

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

Department of Radiology, Patient Appointment Letter

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

Revised

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

The Trust has reviewed the wording on its patient appointment letter and amended the wording to strengthen the promotion of equality of opportunity for all service users.

The Trust has taken into consideration professional body guidance, namely 'Inclusive Pregnancy Status Guidelines for Ionising Radiation: Diagnostic and Therapeutic Exposures' 2021 from the Society and College of Radiographers. The Trust has also worked with LGBTQ+ communities to create an inclusive language approach that protects the health and safety of our service users. The Trust has also taken into account service user feedback.

This has resulted in the decision to remove the wording 'uterus/womb' from patient information pertaining to pregnancy.

The terminology is now 'if you are aged between 11 and 55 years, and there is a possibility that you are pregnant, or if your appointment date is more than 28 days since the start of your last period, contact the Department of Radiology to reschedule'.

The use of this wording enhances and strengthens the promotion of equality of opportunity for all service users who may need to access our Radiology services, and takes into account consideration of all Section 75 equality categories. Service Users aged 11-55 years of age are in the Trust identified risk group.

The use of gender-neutral and inclusive language by healthcare professionals is important and allows radiographers to fulfil their role under IR(ME)R.



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

Trust staff and service users are representative of all section 75 categories. Gender, age and sexual orientation S75 categories will benefit from the rewording in the appointment letter.

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

The appointment letter is Trust owned.

(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?)

Detract

- Staff not being aware of the rewording of the letter
- Resistance from staff and Unions
- Service users/families/carers being unaware of the rationale behind the rewording, and their potential feedback

Contribute

- Trust complying with guidance eg Inclusive Pregnancy Guidance issued from Society of Radiographers
- IRME)R legislation 2017
- Close working relationship and ongoing engagement with stakeholders including with LBGQ+ community



(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 stakeholders: SEHSCT, imaging staff, professional users of the service,

External stakeholders: Service users/families/carers, Society of Radiographers, Royal College of Radiologist, RQIA, LGBTQ+ groups, Regional Trusts

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

- Trust’s Equality Scheme 2018
- Disability Discrimination Act 1995
- Human Rights Act 1998
- Trust Employers Procedures for IR(ME)R 2017
- HCPC Code of Professional Conduct
- Inclusive Pregnancy Status Guidelines for Ionising Radiation: Diagnostic and Therapeutic Exposures’ 2021 from the Society and College of Radiographers

(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.

Details of evidence/information

- Complaints and compliments
- Radiation incidents
- Guidance from professional bodies (Society of Radiographers)
- Regional discussion with other Radiology services

- Discussion with staff
- Discussion papers in professional journals
- Engagement with service users (via regular surveys, service user feedback, feedback from HappyOrNot terminals available to radiology patients, Care Opinion)
- Discussion with LBGTQ+ community and trainers

(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 55.50% Male 44.50%	Female 81.22% Male 18.78%
Age	0 -16 10% 16 -19 3% 20 - 29 9% 30 - 45 19% 46 - 59 20% 60 + 39%	0-15 0% 16 – 19 0.53% 20-29 16.39% 30-45 40.00% 46-59 33.49% 60+ 9.59%
Religion	Not Routinely collected for this service. Consideration has been given to Trust service user profile as below and council voting patterns. Protestant 50.52% Roman Catholic 27.90% Other 0.82% None 14.65% Not Known 6.11%	Protestant 42.99% Roman Catholic 25.90% Other 0% None 23.02% Not Known 8.10 %
Political Opinion	Not routinely collected. Council voting patterns below are considered. Ards & North Down council area return a unionist majority Lisburn and Castlereagh council area return a unionist majority Newry, Mourne & Down council area return a nationalist majority	Broadly Nationalist 3.03% Broadly Unionist 8.24% Do not wish to answer 11.09% Other 5.35% Not known 72.29%
Marital Status	Not routinely collected. Trust population profile is considered as below Single 31.7% Married 51.64% Divorced 6.01% Widowed 6.85% Separated 3.70% Other 0.1%	Single 32.16% Married 56.31% Divorced 3.47% Widowed 0.53% Separated 1.56% Other / Not Known 5.98%
Dependent	Not Routinely collected. Trust population profile is considered as below.	Child or children 13.00% Dependant older 2.98%

