Public Authority Statutory Equality and Good Relations Duties
Annual Progress Report 2016-17

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Documents published relating to our Equality Scheme can be found on the Trust’s web site:
http://www.southerntrust.hscni.net/about/Publications.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 2016 and March 2017
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 2016-17, 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.

This is the 10th Annual Progress Report prepared by the Southern Health and Social Care Trust’s Equality Assurance Unit. The purpose of which is to demonstrate how the Trust has fulfilled its:

- S75 Equality and Good Relations Duties under S75 of the NI Act 1998
- Commitments in its Equality Scheme
- Disability Duties as set out in Section 49A of the Disability Discrimination Order (DDO).

This year’s report shows substantive progress in implementing the above duties which has brought about improved outcomes for the 9 S75 equality categories.

The implementation of the Trust’s Equality Action Plan is central to the implementation of the Trust’s statutory equality, disability and good relations duties.

Examples of Key Policy Developments during the year under review include:

1.1 - Consultation and Development of the Trust’s new S75 Action Plan and Disability Action Plan aimed at Tackling Inequalities - Period 2017-2022

During the year under review a substantive piece of work was undertaken in order to inform and develop the Trust’s new S75 Action Plan and Disability Action Plan which will cover a 5 year period 2017-2022.

These draft plans were informed by the HSC Trusts’ Audit of Inequalities, a regional engagement event and are currently subject to a formal 14 week consultation with a wide range of stakeholders. Citizen Space is being utilised, by all 6 HSC Trusts, as the platform to host this public consultation thereby providing consultees with a single point of reference to view these documents and to provide their views and comments.

Delivering Together Workshop 19th January 2017

This regional engagement event referred to above, which took place on 19th January 2017, was designed to be interactive, informative and informal. The richness of the information exchanged and dialogue that was generated during this event has undoubtedly helped shape the Trusts’ draft 5 year plans. The HSC sector came to the event on 19th January 2017 with the intent of starting with a “blank canvas” and with the clear aim of co-designing the proposed actions that now make up these draft plans. This is in keeping with the direction set out in the Health and
Wellbeing: 2026 Delivering Together strategy. For a copy of the Outcome Report please click on the following link: https://view.pagetiger.com/Outcome-Report

Partnership working has been key and has proved effective in developing both regional and local draft plans. The Trust would wish to acknowledge all those who put forward their ideas and suggestions at this event. The resultant outcome is draft plans which are more meaningful and effective as a result of the contributions received to date.

At the time of completing this year’s S75 annual progress report both HSC regional and local draft plans were subject to a 14 week consultation period ending October 2017. HSC Trusts are keen to engage with everyone who has an interest and stake in the delivery of our plans. Our experience to date has proved that these plans are much richer and meaningful if people are engaged and involved in their development and implementation.

After the consultation period has closed, HSC Trusts will review both regional and local draft plans against the feedback received. We will produce an outcome report showing how consultees’ feedback has informed our final plans. We will then present the final plans for approval by our Trust Boards. Copies of the final plans will be available on each Trust’s website or by contacting the local Equality Unit.

Mainstreaming S75 Equality Duties

1.2 - Review of Equality Scheme and Action Plan

A review of the Trust’s current Equality Scheme was undertaken during the current reporting period. Changes in the main related to adjustments in staffing compliment, structures and to reflect the growth in population profile of the SHSCT. There were no material changes to the format or content of the Equality Scheme, or
detraction from any of the commitments made by the Trust to ensure the effective and timely implementation of the scheme.

1.3 - Equality Screening Template

HSC Trusts are committed to working with the Equality Commission (ECNI) to support best practice in relation to equality screening and EQIAs. HSC Trusts continue to conform with the ECNI’s existing guidance on Equality Screening and Equality Impact Assessments. The HSC Trusts, however, plan to review their Equality Screening Template based on operational experience and based on the outcome from the pilot that was conducted on a proposed new template. This will be picked up under the Trust’s 5 year Equality Action Plan – Section 1 - ‘Simplifying our Processes’.

1.4 - Review of the Trust’s Work Life Balance Policy

The Trust has an extensive range of policy initiatives to help staff reconcile and balance their work life commitments.

This suite of policies was reviewed, during the current reporting period, to take account of legislative developments not least the right to request and the right to have requests taken seriously for changes to working patterns for staff regardless of their dependant status.

The Trust also developed and consulted on a new ‘Time off Work’ policy and has tabled same before the Trust’s Joint Negotiation Consultative Forum, JNCF – a Management and Trade Union forum. This policy sets out arrangements for both staff and managers re time off to attend appointments e.g. GP and Hospital appointments and other public service duties. This new policy aims to provide clarity for managers and promote consistency in the application of these arrangements across the Trust; and to ensure fair and equitable treatment. This policy was also subjected to S75 Equality Screening and engagement - in keeping with the commitment in the Trust’s Equality Scheme.

1.5 - Promoting Inclusivity – Employment of Persons with a Disability

During the year under review work commenced on the review of the Trusts’ regional Framework Policy for the Employment of Persons with a Disability and the Trust’s Guidance for Managers on the provision of timely Reasonable Adjustments in the Workplace.

Given that the prevalence of disability is generally under-reported the Trust developed a simple guide for employees entitled ‘Should I Disclose to My Employer that I have a Disability? A copy of the guide is to be found on the Trust’s staff Intranet under Policies and Procedures – Equality Section.

Research has shown that it is not easy for an individual to declare that they have or have recently acquired a disability. 50% of disabled job applicants do not feel comfortable about disclosing their disability when applying for a job.

Source: Hard at Work Employment and Disability in N.
**What does the law say?**
The law says you do not have to tell an employer about your disability – it is your choice. Disability Action’s advice is that it is usually better to tell an employer about your disability. This is particularly important where there are health and safety issues or if an individual needs reasonable adjustments. The decision is always the individual's, but it can help to talk things over with someone.

**Trust’s Disability Liaison Officer – Ciara O’Hanlon is here to help**
The Trust is working hard to foster a culture where staff and new employees can feel confident in self-declaring that they have a disability. Staff can make this disclosure by entering their details on HRPTS – the Trust’s computerised human resources and pay roll system. This can be done by logging onto ESS – Employee Self Service and logging into ‘Personal Details’ where staff will find their Equality and Diversity Data – which is theirs to maintain. The Trust’s Disability Liaison Officer, based in the Trust’s Equality Unit, is on hand to provide confidential help and support in taking this step.

In addition a further guide was developed to encourage staff to update their own Equality and Diversity data on the Trust's HRPTS system. This new guide is entitled ‘How to Update Equality and Diversity Personal Data’ and can also be found on the staff intranet.

Both guides were produced during the reporting period.

**1.6 - Trust’s Disability Placement Scheme – A Bridge to Employment**

The Trust’s Disability Placement Scheme was also re-launched, during the year under review, to provide for renewed impetus and to coincide with the appointment of a new member of staff to the Equality Unit whose role it will be to actively promote meaningful job placements across the Trust. Currently, 278 staff have self-declared that they have a disability. 33% of disabled people are in employment – less than half of the rate of non-disabled people according to a recent report ‘Hard at Work – Employment and Disability in NI’.

The Trust will renew its efforts over the next year to:

- continue to foster a culture where staff are confident in self-declaring that they have a disability - so that they can enjoy the full protection of the Disability Discrimination Act;
- encourage meaningful job placements for persons with a disability across the Trust;
- foster stronger links and partnership working with the Disability sector.

At the time of completing this year’s annual progress report a number of placements were being set up in partnership with the disability sector as follows:

- 13 people were participating in the Trust’s disability placement scheme – comprising of both individual and group placements (horticultural).
- 4 admin placements in Trust day centres and health and social services centres.
- 1 placement in Arts and Crafts in Millview Resource Centre, Bessbrook.
- 2 group horticultural placements across a variety of Trust sites.
The Trust's Disability Liaison Officer is actively following up additional placement opportunities across the Trust in settings such as support services, catering, day centres and grounds maintenance.

The Equality Unit intends to provide a feature, in its recently re-launched Equality in Action Newsletter, on the Trust's Disability Placement Scheme and will cover the experiences of various individuals and the value they have gleaned from this type of experiential learning.

1.7 - Re-launch of the Trust's Equality in Action Newsletter

During the year under review the Equality Unit took the opportunity to re-launch its Equality in Action – Staff Newsletter. The first edition provided the opportunity to introduce two new staff members to the team i.e. Dean Wilkinson, Equality Assistant and Ciara O'Hanlon, Equality Manager. In addition the Newsletter highlighted some key successes as well as key priorities for the year ahead. The central aim of the Equality Unit is to promote equality, good relations and human rights within a health & social care system that respects the diversity of those who work in our service; those in need of our services and those who come into contact with our services.

The Equality Unit plan to follow up this first edition with further themed editions. Edition 2 was a special edition featuring progress in implementing the S75 equality duties for the Trust Board. Further themed editions will include a focus on the Trust’s Interpreting and Translations services, Disability Placement Scheme, a special feature on staff training and resources. The Equality Unit also featured in ‘Meet the Team’ April 2017 edition of the Southern-I, i.e. Trust’s Corporate Newsletter, with the aim of raising the profile of the Unit and the work that it does on behalf of the Trust.

1.8 - Promoting Participation - Young Persons in Transition from Care – Employability Project - positive action in employment

As a corporate parent, the Trust has made significant investment in supporting the education, training and employment needs of Looked After Children. This has been achieved through the introduction of an Employability Project which aims to provide young people within the 16Plus Leaving and Aftercare Service with support to enter and sustain education, training and employment opportunities within the Southern Trust locality.

The Trust recognises that for a variety of reasons young people, transitioning from a care environment, wishing to obtain employment, require additional support measures over and above that which is currently provided. The Trust has therefore put in place a range of support measures to assist young people during the recruitment process and subsequently during their placement. Such supports include: assistance in completing application forms via a training session; assessment preparation; support in employment via comprehensive induction and a mentoring programme with the aim of helping young persons in meeting and sustaining the standards of behaviour and performance required.
A training and development plan is also agreed which enables the young person to reflect on their knowledge, skills and values in a structured way - with a focus on attaining the necessary knowledge and skills required for success.

The benefits of this project are significant, not only to the Trust in terms of its corporate responsibility but to the wider society. The scheme seeks to ensure that these young people not only have the opportunity to start adult life in a positive manner but also have the opportunity to glean real and meaningful work experience to help them in their search for paid employment with the Trust and elsewhere.

The Trust has worked closely with the Equality Commission for NI and has valued their input in the development of this scheme.

The Employability Programme continues to provide education, training and employment opportunities for care experienced young people including the provision of advice and guidance to 16Plus teams, internal placement opportunities within Trust facilities across a number of directorates, apprenticeship/work experience opportunities, delivery of one to one qualifications, tutoring support, bi-annual review of career pathways jointly with the Careers Service NI for all young people linked to the 16Plus Service.

The Southern Trust internal vacancy trawls are open to care experienced young people and have proven successful for several young people. Ring fenced posts and banking opportunities are now being accessed by young people with our first young person having secured a permanent contract within the Trust with a further six being progressed onto the banking system within admin and nursing assistant roles.

The development of external placement opportunities has been progressed and will be operational in 2017 providing an increased range of work experience placements afforded to young people within the private, community, voluntary and public sectors.

In delivering all of the above opportunities the employability service continue to utilise innovative and new approaches to the delivery of all services.

January 2017 stats indicate that the number of 19 year olds in ETE within the Southern Trust resided at 78%.

1.9 - Celebration Event for Young People in Care

During the year under review an awards event took place to celebrate the successes of young people in care. The Southern HSC Trust in partnership with the Fostering Network hosted the event in Armagh City Hotel on 28 March 2017.

Over one hundred young people in foster and residential care were nominated by their social workers and received awards for a wide range of achievements.

Opening the awards ceremony,

Mr Colm McCafferty, Southern Trust Assistant Director of Corporate Parenting said: “We know the many challenges that young people in care face, so it is important to
celebrate when they overcome these challenges and achieve success. As parents we are proud when our children do well, and as corporate parents for the children in our care - we in the Southern Trust are extremely proud of their achievements and want to celebrate them.

Mrs Kathleen Toner, Director of Fostering Network, commented:
“We are increasingly aware of the importance of the Fostering Achievement programme in supporting the aspirations of children and young people in foster care. Working with foster carers and kinship foster carers as primary educators is key to our success as are the close partnerships with education and health which enable us to provide individual support to more than 1300 children and young people each year. We are particularly delighted to be delivering our Achievement Awards in partnership with the Southern Health and Social Care Trust; this is prioritising the importance of education outcomes for looked after children. Education in its broadest sense is crucial to providing young people with the skills and knowledge they need to make choices to reach their full potential, we are very proud of the part we play in that.”

One care leaver shared her own views on the importance of education when in care:

“Education is so important, sometimes we just don’t see it that way, if I had one message to give, it is this – use all the support available to you and stick with it because it is your future.”

Mr Paul Morgan, Southern Trust Director of Children and Young People’s Services also highlighted the achievements of all the young people attending the event, and offered his thanks to the sponsors:

“The young people here today have taken their future into their own hands, they’ve excelled in areas of their individual interests and have gained knowledge and skills that will help them in the future. This celebration event is one of the most important in the Trust’s calendar and continues to grow every year. We really want to thank our sponsors – Lurgan and Newry Credit Union, Lidl and the Education Authority – they all have played a key part in the Looked After Children Achievement Awards ceremony.”

1.10 - Regional Discussion of Harassment and Bullying in the Workplace – Leadership Centre

A regional workshop was convened during the current reporting period to draw on the operational experience of senior Human Resource practitioners, Equality Managers and Trade Union representatives across Health and Social Care. The discussion provided the opportunity to share experiences and ideas in making a difference in dealing with dispute resolution in the workplace.
Staff from the Trust’s HR and Equality Unit provided input to these discussions drawing on their wide experience of handling these types of disputes in the workplace.

This was followed up with a number of small focus group discussions in various HSC organisations where staff provided their views in a confidential and safe context. It is planned to take forward the development of a regional policy approach with input from a regional working group whose task it is to review and draft a regional policy/framework for future dispute resolution.

1.11 - Promoting Inclusive Workplace - Gender Identity and Expression Employment Policy

This policy is aimed at creating a workplace where the dignity of and respect for Trans people is protected and promoted and where Trans people feel comfortable to express their gender identity. As an inclusive organisation, the Trust is committed to the health, well-being and dignity of all staff, irrespective of their gender identity and expression.

The Trust, in partnership with regional HSC organisations and in consultation with a range of stakeholders developed a draft Gender Identity and Expression Employment Policy.

The consultation period ran from Wednesday 4th January to Wednesday 29th March 2017 (12 weeks). The joint consultation on the draft policy and the associated equality screening documents were publicised on the website of each of the HSC organisations.

The consultation methods employed to inform the policy included:

- Invitation to submit written comments;
- Offer of individual face to face meetings/phone call;
- Roundtable discussion for transgender and non-binary individuals;
- Roundtable discussion with other consultees;
- Roundtable discussion with trade unions.

Responses were received from the following organisations:

- Focus
- PHA Deirdre McNamee
  PHA Mary Black
- HSC Pensions
- Castlereagh Council, Lisburn
- RCN rep Newry
- Probation Board NI
- South Eastern Trust
- Unison
- Member of staff Belfast Trust.

Consultees views on the Draft Gender Identity and Expression Employment Policy:

“We acknowledge and applaud the efforts the HSC have gone to in attempting to ensure the policy is as inclusive as possible of the sometimes divergent views that
were expressed in your various focus group discussions. We would be quite happy to endorse your draft with minor tweaks”.

“Policy is very clear and helpful, informing everyone about the issues and importantly the language associated with the policy”.

“Welcome a policy which seeks to establish consistency in the approach taken to those among us who are dealing with gender identity and expression issues”.

In keeping with best practice a consultation outcome report will be prepared showing how the views of consultees were taken into account in finalising this policy.

To assist with the effective roll out of this policy, Equality Managers from HSC organisations plan to develop training materials to support key staff likely to be involved with the implementation of the policy.

1.12 - Promoting Inclusive Workplaces - Regional LGBT Forum

The HSC LGBT Staff Forum participated in Newry Pride Parades and was supported by staff and trade unions. Information on Pride was sent to each Trust for inclusion on their intranet. In addition information stalls were organised in partnership with trade unions in Craigavon and Daisy Hill hospitals. At these stalls rainbow lanyards were given out to staff along with LGBT inclusion posters and information on Pride. The purpose was to raise visibility within the workplace. Many work colleagues walked with Forum members in the three Pride parades throughout Northern Ireland.

The LGBT Forum also hosted an evening in partnership with UNISON for members about the HSC pension scheme with an opportunity to seek further subsequent financial advice.

The LGBT Forum is endorsed by all of the trade unions and Trust management and receives admin support from the Public Health Agency. For more information about the Forum or to join the confidential email list contact lgbtstaff@hscni.net Staff can follow the Forum on twitter at @LGBT_StaffForum or www.lgbtstaff.hscni.net. Information and news is also posted on the Trust’s Intranet for staff to avail of and read.

The Forum has a confidential email list which continues to grow. E-bulletins are circulated to members with information on events, research, LGBT news and conferences. The Forum has an active twitter account which engages over 1500 followers across health and social care and LGBT and a website http://www.lgbtstaff.hscni.net/. The Trust continues to promote the LGBT e-learning tool to all HSC staff http://www.lgbtelearning.hscni.net/.

1.13 - Smoke Free Policy

The Southern Trust is ‘Proud to be a Quitter’ was the overarching message as it celebrated its first anniversary of being smoke free on ‘No Smoking Day’ on 8th March 2017.
Patients, visitors and Trust employees continue to reap the benefits of a healthier, cleaner and more pleasant environment since the implementation of the Smoke Free Health & Social Care Sites policy on 9th March 2016.

Roberta Brownlee, Southern Trust Chair said:

“We are extremely proud to have reached this key milestone of being one year Smoke Free. It is brilliant to see the high rate of compliance and support we have received. As a health and social care service we have an important role as an example and advocate for this environmental change. Our patients, management, staff and visitors are to be commended for their tremendous efforts throughout the challenges that they have faced and continue to face in reaching a Smoke free environment.”

Since the Southern Trust became smoke free in March 2016, approximately 1200 people have availed of the support and advice from the Trust’s Stop Smoking Service and over 750 people have successfully quit.

