NHS Professionals

Disability Equality Scheme 2006/2009

Foreword by the NHS Professionals Chair and Managing Director

We are delighted to present this foreword to the NHS Professionals’ Disability Equality Scheme 2006/2009.

In order to become the NHS Partner of choice, NHS Professionals must consider its commitment to legislative requirements for Public Authorities.

Amendments to the Disability Discrimination Act 1995, which came into force on 4th December 2006, require all NHS Authorities to actively promote disability equality and to produce a Disability Equality Scheme.

The Act makes it unlawful to discriminate against disabled people, or people who have had a disability, in several areas including employment, access to goods and services, education and transport.

We believe NHS Professionals is in a unique position to promote Disability Equality in the NHS through our staff, partnership working with NHS Trusts and leverage with suppliers. We are committed to promoting disability equality for internal and external customers, within our working practices and through the services that we purchase during the normal course of our duties.

This scheme will ensure that we are compliant with the requirements of legislation by enabling NHS Professionals to take action to identify and address attitudinal, institutional and physical barriers that disadvantage disabled people in accessing employment and services.

Paul Roche
Managing Director

Richard Martin
Chairman
1. Background

Amendments to the Disability Discrimination Act (DDA) 1995 in force on 4 December 2006 require all NHS Authorities to actively promote disability equality. To support authorities in meeting this duty, the regulations give key public bodies’ specific duties to produce a Disability Equality Scheme (DES) and the duties set out what should be involved within that scheme.

This means that NHS organisations, including NHS Professionals, will have to take action to identify and address attitudinal, institutional and physical barriers that disadvantage disabled people in accessing employment and services.

1.1 The Disability Discrimination Act

The Disability Discrimination Act (DDA) 1995 makes it unlawful to discriminate against disabled people, or people who have had a disability, in several areas including employment, access to goods and services, education and transport.

Public authorities, including NHS organisations, are now required to make reasonable adjustments to their premises, policies and services where they make it impossible or unreasonably difficult for disabled people to make use of their services. There is emphasis throughout the DDA on taking steps to meet disabled people’s needs, even if this requires more favourable treatment.

Disability for the purposes of the Act is defined as ‘a physical or mental impairment which has a substantial and long term adverse effect on a person’s ability to carry out normal day to day activities’

Discrimination, in this context, is the less favourable treatment because of, or for a reason related to, a person’s disability or a failure to make a reasonable adjustment. Even if the discrimination, harassment or victimisation is unintentional it will still be unlawful.

In April 2005 the DDA was amended, and extended the definition of disability to include HIV, Multiple Sclerosis and cancer. There was also a change in the classification for mental illness, which now no longer needs to be “clinically well recognised” to be classed as an impairment. It also introduced the Disability Equality Duty.

1.2 The Disability Equality Duty

The Disability Equality Duty is a positive duty to actively promote equality of opportunity for disabled people. Equality has to be mainstreamed into all policies, procedures and activities at the outset.

The duty covers all functions and activities, including budget setting, commissioning, procurement, regulatory functions and setting the framework within which the organisations will deliver services.

Under the General Disability Equality Duty we must:

- Promote equality of opportunity for disabled people
- Eliminate unlawful discrimination - either direct discrimination which relates to less favourable treatment of a disabled person due to their disability, or failure to make reasonable adjustments
- Eliminate disability related harassment
- Promote positive attitudes towards disabled people
- Encourage participation by disabled people in public life
• Take steps to take account of disabled people’s needs, even if this requires more favourable treatment

Under the **Employment Duty** we must:

• Ensure that our recruitment processes, arrangements for determining who should be offered employment and the terms on which employment is offered do not put disabled people at a disadvantage.
• Review the terms of employment offered and the opportunities which are available such as promotion, transfer, training or receiving any other benefit. Refusal of any such opportunity on the grounds of a person’s disability would be seen as discrimination.
• Review other formal processes including disciplinary, dismissal and redundancy policies, and prevent disability related harassment.

Under the **Specific Duty**, we must develop and publish a DES by 4 December 2006. This document constitutes a proposed DES based on material provided by NHS Employers and guidance on what employers need to know and do.

2. Development of the NHS Professionals DES

2.1 Role of the Equalities Steering Group

Establishing a steering group at senior level to oversee the implementation of the disability equality scheme, with ownership at board level, indicates organisational commitment and accountability, and gives corporate and flexible workers and our partner trusts confidence in its implementation.

The National NHS Professionals Equalities Steering Group was established in 2006 to oversee the development, implementation and review of the Race Equality Scheme. This includes in its membership:

Non executive director/Board member
Director of HR, Marketing and Communications
Trade union representatives

The role of this group will be extended to include the development, implementation and review of the DES. Its membership and terms of reference will be reviewed accordingly.

