Section A: Assessment		
Name of Policy	Death in Service Procedure	
Person/persons conducting this assessment with Contact Details	Rachel Pressley, Workforce Governance Manager, 47559	
Date	21.07.2016	

. The Policy
this a new or existing policy?
xisting (procedure to be rolled forward without amendment)
Vhat is the purpose of the policy?
ardiff and Vale University Health Board (the UHB) is committed to employing the best possible standards in its duty of care to staff and in its employment ractices.
n the unfortunate event of a death in service, the UHB recognises the need to balance sensitivity with the practical need to administer pay arrangements uring a difficult and emotional time for the next of kin.
addition, it is accepted that the death of a colleague has a major impact on the team. Managers should ensure that appropriate support is put into lace/offered to colleagues through this difficult and emotional time.
ow do the aims of the policy fit in with corporate priorities? i.e. Corporate Plan

This is a stand alone document though there are links with other payroll processes (e.g. timely completion of termination form, accessing pension etc)

Who will benefit from the policy?

Staff Managers WOD (Occupational Health, Employee Wellbeing Service, HRAT) Payroll UHB Chair Trade Unions/Professional Organisations Next of Kin/families of deceased staff

What outcomes are wanted from this policy?

This Procedure is to support managers in the sad event of an employee's death. It is essential that these situations are handled in both a sensitive and effective way to prevent any additional distress for relatives and colleagues.

It has been designed to support managers to make this situation as uncomplicated as possible and to ensure that consistency is applied in all cases. As this process will not be the norm, this procedure acts as a guide on the steps to be taken and the responsibilities of managers and other staff involved. By following this procedure the next of kin will be prevented from additional distress, ensuring that they are treated in a respectful and sympathetic way, whilst also ensuring practicalities are dealt with

Are there any factors that might prevent outcomes being achieved? (e.g. Training/practice/culture/human or financial resources)

Poor Communication (both that this procedure exists to provide guidance, and at the time of a death in service)

2. Data Collection

What qualitative data do you have about the policy relating to equalities groups (e.g. monitoring data on proportions of service users compared to proportions in the population)?

What quantitative data do you have on the different groups (e.g. findings from discussion groups, information from comparator authorities)? Please indicate the source of the data gathered? (e.g. Concerns/Service/Department/Team/Other)

What gaps in data have you identified? (Please put actions to address this in your action plan?)

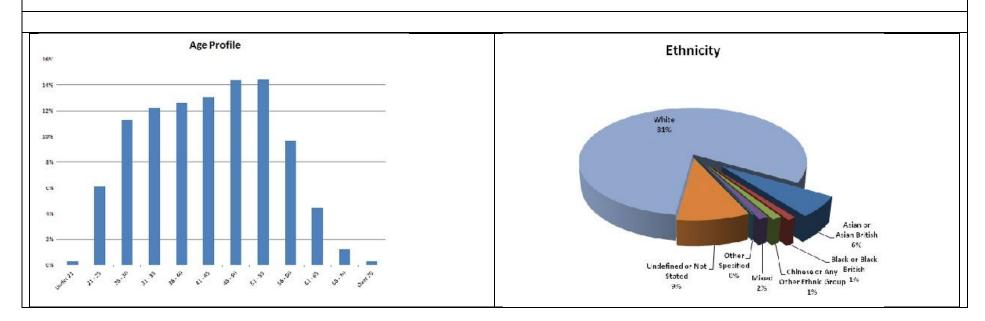
Please be advised that all the below lists and links are not an exhaustive list of the available evidence and information but provides an indicative summary of the evidence and information applicable to this policy.