A recent survey undertaken by the Trust has highlighted that awareness of the Smoke Free Sites policy is high with 99.6% of 810 people aware that the Policy is in place.

The Trust’s Smoke Free Policy was subjected to a detailed equality and human rights screening. It was updated during the initial phase and more recently in March 2017 to reflect operational experience and the full extent of mitigating measures put in place to support staff and service users working in a smoke free environment.

1.14 - Review of Workforce Composition and Assessment of Fair Participation amongst the SHSCT workforce - Article 55 Tri-annual Review

The purpose of the Trust’s Article 55 tri-annual review is :

- to determine whether Protestants and Roman Catholics alike are enjoying, and are likely to continue to enjoy fair participation in employment;
- to ensure, where this does not appear to be the case, that the Trust determines on affirmative action (if any) that would be reasonable and appropriate; and
- to ensure, where affirmative action is determined that, where practicable, goals and time-tables are set;
- to set out the Trust’s conclusion on fair participation and whether further action is needed to secure or maintain fair participation.

The Trust completed its 3rd tri-annual Review during the current reporting period.
In terms of scope the report is broken down into the following areas:

- Composition of existing workforce as at 1/1/16 (including trends analysis as at 1/1/13 and 1/1/16)
- Location analysis as at 1/1/16
- Leavers analysis for the year ending 31/12/15
- Recruitment analysis for year ending 31/12/15 and comparison with existing workforce as at 1/1/16 and leavers for year ending 31/12/15
- Review of employers practices and procedures
- A detailed assessment of the extent of fair participation being enjoyed by both Protestants and Roman Catholics.

Analysis revealed that there was an increase of 1.4% in favour of Roman Catholics in the overall workforce when comparison is drawn with staff employed as at 1 January 2013 and 1 January 2016.

This is in line with an increasing trend within the Health Sector in favour of Roman Catholics as evidenced in the Equality Commission’s Annual Fair Employment Monitoring Report No 26 – A Summary of NI Monitored Workforce Returns:

**Health Sector Employees**

In 2015, the Roman Catholic community share [51.9%] of health sector employment continued to increase, continuing the trend observed since 2011 of a greater share of members of the Roman Catholic community in the health sector.
1.15 - Philippines Recruitment Campaign

Work continued during the year under review to seek to address the current international shortage of qualified nurses. A number of overseas recruitment campaigns to both EU and Non-EU countries brought with it some successes with new recruits now taking up posts within Health and Social Care. Plans are well underway to continue with further recruitment drives in 2017.
Example of Key Service Delivery Improvements:

1.16 - NI New Entrant Scheme (NINES) – A First Point of Contact – Promoting Access to Services

NINES is a nurse led service for new entrants to NI who are resident in the Southern Trust. The service offers support to new migrants, asylum seekers and refugees who are not already registered with a General Practitioner (GP).

NINES provides a holistic health assessment and screening to all new entrants, adults and children, and supports new migrants to register with a GP. It provides confidential help and advice and aims to discharge clients from the service within 3 months of first appointment.

The service helps clients to register with a GP which allows them to obtain a medical card which enables access to primary and secondary care and registration for dental treatment and optician services.

Clients have been seen using a combination of both drop-in and appointed clinics. Brief interventions and health screening is offered at each appointment. Past and present medical information is collected. Each patient is offered a blood pressure/pulse check, urinalysis & diabetes screening. Lifestyle information is discussed, health promotion advice is given and signposting completed where necessary.

Other issues which impact on health and wellbeing are also highlighted and addressed with clients such as benefit advice and housing. Support and signposting to other relevant health and community services remains a key component of this service to ensure that the clients integrate into their communities.

A client held health passport has been developed to enhance communication between primary and secondary care. This is completed and given to the patient once GP registration had been completed.

NINES Health Assessment Clinics

![Chart showing NINES Health Assessment Clinics from 1 August 2016 to 31 March 2017.](chart)
NINES works closely with interpreting services through the Northern Ireland Health and Social Care Interpreting Service. There have been 311 requests for interpreting services to date. Information flyers and leaflets have also been developed in the six main languages of the Southern Trust area.

Referrals – Countries of Origin

<table>
<thead>
<tr>
<th>Region</th>
<th>Number</th>
<th>Color</th>
</tr>
</thead>
<tbody>
<tr>
<td>Europe</td>
<td>530</td>
<td>Blue</td>
</tr>
<tr>
<td>South-East Asia</td>
<td>192</td>
<td>Red</td>
</tr>
<tr>
<td>Africa</td>
<td>85</td>
<td>Yellow</td>
</tr>
<tr>
<td>The Americas</td>
<td>43</td>
<td>Purple</td>
</tr>
<tr>
<td>Eastern Mediterranean</td>
<td>134</td>
<td>Green</td>
</tr>
<tr>
<td>Western Pacific</td>
<td>60</td>
<td>Orange</td>
</tr>
</tbody>
</table>

Interpreting services booked (languages in descending order)

- Lithuanian (including Lithuanian Sign Language)
- Arabic
- Tetum
- Romanian
- Latvian
- Portuguese
- Bulgarian
- Punjabi
- Mandarin
- Russian
- Polish
- Somali
- Vietnamese
- Hungarian

Communication networks have been established with Statutory & Voluntary Agencies such as South Tyrone Empowerment Programme (STEP), Citizens Advice Bureau, Women’s Centre, Vineyard, Belfast Central Mission (BCM), De Paul (Homeless Charity), Community Intercultural Programme, Employment Agencies, HR networks within local businesses, local supermarkets/shops, Gyms, pharmacies hospital ED departments, Minor Injury Units, GP surgeries etc.

**Tuberculosis screening** - Since April 2016 clinics have been held monthly across the 3 localities in the Trust. There have been 672 children referred with 484 screened for TB and 113 children have received a BCG. Appropriate referrals (7) have also been made to TB Specialists in Craigavon Hospital and to the Community Paediatricians in Newry & Belfast.
NINES Mantoux/BCG Clinics

90 Clinics Held
- 72% Attended
- 21% DNA
- 7% Cancelled

672 children booked
Average waiting time 41.38

NINES Mantoux/BCG Clinic Outcomes

484 children attended
- 369 Mantoux testing
- 113 BCG vaccinations
- 7 Referrals TB Unit
- 63 No Further Action

Vulnerable Persons Relocation Scheme (VPRS) - NINES has supported the Vulnerable Persons Relocation Scheme from July 2016 to March 2017 to ensure that the Syrian Refugees were screened for TB. 101 referrals, 18 clinics held, 64 Mantoux testing completed with 2 referrals to TB Nurse Specialist (with no further action).

The focus for NINES is on the prevention and management of disease and other health conditions through the promotion of healthy behaviours. NINES will continue to work in partnership with all agencies to promote the service and to ensure that all who are eligible will be able to access the service in an equitable and timely manner.

1.17 - Trust Traveller Action Group – Tackling Health Inequalities

In December 2010 the Southern Health and Social Services Trust established a Trust Traveller Action Group (TAG) to progress the recommendations emanating from the All Ireland Traveller Health Study report.

The TAG continues to meet every 3 months to share information on support services available for Travellers; to ensure that these services are suitable in meeting the Travellers’ health needs; and to ensure that Travellers are aware how to access services.
The TAG is chaired by the Assistant Director Promoting Wellbeing. Representation is drawn from:

- Other departments within the Southern Health and Social Care Trust
- Local Traveller Support Groups
- Safe and Well
- Early Years Toybox
- Traveller Education Support Service
- Housing Executive
- Public Health Agency
- Local Councils.

Travellers attended the group when it was first established in 2010 however during 15/16 there has been no direct Traveller involvement. Traveller Support Group workers act as a two way conduit between the Traveller Action Group bringing feedback to Travellers on progress made re issues raised by the Travellers.

**Progress during 2016/17 includes:**

On-going implementation of an action plan which covers 8 key areas including:

- Improved Inter-sectoral working under Community Planning;
- Early years support and educational attainment;
- Employment and skills;
- Reducing stigma;
- Traveller friendly HSC services;
- Targeted health and wellbeing programmes;
- Monitoring evaluation and research;
- Collaboration and joint working.

Membership of the group has extended to include local Councils.

**Key Achievements of the Trust’s Traveller Action Group:**

- Participation in consultation regarding Community Planning.
- Continued provision of Roots of Empathy programme in 6 primary schools with Traveller children attending.
- Provision of support and mentoring to the Travellers trained as Community Health Champions during 2015/16.
- Of the 16 Travellers trained, 9 Community Health Champions continued to actively engage.
- On-going support was provided in terms of sourcing additional training courses, employment and volunteer opportunities:
  - 3 Community Health Champions secured employment — 2 in a healthcare setting and 1 in private sector.
  - 1 Community Health Champion is volunteering with Loane House in Dungannon on a weekly basis and is registered as a SHSCT volunteer in addition to her HSC employment.
  - 1 Community Health Champion has just completed the Community Health Training programme, and
- A further Community Health Champion has applied to become a co-facilitator on the AWARE Traveller Mental Health programme.
- During 2016/17 the Traveller Health Trainer has provided:
  - 1:1 health checks (6)
  - Health clinics (15)
  - Health promotion programmes including 3 Walking programmes in Lurgan and Craigavon and a Choose to Lose programme in Mount Zion House.
- Provision of a range of home accident prevention information and resources to Traveller Support Workers, CHCs and CHTs.

In addition, the Equality Manager attended an ‘AWARE, Mood Matters Parent and Baby engagement workshop’ on 23rd January as part of the AWARE ‘Feel Good’ Project for Travellers and provided feedback on the AWARE Mood Matters Parent and Baby programme.

Further details of progress during the reporting period can be found in the Traveller Action Group Progress Report 2016/17 – see appendix.

Regional Traveller Health and Wellbeing Forum

The Regional Traveller Health and Wellbeing Forum led by the Public Health Agency (PHA) continues to bring together representation from the PHA, HSCB, Health and Social Care Trusts, Education Authority, Traveller support and relevant voluntary sector organisations.

The aim of the Forum is to improve the health and wellbeing of Travellers through developing better co-ordination, sharing models of best practice and shaping future services. Members are committed to undertake actions based on the findings and recommendations of the All Ireland Travellers Health Study, particularly those relating to health and wellbeing.

A yearly thematic action plan is approved and supported by the Forum and it allows a means of planning, delivery and accounting for actions to be undertaken by the members. The Forum meets 4 times a year to report on progress on agreed interventions and to agree new priorities.

Notable progress during the year under review was as follows:

- Commissioning of Traveller Health posts in Belfast, Western and Southern area
- Additional financial support for Traveller groups in the Southern area to sustain and expand services
- Commissioning of the Traveller Mental Health and Emotional Wellbeing programme (regional)
- Breast Screening Cancer Screening Pilot in Belfast
- Toybox High Scope regional training programme for Traveller families.

The Trust’s Equality Manager attended the Regional Travellers Forum meeting in March 2017 to liaise with Forum members on the co-production and co-design of an updated version of the Trust’s local Traveller Staff Information Booklet. This revised...
booklet will be re-launched as a regional resource for sharing across HSC organisations. It will also be added to the ‘Useful Resources’ section of the new Discovering E-Learning module for staff.

1.18 - Regional Interpreting Service – Providing Accessible Services

There follows a summary of the uptake of the regional face to face interpreting service managed by the BSO on behalf of the HSC. Figures relate to the period 1st April 2016 to 31st March 2017:

**Number of Interpreting Requests**

The total number of interpreting requests made by the Trust for face to face interpreting was as follows:

<table>
<thead>
<tr>
<th>HSC Trust Interpreting Requests</th>
<th>Number of Requests</th>
</tr>
</thead>
<tbody>
<tr>
<td>Southern Trust</td>
<td>50291 (47.20%)</td>
</tr>
<tr>
<td>Belfast Trust</td>
<td>31852</td>
</tr>
<tr>
<td>Northern Trust</td>
<td>11994</td>
</tr>
<tr>
<td>Western Trust</td>
<td>6738</td>
</tr>
<tr>
<td>South Eastern Trust</td>
<td>5666</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>106,541</strong></td>
</tr>
</tbody>
</table>

![% of Requests per Trust Area](image.png)
### Regional Top 20 Languages

<table>
<thead>
<tr>
<th>Languages</th>
<th>Requests</th>
</tr>
</thead>
<tbody>
<tr>
<td>Polish</td>
<td>31220</td>
</tr>
<tr>
<td>Lithuanian</td>
<td>15866</td>
</tr>
<tr>
<td>Romanian</td>
<td>8975</td>
</tr>
<tr>
<td>Portuguese</td>
<td>8323</td>
</tr>
<tr>
<td>Arabic</td>
<td>6203</td>
</tr>
<tr>
<td>Slovak</td>
<td>5356</td>
</tr>
<tr>
<td>Tetum</td>
<td>5319</td>
</tr>
<tr>
<td>Chinese - Mandarin</td>
<td>5103</td>
</tr>
<tr>
<td>Bulgarian</td>
<td>3421</td>
</tr>
<tr>
<td>Hungarian</td>
<td>3387</td>
</tr>
<tr>
<td>Chinese - Cantonese</td>
<td>2858</td>
</tr>
<tr>
<td>Russian</td>
<td>2541</td>
</tr>
<tr>
<td>Latvian</td>
<td>2042</td>
</tr>
<tr>
<td>Somali</td>
<td>1151</td>
</tr>
<tr>
<td>Czech</td>
<td>855</td>
</tr>
<tr>
<td>Chinese - Hakka</td>
<td>748</td>
</tr>
<tr>
<td>Spanish</td>
<td>589</td>
</tr>
<tr>
<td>Farsi</td>
<td>515</td>
</tr>
<tr>
<td>Bengali</td>
<td>369</td>
</tr>
<tr>
<td>Urdu</td>
<td>297</td>
</tr>
</tbody>
</table>

### SHSCT Top 20 Languages

<table>
<thead>
<tr>
<th>Languages</th>
<th>Requests</th>
</tr>
</thead>
<tbody>
<tr>
<td>Polish</td>
<td>14036</td>
</tr>
<tr>
<td>Lithuanian</td>
<td>12086</td>
</tr>
<tr>
<td>Portuguese</td>
<td>6453</td>
</tr>
<tr>
<td>Tetum</td>
<td>4912</td>
</tr>
<tr>
<td>Bulgarian</td>
<td>2876</td>
</tr>
<tr>
<td>Romanian</td>
<td>2579</td>
</tr>
<tr>
<td>Russian</td>
<td>1396</td>
</tr>
<tr>
<td>Latvian</td>
<td>1262</td>
</tr>
<tr>
<td>Slovak</td>
<td>1152</td>
</tr>
<tr>
<td>Arabic</td>
<td>1110</td>
</tr>
<tr>
<td>Hungarian</td>
<td>642</td>
</tr>
<tr>
<td>Chinese - Mandarin</td>
<td>519</td>
</tr>
<tr>
<td>Chinese - Cantonese</td>
<td>338</td>
</tr>
<tr>
<td>Czech</td>
<td>169</td>
</tr>
<tr>
<td>Spanish</td>
<td>136</td>
</tr>
<tr>
<td>Urdu</td>
<td>107</td>
</tr>
<tr>
<td>Italian</td>
<td>84</td>
</tr>
<tr>
<td>Punjabi</td>
<td>84</td>
</tr>
<tr>
<td>Pashto Central</td>
<td>71</td>
</tr>
<tr>
<td>Somali</td>
<td>50</td>
</tr>
</tbody>
</table>

### BSO Interpreting Service Customer Survey 2016/17

In an effort to improve the quality of the Interpreting service, HSC Staff and Practitioners were asked to complete an Interpreting Service Survey in December 2016.

165 responses were received in total from a range of HSC Staff and Practitioners who access the Service. Please see below results:

**Summary of Results:**

1. **How would you rate the overall service you received?**
   96% answered "Very good" or "Good".

2. **Would you say that our service has improved over the past 12 months?**
   72% of HSC Staff and Practitioners who use the Service either “strongly agreed” or “agreed” with this statement (26% neither agreed or disagreed).

3. **How satisfied are you with the time taken to complete the Service?**
   92% of HSC Staff and Practitioners who use the Service answered that they were “very satisfied” or “satisfied”.
4. How would you rate the Interpreting Service Online Booking System? 93% answered "Excellent" or “Good”.

5. Overall, how satisfied are you with the quality of our customer service? 93% of HSC Staff and Practitioners who use the Service answered that they were “very satisfied” or “satisfied”.

6. The Interpreting Service (and its staff):

<table>
<thead>
<tr>
<th>Provides an effective service</th>
<th>98% either &quot;strongly agreed&quot; or &quot;agreed&quot; with this statement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is approachable</td>
<td>94% either “strongly agreed” or “agreed” with this statement</td>
</tr>
<tr>
<td>Is consistent and dependable</td>
<td>94% either “strongly agreed” or “agreed” with this statement</td>
</tr>
<tr>
<td>Is courteous</td>
<td>94% either “strongly agreed” or “agreed” with this statement</td>
</tr>
<tr>
<td>Provides prompt confirmation of bookings</td>
<td>96% either “strongly agreed” or “agreed” with this statement</td>
</tr>
</tbody>
</table>

1.19 - Public Sector NI Wide Framework for Translation, Interpreting and Transcription

The Central Procurement Directorate (CPD) established a public sector NI framework for Translation, Interpreting and Transcription during the current reporting period. The steering group comprises of representatives from the HSC, BSO, CPD and PaLs. The Group met on a number of occasions during the year under review to explore the potential for these services to be procured on a regional basis and across a range of government departments. CPD identified Interpreting and Translation as a suitable category for public sector collaboration.

NB: Collaboration involves the centralisation of the procurement of services which are common across multiple organisations leading to the aggregation of demand with a view to achieving improved value for money. All public sector collaboration is being driven by the Public Accounts Committee (PAC) with ministerial input.

The collaboration led by CPD for the provision of Interpreting, Translation and Transcription requirements for the NI public sector covers a range of services including face to face interpretation, written translation and telephone interpretation.

The Trust’s Head of Equality was approached to participate in this collaborative venture, as one of the biggest users of interpreting provision - bringing a breath of experience to this area.

1.20 - Syrian Vulnerable Persons’ Relocation Scheme

The Syrian Vulnerable Persons Relocation (VPR) scheme was established in January 2014 to offer resettlement to some of the most vulnerable Syrian refugees. The First Minister and deputy First Minister indicated that NI should make a significant contribution towards the Prime Minister’s commitment and be an exemplar region in the quality of its response. The Executive Office established a
Strategic Planning Group and an Operational Planning Group led by DSD.

