

# Accommodation and Space Policy

This Policy describes the process for accommodation and space allocation within the Trust

Key Words:	Accommodation, Space	
Version:	2	
Adopted by:	Finance and Performance Committee	
Date adopted:	21 March 2017	
Name of originator/author:	Associate Director of Estates and Facilities	
Name of responsible committee:	Strategic Capital, IM&T and Estates Group	
Date issued for publication:	March 2017	
Review date:	September 2019	
Expiry date:	1 June 2021	
Target audience:	All Staff	
Type of Policy	Clinical	Non Clinical √

**CONTRIBUTION LIST**

**Key individuals involved in developing the document**

Name	Designation
Andy Donoghue	Associate Director of Estates and Facilities
Helen Walton	Property Manager

**Circulated to the following individuals for comments**

Name	Designation
Members of Strategic Capital, Estates, and Information technology committee (SCIE)	
Finance and Performance Committee (March 2017)	

## Contents

Equality Statement	6
Due Regard	6
1 Introduction	7
2 Purpose	7
3 Organisational Responsibilities	7
3.1 Director with Responsibility for Estates and Property Management	8
3.2 Management of Services	8
3.3 Estates Property Manager and Officers	8
3.4 Appropriate Manager	9
3.5 Employees	9
3.6 Patients and Visitors	9
4 Decision Making	9
5 Accommodation	10
5.1 Ownership of Accommodation	10
5.2 Changes to Accommodation	10
5.3 Administrative Accommodation	11
5.4 Clinical Accommodation	12
5.5 Patient Treatment Areas	12
6 Review of Accommodation	13
7 Alterations to Accommodation	13
8 Accommodation for Non-Trust Staff	14
9 Policy Monitoring and Review	14
10 Training	14
Appendix 1 Accommodation Change Request Form	15
Appendix 2 Accommodation Requests from Commissioners External Stakeholders either within or wishing to occupy LPT Premises	18
Appendix 3 Employee Relocation Health and Safety Checklist And Action Plan	19
Appendix 4 NHS Constitution	21
Appendix 5 Due regard template	22

## Version Control and Summary of Changes

Version number	Date	Comments (description change and amendments)
V1	September 2014	New Policy
V2	September 2016	Amended policy

**All LPT Policies can be provided in large print or Braille formats, if requested, and an interpreting service is available to individuals of different nationalities who require them.**

Did you print this document yourself?

Please be advised that the Trust discourages the retention of hard copies of policies and can only guarantee that the policy on the Trust website is the most up-to-date version.

## Definitions that apply to this Policy

All procedural documents should have a definition of terms to ensure staff have clarity of purpose (refer to Policy for Policies for assistance)

<b>Accommodation</b>	Physical space for occupants of a building
<b>Statutory</b>	By statute. A statute is a written law passed by a legislating body.
<b>Estates Strategy</b>	A masterplan that aligns on a best fit basis the health and social care economy, clinical / service strategy and capacity plan.
<b>Tenancy</b>	Occupation of property or land for a fixed period of time in return for an agreed rent.
<b>Compliance</b>	Compliance is a state of being in accordance with established guidelines, specifications, or legislation
<b>Working Environment</b>	Location where a task is completed. This involves the physical geographical location as well as the immediate surroundings of the workplace.
<b>EFMC</b>	Provider of professional property management advice to LPT
<b>Non-occupancy</b>	An area / space within a work environment currently not in use.
<b>Property Portfolio</b>	The unified management of a group of properties which are held in one ownership
<b>Due Regard</b>	Having due regard for advancing equality involves: <ul style="list-style-type: none"> <li>• Removing or minimising disadvantages suffered by people due to their protected characteristics.</li> <li>• Taking steps to meet the needs of people from protected groups where these are different from the needs of other people.</li> <li>• Encouraging people from protected groups to participate in public life or in other activities where their participation is disproportionately low.</li> </ul>
<b>HBN</b>	Health Building Note

## **Equality Statement**

Leicestershire Partnership NHS Trust (LPT) aims to design and implement policy documents that meet the diverse needs of our service, population and workforce, ensuring that none are placed at a disadvantage over others.

