

# **Human rights statement and guidance**

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# Document control sheet

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**Give reasons for exemption if no:** N/A

## Version control

Version number	Revision date	Revision by	Nature of revisions
V1.0	26 May 2022	Patient experience and equality manager	Updated policy template used. Reviewed content against the <a href="#">Equality and Human Rights Commission website</a> .

## Introduction

Public authorities in the UK have obligations to promote and protect human rights, and all public authorities must act in a way that is compatible with the European Convention on Human Rights. This means treating individuals fairly, with dignity and respect, whilst also safeguarding the rights of the wider community.

NHS Kernow makes the following human rights statement.

Issues of equality and human rights are central to all of the work of NHS Kernow of local health services, and as an employer.

NHS Kernow is committed to ensuring all NHS services respect human rights, treat people fairly and equitably, recognise the needs of the diverse communities we serve and meet local needs. The organisation takes responsibility for ensuring that:

- all of its policies, functions and services aim to reduce discrimination in our community
- contracts being procured for NHS services require the provider to show compliance with the Human Rights Act 1998 and relevant equalities legislation

All policies and practices are underpinned by a value for diversity and equality for all existing and potential colleagues.

It is important to note that this document gives examples of where human rights applies in NHS Kernow's work; however, it will not provide an exhaustive list of all examples.

## Purpose

The purpose of this document is to provide advice and guidance to colleagues and the public about the law on human rights and what this means in a healthcare environment. This document is an explanation of the law surrounding human rights and guidance for colleagues on how human rights affect their work.

Adherence to this policy will aid effective decision making.

## Definitions

### Human Rights Act 1998

The Human Rights Act 1998, which came into force in full on 2 October 2000, brings the European Convention on Human Rights into UK law.

### European Convention on Human Rights

The European Convention on Human Rights describes a number of specific rights, such as the right to life and the right to a fair trial. It allows people to enforce the rights given by the European Convention on Human Rights in the UK courts.

## **The Human Rights Act 1998**

Public authorities in the UK have obligations to promote and protect human rights. The act urges public authorities to apply a human rights framework to decision making across public services in order to achieve better service provision. Applying a human rights framework means including core human rights values, such as equality, dignity, privacy, respect, and involvement in decision making, whether a public service is being delivered directly to the public, or a new plan or procedure is being devised.

The act applies to all public authorities, such as central government departments, local authorities and NHS trusts, and other bodies performing public functions, such as private companies operating prisons. These organisations must ensure that they are acting compatibly with the European Convention on Human Rights when providing a service or making decisions about individuals.

## **The structure of the Human Rights Act**

The Human Rights Act has its basis in the European Convention of Human Rights. The convention has 2 main parts: the original treaty and the protocols. Protocols amend or supplement the original treaty. This means that they give additional rights or expand on the rights in the original treaty. The principles which underpin the Human Rights Act are:

- fairness
- respect
- equality
- dignity
- autonomy

## **Basic rights**

The 15 basic rights are as follows.

- Right to life
- Protection from torture
- Protection from slavery and forced labour
- Right to liberty and security
- Right to a fair trial
- No punishment without law
- Right to respect for private and family life
- Freedom of thought, belief, and religion
- Freedom of expression

- Freedom of assembly and association
- Right to marry
- Protection from discrimination
- Protection of property
- Right to education
- Right to free elections

Not all of these rights are absolute rights. Absolute rights cannot be infringed, no matter how necessary it is considered to do so. There are also qualified rights, which can be infringed where properly regulated by the law and where it is considered necessary in a democratic society.

## **Human rights implications for NHS Kernow**

As well as ensuring that all of the services commissioned and provided by NHS Kernow respect and also promote the human rights of those using them, the organisation needs to monitor and mitigate any potential breaches. The organisation will do this through the impact assessment process, and through the quality and performance management process. The organisation will also aim to include measurable requirements around equalities and human rights within its contracts.

### **The human rights articles**

The following articles and protocols of the European Convention of Human Rights are relevant to the work of the organisation as a commissioner of healthcare services and as an employer. They are given legal effect in the UK by the Human Rights Act 1998.

#### **Article 2: Right to life**

Under this article, NHS Kernow needs to take appropriate steps to safeguard the lives of people in its area. NHS Kernow has a positive obligation to take effective and appropriate steps to safeguard the lives of those under its care and control. The right to life is a fundamental right. However, it does not amount to a right to receive medical treatment in all circumstances. For example, it is not incompatible with article 2, for clinicians to decide that it is in a person's best interest if medical treatment is withheld. A member of the public can also refuse to receive treatment, where the absence of which may result in their death. However, and by reference to article 8, this right does not extend to the right to assisted suicide.