The Trust was requested to plan support for the third tranche of Syrian refugees who were due to be resettled in the Craigavon area in July 2016. Criterion for resettlement under the VPR scheme was established including the particular recognition of the needs of children. Refugees accepted under the scheme are granted five years Humanitarian Protection status and have access to public funds and the labour market.

Local Implementation

The Southern Trust Planning Group was established to manage the arrival of the Syrian refugees and their integration into society over a four year period. The objectives of the Trust Planning Group are:

- To ensure the Syrian refugees are treated with respect and dignity;
- To ensure that within two weeks of arrival in Northern Ireland essential health and social care services are provided to newly arrived Syrian refugees in an efficient, effective and sensitive manner;
- To ensure that Syrian refugees are assisted to settle into their new lives in Northern Ireland and successfully integrate into Northern Ireland society.

The Trust has received initial Migration Health Assessment information from the United Nations Refugee Agency. The information indicated a range of health and social care needs including:

- Adults with long term conditions e.g. diabetes, epilepsy, coronary heart disease.
- Adults with physical and learning disabilities.
- Post-Traumatic Stress Disorder – adults and children.
- Small cohort of children with moderate health needs.
- All children will require universal child health promotion programme contacts.
- Potential midwifery service involvement if any of the women are pregnant when they arrive.
- Potential of acute surgical needs.

The Southern Trust Syrian Refugees Planning Group, chaired by Paul Morgan continued to meet during the year under review. This group comprises of key staff from the various service directorates within the Trust.

The Trust continues to promote access to its services which has helped to ensure a smooth transition of new arrivals to the area during the welcome period. Currently 130 individuals (69 adults and 61 children) have been resettled in the Southern Trust Group with 8 due to arrive 20/4/17.

1.21 - Local BME Community Activity

The Trust’s Equality Manager attended a local BME health workshop in Armagh on 7th March 2017 and provided information on the NI Health & Social Care Interpreting Service together with local Trust services available to support local BME families.
1.22 - Launch of Craigavon Intercultural Partnership Connect Family Support Service

The Trust’s Equality Manager attended and provided input to this programme which marked the launch of Craigavon Intercultural Partnership Connect Family support services - INSPIRE and Community navigator programmes. The Inspire programme has been developed from needs identified by BME mothers and is a maternal support programme designed to help mothers with children under five years of age from Black and Minority Ethnic (BME) communities. The programme includes one to one support; group activities; advice sessions and the introduction to appropriate support services that will improve their social integration and develop personal resilience to cope with the challenges of maternal wellbeing.

The Community navigator programme involves a team of Bilingual Community Navigators to assist families with children under five years of age within the following language groups: Lithuanian, Polish, Portuguese & Romanian. The community navigators are a way of linking people up to activities and services in the community that they could benefit from and connecting people to non-medical sources of social and emotional support.
2 Please provide examples of outcomes and/or the impact of equality action plans/ measures in 2016-17 (or append the plan with progress/examples identified).

A copy of the Trust’s S75 Action Plan was included with last year’s S75 annual progress report 2015/16 which was submitted to the Equality Commission for NI by the deadline of 31st August 2016. The plan included notes of attainment and examples of progress over the lifespan of the Trust's previous Action Plan 1st May 2014 – 1st May 2017. All 40 actions were completed except for 6 which will roll forward into the Trust’s new draft S75 Action Plan covering the period 2017-2022.


The content of the Trust’s new S75 Action Plan and Disability Action Plan 2017-2022 have been informed by an ‘Audit of Inequalities’ which was refreshed and updated in order to identify key inequalities for service users and those affected by Trust policies.

A regional engagement event was also held on 19th January 2017 - a copy of this report can be found by following the link on page 3. The outcome from this regional engagement event greatly assisted in informing and shaping these draft local plans.

At the time of completing this year’s S75 annual progress report these draft plans were subject to a period of formal consultation to maximise opportunities for consultees participation. A Consultation Outcome Report will also be made available showing how the view of consultees have been taken into account in finalising these plans. Both plans will be tabled for Trust Board approval and will be uploaded to the Trust’s website. Progress in implementing these local plans will be reported on each year via the Trust’s S75 annual progress report which will be made available on the Trust’s website.

3 Has the application of the Equality Scheme commitments resulted in any changes to policy, practice, procedures and/or service delivery areas during the 2016-17 reporting period? (tick one box only)

☑ Yes □ No (go to Q.4) □ Not applicable (go to Q.4)

Please provide any details and examples:

The application of the Trust’s Equality Scheme, equality screening, equality impact assessment and consultation have ensured that an equality lens has been brought to policy development and/or service development, implementation and review processes across the Trust.

The application of the Equality Scheme commitments has resulted in changes to policy, practice and procedures and service delivery – see summary below.
3.1 - Mainstreaming S75 Equality Duties into the Trust’s Strategy

3.1.1 - SHSCT Corporate Plan 2017/18-2020/21

The Trust’s revised Strategic Plan builds on its previous 3 year Strategy Plan ‘Improving Through Change’ 2015-2018. This plan is strategically aligned to the Bengoa Review and the Minister’s vision as set out in the new Health and Wellbeing Strategy 2026 which sets a strong vision to ensure sustainability of services, supporting and empowering staff, improving the quality and experience of care and improving the health of the Trust’s population.

The Trust’s 4 year Corporate Plan sits alongside the Trust’s Delivery Plan and Management Plans and describes what the Trust plans to do in detail on an annual basis. These plans aim to ensure that there is clarity and transparency regarding the priorities the Trust sets for achievement. They also ensure that local communities know what to expect from the Trust and that staff are aware of their role in delivering on these priorities.

The Corporate Plan was subjected to equality screening. The Corporate Plan also incorporates a commitment to utilise equality screening, at each key stage of implementation, to ensure an equality, disability and human rights lens is applied at each key stage of implementation - given its strategic nature.

Public consultation was undertaken on the Trust’s previous strategic plan ‘Improving through Change’ 2015-2018. Many of the proposals in this the Trust’s latest Corporate Plan are not new, rather this latest plan brings together a number of on-going service changes and proposals and builds on the requirement of the new Health and Wellbeing Strategy 2026.

Service change proposals emanating from this latest Corporate Plan will be subject to a separate public consultation, equality screening and where necessary and appropriate full Equality Impact Assessment prior to a decision on whether the proposal should be implemented. The views of consultees will be taken into account in making any final decisions.

3.2 - Mainstreaming S75 Equality Duties into Key Service Developments:

Similarly the application of the Trust’s Equality Scheme has informed key services developments notable examples include:

3.2.1 - New Paediatric Centre – New Build Craigavon Area Hospital site

The CAH Paediatric Centre is a single storey new build which will have a total of 19 beds which includes beds for Adolescents, a 5 bed Ambulatory Unit and an Outpatient Department. There will be a mix of single ensuite rooms and cot bays. The new build will have internal links to the main hospital building.

The DHH Paediatric Centre located on the 6th floor will have a total of 19 beds (10 medical and 9 elective surgical), a 4 bed Ambulatory Unit and a dedicated paediatric theatre and support accommodation which would provide a child friendly environment from ‘entry to exit’. Key features include:

- Improved patient facilities in providing a mix of single ensuite rooms and cot bays enhancing privacy and dignity
- Improved staff facilities
- Improved visitor facilities
- Dedicated child only/child friendly accommodation
- Adolescent services will be provided within the Paediatric facilities
- Improved clinical flows and adjacencies will be maintained

Both units will be fully DDA compliant so these will both be accessible for everyone. A signage package is included within the contract and will be to the required DDA standards.

The Craigavon unit will include a Changing Places facility in the main reception area of the new build. Many people need to be able to access a Changing Places facility, which has more space and the right equipment, including a height adjustable changing bench and a hoist. This facility will be registered with Changing Places and details listed on their website.

Also within outpatients a mother and baby changing/feeding facility has been included.

Both units will include accessible toilets and will also have assisted ensuites/bathrooms. Sleeping facilities for parents who wish to stay with their child have been provided bedside and are foldaway beds. Each unit also includes a facility for parent’s breakout facility with catering equipment.

3.2.2 - Redevelopment of Craigavon Area Hospital (CAH)

The redevelopment of CAH is being brought forward to enable the Southern Trust to continue to deliver safe, quality services to the high standard required and to enable the Trust to meet growing and changing demand at CAH.

There are two key drivers for this project – the condition of the existing hospital estate and the growing population and associated hospital activity.

Craigavon Area Hospital was constructed in the late 1960s/early 1970s and remains largely unchanged since its construction. Much of the estate investment since the hospital was opened has been to support preventative maintenance and critical estates issues with limited funding going to the development of clinical services. This is in stark contrast to other hospitals in Northern Ireland built around the same time which have since attracted substantial investment for the replacement of aging hospital estate.

This situation has resulted in deficiencies in the hospital estate in terms of the physical condition of the buildings, their functional suitability, compliance with statutory standards and the available space for clinical services.

The hospital urgently needs additional clinical accommodation to cope with the demand for our services (including beds, theatres and Emergency Department facilities) and the accommodation pressures will increase as time progresses. The population of the Southern area is projected to grow at a higher rate within all age groups than the rest of Northern Ireland. An overall 21.3% increase is projected in the total population of the Southern area between 2015 and 2037.
compared to an 8.3% increase for Northern Ireland as a whole. In terms of the over 65 age group who tend to be the highest users of our hospital services, the growth rate will be much higher – 79.8%. Whilst the HSC sector is committed to expanding community services and only bringing people to hospital when this is appropriate for them, the growing and aging population will nevertheless lead to more demand for hospital services in the future.

The ultimate aim of the Trust’s Outline Business Case is to provide modern, fit for purpose hospital facilities which meet the demand for services, support the delivery of new models of care and facilitate safe, high quality patient care. The objectives of the project are as follows - the provision of hospital accommodation which:

- Is in compliance with legislation and current building standards;
- Is of high quality in terms of functional suitability of facilities, privacy and maintenance of dignity for patients;
- Optimises critical functional adjacencies;
- Enables the Trust to align with regional and Trust strategic priorities and the objectives of the Health & Social Care Board and Southern Local Commissioning Group in terms of compliance with Ministerial targets and best practice guidelines;
- Aligns with the current and projected demand for services (to 2029/30), and provides sufficient flexibility for future growth;
- Satisfies the needs of patients, carers and staff.

In keeping with the commitments in its Equality Scheme the Trust has subjected this redevelopment proposal to an equality screening the outcome of which was positive for both service users and staff working at CAH in that the newly refurbished CAH will provide a more modern and fit for purpose environment that will meet the future demands of the SHSCT population and staff.

3.3 - Mainstreaming S75 Equality Duties within Procurement Process

Examples where S75 equality duties were mainstreamed into key procurement exercises are as follows:

3.3.1 - Zest and Horticulture Units

An equality screening was undertaken in regard to the Trust’s proposal re the future of both its Zest and Horticulture Units. At this time of compiling this year’s annual progress report, the Trust was at the pre procurement stage i.e. exploring the possibility of leasing both Zest and the Horticulture Unit to an external provider thereby maximising training and development opportunities for clients. This proposal will be taken forward through a normal procurement process adhering to procurement policy/regulations. The initial policy proposal has been subjected to an equality screening to assess its impact for existing and future clients and staff directly affected. The procurement process will also ensure that Section 75 equality duties, the disability duties and human rights considerations inform the development of specification and are an integral part of the process in going forward. Consideration will be given to the inclusion of any social clauses as appropriate in the procurement process.
Aims and outcomes:

- Greater client throughput and increased opportunities for all clients taking up this form of training and development.
- Clients will be trained and developed to their full potential increasing their level of independence and enabling them to take up placements in the community. This will free up spaces for other clients who have entered adult disability services, providing a more equitable service to clients in the Southern Trust area.
- It will promote independence – clients will become more independent through having individual progression pathways suited to their needs which will lead to opportunities to acquire vocational and occupational skills.

In keeping with the commitments in the Trust's Equality Scheme a copy of the screening was made available in the Trust's quarterly screening outcome report. S75 equality duties, the disability duties and human rights considerations will be mainstreamed throughout the procurement stages of this proposal.

### 3.3.2 - Day opportunities – Brokerage Model

The Trust has been developing and extending the option for supporting people with disabilities to participate as active members within their communities for many years. These options are referred to as “Day Opportunities”. This direction of travel is in line with key national and local strategies laid out in Transforming Your Care – A Review of HSC in NI, the Bamford Review and also the Physical & Sensory Disability Strategy for NI. The Trust is committed to delivering quality care focused on the needs of service users, developing new approaches and promoting best practices. All of these strategies focus on improving the lives of service users with disabilities.

### Range of Day Opportunities

The range of day opportunities which the Trust is seeking to develop will vary for service users from different programmes of care, however they will broadly fit into the following four categories: Social & Leisure; Employment (sustainable/temporary); training (education/job-base) and Volunteering/work placement. Some service users will move through the cycle of opportunities developing capability over time, some may avail of opportunities from all elements, whilst others will settle in an opportunity of choice or a combination of opportunities from the menu available.

Day Opportunities will:

- Facilitate remote working (working from home or other suitable proximate location)/access for service users who wish to avail of opportunities in this way.
- Take into account cultural sensitivities and ensure services are appropriate to the diverse needs of service users.
- Be available across all areas of the Trust – equity of access.
- Reflect the difference in service user need and preferences taking cognisance of the programme of care e.g. learning disability, physical disability, etc.
In keeping with the commitments in the Trust’s Equality Scheme, S75 equality duties in the form of equality screening have been applied and mainstreamed in respect to this proposal and will be reflected throughout the procurement process.

3.4 - Mainstreaming S75 Equality Duties within Policy Development

The S75 equality duties apply to external as well as internal policies. The Trust continues to apply the tools of equality screening and EQIA where necessary and appropriate to internal policy development. There follows some notable policy examples during the year under review:

- Request to mount a permanent commemorative plaque at Lurgan Hospital
- Regional Grievance Policy
- Time off Policy
- Performance and Personal Review Policy
- Principles and Procedure for Internal Recruitment
- Anti-Fraud and Bribery Policies

Please refer to the Trust’s Screening Reports for details of policies screened during the current reporting period. These can be found on the Trust’s website under About the Trust / Publications / Policy Screening Outcome Reports. The Trust has in place the following accountability measures to ensure the effective and timely discharge of the Trust S75 equality duties:

<table>
<thead>
<tr>
<th>Equality Scheme Commitment</th>
<th>Action</th>
<th>Difference made for individuals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have in place appropriate structures and reporting mechanisms</td>
<td>The Trust has effective internal arrangements in place for ensuring effective compliance with the S75 statutory duties and for monitoring and reviewing progress. The Trust’s Equality Unit is responsible for the operational discharge of the S75 equality duties. The Head of the Unit reports directly to the Director of HROD and provides expertise and advice in the discharge of the Trust’s S75 equality duties etc. Two new appointments were made to the Equality Unit in 2016/17. The accountability structure is described in Chapter 1 of the Trust’s Equality Scheme. The Trust’s Chair and Chief Executive are fully committed to effectively fulfilling the S75 duties.</td>
<td>Decision makers are aware of S75 equality duties and the requirement to take into account the needs of S75 individuals in making any final decisions via the tools of equality screening, equality impact assessment processes, engagement and consultation - PPI. Evidence of progress is monitored via S75 annual progress reports to the Equality Commission for NI.</td>
</tr>
<tr>
<td>Action Plan</td>
<td></td>
<td></td>
</tr>
<tr>
<td>---------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------</td>
<td>------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>Ensure S75 Equality Duties are mainstreamed within the Trust</strong></td>
<td>S75 Guidelines have been produced for Trust Board to ensure effective mainstreaming of the S75 equality duties.</td>
<td>Trust Board, Senior Management Team, policy authors, Trust senior managers are aware of the S75 equality duties and commitments in the Trust’s Equality Scheme. Training provided for Trust Board and SMT.</td>
</tr>
<tr>
<td>S75 Guidelines have been produced for Trust Board to ensure effective mainstreaming of the S75 equality duties.</td>
<td>Quarterly equality screening outcome reports – published in the interest of openness and transparency – are available on the Trust’s website – evidence of screening policies and service developments.</td>
<td>Trust staff aware of equality duties – ‘S75 Equality Duties – What It means to Me’.</td>
</tr>
<tr>
<td>EQIAs are signed off by the Trust Board and SMT before and after public consultation. Consultation outcome reports are produced showing how the views of individuals have been taken into account in making any final recommendations.</td>
<td></td>
<td>Effective and tangible evidence of mainstreaming of the S75 equality duties with the production of equality screenings and EQIAs and quarterly screening outcome reports.</td>
</tr>
<tr>
<td><strong>Prepare Section 75 Annual Progress Report (APR) and include section in Trust’s own Annual Report.</strong></td>
<td>Trust’s Head of Equality prepares S75 annual progress report for formal approval by SMT and Trust Board – demonstrating progress in implementing the duties.</td>
<td>More outcome focused report available to public and S75 groups.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>User friendly guidance/advice to give effect to S75 equality duties and further embed these duties.</td>
</tr>
</tbody>
</table>
**corporate and business planning cycle.**

<table>
<thead>
<tr>
<th>On its <strong>draft</strong> 5 year S75 Equality Action and Disability Action Plans. Progress in implementing both these plans will be reported on via the Trust’s S75 annual progress reporting arrangements.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Inequalities’, pre-engagement and formal consultation with a wide range of stakeholders. Its implementation will have a positive impact on all S75 groups.</strong></td>
</tr>
</tbody>
</table>

