

## **SUBSTANCE MISUSE POLICY**

*(July 2019)*

<b>Authorship:</b>	<b>HR Policy Lead and NL ICB Business Manager</b>
<b>Committee Approved:</b>	<b>Governing Body</b>
<b>Approved date:</b>	<b>July 2019</b>
<b>Review Date:</b>	<b>4 years</b>
<b>Equality Impact Assessment</b>	<b>Completed - Full</b>
<b>Sustainability Impact Assessment:</b>	<b>Completed</b>
<b>Target Audience:</b>	<b>All staff</b>
<b>Policy Reference No:</b>	<b><i>Request from ICB Business Manager</i></b>
<b>Version Number:</b>	

**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>
1.0	HR Humber	New policy for the CCG	July 2019 SPF/ Execs/sub group	
1.1	HR	Updated to reflect ICB	Rem com – 01/07/2022	

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## **1 INTRODUCTION**

The ICB is committed to promoting the wellbeing of all its employees and recognises that substance misuse affects the health of employees as well as attendance, work performance, relationships, and the safety of colleagues, stakeholders and patients.

## **2 ENGAGEMENT**

- Social Partnership Forum/Policy Development Group
- NHS North Lincolnshire ICB staff via team meetings/team brief/internet

## **3 IMPACT ANALYSES**

### **3.1 Equality**

In applying this policy, the ICB 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.

An Equality Impact Assessment is attached at Appendix 4.

### **3.2 Sustainability**

All ICB policies or procedural documents require a completed Sustainability Impact Assessment. The completed assessment for this policy can be found in Appendix 4. No impacts were identified in relation to the policy and the appendices.

### **3.3 Bribery Act 2010**

The Bribery Act 2010 makes it a criminal offence to bribe or be bribed by another person by offering or requesting a financial or other advantage as a reward or incentive to perform a relevant function or activity improperly performed. The penalties for any breaches of the Act are potentially severe. There is no upper limit on the level of fines that can be imposed and an individual convicted of an offence can face a prison sentence of up to 10 years.

The Bribery Act applies to this policy.

## **4 SCOPE**

This policy applies to all employees, and any agency or contract staff (including honorary contracts) whilst they are working for the ICB.

## **5 POLICY PURPOSE & AIMS**

- 5.1 The purpose of this policy is to provide managers with guidance for managing the effects of alcohol and/ or substance misuse by employees, agency and contract staff with due regard for sensitivity and health and safety.
- 5.2 This policy also provides support for all staff with managing the effects of the misuse of alcohol and substances. All employees have an obligation to take reasonable care of themselves and others who could be affected by their actions at work.

- 5.3 The ICB is concerned about and has an obligation to take care of the health, safety and welfare of its employees. The ICB recognises that this can be put at risk by employees who misuse alcohol and substances to such an extent that their health, work performance, conduct and working relationships are affected in addition to the health and safety of patients. This policy sets out the ICB's aims to protect and maintain the health, safety and welfare of employees and others in the workplace by reducing the risk of alcohol and/or substance misuse related harm in accordance with the Health & Safety at Work Act 1974.
- 5.4 The ICB is committed to ensuring that all personal information is managed in accordance with current data protection legislation, professional codes of practice and records management and confidentiality guidance. More detailed information can be found in the ICB's Data Protection and Confidentiality and related policies and procedures.

## **6 DEFINITIONS**

6.1 Alcohol and/ or substance misuse in the context of this policy is defined as: *Behaviours resulting from the misuse of alcohol, drugs and other substances which harm, or have the potential to harm, the individual (both physically and/ or mentally), other people and the environment; or behaviours which impact on their ability to deliver their role appropriately.*

6.2 Misuse can be divided into three different types:

- Inappropriate use, where use may aggravate an existing condition or situation, or is done in potentially dangerous or inappropriate circumstances.
- Habitual use, where an individual becomes dependent on the effects of the substance to the extent that the desire for these effects becomes a dominant concern, to the detriment of other aspects of their lives.
- Excessive use, which can lead to short or long term physical and mental impairment, illness or anti-social behaviour.

It includes the misuse of alcohol, illegal drugs, legal drugs, prescription medicines (e.g. anti-depressants), solvents, glue, lighter fuel etc. Intoxicating substance changes the way the user feels mentally or physically.

