



RAISING CONCERNS POLICY

2026 - 2029

Raising Concerns Policy

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Contact Officer:	Corporate Head of Governance & Regulation
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Policy Links:	This policy should be read alongside LHP's Code of Conduct, Financial Regulations, and Procurement Standing Orders. It also links to relevant employment contracts, Board and Committee member service agreements, retention policy and LHP's Equality and Diversity Policy.

Brief Policy Summary:

This policy provides a consolidated and comprehensive framework for raising concerns within Lincolnshire Housing Partnership (LHP). It brings together and replaces the Whistleblowing Policy, Anti-Fraud and Corruption Policy, Anti-Bribery Policy, and Probity Policy. It outlines how concerns can be raised, how they will be managed and investigated, and the roles and responsibilities of all parties involved. It ensures compliance with legislative and regulatory expectations, including the requirements introduced by the Economic Crime and Corporate Transparency Act 2023. The policy reinforces LHP's zero-tolerance approach to wrongdoing and its commitment to maintaining the highest standards of probity, transparency, and ethical conduct.

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Introduction

1. Lincolnshire Housing Partnership (LHP) is committed to maintaining a culture of honesty, transparency, and accountability. The way we handle concerns raised by colleagues, Non-Executive Directors, customers, or third parties reflects our values and our commitment to the highest standards of integrity and probity. This Raising Concerns Policy (Policy) explains how individuals can raise concerns about suspected wrongdoing, including fraud, bribery, or corruption. Concerns may relate to suspected breaches of the Code of Conduct, including undeclared conflicts of interest, gifts or hospitality, misuse of resources, or behaviour that falls below expected standards. It provides assurance that all such concerns will be taken seriously, handled sensitively and appropriately, and investigated in line with relevant legislation and regulatory expectations.
2. This policy replaces and consolidates four previous policies: the Whistleblowing Policy, Anti-Fraud and Corruption Policy, Anti-Bribery Policy, and Probity Policy. By integrating these into a single document, LHP aims to make the process of reporting and addressing concerns more accessible, consistent, and effective.

Objective

3. This policy supports LHP in identifying and addressing concerns where there may be actual or perceived conflicts of interest, bias, misconduct or other wrongdoing.
4. This Policy is for raising concerns about wrongdoing or serious failures. It is not intended to be used to challenge business decisions or raise a personal grievance, such as issues about terms of employment, pay or individual treatment. Raising concerns within the scope of this policy is different from making a complaint. LHP has an established procedure for dealing with complaints which is entirely separate to raising concerns or whistleblowing.
5. An important aspect of accountability and transparency is a mechanism to enable all individuals to voice concerns internally in a responsible and effective manner when they discover information which they believe shows serious malpractice, risk, abuse or wrongdoing. This Policy is intended to guide colleagues through the process of raising concerns within or in relation to LHP.

Purpose

6. This Policy demonstrates LHP's commitment from Board level down, to an ethical culture, and behaviors which reflect at all times the Seven Principles of Public Life (Selflessness, Integrity, Objectivity, Accountability, Openness, Honesty and Leadership). Mandatory training on this policy will be provided to all colleagues and associated persons, with periodic refreshers.
7. It is to empower anyone connected with LHP to safely and with confidence, report any concerns. It ensures a fair and consistent approach to investigating concerns, promoting and upholding the values of transparency, honesty, and accountability. The Policy supports compliance with legal, regulatory, and governance

requirements, including those introduced under the Economic Crime and Corporate Transparency Act 2023. This ensures LHP safeguard their integrity and reputation, ensuring proper use of its resources.

8. This Policy reassures colleagues that it is safe and acceptable to speak up. The Policy also enables colleagues to raise their concerns at an early stage and in the appropriate way. Rather than waiting for proof, LHP would prefer colleagues to raise the matter when it is still a concern. LHP welcomes the raising of concerns as an opportunity to learn and to put things right.