**Arrangements for consulting**

<table>
<thead>
<tr>
<th><strong>Consultation list reviewed and updated</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Consultations carried out throughout the reporting period included:</td>
</tr>
<tr>
<td>(i) Pre-engagement and formal consultation with the LGBT sector on the new draft Gender Identity and Expression Policy. Head of Equality Unit attended a series of focus group discussions to help shape and inform this draft policy.</td>
</tr>
<tr>
<td>(ii) S75 Engagement Event 19th January to inform the draft S75 Equality Action Plan and Disability Action Plan. Formal consultation to inform the content of both plans.</td>
</tr>
<tr>
<td>Master consultation list was updated with new consultees added to list for future consultation. As was the BME data base for local black and minority ethnic groups.</td>
</tr>
<tr>
<td>Alignment of PPI and S75 duties in the revised HSC Consultation Scheme – complimenting and enhancing user involvement.</td>
</tr>
<tr>
<td>Production of consultation outcome reports – showing how the views of consultees were taken into account.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Training re. Consultation</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust Board and Executive Team informed of ECNI guidance on S75 of the Northern Ireland Act 1998 and additional advice on setting budgets.</td>
</tr>
<tr>
<td>Key decision makers aware of ECNI guidance which stresses the importance of adherence to S75 equality duties to ensure that, at the planning stage, policy formulation and decision making processes do not have a disproportionate and unintended impact on particular S75 categories.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>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</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>On-going engagement through Trust User Groups makes sure representative groups and individuals views are taken into account in decision making processes.</td>
</tr>
<tr>
<td>Equality screenings and EQIA assessments are taken into account in making any final decisions.</td>
</tr>
<tr>
<td>Views of represented groups and individuals considered during decision making processes.</td>
</tr>
<tr>
<td>Increased participation of S75 individuals and groups in decision making and policy development.</td>
</tr>
<tr>
<td>Staff, service users, representative groups and individuals informed and shape these new arrangements.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Provide feedback report to consultees in timely manner in formats suitable to consultees</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Acknowledgement of those who provided feedback to the public consultations carried out during the reporting period.</td>
</tr>
<tr>
<td>Representative groups and individuals informed of how their feedback influenced the decision(s) made/alternative policy outcomes.</td>
</tr>
<tr>
<td><strong>Screening</strong></td>
</tr>
<tr>
<td>-----------------------------------------------</td>
</tr>
<tr>
<td><strong>Revise screening template and accompanying guidance notes.</strong></td>
</tr>
<tr>
<td>Themed consultation outcome reports produced providing evidence of how feedback influenced the decision made.</td>
</tr>
<tr>
<td>Consultation feedback reports made available on the Trust's website.</td>
</tr>
<tr>
<td>All Trust documents made available in an alternative format on request.</td>
</tr>
<tr>
<td>Open and transparent decision making.</td>
</tr>
<tr>
<td>Provision of accessible documentation to facilitate participation.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Publish reports quarterly and in accessible formats on request.</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>All quarterly reports for the reporting period were made available on the Trust's website.</td>
</tr>
<tr>
<td>Screening outcomes available to the public for consideration.</td>
</tr>
<tr>
<td>Open and transparent processes.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Publishing of EQIA reports.</strong></th>
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<tbody>
<tr>
<td>In keeping with the commitments in the Trust's Equality Scheme - the Trust will continue to publish the outcome from any EQIAs on its website. In making any final decisions the Trust will take into account any assessments conducted together with the views of consultees. Further, the Trust will continue to produce consultation outcome reports showing how feedback has been considered by Trust Board before making any relevant decisions.</td>
</tr>
<tr>
<td>Representative groups are informed of how their feedback has been part of the decision making process.</td>
</tr>
</tbody>
</table>
### Monitoring

#### Review of monitoring information

- The Trust continues to monitor by S75 categories for all HSC staff. This has been further enhanced by the Employee Self Service functionality on HRPTS. During the reporting period the Trust used this monitoring information to inform all S75 quality screenings and EQIAs.

- Ethnic Monitoring Guidance has now been formally launched by the HSCB under covering letter to CEs to ensure the extension of ethnic monitoring to existing and new IT systems.

- Ethnic monitoring is in place on a number of key information systems – Child Health System, PAS, SOSCARE, SureStart and NIMATS. The Ethnic Monitoring Group has recently reformed to promote the implementation of these regional guidelines.

- Increased understanding of the make-up of the workforce to ensure promotion of equality of opportunity and better information to identify any potential impact.

- The Ethnic Monitoring Project in HSC has been positively referenced by The Executive Office’s Race Equality Unit. Trust Head of Equality participated in this regional working group.

- Ethnic monitoring has been incorporated into Data Quality Training for HSC staff and system users – to increase awareness of the need to gather this information and how it is integral to decision making.

### Staff Training

#### Draw up a detailed training plan

- Discovering Diversity training continues to be rolled out in the Trust – see training question (24) of this report.

- Work on two new modules came to fruition during the year under review. A pilot was also undertaken of these new modules. Staff in the Equality Unit participated and fed into this pilot. It is planned to officially launch these new modules in the autumn of 2017 and to actively promote the uptake and completion of both modules across the Trust.

- A deployment plan has been drawn up to actively promote both these new modules and will be rolled out across the Trust over the next year and beyond.

#### Focused training

- During the reporting period the Trust provided focused training as follows:
  - Disability Equality and Visual Awareness Training co-delivered by

- Greater awareness of equality, disability, human rights and S75 duties.
<table>
<thead>
<tr>
<th>the disability sector.</th>
</tr>
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<tbody>
<tr>
<td>• ECNI Latest Guidance re savings plans/setting of budgets.</td>
</tr>
<tr>
<td>• Head of Equality provided on-going advice and attendance at meetings on S75 equality duties, screening and EQIA processes.</td>
</tr>
<tr>
<td>• LGBT Training – Rainbow.</td>
</tr>
<tr>
<td>• Human Rights training – Director of Legal Services etc.</td>
</tr>
<tr>
<td>• Working Well with Interpreters – engagement sessions.</td>
</tr>
<tr>
<td>• HSC Learning Disability Equality Training.</td>
</tr>
<tr>
<td>• Staff training - GAIN Guidelines.</td>
</tr>
</tbody>
</table>

NB: See training question (24) of this report for further details.

<table>
<thead>
<tr>
<th>Arrangements for ensuring and assessing public access to information and services we provide</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ensure information we disseminate and services we provide are fully accessible to all parts of the community in Northern Ireland</td>
</tr>
<tr>
<td>A review of existing regional interpreting and written translations contractual arrangements had commenced at the time of compiling this year’s report. This will be taken forward via a collaborative procurement venture with other Government departments – progress in this regard will be picked up and detailed in next year’s S75 APR.</td>
</tr>
<tr>
<td><strong>Provide information in alternative formats on request</strong></td>
</tr>
<tr>
<td><strong>Provide interpreters and sign language interpreters</strong></td>
</tr>
<tr>
<td><strong>Assessing access to information and services</strong></td>
</tr>
<tr>
<td><strong>Complaints Procedure</strong></td>
</tr>
</tbody>
</table>
Any other measures proposed in equality scheme

| Work closely with other public authorities to exchange learning and best practice | During the reporting period the Trust's Head of Equality participated in the Regional Equality and Human Rights Steering Group, Regional Equality Leads meeting, Regional Equality Employment Network, and participated on regional thematic work streams e.g. Ethnic Monitoring Project. Local BME initiatives/improvements workshop etc. Other examples include collaborate working in relation to regional engagement events and public consultations. | 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 | On-going. The Commission participated in a regional engagement event held on 19th January 2017 along with the HSC sector to mark the launch of the development of HSC’s new S75 Equality Action and Disability Action Plans. The Trust's Head of Equality was invited to comment on the ECNI’s revised Guidance on Equality Screening – drawing upon operational experience. | Effective relationships between the ECNI and the Trust in the discharge of the S75 equality and disability duties. |

NB: The above examples are intended to be illustrative and are by no means exhaustive.
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 75 category?

Please provide any details and examples: There follows some examples:

<table>
<thead>
<tr>
<th>Policy/Practice/Procedure and or Service Delivery Area</th>
<th>Target S75 Group(s):</th>
<th>What Difference was or will be made for individual (Impact on S75 category)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Area EQIA – fed into Integrated Transport Proposal</td>
<td>All S75 groups, but notably those with a physical and learning disability</td>
<td>Promotion of greater independence and self-sufficiency. Promotion of social inclusion and integration.</td>
</tr>
<tr>
<td>New Build Paediatric Unit CAH</td>
<td>All S75 groups</td>
<td>Improved modern ‘fit for purpose’ facilities for staff, patients and visitors. Dedicated child only/child friendly accommodation and the provision of a mix of single ensuite rooms and cot bays - enhances privacy and dignity. Adolescent services provided within the paediatric facilities results in improved clinical flows. The accessibility of the modern unit and the associated signage schedule will improve the facilities for everyone.</td>
</tr>
<tr>
<td>Redevelopment of CAH</td>
<td>All S75 groups</td>
<td>More modern ‘fit for purpose’ facilities for both staff and service users.</td>
</tr>
</tbody>
</table>
| Procurement Day Opportunities Brokerage Model | Disability | Day Opportunities will:  
  - Facilitate remote working (working from home or other suitable proximate location) /access for service users who wish to avail of opportunities in this way.  
  - Take into account cultural sensitivities and ensures services are appropriate to the diverse needs of service users.  
  - Be available across all areas of the Trust – equity of access. |
<table>
<thead>
<tr>
<th>Part A</th>
<th></th>
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<tbody>
<tr>
<td><strong>Reflect the difference in service user needs and preferences.</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Procurement</strong>&lt;br&gt;Zest and Horticulture Unit</td>
<td>Disability</td>
</tr>
<tr>
<td><strong>Policy</strong>&lt;br&gt;Gender Identity and Expression Policy</td>
<td>Gender</td>
</tr>
<tr>
<td><strong>Policy</strong>&lt;br&gt;Regional Grievance</td>
<td>All S75 groups</td>
</tr>
<tr>
<td><strong>Policy</strong>&lt;br&gt;Time Off/Other Leave Policy</td>
<td>All S75 groups</td>
</tr>
<tr>
<td><strong>Procedural Guidelines</strong>&lt;br&gt;Further roll out of Ethnic Monitoring Project and launch of Regional Ethnic Monitoring Guidelines – March 2016 to facilitate ethnic monitoring on existing and new IT systems</td>
<td>Race</td>
</tr>
<tr>
<td><strong>Policy/Practice</strong>&lt;br&gt;Continued support for LGB&amp;T</td>
<td>Sexual Orientation</td>
</tr>
<tr>
<td><strong>Deployment of new web based IT portal and provision of language assistance for those who do not speak English as a first language</strong></td>
<td>Race</td>
</tr>
<tr>
<td>Physical and Sensory Disability Strategy</td>
<td>Disability</td>
</tr>
<tr>
<td>----------------------------------------</td>
<td>------------</td>
</tr>
<tr>
<td>Vulnerable Persons Relocation Scheme</td>
<td>Race – Syrian Refugees</td>
</tr>
<tr>
<td>Gender Equality Research</td>
<td>Gender</td>
</tr>
</tbody>
</table>

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 (please give details):
  
  See examples provided in 3a above. See also the Trust’s screening outcomes reports for the year ending 31st March 2017 – available on the Trust’s website under About the Trust / Publications / Policy Screening Outcome Reports.

- As a result of what was identified through the EQIA and consultation exercise *(please give details)*:
  
  There were no EQIAs completed during the current reporting period.
As a result of analysis from monitoring the impact *(please give details):*

The Trust's Smoke Free Policy was updated in March 2017 to reflect a year’s operational experience. Additional mitigating measures were put in place as a result of monitoring to further aid the successful implementation of this policy across all sites and facilities e.g. appointment of 2 temporary hospital sites wardens for DHH and CAH to support compliance with smoke free sites and monitoring of action needed to support further compliance; the appointment of a Stop Smoking Specialist nurse within mental health and disability to support patients and clients to stop smoking.

As a result of changes to access to information and services *(please specify and give details):*

**Paediatric Unit (new build) -** improved patient facilities in providing a mix of single ensuite rooms and cot bays enhancing privacy and dignity:

- Improved staff facilities
- Improved visitor facilities
- Dedicated child only/child friendly accommodation
- Adolescent services will be provided within the Paediatric facilities
- Improved clinical flows and adjacencies will be maintained.

A signage package is included within the contract and will be to the required DDA standards.

**Provision of Self Help booklets -** in a range of BME languages.

**Production of ‘easy read’** versions in an increasing range of booklets e.g. breast screening; menopause, prostate cancer; 5 ways to wellbeing.

**Other *(please specify and give details):***

Update of Themed Inequalities Audit.
Section 2: Progress on Equality Scheme commitments 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:

Compliance with the S75 equality duties are stipulated in job descriptions under ‘Staff and Managerial Responsibilities’.

Compliance with the S75 equality duties is also included in specific guidelines for Trust Board members and the Trust's Senior Management Team.

Arrangements and responsibility for ensuring the effective and timely discharge of the Trust’s S75 equality duties are set out in Chapter 1 of the Trust’s Equality Scheme - which elaborates on how the Trust proposes to fulfil its S75 equality duties in relation to its specific functions. The accountability structure is also clearly outlined in the Equality Scheme.

Equality objectives are specifically included in the job descriptions of the Trust’s Director of Human Resources and Organisational Development and the Trust’s Equality Manager.

They are also included as part of the knowledge and skills framework and monitored via staff appraisals.

5 Were the Section 75 statutory duties integrated within performance plans during the 2016-17 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:
S75 equality duties are explicit in:

- The national Knowledge and Skills Framework (KSF) is the process linked to annual development of reviews for Trust staff and informs personal development plans. Equality and Diversity is one of the 6 core dimensions and is reflected as a key element on all job descriptions.
- Equality and Diversity is also a key element of revalidation – long life learning aimed at maintaining high quality, safe services.
- Trust's 3 year Strategic Plan – was equality screened and a further commitment was given to continue to apply the tools of equality screening and where necessary and appropriate to conduct equality impact assessments in relation work streams that emanate from this 3 year plan. In keeping with the Equality Commission’s Guidelines the Trust will continue to use the tool of equality screening at each key stage of implementation – given its strategic nature.
- S75 equality duties are routinely included in the Trust's own Annual Report.
- Progress in implementing the S75 duties is also reported in the Trust's S75 Annual Progress Report and regularly to the Trust Senior Management Team and Trust Board.
- Equality screenings and EQIAs for key service developments are discussed at the Senior Management Team and signed off at Trust Board. All equality screenings progress with policy documents to the Policy Scrutiny Committee in the interest of compliance.
- The Trust's Head of Equality provides ongoing training, hosts workshops for policy leads/decision makers and provides ongoing advice and expertise in the area of S75, the disability duties and human rights obligations. The Equality Manager acts as a business partner - participating in discussions at an early stage of policy development and decision making processes. Please refer to the training question (24) of this report for further details.
- The Trust also participates in regular audits of compliance. Feedback is provided through an accountability review.

6 In the 2016-17 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 2016-17 report
- Not applicable
Please provide any details and examples:

See response to question 5 above.

Section 75 equality duties are incorporated and mainstreamed at a strategic level into the business of the Trust. The Head of Equality reports directly to the Director of Human Resources and Organisational Development (Director designate for Equality) who in turn is a member of the Trust’s SMT and Trust Board.

**Objectives/targets/performance measures** relating to the S75 statutory duties were **integrated** into corporate plans, strategic planning and/or operational business plans as follows:

- The Trust's 3 year Strategic/Corporate Plan
- The Trust's Delivery Plan
- The Trust's own Annual Report etc
- The Trust's People Management Framework 2014-2017
- The Trust's Management of Change Framework is embeded in the principles of fairness and equity
- Trust's S75 Annual Progress Report which is presented to the SMT and Trust Board
- Equality Screenings and EQIAs on key service developments are discussed and signed off at SMT and Trust Board ahead of public consultation
- Equality Screenings go to the Policy Scrutiny Committee along with the policy document
- Equality and Human Rights are a standard section for consideration for all reports progressing to SMT/Trust Board.

**Equality action plans/measures**

7 **Within the 2016-17 reporting period, please indicate the number of:**

| Actions completed: | 40 | Actions ongoing: | 6 | Actions to commence: |

Please provide any details and examples (**in addition to question 2**):

Notes of attainment were submitted with last year’s APR 2015/16.

8 **Please give details of changes or amendments made to the equality action plan/measures during the 2016-17 reporting period (**points not identified in an appended plan**):**

A review of the Trust’s current Equality Scheme was undertaken during the current reporting period. Changes in the main related to adjustments in staffing compliment, structures and to reflect the growth in population profile of the SHSCT. There were no material changes to the format or content of the Scheme, or detraction from the commitments given by the Trust to ensure the effective and timely implementation of the Scheme.

At the time of completing this year’s annual progress report preparations were underway to consult on the Trust’s new S75 Equality Action Plan and Disability
Action Plan covering the period 2017-2022. The draft plans were tabled at the June Trust Board and are currently subject to public consultation. The final plans will be tabled before Trust Board for final endorsement having taken into account the views of consultees. Progress in implementing these new plans will be reported on in the Trust’s S75 annual progress report which is submitted to the Equality Commission for NI in August each year. This report will be made available on the Trust’s website.

9 In reviewing progress on the equality action plan/action measures during the 2016-17 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

NB: of the 46 action measures in the Trust’s Action Plan, 40 have been completed and it is proposed that 6 will be carried forward into the Trust’s new Action Plan covering the period 2017-2022.

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

11 Please provide any details and examples of good practice in consultation during the 2016-17 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:

11.1 - Regional Consultation event on Actions Plans (Disability and Equality) for 2017-2022

As reported above a pre-engagement event was held on 19th January 2017 with key stakeholders to inform HSC Trusts’ new 5 year Disability and Equality Action Plans – covering the period 2017-2022.
Regional Consultation event, 19th January 2017

Patrice Hardy from the Equality Commission for NI provided a very clear, concise and plain English overview of the law and the reason for public authorities being asked to develop equality action and disability action plans, reminding us all that inequalities still exist.

Patrice Hardy, Equality Commission for NI

Torie Tennant, a service user provided her own personal account of the changes and improvements in her experience in health and social care. She highlighted the importance of working together to deliver successful outcomes and gave examples of how her input had made the difference in terms of accessibility.
A variety of means were used to foster an environment where good and authentic conversations could develop including the use of Café style conversations. There were five different rounds and the discussions centred on: what has worked well; what areas needed to be improved; what actions could be addressed and who ought to be involved on the following topic areas:

- Simplifying our Section 75 processes;
- Promoting equality in our services;
- Supporting our staff;
- Disability duties;
- Promoting good relations.

Other methods of engagement utilised included use of:

- Graffiti wall;
- ‘Big brother’ style diary room;
- Postcards in post boxes.

The different engagement methods maximised opportunities for involvement and helped shape the action plans. The action plans will also be informed by broader research and a literature review into existing inequalities in health and social care.

