Equality, diversity and inclusion scheme
2012 - 2014

November 2012
This document is available in the following formats

- easy read
- large print documents
- audio.

This document is available on our website www.pharmacyregulation.org

or by contacting our Communications Team:

communications@pharmacyregulation.org
About us

The General Pharmaceutical Council (GPhC) is the regulator for pharmacists, pharmacy technicians and pharmacy premises.

It is our job to protect, promote and maintain the health, safety and well being of all members of the public, and in particular those members of the public who use or need the services of pharmacy professionals or the services provided at a registered pharmacy.

Our principal functions include:

- Setting standards for conduct, ethics, and performance, owners and superintendents, education and training and continuing professional development (CPD);
- Establishing and promoting standards for the safe and effective practice of pharmacy at registered pharmacies;
- Establishing fitness to practise requirements, monitoring pharmacy professionals’ fitness to practise and dealing fairly with complaints;
- Approving qualifications for pharmacists and pharmacy technicians;
- Maintaining a register of pharmacists, pharmacy technicians and pharmacy premises.
- We aim to ensure that regulation is fair and proportionate – that is, in line with the level of risk posed to public health, safety and well being – and not over-burdensome. We want it to be flexible enough to respond to the changing demands made on the profession and to allow for innovation at the same time as maintaining high quality practice.
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2. The equality, diversity and inclusion scheme

1. Introduction

What we do

The General Pharmaceutical Council’s purpose is to protect and promote the health and safety of patients and the public by assuring the maintenance and development of safe and effective pharmacy practice in Great Britain. We also contribute to the continued development of trust and confidence in pharmacy by patients and the public and other health professionals.

We secure the confidence of patients, the public and pharmacy professionals by being a healthcare regulator that demonstrates effectiveness and efficiency and supports innovation in delivering its functions. We will ensure that our values are at the heart of everything we do and as a regulator we will:

(a) be focused on improvement
(b) be responsive to change
(c) develop policies that are inclusive
(d) be independent and fair
(e) demonstrate respect for others
(f) ensure that regulation is proportionate.

Further information about the General Pharmaceutical Council and the professions it regulates can be found at Annex 1.

2. Our commitment to equality and diversity

We are committed to promoting equality, valuing diversity and being inclusive in all our work as a health professions regulator, a public service provider and an employer and ensuring that the equality duties are being met.

Through embedding equality, diversity and inclusion in all that we do, we will improve both our effectiveness and efficiency as a regulator, by ensuring that the resources invested in services actually benefit all those who use or need them. We will continue to encourage a
higher profile for equality and diversity in our role as a regulator, public service provider and employer.

This scheme sets out our commitment to equality, diversity and inclusion by which we mean we will:

- promote an inclusive culture for all our staff, others who work with us, and the people that we serve
- provide services that are accessible and appropriate for everyone
- provide organisational capability for continuous improvement, learning and sharing good practice
- work towards the elimination of all forms of discrimination and harassment
- positively promote equality through our activity and communications.

Our scheme is designed to be integral to our Business Plan and is a firm statement of our intent in meeting our business aims. We will:

- aim to ensure that our policies and procedures are transparent, free from discrimination and fair to all individuals and groups regardless of their ethnic origin, race, sex, disability, sexual orientation, transgender, religion and belief or age, marriage and civil partnerships, pregnancy and maternity.
- provide the Council members, our staff and those carrying out work on our behalf with appropriate training on our equality scheme and how to put it into practice
- use equality impact assessments to ensure that our policies and procedures are developed in ways that seeks to eliminate as far as possible any adverse impact on particular groups
- involve stakeholders in developing our equality scheme and impact assessment procedures
- develop action, communication and engagement plans to support the implementation and monitoring of the scheme.
- ensure that breaches of the scheme are dealt with, where appropriate, under the relevant GPhC procedure.
3. **Vision and values**

Our equality scheme is designed to be integral to our Vision and Strategy document, which is available to download at: [http://www.pharmacyregulation.org/sites/default/files/Strategic%20plan_lores.pdf](http://www.pharmacyregulation.org/sites/default/files/Strategic%20plan_lores.pdf)

and is a firm statement of both our business aims and our values.

