



**Name of Meeting**  
People and Organisational  
Development Committee  
**Date of Meeting**  
06 February 2024  
**Agenda item:**  
4.2

## Policy / Procedure Approval Report

### Section 1 - Policy / Procedure Information

<b>Policy / Procedure Title</b>	<b>Redeployment Policy</b>
<b>Policy Lead</b>	<b>Jan Mellowship, Assistant People &amp; OD Partner</b>
<b>Lead Executive</b>	<b>Neil Lewis, Director of People &amp; OD</b>
<b>PHW / All Wales?</b>	<b>PHW</b>
<b>Date of last Review</b>	<b>28/04/2016</b>
<b>Is the current policy / procedure within review date?</b>	<b>no</b>
<b>Approving Body /Group</b>	<b>Leadership Team</b>
<b>Version Number</b>	<b>0a</b>

### Section 2: Recommendation

That the People and Organisational Development Committee

- **Considers** the information contained within the Policy and Equalities Impact Assessment
- **Note** that the Leadership Team have endorsed the Policy to the People and Organisational Development Committee for approval
- **Approve** the Redeployment Policy
- **Approve** the archive of the Redundancy Policy (noting that there is an All Wales Redundancy Policy).



<b>Section 3 – Details of the Review:</b>	
<b>Background:</b>	
<b>Reason for review</b>	<ul style="list-style-type: none"> <li>• review deadline due / passed</li> </ul>
<b>Description/Assessment</b>	<p>Provide an assessment of the matter/document including a brief background as to why the document is needed.</p> <p><b>Redeployment policy was due for review. Following input from the policy workshop the policy has been stripped back, supporting procedure containing the detail has been developed, along with a flow chart, The major change in the policy is that employees will need to have 2 years' service to be eligible for redeployment</b></p>
<b>Consultation</b>	
Has this Policy / Procedure been through the appropriate 28 day consultation process?	Yes
Date range of consultation:	15 <sup>th</sup> December 2023 – 12 <sup>th</sup> January 2024
Please provide details of any feedback received and outline what changes if any were made to the document as a result:	Feedback given was in regard to points 4.1.2 and 4.3 to review the language to make it sound less formal
(Add detail)	Removed the word 'investigation' and; support is available from TU representatives in place of employees to speak to their TU representative Points 4.1.2 and 4.3 amended
Had this policy / procedure been considered by any other groups?	Yes
If so, please provide detail of any comments / feedback or amendments made to the documents as a result of this	Local Partnership Forum – no further comments were received.  Leadership Team – comments incorporated from Rachel Attwood. The Leadership Team welcomed the merger of the Redundancy and Redeployment Policy and endorsed the updated Redeployment Policy.
(Add detail)	For clarity regarding the redundancy policy and redeployment being



	merged: Redeployment related to potential redundancy is covered by the All Wales Change policy so we have made that clear, the All Wales Change policy then refers onto the All Wales Redundancy policy.
<b>Section 4: Impact Assessments</b>	
<b>Equality and Health Impact Assessment</b>	No issues identified.
<b>Welsh Language Impact</b>	The Policy will be translated to welsh and available on the internet bilingually.
<b>Risk and Assurance</b>	
<b>Health and Care Standards</b>	This Policy / Procedure supports and/or takes into account the <u>Health and Care Standards for NHS Wales Quality Themes</u>
	Choose an item.
	Choose an item.
<b>Financial implications</b>	No Financial risk
<b>People implications</b>	No People implications
<b>Socio Economic Duty</b>	

## 5 - Implementation

<b>Implementation plan (with timescales)</b>		
Next steps	Timescale	Responsible officer(s)
Policy to be approved by LPF	Jan 24	
Policy to be submitted to Leadership team	Jan 24	
Policy to be approved at POD Com	Feb 24	

## 6. Dissemination

The primary source for dissemination of this Policy will be within the organisation, wider community and our partners via the internet site.



GIG  
CYMRU  
NHS  
WALES

Iechyd Cyhoeddus  
Cymru  
Public Health  
Wales

**Reference Number:** TBC

**Version Number:** 0a

**Date of next review:** 3 years TBC

## Redeployment Policy

### Policy Statement

It is recognised across NHS Wales that the process of securing alternative employment for colleagues requires a consistent and committed approach from all parties. Public Health Wales is committed to following best practice in this.

