

## Equality & Health Impact Assessment for *Annual Leave and Bank Holiday Policy*

### Part 1

Please answer all questions:-

1.	For service change, provide the title of the Project Outline Document or Business Case and Reference Number	n/a Annual Leave and Bank Holiday Policy
2.	Name of Clinical Board / Corporate Directorate and title of lead member of staff, including contact details	Public Health Wales Policy People and OD Directorate Lead: Ruth Tofton, Senior People and OD Advisor  Paula.lewis3@wales.nhs.uk
3.	Objectives of strategy/ policy/ plan/ procedure/ service	<p>The Annual Leave and Bank Holiday policy sets out the responsibilities of Public Health Wales in respect of annual leave and bank holiday entitlements and the method of calculation.</p> <p>The policy also sets out the employee's responsibility:</p> <ul style="list-style-type: none"> <li>• To manage their annual leave entitlement</li> <li>• To ensure that it is planned and taken at regular intervals throughout the leave year: and</li> <li>• That it is requested via the agreed procedure.</li> </ul> <p>It also describes the manager's responsibility to calculate an employee's annual leave entitlement accurately; and to ensure that the leave entitlement is taken in a timely manner. The aim is to avoid unnecessary accruals or deficits, which may result in a</p>

		<p>breach of the Working Time Regulations, NHS Terms and Conditions of Service and/or this policy.</p> <p>The Policy also outlines the benefits of the Annual Leave Purchase Scheme and the process for employees to follow.</p>																										
<p><b>4.</b></p>	<p>Evidence and background information considered. For example</p> <ul style="list-style-type: none"> <li>• population data</li> <li>• staff and service users data, as applicable</li> <li>• needs assessment</li> <li>• engagement and involvement findings</li> <li>• research</li> <li>• good practice guidelines</li> <li>• participant knowledge</li> <li>• list of stakeholders and how stakeholders have engaged in the development stages</li> <li>• comments from those involved in the designing and development stages</li> </ul> <p>Population pyramids are available from Public Health Wales Observatory and the 'Shaping Our Future Wellbeing' Strategy provides an overview of health need.</p>	<p><b>Staff Data</b> (All data has been taken from the ESR records as at 31 March 2025)</p> <p><b>Age Profile</b></p> <table border="0"> <thead> <tr> <th>Age</th> <th>%</th> </tr> </thead> <tbody> <tr> <td>&lt;20</td> <td>0.18%</td> </tr> <tr> <td>20-25</td> <td>4.28%</td> </tr> <tr> <td>26-30</td> <td>13.60%</td> </tr> <tr> <td>31-35</td> <td>13.38%</td> </tr> <tr> <td>36-40</td> <td>13.75%</td> </tr> <tr> <td>41-45</td> <td>14.82%</td> </tr> <tr> <td>46-50</td> <td>11.39%</td> </tr> <tr> <td>51-55</td> <td>11.98%</td> </tr> <tr> <td>56-60</td> <td></td> </tr> <tr> <td>61-65</td> <td>4.39%</td> </tr> <tr> <td>66-70</td> <td>1.22%</td> </tr> <tr> <td></td> <td>10.65%</td> </tr> </tbody> </table> <p><b>Disability</b> 8% of our staff have indicated that they have a disability, but this information is not known for 11% of staff.</p>	Age	%	<20	0.18%	20-25	4.28%	26-30	13.60%	31-35	13.38%	36-40	13.75%	41-45	14.82%	46-50	11.39%	51-55	11.98%	56-60		61-65	4.39%	66-70	1.22%		10.65%
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**Gender**

The gender breakdown of the organisation is approximately 73% female and 27% male.

The gender breakdown of part time workers is approximately 89% female and 11% male.

**Marital Status**

Marital status	%
Civil Partnership	1.44%
Divorced	5.38%
Legally Separated	0.41%
Married	50.50%
Single	33.80%
Unknown	7.56%
Widowed	0.92%
Grand Total	100.00%

**Ethnicity**

81% are White, 5% are Asian, 3% are Black and 12% fall into another ethnicity category (including mixed).

**Religious Belief**

Belief	%
Atheism	27%
Buddhism	0%
Christianity	35%
Hinduism	1%
Islam	2%
Not Disclosed	14%
Other	11%
Sikhism	0%

Unspecified 9%

### **Sexuality**

86% of our staff have disclosed this information; 80.6% indicated they are heterosexual, 3.24% gay or lesbian, 2.17% bisexual, 0.15% other sexual orientation not listed and 0.2% undecided.

