Health Professions Council - 3 July 2008

Equality and diversity demographic data collection

Executive summary and recommendations

Introduction

At its meeting on 13 December 2007, the Council approved an equality and diversity scheme which became effective from 1 January 2008.

The attached paper looks at the issue of collection of equality and diversity data from applicants. This forms part of the action points contained within the scheme.

The paper invites the Council to agree to collect equality and diversity data from applicants for admission to the Register.

Decision

The Council is invited to agree the recommendations outlined on page ten of the attached paper.

Background information

The Council's equality and diversity scheme is available online:
www.hpc-uk.org/aboutus/equality/

Paper considered by Fitness to practice forum:
www.hpc-uk.org/assets/documents/100021ED230408-enclosure6-Equalityanddiversity-DemographicData.pdf

Paper considered by Finance and Resources Committee:
http://www.hpc-uk.org/assets/documents/100022E5finance_and_resources_committee_20080619_enclosure10.pdf

Resource implications

- Project to implement collection of data from applicants for admission including liaising with suppliers for a scanning solution and development of a database to store information.
- Processing of returned equality and diversity monitoring forms by the registration department.
- Running reports against the data and providing updates to Council.

These resource implications are included in planning for the relevant departments/ will be accounted for on an ongoing basis.

Financial implications

- Development of a database and scanning solution in order to capture equality and diversity data.

These financial implications are accounted for in the equality and diversity budget for 2008/2009.

Appendices

- Appendix one: Collecting demographic data from registrants: outline approach
- Appendix two: Equality and Diversity monitoring form

Date of paper

23 June 2008

Equality and diversity demographic data collection

Introduction

At its meeting on 13 December 2007, the Council approved an equality and diversity scheme which became effective from 1 January 2008.

Legislation requires some public bodies to meet certain ‘specific duties’ such as publishing a scheme. We are not one of those bodies but decided that, as part of good practice, we would go beyond what the law requires and publish an equality and diversity scheme.

The scheme describes the steps we have taken and will take in order to ensure that we do not discriminate against people on the basis of:

- Disability
- Age
- Gender
- Sexual orientation
- Race
- Religion

This paper explains the existing data which is already collected and the analysis of this data the Executive has undertaken. The paper proposes that the Council should agree to collect equality and diversity demographic data from applicants for admission to the Register.

The Council previously considered a document outlining a phased approach to collecting data, as an appendix to the draft scheme in July 2007 (please see appendix one).

Our approach

The existing codes of practice for the various equality strands require public authorities to describe their arrangements for collecting data in their schemes, in order to demonstrate their arrangements for assessing the impact of their processes.

In the scheme, we described the data we already collect:

- Demographic data from witnesses and registrants involved in our fitness to practise process.
- Demographic data from applicants for employment and from new employees and existing partners.
- Demographic data from applicants collected as part of processing applications for admission, readmission and renewal to the Register.

In the scheme we said that, in order to ensure that it is necessary to collect additional information, we would take a pragmatic approach before deciding whether it is necessary to collect further information. We would firstly consider whether we should collect additional information from applicants before potentially considering whether we need to collect information from all registrants.

We said that we would:

- present an analysis of human resources demographic data to the finance and resources committee;
- present an analysis of fitness to practise demographic data to the fitness to practise committees; and
- in light of this information, make subsequent decisions about whether to collect further data, and, if so, what that data should be.

The sections below look at each of the areas identified above in more detail.

Fitness to Practise

The Fitness to Practise Department has been gathering equality and diversity data from registrants and complainants since 1 April 2007.

Equality and Diversity monitoring forms have been sent to all complainants where they are a member of the public and to all registrants who have been the subject of a complaint. Information is collected under each of the six headings on page three.

This information is sent to the HPC voluntarily and the forms returned anonymously. The Fitness to practise Department log this on to a spreadsheet which is kept separately from the fitness to practise database. A stamped addressed envelope is sent with the form in order to encourage responses.

In April 2008, the Fitness to Practise Department presented a report of the first year's fitness to practise demographic data to the Fitness to Practise Forum. The response rate to the form was 41.6% of complainants and 16.6% of registrants subject to an allegation.