This policy incorporates the principles for redeployment of employees in cases of:-

- Capability, e.g. Long term sickness or frequent short term sickness;
- Other health issues directly relating to an individual's occupation;
- Capability due to performance
- Flexible working requests/ work life balance issues
- As an outcome of a Disciplinary process
- Where it has not been possible to resolve conflict, e.g. in relation to Respect and Resolution issues;
- After a secondment or a Career Break, where the post has changed or could not be held vacant
- Non-renewal of a fixed term contract where the contract duration or total length of service is 2 years or more – see Procedure for Managing the Expiry of Fixed Term Contracts

In cases of redeployment related to potential redundancy situations, please see the All Wales Organisational Change Policy and All Wales Redundancy Policy (as per Appendix 2 of the All Wales Organisational Change Policy).

Public Health Wales makes every effort to retain the valuable skills, knowledge and experience of our people wherever possible. However, there may be circumstances where it is necessary to make organisational changes which could lead to redundancies, or employees may be unable to carry out the duties of their role, for a variety of reasons, either permanently or temporarily.

Where colleagues who becomes/is disabled needs adjustments to enable them to be redeployed into another post, specialist advice will be sought in relation to their practical needs which may be accessed through Occupational Health or from external sources, for example the Disability Employment Advisor (Employment Service), Shaw Trust, Remploy Interwork or other specialist organisations/charities. For further guidance please see the Appendix – Reasonable Adjustments.

## Policy Commitment

As an organisation, we have a duty of care for our Colleagues and, in line with our values of working together with trust and respect to make a difference, we want all staff to be treated fairly and equally with a kind and compassionate approach.

There is an expectation that all staff, including Directors and line managers make every effort to support the intention of this policy and; co-operate in the implementation of this policy in order to enable Public Health Wales to fulfil its obligations to its employees.

In addition to the All Wales Organisational Change Policy, other Public Health Wales Policies/ Protocols/ Guidelines may need to be cross referenced when considering redeployment, details below.

## Supporting Procedures and Written Control Documents

[All corporate policies and procedures are available on the Public Health Wales website](#)

To be read in conjunction with:

- Agenda for Change NHS Terms and Conditions of Service Handbook – NHS Wales
- All Wales Organisational Change Policy
- All Wales Capability Policy and Procedure
- Disciplinary Policy
- All Wales Managing Attendance at Work Policy
- Menopause Policy
- Procedure for Managing the Expiry of Fixed Term Contracts
- Redundancy Policy (as per Appendix 2 of the All Wales Organisational Change Policy)
- All Wales Respect and Resolution Policy
- All Wales Secondment Procedure
- Relocation Expenses Policy
- VERs Application Procedure
- Redeployment Procedure

## Scope

The policy will apply to all eligible employees of Public Health Wales. Please see Policy Statement for details.

<b>Equality and Health Impact Assessment</b>	Equality and Health Impact Assessment completed.
<b>Approved by</b>	People and Organisational Development Committee
<b>Approval Date</b>	TBC
<b>Review Date</b>	TBC
<b>Date of Publication:</b>	TBC
<b>Group with authority to approve supporting procedures</b>	People and Organisational Development Committee
<b>Accountable Executive Director/Director</b>	Neil Lewis, Director of People and Organisational Development
<b>Author</b>	Jan Mellowship, People and Organisational Development Jenny Ansell, People and Organisational Development

### Disclaimer

**If the review date of this document has passed please ensure that the version you are using is the most up to date either by contacting the document author or [the Board Business Unit](#).**

<b>Summary of reviews/amendments</b>				
<b>Version number</b>	<b>Date of Review</b>	<b>Date of Approval</b>	<b>Date published</b>	<b>Summary of Amendments</b>
	September 2022			Previous Redeployment and Redundancy Policies combined into a single document.  List all major changes below.

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## 1 Introduction

This policy outlines the process to be followed when an employee needs to be redeployed for reasons other than organisational change. The All Wales Organisational Change Policy (OCP) sets out the process for staff who need to be redeployed due to organisational change.

The All Wales Organisational Change Policy includes a Redundancy Policy which sets out all the measures which the organisation will explore to avoid compulsory redundancy and the procedure to be followed. A redundancy situation may also arise as a result of the non-renewal of a fixed term contract, the process is set out in the Procedure for Managing the Expiry of Fixed Term Contracts.

