

Section A: Assessment	
<b>Name of Policy</b>	Partnership and Recognition Agreement
<b>Person/persons conducting this assessment with Contact Details</b>	Rachel Pressley, Workforce Governance Manager Andrew Crook, Head of Workforce Governance
<b>Date</b>	15 February 2016, updated on 30.06.16

<b>1. The Policy</b>
<p><i>Is this a new or existing policy?</i></p> <p>Existing</p>
<p><i>What is the purpose of the policy?</i></p> <p>Cardiff and Vale University Health Board is committed to the partnership agenda with its employees to ensure that they can be involved in the decisions that affect them and the services they provide for patients</p> <p>The Health Board objective of delivering the highest quality services possible can only be achieved by a workforce that is sufficiently skilled,</p>

committed and feels valued. This agreement is intended to help further embed partnership working within the culture and practice of the organisation at all levels.

The Health Board will ensure that managers are committed to an open and participative working style by being honest, open and fair in their relationships with staff. Managers will demonstrate this through their own behaviour and the behaviour they expect from their staff.

*How do the aims of the policy fit in with corporate priorities? i.e. Corporate Plan*

By ensuring that Cardiff and Vale University Health Board (the UHB) is compliant with relevant legislation and terms and conditions.

The Partnership and Recognition Agreement underpins the 'Values' section of the [UHB Strategy](#) by helping the organisation be 'a great place to work and learn'

*Who will benefit from the policy?*

- Recognised trade unions and their accredited representatives
- Staff represented by these trade unions
- Other staff and managers
- Patients, carers and visitors
- The UHB

*What outcomes are wanted from this policy?*

- Further embed partnership working within the culture and practice of the organisation at all levels
- Support the development good formal and informal working relationships that build trust and share responsibility, while respecting difference

- Involving staff and their representatives in matters affecting their jobs and working lives
- Ensure that all parties (ie UHB, managers, staff, representatives) understand their responsibilities and commitment
- For an agreed set of behaviours based on the six TIC principles of partnership working to be adhered to
- To ensure that the accredited representatives have the time and facilities needed to fulfil their responsibilities and commitment

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

Awareness and understanding of the Agreement

Awareness and understanding of own responsibilities (for managers and staff representatives)

Resources, especially time away from the workplace

Communication

Training

Attitude

## **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)*

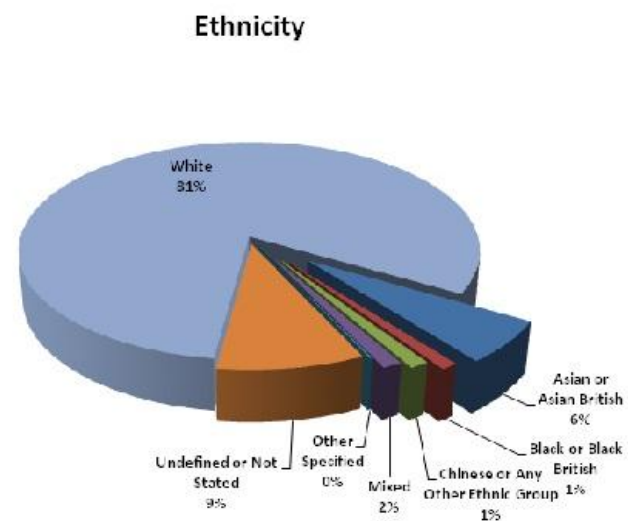
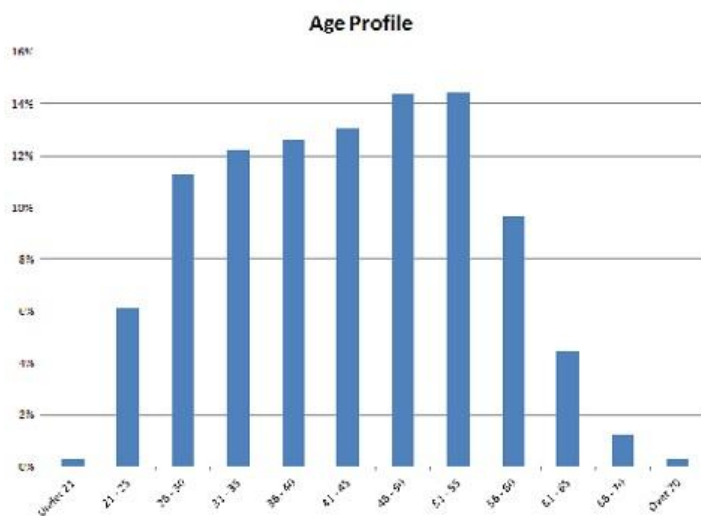
*What gaps in data have you identified? (Please put actions to address this in your action plan?)*

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.

