

Screening Outcome Report 1st January 2026 – 31st March 2026

Introduction

Section 75 of the Northern Ireland Act 1998 requires the Trust, when carrying out its functions in relation to Northern Ireland, to have due regard to the need to promote equality of opportunity between nine categories of persons, namely:

- between persons of different religious belief, political opinion, racial group, age, marital status or sexual orientation;
- between men and women generally;
- between persons with a disability and persons without; and
- between persons with dependants and persons without.

Without prejudice to its obligations above, the Trust must also have regard to the desirability of promoting good relations between persons of different religious belief, political opinion or racial group.

The Equality Scheme outlines how we propose to fulfil our statutory duties under Section 75. Within the Scheme, the Trust gave a commitment to apply the screening methodology below to all new and revised policies and if necessary to subject policies to equality impact assessment. (EQIA)

Screening Methodology

For new or revised policies/proposals the Trust will consider the following four screening questions as per ECNI guidance:-

- What is the likely impact of equality of opportunity for those affected by this policy/proposal, for each of the Section 75 equality categories?
- Are there opportunities to better promote equality of opportunity for people within Section 75 equality categories?
- To what extent is the policy/proposal likely to impact on good relations between people of different religious belief, political opinion or racial group?
- Are there opportunities to better promote good relations between people of different religious belief, political opinion or racial group?

In keeping with the Trust's commitments in its Equality Scheme the Trust has applied the above screening criteria to new policies and proposals.

The screening process is used to identify which policies are likely to have an impact on equality of opportunity and/or good relations. Screening assesses the likely impact of the policy as major, minor or none.

If it is decided that a policy/proposal is likely to have major issues relating to equality, it is then necessary to consider carrying out a more detailed exercise called an equality impact assessment.

This screening report outlines the screening outcomes from the date of formal approval of the Trust's revised Equality Scheme i.e. 14th September 2011 and will be produced each quarter thereafter.

Communication & Engagement

In order to carry out our functions there is a need to continue to effectively engage and work collaboratively with a wide range of stakeholders including Trust staff, Trade Unions, service users, carers, commissioners, voluntary/community sector, public representatives and independent providers.

The Trust is committed to promoting personal and public involvement in all its activities. The development of new policies and proposals will be supported by effective engagement processes to ensure that staff, service users and all interested parties are fully involved. Planning for, and delivering safe, clinically effective and cost effective services requires close collaboration at many levels.

If you have any queries about this document, and its availability in alternative formats (including Braille, disk and audio cassette, and in minority languages to meet the needs of those who are not fluent in English) then please contact:

Susan Thompson
Equality Manager

Textphone: 028 9151 0137
Mobile: 07525898850
Fax: 028 9151 2171
Email:
susan.thompson@setrust.hscni.net

Outcome of Screening

The screening outcomes are outlined below. Four possible outcomes are recorded:

- 1 The policy has been **'screened in' for equality impact assessment;**
- 2 The policy has been **'screened out' with mitigation or an alternative policy proposed to be adopted;**
- 3 The policy has been **'screened out' without mitigation or an alternative policy proposed to be adopted.**
- 4 The policy will be **subjected to ongoing screening.** For more detailed strategies or policies that are to be put in place through a series of stages, screening should be considered at various times during implementation.

| Description of Policy or Proposal | Screening Outcome | Reason for Reaching Screening Outcome |
|--|-------------------|---|
| Medical Devices Policy The purpose of this Trust Policy is to provide staff, statutory authorities and other stakeholders, relevant information on the Trust's medical devices roles and responsibilities, management structure and management precautions in place for demonstrating compliance with statutory obligations, regulatory guidance and industry best practice. | Out | The Trust will continue to monitor this policy by; <ul style="list-style-type: none">• Medical Devices & Equipment Management Sub-Committee quarterly meetings• Various safety related Trust committees• Feedback from Trust consultation |

