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Wales

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ALL WALES RECRUITMENT AND RETENTION PAYMENT PROTOCOL

Policy Statement

The aim of the protocol is to provide information, advice and guidance on the process for determining an RRP and the process for consulting on the proposed RRP prior to implementation.

The policy is applicable to NHS Terms and Conditions of Service (AfC) posts where market pressures would otherwise prevent the Organisation from being able to recruit and retain staff in sufficient numbers (for the posts concerned) at the normal salary for the job

Supporting Procedures and Written Control Documents

N/A

Equality and Health Impact Assessment

See accompanying document

Approved by

People and Organisational Development Committee

Approval Date

04 July 2017

Review Date

March 2020

Date of Implementation/ Publication:

06 July 2017

Group with authority to approve supporting procedures

People and Organisational Development Committee

Accountable Executive Director/Director

Phil Bushby, Director of People and Organisational Development

Author

Welsh Partnership Forum

Disclaimer

If the review date of this document has passed please ensure that the version you are using is the most up to date by contacting [Corporate Governance](#).

Summary of reviews/amendments				
Version number	Date of Review	Date of Approval	Date published	Summary of Amendments
v2	March 2017	04 July 2017	06 July 2017	Amendments agreed by Welsh Partnership Forum

Public Health Wales

Recruitment & Retention Payment Protocol

Approved by: Welsh Partnership Forum Business Committee

Issue Date: March 2017

Review Date: March 2020

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Appendix A – Outline Business Case for a Recruitment & Retention Payment (RRP)

1. Introduction

1.1 The NHS pay system is predicated on the basis that employees will receive equal pay for work of equal value. However, it is accepted that market forces will apply to some jobs and some geographical areas. These market forces can be addressed by the payment of a local Recruitment & Retention Payment (RRP).

1.2 The principles and rules in respect of the payment of a RRP are laid down in section 5 and annex 10 of the NHS Terms & Conditions of Service Handbook.

1.3 Where organisations wish to introduce an RRP, the implementation of this protocol must be undertaken in partnership.

2. Purpose of this Protocol

The aim of the protocol is to provide information, advice and guidance on the process for determining an RRP and the process for consulting on the proposed RRP prior to implementation.

3. Scope

The policy is applicable to NHS Terms and Conditions of Service (AfC) posts where market pressures would otherwise prevent Public Health Wales from being able to recruit and retain staff in sufficient numbers (for the posts concerned) at the normal salary for the job.

4. Definitions / Glossary

Recruitment and Retention Payment (RRP) – are additions to the pay of a post or group of similar posts where market pressures would otherwise prevent the employer from being able to recruit or retain staff in sufficient numbers at the normal salary for jobs of that weight.

Short-term RRP – will apply where the labour market conditions giving rise to recruitment and retention problems are expected to be short-term and where the need for the premium is expected to disappear or reduce in the foreseeable future.

Long-term RRP – will apply where the relevant labour market conditions are more deep rooted and the need for the premium is not expected to vary significantly in the foreseeable future.

5. Standards and Practice

5.1 Types of recruitment and Retention Payment

There are two types of Recruitment and Retention Payment (RRP) currently available for consideration. They include locally agreed long-term RRP and locally agreed short-term RRP. Employers should decide in partnership with local staff representatives whether the problem is likely to be resolved in the foreseeable future (in which case any premiums should be short term) or

whether it is likely to continue indefinitely (in which case any premium should be long term).

All National RRP's ceased on 1 April 2013.

5.2 Determining the need for Local RRP

5.2.1 The case for payment of an RRP must be robust enough to resist the challenge of an Equal Pay / Equal Value claim. Thus as a general principle, NHS Organisations should demonstrate that they have exhausted all practical non-pay measures to resolve a recruitment and/or retention problem before considering payment of an RRP **and** that the payment of a RRP is likely to resolve the issue.

