# Equality, Inclusion and Human Rights Policy

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## Definitions

Divorcity	Diversity in the recognition and valuing of differences in its breadest areas		
Diversity	Diversity is the recognition and valuing of difference in its broadest sense.		
	It is about creating working culture and practices that recognise, respect,		
	value and harness difference for the benefit of the organisation, its		
	workforce and the individual, including patients		
Due Regard	Having due regard for advancing equality involves:		
	Removing or minimising disadvantages suffered by people due to		
	their protected characteristics.		
	<ul> <li>Taking steps to meet the needs of people from protected groups</li> </ul>		
	where these are different from the needs of other people.		
	Encouraging people from protected groups to participate in public life or in		
	other activities where their participation is disproportionately low.		
Equality	Equality is not about treating everyone the same it 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 particular protected characteristics.		
Equality Impact	An equality impact assessment (EIA) is the process of applying a designed		
Assessment (EIA)	set of questions in order to ensure that a policy, product or service does		
	not discriminate against patients and service users with protected		
	characteristics.		
Health	A health inequality is when patients or groups experience worse health		
Inequalities	outcomes than the majority of patients. The reasons for such inequalities		
inequaines			
	can be varied. CCGs have a legal duty to understand and work to reduce		
Human Bighta	such inequalities.		
Human Rights	'Human rights' are the basic rights and freedoms that belong to every		
	person in the world. They are the fundamental for human beings to flourish		
	and participate fully in society.		
	Human rights belong to everyone, regardless of their circumstances. They		
	cannot be given away or taken away from you by anybody – although		
	some rights can be limited or restricted in certain circumstances. For		
	example, your right to liberty (Article 5, European Convention on Human		
	Rights) can be restricted if you are convicted of a crime.		
Inclusion	The policy or practice of providing equal access to opportunities and		
	resources for people who might otherwise be excluded or marginalized,		
	such as those who have physical or mental disabilities and members of		
	other minority groups.		
Protected	This policy is intended to protect employees and service users from unfair		
Characteristics	treatment, regardless of their background. Our definition of 'protected		
	characteristics' is based on those set out in the Equality Act 2010. The		
	nine protected characteristics are age, disability, gender reassignment,		
	marriage and civil partnership, pregnancy and maternity, race, religion or		
	belief, sex, sexual orientation.		
Public Sector	A public authority (including NHS organisations) must, in the exercise of		
Equality Duty	their functions, have due regard to the need to :		
	Eliminate discrimination, harassment and victimisation or any other		
	conduct prohibited by the Equality Act 2010 in relation to the		
	protected characteristics		
	<ul> <li>Advance equality of opportunity between all persons; and</li> </ul>		
	<ul> <li>Foster good relations between groups of people sharing a</li> </ul>		
	protected characteristic and those that do not.		

## **SECTION 1 – BACKGROUND AND CONTEXT**

#### 1.1 Introduction

This document is the policy of NHS Lincolnshire Clinical Commissioning Group (LCCG) for ensuring compliance with all of our statutory obligations around equality inclusion and human rights (in particular the Equality Act 2010) in respect of our duties as employers and as commissioners of NHS services. The policy also works in line with our responsibilities under the Human Rights Act 1998 and the Health and Social Care Act 2012 to address health inequalities.

This policy replaces all previous equality, inclusion and human rights policies managed by the CCG and supports the CCG's equality, inclusion and human rights Strategy 2020 – 23.

#### 1.2 Purpose

This policy provides a framework for the CCG to ensure compliance with the Equality Act 2010 and associated guidance from the Equalities and Human Rights Commission and the Government Equalities Office.

This document sets out the CCG's policy on promoting equality, inclusion and human rights in relation to employment, service delivery, goods and supply of service including contractors and partner agencies. Its aim is to ensure that no individual or group receives less favourable treatment either directly or indirectly and that reasonable adjustments are made effectively and proactively.

#### 1.3 Scope

This policy applies to all those working for the CCG including contractors and to all service users, carers and visitors to the CCG. This policy also applies to all activities and functions undertaken by, or on behalf of, the CCG.

#### 1.4 Legal Context

All NHS organisations have a statutory duty to comply with equality legislation including:-

- The Equality Act 2010, Section 149 (the Public Sector Equality Duty), and the (Specific Duties) Regulations 2011. See appendix 1a.
- Human Rights Act 1998
- Health and Social Care Act 2012

LCCG must ensure that commissioning, service provision and workplaces provide equality of opportunity and fair treatment for all. Appendix 1a provides more detailed information on the above pieces of legislation and LCCG responsibilities.

