

Appendix 1 – WHSCT ECNI Report 2014/15

Western Health and Social Care Trust

## **EQUALITY ACTION PLAN**

1 May 2014 - 30 April 2017

Review of Progress (1 April 2014 – 31 March 2015)

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Region	Theme 1 – Improvin ally Agreed Actions	g Access to Services, and Information	Communication
Action	Action Measure(s)	Lead Responsibility	Review of Progress April 2014 – March 2015
1.	<ul> <li>Interpreting Support</li> <li>Support the implementation of the findings of the review of interpreting support for Health and Social Care appointments commissioned by the Health and Social Care Board (HSCB).</li> <li>Support will be provided through participation in a Regional Oversight Steering Group established to ensure the review findings are taken forward.</li> <li>Raise awareness of the Code of Courtesy for the Irish Language.</li> <li>Run 'Working Well With Interpreters' training across all Trusts.</li> <li>Promote awareness of a Code of Courtesy for the Irish Language through 'Working Well With Interpreters' sessions and associated Professional Codes for Interpreters and Practitioners which will include guidance on the Code of Courtesy for the Irish Language.</li> </ul>	<ul> <li>Regional Lead: Health and Social Care Board (HSCB).</li> <li>Northern Ireland Health and Social Care Interpreting Service (NIHSCIS).</li> <li>HSC Trust Equality Leads, HSC organisations.</li> <li>WHSCT Lead: Head of Equality &amp; Involvement, Performance and Service Improvement (P&amp;SI) Directorate.</li> </ul>	In accordance with the review recommendations, the NIHSCIS duly transferred to BSO on 1 October 2014. Workstreams progressed in terms of communication, the production of consistent regional guidelines and the development of a web-based portal for booking interpreters and for their acceptance or rejection of assignments. This system will also comprise an interface with Finance which will significantly reduce the volume of paper invoices, which were produced for the 95,000+ interpreting interactions. A Regional Advisory Group will be established to inform the strategic direction of the service. It is envisaged that HSC Trust Equality Leads will be invited to partake in the Group in coming months. Work has been ongoing with Big Word, the telephone interpreting provider, to ensure that they can cater for the anticipated increase in demand once the new IT system goes live in Autumn 2015.
	Arrangements are in place for telephone and	Page <b>5</b>	HSC Trusts are participating in the DFP contract

	face-to-face interpreting for the Irish		for the provision of Irish Language.
	Language.		Sessions of Working With Interpreters training provided Trust wide within the Western Health and Social Care Trust.
2.	Continue participation on the Regional Physical and Sensory Disability Strategy Implementation Group to direct, coordinate and manage the project infrastructure and implementation of the Physical and Sensory Disability Strategy and Action Plan.	Regional Lead: Health and Social Care Board (HSCB). HSC Trust Equality Leads, HSC organisations. WHSCT Lead: Assistant Director for Adult Physical and Sensory Disability, Adult Mental Health and Disability (AMHD) Services Directorate.	<ul> <li>Taking action to address inequalities and identify gaps in service provision is the overall rationale for the Physical &amp; Sensory Disability Strategy 3</li> <li>Year Action Plan which is now entering its final phase. The Strategy Implementation Group leading the work is cross Departmental and includes HSCB, Public Health Agency (PHA), HSC Trusts, Department for Employment and Learning (DEL), Department for Social Development (DSD), voluntary organisations and service users.</li> <li>Actions taken forward to date include the following:</li> <li>a Good Practice Guidance Checklist has been developed to ensure the needs of people with disabilities are considered in the design and development of health promotion programmes/ campaigns;</li> <li>developing Eye Care Partnership Regional Group has been established under the leadership of the PHA and HSCB. Task Group 5 Promotion of Eye Health has been established and SIG is represented on this;</li> <li>a Task &amp; Finish Group has been set up to</li> </ul>

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3.	Review and launch updated Health and Social Care booklet to provide information about Health and Social Care to people from minority ethnic backgrounds who have moved to	Regional Lead: HSC Trust Equality Leads, HSC organisations.	<ul> <li>draft Regional standardised visual and hearing Pathways have been developed</li> <li>Regional training Group continues to meet and have developed a training framework for sensory services.</li> <li>A Regional accessibility workshop has been planned to take place in the autumn.</li> <li>The Assistant Director for Adult Physical and Sensory Disability continues to attend the Regional Implementation Group. A number of regional working groups continue to operate/are close to completion e.g. Regional Communication Support Group, Regional Training Group, Regional Sensory Pathway Group, Regional Deaf Blind Group, and Independent Living Group.</li> <li>This review was led by Belfast Health and Social Care Trust on behalf of all Health and Social Care Trusts. The booklet has been subject to review by the Health and Social Care family. Progress</li> </ul>
	Northern Ireland.	WHSCT Lead: Head of Equality & Involvement, P&SI Directorate.	was delayed due to legislative reform in terms of the Provision of Health Services to Persons Not Ordinarily Resident Regulations (Northern Ireland) 2015. Health and Social Care Trust Equality Leads responded to the consultation on this legislation, along with many other protagonists such as the Law Centre NI, to extend the previous entitlement to allow asylum seekers free access to health care. The most recent version has been issued for comments to HSC Trust Equality Leads and to the HSCB and DHSSPSNI Equality Leads.