5.2.2 The main factors that will indicate a *prima-facie* case for consideration of a RRP are a consistent failure to recruit to a specific post(s) and/or a high level of staff turnover in a specific post(s). Thus in determining whether an RRP is appropriate, the following evidence should be gathered at departmental level in consultation with other appropriate departments e.g. finance, planning for inclusion in the outline business case (and in line with Annex 10 of the NHS Terms and Conditions of Service Handbook):

- evidence that all the new vacancies have been advertised in relevant local, regional, national and/or professional media
- evidence that recent adverts have produced insufficient suitable applications to fill all vacancies
- where recent adverts have produced insufficient suitable applications, the following information should be ascertained:
 - the media used
 - number of application packs requested
 - number of applications returned
 - reasons why those who applied were not suitable
 - the quality of recruitment documentation (advert, job description, person specification etc) should be scrutinised
 - consideration should be given to surveying people who requested application packages but did not submit for applications
 - where an applicant(s) was offered a position but rejected the offer, the reasons for not accepting the position
 - relevant national vacancy data
 - local labour market information
 - any expected increase in the supply of staff suitable for the post (e.g. new trainees).
- length of vacancy
- the turnover rates for the staff group concerned (has turnover risen sharply recently after a long period of stability? Is it only recently appointed staff who leave etc?)
- where possible, local turnover rates should be compared with national rates

- leaver questionnaires should be analysed and ideally exit interviews should be held to assess how far pay is a factor in an employee's decision to leave the organisation
- the position of neighbouring Organisations in relation to recruitment and/or retention of the staff group concerned (where neighbouring organisations employ the staff group concerned only)
- external non NHS rates of pay

NOTE: Some evidence should be provided against all the key bullet points above or, if it is not possible to provide evidence, an explanation as to why the evidence cannot be provided should be documented (e.g. it is not possible to detail turnover rates because it is a newly developed post or role etc.).

5.2.3 The department seeking payment of an RRP will complete Sections 1 – 6 of the attached Outline Business Case for a Recruitment and Retention Payment pro-forma (appendix A), which outlines the case and evidence based for the RRP. The pro-forma will be submitted to the Director of People & OD.

5.2.4 The organisation's People & OD Department will establish a panel comprising a balance of Management (Senior Manager(s) together with a representative from People & OD) and TU Representatives (from trades union not involved in the application). It is recommended that the minimum panel should consist of two management and two trade union representatives who should be sourced from within the organisation but who have no connection with the managerial area or trade union representing the staff group submitting the application.

5.2.5 The panel should meet to review the evidence gathered and, if it deems it appropriate, may ask representatives from the management area/staff group concerned to attend a meeting with the panel so that clarification regarding the detail of the application can be sought.

