



EQUAL OPPORTUNITIES POLICIES

GUIDANCE NOTE

The NHS in Scotland is committed to building a modernisation programme to provide high quality patient care and improve the working lives of all NHS staff. The National Human Resources Strategy "Towards a New Way of Working" seeks to achieve this through substantive partnerships with staff, managers, trade unions/professional organisations, patients and other relevant organisations

Unlocking the potential of staff and removing boundaries which have traditionally existed between managers and trade unions/professional organisations to improve the working lives of employees and enhance service delivery to patients will require a unique partnership. This partnership must be based on a philosophy of mutual trust, using an open and honest approach in all aspects of consultation and negotiation.

It is intended that this guideline will be adopted after local discussion involving trade union/professional organisation representatives and managers. Local Partnership Forums should be fully involved. In other organisations appropriate inclusive processes must be adopted. Local arrangements may then be made to implement the national guideline and to establish a method of monitoring their implementation and effectiveness.

Our National Health: A Plan for Action, A Plan for Change establishes a new staff governance standard. The performance against the standard will be assessed by the Scottish Partnership Forum (SPF) and Local Partnership Forums and form an integral part of the performance and accountability framework. **All organisations are required to adopt the values and principles of this PIN guideline on Equal Opportunities Policies**, however the attached model policy is not intended to be prescriptive. Organisations should adapt the model policy to suit their own local situation in terms of structures and resources available to them.

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GUIDELINE DEVELOPMENT GROUP

GUIDELINE DEVELOPMENT GROUP (GDG)

Convenor:	Susan B Russell	GMB/STUC
Secretary:	Bill Welsh	Scottish Executive Health Department
Members:	Roderick Bannerman	MSF
	Deborah Grant	Scottish Executive Health Department
	Jane McCready	RCN
	Lorna McDougal	SOCP
	Catriona Morton	BMA
	Andrina Reid	BDA
	Ann Reilly	GMB
	Linda Tindall	Greater Glasgow Primary Care NHS Trust
	Willie Wilson	Tayside University Hospitals NHS Trust
	Marian Wrigley	SCPMDE

1. INTRODUCTION

This guideline sets out the base policy on equality of opportunity for NHS in Scotland staff and provides a model for agreement and use locally. In preparing the guideline the guideline development group took account of the major policy documents listed in the bibliography and reference base (see Annex 4.1) and current and known planned legislation. The guideline development group recognise that further information on certain issues may need to be the subject of more detailed guidance.

This guideline is based on the single premise that there must be no discrimination against NHS in Scotland staff.

It is also built around the four key NHS in Scotland commitments set out below:

The NHS in Scotland is committed to building a valued, loyal workforce in an environment characterised by mutual respect, tolerance and understanding.

The NHS in Scotland as an employer along with its partner organisations recognises the importance of promoting and developing within the workplace, the opportunity to enable all staff to realise their full potential.

The NHS in Scotland will place at the heart of policy making the promotion of equal opportunity for all in a just and inclusive Scotland.

The NHS in Scotland through the diversities of its workforce seeks to reflect the communities it serves, progressing to a faster, fairer, more convenient health service for the people of Scotland.

2. MAIN REPORT

2.1 Strategic Framework/Organisational Culture

The Scottish Executive is fully committed to equality for all and published its strategy for equality on 6 November 2000 entitled "Equality Strategy: Working Together for Equality" which the public service in Scotland is required to follow.

The Human Resources Strategy "*Towards a New Way of Working*" seeks to establish clear Equal Opportunities programmes, including the Commission for Equality Standard, which incorporate support for flexible working, job share and flexible child care arrangements as well the development of action plans to attain the Positive about Disability two ticks symbol.

In addition "*Learning Together*", the strategy for education, training and lifelong learning provides a commitment to addressing inequalities and improving access to learning opportunities for all NHS staff. The occupational health and safety services strategy "*Towards a Safer Healthier Workplace*" reinforces the requirement on NHS organisations to develop family friendly policies and to meet the requirements of the two ticks symbol.

There is a clear requirement for equal opportunities policies to be placed high on the agenda of all public sector employers. This requirement is likely to be greater as planned legislation comes on stream. Apart from the political and legislative requirement there are also good organisational reasons for making equality issues a central part of the work of everyone in the NHS and to encourage other organisations to promote equality, this is called mainstreaming. These include:

- good employment practice;
- aide to recruitment and retention;
- legally fair and reduces litigation;
- ensures equal pay for equal value;
- removes discrimination from the workplace;
- improves staff and organisation morale;
- provides a diverse and flexible workforce;
- modern flexible policies which are good for staff and the organisation;
- access to education and training;
- better informed staff providing improved services to patients.

2.2 Principles and Values

Within the NHS in Scotland employees need to be valued as individuals for the contribution they make to the organisation rather than for characteristics that have no bearing on the job. Organisations need to recognise that people from different backgrounds can bring fresh ideas and perceptions, which can improve efficiency and service delivery. They therefore need to be able to nurture this creativity and innovation.

Equal opportunity policies broadens the recruitment field by enabling the best people to be recruited and valuable staff to be retained. In addition to this savings incurred on recruitment and induction and enhanced motivation and loyalty may also result. They also demonstrate a clear commitment to fairness and equality.

The NHS in Scotland is committed to making equal opportunities part of everything it does. As part of this commitment it:

- will ensure that all those who work within the NHS are aware of equal opportunity policies and of their responsibilities as employers and employees in implementing this policy.
- will ensure that employees and applicants are employed for their abilities and qualifications and that training and promotion opportunities are open to all.
- will ensure that training on equal opportunity issues are introduced and delivered to all employees.
- will ensure that monitoring processes are set up to evaluate the introduction and the effectiveness of the policy within its organisations/departments.

To deliver these commitments organisations must have an Equal Opportunities Policy which applies to all applicants and employees. Guided by the definition in the Scotland Act 1998, the equal opportunities policy:

- will ensure the prevention, elimination of discrimination between persons on grounds of sex or marital status, on racial grounds, or grounds of disability, age, sexual orientation, language or social origin or other personal attributes, including beliefs or opinions, such as religious beliefs or political opinions.
- will shape through education, training and life long learning, an awareness of good practice on an everyday basis.
- will promote through tolerance and understanding, the removal of isolation and exclusion.
- will recruit from the widest possible pool, by ensuring that the recruitment process itself does not either directly or indirectly rule out potential candidates by using irrelevant criteria.

2.3 Legal Framework

The main Acts that determine relevant legislation that relate to equality are set out below, in addition to the Acts there are a number of supporting "Codes of Practice" (see Annex 4.1) which all NHS in Scotland employers must adopt and integrate into their own local policies, procedures and practices. Appendix 3.4 contains some useful addresses for further help.

