

Equality & Health Impact Assessment for

FAMILY FRIENDLY POLICES AND PROCEDURES

(INCLUDING: Maternity, Adoption, Paternity & Shared Parental Leave Policy and Accompanying Procedures/Guidelines, Flexible Working Policy and Procedure, Special Leave Policy, and Parental Leave Procedure)

Please read the Guidance Notes in Appendix 1 prior to commencing this Assessment

Please note:

- The completed Equality & Health Impact Assessment (EHIA) must be
 - Included as an appendix with the cover report when the strategy, policy, plan, procedure and/or service change is submitted for approval
 - Published on the UHB intranet and internet pages as part of the consultation (if applicable) and once agreed.
- Formal consultation must be undertaken, as required¹
- Appendices 1-3 must be deleted prior to submission for approval

Please answer all questions:-

1.	For service change, provide the title of the Project Outline Document or Business Case and Reference Number	
2.	Name of Clinical Board / Corporate Directorate and title of lead member of staff, including contact details	Rachel Pressley, Workforce Governance Manager, 47559
3.	Objectives of strategy/ policy/ plan/ procedure/ service	To ensure that employees are made aware of their rights and obligations of the policy provisions, and any impact they may have on their employment. To ensure these provisions are applied in a fair, consistent and effective way.

¹http://nww.cardiffandvale.wales.nhs.uk/portal/page?_pageid=253.73860407.253_73860411&_dad=portal&_schema=PORTAL

		<p>To ensure that Cardiff and Vale University Health Board (the UHB) is compliant with the legislation and terms and conditions covering the policy provision</p> <p>To ensure that employees and managers are provided with information about their obligations and entitlements in a straightforward and easy to understand way, especially when the T&Cs/legislation governing them is fairly complex</p>
<p>4.</p>	<p>Evidence and background information considered. For example</p> <ul style="list-style-type: none"> • population data • staff and service users data, as applicable • needs assessment • engagement and involvement findings • research • good practice guidelines • participant knowledge • list of stakeholders and how stakeholders have engaged in the development stages • comments from those involved in the designing and development stages <p>Population pyramids are available from Public Health Wales Observatory² and the UHB's 'Shaping Our Future</p>	<ul style="list-style-type: none"> • Workforce monitoring data (see end of document) • A consultation has taken place between <<insert dates>> via the UHB intranet site – views have been specifically sought from Clinical Board teams, Executive Directors, Staff Representatives, Equality Manager, Welsh Language Officer, Workforce and OD and Children, and the Rainbow Fflag Network. As a result of the consultation <<to be completed following consultation>> • A number of EQIAs from other organisations were accessed via a Google search on 12 June 2018 - of those accessed: <ul style="list-style-type: none"> ○ Royal United Hospital Bath NHS Trust found that there was potential discrimination in their Maternity, Paternity, Adoption and Parental Leave Policy as legislation regarding maternity, paternity and adoption leave varies dependent on gender. This was justified on the grounds that the Policy followed statutory provisions ○ Dudley Group of Hospitals found that their Maternity and Adoption Policy had no impact on any of the protected characteristics ○ Torbay and South Devon NHS Foundation Trust found that their Maternity Policy had a neutral impact on all of the protected characteristics ○ Southern Health NHS Foundation Trust found that their Special Leave Policy had: <ul style="list-style-type: none"> ▪ A positive impact on the basis of age as the provisions were made available to all staff with all types of responsibilities regardless of whether they have young families or older dependents or need support to deal with personal circumstances, but that it also had a negative impact on the basis of age because employees without families may feel aggrieved that as this is not available to them, therefore they are not afforded the same opportunities for leave. However, the special leave policy provides a wider range of additional leave that would equally be available to them.

² <http://nww2.nphs.wales.nhs.uk:8080/PubHObservatoryProjDocs.nsf>

<p>Wellbeing' Strategy provides an overview of health need³.</p>	<ul style="list-style-type: none"> ▪ A negative impact on the basis of race because staff may have relatives' abroad or require extended period to travel for events i.e. funerals ▪ A negative impact on the basis of religion/belief because whilst the Trust understand that there are many 'special days' within religious calendars, the Trust is unable to give paid time off for these events under special leave. ▪ A negative impact on the basis of gender because employees with caring responsibilities (which tend to include more women and, therefore, a higher proportion of their workforce) may be subject to increased need to take time off in relation to care for dependents. <ul style="list-style-type: none"> ○ Solent NHS Trust found that their Special Leave Policy had no negative impact on any of the protected characteristics ○ Sheffield Health and Social Care NHS Foundation Trust found that their Adoption Leave Policy had no impact on any of the protected characteristics ○ Basingstoke & North Hampshire NHS Foundation Trust found that their Flexible Working Policy aimed to ensure that all employees regardless of any protected characteristics are treated fairly and consistently. ○ The Queen Elizabeth Hospital Kings Lynn NHS Foundation Trust found that their Flexible Working Policy and Procedure had no negative impact on any of the protected characteristics ○ The All Wales Special Leave EQIA found that the policy had a positive impact on all the protected characteristic <p>AGE:</p> <ul style="list-style-type: none"> • Legally age differs from other protected characteristics in that an employer can make a decision based on someone's age, even if this would otherwise be direct discrimination, as long as it can be objectively justified (EHRC Guidance). • All staff with more than 26 weeks service can apply for flexible working, and the Policy sets out the only reasons which can be given for rejecting an application. However, term-time working is designed specifically to assist employees with school age children, and is therefore more likely to be approved for younger workers. • For many older workers, having access to flexible working opportunities is important for remaining active in the labour market. In particular, for people with additional needs or responsibilities, such as caring for a relative or managing a health condition, flexible working is imperative. (AGE UK) • There has been a trend for employees over the age of 50 to increasingly seek opportunities for flexible working. In 2005, 30% of employees aged 50+ worked flexibly, by 2010 the proportion had increased to 38%. (Age UK)
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³ <http://www.cardiffandvaleuhb.wales.nhs.uk/the-challenges-we-face>