The right also requires public bodies to investigate deaths of those in its care. This can have an impact on inquests and NHS Kernow will aim to ensure that investigations into deaths are prompt, thorough and effective.

Examples of where this article should be considered include:

- decisions around the way in which healthcare services are provided or withheld from people who are terminally ill
- deaths through negligence in hospitals and care homes
- do not attempt resuscitation orders placed without consent
- investigations into deaths
- not being able to eat properly while in hospital or a care home
- abuse or neglect of older people and those who have a learning disability or autism
- end of life issues
- carers jeopardising their health by delaying medical treatment

### **Article 3: Prohibition of torture**

Article 3 states that no-one should be subjected to torture or to inhuman or degrading treatment. There is an absolute prohibition on inhuman or degrading treatment. However, the ill-treatment would need to be very severe before being covered by this article. Article 3 covers serious degrading treatment that may result in actual bodily harm or physical or mental suffering or treatment which is grossly humiliating and undignified.

This article should be taken into account when considering:

- violence, abuse, or unacceptable treatment of an individual in their own home, in a hospital or residential care
- lack of respect for privacy on a hospital ward
- use of restraints
- denial of medication or essential aids
- failure to take account of risks to a carers' health

### **Article 5: Right to liberty and security**

Everyone has the right to liberty or freedom. This means that a person should not have their freedom restricted without good reason and in accordance with a procedure prescribed by law. This could be relevant if a person is being deprived of their liberty. This could be indicated by restraints being used, control over a person's movement or control over access to an individual.

The Deprivation of Liberty Safeguards Code of Practice introduced following the Mental Capacity Act 2005 was brought into force to provide a legal framework around the deprivation of liberty. The code sets out a procedure for the consideration and authorisation of the deprivation of liberty. These safeguards apply to people who have a mental disorder and who have been assessed as lacking the mental capacity to consent to their care or treatment. A best interest discussion must take place to ensure that the care being received is the least restrictive whilst also being necessary and proportionate to meet the person's needs.

This article should be taken into account when considering any person who has been assessed as lacking capacity to make a specific decision in their lives but especially people who are living with:

- environmental restrictions such as people in a care home or supported living accommodation
- people who lack capacity to make a decision about being admitted to hospital
- any level of restraint
- restricted access to independent living aids

### **Article 6: Right to a fair trial**

Where there is to be a decision concerning civil rights and obligations or of any criminal charge against a person, everyone is entitled to a fair and public hearing within a reasonable time by an independent and impartial tribunal previously established by law. Everyone shall have the possibility of being advised, defended and represented.

This article may cover internal employee issues, for example disciplinary and capability hearings which could result in an individual's loss of career or considerable damage to their career. Colleagues should always be given the opportunity to know what evidence there may be against them and have the right to state their case. The principles of this article should underpin the complaints procedure where complainants must be given every opportunity to express their views and any investigation must be conducted thoroughly, fairly and without bias.

This article should be taken into account when considering:

- robust and fair process for dealing with any complaints
- disciplinary and capability hearings

### **Article 8: Right to respect for private and family life**

Article 8 protects a person's right to respect for their privacy, private life, family life, home, and correspondence.

This is a qualified right in that interference is permitted where it is in accordance with the law. Interference may be necessary in a democratic society in the interests of national security, public safety, or the economic well-being of the country, for the prevention of disorder or crime, for the protection of health or morals, or for the protection of the rights and freedoms of others. However, any interference must be for a legitimate purpose and must not be discriminatory in its intention. This article may need to be considered where there may be limiting factors placed on an individual's ability to socialise and communicate or where an individual's dignity and autonomy may be affected.

This article should be taken into account when considering:

- involving people in decisions made about their treatment and care
- not being able to eat properly while in hospital or a care home
- lack of respect for privacy on a hospital ward
- not respecting gay and lesbian partners
- consent to medical treatment
- use of personal information

## Privacy

Private life is interpreted to include personal choice, relationships, access to personal information and participation in community life. The right includes rights to physical and psychological integrity. This incorporates the right for a person to access his or her own medical records and an obligation on NHS Kernow to maintain appropriate safeguards in relation to personal data relating to members of the public and employees. Public authorities will sometimes be able to justify why a person should not be able to access their own medical records, for example, if the medical practitioner believes that the disclosure to the person, is likely to cause serious harm to the person's physical or mental health.