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			The booklet has also been shared with the Counter Fraud Unit in the Business Services Organisation for quality assurance. Subject to general consensus on the content of the booklet, it is envisaged the resource will be made available in July 2015.
4.	Spiritual Care Policy Develop a Spiritual Care Policy based on the template provided by the Northern Ireland Healthcare Chaplaincy Service.	Regional Lead:Executive Council of theNI Healthcare Chaplains'Association.Local Chaplains.HSC Trust EqualityLeads.WHSCT Lead: Head ofEquality & Involvement,P&SI Directorate.	On-going Action.
5.	Improve Cultural Competence in Mental Health Services. Training materials to be provided by Belfast Health and Social Care Trust and will be delivered through an online toolkit and DVD which will be rolled out across the Western Trust. Equality & Involvement Office to support Head of Service for Mental Health Services with roll out. Trust Mental Health Staff will be offered option to participate in training.	Regional Lead: BelfastHealth and Social CareTrust in conjunction withregional HSCrepresentatives andAware DefeatDepression.WHSCT Lead: Head ofService for Mental HealthServices, AMHD ServicesDirectorate with supportfrom Head of Equality &	An Ethnic Minorities Mental Health Toolkit which essentially is a guide for Practitioners was developed as a result of the regional conference and feedback. It is available online at the PHA website and a number of hard copies have been provided to each Trust. The toolkit is broken down into quick reference sections with hyperlinks to more detailed reports or useful resources and there are a number of appendices with useful links. http://www.belfasttrust.hscni.net/pdf/BME_Cultural Awareness_Document_sml.pdf. An accompanying DVD and Train the Trainer session

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		Involvement, P&SI Directorate.	will help improve usage and awareness of the resource and the concept of cultural competency.
6.	To further promote <b>partnership working with BME organisations</b> . Head of Equality & Involvement and Head of Health Improvement Department to support local BME forums and networks.	Regional Lead: HSC Trust Equality Leads. WHSCT Lead: Head of Equality & Involvement and Head of Health Improvement Department (HID), P&SI Directorate.	<ul> <li>The Source and the concept of cultural competency.</li> <li>The Regional Minority Ethnic Health and Social Well Being Network continue to support the Stronger Together Network. During the reporting year, 1 BME Health and Social Well Being Initiative was held in each of the 5 Trust areas. Local engagement sessions included workshops on No Recourse to Public Funds and Domestic Abuse. The database for local BME Groups was also updated. There is a plan to expand the New Entrance Service (NINES) Project to the Southern Health and Social Care Trust area during 2015/16. In addition to this an application for funding has been made to support a Regional BME Carers Research Project. Trust staff have also been engaged in working with the new Councils in the development of an assessment of need and profiling of BME communities.</li> <li>The Western Health and Social Care Trust Carers Support Team held a one off event with the Carers Workers Network and invited BME groups to attend on 5 March 2015.</li> <li>The event (funded by the Public Health Agency) was successful with 23 attendees in total. 5 of the attendees were representing BME groups across the Trust area. There was a good exchange of information and networking at the event. Future networking and co-working</li> </ul>

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			opportunities were identified between BME groups and Community and Voluntary sector organisations. In addition to this, the Western Trust is an associate member of the Black and Minority Ethnic Strategic Forum. The Equality & Involvement Team represent the Trust on this Forum.
Additio	nal WHSCT Actions Action Measure(s)	Lead Responsibility	Review of Progress
Action	Action measure(s)		April 2014 – March 2015
7.	<ul> <li>Accessibility of appointment processes for people with sensory impairment.</li> <li>Work with RNIB and Action on Hearing Loss to develop models of good practice. Roll out learning to other service areas.</li> <li>Develop appointment letters in accessible formats. Identify how people want to have information provided etc.</li> <li>Establish a Task Group with key HSC managers and relevant stakeholders.</li> </ul>	Acute Services Directorate: Assistant Director for Emergency Care and Medicine, and relevant stakeholders.	<ul> <li>Larger font letters have been implemented throughout the Western Trust.</li> <li>Outpatient Appointment Reminder Service means that reminders for acute outpatient appointments Trustwide are delivered by text to patient's mobile phone, or where this not possible the patient receives an automated voicemail to their landline. The initiative has been extended to cover more appointments.</li> <li>Option on Partial Booking phone-line for people to indicate, if they wish, that they have a visual impairment.</li> <li>PAS system allows staff to record that the patient has a visual impairment and/or hearing impairment.</li> <li>Investigating possible use of e-mail to patients, as many patients with disabilities have adaptations on their mobile phones and computers.</li> </ul>

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	SECTION 1: TRUST WIDE CROSS CUTTING THEMES			
	Theme 2 – Service Monitoring			
Regiona	ally Agreed Actions			
Action	Action Measure(s)	Lead Responsibility	Review of Progress April 2014 – March 2015	
8.	Continue to roll out ethnic monitoring to key information systems such as Patient Administration System (PAS), Child Health System (CHS) and Northern Ireland Maternity System (NIMATs). Ensure staff awareness and implementation of accurate ethnic monitoring of service users. Roll out of Guide on Ethnic Monitoring of Service Users in HSC (NI).	Regional Lead: DHSSPSNI, HSCB, HSC Trusts. WHSCT Lead: Women and Children's Services Directorate.	Ethnic Monitoring of Service Users is in place in a number of key information systems – Child Health System, PAS, SOSCARE, SureStart and NIMATS. An audit of progress on implementation on each of these systems is planned for July/August 2015. The Ethnic Monitoring leaflet for Service Users has been translated into the top five languages and has been circulated throughout the five Trusts. Information for staff in the form of Key Tips for Staff has also been circulated and is available on the Trusts' intranet sites. This information has also been included in information packs for a Regional Midwifery Conference, (January 2015). Specific training has also been provided to other groups of staff e.g. through the Social Work Forum. The Regional Ethnic Monitoring Guidance has been finalised and the Regional Ethnic Monitoring Group are in discussions with the HSCB in relation to the roll out of this Guidance. The Ethnic Monitoring Project in HSC has been positively referenced by the OFMDFM Race	

