# Equality Diversity Inclusion and Belonging Policy

## Green Labyrinth 2026 to 2027

This policy sets the mandatory standard for fair treatment, lawful inclusion and evidence-led removal of barriers across Green Labyrinth. It protects every person covered by the Equality Act 2010 without ranking one protected characteristic above another. Different treatment is permitted only where law requires or allows it, the evidence supports it and the response is proportionate.

**The Board expects leaders to demonstrate impact** through timely adjustments, impartial case handling, reliable data, curriculum practice, staff competence and sustained improvement. A policy statement without this evidence does not meet the required standard.

| Document control | Approved position |
|---|---|
| **Version** | 2.0 |
| **Policy owner** | Operations Director |
| **Executive accountable** | Managing Director |
| **Approval body** | Board of Directors |
| **Effective date** | September 2026 |
| **Next scheduled review** | September 2027 |
| **Review cycle** | Annual and on material legal or operational change |
| **Applies to** | Learners, apprentices, applicants, staff, workers, governors, volunteers, visitors, partners and contractors |

## Approval record

| Decision | Name or minute reference | Date |
|---|---|---|
| **Policy approved** | B C DAVIS | 7 Sep 2026 |
| **Implementation assurance accepted** | S Davis | 7 Sep 2026 |
| **Any controlled exception** | | |

# Document status and implementation controls

This document supersedes the previous 2026 to 2027 draft when approved. The Operations Director maintains the controlled copy, records amendments and ensures that related procedures remain aligned. Printed or locally saved copies are uncontrolled unless their status is confirmed before use.

| Version | Date | Change | Approved by |
|---|---|---|---|
| 1.0 | September 2026 | Original policy draft | Board of Directors |
| 2.0 | September 2026 | Legal, operational and inspection-framework revision | Board of Directors |

## Implementation requirements before approval

Confirm the person performing the Equality Lead function and the deputy route when that person is unavailable.

Publish accessible reporting routes and align the complaints, grievance, disciplinary, safeguarding, whistleblowing, SEND and reasonable-adjustment procedures.

Complete the sexual-harassment risk assessment and third-party control plan before 30 October 2026.

Set baselines and owners for Annex D objectives, approve material-gap thresholds and confirm the Board reporting calendar.

Map subcontractors, employer placements and delivery partners to the assurance requirements in this policy.

## Interpretation

Must indicates a mandatory requirement. Should indicates the normal course unless a documented, lawful reason supports another approach. References to Green Labyrinth include activities delivered on its behalf where it retains responsibility. This policy does not replace safeguarding action, statutory reporting, contractual duties or professional legal advice on a contested high-risk decision.

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# Policy statement

Green Labyrinth will provide learning, employment and services free from unlawful discrimination, harassment and victimisation. Leaders will identify barriers early, make lawful adjustments, maintain high expectations and test whether support improves participation, achievement, progression, safety and wellbeing.

Fairness does not always require identical treatment. Disability adjustments, pregnancy protections, proportionate positive action and other statutory exceptions may require or permit different treatment. Such action must have a recorded legal basis, evidence, objective, proportionality assessment, decision-maker and review date. Personal preference, political pressure, demographic targets or assumptions about a group are not sufficient.

No complainant or respondent is presumed correct because of identity or status. Green Labyrinth will assess conduct, context, credible evidence and applicable law consistently, provide support according to need and protect all parties from retaliation and avoidable disclosure.

# 1 Purpose and intended outcomes

This policy establishes how Green Labyrinth will prevent unlawful treatment, remove barriers, respond to concerns and demonstrate the impact of its work. It supports the quality of education, safeguarding, staff wellbeing and effective governance.

- secure fair access to learning, assessment, employment and progression;
- identify needs and barriers early and respond without lowering expectations;
- prevent discrimination, harassment, sexual harassment, victimisation and bullying;
- support lawful discussion, freedom of belief and respectful challenge;
- use evidence to address material disparities without automatic preference or unlawful quotas;
- give the Board reliable assurance about implementation and outcomes.

# 2 Scope and application

The policy applies to learners, apprentices, applicants, prospective learners, employees, workers, agency staff, volunteers, governors and directors, visitors, employer partners, subcontractors and other third parties. It applies on site, online, during remote work or learning, at employer and community locations, on visits, at social events connected with Green Labyrinth and in work-related digital communications.

