

Northern Health and Social Care Trust



Northern Health
and Social Care Trust

Public Authority Statutory Equality and Good Relations Duties Annual Progress Report 2015-16

Contact:

• Section 75 of the NI Act 1998 and Equality Scheme	Name:	Alison Irwin
	Telephone:	028 2766 1377
	Email:	alison.irwin@northerntrust.hscni.net
• Section 49A of the Disability Discrimination Act 1995 and Disability Action Plan	As above	<input checked="" type="checkbox"/>
	Name:	
	Telephone:	
	Email:	

Documents published relating to our Equality Scheme can be found at:

www.northerntrust.hscni.net

Signature:

This report has been prepared using a template circulated by the Equality Commission.

It presents our progress in fulfilling our statutory equality and good relations duties, and implementing Equality Scheme commitments and Disability Action Plans.

This report reflects progress made between April 2015 and March 2016

PART A – Section 75 of the Northern Ireland Act 1998 and Equality Scheme

Section 1: Equality and good relations outcomes, impacts and good practice

- 1** In 2015-16, please provide **examples** of key policy/service delivery developments made by the public authority in this reporting period to better promote equality of opportunity and good relations; and the outcomes and improvements achieved.

Please relate these to the implementation of your statutory equality and good relations duties and Equality Scheme where appropriate.

Section 75 Action Based Plan

The implementation of the Trust's Section 75 Action Based Plan is central to the promotion of equality of opportunity and good relations and the implementation of the Trust's statutory equality duties. This Action Based Plan was developed to address the findings of an Audit of Inequalities and was widely consulted on. It includes measures that have the greatest impact on equality of opportunity and good relations and draws on best practice. A copy of the Plan and notes of attainment can be seen in Appendix 1. Examples of some of the key outcomes from the implementation of the Plan to date are as follows.

- 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) resulting in the transfer of management responsibility from Belfast Health & Social Care Trust (BHSCT) to the Business Services Organisation (BSO) on 1 October 2014.
- Review and launch of a Health and Social Care Booklet to provide information about health and social care to people from minority ethnic backgrounds who have moved to Northern Ireland. The Booklet is now available on all Trust websites in a number of languages.
- Development of "Making Communication Accessible" to ensure that disabled people can access information and services.
- Improved ethnic monitoring of service users in a number of health and social care information systems. This work was positively referenced by the OFMDFM Race Equality Unit.
- Commended user engagement on the development of the Trust's new Ballymena Health and Care Centre. The involvement of Panel members from 'concept to completion' has ensured that the building, furniture and signage are accessible.

Good Relations Strategy

During 2015/16 the Trust continue to take forward its Good Relations Strategy to reflect its commitment to promoting respect, equity and trust in the delivery of our services and employment of our staff. Examples of some of the key outcomes from the implementation of the Strategy are as follows.

- Public statement on the Trust's commitment to challenging sectarianism and racism in any form.
- Posters promoting the Trust's Good Relations Statement (see below) have been disseminated to all Trust facilities and services.

"We are committed to ensuring that our staff feel comfortable at work and everyone feels welcome when using our services. We will not tolerate sectarianism or racism in any form by staff or service users."

- Establishment of Agencies Supporting Ethnic Minorities (ASEC) formerly known as the Ballymena Inter Agency Support Group (BIAESG). The group now covers the geographical area of Larne, Carrickfergus and Ballymena. ASEC brings together individuals from the statutory, voluntary and private sectors to explore ways of sharing best practice and identifying new approaches to support ethnic minority communities. The group's vision is:

'There is a strong network of agencies across Ballymena, Carrickfergus and Larne, working together to ensure that all people from ethnic minorities in Mid & East Antrim are welcomed and integrated into the Community.'

- Provision of cultural awareness training to develop an understanding of cultural competence among staff and encourage good practice to make the Trust environment a welcome place for all communities in Northern Ireland.
- Promoting staff awareness of how to support service users and carers who are victims of hate crimes in partnership with Victim Support NI.

Ensuring compliance in ongoing reform programme

RAMP – the Trust's reform and modernisation programme sets out the Trust's approach to effecting change so that people can access excellent, responsive and appropriate services that provide the best possible outcomes. The Trust is committed to engaging with service users, carers and local communities on the development of a sustainable health and social care system. To ensure participation is the foundation for any considered change process we are setting

up a locality engagement forum in each of our four localities.

In making policy decisions during the reporting period relating to any change in service provision, the Trust continued to comply with its Equality Scheme duties to ensure that decisions were made in such a way as to minimise unfairness, and to ensure they did not have a disproportionately negative impact on any of the nine equality categories.¹ The Trust carried out robust equality screening and consulted and involved relevant stakeholders as part of the decision-making process.

The Trust's new vision is "To deliver excellent integrated services in partnership with our community". Partnership is a strong element of the Trust's vision and it is also a strong element of the culture it wants to create by working in partnership with staff, patients, service users, families and local communities to design and deliver excellent services. The Trust's 'CORE' values of Compassion, Openness, Respect and Excellence will now underpin all that it does. The new vision and values were developed as a result of robust engagement with Trust staff. The ongoing commitment to equality is demonstrated in the CORE value of Respect which states,

"We will respect the dignity, diversity and individuality of all our patients, clients and colleagues promoting equality and addressing inequality."

- 2 Please provide **examples** of outcomes and/or the impact of **equality action plans/** measures in 2015-16 (*or append the plan with progress/examples identified*).

A copy of the Trust's Section 75 Action Based Plan can be seen in Appendix 1. The Plan includes notes of attainment – examples of progress.

- 3 Has the **application of the Equality Scheme** commitments resulted in any **changes** to policy, practice, procedures and/or service delivery areas during the 2015-16 reporting period? (*tick one box only*)

Yes No (go to Q.4) Not applicable (go to Q.4)

Please provide any details and examples:

-
- ¹ people with different religious belief
 - people of political opinion
 - people of different racial groups
 - people of different ages
 - people of different marital status
 - people of different sexual orientation
 - men and women generally
 - people with a disability and people without
 - people with dependants and people without

Table detailing how application of the Equality Scheme commitments resulted in any changes to policy, practice, procedures and/or service delivery areas during 2015-16

Equality Scheme Commitment	Action	Difference made for individuals
Arrangements for assessing our compliance with S75 duties		
<p>Have in place appropriate structures and reporting mechanisms</p>	<p>The Trust has established an Engagement, Experience and Equality Group (Triple EG) to ensure compliance with and mainstreaming of its equality duties. The Group will also maintain an overview of all Trust corporate consultation and engagement processes to ensure compliance with the Trust's Consultation Scheme. The Group is Chaired by the Trust's Deputy Chief Executive and membership includes Trust Directors and Non-Executive Directors. It reports directly into the Trust's Assurance and Improvement Group which reports through the Executive Team to Trust Board.</p>	<p>Section 75 duties integral to Trust's Assurance Framework. Trust senior teams aware of statutory requirements during decision making.</p>
<p>Ensure S75 duties are mainstreamed within the Trust</p>	<p>The Trust's new vision and values demonstrate an ongoing commitment to equality. The CORE value of Respect states "We will respect the dignity, diversity and individuality of all our patients, clients and</p>	<p>Individuals aware of the Trust's commitment to equality duties. Trust staff aware of equality duties</p>

	<p>colleagues promoting equality and addressing inequality.”</p> <p>Membership of the Engagement, Experience and Equality Group (Triple EG) – as detailed above – includes Trust Directors who are responsible for the mainstreaming of equality duties across their Divisions.</p>	
<p>Prepare Section 75 Annual Progress Report (APR) and include section in Trust’s own Annual Report.</p>	<p>Annual Progress Report supported by “Equality Newsletter” to ensure updates available in a more accessible format – please see appendix 2.</p> <p>Equality Matters section included in the Trust’s Annual Report – please see appendix 3.</p>	<p>All consultees sent copy of newsletter and informed of availability of progress report - improving awareness of Trust’s S75 duties and outcomes of work programme.</p>
Action Plan		
<p>Development of Action Based Plan to include performance indicators and timescales. Aligned to corporate and business planning cycle</p>	<p>The implementation of Action Based Plan and identified outcomes for the reporting period can be seen in appendix 1.</p>	<p>The content of the Action Based Plan has been informed by an ‘Audit of Inequalities’ and pre-consultation with a wide range of stakeholders. Its implementation has a positive impact on all S75 Groups.</p>
Arrangements for consulting		
<p>Consultation list reviewed and updated</p>	<p>Consultations carried out throughout the reporting period provided the opportunity to update the Trust’s consultation list.</p>	<p>New consultees were added to consultation list resulting in more robust engagement process.</p>

<p>Training re. Consultation</p>	<p>The Trust recognises the importance of proper and timely consultation as an integral part of fulfilling its S75 duties when making decisions and planning services. The Trust is currently revising its Consultation Scheme in line with new guidance issued from the Department of Health, Social Services and Public Safety for Northern Ireland (DHSSPS NI). The ECNI has completed its consultation on timescales for consultation and has recommended that timescales for consultation on Equality Impact Assessments resulting in will remain unchanged. The new Consultation Scheme will have to set out the Trust's commitment to undertaking appropriate, timely and inclusive consultation in accordance with its statutory PPI and Equality duties.</p>	<p>S75 groups and consultees engaged consulted on Trust decisions.</p>
<p>In making any decision with respect to a policy adopted or proposed to be adopted, take into account any assessment and consultation carried out in relation to the policy</p>	<p>During reporting period the Trust consulted on</p> <ul style="list-style-type: none"> • MAKING CHOICES: Proposed Changes in Provision of Statutory Residential Care in the Northern Health and Social Care Trust - 26 June 2015 until 2 October 2015 • Commissioning Services from Community and Voluntary Sector - 28 August 2015 until 20 November 2015 • The Future of Norfolk Court Supported Living Schemes - 4 	<p>Views of representation groups and individuals considered during decision making process.</p>

	<p>September until 27 November 2015</p> <ul style="list-style-type: none"> • Consultation on the future of Whiteabbey Minor Injuries Unit - 11 September until 4 December 2015 <p>Consultation feedback reports were presented to Trust Board.</p> <p>On-going engagement through Trust User Groups makes sure representative groups and individuals views are taken into account in decision making.</p>	
Provide feedback report to consultees in timely manner in formats suited to consultees	<p>When final decision has been made, consultees receive a copy of consultation feedback report and are informed of how their feedback influenced the decision made. Consultation feedback reports are available on the Trust website. All Trust documents can be made available in an alternative format on request.</p>	<p>Representative groups and individuals informed of how their feedback influenced the decision made.</p>
Screening		
Revise screening template and accompanying guidance notes.	<p>Trust policy development process ensures all Trust policies are screened. All policies approved during the reporting period were subject to S75 screening and appropriate consultation.</p> <p>During the reporting period the Trust screened 94 policies and proposals. It carried out</p>	<p>Transparent decision making process for consultees and impact on S75 groups identified during policy development process.</p>

	and consulted on one EQIA.	
Publish reports quarterly and in accessible formats on request.	All quarterly reports for the reporting period were made available on the Trust's website.	Screening outcomes available to the public for consideration.
Publishing of EQIA reports.	During the reporting period the Trust consulted on its EQIA on MAKING CHOICES: Proposed Changes in Provision of Statutory Residential Care in the Northern Health and Social Care Trust. The Trust received detailed feedback. On 24 November 2015, the Health Minister asked the Health and Social Care Board to pause and review the proposed closures of statutory residential care homes, in the context of an announcement made by one of the largest independent providers of nursing and residential home care in Northern Ireland.	Consultees await feedback on the proposed changes to statutory residential care.
Monitoring		
Review of monitoring information	The Trust continues to monitor by Section 75 categories and this has been enhanced by HRPTS Self-Service functions. During the reporting period this monitoring information was assessed for S75 screenings and EQIA.	Increased understanding of the make-up of the workforce to ensure promotion of equality of opportunity and better information to identify any potential impact.

	<p>The Guide to Ethnic Monitoring of Services Users in HSC in NI was issued by the Chief Executive of the HSCB to all HSC Organisations in March 2016 for implementation. The use of this new Guide will help providers to robustly capture critical patient/service user information on existing and emerging BME communities using HSC services.</p>	<p>Guidance will support HSC organisations to identify any unmet need and to target their resources thus tackling health inequalities experienced by BME communities.</p>
Staff Training		
Draw up a detailed training plan	<p>During reporting period, implementation of the Trust's Equality Training Programme continued.</p> <p>Health and Social Care had commenced work to develop 2 further e-learning modules – one for completion by all HSC staff and a further module specifically tailored for managers. The 2 modules will provide an accessible and more condensed training package for staff and managers.</p>	<p>1070 staff received equality training during the reporting period.</p> <p>It is anticipated that availability on promotion of the new modules will greatly increase the uptake of equality training.</p>
Focused training	<p>During the reporting period the Trust provided focused training as follows.</p> <ul style="list-style-type: none"> • Provision of cultural awareness training to develop an understanding of cultural competence 	<p>Training delivered by the representative groups and individuals resulted in very positive feedback and as a result more training is planned for this year.</p>

	<p>among staff and encourage good practice to make the Trust environment a welcome place for all communities in Northern Ireland.</p> <ul style="list-style-type: none"> • Promoting staff awareness of how to support service users and carers who are victims of hate crimes in partnership with Victim Support NI. • Disability Equality Training co-delivered by members of Disability Consultation Panel. 	
<p>Arrangements for ensuring and assessing public access to information and services we provide</p>		
<p>Ensure information we disseminate and services we provide are fully accessible to all parts of the community in Northern Ireland</p>	<p>Ongoing implementation of the Northern Ireland Health and Social Care Interpreting Service (NIHSCIS) Review recommendations. .</p> <p>The New web- based IT Portal was successfully deployed to all HSC organisations during the year under-review. Training has been ongoing throughout the deployment phase to ensure that users were in a state of readiness to go online.</p>	<p>Implementation of Review recommendations ensure cost effective services will be provided and service users can continue to get support when required.</p>

<p>Provide information in alternative formats on request</p>	<p>160 documents translated into minority languages</p> <p>All minutes of Disability Consultation Panel provided on disk or Braille</p> <p>All minutes of Learning Disability Panel provided in Easyread</p> <p>Extended library of translated material during the reporting period –e.g. Trust translated PAS appointment letters into a range of languages and the Access to Health and Social Care Booklet has been translated regionally and is available on our website.</p>	<p>Information provided in alternative formats to increase understanding, ensure effective communication and improved access to services.</p>
<p>Provide interpreters and sign language interpreters</p>	<p>The following interpreting support was provided in the reporting period.</p> <ul style="list-style-type: none"> • 834 health and social care appointments were supported with the provision of a Sign Language Interpreter. • 11,613 interpreters were requested from NIHSCIS. • Telephone interpreting service continues to be used by staff. 	<p>Service users and staff supported to ensure good governance in information provision and communication.</p>

Assessing access to information and services	Commended user engagement on the development of the Trust's new Ballymena Health and Care Centre. The involvement of Panel members from 'concept to completion' has ensured that the building, furniture and signage are accessible.	Resulted in real changes being made so that the services provided in the Health and Care Centre are accessible to all those who use it every day. Someone is available at reception if assistance is required, seating meets everyone's needs and signage is now accurate. All frontline staff have received disability equality training.
Complaints Procedure		
How complaints are raised, timetable for responding etc	The Trust received no complaints relating to the implementation of its Equality Scheme	N/A
Any other measures proposed in equality scheme		
Work closely with other public authorities to exchange learning and best practice	During reporting period Trust participated in Regional Equality and Human Rights Steering Group and Regional Equality Leads meetings.	Collaborative working ensures more effective use of resources and consistent approach across health and social care.
Liase closely with the ECNI to ensure that progress on the implementation of our Equality Scheme is maintained	During reporting period the Trust met regularly with ECNI on S75 implementation.	Ensures effective use of resources and S75 implementation.

3a With regard to the change(s) made to policies, practices or procedures and/or service delivery areas, what **difference was made, or will be made, for individuals**, i.e. the impact on those according to Section 75 category?

Please provide any details and examples:

Please see third column in above table.

3b What aspect of the Equality Scheme prompted or led to the change(s)? (*tick all that apply*)

As a result of the organisation's screening of a policy (*please give details*):

Examples provided above

As a result of what was identified through the EQIA and consultation exercise (*please give details*):

The Trust recognises the importance of proper and timely consultation as an integral part of fulfilling its Section 75 obligations when making decisions and planning services. Over the reporting period months the Trust has consulted on the following.

- MAKING CHOICES: Proposed Changes in Provision of Statutory Residential Care in the Northern Health and Social Care Trust and EQIA document - 26 June 2015 until 2 October 2015
- Commissioning Services from Community and Voluntary Sector and screening template - 28 August 2015 until 20 November 2015
- The Future of Norfolk Court Supported Living Schemes and screening template - 4 September until 27 November 2015
- Consultation on the future of Whiteabbey Minor Injuries Unit and screening template - 11 September until 4 December 2015

When appropriate targeting engagement is integral to the consultation process. For example during the consultation on Commissioning Services from Community and Voluntary Sector the Trust held workshops in each of the four Trust localities to engage directly with the community and voluntary sector. Dates of the workshops were as follows.

- Causeway – 28 October, 2pm – 4pm (Main Hall, Sandel Centre, Coleraine)
- East Antrim - 29 October, 2pm – 4pm (Linen Room, Mossley Mill, Newtownabbey)
- Antrim/Ballymena – 30 October, 10am – 12noon (Glendun Room, All Saints Parish Centre, Ballymena)
- Mid Ulster – 3 November, 2pm – 4 pm (The Studio, Burnavon, Cookstown)

This provided the opportunity for participants to hear about the proposed criteria and provide feedback directly.

