

The Scottish Ambulance Service  
A Special Health Board of NHS Scotland



# Gender Equality Scheme 2010 - 2013



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This document may be available in summarised format in large print, Braille, audiocassette or alternative language. If you would like a copy in any of these formats or if you would like someone to explain it to you, or you want to assist us in our future gender equality arrangements, please contact the **Corporate Affairs Manager** at the address below:

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## **1.Foreword by the Chief Executive**

Scotland is an increasingly diverse country. Whilst this provides great opportunities, it also presents significant challenges in ensuring that we, as both as an employer and service provider, ensure that we do not discriminate unfairly, and instead promote gender equality.

Our first Gender Equality Scheme and Action Plan, was published in April 2007 and the aim of this was to ensure that we do not consciously or unconsciously discriminate, that we improve equality of opportunity, develop better links with stakeholders and partners and a greater understanding of the impact our Service has on gender equality.

Building on our success to date our organisational action plans and themes set out how we intend to continue to address issues of gender, alongside those of age, disability, race, religion and belief and sexual orientation.

We aim to mainstream diversity as a unifying element of all that we do. We are confident that addressing the issues identified in the Gender Equality Scheme and its related action plan will help us make true equality and diversity a reality.

**David Garbutt**  
**Chairman**

**Pauline Howie**  
**Chief Executive**

**Joint statement by the Director of Human Resources and Organisational Development & Partnership Forum Convenors**

We fully support the Service in its aim of meeting the different needs of those living, working and visiting Scotland. We particularly support the aim of the Service to challenge discrimination, promote equality and respect human rights. We will continue to be a 'critical friend' in helping the Service to achieve these objectives.

**Board Statement of Organisational Intent**

The Service Board is committed to continually improving the services provided to the community and will extend the ethos of our Patient Focus & Public Involvement framework to ensure that those services are also gender competent. The development of equality training for all staff will bring with it the reinforcement that discrimination has no place in our organisation and that any such discriminatory behaviour will be handled through disciplinary procedures.

## **2. The Scottish Ambulance Service**

The Scottish Ambulance Service is a Special Health Board of NHS Scotland. It employs approximately 4,300 staff across mainland Scotland and Islands and responds to nearly 600,000 Accident and Emergency calls per year, around 450,000 of which are 999 calls.

Almost 1.6 million patients are taken to and from hospital by our Patient Transport Service each year and we have around 30 Area Service Offices planning and co-ordinating these requests. Our Air Ambulance service deals with more than 3,000 incidents per year and we transport over 96,000 patients between hospitals in Scotland, by road and air annually.

We have three Emergency Medical Dispatch Centres based in Glasgow, Edinburgh and Inverness which handle in excess of 800,000 calls for help each year, ranging from life-threatening heart attacks requiring an immediate response to requests from our NHS partners to transfer patients between hospitals.

## **3. Statement of equality values, standards and principles**

The Service is committed, in its role as a provider of health services and as a local employer, not to discriminate against any individual on the grounds of age, disability, gender, race, religion and belief and sexual thus promoting equality of opportunity for all and sustaining good relations between all people. It seeks to value and respect staff, patients and other agencies and individuals with whom it engages.

Staff and patients are actively encouraged to challenge and report any incidents of gender discrimination. The Service will seek to promote and integrate the principles and objectives of gender equality in all aspects of its work. It will not tolerate gender discrimination or harassment, and will take proactive measures to ensure prevention and positive steps to tackle it whenever it occurs.

The Scottish Ambulance Service values are;

We will

- Act with integrity, openness and honesty
- Put the patient at the heart of everything we do
- Treat each other and everyone with respect and dignity
- Encourage learning, creativity, innovation and new ways of working
- Challenge abuse, discrimination or harassment

The Service recognises that men and women, boys and girls, transsexual people and service users have different needs and uses of the health service. By taking into account these different needs, the quality of health services will improve for everyone. There are many differences in patterns of health, differences in respect to certain types of illness and how health services are used by men and women. Some of the key biological and gender health facts can be seen at Appendix 1.

## 4. Introduction

### Gender Equality Duty

The Equality Act 2006 amends the Sex Discrimination Act 1975 to place a legal obligation on all public authorities, when carrying out their functions, to have due regard to the need to:

- eliminate unlawful discrimination and harassment
- promote equality of opportunity between women and men

These two obligations together form 'the general duty' which came into force on 6 April 2007. All Health Boards in Scotland are also subject to a set of 'specific duties' that set out the actions that must be taken in order to plan, deliver and evaluate action to meet the general duty.

The specific duties require NHS Boards to:

- Prepare and publish a Gender Equality Scheme showing how it intends to fulfil the general and specific duties, containing gender equality objectives
- Consult employees, service users and stakeholders [including Trade Unions]
- Take into account any information it considers relevant
- Ensure that the Scheme sets out the actions the health board has taken or intends to take to:
  - Gather information on the effect of its policies and practices on men and women, in employment, services and performance of its functions
  - Use the information to review the implementation of the equality scheme objectives
  - Assess the impact of its current and future policies and practices on gender equality and use this information to inform planning and delivery
  - Develop and publish an Equal Pay Policy and report on progress within three years
  - Ensure implementation of the gender equality scheme objectives
  - Implement a scheme within three years, unless unreasonable to do so
  - Review and revise the scheme at least every three years
  - Report on progress annually

**Comment [w1]:** I believe the 'goals' and the Scheme/Action Plan are two distinct but complementary parts of the greater whole [see work being done by Peter and my comments]. If this is an accurate analysis on my part, we would need to be clear in our Intro about that distinction.

The Gender Equality Duty (GED) is different from previous sex equality legislation in that it requires an organisation to be proactive in the action it takes. This means that the Service must act to promote gender equality, not

just to avoid discrimination, and that we must take action to tackle discrimination, rather than waiting for individuals to take cases against us.

In addition to publishing a Gender Equality Scheme public authorities are also required to publish an Equal Pay Statement. The Equal Pay Statement published in September 2007 will be reviewed and a new Equal pay Statement published in September 2010.

### **What is unlawful sex discrimination?**

Unlawful sex discrimination in the Sex Discrimination Act and the gender duty means:

- Direct and indirect discrimination against women and men, in employment and education; in goods, facilities and services and in the exercise of public functions
- Harassment, sexual harassment and discrimination on the grounds of pregnancy and maternity leave
- Discrimination on the grounds of gender reassignment in employment and vocational training
- Direct and indirect discrimination in the employment field on the grounds that a person is married or a civil partner
- Victimisation
- Harassment and sexual harassment

A summary of definitions can be found at Appendix 2.

## 5. Organisational responsibility for the Scheme

The overall responsibility for the scheme remains with the **Chief Executive** as the Accountable Officer, ensuring that the Service meets its responsibilities under the Equality Act 2006 and ensuring that the Scheme is implemented.

The **Director of Human Resources and Organisational Development** is responsible for ensuring progression of the Gender Equality Scheme (and Equality & Diversity functions) at a strategic level and for monitoring progress within employment, as well as providing reports to the Service Board. The **Director of Service Delivery, General Managers and Heads of Department** are responsible to the Board for implementation and operational progression of this Scheme.

The **Equalities Manager** has responsibility for raising awareness of gender equality and promoting best practice across the Service in order to progress this Scheme through the Equality and Diversity Steering Group.

**Heads of Service** and individual **Managers** have a responsibility to promote gender equality within their departments and ensure that the principles of the Gender Equality Scheme are embedded within their business plans, action plans, policies, practices and procedures. They also have a responsibility to protect members of staff from unfair treatment, discrimination, prejudice, harassment or bullying and take positive action to address gender issues, support staff and respect confidentiality at all times. They also have a duty to ensure staff are aware of their responsibilities under the Gender Equality Scheme through access to training and awareness raising.

The operational responsibility for meeting the requirements of the Act and integrating gender equality into service provision and employment lies with **all** members of staff. This includes an individual responsibility to maintain an awareness of gender issues, ensure that behaviours are appropriate at all times, ensure training is obtained where relevant and openly challenge inappropriate behaviour.

Trade Unions and Staff Side Representatives have a responsibility to work in partnership with the Service to tackle gender discrimination, prejudice and harassment at work.

All of the above are supported by the Patient Focus Public Involvement and Equality & Diversity Steering Groups. The Service's Equal Opportunities Policy, Race Equality Scheme and Disability Equality Scheme also encompass the broader principles of the Scheme.