The courts have interpreted the concept of private life in a broad way. It covers things like a person's right to choose their sexual orientation, their lifestyle, and the way they look and dress. It also includes the person's right to control who sees and touches their body.

For example, we must ensure organisations from whom we purchase services do not leave people undressed in a busy ward or take a blood sample without the person's permission.

All correspondence between the organisation and the individual and their family must be kept confidential. This includes matters relating to medical conditions, care pathways, and any information about complaints. Covert surveillance, for example use of CCTV in clinical situations, may also raise issues under this article.

In an employment context, this right may be relevant in a number of different scenarios. For example, clearly private emails and correspondence belonging to a colleague should not be considered as part of a disciplinary investigation conducted in relation to allegations of misconduct.

Examples of where this article should be considered include:

- confidentiality of correspondence and personal data
- access to personal records
- use of personal information

## Family life

People have the right to enjoy family relationships without interference from the government. This includes the right for people to live with their families and, where this is not possible, the right to regular contact.

Family life can include the relationship between an unmarried couple, including those in same sex relationships, an adopted child and the adoptive parent, and a foster parent and fostered child. Within a health care setting, for example, same sex couples can expect the same level of care and respect from clinicians as those in different-sex relationships.

This right may be relevant to consider where there are restrictions placed on a person placed in care from being visited or having a relationship, where there is a choice to be made regarding the residential care facility a person is placed in or whether to provide care at a person's home.

In an employment context, for example, an individual's human rights could be breached if they suffered abuse from their colleagues as a result of a relationship with a same sex partner.

This article should be taken into account when considering:

- appropriately involving family members in decisions about treatment and care
- not respecting gay and lesbian partners
- care placements
- care at home

## Home

The right to respect for a home is not a right to housing. Instead, it is a right for a person to enjoy their existing home peacefully. This right does have implications for individuals residing in residential accommodation or receiving care in their own home. However, this right does not require NHS Kernow to provide or commission care at a particular location. It will not be a breach of this right where NHS Kernow considers that a particular location is no longer suitable for the provision of care and that suitable alternative accommodation is available.

This article is often raised where a public authority has taken a decision to close a home and as a result individuals are required to move. For example, if the organisation, as lead commissioner, decides to decommission a care home.

This article should be taken into account when considering:

- where continuing care or other health care will be provided
- closure or suspension of placements in care or nursing home settings

## **Article 9: Freedom of thought, belief, and religion**

The Human Rights Act protects the right for people to have their own thoughts, beliefs, and religion. This includes the right to change religion or beliefs at any time. People also have the right to put their thoughts and beliefs into action.

This is a qualified right and so does not mean that people necessarily have a right to preach their religion to others or to try to convert people with whom they have contact to their own beliefs. Public authorities cannot stop people practising their religion, publicly or privately, without very good reason. This right does protect a wide range of religious beliefs and other beliefs, including veganism, pacifism, agnosticism, and atheism. Colleagues of differing religious beliefs may need to have their breaks managed so that they may go to practise their religion during the day and have designated places in which they can do this.

This article is relevant to individual's religious observance and diets in hospital and may influence the type of care and treatment they receive. For example, people who are Jewish may require strict observance of a kosher diet and may wish to avoid porcine based drugs. As a commissioner, the organisation must take steps ensure providers meet a reasonable requirement.

This article should be taken into account when considering:

- provision of facilities or food that does not meet religious or cultural needs
- providing appropriate communication support
- respect for cultural and religious requirements
- providing support to enable people to participate in their normal religious observances

## **Article 10: Freedom of expression**

Freedom of expression includes the right to hold opinions and receive information and give information to other people, without interference from a public authority. This includes the requirement to make sure that any information provided to people, for example, information leaflets or the complaints procedure, are accessible, people who are deaf have access to sign language interpreters or hearing loops at public meetings as appropriate, or literature is available in a variety of languages and formats.

This could also apply to individuals receiving information, written or verbal, about their conditions or treatment in a way that they can understand, including people with learning difficulties, autism, people who are deaf or have hearing difficulties and people for whom English is not their first language.