We currently do not collect information regarding gender re-assignment or socio-economic status. However, we do know the income profile of our staff, which is as follows:

Pay Band	Grand Total
Band 2	0.22%
Band 3	12.24%
Band 4	15.37%
Band 5	14.93%
Band 6	13.49%
Band 7	16.70%
Band 8 - Range A	9.47%
Band 8 - Range B	4.57%
Band 8 - Range C	3.80%
Band 8 - Range D	2.06%
Band 9	2.03%
Other	5.12%
Grand Total	100.00%

### **Research and Good Practice**

A range of other organisational policies and EqHIAs have been reviewed to look at good practice and to review the impact that annual leave may have on particular groups of people.

Policy Workshops have taken place with staff and Trades Union partners for their input to the revised Policy.

<b>5.</b>	Who will be affected by the strategy/ policy/ plan/ procedure/ service  Consider staff as well as the population that the project/change may affect to different degrees.	All Agenda for Change employees at Public Health Wales.

## Part 2- Equality and Welsh language

### 6. EQIA / How will the strategy, policy, plan, procedure and/or service impact on people?

Questions in this section relate to the impact on people on the basis of their 'protected characteristics'.

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps</b>	<b>Action taken by Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate <b>This column is to be updated in future reviews</b>	<b>Recommendations for improvement/ mitigation/ identified gaps or opportunities</b>
<b>6.1 Age</b> For most purposes, the main categories are: <ul style="list-style-type: none"> <li>• under 18;</li> <li>• between 18 and 65; and</li> <li>• over 65</li> </ul>	<p>The policy applies to all AfC staff, regardless of age.</p> <p>There is no evidence to suggest the policy has a disproportionate impact on people in relation to their age.</p> <p>The policy is designed to prevent any indirect discrimination by setting out the processes that should be followed.</p>		

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps</b>	<b>Action taken by Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate <b>This column is to be updated in future reviews</b>	<b>Recommendations for improvement/ mitigation/ identified gaps or opportunities</b>
<b>6.2 Persons with a disability as defined in the Equality Act 2010</b> Those with physical impairments, learning disability, sensory loss or impairment, mental health conditions, long-term medical conditions such as diabetes	The policy applies to all AfC staff, regardless of disability.  There is no evidence to suggest the policy has a disproportionate impact on people in relation to disability.		
<b>6.3 People of different genders:</b> Consider men, women, people undergoing gender reassignment  <b>NB</b> Gender-reassignment is anyone who proposes to, starts, is going through or who has completed a process to change his or her gender with or without	The policy applies to all AfC staff, regardless of gender.  There is no evidence to suggest the policy has a disproportionate impact on people in relation to gender.		

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps</b>	<b>Action taken by Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate <b>This column is to be updated in future reviews</b>	<b>Recommendations for improvement/ mitigation/ identified gaps or opportunities</b>
going through any medical procedures. Sometimes referred to as Trans or Transgender			
<b>6.4 People who are married or who have a civil partner.</b>	<p>The policy applies to all AfC staff, regardless of marriage or civil partnership.</p> <p>There is no evidence to suggest the policy has a disproportionate impact on people in relation to marriage or civil partnership.</p>		
<b>6.5 Women who are expecting a baby, who are on a break from work after having a baby, or who are breastfeeding.</b>	<p>The policy sets out the entitlement for employees to accrue public holidays that fall during their maternity leave.</p>		

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps</b>	<b>Action taken by Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate <b>This column is to be updated in future reviews</b>	<b>Recommendations for improvement/ mitigation/ identified gaps or opportunities</b>
	There is no evidence to suggest the policy has a disproportionate impact on those expecting a baby, who are on a break from work after having a baby, or who are breastfeeding.		
<b>6.6 People of a different race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies/travellers, migrant workers</b>	The policy applies to all AfC staff, regardless of race, nationality, culture, etc.  There is no evidence to suggest the policy has a disproportionate impact on people in relation to race, nationality, culture or ethnic origin.		
<b>6.7 People with a religion or belief or with no religion or belief.</b>	The policy applies to all AfC staff, regardless of belief.		

