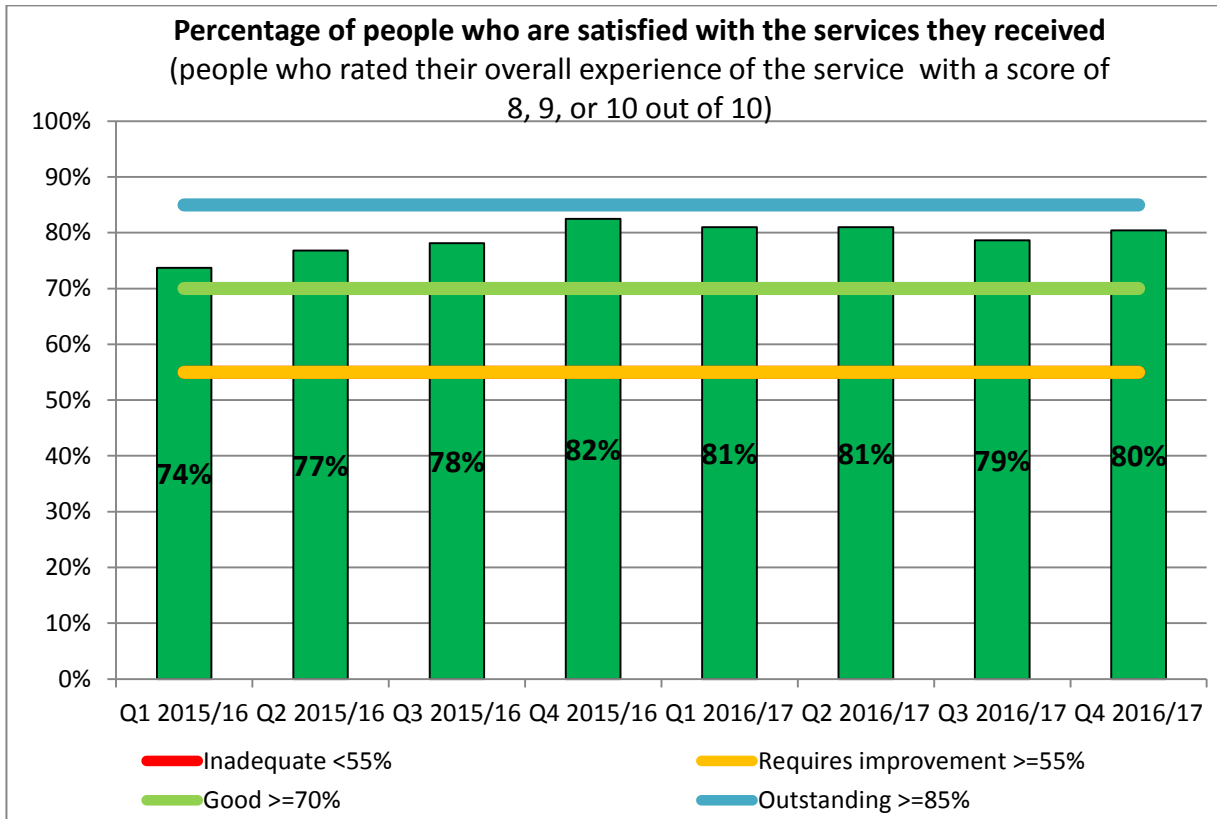
We have struggled to improve our percentage of people feeling ‘completely’ involved in planning their care, especially in our inpatient services, with the majority of people saying they were involved in their care either ‘completely’ or to ‘some extent’ and only 10% of people said they were ‘not involved at all’ in planning their care.

Our community services for older adults have performed well in this regard consistently reaching ‘outstanding’.

Our separate surveys for people with learning disabilities also show ‘outstanding’ involvement. We have three main strands of work to support improvements: the introduction of care plan folders into our inpatient services; a focus on our weekly multi-disciplinary reviews in our inpatient services to support people’s involvement in planning; and the introduction of a staff People Experience Network.