Scope

9. This Policy applies to all those who work for or with LHP. This includes all colleagues, Non-Executive Directors, involved customers participating in governance or scrutiny roles, agency colleagues, consultants, contractors, volunteers, and subsidiaries or joint ventures. It also applies to third parties acting on LHP's behalf who may be considered "associated persons" for the purposes of fraud or bribery legislation.
10. All investigations will comply with UK GDPR and Data Protection Act 2018 to ensure all lawful and secure handling of personal data.

Legal and Regulatory Framework

11. This policy supports compliance with:
 - Economic Crime and Corporate Transparency Act 2023
 - Bribery Act 2010
 - Fraud Act 2006
 - Theft Acts 1968 & 1978
 - Police and Criminal Evidence Act 1984
 - Public Interest Disclosure Act 1009
 - Employment Rights Act 1996
 - Enterprise and Regulatory Reform Act 2013
 - Equality Act 2010
 - Housing and Regeneration Act 2008
 - NHF Code of Governance 2020
 - Regulator of Social Housing (RSH) Governance & Financial Viability Standard
 - Financial Conduct Authority Expectations for Community Benefit Societies
 - Charity Commission Guidance and Principles of Charity Law
 - UK GDPR
 - Data Protection Act 2018

Definitions

12. Concerns raised under this policy may relate to a range of wrongdoings, including but not limited to:

- **Bribery and Corruption:** Offering, giving, receiving or soliciting something of value as a means to influence the actions of an individual in a position of trust.
 - **Blackmail or Extortion:** Coercion through threats or undue pressure.
 - **Conflicts of Interest:** Situations where personal interests conflict, or could be perceived to conflict, with duties owed to LHP.
 - **Facilitation Payments:** unofficially, typically small payments made to secure or expedite routine processes are strictly prohibited under this policy.
 - **Fraud:** Deliberate deception intended to cause loss or gain, such as submitting false invoices or misappropriated funds.
 - **Gifts and Hospitality:** Colleagues must declare any gift or hospitality received or provided, including its value, so that it can be recorded in the Register of Gifts and Hospitality, except where they have only a nominal value of less than £25, provided they do not exceed the £50 annual limit from one person or organisation to one colleague.
 - **Political and Charitable Contributions:** LHP does not make any contributions to politicians, political parties, or election campaigns.
 - **Probity Breaches:** Actions or decisions that are not transparent, not in line with policy or procedure, or that result in improper personal gain.
 - **Reasonable Belief:** Colleagues do not have to have proof that such an act is being, has been, or is likely to be committed. A reasonable belief is sufficient.
 - **Sponsoring:** Contribution in money or in kind by LHP towards an event organised by a third party in return for the opportunity to raise LHP's profile.
13. **Whistleblowing:** Concerns of serious wrongdoing that is in the public interest and qualifies for protection under the Public Interest Disclosure Act 1998.
14. Colleagues must adhere to the behavioural standards set within this policy and hold themselves to the highest standard of accountability.

Gifts, Hospitality and Donations

15. LHP expects all colleagues and associated persons to uphold the highest standards when it comes to receiving or offering gifts, hospitality or donations. Gifts and hospitality above £25 must be declared in the register. A cumulative threshold for gifts received or provided of £50 per donor per year applies. Any gifts or donations exceeding this limit must be approved by the Audit & Risk Committee and the reasons recorded.
16. Where suppliers or contractors wish to make donations (e.g. to support colleague events or charitable appeals), these must be declared and approved in advance. Donations must be used only for the stated purpose and must never be linked to the award or retention of contracts. All such contributions will be recorded in the Gifts and Hospitality Register and monitored by the Governance & Regulation Team.
17. Hospitality should only be accepted by colleagues (except contractors) where the

event is in the direct promotion or advancement of LHP's business or linked to the sector. These offers will be reviewed on a case-by-case basis and will be subject to internal approval mechanisms.