As data had only been collected for a year, the report concluded that there were few conclusions which could be drawn and recommended a further year of data collection before further analysis takes place. The report also detailed arrangements to attempt to improve the response rate amongst registrants subject to a complaint.

The report noted that, although fitness to practise information can be analysed separately, it might have greater value in the future if it could be compared against demographic data for the Register as a whole. This might enable the HPC to identify any areas where particular groups appeared to be disproportionately affected by the fitness to practise process.

- **Human Resources**

We already collect demographic data from job candidates and new employees, as well as from partners and will continue to do so. We will also commence collecting data on partner job candidates in 2008/2009. We currently collect the following information:

- Gender
- Age
- Disability
- Race or Ethnicity
- Marital Status
- Dependent children

At its meeting on 19 June 2008, the Finance and Resources Committee considered a paper from the Human Resources department about its action points under the equality and diversity scheme. The paper detailed the department's progress towards completing its action points and included a report on the demographic data we currently hold.

One action point in the paper was the revision of the existing equality and diversity monitoring form. This will involve adding to the form to collect information about religion/ belief, sexual orientation and further detail about disability. The Human Resources Department will continue to monitor the data collected and present annual reports to the Finance and Resources Committee. Such data is used to monitor whether the HPC's recruitment and employment practices disproportionately impact some groups more than others. The employee equality and diversity working group will also be provided with this data for use when they consider the possible equality and diversity implications of HR and other policies.

- **Registrants and applicants**

We currently collect the following information from applicants to the Register:

- Gender
- Age
- Nationality

This means that we can produce reports on, for example, the gender breakdown of the Register as a whole and for specific professions; the nationality of applicants and registrants; and provide an age breakdown of the Register. The annual report for 2007/2008 will include information about the gender breakdown of the Register as a whole and by profession.

We do not collect information about disability, sexual orientation, race/ethnicity or religion from new applicants to the Register.

Trust, Assurance and Safety – The Regulation of Health Professionals in the 21st Century

The White Paper made recommendations about equality and diversity with specific reference to the fairness of equality and diversity procedures. The White Paper recommends:

‘As part of the accountability arrangements to Parliament, each regulator will be required, as part of its report to Parliament, to provide information on equality issues relevant to regulation within its profession; analyses of any trends in ethnicity in its fitness to practise proceedings; and an account of action taken to ensure fairness in the way that regulatory action is conducted.’[1]

Collecting equality and diversity data from applicants for registration and from witnesses and complainants involved in the fitness to practise process will help to meet these recommendations.

Collecting information from applicants

The Executive proposes that the Council should agree to collect equality and diversity demographic data from applicants applying for admission to the Register.

Collecting equality and diversity demographic data from applicants might help to give us an idea of the profile of new registrants and also help to give us an idea of the impact of our registration processes.

The information could be analysed, presented as a paper for Council and further distributed to organisations with an interest in the demographic make-up of health professions, including, for example, the professional bodies and Department of Health.

Collecting and storing the data

An internal project group has been established to scope the potential requirements for collecting demographic data, including how the data would be collected and stored. However, no decisions have been taken, pending the discussion of this paper by the Council.

The information would be collected by adding an equality and diversity monitoring form to the application pack completed by applicants. The majority of applicants for admission download their application forms from the website, so this form could be added to the application pack without any expense. The form would also be sent along with the application forms when a postal copy is requested at minimal expense.

A copy of the proposed form is included in appendix one and includes explanatory text to make it clear to applicants that such information is for monitoring purposes only and does not form part of the decision making process. The applicant may choose to return the form with their application or could choose to return it separately. Completion of the form would be entirely voluntary.

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[1] Trust, Assurance and Safety – The Regulation of Health Professionals in the 21st Century, p.68.

On receipt, forms would be detatched if sent with an application and scanned by members of the registration team.

This would be a similar process to how we currently process registration renewal forms.