Sex Discrimination Act 1975: This deals with discrimination on grounds of sex or marriage and applies to men and women. It makes discrimination on the grounds of gender illegal whether it is direct or indirect. Direct and indirect discrimination is as follows:

Direct Discrimination: Where a woman (or man) is treated less favourably than a man (or woman) on the grounds of her (or his) sex. Where a married (or unmarried) person is treated less favourably than an unmarried (or married) person of the same sex on grounds of marital status.

Indirect Discrimination: Where an unjustifiable requirement or condition is applied equally to both sexes but has a disproportionately adverse effect on one sex, because the proportion of one sex which can comply with it is considerably smaller than the proportion of the other sex. The inability to comply, must also have a detrimental effect, such as not being promoted or selected. For the future, the Government propose to amend the Sex Discrimination Act so that it also refers to someone applying a requirement, condition or practice which causes detriment to a higher proportion of one sex because they cannot comply with it.

Genuine Occupational Qualification: Discrimination will not be unlawful if an employer can show that it is necessary for a post to be filled, for example, by a particular sex or by a person from a particular racial group. The circumstances which such restrictions would be justified are narrow.

Race Relations Act 1976: This makes both direct and indirect discrimination on the grounds of race, colour, nationality (including citizenship) ethnic or national origin unlawful. The law covers people from all racial groups, including white people.

Equal Pay Act 1970: This deals with equal pay and prohibits different pay for men and women doing the same work, work rates as equivalent, or work of equal value.

Disability Discrimination Act 1995: This deals with discrimination against disabled people - that is, when someone treats a disabled person less favourably than someone else, without justification, for a reason related to their disability. Discrimination also occurs if, without justification, a 'reasonable adjustment' for the disability is not made. The Act applies to all those who provide goods, facilities and services to the public.

Human Rights Act 1998: The Human Rights Act 1998 was brought into effect in Scotland through The Scotland Act 1999. The rest of the UK came within the scope of the Act on 2 October 2000. The Act provides among other issues, a right to fair trial and a right to respect family life. It provides for the enjoyment of the rights and freedoms under the European Convention of Human Rights without discrimination on specified grounds, including sex, race, colour, language, religion, and national or social origin.

Trade Unions and Labour Relations (Consolidation) Act 1992: This legislation protects employees from discrimination on the grounds of trade union activities or membership, or of non trade union membership.

Employment Relations Act 1999: This Act includes a number of "Family Friendly" measures and includes legislation to cover the European Parental Leave Directive. The objective of the Parental Leave Directive is to provide a balance between work and home life. The Act provides employees with rights to parental leave, time off work in family emergencies as well as simplifying and improving maternity rights.

Rehabilitation of Offenders Act 1974: The Act governs an employers ability to make employment decisions based on an employee's past criminal convictions. The Act specifies that after a period of time, anyone who has been convicted of a criminal offence and who has served their sentence, is not obliged to disclose past convictions. The length of time that must elapse before any conviction may regarded as spent varies according to the nature of the conviction. There are some exceptions to the Act and a number of Health Service posts fall into this category, where disclosure of spent convictions is appropriate and required. In addition to these exceptions further legislation within Scotland allows for criminal records to be checked where a postholder will have substantial access to children. Robust systems require to be in place to comply with this legislation and NHS Circular 1989 (GEN)22 should be applied.

Sex Discrimination (Gender Reassignment) Regulations 1999: Makes discrimination unlawful on the grounds of gender reassignment. Applies to anyone who intends to undergo, is undergoing or has undergone gender reassignment.

Asylum and Immigration Act 1996: This Act makes it a criminal offence for an employer to recruit individuals who have no permission to work in the UK. CRE advice is that all prospective employees should be asked for a birth certificate or passport to establish their eligibility to work in the UK.

Part Time Workers Regulations : These regulations which came into effect on 5 May 2000, remove discrimination against part-time workers and increases access to part-time work at all skill levels and responsibility.

Employment Tribunal Case Law: This can change and solicitors advice should be sought on current employment tribunal case law. There are also companies which offer compendiums of employment case law and these can be a useful source to provide an indication of current case law.

Future Legislation: The Government is currently considering an Equal Opportunities Commission submission concerning future changes to sex equality legislation. It is likely for example that this will include a statutory duty on public bodies to take a lead in promoting equal opportunities. The Government intends to consult on the package of legislative proposals this year.

Positive Action: Positive action by way of training and encouragement for under-represented groups can be lawful but 'positive discrimination' where additional assistance or favourable treatment is given to one particular equality group is not. However, Article 141(4) of the EC Treaty now allows member states to adopt measures providing for specific advantages to make it easier for the under-represented sex to pursue a vocational

advantage.

2.4 Supporting Evidence to Promote Equality

Data Collection

Good quality information is the basis for setting targets, monitoring performance, making sure the policies are working and indicating where they are not working. The quality and extent of data collection on the composition of the workforce is patchy and dated. While there is reasonable, if dated, information available about the proportion of women employed by the NHS, by grade and occupation, data on ethnic origin is largely incomplete for groups other than medical staff. Data on disability is not available. Employers must comply with the requirement in the "Codes of Practice" (see Annex 4.1) to collect information which will enable monitoring to take place to determine whether policies and plans are being turned into good practice. Organisations who do not currently comply will be required to produce a plan by April 2001 to demonstrate compliance by 1 April 2002 and any future shortfalls in performance considered in the context of overall staff governance obligations on NHS employers.

Women in the Workforce

Broadly, women account for 77% of the NHS workforce, but they are not evenly distributed within occupational groups, nor within grades within these occupational groups. The issue is not one of overall numbers, rather it is the access that women have to career advancement within groups (Table 1, appendix 3.3). There should be equal opportunity for access in all aspects relating to career advancement, e.g promotion, recruitment, training.

Medical/Dental Staff

Women medical students now account for more than 50% of the medical school intake. Over time, this change in the pattern of admissions should be reflected in the grades of medical staff, but at present, these changes have yet to impact upon the most senior levels of medical staff. (Table 2 Appendix 3.3) It is only in the most basic grade of house officer where the proportion of women in the grade reflects those currently in medical school. In common with the distribution of ethnic staff, women appear to be proportionately over-represented in the non-consultant career grades of associate specialist and staff grade doctors. To ensure equality in the recruitment and selection process, panels must have undergone equal opportunities training before sitting on a panel. Family friendly policies should be promoted at all medical grading levels to assist women and men to combine a family with work.

Nursing / Midwifery and Professions Allied to Medicine

Similar patterns are evident in both these groups. In nursing, although women account for some 89% of the workforce within these occupations, the pattern is skewed across grades. Women account for only 72% of the senior nurse manager group, and significantly fewer than this at the level of Executive Director. Women account for between 91% and 95% of physiotherapists, occupational therapists and radiographers, but again the distribution of women within grades in these occupations is uneven, with significantly lower proportions

at senior levels. Women should be encouraged to take advantage of available developmental opportunities and to apply for senior positions.

