

EQUALITY IMPACT ASSESSMENT

This is a legal document stating you have fully considered the impact on the protected characteristics and is open to scrutiny by service users/external partners/Equality and Human Rights Commission

If you require advice on the completion of this EQIA, contact elaine.savory@aapct.scot.nhs.uk

‘Policy’ is used as a generic term covering policies, strategies, functions, service changes, guidance documents, other

Name of Policy	Workforce Plan 2022-2025		
Names and role of Review Team:	Craig Lean – Workforce Modernisation Manager Elaine Savory – Equality & Diversity Adviser	Date(s) of assessment:	15 th September 2022
SECTION ONE AIMS OF THE POLICY			
1.1. Is this a new or existing Policy : New			
Please state which: Policy <input type="checkbox"/> Strategy <input type="checkbox"/> Function <input type="checkbox"/> Service Change <input type="checkbox"/> Guidance <input type="checkbox"/> Other <input checked="" type="checkbox"/>			
1.2 What is the scope of this EQIA?			
NHS A&A wide <input checked="" type="checkbox"/> Service specific <input type="checkbox"/> Discipline specific <input type="checkbox"/> Other (please detail) _____			
1.3a. What is the aim?			
To ensure we have the right staff, in the right place with the right skills and competences to provide high quality and safe services to the population of Ayrshire and Arran.			
1.3b. What is the objectives?			
Our objectives relate to our ability to Attract, Develop, Support and Retain our workforce through:			
<ul style="list-style-type: none"> • Improve supply of registrant clinical staff (Attract) 			

- Introduce new complementary roles / support development of existing staff (Retain)
- Deliver the ambitions of our Employability Strategy (Develop)
- Support the health and wellbeing of our staff (Support)

1.3c. What is the intended outcomes?

The intended outcomes are:

- Improvements in patient safety and outcomes and quality of care provided within services through ensuring the right number, with the right skills and competences are delivering services in the right place at the right time (Attract)
- NHS A&A seen as an employer of choice offering our employees support and development to maximise their career potential (Retain)
- Fulfilling our organisational ambition and obligations for the population of Ayrshire: Anchor Employer, Fair Work; and Community planning & wealth building (Develop)
- Staff feel supported in work and have access to and make use of wellbeing supports available as well as using their annual leave for rest and recuperation (Support)

1.4. Who are the stakeholders?

All current and prospective potential staff are impacted by the Workforce Plan. From a governance viewpoint the Area Partnership Forum (APF), Corporate Management Team (CMT) and Staff Governance Committee (SGC) are key stakeholders.

1.5. How have the stakeholders been involved in the development of this policy?

Consultation on the draft plan has taken place with the APF, CMT and SGC.

1.6 Examination of Available Data and Consultation - Data could include: consultations, surveys, databases, focus groups, in-depth interviews, pilot projects, reviews of complaints made, user feedback, academic or professional publications, reports etc)

Producing a workforce plan is mandated legislative requirement from Scottish Government to all NHS Boards as set out in DL2022(09) and links directly to the National Health & Social Care Workforce Strategy.

Name any experts or relevant groups / bodies you should approach (or have approached) to explore their views on the issues.

As per question 1.5 there has been engagement with relevant stakeholder groups which encompasses input from staff side and professional leads. Feedback has also been provided from the Scottish Government Health & Social Care Directorates.

What do we know from existing in-house quantitative and qualitative data, research, consultations, focus groups and analysis?

Feedback arising from stakeholder engagement has been incorporated within the plan as it has iteratively developed.

We are also cognisant of the current skills gap and vacancies to fill substantive posts within, not only NHS Ayrshire & Arran, but the NHS as a whole in Scotland.

What do we know from existing external quantitative and qualitative data, research, consultations, focus groups and analysis?

Feedback has also been provided from the Scottish Government Health & Social Care Directorates on the Workforce Plan and as aforementioned there is direct linkage to the national workforce strategy.

As mentioned above we are aware that filling vacancies across a number of disciplines is a national issue and work to look further afield is necessary.

1.7. What resource implications are linked to this policy?

There are financial implications arising from the plan, both in terms of best value in spend, i.e. reducing reliance on high cost agency expenditure, but also in terms of investment e.g. projected workforce for the new Ayrshire National Treatment Centre, introduction of apprenticeship roles etc.

