

**EQUALITY AND DIVERSITY POLICY**

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| Last Review Date | August 2019 |
| Policy Number | HR007/08/2022 |
| Name of responsible committee | Governance Sub Committee |
| Date of Approval | 15 November 2019 |
| Next Review Date | August 2022 |
| Review Responsibility | Human Resources  |
| Version | 0.2 |

**To ensure you have the most current version of this policy please access via the NHS Sheffield CCG Intranet Site by following the link below:**

[**http://www.intranet.sheffieldccg.nhs.uk/policies-procedure-forms-templates.htm**](http://www.intranet.sheffieldccg.nhs.uk/policies-procedure-forms-templates.htm)



**POLICY AUDIT TOOL**

To be completed and attached to any document which guides practice when submitted to the appropriate committee for consideration and approval.

**Please give status of Policy: Revised**

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| **1.** | **Details of Policy** |  |
| 1.1 | Title of Policy: | Equality and Diversity Policy |
| 1.2 | Sponsor:  | Accountable Officer |
| 1.3 | Author: | HR Manager |
| 1.4 | Lead Committee: | Governance Sub Committee |
| 1.5 | Reason for policy: | Legislative and best employment practice |
| 1.5 | Who does the policy affect? | All employees  |
| 1.6 | Are the National Guidelines/Codes of Practices etc issued? | Equality Act 2010ACAS Codes of Practice |
| 1.7 | Has an Equality Impact Assessment been carried out? | Yes |
| **2.** | **Information Collation** |  |
| 2.1 | Where was Policy information obtained from? | See 1.6 |
| **3.** | **Policy Management** |  |
| 3.1 | Is there a requirement for a new or revised management structure for the implementation of the Policy? | No |
| 3.2 | If YES attach a copy to this form. | n/a |
| 3.3 | If NO explain why. | Current management structure satisfactory |
| **4.** | **Consultation Process** |  |
| 4.1 | Was there external/internal consultation? | Yes |
| 4.2 | List groups/persons involved | Joint Staff Consultative Forum |
| 4.3 | Have external/internal comments been included? | Yes  |
| 4.4 | If external/internal comments have not been included, state why. | n/a |
| **5.** | **Implementation** |  |
| 5.1 | How and to whom will the policy be distributed? | All employees via the intranet  |
| 5.2 | If there are implementation requirements such as training please detail. | Ongoing via mandatory training |
| 5.3 | What is the cost of implementation and how will this be funded | No funding required |
| **6.** | **Monitoring** |  |
| 6.2 | How will this be monitored | Workforce Reports |
| 6.3 | Frequency of Monitoring | Quarterly |

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**DEFINITIONS**

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| **Term** | **Definition** |
| Direct Discrimination | Less favourable treatment on the grounds of gender, race, colour, ethnic or national origin, sexual orientation, marital status, religion or belief, age, trade union membership, disability or transgender status. |
| Indirect Discrimination | Application of an unjustifiable condition or requirement which has a discriminatory effect, as the number of people who can comply with the condition or requirement is smaller among a particular group. |
| Harassment | Where there is unwanted conduct, related to one of the protected characteristics (other than marriage and civil partnership, and pregnancy and maternity) that has the purpose or effect of violating a person’s dignity; or creating an intimidating, hostile, degrading, humiliating or offensive environment. It does not matter whether or not this effect was intended by the person responsible for the conduct. |
| Associative Discrimination | Direct discrimination or harassment of an individual for their association with another individual who has a protected characteristic. |
| Perceptive Discrimination | Direct discrimination or harassment of an individual based on a perception that he/she has a particular protected characteristic when he/she does not.This  |
| Third Party Harassment | Harassment of an individual related to a protected characteristic by a third party such as a client or customer. |
| Reasonable Adjustments | Unlawful discrimination occurs where an employer does not comply with their duty to make reasonable adjustments. Reasonable adjustments include physical working conditions, contractual and non-contractual terms and policies, such as those relating to recruitment, discipline or sickness absence. |
| Victimisation | Subjecting an individual to detriment, such as being denied a training opportunity or a promotion due to making or supporting a complaint/raising a grievance, or being suspected of either. |

