



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

**Contact:**

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

<http://www.setrust.hscni.net/2081.htm>

**Signature:**

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

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

**This report reflects progress made between April 2015 and March 2016**

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

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

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

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

#### **Section 75 Action Based Plan**

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

Examples of some of the key outcomes from the implementation of the Plan to date are as follows:

- Implementation of the findings of the review of interpreting support for health and social care appointments commissioned by the Health and Social Care Board (HSCB) resulting in the transfer of management responsibility from Belfast Health & Social Care Trust (BHSCT) to the Business Services Organisation (BSO) 1st October 2014.
- Review and launch of a Health and Social Care Booklet to provide information about health and social care to people from minority ethnic backgrounds who have moved to Northern Ireland. The Booklet is now available on the Trust website in a number of languages.
- Development of "Making Communication Accessible" to ensure that those with a disability can access information and services.
- Improved ethnic monitoring of service users in a number of health and social care information systems. This work was positively referenced by the OFMDFM Race Equality Unit.

#### **Multi-Cultural and Beliefs Handbook**

The Multi-Cultural and Beliefs Handbook is available on the Trust Intranet and is promoted during Equality and Human Rights staff training. This has proved to be a very useful resource for staff. Please see link below:

[Multi Cultural and Beliefs Handbook](#)

The Handbook has been updated 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.

### **Provision of Face to Face and Telephone Interpreting**

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. This is a part of the Trusts commitment to ensuring and promoting equality of access to all our services. During 2015-16 the total number of interpreting episodes was 5693 with the top four languages being Polish, Lithuanian, Chinese and Russian. To support this work the Trust has, in conjunction with the NIHSCIS Manager, delivered 3 Working Well with Interpreters training sessions to 34 staff in Downpatrick, Lisburn and the Ulster Hospital

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 work on the development of a web-based portal for booking interpreters. This system also comprises an interface with Finance which significantly reduces the volume of paper invoices produced. Work has been ongoing with thebigword, the telephone interpreting provider, to ensure that they can cater for the anticipated increase in demand as the new IT system went live in January 2016. Guidance and training was provided for Trust Staff and a total of 275 staff successfully self registering to access the new system between January and March 2016.

### **Making Communication Accessible for All**

The Trust has made available to staff the 'Making Communication Accessible for All Guide'. This document presents guidelines, tips and advice and aims to help staff think differently about communication both written and verbal. The guide has been written to help staff communicate more effectively with people who may have a disability or communication support need.

This Document is available on the Equality and Human Rights Intranet pages and in alternate formats and languages on request. Please see link below:

[Making Communication Accessible for All Guidance](#)

### **Ethnic Monitoring**

A Guide to the Ethnic Monitoring of Service Users in Health and Social Care in Northern Ireland along with supporting materials was launched and distributed in February 2016. Trust Equality Leads played a significant role throughout the development of the guidance. The guidance aims to help health and social care commissioners and providers to robustly capture critical patient/service user information.

This will help HSC organisations to develop and enhance service provision to all members of the community, respond to the needs of the changing society, and also help to ensure that Equality and Human Rights obligations are met.

The following Ethnic Monitoring supporting materials are available on the Equality and Human Rights Intranet pages:

- 'Supporting Your Needs' (leaflet) which is available in English, Slovak, Chinese, Lithuanian, Polish and Portuguese.
- 'Key Tips for Staff' (poster)

### **Good Relations**

As part of its good relations work the Trust has a Good Relations Statement which is included in staff training and has been distributed to wards and facilities including clinics, health centres, EPHs, resource centres, children's homes and prison healthcare locations. This is displayed on patient and staff notice boards. An audit of Trust notice boards was carried out in December 2015 to January 2016 to ensure that the statement is displayed.

The Trust plans to develop a Good Relations Strategy as part of its revised Action Based Plan 2017-2022 and is working with ECNI to look at examples of good practice in taking this initiative forward.

### **Self Directed Support**

The Trust in partnership with the Health and Social Care Board (HSCB) is introducing a Self Directed Support.

This system will provide more choice and flexibility for eligible individuals enabling them to tailor a care package that best suits their needs and will offer more control, flexibility and independence to people as they choose the support they want. It also enables people to choose how their support is provided and gives them more control over their personal budget.

Consultation on an EQIA was commenced by the HSCB in February 2015 and ran until 8<sup>th</sup> May 2015. The Trust facilitated consultation events on Self Directed Support and staff training has commenced on the proposed changes.

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

Please see Action Based Plan 2014-2017, Appendix 1.

