

## Disclosure & Barring Service (DBS) Policy

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## 1. Introduction

- 1.1 This Policy sets out the responsibilities of NHS Lincolnshire ICB and its employees to comply with responsibilities under the Rehabilitation of Offenders Act 1974 (as amended) and ensure Disclosure & Barring Service checks are completed for roles that require such a check to ensure the protection of vulnerable people.
- 1.2 The ICB has a duty of care to protect the safety and wellbeing of patients. It must therefore have in place measures to ensure that it does not employ anyone who might be considered unsuitable to work with or have access to vulnerable patients.
- 1.3 The ICB will undertake a DBS check where it has been identified as a requirement of the role. The DBS is just one of the pre-employment checks that may be carried out during recruitment. The level of clearance required will be determined by the type of work the individual will be undertaking and where the work is carried out.
- 1.4 This policy must be read in conjunction with the ICB Recruitment and Selection Policy and the NHS Employment Check Standards which are available by clicking the following links:
  - [Recruitment & Selection Policy](#)
  - [nhsemployers.org recruitment employment-standards-and-regulation](https://www.nhsemployers.org/recruitment-employment-standards-and-regulation)

## 2. Equality Statement

- 2.1 NHS Lincolnshire ICB aims to design and implement policy documents that meet the diverse needs of our services, population, and workforce, ensuring that none are placed at a disadvantage over others. It takes into account current UK legislative requirements, including the Equality Act 2010 and the Human Rights Act 1998, and promotes equal opportunities for all.
- 2.2 This policy 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 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.
- 2.3 In carrying out its functions, NHS Lincolnshire ICB must have due regard to the Public Sector Equality Duty (PSED). This applies to all the activities for which NHS Lincolnshire ICB are responsible, including policy development, review, and implementation.

## 3. Policy Statement

- 3.1 The ICB is responsible for identifying whether a DBS clearance is required for a role and at what level in accordance with national DBS Guidance available at [DBS Checks \(detailed guidance\)](#).
- 3.2 A basic DBS check will contain details of convictions and conditional cautions considered to be 'unspent' under the terms of the Rehabilitation of Offenders Act 1974. The Act aims to give those with convictions or cautions the chance - in certain

circumstances - to wipe the slate clean and start afresh. Under the Act, eligible convictions or cautions become 'spent' after a specified period of time known as the 'rehabilitation period', the length of which varies depending on how the individual was dealt with.

- 3.3 In order to protect certain vulnerable groups, there are a number of posts and professions that are exempt from the provisions of the Rehabilitation of Offenders Act 1974, (Exceptions) Order 1975. These include posts where, in the normal course of their duties, successful applicants will have access to persons in receipt of health services. If the post applied for falls within the above category, it will be exempt from the provisions of the Act. Applicants are not entitled to withhold information about convictions, which for other purposes are 'spent', under the provisions of the Act, unless they are for minor offences that fall within the DBS's filtering rules ([DBS Filtering Guidance](#)).
- 3.4 Having a criminal record will not necessarily bar an applicant from being appointed. It will depend on the nature of the position and the circumstances and background of the offences.
- 3.5 The ICB should only use agency workers if the agency is on an approved NHS Framework. The Framework requires the agency to undertake the same level of pre-employment checks as would be required for an ICB employee, and therefore offers the ICB a higher level of assurance.
- 3.6 For staff recruited from abroad, a certificate of good conduct or overseas criminal record check must be requested in accordance with that countries justice system and UK requirements when recruiting from abroad. Specific guidance can be found at <https://www.gov.uk/disclosure-barring-service-check/arranging-checks-as-an-employer>.
- 3.7 The ICB uses a third party contractor (ArdenGem) to coordinate recruitment and pre-employment checks, including DBS applications. Therefore, personal data will be processed outside the organisation for the sole purpose of completing DBS applications. Colleagues are also advised of this when completing the electronic application process.
- 3.8 All applicants are made aware that a DBS Check may be required for the position they have applied for. The ICB will not normally permit prospective employees to commence work until their DBS clearance has been received. Where the DBS check is required, any offer of employment will be subject to a satisfactory DBS clearance. In limited circumstances an employee may commence without a DBS check but this will need to be agreed by the Head of Service and a risk assessment signed off by the relevant Director.
- 3.9 The ICB will accept checks undertaken as part of the DBS Update Service (for standard, enhanced & barring level certification). In order to enable individual employees to keep their DBS certificate up to date online any changes in the DBS status of an individual are automatically amended on the DBS Update Service and notification is sent to the ICB.

