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NHS South East London Integrated Care Board

Violence and aggression policy (CG06)

V2.0

Approved by	SEL ICB Executive Committee
Date approved	3 September 2025
Name and title of originator/author	Amanda Wixon – Corporate EPRR Lead
Name and title of sponsor	Tosca Fairchild, Chief of Staff
Review date	30 September 2027
Description	SEL ICB has a “zero tolerance” attitude to violence, harassment and aggression. This policy sets out how the ICB will identify and manage risks of violence and aggression to staff and outlines a procedure should a staff member experience violence or aggression.
Target audience	All SEL ICB staff
Stakeholders engaged in development or review	Health and safety

Version Control

Version number	2.0
Supersedes	1.0

Implementation

Implementation plan in place?	Yes
Method and date of dissemination	SEL ICB intranet

Document Review Control Information

Version	Date	Reviewer Name(s) and Job title	Change/amendment
0.1	April 2022	A Wixon, Corporate EPRR Lead	New policy for SEL ICB
1.1	June 2025	Simon Beard, AD Corporate Operations	Review post review date

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1. Unacceptable behaviour statement

- 1.1. NHS South East London Integrated Care Board (ICB) believes that any act of aggression, violence, or intimidation, both physical and non-physical from any member of staff, patient, visitor, member of the public or anybody else is unacceptable. The ICB is committed to the creation of a culture and environment where employees may undertake their duties without fear of abuse or violence.
- 1.2. As an organisation, we are committed to reduce risk and to have procedures in place that will enable staff to appropriately manage an aggressive or violent situation should it arise.
- 1.3. All staff have a vital role to play in protecting themselves, including participation in appropriate training, reporting of incidents and taking appropriate action against perpetrators of abuse or violence. The ICB has a responsibility to ensure that appropriate support is given to staff in such instances.
- 1.4. Violence against NHS staff is a crime and the ICB will work with the police and other relevant third parties to prevent it.

Note: Allegations of staff bullying by other members of staff (which for the purpose of this policy includes office holders, employees on honorary contracts, those employed on a joint contract with the ICB and another employer, contractors, agency staff and anyone else engaged to work at the organisation, whether by direct contract with the ICB or otherwise) are not covered by this policy. Such allegations need to be reported in accordance with the ICB's Bullying and Harassment Policy.

2. Introductions, scope, and definitions

Introduction & Purpose

- 2.1. The ICB is committed to have measures in place, through this Policy and other relevant policies and procedures to:
 - reduce the risk of instances of aggression, harassment, abuse, violence, antisocial behaviour, hate crimes or hate incidents towards our staff occurring
 - enable staff to manage appropriately an aggressive or violent situation should they arise
 - support staff in the aftermath of any such incidents.
- 2.2. Violence, harassment, and aggression can be:
 - physical, psychological, and/or sexual
 - one off incidents or more systematic patterns of behaviour
 - amongst colleagues, between superiors and subordinates or by third parties such as patients, the public, clients, colleagues employed by other organisations etc
 - range from minor cases of disrespect to more serious acts, including criminal offences, which require the intervention of public authorities.¹

Such incidents could result in the matter being reported to the police.

¹ <https://www.hse.gov.uk/violence/preventing-workplace-harassment.pdf>
NHS SEL ICB – Violence and Aggression Policy (CG06) v1.1

Scope of the policy

- 2.3. This document is to support compliance with the Health and Safety at Work Act 1974, the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR), the Management of Health and Safety at Work Regulations 1999, Assaults on Emergency Workers Act 2018 and the Corporate Manslaughter and Corporate Homicide Act 2007.
- 2.4. This policy is for the management of violence, aggression, and harassment towards staff. It should be read in conjunction with the relevant ICB security, HR and health and safety policies, procedures, and any guidance.