#### 1.5 LCCG Equality objectives and action plan

In 2020 the new single CCG for Lincolnshire produced its equality objectives for 2020 – 23, and an accompanying action plan for the same period. This information was published on LCCG's website along with related reports to show work progress. The objectives and action plan are designed to meet the requirements of the Equality

Act 2010 Public Sector Duty (section 149 of the Act) and Specific Duties 2011, as well as uphold the values of the Human Rights Act 1998, the NHS Constitution and the duties placed on CCGs by Section 14 of the Health and Social Care Act 2012. The objectives are also produced as a result of the outcomes of the EDS2 assessments for period 2018 - 20 that were conducted of the former four CCG's and was an essential part of the transition process of the four CCGs into one new single Lincolnshire CCG.

## SECTION 2 – LCCG POLICY COMMITMENT

#### 2.1 LCCG Equality Policy Statement

NHS Lincolnshire CCG has developed this policy to meet the diverse needs of our workforce, service users and local population. Through its implementation the CCG will ensure that no one is placed at a disadvantage over others. It considers current UK legislative requirements, including the Equality Act 2010, Human Rights Act 1998, Health and Social Care Act 2012 and promotes equal opportunities for all. This document has been designed to ensure that no-one receives less favourable treatment due to their personal circumstances i.e. the protected characteristics of their age, disability, sex (gender), gender reassignment, sexual orientation, marriage and civil partnership, race, religion or belief, pregnancy and maternity. Appropriate consideration has also been given to gender identity, socio-economic status, immigration status and the principles of the Human Rights Act. In carrying out its functions, NHS Lincolnshire CCG is committed to having due regard to the Public Sector Equality Duty. This applies to all the activities for which the CCG is responsible, whether internal or on behalf of customers, including policy development, implementation, review and evaluation.

#### 2.2 Employment

It is important that our workforce is treated with the respect and dignity and that our recruitment practices are fair and inclusive to all. To ensure equality is embedded into the workplace and employment practices we will: -

- not discriminate on the basis of age, disability, gender reassignment, marital status or civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation in the allocation of employees employed in any post;
- consider all employees solely on their merits for career development and promotion and work to ensure equality of opportunity for all;
- develop employees in order that they understand the context of and the specific issues influencing equality, diversity, inclusion and human rights;
- expect all employees of LCCG to treat patients, carers and colleagues with dignity and respect;
- support and adhere to family-friendly and flexible working policies;
- ensure that our recruitment and selection procedures are up to date and refer to how the CCG will implement equal and inclusive practices – please refer to LCCG separate recruitment and selection policy. The CCG is fundamentally committed to the principle of making reasonable adjustments for applicants.

#### 2.3 Service delivery

It is important that services and facilities are accessible, adequate and appropriate to the needs of all users. To ensure Equality in service delivery the CCG will: -

- consult with different community groups and voluntary organisations to determine the needs of different local service users;
- ensure that buildings, facilities and services are accessible to people with a range of disabilities;
- reflect on positive images in LCCG publications of the diverse range of people living in the local community we serve;
- ensure that all contractors, service providers, and other workers not directly employed by the CCG, are aware of, and comply with, the CCGs Equal Policy;
- deal with complaints promptly and fairly through the CCGs complaints procedure and respond to the needs of people from different protected characteristics accordingly;
- continue to monitor patient data and service use to ensure that no unlawful discrimination is taking place in terms of service delivery;
- use the Equality Delivery System and Workforce Race Equality Standard, Workforce Disability Equality Standard and any future standards to formulate equality targets and initiatives to improve service delivery;
- create services which recognise diversity and meet different needs and within the available resources e.g. interpretation and translation, providing accessible information and visual aids etc.;
- ensure that all employees are committed as individuals to promote equal opportunities internally and externally;
- To proactively respond to the principles of the NHS People Plan and apply this in our work.

#### 2.4 Commissioning and Contracting

The CCG is committed to creating an environment in which all people have equal, dignified and ease of access to our services and facilities through the full range of our activities, employment and services that we commission from our providers. We will: -

- ensure that the purchase of goods, services and facilities is undertaken in line with our equality, inclusion and human rights commitments;
- use providers and suppliers who share our values on equality of opportunity, inclusion and human rights;
- establish procedures to ensure that businesses from diverse communities have a fair and equal chance of competing for collaborative procurement contracts to supply goods and services to the CCG.

