

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 Julie-Anne Eccles, Equality and Human Rights Department, Lough House, Ards Community Hospital, Newtownards, BT23 4AN
Telephone: 028 91512169 Textphone: 028 91510137
E-mail: julie-anne.eccles@sehsc.hscni.net

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 veiksmy 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.

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 South Eastern Health and Social Care Trust provides integrated health and social care to 440,000 people in the South Eastern Trust Area. The overall purpose of the South Eastern Trust is to improve health and wellbeing and reduce health inequalities.

The Equality Commission for NI 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 good 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 by Health and Social Care Trust Equality Leads 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 for example complaints received, customer surveys, monitoring information, research documents, annual reports, corporate plans, statistical information and health needs assessments etc. In addition, the Trust pre-consulted with a wide range of service users, service managers, voluntary groups and organisations, Trade Unions and Equality Commission for

Northern Ireland amongst others in order to inform the development of this Plan. Please refer to the Trust's website (www.setrust.hscni.net) for a copy of the Trust Emerging Themes Document which summarises the methods used along with details of those whom we consulted with as we developed this Plan. 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 as noted below:-

- Transforming Your Care (TYC)
- Trust Delivery Plan
- Developing Better Services – Modernisation of Acute Services
- 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 Changing Times for Older People – Living Life to the Full
- Priorities for Action
- Public Health Agency Annual Commissioning Priorities
- Public and Personal Involvement (PPI) Directorate Plans
- Trust Health Improvement Plans
- Trust Community Development Action Plans
- Thematic Regional Work streams e.g. Regional Ethnic Minority HSC Wellbeing Steering Group

(This list is not exhaustive).

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
	<p>Theme 1: Measures to Improve Access to Service, Communication and Information – specific action measures</p> <p>Theme 2: Service Monitoring –specific action measures</p> <p>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</p> <p>Theme 4: Measures to Promote Participation and Inclusion –specific action measures</p> <p>Theme 5: Procurement – specific action measures</p>	<p>10-21</p> <p>22-24</p> <p>25-32</p> <p>33-34</p> <p>35-36</p>
Section 2	Service Related Issues –specific action measures	37-48
Section 3	Employment Related Issues –specific action measure s	49-61

NB: For ease of navigation a quick reference matrix has been added to page 8 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.

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.

A copy of the Consultation Outcome Report will be posted on the Trust's website following the close of the consultation process.

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.

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 all sectors arising from a 12 week formal consultation event
- HSC Trusts' Emerging Themes 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 regarding the Action Based Plan should be made to:

Susan Thompson

Equality Manager

Lough House, Ards Hospital

Newtownards

BT23 4AS

Telephone: 028 9151 2177

Textphone: 028 9151 0137

e: susan.thompson@setrust.hscni.net

Website: www.setrust.hscni.net

ACTION BASED PLAN - QUICK REFERENCE GUIDE

Section 75 Group	Action	Page No.
Race	3	17
Religion	4	18
Disability	5	20
Race	6	21
Race	7	22
Disability	8	24
All Section 75 groups	9	25
All Section 75 groups	10	27
All Section 75 groups	11	28
All Section 75 groups	12	29
All Section 75 groups	13	30
All Section 75 groups	14	31
All Section 75 groups	15	32
All Section 75 groups	16	33

Section 75 Group	Action	Page No.
All Section 75 groups	17	35
Sexual Orientation	18	38
Race	19	40
Race	20	42
Age	21	43
Race	22	45
Race, Religion	23	46
Race, Religion	24	47
Race	25	52
Disability	26	54
All Section 75 groups	27	57
Sexual Orientation, Gender	28	58
All Section 75 groups	29	60
Age	30	61

SECTION 1

CROSS CUTTING THEMES

- Theme 1: Measures to Improve Access to Service, Communication and Information – pages 8-12
- Theme 2: Service Monitoring – pages 13-14
- Theme 3: Measures to Ensure Mainstreaming of Equality, Good Relations, Disability Duties and Human Rights Considerations into Corporate Planning Cycle and Decision Making – pages 15-19
- Theme 4: Measures to Promote Participation and Inclusion – pages 20
- Theme 5: Procurement – pages 21

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</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>Sources: The Health of BME, King’s Fund, London</p> <p>NICEM</p>	<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>To run “working well with interpreters” training across all Trusts</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 awareness raising to promote guidance.</p> <p>Service Level Agreement for</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 consistent approach to interpreting and translation support</p>	<p>Year 1</p> <p>Action planned project that will be subject to on-going monitoring</p>	<p>HSCB</p> <p>Equality Managers/ HSC organisations/NIHSCIS</p>

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<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 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>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>			NIHSCIS/Equality Managers

Action 1 - Notes of Attainment: Action Completed

The Trust continues to provide a robust face to face and telephone interpreting service for patients and clients who do not speak English as a first language. During 2014-15 the total number of interpreting episodes was 5336 a similar uptake to 2013-2014. With the top four languages being Polish, Lithuanian, Chinese and Slovak.

The review commissioned by the Health & Social Care Board (HSCB) in 2011 recommended a re-profiling of interpreting usage by increasing the ratio of telephone interpreting to face to face interpreting, the transfer of management responsibility from Belfast Health & Social Care Trust (BHSCT) to the Business Services Organisation (BSO) in accordance with strategic direction for regional transactional services and significant investment in a new booking system.

The management of the NIHSCIS was transferred to BSO on 1st October 2014.

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>A Project Group Chaired by the HSCB's Director of Commissioning oversaw the associated Workstreams to facilitate implementation. The Trust Equality Manager sat on this Group which progressed Workstreams progressed in terms of communication, the production of consistent regional guidelines and the development of a web-based portal for booking interpreters. This system will also comprise an interface with Finance which will significantly reduce the volume of paper invoices, which were produced for the 95,000 + interpreting interactions. The practitioner will log onto the system and will be prompted to answer if their interaction warrants a face-to-face interpreter, given stipulated criteria. Depending on the duration, nature and complexity of the appointment, the appropriate interpreting source can be selected.</p> <p>Interpreters will use a barcode to scan in each practice or with each practitioner to verify the duration of the appointment. 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.</p> <p>A Regional Advisory Group including SET Equality Manager will be established to inform the strategic direction of the service.</p> <p>To support this work the Trust has in conjunction with the NIHSCIS Manager delivered 5 Working Well with Interpreter training session to 61 staff in Downpatrick, Lisburn and the Ulster Hospital.</p> <p>The New web-based IT Portal was successfully deployed to all HSC organisations during the year under-review. HSC Equality Leads worked with the NI Interpreting staff to ensure a seamless transition and to ensure 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. Communications were placed on each Trust's intranet and notices issued via global.</p> <p>The total number of requests for face to face interpreting for the period 1st April 2015 – 31st March 2016 was as follows: SET 4,585 The top main languages in the SET are as follows: Polish, Lithuanian, Cantonese, Mandarin, Russian, Slovak and Latvian.</p> <p>Key Successes</p> <p>The project group found that stakeholder engagement was crucial to the success of the project so that all the stakeholders were able to inform the development of the service and the software and that they met the needs of all. Training and engagement began in June 2015 and implementation took place in January 2016. System user guides were created and circulated across the Trusts and Primary Care. The introduction of the system has also led to a number of cost savings and has the potential to realise further reduction in spend:</p> <p>Redeployment of finance staff (equating to £81, 355 per year)</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 the double bookings and cancellation costs ➤ Potential to reduce long term use of agency staff. 					

