

# NHS Western Isles

## Department of Spiritual Care, Equality and Diversity

### Equality and Human Rights Policy May 2017

Murdo Macleod, Operational Diversity Lead  
Rev TK Shadakshari, Strategic Diversity Lead

Reviewers Name (Chairman/Individual)	Group/Committee/Job Title	Current Date
Ellena Macdonald	Risk Manager	
Denise Symington	PFPI Development Officer	22/11/16
TK Shadakshari	Lead Chaplain and Strategic Diversity Lead	12/10/16

Version/Draft	Date	Latest Changes Made by	Reason for Changes

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# 1 Introduction

NHS Western Isles (hereafter NHSWI) is committed to valuing diversity and promoting equality. As an organisation, we seek to provide fair and accessible services for all our service users and equality of opportunity for all our staff. NHSWI recognises that promoting inclusion, participation and consideration for all in openness, and with accountability, will improve patient and staff experiences & deliver better health outcomes.

This Policy sets out NHSWI's commitment to tackle discrimination, promote human rights, equality and diversity to both staff and service users in all areas of employment practice and service delivery.

# 2 Policy Statement

This Policy provides a framework for NHSWI within which commitments, rights and responsibilities upholding respect, dignity, fairness and equality for all will give due regard to the requirements of the Equality Act 2010 and the 1998 Human Rights Act for us as a public body.

It is the aim of this Policy to ensure that there is no unlawful or undesirable discrimination against NHSWI service users, carers, visitors, existing employees or those wishing to seek employment with NHSWI. It seeks to underscore that all decisions are fair and reasonable and not based on prejudice or bias, in a way that protects the corporate reputation of NHSWI.

# 3 Policy

## Scope of Policy

Promoting Equality, Diversity and Human Rights (hereafter EDHR) is a cornerstone of NHSWI's functions and activities. This Policy and its associated guidance will apply to:

- Patient and service user experience and all areas of service provision.
- All staff directly employed by NHSWI and under the umbrella of the Western Isles Integrated Joint Board. This takes into account management and performance, and also includes trainees, volunteers, secondees, staff on temporary contracts, visitors, contractors and staff from other organisations working on NHSWI premises.
- The Policy applies to all staff during working hours and outside working hours when attending formal workplace functions, where NHSWI retains an employers' liability for the actions of its staff.

## **Definitions of terms**

### ***Diversity***

Diversity recognises that everyone is different, & that we need to understand, value and respect those differences. Diversity can, & should, include individuals and groups with varying backgrounds, experiences, styles, perceptions, values and beliefs.

### ***Equality***

Equality is about creating fairness and justice in society within which everybody can participate without disadvantage and has the opportunity to fulfil their potential. It is underpinned by legislation designed to address unfair discrimination and therefore protect those who might be vulnerable.

### ***Human Rights***

These are the basic rights and freedoms that belong to every person in the world. They are the fundamental things that human beings need in order 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 under certain criteria to protect the public.

These are some of the basic rights enshrined in the UK Human Rights Act of 1998 which are particularly applicable to the duties of care which characterise a healthcare organization, such as NHSWI.

- The right to life
- The right not to be tortured or treated in an inhuman or degrading way
- The right to liberty and security
- The right to respect for private and family life, home and correspondence
- The right to freedom of thought, conscience and religion
- The right not to be discriminated against in relation to the enjoyment of any of the rights contained in the European Convention of Human Rights
- The right to a fair trial, with reference to internal disciplinary & grievance procedures
- The right to freedom of expression

### ***Due Regard***

This is a requirement of the 2010 Equality Act, when considering the effects on different groups who need to be defended against discrimination. Carrying out an equality impact analysis (EqIA), in the form of the Fairness Assessment in NHSWI, is an effective way of ascertaining the potential impact on these groups of a course of action or new strategy.

### ***Reasonable Adjustments***

This is where an organization or employer makes a change or adaptation in the workplace or facility to reduce disadvantage experienced by a person who has needs, in a way that enables them to continue discharging their duties & thus enhance retention of staff. Very often this follows EqIA as described above, as good practice by an employer.