## SECTION 3 – ROLES AND RESPONSIBILITIES WITHIN THE ORGANISATION

#### 3.1 The Governing Body

The CCGs Governing Body has overall corporate responsibility for ensuring that the CCG complies with their legal and ethical obligations with regard to EIHR in their

dealings with staff, service users, patients, the public and other stakeholders. In addition, the Governing Body will:

- ensure that the organisation has equality objectives that meet the requirements of the public sector equality duty as set out under the provisions of the Equality Act 2010;
- receive and consider regular reports in order to evaluate the effectiveness of the policy.

#### 3.2 Directors and Heads of Service

- Divisional Directors and Heads of Service are responsible for the implementation of this policy;
- Divisional Directors and Heads of Service have specific responsibility for monitoring the effectiveness of this policy and deciding on appropriate actions in response to any needs identified. This policy will be subject to monitoring, evaluation and review on an annual basis in consultation with Staff.

#### 3.3 Managers and Team leaders

- CCG managers hold responsibility for ensuring the practical application of this policy and for the incorporation of its principles into all other CCG policies and procedures;
- Managers should be aware that they will be expected to positively promote high equality standards in line with the requirements of the Act;
- Managers, and other employees in supervisory positions, have a particular duty to ensure that discrimination, or any other breaches of this Policy, do not occur in any directorates/departments or areas of work for which they are responsible and to give positive support to any measures which will promote equality, inclusion and human rights;
- Managers will ensure that their employees have undertaken the appropriate mandatory equality and diversity training and, if involved with recruitment and selection, the necessary training to enable them to be involved in that process;
- Managers will ensure that those who report to them, but are not employed by the CCG, e.g. volunteers and providers of goods and/or services, take responsibility for their behaviour and conduct in the workplace and to make them aware of the practical application of this policy;
- Managers will assist with the monitoring of compliance within their area of responsibility in respect of the CCG's equality objectives;
- Managers will be involved in the development of policies, commissioning cases and service redesign initiatives that are responsible for ensuring that 'Due Regard' is conducted at an early stage and at key stages as the exercise develops;
- Responsibility for ensuring that any allegations of discriminatory behaviour or practices are correctly investigated and appropriate action taken. This may involve the use of the CCG Bullying and Harassment, Grievance Policy and or Your Performance Matters Policy.

#### 3.4 Responsibility of Staff

Good employee relations and practices depend on employees' attitudes and activities at work. Individual employees: -

- Have a personal responsibility for the application of this policy on a day-to-day basis. This means they should not undertake any acts of discriminatory practice in the course of their employment;
- Should positively promote high equality standards during their employment wherever possible;
- Have a responsibility to bring any potentially discriminatory practice to the attention of either their Line Manager, the Human Resources Department or relevant Trade Union/Professional Associations;
- Must not victimise individuals on the grounds that they have made complaints or provided information on discrimination but must be active in informing management of discrimination.

#### 3.5 External Contractors and Agencies (Providers of Goods and Services)

- Providers of goods and services should have access to this policy and the Equality and Inclusion Strategy;
- Contractors and their staff have an equal responsibility to ensure that this policy is adhered to and will be the subject of any contract compliance monitoring;
- External contractors and agencies providing services on behalf of the CCG, on CCG premises will be expected to make their staff aware of the CCG's EIHR policy and comply with it;
- Discrimination on the grounds listed above will not be tolerated by the CCG, whether committed with intent or negligence.

#### 3.6 Patients/Service Users/Carers/Visitors

- Patients, service users, carers and visitors are expected to be respectful to all staff and other patients;
- Patients, service users, carers and visitors who are verbally or physically abusive or who make derogatory statements that are of a discriminatory nature to any staff or other patients should be aware that they will be challenged about their behaviour. Where appropriate, the CCG may consider limiting or withdrawing the provision of services to, service users/carers/visitors and may seek to prosecute individuals where it deems necessary. The organisation will however consider issues such as non-capacity and any learning disability at this time before any actions are taken such as a service being removed or reduced.

