

Quality Care - for you, with you



Southern Health & Social Care Trust

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

Contact:

| Section 75 of the NI Act | Name: | Cathy Lavery |
|---|------------|--------------------------------------|
| 1998 and Equality Scheme | Telephone: | 02837 564151 |
| | Email: | cathy.lavery@southerntrust.hscni.net |
| Section 49A of the Disability | | (double click to open) |
| Discrimination Act 1995 and Disability Action Plan | Name: | |
| Disability Action Flan | Telephone: | |
| | Email: | |

Documents published relating to our Equality Scheme can be found at:

https://southerntrust.hscni.net/involving-you/equality-and-diversity/

Signature:

Cathy Lavery, Head of Equality, Diversity & Inclusion

Colly Lang.

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 2019 and March 2020

Appendix 1

Equality Action Plan & Disability Action Plan (2019-2020) Year 2 Progress Report (Regional)

Appendix 2

Equality Action Plan & Disability Action Plan (2019-2020) Year 2 Progress Report (Local)

Appendix 3

Equality in Action Newsletter 2019.20

PART A – Section 75 of the Northern Ireland Act 1998 and Equality Scheme Section 1: Equality and good relations outcomes, impacts and good practice

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.

The Southern Health and Social Care Trust (SHSCT or referred to as the Trust) reaffirms its commitment to diversity and inclusion and as such ensures equality is central to everything that it does. During 2019-20, the Trust has continued to take steps to promote equality and to engage and empower stakeholders (both internal and external) to be involved in shaping the delivery of services.

This year's report provides a high level summary of what the Southern Trust has achieved in furthering its statutory duties, the aim of which is to bring about improved outcomes for the 9 Section 75 equality categories.

It is important to note that this report stands alongside a number of other Trust reports, such as:

- Trust's Traveller Action Group (TAG) Progress Report aimed at tackling inequalities experienced by the Traveller community;
- Trust's Public and Personal Involvement Progress Reports aimed at encouraging user involvement in the design and delivery of our services;
- Carers Report and Community Development Report.

Copies of these reports can be obtained by contacting the Equality, Diversity & Inclusion Team on Equality.Unit@southerntrust.hscni.net

Equality, Good Relations and Human Rights eLearning Training

During the 2019-20 year the Trust continued the emphasis on enhancing our staff knowledge and capacity around equality, diversity and inclusion, across all parts of the organisation. To this end, we rolled out an extensive training programme. Equality training "Making a Difference" in the Trust is now mandatory and must be completed by all staff every three years. Uptake is monitored twice each year. A total of **3470** employees undertook the training during 2019-20.

Accessible Communication for service users.

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.

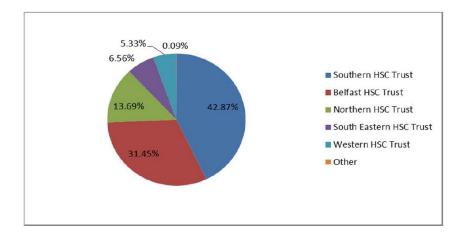
Provision of language assistance is a legal requirement for public sector organisations and an essential part of providing safe, high quality care to all patients and clients.

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.

The primary aim of the NI HSC Interpreting Service is to improve equality of access to Health and Social Care for patients who do not speak English as a first or competent second language. It also ensures that information is communicated through a qualified interpreter which in turn ensures high quality safe services. Access to an interpreter is a legal entitlement. During the reporting period, the Southern Trust made a total of **56,780** requests for interpreters through the NI Regional HSC Interpreting Service. The top 3 languages requested were Polish, Lithuanian and Portuguese.

NI HSC Interpreting Service Report 1 April 2019 to 31 March 2020

| HSC Trust Area | Total Number of | Cancellations | Non | Out of |
|-------------------------|-------------------|---------------|------------|--------|
| noc Trust Area | Requests Received | Cancellations | provisions | Hours |
| Southern HSC Trust | 56780 | 6363 | 688 | 638 |
| Belfast HSC Trust | 41655 | 4719 | 898 | 705 |
| Northern HSC Trust | 18125 | 2311 | 241 | 219 |
| South Eastern HSC Trust | 8693 | 1080 | 138 | 86 |
| Western HSC Trust | 7058 | 931 | 142 | 83 |
| Other | 123 | 18 | 0 | 0 |
| TOTAL | 132434 | 15422 | 2107 | 1731 |



Top 20 Southern HSC Trust Languages - 1 April 2019-31 March 2020

| Polish | 13426 |
|---------------------|-------|
| Lithuanian | 11694 |
| Portuguese | 6374 |
| Tetum | 6066 |
| Bulgarian | 5929 |
| Romanian | 3766 |
| Arabic | 2730 |
| Russian | 1585 |
| Latvian | 1240 |
| Slovak | 1210 |
| Hungarian | 829 |
| Chinese - Mandarin | 528 |
| Chinese - Cantonese | 490 |
| Czech | 206 |
| Urdu | 134 |
| Bengali | 103 |
| Pashto Central | 73 |
| Spanish | 73 |
| Punjabi | 64 |
| Italian | 54 |

A total of 85 documents were translated into minority languages during the 2019-20 year.