### ***Direct Discrimination***

A person treating someone with a protected characteristic less favourably, with intent, than they would others.

### ***Indirect Discrimination***

This is where a policy or course of action is applied universally in an organization but its effect disproportionately disadvantages a particular group within that body. This is where EqIA has a particularly useful purpose in screening new strategies/policies for unforeseen & unintended effects that might impact negatively on a sector of the workforce.

### ***Discrimination Arising from Disability***

This occurs when a disabled person is treated unfavourably because of something connected with their disability and the unfavourable treatment cannot be justified.

### ***Discrimination by Association***

Here someone is unfavourably treated merely because they associate with another person who possesses a protected characteristic.

### ***Discrimination by Perception***

Describes direct discrimination against an individual because it is assumed that they possess a particular protected characteristic, when they may not actually have it at all.

## **Public Sector Equality Duty in Scotland**

The Public Sector Equality Duty, within which NHS Scotland falls, is set out in Sections 149-157 & schedules 18 and 19 of the 2010 Equality Act. The Act brings together more than 116 separate pieces of legislation from over forty years into a single statute. This ensures greater consistency of protection from discrimination, harassment & victimization.

The public sector equality duty covers the following protected characteristics: age, disability, gender, gender reassignment, pregnancy and maternity, race, religion or belief and sexual orientation. The duty also covers marriage and civil partnerships, with regard to eliminating unlawful discrimination in employment.

The general equality duty requires public authorities, in the exercise of their functions, to have due regard to the need to:

- Eliminate unlawful discrimination, harassment, victimization and any 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 people who do not share it

With regard to the second need of advancing equality of opportunity, this Policy sets out that NHSWI will pay due regard to the need to:

- Remove or minimise disadvantage suffered by people due to their protected characteristic

- Take steps to meet the needs of people with certain protected characteristics where these are different from the needs of other people
- Encourage people with certain protected characteristics to participate in public life or in other activities where their participation is disproportionately low.

Public authorities covered by the public sector equality duty are also required to undertake Specific Equality Duties. These help the public authorities in their performance of the general equality duty. They were created by secondary legislation in the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012.

NHSWI is therefore, along with the other listed public authorities in Scotland, required to:

- Report on mainstreaming the equality duty with the publication of equality outcomes and evaluation of progress every two years to the Equality and Human Rights Commission Scotland
- assess and review policies and practices
- gather and use employee information
- publish gender pay gap information
- publish statements on equal pay
- consider award criteria and conditions in relation to public procurement
- publish in a manner that is accessible

## **Drivers for Change**

### **The Business Case**

There is a strong moral case for organisations to excel in their equality and diversity practices. An inclusive organisation where everyone is treated with dignity and respect would be a cohesive body with less conflict and insecurity. An organisation where diversity is celebrated would encourage active participation from all, with a demonstration of social and moral responsibility from a basis of shared values.

Secondly, there is also a robust business case for any organisation to seek to excel in its equality policies and practice. An organisation is more likely to attract people from a wider pool of talent if it is explicit in its commitment to diversity and is demonstrating this through how it operates. Such organisations too tend to be amenable and curious too towards new ways of working, rather than protective of the status quo. Staff and volunteers therein are therefore more likely to perform well, feel motivated and committed, and therefore be retained if they feel valued and respected in their working environment.

Thirdly, with regard to the legal case, it is now unlawful for organisations under the terms of the Equality Act to discriminate on the grounds of gender, gender identity, race, religion and belief, sexual orientation and disability in employment and training and in the provision of goods, facilities and services, except in very limited circumstances. It makes sense therefore for organisations to implement best practice to ensure that they are compliant with existing legislation.

This is economically prudent as well, as the costs associated with bad practice on equality far outweigh the costs of implementing good practice. In 2011, the total compensation awarded in two cases of racial and sex discrimination in two NHS Trusts came to almost £5.5 million. So, abiding by our legal requirements makes for sound financial governance.

