

Equality, Good Relations, and Human Rights Screening Template

*****Completed Screening Templates are public documents and will be posted on the Trust's website*****

See 'Equality, Good Relations and Human Rights Screening Guidance Notes' (on SharePoint) for further background information on the relevant legislation and for help in answering the questions on this template.

(1) Information about the Policy/Proposal

(1.1) Name of the policy/proposal
Chaperone Policy
(1.2) Is this a new, existing, or revised policy/proposal?
New
(1.3) What is it trying to achieve (intended aims/outcomes)?
To ensure service users' safety, privacy and dignity is protected during any clinical intervention that involves an intimate examination or procedure.
To minimise the risk of a clinician's actions being misinterpreted, thereby ensuring the clinicians' safety with any clinical intervention that involves an intimate examination or procedure.
To ensure a standardised approach when using chaperones during intimate examinations or procedures.
To ensure that staff, (including locum, bank, and agency staff) understand the rights of all service users when undertaking intimate examinations and procedures. (Appendix 2)
To ensure that service users should have the opportunity to refuse to allow any students to observe and/or undertake any intimate examinations/procedures /consultations.
To reiterate the pivotal requirement for the service users' informed consent /agreement to be sought prior to any examination and that a record of the conversation and consent obtained is completed.

To emphasise the necessity for the Trust policy on obtaining informed consent for examination, treatment or care in adults and children is adhered to at all times.

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

All Section 75 categories should benefit from this policy. It is good practice to offer service users a chaperone for any consultation, examination, procedure or treatment where the service user feels one is required.

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

The Southern Health and Social Service Care Trust

(1.6) Are there any factors that could contribute to/detract from the intended aim/outcome of the policy/proposal/decision? (Financial, legislative or other constraints?)

Staff not being aware of the Policy

(1.7) Who are the internal and external stakeholders (actual or potential) that the policy/proposal/decision could impact upon? (E.g. staff, service users, other public sector organisations, trade unions, professional bodies, independent sector, voluntary and community groups etc.)

Service Users/ Staff/ Professional Organisations/ Trade Unions/Students

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

- Consent to Examination and Treatment
- Lone Worker Policies and associated SGN 114 Safety Guidance
- Raising a Concern - Whistleblowing Policy
- The Mental Capacity Act NI (2016)
- Safeguarding Children Policy and Procedures

- The Adult Safeguarding Policy and Procedures
- Incident reporting
- Confidentiality and Data Protection Policy
- Infection Prevention and Control
- Promoting Equality, Valuing Diversity and Protecting Human Rights
- The Chartered Society of Physiotherapy (August 2023). Information Paper: Physiotherapy Practice and the use of Chaperones.
- General Medical Council. Professional Standards for Doctors
- General Medical Council (January 2024) Intimate Examinations and Chaperones
- Nursing and Midwifery Council (NMC) (2018). The Code: Professional Standards of Practice and Behaviour for Nurses, Midwives and Nursing Associates
- Society of Radiographers (May 2023) Intimate Examinations and Chaperone Policy 3rd Edition.
- Chaperones in Emergency Departments the Royal College of Emergency Medicine Best Practice Guidelines (March 2015)
- Royal College of Nursing (6 November 2023). Genital examination in women
- Royal College of Nursing (2002). Chaperoning: The Role of The Nurse and The Rights of Patients. London (Reprinted in 2006).

(2) Available evidence

Evidence to help inform the screening process may take many forms. What evidence/information (both qualitative and quantitative) have you gathered to inform this policy?

NB: Specify the details for each of the Section 75 categories for any staff affected, the Trust Workforce, any patients/clients affected and the Trust general population in the following tables.

2.2 Composition of Southern Trust Workforce

Section 75 Group	Southern Trust Workforce Profile as at 1 January 2024	Percentage
Gender	Female	85.1%
	Male	14.9%
Religion	Protestant	34.2%
	Roman Catholic	56.6%
	Neither	9.6%
Political Opinion	Broadly Unionist	9.1%
	Broadly Nationalist	9.8%
	Other	7.6%
	Do Not Wish to Answer/Not Know	73.6%
Age	16-24	8.1%
	25-34	23.3%
	35-44	27.2%
	45-54	20.6%
	55-64	17.2%
	65+	3.7%
Marital Status	Single	32.5%
	Married	55.8%
	Not Known	11.7%
Dependent Status	Caring for a Child/Children / Dependant Older Person / Person with a Disability	15.3%
	None	31.2%
	Not Known	53.5%
Disability	Yes	2.5%
	No	73.9%
	Not Known	23.6%
Ethnicity	Bangladeshi	0.01%
	Black African	0.36%
	Black Caribbean	0.01%
	Black Other	0.03%
	Chinese	0.09%
	Filipino	0.54%
	Indian	1.06%
	Irish Traveller	0.02%
	Mixed Ethnic	0.16%
	Pakistani	0.15%
	White	74.29%
	Not Known	23.15%
Sexual Orientation towards:	Opposite Sex	57.2%
	Same Sex	1.1%
	Same and Opposite Sex	0.3%
	Do Not Wish to Answer/Not Know	41.4%

2.3 Patients / Clients Affected - 2.4 Southern Trust's Area Population Profile – Census 2021

(NB: in some instances, you may need to be more specific and use local District Council areas – please contact the Equality Unit on 028 375 64152).