## 4. Scope

4.1 This policy applies in the following circumstances, where DBS clearance has been identified as a requirement of the role:

- Job applicants who are made a conditional offer of employment.
- All employees of the ICB, including those moving internally to new/different roles that require DBS clearance, or a different level of clearance to the existing role.
- Workers including those individuals on honorary contracts, agency, contractors, volunteers or students.
- Temporary/Bank staff.
- Clinical Leads where there is a specific requirement to have such clearance.
- Board level roles that are subject to the Fit and Proper Person Framework.

## 5. Definition of Terms Used

<b>DBS</b>	Disclosure and Barring Service
<b>DBS Update Service</b>	<p>The Disclosure and Barring Service (DBS) Update Service allows:</p> <ul style="list-style-type: none"><li>• applicants to keep their DBS certificates up to date</li><li>• employers to check a DBS certificate</li></ul> <p>The service is for standard and enhanced DBS checks only.</p>
<b>Regulated Activity</b>	Roles which carry out Regulated Activity require an enhanced DBS check. This will include a check against the relevant Disclosure and Barring Service, Barring List (for either Adult/ Children or both dependent on the role).
<b>Basic Check</b>	The lowest level of check available, which shows unspent convictions and conditional cautions. Basic level checks cannot be registered and updated via the DBS Update Service.
<b>Standard Check</b>	<p>Standard DBS checks show spent and unspent convictions and adult cautions, from the Police National Computer which have not been filtered in line with legislation.</p> <p>As defined by the Police Act and Rehabilitation of Offenders Act 1974, Standard disclosures apply to posts exempted under the Act, such as posts that involve the individual having access to patients in the course of their normal duties.</p>

<b>Enhanced Check</b>	<p>Enhanced DBS checks show the same as a standard check plus any information held by local police that's considered relevant to the role</p> <p>Employers recruiting for certain positions which are included in the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975, as well as those being "prescribed" in regulations made under s113B, Part V of the Police Act 1997 can request enhanced checks. The majority of these positions will include frequent or intensive contact with children or vulnerable adults, for example teachers, doctors or social workers or other prescribed professions under the Act.</p>
<b>Enhanced with Barring</b>	This level shows the same as an enhanced check plus whether the applicant is on the adults' barred list, children's barred list or both.
<b>Vetting and Barring Scheme (VBS)</b>	A list of people that are barred from carrying out regulated activity with adults and/or children
<b>Filtering</b>	<p>Filtering is the term used to describe the process that identifies which criminal records will be disclosed on a Standard or Enhanced DBS certificate (DBS check). Certain old or minor offences may not be disclosed on DBS certificates. These are known as 'protected' offences.</p> <p>Further details are available at <a href="https://www.gov.uk/government/guidance/db-filtering-guide">DBS filtering guide - GOV.UK (www.gov.uk)</a></p>
<b>Eligibility</b>	The type of work undertaken within a role will determine the level of check that is needed. The DBS Eligibility online tool can be used to determine if a role is eligible for a DBS check and if so at what level. <a href="https://www.gov.uk/government/collections/dbs-eligibility-guidance">https://www.gov.uk/government/collections/dbs-eligibility-guidance</a>

## 6. Duties and Responsibilities

### 6.1 ICB Executive Leadership Team

The ICB Leadership Team has responsibility to oversee this policy and ensure that appropriate processes are in place within the ICB.

