



# Safeguarding Children Policy

## July 2022

<b>Authorship:</b>	Designated Nurses Safeguarding Children, North Yorkshire.
<b>Committee Approved:</b>	ICB Quality Committee
<b>Approved date:</b>	October / 2022
<b>Review Date:</b>	October / 2024
<b>Equality Impact Assessment:</b>	Completed included at Appendix 1. Initial impact assessment undertaken using H&NY Tool. No impact identified which would require patient experience, patient safety, clinical effectiveness or workforce assessments to be undertaken.
<b>Target Audience:</b>	ICB and its Committees and Sub-Committees, ICB Staff, agency and temporary staff & third parties under contract
<b>Policy Number:</b>	ICB 30
<b>Version Number:</b>	0.1

**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.

New Version Number	Issued by	Nature of Amendment	Approving Body	Approval Date	Date Published on Website
N/A	North Yorkshire CCG	N/A	Joint Quality and Clinical Governance Committee		April 2021
0.1	Humber & North Yorkshire ICB	Amendment of North Yorkshire CCG Policy to meet requirements of H&NY ICB	ICB Quality Committee	October 2022	October 2022



## Contents

1.0	Introduction.....	4
2.0	Purpose .....	4
3.0	Definitions / Explanation of Terms .....	4
4.0	Prevent and the NHS.....	6
5.0	Scope of the Policy .....	8
6.0	Duties, Accountabilities and Responsibilities.....	8
7.0	Policy Procedural Requirements .....	11
8.0	Public Sector Equality Duty.....	11
9.0	Consultation.....	11
10.0	Training.....	122
11.0	Monitoring Compliance with the Document.....	12
12.0	Arrangements for Review .....	12
13.0	Dissemination .....	12
14.0	Associated Documentation .....	12
15.0	References .....	<b>Error! Bookmark not defined.</b>
	Appendix 1 Equality Impact Assessment.....	14



## 1.0 Introduction

- 1.1 NHS Humber and North Yorkshire ICB adopts a zero-tolerance approach to child abuse and neglect and will work to ensure that its policies and practices are consistent with agreed place-based multi-agency procedures and meet the organisation's legal obligations.
- 1.2 This policy outlines how, as an NHS organisation, the ICB will fulfil its legal duties and statutory responsibilities effectively both within the ICB and across the health economy in Humber and North Yorkshire. As such, the ICB will ensure that there are in place robust structures, systems and quality standards for safeguarding children, and for promoting the health and welfare of Looked After Children, which are in accordance with the legal structure and with the multi-agency Safeguarding Children Partnerships across the Humber and North Yorkshire footprint.

## 2.0 Purpose

- 2.1 The Children Acts of 1989 and 2004 and the associated statutory guidance, 'Working Together to Safeguard Children', (HM Gov, 2018) set out the principles for safeguarding and promoting the welfare of children and young people across all agencies.
- 2.2 Safeguarding Vulnerable People in the NHS: Accountability and Assurance Framework (NHS E&I, 2022) describes the safeguarding roles, duties and responsibilities of all organisations in the NHS.
- 2.3 This policy outlines how the ICB will discharge these duties in order to protect the safety and welfare of all children.
- 2.4 This will also be in accordance with agreed multi-agency safeguarding children procedures of multi-agency Safeguarding Children Partnerships across Humber and North Yorkshire.

## 3.0 Definitions / Explanation of Terms

- 3.1 Definitions in relation to the following terms used within this document are taken from statutory guidance (HM Government, 2018):
- 3.2 **"Child" or "young person"**: In this document, as in the Children Acts 1989 and 2004, a '*child*' is anyone who has not yet reached their 18<sup>th</sup> birthday. For disabled children this will be inclusive of those up to and including 18 years of age. The fact that a child has reached 16 years of age, is living independently or is in further education does not change their entitlement to services or protection under the Children Act 1989. Where '*child*' or '*children*' is used in this document, this refers to children and young people
- 3.3 **'Safeguarding' and 'promoting the welfare of children'** – this is defined as:
  - protecting children from maltreatment
  - preventing impairment of children's health or development
  - ensuring that children are growing up in circumstances consistent with the provision of safe and effective care



- taking action to enable all children to have the best outcomes

- 3.4 **‘Child Protection’** – this is one element of safeguarding children practice and refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm.
- 3.5 **‘Abuse’** - this is a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults, or another child or children.

