

Equality and Diversity Policy v3

Equality and Diversity Policy

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Executive Lead	Sarah Tomkins, Chief Executive
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Policy Owner	Chief Nurse and Director of Quality and People, Equality, Diversity and Inclusion Lead
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Equality and Health Inequalities Statement

First Community values diversity, promotes inclusion, and ensures equal opportunities for all. We aim to design and implement services that meet the diverse needs of our population and workforce, ensuring that no one is placed at a disadvantage over others. We take into account the Equality Legislation including the Equalities Act 2010 and embrace the four staff pledges in the NHS Constitution. We use our Equality, Diversity, and Inclusion (EDI) vision and mission statements to help us drive our work.

This document has been assessed to ensure that no employee receives less favourable treatment on the protected characteristics of their age, disability, sex (gender), gender reassignment, sexual orientation, marriage and civil partnership, race, religion or belief, pregnancy and maternity.

Members of staff, volunteers or members of the public may request assistance with this policy if they have particular needs. If the member of staff has language difficulties and difficulty in understanding this policy, the use of an interpreter will be considered.

First Community are compliant with the requirements of the Accessible Information Standard which aims to ensure that people who have a disability, impairment or sensory loss get information that they can access and understand and any communication support that they need. We ensure that we ask people if they have any information or communication needs and ask how we might meet those needs, make sure this is recorded clearly on any records, highlight this so it is clear to other staff, share this as appropriate and make sure that we take the necessary steps so that our patients receive information that they can access and understand and receive communication support as needed.

Sustainability

In October 2020, the NHS became the world's first health service to commit to a target of reaching Net-Zero Carbon emissions by 2040.

As healthcare professionals we have a duty to play our part in tackling the problem of our changing climate. Right across the organisation, in all roles both clinical and non-clinical we can think, and act, more sustainably.

This is why we need to take action to create the change that will protect the environment on which our health depends. We are working to create a greener NHS at First Community as set out in our [Green Plan](#). All of our documents consider sustainability and support our green plan.

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1. Background / Introduction

- 1.1 First Community Health and Care is committed to ensuring equal opportunities is actively addressed in how services are delivered to the public and in the way employees are treated. Equality and diversity are about having respect for all individuals and treating them with dignity, courtesy, fairness and consideration, welcoming and accepting differences and trying to meet people's needs.
- 1.2 This means that we undertake to act equitably and fairly at all times, towards our patients and service users and our staff. We take seriously our obligations under the Equality Act 2010 to:
- Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the Act (Equality Act 2010).
 - Advance equal opportunities between people who share a characteristic and those who don't
 - Foster good relations between people who share a characteristic and those who don't
- 1.3 Specifically, the Act requires us to ensure equitable access. Information, treatment and service for people in nine "protected groups" related to:
- Age
 - Race including nationality, ethnicity
 - Disability
 - Sex
 - Religion or belief
 - Gender re-assignment
 - Marriage and civil partnership
 - Sexual orientation
 - Pregnancy and maternity.

The act also protects Carers from discrimination in employment or service provision.

Commitments

- 1.4 First Community Health and Care acknowledges that there is discrimination and inequality and is committed to working to find ways to address and eliminate this.
- 1.5 First Community Health and Care aims to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none are placed at a disadvantage over others. It takes into account the Equality Act 2010 and the Human Rights Act 1998 and promotes equal opportunities for all.
- 1.6 All policies will be assessed for their impact in relation to the nine protected characteristics as listed in 1.3
- 1.7 Members of staff, volunteers or members of the public may request assistance to access this or any other document published by First Community if they have particular needs that makes it difficult to access them in their published form. First Community will take all reasonable steps to make this or any other published document accessible following such a request.

- 1.8 First Community Health and Care positively welcomes diversity in its workforce and recognises the richness that this brings to the organisation and in particular the benefits it brings to meet the needs of the diverse communities it serves. First Community recognises that in some circumstances it may be desirable to take positive action to improve diversity where under representation exists or where clear benefits to service users can be demonstrated. Any such positive action would be within the scope of the provisions set out within the Equality Act (section 159) and subject to employment law.
- 1.9 First Community Health and Care will ensure that this Policy is consistently applied and that all other policies, practices and training programmes adhere to the principles of this Policy.
- 1.10 First Community Health and Care will fully investigate all alleged breaches of this Policy. Any employee who is found to have breached this Policy may face disciplinary action in accordance with Disciplinary Policy & Procedure.