Your Views Matter – Satisfaction Rates

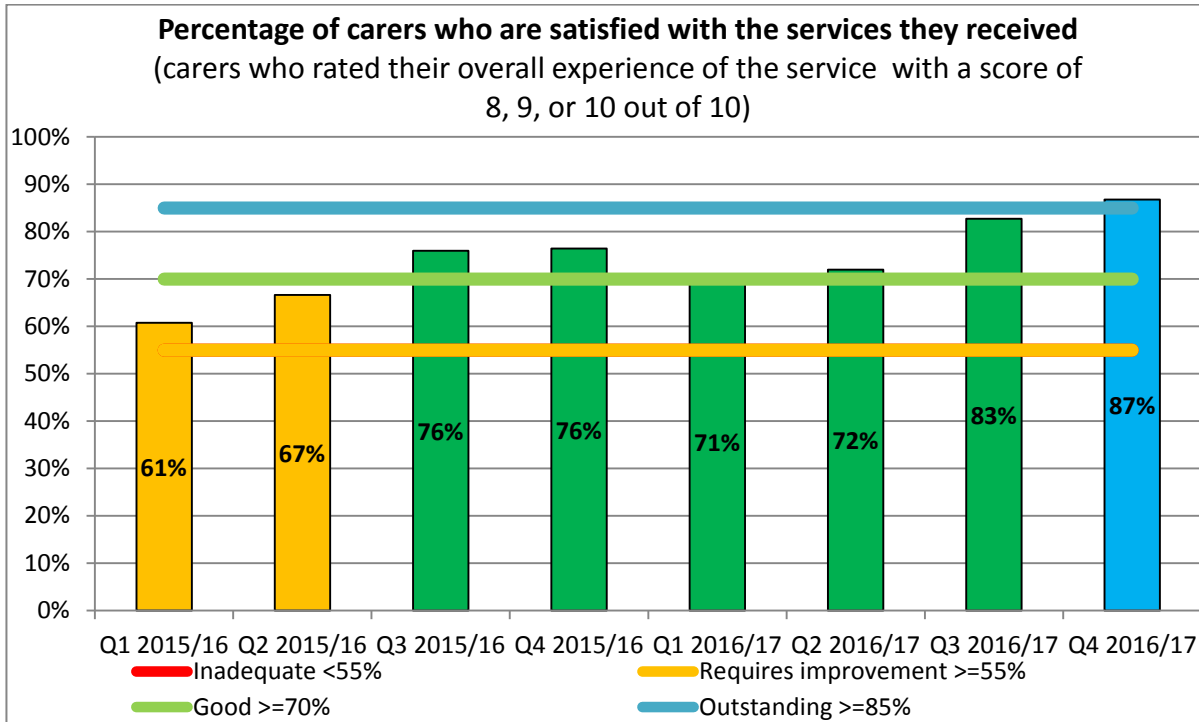
We have achieved a 'good' rating (70%) for 2016/17 reflecting the high percentage of people who are satisfied with our services. It is one of our clinical priorities (Clinical priority 1) to retain the percentage of people who report through Your Views Matter that they are satisfied with the services they receive.



Source: Your Views Matter Surveys

Your Views Matter - Carers Satisfaction Rates

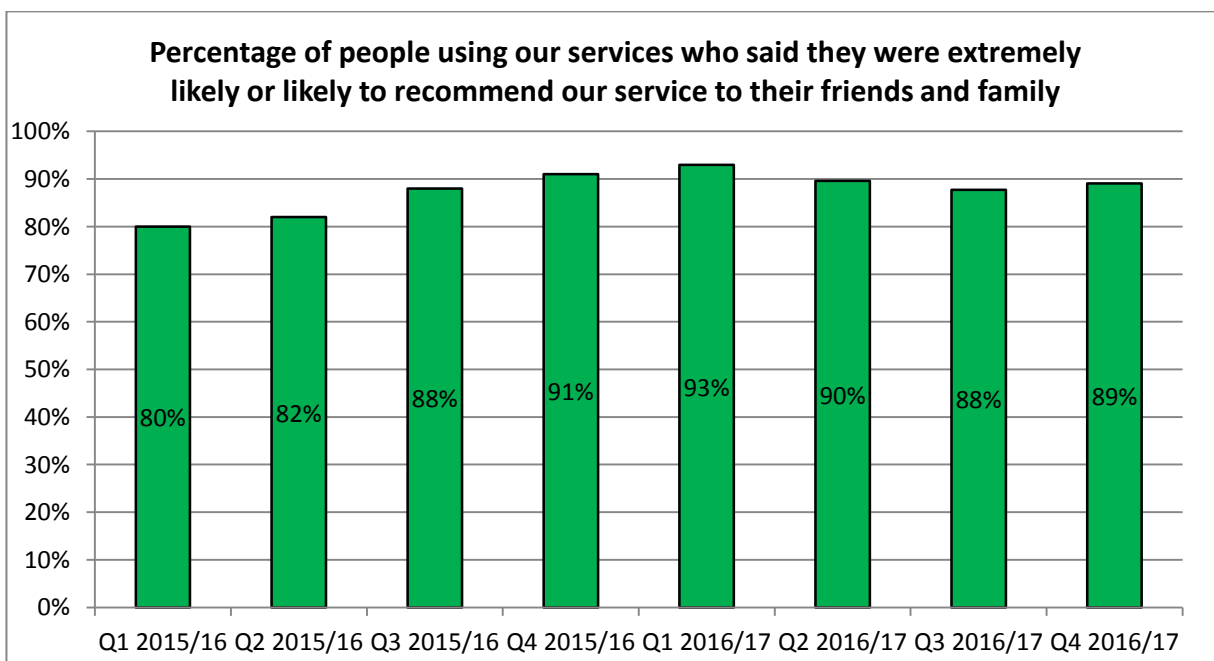
87% of carers reported through Your Views Matter they were satisfied (scoring them 8, 9 or 10 out of 10) with the services they received.