- According to [First4 Adoption](#), a Government funded organization, [you can't adopt](#) if you are under 21
- The [ONS](#) reports that since 1973 the average age of mother has generally increased. The overall rise since 1973 reflects the increasing numbers of women who have been delaying childbearing to later ages.

DISABILITY:

- [First 4 Adoption](#) state that being disabled should not automatically exclude anyone from becoming an adopter and it is widely recognised that disabled people can often provide a very loving home for a child.
- If an employee is disabled, it may be a reasonable adjustment to allow them to work flexibly if this removes a barrier to them being able to do the job ([EHRC Guidance](#)).

MATERNITY:

According to [research](#) by the Equality and Human Rights Commission and Department for Business, Innovation and Skills (BIS) (2015), the majority of employers reported that it was in their interests to support pregnant women and those on maternity leave and they agreed that statutory rights relating to pregnancy and maternity are reasonable and easy to implement. However, the research found that:

- Around one in nine mothers (11%) reported that they were either dismissed; made compulsorily redundant, where others in their workplace were not; or treated so poorly they felt they had to leave their job; if scaled up to the general population this could mean as many as 54,000 mothers a year.
- One in five mothers said they had experienced harassment or negative comments related to pregnancy or flexible working from their employer and /or colleagues; if scaled up to the general population this could mean as many as 100,000 mothers a year.
- 10% of mothers said their employer discouraged them from attending antenatal appointments; if scaled up to the general population this could mean up to 53,000 mothers a year.

[Pregnantpause A guide for lesbians on how to get pregnant](#), published by Stonewall states that while as a lesbian couple having children both individuals may be mothers, when it comes to maternity leave, only the birth mother is eligible. If the individual has not given birth to the child they cannot access maternity leave, but may be able to access paternity leave. This guide was written before the introduction of Shared Parental Leave and therefore does not mention that both partners may share up to 50 weeks leave by taking shared parental leave instead of maternity leave.

It is not sex discrimination against a man to provide special treatment to a woman in connection with pregnancy or childbirth (EHRC Guidance)

The UHB Maternity, Adoption and Paternity Guidelines refer to the Flexible Working Policy and advise that if an employee wishes to return to work on different hours at the end of their maternity or adoption leave, their manager has a duty to facilitate this wherever possible, with them returning to work on different hours in the same job. If this is not possible, the manager must provide written, objectively justifiable reasons for this and the individual should return to the same grade and work of a similar nature and status to that which they held prior to their maternity or adoption leave.

Employers are legally required to take reasonable steps to protect both the health and safety of pregnant employees and their baby. For example if they are finding it difficult to stand for long periods of time because of their advanced pregnancy, the employer must provide a suitable work space where they can sit down more frequently or take extra rest breaks. If sitting down or taking extra breaks are not feasible, the employer must provide suitable alternative work on similar conditions and terms. If there is no suitable work available, they would be entitled to have a suspension with full pay. ([Equal Opportunities Commission](#))

Absence from work due to pregnancy related illness should not be taken into account for disciplinary matters or redundancy. Absence due to pregnancy related sickness should be recorded separately from absence due to any other reasons. ([Equal Opportunities Commission](#))

Employees are entitled to have reasonable paid time-off for their antenatal care and antenatal appointments. They cannot be forced to schedule these appointments only outside of working hours. However in order to ensure that frequent absences do not cause too much disruption in the workplace, it is helpful to give as much advance notice as possible ([Equal Opportunities Commission](#))

SEXUAL ORIENTATION:

Stonewall published a report called “[Gay in Britain](#)” in 2013. They found that 4 in 5 (79%) of LGB people consider societies attitudes towards gay parents a barrier to becoming a parent, and more than half (56%) said lack of information and support on starting a family is a barrier to becoming a parent. The same report shows that almost half (46%) of respondents expected to be treated worse than a heterosexual person by an adoption agency if they wanted to adopt a child.