This policy applies to all services users within the Southern Trust area.

Section 75 Group	Trust's Area Population Profile (Population of 358,034)	Percentage
Gender	Female	50.02
	Male	49.8
Religion	Protestant	35.05
	Roman Catholic	57.0
	Other	7.5
Political Opinion	Not collected	
Age	0-15	22.5
	16-24	10.2
	25-44	26.5
	45-64	25.2
	65-84	13.8
	85+	1.8
Marital Status (Aged 16+ years)	Single	28.1
	Married/Civil Partnership	37.7
	Other	34.2
Dependent Status	Caring for a Child/Children/Dependant Older Person/Person(s) With a Disability	25.8% care for a dependent child/ child
Disability	Yes	21.8
	No	78.2
Ethnicity	Asian Other	0.4
	Bangladeshi	0
	Black African	0.4
	Black Caribbean	0
	Black Other	0.4
	Chinese	0.3
	Filipino	0.1
	Indian	0.2
	Irish Traveller	0.3
	Mixed Ethnic Group	0.8
	Arab	0.1
	Roma	0.1
	Other	0.2
	Pakistani	0.1
	White	96.5
Sexual Orientation	Heterosexual	69.8
	LGBTQ+	1.1
	Not Stated	29.1

(3) Needs, experiences and priorities

- (3.1) Taking into account the information above what are the different needs, experiences and priorities of each of the Section 75 categories and for both service users and staff. **(NB: Use relevant statistical and qualitative data to complete the table below)**

Section 75 Category	Details of Needs, Experiences and Priorities	
	Staff	Service Users
Gender	Ability to request the presence of a colleague or chaperone, if required	Access to provision of a chaperone, or 3 rd person if required.
Age	Ability to request the presence of a colleague or chaperone, if required	Access to provision of a chaperone, or 3 rd person if required.
Religion	Ability to request the presence of a colleague or chaperone, if required	Access to provision of a chaperone, or 3 rd person if required.
Political Opinion	Ability to request the presence of a colleague or chaperone, if required	Access to provision of a chaperone, or 3 rd person if required.
Marital Status	Ability to request the presence of a colleague or chaperone, if required	Access to provision of a chaperone, or 3 rd person if required.
Dependent Status	Ability to request the presence of a colleague or chaperone, if required	Access to provision of a chaperone, or 3 rd person if required.
Disability	Ability to request the presence of a colleague or chaperone, if required	Access to provision of a chaperone, or 3 rd person if required.
Ethnicity	Ability to request the presence of a colleague or chaperone, if required	Access to provision of a chaperone, or 3 rd person if required. Staff should be sensitive to cultural differences and what may constitute as an intimate examination or procedure in different cultures.
Sexual Orientation	Ability to request the presence of a colleague or chaperone, if required	Access to provision of a chaperone, or 3 rd person if required.

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

Reviewed by Senior Trust staff.

(4) Screening Questions

You now have to assess whether the impact of the policy/proposal is major, minor or none. You will need to make an informed judgement based on the information you have gathered.

(4.1) What is the likely impact of equality of opportunity for those affected by this policy/proposal, for each of the Section 75 equality categories?			
Section 75 category	Details of policy/proposal impact		Level of impact? Minor/major/none
	Staff	Service Users	
Gender	This policy is intended to safeguard all service users and staff, genders, and race, from misinterpretation of actions taken as part of a consultation, examination, treatment and care.	This policy is intended to safeguard all service users and staff, from misinterpretation of actions taken as part of a consultation, examination, treatment and care. It provides access to	x
Age	As above	As above	x
Religion	As above	As above	x
Political Opinion	As above	As above	x
Marital Status	As above	As above	x
Dependent Status	As above	As above	x
Disability	As above	As above	x
Ethnicity	As above	As above	x
Sexual Orientation	As above	As above	x

(4.2) Are there opportunities to better promote equality of opportunity for people within Section 75 equality categories?	
Section 75 category	Please provide details
Gender	No-just good practice
Age	No-just good practice