4. **Aims of the scheme**

The scheme aims to help us to:

- ensure that all our services are free from discrimination;
- promote equality of opportunity;
- promote good relations between people across all protected characteristic groups and particularly from different racial groups;
- promote participation from all protected characteristic groups
- promote positive attitudes towards disabled people
- take account of disabled persons’ disabilities even if this means treating disabled people more favourably
- treat members of the public, pharmacy professionals, complainants, current and prospective council members, staff and job applicants solely on the basis of their merit, abilities and potential and relevant legal requirements
- foster mutual respect and trust; and
- communicate and monitor our scheme effectively.

5. **Equality, diversity and inclusion strategy**

Diversity is a term that refers to the differences that individuals may chose to identify with such as differences in the values, attitudes, cultural perspective, beliefs, ethnic background, sexuality, age, faith, knowledge and life experiences of each individual in any group of people. The term is used to highlight individual needs and focus on the elimination of barriers.

We are determined to ensure that equality in diversity is led from the very top of this organisation and have therefore developed an equality, diversity and inclusion (EDI) leadership group to advise on progressing equality and diversity and inclusion within the organisation. Our aim is, as far as possible, that membership of this group going forward should reflect the protected characteristics.
**EDI leadership group**
The equality, diversity and inclusion leadership group currently includes:

- a director;
- a management group member;
- the head of organisational development
- a staff member;
- the head of governance; and
- the equality and diversity and inclusion manager

The role of the EDI group will be to:

- focus GPhC staff leadership on the issue of equality, diversity and inclusion;
- provide an on-going visible focus on the drive for delivery, awareness and training;
- steer the EDI agenda, together with input from staff and an external reference group;
- clear any delays and consider resources and priorities

In addition to the EDI leadership group the GPhC has developed an equality, diversity and inclusion reference group. This group is built on relationships already being established with wider equality and diversity networks. We will aim to ensure that the membership of the reference group reflects all the protected characteristics.

**EDI reference group**
The EDI reference group includes:

- representatives from external equality, diversity and inclusion network groups;
- external equality, diversity and inclusion professionals;
- GPhC staff equality, diversity and inclusion champions; and
- the GPhC equality and diversity and inclusion manager.

The role of the EDI reference group is to:
provide the GPhC’s standing arrangement for obtaining feedback and well-informed advice;

provide broadly based advice on current equality and diversity trends and best practice;

offer guidance and support to the EDI leadership group on how to effectively implement EDI ideas; and

to comment on draft equality, diversity and inclusion reports and monitor documents for scrutiny by the EDI leadership group.

6. **How we have developed the scheme**

**Planning and priorities Year 1**
This is the second edition of our equality scheme. Our approach to developing equality and diversity within the organisation has been staged to reflect our starting base and the need to ensure that the scheme was well implemented prior to moving on to embedding and finally promoting equality and diversity in all that we do. The first stage of implementation involved 6 key themes that were reflected in our first action plan:

- consulting widely with relevant stakeholders and the wider equality community;
- training our staff so that they receive information relevant to their roles;
- considering equality implications in all our standards and policies
- developing equality impact assessment procedures and carrying them out;
- developing E&D action plans across the organisation; and
- identifying the information we need to track and monitor to ensure best practice in all our regulatory operations.

**Priorities Year 2 and 3**
The scheme will be updated with practical examples and aggregated data as we improve our data collection methods. The implementation of our first scheme went well. The draft scheme was published for consultation on 30 June and closed on 30 September 2011. Overall the majority of respondents felt that: we were right to take a three-staged approach to implementing EDI; our implementation priorities were valid; we should ensure that membership of our leadership and reference groups were representative of the protected characteristics; and that sex, gender reassignment and sexual orientation sections within the draft scheme should be separated and our approach to these areas more explicit. These recommendations were taken into account when the scheme was published in
November 2011. We are now in the embedding phase of the scheme and our priorities going forward are again reflected in our second action plan attached to this scheme:

- comply with our legal obligations under the Equality Act 2010
- continue to train and support staff to consider and integrate EDI into their roles and work
- develop EDI actions across the organisation that take account of data monitoring information and the outcomes of impact analysis
- continue to engage with diverse groups of internal and external stakeholders to develop on-going mechanisms of involvement

The Action Plan for year 2 can be found on page 19 of this document.

All papers going before the Council members for discussion are required to consider equality and diversity implications and a full equality impact analysis must be considered for each new policy/procedure.