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

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

Please provide any details and examples:

Equality Scheme Commitment	Action	Difference Made for Individuals
<b>Arrangements for assessing our compliance with S75 duties</b>		
Ensure S75 duties are mainstreamed within the Trust	A comprehensive, mandatory programme of training and awareness raising for all levels of staff. Training on conducting Equality Screening and EQIA. Use of face to face, eLearning and specifically designed training for staff.	Individuals aware of the Trust's commitment to equality duties.  Trust staff aware of equality duties
Prepare Section 75 Annual Progress Report (APR) and include section in Trust's own Annual Report.	Annual Progress Report supported by "Equality Newsletter" to ensure updates available in accessible format	Copies of APR and Newsletter added to Intranet, Internet and all consultees sent copy of newsletter and informed of availability of progress report - improving awareness of Trust's S75 duties and outcomes of work programme
<b>Action Plan</b>		
Development of Action Based Plan to include performance indicators and timescales. Aligned to corporate and business planning cycle	The implementation of Action Based Plan and identified outcomes for the reporting period can be seen in appendix 1	The content of the Action Based Plan has been informed by an 'Audit of Inequalities' and pre-consultation with a wide range of stakeholders. Its implementation has a positive impact on all S75 Groups.

Arrangements for consulting		
Consultation list reviewed and updated	Consultations carried out throughout the reporting period provided the opportunity to update the Trust's consultation list.	New consultees were added to consultation list resulting in more robust engagement process
Training re. Consultation	The Trust recognises the importance of proper and timely consultation as an integral part of fulfilling its S75 duties when making decisions and planning services. The ECNI has completed its consultation on timescales for consultation and has recommended that timescales for consultation on Equality Impact Assessments will remain unchanged.	S75 groups and consultees engaged consulted on Trust decisions
In making any decision with respect to a policy adopted or proposed to be adopted, take into account any assessment and consultation carried out in relation to the policy	During reporting period the Trust consulted on: <b>MAKING CHOICES:</b> Proposed Changes in Provision of Statutory Residential Care in the SET 28 September - 21 December 2015  Provision of Intermediate Care in North Down and Ards. The consultation ran from 28 January 2015 – 29 April 2015	Views of representation groups and individuals considered during decision making process.
Provide feedback report to consultees in timely manner in formats suited to consultees	When final decision has been made, consultees receive a copy of consultation feedback report and are informed of how their feedback influenced the decision made. Consultation	Representative groups and individuals informed of how their feedback influenced the decision made.

	feedback reports are available on the Trust website. All Trust documents can be made available in an alternative format on request.	
Revise screening template and accompanying guidance notes	Trust policy development process ensures all Trust policies are screening. All policies approved during the reporting period were subject to S75 screening and appropriate consultation.  During the reporting period the Trust screened 56 policies and proposals. It carried out and consulted on two EQIAs	Transparent decision making process for consultees and impact on S75 groups identified during policy development process
Publish reports quarterly and in accessible formats on request.	All quarterly reports for the reporting period were made available on the Trust's website	Screening outcomes available to the public for consideration
Publishing of EQIA reports	The outcome reports of the two EQIAs were published on the SETrust website	Consultees receive feedback on the proposed changes
<b>Monitoring</b>		
Review of monitoring information	The Trust continues to monitor by Section 75 categories and this has been enhanced by HRPTS Self-Service functions. During the reporting period this monitoring information was assessed for S75 screenings and EQIA.  The Guide to Ethnic Monitoring of Services Users in HSC in NI was	Increased understanding of the make-up of the workforce to ensure promotion of equality of opportunity and better information to identify any potential impact.  Guidance will support HSC organisations to identify any unmet need and to



	issued by the Chief Executive of the HSCB to all HSC Organisations in March 2016 for implementation. The use of this new Guide will help providers to robustly capture critical patient/service user information on existing and emerging BME communities using HSC services.	target their resources thus tackling health inequalities experienced by BME communities.
<b>Staff Training</b>		
Draw up a detailed training plan	During reporting period, implementation of the Trust's Equality Training Strategy continued.	1500 + staff received equality and human rights training during the reporting period.
Specific Targeted Training	During the reporting period the Trust provided focused training for specific staff groups including ED staff, mental health Staff, elderly care staff, QCF candidates and student nurses.	Specific training is well received and more is planned for the coming year
<b>Arrangements for ensuring and assessing public access to information and services we provide</b>		
Ensure information we disseminate and services we provide are fully accessible to all parts of the community in Northern Ireland	Ongoing implementation of the Northern Ireland Health and Social Care Interpreting Service (NIHSCIS) Review recommendations. .  The New web- based IT Portal was successfully deployed to all HSC organisations during the year under-review. Training has been ongoing	Implementation of Review recommendations ensure cost effective services will be provided and service users can continue to get support when required