### **SECTION 4 – POLICY PROCEDURAL REQUIREMENTS**

#### 4.1 EDS2 (Equality Delivery System 2)

Introduced in November 2013, the purpose of the EDS2 is to drive up standards for equality performance and embed equality into mainstream NHS business. Delivery of EDS2 helps NHS organisations to meet: -

- requirements of the Public Sector Equality Duty
- equality aspects of the NHS Constitution
- equality aspects of the NHS Outcomes Framework
- equality aspects of CQC's Essential Standards

EDS covers the 9 protected characteristics, sets four goals (better health outcomes for all; improved patient access and experience; empowered, engaged and well-supported staff; and inclusive leadership at all levels) and 18 expected outcomes. LCCG's objectives, action plans and policies align with the outcomes of the current EDS2 assessments that were undertaken as part of the transition from four into one CCG process.

We will regularly review our activities and procedures to ensure that we continue to embed our EIHR work around the new EDS3 when it is released.

#### 4.2 Equality Impact Assessment (EIA)

This process is designed to enable managers to identify the impact, both positive and negative, which a proposed policy, commissioning activity, service redesign or other function might have upon different protected characteristic. In the light of the EIA, managers can make changes which aim to maximise potential benefits and mitigate the negative impacts for the target groups. An updated EIA template is available for staff to use through the link on page 8. This template also includes a section to document Health Inequality considerations.

#### 4.3 Consultation and Engagement

During the development/review stages, we will consult and engage with relevant individuals and organisations to ensure that all pertinent aspects of the policy have been included and processes for implementing into different activities/functions have been understood and encompassed.

#### 4.4 Communication and publication

To ensure transparency, the approved policy will be communicated to all staff and be made available on the LCCG website/intranet site. This policy can be available in different formats to respond to specific communication needs of individuals in response to requests for reasonable adjustments.

#### 4.5 Training

All staff receive statutory and mandatory Equality and Diversity training in line with NHS requirements. In addition, suitable training will be provided to staff and decision makers as required.

#### 4.6 Review and assessment

This policy will be reviewed on annual basis to incorporate any legal and compliance changes. Any reviews of the policy will go through the LCCG Equality Forum, which acts as a supportive mechanism for the development, implementation and monitoring EIHR and engagement work within the LCCG. All reviews and new versions of the policy will be subject to an equality impact assessment.

The policy will be next reviewed in December 2021.

#### 4.7 Associated Documentation Links: -

**4.7.1** Associated policies https://lincolnshireccg.nhs.uk/library/policies-1/

#### 4.7.2 Equality Impact Assessments Template



4.7.3 LCCG Equality Forum Terms of Reference



#### 4.7.4 Useful LCCG EIHR contacts

Kamljit Obhi: <u>kamljit.obhi@nhs.net</u> David King: <u>david.king17@nhs.net</u> Sarah Southall: <u>sarahsouthall@nhs.net</u>

#### Legislation

#### 1. The Equality Act 2010 – Public sector duty

All listed public authorities (including CCGs and NHS England) have legal obligations relating to:

- Section 149 of the Equality Act 2010 (the Public Sector Equality Duty), and
- The Equality Act 2010 (Specific Duties) Regulations 2011.

In summary this means that as CCGs we have legal obligations to have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic and those who do not.

These are often referred to as the three aims of the Public Sector Equality Duty (PSED) and apply to the following protected characteristics:

- Age
- Disability
- Gender
- Gender reassignment
- Pregnancy and maternity
- Race
- Religion or belief
- Sexual orientation
- Marriage and civil partnership (but only in regards to the first aim eliminating discrimination and harassment)

The PSED applies to the exercise of all CCG functions. This includes, for instance, any decision made, any policy developed, any programme implemented and any practices driving activity. It also applies to functions and services provided by others on behalf of the organisation such as contractors and partners. Both new policies and decisions and existing policies and decisions, when reviewed, come within the PSED.

#### Paying due regard

Every day, decisions are made within the CCG that affect the lives and relationships of all our patients, service users, carers and staff.

The Equality Act 2010 requires us to pay '*Due Regard*', when considering the effects on different groups protected from discrimination (protected characteristics). Due regard can be demonstrated by carrying out an equality impact analysis (EIA), which assesses the potential positive and/or negative impact an activity may have on different of individuals/groups. Failure to pay due regard opens the organisation to external challenge.