18. If a gift or hospitality cannot be accepted (e.g. exceeds limits, creates a perceived conflict, or is inappropriate), the colleague must politely decline and notify the Governance & Regulation Team. All declined offers must be recorded in the Gifts & Hospitality Register as 'declined'. Where refusal is impracticable, the colleague must seek prior approval from the Corporate Head of Governance & Regulation; if already received, the item should be returned where possible or, with Governance approval, donated to a charity unconnected to the donor, with a record kept.
19. LHP will not accept gifts, hospitality, donations or sponsorship from any organisation in live tender or evaluation process, or within 12 weeks before or after key procurement milestones, unless explicitly approved by the Corporate Head of Governance and Regulation.
20. LHP may accept donations from contractors or suppliers only when there is no actual or perceived link to procurement or contract decisions. Social value delivered as part of a contractual commitment agreed through procurement is not a gift or donation and should be recorded through contract social value monitoring, not the Gifts and Hospitality register. Donations must have a clear purpose, be approved, recorded in the Gifts & Hospitality Register and a dedicated Donations Log, and be capable of public scrutiny. Where funds are provided for LHP to purchase items for partners (e.g., food banks/community groups), monies must be receipted to a dedicated account; procurement must follow Financial Regulations and Standing Orders; full audit trail (donor agreement, approvals, purchase orders, invoices, delivery and partner acknowledgement) must be retained; and duties must be segregated.
21. Items given as freebies (e.g. merchandise or prizes) should ordinarily be declined. Modest items may be accepted strictly for specific LHP events (such as colleague conference raffles) only with prior Governance & Regulation approval, recorded in the Register, ring-fenced use, and assurance that there is no live or imminent procurement activity involving the donor. Cash or cash-equivalents (including vouchers) must not be accepted; if received inadvertently, they must be returned or, with Governance & Regulation Team approval, redirected to a charity unconnected to the donor with a full record.

Responsibilities of Associated Persons

22. LHP acknowledges that the actions of contractors, suppliers, consultants, and subsidiaries can have a direct impact on its legal and ethical standing. The Economic Crime and Corporate Transparency Act 2023 (ECCTA) introduced a corporate offence of failing to prevent fraud by associated persons. To meet its obligations, LHP ensures that third parties:
 - Are subject to proportionate due diligence prior to engagement.
 - Are contractually bound to comply with LHP's anti-fraud and anti-bribery procedures: and

- Understand that non-compliance may lead to termination of contract and possible reporting to relevant authorities.
23. LHP also ensures its internal policies and development programs embed awareness of the extended corporate responsibilities introduced by ECCTA.
24. The Board and Audit & Risk Committee:
- Duty to ensure that there is a secure environment in which to work, where colleagues are confident to raise concerns without worrying that it will reflect badly on them.
 - Duty to ensure concerns raised are listened to and addressed, and colleagues feel protected when carrying out their official duties and are not placed in a vulnerable position.
 - Duty to ensure colleagues receive adequate training and support to carry out their responsibilities.
25. The Chief Executive:
- Responsible for monitoring and ensuring compliance with Secretary of State directions regarding fraud and corruption.
26. Executive Leadership Team:
- Promote a top-down ethical approach to good governance, zero tolerance to wrongdoing, promoting a culture reflecting the seven principles of public life.
 - They will be provided with regular assurances that the Policy is operating effectively and that the reporting requirements are being adhered to.
27. Heads of Service:
- Promote a culture where concerns can be raised openly and dealt with in a manner that forms part of the day-to-day functioning of the team.
 - They will ensure they are familiar with the latest version of this Policy, engage fully in training and promote attendance at training of all colleagues within their services.
28. Corporate Head of Data & Technology:
- Responsible for reporting any suspicions that IT is being used for bribery purposes as soon as possible.
29. Managers:
- Responsible for ensuring that an adequate system of internal controls exists within their areas of responsibility and that controls operate effectively.
 - Responsible for identifying sensitive and at-risk posts.
 - Responsible for assessing the types of risks involved in the operations for which they are responsible and ensure that adequate control measures are put in place to minimise the risks.
 - Responsible for designing workflows that ensure a clear segregation of duties, particularly for sensitive or at-risk posts, to ensure no single individual

has sole control over all parts of a process. This includes separating the authorisation of actions from their recording and review to prevent the concealment of wrongdoing and ensure robust internal oversight.

