

Screening Outcome Report 1st April 2022 to 31th June 2022

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:

Susan Thompson

Equality Manager

Telephone: 028 9151 2177

Textphone: 028 9151 0137

Mobile: 07525898850

Fax: 028 9151 2171

Email:

susan.thompson@setrust.hscni.net

Outcome of Screening

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

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

Description of Policy or Proposal	Screening Outcome	Reason for Reaching Screening Outcome
<p><u>Guideline Statement on the Northern Ireland Regional Guideline for the prescribing, administration and monitoring of intravenous Teicoplanin in adults (from day of 16th birthday)</u></p> <p>This is an existing South Eastern H&SC Trust guideline which is now updated as a regional guideline. This policy is to ensure consistency across HSC settings, reduce risk and improve the</p>	Out	The Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor the effect of the policy by regular audit of teicoplanin prescribing in the Trust.

Description of Policy or Proposal	Screening Outcome	Reason for Reaching Screening Outcome
prescribing of IV teicoplanin		
<p><u>Guideline for the Prescribing, Administration and Monitoring of Gentamicin IV in Paediatrics (> 44 weeks corrected gestational age to 16 years)</u></p> <p>This is a new South Eastern H&SC Trust guideline. The aim of this policy is to give guidance on and improve the prescribing, administration and monitoring of once daily gentamicin IV in paediatric children > 44 weeks gestational age to 16 years old.</p>	Out	The Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor this policy is to carryout regular audits of antimicrobial prescribing (including gentamicin) in the Trust.
<p><u>Guideline Statement for Naloxone for Life Threatening Opioid Toxicity in Palliative care patients</u></p> <p>This is a new South Eastern H&SC Trust guideline. The aim of this policy is to promote safe, effective and appropriate use of Naloxone for adult patients on opioid treatment for pain control in line with the Patient Safety Alerts for Naloxone.</p>	Out	<p>The Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor this policy is to:</p> <ul style="list-style-type: none"> • Policy review • Complaints • Compliments
<p><u>Arson Policy</u></p> <p>This is a revised policy within the South Eastern H&SC Trust. This policy is to ensure that the Trust has adequate governance in place in order to minimise the risk to staff and public of an incident of fire from the act of arson with potentially fatal consequences.</p>	Out	<p>The Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor this policy is to:</p> <ul style="list-style-type: none"> • Trust Fire Safety sub-committee • Complaints
<p><u>Manual Handling Policy</u></p> <p>This is a revised policy within the South Eastern H&SC Trust. This policy is designed to provide Managers and Staff with clear guidance on their legislative responsibilities with regard to the prevention and management of</p>	Out	<p>The Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor this policy is to:</p> <ul style="list-style-type: none"> • Incident Reporting • Complaints • Compliments

Description of Policy or Proposal	Screening Outcome	Reason for Reaching Screening Outcome
<p>manual handling risks and to ensure that safe manual handling is employed so far as is reasonably practicable.</p>		<ul style="list-style-type: none"> • Staff feedback
<p><u>Guideline for the Use of Antifungals in Adults</u></p> <p>This is a new South Eastern H&SC Trust guideline. The purpose of this guideline is to provide guidance on the selection of antifungal therapy for serious invasive fungal infections.</p>	<p>Out</p>	<p>The Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor this policy is to:</p> <ul style="list-style-type: none"> • Regular audit of antimicrobial prescribing in the Trust.
<p><u>Pressure Ulcer Prevention and Management Policy</u></p> <p>This is a revised policy within the South Eastern H&SC Trust. This policy is designed to guide staff to facilitate the early identification of patients who are at an increased risk of developing pressure damage and implement timely preventative measures.</p>	<p>Out</p>	<p>The Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor this policy is to:</p> <ul style="list-style-type: none"> • Complaints/compliments • Compliance with Supervision levels • Internal audits, monitoring systems
<p><u>Guideline for the investigation and management of headache during pregnancy and the puerperium</u></p> <p>This is a revised policy within the South Eastern H&SC Trust. This policy's aim is to provide a consistency of evidence based approach when managing these women in order to provide the best clinical care</p>	<p>Out</p>	<p>The Policy was deemed to have no impact and was screened out. This guideline does not affect anyone's human rights and doesn't affect anyone's equality of opportunity.</p>

Description of Policy or Proposal	Screening Outcome	Reason for Reaching Screening Outcome
<p><u>Care of the Patient / Client in the Presence of Northern Ireland Prison Service (NIPS) Officer(s) at Secondary Care facilities</u></p> <p>This is an existing policy within the South Eastern H&SC Trust. The aim of this policy is to provide guidance for all staff involved in the care and treatment of a patient/client who has been detained in police (N.B HiP don't have responsibility for police custody) or prison custody and subsequently requires care in an acute setting</p>	Out	The Policy was deemed to have no impact and was screened out. This policy will be reviewed on an on-going basis by monitoring any related patient care incidents reported on the DATIXweb system
<p><u>Protocol on the Performance of Epidural Blood Patches on Patients Referred From Medical Specialties</u></p> <p>This is a new policy within the South Eastern H&SC Trust. The aim of this policy is to provide some structure and governance to the practice of delivering epidural blood patches to medical patients. Medical Specialties and Anaesthetics are both involved in these cases and it helps clarify who is responsible for what parts of the process, and the correct way to do the processes.</p>	Out	This policy was deemed to have no impact and screened out. There is currently no measurement in place that will monitor this policy.
<p><u>Supply of Tretinoin 10mg capsules, in the management of patients with a suspected diagnosis of Acute Promyelocytic</u></p> <p>This is a new policy within the South Eastern H&SC Trust. The aim of this policy is to ensure a timely supply of tretinoin is available for treating a suspected diagnosis of APL</p>	Out	This policy was deemed no impact and was screened out. There is currently no measurement in place that will monitor this policy.

Description of Policy or Proposal	Screening Outcome	Reason for Reaching Screening Outcome
<p><u>Guideline Statement for safe use of ultrasound gel: The United Kingdom Health Security Agency (UKHSA)</u></p> <p>This is a new policy within the South Eastern H&SC Trust. This policy is to ensure Non-sterile ultrasound gel has been associated with contamination and outbreaks of infection in various settings worldwide.</p>	Out	<p>This policy was deemed no impact and was screened out. The Trust undertakes to monitor this policy is to:</p> <ul style="list-style-type: none"> • Incident Reporting • Complaints • Compliments • Staff feedback
<p><u>Escalating Concerns (Chain of Command)</u></p> <p>This is a revised policy within the South Eastern H&SC Trust. The aim of this policy is to provide direction for all staff involved in the care of a patient/client where there is a concern regarding treatment, physical state/condition or care (either clinical or social) of the patient/client and where further advice is required from a more senior clinician or manager.</p>	Out	<p>This policy was deemed no impact and was screened out. The Trust undertakes to monitor this policy is to:</p> <ul style="list-style-type: none"> • Incident Reporting • Complaints • Compliments • Staff feedback
<p><u>Spirometry Policy (Adult)</u></p> <p>This is a revised policy within the South Eastern H&SC Trust. Spirometry is the objective measure of assessing lung function. The policy stipulates the criteria, procedure for obtaining spirometry and decontamination and calibration of equipment. The policy applies to all Health care professionals involved in obtaining and/or interpreting spirometry.</p>	Out	<p>The Policy was deemed to have no impact and was screened out. This policy will be reviewed by self monitored by staff performing the procedure.</p>