

## 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.

<b>Agreed Schedule Review Date</b>	<b>By September 2024</b>	<b>Additional Schedule Review Date</b>	<b>By September 2023</b>
------------------------------------	--------------------------	--	--------------------------

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.

Equality Impact Assessment – Alcohol, Drug and Substance Misuse V1.0

<b>Required Actions</b>	<b>Owner</b>	<b>Date</b>	<b>Comment &amp; Review</b>
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	

Equality Impact Assessment – Alcohol, Drug and Substance Misuse V1.0

<b>Identified Actions: General Equality Duty</b>	<b>General Equality Duty</b>	<b>Owner</b>	<b>Date</b>	<b>Comment &amp; Review</b>
Outcomes of the policy should continue to be monitored for any trends that suggest employees may be disadvantaged directly or indirectly as a result of their disability.	Advance equality of opportunity	<b>HR Shared Services Manager</b>	<b>By September 2024</b>	
We recommend that SQA creates a new <i>Gender Identity</i> policy to facilitate and advance equality of opportunity to employees who are LGBTQ+.	Advance equality of opportunity	<b>HR Shared Services Manager</b>	<b>By September 2024</b>	
Consideration should be given to reporting on HR casework by protected characteristic.	Advance equality of opportunity	<b>HR Shared Services Manager</b>	<b>By September 2024</b>	

**Policy Aims**

<b>Name of Policy or Practice:</b>	Alcohol, Drugs and other Substance Misuse Policy
<b>New Policy or Revision?</b>	Revision
<b>Name of Policy Owner:</b>	Head of Human Resources
<b>Date Policy Owner Confirmed Completion:</b>	Draft

**What is the rationale for this policy or practice?**

The stated aims of SQA's Alcohol, Drugs and other Substance Misuse Policy are:

- We recognise that the misuse of alcohol, drugs or other substances can have a serious impact to individuals and in the workplace and pose a serious health and safety risk. This policy aims to create an environment that encourages staff with an alcohol, drug, or other substance misuse problem to voluntarily seek help and not to conceal, deny or cover up the problem.
- This policy provides a confidential and supportive mechanism for colleagues to get support from line-managers to provide them with help with alcohol, drug, or other substance related performance issues from Occupational Health.
- This policy reflects our overall concern for staff health, safety, welfare, and wellbeing and complies with all relevant legislation. We are committed to promoting healthy lifestyle choices and options for all colleagues. We recognise that alcohol, drug, and other substance misuse is a widespread problem in society, and this policy details our approach to dealing with these issues compassionately, fairly, and consistently.

**Please note that a total of 0 employees have been subjected to this policy in the last two years in SQA meaning that the identification of any local Equality related impacts is practically impossible on the grounds that a zero sample size exists.**

**What evidence is there to support the implementation or development of this policy or practice?**

ACAS state that employers should have alcohol and drugs policies. They state that:

- Policies should be used to ensure problems are dealt with effectively and consistently.
- Under the misuse of drugs act drugs are classified according to their perceived danger.
- Employers have legal obligations under the Health and Safety at work Act 1974, The Transport and Works Act 1992 and The Misuse of Drugs Act 1971.
- Managers should be trained to deal with workers who seek help.

“Any alcohol or drugs policy should be used to ensure problems are dealt with effectively, and consistently and early on in the process. They should protect workers and encourage sufferers to seek help. An education programme for managers is particularly important: it could include details of signs to look for, how to deal with workers who seek help, and where expert advice and help may be obtained. Being able to direct your workers to help is an important step. This may help them to recognise the dangers of alcohol, drug and other substance misuse and encourage them to seek help. It may also persuade your management and staff that covering up for someone with a drugs problem is not in that person's long-term interests.”

The Equality Act 2010 (Disability) Regulations 2010 (SI 2010/2128) specifically provide that addiction to alcohol, nicotine or any other substance (except where the addiction originally resulted from the administration of medically prescribed drugs) **is to be treated as not amounting to an impairment** for the purposes of the Equality Act 2010. Alcohol addiction is not, therefore, covered by the Act.

The World Health Organisation state that in relation to factors that impact alcohol consumption and alcohol related harm: “Individual factors include age, gender, family circumstances and socio-economic status. Although there is no single risk factor that is dominant, the more vulnerabilities a person has, the more likely the person is to develop alcohol-related problems as a result of alcohol consumption. Poorer individuals experience greater health and social harms from alcohol consumption than more affluent individuals.” (WHO)

**What are the aims of this policy or practice?**

As previously stated, the aims of this policy are:

We recognise that the misuse of alcohol, drugs or other substances can have a serious impact to individuals and in the workplace and pose a serious health and safety risk. This policy aims to create an environment that encourages staff with an alcohol, drug, or other substance misuse problem to voluntarily seek help and not to conceal, deny or cover up the problem.

This policy provides a confidential and supportive mechanism for colleagues to get support from line-managers to provide them with help with alcohol, drug, or other substance related performance issues from Occupational Health.

This policy reflects our overall concern for staff health, safety, welfare, and wellbeing and complies with all relevant legislation. We are committed to promoting healthy lifestyle choices and options for all colleagues. We recognise that alcohol, drug, and other substance misuse is a widespread problem in society, and this policy details our approach to dealing with these issues compassionately, fairly, and consistently.

The policy itself is divided in two discrete sections:

**Policy Structure:**

1: Part A – Policy detail.

2: Part B – Procedures for SQA managers / employees to follow.

**What are the aims of this policy or practice? (continued)**

The following SQA policies are also related to the Alcohol, Drugs and other Substance Misuse Policy:

- Attendance Management
- Code of Conduct
- Discipline
- Improving Performance
- Redeployment

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

SQA acknowledges that people who share / do not share, certain Protected Characteristics may, on balance:

- Experience different performance outcomes – for example, older workers and disabled workers.
- Experience compound discrimination or intersectionality i.e. where a person has one or more characteristics and may be subjected to consequentially greater levels of disadvantage.
- Have greater difficulties following or complying with the written requirements of a workplace policy e.g. articulating a reason for issues / problems in writing, taking part in one to one meetings, following a reporting flowchart etc.
- Experience higher levels of anxiety in respect of formal meetings or feel less comfortable discussing their problems with people of the other sex.

**The development, implementation and analysis of the effects of this policy are therefore highly relevant to people from all Equality groups as they may risk experiencing disproportionate impacts or outcomes.**

**It is important that SQA identifies and takes action to mitigate or remove any disadvantage identified which is the overall purpose of this Equality Impact Assessment.**



## Evidence, Consultation and Engagement

### What stakeholders have you engaged within the development of this policy or practice?

As this is an internal policy, SQA will only consult with internal groups. These include:

- ACE (Appreciate Culture and Ethnicity) Network.
- SQA Disability Network.
- MAC (Make A Change Group).
- Mental Health First Aiders Forum.
- SQA Rainbow Network.
- Women's Network.
- Parent & Carers 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.

**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 within the development of this policy or practice? (continued)**

**Staff Network Consultations:**

In June 2021, we formed a dedicated *Equality Impact Assessment Project Group* (EIAPG) with the aim of reviewing, assessing and providing feedback from staff on all SQA HR policies from Equality perspectives.