### 6.2 Chief Nurse/Director of Nursing

As the relevant Director within the ICB's executive structure for staffing, the Chief Nurse/Director of Nursing is responsible for ensuring that this policy is effectively and appropriately implemented. They are also responsible for ensuring that the processes within the policy are monitored and non-compliance is acted upon.

### 6.3 Heads of Service

Heads of Service are responsible for ensuring that appropriate action is taken by line managers when an employee fails to comply with their responsibilities under this policy.

#### **6.4 Recruitment Team**

The AGEM Recruitment Team is responsible for day-to-day implementation of this policy during recruitment activities, coordinating pre-employment checks and DBS checks, dealing with queries, and escalating any issues.

#### **6.5 Human Resources & Organisational Development Team**

The ICB's Human Resources Organisational Development Team is responsible for supporting all managers and dealing with queries and escalations as a result of checks undertaken as part of this policy.

#### **6.6 Recruiting Managers**

Recruiting Managers are responsible for identifying when a role requires DBS certification and ensuring this is picked up as part of the pre-employment checks. Further guidance is available on the ICBs intranet [DBS Eligibility Guidance for Recruiting Managers](#)

Recruiting Managers are responsible for completing the risk assessment process, in conjunction with the Recruitment Team, in the event that any criminal history is disclosed as part of the DBS check.

Recruiting managers are also responsible for highlighting any change in an employee's DBS status or criminal history that they become aware of and seeking further advice from the Human Resources and Organisational Development Team in order to address the specific circumstances that they become aware of.

#### **6.7 Individual Employees, Workers and all groups identified in scope**

All employees, workers and all groups in scope of this policy identified at paragraph 4 have a responsibility to comply with this policy where DBS clearance has been identified as a requirement of their role.

### **7. DBS Requirements**

#### **7.1 Eligibility for DBS Checks**

- 7.1.1 Roles within the ICB will be assessed for eligibility for a DBS via review of the job role and expectations, and by using the DBS eligibility tool on the DBS site.  
<https://www.gov.uk/find-out-dbs-check>

#### **7.2 Types of DBS Check**

- 7.2.1 Appendix 1 describes the different DBS checks available and provides examples of where the level would apply within the ICB.

### 7.3 Fit and Proper Person Framework

7.3.1 Where a role falls under the provisions of the 'Fit and Proper Persons' framework (FPPT), the employee will require a DBS check as part of the appointment process for the role. The FPPT framework relates to all members of the ICB's Board, including the Chair, Chief Executive and Non-Executive Members. The level of DBS check required will depend on the nature of the role being fulfilled and should be in line with the ICB's local policy for FPPT.

7.3.2 For the purposes of the ICB Board members, DBS checks will be carried out as follows:

Board Role	Level of DBS Required
Chair	Basic
Chief Executive	Enhanced
Chief Finance Officer	Basic
Executive Board Members	Basic
Medical Director	Enhanced & Barring
Director of Nursing/Chief Nurse	Enhanced & Barring
All Non-Executive Members	Basic
Partner Members	Completed via employing organisation for their substantive role, in line with the employer's DBS policy

### 7.4 Processing DBS Checks

7.4.1 The ICB contracts with AGEM CSU to support recruitment and onboarding activities, using the TRAC recruitment system.

7.4.2 The level of DBS check required will be identified by Recruiting Managers using the [Eligibility Guidance for Managers](#)

7.4.3 The ICB will maintain a register of posts that are eligible for a DBS check. In the event of any query Recruiting Managers should contact the HR team at [agem.lincshr@nhs.net](mailto:agem.lincshr@nhs.net)

7.4.4 The level of DBS check should be entered on the job description so that this is clear to applicants and the Recruitment Team.

7.4.5 The Arden Gem Recruitment Team are responsible for undertaking all pre-employment checks for all new starters and for employees taking up new roles within the ICB.

7.4.6 Where applicable to a role, the recruitment team will arrange for relevant DBS checks to be completed as part of this process.