## **National Strategy & Policy Drivers**

### **Scotland's National Action Plan for Human Rights 2013-17**

This is a roadmap for the realization by Scotland of the internationally recognised human rights first set down in the Universal Declaration of Human Rights. SNAP sets out three outcomes of Better Culture, Better Lives and Better World. These will expedite change in the following concerns:

- *Empowerment* - Increase peoples' understanding of human rights, their entitlement to them as citizens in Scotland and their participation in decisions
- *Ability* – Increase organisations' ability and capacity to embed human rights in their practice
- *Accountability* – Increasing accountability and responsibility for actions through human rights based laws, governance and monitoring

### **Scottish Human Rights Commission Strategic Plan 2016-2020**

### **Race Equality Framework for Scotland 2016-30**

### **Person-Centred Health and Care, Healthcare Improvement Scotland 2015**

## Principles of Policy

- The instilling of a human rights based approach in NHSWI which emphasises participation, accountability, non-discrimination, enablement and legality
- No-one in receipt of services from NHSWI will receive less favourable treatment on the grounds of their protected characteristics, caring responsibilities or any other irrelevant criteria, in a culture of consideration and respect
- The reduction of access barriers & the promotion of engagement with all through use of a wide range of communication methods & intelligent orientation, such as Easy Read and signage
- The recognition & endorsement of the wide variety of gifts, experiences & styles in our workforce, and the width of opportunity that these deserve
- The application of proportionality in how we approach and manage problems. Ensuring that our responses to these challenges are appropriate and not excessive, in a manner that allows us to weigh competing interests, such as the rights of individuals with those of the rights and needs of others
- Supporting unequivocally the right and process of redress for patients and employees who consider complaints, who experience unacceptable behavior and language within NHSWI

## Our Aims

### **Aim 1: To be a better place to work for all staff**

We want to create a better place to work for all staff and to ensure that the NHSWI is a fair employer achieving equality of opportunity and outcomes in the workplace for all staff. We will ensure:

- That in planning, policy and delivery there will be an analysis of which human rights are relevant, who the rights holders are and who are responsible for ensuring that rights are protected, promoted or fulfilled.
- Support mechanisms will be in place for staff who report discrimination, harassment and bullying.
- Regular monitoring of ethnic origin, gender, disability, age, sexual orientation and religion or belief will be carried out for all aspects of employment, and the data will be used to inform employment practice.
- The promotion of a variety of working arrangements that meet the needs of service users, structured on human rights based principles, thus maximising the contribution that both new and experienced staff can make throughout their working lives by offering choice and flexibility.
- Reasonable adjustments will be made to the working environment, where required, to accommodate the needs of staff with a disability.
- That, where appropriate, Positive Action initiatives will be developed for the recruitment, training and development of under-represented groups at all levels of the workforce, to promote equality of opportunity.

## **Aim 2: To ensure equity in all that we do for the users of our service**

We want to deliver high quality services that are accessible, responsive and appropriate to meet the diverse needs of different groups and individuals who use NHSWI services. We will ensure that:

- Our service users are treated with respect, fairness and dignity at all times.
- Our commissioned services, including the physical design, layout and lighting of areas, will be sensitive to equalities and human rights, through consideration of E&HR considerations and needs within the contracts.
- Our service users are actively encouraged and enabled to participate as fully as possible in decisions about their care and treatment, for example as Lay Members on Managed Clinical Networks & other key committees
- Our service delivery, policy, planning, changes and evaluation will include an explicit Fairness Assessment of their potential and actual impact on disadvantaged individuals and groups.
- All the information we publish uses language that is appropriate to the intended audience, and that it is in accessible formats. This will include the use of our Service Level Agreement with Language Line for service users whose first language is not English and of the Contact Scotland British Sign Language facility for public bodies in Scotland for our service users with a hearing impairment. The awareness of our staff as to these facilities will be regularly maintained.
- Data on protected characteristics will be routinely collected via Diversity Monitoring Forms, and used to inform service planning, review and evaluation.

