

**Document Control**

<b>Title</b>			
<b>Domestic Abuse and Violence Policy (for Staff)</b>			
			<b>Author's job title</b> Head of Staff Health and Wellbeing and Engagement
<b>Directorate</b> Workforce & Organisational Development			<b>Department</b> HR Operations Team
<b>Version</b>	<b>Date Issued</b>	<b>Status</b>	<b>Comment / Changes / Approval</b>
0.1	Feb 2012	Draft	Initial version for consultation derived from NHS Devon Policy.
1.0	Mar 2012	Final	Harmonised policy as a result of the merging of Northern Devon Healthcare NHS Trust and NHS Devon community services. Approved by Partnership Forum on 13th March 2012 following consultation.
1.1	May 2012	Revision	Minor amendments by Corporate Governance Manager to document control report, footers, hyperlinks, formatting for document map navigation and table of contents. Missing Section 16 added.
2.0	Apr 2016	Final	For consultation at Pay & Reward Sub-Group
2.1	Octo 2018	Revision	Amendments further to NHS Council guidance and updated references and contact details
3.0	Dec 2018	Final	Minor amendments agreed at Partnership Forum following review of the policy
3.1	June 2021	Extension	In April-21 Governance Committee it was agreed that this document would have extended due dates until 31st May 2022.
<b>Main Contact</b>			
Head of Staff Health and Wellbeing and Engagement Suite 4, Chichester House North Devon District Hospital EX31 4JB		<b>Tel: Mobile –</b> <b>Email:</b>	
<b>Lead Director</b> Director of Workforce & Organisational Development			
<b>Superseded Documents</b>			
<b>Issue Date</b> June 2021		<b>Review Date</b> May 2022	<b>Review Cycle</b> Extension
<b>Consulted with the following stakeholders:</b>			
<ul style="list-style-type: none"> <li>• Equality &amp; Diversity Lead</li> <li>• Domestic Violence &amp; Abuse Lead</li> <li>• Pay &amp; Reward Sub-Group</li> <li>• Partnership Forum</li> </ul>			
<b>Approval and Review Process</b>			
<ul style="list-style-type: none"> <li>• Pay &amp; Reward Sub-Group</li> <li>• Partnership Forum</li> </ul>			

<b>Local Archive Reference</b> G:\Policies and Procedures	
<b>Local Path</b> Workforce and HR	
<b>Filename</b> Domestic Abuse and Violence Policy	
<b>Policy categories for Trust's internal website HR/People Matters</b>	<b>Tags for Trust's internal website (Bob)</b> Domestic Violence, Domestic Abuse, Sexual Violence, Sexual Abuse, Abuse, Domestic

## Contents

<b>Document Control</b> .....	<b>1</b>
<b>1 Policy Statement</b> .....	<b>4</b>
<b>2 Introduction</b> .....	<b>4</b>
<b>3 Aims of this policy</b> .....	<b>4</b>
<b>4 Definitions</b> .....	<b>5</b>
4.1 Domestic Abuse .....	5
4.2 Controlling behaviour .....	6
4.3 Coercive Behaviour .....	6
4.4 Domestic Violence and Abuse .....	6
4.5 Victim/survivor of Domestic Violence and Abuse .....	7
4.6 Child .....	7
4.7 Vulnerable Adult .....	7
<b>5 Roles &amp; Responsibilities</b> .....	<b>7</b>
5.1 Role & Responsibilities of Chief Executive .....	7
5.2 Role & Responsibilities of the Human Resources .....	7
5.3 Role & Responsibilities of IDVA .....	8
5.4 Role & Responsibilities of Occupational Health / Counselling Service .....	8
5.5 Role & Responsibilities of Risk Management/Trust Security Managers .....	9
5.6 Role & Responsibilities of Line Managers .....	9
5.7 Role & Responsibilities of Staff .....	10
<b>6 Signs of Domestic Abuse and Violence</b> .....	<b>10</b>
6.1 Physical signs .....	10
6.2 Emotional signs .....	11
6.3 Behavioural signs .....	11
6.4 Other signs .....	11
<b>7 Ownership and Responsibilities</b> .....	<b>11</b>
<b>8 Training and awareness</b> .....	<b>12</b>
<b>9 Perpetrators</b> .....	<b>12</b>
<b>10 'Clare's Law'</b> .....	<b>12</b>
<b>11 References</b> .....	<b>12</b>
<b>12 Monitoring, Audit and Review Procedures</b> .....	<b>13</b>
<b>Appendix 1: Equality Impact Assessment Screening Form</b> .....	<b>13</b>

## 1 Policy Statement

Northern Devon Healthcare NHS Trust (the Trust) is committed to providing a supportive environment for those impacted by domestic abuse, offering reassurance that the organisation has an understanding of how the impact of domestic abuse may affect their work performance, and are aware of the support that can be offered.

