South Eastern Health and Social Care Trust

Equality, Good Relations and Human Rights Screening Template

Completed Screening Templates are public documents and will be posted on the Trust's website

See Guidance Notes for further background information on the relevant legislation and for help in answering the questions on this template (follow the links).

(1) Information about the Policy/Proposal

(1.1) Name of the policy/proposal: P-089. HIV and Post Exposure Prophylaxis Following Sexual Exposure (PEPSE).

(1.2) Is this a new, existing or revised policy/proposal? Revised.

(1.3) What is it trying to achieve (intended aims/outcomes)? Update local guidelines inline with updates to national guidance.

(1.4) Are there any Section 75 categories (see list in 3.1) which might be expected to benefit from the intended policy/proposal? No

(1.5) Who owns and who implements the policy/proposal - where does it originate, for example DHSSPS, HSCB? This is a local policy, created by the Sexual Health Service in South Eastern H&SC Trust. The policy is primarily used in the Emergency Department.

(1.6) Are there any factors that could contribute to/detract from the intended aim/outcome of the policy/proposal/decision? (Financial, legislative or other constraints?)

Staff not being aware of the policy.

(1.7) Who are the internal and external stakeholders (actual or potential) that the policy/proposal/decision could impact upon? (staff, service users, other public sector organisations, , trade unions, professional bodies, independent sector, voluntary and community groups etc)

Staff and service users.

(1.8) Other policies with a bearing on this policy/proposal **(**for example regional policies) - what are they and who owns them?

BASHH PEPSE guidelines 2021 **(BASHH PEPSE guidelines)**

(2) Available evidence

Evidence to help inform the screening process may take many forms. What evidence/information (both qualitative and quantitative) have you gathered to inform this policy? Specify details for relevant Section 75 categories.

Details of evidence/information
This is a clinical guideline based on the most recently published BASHH guidance.

(3) Needs, experiences and priorities

(3.1) Taking into account the information above what are the different needs, experiences and priorities of each of the Section 75 categories and for both service users and staff.

Category	**Needs, experiences and priorities**	
	Service users	***Staff***
Gender	**Female 55.50%** **Male 44.50%**	**Female 81.22%** **Male** 18.78%
Age	**0 -16 10%** **16 -19 3%** **20 - 29 9%** **30 - 45 19%** **46 - 59 20%** **60 + 39%**	**0-15 0%** **16 – 19 0.53%** **20-29 16.39%** **30-45 40.00%** **46-59 33.49%** **60+ 9.59%**

Religion	**Not Routinely collected for this service.** **Consideration has been given to Trust service user profile as below and council voting patterns.** **Protestant 50.52%** **Roman Catholic 27.90%** **Other 0.82%** **None 14.65%** **Not Known 6.11%**	**Protestant 42.99%** **Roman Catholic** 25.90% **Other** 0% **None** 23.02% **Not Known** 8.10 %
Political Opinion	**Not routinely collected.** **Council voting patterns below are considered.** **Ards & North Down council area return a unionist majority** **Lisburn and Castlereagh council area return a unionist majority** **Newry, Mourne & Down council area return a nationalist majority**	**Broadly Nationalist** 3.03% **Broadly Unionist 8.24%** **Do not wish to answer** 11.09% **Other 5.35%** **Not known** 72.29%
Marital Status	**Not routinely collected.** **Trust population profile is considered as below** **Single 31.7%** **Married 51.64%** **Divorced 6.01%** **Widowed 6.85%** **Separated 3.70%** **Other 0.1%**	**Single** 32.16% **Married** 56.31% **Divorced** 3.47% **Widowed** 0.53% **Separated** 1.56% **Other / Not Known** 5.98%
Dependent Status	**Not Routinely collected.** **Trust population profile is considered as below.** **Households with dependent children - 33.38%**	**Child or children 13.00%** **Dependant older 2.98%** **A person with disability** 1.89% **None 10.54%** **Other/Not Known** 72.30%
Disability	**Not Routinely collected** **Trust population profile is considered as below.** **Households with one or more persons with a limiting long term illness 19.82%**	**No 25.84%** **Yes** 1.32% **Not known 72.85%**
Ethnicity	**Not Routinely collected** **Trust population profile is considered as below.** **Black African 0.1%** **Irish Traveller 0.04%** **Bangladeshi 0.06%** **Pakistani 0.04%** **Black Caribbean 0.03%** **Mixed Ethnic Group 0.35%** **Chinese 0.26 %** **White 98.50%** **Indian 0.25%** **Other 0.3 %**	**Black African** 0.06% **Irish Traveller** 0.03% **Bangladeshi** 0.01% **Pakistani** 0.03% **Black Caribbean** 0.01% **Mixed Ethnic Group** 0.05% **Chinese 0.05%** **White** 30.63% **Indian** 0.43% **Other 0.33%** **Filipino 0.37%** **Not known** 68.00%
Sexual Orientation	**Not Routinely collected** **Trust population profile is considered as below** **Estimated 10% of population is LGBTQ+. Equates to estimated 168,527 of the NI population i.e. possibly one in 10 in terms of clientele/service user.** **data source Rainbow Project July 2008**	**Opposite sex 26.19%** **Do not wish to answer** 1.54% **Both sexes / Same Sex** 0.58% **Not known** 71.70%