Examples of where this article should be considered include:

- digital inclusivity for web-based information

- provision of information in different formats, including easy read
- reasonable adjustments for colleagues who may need additional support
- communication, engagement, and consultation approaches
- access to interpreters and translators

### **Article 11: Freedom of assembly and association**

This gives people the right to hold meetings, marches, and demonstrations in public places. People have the right to protest by holding meetings and demonstrations with other people. However, these must be peaceful and without violence or threat of violence. This is a qualified right.

People also have the right to form and be part of a trade union, a political party or another association or voluntary group. Nobody has the right to force anyone to join a protest, trade union, political party, or another association.

This article is relevant to colleagues who wish to join a trade union. The NHS recognises a number of trades' unions nationally, which is mirrored in local negotiating committees. The organisation must ensure, however, that colleagues are not subjected to a detriment because of their membership of a trade union, and colleagues must not be pressurised into joining a trade union.

### **Article 12: The right to marry and found a family**

People of marriageable age have the right to marry and start a family. This right extends to people who are transgender, who are able to marry in the gender they identify with. Couples who register a civil partnership have the same rights as married couples in areas like tax, social security, inheritance, and workplace benefits.

Article 12 is also relevant for the rights of same sex partners to be involved in treatment decisions or get information about a civil partner's condition and treatment.

Article 12 provides a right for people to found a family, but the right does not impose a positive obligation on NHS Kernow to give assistance to an individual to start a family. For example, there is no positive obligation under this article for NHS Kernow to prescribe fertility treatment in order to enable a couple to found a family.

### **Article 14: Prohibition of discrimination**

Article 14 requires that all of the rights and freedoms set out in the Act must be protected and applied without discrimination.

Discrimination occurs when a person is treated less favourably than another person in a similar situation and this treatment cannot be objectively and reasonably justified. Discrimination can also occur if a person is disadvantaged by being treated the same as

another person when their circumstances are different. Examples might include if a person is disabled or pregnant.

Article 14 is based on the core principle that all of us, no matter who we are, enjoy the same human rights and should have equal access to them.

Human rights principles must underpin employment policies and the complaints procedures even if these documents do not expressly state that they do.

### **Protocol 1: Article 1 – Protection of property**

Protocol 1 Article 1 ensures that a person's belongings are not unfairly interfered with.

It protects an individual's right to the peaceful enjoyment of their own property. The article refers to 'possessions' which has a wider meaning than just land and property interests. It can also include such things as shares, a pension and contributory welfare benefits. It is a qualified right, which means that any interference must be in the public interest and in accordance with a procedure prescribed by law.

A person's belongings could include benefits and equipment provided, for example, because of their deafness. This may apply to the right to be protected from financial abuse. This may apply to a person's belongings in residential care or during a hospital stay if they are denied access to them without good reason, or if their belongings are mistreated by colleagues. It can include the right to carry on a business and this may arise in the context of performers list decisions or decisions relating to NHS Kernow's pharmacy list.

### **Limitations**

Courts must consider a variety of factors when cases are brought under the Human Rights Act.

- Balance the interests of the individual bringing the case with the interests of society.
- Make sure that if a right under the act is being restricted then the reason for doing this is important enough to justify limiting the rights.
- Make sure that the public authority is acting consistently and is not being unfair.
- Check that the measures the public authority has used to limit the rights of an individual must be balanced with the purpose of the public authority.

To bring a case against a public authority, individuals must be a person (individual or organisation, although not a public authority) directly affected by the act in question. An indirect victim can bring a claim if they are a close relative of the victim if they have suffered injury as well and the victim is unable to proceed. The case must be brought within 1 year of the unlawful act by the public authority. This can be extended if the court thinks this would be fair to do so.

## Raising concerns about human rights

It is NHS Kernow's intention to treat all colleagues and service users equally, and with dignity and respect. Therefore, all policy authors must take regard of the impact assessment, policies, strategies and corporate documents, the Equality Act 2010, and to the Human Rights Act 1998, and any other relevant legislation in order to avoid potential breaches.

Individuals or service users who feel there has been a breach of their human rights whilst accessing NHS Kernow commissioned health services may use the organisation's complaints procedure to raise their concerns.

Colleagues who feel their human rights have been breached by NHS Kernow policy or practice may follow the organisation's grievance and dignity at work procedure to raise their concerns.

## Appendix 1: Equality impact assessment

An equality impact assessment is used to establish how a policy or similar document may impact on individuals, communities, or equality groups to identify and minimise or remove any disproportionate impact.