## **7 ROLES / RESPONSIBILITIES / DUTIES**

### **EMPLOYEES**

- 7.1 All employees are individually responsible for taking all reasonable precautions to ensure their fitness for work. Employees have a responsibility for their own health and safety in the workplace and employees must take personal responsibility for their own alcohol and/ or substance use.
- 7.2 Employees are responsible for making themselves aware of the principles and procedures within this policy and for informing their line manager where there is any risk or concern regarding compliance with this policy.
- 7.3 Employees who have an alcohol or drug problem, or who suspect they may have a problem, are encouraged to seek help either by discussing the matter with their Line Manager, occupational health, their GP, local alcohol/ substance misuse agency or with a national helpline (see Appendix 3 for Sources of Help).

## **LINE MANAGERS**

- 7.4 Managers are responsible for the implementation of the principles and procedures within this policy, to ensure that risks to compliance can be managed proactively. Managers are responsible for ensuring that concerns are acted upon proactively and that any staff affected by substance misuse are offered the support available. Managers may, periodically wish to remind employees of their individual responsibilities under this policy.

## **8 KEY PRINCIPLES**

- 8.1 The ICB distinguishes between the employee for whom alcohol and/or substance misuse is a problem, which should be managed in a supportive and non-judgemental way, and misconduct involving alcohol or substances which will be dealt with under the ICB's disciplinary procedures.
- 8.2 Under no circumstances should an employee report for work while under the influence of alcohol or illegal drugs. Employees who are taking prescribed medication must inform their manager if they think it may have an adverse effect on their ability to carry out their duties.
- 8.3 All employees must be fit to commence their duties and must remain so throughout their working day. If an employee is unfit or becomes unfit, because of alcohol or other substance abuse, in the Manager's opinion, they will not be allowed to commence work and immediate medical suspension will be considered (see section 21).
- 8.4 Employees must not sell, possess, purchase, supply or use alcohol or illegal drugs on ICB premises including any external premises at which they are working, based or visiting. This includes meal breaks on or off site/ ICB premises, which are classed as working time under the Working Time Regulations.
- 8.5 Employees must not drive vehicles for the purposes of work (either privately owned or leased by the ICB) whilst under the influence of alcohol, certain prescribed drugs or illegal substances.
- 8.6 Failure to adhere to the above constitutes gross misconduct and will be dealt with in accordance with the ICB's Disciplinary policy, and may lead to prosecution.
- 8.7 Misconduct may also include being found to be illegally supplying, in possession of, or taking a controlled or uncontrolled drug outside of work if that has a bearing on their suitability to continue in post.

## **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 Breaches of this policy may be investigated and may result in the matter being treated as a disciplinary offence under the ICBs disciplinary procedure.

## **10 TRAINING & AWARENESS**

10.1 A copy of the policy will be available on the ICB intranet. Training requirements will be identified by the ICB.

## **11 MONITORING & AUDIT**

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

## **12 POLICY REVIEW**

12.1 The policy and procedure will be reviewed after 4 years in conjunction with Trade Union representatives. Where review is necessary due to legislative change, this will happen immediately. Staff will be informed of any changes to this policy or legislation.

## **13 REFERENCES**

13.1 See Appendix 3 for useful contacts of various external agencies.

## **14 ASSOCIATED DOCUMENTATION**

Absence Policy  
Disciplinary Policy  
Managing Work Performance Policy  
Redeployment Policy

## **PART 2**

### **PROCEDURE**

#### **15 Support**

The ICB wants to encourage and support employees who may have an alcohol and/or substance misuse, dependency or problem by assisting them in seeking help and supporting them in overcoming alcohol and/or substance misuse related problems. Where these are suspected, the manager is encouraged to arrange a private, informal meeting to discuss their concerns, the information in this policy and the support that is available. Guidance on conducting this meeting can be found in Appendix 2.

In cases of alcohol and/ or substance misuse, Occupational Health advice will be sought and advice taken from other relevant parties (for example GPs, Social Services, Alcoholics Anonymous etc.) where appropriate. The consent of the member of staff should normally be obtained, but if there is a serious concern and they refuse to give their consent, the management referral should proceed.

Employees who have an alcohol and/ or substance misuse problem, or who suspect they may have a problem, are encouraged to seek help either by discussing the matter confidentially with their immediate manager, or an external agency (see appendix 3), Occupational Health, Human Resources and/or their General Practitioner.