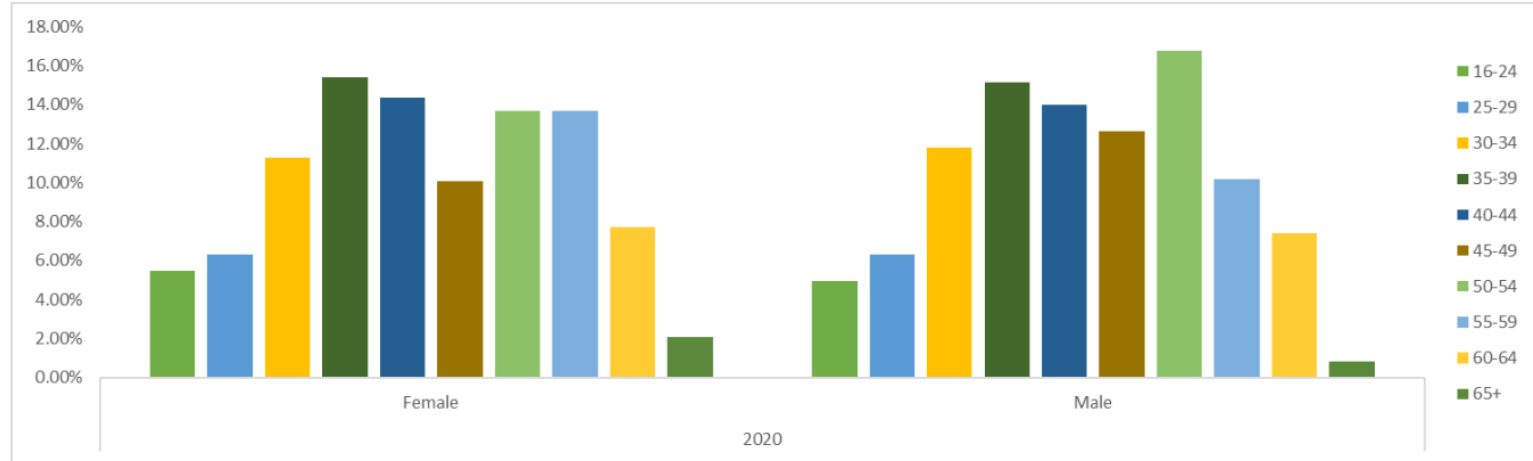
The EIAPG group consists of representatives from each of SQA's staff networks listed on the previous page of this document.

**Evidence, feedback and actions from all EIAPG staff network consultations** are recorded on a dedicated SQA *Microsoft Teams* page which was specifically created with the aim of listing potential equality risks that exist in H.R. policies / activities, sharing resources, recording feedback and scheduling future consultation meetings.

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

**Age:**

Colleagues by age band and gender (sex) 2020 (as in Table 1.05)



The bar chart above illustrates SQA colleagues by age band and gender (sex) in 2020.

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 SQA has recently seen a decrease in younger (under 35) employees.

Comparisons between 2019 and 2020 data show that the greatest increase in the proportion of female colleagues is within the 60–64 age band - an increase of 12 colleagues.

The 30–34 age band saw the largest reduction of female colleagues – a total of seven people. Over the same period, there was an increase in the proportion of male colleagues within the 50-54 age band - an overall increase of nine people. The largest decline in the proportion of male colleagues was in the 30-34 age band, with seven fewer people. The largest decrease was seen in the 30–34 age band for both male and female colleagues - with an overall reduction of 14 people.

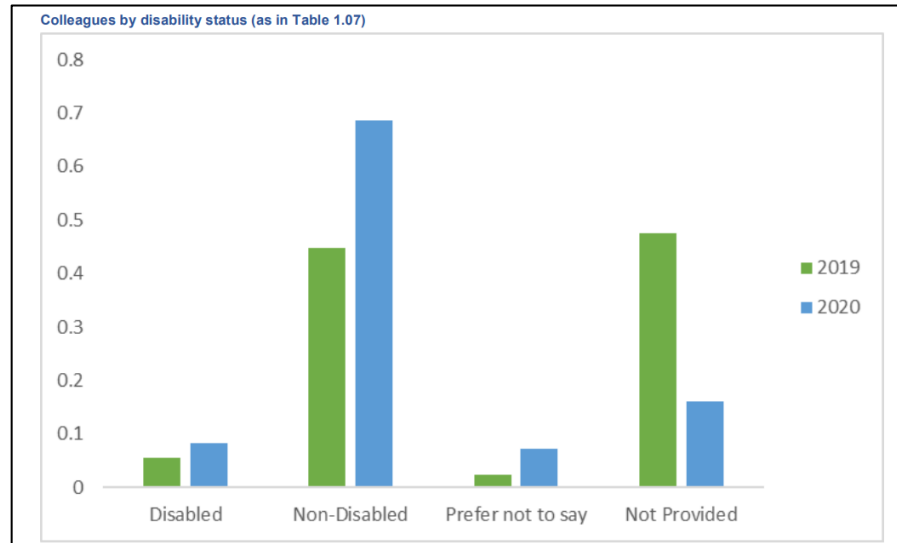
Source: SQA Workforce Equality Monitoring Report 2019 - 2021

[https://www.sqa.org.uk/sqa/files\\_ccc/workforce-equality-monitoring-report-2019-2021.pdf](https://www.sqa.org.uk/sqa/files_ccc/workforce-equality-monitoring-report-2019-2021.pdf)

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

**Disability**

**A total of 8.2% of SQA employees declared a disability last year.** Declaration rates have significantly improved from a total response rate under the *Not Disclosed / Prefer not to say* category of 49.9% in 2019 (roughly half of employees) to a much reduced 23.1 % in 2020.



The bar chart above illustrates colleagues by disability status in 2019 and 2020

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)