2. Purpose

This Policy:

- To eliminate discrimination, not only by preventing covert acts of discrimination but also to highlight requirements and practices which may be unintentionally discriminatory in nature.
- The Policy also aims to aid the development of good employment practices in respect of existing and future employees.
- Outlines First Community's general commitments to how it discharges its responsibilities in relation to equality and diversity.

This policy explicitly does not attempt to bring together all of First Community's specific policy commitments relating to equality and diversity as these will be found across a number of policies, strategies and service development decisions. All of which, as outlined in this policy, should be individually assessed for its equality impact.

3. Definitions

Equal Opportunities

Equal opportunities emphasise the structures, systems and measure of groups within society and within organisations. Equal opportunity is about addressing issues of representation and balance.

Equality

Equality is about creating a fairer society where everyone can participate and has the opportunity to fulfil their potential. It is backed by legislation designed to address unfair discrimination based on membership of a particular group.

Diversity

Diversity is about the recognition and valuing of difference in its broadest sense. It is about creating a working culture and practices that recognise, respect, value and harness difference for the benefit of the organisation and the individual, including patients

Human Rights

Rights protected by the Human Rights Act, 1998

1. The right to life
2. The right not to be tortured or treated in an inhuman or degrading way
3. The right to be free from slavery or forced labour
4. The right to liberty
5. The right to a fair trial
6. The right to no punishment without law
7. The right to respect for private and family life home and correspondence
8. The right to freedom of thought, conscience, and religion
9. The right to freedom of expression
10. The right to freedom of assembly and association
11. The right to marry and found a family
12. The right not to be discriminated against in relation to any of the rights contained in the European Convention
13. The right to peaceful enjoyment of possessions
14. The right to an education
15. The right to free elections

Direct Discrimination

Direct discrimination occurs when someone is treated less favourably than another person because of a protected characteristic they have or are thought to have (see perceptive discrimination below), or because they associate with someone who has a protected characteristic (see associative discrimination below).

Indirect Discrimination

Indirect discrimination happens when there is a policy (a practice, rule or an arrangement) that applies in the same way for everyone but disadvantages a group of people who share a protected characteristic. If this happens, the person or organisation applying the policy must show that there is good reason for it.

Institutional Discrimination

The collective failure of an organisation to provide an appropriate and professional service to people because of their protected characteristics.

It can be seen or detected in processes, attitudes and behaviour which amount to discrimination through unwitting prejudice, ignorance, thoughtlessness, and racist stereotyping which disadvantages minority ethnic people.

Associative Discrimination

Applies to race (including caste), religion or belief, sexual orientation, age, disability, gender reassignment, marriage & civil partnership and sex). This is direct discrimination against someone because they associate with another person who possesses a protected characteristic.

Perceptive Discrimination

Applies to race (including caste),, religion or belief, sexual orientation, age, disability, gender reassignment, marriage & civil partnership and sex. This is direct discrimination against an individual because others think they possess a particular protected characteristic. It applies even if the person does not actually possess that characteristic.

Harassment

Harassment is "unwanted conduct related to a relevant protected characteristic, which has the purpose or effect of violating an individual's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for that individual".

Third Party Harassment

Applies to race (including caste),, religion or belief, sexual orientation, age, disability, gender reassignment, marriage & civil partnership and sex). The Equality Act makes the employer potentially liable for harassment of their employees by people (third parties) who are not employees of the company, such as customers or clients. The employer will only be liable when harassment has occurred on at least two previous occasions, the employer is aware that it has taken place, and has not taken reasonable steps to prevent it from happening again.

Victimisation

Victimisation occurs when an employee is treated badly because they have made or supported a complaint or raised a grievance under the legislation or because they are suspected of doing so. An employee is not protected from victimisation if they have maliciously made or supported an untrue complaint.

Positive Action

This is a legal term described in the Sex Discrimination and Race Relations and Equality Acts. The positive action provisions make it lawful to provide training and special encouragement (for example through targeted advertising) for people of a particular racial group, or either sex, who have been under-represented in certain occupations or grades during the previous 12 months. It is also lawful to address any special educational, training or welfare needs identified for a specific racial group.

Reasonable Adjustments

The concept of 'reasonable adjustments' is described in the Disability Discrimination Act 1995, and refers to the arrangements that a prospective employer, an employer or service/education provider must make to remove the disadvantage experienced by a disabled person and caused by their disability; in other words, to create a 'level playing field' as far as possible.