It takes into account the provisions of the Equality Act 2010 and promotes equal opportunities for all.

This document has been assessed to ensure that no one receives less favourable treatment on the protected characteristics of their age, disability, sex (gender), gender reassignment, sexual orientation, marriage and civil partnership, race, religion or belief, pregnancy and maternity.

In carrying out its functions, LPT must have due regard to the different needs of different protected equality groups in their area.

This applies to all the activities for which LPT is responsible, including policy development and review.

## **Due Regard**

The Trusts commitment to equality means that this policy has been screened in relation to paying due regard to the Public Sector Equality Duty as set out in the Equality Act 2010 to eliminate unlawful discrimination, harassment, victimisation; advance equality of opportunity and foster good relations.

A due regard review found the activity outlined in the document to be equality neutral because this policy describes the arrangements in place for all staff across the Trust. All staff identified as DSE 'Users' or 'Operators' will receive appropriate training to minimise all foreseeable risks of harm.

## **1.0 Introduction**

Leicestershire Partnership NHS Trust has a wide range of teams and services operating from a large number of properties making up our overall estate. Some of these are owned by the Trust, some are leased, either formally or informally. The properties offer a wide range of accommodation, which are, in the main, purpose built for their current use.

The Trust will adhere to the policy, guidance and principles contained in HBN 00-08 Part A (The efficient management of healthcare estates and facilities) and Part B (supplementary information) published 2014 to manage the estate.

The trust is developing an Estates Transformation Strategy which envisages a significant review and change to the Trust's property profile over the coming years. This means many staff, teams, departments and services will find themselves in different accommodation from what they currently occupy.

Any property occupied by the Trust costs money, whether owned by the Trust or not. Currently, around 10% of the Trusts overall income is required to operate and maintain the estate (not including capital spending) - any money spent on property detracts from what can be spent on services, so the Trust has an obligation to ensure it operates the most efficient utilisation of the estate it occupies (i.e. seeks to maximise utilisation of all assets held), and will continually review whether different configurations of estate can release resources.

In order to facilitate effective management of that change, the Trust requires a framework covering how decisions on the allocation and alteration (both physical and cosmetic) of accommodation are made, and the principles that govern those decisions. This policy provides that framework.

## **2.0 Purpose**

It is the intention of this policy to provide a framework for the management of all accommodation to ensure the most efficient utilisation of space available within Hospitals, Health Centres and all team and office bases.

The policy will support and be supported by the Estates Strategy so that fit for purpose accommodation can be provided and to ensure that all space is not over or under-utilised.

## **3.0 Organisational Responsibilities**

All staff are responsible for complying with the organisations' arrangements for the management of accommodation, including the implementation of local management controls. In order to comply with this policy staff must be aware of the lines of communication (and levels of responsibility) which exist to ensure accommodation is managed effectively and efficiently.

In order to ensure that all accommodation is managed efficiently within the Trust, the following organisational responsibilities have been allocated.

### **3.1 Director with Responsibility for Estates and Property Management**

The Director with responsibility for estates and property management is the Associate Director of Estates and Facilities.

This responsibility covers all matters relating to accommodation management and includes ensuring that all properties are utilised and managed effectively.

The use of accommodation is an important priority for the Trust and all accommodation will be managed through comprehensive policies and procedures that are effectively implemented and appropriately resourced within the overall financial position of the Trust.

The Director with responsibility will ensure that financial resources are made available to support this policy based upon a risk assessment of priorities.

The Director is assisted by the Divisional Senior Management Team (SMT) and the Strategic Capital, IM&T and Estates Group (SCIE).

The Estates Property Manager and Property Officers will have overall responsibility for the administration and management of accommodation and they are members of the Property Management Group (PMG) which reports into SCIE.

