

Public Authority Statutory Equality, Good Relations and Disability Duties - Annual Progress Report 2019-20

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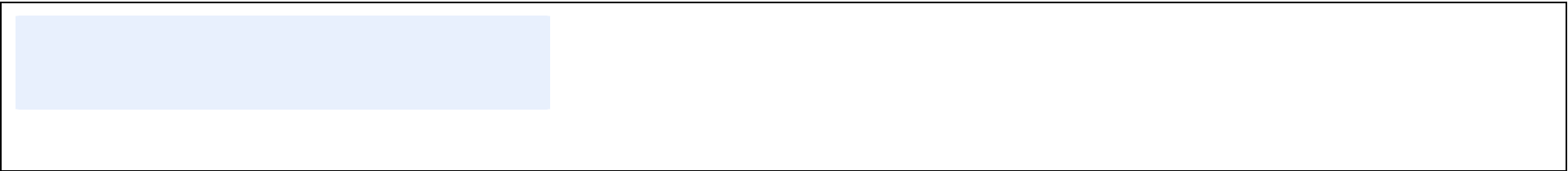
We receive support services on the implementation of our Section 75 and Section 49A duties from the Equality Unit at the Business Services Organisation. For further information you can contact our equality advisor: Anne Basten, Equality, Diversity and Human Rights Manager, Business Services Organisation, Anne.Basten@hscni.net 028 9536 3814

Documents published relating to our Equality Scheme can be found at: <http://www.publichealth.hscni.net/directorate-operations/planning-and-corporate-services/equality>

(ECNI Q28):

Our Equality Scheme is due to be reviewed by 31st March 2021.

Signature:



This report has been prepared adapting a template circulated by the Equality Commission. It presents our progress in fulfilling our statutory equality, good relations and disability duties. This report reflects progress made between April 2019 and March 2020.

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Chapter 1: Summary Quantitative Report

(ECNI Q15,16,19) Screening, EQIAs and Consultation

1. Number of policies screened in 2019-20 (as recorded in screening reports). (see also Chapter 5)	Screened in	Screened out with mitigation	Screened out without mitigation	Screening decision reviewed following concerns raised by consultees
4 (plus 1 policy that went straight to EQIA)	0 (plus 1 policy went straight to EQIA in 2019-20)	2	2	No concerns were raised by consultees on screenings published in 2019-20
2. Number of policies subjected to Equality Impact Assessment.	1 (in 2019-20)			
3. Indicate the stage of progress of each EQIA.	<p>Review of Breast Assessment Services (jointly with HSC Board and DOH): DoH published the consultation which ended on 30 August 2019. Decision making & publication of EQIA report will be published by DoH. (CONTINUED FROM 2018)</p> <p>Community Development: Consideration of Data/Assessment of Impacts/Consideration of Measures (STARTED 2020)</p>			
4. Number of policy	3 (Make It Public research transparency strategy consultation; Relationships and			

consultations conducted	Sexuality Education (RSE) in the Community; Draft Mental and Emotional Health and Wellbeing and Suicide Prevention Training Framework)
5. Number of policy consultations conducted with screening presented. (See also Chapter 2, Table 2)	0

(ECNI Q24)

Training

6. Staff training undertaken during 2019-20. (See also Chapter 2, Q6)

Course	Staff Trained	Board Members Trained
Screening Training	21	0
Equality Impact Assessment Training	15	0
Total	36	0

eLearning: Discovering Diversity	Module 1 to 4 – Diversity	0
	Module 5 – Disability	0
	Module 6 – Cultural Competencies	0

eLearning: Making a Difference	8
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(ECNI Q27)

Complaints

7. Number of complaints in relation to the Equality Scheme received during 2019-20

0

Please provide detail of any complaints/grievances:

n/a

(ECNI Q7)

Equality Action Plan (see also Chapter 3)

8. Within the 2019-20 reporting period, please indicate the number of:

Actions completed: 9 Actions ongoing: 1 Actions to commence: 3

(ECNI Part B Q1)

Disability Action Plan (see also Chapter 4)

9. Within the 2019-20 reporting period, please indicate the number of:

Actions completed: 5 Actions ongoing: 1 Actions to commence: 1

Chapter 2: Section 75 Progress Report

(ECNI Q1,3,3a,3b,23)

1. In 2019-20, 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.

Overview

Similar to last year, a number of actions demonstrate improvements in **access to information**. This includes the translation of resources such as the Newborn blood spot screening' leaflet into 10 minority ethnic languages, or the 'When to keep children off school' resource translated into 14 languages. A number of documents were also published in an easy read format for people with learning disabilities, for example information on breast screening. These resources were published on the main PHA website, which not only improves access to information, but also **raises awareness** of the need for inclusivity and highlights the diverse nature of our population. Another example of this awareness raising is the inclusion of racially diverse images on banners and promotional materials.