Source: Your Views Matter Surveys

Friends and Family Test

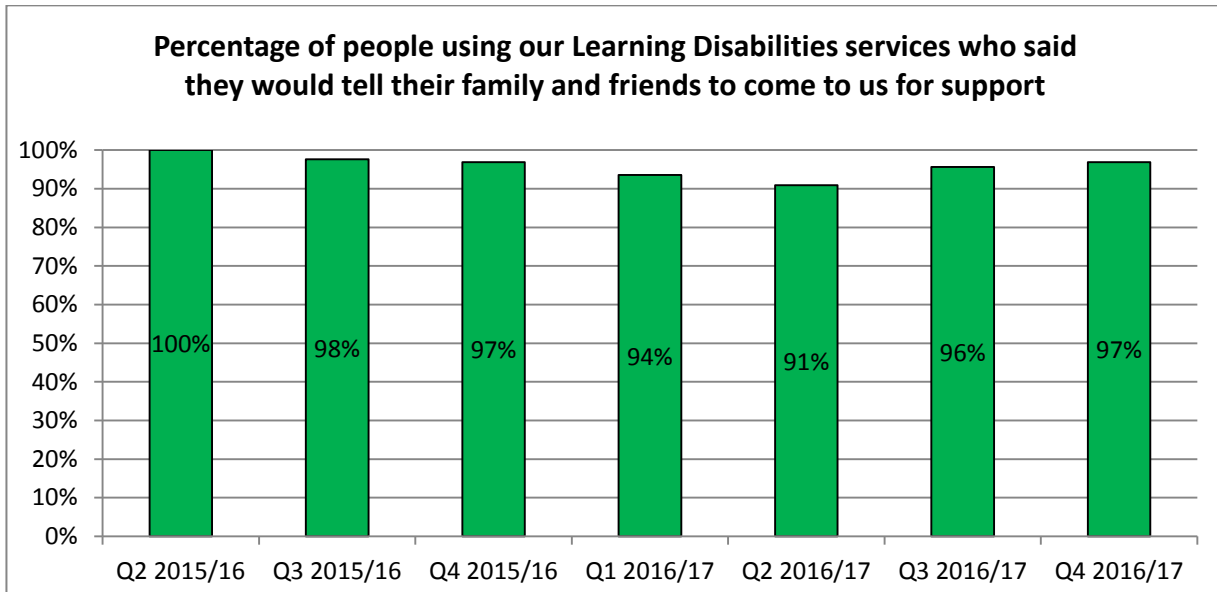
3,201 people answered the Your Views Matter survey question 'Based on your experience - how likely are you to recommend our service to friends and family if they needed similar care or treatment?' during 2016/17. On average, 92% of people are 'extremely likely' or 'likely' to recommend the services to friends and family (Your Views Matter Survey February 2017).