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>The most popular languages vary across the geographical spread but the top languages of the region are shown below:</p> <p>The most popular languages vary across the geographical spread but the top languages of the region are shown below: Polish 8142, Lithuanian 4308, Romanian 2363, Portuguese 2263, Chinese – Mandarin 1388, Slovak 1211, Tetum 1209, Hungarian 942, Bulgarian 861, Chinese – Cantonese 748, Arabic 713, Russian 695, Latvian 571, Somali 273, Czech 245, Spanish 155, Chinese – Hakka 153 Farsi 112, Bengali 87, Italian 75</p>					

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</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) and BDA)</p> <p>Physical and Sensory Disability Strategy and Action Plan 2012 – 2015</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 professionals and practitioners</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 Managers/ HSC organisations</p>

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		

Action 2 - Notes of Attainment: Action Completed

The overall rationale for the Physical & Sensory Disability Strategy 3 Year Action Plan which is now entering its final phase is to action to address inequalities and identify gaps in service provision. The Trust is represented on the Strategy Implementation Group by the Equality Manger and the Team Leader – Sensory Support Services. This implementation group 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).Task Group 5 Promotion of Eye Health has been established and SIG is represented on this.
- A Task & 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 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.
- Trusts Making Communication Accessible guide has been reviewed.
- A Level 1 E-Learning awareness raising programme for hearing and sight loss has been road tested with Trust Staff Groupings
- 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/respite 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.

Self Directed Support (SDS):

Within the SDS initiative an existing outcomes based tool is beginning a trial period across all 5 Trusts paced with the phased introduction of SDS. The tool, Adult Social Care Outcomes Toolkit (ASCOT) is validated and a number of versions (ie self-completion, service users, carers and proxy) developed through rigorous research and work is progressing in partnership with PSSRU. The outcomes data will report on individual outcomes and can produce reports for comparison across programmes, services, Trusts and with other parts of GB. The trial period will be evaluated and findings/amendments etc taken through both the SDS Programme Board and the Community Regional Information Team. The need for ASCOT to accurately represent Disability Outcome measures will be tabled for the SILIT Workstream in early 2016.

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
		<p>Draft SI Outcome Measures have been agreed and require further discussion with DHSSPS and SIG colleagues to ascertain associated indicators and process for implementation and monitoring. These SI Rehabilitation Outcome measures are currently being piloted by HSCTs. Taking action to address inequalities and identify gaps in service provision is the overall rationale for the Physical & Sensory Disability Strategy 3 year Action Plan which is now entering its final phase. The Strategy Implementation Group and the SILIT/RSIG workstreams have cross agency representation from HSCB, HSCTs, PHA, DHSSPS, DENI NIHE, Community & Voluntary Sector and Service Users.</p>			
		<p>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.</p>			
		<p>A Developing Eyecare Partnership (DEP) Regional Group has been established under the leadership of Dr J McCall (PHA) and R Curran (HSCB).</p>			
		<p>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.</p>			
		<p>“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.</p>			
		<p>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.</p>			
		<p>The 5 Trusts have adopted a phased approach to the implementation of Self Directed Support (SDS). It is planned that by end March 2019 SDS will be mainstreamed across all programmes of care within each Trust. SDS NI development takes cognisance of the learning from across the UK and contacts are maintained with some Local Authorities in England. In addition the SDS initiative has undertaken a full Equality Impact assessment with the consultation concluding in May 2015. The SDS initiative introduces a co-production approach with service users and carers as equal partners in developing their support plans following assessment of need. This approach by nature is person-centered and training is currently being rolled out across the 5 Trusts over 3 levels with level 3 covering assessment and individual support planning.</p>			
		<p>The Accessible Formats policy and guidance has been issued to HSC organisations through the Regional Accessible Formats Steering Group.</p>			
		<p>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).</p>			
		<p>Making Communication Accessible for All- A Guide for HSC staff has been developed and made available in summer 2016.</p>			

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</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 Managers/ HSC organisations</p>
<p>Action 3 - Notes of Attainment: Action Completed</p> <p>This review was led by Belfast HSC Trust on behalf of all HSC Trusts. The 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. Health and Social Care Trust Equality Leads responded to the consultation on this legislation along with many other consultees including the Law Centre NI to extend the previous entitlement to allow asylum seekers free access to health care. The most recent version has been issued for comments to Health and Social Care Trust Equality Leads and to the Health and Social Care Board and DHSSPSNI Equality Leads. The booklet has</p>					

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>also been shared with the Counter Fraud Unit in the Business Services Organisation for quality assurance. Subject to general consensus on the content of the booklet, it is envisaged the resource will be made available in Autumn 2015.</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, Somali an, Polish) and further translations were requested to reflect the diversity of language needs in NI. The cost of these translations was spread across all HSC organisations.</p> <p>The booklet was heralded as timely and very informative by practitioners who have been working with Syrians and different newly arrived migrants.</p>					
<p>Action 4</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 includes care for the physical, social, psychological and spiritual dimensions of the person. 	<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 Managers</p>

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<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: Action Completed</p> <p>The purpose of the Spiritual Care Policy is to set out how spiritual care services are recognised and provided within the South Eastern Trust. This policy has been devised by Chaplains working within the South Eastern Trust as a means of clearly setting out their roles and responsibilities to patients, carers and staff. The policy recognises the unique requirements of individuals who will request spiritual/religious care often at times of great distress and is devised to meet the needs of individuals from any faith background and those with no faith. For some their spiritual needs are met by religious care - the visits, prayers, worship, rites and sacraments often provided by a faith leader or representative of the faith community or belief group. For others it is non-religious: therapeutic listening and offering formal and informal support to patients, carers and staff. The Trust by adopting this policy recognises the importance of providing holistic care to patients, their carers and staff. Equality staff have worked with the Lead Chaplain on the screening of this Policy. The Lead Chaplain and staff from Laundry Services have also been developing a Modesty garment which will meet specific requirements for some religious groups.</p>					
<p>Action 5:</p> <ul style="list-style-type: none"> Access to mental health services for minority ethnic communities. Important to consider issues relating to ethnicity and culture- Mental 	<p>Cultural Competence in Mental Health Services</p> <p>To develop an online toolkit to offer practical advice and good practice information for mental health practitioners on optimising their cultural competence</p>	<p>Draft online toolkit developed in partnership with mental health service users and representative organisations.</p> <p>Toolkit piloted with mental health practitioners across the region</p>	<p>Increased awareness among mental health practitioners of potential barriers and challenges for minority ethnic communities accessing services</p> <p>Improved access to mental health service for increasingly culturally diverse population</p>	<p>Year 1</p> <p>Monitored through Annual S75 Progress Report to Equality Commission and project steering group</p>	<p>Belfast Trust in conjunction with regional HSC representatives and Aware Defeat Depression</p>

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>Health and Ethnic minorities in mental health services.</p> <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>	To develop a DVD and associated training materials on cultural competence in Mental Health Services	Online toolkit formally launched as regional resource on PHA website	<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>		

Action 5 - Notes of Attainment: Action Completed

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 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.