This year, most PHA directorates have focused on **co-production** and engagement with service users. This is very evident in certain areas of work – particularly in establishing the Frailty Network within Northern Ireland, ensuring Older People are at the heart of all work, decisions and outputs. Similarly, the work undertaken by the AAA Screening team in organising events ensure that feedback from service users helps shape the future of the programme in Northern Ireland.

A great deal of work this year has been done in partnership with other voluntary, community and academic organisations. This provides an important opportunity to **influence and improve equality outcomes** for those not bound by statutory equality legislation. Facilitated by the BSO Procurement and Logistics Service and the

BSO Equality Unit, the PHA continued to actively promote equality of opportunity in contracts with recruitment agencies. During 2019-20, the Procurement and Logistics Service conducted two audit exercises to assess how agencies were (i) promoting equality and (ii) adhering to contractual requirements in regards to equality monitoring. Audit findings will allow us for the first time to monitor the diversity of agency workers placed within PHA and other HSC organisations. We can then engage with recruitment agencies in relation to measures to address under-representation and the user experience of specific equality groupings. The findings will also provide further information on how the agencies promote equality with reference to: training their staff; gathering feedback from agency workers; their provisions on making reasonable adjustments for agency workers; and outreach work to attract a diverse range of agency workers.

Other examples where we have used our influence to promote equality include the PLACE:EE project involving a partnership of public health agencies, local authorities, academics and ICT experts dedicated to improving the quality of life for older people. Other programmes, such as the Make It Public research transparency strategy consultation undertaken with a number of different partners in different academic and voluntary and community sectors across the UK have also allowed the equality agenda to be promoted.

Table 1 below outlines examples of progress to better promote equality of opportunity and good relations¹.

Table 1:

	Outline new developments or changes in policies or practices and the difference they have made for specific equality groupings.
Persons of different religious belief	
Persons of different political opinion	<p>In July 2019, the PHA launched a public health campaign aimed at those celebrating in the Twelfth of July festivities, urging them to keep an eye on their alcohol intake. Alcohol units in commonly consumed alcoholic drinks were highlighted, as tips given as to how to stay safe when drinking alcohol. (Health Improvement)</p> <p>A similar public health campaign regarding alcohol use and the St Patrick holiday was also delivered. Alcohol units in commonly consumed alcoholic drinks were highlighted, as tips given as to how to stay safe when drinking alcohol. (Health Improvement)</p>
Persons of different racial groups	<p>Translations of the ‘Newborn blood spot screening’ leaflet in 10 minority ethnic languages were added to the website. This will ensure those who do not speak English as a first language understand the benefits of taking part in the programme. (Communications and Knowledge Management with Service Development and Screening team)</p> <p>The resource ‘When to keep children off school’ was translated into 14 languages and added to the PHA website. This provides information on different</p>

<p>Persons of different racial groups</p>	<p>illnesses and conditions when children should be kept off school, and when they can return. (Communications and Knowledge Management with Health Protection team)</p> <p>Within the last year, we deliberately used images to reflect greater racial diversity on our pull up banners used at promotional and public events. This will help raise awareness and visibility of different ethnic groups within our society. Health and Social Care Quality Improvement (HSCQI)</p>
<p>Persons of different age</p>	<p>The AAA Screening Programme brought together a wide range of healthcare professionals and men, screen-detected with an AAA, along with their partners/ guests to encourage service users to share their experiences of the screening programme and treatment services and to consider how they can be further developed. The event provided an opportunity for those involved in the delivery of AAA screening services to take stock and consider feedback from the programme's service users; this feedback is integral in identifying priorities that will shape the future of the programme in Northern Ireland. (Service Development and Screening)</p> <p>In April 2019, the Northern Ireland Frailty Network was launched. Frailty is where someone is less able to cope and recover from accidents, physical illness or other stressful events. This included establishing a Frailty Roadmap for Northern Ireland, with a strong focus on frailty prevention. This network is co-led by Age NI, and includes service users (i.e. Older People) ensuring Older People are at the heart of all work, decisions and outputs, in keeping with the spirit of co-production. (Nursing)</p>