This policy applies to all staff and includes those working in a temporary or voluntary capacity. It aims to ensure that all staff feel supported whilst at work. The principles in relation to the provision of support and guidance will also apply to agency workers.

## 2 Introduction

The Health & Safety at Work Act 1974 and the Management of Health and Safety at Work Regulations 1999 identify an employers' duty of care to the people they employ, be it physical or emotional. This means that the organisations have a legal responsibility should an employee be targeted at work to protect both the one experiencing the abuse and their co-workers.

Domestic abuse can have an enormous effect on an individual's physical and mental health. It is now well accepted that abuse (both in childhood and in adult life) is often the main factor in the development of depression, anxiety and other mental health disorders. It can also lead to sleep disturbances, self-harm, suicide and attempted suicide, eating disorders and alcohol and substance misuse. Domestic abuse, between partners (16 years and over) or between family members includes psychological, physical, sexual, financial, emotional control and abuse or social isolation and can occur in all social classes, regardless of gender or sexuality.

The Crime Survey for England & Wales of 2011/12 estimates that domestic abuse will affect 1 in 3 women and 1 in 6 men in their lifetime. It leads to, on average, two women being murdered each week and 30 men per year. It accounts for 15% of all violent crimes, but is still the least likely to be reported to the police. Research suggests a person subjected to domestic violence and abuse will have attended a health appointment 35 times prior to being killed. This highlights these are missed opportunities to ask about domestic abuse. Research suggests that there is a noticeable increase during pregnancy.

Domestic violence and abuse is a serious public health issue. Although reported cases of domestic violence and abuse are mainly experienced by women from their male partners or their former partners, domestic violence and abuse also takes place within same sex relationships, men can be abused by women and family members can be abused by siblings, children, grandchildren and other family members.

Although there are some groups who are more likely to be at risk of domestic violence and abuse it can be experienced by anyone regardless of gender, age, disability, religion, sexuality, ethnicity, other protected characteristics under the Equality Act 2010, educational history, family background, etc.

## 3 Aims of this policy

The Trust understands that domestic abuse often negatively impacts on a person's ability to work effectively. It affects absence rates, stress prevalence, productivity and turnover.

The aim of the policy is to:

- Send out a strong message that any abuse is unacceptable.
- Support employees experiencing safety issues inside/outside of work.
- Advise managers on how to support employees who may be experiencing problems of abuse at home.
- Increase awareness and understanding of domestic abuse, sexual abuse and stalking/harassment.
- Develop an effective and supportive response to safety issues being experienced by employees.
- Offer practical suggestions and make employees aware of further help available.
- Reduce the impact of domestic abuse, sexual abuse or stalking/harassment on an employee's life.
- Decrease the risk of violence in the workplace from the possibility of the perpetrator visiting the workplace.
- Ensure that advice, guidance and support is available for managers, colleagues, occupational health and others in order to identify their different roles in supporting those who are (or have) experienced domestic abuse.
- Ensure staff who have been subjected to domestic abuse are not discriminated against in terms of their existing employment and ambitions for career development.
- Ensure that all staff who are supporting a person subjected to domestic violence and abuse are also being supported practically and emotionally.
- Actively support staff to identify and choose an appropriate course of action and ensure their safety and well-being are prioritised.

## 4 Definitions

### 4.1 Domestic Abuse

The cross-government definition of domestic violence and abuse is:

“Any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to:

- Psychological: - Intimidation, insulting, intentionally isolating a person from others i.e. friends and family, using children/pets as pawns as a mechanism to control.
- Physical: - Shaking, smacking, punching, kicking, poking, biting, strangling, starving, and tying up, throwing objects, female genital mutilation, and honour violence. Physical effects are often in areas of the body that are hidden i.e. breast/abdomen
- Sexual: - any sexual encounter without consent, including any unwanted touching or forced sexual activity including forced prostitution. Any person can experience sexual abuse. A perpetrator of sexual abuse can be either a stranger or someone known to the individual already
- Financial:- withholding money, confiscating money, refusal to allow the person to work, undermining efforts to find work, asking for explanations of money spent, not paying bills or withholding money for essentials i.e. food, heating etc.