**SECTION A – POLICY**

1. **Policy Statement, Aims and Objectives**
	1. NHS Sheffield Clinical Commissioning Group (CCG) is committed to equality of opportunity for all employees and potential employees. It views diversity positively, and in recognising that everyone is different, the unique contribution that each individual’s experience, knowledge and skills can make, is valued equally.
	2. The promotion of equality and diversity will be actively pursued through policies and procedures which will ensure that employees and potential employees are not subject to direct or indirect discrimination.
	3. The development of this policy:
* Ensures no employee or potential employee receives less favourable treatment on the grounds of gender, race, colour, ethnic or national origin, sexual orientation, marital status, religion or belief, age, disability or transgender status.
* Is supported by robust mechanisms for ensuring all staff receive training on equality and diversity and that appointing officers receive additional training in recruitment and selection procedures.
* Is supported by other employment policies such as the Recruitment and Selection, Grievance, Dignity at Work (Prevention of Bullying and Harassment), Disciplinary and Freedom to Speak Up (Whistleblowing) policies;
* Satisfies legislative requirements.

**2. Legislation and Guidance**

2.1. The following legislation and guidance has been taken into consideration in the development of this policy.

* Equality Act 2010
* ACAS Codes of Practice
* Human Rights Act 1998
* Employment Rights Act 1996

**3. Scope**

3.1 This policy applies to those members of staff that are directly employed by NHS Sheffield Clinical Commissioning Group (CCG) and for whom NHS Sheffield CCG has legal responsibility.  For those staff covered by a letter of authority / honorary contract or work experience this policy is also applicable whilst undertaking duties on behalf of NHS Sheffield CCG or working on NHS Sheffield CCG premises and forms part of their arrangements with NHS Sheffield CCG.  As part of good employment practice, agency workers are also required to abide by NHS Sheffield CCG policies and procedures, as appropriate, to ensure their health, safety and welfare whilst undertaking work for NHS Sheffield CCG.

**4. Accountabilities and Responsibilities**

4.1 Overall accountability for ensuring that there are systems and processes to effectively ensure compliance with this Policy lies with the Accountable Officer. Responsibility is delegated to the following:

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| ***Accountable Officer*** | Has responsibility for:* Maintaining an overview of the corporate ratification and governance process associated with the policy.
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| ***Human Resources***  | Has delegated responsibility for:* Leading the development, implementation, monitoring and review of the policy.
* Monitoring and reporting compliance with mandatory and statutory training.
* Ensuring equality opportunity data is available in relation to recruitment and selection.
* Supporting managers in the case of a breach or potential breach of the policy.
* Providing reports detailing workforce profiling information to the Integrated Governance Committee including action plans to target any areas for development.
* Completing and publishing the Workforce Race Equality Standard (WRES) report and action plan
* Completing and publishing the Workforce Disability Equality Standard (WDES) report and action plan
* Ensuring that statutory requirements for Gender Pay Gap reporting are met
 |
| ***Appointing Officers/ Line Managers*** | Have delegated responsibility for:* Exercising leadership by discouraging prejudice and by modelling appropriate behaviour.
* Clearly communicating the policy to all staff within own area of responsibility
* Dealing with any breaches of the policy or actions that could potentially breach the policy with the support of Human Resources.
* Applying employment policies, procedures and practices fairly and consistently and highlighting and addressing any practices which could lead to discrimination.
 |
| ***All Employees*** | Have delegated responsibility for:* Ensuring they are familiar with the policy and procedure and are fully compliant with it.
* Accessing and undertaking relevant mandatory and statutory training, ensuring compliance with requirements.
* Ensuring they report any discrimination/harassment that they witness or suspect is occurring.
 |
| ***Staff Side*** | Have responsibility for:* Being aware of the policy;
* Providing advice/ representation to employees who are members of a recognised Trade Union.
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1. **Dissemination, Training and Review**

**5.1. Dissemination**

The effective implementation of this policy will support openness and transparency. NHS Sheffield CCG will:

* Ensure all employees and stakeholders have access to a copy of this procedural document via the organisation’s website and intranet.
* Ensure employees are notified by email of new or updated policies.

**5.2. Training**

All employees will be offered relevant training as part of mandatory and statutory learning. Staff requiring additional support should speak to their line manager in the first instance. Support may also be obtained through Human Resources.

**5.3. Review**

5.3.1. As part of its development, this policy and its impact on staff, patients and the public has been reviewed in line with NHS Sheffield CCG’s Equality Duties. The purpose of the assessment is to identify and if possible remove any disproportionate adverse impact on employees, patients and the public on the grounds of the protected characteristics under the Equality Act 2010.

