

# **NHS Scotland Agenda for Change (AfC) Pay Deal for 2018-21**

## **Equality Impact Assessment Record**

January 2020

## EQUALITY IMPACT ASSESSMENT RECORD

<b>Title of policy/ practice/ strategy/ legislation etc.</b>	NHS Scotland Agenda for Change (AfC) Pay Deal for 2018-21	
<b>Minister</b>	Cabinet Secretary for Health and Sport, Jeane Freeman MSP	
<b>Lead official</b>	Michelle Campbell, Head of NHS Pay and Strategy	
<b>Officials involved in the EQIA</b>	<b>Name</b>	<b>Team</b>
	Colin Cowie	NHS Pay, Terms and Conditions
	Dave Sorensen	Health and Social Care Analysis
	Anna Feintuck	Workforce Planning
<b>Directorate: Division: Team</b>	Health Workforce, Leadership and Service Reform: Health Workforce: NHS Pay, Terms and Conditions	
<b>Is this new policy or revision to an existing policy?</b>	New pay deal for AfC staff in NHS Scotland from 1 April 2018 to 31 March 2021.	

### Screening

#### *Policy Aim*

This policy aims to deliver pay uplifts and restructuring of pay bands in return for a discussion on reform to four agreed key areas of terms and conditions from 2018-21 for Agenda for Change (AfC) staff in NHS Scotland.

The agreed four areas of reform are:

- Policy on the management of sickness absence
- Organisational change and protection of earnings
- Utilisation and application of Time Off in Lieu (TOIL)
- Appraisal and incremental progression.

A consultative ballot with union members took place between 2 July and 15 August 2018 following agreement to accept the deal by all parties at the Scottish Terms and Conditions (STAC) meeting on 22 June 2018. The pay deal was formally accepted at a further STAC meeting on 17 August 2018 and pay uplifts have been backdated to 1 April 2018.

Four sub-groups were established to discuss the areas of reform and delivered agreed outcomes for consideration at the STAC meeting on 3 December 2018. Agreed revised guidance impacting on sickness absence, organisational change and protection of earnings and utilisation and application of TOIL has been in place from 1 April 2019. The last area of reform, appraisal and incremental progression requires changes to be made to the Turas platform operated by NES, and revised guidance is anticipated to be in place from 1 April 2020. This means that the introduction of a robust appraisal system will not be realised until the last year of the Pay Deal, at the very earliest.

For staff at top of their pay scale earning up to £80,000, the deal means a 9% pay rise over 3 years. Staff not yet at the top of their band could receive considerably more – up to 27.7% over the 3 years. For those earning over £80,000 it means a £1,600 uplift per year. The deal also means no NHS Scotland AfC staff member will be making less than their NHS England equivalent and most will be making more.

#### Contributions to National Outcomes

- **We live longer, healthier lives:** AfC staff play vital roles in delivering the high quality healthcare that the Scottish population needs and deserves. The agreed 3 year pay deal will contribute to the recruitment and retention of this workforce and the productivity and efficiency of our health service.
- **Our public services are high quality, continually improving, efficient and responsive to local people's needs:** reformed pay, terms and conditions contributes to the improvement and development of NHS Scotland as a crucial public service.
- **We realise our full economic potential with more and better employment opportunities for our people:** the AfC 3 year pay deal improves pay, terms and conditions, offering better employment opportunities within NHS Scotland.

#### ***Who will it affect?***

Agenda for Change (AfC) is the current grading and pay system for NHS staff, with the exception of doctors, dentists, executives and senior managers. In Scotland, it covers 150,000 staff and harmonises pay scales and career progression arrangements across traditionally separate pay groups. AfC came into operation on 1 December 2004, following agreement between NHS Staff Side, NHS Employers and the Scottish Government.

The AfC system allocates posts to set pay bands by giving consideration to aspects of the job, such as the skills involved, under an NHS Job Evaluation Scheme. There are nine numbered pay bands sub-divided into points, and a set of national job profiles is agreed to assist in the process of matching posts to pay bands.