Contractors and partners must meet equivalent standards through written terms, induction, monitoring and escalation. Green Labyrinth will not contract out responsibility where law, funding conditions or the inspection framework leaves it accountable for delivery.

# 3 Legal and regulatory framework

The principal legal framework is the Equality Act 2010. It prohibits specified forms of discrimination and other unlawful conduct across employment, education and services and imposes duties to make reasonable adjustments for disabled people. Green Labyrinth will also apply relevant statutory codes, regulations, case law and guidance.

- Human Rights Act 1998 where applicable, including rights to private life, freedom of thought, religion, expression and freedom from discrimination in the enjoyment of Convention rights;
- Worker Protection Amendment of Equality Act 2010 Act 2023 and the employer duty to take reasonable steps to prevent sexual harassment;
- Employment Rights Act 2025 provisions in force during the policy period, including strengthened sexual-harassment and third-party harassment duties from 30 October 2026;
- Children Act 1989 and 2004, Children and Families Act 2014, SEND Code of Practice and current safeguarding guidance where applicable;
- Education and Inspections Act 2006, current Ofsted education inspection framework and further education and skills inspection toolkit;
- Counter-Terrorism and Security Act 2015 and current Prevent duty guidance where Green Labyrinth is within scope directly or contractually;

- UK GDPR and Data Protection Act 2018 as amended when equality information is collected, analysed, shared or retained;

current education and apprenticeship funding, awarding-organisation, qualification and reasonable-adjustment rules applicable to each programme.

### Public sector equality duty

The public sector equality duty is not assumed to apply to every activity merely because provision receives public funding. The Board and contract owner must record whether section 149 applies to Green Labyrinth, to a specific public function, or through a contractual requirement. Where it applies, decision records must evidence due regard to eliminating unlawful conduct, advancing equality of opportunity and fostering good relations.

### Changes during the policy period

Until 29 October 2026 the statutory workplace sexual-harassment duty requires reasonable preventative steps. From 30 October 2026 the Employment Rights Act 2025 changes require all reasonable steps and introduce liability where an employer permits third-party harassment by failing to take all reasonable steps. Green Labyrinth adopts the higher preventative standard from this policy's effective date.

## 4 Definitions and protected characteristics

The nine protected characteristics are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation. Their statutory scope differs by context. The Equality Lead must not treat the list as permission to ignore association, perception, combined disadvantage or a barrier unrelated to a protected characteristic.

| Term | Operational meaning |
|---|---|
| **Direct discrimination** | Less favourable treatment because of a protected characteristic, subject only to the limited statutory exceptions. |
| **Indirect discrimination** | A provision, criterion or practice that disadvantages a protected group and the person, unless it is a proportionate means of achieving a legitimate aim. |
| **Discrimination arising from disability** | Unfavourable treatment because of something arising from disability, unless objectively justified, subject to the statutory knowledge rules. |
| **Harassment** | Unwanted conduct related to a relevant characteristic with the purpose or effect of violating dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment. Context and reasonableness are considered. |
| **Sexual harassment** | Unwanted conduct of a sexual nature with the prohibited purpose or effect, including less favourable treatment following submission to or rejection of relevant conduct. |
| **Victimisation** | Detriment because a person did a protected act or because Green Labyrinth believes they did or may do so. |
| **Bullying** | Offensive, intimidating, malicious or insulting conduct, or misuse of power, which may breach this policy even when it is not unlawful discrimination. |
| **Microaggression** | A descriptive term, not a separate legal offence. Alleged conduct is assessed objectively and in context; repetition may be evidence of a wider pattern. |

## 5 Equal protection and lawful differential treatment

Green Labyrinth applies the same standards of dignity, evidence, procedural fairness and protection from retaliation to every person. It does not rank protected characteristics or assume that membership of a group establishes disadvantage, credibility, risk, motive or entitlement in an individual case.

## 5.1 Lawful distinction

A decision may distinguish between people only where the Equality Act or another law requires or permits it. The decision-maker must use Annex A and record the exact provision, legitimate objective, relevant evidence, less discriminatory alternatives, effect on each affected group and review date.