## 6. Gender equality in context

Despite 30 years of sex discrimination legislation, there is still widespread discrimination – sometimes intentional sometimes unintentional – and persistent gender inequality. Public bodies must now look at who uses their services and consider what different needs men and women, including transsexual people, have and address these needs appropriately

The persistence of major health problems in Scotland remains a challenge for NHS Scotland, as well as other public bodies and the economy. There are undoubtedly considerable social class variations in health with some areas in Scotland ranking amongst the highest in the UK in relation to mortality and poverty. However, there are also significant gender differences associated with social and economic variations. Gender also appears to influence the experience of men and women in using the health service and treatment once in care. The Gender Equality Duty provides an opportunity to ensure our services take account of these differences and deliver services that respond sensitively to all aspects of an individual's life circumstances.

The NHS Scotland is a major employer and therefore has a significant role to play in tackling gender inequality in the workforce. As at 30 September 2009 NHS Scotland employed 169,000 staff, 78% of which are women. A total of 89% of nursing and midwifery staff are women. Despite such a high level of women working in the health sector they only make up 36% of Chief Executives. Well-intentioned policies aimed at improving work-life balance may have enabled many women to combine employment and work at home but may also reinforce gender roles that balancing work and home life is a women's responsibility. Ethnic minority women are especially under-represented in senior positions in Scotland's public sector.

The Gender Equality Duty requires health boards to tackle occupational segregation, act on data to remove barriers that prevent men and women reaching their potential and play a significant role in achieving gender equality in employment in the public sector.

## 7. The Gender Equality Scheme

### Goals and Objectives

#### Goals

The Service has the following Gender Equality Goals:

- To redress any gender imbalances in the way the Scottish Ambulance Service delivers its services to the public, patients and stakeholders

- Through the Programme Board and sub programmes the Service will identify health inequalities experienced by men and women and where appropriate will introduce changes which will help eliminate inequalities
- Identify particular gender equality goals set by partner Territorial Health Boards in which our services play a part and revising our Gender Equality Scheme as appropriate

## Objectives

To address inequality issues for men, women and transsexual people across Scotland the Service has a number of objectives.

### **7.1 Leadership and putting the Gender Equality Scheme into practice**

We recognise that the success of any Scheme is dependent upon those responsible for taking the appropriate actions. Organisational responsibility for the Scheme is very clear and the Action Plan provides further detail of outcomes and key actions required.

Every part of the organisation has a strategic role to play in the successful implementation of the Gender Equality Scheme. Details of the Action Plan can be found at Appendix 3.

### **7.2. Consultation and involvement**

A key element of the Scheme is to actively involve employees and stakeholders in its development in general terms and in particular, in the identification of gender goals.

Through the National Partnership Forum discussion will take place in relation to what the gender goals and objectives should be. At Divisional level staff will be involved through local Partnership Forums and Management Team Meetings.

Employees can make comment and raise any suggestions through the Equality and Diversity section on the intranet or by making direct contact with the Equalities Manager.

Stakeholders will be able to contribute through the community engagement activity on going under the different sub programmes. Internally work will also continue through the Patient Focus Public Involvement and Equality and Diversity Steering Groups.

We will continue to involve employees and stakeholders in both reviewing the existing Scheme and the development of any future Schemes.

### **7.3 Assessing the impact or likely impact of functions, policies and practices on gender equality**

All of the policies and functions have been reviewed in relation to how relevant they are to the equality duty created by the Equality Act 2006.

The purpose of the impact assessment is twofold:

- To ensure that neither gender is disadvantaged by the Service's decisions and activities
- To identify where the Service can promote equality of opportunity between men and women

Based on previous experience and learning we have updated our assessment of functions and policies by listing all of our functions, policies and practices and assessing the degree of relevance. The potential to affect men and women differently has been considered in order to establish priorities and whether this should be high, medium or low priority. Those functions, policies or practices identified as high priority will take precedence for equality impact assessment. A list of functions, policies and practices can be seen at Appendix 4.

The HR Directorate management team are provided with regular updates so that early remedial or corrective action can be taken, or good practices shared. Divisions are tasked to seek joint arrangements with partners to avoid unnecessary duplication and ensure effective consultation takes place.

Managers have been trained to ensure there is an understanding of the purpose of the equality impact assessment process and this is carried out at local level. Further training will take place in future as we continue to develop capacity for applying the equality impact assessment process to ensure all impact assessments are complete.

### **7.4. Training and awareness**

To raise awareness and promote gender equality across the organisation we recognise the need to further develop training to ensure that both individual needs are met and gender equality is embedded in all that we do.

Integral to the NHS Agenda for Change programme, the Knowledge and Skills Framework is being implemented across the Service. All post outlines will clearly identify equality and diversity as a core dimension clarifying the need to act in ways that support equality and diversity. Training needs will be identified through the implementation of e-KSF the on line monitoring tool.

### **7.5 Measuring and monitoring**

Monitoring of the Scheme will be reported in the Service annual report. This report will show what progress has been made towards the achievement of the Scheme objectives and Action Plan. The Action Plan will be monitored for effectiveness and areas identified for priority action or where lacking in progress will be escalated to the appropriate level as required, ultimate responsibility for delivery of the Action Plan resting with the Board.

All information gathered will help to influence strategic and operational decision making at local and regional levels.

There are systems in place to gather information on the gender of the service users of the Scottish Ambulance Service. This includes the numbers of men and women using Accident and Emergency and Patient Transport Services.

Patient satisfaction surveys are conducted annually and data collected includes gender together with other equality details. This data is analysed and used to ensure the service continuously improves. Rather than just recording demographic details consideration will be given as to whether men and women have different experience of the Service.

The Service continues to monitor the gender of its employees in addition to monitoring for disability and race. The staff composition as at 1 April 2010 can be seen at Appendix 5.

The following employee details are collected and will be broken down by gender.

- Staff currently working for us
- Applicants for employment, training and promotion
- Staff who receive training
- Staff who benefit or suffer from performance appraisals
- Staff who are involved in grievance procedures
- Staff who are subject to disciplinary action
- Staff who end their employment

In the past some employees have declined to provide equality monitoring details. We will endeavour in future to encourage staff to share data with us and thereby improve our analytical abilities.

### **Occupational Segregation**

Employee monitoring will continue and steps will be taken to address any imbalances. Whilst it is recognised that the majority of vehicle crew staff are male this situation has greatly improved over the last 10 years as more women have joined the Service. Currently there are 33% women and 67% men employed by the Service.

## **Monitoring of policies**

In addition to the capture of employment data the Service will also monitor policies to ensure these are used by men and women and should there be evidence of adverse impact on specific groups then actions will be taken to eliminate this.

Data will be captured in order to analyse the use of the following policies:

- Recruitment and selection
- Flexible working
- Part time working
- Carers leave
- Managing pregnancy and maternity leave
- Dignity at work policy
- Discipline and grievance procedures
- Retirement

## **Equal Pay Policy**

The term equal pay relates to payment for work of equal value regardless of whether the post holder is a man or women.

As part of NHS Scotland the Service implemented Agenda for Change terms and conditions of employment. Agenda for Change is a pay and modernisation package that aims to ensure that those who work for the NHS are paid on the basis of equal pay for work of equal value. Agenda for change applies to all staff who work directly for the NHS except the most senior managers and those covered by the Doctors' and Dentists' Pay Review Body.

## **Transgender equality**

The Service recognises the need to provide support for transgender employees particularly where individuals are going through gender reassignment. Increasing understanding of transgender equality and the associated barriers faced by transgender people is important if we are to eliminate discrimination. The Service is committed to developing a transgender policy and this is a key part of our work in this area.

## **7.6 Communicating the results**

This scheme will be readily accessible to both members of staff and the public, via published documents, the Scottish Ambulance Service website and intranet and in alternative formats as requested.

The scheme will be brought to the attention of all staff through induction courses so that it becomes an integral part of our culture. Appropriate training will be provided as detailed in the Action Plan.

In addition to the scheme, we will publish the results annually and outcomes of our monitoring processes and any action the Service intends to undertake based on the results of our findings.

## **7.7 Procurement**

The Service acknowledges that our general duty to promote gender equality extends into those situations where any of our functions or services are contracted or sub-contracted to other organisations, groups or individuals as well as direct works such as building works and repairs.

We will impact assess our procurement, tendering and contract management processes to ensure that meeting the gender equality duty is built-in to the procurement process.

We will monitor agreements with any out-sourced service providers, e.g. Recruitment, Occupational Health, to ensure they are fully aware of this Gender Equality Duty, and undertake to comply with the Service organisational requirements when acting on our behalf. To ensure any contractors conduct their duties in a manner that assists us to meet our obligations under the general equality duty, we will take the following steps:

- To be accepted on our tender lists, and to be awarded a contract or have one renewed, organizations will be required to provide information about any findings of sex discrimination or harassment relating to them, and will be required to adopt the Equality and Human Rights Commission's statutory Codes of Practice and other guidance on complying with the terms of the Sex Discrimination Act, the Equality Act and the Gender Equality Duty.
- We will ensure our procurement services align with guidance published by NHS National Services Scotland on national systems of procurement on behalf of NHS Scotland.