(3.2) Provide details of how you have involved stakeholders, views of colleagues, service users and staff etc when screening this policy/proposal.

Draft versions of the document were consulted on my by staff members from the South Eastern H&SC Trust GUM and Emergency Medicine teams. The final version then passed thorugh a scrutiny process which involved it being assessed by two staff members; one from the GUM team and one from the Emergency Medicine team.

(4) Screening Questions

You now have to assess whether the impact of the policy/proposal is major, minor or none. You will need to make an informed judgement based on the information you have gathered.

(4.1) What is the likely impact of equality of opportunity for those affected by this policy/proposal, for each of the Section 75 equality categories?			
Section 75 category	***Details of policy/proposal impact***		***Level of impact? Minor/major/none***
	Services Users	***Staff***	
Gender	**Female 55.50%** **Male 44.50%**	**Female 81.22%** **Male** 18.78%	None/None
Age	**0 -16 10%** **16 -19 3%** **20 - 29 9%** **30 - 45 19%** **46 - 59 20%** **60 + 39%**	**0-15 0%** **16 – 19 0.53%** **20-29 16.39%** **30-45 40.00%** **46-59 33.49%** **60+ 9.59%**	None/None
Religion	**Not Routinely collected for this service. Consideration has been given to Trust service user profile as below and council voting patterns.** **Protestant 50.52%** **Roman Catholic 27.90%** **Other 0.82%** **None 14.65%** **Not Known 6.11%**	**Protestant 42.99%** **Roman Catholic** 25.90% **Other** 0% **None** 23.02% **Not Known** 8.10 %	None/None