## 2 Aims and Objectives

The aim of the policy is to secure alternative employment for displaced employees within Public Health Wales to enable them to remain within the employment of Public Health Wales by moving them to an alternative vacant post which is more suited to their needs and/or abilities, or because it is no longer tenable for them to remain in their current role.

The objectives of the policy are:

- (i) To provide clear guidance to managers and employees regarding their role(s) in managing situations where employees need to be redeployed into suitable alternative posts;
- (ii) To thereby minimise the incidence of dismissal arising from organisational change, ill-health, capability, redundancy, etc. To ensure colleagues are aware of redeployment opportunities and the process followed to match appropriate vacancies with eligible staff.

Where a fixed-term position becomes permanent, please refer to Procedure for Managing Expiry of Fixed Term Contracts. These cases should be discussed with People and OD in the first instance.

## 3 Circumstances which may lead to Redeployment

### 3.1 Health reasons

Where it is recommended by Occupational Health that an employee can no longer carry out the duties of their post due to health reasons, redeployment on ill health grounds will be considered. Occupational Health will provide

guidance in respect of any post which becomes available. Where appropriate an assessment should be taken to determine if reasonable adjustments can be made to either the work environment or any specific duties of the post. Where this can be achieved, it may not be necessary to see redeployment to an alternative post. The above options must be considered prior to considering ill health retirement.

Please see the Appendix for further information about reasonable adjustments.

### 3.2 Temporary redeployment

There may be occasions when Occupational Health, a GP or Consultant suggests redeployment for a limited time, for example, an employee may be unable to perform their substantive duties while waiting for/recuperating from surgery or after a period of long term sickness. In these cases the temporary redeployment process should be managed in line with the All Wales Managing Attendance at work Policy and employees will not be placed on the redeployment register.

### 3.3 Capability process

The outcome of a capability process could also result in a member of staff being temporarily or permanently redeployed.

### 3.4 Respect and Resolution

Where a complaint has been made under the Respect and Resolution Policy, appropriate action will be considered to protect employees involved pending the outcome of any investigation, taking into account the needs of PHW and the rights of that individual. Where appropriate, this will be discussed with the third party. Any request that an employee makes for changes to their working arrangements during the investigation will also be considered. For example, a change to duties or working hours so as to avoid or minimise contact between the parties involved. The All Wales Respect and Resolution Policy should be followed.

### 3.5 Disciplinary process

The outcome of a disciplinary process could also result in a member of staff being temporarily or permanently redeployed.

### 3.6 Following a secondment or a career break

After a secondment or a Career Break, where the post has changed or could not be held vacant.

### 3.7 End of fixed term contract

Non-renewal of a fixed term contract where the contract duration or total length of service is 2 years or more. Please see Procedure for Managing Expiry of Fixed Term Contracts.

## 4 Roles and responsibilities

Whilst the process of attempting to find a redeployment opportunity is co-ordinated by People and OD, the responsibility and ownership for actions taken is shared with the Managers as well as with the individual concerned.

### 4.1 Managers

#### 4.1.1 Line Managers (existing managers):

- Liaise with People and OD, to identify suitable alternative employment opportunities and provide advice to employees in respect of this policy.
- Ensure familiarity with the policy and procedure to be followed and that staff are treated fairly and equitably.

#### 4.1.2 Appointing Managers:

- Appointing managers must consider the appointment of a redeployment candidate before considering any other applicant(s) and before a vacancy is advertised.
- Where an individual is not shortlisted staff for an identified suitable re-deployment vacancy, provide information/feedback to the People and OD team to support their decision.
- Ensure the timely provision of feedback following informal interviews.
- Ensure familiarity with the policy and procedure to be followed and that staff are treated fairly and equitably.

### 4.2 Colleagues

- Colleagues who are on the Redeployment Register are required to consider any suitable alternative roles. Should there be any dispute regarding suitability of a role then the employee and their line manager should discuss with People and OD. Support to employees is also available via Trade Union representatives. When placed on the redeployment register, review all vacancies, and should they identify a post which may be suitable, contact the People and OD team.

- Take all reasonable steps to consider options, participate in training provided by Public Health Wales, and pursue opportunities which may be suitable, in whatever way appropriate.