Senior Managers

The information on senior managers is analysed individually by service, e.g. finance, personnel and by grade. Unfortunately combined data by service by grade is not available, which is what is required to monitor the effectiveness of any programmes designed to improve the distribution of women throughout the workforce. In addition, we can monitor trends in employment over a number of years. (Table 3 Appendix 3.3)

Women are under-represented in the most senior grades (Chief Executive/General Manager) and within particular occupational groupings (e.g. finance, computing). While it is recognised that this information is very out of date, at least for the most senior posts, which will have been affected by reconfiguration, there is no reason to suppose that the overall position has changed significantly. Thus, for example, of 28 current Trust Chief Executives, only 3 (11%) are women. The position is rather better for Trust Finance Directors, with women currently occupying 25% of posts.

Women by Senior Manager grades for the period 1995-97

There are indications that there has been some progress in each of the grades from Grade 4 and above, while progress in the most senior grade (8 and above) has been proportionately greater than in any of the lower grades. Thus while the pattern evidenced in all other health service occupations (over-representation of women in the lower grades, under-representation at senior levels) is similarly obvious in the management category, the statistics do suggest that there has been progress despite the lack of formal programmes to improve representation. (Table 4 Appendix 3.3)

NHS employers must appoint on merit and the ability to do the job. Managers should encourage all staff to undertake leadership training and development.

Ethnic Origin of Staff Employed by the NHSiS

While data collection levels for medical and dental staff are high (98.2% overall) those for other staff groups are very poor, averaging only 69.3%, with the performance of individual health board areas ranging from 29.6% to 100%. It is clearly important that the ethnic composition of staff within the NHS should be considered in the context of the composition of the Scottish population as a whole. Based on the 1991 Census, (obviously now dated) the non-white population of Scotland stands at 1.3%, with individual health board areas accounting for proportions between 0.3% (Borders, Orkney) and 2.9% (Greater Glasgow). However, in considering the relationship between the population as a whole and the NHS workforce, it is important to remember the particular role of the universities and Scotland's place as a high quality provider of education, particularly medical education, attracting traditionally high numbers of overseas students.

Medical and Dental Staffing

Some 85% of medical and dental staff at September 1998 were white. (Table 5 Appendix 3.3). The largest ethnic group (4%) was from the Indian sub continent, while a further 2% described themselves as black. There are statistically significant differences between the

overall composition of the workforce and distribution of non white staff among grades. The difference is most obvious between career and non-consultant career grades in hospital medicine. In terms of progress, the proportion of non white medical staff has increased between 1994 and 1998 from 13.8% to 15.2%, and a similar pattern is evident for dental staff.

Non Medical Staff

Incompleteness of data is problematic, and there is insufficient detail on the distribution of staff within professions for the data to be useful. However, 99.2% of nursing staff for whom ethnic origins is recorded are white, 98.4% of recorded scientific / professional staff are white and 99.8% of recorded administrative and clerical staff are white.

All NHS employers must collect ethnic minority data for all staff groups as a matter of priority in accordance with the Code of Practice on race.

2.5 Application of Policy

2.5.1 Employment

Recruitment and Selection

Every NHS employer must aim to create conditions whereby staff are selected and treated solely on the basis of their merits, abilities and potential, regardless of gender, ethnic or national origin, colour, race, disability, age, religious or political beliefs, trade union/ professional organisation membership, sexual orientation or other irrelevant distinction.

As part of this culture, each NHS employer must have a written policy and procedures for the recruitment and selection of employees, which should include provision for the training for all potential recruiters in both equal opportunities principles and in the employer's recruitment and selection procedures.

Policies must reflect the spirit of legislation in order to create an environment which encourages diversity and reflects the mainstreaming of equal opportunities in recruitment and selection decisions. Commitment to these principles must be made clear to prospective as well as existing employees in each organisation.

Recruitment and selection policies must contain references to the relevant legislation and best practice which impacts on these selection decisions as well as the actions which the employer will take to ensure compliance with these procedures.

Employers must appoint on merit and ability to do the job in question through a thorough assessment of job requirements. Job titles must be reviewed at the same time to ensure that no sex bias can be implied from the title.

The principles must be that employers:

- recruit on the basis of ability, skills, experience and aptitude for the vacant job;
- select on merit based on information provided by the applicants, which must not contain personal information such as forename, date of birth, gender, ethnic origin, disability or reference to any other irrelevant distinctions;

- base promotion on ability and demonstrable potential to perform;
- advertise all vacancies as a routine except where a redeployment or redundancy situation arises. Particular attention should be paid in those circumstances to the NHS Organisational Change Policy documents, NHS MEL (1999)7 and NHS MEL(2000)22. Advertisements should aim to reach the widest possible audience and include a reference to the organisation's aims with respect to equal opportunities and positive about disability status.

Promotion

The principles that apply to fair selection must also apply to the promotion process. Consideration for promotion must be based on the ability of the candidates to do the job or whether they demonstrate the potential to do so after suitable training. Employers must be able to demonstrate that fair procedures apply to the consideration of internal applicants for vacancies.

Redeployment

Changes as a result of reorganisation must demonstrate the organisation's commitment to the key principles of openness, fairness and equity as outlined in the Organisational Change Policy Documents, NHS MEL(1999)7 and NHS MEL(2000)22 which applies to all NHS employers.

2.5.2 Family Friendly Policies

Family Friendly working arrangements can make a significant contribution to helping the NHS attract, recruit and retain individuals whose abilities would otherwise be denied to the organisation. These working arrangements must ensure that opportunities and outcomes are available to all staff and ensure that the NHS is a fair employer.

Key Family Friendly policies should cover:

Parental Leave: maternity leave, breastfeeding, childcare, paternity leave, adoption and fostering, parental leave and career breaks.

Carers Leave: carers leave, compassionate leave, special leave and support for elderly dependants.

Flexible Working: part-time working, job sharing, flexible working arrangements, home working, phased retiral, sabbatical leave and secondments.

These and other arrangements are explained in the Family Friendly Guideline.

2.5.3 Education and Training and Retraining

Education and Training and Retraining in respect of Equal Opportunities must be carried out in accordance with guidance issued in the NHS Training and Development Strategy for Staff "Learning Together". This strategy emphasises the importance of continuous staff development and the need to ensure that staff are given adequate training in current legislation, good practice and procedures. Human resource policies and training & development policies must contain appropriate sections on the need to provide adequate

staff training and development on the development and implementation of equal opportunities policies and procedures.