### **3.2 Management of Services**

The PMG will have overall responsibility for formulating, oversight and monitoring of this policy.

The Property Manager and the Property Officers have responsibility to implement this policy and will facilitate and coordinate all aspects of accommodation management in conjunction with the appropriate managers.

### **3.3 Estates Property Manager and Officers**

Estates Property Manager/Officers are responsible for :

- Effective space utilisation and operational site services within designated premises
- Support to ensure space occupied is suitable and sufficient for the needs of the service in accordance with the Divisional service development initiatives
- Identify through inspections and audits validity of occupancy and that appropriate risk assessments have been undertaken

### **3.4 Appropriate Managers**

All Trust managers are responsible for ensuring compliance with this policy within their specific service/department, ensuring that:

- Risk assessments in relation to accommodation are carried out, recorded and reviewed regularly;
- Accommodation management procedures and safe working practices resulting from them are produced, documented and implemented for their area;
- Arrangements with regard to accommodation are included in induction and regular refresher training for all staff;
- They undertake regular monitoring of accommodation and record their findings.
- Ensure all staff receive local induction to the area and premises (See Appendix 3)

### **3.5 Employees**

Each employee or agent of the Trust has an individual responsibility to:

- Co-operate with the Trusts' management in the implementation of this policy;
- Report any accommodation issues to their supervisor/ manager;
- Undergo appropriate training as required.

### **3.6 Patients and Visitors**

Patients and visitors will be advised of all procedures in place for accommodation management and will be expected to comply with all reasonable requests.

### **4.0 Decision Making**

Decisions on the location of staff, teams, departments or services and the allocation of accommodation to them are the responsibility of the PMG in conjunction with Directors, Associate Directors and Service Managers.

The PMG will develop proposals for the teams and services concerned, with the aim of forging the best marriage of:

- Trust values and goals;
- Service aspirations;
- Statutory, NHS or professional requirements;
- Effective site utilisation; Effective operation both for clinical and support services;
- Cost;
- Compromise with other competing requirements.

The PMG will review all areas with broad representation so that all competing requirements and priorities can be identified and taken into account. HR input may be required in some circumstances.

Because most estate alterations, reconfigurations and moves require significant funding, all proposed alterations and moves will need to be consistent with the Trust's overall Estates Strategy and 5 year capital plan.

## 5.0 Accommodation

The Trust aims to provide fit for purpose accommodation that is safe and secure and meets all statutory, NHS and professional guidelines and requirements.

### 5.1 Ownership of Accommodation

The Trust occupies a varied number of properties all with different tenancy and ownership arrangements. All properties are a corporate asset and no service, department, team or staff member **owns** any allocated accommodation, space or room.

All accommodation is allocated by PMG – properties (and rooms within properties) should only be occupied with the express agreement of PMG.

Teams or departments that solely occupy a specific building, floor or unit/space, and who do not fully utilise that accommodation, will be expected to share that space with other Trust teams or staff, or be relocated to ensure effective use of Trust accommodation.

Members of staff, teams, departments or services that move into space not allocated to them may find themselves summarily removed – in such cases the relevant service/department will be required to bear any costs associated with reinstatement.

**It should be noted that there may well be H&S reasons (which may not be immediately obvious) why properties/rooms should not be occupied and therefore occupation (without prior agreement) may represent a serious H&S risk to occupants.**

Other than PMG, no Trust staff member is authorised to offer accommodation or space within trust properties to any other organisation/body or to allow other organisations/bodies to use Trust accommodation/spaces (even informally/infrequently).

### 5.2 Changes to Accommodation

In order to best meet the needs and priorities of the Trust, and the services it provides, PMG may relocate individuals, teams, departments or services, or re-allocate any of the accommodation they occupy.

Staff, teams, departments and services are expected to make a case for any accommodation changes they require through the relevant Divisional Business Manager. Requests will be put to the PMG (using the Accommodation Change Form – Appendix 1) for decision. Where necessary, decisions will be deferred to SCIE

Where there is a new demand for accommodation is identified, an Accommodation Change Form' should be completed.