#### **Specific duties**

Under the specific duties of the PSED, CCGs are required to publish information showing how we are complying with the PSED when taking decisions and making policies, including the impact of policies on both employees and the public, in a manner that is accessible to the public: Specific duties require the CCG to publish:-

- a) Information to demonstrate its compliance with the PSED at least annually. This information must include, in particular, information relating to people who share a protected characteristic who are:
  - its employees
  - people affected by its policies and procedures (in other words, the population of SLCCG for whom the CCG commissions services).
- b) Equality objectives at least every four years. All such objectives should be specific and measurable.

#### 2. Human rights Act 1998

Human Rights are the basic rights all individuals have, regardless of who they are, where they live or what they do. Human rights represent all the things that are important to human beings, such as the ability to choose how to live their lives and being treated with dignity and respect.

The UK Human Rights Act contains 15 basic rights:

- The right to life.
- The right not to be tortured or treated in an inhuman or degrading way.
- The right to be free from slavery or forced labour.
- The right to liberty and security.
- The right to a fair trial.
- The right to no punishment without law.
- The right to respect for private and family life, home and correspondence.
- The right to freedom of thought, conscience and religion.
- The right to freedom of expression.
- The right to freedom of assembly and association.

- The right to marry and have a family.
- The right not to be discriminated against in relation to the enjoyment of any of the rights contained in the European Convention.
- The right to peaceful enjoyment of possessions.
- The right to education.
- The right to free elections.

The CCG will consider these human rights principles in relation to our staff, patients and communities at all times, aiming to demonstrate our commitment to quality outcomes which will improve the patient experience in the services we commission, and provide satisfaction to staff that they are undertaking a job that is valued.

#### 3. Health and Social Care Act 2012

There is clear evidence that reducing health inequalities improves life expectancy and reduces disability across the social gradient. Tackling health inequalities is therefore core to improving access to services, health outcomes, improving the quality of services and the experiences of people. It is also core to the NHS Constitution and the values and purpose of the NHS.

The NHS Constitution 2 states that the NHS has a duty to "...pay particular attention to groups or sections of society where improvements in health and life expectancy are not keeping pace with the rest of the population". This is reflected in the National Health Service Act 2006 (as amended by the Health and Social Care Act 2012), which introduced for the first time legal duties to reduce health inequalities, with specific duties on CCGs and NHS England. These duties took effect from 1 April 2013.

#### CCGs have duties to:

- Have regard to the need to reduce inequalities between patients in access to health services and the outcomes achieved (s.14T);
- Exercise their functions with a view to securing that health services are provided in an integrated way, and are integrated with health-related and social care services, where they consider that this would improve quality, reduce inequalities in access to those services or reduce inequalities in the outcomes achieved (s.14Z1);
- Include in an annual commissioning plan an explanation of how they propose to discharge their duty to have regard to the need to reduce inequalities (s. 14Z11);
- Include in an annual report an assessment of how effectively they discharged their duty to have regard to the need to reduce inequalities (s. 14Z15).

## Stage 1: Equality Impact Assessment – Initial Screening

Name of the Activity/Project:	Equality, Inclusion and Human Rights Policy
Name of Lead:	Kamljit Obhi
Is it a new or review of an existing activity/project?	New policy for the NHS Lincolnshire CCG
Date Screening Commenced:	23/11/2020

#### 1. Baseline Information

Please give a brief description and overview of the activity/project, including the following details as per the box below:

a) Overview and description

This document is the policy of NHS Lincolnshire Clinical Commissioning Group (LCCG) for ensuring compliance with all of our statutory obligations around equality and diversity (in particular the Equality Act 2010) in respect of our duties as employers and as commissioners of NHS services. The policy also works in line with our responsibilities under the Human Rights Act 1998 and the Health and Social Care Act 2012 to address health inequalities.

b) Aims and objectives

This policy provides a framework for the CCG to ensure compliance with the Equality Act 2010 and associated guidance from the Equalities and Human Rights Commission and the Government Equalities Office.

This document sets out the CCG's policy on promoting equality, inclusion and human rights in relation to employment, service delivery, goods and supply of service including contractors and partner agencies. Its aim is to ensure that no individual or group receives less favourable treatment either directly or indirectly.

b) Anticipated outcomes/benefits

Increased awareness of members, senior managers and staff of their EIHR responsibilities to others internally and externally.

A fair and equitable service that responds to the diverse needs and requirements of our workforce and service users.