## **4. Responsibilities**

The NHSWI:

- Will ensure that the NHSWI meets its statutory legal and policy obligations to deliver the human right and equalities agenda as a whole
- Quality Improvement Board, the Patient Focus and Public Involvement Committee and Corporate Management Team will receive, review and approve the annual Equality Report from the Strategic Diversity Lead and Operational Diversity Lead
- Will ensure that the needs of disadvantaged and minority groups are considered in the service objectives of its Corporate Plan, and that they have been acknowledged appropriately in work submitted to the Health Board for endorsement or approval.
- Will be responsible for providing visible leadership, in order to cultivate and model an organisational culture that demonstrates the traits of courtesy and fairness to all inherent in E&HR.
- Will ensure that all Departmental Managers have a responsibility to adhere to this Policy and to bring it to the attention of staff in their areas with a view to establishing & protecting an inclusive & respectful environment
- Will be an active member of the inter-agency Western Isles Diversity and Equality Steering Group (DESG) that will build and maintain relationships,

share best practice, support and advise on compliance with relation to equalities and human rights

- Commits to investigating any alleged discriminatory breaches of this Policy, the Dignity At Work Policy, the Employee Conduct Policy and the Grievance Policy, and to take consequently all action deemed appropriate
- Will ensure provision of information to the Equalities and Human Rights Commission Scotland on compliance with criteria via the bi-annual Equality Mainstreaming Report, with the collation and presentation of employment data for the organisation and a statement on equal pay

## **5.1 Training**

- Departmental Managers, in liaison with the Strategic Diversity Lead, will ensure that all new employees in the organisation will complete the Equality and Diversity LearnPro module component within three months of attending Staff Induction, as per requirements of the NHSWI Learning and Development Strategy
- The Department of Diversity and Equality to plan and deliver training from time to time to selected staff groups on topics deemed valuable, building on historical Equality Act 2010 training, following national Equality and Human Rights Commission and Governmental/NHS Scotland initiatives and campaigns
- To promote parity of access to training across the organisation, the Department of Diversity and Equality will assist NHSWI Human Resources and Professional Practice in identifying & mitigating any institutional barriers and/or health/communication issues that may be impeding ability of staff to attend/access training and take learning forward, in line with the Learning and Development Strategy and Capability Policy
- NHSWI will ensure that external training providers understand the principles of the policy as they pertain to the style and ethos of the training that is planned.

## **5.2 Monitoring and Review**

A monitoring process is essential in ensuring that the Board's obligations and its procedural requirements are met. The monitoring process will facilitate analysis of NHSWI's employment practices and service delivery.

- NHSWI will bring the aspirations, consequential impact and operational legacy of this Policy to the consideration and peer review of the inter-agency Western Isles Diversity and Equality Steering Group (DESG)
- Service user and patient representatives and groups will be encouraged to provide feedback on performance against the implementation of the Policy at the DESG and at the NHSWI PFPI Committee as previously mentioned

- The Human Resources Department will monitor the effectiveness of this policy in relation to equality of opportunity and human rights, in particular through scrutiny of any staff surveys, workforce profile, recruitment and selection monitoring, disciplinary and grievances (including incidents of harassment), retention and exit interviews, taking any necessary action as appropriate.
- The Department of Equality and Diversity will evaluate progress against the aspirations of the Policy in the Annual Equality Report & bi-annual Equality Mainstreaming Report
- This Policy will be in place for three years, following its approval and ratification. It will then be reviewed.