The following principles will be applied when considering estate alterations, reconfigurations and moves and the allocation of space to staff, teams, departments and services:

- The reviewer/s must be objective
- Compliance with other Trust strategies, plans or policies
- Compliance with statutory, NHS or professional requirements or guidelines
- The relative priority of competing calls on the same space
- Clinical service needs will generally be given priority over other Trust functions, providing it relates to direct patient contact
- Location – priority will be given to locating locality support services close to the clinical services they support. Trust-wide support services may be located in any suitable Trust estate, subject to the consideration of demonstrable close working relationships with related teams or departments.
- Financial implications of the proposed change/alteration
- Whether or not the change facilitates/supports other initiatives (new ways of working, CIPS, potential disposals etc..)
- Whether or not the change creates a void/cost pressure
- Whether or not capital funding is required

### **5.3 Administrative Accommodation**

Administrative accommodation will be configured to make the most effective use of properties available to the Trust:

- Agile working will be considered as 'standard practice' unless there are sound reasons why this cannot be adopted
- Open plan offices will be considered the normal provision
- Single offices will only be supplied where absolutely required for the post or where there are specific individual circumstances which require the Trust to provide individual accommodation as a reasonable adjustment to comply with the requirements of the Equality Act
- Factors such as background noise suppression and adequate meeting space (casual or formal) will be taken into account when planning open plan offices

Members of staff whose work patterns mean that they do not fully utilise a desk or office, may be required to hot-desk, or share a desk and/or office.

Agile working practices will be adopted in line with the Trust Agile Working Policy – this will also mean that staff may not be allocated a specific desk and/or office to work from.

### **5.4 Clinical Accommodation**

All clinical accommodation has been specifically designed and built for its existing use and has been allocated on this basis.

Where there is a significant change in service through decreased demand or a requirement to develop the service further, an Accommodation Change Form (Appendix 1) should be completed in order to trigger a review of the allocation of accommodation.

Clinical accommodation reviews should be carried out by managers periodically or when a known change occurs, for example:

- Room usage is below 75% occupancy;
- Allocation of space does not provide sufficient space for increased service demand;
- Existing space does not meet the requirements of Statutory, NHS or professional requirements;
- Existing service provision is to cease;

## **5.5 Patient Treatment Areas**

The ageing condition of some of the estate means that not all patient treatment areas are fit for purpose in relation to current requirements/guidelines. It is for this reason that regular reviews need to be carried out in order to ensure that the privacy and dignity of patients is maintained and that where possible single sex accommodation is achieved. See Policy for Privacy & Dignity of Adult Patients.

Where there is a significant change in service through decreased demand or a requirement to develop the service further an Accommodation Change Form (Appendix 1) should be completed in order to trigger a formal review of the allocation and provision of accommodation.

Formal reviews of patient treatment areas should be carried out by the Division Business Managers in conjunction with the service leads when:

- Usage is regularly below 50% occupancy;
- Allocation of space does not provide sufficient space for increased service demand;
- Existing space does not meet the requirements of Statutory, NHS or professional requirements;
- Existing service provision is to cease;

In all instances the Review of Accommodation below is to be followed.

## **6.0 Review of Accommodation**

The Property Manager/Property Officers will undertake accommodation reviews (including space utilisation studies) on a regular basis in order to

ensure that the Trust is maximising its resources and to ensure that the demands of services are being met.

The outputs of these reviews may result in PMG re-allocating space or relocating teams to alternative accommodation.

The senior member of a team or department will be expected to act as the key point of liaison between their team, department or service. They will be expected to:

- Ensure that they fully participate in any work looking at estate utilisation or accommodation that might affect their staff, team, department or service;
- That the factors they wish taken into account in any decision making by the SMT & PAG are factual and objective;
- That any such decisions on relocation or re-allocation of accommodation are co-operated with in a timely and effective way.