BAME (Black Asian & Minority Ethnic)

This abbreviation is used to describe people from black, Asian and minority ethnic backgrounds. The word black does not refer to skin colour but is a generic term referring to people identifying themselves, either directly or by descent, from African, Caribbean or Asian backgrounds. Minority ethnic refers to people or groups who are currently representative of minority cultures in our communities and society and includes people who identify themselves as 'white other', including people who identify as Gypsy, Roma and Traveller.

Accessible Information

We have a legal duty to provide information in accessible formats that meets people's needs. This may mean translating material, providing in Braille, audio or easy read format. It is good practice to use 14-point Arial font to increase readability for people with visual impairments. It is also good practice to provide support for people whose first language is not English. The EasyRead format is designed to help people with reading difficulties, such as people with learning disabilities and people that have had head injuries or strokes. It can also be helpful to people whose first language is not English.

4. Scope

First Community Health and Care's commitment to treat all people fairly applies to all of our functions. In particular it covers:

4.1 Our Board of Directors and Council of Governors

We recognise the vital role played by our Board of Directors and Council of Governors (COG) in leading by example on equality and diversity matters. We will therefore:

- Adopt a fair and open system for selecting board members and governors
- Seek to ensure that our board and council are diverse bodies representative of the communities we service
- Provide board members and COG with the development and information needed to help them implement our commitments on equality and diversity
- Ensure that all reports to the Board and COG highlight relevant equality and diversity issues
- Prepare an annual report for consideration by the Board and Council, setting out our progress on meeting our equality and diversity commitments

4.2 Our Role as an Employer

We aim to promote equality and opportunity for everyone we employ. We recognise that our commitment to equality also depends on who we employ, and the support and training we provide for all our employees. We will therefore:

- Adopt a fair and open system for recruiting, selecting, and promoting staff
- Provide training and other guidance to all staff to help them implement our commitments on equality and diversity
- Regularly review all of our employment related terms and conditions to ensure that they are non-discriminatory and fair to all
- Create a working environment that values diversity and is free from harassment
- Promote work-life balance initiatives
- Collect and monitor equality and diversity data relating to job applicants, shortlisted candidates, and successful candidates, and analyse the data for any patterns of bias or discrimination
- Collect and monitor equality data on our workforce to help us understand our workforce and to review how representative we are of our local population.
- Develop the talents of our staff through training and other career development opportunities
- Regularly undertake equality analysis of all employment policies and procedures to ensure that they are non-discriminatory and fair to all

- Prepare an annual report for consideration by our Board of Directors and Council of Governors setting out our progress on equality and diversity in our work as an employer.

4.3 Our Role as a Provider of Services

We strive to deliver the highest quality of care in a way that meets the individual needs of our patients and other service users, ensuring that the range of people able to access and benefit from our services is as wide as possible. We will therefore aim to:

- Ensure our premises are fully accessible
- Provide information in ways that are easy to understand.
- Provide information in the preferred choice of format for the intended audience
- Ensure our language service includes a range of options to meet the needs of of service users, such as language line telephone-based interpretation; translations; Braille; British sign language interpreting and audio transcripts
- Regularly undertake equality analysis of all our services to ensure that they are non-discriminatory and fair to all
- Develop a clear understanding of our patient profile by age, ethnicity, disability, sex, sexual orientation and religion, and any other relevant characteristics, where service users are comfortable about disclosing this information
- Monitor uptake and user satisfaction of our services by age, ethnicity, disability, sex, sexual orientation and religion, where service users are comfortable about disclosing this information
- Take steps to address dissatisfaction and/or under representation from specific groups across all our services
- Take into account the diverse needs, views, preferences and aspirations across our community when planning and delivering services
- Require our contractors and partners to demonstrate they share our commitments to equality and diversity when we invite tenders, when we award contracts and when we monitor their work for us
- Prepare an annual report for consideration by our Board of Directors and Council of Governors setting out our progress on equality and diversity in our work as a healthcare provider.