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9.	Address the low number of complaints received from the deaf and hard of hearing community. Promote the Regional Complaints DVD: 'Complaints Procedure: A Guide on How to Complain' and ensure it is available in alternative	<b>Regional Lead:</b> HSC Trust Equality Leads. Complaints/Patients Liaison Managers.	Equality Unit. Ethnic Monitoring of staff continues to be collated by the Trusts and this has been enhanced by HRPTS Self- Service functions. The Western Trust has a complaints DVD on the Trust website which provides information on the Trust complaints procedure in BSL. ISL version and subtitles to be taken forward.
	formats, as required. Monitor the number of complaints received from the deaf and hard of hearing community and provide an annual update to the Equality & Involvement Office for inclusion in the Annual Equality Progress Report.	Action on Hearing Loss. WHSCT Lead: Complaints Manager/Patients Advocate.	
	nal WHSCT Actions		
Action	Action Measure(s)	Lead Responsibility	Review of Progress April 2014 – March 2015
10.	<ul> <li>High level analysis of staff uptake of Family</li> <li>Friendly policies re: S75 groupings.</li> <li>Analyse level of caring responsibilities within the</li> <li>Trust – taken from update of Equal Opportunities</li> <li>Monitoring.</li> </ul>	Human Resources Directorate: Assistant Director Workforce Development and Performance/Employee Relations.	As part of the HSC Staff Survey actions the Trust has carried out an analysis of the uptake of Flexible Working Arrangements since they were implemented in 2012. In particular, the uptake of Employment Breaks and Unpaid Leave, including unpaid summer leave, have been considered.
11.	Work with Equality & Involvement Team to identify 1 pilot area for developing <b>Section 75</b> <b>monitoring in Acute Directorate</b> . Work with Section 75 groups to ensure that systems are	Acute Services Directorate: Acute Business Services Manager and Equality & Involvement Team.	Preliminary discussions held within Divisions have resulted in agreement that Lead Nurses would develop an Action Plan against this target.

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	appropriate, in particular for LGB and T people, people with a learning disability and people with sensory impairments.		
12.	Review and develop <b>equality monitoring</b> <b>processes in the Health Improvement</b> <b>Department</b> . Work with Section 75 groups to ensure that systems are appropriate, in particular for LGB and T people, people with learning disability and people with sensory impairments. Collate data from equality monitoring forms for all HID training programmes, seminars/initiatives/ campaigns, etc. Review data on a quarterly basis. Ensure that HID are targeting the appropriate individuals/groups.	P&SI Directorate: Head of Health Improvement Department (HID).	Equality monitoring collated throughout the year for all health improvement training events. Systems updated to meet the requirements of Section 75 groups and reviewed on an ongoing basis.

## **SECTION 1: TRUST WIDE CROSS CUTTING THEMES**

## Theme 3 – Mainstreaming Equality, Good Relations, Disability Duties and Human Rights Considerations into the Corporate Planning Cycle and Decision Making Processes

Regiona	Regionally Agreed Actions			
Action	Action Measure(s)	Lead Responsibility	Review of Progress	
			April 2014 – March 2015	
13.	Work with the Equality Commission for Northern	Regional Lead: HSC Trust	An ECNI led event was held on 11 March	
	Ireland (ECNI) to develop a user friendly and	Equality Leads in	2015 where a presentation on the new	
	accessible Annual Progress Report.	conjunction with ECNI.	template was provided by Lisa King, ECNI. A	
			follow up meeting was scheduled for 21 April	
		WHSCT Lead: Head of	2015 with the ECNI and HSC Trust Equality	
		Equality & Involvement,	Leads to discuss in more detail the new	
		P&SI Directorate.	template and expectations in going forward.	

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14.	Review the HSC Trust screening template and associated guidance.	Regional Lead: HSC Trust Equality Leads in conjunction with ECNI. WHSCT Lead: Head of Equality & Involvement, P&SI Directorate.	The new template is now in use to record progress for the current reporting year 2014/2015 and here on in – HSC Trust Equality leads have fed into the consultative process led by the ECNI. A review of the current equality screening template was undertaken during the current reporting period. This has been piloted by 2 HSC Trusts i.e. the Belfast Trust and the Northern Trust. This pilot is on-going.
15.	Equality Impact Assessment Work with the ECNI to develop best practice Equality Impact Assessment Template.	Regional Lead:       HSC Trust         Equality Leads in       conjunction with ECNI.         WHSCT Lead:       Head of         Equality & Involvement,       P&SI Directorate.	HSC Trusts continue to roll out Equality Screening training which includes references to Equality Impact Assessment.
16.	<b>Multi-Identity</b> To ensure that key multi-identity issues such as Age and Disability, Gender and Dependants and Sexual Orientation issues are incorporated into Policy and Service Developments.	Regional Lead: HSC Trust Equality Leads. WHSCT Lead: Head of Equality & Involvement, P&SI Directorate.	Screening template to incorporate multi- identity issues with useful examples. Screening Guidelines to include a better mix of worked examples including employment based examples and potential impacts on staff e.g. centralisation of services, retraction of services and outsourcing together with S75 impacts. Procurement examples to also be included in revised guidelines.
17.	Section 75 Training To review Section 75 Training Programme so that it reflects any of the changes made to the	<b>Regional Lead:</b> HSC Trust Equality Leads.	HSC Trusts are committed to the provision of training as a key component of meeting their legislative requirements.

