

## RECRUITMENT AND RETENTION PREMIA POLICY

October 2014

|                                   |  |
|-----------------------------------|--|
| Authorship:                       | CSU Transition HR Policy Lead- adapted for local use by Yorkshire and Humber Commissioning Support on behalf NHS North Lincolnshire CCG. |
| Committee Approved:               | Governing Body + JTUPF   |
| Approved date:                    |  |
| Review Date:                      |  |
| Equality Impact Assessment        | Completed - Full/Completed - Screening <i>[delete as required]</i>   |
| Sustainability Impact Assessment: | Completed  |
| Target Audience:                  | All Staff  |
| Policy Reference No:              |    |
| Version Number:                   |  |

The on-line version is the only version that is maintained. Any printed copies should, therefore, be viewed as 'uncontrolled' and as such may not necessarily contain the latest updates and amendments.

## POLICY AMENDMENTS

Amendments to the Policy will be issued from time to time. A new amendment history will be issued with each change.

| <b>New Version Number</b> | <b>Issued by</b> | <b>Nature of Amendment</b> | <b>Approved by &amp; Date</b> | <b>Date on Intranet</b> |
|---------------------------|------------------|----------------------------|-------------------------------|-------------------------|
| DRAFT                     | NLCCG            | Draft Policy for CCG       |                               |                         |
|                           |                  |                            |                               |                         |
|                           |                  |                            |                               |                         |
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## **1 INTRODUCTION**

- 1.1 This document outlines the policy and procedure utilised by North Lincolnshire Clinical Commissioning Group (the CCG) for awarding recruitment and retention premia.
- 1.2 This policy recognises the need for consistency, equity and fairness to be maintained at both local and national levels.

## **2 ENGAGEMENT**

- o Joint Trade Union Partnership Forum
- o NLCCG staff via staff communication

## **3 IMPACT ANALYSES**

### **3.1 Equality**

In applying this policy, the CCG will have due regard to the need to eliminate unlawful discrimination, promote equality of opportunity, and provide for good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010); age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation, in addition to offending background, trade union membership, or any other personal characteristic.

As a result of performing the analysis, the policy, project or function does not appear to have any adverse effects on people who share *Protected Characteristics* and no further actions are recommended at this stage. An Equality Impact Assessment is attached at Appendix 1.

### **3.2 Sustainability**

A Sustainability Impact Assessment has been completed for this policy and is attached at Appendix 2.

### **3.3 Bribery Act 2010**

The Bribery Act is particularly relevant to this policy. Under the Bribery Act it is a criminal offence to:

- Bribe another person by offering, promising or giving a financial or other advantage to induce them to perform improperly a relevant function or activity, or as a reward for already having done so; and
- Be bribed by another person by requesting, agreeing to receive or accepting a financial or other advantage with the intention that a relevant function or activity would then be performed improperly, or as a reward for having already done so.

These offences can be committed directly or by and through a third person and other related policies and documentation (as detailed on the CCG intranet) when considering whether to offer or accept gifts and hospitality and/or other incentives.

Anyone with concerns or reasonably held suspicions about potentially fraudulent activity or practice should refer to the Local Anti-Fraud and Corruption Policy and contact the Local Counter Fraud Specialist

## **4 SCOPE**

- 4.1 This policy applies to the application of both local and national recruitment and retention premia for those staff on Agenda for Change terms and conditions.

## **5 POLICY PURPOSE & AIMS**

- 5.1 The aim of the Recruitment and Retention Premia Policy is to ensure that the CCG remunerates all of its employees at a level at which recruitment and retention difficulties will not be encountered. This policy should be read in conjunction with the NHS terms and conditions of service handbook.

## **6 DEFINITIONS**

- 6.1 Recruitment and Retention Premia (RRP) is an additional payment to the basic pay of an individual post or specific group of posts.
- 6.2 Recruitment and Retention Premia may be paid in circumstances “where market pressures would otherwise prevent the employer from being able to recruit staff to and retain staff in sufficient numbers for the posts concerned at the normal salary for a job of that weight”.
- 6.3 Recruitment and Retention Premia is a supplementary payment over and above the basic pay that the post holder receives by virtue of their position on their pay band, any high cost area supplements, or any payments for unsocial hours or on-call cover.
- 6.4 Recruitment and Retention Premia will apply to posts rather than to employees. Where an employee moves to a different post that does not attract a recruitment and retention premium, either within the same organisation or elsewhere in the NHS, their entitlement to any previous recruitment and retention premium will cease and pay protection will not apply.

### ***Short Term Premia***

- 6.5 Short-term Recruitment and Retention Premia will apply where the labour market conditions giving rise to recruitment and retention problems are expected to be short-term and where the need for the premium is expected to disappear or reduce in the foreseeable future. Short term premia will normally be applied for a period of no longer than two years. If it is expected that the premia payment will continue for more than two years, this should be considered under ‘Long Term Premia’ (6.7)
- 6.6 Short-term Recruitment and Retention Premia:
- may be awarded on a one-off basis or for a fixed-term;
  - will be regularly reviewed (not less than annually);
  - may be withdrawn, or have the value adjusted, subject to a notice period of six months; and
  - will not be pensionable, or count for purposes of overtime, unsocial hours payments or any other payments linked to basic pay.