**Involvement and engagement**

To ensure that the scheme is developed in conjunction with our stakeholders we continue to work closely with them and this work is reflected as one of our priorities going forward. Our EDI leadership and EDI reference groups are key to our planning for EDI; we are planning to increase our engagement with the latter (after a first year that has necessarily focussed on training and embedding within the organisation) and we are preparing to augment our external engagement through the development of a separate distinct reference group for associates.

We continue to work hard to be inclusive, particularly with those traditionally perceived as ‘hard to reach’. Our communications team has ensured that our consultation activities have included stakeholders from diverse communities from a number of protected characteristic groups.

We have paid particular attention to identifying and engaging groups and individuals who in the past have been under-represented in the health care agenda. We have done this by working/partnering with advocacy organisations and seeking their guidance about best practice.

7. **The equality duties**
Under the Equality Act 2010 the GPhC has statutory duties, as an organisation providing a public service, covering all protected characteristics:

- age
- disability
- gender reassignment
- race
- religion or belief
- sex
- sexual orientation
- marriage and civil partnership
- pregnancy and maternity.

We must, in the exercise of our functions, have due regard to the need to:

a. eliminate discrimination, harassment and victimisation
b. advance equality of opportunity between people who share a protected characteristic and those who do not
c. foster good relations between people who share a protected characteristic and those who do not
d. promote positive attitudes towards disabled people
e. encourage the participation of disabled people in public life
f. take account of a disabled person’s disabilities even if this means treating the disabled person more favourably.

8. **Our approach to fulfilling our duties under the act**

As a best practice approach we are going beyond the statutory requirements outlined above, to publish an equality scheme and apply the same principles to our internal policies on all protected characteristics (see 7 above).

This scheme outlines what we are required to do under the Equality Act 2010 and also describes the steps we have taken and will take in order to ensure that we do not discriminate against people unlawfully. The scheme encompasses policy statements in relation to various groups but is a single scheme, as many of the steps we might take to
avoid or mitigate any adverse impact would be relevant to some or all of these groups. Our scheme shows how we are working to achieve this.

**Race equality**
As an approach to best practice and fulfilling our general duty as a regulator, public service provider and an employer, we will:

- review our functions and policies and consider whether they have implications for race equality;
- give priority where the need for action is greatest and to those functions and policies of ours which have the greatest potential to affect different racial groups;
- work with representatives of racial and ethnic groups to help ensure that our services meet their needs and to improve access to those services;
- maintain systems to allow us to monitor the effects of our policies and any changes made to them, on different racial groups; and
- promote access to information and services, where appropriate, through the use of translation and interpretation services.

As an employer we will:

- welcome and encourage job applications from people with ethnic minority backgrounds;
- monitor our employees and job applicants by ethnicity so as to identify and address any adverse impact of our policies on the promotion of equality amongst different racial groups; and
- ensure that any allegations of racial discriminations or harassment are investigated thoroughly, speedily and sensitively.

**Sex equality**
As an approach to best practice and fulfilling our general duty as a regulator, public service provider and an employer, we will:

- seek to ensure that our services and guidance are non-discriminatory and do not make unnecessary assumptions about people based on sex;
- work with representatives of gender groups to help ensure that our services meet their needs and to improve access to those services;
- ensure that our pay and rewards system is fair and transparent and that any equal pay issues are resolved effectively;
- ensure that flexible working policies apply equally to men and women and that
personnel policies apply to staff regardless of sex

- monitor our employees and job applicants by sex so as to identify and address any adverse impacts on particular groups;
- ensure that any allegations of discrimination or harassment on the grounds of sex, are investigated thoroughly, speedily and sensitively.

**Sexual orientation equality**

As an approach to best practice and fulfilling our general duty as a regulator, public service provider and an employer, we will:

- seek to ensure that our services and guidance are non-discriminatory and do not make unnecessary assumptions about people based on sexual orientation;
- work with representatives of sexual orientation groups to help to ensure that our services meet their needs and to improve access to those services;
- confront homophobic, and biphobic attitudes, behaviour and language and encourage understanding of individual attributes and rights;
- ensure that flexible working policies and personnel policies apply to staff regardless of sexual orientation;
- monitor our employees and job applicants by sexual orientation so as to identify and address any adverse impacts on particular groups;
- ensure that any allegations of discrimination or harassment on the grounds of sexual orientation are investigated thoroughly, speedily and sensitively.