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps</b>	<b>Action taken by Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate <b>This column is to be updated in future reviews</b>	<b>Recommendations for improvement/ mitigation/ identified gaps or opportunities</b>
The term 'religion' includes a religious or philosophical belief	There is no evidence to suggest the policy has a disproportionate impact on people in relation to belief of lack of belief.		
<b>6.8 People who are attracted to other people of:</b> <ul style="list-style-type: none"> <li>• the opposite sex (heterosexual);</li> <li>• the same sex (lesbian or gay);</li> <li>• both sexes (bisexual)</li> </ul>	The policy applies to all AfC staff, regardless of sexual orientation.  There is no evidence to suggest the policy has a disproportionate impact on people in relation to sexual orientation.		
<b>6.9 People according to their income related group:</b> Consider people on low income, economically inactive, unemployed/workless, people who are unable to work due to ill-health	The policy applies to all AfC staff, regardless of level of income.  The policy links to the Managing Attendance at Work (all Wales) Policy in relation to sickness		

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps</b>	<b>Action taken by Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate <b>This column is to be updated in future reviews</b>	<b>Recommendations for improvement/ mitigation/ identified gaps or opportunities</b>
	occurring during annual leave.		
<b>6.10 People according to where they live:</b> Consider people living in areas known to exhibit poor economic and/or health indicators, people unable to access services and facilities	There is no evidence to suggest the policy has a disproportionate impact on people according to where they live.		
<b>6.11 Consider any other groups and risk factors relevant to this strategy, policy, plan, procedure and/or service</b>	There is no evidence to suggest the policy has a disproportionate impact on any other groups.		
<b>6.12 Welsh Language</b>			
<b>There are 2 key considerations to be made during the development of a policy, project, programme, service to ensure there are no adverse effects and/or a positive or increased positive effect on:</b> (please note these will continue to be reviewed to ensure Public Health Wales fulfils their duties to comply with one or more standards outlined within the Welsh Language Standards (No 7) Regulations 2018)			

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps</b>	<b>Action taken by Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate <b>This column is to be updated in future reviews</b>	<b>Recommendations for improvement/ mitigation/ identified gaps or opportunities</b>
<b>Opportunities for persons to use the Welsh language</b>	The Policy and Procedure will be translated and available to staff equally in Welsh and English.		
<b>Treating the Welsh language no less favourably than the English language</b>	The Policy and Procedure will be translated and available to staff equally in Welsh and English.		

### **Part 3 – Health**

Questions in this section relate to the impact on the health and wellbeing outcomes of the population **and** specific population groups who could be more impacted than others by a policy/project/proposal.

The part of the assessment identifies;

- which specific groups in the population could be impacted more (inequalities)
- what those potential impacts could be across the wider determinants of health framework?
- Potential gaps, opportunities to maximise positive H&WB outcomes
- Recommendations/mitigation to be considered by the decision makers

#### **7. Identification of specific population groups**

Use the WHIASU Population Groups checklist as a reference to identify the population groups who could be more impacted than others by a policy/project/proposal. The check list can be found on the PHW Integrated EqHIA guidance pages (requires link to PHW Intranet pages for additional information and resources)

The groups listed have been identified as more susceptible to poorer health and wellbeing outcomes (health inequalities) and therefore it is important to consider them in a HIA assessment. In a HIA, the groups identified, as more sensitive to potential impacts will depend on the characteristics of the local population, the context, and the nature of the proposal itself.

7.1 Groups identified	Rational/explanation

**Assessment**

Complete the wider determinants framework table below providing rational/evidence where appropriate:

1. Consider how the proposal could impact on the population and specific population groups identified above (positive/negative) for each of the wider determinants (the bullets under each determinant are there as a guide)
2. Record any unintended consequences (negative impacts) and/or gaps identified
3. Record any positive impacts or missed opportunities to maximise positive health and wellbeing outcomes
4. identify and record mitigation/recommendations where appropriate

**Please note** you may find that not all determinants are relevant to the project/plan however recording N/A is not acceptable a rational or evidence should be explained/referenced

Wider determinant for consideration	Positive impacts or additional opportunities	Unintended consequences or gaps	Population groups affected	Mitigation/recommendations
<b>7.2 Lifestyles</b> <ul style="list-style-type: none"> <li>• Diet/nutrition/breastfeeding</li> <li>• Physical activity</li> </ul>	n/a			