5. Duties and Responsibilities

- 5.1 The Board of Directors for First Community Health and Care has primary legal and moral responsibility for ensuring that it and its employees do not discriminate unlawfully and that it should not merely seek to avoid such discrimination, but should develop positive policies and practices to widely promote equality of opportunity.
- 5.2 First Community Health and Care is subject to the specific duties of the Equality Duty under the Equality Act 2010, which applies to all public bodies carrying out public functions. It supports good decision-making by ensuring public bodies use equality analysis to consider how different people will be affected by their activities, helping them to deliver policies and services which are efficient and effective, accessible to all and which meet different people's needs. First Community Health and Care must publish information to show their compliance with the Equality Duty. This means that the information we publish must show due regard to the need to:

- Eliminate unlawful discrimination: harassment and victimisation and any other conduct prohibited by the act
 - Advance equality of opportunity between people who share a protected characteristic and people who do not share it and
 - Foster good relations between people who share a protected characteristic and people who do not share it.
- 5.3 In meeting our Equality Duty, First Community Health and Care has opted to use the Equality Delivery System (EDS2) as a framework to guide our approach to policy-making, community and workforce, performance monitoring and action planning. Our Equality Objectives and related action plan are and will continue to be guided by this framework and the associated toolkit, which is aligned to the NHS Outcomes Framework, the NHS Constitution and the Care Quality Commission as well as evolving equalities legislation.
- 5.4 Our Board of Directors will be responsible for publishing the annual public sector duty information as required by the Equality Act 2010, and for monitoring our performance in meeting public commitments to furthering equality and diversity as set out in our Equality Objectives.
- 5.5 The Director of Quality and People will be responsible for leading the implementation of this policy and its regular review. He/she will also be responsible for the implementation of equality and diversity monitoring and reporting.
- 5.6 Managers must ensure that actual or potential discrimination/indirect discrimination/victimisation, within their sphere of responsibility is eliminated by ensuring firm adherence to our Equality and Diversity policy and other relevant policies such as Disciplinary, Grievance, Challenging Bullying and Harassment etc. Managers must carry out their responsibilities in a manner free of discriminatory practices, and which also promotes equal opportunities. All managers must ensure that:
- All their employees are aware of their responsibilities, the basic legislative framework and our Equality and Diversity Policy
 - Staff complaints and grievances are dealt with promptly and in a fair and consistent manner
 - Proper records of employment are documented and maintained
 - They carry out regular reviews of processes and practices
 - All their employees have attended mandatory Equality and Diversity training.
- 5.7 Individual members of staff all have a responsibility to work towards achieving equality of opportunity in the organisation, and promoting equal opportunities and diversity. Individual attitudes and activities are of prime importance to the success of this Policy. Hence staff at all levels in the organisation are expected to accept responsibility for the practical application of this Policy.
- 5.8 Staff have a responsibility to the Board of Directors, the Council of Governors, their clients/patients, their managers and colleagues. They must:
- Co-operate with the policies and procedures introduced to ensure equality of opportunity for all

- Not discriminate against, victimise, harass or bully fellow employees or potential employees, nor condone these actions by others
- Take steps to meet the needs of patients within the protected characteristic groups
- Not induce other employees to practice unlawful discrimination
- Assist in the investigation of alleged discriminatory practices.

- 5.9 Unlawful and discriminatory practices on a personal level will be viewed very seriously and may result in disciplinary action, including dismissal in cases of gross misconduct.
- 5.10 Trade Unions/Professional Associations have an important role to play in working in partnership with First Community Health and Care to prevent discrimination and victimisation and to promote equal opportunities and diversity. They must seek to ensure that members are treated with dignity and respect, at all times.
- 5.11 Trade Unions/Professional Associations will assist in the promotion of this Policy, so that measures to eliminate discrimination/victimisation in the workplace can be introduced with the clear commitment of both management and staff-side.
- 5.12 Contractors, Agencies and Suppliers: First Community Health and Care will seek to ensure that all those working with us and/or on our premises adhere to the principles of this Policy. It will be usual practice to seek information on the company's stance on Equality and Diversity when considering the award of contracts.

6. Recruitment and Selection

- 6.1 First Community Health and Care is committed to building a workforce which is representative of the diversity of the local community.
- 6.2 First Community Health and Care believes that recruitment and selection should be based on the individual's skills and ability to do the job and that performance should be judged only against objective, work related criteria.
- 6.3 All staff and applicants will be dealt with fairly and consistently, in accordance with the agreed procedures for recruitment and selection.
- 6.4 All applicants will be assessed, irrespective of gender, age, race, colour, creed, religion, religious belief, nationality, ethnic origin, social background, sexual orientation, marital status, disability, real or suspected HIV/AIDS status, non-relevant criminal background or Trade Union membership.
- 6.5 Vacancies will be advertised in order to ensure that they reach a broad range of potential applicants. Vacancy notifications and advertisements will state our commitment to equality and diversity.
- 6.6 Job descriptions and person specifications will be produced which reflect the key duties and responsibilities of the post and requirements of job applicants.