An Ethnic Minorities Mental Health Toolkit, 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.

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
Action 6 <ul style="list-style-type: none"> Need for enhanced networking structures with BME communities Regional Minority Ethnic Health and Social Wellbeing Steering Group	Partnership working with BME Communities To further promote partnership working with BME organisations through networks such as Stronger Together To help to identify and address health and social care issues affecting BME communities.	Engagement process established with representative individuals and organisations Trust membership of local and regional networks Regional Funding of Network	Improved Networking with key groups Enhanced health and social care services to BME service users	Year 1 and on-going Annual monitoring via ECNI Progress Report Monitoring of Steering Group Action Plan	HSC Equality Managers

Action 6 - Notes of Attainment: Action Completed

The Regional Minority Ethnic Health and Social Well Being Network continues 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. There is a plan to expand the New Entrance Service (NINES) Project to the Southern Health and Social Care Trust area during 2015/16. In addition to this an application for funding has been made to support a Regional BME Carers Research Project. The Trust continues to be engaged with local BME Groups, these include Ards & North Down Intercultural Forum, Lisburn & Castlereagh BME Young Citizenship Project and Newry, Mourne & Down Intercultural Forum. Some of the initiatives taken forward by these Groups during the reporting year include Polish Cultural Week, May 2014, a History of Down leaflet, which was translated into 7 languages and the promotion of a BME Carers App. 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.

The HSC Trust Equality Leads attended an event hosted by the 'Stronger Together' conference at Belfast Castle entitled 'Achieving Racial Equality– A Shared Responsibility'. A welcome was extended by William Olphert, from the Chinese Welfare Association and inputs were provided by Don Flynn, Migrant Rights Network and Bernadette McAliskey who provided insight to the BME Mental Health Pilot which is funded by the PHA.

The breakout sessions included mainstreaming cohesion in community planning, racial equality strategy – making it known and creatively enabling its successful implementation, employment and employability as well as an overview of racial equality in health – key successes.

The resultant outcome from the racial equality workshop in health was a list of issues for consideration in framing HSC Trust Equality Schemes – Action Based Plans for 2017-2022.

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 7</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>Racial Equality Policy Draft Priorities and Recommendations ECNI (2013)</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>

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: Action Completed					
<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 implementation on each of these systems is planned for July / August 2015. The Ethnic Monitoring leaflet for Service Users has been translated into the top five languages by the South Eastern Trust. This has been circulated throughout the five Trusts. Information for staff in the form of Key Tips for Staff has also been circulated and is available on the Trust’s intranet sites. This information has also been included in information packs for a Regional Midwifery Conference (23-1-15). 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> <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. Most importantly, it was help HSC organisations to identify any unmet need and to target their resources according thus tackling health inequalities experienced by BME communities.</p> <p>The availability of the Guide and Supporting Monitoring materials was further circulated by HSC Trusts under covering letter to those staff with data collection responsibilities, those responsible for developing new IT monitoring systems and those directly interfacing with service users, patients and clients e.g. clinical and nursing staff, etc.</p>					

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</p> <ul style="list-style-type: none"> Low number of complaints received from deaf and hard of hearing community <p>Source: Action on Hearing Loss 2013</p>	<p>Complaints DVD</p> <p>To promote the Regional Complaints DVD: 'Complaints Procedure: A guide on How to Complain'</p>	<p>Resource available for the Deaf and Hard of Hearing Community</p> <p>Resource available on HSC Trust websites</p> <p>Promotion of availability of DVD through training and awareness events</p> <p>Alternate formats available for the submissions of, and response to, complaints</p> <p>Evaluation of the effectiveness of the DVD</p>	<p>Increased awareness among the deaf community of the complaints procedure and how to access the procedure</p> <p>Improved access for the deaf community to the complaints procedure</p>	<p>Year 1 and ongoing</p> <p>Monitoring of the number of Complaints received</p> <p>Reporting through S75 Annual Progress report</p> <p>Service User Feedback</p>	<p>HSC Trust Equality Manager</p> <p>Complaints/ Patients Liaison Manager</p> <p>RNID</p>
<p>Action 8 - Notes of Attainment: Action Completed</p> <p>The DVD 'Complaints Procedure: A guide on How to Complain' has been produced and promoted regionally. This is available on the Trust website and has been promoted to local groups. There is no notable increase in the volume of complaints from service users who have learnt about the complaints process through the DVD has been noted. Also no quantifiable increase has been identified in the number of complaints from the deaf and hard of hearing community. Various ways have been discussed with regard to potentially capturing further information – e.g. anecdotal, working with the BDA and accessing Survey Monkey.</p> <p>SET Complaints/Patient Liaison Manager is working with colleagues from other Trusts to identify any potential regional increase in complaints from this community. Also further feedback is being gathered from Survey Monkey with regard to data on how patients discovered how to make a complaint e.g. through website.</p>					

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 9</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>

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
Action 9 - Notes of Attainment: Action Completed					
<p>The Trust continues to complete its Annual Progress Report and submit to the ECNI within given timescales.</p> <p>An ECNI led event was held on the 11th March 2015 and attended by Trust Equality Manager, where a presentation on the new template was provided by Lisa King, ECNI. A follow up meeting was scheduled for the 21st April 2015 with the ECNI and HSC Trust Equality Leads to discuss in more detail the new template and expectations for submission. The new template will be completed for 2014/2015 to record progress. The Progress Report will be presented to EMT on 4 August 2015 and Trust Board on 19 August 2015 prior to submission to ECNI by 31 August 2015. Trust Equality Managers continue to feed into the consultative process led by the ECNI.</p> <p>HSC Trust Equality Leads have incorporated feedback from the Equality Commission for NI from the submission of their 2016/17 S75 Annual Progress Reports</p>					

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</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>
<p>Action 10 - Notes of Attainment: Action Completed</p> <p>A region wide review of the current equality screening was undertaken and has been piloted by 2 HSC Trusts - the Belfast Trust and the NHSCT. The trust awaits the ECNI report on this new screening template.</p> <p>Discussions about the screening template have been ongoing for some time and HSC Trust Equality Leads had engaged with the Commission on the issue that in some instances, where policies were clearly technical or clinical in nature and thus had no bearing on equality of opportunity or good relations, Service Managers and Policy Leads have highlighted issues with regard to the expectation of having to complete a lengthy form. The Commission sought reassurance that any new screening templates would be centrally quality assured and monitored.</p> <p>HSC Trust Equality Leads plan to undertake a review of their existing Equality Schemes and publically consult on revised Schemes when in receipt of outcome of the ECNI Effectiveness Review expected to commence 2017-2018.</p> <p>Consultation Timeframe</p>					
<p>Action 11</p> <ul style="list-style-type: none"> Good practice guidance required to ensure consistent and effective 	<p>Equality Impact Assessment Template</p> <p>To work with the ECNI to develop best practice Equality Impact Assessment</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</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>

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>approach</p> <p>Source: Review of Equality Scheme (ECNI)</p>	Template	<p>to follow EQIA template</p> <p>Consistent EQIA format adopted by all Trusts</p>			

Action 11 - Notes of Attainment: Action to be included in 2017-2022 Plan

As with Action 10 the Trust will work with fellow Trusts Equality leads and the ECNI to review and develop a best practice Equality Impact Assessment template. Guidance and staff training will be developed and delivered.