Statutory guidance (HM Government, 2018) identifies the different categories of abuse:

- 3.6 **Physical abuse** – this may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.
- 3.7 **Emotional abuse** – this is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child’s emotional development. Emotional abuse may involve conveying to children they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or ‘making fun’ of what they say or how they communicate. Emotional abuse may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child’s developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.
- 3.8 **Sexual abuse** – involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.
- 3.9 **Child Sexual Exploitation** – this is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange



for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

- 3.10 **Child Criminal Exploitation** - Child criminal exploitation occurs where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18 into any criminal activity:
- In exchange for something the victim needs or wants.
  - For the financial or other advantage of the perpetrator or facilitator.
  - Through violence or the threat of violence.
- 3.11 The victim may have been criminally exploited even if the activity appears consensual. Child criminal exploitation does not always involve physical contact, it can also occur through the use of technology
- 3.12 **Neglect** – this is the persistent failure to meet a child’s basic physical and/or psychological needs, likely to result in the serious impairment of the child’s health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:
- Provide adequate food, clothing and shelter (including exclusion from home or abandonment);
  - Protect a child from physical and emotional harm or danger;
  - Ensure adequate supervision (including the use of inadequate care-givers);
  - Ensure access to appropriate medical care or treatment.
  - It may also include neglect of, or unresponsiveness to, a child’s basic emotional needs.
- 3.13 **‘Significant Harm’** - some children are in need because they are suffering, or likely to suffer, significant harm. The Children Act 1989 introduced the concept of significant harm as the threshold that justifies compulsory intervention in family life in the best interests of children. It gives local authorities a duty to make enquiries to decide whether they should take action to safeguard or promote the welfare of a child who is suffering, or likely to suffer, significant harm.
- 3.14 **‘Designated Professionals’** – throughout this policy, ‘Designated Professionals’ is a generic term encompassing Designated Doctors, Nurses and Professionals, unless stated otherwise. Designated Professionals are the strategic leads for safeguarding across the health economy.

## 4.0 PREVENT and the NHS

- 4.1 The Health Service is a key partner in the Prevent agenda in accordance with the Statutory Prevent Duty Guidance in the Counter-Terrorism and Security Act 2015 revised 2019, and it applies to all parts of the NHS including charitable organisations and



private sector bodies which deliver health services directly or indirectly to NHS patients. This also applies to any services commissioned by NHS Humber and North Yorkshire ICB.

- 4.2 All ICB staff have a key role in Prevent. The strategy focuses on working with vulnerable individuals who may be at risk of being exploited by radicalisers and subsequently drawn into terrorist-related activity.
- 4.3 If you have concerns about an individual patient or member of staff who may be susceptible to radicalisation and/or violent extremism, or you suspect them of being engaged in terrorist activity, please contact a member of the ICB Safeguarding team for specific advice. Contact the police on 999 if there is imminent risk or danger present.
- 4.4 **Spotting the Signs**
- 4.5 There is no single profile of a person likely to become involved in extremism and the process of radicalisation is different for every person. Radicalisers use normal social processes such as loyalty, self-perception, and fear of exclusion to influence others.
- 4.6 Some of the signs where a vulnerable person is being groomed or drawn into extremism can be linked to changes in behaviour and thought processes. The person may become withdrawn or stop participating in his / her usual activities. A person may express feelings of anger, grievance, injustice; and this may lead to issues including: going missing from their home, school or care setting, having a new group of friends who have an extremist ideology, using language that supports 'us and them' thinking.
- 4.7 **Channel Process**
- 4.8 The Channel process is a key element of the Contest strategy and is a multi-agency approach to receiving referrals from agencies to protect and prevent vulnerable people at risk from radicalisation.
- 4.9 **Information Sharing and PREVENT**
- 4.10 Effective information sharing is essential to the delivery of the Prevent agenda as it enables partner agencies to take informed action as appropriate. This will sometimes require the sharing of information between partner agencies, including the ICB; to ensure that the best support is provided to the individual at risk of radicalisation.
- 4.11 The decision to share information is on a case-by-case basis, and consideration will be given to:
- Is the public interest served by disclosure of personal information and does this outweigh the public interest served by protecting confidentiality?
  - Could your action prevent a serious crime?
  - Notice, Check and Share is the process that practice staff can use to manage any



PREVENT concern and enables informed decisions to be made on actions required.