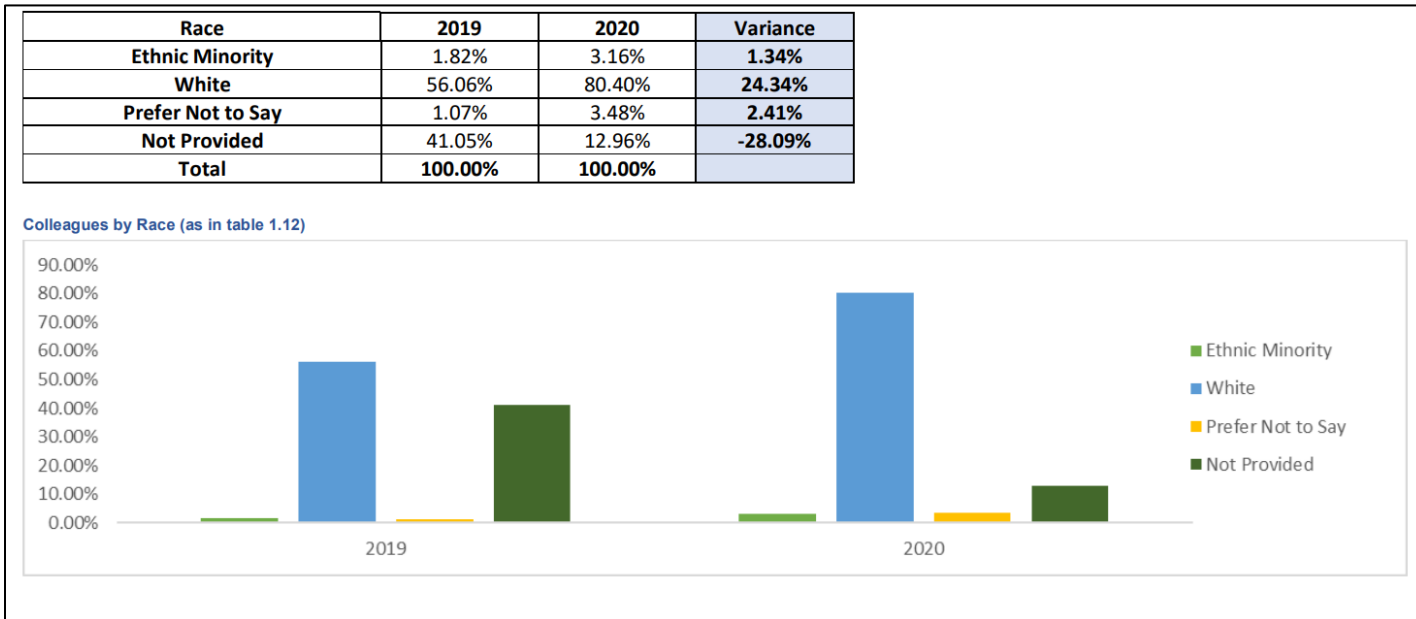
A total of 55% of disabled employees are female and 45% are male. 63% of colleagues who have declared a disability are within the grade range 06 to Head of Service. Head of Service has the largest **percentage** of colleagues declaring a disability (13%) whereas Grade 6 has the largest overall **number** of colleagues declaring a disability at 23%.

Source: SQA Workforce Equality Monitoring Report 2019 – 2021

[https://www.sqa.org.uk/sqa/files\\_ccc/workforce-equality-monitoring-report-2019-2021.pdf](https://www.sqa.org.uk/sqa/files_ccc/workforce-equality-monitoring-report-2019-2021.pdf)

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

**Race  
Ethnicity**



The bar chart above shows SQA colleagues by Race in 2019 – 2020 and the variance between the two years.

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

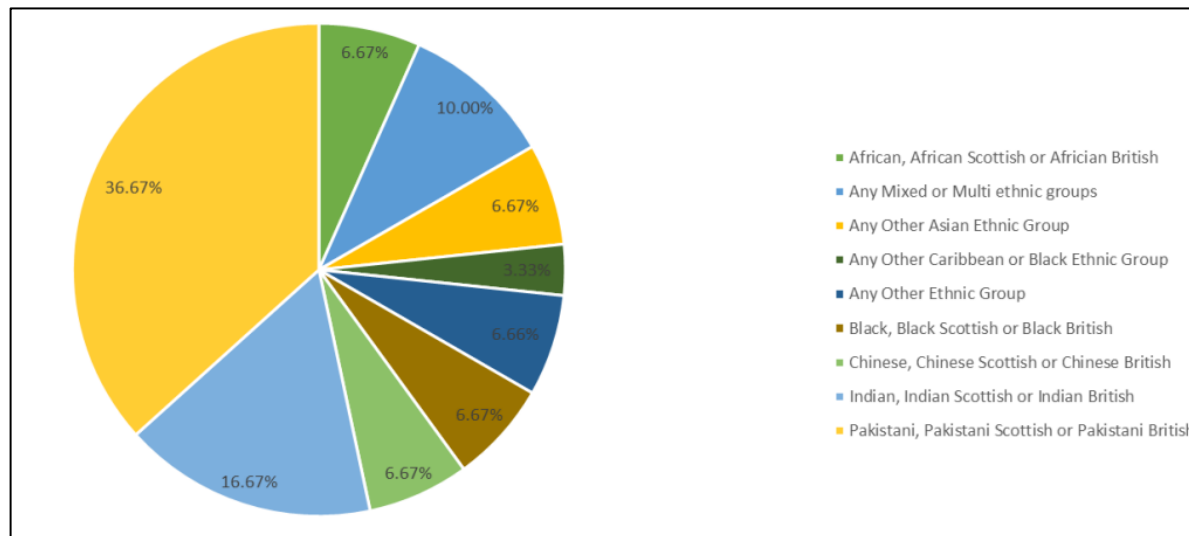
A further breakdown of ethnicity (overleaf) indicates that *Chinese, Indian and Mixed Ethnicity* groups are currently the predominant minority ethnicities in SQA.

Source: SQA Workforce Equality Monitoring Report 2019 – 2021

[https://www.sqa.org.uk/sqa/files\\_ccc/workforce-equality-monitoring-report-2019-2021.pdf](https://www.sqa.org.uk/sqa/files_ccc/workforce-equality-monitoring-report-2019-2021.pdf)

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

**Race  
Ethnicity  
(continued)**



The pie chart above shows SQA colleagues by Black and minority ethnicities 2020 (as in table 1.15 below)

Source: SQA Workforce Equality Monitoring Report 2019-2021

[https://www.sqa.org.uk/sqa/files\\_ccc/workforce-equality-monitoring-report-2019-2021.pdf](https://www.sqa.org.uk/sqa/files_ccc/workforce-equality-monitoring-report-2019-2021.pdf)

**Race  
Ethnicity  
(continued)**

Table 1.15 Race: Colleagues by black and minority ethnicities

Black and Minority Ethnicities	2019	2020	Variance
African, African Scottish or African British	5.88%	6.67%	0.78%
Any Mixed or Multi ethnic groups	11.76%	10.00%	-1.76%
Any Other Asian Ethnic Group	5.88%	6.67%	0.78%
Any Other Caribbean or Black Ethnic Group		3.33%	3.33%
Any Other Ethnic Group		6.66%	6.66%
Black, Black Scottish or Black British	5.88%	6.67%	0.78%
Chinese, Chinese Scottish or Chinese British	11.76%	6.67%	-5.10%
Indian, Indian Scottish or Indian British	17.65%	16.67%	-0.98%
Pakistani, Pakistani Scottish or Pakistani British	41.18%	36.67%	-4.51%
<b>Total</b>	<b>100.00%</b>	<b>100.00%</b>	

The table above shows SQA colleagues by Black and minority ethnicities.

Source: SQA Workforce Equality Monitoring Report 2019-2021

[https://www.sqa.org.uk/sqa/files\\_ccc/workforce-equality-monitoring-report-2019-2021.pdf](https://www.sqa.org.uk/sqa/files_ccc/workforce-equality-monitoring-report-2019-2021.pdf)

**What evidence about equality groups do you have to support this assessment? (continued)**

**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%
<b>Total</b>	<b>100.00%</b>	<b>100.00%</b>	

The table above (1.16) shows colleague religion / belief data for 2019 – 2020 and variance between the two years.

An improved declaration rate was also shown for this characteristic in 2020. *Christian* and *No Religion* account for nearly 60% of all responses.