As the plans will likely be issued prior to the publication of the Equality Commission’s key statement on inequalities in health and social care, the plans will be living documents and will be added to or amended over their lifespan, i.e. the next 5 years 2017-2022, as more information becomes available or priorities change.

For a copy of the Outcome Report please click on the following link: https://view.pagetiger.com/Outcome-Report

11.2 - Gender Identity and Expression Employment Policy

This policy is aimed at creating a workplace where the dignity of and respect for Trans people is protected and promoted and where Trans people feel comfortable to express their gender identity.

As an inclusive organisation, the Trust is committed to the health, wellbeing and dignity of all our staff, irrespective of their gender identity and expression.

The Trust, in partnership with regional HSC organisations and in consultation with a range of stakeholders developed a draft Gender Identity and Expression Employment Policy.

The purpose of the policy is to provide guidance and advice to staff and managers on the recruitment and retention of transgender and non-binary staff.

A joint consultation on the draft policy and associated equality screening documents was publicised on the website of each of the HSC organisations and BSO. The 12 week consultation period ran from 4th January to 29th March 2017. Trusts consulted with a wide range of participants on their consultation list - some 700+ consultees.
The consultation methods employed were:

- Invitation to submit written comments;
- Offer of individual face to face meetings/phone call;
- Roundtable for transgender and non-binary individuals;
- Roundtable for any other consultees;
- Roundtable with trade unions.

A themed consultation outcome report will be produced and shared with consultees showing how their views were taken into account in the final drafting of this policy.

11.3 - Learning from Patient Experience

During the year under review, the Southern Trust hosted a special celebration event to share and learn from some of the best practice across Allied Health Professional services. Allied Health Professionals (AHPs) is the name given to the group of health care staff, distinct from nurses and doctors, who offer a wide range of services and support to patients and clients. AHPs include Physiotherapists, Podiatrists, Speech and Language Therapists, Occupational Therapists (OT), Dieticians, Orthoptists, Radiographers, Orthotists, Prosthetists and Art, Drama and Music Therapists.

The event brought together AHPs from across all disciplines along with other health and social care staff to hear directly from service users, families and advocates about their experiences of AHP services. Topics included specialist stroke rehabilitation, speech and language therapy improvements for children, radiography led fertility clinics, positive patient outcomes following interventions from Orthoptics, Podiatry, Physiotherapy and OT.

Many of the stories, shared by patients and posters displayed at the event, demonstrating service improvements have won national, international and regional recognition.

Guest speakers also included Hazel Winning, Lead AHP Officer for the Department of Health and Dr Jacqui Lunday Johnstone, AHP Lead from the Scottish Government who shared the strategic visions and shared learning from a NI and Scottish perspectives.

Speaking at the event Angela McVeigh, Executive Director of Nursing and Allied Health Professionals for the Southern Health and Social Care Trust said: “Allied Health Professionals play such a vital role in ensuring safe, high quality care with a dedicated focus on supporting clients to self-manage their conditions to help them return to education, employment and other normal daily activities.
From diagnosis and assessment to delivering treatment right through to rehabilitation, they have a huge influence on the patient journey. We are continually looking for ways to help improve the services we provide, whilst at the same time keep up to date with the latest clinical developments and recommendations. Our Service Users and Trust staff have shown meaningful partnership commitment to improving the experience of patients and carers by participating today. We particularly would like to thank all our service users, their carers’ and advocates, who have been so willing to openly share their experiences on what works well and how we can improve in shaping future services that will meet the growing demands of our population.”

Carmel Harney, Assistant Director for AHP Governance, Workforce Development and Training added: “AHPs are key to transforming Health, Care and Wellbeing in Northern Ireland working in partnership with other sectors like education, housing, leisure, employment and learning and the criminal justice system. AHPs impact on the wider determinants of health and are pivotal to delivering the transformation agenda for health and social care.”

11.4 - Southern Trust celebrates Care Day NI

The Southern Trust had information stands displayed in Craigavon and Newry to celebrate Care Day NI, an event co-ordinated by VOYPIC (Voice of Young People in Care) on 15 February 2017. Care Day NI offers an opportunity for health organisations to raise the profile of children in care and care leavers, and allow young people to highlight their positive experiences.

Children and Young People’s Services across the Trust celebrated stories of success, promoting care and sharing experiences, through information stands which were hosted by young people from the 16 Plus Service. The stands were held in Craigavon Area Hospital and the Quays Shopping Centre, Newry.

The Southern Trust’s Director of Children’s and Young People’s Services, Paul Morgan, was delighted with the efforts to celebrate the national event.

“We are proud of all of our young people and delighted that so many of them have participated in promoting Care Day. We hope that when local people hear the positive experiences of our young people and the difference that a foster carer can make to their life that they may consider finding out more.”

11.5 - 10,000 Voices Initiative

The 10,000 Voices Initiative - patient experience - is recognised as a key element in the delivery of quality healthcare. In line with this, the Public Health Agency is carrying out an extensive piece of work across all Health and Social Care Trusts,
with the aim of introducing a more patient-focused approach to services and shaping future healthcare in Northern Ireland.

The information is gathered using surveys and can be completed by hard copy or via the internet at www.10000voices.info. Mairead Casey, SHSCT facilitator is raising the profile of ‘Hello my name is’ 2016/2017. The aim of the initiative is to build relationships between the patient/client and staff and helps keep patients/clients informed and engaged in decision-making about their care and treatment.

‘Hello my name is’ telephone stickers have been designed and agreed with the Trust’s Estates Department to fit the new Trust Internet phones. Other promotional material to support the campaign e.g. pens, post-it notes are being distributed to staff at team talks, corporate inductions, etc. ‘Hello my name is’ lanyards have been received and distributed throughout SHSCT to interface staff.

10,000 voices Cross Directorate working

The Trust’s 10,000 Voices facilitator attended various mandatory corporate training events (Acute) and (Community) to highlight this campaign.

The SHSCT is now registered as one of the supporting NHS Trusts and organisations on the ‘Hello my name is’ website. Staff road shows have been organised across the Trust to highlight the campaign along with SHSCT Facebook and Twitter coverage. A check-list has been developed to help staff to implement into new areas.
12 In the 2016-17 reporting period, given the consultation methods offered, which consultation methods were most frequently used by consultees: *(tick all that apply)*

- [x] Face to face meetings
- [x] Focus groups
- [x] Written documents with the opportunity to comment in writing
- [x] Questionnaires
- [x] 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 also continues to consult with established user groups such as Carer’s Forum, Children and Young Persons’ Forum, Cancer Service User Group, Maternity Services Liaison Group, Traveller Action Group, etc.

13 Were any awareness-raising activities for consultees undertaken, on the commitments in the Equality Scheme, during the 2016-17 reporting period? *(tick one box only)*

- [x] Yes
- [ ] No
- [ ] Not applicable

Please provide any details and examples:
• On-going training and awareness of S75 and PPI obligations e.g. Trust PPI Leads – see training question in this report for more information.
• Equality Scheme - What it means for staff booklet available for all SHSCT staff and as service users - raising awareness of S75 equality duties.
• Trust Board guidance and briefings/regular updates to both Trust Board and SMT.
• On-going support for established forums which represent the voice of the user e.g. Carers Forum, Trust's Traveller Action Group, Children and Young Peoples Forum, etc.
• S75 equality duties are discussed at established Forums.
• Publication of quarterly screening outcome reports showing the outcome of equality screenings. In the interest of openness and transparency these are posted on the Trust's website for members of the public to review.
• Public consultation and focus group discussions on key service changes/developments - completion of equality screenings and EQIAs - publication of same along with consultation document setting out S75 obligations and how these duties have been taken into account along with the direction and rationale for change.
• Use of standard screening clauses in policy and consultation documents as standard practice and public/outward facing documentation.
• Ongoing advice to policy leads on project boards which include service users.
• Trust Board Report incorporates an update on the implementation of the and members of the public.
• S75 Annual Progress Report is also utilised to raise awareness of S75 equality obligations and progress regarding same - this is available to all staff via the Trust intranet and website.

14  Was the consultation list reviewed during the 2016-17 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)
(See Trust website – About the Trust / Publications / Policy Screening Outcome Reports for details of quarterly screening outcome reports.)

15  Please provide the number of policies screened during the year (as recorded in screening reports):
   18
16 Please provide the number of assessments that were consulted upon during 2016-17:

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<table>
<thead>
<tr>
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<tbody>
<tr>
<td>1</td>
<td>Policy consultations conducted with screening assessment presented.</td>
</tr>
<tr>
<td>0</td>
<td>Policy consultations conducted with an equality impact assessment (EQIA) presented.</td>
</tr>
<tr>
<td>0</td>
<td>Consultations for an EQIA alone.</td>
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Note: the Trust fed into the following regional EQIAs notably: the Review of Ophthalmology; DoH price cap for Agency and Locum Staff.

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


RQIA developed a draft Corporate Strategy, 2017-21 and undertook an 8 week public consultation period from 25 January to 22 March 2017 to elicit responses on the RQIA’s priorities for the next four years. The Trust provided an informed response to this.

17.2 - Engagement Events HSC Workforce Strategy

To assist in the development of the HSC Workforce Strategy, three stakeholder engagement events were held in January 2017 to gauge the views of staff working in the HSC. Trust staff participated in the event led by the DoH and held at Craigavon Civic Centre on 27 January. Two other events were held on 10 January at Jordanstown and 12 January at Magee.

The feedback received from these events will be taken into account to inform the development of the strategy.

Further to the events in January, the DoH embarked on a series of focus groups/targeted events. DoH were keen to hear from all staff regardless of band or discipline, and in particular were keen to hear from primary, community based staff as well as new entrants to the system. The events ran to end March 2017.

The latest technology was used at these events to ensure effective and meaningful engagement. Participants were able to vote on a series of questions and had instant feedback on the day – with results displayed on screen.
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 [ ]

Please provide any details and examples:

The Trust considers all feedback received and shows how the views of consultees are taken into consideration in making any final decisions.

**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:

No EQIAs were conducted during the reporting period.

**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 2016-17 reporting period? *(tick one box only)*

- Yes [ ]
- No, already taken place [ ]
- No, scheduled to take place at a later date [ ]
- Not applicable [ ]

Please provide any details:

Ethnic monitoring has been extended to the following systems:

- Child Health Information System - CHIS
- SOSCARE - Social Care information system
- Sure Start
- NIMATS
- Patient Admin System (PAS) - Hospital based
- Ethnic monitoring is also included on the new HRPTS staff information system
- The Themed Inequalities Audit has been updated during the current reporting period and has informed the Trust’s new S75 Action Plan and Disability Action Plan aimed at tackling inequalities in HSC.
In addition:

- NINES – NI New Entrants Scheme will monitor the uptake of its service users by ethnicity. This service targets new arrivals to NI not registered with a GP.
- Continue roll out of PARIS – see below:

20.1 - Roll out of PARIS – Ethnic Monitoring

The PARIS Community Information System which, by providing a fuller profile of each patient in a way that can be shared between community and hospital services, is helping to improve safety and avoid patients having to repeat the same information to different teams.

The Trust celebrated its one millionth record using the PARIS electronic system during the reporting period. PARIS is used by staff working in the community, such as District Nurses, Social Workers and other professions like Specialist Nurses or Mental Health Practitioners.

First introduced to the Trust in April 2013, PARIS has helped to improve the recording and sharing of patient information. As a health and social care provider, staff, have thousands of contacts every day and the accurate recording and sharing of this information is essential in ensuring that patients and clients receive the best possible care. Before the Trust introduced this electronic record, staff spent a lot of their time ringing colleagues involved in their patient caseloads, to ensure that they were fully informed of care and treatment plans.

PARIS was introduced to offer a much fuller profile of each patient in a way that can be confidentially shared between our services and assist staff in making more informed care decisions. PARIS also helps bridge the gap of knowledge between community based services and hospital teams. When patients need hospital care, it is now possible to share critical information with acute teams such as the Emergency Department to help inform the patient’s long term condition and treatment.

PARIS includes referral details, multidisciplinary and specialist assessments, professional case notes, care plans along with appointment details, waiting lists and any other correspondence. It is currently being used across a number of community services including Older People and Primary Care, Children and Young People’s Services, Mental Health and Disability and Acute Respiratory and Social Work.

To date in the Southern Trust there are:
- 1,869 registered users of PARIS
- 47,536 registered clients on PARIS
- 158,816 referrals recorded
- 182,297 assessments recorded
- 1,000,000 case notes recorded.

Mark Toal, who has been the Project Leader since the start of implementation says: “We are delighted with the uptake of PARIS and our clinical staff are really embracing its benefits. For example, many respiratory patients with chronic lung or chest disease are reviewed at hospital clinics, cared for by community nurses and sometimes also require hospital admission. Having one patient centred electronic record rather than various ‘site’ based records gives staff a much more
comprehensive profile of each person and a better quality of information, enabling them to make more informed decisions about their care.”

Paul Morgan, Director of Social Services and the Project Champion says: “The implementation of PARIS is on-going and will continue until 2019. It has been challenging for our busy staff to learn how to use this new electronic record and also for our informatics team in ensuring that technology works any place and any time. However, the benefits to continuity of patient and client care are tremendous and this is a great example of partnership working between front line staff, the informatics team and our software and hardware suppliers, Civica and HPE, in delivering reformed health and social care.”

The millionth record was created by Lisa Allen, a District Nurse with the Integrated Care Team for Older People. Lisa says: “After overcoming the initial learning curve of introducing a new system and with the commitment of staff to adjust to a new way of working, PARIS is now an integral part of our service. It gives us easier access to information, allowing us to share important information with other professionals and supports us in delivering the most safe and effective care for our patients.”

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

☐ Yes  ☐ No  ☐ Not applicable

Please provide examples:

- Traveller Action Group – monitoring information used to inform Traveller Action Plan 2015/16 – aimed at tackling health and social care inequalities. Regular reports are provided to the Trust Board and PHA.
- Updated Themed Inequalities Audit – was used to inform the action measures contained in the Trust’s new Equality Scheme Action Plan and Disability Action Plan 2017-2022.
- As a result of monitoring there have been changes effected to the regional interpreting service. The deployment of a new IT web based portal will ensure the most effective use and matching of interpreters for those in need of language assistance.
- As a result of monitoring the uptake of services a specific action plan has been drawn up to address health inequalities for some of the most marginalised groups e.g. Traveller Action Group.
- NINES – monitoring will enable staff to target their resources effectively. The new service was formally launched on 1st June 2016 by the Chair of the Trust.
- Electronic Health and Care Record (EHCR) - the NI Electronic Care Record (NIECR) has transformed the informed delivery of healthcare throughout HSC. It has achieved this by storing, retrieving and combining millions of messages daily from multiple, disparate clinical information systems to create the single best view of a patient/client’s contacts, treatments and outcomes in HSC. However, NIECR still relies on the existence of these multiple systems to create the patient/client record, many of which require
replacing.

The HSCNI vision is for a **digital record-in-common** for every citizen in virtual Northern Ireland that facilitates their health and wellbeing throughout their life, built on a digital platform that streamlines services and patient/client journeys and links information across primary, secondary, community and social care. This would:

- improve the patient/client’s experience of care;
- improve the health of the population;
- achieve better value by reducing the per capita cost of health care;
- improve the work life of those who deliver care;
- enable communication between HSCNI staff and citizens with potential features such as messaging and videoconferencing, supporting new ways of working including clinics and remote consultations.

22 Please provide any details or examples of where the monitoring of policies, during the 2016-17 reporting period, has shown changes to differential/adverse impacts previously assessed:

The HSCB Guide to the Ethnic Monitoring of Service Users in Health and Social Care in Northern Ireland has been in place since March 2016 for implementation where ethnic monitoring data is currently being collected or planned to be introduced on information systems.

The application of this new Guide is intended to help HSC commissioners/providers to robustly capture critical patient/service user information on existing and emerging BME communities using HSC services. Most importantly, it is intended to help HSC organisations to identify any unmet need and to target their resources accordingly in order to thus tackle health inequalities experienced by BME communities.

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:

Examples:

- The Ethnic Monitoring Project has helped to identify uptake of services and unmet need for BME communities e.g. the Trust's Local Traveller Action Group and associated action plan and Regional Thematic Group for Travellers – chaired by the Public Health Authority.

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 2016-17, and the extent to which they met the training objectives in the Equality Scheme.

In keeping with the commitments in its Equality Scheme i.e. Chapter 5 the Trust has put in place a range of training interventions which has met the training objectives of its Scheme.

The Trust is committed to providing learning and development support to all staff.
This is illustrated in the Trust values and a range of Human Resources strategies including:

- Knowledge and Skills Framework (KSF) Appraisals
- Learning and Development Strategy
- Succession Planning initiatives and
- Widening Participation initiatives etc.

The Trust provides a range of S75 and other equality training, which is available to all staff. Training is advertised to staff via a range of mediums including the Trust intranet, Southern-i, posters, flyers, via line managers, Trade Union and corporate staff magazines and training brochures. Training needs are identified through staff personal development plans etc.

The Trust has also invested heavily in an e-learning staff development system that enables staff to complete an increasing menu of training interventions in line with the Trust’s Knowledge and Skills Framework (KSF).

Training resources are also kept continually under review to reflect any amendments/developments in the legislative framework and evolving case law.

**24.1 - Trust Equality Scheme – Training Commitments**

The Trust has committed in its Equality Scheme to the following training objectives:

- To raise awareness of the provisions of Section 75 of the Northern Ireland Act 1998, our Equality Scheme commitments and the particular issues likely to affect people across the range of S75 categories, to ensure that our staff fully understand their role in implementing the Scheme.
- To provide those staff involved in the assessment of policies (screening and EQIA) with the necessary skills and knowledge to do this work effectively.
- To provide those staff who deal with complaints in relation to compliance with our Equality Scheme with the necessary skills and knowledge to investigate and monitor complaints effectively.
- To provide those staff involved in consultation processes with the necessary skills and knowledge to do this work effectively e.g. via Trust PPI Toolkit and related training.
- To provide those staff involved in the implementation and monitoring of the effective implementation of the Trust’s Equality Scheme with the necessary skills and knowledge to do this work effectively.