| Situation | Control |
|---|---|
| **Reasonable adjustment** | Remove disability-related disadvantage; consult the person; decide promptly; record effectiveness; do not charge the disabled person. |
| **General positive action** | Use only on evidence of disadvantage, different need or disproportionately low participation; action must be proportionate and reviewed. |
| **Recruitment or promotion tie-break** | Only between candidates assessed as genuinely equal in merit, without an automatic policy, and only where statutory evidence and proportionality tests are met. |
| **Occupational requirement** | Use only where the characteristic is an occupational requirement, the objective is legitimate and application is proportionate; obtain HR and legal approval. |
| **Single-sex or separate services** | Apply only under a relevant statutory exception and where proportionate to a legitimate aim; complete a documented service assessment and protect dignity and privacy. |
| **Safeguarding or health and safety** | Use individual, evidence-based risk assessment. Do not substitute stereotypes for evidence or compromise immediate protective action. |

## 5.2 Lawful belief and expression

A person may hold and express a protected religious or philosophical belief, or disagree with another belief or identity, within the law. Disagreement is not by itself harassment. Green Labyrinth may regulate the time, place and manner of expression to protect learning, work, safety and the rights of others. It will act where conduct becomes unlawful harassment, discrimination, threats, incitement, targeted abuse or material disruption. No person is required to affirm a belief they do not hold, but everyone must comply with lawful instructions and standards of professional conduct.

# 6 Governance and responsibilities

| Role | Core responsibilities | Minimum evidence |
|---|---|---|
| **Board of Directors** | Approve policy and objectives; determine risk appetite; challenge disparity, complaint, adjustment and workforce evidence; oversee serious cases and legal compliance. | Minutes, dashboard, challenge and action log |
| **Managing Director** | Executive accountability; provide resources; resolve cross-organisational risks; ensure corrective actions are completed. | Quarterly assurance and exception decisions |
| **Operations Director and Equality Lead** | Own implementation; maintain registers; advise decision-makers; coordinate reporting, training, monitoring and annual review. | Registers, action plan, annual impact report |
| **Human Resources** | Apply fair recruitment, pay, promotion, grievance and disciplinary controls; lead workplace harassment prevention and case support. | Recruitment audits, risk assessment, case records |
| **Inclusion or SEND lead where appointed** | Coordinate early identification, assess-plan-do-review support, examination access and transition arrangements. | Support plans, reviews, outcome evidence |
| **Designated Safeguarding Lead** | Lead safeguarding response where equality concerns indicate harm, exploitation, radicalisation or abuse. | Safeguarding record and referral rationale |
| **Managers and curriculum leaders** | Identify barriers; implement adjustments; model conduct; maintain inclusive curriculum and act on concerns. | Reviews, observation evidence, completed actions |
| **Staff, workers and volunteers** | Treat others lawfully; complete training; follow adjustments and reporting procedures; preserve evidence. | Training and acknowledgement records |

| Role | Core responsibilities | Minimum evidence |
|---|---|---|
| **Learners and apprentices** | Meet behaviour expectations; respect lawful rights; report concerns and participate honestly in reviews. | Induction, learner voice and case records |
| **Partners and contractors** | Meet equivalent contractual standards; report incidents; cooperate with audit, adjustments and investigations. | Contract clauses, induction and monitoring |

# 7 Learner access curriculum and participation

7.1 Use transparent, relevant and consistently applied admissions and eligibility criteria, with adjustments to the process where required.

7.2 Assess starting points, support needs and barriers early and revisit them when circumstances, attendance, progress or wellbeing change.

7.3 Maintain high expectations. Support and adjustments must improve access without lowering the intended knowledge, skills or competence standard unless an awarding rule lawfully permits a change.

7.4 Use learning materials and examples that are accurate, age appropriate and sufficiently varied to avoid stereotypes or tokenism.

7.5 Teach learners to discuss contested issues respectfully, distinguish evidence from opinion and understand equality, safeguarding, British values and professional expectations in their vocational context.

7.6 Monitor participation, attendance, retention, achievement and progression, including at work placements and subcontractors, and act on material barriers.

7.7 Curriculum review must examine what learners actually experience. Scheme-of-work references alone are not proof of impact. Leaders must sample teaching, learner work, discussions, feedback, incidents, participation and outcomes and record the improvements made.

# 8 Recruitment employment pay and progression

8.1 Green Labyrinth will define objective role criteria, use structured and documented assessment, offer adjustments, separate equality monitoring data from selection, control pre-employment health questions and audit decisions for consistency. Recruitment agencies do not remove Green Labyrinth's responsibility.

8.2 Job requirements must be necessary for the role and reviewed for indirect discrimination.

8.3 Pay, allocation of work, performance, learning, promotion, discipline, redundancy and termination decisions must use relevant evidence and consistent criteria.

