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Black, Asian and Minority Ethnic Patient Experience Report

Hospitals

April 2020 – March 2021

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Healthwatch & Your Voice in Health and Social Care.

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01

INTRODUCTION

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INTRODUCTION

This Black, Asian and Minority Ethnicities (BAME) Report for Healthwatch covers hospitals in six London boroughs for the period April 2020 – March 2021. Using reviews from our Diversity Monitoring Form and Patient Experience Data Collection Programme, we have analysed the data to help us understand **hospital experiences** from patients from different ethnic backgrounds.

About Healthwatch

Healthwatch was created by the health and social care reforms of 2012 with a powerful ambition of putting people at the centre of health and social care. To help realise this ambition Healthwatch has a number of duties around gathering and representing the views of patients and service users in local boroughs across the country.

About Your Voice in Health and Social Care

Your Voice in Health and Social Care (YVHSC) holds the contracts for the following Healthwatch services: Healthwatch **Bromley**, Healthwatch **Ealing,** Healthwatch **Hammersmith & Fulham,** Healthwatch **Hounslow**, Healthwatch **Lewisham**, and Healthwatch **Waltham Forest**.

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DATA
COLLECTION

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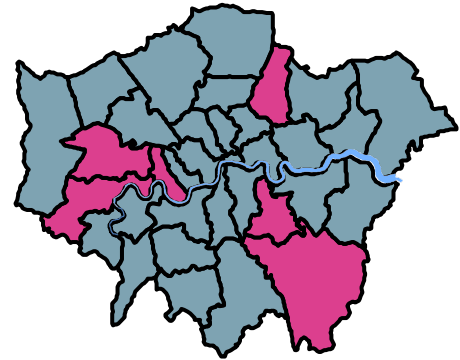
DATA COLLECTION METHODS DURING COVID-19

DIRECT ENGAGEMENT
Normally, our Patient Experience Officers, supported by a team of volunteers, visit health and social care services daily to talk to and hear from patients, service users, carers and relatives about their experiences of local services. Due to COVID-19, we were unable to carry out our traditional face to face visits during this period.

A NEW APPROACH: ONLINE DIRECT ENGAGEMENT
In adapting to these challenging new circumstances we developed and introduced a new model for our Patient Experience Programme, involving the collection of feedback via our zoom engagement sessions and collating existing online reviews from relevant platforms, such as NHS.uk, Google reviews and Care Opinion. This report represents data gathered through these methods during the period of April 2020-March 2021.

Gathering data predominantly from online platforms has impacted our ability to collect equality monitoring information. The numbers in this report are therefore lower than we would traditionally anticipate.

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DIVERSITY REPORTING

Unlike through our traditional face-to-face patient experience work, we are unable to collect equality monitoring data from patients who have left reviews on online websites such as Google reviews or NHS.uk.

Where we do have this data we can see that participation in filling the Diversity Monitoring Form was highest in Hounslow, Hammersmith and Fulham and Ealing during this period, although there is still considerable room for improvement.

In the interest of this being a summary report, the 24 different ethnic backgrounds identified have been consolidated into **5 main classifications listed on the right.** We understand that these classifications can be too general but due to the small size of the data sets, in order to identify patterns and help with analysis, such grouping was required and may serve the purpose of prompting further investigation.

All our Patient Experience Officers have undergone Healthwatch England bespoke training around the importance of equality monitoring data and are utilising tips and techniques to improve uptake by patients that we speak to.

5 'Summary' Ethnic Backgrounds for this report:

- White Ethnic Background
- Black Ethnic Background
- Asian Ethnic Background
- Mixed/Multiple Ethnic Background
- Other Ethnic Background

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EXPLAINING THE DATA

We use the Digital Feedback Centre (on our website) and Informatics system (software sitting behind the Digital Feedback Centre) to capture and analyse patient experience feedback. Each patients' review has its own Reviewer ID code which was used to cross-reference the data with equality monitoring data.

The Informatics system is currently used by approximately 1/3 of the Healthwatch Network across England and it captures feedback in a number of ways:

⭐⭐⭐⭐⭐

1. It asks for an overall star rating of the service between 1 – 5 which represents Very Bad to Very Good.
2. It provides a free text box for comment
3. It asks for a star rating against specific domain areas, (between 1-5).
4. Patients are asked to complete a Diversity Monitoring Form.

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FINDINGS
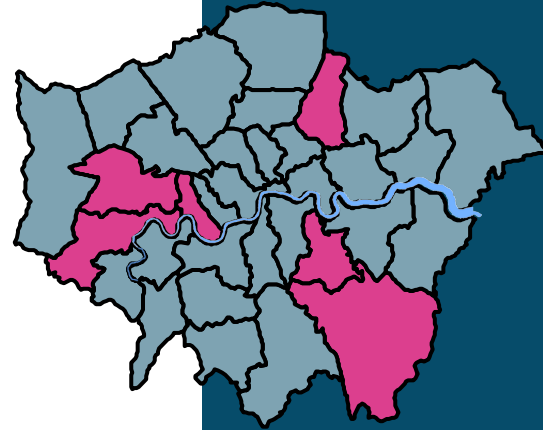
HIGHLIGHTS AND KEY FINDINGS

- Collection of equality monitoring data was reduced during the course of the Covid-19 pandemic and the alternative engagement methods utilised during the period. Future improvement anticipated through return to face-to-face outreach.