HSC Trusts are committed to working with the ECNI to develop best practice in relation to EQIAs. During the year under review HSC Trust Equality Leads met with consultants engaged by the ECNI at Equality House in Belfast. The consultants were commissioned to undertake research into the experiences of public authorities in relation to S75 processes - notably equality screening and Equality Impact Assessment processes. HSC Equality Leads participated fully in the research and the discussion and look forward to the findings from this research which will inform further policy and practice. HSC Trust equality leads also completed an on-line questionnaire in relation to the research.

For now HSC Trusts continue to conform with the Equality Commission for NI existing guidance on Equality Impacts Assessments.

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
Action 12 <ul style="list-style-type: none"> Multi-Identity Issues ECNI Rainbow (2014)	Multi-Identity To ensure that key multi-identity issues are incorporated into Policy and Service Developments	Update Screening and EQIA Tools to ensure they are sufficiently sensitive to multi identity issues Screening and EQIA process to include assessment of impact in relation to multi identity	Increased awareness among staff of multi-identity issues and their impact on access to Health and Social Care. Improved screening and EQIA processes	Year 2 Monitored through quarterly screening reports and S75 Annual Progress Report to Equality Commission	HSC Equality Leads
<p>Action 12 - Notes of Attainment: Action Completed – see action 10 above</p> <p>Following on from Action 10, ongoing work is being carried out to look at how the revised screening template will incorporate multi-identity issues with useful examples provided in the accompanying guidance. These Guidelines will include a better mix of worked examples and will include employment based case studies detailing potential impacts on staff e.g. centralisation of services, retraction of services and outsourcing. Procurement examples with regard to S75 categories will also be included in the revised guidelines.</p> <p>HSC Trust Equality Leads will undertake a review of their existing Equality Schemes and related processes namely Equality Screening and EQIA processes during 2017/18 primarily to take account of further guidance and outcome based related research commissioned by the ECNI.</p>					
Action 13 <ul style="list-style-type: none"> Need for greater awareness amongst Health and Social Care 	S75 Training To review S75 Training Programme so that it reflects any of the changes made to the screening and EQIA	Updated training programme reflective of new screening and EQIA resources All Trust policy makers trained in	Increased awareness policy leads and decision makers on new templates for screening and EQIA.	Year 1 Monitored through feedback from staff using template and guidance and Annual S75 Progress Report to Equality	HSC Trust Equality Leads

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>staff of Section 75 issues.</p> <ul style="list-style-type: none"> Need to further mainstream Section 75 considerations into the corporate planning cycle and core business of the Trust <p>Source: S75, NI Act 1998 Five Year Effectiveness Review</p> <p>Review of Equality Scheme (ECNI)</p>	templates	new screening and EQIA resources		Commission	
<p>Action 13 - Notes of Attainment: Action Completed</p> <p>During the period 2016-2017 Trust Equality Managers and OWD advisors continued to deliver a range of training to ensure that staff are equipped with the necessary S75 knowledge and expertise to work effectively with each other and to ensure everyone can access our services. Training includes Corporate Induction (492), Equality and Human Rights Refresher training (488), Practical Manager (128), Equality and Human Rights Freeze Training (73), Equality and Human Rights e-Learning (1287), Equality and Human Rights Directorate and team specific training including Patient Experience, QCF and student nurses (159). Uptake of training is reported annually in Trusts' ECNI Progress Reports.</p> <p>The South Eastern HSC Trust has developed an e-Learning module on Equality and Human Rights which was launched in April 2014. The module focuses specifically on Section 75 and Human Rights responsibilities. During the reporting year, over 1200 staff completed this module and feedback has been very positive. Regionally, Health and Social Care Trusts are developing an e-learning module which will be accessible through the Leadership Centre. This regional module will enable staff who move from Trust to Trust to carry forward a Equality and Human Rights as part of their ongoing Training Portfolio.</p> <p>The health and social care Discovering Diversity E-Learning Package continues to be rolled out to staff who have access to computers.</p>					

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>Action 14</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>Evidence available for future screening and equality impact assessments</p> <p>Resource for both health and social care staff and representative organisations. 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>

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
Action 14 - Notes of Attainment: Action Completed					
<p>The Emerging Themes Document has been updated regionally in partnership with the DoH and fellow trusts in May 2017. This document is available on the Trust Website and intranet. The document will continue to be updated and reviewed on an ongoing basis.</p>					
<p>Action 15</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>
Action 15 - Notes of Attainment: Action Completed					
<p>The Regional Consultation List is updated on an ongoing basis in the light of information received from organisations with regard to changes to personnel and contact details. Trusts regularly forward changes to SE Trust for inclusion. In September 2017 an audit will be carried out by SET 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> <p>The list was updated again in January 2017 to support the pre engagement event with regard to the development of the Action Based Plan and Disability Action Plan 2017 – 2022. This task is on-going i.e. reviewed annually. There are approximately 800 organisations on the master consultation lists.</p>					

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 16</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 Network)</p> <p>Health and Social Services (Reform) Northern Ireland Act 2009</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>

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
Action 16 - Notes of Attainment: Action Completed					
<p>New PPI Standards: "Setting the Standards" was formally launched on 4th March 2015. These five new regionally agreed criteria set out the new PPI standards which HSC Trusts are expected to strive to implement. This is as a model of good practice for developing PPI approaches to Health & Social Care.</p> <p>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 Trusts PPI Leads have received the training tools to allow for each Trust to roll out the PPI training locally. This will also be supported by the development of a PPI e-learning programme to complement the face to face training tools.</p> <p>HSC Equality and PPI Leads attended a regional Consultation Workshop on the 15th March 2016 - the focus of which was 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>					

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 17</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 NI (NIHRC) Equality of Opportunity and Sustainable Development in Public Sector Procurement 2008</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>