Regional Gender Identity and Expression Policy

In collaboration with other Trusts and representative organisations a Regional Gender Identity and Expression Policy has been developed. This Policy ensures that our services and workplace are accessible and welcoming to all people regardless of their sexual orientation or gender identity.

Annual Fair Employment Monitoring Return

The Trust submitted its statutory Annual Fair Employment Monitoring Return to the Equality Commission, ahead of the statutory deadline, showing workforce composition between the 2 main communities in NI, applicant flows/appointees, promotees and leavers for the year.

As at 1 January 2020 the community background of the Southern Trust was as follows: Protestant 4,897 [39%] Roman Catholic 7,675 [61%]

The analysis 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 28 – A Summary of NI Monitored Workforce Returns.

As at 1 January 2020 the Trust employed a total of **13,408** staff of which 1,909 (14.2%) were male and 11,499 (85.8%) were female. According to the NI Health and Social Care Workforce Census March 2020, published by the Department of Health (DoH) 79.0% of the HSC workforce were female and 21.0% were male.

EU Settlement Scheme

During the year information received from the Home Office was disseminated to Trust Staff on the proposed arrangements for the EU Settlement Scheme. This will continue as and when further information becomes available.

Trust pledge to 'listen and learn' from young people

The Southern Trust made a formal pledge to listen to and involve the views of young people in planning services that affect them. The promise came following a Care Day event attended by the Trust Chair and Chief Executive, at Stormont, where young people from VOYPIC (Voice of Young People in Care) expressed that they would like to build better relationships with the people who make decisions about their lives. Young people from Autism Services and Looked After young people from 14 Plus have since been working with Trust Board on a range of issues like accessibility of services, communication, accommodation and employment opportunities for young people with autism and those leaving care.

Infant Mental Health Strategy

A new five year Infant Mental Health Strategy has been launched in the Southern area. The strategy represents a commitment by statutory, voluntary and community organisations to promote positive infant mental health from the ante natal period through to children aged three years of age. At a stakeholder engagement event in May 2019, representatives from the statutory, voluntary and community sectors shared their thoughts and ideas to help the working group to develop the strategy which follows three key themes – 'Evidence and Policy', 'Workforce Development' and 'Service Development'. 150 people representing these organisations attended the launch event. A cross sectoral Southern Area Infant Mental Health Strategic Group will now be established to ensure that the strategy is implemented across the locality. Find the full strategy and summary along with translated versions at www.southerntrust.hscni.net/services/4302.htm

Positive Ageing

To mark International Day of Older Persons (1 October 2019) the Trust hosted a celebration of 'Positive Ageing'. Funded by the NI Executive Office, through Armagh City, Banbridge and Craigavon Borough Council's Good Relations Action Plan and organised in partnership with the Council and the Jethro Centre, Lurgan, the event featured taster workshops for Strength and Balance, Take 5 Steps to Wellbeing and a session on safety from the Policing and Community Safety Partnership. There were also around 40 information stands on services, activities and support available for older people. Around 100 people from local older people's groups attended on the day.

Disability Placement Scheme

The Disability Placement Scheme is an initiative established by the Trust in an attempt to assist individuals with a disability back into a workplace setting. During the 2019-20 year there were a total of 9 disability supported work placement requests with 6 being placed in the areas of catering, estates maintenance, and admin. Placements can vary in length and skill level. To date most placements have lasted 6 months.

Most placements are for 2 days per week and working hours are flexible to suit both the manager and candidate. We try our best to match the skills of candidates with specific requests by managers.

The positives of the scheme are that:

- It helps candidates build on skills already acquired and allows these skills to be used in a live workplace environment.
- It will help build their confidence and give an insight into the life of work.

They will develop new skills and experience new environments.

European Job Shadow Day

As part of the European Job Shadow Day on Thursday 16 May 2019, the Day Opportunities Team organised work experience placements for 19 adults with disabilities across a number of Trust Departments including nursing, admin, portering, catering and domestic services.

Fit 4 U sports programmes for adults with disabilities.

Fit 4 U seeks to empower people with disabilities to improve their health through participation in a range of daytime physical activity and sporting opportunities. Fit 4 U is funded by the PHA and led by the Southern Health and Social Care Trust in partnership with other organisations, including the local Council authorities and Sport NI Everybody Active coaches. During Summer 2019, adults with disabilities participated in walking groups across the Trust as part of the project and to the local Leisure Centres during the autumn.

International Day of People with Disabilities

Participants of the Southern Trust Fit 4 U Project met at Banbridge Leisure Centre for two special Olympic themed events to celebrate 'International Day of People with Disabilities'. This is a recognised day for the celebration of the achievements of people living with disabilities across the world. A total of 94 people with disabilities, 21 carers and six volunteers from across Armagh, Dungannon, Craigavon, Banbridge and Newry attended these two events.