We will support all of this by providing training to staff involved in procurement.

In addition to our role in procurement, we recognize that if we work in partnership with other organizations, our responsibility to promote gender equality in our work continues to apply. We will also review our current list of partners to ensure inclusion of organizations representing the experiences, interests and views of men and women.

## **7.8 Gender based violence**

An action plan has been developed specifically to address gender based violence and this is included in the Scheme action plan at Appendix 3. This includes the introduction of further guidance on domestic abuse for staff, the development of an employee policy on gender based violence and raising awareness of gender based violence.

In monitoring the application of our developing gender based violence policy we will identify in particular the causes and consequences of violence against women. It is hoped that this will also assist in decreasing the social and economic impact of domestic abuse in the workplace.

## **8. Raising concerns or complaints**

- All complaints received by the Service regarding service delivery are monitored for any gender element and the equality profile of the complainant.
- Every support is provided to staff wishing to raise a concern to enable matters to be resolved on an informal basis. Employees who wish to make a formal complaint are supported and any alleged act of gender discrimination or harassment is fully investigated and appropriate action taken as necessary.
- Dignity at work awareness is promoted across the Service and anti-bullying and harassment training is available to all staff.
- The anti bullying and harassment campaign is promoted to ensure staff are fully aware of the behaviours expected in the workplace and have ready access to the Confidential Harassment Advisers.
- The Service will continue to work with its partner organisations to identify improvements to its services and employment practices

## Gender and Health

### Biological differences between the sexes

- Men typically develop heart disease ten years earlier than women.
- Women's immune systems make them more resistant than men to some kinds of infection including tuberculosis.
- Women are around 2.7 times more likely to develop an auto-immune disease such as diabetes.

### Gender differences in health and illness

- Men are more likely than women to commit suicide
- Boys are twice as likely as girls to be killed or seriously injured in pedestrian road accidents
- Life expectancy for women in Scotland is the lowest in the EU and for men the second lowest
- Women are more likely to suffer from anxiety depression
- The gap between male and female smoking rates is beginning to narrow as young women are taking up the habit more frequently than young men
- Men are more likely than women to die of injuries but women are more likely to die of injuries sustained at home
- Women make greater use of health services. Only in part does this reflect reproductive treatment / advice
- Women on the whole have better health-related behaviours than men in respect of diet, alcohol and smoking
- Men continue to take up primary healthcare services at lower rates than women and continue to experience poorer outcomes in some areas of health, including higher rates of cancer and heart disease
- Women in the most disadvantaged socio-economic classes are up to six times more likely than the most advantaged classes to die from diseases including respiratory disease, heart disease and lung cancer
- Trans men and women experience poor health outcomes and barriers when accessing gender reassignment and general health services
- Violence against women and girls is a major contributor to poor health in women and costs the NHS an estimated £1.2 billion a year for physical injuries and £126 million for mental health support {UK}

### Gender Equality Scheme Summary of definitions

**Equality** - The principle by which all persons are treated in a fair way. It is about creating a fairer society where everyone can take part and has the opportunity to fulfil their potential. Focuses on positive action for minority / under-represented groups.

**Diversity** - This is about recognising and valuing difference in the broadest sense for the benefit of patients, carers, members of the public and staff. Focusing on the benefits of utilising the potential and strengths of everyone and respecting and treating people as individuals.

**Gender** – Refers to roles, attitudes, values and behaviours given to women and men by society. These characteristics can vary depending on which society we live in. For example, traditionally, a gender role would suggest that women should look after children, while men continue to work.

**Sex** – Refers to how we were born, and the biological and physical differences between men and women. People are born male and female, learn to be boys and girls and grow into men and women.

**Transsexual** - A person who intends to, or is undergoing or has undergone gender reassignment to change sex. It means that the person identifies with the sex other than that on their birth certificate or often feels they were born with the wrong body.

**Gender Reassignment** – A process taken under medical supervision, of reassigning a person's gender by changing physical or other characteristics and alter their bodies to match their gender identity.

**Transgender** – An all-encompassing umbrella term to describe the whole range and diversity of gender identity and expression, including transsexual.

**Gender Mainstreaming** – Is an approach to integrating gender considerations into all facets of work. It involves ensuring that gender views and attention to the goal of gender equality, are central to all activities – policy development, research, advocacy, dialogue, legislation, resource allocation and planning, implementation and monitoring of programmes and projects.

**Duty** – A compulsory and legal responsibility to do something, in this case, to eliminate sex discrimination and promote gender equality.

**Gender Disaggregated Data** – Information that has been collated and analysed by gender, for example making sure that the results of patient satisfaction surveys include a question whether a patient is male or female.

The results of the survey would highlight any differences between men's and women's satisfaction with their treatment / service.

**Occupational Segregation** – Is where men and women are employed at different jobs in the workplace and occurs when men or women are in a majority in a particular job. For example, men working in construction and women working in child care.

**Equal Pay** – The term equal pay relates to payment for work of equal value regardless of whether the post holder is a man or women. Variations in work of a similar kind must be as a result of a material factor, which is not the difference of sex. It is recognised there is still inequality between pay for men and women despite Equal Pay legislation being in place for over thirty years.

**Agenda for change** – this is a recent pay and reform package that aims to ensure that those who work for the NHS are paid on the basis of equal pay for work of equal value. Agenda for change applies to all staff who work directly for the NHS except the most senior managers and those covered by the Doctors' and Dentists' Pay Review Body.

**Functions** – refers to the full range of duties and powers of an organisation. It covers internal and external functions, including service delivery (e.g. clinical care, research, education and health improvement projects)

**Policy** – is an umbrella term for everything an organisation does and includes legislation, strategies, services and functions. Any assessment of a policy should include an examination of long standing "custom and practice" and management decisions, as well as any formal written policy.

**Direct discrimination** – occurs when someone is treated less favourably than others on grounds of their gender

**Indirect discrimination** – occurs when a provision, criterion or practice, disproportionately disadvantages someone on grounds of their gender

**Harassment** – occurs when conduct is applied which is unwanted and has the purpose or effect of violating dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for that person having regard to all the circumstances.

**Due regard** – this concept is based on proportionality and relevance. It is the weight given to gender equality which should be proportionate to its relevance to a particular function. The greater the relevance of the function to the duty, then the greater regard that should be paid to it.

**1. Leadership and putting the Gender Equality Scheme into practice**

| Key task / activity   | Date for task completion | Evidence of task / activity                                     | Lead responsibility | Risks [if not completed]                                | Intended outcomes  |
|---|--------------------------|---|---------------------|---|--|
| 1.Publish Gender Equality Review and revised Gender Equality Scheme | June 2010                | Gender Equality Review / Scheme available on website & intranet | Equalities Manager  | Major – part of specific duties on gender equality      | Provides a focus for gender equality and keeps Scheme up to date.<br>Meets specific legal duty |
| 2.Publish Equal Pay Statement and Report                            | September 2010           | Equal Pay Review available on website and intranet              | Equalities Manager  | Major – part of specific duties on gender equality      | Provides a focus on equal pay.<br>Meets specific legal duty                                    |
| 3.Develop Single Equality Scheme                                    | December 2011            | Scheme available on website and intranet                        | Equalities Manager  | Major – part of specific duties under Equality Act 2010 | Provide a focus for all equality work in one place.  |

**2. Consultation and involvement**

| Key task / activity  | Date for task completion | Evidence of task / activity   | Lead responsibility | Risks [if not completed]        | Intended outcomes  |
|--|--------------------------|---|---------------------|---------------------------------|--|
| 4.Continue to involve service users [including men, women, boys and girls] and staff in our work | On going                 | Information gathered and used to assess impact of policies and inform planning and delivery | All managers        | Major – part of specific duties | Informed Service planning and development.<br><br>Meets specific duty. |