- Healthwatch Lewisham had the largest proportion on BAME patients participating whilst Waltham Forest had the fewest. Cross checking against borough population breakdowns will help to guide borough patient experience programmes.

- Overall average star ratings for each ethnic group are at 4 out of 5 stars (when rounded).

- 83% of people from the White Ethnic Group rate positively (4 or 5 stars) compared to 74% of people from BAME groups.

- Black ethnic groups rate 76% positively (4 out of 5 stars)
  Asian ethnic groups rate 79%
  White ethnic groups rate 83%

HIGHLIGHTS AND KEY POINTS

- Against 6 specific domain areas, the area receiving the lowest star rating for the White Ethnic group was 'Ease of getting through on the phone'. For Asian, Black, Mixed and Other Ethnic Groups it was for 'Waiting Times'.

- For the highest scoring areas there was a little more variation: White and Mixed ethnic groups – cleanliness; Asian and Black ethnic groups – Staff Attitude

- 'Waiting times' receives not only the lowest star ratings overall, but also the highest levels of variance in ratings by different ethnic groups. This is followed by 'Quality of Care' and 'Getting through on the telephone' with the second and third highest levels of variance respectively

- Analysis of qualitative comments from patients show very similar levels of positivity within the 'Staff' and 'Administration' themes for both White and BAME groups.

- Analysis of qualitative comments show disparate levels of positivity within the 'Quality of care/treatment' and 'Appointments' themes: Quality of Care – 80% vs 67% for White and BAME groups; Appointments - 45% vs 22%
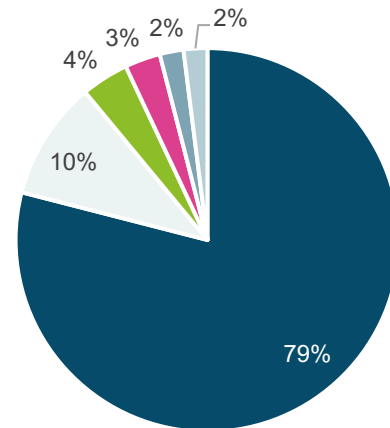
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Overall Star Ratings

Summary of Hospital Reviews

1,007 respondents over the year gave their feedback on hospital services and provided information on their ethnic background.
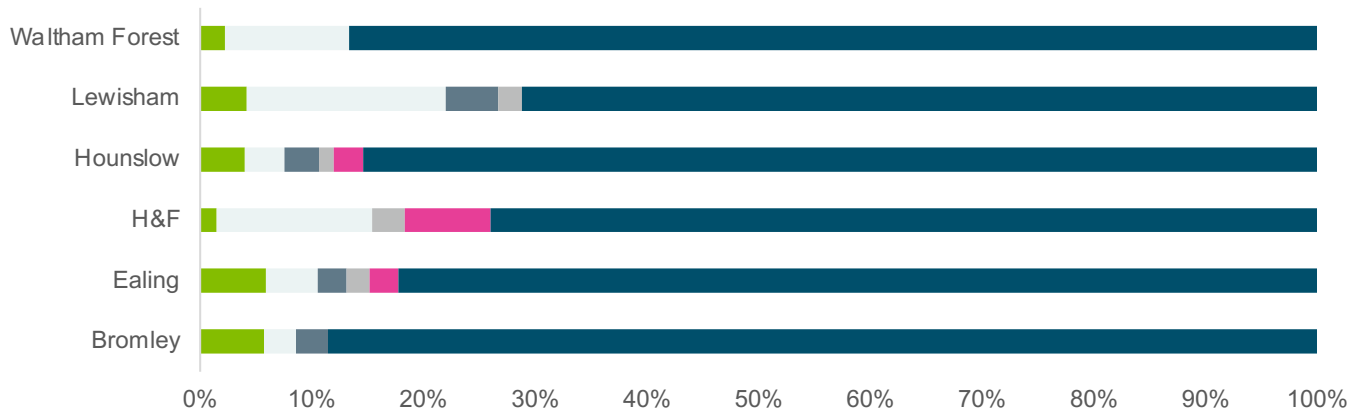
Reviews by Ethnic Background

- White
- Black
- Asian
- Prefer not to say
- Mixed/Multiple Ethnic Group
- Other Ethnic Group

79%
10%
4%
3%
2%
2%

Overall reviews by borough and ethnic background

- Asian
- Black
- Mixed/Multiple Ethnic Group
- Other Ethnic Group
- Prefer not to say
- White

