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## **Equality and Diversity Policy**

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<b>DOCUMENT DETAILS</b>	
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<b>Description:</b>	<p>This Policy is applicable to the Governing Body, every member of staff within the CCG and those who work on behalf of the CCG.</p> <p>This document has been assessed for equality on the protected groups, as set out in the Equality Act 2010 and demonstrates Bexley CCG's commitment to create a positive culture of respect for all individuals, including staff, patients, their families and carers as well as community partners.</p>
<b>Audience:</b>	Governing body, committee members and all staff working for, or on behalf of, the CCG, patients and public
<b>Review frequency</b>	Bi-annually
<b>Review date</b>	Jan 2021

<b>Approved Committee</b>	Quality and Safety Sub Committee (QSSC)	<b>Date:</b>	
<b>Version</b>	V.02		

#### Version control

<b>Date of issue</b>	<b>Version no.</b>	<b>Next review</b>	<b>Nature of change</b>	<b>Approval committee</b>
	V.01	Sept 2018	This policy supersedes all previous Complaints Policies	QSSC

#### Equality statement

Equality and diversity are at the heart of the NHS. Throughout the production of this document, due regard has been given to eliminate discrimination, harassment and victimisation, to advance equality of opportunity, and to foster good relations between people who share a relevant protected characteristic (as cited under the Equality Act 2010) and those who do not share it.

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## **1. POLICY STATEMENT**

NHS Bexley CCG takes its obligations under Equality Legislation very seriously and values equality and diversity in all aspects of its work, both as a commissioner of health services and as an employer.

As a commissioner we are committed to eliminating discrimination on the basis of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation. We aim to commission accessible services, delivered in a way that respects the needs of each individual and does not exclude anyone.

As an employer we aim to ensure that our workforce is diverse, non-discriminatory and appropriate to commission healthcare services. The equality and diversity values are incorporated into every day practice, policies and procedures so that promoting equality and diversity is a key characteristic of the whole organisation.

This policy will guide practical work aimed at continuing to implement the commitment to equality and will be reviewed and updated on a regular basis.

## **2. OBJECTIVES**

- Become an organisation that leads the promotion of equality and diversity, challenges discrimination and promotes equality in service delivery and employment.
- Encourage staff to develop their awareness and respond to the diverse needs of service users.
- Promote, through the provision of training and guidance, the impartial application of all employment policies and procedures and the responsibilities of the employer and employee for equality and diversity.
- Take action to deal with all inappropriate behaviour

## **3. LEGISLATION AND LEGAL RESPONSIBILITIES**

The Equality Act 2010 protects individuals from unfair treatment and promotes a fair and more equal society, the CCG as a public body has legal obligations, commonly known as the 'Public Sector Equality Duty' (PSED).

The general duty requires NHS organisations to have due regard to:

- Eliminate discrimination, harassment and victimisation and other conduct prohibited under the Act.
- Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

The revised Equality Delivery System (EDS2) tool kit is designed to help NHS organisations to deliver better outcomes to communities, patients and an improved working environment for staff. The CCG will use the EDS2 to evidence how we deliver better outcomes.

Where it applies, the CCG will be compliant with all NHS England requirements which relate to equality and diversity for example the Workforce Race Equality Standard (WRES), Accessible Information Standard (AIS).

#### 4. DEFINITIONS

**Diversity:** is based on a principle of recognising, responding to and valuing visible and nonvisible differences amongst individuals ensuring everyone can thrive and contribute.

**Equality:** is the state of being equal, having the same rights, opportunities and status. The CCG is committed to equality for our patients, communities and staff.

This Act also extends some of these protections to characteristics that previously were not covered by equality legislation.

There are different types of discrimination under the legislation. These are:

**Direct discrimination:** Where someone is treated less favourably than another person because of a protected characteristic.

**Associative discrimination:** This is direct discrimination against someone because they are associated with another person who possesses a protected characteristic.