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	throughout the deployment phase to ensure that users were in a state of readiness to go online.	
Provide information in alternative formats on request	Trust staff access the translation of written material through the Regional Contract  The Access to Health and Social Care Booklet has been translated into alternate languages and is available on our website.	Information provided in alternative formats to increase understanding, ensure effective communication and improved access to services.
Provide interpreters and sign language interpreters	A total of 4,585 interpreting episodes were delivered in 2015 -2016	Service users and staff supported to ensure good governance in information provision and communication
<b>Complaints Procedure</b>		
How complaints are raised, timetable for responding etc	The Trust received no complaints relating to the implementation of its Equality Scheme	N/A
<b>Any other measures proposed in equality scheme</b>		
Work closely with other public authorities to exchange learning and best practice	During reporting period Trust participated in Regional Equality and Human Rights Steering Group and Regional Equality Leads meetings	Collaborative working ensures more effective use of resources and consistent approach across health and social care.
Liaise closely with the ECNI to ensure that progress on the implementation of our Equality Scheme is maintained	During reporting period the Trust met regularly with ECNI on S75 implementation	Ensures effective use of resources and S75 implementation

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

Please provide any details and examples:

- Please see column three of table above
- Please also see answers recorded in Question 1 and noted in Appendix 1 the Action Based Plan

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

- ✓ As a result of the organisation's screening of a policy
- ✓ As a result of what was identified through the EQIA and consultation exercise
- ✓ As a result of analysis from monitoring the impact  
As part of Equality Screening the Trust monitors implementation of policies and proposals. This monitoring is an integral part of any ongoing screening and enables to the Trust to step up to an EQIA if required.
- ✓ As a result of changes to access to information and services
- Other (*please specify and give details*):

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

### Arrangements for assessing compliance (Model Equality Scheme Chapter 2)

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

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

Please provide any details and examples:

Trust Job Descriptions include information on the Trust 6 key themes: Safety, Quality and Experience; Access; Health and Wellbeing; Efficiency and Service Reform; Our Staff and Stakeholder Engagement

All employees are required to comply with the procedures, policies and codes of practice within the Trust which include the Equality Scheme and the Equal Opportunities Policy.

The Trust Equality Managers Job Descriptions specifically reflect responsibility for day to day delivery of Section 75 Targets for each year. Job Descriptions for the Director of Human Resources and Corporate Affairs and the Assistant Director HR, Organisation and Workforce Development also reflect their responsibility with regard to the Section 75 statutory duties.

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

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

Please provide any details and examples:

**Trust Corporate Plan 2011-2015**

The Trust Corporate Plan states that the Trust will treat everyone with dignity and respect and also notes the 6 key themes that will guide all our actions: Safety, Quality and Experience; Access; Health and Wellbeing; Efficiency and Service Reform; Our Staff and Stakeholder Engagement. The Trust has developed an addendum to its Corporate Plan as advised by the Department of Health to enable greater alignment with the New Programme for Government. The themes and values will remain in effect during the interim period until the New Corporate Plan is developed in April 2017 and will cover 2017-2021.

**Trust Delivery Plan**

The Trust Delivery plan states that the Trust will be continuing to maintain equality of opportunity for the workforce and to review the range of flexible and family friendly policies in order to ensure that staff are supported to manage their work and family life. As part of the HR commitment to Corporate Social Responsibility, equality of opportunity and workforce learning and development, partnerships continue to be developed with a number of organisations in order to enhance local employability.

**Human Resources Management Plan**

The Human Resources Management Plan covers a range of Equality Actions including implementation and monitoring of the Equality Scheme, Action Based Plan and Disability Action Plan; delivery and evaluation of Working Well with Interpreters training; participation in the production of Article 55 returns and ensuring completion of Equality Screening and EQIA's as necessary along with publication of Quarterly Screening Report on website.

**HR Balanced Scorecard**

The HR Balanced Scorecard is updated on a quarterly basis. It includes the actions of ensuring Equality Screening of all policies and proposals and the implementation and monitoring of BME service users.

**KSF Annual Appraisal**

All staff are required to complete an annual KSF appraisal which includes Core Competency 6 : Equality and Diversity

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

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

Please provide any details and examples:

Section 75 duties are incorporated and mainstreamed at a strategic level into the business of the Trust. The Trust's Equality Unit sits within the Human Resources and Corporate Affairs Directorate and supports all Trust Directorates to ensure Section 75 is integral to planning processes.

Please also see answers noted in Question 5.

**Equality action plans/measures**

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

Actions completed:	<b>23</b>	Actions ongoing/Actions to commence:	<b>7</b>
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Please provide any details and examples (*in addition to question 2*):

Please see Action Based Plan 2014-2017 Appendix 1.

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

During 2015-2016 there have been no major changes to the Action Based Plan which has been regularly reviewed, monitored and updated.



