

Equality Analysis

(Health Inequalities, Human Rights, Social Value)

Working Time Directive Policy

Before completing this equality analysis it is recommended that you:

- ✓ Contact your equality and diversity lead for advice and support
- ✓ Take time to read the accompanying policy and guidance document on how to complete an equality analysis

1. Background

EA Title	Working Time Directive Policy		
EA Author	Michelle Dunne	Team	Equality Diversity & Inclusion
Date Started	12 th November 2018	Date Completed	7 th January 2019
EA Version	V0.1	Reviewed by E&D	7 th January 2019
What are the intended outcomes of this work? Include outline of objectives and function aims			
<p>The Working Time Directive Regulation 1998 implemented the European Working Time Directive into GB law.</p> <p>The regulations are intended to support the health and safety of employees by setting minimum requirements in relation to weekly working hours, rest periods and annual leave.</p> <p>The Regulation also widens the definition of a “worker” and gives right to employees including temporary workers (Agency Workers). There are also specific provisions within the regulations that govern workers who are over the minimum school leaving age but under 18.</p> <p>The purpose of this policy is to provide information and guidance in the implementation of the working time regulations (WTR) and set out the responsibilities of the CCG, line managers, Occupational Health and employees in meeting the requirements of the Regulations.</p> <p>The CCG is legally obliged to comply with the terms laid down in the Regulations and elements within the WTR are enforceable by Health and Safety Executive (HSE).</p> <p>The CCG is committed to the health and safety of its employees and acknowledges its obligations within the WTR. The CCG strives to provide a safe working environment and to ensure the safety and wellbeing of all its workers.</p> <p>The CCG seeks to ensure that individuals do not exceed reasonable working hours to provide for a satisfactory balance between work and personnel life. The CCG is also committed to ensuring that an individual’s health is not compromised by the workplace.</p> <p>Managers have a responsibility to ensure that working hours are kept within reasonable limits and will monitor working hours for this purpose. Individuals themselves also have a duty to ensure that they are not working excessive hours and inform their line manager directly if they consider that they may be doing so.</p> <p>The European Working Time Regulations set down entitlements of employees to maximum working hours; rest periods, rest breaks whilst at work, annual leave and working arrangements for night workers.</p>			
Who will be affected by this work? e.g. staff, patients, service users, partner organisations etc.			

The policy applies to all CCG employees and any temporary staff whilst they are working for the CCG.

2. Research

What evidence have you identified and considered? This can include national research, surveys, reports, NICE guidelines, focus groups, pilot activity evaluations, clinical experts or working groups, JSNA or other equality analyses.

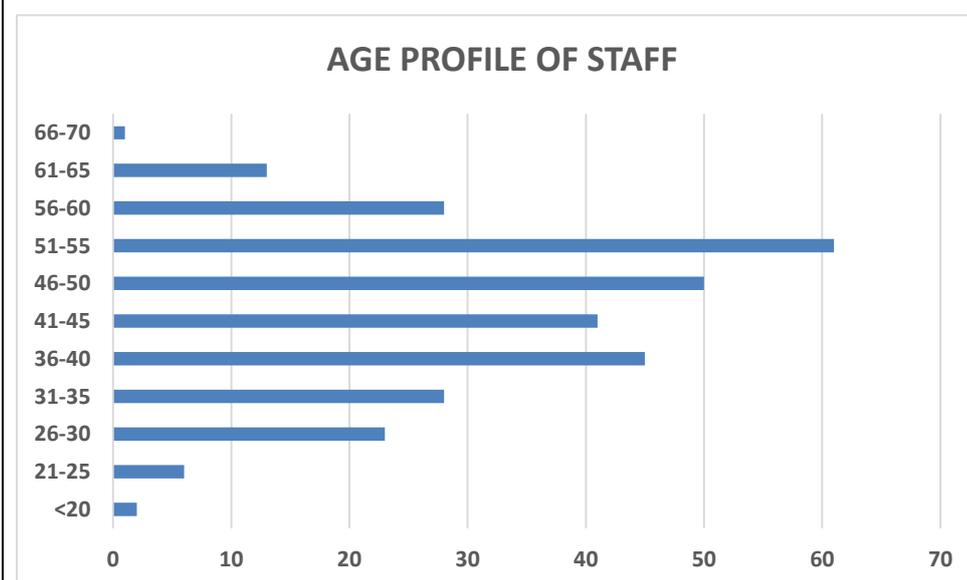
Research/Publications	Working Groups	Clinical Experts
ACAS – working time regulations	Staff Council	
NHS Agenda for Change Handbook	JNCC	