Status	Households with dependent children - 33.38%	A person with disability 1.89% None 10.54% Other/Not Known 72.30%
Disability	Not Routinely collected Trust population profile is considered as below. Households with one or more persons with a limiting long term illness 19.82%	No 25.84% Yes 1.32% Not known 72.85%
Ethnicity	Not Routinely collected Trust population profile is considered as below. Black African 0.1% Irish Traveller 0.04% Bangladeshi 0.06% Pakistani 0.04% Black Caribbean 0.03% Mixed Ethnic Group 0.35% Chinese 0.26 % White 98.50% Indian 0.25% Other 0.3 %	Black African 0.06% Irish Traveller 0.03% Bangladeshi 0.01% 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 Routinely collected Trust population profile is considered as below Estimated 10% of population is LGBTQ+. 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% Both sexes / Same Sex 0.58% Not known 71.70%

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

- Discussion with regional colleagues
- Staff meetings
- Meetings with professional bodies
- Training provided by LBGTQ+ Community
- Plans have been shared with staff, unions etc
- Consideration of survey results and feedback noted in Section 2
- Consideration of complaints and comments received from service users

(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	Service users	Staff
Gender	Female 55.50% Male 44.50%	Female 81.22% Male 18.78%	Minor Positive Impact (see 7.4)	None
Age	0 -16 10% 16 -19 3% 20 - 29 9% 30 - 45 19% 46 - 59 20% 60 + 39%	0-15 0% 16 – 19 0.53% 20-29 16.39% 30-45 40.00% 46-59 33.49% 60+ 9.59%	Minor Positive Impact (see 7.4)	None
Religion	Not Routinely collected for this service. Consideration has been given to Trust service user profile as below and council voting patterns. Protestant 50.52% Roman Catholic 27.90% Other 0.82% None 14.65% Not Known 6.11%	Protestant 42.99% Roman Catholic 25.90% Other 0% None 23.02% Not Known 8.10 %	None	None
Political Opinion	Not routinely collected. Council voting patterns below are considered. Ards & North Down council area return a unionist majority Lisburn and Castlereagh council area return a unionist majority Newry, Mourne & Down council area return a nationalist majority	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	Not routinely collected. Trust population profile is considered as below Single 31.7% Married 51.64%	Single 32.16% Married 56.31% Divorced 3.47% Widowed 0.53% Separated 1.56%	Minor Positive Impact (see 7.4)	None

	Divorced 6.01% Widowed 6.85% Separated 3.70% Other 0.1%	Other / Not Known 5.98%		
Dependent Status	Not Routinely collected. Trust population profile is considered as below. Households with dependent children - 33.38%	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	Not Routinely collected Trust population profile is considered as below. Households with one or more persons with a limiting long term illness 19.82%	No 25.84% Yes 1.32% Not known 72.85%	None	None
Ethnicity	Not Routinely collected Trust population profile is considered as below. Black African 0.1% Irish Traveller 0.04% Bangladeshi 0.06% Pakistani 0.04% Black Caribbean 0.03% Mixed Ethnic Group 0.35% Chinese 0.26 % White 98.50% Indian 0.25% Other 0.3 %	Black African 0.06% Irish Traveller 0.03% Bangladeshi 0.01% 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%	None	None
Sexual Orientation	Not Routinely collected Trust population profile is considered as below Estimated 10% of population is LGBTQ+. 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% Both sexes / Same Sex 0.58% Not known 71.70%	Minor Positive Impact (see 7.4)	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>The Trust has an ongoing strategy of staff training and</p>

	engagement via e-learning or face to face if safe and appropriate to do so. Also see 7.4 for consideration and mitigation
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	The Trust is committed to ensuring that staff and patients have equality of access to services and feel welcome, comfortable and safe accessing all Trust facilities, irrespective of race, religion or political opinion.	The Trust has in place its Good Relations statement which is displayed on staff and service user notice boards.
Political opinion	As above	As above
Racial group	As above	As above