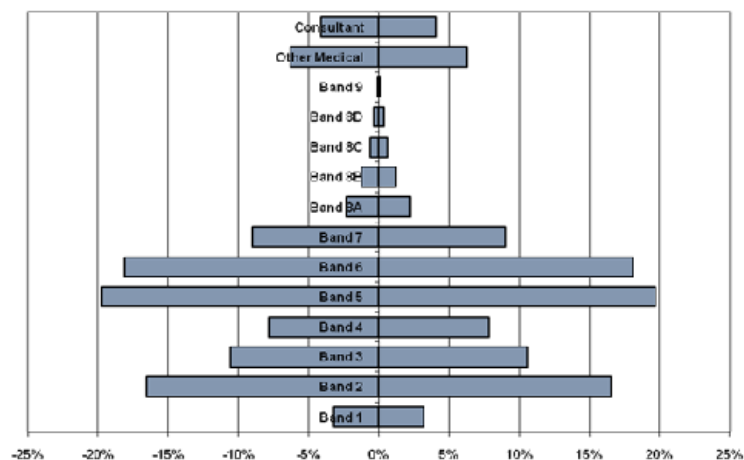
A number of **EQIAs from other organisations** were examined as part of this EQIA process – of those checked:

- [Lincolnshire Community Health Services NHS Trust](#) found that its Trade Union Partnership Agreement did not result in different impacts for any of the protected characteristics (ie disability, sexual orientation, sex, gender reassignment, race, marriage/civil partnership, maternity/pregnancy, age, religion or belief, carers)
- [Wirral Community NHS Trust](#) identified positive impacts for all Equality Groups as its Partnership and Recognition Agreement ensured the needs of employees across the Trust were represented by the recognition of staff side organisations and the promotion of effective partnership working. The EQIA did not highlight any significant disadvantages in relation to disability, sex, orientation, sex, racial minorities, age, religion and deprived groups.
- [East Cheshire NHS Trust](#) found that its Partnership Working Agreement and Trade Union Recognition Policy did not discriminate directly or indirectly against patients or employees on the basis of age, gender, learning difficulties/disability or cognitive impairment, mental health need, sensory impairment, physical disability, race/ethnicity, religious belief or sexual orientation
- [Southern Health NHS Foundation Trust](#) found that no negative impacts had been identified in the assessment of its Trade Union Recognition Agreement on the basis of age, disability, gender reassignment, marriage/civil partnership, pregnancy/maternity, race, religion or belief, sex, sexual orientation
- [NHS Fife](#) found that Its Facilities Arrangements for Trade Union and Professional Organisations Policy had a low relevance for employees and equality groups on the basis of age, disability, race, sex, sexual orientation, religion and belief, gender reassignment, pregnancy & maternity, and marriage & civil partnership. It found that the policy had a potential positive impact in terms of fostering good relations; advancing equality of opportunity; accessibility of services; involvement, engagement and inclusion; and range of facilities and services

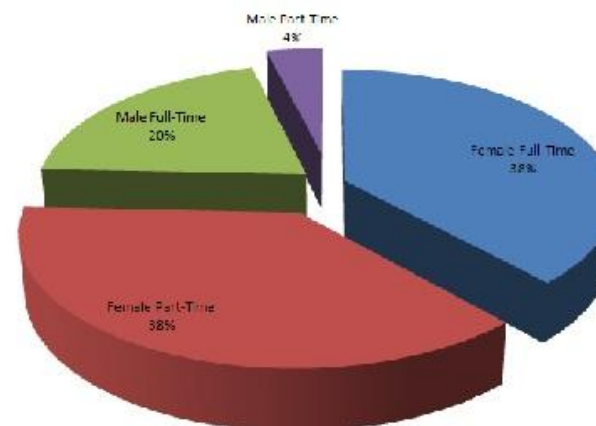
### UHB staffing profile (March 2016 data):