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

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

Please also see figures noted in question 7.

**Arrangements for consulting (Model Equality Scheme Chapter 3)**

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

All the time

Sometimes

Never

The Trust carries out targeted consultation for relevant consultees as required.

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

**Quarterly Screening Report**

The Trust continues to Equality Screen all new and revised policies and proposals to identify any potential adverse impact for any of the nine Section 75 Equality categories. The results of these screenings are published on the Trust website every three months in a Quarterly Screening Report to promote transparency and inform our staff, consultees and our Trust population.

**Consultations**

Key consultations include

- Making Choices - Proposed Changes in the Provision of Statutory Residential Care for Older People in the South Eastern Health and Social Care Trust. The consultation ran from 28 September – 21 December 2015
- Provision of Intermediate Care in North Down and Ards. The consultation ran from 28 January 2015 – 29 April 2015

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

- Face to face meetings
- Focus groups
- Written documents with the opportunity to comment in writing
- Questionnaires
- Information/notification by email with an opportunity to opt in/out of the consultation
- Internet discussions
- Telephone consultations
- Other (*please specify*):

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

The Trust continues to use a variety of consultation methods including targeting pre-existing groups, internal fora, face to face meetings, and discussions with relevant staff, public consultation meetings and work with advocacy groups, for example, VOYPIC and hospital support groups.

The Trust has been progressing work around the provision of Lisburn PCCC and as part of this work meets with local service users to discuss proposals and options for the new facility. These meetings are attended by the Project Manager, Strategic and Capital Development, Lead Architect for Health Estates and the Trust Equality Manager. Discussions and feedback are reported to the Project Team and Project Board Meetings.

All consultation documents are published on the Trust website and are available in alternate formats on request.

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

Yes       No       Not applicable

Please provide any details and examples:

**Initiatives include**

- Staff Training and Awareness Raising
- Staff Summary Equality and Human Rights
- Guidance for Board members
- Consultation documents available on website
- QSR publication on website
- Section 75 and PPI Integration
- PPI Strategy
- Consultation and Engagement exercises
- Guidance and Briefings to EMT and Trust Board
- Dissemination of Section 75 Annual Progress Report
- Equality Newsletter available on Trust Intranet, Trust Internet and disseminated to consultees
- Equality Information in Trust Annual Report

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

Yes

No

Not applicable – no commitment to review

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

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

During 2015-2016 a total of 56 policies were screened and published on the Trust website in the Quarterly Screening Report.

Please click on link below to access Quarterly Screening reports

<http://www.setrust.hscni.net/about/2562.htm>

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

- 1 Policy consultations conducted with **screening** assessment presented.
- 1 Policy consultations conducted **with anequality impact assessment (EQIA)** presented.
- 0 Consultations for an **EQIA** alone.



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

**Consultations**

- Making Choices - Proposed Changes in the Provision of Statutory Residential Care for Older People in the South Eastern Health and Social Care Trust. The consultation ran from 28 September – 21 December 2015
- Provision of Intermediate Care in North Down and Ards. The consultation ran from 28 January 2015 – 29 April 2015

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

- Yes       No concerns were raised       No       Not applicable

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

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

Yes                       No                       Not applicable

Please provide any details and examples:

- Making Choices - Proposed Changes in the Provision of Statutory Residential Care for Older People in the South Eastern Health and Social Care Trust. The consultation ran from 28 September – 21 December 2015
- Provision of Intermediate Care in North Down and Ards. The consultation ran from 28 January 2015 – 29 April 2015

The Trust consulted on MAKING CHOICES: Proposed Changes in Provision of Statutory Residential Care in the South Eastern Health and Social Care Trust. On 24 November 2015, the then Health Minister asked the Health and Social Care Board to pause and review the proposed closures of statutory residential care homes.

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

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

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Yes                              | <input type="checkbox"/> No, already taken place |
| <input type="checkbox"/> No, scheduled to take place at a later date | <input type="checkbox"/> Not applicable          |

Please provide any details:

- Staff Monitoring via HRPTS
- Publication of Quarterly Screening Reports
- Collection and analysis of Interpreting provision and uptake
- Gathering of Ethnic Monitoring data
- The Trust's audit of inequalities required for the development of its previous and new Action Based Plan, is reviewed and updated annually and is available for decision makers to support the completion of screenings and equality impact assessments.

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

Yes

Not applicable

Please provide any details and examples:

**Regional Review of Interpreting Provision**

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.

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.

The new booking system went live in January 2016 following extensive training and awareness raising for Trust Staff. Interpreters use a barcode to scan in each practice or with each practitioner to verify the duration of the appointment. Work is ongoing with thebigword, the telephone interpreting provider, to ensure that they can cater for the increased in demand. A Regional Advisory Group including SET Equality Manager meets regularly to address any ongoing issues. 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.