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: Action Completed					
<p>The SE Trust hosted a Regional Procurement Workshop in QIIC on 14th August 2015 focusing on Equality and Human Rights Issues in relation to the Procurement, Commissioning and Planning processes. Good practice examples and legal implications were discussed at the event. Invitations were extended to all HSC organisations with a wide range of staff from planning, contracts, management and equality attending. June Turkington, Directorate of Legal Services, BSO and Orla Donachy, Procurement and Logistics Services (PaLs) presented at the workshop which also included group work and discussion opportunities.</p> <p>Feedback from the workshop was very positive with 100% of participants saying that they found the day useful and relevant. Workshops addressing the same themes were held in each of the HSC Trusts geographical areas</p>					

SECTION 2

Service Related Issues

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

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 18</p> <ul style="list-style-type: none"> ▪ Tackle prejudicial attitudes and behaviour towards LGBT individuals ▪ Promote positive attitudes towards LBGT ▪ Raise Awareness of the rights of LGBT <p>Promoting Sexual Orientation Equality ECNI October 2013</p>	<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>To work with PHA to promote Training workshops for Healthcare Professionals</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 regionally advertised</p> <p>Training seminar held on needs of lesbian women with regard to</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 accessing maternity services.</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>

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<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>	To develop a Training Seminar to address the needs of Lesbian women with regard to access to maternity and Fertility services	accessing to maternity and Fertility services			
<p>Action 18 - Notes of Attainment: Action completed</p> <p>The Trust continues to support the LGBT Staff Forum and work with Trade Unions in support of Pride week each year. Information emails and posters are sent to all users and facilities. Information is regularly added to Trust Intranet.</p> <p>On a regional basis HSC organisations have agreed progress towards LGB&T initiatives.</p>					
<p>Action 19</p> <ul style="list-style-type: none"> ▪ For persons in need who are destitute and have no or 	<p>No Recourse to Public Funds</p> <p>To ensure that decisions in this area are compliant with key</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</p>	<p>HSC Trusts, BSO, DHSSPS, HSCB</p>

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>limited recourse to public funds.</p> <ul style="list-style-type: none"> 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>DHSSPS Consultation on 2005 Provision for services to Persons not ordinarily resident in NI (2013)</p>	<p>legislative requirements e.g. Human Rights Act.</p>			<p>Arrangements</p>	
<p>Action 19 - Notes of Attainment: Action Completed</p> <p>The Stronger Together Network will hold a seminar on Wednesday 24 June 2015 to discuss the implications faced by people that have no recourse to public funds and how they can be supported by the community and voluntary sector. The Event agenda included what 'No recourse to public funds' means and who it applies to, understanding the legislation and short, medium and long term support solutions. 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>					

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>The Counter Fraud & Probity Services has set up a Pilot in 2 Trust areas – Western HSCT and Southern HSCT. The outcome of these pilots will be evaluated to assist with next steps to be taken across health and social care. The Pilot involves a process where patients who present without GP details or Health & Care number are asked to provide proof of residency. It will be up to the patient to prove residency not the Trust. Patients will be asked to provide photographic ID along with a further piece of evidence to confirm residency. Trust Equality Leads have provided feedback and will continue to provide advice to ensure Trusts meet equality and human rights statutory obligation.</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> <p>The Stronger Together Network held a seminar on 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. 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>The Red Cross was awarded crisis funds to distribute on behalf of OFMDFM for December 2015, January 2016, February 2016 and March 2016. The Fund of up to £55,000 this financial year is intended to help minority ethnic individuals with no other means of support through emergency situations, for example vulnerable migrants, refugees and asylum seekers and other vulnerable groups. Junior Minister Jennifer McCann said: “The Fund aims to provide short term, emergency financial assistance to vulnerable groups such as refugees, asylum seekers and migrants who are facing destitution. The Red Cross will be administering the Fund and their experience in the field of crisis relief and local knowledge makes them ideally placed to help people on the ground. The Red Cross is working alongside partner organisations such as NICRAS to administer the fund. The Minority Ethnic Development Fund (MEDF) continues to support many of these partner organisations in their long-term efforts to end disadvantage and destitution.</p>					
<p>Action 20</p> <ul style="list-style-type: none"> Need for culturally sensitive services <p>NICEM Report Black and Minority Health</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>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>

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>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>		BME service users treated with dignity and respect regardless of their ethnic background			

Action 20 - Notes of Attainment: Action Completed

The Multi-Cultural and Beliefs Handbook is available on the Trust Intranet and is promoted during Equality and Human Rights staff training.

The Handbook has been updated in 2016-2017 to include information on the Roma Community. The Handbook is subject to ongoing review to reflect changes in the Trust population and current migration trends.

Designed to assist staff in ensuring they provide culturally sensitive services in their day to day work, this regional resource, which is maintained by the SHSCT on behalf of HSC Trusts, was updated during the current reporting period to reflect recent changes to the provision of the interpreting service (now managed by the BSO on behalf of the HSC family) 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 amendments included updates provided by NI Chaplaincy Service to the Jewish section and amendments necessitated by the deployment of the

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
new IT web based Portal – for the booking of interpreters					
<p>Action 21</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>ECNI - Awareness of Age Regulations 2006 and Attitudes of the General Public in Northern Ireland towards Age Related Issues</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>
<p>Action 21 - Notes of Attainment: Action to be included in 2017-2022 Plan</p> <p>The Age Discrimination Legislation has not yet been introduced. On Thursday 19 February 2015 Junior Ministers Jennifer McCann and Jonathan Bell announced proposals on the way forward for this legislation on the provision of goods, facilities and services which 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.</p> <p>Following consultation, all options will be considered before the legislation is brought before the Assembly. .</p>					

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</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>Information 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>

Action 22 - Notes of Attainment: Action Completed

Initiatives to support BME carers during 2015 – 2016 included:

- Development of an information leaflet aimed at raising awareness of carer support and details of Carer Co-Ordinators translated into 11 languages. This leaflet was distributed throughout all HSC Trusts and is available on the Trust web pages.
- 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:
- The Trust's Carers Co-ordinator, Mrs Joan Scott worked with the South Eastern Regional College to develop 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.

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"> • A support event for BME carers. • A coffee morning for BME organisations to raise awareness about Trust support 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 their families. 					
<p>Action 23</p> <p>Members of the prison population who are foreign nationals or do not speak English as a first language may be at risk of self harm.</p> <p>Source: RQIA Report Service Improvement Board</p>	<p>Use information from user involvement workshop, user satisfaction survey, complaints.</p> <p>Ensure prison staff are aware of the needs of foreign national prisoners.</p> <p>Develop awareness raising and training programme for staff.</p> <p>Put in place an effective programme of training and awareness raising.</p> <p>Improve the prison experience of foreign national prisoners.</p>	<p>Development of training and awareness programme.</p> <p>Attendance by staff at training and awareness sessions.</p>	<p>Improved experience by prisoners.</p> <p>Change in attitudes of staff and managers.</p>	<p>March 2015</p> <p>Monitor percentage of staff attending training and awareness raising.</p> <p>Feedback from training.</p> <p>Complaints.</p> <p>Number of episodes of self harm among foreign nationals in prison population.</p>	<p>SEHSCT AD Prison Health Service</p> <p>Prison Health Care Team</p> <p>Equality Managers</p>
<p>Action 23 - Notes of Attainment/ Action to be included in 2017-2022 Plan</p> <p>The Trust Training Strategy provides staff with information and awareness on the needs of foreign patients and prisoners. Staff attend Corporate Induction, Equality and Human Rights Refresher Training on a three yearly basis. The Trust e-Learning module on Equality and Human Rights continues to enable staff to access training at a time and place best suited to them. Further promotion of the training options available is regularly carried out. A Freeze Week was held</p>					