<p>Persons of different age</p>	<p>A compendium of Obesity data and statistics for health professionals on obesity, physical activity and nutrition was published this year. This aims to support the development of strategies, action plans, services and programmes of work for children and adults within the PHA. (Communications and Knowledge Management)</p> <p>The Cross-Border Healthcare Intervention Trials in Ireland Network (CHITIN) project is supported by the EU INTERREG VA Programme and managed by the Special EU Programmes Body. During the year, the Walking In Schools (WISH) health intervention trial was funded, aiming to increase adolescent girls' physical activity (who are usually less physically active than their male peers). If the WISH project is successful, it could be adopted by schools across the island of Ireland. This would have a sustainable, long-term positive impact on child and adolescent health. (Research and Development)</p> <p>Work this year focused on improving safeguarding practices for children in primary and community care settings. A number of initiatives were developed to improve service quality for children, and their families and carers. One of these was a project encouraging General Practitioners (GPs) to attend safeguarding meetings, to achieve a more cohesive approach. Also, work included increasing awareness of services for vulnerable children who are at risk of harm in order improve outcomes for children and families. (Health and Social Care Quality Improvement (HSCQI))</p> <p>If pain is not treated quickly and effectively in children, it can cause long-term physical and psychological issues. A new Paediatric Pain Assessment Guide was launched to help staff choose the correct assessment tool for the child, dependant on age and/or their ability to communicate their level of pain. This aims to improve early and effective intervention to alleviate distress and highlight</p>
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<p>Persons of different age</p>	<p>concerns. Other work includes the development of the NI HSC Paediatric Collaborative to share ideas and best practice in order to improve service delivery and quality. (Health and Social Care Quality Improvement (HSCQI))</p> <p>Research indicates that spending time outside reduces stress levels, and provides other health benefits. The Learning Without Walls project aims to get children learning outside in the natural environment. This includes Forest School Awards where pupils are picked up after school and spend every afternoon outside in local woodlands. During 2019/20, 23,032 children took part, and over 1,000 children had their lessons taught outside every month. (Health Improvement)</p> <p>As part of Child Safety Week in June 2019, the PHA highlighted the risk of preventable accidents to parents and carers of post-infancy children. This included a campaign highlighting the dangers to small children posed by blind cords, burns from cookers, scalds from spillages, poisonings from hazardous household products, drowning in the bath, and falls. Helpful tips on making homes safer were included.(Health Improvement)</p> <p>A Training Needs Analysis for staff working with individuals and families with substance misuse was completed this year. This outlined the training needs of staff working with different client groups (e.g. children/young people; adults; and those with comorbid mental health problems). The outcome of this work will help to improve services offered to those with substance misuse. (Communications and Knowledge Management)</p> <p>The PLACE:EE project is a partnership of public health agencies, local authorities, academics and ICT experts dedicated to improving the quality of life for older people. The project aims to reduce social isolation, encourage</p>
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<p>Persons of different age</p>	<p>intergenerational skills exchange and encourage internet use for the benefit of older people and their communities. Working across Northern Ireland, Republic of Ireland, Iceland and Sweden, the project worked to:</p> <ul style="list-style-type: none"> • Facilitate skills and knowledge exchange between older and younger citizens through intergenerational workshops and arts based activities • Engage schools and students • Develop proof of concepts (PoCs) for digital solutions/services designed to enable older citizens – especially those in rural areas – to stay engaged and connected. • Develop a cultural archive of cultural artefacts relating to life in each community over the years– traditions, song, music, employment, history and household life – and material documenting how the two generations worked together. • Development of a standardised eating, drinking and swallowing recommendations sheet for adults with swallowing difficulties for use across Northern Ireland including people with learning disability (Centre For Connected Health)
<p>Persons with different marital status</p>	
<p>Persons of different sexual orientation</p>	

Persons of different genders and gender identities

Boys join girls in HPV Vaccination Programme: For the first time, boys who entered year 9 in September 2019 were offered the HPV (human papilloma virus) vaccine. The vaccine is offered as part of the school-based vaccination programme. Even though the vaccine has only been available in the UK for girls for nine years, decreases in pre-cancerous lesions in the cervix and in genital warts have already been seen. It is estimated that the level of protection offered by the vaccine will last for at least 10 years. Thus, it is very important that children receive the vaccine to help protect him or her from HPV infection and associated cancers. **(Health Protection)**