2.2 Elements of the DES

There are nine essential elements to be included within any disability equality scheme in order to comply with the regulations. These are:

1. **Introduction** – an introduction at the beginning of the scheme from the chair and Managing Director, endorsing the action plan and emphasising the commitment and active participation of the Board in making it work.

2. **Involvement** – how disabled people have been involved in developing the scheme.

3. **Mapping** – what arrangements will be put in place for gathering information about the organisation’s performance on disability equality?

4. **Impact assessment** – arrangements to be put in place to assess the impact of the organisation’s policies and procedures on disability equality, and how the results will be used for improvement.
5. **Assessing existing policies** – how existing policies and procedures will be assessed for any impact on disability equality within the three-year period of the disability equality scheme.

6. **The action plan** – a three-year plan of how the organisation intends to promote disability equality and mainstream it into all of its functions and policies.

7. **Monitoring** – how the effectiveness of the action plan will be monitored and reviewed and will inform subsequent schemes.

8. **Engagement** – how the organisation intends to involve and work with internal and external partners to assist in making improvements.

9. **Publication** – how and where the results of impact assessment and monitoring will be published.

3. **Development of the elements of the DES**

3.1 **Introduction**

This document includes a foreword from the NHS Professionals Chair and Managing Director endorsing a clear commitment from the highest level of the organisation about active participation of the Board.

This document will be signed off by the Equalities Steering Group at their meeting on 7 December 2006, by the Executive Team on 15 January 2007 and the Board on 13 February 2007 (provisional date). It will be available for consultation within the organisation via the intranet and externally via the website from 4 December 2006, subject to finalisation following amendments at these meetings.

3.2 **Involving disabled people**

The new Disability Equality Duty means that NHS organisations are legally required to actively involve disabled people in achieving disability equality. Involving disabled people from the outset will help NHS organisations identify priorities for actions on disability.

Disabled people should be actively involved in:

- developing methods of data collection
- research into barriers to participation
- disseminating evidence
- identifying gaps in employment functions and services to the public
- agreeing the way forward, including what should be incorporated into the action plan.

NHS Professionals will involve disabled people in the development of its DES by:

- conducting a survey of corporate and flexible workers to identify issues and methods of involvement
- seeking views from partner NHS Trusts

A questionnaire is in development.

3.3 **Mapping**

We must set out in our DES arrangements for making use of any information gathered using both qualitative and quantitative data to ensure robust evidence is gained as a basis for the action plan.
In order to monitor services effectively for any relevance to disability equality, it is necessary to have information on how many of our staff and service users are disabled.

NHS Professionals do not systematically hold any disability data either for corporate staff or for flexible workers. For corporate staff this information will be collected in a planned data collection exercise that will take place sometime after April 2007. Storage and reporting on this data will be achieved by using the payroll system to link all personal and employment information.

For flexible workers disability data is now collected on the application form and is entered on to the recruitment module; this though does not permit linking with work history. To allow reporting of this data this information will need to be additionally entered on to Staff Bank system, a minor process change. This information will only be available for new recruits; it will not be feasible to retrospectively collect data on the current 58,000 bank staff.

Reporting on and analysing disability data will be more difficult than the equivalent reporting on other equality data due to the enormous range of type disabilities and the fact that as requested the disability is self defined not necessarily as defined under legislation. While there would be obvious groupings of disability types, these will show a wide range of severity and impact upon an employee’s association with NHS Professionals.

Additional information will be gathered through:

• assessing outcomes of staff and service user surveys
• consulting with disability staff network groups in NHS trusts
• consulting with voluntary and statutory organisations

Over the next six months we will be developing a methodology for mapping namely:

• Reviewing the functions of the organisation as identified for the Race Equality Scheme
• Mapping out the disability information that is already available or that might be easily gathered in the future.
• Working out where the gaps in information are; involving disabled people in prioritising the gaps to be filled and how best to do this by consultation on our intranet and web site.
• Reviewing the information we have to identify the problems, where the situation is unclear
• Do more detailed follow-up work, such as focus groups and independent research where required.
• Report on the evidence gathered to the Equalities Steering Group.
• Involve disabled people in agreeing the way forward.
• Incorporate the agreed next steps in the next version of the DES in December 2007.

3.4 Impact assessment

Any new policy, process or function must be impact assessed to make sure it does not disadvantage disabled people. This involves screening the policy to establish if it is relevant to disability equality, and if so, a full impact assessment will be required.

All current policies, processes and functions should also be continuously monitored and reviewed for relevance to the duty. These have been identified during the production of the race equality scheme and are to be revised by the steering group.

Assessments will be carried out in an open and transparent way through the relevant operational group. The results of impact assessments will be published on our website, so that the process of obtaining the results is open to public scrutiny.
If a new policy is relevant to the duty to promote disability equality, a **full impact assessment** will be required. This will enable us to see if the policy is likely to have any adverse effects on disabled people and to either make changes to the policy or consider other measures to mitigate those effects.