RACE:

- [First 4 Adoption](#) state that you can be matched with a child with whom you do not share the same ethnicity, provided you can meet the most important of the child's identified needs

RELIGION & BELIEF:

- A survey funded by the Department of Education in 2013 found that many people believed that active faith could prevent them from being approved for adoption. This led to the launch of an adoption dedicated information helpline for faith communities by Home for Good and [First4Adoption](#). According to a [Telegraph article](#) dated November 2013, a spokesperson for First4Adoption stated that "as part of the process people have their support networks assessed – being part of a faith community can work in people's favour". However, this view was anecdotally challenged in the same article by individuals who had gone through the adoption process and believed that too much emphasis was placed on their faith during the report and interview stage.
- Some religions or beliefs may require their followers to pray at certain times of day, to have finished work by a particular time or to fast for extended periods ([EHRC](#)). This may have flexible working implications
- An employer is not under any legal obligation to grant indefinite religious holidays or time off so individuals can observe each and every one of their religious and cultural festivals and ceremonies. However, they should try and accommodate requests for time off when possible and only if it does not interfere with their business. It is important to ask early to give the employer some time to make alternative arrangements. ([Equal Opportunities Commission](#))

MARITAL STATUS:

- [First 4 Adoption](#) state that Single, married or unmarried individuals can adopt
- According to the [ONS](#) (Office of National Statistics), in 2012, 84% of babies were registered by parents who were married, in a civil partnership or cohabiting

GENDER (incl. Gender reassignment)

- If a request to work flexibly is made because an employee proposes to undergo, is undergoing or has undergone gender reassignment, the employer should consider the request on the same basis as they would

consider any similar request made under the right to request flexible working. Employers should not refuse a request or treat it less seriously because it is being made by a transsexual person ([EHRC Guidance](#)).

- [CIPD research](#) has found that over the past 15 years, flexible working provision has increased, but the range of flexible working arrangements offered remains narrow, largely restricted to part-time working and flexi-time, and actual uptake has changed little. They state that a lack of flexible working opportunities is a significant barrier to female career progression. Caring responsibilities for both children and elderly relatives are disproportionately taken on by women, making flexible working arrangements a necessity for many. These are easier to come by in junior roles, but opportunities to adopt working styles beyond the traditional 9-5 largely evaporate the higher up an organisation you go. ([CIPD blog](#))
- At the moment there is a lack of adequate financial incentive for fathers to take up Shared Parental Leave and this is a key barrier preventing many working fathers from being able to fulfil their caring responsibilities. Many families will continue to have a lack of choice over who provides care and women will carry on facing a 'motherhood penalty'. Many fathers may want to take leave or reduce their hours for childcare responsibilities and we need continued campaigning and support from government to help change societal views on caregiving which is one blocker to the low take-up of shared parental leave ([CIPD blog](#))
- Anecdotally, it is expected that more women than men would take Special Leave to care for sick children etc., but as Special Leave is managed locally by line managers and is not recorded centrally there is no evidence to support this.

OTHER FACTORS:

[First 4 Adoption](#) state that:

- financial circumstances and employment status will always be considered as part of an adoption assessment, but low income, being unemployed or employed do not automatically rule you out
- Smoking will not necessarily rule you out from adopting. Consideration will be given to this and to all health- and lifestyle-related issues, and the agency will want to know of any specific health risks to you or to the children who may be placed in your care
- you can't adopt if you have not been resident in the UK for 12 months, or if a member of your household have a criminal conviction or caution for offences against children or for serious sexual offences

In some cases, the Equality Act can also protect carers from being treated unfairly because of their association with the person they care for; Associative discrimination or 'discrimination by association' comes about when someone is treated unfavourably on the basis of another person's protected characteristic. Discrimination by association doesn't

		apply to all protected characteristics. Marriage and civil partnership, and pregnancy and maternity are not covered by the legislation. Nor does it apply to instances of indirect discrimination by association - it has to be direct. (ACAS)
5.	Who will be affected by the strategy/ policy/ plan/ procedure/ service	The groups of individuals who will benefit from these policies include: <ul style="list-style-type: none">• Our patients and their families• Managers• Our staff and their families / dependents• Workforce and OD• Payroll services (NWSSP)• The public

6. EQIA / How will the strategy, policy, plan, procedure and/or service impact on people?

Questions in this section relate to the impact on people on the basis of their 'protected characteristics'. Specific alignment with the 7 goals of the Well-being of Future Generations (Wales) Act 2015 is included against the relevant sections.

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
<p>6.1 Age For most purposes, the main categories are:</p> <ul style="list-style-type: none"> • under 18; • between 18 and 65; and • over 65 	<p>These policies and accompanying procedures have a positive impact on this group by ensuring that the same processes are followed irrespective of the age of the individual concerned.</p> <p>Organisationally we employ very few individuals under age of 21, and have an aging workforce.</p> <p>It is interesting to note that the number of individuals working part time within the age 36-40 bracket has increased significantly since 2014 (when the Flexible Working Policy was last EQIAd). This could potentially be due to increasing numbers of individual who have caring responsibilities at both ends of the age spectrum (e.g. young children and elderly parents)</p>		

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
	<p>None of the UHB family friendly policies are restricted by age, though term-time working is designed specifically to assist employees with school age children, and is therefore more likely to be approved for younger workers. Flexible working could be used as a way of retaining older employees.</p> <p>Anecdotally (though there are no centralized records to support this) it is anticipated that employees with young children are more likely to use the Special Leave Policy to provide unplanned care for sick dependents, while older employees may be more likely to use it for bereavement and to arrange funerals for their parents.</p>		
<p>6.2 Persons with a disability as defined in the Equality Act 2010 Those with physical impairments, learning disability, sensory loss or impairment, mental health conditions, long-term medical conditions such as diabetes</p>	<p>These polices and accompanying procedures have a positive impact on this group by ensuring that the same processes are followed irrespective of whether or not an individual has a disability. Flexible working could be used as a reasonable adjustment to enable</p>	<p>Managers/HR can provide support to individuals unable to understand/access the forms. Trade Union members can also seek support from their TU.</p> <p>Large print versions etc. can be provided on request</p>	