EQIAS FROM OTHER ORGANISATIONS, ACCESSED ON 21.07.16 (n.b. this list is not exhaustative but is representative of the EQIAs identified):

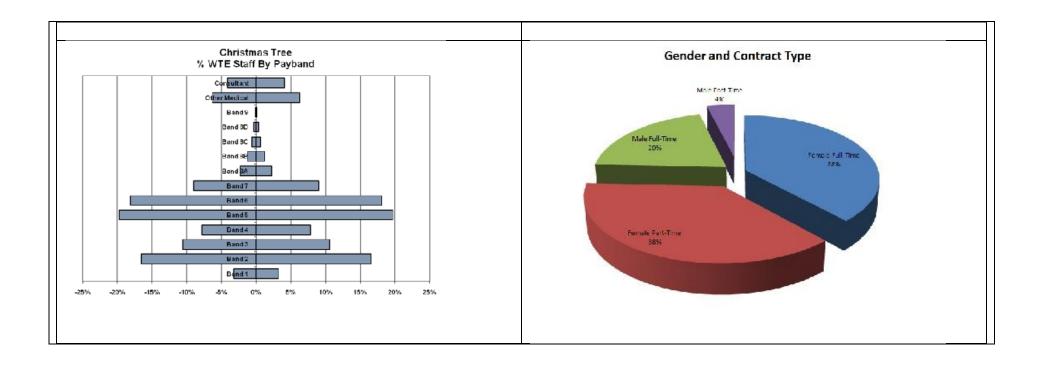
<u>Wiltshire Council</u> Death in Service EQIA found that there was no impact on any of the equality characteristics except for religion and belief. They noted that: staff may be affected depending on their religion and belief e.g. Chinese. Certain cultural groups have their own particular views and beliefs on death which manager's need to be aware of.

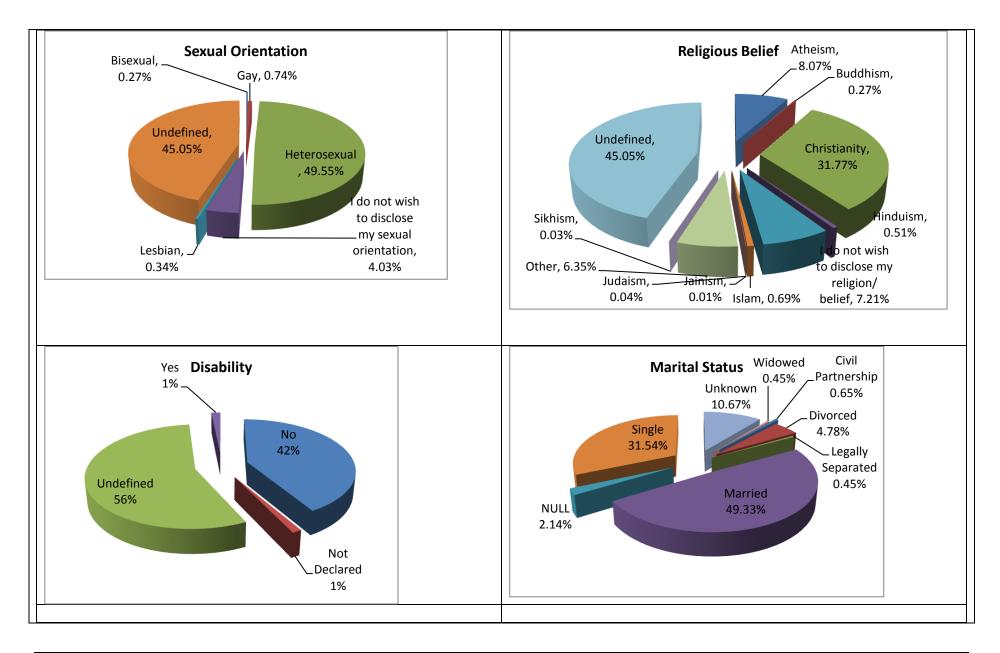
Leicestershire Constabulary examined 6 of the equality groups (Minority and majority ethnic communities, Disabled people, Women and men, including transsexual people, Lesbian, gay, bisexual and heterosexual people, people of differing religions and beliefs, including those who have none, and People of differing age groups) They noted that adverse impacts were possible if the wishes of the family / friends etc of the deceased were not respected, this was mitigated through inclusion of the instruction that their wishes be given primacy. The procedure was to be followed in order to avoid this impact. Through following this procedure there was opportunity for enhanced corporate image and community engagement.