Source: SQA Workforce Equality Monitoring Report 2019-2021

[https://www.sqa.org.uk/sqa/files\\_ccc/workforce-equality-monitoring-report-2019-2021.pdf](https://www.sqa.org.uk/sqa/files_ccc/workforce-equality-monitoring-report-2019-2021.pdf)



**Sex**

Grade	Gender (Sex)					
	Female			Male		
	2019	2020	Variance	2019	2020	Variance
<b>1</b>	83.33%	66.67%	<b>-16.67%</b>	16.67%	33.33%	<b>16.67%</b>
<b>3</b>	65.15%	65.00%	<b>-0.15%</b>	34.85%	35.00%	<b>0.15%</b>
<b>4</b>	63.28%	64.71%	<b>1.43%</b>	36.72%	35.29%	<b>-1.43%</b>
<b>5</b>	58.02%	61.54%	<b>3.51%</b>	41.98%	38.46%	<b>-3.51%</b>
<b>6</b>	69.90%	69.90%		30.10%	30.10%	
<b>7</b>	59.76%	57.89%	<b>-1.86%</b>	40.24%	42.11%	<b>1.86%</b>
<b>8</b>	53.54%	56.34%	<b>2.80%</b>	46.46%	43.66%	<b>-2.80%</b>
<b>HOS</b>	39.39%	40.00%	<b>0.61%</b>	60.61%	60.00%	<b>-0.61%</b>
<b>EMT</b>	57.14%	42.86%		57.14%	42.86%	
<b>Total</b>	<b>61.20%</b>	<b>61.64%</b>	<b>0.44%</b>	<b>38.80%</b>	<b>38.36%</b>	<b>-0.44%</b>

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.

The table above (1.02) shows colleague sex by grade for 2019 – 2020 and the variance between the two years.

Source: SQA Workforce Equality Monitoring Report 2019-2021

[https://www.sqa.org.uk/sqa/files\\_ccc/workforce-equality-monitoring-report-2019-2021.pdf](https://www.sqa.org.uk/sqa/files_ccc/workforce-equality-monitoring-report-2019-2021.pdf)

Table 1.01 Colleagues by gender

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

The table above (1.01) shows colleagues by gender and the variance between 2019 and 2020.

Source: SQA Workforce Equality Monitoring Report 2019-2021

[https://www.sqa.org.uk/sqa/files\\_ccc/workforce-equality-monitoring-report-2019-2021.pdf](https://www.sqa.org.uk/sqa/files_ccc/workforce-equality-monitoring-report-2019-2021.pdf)

<b>Sex (Continued)</b>	<p><i>Women experiencing the menopause are the fastest-growing demographic in the workforce, so it's important now more than ever to be able to speak openly about menopause at work.</i></p> <p><i>Menopause can affect a woman's working life. Sometimes menopausal symptoms or working conditions can impact your ability to concentrate or carry out your role to the best of your ability.</i></p> <p><i>In a survey of 1,000 adults in the UK, the British Menopause Society found that 45% of women felt that menopausal symptoms had a negative impact on their work and 47% who needed to take a day off work due to menopause symptoms say they wouldn't tell their employer the real reason.</i></p> <p><i>Many women have said that they often find managing their menopause symptoms in the workplace very challenging. Coping with symptoms in the workplace can be hard, especially as many women find it difficult to talk about menopause at work.</i></p> <p>Source: <a href="http://www.nhsinform.scot">www.nhsinform.scot</a></p>
------------------------	---

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

**Sexual Orientation**

**SQA Workforce**

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

This table (1.18) shows colleagues by sexual orientation for 2019 – 2020 and the variance between the two years.

Source: SQA Workforce Equality Monitoring Report 2019-2021

[https://www.sqa.org.uk/sqa/files\\_ccc/workforce-equality-monitoring-report-2019-2021.pdf](https://www.sqa.org.uk/sqa/files_ccc/workforce-equality-monitoring-report-2019-2021.pdf)

What evidence about equality groups do you have to support this assessment?																											
<b>Gender Re-assignment (Gender identity and transgender)</b>	<p>No equality profiling data is currently captured by SQA.</p> <p>One of the recommendations from this Equality Impact Assessment is that <u>SQA adds <i>Gender Identity</i> (i.e. people who identify as more than one gender or none) to all future Equality Monitoring reporting.</u></p>																										
<b>Marriage/Civil Partnership</b>	<p><b>Table 1.10: Colleagues by relationship status</b></p> <table border="1"> <thead> <tr> <th>Relationship status</th> <th>2019</th> <th>2020</th> <th>Variance</th> </tr> </thead> <tbody> <tr> <td>Married/Civil Partnership</td> <td>30.01%</td> <td>44.66%</td> <td>14.65%</td> </tr> <tr> <td>Single</td> <td>24.44%</td> <td>35.87%</td> <td>11.44%</td> </tr> <tr> <td>Prefer not to say</td> <td>1.93%</td> <td>5.71%</td> <td>3.79%</td> </tr> <tr> <td>Not Provided</td> <td>43.62%</td> <td>13.76%</td> <td>-29.87%</td> </tr> <tr> <td><b>Total</b></td> <td><b>100.00%</b></td> <td><b>100.00%</b></td> <td></td> </tr> </tbody> </table> <p>This table (1.10) shows colleagues by marriage/civil partnership for 2019 – 2020 and the variance between the two years.</p> <p>Source: SQA Workforce Equality Monitoring Report 2019-2021  <a href="https://www.sqa.org.uk/sqa/files_ccc/workforce-equality-monitoring-report-2019-2021.pdf">https://www.sqa.org.uk/sqa/files_ccc/workforce-equality-monitoring-report-2019-2021.pdf</a></p>			Relationship status	2019	2020	Variance	Married/Civil Partnership	30.01%	44.66%	14.65%	Single	24.44%	35.87%	11.44%	Prefer not to say	1.93%	5.71%	3.79%	Not Provided	43.62%	13.76%	-29.87%	<b>Total</b>	<b>100.00%</b>	<b>100.00%</b>	
Relationship status	2019	2020	Variance																								
Married/Civil Partnership	30.01%	44.66%	14.65%																								
Single	24.44%	35.87%	11.44%																								
Prefer not to say	1.93%	5.71%	3.79%																								
Not Provided	43.62%	13.76%	-29.87%																								
<b>Total</b>	<b>100.00%</b>	<b>100.00%</b>																									
<b>Pregnancy / Maternity</b>	<table border="1"> <thead> <tr> <th rowspan="2">Pregnancy Status</th> <th colspan="3">Colleagues</th> </tr> <tr> <th>2019</th> <th>2020</th> <th>Variance</th> </tr> </thead> <tbody> <tr> <td>Not Pregnant</td> <td>98.25%</td> <td>98.95%</td> <td>0.70%</td> </tr> <tr> <td>Pregnant</td> <td>1.75%</td> <td>1.05%</td> <td>-0.70%</td> </tr> <tr> <td><b>Total</b></td> <td><b>100.00%</b></td> <td><b>100.00%</b></td> <td></td> </tr> </tbody> </table>			Pregnancy Status	Colleagues			2019	2020	Variance	Not Pregnant	98.25%	98.95%	0.70%	Pregnant	1.75%	1.05%	-0.70%	<b>Total</b>	<b>100.00%</b>	<b>100.00%</b>						
Pregnancy Status	Colleagues																										
	2019	2020	Variance																								
Not Pregnant	98.25%	98.95%	0.70%																								
Pregnant	1.75%	1.05%	-0.70%																								
<b>Total</b>	<b>100.00%</b>	<b>100.00%</b>																									

<b>Pregnancy / Maternity (Continued)</b>	<p>The table above (1.20) shows colleagues by pregnancy / maternity for 2019 – 2020 and the variance between the two years.</p> <p>Source: SQA Workforce Equality Monitoring Report 2019-2021 <a href="https://www.sqa.org.uk/sqa/files_ccc/workforce-equality-monitoring-report-2019-2021.pdf">https://www.sqa.org.uk/sqa/files_ccc/workforce-equality-monitoring-report-2019-2021.pdf</a></p>
<b>What evidence about equality groups do you have to support this assessment? (continued)</b>	
<b>Care experience (where relevant)</b>	<p>Human Resources currently have no data for SQA that shows how many colleagues are Care Experienced.</p>

### **Impact and Opportunities for Action**

The impact that a policy or practice has on an equality group may be different and needs 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.