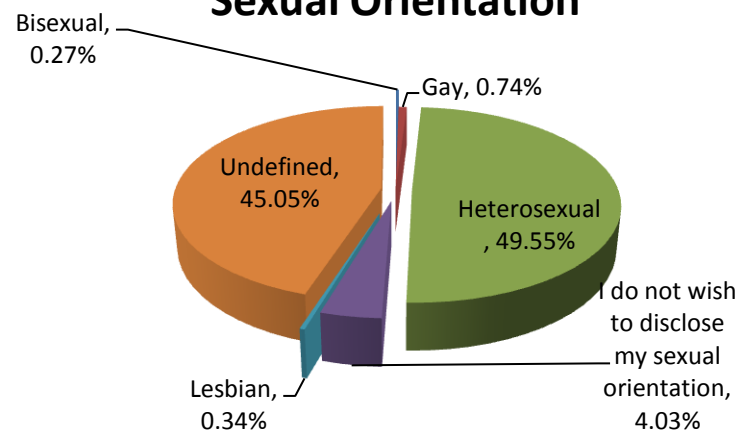
**Christmas Tree  
% WTE Staff By Payband**



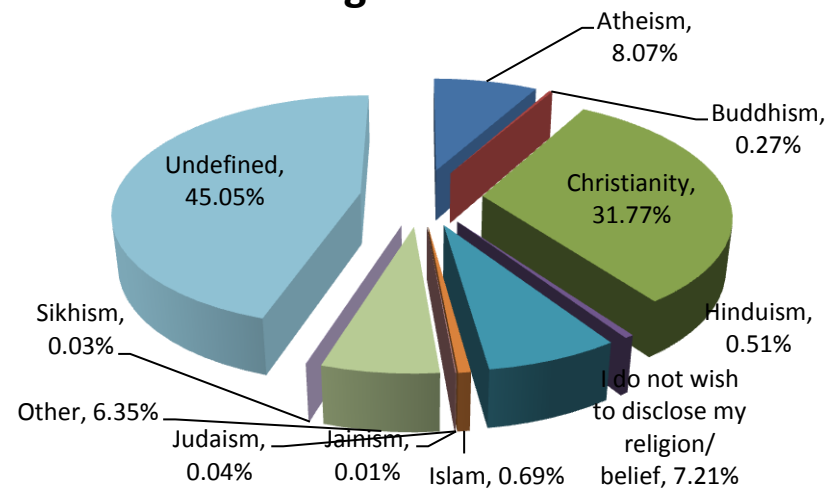
**Gender and Contract Type**

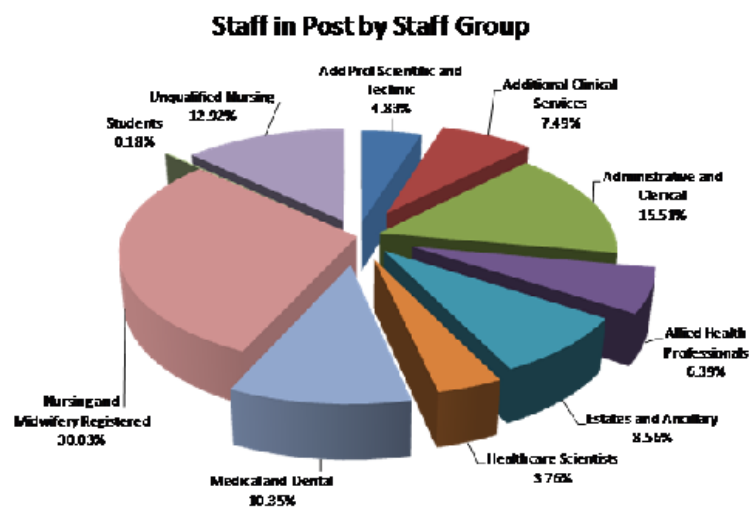
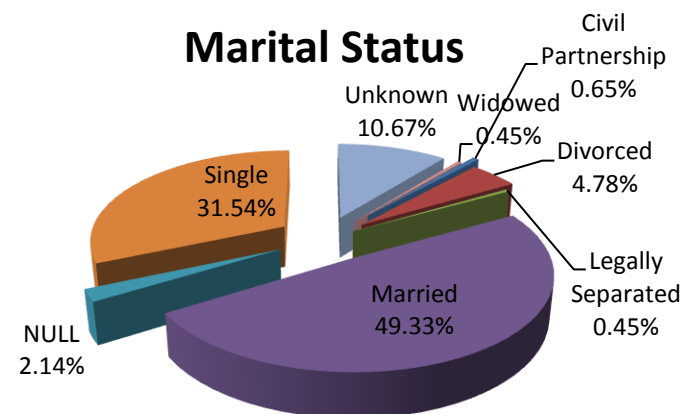
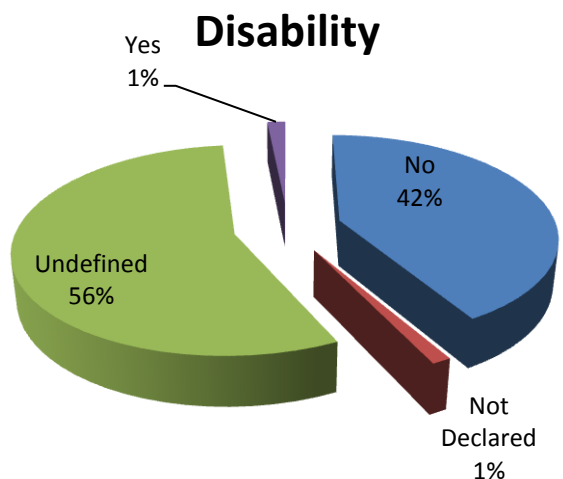