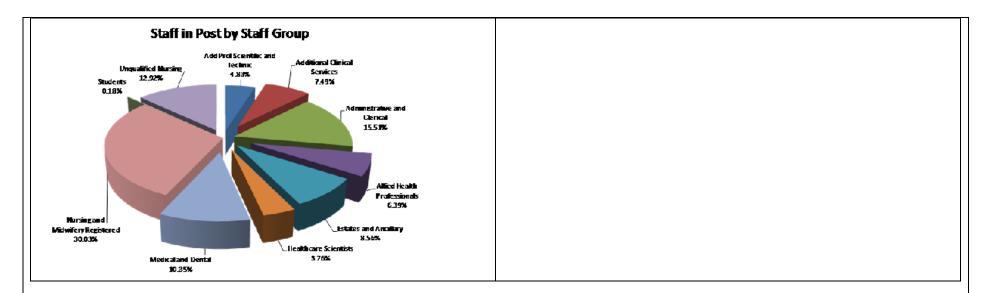
<u>Royal United Hospital Bath NHS Trust</u> found that their Death in Service Procedure had no impact on the basis that the policy applied to all employees of the Trust irrespective of their equality characteristics



UHB STAFFING DATA (MARCH 2016):

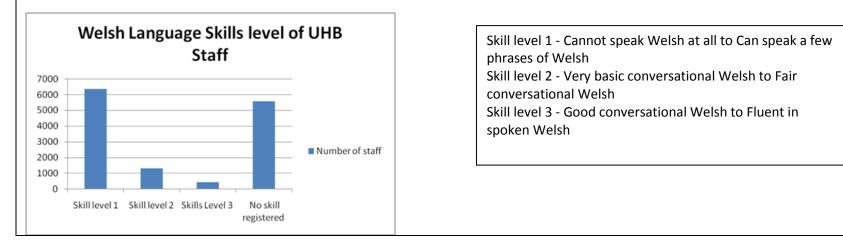






Unfortunately we only have information about the nationality of about 3000 of our 14000+ staff as this wasn't collected until fairly recently. However, we know that approximately 20% of our workforce is from overseas.

WELSH LANGUAGE SKILLS LEVELS



DEATHS IN SERVICE

Between June 2015 and June 2016 17 individuals died while in the employment of Cardiff and Vale UHB

3. Impact

Please answer the following

Consider the information gathered in section 2 above of this assessment form, comparing monitoring information with census data as appropriate (see <u>www.ons.gov.uk</u> Office National Statistics website) and considering any other earlier research or consultation. You should also look at the guidance in Appendix 1 with regard to the protected characteristics **stating the impact and giving the key reasons for your decision.**

Do you think that the policy impacts on people because of their age? (This includes children and young people up to 18 and older people)

There is no evidence to suggest that this policy change impacts on people because of their age.

Do you think that the policy impacts on people because of their caring responsibilities?

There is no evidence to suggest that this procedure impacts on people because of their caring responsibilities.

Do you think that the policy impacts on people because of their disability? (This includes Visual impairment, hearing impairment, physically disabled, Learning disability, some mental health issues, HIV positive, multiple sclerosis, cancer, diabetes and epilepsy).

There is no evidence to suggest that this procedure impacts on people because of a disability.

Do you think that the policy impacts on people because of Gender reassignment? (This includes Trans transgender and transvestites)

There is no evidence to suggest that this procedure impacts on people because of gender reassignment

Do you think that the policy impacts on people because of their being married or in a civil partnership?

There is no apparent impact on people because of their marital status. However, anecdotally, if the deceased member of staff is married or in a civil

partnership, it can be easier for the manager to identify the next of kin.

Do you think that the policy impacts on people because of their being pregnant or just having had a baby?

There is no evidence to suggest that this procedure impacts on people because of their being pregnant or just having had a baby.