### **Use of the term Discrimination:**

Please note that for the purposes of this document we have used the term Discrimination as a generic descriptor which takes into account six discrete elements:

- Direct Discrimination
- Indirect Discrimination
- Harassment
- Victimisation
- Discrimination by perception
- Associative discrimination

Protected Characteristic	General Equality Duty
Age	<p data-bbox="488 264 2029 331">Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the <i>Equality Act 2010</i>.</p> <p data-bbox="488 368 696 400"><b>Equality Risks:</b></p> <p data-bbox="488 437 2029 504">Use of this policy is very low in SQA, and data is not specifically analysed by Protected Characteristics. Identification of equality related trends (however small) is therefore currently not possible.</p> <p data-bbox="488 544 2029 651"><b>There is national evidence available indicating that people of certain ages are more likely to be addicted to or use certain substances or be more severely impacted by alcohol, drug or substance dependency</b> (Please see overleaf).</p> <p data-bbox="488 691 2029 798">However, the application of this policy in SQA is <b>wholly irrespective of an employee’s Age</b> and is justified as part of SQA’s legal obligations under the <i>Health and Safety at Work Act 1974</i>, <i>The Transport and Works Act 1992</i> and <i>The Misuse of Drugs Act 1971</i>. (All being ultimately criminal and not civil legislation).</p> <p data-bbox="488 837 2029 991">As previously stated, this policy is intended to provide “a confidential and supportive mechanism for colleagues to get support from line-managers to provide them with help for alcohol, drug, or other substance related performance issues from Occupational Health.” <b>The overall impact of the policy is intended to be positive for anyone</b> who needs to access it regardless of their age.</p> <p data-bbox="488 1031 2029 1098">Finally, there is no available evidence to indicate that the policy itself and its subsequent application, could unfairly discriminate (directly or indirectly) on employees of different <i>Ages</i>.</p> <p data-bbox="488 1137 1413 1169"><b>We therefore conclude Neutral Equality related impact in this area.</b></p>

<b>Age (Continued)</b>	<p><b>National Evidence:</b></p> <p>Alcohol consumption does, statistically, vary with age.</p> <p>The Royal College of Psychiatrists state that “Older people tend to drink less alcohol than younger people, but even so 1 in 5 older men and 1 in 10 older women are drinking enough to harm themselves. These figures have increased by 40 per cent in men and 100 per cent in women over the past 20 years.”</p> <p><a href="https://www.rcpsych.ac.uk/mental-health/problems-disorders/alcohol-and-older-people">https://www.rcpsych.ac.uk/mental-health/problems-disorders/alcohol-and-older-people</a></p>
------------------------	--

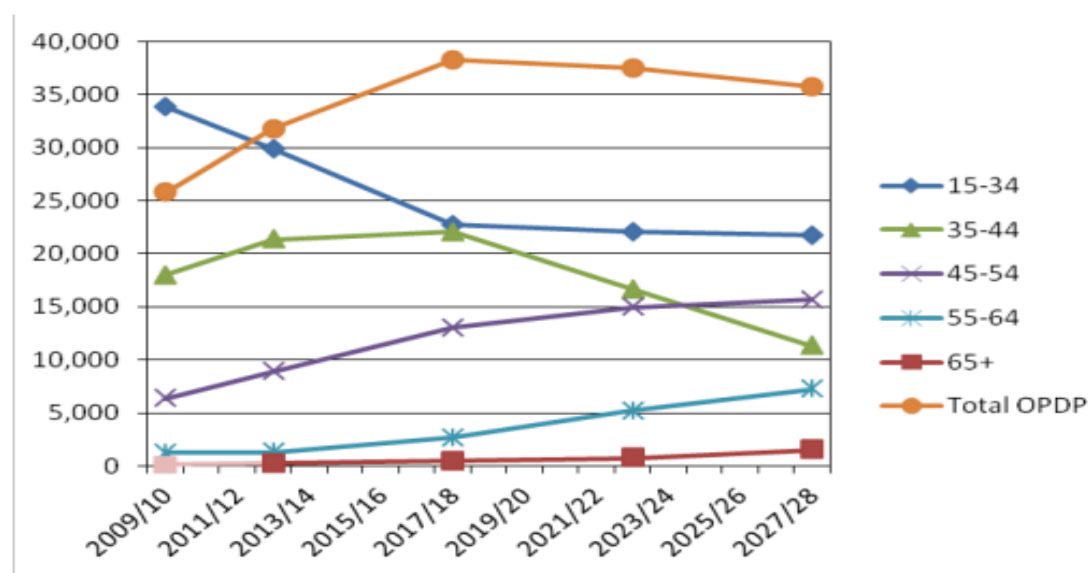


Age (Continued)

National Evidence: (continued)

Drug related problems also vary with age as this data relating to **Older People with Drug Problems (OPDP)** in Scotland shows (Source – Scottish Drugs Forum).

**Figure 1: OPDP population estimates/projections (both sexes, 2009/10 - 2027/28)**



Source: ISD (2016 & OPDP population projections with 20% non-replase rate)

The table above illustrates OPDP population estimates/projections both sexes 2009/10 – 2027/28)

<b>Age (Continued)</b>	<b>Advance equality of opportunity</b>
	<p>This policy is intended to be beneficial to those with alcohol, drugs and substance misuse issues, regardless of age.</p> <p>As stated above, this policy “provides a confidential and supportive mechanism for colleagues to get support from line-managers to provide them with help for alcohol, drug, or other substance related performance issues from Occupational Health”. It also “details our approach to dealing with these issues compassionately, fairly, and consistently”.</p> <p>The policy provides access to its benefits regardless of their age. It also crucially protects SQA and its requirement to adhere to the <i>Health and Safety at Work Act 1974</i> and the <i>Misuse of Drugs Act 1971</i>.</p>
	<b>Foster good relations</b>
	<p>There is no evidence that this policy fosters good relations with colleagues on the basis of age. No further recommendations are made in respect of this at this stage.</p>