- Managing colleague interests and ensuring accurate reporting of gifts and hospitality.

30. Human Resources Team:

- Responsible for liaising closely with managers where a colleague is suspected of being involved in bribery or corruption.
- Responsible for ensuring the appropriate use of LHP's Disciplinary Procedure and shall advise those involved in the investigation into matters of employment law.
- Responsible for recording colleague interests.

31. Head of Governance and Regulation

32. All LHP colleagues: Responsible for having, and be seen to have, the highest ethical and personal standards and being honest and objective in their work. Every colleague is responsible for:

- Conducting themselves in accordance with the seven principles of public life.
- Acting with propriety when using LHP's resources.
- Applying established policies and procedures in all aspects of their work.
- Being aware of the potential risk and signs of fraudulent activity, recognising that such activities can take place at any level within LHP.
- Feeling able to challenge or question any unusual activity or transaction.
- Reporting concerns which are of the public interest.
- Co-operating with any investigatory process.
- Ensuring accurate logs are taken.
- Not requesting or receiving a bribe from anybody, nor imply that such an act might be considered. This means colleagues will not agree to receive or accept a financial or other advantage from a former, current, or future client, business partner, contractor or supplier or any other person as an incentive or reward to perform your function or activities improperly.
- Safeguarding any corporate information. This means colleagues must not communicate with any members of the press, media or another third party about any suspicious activity or live investigations under this policy, this could seriously damage the investigation and any subsequent actions taken; and
- Upholding ethical standards and ensure controls operate effectively.

33. LHP may, in certain circumstances, be held responsible for acts of bribery committed by intermediaries acting on its behalf such as subsidiaries, clients, business partners, contractors, suppliers, agents, advisors, consultants or other third parties. The use of intermediaries for the purpose of committing acts of bribery

is prohibited.

34. Third-party wrongdoing will be reported to relevant authorities and regulators as required.

Raising a Concern

35. Before raising a concern, this Policy should be read in conjunction with other relevant policies and procedures published by LHP, in particular those listed at the front of this policy.
36. Raising a concern is often difficult, and colleagues may feel unsure whether to raise a concern or be certain as how to do it. Support is available internally and colleagues can discuss concerns with individuals listed within the Raising Concerns Process.
37. Individuals who are unsure whether or how to raise a concern may also seek confidential, independent advice from Protect (formerly Public Concern at Work), a specialist whistleblowing charity.
38. Being told to cover up wrongdoing is itself a disciplinary offence. If anyone asks you not to raise or pursue a concern, especially someone in a position of authority, you should not agree to remain silent. Colleagues should report the instructions to cover up the wrongdoing as well as raising the concern.
39. All concerns raised will be treated in confidence. Anonymous raised concerns will be accepted, though the ability to investigate such concerns thoroughly may be limited by the lack of detail or follow-up.
40. Concerns can be raised anonymously. However, this can make it harder to provide legal whistleblowing protection, as it may be more difficult to show if the individual has suffered any disadvantage as a result of raising the concern. If during the investigation their identity was disclosed, then they would be protected.
41. When colleagues raise a concern, they should provide as much detail as possible. Colleagues may be asked to confirm the details in writing including supporting evidence if this is available. So, it is helpful to start making a record of the concerns as soon as any worries emerge, even if the colleague is unsure at that stage whether they should raise their concerns. When raising a concern, colleagues should provide as much information as they reasonably can, including where possible:
 - The background and reason behind the concern.
 - Whether they have already raised a concern with anyone and the response.
 - Whether they have a personal interest in the concern: and
 - Any relevant dates
42. Concerns can be raised in several ways depending on the nature and severity of the issue and the individual's preferred communication method. In the first instance, individuals are encouraged to raise their concerns with their line manager. Where this is not appropriate, concerns can be reported to:
 - the Corporate Head of Governance & Regulation;