- 7.4.7 If the outcome of the DBS check is clear, the Recruitment Team will notify the appointing manager via the TRAC system that this part of the pre-employment process is complete.
- 7.4.8 There may be limited circumstances where a conditional offer of employment has been made but the DBS check has not been received. In these circumstances there may be occasions where an employee can commence employment. However, there must be good reasons for doing so and this must be agreed with the Head of Service and a risk assessment completed and signed off prior to the employees date of commencement. The risk assessment can be downloaded here [Pre-employment risk assessment](#)
- 7.4.9 If the DBS check has a reference to a conviction this will be discussed with the recruiting manager by the recruitment team and further advice should be sought from the ICBs HR team in accordance with paragraph 7.5 below.

## 7.5 Convictions/Cautions

- 7.5.1 In the event that the DBS check reveals details of convictions/cautions for a job applicant, the ArdenGem Recruitment Team will highlight this to the Recruiting Manager within the ICB and follow the agreed process for addressing a positive disclosure.
- 7.5.2 The information contained in the Disclosure will be discussed between the recruiting manager and their HR Business Partner, and a risk assessment will be completed. This can be downloaded here [Positive disclosure risk assessment](#)
- 7.5.3 Unless the Disclosure shows that the applicant is on one or both of the Barred Lists, the presence of a criminal history will not automatically be a barrier to employment within the ICB. Each case will be judged on its own merit.
- 7.5.4 An open and measured discussion will then be held with the applicant to seek clarification on the matter of any convictions/cautions that may be relevant to the appointment. Failure to disclose details that are directly relevant to the position being sought may lead to the withdrawal of a conditional offer.
- 7.5.5 The discussion will be summarised and the risk assessment finalised by the Recruiting Manager and HR Business Partner. The risk assessment and recommendation will be passed to the relevant Director for review and approval.
- 7.5.6 If a decision has been made that an unconditional offer of employment can proceed, details of the DBS check will be entered onto the individual's Electronic Staff Record (ESR) once they are in post. This will include the Disclosure Certificate number and date along with the level of check.
- 7.5.7 For all cases where a criminal history was disclosed and a risk assessment completed, a copy of the risk assessment will be retained on the new employee's personal file.
- 7.5.8 If following an individual's appointment it comes to light that they have a criminal record and have failed to disclose information that is relevant to the position held, it is likely to lead to disciplinary action, which may (after investigation) include dismissal.

## 7.6 On-going Monitoring of DBS Status

- 7.6.1 Line Managers are responsible for ensuring that they address any issues as part of their normal 1:1 process that take place with their staff.
- 7.6.2 Where the employee declares convictions during their employment further advice should be sought from the HR & OD team.

## 7.7 Costs

- 7.7.1 The ICB will fund the cost of the DBS checks for all new starters to the organisation, and for existing staff who take up a new post within the ICB that requires a new or different DBS check. However, the ICB does not re-imburse the annual renewal costs for the DBS update service.

## 7.8 Duty to Refer

- 7.8.1 There are circumstances where the ICB has a legal duty to refer an individual to the Disclosure & Barring Service. A referral means sharing information about a person with the DBS. This will usually be a concern that an individual may have harmed a child or member of a vulnerable group or put them at risk of harm.
- 7.8.2 The duty to refer includes:
- where workers have been provided by a third party staffing provider.
  - when a report has already been made to another body, such as a professional regulatory or licensing body.
- 7.8.3 A person or organisation that does not make a referral when the legal duty conditions are met will be committing an offence and, if convicted, may be subject to a fine of up to £5,000.
- 7.8.4 The duty still applies if an individual has resigned before a formal decision to dismiss or remove them from regulated activity has been made.
- 7.8.5 The DBS set out the conditions which need to be met for there to be a legal duty to refer.

- As an employer, you have withdrawn permission for the person to engage in Regulated Activity with children and/or adults

**and**

- You have moved the person to another area of work that isn't Regulated Activity or you have dismissed them. This includes situations when you would have moved the person but the person was re-deployed, resigned, retired, or left.