#### 4.3 People and OD

People and OD will be responsible for operationally managing the Redeployment register. Staff will be notified via Trac of any suitable alternative vacancies.

The People and OD team will:

- Provide staff on the Redeployment Register with necessary and relevant information, in respect of redeployment opportunities, to assist them to assess and make an informed decision regarding the suitability of a post.
- Contact the line manager if they fail to shortlist a member of staff for an identified suitable re-deployment vacancy, to ensure the matter is investigated and resolved appropriately and in a timely manner.
- Work with the appointing manager to ensure the timely provision of feedback following informal interviews.
- Advise the member of staff to contact a Trade Union representative for advice and support.

#### 4.4 Occupational Health Services

Occupational Health advice will be sought where appropriate on such issues as capabilities, nature of duties and hours of work etc.

Where a temporary reduction in hours is recommended by Occupational Health in order to facilitate a gradual return to full duties, reference should be made to the Managing Attendance at Work Policy and rehabilitation back into the workplace following sickness absence.

#### 4.5 Trade Union Representatives

Staff representatives have a role in supporting and advising employees regarding the redeployment process and working with the employee and managers to help achieve a successful outcome.

## 5 Pay Protection and other terms

Protection of pay will only apply in cases of redeployment as a result of sickness, organisational change or where the employee is found to be a victim of bullying and harassment, under the terms of the All Wales Respect and Resolution Policy.

If redeployment is to a lower pay band then the appointment will be made to the highest available point of the pay band allowable under NHS Terms and Conditions of Service Handbook.

### 5.1 Capability or disciplinary issues

Redeployment due to capability or disciplinary issues may result in no pay protection being provided. Advice should be sought from People and OD in such situations.

### 5.2 Temporary redeployment

Where the redeployment is only required for a limited time, such as in cases of rehabilitation back to work following ill-health then the employee's substantive post will be kept open. Such arrangements will take into account any Occupational Health advice.

Where the post available for redeployment is temporary or a secondment then the employee's substantive post will be kept open, if appropriate, and other substantive options will continue to be sought.

Where the reason for redeployment is due to ill-health and is being managed under the All Wales Managing Attendance at Work Policy with Occupational Health advice, the individual will, if appropriate, receive short-term protection of earnings in accordance with the NHS Terms and Conditions.

### 5.3 Expenses

With the exception of redundancy situations, excess travel and car parking expenses are payable for the trial period only.

### 5.4 Redeployment to a post more than one pay band lower than substantive post

If a member of staff wishes to be redeployed into a post which is more than one pay band lower than their current substantive post, this will not be deemed to be a 'suitable alternative post' and negotiation between the manager and member of staff will take place to agree a reasonable level of protection in these circumstances. Any such situations MUST be referred to the People and OD team for advice, before agreement is reached.

### 5.5 Trial period

Once an employee has undertaken one trial period, for any subsequent trial periods the period of pay protection will be reduced accordingly.

## 6 Training and awareness raising

All staff will be made aware of this policy upon commencement with Public Health Wales. Copies can also be viewed on the Public Health Wales internet site or obtained via the People and OD Team, [PeopleSupport.PHW@wales.nhs.uk](mailto:PeopleSupport.PHW@wales.nhs.uk)

In the event that individuals need to use this policy, advice and guidance can be sought from [PeopleSupport.PHW@wales.nhs.uk](mailto:PeopleSupport.PHW@wales.nhs.uk)

## 7 Monitoring and auditing

The policy lead will monitor and audit this policy as outlined in the EqHIA to ensure it is compliant with current legislation, and that it is implemented and adhered to.

## 8 Review and feedback

The policy and will be reviewed every three years or whenever a relevant change in legislation occurs.

We are continually looking to improve our employment practices and welcome any feedback you may have in relation to this policy.

Feedback can be provided by emailing, [PeopleSupport.PHW@wales.nhs.uk](mailto:PeopleSupport.PHW@wales.nhs.uk) or you may wish to provide feedback via your Trade Union.

## 9 Equality and Welsh language monitoring

This policy is inclusive of all staff regardless of age, disability, gender identity, marriage or civil partnership, pregnancy and maternity, race, religion or belief, sex or sexual orientation. This policy will be available in both Welsh and English.