Monitoring data and statistics for health professionals on Obesity in pregnancy has been published. This aims to support the development of future work helping pregnant women to maintain a healthy pregnancy. **(Communication and Knowledge Management)**

Working alongside the Belfast-Manchester Centre of Excellence, and Prostate Cancer UK, Queen's University Belfast were supported to discover a new way to predict the aggressiveness and future behaviour of prostate cancers. The new method uses images from routine scans that are then analysed by computer to uncover disease characteristics may not be seen by the naked eye. This may lead to more informed personalised treatment decisions for men with prostate cancer, and may reduce traditional invasive biopsies. **(Research and Development)**

Prison healthcare: PHA was involved in the development of an action plan that followed the launch of the 'Improving Health within Criminal Justice' strategy in June 2019. The aim was to ensure that young people and adults in contact with the criminal justice system are healthier, safer and less likely to be involved in offending behaviour. One action this year has been a nurse-led pathfinder

<p>Persons of different genders and gender identities</p>	<p>exercise to transform the police custody healthcare programme. The next steps have focused on co-developing a joint business case with the Police Service of Northern Ireland (PSNI) for a regional roll-out of the model. (Nursing)</p> <p>This year, work was commenced (by BSO Human Resources on our behalf) to develop a Domestic Violence Policy to better support staff working in the PHA and the other regional HSC organisations. Given that domestic violence disproportionately affects women this will have an important impact on our workforce, which is predominately female.</p>
<p>Persons with and without a disability</p>	<p>This year, we sought the views and experiences of individuals with a learning disability and their carers or family members who had used the Regional HSC Hospital Passport. The aim of this was to try to see what was working well in the scheme, and what users thought needed to be improved. Users of the scheme were heavily involved in this engagement exercise. (Nursing)</p> <p>Developed alongside people with diabetes living in the border regions, the BRAIN (Border Region Area Lifestyle Intervention) Diabetes health intervention aims to develop a healthy brain lifestyle programme. To prevent cognitive/memory impairment and dementia in people with Type 2 Diabetes, the programme includes exercise, diet, brain (cognitive) training and management of vascular risks, e.g. high blood pressure. (Research and Development)</p> <p>During this last year, the ReFLECTs trial was funded using mirror box therapy with sub-acute stroke patients. It is thought that mirror visual feedback can regenerate networks in the brain that control limbs and encourage the return of movement. In mirror therapy, the participant performs activities with their unaffected limb but because of the reflective surface on the box, it appears as</p>

