

Equality Impact Assessment (supporting guidance available)

Action Plan

This section is completed at the end of the Equality Impact Assessment. Due to the importance of embedding equality in SQA through our actions the Action Plan will be the focus and record of ongoing actions.

Agreed Schedule Review Date	By September 24	Additional Schedule Review Date	By September 23
------------------------------------	------------------------	--	------------------------

Explain how you will monitor and record the actual impact on equality groups, including how the evidence can be revisited to measure the actual impact.

Required Actions	Owner	Date	Comment & Review
Review and assess monthly establishment management information packs containing fundamental employment data on SQA employees.	People Analytics, Governance & Systems Manager	Commencing monthly from October 2022	
Review on a quarterly basis of employment law, case law and legislative changes, and equalities updates (including reviewing EHRC website).	HR Shared Services Manager	Commencing quarterly from January 2023	
Review and assess feedback on a quarterly basis from joint trade unions (Unite and Unison) through SQA's Joint engagement forum and Policy review group.	HR Shared Services Manager	Commencing quarterly from January 2023	
Review and assess feedback on a quarterly basis from each of SQA's staff community network groups.	HR Shared Services Manager	Commencing quarterly from January 2023	

Continue to review and assess on an annual basis SQA's engagement People survey.	OD Manager	Commencing annually from October 2023	
Review and assess on an annual basis all SQA employee lifecycle data.	People Analytics, Governance & Systems Manager	Commencing annually from January 2024	
Continue to review and assess every 2 years SQA's equality mainstreaming report [next report due May 2023].	People Reward and Equalities Manager	Commencing every 2 years from May 2023	
Continue to review and assess every 2 years SQA's workforce equality monitoring report [next report due May 2023].	People Reward and Equalities Manager	Commencing every 2 years from May 2023	

Identified Actions	General Equality Duty	Owner	Date	Comment & Review
We advise that this policy is shared with SQA's MAC (Make a Change) to monitor any issues and discuss proactive ways to promote healthy lifestyle choices and support	Foster good relations	Head of HR	September 24	

Policy Aims

Name of Policy or practice	Smoking And e cigarettes Policy
New Policy or Revision	Revision
Name of Policy Owner	Head of Human Resources
Date Policy Owner Confirmed Completion	March 23

What is the rationale for this policy or practice?
<p>The Smoking, Health, and Social Care (Scotland) Act 2005 bans smoking in public places to protect people from the health risks of passive smoking. https://www.legislation.gov.uk/asp/2005/13/contents</p> <p>This means that, by law, offices, pubs, restaurants, and other workplaces in Scotland have been smoke free environments since 26 March 2006. Staff, customers, and visitors are not allowed to smoke in the enclosed areas of their premises. In addition, within workplaces, employers have a duty under section 2(1) of the Health and Safety at Work Act 1974 and the Health and Safety of Pregnant Workers Directive (92/85/EEC) to ensure, as far as is reasonably practicable, the health, safety, and welfare at work of all their employees.</p> <p>E cigarettes are not covered by legislation, but all employers are required to ensure there is a safe working environment under the Health and Safety legislation quoted above. In relation to SQA's duty of care to employees, we will treat e cigarettes and all similar devices in the same way as cigarettes.</p> <p>This policy conforms to the requirements of the smoke free legislation.</p>
What evidence is there to support the implementation or development of this policy or practice?
<p>Legislative obligations described above.</p> <p>https://www.nhs.uk/common-health-questions/lifestyle/what-are-the-health-risks-of-smoking/</p> <p>Health Risks of smoking and passive smoking are well documented as shown above.</p> <p>https://www.nhsinform.scot/healthy-living/stopping-smoking/how-to-stop/e-cigarettes</p> <p>Risks to health from e cigarettes are shown here, although NHS do state that; 'It will be some time until studies will show the long-term impact and any unforeseen risks of using e cigarettes. More is known about the safety and effectiveness of other stop smoking medications.'</p> <p>Subsequent need for SQA to adhere to legislation and support where possible the health of workforce and building users.</p>

What are the aims of this policy or practice?