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>for Nursing, MH staff, Dentistry, Pharmacy & Medical staff. Including Equality and Diversity session on the Friday in in September and December 2016 in Maghaberry Prison. This session was well received and feedback was positive with staff appreciating the opportunity for interactive discussion. The Freeze Week is being delivered again in April 2017 in Maghaberry Prison.</p> <p>Prison Health Care Staff access Face to Face interpreters and Telephone Interpreting service as necessary to enable prisoners to participate fully in discussion and enable opinions and issues to be heard and addressed. Each health care facility has an individual access code which enables monitoring of the uptake of the service. Staff attended 'Working Well with Interpreters' training sessions in November 2016. Specific training sessions were also delivered on the new interpreter booking system in November 2016. It is planned to deliver 'Working Well with Interpreters' training twice per year in HMP Maghaberry and once per year in HMP Magilligan and Hydebank Wood YOC in the coming year.</p> <p>The Trust Good Relations Statement has been sent to all Wards and Facilities including HMP Maghaberry, HMP Magilligan and Hydebank Wood YOC where it is displayed in both Health Care Hubs and Health Care Rooms. The Multi- Cultural and Beliefs Handbook is available on the Trust Intranet and hard copies have been distributed to Prison Health Care facilities.</p> <p>The Trust has gathered information on Section 75 Complaints received during the reporting period. There were no complaints from prisoners which fell within any of the Section 75 categories.</p>					
<p>Action 24</p> <p>Feedback and involvement mechanisms for members of the prison population who are foreign nationals or those who do not speak English as a first language may be limited. This may be due to current methods used and their capability to participate meaningfully in prisoners forums.</p>	<p>Encourage representation of foreign nationals to enable representation of views and feedback.</p> <p>Address Prisoners ability to participate in discussion.</p> <p>Ensure interpreters are available.</p> <p>Encourage engagement and comprehension of discussion.</p>	<p>Prisoner forums with foreign national representation</p> <p>Interpreters available when required.</p>	<p>Improved experience for prisoners.</p> <p>Improved capability for involvement.</p> <p>Better understanding of the needs of foreign nationals for staff.</p> <p>For foreign nationals to feel involved and listened to, thus improving their interaction with healthcare services and have an improved experience in prison.</p>	<p>Minutes and agendas of prisoner forums</p> <p>Feedback from prisoners on the forums</p> <p>Feedback from user involvement workshops.</p> <p>Complaints.</p> <p>Staff feedback</p>	<p>SEHSCT AD Prison Health Service</p> <p>Prison Health Care Team</p> <p>Equality Managers</p>

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
Source: User Involvement Workshop Section 75 Audit meetings	Ensure that the views, opinions and issues of foreign nationals are heard in involvement forums and that they have a chance to feedback on healthcare provision.				
Action 24: Notes of Attainment/ Action to be included in 2017-2022 Plan					
<p>Prison Health Care Staff access Face to Face interpreters and Telephone Interpreting service as necessary to enable prisoners to participate fully in discussion and enable opinions and issues to be heard and addressed. Each health care facility has an individual access code which enables monitoring of the uptake of the service. Staff attended 'Working Well with Interpreters' training sessions in November 2016. Specific training sessions were also delivered on the new interpreter booking system in November 2016. It is planned to deliver 'Working Well with Interpreters' training twice per year in HMP Maghaberry and once per year in HMP Magilligan and Hydebank Wood YOC.</p> <p>The Trust Governance and Performance Improvement Lead for Prison Health Care attends Northern Ireland Prison Service Foreign National Forums. These forums include specific groups such as Lithuanian and Chinese prisoners. Work is also being carried out to look at how information with regard to SAI is gathered to enable better analysis of trends and patterns.</p> <p>During the Ramadan, Healthcare staff work with diabetic prisoners who wished to observe the sunrise to sunset fasting period. Approaches included reviewing insulin dosage, revising menus to provide food which was easily reheated and sourcing suitable containers which keep food warm.</p>					

SECTION 3

EMPLOYMENT

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

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 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 an 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.

Section 3 – Employment

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

Key Inequalities Identified and Source	Action Measure	Description What is it you are trying to achieve? Are there any constraints?	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
			Output	Outcome/Impact (For S75 Groups)		
Regional						
<p>Action 25</p> <p>Potential issues re. Racism and Sectarianism in the Workplace.</p> <p>Source: Racist & sectarian attitudes. PSNI stats on Sectarian & Hate Incidents & Crimes during 2009/10 increased by 15.4 % (245) & racial by 4.8% (48) in comparison to 2008/09</p> <p>Programme for Cohesion, Sharing & Integration – OFMDFM. Zero Tolerance of Abuse of HSC Staff (DHSSPS)/ Trust Policy Embracing</p>	<p>Tackle Racism and Sectarianism</p> <p>Continue to raise awareness amongst staff of racism and sectarianism and other types of Hate Crime.</p> <p>Continue to review, develop and support workplace initiatives to promote respect and cultural diversity.</p> <p>Continued roll out of training on equality and diversity and evaluation of effectiveness of on line equality training.</p> <p>Work with the Equality Commission for NI on the outworkings of the Trust's 2nd Article 55 Review document.</p>	<p>Continue to increase provision of training for all staff, specific training for managers and promotion of e-Learning Diversity training.</p> <p>Promote Good Relations Strategy and implement action plan.</p>	<p>Continue to roll out E-learning Discovering Diversity E-Learning Module.</p> <p>Equality and Diversity input to induction training with signposting to mandatory equality training for all staff.</p>	<p>Improved uptake of training and the promotion of positive attitudes on the part of staff and managers toward person with a disability</p> <p>Increased awareness of Trust equal opportunities policies and procedures (Staff Survey)</p> <p>Reduced levels of harassment complaints/equality related grievances.</p>	<p>2014-2017</p> <p>Over 3 year period. Monitoring Arrangements - Training evaluation and regional staff survey results.</p>	<p>Equality Manager and HR Assistant Director</p>