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| programmes                             |             |   |                         |  |  |
| 5. Analyse service user data by gender | August 2010 | Reports available through data warehousing system | Senior Clinical Analyst | Medium – without robust data service change may not meet the needs of patients | Improved access to gender data making it easier to identify gaps and take action where appropriate |

| <b>3. Assessing the impact of functions, policies and practices</b>                           |                          |                             |                     |  |   |
|---|--------------------------|-----------------------------|---------------------|--|---|
| Key task / activity   | Date for task completion | Evidence of task / activity | Lead responsibility | Risks [if not completed]                     | Intended outcomes   |
| 6. Guidance for Equality Impact Assessment to be reviewed and updated                         | July 2010                | Guidance circulated         | Equalities Manager  | Medium – completion of EQIA will not improve | Better assessment of the impact of policies on gender equality and informed planning and redesign |
| 7. Provide further EQIA training for managers   | On going                 | Training records            | Equalities Manager  | Medium – completion of EQIA will not improve | Increase the pool of those with skills to carry out EQIA. EQIA embedded across the Service.       |
| 8. Produce an action plan specifying when high priority policies will go through EQIA process | December 2010            | Action plan                 | Equalities Manager  | Medium – completion of EQIA will not improve | More robust approach to EQIA – progress can be readily monitored                                  |
| 9. Review and revise  | December                 | Logging system              | Equalities          | Medium – EQIA work                           | More transparent reporting  |

|   |      |  |         |                         |  |
|---|------|--|---------|-------------------------|--|
| logging system of EQIA activity for publication | 2010 |  | Manager | will not be transparent | for patients, staff, the public and stakeholders |
|---|------|--|---------|-------------------------|--|

| <b>4. Training and awareness</b>  |                          |   |  |  |   |
|---|--------------------------|---|--|--|---|
| Key task / activity   | Date for task completion | Evidence of task / activity                     | Lead responsibility  | Risks [if not completed]   | Intended outcomes   |
| 10.Continue to raise awareness of the Service for men and women and boys and girls and transsexual people.        | On going                 | Patient Focus Public Involvement {PFPI} reports | PFPI Lead<br>PFPI<br>Representatives   | Medium – under the specific duty it is necessary to gather information on policies, practice and experience of service | Increased understanding of gender equality related issues for patients, the public, staff and stakeholders  |
| 11.Raise understanding of specific life threatening conditions with community groups, e.g. stroke, cardiac arrest | On going                 | Patient Focus Public Involvement {PFPI} reports | PFPI Lead<br>PFPI<br>Representatives<br>Community Resuscitation Development Officers | Medium – the Service would not be supporting this key priority area of the NHS Scotland [coronary heart disease]       | Members of the public and patients will be more aware of the risks associated with coronary heart disease and stroke. They will be able to recognise symptoms and know how to respond in an emergency |
| 12.Incorporate gender / transgender equality into existing training programmes                                    | July 2010                | Training programme materials                    | Head of Education & Professional Training<br>Head of Leadership & Management         | High – major part of general duties  | This will assist in eliminating discrimination and harassment and the promotion of equal opportunity between men and women  |

|  |               |  |                                 |  |   |
|--|---------------|--|---------------------------------|--|---|
| including induction, and post proficiency training   |               |  | Development                     |  |   |
| 13.Utilise Service intranet, website and communication systems to raise awareness of gender equality and promote positive messages about gender.   | On going      | Information presented.<br>Articles<br>Equality & Diversity pages on the website and intranet | Equalities Manager              | Low – it will be more difficult to raise awareness                   | Increased understanding of gender equality  |
| 14.Through the Knowledge and Skills Framework and the e-KSF tool assess staff competencies in relation to equality and diversity including gender. | On going      | e-KSF reports  | Personnel & Development Manager | Medium – it will be more difficult to identify common training needs | Reports will identify skills gaps and consideration will be given as to how best to meet the training needs.  |
| 15.Develop a employee transgender policy   | December 2010 | Policy available   | Equalities Manager              | High – relevant to meet general and specific duties                  | The needs of transgender staff are taken into account and appropriate support provided.<br>Eliminate unlawful discrimination. Ensuring the privacy of transgender staff |

|  |  |  |  |  |  |
|--|--|--|--|--|--|
|  |  |  |  |  | and providing additional support for those staff going through gender reassignment |
|--|--|--|--|--|--|

| <b>5. Measuring and monitoring</b>  |                          |   |   |  |   |
|---|--------------------------|---|---|--|---|
| Key task / activity   | Date for task completion | Evidence of task / activity                     | Lead responsibility                       | Risks [if not completed]   | Intended outcomes   |
| 16.Report on progress of Gender Equality Scheme   | June 2011<br>June 2012   | Annual report available on website and intranet | Equalities Manager                        | Major – part of specific duties on gender equality   | Continued focus on gender equality<br>Meets specific legal duty   |
| 17.Equality monitoring reports to include analysis by gender  | Sept 2010, 2011, 2012    | Report available on website and intranet        | Equalities Manager                        | Major – part of specific duties on gender equality   | Continued focus on equality across equality strands.<br>Assist to identify gaps and trends which may suggest unequal access to employment opportunities.<br>Meets specific legal duty |
| 18.Anti bullying and harassment campaign to be monitored to identify where there are gender specific issues including incidents relating to transgender / | On going                 | Monthly reports                                 | Director of HR & OD<br>Equalities Manager | Medium – it will not be possible to establish whether staff concerns relate to issues of gender equality | Access to confidential advice for all staff.<br>Staff encouraged to resolve issues at the earliest opportunity.   |

|  |          |   |   |  |   |
|--|----------|---|---|--|---|
| transsexual people   |          |   |   |  |   |
| 19. Monitor patient experience of service provided through Accident & Emergency and Patient Transport Services   | Annually | Survey reports  | Information Governance Manager  | Medium – part of specific duty to gather information | Better understanding of attitudes, thoughts and experience of patients.<br><br>Identify where improvements could be made.                       |
| 20. Monitor the spine point allocated to new employees to ensure this is applied consistently  | Annually | Employee monitoring report  | Head of Personnel   | High – relevant to specific duty                     | Address issues where this process has been applied unfairly.  |
| 21. Identify ways in which men and women can be encouraged to apply for posts where there has been traditionally under representation and ensure fair access to career development | On going | Advertise in non traditional forums. Trial new methods of recruitment. Consider career development. | Recruitment & Workforce Planning Manager.<br>Head of Leadership & Management Development. | Medium – to address gender imbalance                 | Increased number of men and women applying for posts where traditionally there has been under representation [internal and external applicants] |
| 22. Monitor the application of HR  | Annually | Departmental reports  | Head of Personnel   | High – relevant to specific duty                     | Increase the number of staff taking up flexible working   |

|  |               |                       |                    |                                  |   |
|--|---------------|-----------------------|--------------------|----------------------------------|---|
| policies including flexible working, part time working, carers leave, maternity leave and retirement |               |                       |                    |                                  | options.  |
| 23. Conduct a pay monitoring exercise  | December 2010 | Pay monitoring report | Equalities Manager | High – relevant to specific duty | Ensure men and women are rewarded equally for work of equal value |

### 6. Communication the results

| Key task / activity                              | Date for task completion | Evidence of task / activity                     | Lead responsibility | Risks [if not completed]                           | Intended outcomes   |
|--|--------------------------|---|---------------------|--|---|
| 24. Report on progress of Gender Equality Scheme | June 2011<br>June 2012   | Annual report available on website and intranet | Equalities Manager  | Major – part of specific duties on gender equality | Continued focus on gender equality<br>Meets specific legal duty |

### 7. Procurement

| Key task / activity  | Date for task completion | Evidence of task / activity | Lead responsibility | Risks [if not completed]                | Intended outcomes  |
|--|--------------------------|-----------------------------|---------------------|---|--|
| 25. Review the current pre qualification questionnaire to ensure this is accessible to all | December 2010            | EQIA report completed       | Head of Procurement | Medium – to ensure compliance with duty | Increase equality of opportunity for those organisations wishing to provide goods and services |

|             |  |  |  |  |  |
|-------------|--|--|--|--|--|
| communities |  |  |  |  |  |
|-------------|--|--|--|--|--|

| <b>8. Gender based violence</b>   |                          |   |   |   |   |
|---|--------------------------|---|---|---|---|
| Key task / activity   | Date for task completion | Evidence of task / activity   | Lead responsibility                       | Risks [if not completed]  | Intended outcomes   |
| 26. Incorporate relevant training on gender based violence into training provided for clinical staff / call handlers                        | December 2010            | GBV included in training programmes   | Head of Education & Professional Training | High – relevant to general duty   | Prevent violence occurring by changing attitudes. Increased understanding of GBV in its many forms and highlight supporting mechanisms. |
| 27. Develop and implement staff gender based violence policy using PIN guidance   | March 2011               | Policy completed  | Head of Personnel                         | Low – relevant to duties, GBV currently managed but no formal policy in place | Better support for those who experience gender based violence in order that they can discuss issues in safety.                          |
| 28. Develop web page on intranet site to support staff and raise awareness of child protection / gender based violence / vulnerable adults. | December 2010            | Web page available with ready access for each of the Emergency Medical Dispatch Centres | EMDC Quality & Development Manager        | Low – will provide support for staff  | Increased awareness of gender based violence issues and consistent approach applied across the Service.                                 |

|  |            |  |                                    |                                   |   |
|--|------------|--|------------------------------------|-----------------------------------|---|
| 29. Review and revise current reporting systems for child protection / gender based violence to ensure consistency across EMDC's | March 2011 | Review child protection / vulnerable adults policy in EMDC | EMDC Quality & Development Manager | Low – existing protocols in place | Consistent approach to reporting and referrals to other agencies. |
|--|------------|--|------------------------------------|-----------------------------------|---|

## Appendix 3

### Review of functions, policies and practices for relevance to the general duty on gender equality

All of the policies, functions and practices have been reviewed in relation to how relevant they are to the general duty as laid out in the Equality Act 2006 and as defined in the Code of Practice on the Gender Equality Duty.