- 4.12 **Notice:** if you have a cause for concern about someone, perhaps their altered attitude or change in behaviour
- 4.13 **Check:** discuss concerns with an appropriate other (ICB Safeguarding Officer or Designated Professional)
- 4.14 **Share:** appropriate, proportionate information

## 5.0 Scope of the Policy

- 5.1 This policy applies to the Integrated Care Board, Integrated Care Partnership, Committees and Sub-Committees, ICB Staff, agency and temporary staff and third parties under contract, including any person acting as an apprentice or volunteer basis. Any reference to staff or individuals applies to all the aforementioned.

Due to the statutory responsibilities of safeguarding, the consequence of non-compliance with this policy could result in disciplinary action being taken.

## 6.0 Duties, Accountabilities and Responsibilities

<b>ICB</b>	<p>Statutory guidance states that the ICB is required to demonstrate compliance with Section 11 of the Children Act, 2004. This places a duty on organisations and individuals for ensuring their functions and any services they contract out to others, are discharged with the regard to the need to safeguard and promote the welfare of children.</p> <p>As a major commissioner of local health services, the ICB is responsible for quality assurance of safeguarding children standards through contractual arrangements with all provider organisations including from independent providers. (HM Government, 2018).</p> <p>Under statutory guidance in relation to the Children and Social Work Act 2017, the ICB, together with the police and local authority, are under a duty to make arrangements to work together, and with other partners locally, to safeguard and promote the welfare of all children in their area.</p> <p>The ICB is required to secure the expertise of Designated Doctors and Nurses for Safeguarding Children and for Looked After Children and a Designated Doctor for Deaths in Childhood. (NHS CB, 2018)</p> <p>The ICB is also required to employ Named GPs to advise and support GP safeguarding practice leads. GPs should have a lead and deputy lead for safeguarding within the practice, who should work closely with the Named GP based within the ICB. (HM Government, 2018).</p>
------------	---





<b>Integrated Care Board</b>	The Integrated Care Board is responsible for the safeguarding children arrangements within the ICB; and is responsible for reviewing and maintaining an effective system of internal control, including systems and resources for managing all types of risk associated with safeguarding children.
<b>ICB Chief Executive</b>	<p>The Chief Executive is accountable and responsible for ensuring that the contribution of the ICB to safeguarding and promoting the welfare of children is discharged effectively. This includes the new specific partnership responsibilities under the Children and Social Work Act (2017).</p> <p>The Chief Executive is also responsible for ensuring the ICB is compliant with Section 11 of the Children Act 2004; this is discharged through the Executive Lead for Safeguarding Children.</p>
<b>Executive Lead for Safeguarding</b>	The Executive Lead for Safeguarding Children is the Executive Director for Nursing and Quality, who is responsible, along with the Chief Executive, for ensuring that the ICB discharges its duties in relation to safeguarding children.
<b>Designated Professionals Team</b>	<p>The Designated Professionals Teams should be taken as referring to the Designated Nurses and Doctors for Safeguarding Children, and Designated Doctors for Deaths in Childhood.</p> <p>The Designated Professionals are clinical experts and take a strategic and professional lead on safeguarding children across the health economy of the ICB. They are also required to act as a vital source of safeguarding advice and expertise for all relevant organisations and agencies but particularly the ICB, NHS England, and the local authorities, and for advice and support to other health practitioners across the health economy. (HM Government, 2018).</p> <p>The Designated Professionals work closely with all Named Doctors and specialist nurses for safeguarding children across the health economy to support the implementation of this agenda: ensuring safe processes, up to date internal procedures, and training strategies to meet the learning and development needs of staff.</p> <p>The Designated Professionals will access advanced training and supervision commensurate with their roles as per national guidance (RCN, 2019 or subsequent iterations).</p> <p>The Designated Professionals report to the Executive Lead for Safeguarding within the ICB and to relevant quality structures.</p>
<b>Named GP</b>	The role of the Named GP is to act as safeguarding champions for General Practice in their locality. They take a strategic and professional lead on ensuring that safeguarding children is embedded in the practice, training policies and procedures. They work closely with the Designated Professionals and Primary Care Safeguarding Leads to act work as a source of expert advice to Primary Care.