SQA recognise in the policy that the health, safety, and welfare of staff and anyone else directly affected by SQA's organisation's operations is of prime importance. Details of SQA's obligations within the law are explained together with the consequences for individuals who do not adhere to the policy. Support is available to staff if they want to stop or reduce smoking is outlined in Section 4. of the policy with reasonable time off to receive attend support/cessation classes.

The policy outlines SQA's position on e cigarettes (often referred to colloquially as 'vaping') and rationale for considering these to fall within the scope of its position on smoking at work.

The policy covers smoking at workplace, at home and when driving a SQA vehicle or for SQA related work activities. The policy explains that non-compliance may result in disciplinary action and that it is a criminal offence to smoke in smoke free areas.

[SQA 2022 People Survey](#) shows that 75% of SQA staff see Health and Safety is taken seriously at work and 89% are happy with their current working environment. This we feel indicates overall satisfaction that factors like smoke free workplaces are managed well in SQA.

How is the content of these aims relevant to equality groups?

The policy affects all employees whether directly as smokers or as workplace building/facilities users.

We considered evidence that smoking is declining in Scotland overall shown here.

[ScotGovSmoking2021](#)

We noted that people who identify as smokers are slightly higher (12%) male than (11%) female and highest (16%) in age band 45 – 54 which includes a substantial proportion of SQA employees (28%).

Slightly higher (8%) of e cigarette users are in age band 25 – 34 compared to 7% in all subsequent age bands up to age 55 + when % figures decrease significantly.

https://ash.org.uk/uploads/ASH-Briefing_Health-Inequalities.pdf and <https://www.ashscotland.org.uk/what-we-do/tackle-inequalities> and <https://www.healthscotland.scot/health-topics/smoking/smoking-prevention>.

Research shows clear links to higher rates of smoking, subsequent health inequality and poorer mental health within socio economic groups as shown above. SQA do not gather any workforce data for evidence on socio economic groups, but we did consider this link when arriving at conclusions for outcomes in this EQIA in Disability and Race.

Evidence, Consultation and Engagement

What stakeholders have you engaged with in the development of this policy or practice?

This policy will be developed in consultation with SQA's recognised Trades Unions, Unite and Unison, who represent all staff throughout the organisation.

In addition, as this is an internal policy, SQA will consult with internal groups as stated in actions from this EQIA. These include:

- ACE (Appreciate Culture and Ethnicity) Network.
- SQA Disability Network.
- SQA Rainbow Network.
- Women's Network.

Evidence of Stakeholder Engagement:

Trade Union Consultation Review Group (PRG):

Members of SQA Human Resources department and trade union representatives from *Unite the Union* and *Unison* meet weekly in SQA via the PRG. This group has been meeting weekly in SQA since July 2020. SQA's trade union representatives are also given statutory time off to attend relevant training, meetings and other information gathering activities as supported in our union framework agreement. On 23rd February 2023, the PRG group started to review this policy with final agreement expected in the next 2 to 3 weeks.

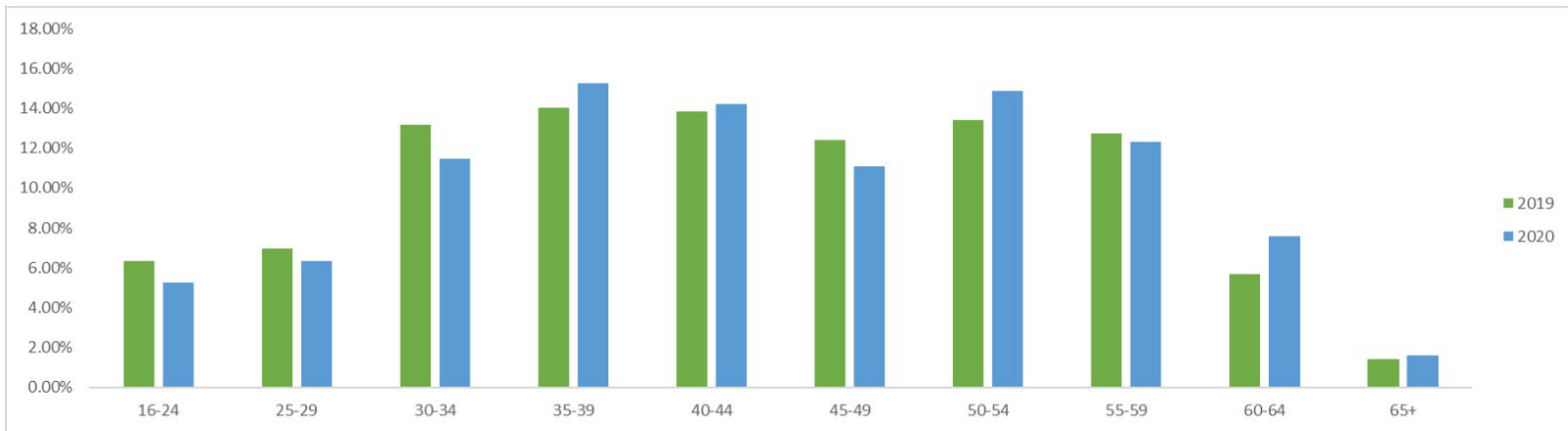
Evidence of all meeting minutes, actions and consultation undertaken with the PRG group (including Equality considerations in respect of all policies, activities, and functions) is detailed on a dedicated SQA shared resources site.