The EQIA process and consultations above resulted in the Trust committing to ongoing engagement with the voluntary and community.

As a result of analysis from monitoring the impact (*please give details*):

The Trust continues to monitor its workforce across the 9 equality

categories. This monitoring information is used for all S75 screenings of proposals that impact on staff. This supports the assessment of impact and the identification of potential adverse impact. As a result of identifying a number of carers in the Trust workforce, training was developed for managers that ensure they are aware of support available for staff who have caring responsibilities.

- As a result of changes to access to information and services (*please specify and give details*):

The provision of interpreters and translated accessible information continues to result in effective information provision and better communication in situations where a clear understanding is required.

- Other (*please specify and give details*):

Engagement and consultation is the most effective element of the Trust's Equality Scheme in relation to change. For example involving representative organisations involved and individuals in the design of the Ballymena Health and Care Centre led to considerable change in relation to the reception area, furniture and way finding. The Trust's many user groups and process for engagement were established as a result of Section 75 and to ensure effective implementation of the Scheme.

Section 2: Progress on Equality Scheme commitments and action plans/measures

Arrangements for assessing compliance (Model Equality Scheme Chapter 2)

- 4 Were the Section 75 statutory duties integrated within job descriptions during the 2015-16 reporting period? (*tick one box only*)

- Yes, organisation wide
- Yes, some departments/jobs
- No, this is not an Equality Scheme commitment
- No, this is scheduled for later in the Equality Scheme, or has already been done
- Not applicable

Please provide any details and examples:

- 5 Were the Section 75 statutory duties integrated within performance plans during the 2015-16 reporting period? (*tick one box only*)

PART A

- Yes, organisation wide
- Yes, some departments/jobs
- No, this is not an Equality Scheme commitment
- No, this is scheduled for later in the Equality Scheme, or has already been done
- Not applicable

Please provide any details and examples:

The national Knowledge and Skills Framework (KSF) continues to be the process linked to annual development reviews of all Trust staff and personal development plans. Equality and diversity is one of the 6 Core Dimensions and it reflects a key aspect of all jobs and underpins all dimensions in the KSF. During the reporting period the Trust continued to focus on the completion of appraisals to ensure staff have the knowledge and skills they need to do their job and that key areas for development are identified. Equality training is mandatory in the Trust and attendance at all mandatory training is determined through the appraisal process.

- 6 In the 2015-16 reporting period were **objectives/ targets/ performance measures** relating to the Section 75 statutory duties **integrated** into corporate plans, strategic planning and/or operational business plans? *(tick all that apply)*

- Yes, through the work to prepare or develop the new corporate plan
- Yes, through organisation wide annual business planning
- Yes, in some departments/jobs
- No, these are already mainstreamed through the organisation's ongoing corporate plan
- No, the organisation's planning cycle does not coincide with this 2013-14 report
- Not applicable

Please provide any details and examples:

Section 75 duties are incorporated and mainstreamed at a strategic level into the business of the Trust. The Trust's Equality Unit sits within the Planning, Performance Management and Support Services and supports all Trust Divisions to ensure Section 75 is integral to planning processes.

Objectives and targets relating to the Trust's duties under Section 75 are built into its corporate and directorate planning processes. The Trust has set appropriate objectives and targets for individual responsible officers.

The Trust has established an Engagement, Experience and Equality Group (Triple EG) to ensure compliance with and mainstreaming of Section 75 duties. The

Group maintains an overview of all Trust corporate consultation and engagement processes to ensure compliance with the Trust's Consultation Scheme. The Group seeks assurance that the Trust is compliant with Equality, including Section 75 of the Northern Ireland Act 1998, the Human Rights Act 1998 and Section 49a of the Disability Discrimination Act. In doing so the Group ensures that the above is embedded in the outcome measures established for the Trust's Reform and Modernisation Programme. The Group is Co- chaired by the Deputy Chief Executive and a Non-Executive Director and members includes Trust Director and Non-executive Directors.

Equality action plans/measures

7 Within the 2015-16 reporting period, please indicate the **number** of:

Actions completed:	24	Actions ongoing:	2	Actions to commence:	1
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Please provide any details and examples (*in addition to question 2*):

Please see Appendix 1: Equality Action Plan Progress Report 2015-16.

8 Please give details of changes or amendments made to the equality action plan/measures during the 2015-16 reporting period (*points not identified in an appended plan*):

During the reporting period no changes were made to the Action Based Plan. Plans are reviewed and monitored quarterly.

9 In reviewing progress on the equality action plan/action measures during the 2015-16 reporting period, the following have been identified: (*tick all that apply*)

- Continuing action(s), to progress the next stage addressing the known inequality
- Action(s) to address the known inequality in a different way
- Action(s) to address newly identified inequalities/recently prioritised inequalities
- Measures to address a prioritised inequality have been completed

Arrangements for consulting (Model Equality Scheme Chapter 3)

10 Following the initial notification of consultations, a targeted approach was taken – and consultation with those for whom the issue was of particular relevance: (*tick one box only*)

All the time Sometimes Never

- 11** Please provide any **details and examples of good practice** in consultation during the 2015-16 reporting period, on matters relevant (e.g. the development of a policy that has been screened in) to the need to promote equality of opportunity and/or the desirability of promoting good relations:

Ballymena Health and Care Centre

The Trust worked in partnership with its Disability Consultation Panel and Older People's Panel to ensure that disabled people and older people have been successfully involved in the design and accessibility of the Trust's new Ballymena Health and Care Centre. The involvement of Panel members from 'concept to completion' has ensured that the building, furniture and signage are accessible. The partnership approach has also extended to the co-production and co-delivery of disability equality training for all Health and Care Centre staff. As a result of the engagement from the earliest stage of this project a range of accessibility issues were addressed prior to the building opening. In 2013, Panel members were first engaged on the layout of the Centre at quarterly Panel meetings, when designers attended with plans of the various areas of the building and descriptions provided of how the area would be furnished. As the build progressed throughout 2014, members were regularly asked for advice on interior design and the proposal to use an electronic self "check-in" kiosk. Members provided valuable and detailed feedback on the layout of waiting areas to include space for wheelchairs and guides/assistants, the colours/contrasts that should be used in public areas and advice on the staircase and tactile markings around this area. Feedback included the need for a 'receptionist' as well as the self "check-in" kiosk to ensure that there would be no barriers to older people and people with disabilities when accessing services. In early 2015, a furniture exhibition was arranged and Panel members attended to advise on and help choose the type of chairs being considered for the waiting areas. This directly influenced the range of furniture now in the Centre. Panel members participated in a gateway review of the readiness of the building in December 2015. An interview was held by an independent panel to ascertain the extent of the involvement of service users throughout the build. In early January 2016, Panel members were invited to a VIP tour prior to the building opening to the public. At this tour members raised a number of issues including the accuracy of the Braille, the availability of wheelchairs and the layout of waiting areas. To further enhance a positive experience when visiting the building, members of the Panels have co-produced and co-delivered Disability Equality Training to all the staff in the Health and Care Centre. This partnership initiative has resulted in a good practice model of accessibility and disability equality and has been commended regionally.

Consultation on Commissioning Services from Community and Voluntary Sector

When appropriate targeting engagement is integral to the consultation process. During the consultation on Commissioning Services from Community and Voluntary Sector the Trust held workshops in each of the four Trust localities to engage directly with the community and voluntary sector. Dates of the workshops were as follows.

- Causeway – 28 October, 2pm – 4pm (Main Hall, Sandel Centre, Coleraine)
- East Antrim - 29 October, 2pm – 4pm (Linen Room, Mossley Mill, Newtownabbey)
- Antrim/Ballymena – 30 October, 10am – 12noon (Glendun Room, All Saints Parish Centre, Ballymena)
- Mid Ulster – 3 November, 2pm – 4 pm (The Studio, Burnavon, Cookstown)

All four workshops were well attended (see Appendix 2). This provided the opportunity for participants to hear about the proposed criteria and provide feedback directly and the engagement process has resulted in changes being made to the criteria being applied during the review process. The links made with groups during this targeted consultation has initiated the development of Locality Engagement Forums to ensure ongoing engagement.

Engaging with service users who use learning disability services

In 2013, supported by Compass Advocacy Network (CAN), the Trust set up The Forum - a user group for adults who use learning disability services. Membership of the Forum included service users from all day services and supported living schemes. The Forum, chaired by a service user, continued to go from strength to strength and members were trained in recruiting Trust staff and developing the Trust's personal and sexual relationship policy. In 2015 the Trust recognised that attendance at the Forum was dropping. On Monday 14 March 2016, the Trust held an event for service users who use learning disability services to examine how service user experience can help us to improve things and how we can best enable service users to get involved. Over 60 service users attended the "Have Your Say" event. Those who attended the consultation made a number of recommendations such as being consulted not only on learning disability services but also on wider issues, providing easyread papers prior to events and meetings and providing feedback on what happens next. This will help us to shape our future engagement with adults who use learning disability services. Learning from this event can also be shared regionally.

Engaging with carers

On-going engagement with carers is central to our equality agenda. A carer recently presented at a Trust Board meeting to highlight the importance of listening to carers about the support they need to continue with their vital role. The Trust has been engaging with carers to find out how they want to be involved and how they can be supported. As a result of this the Trust has set up a Carer Reference Group, a list of carer speakers and a Carer Consultee List. This will be in addition

to our Carers Register and will make the process of involving carers in our planning more targeted and sustainable.

12 In the 2015-16 reporting period, given the consultation methods offered, which consultation methods were **most frequently used by consultees**: *(tick all that apply)*

- Face to face meetings
- Focus groups
- Written documents with the opportunity to comment in writing
- Questionnaires
- Information/notification by email with an opportunity to opt in/out of the consultation
- Internet discussions
- Telephone consultations
- Other *(please specify)*: Advocacy support is provided for those who require support with the consultation process – for example when engaging with adults who use our learning disability services, the Trust commissioned support from Compass Advocacy Network (CAN) to ensure effective engagement. The Trust continues to employ a Service User Consultant post in mental health services to make sure the user voice is integral to decision making processes in a consistent way.

The Trust also continues to consult with its established user groups – Disability Consultation Panel, Older People’s Panel, The Forum for people who use learning disability services and the Carers Steering Group. This ongoing engagement ensures representative groups and individuals views are taken into account in decision making.

Please provide any details or examples of the uptake of these methods of consultation in relation to the consultees’ membership of particular Section 75 categories:

Method	Uptake
Face to face meetings	Targeted consultation meetings held during the consultation on Commissioning Services from Community and Voluntary Sector were attended by a range of organisations representing many of the Equality categories – see appendix 4 for a list of participants

Information notification by email	<p>During all Trust consultations the following number of responses were received.</p> <ul style="list-style-type: none"> • MAKING CHOICES: Proposed Changes in Provision of Statutory Residential Care in the Northern Health and Social Care Trust – 898 responses • Commissioning Services from Community and Voluntary Sector - 27 responses alongside the feedback received during workshops. • The Future of Norfolk Court Supported Living Schemes – 3 responses received. • Consultation on the future of Whiteabbey Minor Injuries Unit – 17 written responses and petition with 1524 signatures.
Other	Ongoing support of and engagement with the Trust's user groups ensures effective consultation on a number of issues.

- 13** Were any awareness-raising activities for consultees undertaken, on the commitments in the Equality Scheme, during the 2015-16 reporting period? *(tick one box only)*

Yes No Not applicable

Please provide any details and examples:

During the reporting period the following activities supported awareness raising of Equality Scheme commitments among consultees.

- Dissemination of Section 75 Annual Progress Report
- Equality Newsletter disseminate to all consultees in September 2015 – see appendix 2
- Consultees informed of availability of Quarterly Screening Reports
- “Equality Matters” section of Trust’s Annual Report

- 14** Was the consultation list reviewed during the 2015-16 reporting period? *(tick one box only)*

Yes No Not applicable – no commitment to review

Arrangements for assessing and consulting on the likely impact of policies (Model Equality Scheme Chapter 4)

[insert link to any web pages where screening templates and/or other reports associated with Equality Scheme commitments are published]

PART A

15 Please provide the **number** of policies screened during the year (*as recorded in screening reports*):

94

16 Please provide the **number of assessments** that were consulted upon during 2015-16:

3	Policy consultations conducted with screening assessment presented.
1	Policy consultations conducted with an equality impact assessment (EQIA) presented.
	Consultations for an EQIA alone.

17 Please provide details of the **main consultations** conducted on an assessment (as described above) or other matters relevant to the Section 75 duties:

During the reporting period the Trust publicly consulted on the following.

- **MAKING CHOICES:** Proposed Changes in Provision of Statutory Residential Care in the Northern Health and Social Care Trust and EQIA document - 26 June 2015 until 2 October 2015
- Commissioning Services from Community and Voluntary Sector and screening template - 28 August 2015 until 20 November 2015
- The Future of Norfolk Court Supported Living Schemes and screening template - 4 September until 27 November 2015
- Consultation on the future of Whiteabbey Minor Injuries Unit and screening template - 11 September until 4 December 2015

To raise awareness of the consultation process all those listed in the Trust's Consultation Database received an email or letter informing them of the consultation arrangements. A letter was also sent to consultees reminding them of the closing date for consultations. Consultation documents were made available on the Trust's website (i.e. available to the public) and intranet (i.e. available to Trust staff). Documents were also available in hard copy or in different formats on request. Alongside the written consultation process the Trust carried out targeted engagement.

18 Were any screening decisions (or equivalent initial assessments of relevance) reviewed following concerns raised by consultees? (*tick one box only*)

Yes No concerns were raised No Not applicable

Please provide any details and examples:

Arrangements for publishing the results of assessments (Model Equality Scheme Chapter 4)

19 Following decisions on a policy, were the results of any EQIAs published during the 2015-16 reporting period? *(tick one box only)*

Yes No Not applicable

Please provide any details and examples:

The Trust consulted on MAKING CHOICES: Proposed Changes in Provision of Statutory Residential Care in the Northern Health and Social Care Trust and EQIA document from 26 June 2015 until 2 October 2015. On 24 November 2015, the then Health Minister asked the Health and Social Care Board to pause and review the proposed closures of statutory residential care homes, in the context of an announcement made by one of the largest independent providers of nursing and residential home care in Northern Ireland.

Arrangements for monitoring and publishing the results of monitoring (Model Equality Scheme Chapter 4)

20 From the Equality Scheme monitoring arrangements, was there an audit of existing information systems during the 2015-16 reporting period? *(tick one box only)*

Yes No, already taken place
 No, scheduled to take place at a later date Not applicable

Please provide any details:

The Trust's audit of inequalities required for the development of its previous and new Action Based Plan, is reviewed and updated annually and is available for decision makers to support the completion of screenings and equality impact assessments.

Staff monitoring is reviewed annually via HRPTS to ensure the Trust has an up to date equality profile of its workforce to support more effective screening of proposals and policies that may have an impact of staff.

Continual monitoring of interpreting identifies the top five languages requested in the Trust and ensures the Trust can provide accessible information and the appropriate type of interpreting is used for appointments.

PART A

- 21** In analysing monitoring information gathered, was any action taken to change/review any policies? *(tick one box only)*

Yes No Not applicable

Please provide any details and examples:

- 22** Please provide any details or examples of where the monitoring of policies, during the 2015-16 reporting period, has shown changes to differential/adverse impacts previously assessed:

The Trust's policy development process ensures that all policies are monitored and reviewed. The process also ensures that if there are any substantial changes to a policy it is screened again to identify any adverse impact across the 9 equality categories. During the reporting period a number of Trust policies were reviewed and no changes to differential/adverse impact were shown.

- 23** Please provide any details or examples of monitoring that has contributed to the availability of equality and good relations information/data for service delivery planning or policy development:

The Trust continues to monitor the staff across the 9 equality categories and through this monitoring process identified that the Trust has a number of staff with caring responsibilities. As a result, the Trust worked with Carers NI to ensure staff are aware of the support available for them to continue their caring role. The Trust worked in partnership with Carers NI to deliver carers awareness training to team leaders. This programme is designed to help managers understand their responsibilities in relation to making 'reasonable adjustments' and supporting staff with caring responsibilities.

It is anticipate that the monitoring of staff will be enhanced by the self-service function of the Human Resources, Payroll, Travel and Subsistence System (HRPTS). It is anticipated that staff will be more likely to record their equality information on this online system.

Ethnic Monitoring of Service Users is in place in a number of key information systems – Child Health System, PAS, SOS CARE, SureStart and NIMATS. The Ethnic Monitoring Leaflet for service users has been translated into the top five languages for use across all Trusts. Information for staff in the form of 'Key Tips' has also been circulated. The Guide to Ethnic Monitoring of Services Users in Health and Social Care in Northern Ireland was issued by the Chief Executive of the Health and Social Care Board to all health and social care organisations in March 2016 for implementation where ethnic monitoring data is currently being collected or planned to be introduced on information systems. The use of this new Guide will help to robustly capture critical patient/service user information on existing and emerging Black and Minority Ethnic communities using health and

social care services.

Staff Training (Model Equality Scheme Chapter 5)

- 24** Please report on the activities from the training plan/programme (section 5.4 of the Model Equality Scheme) undertaken during 2015-16, and the extent to which they met the training objectives in the Equality Scheme.

The Trust is committed to the provision of training as a key component of meeting its legislative requirements and a range of training is delivered to ensure that staff are equipped with the necessary knowledge and skills to discharge the S75 equality duties. The Health and Social Care Discovering Diversity E-Learning package now extends to 7 modules and continues to be rolled out to staff. During the reporting period the health sector has commenced work to develop 2 further e-learning diversity modules – one for completion by all staff and a further module specifically tailored for managers. These latest 2 modules will include the good relations duty, human rights and disability equality awareness as well as the S75 equality duties.