- 6.7 All applicants will be assessed against these factors and treated on merit.
- 6.8 All recruitment will be undertaken in accordance with our policy and procedure on employment checks.
- 6.9 Every consideration will be shown to job applicants and employees with disabilities and those who meet the minimum criteria for the post will be invited for interview. All applicants invited for interview are asked if they need any additional support when attending the interview. Employees who become disabled in the course of their employment will have a regular review with their manager to consider how to best utilise and develop their abilities. Any adjustments, which are deemed reasonable, to their employment or working conditions, that would assist them in the performance of their duties, will be made as advised in our policy on Making Reasonable Adjustments.
- 6.10 In accordance with the Rehabilitation of Offenders Act 1974, First Community Health and Care will not discriminate against or dismiss the applications of candidates with spent convictions for posts which are not exempt from this legislation.
- 6.11 Records of all recruitment processes and decisions will be kept.
- 6.12 First Community Health and Care will aim to ensure that all appointing officers are trained in current recruitment and selection procedures.

7. Learning and Development

- 7. First Community Health and Care is committed to ensuring that all staff meet their full potential throughout the course of their working lives.
- 7.2 All members of staff will be encouraged to make use of the training, education and development opportunities available. There will be agreed and open selection criteria in place to ensure fairness/relevance of attendance.
- 7.3 Positive action may be used to ensure that disadvantaged groups have equal opportunities for training, education and development. Line managers will ensure that all staff have equal access to training, education and development opportunities in line with the needs identified in their personal development plans and appraisals. We will review and report this regularly using the Learning Management System.
- 7.4 There is no justification for ignoring a pool of talent and experience on the grounds of age. Therefore, there should be no limit on the age at which learning opportunities will be available. Ongoing training on equality and diversity issues will be available and mandatory for those who manage staff or are members of recruiting panels.
- 7.5 Equality and diversity training has been identified as mandatory for all staff groups

- 7.6 Equality, diversity and human rights updates are mandatory every three years and can be accessed in a number of ways including team sessions and e-learning.
- 7.7 Staff with specific responsibilities for employees and patients will receive other appropriate training as identified within their personal development plan.
- 7.8 Equality and diversity awareness will be included as a topic in our induction programme.
- 7.9 This policy is included within the induction list as a policy all staff should read when they commence employment at First Community
- 7.10 A copy of the full Policy will be held in an accessible place on our intranet.

8. Sensitivity to Cultural and Religious Needs

Where employees have particular cultural and religious needs, First Community Health and Care will consider whether it is reasonably practicable to vary and/or adapt work requirements to meet these needs.

9. Provision for Personal Circumstances

We recognise that flexibility may be required in order to facilitate staff to meet short-term or long-term personal commitments (e.g., to care for dependants). Such requests will be considered seriously, in line with our Flexible Working Policy.

10. Complaints of Discrimination or Victimisation

- 10.1 Managers must take particular care to deal effectively with all complaints of discrimination or victimisation. It should not be assumed that such complaints arise out of over sensitivity on the part of the complainant. Failure to undertake the responsibilities of dealing appropriately with a complaint may lead to disciplinary action against the manager. An employee who feels that he/she has been discriminated against or victimised should contact their line manager and/or Human Resources and/or their Trade Union for advice, support and guidance.
- 10.2 The process to be used for dealing with allegations of harassment or bullying is detailed in the Challenging Bullying and Harassment Policy
- 10.3 For allegations of other types of discrimination or victimisation, the Grievance Procedure should normally be used, although this is subject to discussion and agreement in each individual case.
- 10.4 If an employee considers that another individual is being discriminated against or victimised, this employee is encouraged to bring the matter to the attention of his/her manager, the relevant Director, or the Managing Director. Employees also have the option of speaking to a Freedom to Speak up Guardian at any time.

- 10.5 Employees shall be protected from intimidation, victimisation, or discrimination for raising a concern, filing a complaint, or assisting in an investigation.
- 10.6 Retaliation against an employee who has made a complaint or raised a concern, in good faith, is a disciplinary offence and will be dealt with under the appropriate policy.