<ul style="list-style-type: none"> <li>• Use of alcohol, cigarettes, e-cigarettes</li> <li>• Use of substances, non-prescribed drugs, abuse of prescription medication</li> <li>• Social media use</li> <li>• Sexual activity</li> <li>• Risk-taking activity i.e. gambling, addictive behaviour</li> </ul>				
<p><b>7.3 Social and community influences on health</b></p> <ul style="list-style-type: none"> <li>• Adverse childhood experiences</li> <li>• Citizen power and influence</li> <li>• Community cohesion, identity, local pride</li> <li>• Community resilience</li> <li>• Domestic violence</li> <li>• Family relationships</li> <li>• Language, cultural and spirituality</li> <li>• Neighbourliness</li> <li>• Social exclusion i.e. homelessness</li> <li>• Parenting and infant attachment</li> <li>• Peer pressure</li> <li>• Racism</li> <li>• Sense of belonging</li> <li>• Social isolation/loneliness</li> <li>• Social capital/support/networks</li> <li>• Third sector &amp; volunteering</li> </ul>	n/a			
<p><b>7.4 Mental Wellbeing</b></p> <ul style="list-style-type: none"> <li>• Does this proposal support sense of control?</li> <li>• Does it enable participation in community and economic life?</li> <li>• Does it impact on emotional wellbeing and resilience?</li> </ul>	<p>The policy recognises that the effective and appropriate management of annual leave is an essential requirement of employees, to ensure that they fulfil their duty of care to protect their health, safety and wellbeing.</p>			

<p><b>7.5 Living/ environmental conditions affecting health</b></p> <ul style="list-style-type: none"> <li>• Air quality</li> <li>• Attractiveness/access/availability/quality of area, green and blue space, natural space.</li> <li>• Health &amp; safety, community, individual, public/private space</li> <li>• Housing, quality/tenure/indoor environment</li> <li>• Light/noise/odours, pollution</li> <li>• Quality &amp; safety of play areas (formal/informal)</li> <li>• Road safety</li> <li>• Urban/rural built &amp; natural environment</li> <li>• Waste and recycling</li> <li>• Water quality</li> </ul>	n/a			
<p><b>7.6 Economic conditions affecting health</b></p> <ul style="list-style-type: none"> <li>• Unemployment</li> <li>• Income, poverty (incl. food and fuel)</li> <li>• Economic inactivity</li> <li>• Personal and household debt</li> <li>• Type of employment i.e. permanent/temp, full/part time</li> <li>• Workplace conditions i.e. environment culture, H&amp;S</li> </ul>	n/a			
<p><b>7.7 Access and quality of services</b></p> <ul style="list-style-type: none"> <li>• Careers advice</li> <li>• Education and training</li> <li>• Information technology, internet access, digital services</li> <li>• Leisure services</li> <li>• Medical and health services</li> <li>• Other caring services i.e. social care; Third Sector, youth services, child care</li> <li>• Public amenities i.e. village halls, libraries, community hub</li> <li>• Shops and commercial services</li> </ul>	n/a			

Transport including parking, public transport, active travel				
<b>7.8 Macro-economic, environmental and sustainability factors</b> <ul style="list-style-type: none"> <li>• Biodiversity</li> <li>• Climate change/carbon reduction/flooding/heatwave</li> <li>• Cost of living i.e. food, rent, transport and house prices</li> <li>• Economic development including trade</li> <li>• Government policies i.e. Sustainable Development principle (integration; collaboration; involvement; long term thinking; and prevention)</li> <li>• Gross Domestic Product</li> <li>• Regeneration</li> </ul>	n/a			

**Stage 3**

**Summary of key findings and actions Please answer question 8.1 following the completion of the EHIA and complete the action plan**

Key findings: Impacts/gaps/opportunities	Actions (what is needed and who needs to do) to address the identified mitigation and recommendations	Lead		
	No further action is recommended at this time.			

**Alternatively, if appropriate, please explain the steps taken to consult with and consider the differential impact of the changes on the various protected characteristic groups (part 2) or any specific identified population groups (part 3).**

The supporting Family Leave pack on the intranet provides additional detail for employees and managers about the importance of flexibility and understanding, to ensure that staff feel able to balance the needs of their work and their new family. It also provides advice and support around matters of pay, to enable employees to better plan for their financial situation when they are on leave. This has been developed following feedback from Staff Diversity Networks and Trades Unions Partners and is provided in a format designed to be accessible and easy to understand, to supplement the policy and procedure documents.