## ***What might prevent the desired outcomes being achieved?***

The agreed AfC 3 year pay deal for 2018-21 per se will not prevent the desired outcomes being achieved. NHS Scotland AfC staff are entitled to an appropriate pay uplift based on their grade and pay band as negotiated by NHS Staff Side, NHS Employers and the Scottish Government.

There are inherent differentials in the makeup of the workforce of NHS Scotland: for example, whilst there are more female staff working in NHS Scotland, the proportion of female staff in more senior positions is lower than the overall average.<sup>1</sup> This is a broader structural issue and not an effect of the AfC deal. However, the new pay structure does enable staff in AfC Bands 2-7 – in which the gender balance is more heavily female – to access the top of their pay band faster than under the previous scheme.

The changes to terms and conditions that were recommended by the sub-groups and endorsed by STAC at the meeting on 3 December 2018 will be applied consistently and fairly across all AfC staff and will not prevent any desired outcomes from being achieved.

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<sup>1</sup> For example, data provided by ISD shows that as at March 2018, 86.1% of staff at Band 5 are female, compared to 73.6% at Band 8 or 9. Across all Bands, 79.3% of AfC staff are female, meaning women are under-represented at higher bands.

## **Stage 1: Framing**

### ***Results of framing exercise***

Direct negotiations with Staff Side commenced in May 2018, following the announcement of the Department of Health NHS England AfC Pay Deal from 2018-2021 on 19 March 2018. Discussions were informed by the requirement to ensure that NHS Scotland staff continued to be paid at least as well as their NHS England counterparts and the Unions wished to address both staff at the top of the pay band and those who had not yet reached their band maxima. A 9% increase for those at the top of the band was agreed, whilst incremental progression was maintained and pay journeys were shortened.

This AfC pay deal for 2018-21 cost around £70 million more than the available budget which had been costed by the intention to apply Public Sector Pay Policy for 2018-19 over the 3 years and the Barnett consequentials received from the UK Government. In return, discussion on reform to 4 areas of terms and conditions was secured to improve recruitment and retentions and secure improvements in productivity for our health service.

### ***Extent/Level of EQIA required***

The AfC 3 year pay deal for 2018-21 will have limited impact on each of the protected characteristics. The following assessment is therefore a short review of the available evidence and the likely effects of this policy.

## **Stage 2: Data and evidence gathering, involvement and consultation**

Official statistics for the NHS Scotland workforce are provided by Information Services Division (ISD).<sup>2</sup> This published data includes non-AfC staff (e.g. medical staff). We therefore requested additional information from ISD for AfC staff only, which now dates from one year before the latest official statistics. It is not therefore directly comparable.

Equality and diversity information for NHS staff is based on self-reporting. It is usually captured via staff engagement forms when people join or change boards within NHS Scotland, or via the e:you questionnaire exercise undertaken for all NHS Scotland staff in post. Completion of the questionnaire exercise is optional and response rates vary across the country.

### **Age**

As at March 2019, the median age of all NHS Scotland staff (by a whole-time equivalent, or WTE, measure) is 46. The modal age group (16.6% of the total) is 50-54 years. 36.7% of all staff are under 40, 38.9% of all staff are over 50, and 8.5% of all staff are over 60. The modal age group largely reflects the age distribution of the Scottish population, where there are two modal peaks around ages 25 and 50-55.<sup>3</sup>

The data for AfC-only shows that (by headcount) in Bands 3, 4, 6, 7 and 8, the modal age group is 50-54. Band 5, however, shows a different age structure, where staff are more evenly distributed across the age groups, and the modal age group is 25-29 (15% of the