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
	<p>disabled staff to remain in the workplace.</p> <p>Accessibility may be an issue for some groups e.g. individuals with sensory loss, learning disabilities or dyslexia</p>		
<p>6.3 People of different genders: Consider men, women, people undergoing gender reassignment</p> <p>NB Gender-reassignment is anyone who proposes to, starts, is going through or who has completed a process to change his or her gender with or without going through any medical procedures. Sometimes referred to as Trans or Transgender</p>	<p>These policies and accompanying procedures have a positive impact on this group by ensuring that the same processes are followed irrespective of the gender of the individual concerned. However, it is anticipated that these policies are more likely to be used by female employees because caring responsibilities for both children and elderly relatives are disproportionately taken on by women.</p> <p>The provisions set out in the Maternity Procedure only apply to female staff and there has been a very low uptake of Shared Parental Leave</p>	<p>The Maternity Policy and Procedure should be updated to include provisions for Transgender staff at its next review.</p>	

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
	<p>(probably because pay is not enhanced while on SPL).</p> <p>The Supporting Transgender Staff Procedure states that while employees are receiving treatment, managers should try to be as flexible as possible to meet reasonable requests for changes in shifts or working hours within the needs of the service and should refer to the Flexible Working Policy.</p>		
<p>6.4 People who are married or who have a civil partner.</p>	<p>These policies and accompanying procedures have a positive impact on this group by ensuring that the same processes are followed irrespective of the marital status of the individual concerned.</p> <p>We know that 50% of our staff are married, and 1% are in a civil partnership. We do not record how many are co-habiting. This</p>		

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
	is relevant because in 2012 84% of babies were registered by parents who were married, in a civil partnership or cohabiting.		
<p>6.5 Women who are expecting a baby, who are on a break from work after having a baby, or who are breastfeeding. They are protected for 26 weeks after having a baby whether or not they are on maternity leave.</p>	<p>The provisions for employees who are expecting a baby, who are on a break from work after having a baby, or who are breastfeeding are set out in the Maternity Policy and accompanying procedures (including the Guidelines on Combining Returning to Work and Breastfeeding).</p> <p>These provisions are largely mirrored for staff who adopt children with the following exceptions:</p> <ul style="list-style-type: none"> • there is no mandatory 2 week adoption period • risk assessment breastfeeding provisions do not apply 	<p>These are statutory provisions for health and safety purposes</p>	

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
	<ul style="list-style-type: none"> Women who have recently given birth and returned to work should have paid time off for postnatal care e.g. attendance at health clinics <p>In March 2018 2.20% of our staff were on Maternity Leave. This equates to XXX staff.</p> <p>Employees on maternity leave are entitled to return to work to their original job under their original contract and on no less favourable terms and conditions. If this is not reasonably practicable they will be found suitable alternative employment, where the terms and conditions are not substantially less favourable than their original job. These provisions are mirrored for staff on adoption and shared parental leave.</p>		

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
	<p>If at the end of their maternity leave an employee wishes to return to work on different hours, her manager has a duty to facilitate this wherever possible, with her returning to work on different hours in the same job. If this is not possible, the manager must provide written, objectively justifiable reasons for this and the employee should return to the same grade and work of a similar nature and status to that which she held prior to her maternity leave. Again, these provisions are mirrored for staff on adoption leave</p>		
<p>6.6 People of a different race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies/travellers, migrant workers</p>	<p>These policies and accompanying procedures have a positive impact on this group by ensuring that the same processes are followed irrespective of the race of the individual concerned.</p>		

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
<p>6.7 People with a religion or belief or with no religion or belief. The term 'religion' includes a religious or philosophical belief</p>	<p>These policies and accompanying procedures have a positive impact on this group by ensuring that the same processes are followed irrespective of the religion or belief of the individual concerned.</p>		
<p>6.8 People who are attracted to other people of:</p> <ul style="list-style-type: none"> • the opposite sex (heterosexual); • the same sex (lesbian or gay); • both sexes (bisexual) 	<p>These policies and accompanying procedures have a positive impact on this group by ensuring that the same processes are followed irrespective of who the individual concerned is attracted to.</p>		
<p>6.9 People who communicate using the Welsh language in terms of correspondence, information leaflets, or service plans and design</p> <p>Well-being Goal – A Wales of vibrant culture and thriving Welsh language</p>	<p>There is no evidence to suggest that these policies have any impact on people because of their Welsh Language Skills, however, managers should take into consideration the potential impact of flexible working on the ability to provide a service to Welsh Speakers</p>		