Lewisham had the largest proportion of BAME patients participating, while Bromley had the fewest.
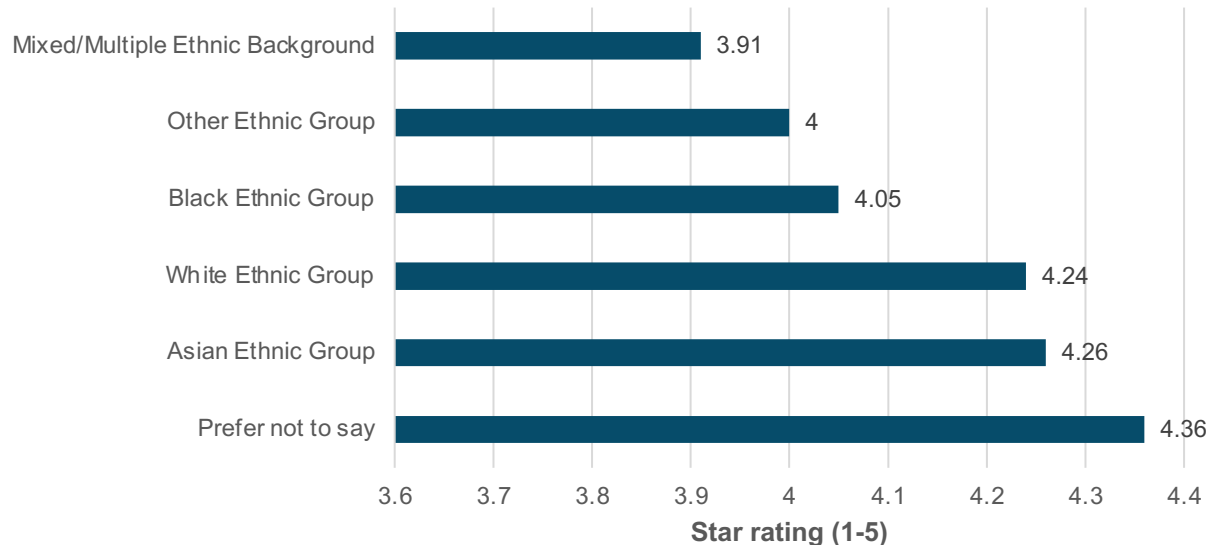
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Overall Average Star Rating

4.21/5

Patients were asked to rate their experience from Very Bad (1 star) to Very Good (5 stars). Overall, **the average rating was 4.21 stars.**

This report will focus on the data collected from patients who did complete the Equality/Diversity Monitoring Form (DMF), including those who marked the 'Prefer not to say' box.

Average star rating by ethnic background

Ethnic Group	Star rating (1-5)
Mixed/Multiple Ethnic Background	3.91
Other Ethnic Group	4
Black Ethnic Group	4.05
White Ethnic Group	4.24
Asian Ethnic Group	4.26
Prefer not to say	4.36

Star rating (1-5)

This graph shows that across the boroughs, all the patients apart from those from Mixed/Multiple Ethnic Backgrounds rated the hospitals over 4 out of 5 stars.
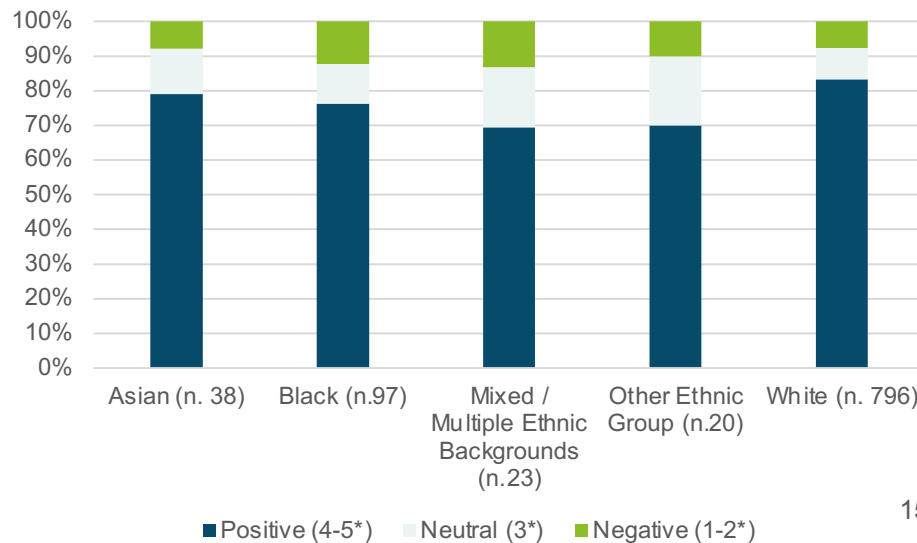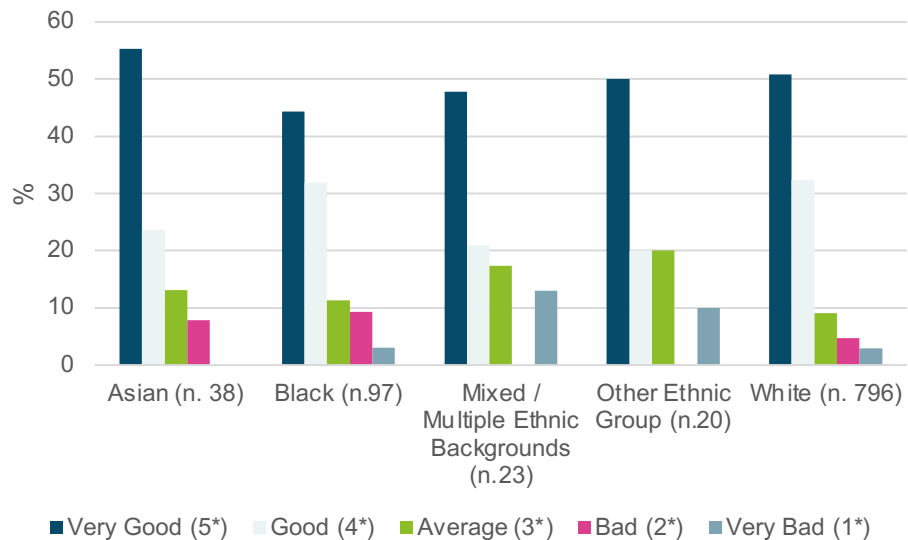
Asian and White groups rated more positively than Black, Other and Mixed/Multiple ethnic groups
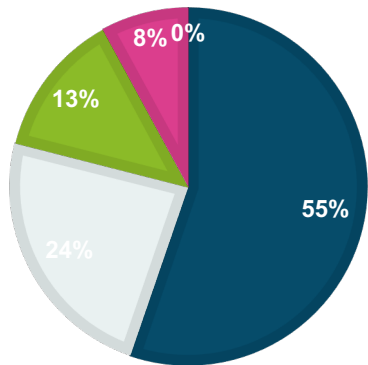
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Star ratings