### ***Long Term Premia***

- 6.7 Long-term Recruitment and Retention Premia will apply where the relevant labour market conditions are more deep-rooted and the need for the premium is not expected to vary significantly in the foreseeable future.

- 6.8 Long-term Recruitment and Retention Premia:
- will be awarded on a long-term basis;
  - will be regularly reviewed (not less than annually);
  - may be awarded to new staff at a different value to that which applies to existing staff;
  - may be withdrawn, or have the value adjusted, subject to a notice period of six months; and
  - will be pensionable, and will count for the purposes of overtime, unsocial hours payments and any other payments linked to basic pay.
- 6.9 Both long-term and short-term Recruitment and Retention Premia will be expressed as cash sums and will be separately identifiable from basic pay, any high cost area supplement, and any other component of pay.
- 6.10 Any locally awarded recruitment and retention premium for a given post shall not normally exceed 30% of basic salary. It will be the responsibility of the CCG to ensure that any premia awarded locally do not normally result in payments in excess of this amount. In the event that, following review and subject to a 6 month notice period the Recruitment and Retention Premia is withdrawn, pay protection arrangements will not apply.

## **7 PRINCIPLES**

- 7.1 A recruitment and retention premium may be awarded on either a short-term or long-term basis, determined by principles outlined in the following paragraphs.
- 7.2 The CCG may use premia in two main ways; either through recruitment; or through a requirement to retain staff; based on the job within a locality or through a market shortage or a specific skill set, both of these may be applied in a long or short term capacity.
- 7.3 Recruitment and retention premia will be considered in cases where it is proven that adjustments to non-pay benefits are unlikely to improve the situation and one or more of the following conditions apply:
- There are documented labour market shortages within a defined geographical area;
  - NHS employers locally have jointly agreed to pay supplements for designated posts and the CCG needs to remain competitive in the recruitment market for equivalent posts;
  - There is a competitive non-NHS labour market where salary survey data indicates that enhancements to Agenda for Change evaluated pay rates would be required to attract and retain staff;
  - Where there is consistent data showing high patterns of turnover, supported by exit interview data, indicating a direct link to dissatisfaction with pay levels.
- 7.4 However, if on the basis of paragraph 7.3 above, it is decided that the vacancy problem can be addressed most effectively only through payment of a recruitment and retention premium, consideration should be given to whether the problem is likely to be resolved in the foreseeable future (in which case any premium should be short-term) or whether it is likely to continue indefinitely (in which case any premium should be long-term).

- 7.5 Before consideration is given to payment of Recruitment and Retention Premia to ensure retention of staff, management will ensure non-pay benefits (e.g. training and development) are sufficiently developed.

## **8 ROLES / RESPONSIBILITIES / DUTIES**

- 8.1 To ensure consistency in the application of payment of Recruitment and Retention Premia across the CCG, the Line Manager should work with the Workforce Manager in applying the appropriate award.
- 8.2 The application for the award of recruitment and retention premia can only be approved at senior manager level.

## **9 IMPLEMENTATION**

- 9.1 This policy will be communicated to staff via team meetings/team brief and will be available for staff on the intranet.
- 9.2 Support will be provided to all Line Managers in the implementation and application of this policy.
- 9.3 Breaches of this policy may be investigated and may result in the matter being treated as a disciplinary offence under the CCGs disciplinary procedure.

## **10 TRAINING & AWARENESS**

- 10.1 A copy of the policy will be available on the CCG intranet and training needs will be identified via the appraisal process and training needs analysis.

## **11 MONITORING & AUDIT**

- 11.1 The implementation of this policy will be audited on an annual basis by the CCG and reported to CCG Governing Body.

## **12 POLICY REVIEW**

- 12.1 The policy and procedure will be reviewed after 3 years for the CCG Governing Body in conjunction with Trade Union representatives. Where review is necessary due to legislative change, this will happen immediately.

## **13 REFERENCES**

- 13.1 This policy should be read in conjunction with the relevant recruitment policies and the NHS terms and conditions of service [handbook](#).

## **PART 2**

### **1. PROCEDURE**

This section sets out the procedure by which the need for a local recruitment and retention premium will be decided.

- 1.2 Managers who identify that they have a current or potential serious recruitment and retention difficulty should discuss this with the Chief Officer and their Human Resources Representatives with a view to establishing the underlying reasons and finding a solution.