To assess relevance, the table lists what part of the general duty each policy or function relates to as follows;

- A to eliminate unlawful discrimination and harassment
- B to promote equality of opportunity between men and women

- 0 none
- 1 a little
- 2 some
- 3 substantial

#### Priority

- 0 – 1 low
- 1 – 2 medium
- 2 – 3 high

| <b>Policies, functions and practices</b>                              | <b>Status</b>      | <b>Internal or external</b> | <b>Relevance</b>     |  |                              | <b>Comments</b>                                 |
|---|--------------------|-----------------------------|----------------------|--|------------------------------|---|
|   | Current / proposed |                             | Link to general duty | Potential to affect on men and women differently | Priority High, Medium or Low |   |
| <b>Function: Operations - Chief Operating Officer</b>                 |                    |                             |                      |  |                              |   |
| Emergencies – mental health   | Current            | Internal                    | A & B                | 2  | Medium                       | Influences practical delivery of general duty   |
| Mental health care & treatment  | Current            | Internal                    | A & B                | 2  | Medium                       | Influences practical delivery of general duty   |
| Project development – mental health first aid training                | Current            | Internal                    | A & B                | 1  | Medium                       | Influences practical delivery of general duty   |
| Paramedic primary SOP/details   | Current            | Internal                    | A & B                | 1  | Low                          | Little evidence of potential for adverse impact |
| Mental Health   | Current            | Internal                    | A & B                | 2  | Medium                       | Influences practical delivery of general duty   |
| <b>Function: Clinical – Director of HR &amp; Clinical Development</b> |                    |                             |                      |  |                              |   |

|  |         |          |       |   |        |   |
|--|---------|----------|-------|---|--------|---|
| Clinical reporting standard                        | Current | Internal | -     | 0 | Low    | Little evidence of potential for adverse impact   |
| FAQ's  | Current | Internal | -     | 0 | Low    | Little evidence of potential for adverse impact   |
| Memo of understanding                              | Current | Internal | -     | 0 | Low    | Little evidence of potential for adverse impact   |
| <b>Function: Finance – Director of Finance</b>     |         |          |       |   |        |   |
| Payroll procedures                                 | Current | Internal | A & B | 1 | Low    | Little evidence of potential for adverse impact   |
| Purchasing / ordering                              | Current | Internal | -     | 0 | Low    | No evidence of potential for adverse impact   |
| Financial planning                                 | Current | Internal | A & B | 3 | High   | A key element of meeting the duties   |
| Processing of accounts                             | Current | Internal | -     | 0 | Low    | No evidence of potential for adverse impact   |
| Petty cash/ banking                                | Current | Internal | -     | 0 | Low    | No evidence of potential for adverse impact   |
| Disposal of assets                                 | Current | Internal | -     | 0 | Low    | No evidence of potential for adverse impact   |
| Expenses   | Current | Both     | A & B | 2 | Medium | Scope for differential treatment / adverse impact   |
| <b>Function: Procurement – Head of Procurement</b> |         |          |       |   |        |   |
| Dealing with suppliers – guidance                  | Current | Both     | A & B | 2 | Medium | Fairness, openness & transparency are key. Scope for promoting good relations and positive external image of the organisation |
| Environmental policy                               | Current | Internal | -     | 0 | Low    | No evidence of potential for adverse impact   |
| Tendering process /                                | Current | Both     | A & B | 2 | Medium | Fairness, openness & transparency   |

|   |         |          |       |   |        |   |
|---|---------|----------|-------|---|--------|---|
| guidance  |         |          |       |   |        | are key. Scope for promoting good relations and positive external image of the organisation |
| Uniform disposal  | Current | Internal | -     | 0 | Low    | Little evidence of potential for adverse impact   |
| Uniform – contract review                               | Current | Internal | -     | 0 | Low    | Little evidence for potential for adverse impact  |
| PECOS Training  | Current | Internal | -     | 0 | Low    | Little evidence for potential for adverse impact  |
| <b>Function: Fleet – General Manager Fleet Services</b> |         |          |       |   |        |   |
| Blue light status                                       | Current | Internal | -     | 0 | Low    | Little evidence of potential for adverse impact. Status dependent on role                   |
| Lease car scheme  | Current | Internal | -     | 0 | Low    | Little evidence of potential for adverse impact   |
| Acquisition / procurement                               | Current | Internal | A & B | 2 | Medium | Scope for promoting good relations and positive external image of organisation              |
| New vehicle specification                               | Current | Internal | -     | 0 | Low    | Little evidence of potential for adverse impact   |
| Environmental policy                                    | Current | Internal | -     | 0 | Low    | Little evidence of potential for adverse impact   |
| <b>Function: Estates – Estate Manager</b>               |         |          |       |   |        |   |
| Construction regulations                                | Current | Internal | -     | 0 | Low    | Little evidence of potential for adverse impact   |
| Guidance for Safe Working i.e. asbestos, electrical etc | Current | Internal | -     | 0 | Low    | Little evidence of potential for adverse impact   |

|  |         |          |       |   |        |   |
|--|---------|----------|-------|---|--------|---|
| Fire safety policy   | Current | Internal | -     | 0 | Low    | Little evidence of potential for adverse impact                   |
| Environmental strategy   | Current | Internal | -     | 0 | Low    | Little evidence of potential for adverse impact                   |
| Spillages  | Current | Internal | -     | 0 | Low    | Little evidence of potential for adverse impact                   |
| Sustainable development  | Current | Internal | -     | 0 | Low    | Little evidence of potential for adverse impact                   |
| <b>Function: Information, Communications &amp; Technology – General Manager ICT</b>                        |         |          |       |   |        |   |
| Equipment adoption request   | Current | Internal | -     | 0 | Low    | Little evidence of potential for adverse impact                   |
| Use of equipment   | Current | Internal | -     | 0 | Low    | Little evidence of potential for adverse impact                   |
| Internet & email policy  | Current | Internal | A & B | 0 | Low    | Little evidence of potential for adverse impact                   |
| Website / development  | Current | Internal | -     | 0 | Low    | Little evidence of potential for adverse impact                   |
| Staff training plan  | Current | Internal | A & B | 2 | Medium | Essential to meet the general duty                                |
| Guidelines – good practice   | Current | Internal | -     | 0 | Low    | Little evidence of potential for adverse impact                   |
| Samson user guide  | Current | Internal | -     | 1 | Low    | Little evidence of potential for adverse impact                   |
| <b>Function: Emergency Medical Dispatch Centre / PTS Call Handling – Head of Control / Head of Service</b> |         |          |       |   |        |   |
| C & C operating procedure  | Current | Internal | -     | 0 | Low    | Little evidence of potential for adverse impact                   |
| PTS booking procedure  | Current | Internal | A & B | 2 | Medium | Essential to meet the general duty. Scope for different treatment |

|  |         |          |       |   |        |   |
|--|---------|----------|-------|---|--------|---|
| Critical incident reporting                      | Current | Internal | -     | 0 | Low    | Little evidence of potential for adverse impact   |
| Continuity plans for loss of operating procedure | Current | Internal | -     | 0 | Low    | Little evidence of potential for adverse impact   |
| C & C Audit Procedure                            | Current | Internal | A & B | 2 | Medium | Essential to meet the general duty. Scope for different treatment.  |
| <b>Function: Personnel – Head of Personnel</b>   |         |          |       |   |        |   |
| Absence management                               | Current | Internal | A & B | 2 | Medium | Potential for different treatment. No evidence of adverse impact  |
| Adoption & fostering                             | Current | Internal | A & B | 1 | Low    | No evidence of potential for adverse impact   |
| Driving licence admin                            | Current | Internal | -     | 0 | Low    | No evidence of adverse impact   |
| Appraisal / Performance Development & Review     | Current | Internal | A & B | 2 | Medium | Use of this will assist in mainstreaming equality & diversity into all staff work objectives and training plans |
| Occupational stress                              | Current | Internal | -     | 0 | Low    | No evidence of adverse impact   |
| Dignity at work                                  | Current | Internal | A & B | 2 | Medium | Policy to identify & challenge discrimination in the workplace.   |
| Discipline                                       | Current | Internal | A & B | 2 | Medium | Tool for dealing with discrimination in the workplace   |
| Disclosure                                       | Current | External | -     | 0 | Low    | No evidence of potential for adverse impact   |
| Equal opportunities                              | Current | Both     | A & B | 3 | High   | Vehicle for promoting equality across the whole of the organisation. Essential to meet the general duty.        |
| Facilities for TU Reps                           | Current | Internal | -     | 0 | Low    | No evidence of potential for adverse impact   |