The Southern Trust's Newry and Mourne Adult Learning Disability team have achieved Makaton Friendly Status. The award was presented to the team by the Makaton Charity in recognition of their efforts to promote Makaton and ensuring the locality team based at Drumcashel House, Newry is an inclusive, accessible communication friendly environment for all service users who have communication support needs and their families/carers. Makaton is a language programme that gives everyone a helping hand to communicate and is proven to develop speech, language and communication skills. Makaton uses signs, symbols and speech to help people to communicate and reduce feelings of frustration and isolation.

National Recognition for Trust Learning Disability Service

The Southern Trust has scooped three top prizes at the 2019 National Learning Disabilities and Autism Awards. The Awards celebrate excellence in the support for people with learning disabilities and aim to pay tribute to those who excel in providing quality care.

For further examples, please see Appendices 1 – 3.

Please provide **examples** of outcomes and/or the impact of **equality action plans/** measures in 2019-20 (*or append the plan with progress/examples identified*).

See attached Appendix 1- Regional Equality And Disability Action Plan and Appendix 2 - Local Equality and Disability Action Plans and Appendix 3 – Equality in Action newsletter

| 3 | policy, p | • • | ures and, | • | | | sulted in any changes to ring the 2019-20 reporting | |
|--------|--|------------------|----------------------|---------------------|----------------------|-----------------------|---|-------------|
| | \boxtimes | Yes | | No (go to | Q.4) | | Not applicable (go to Q.4) | |
| | Please p | provide any deta | ails and e | xamples: | | | | |
| | proces develo | sses have ensi | ured that | t an equali | ty focus | ed lens | y screening and consultati has been brought to policy ning and procurement pro | and service |
| | illustra makin | ite how the Se | ction 75 opment p | equality dorocesses | uties ha of the T | ive been rust – av | ening Outcome Reports w mainstreamed into the de vailable on the Trust's web ome Reports'. | cision |
| | having | • • | arying S | | | | thinking differently about t rvice user involvement ha | |
| | Pleas | e see Append | lices 1 – | · 3 for furt | her exa | mples. | | |
| 3 a | delivery | | ference v | was made, | or will b | | rocedures and/or service for individuals, i.e. the impa | ct |
| | Please p | provide any deta | ails and e | xamples: | | | | |
| | Menopause at Work Policy - This policy and supporting guidance aims to ensure there is a supportive working environment for staff experiencing menopause related issues and the potential impact at work. It also aims to increase managers' and staff's awareness of menopause related issues and the potential impact on staff health, wellbeing, safety and capacity at work. | | | | | | | |
| | Please | see Appendi | ces 1 – | 3 for furth | ier exai | mples. | | |
| 3 b | What as | spect of the Equ | ality Sche | eme promp | ted or le | ed to the o | change(s)? (tick all that apply | v) |
| | \boxtimes | As a result of t | he organ | isation's sc | reening | of a polic | y (please give details): | |
| | | screened. Ple | ease see | the Trust | s Scree | ning Out | during this period have be come Reports | en |
| | | screening-ou | | | IVUIVING | <u>-you/eqt</u> | ality-and-diversity/policy- | |

| | (please give details): |
|-----------|--|
| | As a result of analysis from monitoring the impact (please give details): |
| | As a result of changes to access to information and services (please specify and give details): |
| | Other (please specify and give details): |
| Section 2 | 2: Progress on Equality Scheme commitments <u>and</u> action easures |
| Arrangem | ents for assessing compliance (Model Equality Scheme Chapter 2) |
| | e the Section 75 statutory duties integrated within job descriptions during the 2019-eporting 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 |
| Plea | se provide any details and examples: |
| | Compliance with the Section 75 equality duties are stipulated in job descriptions under 'Staff and Managerial Responsibilities'. |
| , | Compliance with the Section 75 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 Section 75 equality duties are set out in Chapter 1 of the Trust's approved Equality Scheme - which elaborates on how the Trust proposes to fulfil its 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 Head of Equality, Diversity & Inclusion.
- They are also included as part of the knowledge and skills framework and monitored via staff appraisals.

Incorporated in Training Programmes – Equality, Good Relations and Human Rights – Making a Difference – eLearning programme

| 5 | Were the Section 75 statutory duties integrated within performance plans during the 2019-20 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:

- 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 life-long learning aimed at maintaining high quality, safe services.
- Trust's Corporate Plan was subject to equality screening 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 to work streams that emanate from this 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.
- Section 75 equality duties are routinely included in the Trust's own Annual Report.
- Progress in implementing the Section 75 duties is also reported in the Trust's 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 associated policy documents to the

Policy Scrutiny Committee in the interest of compliance.

The Trust's Equality, Diveristy & Inclusion team provides ongoing training, hosts workshops for policy leads/decision makers and provides advice and expertise in the area of Section 75, the disability duties and human rights obligations. They also act as a business partner - participating in discussions at an early stage of policy development and decision making processes.

| 6 | relating | 019-20 reporting period were objectives/ targets/ performance measures to the Section 75 statutory duties integrated into corporate plans, strategic g 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 2019-20 report |
| | | Not applicable |
| | Dlooss : | aravida any dataila and ayamplasi |

Please provide any details and examples:

Section 75 equality duties are incorporated and mainstreamed at a strategic level into the business of the Trust.