**And** you also think the person has:

- Engaged in relevant conduct in relation to children and/or adults. An action or inaction has harmed a child or adult or put them at risk or harm

**or**

- Satisfied the harm test in relation to children and/or adults, e.g. there has been no relevant conduct but a risk of harm to a child or adult still exists

**or**

- Been cautioned or convicted of a relevant (Automatic Barring either with or without the right to make representations) offence.

- 7.8.6 Where the conditions aren't fully met, the organisation may still choose to refer the individual in the interests of safeguarding children or vulnerable adults; for example where concerns have been shared with the organisation, but the individual hasn't been removed from regulated activity due to insufficient evidence.
- 7.8.7 Referrals can be made through an online referral form or by post. It is important to provide as much relevant information as possible, as the DBS rely on the quality of information provided when making any decisions. Ideally referrals are timely, detail the chronology of events and contain information to facilitate the DBS decision making process. Where relevant, the referral would include details of internal and external investigative and disciplinary processes.
- 7.8.8 Further guidance on an employer's duty to refer to the DBS, what information may be required as part of a referral, and the relevant conduct and harm test are explained in the DBS guidance for barring referrals.  
[https://assets.publishing.service.gov.uk/media/5c77e3d7ed915d29e5a87e99/CCS0119367774-001\\_Barring\\_Referrals\\_Document\\_Flowchart\\_A5\\_Booklet\\_V3\\_DG-2.pdf](https://assets.publishing.service.gov.uk/media/5c77e3d7ed915d29e5a87e99/CCS0119367774-001_Barring_Referrals_Document_Flowchart_A5_Booklet_V3_DG-2.pdf)
- 7.9 This Policy sets out the responsibilities of NHS Lincolnshire ICB and its employees to comply with responsibilities under the Rehabilitation of Offenders Act 1974 and ensure Disclosure & Barring Service checks are completed for roles that require such a check to ensure the protection of vulnerable people.
- 7.10 The ICB has a duty of care to protect the safety and wellbeing of patients. It must therefore have in place measures to ensure that it does not employ anyone who might be considered unsuitable to work with or have access to vulnerable patients.
- 7.11 The ICB will undertake a DBS check where it has been identified as a requirement of the role. The DBS is just one of the pre-employment checks that may be carried out during recruitment. The level of clearance required will be determined by the type of work the individual will be undertaking and where the work is carried out.
- 7.12 This policy must be read in conjunction with the ICB recruitment and selection policy and the NHS Employment Check Standards which are available here:

<https://lincolnshire.icb.nhs.uk/documents/our-policies-and-procedures/human-resources/icb-hr-008-recruitment-and-selection-policy/?layout=default>

<https://www.nhsemployers.org/recruitment/employment-standards-and-regulation>

- 7.13 This Policy sets out the responsibilities of NHS Lincolnshire ICB and its employees to comply with responsibilities under the Rehabilitation of Offenders Act 1974 and ensure Disclosure & Barring Service checks are completed for roles that require such a check to ensure the protection of vulnerable people.
- 7.14 The ICB has a duty of care to protect the safety and wellbeing of patients. It must therefore have in place measures to ensure that it does not employ anyone who might be considered unsuitable to work with or have access to vulnerable patients.

7.15 The ICB will undertake a DBS check where it has been identified as a requirement of the role. The DBS is just one of the pre-employment checks that may be carried out during recruitment. The level of clearance required will be determined by the type of work the individual will be undertaking and where the work is carried out.

7.16 This policy must be read in conjunction with the ICB recruitment and selection policy and the NHS Employment Check Standards which are available here:

<https://lincolnshire.icb.nhs.uk/documents/our-policies-and-procedures/human-resources/icb-hr-008-recruitment-and-selection-policy/?layout=default>

<https://www.nhsemployers.org/recruitment/employment-standards-and-regulation>

## **8. DATA PROCESSING, RETENTION AND MISCELLANEOUS PROVISIONS**

8.1 NHS Lincolnshire ICB and their partner organisation will only process personal data when permitted to do so and only retain such data in accordance with its Data Retention Policy.

8.2 This policy reflects both statutory and national guidance and the interpretation of this policy will follow this guidance as appropriate.