SECTION TWO	IMPACT ASSESSMENT
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Complete the following table, giving reasons or comments where:

The Programme could have a positive impact by contributing to the general duty by –

- Eliminating unlawful discrimination
- Promoting equal opportunities
- Promoting relations within the equality group

The Programme could have an adverse impact by disadvantaging any of the equality groups. Particular attention should be given to unlawful direct and indirect discrimination.

If any potential impact on any of these groups has been identified, please give details - including if impact is anticipated to be positive or negative.

If negative impacts are identified, the action plan template in Appendix C must be completed.

Equality Target Groups – please note, this could also refer to staff

	Positive impact	Adverse impact	Neutral impact	Reason or comment for impact rating
2.1. Age <ul style="list-style-type: none"> • Children and young people • Adults • Older People 	X X X			<p>There is a positive impact across all age groups. For children and young people we recognise the value and need to engage with schools to promote the breadth of careers within the NHS. Within our employability schemes we are seeking to diversify the age makeup of our workforce positively, encouraging young people to commence careers within the NHS.</p> <p>We are also acutely aware that some members of the workforce may wish / need to work longer and the organisation will look to positively support them to remain well in work as well as offering flexibility of working, as evidenced in the plan there is a large proportion of part time contracts utilised within the workforce. Equally we will implement the NHSScotland retire and return policy which provides opportunity for individuals to keep working longer should they wish.</p>

2.2. Disability (incl. physical/ sensory problems, learning difficulties, communication needs; cognitive impairment, mental health)	X			<p>Our actions around 'Support' positively impact in ensuring the health and wellbeing of our staff. NHS Ayrshire & Arran recognise the importance of making reasonable adjustments to support those with a disability to remain in the workplace. To this end we continue to be part of the Disability Confident programme.</p> <p>We also recognise the stresses the pandemic has placed upon our staff particularly from a mental health perspective and are seeking to address this given this is our most prevalent reason for absence accounting for approximately a third of all sick leave.</p> <p>Our employability programme supports individuals with a disability through Project Search. We will establish a Disability Forum for staff during 2022.</p>
2.3. Gender Reassignment			X	<p>Someone transitioning has no impact on the workforce plan. NHS Ayrshire & Arran are supportive of individuals who transition and have wider guidance and support in place for this.</p>
2.4 Marriage and Civil partnership			X	<p>The workforce plan no impact on marriage and civil partnership status.</p>
2.5 Pregnancy and Maternity			X	<p>Although not directly referenced in the plan there are existing policies and processes for all staff in relation to both maternity and paternity leave.</p>
2.6 Race/Ethnicity	X			<p>The plan distinctly references our ambition to have a more diverse workforce given only 2.4% of our workforce are from black and ethnic minority groups. Our work around international recruitment will be assistive in meeting this ambition.</p> <p>NHS Ayrshire & Arran support all members of staff and in 2021 an Ethnic Minority Staff Network was established to ensure peer support but also opportunities to influence policy and practice.</p>
2.7 Religion/Faith			X	<p>A person's religion, belief or faith has no impact on the workforce plan. NHS Ayrshire & Arran provide chaplaincy facilities which support individual needs across many religions.</p>

2.8 Sex (male/female)	X			The plan sets out gender analysis within our workforce. We recognise the need to breakdown stereotypical gender 'norms' aligned with some professions and this links closely with our work in engaging with schools.
2.9 Sexual Orientation <ul style="list-style-type: none"> • Lesbians • Gay men • Bisexuals 			X X X	The workforce plan itself does not allude to the diversity of our staff by sexual orientation, however, NHS Ayrshire & Arran support all members of staff and in 2022 an LGBT+ Staff Network was established to ensure peer support but also opportunities to influence policy and practice.
2.10 Carers			X	The range of existing flexible working policies are assistive for employees being able to meet their caring requirements.
2.10 Homeless			X	An individual's accommodation status will not impact on the workforce plan, however, NHS Ayrshire & Arran are able to signpost individuals to sources of support where necessary.
2.12 Involved in criminal justice system	X			Our employability plans seek to encompass opportunities for those involved in criminal justice system.
2.13 Literacy			X	The workforce plan itself does not allude to the literacy of our staff, however, NHS Ayrshire & Arran are able to signpost individuals to sources of support where necessary.
2.14 Rural Areas			X	Distributed working and greater use of technology are intended to address some of the issues associated with rurality.