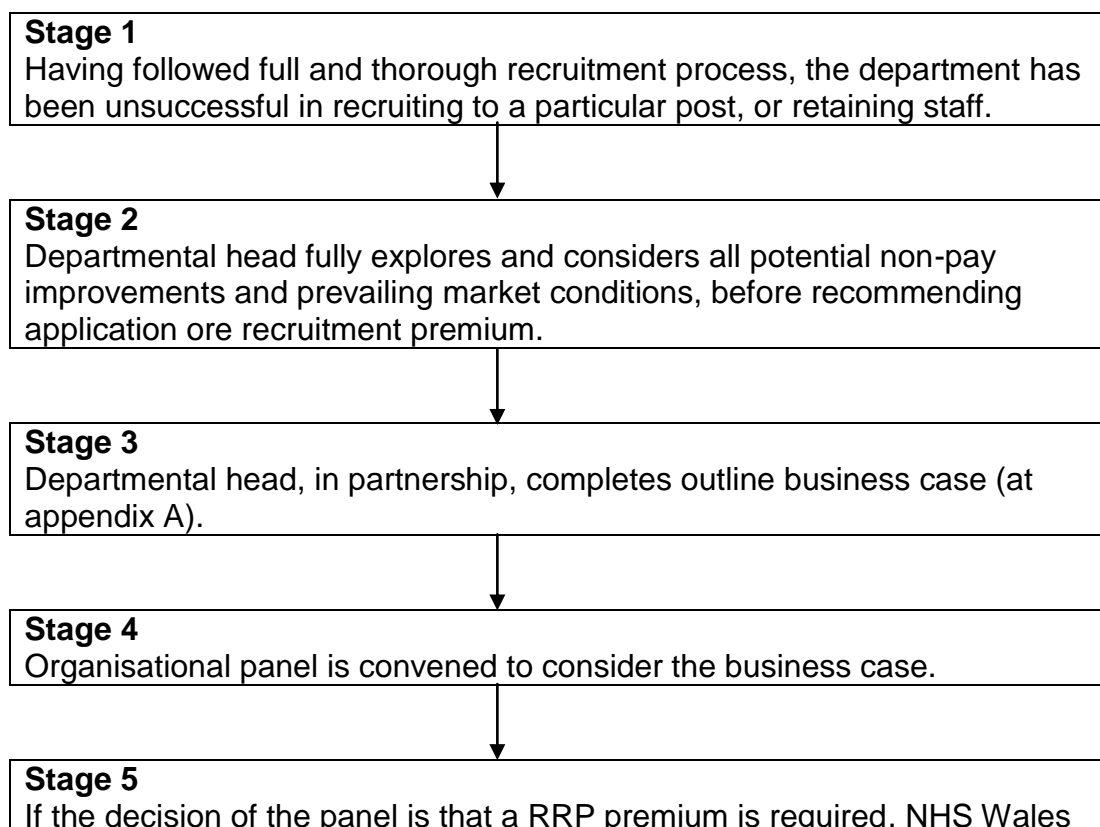
5.2.6 The panel will need to determine whether an RRP is appropriate and if so the type of RRP needed (short or long term) together with the level of any such RRP (refer to section 5 of the AFC Terms and Conditions of Service Handbook). The first test will always be, from the evidence gathered, can the recruitment and/or retention problem be resolved by the application of non-pay measures? It may be necessary for potential non-pay solutions to be applied and the impact of these analysed before making a final determination on the application of an RRP.

5.3 Consultation Process

5.3.1 Once an NHS Organisation has decided that a recruitment and/or retention problem can best be resolved through payment of an RRP, there is a requirement to consult with neighbouring employers, staff side organisations, and other stakeholders before implementing any premium. This section aims to provide a consistent method and timescale for conducting this consultation.

- 5.3.2** The NHS Organisation seeking payment of an RRP will amend and complete the Outline Business Case Pro-forma, with the exception of Section 7, and in particular should ensure that other stakeholders are clearly identified in Section 6.
- 5.3.3** NHS organisations will submit the completed pro-forma to NHS Wales Employers (NWE). NWE will then simultaneously circulate the completed pro-forma to the Joint Chairs the Local Partnership Fora of the neighbouring organisations, and any other stakeholders identified in Section 6 of the outline business case.
- 5.3.4** Once circulated the organisations/individuals will have 21 days in which to respond with comments to NHS Wales Employers.
- 5.3.5** At the end of the consultation period, the panel constituted by the NHS Organisation to consider the RRP will be re-convened to review the RRP in light of the comments received. A written report will be presented by NWE in order that Section 7 of the pro forma can be completed. If any changes are made to the proposed RRP as a result of these comments, NWE will inform those involved in the consultation process of the final recommendation.
- 5.3.6** NHS Wales Employers will receive the final recommendation (with supporting evidence) and submit this to Welsh Partnership Forum Business Committee (or a designated sub committee) for a final decision (the committee will also confirm the period of time for which the RRP will apply).

The above activities are summarised in the process pathway below:



Employers will lead engagement with neighbouring organisations and other stakeholders.

Stage 6

The organisational panel is reconvened to consider a report from NHS Wales Employers and to confirm their final recommendation.