3. Impact and Evidence:

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

Age: Describe age related impact and evidence. This can include safeguarding, consent and welfare issues:

CCG Staff Profile

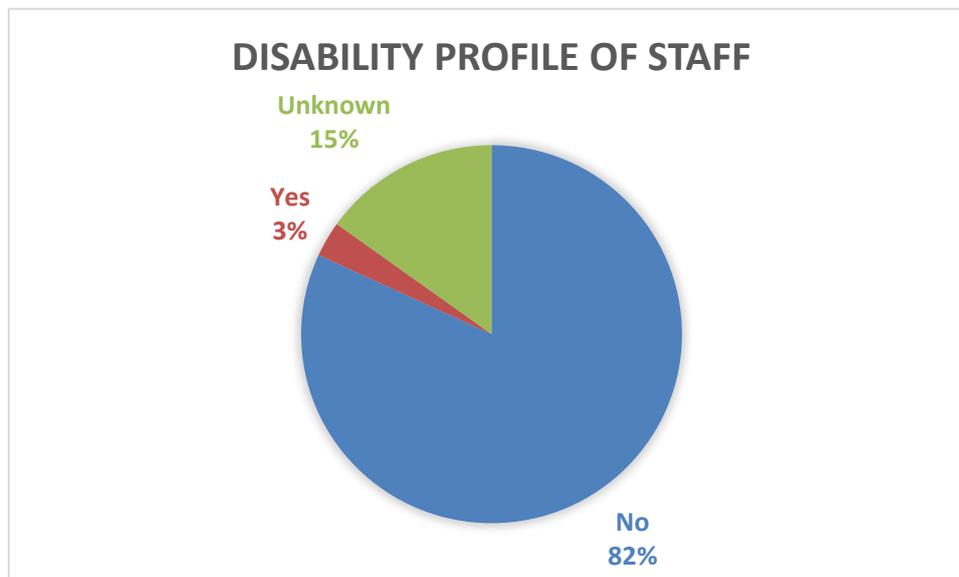


No negative impacts identified in relation to this policy and staff age profile.

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:

3. Impact and Evidence:

CCG Staff Profile



No negative impacts identified in relation to this policy and staff disability profile.

Gender reassignment (including transgender): Describe any impact and evidence on transgender people. This can include issues such as privacy of data and harassment:

No negative impacts identified in relation to gender reassignment.

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:

CCG Staff Profile

The marital status is known for 96% of the CCG workforce.

No negative impacts identified in relation to this policy and marriage and civil partnerships.

Pregnancy and maternity: Describe any impact and evidence on pregnancy and maternity. This can include working arrangements, part-time working, and caring responsibilities:

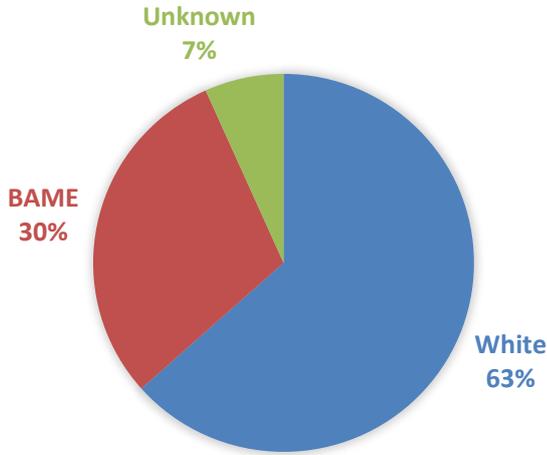
No negative impacts identified in relation to this policy and pregnancy and maternity.

