

Template Equality & Health Impact Assessment for Religious Observation Guidelines

Part 1

Please answer all questions:-

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	Jan Mellowship, Assistant People & Organisational Development Partner																								
3.	Objectives of strategy/ policy/ plan/ procedure/ service	The objective of these guidelines is to outline the support available to employees in respect of undertaking prayer or meditative practice in the workplace and to advise managers on the protocol for managing requests for such.																								
4.	<p>Evidence and background information considered. For example</p> <ul style="list-style-type: none"> • population data • staff and service users data, as applicable • needs assessment • engagement and involvement findings • research • good practice guidelines • participant knowledge 	<p>Staff data – information obtained from ESR – August 2022. 26% - a quarter of the workforce have either not disclosed or not specified their Religious Belief.</p> <table border="1" data-bbox="945 1190 1594 1453"> <thead> <tr> <th>Religious Belief</th> <th>Headcount</th> <th>%</th> <th>FTE</th> </tr> </thead> <tbody> <tr> <td>Atheism</td> <td>550</td> <td>23.2</td> <td>523.3</td> </tr> <tr> <td>Buddhism</td> <td>9</td> <td>0.4</td> <td>9.0</td> </tr> <tr> <td>Christianity</td> <td>890</td> <td>37.5</td> <td>805.8</td> </tr> <tr> <td>Hinduism</td> <td>14</td> <td>0.6</td> <td>14.0</td> </tr> <tr> <td>Islam</td> <td>42</td> <td>1.8</td> <td>41.2</td> </tr> </tbody> </table>	Religious Belief	Headcount	%	FTE	Atheism	550	23.2	523.3	Buddhism	9	0.4	9.0	Christianity	890	37.5	805.8	Hinduism	14	0.6	14.0	Islam	42	1.8	41.2
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- list of stakeholders and how stakeholders have engaged in the development stages
- comments from those involved in the designing and development stages

Population pyramids are available from Public Health Wales Observatory and the 'Shaping Our Future Wellbeing' Strategy provides an overview of health need.

Judaism	3	0.1	2.6
Not Disclosed	633	26.7	551.8
Other	229	9.6	209.7
Sikhism	4	0.2	4.0
Grand Total	2,374	100.00	2161.28

Population data

We have also considered the general population data for Wales, the most recent of which, in relation to religion was published in 2011.

Christian	1,763,299	57.6%
Buddhist	9,117	0.3%
Hindu	10,434	0.3%
Jewish	2,064	0.1%
Muslim	45,950	1.5%
Sikh	2,962	0.1%
Any Other Religion	12,705	0.4%

<http://gov.wales/docs/statistics/2012/121217sb1262012en.pdf>

Disability

2% of our staff have indicated that they have a disability, but this information is not known for 51% of staff.

Engagement

In preparing this policy, consultation has taken place through the Policy Development Group and the JNC.

Good Practice Guidelines

The following were reviewed when producing the guidelines;
http://www.acas.org.uk/media/pdf/f/l/religion_1.pdf

		<p>https://www.equalityhumanrights.com/en/advice-and-guidance/religion-or-belief-discrimination</p> <p>https://www.cipd.co.uk/knowledge/fundamentals/employment-law/religiousdiscrimination</p>
5.	<p>Who will be affected by the strategy/ policy/ plan/ procedure/ service</p> <p>Consider staff as well as the population that the project/change may affect to different degrees.</p>	<p>All employees of Public Health Wales (PHW), including those within hosted bodies, those with honorary contracts, agency staff, temporary and fixed term staff, secondees and students.</p>

Part 2- Equality and Welsh language

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'.

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps	Action taken by Directorate. Make reference to where the mitigation is included in the document, as appropriate This column is to be updated in future reviews	Recommendations for improvement/ mitigation/ identified gaps or opportunities
6.1 Age For most purposes, the main categories are: <ul style="list-style-type: none"> • under 18; • between 18 and 65; and • over 65 	No positive or negative impact	All staff are treated fairly and consistently in the application of these guidelines	
6.2 Persons with a disability as defined in the Equality Act 2010 Those with physical impairments, learning disability, sensory loss or impairment, mental health conditions, long-term	There may be a negative impact on those with disabilities in relation to accessing the allocated prayer room on a particular site	Line Managers to review arrangements with the individual and adjustments made to ensure they are able to access the room	

medical conditions such as diabetes			
<p>6.3 People of different genders: Consider men, women, people undergoing gender reassignment</p> <p>NB Gender-reassignment is anyone who proposes to, starts, is going through or who has completed a process to change his or her gender with or without going through any medical procedures. Sometimes referred to as Trans or Transgender</p>	No positive or negative impact	All staff are treated fairly and consistently in the application of these guidelines	
6.4 People who are married or who have a civil partner.	No positive or negative impact	All staff are treated fairly and consistently in the application of these guidelines	
6.5 Women who are expecting a baby, who are on a break from work after having a baby, or who are breastfeeding.	Women who are breastfeeding may be negatively impacted as the room allocated for breastfeeding is also the room to be utilised for prayer.	Line managers to discuss arrangements with breastfeeding women and where necessary ensure they book a meeting room elsewhere in CQ2 where they can	

		be guaranteed availability.	
<p>6.6 People of a different race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies/travellers, migrant workers</p>	No positive or negative impact	All staff are treated fairly and consistently in the application of these guidelines	
<p>6.7 People with a religion or belief or with no religion or belief. The term 'religion' includes a religious or philosophical belief</p>	<p>Those who wish to take time to pray or meditate during work may be negatively impacted, as it is not always clear where the dedicated room is for this purpose and in some locations, there is no facility to allocate a specific room for this purpose.</p> <p>Those who are observing Ramadan – individuals may be fasting and therefore get tired more easily Dress codes which ban headwear – an important religious symbol for some religions</p>	Employees should be encouraged to discuss their needs with their line manager.	