- Emotional:- Swearing, undermining confidence, making racist or other derogatory remarks, making a partner feel unattractive, eroding independence.
- Harassment & Stalking: - a series of acts which are intended to, or in fact, cause harassment to another person. It can involve, following the person subjected to domestic violence and abuse, threatening or repeated phone calls, coming to the person subjected to domestic violence and abuse's place of employment, leaving written messages or objects and vandalising the person subjected to domestic violence and abuse's property.
- Cyber-stalking: - the use of the Internet to harass or threaten someone repeatedly. Involving e-mail, text messages, harassment in live chat situations, leaving inappropriate messages on message boards or guest books, other social media, sending viruses, or electronic identity theft.

[www.gov.uk/domestic-violence-and-abuse](http://www.gov.uk/domestic-violence-and-abuse) (2013)

#### 4.2 Controlling behaviour

Controlling behaviour is a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capabilities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

#### 4.3 Coercive Behaviour

Coercive behaviour is an act or a pattern of acts of assaults, threats, humiliation and intimidation or other abuse that is used to harm, punish or frighten the person subjected to domestic violence and abuse.

The definition also includes so called 'honour'-based violence perpetuated against a person by family or community members.

#### 4.4 Domestic Violence and Abuse

Is:

- Systematic patterned behaviour designed, consciously or subconsciously, to control and dominate a partner/former partner or a family member.

Domestic Violence and Abuse is not:

- Solely consisting of acts of physical abuse – it has long been recognised that abuse can take the form of sexual, emotional, psychological and/or financial abuse.
- A minor tiff
- An occasional heated argument
- Loss of temper or self-control
- Caused by alcohol and/or drugs
- A private quarrel

#### 4.5 Victim/survivor of Domestic Violence and Abuse

The term 'victim' is often perceived as negative. Some policies refer to those experiencing domestic violence and abuse as 'survivors' as they are often surviving the abuse on a daily basis. This policy will use the term 'a person subjected to domestic violence and abuse'. This will refer to 'anyone who has been injured or has been emotionally, financially or sexually abused by a person with whom they have or have had an intimate relationship or by a family member.

#### 4.6 Child

A child is anyone who has not yet reached their 18<sup>th</sup> birthday (Children Act 1989)

#### 4.7 Vulnerable Adult

A vulnerable adult is a person who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation.

**NOTE:** - The list and examples above are intended to be illustrative and are not exhaustive.

## 5 Roles & Responsibilities

### 5.1 Role & Responsibilities of Chief Executive

The Chief Executive has the overall responsibility for all personnel matters and for ensuring mechanisms are in place for the overall implementation, maintenance, monitoring and revision of this Policy.

### 5.2 Role & Responsibilities of the Human Resources

The Trust's Human Resource Department will hold the responsibility for providing advice and guidance on the practical application of this policy for managers and staff. Updating of the policy will be in line with any statutory and NHS contractual amendments.

The Human Resources Team will:

- Support managers when they are dealing with an employee who has been abused or who may be the perpetrator of abuse.
- Work jointly with Independent Domestic Violence Advisors (IDVA) and if appropriate, Occupational Health, in the support of line managers to monitor reasons for sickness absence/performance related to abuse and plan strategies to deal with the issues.
- Provide advice and discretion on a case by case basis relating to such things as monitoring of absence separately from other sickness absence, time off to access legal advice or attend Court etc. under the Special Leave Policy and any other appropriate policies/procedures.

- Ensure staff confidentiality is maintained.

NOTE: sickness absence standards may be varied including making reasonable adjustments for domestic violence and abuse.

- Offer support/advice on changes in working patterns, hours etc. including changes in work site if appropriate, on a case by case basis.

### 5.3 Role & Responsibilities of IDVA

The main purpose of independent domestic violence advisors (IDVA) is to address the safety of a person subjected to domestic violence and abuse at high risk of harm from intimate partners, ex-partners or family members to secure their safety and the safety of their children.

Serving as a person subjected to domestic violence and abuse's primary point of contact, IDVAs normally work with their clients from the point of crisis to assess the level of risk. They also discuss the range of suitable options leading to the creation of a workable safety plan.