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

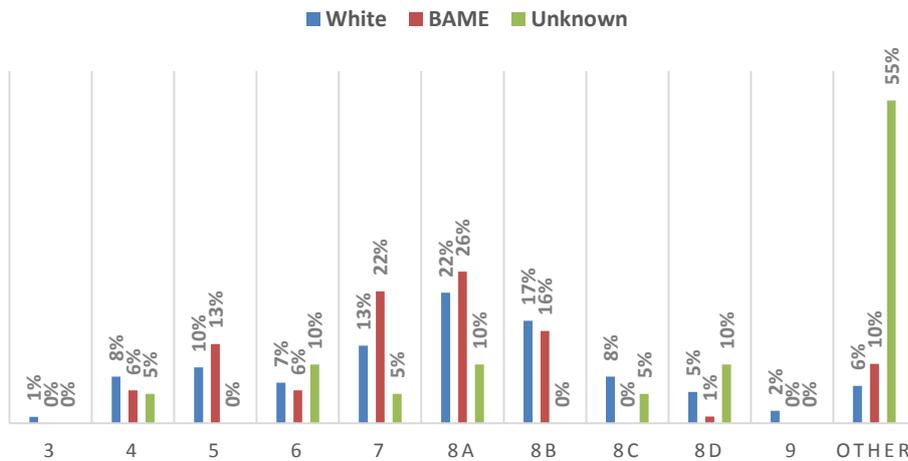
CCG Staff Profile

3. Impact and Evidence:

RACE PROFILE OF STAFF



PAY BAND BY RACE (%)



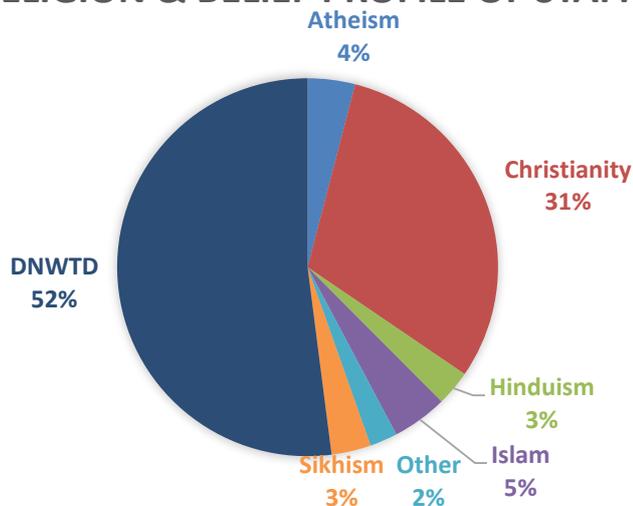
No negative impacts identified in relation to this policy and staff race profile.

Religion or belief: Describe any religion, belief or no belief impact and evidence. This can include dietary needs, consent and end of life issues:

CCG Staff Profile

3. Impact and Evidence:

RELIGION & BELIEF PROFILE OF STAFF

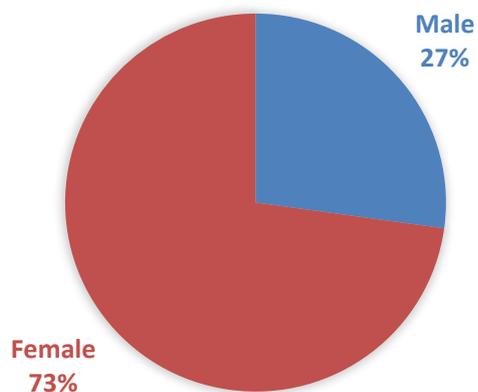


No negative impacts identified in relation to this policy and staff religion/belief profile.