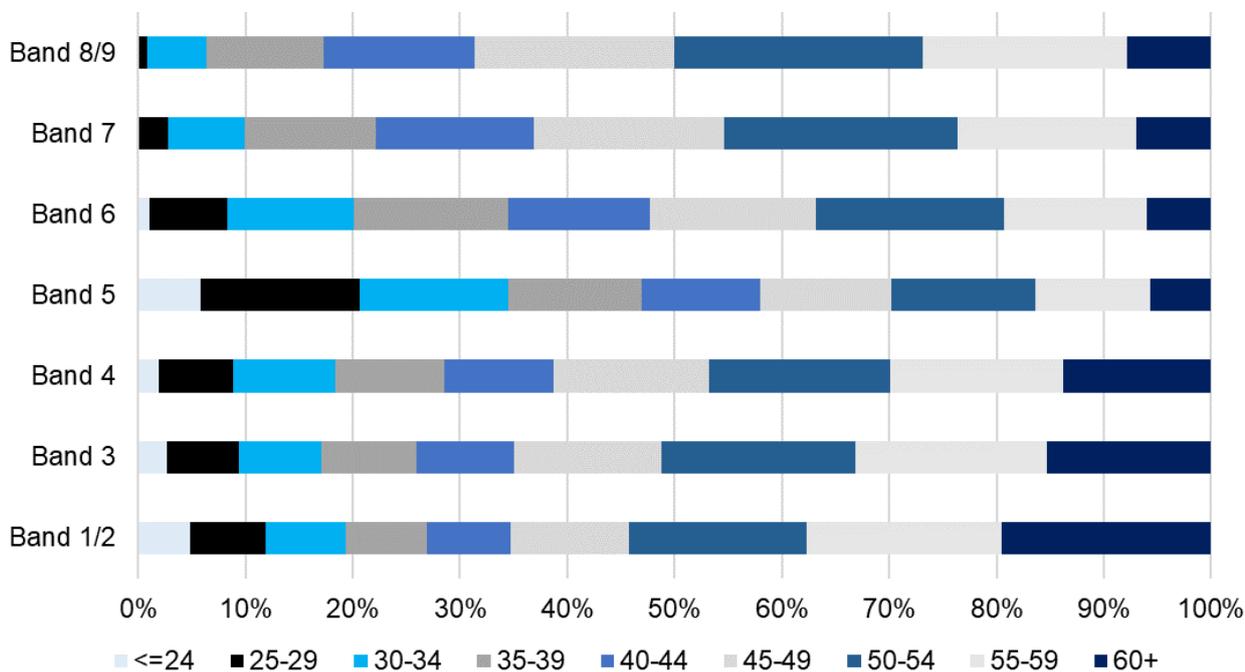
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<sup>2</sup> NHS Workforce data as at March 2019, published 4 June 2019: <https://www.isdscotland.org/Health-Topics/Workforce/Publications/2019-09-03/visualisation.asp>

<sup>3</sup> National Records of Scotland – Scotland's Population 2018: <https://www.nrscotland.gov.uk/files//statistics/nrs-visual/rgar-2018/rgar-2018-infographic-booklet.pdf>

total) – this is likely to be due to the large numbers of staff nurses in this Band [Figure 1], including those who have recently qualified.

**Figure 1: Age breakdown of AfC bands (as percentage of total)**



Source: Scottish Workforce Information Standard System (SWISS), ISD Scotland

Disability

Disability is self-reported in the statistics and only around half of NHS Scotland staff have declared whether or not they have a disability. As at March 2019, ISD official statistics show that 0.8% of staff working in NHS Scotland declared a disability.<sup>4</sup> This figure includes those staff who have not declared a disability status.

The AfC-only data shows that 1.6% of staff *who provided their disability status* declared that they had a disability. Breaking this down by band shows that declared disability is higher at Bands 3 (2.4%), 8A and 8B (each 2.1%) and lower at Band 2 (1.2%).

Compared to the Scottish population as a whole, these figures appear to be low. In the 2011 Census, one in five of Scotland’s population reported that their day to day activities were limited by a long-term health problem or disability; 355,000 people (7% of the population) declared a physical disability.<sup>5</sup>

The figures for NHS staff should therefore be treated with caution. There is no legal obligation for an employee to disclose a disability, and under-reporting is likely for a variety of reasons. Across Britain, for example, the *Fair Treatment at Work Survey* (2008) showed 19% of disabled people experienced unfair treatment at work compared to 13% of non-disabled people.<sup>6</sup> This may relate to people’s willingness to declare a disability.