The senior member of the team or department will be expected to be the main channel of communication. They will be expected to:

- Communicate decisions regarding accommodation changes fully to their team, including any briefing or guidance regarding the changes which may be perceived by staff to impact on their working environment, terms and conditions or other aspect of their working life;
- Communicate any information to their staff/team regarding the process and timescales for the decision-making and implementation of any options for accommodation changes that may affect them;
- Ensure that the views of their team/department are collated and represented in any forum or meeting where options for accommodation changes are being discussed, or in any written submissions made in respect of the consideration of such options;
- The Human Resources department will assist by providing briefing materials, and ensuring that the person acting as the point of liaison/communication for a team/department is kept up to date with any decisions or considerations.

## **7.0 Alterations to Accommodation**

Staff, teams, departments and services must not change or plan to change the accommodation they use through moving accommodation, altering accommodation (structurally or cosmetically) expanding into empty accommodation, or swapping an area of occupation with another service without the consultation and approval of the PMG (assisted by Divisional Business Managers).

Changes to accommodation profiles can often impact on lease/tenancy agreements, statutory compliance considerations, cause H&S risks and may conflict with other plans for the space and/or have financial implications, PMG may also seek views from Infection Prevention and Control, Health and Safety Compliance Team, Capital Programme Managers and professional advisors with the EFMC prior to making a recommendation or decision.

The PMG must be notified of changes in service that will result in space becoming vacant (ideally 6 months in advance) so that:

- a) Arrangements can be made to terminate leases;
- b) Plans can be made to re-allocate the space;
- c) Any cost savings through non-occupancy can be secured (Rates, Utilities, etc.).
- d) Appropriate plans can be made to co-ordinate the closure of the accommodation in a timely manner and arrange for storage to be made available for furniture and files.

The Trust may keep space empty to facilitate future accommodation changes. If a member of staff, team, department or service feels they could use empty space they should make a request to use the space to the PAG via their representative.

## **8.0 Accommodation for Non-Trust Staff**

The Trust does not generally provide accommodation for non-Trust staff, teams or services, unless:

- The members of staff are part of a joint or integrated team;
- The team or service, and their accommodation requirements, have been approved by the Trust Board, SMT and the accommodation is paid for. In such instances a formal agreement will be required.

## **9.0 Policy Monitoring and Review**

To facilitate the monitoring of this policy managers at all levels are responsible for the ongoing monitoring of accommodation usage in their service / department / area of responsibility.

Accommodation reviews will be reported through the SMT via Divisional Business Manager/Premises Manager for Enabling.

This policy shall be reviewed at a minimum frequency of bi-annually. It should also be reviewed when substantial changes occur in the organisational structure of the LPT or property portfolio.

## **10 Training**

There is no training requirement identified within this policy

## Accommodation Change Request Form

<b><u>CURRENT SITUATION</u></b>			
Site:	Dept Division:	& Provider:	Area/room no:
Current Use of room/s:eg: office/clinical etc:	Current no: of room/s:		No of staff at any one time:
Contact name, number, email:			
<b><u>Reason for change request:</u></b>			
Usage below 75%		Usage below 50%	
Closure of Service		No of beds:	
Not sufficient space		No of multi bed bays:	
Non compliance with HTM's		Not sufficient Space	
Other		No of single rooms:	
<b><u>REQUESTED ACCOMMODATION</u></b>			
What type of accommodation are you looking for: <i>please check the appropriate box(es):</i>  Office: <input type="checkbox"/>  Clinical: <input type="checkbox"/>  Consulting: <input type="checkbox"/>  Other? <input type="checkbox"/>	What other requirements/support would be necessary? (special cleaning, extra utilities, patient waiting area, meet and greet), security lock up:  Waiting areas <input type="checkbox"/>  Meeting Rooms <input type="checkbox"/>  Storage facilities <input type="checkbox"/>  Reception <input type="checkbox"/>		
Other items/equipment required relevant to the move:		Any IT or telephone requirements in rooms?	