Source: Your Views Matter Surveys

Friends and Family Test for People with a Learning Disability

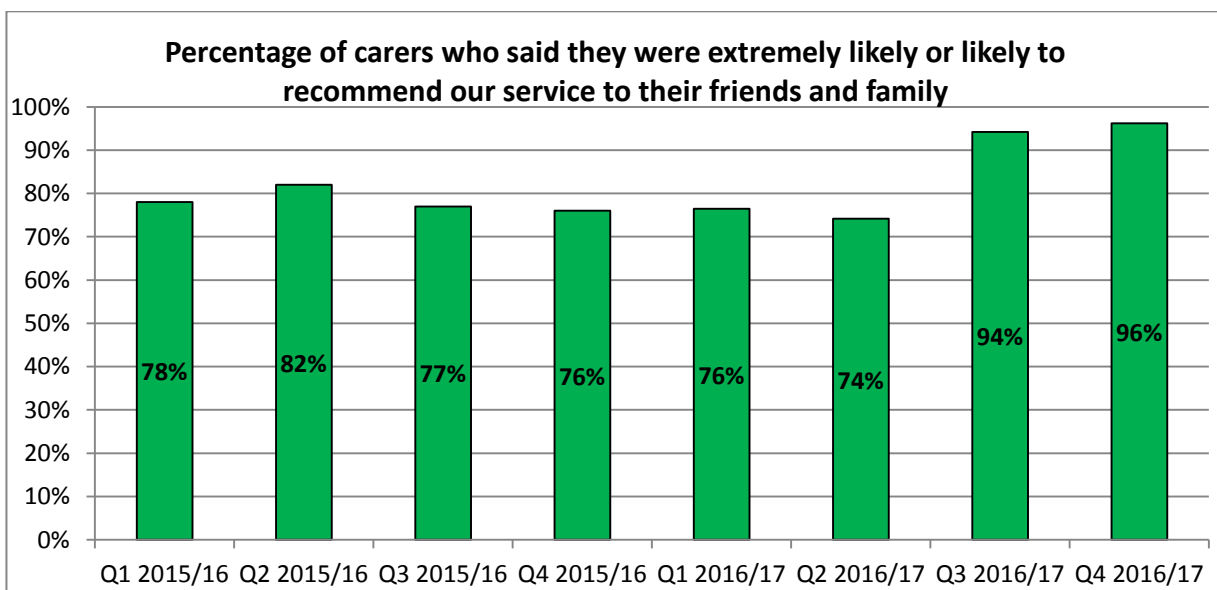
325 people using our Learning Disabilities community services answered the question 'Would you tell your family and friends to come to us for support?' during 2016/17. Of these people, 94% answered 'Yes a lot' or 'Yes, a little'. We are aware that many people we support may not be able to answer the questions, so we have introduced other methods for people to feedback on their experience. For example in our MyTime Reigate day opportunities, people are supported to indicate whether they have enjoyed a particular activity through the use of coloured balls. We continue to explore different ways of getting feedback from people with Learning Disabilities to know about our services for this group.



Source: Your Views Matter Surveys

Friends and Family Test - Carers

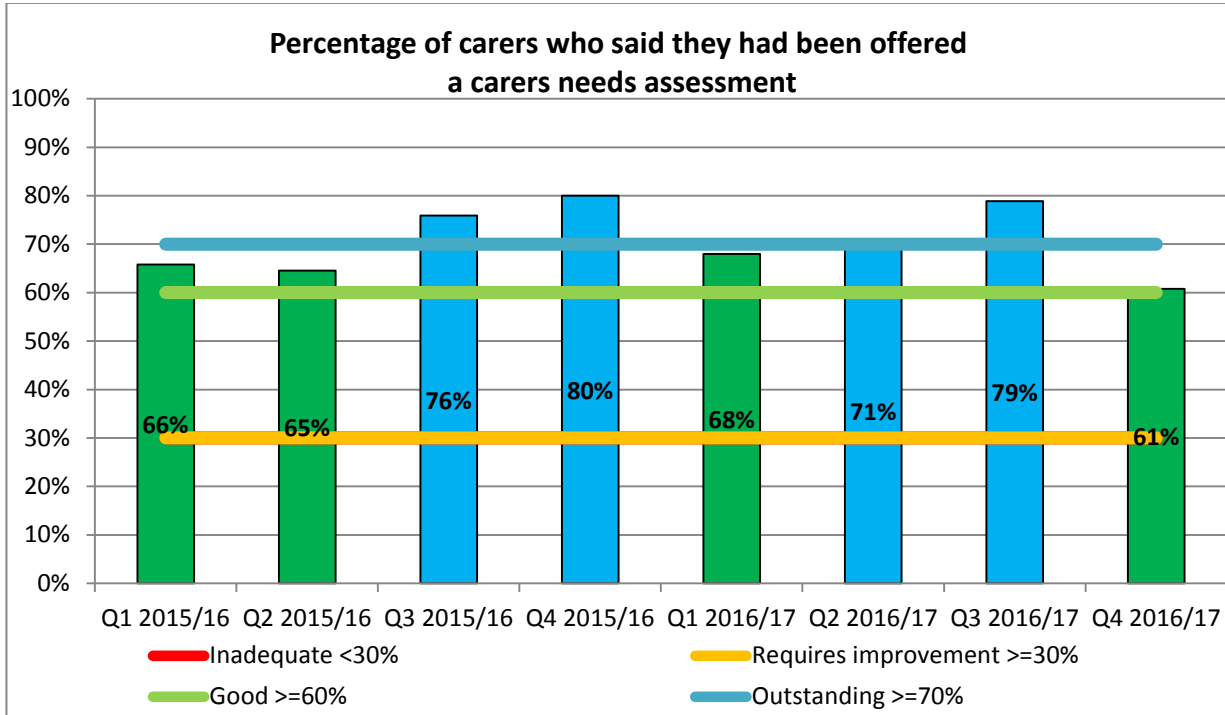
We continue to see a steady improvement in carers' satisfaction of our services with our latest feedback showing that 96% of carers would recommend our services to their friends and family. We have a full complement of Carer Practice Advisors working in the clinical teams to support clinicians to work with carers and ensure compliance with the Care Act.