(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 raising. Face to face training was stood down as part of the Trust COVID-19 response, however the e-learning module 'Making a Difference' is still available for staff and the Trust has recommenced face to face training where it is safe and appropriate to do so. Consideration is being given to a blended approach to delivery of training utilizing a variety of delivery methods including virtual and remote technology. On the basis of the information available, there is nothing to indicate that these changes would engender any adverse impact in regard to the promotion of good relations.</p>
Political opinion	As above
Racial group	<p>As above and additionally:</p> <p>As indicated previously, it is important that the Trust continues to translate essential information. Trust staff are cognisant of the ethical reasons for ensuring that patients who are not proficient in English as a first or second competent language are provided access to services including access to the system in an appropriate language. Telephone interpreting or face-to-face interpreting for appointments facilitates effective and safe communication. The Trust has arranged for written information on encompass implementation to be provided in alternate languages for service users.</p> <p>The Trust is encouraging staff to continue accessing telephone interpreting services as appropriate.</p> <p>The promotion of Good Relations is an integral part of the Trust's commitment to improve the health and wellbeing of all our staff and in line with our Good Relations Statement, we strive to ensure that all staff irrespective of religion, race or political opinion feel safe, welcomed and comfortable in work.</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?

- The Trust is committed to ensuring equality of opportunity for all service users and staff in terms of disability and complies with all relevant Disability legislation, including the Disability Discrimination Act 1995 and the United Nations Convention on the Rights of People with Disabilities.
- The Trust Disability Action Plan 2018 – 2023 promotes these two duties. The Trust is currently consulting on its 2023 – 2028 Disability Action Plan which is due for Trust approval 2023. Additionally, the Trust has policies, procedures and strategies in place aimed at encouraging disabled people to participate in public life and promote positive attitudes towards disabled people.
- Consideration has been given to the profile of staff and/or service users affected by the proposal including those with a disability.
- All staff must complete mandatory training on equality, human rights and good relations which includes awareness of disability duties. As this is available online, staff are being encouraged to complete online if possible at this present time. Patient Experience and Domiciliary Care staff have received bespoke face to face training as it is more difficult for them to access the e-learning module.

(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	X		
Article 3 – Right to freedom from torture, inhuman or degrading treatment or punishment	X		
Article 4 – Right to freedom from slavery, servitude & forced or compulsory labour			X
Article 5 – Right to liberty & security of person			X

Article 6 – Right to a fair & public trial within a reasonable time			X
Article 7 – Right to freedom from retrospective criminal law & no punishment without law			X
Article 8 – Right to respect for private & family life, home and correspondence.	X		
Article 9 – Right to freedom of thought, conscience & religion			X
Article 10 – Right to freedom of expression	X		
Article 11 – Right to freedom of assembly & association			X
Article 12 – Right to marry & found a family			X
Article 14 – Prohibition of discrimination in the enjoyment of the convention rights			X
1 st protocol Article 1 – Right to a peaceful enjoyment of possessions & protection of property			X
1 st protocol Article 2 – Right of access to education			X

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.

The right to the highest attainable standard of health is to be realised progressively over time and the Trust as a public authority must use the maximum available resources to fulfil the right.

The Trust recognises that equality does not mean treating everyone the same but treating everyone according to their needs.

At this time the e-learning module on Equality, Diversity, Human Rights and Good Relations is promoted however face to face training programmes can and are facilitated if safe and appropriate to do so.



(7) Screening Decision

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

Major impact	
Minor impact	X – positive impact
No impact	

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

Yes	X
No	

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

Yes	
No	X

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

The Trust has carried out an equality screening of the rewording of the patient appointment letter as part of the appointment letter review process.

The Trust has established that there may be a minor positive impact for service users who are aged between 11 and 55 years, and there is a possibility that they may be pregnant, protecting all service users from unnecessary radiation in pregnancy.

The Trust has a legal duty, when carrying out medical exposures using ionising radiation, to establish written procedures for making enquiries of all individuals of childbearing potential to establish whether the individual is, or may be, pregnant or breastfeeding.

The Trust has taken into consideration professional body guidance, namely 'Inclusive Pregnancy Status Guidelines for Ionising Radiation: Diagnostic and Therapeutic Exposures'

2021 from the Society and College of Radiographers.

The Trust has also worked with LGBTQ+ communities to create an inclusive language approach that protects the health and safety of our service users. The Trust has considered feedback from our service users via care opinion, surveys and complaints received. This has resulted in the decision to remove the wording 'uterus/womb' from patient information pertaining to pregnancy.