This page provides a more detailed look at the individual star ratings by ethnic group with a 5 star rating being very good and 1 star rating being very bad.

The left-hand graph below shows on the whole, that patients **from Black Ethnic Backgrounds were least likely to view the service as Very Good (5 stars)** and those from the **Asian group were most likely to rate the service as very good**. Whilst lower star ratings are less in general across all ethnic groups patients from **Mixed / Multiple Ethnic Backgrounds were most likely to rate the service Very Bad (1 star).** Patients from **White Ethnic Backgrounds most commonly rated hospital services as good.**
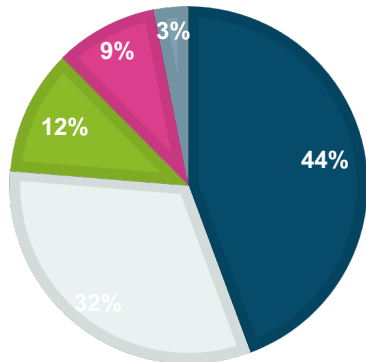
If we combine the star ratings into 'positive', 'negative' and 'neutral' the chart on the right shows variation in positive ratings ranging from 69% (Mixed/Multiple) to 83% (White).
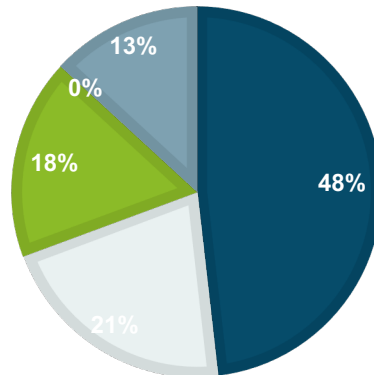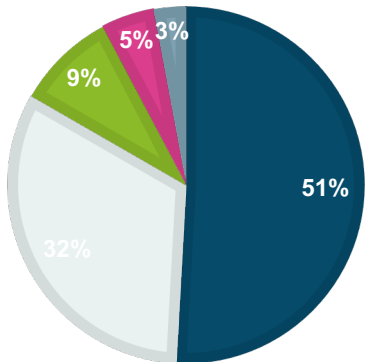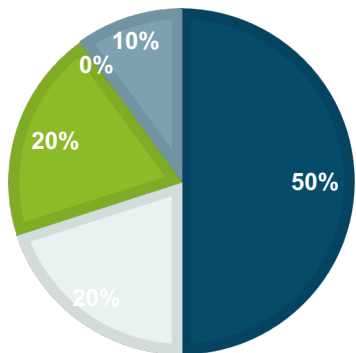

Left chart legend: ■ Very Good (5*) ■ Good (4*) ■ Average (3*) ■ Bad (2*) ■ Very Bad (1*)

Right chart legend: ■ Positive (4-5*) ■ Neutral (3*) ■ Negative (1-2*)

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ASIAN ETHNIC GROUP (N.38)
55% Very good, 24% Good, 13% Average, 8% Bad, 0% Very bad

BLACK ETHNIC GROUP (N.97)
44% Very good, 32% Good, 12% Average, 9% Bad, 3% Very bad

MIXED / MULTIPLE ETHNIC GROUP (N.23)
48% Very good, 21% Good, 18% Average, 0% Bad, 13% Very bad

OTHER ETHNIC GROUPS (N.20)
50% Very good, 20% Good, 20% Average, 0% Bad, 10% Very bad

WHITE ETHNIC GROUP (N.796)
51% Very good, 32% Good, 9% Average, 5% Bad, 3% Very bad

Legend:
- Very good
- Good
- Average
- Bad
- Very bad

Overall star rating by ethnic background

These pie charts show the same data as the previous slide in pie chart form.

If we group 'good' (4 stars) and 'very good' (5 stars) ratings we find the following variation:

Asian – 79% positive
Black – 76% positive
Mixed – 69% positive
Other – 70% positive
White – 83% positive

BAME – 74% positive.
White – 83% positive

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This page looks further at those differences within the same ethnic groups across different boroughs.

Patients from different ethnic backgrounds appear to have had varying experiences according to the borough, and therefore the hospital, in which they were treated. Data from Bromley and Waltham Forest has been removed as numbers are below our threshold.

Whilst overall variation was small, the biggest differences are seen in the Asian ethnic group, rating highest in Lewisham at 4.5 stars and lowest in Hammersmith & Fulham at 3.75 stars, and the Mixed/Multiple Ethnic group, rating highest in Hounslow and lowest in Lewisham. With growing levels of data this picture can be monitored further for any trends that vary by ethnic group in different boroughs.