The Chief Officer and the Human Resources Team will review:

- the recruitment activity to date, including the advertising that has already taken place (media, style etc.), the quality of the recruitment information pack (job description, person specification, department information etc.) and the response rates;
- whether the difficulty could be addressed through a more flexible approach to working patterns, the use of part-time staff, adjusted roles, service modernisation etc;
- whether an increased supply of candidates could be achieved through the use of an improved non-pay employment package – improved training package, relocation expenses, etc;
- whether the experience is national, local to the CCG only or whether it is also the case in other local relevant employers;
- whether the problems are related to avoidable work-related pressures, working environment, volumes, procedures etc. that require attention; the staff survey may have useful pointers in this regard;
- the reasons for leaving given in recent exit interviews (where available);
- whether the problem is seen as short or long term;
- whether the use of bank, agency or locum staff is an acceptable and more cost effective solution.

- 1.3 Where appropriate, local staff representatives will be included in these discussions.

- 1.4 Where the conclusion of these discussions is that it may be appropriate to pay a recruitment and retention premium, the Recruiting Manager should prepare a written report (Appendix 3) setting out the case and including, for example:

- the department's staffing establishment and skill mix;
- the current level of staffing and skill mix;
- relevant performance data – targets, achievements etc;
- evidence of the difficulties in recruiting/retaining staff within the band(s) that are the concern;
- details of the recent recruitment activity for the vacancies;
- evidence that non-pay solutions have been tried and have proven unsuccessful;
- the proposed level of payment and the band(s) that this would apply to: this may be set at different rates for pay points within the same band;
- whether a long term or short term premium is proposed;
- the number of staff involved;
- the cost of the proposal and the additional costs currently being incurred in supporting the service;
- evidence that the proposed payment has a basis in terms of pay rates elsewhere in the NHS (for professional roles) or locally (for non-clinical roles);
- How and to what extent the proposed premium will address any current performance deficit i.e. what impact it will have on service delivery.

In other cases, such as a planned major change, the Manager may wish to anticipate any expected recruitment and retention difficulties. In this case the situation should be discussed with the Chief Officer and HR Representative as above and an appropriate action plan developed.

- 1.5 The agreed report should then be submitted to the remuneration committee for consideration.

## **APPENDICES**

- Appendix 1 – Business Case for Recruitment and Retention Premia
- Appendix 2 – Equality Impact Assessment
- Appendix 3 – Sustainability Impact Assessment
- Appendix 4 – Bribery Act Guidance 2010

**BUSINESS CASE FOR RECRUITMENT AND RETENTION PREMIA**

**Supporting Evidence**

|                  |  |
|------------------|--|
| Post Title:      |  |
| Directorate:     |  |
| Post Pay Band:   |  |
| Number of Posts: |  |

|  |  |                               |
|--|--|-------------------------------|
| Is this application for problems with: (Please Tick) |  |                               |
| Recruitment <input type="checkbox"/>                 | Retention <input type="checkbox"/>     | Both <input type="checkbox"/> |
| Are you applying for:                                |  |                               |
| Short Term RRP <input type="checkbox"/>              | Long Term RRP <input type="checkbox"/> |                               |
| Proposed Effective Date:                             | Proposed Duration:                     |                               |
| Is there any other RRP currently applied?            |  |                               |
| Yes <input type="checkbox"/>                         | No <input type="checkbox"/>            |                               |
| If YES, please give further details:                 |  |                               |
|  |  |                               |

|  |
|--|
| Summary of identified difficulties to recruit or retain: |
|  |

|  |
|--|
| Evidence of previous attempts to recruit or retain. In this section you should include |
|--|

information such as: exit interview results; response to adverts; turnover rates for post(s); National Shortages; Availability of Locum/Agency Equivalents; External (non-NHS) Rates of Pay, etc.

|  |
|--|
|  |
|--|

If you are providing information about external rates of pay for similar posts, please attach recent adverts

|   |                  |
|---|------------------|
| Suggested value of RRP based upon above information (per full-time post): | £..... per annum |
|---|------------------|

Please summarise any other action that has been taken/considered to overcome recruitment or retention issues. This should include: flexible working; additional training; changes to roles and recruitment initiatives.

|  |
|--|
|  |
|--|

Who else could be affected by this application? For example, are there any implications for posts that attract external sources of funding?

|  |
|--|
|  |
|--|

Please detail below how the total cost of the proposed RRP and any cost saving that could be achieved through the application of RRP (i.e. reduction in agency costs)

| Suggested RRP VALUE                 | X | Number of EMPLOYEES | = | Total COST OF RRP |
|-------------------------------------|---|---------------------|---|-------------------|
| Current Cost of Cover (per person): |   |                     |   |                   |

Where will the RRP be funded from? (e.g. Existing/Additional Funding)

Expected benefits of applying RRP

Proposed by: .....

Signed: .....

Date: .....

Remuneration Committee Approval Date: .....