**Discrimination by perception:** This is direct discrimination against someone because others think that they possess a particular protected characteristic. They do not necessarily have to possess the characteristic, just be perceived to.

**Indirect discrimination:** This can occur when there is a rule or policy that applies to everyone but disadvantages a person with a particular protected characteristic.

**Harassment:** This is behaviour that is deemed offensive by the recipient. Employees can now complain of the behaviour they find offensive even if it is not directed at them.

**Victimisation:** This occurs when someone is treated badly because they have made or supported a complaint or grievance under this legislation.

## **5. RESPONSIBILITIES**

### **The Managing Director**

The CCG's Managing Director has ultimate responsibility for monitoring the operation and implementation of the Equality and Diversity Policy and for ensuring that monitoring records are maintained.

### **The Chair, Governing Body and Directors**

The Chair of the CCG, the Governing Body and Directors will adopt appropriate strategies to support and value equality and diversity within the organisation.

### **Senior Management**

Team Managers are required to exercise leadership in this field by discouraging prejudice and by modelling appropriate behaviour. They must ensure that the policy is clearly communicated to their employees along with sources of available support. They must also take speedy and appropriate action to deal with any breaches of the policy, or behaviour that could lead to a breach of the policy. Any identified breaches of the Equality and Diversity Policy should be dealt with using the Grievances and Disputes Policy or the Dignity in the Workplace, Bullying and Harassment Policy. Managers are responsible for applying employment practices, policies and procedures fairly and consistently, and for highlighting and addressing any practices which could lead to discrimination.

### **Head of Patient Experience and Equality**

The CCG's Head of Patient Experience and Equality will be responsible for co-ordinating and supporting the work of the CCGs Equality Steering Group. The Head of Patient Experience and Equality will also provide support and expertise to CCG staff conducting equality impact assessments or considering equality implications when delivering a project.

### **Employees**

All employees are responsible for familiarising themselves with the Equality and Diversity Policy and for complying with it. Employees should inform their manager if they know or suspect that discrimination/harassment is occurring.

To support employees further the CCG enables all staff to access the 'Employee Support Programme' via the intranet or by telephone. This is a confidential service which aims to help staff general wellbeing by providing access to information, advice and support around the clock.

## **6. EQUALITY STEERING GROUP - EPEC**

The Equality Steering Group has the responsibility for making proposals for, and overseeing the implementation of the policy and the work the CCG has committed to undertaking in order to meet its statutory duties in respect of the Equality Act 2010 and the Health and Social Care Act 2012.

The working group comprises of CCG staff, external stakeholders and is chaired by the CCG PPI Lay Member. The group is accountable to the CCG's Quality Safety Sub-Committee (see Appendix C).

## **7. MONITORING & REVIEW**

To ensure the organisation is compliant with statutory duties this policy will be approved by Integrated Governance Committee giving due consideration to legislative changes, and ratified by the Governing Body. The policy will be monitored periodically by the CCG's Equality and Diversity Working Group to determine its effectiveness.

The HR service will maintain records of gender, ethnic origin, age and disability for all employees and for internal and external job applicants. This information will be collected and stored in line with the Data Protection Act 1998 and will only be used to monitor compliance to the Equality and Diversity Policy. The information will be analysed regularly.

Equality impact assessments will be undertaken in the development of every new strategy and policy and before commissioning new service initiatives.

## **8. EQUALITY IMPACT ASSESSMENTS – EIA's**

Equality Impact Assessment (EIA) is a tool used to assess how development policies or commissioning of services may impact on individuals, communities or equality groups. It involves using equality information and results from engagement with protected groups to understand the effect or potential effect to functions, policies and decisions (see Appendix A).

The CCG will imbed Equality Impact Assessments in all of its policies and board papers and will aim to publish evidence of any of the analysis that is undertaken. Responsible managers or leads will be accountable for completing assessments and should be able to evidence any impact for protected groups. The Equality Steering Group will monitor the implementation of this procedure.