2.5. Definitions and Acronyms

Violence / violence at work	<p>The Health and Safety Executive (HSE) defines violence at work as “any incident in which an employee is abused, threatened or assaulted in circumstances relating to their work.”²</p> <ul style="list-style-type: none">• Physical assault – ‘the intentional application of force to the other person or another without justification, resulting in physical injury or personal discomfort’.• Verbal assault – ‘the use of inappropriate words or behaviour causing distress and / or constituting harassment’. <p>Examples of violence covered by this policy are:</p> <ul style="list-style-type: none">• Severe verbal abuse which makes the recipient feel threatened or severely distressed, which includes racial and sexual abuse; and,• Physical assault and / or threatening behaviour.
Harassment	<p>Harassment occurs when someone is repeatedly (twice or more) and deliberately abused, threatened and/or humiliated in circumstances relating to work and circumstances where a reasonable third party consider the actions as harassment. Harassment can be further defined as any conduct which:</p> <ul style="list-style-type: none">• is unwanted by the recipient• is considered objectionable by the recipient• causes humiliation, offence and distress (or other detrimental effect) <p>Examples include:</p> <ul style="list-style-type: none">• physical contact – ranging from touching to serious assault, gestures, intimidation, aggressive behaviour• verbal – unwelcome remarks, suggestions and propositions, malicious gossip, jokes and banter, offensive or abusive language

² <https://www.hse.gov.uk/violence/index.htm>

	<ul style="list-style-type: none"> • non-verbal – offensive literature or pictures, graffiti and computer imagery, emails, texts, isolation or non- co-operation and exclusion or isolation from social activities • unwanted conduct related to a protected characteristic which has the purpose or effect of violating an individual's dignity or creating an intimidating, hostile, humiliating or offensive environment for that individual
Aggression	<p>Aggression is defined as:</p> <ul style="list-style-type: none"> • A forceful action or procedure (such as an unprovoked attack) especially when intended to dominate the individual • hostile, injurious, or destructive behaviour • spoken or physical behaviour that is threatening to the individual and or involves harm to someone or something.
Hate crime	<p>A crime that the victim or any other person perceives to be motivated by hostility or prejudice towards any aspect of a person's identity – the main characteristics are: Disability; Gender Identity; Race, Ethnicity or Nationality; Religion, Faith, or Belief; and Sexual orientation. Some police forces also record hate incidents based on other personal characteristics such as age or appearance.</p>
Hate incident	<p>Any incident, which may or may not be a crime, that the victim or any other person perceives to be motivated by hostility or prejudice towards any aspect of a person's identity. Examples of this could include:</p> <ul style="list-style-type: none"> • Verbal abuse like name-calling and offensive. • Threats of violence. • Physical attacks such as hitting, punching, pushing, spitting • Online abuse
The ICB	NHS South East London Integrated Care Board

- 2.6. This policy and procedure is applicable to all staff working within the ICB whether directly or indirectly employed by NHS South East London ICB, including contractors and temporary staff.
- 2.7. It covers staff who experience violence, aggression or harassment whilst carrying out ICB work or where the incident is related to their ICB work. This includes inside the usual place of work, in the community whilst carrying out ICB business and for incidents relating to their work. For example, attending meetings off site, travelling between meetings, and travelling to and from work.
- 2.8. Where the alleged perpetrator is a member of staff, action(s) must be taken in consideration of the relevant HR policy including but not limited to the bullying and harassment policy and the grievance and disciplinary policies.

3. General principles and aims

- 3.1. The ICB believes that any act of aggression, violence, harassment, or intimidation, both physical and non-physical from any member of staff, patient, visitor or member of the public is unacceptable.
- 3.2. The ICB is committed to the creation of a culture and environment where employees may undertake their duties without fear of abuse or violence.
- 3.3. The aims of this policy are to:
 - provide and maintain a working environment that is safe and free from violence, aggression, and harassment for all employees, including contractors and interim staff.
 - detect and report incidents to senior leadership and ensure a robust response, including reporting to the police if a criminal act is thought to have occurred.
 - provide support for all staff involved in a violent or aggressive incident.

4. Roles and Responsibilities

The ICB, its leadership, management and all staff employed by the ICB have a part to play in implementing this zero-tolerance policy.

4.1 ICB Responsibilities

It is the responsibility of the ICB to develop policies, procedures, systems, and environments that reduce the risk of violence, aggression and harassment.