Average Star Rating by Ethnic Group and Borough

■ Ealing   ■ Hammersmith & Fulham   ■ Hounslow   ■ Lewisham

Average star rating (1-5)

Ethnic Group	Ealing	Hammersmith & Fulham	Hounslow	Lewisham
Prefer not to say	3.50	4.86	3.50	
Asian Ethnic Group	4.36	3.75	4.44	4.50
White Ethnic Group	4.37	4.20	4.32	3.97
Black Ethnic Group	4.00	4.32	4.00	3.68
Other Ethnic Group	4.40	3.75	4.33	3.75
Mixed/ Multiple Ethnic Group	4.17		4.43	3.22

Specific star ratings, Service Aspects

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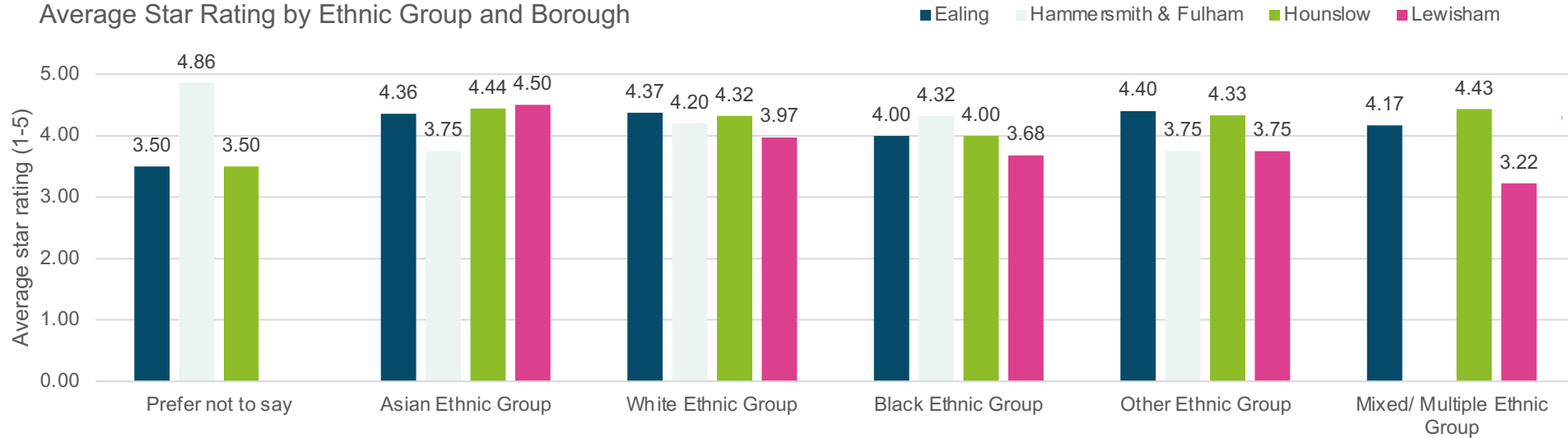
Specific star ratings – Service aspects

In addition to an 'overall star rating', patients are asked to rate different aspects of Hospital Services, such as 'quality of care' and 'cleanliness', from 1 – 5 (Very Bad to Very Good). This data captures feedback from Healthwatch Ealing, Hounslow, Hammersmith & Fulham and Lewisham.

For the **White Ethnic group** the lowest star rating was for '**Ease of getting through on the phone**'. For **Asian, Black, Mixed and Other Ethnic Groups** the lowest star rating was for '**Waiting Times**'. It is interesting to note that for people who preferred not leave their monitoring information – perhaps those most concerned about being identified? – ratings for 'waiting time' were just 1.33 out of 5. For all but one category this grouping of people also rated service aspects the lowest. Given this, the feedback from the 'prefer not to say' category may warrant further investigation.

In respect of the highest scoring areas there was a little more variation: White and Mixed = Cleanliness; Asian and Black = Staff Attitude; Other = Quality of Care.

'Waiting times' receives not only the lowest star ratings overall, but also the highest levels of variance in ratings by different groups. This is followed by 'Quality of Care' and 'Getting through on the telephone' with the second and third highest levels of variance respectively.

| Service Aspect	Asian (n.37)	Black (n. 87)	White (n. 856)	Other Group (n. 8)	Mixed / Multiple (n.17)	Prefer not to say (n.12)
Cleanliness / Environment	4.5	4.3	4.33	4	5	4
Convenience of appointment	4	4.09	3.98		4	
Ease of getting through on phone	4	4	3.65		4.5	3.67
Quality of care	4.43	4.65	4.29	4.75	4.5	3
Staff Attitude	4.71	4.71	4.29	4	4.75	4
Waiting Time	3.38	3.87	3.88	3.5	3.67	1.33