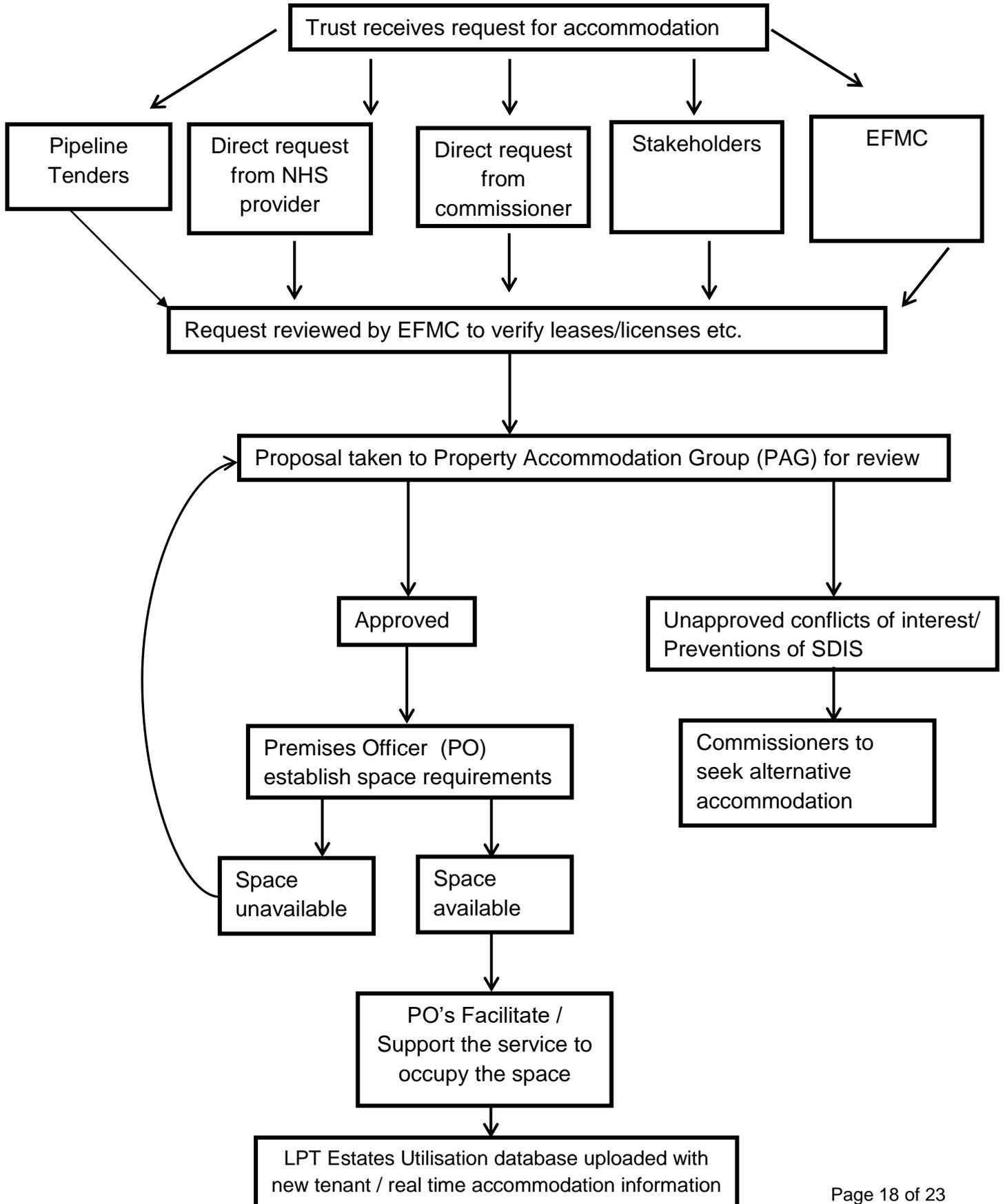
Is your service currently on this site?		Budget Holders name?	
<p><b><u>Clinical:</u></b></p> <p>If for clinical use please specify the number of patients to be seen. Will the demand for this service increase over time?</p>			
Clinical Service Change Details or changes to accommodation:			
Frequency of use: daily (am/pm) monthly/weekly other please describe:  Evening session  Weekend session:	Expected staff usage:		
<b><u>OFFICE ACCOMMODATION REQUIREMENTS</u></b>			
Site:	Area:	No of rooms?	
No of desks:	No of staff:  Full Time:  Part Time:	No of IT points:	
No of telephone points:	No of printers:	No of Fax Machines:	
Telephone numbers or fax numbers to be transferred:			
Reason for Request (Include equipment, frequency of use, staff details, nature of work, desired privacy, length of time required):			
Source of funding for accommodation costs (rent, utilities, telephones, move costs, supply of furniture):			
Additional information:			