Key Inequalities Identified and Source	Action Measure	Description What is it you are trying to achieve? Are there any constraints?	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
			Output	Outcome/Impact (For S75 Groups)		
<p>Diversity Good Practice Guide for HSC Employers (DHSSPS) 2004 Recent HSC Staff Survey.</p> <p>Source: Embracing Diversity Good Practice Guide for H&SC Employers (DHSSPS)</p> <p>Source: HSC Complaints</p>						
<p>Action 25 - Notes of Attainment: Action Completed</p> <p>Trust Equality Managers deliver a range of training to ensure that staff are equipped with the necessary S75 knowledge and expertise to work effectively with each other and to ensure that patients and client including prisoners can access our services. Training includes Corporate Induction, Equality and Human Rights Refresher training, Practical Manager, Directorate and Team Specific training including Patient Experience, QCF and student nurses. Uptake of training is reported annually in Trusts' ECNI Progress Reports.</p> <p>The South Eastern HSC Trust has developed an e-Learning module on Equality and Human Rights which was launched in April 2014. The module focuses specifically on Section 75 and Human Rights responsibilities. During the reporting year, over 1200 staff completed this module and feedback has been very positive. .</p> <p>The Health and Social Care Discovering Diversity E-Learning Package continues to be rolled out to staff who have access to computers.</p> <p>The Trust has a Good Relations statement which is included in staff training and has been distributed to wards and facilities for display on patient and staff notice boards. The Trust plans to develop a Good Relations Strategy as part of the 2017 -2022 Action Based Plan</p>						

Key Inequalities Identified and Source	Action Measure	Description What is it you are trying to achieve? Are there any constraints?	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
			Output	Outcome/Impact (For S75 Groups)		
<p>Action 26</p> <p>Under representation of People with disabilities employed in the Trust (2% self-declaring that they have a disability)</p> <p>Employment rate of those without disabilities (79%) is over twice that of people with disabilities (32%).</p> <p>Source: Statement of Key Inequalities in NI (ECNI 2007).</p> <p>Employment inequalities in an Economic Downturn ECNI 2010</p> <p>Source: Trust's Disability Action Plans (DDA 1995 as amended)</p> <p>Source : Analysis of Trust equality opportunity monitoring reports</p>	<p>Increasing employment and involvement of disabled people</p> <p>Continued Implementation of the Trust's Disability Action Plan and Regional Framework on the Employment of Persons with a Disability.</p> <p>Increase in employment of marginalised groups (disabled persons)</p> <p>Ensure existing employees who are or who become disabled are supported and facilitated through the Trust's reasonable adjustment arrangements and, where appropriate, conditions management scheme.</p> <p>Provide disability training programme for managers</p>	<p>Increase in employment of marginalised groups (disabled persons)</p> <p>Higher incidence of staff members self-declaring that they have a disability and increased uptake of reasonable adjustments in the workplace.</p> <p>Promote awareness amongst managers of reasonable adjustment duty</p> <p>Raise awareness among managers of potentially discriminatory statements/criteria or questions at interview.</p> <p>Make sure all panels are aware of the policy.</p> <p>To ensure panels are aware of their duties. Ensure appropriate assessments are carried out.</p>	<p>Identify appropriate areas of the media for advertising jobs to reach a wider audience of people with disabilities</p> <p>Develop closer links with DES (Disabled Employment Service)</p> <p>Provide training for managers on reasonable adjustments.</p>	<p>Enables disabled people to become economically and socially active in the workplace and in the community.</p> <p>Inform DES of vacancies</p> <p>Promote participation and involvement of employees and persons with a disability.</p> <p>Promote a culture that empowers and supports disabled employees in the workplace; and that promotes and facilitates positive attitudes towards employees and person with a disability.</p>	<p>Monitoring Arrangements – HRPTS</p> <p>As above</p>	<p>HSC Employment Managers</p> <p>Equality Managers</p> <p>Occupational Health Staff</p> <p>Trade Unions</p> <p>Service Managers</p> <p>Disability Sector</p>

Key Inequalities Identified and Source	Action Measure	Description What is it you are trying to achieve? Are there any constraints?	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
			Output	Outcome/Impact (For S75 Groups)		
	<p>Actively review recruitment documentation such as Job Descriptions and specifications to ensure they are non-discriminatory</p> <p>Where a candidate has a disability, remind panels of duties under DDA.</p> <p>Ensure reasonable adjustments for interview are put in place and considered at interview.</p> <p>Put reasonable adjustments in place for new appointees and existing employees with a disability.</p> <p>Review induction processes for employees with a disability.</p> <p>Ensure staff and managers are aware of physical accessibility issues and that it is unacceptable to park in</p>	<p>Assess individual induction needs and develop tailored programmes where necessary.</p> <p>Consider signage issues.</p> <p>Identify suitable partners and areas of work.</p> <p>Ensure staff are aware of guidance.</p>				

Key Inequalities Identified and Source	Action Measure	Description What is it you are trying to achieve? Are there any constraints?	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
			Output	Outcome/Impact (For S75 Groups)		
	<p>designated spaces.</p> <p>Develop a pilot to implement work experience and placement opportunities for people with disabilities.</p> <p>Ensure disabled staff are made aware of flexible working opportunities within the Trust that may assist them with their disability.</p>					

Action 26: Notes of Attainment/ Action completed

The Trust continued to implement the Disability Action Plan 2014-2017 during the reporting year and has developed its 2017-2022 Disability Action Plan which is currently being consulted on. This includes promoting positive attitudes towards disabled people and encouraging the participation of disabled people in public life. The Trust works closely with people with disabilities as well as disability advocacy groups. For further detail on initiatives please see the Disability Action Plan 2014-2017 and Annual Progress Report 2016-2017 - part B.

With the deployment of HRPTS – staff are now able to log into the Employee Self Service side of this relatively new system to update their own Equality and Diversity Data which includes disability and ethnic background data

The Trust continues to promote awareness amongst managers on providing reasonable adjustments for supporting existing employees who are or who become disabled.

Key Inequalities Identified and Source	Action Measure	Description What is it you are trying to achieve? Are there any constraints?	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
			Output	Outcome/Impact (For S75 Groups)		
<p>Action 27</p> <p>Lack of fair participation in the workplace. 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>ECNI Annual Fair Employment Monitoring Report No 23</p>	<p>FETO Completion of Article 55 Review Report in line with Fair Employment and Treatment (NI) Order 1998.</p>	<p>Fair participation in the workforce</p>	<p>Participate 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>HSC Trusts to continue to work with the ECNI in addressing any localised labour force issues</p>	<p>Both main communities in NI are fairly represented in the workplace.</p>	<p>2014-2017</p>	<p>SEHSCT Human Resource staff</p> <p>Equality Managers</p> <p>Organisation Workforce Development</p>
<p>Action 27: Notes of Attainment: Action to be completed June 2017</p> <p>The Article 55 Review Report is completed every three years by the Trust and will be completed in 2017. The Equality Commission has met with Employment Equality leads to discuss the findings from the reviews and the Trust takes forward actions as they relate to their local workforce.</p> <p>The Trust will submit its Article 55 return in June 2017</p> <p>The ECNI has agreed to undertake further research as regards emerging trends in partnership with local universities and will discuss their findings with HSC Trusts.</p>						

Key Inequalities Identified and Source	Action Measure	Description What is it you are trying to achieve? Are there any constraints?	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
			Output	Outcome/Impact (For S75 Groups)		
Action 28 Source: Sex Discrimination (Gender Reassignment) Regulations (NI) 1999	Development of a Regional Transgender Policy	<p>To promote an inclusive workplace where:</p> <p>Transgender people feel comfortable to express their gender identity;</p> <p>transgender people can fulfill their full potential and fully contribute to the workplace;</p> <p>all staff 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>Policy which promotes best practices across the HSC sector</p>		<p>Year 1</p>	<p>Business Services Organisation and Equality Managers</p>

Action 28: Notes of Attainment: Action to be included in 2017-2022 Plan

The Trust has been involved with the Regional development of the Transgender Policy. The first meeting was held on Thursday 8 May 2014 in the Business Services Organisation and was very productive. Discussion centred on areas requiring legal clarity including the scope of protection and records management/disclosure. BSO agreed to engage with legal service on the following issues including absence management and handling of information records

General agreement was reached that the policy should be short and that protocols for managers, staff and HR should be produced separately to underpin/assist with the roll out of the policy in the workplace. Training materials will also to be produced and a timeline for key activities and consultation agreed.