### 3.1 Appendix/Related Document Risk Assessment

<b>Site</b>	NHS WESTERN ISLES	<b>Risk Category</b> <i>(See list)</i> POTENTIAL POPULATION HEALTH & ORGANISATIONAL	Financial Clinical Population Health Physical Organisation Project Human Resources
<b>Dept/Ward</b>	EQUALITY & DIVERSITY	<b>Assessors name</b> (person who documents the risk)	T K SHADAKSHARI
<b>Risk Ref No.</b>		<b>Risk status</b> <i>(active-being reduced, inactive-tolerated, active-escalated)</i>	
<b>Date risk raised</b>		<b>Register for Escalation</b>	
<b>Operation/Activity</b>			<i>Describe the setting and the work being undertaken</i>
EQUALITY & HUMAN RIGHTS POLICY (REFURBISHED)			
<b>Hazard/s</b>			All hazards associated with the activity should be entered here. e.g. physical hazards, machinery, electricity, working at heights, substances, access, adverse clinical event, equipment, vehicles, etc.
N/A			
<b>People at Risk</b>			Highlight the people at risk i.e. nursing staff, Domestics, Estates, Visitors, the likely numbers exposed
POTENTIAL DISCRIMINATION & UNFAIRNESS TO ALL GROUPS IN THE COMMUNITY			
<b>Risk Identified</b>			<i>What is the risk? What might happen? Start with "there is a risk that..."</i>
THERE IS A RISK THAT THE HUMAN RIGHTS & DIGNITY OF PEOPLE WILL BE UNDERMINED, & ALSO A RISK OF LOW PARTICIPATION & EMPOWERMENT LEVELS			
<b>Current Control Measures</b>			<i>List current and interim control measures, including physical controls but do not forget to include other controls including safe working, policies, procedures, information, instruction and training</i>
FAIRNESS ASSESSMENT TOOL, BIENNIAL EQUALITY MAINSTREAMING REPORT, DIVERSITY & EQUALITY STEERING GROUP & PFPI COMMITTEE DELIBERATION & MONITORING			

## a) CURRENT STATE

### QUANTIFICATION OF RISK RATING WITH CURRENT CONTROL MEASURES IN PLACE

Likelihood 3	a	x	Severity 2	b	=	Risk Rating 6	c	<i>Estimate of likelihood and severity Refer to key below, and to the Risk Quantification Criteria. Select numbers according to the likelihood and severity. Enter the numbers at a and at b, multiply them together and record the resultant risk rating at c.</i>
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### RISK QUANTIFICATION - KEY

LIKELIHOOD (a)		SEVERITY (b)		RISK RATING (c)	RISK COLOUR	See RISK QUANTIFICATION CRITERIA
1	Rare	1	Negligible	1 to 3 = Low	(Green)	 C:\Risk Quantification Criteria
2	Unlikely	2	Minor	4 to 9 = Medium	(Yellow)	
3	Possible	3	Moderate	10 to 16 = High	(Orange)	
4	Likely	4	Major	17 to 25 = Very High	(Red)	
5	Almost certain	5	Extreme			

<b>Current Control Measures</b> <i>(Please mark appropriate box with an X)</i>	<b>Wholly Inadequate</b>	<b>Weak/Require Strengthening</b>	<b>Satisfactory</b> x
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<b>With these controls, are the risks at a level that is as low as reasonably practicable? (Yes or No)</b>	<b>YES</b>
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If the answer to the above question is NO, please continue to b) and complete a Risk Control Action Plan

## b) FUTURE STATE

<b>Risk Control Action Plan</b> <i>(Complete if further control measures required. Use one row per action)</i>	<b>Who will do it</b> <i>(name)</i>	<b>When will action be completed by</b> <i>(estimate date)</i>	<b>Dependencies</b> <i>(give details e.g. * Financial – amount * Resources – people or equipment * Commitment/priority)</i>

<b>Risk Control Action Plan Costs</b> <i>(Please mark appropriate box with an X and specify total estimated cost)</i>	<b>Under £5000</b>	<b>Amount £</b>	<b>Over £5000</b>	<b>Amount £</b>
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<b>Can the Risk Control Action Plan be implemented locally? Yes or No, or Partially</b>	
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### QUANTIFICATION OF TARGET RISK RATING WITH RISK CONTROL ACTION PLAN IMPLEMENTED

Likelihood d	a	x	Severity y	b	=	Risk Rating	c	<i>Estimate of likelihood and severity Refer to key below, and to the Risk Quantification Criteria. Select numbers according to the likelihood and severity. Enter</i>
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									<i>the numbers at a and at b , multiply them together and record the resultant risk rating at c.</i>
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<b>Risk Assessor:</b> <i>(Print Name)</i>		Signature:		Date:	
<b>Service Head / Nominated Deputy</b> <i>(Print Name)</i>		Signature:		Date:	

**c) PERIODIC REVIEW**  
**REVIEW THE RISK EVERY THREE MONTHS. UPDATE TO REFLECT CURRENT STATUS**

<b>Review Date</b>	02/06/2017				
<b>Reviewer</b>	REV T K SHADAKSHARI				
<b>Action</b>	Risk Screening				