11. Approval, Ratification and Review Process

- 11.1 This policy will be subject to review after three years and at any stage at the request of the Board of Directors or Council of Governors.
- 11.2 The Director of Quality and People has responsibility for the overall monitoring of the policy.
- 11.3 Compliance with the Equality Act 2010 will be monitored via the Board of Directors.

12. Dissemination and Implementation

- 12.1 Details of monitoring and First Community Health and Care's commitment to equality and diversity will be a central feature of our communication strategy. This will be published in various ways such as:
- Annual reports
 - On the website and intranet Advertisements
 - Job descriptions
 - Recruitment literature
 - Patient information
- 12.2 All staff will have access to this and related policies on our intranet.
- 12.3 A staff survey will be regularly undertaken which will be used to understand the experience and perspectives of all First Community Healthcare employees, and to monitor any specific impacts on those with any of the nine protected characteristics.

13. Appendices

Appendix 1: The Legislative Framework

14. Training and Development

15. Monitoring the Effectiveness and Implementation

- 15.1 Monitoring approval, amendments, and document control
This policy shall be monitored by the organisation in order to ensure consistency and equitable implementation including equality data. Any issues identified will be addressed via the appropriate manager with support from the People Team.

We will also monitor the impact of the policy through our EDI Group (EDIG) and various reports such as the Workforce Race Equality Standard (WRES), Workforce Disability Equality Standard (WDES), Equality Delivery System 22 (EDS22), Gender Pay Gap report, Equality Diversity and Inclusion (EDI) report,

Staff Survey, Pulse Survey. This information will be triangulated with our Freedom to Speak up (FTSU) and raising concerns dashboard in order to investigate themes in relation to equality, diversity and inclusion.

15.2 Consultation and Communication with Stakeholders

The policy has gone through consultation with managers, employees and the joint negotiation committee.

15.3 Approval and Ratification

This policy will be approved by Assurance Sub Committee and ratified by Quality Committee. The board will be assured that an Equality Impact Assessment has been carried out and that the policy requires no amendment as a result.

15.4 Review and Revision

The policies will be reviewed every three years or where there is a change in legislation.

15.5 Implementation and Communication

This policy will be made available to all employees electronically through the organisational intranet and employees will be made aware of any updates via weekly communications.

16. Related Documents

- Flexible Working Policy
- Leave Policy
- Carers Policy
- Recruitment and Selection Policy and Procedure
- Disciplinary Policy and Procedure
- Grievance Policy and Procedure
- Challenging Bullying and Harassment (Dignity at work) Policy and Procedure
- Behaviours framework
- Code of Conduct Policy
- Incident Reporting Policy
- It's Not OK
- Sickness and Absence Policy

17. Equality Impact Assessment

All public bodies have a statutory duty under the race Relations Act 2000 to set out arrangements to assess and consult on how policies and functions impact on race equality. All policy documents will be equality impact assessed and this will include equality and human rights with regard to disability, age, and gender. This task will be undertaken by the author.

First Community Health and Care aims to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none are placed at a disadvantage over others. It is a requirement that we conduct equality impact assessments on all policies and services within the organisation. Therefore, all policies must have an equality impact assessment.

Appendix A: Version control

Version Number	Status	DATE	Name and job title of person making amendments	Comments / summary of changes
1	Final	June 2017	Phillip Greenhill	Ratified and JNCC
1.1	Draft	Dec 2020	Jon Ota & Andrea Knowles	EMT
1.2	Draft	Jan 2021	Jon Ota & Andrea Knowles	Approved following virtual feedback
1.3	Draft	Feb 2021	Jon Ota & Andrea Knowles	Ratified
2	Final	Feb 2021	Jon Ota & Andrea Knowles	
2.1	Draft	Jan 2024	Jon Ota & Samantha Jover	Approved at Assurance Sub Committee following virtual meeting
3	Final	Feb 2024	Jon Ota & Samantha Jover	Ratified at Quality Committee

Appendix B: Equality Impact Assessment Screening Tool

For help and guidance see GU_WF015 EIA Guidance or contact fhc.edi@nhs.net
Once complete please send the whole document to fhc.edi@nhs.net

Equality Impact Assessment Screening Tool

EIA No: <i>(To be inserted by EDI Lead)</i>	To follow	
What is being assessed? (Name of Policy, process, procedure, decision, guidance, change etc.)	Equality and Diversity Policy	
Owner/Author:	Jon Ota	
What are the main aims and objectives of the Policy/Document/project/programme/guidance/change		
Date EIA screening tool Commenced		
Person leading the EIA	Name Job Title	Samantha Jover EDI lead
	Date Completed	15/01/2024

The Equality Act (2010) defines a range of protected characteristics we must think about when doing an EIA. These are age, disability, gender reassignment, marriage/civil partnership, pregnancy/maternity, race, religion or belief, sex and sexual orientation. In relation to marriage and civil partnership only the discrimination aim applies, not advance equality of opportunity or foster good relations. Please consider these protected characteristics groups, along with other relevant groups such as carers when completing the EIA.