Star ratings (1-5) of service aspects, by Ethnic Background
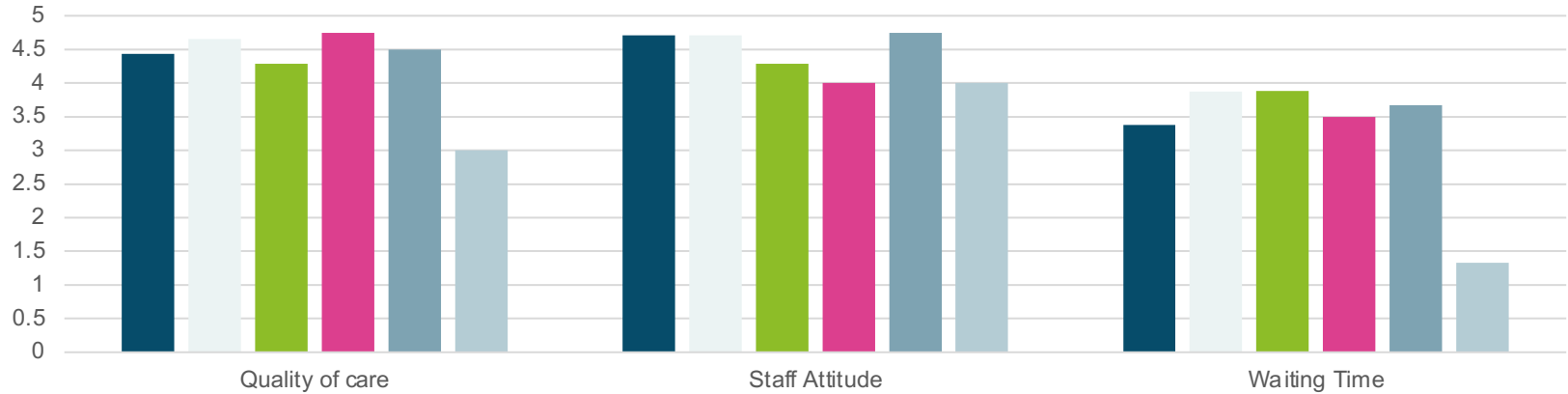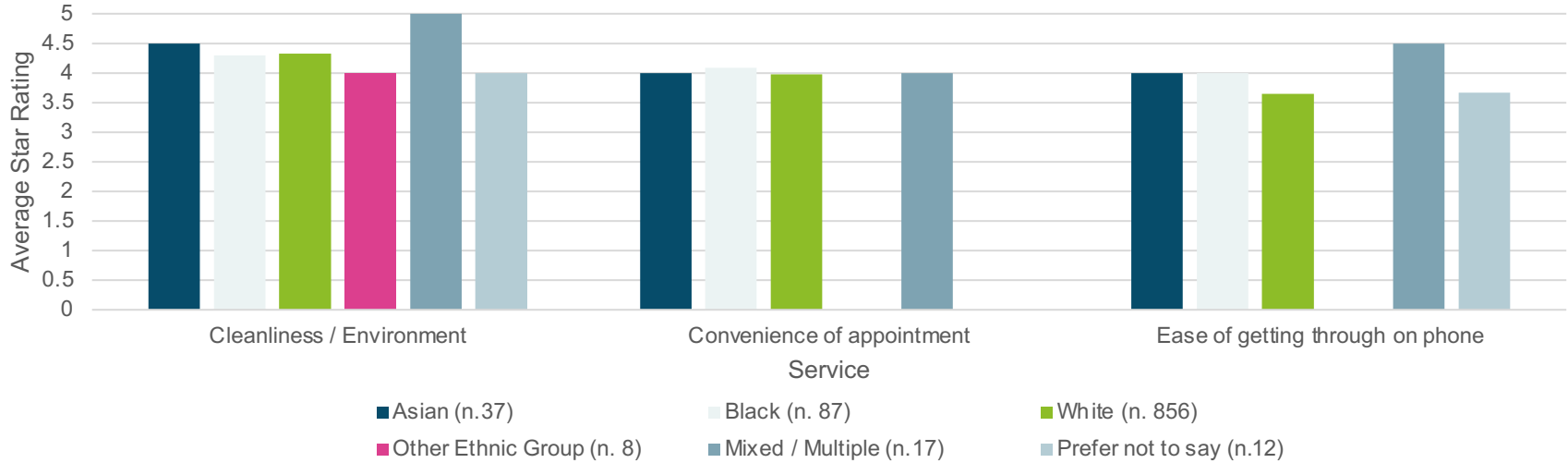
Themes from qualitative feedback