<b>ICB Personnel</b>	<p>All ICB personnel have an individual responsibility for the protection and welfare of children and must know what to do if concerned that a child is being abused or neglected.</p> <p>Advice regarding individual cases can be accessed from the place-based Safeguarding Children Teams who will also record and store information in accordance with information governance requirements.</p> <p>Guidance may also be found in “What to do if you’re worried a child is being abused, Advice for practitioners” 2015, accessible at: <a href="https://www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused--2">https://www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused--2</a></p> <p>Where abuse or neglect is suspected or known, staff are required to make a referral to Children’s Social Care in accordance with relevant place-based multi-agency procedures.</p> <p>Procedures and safeguarding children referral information can be accessed via the following websites:</p> <p>City of York: <a href="https://www.saferchildrenyork.org.uk/">https://www.saferchildrenyork.org.uk/</a></p> <p>East Riding: <a href="https://www.erscp.co.uk/">https://www.erscp.co.uk/</a></p> <p>Hull: <a href="https://www.hullscp.co.uk/">https://www.hullscp.co.uk/</a></p> <p>North Yorkshire: <a href="http://www.safeguardingchildren.co.uk">http://www.safeguardingchildren.co.uk</a></p> <p>North Lincolnshire: <a href="https://www.northlincscmars.co.uk/">https://www.northlincscmars.co.uk/</a></p> <p>North East Lincolnshire: <a href="http://safeguarding-children-partnership/">http://safeguarding-children-partnership/</a></p>
<b>ICB Human Resources Services</b>	<p>The ICB Human Resources Services will ensure that:</p> <ul style="list-style-type: none"><li>• Safe recruitment policies and practice are in places which meet current NHS Employment Check Standards in relation to all staff, including those on fixed-term contracts, temporary staff, locums, bank staff, agency staff, volunteers, students and trainees.</li><li>• Post- recruitment employment checks are repeated in line with all contemporary national guidance and legislation.</li><li>• Employment practices meet the requirements of the Disclosure and Barring Service (DBS) and that referrals are made to the DBS and relevant professional bodies where indicated, for their consideration in relation to barring.</li><li>• All contracts of employment (including staff on fixed-term contracts, temporary staff, locums, bank staff, agency staff, volunteers, students and trainees) include an explicit reference to staff responsibility for safeguarding children and adults.</li><li>• The ICB, via the Designated Professionals, HR Services and relevant personnel within the multi-agency safeguarding partnerships will ensure that all safeguarding children concerns</li></ul>



	<p>relating to a member of ICB staff are effectively investigated, and that any disciplinary processes are concluded irrespective of a person's resignation, and that 'compromise agreements' are not be allowed in safeguarding cases. The ICB Managing Allegations Against Staff Policy should be followed along with multi-agency procedures from the Safeguarding Children Partnerships.</p> <ul style="list-style-type: none"><li>• HR Services will work with the Designated Professionals to support the ICB regarding the reporting and management of Serious Safeguarding Incidents notified by the ICB and provider organisation</li></ul>
--	--

## 6.1 Responsibilities for Approval

The Humber and North Yorkshire ICB Board will approve the first iteration of this policy. The ICS Quality Committee will approve subsequent versions thereafter.

## 7.0 Policy Procedural Requirements

7.1 The way in which this policy must operationalised, including roles and responsibilities of ICB staff, is described in table 5.1

## 8.0 Public Sector Equality Duty

8.1 In line with the ICB Equality and Diversity Policies, this policy aims to safeguard all children and young people who may be at risk of abuse, irrespective of disability, race, religion/belief, colour, language, birth, nationality, ethnic or national origin, gender or sexual orientation. Approaches to safeguarding children must be child centred, upholding the welfare of the child as paramount. (Children Acts, 1989 and 2004).

8.2 All ICB staff must respect the alleged victim's (and their family's/ carers) culture, religious beliefs, gender and sexuality. However, this must not prevent action to safeguard children and young people who are at risk of, or experiencing, abuse. Support in clarifying or understanding diversity issues can be sought from the Equality and Diversity department within the commissioning support organisation.