The ICB recognises that it is an integral part of the community which it serves, and its overall policies and procedures directly affect what happens at the interface between staff and the public. The ICB undertakes to:

- identify as far as reasonably practicable, the potential for violence, aggression and vexatious behaviour arising in the workplace, including those most at risk.
- take reasonable and practical steps to eliminate/reduce the risk.
- identify safe working practices and provide training for staff appropriate to their needs.
- ensure security management specialists are available to advise and attend appropriate meetings.
- encourage reporting of all incidents via the ICB's established incident reporting system and policy.
- investigate significant incidents in accordance with the policy.
- take appropriate action against members of the public who assault, threaten, harass or abuse staff.
- provide support to individuals who have been a victim of assault, harassment, or abuse.
- evaluate the effectiveness of any measures undertaken.

4.2 Executives and Senior Management Team Responsibilities

Executives and Senior Management Team are responsible to

- ensure that staff are aware of this policy and understand the methods and timing of reporting incidents.
- ensure that training is available in appropriate techniques for dealing with incidents of violence, abuse, and aggression such as conflict resolution training, and that staff have opportunities to identify specific training they feel they require.
- take all reported incidents of violence, aggression, and harassment at work seriously.
- implement work processes or systems that will reduce or eliminate the likelihood of violence and aggression.
- ensure staff have necessary equipment to provide protection from violent or aggressive actions, where required.
- provide immediate support to staff who experience abusive, violent, or aggressive incidents by listening to the account of the incident and discussing with the member of staff the options available to them. This will occur immediately after the incident and at all stages throughout any investigation which is undertaken in accordance with the ICBs investigation guidelines.

4.3 Line manager responsibilities

Line manager's responsibilities are to:

- ensure that staff are aware of this policy.
- undertake risk assessments for their direct reports to identify as far as reasonably practicable, the potential for violence, aggression and harassment behaviour arising in the workplace, including those most at risk.
- take reasonable and practical steps to eliminate/reduce the risk.
- identify and implement safe working practices.
- identify training needs and ensure their staff receive appropriate training.
- ensure risk assessments are updated annually, if circumstances change and following an incident.
- take all reported incidents of violence, harassment at work seriously.
- ensure that staff understand the methods and timing of reporting.
- ensure that incident report forms are completed as fully as possible for all reported incidents of violence ideally within one working day.
- support and debrief staff following aggressive or abusive incidents.
- lead / ensure the incident is appropriately investigated following an incident in accordance with the ICBs incident reporting policy and procedure.
- inform their director / senior manager of all incidents at the earliest possible opportunity.

4.4 Individuals' responsibilities

All ICB employees, contractors and temporary staff are responsible for ensuring they:

- follow safe working practices and co-operate with their line manager and colleagues to promote safety at work.
- take all reasonable, practicable measures to prevent acts of violence.
- remain watchful of their own safety and that of their colleagues including when working alone, at other premises and travelling within the community.
- report incidents of violence and aggression, including verbal abuse and 'near misses' as soon as possible giving a detailed account of events.
- not place themselves at risk to protect or prevent damage to or theft of property or to deliver a service.
- familiarise themselves with the security arrangements for the location when working at or visiting the premises of other organisations.

- assist with any investigation into incidents of violence and aggression, by the police or internally.
- participate in training designed to meet the requirements of this policy, particularly conflict resolution training, which should occur annually.

4.5 Security Management Executive Lead

The ICB executive lead for security management is the Chief of Staff. The ICB executive lead will:

ensure the ICB is tackling violence against staff across the organisation, acting as lead for the reporting of all verbal and physical abuse of staff and ensuring that relevant incidents are reported to external bodies as necessary;

- the development, implementation and maintenance of an effective Security Management Policy, and other security related documents, in consultation with staff representatives, ensuring compliance with current guidance;
-
- instigate regular campaigns to highlight the importance of security and the responsibilities of all ICB employees;
- ensure the ICB maintains awareness of any statutory requirements in relation to security management matters;
- support the opportunities to gather intelligence and foster links with local agencies and bodies, such as Police, Crime and Disorder Reduction Partnerships, Prevent (Counter Terrorism) leads and other security professionals in neighbouring NHS organisations through borough resilience forums and local groups of which the ICB is a partner.