Training

Policies, agreements, rules and practices regarding selection for promotion, transfers, training and personal development will avoid discrimination. In particular opportunities for promotion, transfers and training must be drawn to the attention of all employees and when such opportunities are advertised, it must be done in a way so as not to discriminate against, exclude or reduce the numbers of applicants from particular groups. Similarly criteria used in appraisal assessments must avoid discrimination and appraisers must not discriminate in their application.

Training and retraining must not exclude any age group. Positive action should be encouraged to broaden the diversity of the work force. Section 47 of the Sex Discrimination Act and Section 38 of the Race Relations Act allow employers to implement special training for women or ethnic minorities.

Recruitment and Selection Training

Recruitment and Selection training for all types of staff must contain advice and guidance on equal opportunities implementation. It is essential that recruitment panellists for all grades of posts, including senior medial posts, to have undergone training on equal opportunities legislation, policies and procedures.

Induction

The induction process for all staff must include a clear statement on the employer's commitment to equal opportunities. Staff must be made aware of their rights and responsibilities and how to respond if they are discriminated against or witness discrimination.

Life Long Learning

The development of "Life Long Learning" within the NHS will give every member of staff a personal development plan. The implementation of Life Long Learning must be transparent and without discrimination. Personal development plans and associated appraisal systems for staff should ensure that staff are adequately trained with regard to equal opportunities. Training must include a high level of awareness of equal opportunities legislation and its applicability to selection and recruitment and employment within the Health Service.

Leadership

Training in equal opportunities must form a key part of the induction, training and development of Board members in organisations. Equal opportunities awareness is a vital part of management. All staff with managerial responsibilities must undertake training that covers the employer's commitment to equal opportunities and the role of equal opportunities in all policies and procedures within the workplace. All managers should be positive about equal opportunities and this should be assessed as part of their annual appraisal. The demands of an increasingly diverse workforce must be enhanced by

diverse leadership allowing the development of new perspectives and new opportunities for all staff regardless of gender, race, disability, religion, sex or sexuality.

Career Development

Effective career development should be used throughout the NHS to aid the retention of skills and minimise the uncertainty caused by transition. Procedures used must be open and robust. Training and development should be used to assist staff to progress.

Retraining

Retraining of staff must feature as an important element in staff training and development plans. It will be necessary for refresher training to be undertaken following lengthy illness or career breaks.

This can be achieved by "Return to Work" training, refresher courses, keeping in touch with the job training during career breaks. These policies require to link with advice given on the development of family friendly policies. Staff require positive support in return to work situations. Access and assistance to retrain to avoid a redundancy situation or following illness should be made available as far as practical.

Retaining Skills

The NHS needs to move to a more balanced and diverse work force reflecting the community in which it exists, but it also needs to retain the skills and experience gained by the work force. Programmes should be established to allow experienced staff to pass on skills. Possession of appropriate skills not age should be the main factor in selection for training, promotion and transfer.

2.6 Roles and Responsibilities

If we are to be successful in our working relationship, then it is essential to identify individual and embodied roles and responsibilities, in order to ensure a more motivated and informed workforce.

Agents	Roles and Responsibilities
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Employer	Must be accountable for delivering the policies through business planning and performance management arrangements.
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	Must ensure that everyone in the organisation understands what the policy means for them and must provide practical training and positive support to help managers meet their obligation in turning policy into practice.
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	Must ensure that equality is at the heart of the organisations agenda.
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	Must monitor equality via the Local Partnership Forum using the Equality Indicators.
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	Must fully embrace the concept of partnership working through core standards being taken forward.
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Must ensure appropriate service provision and act as agents for change within local communities by positioning equality and diversity at the heart of local health plans.

Management

Must ensure that good employment practices are set which have equality within their structures and activities from the outset.

Facilitate and enable Local Partnership Forums between management and local workforce.

Provide an education package for all staff ensuring that the values of equality and diversity, and their practical implications, are disseminated throughout the curriculum.

Employee

Must ensure full co-operation in applying equal opportunities to all policy making.

Must ensure that there is no discrimination in patient care.

Must ensure that no unlawful discrimination occurs in the implementation of equal opportunities policies.

2.7 Monitoring and Evaluation

The monitoring and evaluation process is essential to ensure the successful application of an equal opportunities policy and to make sure it is known about and works. All NHS employers must work towards using equality indicators for their own management purposes as a matter of good practice.

Equality Indicators

The equality indicators should include the following workforce profile:

gender, ethnicity, disability, age, occupational groups and grade and whether full or part-time (some employers may also wish to collect data on religion).

- Black and ethnic minority staff as % of total headcount employed;
- Female staff as % of total headcount employed;
- Staff employed in various age bands as % of total headcount employed;
- Number of staff who declare themselves to be disabled;
- Number of staff employed in senior posts with regard to the above profiling;
- Annual number of leavers and reason for leaving by gender as % of total headcount of staff in post;
- Annual number of staff returning at the same level after maternity leave of 12 months as % of staff taking maternity leave;
- % of staff by occupational groups, grade, gender and whether full or part-time;

- Individual training activity;
- Number of grievance, disciplinary, harassment & violent incidents related to discrimination by gender.

The reasons for collecting this information must be discussed with staff so that they are fully aware and prepared to fully participate in the data collection. Data can only be useful if it covers the whole of the workforce. Staff will only give data freely if they understand why they are being asked to do so and that they will benefit in the long term. Staff must also be reassured that the information will be collected in line with the Data Protection Act and will only be used as statistics and that access to the raw data will be restricted to those involved in the collection process. However it is recognised that it may be difficult to monitor all groups that may be subject to discrimination. For example members of staff may not wish to discuss their sexual orientation. Other methods of monitoring should be considered including an anonymous method for staff to complain of discrimination.

Good quality information means a more informed basis for setting meaningful objectives and targets for the organisation, action to be taken and the determination of resource implications.

To enable this, there requires to be commitment from the top, therefore the organisation should identify a director/executive manager to champion and assume responsibility for equal opportunities within the organisation. This person should be a member of the Local Partnership Forum.

In addition to this there should be an identified member of staff trained as an internal advisor who will support staff who have any equal opportunity issues. These advisors must receive training to equip them for this role.

The Local Partnership Forum should agree a set of equality objectives each year with a plan detailing how these objectives will be met.

Reporting of the outcomes of these objectives will be through the Local Partnership Forum and will be published in the annual report along with details of action taken to promote equal opportunities and progress year on year.

Indicators of Success

- Every employer will be able to use the information collected for the equality indicators to enable a base line to be established;
- Every employer will have a set of equality objectives for each year;
- All employment policies will reflect the principle of equal opportunities;
- Every employer will have in place equality policies to support their employees

e.g. Recruitment and selection

Harassment

Disability

Training, retraining and development

- All staff know about all relevant policies, and who is the contact person for equal opportunities within their organisation;
- The organisation will meet the criteria to use the employment service disability symbol (two ticks);
- Every employer requires to undertake training on managing equality and diversity for their staff.