Section 1: SCREENING:

Do any of the following apply? (If so complete a full impact assessment):

Criteria*	Yes	No
Could or does the policy, process, procedure, decision, guidance, change, etc affect one or more equality target group(s) in a different way to other groups?	X	
Could or do different equality groups have different needs in relation to the policy, process, procedure, decision, guidance, change, etc?	X	
Does the policy, process, procedure, decision, guidance, change, etc actually or potentially contribute to or hinder equality of opportunity?	X	
Does the policy, process, procedure, decision, guidance, change, etc offer unique opportunities to promote equality?	X	

If all answers to the above are NO, a full assessment is not required. Please make reference to the fact that EIA Screening has taken place and forward the document to the EDI Lead at fhc.edi@nhs.net.

If you have answered YES to any of the questions above, please complete the full Equality Impact Assessment template in appendix c.

Appendix C: Full Equality Impact Assessment Template

CONTACT DETAILS	
1. Name of Proposal Owner	Jon Ota, Director of Quality and People (Chief Nurse)
2. Department, Faculty, Unit or Section	People Team
3. Contact name and email	Samantha Jover, EDI Lead, Samantha.jover1@nhs.net

STAGE ONE: PROPOSAL DETAILS	
4. Name of policy/proposal/project/decision, etc being assessed	Equality and Diversity Policy v3
5. Reason for EIA (check as appropriate) Please check the appropriate box as appropriate	<input type="checkbox"/> New policy, proposal, project, decision <input type="checkbox"/> Change to an existing policy, project, decision <input checked="" type="checkbox"/> Review of existing policy, project or service <input type="checkbox"/> Other (please state)
6. Date when the proposal is anticipated to come into effect	February 2024
7. Purpose of the policy/ proposal/ project/ decision/ other	
This is a review of the Equality and Diversity policy.	
8. Who does this impact?	
This impacts all staff and patients.	
9. Legislative, regulatory or other legal requirements?	
Equality Act, 2010 Human Rights Act, 1998	
10. Who will implement/deliver the policy/proposal/project/decision?	
Jon Ota has overall responsibility on the policy. The People Team support staff or managers with the implementation of the policy.	

STAGE TWO: EVIDENCE BASE & CONSULTATION

11. Evidence used and considered. Please identify any gaps in evidence which prevented a proper assessment

The EDI Group (EDIG) was used to consider the evidence and any gaps. There were no gaps in evidence found which prevented a proper assessment.

12. Consultation and engagement. Please detail any consultation or engagement exercises and summaries the main issues highlighted.

EDI was used as an EIA Panel to consult on the policy changes and ensure the views of people across a range of protected characteristics are heard.

13. Assess likely impact

Likely to have a positive impact.

STAGE THREE: ASSESSING AND ACTION PLANNING

14. What are the potential or actual impacts assessed against each protected characteristic?

- Where you think the strategy, project, policy, decision, etc could have a negative impact on any of the equality strands (protected characteristics), that is, it could disadvantage them or if there is no impact, please note the evidence for this.
- Where you think that the strategy, project, policy, decision, etc could have a positive impact on any of the groups or contribute to promoting equality, equal opportunities or improving relationships within equality characteristics.

Protected Characteristic	Positive Impact	Negative Impact	No Impact	Reason and evidence Provide details of specific groups affected positively and negatively. Where a negative impact has been identified what mitigating actions can we take? <i>Can any identified negative impact be objectively justified? If yes, please explain why.</i>
Age	✓			The policy promotes equality and opportunity for all staff and patients regardless of their age. The policy may have a positive impact on staff and patients of different ages who may face ageism or stereotypes in the workplace or in the community.
Disability	✓			The policy promotes equality and opportunity for all staff and patients regardless of their disability status. The policy may have a positive impact on staff and patients with any disability status who need support with reasonable adjustments at any time.
Gender reassignment	✓			The policy promotes equality and opportunity for all staff and patients regardless of their sex or gender. The policy may have a positive impact on staff and patients of different sexes or genders who may face sexism or stereotypes in the workplace or in the community.
Marriage and civil partnership	✓			The policy promotes equality and opportunity for all staff and patients regardless of their marital status or civil partnership status. The policy may have a positive impact on staff and patients of different marital status or civil partnership status who may face discrimination or disadvantage in the workplace or in the community.