8.4 Part-time, fixed-term, agency and remote workers must not be excluded from information or opportunity without objective reason.

8.5 Pregnancy, maternity, disability-related absence, family leave, religion or belief and other protected circumstances must be handled under the applicable legal rules rather than treated as ordinary attendance or performance issues.

8.6 Positive action and occupational requirements require the controls in section 5 and must never become quotas or automatic preference.

# 9 Reasonable adjustments and inclusion support

Staff must recognise a possible need even when a person does not use the words reasonable adjustment or disclose a diagnosis. A request may be made verbally or in writing. Green Labyrinth will ask what barrier exists, what outcome is needed and what adjustments may be effective, while avoiding unnecessary medical detail.

| Target | Owner | Required action |
|---|---|---|
| Same working day | Recipient | Record and refer the request; implement immediate low-risk help where safe and within authority. |
| Within 2 working days | Named coordinator | Acknowledge, offer accessible communication, identify urgent or assessment deadlines and gather proportionate information. |

| Target | Owner | Required action |
|---|---|---|
| Within 5 working days | Manager or inclusion lead | Consult the person and relevant specialists; assess effectiveness, practicability, cost, resources, disruption, external funding and legal duty. |
| Within 10 working days | Authorised decision-maker | Give a reasoned decision, agreed actions, owner, start date, confidentiality limits and review date. Explain any alternative or refusal and the review route. |
| Urgent need | Manager | Put an interim measure in place within one working day where delay could prevent access, assessment, safety or participation. |
| At agreed review | Coordinator and individual | Test effectiveness and unintended effects; continue, vary or end the adjustment with reasons. |

The duty is continuing. The organisation must review adjustments when roles, courses, assessments, technology, premises or needs change. Cost alone is not decisive, and the availability of Access to Work, learning support funding or an awarding-body process must be considered where relevant.

# 10 Preventing harassment sexual harassment and bullying

10.1 Green Labyrinth will take all reasonable steps to prevent workplace sexual harassment from the policy's effective date and will apply preventative controls to harassment by learners, customers, visitors, employers, contractors and other third parties. The Operations Director and HR must maintain a risk assessment tailored to work locations, lone working, travel, social events, power imbalances, placements, online communications and previous concerns.

10.2 Set clear standards and examples without implying that an exhaustive list exists.

10.3 Give workers and learners more than one reporting route, including a route outside line management.

10.4 Train managers to intervene, preserve evidence, avoid retaliation and refer safeguarding matters immediately.

10.5 Use proportionate supervision, environmental, event, communications and third-party controls.

10.6 Review trends, near misses, anonymous reports, exit information and workplace or placement risks at least annually and after any material incident.

10.7 Act promptly and fairly. Informal resolution is optional and must not be imposed where risk, power imbalance, safeguarding or alleged sexual misconduct makes it unsuitable.

10.8 Green Labyrinth will not tolerate unlawful conduct or bullying. Outcomes and sanctions will be evidence-based and proportionate; the phrase zero tolerance will not replace investigation, safeguarding judgement or procedural fairness.

# 11 Safeguarding Prevent and lawful expression

11.1 Equality concerns may also be safeguarding concerns, including discriminatory bullying, sexual harassment or violence, exploitation, hate incidents, harmful online conduct, domestic abuse, forced marriage, female genital mutilation and radicalisation. Staff must use the safeguarding route immediately when a child or adult at risk may need protection. The equality process must not delay protective action.

11.2 Where Keeping Children Safe in Education 2026 applies, Green Labyrinth will respond to child-on-child abuse and sexual harassment as safeguarding matters, take victims seriously, support all affected children and avoid treating harmful sexual behaviour as normal. Adult safeguarding concerns follow the Care Act framework and local procedures.

11.3 Prevent activity must be risk-based and proportionate. Staff must distinguish vulnerability to radicalisation from lawful religion, belief, political opinion or debate. Where freedom-of-speech duties apply, leaders will secure lawful expression while preventing harassment, intimidation, incitement and support for terrorism. External speakers and events are assessed consistently against content, context, safety and legal risk, not the viewpoint's popularity.