How does this request align to “Better Care Together”?	
<b>AUTHORISATION</b>	
I agree that any in requesting accommodation fit out costs and costs for use of the area may be charged to my Department. I agree that I will nominate an officer to act as the key point of liaison between my team and the Service & Estates Planning team.	
Signed: _____	Ext. no. _____
Authorised Signatory: _____	Date _____
Position: _____	Ext. no. _____

Completed forms are to be forwarded to the Business Management.

<b>Official –Office use only</b>			
Has space been identified on the requested site?			
Who does the property belong to?		Is it LPT identified space	
Has the relevant Authority been made aware? (eg: NHSPS, LIFTco)		Has or is the group aware of any legal requirements relevant to this move?	
Are rooms available?			
Has the service other requirements been met? ( <i>i.e. storage, equipment etc</i> )			
Are building/room modifications required? ( <i>if yes please give details</i> )			
Has the request been discussed at PAG?			
Is a lease or Licence required?		Date passed to Legal Team:	
Approved		Declined ( <i>please give reason(s)</i> )	

**Accommodation Requests from Commissioners/External Stakeholders either within our premises or wishing to occupy LPT premise**



**Employee Relocation Health and Safety Checklist and Action Plan**

This checklist must be completed on the first day working in your new environment following your relocation. The checklist is to ensure that all aspects of your local induction following your relocation have been adequately covered in accordance with statutory requirements, Trust policies and procedures. This checklist serves to complement essential information previously shared with you during your local induction and workplace orientation when you first commenced employment with the Trust. If you feel that you have not been provided with sufficient information or you require any further information please bring it to the immediate attention of your supervisor/line manager.

Staff name (please print): ..... New work area/location: .....

Date duties commenced in your new work area: .././.... Date checklist completed: .././....

Name of supervisor/line manager: .....

\*Completed and signed checklists must be retained on the individual’s personal file.

Topic	Yes	No	N/A	Things to consider	Action to be taken (by when and by whom)	Date action taken	Employee signature/Additional comments
<b>Fire Safety</b>							
Have you completed the Trust Fire Induction Checklist?							
<b>Security</b>							
Have you been instructed on the signing in/out procedures?							
Have you been issued with and instructed on how to use security swipe cards/fobs/keys?							
Have you been issued with access codes to the building?							
Have you been instructed on the security arrangements in place for accepting visitors (internal & external) to your work area?							
Have you been instructed on the opening/closing arrangements for the building/work area (including how to set and dis-engage any alarms)?							
Have you been instructed as to the use of image capturing equipment within your area of work e.g. cameras/video cameras, mobile phone’s etc.?							