Protected Characteristic	General Equality Duty
Disability	<p data-bbox="488 268 2029 331">Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the Equality Act 2010</p> <p data-bbox="488 363 696 395"><b>Equality Risks:</b></p> <p data-bbox="488 432 2029 496"><b>There is national evidence available indicating that people with disabilities may be at a greater risk of addiction or dependency to certain substances.</b> (Please see overleaf.)</p> <p data-bbox="488 539 2029 643">However, the application of this policy in SQA is <b>wholly irrespective of an employee’s Disability</b> status and is ultimately justified as part of SQA’s legal obligations under the <i>Health and Safety at Work Act 1974</i>, <i>The Transport and Works Act 1992</i> and <i>The Misuse of Drugs Act 1971</i>.</p> <p data-bbox="488 683 2029 746">As previously referenced, the policy makes it clear that addiction or dependency on any substance is largely exempt from the Equality Act 2010. An extract from the act states:</p> <p data-bbox="488 799 2029 943"><i>The Equality Act 2010 (Disability) Regulations 2010 (SI 2010/2128) specifically provide that addiction to alcohol, nicotine or any other substance (except where the addiction originally resulted from the administration of medically prescribed drugs) is to be treated as not amounting to an impairment for the purposes of the Equality Act 2010. Alcohol addiction is not, therefore, covered by the Act.</i></p> <p data-bbox="488 994 2029 1058">Also there is no available evidence to indicate that the policy itself and its subsequent application, could unfairly discriminate (directly or indirectly) on employees on the grounds of their <i>Disability</i>.</p> <p data-bbox="488 1110 1413 1142"><b>We therefore conclude Neutral Equality related impact in this area.</b></p>

**Disability  
(Continued)**

**National Evidence:**

The World Health Organisation state that in relation to factors that impact alcohol consumption and alcohol related harm: “Individual factors include age, gender, family circumstances and socio-economic status. Although there is no single risk factor that is dominant, the more vulnerabilities a person has, the more likely the person is to develop alcohol-related problems as a result of alcohol consumption. Poorer individuals experience greater health and social harms from alcohol consumption than more affluent individuals.” (WHO)

Scottish Health Survey 2012 however found that **respondents with a disability were less likely to drink excessively and to exceed daily limits than those who did not.**

<https://www.gov.scot/publications/scottish-health-survey-topic-report-equality-groups/pages/8/>

Disability may be a ‘vulnerability’ that may make a person more likely to develop alcohol / substance abuse issues, but this seems inconclusive.

The UK Drug Policy Commission highlighted in their Policy Briefing: “Drugs and Diversity: Disabled People” (2010) that:

“It should be noted from the outset that people with disability are not a homogeneous group and there will be as wide a range of needs and experiences within the group as will be found in any other population.”

The UK Drug Policy Commission also state that factors that may increase drug use risk among disabled people included isolation, exclusion, social pressure, mental health problems, poverty, communication difficulties and self-medication. The Commission also conclude throughout their briefing that more information and analysis is needed to draw meaningful conclusions.

[https://www.ukdpc.org.uk/wp-content/uploads/Policy%20report%20-%20Drugs%20and%20diversity%20disabled%20groups%20\(policy%20briefing\).pdf](https://www.ukdpc.org.uk/wp-content/uploads/Policy%20report%20-%20Drugs%20and%20diversity%20disabled%20groups%20(policy%20briefing).pdf)

Protected Characteristic	General Equality Duty
Disability (continued)	Advance equality of opportunity
	<p>The policy is intended to be supportive (while also meeting SQA’s legal obligations) for any colleague who needs to access it.</p> <p>The policy should have a positive impact on a disabled colleague who needs support to deal with an alcohol, drug or substance misuse issue.</p>
	Foster good relations
	<p>There is no evidence that this policy fosters good relations with those with a disability protected characteristic, although it is positive and supportive for all. There is no evidence that those with a disability are more likely to need to access this policy in SQA.</p> <p><u>Outcomes of the policy should continue to be monitored for any trends that suggest employees may be disadvantaged directly or indirectly as a result of their disability.</u></p>

Protected Characteristic	General Equality Duty
Race	<p>Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the Equality Act 2010</p> <p><b>Equality Risks:</b></p> <p><b>Once again, there is national evidence that people of different ethnicities may be at a greater risk of addiction or dependency to certain substances</b> and <i>Race</i> appears to be a relevant factor impacting on alcohol use in Scotland (Please see overleaf.)</p> <p>However, and as largely previously stated, the application of this policy in SQA is <b>wholly irrespective of an employee’s <i>Ethnicity, Nationality or Citizenship</i></b> and is ultimately justified as part of SQA’s legal obligations under the <i>Health and Safety at Work Act 1974, The Transport and Works Act 1992</i> and <i>The Misuse of Drugs Act 1971</i>.</p> <p>Also there is no available evidence to indicate that the policy itself and its subsequent application, could unfairly discriminate (directly or indirectly) on employees on the grounds of their <i>Race/ Ethnicity</i>.</p> <p><b>We therefore conclude Neutral Equality related impact in this area.</b></p>

<b>Race (Continued)</b>	<p><b>National Evidence:</b></p> <p>Scottish Health Survey 2012:</p> <ul style="list-style-type: none"> <li>• Pakistani, Chinese, Other Asian, and African, Caribbean or Black respondents were all significantly less likely to drink at hazardous or harmful levels than the national average.</li> </ul> <p><a href="https://www.gov.scot/publications/scottish-health-survey-topic-report-equality-groups/pages/8/">https://www.gov.scot/publications/scottish-health-survey-topic-report-equality-groups/pages/8/</a></p>
	Advance equality of opportunity
	<p>All SQA employees regardless of <i>Race</i> are entitled to use, access and be subjected to the Alcohol, Drugs and other Substance Misuse Policy.</p> <p>There is no empirical evidence to indicate that this policy affects employees differently or less favourably, on the grounds of their <i>Race</i> or <i>Ethnicity</i>.</p> <p>The policy should have a positive impact on any SQA colleague who needs support to deal with an alcohol, drug or substance misuse issue, and given that race seems to be a factor linked to Scottish alcohol use, it should help to advance equality of opportunity.</p>
	Foster good relations
	<p>There is no evidence to indicate that this policy currently fosters good relations between employees of different <i>Race</i> or <i>Ethnicity</i>. No further recommendations are made in respect of this at this stage.</p>

Protected Characteristic	General Equality Duty
<p>Religion or Belief</p>	<p>Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the Equality Act 2010</p> <p><b>Equality Risks:</b></p> <p>We of course, acknowledge that colleagues who belong to different religious groups may have different attitudes to alcohol consumption – meaning this policy may impact colleagues differently based on religion or belief. However we make no recommendations in respect of this policy to accommodate people who consume less or no alcohol.</p> <p>Conversely, the <i>Scottish National Health Survey</i> in 2012 found that <b>people who belonged to no religious group</b> were most likely to drink excessively whilst Muslims, Hindus and Buddhists were the least likely religious groups to drink at hazardous or harmful levels.</p> <p><a href="https://www.gov.scot/publications/scottish-health-survey-topic-report-equality-groups/pages/8/">https://www.gov.scot/publications/scottish-health-survey-topic-report-equality-groups/pages/8/</a></p> <p>While colleagues of different religions / beliefs may be more likely to be impacted by alcohol / drug or substance dependency issues, the application of policy, <b>regardless of religion or belief, is ultimately capable of being justified</b> as part of SQA’s legal obligations under the <i>Health and Safety at Work Act 1974, The Transport and Works Act 1992</i> and <i>The Misuse of Drugs Act 1971</i>.</p> <p><b>We therefore conclude Neutral Equality related impact in this area.</b></p>