**Sexual Orientation**



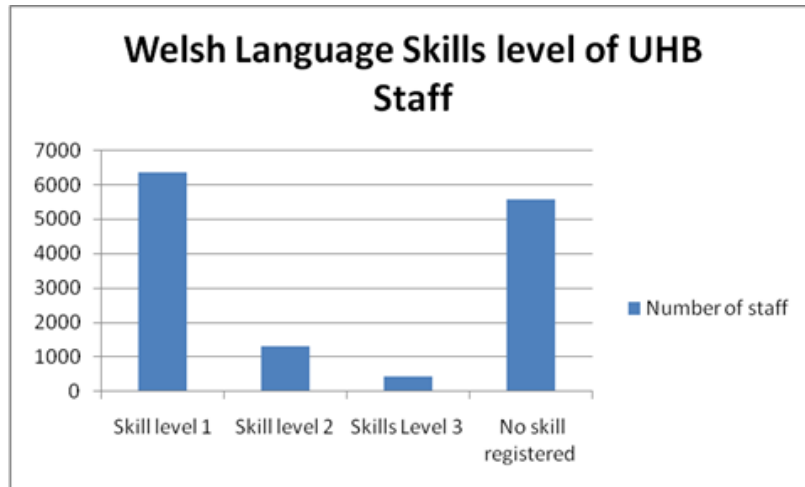
**Religious Belief**





Gender	Staff Group	Headcount
Female	Add Prof Scientific and Technic	513
	Additional Clinical Services	899
	Administrative and Clerical	1891
	Allied Health Professionals	782
	Estates and Ancillary	591
	Healthcare Scientists	301
	Medical and Dental	653
	Nursing and Midwifery Registered	3835
	Students	22
	Unqualified Nursing	1533
Female Total		11020
Male	Add Prof Scientific and Technic	192
	Additional Clinical Services	204
	Administrative and Clerical	421
	Allied Health Professionals	154
	Estates and Ancillary	687
	Healthcare Scientists	199
	Medical and Dental	779
	Nursing and Midwifery Registered	461
	Students	3
	Unqualified Nursing	380
Male Total		3540
Grand Total		14560

### Welsh Language:



Skill level 1 - Cannot speak Welsh at all to Can speak a few phrases of Welsh  
Skill level 2 - Very basic conversational Welsh to Fair conversational Welsh  
Skill level 3 - Good conversational Welsh to Fluent in spoken Welsh

### Trade Union Membership:

In November 2014 the UHB had 12631 staff employed on Agenda for Change Terms and Conditions – of these, 3278 were UNISON members.