What stakeholders have you engaged with in the development of this policy or practice?

Head of HR and HR Shared Services Manager also involved in development of this policy.

What evidence about equality groups do you have to support this assessment?

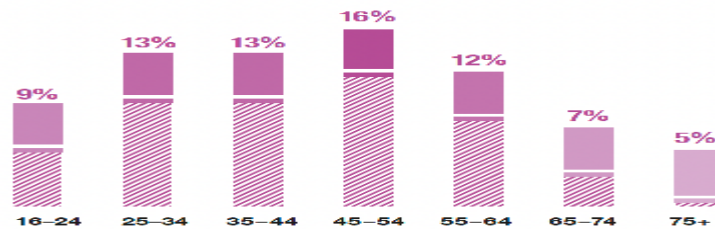
Age



Source: SQA workforce equality monitoring 2019-21

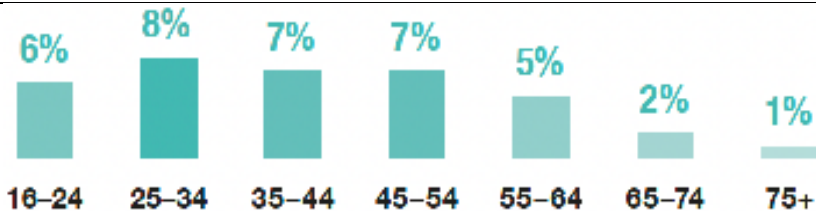
The majority of SQA employees are in the mid-range age bandings. A total of 79% workers are aged between 30 – 59. Less than 2% of SQA employees are aged 60+ and the SQA has recently seen a decrease in younger (under 35) employees.

External evidence from [ScotGovSmoking2021](#) ‘Smoking prevalence was highest among those aged 45-54 and lowest among those aged 75+.’



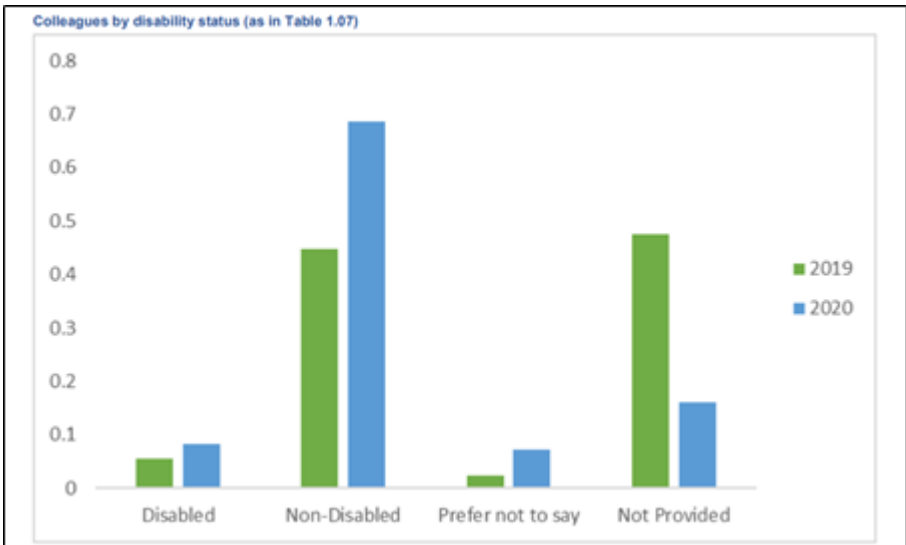
‘Prevalence of current e cigarette use, in 2021, was highest among those aged 25-34 and lowest among those 75 and over.’