<p>Persons with and without a disability</p>	<p>though their affected limb is moving. (Research and Development)</p> <p>Researchers from both sides of the Irish border joined together in a large trial to see if an inexpensive medication, already used to treat other conditions, could help prevent those who have already had a stroke from having a further stroke. The CONVINCE study will recruit around 200 more stroke and Transient Ischemic Attack (TIA) (also known as mini-stroke) survivors living in border areas to find out whether colchicine – a medication typically used to treat gout – could help reduce the risk of further strokes. (Research and Development)</p> <p>Funding has been awarded to procure and develop a new application (app) to support people with dementia. InspiredD, which has been developed by Scaffold Digital in partnership with Ulster University, the Public Health Agency (PHA) and Health and Social Care NI (HSCNI), is designed to help people living with dementia and their carers to store photographs, music and film clips which can then be used to prompt conversations about past experiences and important life events. (Research and Development)</p> <p>The Community Pharmacy Living Well Campaign was jointly launched by the Health and Social Care Board (HSCB) and Community Pharmacy NI (CPNI). The PHA designed campaign materials, and over 500 community pharmacies were contracted to deliver campaigns on a range of health issues including “care in the sun”. This enabled people who had early signs of skin cancer given advice, conditions treated or people referred. (Communications and Knowledge Management)</p> <p>All PHA communications staff attended training on disability awareness. This focused on raising awareness of the needs of people with learning disabilities,</p>
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<p>Persons with and without a disability</p>	<p>and how to produce materials in accessible formats. (Communications and Knowledge Management)</p> <p>A number of publications in an easy read format were produced for people with learning disabilities. Information on breast screening, and a letter inviting people with a learning disability to take part in a pilot breast screening project was produced during the year. (Communications and Knowledge Management with Nursing)</p> <p>I can cook it, the community nutrition programme that had been adapted for use with people with learning disabilities, was updated and reprinted following feedback from the tutors gathered during the delivery of the programme. (Communications and Knowledge Management)</p> <p>The Swallow Aware project is led by the PHA working closely with statutory, independent, regulatory and community and voluntary sectors with the aim of developing services for people living with dysphagia in Northern Ireland. Swallow Aware helps people with swallowing difficulties, and their carers to share their unique perspective and co-design materials and resources to support people with dysphasia in NI (Allied Health Professionals and PPI)</p> <p>As part of Palliative Care Week, the Palliative Care in Partnership programme held a conference to show progress made to date on improving the experiences of people with palliative care needs and to set out priorities for the years ahead to continue to enhance and improve these services. The conference also highlighted the importance of planning for the future with the launch of the 'Heart of Living and Dying' facilitators' guide. (Nursing and AHP)</p> <p>Support has been provided for an intervention to support older adults with a</p>
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<p>Persons with and without a disability</p>	<p>learning disability to improve their health, wellbeing and social networks. This will involve matching older adults with a learning difficulty to “mentors” with whom they will attend mainstream community groups and activities. The impact on the health, wellbeing and social connectedness of the adults, and the wellbeing and attitudes to people with LD of the mentors will be assessed. (Research and Development)</p> <p>Encouraging recruitment agencies to promote equality of opportunity: the audit (see p.7-8 for further information) specifically focused on how agencies made reasonable adjustments for candidates with disabilities. This looked at agencies’ attitudes towards reasonable adjustments, and the steps taken by recruitment agencies to ensure that reasonable adjustments were made and reviewed on a regular basis. The aim of this work was to raise the profile of the issue with recruitment agencies. In turn, the intended outcome is to contribute to identifying and seeking to better meet the needs of candidates with a disability.</p> <p>Disability Placement Scheme: After engaging with participants, regional HSC placement managers and employment support officers involved in the scheme, it was decided to include details of the office environment for future placements. Descriptions include the level or floor the office is on; if it is a large open plan or small office; the size of team they will be working with etc. This helps participants and employment support officers make an initial decision on whether the placement would be a good match as some of these environments may not suit some people with certain disabilities. In turn, this has contributed to reducing the number of placements ended prematurely due to unmet expectations.</p> <p>Please note: Our work on promoting equality for people with a disability in the</p>
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	<p>workplace is reported on in detail in the Disability Action Plan – Progress Report 2019-20. This comprises, for example, our Disability Work Placement Scheme; Tapestry, our Disability Staff Network; and our Disability Awareness Days for staff.</p>
<p>Persons with and without dependants</p>	<p>A compendium of monitoring data and statistics on breast feeding for the public and health professionals was published this year. This aims to support the development of strategies, programmes and action plans to promote the health and wellbeing of mothers and babies through breastfeeding. (Communication and Knowledge Management)</p> <p>A leaflet explaining the Special Educational Needs (SEN) statutory assessment process was designed. Working in collaboration with SEN Coordinators in the HSC Trusts, and the Education Authority, this explained clearly to parents and carers the processes used to see if a child was deemed to have Special Educational Needs and given a Statutory Statement. (Communications Team, and Allied Health Professionals and Personal and Public Involvement)</p> <p>The Healthy Child, Healthy Future: speech and language therapy for children resource for parents/ carers was updated in 2019. This is designed to reinforce a collaborative approach between parents and health professionals, and help identify and support children with developmental speech and language and communication needs (including children with feeding and/or swallowing difficulties). It provides details on the communication-related skills a child should have acquired at each stage in his/her early years development (Nursing and AHP)</p> <p>Forest School Families was developed as part of the Learning Without Walls initiative. This encourages families to take regular walks, and simple and fun</p>