<p>6.8 People who are attracted to other people of:</p> <ul style="list-style-type: none"> • the opposite sex (heterosexual); • the same sex (lesbian or gay); • both sexes (bisexual) 	No positive or negative impact	All staff are treated fairly and consistently in the application of these guidelines	
<p>6.9 People according to their income related group: Consider people on low income, economically inactive, unemployed/workless, people who are unable to work due to ill-health</p>	No positive or negative impact	All staff are treated fairly and consistently in the application of these guidelines	
<p>6.10 People according to where they live: Consider people living in areas known to exhibit poor economic and/or health indicators, people unable to access services and facilities</p>	No positive or negative impact	All staff are treated fairly and consistently in the application of these guidelines	
<p>6.11 Consider any other groups and risk factors relevant to this strategy, policy, plan, procedure and/or service</p>	No other groups identified that may be positively or negatively impacted.		

6.12 Welsh Language			
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: (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)			
Opportunities for persons to use the Welsh language	No positive or negative impact	All staff are treated fairly and consistently in the application of these guidelines	
Treating the Welsh language no less favourably than the English language			

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 or negative impact	

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
7.2 Lifestyles <ul style="list-style-type: none"> • Diet/nutrition/breastfeeding • Physical activity • Use of alcohol, cigarettes, e-cigarettes • Use of substances, non-prescribed drugs, abuse of prescription medication • Social media use 	No positive or negative impact			

<ul style="list-style-type: none"> • Sexual activity • Risk-taking activity i.e. gambling, addictive behaviour 				
<p>7.3 Social and community influences on health</p> <ul style="list-style-type: none"> • Adverse childhood experiences • Citizen power and influence • Community cohesion, identity, local pride • Community resilience • Domestic violence • Family relationships • Language, cultural and spirituality • Neighbourliness • Social exclusion i.e. homelessness • Parenting and infant attachment • Peer pressure • Racism • Sense of belonging • Social isolation/loneliness • Social capital/support/networks • Third sector & volunteering 	<p>Potential positive impact for members of our communities who have a Religious Faith or Belief to feel respected and represented</p>			
<p>7.4 Mental Wellbeing</p> <ul style="list-style-type: none"> • Does this proposal support sense of control? • Does it enable participation in community and economic life? • Does it impact on emotional wellbeing and resilience? 	<p>Potential positive impact that PHW is acknowledging different religions or beliefs which is representative of communities in Wales</p>			
<p>7.5 Living/ environmental conditions affecting health</p> <ul style="list-style-type: none"> • Air quality • Attractiveness/access/availability/quality of area, green and blue space, natural space. • Health & safety, community, individual, public/private space 	<p>No positive or negative impact</p>			

<ul style="list-style-type: none"> • Housing, quality/tenure/indoor environment • Light/noise/odours, pollution • Quality & safety of play areas (formal/informal) • Road safety • Urban/rural built & natural environment • Waste and recycling • Water quality 				
<p>7.6 Economic conditions affecting health</p> <ul style="list-style-type: none"> • Unemployment • Income, poverty (incl. food and fuel) • Economic inactivity • Personal and household debt • Type of employment i.e. permanent/temp, full/part time • Workplace conditions i.e. environment culture, H&S 	No positive or negative impact			
<p>7.7 Access and quality of services</p> <ul style="list-style-type: none"> • Careers advice • Education and training • Information technology, internet access, digital services • Leisure services • Medical and health services • Other caring services i.e. social care; Third Sector, youth services, child care • Public amenities i.e. village halls, libraries, community hub • Shops and commercial services • Transport including parking, public transport, active travel 	No positive or negative impact			
<p>7.8 Macro-economic, environmental and sustainability factors</p> <ul style="list-style-type: none"> • Biodiversity • Climate change/carbon reduction/flooding/heatwave 	No positive or negative impact			

<ul style="list-style-type: none"> • Cost of living i.e. food, rent, transport and house prices • Economic development including trade • Government policies i.e. Sustainable Development principle (integration; collaboration; involvement; long term thinking; and prevention) • Gross Domestic Product • Regeneration 				
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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		
<p>The guidelines may impact those with a religion or belief, those with physical disabilities, breastfeeding women and staff not having the same experience – a quiet area in regional offices for PHW for prayer and/or meditation</p>	<p>The guideline aims to address any impact by ensuring that all staff are treated fairly and consistently with line managers providing support relevant to individual circumstances</p>			

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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).