**Equality Impact Analysis: Form**

**September 2012**

For support with completion of this documentation, please see the accompanying guidance and/or contact the Equality Lead in the Yorkshire and Humber Commissioning Support

## 1. Equality Impact Analysis

|  |   |           |                                     |               |                          |                       |                          |                    |                          |
|--|---|-----------|-------------------------------------|---------------|--------------------------|-----------------------|--------------------------|--------------------|--------------------------|
| <b>Policy / Project / Function:</b>  | Recruitment and Retention Premia Policy   |           |                                     |               |                          |                       |                          |                    |                          |
| <b>Date of Analysis:</b>   | 24/10/14  |           |                                     |               |                          |                       |                          |                    |                          |
| <b>This Equality Impact Analysis was completed by: (Name and Department)</b>                       | Workforce service   |           |                                     |               |                          |                       |                          |                    |                          |
| <b>What are the aims and intended effects of this policy, project or function ?</b>                | The aim of the Recruitment and Retention Premia Policy is to ensure that the Organisation remunerates all of its employees at a level at which recruitment and retention difficulties will not be encountered. This policy should be read in conjunction with the NHS terms and conditions of service handbook.   |           |                                     |               |                          |                       |                          |                    |                          |
| <b>Please list any other policies that are related to or referred to as part of this analysis?</b> | Recruitment Policy<br>Disciplinary Procedure  |           |                                     |               |                          |                       |                          |                    |                          |
| <b>Who does the policy, project or function affect ?</b><br><br>Please Tick ✓                      | <table style="width: 100%; border: none;"> <tr> <td style="width: 80%;">Employees</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td>Service Users</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Members of the Public</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Other (List Below)</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table> | Employees | <input checked="" type="checkbox"/> | Service Users | <input type="checkbox"/> | Members of the Public | <input type="checkbox"/> | Other (List Below) | <input type="checkbox"/> |
| Employees  | <input checked="" type="checkbox"/>   |           |                                     |               |                          |                       |                          |                    |                          |
| Service Users  | <input type="checkbox"/>  |           |                                     |               |                          |                       |                          |                    |                          |
| Members of the Public  | <input type="checkbox"/>  |           |                                     |               |                          |                       |                          |                    |                          |
| Other (List Below)   | <input type="checkbox"/>  |           |                                     |               |                          |                       |                          |                    |                          |

## 2. Equality Impact Analysis: Screening

|                                | Could this policy have a positive impact on...  |    | Could this policy have a negative impact on... |    | Is there any evidence which already exists from previous (e.g. from previous engagement) to evidence this impact |
|--------------------------------|---|----|--|----|--|
|                                | Yes   | No | Yes  | No |  |
| <b>Race</b>                    | <input type="checkbox"/>  | ✓  | <input type="checkbox"/>                       | ✓  |  |
| <b>Age</b>                     | <input type="checkbox"/>  | ✓  | <input type="checkbox"/>                       | ✓  |  |
| <b>Sexual Orientation</b>      | <input type="checkbox"/>  | ✓  | <input type="checkbox"/>                       | ✓  |  |
| <b>Disabled People</b>         | <input type="checkbox"/>  | ✓  | <input type="checkbox"/>                       | ✓  |  |
| <b>Gender</b>                  | <input type="checkbox"/>  | ✓  | <input type="checkbox"/>                       | ✓  |  |
| <b>Transgender People</b>      | <input type="checkbox"/>  | ✓  | <input type="checkbox"/>                       | ✓  |  |
| <b>Pregnancy and Maternity</b> | <input type="checkbox"/>  | ✓  | <input type="checkbox"/>                       | ✓  |  |
| <b>Marital Status</b>          | <input type="checkbox"/>  | ✓  | <input type="checkbox"/>                       | ✓  |  |
| <b>Religion and Belief</b>     | <input type="checkbox"/>  | ✓  | <input type="checkbox"/>                       | ✓  |  |
| <b>Reasoning</b>               | The aim of the Recruitment and Retention Policy is to ensure that the Organisation remunerates all of its employees at a level at which recruitment and retention difficulties will not be encountered. This Policy also takes full account of the arrangements defined under the NHS Terms and Conditions of Service. The payment is separate from basic pay which is consistent with good practice and recommended by the Equality and Human Rights Commission. This should promote fairness and consistency. Application of the policy should be carefully monitored |    |  |    |  |

**If there is no positive or negative impact on any of the Nine Protected Characteristics go to Section 7**

### 3. Equality Impact Analysis: Local Profile Data

Local Profile/Demography of the Groups affected as at Oct 2014

|                                       |  |
|---------------------------------------|--|
| <b>General</b>                        | Total number of employees in the North Lincs CCG 27  |
| <b>Age</b>                            | 70.38% of staff are aged 30-55<br>25.92% of staff are over 55<br>3.7% staff employed are under 30  |
| <b>Race</b>                           | 85.19% of staff employed in the CCG are White<br>11.11% staff have not stated or defined their ethnicity<br>3.7% of staff are Black        |
| <b>Sex</b>                            | 55.56% staff employed are female<br>44.44% staff employed are male   |
| <b>Gender reassignment</b>            | No information at this stage   |
| <b>Disability</b>                     | 92.59% did not declare /undefined<br>7.41% of staff employed declared themselves as having no disability<br>No staff declared a disability |
| <b>Sexual Orientation</b>             | All staff are recorded as did not wish to respond /undefined   |
| <b>Religion, faith and belief</b>     | 96.3% of staff are recorded as did not wish to respond /undefined<br>3.7% of staff declared themselves as Christian                        |
| <b>Marriage and civil partnership</b> | 81.48% of employees are married. 18.52% are single/divorced No employees are in a civil partnership  |
| <b>Pregnancy and maternity</b>        | No information yet as the CCG has not been established long enough to build meaningful data  |