2.8 Conclusions

2.8.1 Policy

All NHS employers must have equal opportunities policies in place and appropriate monitoring to ensure the policies work.

The guideline development group considered whether there should be separate equal opportunities policies covering, gender, race, disability and age individually. On viewing the policies produced by NHS and other organisations the group decided that individual policies would cover the same issues and concerns and that one overall policy would be simpler and send the message that there must be no discrimination on any grounds in the NHS.

2.8.1.1 Equal Opportunities Definition

The group discussed the possible content of the equal opportunities definition and determined that there would be advantage in aligning the definition to that promoted by the Scotland Act 1998 as follows:

"will ensure the prevention, elimination of discrimination between persons on grounds of sex or marital status, on racial grounds, or grounds of disability, age, sexual orientation, language or social origin or other personal attributes, including beliefs or opinions, such as religious beliefs or political opinions."

2.8.1.2 NHS Commitment to Equal Opportunities

In discussion the group decided that the NHS required to make overall value principles for itself as an organisation to show its commitment to equality and these are set out in the section on values and principles.

2.8.1.3 Laws on Equality

NHS employers must work within the equal opportunity, employment and, European legislation as well as employment case law.

2.8.1.4 Supporting Evidence for Equality

Employers must comply with the requirement in the "Codes of Practice" (see Annex 4.1) to collect information which will enable monitoring to take place to determine whether policies and plans are being turned into good practice.

There should be equal opportunity for access in all aspects relating to career advancement, e.g promotion, recruitment, training.

To ensure equality in the recruitment and selection process, panelists must have undergone equal opportunities training before sitting on a panel. Family friendly policies should be promoted at all levels to assist staff to balance a home life with work.

Women should be encouraged to take advantage of available developmental opportunities and to apply for senior positions.

NHS employers must appoint on merit and the ability to do the job. Managers should encourage all staff to undertake leadership training and development.

2.8.1.5 Ethnic Origin of Staff Employed by the NHS

All NHS employers must collect ethnic minority data for all staff groups as a matter of priority in accordance with the Code of Practice on race.

2.8.2 Application of Policy

2.8.2.1 Employment: Recruitment and Selection

Every NHS employer must aim to create conditions whereby staff are selected and treated solely on the basis of their merits, abilities and potential.

Each NHS employer must have a written policy and procedures for the recruitment and selection of employee.

Policies must reflect the spirit of legislation. Commitment to these principles must be made clear to prospective as well as existing staff.

Recruitment and selection policies must contain references to the relevant legislation and best practice.

Employers must appoint on merit and ability to do the job in question through a thorough assessment of job requirements.

2.8.2.2 Promotion

Consideration for promotion must be based on the ability of the candidates to do the job or whether they demonstrate the potential to do so after suitable training.

2.8.2.3 Redeployment

Changes as a result of reorganisation must demonstrate the organisation's commitment to the key principles of openness, fairness and equity.

2.8.2.4 Family Friendly Policies

Family friendly working arrangements can make a significant contribution to helping the NHS attract, recruit and retain individuals whose abilities would otherwise be denied to the organisation.

2.8.2.5 Education and Training and Retraining

Education training and retraining in respect of equal opportunities must be carried out in accordance with guidance issued in the NHS Training and Development Strategy for Staff "Learning Together".

Human resource policies and training & development policies must contain appropriate sections on the need to provide adequate staff training and development on the development and implementation of equal opportunities policies and procedures.

2.8.2.6 Training

Opportunities for promotion, transfers and training must be drawn to the attention of all employees and when such opportunities are advertised, it must be done in a way so as not to discriminate.

Training and retraining must not exclude any age group.

Recruitment and selection training

Recruitment panellists for all grades of posts, including senior medical posts, to have undergone training on equal opportunities legislation, policies and procedures.

2.8.2.7 Induction

The induction process for all staff must include a clear statement on the employer's commitment to equal opportunities.

2.8.2.8 Life Long Learning

The implementation of life long learning must be transparent and without discrimination.

2.8.2.9 Leadership

Training in equal opportunities must form a key part of the induction, training and development of members of boards.

All staff with managerial responsibilities must undertake training that covers the employer's commitment to equal opportunities and the role of equal opportunities in all policies and procedures within the workplace.

2.8.2.10 Career Development

Effective career development should be used throughout the NHS to aid the retention of skills and minimise the uncertainty caused by transition.

2.8.2.11 Retraining

Retraining of staff must feature as an important element in staff training and development plans.

2.8.2.12 Retaining Skills

Programmes should be established to allow experienced staff to pass on skills. Possession

of appropriate skills not age should be the main factor in selection for training, promotion and transfer.

2.8.2.13 Roles and Responsibilities

If we are to be successful in our working relationship, then it is essential to identify individual and embodied roles and responsibilities, in order to ensure a more motivated and informed workforce.

2.8.2.14 Monitoring and Evaluation

All NHS employers must work towards using equality indicators for their own management purposes as a matter of good practice.

2.8.2.15 Equality Indicators

Equality indicators must be established and include the following workforce profile, gender, ethnicity, disability, age, occupational groups and grade and whether full or part-time (some employers may also wish to collect data on religion).

There requires to be commitment from the top, therefore the organisation should identify a director/executive manager to champion and assume responsibility for equal opportunities within the organisation.

An identified member of staff trained should be identified as an internal advisor who will support staff who have any equal opportunity issues.

The Local Partnership Forum should agree a set of equality objectives each year with a plan detailing how these objectives will be met.

Reporting of the outcomes of these objectives will be through the Local Partnership Forum and will be published in the annual report along with details of action taken to promote equal opportunities and progress year on year.

APPENDIX 3.1

Equal Opportunities Model Policy

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NATIONAL HEALTH SERVICE IN SCOTLAND

Equal Opportunities Policy

1. Statement of Intent

The organisation wholeheartedly supports the principle of equal opportunities in employment as outlined by the Scotland Act:

The organisation will ensure the prevention, elimination of discrimination between persons on grounds of sex or marital status, on racial grounds, or grounds of disability, age, sexual orientation, language or social origin, or other personal attributes, including beliefs or opinions, such as religious beliefs or political opinions.

The organisation must be able to recruit, develop and retain a workforce that is able to deliver high quality services that are fair, accessible, appropriate and responsive to the diverse needs of different groups and individuals. Organisations must take action to ensure that they are free from discrimination both direct and indirect.

To ensure that the organisation is a good employer, it has to rise to the challenge of achieving standards that match those of the best, and to be an employer of choice, if it is to recruit and retain the staff it needs and its users deserve. This means demonstrating a commitment to the spirit of fairness and equality, fundamental to the NHS in Scotland Human Resource Strategy - "Towards a New Way of Working" - principles and also to modernising employment practices.