Sex: Describe any impact and evidence on men and women. This could include access to services and employment:

CCG Staff Profile

STAFF GENDER PROFILE



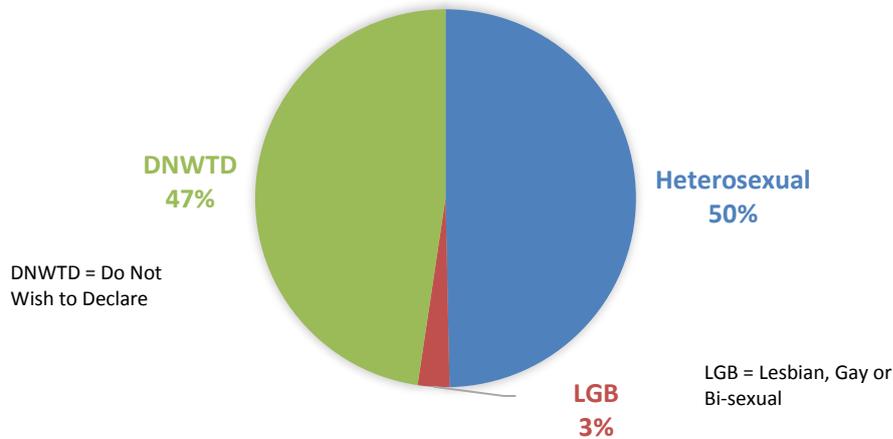
No negative impacts identified in relation to this policy and staff gender profile.

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

CCG Staff Profile

3. Impact and Evidence:

SEXUAL ORIENTATION PROFILE OF STAFF



No negative impacts identified in relation to this policy and staff sexual orientation profile.

Carers: Describe any impact and evidence on part-time working, shift-patterns, general caring responsibilities:

No negative impacts identified.

Other disadvantaged groups: Describe any impact and evidence on groups experiencing disadvantage and barriers to access and outcomes. This can include lower socio-economic status, resident status (migrants, asylum seekers), homeless, looked after children, single parent households, victims of domestic abuse, victims of drugs / alcohol abuse: (This list is not exhaustive)

No negative impacts identified.

4. Health Inequalities	Yes/No	Evidence
Could health inequalities be created or persist by the proposals?	N/A	
Is there any impact for groups or communities living in particular geographical areas?	N/A	
Is there any impact for groups or communities affected by unemployment, lower educational attainment, low income, or poor access to green spaces?	N/A	
How will you ensure the proposals reduce health inequalities?		
This is a staff employment policy which is unlikely to impact on health inequalities.		

5. FREDA Principles/ Human Rights	Question	Response
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Fairness – Fair and equal access to services	How will this respect a person's entitlement to access this service?	Policy is applicable to all staff.
Respect – right to have private and family life respected	How will the person's right to respect for private and family life, confidentiality and consent be upheld?	Policy does not negatively impact on respect.
Equality – right not to be discriminated against based on your protected characteristics	How will this process ensure that people are not discriminated against and have their needs met and identified?	All CCG staff are within the scope of this policy. Policy contains a clear equality statement.
	How will this affect a person's right to freedom of thought, conscience and religion?	Policy does not impact on individuals right to freedom of thought, conscience or religion.
Dignity – the right not to be treated in a degrading way	How will you ensure that individuals are not being treated in an inhuman or degrading way?	No impact identified.
Autonomy – right to respect for private & family life; being able to make informed decisions and choices	How will individuals have the opportunity to be involved in discussions and decisions about their own healthcare?	Policy is not concerned with healthcare decision making.
Right to Life	Will or could it affect someone's right to life? How?	Not applicable.
Right to Liberty	Will or could someone be deprived of their liberty? How?	Not applicable.

6. Social Value	
Consider how you might use the opportunity to improve health and reduce health inequalities and so achieve wider public benefits, through action on the social determinants of health.	
Marmot Policy Objective	What actions are you able to build into the procurement activity and/or contract to achieve wider public benefits?
Enable all people to have control over their lives and maximise their capabilities	No procurement activity.
Create fair employment and good work for all	Policy implements fair employment conditions for all.
Create and develop health and sustainable places and communities	Not applicable
Strengthen the role and impact of ill-health prevention	Not applicable

7. Engagement, Involvement and Consultation
If relevant, please state what engagement activity has been undertaken and the date and with which protected groups:

Engagement Activity	Protected Characteristic/ Group/ Community	Date
Staff Council	Representative of all CCG staff	November 2018
For each engagement activity, please state the key feedback and how this will shape policy / service decisions (E.g. patient told us So we will):		
No equality related concerns raised via staff council in relation to this policy.		

