


Local Clinical Excellence Awards Policy **This document is available in alternative formats such as electronic format or large print upon request**

**Please contact the Equality, Diversity and Human Rights Team on 01273 778383 or email [equality.diversity@sussexpartnership.nhs.uk](mailto:equality.diversity@sussexpartnership.nhs.uk)**





## 1. Equality and Human Rights Impact Analysis (EHRIA)

1.1 Board Lead:	Dr Rick Fraser	1.2 Analysis Start Date:	07 June 2019
		1.3 Analysis Submission Date:	17 June 2019
1.4 Analysis Team Members:	1) Author / Editor: Gary Farrow		
1.5 If this is a cross agency policy/service or strategy please indicate partner agencies and their formal title	2) Frontline Staff: Medical Workforce		
	3) Patient / End-user: Carrie Stoner		
1.6 Completion Statement	4) I/We, being the author(s), Service Managers, acknowledge in good faith that this analysis uses accurate evidence to support accountable decision-makers with due regard to the National Equality Duties, and that the analysis has been carried out throughout the design or implementation stage of the service or policy.		
1.7 Policy Aim	This policy describes how the Employer Based Awards element of the New Local Clinical Excellence Awards (LCEA) scheme will be applied within the Trust from 1st April 2018 to March 2021.		
 Send draft analysis along with the policy, strategy or service to <a href="mailto:equality.diversity@sussexpartnership.nhs.uk">equality.diversity@sussexpartnership.nhs.uk</a> for internal quality control prior to ratification.			
1.8 Quality Assessor sign off	<b>Cassandra Blowers</b>		
1.9 Reference Number	<b>CB 055B</b>		

## 2. Evidence Pre-Analysis – The type and quality of evidence informing the assessment

<b>X</b>	2.1 Types of evidence identified as relevant have <b>X</b> marked against them		
<b>X</b>	Patient / Employee Monitoring Data		Risk Assessments
	Recent Local Consultations		Research Findings
	Complaints / PALS / Incidents	<b>X</b>	DH / NICE / National Reports
<b>X</b>	Focus Groups / Interviews	<b>X</b>	Good Practice / Model Policies
	Service User / Staff Surveys	<b>X</b>	Previous Impact Analysis
	Contract / Supplier Monitoring Data		Clinical Audits
<b>X</b>	Sussex Demographics / Census		Serious Untoward Incidents
	Data from other agencies, e.g. Services, Police, third sector	<b>X</b>	Equality Diversity and Human Rights Annual Report
Please provide detailed evidence for the areas highlighted , and also any other Evidence that may be relevant (please state):			
<ul style="list-style-type: none"> <li>• Terms and Conditions – Consultants (England) 2003, Department of Health, 2018</li> <li>• Local Clinical Excellence Awards Guidance 2018-21 (England), BMA and NHS Employers, 2018</li> <li>• Advisory Committee on Clinical Excellence Awards (ACCEA) - Guide to Employer Based Awards (2012).</li> <li>• Previous SPFT EDHR report</li> <li>• SPFT Gender Pay Gap report</li> <li>• Discussions at Medical Negotiation Committee</li> </ul>			

## 3. Impact and outcome Evaluation – Any impacts or potential outcomes are described below.

Ref	Mark one X		Describe how this policy, strategy or service will lead to positive  outcomes for the <u>protected characteristics</u> . Describe how this policy, strategy or service will lead to negative  outcomes for the <u>protected characteristics</u> . (Please describe in full for each)	People's Characteristics (Mark with 'X'):									
				Age	Disability & Carers	Gender Reassignment	Pregnancy & Maternity	Race	Religion & Belief	Sex	Sexual Orientation	Human Rights	
3.1	X		This policy will apply to all eligible Consultants who are fully registered and are included on the specialist register of the General Medical Council (GMC), has been substantively appointed as an NHS Consultant with at least one year's service at Consultant level on 1 April in the award year and who does not hold an existing Local CEA level 9, an existing National CEA, or a distinction award.	X	X	X	X	X	X	X	X	X	
3.2	X		New LCEA will not be pro-rata for part time workers. For applicants who work part time, consideration must be given to their reduced hours and scored appropriately reflecting the activity that can be proportionately achieved within their contracted hours.		X		X			X		X	