8.3 All reasonable endeavours must be used to establish the child, young person and families/carer's preferred method of communication, and to communicate in a way they can understand. This will include ensuring access to an interpretation service where people use languages (including signing) other than English. Every effort must be made to respect the person's preferences regarding gender and background of the interpreter.

## 9.0 Consultation

9.1 No formal consultation is required for this policy

9.2 Partner agencies may seek assurance that this policy is in place as part of the ICB statutory requirement to be compliant with Section 11 of the Children Act (2004)



## 10.0 Training

- 10.1 All ICB staff must be trained and competent to be alert to potential indicators of abuse and neglect in children, know how to act on their concerns and fulfil their responsibilities in line with safeguarding partnership procedures and the Safeguarding Children and Young People Competencies for Health Care Staff Intercollegiate Document (RCN, 2019 or subsequent iterations).
- 10.2 The ICB Safeguarding Children Training Strategy describes how staff can access training and the levels of training required, commensurate with their role.
- 10.3 The ICB will keep a training database detailing the uptake of staff training across the ICB, so that Line Managers can be alerted to unmet training needs.

## 11.0 Monitoring Compliance with the Document

- 11.1 Audit of awareness of safeguarding children processes will be undertaken via agreed personnel appraisal processes.
- 11.2 Breaches to this policy will be exception reported to ICB quality structures.

## 12.0 Arrangements for Review

- 12.1 This policy will be reviewed two years from the date of issue. Earlier review may be required in response to exceptional circumstances, organisational change or relevant changes in legislation/guidance, as instructed by the senior manager responsible for this policy.

## 13.0 Dissemination

- 13.1 The ICB Director of Nursing and Quality is responsible for the effective dissemination of this policy and should make arrangements for the dissemination of policies as follows:
- ensure the policy is added to the ICB website
  - ensure the policy is added to the ICB intranet
  - staff will be notified of the policy via email, and staff bulletins and briefings

## 14.0 Associated Documentation

- 14.1 This policy should be read in conjunction with the following ICB policies:
- Managing Allegations Against Staff Policy
  - Domestic Abuse Policy
  - Disciplinary Policy
  - Recruitment and Selection Policy
  - Safeguarding Adults Policy



- Safeguarding Supervision Policy
- Training and Development Policy
- Whistle Blowing Policy

## 15.0 References

Children Act 1989 <http://www.legislation.gov.uk/ukpga/1989/41/contents>

Children Act 2004 <http://www.legislation.gov.uk/ukpga/2004/31/contents>

HM Government (2018) *Working Together to Safeguard Children*  
<https://www.gov.uk/government/publications/working-together-to-safeguard-children--2>

DH (2015) *Promoting the Health and Wellbeing of Looked After Children*  
<https://www.gov.uk/government/publications/promoting-the-health>

RCN (2019) *Safeguarding Children and Young People: Roles and competences for health care staff. Intercollegiate Document Third Edition*  
<https://www.rcn.org.uk/professional-development/publications/pub-007366>

NHS (2022) Safeguarding Children, Young People and Adults at Risk in the NHS: Safeguarding Accountability and Assurance Framework  
[https://www.england.nhs.uk/wp-content/uploads/2015/07/B0818\\_Safeguarding-children-young-people-and-adults-at-risk-in-the-NHS-Safeguarding-accountability-and-assuran.pdf](https://www.england.nhs.uk/wp-content/uploads/2015/07/B0818_Safeguarding-children-young-people-and-adults-at-risk-in-the-NHS-Safeguarding-accountability-and-assuran.pdf)



## Appendix 1 Equality Impact Assessment

1. Equality Impact Assessment		
<b>Policy / Project / Function:</b>	Safeguarding Children Policy	
<b>Date of Analysis:</b>	18.05.22	
<b>This Equality Impact Assessment was completed by: (Name and Department)</b>	Elaine Wyllie and Karen Hedgley, Designated Nurses for Safeguarding Children and Children in Care, North Yorkshire CCG	
<b>What are the aims and intended effects of this policy, project or function?</b>	To inform ICB staff of their roles and responsibilities in regard to safeguarding children.	
<b>Please list any other policies that are related to or referred to as part of this analysis?</b>	<ul style="list-style-type: none"> <li>• Staff Experiencing Domestic Abuse</li> <li>• Safeguarding Adults</li> <li>• Managing Allegations Against Staff</li> <li>• Safeguarding Supervision</li> </ul>	
<b>Who does the policy, project or function affect?</b>  <b>Please Tick ✓</b>	Type	Tick those affected
	Employees	✓
	Service Users	
	Members of the Public	
	Other (List Below)	