Objectives/targets/performance measures relating to the Section 75 statutory duties were integrated into corporate plans, strategic planning and/or operational business plans as follows:

- The Trust's Corporate Plan
- The Trust's Delivery Plan
- The Trust's own Annual Report
- The Trust's Management of Change Framework embeds the principles of fairness and equity
- Trust's Section 75 Annual Progress Report
- Equality Screenings and EQIAs on key service developments are discussed and signed off at SMT and Trust Board ahead of public consultation
- Equality Screenings are tabled at the Policy Scrutiny Committee along with the policy document

Equality and Human Rights are a standard section for consideration for reports

progressing to SMT/Trust Board.

Equality action plans/measures

| 7 | Within the 2019-20 reporting period, please indicate the number of: | | | | | | |
|---|---|----------------------|--------------|--------------------------------------|-----------------------------|---|-------------|
| | Actions comple | ted*: | 12 | Actions ongoing*: | 4 | Actions to commence*: | 0 |
| | *Refers to action measures for Year 2 with the Regional EAP. | | | | | | |
| | Action comple | s eted**: | 28 | Actions ongoing**: | 5 | Actions to commence**: | 0 |
| | **Refe | s to acti | on measur | es for Year 2 w | rith the Loca | al EAP. | |
| | | | | 1 for progress เ lity Action Plan | • | ear 2 action meas | sures for |
| 8 | Please give details of changes or amendments made to the equality action plan/measures during the 2019-20 reporting period (points not identified in an appended plan): | | | | | an | |
| | None – measu | • | pendix 1 fo | or details of pro | gress made | e with regards Yea | ar 2 action |
| | | | - | y Action Plans of ensure they d | | cuments' and ther tcomes. | efore |
| 9 | | • • • | - | e equality actioning have been id | • | measures during th k all that apply) | ne 2019-20 |
| | | Continui inequali | |), to progress the | e next stage | addressing the kno | wn |
| | | Action(s |) to address | the known inec | _l uality in a di | fferent way | |
| | | Action(s inequali | | newly identified | d inequalitie: | s/recently prioritise | ed |
| | | Measure | es to addres | ss a prioritised in | equality hav | e been completed | |

During the 2019-20 year, the Equality Action Plan and Disability Action Plan (2019-2022) actions were rolled out for Year 2.

Arrangements for consulting (Model Equality Scheme Chapter 3)

| LO | Following the initial notification of consultations, a targeted approach was taken consultation with those for whom the issue was of particular relevance: (tick on only) | | | | |
|----|---|--|--------------------------|--|--|
| | All the time | | Never | | |
| | consultation. This initial | ge with targeted groups in a pengagement is to inform the centre the scope of the wider cons | consultation at an early | | |

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:

Patient Client Experience Newsletter

The Trust's Patient Client Experience Newsletters issued during the year focused on patient, client and carer feedback and actions and initiatives to improve patient experience within the Southern HSC Trust.

New user feedback system for Trust

The Trust is making plans to implement a regional online user feedback system which will provide opportunities for patients and their families to share their experiences of health and social care. This will be facilitated through Care Opinion which is recognised as the UK's leading independent non-profit feedback public platform for health and social care. Care Opinion will complement and enhance existing feedback systems within the Trust and will be launched throughout Northern Ireland in April 2020.

PPI User Involvement - As part of the regional Involve Fest the Southern Trust PPI User Involvement Team hosted a showcase event on 20 November 2019. There was a range of events to celebrate the service user and carer contribution in shaping and improving Health and Social Care across the Trust. The event provided the opportunity to share information about the implementation and impact of a range of local initiatives supported through a small grants scheme earlier in the year to progress a Partnership Working Infrastructure. The showcase event was an opportunity for service users and carers to meet the new PPI User Involvement Team, PPI panel members and service user/carer consultant's network. There was also an opportunity to share learning as well as welcome and introduce service users and carers to the world of user involvement/co-production.

Regional HSC Hospital Passport

During the year under review a study took place by Dr Freda McCormick, Queen's University, to hear the views and experiences of people with learning disabilities, families/carers and healthcare professionals over the age of 18 who have used the HSC Hospital Passport. Feedback was also sought from focus groups on proposed Best Practice Guidelines.

The aim is to develop Best Practice Guidelines, identify and address potential barriers for the further implementation and utilisation of the Hospital Passport for people with learning disabilities.

| 12 | In the 2019-20 reporting period, given the consultation methods offered, which consultation methods were most frequently <u>used</u> by consultees: (tick all that apply) | | | | | | |
|---|--|--|--|--|--|--|--|
| | | Face to face meetings | | | | | |
| Focus groups | | | | | | | |
| | | Written documents with the opportunity to comment in writing | | | | | |
| | | Questionnaires | | | | | |
| | Information/notification by email with an opportunity to opt in/out of the consultation | | | | | | |
| | Internet discussions | | | | | | |
| Telephone consultations | | | | | | | |
| | | Other (please specify): The Trust continues to engage with its established user groups. | | | | | |
| Please provide any details or examples of the uptake of these methods of coin relation to the consultees' membership of particular Section 75 categories | | | | | | | |
| | See response at question 11 for illustrations of the methods of consulta utilised by the Trust. | | | | | | |
| 13 | | ny awareness-raising activities for consultees undertaken, on the commitments quality Scheme, during the 2019-20 reporting period? (tick one box only) | | | | | |
| | \boxtimes | Yes No Not applicable | | | | | |
| | Please | provide any details and examples: | | | | | |
| Publication of S75 Quarterly Equality Screening Outcome repor placed on the website. Public consultations and focus group discussions were held on | | | | | | | |

services.

