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| **Equal Opportunities for Visitors Policy** |
| Version 2.0 |
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| **Turner Martin (Mr)****23 September 2020** |
| **A. Confidentiality Notice** |

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C. Document Details

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D. Document Revision & Approval History

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| **Version** | **Date** | **Version Created By** | **Version Approved By** | **Comments** |
| 1.0 | May 2013 | Mrs D Teasdale | Dr S Ul-Haq |  |
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| 2.0 | Sept 2020 | Mr M Turner |  | Formatting |
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E. Definitions

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| “The Practice”, “We” | On behalf of The Partners of Staveleigh Medical Centre |
| “CCG” | Clinical Commissioning Group for Tameside and Glossop |
| “Office”, “Officers” | Responsible persons for policy |

F. Persons Whom Policy Applies to

Staff, faculties, visitors, stakeholders and other persons or bodies affected by or for whom this policy applies to:

* All Clinical staff.
* Patients.
* 3rd Party Staff.
* All Stakeholders.

G. Responsible Office

Office or officers charged with developing, updating, communicating, training, ensuring compliance with, and providing resources to promote adherence to this issued policy:

* Practice Manager.
* All Practice Staff.
* Practice Partners.

H. Introduction

The term ‘visitor’ used below refers to anyone (including patients and their family members, other visitors and contractors) making use of the Practice’s premises and services (except employees for whom the Equal Opportunities Policy for Staff applies).

I. Practice Statement

Staveleigh Medical Centre is celebrates diversity and is committed to ensuring equal opportunities for everyone.

J. Operational Implementation and Procedures

Staveleigh Medical Centre:

* Will ensure that all visitors are treated with dignity and respect
* Will promote equality of opportunity between men and women
* Will not tolerate any discrimination against, or harassment of, any visitor for reason of age, sex, marital status, pregnancy, race, ethnicity, disability, sexual orientation, gender identity, trans status, religion or belief, nationality, ethnic origin, civil partnership or gender re-assignment
* Will provide the same treatment and services including the ability to register with the practice to any visitor irrespective of age, sex, marital status, pregnancy, race, ethnicity, disability, sexual orientation, gender identity, trans status, religion or belief, nationality, ethnic origin, civil partnership or gender re-assignment.

This Policy applies to the general public, including all patients and their families, visitors and contractors.

The practice actively promotes and supports the ethos and the requirements of the Equality Act 2010.

**Procedure**

**Discrimination by the Practice or Visitors /Patients against you**

If you feel discriminated against:

* You should bring the matter to the attention of Deborah Teasdale/Senior Partner whowill investigate the matter thoroughly and confidentially within 14 working days.

The Reception Lead/Senior Partner will establish the facts and decide whether discrimination has taken place and advise you of the outcome of the investigation within 14 day timescale.

If you are not satisfied with the outcome, you should raise a formal complaint through the Practice’s Complaints Procedurea copy of which is located in reception, please ask the reception for details

**Discrimination against the Practice’s staff**

The Practice will not tolerate any form of discrimination or harassment of our staff by any visitor.

Any visitor who expresses any form of discrimination against, or harassment of, any member of our staff, will be required to leave the Practice’s premises forthwith.

If the visitor is a patient, he/she may be removed from the Practice’s list if any such behaviour occurs on more than one occasion.

If you are not satisfied with the outcome, you should raise a formal complaint through the Practice’s Complaints Procedurea copy of which is located in reception, please ask the reception for details.

K. Statement Publication

Staveleigh Medical Centre will endeavour to update and publish their policy and statement as soon as possible and appropriate. The policy and statement should be reviewed not more than 12 months of the version date.

The statement needs to be approved and signed by an appropriate senior person in the business to ensure senior level accountability.

A copy of the statement is to be provided to anyone who requests one in writing. The copy must be provided to the requestor within 30 days of the receipt of the request.

L. Additional Information

None recorded.

M. References & Further Resources

None recorded.

N. Appendices

None recorded.

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