<b>First Aid</b>							
Have you been instructed who to contact in the event of First Aid being required?							
Do you know the location of your nearest First Aid box?							
<b>Welfare facilities</b>							
Have you been informed of the location and accessibility of the following:							
Toilets							
Rest Areas							
Local arrangements to purchase refreshments							
Staff Kitchen/Beverage & Food Preparation Areas							
Multi-faith/quiet rooms							
Car parking							
<b>Display Screen Equipment (DSE) &amp; Workstations</b>							
Have you considered your DSE and Workstation risk assessment?							
Are any adjustments required?							
<b>Equipment &amp; Machinery</b>							
Have you been provided with adequate instruction and/or training to operate all work equipment and machinery that you are expected to use?							
<b>Risk Assessments and Safe Systems of Work</b>							
Have you been shared the findings of all health and safety risk assessments pertaining to the environment/tasks/activities/processes within your work area? (including COSHH, manual handling, lone working), etc							
<b>Access and Egress</b>							
Are you able to safely enter and exit your work area?							
Have reasonable adjustments been made to facilitate any disabilities?							

To be completed by Supervisor/Line Manager

Name of supervisor/line manager: .....

Position/post held:

Insert any additional comments:

## Appendix 4

### The NHS Constitution

#### NHS Core Principles – Checklist

Please tick below those principles that apply to this policy

The NHS will provide a universal service for all based on clinical need, not ability to pay. The NHS will provide a comprehensive range of services

<b>Shape its services around the needs and preferences of individual patients, their families and their carers</b>	<input checked="" type="checkbox"/>
<b>Respond to different needs of different sectors of the population</b>	<input type="checkbox"/>
<b>Work continuously to improve quality services and to minimise errors</b>	<input checked="" type="checkbox"/>
<b>Support and value its staff</b>	<input checked="" type="checkbox"/>
<b>Work together with others to ensure a seamless service for patients</b>	<input checked="" type="checkbox"/>
<b>Help keep people healthy and work to reduce health inequalities</b>	<input type="checkbox"/>
<b>Respect the confidentiality of individual patients and provide open access to information about services, treatment and performance</b>	<input type="checkbox"/>

## Appendix 5

Due Regard (Equality Analysis) makes sure that any negative impacts have been considered and ways to minimize the impact are specified

### Due Regard Screening Template

Section 1	
<b>Name of activity/proposal</b>	Accommodation and space policy
<b>Date Screening commenced</b>	September 2016
<b>Directorate / Service carrying out the assessment</b>	Estates and Facilities
<b>Name and role of person undertaking this Due Regard (Equality Analysis)</b>	Andy Donoghue – Associate Director of Estates and Facilities
<b>Give an overview of the aims, objectives and purpose of the proposal:</b>	
<b>AIMS:</b> To provide an effective framework for the management of accommodation within the Trust	
<b>OBJECTIVES:</b> To ensure the most efficient use and utilisation of accommodation within the Trust	
Section 2	
Protected Characteristic	If the proposal/s have a positive or negative impact please give brief details
Age	
Disability	Yes – support individuals via reasonable adjustments to the working environment
Gender reassignment	
Marriage & Civil Partnership	
Pregnancy & Maternity	Yes – support individuals via reasonable adjustments to the working environment
Race	
Religion and Belief	
Sex	
Sexual Orientation	
Other equality groups?	
Section 3	
<b>Does this activity propose major changes in terms of scale or significance for LPT? For example, is there a clear indication that, although the proposal is minor it is likely to have a major affect for people from an equality group/s? Please <u>tick</u> appropriate box below.</b>	
Yes	No

High risk: Complete a full EIA starting click <a href="#">here</a> to proceed to Part B		Low risk: Go to Section 4.	✓
<b>Section 4</b>			
<b>If this proposal is low risk please give evidence or justification for how you reached this decision:</b>			
The policy does not propose any working procedures that will disadvantage any persons (or groups of persons) with protected characteristics or contain any management processes that would disadvantage them in the use or allocation of space/accommodation within the Trust			
<b>Signed by reviewer/assessor</b>	Andy Donoghue	<b>Date</b>	25 Jan 2017
<i>Sign off that this proposal is low risk and does not require a full Equality Analysis</i>			
<b>Head of Service Signed</b>	Andy Donoghue	<b>Date</b>	25 Jan 2017