## **9. PROCEDURE FOR DEALING WITH COMPLAINTS OF DISCRIMINATION**

Any patient or member of the public who feels that they have been discriminated against on any grounds set out in this policy should use the CCG Complaints Policy & Procedure to make their complaint. This should be investigated by managers in the usual way, referring to the Equality Steering Group for advice as appropriate.

Any employee who feels that they have been discriminated against on any grounds set out in this policy should initially raise their concerns with their line manager. Where an employee's concerns relate to their line manager, the employee should raise their concern with the next more senior officer. Alternatively, employees may wish to discuss their concern with a member of the Human Resources Department.

Where resolution cannot be achieved through informal discussion, an employee may put forward a grievance in line with the guidelines set down in the CCG's Grievance Procedure. Alternatively the CCG's Dignity in the Workplace, Bullying and Harassment Policy may be followed. At all stages of the procedure, employees can be accompanied by a Trade Union representative or work colleague

## Appendix A

### Bexley CCG Equality Impact Assessment Guidance

Equality impact assessment (EIA) is an integral part of the CCGs processes. It involves looking at what steps could be taken to advance equality, eliminate discrimination and promote good relations.

We need to ensure that we give full consideration to the impact our decisions have on protected groups to avoid both risks in terms of litigation and reputation. We also need to ensure that those we commission deliver on equality improvements.

As a public authority we are subject to the Public Sector Equality Duties. Using EIA is one way of demonstrating that we are compliant with the Equality Act 2010. Bexley CCG uses an EIA screening process to ensure policies, business cases, strategies and decisions embed equality and are inclusive to all. At the end of this screening an assessment is made whether to continue with a 'full' EIA where negative or adverse impact is found.

#### **Completing the EIA Form**

##### **Sections 1 and 2 - SCREENING**

#### **Policy/ Project outline: The EIA will require the following information:**

- What is the purpose of the policy/project
- In what context will it operate
- Who is it intended to benefit
- What results are intended
- Why is it needed
- Are there any implications for partners, or national or regional policy

#### **Identifying Impact: Consider relevant information:**

##### **Consultation, engagement or experience**

This could be any evidence of existing consultation or engagement from meetings, focus groups, satisfaction or patient experience surveys, staff surveys or others. It could be work done previously or undertaken for the purposes of the analysis. You may have to extrapolate from local, regional or national data. It is suggested that you outline the main points and include.

##### **Evidence, data or research available**

It is advisable to detail or at least make reference to relevant data such as monitoring, take up rates, census statistics, regional or national data or research. You can utilise evidence obtained from PALS, complaints or recommendations from inspections or audits, or any good practice in the area which could be drawn on.

Detail the data that is known about the area, what data we have from providers, what gaps there are in the data we ask to be recorded, what levels of use there are and if there are any gaps in the representation of our local communities.

It will also be useful to access data and information about our communities, public and staff to determine if there are any gaps in representation, or differentials in access and outcomes that may relate to equality.

National and regional data can be used to predict expected patterns/outcomes where data is not available locally. Comparisons should be made with expected use and against known community data, such as the census or local profiles.

**Information collection and monitoring**

Data can be routinely collected on age, gender, disability and ethnicity; however there may be more difficulty with sensitive data monitoring of sexual orientation, religion and belief or gender reassignment. Different approaches may be used for this monitoring such as anonymous survey work to gather views or snapshots of users. The integration of such monitoring is implicit in the Equality Act 2010.

Types of information you may wish to consider include;

- JSNA - Results of recent consultations and surveys
- Demographic data - Information from local groups and partner agencies
- Census findings - Information analysis of audit reports and reviews
- Recent research finding - Health Needs Assessment
- Studies of deprivation

**Analysis of Information**

Now the data has been gathered together in one place it now needs to be considered for its likely impact, positive, neutral or negative, on people’s experiences, outcomes or opportunities.