5.Procedures

5A: Procedure: risk assessment

- 5.1.1. The ICB is a public organisation and is committed to providing an open and supportive environment for the people of south east London to make enquiries, seek advice, and raise issues or complaints where it falls within the remit of the ICB to deal with these. However, ICB staff, particularly those in public-facing or patient-facing roles should always be mindful of the risks they may face when carrying out their roles.
- 5.1.2 Whenever there is a reasonably foreseeable risk of violence, harassment or aggression, line managers must ensure that risk assessments are completed. All risk assessments relating to violence and aggression must be reviewed on an annual basis by the line manager or when there is a change in circumstances.
- 5.1.3 The risk assessment should be:
 - for the identification of threats of violence and aggression
 - the evaluation of the risks regarding violence and aggression
 - to agree action plans

- to implement, monitor and review measures to reduce risks

5.1.4 In making a risk assessment the following may indicate that there is a risk of violence:

- dealing with intoxicated or distressed members of the public
- dealing with members of the public suffering from mental illness or stress
- members of the public who are confused / disorientated / suicidal / known criminal history
- high-risk areas such as contentious issues or complaints
- staff working alone
- tasks where money, drugs or other valuables may be a target for theft
- when withholding or withdrawing a service
- irregular situations such as where persons known to be potentially violent are referred to other disciplines or services

5.1.5 The list shown above is not exhaustive and managers must take care to assess all possible personal security risks within their responsibility. Police assistance should be sought where the presence of drugs / weapons has been detected or to deal with violence or threatened/suspected violence.

5.1.6 When dealing with a known or suspected violent or abusive individual, under no circumstances should staff see them on their own. They should seek advice from their line manager before face-to-face meetings are arranged.

5.1.7 In non-emergency situations where the incident needs to be logged and a crime reference number obtained, the incident is to be reported to the police via 101 or by using the Metropolitan Police online reporting tool. Non-emergency situations may include reporting a theft or criminal damage discovered in the aftermath of the event.

5.1.8 **In any situation where physical assault is considered imminent, staff should immediately leave the area if able and contact security (if available) or the police on 999**

5B. Preventing and Controlling Violence

5.2.1 Where possible, staff should prevent the escalation of violent situations by utilising their interpersonal skills, with the emphasis on reducing tension without physical intervention. For example creating a space between themselves and the aggressor; by listening and empathising with the individual; by maintaining a calm exterior.

5.2.2 Breakaway techniques using minimal force are within the law; however, such techniques should only be used as a last resort. Every option and means of preventing, controlling and defusing a situation must be attempted before there is physical intervention with a violent individual.

5.2.3 Violent or threatening situations can erupt and escalate quickly and in these situations staff must withdraw from the threat at the earlier opportunity, warning colleagues as necessary, so that other staff and visitors can be removed to a safe location.

5.2.4 It is important that the senior member of staff present takes full charge of the situation and directs staff accordingly.

5C: Procedure: actions following violent, abusive, or aggressive behaviour

5.3.1 All instances of actual or threatened violence, aggression or harassment must be reported in detail:

- in accordance with the ICBs incident reporting policy and procedure (available on the intranet). The investigation process is outlined in the policy.
- to the Health and Safety Executive (HSE) if it is one of the reportable incidents at work under the RIDDOR regulations. The Chief of Staff (CoS), as the accountable ICB officer responsible for health and safety matters within the ICB, should ensure this happens as appropriate. Details are outlined in the ICBs incident reporting policy and procedure and on the HSE website (<https://www.hse.gov.uk/riddor/report.htm>).
- to the line manager to lead the response, who will report to the executive / senior manager
- to the police, where a crime has been committed..

5.3.2 Line managers are to ensure that staff are properly cared for and debriefed immediately, or as soon as is reasonably practicable, after the incident. Managers should be aware that incidents of violence and aggression can have a detrimental effect on the victim out of proportion to the scale seen by outsiders. It is the responsibility of the line manager to ensure that support and counselling is available for any member of staff affected.

5.3.3 The line manager will ensure that, where applicable, the incident is appropriately investigated in accordance with the SEL ICB incident reporting policy and procedure and risk assessments are reviewed.