Ref	Mark one X		Describe how this policy, strategy or service will lead to positive <span style="color: green;">+</span> outcomes for the <u>protected characteristics</u> . Describe how this policy, strategy or service will lead to negative <span style="color: red;">-</span> outcomes for the <u>protected characteristics</u> . (Please describe in full for each)	People's Characteristics (Mark with 'X'):								
	+	-		Age	Disability & Carers	Gender Reassignment	Pregnancy & Maternity	Race	Religion & Belief	Sex	Sexual Orientation	Human Rights
3.3	X		Policy contains access statement as is available in alternative formats upon request		X							
3.4	X		For consultants who are on long term leave i.e. Maternity, Adoption or Shared Parental Leave will be invited to apply by post.		X		X			X		X
3.5	X		For the EBAC Consultant members should represent the diversity of the consultant body. Consultant members should include at least one non-award holder. All panel members must be compliant with Equality and Diversity training.	X	X	X	X	X	X	X	X	X
3.6		X	Application forms for a LCEA are not anonymised	X	X	X	X	X	X	X	X	
3.7	X		Grounds for appeal include: There had been unlawful discrimination on the basis of gender, ethnicity or age; (EHRIA) There was bias or conflict of interest on the part of the committee.	X	X	X	X	X	X	X	X	X
3.8	X		The Medical Staffing Department will produce an annual report, to be shared with the Trust Board and JLNC, detailing distribution by protected characteristic within the Trust and will also include application and rates of success in relation to protected characteristics. The data in the report will be further analysed where necessary to identify why groups who share a protected characteristic do not have equity of access or success.	X	X	X	X	X	X	X	X	X
Add more rows if necessary with new reference numbers in the left column												

#### 4. Monitoring Arrangements

<p>4.1 The arrangements to monitor the effectiveness of the policy, strategy or service considering relevant characteristics? E.g.</p> <ul style="list-style-type: none"> <li>➤ survey results split by age-band reviewed annually by EMB and Trust Board</li> <li>➤ Service user Disability reviewed quarterly by Equality and Diversity Steering Group or annually in the EDHR Annual Report</li> </ul>	<p>The Medical Staffing Department will produce an annual report, to be shared with the Trust Board and JLNC, detailing distribution by protected characteristic within the Trust and will also include application and rates of success in relation to protected characteristics.</p> <p>The Medical Negotiating Committee will monitor the implementation of this Policy.</p> <p>The Trust monitors CEA winners and board members annually in the EDHR report. Data is cross referenced against the trust workforce and previous data to ensure there is no significant under representation.</p>
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#### 5. Human Rights Pre-Assessment

The Impacts identified in sections 3 have their reference numbers (e.g.3.1) inserted in the appropriate column for each relevant right or freedom		
	+	-
A2. Right to life (e.g. Pain relief, DNAR, competency, suicide prevention)		
A3. Prohibition of torture, inhuman or degrading treatment (e.g. Service Users unable to consent)	3.1, 3.3, 3.5, 3.6 & 3.8	3.6
A4. Prohibition of slavery and forced labour (e.g. Safeguarding vulnerable patients policies)		
A5. Right to liberty and security (e.g. Deprivation of liberty protocols, security policy)		
A6&7. Rights to a fair trial; and no punishment without law (e.g. MHA Tribunals)		
A8. Right to respect for private and family life, home and correspondence (e.g. Confidentiality, access to family etc)	3.2, 3.4	
A9. Freedom of thought, conscience and religion (e.g. Animal-derived medicines/sacred space)		
A10. Freedom of expression (e.g. Patient information or whistle-blowing policies)		
A11. Freedom of assembly and association (e.g. Trade union recognition)		
A12. Right to marry and found a family (e.g. fertility, pregnancy)	3.2, 3.4	

P1.A1. Protection of property (e.g. Service User property and belongings)		
P1.A2. Right to education (e.g. accessible information)		
P1.A3. Right to free elections (e.g. Foundation Trust governors)		

## 6. Risk Grading


6.1 <b>Consequence</b> of negative impacts scored (1-5)	2	6.2 <b>Likelihood</b> of negative impacts scored (1-5):	2	6.3 <b>Equality &amp; Human Rights Risk Score</b> = Consequence x Likelihood scores:	4
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## 7. Analysis Outcome— The outcome (A-D) of the analysis is marked below ('X') with a summary of the decision

X	7.1 The outcome selected (A-D):	7.2 Summary for the outcome decision ( <b>mandatory</b> )
	A. Policy, strategy or service addresses quality of outcome and is positive in its language and terminology. It promote equality and fosters good community relations	<p>Policy highlights the potential for indirect discrimination due to not anonymising applications</p> <p>This will be managed by ensuring all members of the scoring panel have up to date Equality and Diversity Training.</p> <p>This will also be monitored and managed through the reports submitted to board and the MNC.</p>
X	B. Improvements made or planned for in section 8 (potential or actual adverse impacts removed and missed opportunities addressed at point of design)	
	C. Policy, service or strategy continues with adverse impacts fully and lawfully justified (justification of adverse impacts should be set out in section 3 above)	
	D. Policy, service or strategy recommended to be stopped. Unlawful discrimination or abuse identified.	

## 8. Equality & Human Rights Improvement Plan

**Actions should when relevant and proportionate meet the different needs of people.**

Impact Reference(s) (from assessment)	What directorate (team) action plan will this be built into 	<u>Action</u>	Lead Person	Timescale	Resource Implications
3.6		Monitor annual report on CEA winners to ensure there is no barriers in accessing awards when colleague	MNC	Following every award round	

Add more rows if necessary