**Name of policy or service to be assessed:** Human rights statement and guidance

**Department or section:** Equality and diversity

**Date of assessment:** 26 May 2022

**Person(s) responsible for the assessment:** Jayna Chapman, patient experience and equality manager

**Is this a new or existing policy?** Existing

### Aims, objectives and purpose of the policy

**Describe the aims, objectives, and purpose of the policy.**

This document is an explanation of the law surrounding human rights. This document gives comprehensive advice and guidance to colleagues and the public about the law on human rights and what this means in a healthcare environment.

The aim is to:

- promote a better understanding of existing legislation
- raise human rights issues within the organisation, which are relevant to all aspects of our work
- link with the equality impact assessment and full impact assessment templates and guidance, to provide comprehensive information for colleagues

**Who is intended to benefit from this policy, and in what way?**

NHS Kernow colleagues and members of the public.

**What outcomes are wanted from this policy?**

Better understanding of legal implications of the Human Rights Act 1998. Guidance and support for colleagues in understanding human rights issues.

**What factors or forces could contribute or detract from the outcomes?**

Lack of time for employees to read and understand the human rights statement and guidance.

**Who are the main stakeholders in relation to the policy?**

NHS Kernow colleagues

People and organisational governance committee

NHS Kernow governing body

Members of the public

**Who implements the policy, and who is responsible for the policy?**

Equality and diversity manager

People and organisational development team

NHS Kernow colleagues

**Differential impacts**

**Does this have a positive or negative impact on people from an ethnic minority background? How will any negative impact be mitigated?**

Promoting human rights issues within the organisation is relevant to all diversity strands. The focus on human rights, equality and diversity in this guidance should ensure that services better respond to individual needs, therefore resulting in improved services.

**Does this have a positive or negative impact on people who identify as male, female or intersex? How will any negative impact be mitigated?**

Promoting human rights issues within the organisation is relevant to all diversity strands. The focus on human rights, equality and diversity in this guidance should ensure that services better respond to individual needs, therefore resulting in improved services.

**What is the positive or negative differential impact on people from the perspective of disability? How will any negative impact be mitigated?**

Promoting human rights issues within the organisation is relevant to all diversity strands. The focus on human rights, equality and diversity in this guidance should ensure that services better respond to individual needs, therefore resulting in improved services. Articles 2, 10 and 14 give examples of human rights considerations which are particularly relevant to people with a disability.

**Does this have a positive or negative impact on people who identify as heterosexual, lesbian, gay, bisexual, pansexual or asexual? How will any negative impact be mitigated?**

Promoting human rights issues within the organisation is relevant to all diversity strands. The focus on human rights, equality and diversity in this guidance should ensure that services better respond to individual needs, therefore resulting in improved services. Articles 8 and 12 give examples of human rights considerations which are particularly relevant to sexual orientation.

**What is the positive or negative differential impact on people from the perspective of age? How will any negative impact be mitigated?**

Promoting human rights issues within the organisation is relevant to all diversity strands. The focus on human rights, equality and diversity in this guidance should ensure that services better respond to individual needs, therefore resulting in improved services. Articles 2, 5 and 8 give examples of human rights considerations which are particularly relevant to older people.

**What is the positive or negative differential impact on people from the perspective of religion or belief? How will any negative impact be mitigated?**

Promoting human rights issues within the organisation is relevant to all diversity strands. The focus on human rights, equality and diversity in this guidance should ensure that services better respond to individual needs, therefore resulting in improved services. Article 9 gives examples of human rights considerations which are particularly relevant in the context of religion and belief.

**What is the positive or negative differential impact on people from the perspective of marriage and civil partnership? This is particularly relevant for employment policies. How will any negative impact be mitigated?**

Promoting human rights issues within the organisation is relevant to all diversity strands. The focus on human rights, equality and diversity in this guidance should ensure that services better respond to individual needs, therefore resulting in improved services. Article 12 gives examples of human rights considerations which are particularly relevant to family life.

**Does this have a positive or negative impact on people who identify as trans or transgender, non-binary, or gender fluid? How will any negative impact be mitigated?**

Promoting human rights issues within the organisation is relevant to all diversity strands. The focus on human rights, equality and diversity in this guidance should ensure that services better respond to individual needs, therefore resulting in improved services. Articles 8 and 12 give examples of human rights considerations which are particularly relevant to people who are transgender.