Source: Your Views Matter Surveys

Your Views Matter - Carers who have been offered a carers needs assessment

During 2016/2017 we achieved either a good (> 60% score) or outstanding rating (>70% score) against the number of carers who has been offered a carers assessment. This information is provided through carers surveys rather than electronic health records. From 2017 this information will be extracted from electronic health records so we can begin to audit the quality of the assessments. During 2017/2018 we aim to consistently offer assessments to carers.



Source: Your Views Matter Surveys

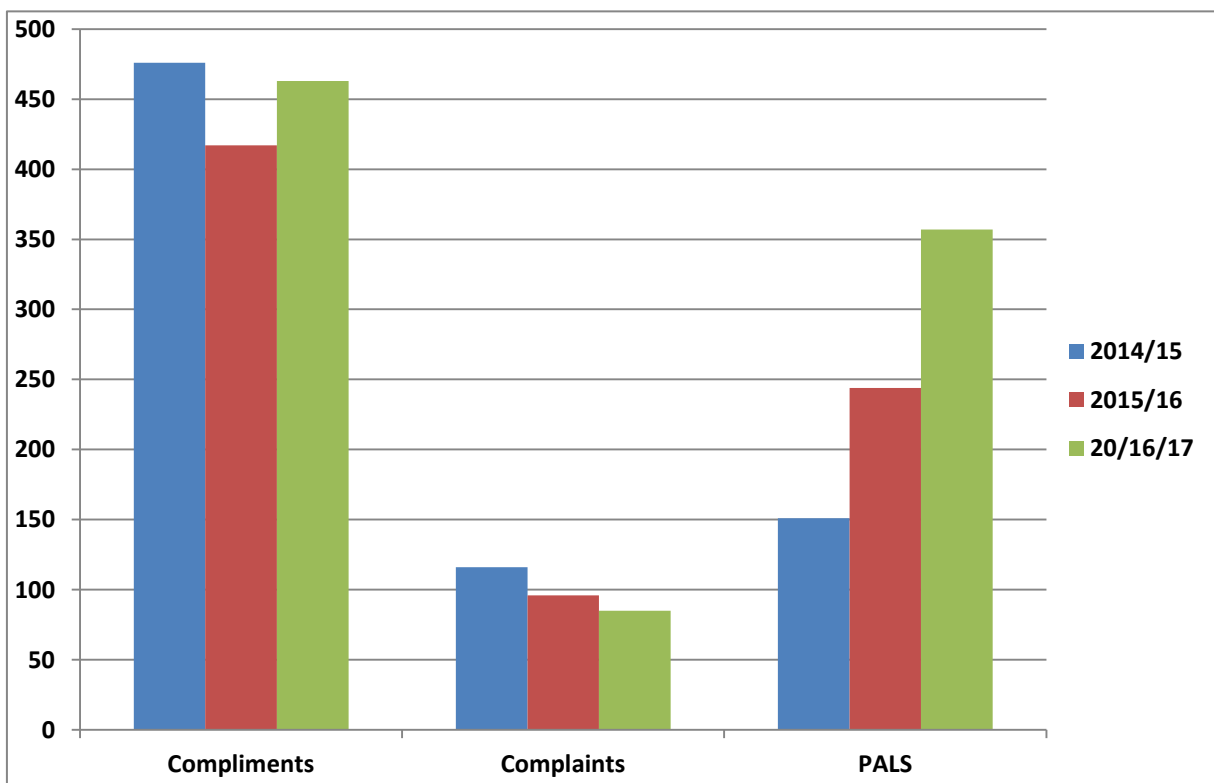
Compliments and Complaints

During 2016/17, the Complaints and PALS team recorded a total of 463 compliments and investigated 85 complaints. In 2015/16 the team recorded 417 compliments and investigated 96 complaints. We made contact with every complainant to ensure all issues of concern were identified, and incorporated into an agreed complaints plan prior to commencing our investigation process. We also ensured that the complainant's preferences regarding communication were agreed and documented. A full response detailing the outcome of the investigation, and where appropriate changes made to service provision, is provided to every complainant.

In 2016/2017, 53 of the 85 investigations have been completed. Of these 53 completed complaints, 36 (70%) were either fully or partially upheld. To compare with last year, we reported that 77 complaint investigations were completed and 44 (57%) were fully or partially upheld. 'Upheld' is the term used to record where one or more aspects of a complaint required an apology by us.

Additionally, we received a significant increase in the PALS contacts made during the year with 357 PALS queries in 2016/17 compared with 244 in 2015/16

We do not currently record the protected characteristics of people who make a complaint and this is an area for focus going forward.



Our Membership in Detail

We offer Foundation Trust membership as an opportunity for people to understand and get involved with the work we do, particularly local people with an interest in mental health and learning disability services across Surrey, Hampshire and neighbouring counties. Over the last 12 months, our membership has grown by 430 new members. Work to recruit new members and retain existing ones continues to include strengthening our relationships with local community organisations, involving partners in the recruitment of new members and growing recruitment from under-represented groups. On 31 March 2017 the public membership total stood at 6,537. The membership is largely representative of the communities we serve.