Stage 7

Recommendation is submitted to the Welsh Partnership Forum Business Committee (or a designated sub committee) for a final decision (the committee will also confirm the period of time for which the RRP will apply).

5.3.7 Any extensions to the length of time for which a RRP will apply will also need to be agreed by the Welsh Partnership Forum Business Committee (or a designated subcommittee). The RRP will cease once expired unless re-submitted to the committee for an extension.

6. Monitoring

Public Health Wales should monitor the awarding of any new RRP's by the protected characteristics specified in the Equality Act 2010 and in particular gender.

Appendix A – Proposal for a Recruitment and Retention Payment (RRP)

NHS Wales

Outline business case for a recruitment and retention payment (RRP)

Ref: _____

Date: _____

Section 1
NHS organisation _____
Department _____
Contact _____
RRP Application being considered for the following staff group:
Post(s) affected: _____
Pay Band: _____
Number of posts: _____
Section 2
RRP Proposed: tick as appropriate
<input type="checkbox"/> New RRP
<input type="checkbox"/> Review of existing RRP
<input type="checkbox"/> Short Term RRP – Length of time: _____
<input type="checkbox"/> Long Term RRP – Length of time: _____
Proposed value: _____
Is this due to:
<input type="checkbox"/> Difficulties in recruiting staff
<input type="checkbox"/> Difficulties in retaining staff
<input type="checkbox"/> Both

Section 3 (Please provide documented evidence)

Statement of need and evidence – factors to include: results of exit interviews, response to adverts, information on market rates, turnover, external non NHS rates of pay, etc.

Section 4 (Please provide documented evidence)

Summary of other measures (and outcomes) already considered/carried out – e.g. flexible working, training, and recruitment initiatives.

Section 5 (Please provide documented evidence)

Expected measurable benefits

Section 6 (Please provide documented evidence)

Health economy implications – who else could be affected by this application and what stakeholders should be consulted over this application?

Section 7

Comments from the wider health economy (to be completed following engagement)

Section 8 (Please provide documented evidence)

Suggested value or RRP (per full time post)	£ <input type="text"/>
Number of employees	<input type="text"/>
Total cost	£ <input type="text"/>

Section 9

Expected Review Date: _____

Name of proposing manager: _____

Post: _____

Signature: _____ Date: _____

Workforce & OD Director signature: _____

Date: _____

Finance Director signature: _____

Date: _____

Staff Side signature: _____

Date: _____

For Office Use Only:-

Date Business Case Received: _____

Date Circulated and List of Recipients: _____

Comments received by: _____

Date recommendation submitted to WPF Business Committee: _____

Equality Impact Assessment: Screening Tool

When contemplating a new project, the planning process should take account of intended and unintended impacts on people protected by equalities legislation and on all disadvantaged groups.

For the purposes of Equality Impact Assessment, the term project includes:

- New policies and services
- Significant changes to existing policies or services
- Advice to, or collaborations with, partner organisations.

Services and amenities should be targeted according to need so that people who are most disadvantaged are prioritised and protected from negative health impacts.

Equality Impact Assessment includes the following:

Race	Religion/belief
Gender	Marriage and civil partnership
Disability	Pregnancy and maternity
Gender reassignment	Socio-economic disadvantage
Sexual orientation	Welsh language
Age	

Undertaking an Equality Impact Assessment **at an early stage of the planning process** and with involvement of the relevant groups ensures that equity issues are addressed. Identification of negative impacts, especially where no mitigation is planned, indicates the need to find a better way forward. This can be done by adjustments to the project or, if necessary, by means of a more detailed impact assessment.

Guidance notes are available to assist in completion of this Equality Impact Assessment screening tool.

