

Equality, Good Relations and Human Rights Screening Template

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

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

(1) Information about the Policy/Proposal

(1.1) Name of the policy/proposal

Spiritual Care Policy

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

Revised policy.

(1.3) What is it trying to achieve (intended aims/outcomes)?

The purpose of the policy is to set out in summary how spiritual care services are recognised and provided within the South Eastern Trust. The application of the Policy will focus on how to further:

- demonstrate respect for the spiritual needs (including religion / belief / culture) of our patients and staff
- raise staff awareness of spiritual needs
- improve holistic care for patients
- improve multidisciplinary working
- reflect the South Eastern Trust's commitment to delivering patient centred care
- reflect the South Eastern Trust's commitment to Equality and Diversity and meeting the human rights of individuals.

Promoting Spiritual Care Services will help make our services more accessible to all.



(1.4) Are there any Section 75 categories (see list in 3.1) which might be expected to benefit from the intended policy/proposal?

The staff and Service Users will be represented in all S75 categories. This policy may benefit specifically staff and Service Users of People of different religious belief and people from different ethnic backgrounds.

(1.5) Who owns and who implements the policy/proposal - where does it originate, for example DHSSPS, HSCB?

The Trust owns and implements this policy. Guidance and governance is taken from UK Board of Healthcare Chaplaincy, NI Healthcare Chaplaincy association, NI Equality Commission and DoH.

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

Provision of spiritual care is a service enhancement.

Getting a Faith representative for smaller minority religions

Staff need to ensure that service users set the agenda

Staff not acquiring information to determine need for a service

Staff and service users will have 24/7 access to the service

It may contribute to their wellbeing and recovery

Equality of access for everyone



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

Internal: Service Users, their families and carers, Staff, employed Chaplains, other Trusts; NIAS, PSNI

External: local clergy, Voluntary Community Sector including Faith organisations, Hospices, UK Board of Healthcare Chaplaincy, NI Healthcare Chaplaincy association, Salvation Army, local council, Trust Undertakers

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

Multi-Cultural handbook
Policy on Management of Bereavement
Last Offices Policy

(2) Available evidence

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

<i>Details of evidence/information</i>
Previous training on spiritual care services Multi-cultural handbook Regional & national research Professional discussions with staff Meetings with member of the Northern Ireland Hospital Chaplains Association Member of Association of Clinical Pastoral Education Ireland Feedback from service users Chaplaincy Forum Bereavement Forum Palliative Care Forum and Network Patient Experience Management meetings Attend events for MDT training with PSNI, NIAS, NIFRS and councils

(3) Needs, experiences and priorities

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

Category	Needs, experiences and priorities	
	Service users	Staff
Gender	Female 51.54% Male 48.46%	Female 81.22% Male 18.78%
Age	0-15 18.97% 16-19 4.78% 20-29 11.46% 30-45 19.77% 45-59 20.69% 60+ 24.31%	0-15 0% 16-19 0.53% 20-29 16.39% 30-45 40% 46-59 33.49% 60+ 9.59%
Religion	Protestant 62.88% Roman Catholic 11.05% Other 1.01% None 19.11% Not Known 5.95% Provides specific advice on the needs of different religious groups	Protestant 42.99% Roman Catholic 25.90% Other 0% None 23.02% Not Known 8.10% Helps staff meet the spiritual needs of patients
Political Opinion	Not collected Local council voting preferences are considered	Broadly Nationalist 3.03% Broadly Unionist 8.24% Do not wish to answer 11.09% Other 5.35% Not known 72.29%
Marital Status	Single 28.93 Married 53.46 Divorced 6.73 Widowed 7.37 Separated 3.41 Other 0	Single 32.16% Married 56.31% Divorced 3.47% Widowed 0.53% Separated 1.56% Other 5.98%
Dependent Status	Households with dependent children 30.37%	Child or children 13.00% Dependant older 2.98% A person with disability 1.89% None 10.54% Other/not known 72.30%
Disability	Household with one or more persons with a limiting long term illness 20.08%	Not known 72.85% No 25.84% Yes 1.32%
Ethnicity	Helps meet the Faith needs which specific ethnic minority groups may have Black African 0.09% Irish Traveller 0.01%	Helps meet the Faith needs which specific ethnic minority groups may have Black African 0.06% Irish Traveller 0.03%