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

Monitoring is integral to ongoing screening of policies and proposals. The Trust's policy development process ensures that all policies are monitored and reviewed. The process also ensures that if there are any substantial changes to a policy it is screened again to identify any adverse impact across the 9 equality categories.

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

**Ethnic Monitoring**

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

**Monitoring via HRPTS**

With the deployment of HRPTS within the Trust, staff are now able to log into the Employee Self Service function to update their own Equality and Diversity data which includes disability and ethnic background information. This provides more accurate information for conducting Equality Screening and EQIA’s.

**Article 55 Review**

The Article 55 Review Report is completed every three years by the Trust. The ECNI 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.

The Trust met again with the ECNI in September 2015 prior to an ECNI workshop for Trust staff in October 2015. This workshop will assist staff in the completion of the Article 55 Report in 2017.

**Staff Training (Model Equality Scheme Chapter 5)**

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

**Training Initiatives**

Trust Equality Managers and OWD advisors 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. During 2015-2016 over 1,500 staff have attended or accessed training.

Training includes:

Corporate Induction (including e-Learning)	410
Equality Good, Relations and Human Rights Refresher training	158
Practical Manager	126
Equality and Human Rights e-Learning	723
Equality and Human Rights Directorate and team specific training, Patient Experience, QCF and student nurses	126

Uptake of training is reported annually in the Trust Annual Progress Report.

The South Eastern HSC Trust has developed an e-Learning module on Equality and Human Rights which was launched in April 2014 and continues to be promoted throughout the Trust. The module focuses specifically on Section 75 and Human Rights responsibilities. During the reporting year, over 1100 staff completed this module and feedback has been very positive.

The Health and Social Care Discovering Diversity E-Learning Package continues to be rolled out to staff who have access to computers.

Specialist Master Classes on policy development and S75 screening continue to be delivered as required to new policy makers across the Trust to ensure they have the necessary skills to effectively screen policies and decisions.



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

**Targeted Training**

The Trust has identified the need for specific training to be developed and delivered to staff groups at a time and in a place that is appropriate for them. Specific training has been delivered to Emergency Department Teams and Statutory Residential Home staff. These training sessions continue to be well received and staff feedback would demonstrate that staff respond positively to this type of training

The eLearning module has proved to be very useful to staff who are able to access the training at a time and speed that best suits them.

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

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

- Monitoring of uptake of face to face and telephone interpreting provisionThe top five languages requested in the Trust area were Polish, Lithuanian, Chinese (both Mandarin and Cantonese) and Russian. The monitoring of interpreting usage ensures the Trust can provide its information in the main languages. It also ensures that the appropriate type of interpreting is used for appointments. For simple, straightforward and short appointments, telephone interpreting is the most appropriate and most cost effective. Face to face interpreters are then available for more complex or sensitive appointments
- It is clear from monitoring information that the Trust's population is culturally and linguistically diverse and the Multi-Cultural and Beliefs Handbook continues to be updated to ensure that it is reflective of all our communities. This newly revised resource is available on the Trust's intranet and now includes information on the Roma community
- Ethnic Monitoring of Service Users
- The Quarterly Screening Report
- Monitoring of requests for Written Translation Contract which enables staff to produce information in alternate languages and formatFor example during 2015/16, the Trust translated appointment letters into a range of languages and the Access to Health and Social Care Booklet has been translated regionally and is available on our website.
- BME Carers leaflet
- Self Check in Booths in Trust facilities
- The Regional Review of Communication Support Services for People who are Deaf/Hard of Hearing was completed during the reporting period. This Review was carried out as part of the implementation of the Physical and Sensory Disability Strategy and was recommended as a result of the Regulation and Quality Improvement Authority (RQIA) Review of Sensory Rehabilitation Services in 2011. The review is currently out for consultation.

**Complaints (Model Equality Scheme Chapter 8)**

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

Insert number here: 0

Please provide any details of each complaint raised and outcome:

There have been no complaints received during 2015-2016 which relate to the Trust Equality Scheme.

The Trust provides an accessible complaints procedure for all its patients and clients and in accordance with this procedure maintains a register of complaints. The Equality and Human Rights Department works closely with the Head of Complaints and Patients Liaison to identify any complaints which may be relevant to the Section 75 duties.

The Trust helped to produce a seven minute DVD, Complaints Procedure – A Guide on How to Complain which includes both sign language and speech recording. This is available on the Trust website and has been promoted to local groups. There has been 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.

SET Complaints/Patient Liaison Manager is working with colleagues from other Trusts to identify any potential regional increase in complaints from this community.