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
<p>6.10 People according to their income related group: Consider people on low income, economically inactive, unemployed/workless, people who are unable to work due to ill-health</p>	<p>Financial circumstances and employment status will always be considered as part of an adoption assessment, but low income, being unemployed or employed do not automatically rule you out. However, this is considered by Adoption Agencies/Courts and not by the UHB – our policies apply to all staff regardless of their financial circumstances.</p>		
<p>6.11 People according to where they live: Consider people living in areas known to exhibit poor economic and/or health indicators, people unable to access services and facilities</p>	<p>There is no evidence to suggest that these Policies and accompanying procedures have an impact on the basis of where our employees live</p>		
<p>6.12 Consider any other groups and risk factors relevant to this strategy, policy, plan, procedure and/or service</p>	<p>Smoking will not necessarily rule you out from adopting but will be considered along with other health- and lifestyle-related issues. Furthermore you can't adopt if you have not been resident in the UK for 12 months, or if a member or your household have a criminal conviction or caution for offences against children or for serious sexual offences.</p>		

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
	<p>However, this is considered by Adoption Agencies/Courts and not by the UHB – our policies apply to all staff regardless of their financial circumstances.</p> <p>Discrimination by Association should be considered when considering requests for flexible working, special leave and parental leave.</p>	<p>Guidance on Discrimination by Association should be incorporated into the Flexible Working Policy and Parental Leave Procedure when they are next reviewed.</p> <p>The Special Leave Policy is an all Wales Policy and cannot be altered by the UHB.</p>	

HIA / How will the strategy, policy, plan, procedure and/or service impact on the health and well-being of our population and help address inequalities in health?

Questions in this section relate to the impact on the overall health of individual people and on the impact on our population. Specific alignment with the 7 goals of the Well-being of Future Generations (Wales) Act 2015 is included against the relevant sections.

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
<p>7.1 People being able to access the service offered: Consider access for those living in areas of deprivation and/or those experiencing health inequalities</p> <p>Well-being Goal - A more equal Wales</p>	<p>There is no evidence to suggest that these Policies and accompanying procedures have an impact on the basis of access to services as they apply to all staff</p>		
<p>7.2 People being able to improve /maintain healthy lifestyles: Consider the impact on healthy lifestyles, including healthy eating, being active, no smoking /smoking cessation, reducing the harm caused by alcohol and /or non-prescribed drugs plus access to services that support disease prevention (eg immunisation and vaccination, falls prevention). Also consider impact on access to</p>	<p>There is no evidence to suggest that these Policies and accompanying procedures have an impact on the basis of being able to improve/maintain healthy lifestyles as they apply to all staff</p>		

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
supportive services including smoking cessation services, weight management services etc Well-being Goal – A healthier Wales			
7.3 People in terms of their income and employment status: Consider the impact on the availability and accessibility of work, paid/ unpaid employment, wage levels, job security, working conditions Well-being Goal – A prosperous Wales	these Policies and accompanying procedures apply to all staff		
7.4 People in terms of their use of the physical environment: Consider the impact on the availability and accessibility of transport, healthy food, leisure activities, green spaces; of the design of the built environment on the physical and mental health of patients, staff and visitors; on air	There is no evidence to suggest that these Policies and accompanying procedures have an impact on the people using their physical environment as they apply to all staff		

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
<p>quality, exposure to pollutants; safety of neighbourhoods, exposure to crime; road safety and preventing injuries/accidents; quality and safety of play areas and open spaces</p> <p>Well-being Goal – A resilient Wales</p>			
<p>7.5 People in terms of social and community influences on their health: Consider the impact on family organisation and roles; social support and social networks; neighbourliness and sense of belonging; social isolation; peer pressure; community identity; cultural and spiritual ethos</p> <p>Well-being Goal – A Wales of cohesive communities</p>	<p>There is no evidence to suggest that these Policies and accompanying procedures have an impact on the basis of social and community influences on their health as they apply to all staff</p>		

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
<p>7.6 People in terms of macro-economic, environmental and sustainability factors: Consider the impact of government policies; gross domestic product; economic development; biological diversity; climate</p> <p>Well-being Goal – A globally responsible Wales</p>	<p>There is no evidence to suggest that these Policies and accompanying procedures have an impact on the basis of macro-economic, environmental and sustainability factors as they apply to all staff</p>		

Please answer question 8.1 following the completion of the EHIA and complete the action plan

