

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

Policy on the Use of Bed Rails for Inpatient and Community Settings.

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

Revised Policy

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

Purpose and Aims

- To ensure efficient and effective assessment and management of the use of bed rails.
- To avoid serious harm when using bed rails such as entrapment/ entanglement.
- To safely manage the use of bed rails including the management of incidents.

Objectives of this policy

The policy objectives include:

- To ensure that bed rails are used safely to reduce falls risk and harm from falls.
- To reduce the risk for service users from rolling out of bed.
- To ensure that bed rails are used safely so that no entrapment/entanglement or death occurs as a result of unsafe bed rail use.
- To ensure that bed rails are correctly assessed and risk managed for each individual.
- To support staff, service users and carers to make individual decisions around the risks of using or not using bed rails.
- To ensure the use of bed rails are regularly reviewed.
- To ensure compliance with the statutory guidance on use of bed rails.
- To ensure that Trust addresses actions within MHRA alert and associated guidance
- [MHRA Bedrail safety alert Aug 23.pdf](#)

Scope Of The Policy

- Clarify the responsibilities of the prescribing practitioner to carry out a bedrail risk assessment.
- Support staff to make individual decisions around the risks and benefits of using and/or not using bedrails
- Reduce harm to service users caused by: falling from bed, inappropriate prescribing/use of bedrails and incorrectly positioned/attached bedrails and entrapment.
- Identify alternatives that should be taken when bedrails are deemed not appropriate.
- Implement a co-ordinated approach to comply with the MHRA bed rails: Management and Safe Use Guidance (2023)

This policy provides Trust-wide principles and minimum safety requirements for the use of bedrails. Each Directorate must ensure that any directorate-specific guidance, procedures or pathways relating to bedrail use are aligned with this policy and MHRA guidance. Where local guidance exists, staff must follow both this Trust policy and their Directorate's approved guidance.

This policy applies to all inpatient and community care settings where Trust-owned or Trust-approved beds and bedrails are used.

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

This clinical policy will apply equally to all S75 categories. However, it is more likely to benefit older people and persons with a disability

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

The SHSCT is responsible for the implementation / operation of this policy. The policy is based upon regional guidance (see section 1.8)

(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?)

Factors For:

- Compliance with the Human Rights Act (1998), specifically Articles 3 (freedom from inhuman or degrading treatment) and 5 (right to liberty and security), and the Mental Capacity Act (NI) 2016.
- Staff training in human rights principles to support the appropriate and consistent practical application of the policy.

Factors Against:

- The risk of staff non-compliance with the policy, which may impact effective implementation.

(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.)

Health & Social Care Staff, agency staff, patients and service users. HSC Trust Management. Trade Unions.

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

- Prevention, Reduction and Management of falls in the Southern Health & Social Care Trust
- Moving and Handling of Plus size Person's policy, SHSCT, 2022
- Moving and Handling Policy SHSCT
- Risk Management Policy, SHSCT
- World Health Organisation WHO – January 2018
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) Policy 2018 (TP 42/08)
- Medicines & Healthcare products Regulatory Agency, Guidance, Bed rails: management and safe use. Guidance on managing and using bed rails safely. Published 30 August 2023
- Medicine & Healthcare Product Regulatory Agency, National Patient Safety Alert Aug 23 Ref No: NATPSA/2023/010/MHRA [National Patient Safety Alert 2023](#)
- Mental Capacity Act (NI) 2016 [Mental Capacity Act \(NI\) 2016](#)
- Mental Capacity Act Deprivation of Liberty Safeguards Code of Practice – November 2019 <https://www.health-ni.gov.uk/sites/default/files/publications/health/mca-dols-cop-november-2019.pdf>
- National Patient Safety www.npsa.nhs.uk Agency (2007) *Slips, trips and falls in*

hospital:

- Never Events list 2018. London; 2018. [2018-Never-Events-List-updated-February-2021.pdf \(england.nhs.uk\)](#)
- National Patient Safety Agency, Signal Report: *The safe use of ultra-low beds* (Feb 2011)¹

(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? .

2.1 Staff Affected by this Policy/Proposal/ 2.2 Composition of Southern Trust Workforce - This policy will affect all SHSCT staff

Section 75 Group	Southern Trust Workforce Profile as at 1 January 2026	Percentage
Gender	Female	85.4%
	Male	14.6%
Religion	Protestant	33.9%
	Roman Catholic	55.9%
	Neither	10.2%
Political Opinion	Broadly Unionist	8.9%
	Broadly Nationalist	9.9%
	Other	7.2%
	Do Not Wish To Answer/Not Known	74%
Age	16-24	6.6%
	25-34	22.7%
	35-44	28%
	45-54	21.1%
	55-64	17.5%
	65+	4.1%
Marital Status	Single	32.1%
	Married	55.9%
	Not Known	12%
Dependent Status	Caring for a Child/Children / Dependant Older Person / Person With a Disability	13.8%
	None	31.9%
	Not Known	54.3%
Disability	Yes	2.8%
	No	73.3%
	Not Known	23.9%
Ethnicity	Bangladeshi	0.01%
	Black African	0.56%
	Black Caribbean	0.01%
	Black Other	0.03%
	Chinese	0.08%
	Filipino	0.55%
	Indian	1.24%
	Irish Traveller	0.01%
	Mixed Ethnic	0.15%
	Pakistani	0.24%
	White	73.5%
Not Known	23.62%	
Sexual Orientation towards:	Opposite Sex	58.3%
	Same Sex	1.2%
	Same and Opposite Sex	0.3%
	Do Not Wish To Answer/Not Known	40.2%

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

This policy is applicable to all service users.