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	screening and Equality Impact Assessment process.	WHSCT Lead: Head of Equality & Involvement, P&SI Directorate.	Trust Equality Leads deliver a range of training to ensure that staff are equipped with the necessary S75 knowledge and expertise to work effectively with each other and to ensure everyone can access our services. Uptake of training is reported annually in Trusts' ECNI Progress Reports. The HSC mandatory Discovering Diversity E- Learning Package, which includes a disability module, continues to be rolled out to staff who have access to computers. The South Eastern HSC Trust has developed an e-Learning module on Equality and Human Rights which was launched in April 2014. The module focuses specifically on Section 75 and Human Rights responsibilities. Other Trusts have expressed an interest in this module and it will be demonstrated at the Regional Equality Leads meeting in June 2015.
18.	<b>Emerging Themes</b> To continue to annually review and maintain the 'Emerging Themes' compendium of research literature to inform current and future action- based plans.	Regional Lead: HSC Trust Equality Leads. WHSCT Lead: Head of Equality & Involvement, P&SI Directorate.	Emerging Themes Document updated annually and available on all Trust websites and intranets.
19.	Maintenance of Regional Consultee List To annually review regional list of consultees.	<b>Regional Lead:</b> HSC Trust Equality Leads.	The Regional Consultation List is updated on an on-going basis in the light of information

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		WHSCT Lead: Head of Equality & Involvement, P&SI Directorate.	received from organisations with regard to changes to personnel and contact details.
Additio	nal WHSCT Actions		
Action	Action Measure(s)	Lead Responsibility	Review of Progress April 2014 – March 2015
20.	<ul> <li>Review current training and make key training e.g. Equality Screening, Discovering Diversity E- Learning programme mandatory for specific grades.</li> <li>Review training and ensure that Section 75 groups, who have highlighted staff attitudes as a particular issue, are appropriately, covered e.g. LGB and T people, people with disabilities (including autism), people from minority communities and older people. Continue to work with Section 75 groups to develop and deliver training.</li> <li>Open up training to include participation from staff in organisations that have Service Level Agreements (SLAs) with the Trust.</li> </ul>	Head of Equality & Involvement, Management Development, Medical and Dental Education, Social Services Training.	<ul> <li>The 'Discovering Diversity' E-Learning Programme is mandatory for all Western Trust staff.</li> <li>Trust staff also have access to 'Lesbian, Gay, Bisexual and Transgender – Creating Inclusive Workplaces', an E-Learning programme which has been developed by the Public Health Agency in partnership with the Southern Health and Social Care Trust (SHSCT) and has been informed by the experiences of individuals who identify as Lesbian, Gay, Bisexual and/or Transgender (LGBT) and their carers.</li> <li>The Equality &amp; Involvement Team has continued to offer the following training to staff Trust wide:</li> <li>Human Rights Training;</li> <li>Working With Interpreters Training;</li> <li>Isual Awareness Training.</li> </ul>

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	request.
	The Equality & Involvement Team continues to support staff re: Equality Screening.
	The new Social Services Training Programme will reflect training on equality and human rights for all Social Work and Social Care staff within the Trust.

	SECTION 1: TRUST WIDE CROSS CUTTING THEMES			
	Theme 4 – Prom	oting Participation and Ir	nclusion	
Regiona	ally Agreed Actions			
Action	Action Measure(s)	Lead Responsibility	Review of Progress April 2014 – March 2015	
21.	E-Learning PPI Toolkit Work with Trust PPI Leads on Development, launch and dissemination of Patient and Client Council E-Learning PPI Toolkit.	<ul> <li>Regional Lead: Public Health Agency (PHA).</li> <li>Trust PPI Leads.</li> <li>HSC Trust Equality Leads.</li> <li>WHSCT Lead: Head of Equality &amp; Involvement, P&amp;SI Directorate.</li> </ul>	New PPI Standards: 'Setting the Standards' was formally launched on 4 March 2015. The new five PPI standards which HSC Trusts are expected to implement for developing PPI approaches to Health and Social Care. The five new standards are: Leadership, Governance, Opportunities and Support for Involvement, Knowledge and Skills and Measuring Outcomes. A regionally approved Train the Trainer PPI programme has been developed and Trust PPI Leads have received the training tools to allow for each Trust to roll out the PPI training locally. This will also be supported by the development of a PPI e-learning	

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			programme to complement the face-to-face training tools.
Additional WHSCT Actions			
Action	Action Measure(s)	Lead Responsibility	Review of Progress April 2014 – March 2015
22.	Involving people with disability in the design and development of new hospital premises and service development. Continue to involve local disability groups and other S75 groups in the planning of new and reconfigured facilities.	Strategic Capital Development (SCD) Directorate: Assistant Director of SCD.	<ul> <li>All strategic projects give full consideration to the needs of people with a disability in the design development process. Compliance with recommended guidance and standards to ensure accessibility for people with a disability is a key component of all design briefs.</li> <li>Where appropriate, individual projects engage with local disability and other Section 75 groups to enhance awareness of projects in development and/or seek comments or views on proposed design solutions.</li> <li>Examples of activity in these areas include;</li> <li>New Omagh Hospital, project staff continue to meet quarterly with the Community Forum representatives to review the project and relevant design issues affecting S75 groups. Forum group representation includes Omagh Access Forum, Care for Cancer, Omagh PHAB and Alzheimer's Society.</li> <li>Altnagelvin Hospital Phase 5.1 Redevelopment, project staff have met with the Trust Disability Committee and will</li> </ul>

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	<ul> <li>be meeting with the Patient and Client Experience Group in the coming weeks.</li> <li>New Radiotherapy Unit at Altnagelvin, project staff meet regularly with the Cancer Locality Group which includes local groups, e.g. Pink Ladies, Derry Well Women, Cancer Focus NI. In addition, the project team have engaged with cancer support groups on the interior design of</li> </ul>
	the new unit.