|                            |         |          |       |   |        |  |
|----------------------------|---------|----------|-------|---|--------|--|
| Career breaks              | Current | Internal | A & B | 2 | Medium | Scope for different treatment  |
| No smoking                 | Current | Internal | -     | 0 | Low    | No evidence of potential for adverse impact                          |
| Job sharing                | Current | Internal | A & B | 2 | Low    | No evidence of potential for adverse impact                          |
| Management of Aids/ HIV    | Current | Internal | A & B | 1 | Low    | No evidence of potential for adverse impact                          |
| Management of change       | Current | Internal | B     | 1 | Low    | No evidence of potential for adverse impact                          |
| Capability                 | Current | Internal | A & B | 2 | Medium | Essential to meet the general duty.<br>Scope for different treatment |
| Maternity provisions       | Current | Internal | A & B | 3 | High   | Potential for different treatment                                    |
| Parental leave             | Current | Internal | A & B | 3 | High   | Potential for different treatment                                    |
| Paternity leave            | Current | Internal | A & B | 3 | High   | Potential for different treatment                                    |
| Adoption                   | Current | Internal | A & B | 3 | High   | Potential for different treatment                                    |
| Fostering                  | Current | Internal | A & B | 3 | High   | Potential for different treatment                                    |
| Relocation & expenses      | Current | Internal | B     | 1 | Low    | No evidence for potential adverse impact                             |
| Resolution of differences  | Current | Internal | A & B | 2 | Low    | No evidence for potential adverse impact                             |
| Special leave              | Current | Internal | A & B | 2 | Medium | Potential for different treatment                                    |
| Business conduct           | Current | Internal | A & B | 3 | High   | Essential part of meeting the general duty                           |
| Recruitment & Selection    | Current | Both     | A & B | 3 | High   | A critical element of meeting the general duty                       |
| Race Equality Scheme       | Current | Internal | A     | 1 | Low    | Contributes to integration of equal opportunities across communities |
| Disability Equality Scheme | Current | Both     | A     | 1 | Low    | Contributes to integration of equal                                  |

|  |          |          |       |   |        |  |
|--|----------|----------|-------|---|--------|--|
|  |          |          |       |   |        | opportunities across communities                               |
| Gender Equality Scheme   | Current  | Both     | A & B | 2 | Medium | Future contribution to equal opportunities across organisation |
| Workforce plan   | Current  | Internal | -     | 1 | Low    | No evidence of potential adverse impact                        |
| Training, Education & Development                                  | Current  | Internal | B     | 2 | Medium | Scope for different treatment                                  |
| HR & OD Strategy   | Current  | Internal | A & B | 2 | Medium | Scope for different treatment                                  |
| Shift review policy  | Proposed | Internal | -     | 0 | Low    | No evidence of potential adverse impact                        |
| <b>Function: Health &amp; Safety – Health &amp; Safety Manager</b> |          |          |       |   |        |  |
| Substance abuse  | Current  | Internal | -     | 0 | Low    | No evidence of potential adverse impact                        |
| Control of infection   | Current  | Internal | -     | 0 | Low    | No evidence of potential adverse impact                        |
| DSE & guidance   | Current  | Internal | -     | 0 | Low    | No evidence of potential adverse impact                        |
| H & S policy, organisation & responsibility                        | Current  | Internal | A     | 1 | Low    | No evidence of potential adverse impact                        |
| Accident & incident reporting                                      | Current  | Internal | A     | 1 | Low    | No evidence of potential adverse impact                        |
| Risk assessment  | Current  | Internal | A     | 1 | Low    | No evidence of potential adverse impact                        |
| Violence & aggression  | Current  | Internal | A     | 1 | Low    | No evidence of potential adverse impact                        |
| Manual handling/assessments  | Current  | Internal | -     | 1 | Low    | No evidence of potential adverse impact                        |
| Audit & review   | Current  | Internal | -     | 2 | Medium | Scope for different treatment                                  |

|                                      |         |          |   |   |     |   |
|--------------------------------------|---------|----------|---|---|-----|---|
| Working at height                    | Current | Internal | - | 0 | Low | No evidence of potential adverse impact |
| H S & W committee                    | Current | Internal | - | 0 | Low | No evidence of potential adverse impact |
| Safety Representative                | Current | Internal | - | 0 | Low | No evidence of potential adverse impact |
| Equipment maintenance & inspection   | Current | Internal | - | 0 | Low | No evidence of potential adverse impact |
| Driver fatigue                       | Current | Internal | - | 0 | Low | No evidence of potential adverse impact |
| Decontamination CS spray             | Current | Internal | - | 0 | Low | No evidence of potential adverse impact |
| Safety committees                    | Current | Internal | - | 1 | Low | No evidence of potential adverse impact |
| No smoking                           | Current | Internal | - | 0 | Low | No evidence of potential adverse impact |
| Lone workers                         | Current | Internal | - | 0 | Low | No evidence of potential adverse impact |
| RIDDOR guide                         | Current | Internal | - | 0 | Low | No evidence of potential adverse impact |
| Disposal – clinical waste            | Current | Internal | - | 0 | Low | No evidence of potential adverse impact |
| Vehicle cleaning & disinfection      | Current | Internal | - | 0 | Low | No evidence of potential adverse impact |
| Carriage of infectious disease cases | Current | Internal | - | 0 | Low | No evidence of potential adverse impact |
| Needlestick injuries                 | Current | Internal | - | 0 | Low | No evidence of potential adverse impact |

|   |         |          |       |   |        |   |
|---|---------|----------|-------|---|--------|---|
| Incidents & radioactivity   | Current | Internal | -     | 0 | Low    | No evidence of potential adverse impact |
| Admin of radioisotopes  | Current | Internal | -     | 0 | Low    | No evidence of potential adverse impact |
| Ambulance operation risk assessment                               | Current | Internal | -     | 1 | Low    | No evidence of potential adverse impact |
| Deployment of airbags   | Current | Internal | -     | 0 | Low    | No evidence of potential adverse impact |
| Occupational health   |         |          | -     | 1 | Low    | No evidence of potential adverse impact |
| <b>Function: Corporate Affairs – Corporate Affairs Manager</b>    |         |          |       |   |        |   |
| Freedom of info   | Current | Both     | -     | 0 | Low    | No evidence of potential adverse impact |
| Complaints procedure  | Current | Both     | A & B | 2 | Medium | Scope for different treatment           |
| Standing orders – board   | Current | Both     | -     | 0 | Low    | No evidence of potential adverse impact |
| Standing orders - finance   | Current | Both     | -     | 0 | Low    | No evidence of potential adverse impact |
| PFPI Strategy   | Current | Both     | A & B | 1 | Low    | No evidence of potential adverse impact |
| <b>Function: Performance &amp; Planning – General Manager PPU</b> |         |          |       |   |        |   |
| Disposal of contaminated waste                                    | Current | Internal | -     | 0 | Low    | No evidence of potential adverse impact |
| Management of risk strategy                                       | Current | Internal | -     | 0 | Low    | No evidence of potential adverse impact |
| Information governance  | Current | Both     | -     | 0 | Low    | No evidence of potential adverse impact |
| Access to personal health   | Current | Internal | -     | 0 | Low    | No evidence of potential adverse        |