## 10 Information Governance statement

All documents generated under this policy are official records of Public Health Wales and will be managed and stored and utilised in accordance

with the Public Health Wales' Guidance on Record Retention and Destruction.

This policy has the potential to deal with sensitive information and Public Health Wales staff involved need to be fully aware of the material they are handling.

DRAFT

## Appendix - Reasonable adjustments – Equality Act 2010

Throughout the application of this Policy, due regard must be given to the Equality Act 2010. Public Health Wales recognises that a disability should not bar a person from employment unless it would genuinely and significantly impede that person from doing the job in question, and there is nothing that Public Health Wales can reasonably do to overcome this. A disabled person must be given equal opportunities to take up employment and take up training opportunities even when adjustments would require treating that person more favourably than others.

### Definition

The Equality Act 2010 defines a disabled person as anyone with a physical or mental impairment, which has a substantial and long-term adverse effect on their ability to carry out normal day to day activities.

- (i) Physical Impairment includes, for instance, a weakening of part of the body caused through illness, by accident or congenitally.
- (ii) Mental Impairment includes a clinically well recognised mental illness, or learning disability.
- (iii) Substantial means that the effect is more than minor or trivial, but it does not have to be severe.
- (iv) Long-term adverse effect means that the effect has lasted or is likely to last for at least 12 months, and the effect is a detrimental one. A person whose life expectancy is less than 12 months is also covered if the effect is likely to last for the whole of that time.
- (v) Normal day to day activity means something that is carried out by most people on a fairly regular and frequent basis.

Under the Act, the person may be affected in one of the following respects:

- (i) Mobility
- (ii) Manual dexterity
- (iii) Continence
- (iv) Physical co-ordination
- (v) Ability to lift, carry or move everyday objects
- (vi) Speech, hearing or eyesight
- (vii) Memory or ability to concentrate, learn or understand
- (viii) Perception of the risk or physical danger

Also covered by the Act are:

- (i) Recurring or fluctuating conditions such as arthritis
- (ii) Conditions which progressively deteriorate such as multiple sclerosis, HIV and cancer

- (iii) Severe disfigurements

### **Reasonableness**

Reasonable adjustments will be made to working conditions where these would otherwise place a disabled person at a substantial disadvantage. Less favourable treatment of a disabled person for a reason related to the disability cannot be justified where the reason for the treatment can be removed, or made less than substantial, by reasonable adjustment. In determining the reasonableness of a proposed adjustment the following will be considered:

- (i) The effectiveness of the adjustment in preventing the disadvantage
- (ii) The extent to which it is practicable to make the adjustment
- (iii) The effects on the service provided
- (iv) Financial and other costs including any options for assistance (for example, via the Disability Advisory Service)

### **Advice**

Where a colleague has, through sickness or accident become disabled, Public Health Wales will assess the potential to retain the person in employment, either within the post currently occupied or in another identified and suitable role. Advice on the implications of the Disability Discrimination Acts should be sought at any stage of the application of the Managing Attendance at Work Policy from People and OD or from Trade Union representatives. The employee will be offered input from the Disability Advisory Service who will advise on work place adjustments, and where necessary possible alternative employment options. In certain cases, the Disability Advisory Service will contribute to the purchase of specific equipment or other workplace adjustments, which will enable the person to continue in employment. The employee will be involved in all of the above processes.

## Equality & Health Impact Assessment for *Breastfeeding Guidelines*

1.	For service change, provide the title of the Project Outline Document or Business Case and Reference Number	N/A
2.	Name of Clinical Board / Corporate Directorate and title of lead member of staff, including contact details	People and Organisational Development Jan Mellowship, Assistant People and OD Partner <a href="mailto:Janet.Mellowship@wales.nhs.uk">Janet.Mellowship@wales.nhs.uk</a>
3.	Objectives of strategy/ policy/ plan/ procedure/ service	The objectives of the policy are:  (i) To provide clear guidance to managers and employees regarding their role(s) in managing situations where employees need to be redeployed into suitable alternative posts;  (ii) To thereby minimise the incidence of dismissal arising from organisational change, ill-health, capability, redundancy, etc.
4.	Evidence and background information considered. For example <ul style="list-style-type: none"> <li>• population data</li> <li>• staff and service users data, as applicable</li> <li>• needs assessment</li> <li>• engagement and involvement findings</li> <li>• research</li> <li>• good practice guidelines</li> </ul>	Staff Data (All data has been taken from the ESR records as at Aug 2023)  <b>Age Profile</b> Age                      % ≤25                      6 26-35                    27 36-45                    27 46-55                    23