# 12 Partners subcontractors and placements

Before appointment and at renewal, the contract owner must assess each partner's equality, accessibility, safeguarding and harassment controls. Contracts must require compliance, incident reporting, reasonable-adjustment cooperation, access to

evidence, corrective action and termination rights. Learners and workers must know how to report concerns at a third-party location directly to Green Labyrinth.

| Control | Evidence |
|---|---|
| **Due diligence** | Policies, complaint history, accessibility, workforce competence, safeguarding and third-party harassment controls |
| **Contract** | Clear roles, adjustment funding and delivery, data-sharing basis, notification times, audit and remedy clauses |
| **Induction** | Learner, apprentice, worker and supervisor expectations; reporting routes; emergency and accessibility information |
| **Monitoring** | Site visits, learner voice, employer feedback, incident themes, adjustment checks and outcome data |
| **Escalation** | Immediate safeguarding route; corrective-action owner and date; suspension or exit where risk is not controlled |

# 13 Reporting concerns and immediate action

A concern can be raised verbally or in writing with a manager, tutor, Human Resources, the Equality Lead, Designated Safeguarding Lead, Managing Director or through the published complaints or whistleblowing route. The organisation will not reject a report because it lacks legal terminology or a completed form. Anonymous reports will be assessed on the information available.

| Time | Required action |
|---|---|
| Immediately | Protect anyone at immediate risk; contact emergency services or safeguarding agencies where required; preserve messages, records and other evidence. |
| Same working day | Send safeguarding matters to the DSL and workplace sexual-harassment matters to HR and the Equality Lead; separate parties where proportionate without presuming the outcome. |
| Within 2 working days | Acknowledge the report, provide a named contact, explain next steps, offer adjustments and support, and identify conflicts of interest. |
| Within 5 working days | Confirm scope, investigator, issues, relevant policies, anticipated timetable and interim measures. |
| Target 20 working days | Complete fact-finding and issue a reasoned outcome, or explain the delay and set a revised date. |
| Within 10 working days of outcome | Accept an appeal or review request on stated grounds and appoint an independent decision-maker. |

Confidentiality will be protected as far as lawful and practicable, but cannot be guaranteed where information is needed for safety, a fair investigation, legal advice, insurance, regulatory reporting or another legal duty. A person raising a concern in good faith will not suffer retaliation. Knowingly false or malicious allegations may be addressed under the relevant conduct procedure; an unsubstantiated allegation is not evidence of bad faith.

# 14 Investigation decisions remedies and appeal

14.1 Appoint an investigator who is competent and free from material conflict. For serious or senior-person allegations, consider external investigation or legal oversight.

14.2 Define the allegation and applicable standards neutrally. Give the respondent sufficient particulars and a fair opportunity to answer, subject to safeguarding and witness-protection controls.

14.3 Gather relevant evidence, including evidence that supports and undermines the allegation. Keep an audit trail of scope, interviews, documents, credibility assessments and decisions not to pursue evidence.

14.4 Use the balance of probabilities for internal factual findings unless a specific procedure lawfully requires another approach. Do not decide credibility by protected characteristic, seniority, popularity or demeanour alone.

14.5 Separate factual findings from disciplinary, learner, safeguarding, contractual or improvement decisions. Apply proportionate remedies and record reasons.

14.6 Tell each party the outcome information they are entitled to receive without disclosing unnecessary personal data or confidential sanctions.

14.7 Provide an appeal or review by a person not responsible for the original decision, normally for procedural error, new material evidence, unreasonable finding or disproportionate outcome.

14.8 After closure, assess systemic causes, required training, policy or environmental change, third-party action and whether affected support remains effective.

14.9 Mediation or facilitated discussion may be offered only with informed agreement and after suitability assessment. It is not a substitute for investigating a safeguarding allegation, serious harassment, alleged violence or a matter where a marked power imbalance prevents genuine consent.

# 15 Equality information monitoring and privacy

15.1 Green Labyrinth will collect only equality information that has a defined purpose, lawful basis, privacy notice, access control, retention period and owner. Special-category information must have an Article 9 condition and, where required, an 15.2 Appropriate Policy Document. Monitoring responses must be voluntary unless collection is legally required, and they must be separated from selection decisions.

15.3 Analyse access, applications, recruitment, attendance, retention, achievement, progression, complaints, discipline, safeguarding themes, adjustment timeliness and learner or staff experience.

15.4 Use both quantitative and qualitative evidence. Small cohorts, missing data, multiple causes and disclosure risk must be stated; percentages must not be presented without counts and a comparator.

15.5 Investigate material disparities before choosing action. A difference does not by itself prove discrimination, and absence of a measured gap does not prove fair treatment.

15.6 Report the impact of action over time and disaggregate only where lawful, safe and meaningful. Suppress or combine small numbers to reduce identification risk.