The Executive has considered and sought advice on whether it would be possible to collect information which was linked in some way to the applicant record. The Executive had explored whether it might be possible to do this in a way which would allow statistical reporting against the data and other data held but without information on individual registrants being accessible by employees. The potential benefits of doing this are outlined in the document at appendix one. However, legal advice received by the Executive has indicated that it would not be possible to collect and store this data in that way. Instead, it is only possible to collect this data in anonymised form and then store it separately from the applicant record.

Collecting information in this way would mean that the Executive could, for example, produce reports on the number or proportion of applicants who consider they have a disability or the numbers of applicants by ethnic background. Additionally collecting profession and route to registration on the form would also allow an analysis against this information (i.e. breakdown by profession and by route to registration).

Demographic data and the approach other regulators

The approach to collecting equality and diversity data has varied across the regulators of healthcare professionals. Some regulators have already collected demographic data from existing registrants, whereas others are currently undertaking consultation work with the professions before making decisions about what data to collect and how to collect it. Amongst those who do collect data, there is variation as to whether this is linked to the registration record in some way, or kept anonymously and separately.

There is also variation between the regulators as to the information collected. The approach of three regulators is briefly explained below:

General Chiropractic Council (GCC)
The GCC has sought to collect demographic data from existing registrants and asks applicants for registration to complete a monitoring form. The GCC collects demographic data under all the headings, except sexual orientation and religion which it may decide to collect in the future.

General Medical Council (GMC)
The GMC recently undertook an exercise to collect ethnicity data from all doctors. The GMC are currently considering whether they should begin to collect other pieces of demographic data.

General Dental Council (GDC)
The GDC has collected demographic data from existing registrants under all six headings and collects data from applicants. By 2006, over 75% of dentists and hygienists / therapists had provided their data.

A member of the Executive participates in a joint regulators equality and diversity forum hosted by the Nursing and Midwifery Council.

Data headings

The Fitness to Practise department currently collects equality and diversity data relating to all six headings outlined on page three, whilst the human resources department collects information on disability, age, gender and race/ethnicity from job applicants, employees and partners and is due to collect further data in the future.

The GCC and GMC both decided not to collect the full range of equality and diversity data. The GDC collects data against each of the headings.

The Council is invited to discuss whether it would wish to collect equality and diversity demographic data under each of the headings outlined on page three.

The Executive recommends to the Council that data should be collected from new applicants for admission to the Register, under each of these headings. If agreed, this would be consistent with the data already collected from complainants and registrants by the fitness to practise department. The majority of applicants for registration will be familiar with being asked for most of this information as part of equal opportunities monitoring for employment.

This is one particular area that the Council may wish to review when it considers making decisions about whether it would be appropriate to move to collect data from existing registrants.

Please note that age data is already collected on the application form (applicants provide a date of birth) and therefore is not been included as a heading on the proposed equality and diversity monitoring form.

Although gender is collected on the application form for registration, this does not currently include transgender as a category. This has therefore been included on the proposed monitoring form.

Collecting information from existing registrants

If the Council agrees to start collecting equality and diversity data from applicants, it may in future consider whether to start collecting such data from existing registrants.

However, before taking such a step, it is likely that the Executive would need to undertake substantial liaison work with organisations representing registrants about collecting such data and how it would be used by the HPC. Careful consideration would also be needed as to how best to collect the data from registrants – i.e. separately, or on a rolling basis on renewal.

In developing its plans for collecting data from applicants, the Executive has sought to ensure that arrangements take account of the fact that data may be collected from existing registrants at some point in the future.

The Executive proposes that the Council might consider whether it might be helpful to begin collecting data from existing registrants when it considers an analysis of the first year of equality and diversity data from applicants.

Timetable

If the Council agrees with the recommendations in this paper, work will be undertaken in the summer and autumn of 2008 to develop the database and scanning solution to collect and store the equality and diversity data. Following user testing and training, it is then anticipated that collection of data would begin from February 2009.

Recommendations

The Council is invited to discuss this paper and agree:

- to collect equality and diversity data from applicants for admission to the Register under the following headings:
    - disability
    - race
    - gender
    - religion
    - sexual orientation;

- the text of the attached monitoring form (subject to minor editing amendments and any necessary changes arising from the Council's discussion); and

- the arrangements for collecting and storing the data outlined in this paper.