|  |          |          |       |   |      |  |
|--|----------|----------|-------|---|------|--|
| records  |          |          |       |   |      | impact                                     |
| Confidentiality – visitors                             | Current  | Internal | -     | 0 | Low  | No evidence of potential adverse impact    |
| Data protection strategy                               | Current  | Internal | -     | 0 | Low  | No evidence of potential adverse impact    |
| Disclosure health info                                 | Current  | Internal | -     | 0 | Low  | No evidence of potential adverse impact    |
| Protection patient confidentiality                     | Current  | Internal | -     | 0 | Low  | No evidence of potential adverse impact    |
| Storage, maintenance & disposal of records             | Current  | Internal | -     | 0 | Low  | No evidence of potential adverse impact    |
| <b>Function: Service Developments – Project Boards</b> |          |          |       |   |      |  |
| A & E Service Operations Centre Review                 | Proposed | Internal | -     | 1 | Low  | No evidence of potential adverse impact    |
| Agenda for change                                      | Proposed | Internal | A & B | 3 | High | Essential part of meeting the general duty |
| Cab based terminal project                             | Proposed | Internal | -     | 0 | Low  | No evidence of potential adverse impact    |
| Clinical information                                   | Proposed | Internal | -     | 0 | Low  | No evidence of potential adverse impact    |
| Environmental management                               | Proposed | Internal | -     | 0 | Low  | No evidence of potential adverse impact    |
| ICT strategy   | Proposed | Internal | -     | 0 | Low  | No evidence of potential adverse impact    |
| Non emergency service redevelopment                    | Proposed | Internal | A & B | 1 | Low  | No evidence of potential adverse impact    |
| Operations room review                                 | Proposed | Internal | A & B | 1 | Low  | No evidence of potential adverse impact    |

|  |          |          |       |   |        |   |
|--|----------|----------|-------|---|--------|---|
| Radio systems replacement project        | Proposed | Internal | -     | 0 | Low    | No evidence of potential adverse impact |
| Re-procurement of air ambulance services | Proposed | Internal | -     | 0 | Low    | No evidence of potential adverse impact |
| Voice & data infrastructure              | Proposed | Internal | -     | 0 | Low    | No evidence of potential adverse impact |
| Vulnerable adults                        | Proposed | Internal | A & B | 2 | Medium | Scope for different treatment           |
| IHT service                              | Proposed | Internal | B     | 2 | Medium | Scope for different treatment           |
| Uniforms re-procurement                  | Proposed | Internal | -     | 0 | Low    | No evidence of potential adverse impact |
| Rural health solutions                   | Proposed | Internal | B     | 1 | Low    | No evidence of potential adverse impact |
| Reducing health inequalities             | Proposed | Internal | A & B | 2 | Medium | Scope for different treatment           |
| Developing enhanced skills               | Proposed | Internal | A & B | 1 | Low    | No evidence of potential adverse impact |
| Reducing hospital admissions             | Proposed | Internal | B     | 2 | Medium | Scope for different treatment           |
| Absence management                       | Proposed | Internal | B     | 1 | Low    | No evidence of potential adverse impact |
| Emergency & Scheduled Service            | Proposed | Internal | A & B | 2 | Medium | Scope for different treatment           |
| Scheduled Service                        | Proposed | Internal | A & B | 2 | Medium | Scope for different treatment           |
| Engaging with communities                | Proposed | Internal | A & B | 2 | Medium | Scope for different treatment           |

|   |          |          |       |   |        |                               |
|---|----------|----------|-------|---|--------|-------------------------------|
| e-Health  | Proposed | Internal | A & B | 2 | Medium | Scope for different treatment |
| Organisational Development & Workforce Planning | Proposed | Internal | A & B | 2 | Medium | Scope for different treatment |

**Table 1 - Analysis of workforce at 1 April 2010 – gender, band and ethnicity**

| Ethnic Origin                                 | Band 1 |   | Band 2 |    | Band 3 |     | Band 4 |     | Band 5 |     | Band 6 |     | Band 7 |    | Band 8 |    | Totals      |
|---|--------|---|--------|----|--------|-----|--------|-----|--------|-----|--------|-----|--------|----|--------|----|-------------|
|   | F      | M | F      | M  | F      | M   | F      | M   | F      | M   | F      | M   | F      | M  | F      | M  |             |
| <b>White</b>                                  |        |   |        |    |        |     |        |     |        |     |        |     |        |    |        |    |             |
| White Scottish                                | 5      | 0 | 47     | 76 | 361    | 487 | 281    | 565 | 265    | 706 | 38     | 171 | 17     | 88 | 11     | 34 | <b>3152</b> |
| White Other British                           | 0      | 0 | 2      | 3  | 21     | 44  | 37     | 68  | 41     | 90  | 2      | 14  | 4      | 11 | 2      | 13 | <b>352</b>  |
| White Irish                                   | 0      | 0 | 0      | 0  | 1      | 0   | 4      | 5   | 2      | 5   | 0      | 1   | 1      | 0  | 0      | 0  | <b>19</b>   |
| Other White Background                        | 0      | 0 | 1      | 0  | 4      | 2   | 3      | 6   | 2      | 10  | 0      | 0   | 1      | 0  | 1      | 0  | <b>30</b>   |
| <b>Mixed Background</b>                       |        |   |        |    |        |     |        |     |        |     |        |     |        |    |        |    |             |
| Any Mixed Background                          | 0      | 0 | 0      | 0  | *      | 0   | 0      | 0   | 0      | *   | 0      | 0   | *      | *  | 0      | *  | <b>7</b>    |
| <b>Asian, Asian Scottish or Asian British</b> |        |   |        |    |        |     |        |     |        |     |        |     |        |    |        |    |             |
| Indian  |        |   |        |    |        |     |        |     |        |     |        |     |        |    |        |    |             |
| Pakistani                                     |        |   |        |    |        |     |        |     |        |     |        |     |        |    |        |    | <b>3</b>    |
| Bangladeshi                                   |        |   |        |    |        |     |        |     |        |     |        |     |        |    |        |    |             |
| Chinese                                       |        |   |        |    |        |     |        |     |        |     |        |     |        |    |        |    | <b>2</b>    |
| Any other Asian background                    |        |   |        |    |        |     |        |     |        |     |        |     |        |    |        |    |             |

|   |          |          |           |           |            |            |            |            |            |            |           |            |           |            |           |           |  |             |
|---|----------|----------|-----------|-----------|------------|------------|------------|------------|------------|------------|-----------|------------|-----------|------------|-----------|-----------|--|-------------|
| <b>Black, Black Scottish or Black British</b> |          |          |           |           |            |            |            |            |            |            |           |            |           |            |           |           |  |             |
| Caribbean                                     |          |          |           |           |            |            |            |            |            |            |           |            |           |            |           |           |  |             |
| African                                       |          |          |           |           |            |            |            |            |            |            |           |            |           |            |           |           |  | <b>1</b>    |
| Any other Black background                    |          |          |           |           |            |            |            |            |            |            |           |            |           |            |           |           |  | <b>2</b>    |
| <b>Other ethnic background</b>                |          |          |           |           |            |            |            |            |            |            |           |            |           |            |           |           |  |             |
| Any other ethnic background                   |          |          |           |           |            |            |            |            |            |            |           |            |           |            |           |           |  | <b>1</b>    |
| <b>Declined to Comment</b>                    | 3        | 0        | 13        | 18        | 96         | 118        | 88         | 172        | 54         | 109        | 8         | 14         | 3         | 8          | 1         | 5         |  | <b>710</b>  |
|   |          |          |           |           |            |            |            |            |            |            |           |            |           |            |           |           |  |             |
| <b>Totals</b>                                 | <b>8</b> | <b>0</b> | <b>63</b> | <b>97</b> | <b>487</b> | <b>652</b> | <b>413</b> | <b>817</b> | <b>364</b> | <b>926</b> | <b>48</b> | <b>201</b> | <b>27</b> | <b>108</b> | <b>15</b> | <b>53</b> |  | <b>4279</b> |

\* denotes where there are less than 5

|               | Band 1   |          | Band 2    |           | Band 3     |            | Band 4     |            | Band 5     |            | Band 6    |            | Band 7    |            | Band 8    |           | <b>Totals</b> |
|---------------|----------|----------|-----------|-----------|------------|------------|------------|------------|------------|------------|-----------|------------|-----------|------------|-----------|-----------|---------------|
|               | F        | M        | F         | M         | F          | M          | F          | M          | F          | M          | F         | M          | F         | M          | F         | M         |               |
| Disabled      | 0        | 0        | 1         | 4         | 2          | 11         | 2          | 14         | 3          | 17         | 0         | 5          | 0         | 2          | 0         | 1         | <b>62</b>     |
| Non-disabled  | 8        | 0        | 62        | 93        | 485        | 640        | 410        | 802        | 361        | 910        | 49        | 197        | 27        | 106        | 15        | 52        | <b>4217</b>   |
| <b>Totals</b> | <b>8</b> | <b>0</b> | <b>63</b> | <b>97</b> | <b>487</b> | <b>651</b> | <b>412</b> | <b>816</b> | <b>364</b> | <b>927</b> | <b>49</b> | <b>202</b> | <b>27</b> | <b>108</b> | <b>15</b> | <b>53</b> | <b>4279</b>   |