| • | Section | 75 | Annual | Progress | Report | was | made | available |
|---|---------|----|--------|-----------------|--------|-----|------|-----------|
|---|---------|----|--------|-----------------|--------|-----|------|-----------|

- Equality Section on Trust website
- Staff Training
- Ongoing guidance and briefings to senior management and Board
 Informal meetings with the Equality Commission

| 14 | only) | e consultation list reviewed during the 2019-20 reporting period? (tick one box | | | | | |
|------|---|---|--|--|--|--|--|
| | | Yes No Not applicable – no commitment to review | | | | | |
| | The co | nsultation list is constantly under review and is updated regularly. | | | | | |
| | ngement me Chap | s for assessing and consulting on the likely impact of policies (Model Equality ter 4) | | | | | |
| Deta | ils can b | pe found at: | | | | | |
| - | ://south ome-rep | erntrust.hscni.net/involving-you/equality-and-diversity/policy-screening- orts/ | | | | | |
| 15 | Please provide the number of policies screened during the year (as recorded in screening reports): | | | | | | |
| | 8 | | | | | | |
| | and ne upon, i | were also some policies for which equality screenings were commenced aring completion during the current reporting period but were impacted n the main, due to the Covid-19 pandemic and the need to resource ial services. | | | | | |
| 16 | Please | provide the number of assessments that were consulted upon during 2019-20: | | | | | |
| | 1 | Policy consultations conducted with screening assessment presented. | | | | | |
| | | Policy consultations conducted with an equality impact assessment (EQIA) presented. | | | | | |
| | | Consultations for an EQIA alone. | | | | | |

Revised car parking charges

| 17 | Please provide details of the main consultations conducted on an assessment (as described above) or other matters relevant to the Section 75 duties: | | |
|-------|---|--|--|
| | Consultation on the proposed revision of car parking charges on the Trust's acute hospital sites i.e. Craigavon Area Hospital and Daisy Hill Hospital. | | |
| 18 | Were any screening decisions (or equivalent initial assessments of relevance) reviewed following concerns raised by consultees? (tick one box only) | | |
| | Yes No concerns No Not applicable | | |
| | Please provide any details and examples: | | |
| | Proposed revision of car parking charges on the Trust's acute hospital sites. | | |
| Arran | gements 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 2019-20 reporting period? (tick one box only) | | |
| | ☐ Yes ☐ No ☐ Not applicable | | |
| | Please provide any details and examples: | | |
| | No EQIAs were consulted upon nor published in the reporting period. | | |
| | | | |
| | gements for monitoring and publishing the results of monitoring (Model Equality ne Chapter 4) | | |
| 20 | From the Equality Scheme monitoring arrangements, was there an audit of existing information systems during the 2019-20 reporting period? (tick one box only) | | |
| | Yes No, already taken place | | |
| | No, scheduled to take place at a later date | | |
| | Please provide any details: | | |
| | | | |
| 21 | In analysing monitoring information gathered, was any action taken to change/review any policies? (tick one box only) | | |
| | | | |

Please provide any details and examples:

NI HSC Interpreting Service – ongoing review of language trends used to determine future language needs in order to ensure equality of access to services and in the interest of providing high quality safe services.

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:

N/A

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:

The Trust continues to monitor staff across the 9 equality categories. The monitoring of staff is enhanced by the self-service function of the Human Resources, Payroll, Travel and Subsistence System (HRPTS). It is anticipated that staff will be more likely to record their equality information on this online system. This information is used for screening purposes and helps to identify specific issues that need to be addressed to ensure the promotion of equality of opportunity.

The Trust completes an Article 55 Review Report every three years which involves gathering and analysing to inform the completion of the review.

We use equality data to inform equality screening exercises which in turn inform policy development.

Staff Training (Model Equality Scheme Chapter 5)

Please report on the activities from the training plan/programme (section 5.4 of the Model Equality Scheme) undertaken during 2019-20, and the extent to which they met the training objectives in the Equality Scheme.

In keeping with the commitments in its approved Equality Scheme, i.e. Chapter 5, the Trust has put in place a range of training interventions to ensure the effective discharge of its Section 75 equality and disability duties. There follows a summary of the main training and awareness raising interventions for staff in support of the commitments in the Trust's Equality Scheme:

Equality, Good Relations and Human Rights eLearning TrainingEquality training "Making a Difference" in the Trust is now mandatory and must be completed by all staff every three years. Uptake is monitored twice each year. A total of **3470** employees undertook the training during 2019-20.