**HUMAN RESOURCES & ORGANISATIONAL DEVELOPMENT  
JUNE 2024**

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## Appendix 1

Level of Check	Description
<b>Basic Check</b>	A basic check will only show convictions that are not 'spent' and conditional cautions. This type of DBS can be requested by the individual themselves in order to obtain a copy of their criminal record. Basic level checks cannot be registered and updated via the DBS Update Service.
<b>Standard Check</b>	<p>Standard DBS checks show spent and unspent convictions and adult cautions from the Police National Computer which have not been filtered in line with legislation. A standard check is required for all posts that have access to patients but who do not meet the definition of Regulated Activity.</p> <p>In addition, jobs in some highly responsible professions depending on the exact nature of the role</p>
<b>Enhanced Check (with or without Barring)</b>	<p>An enhanced check is required for all posts that meet the definition of regulated activity. It will reveal all spent, (old), and unspent, (current), convictions, cautions, reprimands, or warnings. An enhanced check will reveal any other information held by the Police considered relevant to the post being applied for. For example, further information about the offences committed or information about on-going investigations.</p> <p>In addition to an enhanced check, posts meeting the test of Regulated Activity will also need to be checked against one or both of the Barred Children's or Barred Adult's lists.</p>

## Equality Impact Assessment Project Details

<b>Project Name:</b>	NHS Lincolnshire ICB
<b>EA Author:</b>	Simon Collingwood
<b>Team:</b>	Human Resources & Organisational Development
<b>Date completed:</b>	8 May 2024 (date of initial completion)
<b>Version:</b>	1.0

**What is the aim of the project/proposal?**

To establish a new DBS Policy for NHS Lincolnshire ICB which sets out its policy in respect of Disclosure & Barring Checks.

**Who will be affected by this work? e.g. staff, patients, service users, partner organisations etc.**

The policy is for all individuals who are contracted to undertake work on behalf of the ICB and includes employees, contractors, and individuals who hold a position on a committee as set out in the ICBs Constitution.

**Stage 1, Scoping point**

**Is a full Equality Impact Analysis required for this project?**

You should consider whether a full EIA is required, referring to the relevant guidance for information and guidance on making this decision.

It is important this decision is made with an open mind and correctly, advice should be sought from the EIHR team if you are unsure.

<b>Yes</b>	<input checked="" type="checkbox"/>	Proceed to the full Equality Impact Analysis form	<b>No</b>	<input type="checkbox"/>	Explain why further analysis is not required.
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*If no, explain below why further Equality Impact Analysis is not required. E.g. 'This report is for information only' or 'The decision has not been made by the ICB' or 'The decision will not have any impact on patients or staff'. (Very few decisions affect all groups equally and this is not a rationale for not completing an EIA.)*

## Stage 1, Scoping point

Is a full Equality Impact Analysis required for this project?

You should consider whether a full EIA is required, referring to the relevant guidance for information and guidance on making this decision.

It is important this decision is made with an open mind and correctly, advice should be sought from the EIHR team if you are unsure.

See below

## Equality Impact Analysis Form

If at an initial stage further information is needed to complete a section this should be recorded and updated in subsequent versions of the EIA. An Equality Impact Analysis is a developing document, if you need further information for any section then this should be recorded in the relevant section in the form and dated.

### 1. Evidence used

*To demonstrate that the decision made has been informed you should include examples of the information used to determine the impact and complete the EIA.*

*Examples are likely to include:*

- **Population Data** - e.g. demographic profile (Census),
- **Service Activity Data** e.g. profile of patients using a service
- **Consultation and Involvement findings** - e.g. any engagement with service users, local community, specific groups.
- **Research** - e.g. good practice guidelines, service evaluations, literature reviews, reports
- **Participant knowledge** - e.g. experiences of working with different or population groups, experiences of service users in other service areas / localities

This is a new Policy for the ICB that sets out the individual responsibilities for the ICB Board, the Executive Team, Recruiting Managers, employees. HR and associated services delivered by the ICBs appointed Commissioning Support Unit.