**Gender reassignment equality**

As an approach to best practice and fulfilling our general duty as a regulator, public service provider and an employer, we will:

- seek to ensure that our services and guidance are non-discriminatory and do not make unnecessary assumptions about people based on transgender;
- confront transphobic attitudes, behaviour and language and encourage understanding of individual attributes and rights;
- work with representatives of transgender groups to help ensure that our services meet their needs and to improve access to those services;
- ensure that flexible working policies apply equally to transgender people and that personnel policies apply to staff regardless of gender;
- ensure that any allegations of discrimination or harassment on the grounds of transgender, are investigated thoroughly, speedily and sensitively.
Disability equality
As an approach to best practice and fulfilling our general duty as a regulator, service provider and employer we will adhere to the social model of disability. The social model of disability, now widely accepted in public policy and practice and designed by disabled people themselves, takes into account the barriers that disabled people face which are imposed by society and societal attitudes, values and failure to adapt to their impairments. This model is empowering for disabled people and moves away from the concept of disabled people being inferior to non-disabled people.

In order to promote equality of opportunity for disabled people, we will:
• look at the extent to which our functions and services take account of the needs of disabled people;
• consider the effect of our policies and practices on the opportunities for disabled people;
• work with representatives of disabled people and relevant groups to help ensure that our services meet their needs and to improve access to those services;
• gather information in relation to recruitment, development and retention of disabled employees;
• promote access to information and services;
• ensure that GPhC events are held in premises with appropriate facilities for disabled people;
• welcome job applications from disabled people;
• undertake, wherever possible to retain employees who experience disability, by making reasonable changes to their duties or working environment; and
• ensure that any allegations of discrimination or harassment on the grounds of disability are investigated thoroughly, speedily and with sensitivity.

Religion or belief equality
In order to promote equality between people from different faith groups, as well as those who do not believe, as a regulator, public service provider and employer we will:
• where reasonably practicable, ensure that meetings, hearings and events do not coincide with cultural or religious festivals or holidays where this would prevent people from attending;
• ensure that leave is not withheld unreasonably from employees who wish to celebrate cultural or religious festivals or holidays;
• work with representatives of people of different faiths, including non-believers, to help to ensure that our services meet their needs and to improve access to those services;

• not impose dress restriction on employees which may be discriminatory unless such restrictions can be justified objectively in terms of meeting a legitimate health and safety or business aim;

• seek to ensure that food provided at meetings and events will meet the needs of those attending;

• where reasonably practicable, ensure that the needs of those who require a place for prayer are appropriately met; and

• ensure that any allegations of discrimination or harassment on the grounds of religion or belief are investigated thoroughly, speedily and sensitively.

**Age Equality**

As an approach to best practice and to fulfil our general duty as a regulator, public service organisation and employer we will:

• seek to identify and meet the needs of different age groups, particularly older people and children when we provide services;

• welcome job applications from older and younger people;

• gather information in relation to recruitment and development of employees of all ages;

• ensure that any allegations of discrimination or harassment on the grounds of age are investigated thoroughly, speedily and sensitively.
Annex 1

Further information about the General Pharmaceutical Council and the professions it regulates

1. Council, committees and staffing

The Council

The role of the Council is to oversee the provision of regulation that ensures public protection and keeps pace with change and to set standards within the profession, targeting those areas of greatest need. The 14-strong Council is composed of equal numbers of pharmacy professionals and lay people. Lay people bring in knowledge from outside the profession and help to ensure public focus, openness and transparency.

To reinforce independence, and to ensure transparency in decision-making, our Council is appointed rather than elected. Members are appointed by the Privy Council to ensure a balance of qualities, skills and experience, and to reflect the diversity of the public and of the pharmacy profession.

We cover England, Scotland and Wales. In order to reflect differences in health service delivery, the Council includes at least one person who lives or works in each of the three participating countries.

The Committees

There are three statutory committees established under the Pharmacy Order 2010: the Investigating, Fitness to Practise and Appeals Committees.

Directorates

We are committed to creating a work environment free from unlawful discrimination, harassment and bullying, where everyone is treated with dignity and respect. No employee
or potential employee will receive less favourable treatment or consideration due to belonging to any of the protected characteristic groups. Our internal Equality and Diversity Policy specifically sets out our approach to managing bullying and harassment and dealing with complaints of discrimination from our staff.