**Send copy of completed Risk Assessment to Line Manager for inclusion on the Ward/Department/Unit Risk Register**

<b>Date Sent:</b>	03/03/2017	<b>Line Manager Name:</b>	REV T K SHADAKSHARI
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### 3.2 Appendix/Related Document Fairness Assessment (whatever number)

## Fairness Assessment Toolkit

This toolkit is designed to be used by those:

1. Writing Policies, Procedures & Protocols from scratch
2. Reviewing existing Policies, Procedures, Protocols and services
3. Planning new services or redesigning existing ones.

IT IS IMPORTANT THAT AT THE *BEGINNING* OF THE POLICY DESIGN PROCESS YOU CONSIDER THE REQUIREMENTS OF THIS TOOL. IT IS DESIGNED TO ASK THE QUESTIONS AROUND WHICH POLICIES, PROTOCOLS, STRATEGIES AND SERVICES SHOULD BE DESIGNED, AND THEREFORE REDUCE THE RISK OF DISADVANTAGE.

Author/Reviewer Name	REV T K SHADAKSHARI & MR MURDO MACLEOD
Name of policy, protocol, procedure, strategy or service	EQUALITY & HUMAN RIGHTS POLICY
Line Manager responsible for signing Off	MRS CHRIS ANNE CAMPBELL
Date Started	AUGUST 2016
Date Completed	JANUARY 2017

## **Key steps for conducting a Fairness Assessment**

1. Identify the key aims & outcomes of the policy.
2. Gather information & evidence around protected characteristics & identify the gaps.
3. Assess the impact - consider alternatives & mitigate negative impacts.
4. Involve & consult on impact assessment - internally & externally.
5. Make a decision; develop an Action Plan based on evidence.
6. Sign off; send to Strategic Diversity Lead for sign off.
7. Final Fairness Assessed policy to be published on NHS WI Show website.
8. Monitor & review the final assessment.

## **Section 1 About your project**

Please answer the following questions:

**1. Is this a new policy?**

Yes No

If yes, please explain why it is being done and what the effects of it will be

**2. Have you checked if there are any other current guidance on this topic in the Health Board?**

Yes No

If the answer is No, please stop and check now.

**3. Please list who is likely to be affected by this project and how they will be affected**

<b>Who?</b>	<b>How?</b>
SERVICE USERS AND STAFF	FAIRNESS & HUMAN RIGHTS PERTAIN TO EVERYBODY

**4. Please tell us how you are going to involve these people in the project**

REFURBISHED POLICY HAS BEEN REVIEWED & APPROVED BY THE HR FORUM, THE PFPI COMMITTEE & REPRESENTATIVES OF GROUPS WHO MAKE UP THE DIVERSITY & EQUALITY STEERING GROUP MEMBERSHIP. THE POLICY ALSO WENT ON THE PUBLIC CONSULTATIONS SECTION OF THE NHS WI PUBLIC WEBSITE.

## **Section 2 Protected Characteristics**

**Read the following, as these are about the people or groups of people whose rights are specifically protected under the 2010 Equalities Act. This page gives you information on each of the nine protected characteristics.**

### **1. Age**

Where this is referred to, it refers to a person belonging to a particular age (e.g. 32 year olds) or range of ages (e.g. 18-30 year olds, 65-80 year olds)

**How will these groups be affected?**

THERE WILL BE NO ADVERSE AFFECTS

### **2. Disability**

A person has a disability if s/he has a physical or mental impairment which has a substantial and long term adverse effect on that person's ability to carry out normal day to day activities.

**How will this group be affected?**

THERE WILL BE NO ADVERSE AFFECTS

### **3. Gender Reassignment**

The process of transitioning from one gender to another.