Protected Characteristic	Positive Impact	Negative Impact	No Impact	Reason and evidence Provide details of specific groups affected positively and negatively. Where a negative impact has been identified what mitigating actions can we take? <i>Can any identified negative impact be objectively justified? If yes, please explain why.</i>
Pregnancy and maternity	✓			The policy promotes equality and opportunity for all staff and patients who are pregnant or on maternity leave. The policy may have a positive impact on staff and patients who are pregnant or on maternity leave who may face discrimination or disadvantage in the workplace or in the community.
Race	✓			The policy promotes equality and opportunity for all staff and patients regardless of their race, ethnicity, or national origin. The policy may have a positive impact on staff and patients from different racial or ethnic backgrounds who may face racism or prejudice in the workplace or in the community.
Sex	✓			The policy promotes equality and opportunity for all staff and patients regardless of their sex or gender. The policy may have a positive impact on staff and patients of different sexes or genders who may face sexism or stereotypes in the workplace or in the community.
Religion or belief	✓			The policy promotes equality and opportunity for all staff and patients regardless of their religion or belief. The policy may have a positive impact on staff and patients from different religions or beliefs who may face discrimination or intolerance in the workplace or in the community.
Sexual orientation	✓			The policy promotes equality and opportunity for all staff and patients regardless of their sexual orientation. The policy may have a positive impact on staff and patients who are lesbian, gay, bisexual, or any other sexual orientation who may face homophobia or prejudice in the workplace or in the community.
Other - carers	✓			The policy may have a positive impact on staff and patients who are carers or have caring responsibilities who may face challenges or disadvantages in the workplace or in the community.

16. What actions can be taken to mitigate any adverse impacts?

N/A

17. As a result of the EIA what decision or actions are being proposed in relation to the original proposals?

N/A

18. Monitoring arrangements

Monitor the impact of the policy through EDIG, Workforce Race Equality Standard (WRES), Workforce Disability Equality Standard (WDES), Equality Delivery System 22 (EDS22), Gender Pay Gap report, Equality Diversity and Inclusion (EDI) report, Staff Survey, Pulse Survey.

Whilst the responsibility for ratification of the policy sits with the Quality Committee (as the policy relates to patients as well as colleagues) some aspects of the monitoring arrangements relating to colleagues will be monitored by the People Committee.

19. Action planning Please details action that are required to mitigate negative impacts identified through the assessment. Please put N/A if not applicable				
Impact identified	Action required	Lead/person responsible	Target date	Progress
	N/A			

STAGE FOUR: OUTCOME

20. Please select one of the outcomes below for how the policy/proposal/decision will be progressed

No negative impacts identified at this time.

As a result of assessing the policy/proposal/project/decision, etc against the protected characteristics, no equality impact(s) have been identified.

Continue the proposal without adjustments for adverse impact.

One or more adverse equality impacts have been identified. However, the policy/proposal/project/decision, etc meets critical business need AND is an appropriate and proportionate means to achieve that aim.

Continue the proposal making adjustments where required.

One or more equality impacts have been identified. Mitigating actions to address this will be taken. See Action Plan.

Stop the proposal because adverse impacts cannot be prevented or objectively justified.

One or more adverse impacts have been identified which cannot be objectively justified and it is not possible to make adjustments to address the adverse impact it may be necessary to stop the proposal.

PROPOSAL COMPLETION AND RECOMMENDATIONS [EIA REVIEW GROUP USE ONLY]

EIA Panel comments and recommendations

Signed by Policy Author/ Proposal Owner

Signature:

Date:

Signed by ED&I group/EDI Lead (on behalf of EIA Panel)

Signature: sjover

Date: 17/01/2024

The EDI Group/EDI Lead/EIA Panel will either approve the EIA or discuss any required amendment necessary before signing it off for publication.

Once approved, the proposal owner is responsible for ensuring that all actions and review dates are met, and the EIA updated accordingly.

Every time the EIA is updated, you are required to submit it to the EDI Lead for approval at fchc.edi@nhs.net

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Further Information and Feedback

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