| Description of Policy or Proposal | Screening Outcome | Reason for Reaching Screening Outcome |
|--|-------------------|---|
| <p>Venepuncture Policy</p> <p>The policy is for use by all South Eastern Health and Social Care Trust (the Trust) medical, nursing /midwifery and phlebotomists employed at Band 3 or above who have been deemed competent in performing venepuncture, via the relevant training in the Trust and where the remit of their role requires them to withdraw blood samples and send blood samples to the laboratory in inpatients and outpatients. Staff who can provide evidence of competency gained outside the Trust will be accepted as competent. (Excluding neonatal staff who follow their own guideline).</p> | Out | <p>The Trust will continue to monitor this policy by:</p> <ul style="list-style-type: none"> • Datix forms |
| <p>SEPSIS: Recognition, Diagnosis and early management in women during and following delivery</p> <p>To facilitate the early recognition of SEPSIS and ensure timely escalation</p> | Out | The Trust will continue to monitor this policy. |
| <p>Pest Control Policy</p> <p>The policy aims to ensure effective pest control across all Trust-owned and leased premises by preventing infestation and maintaining safe, hygienic environments. It seeks to work proactively with contractors and suppliers to eliminate existing issues and prevent recurrence. The Trust is committed to promoting a culture of safety, implementing risk assessments and minimising risks to staff, patients, and the wider community. Continuous improvement and collaboration with external organisations underpin these objectives.</p> | Out | <p>The Trust will continue to monitor this policy by;</p> <ul style="list-style-type: none"> • Estates meetings held regularly between Estates personnel and contractors and meetings with service users • Various safety related Trust committees • Feedback from Trust consultation • Feedback from DATIX incident reports and investigations |

| Description of Policy or Proposal | Screening Outcome | Reason for Reaching Screening Outcome |
|---|-------------------|--|
| <p>Artificial Intelligence (AI) Policy</p> <p>This policy sets out the framework for the ethical, safe, lawful, and effective use of Artificial Intelligence (AI) technologies within the Trust. It applies to all staff and covers all AI use cases, including clinical, administrative, analytical, operational, and generative AI systems. The policy:</p> <ul style="list-style-type: none"> • Establishes governance requirements for the procurement, approval, deployment, monitoring, and retirement of AI systems. • Sets mandatory safeguards related to information governance, cybersecurity, data protection, clinical safety, and human oversight. • Ensures alignment with UK GDPR, Data Protection Act 2018, clinical safety standards, HSC cyber requirements, and emerging AI regulatory frameworks. • Supports responsible adoption of AI to enhance quality, productivity, safety, and integrity of care and operations. | <p>Out</p> | <p>The Trust will continue to monitor this policy by;</p> <p>The Trust AI Oversight Group (AIOG) will oversee the implementation of this policy and monitor the assurance provided.</p> <p>AIOG will ensure that appropriate monitoring arrangements are in place for all AI projects and will receive regular reports from all live AI projects within the Trust. The Trust reserves the right to access, monitor and audit the use of AI applications to ensure compliant use of these systems.</p> <p>Moreover, monitoring will likewise be informed by:</p> <ul style="list-style-type: none"> • Staff Feedback • Appraisal Conversations • Complaints and Compliments • Grievances • Service User feedback eg Care Opinion <p>Users who fail to comply with any provision of these terms may be subject to organisational HR processes which may result in disciplinary action. User violations that are considered a breach of contract may result in removal from assignment. Any AI-related activities that appear to violate applicable legislation will be reported to appropriate authorities.</p> |
| <p>Procedure for capturing images of Paediatrics and Neo-Natal patient on Encompass Devices.</p> <p>This SOP sets out the required process for the management of all images of children including safeguarding and intimate images to reduce the risk of inappropriate access to the images in the Encompass system.</p> | <p>Out</p> | <p>The Trust will continue to monitor this policy by;</p> <ul style="list-style-type: none"> • Complaints • Datix |

| Description of Policy or Proposal | Screening Outcome | Reason for Reaching Screening Outcome |
|--|-------------------|--|
| <p>The SOP aims to ensure safe, confidential and appropriate capture of paediatric and neo-natal images within Encompass, incorporating enhanced privacy, security and safeguarding standards.</p> | | |
| <p>First Aid</p> <p>This policy provides guidance on the arrangements for First Aid at Work within all South Eastern Health and Social Care Trust owned, leased or managed premises and property. This policy derives from the Health & Safety (First-Aid) Regulations (Northern Ireland) 1982.</p> | <p>Out</p> | <p>The Trust will continue to monitor this policy by:</p> <p>This will be included in the departmental / internal / external audit arrangements for this policy.</p> |
| <p>Emergency Preparedness, Resilience and Response (EPRR)</p> <p>The objective of this policy is to ensure that the Trust is aligned with Emergency Preparedness, Resilience and Response (EPRR) principles, in particular that the Trust has adequate plans to prepare for, respond to and recover from incidents.</p> | <p>Out</p> | <p>The Trust will continue to monitor this policy by:</p> <p>This will be included in the departmental/internal/external audit arrangements for this policy.</p> |