Title of project	Recruitment & <u>Retention Policy (All Wales)</u>
Date of assessment	<u>May 2017</u>
Completing officer	<u>As this is an All Wales policy, Matthew Browne, Recruitment Talent and Attraction Manager this document is based upon the EQIA for the Recruitment & Selection Policy from a Public Health Wales perspective.</u>
Whose needs will the project address? (e.g. whole administrative area, specified population group)	All Managers within Public Health Wales who have a responsibility for any aspect of recruitment activity.
What is the project designed to achieve?	To support managers within Public Health Wales to recruit the highest calibre candidates and within legislative guidelines
Will people whom the project could potentially benefit be subject to access problems? Please consider matters such as location, gender of practitioner, medium and language.	The policy will benefit managers within Public Health Wales and will be available on the internet for ease of access.

Please consider the following population groups and describe the project's potential impacts.

Protected Characteristic	Potential impact on Equality /Health Inequalities/Health Inequity		
	Positive	Negative	No change
Race (consider ethnic group, language difficulties, health beliefs, etc.)	<p>Monitoring information collected through recruitment application forms includes race; however this is withheld from the shortlisting panel and does not impact the appointment process.</p> <p>PHW is committed to flexible working and equal opportunities and this is promoted across the organisation.</p>	<p>Candidates may be unsure about whether they hold recognised qualifications</p> <p>There may be an unconscious bias in our recruitment processes and we may struggle to attract individuals from mixed backgrounds due to our predominantly white workforce.</p> <p>Individuals from minority backgrounds whose first language is not English or Welsh may be disadvantaged by the application and recruitment process.</p> <p>Mitigation: People and OD function can provide advice on recognised qualifications. Training in</p>	<p>Opportunities:</p>

		<p>recruitment is available for hiring managers including discrimination awareness.</p> <p>In respect of language challenges, applications made in Welsh will receive correspondence in Welsh.</p>	
<p>Factors emerging from consulting this group:* Direct consultation has not taken place. A review of a selection of other Recruitment and Selection policies and EQIAs has been completed in order to assess any discriminatory or adverse impacts. Analysis of our demographics as at January 2017 January 2017 is included below.</p> <p>69% of our staff have indicated their ethnic group; of this proportion, 67% are White, and the remainder are Mixed - Any other mixed background 0.1%, Asian or Asian British – Indian 0.6%, Asian or Asian British – Pakistani 0.2, Asian or Asian British – Bangladeshi 0.1, Asian or Asian British - Any other Asian background 0.2, Asian Tamil 0.1, Black or Black British – Caribbean 0.1, Black or Black British – African 0.3, Chinese 0.1, Any Other Ethnic Group 0.2 and Japanese 0.1.</p>			
Gender	<p>Monitoring information collected includes gender; however this is withheld from the shortlisting panel or those who request RRP for vacant posts and does not impact the process.</p> <p>PHW is committed to flexible</p>	<p>There is a risk that recruitment is biased because of the gender split in our organisation.</p> <p>This is particularly exacerbated when part time workers data is viewed by gender. However, the RRP requirement is based on inability to recruit and not based</p>	Opportunities:

	working and equal opportunities and is promoted across the organisation.	<p>on gender. A decision would be made ahead of any recruitment activity.</p> <p>Mitigation: People and OD function can provide advice on recognised qualifications.</p> <p>Training in recruitment is available for hiring managers including discrimination awareness.</p>	
<p>Factors emerging from consulting this group:* Direct consultation has not taken place. A review of a selection of other Recruitment and Retention Selection policies and EQIAs would <u>have</u> been completed by the All Wales working group tasked with this policy in order to assess any discriminatory or adverse impacts. Our demographics as at January 2017 are as below:</p> <p>The gender breakdown of the organisation is approximately 80% female and 20% male.</p> <p>The gender breakdown of part time workers is approximately 90% female and 10% male.</p>			

Protected Characteristic	Potential impact on Equality /Health Inequalities/Health Inequity		
	Positive	Negative	No change
Disability: physical, mental and	Monitoring information collected from all applicants includes disability	It is noted that disability may be a barrier to completing	