	<p>Bangladeshi 0.11%</p> <p>Pakistani 0.06%</p> <p>Black Caribbean 0.03%</p> <p>Mixed Ethnic Group 0.35%</p> <p>Chinese 0.26%</p> <p>White 98.53%</p> <p>Indian 0.18%</p> <p>Other 0.11%</p> <p>Other Black 0.05%</p>	<p>Bangladeshi 0.01%</p> <p>Pakistani 0.03%</p> <p>Black Caribbean 0.01%</p> <p>Mixed Ethnic Group 0.05%</p> <p>Chinese 0.05%</p> <p>White 30.63%</p> <p>Indian 0.43%</p> <p>Other 0.33%</p> <p>Filipino 0.37%</p> <p>Not known 68.00%</p>
Sexual Orientation	<p>Not Collected</p> <p>Estimated 10% of population is LGBT equates to estimated 168,527 of the NI population i.e. possibly one in 10 in terms of clientele/service user – data source Rainbow Project July 2008</p>	<p>Opposite sex 26.19%</p> <p>Do not wish to answer 1.54%</p> <p>Not known 71.70%</p> <p>Both sexes 0.10%</p> <p>Same sex 0.48%</p>

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

Previous training on spiritual care services

Multi-cultural handbook

Regional & national research

Professional discussions with staff

Meetings with member of the Northern Ireland Hospital Chaplains Association

Member of Association of Clinical Pastoral Education Ireland

Feedback from service users

Chaplaincy Forum

Bereavement Forum

Palliative Care Forum and Network

Patient Experience Management meetings

Attend events for MDT training with PSNI, NIAS, NIFRS and councils

(4) Screening Questions

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

(4.1) What is the likely impact of equality of opportunity for those affected by this policy/proposal, for each of the Section 75 equality categories?			
Section 75 category	Details of policy/proposal impact		Level of impact? Minor/major/none
	Services Users	Staff	
Gender	Female 51.54% Male 48.46%	Female 81.22% Male 18.78%	None/None
Age	0-15 18.97% 16-19 4.78% 20-29 11.46% 30-45 19.77% 45-59 20.69% 60+ 24.31%	0-15 0% 16 – 19 0.53% 20-29 16.39% 30-45 40% 46-59 33.49% 60+ 9.59%	None/None
Religion	Protestant 62.88% Roman Catholic 11.05% Other 1.01% None 19.11% Not Known 5.95% Provides specific advice on the needs of different religious groups	Protestant 42.99% Roman Catholic 25.90% Other 0% None 23.02% Not Known 8.10 % Helps staff meet the spiritual needs of patients	None/None
Political Opinion	Not collected Local council voting preferences are considered	Broadly Nationalist 3.03% Broadly Unionist 8.24% Do not wish to answer 11.09% Other 5.35% Not known 72.29%	None/None
Marital Status	Single 28.93 Married 53.46 Divorced 6.73 Widowed 7.37 Separated 3.41 Other 0	Single 32.16% Married 56.31% Divorced 3.47% Widowed 0.53% Separated 1.56% Other 5.98%	None/None
Dependent Status	Households with dependent children 30.37%	Child or children 13.00% Dependant older 2.98% A person with disability 1.89% None 10.54% Other/not known 72.30%	None/None
Disability	Household with one or more persons with a limiting long term illness 20.08%	Not known 72.85% No 25.84% Yes 1.32%	None/None
Ethnicity	Helps meet the Faith needs which specific ethnic minority groups may have Black African 0.09% Irish Traveller 0.01% Bangladeshi 0.11%	Helps meet the Faith needs which specific ethnic minority groups may have Black African 0.06% Irish Traveller 0.03% Bangladeshi 0.01%	None/None

	Pakistani 0.06% Black Caribbean 0.03% Mixed Ethnic Group 0.35% Chinese 0.26% White 98.53% Indian 0.18% Other 0.11% Other Black 0.05%	Pakistani 0.03% Black Caribbean 0.01% Mixed Ethnic Group 0.05% Chinese 0.05% White 30.63% Indian 0.43% Other 0.33% Filipino 0.37% Not known 68.00%	
Sexual Orientation	Not Collected Estimated 10% of population is LGBT equates to estimated 168,527 of the NI population i.e. possibly one in 10 in terms of clientele/service user – data source Rainbow Project July 2008	Opposite sex 26.19% Do not wish to answer 1.54% Not known 71.70% Both sexes 0.10% Same sex 0.48%	None

(4.2) Are there opportunities to better promote equality of opportunity for people within Section 75 equality categories?

