**Equality Impact Assessment - Preliminary Assessment Form**

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| *Title of the strategy, policy, service, or project:* | | Disability Leave Policy |
| *Service Area:* | All | |
| *Lead Officer:* | David Clamp, Human Resources Manager | |
| *Date of assessment:* | 01/24 |
| *Is the strategy, policy, service (procedure) or project:* | | Policy |
| *Changed* | X |
| *New* | 🞎 |

**Section 1 – Clear aims and objectives**

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| 1. What is the aim of the strategy, policy, procedure, or project? |
| The Disability Leave Policy will ensure that employees who have need to take regular time away from work for ongoing treatment or other appointments because of a disability receive fair and consistent treatment under the Attendance Management Procedure. It also enables the Council to demonstrate a positive commitment towards the Public Sector Equality Duty. |

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| 1. Who is intended to benefit from the strategy, policy, procedure, or project and how? |
| The Disability Leave Policy will ensure that employees who have need to take regular time away from work for ongoing treatment or other appointments because of a disability receive fair and consistent treatment under the Attendance Management Procedure. |

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| 1. What outcomes do you want to achieve? |
| Disability leave is to enable paid time away from work for pre-planned appointments or treatments, related to an employee’s disability, that supports their health and wellbeing. It is not for use when an employee is not well enough to attend work for unrelated reasons. Disability leave is a form of reasonable adjustment in line with the requirements of the Equality Act 2010. Disability leave can cover a range of disability related appointments. Examples of when leave may be appropriate are outlined below. This is not an exhaustive list and requests will be considered on a case-by-case basis:   * Treatment related to an employee’s disability * Hearing aid tests * Training with a guide or hearing dog * Counselling/therapeutic treatment * Physiotherapy * Assessment for neurodiverse conditions such as dyslexia, dyspraxia etc * Dialysis treatment fitted, serviced and/or repaired * Blood tests for diabetes * Related complementary medicine practitioners’ appointments * Maintenance chemotherapy treatments and recovery time (where the employee is well enough to work but is signed off for short periods to avoid infection) |

**Section 2 – What is the impact?**

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| 1. **Summary of anticipated impacts.** *Please tick at least one option per protected characteristic. Think about barriers people may experience in accessing services, how the policy is likely to affect the promotion of equality, knowledge of customer experiences to date. You may need to think about sub-groups within categories e.g. older people, younger people, people with hearing impairment etc****. Hyperlinks to supporting information about the protected characteristics listed below can be found*** [***here.***](file:///C:\Users\abduls\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\41SH62EE\Definitions%20to%20support%20the%20Equality%20Impact%20Assessment%20Forms.docx) | | | |
|  | **Potentially positive impact** | **Potentially negative impact** | **No disproportionate impact** |
| Age | 🞎 | 🞎 | X |
| Disability and long-term conditions | X | 🞎 | 🞎 |
| Gender reassignment | 🞎 | 🞎 | X |
| Marriage or civil partnership | 🞎 | 🞎 | X |
| Pregnant women and people on parental leave | 🞎 | 🞎 | X |
| Sexual orientation | 🞎 | 🞎 | X |
| Race | 🞎 | 🞎 | X |
| Religion or belief | 🞎 | 🞎 | X |
| Sex (Gender) | 🞎 | **🞎** | X |

**Section 3 – Recommendations and monitoring**

If you have answered that the strategy, policy, procedure, or project could potentially have a negative impact on any of the above characteristics then a full Equality Impact Assessment will be required.

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| 1. **Should a full EIA be completed for this strategy, policy, procedure, or project?** | | |
| 🞎 *Yes* | X *No* |  |
| This Policy will have a direct positive impact on current and future employees that have a recognised disability as defined by the Equality Act 2010. This will enable them to have paid time of from work to attend consultations or any ongoing appointments/treatments linked to their disability. | | |

**Section 4 – Approval**

Please note the assessment should be reviewed and approved by the appropriate Head of Service **before** the Committee report (if required) is produced.

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| Reviewed by Head of Service | Name: |  |
| Date: |  |

If further information regarding this assessment is required, please contact the Lead Officer for this assessment (outlined in Section 1.)