	SECTION 1: TRUST WIDE CROSS CUTTING THEMES				
	The	me 5 – Procurement			
Region	ally Agreed Actions				
Action	Action Measure(s)	Lead Responsibility	Review of Progress April 2014 – March 2015		
23.	Procurement – Section 75 Duties Continue with on-going training delivered by Business Services Organisation (BSO) to HSC staff involved in contracting and commissioning function to ensure Section 75 duties are embedded in procurement processes.	Regional Lead: BusinessServices Organisation (BSO).HSC Trust Equality Leads.WHSCT Lead: Head of Equality & Involvement, P&SI Directorate.	A Regional workshop is planned for August 2015 focusing on Equality and Human Rights Issues in relation to Procurement, Commissioning and Planning processes. Good Practice examples and legal implications will be discussed at the event. Invitations will be extended throughout HSC organisations.		
Additio	nal WHSCT Actions				
Action	Action Measure(s)	Lead Responsibility	Review of Progress April 2014 – March 2015		
24.	Social and Economic Regeneration Plan	Strategic Capital	All strategic projects are compliant with DFP		
	(SERP). Trust needs to develop criteria in the	Development (SCD)	and DHSSPS sustainability guidance.		
	tender processes that will not exclude local	Directorate: Assistant	Equality Action Plan: Review of Progress: April 2014 – March 2015)		

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providers, in line with DFP and DHSSPS sustainability guidance. Provision of skills training and placement opportunities; tackling social exclusion and long- term unemployment. Supply chain opportunities for social enterprise, micro organisation and Small and Medium Sized Enterprises (SMEs).	Director of SCD.	<ul> <li>Tender and contract documentation includes Supplementary Conditions in relation to Employers Sustainability Requirements (Economic, Social and Environmental).</li> <li>These conditions cover the provision of; <ul> <li>opportunities for the unemployed;</li> <li>apprentice opportunities;</li> <li>student work placements;</li> <li>training.</li> </ul> </li> <li>The Trust has worked closely with the contractors to include opportunities for "Looked After Children" within the categories above.</li> </ul>
		Progress is regularly monitored via the project management arrangements for each scheme.

	SECTION 2: SERVICE RELATED ISSUES				
Region	ally Agreed Actions				
Action	Action Measure(s)	Lead Responsibility	Review of Progress April 2014 – March 2015		
25.	No Recourse to Public Funds To ensure that decisions in this are compliant with key legislative requirements e.g. Human Rights Act.	Regional Lead: HSC         Trusts.         Business Services         Organisation (BSO).         DHSSPSNI.         HSCB.         WHSCT Lead: Head of         Equality & Involvement,         P&SI Directorate.	<ul> <li>The Counter Fraud &amp; Probity Services has set up a Pilot in 2 Trust areas - West and South - and the outcome of these pilots will be evaluated to assist with next steps to be taken across Health and Social Care. The Pilot involves a process where patients who present without GP details or Health &amp; Care number are asked to provide proof of residency. It will be up to the patient to prove residency, not the Trust. Patients will be asked to provide photographic ID along with a further piece of evidence to confirm residency. Trust Equality Leads have provided feedback will continue to provide advice to ensure Trusts meet equality and human rights statutory obligation.</li> <li>The Stronger Together Network will hold a seminar on Wednesday 24 June 2015 to discuss the implications faced by people that have no recourse to public funds and how they can be supported by the community and voluntary sector. The event agenda includes what 'No recourse to public funds' means and who it applies to, understanding the legislation and short, medium and long</li> </ul>		

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			term support solutions. Outcomes from this event will be considered and during 2015/ 2016 Trust Equality Leads will consider how Trusts can work in partnership with the voluntary and community sector.
26.	Multi-cultural and Beliefs Handbook Maintenance of a Multi-cultural and Beliefs Handbook that reflects current migration trends.	Regional Lead: Southern Health and Social Care Trust, on behalf of all HSC Trusts. WHSCT Lead: Head of Equality & Involvement, P&SI Directorate.	Resource updated to include information on the Roma Community – October 2014 and circulated to Equality Leads – April 2015 as latest version. Action completed but subject to on-going review to reflect migration trends.
27.	Age Discrimination Regulations Work with Trust service areas to identify the key issues to address in preparation for extension of Age Discrimination Regulations into sphere of goods, facilities and services.	Regional Lead: Service Leads.HSC Trust Equality Leads.WHSCT Lead: Head of Equality & Involvement, P&SI Directorate.	On-going Action, awaiting introduction of legislation.
28.	Black and Minority Ethnic (BME) Carers Develop ways of identifying and supporting BME carers by working in partnership with Health and Social Care organisations, community and voluntary groups and others seeking to improve the health and social wellbeing of BME carers across Northern Ireland.	Regional Lead: Regional Minority Ethnic Health and Social Well-Being Steering Group.PHA.Trust Carers Co-ordinators.HSC Trust Equality Leads.	<ul> <li>Regional Initiatives to support BME carers during 2014-2015 included:</li> <li>Development of an information leaflet aimed at raising awareness of carer support and details of Carer Co-Ordinators translated into 11 languages and launched at a regional event in June 2014. This leaflet was distributed throughout all HSC Trusts and is available on the Trust web pages.</li> </ul>

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social inclusion for BME Carers and		an Di	/HSCT Lead: Primary Care nd Older People's Services irectorate: Carers Co- rdinator.		<ul> <li>Funding was secured by the Regional BME Carers Group (from PHA) to run events in each Trust to raise awareness of BME carers. Events included:</li> <li>The development an App to promote the needs of Carers from BME Communities. This App will help identify and assist individuals with caring responsibilities and sign post them to appropriate services.</li> <li>A workshop 'Cultural Approaches to Caring' which aimed to raise awareness of cultural differences to caring, and to provide a networking opportunity between the Trust and other organisations supporting BME carers.</li> <li>A seminar for BME organisations on Carer support.</li> <li>Funding has been sought by the Trusts' Carers Co-ordinators from PHA to conduct research into BME Carers throughout Northern Ireland and help identify their needs and plan for future services. One of the key objectives of the research application is to develop a support network for BME Carers and further promote</li> </ul>
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			their families.
			<b>Local Initiatives:</b> Carer Support Information leaflets in 11 different languages are available on the Western HSC Trust web site and this has been promoted through the Trust Facebook page.
			The Carers Support Team held a one off event with the Carers Workers Network and invited BME groups to attend on 5 March 2015.
			The event (funded by the PHA) was successful with 23 attendees in total. 5 of the attendees were representing BME groups across the Trust area. There was a good exchange of information and networking at the event. Future networking and co-working opportunities were identified between BME groups and Community and Voluntary sector organisations.
Addition	nal WHSCT Actions	L	Volumaly coolor organisations.
Action	Action Measure(s)	Lead Responsibility	Review of Progress April 2014 – March 2015
29.	Concerns about levels of satisfaction among people with learning disability with services received in acute hospitals.	Acute Services Directorate: Assistant Director for Emergency Care and Medicine in partnership with	Hospital Passports for adults with Learning Disability are now in use for all patients within Lakeview Hospital and for clients living in Trust managed supported living
	Analyse recommendations from pilot Improvement Plan for Access to General	AMHD Directorate: Assistant Director for Learning	services. The roll out across partner agencies has been deferred until a regional