Below is a table of attendance at the relevant training programmes delivered during the reporting period. This Equality and Diversity Training is designed to support compliance with the Trust's Equality Scheme. Equality and Diversity Training is mandatory for all staff.

Title of training	No. of participants
Corporate Induction – includes S75, Good Relations and Human Rights	357
Equality and Diversity Training – including e-learning	579
Human Rights Awareness Training	44
Disability Equality Training	54
Reasonable Adjustments and Supporting Carers Training	36
Total	1070

- 25** Please provide any examples of relevant training shown to have worked well, in that participants have achieved the necessary skills and knowledge to achieve the stated objectives:

During the reporting period the Trust held two cultural awareness workshops to develop an understanding of cultural competence among staff and encourage good practice to make the Trust environment a welcome place for all communities in Northern Ireland. The workshops took participants on a journey of five steps from myths and stereotypes and encouraged them to work towards good practice to make the Trust environment a better and welcome place for all communities in Northern Ireland. The workshops were facilitated by Maciek Bator and Eileen

Chan-Hu of CRAIC NI which stands for Cultivate Respect, Appreciate Inclusion in Communities in Northern Ireland. Maciek is Polish by birth and Northern Irish by choice. Eileen although born in Belfast is of Chinese origin. Feedback from these sessions was very positive and illustrated that training provided by representative organisations and individuals is more meaningful for the participants. Participants also indicated that they found it easier to remember the messages when delivered this way.

During the reporting period the Trust also provided focused training to improve staff awareness of how to support service users and carers who are victims of hate crime. This was provided in partnership with Victim Support, a charity which offers community and court based services to anyone affected by crime, irrespective of when the crime happened, the motivation for the crime or if it has been reported to the police. This provided staff with information regarding other supporting organisations and support to liaise and advocacy with statutory, voluntary and community organisations on behalf of victims.

Public Access to Information and Services (Model Equality Scheme Chapter 6)

26 Please list **any examples** of where monitoring during 2015-16, across all functions, has resulted in action and improvement in relation **to access to information and services**:

As a result of continually assessing the information provided in alternative formats the Trust extended its library of translated material during the reporting period. This is available on Staffnet and the Internet for both staff and service users. For example during 2015/16, the Trust translated appointment letters into a range of languages and the Access to Health and Social Care Booklet has been translated regionally and is available on our website.

Continual monitoring of interpreting services indicates that the Northern Health and Social Care Trust requested 11,613 interpreters during the reporting period. The top five languages requested in the Northern Trust area were Polish, Lithuanian, Portuguese, Romanian and Slovak. The monitoring of interpreting usage ensures the Trust can provide its information in the main languages. It also ensures that the appropriate type of interpreting is used for appointments. For simple, straightforward and short appointments, telephone interpreting is the most appropriate and most cost effective. Face to face interpreters are then available for more complex or sensitive appointments.

Interpreters are professionally trained and bound by confidentiality and provide services 24 hours a day, seven days a week. There are currently 300 interpreters registered with the Northern Ireland Regional Health and Social Care Interpreting Service (NIHSCIS) providing support in 36 different languages. Demand for interpreting continues to increase on an annual basis with over 98,000 requests for interpreters processed during 2015-16 across Northern Ireland.

The new online interpreting booking portal went live on 20th January 2016 and to date more than 10,000 health and social care staff and practitioners have registered to use the system. Training for interpreters during the reporting period included the following.

- End of Life Care and Organ Donations
- Adult Safeguarding awareness training sessions
- Smoking cessation

It is clear from monitoring information that the Trust's population is culturally and linguistically diverse and the Multi-Cultural and Beliefs Handbook continues to be updated to ensure that it is reflective of all our communities. During the reporting period the NI Chaplaincy Service updated the Jewish section and amendments were made to reflect the changes to the interpreter booking process. This newly revised resource is available on the Trust's intranet and now includes information on the Roma community.

The Regional Review of Communication Support Services for People who are Deaf/Hard of Hearing was completed during the reporting period. This Review was carried out as part of the implementation of the Physical and Sensory Disability Strategy and was recommended as a result of the Regulation and Quality Improvement Authority (RQIA) Review of Sensory Rehabilitation Services in 2011. The review is currently out for consultation.

Complaints (Model Equality Scheme Chapter 8)

27 How many complaints **in relation to the Equality Scheme** have been received during 2015-16?

Insert number here:

0

Please provide any details of each complaint raised and outcome:

Section 3: Looking Forward

28 Please indicate when the Equality Scheme is due for review:

The Trust will review its existing Equality Scheme and publically consult on any revisions during 2016/17 in preparation for its revised Scheme and associated Action Based Plan. The review process will take account of further guidance and related research and best practice models. The revised Equality Schemes and new Action Based Plan will be issued in May 2017 following a period of public consultation.

29 Are there areas of the Equality Scheme arrangements (screening/consultation/training) your organisation anticipates will be focused upon in the next reporting period? (*please provide details*)

As stated above this year the Trust will focus on reviewing its existing Equality Scheme and developing a new Action Based Plan. The Trust will publically consult on its revised Scheme and new Action Based Plan during 2016/17 in preparation for being issued in May 2017.

RAMP – the Trust’s reform and modernisation programme sets out the Trust’s approach to effecting change so that people can access excellent, responsive and appropriate services that provide the best possible outcomes. The Trust is committed to engaging with service users, carers and local communities. A deliberative democracy model, combined with a human rights framework, will be used, tested and evaluated to establish an effective method of on-going engagement through locality engagement forums which will be set up in each of our four localities to establish on-going engagement with local people. Partnership is a strong element of the Trust’s vision and it is also a strong element of the culture it wants to create.

The Trust’s partnership role within community planning structures is integral to effective engagement and structures have been established which will support the development of locality based services and engagement in community planning. The Trust recognises that communities are also engaged with other statutory agencies, often regarding the same issues, and will seek to develop opportunities for joint engagement.

The Trust is committed to promoting equality of opportunity and good relations in all aspects of its work. All future plans for service transformation will be subject to Equality Screening and Impact Assessment as required and those assessments will be shared with stakeholders and the general public for views and feedback, to develop measures which will seek to address any inequalities identified.

30 In relation to the advice and services that the Commission offers, what **equality and good relations priorities** are anticipated over the next (2016-17) reporting period? *(please tick any that apply)*

- Employment
- Goods, facilities and services
- Legislative changes
- Organisational changes/ new functions
- Nothing specific, more of the same
- Other (please state):

The Trust is mindful that the Commission has consulted on Equality Scheme consultation arrangements and as a result its advice will remain as it is currently - that consultations should last for a minimum of 12 weeks. The Trust is also aware that the Fresh Start Agreement has reduced the consultation timeframes to ‘a maximum of 8 weeks’ in an attempt to ‘speed up policy

development and decision making processes'. Once this guidance is formally issued to public authorities the Trust will be required to amend its Consultation Scheme. The Trust welcomes ECNI advice on effective consultation and ensuring compliance with S75 and Personal and Public Involvement (PPI) legal requirements.

PART B - Section 49A of the Disability Discrimination Act 1995 (as amended) and Disability Action Plans

1. Number of action measures for this reporting period that have been:

12

Fully achieved

5

Partially achieved

Not achieved

Please note while this figures above indicate that 5 actions have been partially completed this is due the actions being part of ongoing implementation plans.

2. Please outline the following detail on **all actions that have been fully achieved** in the reporting period.

2 (a) Please highlight what **public life measures** have been achieved to encourage disabled people to participate in public life at National, Regional and Local levels:

Level	Public Life Action Measures	Outputs ²	Outcomes / Impact ³
National ⁴			
Regional ⁵	Roll out of Self Directed Support arrangements during reporting period.	The Trusts in partnership with the Health and Social Care Board (HSCB) have introduced a new way of delivering Social Care Services called Self Directed Support. This system will provide more choice and flexibility for eligible individuals enabling	Self-Directed Support enables people to have more flexibility, choice and control over the support they receive, such as, <ul style="list-style-type: none"> • Employing your own personal assistant • or having support staff visit at a time that you choose • Flexible options for short breaks • Accessing community opportunities. <p>Greater participation of service</p>

² **Outputs** – defined as act of producing, amount of something produced over a period, processes undertaken to implement the action measure e.g. Undertook 10 training sessions with 100 people at customer service level.

³ **Outcome / Impact** – what specifically and tangibly has changed in making progress towards the duties? What impact can directly be attributed to taking this action? Indicate the results of undertaking this action e.g. Evaluation indicating a tangible shift in attitudes before and after training.

⁴ **National** : Situations where people can influence policy at a high impact level e.g. Public Appointments

⁴ **Regional**: Situations where people can influence policy decision making at a middle impact level

PART B

		<p>them to tailor a care package that best suits their needs.</p> <p>Trusts facilitated consultation events in each of their areas on Self Directed Support and staff training has commenced on the proposed changes.</p> <p>The roll out of SDS has included ongoing engagement with members of the Trust's Disability Consultation Panel.</p> <p>Establishment of SDS User and Carer Group</p>	<p>users and carers in the ongoing implementation of SDS.</p>
	<p>Regional Procurement Workshop August 2015</p>	<p>Workshop held in Quality Improvement and Innovation Centre, SEHSCT and attended</p>	<p>Feedback was very positive with 100% staff saying that the course was relevant and useful.</p> <p>Increased staff awareness of</p>

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		<p>by over 40 representatives of Trusts, HSCB, BSO and NIAS. Included interactive presentations from DLS and BSO. Participants were given the opportunity to carry out group work in how they would plan and commission a Mental Health Day Care Centre.</p>	<p>procurement issues which will lead to more service user input to procurement process.</p>
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<p>Local⁶</p>	<p>On Monday 14th March 2016 people who use learning disability services from all over the Trust area came together provide feedback on how they can be supported to be involved in the Trust's work.</p>	<p>Interactive workshop attended by over 60 service users replicating best practice models for engaging with adults with a learning disability. Workshop material was in easy read format and activities included visual demonstrations of partnership working.</p>	<p>Increased awareness among staff and service users on good practice models of engaging with adults with a learning disability.</p> <p>Greater participation of adults who use our learning disability services in the delivery of services and training of Trust staff</p> <p>Recommendations included being consulted on wider issues, providing easyread papers prior to events and meetings and providing feedback on what happens next.</p>
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⁶ **Local** : Situations where people can influence policy decision making at lower impact level e.g. one off consultations, local fora.

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	<p>Continued support for Trust's Disability Consultation Panel to ensure meaningful engagement of disabled people and representative groups</p>	<p>Targeted consultations sessions with Disabled Persons/Groups in relation to self-directed support</p>	<p>Greater participation of disabled persons in public life.</p>
	<p>In 2013, members of the Disability Consultation Panel were engaged on various aspects of the new Ballymena Health and Care Centre. As the build progressed throughout 2014, members were asked for advice on interior design and the proposal to use an electronic self "check-in" kiosk.</p>	<p>Valuable and detailed feedback on the layout of waiting areas to include space for wheelchairs and guides/assistants, the colours/contrasts that should be used in public areas and advice on the staircase and tactile markings around this area.</p>	<p>More accessible facility as result of the on-going engagement and project highly commended regionally.</p> <p>Members felt strongly that a receptionist should also be present as well as the self "check-in" kiosk and as a result of their feedback a receptionist post had been secured for the Centre.</p>

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	Members have also co-produced and co-delivered Disability Equality Training to all the staff in the Health and Care Centre.	All front line staff in Health and Care Centre trained in Disability Equality.	Increased staff awareness of the needs of people with a disability when accessing services.
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2(b) What **training action measures** were achieved in this reporting period?

	Training Action Measures	Outputs	Outcome / Impact
1	Delivery of Equality Training Programme Human Rights Screening Master Classes – incorporating the Disability Duties.	On-going training events held during the current reporting period which incorporated the Disability Duties and training on Disability Equality. On-going advice and support provided to policy authors on the application of Disability Duties.	On-going mainstreaming of the Disability Duties into screening and EQIA processes and policy developments.
2	Continued roll out of Discovering Diversity – E-learning Disability Equality module.	Continued uptake of these training modules by Trust staff.	Promotion of positive attitudes toward disabled persons.

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3	Delivery of Disability Equality Training in partnership with Disability Consultation Panel members	This bespoke training course is delivered in partnership with disabled people at regular intervals throughout the year. In the reporting period, 54 people attended this training.	Increased awareness of the Disability Equality.
4	Training on UNCRPD	Incorporated into training sessions alongside existing materials such as Real Network DVD on Human Rights.	Greater staff awareness of the importance of Human Rights across service provision and policy development.
5	Delivery of Human Rights Face to Face Training – incorporating Disability Duties.	Continued uptake of these training modules by Trust staff. In the reporting period, 44 people attended this training	Promotes positive attitudes toward disabled persons. Further raises awareness of the Disability Duties amongst HSC staff. Improves staff/patient experience.
6	Trusts are developing Regional E-Learning Package to incorporate disability equality and human rights based	Provision of modern, efficient online equality training package resulting in improve uptake of training.	Promotes positive attitudes toward disabled persons. Further raises awareness of the Disability Duties amongst HSC staff. Improves staff/patient experience.

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	<p>approach to providing Health and Social Care</p>		
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2(c) What Positive attitudes **action measures** in the area of **Communications** were achieved in this reporting period?

	Communications Action Measures	Outputs	Outcome / Impact
1	<p>Review of Accessible Communication Guidance for HSC staff (completed in February 2015.)</p>	<p>Updated resource detailing models of good practice in effective communication.</p> <p>The Guide assists staff to ensure that people get the support with communication that they required e.g. through the provision of sign language interpreters.</p> <p>This updated resource addresses communication barriers and gives tips and</p>	<p>Greater staff expertise in the provision of effective communication for individuals with a range of disabilities.</p> <p>Trust information more accessible for all users e.g. through the increased use of Easy Read documents.</p> <p>David Galloway, Director RNIB NI and Co-Chair of the Physical and Sensory Disability Strategy Supporting Independent Living, Information &</p>

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		<p>advice to enhance effective communication. The Review involved significant stakeholder input.</p>	<p>Training Workstream, said: “Long after today, this guide will provide a useful reference point to staff across health and social care. It will ensure that people with communication difficulties receive written and oral information in a way that is easily understood. The guide demonstrates how, by making a small effort, and taking the time to communicate better we can make a big difference to people’s lives.”</p>
	<p>Continue participation on the Regional Physical Sensory and Disability Strategy Implementation Group</p>	<p>Action to address inequalities and identify gaps in service provision.</p> <p>Cross Departmental work including HSC Board, PHA, Trusts, DEL, DSD, voluntary organisations and service users.</p>	<p>Good Practice Guidance Checklist to ensure the needs of people with disabilities are considered in the design and development of health promotion programmes/ campaigns.</p> <p>Self-directed support programme launched 2014/15 to make sure individuals and their families have greater control and more flexibility over a personal budget. It includes a number of options for getting support.</p>

			The Accessible Formats policy and guidance has been issued to HSC organisations through the Regional Accessible Formats Steering Group for implementation.
	<p>Alternative Formats</p> <p>Work regionally to develop a comprehensive list of providers of accessible formats for persons with disabilities</p>	<p>List of providers of accessible formats for people with disabilities.</p> <p>Increased amount of Trust information produced in alternative formats e.g. Easy Read, larger print, use of sign language interpreters, subtitles and sign language on the production of DVDs.</p>	<p>Trust information more accessible for all users e.g. through the increased use of Easy Read documents.</p> <p>Improved patient experience and clear guidelines for staff.</p>
2	Roll out of Complaints DVD	Use of alternative formats to facilitate access to the HSC complaints procedure.	Improved accessibility for persons with a disability to access the HSC complaints procedure.

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		Enhance the patient experience via service improvements.	Improvements in patient experience and outcomes for service users and members of the public.
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2 (d) What action measures were achieved to ‘**encourage others**’ to promote the two duties:

	Encourage others Action Measures	Outputs	Outcome / Impact
1	Continued Provision of Reasonable Adjustments for staff.	To ensure managers put in place reasonable adjustments for staff with a disability in a timely fashion.	<p>Promotes a more inclusive workplace. Greater retention of staff within the workplace.</p> <p>Improvements to the health and wellbeing of staff.</p>
2	Roll out of HRPTS Self-Service function in relation to Equality Monitoring which incorporates Disability considerations	Encourage staff to self- declare that they have a disability in accordance with the DDA definition of disability.	<p>More accurate base line data on the prevalence of disability amongst staff.</p> <p>Promotes a more supportive workplace.</p> <p>Provides more detailed data for screening and EQIA processes.</p>

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2 (e) Please outline **any additional action measures** that were fully achieved other than those listed in the tables above:

	Action Measures fully implemented (other than Training and specific public life measures)	Outputs	Outcomes / Impact
1			
2			
3			

3. Please outline what action measures have been partly achieved as follows:

	Action Measures partly achieved	Milestones ⁷ / Outputs	Outcomes/Impacts	Reasons not fully achieved
1				
2				
3				
4				

4. Please outline what action measures have not been achieved and the reasons why?

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	Action Measures not met	Reasons
1		
2		
3		

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5. What **monitoring tools** have been put in place to evaluate the degree to which actions have been effective / develop new opportunities for action?

Action measures in the DAP will be subject to on-going monitoring and review. Progress on the implementation of the DAP is monitored on a 6-8 weekly basis at the Regional Equality Leads meeting. Progress will continue to be recorded in the Trust's Annual S75 Progress Report to the ECNI.