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THEMES AND SENTIMENT

In addition to star ratings, patients leave freetext comments which are analysed for themes and sentiment. The following charts demonstrate the most common themes applied, and looks at the sentiment of these comments for the White Ethnic group and Black, Asian and Minority Ethnic groups combined – data thresholds were too low to break down into individual ethnic groups.
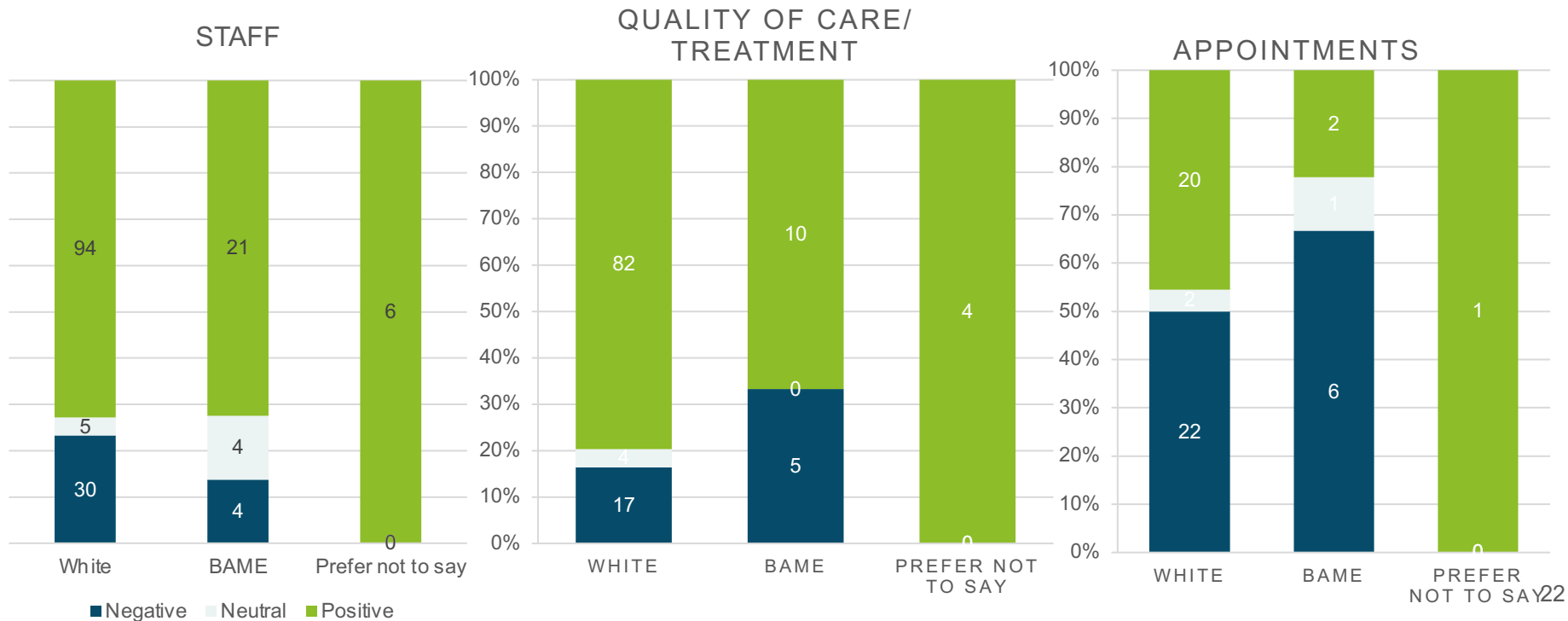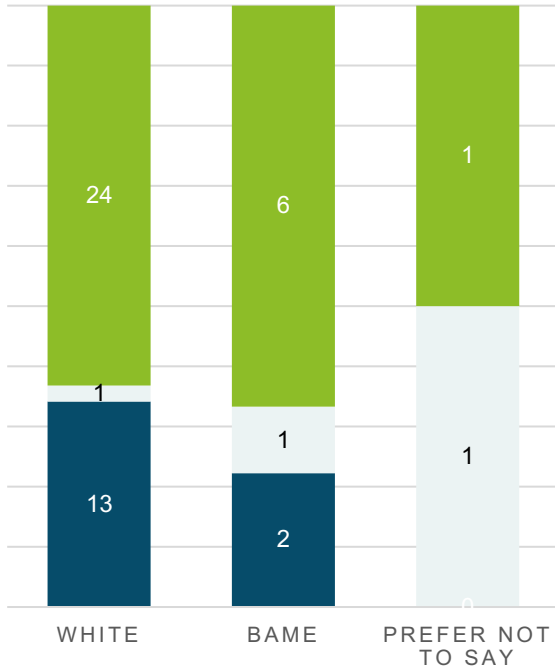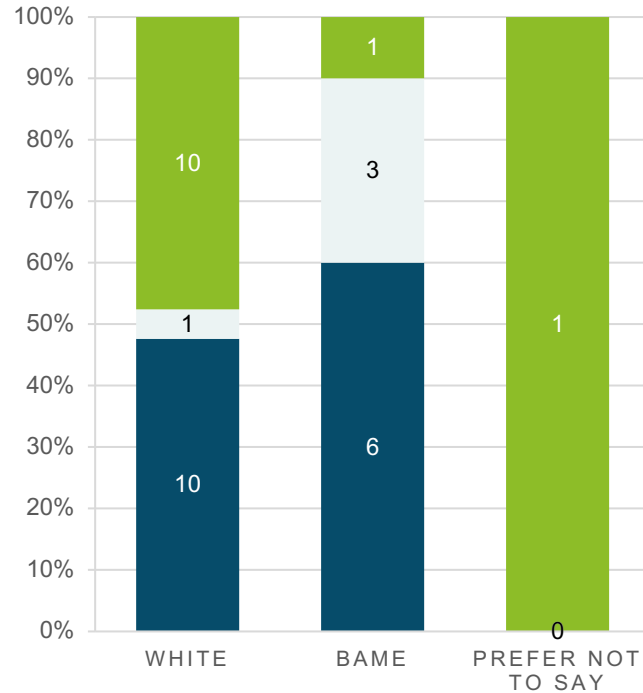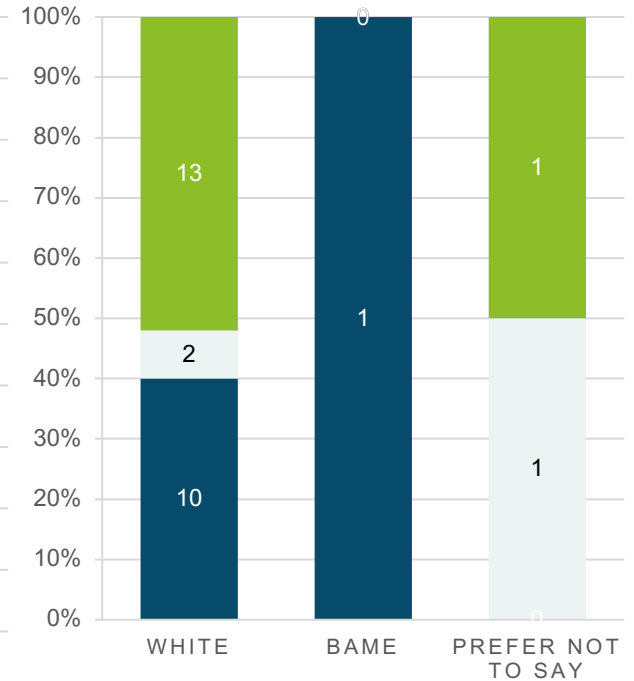