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	<ul> <li>Hospital Services for People with Learning</li> <li>Disability (2008-2010) and develop action plan.</li> <li>Consider how Trust hospitals and other service areas can be included.</li> <li>Maintain delivery of learning disability awareness training with staff.</li> </ul>	Disability.	decision has been made on the content.
30.	Inequalities relating to treating adolescents in adult areas in acute settings. Analyse what the issues are and identify actions to address them.	Acute Services Directorate: Assistant Director for Emergency Care and Medicine	RQIA carried out an inspection in relation to the management of children and young people under the age of 18 in adult wards, and submitted a draft report of their findings to the Trust. Arising from this, a key action for the Trust was the development of a policy for managing children under 18 in adult wards. The Trust has developed this policy which is going forward for final approval.
31.	<ul> <li>Work with CAWT teams to develop an older</li> <li>people's project with a team of 5, to address 2</li> <li>key issues: <ul> <li>the provision of assistive technologies to older</li> <li>people along the border corridor to enable</li> <li>them to stay at home longer;</li> <li>identify potential sources of social support and</li> <li>social interaction for older people in the same</li> <li>areas.</li> </ul> </li> <li>To reduce isolation in the 65+ age group.</li> <li>Project Action Plan will include a guide to all the</li> <li>identified services. This will be a resource for</li> <li>both older people and staff, and will be sustained</li> </ul>	Primary Care and Older People's Services Directorate: Assistant Director for Primary & Community Care	The Good Morning Service in Fermanagh continued up until 30 June 2014 and ultimately had 49 clients receiving a service at the end of the contract. Unfortunately none of the projects were mainstreamed by the Trust however the learning through the evaluation process of this project will feed into future funding applications undertaken by CAWT.

	after the project has concluded.		
32	<ul> <li>Establish the needs of male carers. Provide a number of one off events targeting male carers. Evaluations will be carried out and analysed. Based on this analysis a programme for groups of men and individual men will be developed to increase the confidence of male carers and reduce their isolation.</li> </ul>	Primary Care and Older People's Services Directorate: Carers Co- ordinator in conjunction with Me UnLtd Director. Funded by PHA (Western).	The Fermanagh and Derry Male Carers Groups continue to meet.
33	<ul> <li>Engage with people from the ethnic minority community and their advocacy groups to increase awareness and understanding of what learning disability services are available.</li> <li>Schedule information sessions on learning disability services for ethnic minority groups. Monitor queries and questions. Monitor how many attending know how to access or currently use existing services. Identify if there are improvements to be made which will assist people from ethnic minority communities to access the services. Develop an action plan to address issues.</li> </ul>	Adult Mental Health and Disability Services Directorate: Assistant Director for Learning Disability.	The foreign language interpreting service has been used in addition to the sign language interpreting service. All user information leaflets are updated as required.
34	Work with Regional GP Implementation Group to put into practice the recommendations from 'Is it my turn yet?' The aims are to improve access to GP practices for deaf, hard of hearing and partially sighted people. Improve and develop closer working relationships between planners, policy makers, Health Trusts and GPs.	Adult Mental Health and Disability Services Directorate: Assistant Director for Adult Physical and Sensory Disability	<ul> <li>There have been no further meetings of the 'Is It My Turn Yet' regional group.</li> <li>The work undertaken as part of the previous CAWT citizenship work with disability access to GP practices in Castlederg and Donegal is complete and has been successful as previously described.</li> </ul>

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35.	Assess the current issues re: <b>accessibility of</b> <b>Trust restaurants</b> for staff/users/visitors with disabilities or from ethnic minority backgrounds. Take actions that will improve the Trust's ability to meet the needs of people from both these groups.	Performance and Service Improvement Directorate: Facilities Management.	Business case is being developed for Tyrone and Fermanagh Hospital Restaurant refurbishment in line with the OELH timescales. All Trust restaurants provide suitable menu options to meet the dietary choices of the identified ethnic groups.
36.	Travellers Action Group (West): committed to working with Travellers and for Travellers and to increase the work done by Travellers in addressing the health issues raised in the All Ireland Traveller Health Study. Improve the health and wellbeing of Travellers in the Western area through developing a support service, and developing better coordination with travellers and stakeholders involved in work with/for travellers, sharing models of best practice and shaping future services.	Performance and Service Improvement Directorate: Head of Health Improvement Department (HID).	Project Manager and Project Worker have been appointed to implement Traveller Health and Wellbeing Project and will take up post in April 2015.
37.	Health Improvement Programmes: Target programmes more effectively for men.Continue to link with appropriate groups to develop and deliver programmes accordingly.	Performance and Service Improvement Directorate: Head of Health Improvement Department (HID).	<ul> <li>During this period:</li> <li>319 men attended Health Improvement training</li> <li>700 men attended cancer prevention awareness and information sessions.</li> </ul>
38.	Health Improvement Programmes: Target programmes more effectively for older people. Continue to link with older people's organisations to identify what works for older people and	Performance and Service Improvement Directorate: Head of Health Improvement Department (HID).	608 older people attended falls prevention training and information sessions.