There follows a summary of the main training interventions for HSC staff in support of the commitments in the Trust's Equality Scheme outlined above:

**24.2 - Trust Board and Senior Management Team**

Specific guidelines for Trust Board members have been devised to highlight the importance of mainstreaming the S75 equality duties into the day to day business functions of the Trust, together with the implications of the S75 equality duties for policy development, corporate planning and decision making processes; the renewed emphasis on addressing inequalities and achieving outcomes for S75 categories etc. It further highlights the importance of leadership and top-level
commitment to ensure the effective mainstreaming of the duties. This resource will be updated to reflect the outcome of the Equality Commission’s own research into the out workings of the S75 equality duties and any subsequent advice on consultation time frames as a consequence of Clause 65 of the Fresh Start Agreement. The Trust’s Equality Scheme has been aligned with the Trust’s corporate planning cycle to further facilitate the mainstreaming of the S75 equality duties.

In addition, Trust Board members and Senior Management Team receive regular updates on the promotion of equality of opportunity and good relations duties along with a comprehensive overview on performance through the S75 annual progress report.

The Trust's SMT and Trust Board also receive regular updates on equality screenings and EQIAs conducted on key service developments ahead of public consultation. The Trust’s SMT and Trust Board sign off on EQIAs before and after public consultation. Notable examples during the current reporting period include:

**24.3 - Corporate Induction Training**

Training for all new staff – 694 staff attended the Trust’s Corporate Induction Programme April 2016 to March 2017. This programme includes the Trust’s equality duties and an overview of the commitments in its Equality Scheme. In addition, to having access to a copy of the Trust's Equality Scheme, the Trust has produced an information booklet for all staff entitled ‘Trust’s Equality Scheme – What it means for staff’ which is available on the staff intranet. The booklet provides a simple overview of the S75 equality duties and what it means to staff in their day to day work.

The Corporate Induction Programme is provided in-house and is also extended to all trainees and those on placements e.g. Steps to Work - long-term unemployed, disabled persons under the Trust’s Placement Policy, Graduate Acceleration Programme (GAP) etc.

Participants are also sign-posted to the Trust’s Discovering Diversity e-learning modules which they are asked to complete as part of the Knowledge and Skills Framework (KSF) – equality being one core element/competency.

**24.4 - Professional Induction Programme for Social Work/Care Staff & Social Work Students**

Provision of equality training for newly qualified nursing and social work staff is delivered in-house via existing equality and Social Care Training Unit staff. Induction programmes are held twice a year in January and September. As part of this training event the Equality Unit provides a module entitled ‘Equality and Human Rights Awareness’. This presentation provides participants with an overview of what is expected of them as employees of the SHSCT with regards to equality and human rights issues when working alongside colleagues and when in contact with service users. Topics covered include What is Equality?, Protected Grounds, Forms of Discrimination, Challenging Stereotypes, S75 equality duties and key elements of the Trust’s Equality Scheme. In addition the Trust’s Values,
the effective and efficient use of the Northern Ireland Health and Social Care Interpreting Service, overview of the Multi-cultural and Beliefs Handbook – Resource Pack for Staff, Legislation and Key Policies and Resources are all addressed.

This programme is organised to meet induction standards set down by NISCC as well as the mandatory training standard set by the Trust. The programme draws on the input from staff within the Trust as well as external providers. For example, the induction programme includes input from Travellers, Legal Services e.g. BSO and Law Centre etc.

A total of 180 staff and students on placement attended these sessions.

24.5 - Medical Staff

The Medical Directorate’s Southern Docs website also contains sections on junior doctor induction, medical appraisal and revalidation together with other aspects of medical training. It also includes links to the Discovering Diversity e-learning modules, Vulnerable Adults and Child Protection Training etc. Completion of the Discovering Diversity e-learning modules is mandatory in line with revalidation requirements for all medical staff.

24.6 - Discovering Diversity E-Learning Modules

The Discovering Diversity E-Learning platform now extends to 7 modules and acts as the main medium for raising staff awareness of the Trust’s equality duties, human rights obligations and disability duties as it relates to all functions undertaken by the Trust i.e. employment, service provision and procurement. The modules have been designed to satisfy the core equality competency set out in the Knowledge and Skills Framework.

Staff are able to create their own unique username and password which the programme will recognise each time they return to complete each module at their own pace. Staff are also encouraged to complete the short end of module evaluation which enables the Trust to take on board staff comments and any suggestions for improvement in future revisions/editions.

Each module also includes a self-assessment element whereby staff can generate their own certificate of completion as evidence for their own personal development portfolio.

Work commenced during the year under review between HSC Trust Equality Leads and Aurion software provider with a view to creating 2 new modules, one for all staff to complete and one for managers to complete which includes a managerial dimension. These new modules will include a focus on a human rights based approach to HSC; and further strengthen the good relations and S75 equality duties. These new modules were piloted during 2017 and feedback was utilised to inform the final content.
Feedback from the E-Learning Pilot - What our staff said:
“Interesting and informative due to a combination of interesting material and excellent graphics”.
“Great programme”.
“Well structured and interesting”.
“Very impressed, well designed, key messages put across very clearly”.
“Molly the mentor is very engaging. Scenarios brilliant”.

It is essential that staff complete their e-learning modules. Timely reminders are issued via the Trust’s Southern-i (corporate news sheet) and global. Quarterly reports are produced for each directorate to establish the uptake by staff of these modules.

24.7 - Sensory E-learning Training Programme

As part of the on-going work of the Regional Physical and Sensory Disability Strategy a Sensory E-learning training programme has been developed by the Leadership Centre. Various staff from the SHSCT (Collette Bigley, Hearing Disability Services Manager, Ray Maxwell, Sensory Disability Team and Frances Steenson, Social Worker) participated in the training pilot to help shape and inform the final content. This programme is now widely available to HSC staff.

See Part B – Progress on implementing the disability duties for details of other disability awareness training.

This e-learning programme enables staff to be more aware of the mobility and communication needs of blind and deaf people. Over the years deaf and/or blind patients visiting our facilities often complained about difficulties they experienced either with communication with staff or navigating our vast range of buildings. The Trust engaged with patients and as a result developed this new programme which aims to make staff aware of the difficulties deaf and blind patients experience and as a consequence ensure that future visits to our services by deaf and blind patients will be much improved.

All staff are encouraged to complete this programme and adopt the examples of best practice. Reminders have been issued by the Trust’s Education and Learning Team every quarter, during the year under review, to encourage staff to the complete same.

The SHSCT Sensory Disability Teams welcomes this excellent initiative as it provides all of our staff with an insight into the communication and mobility needs of people who are deaf and are blind.

24.8 - Human Rights Training

The Trust's Social Services Workforce Development & Training Team incorporated human rights training into a range of in-service training events they deliver. The courses focus on safeguarding adults and children, mental health, working with older people, physical and learning disability.

The Team provided site specific human rights training for social care staff during the year under review with over 100 people attending.
24.9 - Policy Screening and EQIA – Skills Training

The Trust’s Head of Equality continues to deliver S75 Equality Screening and Equality Impact Assessment training to policy authors and decision makers within the Trust.

The Trust’s Equality Manager provides on-going advice and support in the discharge of the Trust’s S75 statutory equality duties and acts as a business partner in support of each programme of care/service directorate. Training is usually a half day and can take the form of specific workshops with a particular focus on proposed service changes, pre-procurement exercise and policy development.

In addition, screening and EQIA guidance along with worked examples is made available to staff to support them with equality screening and EQIA processes. As reported above the equality screening template will be reviewed taking into account the learning from the pilot together with the findings from the research conducted by the Equality Commission into the worked experience of Public Authorities of equality screening and EQIA processes.

Training materials will be reviewed accordingly.

24.10 - Staff involved in Consultation Processes - Skills and Knowledge Training

PPI is a standing agenda item on the Trust’s Patient Client Experience Committee, which is a sub-committee of the Board that reports directly to the Trust Board and provides corporate leadership on matters relating to PPI and Patient Client Experience. Each Trust Board meeting has an agenda item which focuses on a patient/client centred service which includes feedback and learning from PPI activity.

There are 4 PPI panel representatives on the Patient Client Experience Committee and are full voting members. Directorate leadership arrangements are in place and a PPI contact/lead has been appointed in each Division/Directorate. Each Directorate is required to compile a register of individuals interested in being involved to disseminate engagement opportunities.

The Trust’s website/facebook also promotes opportunities and acts as an important medium to reach out to a wide range of stakeholders. The Trust has also developed a mailing list which includes the community/voluntary organisations and disseminates opportunities for onward circulation to constituent members on behalf of the Trust. On line registration is available on Trust website. A central register of longstanding service user/carer groups/forums is appended to the Trust’s Consultation Scheme and is available on Trust website.

In addition, the Equality Unit keeps under review its master consultation list to ensure that it is as up-to-date as possible to facilitate all future engagement and consultations.
Practical steps undertaken in the last 12 months to facilitate and support the involvement of service users, carers and the public (in particular marginalised/excluded S75 groups) in the planning, delivery and evaluation of services:

- Recruitment of additional PPI Officer
- Recruitment drive for PPI Panel and Carers Reference Group
- Election of new PPI Panel Chair and Vice Chair
- PPI Team has revised all materials and included PPI brand and PPI brand guidance has been shared with Trust Communications Department.
- Translation of information and leaflets
- Use of interpreter services - SHSCT is the highest user of regional Interpreting Service.

The Trust's PPI Annual Report provides an overview of PPI activity. In addition there are a number of news sheets that provide information and feedback on key themes e.g. the PPI Carers Summary flyer is available on the Trust’s website as is the PPI Traveller Summary and Traveller Progress Newsletter. Further, there are a variety of service newsletters e.g. ICT Newsletter, Recovery Newsletter, etc.

24.11 - PPI Awareness

Personal and Public Involvement training continues to be delivered across the Trust, at team meeting level and as part of core induction. An extensive range of PPI tools have been developed to support staff with the effective roll out of its PPI and S75 equality duties and to further enhance and develop the skills and confidence of staff.

Service users and carers are involved in the design, delivery or evaluation of PPI training. For example:

- PPI Panel members are involved in up-dating in house PPI Awareness.
- PPI Panel members are members of the Regional PPI Forum training sub-group and were involved in the development of Engage website.
- PPI Panel members also chaired workshop sessions at the ‘Quality Event in October 2016.
- In-house PPI Awareness training continues to be delivered at Team meetings and as part of the core induction programme for Social Work students twice yearly. The training was revised in October 2016.

There follows summary details of the level of PPI awareness training delivered during the current reporting period:

- PPI Awareness delivered to student social workers at core induction programmes August 2016 and January 2017 - 79 students and 26 new staff members.
- PPI Awareness to staff teams:
  - District Nursing (Lurgan Hospital) – 9
  - Newry and Mourne ICT – 26
  - Care Home Support Team – 12
  - Windsor Day Centre Team – 2
  - Podiatry Team - 32
• Professional Development Programme for Registered Staff Nurses and Registered Midwives - 13
• Children With Disabilities team CB - 13
• Speech & Language Therapy - 6
• Armagh FIT - 15
• ACE team SLH - 9
• Day Care/Opportunities Zest – 8.
• PPI Awareness was also delivered to the Mental Health Forum – 20 service users and carers.
• PPI Panel induction training – 6 service users
• Regional PPI Awareness E-learning was made available on Trust E-learning platform from April 2016 - 355 staff have completed in year.
• CIT – Introduction to Quality Improvement E-learning (PPI section) - 277 staff completed in year.
• Engage and Involve – PPI Coaching and Team Briefing resources distributed.

Total number of Trust staff receiving PPI training as at 31/3/17 = 1985
Total number of students receiving PPI training = 460
Total number of volunteers receiving PPI training = 13
Total number of service users and carers = 26

Overall total as at 31/3/17 = 2484

The Trust will continue to cascade the roll out of PPI training as required for staff within available resources and in line with the Trust’s Training and Development Strategy.

The Trust’s PPI Team have also worked with staff, service users and carers from the PPI Panel and others to develop a range of resources to assist with raising awareness of PPI organisational and individual responsibilities amongst staff and to support staff and service users and carers in implementing PPI effectively. Such measures include:

A Directorate Action Plan template is in place to focus staff along the following key themes:
• Information
• Service User and Carer Involvement
• Evidencing Patient & Client Experience Standards
• Training
• Monitoring and Evaluation
PPI indicators have been developed for each of the above five key themes.

24.12 - Community Development Training

The Southern Health and Social Care Trust’s Promoting Wellbeing Improvement Department seeks to improve the health of the Southern Trust population and reduce inequalities in health between geographical areas, socio economic and minority groups. The Promoting Wellbeing (PWB) Division works in partnership with a wide range of community, voluntary, statutory and public sector agencies to maximise health and wellbeing. The PWB Division also works across Trust Directorates to embed health and wellbeing improvement into Trust policy,
processes and delivery of services and care. A key role of the Division is to build the skills and capacity of others to promote health and wellbeing and tackling inequalities.

Community Development Training includes:
- Community Development Awareness
- Community Development Approaches with Children and Young People.

### 24.13 - Complaints Management

On-going training is provided to staff who deal with complaints management and the relationship this has with the Trust’s Equality Scheme so that complaints managers and staff have the necessary skills and knowledge to investigate and monitor complaints in a timely and effective manner.

At the time of completing this year’s annual progress report HSC Equality Leads were exploring the feasibility of collaborating with the NI Human Rights Commission re developing a human rights based approach to complaints management framed around the FREDA values and principles. This will be taken forward as one of the actions in the Trust’s latest S75 Equality Action Plan 2017-2022.

### 24.14 - Monitoring

To support staff involved in the implementation and monitoring of the effective implementation of the Trust’s Equality Scheme a range of tools have been developed such as the Themed Inequalities Audit on which to benchmark progress; Development of Ethnic Monitoring Guidelines for use by the HSC sector on existing and any new system developments/enhancements, associated Guidelines for staff and Ethnic Monitoring posters to promote the value of S75 monitoring. The importance of S75 monitoring has also been augmented into Quality Data Training for all staff.

Further, the HRPTS electronic staff management system provides for ‘employee self-service’ whereby staff can update any changes to their equality and diversity data - thus providing for real-time data to inform e.g. equality screenings and EQIAs. Supporting guidelines have been developed to support staff with the deployment of this relatively new system along with designated staff to provide ongoing help and support.

The Trust also draws on the ECNI Guidelines on monitoring and looks forward to receiving a copy of the Commission’s next edition of ‘Key Inequalities in Health and Social Care’ to update its own themed inequality audit which will be used as a basis to inform its next S75 Action Plan.

### 24.15 - Employment - Selection and Recruitment Training

The Trust has in place arrangements to ensure recruitment panels receive training on the Trust’s procedures for ensuring a fair selection process. A regional e-learning platform has also been development which is used for refresher training. Current equality law and best practice is incorporated as part of the overall
PART A

assessment. A regional work stream has been established with a view to developing a regional Recruitment and Selection Strategy. The Trust will participate in this regional work stream to ensure that good practice from this venture is shared and mainstreamed into our local recruitment and selection arrangements.

24.16 - Peer Learning Sessions

Peer Learning Sessions were arranged as part of the HROD Succession Planning Programme. All staff within HROD are invited to attend the Peer Learning Sessions on topical issues. These sessions routinely include a legal dimension covering key developments in the sphere of employment equality law.

24.17 - Training Resources

A number of in-house leaflets and documents have been produced to increase staff awareness of equality and diversity matters and to promote cultural competence e.g. Multi-Cultural and Beliefs Handbook, Cultural Diversity and Etiquette Booklets, Traveller Information Booklet, Disability Etiquette Booklet, Making Communication Accessible for all, PPI Fact sheet on “Working with Hard to Reach Groups”, Carer and Stakeholder Reimbursement Guidelines and Procedures and PPI Toolkit to support staff in promoting inclusive user involvement. Some of the aforementioned resources were reviewed and updated during the current reporting period.

During the year under review work commenced on reviewing the Trust’s Traveller Information booklet for staff. The booklet aims to increase staff awareness of Traveller culture and enable staff to provide culturally sensitive services. It is intended to re-launch this booklet as a regional resource for use across the HSC. As evidenced in this section of this year’s S75 annual progress report, there are a range of management development initiatives which reflect and build upon the patient/client standards and underpin the Trust’s core values which have been founded on the principles of equality and diversity i.e. treating people with dignity and respect, protecting their privacy, communicating in a manner that is sensitive to their needs, and showing professional and considerate behaviour toward patients and clients at all times.

There are also a number of supporting policies/procedures/guidelines that relate to equality and diversity, namely the Trust’s Equal Opportunity Policy, Harassment at Work Procedure, Working Well Together Policy. Other examples include the Trust’s Harmonious Working Environment Guidelines and Joint Declaration of Protection all of which are kept under review in line with Fair Employment and Treatment (NI) Order requirements and evolving legislation and case law developments.

Traveller Health Champions and Health Trainers

The Trust’s Equality Manager delivered a training session on ‘Equality, Diversity and Human Rights’ to participants undertaking the Community Health Trainer programme on the 10th March 2017 in Brownlow. 11 people completed the Community Health Trainer course in April 2017.
24.18 - Working Well with Interpreters - Staff Training Sessions

During the year under review Working Well With Interpreters Training sessions continued across the Trust facilitated by the NI Health & Social Care Interpreting Service (NIHSCIS).

Each 2 hour session was designed to raise awareness of the NI Interpreting Service, the role of the interpreter, patient rights and entitlement to language assistance, the risks/dangers of using untrained Interpreters/family/friends. At the close of each session participants had a greater awareness of systems and procedures for booking interpreters and when it is appropriate to use face to face v telephone interpreting.

Uptake and feedback was good across all the sessions. There follows a flavour of some of the feedback received: “Excellent presentation, easily understood and presented”; Clear informative training; ‘Would have liked an interactive demo screen on overhead projector”; ‘Expected information on Deaf interpreters as didn’t know it was a different service”; “An informative session”.

24.19 - Provision of Interpreting Service

The Southern Trust has one of the largest ethnic minority populations in Northern Ireland. Our overall population is projected to grow by 13.5% by 2020. Our ethnic minority population is also likely to increase significantly by 2020 as birth rates continue to keep growing.

Provision of language assistance is a legal requirement for public sector organisations and an essential part of providing safe, high quality care to all patients and clients. The Trust is committed to ensuring everyone is given equal access to information about services in a format they can understand. The Trust provides interpreting services on request to help patients and clients and staff to communicate when using services.

Interpreters are provided and funded regionally through the Northern Ireland Health and Social Care Interpreting Service. Interpreters are professionally trained and adhere to a Business Services Organisation’s Terms of Engagement. The Terms of Engagement outline HSC Interpreters key roles and responsibilities when undertaking work through NIHSCIS.

