

National Ambulance
LGBT Network



Supporting Lesbian, Gay,
Bisexual, Trans staff, patients
and communities

A partnership of UK Ambulance
Services

Evaluating the Sexual Orientation Monitoring Standard

What this is and how it
implications for NHS
Ambulance Services

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Overview [1]



What is it?

The Sexual Orientation Monitoring Standard is a requirement for all health and social care services with responsibility for adult care to record the sexual orientation of the patient / service user.

The standard sets out a dataset that should be standardised across all services thereby allowing comparability across services.

Why do this?

NHS England states, 'Collecting and analysing data on sexual orientation allows public sector bodies to better understand, respond to and improve LGB patients' service access, outcomes and experience.'

'It is evidence of an organisation's compliance with the Public Sector Equality Duty. The standard will enable a consistent method of monitoring sexual orientation for organisations.'

What will this enable?

All health and social care organisations are able to demonstrate the provision of equitable access for LGB individuals.

Care providers have an improved understanding of the impact of inequalities on health and care outcomes for LGB populations in England.

Policy makers, service commissioners and providers can better identify health risks at a population level.





The Benefits

There are four listed, one of which is:

‘There is a strong evidence base that LGB people are disproportionately affected by a range of health inequalities, including poor mental health, higher risk of self-harm and suicide, increased prevalence of sexually transmitted infections including HIV, increased use of alcohol, drugs and tobacco with a higher likelihood of dependency; increased social isolation and vulnerability in old age. However, a lack of patient sexual orientation monitoring means that these inequalities and related specific patient needs are often not acknowledged or addressed in mainstream service provision.’

Standardised Question

NHS England recommends that this standard is used to record sexual orientation at every face to face contact with the patient:

Sexual orientation

Which of the following options best describes how you think of yourself?

1. Heterosexual or Straight
2. Gay or Lesbian
3. Bisexual
4. Other sexual orientation not listed
- U. Person asked and does not know or is not sure
- Z. Not stated (person asked but declined to provide a response)
9. Not known (not recorded)



Timescales for implementation

NHS England and Department for Health appear not to be mandating this action but do make it clear it does contribute to 'compliance' with the Public Sector Equality Duty and other legislation.

No specific timescales for implementation are given.

Does it come with funding?

The specification states organisations adopting this standard should absorb the costs when other system updates are due.

It also states the question has been designed to make the standard as easy to implement as possible.

Documentation



Two documents were issued on 5 October 2017. The first is the full specification which points to applicable research. The second is an implementation guidance document.

Issues for Ambulance Services [1]



Purpose of the Question

Questioning patients about their sexual orientation can be perceived to be highly intrusive, unless it gives rise to changes in approach to care provided. In other health and social care settings (Acute Trusts and preventative medicine) it is easier to see how this works. For the ambulance service it is difficult to identify any changed that will result from knowing this information.

The Data Protection Act clearly states there must be a reason for asking questions and storing information about people without reason is not permissible.

It is questionable therefore whether the new standard is actually breaking the law when applied to ambulance services.

System Issues

The standard indicates the question should be asked at the first face to face contact with the patient. This indicates there is a need to store information, otherwise this question would be asked at every contact, and this is not advised.

Before the summary care record initiative comes to fruition, the systems used in ambulance services do not allow for this data to be logged. In AMPDS systems, for example, 'flags' can only be attached to addresses, and not people. There are obvious repercussions to this where there are multiple occupants, or people move.

The timing of this introducing this standard in ambulance services is questionable.

Issues for Ambulance Services [2]



Monitoring without Awareness?

Introducing monitoring without all staff understanding the reason for it is likely to lead to unhelpful responses. It is inevitable that patients will ask why this question is important.

It is therefore suggested that robust awareness raising needs to accompany any implementation of the sexual orientation monitoring standard. This task is significantly more complicated, and likely to be more time consuming, than introducing the monitoring itself.

With over 30,000 ambulance staff in the United Kingdom the task of raising awareness would be massive undertaking and will require new resources.

Phasing the Benefit

It is interesting to note that Stonewall advocate monitoring of staff profiles and this is a mandatory requirement of achieving the 'Top 100 Employer' rating.

We suggest that monitoring of staff and internal awareness raising will have benefits to patients as people become more informed. It is anticipated that introducing patient monitoring will not afford the reverse benefit.

It is suggested that monitoring should become a phased and longer term action for ambulance services. Priority should be given to monitoring staff first and embedding a culture of using information to tackle internal discrimination.



Recommendations



Given the issues identified, the National Ambulance LGBT Network strongly recommend that ambulance services do not rush into implementing the new standard without further consultation.

This would include:

- ❖ Understanding how collecting a patient's sexual orientation will impact on the care provided.
- ❖ How information can be accurately stored and retrieved to prevent repeated intrusive questioning.
- ❖ Developing resources to help understand the rationale for this questioning, applicable to all services provided by ambulance trusts.

The Network further recommends that ambulance services consider the value of staff monitoring as a bigger priority and working towards becoming inclusive employers.