#### 4. Equality Impact Analysis: Equality Data Available

|  |  |
|--|--|
| <p><b>Is any Equality Data available relating to the use or implementation of this policy, project or function?</b></p> <p>Equality data is internal or external information that may indicate how the activity being analysed can affect different groups of people who share the nine <i>Protected Characteristics</i> – referred to hereafter as '<i>Equality Groups</i>'.</p> <p>Examples of <i>Equality Data</i> include: (this list is not definitive)</p> <ol style="list-style-type: none"> <li>1. Application success rates <i>Equality Groups</i></li> <li>2. Complaints by <i>Equality Groups</i></li> <li>3. Service usage and withdrawal of services by <i>Equality Groups</i></li> <li>4. Grievances or decisions upheld and dismissed by <i>Equality Groups</i></li> <li>5. <i>Previous EIAs</i></li> </ol> | <p>Yes    <input checked="" type="checkbox"/> employee data</p> <p>No    <input type="checkbox"/></p> <p>Where you have answered yes, please incorporate this data when performing the <i>Equality Impact Assessment Test</i> (the next section of this document).</p>   |
| <p><b>List any Consultation e.g. with employees, service users, Unions or members of the public that has taken place in the development or implementation of this policy, project or function</b></p>  | <p>Consultation has taken place both locally and nationally with Trade Unions and staff</p>  |
| <p><b>Promoting Inclusivity</b><br/> <b>How does the project, service or function contribute towards our aims of eliminating discrimination and promoting equality and diversity within our organisation</b></p>   | <p>The aim of the Recruitment and Retention <i>Premia</i> Policy is to ensure that the Organisation remunerates all of its employees at a level at which recruitment and retention difficulties will not be encountered. This Policy also takes full account of the arrangements defined under the NHS Terms and Conditions of Service. This should promote fairness and consistency</p> |

### 5. Equality Impact Analysis: Assessment Test

What impact will the implementation of this policy, project or function have on employees, service users or other people who share characteristics protected by *The Equality Act 2010* ?

| Protected Characteristic:  | No Impact: | Positive Impact: | Negative Impact: | Evidence of impact and if applicable, justification where a <i>Genuine Determining Reason</i> exists |
|--|------------|------------------|------------------|--|
| <b>Gender</b><br>(Men and Women)                                     | ✓          |                  |                  |  |
| <b>Race</b><br>(All Racial Groups)                                   | ✓          |                  |                  |  |
| <b>Disability</b><br>(Mental and Physical)                           | ✓          |                  |                  |  |
| <b>Religion or Belief</b>  | ✓          |                  |                  |  |
| <b>Sexual Orientation</b><br>(Heterosexual, Homosexual and Bisexual) | ✓          |                  |                  |  |

What impact will the implementation of this policy, project or function have on employees, service users or other people who share characteristics protected by *The Equality Act 2010* ?

| Protected Characteristic:      | No Impact: | Positive Impact: | Negative Impact: | Evidence of impact and if applicable, justification where a <i>Genuine Determining Reason</i> exists |
|--------------------------------|------------|------------------|------------------|--|
| <b>Pregnancy and Maternity</b> | ✓          |                  |                  |  |
| <b>Transgender</b>             | ✓          |                  |                  |  |
| <b>Marital Status</b>          | ✓          |                  |                  |  |
| <b>Age</b>                     | ✓          |                  |                  |  |

**6. Action Planning**

**As a result of performing this analysis, what actions are proposed to remove or reduce any risks of adverse outcomes identified on employees, service users or other people who share characteristics protected by *The Equality Act 2010* ?**

| Identified Risk: | Recommended Actions: | Responsible Lead: | Completion Date: | Review Date: |
|------------------|----------------------|-------------------|------------------|--------------|
|                  |                      |                   |                  |              |
|                  |                      |                   |                  |              |
|                  |                      |                   |                  |              |
|                  |                      |                   |                  |              |
|                  |                      |                   |                  |              |