Interpreters are bound by confidentiality and provide their services on a 24/7 basis. NIHSCIS has 300 Interpreters registered in 36 different languages.

Demand for Interpreting continues to increase on an annual basis with over 106,541* requests for Interpreters processed during 2016-17 and 97% of bookings successfully fulfilled. 50291 (47.20%) of requests were from the Southern Trust area.

24.20 - Professional Development Training for Interpreters

The NI Health & Social Care Interpreting Service organised the following training sessions for interpreters:
- Mental Health Training - 27 April 2016.
- Speech and Language Therapy Training – 9 May 2016.
- 5 day Health Specific Conversion Course delivered in September 2016 for new Interpreters who had completed the OCN Level 4 certificate with other Agencies but wanted to register with NIHSCIS. The training for this included sessions delivered by Health and Social Care Practitioners from Mental Health, Gateway and Women's Aid.

24.21 - Visual Awareness Training and Guiding Techniques (VAT)

Through the RNIB Partnership Contract 10 Visual Awareness Training sessions reaching 142 participants were provided to outside organisations from (1 April 2016 to 31 March 2017).

24.22 - Training for the Community and Voluntary Sector

As part of the Trust's Corporate Social Responsibility Policy, the Trust is committed, where possible, to offering a number of the overall places available on training programmes within the Trust to individuals from local community and voluntary sector organisations. The Trust also offers up to 50 e-learning licences per annum on a range of topics (such as Infection Prevention and Control, Moving and Handling, Fraud Awareness, etc.) for use by individuals from community and voluntary sector organisations.

24.23 - Putting People First – Ambassador Training

This one day programme provides staff with the knowledge and skills to become a Putting People First Ambassador within their Trust/organisation. The learning outcomes include:

- gaining a better understanding of the importance of how staff attitudes and behaviours towards each other can impact on others.
- exploring and practicing some of the skills around dealing with service users.
- a clear understanding of the DoH five patient and client experience standards – e.g. privacy, dignity, respect etc.
- gaining learning from exploring complaints/difficult situations.
- examining real life experiences, reflecting and making recommendations for improvement.
- opportunities to reflect on your own practice and learn from others.

The programme is geared toward staff currently delivering customer care or patient experience programmes or for those aspiring to be involved in similar type work. This 1 day programme includes 2 or 3 support workshops throughout the year. Examination of the reasons behind complaints revealed that they are often routed in staff attitudes and behaviours. 261 staff members attended this training during the reporting period.
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:

Putting people first – which examines attitudes and behaviours which impact on the patient experience. 261 staff attended this training.

Face to Face training on the S75 equality duties – which provides for open discussion and dialogue around pertinent issues.

7 people volunteering with community groups completed the Community Health Champion training and 11 participants completed the accredited Community Health Trainer course. The participants are delivering health improvement services to community groups and individuals within the Verve network and supported by the Healthy living centre alliance. The Equality Manager delivered an ‘Equality, Diversity and Human Rights’ session to participants of the Community Health Trainer course.

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

26 Please list any examples of where monitoring during 2016-17, across all functions, has resulted in action and improvement in relation to access to information and services:

- **Stop Smoking Information Leaflet** – translated into a range of ethnic minority languages.
- **Blind cord safety leaflets** – hard copies - translated into a number of minority ethnic languages. The leaflets are available from Nina Daly, Accident Prevention Officer and supplies are as follows: Cantonese (110), Hungarian (290), Lithuanian (270), Mandarin (90), Polish (70), Portuguese (290), Romanian (210), Russian (270), Slovakian (290) and Tetum (290).
- **‘Take 5’ leaflets translated into 11 languages** – Polish, Romanian, Hungarian, Cantonese (Chinese Complex when written), Mandarin (Chinese Simplified when written), Somali, Slovak, Portuguese, Lithuanian, Arabic and Tetum. The leaflets are available from the Promoting Wellbeing department in the Southern Trust and were circulated widely to BME groups and support organisations.
- **The Trust’s Accident Prevention Officer provided a number of fire safety leaflets and flyers for the Traveller community**; education packs to the Traveller support workers to raise awareness of the accidents; picture booklets on burns and scalds; safety aids including (hair straightener pouches, carbon monoxide alarms, cupboard locks, furniture straps, door jammers).
- **Easy read resources** – Breast Screening; Menopause; AA; Take 5 - for example:
• **Driving Theory Test Practice Questions for Deaf People** - A new Northern Ireland sign language version of the Driving Theory Test practice questions has been developed by the Southern Health and Social Care Trust. The Trust supports around 300 profoundly Deaf people who use sign language as their main form of communication.

Communication is the most significant barrier for Deaf people as Eilish Kilgallon, Community Access Officer for Deaf People at the Southern Trust explains: “As sign language does not follow the same format or include the range of vocabulary as English grammar, Deaf people can have great difficulty in terms of academic achievement, employability and overall social inclusion. Although they tend to have excellent concentration and no problem passing the practical driving test, because the theory exam is in normal English, the pass rate for deaf people is very low.”

Pictured above Pat McAteer, Specialist Services Manager for the Trust added: “We developed this new signed version of the theory test practice questions to give Deaf people a better understanding of what is being asked and offer them a fairer chance of passing the test. This new test has been widely welcomed by our service user advisory group and local deaf clubs and we hope it helps many more deaf people to enjoy the independence of being able to drive.”

The video has been produced with a local translator specifically using Northern Ireland sign language.

• **Health Awareness for Learning Disability Clients** - The Trust teamed up with the Women’s Resource and Development Agency to deliver health awareness sessions specifically tailored for our service users with learning disabilities. The Women's Resource and Development Agency delivered two sessions for service users in Craigavon and Banbridge and the Newry and Mourne areas. Topics covered included breast, cervical and bowel awareness. The events were a great success, participants found them very informative and were appreciative of having the space to discuss women's health issues in a secure, supportive setting.

Supporting people to live healthy lives and improve their health and wellbeing
Complaints (Model Equality Scheme Chapter 8)

27 How many complaints in relation to the Equality Scheme have been received during 2016-17?

Insert number here: 1

Please provide any details of each complaint raised and outcome:

One formal complaint was received during the reporting period. The complaint was in relation to sign language provision in CAH following an Ombudsman’s investigation. A number of meetings took place between the Equality Unit, Senior Governance Officer and the Specialist Services Manager for sensory disability to address and to take forward the recommendations in the Ombudsman report. The contract for Sign Language Interpreting is managed by the Trust’s Sensory Team.

Amongst the actions taken forward were:

- Production of a revised flowchart for ‘Sign Language Interpreter Booking Procedure’.
- Dissemination of the flow chart to all staff via Southern-i and Desktop (23rd February) as a tangible means of raising staff awareness on booking sign language interpreters - to be displayed at frequent intervals.
- As a further means of raising staff awareness/signposting staff/ the new flowchart is now referenced by Claire Hamilton, Manager, NIHSCIS, when delivering the ‘working well with interpreters’ training to staff in March 2017.
- **Arrangements are in hand to deliver Sensory Awareness training to ward staff (in the MAU and 2 South) where the complaint originated.**
- Discussions took place with the Trust’s Education Learning and Development Department on the possibility of the arrangements for interpreting and translation to be included at departmental/induction training.
- As part of the on-going work of the regional Physical and Sensory Disability Strategy a sensory e-learning training programme has been developed by the Leadership Centre. The new sensory e-learning training module is being actively promoted to all staff. Quarterly reminders will be issued by the Trust’s Education, Learning and Development team to encourage staff to complete same. Of note Fionnuala McAndrew, Director of Social Care & Children, Health and Social Care Board, wrote to all CEs seeking support for the roll out of this training to all staff across the HSC sector.
- The regional Physical and Sensory Disability Strategy have also been working on a pre-procurement specification for the future provision of Sign Language Interpreting which presents an opportunity to address some of the difficulties in relation to the provision of sign language interpreters for people with sensory impairments when accessing services.
- The Trust’s Equality Unit also investigated the potential of securing additional funding for further face to face staff training.
Section 3: Looking Forward

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

Only a few minor changes were made to the Trust’s Equality Scheme to reflect organisational change, staffing numbers and population profile. No material changes were made to the Scheme.

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)

- Implementation of the Trust’s new Disability Action Plan covering the same period 2017-2022.
- Finalising engagement and consultation arrangements thereby facilitating user input to the development, implementation and review of the above plans.
- Roll out of 2 new Discovering Diversity e-learning modules for management and staff.
- Promotion of Sensory Awareness e-learning training for staff. Sensory Awareness e-learning programme has been developed in collaboration with Royal National Institute of Blind People (RNIB) and Action on Hearing Loss (AoHL) and with the assistance of the Leadership Centre. This interactive online training resource aims to improve staff member’s understanding of the needs of people with hearing and/or visual impairment and provides helpful advice/guidance on how to support people with sensory disabilities.
- Reviewing the Trust’s equality screening template and associated guidelines.
- 10,000 Voices Initiative and surveys continued to be promoted amongst S75 groups. Surveys to be translated into different languages and disseminated to the interpreters via the Northern Ireland Health & Social Care Interpreting Service in order to capture the patient experience for those who require interpreting services.
- Implementation and roll out of the new Gender Identity and Expression Policy – and roll out of all other actions in the Trust’s new Plans referred above.
- Continue to work with the Equality Commission in any revised procedural guidance to give effect to the S75 equality duties.

30 In relation to the advice and services that the Commission offers, what equality and good relations priorities are anticipated over the next (2017-18) 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):
  Employment - Gender Identity and Expression Policy.
  GFS and Legislation - awaited extension of protection from age discrimination into the sphere of Goods, Facilities and Services provision.
  Structural - Outcome of the Rafael Bengoa review into Health and Social Care structures.
  Continued application of S75 equality duties to service reconfiguration/developments.
DISABILITY ACTION PLAN

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

The Disability Duties
PART B - Section 49A of the Disability Discrimination Act 1995 (as amended) and Disability Action Plans

1. **Number of action measures** for this reporting period that have been:

<table>
<thead>
<tr>
<th>All but 1</th>
<th>1</th>
<th>Not achieved</th>
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<tbody>
<tr>
<td>Fully achieved</td>
<td>Partially achieved</td>
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2. Please outline below details 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:

<table>
<thead>
<tr>
<th>Level</th>
<th>Public Life Action Measures</th>
<th>Outputs</th>
<th>Outcomes / Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>National</td>
<td>Continue development and roll out of Self Directed Support arrangements which will come into effect from June 2015 and should be fully deployed by 2019.</td>
<td>The Trusts in partnership with the Health and Social Care Board (HSCB) is introducing a new way of delivering Social Care Services called Self Directed Support (SDS). This system will provide</td>
<td>SDS will offer more control, flexibility and independence to people as they choose the support they want. During the year under review targeted training was planned for the following job groups - community Allied Health Professionals/ICS &amp; Stroke staff including non-commissioning District Nurses and hospital social work staff to attend SDS Awareness (Level 1) Training to support the implementation of SDS for everyone entitled to social care support.</td>
</tr>
<tr>
<td>Regional</td>
<td>Self Directed Support</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Level</td>
<td>Public Life Action Measures</td>
<td>Outputs</td>
<td>Outcomes / Impact</td>
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<td>more choice and flexibility for eligible individuals enabling them to tailor a care package that best suits their needs.</td>
<td>SDS is the overarching approach used in delivering social care following identified assessed need, and supports the draft Northern Ireland Programme for Government outcome that the services ‘we provide for people are responsive, efficient and effective … (and) are shaped to meet the needs of people.’ Guidance from the Department, Health and Social Care Board and SHSCT is that SDS is the only model through which we can deliver social care provision.</td>
</tr>
<tr>
<td>Level</td>
<td>Public Life Action Measures</td>
<td>Outputs</td>
<td>Outcomes / Impact</td>
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| **Regional Recovery Colleges** | Recovery is a journey and some people describe themselves as being in recovery rather than recovered. It is about rediscovering a positive identity, taking responsibility and regaining ownership over one's life. | Recovery focuses on a person's right to build a meaningful, satisfying and fulfilling life with or without the continuing presence of mental ill health. Recovery is closely associated with wellbeing and the five main areas of wellness which positively impact on people's wellbeing are  
- connect  
- be active  
- take notice  
- keep learning, and  
- give. | The Recovery College is well established and offers a variety of courses including 'Recovery through Discovery' in three Trust localities. Three carer/service user groups involved in the co-production and co-delivery of the courses. Link to the DVD for recovery [http://www.southerntrust.hscni.net/livewell/Recovery.htm](http://www.southerntrust.hscni.net/livewell/Recovery.htm) Click [here](http://www.southerntrust.hscni.net/livewell/Recovery.htm) for the information leaflet on Recovery. Click [here](http://www.southerntrust.hscni.net/livewell/Recovery.htm) for the 5 Ways To Wellbeing information leaflet. **Regional Recovery Newsletters** 3 Recovery newsletters have been produced. The newsletters are dedicated to bringing news and information about mental health recovery work in Northern Ireland and personal stories of people on their own recovery journey, as well as updates on the work of all the local Health and Social Care Trusts. [http://www.thementalhealthforum.co.uk/recovery-resources/info-links-media-downloads/newsletters-recovery-publications/](http://www.thementalhealthforum.co.uk/recovery-resources/info-links-media-downloads/newsletters-recovery-publications/) |
<p>| <strong>Regional HSC Disability</strong> | <strong><a href="mailto:Tapestry.forum@hscni.net">Tapestry.forum@hscni.net</a></strong> Regional Staff Forum established and terms of reference agreed. | Regional Staff Forum established and terms of reference agreed. | Improved policy development. Greater staff awareness of the DDA - the disability duties. |</p>
<table>
<thead>
<tr>
<th>Level</th>
<th>Public Life Action Measures</th>
<th>Outputs(^i)</th>
<th>Outcomes / Impact(^ii)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff Forum</strong></td>
<td></td>
<td>An inclusive workplace that supports the needs of staff with a disability.</td>
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<tr>
<td><strong>Local</strong></td>
<td>‘Equality in Action’ Newsletter</td>
<td>The Trust’s Equality Unit re-launched its ‘Equality in Action Newsletter’. Themed editions will include a feature on the Disability Discrimination Act and placement scheme. Production of Trust staff information sheet is aimed at promoting a positive and supportive culture toward persons with a disability.</td>
<td>The Trust also appointed a new member of staff to the Equality Unit whose roll, as Disability Liaison Officer, is to provide timely advice to managers on the effective implementation of the DDA and reasonable adjustments in the workplace. An inclusive workplace that supports the needs of staff with a disability.</td>
</tr>
<tr>
<td><strong>Mental Health Service User Forum</strong> – service user voice organisation – advice, information and signposting for service users, carers and professionals in relation to mental health services throughout the Trust. Continued roll out of Involving You - the Public and Personal</td>
<td>A flow chart has been produced to illustrate service user involvement at the core of mental health services and pathways via the UCSIG (User &amp; Carer Service Improvement Group) and ImROC steering group.</td>
<td>Development of a flow chart for Mental Health ImROC &amp; core care pathways - PPI embedded in all structures.</td>
<td></td>
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</table>
### Involvement (PPI) in Mental Health ImRoc & core care pathways.

Mental Health Service User Forum website continues to provide crucial information on helplines and support, independent service user advocacy services, carer resources, leaflets in different languages.