Do you think that the policy impacts on people because of their race? (This includes colour, nationality and citizenship or ethnic or national origin such as Gypsy and Traveller Communities.)

There is no apparent impact on people in regard to this particular protected characteristic, however 20% of our workforce is from overseas and it may be necessary for a line manager/pensions etc to adapt the procedure if the next of kin/emergency contact is overseas.

Do you think that the policy impacts on people because of their religion, belief or non-belief? (Religious groups cover a wide range of groupings the most of which are Buddhist, Christians, Hindus, Jews, Muslims, and Sikhs. Consider these categories individually and collectively when considering impacts)

There is a potential positive impact as the procedure states that line managers must respond appropriately to the requests of the next of kin/emergency contact., bearing in mind the need to be sensitive to any religious or cultural beliefs or practices

Do you think that the policy impacts on men and woman in different ways?

There is no evidence to suggest that this procedure impacts on people because of their gender.

Do you think that the policy impacts on people because of their sexual orientation? (This includes Gay men, heterosexuals, lesbians and bisexuals)

There is no evidence to suggest that this procedure impacts on people because of their sexual orientation

Do you think that the policy impacts on people because of their Welsh language?

If emergency contact/next of kin prefer to discuss any matters through the medium of Welsh, we would have to accommodate this wish

4. Summary.

Which equality groups have positive or negative impacts been identified for (i.e. differential impact).

Is the policy directly or indirectly discriminatory under the equalities legislation?

If the policy is indirectly discriminatory can it be justified under the relevant legislation?

There is a potential positive impact as the procedure states that line managers must respond appropriately to the requests of the next of kin, bearing in mind the need to be sensitive to any religious or cultural beliefs or practices

Section B: Action

5. Please complete your action plan below. Issues you are likely to need to address include

•What **consultation** needs to take place with equality groups (bearing in mind any relevant consultation already done and any planned corporate consultation activities?)

• What **monitoring**/evaluation will be required to further assess the impact of any changes on equality target groups?

Consultation has taken place with:

Rainbow LGBT FFlag Network Welsh Language Officer Equality Manager Staff Representatives

Monitoring/evaluation:

This EQIA will be reviewed at the same time as the procedure (3 Years) or if changes to practice, legislation or best practice determine that it needs to be sooner

Equalities Impact Assessment Implementation Mitigation/Action Plan

Issue to be addressed	Responsible Officer	Action Required	Timescale for completion	Action Taken	Comments
No issues identified					

6. Report, publication and Review Please record details of the report or file note which records the outcome of the EQIA together with any actions / recommendations being pursued (date, type of report etc)

Employment Policy Sub Group 28.07.16

Please record details of where and when EQIA results will be published

UHB intranet and internet sites

Please record below when the EQIA will be subject to review.

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Name of person completing	Rachel Pressley
Signed	Rachel Pressley
Date	21.07.16
Name of Responsible	
Executive/Clinical Board Director	
Authorising Assessment and Action	
Plan for publication	
Signed	
Date	

Executive Summary

Background

Cardiff and Vale University Health Board (the UHB) is committed to employing the best possible standards in its duty of care to staff and in its employment practices.

In the unfortunate event of a death in service, the UHB recognises the need to balance sensitivity with the practical need to administer pay arrangements during a difficult and emotional time for the next of kin.

In addition, it is accepted that the death of a colleague has a major impact on the team. Managers should ensure that appropriate support is put into place/offered to colleagues through this difficult and emotional time.

The scope of the EQIA

The EQIA looked at the Death in Service Procedure on the basis of the impact it has on the protected characteristics outlined in the Equality Act and Welsh language skills.

Key findings

There is a potential positive impact on the basis of religion/belief as the procedure states that line managers must respond appropriately to the requests of the next of kin, bearing in mind the need to be sensitive to any religious or cultural beliefs or practices.

There is no apparent impact on people in regard to race, however 20% of our workforce is from overseas and it may be necessary for a line manager/pensions etc to adapt the procedure if the next of kin is overseas.

Recommendations

No actions required