Learning Disability Training for Hospital Staff

Staff from Daisy Hill and Craigavon Area hospitals participated in learning disability awareness training. The training was organised as part of the Southern Trust's drive to improve the experience of people with a learning disability and their carers whilst in hospital. Nursing, medical, social work and pharmacy staff along with a number of allied health professionals, took part in the session to increase their awareness of how to better meet the needs of people with a learning disability whilst in their care. Specialists from the Trust's Learning Disability Team shared their expertise with hospital colleagues and a carer gave their perspective of bringing an adult with a learning disability to hospital.

The training also included guidance relating to issues which affect adults with a learning disability such as pain management and communication; understanding the role of the family and carers; and the importance of the 'Regional Hospital Passport for Adults with a Learning Disability.

Disability Awareness Training

In August 2019 Southern Trust staff attended a disability awareness training course held in St Luke's Hospital, Armagh, organised by the Trust's PPI team in association with Barnardo's NI. This interactive training course was from a young person's perspective and was delivered by staff and young people from the Barnardo's Disabled Children and Young People's Participation Project (DCYPPP) in Armagh.

The purpose of the training was to challenge people's attitudes to disability and help individuals become more aware of disability issues. The training explores children's rights; as children and as children with a disability. The young people share their own experiences of the challenges children and young people with disabilities face on a daily basis and their tips on how to be more inclusive.

Visual Awareness, Deafblind and Deaf/Hearing Awareness Training Awareness training was provided to a total of 382 participants over 23 sessions during the 2019-20 year.

| Session | Number of Participants |
|------------------------|------------------------|
| Deafblind Training | 160 |
| Visual Awareness | 131 |
| Deaf/Hearing Awareness | 91 |
| Total | 382 |

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 eLearning module has been developed. During the reporting period, **640** staff undertook the on-line Selection and Recruitment Training in the SHSCT.

HIV Awareness Training - During 2019-20, a bespoke HIV and STI awareness workshop was delivered to School Nursing staff in April 2019. Two information stands were facilitated in Craigavon and Daisy Hill hospitals for staff and the public to raise awareness of HIV and AIDS as part of World Aids Day 2019.

Working Well with Interpreters - Staff Training Sessions

During the year "Working Well With Interpreters" training sessions continued across the Trust facilitated by the 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. A total of 34 staff attended these sessions.

Professional Induction Programme for Social Work/Social Care Staff and 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 August. This programme is organised to meet induction standards set down by NISCC as well as the mandatory training standards set by the Trust. The programme draws on the input from staff within the Trust as well as external providers e.g. Women's Aid.

Southern Trust Social Services Workforce Development and Training Team ensure implication of Human Rights legislation on practice is incorporated into training and education opportunities delivered. The courses delivered are accessible to social work/social care staff working within both adults and children services.

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:

Staff and volunteers experience what it's like to have brain injury

Over 50 staff and representatives from organisations who work with people affected by brain injury have participated in brain injury awareness training. Organised through the Southern Health and Social Care Trust, the programme 'Reassembled and Slightly Askew' was developed by Shannon Sickels, who created the theatrical training following her own experience with acquired brain injury.

Participants are 'admitted' to the training as hospital patients as they lie on a bed or stretcher with an eye mask and listen to an artistic audio show. This is followed by a reflective discussion before they are 'discharged' from the process.

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

Please list **any examples** of where monitoring during 2019-20, across all functions, has resulted in action and improvement in relation **to access to information and services**:

A new Macmillan **drop-in information and support hub** has opened at Daisy Hill Hospital in partnership with the Southern Trust. The hub offers a wide range of advice and information on the issues which affect people with cancer and their families. Macmillan has been working with the Southern Trust over the last eight years to improve access to cancer information and support services across its hospitals, primary care and community locations. The opening of the Daisy Hill hub follows the development of a Macmillan information and support centre located in Craigavon Area Hospital foyer in recent years.

A resource was launched during the year to help raise awareness of the 'Hospital Passport' in the Southern Trust. The resource was co-produced with the Learning Disability Carers Forum. The passport is for people with a learning disability to complete (with or without help) and present to staff every time they have contact with a general hospital. It gives staff important information on the person and how they prefer to communicate, their medical history and any support they might need while in hospital.

The Trust continues to provide information in a range of languages - examples this year include:

- Patient information leaflet Managing your diabetes in hospital translated into Polish, Lithuanian and Portuguese.
- Mental Health Order (MHO) leaflets Information for Patients detained under the MHO and information on Your Rights for the nearest relative – translated into Arabic, Bulgarian, Irish, Polish, Romanian and Slovak.
- Acquired Brain Injury Tips to look after your voice translated into Polish.

On 17 October 2019 Armagh and Dungannon Physical Disability services hosted a **community information open day for service users and carers for persons with a physical disability.** The information day had a range of information stalls from the Trust's partners in other statutory, voluntary and community organisations which can offer a range of different support for service users and carers.