<ul style="list-style-type: none"> <li>• participant knowledge</li> <li>• list of stakeholders and how stakeholders have engaged in the development stages</li> <li>• comments from those involved in the designing and development stages</li> </ul> <p>Population pyramids are available from Public Health Wales Observatory and the 'Shaping Our Future Wellbeing' Strategy provides an overview of health need.</p>	<table> <tr> <td>56-65</td> <td>15</td> </tr> <tr> <td>66&gt;</td> <td>1</td> </tr> </table> <p><b>Disability</b> 6% of our staff have indicated that they have a disability, but this information is not known for 16% of staff.</p> <p><b>Gender</b> The gender breakdown of the organisation is approximately 74% female and 26% male.</p> <p>The gender breakdown of part time workers is approximately 20%.</p> <p><b>Ethnicity</b> 86% of our staff have indicated their ethnic group; of this proportion, 79% are White, 2.9% are Asian, 2.1% are Black and 1.7% fall into another ethnicity category (including mixed).</p> <p><b>Religious Belief</b></p> <table> <thead> <tr> <th>Belief</th> <th>%</th> </tr> </thead> <tbody> <tr> <td>Atheism</td> <td>24%</td> </tr> <tr> <td>Buddhism</td> <td>1%</td> </tr> <tr> <td>Christianity</td> <td>36%</td> </tr> <tr> <td>Hinduism</td> <td>1%</td> </tr> <tr> <td>Islam</td> <td>2%</td> </tr> <tr> <td>Not Disclosed</td> <td>14%</td> </tr> <tr> <td>Other</td> <td>9.4%</td> </tr> <tr> <td>Unspecified</td> <td>22%</td> </tr> </tbody> </table> <p><b>Sexuality</b> 81% of our staff have disclosed this information. 77% indicated they are heterosexual, 2.8% gay or lesbian, 2% bisexual and 18% unknown.</p>	56-65	15	66>	1	Belief	%	Atheism	24%	Buddhism	1%	Christianity	36%	Hinduism	1%	Islam	2%	Not Disclosed	14%	Other	9.4%	Unspecified	22%
56-65	15																						
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Not Disclosed	14%																						
Other	9.4%																						
Unspecified	22%																						

<b>5.</b>	Who will be affected by the strategy/ policy/ plan/ procedure/ service  Consider staff as well as the population that the project/change may affect to different degrees.	All staff groups across Public Health Wales

## 6. EQIA / How will the strategy, policy, plan, procedure and/or service impact on people?

Questions in this section relate to the impact on people on the basis of their 'protected characteristics'.

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps</b>	<b>Action taken by Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate <b>This column is to be updated in future reviews</b>	<b>Recommendations for improvement/ mitigation/ identified gaps or opportunities</b>
<b>6.1 Age</b> For most purposes, the main categories are: <ul style="list-style-type: none"> <li>• under 18;</li> <li>• between 18 and 65;</li> <li>and</li> </ul>	No positive or negative impact		

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps</b>	<b>Action taken by Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate <b>This column is to be updated in future reviews</b>	<b>Recommendations for improvement/ mitigation/ identified gaps or opportunities</b>
<ul style="list-style-type: none"> <li>• over 65</li> </ul>			
<b>6.2 Persons with a disability as defined in the Equality Act 2010</b> Those with physical impairments, learning disability, sensory loss or impairment, mental health conditions, long-term medical conditions such as diabetes	There is no specific evidence to suggest the guidance has a disproportionate impact on people in relation to disability.		
<b>6.3 People of different genders:</b> Consider men, women, people undergoing gender reassignment  <b>NB</b> Gender-reassignment is anyone who proposes to, starts, is going through or who has completed a	The policy applies to all staff, regardless of gender.		