## 7. Equality Impact Analysis Findings

|                         |                              |                                    |                                |   |
|-------------------------|------------------------------|------------------------------------|--------------------------------|---|
| <b>Analysis Rating:</b> | <input type="checkbox"/> Red | <input type="checkbox"/> Red/Amber | <input type="checkbox"/> Amber | <input checked="" type="checkbox"/> Green |
|-------------------------|------------------------------|------------------------------------|--------------------------------|---|

|  |   | Actions   | Wording for Policy / Project / Function   |
|--|---|---|---|
| <p><b>Red</b></p> <p><b>Stop and remove the policy</b></p> | <p><b>Red:</b> As a result of performing the analysis, it is evident that a risk of discrimination exists (direct, indirect, unintentional or otherwise) to one or more of the nine groups of people who share <i>Protected Characteristics</i>. It is recommended that the use of the policy be suspended until further work or analysis is performed.</p>                                       | <p><b>Remove the policy</b></p> <p>Complete the action plan above to identify the areas of discrimination and the work or actions which needs to be carried out to minimise the risk of discrimination.</p>   | <p>No wording needed as policy is being removed</p>   |
| <p><b>Red Amber</b></p> <p><b>Continue the policy</b></p>  | <p>As a result of performing the analysis, it is evident that a risk of discrimination exists (direct, indirect, unintentional or otherwise) to one or more of the nine groups of people who share <i>Protected Characteristics</i>. However, a genuine determining reason may exist that could legitimise or justify the use of this policy and further professional advice should be taken.</p> | <p><b>The policy can be published with the EIA</b></p> <p>List the justification of the discrimination and source the evidence (i.e. clinical need as advised by NICE).</p> <p>Consider if there are any potential actions which would reduce the risk of discrimination.</p> <p>Another EIA must be completed if the policy is changed, reviewed or if further discrimination is identified at a later date.</p> | <p>As a result of performing the analysis, it is evident that a risk of discrimination exists (direct, indirect, unintentional or otherwise) to one or more of the nine groups of people who share <i>Protected Characteristics</i>. However, a genuine determining reason exists which justifies the use of this policy and further professional advice.</p> <p><b><i>[Insert what the discrimination is and the justification of the discrimination plus any actions which could help what reduce the risk]</i></b></p> |

### Equality Impact Findings (continued):

|   |   | Actions  | Wording for Policy / Project / Function   |
|---|---|--|---|
| <p><b>Amber</b></p> <p><b>Adjust the Policy</b></p> | <p>As a result of performing the analysis, it is evident that a risk of discrimination (as described above) exists and this risk may be removed or reduced by implementing the actions detailed within the <i>Action Planning</i> section of this document.</p> | <p><b>The policy can be published with the EIA</b></p> <p>The policy can still be published but the Action Plan must be monitored to ensure that work is being carried out to remove or reduce the discrimination.</p> <p>Any changes identified and made to the service/policy/ strategy etc. should be included in the policy.</p> <p>Another EIA must be completed if the policy is changed, reviewed or if further discrimination is identified at a later date.</p> | <p>As a result of performing the analysis, it is evident that a risk of discrimination (as described above) exists and this risk may be removed or reduced by implementing the actions detailed within the <i>Action Planning</i> section of this document.</p> <p><b><i>[Insert what the discrimination is and what work will be carried out to reduce/eliminate the risk]</i></b></p> |
| <p><b>Green</b></p> <p><b>No major change</b></p>   | <p>As a result of performing the analysis, the policy, project or function does not appear to have any adverse effects on people who share <i>Protected Characteristics</i> and no further actions are recommended at this stage.</p>                           | <p><b>The policy can be published with the EIA</b></p> <p>Another EIA must be completed if the policy is changed, reviewed or if any discrimination is identified at a later date</p>  | <p>As a result of performing the analysis, the policy, project or function does not appear to have any adverse effects on people who share <i>Protected Characteristics</i> and no further actions are recommended at this stage.</p>   |

|                                       |  |
|---------------------------------------|--|
| <b>Brief Summary/Further comments</b> | <p>As a result of performing the analysis, the policy, project or function does not appear to have any adverse effects on people who share <i>Protected Characteristics</i> and no further actions are recommended at this stage</p> |
|---------------------------------------|--|

| <b>Approved By</b> |              |              |
|--------------------|--------------|--------------|
| <b>Job Title:</b>  | <b>Name:</b> | <b>Date:</b> |
|                    |              |              |

### SUSTAINABILITY IMPACT ASSESSMENT

Staff preparing a Policy / Board Report / Committee Report / Service Plan / Project are required to complete a Sustainability Impact Assessment. Sustainability is one of the Trust's key Strategies and the Trust has made a corporate commitment to address the environmental effects of activities across Trust services. The purpose of this Sustainability Impact Assessment is to record any positive or negative impacts that this activity is likely to have on each of the Trust's Sustainability Themes. For assistance with completing the Sustainability Impact Assessment, please refer to the instructions below.