(a) Qualitative:

- PPI Initiatives and Consultation processes and Outcomes
- Feedback from Service Users
- Update of Themed Inequality Audit
- Review of complaints/compliments
- NIHRC Inquiry into Emergency Health Care – 2014/15

(b) Quantitative:

- Performance Indicators in DAP
- Update of Themed Inequality Audit

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Consultations on specific areas e.g. Self Directed Support

HRPTS – Employee Self Service – more accurate and up-to-date staff data on S75 characteristics

2011 Census data – utilisation in Screening and EQIA processes

Screening and EQIA Processes

Quarterly Screening Reports

NIHRC Inquiry into Emergency Health Care – 2014/15

6. As a result of monitoring progress against actions has your organisation either:

- made any **revisions** to your plan during the reporting period or No
- taken any **additional steps** to meet the disability duties which were **not outlined in your original** disability action plan / any other changes?

Please delete: **No**

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If yes please outline below:

	Revised/Additional Action Measures	Performance Indicator	Timescale
1			
2			
3			
4			
5			

7. Do you intend to make any further **revisions to your plan** in light of your organisation's annual review of the plan? If so, please outline proposed changes?



Trust Equality Scheme S75 Action-based Plan

Period 1st May 2014 – 30th April 2017

This document is available in alternative formats on request. Please contact:
Alison Irwin, Head of Equality, Equality Unit, Route Complex, 8e Coleraine road, Ballymoney, BT53 6AE
Telephone: 028 2766 1377 Fax: 028 2766 1209 Mobile Text: 07825667154
E-mail: alison.irwin@northerntrust.hscni.net

Appendix 1 – Section 75 Action Based Plan Update

English: This document can be made available in minority ethnic languages, on request, to meet the needs of those not fluent in English.

Polish: Aby wyjść naprzeciw potrzebom osób, które nie mówią biegle po angielsku, ten Plan Działania może być udostępniony w językach mniejszości etnicznych na życzenie.

Lithuanian: Šis veiksmų Planas pareikalavus gali būti pateiktas tautiniu mažumu kalbomis, kad atitiktų sklandžiai nemokančių anglų kalbos poreikius.

Portuguese: O Plano de Ação está disponível, à pedido, em outras línguas, para atender às necessidades das pessoas que não são fluentes na língua Inglesa.

Tetum: Aksaun Planu ida né,se bele fo ou halo iha liafuan etnika minoria sira nian, nebe bele husu, para bele ajuda ba ema sira nebe la hatene koalia lian Inglés.

Latvian: Šis darbības plāns var būt pieejams mazākumtautību valodās pēc pieprasījuma, lai palīdzētu tiem, kam ir nepietiekamas angļu valodas zināšanas.

Russian: Сейчас план проводимой работы может быть доступен так же на языках этнических меньшинств, по просьбе тех, кто не владеет свободно английским языком.

Czech: 'Aby byly uspokojeny potřeby těch, kteří nemluví plynule anglicky, je možné tento návrh Akčního plánu na požádání poskytnout v jazycích etnických menšin.'

Slovak: Tento Akčný Plán môže byť na požiadanie dostupný v jazykoch národnostných menšín z dôvodu zabezpečenia potrieb tých, ktorí nie sú spôsobilí mu porozumieť v angličtine.

Appendix 1 – Section 75 Action Based Plan Update

Chinese- (Cantonese):這行動計劃草案將會根據需求被翻譯成各種小數族裔語言，去迎合那些英語不流利的人士的需要。

Introduction

The Northern Health and Social Care Trust directly employs approximately 12,000 people and is geographically the largest health and social care trust in Northern Ireland. It operates from approximately 150 locations and provides services to a population of over 460,000 people.

The Equality Commission for Northern Ireland has recommended that all Equality Schemes are accompanied by an Action Based Plan to tackle S75 inequalities and that such Plans should be informed by an inequalities audit.

The Trust's Action Based Plan (Plan) to promote equality of opportunity and good relations is based on the **'functions'** of the Trust and will be implemented through the Framework of the Trust's Equality Scheme. The measures contained within this Plan are linked to the Trust's Corporate Planning Cycle in order to ensure that equality of opportunity and good relations are incorporated and mainstreamed at a strategic level into the business of the Trust and aim to address inequalities in health and social care for all of the S75 categories – men, women, persons with and without a disability, persons with or without dependants, persons of different religious belief, political opinion, racial group, age, marital status or sexual orientation. This second plan is for a three year period 2014 to 2017. This Plan is in addition to the commitments set out in the Trust's Equality Scheme and the Trust's dual responsibilities to promote equality of opportunity and goods relations which are interdependent and complementary to one another.

How the Plan was developed

The content of this Plan has been informed by an ‘Audit of Inequalities’ which was undertaken in order to identify key inequalities for service users and those affected by Trust policies. As part of the Audit of Inequalities the Trust examined an extensive range of information sources including complaints received, customer surveys, monitoring information, research documents, annual reports, corporate plans, statistical information and health needs assessments. In addition, the Trust pre-consulted with a wide range of service users, voluntary groups and organisations, Trade Unions and the Equality Commission for Northern Ireland in order to inform the development of this Plan. Please refer to the Trust’s website (www.northerntrust.hscni.net) for a copy of the Trusts’ recently updated Emerging Themes Document. The Trust has given a commitment in its Action Based Plan to maintain a compendium of literature to ensure its log is relevant and up-to-date to inform on-going and future plans. Please note that this Plan is not the only means by which the Trust is actively seeking to address inequalities in health and social care and should be read in conjunction with other strategies and action plans including:

- Transforming Your Care (TYC)
- Investing for Health Strategy (DHSSPS 2002)
- Bamford Review
- Government Strategy - Our Children and Young People
- 10-year Strategy for Children and Young People in Northern Ireland 2006-16
- A Strategic Action Plan for Health and Wellbeing
- Public and Personal Involvement (PPI) Strategy
- Priorities for Action
- Public Health Agency Annual Commissioning Priorities
- Not Just Health: Strategy for addressing Health Inequalities
- Disability Action Plan

(This list is not exhaustive).

Appendix 1 – Section 75 Action Based Plan Update

Structure of the Plan

The Plan includes a number of action measures which are short-term (1 year), mid-term (2-3 years) and long-term (3+ years), some of which may roll over into subsequent plans. The Plan is structured as follows:

SECTION	THEME	PAGE NO.
Section 1	'Cross Cutting Themes' is framed around 5 recurrent themes from the audit of inequalities as follows:	9
	Theme 1: Measures to Improve Access to Service, Communication and Information – specific action measures	10
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	Theme 3: Measures to Ensure Mainstreaming of Equality, Good Relations, Disability Duties and Human Rights Considerations into Corporate Planning Cycle and Decision Making –specific action measures	22
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NB: For ease of navigation a quick reference matrix has been added to page 6 of this Plan which links each action measure with the S75 group(s). As a result of feedback received during consultation we have indicated which actions are new to the plan or are ongoing/built upon from the previous plan.

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The way forward

Whilst the primary purpose of conducting the audit was to inform this plan, the information from the audit will also be used to develop future policies, as well as shape and inform the design and delivery of services, including informing equality screening and equality impact assessments. (Please refer to the Glossary in Appendix 5 of the Equality Scheme for definitions).

In identifying the measures in this Plan the Trust has also considered what monitoring information it needs to collect in order to evaluate whether the outcomes have been achieved.

Formal consultation

As well as pre consulting with key stakeholders such as the Equality Commission for Northern Ireland, the Trusts formally consulted on their draft Action-Based Plan over a 12 week period commencing 26 March 2014 and ending 19th June 2014. In addition a stakeholder event was hosted on the 26th March 2014 in the Skainos Centre. Comments received were very much welcomed as were suggestions regarding further action measures. All comments received have helped to inform and shape this second Action Based Plan.

Action measures

This Plan includes measures which the Trust initiates, sponsors, participates in, encourages or facilitates. It also includes regional and local measures which the Trust will work in partnership with other Health and Social Care organisations, voluntary and community sector, trade unions etc. to achieve. The Trust has chosen measures and prioritised those that have the greatest impact on equality of opportunity and good relations.

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Priorities in this plan have been informed by the following feedback and priorities.

- Trusts' Regional Pre Consultation Event held in March 2014
- Views and input from the disability sector arising from a 12 week formal consultation event
- HSC Trusts' Emerging Themes Document - Inequalities Audit
- Pre-existing work streams currently being rolled out in the Trust to tackle inequalities within HSC

This Plan is designed to be flexible, adaptable and responsive to changing circumstances and needs and will be reviewed on an ongoing basis and annually via the Trust's Equality Scheme. Progress against the Trust's previous Section 75 Action Plan is documented in the Annual S75 Progress Reports to the ECNI which are available on the Trust's website.

The Action Plan provides a framework for action which sets out the key actions that will be taken forward over the period 2014 – 2017. It identifies a number of actions that draw on best practice in an era of economic pressure. Many of the actions are not resource dependent but are intended to ensure that the promotion of equality of opportunity and good relations in existing programmes of work. Over the course of implementation there may be a requirement to develop more detailed actions to ensure that the Plan remains outcome focused and measurable.

All enquiries should be made to: Alison Irwin, Head of Equality, Equality Unit, Route Complex, 8e Coleraine Road, Ballymoney, BT53 6BP. Telephone: 028 2766 1377; Text Mobile: 07825667154;
Email: alison.irwin@northerntrust.hscni.net

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ACTION BASED PLAN - QUICK REFERENCE GUIDE

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SECTION 1

CROSS CUTTING THEMES

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- Theme 2: Service Monitoring – pages 19-21
- Theme 3: Measures to Ensure Mainstreaming of Equality, Good Relations, Disability Duties and Human Rights Considerations into Corporate Planning Cycle and Decision Making – pages 22-29
- Theme 4: Measures to Promote Participation and Inclusion – pages 30-31
- Theme 5: Procurement – pages 32-33

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Section 1 – Cross Cutting Themes

Theme 1 – Improving Access to Services, Communication and Information

Recurring Theme Inequalities Audit – Language and communication difficulties present as major barriers in accessing Health and Social Care for some S75 Groups

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>Action 1: Action completed</p> <ul style="list-style-type: none"> ▪ Review of guidance and policies on provision of interpreting support ▪ Ensure equality of opportunity for BME people in accessing Health and Social Care services ▪ Reduce language and communication barriers 	<p>Interpreting support</p> <p>To 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).</p> <p>Support will be provided through participation in a regional oversight steering group established to ensure the review findings are taken forward.</p>	<p>Regional Oversight Steering Group established.</p> <p>Develop Action Plan developed</p> <p>Regional Strategy developed.</p> <p>Sustainable, fit for purpose model of interpreting to help facilitate language support for increasing linguistic diversity in HSCNI</p> <p>Programme of</p>	<p>Increase in number of people who access interpreting support including those who do not speak English as a first language for example BME Communities and Migrant Workers and those who speak Irish as a first language.</p> <p>Increased use of telephone interpreting where appropriate to make best use of available resources</p> <p>6 Trusts will have</p>	<p>Year 1</p> <p>Action planned project that will be subject to on-going monitoring</p>	<p>HSCB</p> <p>Equality Leads/ HSC organisations/NIHSCIS</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>Sources: The Health of BME, King’s Fund, London</p> <p>NICEM</p> <p>Ethnicity, Equality and Human Rights: Access to H&SS in NI</p> <p>New to Northern Ireland – A study of the issues faced by migrant, asylum seeking and refugee children in Northern Ireland</p> <p>Review of Interpreting Support for Health and Social Care Appointments (HSCB) 2013</p> <p>European Charter for Regional or Minority Languages</p>	<p>To run “working well with interpreters” training across all Trusts</p> <p>To promote awareness of a Code of Courtesy for the Irish Language through Working Well with Interpreters sessions associated professional codes for interpreters and practitioners which will include guidance on the Code of Courtesy for the Irish Language.</p>	<p>awareness raising to promote guidance.</p> <p>Service Level Agreement for future interpreting service.</p> <p>Extension to the regional register of interpreters to meet demand for minority languages</p> <p>Arrangements in place for telephone and face to face interpreting for the Irish Language.</p>	<p>consistent approach to interpreting and translation support</p>		<p>NIHSCIS/Equality Leads</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
Action 1 – Notes of Attainment					
<p>The Northern Ireland Health and Social Care Interpreting Service (NIHSCIS) was established in 2004. A review was commissioned by the Health and Social Care Board (HSCB) in 2011 - largely due to the increase in demand for interpreting, a need for increased accountability mechanisms and a regional strategic direction. A comprehensive review was conducted by the HSC Leadership Centre and was issued for full public consultation. This recommended a re-profiling of interpreting usage by increasing the ratio of telephone interpreting to face to face interpreting. Another key recommendation was the transfer of management responsibility from Belfast Health and Social Care Trust (BHSCT) to the Business Services Organisation (BSO) in accordance with strategic direction for regional transactional services. In accordance with the review recommendations, the NIHSCIS duly transferred to BSO on 1st October 2014. Workstreams progressed in terms of communication, the production of consistent regional guidelines and the development of a web-based portal for booking an interpreter. 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. 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.</p>					
2015/16 update					
<p>The new web- based IT Portal was successfully deployed to all HSC organisations during the year under-review. The Trust worked with the NIHSCIS to ensure a seamless transition and that there were no interruptions to service provision. Training has been ongoing throughout the deployment phase to ensure that users were in a state of readiness to go online. Effective engagement was crucial to the success of this project, particularly in the development of the service and in ensuring the software met the needs of all. Training and engagement began in June 2015 and implementation took place in January 2016. The introduction of the system has also led to a number of cost savings and has the potential to realise further reduction in spend as follows.</p> <ul style="list-style-type: none"> • Paperless office in NIHSCIS, paperless process for interpreters, paperless process for Finance • Reduction in the risk of fraudulent claims • Reduction in double bookings and cancellation costs <p>Work continues to shift the balance of face to face interpreting to increased usage of telephone interpreting where appropriate for appointments that are less complex and more straightforward.</p>					

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>Action 2: Action completed</p> <ul style="list-style-type: none"> ▪ Support disabled people to better exercise their rights ▪ Support the continuing development of an inclusive and effective range of high quality health and social care services ▪ Develop a more integrated approach to the planning and management of services <p>Source: Access to Public Services for Deaf Sign Language Users (Action on Hearing Loss (RNID))</p>	<p>Physical and Sensory Disability Strategy</p> <p>To continue participation on the Regional Physical Sensory and Disability Strategy Implementation Group to direct, coordinate and manage the project infrastructure and implementation of the Physical and Sensory Disability Strategy and Action Plan.</p>	<p>Framework established which sets out the key actions that will be taken forward until 2015.</p> <p>Project action and implementation plan that includes actions to promote positive health, wellbeing and early intervention and actions to provide better services to support independent lives.</p> <p>Fully accessible communication and training materials, (including where appropriate web-based material) both for those using services and for health service</p>	<p>Improved understanding of future demand for Services by mapping existing services to establish potential gaps in addressing need</p> <p>Improved provision of high-quality advice and information to HSC, voluntary and community sectors to ensure effective decisions regarding the future planning, commissioning, delivery and monitoring of services.</p> <p>Improved collaboration between Trusts and local providers when designing new service models</p> <p>Improved sharing of emerging service-based learning and good practice across NI</p>	<p>Year 2</p> <p>Project subject to on-going monitoring</p> <p>The Disability Strategy Implementation Group is accountable to the DHSSPS for implementation of the Strategy. The Group ensures Summary Progress Reports within each Trust area is provided to the HSC Board on a six-monthly basis.</p> <p>The measures of outcome and improvement achieved are assessed against Key Performance Indicators.</p>	<p>HSCB</p> <p>Equality Leads/ HSC organisations</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
and BDA) Physical and Sensory Disability Strategy and Action Plan 2012 – 2015		professionals and practitioners			

Action 2 – Notes of Attainment

Taking action to address inequalities and identify gaps in service provision is the overall rationale for the Physical and Sensory Disability Strategy 3 Year Action Plan which is now entering its final phase. The Strategy Implementation Group leading the work is cross Departmental and includes HSC Board, PHA, Trusts, DEL, DSD, voluntary organisations and service users.

Actions taken forward to date include the following:

- 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.
- Developing Eyecare Partnership Regional Group has been established under the leadership of Dr J McCall (PHA) and R Curran (HSCB). A Task and Finish Group has been set up to identify and promote preventative messages in eye care.
- A regional deaf blind needs analysis report has been produced with key recommendations.
- The HSCB has established a Project Board and Project Team structure to take forward a Self-directed Support Programme. The promotion of Direct Payments will come under the auspices of the Self-directed Support Programme.
- The Accessible Formats policy and guidance has been issued to HSC organisations through the Regional Accessible Formats Steering Group for implementation.
- The Trusts' Guidance on Making Communication Accessible has been reviewed.
- The A Level 1 E-Learning awareness raising programme for hearing and sight loss has been road tested with Trust Staff Groupings.