<b>Religion / Belief (Continued)</b>	<b>Advance equality of opportunity</b>
	<p>All SQA employees from all <i>Religions / Beliefs</i> are entitled to use, access and be subjected to <i>the</i> Alcohol, Drugs and other Substance Misuse Policy</p> <p>There is no empirical evidence to indicate that this policy affects employees differently or less favourably, on the grounds of their <i>Religion</i> or <i>Philosophical Belief System</i>.</p> <p>Application of the policy equally to all colleagues is justified to meet SQA’s legal obligations, and it leaves it open and accessible to all colleagues to utilise it when necessary.</p>
	<b>Foster good relations</b>
	<p>There is no evidence to indicate that this policy currently fosters good relations between employees of different religions or beliefs. No further recommendations are made in respect of this at this stage.</p>

Protected Characteristic	General Equality Duty
Sex	<p>Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the Equality Act 2010</p> <p><b>Equality Risks:</b></p> <p>Once again, we acknowledge national evidence indicating a link between alcohol abuse and <i>Sex / Gender</i> in Scotland.</p> <p>For example, the <i>Scottish Health Survey 2012</i> concluded that <b>Men were more likely than women to drink at hazardous or harmful levels and to exceed the daily recommended alcohol units.</b></p> <p><a href="https://www.gov.scot/publications/scottish-health-survey-topic-report-equality-groups/pages/8/">https://www.gov.scot/publications/scottish-health-survey-topic-report-equality-groups/pages/8/</a></p> <p>The Scottish Government also record that males are also more likely to have problem drug use:</p> <p>In Scotland, the estimated prevalence of problem drug use in adults aged 15-64 years in 2012/13 was 2.5% among men and 1.0% among women, such that men accounted for 70% of individuals with problem drug use in Scotland (Information Services Division Scotland, 2014).</p> <p><a href="https://www.gov.scot/publications/drug-related-deaths-women-increasing">https://www.gov.scot/publications/drug-related-deaths-women-increasing</a></p> <p>While colleagues of different <i>Sexes</i> may be more likely to be impacted by alcohol / drug or substance dependency issues, the application of policy, <b>regardless of Sex, is ultimately capable of being justified</b> as part of SQA’s legal obligations under the <i>Health and Safety at Work Act 1974</i>, <i>The Transport and Works Act 1992</i> and <i>The Misuse of Drugs Act 1971</i>.</p> <p><b>We therefore conclude Neutral Equality related impact in this area.</b></p>

<b>Sex (continued)</b>	<b>Advance equality of opportunity</b>
	<p>All SQA employees are entitled to use, access and be subjected to <i>the</i> Alcohol, Drugs and other Substance Misuse Policy</p> <p>Due to very small use of the policy, it is not possible to conclude if this policy does effectively advance equality of opportunity between Men and Women.</p> <p>If SQA reflects Scottish national data and men are more likely to have problematic alcohol and / or drug use, then this policy will assist them in the workplace as well as assisting SQA to meet its legal obligations.</p>
	<b>Foster good relations</b>
	<p>There is no evidence to indicate that this policy currently fosters good relations between employees of different sexes. No further recommendations are made at this stage.</p>

Protected Characteristic	General Equality Duty
Sexual Orientation	<p data-bbox="488 268 2024 331">Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the Equality Act 2010</p> <p data-bbox="472 408 685 440"><b>Equality Risks:</b></p> <p data-bbox="472 475 1984 544"><b>There is national evidence available (please see overleaf) indicating that <i>Sexual Orientation</i> may be linked to problematic alcohol abuse in Scotland.</b></p> <p data-bbox="472 584 2018 691">Regardless of the evidence shown overleaf and at risk of sounding repetitious, the application of this policy in SQA is <b>wholly irrespective of an employee’s <i>Sexual Orientation</i></b> and is ultimately justified as part of SQA’s legal obligations under the <i>Health and Safety at Work Act 1974</i>, <i>The Transport and Works Act 1992</i> and <i>The Misuse of Drugs Act 1971</i>.</p> <p data-bbox="472 730 1402 762"><b>We therefore conclude Neutral Equality related impact in this area.</b></p>

**Sexual Orientation (Continued)**

**National Evidence:**

Sexual orientation may be linked to problematic alcohol use in Scotland.

Scottish Health Survey 2012:

***Respondents who identified themselves as lesbian or gay were significantly more likely to drink at hazardous or harmful levels than the national average.***

<https://www.gov.scot/publications/scottish-health-survey-topic-report-equality-groups/pages/8/>

Stonewall found in their 2018 LGBT in Britain Health Report that drug use was higher for LGBT people.

[https://www.stonewall.org.uk/system/files/lgbt\\_in\\_britain\\_health.pdf](https://www.stonewall.org.uk/system/files/lgbt_in_britain_health.pdf)

They found:

According to the Home Office around one in 25 (four per cent) adults in general aged 16 to 59 had taken a drug in the last month, while around one in 11 (nine per cent) young adults aged 16 to 24 had done so.

One in eight LGBT people aged 18-24 (13 per cent) take drugs at least once a month.

LGBT people who take drugs at least once a month:

<b>Age</b>	<b>LGBT people who take drugs at least once a month</b>
Aged 18-24	13%
Aged 25-34	9%
Aged 35-44	9%
Aged 45-54	5%
Aged 55-64	4%
Aged 65+	1%

The Alcohol, Drugs and Substance Misuse policy is accessible and supports all SQA colleagues as necessary regardless of sexual orientation.

<b>Sexual Orientation (Continued)</b>	<b>Advance equality of opportunity</b>
	<p>All SQA employees are entitled to use, access and be subjected to the Alcohol, Drugs and other Substance Misuse Policy and there is no evidence to indicate that this policy does or could affect employees differently or less favourably, on the grounds of their Sexual Orientation.</p> <p>Due to very very small use of the policy, it is not possible to conclude if this policy does effectively advance equality of opportunity between colleagues based on sexual orientation. If SQA reflects Scottish national data and those who identified themselves as lesbian or gay are more likely to drink at hazardous or harmful levels are more likely to have problematic alcohol / drug use, then this policy will assist them in the workplace as well as assisting SQA to meet its legal obligations.</p>
	<b>Foster good relations</b>
	<p>There is no evidence to indicate that this policy currently fosters good relations between employees of different sexual orientation.</p> <p><u>Consideration should be given to report more thoroughly on HR case work, informal and formal, in relation to each protected characteristic. This would show if any trends or patterns emerge so that action can be taken.</u></p>

Protected Characteristic	General Equality Duty
<p><b>Gender Identity.</b></p> <p><b>This includes:</b></p> <p><b>Gender Re-assignment</b></p> <p><b>Non Binary</b></p> <p><b>Gender Fluid</b></p>	<p>Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the Equality Act 2010</p> <p>An environment scan relating to alcohol use based on gender identity suggests that UK based research is lacking.</p> <p><a href="https://www.drinkaware.co.uk/news/guest-blog-alcohol-harm-in-trans-and-non-binary-communities">https://www.drinkaware.co.uk/news/guest-blog-alcohol-harm-in-trans-and-non-binary-communities</a></p> <p>An environment scan relating to drug / substance use also suggests that UK research is also lacking.</p> <p>While colleagues of different Gender Identities or LGBTQ status may be more likely to be impacted by alcohol / drug or substance dependency issues, the application of this policy, <b>regardless of Gender Identity or LGBTQ+ status is ultimately capable of being justified</b> as part of SQA’s legal obligations under the <i>Health and Safety at Work Act 1974</i>, <i>The Transport and Works Act 1992</i> and <i>The Misuse of Drugs Act 1971</i>.</p> <p><b>We therefore conclude Neutral Equality related impact in this area.</b></p>