Hospital volunteers 'Here to Help' people with sensory issues. The Trust has been working with service users to improve the visibility of its hospital volunteers. 'Here to Help' volunteers are based in the foyer of both Daisy Hill and Craigavon Area hospitals and are available to help visitors find their way and give directions. The Trust introduced bright yellow fleeces with "volunteer" on the back for the helpers, following feedback from service users with sensory impairments.

Complaints (Model Equality Scheme Chapter 8)

| 27 | How many complaints in relation to the Equality Scheme have been received during 2019-20? | | | |
|----|---|---|--|--|
| | Insert number here: | 0 | | |
| | Please provide any details of each complaint raised and outcome: | | | |

Section 3: Looking Forward

- 28 Please indicate when the Equality Scheme is due for review: 2023.
- 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)

 It is anticipated that focus during the next reporting period will be on:
 - Implementation of the Trust's Equality Action Plan covering the period 2018-2023 Year 3 action measures along with actions rolled over from year 2.
 - Implementation of the Trust's Disability Action Plan covering the period 2018-2023 Year 3 action measures along with actions rolled over from year 2.
 - Ensuring the effective discharge of the Trust's Section 75 Equality Duties in relation to Financial Planning and the Regional Transformational Programme.
 - Continued roll out of the 'Making a Difference' eLearning modules for management and staff – targeting hard to reach groups e.g. Domiciliary Care and Support Services Staff.
 - Delivery of Bespoke Training
 - · Support for underrepresented groups including staff
 - Finalisation of new Equality Screening and associated Guidelines Tool Kit for managers.
 - Review of Section 75 training materials in association with above.
 - Collaboration with DoH and all ALBs in Brexit planning, monitoring and review arrangements including roll out and promotion of the EU Settlement Scheme.
 - Continue to work with the Equality Commission, Human Rights Commission and Community Relations Council via a newly established Consultative Forum.

The above examples are intended to be illustrative and are not an exhaustive list of planned activity.

| 30 | In relation to the advice and services that the Commission offers, what equality and good relations priorities are anticipated over the next (2019-20) reporting period? (please tick any that apply) |
|----|--|
| | |
| | Goods, facilities and services |
| | ∠ Legislative changes |
| | Organisational changes/ new functions |
| | Nothing specific, more of the same |
| | Other (please state): |
| | Continued application of Section 75 Equality Duties to service reconfiguration - Regional Transformation Programme/Financial Planning/ Procurement arrangements - demonstrating leadership and ongoing commitment to the Section 75 Equality Duties. |



Quality Care - for you, with you

Progress Update Regional Equality and Disability Action Plans Year 2

Equality Action Plan Regional Actions 2018 – 2023

Progress Report Year 2 - 2019-2020

Section 1 – Ensuring the effective discharge of our Section 75 Equality Duties

We want to ensure that the focus is on outcomes for people within the nine Section 75 equality categories and to make a positive difference for them. The following actions are therefore aimed at simplifying the process.

| Action Measure | Description | |
|---|---|--|
| We will develop a Screening and Equality Impact Assessment (EQIA) Tool Kit to guide staff through the process. | A regional toolkit will be available for policy and decision makers. More robust and regionally consistent screening/EQIAs. | |
| Progress Year 2 – Completed for this reporting period Work on the equality and human rights Screening Toolkit came to fruition, during the year under review, with the incorporation of positive comments from the Equality Commission for NI. The screening toolkit will facilitate the effective mainstreaming of the statutory Section 75 equality duties and will assist policy makers in completion of meaningful screening templates so that equality considerations are an integral part of policy development and inform decision making. The new toolkit will form the basis for future staff training which in turn will provide for consistency across the HSC Trusts in the application of screening and EQIAs methodology and best practice. This online Equality Screening Toolkit was developed using feedback obtained from senior managers together with feedback from the Equality Commission for NI. Some final tweaks to the toolkit are ongoing to ensure that it is user friendly, interactive, easy to navigate. | | |
| Action Measure | Description | |
| We will develop a checklist to make sure Equality, Disability and Human Rights are at the heart of procurement. | Checklist developed and adhered to by staff with responsibility for buying goods and services. Raised awareness among staff of equality and human rights obligations in procurement process. S75 and human rights issues identified at an early stage of procurement process. | |
| Progress Year 2 – Ongoing Rollover Year 3 A Flowchart has been drafted and shared with Finance in NIAS initially for comments. This will then be shared more widely for agreement across the region. Discussion has taken place in terms of integrating an agreed flowchart into procurement training. This action has not fully been achieved as a result of Covid 19 pressures and will be picked up on in year 3. | | |
| Action Measure | Description | |
| We will review our staff training to ensure best practice is followed when screening and conducting EQIAs. | Up to date training programme for all policy makers across health and social care will be made available to ensure best practice. Skilled staff, policy leads and decision makers. Consistent and effective approach in the training programme across all | |

| Trusts (targets to be set). |
|--|
| Effective compliance with the S75 Equality Duties. |

Progress Year 2 – Ongoing Rollover Year 3

A regional training sub-group has been set up to develop a revised staff training programme which will be rolled out to ensure consistency across Trusts and adherence to best practice. The regional Screening Toolkit and amended screening template will form the basis for this new staff training programme. The Equality Commission for NI have been involved in discussions around the new screening toolkit and their input to the content of the new revised staff training programme will also be sought.