Staff can make a confidential self-referral to Occupational Health for help and support. Clinical details and advice to staff are kept in the strictest confidence and Occupational Health only divulge details with written agreement from the member of staff, except in cases where there may be a serious risk to that person, patients,

other staff or the public. Requests for assistance will be treated in strict confidence and will in no way affect the employee's job security, benefits etc. Information will only be released to third parties on a "need to know" basis.

This document details various forms of support, as well as further information which may be applicable dependent on the extent the effects the substance misuse has on the individual's performance and conduct at work.

## **16 Rehabilitation**

If an employee is required to complete a rehabilitation period in line with the Attendance Management Policy, then normal arrangements (as outlined in that policy) will apply. Where a rehabilitation period is attached as a sanction to a formal warning (for example reduced hours) the employee will be responsible for complying with this condition.

Every effort will be made to ensure the employee returns to his/ her job on completion of the rehabilitation programme. In cases where the employee is not considered fit to return to the same job or where doing so, may undermine recovery, redeployment may be considered in line with the Attendance Management and Redeployment policies.

If a programme of rehabilitation is introduced then the employee can take sick leave whilst seeking support and will therefore be entitled to the benefits that accrue.

## **17 Involving the Police and Professional Bodies**

The possession of illegal drugs with the intent to distribute, use or supply is a criminal offence and the ICB has a duty to report this to the police immediately. Where an internal or police investigation shows that illegal drugs have been on ICB premises, or in the possession of ICB staff, this will be dealt with as potential gross misconduct in accordance with the ICB Disciplinary Policy and may lead to termination of employment. This includes any external premises at which the individual is working, based or visiting.

An employee who is charged with, or convicted of, a criminal offence (including receipt of a summons, or a drink/drug driving offence) must inform their line manager as soon as possible. In such circumstances the manager should seek advice from the Human Resources Department as to what course of action may be appropriate. Notification about criminal proceedings or a conviction will not necessarily lead to disciplinary action being taken. Following disclosure, the ICB will determine what, if any, action will be taken after considering the facts of the case and the relevance of the charge or conviction to the job undertaken.

Incidents involving allegations of professional misconduct relating to alcohol or substances must be reported to the appropriate professional body.

## **18 Corporate Hospitality and Work Related Social Functions**

At work related social functions the ICB expects employees to demonstrate responsible behaviour and to act in a way that will not have a detrimental effect or impact negatively on the ICB's reputation.

Employees must be mindful of their behaviour when attending all work related social events, even if they occur outside of normal working hours; ensuring they are respectful to colleagues and avoid offense and abuse.



## **19 Driving**

In line with the Road Traffic Act 1988, employees driving in the course of their work should never attempt to do so whilst unfit to do so through drink or drugs. When taking prescribed medications, the employee is responsible for being informed and assured of their fitness before driving. No employee should feel that the nature of their job makes it difficult for them to abide by drink and/or drug driving legislation. Anyone who has a concern about this must consult their line manager.

## **20 Performance and Conduct**

Alcohol and/ or substance misuse can affect the performance of staff in several ways and it may not be appropriate to deal with every situation in the same way. There may be an immediate situation requiring resolution or an ongoing performance issue to be managed.

Ongoing performance or absence capability issues should be managed under the Managing Work Performance and/or Absence Management policies respectively. The ICB will endeavour to follow the informal stages of these policies where appropriate. The ICB will support any employee who has a substance misuse issue; however, it is also the responsibility of the employee to accept this help and assistance to improve their condition.

Instances of misconduct will be managed in accordance with the ICB's Disciplinary Procedure. Some acts of misconduct while under the influence of any substance may be so serious that they must be considered as acts of gross misconduct rendering the employee liable to dismissal. This will include endangering the health and safety of themselves, colleagues or other persons.

Staff may deny having an alcohol or substance misuse problem. If this happens, the situation should be dealt with by making clear what improvement is required in their performance/behaviour/absence within a stated timescale and how the situation will be monitored, following the applicable policies outlined above. The member of staff should also be signposted to sources of support and/or offered an alternative contact for confidential help and advice. HR advice and support is available to managers throughout the application of all ICB policies.