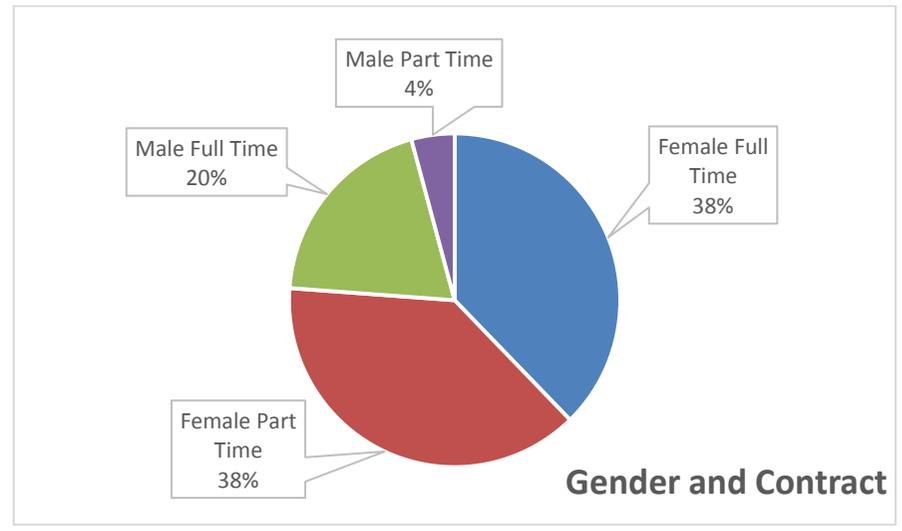
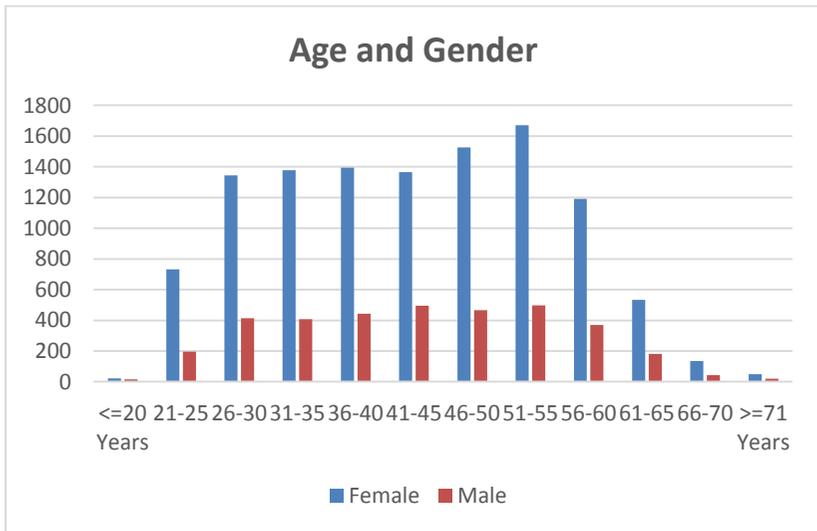
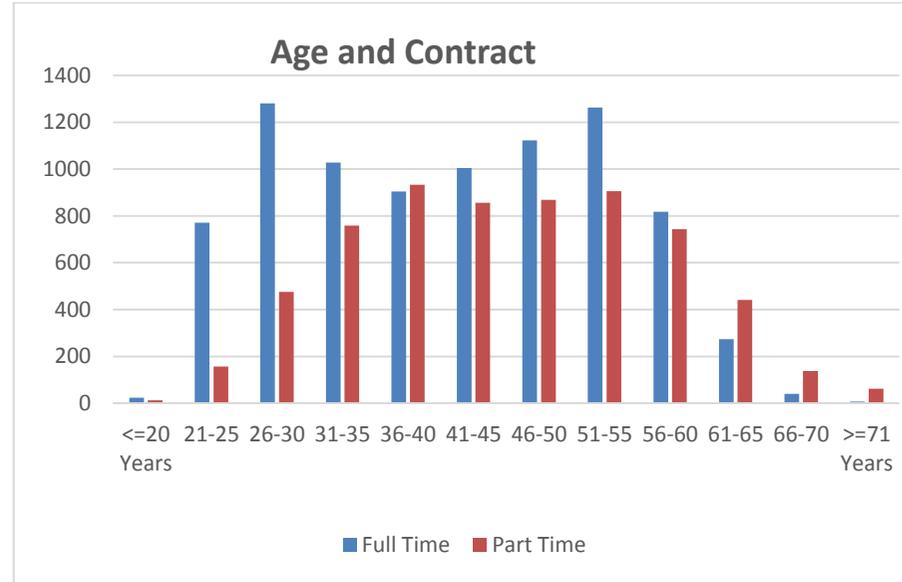
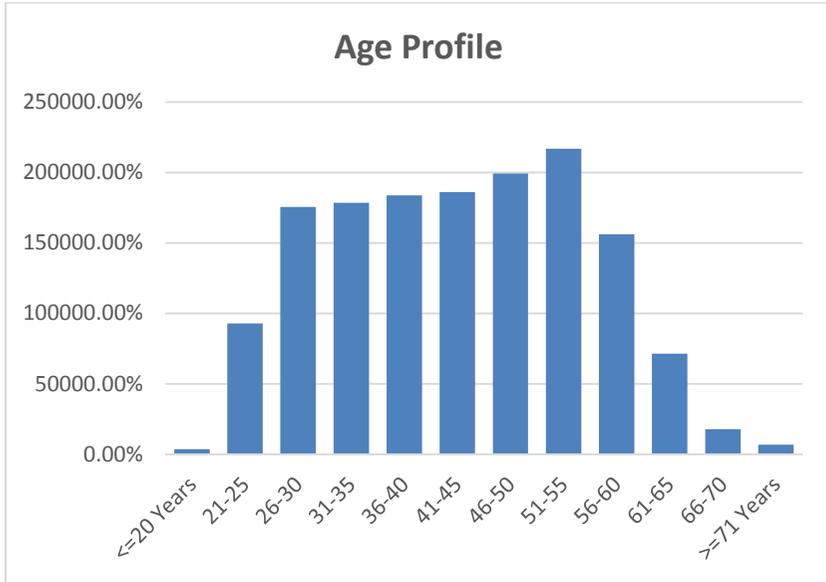
<p>8.1 Please summarise the potential positive and/or negative impacts of the strategy, policy, plan or service</p>	<p>These policies and accompanying procedures have a positive impact on all groups with protected characteristics as set out in the Equality Act (2010) by ensuring that the same opportunities, entitlements and obligations exist and processes are followed for all staff. Any exceptions to this are set out in legislation and are for the benefit of one or more groups with protected characteristics:</p> <p>AGE – it is thought likely that family friendly and flexible working policies will be accessed by either younger employees with caring responsibilities or older employees prior to retirement.