15.7 Do not use equality monitoring to set unlawful quotas, presume individual need or restrict opportunity without a lawful documented basis.

# 16 Equality objectives and improvement planning

The Board approves objectives using Annex D. Objectives must state a baseline, intended outcome, measure, owner, resources, milestone, completion date, data-quality limitation and review trigger. Where no reliable baseline exists, the first milestone is to establish one; Green Labyrinth will not invent a numerical target.

| Mandatory 2026 to 2029 objective | Minimum success measure |
|---|---|
| Identify and reduce material barriers | Termly cohort review; every material unexplained gap has a recorded analysis, owner, action and impact review. |
| Improve adjustment responsiveness | 100 percent logged; acknowledgement within 2 working days; initial decision within 10 working days or recorded reason and interim control. |
| Prevent harassment and retaliation | Annual and post-incident risk assessment; actions completed; staff and learners know reporting routes; recurrence and confidence monitored. |
| Strengthen staff competence | New starters trained before unsupervised duties where practicable; annual completion and scenario-based assurance; missed training escalated. |
| Embed inclusive curriculum and high expectations | Planned review samples teaching, materials, learner work and feedback; changes and outcome evidence recorded by curriculum area. |
| Assure partners and placements | All active higher-risk partners reviewed; overdue conditions escalated; learner voice and incident evidence inform renewal. |

# 17 Training competence and communication

17.1 All staff receive induction and annual refresher training. Managers, investigators, recruiters, curriculum staff, safeguarding staff and those handling adjustments receive role-specific learning and tested scenarios. Completion alone is insufficient; leaders will sample decisions, case records and practice to confirm competence.

17.2 Equality Act concepts, neutral evidence assessment and lawful differential treatment;

- disability, adjustments, neurodiversity, SEND and the graduated approach;
- harassment, sexual harassment, third-party risk, bystander action and retaliation;
- safeguarding, Prevent, lawful belief, expression and respectful discussion;
- accessible communication, complaint handling, investigation and record-keeping;
- privacy and safe use of equality information.

# 18 Assurance and inspection evidence

Leaders will use ordinary business records rather than create evidence only for inspection. The September 2026 Ofsted framework considers the impact of systems and processes, including early identification of needs, swift and consistent barrier reduction, high expectations, evidence-informed adaptation, staff expertise, governance challenge, stakeholder work and sustained outcomes.

| Frequency | Assurance activity | Escalation |
|---|---|---|
| Monthly | Adjustment and case timeliness; serious or repeat incidents; overdue actions; urgent learner or workforce risks. | Immediate to Managing Director for serious legal, safeguarding or retaliation risk |
| Termly or quarterly | Cohort outcomes, learner voice, curriculum samples, partner assurance, staff and placement themes, objective progress. | Owner and due date for every adverse or inconclusive finding |
| Annually | Policy effectiveness, equality impact, sexual-harassment risk assessment, training assurance, objective reset and Board review. | Board decision on residual risk and resources |
| On change | New programme, premises, system, subcontractor, assessment model, workforce change or material law and guidance. | Complete Annex A before approval or record emergency interim control |

The Board will not treat a favourable aggregate figure as sufficient assurance. It will examine exceptions, small cohorts, complaints, individual barriers, subcontracted delivery, recurrence and whether actions produced sustained improvement. Annex E defines the minimum evidence set.

# 19 Non compliance review and publication

19.1 A breach of this policy may lead to learner, disciplinary, contractual or governance action. Serious or repeated non-compliance, retaliation, concealed incidents, discriminatory instructions, failure to implement agreed adjustments or failure to cooperate with safeguarding and investigation must be escalated promptly.

19.2 The Operations Director reviews this policy at least annually and sooner after a material legal change, Ofsted or funding update, serious case, emerging pattern, ineffective adjustment, significant organisational change or Board direction. Approved versions are communicated in accessible formats and made available to learners, staff and relevant partners.

## Contact and reporting route

Reports may be made through the routes in section 13 or sent to info@greenlabyrinth.co.uk for allocation to the appropriate responsible person. Emergency and safeguarding concerns must use the immediate safeguarding or emergency route rather than wait for an email response.