**How will this group be affected?**

THERE WILL BE NO ADVERSE AFFECTS

#### 4. Marriage and Civil Partnership

Same-sex marriage has now been enshrined in legal statute, in England in March 2014 & in Scotland in December 2014 respectively. Therefore, both mixed-sex and same-sex couples can now marry in the eyes of the law, while respecting the freedom of religious bodies and celebrants not to perform these ceremonies. Couples in a civil partnership in England can now convert this into marriage in England, although this option is not yet available in Scotland. Civil partnership is not available to mixed-sex couples throughout the UK.

**How will this group be affected?**

THERE WILL BE NO ADVERSE AFFECTS

#### 5. Pregnancy and Maternity

Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth, and is linked to maternity leave in the employment context. Under the terms of the 2010 Equality Act, action can now be taken in the civil courts when a person has suffered a disadvantage because of unfair treatment because of pregnancy, breastfeeding or having given birth.

**How will this group be affected?**

THERE WILL BE NO ADVERSE AFFECTS

#### 6. Race

Refers to the protected characteristic of race. It refers to a group of people defined by their race, colour, and nationality (including citizenship) ethnic or national origins.

**How will this group be affected?**

THERE WILL BE NO ADVERSE AFFECTS

## 7. Religion and Belief

Religion is the term given to a collection of cultural belief systems based on narratives, traditions and symbols that give meaning to life and instill a moral framework of conduct. Belief includes religious and philosophical beliefs including lack of belief (e.g. atheism). Generally, a belief should affect your life choices for it to be included in the definition.

**Does your proposal discriminate or disadvantage any religious or non religious group?**

THERE WILL BE NO ADVERSE AFFECTS

## 8. Sex (Gender)

A man or a woman. (Male or female)

**Does your proposal discriminate between men and women, if so how and why?**

THERE WILL BE NO ADVERSE AFFECTS

## 9. Sexual Orientation

Whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes.

**How will this group be affected?**

THERE WILL BE NO ADVERSE AFFECTS

## 10. Negative Findings

If you have found negatives in the above assessments, how do you intend to deal with these, and why?

## **Section 3 Human Rights**

**It is unlawful for a public authority to act in a way which is incompatible with a European Convention of human Rights requirements.**

**There are 15 protected rights which public authorities must ensure that they comply with in their policies, services and practices. Those listed below are the ones which can directly be affected by Healthcare provision.**

- The right to life – protects your life, by law. The state is required to investigate suspicious deaths and deaths in custody.

**Does your proposal affect this right?**  
THE REFURBISHED POLICY PROTECTS THIS RIGHT

- The prohibition of torture and inhuman treatment – you should never be tortured or treated in an inhuman or degrading way, no matter what the situation.

**Does your proposal affect this right?**  
THE REFURBISHED POLICY PROTECTS THIS RIGHT

- The right to liberty and freedom – you have the right to be free and the state can only imprison you with very good reason – for example, if you are convicted of a crime.

**Does your proposal affect this right?**  
THE REFURBISHED POLICY PROTECTS THIS RIGHT

- The right to a fair trial and no punishment without law – you are innocent until proven guilty. If accused of a crime, you have the right to hear the evidence against you, in a court of law.

**Does this proposal affect this right?**  
THE REFURBISHED POLICY PROTECTS THIS RIGHT

- Respect for privacy and family life and the right to marry - protects against unnecessary surveillance or intrusion into your life. You have the right to marry and raise a family.

**Does this proposal affect this right?**  
THE REFURBISHED POLICY PROTECTS THIS RIGHT

- Freedom of thought, religion and belief – you can believe what you like and practice your religion or beliefs, so long as this does not harm others.

**Does your proposal affect this right?**  
THE REFURBISHED POLICY PROTECTS THIS RIGHT

- No discrimination – everyone’s rights are equal. You should not be treated unfairly – because, for example, of your gender, race, sexuality, religion or age.

**Does your proposal affect this right?**  
THE REFURBISHED POLICY PROTECTS THIS RIGHT

**Equality Leads Use**

**Received for review:** 03/03/2017

**Checked by:** REV T K SHADAKSHARI & MR MURDO MACLEOD

**Owner of Fairness Assessment:** REV T K SHADAKSHARI

**Comments and recommendations:**

**Signed:** ...  .....  
.....03/03/2017..... **Date:** .....

**By Strategic Diversity Lead**