Section 75 category	Please provide details
Gender	<p>The Trust remains committed to embracing diversity, promoting good relations and challenging sectarianism and racism to ensure service users and staff enjoy equality of opportunity and access to health and social care in a welcoming and safe environment.</p> <p>Engagement with staff, service users and other stakeholders</p> <p>The Trust has an ongoing strategy of staff training and engagement</p>
Age	As above
Religion	As above
Political Opinion	As above
Marital Status	As above
Dependent Status	As above
Disability	As above
Ethnicity	As above
Sexual Orientation	As above

(4.3) To what extent is the policy/proposal likely to impact on good relations between people of different religious belief, political opinion or racial group? minor/major/none

Good relations category	Details of policy/proposal impact	Level of impact Minor/major/none
Religious belief	Service enhancement for people from different religious beliefs	None The Trust has in place its Good Relations statement which is displayed on staff and service user notice boards.
Political opinion		None The Trust has in place its Good Relations statement which is displayed on staff and service user notice boards.
Racial group	Service enhancement for people from different racial backgrounds	None The Trust has in place its Good Relations statement which is displayed on staff and service user notice boards.

(4.4) Are there opportunities to better promote good relations between people of different religious belief, political opinion or racial group?

Good relations category	Please provide details
Religious belief	<p>The Trust remains committed to embracing diversity, promoting good relations and challenging sectarianism and racism to ensure service users and staff enjoy equality of opportunity and access to health and social care in a welcoming and safe environment.</p> <p>The Trust has an ongoing strategy of staff training and awareness rising.</p>
Political opinion	As above
Racial group	<p>As above</p> <p>The trust provides telephone and face to face and written interpreting services as requested</p>

(5) Consideration of Disability Duties

(5.1) How does the policy/proposal encourage disabled people to participate in public life and promote positive attitudes towards disabled people?

Trust Disability Action Plan 2018 - 2023 promotes these duties

Discussion took place re disabled service users and staff and no potential impact was found

(6) Consideration of Human Rights

(6.1) Does the policy/proposal affect anyone's Human Rights?

Complete for each of the articles

Article	Positive impact	Negative impact = human right interfered with or restricted	Neutral impact
Article 2 – Right to life	✓		
Article 3 – Right to freedom from torture, inhuman or degrading treatment or punishment			✓
Article 4 – Right to freedom from slavery, servitude & forced or compulsory labour			✓
Article 5 – Right to liberty & security of person			✓
Article 6 – Right to a fair & public trial within a reasonable time			✓
Article 7 – Right to freedom from retrospective criminal law & no punishment without law			✓
Article 8 – Right to respect for private & family life, home and correspondence.			✓
Article 9 – Right to freedom of thought, conscience & religion	✓		
Article 10 – Right to freedom of expression			✓
Article 11 – Right to freedom of assembly & association			✓
Article 12 – Right to marry & found a family			✓



Article 14 – Prohibition of discrimination in the enjoyment of the convention rights			<input checked="" type="checkbox"/>
1 st protocol Article 1 – Right to a peaceful enjoyment of possessions & protection of property			<input checked="" type="checkbox"/>
1 st protocol Article 2 – Right of access to education			<input checked="" type="checkbox"/>

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

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

Human Rights Issues e.g. dignity discussed in the development of and within the Scope of the Spiritual Care Policy. Potential positive impact with regards to Article 2 Right to Life and Article 9 – Right to freedom of thought, conscience & religion for staff and service users
Staff training both face-to-face and E-learning

(7) Screening Decision

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

Major impact	<input type="checkbox"/>
Minor impact	<input type="checkbox"/>
No impact	<input checked="" type="checkbox"/>

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

Yes	<input type="checkbox"/>
No	<input checked="" type="checkbox"/>



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

Yes	<input type="checkbox"/>
No	<input checked="" type="checkbox"/>

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

This Policy will contribute to a service enhancement for all service users and staff. It should ensure that a consistent and standard approach for all is delivered.

No potential impact to service users or staff was identified with the revision of this policy.

On-going screening was not identified as a requirement until the policy is revised in the future.

(8) Monitoring

Please detail how you will monitor the effect of the policy/proposal for equality of opportunity and good relations, disability duties and human rights?

- Monitoring usage levels of Chaplaincy Services
- Monitoring KPI's quarterly
- Monitoring complaints and compliments
- Monitoring feedback from patients and staff and stakeholders
- Evaluation and feedback from training on spiritual care services
- Professional discussions with staff
- Meetings with member of the Northern Ireland Hospital Chaplains Association
- Association of Clinical Pastoral Education Ireland monitoring of CPE
- Chaplaincy Forum
- Bereavement Forum
- Palliative Care Forum and Network
- Patient Experience Management meetings
- Maintain accreditation from UK BHC
- Maintain professional standards authority accredited registration
- Maintain membership of CAB



Ensure knowledge is up to date to ensure compliance with legislation and best practice

Approved Lead Officer: Rev Don Gamble

Position: Lead Chaplain

Date: 08/10/20

Policy/proposal screened by: Rev Don Gamble and Kathey Neill