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
					<ul style="list-style-type: none"> • The HSCB continues to work with the NI Human Rights Commission to develop a human rights based approach model and associated resources. • An evidence based analysis of a best practice model for emergency short breaks/respice was produced which included a checklist for identification of people at risk in a caring relationship. Trust contingency plans are in place to manage emergency situations. <p>2015/16 update</p> <ul style="list-style-type: none"> • A Good Practice Guidance Checklist has been drafted to ensure the needs of people with disabilities are considered in the design and development of health promotion programmes/ campaigns. • A Task & Finish Group including HSCB, PHA and Action on Hearing Loss (AoHL) was set up to identify and promote preventative messages in relation to hearing loss. • “My Journey My Voice”, a powerful interactive multimedia exhibition which highlights living with a communication disability from a service user’s perspective was launched on 2 November 2015 as a partnership initiative between health and social care and Disability Action. • A regional deafblind needs analysis report was completed and key findings of this review were launched at a workshop in autumn 2015. Specialist deafblind training for HSC staff commenced in September 2015. • The 5 Trusts have adopted a phased approach to the implementation of Self Directed Support (SDS) - by end March 2019 SDS will be mainstreamed across all programmes of care within each • Work has commenced with the Business Services Organisation Procurement and Logistics Service to explore developing a regional contract for the provision of accessible formats services (such as Braille or audio formats). • Making Communication Accessible for All- A Guide for HSC staff has been developed and will be made available in early 2016. • A Level 1 E-Learning Sensory awareness raising programme for hearing and sight loss was piloted with Trust Staff over the summer/autumn period of 2014. The feedback from this pilot will be used to refresh and update the training tool prior to launch in 2016. • Version 4 of NISAT (Northern Ireland Single Assessment Tool) incorporates a Carer’s Support Tool, this is due to be approved by DHSSPS in early 2016. The significant change in this version is the greater requirement for support planning as part of the assessment stage. In addition, the information gathering in the assessment is designed to identify carers at risk. • The volunteer buddy service was introduced within Disability Action (DA) in February 2014. The aim of the service is to assist people who want to learn to travel independently using public and community transport. Information regarding the service has been placed in community magazines and leaflets were distributed throughout the service users within DA’s employment support services and placed on their website. The main aim of advertising this service has been to interest people wanting to be travel buddies and users who want to use the service.

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>Action 3: Action completed</p> <ul style="list-style-type: none"> ▪ Increase staff awareness of cultural needs to eliminate barriers ▪ Ensure equality of opportunity for BME people accessing services ▪ Need for clear up to date information for BME people. <p>Source: New to Northern Ireland - A study of the issues faced by migrant, asylum seeking and refugee children in Northern Ireland, 2010</p> <p>OFMDFM Race Strategy 2005-2010</p>	<p>Health and Social Care Booklet</p> <p>To 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 Northern Ireland</p>	<p>Booklet reviewed and launched</p> <p>Resource available for people moving into Northern Ireland</p>	<p>Improved awareness of health and social care structure and services among people from minority ethnic backgrounds who have moved to Northern Ireland</p> <p>Improved access to services by BME people</p> <p>More timely intervention and better health outcomes</p>	<p>Year 1</p> <p>Monitored through Annual S75 Progress Report to Equality Commission.</p>	<p>Equality Leads/ HSC organisations</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>Action 3 – Notes of Attainment</p> <p>The Health and Social Care booklet has been subject to review by the health and social care family. Progress was delayed due to legislative reform in terms of the Provision of Health Services to Persons Not Ordinarily Resident Regulations (Northern Ireland) 2015. The most recent version has been issued for comments and the booklet has also been shared with the Counter Fraud Unit in the Business Services Organisation for quality assurance.</p> <p>2015/16 update</p> <p>This revised booklet was launched during the current reporting period 2015/16 to coincide with the arrival of the first groups of Syrians. The booklet was translated into the top main ethnic minority languages (Farsi, Russian, Arabic, Portuguese, Bulgarian, Latvian, Romanian, Lithuanian, Somalian, Polish)) and further translations were requested to reflect the diversity of language needs in NI. The booklet was commended as timely and very informative by practitioners who have been working with Syrians and different newly arrived migrants.</p>					
<p>Action 4: Action completed</p> <ul style="list-style-type: none"> ▪ Increase staff awareness that different cultural, faith and belief groups have a variety of views on health, ill-health, birth, dying and death. ▪ Total care 	<p>Spiritual Care Policy</p> <p>To develop a Spiritual Care Policy based on the template provided by the Northern Ireland Healthcare Chaplaincy Service</p>	<p>Policy on how spiritual care services are recognised and provided within hospital and community services.</p>	<p>Increased awareness among health and social care staff of spiritual needs.</p> <p>Improved holistic care for patients.</p> <p>Improved multidisciplinary working among health and social care professionals .</p>	<p>Year 1</p> <p>Monitored through Annual S75 Progress Report to Equality Commission.</p>	<p>Executive Council of the NI Healthcare Chaplains' Association</p> <p>Local Chaplains</p> <p>Trust Equality Leads</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>includes care for the physical, social, psychological and spiritual dimensions of the person.</p> <p>Source : Code of Conduct for HPSS Healthcare Chaplains (UKBHC 2010) (DHSSPSNI (2011))</p> <p>Meeting the Religious and Spiritual Needs of Patients and Staff (DHSSPSNI 2004)</p>					
<p>Action 4 – Notes of Attainment</p> <p>The Trust's Spiritual Care Policy - premised on the NI Healthcare Chaplains Association template - has been approved and disseminated and is available on Trust's policy library.</p>					
<p>Action 5: Action completed</p> <ul style="list-style-type: none"> Access to mental health 	<p>Cultural Competence in Mental Health Services</p> <p>To develop an online toolkit to offer practical</p>	<p>Draft online toolkit developed in partnership with mental health service users and</p>	<p>Increased awareness among mental health practitioners of potential barriers and challenges for minority ethnic</p>	<p>Year 1</p> <p>Monitored through Annual S75 Progress Report to Equality</p>	<p>Belfast Trust in conjunction with regional HSC representatives and Aware Defeat Depression</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>services for minority ethnic communities.</p> <ul style="list-style-type: none"> ▪ Important to consider issues relating to ethnicity and culture- Mental Health and Ethnic minorities in mental health services. <p>University of Birmingham & Northern Birmingham Mental Health Trust February, 1995</p> <p>Research in 2013 conducted by Rooney for Ballymena Inter-ethnic Forum</p>	<p>advice and good practice information for mental health practitioners on optimising their cultural competence</p> <p>To develop a DVD and associated training materials on cultural competence in Mental Health Services</p>	<p>representative organisations.</p> <p>Toolkit piloted with mental health practitioners across the region</p> <p>Online toolkit formally launched as regional resource on PHA website</p>	<p>communities accessing services</p> <p>Improved access to mental health service for increasingly culturally diverse population</p> <p>Better health outcomes in mental health for BME service users</p> <p>Increased confidence among BME service users to access and use mental health services</p>	<p>Commission and project steering group</p>	
<p>Action 5 – Notes of Attainment</p> <p>Northern Ireland now is home to a much greater breadth of cultural diversity - the Census 2011 identified that 1.8 per cent (32,400) of the resident population of Northern Ireland belonged to Black and Minority Ethnic (BME) Groups, more than double the proportion in the 2001 Census. Research in 2013 found that there was a low uptake of mental health services by BME communities. Delivering mental health services can be complex, but this becomes even more difficult when</p>					

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>cultural and linguistic differences exist. In 2013 the Public Health Agency (PHA) provided funding on a regional basis specifically to examine how HSC mental health providers could be supported in the delivery of culturally competent services. Aware Defeat Depression worked in partnership with Health and Social Care Trust representatives to look at how best to support this initiative. This partnership convened a regional conference in June 2013 for mental health specialists across the statutory, community and voluntary sectors. The focus of this event was “Developing Cultural Competence when delivering Mental Health Services to Black and Minority Ethnic Communities”, which looked at the complexities of delivering mental health services in this context. There was general agreement that mental health professionals would welcome the development of an online toolkit for specific advice or good practice in this area.</p> <p>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. The final version of the Mental Health Toolkit – A Guide for Practitioners - has been uploaded to the Trust’s intranet. An accompanying DVD and Train the Trainer session will help improve usage and awareness of the resource and the concept of cultural competency.</p>					
<p>Action 6: Action completed</p> <ul style="list-style-type: none"> Need for enhanced networking structures with BME communities <p>Regional Minority Ethnic Health and Social Wellbeing Steering Group</p>	<p>Partnership working with BME Communities</p> <p>To further promote partnership working with BME organisations through networks such as Stronger Together</p> <p>To help to identify and address health and social care issues affecting BME communities.</p>	<p>Engagement process established with representative individuals and organisations</p> <p>Trust membership of local and regional networks</p> <p>Regional Funding of Network</p>	<p>Improved Networking with key groups</p> <p>Enhanced health and social care services to BME service users</p>	<p>Year 1 and on-going</p> <p>Annual monitoring via ECNI Progress Report</p> <p>Monitoring of Steering Group Action Plan</p>	<p>HSC Equality Leads</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
Action 6 – Notes of Attainment					
<p>The Regional Minority Ethnic Health and Social Well Being Network continue to support the Stronger Together Network. During the reporting year, one 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. 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. In the Northern Trust area Stronger Together supported a workshop to look particularly at the needs of BME Carers. The Northern Trust was also privileged to launch its Good Relations Strategy at Stronger Together's Annual Conference. The NHSCT Good Relation Strategy commits the Trust to continuing its links with the Stronger Together Network to get information about local services, upcoming events and best practice resources and ensure this information is shared with relevant Trust staff and to developing a forum of all similar representative groups in the Trust area that will meet bi annually to share good practice and identify and mitigate any barriers to accessing services.</p>					
2015/16 update					
<p>The NHSCT continues to work in partnership with Stronger Together and facilitated a workshop the 'Stronger Together' regional, annual conference at Belfast Castle entitled 'Achieving Racial Equality– A Shared Responsibility'. The outcome of this racial equality workshop in health was identification of a number of issues for consideration in framing HSC Trust Equality Schemes – Action Based Plans for 2017-202.</p>					
<p>Action 7 – Action completed (Local NHSCT action)</p> <ul style="list-style-type: none"> ▪ Medical staff request for information to ensure delivery of culturally diverse acute hospital services 	<p>Annual multicultural event to promote good relations</p> <p>To work in partnership with ethnic minority communities and Trust staff to hold an annual good relations event to provide examples of good practice</p>	<p>Annual Good Relation Event</p> <p>(Lunchtime multi-cultural event held in Antrim Hospital in June 2014)</p>	<p>Increased staff awareness of good practice in promoting Good Relations</p>	<p>Year 1</p>	<p>NHSCT Equality Unit and Ballymena Inter-Ethnic Forum</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
Action 7 – Notes of Attainment					
<p>To celebrate Community Relations Week in June 2014, the Trust held a multi-cultural event in the restaurant at Antrim Area Hospital. Supported by Ballymena Inter-Ethnic Forum and Antrim Borough Council the aim of the event was to increase staff awareness of the cultural needs of minority ethnic communities receiving hospital care. Participants included representatives from the African and Caribbean, Chinese, Polish, Muslim, Jehovah's Witness and Roma Communities. The restaurant's menu on the day also reflected the multi-cultural theme and included traditional food from some of the countries represented.</p>					
<p>2015/16 update</p>					
<p>The Trust Chairs and facilitates Agencies Supporting Ethnic Minorities (ASEC) formerly known as the Ballymena Inter Agency Support Group (BIAESG) which had its first meeting in Larne during the reporting period. The Group now covers the geographical area of Larne, Carrickfergus and Ballymena. ASEC brings together individuals from the statutory, voluntary and private sectors to explore ways of sharing best practice and identifying new approaches to support ethnic minority communities within the Mid and East Antrim area. The Group will also work in partnership with the Inter-Ethnic Forum (Mid and East Antrim).</p>					
<p>The group's vision is:</p>					
<p><i>'There is a strong network of agencies across Ballymena, Carrickfergus and Larne, working together to ensure that all people from ethnic minorities in Mid & East Antrim are welcomed and integrated into the Community.'</i></p>					
<p>During the reporting period the Trust held two cultural awareness workshops to develop an understanding of cultural competence among staff and encourage good practice to make the Trust environment a welcome place for all communities in Northern Ireland. The workshops took participants on a journey of five steps from myths and stereotypes and encouraged them to work towards good practice to make the Trust environment a better and welcome place for all communities in Northern Ireland. The workshops were facilitated by Maciek Bator and Eileen Chan-Hu of CRAIC NI. The Trust also provided focused training to improve staff awareness of how to support service users and carers who are victims of hate crime. This was provided in partnership with Victim Support, a charity which offers community and court based services to anyone affected by crime, irrespective of when the crime happened, the motivation for the crime or if it has been reported to the police.</p>					

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Section 1 – Cross Cutting Themes

Theme 2 – Service Monitoring

Recurring Theme Inequalities Audit – Absence of an effective monitoring system makes it difficult to plan and respond to the changing need profiles of the population and model services accordingly

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>Action 8 – Action completed</p> <ul style="list-style-type: none"> ▪ A need to improve ethnic monitoring of services <p>NICEM Seminar Report, Ethnic Monitoring in NI (2010)</p> <p>Race Equality in Health and Social Care, A Good Practice Guide. ECNI (2011)</p>	<p>Ethnic Monitoring</p> <p>To continue to roll out ethnic monitoring to key information systems such as NIMATS and PAS</p>	<p>Data on BME service users accessing services</p> <p>Potential gaps in data identified</p> <p>Guide on Ethnic Monitoring of Service Users in HSC (NI) launched</p>	<p>Improved data on BME communities accessing Trust services.</p> <p>Improved monitoring of service provision</p>	<p>Year 1</p> <p>Monitored through ethnic monitoring returns</p>	<p>DHSSPS HSCB, HSC Trusts</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
Racial Equality Policy Draft Priorities and Recommendations ECNI (2013					
Action 8 – Notes of Attainment					
<p>Ethnic monitoring of service users is in place in a number of key information systems – Child Health System, PAS, SOS CARE, SureStart and NIMATS. An audit of progress on the implementation of each of these systems is planned for July / August 2015. Information for staff in the form of, 'Key Tips for Staff' has also been circulated and is available on the Trust's intranet. Specific training has 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 Equality Unit. Ethnic monitoring of staff continues to be collated by the Trusts and this has been enhanced by HRPTS Self-Service functions.</p>					
2015/16 update					
<p>The Guide to Ethnic Monitoring of Services Users in HSC in NI along with supporting materials was issued by the Chief Executive of the HSCB to all HSC Organisations in March 2016 for implementation where ethnic monitoring data is currently being collected or planned to be introduced on information systems. The use of this new Guide will help HSC commissioners/providers to robustly capture critical patient/service user information on existing and emerging BME communities using HSC services.</p>					
Action 9 – Action completed	Complaints DVD	Resource available for the Deaf and Hard of Hearing Community	Increased awareness among the deaf community of the complaints procedure and how to access the procedure	Year 1 and ongoing	HSC Trust Equality Lead
<ul style="list-style-type: none"> Low number of complaints received from deaf and hard of hearing 	To promote the Regional Complaints DVD: 'Complaints Procedure: A guide on How to Complain'	Resource available on HSC Trust websites		Monitoring of the number of Complaints received	Complaints/ Patients Liaison Manager
		Promotion of availability	Improved access for the	Reporting through S75	RNID

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
community Source: Action on Hearing Loss 2013		of DVD through training and awareness events Alternate formats available for the submissions of, and response to, complaints Evaluation of the effectiveness of the DVD	deaf community to the complaints procedure	Annual Progress report Service User Feedback	
Action 9 – Notes of Attainment					
<p>A DVD has been produced and promoted regionally. The DVD is now available on all Trust websites. NB: There has been no notable increase in volume of complaints from service users who have gained a better understanding of the complaints process through the DVD. Also no quantifiable increase in number of complaints from the deaf and hard of hearing community who have learnt about complaints process through the DVD. Work continues to identify any potential regional increase of complaints from the deaf community. Also further feedback is to be gathered from Survey Monkey with regard to finding data on how patients discovered how to make a complaint e.g. through the website.</p>					

Appendix 1 – Section 75 Action Based Plan Update

Section 1 – Cross Cutting Themes

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

Recurring Theme Inequalities Audit – Absence of mainstreaming makes it difficult to ensure an equality perspective is incorporated in all policies at all levels and at all stage by those normally involved in policy

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>Action 10 – Action completed</p> <ul style="list-style-type: none"> User friendly version of Annual Progress Report will be accessed by wider audience <p>Source: Review of Equality Scheme (ECNI)</p>	<p>Annual Progress Report</p> <p>To work with the ECNI to develop a user friendly and accessible Annual Progress Report template</p>	<p>Annual Progress Report available in accessible user friendly format</p> <p>All those on Trust Consultee databases to receive copy of report in user friendly format</p>	<p>Increased awareness among stakeholders of the equality work taken forward by Health and Social Care Trusts</p>	<p>Year 1</p> <p>Monitored through Annual S75 Progress Report to Equality Commission.</p>	<p>HSC Trust Equality Leads in conjunction with ECNI</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
Action 10 – Notes of Attainment					
<p>An Equality Commission Northern Ireland (ECNI) led event was held on the 11 March 2015 which included a presentation on the new screening template. A follow up meeting was held on 21 April 2015 with the ECNI and Trusts to discuss in more detail the new template and expectations in going forward. The new template has been in use from reporting period 2014/15. The NHSCT produces an annual user friendly “newsletter” to disseminate to consultees with the S75 Annual Progress Report.</p>					
<p>Action 11 – Action completed</p> <ul style="list-style-type: none"> Current template not appropriate for many clinical policies <p>Source: Review of Equality Scheme (ECNI)</p>	<p>Screening Template</p> <p>To review the HSC Trust screening template and associated guidance</p>	<p>Easy to follow screening template and guidance that meets the needs of health and social care</p> <p>All Trust policy makers will use easy to follow screening template and guidance</p>	<p>Increased satisfaction among policy leads and decision makers when using template and guidance.</p>	<p>Year 1</p> <p>Monitored through feedback from staff using template and guidance and Annual S75 Progress Report to Equality Commission</p>	<p>HSC Trust Equality Leads in conjunction with ECNI</p>
Action 11 – Notes of Attainment					
<p>A review of the equality screening template has been carried out and a new template has been piloted. Feedback to date has proved positive. Trusts will review the outcome from the pilot along with the Commission’s views/advice before rolling the revised template out across the wider organisation.</p>					