- Whistleblowing Champion (Chair of the Audit & Risk Committee)
 - any member of the Executive Leadership Team;
 - any Non-Executive Director;
 - LHP's confidential Basecamp reporting form or via email to RaisingConcerns@lincolnshirehp.com.
43. Where a concern relates to senior management, or where an individual does not feel comfortable raising the issue through management channels, concerns may also be raised with a Non-Executive Director, including the Board's Whistleblowing Champion.
 44. LHP will make reasonable adjustments to support individuals to raise concerns, including alternative formats, additional time, support with written submissions or facilitated conversations where needed.
 45. This policy does not override an individual's legal right to make a protected disclosure under the Protected Interest Disclosure Act (PIDA) 1998. If the concern has been raised in line with this Policy, an internal investigation has been concluded and the worker reasonably believes that the appropriate action has not been taken and the concerns have not been adequately addressed, they should report the matter to the RSH who is the prescribed person under PIDA for Housing Associations.
 46. All concerns raised will be taken seriously. LHP is committed to taking all reasonable steps to maintain confidentiality where this is requested (unless it is required by law to break that confidentiality). We recognise that colleagues may prefer to provide anonymous information, however, this will limit our ability to ask follow-up questions, clarify matters or provide feedback.
 47. Maliciously making a false allegation is a disciplinary offence.
 48. If faced with blackmail or extortion, colleagues must prioritise personal safety, withdraw from the situation, and immediately report the matter to their line manager. Where there is an immediate risk, contact the Police and then notify the Governance & Regulation Team. All incidents will be recorded, supported and investigated.

Investigation and Response

49. All reported concerns will be reviewed by the Corporate Head of Governance & Regulation and assessed based on their seriousness and complexity. Where appropriate, concerns will be formally recorded in the confidential concerns register and reported to the Audit and Risk Committee. Investigations may be carried out internally or by external specialists, depending on the nature of the concern.
50. An internal or an external investigator may be appointed to further investigate the facts of the case, and in some circumstances, where there is evidence of a criminal offence, it will be referred to the Police or other agency. The investigation may involve the person raising the concern, the person accused of wrongdoing and other individuals involved giving a written statement, or having an investigatory interview with the investigating officer if required, or both.

51. Individuals raising concerns will receive feedback where appropriate, on how their concerns have been handled and any actions taken. Disciplinary action, legal proceedings, or regulatory notifications may follow if wrongdoing is identified. Whistleblowers will be protected from reprisal and victimisation, and will be supported through the process.
52. Any matter raised under this Policy will be investigated thoroughly, fairly, consistently, promptly, and professionally.
53. Bribery will normally, dependent upon the circumstances of the case, be regarded as gross misconduct, thus warranting summary dismissal without previous warning.

Protection for Workers

54. The Governance & Regulation Team will maintain a record of all concerns raised under this Policy and track the status of investigations and outcomes.
55. When investigating a concern, LHP will support the person raising the concern in the following ways:
 - provide access to mentoring and advice and signposting to other available resources;
 - reassurance that their position at work will not be affected by raising the concern;
 - explain that some colleagues may still speculate about who has raised the concern whether it has been raised in confidence and provide assurance that their confidentiality will be retained (if requested); and
 - being accompanied by a trade union representative or colleague at any meeting about the concern, if this is what they wish.
56. This Policy will be reviewed every three years or earlier if required by legislative or regulatory change. Internal audit will periodically assess the effectiveness of controls linked to the police, including the Gifts and Hospitality Register.

Monitoring, Review and Reporting

57. The Governance & Regulation Team will keep a log of all the lessons learned and track actions through completion. The Governance & Regulation Team will maintain records of all concerns and reports raised under this Policy and track the status of investigations and outcomes. Quarterly reports will be provided to the Audit and Risk Committee summarising themes and key trends. Identified learning will inform risk management, internal control improvements and development programs.
58. Compliance with this Policy and these guidelines will be monitored regularly.
59. A confidential report will be presented to the first appropriate meeting of the Board or Audit and Risk Committee following any investigation of whistleblowing, to assess whether appropriate action has been taken and whether internal controls are satisfactory. The report will include:
 - The circumstances of the concern

- Any loss sustained by LHP
- Action taken
- The adequacy of internal controls, systems, and procedures
- Recommendations on further action to be taken including changes in systems and procedures; and
- Any reporting of the matter to appropriate government department of regulatory agency.