The organisation believes that it is in its best interests, and those who work in it, to ensure that the human resources, talents and skills available throughout the community are considered when employment opportunities arise. To this end, within the framework of the law, we are committed (whenever possible) to achieving and maintaining a workforce which broadly reflects the local community in which we operate.

This policy sets out the framework to ensure that individuals are treated equally and fairly and that decisions on recruitment, selection, training, promotion and career management are based solely on objective and job related criteria.

2. Background

The following outlines the main principles relating to equal opportunities.

2.1 Current Law

The main Acts, in Great Britain, on discrimination are:

- The Equal Pay Act 1970 (as amended)
- The Sex Discrimination Act 1975 (as amended)

- The Sex Discrimination (Gender Reassignment Regulations) 1999
- The Race Relations Act 1976
- The Disability Discrimination Act 1995
- Employee Rights Act 1999
- Asylum and Immigration Act 1996
- Trade Union and Labour Relations (Consolidated) Act 1992

2.2 Genuine Occupational Qualification

Discrimination will not be unlawful if an employer can show that it is necessary for a post to be filled, for example, by a particular sex or by a person from a particular racial group. The circumstances which such restrictions would be justified are narrow.

2.3 Pressure to Discriminate

It is unlawful for a person who has authority over others, either to instruct the others or induce the others by applying pressure, to discriminate.

2.4 Victimization

It is unlawful to treat a person less favourably because he or she has brought proceedings, given evidence at proceedings, or made allegations about discrimination.

2.5 Dismissal and Qualifying Period

It is unlawful to dismiss someone on the grounds covered by current legislation.

There is no qualifying period for individuals bringing claims against organisations in sex or race discrimination cases.

2.6 Positive Action

Positive Action by way of training and encouragement for under-represented groups can be lawful but 'positive discrimination' where additional assistance or favourable treatment is given to one particular equality group is not. However, Article 141 (4) of the EC Treaty now allows member states to adopt measures providing for specific advantages to make it easier for the under-represented sex to pursue a vocational advantage.

2.7 Responsibility of Individual Employees

Every employee has an individual responsibility to prevent discrimination, co-operate with the policy and draw to the attention of the line managers suspected breaches. Discrimination by an employee will be considered to be misconduct which may lead to dismissal.

The law permits where a complaint is made to an Employment Tribunal by an employee

who has been discriminated against and the complaint is upheld, individual employees of the organisation may be ordered to pay compensation in addition to the employer.

3. Monitoring

The organisation recognises that monitoring is integral to the success of the policy, and without this information, it is impossible to determine if the implementation of action as a result of the policy is effective in ensuring that all groups are being treated equally. The objective of monitoring is to ensure that, at every stage where decisions are made about individuals, their engagement, promotion, training, treatment, remuneration, hours of work and other working conditions, that no prejudices influence decisions or no indirect discrimination exists which has an adverse effect on women, individuals from an ethnic minority or people with disabilities.

Staff must be reassured that the information will be collected in line with the Data Protection Act and will only be used as statistics and the access to the new data will be restricted to those involved in the collection process.

The overall responsibility for the introduction and effectiveness of the systems used within the organisation and the monitoring and review of the effectiveness of the equal opportunities policy lies with the Board of the organisation. They will appoint an individual director/executive manager who will act as champion and will assume responsibility for equal opportunities within the organisation. This person must be a member of the Local Partnership Forum.

In addition there should be an identified member of staff trained as an internal advisor who will support staff who have equal opportunity issues.

The organisation recognises the importance of introducing effective monitoring systems and these are detailed in the implementation plan contained in Section 6.

4. Elements Covered by the Policy

4.1 Recruitment and Selection

The following principles will apply within the organisation.

a) All posts will be advertised unless a restructuring, reorganisation or redeployment situation exists, when separately agreed principles will be followed. Particular attention should be paid in those circumstances to the NHS Organisational Change Policy documents NHS MEL (1999)7 and NHS MEL (2000)22.

b) Information supplied to candidates following advertisement will state that:

"The organisation is committed to equal opportunities and applications are welcomed from anyone provided they meet the relevant criteria."

This statement ensures that the organisation commitment is evident in relation to equal opportunities issues generally, and specifically confirms to potential job applicants with a disability that their application is welcomed on the basis of their abilities.

- c) All job applicants will be given a copy of the equal opportunities policy and all applicants will be asked to complete and return an application form. The form identifies applicants by surname and first initials and does not request information as to the applicant's sex, age, marital status, race, disability status, or schools attended.
- d) Certain information is required for equal opportunities monitoring purposes. This will be requested on a monitoring form, separate from the application form, which accompanies the policy. This will be held separately by the human resources department and will not be forwarded to the selection panel.
- e) All job applicants who report a disability and who meet the minimum employee specification will be guaranteed an interview and will then be considered on their merits and abilities.
- f) Qualifications obtained outwith the UK which are held to be equivalent to UK qualifications will be given equal weight. Before employment is offered, a senior personnel representative must clarify the status of qualifications.
- g) If an applicant with a disability is the preferred candidate, but there remain practical concerns about whether the appointment should be made, the organisation has access to the Job Introduction Scheme. This enables the applicant to be employed with a subsidy for the first 6 weeks as long as the job itself is expected to last for 6 months or more. If concerns are expressed after 6 weeks there is the facility to extend this payment up to a maximum of 13 weeks. This must be done in conjunction with the Disability Advisor from the local Job Centre.
- h) Managers responsible for recruitment and selection must have undergone training in effective recruitment practices including equal opportunities before they participate in the interview process. All trained managers will require to attend a refresher course every three years.

With regard to medical appointments all National Panelists involved in selection must have been trained by their nominator twelve months prior to acting as a panel member.

4.2 Promotion

The organisation will ensure there is an element of competition in internal promotion or acting up situations. The employer will not presume that women or minority groups do not want promotion or an opportunity for advancement/development.

- 1) All promoted posts will be advertised internally within the organisation (unless a restructuring, reorganisation or redeployment situation exists when separately agreed principles will be followed).
- 2) All applicants will be asked to complete an equal opportunities monitoring form, which will not be made available to a selection panel.

4.3 Education, Training and Retraining

All employees will be afforded access to internal and external training and development opportunities within the overall resources of the organisation in accordance with the organisation training plan and the identified needs of individuals.

4.4 Family Friendly Policies

The NHS commitment to equal opportunities is evident from family friendly policies which are explained in the Family Friendly Guidelines, namely:-

- Parental Leave
- Carers Leave
- Flexible Working

Policies and practices will be further developed to ensure the effective implementation of the equal opportunities policy.