Section 75 Group	Trust's Area Population Profile (Population of 390,973)	Percentage
Gender	Female	50.2
	Male	49.8
Religion	Protestant	35.5
	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 dependent Child/Children	25.8% care for a dependent child/children
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	0.06
	Roma	0.08
	Other	0.2
	Pakistani	0.1
	White	96.5
Sexual Orientation	Heterosexual	69.8
	LGBTQ+	1.1
	Not Stated	29.1

2.5 Northern Ireland Health And Social Care Workforce Key Statistics

According to the 2025 Census figures some key stats for the HSC are:

- The HSC workforce grew by 22% (11,944.8 WTE) between the 2016 and 2025 Censuses.
- The largest employer in the HSC was the Belfast Trust with 21,191 (19,038.9 WTE) staff or 28% of all HSC staff.
- The largest Occupational Family was Nursing & Midwifery with 24,887 (22,269.3 WTE) staff or 33% of all HSC staff.
- Over two thirds (34%, 22,402.2 WTE) of WTE HSC staff were employed at Agenda for Change Bands 1 to 4.
- Over three quarters (78% or 58,354 headcount) of HSC employees were female.

(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	The policy will affect all staff working in the SHSCT. It will not negatively impact on any section 75 group	The policy will be applicable all service users. It will not negatively impact on any section 75 group
Age	As per Gender section above.	As per Gender section above.
Religion	As per Gender section above.	As per Gender section above.
Political Opinion	As per Gender section above.	As per Gender section above.
Marital Status	As per Gender section above.	As per Gender section above.
Dependent Status	As per Gender section above.	As per Gender section above.
Disability	As per Gender section above.	As per Gender section above.
Ethnicity	As per Gender section above.	As per Gender section above.

Section 75 Category	Details of Needs, Experiences and Priorities	
	Staff	Service Users
Sexual Orientation	As per Gender section above.	As per Gender section above.

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

This policy has been updated and reviewed by members of a task and finish group. it was also shared at the Trust Falls Steering group, also disseminated it to other colleagues as required.

All amendments / comments forwarded were reviewed.

(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	None	None	None
Age	None	None	None
Religion	None	None	None
Political Opinion	None	None	None
Marital Status	None	None	None
Dependent Status	None	None	None
Disability	None	None	None
Ethnicity	None	None	None
Sexual Orientation	None	None	None

(4.2) Are there opportunities to better promote equality of opportunity for people within Section 75 equality categories?	
Section 75 category	Please provide details
Gender	As per Section 3.1
Age	As per Section 3.1
Religion	As per Section 3.1
Political Opinion	As per Section 3.1
Marital Status	As per Section 3.1
Dependent Status	As per Section 3.1
Disability	As per Section 3.1
Ethnicity	As per Section 3.1
Sexual Orientation	As per Section 3.1

(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	Procedure applies to all categories	None The Trust has in place its Good Relations statement which is displayed on staff and service user notice boards.
Political opinion	Procedure applies to all categories	None The Trust has in place its Good Relations statement which is displayed on staff and service user notice boards.
Racial group	Procedure applies to all categories and interpreters will be provided as required	None The Trust has in place its Good Relations statement which is displayed on staff and service user notice boards.

(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

(5) Consideration of Disability Duties

(5.1) How does the policy/proposal encourage disabled people to participate in public life and promote positive attitudes towards disabled people?

The SHSCT will ensure staff participate in relevant equality training
 The policy and related information will be made available in alternative formats –where necessary/on request to ensure employees with a disability can access the policy and associated provisions. Reasonable adjustments will be considered in the out-working of the policy for employees with a disability.

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

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

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.

All relevant Trust staff will receive Human Rights training

Neutral impacts have been recorded against Article 3, Prohibition of torture, inhuman or degrading treatment.

If the service user has capacity, they will be involved in all decisions in regards to bedrail use
Capacity is the ability to-

- Demonstrate an understanding of the information given and the ability to weigh up the risks and benefits discussed.
- Able to remember the information and communicate it back.

If the service user lacks capacity, family involvement should be sought, but the professional has to a duty of care to act in the best interest of the service user.

(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		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.

This policy has been screened out as it is a patient safety and clinical risk management policy that applies equally to all service users and staff across the Trust. Its purpose is to ensure the safe assessment, use, review, and management of bed rails in order to reduce the risk of falls, prevent serious harm such as entrapment or entanglement, and comply with statutory and MHRA guidance.

(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 line with the Trust's default position to review policies at least once every 3 years/sooner where it is necessary to do so.

Approved Lead Officer: Sharon Love

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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.