**Table 2 – Analysis of workforce April 2010 – gender band and disability**

**Table 3 - Analysis of workforce at April 2010 – gender, band and part-time/full-time**

|               | Band 1   |          | Band 2    |           | Band 3     |            | Band 4     |            | Band 5     |            | Band 6    |            | Band 7    |            | Band 8    |           | <b>Totals</b> |
|---------------|----------|----------|-----------|-----------|------------|------------|------------|------------|------------|------------|-----------|------------|-----------|------------|-----------|-----------|---------------|
|               | F        | M        | F         | M         | F          | M          | F          | M          | F          | M          | F         | M          | F         | M          | F         | M         |               |
| FT            | 0        | 0        | 44        | 80        | 400        | 591        | 385        | 795        | 334        | 913        | 45        | 200        | 24        | 108        | 15        | 52        | <b>3986</b>   |
| PT            | 8        | 0        | 19        | 17        | 87         | 61         | 27         | 21         | 30         | 14         | 4         | 2          | 3         | 0          | 0         | 0         | <b>293</b>    |
| <b>Totals</b> | <b>8</b> | <b>0</b> | <b>63</b> | <b>97</b> | <b>487</b> | <b>652</b> | <b>412</b> | <b>816</b> | <b>364</b> | <b>927</b> | <b>49</b> | <b>202</b> | <b>27</b> | <b>108</b> | <b>15</b> | <b>52</b> | <b>4279</b>   |

**Table 4 - Analysis of workforce at April 2010 – gender, age, band and part-time/full-time**

|                     |                 | Band 1    |           | Band 2    |           | Band 3     |           | Band 4     |           | Band 5     |           | Band 6    |           | Band 7    |           | Band 8    |           | <b>Totals</b> |            |
|---------------------|-----------------|-----------|-----------|-----------|-----------|------------|-----------|------------|-----------|------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|---------------|------------|
| <b>Gender</b>       | <b>Age Band</b> | <b>FT</b> | <b>PT</b> | <b>FT</b> | <b>PT</b> | <b>FT</b>  | <b>PT</b> | <b>FT</b>  | <b>PT</b> | <b>FT</b>  | <b>PT</b> | <b>FT</b> | <b>PT</b> | <b>FT</b> | <b>PT</b> | <b>FT</b> | <b>PT</b> | <b>FT</b>     | <b>PT</b>  |
| <b>Female</b>       | <b>16-25</b>    | 0         | 0         | 4         | 1         | 26         | 4         | 26         | 0         | 1          | 0         | 0         | 0         | 0         | 0         | 0         | 0         | <b>57</b>     | <b>5</b>   |
|                     | <b>26-30</b>    | 0         | 0         | 3         | 1         | 28         | 4         | 51         | 5         | 19         | 0         | 4         | 0         | 1         | 0         | 1         | 0         | <b>107</b>    | <b>10</b>  |
|                     | <b>31-35</b>    | 0         | 0         | 5         | 3         | 45         | 20        | 74         | 5         | 79         | 10        | 4         | 2         | 3         | 2         | 3         | 0         | <b>213</b>    | <b>42</b>  |
|                     | <b>36-40</b>    | 0         | 0         | 5         | 2         | 77         | 22        | 75         | 7         | 103        | 12        | 9         | 2         | 4         | 0         | 2         | 0         | <b>275</b>    | <b>45</b>  |
|                     | <b>41-45</b>    | 0         | 1         | 7         | 2         | 89         | 12        | 75         | 6         | 76         | 8         | 11        | 0         | 7         | 1         | 2         | 0         | <b>267</b>    | <b>30</b>  |
|                     | <b>46-50</b>    | 0         | 2         | 7         | 2         | 74         | 10        | 45         | 1         | 37         | 0         | 9         | 0         | 6         | 0         | 5         | 0         | <b>183</b>    | <b>15</b>  |
|                     | <b>51-55</b>    | 0         | 3         | 7         | 3         | 42         | 7         | 26         | 2         | 17         | 0         | 5         | 0         | 2         | 0         | 2         | 0         | <b>101</b>    | <b>15</b>  |
|                     | <b>56-60</b>    | 0         | 1         | 3         | 3         | 15         | 3         | 11         | 1         | 2          | 0         | 3         | 0         | 1         | 0         | 0         | 0         | <b>35</b>     | <b>8</b>   |
| <b>61-65</b>        | 0               | 1         | 3         | 1         | 6         | 1          | 2         | 0          | 0         | 0          | 0         | 0         | 0         | 0         | 0         | 0         | <b>11</b> | <b>3</b>      |            |
|                     | <b>&gt;65</b>   | 0         | 0         | 0         | 1         | 0          | 2         | 0          | 0         | 0          | 0         | 0         | 0         | 0         | 0         | 0         | 0         | <b>0</b>      | <b>3</b>   |
| <b>Female Total</b> |                 | <b>0</b>  | <b>8</b>  | <b>44</b> | <b>19</b> | <b>402</b> | <b>87</b> | <b>385</b> | <b>27</b> | <b>334</b> | <b>30</b> | <b>45</b> | <b>4</b>  | <b>24</b> | <b>3</b>  | <b>15</b> | <b>0</b>  | <b>1249</b>   | <b>176</b> |
| <b>Male</b>         | <b>16-25</b>    | 0         | 0         | 3         | 0         | 10         | 1         | 15         | 0         | 0          | 0         | 0         | 0         | 0         | 0         | 0         | 0         | <b>28</b>     | <b>1</b>   |

|  |                   |          |          |            |           |            |            |             |           |             |           |            |          |            |          |           |          |              |             |
|--|-------------------|----------|----------|------------|-----------|------------|------------|-------------|-----------|-------------|-----------|------------|----------|------------|----------|-----------|----------|--------------|-------------|
|  | <b>26-30</b>      | 0        | 0        | 1          | 0         | 12         | 0          | 48          | 1         | 21          | 0         | 1          | 0        | 1          | 0        | 0         | 0        | <b>84</b>    | <b>1</b>    |
|  | <b>31-35</b>      | 0        | 0        | 4          | 0         | 41         | 8          | 85          | 1         | 93          | 4         | 9          | 0        | 3          | 0        | 0         | 0        | <b>235</b>   | <b>13</b>   |
|  | <b>36-40</b>      | 0        | 0        | 7          | 1         | 61         | 4          | 143         | 2         | 171         | 4         | 23         | 1        | 11         | 0        | 6         | 0        | <b>422</b>   | <b>12</b>   |
|  | <b>41-45</b>      | 0        | 0        | 4          | 2         | 61         | 9          | 143         | 2         | 196         | 4         | 44         | 1        | 7          | 0        | 6         | 0        | <b>461</b>   | <b>18</b>   |
|  | <b>46-50</b>      | 0        | 0        | 8          | 3         | 102        | 8          | 129         | 5         | 219         | 2         | 64         | 0        | 24         | 0        | 20        | 0        | <b>566</b>   | <b>18</b>   |
|  | <b>51-55</b>      | 0        | 0        | 14         | 4         | 101        | 5          | 117         | 2         | 143         | 0         | 41         | 0        | 34         | 0        | 16        | 0        | <b>464</b>   | <b>11</b>   |
|  | <b>56-60</b>      | 0        | 0        | 18         | 5         | 113        | 8          | 86          | 4         | 58          | 0         | 14         | 0        | 23         | 0        | 4         | 0        | <b>316</b>   | <b>17</b>   |
|  | <b>61-65</b>      | 0        | 0        | 17         | 2         | 80         | 13         | 28          | 4         | 12          | 0         | 4          | 0        | 5          | 0        | 0         | 0        | <b>146</b>   | <b>19</b>   |
|  | <b>&gt;65</b>     | 0        | 0        | 4          | 0         | 10         | 5          | 1           | 0         | 0           | 0         | 0          | 0        | 0          | 0        | 0         | 0        | <b>15</b>    | <b>5</b>    |
|  | <b>Male Total</b> | <b>0</b> | <b>0</b> | <b>80</b>  | <b>17</b> | <b>591</b> | <b>61</b>  | <b>795</b>  | <b>21</b> | <b>913</b>  | <b>14</b> | <b>200</b> | <b>2</b> | <b>108</b> | <b>0</b> | <b>52</b> | <b>0</b> | <b>2738</b>  | <b>115</b>  |
|  |                   | <b>0</b> | <b>8</b> | <b>124</b> | <b>36</b> | <b>993</b> | <b>148</b> | <b>1180</b> | <b>48</b> | <b>1247</b> | <b>44</b> | <b>245</b> | <b>6</b> | <b>132</b> | <b>3</b> | <b>67</b> | <b>0</b> | <b>3988</b>  | <b>291</b>  |
|  |                   |          |          |            |           |            |            |             |           |             |           |            |          |            |          |           |          | <b>Total</b> | <b>4279</b> |