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

<table>
<thead>
<tr>
<th>Training Action Measures</th>
<th>Outputs</th>
<th>Outcome / Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Delivery of Equality and Human Rights Screening Master Classes – incorporating the Disability Duties.</strong></td>
<td>Provision of on-going advice and support provided by Equality Managers to policy authors on the application of S75 equality and disability duties.</td>
<td>On-going mainstreaming of the disability duties into screening and policy developments e.g. Trust Strategic Plan, Brokerage scheme, Day Opportunities as well as internal policy e.g. Time Off/Other Leave Policy, Domestic Abuse Policy, Grievance Policy. See Part A of this year’s report for further details.</td>
</tr>
<tr>
<td><strong>2. Continued roll out of Discovering Diversity e-learning modules which</strong></td>
<td>Increase uptake of these training modules by Trust staff. Periodic reminders are issued to staff from the</td>
<td>Promotion of positive attitudes towards disabled persons.</td>
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<tr>
<td>includes module 4 on the Disability Duties.</td>
<td>Directorate of Human Resources to complete each of these modules in fulfilment of the Knowledge and Skills Framework (KSF).</td>
<td>Improved patient experience and staff relations as a consequence of increasing awareness and promoting positive attitudes.</td>
</tr>
<tr>
<td>See page 59 of this report for further details.</td>
<td>Quarterly monitoring of uptake of e-learning programme and annual reporting through e.g. S75 Annual Progress Report.</td>
<td>Outcome: Promotion of positive attitudes towards persons with disabilities.</td>
</tr>
<tr>
<td>Development of 2 new e-learning modules for staff have been commissioned and piloted across the Trust.</td>
<td>New programme addresses any knowledge gaps in relation to the good relations duty, human rights and disability duties.</td>
<td>Sharing of good practice across the region.                                                                AINS Improved patient and staff experience.</td>
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<td>New modules piloted March 2017.</td>
<td>Views of staff who participated in the initial pilot: Interesting and informative due to a combination of interesting material and excellent graphics” “Great programme”; “Well structured and interesting”; “Very impressed, well designed, key messages put across very clearly”.”Molly the mentor is very engaging. Scenarios brilliant”.</td>
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<td>Final modules to be launched autumn 2017 along with a deployment Plan.</td>
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<td>This new programme contains a particular scenario designed to raise staff awareness of the needs of service users with sensory loss.</td>
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<td>100 staff trained.</td>
<td>Promotes positive attitudes toward disabled persons. Increased awareness of the disability duties amongst HSC staff. Improves staff/patient experience.</td>
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<tr>
<td>Training Action Measures</td>
<td>Outputs</td>
<td>Outcome / Impact</td>
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<tr>
<td>4. <strong>Delivery of Training and Resources to ensure the effective implementation of PPI.</strong></td>
<td>In-house PPI awareness training continues to be delivered.</td>
<td>Increase awareness and understanding of PPI among staff, service users, carers and the public. Involvement of disabled persons in PPI and decision making processes of the Trust. Inclusive and meaningful engagement of disabled persons. Increased participation of disabled persons in public life activities. Compliance with Regional Training Programme.</td>
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<td>See page 62 of this report for further detail.</td>
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<tr>
<td>5. <strong>Staff Training – Mental Capacity legislation.</strong></td>
<td>This action will roll forward into the Trust’s new Disability Action Plan 2017-2022. The enactment of the Mental Capacity Act (Northern Ireland) 2016 results in mental capacity and mental health legislation being fused into one single piece of legislation. The enactment is only the first step on the road to full implementation of the Act. The full draft of the Code of Practice, draft forms and Regulations for the health provisions of the Act have been drawn up and are to be consulted on.</td>
<td>Training will assist staff to more fully appreciate the principles of the legislation and translate them into practice. Positive impact on individuals with a mental health condition. Training will be instrumental in the roll out of this Act. The Trust will liaise with the DoH Implementation Team to discuss any aspect of the Act, Code of Practice, Regulations or the implementation work in general.</td>
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<tr>
<td>Training Action Measures</td>
<td>Outputs</td>
<td>Outcome / Impact</td>
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<td>As part of Phase II it is the Department’s intention to consult formally on the Code and Regulations at the end of 2017 or early 2018 thus providing an opportunity to receive formal comments. Other aspects of the implementation work, such as training, will be taken forward thereafter.</td>
<td>Greater staff awareness of the needs of patients/clients/staff with sensory loss. Improved patient/client/staff experience.</td>
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<td><strong>6. Sensory e-learning training programme.</strong> As part of the roll out of the Regional Physical and Sensory Disability Strategy a sensory e-learning programme has been launched and is now actively promoted throughout the Trust to encourage uptake by staff to raise awareness of the needs of service users with sensory loss.</td>
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<td></td>
<td><strong>7. Continued roll out of the Butterfly Scheme</strong> which aims to improve the experience of people with memory impairment who are admitted to hospital. Wards continue to promote the Butterfly Scheme and deliver care in conjunction with the dementia strategy.</td>
<td>The Butterfly Scheme allows people whose memory is permanently affected by dementia to make this clear to hospital staff and provides a simple, practical strategy for meeting their needs. It also incorporates a system for offering the same response to people with temporary confusion. The patients receive more effective and appropriate care, reducing their stress levels and increasing their safety and well-being. Equips staff to more effectively meet the needs of</td>
</tr>
<tr>
<td>Training Action Measures</td>
<td>Outputs</td>
<td>Outcome / Impact</td>
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<td>8. <strong>Gain Guidelines</strong></td>
<td>In response to the publication of the GAIN guidelines a small project team was established to ensure this work was given priority. An Acute service improvement lead has been identified (as the representative for the Trust’s Acute Directorate) and will participate in the Regional Learning Disability Hospital Care initiative in association with RQIA.</td>
<td>Appropriate terminology is now included in ‘Historic Link Nurse Training’ and also included in ‘Learning Disability awareness training’. Agreed to commission further LD awareness training for staff to be taken forward by Acute Project Lead nurse with support from improvement lead.</td>
</tr>
<tr>
<td>9. <strong>Delivery of Visual Awareness Training and Guiding Techniques (VAT)</strong></td>
<td>Provision of VAT in collaboration with RNIB NI to support Trust staff working with people with sight loss. The course covers communication skills, guiding skills, guide dogs, the Disability Discrimination Act, group work and group work scenarios. 24 awareness sessions were delivered to 171 individuals. These sessions had a large impact on participants which benefited</td>
<td>Greater staff awareness of the needs of service users and staff with sight loss. Greater understanding of the DDA and Trust’s statutory obligations. Improved patient/staff experiences. 142 participants from external organisations were trained during the period 1 April 2016 to 31 March 2017.</td>
</tr>
</tbody>
</table>
### Training Action Measures

<table>
<thead>
<tr>
<th>Outputs</th>
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<tr>
<td>service users.</td>
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</table>

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

<table>
<thead>
<tr>
<th>Communications Action Measures</th>
<th>Outputs</th>
<th>Outcome / Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Sound Mapping Project</strong>.</td>
<td>Production of a tactile and audio mapping system outlining a safe-walking route in Armagh City centre for visually impaired users and visitors to the city. A large tactile map was placed in the Market Place Theatre. This contains audio buttons and with its colourful underlay and tactile map overlay is intended for use by both the sighted and non-sighted.</td>
<td>The project was funded by Armagh, Craigavon, and Banbridge Council. It enabled collaboration between local visually impaired adults, Sensory Disability Team (SHSCT), local Council, Braille Unit Maghaberry Prison and Men’s Shed along with goodwill at community level with volunteers making workshops and walks possible. The project aims to facilitate visitors and visually impaired people arriving to Armagh by bus to get some sense of how to move safely around Armagh on leaving the bus depot. To this end a metal map which outlines safe walking routes is currently been sited in the main reception area of Armagh Translink depot.</td>
</tr>
<tr>
<td>2. <strong>Day Opportunities News Letter.</strong></td>
<td>The Trust has been developing and extending the option for supporting people with disabilities to participate as active members within their communities for many years. These options are referred to as “Day</td>
<td>Promotes better opportunities for people with a learning disability to participate in meaningful employment, training, social and recreational activities.</td>
</tr>
<tr>
<td>Communications Action Measures</td>
<td>Outputs</td>
<td>Outcome / Impact</td>
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<tr>
<td>Opportunities”. This direction of travel is in line with key national and local strategies laid out in Transforming Your Care – A Review of HSC in NI, the Bamford Review and also the Physical &amp; Sensory Disability Strategy for NI. The Trust is committed to delivering quality care focused on the needs of service users, developing new approaches and promoting best practices. All of these strategies focus on improving the lives of service users with disabilities.</td>
<td></td>
<td>Ecoppy March 2017.pdf</td>
</tr>
<tr>
<td><strong>3. Production of ‘My day, my way’ DVD.</strong></td>
<td>A DVD was produced and launched during the reporting period to promote the benefits participants can glean from a wider range of day opportunities available across the Southern Trust. Clients and budding actors have been involved in the production of the DVD and associated poster campaign to highlight the services offered and to raise awareness of the opportunities available. The “My day, my way” campaign aims to let service users know why the Trust is modernising its services and to highlight the range and benefits in joining the Day</td>
<td>Production of a DVD which provides an insight to some of things we do: YouTube link below <a href="https://www.youtube.com/watch?v=A3HL1tEMbb4">https://www.youtube.com/watch?v=A3HL1tEMbb4</a> &amp;feature</td>
</tr>
<tr>
<td>Communications Action Measures</td>
<td>Outputs</td>
<td>Outcome / Impact</td>
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<td>Opportunities programmes. The Trust wants to support people with a physical, sensory or learning disability living in the Armagh, Dungannon, Craigavon, Banbridge or Newry &amp; Mourne areas to enable them to get the most out of life and be a part of their local communities. By joining in the growing range of day activities, that are designed to suit individual needs, the Trust aims to support individuals in reaching their full potential.</td>
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<td>4. <strong>Accessible Communication Guidance for HSC staff.</strong></td>
<td>This resource has been disseminated and forwarded to all directorates and key people across the Trust. Continued involvement with the Specialist Promoting Wellbeing Lead (Acute) to disseminate the resource to staff and via health and wellbeing hub in Craigavon Area Hospital. This guidance is readily accessible on the Trust’s Intranet and is also being incorporated in the Trust’s Continuous Improvement programmes.</td>
<td>Raised awareness of good practice on accessible communication among staff. Improved patient experience and clear guidance for staff.</td>
</tr>
<tr>
<td>5. <strong>Physical and Sensory Disability Strategy and Action Plan 2012-2015/17</strong></td>
<td>Implementation of the Strategy is carried out through the Strategy Implementation Group and its two supporting work streams as follows: A Key recommendation relates to the provision of communication support i.e. Sign Language Interpretation. Communication Support Services (British Sign language (BSL)/ Irish Sign Language</td>
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</tr>
<tr>
<td>Communications Action Measures</td>
<td>Outputs</td>
<td>Outcome / Impact</td>
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| The Trust continues to support the Physical and Sensory Disability Strategy Implementation Group which directs, co-ordinates and manages the project infrastructure and implementation of the Physical and Sensory Disability Strategy and Action Plan 2012-2015. | • Supporting Independent Living and Information and Training  
• Regional Sensory Impairment Group On 7 September 2016, Health Minister Michelle O'Neill announced an extension of the Physical and Sensory Disability Strategy and Action Plan to 30 September 2017 with the PSD group making all efforts to finalise the outstanding pieces of work and where that is not possible, they will make recommendations to the Department re what remains to be addressed or taken forward. | (ISL) interpreting) are required to ensure that deaf / hearing impaired people, who use BSL / ISL as their first language, are able to access health and social care services. Hard of Hearing people also require communication support including lip speaking / electronic note taking to access services and those with a dual sensory loss i.e. deafblind may require specialist interpreting services such as hand on hand/ restricted visual frame interpreting.  

In 2013 the Health and Social Care Board (HSCB) initiated a regional review of the provision of Communication Support Services in Northern Ireland to determine the most appropriate arrangements for providing the service in the future. The review concluded in January 2016 and proposed that communication support services should be supplied in future on the basis of a regional shared service provided by the Business Services Organisation.  

In June 2016 a consultation on the recommendations from the regional review of communication support services for people who are deaf or hard of hearing across Northern Ireland was launched. The purpose of the consultation was to ensure that people who rely on Communication Support Services had opportunities to influence the development of the
<table>
<thead>
<tr>
<th>Communications Action Measures</th>
<th>Outputs</th>
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<tr>
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<td></td>
<td>Service regionally. A series of meetings held in partnership with Trusts and facilitated by the British Deaf Association NI, were held across all the health and social care Trust areas to enable people who are deaf or hard of hearing to express their views on a regional service model. The public consultation found overwhelming support for the recommendation that the Business Services Organisation would be commissioned to supply regional Communication Support Services for D/deaf and hard of hearing people who need to access to health and social care across Northern Ireland. The consultation findings have been approved by Health and Social Care Board members. All of the constructive feedback received during the consultation will be taken into consideration by the Advisory Group in the co-production of the new regional service model.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>The Trust will establish a short lived working group to ensure the successful transfer of existing contractual arrangements for Sign Language communication support to a new service provider arising out of a regional review of this provision across Health and Social Care. This action will roll forward the HSC Trust’s Equality and Disability Action Plans 2017-2022.</td>
</tr>
<tr>
<td></td>
<td>Communications Action Measures</td>
<td>Outputs</td>
</tr>
<tr>
<td>---</td>
<td>--------------------------------</td>
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</tr>
<tr>
<td>6.</td>
<td><strong>Development of an Innovative Radiographer–led Hysterosalpingogram (HSG) Service in CAH</strong> as part of a service improvement project.</td>
<td>New innovative service established resulting in improved communication and improved service user experience and decrease non-attendance.</td>
</tr>
</tbody>
</table>
| 7. | **Mental Health Service User Forum**  
The Mental Health Service User Forum is the **voice of service users** across mental health services in the Southern Trust. The forum provides advice, information and signposting for service users, carers and professionals in relation to mental health services throughout the Trust. | The Mental Health Service User Forum website continues to provide crucial information on helplines and support, independent service user advocacy services, carers resources, leaflets (to download), recovery colleges, wrap courses and leaflets in different languages. | The Mental Health Service User Forum, as a peer organisation, was involved in the planning and delivery of an event to mark World Mental Health Day on 10th October. The Forum used ‘sense maker’ survey to assess the quality of experience for those using services. [http://www.thementalhealthforum.co.uk/recovery-resources/info-links-media-downloads/newsletters-recovery-publications/](http://www.thementalhealthforum.co.uk/recovery-resources/info-links-media-downloads/newsletters-recovery-publications/)  
Click here for the Mental Health Forum leaflet. |
| 8. | **Roll out of Complaints DVD**  
Use of alternative formats to facilitate access to the HSC complaints procedure. | Improved accessibility for persons with a disability to access the HSC complaints procedure. Improvements in patient experience and outcomes for service users and members of the public. |
## Communications Action Measures

<table>
<thead>
<tr>
<th>#</th>
<th>Measures</th>
<th>Outputs</th>
<th>Outcome / Impact</th>
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</thead>
<tbody>
<tr>
<td>10</td>
<td>Regional choking resource for people with a learning disability.</td>
<td>A variety of multimedia information and resources on choking awareness and associated training by speech and language therapists.</td>
<td>Free choking awareness website to help save lives available - the helpstopchoking.hscni.net website.</td>
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<td></td>
<td>A series of accessible DVD clips, activities, advice leaflets, posters and recording forms are now available for free download. Developed by speech and language therapy with a male service user who has a learning disability following his own choking experience.</td>
</tr>
<tr>
<td></td>
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<td></td>
<td>Ideal for raising awareness of choking risk for adults who have learning disabilities, their carers and staff. #helpstopchoking.</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>#</th>
<th>Encourage others Action Measures</th>
<th>Outputs</th>
<th>Outcome / Impact</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Launched Disability Placement Scheme aimed at providing workplace opportunities for people with a disability.</td>
<td>Target – 10–15. This figure does not include placements offered to schools and colleges nor opportunities via the Trust’s volunteering scheme, steps to work and the young</td>
<td>Equality Manager appointed in January 2017 with responsibility for the disability placement scheme and Disabled Persons Liaison Officer. Greater participation of disabled people in public life and promotion of positive attitudes towards</td>
</tr>
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</table>
### Encourage others Action Measures

<table>
<thead>
<tr>
<th>Outputs</th>
<th>Outcome / Impact</th>
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</table>
| persons’ employability scheme.                                         | people with disabilities. Enhancing employment skills and opportunities for participants.  
|                                                                         | 13 people were participating in the Trust’s disability placement scheme – comprising of both individual and group placements:  
|                                                                         | • 4 admin placements in Trust day centres and health and social services centres.  
|                                                                         | • 1 placement in Arts and Crafts in Millview Resource Centre, Bessbrook.  
|                                                                         | • 2 group horticultural placements across a variety of Trust sites.                                                                                       |
| Figures as follows for period 1 April 2016 – 31 March 2017:            | Promotes a more inclusive workplace and good staff morale.  
| Outcome of OH appt. - passed Fit - 684                                  | Greater retention of staff within the workplace.  
| Outcome of OH appt. - passed Fit with Adjustments – 335                | Improvements to the health and wellbeing of staff.                                                                                                                                 |
| A review commenced during the current reporting period on the Trust’s Policy on the Employment of People with Disabilities. The Trust will consult with the disability sector as part of this review to ensure that its policy and practices reflect best practice standards. | A key action in the Trust’s new Disability Action Plan is to develop a tool-kit for managers to assist with greater participation and retention of disabled persons in public life/employment. |
### Encourage others Action Measures

| 4. | **Roll out of HRPTS Employee Self–Service function** in relation to equality monitoring which incorporates disability considerations. | Production and promotion of information leaflet for staff - ‘Should I disclose to my employer that I have a disability?’ | 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. Improvements to the health and wellbeing of staff – provision of timely reasonable adjustments. Further mainstreaming of the disability duties – equality screenings and EQIAs taken into account in decision making processes. |
| 5. | **Recruitment measures to attract individuals with lived experiences of mental health.** | 4 Peer Support posts in acute and addiction services. 2 service users were trained to sit on the panels for these posts. | A key element of the IMROC/Recovery Programme is peers working in paid roles who ‘model’ recovery for those using services. Enhanced employment opportunities. Staff with lived experience of mental health have had a positive impact for service users in terms of greater empathy and understanding. |

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

<table>
<thead>
<tr>
<th>Action Measures fully implemented (other than Training and specific public life measures)</th>
<th>Outputs</th>
<th>Outcomes / Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Transition for learning disability</strong></td>
<td><strong>Improving Transition Services for</strong></td>
<td>Patient and client contribution is fundamental</td>
</tr>
</tbody>
</table>
**People with Disabilities** - During the year under review the Southern HSC Trust hosted a consultation event to allow service users and carers to feedback on their experience of moving from Children’s to Adult Services. The evening was well attended and provided a good forum for discussion.

The Adult Disability Transition Team was set up in September 2015. The team of Social Workers, Nurses, Physiotherapists, Occupational Therapists and Speech and Language Therapists support young people with disabilities during their transition into adulthood. Each young person has their own case manager who works with them and their family to develop an individual care plan and put in place the services they need, for example, direct payments/self-directed support and respite if required.

A representation from the Trust provided information on 10,000 Voices initiative and advised participants on how they could get involved and complete the 10,000 Voices survey - giving them an opportunity to ensuring that services are commissioned to deliver better outcomes for patients, their families and carers.
opportunity to provide feedback on their experiences of the Adult Transition Service by 'telling their story'.

<table>
<thead>
<tr>
<th>Action Measures partly achieved</th>
<th>Milestones/Outputs</th>
<th>Outcomes/Impacts</th>
<th>Reasons not fully achieved</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Self-Directed Support.</td>
<td>See 2(a) Regional above for key milestones/outputs to date.</td>
<td>More choice and flexibility for eligible individuals enabling them to tailor a care package that best suits their needs.</td>
<td>To be fully deployed by 2019.</td>
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</table>

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

<table>
<thead>
<tr>
<th>Action Measures not met</th>
<th>Reasons</th>
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</table>
5. What *monitoring tools* have been put in place to evaluate the degree to which actions have been effective / develop new opportunities for action?

(a) Qualitative: PPI Initiatives and Consultation Processes and Outcomes; Feedback from Service Users; Update of Themed Inequalities Audit; Review of complaints/compliments.
(b) Quantitative: Performance Indicators in DAP; Update of Themed Inequalities Audit; Consultations - see also PPI update in main body of this year's report; 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 Outcome Reports;

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

- made any **revisions** to your plan during the reporting period or
- taken any **additional steps** to meet the disability duties which were **not outlined in your original** disability action plan / any other changes?

No

Please select

If yes please outline below:

<table>
<thead>
<tr>
<th>Revised/Additional Action Measures</th>
<th>Performance Indicator</th>
<th>Timescale</th>
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<tbody>
<tr>
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<td></td>
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<tr>
<td>2</td>
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</table>
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? New Plan will be in place covering the period 2017 - 2022

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1. **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.

2. **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.

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

4. **Regional**: Situations where people can influence policy decision making at a middle impact level

5. **Local**: Situations where people can influence policy decision making at lower impact level e.g. one off consultations, local fora.

6. **Milestones** – Please outline what part progress has been made towards the particular measures; even if full output or outcomes/impact have not been achieved.