Age



Disability

A total of 8.2% of SQA employees declared a disability in 2021.



Source: SQA Workforce Equality Monitoring Report 2019 – 2021

The highest proportion of colleagues who have declared a disability (53%) falls within the lowest age bands (16 – 44) and second highest (47%) within the upper age bands (45–64)

A total of 55% of disabled employees are female and 45% are male.

In the UK generally, [Mental Health Foundation | Good mental health for all](#) indicates 1 in 6 adults experience a common mental health problem, such as anxiety or depression.
<https://www.nhs.uk/live-well/quit-smoking/stopping-smoking-mental-health-benefits> indicates a link to smoking and increased anxiety, depression, and poor mental health.

<https://www.gov.scot/publications/scotlands-wellbeing-measuring-national-outcomes-disabled-people>

- ‘31% of people in a family with a disabled person are in poverty after housing costs, with 18% of people in a family with no disabled people.
- 44% of disabled young adults (16-24) are in poverty, along with 66% of single disabled people living alone.
- 25% of working age disabled people earn less than 50% of the median income, compared with 13% of non-disabled working people.
- 18% of working age disabled people are severely materially deprived, three times as high as the proportion of non-disabled working age people.’

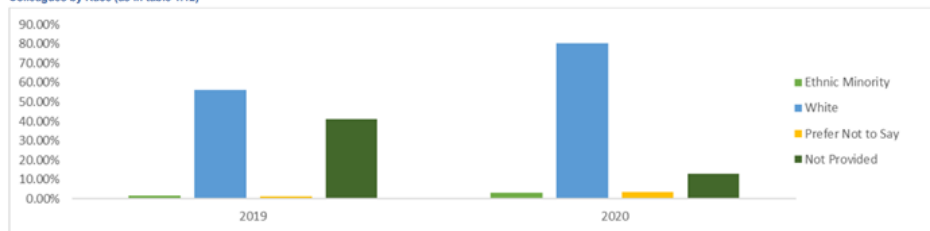
Link to disability and living in socially deprived areas with subsequent concerns challenges considered

<https://www.healthscotland.scot/health-topics/smoking/smoking-prevention>

Race

Race	2019	2020	Variance
Ethnic Minority	1.82%	3.16%	1.34%
White	56.06%	80.40%	24.34%
Prefer Not to Say	1.07%	3.48%	2.41%
Not Provided	41.05%	12.96%	-28.09%
Total	100.00%	100.00%	

Colleagues by Race (as in table 1.12)



Source: SQA Workforce Equality Monitoring Report 2019 – 2021

Currently 3% of SQA employees declared themselves as Minority Ethnicity against a national (Scotland) average of 5%.

[Health and mental health statistics - Institute of Race Relations \(irr.org.uk\)](#) states:

'[Government statistics](#) show that Black / African / Caribbean / Black British people in particular have higher rates of mental illness and are therefore more likely to encounter mental health services. The 2017 [Race Disparity Audit](#) found that Black women are the group most likely to have experienced a common mental disorder such as anxiety or depression and that Black men are the group most likely to have experienced a psychotic disorder. [Statistics](#) show that Black men are ten times more likely than white men to experience such a disorder.'

<https://www.nhs.uk/live-well/quit-smoking/stopping-smoking-mental-health-benefits> indicates a link to smoking and increased anxiety, depression, and poor mental health.