# Annex A Equality impact assessment and decision record

Complete before approving a new or materially changed policy, programme, criterion, technology, site, timetable, partnership or service. The assessment records evidence and reasoning; it does not require a predetermined conclusion.

| Field | Record |
|---|---|
| **Decision or proposal** | |
| **Owner and approver** | |
| **Purpose and intended outcome** | |
| **People affected and evidence sources** | |
| **Protected characteristics and other barriers considered** | |
| **Consultation completed and whose views were not obtained** | |
| **Potential benefits by group** | |
| **Potential adverse effects by group** | |
| **Direct discrimination check** | |
| **Indirect discrimination and legitimate aim** | |
| **Reasonable adjustments and accessibility** | |
| **Positive action or statutory exception relied on** | |
| **Less discriminatory alternatives** | |
| **Safeguarding human rights and privacy effects** | |
| **Mitigations owner and due date** | |
| **Decision proceed amend pause or reject** | |
| **Reasons and evidence** | |
| **Monitoring measure and review date** | |
| **Legal or specialist review** | |
| **Approval and date** | |

# Annex B Reasonable adjustment request and review record

A person is not required to use this form. Staff must record and act on a request made in any format.

| Field | Record |
|---|---|
| **Request ID and date** | |
| **Person and preferred contact method** | |
| **Course role service or assessment** | |
| **Barrier or substantial disadvantage described** | |
| **Outcome the person needs** | |
| **Adjustments suggested by the person** | |
| **Urgent date or interim measure** | |
| **Relevant information requested and why necessary** | |
| **Options considered** | |
| **Effectiveness practicability cost resources and disruption** | |
| **External funding or awarding body action** | |
| **Decision and reasons** | |
| **Adjustment owner start date and communication** | |
| **Confidentiality and information-sharing limits** | |
| **Review date and success measure** | |
| **Review outcome continue vary or end** | |
| **Escalation or appeal outcome** | |
| **Closure and retention date** | |

# Annex C Equality concern and case management record

| Field | Record |
|---|---|
| Case ID and classification | |
| Date time route and reporter | |
| People involved and support needs | |
| Allegation issues and relevant policy | |
| Safeguarding or immediate risk decision | |
| HR Equality Lead DSL and executive notifications | |
| Interim measures and reasons | |
| Conflict check and investigator | |
| Scope standard and target date | |
| Evidence requested obtained and not obtained | |
| Interviews and accuracy checks | |
| Facts supporting and undermining allegation | |
| Credibility and reliability assessment | |
| Finding on balance of probabilities | |
| Outcome remedies and proportionality | |
| Information given to each party | |
| Appeal request grounds and decision | |
| Retaliation monitoring | |
| Systemic learning and action owners | |
| Closure review and retention date | |

## Case log

| ID | Received | Type | Risk | Owner | Target | Status | Outcome | Appeal | Action due |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
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| | | | | | | | | | |

# Annex D Equality objectives and action plan

| Objective | Baseline and source | Measure and target | Actions and owner | Milestones | Result and evidence |
|---|---|---|---|---|---|
| Identify and reduce material barriers | | | | | |
| Improve adjustment responsiveness | | 100 percent logged; service-time performance reported | | | |
| Prevent harassment and retaliation | | Risk assessment and action completion; experience measures | | | |
| Strengthen staff competence | | Induction, annual completion and practice assurance | | | |
| Embed inclusive curriculum and high expectations | | Curriculum sampling and impact evidence | | | |
| Assure partners and placements | | Risk-based review and action closure | | | |

| Field | Record |
|---|---|
| **Board-approved material-gap threshold and rationale** | |
| **Data-quality and small-number rules** | |
| **Resources approved** | |
| **Quarterly reviewer** | |
| **Annual impact conclusion** | |
| **Residual risks accepted by** | |
| **Next objective review date** | |