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	develop and deliver programmes accordingly.		
39.	Health Improvement Programmes: Targetprogrammes more effectively for people withdisabilities.Continue to link with disability organisations toidentify what works for older people and developand deliver programmes accordingly.	Performance and Service Improvement Directorate: Head of Health Improvement Department (HID).	28 women with a disability attended breast cancer awareness training.
40.	The Neighbourhood Renewal (NR) Health Improvement programmes are designed to tackle inequalities in health by targeting those at most in need and those at an increased risk of developing health problems. A wide range of health and well being programmes will be delivered to all age groups including young people and parents, older vulnerable people, those living with chronic diseases, those suffering from mental health illnesses, survivors of sexual violence, people with chronic addictions, children at risk of parental alcohol and drug dependency.	Performance and Service Improvement Directorate: Head of Health Improvement Department (HID).	Omagh Health Project Omagh Health Project has worked closely with the 5 neighbourhood renewal areas in order to deliver all the programmes outlined in their individual action plans. Health programmes delivered include; physical activity classes e.g. pilates, zumba, boxercise; cooking demonstrations; health check days; community clean ups; senior luncheon clubs; men's health days; mental health awareness; resilience under pressure; safeTALK and family fun days. Enniskillen Health Project Devenish have run 27 different programmes in the Enniskillen NR area which have increased the mental, emotional and physical health of the 800 residents. Aisling Centre delivered 202 counselling sessions to NRA residents – 80 of these through NR/DSD funding.

Nexus have provided 87 sessions to adult survivors and victims of sexual violence, abuse and rape living in NRAs.
Neighbourhood Health Improvement
Project (NHIP) This project encompasses 6 NR areas in the
North West. Over 4,000 beneficiaries have participated in a wide range of health
improvement programmes. These in include
GP referral programmes (cancer, physical activity and podiatry), Grow Your Own
Programmes, Healthy Eating, Physical
Activity, Mental Health Programmes, Winter Health, Action Cancer Big Buses and
Cancer Support Groups, Men's Health
Young People and Mental Health, Young People with Learning Difficulties, No
Smoking Day Campaigns and programmes
which support families affected by drugs/ alcohol.

SECTION 3: EMPLOYMENT					
	Regionally Agreed Actions				
Action	Action Measure(s)	Lead Responsibility	Review of Progress April 2014 – March 2015		
41.	Gender Equality Survey aimed at investigating a number of gender equality issues at executive/senior managerial levels. Positive approaches to women's careers. NB: The work is being conducted by the University of Ulster on behalf of OFMDFM and in co-operation with the Public Sector.	Regional Lead: HSC Trust Equality Leads, Senior Managers in Health and Social Care in partnership with the University of Ulster and ECNI – in terms of roll out of any forthcoming recommendations. WHSCT Lead: Head of Equality & Involvement, P&SI Directorate.	The research, which is funded by OFMDFM, is concerned with investigating Gender Equality at Executive/Senior levels within the NI public sector which may affect an individual's career aspirations to reach a senior position within the public sector. The Report findings have since been launched. Initial research findings highlighted that women fare better where there is a female Chair and Chief Executive at the head of public sector bodies. The Trusts have examined the recommendations to see what further steps can be taken to further ensure gender equality in the workplace. For example, HSC Trusts have an expanding range of initiatives in place such as Work Life Balance schemes to enable employees to reconcile competing demands/commitments, succession planning programmes aimed at growing potential, and various other leadership and professional development courses to develop the potential of future managers.		
42.	Potential issues re: racism and sectarianism in the workplace.	Regional Lead: HSC Trust Equality Leads and Trade	The Trust's Harassment Policy is currently under review. The launch of a new policy		

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	Continue to review, develop and support workplace initiatives to promote respect and cultural diversity. Ensure Management Development programme includes responsibilities of managers.	Unions. WHSCT Lead: Assistant Director for Workforce Development and Performance/Employee Relations.	will include training on racial, religious and ethnic origin discrimination. The Trust's Recruitment and Selection Training was updated in February 2015 and provides information on discrimination of protected groups at all stages of the recruitment and selection process.
43.	<b>'Discovering Diversity'</b> Increase uptake of Discovering Diversity E- Learning programme.	Regional Lead: HSC Trust Equality Leads. WHSCT Lead: Head of Equality & Involvement, P&SI Directorate.	The 'Discovering Diversity' E-Learning Programme is mandatory for all Western Trust staff and uptake of this training is monitored. Regular reminders are issued to staff via Trust Communication and 'Discovering Diversity' is referenced at training delivered by the Equality & Involvement Team.
44.	Continue to support the Health and Social Care LGBT Staff Forum. Develop a training seminar to address the needs of lesbian women with regard to access to maternity and fertility services.	Regional Lead: HSC Trust Equality Leads, PHA and Rainbow Project. WHSCT Lead: Human Resources Directorate: Assistant Director for Workforce Development and Performance/Employee Relations. P&SI Directorate: Head of Health Improvement Department (HID),	HSC organisations have agreed to progress toward LGBT - 'I am an Ally!' - Diversity Champions status in partnership with PHA and other HSC organisations and The Rainbow Project – Initiative being led by Matthew McDermott, BSO. The Western HSC Trust continues to support the LGBT Staff Forum through circulation of information via Trust Communication.
45.	Disability Action Plan Continued implementation of the Trust's	<b>Regional Lead:</b> Employment Equality Leads,	Work is ongoing to implement the Regional Framework. The Western Trust has