2.15 Staff				The premise of the entire plan, as set out in the answers to questions 1.3a,b,c, is entirely predicated on positively improving these factors to ensure that we have the right workforce in the right place with the right skills and competences.
• Working conditions	X			
• Knowledge, skills and learning required	X			
• Location	X			
• Any other relevant factors	X			

2.16. What is the socio-economic impact of this policy / service change? (The [Fairer Scotland Duty](#) places responsibility on Health Boards to actively consider how they can reduce inequalities of outcomes caused by socio-economic disadvantage when making strategic decisions)

	Positive	Adverse	Neutral	Rationale/Evidence
Low income / poverty	X			As an Anchor organisation, paying the living wage, contributing to community wealth building and through seeking to support people into employment there are positive impacts across these domains.
Living in deprived areas	X			
Living in deprived communities of interest	X			
Employment (paid or unpaid)	X			

SECTION THREE CROSSCUTTING ISSUES

What impact will the proposal have on lifestyles? For example, will the changes affect:

	Positive impact	Adverse impact	No impact	Reason or comment for impact rating
3.1 Diet and nutrition?			X	The workforce plan does not reference support with diet and nutrition.

3.2 Exercise and physical activity?	X			Through our 'Support' activities we recognise the importance of our staff health and wellbeing. The development of our Staff Wellbeing Hubs and their associated services and exiting services such as occupational health, will positively impact on these domains.
3.3 Substance use: tobacco, alcohol or drugs?	X			
3.4 Risk taking behaviour?			X	Whilst the workforce plan does not reference risk taking behaviour directly, NHS Ayrshire & Arran are able to signpost individuals to sources of support where necessary

SECTION FOUR CROSSCUTTING ISSUES				
Will the proposal have an impact on the physical environment? For example, will there be impacts on:				
	Positive impact	Adverse impact	No impact	Reason or comment for impact rating
4.1 Living conditions?			X	The workforce plan will have no impact on individual's living conditions.
4.2 Working conditions?	X			Our work on developing distributed working and utilising technology more effectively, as prompted by the pandemic, enables our staff, where possible and appropriate to their role, to work more flexibly between office and home. The need to travel between sites for face to face meetings has substantially reduced road use through using technology.
4.3 Pollution or climate change?	X			
Will the proposal affect access to and experience of services? For example:				
	Positive impact	Adverse impact	No impact	Reason or comment for impact rating
Health care	X			By having the right staff in the right place with the right skills and competences we are able to ensure we can provide high quality services that support the best possible outcomes for patients.

Social Services			X	The workforce plan will have no impact on Social Services.
Education			X	As aforementioned we will engage with schools and will continue to work collaboratively with Further and Higher Education Institutes on local and regional basis.
Transport			X	The workforce plan will have no impact on Transport Services.
Housing			X	The workforce plan will have no impact on Housing Services.

SECTION FIVE	MONITORING
How will the outcomes be monitored?	
The 'We will' commitments within the plan will be monitored over the life span of the plan. Our priority action areas defined in the driver diagram in the plan will be encompassed within Scottish Government reporting of our Annual Delivery Plan.	
What monitoring arrangements are in place?	
Monitoring will take place via the Workforce Planning & Improvement Group chaired by the HR Director	
Who will monitor?	
The Workforce Modernisation Manager will have responsibility for monitoring.	
What criteria will you use to measure progress towards the outcomes?	
There will be a mix of qualitative and quantitative measures used to monitor progress towards outcomes.	
PUBLICATION	
Public bodies covered by equalities legislation must be able to show that they have paid due regard to meeting the Public Sector Equality Duty (PSED). This should be set out clearly and accessibly, and signed off by an appropriate member of the organisation.	
Once completed, send this completed EQIA to the Equality & Diversity Adviser	

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Authorised by

Sarah Leslie

Title

HR Director

Signature

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Date

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