## 2. Equality Impact Assessment: 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 (eg from previous engagement) to evidence this impact
	Yes	No	Yes	No	
<b>Race</b>		✓		✓	Considered neutral impact
<b>Age</b>		✓		✓	Considered neutral impact
<b>Sexual Orientation</b>		✓		✓	Considered neutral impact
<b>Disability</b>		✓		✓	Considered neutral impact
<b>Sex</b>		✓		✓	Considered neutral impact
<b>Gender Reassignment</b>		✓		✓	Considered neutral impact
<b>Pregnancy and Maternity</b>		✓		✓	Considered neutral impact
<b>Marriage and Civil Partnership</b>		✓		✓	Considered neutral impact
<b>Religion or Belief</b>		✓		✓	Considered neutral impact
<b>Reasoning</b>	Earlier safeguarding children policies adopted in constituent CCGs have also previously assessed this policy has no impact on people with protected characteristics.				
<b>If there is no positive or negative impact on any of the Nine Protected Characteristics go to Section 7 Equality Impact Analysis Findings</b>					



## Equality Data

Each area's equality data is attached here:



East%20Riding%20CCG.docx



Hull%20CCG.docx



North%20East%20Lincs%20CCG.docx



North%20Lincs%20CCG.docx



North%20Yorkshire%20CCG.docx



Vale%20of%20York%20CCG.docx

Race	
Age	
Sexual Orientation	
Disability	
Sex	
Gender Reassignment	
Pregnancy and Maternity	
Marriage and Civil Partnership	
Religion or Belief	
Race	





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

**Is any Equality Data available relating to the use or implementation of this policy, project or function?**

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 *Protected Characteristics* – referred to hereafter as ‘*Equality Groups*’.

Examples of *Equality Data* include: (this list is not definitive)

1. Application success rates  
*Equality Groups*
2. Complaints by *Equality Groups*
3. Service usage and withdrawal of services by *Equality Groups*
4. Grievances or decisions upheld and dismissed by *Equality Groups*
5. *Previous EIAs*

Yes	
No	X Identification of data to be sought post implementation.

Where you have answered yes, please incorporate this data when performing the *Equality Impact Assessment Test* (the next section of this document).

**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**

Consultation undertaken with the Designated Professionals across the ICS in the development of this policy.

**Promoting Inclusivity  
How does the project, service or function contribute towards our aims of eliminating discrimination**

This Policy does not directly promote inclusivity but is designed to assist all employees to practice in a way that supports eliminating discrimination and promoting equality and diversity.



and promoting equality and diversity within our organisation

### 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* ?  
**As there is no positive or negative impact on any of the Nine Protected Characteristics this section is not required to be completed.**

Protected Characteristic	No Impact	Positive Impact	Negative Impact	Evidence of impact and if applicable, justification where a <i>Genuine Determining Reason</i> exists
Race				
Age				
Sexual Orientation				
Disability				
Sex				
Gender Reassignment				
Pregnancy and Maternity				
Marriage and Civil Partnership				
Religion or Belief				

### 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*?



As there is no positive or negative impact on any of the Nine Protected Characteristics this section is not required to be completed.

Identified Potential Issue	Recommended Actions	Responsible Lead	Completion Date	Review Date

## 7. Equality Impact Analysis Findings

Analysis Rating:	Red		Red / Amber		Amber		Green	✓
			Actions		Wording for Policy / Project / Function			
<b>Red</b>  <b>Stop and remove the policy / stop the project / stop the function</b>	<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.		<b>Remove the policy</b> <b>Stop the project</b> <b>Stop the function</b>  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.		No wording needed as policy / project / function stopped			



<p><b>Red / Amber</b></p> <p><b>Continue the policy / Continue the project / Continue the function</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 / project / function 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 reduce the risk]</i></b></p>
<p><b>Amber</b></p> <p>Adjust the Policy / adjust the project / adjust the function</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 / project / function 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>No major change</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 / project / function 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>
--	---	--	---