Awareness of the procedural requirements/resources available to support this work and evaluation processes.

c) Timescale for implementation

2020 - 2021 with annual reviews and updates

d) Projected costs, expenditure and funding available *(if applicable)* No costs implications

#### 2. Impact of activity/project on different protected characteristics

Protected groups are defined by the nine characteristics protected by the Equality Act 2010. Please identify (by ticking) the anticipated impact this activity/project will have on the following protected characteristics/population groups.

Note: this question considers the <u>likely</u> impact on people <u>with</u> a protected characteristic vs people who <u>do not share</u> that particular characteristic (e.g. older people vs working-age adults; LGBT people vs heterosexual people etc.)

Group	Positive Impact	No Impact (or neutral impact)	Adverse impact
Age (e.g. Children, young adults and older people)	х		
Disability (e.g. physical, sensory, mental impairment and learning disability)	x		
Gender re-assignment (e.g. Transgendered people)	Х		
Marriage and civil partnership	х		
Pregnancy and maternity	х		
Race including nationality and ethnicity (e.g. including New Arrivals and Gypsies and Travellers)	x		
Religion/belief	х		
Sex (male/female)	х		
Sexual orientation (e.g. Lesbian, gay or bisexual people etc.)	X		
Other (e.g. Homeless people, Carers etc., please specify)	x		

different protected characteristics when staff deliver services on behalf of the LCCG, unless there is reasonable justification to do so under the equality act. The

policy ensures everybody is treated with dignity and respect and that services can be adapted to make reasonable adjustments for those who require it. If this policy is implemented appropriately it should not have any detrimental impact on our staff and service users.

**3.** Which part/s of the public sector duty is the activity/project relevant to? Please tick as necessary and provide brief explanation as to how.

Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010. (E.g. How does the policy/practice address risks for particular protected characteristics?)	X The policy complies to the PSED of the Equality Act 2010 and other relevant legislation such as the HRA, Health and social care act and the NHS constitution relating to addressing health inequalities
<b>Advance</b> equality of opportunity between people who share a protected characteristic and those who do not ( <i>E.g.</i> How is this facilitated for particular protected characteristics?)	X "
<b>Foster</b> good relations between people who share a protected characteristic and those who do not <i>(E.g. How is this facilitated for particular protected characteristics?)</i>	X "

#### 4. Summary report and actions

Having completed all sections above, in light of the proposed activity/project, please summarise your findings and consider any actions that would support the reduction of any adverse impact that may have been identified in point 2.

#### **Evidence Summary Report and Actions**

The very nature of this equality policy is designed to proactively prevent discrimination and harassment, with regards to LCCG workforce, our service providers and contractors. The policy takes into account LCCG requirements to comply with equality legislation, and national frameworks. It provides guidance and resources to support implementation, monitoring and evaluation. The policy has gone through consultation with the Equality Forum where it was agreed on 25 November 2020 and will be taken to the LCCG polices sub group for final approval in January 2021 and then QPEC for information.

#### 5. Evaluation of Stage 1 – Initial Screening

You may want to consult with your Equality and Diversity lead and/or Manager to assess whether the information you have supplied in Stage 1 initial screening process is sufficient and your evaluation of whether you should go to stage 2 is adequate in line with the activity/project.

From the information provided in this Stage 1 screening and consultation with the equality and diversity lead where appropriate, please state, by ticking whether or not a Stage 2 assessment is necessary. If a stage 2 impact assessment is not necessary please provide your rationale

Yes	No
Please proceed to Stage 2 Assessment:	Please indicate rationale
	X. The policy is developed to combat
	discrepancies and enable the delivery of
	fair and equitable services both
	internally for our staff and externally for
	our service user and communities. The
	policy has gone through consultation
	with the Equality Forum where it was
	agreed on 25 November 2020 and will
	be taken to the LCCG polices sub group
	for final approval and then QPEC for
	information.

#### Sign-off

	Signed	Date
Activity/project Lead -checked	K. Obhí	23/11/2020
Senior Manager/Leader – checked		
Approved by (name of committee)		

Publication and Review, please note the following:-

- Once approved it is recommended that this information is stored with all documentation relating to the activity/project as evidence of the Stage 1 EIA screening having been undertaken.
- To show transparency, it is recommended that the Stage 1 information is published via appropriate methods, e.g. as attachment to documents relating to the activity/project, references in relevant reports/notes of meetings, information on organisation website etc.
- Reviewing of EIA information should be conducted alongside the ongoing review of project/activity.