### Others sources of information:

A statistical bulletin by the Department for Business, Innovation & Skills on [Trade Union Membership in 2014](#) (published June 2015) shows that:

- Around 6.4 million employees were TU members in 2014 (the peak was 13 million in 1979)
- Female employees are more likely to be a trade union member – the proportion of female employees was 28% in 2014 compared with 22% of male employees
- A higher proportion (26%) of UK born employees were in a trade union compared with non-UK born employees (18%)



- In the public sector, union levels fell by 79000 year on year to 3.76 million in 2014, which non-union employee levels rose by a similar amount. Trade union density in the public sector therefore decreased from 55.5% to 54.3%. The level change was not statistically significant but the change in proportion was.
- Older workers account for a larger proportion of union members than younger workers (38% of TU members were aged over 50 in 2014 but 28% of employees are in this age group). The proportion of TU members aged below 50 has fallen since 1995, whilst the proportion aged above 50 has increased.
- Employees in professional occupations were more likely to be TU members than other employees. Employees in professional occupations account for 36% of union members, but only 20% of employees in the UK worked in these occupations
- Disabled employees are more likely to be TU members.
- Wales has the highest trade union density in the UK. The proportion of employees who were TU members was 36% in Wales compared with around 19% in South East and London. However there has been a 24,000 (9%) reduction in membership since 1995.
- Wales also had the highest rate of TU presence in the workplace (55%). The lowest rate was London with 31%
- In the UK 39.9% of people employed in 'human health and social work activities' were TU members

According to the 'Stronger Unions' blog by Carl Roper dated 3 June 2015 ['8 surprising facts about Trade Union Membership'](#) (published by the TUC):

- There are 6.4 million TU members in the UK – this equates to 25% of all employees
- 54% of public sector employees are TU members
- 55% of TU members are women
- The highest rates of TU membership are among 'black or black british' workers
- 40% of UK employees work in a workplace with a union

### 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 [www.ons.gov.uk](http://www.ons.gov.uk) 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)

No specific evidence was found to suggest that this Agreement impacts on people because of their age. It prevents discrimination by setting out the scope, principles, responsibilities and processes to be followed for partnership working and ensuring that appropriate time and facilities are provided to enable this.

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

No specific evidence was found to suggest that this Agreement impacts on people because of caring responsibilities. It prevents discrimination by setting out the scope, principles, responsibilities and processes to be followed for partnership working and ensuring that appropriate time and facilities are provided to enable this.

**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).

We know that disabled employees are more likely to be TU members, but are not able to determine the makeup of trade union members employed by the UHB for this or any other protected characteristic

No specific evidence was found to suggest that this Agreement impacts on people because of disability. It prevents discrimination by setting out the scope, principles, responsibilities and processes to be followed for partnership working and ensuring that appropriate time and facilities are provided to enable this.

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

No specific evidence was found to suggest that this Agreement impacts on people because of gender reassignment. It prevents discrimination by setting out the scope, principles, responsibilities and processes to be followed for partnership working and ensuring that appropriate time and facilities are provided to enable this.

<p><b>Do you think that the policy impacts on people because of their being married or in a civil partnership?</b></p> <p>No specific evidence was found to suggest that this Agreement impacts on people because of marriage/civil partnership. It prevents discrimination by setting out the scope, principles, responsibilities and processes to be followed for partnership working and ensuring that appropriate time and facilities are provided to enable this.</p>
<p><b>Do you think that the policy impacts on people because of their being pregnant or just having had a baby?</b></p> <p>No specific evidence was found to suggest that this Agreement impacts on people because of pregnancy or maternity. It prevents discrimination by setting out the scope, principles, responsibilities and processes to be followed for partnership working and ensuring that appropriate time and facilities are provided to enable this.</p>
<p><b>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.)</b></p> <p>We know that the highest rates of TU membership are among ‘black or black british’ workers, but are not able to determine the makeup of trade union members employed by the UHB for this or any other protected characteristic</p> <p>No specific evidence was found to suggest that this Agreement impacts on people because of race. It prevents discrimination by setting out the scope, principles, responsibilities and processes to be followed for partnership working and ensuring that appropriate time and facilities are provided to enable this.</p>
<p><b>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)</b></p> <p>No specific evidence was found to suggest that this Agreement impacts on people because of religion, belief or non-belief. It prevents discrimination by setting out the scope, principles, responsibilities and processes to be followed for partnership working and ensuring that appropriate time and facilities are provided to enable this.</p>