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
2015/16 update					
<p>The Trust is mindful that the ECNI has consulted on Equality Scheme consultation arrangements and as a result its advice will remain as it is currently - that consultations should last for a minimum of 12 weeks. The Trust is also aware that the Fresh Start Agreement has reduced the consultation timeframes to 'a maximum of 8 weeks' in an attempt to 'speed up policy development and decision making processes'. Once this guidance is formally issued to public authorities the Trust will be required to amend its Consultation Scheme. The Trust welcomes ECNI advice on effective consultation and ensuring compliance with S75 and Personal and Public Involvement (PPI) legal requirements.</p>					
<p>Action 12 – Action on-going</p> <ul style="list-style-type: none"> Good practice guidance required to ensure consistent and effective approach <p>Source: Review of Equality Scheme (ECNI)</p>	<p>Equality Impact Assessment Template</p> <p>To work with the ECNI to develop best practice Equality Impact Assessment Template</p>	<p>Easy to follow EQIA template that meets the needs of health and social care</p> <p>All Trust policy makers will use easy to follow EQIA template</p> <p>Consistent EQIA format adopted by all Trusts</p>	<p>Increased satisfaction among policy leads and decision makers when completing EQIAs.</p>	<p>Year 1</p> <p>Monitored through feedback from staff using template and guidance and Annual S75 Progress Report to Equality</p>	<p>HSC Trust Equality Leads in conjunction with ECNI</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>Action 12 – Notes of Attainment</p> <p>Specialist support is provided to project leads when an Equality Impact Assessment (EQIA) is required. Work will continue with ECNI to ensure policy leads are supported and to ensure consistency across the Health and Social Care sector.</p> <p>2015/16 update</p> <p>HSC Trusts are committed to working with the ECNI to develop best practice in relation to EQIAs. Trusts have met with consultants engaged by the ECNI to undertake research into the experiences of public authorities in relation to S75 processes - notably equality screening and Equality Impact Assessment processes. Trusts participated fully in the research and the discussion and look forward to the findings from this research which will inform further policy and practice.</p>					
<p>Action 13 – Action completed</p> <ul style="list-style-type: none"> ▪ Multi-Identity Issues <p>ECNI</p> <p>Rainbow (2014)</p>	<p>Multi-Identity</p> <p>To ensure that key multi-identity issues are incorporated into Policy and Service Developments</p>	<p>Update Screening and EQIA Tools to ensure they are sufficiently sensitive to multi identity issues</p> <p>Screening and EQIA process to include assessment of impact in relation to multi identity</p>	<p>Increased awareness among staff of multi-identity issues and their impact on access to Health and Social Care.</p> <p>Improved screening and EQIA processes</p>	<p>Year 1 and ongoing</p> <p>Monitored through quarterly screening reports and S75 Annual Progress Report to Equality Commission</p>	<p>HSC Equality Leads</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>Action 13 – Notes of Attainment</p> <p>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 are also to be included in the revised guidelines.</p> <p>2015/16 update</p> <p>The Trust will undertake a review of their existing Equality Scheme and related processes namely Equality Screening and EQIA processes during 2016/17 primarily to take account of further guidance and outcome based related research commissioned by the ECNI. Revised Equality Scheme and S75 Action Based Plan will be issued in May 2017 following a period of public consultation.</p>					
<p>Action 14 – Action completed</p> <ul style="list-style-type: none"> ▪ Need for greater awareness amongst Health and Social Care staff of Section 75 issues. ▪ Need to further mainstream Section 75 considerations into the corporate planning cycle and core 	<p>S75 Training</p> <p>To review S75 Training Programme so that it reflects any of the changes made to the screening and EQIA templates</p>	<p>Updated training programme reflective of new screening and EQIA resources</p> <p>All Trust policy makers trained in new screening and EQIA resources</p>	<p>Increased awareness policy leads and decision makers on new templates for screening and EQIA.</p>	<p>Year 1</p> <p>Monitored through feedback from staff using template and guidance and Annual S75 Progress Report to Equality Commission</p>	<p>HSC Trust Equality Leads</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>business of the Trust</p> <p>Source: S75, NI Act 1998 Five Year Effectiveness Review</p> <p>Review of Equality Scheme (ECNI)</p>					
<p>Action 14 – Notes of Attainment</p> <p>The Trust is committed to the provision of training as a key component of meeting its legislative requirements. The Trust delivers a range of training to ensure that staff are equipped with the necessary Section 75 knowledge and expertise to work effectively with each other and to ensure everyone can access our services. Uptake of training is reported annually in Trust's ECNI Progress Report. All new staff are required to attend a half day 'Welcome Session' as soon as possible after they commence employment in the Trust. Participants are given information on the Trust's e-learning Corporate Induction Programme, which is mandatory for them to access and complete within their first three months of employment. This includes Equality, Disability and Human Rights awareness training. To make sure that our staff are trained by experts, our disability equality training is delivered in partnership with members of our Disability Consultation Panel who have a range of disabilities. The Health and Social Care Discovering Diversity E-Learning Package, which now extends to 7 modules, module, continues to be rolled out to staff who have access to computers. Specialist Master Classes on Section 75 screening along with policy development resource packs continue to be delivered to new policy makers across the Trust to ensure they have the necessary skills to effectively screen policies and decisions.</p> <p>2015/16 update</p> <p>Feedback from the screening pilot and the Commission's own related research – see action 11 above - will further shape training resources and materials.</p> <ul style="list-style-type: none"> During the reporting period the health sector has commenced work to develop 2 further e-learning diversity modules – one for completion by all staff and a further module specifically tailored for managers. The 2 modules will provide an accessible and more condensed training package for staff and managers. 					

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>Action 15 – Action competed</p> <ul style="list-style-type: none"> Information required to allow service providers to identify key inequalities and investigate their causes <p>Source: Guide to the Statutory Duties (ECNI) 2005</p>	<p>Emerging Themes</p> <p>To annually review and maintain the ‘Emerging Themes’ compendium of research literature to inform current and future action based plans.</p>	<p>Up-to-date and reliable evidence and staff resource on emerging themes in relation to key inequalities experienced by the nine equality categories.</p> <p>Collated data themed and disaggregated by the Section 75 categories</p> <p>Evidence available for future screening and equality impact assessments</p> <p>Resource for both health and social care staff and representative organisations.</p> <p>Relevant and evidence based action based plan.</p>	<p>Improved screening and EQIA processes</p> <p>Better assessment of impact on S75 equality categories when planning and reviewing services</p>	<p>Ongoing</p> <p>Monitored through Annual S75 Progress Report to Equality Commission</p>	<p>HSC Trust Equality Leads</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>Action 15 – Notes of Attainment</p> <p>The Emerging Themes document was updated in July 2015 and is available on all Trust websites and intranets.</p> <p>2015/16 update</p> <p>Trusts updated Emerging Themes document in partnership with DHSSPS and will continue to review on an ongoing basis</p>					
<p>Action 16 – Action completed</p> <ul style="list-style-type: none"> Relevant up to date information on consultees for engagement and consultation processes. <p>Source: Guide to the Statutory Duties (ECNI 2005)</p>	<p>Maintenance of Regional Consultation List</p> <p>To annually review regional list of consultees</p>	<p>Up to date, relevant list of consultees</p> <p>Revalidated Consultee database</p>	<p>More effective and targeted consultation</p> <p>Increase in consultation response rate</p>	<p>Annually</p> <p>Monitored through Annual S75 Progress Report to Equality Commission</p>	<p>HSC Trust Equality Leads</p>
<p>Action 16 – Notes of Attainment</p> <p>The Regional Consultee List is updated on an ongoing basis in the light of information received from organisations with regard to changes to personnel and contact details. In September 2015 an audit will be carried out to ensure that regional consultees are being contacted in the way that best suits them e.g. email, letter, telephone etc. Work will also be carried out to ensure that local consultees, who are specific and relevant to individual Trusts, are identified and their contact details are updated.</p>					

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>2015/16 update</p> <p>The list was updated again in May 2015 to support the EQIA on ‘Proposal for the Future of Statutory Residential Care for Older People’. This task is on-going i.e. reviewed annually.</p>					
<p>Action 17 – Action completed (Local NHSCT action)</p> <ul style="list-style-type: none"> Public Authorities have tended to focus on the equality of opportunity duty rather than the good relations duty when addressing their commitment to Section 75 <p>Source: ECNI Review of Effectiveness of Section 75 (2007)</p> <p>NHSCT Equality Scheme</p>	<p>Good Relations Strategy</p> <p>To carry out an internal and external audit of good relations across the NHSCT area</p> <p>To develop a Good Relations Strategy and Action Plan</p>	<p>Audit completed and issues relating to good relations identified</p> <p>Draft Strategy and action plan for implementation</p>	<p>Increased visibility and confidence in Trust’s commitment to promoting good relations</p> <p>Improved awareness of requirement to promote good relations among staff</p> <p>Better engagement with representative organisations and communities</p>	<p>Year 1 - Strategy drafted for consultation by end June 2014</p> <p>Monitored through S75 Good Relations Steering Group and Annual Progress Report to Equality Commission</p>	<p>NHSCT Equality Unit and Good Relations Steering Group</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
Action 17 – Notes of Attainment					
<p>During 2013/14 the Trust developed a draft Good Relations Strategy to reflect our commitment to promoting respect, equity and trust in the delivery of our services and employment of our staff. The Trust established a Good Relations Steering Group to provide advice and guidance in the development of the Trust's Good Relations Strategy and Action Plan. Membership of the group included nominated Directorate representatives, Union representation, Ballymena Borough Council, Community Relations Council, Ballymena Inter Ethnic Forum and the Trust's Chaplaincy Service. The Steering Group met regularly during the development of the Strategy and has been responsible for overseeing tasks and timescales. An extensive literature search was completed to gather information on good relations initiatives already taken forward by the Trust and examples of good practice for consideration. To ensure that the Strategy reflected the needs and views of Trust staff Survey Monkey was used to gather feedback. The survey went live on the 10 March 2014 and was completed confidentially by 901 members of staff. To gather feedback from service users a questionnaire was sent to members of our current User Panels. On 9 June 2014 the Trust met with a number of community and voluntary organisations and representatives which provided an opportunity for people from a range of communities to share their knowledge, experiences and ideas. Having carried out this work a number of key themes and areas for action were identified. The draft Strategy was consulted on for 16 weeks from 1 July 2014 until 21 October 2014 and was approved by Trust Board in December 2014. The Good Relations Strategy was launched at the Stronger Together Network's Annual Conference February 2015.</p>					
2015/16 update					
<ul style="list-style-type: none"> • Posters promoting the Trust's Good Relations Statement have been disseminated to all Trust facilities and services. • Establishment of Agencies Supporting Ethnic Minorities (ASEC) formerly known as the Ballymena Inter Agency Support Group (BIAESG). The group now covers the geographical area of Larne, Carrickfergus and Ballymena. ASEC brings together individuals from the statutory, voluntary and private sectors to explore ways of sharing best practice and identifying new approaches to support ethnic minority communities. Provision of cultural awareness training to develop an understanding of cultural competence among staff and encourage good practice to make the Trust environment a welcome place for all communities in Northern Ireland. • Promoting staff awareness of how to support service users and carers who are victims of hate crimes in partnership with Victim Support NI. 					

Appendix 1 – Section 75 Action Based Plan Update

Section 1 – Cross Cutting Themes

Theme 4 – Promoting Participation and Inclusion

Recurring Theme Inequalities Audit – Lack of Involvement of S75 groups in planning and decision making

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>Action 18 – Action completed</p> <ul style="list-style-type: none"> Commitment to ensure PPI is integral to decision making <p>HSC Trusts Consultation Schemes</p> <p>Effective Stakeholder Engagement – Good Practice Guidelines (Policy) Champions</p>	<p>E-Learning PPI toolkit</p> <p>To work with Trust PPI Leads on the development, launch and dissemination of a multifaceted PPI awareness raising & Training Programme for HSC in partnership with Public Health Agency (PHA)</p>	<p>Multifaceted PPI awareness raising and training programme ranging from Introductory level 1 to level 4 specialised PPI training (modular and eLearning mix)</p>	<p>Increased awareness raising of PPI</p> <p>Greater understanding of values, principles and methods of effective PPI</p> <p>Greater understanding of the needs of Section 75 groups and how to effectively engage with hard to reach groups Will lead to an increase in S75 groups' involvement in planning and decision making</p>	<p>Year 2</p> <p>Uptake monitored through E-Learning monitoring process</p>	<p>PHA</p> <p>Trust PPI Leads</p> <p>HSC Trust Equality Leads</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
Network) Health and Social Services (Reform) Northern Ireland Act 2009					
<p>Action 18 – Notes of Attainment</p> <p>The new Personal and Public Involvement Standards: “Setting the Standards” was formally launched on 4th March 2015. These new five standards, which were regionally agreed, set out the new PPI standards which HSC Trusts will implement as a model of good practice for developing PPI approaches. 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 will be rolled out locally. This will be supported by the development of a PPI e-learning programme to complement the face to face training tools.</p> <p>2015/16 update</p> <p>During the year under review Trusts provided informed input to the revised Consultation Scheme. A regional workshop was held on 15th March 2016 to agree a consistent approach in relation to consultation arrangements for proposals that are considered to be major and contentious; proposals that are not major or contentious; and issues that require community engagement only.</p>					

Appendix 1 – Section 75 Action Based Plan Update

Section 1 – Cross Cutting Themes

Theme 5 – Procurement

Recurring Theme Inequalities Audit – Those organisations that Public Authorities contract with should be required to have equality policies and procedures in place in relation to the delivery of their services.

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>Action 19 – Ongoing Action</p> <ul style="list-style-type: none"> Need for consistent compliance with ECNI guidance Equality of Opportunity and Sustainable Development in Public Sector Procurement <p>Guide to the Statutory Duties 2005</p> <p>Public Procurement and Human Rights in</p>	<p>Procurement – Section 75 Duties</p> <p>To continue with on-going training delivered by BSO to HSC staff involved in contracting and commissioning function to ensure S75 duties are embedded in the procurement processes and to promote an increased awareness of Human Rights in procurement</p>	<p>Training sessions delivered to relevant HSC staff</p> <p>Evidence of S75 considerations in HSC procurement processes</p>	<p>Increased awareness among relevant HSC staff of S75, Disability Duties and Human Rights obligations in procurement process</p>	<p>Year 2</p> <p>Uptake monitored through training programme</p>	<p>BSO</p> <p>HSC Trust Equality Leads</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
NI (NIHRC) Equality of Opportunity and Sustainable Development in Public Sector Procurement 2008					
<p>Action 19 – Notes of Attainment: Action Ongoing</p> <p>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.</p> <p>2015/16 update</p> <p>A regional workshop took place on the 14th August 2015 focusing on Equality and Human Rights Issues in relation to Procurement, Commissioning and Planning processes. Good practice examples and legal implications were discussed at the event. Invitations were extended to all HSC organisations. Staff from contracts and finance management functions attended. June Turkington, Directorate of Legal Services, BSO and Orla Donaghy, Procurement and Logistics Services (PaLs) presented at the event.</p>					

SECTION 2

Service Related Issues

Measures to promote equality of access to Health and Social Care Services

Appendix 1 – Section 75 Action Based Plan Update

Section 2 – Service Related Issues

Recurring Theme Inequalities Audit – Measures to promote equality of access to health and social care services

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>Action 20 – Action completed</p> <ul style="list-style-type: none"> ▪ Tackle prejudicial attitudes and behaviour towards LGBT individuals ▪ Promote positive attitudes towards LGBT ▪ Raise Awareness of the rights of 	<p>Supporting LGBT communities</p> <p>To continue to support the Health and Social Care LGBT Staff Forum</p> <p>To develop training and awareness raising sessions for staff with regard to LGBT Adults in residential homes</p> <p>To raise awareness of issues facing LGBT with multiple identities and tackle barriers experiences</p>	<p>Promotion of the Staff Forum through display of Posters and Information on Trust Intranet, Wards and Facility Notice Boards</p> <p>Training programme for staff working with clients in residential homes</p> <p>Multiple identity issues incorporated into equality and diversity training</p> <p>Workshops organised and</p>	<p>Increased profile of, and attendance at Staff Forum</p> <p>Increased staff awareness and good practice adopted</p> <p>Increased staff understanding of issues faced and promotion of inclusive culture</p> <p>Increased understanding of appropriate terminology and barriers experienced</p> <p>Raised awareness among staff of issues affecting lesbian women</p>	<p>Year 1 – 3 On-going</p> <p>Monitored through S75 Annual Progress Report, training feedback and service user feedback</p>	<p>HSC Trust Equality Leads, PHA and Rainbow</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>LGBT</p> <p>Promoting Sexual Orientation Equality ECNI October 2013</p> <p>Lesbian, Gay, Bisexual or Transgender Planning for Later Life AGE UK July 2013</p> <p>Older People in Care Homes: Sex, Sexuality and Intimate Relationships RCN 2011</p>	<p>To work with PHA to promote Training workshops for Healthcare Professionals</p> <p>To develop a Training Seminar to address the needs of Lesbian women with regard to access to maternity and Fertility services</p>	<p>regionally advertised</p> <p>Training seminar held on needs of lesbian women with regard to accessing to maternity and Fertility services</p>	<p>accessing maternity services.</p>		
<p>Action 20 – Notes of Attainment</p> <p>The Trust continues to support the Lesbian, Gay, Bisexual and Transgender (LGB&T) Forum and promotes it on Staffnet and social media. HSC organisations have agreed to progress toward LGBT - 'I am an Ally!' - Diversity Champions status in partnership with BSO, PHA and other HSC organisations and The Rainbow Project. This initiative has been discussed and agreed at a regional wide Diversity Workshop.</p>					