### Section 3: Looking Forward

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

The Trust Equality Scheme was approved in 2014. The Trust will review its existing Equality Scheme and publically consult on any revisions during 2016/17 in preparation for its revised Scheme and associated Action Based Plan to run from May 2017. The review process will take account of further guidance and related research and best practice models.

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

#### **Revision of Equality Scheme and Action based Plan and DAP**

As stated above, in 2016-2017 the Trust will focus on reviewing its existing Equality Scheme and developing a new Action Based Plan and also a new Disability Action Plan. The Trust will publically consult on these from October 2016 in preparation for be issue in May 2017.

#### **Screening**

The Trust is working with the ECNI and fellow Trusts to review the Equality Screening template and the EQIA template.

A region wide review of the current equality screening was undertaken during the current reporting period. This has been piloted by 2 HSC Trusts - the Belfast Trust and the NHSCT. The Belfast Trust has written an outcome paper on the use of the new screening template which is currently being reviewed by the ECNI.

To ensure consistency in 2015-2016 the SETrust has continued to use the existing screening template. The Trust will work towards the feasibility development of a clinical and technical screening template to meet the needs identified by staff. Guidance and staff training will be developed and delivered.

#### **Reform and Modernisation Proposals**

The Trust will continue to screen and monitor all reform and modernisation proposals to identify any potential impact for any of the nine section 75 categories.

#### **Training**

Ongoing delivery and evaluation of a wide range of training and awareness raising for staff including the continued roll out of the e-Learning module. Training materials are subject to ongoing review.

**Good Relations Strategy**

The Trust plans to develop a Good Relations Strategy in 2016-2017 as part of its revised Action Based Plan and is working with ECNI and fellow Trusts to look at examples of good practice in taking this initiative forward.

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

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

The Trust is aware that the ECNI has consulted on the Equality Scheme consultation arrangements and as a result its advice will remain as it is currently - that consultations should last for a minimum of 12 weeks.

The Trust is also aware that the Fresh Start Agreement has reduced the consultation timeframes to 'a maximum of 8 weeks' in an attempt to 'speed up policy development and decision making processes'. Once this guidance is formally issued to public authorities the Trust will be required to amend its Consultation Scheme. The Trust welcomes ECNI advice on effective consultation and ensuring compliance with S75 and Personal and Public Involvement (PPI) legal requirements.

**Annual Report 1 April 2015 / 31 March 2016**  
**'Disability Duties'**

**DISABILITY ACTION PLAN**

- **To promote positive attitudes towards disabled people**
- **To encourage the participation of disabled people in Public Life**

**Part B: 'Disability Duties'**  
**Annual Report 1 April 2015 / 31 March 2016**

**1. How many action measures** for this reporting period have been  
Those actions partially achieved or ongoing will be rolled forward for DAP 2017-2022

9

5

0

Fully  
Achieved?

Partially  
Achieved?

Not  
Achieved?



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

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

Level	Public Life Action Measures	Outputs <sup>1</sup>	Outcomes / Impact <sup>2</sup>
National <sup>3</sup>			
Regional <sup>4</sup>	Continued Development and roll out of Self Directed Support arrangements which will come into effect	<p>The Trusts in partnership with the Health and Social Care Board (HSCB) are introducing a new way of delivering Social Care Services called Self Directed Support.</p> <p>This system will provide more choice and flexibility for eligible individuals enabling them to tailor a care package that best suits their needs.</p> <p>Trusts facilitated</p>	<p>Self Directed Support will offer more control, flexibility and independence to people as they choose the support they want.</p> <p>Self Directed Support enables people to choose how their support is provided and gives them more control over their personal budget.</p> <p>Self Directed Support enables</p>

<sup>1</sup>**Outputs** – defined as act of producing, amount of something produced over a period, processes undertaken to implement the action measure e.g. Undertook 10 training sessions with 100 people at customer service level.

<sup>2</sup>**Outcome / Impact** – what specifically and tangibly has changed in making progress towards the duties? What impact can directly be attributed to taking this action? Indicate the results of undertaking this action e.g. Evaluation indicating a tangible shift in attitudes before and after training.