<sup>4</sup> NHS Scotland Workforce Information - Equality and Diversity (March 2019): <https://www.isdscotland.org/Health-Topics/Workforce/Publications/data-tables2017.asp?id=2424#2424>

<sup>5</sup> Scotland’s Census (2011) – Health: <https://www.scotlandscensus.gov.uk/health>

<sup>6</sup> Fair Treatment at Work Report – findings from the 2008 survey: <https://www.gov.uk/government/publications/fair-treatment-at-work-report-findings-from-the-2008-survey>

## Sex

As at March 2019, ISD official statistics show that 77.4% (WTE) and 79.3% (headcount) of all NHS Scotland staff are female<sup>7</sup>, including non-AfC staff. The figure is larger by headcount because a greater proportion of women work part-time.

The AfC-only data shows that there is a higher proportion of women within AfC grades than NHS Scotland as a whole (82.1%, by headcount). Breaking this down by band shows that the proportion of women is higher at Band 4 and 5 (at 86% each) and lower at Band 8 and 9 (at 74% and 50% respectively).

## Pregnancy and maternity

Whilst official statistics are available on sex (as above) and the prevalence of part/full-time working patterns, it is not possible to extrapolate from this to acquire robust evidence on pregnancy and maternity.<sup>8</sup>

## Gender reassignment

Although official statistics on the percentage of NHS staff with a declared transgender status are published, the value at Scotland level, to 1 decimal place, rounds to zero. This includes staff whose transgender status is unknown – over half of the total.

The AfC-only data shows that 0.08% of staff *who provided their transgender status* declared themselves to be transgender.

Equivalent data is not available for the Scottish population. However, this data gap is acknowledged and will be addressed: from 2021 the Census will include (voluntary) questions on transgender status and sexual orientation.<sup>9</sup>

The UK Government's Equalities Office 'tentatively estimates' there are 200,000-500,000 transgender people living in the UK (as at 2018).<sup>10</sup> With a mid-2018 population estimate of 66,435,600 for the whole of the UK, this would mean 0.3-0.7% of the UK population are transgender.<sup>11</sup>

The figure of 0.08% for AfC staff in Scotland is comparatively low, but it remains unclear from the available data whether staff under-report on gender reassignment, or whether staff who have undergone gender reassignment are under-represented in the workforce. This is partly a data collection issue.

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<sup>7</sup> NHS Scotland Workforce as at March 2019 (published June 2019) – Key Points:

<https://www.isdscotland.org/Health-Topics/Workforce/Publications/2019-06-04/Overall.asp>

<sup>8</sup> NHS Scotland Workforce as at March 2019 (published June 2019) – Gender and Contract Type:

<https://www.isdscotland.org/Health-Topics/Workforce/Publications/2019-06-04/Overall.asp>

<sup>9</sup> National Records of Scotland – 'Census (Amendment) (Scotland) Bill Passed':

<https://www.nrscotland.gov.uk/news/2019/census-amendment-scotland-bill-passed>

<sup>10</sup> Government Equalities Office – Trans People in the UK:

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/721642/EO-LGBT-factsheet.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/721642/EO-LGBT-factsheet.pdf)

<sup>11</sup> Office for National Statistics – Population Estimates:

<https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates>

## Sexual orientation

As at March 2019, ISD official statistics show that 1.8% of staff working in NHS Scotland declared their sexual orientation as gay, lesbian, bisexual or other.<sup>12</sup> This includes staff whose sexual orientation status is unknown – almost half of the total.

The AfC-only data shows that 44.1% of AfC staff (headcount) did not answer or chose not to disclose. 1.5% declared themselves gay, lesbian, bisexual or other.