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>Action 21 – Action completed</p> <ul style="list-style-type: none"> ▪ For persons in need who are destitute and have no or limited recourse to public funds. • Current constraints include lack of Regional Guidance and Funding implications. <p>Source: No Home From Home Research (NIHRC)</p> <p>Policy Briefing Accessing Healthcare for Migrants in NI: Problems and Solutions, Law Centre (NI) (2013)</p>	<p>No Recourse to Public Funds</p> <p>To ensure that decisions in this area are compliant with key legislative requirements e.g. Human Rights Act.</p>	<p>Guidance updated for staff to use during decision making</p> <p>Staff informed of Guidance</p>	<p>Increased staff awareness of key considerations when determining if treatment or support can be provided</p>	<p>Year 2</p> <p>Monitored via BSO, Counter Fraud Unit and Trust Internal Monitoring Arrangements</p>	<p>HSC Trusts, BSO, DHSSPS, HSCB</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
DHSSPS Consultation on 2005 Provision for services to Persons not ordinarily resident in NI (2013)					
<p>Action 21 – Notes of Attainment</p> <p>The Counter Fraud and Probity Services has set up a Pilot in 2 Trust areas, the West and South, and the outcome of these pilots will be evaluated to assist with the next steps to be taken across Health and Social Care. The Pilot involves a process where patients who present without GP details or a Health and Care number are asked to provide proof of residency.</p> <p>On 28 May 2015 an event entitled “Domestic Abuse and Women with No Recourse to Public Funds: Where Human Rights Do Not Reach” was held to celebrate Africa Week by raising awareness on issues affecting Black Minority and Ethnic Women in Northern Ireland. It brought together Women’s groupspolicy-makers, victims of domestic violence, service providers, health practitioners and other public bodies to share information and establish a collaborative approach to addressing the issue of “Domestic Abuse and women with No Recourse to Public Funds” in Northern Ireland and its impact on the protection of children and vulnerable adults. All Trusts will consider the outcome from this event to ensure compliance with best practice.</p> <p>The Stronger Together Network held 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 included what ‘No Recourse to Public Funds” means and who it applies to, understanding the legislation and short, medium and long term support solutions. The outcomes from this event will be considered and during 2015/16 Trust Equality Leads will consider how Trusts can work in partnership with the voluntary and community sector.</p> <p>2015/16 update</p> <p>On 28 May an event entitled “Domestic Abuse and Women with No Recourse to Public Funds: Where Human Rights Do Not Reach” was held to celebrate Africa Week by raising awareness on issues affecting Black Minority and Ethnic Women in Northern Ireland. It brought together Women’s groups, NGO’s, policy-makers, victims of domestic violence, service providers, health practitioners and other public bodies to share information and establish a collaborative approach to addressing the issue of “Domestic Abuse and Women with no Recourse to Public Funds” in Northern Ireland as it impacts on the protection of children and vulnerable adults. Trusts will consider the outcome from this event to ensure compliance with best practice.</p>					

Appendix 1 – Section 75 Action Based Plan Update

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>Action 22 – Action completed</p> <ul style="list-style-type: none"> Need for culturally sensitive services <p>NICEM Report Black and Minority Health and Wellbeing Development Project September 2006.</p> <p>Out of the Shadows Report – An action research report into families and racism and exclusion in NI.</p> <p>Race Equality Audit for NI – NICEM</p> <p>New to NI – A study of issues faced by migrant, asylum seeking and refugee child in NI</p>	<p>Multi-cultural and beliefs handbook</p> <p>To maintain the Multi-cultural and Beliefs Hand Book to ensure it reflects current migration trends.</p>	<p>Updated Multi-cultural and beliefs handbook available for staff</p> <p>Provision of culturally sensitive services</p> <p>BME service users treated with dignity and respect regardless of their ethnic background</p>	<p>Improved patient experience for BME communities</p> <p>Increased awareness among staff of beliefs, needs and preferences</p>	<p>Year 1</p> <p>Monitored through PPI/Patient Surveys/Complaints monitoring</p>	<p>Southern Trust on behalf of all HSC Trusts</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>Action 22 – Notes of Attainment</p> <p>The Multi-Cultural and Beliefs Handbook Resource was updated to include information on the Roma Community in October 2014 and the final version was circulated to Equality Leads in– April 2015 Action completed but subject to on-going review to reflect migration trends.</p> <p>2015/16 update</p> <p>The Multi-Cultural and Beliefs Handbook was updated during the current reporting period to reflect recent changes to the provision of the interpreting service and to reflect the growth in diversity of the NI population profile. This newly revised resource is available on the Trust's intranet and now includes information on the Roma community. Other notable amended included updates provided by NI Chaplaincy Service to the Jewish section and amendments necessitated by the deployment of the new IT web based Portal – for the booking of interpreters – section 6 of this resource refers. This action measure is subject to on-going review to reflect migration trends.</p>					
<p>Action 23 – Action to commence</p> <ul style="list-style-type: none"> Need to ensure Trusts prepared for extension of Age Discrimination Regulations <p>Source: Old Habits Die Hard – Tackling Age Discrimination in Health and Social Care</p>	<p>Age Discrimination Regulations</p> <p>To 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</p>	<p>Workshop with service areas to identify issues</p> <p>Actions developed to ensure Trusts are prepared for extension of regulations</p> <p>Good practice adopted across service areas</p>	<p>Increased staff awareness of legislative requirement</p>	<p>Year 3 (dependent on legislation enactment)</p> <p>Monitored through action plan and S75 Annual Progress Report</p>	<p>Service Leads</p> <p>HSC Trust Equality Leads</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
ECNI - Awareness of Age Regulations 2006 and Attitudes of the General Public in Northern Ireland towards Age Related Issues					
<p>Action 23 – Notes of Attainment: Action to Commence</p> <p>Legislation has not been introduced as yet – however note announcement of Junior Ministers. Junior Ministers Jennifer McCann and Jonathan Bell made an announcement on the 19 February 2015 regarding proposals on the way forward for new age discrimination legislation on the provision of goods, facilities and services. The Programme for Government contains a commitment to extend legislation to give legal protection from unfair age discrimination by those providing goods, facilities and services. The proposed legislation will apply to people aged 16 and over. Junior Minister McCann said “The aim of the new legislation is to protect all people aged 16 and over from discrimination because of their age when accessing goods, facilities and services. This will put age discrimination outside work on a similar footing to discrimination law in employment. It sends out the clear message that ageist attitudes and practices are as unacceptable in service provision as in the workplace.” Junior Minister Bell commented: “We are eager to progress this Programme for Government commitment as soon as possible. It will give individuals confidence to know their rights to fair treatment, and provide legal clarity for service providers. “The next step will be to bring forward a consultation document in the near future, setting out our proposals. Following consultation, we will then consider all the options available to us for bringing this legislation before the Assembly.” In certain circumstances it is appropriate to treat people differently because of age, such as the prohibition on the sale of alcohol to people under 18. The proposals will not affect other legislation which currently imposes statutory age limits.</p> <p>2015/16 update</p> <p>Trust awaits the GFS Age Regulations and will work collectively for reasons of thoroughness/robustness i.e. involving the whole sector – similar to the aforementioned GB approach - if only to rule out quickly where the new Regulations are unlikely to have an impact and to focus our collective efforts on areas of greatest risk/impact. Advice could be sought from DLS re the robustness of any <i>objective justification test</i> necessary for the continued use of age or age related criteria – preferably in advance of the legislation being enacted. There may also be merit in engaging/tapping into the expertise of the <i>Age Sector</i> given their extensive knowledge and expertise in this area and in order to anticipate possible areas of challenge and remedial action.</p>					

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>Action 24 – Action completed</p> <ul style="list-style-type: none"> Support for Black and Minority Ethnic (BME) Carers <p>Source: Diversity in Caring. Towards Equality for Carers, Yeandle, Bennett, Buckner, Fry and Price, University of Leeds</p>	<p>BME Carers</p> <p>To develop ways of identifying and supporting BME carers by working in partnership with health and social care organizations, community and voluntary groups and others seeking to improve the health and social wellbeing of BME carers across Northern Ireland</p>	<p>Initiatives identified to reach out to BME carers, developing initiatives to support BME carers, and. At a practical level this work includes</p> <p>Leaflet translated into 9 languages</p> <p>Training event for health and social care staff to be run during Carers Week 2014.</p> <p>Good practice shared across organisations working with BME carers.</p>	<p>Raised profile of the issues affecting BME carers in NI</p> <p>Increase in staff awareness of the needs of BME carers</p> <p>Improved information available for BME carers</p>	<p>Year 1</p> <p>Monitored through identifying and supporting BME carers group</p>	<p>PHA</p> <p>Trust Carers Co-ordinators</p> <p>HSC Trust Equality Leads</p>
<p>Action 24 – Notes of Attainment</p> <p>Information for Carers has been translated and is available on Trust websites – Suzanne – have made a few tweaks below</p> <p>Regional Initiatives to support BME carers during 2014 – 2015 included:</p> <ul style="list-style-type: none"> 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. 					

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
		<ul style="list-style-type: none"> • 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: <ul style="list-style-type: none"> ○ The development of 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. ○ 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. ○ A seminar for BME organisations on Carer support. ○ A support event for BME carers. • Funding has been sought by the Trusts' Carers Co-ordinators from PHA to conduct research into BME Carers. This research will help to establish a baseline of BME Carers throughout NI 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 social inclusion for BME Carers and their families. 			
<p>2015/16 update</p> <p>The BME Carers Strategy Group have been involved in a research exercise into the landscape of BME Carers in Northern Ireland which represents a first step towards establishing a Northern Ireland-wide BME Carers Subgroup strategy and plan of action for the coming years. The rationale for the research is to attempt to establish and prioritise future activities for the benefit of the BME carer community across all Trust areas. The Northern Trust has contributed to this by undertaking a scoping exercise across all service in order to identify the number and nationality of BME carers in the Trust, and as part of this has worked closely with minority ethnic community co-ordinators - Tomek Czupryński, Ethnic Minority Support Worker for Ballymoney and Moyle, and Stephanie Gudrun, Ethnic Minority Support Worker based in Coleraine Rural and Urban Network, as well as Trust staff.</p>					

SECTION 3

EMPLOYMENT

Measures to promote participation, equality of opportunity and good relations in the workplace

Appendix 1 – Section 75 Action Based Plan Update

Section 3 – Employment related issues

Measures to promote participation, equality of opportunity and good relations in the workplace

This section of the Trust's Equality Scheme Action Based Plan has been developed in recognition of the following context as it relates to employment equality within the Trust:

- The Trust has already in place a range of Employment Equality and Human Resource Policies which have been developed in consultation and in partnership with a range of key stakeholders and Trade Unions. These Policies are reviewed as a matter of course on a 3 yearly basis but earlier if there is a need to take account of legislative and case law developments. These Policies are subjected to Section 75 screening to ensure the promotion of equality of opportunity and good relations across the nine different equality groups, to highlight and address multiple identity issues and the avoidance of discrimination. Employment Policy is benchmarked against the Equality Commission for NI's Employment Codes of Practice and Best Practice Guidelines. The Trust will continue to monitor and publish screening outcomes and implementation of these policies as part of its Plan.
- Further, the Trust provides a comprehensive menu of Equality Training. This includes corporate induction training for all newly appointed staff; equality training for all managers which includes specific training on Working Well Together and Harassment and mandatory equality training for all staff.
- The Trust has in place a Working Well Together Policy and Harassment Policy which details the support in place to ensure appropriate and confidential facilities to enable individuals or groups facing discrimination to raise their concerns. Further, the Trust has a Disciplinary Procedure with clear and explicit measures, remedies and sanctions for acts of discrimination, harassment and unacceptable behaviour at work. Through its Health and Wellbeing Strategy and associated Action Plan, collaborative working with Health

Appendix 1 – Section 75 Action Based Plan Update

Improvement, Health and Safety, Education, Human Resources, Occupational Health Teams, in partnership with Trade Unions and relevant others the Trust is involved in a programme of work to improve the working lives of staff and provide appropriate support, guidance and advice on a range of issues.

- The Trust undertakes a systematic audit of its workforce composition as part of its statutory annual and three yearly monitoring requirements under Fair Employment and Treatment Order 1998 legislation. The Trust has just completed its second Article 55 Review Report which includes a comprehensive analysis of existing workforce composition, workforce flows, leavers, employment policy and practice. HSC Trusts are working in partnership with the ECNI and a range of relevant stakeholders as part of an agreed multi-dimensional approach to address current employment trends within health specific occupations. In addition, HSC Trusts will continue to work with the ECNI and TUs with regard to local labour force issues. See below action measures arising from the review to be taken forward in this the Trust's second Action-Based Plan which is aimed at tackling inequality in Health and Social Care. Of note, the Introduction of a new information system for both Pay Roll and Human Resources will ensure that equality data for current staff is accurate and as up-to-date as possible as it will be facilitated by Employee Self Service – which gives staff direct access to update their own equality data. The Trust will continue to utilise this data when drafting and reviewing employment policy and to inform on-going equality screening and EQIAs.

Appendix 1 – Section 75 Action Based Plan Update

Section 3 – Employment

Measures to promote participation, equality of opportunity and good relations in the workplace

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>Action 25 – Action completed</p> <p>Lack of fair participation in the workplace.</p> <p>Source: Fair Employment A Generation On (ECNI)</p> <p>Source: Statement of Key Inequalities in NI (ECNI 2007).</p> <p>Promotion of fair participation in the workplace</p> <p>Source: Article 55 Review Reports (ECNI)</p>	<p>FETO</p> <p>Completion of Article 55 Review Report in line with Fair Employment and Treatment (NI) Order 1998.</p>	<p>Participation in multi-dimensional approach in partnership with the ECNI and relevant stakeholders to address current employment trends across all 5 HSC Trusts as it relates to health specific occupations.</p> <p>Continued work with HSC Trusts and ECNI in addressing any localised labour force issues</p>	<p>Both main communities in NI are fairly represented in the workplace.</p> <p>Fair participation in the workforce</p>	<p>2014-2017</p> <p>Monitored by Article 55 review process</p>	<p>Assistant Director Employee Relations</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
ECNI Annual Fair Employment Monitoring Report No 23					
Action 25 – Notes of Attainment					
<p>Article 55 Review Reports have been completed by HSC Trusts and the Equality Commission. The Equality Commission agreed to undertake further research as regards emerging trends from the University re health specific occupations (i.e. professional occupations) ??in partnership with local universities and will discuss their findings with HSC Trusts.</p>					
2015/16 update					
<p>Article 55 Review Report has been completed showing workforce composition, employment trends and recruitment flows. Findings from the reviews have been discussed with the Equality Commission NI. The Equality Commission agreed to undertake further research on emerging trends in partnership with local universities and will discuss their findings with Trusts. The Commission recognises the position with regard to health specific occupations is complex as Trusts recruit employees who have already, in the main, been trained in the relevant health disciplines, for example nurses, doctors, social workers and other related occupations and the need for a multi-dimensional approach has been recognized. The Trusts looks forward to playing their part in this multi-dimensional approach and engaging further with the Commission and key stakeholders.</p>					
Action 26 – Action completed	Gender equality	Greater uptake of work life balance provision	Increased awareness of work life balance policies and childcare voucher scheme	2014-2017	Assistant Director Employee Relations
Men who present as unavailable for work, only one in twenty link their situation to family or home commitments. In any comparable	Promote work life balance policies and procedures. Monitor uptake across Trust. Continue to provide and promote Childcare	Reduction in staff absence Uptake of Childcare voucher scheme	Improved retention rates	Monitored through policy monitoring process	

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>group of women that figure rises to more than one in three</p> <p>Childcare costs in Northern Ireland approx. 44% of an average income, which is almost four times the EU figure of 12%.</p> <p>ECNI Getting a Fair Share</p>	voucher scheme	Policy updated to reflect current legislative requirements			
<p>Action 26 – Notes of Attainment</p> <p>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. The Report findings have since been launched. Initial research findings highlighted that women fair 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.</p> <p>2015/16 update</p> <p>The Report findings have were Stormont Buildings on 24 March 2016 and recommendation included,</p> <ul style="list-style-type: none"> ➤ The achievement of equal participation of women and men (i.e. a minimum of 40% from either gender) on executive management boards by January 2021. 					