5.3.4 Where any patient, relative or member of the public is alleged to have carried out an act of violence or aggression or harassed a member of staff, the ICB reserves the right to respond to the alleged incident, as deemed necessary in light of the circumstances. The level of response will be dependent upon the seriousness of the incident and the outcome of any investigation.

5.3.5 The potential responses or actions available to the ICB include:

- verbal warnings with a follow up letter to the individual
- recommendation to use advocacy services
- contacting provider organisations to suggest that a warning flag is applied to the patient's notes
- meeting with the individual(s)
- written warnings from the ICB
- withdrawal of services
- involvement of and reporting to the police
- criminal prosecution

- civil prosecution

5.3.6 False accusations will not be tolerated and might result in disciplinary action in accordance with the disciplinary policy.

Support Mechanisms

5.4 There are a number of support mechanisms for staff who have been subject to or witnessed violence, aggression or harassment. These include counselling through the Employee Assistance Programme and support from occupational health (contact details on intranet). Staff are also supported by their line manager, Human Resources department and policies and procedures.

Where staff have a concern about a situation they have witnessed internally, they also have access to the ICBs Freedom to Speak Up Guardian, whose details are available on the ICB intranet and whose role is further explained in the ICB Freedom to Speak Up (Whistleblowing) Policy.

6. Equality and diversity statement

6.1 NHS South East London ICB is committed to equality of opportunity for its employees and members and does not unlawfully discriminate on the basis of their 'protected characteristics' as defined by the [Equality Act 2010](#) – age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation. Additionally, our organisation also focuses on digital inclusion, carers, and socio-economic status/deprivation to address broader equality concerns.

6.2 An Equality Impact Assessment has been completed for this policy (Appendix 2). If members or employees have any concerns or issues with the contents of this policy or have difficulty understanding how this policy relates to their role, they are advised to contact the Associate Director of Corporate Operations.

7. Breaches of Policy

7.1 Failure to comply with this policy may result in disciplinary action and may constitute a breach of professional code of conduct. In serious cases, a breach may be regarded as gross misconduct and may result in the employee's dismissal.

8. Links to other Policies/Documents and Guidance

Harassment, violence, aggression and hate crime can occur between colleagues, superiors and subordinates as well as being perpetrated by third parties such as clients, customers, patients etc. For situations which involve members of ICB staff perpetrating harassment, violence or aggression against ICB colleagues, members of the public or patients, please refer to the human resources team for support.