**Does this have a positive or negative impact on people who are pregnant, breast feeding mothers, or those on maternity leave? How will any negative impact be mitigated?**

Promoting human rights issues within the organisation is relevant to all diversity strands. The focus on human rights, equality and diversity in this guidance should ensure that services better respond to individual needs, therefore resulting in improved services.

**Are there any other identified groups? How will any negative impact be mitigated?**

Promoting human rights issues within the organisation is relevant to all diversity strands, inclusion health groups and other identified groups. The focus on human rights, equality and diversity in this guidance should ensure that services better respond to individual needs, therefore resulting in improved services. Articles 2 and 3 give examples of human rights considerations which are particularly relevant to carers.

## **Human rights values**

**How have the core human rights values of fairness, respect, equality, dignity, and autonomy been considered in the formulation of this policy, service, or strategy?**

The core human rights principles underpin the basis of this document.

**Which of the human rights articles does this document impact?**

- ☒ To life
- ☒ Not to be tortured or treated in an inhuman or degrading way
- ☒ To liberty and security
- ☒ To a fair trial
- ☒ To respect for home and family life, and correspondence

- ☒ To freedom of thought, conscience, and religion
- ☒ To freedom of expression
- ☒ To freedom of assembly and association
- ☒ To marry and found a family
- ☒ Not to be discriminated against in relation to the enjoyment of any of the rights contained in the European Convention
- ☒ To peaceful enjoyment of possessions

**What existing evidence (either presumed or otherwise) do you have for this?**

The core human rights principles underpin the basis of this document.

**How will you ensure that those responsible for implementing the policy are aware of the human rights implications and equipped to deal with them?**

This document will accompany the equality impact assessment and full impact assessment templates and guidance, to provide comprehensive information for colleagues. The document will be made available for colleagues on the website and proactively disseminated via the staff update. Human rights training also forms part of the NHS Kernow mandatory equality and diversity training requirements.

## **Public Sector Value Act 2012**

NHS Kernow is committed and obliged to fulfil the requirements of the Public Sector Social Value Act 2012. This Act requires the organisations to consider how services commissioned or procured might improve the economic, social, and environmental wellbeing of an area.

**Please describe how this will support and contribute to the local system, wider system, and community.**

Not applicable

**Describe how the policy contributes towards eliminating discrimination, harassment, and victimisation.**

This document is an explanation of the law surrounding human rights. This document gives comprehensive advice and guidance to colleagues and the public about the law on human rights and what this means in a healthcare environment.

The aim is to:

- promote a better understanding of existing legislation
- raise human rights issues within the organisation, which are relevant to all aspects of our work
- link with the equality impact assessment and full impact assessment templates and guidance, to provide comprehensive information for colleagues

Promoting human rights issues within the organisation is relevant to all diversity strands, inclusion health groups and other identified groups. The focus on human rights, equality and diversity in this guidance should ensure that services better respond to individual needs, therefore resulting in improved services.

**Describe how the policy contributes towards advancing equality of opportunity.**

Equality of opportunity underpins the content of this document. By providing comprehensive guidance for colleagues, this enables colleagues to understand the impacts of service or corporate changes on the population and colleagues. This will help to highlight if/where further work needs to be undertaken to ensure advancement of equality of opportunity.

**Describe how the policy contributes towards promoting good relations between people with protected characteristics.**

By providing comprehensive guidance for colleagues, this enables colleagues to understand the impacts of service or corporate changes on the population and colleagues. This will help to highlight if/where further work needs to be undertaken to ensure advancement of good relations between people with protected characteristics.

**If the differential impacts identified are positive, explain how this policy is legitimate positive action and will improve outcomes, services and or the working environment for that group of people.**

Promoting human rights issues within the organisation is relevant to all diversity strands, inclusion health groups and other identified groups. The focus on human rights, equality and diversity in this guidance should ensure that services better respond to individual needs, therefore resulting in improved services.

**Explain what amendments have been made to the policy or mitigating actions have been taken, and when they were made.**

None identified.

**If the negative impacts identified have been unable to be mitigated through amendment to the policy or other mitigating actions, explain what your next steps are using the following equality impact assessment action plan.**

Not applicable.

**Signed (completing officer):** Jayna Chapman

**Date:** 26 May 2022

**Signed (head of department or section):** Trudy Corsellis

**Date:** 30 June 2022

Please ensure that a signed copy of this form is sent to both the corporate governance team with the policy and the equality and diversity lead.