The Scottish Surveys Core Questions (2017) estimates 3% of the Scottish population are LGBT, though notes that these figures are likely to be low due to under-reporting.<sup>13</sup> Corroborating this, a survey by the charity Stonewall (2018) shows that, across the UK, 35% of LGBT adults declared they have hidden their sexual orientation at work due to fears of discrimination.<sup>14</sup>

More broadly, there is minimal consensus about the demographics of sexual orientation. The ONS figure (2017) across the UK is 2%.<sup>15</sup> The charity Stonewall argue that this is low, as people are reluctant to disclose their sexuality. Although the question relates to same-sex experiences rather than sexual orientation, it is notable that the UK's *National Survey of Sexual Attitudes and Lifestyles* (2010-12) gives much higher figures, showing 7% of men and 16% of women reported having had 'any same-sex experience'.<sup>16</sup>

Taking these points into account, the figure of 1.5% noted above may be low. This is partly a data collection issue. As discussed, from 2021 the Census will include (voluntary) questions on sexual orientation.<sup>17</sup>

## Race and ethnic group

As at March 2019, ISD official statistics show that 3.3% of staff working in NHS Scotland were from a non-white ethnic group.<sup>18</sup> This includes staff whose ethnic group is unknown – almost one-third of the total.

The AfC-only data shows that 97.1% of staff *who provided their ethnic group* were white. Of the remaining 2.9%, or 3,124 respondents: 1,859 were Asian; 545 were African; 389 were of mixed or multiple ethnicities; 224 were of an ethnicity not listed ('other'), and 107 were Caribbean or Black.

Breaking this down by AfC band indicates that non-white groups are under-represented at Bands 3, 6 and 7 (at 2.1%, 2.4% and 2.1% respectively).

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<sup>12</sup> NHS Scotland Workforce Information - Equality and Diversity (March 2019): <https://www.isdscotland.org/Health-Topics/Workforce/Publications/data-tables2017.asp?id=2424#2424>

<sup>13</sup> Scottish Surveys Core Questions: <https://www.gov.scot/publications/scottish-surveys-core-questions-2017/pages/5/>

<sup>14</sup> Stonewall, *LGBT in Britain – Work Report*: <https://www.stonewall.org.uk/lgbt-britain-work-report>

<sup>15</sup> Office for National Statistics – Sexual Orientation (2017): <https://www.ons.gov.uk/peoplepopulationandcommunity/culturalidentity/sexuality/bulletins/sexualidentityuk/2017>

<sup>16</sup> National Survey of Sexual Attitudes and Lifestyles 3: <http://www.natsal.ac.uk/media/2102/natsal-infographic.pdf>

<sup>17</sup> National Records of Scotland – 'Census (Amendment) (Scotland) Bill Passed': <https://www.nrscotland.gov.uk/news/2019/census-amendment-scotland-bill-passed>

<sup>18</sup> NHS Scotland Workforce Information - Equality and Diversity (March 2019): <https://www.isdscotland.org/Health-Topics/Workforce/Publications/data-tables2017.asp?id=2424#2424>

Cross-referencing by age group shows that older members of the NHS workforce are more likely to be white: 97.2% of the workforce aged 50-54; 98.2% aged 55-59, and 98% aged 60+ are white. By contrast, 92.5% of the workforce aged 40-44 are white.

In Scotland as a whole, the 2011 Census shows non-white minority ethnic groups make up 4% of the population.<sup>19</sup>

### Religion and belief

As at March 2019, ISD official statistics show that 33.0% of staff working in NHS Scotland declared their religion as Christian and 5.7% to a non-Christian religion.<sup>20</sup> This includes staff whose religion is unknown – one-third of the total.

The AfC-only data shows that 53.2% of staff *who provided data on their religion* reported they were Christian, 42.4% reported they had no religion and 4.4% reported they belonged to a non-Christian religion.

Breaking this down by Band shows that Christian groups are over-represented at Band 7 (57.1%) and under-represented at Band 2 (50.3%). The opposite is the case for those with No and Other religions.

### Marriage and civil partnership

Official statistics on the NHS Scotland workforce do not give information on marriage and civil partnership status.

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<sup>19</sup> Scotland's Census (2011) – Ethnicity, Identity, Language and Religion: <https://scotlandscensus.gov.uk/ethnicity-identity-language-and-religion>

<sup>20</sup> NHS Scotland Workforce Information - Equality and Diversity (March 2019): <https://www.isdscotland.org/Health-Topics/Workforce/Publications/data-tables2017.asp?id=2424#2424>

### Stage 3: Assessing the impacts and identifying opportunities to promote equality

Having considered the data and evidence you have gathered, this section requires you to consider the potential impacts – negative and positive – that your policy might have on each of the protected characteristics. It is important to remember the duty is also a positive one – that we must explore whether the policy offers the opportunity to promote equality and/or foster good relations.