We employ approximately 164 staff, most of whom are based in Central London with 30 members of inspectorate staff based throughout England, Scotland and Wales. The General Pharmaceutical Council is divided into directorates each led by a member of the Executive Team:

- The Regulatory Services Directorate incorporates: customer services, quality and case management, investigations and case management, legal advice and hearings management and the inspection team.
- The Policy and Communications Directorate incorporates: communications, standards and fitness to practise policy, the standards advisory team, education and registration policy, stakeholder engagement, and patient and public engagement.
- The Resources and Corporate Development Directorate incorporates: finance, information technology, procurement, governance, business planning and improvement, facilities, and the Council secretariat.

**Those who work on our behalf**

13 groups work on our behalf and have responsibilities under the Equality Act 2010 but are not employees. They are generally known as General Pharmaceutical Council associates:

- Fitness to Practise Committee members
- Investigating Committee members
- Appeals Committee members
- Statutory committees’ legal advisers
- Statutory committees’ clinical advisers
- Medical Assessors
- CPD Reviewers
- Assessors (examiners)
- Adjustments group
• Evaluators (pharmacy technician applications)
• Overseas applications panel
• Visitors (accreditors)
• Question Writers

2. CHARACTERISTICS OF THE PROFESSION

Pharmacists

There are 47,821 pharmacists and 21,532 pharmacy technicians on the GPhC Register (September 2012). A register analysis in 2011 showed that among registered pharmacists at that time, 59.4% were female. One third of the pharmacists on the Register are aged under 40 years. Female pharmacists as a group are younger than males – 58.5% are aged under 40 years, compared with 47.9% of males. Of all registered pharmacists for whom information on ethnic group is available 61.3% are white (British, Irish or other). Over a quarter of pharmacists (26.9%) is Asian, with Indian being the single predominant group (17.4%), followed by Pakistani (6.3%). Pharmacists from other backgrounds represent – 5.4% Black and 3.7% were of Chinese origin and 2.8% from mixed and other backgrounds. 10% of registrants were recorded as “ethnic origin unknown”.

Pharmacy Technicians

Information to come

Overseas Registrants

The current register (September 2012) shows that approximately 4570 of registered pharmacists qualified overseas. The census commissioned by the RPSGB in 2009 also indicated that pharmacists who entered the register via an overseas route were on average younger than home pharmacists (38.8 years versus 42.6 years). The majority (95.8%) from Europe were of white origin, as were a large proportion (79.4%) of those who had entered via the reciprocal route. 42% of those who entered through the adjudication route (required to complete a period of study, followed by pre-registration training and examination) were of black ethnic origin, 32.6% were of Asian origin, 1.5% Chinese and 8.4% from mixed and other ethnic groups.
### Objective 1: Review Scheme

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<tr>
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<th>Milestones</th>
<th>Outcomes</th>
<th>Protected Characteristics</th>
<th>Responsible Officer(s)</th>
<th>Target Date/Updates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Review Scheme</td>
<td>Revised Scheme consulted on by relevant stakeholders: Employers Forum; Disability Forum; EDI leadership group and reference group</td>
<td>Second Scheme and action plan adopted by GPhC Scheme published</td>
<td>All</td>
<td>EDI Manager</td>
<td>Scheme to Council November 2012</td>
</tr>
<tr>
<td>Update Scheme Action Plan</td>
<td>Consult stakeholders</td>
<td>Publish revised Scheme</td>
<td>Scheme reported to Council</td>
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### Objective 2: Engagement

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<th>Action</th>
<th>Milestones</th>
<th>Outcomes</th>
<th>Protected Characteristics</th>
<th>Responsible Officer(s)</th>
<th>Target Date/Updates</th>
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<tbody>
<tr>
<td>Obtain views on the ongoing development of EDI at the GPhC from staff, associates and external stakeholders -- members of the public,</td>
<td>Engage with staff across directorates and functions to identify key areas that require attention and that are critical to meeting our</td>
<td>Staff engaged in E&amp;D Development of EDI reflects the views of staff</td>
<td>All</td>
<td>EDI Manager</td>
<td>Work with others ongoing</td>
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registrants, health and community/voluntary sector organisations, other regulators, educators, employers - across the nine protected characteristics

Work with others in health professions regulation on E&D

Develop ongoing mechanisms for continuous engagement

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<tr>
<th>Action</th>
<th>Milestones</th>
<th>Outcomes</th>
<th>Protected Characteristics</th>
<th>Responsible Officer(s)</th>
<th>Target Date/Updates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Produce training update report</td>
<td>Ensure new Council members, staff and associates receive EDI training;</td>
<td>Council Members, staff and associates confident in respect of their responsibilities under the Equality Act</td>
<td>All</td>
<td>EDI Manager Head of OD</td>
<td>On-going – Review December 2012</td>
</tr>
</tbody>
</table>

Objective 3: Training provision
Support the needs of staff in carrying out EIAs and action planning.