They are proactive in implementing the plans, which address immediate safety, including practical steps to protect people subjected to domestic violence and abuse and their children, as well as longer-term solutions. These plans will include actions from the Multi-agency Risk Assessment Conference (MARAC) as well as sanctions and remedies available through other organisations. IDVAs support and work over the short to medium term to put a person subjected to domestic violence and abuse on the path to long term safety. IDVAs receive specialist accredited training and hold a nationally recognised qualification.

Since they work with the highest risk cases, IDVAs are most effective as part of an IDVA service and within a multi-agency framework. The IDVA's role in all multi-agency settings is to keep the client's perspective and safety at the centre of proceedings.

**The IDVA service can be contacted via North Devon District Hospital switchboard on**

**01271 322577**

At the time of publication direct contact details for Health IDVA Vicky Hemmingway are:

NDADA Office: 01271 370080 or 07581 629498

Secure e-mail is [vickyh@ndada.co.uk](mailto:vickyh@ndada.co.uk).

Alternatively if a member of staff does not wish to see the internal health IDVA they can access Domestic Abuse services (across Devon) called LEESAR Partners. These can be contacted on 0345 1551074 or [admin@splitzdevon.org](mailto:admin@splitzdevon.org)

### 5.4 Role & Responsibilities of Occupational Health / Counselling Service

Occupational Health Services will:

- Support individuals who have experienced abuse, and advise them and their manager of any further support that can be offered / accessed.
- Respond to specific management and self-referrals, on a confidential basis, provide a confidential, advisory and support service to individuals through counselling, information and training with strategies and techniques in how to manage stress caused by abuse, individually or with others.
- Offer counselling services

## 5.5 Role & Responsibilities of Risk Management/Trust Security Managers

Risk Management/Trust Security Managers will:

- Co-ordinate reported incidents using Datix
- IDVA will support managers to undertake a risk assessment if a risk of safety is likely in the workplace and alert security personnel if necessary.
- The Trust's Local Security Manager(s) will provide advice and guidance on security matters on request including appropriate security procedures according to the individual workplace.

## 5.6 Role & Responsibilities of Line Managers

Line managers will be responsible for familiarising themselves with the contents of this policy so that they can provide guidance and support to their staff in accordance with the aims of this Policy (see above).

Line managers must deal with all staff sympathetically and react promptly and appropriately to issues brought to their attention.

Line Managers will maintain confidentiality and discretion when supporting any staff member under this Policy.

The manager must view all concerns with an open mind and follow a fair and justifiable decision making process with regards to the actions they take and support offered to employees.

Line managers will be responsible for ensuring that, once notified by an employee that there is a risk of domestic abuse and violence, they undertake an appropriate Risk Assessment to ensure the safety of the employee whilst at work. The risk assessment should be repeated regularly to ensure that it is kept up to date.

Managers need to:

- Attend domestic violence awareness training (which may form part of sickness absence training) to understand what it is, its prevalence, impact in terms of absenteeism and performance, adverse effect on colleagues, potential dangers to a person subjected to domestic violence and abuse and legislative implications for the Trust
- Develop a sensitive and non-judgemental approach when dealing with staff members who have experienced domestic violence and abuse, taking time to listen to the staff member and taking what they say seriously
- Ensure any discussion about the staff member's situation takes place in privacy and that confidentiality is respected

- Understand that the member of staff may not wish to approach their line manager and may prefer to involve a third party such as a colleague
- Be aware there may be additional issues faced by the member of staff because of, for example, their age, gender, sexuality, ethnic background, disability etc.
- Respect the choices and decisions the staff member may make about their situation
- Be aware of the support available including IDVA / Trust Local Security Management Specialist(s), Occupational Health etc. and explore these options with the staff member
- Ensure domestic violence information is displayed and that materials and contact details are made readily available and can be accessed discreetly by all staff
- Contact HR and IDVA immediately if concerns are raised

## 5.7 Role & Responsibilities of Staff

Employees are responsible for co-operating with procedures enabled by this policy and must make every effort to attend meetings arranged by management.

Employees will be asked to help with the relevant risk assessment(s); it is important that any advice an employee has received from their doctor or other internal/external sources which could impact on the assessment is passed on to the line manager or person carrying out the risk assessment(s).