The Executive would provide an update on the progress of this project to the Council at a future meeting.

Appendix one

Collecting demographic data from registrants: outline approach

The Equality and Diversity Scheme

As part of the Equality and Diversity Scheme, we are looking at the data we collect from registrants, and the information that we hold relating to certain groups. This includes information relating to the six areas of our scheme:

- disability;
- age;
- gender;
- sexual orientation;
- race; and
- religion.

In order to ensure that we are not indirectly discriminating against any of these groups, we will need to capture demographic data.

A phased approach

What we suggest is a phased approach to collecting data from registrants, with regular analysis and review. Depending on the information collected, and any trends that were found, we would then move on if necessary to collecting additional information.

Phase 1 - Collecting data from FTP

We have started collecting data from registrants and complainants who are the subject of a fitness to practise case. An analysis of the data collected will be presented to the fitness to practise committees in April 2008.

Any breakdown of data can be compared against demographic data for the UK as a whole. But we can't compare it against information about the people on the Register.

If analysis shows that such a comparison would be useful, then we can continue to Phase 2 of the data collection.

Phase 2 - Collecting data from applicants

The second phase could be to add a demographic data sheet to the application form, and ask applicants to complete it. We would stress to applicants that this data does not form part of our decision-making process, and is collected by us for anonymous analysis. Applicants would be accustomed to this kind of data collection from other similar processes such as job applications, and would have the option not to complete the details.

Information analysed from applicants would be helpful to give us an idea of the profile of new registrants. This information could be contrasted against the

FTP information, and any discrepancies could be investigated further. The information could also be analysed, presented as a paper for Council, and further distributed to other organisations with an interest in the demographic make-up of health professionals, including, say, the professional bodies, and the Departments of Health.

Depending on the results of this analysis, it may be that we decide that information on applicants is useful, but does not show us how the demographic of the Register is changing over time. At this point, it might be helpful to consider whether moving to Phase 3 of the data collection could be useful.

Phase 3 - Collecting data from existing registrants

This would involve adding a demographic data capture sheet to the renewal forms, and sending it out as each profession enters renewal (with assurances as above that the data is used for monitoring, not to make decisions).

Linking information to the registration database

Maintaining confidentiality

This demographic data could all be linked to registrants' registration records, but stored so that it was only visible to a small number of people, and password protected (and not visible, for example, to Registration Officers, or Fitness to Practise team members).

Another alternative would be to store the information separately from LISA, but to store it with registration numbers. The purpose of doing this would be to provide information for anonymous reports on the demographic make-up of particular groups of registrants so that this could then be compared to the Register as a whole (see examples of use, below). Part of our commitment to registrants and to professional bodies would be that the storage would be completely separate from our decision-making processes.

Possible low response rates

Linking the data with registration numbers in this way would mean that we could store the information cumulatively, and if we had a low response rate, we could then write out again *only* to those registrants who had not responded the first time.

Registrants who have supplied personal information once would be frustrated to be asked again for this information. They may fear it had been lost, and may well be less likely to supply it again, particularly since some of this kind of demographic data is unlikely to change over time.

By linking the information to LISA, even a low response rate could form the beginning of a cumulative collection of information that gives an increasingly accurate idea of what the Register looks like.

Using the data

If the information we collected was linked to the registration record, this would mean that the information would be useable in the long-term. In effect, any of our processes where we interact with registrants could be analysed against the make-up of the Register to see whether the people we interact with under or over represent certain groups. It may, of course, be the case that trends identified are outside of HPC’s control. However, it would nonetheless be useful to identify such trends and make this conclusion.

On a very straightforward level, we could look at, say, how the number of people with disabilities on the Register varies over time.

However, the information would be even more useful in order to draw comparisons between groups of people and the Register as a whole. Comparing against a cumulative picture of the Register is likely to give more useful information than comparing against statistics for the UK.