Our membership events continue to be successful and have benefitted from a significant increase in attendance, with 517 people attending seven events in 2016/17. Also, in 2016/17, we attended three local freshers' fayres and two career fayres for school-aged children, resulting in an increase in our membership in the 14-21 years age bracket. For the coming year, we have developed a new programme of members' events with topics including Dementia Care Innovations, Support for Carers, and Understanding Autism and Attention Deficit Hyperactivity Disorder.

Summary of Trust Members

	2016/17		2015/16		2014/15	
Age band	Number	%	Number	%	Number	%
0 - 16	168	2.57	74	1.21	70	1.26
17 - 21	983	15.04	870	14.23	576	10.38
22+	4426	67.71	4194	68.75	3956	71.3
Undisclosed	960	14.68	969	15.8	946	17.1
Grand Total	6537		6107		5548	
Ethnic origin	Number	%	Number	%	Number	%
White	5409	82.74	5129	84	4738	85.4
Mixed	131	2	113	1.84	95	1.71
Asian or Asian British	505	7.73	432	7.06	329	5.93
Black or Black British	145	2.22	120	1.96	101	1.82
Other	74	1.13	64	1.04	57	1.03
Undisclosed	273	4.18	249	4.15	228	4.11
Grand Total	6537		6107		5548	
Gender	Number	%	Number	%	Number	%
Female	4363	66.74	4049	66.24	3585	64.6
Male	2056	31.45	1972	32.26	1898	34.2
Undisclosed	118	1.81	86	1.48	65	1.17
Grand Total	6537		6107		5548	
Disability	Number	%	Number	%	Number	%
Physical disability	125	1.91	123	2	--	--
Learning disability	50	0.76	45	0.7	--	--
Mental health	68	1.04	62	1	--	--
Sensory	33	0.5	32	0.5	--	--
Sexual orientation	Number	%	Number	%	Number	%
Heterosexual	1426	21.81	1235	20	--	--
Homosexual	34	0.52	25	0.41	--	--
Bisexual	49	0.752	33	0.54	--	--
Undisclosed	5028	76.92	4814	79.05	--	--
Grand Total	6537		6107			

Data Sources

Internal:

- Access to Services Report 2016/17
- Complaints Annual Report 2016/17
- DATIX Incident Report on Discrimination March 2017
- Membership Monthly and Annual Update Data March 2017
- Mental Health Act Report 2016/17
- People Who Use Services Data 2016/17 (DART)
- Workforce and Equality Data Report 2016/17
- Workforce Race Equality Standard (WRES) Report 2016/17
- Your Views Matter – SABP Survey

External:

- Census 2011
- Community Mental Health Survey 2016
- NHS Staff Survey 2016

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Publication date: February 2018