## 2. Impact of decision

*In the following boxes detail the findings and impact identified (positive or negative) within the research detailed above; this should include any identified health inequalities which exist in relation to this work.*

As part of these considerations you should consider how the ICB will be meeting the requirements of the Public Sector Equality Duty

- Removing or minimising disadvantages suffered by people due to their protected characteristics.
- Taking steps to meet the needs of people from protected groups 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.

**Before** completing this section you should ensure you can suitably answer the following:

What is the equality profile of the population i.e. service users/patients and/or workforce that is intended to benefit from the activity/project?

(By collecting and analysing demographic data of protected characteristics relating to patients/service users and/or workforce, within the geographical area concerned, the ICB will be able to identify the groups that may be adversely affected at a greater proportion to others).

### 2.1 Age

*Describe age-related impact and evidence. This can include safeguarding, consent, and welfare issues.*

There is no adverse impact in relation to section 2.1

### 2.2 Disability

*Describe disability-related impact and evidence. This can include attitudinal, physical, communication and social barriers as well as mental health/learning disabilities, cognitive impairments.*

There is no adverse impact in relation to Section 2.2

### 2.3 Gender reassignment (including transgender)

*Describe any impact and evidence in relation to transgender people. This can include issues such as privacy of data and harassment.*

There is no adverse impact in relation to section 2.3

## **2. Impact of decision**

*In the following boxes detail the findings and impact identified (positive or negative) within the research detailed above; this should include any identified health inequalities which exist in relation to this work.*

### **2.4 Marriage and civil partnership**

*Describe any impact and evidence in relation to marriage and civil partnership. This can include working arrangements, part time working and caring responsibilities.*

There is no adverse impact in relation to section 2.4

### **2.5 Pregnancy and maternity**

*Describe any impact and evidence in relation to Pregnancy and Maternity. This can include working arrangements, part time working and caring responsibilities.?*

There is no adverse impact in relation to section 2.5

### **2.6 Race**

*Describe race-related impact and evidence. This can include information on different ethnic groups, Roma gypsies, Irish travellers, nationalities, cultures, and language barriers.*

There is no adverse impact in relation to section 2.6

### **2.7 Religion or belief**

*Describe any impact and evidence in relation to religion, belief or no belief on service delivery or patient experience. This can include dietary needs, consent, and end of life issues.*

There is no adverse impact in relation to section 2.7

### **2.8 Sex**

*Describe any impact and evidence in relation to men and women. This could include access to services and employment.*

There is no adverse impact in relation to section 2.8

**2. Impact of decision**  
*In the following boxes detail the findings and impact identified (positive or negative) within the research detailed above; this should include any identified health inequalities which exist in relation to this work.*

**2.9 Sexual orientation**  
*Describe any impact and evidence in relation to heterosexual people as well as lesbian, gay and bisexual people. This could include access to services and employment, attitudinal and social barriers.*

There is no adverse impact in relation to section 2.9

**2.10 Carers**  
*Describe any impact and evidence in relation to part-time working, shift-patterns, general caring responsibilities. (Not a legal requirement but a ICB priority and best practice)*

There is no adverse impact in relation to Section 2.10

**2.11 Other disadvantaged groups**  
*Describe any impact and evidence in relation to groups experiencing disadvantage and barriers to access and outcomes. This can include socio-economic status, resident status (migrants, asylum seekers), homeless people, looked after children, single parent households, victims of domestic abuse, victims of drug/alcohol abuse. This list is not finite. This supports the ICB in meeting its legal duties to identify and reduce health inequalities.*

This policy relates to employees and the ICB has a range of policies that address the impact on groups who any suffer disadvantage. There is no adverse impact as a result of the introduction of this policy.

**3. Human rights**  
*The principles are Fairness, Respect, Equality, Dignity and Autonomy.*

<b>Will the proposal impact on human rights?</b>	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
<b>Are any actions required to ensure patients' or staff human rights are protected?</b>	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

**If so what actions are needed? Please explain below.**

N/A

#### 4. Health Inequalities.

The Health and Social Care Act 2012 established the first specific legal duties on ICBs to have regard to the need to reduce inequalities between patients in **access** to, and **outcomes** from, healthcare services and in securing that services are provided in an integrated way. These duties had legal effect from April 1st 2013.