For example, by recording the registration numbers of registrants who respond to our consultations, we could then run a report to see their demographic data, and compare it against the Register as a whole. We might find that certain groups are much more or less likely to respond to consultations, and we could then look into altering our consultation process to encourage under-represented groups to participate.

If we had the registration numbers of people whose registration lapsed, we could compare this against the data for the Register to determine whether particular groups are more likely not to renew their registration. We could then re-consider our communications, re-write our registration guidance, or look at our processes as appropriate.

Similarly, we could analyse data for people who are struck off the Register, those who come back onto the Register via the ‘returners to practice’ requirements, registrants who attend Listening Events or conference stands, people who request publications, those who pass or fail international assessments… all of this could be done by pulling a report on a sub-section of the Register, and then comparing this against an analysis of the Register as a whole.

It would effectively future-proof our data collection, ensuring that we don’t just take a ‘snapshot’ of a small percentage of respondents which we can’t then do anything with other than break down and publish a superficial analysis, and would mean instead that we create a source of data that changes over time, so that as the Register changes we can look at how the demographic data has changed, and plan appropriate reactions.

Appendix two

hpc health professions council

Equality and Diversity Monitoring Form

We hope you will help us by completing this form but please be aware that completing the form is entirely voluntary and, if you choose not to complete it, this will not affect your application for registration.

We have an Equality and Diversity Scheme and are committed to working towards equality of opportunity. One of the ways in which we do this is by collecting information which we can then use to monitor the fairness of our processes through analysis and statistical reports and in developing future ways of working.

This form does not ask you to give your name and any information that you choose to provide will be strictly confidential. Information provided on this form does not form part of our decision-making process and will not affect your application for registration.

Although you are not required to fill in this form, we would like to encourage you to do so because receiving enough information will mean we can undertake robust analysis to either ensure that our processes are fair, or to make changes to how we work.

Please complete the form by ticking the appropriate boxes below and return it to us. You may wish to return it with your application pack.

Profession

☐ Arts Therapists
☐ Biomedical Scientists
☐ Chiropodists and Podiatrists
☐ Clinical Scientists
☐ Dietitians
☐ Occupational Therapists
☐ Operating Department Practitioners
☐ Orthoptists
☐ Paramedics
☐ Physiotherapists
☐ Prosthetists and Orthotists
☐ Radiographers
☐ Speech and Language Therapists

Application Route

☐ International
☐ Grandparenting
☐ UK approved course

Gender

Male ☐ Female ☐ Transgender ☐

Sexual Orientation

Bisexual ☐
Gay Man ☐
Gay Woman/lesbian ☐
Heterosexual ☐
Other ☐
Prefer not to say ☐

Do you consider yourself to have a disability?

Yes ☐ No ☐

Religion	Buddhist ☐
	Christian ☐
	Hindu ☐
	Jewish ☐
	Muslim ☐
	Sikh ☐
	No religion ☐
	Prefer not to say ☐
	Other ☐ Please state which ……………………………..

NATIONALITY & ETHNIC ORIGIN

What race or ethnicity do you consider yourself?

Choose ONE section from A to E, and then tick the appropriate box to indicate your cultural background.

A White

- ☐ British
  - ☐ English
  - ☐ Scottish
  - ☐ Welsh
- ☐ Irish
- ☐ Northern Irish
- ☐ Any other White background, please write in **……………………………**

B Mixed

☐ White and Black Caribbean

☐ White and Black African

☐ White and Asian

☐ Any other Mixed background, please write in **…………………………..**

C Asian, Asian British, Asian English, Asian Scottish, or Asian Welsh

☐ Indian

☐ Pakistani

☐ Bangladeshi

☐ Any other Asian background, please write in …………………………

D Black, Black British, Black English, Black Scottish, or Black Welsh

☐ Caribbean

☐ African

☐ Any other Black background, please write in ……………………………

E Chinese, Chinese British, Chinese English, Chinese Scottish, Chinese Welsh, or other ethnic group

☐ Chinese

☐ Any other Chinese background, please write in ……………………….

F Any other background, please write in …………………………………..

THANK YOU FOR COMPLETING THIS FORM