<p><b>Do you think that the policy impacts on men and woman in different ways?</b></p> <p>We know that the highest rates of TU membership are among women, but are not able to determine the makeup of trade union members employed by the UHB for this or any other protected characteristic</p> <p>No specific evidence was found to suggest that this Agreement impacts on men and women differently. It prevents discrimination by setting out the scope, principles, responsibilities and processes to be followed for partnership working and ensuring that appropriate time and facilities are provided to enable this.</p>
<p><b>Do you think that the policy impacts on people because of their sexual orientation?</b> (This includes Gay men, heterosexuals, lesbians and bisexuals)</p> <p>No specific evidence was found to suggest that this Agreement impacts on people because of sexual orientation. It prevents discrimination by setting out the scope, principles, responsibilities and processes to be followed for partnership working and ensuring that appropriate time and facilities are provided to enable this.</p>
<p><b>Do you think that the policy impacts on people because of their Welsh language?</b></p> <p>There is no evidence to suggest that this Agreement impact on people because of their Welsh Language skills</p>

<p><b>4. Summary.</b></p>
<p>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?</p>
<p>A thorough analysis of the implications and impact of the Partnership and Recognition Agreement has been undertaken and a number of</p>

Equality Impact Assessments have been examined from other large public sector organisations.

No specific evidence was found to suggest that this Agreement impacts on people because of any of the protected characteristics. It prevents discrimination by setting out the scope, principles, responsibilities and processes to be followed for partnership working and ensuring that appropriate time and facilities are provided to enable this.

## 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?)

Chair of Staff Representatives and other Lead TU representatives

Rainbow LGBT FFlag Network

Welsh Language Officer

Equality Manager

Clinical Board Management Teams

Executive Directors

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

On review of the Agreement or earlier if required by changes to T&C or legislation

## Equalities Impact Assessment Implementation Mitigation/Action Plan

Issue to be addressed	Responsible Officer	Action Required	Timescale for completion	Action Taken	Comments
No actions identified					
<b>6. Report, publication and Review</b> <b>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)</b>					
<b>Please record details of where and when EQIA results will be published</b>  Once the Agreement has been approved the documentation will be placed on the UHB intranet and internet sites.					
<b>Please record below when the EQIA will be subject to review.</b>  The EQIA and Agreement will be reviewed three years after approval unless changes to terms and conditions, legislation or best practice determine that an earlier review is required					
<b>Name of person completing</b>	Andrew Crook , Rachel Pressley				
<b>Signed</b>	<i>Andrew Crook, Rachel Pressley</i>				
<b>Date</b>	15.02.16 – updated 30.06.16				
<b>Name of Responsible Executive/Clinical Board Director Authorising Assessment and Action Plan for publication</b>	Raj Chana, Executive Director of Workforce and OD				
<b>Signed</b>	<i>Raj Chana</i>				
<b>Date</b>	11.07.16				

## **Executive Summary**

### **Background**

Cardiff and Vale University Health Board is committed to the partnership agenda with its employees to ensure that they can be involved in the decisions that affect them and the services they provide for patients

The Health Board objective of delivering the highest quality services possible can only be achieved by a workforce that is sufficiently skilled, committed and feels valued. This agreement is intended to help further embed partnership working within the culture and practice of the organisation at all levels.

It ensures that Cardiff and Vale University Health Board (the UHB) is compliant with relevant legislation and terms and conditions, and underpins the 'Values' section of the [UHB Strategy](#) by helping the organisation be 'a great place to work and learn'

### **The scope of the EQIA**

The likely affects of this Agreement were assessed through looking at:

- other related EQIAs
- workforce profile data broken down by protected characteristics
- trade union membership within the UHB
- statistical data relating to Trade Union membership in the UK

The views of internal stakeholders were also sought during the consultation process.

### **Key findings**

A thorough analysis of the implications and impact of the Partnership and Recognition Agreement has been undertaken and a number of Equality Impact Assessments have been examined from other large public sector organisations.

No specific evidence was found to suggest that this Agreement impacts on people because of any of the protected characteristics. It prevents discrimination by setting out the scope, principles, responsibilities and processes to be followed for partnership working and ensuring that appropriate time and facilities are provided to enable this.

### **Recommendations**

Following a thorough analysis of the implications and impact of the agreement no direct actions have been identified, but it is recommended that the Agreement is widely publicised following its approval, and that is used as an opportunity to promote the benefits of and requirement to work in partnership.