<p><b>Gender Identity.</b> <b>This includes:</b> <b>Gender Re-assignment</b> <b>Non Binary</b> <b>Gender Fluid</b> <b>(continued)</b></p>	<p>Advance equality of opportunity</p>
	<p>SQA currently does not have a <i>Gender Identity</i> policy providing background information to SQA managers and employees in respect of:</p> <ul style="list-style-type: none"> <li>▪ People who identify as the Gender they were assigned at birth. (<i>Cisgender</i>)</li> <li>▪ People who identify with Gender that is different to that assigned at birth. (<i>Transgender</i>)</li> <li>▪ People who identify with multiple Genders. (e.g. <i>Non Binary</i> and <i>Gender Fluid</i>.)</li> </ul> <p style="text-align: center;">(Note this list is illustrative and is not intended to be definitive.)</p> <p>Whilst, with the exception of <i>Gender Reassignment</i>, there is currently no legal obligation placed on SQA to provide Equality of Opportunity to people who identify as different Genders, it is a very relevant modern consideration – particularly in academic environments such as schools, colleges and universities. (Once again, highly relevant to SQA.)</p> <p><u>We therefore recommend that SQA create a new <i>Gender Identity</i> policy to facilitate and advance equality of opportunity to employees who are LGBTQ+.</u></p>
	<p>Foster good relations</p>
<p>There is no evidence to indicate that this policy currently fosters good relations between people of different <i>Gender Identities</i> or who are LGBTQ+.</p> <p>Implementing the actions listed within this section of the document would begin to improve this situation somewhat.</p>	



<b>Protected Characteristic</b>  <b>Marriage/Civil Partnership</b>	<b>General Equality Duty</b>
	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 <i>Married</i> or in a <i>Civil Partnership</i> and therefore make no further recommendations in this area.  <b>Neutral Equality related impact is therefore recorded in this area.</b>
	<b>Advance equality of opportunity</b>
	All SQA employees are entitled to use, access and be subjected to the Alcohol, Drugs and Substance Misuse Policy and there is no evidence to indicate that this policy could affect employees differently or less favourably, on the grounds of their <i>Marital Status</i> .
<b>Foster good relations</b>	
There is no evidence to indicate that this policy currently fosters good relations between employees of different <i>Marital Status</i> .  No further recommendations are made in respect of this in relation to this policy.	

Protected Characteristic	General Equality Duty
Pregnancy / Maternity	<p data-bbox="488 264 2029 331">Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the Equality Act 2010</p> <p data-bbox="488 400 1989 536">While alcohol consumption is likely to drop during pregnancy / maternity, Hull University published an article in 2019 referring to research that showed that 41% of women in the UK drank alcohol during their pregnancy. Among UK women who drink any alcohol when pregnant, an estimated 19% drink more than seven units of alcohol on one occasion. This is defined as binge drinking.</p> <p data-bbox="488 571 2011 643"><a data-bbox="488 571 2011 643" href="https://www.hull.ac.uk/work-with-us/more/media-centre/news/2019/the-problem-of-drinking-in-pregnancy-and-what-to-do-about-it#:~:text=These%20figures%20come%20from%20a,is%20defined%20as%20binge%20drinking.">https://www.hull.ac.uk/work-with-us/more/media-centre/news/2019/the-problem-of-drinking-in-pregnancy-and-what-to-do-about-it#:~:text=These%20figures%20come%20from%20a,is%20defined%20as%20binge%20drinking.</a></p> <p data-bbox="488 687 1603 719">It is also likely that some drug / substance misuse will also continue during pregnancy.</p> <p data-bbox="488 767 2016 839">There is no evidence to suggest that this policy may impact disproportionately either directly / indirectly on people who are pregnant or on maternity and therefore make no further recommendations in this area.</p> <p data-bbox="488 887 1960 999">Also, as largely previously stated, the application of this policy in SQA is <b>wholly irrespective of an employee's Pregnancy or Maternity status</b> and is ultimately justified as part of SQA's legal obligations under the <i>Health and Safety at Work Act 1974</i>, <i>The Transport and Works Act 1992</i> and <i>The Misuse of Drugs Act 1971</i>.</p> <p data-bbox="488 1078 1391 1110"><b>Neutral Equality related impact is therefore recorded in this area.</b></p>

<b>Pregnancy &amp; Maternity (Continued)</b>	<b>Advance equality of opportunity</b>
	<p>All SQA employees are entitled to use, access and be subjected to the Alcohol, Drugs and other Substance Misuse Policy and there is no evidence to indicate that this policy could affect employees differently or less favourably, on the grounds of Pregnancy/Maternity or that it is any more or less relevant to colleagues who are pregnant or on maternity leave.</p> <p>The policy is intended to be positive in its impact so if it is needed by a colleague who is pregnant or on maternity this should be of beneficial support to employees who are either pregnant or have had children recently.</p>
	<b>Foster good relations</b>
	<p>There is no evidence to indicate that this policy currently fosters good relations between employees that are Pregnant or on Maternity.</p> <p>No recommendations are made in respect of this in relation to this policy.</p>

Considered by SQA	General Equality Duty
Care experience (where relevant)	Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the Equality Act 2010
	<p>Whilst there is currently no evidence to suggest that care experience colleagues are placed at a disadvantage compared to other colleagues (or vice versa), it is recommended that data is collected and an analysis, by care experience, be performed of the 'lifecycle' of colleagues to identify any adverse trends and consider what support for growth and performance is needed.</p>
	Advance equality of opportunity
	<p>All SQA employees are entitled to use, access and be subjected to the Alcohol, Drugs and other Substance Misuse Policy and there is no evidence to indicate that this policy could affect employees differently or less favourably, on the grounds of Care Experience. The absence of evidence should be rectified, if possible, by collection of data relating to care experience.</p>
	Foster Good Relations
<p>No evidence identified.</p>	

**Miscellaneous:**

**Other impacts identified as part of this Equality Impact Assessment which generally have a positive impact on all SQA employees include:**

- A SQA employee assistance programme providing employees with confidential support and guidance 24 hours a day, 7 days a week.
- Trade union representatives who can provide members with advice, help and support relating to sickness absences
- Mental Health First Aiders who are available as a first point of contact in SQA.
- The *Able Futures* service who can be contacted for ongoing professional support for mental health and wellbeing.
- SQA's occupational health provider offers medical advice and support on staying healthy at work.
- Internally, SQA's Human Resources team can provide confidential support and advice to employees.
- SQA's Parent and Carers Network provides support to colleagues. This network aims to provide a safe and confidential space to allow parents and carers to support each other, share ideas, current challenges, knowledge and experiences.

**Additionally, SQA is committed to being a supportive and inclusive employer and is members of and/or accredited by various organisations these include:**

- Disability Confident Employer
- Hidden Disability Sunflower Scheme Member
- Employers Network for Equality & Inclusion Member
- Happy to Talk Flexible Working Employer
- Accreditation as a Scottish Living Wage Employer
- Business in the Community Race at Work Charter Signatory
- Stonewall Diversity Champion
- Dying to Work Charter Member