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<ul style="list-style-type: none"> ➤ Organisations should identify a Gender Champion (either male or female) employed at the most senior level of management. ➤ Establish a Public Sector Forum for Gender Equality as a conduit for the sharing of experiences, problems, potential solutions and best practice. ➤ Establish an overarching Public Sector Women’s Network for current and aspiring executives across the public sector. ➤ Develop a culture which promotes an appropriate work life balance. ➤ Deliver mentoring opportunities in an open, fair and consistent manner ➤ Link performance management more clearly to career development ➤ Data should be collected at an individual organisational or sector basis regarding barriers to achieving gender equality at senior management levels. <p>The Trusts have examined the recommendations to see what further steps can be taken to further ensure gender equality in the workplace and will take these recommendations on board in developing their respective Equality Scheme Action Based Plans for the period 2017-2022.</p>					
<p>Action 27 – Action ongoing</p> <p>Need for HSC Transgender Policy</p> <p>Source: Sex Discrimination (Gender Reassignment) Regulations (NI) 1999</p>	<p>Transgender Policy</p> <p>Development of a Regional Transgender Policy</p>	<p>Policy developed which promotes best practices across the HSC sector</p> <p>Discrimination against transgender people (whether by staff or third parties) is not tolerated and any allegations thereof are dealt with in an effective manner.</p>	<p>Promotion of inclusive workplace where</p> <ul style="list-style-type: none"> • Transgender people feel comfortable to express their gender identity; • Transgender people can fulfil their full potential and fully contribute to the workplace; 	<p>2014-2017</p> <p>Monitored by policy development working group</p>	<p>Business Services Organisation and Equality Leads</p>

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Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
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Action 27 – Notes of Attainment					
<p>The first meeting to discuss the Transgender Policy was held on Thursday 8 May 2014 in the Business Services Organisation. Which was very productive. Areas requiring legal clarity included: scope of protection and records management/disclosure. BSO agreed to engage with Legal Services on the following issues - absence management and handling of information records.</p> <p>General agreement was reached that the policy should be short and that protocols for managers, staff and HR are to be produced separately to underpin/assist with the role out of the policy in the workplace. Training materials are also to be produced. It was agreed that the development of the policy will be progressed in the following steps: network (operational level), finalise 1st draft, engage with trans sector and trade unions, 2nd draft, bring feedback and 2nd draft to regional HR network (operational level), SMT/Board sign off for consultation, 12-week public consultation, finalise policy, bring consultation report and final policy to regional HR network (operational level), approach HR Directors Forum and trade unions for endorsement, SMT/Board sign off.</p> <p>A second meeting took place on 26 September 2014. The Policy was redrafted to reflect the discussion from the first meeting. The policy will require equality screening and public consultation as detailed above.</p>					
2015/16 update					
<p>A workshop was held on 2nd June 2015 to discuss a number of outstanding issues ahead of consultation on the initial draft policy. Trade Unions and the Trans sector were invited to attend one of three roundtables events in 2016. A further engagement event took place with the LGB&T staff forum for Health and Social Care on 3 March 2016 in UNISON HQ Belfast.</p> <p>The policy is aimed at creating a workplace where, first and foremost, the dignity of and respect for trans* people is protected and promoted and where trans* people feel comfortable to express their gender identity.</p> <p>The Policy will now be reviewed in light of feedback received for the focus groups and new research and guidance published in the past 12 months. The final draft will be submitted to the HR Directors Forum.</p>					

Issue 2
September 2015

HSC Northern Health
and Social Care Trust

Equality News

Ballymena Inter-Ethnic Forum
'Addressing Hate Crime through Art'
by Harryville Youth Group



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Welcome

Welcome to our second annual newsletter. In this edition we have provided a short account of the work we have done around equality and inclusion across the Trust. This year we were delighted to launch our Good Relations Strategy and we are working with key partners to make sure that we promote respect, equity and trust in the delivery of our services and employment of our staff.

This year the Trust launched a new vision and values. Our ongoing commitment to equality is demonstrated in our CORE value of Respect which states “We will respect the dignity, diversity and individuality of all our patients, clients and colleagues promoting equality and addressing inequality.”



Alison Irwin, Head of Equality



Please contact the Equality Unit for further information or if you have any queries about this Newsletter or the work that we do.

Equality Unit
Route Complex
8E Coleraine
Road
Ballymoney
BT53 6BP

Phone: (028) 2766 1377
Email: equality.unit@northerntrust.hscni.net
Fax: (028) 2766 1209
SMS: 078 2566 7154
Web: www.northerntrust.hscni.net

NIHRC Inquiry into Emergency Healthcare



In June 2014 the Northern Ireland Human Rights Commission (NIHRC) conducted an inquiry into emergency health care throughout all the Trusts.

The Inquiry focused on the quality of care provided, with a particular focus on:

- The right to respect for dignity;
- Responsiveness to need, including the most vulnerable and marginalised members of society;
- The provision of and support for appropriately skilled staff.

The process involved witness testimonies, evidence gathering and participation from members of the public, experts and those responsible for service delivery and patient care. Public hearings took place throughout Northern Ireland in September and October 2014 and the NIHRC considered the evidence gathered and published a final report which was launched at Stormont Hotel on the 27 May 2015. A copy of the report is available on the Trust's Intranet.

The Trust is committed to working in partnership with the Human Rights Commission to ensure that the recommendations of this inquiry are taken forward.

Public Appointments Workshop

The five Trusts' Disability Action Plans included a commitment to promote equality and diversity in the procedures for making public appointments. It is important to note that just over 1% of Board members across the public sector have a disability. A regional event was held on Tuesday 30 September 2014 at Stormont which was attended by a number of disabled people and representative organisations. The event was aimed at encouraging people with disabilities to apply to become Board members of public bodies.



Good Relations



Last year we consulted on our Good Relations Strategy which was developed by talking to our staff, service users and local communities. The Good Relations Strategy was officially launched in February 2015. The Strategy details how we will promote respect, equity and trust in the delivery of our services and employment of our staff. Our Strategy will help us to provide inclusive services to all our communities and demonstrate to our staff that they are valued and respected irrespective of their race, religion or political opinion. A copy of the strategy is available on both the Trust's Intranet and website.

Our Good Relations Statement

"We are committed to ensuring that our staff feel comfortable at work and everyone feels welcome when using our services. We will not tolerate sectarianism or racism in any form by staff or service users."

Traveller Cultural Awareness Workshop

On the February 2015 the Trust held a Traveller Cultural Awareness workshop for staff. The workshop was facilitated by the Safe and Well Project, Southern Area Action with Travellers (SAAT), a group which is lottery funded. Two travellers co-facilitated the workshop, one born into a traveller family and one married to a traveller. The workshop focused on the traveller culture, discrimination, perceptions, health, education and community issues. There was an opportunity for staff to ask questions and feedback from staff who attended was very positive. We plan to run this workshop again in the Autumn.

Staff Training

The Trust's Equality Unit delivers a range of training to make sure staff are equipped with the knowledge to work effectively with each other and to ensure everyone can access our services. This year a new programme was developed for managers on "Reasonable Adjustment and Supporting Carers" in partnership with Carers NI. This programme is designed to help managers understand how they can support disabled people and carers in work.

Last year another 1020 staff completed Equality and Diversity training. Details of all training programmes available are on Staffnet. Also check out the Training Directory or contact the Equality Unit to arrange training for you or your team.

Communicating well

Being able to communicate with the people we provide services to is vital and part of our day to day business. We need to get and provide accurate and comprehensive information by making sure people have proper communication support. Last year we booked minority language interpreters for 10,808 health and social care appointments. In addition 720 Trust appointments were supported by a sign language interpreter. We continue to translate a range of written material. All translated material is available on our website at www.northertrust.hscni.net. Please contact the Equality Unit if you want more information on communicating well.



Supporting Carers



Anne Cummings,
Carer Co-ordinator

The Carers A – Z Directory, available on our website, is a valuable sign posting tool for carers and Trust staff. Last year the Directory was updated and re-launched at our February Trust Board meeting.

We are working regionally on the needs of black and minority ethnic (BME) carers. An information leaflet, printed in 11 languages, has been developed to raise awareness of support available.

Each year we have a number of carer support events including 'refresh and relax' days, 'benefits advice', 'laughter yoga', 'mindfulness' and 'personal care' workshops. For more information about these events or carer support available contact our Carers Coordinator at the Equality Unit.



Black and Minority Ethnic Carers Event

The Public Health Agency provided funding for us to run an event aimed at raising awareness of the needs of Black and Minority Ethnic carers. This was a great opportunity to highlight cultural considerations when supporting carers who are from a black and minority ethnic background. Speakers during the event included William Olphert from the Chinese



Welfare Association; and two carers, Margozata Bartlewska and Richard John, who described the particular challenges by carers from a minority ethnic background. Feedback from the event was positive with one participant saying 'This was a great idea, it's the first time I've thought about the needs of minority ethnic carers, and I've learned a lot'.

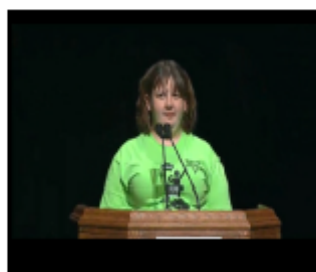
Involving You



The **Older People's Panel** meets regularly with Trust staff to be informed of any initiatives and to give their views on issues affecting service delivery. Progress in Transforming Your Care is of particular interest to members and during the year members prepare a composite response to the consultation on OF-MDFM's Active Ageing Strategy.

Our **Carers Strategy Steering Group** comprises of individual carers as well as a representative from Carers Northern Ireland and the work taken forward is based on the principles of partnership working and user involvement. To further enhance partnership working with regard to carers, the Trust funds Carers Northern Ireland to support a number of carers groups.

The **Disability Consultation Panel** circulated an invite amongst all local and regional disability groups to recruit new members. The invite was a success with 8 new members joining the Panel. Panel members contribute to the delivery of Disability Equality Training to Trust staff. Panel members have been actively involved in giving advice on the development of the new Ballymena Health and Care Centre.



'The Forum' our user group for people who use our learning disability services is chaired by Ursula Campbell. Last summer Ursula was picked to do a speech at the Best Buddies International Event in America and another Forum member, Amanda Somers, designed the T-shirt worn by the thousands who attended the event. Congratulations to them both!

Ballymena Inter-Agency Ethnic Support Group (BIAESG)

In support of minority ethnic communities we work in partnership with the Ballymena Inter-Agency Ethnic Support Group, (BIAESG), which consists of representatives from statutory and voluntary bodies in the greater Ballymena area, the aim of which is to provide information, advice and support to the Ballymena Inter-Ethnic Forum. During the year, in partnership with Ballymena Inter-Ethnic Forum, we met with representatives from a number of minority ethnic communities to make sure that our menus are inclusive of their dietary needs.



OUT in the North

The Rainbow Project provided a series of workshops for professionals working with Lesbian Gay Bisexual and Trans (LGB&T) people age 18 and over based in the Northern Trust area. The aim of the workshop was to engage with LGB&T people living in the Northern Area to redress health inequalities.

A Fond Farewell



Pamela Montgomery

Pamela Montgomery, Non-Executive Director of the Trust, has chaired our Equality Steering Group for many years and has supported the mainstreaming of the equality and human rights agenda. She was instrumental in the development of our Good Relations Strategy and her contribution to the process was invaluable. As she leaves the Trust in the Autumn we would like to take this opportunity to thank Pamela for her dedication and commitment over the years and to wish her every success in her further adventures.

Diary Dates

- 1 October 2015** International day of Older Persons
- 19 November 2015** International Men's Day
- 10 December 2015** Human Rights Day
- 17 January 2016** World Religion Day
- 21 March 2016** International Day for the Elimination of Discrimination
- 17 May 2016** International Day Against Homophobia

Our supporting functions

Equality Matters

We are committed to working in partnership with individuals and communities to ensure that our diverse population is treated fairly and treated well.

We have developed plans that detail how we will make sure that we promote equality, good relations and our disability duties. Our Section 75 Action Based Plan and Disability Action Plan (DAP) are available on our website www.northerntrust.hscni.net. We formally consulted on the Plans for 12 weeks from 26 March 2014 to 19 June 2014 and the Plans have been amended to reflect the feedback we received.

To celebrate Community Relations Week in June 2014 the Trust held a multi-cultural event in the restaurant at Antrim Area Hospital. Supported by Ballymena Inter-Ethnic Forum and Antrim Borough Council, the aim of the event was to increase staff awareness of the cultural needs of minority ethnic communities receiving hospital care. Participants included representatives from the African and Caribbean, Chinese,

Polish, Muslim, Jehovah’s Witness and Roma Communities. The restaurant’s menu on the day also reflected the multi-cultural theme and included traditional food from some of the countries represented.

We know that good information provision is central to accessing our services. Everyone is entitled to accessible information and the right communication support. Last year the Trust booked interpreters for 10,987 health and social care appointments and 813 Trust appointments were supported with the provision of a sign language interpreter.

The Trust’s user panels continue to meet regularly and are used to obtain feedback from service users and carers on service planning and review. The Disability Consultation Panel helped us to develop our Assistance Dog Policy to ensure the Trust had an accessible service to Assistance Dog owners. The policy was launched at the assistance puppy training class and will ensure services are accessible to everyone and that Assistance Dog owners are not refused access to Trust premises.

Appendix 3 – ‘Equality Matters’ section in Annual Report



As always we are grateful to the members of all the Panels for their involvement and continued support and look forward to working with them in the future. More information about the Panels and the minutes of the meetings can be found on our website.

We know that carers enable thousands of people to live independent lives safely in their own homes and in the community and we recognize how demanding the caring role can be. During the year the Trust held a number of carer support events including ‘Refresh and Relax’, ‘Mindfulness’, and ‘Helpful Tips for Family Carers’. The Trust also ran a ‘Cultural Approaches to Caring’ workshop to raise awareness of the cultural aspects of families carers from an ethnic minority background.

The Trust launched its Good Relations Strategy in February 2015 at the Stronger Together Annual Conference. The Strategy details how the Trust will promote respect, equity and trust in the delivery of its services and employment of its staff. As a public authority we have a legal responsibility to promote good relations but this Strategy is about more than following the letter of the law. It will help us to provide inclusive services to all our communities and

demonstrate to our staff that they are valued and respected irrespective of their race, religion or political opinion.

While developing the Strategy we talked to our staff, service users and local communities to find out how they feel about good relations and to ensure that their views shaped our plans. The Trust’s Good Relations Statement will be displayed in all Trust facilities.

“We are committed to ensuring that our staff feel comfortable at work and everyone feels welcome when using our services. We will not tolerate sectarianism or racism in any form neither by staff or service users.”
As we move into another year we will continue operating in a difficult economic climate but we are as committed as ever to promoting equality and good relations.

Finance Directorate

This year has been one of continuing development for the finance teams. The Finance Directorate has moved to its new permanent location in Greenmount House, Ballymena. This has allowed the centralisation of the finance teams and creates opportunity for greater synergy across its functions. The building has provided a modern office environment, which is shared

Appendix 4 – List of participants who attended Community and Voluntary Sector Consultation events

28 October 2015 – Sandel Centre, Coleraine

Thelma Dillon, Older Peoples Panel
Michelle O'Neill, Praxis Care
Jenna O'Hara, COAST
Clodagh O'Brien, NHSCT
Ruth-Ann Delija, Action for Children
Marina Kelly, Red Cross
Sean O'Hare, Homestart Causeway
A McGarvey, Homestart Causeway
Kate Cormack, Phoenix ADHP Project
Norah Robinson, Harpurs Hill Children and Family Centre
Sharon Burnett, Causeway Womens Aid
Brenda McAteer, Harupurs Hill Children and Family Centre
Thomas Quigley, Jordanstown School
Edel McKenna, Jordanstown School
Shirley McPhillimy, Coleraine Area Child Contact Centre
Patrica Crossley, MS Society
Nicola Greer, Causeway Rural and Urban Network
Bronagh McFadden, BCRC
Fiona Oneill, NHSCT
Mary McNickle, Causeway Road Centre
Jenni Archer, Age Concern Causeway
Renee McClelland, ACC
Ruth Morrison, Praxis Care
Billy Moore, North Coast Community Transport
Sonja Tommen, WAVE Trauma Centre
Chris Alexander, Triangle Housing Association

29 October 2015 - Mossley Mill, Newtownabbey

Gerard Stewart, Extern
Paul Dinsmore, Volunteer Now
Linda Wray, Presbyterian Council for Social Witness
Heather Gray, NDCS
Colette Slevin, Mencap
Elizabeth Brisbane, Disability Action
Colin Dickenson, Good Morning NI Network
Patrick Monteague, Focus: ID Trust
Frances Shiels, The ID Trust
Jo Burns, NSHCT
Eileen Thomson, Cedar Foundation

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Dermot Parsons, Positive Futures
Pat Smyth, NLCG
David Cuthbert, Carlise House
Helen Gault, Home Start Carrickfergus
Hilda Ferris, Home Start Carrickfergus

30 October 2015 – All Saints Parish Centre, Ballymena

Torie Tennant
Mary Lowe, Womens Aid ABCLN
Adrian Friel, Alzheimers Society
Celia Currie, Alzheimers Society
Barry Smyth, Alzheimers Society
Leslie Anne Newton, Association for Real Change
Norman Sterritt, Triangle
Brian Homes, Mecap
Deirdre McCloskey, MEAAP
Edna Walmsley, PHA
Colette Stewart, ONUS
Jim Whitten, Cloughmills Community Action
Sandra McDonald, Mid and East Antrim Borough Council
Mary O'Connell, Homestart Antrim
Arlene Aitchison, Homestart Antrim
Joy McNally, Larne YMCA
Pat Smyth, NLCG
Cathy McKillop, Shine
Karen Douglas, The Rowan
Joy Hammond
Billy McMillan, Barnardos

3 November 2015 – Burnavon, Cookstown

Lyn Campbell, Carers NI
Liam Quigley, NIAMH
Michael Gourlet, Rehabilitation
Michele McKeown, Cookstown and Magherafelt Volunteer Centre
Brigid Scullion, CDM Community Transport
Sharon Ly U, EYO
Nicole Moore, Parkinson UK
Lindsay Wallace, Contact a Family
Cathal Mullagh, MUDC
Aine Gallagher, NI Hospice
Marvyn Bothwell, Prospects

Appendix 4 – List of participants who attended Community and Voluntary Sector Consultation events

Ursula Scullion, Agewell

Marie Devlin, Agewell

Teresa Hazzard, Mencap

Thelma Abernethy, Addiction NI

Martina Watson, Mid Ulster Womens Aid

Caroline Temple, RNIB

Graham Logan, NIAMH