5. Remedies Under the Policy

5.1 Grievances

Any employee who believes that he or she is being treated less favourably on the grounds of their sex, sexual orientation, marital status, race, colour, disability or age is encouraged to raise the matter through the Grievance Procedure.

No employee expressing concern about the application to them of the equal opportunities policy will be treated less favourably as a result; or will suffer disciplinary action as a result of raising a grievance on the basis of what they consider to be discrimination.

5.2 Harassment

If the complaint is one of harassment then the employee should raise the matter through the Harassment Policy.

5.3 Disciplinary Policy

All staff and managers must adhere to the equal opportunities policy and failure to do so may lead to disciplinary action.

In applying the disciplinary procedures, care must be taken to ensure that a member or members of one group are not disciplined or dismissed for conduct which would be overlooked or condoned in another group.

6. Implementation Plan

All NHS employers are committed to further developing equal opportunities. The implementation plan details those initiatives/ developments which the organisation will take over the next 12 months to improve equal opportunities within the NHS. The

implementation plan is divided into awareness raising and monitoring.

6.1 Awareness Raising

- The new policy will be publicised throughout the NHS using the appropriate communication channels i.e. Team Briefing, Local Partnership Forum, notice boards and directly to staff via pay slip distribution.
- Briefing sessions for managers will be held on the launch of the new policy.
- Heads of department will ensure current staff are aware of their individual responsibilities to comply with the policy.

6.2 Monitoring

All NHS employers must work towards using equality indicators for their own management purposes as a matter of good practice.

The Local Partnership Forum should agree a set of objectives including minimum data set equality indicators each year with a plan detailing how these objectives will be met.

Equality Indicators

The equality indicators should include the following workforce profile:

gender, ethnicity, disability, age, occupational groups and grade and whether full or part-time (some employers may also wish to collect data on religion). These should be detailed as follows:-

- Black and ethnic minority staff as % of total headcount employed;
- Female staff as % of total headcount employed;
- Staff employed in various age bands as % of total headcount employed;
- Number of staff who declare themselves to be disabled;
- Number of staff employed in senior posts with regard to the above profiling;
- Annual number of leavers and reason for leaving by gender as % of total headcount of staff in post;
- Annual number of staff returning at the same level after maternity leave of 12 months as % of staff taking maternity leave;
- % of staff by occupational groups, grade, gender and whether full or part-time;
- Individual training activity;
- Number of grievance, disciplinary, harassment and violent incidents related to discrimination by gender.

Reporting of the outcomes of the agreed objectives will be through the Local

Partnership Forum and will be published in the annual report along with details of action taken to promote equal opportunities and progress year on year. They will demonstrate how the organisation can be measured against the indicators of success.

Indicators of Success

- Every organisation must be able to demonstrate that they have collected and established a data base containing the information detailed in the equality indicators;
- Every employer must have a set of equality objectives and targets for each year;
- All employment policies must reflect the principles of equal opportunities;
- Every employer must have in place equality policies to support their employees. These policies must be reviewed regularly to ensure they reflect current new equality initiatives.

e.g. Recruitment and Selection

Harassment

Disability

Training, Retraining and Development;

- Every employer must ensure all staff know about all relevant policies, and who is the contact person for equal opportunities within their organisation;
- The organisation must meet the criteria to use the employment service disability symbol (two ticks);
- Every employer must undertake training on managing equality and diversity for their staff;
- New staff must be made aware of the policy and their individual responsibilities relating to equality under the policy, as part of their induction training;
- Regular articles will be placed in each organisation publication on equal opportunities initiatives to share good practice and keep staff informed on the progress of the implementation plan.

NATIONAL HEALTH SERVICE IN SCOTLAND

EQUAL OPPORTUNITY MONITORING FORM - STRICTLY CONFIDENTIAL

We are committed to eliminating discrimination from recruitment and selection practices. We will take steps to ensure that candidates are recruited, trained and promoted on the basis of ability, the requirements of the job and the need to maintain an efficient and effective service. To monitor this policy on a local and national basis, we require the following information, which would be used for this purpose, which will form no part of the interviewing process and will be treated in strict confidence. This sheet will be detached from your application form on receipt and will be kept separately in the personnel section. If you are subsequently appointed this information may be kept on a database and used for monitoring and statistical purposes in accordance with the requirements of the Data Protection Act.

PLEASE COMPLETE IN BLOCK CAPITALS AND BLACK INK

NAME	AGE
POST APPLIED FOR	PART TIME/FULL TIME
PRESENT NATIONALITY	DEPARTMENT
COUNTRY OF BIRTH	

PLEASE TICK APPROPRIATE BOX

1.	<p>ETHNIC ORIGIN</p> <p>(Based on classifications recommended by the Commission for Racial Equality)</p> <p>White <input type="checkbox"/></p> <p>Indian <input type="checkbox"/></p> <p>Pakistani <input type="checkbox"/></p> <p>Bangladeshi <input type="checkbox"/></p> <p>Black - African <input type="checkbox"/></p> <p>Black - Other <input type="checkbox"/></p> <p>Chinese <input type="checkbox"/></p> <p>Black - Caribbean <input type="checkbox"/></p> <p>Other <input type="checkbox"/></p> <p>Please specify</p>
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LEGAL IMPLICATIONS

All equal opportunities policies must incorporate the spirit and content of the following pieces of legislation and recommendations of legislative bodies:

- Sex Discrimination Act 1975
- Sex Discrimination (Gender Reassignment) Regulations 1999
- Race Relations Act 1976
- Human Rights Act 1998
- Disability Discrimination Act 1995
- Equal Pay Act 1970
- Employment Relations Act 1999
- Asylum and Immigration Act 1996
- Rehabilitation of Offenders Act 1974
- Equal Opportunities Commission
- Working Time Directive
- Commission for Racial Equality
- Employment Tribunal Case Law

ROLES & RESPONSIBILITIES

(A) Employer

- Must be accountable for delivering the policies through business planning and performance management arrangements.
- Must ensure that everyone in the organisation understands what the policy means for them and must provide practical training and positive support to help managers meet their obligations in turning policy into practice.
- Must ensure that equality is at the heart of the organisation's agenda.
- Monitor equality via the Local Partnership Forum using the equality indicators
- Must fully embrace the concept of partnership working through how core standards are taken forward.
- Must ensure appropriate service provision and act as agents for change within local communities by positioning equality and diversity at the heart of local health plans.

(B) Management

- Must ensure that good employment practices are set which have equality within their structures and activities from the outset.
- Provide an education package for all staff ensuring that the values of equality and diversity, and their practical implications, are disseminated throughout the curriculum

(C) Employee

- Must ensure full co-operation in applying equal opportunities to all policy making.
- Must ensure that there is no discrimination in patient care.
- Must enforce that no unlawful discrimination occurs in the implementation of equal opportunities policies.