8. Summary of Analysis
Considering the evidence and engagement activity you listed above, please summarise the impact of your work:
<p>No negative equality impacts identified in evaluation of this policy.</p> <p>The policy is intended to support the health and safety of employees by setting minimum requirements in relation to weekly working hours, rest periods and annual leave. The CCG seeks to ensure that individuals do not exceed reasonable working hours to provide for a satisfactory balance between work and personal life. The CCG is also committed to ensuring that an individual's health is not compromised by the workplace.</p> <p>Managers have a responsibility to ensure that working hours are kept within reasonable limits and will monitor working hours for this purpose. Individuals themselves also have a duty to ensure that they are not working excessive hours and inform their line manager directly if they consider that they may be doing so.</p>

9. Mitigations and Changes :
Please give an outline of what you are going to do, based on the gaps, challenges and opportunities you have identified in the summary of analysis section. This might include action(s) to mitigate against any actual or potential adverse impacts, reduce health inequalities, or promote social value. Identify the recommendations and any changes to the proposal arising from the equality analysis.
<p>Recommendation:</p> <p>The equality statement within the policy, is not the corporate BSol CCG statement agreed for inclusion in all policies; it needs to be replaced with the following:</p> <p>3. Equality Statement</p> <p>3.1 The general equality duty requires public authorities (such as the CCG) to have due regard to the aims of the general equality duty when making decisions and setting policies. To do this, it is necessary for the organisation to understand the potential impact of its decision making on different people. This can help to identify practical steps to tackle any negative impacts or discrimination, and to advance equality.</p> <p>3.2 The CCG endeavours to challenge discrimination, promote equality and respect human rights and aims to design and implement policies, services and measures that meet the diverse needs of our population, patients and workforce, ensuring that non are placed at a disadvantage.</p>

The policy also needs to make reference to the equality analysis, using this standard statement which forms part of the template policy form:

4. Equality Analysis

4.1 The CCG undertakes an Equality Analysis of policies, strategies, service design and other relevant activities to assess the impact of decision making against:

- The nine protected characteristics (age, disability, ethnic origin, sex, sexual orientation, gender reassignment, religion and belief, marriage or civil partnership, pregnancy or maternity status);
- Other groups or communities known to suffer disadvantage, such as the homeless, carers, migrants and sex workers;
- Human Rights
- Known health inequalities.

This analysis also explores the potential to support the Social Value Act.

4.2 An equality analysis of this policy was undertaken on xxxx and is attached as an Appendix to this policy.

10. Publication

How will you share the findings of the Equality Analysis?

This can include: reports into committee or Governing Body, feedback to stakeholders including patients and the public, publication on the web pages. All Equality Analysis should be recommended for publication unless they are deemed to contain sensitive information.

Policy to be ratified by Senior Leadership Team on 11th January 2019.

Equality Analysis will be published on the CCG webpages following organisational approval.

Following ratification all finalised Equality Analysis should be sent to the Communications and Engagement team for publication: bsol.comms@nhs.net

11. Sign Off

The Equality Analysis will need to go through a process of **quality assurance** by the Senior Manager for Equality and Diversity, Senior Manager for Assurance and Compliance or Equality and Human Rights Manager **and** signed-off by a delegated committee

	Name	Date
Quality Assured By:	<i>M K Dunne</i>	7 th January 2019

Which Committee will be considering the findings and signing off the EA?	Senior Leadership Team	11 th January 2019
Minute number (to be inserted following presentation to committee)		

Please send to Balvinder Everitt or Michelle Dunne, Equality, Diversity and Inclusion for Quality Assurance.

Once you have committee sign off, please send to Caroline Higgs, Communications & Engagement Team for publication: bsol.comms@nhs.net