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps</b>	<b>Action taken by Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate <b>This column is to be updated in future reviews</b>	<b>Recommendations for improvement/ mitigation/ identified gaps or opportunities</b>
process to change his or her gender with or without going through any medical procedures. Sometimes referred to as Trans or Transgender			
<b>6.4 People who are married or who have a civil partner.</b>	No positive or negative impact		
<b>6.5 Women who are expecting a baby, who are on a break from work after having a baby, or who are breastfeeding.</b>	No positive or negative impact		
<b>6.6 People of a different race, nationality, colour, culture or ethnic origin including non-English speakers,</b>	No positive or negative impact.		

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps</b>	<b>Action taken by Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate <b>This column is to be updated in future reviews</b>	<b>Recommendations for improvement/ mitigation/ identified gaps or opportunities</b>
<b>gypsies/travellers, migrant workers</b>			
<b>6.7 People with a religion or belief or with no religion or belief.</b> The term 'religion' includes a religious or philosophical belief	No positive or negative impact.		
<b>6.8 People who are attracted to other people of:</b> <ul style="list-style-type: none"> <li>• the opposite sex (heterosexual);</li> <li>• the same sex (lesbian or gay);</li> <li>• both sexes (bisexual)</li> </ul>	No positive or negative impact.		
<b>6.9 People according to their income related group:</b> Consider people on low income, economically	No positive or negative impact.		

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps</b>	<b>Action taken by Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate <b>This column is to be updated in future reviews</b>	<b>Recommendations for improvement/ mitigation/ identified gaps or opportunities</b>
inactive, unemployed/workless, people who are unable to work due to ill-health			
<b>6.10 People according to where they live:</b> Consider people living in areas known to exhibit poor economic and/or health indicators, people unable to access services and facilities	No positive or negative impact.		
<b>6.11 Consider any other groups and risk factors relevant to this strategy, policy, plan, procedure and/or service</b>	No positive or negative impact.		
<b>6.12 Welsh Language</b>			
<b>There are 2 key considerations to be made during the development of a policy, project, programme, service to ensure there are no adverse effects and/or a positive or increased positive effect on:</b>			

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps</b>	<b>Action taken by Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate <b>This column is to be updated in future reviews</b>	<b>Recommendations for improvement/ mitigation/ identified gaps or opportunities</b>
(please note these will continue to be reviewed to ensure Public Health Wales fulfils their duties to comply with one or more standards outlined within the Welsh Language Standards (No 7) Regulations 2018)			
<b>Opportunities for persons to use the Welsh language</b>	No positive or negative impact.		
<b>Treating the Welsh language no less favourably than the English language</b>	No positive or negative impact.		

### **Part 3 – Health**

Questions in this section relate to the impact on the health and wellbeing outcomes of the population **and** specific population groups who could be more impacted than others by a policy/project/proposal.

The part of the assessment identifies;

- which specific groups in the population could be impacted more (inequalities)
- what those potential impacts could be across the wider determinants of health framework?
- Potential gaps, opportunities to maximise positive H&WB outcomes
- Recommendations/mitigation to be considered by the decision makers

#### **7. Identification of specific population groups**

Use the WHIASU Population Groups checklist as a reference to identify the population groups who could be more impacted than others by a policy/project/proposal. The check list can be found on the PHW Integrated EqHIA guidance pages (requires link to PHW Intranet pages for additional information and resources)

The groups listed have been identified as more susceptible to poorer health and wellbeing outcomes (health inequalities) and therefore it is important to consider them in a HIA assessment. In a HIA, the groups identified, as more sensitive to potential impacts will depend on the characteristics of the local population, the context, and the nature of the proposal itself.

7.1 Groups identified	Rational/explanation
No positive/negative impact	It is recognised across NHS Wales that the process of securing alternative employment for displaced staff requires a consistent and committed approach from all parties. Public Health Wales is committed to following best practice in this.