The duties require that ICBs properly and seriously takes into account inequalities when making decisions or exercising functions, and has evidence of compliance with the duties, whilst also assessing how well commissioned providers have discharged their legal duties on health inequalities.

##### **1. What evidence have you considered to determine what health inequalities exist in relation to your work?**

This can include local and national research, surveys, reports, research interviews, focus groups, pilot activity evaluations or other Equality Analyses. If there are gaps in evidence, state what you will do to mitigate them.

(this may be different or similar to that which has informed the EIA)

This policy does not apply to service users/patients and therefore this section is not applicable.

##### **2. What is the potential impact of your work on health inequalities? Can you demonstrate through evidenced based consideration how the health outcomes, experience and access to health care services differ across the population group and in different geographical locations that your work applies to?**

If you feel that the project will not impact / be relevant to Health Inequalities please give a rationale.

**N/A See above**

This policy does not apply to service users/patients and therefore this section is not applicable.

##### **3. How can you make sure that your work has the best chance of reducing health inequalities?**

N/A See above

## 5. Engagement/consultation

What engagement is planned or has already been done to support this project?

It is expected that the ICB will have carried out a level of engagement with those affected whether formal or informal. This should be focussed to the groups most affected.

Engagement activity	With whom? <i>e.g. protected characteristic/group/community</i>	Date
Policy for review and comment off	Senior Management Operational Delivery Group	23 May 2024
Sent to Trade Unions for consultation and feedback	Trade Unions	7 June 2024
Policy for Review & Final Sign off	Senior Management Operational Delivery Group	27 June 2024
<i>Please summarise below the key finding / feedback from your engagement activity and how this will shape the policy/service decisions e.g. patient told us, so we will... (If a supporting document is available, please provide it or a link to the document)</i>		
<b>Feedback from Trade Unions and SMODG incorporated into policy to include Data Retention and Miscellaneous Provisions and reference to ICB Register of Posts eligible for DBS checks.</b>		

## 6. Mitigations and changes

*If you have identified mitigations or changes, summarise them below. E.g. restricting prescribing over the counter medication. It was identified that some patient groups require high volumes of regular prescribing of paracetamol, this needs to remain under medical supervision for patient safety, therefore an exception is provided for this group which has resolved the issue.*

*Are these vital to the project continuing?*

**Please see section 5**

## 7. Is further work required to complete this EIA?

*Please state below what work is required and to what section e.g. additional consultation or engagement is required to fully understand the impact on a particular protected group (e.g. disability)*

Work needed	Section	When	Date completed
Policy to be amended if consultation identifies any particular significant omission.	HR&OD	27 June 2024	27 June 2024
<b>Please refer to Section 5 above</b>			

## 8. Development of the Equality Impact Analysis

*If the EIA has been updated from a previous version please summarise the changes made and the rationale for the change, e.g. Additional information may have been received – examples can include consultation feedback, service Activity data*

Version	Change and Rationale	Version Date
e.g. Version 0.1	<i>The impact on wheelchair users identified additional blue badge spaces are required on site to improve access for this group.</i>	26 September 2017
<b>1.0</b>	<b>New Policy</b>	<b>27 June 2024</b>

### 9. Final Sign off

Completed EIA forms must be signed off by the completing manager. They will be reviewed as part of the decision making process. Service lines should maintain an up to date log of all EIAs.

<b>Version approved:</b>		
<b>Signature of responsible officer</b>	<b>S Collingwood</b>	<b>27 June 2024</b>
<b>Which committee will be considering the findings and sign off the EA?</b>	<b>Senior Managers Operational Delivery Group</b>	<b>27 June 2024</b>
<b>Minute number (to be inserted following presentation to committee)</b>	<b>10</b>	<b>27 June 2024</b>