

Screening Outcome Report 1st April 2018 to 30th June 2018

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 to 31st March 2012 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:

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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
<p><u>Your Right to Raise a Concern (Whistleblowing) Policy</u></p> <p>This Policy has been developed regionally, in response to the recommendations arising from the Regulation and Quality Improvement Authority's (RQIA) Review of the Operation of Health and Social Care Whistleblowing Arrangements.</p>	Out	<p>The Policy was deemed to have no impact. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by:</p> <ul style="list-style-type: none"> • Information will be provided for the Trust Audit Committee • Lessons learned forum • Regional returns and outcomes
<p><u>Guidelines for the investigation, control and prevention of spread of Group A Streptococcal (GAS) infection</u></p> <p>This is a revised policy providing advice to Health Care Workers on the Management of patients presenting with GAS or iGAS infections.</p>	Out	<p>The Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by Ongoing monitoring of the implementation of the guideline and response/ action to concerns raised.</p>

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<p><u>Grievance Procedure</u></p> <p>This is a policy that has been reviewed – completed regionally and to be adopted in each Trust. The Trust recognises the right of employees to seek a satisfactory resolution to their grievances.</p> <p>The purpose of this procedure is to provide an employee or group of employees with the opportunity to have their grievance considered quickly and effectively.</p>	Out	The Policy was deemed to have a minor impact. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by monitoring of grievances.
<p><u>Visiting Guidelines for SET</u></p> <p>This is a revised policy :</p> <ul style="list-style-type: none"> • To support visiting arrangement for families and friends • To allow staff time to provide care for patients as and when it is required • To ensure the provision of adequate rest time for patients • To provide patients adequate time to have their meals free from interruption • To facilitate cleaning in the wards • To promote safe and effective infection prevention and control measures 	Out	The Policy was deemed to have no impact and was screened out.
<p><u>Management of the Northern Ireland Central Alert System</u></p> <p>This is a revised policy replacing SABS policy to provide guidance for staff in the reporting of incidents involving medical devices and their circulation of Alerts.</p>	Out	The Policy was deemed to no impact and was screened out. The Trust undertakes to monitor the application of the policy and review regularly.
<p><u>Patient Information Policy</u></p> <p>This is a revised policy to ensure that all patient/client information produced and distributed by the Trust is clear, concise, clinically appropriate and professionally presented.</p>	Out	<p>The Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by:</p> <ul style="list-style-type: none"> • Patient Information leaflets reviewed by authors at least annually • Monitoring will be included in the

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		departmental/internal/external audit arrangements for this policy. <ul style="list-style-type: none"> Complaints and Compliments
<p><u>Policy for Professional and Managerial Supervision for Radiographers, Clinical Scientists and Vascular Technicians</u></p> <p>Supersedes SET/Gen (106) 2014</p> <p>This policy clearly outlines good practice guidelines which must be followed to ensure that there are appropriate systems and processes in place for the supervision, support and overall management of staff.</p>	Out	<p>The Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by:</p> <ul style="list-style-type: none"> Policy has a review date and is evidenced based The Modality Leads are responsible for monitoring/auditing the effectiveness of the measures in place with regard to staff supervision, management and support. All staff are responsible for actively participating in the process which has been put in place to facilitate their supervision, management and support.
<p><u>Guidance for Healthcare Workers with Symptoms of Infection</u></p> <p>This is a new policy to provide advice to Health Care Workers on the Management of Healthcare Workers with Symptoms of Infection.</p>	Out	<p>The Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by ongoing monitoring of the implementation of the guideline and response/ action to concerns raised.</p>
<p><u>Pre-operative fasting in adults and children</u></p> <p>This is a revised policy providing guidance to clinical staff on the recommended fasting times for adults and children undergoing procedures requiring anaesthesia.</p>	Out	<p>The Policy was deemed to have no impact and was screened out.</p>
<p><u>Guidelines on the Disruption of water supplies affecting</u></p> <p>This is a revised policy providing information and actions to staff working in Trust facilities and hospitals where water supplies may be temporarily affected, to</p>	Out	<p>The Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by: regular meetings by the multi-disciplinary SET Water Safety Group</p>

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ensure continued safe provision of water.		and Key worker feedback.
<p><u>Management of Organisational Change Framework</u></p> <p>This is a new policy. The framework outlines the principles for managing organisational change. It aims to ensure change is managed in a way which is supportive to staff, maximises the security of employment and ensures continuity of service.</p>	Out	The Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by monitoring within HR of issues related to implementation and ongoing Screening is integral to monitoring processes as the framework is rolled out.
<p><u>Retention and Storage of Images and Radiological Patient Data</u></p> <p>Supercedes SET/PtCtCare(98) 2012.</p> <p>The policy clearly defines the guidelines in relation to the retention, storage of images and radiological patient data. This is achieved by outlining legislation from Guidelines for Managing Records in Health and Personal Social Services Organisations in Northern Ireland.</p>	Out	<p>The Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by:</p> <ul style="list-style-type: none"> • the Trust's PACS Manager will regularly monitor the integrity of the stored data in the local archives and take remedial action if required • all managers and professional leads to ensure that staff are made aware of this policy • staff to familiarise themselves with and adhere to the contents
<p><u>Trans Anal Irrigation</u></p> <p>This is a revised policy. The purpose of this guideline is to inform designated practitioners in the safe administration of transanal irrigation in the SE Trust.</p>	Out	<p>The Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by:</p> <ul style="list-style-type: none"> • Monitoring patient complaints/compliments/IR1 forms • Feedback from staff • Feedback from patient satisfaction surveys
<p><u>Ward Order Communications (WOC) Protocol</u></p> <p>This is a revised policy which aims to provide direction to staff as to</p>	Out	The Policy was deemed to have no impact and was screened out. <i>All incidents and/or complaints raised re: the protocol will be investigated and actioned as per Trust procedure.</i>