<b>EXAMPLES</b>
If your EIA is for a staff engagement policy then you might want to look at the results of the last local staff survey or feedback from any focus groups and also the national NHS staff survey to help identify any possible issues for different groups defined by protected characteristics (e.g. are women showing more dissatisfaction compared to men; are Black and ethnic minority staff feeling left behind for promotions?).
If your EIA is about changing a service then you might want to look at the demographic profile of current service users see if any protected characteristic groups are disproportionately affected or are over- or under-represented in service usage data. If some groups are not receiving the service as might be expected by the demographics what is the explanation for this? What might be done to address it in future contracts for services?
If your EIA is for Mental Health services then you might want to look at both local and national research done on the service concerned and health inequalities. Such information should inform future commissioning/ decisions for such services and providers might be invited to say how they will address such inequalities in the future.

**Action plan:**

Give an outline of the key actions based on any gaps, challenges and opportunities you have identified. Include here any action to address specific equality issues and data gaps that need to be addressed through consultation or further research.

Consider, have you challenged yourself sufficiently? How will gaps be addressed? Ensure the actions are specific, measureable, achievable, realistic and have a timescale. To be able to measure progress in equality, you should consider the outcomes rather than the input, so the measure of success/impact should be likely outcomes.

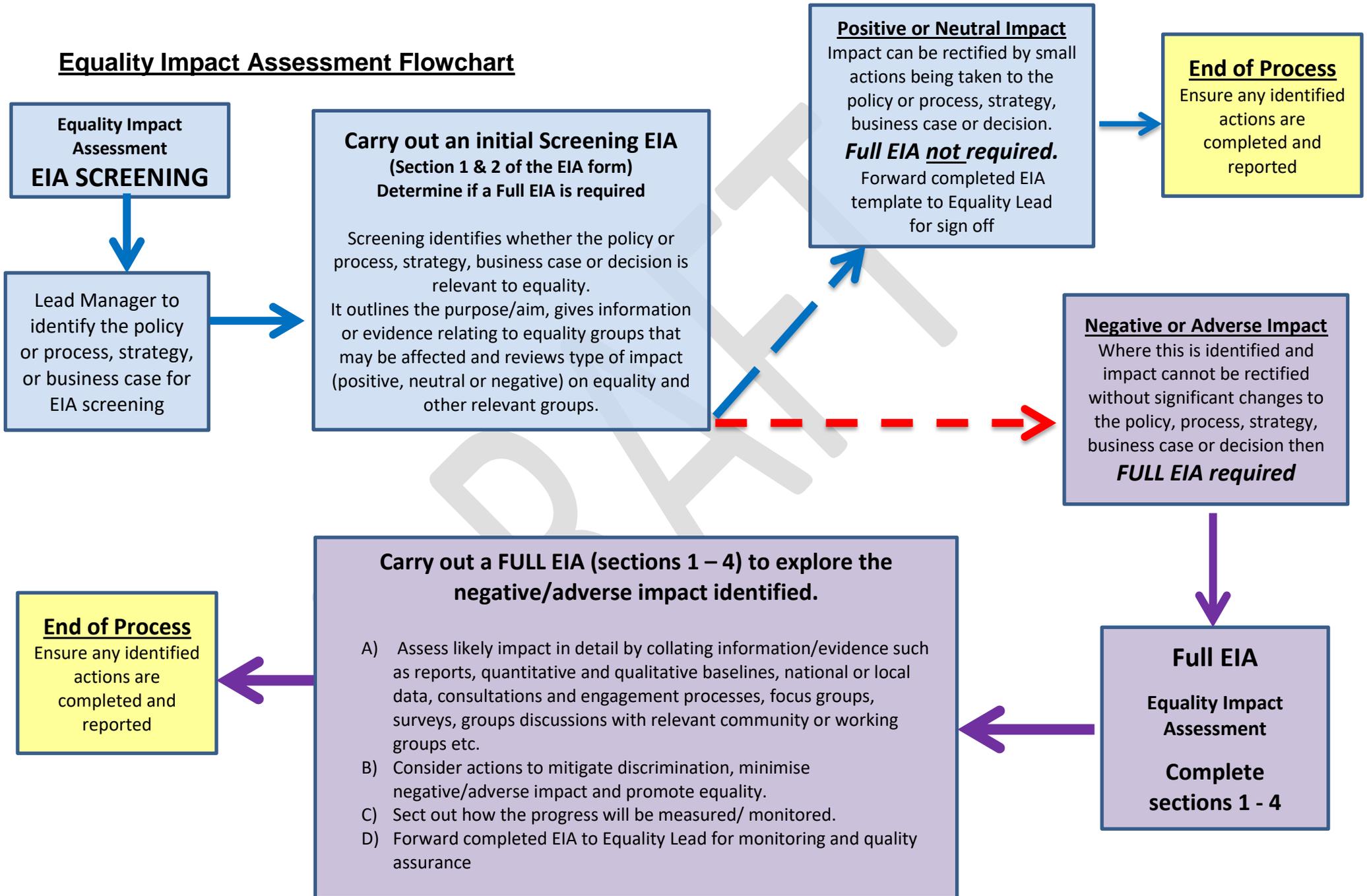
**Monitoring, review and publication:**

Detail how and who will monitor this action plan and review this equality impact assessment.

**Sign off:**

The completed equality impact assessment must be forwarded to the equality and diversity lead, for review once signed by the lead officer. The assessment will be sent to the Equality and Diversity Working Group for final review before it is available for publication on the CCG website.

## Equality Impact Assessment Flowchart



## Appendix B

### BEXLEY CCG Equality Impact Assessment

<b>Title of policy or project:</b>	