</p> <p>DISABILITY - Flexible working can be used as a reasonable adjustment to enable disabled staff to remain in the workplace.</p> <p>MATERNITY – the maternity provisions are largely replicated for staff adoption a child/children with the following exceptions:</p> <ul style="list-style-type: none">• there is no mandatory 2 week adoption period• risk assessment breastfeeding provisions do not apply• Women who have recently given birth and returned to work should have paid time off for postnatal care e.g. attendance at health clinics <p>These provisions are a legal requirement when employees are expecting a baby or have recently had a baby for the health and safety of the mother and child</p>
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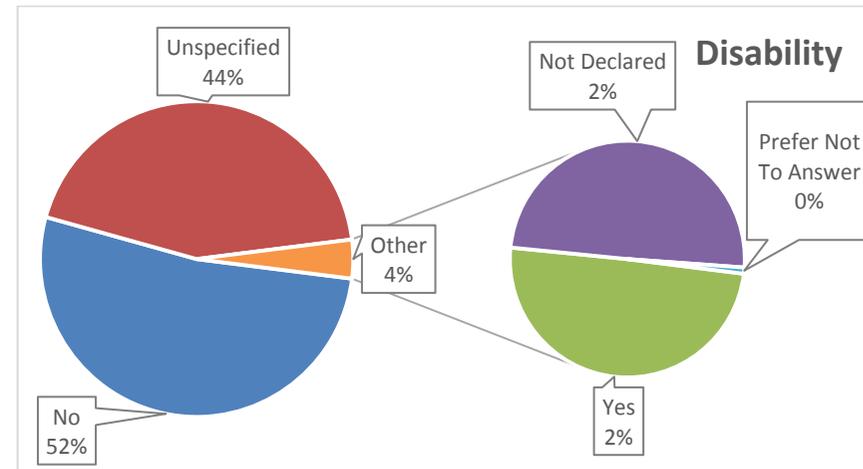
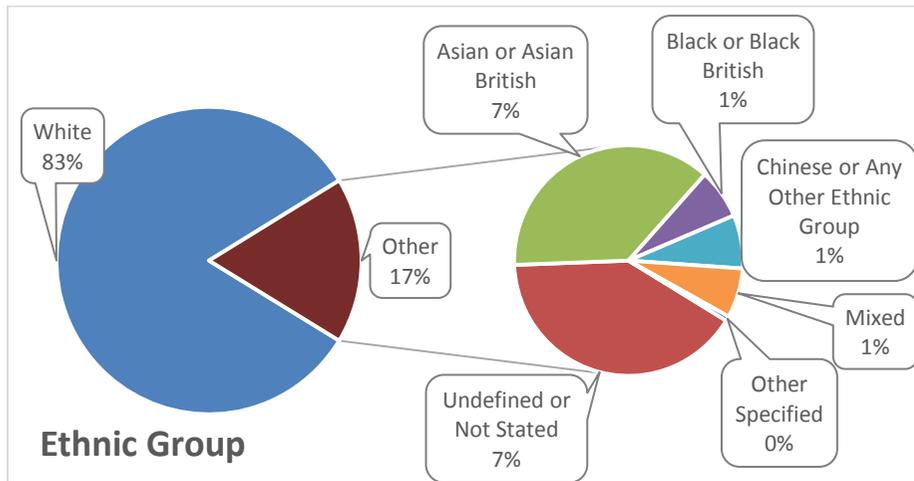
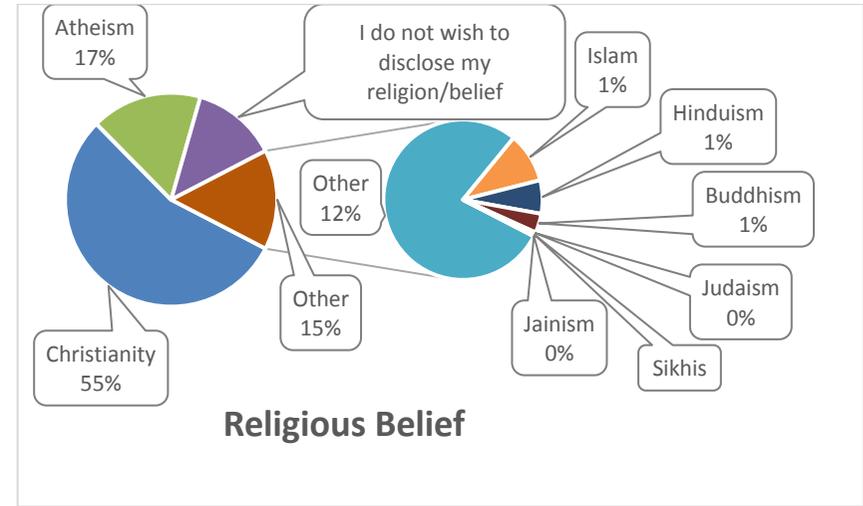
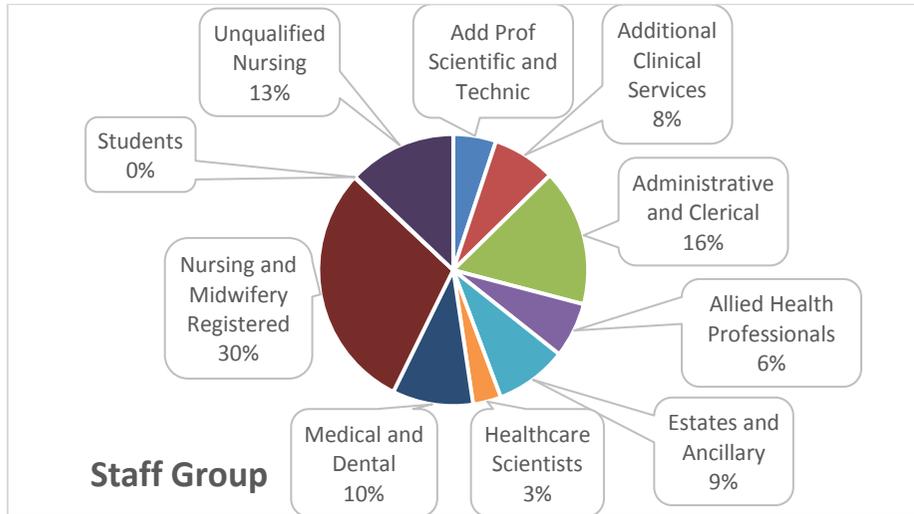
Action Plan for Mitigation / Improvement and Implementation