Political Opinion	**Not routinely collected.** **Council voting patterns below are considered.** **Ards & North Down council area return a unionist majority** **Lisburn and Castlereagh council area return a unionist majority** **Newry, Mourne & Down council area return a nationalist majority**	**Broadly Nationalist** 3.03% **Broadly Unionist 8.24**% **Do not wish to answer** 11.09% **Other 5.35**% **Not known** 72.29%	None/None
Marital Status	**Not routinely collected.** **Trust population profile is considered as below** **Single 31.7%** **Married 51.64%** **Divorced 6.01%** **Widowed 6.85%** **Separated 3.70%** **Other 0.1%**	**Single** 32.16% **Married** 56.31% **Divorced** 3.47% **Widowed** 0.53% **Separated** 1.56% **Other / Not Known** 5.98%	None/None
Dependent Status	**Not Routinely collected.** **Trust population profile is considered as below.** **Households with dependent children - 33.38%**	**Child or children 13.00**% **Dependant older 2.98**% **A person with disability** 1.89% **None 10.54**% **Other/Not Known** 72.30%	None/None
Disability	**Not Routinely collected** **Trust population profile is considered as below.** **Households with one or more persons with a limiting long term illness 19.82%**	**No 25.84**% **Yes** 1.32% **Not known 72.85**%	None/None
Ethnicity	**Not Routinely collected** **Trust population profile is considered as below.** **Black African 0.1%** **Irish Traveller 0.04%** **Bangladeshi 0.06%** **Pakistani 0.04%** **Black Caribbean 0.03%** **Mixed Ethnic Group 0.35%** **Chinese 0.26 %** **White 98.50%** **Indian 0.25%** **Other 0.3 %**	**Black African** 0.06% **Irish Traveller** 0.03% **Bangladeshi** 0.01% **Pakistani** 0.03% **Black Caribbean** 0.01% **Mixed Ethnic Group** 0.05% **Chinese 0.05**% **White** 30.63% **Indian** 0.43% **Other 0.33**% **Filipino 0.37**% **Not known** 68.00%	None/None
Sexual Orientation	**Not Routinely collected** **Trust population profile is considered as below** **Estimated 10% of population is LGBTQ+. Equates to estimated 168,527 of the NI population i.e. possibly one in 10 in terms of clientele/service user.** **data source Rainbow Project July 2008**	**Opposite sex 26.19**% **Do not wish to answer** 1.54% **Both sexes / Same Sex** 0.58% **Not known** 71.70%	None/None

(4.2) Are there opportunities to better promote equality of opportunity for people within Section 75 equality categories?	
Section 75 category	***Please provide details***
Gender	The Trust remains committed to embracing diversity, promoting good relations and challenging sectarianism and racism to ensure service users and staff enjoy equality of opportunity and access to health and social care in a welcoming and safe environment. The Trust has an ongoing strategy of staff training and engagement via e-learning or face to face if safe and appropriate to do so. Also see 7.4 for consideration and mitigation
Age	As above
Religion	As above
Political Opinion	As above
Marital Status	As above
Dependent Status	As above
Disability	As above
Ethnicity	As above
Sexual Orientation	As above

(4.3) *To what extent is the policy/proposal likely to impact on good relations between people of different religious belief, political opinion or racial group? minor/major/none*		
Good relations category	***Details of policy/proposal impact***	***Level of impact Minor/major/none***
Religious belief	The Trust is committed to ensuring that staff and patients have equality of access to services and feel welcome, comfortable and safe accessing all Trust facilities, irrespective of race, religion or political opinion.	The Trust has in place its Good Relations statement which is displayed on staff and service user notice boards.
Political opinion	As above	As above
Racial group	As above	As above

(4.4) Are there opportunities to better promote good relations between people of different religious belief, political opinion or racial group?	
Good relations category	***Please provide details***
Religious belief	The Trust remains committed to embracing diversity, promoting good relations and challenging sectarianism and racism to ensure service users and staff enjoy equality of opportunity and access to health and social care in a welcoming and safe environment. The Trust has an ongoing strategy of staff training and awareness raising. The e-learning module 'Making a Difference' is available for staff and the Trust has recommenced face to face training where it is safe and appropriate to do so. Consideration is being given to a blended approach to delivery of training utilizing a variety of delivery methods including virtual and remote technology. On the basis of the information available, there is nothing to

	indicate that these changes would engender any adverse impact in regard to the promotion of good relations.
Political opinion	As above
Racial group	As above and additionally: As indicated previously, it is important that the Trust continues to translate essential information. Trust staff are cognisant of the ethical reasons for ensuring that patients who are not proficient in English as a first or second competent language are provided with telephone interpreting or face-to-face interpreting to facilitate effective and safe communication. The Trust is encouraging staff to continue accessing telephone interpreting services as appropriate during this period to ensuring social distancing. If required, face to face can be accommodated. The promotion of Good Relations is an integral part of the Trust's commitment to improve the health and wellbeing of all our staff and in line with our Good Relations Strategy, we strive to ensure that all staff irrespective of religion, race or political opinion feel safe, welcomed and comfortable in work.