Members of staff need to:

- Participate in domestic violence awareness training provided to understand what it is, its prevalence and potential adverse effects on a person subjected to domestic violence and abuse
- Develop a sensitive and non-judgemental approach when dealing with colleagues who have experienced domestic violence and abuse, taking time to listen to the staff member and taking what they say seriously
- Not attempt to counsel a person subjected to domestic violence and abuse, but listen to them and provide information regarding support mechanisms and encourage staff members to seek support from the appropriate sources. Expert support is available via the in-house Independent Domestic Violence Advocate (IDVA)
- At all times, staff should seek the advice of IDVA and/or a senior manager.

**NOTE:** there is a separate Domestic Violence Abuse Policy for members of the public/patients.

## 6 Signs of Domestic Abuse and Violence

### 6.1 Physical signs

- Unexpected burns or bruises, areas of superficial reddening of the skin consistent with slaps, injuries in various stages of healing or chronic injuries.
- Injuries in areas of the body inconsistent with falls, walking into doors or other explanations given.
- Injuries to the breast, chest and abdomen. Battered women are more likely to be injured in these areas and are common injuries during pregnancy.

- Injuries to face, head or neck.
- Evidence of sexual abuse, or frequent gynaecological problems in women.
- Frequent unexplained visits to the doctor – or explained with vague symptoms.
- Frequent use of pain medications.

## 6.2 Emotional signs

- Panic attacks / anxiety / depression.
- Exhibiting severe stress reactions.
- Emotional exhaustion, lack of emotional control.
- Impaired thinking.
- Decreased concentration / attention span.
- Eruptions of aggressiveness, anger out of context.
- Alcohol / drug misuse.
- Frequent use of minor tranquilisers

## 6.3 Behavioural signs

- Person may be frightened, evasive, ashamed or embarrassed.
- Startle response is elevated.
- Withdrawn and quiet due to feelings of isolation.
- Low self-esteem.

## 6.4 Other signs

- Unusual number of calls from home and strong reaction to these calls.
- Arriving at work late, needing to leave early.
- Secretive about home life.
- Partner may attempt to limit their work or social contacts.
- Partner may ridicule them in public.
- Partner exerts unusual amount of control over their life.

# 7 Ownership and Responsibilities

A person experiencing domestic violence and abuse is likely to raise the matter with the individual with whom they feel most comfortable. Having regard to this, line managers (supported by Occupational Health and/or HR as appropriate) will be satisfactorily equipped to respond positively and appropriately to such a disclosure.

It is therefore a requirement that line managers will:

- be available and approachable for those staff experiencing domestic violence and abuse
- listen, reassure and support individuals
- keep any information confidential (subject to the requirements of child and/or Adult protection)
- respond in a sensitive, non-judgemental manner
- ensure the staff member is aware of the options available to them
- encourage the staff member to seek the advice of other relevant agencies.

## 8 Training and awareness

Training will be provided by the Trust and should be included within sickness absence management training (at New Manager and Experienced Manager levels); training could include an e-learning module. Details of the training available will be published on STAR.

## 9 Perpetrators

Perpetrators are not just men abusing women or women abusing men; they could be a member of the family, a friend or a same sex partner, or an existing employee.

In order to protect an employee person subjected to domestic violence and abuse, where any perpetrator or alleged perpetrator attempts to enter Trust premises, staff are advised to follow the relevant security procedures according to the individual workplace.

If the alleged perpetrator is an employee of the Trust they should be aware that domestic violence and abuse is a serious matter that can lead to criminal charges.

It may be appropriate to refer to the following policies:

- Bullying & Harassment Policy
- Alcohol & Substance Misuse policy
- Lone workers Policy
- Grievance and Disciplinary Policies and Procedures

The perpetrator may disclose their behaviour to their line manager/HR.

Access will be facilitated to available support agencies

## 10 'Clare's Law'

'Domestic Violence Disclosure Scheme' (Clare's Law) gives members of the public a 'right to ask' Police where they have a concern that their partner may pose a risk to them or a member of their friends/family, noting this will only highlight perpetrators that have been convicted previously. Police will release information on a need to know basis, with safety of the partner/family as their prime concern.

