

Screening Outcome Report 1st July 2024 to 30th September 2024

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 and will be produced each quarter thereafter.

Communication & Engagement

In order to carry out our functions there is a need to continue to effectively engage and work collaboratively with a wide range of stakeholders including Trust staff, Trade Unions, service users, carers, commissioners, voluntary/community sector, public representatives and independent providers.

The Trust is committed to promoting personal and public involvement in all its activities. The development of new policies and proposals will be supported by effective engagement processes to ensure that staff, service users and all interested parties are fully involved. Planning for, and delivering safe, clinically effective and cost effective services requires close collaboration at many levels.

If you have any queries about this document, and its availability in alternative formats (including Braille, disk and audio cassette, and in minority languages to meet the needs of those who are not fluent in English) then please contact:

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Outcome of Screening

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

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

Description of Policy or Proposal	Screening Outcome	Reason for Reaching Screening Outcome
<p>Management of Adult Patients requiring Antimicrobials under the Enhanced Care at Home (ECAH) or Hospital At Home (HAH) service</p> <p>These guidelines are intended to give consistent trust-wide guidance on the Management of Patients requiring Antimicrobials under the Enhanced Care at Home (ECAH) or Hospital At Home</p>	Out	<p>The Trust will continue to monitor this policy by;</p> <ul style="list-style-type: none">• Regular audit of antimicrobial prescribing practice under the ECAH/HAH service model.

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<p>service. This guideline sets out recommendations for appropriate clinical conditions and drug regimens for GP-initiated, ECAH Consultant-led care, and SET Geriatrician-led care for patients with infection managed via the ECAH/HAH service.</p>		
<p>Implementation of Interventional Procedures</p> <p>The introduction of new interventional procedures into clinical practice requires a system of controls, which protects patients from procedures being performed by unskilled practitioners. Northern Ireland now participates in the NICE Interventional Procedures Programme and new arrangements have been developed for HSC healthcare professionals intending to undertake new interventional procedures.</p>	Out	<p>The Trust will continue to monitor this policy by;</p> <ul style="list-style-type: none"> • Monitor Datix forms.
<p>Policy for Outpatient Parenteral Antimicrobial Therapy (OPAT) for patients under the care of South Eastern Trust Consultant teams</p> <p>This policy is intended to set out consistent trust-wide principles on the safe management of patients requiring IV antimicrobials in the community setting under the care of SET Consultants. This policy outlines recommendations for appropriate patient selection, appropriate infective states, and monitoring/follow-up responsibilities, for Trust staff</p>	Out	<p>The Trust will continue to monitor this policy by;</p> <ul style="list-style-type: none"> • Regular audit of antimicrobial prescribing practice under the OPAT service • Staff and patient satisfaction surveys.

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referring patients to the Trust OPAT service.		
<p>Standard operating procedure for the provision of an enhanced Postoperative Anaesthesia Care Unit (PACU) for surgical patients.</p> <p>Refining the care of high-risk surgical patients, reducing critical care demand and improving theatre flow through reduced cancellations and delays</p>	Out	<p>The Trust will continue to monitor this policy by;</p> <ul style="list-style-type: none"> • Monitor Datix forms.
<p>Medical Appraisal and Revalidation</p> <p>The purpose of this policy is to outline how all licenced Medical Practitioners (Doctors) registered with the General Medical Council and with a prescribed connection to the South Eastern Health & Social Care Trust will undergo a high quality and consistent form of annual medical appraisal. This will underpin the 5 year revalidation process, to assure that licensed doctors remain fit to practice and are supported professionally.</p>	Out	<p>The Trust will continue to monitor this policy by;</p> <ul style="list-style-type: none"> • Feedback surveys (3 years rolling cycle) will be completed to inform the Trust's quality assurance framework for appraisal.
<p>Policy Statement for the Prescription and Administration of Oxygen in Adult Patients</p> <p>This aim of this policy is to ensure patient safety and to minimise the potential risk to patients who require oxygen therapy.</p>	Out	<p>The Trust will continue to monitor this policy by;</p> <ul style="list-style-type: none"> • Incident Reporting • Complaints • Compliments • Staff feedback

Description of Policy or Proposal	Screening Outcome	Reason for Reaching Screening Outcome
<p>Chaperone Policy & Guidelines</p> <p>This policy sets out guidance for the use of chaperones and procedures that should be in place for consultations, examinations, investigations and clinical interventions that are considered to be intimate.</p>	Out	<p>The Trust will continue to monitor this policy by;</p> <ul style="list-style-type: none"> • Incident Reporting • Complaints • Compliments • Staff feedback
<p>Driving Policy</p> <p>To ensure we (SET) are complying with Road Traffic Legislation and Laws, and are reviewing the information we share with staff who use Trust vehicles to undertake their duties and those staff who use their personal vehicles to undertake their duties. To ensure all reasonable steps are taken to ensure the safety of all Staff, Volunteers, Authorised Passengers, Contractors and other road users.</p>	Out	<p>The Trust will continue to monitor this policy by;</p> <ul style="list-style-type: none"> • If there are any legal / legislative changes to driving laws in the UK the screening document will be reviewed. • The Trust has established a Fleet & Transport Management Sub-Committee under the Chairmanship of the Assistant Director Patient Experience to ensure implementation of all Transport related issues. • The committee will prepare, implement and review an Annual Transport Action Plan, identify and monitor Key Performance Indicators for Transport which will include Transport Management and the Management of Transport related road risk. • Feedback from service users • Feedback from staff • Compliments and complaints