## **21 Suspension**

All employees must be fit to commence their duties and must remain so throughout their working day. Where a Manager suspects that an employee is under the influence of alcohol, legal highs or other substances at work, immediate medical suspension should be considered. Medical Suspension (if necessary) would be dealt with under the Absence Management Policy and advice must be sought from HR.

Medical suspension applies where a manager has concerns with regards to an employee and their ability to undertake work without risk to themselves, the service or others. They may ask the employee to remain off duty until Occupational Health advice is sought. Alternative duties or place of work may also be considered at this point to support the employee.

Where an employee is suspended, the manager must ask the employee to leave the premises. Suitable arrangements should be made for the employee to be accompanied and ensure they can get home safely.

In situations where an employee is being investigated for misconduct relating to alcohol and/ or substance misuse, it may be deemed necessary to suspend the employee pending investigation. Suspension pending misconduct investigations would be dealt with in accordance with the Disciplinary Policy.

**Appendix 1**

**SIGNS AND EFFECTS OF ALCOHOL AND SUBSTANCE MISUSE**

The following symptoms and indicators may be evident if an individual has a drug or alcohol problem:-

- Frequent short term absence
- Poor timekeeping
- Unexplained absences from work area
- Impaired job performance
- Deterioration in relationships with colleagues, patients or management
- Sudden mood changes
- Unusual irritability or aggression
- Unusually or suddenly carefree
- Repeated accidents or mishaps
- Difficulty in recalling instructions or details
- Appearing withdrawn or preoccupied
- Poor judgement
- Loud talking
- Deterioration of hygiene or physical health
- Clumsiness
- Difficulty walking
- Slurred speech
- Sleepiness
- Dilated pupils
- Glassy red or watery eyes
- Runny nose

*This list is not exhaustive and it is important to remember that the above symptoms may also signify other problems.*

## **PROCEDURE FOR LINE MANAGERS DEALING WITH EMPLOYEES WITH A SUSPECTED ALCOHOL OR SUBSTANCE MISUSE PROBLEM**

Where a manager suspects an employee has an alcohol or substance misuse problem they should take the following steps:-

### ***DO***

- Arrange to meet the employee in private
- Confirm that the meeting is informal
- Consider offering the employee the opportunity to be accompanied by a Trade Union representative or ICB colleague at the meeting\*
- Discuss this policy and the help available
- Focus on work performance, attendance at work, relationships with colleagues and patients/ service users
- Be objective and factual
- Be consistent and specific
- Show concern for the employee
- Listen to what is said about personal problems
- Offer the opportunity of specialist help and advice if you feel there is a need
- Keep clear records of any discussions that have taken place
- Agree future action
- Arrange regular meetings to monitor progress
- Refer the employee to Occupational Health, giving time off for appointments
- Treat each employee individually.

If at any point during the discussion clarity is required seek further advice from your HR representative.

### ***DON'T***

- Comment on the employee's private life
- Rely on impressions or rumours for which documented evidence is lacking
- Make vague accusations
- Be judgemental
- Argue about the employee's problems
- Leave any ambiguity about the employee's situation and what needs to be done to rectify it.

\*Right to representation from a trade union or ICB work colleague should be discussed with an employee prior to all formal meetings. This right does not apply to informal meetings; however, consideration should be given in matters related to this policy as to whether this may be helpful both to the employee and to support the purpose of the meeting.

## SOURCES OF HELP

### **Occupational Health**

Humber NHS Foundation Trust - 01482 389333 / 389335

### **CGL: Step Forward**

Step Forward is a single, integrated drug and alcohol recovery service for all adults in North Lincolnshire. It provides services and support to individuals who are concerned about their own or another person's drug and/or alcohol use. The service is available in person, via telephone or online.

Website: <https://www.changegrowlive.org/content/step-forward>

### **Addiction Helpline**

0808 163 9632

### **One You**

Online Tool - Tips and Advice for cutting down on alcohol.

<https://www.nhs.uk/oneyou/drinking>

### **Alcoholics Anonymous**

Self-help fellowship, offering support and advice to people with alcohol problems or concerns.