| <b>Policy / Report / Service Plan / Project Title:</b>  |                        |                        |                           |  |
|---|------------------------|------------------------|---------------------------|--|
| <b>Theme (Potential impacts of the activity)</b>  | <b>Positive Impact</b> | <b>Negative Impact</b> | <b>No specific impact</b> | <b>What will the impact be? If the impact is negative, how can it be mitigated? (action)</b> |
| Reduce Carbon Emission from buildings by 12.5% by 2010-11 then 30% by 2020                                    |                        |                        | x                         |  |
| New builds and refurbishments over £2million (capital costs) comply with BREEAM Healthcare requirements.      |                        |                        | x                         |  |
| Reduce the risk of pollution and avoid any breaches in legislation.   |                        |                        | x                         |  |
| Goods and services are procured more sustainability.  |                        |                        | x                         |  |
| Reduce carbon emissions from road vehicles.   |                        |                        | x                         |  |
| Reduce water consumption by 25% by 2020.  |                        |                        | x                         |  |
| Ensure legal compliance with waste legislation.   |                        |                        | x                         |  |
| Reduce the amount of waste produced by 5% by 2010 and by 25% by 2020  |                        |                        | x                         |  |
| Increase the amount of waste being recycled to 40%.   |                        |                        | x                         |  |
| Sustainability training and communications for employees.   |                        |                        | x                         |  |
| Partnership working with local groups and organisations to support sustainable development.                   |                        |                        | x                         |  |
| Financial aspects of sustainable development are considered in line with policy requirements and commitments. |                        |                        | x                         |  |

### Bribery Act 2010 Guidance

#### Introduction

On July 2011 the Bribery Act 2010 came into force, making it a criminal offence to give, promise, or offer a bribe and to request, agree or receive a bribe. It increased the maximum penalty for bribery to 10 years' imprisonment, with an unlimited fine. Furthermore the act introduces a 'corporate offence' of failing to prevent bribery by the organisation not having adequate preventative procedures in place. An organisation may avoid conviction if it can show that it had such procedures and protocols in place to prevent bribery.

The Ministry of Justice in its consultation and guidance set out six broad management principles whereby an organisation can demonstrate an effective defence by showing that it had effective bribery prevention measures in place.

Risk Assessment – this is about knowing and keeping up to date with the bribery risks you face in your sector and market;

Top level commitment – this concerns establishing a culture across the organisation in which bribery is unacceptable. If your business is small or medium sized this may not require much sophistication but the theme is making the message clear, unambiguous and regularly made to all staff and business partners;

Due diligence – this is about knowing who you do business with; knowing why, when and to whom you are releasing funds and seeking reciprocal anti-bribery agreements ; and being in a position to feel confident that business relationships are transparent and ethical;

Clear, Practical and Accessible Policies and Procedures – this concerns applying them to everyone you employ and business partners under your effective control and covering all relevant risks such as political and charitable contributions, gifts and hospitality, promotional expenses, and responding to demands for facilitation demands or when an allegation of bribery comes to light.

Effective implementation – this is about going beyond 'paper compliance' to embedding anti-bribery in your organisation's internal controls, recruitment and remuneration policies, operations, communications and training on practical business issues.

Monitoring and review – this relates to auditing and financial controls that are sensitive to bribery and are transparent, considering how regularly you need to review your policies and procedures, and whether external verification would help.

#### Relevance to the NHS

NHS organisations are included in the Bribery Act's definition of a "relevant commercial organisation". Any senior manager or executive who consents to or connives in any active or passive bribery offence will, together with the organisation, be liable for the corporate offence under the act.

Any individual associated with an organisation who commits acts or omissions forming part of a bribery offence may be liable for a primary bribery offence under the act or for conspiracy to commit the offence with others – including, for example, their employer.

### **Risks in breaching the Bribery Act**

There are a number of risks entailed in breaching the Bribery Act. These include:

- Criminal sanctions against directors, board members and other senior staff as a corporate offence – Section 7 of the Act.
- Convictions of bribery or corruption may also lead to the organisation being precluded from future public sector procurement contracts.
- Damage to the organisation's reputation and negative impact on patient/stakeholder perceptions.
- Potential diversion and/or loss of resources.

### **What do NHS organisation's need to do?**

There are a number of steps NHS organisations can take:

- The Board needs to understand its responsibility in respect of the act.
- Be clear that, as NHS organisations, you are covered by corporate liability for bribery on the part of their employees, contractors and agents.
- Take steps to make your employees, contractors and agents aware of the standards of behaviour that are expected of them: this may include training for employees who might be affected – for example, employees with responsibility for procurement.
- Review existing governance, procedures, decisions-making processes and financial controls, introduce them if not already in place and, where necessary, provide appropriate training for staff.
- Record the fact that these steps have been taken, as they provide the defence against corporate liability under the act.

### **Areas for Action**

- Once risks have been assessed the organisation must put in place procedures that are *proportionate* to bribery risks that are identified.
- The checklist below provides details of areas for actions to assist in ensuring proportionate steps to ensure prevention and defence against corporate liability under the act. The checklist is based on best practice guidance documents issued by NHS Protect in May 2011, Ministry of Justice and other anti-bribery and corruption NGOs.
- Internal Audit and Counter Fraud Teams will provide support to the organisation to help ensure that assurance can be given against the points in the following checklist during 2012/13.