Description of Policy or Proposal	Screening Outcome	Reason for Reaching Screening Outcome
<p>Procedures for the management of Adult and Paediatric Emergencies in the Downe and Lagan Valley Hospitals</p> <p>Standardised approach to managing Adult and Paediatric Emergencies in Downe and Lagan Valley Hospitals.</p>	Out	<p>The Trust will continue to monitor this policy by;</p> <ul style="list-style-type: none"> • Cardiac arrest audit • Equipment audit • 'Mock' arrests • Feedback from staff • Compliments • Complaints • Datix
<p>SET Policy on Adult Safeguarding and Adult Protection</p> <p>The purpose of this policy is to make clear the requirements of the Trust in ensuring that where harm is caused it can be identified and dealt with through direct Trust service provision or commissioned services.</p>	Out	<p>The Trust will continue to monitor this policy by;</p> <ul style="list-style-type: none"> • Review of Regional Policy/Procedures • Internal and external audits • Complaints/compliments • DSF monthly safeguarding activity reports • Supervision • Social Work/Designated Officer/ Trust Safeguarding Forums • Safety & Quality Adult Safeguarding Subcommittee meetings

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<p>Protocol Statement on the Measles Pathway</p> <p>The aim is to provide guidance to staff in clinical areas if a person presents to Trust facilities with measles/suspected measles. This guidance related to infection prevention and control. The outcome is to ensure safety of patients, visitors and staff in relation to exposure to the measles virus.</p>	Out	This protocol will be kept under review by the Trust Measles Oversight Group.
<p>Microbiological Commissioning and Monitoring of Operating Theatre Suites</p> <p>For uses by Estates, theatre users and infection prevention & control for air sampling and commissioning in theatres and PPM</p>	Out	The operational implementation of this guidance will be monitored by the Trust Ventilation Committee and any equality, good relations, disability and human rights will be reviewed.
<p>Gifts and Hospitality Policy</p> <p>The objective of the policy is to ensure that Trust employees are not placed in a position, which raises or appears to raise, conflict in their progression of business activities.</p>	Out	Comments arising from policy users will be considered. The policy will be formally reviewed in line with SEHSCT policy protocol.
<p>Management of Litigation (Professional Negligence and Personal Injury) Claims against the Trust.</p> <p>The purpose of the policy is to set out the arrangements for the handling of Professional Negligence and Personal Injury Claims by the Trust, as primarily laid down by the Department of Health in:-</p> <ul style="list-style-type: none"> - Circular HSC (SQSD) 5/10 - Handling Clinical and Social 	Out	Monitoring will be included in the departmental/internal audit arrangements for this policy.

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<p>Care Negligence and Personal Injury Claims (10 March 2010);</p> <ul style="list-style-type: none"> - Circular HSC (F) 12-2022 Guidance on Losses and Special Payments (including Compensation Payments) (21 March 2022); - Circular HSC (F) 09/24- Revised HSC & NIFRS Delegated Limits and Requirements for Departmental/DoF Approval (19 April 2024). - Circular HSC (F) 38-2023 Payments in respect of Litigation and Legal Services in HSC Bodies and NIFRS – Implementation of Controls (14 Nov 2023) 		
<p>Long Term Oxygen Therapy (LTOT) Assessment</p> <p>This policy aims to direction for staff involved in the assessment of patients who may need Long Term Oxygen Therapy (LTOT) at home. This may include patients with lung disease, chronic heart failure, neurological conditions and palliative care in the SoutheasternTrust.</p>	Out	<p>The Trust will continue to monitor this policy by;</p> <ul style="list-style-type: none"> • Incident Reporting • Complaints • Compliments • Staff feedback
<p>Policy for the Assessment of Ambulatory Oxygen in Respiratory Patients</p> <p>This policy provides guidance for respiratory teams working within SET for the assessment of ambulatory oxygen. The policy is guided by The British Thoracic Society Guidelines (2015). There is evidence that ambulatory oxygen is effective in Chronic Obstructive Pulmonary Disease (COPD). There is some evidence that it is effective in Cystic Fibrosis</p>	Out	<p>The Trust will continue to monitor this policy by;</p> <ul style="list-style-type: none"> • Incident Reporting • Complaints • Compliments • Staff feedback

Description of Policy or Proposal	Screening Outcome	Reason for Reaching Screening Outcome
<p>and diffuse parenchymal lung disease. The role of ambulatory oxygen in other respiratory diseases e.g., bronchiectasis and asthma, remains less well documented but the use in these patient populations is based on expert opinion. This policy should be read in conjunction with the policy for the assessment of long term oxygen in respiratory patients.</p>		