#### Do you think that the policy impacts on people because of their age?

Age	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination, harassment and victimisation			X	Figure 1 shows that there is some variance in the age structure of the pay bands. With older staff relatively more likely to be at the top of their band, it follows that the shortening of pay bands is also more beneficial in the long-term to younger staff, as well as those who are newer in post. Moreover, it should be recognised that progressing through incremental steps within a pay band is not simply about time served, but knowledge, skills and experience. This is not age dependent.
Advancing equality of opportunity			X	
Promoting good relations among and between different age groups			X	

**Do you think that the policy impacts disabled people?**

<b>Disability</b>	<b>Positive</b>	<b>Negative</b>	<b>None</b>	<b>Reasons for your decision</b>
Eliminating unlawful discrimination, harassment and victimisation			X	The available data, as described above, shows that 1.6% of AfC staff declared a disability. It is not clear whether this is a true reflection of the workforce, or whether staff are reluctant to disclose a disability. It is not possible to draw absolute conclusions based on this limited data, but it should be noted that the Pay Deal does not alter existing staff rights, local policies or legislation relating to workplace equality – such as the Equalities Act 2010 (for which the UK Government is responsible).
Advancing equality of opportunity			X	
Promoting good relations among and between disabled and non-disabled people			X	

**Do you think that the policy impacts on men and women in different ways?**

Sex	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination			X	The pay deal offers the same opportunities for progression to both men and women. However, the new pay structure enables staff in Bands 2-7 to access the top of their pay band more quickly than under the previous system. The great majority of staff in these pay bands are female. It could therefore be argued that this indirectly advances equality of opportunity for women in the longer term. Shorter pay bands also benefit staff who are more likely to take time away from work, who are often female (as discussed below regarding pregnancy and maternity, but also due to wider caring responsibilities). However, the changes are applied systematically and fairly across both men and women, regardless of the gender demographics within the AfC workforce.
Advancing equality of opportunity			X	
Promoting good relations between men and women			X	

**Do you think that the policy impacts on women because of pregnancy and maternity?**

<b>Pregnancy and Maternity</b>	<b>Positive</b>	<b>Negative</b>	<b>None</b>	<b>Reasons for your decision</b>
Eliminating unlawful discrimination			X	The discussion of sex above is also relevant in this case, as the majority of staff across AfC bands are women, who are more likely to take time out of employment for parental responsibilities. The new pay deal does not make changes that would be detrimental to part-time workers, and it should be noted that the opportunity to reach the top of a pay band more quickly may be of benefit to staff who have taken, or will take, time away from work.
Advancing equality of opportunity			X	
Promoting good relations			X	

**Do you think your policy impacts on transsexual people?**

<b>Gender reassignment</b>	<b>Positive</b>	<b>Negative</b>	<b>None</b>	<b>Reasons for your decision</b>
Eliminating unlawful discrimination			X	As discussed above, it is unclear from the data whether staff under-report on gender reassignment, or whether staff who have undergone gender reassignment are under-represented in the workforce. However, the pay deal does not make any changes that would be detrimental or likely to have an equality impact in this regard.
Advancing equality of opportunity			X	
Promoting good relations			X	

**Do you think that the policy impacts on people because of their sexual orientation?**

<b>Sexual orientation</b>	<b>Positive</b>	<b>Negative</b>	<b>None</b>	<b>Reasons for your decision</b>
Eliminating unlawful discrimination			X	As discussed above, the majority of staff described their sexual orientation as heterosexual. The data does not allow for assumptions to be made regarding the impact upon staff who are not heterosexual, but the pay deal does not make any changes that would be detrimental or likely to have an equality impact in this regard.
Advancing equality of opportunity			X	
Promoting good relations			X	