<p>Persons with and without dependants</p>	<p>activities in their local park or greenspace, as this has been shown to have a range of health benefits. In 2019-20, 45 new Forest School Families registered in the scheme. (Health Improvement)</p> <p>In December 2019, the PHA highlighted safer sleeping advice for parents at Christmas to reduce the risk of sudden infant death. It was highlighted that at this time of year, with festivities and celebrations, the normal routines and sleeping arrangements for young babies may be changed. A number of hints and tips on promoting safer sleep for babies were highlighted. The campaign to raise parents' and carers' awareness of risk factors was evaluated. A higher level of awareness of the risk factors for co-sleeping with a baby was found amongst those who had seen the campaign. (Nursing and Communication and Knowledge Management)</p> <p>Carers in the Workplace (work carried out under our Equality Action Plan) As part of a qualitative research project, a group of BSO staff who are carers were interviewed on their views on balancing work and caring responsibilities. The themes and issues emerging from these interviews were used to inform questions for a baseline survey to capture the experiences of carers in all regional HSC organisations. The results from this survey will help to inform work to progress our commitment to support staff who are carers.</p> <p>On our behalf, the Equality Unit developed a carers leaflet outlining the definition of a carer, the background to why this leaflet was needed and a list of all policies and procedures available for carers as well as a description of each. The leaflet also provides signposting to other resources and forms of support including Inspire and information on carers assessments. This will help inform staff and</p>
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	managers about what support is available to ensure a consistent and supportive approach. This has been published on the Tapestry Disability Staff Network website and will be heavily promoted in the coming year.
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Where changes resulted from screenings, these will be listed in Chapter 6, the mitigation report.

The following changes resulted from EQIAs:

Northern Ireland Diabetic Eye Screening Programme (DESP) EQIA:

- Model of service delivery: EQIA findings recommended that screening is delivered at fixed sites throughout Northern Ireland. The Diabetic Eye Screening Programme (DESP) Regional Centre is based in Forster Green Hospital, but screening is carried out across Northern Ireland at GP practices and static sites. In practice sites are determined by availability and feasibility of implementation, recognising that access to timely screening is a key requirement for the DESP.
- Future planning considerations: Accessibility, car parking and public transport links are consistently high ranking criteria for respondents with co-location of services and extended hours of opening appearing relatively less important. These key factors will be considered when determining screening sites.

(ECNI Q4,5,6)

2. During the 2019-20 reporting period

(a) were the Section 75 statutory duties integrated within...?

	Yes/No	Details
Job descriptions	Yes	The new template for Job Descriptions and Personnel Specifications used across Health and Social Care no longer makes reference to the Section 75 duties.
Performance objectives for staff	No	In some cases, individual PHA Directorates may decide to include relevant objectives.

(b) were objectives and targets relating to Section 75 integrated into...?

	Yes/No	Details
Corporate/strategic plans	Yes	<p>The PHA Corporate Plan 2017-2021 includes five key outcomes. Two of these relate directly to Section 75 groups:</p> <ol style="list-style-type: none">1. All children and young people have the best start in life <p>Associated actions include, for example: Introduce and develop antenatal and new-born population screening programmes in line with the recommendations of the national and local screening committees</p> <ol style="list-style-type: none">2. All older adults are enabled to live healthier and more fulfilling lives

		<p>Associated actions include, for example: Develop and implement multi-agency healthy ageing programmes to engage with and improve the health and wellbeing of older people</p>
Annual business plans	Yes	<p>In the Business Plan for 2019-20, the Agency specified a range of objectives directly related to promoting equality and good relations for Section 75 groups. For example:</p> <ul style="list-style-type: none"> • Implement expansion of the Newborn Bloodspot Screening Programme to cover four additional inherited metabolic diseases. • Use research funding programmes (CHITIN, NIHR, commissioned research, Research Fellowships etc) to generate new knowledge on effective care and practice for older adults. • Continue to lead work with HSC Board and Trusts to complete the delivery of Phase Two of the Dementia e-Health and Data Analytics Pathfinder Programme for Northern Ireland including: <ul style="list-style-type: none"> - the implementation of 'My care record' patient portal - delivery of a dementia apps library - a number of dementia data analytics projects. • Lead the implementation of an integrated Communication Advice Service • Undertake an improvement project in relation to mixed gender accommodation and work with Trusts to measure and report compliance with their policy for mixed gender accommodation in 100% of inpatient areas.

(ECNI Q11,12,17)

3. Please provide any details and examples of good practice in consultation during the 2019-20 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:

Please see Table 2 below.