<p>sensory (consider access, communication, etc.)</p>	<p>information; however this is withheld from the shortlisting panel and does and not part of the RRP decision, and will not impact the process.</p> <p>The Trust has been awarded the <u>Disability Confident Employer Positive About Disability certificate</u> (formally two ticks) symbol) and is committed to interview all disabled applicants who meet the minimum criteria for a job vacancy and to consider them on their abilities. Therefore, if an applicant who identifies themselves as disabled on NHS Jobs meets the minimum essential criteria for the post, they must be offered an interview. As the RRP decision will be made ahead of the Recruitment process, this will not impact on the process.</p> <p>Discriminatory questions must be avoided, ensuring that</p>	<p>applications on-line.</p> <p>Individuals may be disadvantaged in the recruitment process as a result of have a disability.</p> <p>Mitigation:</p> <p>Managers and the People and OD function are happy to support applicants who require assistance to complete applications.</p> <p>Individuals with disabilities are able to request reasonable adjustments to the recruitment process at application and invite to interview stage.</p> <p>Training in recruitment is available for hiring managers including discrimination awareness.</p>	<p>Opportunities:</p>
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	<p>questions focus on the applicant's ability to perform the job duties, and not on the potential difficulties that he or she might have in the job on account of an actual or potential disability.</p> <p>Managers are informed that there is no duty on job applicants to volunteer to disclose a disability to a prospective employer and that it is unlawful to ask about an applicant's health, which includes asking about disability, before offering the candidate a position, except in a limited set of circumstances.</p> <p>Occupational Health Checks are undertaken on all successful applicants where advice is given to support those with a disability.</p> <p>PHW is committed to flexible working and equal</p>		
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	opportunities and is promoted across the organisation.		
Factors emerging from involving this group: * Direct consultation has not taken place. A review of a selection of other Recruitment and Selection policies and EQIAs has been completed in order to assess any discriminatory or adverse impacts.			
Gender reassignment	<p>Monitoring information collected includes gender reassignment information; however this is withheld from the shortlisting panel and not part of the RRP decision processand does not impact the process.</p> <p>PHW is committed to flexible working and equal opportunities and is promoted across the organisation.</p>	<p>There is a risk of direct / indirect discrimination and unconscious bias in the recruitment process.</p> <p>Mitigation: Training in recruitment is available for hiring managers including discrimination awareness.</p>	Opportunities:
Factors emerging from involving this group: * Direct consultation has not taken place. A review of a selection of other Recruitment and Selection policies and EQIAs has been completed in order to assess any discriminatory or adverse impacts.			

Data for Gender Reassignment is not captured in the recruitment process.

Protected Characteristic	Potential impact on Equality /Health Inequalities/Health Inequity		
	Positive	Negative	No change
Sexual orientation (consider access to services, issues of prejudice, etc.)	Monitoring information collected includes sexual orientation; however this is withheld from the shortlisting panel <u>and not part of the RRP decision process</u> and does not impact the process. PHW is committed to flexible working and equal opportunities and is promoted across the organisation.	There is a risk of direct / indirect discrimination and unconscious bias in the recruitment process. Mitigation: Training in recruitment is available for hiring managers including discrimination awareness.	Opportunities:
<p>Factors emerging from consulting or involving this group: Direct consultation has not taken place. A review of a selection of other Recruitment and Selection policies and EQIAs has been completed in order to assess any discriminatory or adverse impacts.</p> <p>Sexual orientation data is not recorded in the recruitment process.</p>			