[Scotland's Ethnic Minorities face overcrowding, poverty and unemployment, says equality and human rights body | Equality and Human Rights Commission \(equalityhumanrights.com\)](#)

Shows a link to race and living in socially deprived areas with subsequent challenges considered

<https://www.healthscotland.scot/health-topics/smoking/smoking-prevention>

Religion or Belief

Religion or Belief	2019	2020	Variance
Christian	20.69%	29.82%	9.13%
Non-Christian	11.47%	17.28%	5.81%
None	20.69%	29.29%	8.61%
Prefer not to say	3.75%	10.33%	6.58%
Not Provided	43.41%	13.28%	-30.13%
Total	100.00%	100.00%	

Source: SQA Workforce Equality Monitoring Report 2019 – 2021

<https://www.ons.gov.uk/peoplepopulationandcommunity/culturalidentity/religion/articles/religionandhealthinenglandandwales/february2020>

Some evidence that people identifying with a religion are less likely to smoke, but this is limited to England and Wales population.

Sex

Table 1.01 Colleagues by gender

Gender (Sex)	2019	2020	Variance
Female	61.20%	61.64%	0.44%
Male	38.80%	38.36%	-0.44%
Total	100.00%	100.00%	

Source: SQA Workforce Equality Monitoring Report 2019 – 2021

A greater number of SQA employees overall are female - 62% female versus 38% male. A 60% representation of females across most grades is evident with a decrease to circa 40% for more senior grades. From management information reporting we know that 60% of home-based workers are female and 40% male.

[ScotGovSmoking2021](#)

We noted that people who identify as smokers are slightly higher (12%) male than (11%) female.

Sexual Orientation

Sexual Orientation	2019	2020	Variance
Bisexual	0.96%	1.26%	0.30%
Gay man	1.39%	2.11%	0.71%
Gay woman / Lesbian	0.96%	1.05%	0.09%
Heterosexual/straight	46.20%	70.60%	24.41%
In another way	0.11%	0.21%	0.10%
Not sure	0.11%	0.11%	0.00%
Prefer not to say	2.79%	8.01%	5.22%
Not Provided	47.48%	16.65%	-30.83%
Total	100.00%	100.00%	

Source: SQA Workforce Equality Monitoring Report 2019 – 2021

	<p>LGBT in Britain - Health (stonewall.org.uk) reported in 2018 that half of LGBT people (52 per cent) experienced depression in that year. One in eight LGBT people aged 18-24 (13 per cent) said they had attempted to take their own life in the last year.</p> <p>About LGBTIQ+ mental health - Mind makes the link that, although anyone can experience a mental health problem, those who identify as LGBTIQ+ are more likely to develop problems like: low self-esteem depression anxiety, including social anxiety eating problems misusing drugs and alcohol self-harm suicidal feelings other mental health problems.</p> <p>https://www.statista.com/statistics/1189954/population-of-current-smokers-by-sexual-orientation-uk/ Higher likelihood of smoking among people identifying as gay or lesbian (19.5%), bisexual (17.2%), other (17.8%) than heterosexual/straight (13.8%).</p> <p>As mentioned previously https://www.nhs.uk/live-well/quit-smoking/stopping-smoking-mental-health-benefits indicates a link to smoking and increased anxiety, depression and poor mental health generally.</p>
Gender Re-assignment (Gender identity and transgender)	<p>No equality profiling data is currently captured by the SQA.</p> <p>Gender transition Health Information Bupa UK and Gender and Mental Health Support and Advice YoungMinds offer mental health guidance to people undergoing or thinking about gender re-assignment, making a clear link to the risk of poorer mental health.</p> <p>As mentioned previously https://www.nhs.uk/live-well/quit-smoking/stopping-smoking-mental-health-benefits indicates a link to smoking and increased anxiety, depression and poor mental health generally.</p>
Marriage/Civil Partnership	<p>We have no evidence in relation to SQA employees or from wider research that there is a significant impact, positive or negative, for this group in terms of this policy.</p>

Pregnancy / Maternity	Colleagues			
	Pregnancy Status	2019	2020	Variance
	Not Pregnant	98.25%	98.95%	0.70%
	Pregnant	1.75%	1.05%	-0.70%
	Total	100.00%	100.00%	
	Source: SQA Workforce Equality Monitoring Report 2019 – 2021			
	https://www.scotpho.org.uk/behaviour/tobacco-use/data/maternal-smoking Decline of women identifying as smokers when booking ante natal appointments, was estimated as 13% in 2020/21.			
	https://maternityaction.org.uk/advice/health-and-safety-during-pregnancy-and-on-return-to-work/ Health and Safety rights and employer considerations during and returning from pregnancy.			
Care experience (where relevant)	SQA currently have no data that shows how many colleagues are Care Experienced.			