## Bribery Act 2010 Guidance and Bribery Prevention Checklist

| Areas for action                       | Expected Action  | Evidence of Compliance/Assurance |
|--|--|----------------------------------|
| 1. Governance and Top Level Commitment | <p>The Chief Executive should make a statement in support of the anti-bribery initiative and this should be published on the organisation's website.</p> <p>The board of directors should take overall responsibility for the effective design, implementation and operation of the anti-bribery initiatives. The Board should ensure that senior management is aware of and accepts the initiatives and that it is embedded in the corporate culture.</p>                               |                                  |
| 2. Due Diligence                       | <p>This is a key element of good corporate governance and involves making an assessment of new business partners prior to engaging them in business. Due diligence procedures are in themselves a form of bribery risk assessment and also a means of mitigating that risk. It is recommended that at the outset of any business dealings, all new business partners should be made aware in writing of the organisation's anti-corruption and bribery policies and code of conduct.</p> |                                  |
| 3. Code of conduct                     | <p>The organisation should either have an anti-bribery code of conduct or a general code of conduct for staff with an anti-bribery and corruption element.</p> <p>The organisation should revise the Standards of Business Conduct Policy (or equivalent) and Declaration of Interests guidance (see point 4 below) to reflect the introduction of the Bribery Act.</p>  |                                  |

| Areas for action                        | Expected Action   | Evidence of Compliance/Assurance |
|---|---|----------------------------------|
| 4. Declaration of Interests/Hospitality | The organisation should have in place a declaration of business interests/gifts and hospitality policy which clearly sets out acceptable limits and also a mechanism to monitor implementation.   |                                  |
| 5. Employee employment procedures       | Employees should go through the appropriate propriety checks e.g. CRB (Criminal Records Bureau) and/or a combination of other checks before they are employed to ascertain, as far as is reasonable, that they are likely to comply with the organisation’s anti-bribery policies.  |                                  |
| 6. Detection procedures                 | The organisation should ensure Internal Audit/Counter Fraud check projects, contracts, procurement processes and any other appropriate systems where there is a risk that acts of bribery could potentially occur.  |                                  |
| 7. Internal reporting procedures        | The organisation should have internal procedures for staff to report suspicious activities including bribery.   |                                  |
| 8. Investigation of Bribery allegations | The organisation should have procedures for staff to report suspicions of bribery to NHS Protect (previously NHS Counter Fraud and Security Management Service) and the organisation’s Local Counter Fraud Specialist for investigation/referral to the appropriate authorities.  |                                  |
| 9. Risk assessment                      | MoJ (Ministry of Justice) guidance states”...organisations should adopt a risk-based approach to managing bribery risks...[and] an initial assessment of risk across the organisation is therefore a necessary first step”. The organisation should, on a regular basis, assess the risk of bribery and corruption in its business and assess whether its procedures and controls are adequate to minimise those risks. |                                  |

| Areas for action                             | Expected Action  | Evidence of Compliance/Assurance |
|--|--|----------------------------------|
| 10. Record keeping                           | The organisation should keep reasonably detailed records of its anti-fraud and corruption initiatives, including training given, hospitality given and received and other relevant information.  |                                  |
| 11. Internal review                          | The organisation should carry out an annual internal review of the anti-bribery and corruption programme.  |                                  |
| 12. Independent assessment and certification | Proportionate to risks identified, the organisation should commission, at least every three years, an independent assessment and certification of its anti-bribery programme.  |                                  |
| 13. Internal and External communications     | <p>The organisation should publicise the NHS Fraud and Corruption Reporting Line (FCRL) and on-line fraud reporting facility.</p> <p>The organisation should publicise the Security Management role (theft and general security issues) and reporting arrangements.</p> <p>The organisation should work with its stakeholders in the public and private sector to help reduce bribery and corruption in the health industry.</p> |                                  |
| 14. Awareness and training                   | The organisation should provide appropriate anti-bribery and corruption awareness sessions and training on a regular basis to all relevant employees.  |                                  |

| Areas for action   | Expected Action  | Evidence of Compliance/Assurance |
|--|--|----------------------------------|
| <p>15. Monitoring:</p> <ul style="list-style-type: none"> <li>• Overall Responsibility</li> <li>• Financial/Commercial Controls</li> </ul> | <p>A senior manager should be made responsible for ensuring that the organisation has a proportionate and adequate programme of anti-fraud, corruption and bribery initiatives.</p> <p>The organisation should ensure that its financial controls minimise the risk of the organisation committing a corrupt act.</p> <p>The organisation should ensure that its commercial controls minimise the risk of the organisation committing a corrupt act. These controls would include appropriate procurement and supply chain management, and the monitoring of contract execution.</p> |                                  |