Age e.g. children	Monitoring information collected	There is a risk of direct / indirect discrimination and	
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<p>and young people, older people, physical and/or mental frailty.</p>	<p>includes age information; however this is withheld from the shortlisting panel and not part of the RRP decision process and does not impact the process.</p> <p>PHW supports the DWP Age Positive Campaign.</p> <p>Managers are advised that questions should focus on candidate's ability to perform the job, not age, disability, etc. and for importance not to be placed on length of experience as this will place younger candidates at a disability. Focus of importance is to be placed on type and breadth of experience and on skills, competencies and talents.</p> <p>PHW is committed to flexible working and equal opportunities and is promoted across the organisation.</p>	<p>unconscious bias in the recruitment process.</p> <p>In an ageing population we may not be doing sufficient work to attract and recruit a diverse population in respect of age profile.</p> <p>With advanced age comes an increased risk of disability meaning that individuals may be double disadvantaged.</p> <p>Mitigation: Training in recruitment is available for hiring managers including discrimination awareness.</p> <p>Individuals can request reasonable adjustments throughout the recruitment process in respect of disability.</p>	<p>Opportunities:</p>
<p>Factors emerging from consulting or involving this group: Direct consultation has not taken place. A review of a selection of other Recruitment and Selection policies and EQIAs has been completed in order to assess any</p>			

discriminatory or adverse impacts.

Our age profile [as at January 2017](#) is as below

Age	%
<20	0.17%
20-25	4.14%
26-30	9.40%
31-35	12.26%
36-40	13.37%
41-45	13.77%
46-50	15.56%
51-55	16.00%
56-60	10.80%
>60	4.53%

Protected Characteristic	Potential impact on Equality /Health Inequalities/Health Inequity		
	Positive	Negative	No change
Religion or Belief (consider belief or non-belief, culture traditional way of life, etc.)	Monitoring information collected includes religion; however this is withheld from the shortlisting panel and not part of the RRP decision and does not impact the process.	There is a risk of direct / indirect discrimination and unconscious bias in the recruitment process. Mitigation:	Opportunities:

	PHW is committed to flexible working and equal opportunities and is promoted across the organisation	Training in recruitment is available for hiring managers including discrimination awareness.																					
<p>Factors emerging from consulting or involving this group: Direct consultation has not taken place. A review of a selection of other Recruitment and Selection policies and EQIAs has been completed in order to assess any discriminatory or adverse impacts.</p> <p>Our demographics as at January 2017 are as below</p> <table border="1"> <thead> <tr> <th>Belief</th> <th>%</th> </tr> </thead> <tbody> <tr> <td>Atheism</td> <td>11.70%</td> </tr> <tr> <td>Buddhism</td> <td>0.11%</td> </tr> <tr> <td>Christianity</td> <td>36.93%</td> </tr> <tr> <td>Hinduism</td> <td>0.34%</td> </tr> <tr> <td>Islam</td> <td>0.45%</td> </tr> <tr> <td>Not Disclosed</td> <td>20.82%</td> </tr> <tr> <td>Other</td> <td>6.49%</td> </tr> <tr> <td>Sikhism</td> <td>0.22%</td> </tr> <tr> <td>Unspecified</td> <td>22.94%</td> </tr> </tbody> </table>				Belief	%	Atheism	11.70%	Buddhism	0.11%	Christianity	36.93%	Hinduism	0.34%	Islam	0.45%	Not Disclosed	20.82%	Other	6.49%	Sikhism	0.22%	Unspecified	22.94%
Belief	%																						
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Islam	0.45%																						
Not Disclosed	20.82%																						
Other	6.49%																						
Sikhism	0.22%																						
Unspecified	22.94%																						