5.3.2. The policy will be reviewed every three years, and in accordance with the following on an as and when required basis:

* Legislatives changes
* Good practice guidelines
* Case law
* Significant incidents reported
* New vulnerabilities identified
* Changes to organisational infrastructure
* Changes in practice

5.3.3. Policy management will be performance monitored to ensure that procedural documents are in-date and relevant to the core business of the organisation. The results will be published in the regular Governance Sub Committee Reports.

**SECTION B – PROCEDURE**

1. **Equal Opportunities in Employment**
	1. NHS Sheffield CCG will avoid unlawful discrimination in all aspects of employment including recruitment, promotion, opportunities for training, pay and benefits, discipline and selection for redundancy.
	2. Person and job specifications will be limited to describe only the knowledge, skills and experience that are necessary for the effective performance of the job. Candidates for employment or promotion will be assessed objectively against the requirements for the job. Recruiting managers must give reasonable consideration to any requests for adjustments that may be required for candidates with a disability. Further information is contained within the Recruitment and Selection Policy.
	3. Consideration will be given to any possible discriminatory effect of standard working practices, including the number of hours to be worked, the times at which these are to be worked and the place at which the work is to be done, when considering requests for variations to these standard working practices. Further information is contained within the Flexible Working Policy.
2. **How to report a concern in relation to direct/ indirect discrimination**
	1. If an employee/potential employee considers they have been unlawfully discriminated against they should discuss this with their line manager/the recruiting manager in the first instance. Where an employee’s concern relates to their line manager, the employee should raise their concern with another appropriate or more senior manager. Alternatively, employees may wish to discuss their concerns with a member of the Human Resources team or their Trade Union Representative. Where a concern has not been satisfactorily addressed the employee may invoke the Grievance Policy to make a complaint. If the complaint involves bullying or harassment, reference should also be made to the Dignity at Work (Prevention of Bullying and Harassment) Policy. Candidates in recruitment processes can raise concerns with the HR Team.
	2. Complaints received will be taken seriously and the procedure undertaken will seek to resolve any grievance it upholds. There will be no penalty or judgements made if an employee makes a complaint, even if it is not upheld, unless the complaint is untrue, vexatious or made maliciously.

**NHS Sheffield CCG Equality Impact Assessment**

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| **Title of policy or service**  | Equality and Diversity Policy |
| **Name and role of officers completing the assessment** | HR Manager |
| **Date assessment started/completed** | December 2016 – updated August 2019 |

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| 1. **Outline**
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| **Give a brief summary of your policy or service*** Aims
* Objectives
* Links to other policies, including partners, national or regional
 | NHS Sheffield Clinical Commissioning Group (CCG) is committed to equality of opportunity for all employees and potential employees. It views diversity positively, and in recognising that everyone is different, the unique contribution that each individual’s experience, knowledge and skills can make, is valued equally. The promotion of equality and diversity will be actively pursued through policies and procedures which will ensure that employees and potential employees are not subject to direct or indirect discrimination. Supported by other employment policies such as Safer Recruitment and Selection, Grievance, Dignity at Work, Disciplinary and Whistleblowing. |

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| **2. Gathering of Information** This is the core of the analysis; what information do you have that indicates the policy or service might *impact on protected groups, with consideration of the General Equality Duty*.  |
|  | **What key impact have you identified?** | **What action do you need to take to address these issues?** | **What difference will this make?** |
| **Positive****Impact**  | **Neutral****impact** | **Negative****impact** |
| **Human rights** |  |  |  |  |  |
| **Age** |  |  |  |  |  |
| **Carers** |  |  |  |  |  |
| **Disability** |  |  |  |  |  |
| **Sex** |  |  |  |  |  |
| **Race** |  |  |  |  |  |
| **Religion or belief** |  |  |  |  |  |
| **Sexual orientation** |  |  |  |  |  |
| **Gender reassignment** |  |  |  |  |  |
| **Pregnancy and maternity** |  |  |  |  |  |
| **Marriage and civil partnership** (only eliminating discrimination) |  |  |  |  |  |
| **Other relevant group** |  |  |  |  |  |

Please provide details on the actions you need to take below.

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| **3. Action plan** |
| **Issues identified** | **Actions required** | **How will you measure impact/progress** | **Timescale** | **Officer responsible** |
| None |  |  |  |  |
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| **4. Monitoring, Review and Publication** |
| **When will the proposal be reviewed and by whom?** | **Every three years on policy review** |
| **Lead Officer**  | **HR Manager** | **Review date:** |  |