It was also agreed that the development of the policy will be progressed in conjunction with transgender sector, the trade unions and the HR Network. A 12-week

Key Inequalities Identified and Source	Action Measure	Description What is it you are trying to achieve? Are there any constraints?	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
			Output	Outcome/Impact (For S75 Groups)		
<p>public consultation will be built into the process prior to submission to the regional HR network, HR Directors Forum and trade unions for endorsement prior to sign off by EMT and Trust Board.</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. Ultimately, the final draft will be submitted to the HR Directors Forum.</p>						
<p>Action 2</p> <p>Trust Domestic Violence Policy for Staff.</p> <p>Source: HSC Emerging Themes Document 2010</p> <p>Women's Aid</p> <p>Unison</p>	<p>To raise awareness of domestic abuse and offer support to staff.</p>	<p>Develop Workplace Policy.</p> <p>Establish domestic violence support worker service.</p> <p>Staff training and awareness sessions</p>	<p>Policy launched.</p> <p>Circulated policy throughout Trust.</p> <p>Awareness raising sessions. Specific training sessions for domestic violence support workers.</p>	<p>Make workplace more supportive and secure for those impacted by domestic violence.</p> <p>Greater awareness of domestic violence in the work place.</p>	<p>March 2015</p> <p>Annual review of policy and training evaluation.</p> <p>Feedback from staff.</p>	<p>SEHSCT Human Resources Staff,</p> <p>Social Work Staff</p> <p>Equality Managers</p> <p>Trade Unions</p> <p>Domestic Violence Partnership Board</p>
<p>Action 29: Notes of Attainment: Action Completed</p> <p>The Trust has developed a policy on 'Domestic Violence and Abuse in the Workplace' and also a Policy on 'Routine Enquiry regarding Domestic Abuse for Nurses, Midwives and Health Visitors in the Children's and the Women and Acute Child Health Directorates'. These policies are available for all staff on the Trust Intranet.</p> <p>Domestic Violence Awareness Raising sessions have been delivered to staff by the South Eastern Domestic Violence Partnership in March 2015. These half day awareness raising sessions provide an overview of domestic violence and explore the potential barriers to seeking help. Sessions this year have been delivered in Lisburn and Comber.</p> <p>The Regional Minority Ethnic Health and Social Well Being Network continue to support the Stronger Together Network. During the reporting year, one BME</p>						

Key Inequalities Identified and Source	Action Measure	Description What is it you are trying to achieve? Are there any constraints?	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person																		
			Output	Outcome/Impact (For S75 Groups)																				
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.																								
Action 30 Employability Scheme for Looked After Children Source: Statement of Key Inequalities in NI(ECNI 2007) HSC Emerging Themes Document 2010 Care Matters NI – A Bridge to a Better Future 2007	South Eastern Trust in partnership with the Department of Employment and Learning developed an affirmative action measure to increase the employment and work opportunities for looked after young people and care leavers. This was part of the Corporate Parenting role.	This will help reduce barriers to employment for this group by providing work placements which could lead to permanent positions within the Trust and other partner organisations.	Work placement for looked after children within the Trust and partner organisations. Currently 12 placements available.	Increased employment opportunities for looked after children. Enhanced participation and engagement for this marginalised group in society.	Employment placements available for 12 young people for 6-12 months. Tracking of placement outcomes and success/fall out rates.	SEHSCT Human Resources Staff Children's Services Staff Promoting Health and Well Being Staff																		
Action 30: Notes of Attainment: Action to be included in 2017-2022 Plan As part of the Trust Corporate Social Responsibility Action Plan 2016-2018, the Trust has been working with Business in the Community to continue to engage in the Charter Work Inspiration Programme. The Trust currently supports 9 staff who volunteer as part of the Time to Read initiative in local schools in Belfast, Newtownards, Lisburn, Ballygowan and Dundonald. The Trust will be recruiting in August 2017. Since 1 April 2016 – 31 March 2017 the Trust facilitated 452 placements and 65 open days. These included opportunities in :																								
<table border="1"> <thead> <tr> <th>Occupation Area</th> <th>Placements</th> </tr> </thead> <tbody> <tr> <td>Admin&Medical Records</td> <td>2</td> </tr> <tr> <td>Catering</td> <td>4</td> </tr> <tr> <td>CBIT Team</td> <td>1</td> </tr> <tr> <td>Central Sterile Supplies</td> <td>1</td> </tr> <tr> <td>Childcare/Surestart</td> <td>2</td> </tr> </tbody> </table>		Occupation Area	Placements	Admin&Medical Records	2	Catering	4	CBIT Team	1	Central Sterile Supplies	1	Childcare/Surestart	2	<table border="1"> <thead> <tr> <th>Occupation Area</th> <th>Open Days</th> </tr> </thead> <tbody> <tr> <td>Dietetics</td> <td>21</td> </tr> <tr> <td>Physiotherapy</td> <td>44</td> </tr> </tbody> </table>		Occupation Area	Open Days	Dietetics	21	Physiotherapy	44			
Occupation Area	Placements																							
Admin&Medical Records	2																							
Catering	4																							
CBIT Team	1																							
Central Sterile Supplies	1																							
Childcare/Surestart	2																							
Occupation Area	Open Days																							
Dietetics	21																							
Physiotherapy	44																							

Key Inequalities Identified and Source	Action Measure	Description What is it you are trying to achieve? Are there any constraints?	Performance Indicator		Timescale & Description of Monitoring Arrangements	Lead Person
			Output	Outcome/Impact (For S75 Groups)		
Children's Nursing- Disability	1					
Dentistry	1					
Endoscopy	1					
HR	1					
Labs	21					
Medical Programme	143					
Midwifery	75					
Nursing	139					
Occupational Therapy	10					
Paediatrics	1					
Pharmacy	1					
Physiotherpay	3					
Psychology	2					
Radiography	11					
Social Care	21					
Speech&Language	3					
Summer Scheme (Child Care)	8					

Trust Equality Scheme S75 Action-based Plan