<b>Name and role of officer/s completing the assessment:</b>	
<b>Date of assessment:</b>	
<b>Type of EIA undertaken:</b>	<ul style="list-style-type: none"> <li>• Screening EIA (Section 1&amp;2 only)</li> <li>• Full EIA</li> </ul> <p><i>(delete as applicable)</i></p>

**PLEASE REFER TO THE EIA GUIDANCE AND EIA FLOWCHART TO HELP IN COMPLETING THE FOLLOWING SECTIONS**

#### SCREENING (Sections 1&2 only)

1. Outline	
<p><b>Give a brief summary of your policy or project:</b></p> <ul style="list-style-type: none"> <li>• What is the purpose of the policy/project</li> <li>• In what context will it operate</li> <li>• Who is it intended to benefit</li> <li>• What results are intended</li> <li>• Why is it needed</li> <li>• Are there any implications for partners or national or regional policy</li> </ul>	

## Identifying impact:

A. Positive impact	Will actively promote or improve equality of opportunity
B. Neutral impact	Where there are no notable consequences for any group
C. Negative impact	Negative or adverse impact causes disadvantage or exclusion. If such an impact is identified, the EIA should ensure, that as far as possible it is justified, minimised or counter balanced by other measures.  <a href="#">This may result in a full EIA process</a>

2. What impact have you identified for all of the protected groups?					
	Positive impact A	Neutral impact B	Negative impact C	What evidence base was used to determine impact?	Link to Equality objectives?
Age					
Disability					
Gender reassignment					
Marriage & civil partnership					
Pregnancy and maternity					
Race					
Religion or belief					
Sex					
Sexual orientation					

<b>Important note:</b> If any of the above results in ' <i>negative</i> ' impact a full EIA (section 3 & 4) <b>must</b> be undertaken.			
Policy/Project Lead Signature:		Date	
Equality & Diversity Lead Signature:		Date	

**FULL (All 4 sections to be completed)**

3. Action plan					
Protected group	Issues/impact identified	Actions/mitigations required	How will you measure impact/progress	Timescale	Officer responsible

Continue on a separate sheet if necessary, please note that you must provide information requested in each column

4. Monitoring, review and publication			
Date the project/policy will be reviewed		Lead/ Reviewing Officer	

Once completed, this form **must** be emailed to the Equality Lead at [bexccg.contactus@nhs.net](mailto:bexccg.contactus@nhs.net) for sign off by the Equality Steering Group.