60. LHP completes an annual return to the RSH detailing instances of fraud.

Lincolnshire Housing Partnership (LHP) Equality and Quality Impact Assessment (EQIA)

Title of Policy/Event/Decision: Raising Concerns Policy

Lead Officer(s): Jess Hyland, Corporate Head of Governance & Regulation

Date of EQIA: 12 January 2026

Scope and Purpose	
Briefly describe the policy/event/decision being assessed:	The policy sets out LHP's approach to preventing and mitigating organisational risks from instances reported within the scope of this policy, where these instances occur to investigate, manage, and report.
What is the aim or purpose of this policy/decision?	The purpose of this Policy is to provide a clear, safe, and trusted mechanism for raising concerns, ensuring concerns are handled fairly, consistently, and without detriment. The policy supports a culture of openness and accountability and seeks to ensure equitable access to reporting and investigation processes for all individuals, including through the use of reasonable adjustments where required.
Which departments or groups will be affected by this policy/event/decision?	• LHP Colleagues • Non-Executive Directors • Involved Customers • External Partners
Data Collection and Evidence	
What data or evidence have you used to identify how different groups may be affected? (e.g., tenant demographic data, service usage statistics, consultation)	All Colleague Data (Culture Assessment, ARK Survey 2025) Board Member EDI Data (March 2025) Involved Customer Data (Culture Assessment, ARK Survey 2025)

feedback)					
What does this data tell you about the potential impacts on different equality groups?	<u>All Colleague Data</u> The majority of LHP colleagues describe themselves as white, heterosexual, of no religion and with no disabilities. There is a fairly even split between male (43%) and female (46%) colleagues, with a third of the workforce working for LHP for more than 8 years and a fairly even split across those working between 1-6 years. The highest number of colleagues working for LHP are in the 35-44 age range. This indicates very limited diversity in terms of ethnicity, religious belief (other than ‘no religion’ or ‘Christian’) and those colleagues who describe themselves as other than ‘heterosexual’.				
	<u>Board Member EDI Data</u> The Board’s composition demonstrates a positive gender balance. However, representation of individuals with disabilities remains low. Additionally, while there is a high proportion of members aged between 45-54 (37.5%) and over 55 (37.5%), there is limited diversity in terms of religious background and racial or ethnic representation. The highest number of Non-Executive Directors are aged between 45-54 (35.71%).				
	<u>Involved Customer Data</u> LHP Customer demographics indicate the majority are customers living independently, who have been with LHP for more than five years, are mainly of white ethnicity and in the 65+ age range.				
	<u>All Data Sets</u> From reviewing the data, there could be a risk that formal procedures may be perceived as intimidating or inaccessible for people from under-represented groups or those with particular needs (e.g. neurodiverse members, those with mental health concerns).				
	The data suggests that while the policy aims to be neutral, monitoring is essential to prevent potential adverse impacts on specific groups. For instance, colleagues with disabilities or those from ethnic minority backgrounds may experience unique challenges during any follow-on processes.				
RAG Impact Assessment on Protected Characteristics					
Use the RAG system to assess the level of potential impact for each protected characteristic:					
• Red (High Risk): Significant potential for negative impact requiring immediate action to mitigate. • Amber (Medium Risk): Some potential for negative impact, which can be mitigated with changes. • Green (Low or No Risk): Little to no negative impact identified.					
Ensure that you state reasons (the why) for your justifications.					
Protected	Impact	RAG	Description of	Mitigation/	Responsible