<sup>3</sup>**National** : Situations where people can influence policy at a high impact level e.g. Public Appointments

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

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	<p>Regional Procurement Workshop August 2015. Held in Quality Improvement and Innovation Centre SETrust. The Workshop was attended by over 40 representatives of Trust, HSCB, BSO and NIAS.</p>	<p>consultation events in each of their areas on Self Directed Support and staff training has commenced on the proposed changes.</p> <p>An interactive workshop with presentations from DLS and BSO. Participants were given the opportunity to carry out group work in how they would plan and commission a Mental Health Day Care Centre</p>	<p>people to have more flexibility, choice and control over the support they receive, such as,</p> <ul style="list-style-type: none"> <li>• employing their own Personal assistant</li> <li>• having support staff visit at a time that they choose</li> <li>• flexible options for short breaks</li> <li>• accessing community opportunities.</li> </ul> <p>Self Directed Support does not replace traditional services and people can continue with their existing package.</p> <p>Feedback was very positive with 100% staff saying that the course was relevant and useful. Raised staff awareness of procurement issues which will lead to an enhanced service user relevant procurement process.</p>
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<p>Local<sup>5</sup></p>	<p>Continued roll out of Involving You - Public and Personal Involvement (PPI) Strategy 2012-2015</p>	<p>Trust Consultation Scheme Development Launch of PPI Standards</p> <p>PPI Tool Kit and staff training</p> <p>Updated Consultation list</p> <p>Specific actions to target disabled persons e.g. TILLI Group (Tell it as it is)</p> <p>Targeted consultations sessions with Disabled Persons/Groups e.g. Self-Directed Support</p>	<p>Greater participation of disabled persons in Trust decision making processes</p> <p>Staff more experienced in consultation/engagement methods</p> <p>Recognition of contributions made by disability sector and individuals.</p>
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<sup>5</sup>**Local:** Situations where people can influence policy decision making at lower impact level e.g. one off consultations, local fora.

2(b) What **training action measures** were achieved in this reporting period?

	Training Action Measures	Outputs	Outcome / Impact
1	Delivery of Equality and Human Rights Screening Master Classes – incorporating the Disability Duties.	<p>On-going training to a wide variety of staff and teams held during the current reporting period which incorporated the Disability Duties and training on Disability Equality.</p> <p>On-going advice and support provided by Equality Managers to Policy Authors on the application of S75 Equality and Disability Duties.</p>	On-going mainstreaming of the Disability Duties into screening and EQIA processes and policy /service developments
2	<p>The continued promotion of the Trust's In-house Equality and Human Rights e-learning module which incorporates the Disability Duties</p> <p>Continued roll out of Discovering Diversity – E-learning Disability Equality module.</p>	<p>Increase uptake of these training modules by Trust staff – over 1100 staff have completed these programmes during the reporting period.</p> <p>Quarterly monitoring of uptake of e-learning programme and annual reporting to EMT and Trust Board through e.g. Section 75 Annual Progress Report.</p>	<p>Promotion of positive attitudes toward disabled persons.</p> <p>Improved patient experience as a consequence of increasing awareness and promoting positive attitudes.</p> <p>Sharing of good practice. The South Eastern Trust's e-learning package was demonstrated to the other HSC Trusts in June 2015.</p>
3	Delivery of Equality and Human Rights Face to Face Training – incorporating Disability Duties.	Over 1500 staff received this form of training	Promotes positive attitudes toward disabled persons. Further raises awareness of the Disability Duties amongst HSC staff. Improves staff and patient experience.

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4	Information on UNCRPD and associated training	Incorporated into training sessions alongside existing materials such as Real Network DVD on Human Rights.	Greater staff awareness of the importance of Human Rights across service provision and policy development
5	Continued roll out of the Butterfly Scheme which aims to improve the experience of people with memory impairment who are admitted to hospital	Over 200 staff trained on this scheme	Improves patients' experiences and reduces stress for patients and their families  Equips staff to more effectively meet the needs of patients and increases the well-being and safety of people with memory impairment whilst they are in hospital

2(c) What Positive attitudes **action measures** in the area of **Communications** were achieved in this reporting period?

	Communications Action Measures	Outputs	Outcome / Impact
1	Review of 'Making Communication Accessible for All' Guidance	This resource addresses communication barriers and gives tips and advice to enhance effective communication. The review involved stakeholder input.  The Guide assists staff to ensure that people get the support with communication that they required e.g. through the provision of sign language interpreters or face to face or appropriate written communication	Greater staff expertise in the provision of effective communication for individuals with a range of disabilities.  Guide is available on Trust Intranet and can be made available in alternative formats on request. A 'Making Communication Accessible' Event has been organised for June 2016 and will be reported on in the 2016-2017 Annual Progress Report