The steps to be completed in order to carry out a full impact assessment are:

- Identify policy aims.
- Consider the data and research.
- Assess the likely impact on disability equality.
- Consider the alternative policies.
- Involve and consult relevant stakeholders.
- Make a decision on the policy.
- Make arrangements to monitor and review the way the policy works.
- Publish the results of the assessment.

### 3.4 Assessing existing policies

The Equalities Steering Group has arrangements in place to assess existing policies for relevance and assessed in order of relevance to disability equality. A timetable will be drawn up for the assessments to be completed within the three year lifetime of the DES.

Once it is found which policies are relevant to disability equality, they will be assigned a high, medium or low priority on assessment as follows:

**High impact**

- Outcomes are relevant to the delivery of key business objectives
- The policy / function does not promote disability equality, so would not meet the requirements of disability legislation if implemented
- Disproportionate and unjustifiable adverse impact on staff, service users and/or the community.

**Low impact**

- Some differential impact but without disproportionate or inequitable outcomes
  - reasonably justified
- The policy is not an immediate priority for the organisation
  - There is no relevance.

**Medium impact**

The assessment falls between the two categories above.

Managers responsible for procurement will make sure that the services they purchase are also assessed for any relevance to disability equality. This will include ensuring that the contractor has measures in place to meet the Disability Equality Duty.

In line with assessing all present policies for adverse impact on disability equality, all present contracts should be reviewed and revised if necessary to include criteria such as:

- information on the DDA in standard terms and conditions for contracting services
- inserting a clause in contracts specifying that the contractor must comply with the anti-discrimination provisions of the DDA
- specifying in a contract what evidence the contractor needs to gather to demonstrate compliance with the duties
• ensuring that disability equality is appropriately reflected and given due consideration in the specification, selection and award criteria, and the contract conditions
• ensuring that contractors fully understand the disability equality requirements of the contract
• monitoring the performance of disability equality where relevant to the contract.

3.6 Action plan

The DES action plan will outline the steps we intend to take to meet the general duty over the period of the scheme. The action plan will have clear objectives about promoting disability equality, with steps to achieve this, and a realistic timetable for meeting the objectives.

It will also indicate responsibilities for implementing the various aspects of the action plan and give a clear indication of the specific outcomes it hopes to achieve to ensure disability equality in key employment and service delivery areas.

Information gathered from involvement with disabled people and from any assessment of existing policies will dictate the priority actions. Information should include other sources, such as the Disability Rights Commission’s reports.

As a summary, the action plan will include proposals on:

• monitoring all policies and functions which have a disability equality dimension
• Impact assessments, with timescales for completion
• Future involvement and engagement with disabled people and how disparities in employment and service delivery will be addressed
• ensuring access to information and services, including physical access to premises, as well as action to improve written and verbal communication
• Training staff on the requirements of the DDA
• Timetable for taking this work forward, including clear targets, and outcomes
• Resources needed to take actions forward
• Responsibilities for taking actions forward and who will be ultimately accountable.

The action plan will be published on our intranet and website as soon as it is available.

3.7 Monitoring the action plan

Progress will be monitored by the use of performance indicators which will inform future disability equality schemes with criteria for successful outcomes of the proposed actions identified.

We will also use existing auditing processes, such as recruitment equality data, to monitor progress on employment functions.

3.8 Engagement

To ensure disability equality, we will work with other internal and external organisations and partners to look beyond the service normally provided, to see how engagement with partners can help make improvements.

3.9 Reporting progress and publication

Progress on the action plan will be reported at least once a year to the NHS Professionals Board and the results of impact assessments reported on the intranet as they are carried out.
By reporting progress we will be ensuring that our workforce is informed by regular updates via internal channels such as the internal website, staff notices and newsletters. We will ensure that the information is given in accessible formats where needed.

4. Planning Framework

Over the next six months the Equalities Steering Group will work through the following plan:

1. Review membership and terms of reference and establish Board responsibility with regular feedback / reports received

2. Establish working group with regular reports on progress given to the steering group

3. Identify outcomes required for action plan with key organisational targets around employment and service provision identified and included in the action plan.

4. Identify who to involve – internal and external to the organisation

5. Identify what data is available and/or how to obtain data in the future

6. Identify measures for gathering information including a DES survey

7. Establish arrangements for impact assessment for new policies and functions

8. Identify arrangements for impact assessing present policies and functions

9. Identify arrangements for the assessment of outsourced services

10. Develop an action plan based on the sample action plan provided

11. Agree the monitoring arrangements

12. Identify routes / methods of engagement with other organizations

5. Consultation arrangements

The proposals on the DES are now available for consultation. Comments should be sent to the mailbox.

VERSION HISTORY

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<td>Janet Martin, National Head of HR</td>
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<td>0.2</td>
<td>05.02.07</td>
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