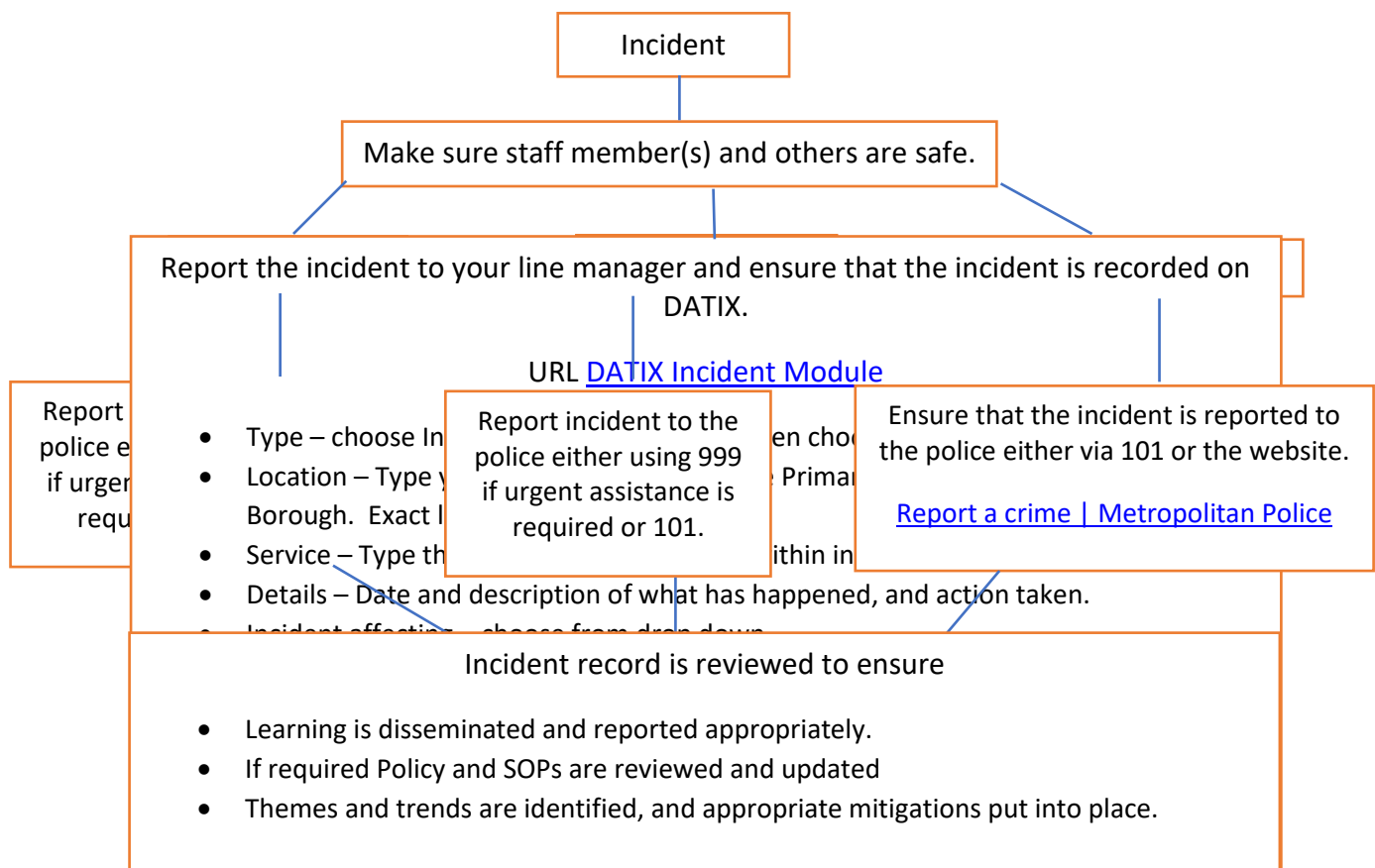
Other policies and procedures relevant to the matters covered in this Policy include the:

- Bullying and harassment policy
- Health and safety policy
- Agile working policy (which includes lone working)

- Security policy
- Disciplinary policy
- Attendance management policy
- Security Management Policy
- Freedom to Speak Up Policy

Appendix 1: reporting lines

Reporting an incident



Appendix 2: Equality Impact Assessment: Screening Form

1. Please fill in the requested information below. For each question (1-5), refer to the definitions of "likelihood" and "consequence" provided on the next page. In the columns provided (below), note down the terms such as "likely" (for likelihood) or "medium impact" (for consequence). This will help you decide the overall category for the likelihood and consequence. Please review the tables below prior to starting your Equality Impact Assessment form.
2. At the end, you'll need to determine the overall likelihood and consequence. Multiply these together (likelihood x consequence) to get a score. This score will show whether you need to complete a full Equality Impact Assessment form.
3. The overall score in the table below is not a total of all the individual points. Instead, you should decide on an overall rating for both the likelihood and consequence. For example, likelihood could be "likely (4)", and consequence could be "medium impact (4)."
4. To decide if you only need to complete this screening form or a full Equality Impact Assessment, use the overall score. For instance, if the score is 4 (likelihood) x 4 (consequence) = 16, this score is in the red zone, meaning a Full Equality Impact Assessment is required.
5. For each question, please take into consideration how significant the impact will be on the service user/workforce/organisation or the organisation.
6. Please note: The term "project" includes Policies, Practices, Strategies, Plans, Planning, Commissioning, Procurement, Service Provision/Delivery, Decommission Services/Phasing out Policies, and Frameworks and Training.