	Action	Lead	Timescale	Action taken by Clinical Board / Corporate Directorate
8.2 What are the key actions identified as a result of completing the EHIA?	The Maternity Policy and Procedure should be updated to include provisions for Transgender staff at its next review.	WF Gov Manager	Dec 2018	
	Guidance on Discrimination by Association should be incorporated into the Flexible Working Policy and Parental Leave Procedure when they are next reviewed.	WF Gov Manager	Dec 2018	
8.3 Is a more comprehensive Equalities Impact Assessment or Health Impact Assessment required? This means thinking about relevance and proportionality to the Equality Act and asking: is the impact significant enough that a more formal and full consultation is required?	No, as the overall impact is positive.			

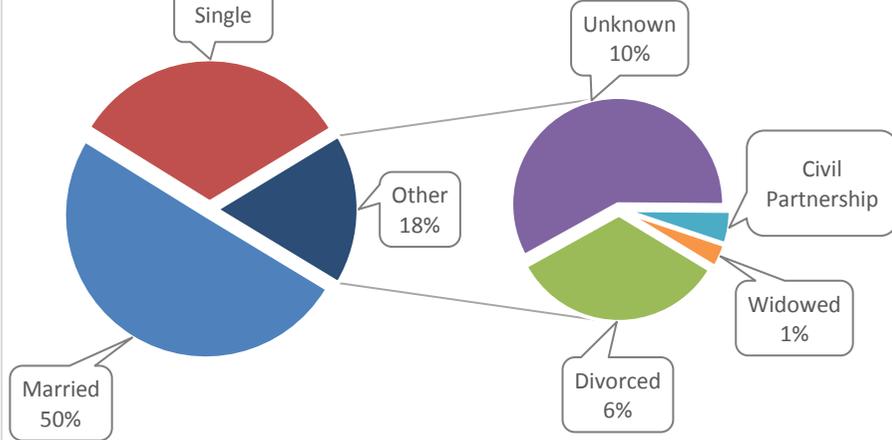
	Action	Lead	Timescale	Action taken by Clinical Board / Corporate Directorate
<p>8.4 What are the next steps?</p> <p>Some suggestions:-</p> <ul style="list-style-type: none"> • Decide whether the strategy, policy, plan, procedure and/or service proposal: <ul style="list-style-type: none"> ○ continues unchanged as there are no significant negative impacts ○ adjusts to account for the negative impacts ○ continues despite potential for adverse impact or missed opportunities to advance equality (set out the justifications for doing so) ○ stops. • Have your strategy, policy, plan, procedure and/or service proposal approved • Publish your report of this impact assessment • Monitor and review 	<p>The relevant policies and accompanying procedures will be reviewed in line with the Employment Policy Schedule and points raised while conducting this assessment will be considered and incorporated as appropriate</p> <p>This EHIA will be published on the UHB internet and intranet sites.</p> <p>On publication of the revised policies/procedures they will be communicated via a briefing for staff and managers advising of the key changes and reminding staff of the requirement to declare cautions or convictions. This will be communicated via the WOD internet pages 'Working for Us', email to Clinical Boards and the CAV You Heard? (UHB) Newsletter.</p> <p>This EHIA will be reviewed three years after approval unless changes to terms and conditions, legislation or best practice determine that an earlier review is required</p>	<p>WF Gov Manager</p>	<p>Ongoing</p> <p>On approval</p> <p>Ongoing</p> <p>2021</p>	

WORKFORCE PROFILE (March 2018):





Marital Status



Listening/Speaking Welsh