The use of this new wording enhances and strengthens the promotion of equality of opportunity for all service users who may need to access our Radiology services, and takes into account consideration of all Section 75 equality categories.

The Trust has made this amendment and continues to review this and other patient information as part of a planned process to regularly update our patient communications which include a number of leaflets and letters.

The use of gender-neutral and inclusive language by healthcare professionals is important and allows radiographers to fulfil their role and responsibilities under IR(ME)R and the Trust Equality Scheme.

Engagement with our Service Users

The Trust is always looking at ways to best engage with our stakeholders and to take feedback and comments from our service users. To assist with this the Radiology Department has in place an ongoing electronic patient information review programme. A QR code is provided along with the appointment letter which takes the service user directly to a short questionnaire on the quality of the information provided. This questionnaire is available in hard copy also to improve service user accessibility.

Each quarter generates approximately 200 returns which are analysed and individual reports provided for each leaflet.

As part of this ongoing review, Question 5 asks the service user the following question '*Is the leaflet free from discrimination (gender, age, religion)*'

Analysis over the past 12 months of this engagement showed that of the 503 service users who viewed the question, 121 service users responded 'YES' to this question and a total of 381 did not respond.

There was only one response which stated 'NO'. There was no detail provided in relation to this one negative response.

The Trust has carried out preparation for the launch of a new Inclusive Radiation Safety questionnaire and a service user survey was run in August 2022. A poster was displayed with a QR code taking the service user to a short questionnaire. This was made available in the waiting areas throughout Radiology services in SEHSCT.

Analysis of the responses indicated that all respondents affirmed they understood the need for the inclusive radiation safety form being introduced. Additionally, over half of respondents indicated they understood why it was a requirement to ask about gender assigned at birth

prior to undertaking imaging.

An Action Plan was developed from the outcomes of this survey.

Actions completed include the following:

- Staff education around barriers to accessing healthcare for Transgender patients and potential risk of irradiating foetus in Trans-male patients. Awareness training and local PowerPoint highlighting legislative drivers and SoR advice.
- Staff awareness raising and education on the requirement for these questions and approaching them in a sensitive and professional manner ensuring patient privacy and dignity is maintained at all times

Alongside the launch of the new form on 20th November 2023 there will be 2 new posters, with one for patients and one for staff. The Trust is currently carrying out an equality screening of these resources.

HappyOrNot Feedback Terminals.

The radiology service leases 5 HappyOrNot terminals as another way of gauging user satisfaction of outpatients attending Radiology services across all hospital sites.

Each terminal allows patients to rate their experiences by pressing one of four simple buttons, signified by corresponding emoticons.

The terminals gather service user feedback on the following

- Staff attitude and behaviour
- Wait times
- Privacy and dignity
- Treatment and quality of care
- Our communication
- Something else

In 2022 – 2023 the terminals received a total of 4321 “hits” and over 500 open feedback messages.

The average experience rating was from 93%-97% positive.

To date there has been **no** feedback in the open feedback section in relation to gender inequality or discrimination and the Trust continues to monitor daily so corrective actions for any negative feedback can be addressed instantly.

The Trust is committed to an ongoing screening of the implementation of this patient appointment letter and will take into account feedback from service users and our staff. The



Trust will equality screen annually or sooner if required. If a major potential adverse impact is identified the Trust can upgrade to a full EQIA.

(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 of complaints and compliments
- Feedback via Care Opinion
- SAI reports on radiation incidents
- Ongoing electronic leaflet review programme in place. Quarterly reports generated and user feedback taken into account when reviewing patient information.
- Review of Action Plan outcomes
- Continued analysis of Survey feedback to engage with our service users
- HappyOrNot terminal feedback monitored weekly
- Feedback from staff via 1-1 and team meetings
- Staff and service users will be surveyed in January 24 in relation to their satisfaction regarding a new inclusive safety questionnaire launched in November 23

Approved Lead Officer: **Alyson Lattimer**
Position: **Governance Lead, Radiology**
Date: **27 November 2023**
Policy/proposal screened by: **A Lattimer**

Please forward completed schedule to:

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