Table 2

Policy publicly consulted on	What equality document did you issue alongside the policy consultation document?	Which Section 75 groups did you consult with?	What consultation methods did you use? AND Which of these drew the greatest number of responses from consultees?	Do you have any comments on your experience of this consultation?
Make It Public research transparency strategy consultation	<input type="checkbox"/> Screening template <input type="checkbox"/> EQIA report		<ul style="list-style-type: none"> • Written responses • Online responses • Public 	This was a UK consultation by the Health Research Authority (HRA), with regional support from the R&D office. The consultation reached all Section 75 groupings: 489

Policy publicly consulted on	What equality document did you issue alongside the policy consultation document?	Which Section 75 groups did you consult with?	What consultation methods did you use? AND Which of these drew the greatest number of responses from consultees?	Do you have any comments on your experience of this consultation?
	<input checked="" type="checkbox"/> none		workshop	<p>responses (including emailed responses) were received, and 236 people attended the UK-wide consultation workshops, a public involvement focus group, a Research Ethics Committee (REC) member's webinar or HRA staff workshops.</p> <p>An Equality Report was conducted for the NI workshop. 36 individuals attended and 19 completed the equality questionnaire,</p>

Policy publicly consulted on	What equality document did you issue alongside the policy consultation document?	Which Section 75 groups did you consult with?	What consultation methods did you use? AND Which of these drew the greatest number of responses from consultees?	Do you have any comments on your experience of this consultation?
				which collected Section 75 monitoring information.
Relationships and Sexuality Education (RSE) in the Community	<input type="checkbox"/> Screening template <input type="checkbox"/> EQIA report <input checked="" type="checkbox"/> none	Parents/ carers; young people; and community/voluntary organisations	2 consultation events: 1 in Belfast and 1 in Omagh.	The Public Health Agency (PHA) sought feedback from young people, parents and community/voluntary organisations that have accessed the existing RSE programmes funded by the PHA in the community, including service users (young people), youth leaders and organisations providing services for young people.

Policy publicly consulted on	What equality document did you issue alongside the policy consultation document?	Which Section 75 groups did you consult with?	What consultation methods did you use? AND Which of these drew the greatest number of responses from consultees?	Do you have any comments on your experience of this consultation?
				We also sought the views of providing organisations with expertise in developing and delivering RSE in the community.
Draft Mental and Emotional Health and Wellbeing and Suicide Prevention Training Framework	<input type="checkbox"/> Screening template <input type="checkbox"/> EQIA report <input checked="" type="checkbox"/> none		11 face to face consultation events as part of the Protect Life 2 consultation process. Online survey monkey	Feedback was requested on the draft training framework to ensure it would be fit for purpose for all living and working in Northern Ireland. Specific Section 75 responses received from Autism NI, the Deaf community; Travellers and

Policy publicly consulted on	What equality document did you issue alongside the policy consultation document?	Which Section 75 groups did you consult with?	What consultation methods did you use? AND Which of these drew the greatest number of responses from consultees?	Do you have any comments on your experience of this consultation?
			consultation Sept 19 – Jan 20. The survey was active for 16 weeks, and completed by 103 respondents from a variety of backgrounds and professions.	Learning Disability Lead. Useful feedback has been received via online survey.

(ECNI Q21, 26)

4. In analysing monitoring information gathered, was any action taken to change/review any policies?

Yes - please see Table 3 below for further information.

Table 3

Service or Policy	What equality monitoring information did you collect and analyse?	What action did you take as a result of this analysis? AND Did you make any changes to the service or policy as a result?	What difference did this make for Section 75 groups?
Regional HSC Organisations - Disability Placement Scheme	Qualitative data was collected via a series of focus groups alongside experience of the scheme (specifically focusing on access to the scheme/ experience of the work placement/ outcome of the placement scheme).	Results from the analysis revealed that individuals with particular disabilities needed more information on the working environment than was currently being provided in order for them to make an informed choice as to whether the placement offered was acceptable.	Individuals with specific disabilities, including those with mental health or sensory disabilities, are now more informed as to the office environment, which may help them decide whether a potential placement is suitable or not. In turn, this should lead to improved matching and a reduced risk of placements not going ahead due to

Service or Policy	What equality monitoring information did you collect and analyse?	What action did you take as a result of this analysis? AND Did you make any changes to the service or policy as a result?	What difference did this make for Section 75 groups?
		As a result, descriptions of the office environment have now been included in all placement descriptions so that it is immediately apparent whether the office is noisy/ quiet; busy/ calm; number of people, in addition to accessibility issues.	unsuitable matching.
HSC Research and Development Personal and Public Involvement (PPI) Strategy	Analysis of equality information collected following workshops and events including Building Research Partnerships has been regularly reviewed.	Efforts were made to increase the reach of our training, workshops and events by targeting groups which were not being represented via NICVA and the Patient	This information has helped alert us to the under representation of certain groups at our events and increase our efforts to target these groups. Work with BAME groups in the next year

Service or Policy	What equality monitoring information did you collect and analyse?	What action did you take as a result of this analysis? AND Did you make any changes to the service or policy as a result?	What difference did this make for Section 75 groups?
		Client Council.	should help address some of these issues.