- Ensure new senior staff receive EIA training;
- Ensure existing Council members, staff and associates receive top-up/refresher EDI training as appropriate.

Objective 4: Equality impact analysis (EIAs)

<table>
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<tr>
<th>Action</th>
<th>Milestones</th>
<th>Outcomes</th>
<th>Protected Characteristics</th>
<th>Responsible Officer(s)</th>
<th>Target Date/Updates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carry out Equality Impact Assessments</td>
<td>EIA regularly reviewed</td>
<td>EIAs conducted on existing and new policy, service, function or project. Outcomes prioritised and identified in action plans. Policies and procedures are transparent and free from discrimination and developed in ways that seek to eliminate as far as possible any adverse impact.</td>
<td>All</td>
<td>All staff</td>
<td>Review processes June 2013 On-going</td>
</tr>
<tr>
<td>Internal process developed to ensure EIAs are carried out on new and existing policies and procedures</td>
<td>EIA benefit from available equality data</td>
<td>Policies and procedures are transparent and free from discrimination</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Staff learning sets developed to share best-practice</td>
<td>developed in ways that seek to eliminate as far as possible any adverse impact</td>
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### Objective 5: Action planning

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<th>Action</th>
<th>Milestones</th>
<th>Outcomes</th>
<th>Protected Characteristics</th>
<th>Responsible Officer</th>
<th>Target Date/Updates</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Directorates to develop action plans for key work areas across protected characteristics (pc)</td>
<td></td>
<td>Relevant action plans developed</td>
<td>All</td>
<td>All staff</td>
<td>Start in November 2012 On-going</td>
</tr>
<tr>
<td>Directorates to develop mechanisms to ensure plans monitored and updated</td>
<td>Short review undertaken</td>
<td>Action plan outcome targets regularly monitored</td>
<td></td>
<td>EDI Manager Head of OD</td>
<td></td>
</tr>
<tr>
<td>Staff and teams supported to develop methods of joined-up work to identify common issues</td>
<td>Staff groups engaged on agreeing priority areas and incorporating EDI Action Plan themes into Directorate/team level action plans</td>
<td>Outcomes to inform next iteration of equality scheme as appropriate</td>
<td></td>
<td></td>
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<tr>
<td>Action plans to benefit from monitoring data</td>
<td>Develop monitoring process</td>
<td>Diversity Champions/leads enabled to report on directorate equality activities</td>
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<td></td>
<td>Identify internal EDI Leads/Champions</td>
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### Objective 6: Monitoring

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<th>Protected Characteristics</th>
<th>Responsible Officer</th>
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<tbody>
<tr>
<td>Develop methods and criteria for data collection</td>
<td>Produce data monitoring report and agree recommendations</td>
<td>The Scheme is updated with practical examples and aggregated data as required for ‘best practice’</td>
<td>All</td>
<td>All staff EDI Manager</td>
<td>Action plans in place November 2012</td>
</tr>
<tr>
<td>Data collected to be analysed and used to inform appropriate action</td>
<td>Review scope for capturing data in relation to the protected characteristics (pc) in each area of our work</td>
<td>Appropriate evidence is gained for action planning decisions</td>
<td></td>
<td></td>
<td>Executive team agree identification of EDI leads/Champions at relevant meeting – September 2012 - ongoing</td>
</tr>
<tr>
<td></td>
<td>Analyse data in relation to each pc in all areas of our work where possible</td>
<td>Emerging themes are identified and prioritised in action planning process</td>
<td></td>
<td></td>
<td>Discussions to take place within the org. i.e. FtP, registration, policy, to implement monitoring as criteria develop – September 2012 - ongoing</td>
</tr>
<tr>
<td></td>
<td>Data collection reports to be considered by Executive Team</td>
<td>Targets detailed in this plan are monitored in the GPhC’s Business Plan</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>