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Disability Action Plan and Regional Framework on the Employment of Persons with a Disability. Increase in employment of marginalised groups	Trade Unions, Service Managers, Disability Sector.	representation from the Human Resources Department on this group.
(disabled persons) on a number of levels e.g. volunteering, work placements, substantive employment etc. Make available 10 work placements by December 2014 – on-going. Ensure existing employees who are or who become disabled are supported and facilitated through the Trust's reasonable adjustment arrangements and, where appropriate, conditions management scheme.	WHSCT Lead: Human Resources Directorate: Employee Relations Manager/Human Resources Policy Design Group.	The Trust developed its 3rd Disability Action Plan for the period 1 May 2014 – 30 April 2017. This exercise was undertaken in partnership with other HSC Trust Equality Leads and with a wide range of stakeholders. Consultation on the draft DAP commenced on 26 March 2014 and ran until 19 June 2014. After the consultation period closed Equality Leads considered consultation responses received, drafted a
Continue to facilitate and support the Trust's Disability Forum, the purpose of which is to shape and influence Trust policy and practice with regard to employment of people with disabilities and to address issues raised by the Forum. Produce an information newssheet (twice-yearly) – highlighting case studies and good practice in order to promote a culture that involves and supports employees with a disability. Access support and advice set out in the ECNI's Employability Toolkit in relation to employability initiatives for persons with a disability.	Regional Lead: Equality Assurance Unit and Disability Forum Members, Trade Unions and Disability Sector. WHSCT Lead: Human Resources Directorate: Employee Relations Manager/Human Resources Policy Design Group.	consultation responses received, drafted a consultation report and amended the Draft Plans accordingly. Thereafter, the final draft WHSCT Disability Action Plan was approved by Trust Board for implementation. Two sets of guidelines have been developed regionally via the Employment Equality Leads Group – Disability Etiquette and Reasonable Adjustments. These will be subject to approval processes within the Western Trust prior to implementation. A Community Access Worker (CAW) was appointed by WHSCT to continue the work started by the CAWT Active Citizenship, Day Opportunities Programme which aimed to increase the number of people with
		disabilities in volunteer and work placements as well as in employment within the Trust.

			the CAW established a 'New Directions Service' for adults with a learning disability across the Trust. The service is currently providing support, guidance and facilitating placements etc.to 30 individuals ranging in age from 18-62yrs from urban and rural communities. <i>To date individuals referred to</i> <i>the service have been supported to gain</i> <i>access to social, leisure activities and</i> <i>voluntary work experience.</i> The CAW reports demand for the service is growing and new referrals are being prepared by Community Keyworkers. There are plans to review the appointment of an additional CAW.
46.	To increase fair participation in the workforce. Completion of <b>Article 55 Review</b> and submission to ECNI in line with the Fair Employment and Treatment (NI) Order (FETO) 1998. Production of Executive Summary for Trust Board on key findings and recommendations. Engage with ECNI in relation to agreement on affirmative action and outreach measures. Effective implementation of these measures and ongoing monitoring and review.	Regional Lead: Employment Equality Leads, Trade Unions, ECNI and other relevant stakeholders. WHSCT Lead: Human Resources Directorate: Assistant Director of Human Resources, Human Resources Manager - Workforce Information.	The Trust's second Article 55 Review has been completed (2011 – 2013). The Trust will engage with the ECNI to review the Article findings, and if necessary agree on any affirmative actions or outreach measures.

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Development of a <b>Regional Transgender</b> Policy.	Employee Resourcing. <b>Regional Lead:</b> BSO in partnership with HSC Equality Leads.	The Trust has provided comments on the draft regional policy. The Business Services
	WHSCT Lead: Human Resources Directorate: Assistant Director of Employee Resourcing.	Organisation's Equality Unit has asked HR Directors to consider a proposal to convene a one-off focussed meeting between the working group and key Payroll and HR staff.
al WHSCT Actions		
Action Measure(s)	Lead Responsibility	Review of Progress April 2014 – March 2015
To raise awareness of <b>domestic abuse</b> and offer support to staff. Staff training and awareness sessions. Specific training sessions for domestic violence support workers.	Human Resources Directorate: Assistant Director of Employee Resourcing, Trade Unions, Western Interagency Domestic Violence Partnership, other relevant external organisations.	<ul> <li>The Trust's Domestic Violence Workplace</li> <li>Policy was launched at a multi-agency event on 10 September 2012.</li> <li>An information leaflet for staff has been developed and was issued throughout the Trust in January and February 2013.</li> <li>The next stage is planning training for</li> </ul>
A T of S tr	ction Measure(s) o raise awareness of domestic abuse and ffer support to staff. taff training and awareness sessions. Specific aining sessions for domestic violence support	ction Measure(s)Lead Responsibilityo raise awareness of domestic abuse and ffer support to staff.Human Resources Directorate: Assistant Director of Employee Resourcing, Trade Unions, Western Interagency Domestic Violence Partnership, other relevant

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50.	Managing Attendance at Work Policy. Implementation of protocol. Briefing sessions for Managers delivered by HR and Trade Union side.	Human Resources Directorate: Assistant Director of Employee Resourcing.	Managing Attendance is one of the key "Quality Improvement & Cost Reduction" (QICR) Projects. The current priorities include improving timely access to Occupational Health, for example, changes to triage and improvement with DNAs. This work will be reported on by June 2015.
51.	Need to raise awareness of <b>zero tolerance to</b> <b>violence in the workplace</b> , harassment and bullying and ensuring that staff are aware of arrangements for reporting incidents and clarifying the role of managers in dealing with such cases.	Human Resources Directorate: Assistant Director Workforce Development and Performance/ Employee Relations.	Trust Policy currently being revised to include aspects from regional policies of Working Well Together and Harassment. Launch of new policy will include promotion and communication with all employees.
52.	Ensure the best possible outcome for care leavers. Aim to increase the proportion of care leavers in education, training or employment at age 19 years to 75%.	Women and Children's Services Directorate: Head of Looked After Children's Service.	PFA Target of 75% continues to be exceeded.