## **GATESHEAD HATZOLA**



# **Equality and Diversity Policy**

#### 1. INTRODUCTION

- 1.1. Gateshead Hatzola, together with the other Hatzola groups in the UK, adheres to the ethos of Hatzola worldwide. While Hatzola responds to patients of all faiths or none, volunteers are all religious Jews and each group functions in full compliance with Jewish Law, under the guidance of a locally recognised orthodox Jewish Rabbinical authority.
- 1.2. Specifically, Gateshead Hatzola (Hatzola) is run by the Gateshead Jewish community and all volunteers must be members of Gateshead Hebrew Congregation. Hatzola complies at all times with Jewish Law as interpreted by the Rabbinic authorities recognised by Gateshead Hebrew Congregation.
- 1.3. However, Hatzola responds to and treats all members of the public, regardless of their faith or ethnicity.
- 1.4. Within this policy, Hatzola adheres to the regulations set by the Care Quality Commission:
  - Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 10: Dignity and respect
  - Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 13: Safeguarding users from abuse and improper treatment

#### 2. LEGISLATION

- 2.1. Gateshead Hatzola, as a community group, is exempt from the Public Sector Equality Duty and from many of the provisions of the Equality Act 2010. However, it wishes to comply with the spirit of the legislation and to ensure that it provides a fair and equitable service to all its patients.
- 2.2. The Equality Act 2010 defines nine protected characteristics: age, disability, gender, gender reassignment, marriage or civil partnership, pregnancy and maternity, religion or belief, race, sexual orientation. It is illegal to discriminate on the basis of any of these characteristics.
- 2.3. The legislation also prohibits discrimination by association, where a person is discriminated against because of their connection to a person with a protected characteristic.
- 2.4. Hatzola will respond to and treat all patients equally, regardless of whether they have a protected characteristic or an association with a person with a protected characteristic.

### 3. RECORD KEEPING

- 3.1. In the pre-hospital emergency medical setting, record keeping may delay or interfere with treatment. It is therefore important that it is kept to the minimum necessary for patient monitoring and safe handover of care.
- 3.2. Hatzola responders will therefore routinely record the date of birth and gender of patients as this is relevant both clinically and to identify a patient on NHS systems. Preexisting disability, pregnancy or maternity status and gender reassignment will only be recorded if clinically relevant.
- 3.3. As the other protected characteristics are not relevant to emergency medical treatment and do not affect the provision of care, they will not routinely be recorded.
- 3.4. The gender that is recorded for a patient will be that which is used on their NHS records. Where that differs from the gender with which they currently identify, this will also be recorded if it is clinically relevant.

## 4. LANGUAGE

- 4.1. It is important that responders are able to communicate with patients in order to carry out an adequate assessment and to explain and obtain consent for treatment. Within Hatzola's operational area, most residents speak English, at least as an additional language.
- 4.2. Responders will be provided with facilities for translation where necessary. These will include a multilingual clinical phrase book and access to telephone translation facilities.
- 4.3. Although family members may offer to translate, this is often undesirable because of issues of confidentiality or if abuse is possible. Responders should therefore consider carefully whether to use family members as interpreters.

## 5. RELIGIOUS AND CULTURAL NEEDS

- 5.1. As members of a minority group themselves, Hatzola responders appreciate the religious and cultural needs of patients and will act towards them with sensitivity.
- 5.2. When the clinical and legal situation permits, the religious and cultural needs of patients will be taken into consideration at all times, except that the saving of life will always take precedence.

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