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		<p>Continued work to gather information on available Easy Read options via Regional work to develop a list of providers of accessible formats for people with disabilities.</p> <p>Increased amount of Trust information produced in alternative formatson request e.g. Easy Read, larger print, use of sign language interpreters, subtitles and sign language on the production of DVDs.</p> <p>Information circulated via Trust Intranet on events to mark Autism Awareness Month in April 2015.</p> <p>Assistance Dog Policy implementation and subject to review in May 2016.</p>	<p>Trust information more accessible for all users e.g. through the increased use of Easy Read documents. Improved patient experience.</p> <p>Raising staff awareness of available options through training</p> <p>Improved patient experience and clear guidelines for staff</p> <p>Improved experience for serve users and increased awareness for staff</p>
	<p>Continued participation on the Regional Physical Sensory and Disability Strategy Implementation Group</p>	<p>Cross Departmental work including HSC Board, PHA, Trusts, DEL, DSD, voluntary organisations and service users.</p> <p>Actions to address inequalities and identify gaps in service provision. The 'Making Commination Accessible for All' Guide assists staff to ensure that people get the support with communication that they required e.g. through the provision of</p>	<p>Greater staff expertise in this area</p> <p>Improvements in health and wellbeing for people with disabilities</p>

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		<p>sign language interpreters or face to face or appropriate written communication.</p> <p>Good Practice Guidance Checklist to ensure the needs of people with disabilities are considered in the design and development of health promotion programmes/ campaigns.</p>	<p>A 'Making Communication Accessible Event' has been organised for June 2016 and will be reported on in the 2016-2017 Annual Progress Report</p>
2	Continued roll out of Complaints DVD	<p>Use of alternative formats to facilitate access to the HSC complaints procedure.eg sign language provision</p> <p>Available on Trust Intranet</p>	<p>Greater accessibility for persons with a disability to access the HSC complaints procedure.</p> <p>Improvements in patient experience and outcomes for service users and members of the public.</p>

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2 (d) What action measures were achieved to ‘**encourage others**’ to promote the two duties:

	Encourage others Action Measures	Outputs	Outcome / Impact
1	Provision of placements aimed at increasing work opportunities for people with a disability.	<p>Provision of meaningful placement opportunities for persons with a disability.</p> <p>To date the Trust has well exceeded the target of 20 placements in this reporting period.</p>	<p>Greater participation of disabled persons in public life and promotion of positive attitudes toward disabled persons.</p> <p>Enhancing employment skills / opportunities for participants.</p>
2	Continued Provision of Reasonable Adjustments for staff.	<p>A sampling of Occupational Health Nurse appointments indicated that Reasonable Adjustments were recommended for over half the staff who attended the service. Many of these were short-term in nature.</p> <p>In practice many Reasonable Adjustments are instigated at local level by Line Managers.</p>	<p>Promotes a more inclusive workplace</p> <p>Greater retention of staff within the workplace.</p> <p>Improvements to the health and wellbeing of staff.</p>
3	Roll out of HRPTS Self-Service function in relation to Equality Monitoring which incorporates Disability considerations	<p>Promotes a more supportive workplace.</p> <p>More accurate base line data on the prevalence of disability amongst staff.</p> <p>Provision of timely reasonable adjustments</p>	<p>Fosters a culture where staff feel comfortable and supported to self- declare that they have a disability in accordance with the DDA definition of disability.</p> <p>Improvements to the health and wellbeing of staff</p>



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		Provides more detailed data for screening and EQIA processes.	Further mainstreaming of these duties
4	Recruitment measures to attract individuals with life experiences of Mental Health	4 Peer Support Workers appointed with 2 staff based in Lagan Valley Hospital and 2 based at the Ulster Hospital. The Trust plans to increase this number and extend the programme into the Community.	<p>A key element of the IMROC/Recovery Programme.</p> <p>Enhanced employment opportunities</p> <p>Staff with lived experience of mental health issues have had a positive impact for service users in terms of greater empathy and understanding.</p>

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

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

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

	Action Measures partly achieved	Milestones <sup>6</sup> / Outputs	Outcomes/Impacts	Reasons not fully achieved
1	Self-Directed Support	Consultation with service users	Individuals will have more independence and choice over their care	Continued implementation

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

	Action Measures not met	Reasons
1		
2		
3		

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

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

(a) Qualitative:

PPI Initiatives and Consultation processes and Outcomes;  
Feedback from Service Users;  
Update of Themed Inequality Audit;  
Review of complaints/compliments.  
NIHRC Inquiry into Emergency Health Care – pilot project being carried out by BHSCT. Good practice to be shared with fellow Trusts

(b) Quantitative:

Performance Indicators in DAP;  
Update of Themed Inequality Audit of Inequalities;  
Consultations on specific areas e.g. Self Directed Support  
HRPTS – Employee Self Service – more accurate and up-to-date staff data on S75 characteristics;  
2011 Census data – utilisation in Screening and EQIA processes.  
Screening and EQIA Processes;  
Quarterly Screening Reports;  
NIHRC Inquiry into Emergency Health Care

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

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

Please delete: **No**

If yes please outline below:

	Revised/Additional Action Measures	Performance Indicator	Timescale
1			
2			
3			

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

The Equality Scheme, Disability Action Plan and Action Based Plan will be reviewed and consulted on in 2016-2017