The National Ambulance LGBT Network may have a roll to play in guiding on the actions necessary and to support with the development of resources.

With the introduction of summary care records, implementing the standard should be re-evaluated at a point that systems support the storing and retrieval of information at a patient level.

The following pages provide information to support the development of staff monitoring mechanisms.



Good Practice

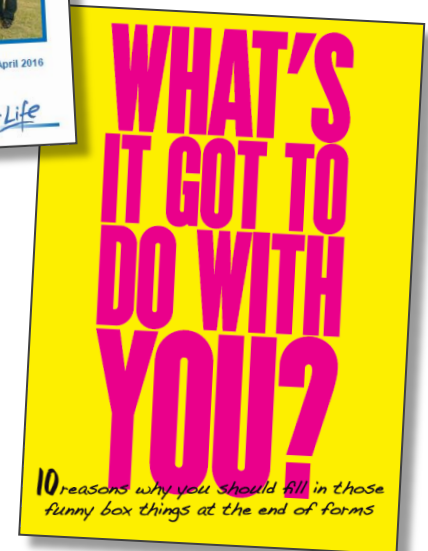
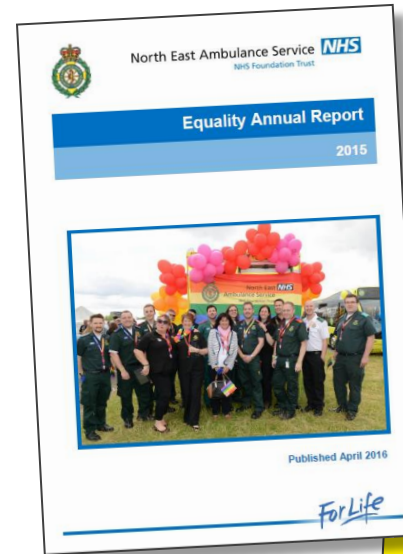


As a model of good practice, North East Ambulance Service produce an Equality Annual Report which demonstrates how effective monitoring can provide useful and detailed information that was inform future practice.

Along with other protected characteristics, sexual orientation is monitored in the following areas:

- Patient surveys
- Employee profile
- Employee profile by pay band
- Staff recruitment and application selection
- Profile of people engaged with disciplinary, grievance, bullying and capability proceedings

North East Ambulance Service provide information to staff to support the monitoring. One example is the Stonewall 'What's it got to do with you?' resources which outlines ten reasons why monitoring is important.

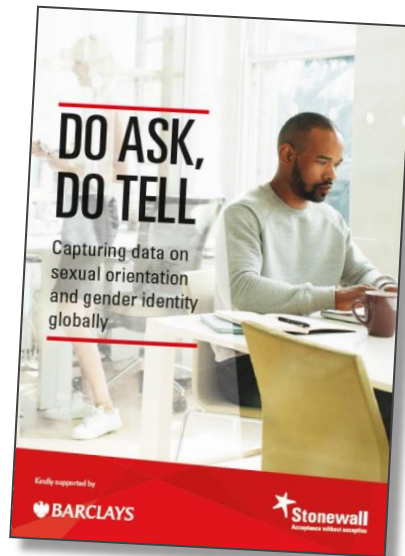




‘Do Ask, Do Tell’

Stonewall offer a number of resources which can assist the implementation of sexual orientation monitoring and help to assist the explain the potential benefits linked to improving equality.

We recommend this resource for people involved in the implementation of monitoring and to help inform the wider staff workforce. Some poignant extracts are reproduced here.



Why collect data on sexual orientation and gender identity?

LGBT data tells organisation about the number of LGBT employees and how their experiences compare to those of their colleagues.

Employers can assess job satisfaction among LGBT staff or identify barriers to their career development. For example, barriers may include the fear that coming out will prevent LGBT employees being given international assignments. In essence, data helps identify opportunities to develop targeted initiatives to improve the workplace for LGBT employees.

Extract from ‘Do Ask, Do Tell’ booklet



Benefits of Capturing Data



Several elements form a strong business case for capturing LGBT data:

Understand Staff Better

Employers can take targeted action if they understand the proportion of LGBT people in their workplace and the roles in which they are most represented. Identifying specific problems and barriers faced by LGBT employees can further inform actions to maximise the potential of LGBT employees.

Improve Efficiency

Using LGBT data means that any initiatives undertaken to create inclusive workplaces are based on evidence rather than assumptions. This will increase their likelihood of success.

Enhance Credibility

Publishing data to show that initiatives have improved the workplace for LGBT people enhances the reputation of an employer.

Send a Signal to LGBT People

Collecting LGBT data lets LGBT employees know their experiences are taken seriously and can positively impact staff motivation and performance.

Respond to Local Needs

Organisations can undertake targeted and culturally sensitive actions that respond to the local needs of LGBT employees. This can also prevent criticism that such actions are imposed from foreign head offices.

Extract from 'Do Ask, Do Tell' booklet