Signed on behalf of ESG/EPEC	Name:
	Signature:
	Date:

## Appendix C

### EQUALITY STEERING GROUP - TERMS OF REFERENCE

#### 1. Constitution/Authority

The Equality and Diversity Working Group will report to the Bexley CCG Quality, Safety Sub Committee.

#### 2. Purpose

The group will work in partnership with other organisations to provide advice and support on the CCG's implementation of the Equality Duties as outlined by the Equality Act 2010.

The group will develop and monitor the CCG's equality objectives with engagement from partners and the public.

The group will support and monitor the implementation of the Equality Delivery System (EDS2) to ensure that within the CCG's commissioning and employment responsibilities, the CCG is assessing and improving its equalities performance.

The group will be responsible for using the JSNA and other health needs assessment to develop an evidence-based approach to assist the CCG to reduce inequality.

The group will take account of new or emerging national policies/strategies linked to community safety.

#### 3. Objectives

Ensure that the CCG's Equality and Diversity Policy is developed and implemented as required.

Develop a plan to improve the CCG's performance against the NHS Equality Delivery System (EDS2).

Review progress against EDS2 establishing whether the CCG is meeting its legislative duties under the Equality Act 2010 and taking remedial action where progress is not meeting standards.

Ensure that the CCG meets and monitors all its statutory requirements, both nationally and locally, relating to equality and diversity both in commissioning and employment.

Ensure there is a robust system to support the CCG in commissioning health services which are non-discriminatory.

Involve staff, external stakeholders and public to maximise input and reflect a broad range of views from an equality and diversity perspective to inform commissioning decisions.

Review completion of mandatory equality and diversity training for all staff and members of the CCG.

Identify further training and development needs on equality and diversity for employees and ensure programmes are put in place.

Promote and publish Bexley CCG's equality and diversity successes and ensure all staff is aware of the achievements.

Provide quarterly briefings and/or six monthly update reports for the Quality and Safety Sub Committee.

#### **4. Membership**

- PPI Lay Member (Chair)
- Head of Patient Experience & Equality
- Vulnerable Adults/Children Safeguarding Lead
- Head of Communications & OD
- Human Resources Business Partner - CSU
- Public Health Representative – LBB
- Healthwatch Bexley Representative
- BVSC Representative
- PPV & Equality representatives (4)

#### **Attendees (as required)**

- Commissioning Lead
- Integrated Commissioning Lead
- Primary Care Lead

Membership will be reviewed regularly by the group to enable it to discharge its duty .

#### **5. Quorum**

Chair with five members.

In the absence of the Chair, the meeting will proceed with any five members, providing at least one of the members is CCG staff, who will take the role of chair.

Any decisions put to a vote at the meeting shall be determined by majority of the votes of the members present. In the case of an equal vote the Chair at the meeting shall have a second and casting vote.

#### **7. Frequency of Meetings**

Meetings will be held bi-monthly and future changes will be discussed and noted.

#### **8. Accountability**

The management of the group will be overseen by the Head of Patient Experience & Equality.

Minutes of the meeting will be presented to the Quality and Safety Subcommittee.

The Equality Steering Group will provide a report to the Quality and Safety Subcommittee on a six monthly basis on its work in meeting requirements of the Equality Act 2010 and the NHS Equality Delivery System (EDS2).

#### **9. Review**

The Equality Steering Group will review these terms of reference annually and in accordance with service requirements/changes as required.

**Signature:** \_\_\_\_\_

**Chair of the Equality Steering Group**

**Date:** \_\_\_\_\_