The following protected characteristics need to be considered for any negative impacts:

Protected Characteristics		
Age	Pregnancy/Maternity	Marriage/Civil Partnership (employment only)
Disability	Race	Socio-economic / Deprivation
Sex	Religion/Belief	Carers
Gender reassignment	Sexual orientation	Digital Inclusion

Equality Impact Assessment: Screening Form

Name (project lead)	Simon Beard		
Job title	Associate Director for Corporate Operations		
Organisation	SEL ICB		
Name of Project	Violence and Aggression Policy – review and refresh		
Engagement/Data gather	<p>This policy has been reviewed on its anniversary date, with changes made to remove reference to the Local Security Management Specialist, which is no longer a requirement under the latest NHS Standard Contract.</p> <p>This policy has been reviewed by the corporate team; no other parties were identified for engagement before amendments have been proposed.</p>		
Aim/Purpose of the project/decision	To confirm the Policy has been considered to ensure it does not disadvantage any individuals with protected characteristics in its application.		
Date it will be going to committee/ SMT/ SLT for approval	<p>Anticipated date to Policy Review Group: 18 August 2025</p> <p>Anticipated date to Executive Committee: 3 September 2025</p>		
Project Lead signature	Simon Beard	Date:	26/06/25
ED team signature	<i>Louis French</i>	Date:	23/07/2025
EDI team comments	<p>A screening form is sufficient for this policy. Confirmed that it has been reviewed by the corporate team as part of scheduled updates and, following review, it has been agreed that primary amendments are limited to the removal of references to the role longer required under the NHS Standard Contract. No disproportionate impacts arise from this policy, and no further engagement was deemed necessary at this stage.</p> <p>The following additional changes were also made to the policy as part of this Equality Impact Assessment review:</p>		

- | | |
|--|--|
| | <ul style="list-style-type: none">• Font updated to Arial size 12 to support accessibility for individuals with visual impairments. Formatting has also been adjusted to ensure adequate spacing between blocks of text and lists.• Section 2.5 includes additional information around hate crimes, as well as examples of what could constitute a hate incident.• Section 6 (Equalities Statement) has been updated to remain consistent with current ICB policies.• Section 8 now includes colleague signposting to the Freedom to Speak Up policy.• The Equality Impact Assessment engagement / data gather and scoring table has been strengthened to justify the scores given and ensure the form can act as a standalone document in the event of an EHRC audit. |
|--|--|

No.	Please answer the following questions, using any data/intelligence you have available right now.	Likelihood	Consequence	Comments
1.	Does this project affect people with protected characteristics, and to what extent does it impact access, experience, and outcomes?	1	1	The policy sets out a consistent, organisation-wide approach to managing and responding to incidents of violence / aggression / harassment. While individuals with protected characteristics may be disproportionately targeted in hate-related incidents, the policy explicitly includes definitions of hate crimes and outlines mechanisms for reporting and support. This ensures protections and relevant mechanisms are in place where risks may be higher.
2.	Has your data and/or engagement identified that there will be an impact on Protected Characteristics?	1	1	There is no indication from engagement or available data that the policy revision (removal of reference to the Local Security Management Specialist) creates any differential impact. The protections and escalation procedures remain intact and consistently available to all staff.
3.	Are adjustments/mitigating actions required to ensure the project is accessible and what will the Impact be on protected characteristics?	1	1	The policy allows for reasonable adjustments and includes line manager responsibilities for post-incident support, such as access to counselling and occupational health. It is designed to be accessible to all, and can be adapted as needed based on individual circumstances, including those related to disability or neurodivergence.

4.	Are significant health inequalities associated with this project and what will the affect be on people with protected characteristics?	1	1	While individuals with protected characteristics may face great exposure to risk in some cases (i.e. hate-crimes), this policy is designed to reduce this risk and support recovery. It contributes positively to the working environment and staff wellbeing by offering preventative measures and a clear route for response and support.
5.	If any impact is identified, how likely will there be mitigating actions and how will these be reviewed?	1	1	The policy includes mechanisms for reporting, investigation, and reviewing incidents, with roles clearly defined. Any disproportionate impacts, if they are identified, will be mitigated through these established processes and reviewed as part of ongoing risk assessments and policy updates.
	Overall	1	1	1 - Green

Likelihood:

Score	Likelihood	Description
1	Rare	Occurrence is rare/measures are in place to ensure that no adverse impact will occur to patients or staff with protected characteristics. There is sufficient data to make a decision and relevant engagement has been undertaken.
2	Unlikely	It is unlikely to occur/ measures are in place to ensure that no adverse impact will occur to patients or staff with protected characteristics/ there is sufficient data to make a decision and engagement has been undertaken.

