

## EQUALITY IMPACT ASSESSMENT FORM

### 1. Policy Information

<p><b>Date of Assessment:</b> 18/7/2011</p> <p><b>Name of Document/Service to be assessed:</b> <i>Incremental Pay Progression</i></p> <p><b>Version No:</b> 1</p> <p><b>Is this a new or revised document/service?</b> <i>Revision of A4C conditions</i></p>	<p><b>Title of policy holder/person responsible for policy:</b> Director of HR &amp; Governance</p> <p><b>Contact Telephone:</b> 01392 261504</p> <p><b>Directorate and service area(s):</b> HR &amp; Governance</p> <p><b>Name and/or title of individual(s) or Group completing assessment:</b> Directors &amp; JNCC / PPPG</p>
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### 2. Assess the impact on equality

Equality Group	POS/NEG/NEU Impact*	Explain reasons for impact	Actions	Date for Completion	Lead
Age	NEU				
Disability	NEG	Incremental progression freeze due to sickness absence could be due to disability.	Where absence relates to an ongoing underlying health condition it may be a reasonable adjustment under DDA to consider progression.	1/9/2011	Sue Steen
Religion or Belief	NEU				
Gender	NEU				
Transgender	NEU				
Race/ethnicity	NEU				
Sexual Orientation	NEU				
Human Rights	NEU				
Deprivation	NEU				
General	POS	Progression will recognise satisfactory performance	This policy application reinforces pay progression as a benefit in return for	1/9/2011	Sue Steen

		and offers an incentive to staff to perform within the requirements of the post employed. It also recognises and relates underperformance in a way which is objective and can be justified and monitored.	performance and is not a 'time served' entitlement that is not linked in any way to performance, effort or commitment.		
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- \***Positive impact** means promoting equal opportunities or improving relations within equality groups
- \***Negative impact** means that an equality group(s) could be disadvantaged or discriminated against
- \***Neutral impact** means that it has no effect currently on equality groups

### 3. Consider alternatives

- a) **No significant disproportional negative impact identified, policyholder to implement Actions in 2\***
- b) **Significant disproportional negative impact identified, policyholder to complete 4 to 9\***

*\*Delete as appropriate*

**Print Name: SUE STEEN** ..... **Date: 18 JULY 2011** .....

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### 4. Identify the aims, objectives and outcomes of the document / service

#### 4.1 Provide a summary of the aims and objectives:

The provisions of this proposal seek to implement provisions contained within A4C to withhold incremental progression on the grounds of satisfactory performance. This includes those staff that are:

- i) On formal warnings under the Trust's disciplinary policy
- ii) On formal monitoring or warnings under the Trust's sickness policy (subject to consideration of underlying medical conditions that may be considered as a reasonable adjustment under DDA to authorise incremental progression.
- iii) On formal process of capability management.

In terms of impact the following disciplinary figures are provided for 2010/11

Of the 28 formal warnings in this year 23 were given to male employees (82%) and 5 were given to female employees (18%).

This is from a workforce where overall 61% are male and 39% are female. This would indicate a higher than average number of male employees are subject to disciplinary warnings. If it can be assumed that the majority of disciplinary matters involve clinical front line staff the breakdown is:

ECP's – 79% male 21% female  
Paramedics – 76% male 24% female  
Technicians – 64% male 36% female

In these three groups male employees are significantly over represented.

**In a total workforce of approximately 2414 staff this policy would have affected 0.95% of the total staff (4 staff were dismissed and 1 resigned so would not have been included).**

In relation to formal sickness interventions there were 119 formal monitoring / warnings and dismissals due to sickness absence. Of these 61% were male employees and 33% female employees. This indicates a gender split that is more reflective of the gender balance across the whole Trust.

**In a total workforce of approximately 2414 staff this policy would have affected 4.72% of the total staff, some of which may not have been affected following consideration of the DDA and reasonable adjustments, also 5 of these staff were dismissed for reasons of ill health so have been excluded.**

These proposals further support a culture of performance, high quality clinical care and professionalism amongst the significant majority of the Trust's staff. This proposal should be seen as a motivator to the 99.05% of staff who are not subject to a formal disciplinary warning. It also recognises attendance as a key indicator of providing quality patient care and satisfactory employment, this would support the majority of staff who render satisfactory attendance which would cover 95.28% of staff who are not subject to formal intervention regarding attendance levels.

4.2 What are the intended outcomes of the document /service?

To appropriately reward and motivate performance, whilst applying the provisions of the A4C conditions of service which does not accept poor performance and pay progression applying at the same time.

4.3 How will you measure the outcomes?

The application of pay increment freeze will apply at the point of applying a sanction and any application for DDA to be considered as a reasonable adjustment will be authorised by the Director of HR & Governance to ensure that its application is consistent and free from bias.

4.4 Who is intended to benefit?

The majority of staff within the Trust who provide performance which supports the provision of high quality reliable clinical care (this includes front line and support services).

## **5. Gather and consider available information and data**

**It is important to have as much up to date data and reliable information as possible about the different groups the document/service is likely to or does affect.**

What relevant information and data has been considered?

See workforce data above which demonstrates the impact of this provision.

## **6. Involvement and further consultation of relevant advisors or groups, if appropriate (*Link with Public Relations & Strategic Comms Manager*)**

6.1 Have you consulted on the document/service?

Yes

6.2 If yes, please state which individuals and organisations were consulted.

Recognised staff side representatives at the following meetings:

JNCC 30<sup>th</sup> March 2011

## **7. Decide whether to adopt the Document/Service**

Do you intend to reject, implement or amend the document/service? Please state which & why

## **8. Equality Action Plan (to include progress)**

Please see Appendix A - action plan template

## **9. Reporting results**

- Keep one copy
- Send one electronic copy to the Equality and Diversity Lead for publishing on the website

Print Name(s): SUE STEEN ..... Date of completion: 18 JULY 2011 ..  
(Policyholder)

**Please return the completed form and action plan to the Equality & Diversity Lead by completion date.**

Appendix A – Action Plan

<b>Action</b>	<b>Responsibility</b>	<b>Outcome</b>	<b>Target Date</b>	<b>Progress</b>	<b>Completion Date</b>