# Annex E Governance and inspection evidence checklist

| Area | Test | Evidence | Result | Action ID |
|---|---|---|---|---|
| Governance | Board understands legal duties, context, strengths, risks and outcomes and records challenge. | Minutes, dashboard, decisions, risk register | | |
| Inclusion | Needs and barriers are identified early; support is swift, accurate, reviewed and does not lower expectations. | Assessment, support plans, reviews, learner work and outcomes | | |
| Adjustments | Requests are recognised, timely, reasoned, communicated and tested for effectiveness. | Annex B records, service times, appeals and reviews | | |
| Curriculum | Materials, teaching and discussion build knowledge, respect and critical thinking without tokenism or compelled belief. | Plans, samples, observations, learner voice and staff development | | |
| Safeguarding | Discriminatory harm, sexual harassment, exploitation and radicalisation risks are recognised and acted on. | Safeguarding records, referrals, training and lessons learned | | |
| Harassment | Risk assessment and all reasonable preventative steps cover staff, learners and third parties. | Risk assessment, controls, training, reports and recurrence review | | |
| Cases | Reporting is accessible and investigations are impartial, timely, evidence-based and protected from retaliation. | Case log, quality samples, outcomes, appeals and action closure | | |
| Employment | Objective recruitment, pay, progression, performance and discipline controls operate consistently. | Criteria, scoring, audits, adjustments and workforce analysis | | |
| Partners | Subcontractors, employers and placements meet equivalent standards and Green Labyrinth acts on weaknesses. | Due diligence, contracts, visits, learner voice and actions | | |
| Data | Analysis is accurate, privacy-preserving and interpreted with counts, comparators and limitations. | Data definitions, privacy records, dashboards and analytical review | | |
| Objectives | Actions are measurable, resourced, owned, reviewed and changed when impact is weak. | Annex D, milestones, impact reports and Board challenge | | |
| Training | Learning is role-specific and leaders test practice rather than relying on completion. | Curriculum, attendance, scenarios, observations and case quality | | |

# Annex F Legal decision guide and authoritative references

## F1 Decision guide

| Question | Required response |
|---|---|
| **Does the decision treat someone differently because of a protected characteristic?** | Pause and identify whether direct discrimination, a statutory exception, disability protection or positive action applies. Obtain HR or legal review for material decisions. |
| **Does a general rule disadvantage a group?** | Identify the legitimate aim, evidence necessity, consider less discriminatory alternatives and record proportionality. |
| **Could disability be relevant?** | Consider the adjustment duty and discrimination arising from disability before applying the usual rule or sanction. |
| **Is positive action proposed?** | Record disadvantage, need or low participation; define the proportionate action and review. For appointment or promotion, verify equal merit and no automatic preference. |
| **Does the issue concern sex or gender reassignment?** | Apply each protected characteristic accurately. For single-sex or separate services, record the statutory exception and proportionality. Protect personal data and obtain specialist advice for contested cases. |
| **Does the issue concern religion belief or expression?** | Protect lawful belief and disagreement while addressing conduct that crosses the legal or professional boundary. Assess words, context, audience, impact and reasonableness. |
| **Is harassment or sexual harassment alleged?** | Protect, preserve evidence, use the case process and review preventative controls. From 30 October 2026 apply the strengthened statutory third-party requirements. |
| **Is a child or adult at risk involved?** | Use the safeguarding procedure immediately. Do not wait for the equality investigation. |

## F2 Authoritative references current at approval

| Authority | Official source |
|---|---|
| Equality Act 2010 | https://www.legislation.gov.uk/ukpga/2010/15/contents |
| Equality Act services public functions and associations Code 2026 | https://www.gov.uk/government/publications/equality-act-2010-code-of-practice-for-services-public-functions-and-associations-2026 |
| Worker Protection Amendment of Equality Act 2010 Act 2023 | https://www.legislation.gov.uk/ukpga/2023/51 |
| Employment Rights Act 2025 implementation timetable | https://www.gov.uk/government/publications/implementing-the-plan-to-make-work-pay-and-employment-rights-act |
| EHRC preventing sexual harassment at work | https://www.equalityhumanrights.com/employer-8-step-guide-preventing-sexual-harassment-work |
| Ofsted further education and skills inspection toolkit from September 2026 | https://www.gov.uk/government/publications/further-education-and-skills-inspection-toolkit-operating-guide-and-information |
| Education inspection framework | https://www.gov.uk/government/publications/education-inspection-framework-eif |
| Keeping children safe in education 2026 | https://www.gov.uk/government/publications/keeping-children-safe-in-education--2 |
| Prevent duty guidance for England and Wales | https://www.gov.uk/government/publications/prevent-duty-guidance |
| SEND Code of Practice | https://www.gov.uk/government/publications/send-code-of-practice-0-to-25 |

| Authority | Official source |
|---|---|
| Apprenticeship funding rules 2026 to 2027 | https://www.gov.uk/government/publications/apprenticeship-funding-rules-and-assessment-plan-guidance-2026-to-2027 |
| UK data protection law and guidance | https://ico.org.uk/for-organisations/uk-gdpr-guidance-and-resources/ |

Owners must check for updates when applying this policy to a live decision. The Board must not assume that a previous version of guidance remains current throughout the policy year.