Tel: 0800 9177 650 (free helpline)

Email: [help@aamail.org](mailto:help@aamail.org)

Website: <http://www.alcoholics-anonymous.org.uk/>

### **AdFam (Families, drugs and alcohol)**

Improving support for families affected by Drugs and Alcohol

Website: <https://www.adfam.org.uk/>

### **FRANK (National Drugs Helpline)**

Helps you find out everything you might want to know about drugs (and some stuff you don't). *For friendly, confidential advice, Talk To FRANK.*

Tel: 0300 123 6600

Email: [frank@talktofrank.com](mailto:frank@talktofrank.com)

Website: <http://www.talktofrank.com/>

### **Drink Aware**

[www.drinkaware.co.uk](http://www.drinkaware.co.uk)

An independent charity working to reduce alcohol misuse and harm in the UK. Their aim is to reduce alcohol-related harm by helping people make better choices about drinking.

Information, advice and self-help materials including drink tracker and tools.

### **Drinkline**

Tel: 0300 123 1110

A free and confidential helpline for people who are concerned about their drinking, or someone else's.

### **Narcotics Anonymous**

N.A. is a non-profit fellowship or society of men and women for whom drugs had become a major problem. *We are recovering addicts who meet regularly to help each other stay clean.*

Tel: [0300 999 1212](tel:03009991212)

Email: [meetings@ukna.org](mailto:meetings@ukna.org)

Website: <http://ukna.org/>

### **East Riding Partnership**

The ERP provides a range of substance misuse services to adults across the East Riding of Yorkshire that delivered through the Open Access service, the Shared Care service and the Community Drug and Alcohol teams (CDAT).

Tel: 01482 344690 (Open Access Service)

Website: <http://www.humber.nhs.uk/services/east-riding-partnership.htm>

### **Change Grow Live (CGL) ReNew - Hull**

CGL ReNew is a free and confidential drug and alcohol service for adults (including offenders), families, carers and affected others in Hull.

Tel: 01482 620013

Email: [Earlyhelp.hull@cgl.org.uk](mailto:Earlyhelp.hull@cgl.org.uk)

Website: <https://www.changegrowlive.org/content/cgl-renew-hull>

### **Foundations – North East Lincolnshire**

The FOUNDATIONS service delivers a whole system approach for drugs and alcohol in North East Lincolnshire including: Young Peoples Service; Shared Care; Specialist Service; Criminal Justice Services; Direct Access Advice Information & Needle exchange.

Tel: 01472 571200

Website: <https://ads-uk.org/services/foundations-north-east-lincolnshire/>

## INTEGRATED IMPACT ASSESSMENT

# INTEGRATED IMPACT ASSESSMENT

Policy/project/function/service	<b>Substance Misuse Policy</b>	
Date of analysis:	<b>05.01.2018</b>	
Type of analysis completed	Quality	<b>Yes</b>
	Equality	<b>Yes</b>
	Sustainability	<b>Yes</b>
What are the aims and intended effects of this policy/project or function?	<b>The purpose of this policy is to provide managers with guidance for managing the effects of substance misuse by employees and staff including Governing Body Members, agency and contract staff, to protect and maintain the health, safety and welfare of employees in accordance with the Health &amp; Safety at Work Act 1974.</b>	
Please list any other policies that are related to or referred to as part of this analysis	<b>Absence Policy, Disciplinary Policy, Managing Work Performance Policy, Redeployment Policy</b>	
Who does the policy, project, function or service affect?	Employees	<b>Yes</b>
	Service users	<b>Yes</b>
	Members of the public	<b>Yes</b>
	Other (please list)	

## QUALITY IMPACT

	Please 'X' ONE for each			Brief description of potential impact	Mitigation strategy and monitoring arrangements	Risk 5 x 5 risk matrix)	
	Chance of Impact on Indicator					Likelihood	Consequence
	Positive Impact	No Impact	Negative Impact				
	X	X	X				
<b>PATIENT SAFETY</b>							
Patient safety /adverse events	X			No direct link - indirectly linked to capability of post holders			



Mortality position	X			No direct link - indirectly linked to capability of post holders			
Infection control MRSA/CDIFF	X			No direct link - indirectly linked to capability of post holders			
CQC status	X			No direct link - indirectly linked to capability of post holders			
NHSLA / CNST	X			No direct link - indirectly linked to capability of post holders			
Mandatory/statutory training	X			No direct link - indirectly linked to capability of post holders			
Workforce (vacancy turnover absence)	X			Potential reduction of sickness absence and turnover			
Safe environment	X			Mitigating risk of staff unfit to carry out their duties and creating hazards for themselves and others			
Standard & suitability of equipment	X			No direct link - indirectly linked to capability of post holders			
<b>CLINICAL EFFECTIVENESS</b>							
NICE Guidance and National Quality Standards, eg VTE, Stroke, Dementia	X			No direct link - indirectly linked to capability of post holders			
Patient related outcome measures	X			No direct link - indirectly linked to capability of post holders			