**Do you think the policy impacts on people on the grounds of their race?**

<b>Race</b>	<b>Positive</b>	<b>Negative</b>	<b>None</b>	<b>Reasons for your decision</b>
Eliminating unlawful discrimination			X	The pay deal does not make any changes that would be detrimental or likely to have an equality impact on people on the grounds of their race.
Advancing equality of opportunity			X	
Promoting good race relations			X	

**Do you think the policy impacts on people because of their religion or belief?**

<b>Religion or belief</b>	<b>Positive</b>	<b>Negative</b>	<b>None</b>	<b>Reasons for your decision</b>
Eliminating unlawful discrimination			X	The pay deal does not make any changes that would be detrimental or likely to have an equality impact on people on the grounds of their religion or belief.
Advancing equality of opportunity			X	
Promoting good relations			X	

**Do you think the policy impacts on people because of their marriage or civil partnership?**

<b>Marriage and Civil Partnership<sup>21</sup></b>	<b>Positive</b>	<b>Negative</b>	<b>None</b>	<b>Reasons for your decision</b>
Eliminating unlawful discrimination			X	The pay deal does not make any changes that would be detrimental or likely to have an equality impact on people on the grounds of their marriage or civil partnership status.

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<sup>21</sup> In respect of this protected characteristic, a body subject to the Public Sector Equality Duty (which includes the Scottish Government) only needs to comply with the first need of the duty (to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010) and only in relation to work. This is because the parts of the Act covering services and public functions, premises, education etc. do not apply to that protected characteristic. Equality impact assessment within the Scottish Government does not require assessment against the protected characteristic of Marriage and Civil Partnership unless the policy or practice relates to work, for example HR policies and practices.

## Stage 4: Decision making and monitoring

### *Identifying and establishing any required mitigating action*

Have positive or negative impacts been identified for any of the equality groups?	No
Is the policy directly or indirectly discriminatory under the Equality Act 2010 <sup>22</sup> ?	No
If the policy is indirectly discriminatory, how is it justified under the relevant legislation?	Not applicable
If not justified, what mitigating action will be undertaken?	Not applicable

### *Describing how the Equality Impact Analysis (EQIA) has shaped the policy making process*

No changes were made to the development and implementation of the AfC Pay Deal for 2018-21 and pay uplifts were applied to all staff depending on their pay points and pay bands backdated to 1 April 2018 as the EQIA demonstrated there was limited impact on AfC staff in NHS Scotland analysed by protected characteristics.

The EQIA did identify that there is minimal data available on the protected characteristics of all NHS Scotland staff (including AfC staff) and this is a data collection issue across all Boards and that securing any meaningful data continues to be an issue because of self-reporting and should be treated with caution.

### *Monitoring and Review*

There is no requirement to monitor and evaluate this 3 year AfC Pay Deal to measure progress on equality issues as none were identified. A broader benefits realisation paper is being developed to monitor what improvements in recruitment and retention and improvement to productivity and efficiency for our health service have been secured following the implementation of the AfC Pay Deal from 1 April 2018.

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<sup>22</sup> See EQIA – Setting the Scene for further information on the legislation.

## Stage 5 - Authorisation of EQIA

Please confirm that:

- ◆ This Equality Impact Assessment has informed the development of this policy:

Yes  No

- ◆ Opportunities to promote equality in respect of age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation have been considered, i.e.:

- Eliminating unlawful discrimination, harassment, victimisation;
- Removing or minimising any barriers and/or disadvantages;
- Taking steps which assist with promoting equality and meeting people's different needs;
- Encouraging participation (e.g. in public life)
- Fostering good relations, tackling prejudice and promoting understanding.

Yes  No

- ◆ If the Marriage and Civil Partnership protected characteristic applies to this policy, the Equality Impact Assessment has also assessed against the duty to eliminate unlawful discrimination, harassment and victimisation in respect of this protected characteristic:

Yes  No  Not applicable

### Declaration

**I am satisfied with the equality impact assessment that has been undertaken for the NHS Scotland Agenda for Change (AfC) Pay Deal for 2018-21 and give my authorisation for the results of this assessment to be published on the Scottish Government's website.**

**Name: Sean Neill**

**Position: Deputy Director, Health Workforce Division**

**Authorisation date:**



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