Impact and Opportunities for Action

The impact that a policy or practice has on an equality group may be different and this requires to be recorded. The impact may not always be negative. Actions are taken to address any differential impact, and include actions to mitigate against any negative impact, to advance equality and to foster good relations between groups.

Each section contains questions for each equality group. These questions are here to support consideration; however, you can provide further detail. Focus initially on the equality groups that would be affected by this policy. If you do not consider that certain equality groups would be affected by this policy, you may leave these sections.

Protected Characteristic	General Equality Duty
Age	Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the Equality Act 2010
	<p>Risks of Discrimination We concluded there is no reasonable evidence to suggest this policy could adversely affect employees on the grounds of this 'Protected Characteristic.' Neutral Impact Recorded.</p>
Age	Advance equality of opportunity
	The offer of specific support with time off work to reduce or stop smoking will positively impact on the two age groups (25-34) and (45-54) more likely to identify as smokers (either e cigarettes or cigarettes).
	Foster good relations
The policy is unlikely to impact on the promotion of good relations between people in this equality group.	

Protected Characteristic	General Equality Duty
Disability	Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the Equality Act 2010
	<p>Risks of Discrimination: We considered whether individuals with disabilities may have difficulty in accessing designated smoking areas. (The nature of the difficulty would depend on the disability.) This is mitigated by SQA building locations being modern with designated smoking areas accessible to people who may have a disability.</p> <p>We also conclude there is some evidence to suggest this policy could adversely affect employees on the grounds of this 'Protected characteristic.' As this equality group are more likely to identify as smokers and have a higher (though not necessarily linked to smoking) likelihood of poor mental health and wellbeing this policy may adversely impact this equality group. Sharing this policy specifically to gauge any lived experiences with the Disability network will help to monitor any adverse impacts. Any potentially negative impact is mitigated by support noted through the Employee Assistance Programme (EAP) and for time off/direct links to attend cessation and other related activities to reduce or stop smoking.</p> <p>A potential negative impact with mitigation to share with Rainbow network and continue to monitor EAP usage is recorded.</p>
Disability	<u>Advance equality of opportunity</u>
	The link between disability and health inequality (referenced in evidence section above) can be improved to anyone directly employed or with family employed by SQA through the offer of free accessible support to reduce or stop smoking. We consider therefore that there is a positive impact of this policy on this equality group.
	<u>Foster good relations</u>
The policy is unlikely to impact on the promotion of good relations between people in this equality group.	

Protected Characteristic	General Equality Duty
Race	Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the Equality Act 2010
	<p>Risks of Discrimination: We also conclude there is some evidence to suggest this policy could adversely affect employees on the grounds of this 'Protected characteristic.' As this equality group are more likely to identify as smokers and have a higher (though not necessarily linked to smoking) likelihood of poor mental health and wellbeing this policy may adversely impact this equality group. Sharing this policy specifically to gauge any lived experiences with the ACE network will help to monitor any adverse impacts. Any potentially negative impact is mitigated by support noted through the EAP provision and for time off/direct links to attend cessation and other related activities to reduce or stop smoking. A potential negative impact with mitigation to share with ACE network and continue to monitor EAP usage is recorded.</p>
	<i>Advance equality of opportunity</i>
	The link between disability and health inequality (referenced in evidence section above) can be improved to anyone directly employed or with family employed by SQA through the offer of free accessible support to reduce or stop smoking. We consider therefore that there is a positive impact of this policy on this equality group.
	<i>Foster good relations</i>
The policy is unlikely to impact on the promotion of good relations between people in this equality group.	

Protected Characteristic	General Equality Duty
Religion or Belief	Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the Equality Act 2010
	Risks of Discrimination We concluded there is no reasonable evidence to suggest this policy could adversely affect employees on the grounds of this 'Protected Characteristic.' Neutral Impact Recorded.
	Advance equality of opportunity
	We conclude there is no reasonable evidence to suggest this policy could adversely affect employees on the grounds of this 'Protected characteristic.'
	Foster good relations
	The policy is unlikely to impact on the promotion of good relations between people in this equality group.
Protected Characteristic	General Equality Duty
Sex	Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the Equality Act 2010
	Risks of Discrimination We conclude there is no reasonable evidence to suggest this policy could adversely affect employees on the grounds of this 'Protected characteristic.' Neutral Impact Recorded.
	Advance equality of opportunity
	We conclude there is no reasonable evidence to suggest this policy could adversely affect employees on the grounds of this 'Protected characteristic.'
	Foster good relations
	The policy is unlikely to impact on the promotion of good relations in this equality group.