Characteristic	(Positive/Negative/Neutral)	Rating	Potential Impact	Enhancement Actions	Officer
Age	Neutral		No impact anticipated, though younger and older colleagues may interpret expectations differently	Provide accessible guidance through different mediums such as use of summaries, animation as well as verbal reminders through all team meetings / toolbox talks.	CHoGR
Disability	Potential Barrier		The process to report or log could unintentionally disadvantage neurodivergent or colleagues who are disabled unless reasonable adjustments are clearly acknowledged e.g. colleagues with dyslexia who require software support to conduct admin duties	Ensure reasonable adjustments are offered and are inclusive for all colleagues.	CHoGR
Gender Reassignment	Neutral		No impact anticipated	N/A	N/A
Marriage and Civil Partnership	Neutral		No impact anticipated directly however indirect issues may arise if	Inclusion of spouse / partner relationships in declarations of	CHoGR / CHoH&W

			preferential treatment or exclusion occurs due to personal relationship	interest are managed appropriately	
Pregnancy and maternity	Neutral		No impact anticipated	Whilst no direct impact, ensure that any cases involving those on pregnancy / maternity are fair and sensitively handled with appropriate reasonable adjustments	CHoGR
Race	Neutral		No impact anticipated	N/A	N/A
Religion or Belief	Potential Barrier		Currently no direct impact.	Meeting and event scheduling should be planned with consideration for different religious and cultural needs as the workforce becomes more diverse.	CHoGR
Sex	Neutral		No impact anticipated	N/A	N/A
Sexual Orientation	Neutral		No impact anticipated	N/A	N/A
Mitigating Negative Impact					
What actions will you take to reduce or mitigate any identified negative	AGE – Neutral Use multiple formats (written summaries, visual aids like animations, and verbal reinforcement) to make expectations accessible to different groups. Disability – Potential Barrier Ensure events, meetings, and communication are accessible (e.g., accessible				

impacts? Provide specific mitigation measures for each characteristic where a negative impact (Red or Amber rating) was identified.	formats, flexible timing reasonable adjustments such as software support to conduct admin duties). Marriage & Civil Partnership – Neutral Ensure personal relationships are transparently managed through declarations of interest. Pregnancy & Maternity – Neutral Ensure all managers are aware of their responsibilities to apply reasonable adjustments and avoid indirect discrimination. Religion – Potential Barrier Ensure consideration is given to cultural / religious needs Diversity Monitoring - on raising concern, areas will be reviewed as part of the Annual Raising Concerns review presented to the Audit and Risk Committee to identify any barriers or gaps which need to be addressed as part of the annual improvement plan. Accessibility – supporting documentation such as guidance, procedures and development materials will be reviewed with the Organisational Development Team and Colleague Forum ahead of publication to identify any areas for improvement to enhance accessibility.
Who is responsible for implementing these actions?	Corporate Head of Governance & Regulation
Consultation and Engagement	
Have you consulted any stakeholders or equality groups? If so, who and how?	Leadership Group Audit & Risk Committee
What feedback have you received, and how has this influenced your assessment?	From the data findings, it highlighted the need to engage with colleagues that are potentially impacted by the policy to ensure that both the policy and processes are inclusive. The Organisational Development Team and Colleague Forum will be consulted with before communication methods are finalised.
Decision Making	
How has this	N/A

EQIA informed or influenced the final decision?	
Were any changes made to the policy/decision as a result of the EQIA?	Although no specific changes to the Policy, we will ensure: • reasonable adjustments are available for accessibility; • flexible options in scheduling to meet individual needs; and • reinforced the need for accessible communications.
Monitoring and Review	
How will you monitor the actual impact of the policy/decision once it is implemented?	All Raising Concerns incidents are monitored and recorded by the Governance & Regulation Team and reported to the Audit and Risk Committee on a quarterly basis.
When will the policy/decision be reviewed?	Every three years, with interim reviews if the feedback or data suggests changes are necessary.
Sign-Off EQIA Completed By: <i>Lead Officer(s)</i> <i>Name(s):</i> <i>Date:</i>	Corporate Head of Governance & Regulation 12 January 2026
Approved By: <i>Approval Name:</i> <i>Date:</i>	Abigail Iyaho 15.01.2026