Marriage and civil partnership	Monitoring information collected includes marital status; however this is withheld from the	There is a risk of direct / indirect discrimination and unconscious bias in the	
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	<p>shortlisting panel and <u>and not part of the RRP decision does not impact the process process.</u></p> <p>PHW is committed to flexible working and equal opportunities and is promoted across the organisation.</p>	<p>recruitment process.</p> <p>Mitigation: Training in recruitment is available for hiring managers including discrimination awareness</p>	<p>Opportunities:</p>																				
<p>Factors emerging from consulting or involving this group: Direct consultation has not taken place. A review of a selection of other Recruitment and Selection policies and EQIAs has been completed in order to assess any discriminatory or adverse impacts.</p>																							
<p>Our demographics <u>as at January 2017</u> are as below – we do not record same sex partnerships.</p>																							
<table border="0"> <thead> <tr> <th>Marital status</th> <th>%</th> </tr> </thead> <tbody> <tr> <td>Civil Partnership</td> <td>0.84%</td> </tr> <tr> <td>Divorced</td> <td>6.27%</td> </tr> <tr> <td>Legally Separated</td> <td>0.73%</td> </tr> <tr> <td>Married</td> <td>54.56%</td> </tr> <tr> <td>Single</td> <td>27.70%</td> </tr> <tr> <td>Unknown</td> <td>8.79%</td> </tr> <tr> <td>Widowed</td> <td>0.84%</td> </tr> <tr> <td>(blank)</td> <td>0.28%</td> </tr> <tr> <td>Grand Total</td> <td>100.00%</td> </tr> </tbody> </table>	Marital status	%	Civil Partnership	0.84%	Divorced	6.27%	Legally Separated	0.73%	Married	54.56%	Single	27.70%	Unknown	8.79%	Widowed	0.84%	(blank)	0.28%	Grand Total	100.00%			
Marital status	%																						
Civil Partnership	0.84%																						
Divorced	6.27%																						
Legally Separated	0.73%																						
Married	54.56%																						
Single	27.70%																						
Unknown	8.79%																						
Widowed	0.84%																						
(blank)	0.28%																						
Grand Total	100.00%																						

Protected Characteristic	Potential impact on Equality /Health Inequalities/Health Inequity		
	Positive	Negative	No change
Pregnancy and maternity	PHW is committed to flexible working and equal opportunities and is promoted across the organisation.	<p>There is a risk of direct / indirect discrimination and unconscious bias in the recruitment process.</p> <p>Mitigation: Training in recruitment is available for hiring managers including discrimination awareness</p>	Opportunities:
<p>Factors emerging from consulting or involving this group: Direct consultation has not taken place. A review of a selection of other Recruitment and Selection policies and EQIAs has been completed in order to assess any discriminatory or adverse impacts.</p>			
Socioeconomic disadvantage (consider low income, no car, poor housing, unemployment, homelessness,	PHW is committed to flexible working and equal opportunities and is promoted across the organisation. This does not impact on the RRP decision	There is a risk of direct / indirect discrimination and unconscious bias in the recruitment process.	

etc.)	process	<p>There is a risk that individuals from socioeconomic disadvantaged backgrounds do not engage with Public Health Wales</p> <p>Mitigation: Training in recruitment is available for hiring managers including discrimination awareness</p> <p>Mitigation: Managers and the People and OD function are available to discuss issues and advise on any support required.</p>	Opportunities:
<p>Factors emerging from consulting or involving this group: Direct consultation has not taken place. A review of a selection of other Recruitment and Selection policies and EQIAs has been completed in order to assess any discriminatory or adverse impacts.</p>			

Protected Characteristic	Potential impact on Equality /Health Inequalities/Health Inequity		
	Positive	Negative	No change
Human Rights (consider rights to dignity, family life, etc.)	PHW is committed to flexible working and equal opportunities and is promoted across the organisation.	Mitigation:	Opportunities:
Welsh language (ease of communication, preference for first language, etc.)	PHW considers communication and language to be core components of Public Health service and is committed to providing quality healthcare services through the medium of Welsh. PHW ensures it has staff with the appropriate bilingual skills and specialist knowledge in each service. Welsh language skills are actively considered as part of the	See earlier section on Race	Opportunities:

	recruitment process.		
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How will the impact of the project on groups covered by this Equality Impact Assessment be monitored?	<p>Regular reviews with users</p> <p><u>In line with All Wales protocol An annual review of the policy to ensure changes in legislation are reflected and will engage with appropriate groups.</u></p>
After what period will results be reported?	<p><u>12 months3 years</u></p>
Who will be responsible for monitoring and reporting?	<p><u>All Wales Workforce & OD</u></p>

* Legal requirement to consult race and gender groups and to involve disability groups.

A copy of this form should be sent to your Executive Lead for scrutiny in collaboration with the Lead for Health Inequality.