(ECNI Q22)

5. Please provide any details or examples of where the monitoring of policies, during the 2019-20 reporting period, has shown changes to differential/adverse impacts previously assessed:

Yes - please see Table 4 below for further information.

Table 4

Policy previously screened or EQIAed	Did you gather and analyse any equality monitoring information during 2019-20? (Please tick)	What were the adverse impacts at the point of screening or EQIA?	What changes to these occurred in 2019-20, as indicated by the equality monitoring data you gathered?
PHA Corporate Plan 2017-2021	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	N/A	N/A
PHA Annual Business Plan 2019-20	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	N/A	N/A
Personal and Public Involvement Strategy	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	We recognise that those with dependants, and those with a disability may struggle to participate in PPI activity and have considered this in the development of the strategy. There may be language and	N/A

		cultural barriers for ethnic minorities in PPI activity. Sexual minorities may also be less likely to participate due to homophobia or heterosexism.	
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(ECNI Q25)

6. 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:

The PHA avails of the joint Section 75 training programme that is coordinated and delivered by the BSO Equality Unit for staff across all 11 partner organisations. The following statistics thus relate to the evaluations undertaken by all participants for the training.

Screening Training Evaluations

The figures in bold below represent the percentage of participants who selected 'Very Well' or 'Well'. Participants were asked: "Overall how well do you think the course met its aims":

- To develop an understanding of the statutory requirements for screening: **98%**
- To develop an understanding of the benefits of screening: **95%**
- To develop an understanding of the screening process: **95%**
- To develop skills in practically carrying out screening: **95%**

The figure in bold below represents the percentage of participants who selected 'Extremely Valuable' or 'Valuable' when asked: "How valuable was the course to you personally?" **92%**

EQIA Training Evaluations

Participants were asked: "Overall how well do you think you have achieved the following learning outcomes":

- To demonstrate an understanding of what the law says on EQIAs **96%**
- To demonstrate an understanding of the EQIA process **96%**
- To demonstrate an understanding of the benefits of EQIAs **93%**

- To develop skills in practically carrying out EQIAs **96%**

The figures in bold represents the percentage of participants who selected 'Very well' or 'Well'.

Conclusion

Evaluations of both the screening and the EQIA training for 2019-20 continue to be very positive, as has been the case over recent years. The scores of **95% - 98%** and **93% - 96%** are significantly high and so the training will continue in its current format in next year's programme.

(ECNI Q29)

7. Are there areas of the Equality Scheme arrangements (screening/consultation/training) your organisation anticipates will be focused upon in the next reporting period?

We anticipate the following areas to be focused upon:

- equality screenings and their timely publication;
- inclusion of screening documentation in all public consultation exercises;
- progression of EQIAs to consultation stage;
- monitoring, including of policies screened, and;
- engagement with Section 75 groups as part of pre-consultation exercises and collection of equality information by this means.

A further priority relates to ensuring the integration of references to the equality and disability duties in all job descriptions.

Appendix – Further Explanatory Notes

1 Consultation and Engagement

(ECNI Q10)

targeting

During the year, where relevant, we took a targeted approach to consultation in addition to issuing an initial notification of consultation. Moreover, we engaged with targeted groups as part of our work preceding formal consultations, as for instance, in the case of Make It Public research transparency strategy consultation. This is to inform our consultation documents.

(ECNI Q13)

awareness raising for consultees on Equality Scheme commitments – During the year, in our quarterly screening reports we raised awareness as to our commitments relating to equality screenings and their publication. In any EQIA reports we explained our commitments relating to Equality Impact Assessments. We likewise refer to our Equality Scheme commitments in the Equality and Disability Action Plan documents.

(ECNI Q14)

consultation list – During the year, we reviewed our consultation list every quarter.

2 Audit of Information Systems

(ECNI Q20)

We completed an audit of information systems at an early stage of our Equality Scheme implementation, in line with our Scheme commitments.

ⁱ This includes as a result of

- screening / Equality Impact Assessments (EQIAs)
- monitoring
- staff training
- engagement and consultation
- improvements in access to information and services
- implementation of Equality and Disability Action Plans.