MONITORING & EVALUATION

All NHS employers must work towards using equality indicators for their own management purposes as a matter of good practice.

Equality indicators should include the following workforce profile:

- Gender
- Ethnicity
- Disability
- Age
- Occupational Groups and Grade
- Full/Part Time
- Some employers may also wish to collect data on religion

Each organisation should identify a Director/Executive Manager to champion and assume responsibility for equal opportunities. This person should be a member of the Local Partnership Forum. In addition to this there should be an identified member of staff trained as an internal advisor who will support staff who have equal opportunity issues. The Local Partnership Forum should agree a set of equality objectives each year. The outcomes of these objectives should be published in the annual report along with details of action to be taken to promote equal opportunities and progress made year on year.

APPENDIX 3.3

Workforce Data

Table 1

All Staff Groups: Women in the Workforce
Source: ISD September 1997

Staff Group	Total	Female	Female %
Medical/Dental	7905	2935	37
Nursing/Midwifery	51468	45702	89
Scientific/Professional	1559	974	62
PAMS	6406	5820	91
Technical	5314	3336	63
Maintenance/works	1969	10	-
Senior manager	2360	1098	47
Admin/clerical	16467	14138	86
Ancillary	10767	7480	69
Ambulance staff	2327	415	18
TOTAL*	106551	81917	77

Table 2

Medical/Dental Staff
Source: ISD September 1997

Grade	Total	Female	Female %
Consultant	2755	547	20
Associate specialist	150	67	45
Staff	341	188	55
Sp Registrar	874	307	35
Senior Registrar	308	120	39
Registrar	89	29	33
Senior House Officer	2115	961	45
House Officer	660	354	54

(ISD does not collect information on staff in general or dental practices)

Table 3

Senior Managers.

Source: ISD September 1997

Post	Total	Female	Female %
Chief executive	41	3	7
General manager	13	4	31
Senior /general management	535	245	46
Administration	245	129	53
Finance	346	131	38
Contracting	55	26	48
Computing	69	25	37
Health promotion	41	28	69
Hotel services	48	20	42
Legal services	8	4	53
Personnel	176	113	63
Management services	145	76	52
Patient services support	28	22	79
Senior nurse	108	82	76
Supplies / stores	20	4	17
Support services	92	34	37
Primary care	56	26	47
CSSD/TSSU	8	4	50
Ambulance	65	4	6
Other	258	116	45
TOTAL	2360	1098	47

Table 4

Women by Senior Manager grades for the period 1995-97 (WTE)
 Source: ISD September 1997

Senior Managers	1995	1996	1997
Grade 8 and above	29	33	42
Grade 7	49	52	52
Grade 6	62	60	73
Grade 5	142	167	191
Grade 4	189	218	236
Grade 3	151	171	169
Grade 2	130	143	131
Grade 1	68	91	77
Grade 0	42	46	43
Senior manager old grades	68	59	45
Senior manager Trust grades	35	52	38
TOTAL	964	1092	1098

Table 5

Ethnic Origin of Staff in the NHS in Scotland

Medical Staffing as at 30th September 1998

Source: ISD September 1998

	White %	Indian sub-continent %	Other %
Hospital consultants	93.6	3.5	2.9
Associate specialists	59.7	26.1	14.2
Staff grades	62.5	22.3	15.2

APPENDIX 3.4

Helpful Addresses

Equal Opportunities Commission

St Stephen's House
279 Bath Street
Glasgow
G2 4JL

Tel: 0141 248 5833
Fax: 0141 248 5834
e-mail: scotland@eoc.org.uk
website: www.eoc.org.uk

Provides advice and assistance relating to issues of sex discrimination and the Sex Discrimination Act.

Commission for Racial Equality

45 Hanover Street
Edinburgh
EH2 2PJ

Tel: 0131 226 5186
Fax: 0131 226 5243
e-mail: cre-edin@freenet.co.uk
Website: www.cre.gov.uk

Provides advice and assistance relating to issues of racial discrimination and the Race Relations Act 1976.

Disability Rights Commission Office for Scotland

First Floor
Riverside House
502 Gorgie Road
Edinburgh
EH11 3AF

Tel: 0131 444 4313
Fax: 0131 444 4301

Employers Forum on Disability

Provides general advice on disability matters and information relating to the Disability Discrimination Act.
Helpdesk: 0207 403 3020

Disability Scotland

Princes House
5 Shandwick Place
Edinburgh
EH2 4RE

Tel: 0131 229 8632
Fax: 0131 229 5168
e-mail: inquiries@disabilityscotland.org.uk

Fair Play Scotland

Ground Floor
St Stephen's House
279 Bath Street
Glasgow
G2 4JL

Tel: 0141 248 5833
Fax: 0141 248 5834

Advisory Conciliation and Arbitration Service (ACAS)

ACAS (Scotland)
Franborough House
123-157 Bothwell Street
Glasgow
G2 7JR

Tel: 0141 204 2677
Fax: 0141 221 4697

Provides advice on general employment matters only. ACAS also have public inquiry points throughout the country and you should consult your telephone directory for details of the nearest point.

CSA: Central Legal Office

Trinity Park House
South Trinity Road
Edinburgh
EH5 3SE

Tel: 0131 552 6255

Fax: 0131 551 3957

Other Sources

Other sources of information include:

Local Enterprise Companies (LECs)

Racial Equality Councils (RECs)

Local Authorities

Employment Service

Home Office Immigration Helpline

(Provides information to employers on
job-seekers right to work)

on 0208 649 7878

CSA Health Management Library

Tel: 0131 551 8775

ANNEX 4.1

Bibliography and Reference Base

The following publications and reports have been used by the equal opportunities policies guideline development group to facilitate the development of the strategy for the equal opportunities policy and model policy which is set out in this guideline.

The Scotland Act 1998

"Towards an Equality Strategy", a consultation paper produced by the Scottish Executive equal opportunities Unit.

"Equality Strategy: Working Together for Equality" the Scottish Executive Equality Strategy.

Human Resources Strategy for NHS in Scotland Staff "Towards a New Way of Working".

"Learning Together", a Strategy for Education, Training and Lifelong Learning for all staff in the NHS in Scotland.

"Towards a Safer Healthier Workplace", the Occupational Health and Safety Services Strategy for NHS in Scotland Staff.

"The Vital Connection", an equalities framework for the NHS in England.

General Whitley Council Equal Opportunities Agreement.

Commission for Racial Equality "Equality Standard.

Commission for Racial Equality Code of Practice.

Data from the Common Services Agency Information Statistics Division.

Equal Opportunity Commission Codes of Practice.

Disability Discrimination Act Codes of Practice.

Department for Education and Employment Code on Age Diversity.

McPherson Report.

Family Friendly Policies. PIN Guideline

GMC - Duties of a Doctor - Good Medical Practice.