STAFF

QUALITY OF CARE/ TREATMENT

APPOINTMENTS

Negative   Neutral   Positive

THEMES AND SENTIMENT

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Themes' Sentiment by Ethnic Background

Theme	% positive WHITE	% positive BAME
STAFF	73%	72%
QUALITY OF CARE/TREATMENT	80%	67%
APPOINTMENTS	45%	22%
ADMINISTRATION	63%	67%
COMMUNICATIONS	48%	9%
WAITING TIMES	52%	*

* Below threshold

04
CONCLUSION
& NEXT STEPS

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CONCLUSION

This intention of this report was to understand the experiences of patients from BAME backgrounds in hospitals. About a third of respondants provided their ethnic backgrounds in the Diversity Monitoring Form which showed 18% were from BAME ethnic backgrounds.

This report has highlighted a number of interesting areas for Healthwatch to monitor and build upon in future analysis, and for our commissioning and provider partners to explore further, triangulate with their own data sets and incorporate into their own work planning and strategy.

The online patient experience methods utilised during the COVID 19 pandemic severely impacted the ability of our local Healthwatch to capture equality monitoring data. Representation of BAME patients within the data was low. A return to face-to-face outreach, coupled with staff training on capturing equality monitoring data (already complete), and a heightened focus on those areas of the borough that may be most deprived, should yield increasing levels of equality monitoring data to analyse.

Overall average star ratings by ethnic group were high (rounded to 4 out of 5 stars for each ethnic group). The variation apparent from a more detailed look (from 3.91 stars to 4.36 stars) should be monitored in future data sets for any trends.

Whilst 82% of White respondents gave a 4 or 5 star (positive) rating, this drops to 74% for BAME respondents. This should be monitored in future reporting.

CONCLUSION

When analysing by borough, the Asian ethnic group scored 4.5 stars in Lewisham and 3.75 stars in Hammersmith & Fulham. The Mixed/Multiple Ethnic Group rated highest in Hounslow and lowest in Lewisham. With increasing data sets for each borough, interesting further analysis can be carried out in future reports.

When looking at star ratings against specific aspects of service we can see that 'Waiting times' receives not only the lowest star ratings overall (by all Ethnic groups), but also the highest levels of variance in ratings by different Ethnic Groups. For the White Ethnic group the lowest star rating was for 'Ease of getting through on the phone'. For Asian, Black, Mixed and Other Ethnic Groups the lowest star rating was for 'Waiting Times. In respect of the highest scoring areas there was a little more variation: White and Mixed = 'Cleanliness'; Asian and Black = 'Staff Attitude'; Other = Quality of Care. These findings offer an indication of areas that warrant further consideration by partners commissioning, delivering and designing services as well as how services communicate with patients around expectations. The findings reported here can be monitored in future report.

Analysis of freetext comments indicate notable variation in 'Quality of Care' (White 80% positive sentiment; BAME 67%); 'Appointments' (White 45% positive sentiment; BAME 22%); 'Communications' (White 48% positive sentiment; BAME 9%). Similar ratings are noted in 'Staff' (73% White and 72% BAME) and 'Administration' (63% White and 67% BAME. As above, this offers interesting food for thought to be tested/investigated further and this picture will be monitored in future reports.

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NEXT STEPS

Present Findings

to relevant CCG, LA and provider partners to inform BAME Inequality work streams.

Improve our Data Collection

This report has highlighted opportunities to improve our Equality monitoring data collection. Training has begun and a move back to our face-to-face model should increase data and our ability to understand and report prevalent themes and trends.
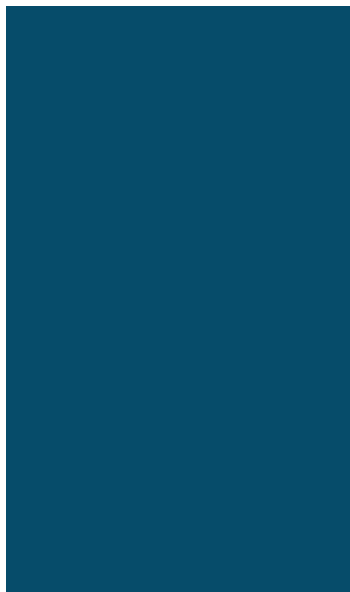
Improve reporting

Further reporting should now commence to monitor themes and trend over time, integrate BAME analysis into standard reporting and look at GP data in a similar way.

Promote our Service to patients from BAME backgrounds

through a range of platforms and targeted outreach, to capture a range of feedback and experiences and encourage participation.