### Assessment

Complete the wider determinants framework table below providing rational/evidence where appropriate:

1. Consider how the proposal could impact on the population and specific population groups identified above (positive/negative) for each of the wider determinants (the bullets under each determinant are there as a guide)
2. Record any unintended consequences (negative impacts) and/or gaps identified
3. Record any positive impacts or missed opportunities to maximise positive health and wellbeing outcomes
4. identify and record mitigation/recommendations where appropriate

**Please note** you may find that not all determinants are relevant to the project/plan however recording N/A is not acceptable a rational or evidence should be explained/referenced

Wider determinant for consideration	Positive impacts or additional opportunities	Unintended consequences or gaps	Population groups affected	Mitigation/recommendations
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<p><b>7.2 Lifestyles</b></p> <ul style="list-style-type: none"> <li>• Diet/nutrition/breastfeeding</li> <li>• Physical activity</li> <li>• Use of alcohol, cigarettes, e-cigarettes</li> <li>• Use of substances, non-prescribed drugs, abuse of prescription medication</li> <li>• Social media use</li> <li>• Sexual activity</li> <li>• Risk-taking activity i.e. gambling, addictive behaviour</li> </ul>	No impacts detected			
<p><b>7.3 Social and community influences on health</b></p> <ul style="list-style-type: none"> <li>• Adverse childhood experiences</li> <li>• Citizen power and influence</li> <li>• Community cohesion, identity, local pride</li> <li>• Community resilience</li> <li>• Domestic violence</li> <li>• Family relationships</li> <li>• Language, cultural and spirituality</li> <li>• Neighbourliness</li> <li>• Social exclusion i.e. homelessness</li> <li>• Parenting and infant attachment</li> <li>• Peer pressure</li> <li>• Racism</li> <li>• Sense of belonging</li> <li>• Social isolation/loneliness</li> <li>• Social capital/support/networks</li> <li>• Third sector &amp; volunteering</li> </ul>	No impacts detected			
<p><b>7.4 Mental Wellbeing</b></p> <ul style="list-style-type: none"> <li>• Does this proposal support sense of control?</li> <li>• Does it enable participation in community and economic life?</li> <li>• Does it impact on emotional wellbeing and resilience?</li> </ul>	No impacts detected			
<p><b>7.5 Living/ environmental conditions affecting health</b></p>	No positive or negative impact.			

<ul style="list-style-type: none"> <li>• Air quality</li> <li>• Attractiveness/access/availability/quality of area, green and blue space, natural space.</li> <li>• Health &amp; safety, community, individual, public/private space</li> <li>• Housing, quality/tenure/indoor environment</li> <li>• Light/noise/odours, pollution</li> <li>• Quality &amp; safety of play areas (formal/informal)</li> <li>• Road safety</li> <li>• Urban/rural built &amp; natural environment</li> <li>• Waste and recycling</li> <li>• Water quality</li> </ul>				
<p><b>7.6 Economic conditions affecting health</b></p> <ul style="list-style-type: none"> <li>• Unemployment</li> <li>• Income, poverty (incl. food and fuel)</li> <li>• Economic inactivity</li> <li>• Personal and household debt</li> <li>• Type of employment i.e. permanent/temp, full/part time</li> <li>• Workplace conditions i.e. environment culture, H&amp;S</li> </ul>	No positive or negative impact.			
<p><b>7.7 Access and quality of services</b></p> <ul style="list-style-type: none"> <li>• Careers advice</li> <li>• Education and training</li> <li>• Information technology, internet access, digital services</li> <li>• Leisure services</li> <li>• Medical and health services</li> <li>• Other caring services i.e. social care; Third Sector, youth services, child care</li> <li>• Public amenities i.e. village halls, libraries, community hub</li> <li>• Shops and commercial services</li> <li>• Transport including parking, public transport, active travel</li> </ul>	No positive or negative impact.			

<p><b>7.8 Macro-economic, environmental and sustainability factors</b></p> <ul style="list-style-type: none"> <li>• Biodiversity</li> <li>• Climate change/carbon reduction/flooding/heatwave</li> <li>• Cost of living i.e. food, rent, transport and house prices</li> <li>• Economic development including trade</li> <li>• Government policies i.e. Sustainable Development principle (integration; collaboration; involvement; long term thinking; and prevention)</li> <li>• Gross Domestic Product</li> <li>• Regeneration</li> </ul>	<p>No positive or negative impact.</p>			
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**Stage 3**

**Summary of key findings and actions Please answer question 8.1 following the completion of the EHIA and complete the action plan**

Key findings: Impacts/gaps/opportunities	Actions (what is needed and who needs to do) to address the identified mitigation and recommendations	Lead		
None.				

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**Alternatively, if appropriate, please explain the steps taken to consult with and consider the differential impact of the changes on the various protected characteristic groups (part 2) or any specific identified population groups (part 3).**