Protected Characteristic	General Equality Duty
Sexual Orientation	Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the Equality Act 2010
	<p>Risks of Discrimination:</p> <p>We conclude there is some evidence to suggest this policy could adversely affect employees on the grounds of this 'Protected characteristic.' As this equality group are more likely to identify as smokers and have a higher (though not necessarily linked to smoking) likelihood of poor mental health and wellbeing this policy may impact more on this equality group. Sharing this policy specifically to gauge any lived experiences with the Rainbow network will help to monitor any adverse impacts. Any potentially negative impact is mitigated by support noted through the EAP provision and for time off/direct links to attend cessation and other related activities to reduce or stop smoking.</p> <p>A negative impact with mitigation to share with Rainbow network and continue to monitor EAP usage is recorded.</p>
	Advance equality of opportunity
	We conclude there is no reasonable evidence to suggest this policy could adversely affect employees on the grounds of this 'Protected characteristic.'
	Foster good relations
	The policy is unlikely to impact on the promotion of good relations in this equality group. Noted action to share with Rainbow network group is recorded above, however.

Protected Characteristic	General Equality Duty
Gender Re-assignment (Gender identity and transgender)	Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the Equality Act 2010
	<p>Risks of Discrimination Given the lack of data within SQA we conclude there is no reasonable evidence to suggest this policy could adversely affect SQA employees on the grounds of this 'Protected characteristic.'</p> <p>Neutral Impact Recorded.</p>
	<i>Advance equality of opportunity</i>
	Given link to poorer mental health in this equality group and related evidenced links to smoking, we conclude that the support and time off offered to reduce or stop smoking will have a potentially positive impact for this group.
	<i>Foster good relations</i>
The policy is unlikely to impact on the promotion of good relations in this equality group.	

Protected Characteristic	General Equality Duty
Marriage/Civil Partnership	Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the Equality Act 2010
	<p>Risks of Discrimination</p> <p>We conclude there is no reasonable evidence to suggest this policy could adversely affect employees on the grounds of this 'Protected characteristic.'</p> <p>Neutral Impact Recorded.</p>
	Advance equality of opportunity
	<p>We conclude there is no reasonable evidence to suggest this policy could adversely affect employees on the grounds of this 'Protected characteristic.'</p>
	Foster good relations
	<p>The policy is unlikely to impact on the promotion of good relations in this equality group.</p>

Protected Characteristic	General Equality Duty
Pregnancy / Maternity	Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the Equality Act 2010
	<p>Risks of Discrimination</p> <p>We conclude there is no reasonable evidence to suggest this policy could adversely affect employees on the grounds of this 'Protected characteristic.'</p> <p>We note that the Maternity policy covers risk assessments before and after pregnancy which would address known health risks directly or indirectly related to smoking at work during or after pregnancy.</p> <p>Neutral Impact Recorded.</p>

Pregnancy / Maternity	Advance equality of opportunity
	We conclude there is no evidence to suggest that this policy may advance equality of opportunity for this equality group.
	Foster good relations
	The policy is unlikely to impact on the promotion of good relations in this equality group
General Equality Duty	
Care experience (where relevant)	Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the Equality Act 2010
	We conclude there is no evidence to suggest that this policy may impact directly / indirectly on people who are Care Experienced and therefore make no further recommendations in this area. Neutral Equality related impact is therefore recorded in this area.
	Advance equality of opportunity
	We conclude there is no evidence to suggest that this policy may impact directly / indirectly on people who are Care Experienced and therefore make no further recommendations in this area
	Foster good relations
	We conclude there is no evidence to suggest that this policy may impact directly / indirectly on people who are Care Experienced and therefore make no further recommendations in this area

Rationale

If you are proceeding with a decision that may have a negative impact and are not putting in place actions to mitigate against this, please explain how this is objectively justified.

All identified negative impacts have mitigating actions.