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<p>how the WOC system should be used for the ordering and receipt of Laboratory test requests – the successful use of the WOC system depends on the adherence to the protocol.</p>		
<p><u>Protocol for Performing the 18+0 to 20+6 Weeks Fetal Anomaly Scan</u></p> <p>This is a revised policy.</p> <p>This protocol is a set of measurable, objective standards to determine a course of action. Professional judgement may be used in the application of this protocol.</p> <p>The aim is to ensure that staff are familiar with the procedures to follow for the 18+0 to 20+6 week anomaly scan.</p> <p>This protocol has been developed to aid the management of all woman’s who consent to and attend for the 18+0 to 20+6 week anomaly scan.</p>	Ongoing	<p>The Trust has carried out an Equality Screening of this policy and identified that there may be a potential minor adverse impact for services users from certain religious or ethnic minority backgrounds. These women may have specific beliefs id a life limiting abnormality is detected. The Trust will work with all service users to ensure that they receive the care which best meets their needs. The Trust will carry out ongoing screening of the policy 3 months following implementation.</p>
<p><u>SET Policy on Adult Safeguarding and Adult Protection</u></p> <p>This is a revised policy. The purpose of this policy is to make clear the requirements of the Trust in ensuring that where harm is caused it can be identified and dealt with through direct Trust service provision or commissioned services.</p>	Out	<p>The Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by:</p> <ul style="list-style-type: none"> • Review of Regional Policy/Procedures • Internal and external audits • Complaints/compliments • DSF monthly safeguarding activity reports • Supervision • Social Work/Designated Officer/ Trust Safeguarding Forums • Safety & Quality Adult Safeguarding Subcommittee meetings

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<p><u>Care of the Deceased Patient and their Family (Formerly Last offices Policy) for SET Hospitals</u></p> <p>This is a revised policy:</p> <ul style="list-style-type: none"> • Guidance to Nursing and Health Care Assistants on the care provided to the Patient and family following death. • By providing a clear researched based procedure for the care of the deceased. Policy based upon new regional guidance issued by the CNO. • No obvious constraints to the implementation of the policy. 	Out	The Policy was deemed to have no impact and was screened out. The Policy will undergo a mandatory 3 year review and consultation process.
<p><u>Paediatric Nasogastric Tube Management</u></p> <p>This is a new policy providing guidance on safe practice of Nasogastric Tube Management in children.</p>	Out	The Policy was deemed to have no impact and was screened out.
<p><u>Social Media Policy</u></p> <p>This is a new policy. The purpose of this policy is to ensure that staff are aware of their responsibilities for the appropriate use of social media they may access in a personal or professional context.</p> <p>The policy aims to:</p> <ul style="list-style-type: none"> • help staff to use social media in a responsible way as an employee of the Trust when using any social networking site. • provide managers and individual employees with information to consider before participating in or developing any new social media application and to 	Out	<p>This is a new policy that has not yet been implemented. Complaints and issues connected to the policy will be reviewed in 12 months from implementation.</p> <p>The Head of Communications is responsible for the management of the Social Media Policy within the Trust and will provide leadership, direction and oversight of the Trust's Social Media Strategy.</p>

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<p>help them get the best out of the tools available whilst maintaining a safe professional environment and protecting themselves as well as the organisation.</p> <ul style="list-style-type: none"> ensure staff are aware of all relevant legislation and standards relating to online information, including codes of practice from related professional bodies. 		
<p><u>Care of the Deceased Patient and their Family (Formerly Last offices Policy) for SET Hospitals</u></p> <p>This is a revised policy:</p> <ul style="list-style-type: none"> Guidance to Nursing and Health Care Assistants on the care provided to the Patient and family following death. By providing a clear researched based procedure for the care of the deceased. Policy based upon new regional guidance issued by the CNO. No obvious constraints to the implementation of the policy. 	Out	The Policy was deemed to have no impact and was screened out. The Policy will undergo a mandatory 3 year review and consultation process.
<p><u>Guideline for the investigation and management of headache during pregnancy and the puerperium</u></p> <p>This is a revised policy trying to achieve a consistency of evidence based approach when managing these women in order to provide the best clinical care.</p>	Out	The Policy was deemed to have no impact and was screened out.
<p><u>Policy for Intravenous (IV) Fluid Prescription in Adults</u></p> <p>This is a new policy to promote</p>	Out	The Policy was deemed to have no impact and was screened out. Monitoring will be available via the trust incident reporting system and Annual

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best practice in care of patients receiving intravenous fluid therapy according to regionally endorsed national guidelines, thus ensuring delivery of high quality, safe and effective care.		FBC chart audit.