(4.2) Are there opportunities to better promote equality of opportunity for people within Section 75 equality categories?	
Section 75 category	Please provide details
Religion	No-just good practice
Political Opinion	No-just good practice
Marital Status	No-just good practice
Dependent Status	No-just good practice
Disability	No, just good practice
Ethnicity	No, just good practice
Sexual Orientation	No, just good practice

(4.3) To what extent is the policy/proposal likely to impact on good relations between people of different religious belief, political opinion, or racial group? minor/major/none		
Good relations category	Details of policy/proposal impact	Level of impact Minor/major/none
Religious belief	Provision of the offer to have a chaperone present, if required/requested	None
Political opinion	As above	None
Racial group	As above	None

(4.4) Are there opportunities to better promote good relations between people of different religious belief, political opinion, or racial group?	
Good relations category	Please provide details
Religious belief	No
Political opinion	No

Racial group	No
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(5) Consideration of Disability Duties

(5.1) How does the policy/proposal encourage disabled people to participate in public life and promote positive attitudes towards disabled people?
Treating all service users equally to have the opportunity of a chaperone should they wish to have one.

(6) Consideration of Human Rights

The Trust has a duty to act compatibly and must take Human Rights considerations into account in its day-to-day functions/activities.

(6.1) How does the policy/proposal impact on Human Rights?
 Complete for each of the articles

Article	Positive impact	Negative impact = human right interfered with or restricted	Neutral impact
Article 2 – Right to life			x
Article 3 – Right to freedom from torture, inhuman or degrading treatment or punishment	x		
Article 4 – Right to freedom from slavery, servitude & forced or compulsory labour			x
Article 5 – Right to liberty & security of person			x
Article 6 – Right to a fair & public trial within a reasonable time			x
Article 7 – Right to freedom from retrospective criminal law & no punishment without law			x
Article 8 – Right to respect for private & family life, home, and correspondence.	x		
Article 9 – Right to freedom of thought, conscience & religion			x
Article 10 – Right to freedom of expression			x
Article 11 – Right to freedom of assembly & association			x
Article 12 – Right to marry & found a family			x

Article	Positive impact	Negative impact = human right interfered with or restricted	Neutral impact
Article 14 – Prohibition of discrimination in the enjoyment of the convention rights			x
1st protocol Article 1 – Right to a peaceful enjoyment of possessions & protection of property			x
1st protocol Article 2 – Right of access to education			x

Please note: If you have identified potential negative impact in relation to any of the Articles in the table above, speak to your line manager and/or Equality Unit on tel: 028 375 64151. It may also be necessary to seek legal advice.

(6.2) Please outline any actions you will take to promote awareness of human rights and evidence that human rights have been taken into consideration in decision making processes.

This policy has been considered under the terms of the Human Rights Act, 1998, and was deemed compatible with the European Convention of Human Rights contained in that Act.

Ongoing Human Rights Awareness Training and staff completion of ‘Making a Difference’ – Equality, Good Relations and Human Right e-learning training. Considering human rights aspects as an integral part of the Trust’s decision-making processes, policy development and service design/reconfiguration.

(7) Screening Decision

- (7.1) Given the answers in Section 4 of this template, how would you categorise the impacts of this decision or policy/proposal? *(Please tick one option below and list your reasons for the decision in 7.2 below)*

Major impact		EQIA Required? <i>(Delete as appropriate)</i>	
			No

Minor impact	✓ positive	Mitigation Required	Alternative Policy Required
		No	No

No impact		Screened Out
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- (7.2) Please give reasons for your decision and detail any mitigation or alternative policies considered.

The Trust has a responsibility to act in the best interests and maintain the safety of all service users accessing health, social care, and services within its area. This policy is intended to safeguard service users and ensure that privacy and dignity is given high regard when treatment involves intimate or other examinations. The policy also serves to reduce the likelihood of service users misinterpreting actions taken by staff, as part of consultation, examination, treatment, and care.

- (7.3) Do you consider the policy/proposal needs to be subjected to ongoing screening? NB: for strategies/policies that are to be put in place through a series of stages – screen at various stages during implementation.

Yes	
No	✓

(8) Monitoring

(8.1) Please detail how you will monitor the effect of the policy/proposal for equality of opportunity and good relations, disability duties and human rights?

- This policy will be reviewed in three years or sooner if required.
- Individual directorates/service areas should provide local guidance for their staff including the use of risk assessments and plans of care.

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Date: 16/01/2025

Policy/proposal screened by: Susan Sandford

Please forward completed screening template to Equality.Unit@southerntrust.hscni.net for inclusion in the Trust's Policy Screening Reports which are uploaded to the Trust's website.