External accreditation e.g. professional bodies ie RCN	X			Substance misuse could impact upon continuing registration			
CQUIN achievement	X			No direct link - indirectly linked to capability of post holders			
<b>PATIENT EXPERIENCE</b>							
Will there be an impact on patient experience if so how	X			No direct link - indirectly linked to capability of post holders			
Will it impact on carers if so how	X			Secures a safer working environment for those coming into contact/liasing with staff			
<b>INEQUALITIES OF CARE</b>							
Will it create / reduce variation in care provision?	X			Mitigates the risk of variation in care provision due to impaired capabilities of staff responsible for patient care			
<b>STAFF EXPERIENCE</b>							
What is the impact on workforce capability care and skills?	X			Mitigates risk of impaired capability of individuals and reduces risk of impact on colleagues			
Will there be a change in working practice, if so, how?		X		No change to working practice but standardises expectations regarding behaviour across the ICB			
Will there be an impact on training		X		There will no impact on how training is delivered			
<b>TARGETS / PERFORMANCE</b>							
Will it have an impact on performance, if so, how?		X		No baseline measure has been taken as information not available			

Could it impact on the achievement of local, regional, national targets, if so, how?	X		Potentially, if substance misuse of post holder(s) singularly or culmulatively significantly impacts upon service delivery		
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## EQUALITY IMPACT

Analysis Rating (see completion notes)	Red		Red/Amber		Amber		Green	X
Approved by:	Commissioner Lead:				GP lead for E&D:			
	Date				Date			

## Local Profile Data

General	Total Employed - 65
Gender (Men and Women)	Males - 21.54% Females - 78.46%
Race (All Racial Groups)	White - 81.54% Asian- 4.62% Any Other Ethnic Group - 1.54% Undefined -10.77% Not Stated - 1.54%
Disability (Mental and Physical, Sensory Impairment, Autism, Mental Health Issues)	No - 18.46% Not Declared - 1.54% Undefined - 80%
Religion or Belief	Christianity - 10.77% I do not wish to disclose - 6.15% Undefined - 83.08%

Sexual Orientation (Heterosexual, Homosexual and Bisexual)	Heterosexual - 10.77% I do not wish to disclose - 6.15% Undefined - 83.08%
Pregnancy and Maternity	No Information currently available
Transgender	No Information currently available
Marital Status	Civil Partnership - 1.54% Divorced - 10.77% Married - 61.54% Single - 26.15%
Age	21 - 25 - 1.54% 26 - 30 - 3.08% 31 - 35 - 9.23% 36 - 40 - 18.46% 41 - 45 - 6.15% 46 - 50 - 20% 51 - 55 - 18.46% 56 - 60 - 20% 61 - 65 - 1.54% 66 - 70 - 1.54%
<b>Equality Data</b>	
Is any equality data available relating to the use or implementation of this policy, project or function?	Yes
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.	Staff Consultation Social Partnership Forum Policy Group

Promoting inclusivity; How does the project, service or function contribute to our aims of eliminating discrimination and promoting equality and diversity?

This Policy does not directly promote inclusivity, but provides a clear framework to manage sickness absence

### Equality Impact Risk 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
Gender (Men and Women)	x			
Race (All Racial Groups)	x			
Disability (Mental and Physical, Sensory Impairment, Autism, Mental Health Issues)	x			
Religion or Belief	x			
Sexual Orientation (Heterosexual, Homosexual and Bisexual)	x			
Pregnancy and Maternity	x			
Transgender	x			
Marital Status	x			
Age	x			

### Action Planning

As a result of performing this Equality Impact 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 Action:	Responsible Lead	Completion Date	Review Date

n/a				
<b>SUSTAINABILITY IMPACT</b>				
<p>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.</p>				
	Positive Impact	Negative Impact	No Specific Impact	What will the impact be? If the impact is negative, how can it be mitigated? (action)
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	