(5) Consideration of Disability Duties

(5.1) How does the policy/proposal encourage disabled people to participate in public life and promote positive attitudes towards disabled people?
The Trust is committed to ensuring equality of opportunity for all service users and staff in terms of disability and complies with all relevant Disability legislation, including the Disability Discrimination Act 1995 and the United Nations Convention on the Rights of People with Disabilities. • The Trust Disability Action Plan 2024 – 2029 promotes these two

duties. Additionally, the Trust has policies, procedures and strategies in place aimed at encouraging disabled people to participate in public life and promote positive attitudes towards disabled people.

All staff must complete mandatory training on equality, human rights and good relations which includes awareness of disability duties. As this is available online, staff are being encouraged to complete online if possible at this present time.

(6) Consideration of Human Rights

(6.1) Does the policy/proposal affect anyone's Human Rights?
Complete for each of the articles

Article	Positive impact	Negative impact = human right interfered with or restricted	Neutral impact
Article 2 – Right to life	x		
Article 3 – Right to freedom from torture, inhuman or degrading treatment or punishment			x
Article 4 – Right to freedom from slavery, servitude & forced or compulsory labour			x
Article 5 – Right to liberty & security of person			x
Article 6 – Right to a fair & public trial within a reasonable time			x
Article 7 – Right to freedom from retrospective criminal law & no punishment without law			x
Article 8 – Right to respect for private & family life, home and correspondence.			x
Article 9 – Right to freedom of thought, conscience & religion			x

Article 10 – Right to freedom of expression			x
Article 11 – Right to freedom of assembly & association			x
Article 12 – Right to marry & found a family			x
Article 14 – Prohibition of discrimination in the enjoyment of the convention rights			x
1st protocol Article 1 – Right to a peaceful enjoyment of possessions & protection of property			x
1st protocol Article 2 – Right of access to education			x

Please note: If you have identified potential negative impact in relation to any of the Articles in the table above, speak to your line manager and/or Equality Unit. It may also be necessary to seek legal advice.

(6.2) Please outline any actions you will take to promote awareness of human rights and evidence that human rights have been taken into consideration in decision making processes.

The Trust has identified potential positive impact for Article 2.

The Trust is committed to promoting, protecting and respecting human rights in all aspects of its work and will ensure that human rights are considered as an integral part of its actions and decision-making processes.

The Trust acknowledges the importance of taking a human rights based approach and will endeavour to ensure that the principles of human rights underpin all areas of work across the organisation.

The Trust has in place a robust strategy for Equality Good Relations and Human Rights Training. All staff must complete this mandatory training every three years. Training is available face to face and via the Making A Difference e-learning module.

(7) Screening Decision

(7.1) Given the answers in Section 4, how would you categorise the impacts of this policy/proposal?

Major impact	
Minor impact	
No impact	X

(7.2) Do you consider the policy/proposal needs to be subjected to ongoing screening

Yes	
No	X

(7.3) Do you think the policy/proposal should be subject to and Equality Impact Assessment (EQIA)?

Yes	
No	X

(7.4) Please give reasons for your decision and detail any mitigation considered.

The Trust has carried out an Equality Screening on the proposal and has not identified any potential adverse impact on service users and staff.

The Trust will monitor the implementation of the proposal. If any adverse impact is identified the Trust will revise the equality screening, and upgrade to a full EQIA if needed.

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(8) Monitoring

Please detail how you will monitor the effect of the policy/proposal for equality of opportunity and good relations, disability duties and human rights? The policy will be reviewed at intervals as per Trust Policy. Staff feedback, datix submissions and relevant SAI are all mechanism by which early amendments to the policy may be considered. Staff will also be consulted again at the time of the next policy review.

Approved Lead Officer:	Dr Bill Gibson
Position:	Consultant in Sexual Health & HIV
Date:	19/01/2026
Policy/proposal screened by:	Dr Bill Gibson

Please forward completed schedule to:

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