3	Possible	There is a 50/50 possibility for it to occur/no measures in place for any adverse impact if it was to occur/ there is insufficient data to make a decision or engagement has not been undertaken.
4	Likely	There is a high chance of inequalities to occur more likely/no measures are in place any adverse impact/ there is insufficient data to make a decision or engagement has not been undertaken.
5	Almost certain	It is almost certain to cause inequalities with this project/ there are no measures in place for any adverse impact/ there is insufficient data to make a decision or engagement has not been undertaken.

Consequence:

Score	Consequence	Description
1	No impact	<ul style="list-style-type: none"> No impact any of the protected characteristics or the organisation/no adverse impact likely. No engagement is required/there is enough data from previous engagement undertaken No adjustments needed to make the proposal accessible. No health inequalities associated with this project No monitoring of mitigated actions required as no impact/mitigating reasons e.g. Legal obligations/for a certain protected characteristics. Equality Analysis Screening form to be completed only.
2	Minor impact	<ul style="list-style-type: none"> Minor impact any of the protected characteristics or the organisation/adverse impact is unlikely. No/minor engagement is required/there is enough data from previous engagement undertaken No/minor adjustments needed to make the proposal accessible. No/minor health inequalities associated with this project No monitoring of mitigated actions required as no impact/mitigating reasons e.g. legal obligations/for a certain protected characteristics. Measures are in place to ensure there is no adverse impact that will occur Equality Analysis Screening form to be completed only.
3	(Low) medium impact	<ul style="list-style-type: none"> There is a medium impact any of the protected characteristics or the organisation/adverse impact is likely. There is a requirement for engagement is required/there is insufficient data to make a decision on impact on protected characteristics Adjustments are needed to make the proposal accessible. There is a medium impact health inequalities associated with this project monitoring of mitigated actions required as there is a medium impact / Measures/mitigations are not yet in place to ensure negative impact does not occur. Will most likely require a full Equality Analysis to be completed.

4	Medium Impact	<ul style="list-style-type: none"> • Significant to critical impact to any of the protected characteristics or the organisation/adverse impact is likely. • There is a requirement for engagement /there is insufficient data to make a decision on impact on protected characteristics/There is a fair amount of evidence that some groups are (or could be) differently affected by it. • There is evidence to suggest that adjustments are needed to make the proposal accessible. • There is a significant to critical impact on health inequalities associated with this project/ leads to non-compliance with legislation and could therefore be an organisation risk • Monitoring of mitigated actions required as there is a significant to critical impact / Measures/mitigations are not yet in place to ensure negative impact does not occur. • Requires a full Equality Analysis to be completed.
5	High impact	<ul style="list-style-type: none"> • Critical to Major impact to any of the protected characteristics or the organisation/adverse impact is highly likely. • There is a requirement for engagement /there is insufficient data to make a decision on impact on protected characteristics/There is a fair amount of evidence that some groups are (or could be) differently affected by it. • There is substantial amount of evidence to suggest that adjustments are needed to make the proposal accessible. • There is a critical to major impact on health inequalities associated with this project/ leads to non-compliance with legislation and could therefore be an organisation risk • Monitoring of mitigated actions required as there is a critical to major impact / Measures/mitigations are not yet in place to ensure negative impact does not occur. • Requires a full Equality Analysis to be completed.

- To determine if you need to complete a full Equality Impact Assessment form, use the overall score from the table above.
- Calculate the score by multiplying Likelihood and Consequence (L X C).
- Use the following key to interpret your score:
 - **Green:** Only the screening form needs to be completed.
 - **Amber:** Complete the screening form; a full Equality Impact Assessment may be needed after review by the EDI team.
 - **Red:** A full Equality Impact Assessment form must be completed.

Equality Impact Assessment Matrix

		Likelihood					
		Rare	Unlikely	Possible	Likely	Almost Certain	
		1	2	3	4	5	
Consequence	High impact	5	5	10	15	20	25
	Medium Impact	4	4	8	12	16	20
	(Low) medium impact	3	3	6	9	12	15
	Minor impact	2	2	4	6	8	10
	No Impact	1	1	2	3	4	5