## 11 References

### Legislation

The organisations' duty of care towards its staff is determined externally by;

- Health and Safety at Work Act (1974)
- Human Rights Act (1998)
- Data Protection Act (2018)
- Equality Act (2010)
- Health and Safety Executive (2004) Working Together to reduce Stress at Work: A guide for employees.
- Health and Safety Executive (2008) Management Standards for Work Related Stress [www.hse.gov.uk/stress/standards](http://www.hse.gov.uk/stress/standards)
- Children's Act - 2004
- Safeguarding Adults join group

Other standard the Trust is measured against includes:

- Care Quality Commission
- Health & Safety Executive
- Wellbeing at Work Strategy
- National Audits
- [Mindful Employer Charter Standards](#)
- [NHS Staff Council Domestic violence and abuse: supporting NHS staff](#)

**Women's Aid (England)** <https://www.womensaid.org.uk>

**The Samaritans** <https://www.samaritans.org>

**Victim Support** <https://www.victimsupport.org.uk>

**Refuge** <http://www.refuge.org.uk>

**Men's Advice Line** <http://www.mensadviceline.org.uk>

## 12 Monitoring, Audit and Review Procedures

This policy will be monitored and audited on a regular basis. A full review will take place every three years unless legislative changes determine otherwise.

Appendix 1: Equality Impact Assessment Screening Form			
<b>Title</b>	Domestic Violence and Abuse Policy		
<b>Author</b>	Linsey Clements, Head of Staff Health and Wellbeing and Engagement		
<b>Directorate</b>	Workforce & Organisational Development		
<b>Team/ Dept.</b>	HR Operations		
<b>Document Class</b>	<b>Document Status</b>	<b>Issue Date</b>	<b>Review Date</b>
Policy	Review	December 2018	December 2021

<b>1</b>	<p><b>What are the aims of the document?</b></p> <p>This policy applies to all employees and relates to providing advice and guidance on the management of domestic abuse and violence in relation to staff</p>			
<b>2</b>	<p><b>What are the objectives of the document?</b></p> <p>The policy provides guidance for both employees and their managers. The aim of this policy is to assist employees in relation to domestic abuse and violence according to circumstances.</p>			
<b>3</b>	<p><b>How will the document be implemented?</b></p> <p>Published on Bob Announced in Chief Executive Bulletin Included in Induction information Shared through HR learning events including sickness absence management training</p>			
<b>4</b>	<p><b>How will the effectiveness of the document be monitored?</b></p> <p>Monitoring compliance with this policy will be the responsibility of the HR Team. This will be undertaken by regular reviews at the HR Operations Team meetings policy agenda topic. Where non-compliance is identified, support and advice will be provided to improve practice.</p>			
<b>5</b>	<p><b>Who is the target audience of the document?</b></p> <p>All employees</p>			
<b>6</b>	<p><b>Is consultation required with stakeholders, e.g. Trust committees and equality groups?</b></p> <p>Yes</p>			
<b>7</b>	<p><b>Which stakeholders have been consulted with?</b></p> <ul style="list-style-type: none"> <li>• Equality and Diversity Manager</li> <li>• IDVA</li> <li>• Pay &amp; Review Sub-Group</li> <li>• Partnership Forum</li> </ul>			
<b>8</b>	<p><b>Equality Impact Assessment</b></p> <ul style="list-style-type: none"> <li>• Where you think that the policy could have a <b>positive</b> impact on any of the equality group(s) like promoting equality and equal opportunities or improving relations within equality groups, cross the 'Positive impact' box.</li> <li>• Where you think that the policy could have a <b>negative</b> impact on any of the equality group(s) i.e. it could disadvantage them, cross the 'Negative impact' box.</li> <li>• Where you think that the policy has <b>no impact</b> on any of the equality group(s) listed below i.e. it has no effect currently on equality groups, cross the 'No impact' box.</li> </ul>			
Equality Group	Positive Impact	Negative Impact	No Impact	Comments
<b>Age</b>			√	
<b>Disability</b>			√	
<b>Gender</b>	√			

<b>Gender reassignment</b>			√	
<b>Human Rights</b> (rights to privacy, dignity, liberty and non-degrading treatment)	√			
<b>Marriage and civil partnership</b>			√	
<b>Pregnancy, maternity and breastfeeding</b>			√	
<b>Race / Ethnic Origins</b>			√	
<b>Religion or Belief</b>			√	
<b>Sexual Orientation</b>			√	

**Completed by:**

<b>Name</b>	Linsey Clements
<b>Designation</b>	Head of Staff Health and Wellbeing and Engagement
<b>Trust</b>	Northern Devon Healthcare NHS Trust
<b>Date</b>	11.12.18