HSC Trust Equality Units continue to provide policy leaders and decision makers across HSC with specific advice and support on best practice in screening and EQIAs.

The roles of Trust Boards and Executive Management Teams are essential in ensuring that a meaningful and effective approach to implementing the Section 75 duties. The regional Trust Board Guidelines have been reviewed and updated to ensure leaders, senior managers and decision makers in HSC Trusts demonstrate good governance and best practice in equality screening and equality impact assessments.

It is important to note that in light of Covid-19 all face to face training has been suspended. HSC Trust Equality Leads are currently considering how staff training can be delivered remotely or through resources available online.

| Action Measure | Description | |
|---|--|--|
| We will develop and implement a communication strategy | Strategy in place to improve communication. | |
| to ensure that stakeholders are aware of Trust Equality | Raised awareness among S75 groups of Trust Equality Units and how they | |
| Units, their functions and how they can be engaged on | can be involved in and influence Trust equality agenda. | |
| equality and human rights issues. | , , , | |

Progress Year 2 - Completed for this reporting period

HSC Trusts utilise a range of mediums to raise awareness of the roll and function of their respective Equality Units. This includes ongoing media, social media, newsletters etc. including a commitment to host an annual show case event as a conduit to raise the profile of the Equality Units.

During this reporting period, the annual Show Case event focused on 'Supporting Carers in the Workplace'. It was held on Thursday, 20 February 2020 in Mossley Mill, Newtownabbey and was attended by over 70 Health and Social Care employees who are currently working whilst caring for a family member or friend.

HSC Trusts external websites have an Equality section where Equality Screenings, Annual Progress Report, Disability and Equality Action Plans and newsletters/bulletins are published. Communication and awareness raising also continues through social media including Facebook and Twitter as well as press coverage of events/initiatives etc. Frequent articles are also drafted for staff and published on the Trust intranet (The Hub)/SharePoint.

Other mediums include ongoing presentations at Senior Management /Executive Team and Trust Board meetings as well as Team Meetings. HSC Trusts also table their annual S75 Progress Reports at SMT/ET and Trust Board as a further means of raising awareness and highlighting

key achievements during the current reporting period. HSC Trusts continue to raise awareness through established networks and user panels such as the recently establish Equality, Human Rights and Good Relations Joint Consultative Forum which facilitates ongoing communication and collaboration between the Equality and Human Rights Commissions and the Community Relations Council in order to optimise outcomes for Section 75 groups.

These partnerships ensure an effective network for on-going stakeholder involvement and co-production and provides an opportunity for stakeholders and their representatives to be involved in the developing and planning of services. HSC Trusts continue to support and value the networks that have already established and continue to work in partnership to ensure the most marginalised groups have a voice and are involved in HSC Trust work.

During the reporting period the implementation of the DoH Co-production guidelines has resulted in a network of service users and carers who are involved in Trusts PPI and co-production work. This includes service users and carers. Involvement can range from membership of a steering group or project team or by attending a workshop to provide feedback. Many members are now co-delivering training.

| group or project team or by attending a workshop to provide feedback. Many members are now co-delivering training. | | |
|--|--|--|
| Action Measure | Description | |
| We will work with the Department of Health and other | One regional event to raise awareness of potential implications of the new | |
| relevant stakeholders to make sure we are prepared for | legislation on health and social care provision. | |
| the introduction of Age Discrimination Regulations. | Better understanding amongst staff on the implications of the legislation. | |
| Progress Year 2 - Ongoing Rollover Year 3 | | |
| Regulations not yet enacted by the local Assembly. | | |

Section 2 – Promoting Equality in our Services

The following actions have been developed in response to what we have heard and are aimed at providing welcoming, person-centred and accessible services for everyone.

| Action Measure | Description | |
|---|--|--|
| We will review our equality training programme in | Consistent staff training and awareness raising, co-produced and delivered, | |
| collaboration with service users, carers and their | where appropriate, across health and social care. | |
| advocates. | Raised awareness among staff of the best way to promote equality of | |
| | opportunity for service users. | |
| | Each Trust to identify a process to monitor e-learning. | |
| Progress Year 2 - Completed for this reporting period The regional Equality, Good Relations and Human Rights; Making a Difference eLearning programme is mandatory for all HSC Staff. Compliance is reported regularly within each HSC Trust utilising dedicated internal reporting mechanisms. Reports are drawn up per directorate and shared to influence how best to promote staff awareness of equality, good relations and human rights and ensure uptake of this mandatory training. Targeted action is taken as necessary to further ensure compliance. The latest training figures can be found in the 'Training Section' of this year's S75 annual progress report. A review of this training programme was undertaken, during the current reporting period, and has resulted in a number of amendments including e.g. the incorporation of the HSC Trust values, on the landing page, and a revision of the content of this programme to acknowledge that same sex marriage is now legalised in NI. HSC Trusts Equality Units continue to provide staff with information, training and resources to ensure that have the appropriate level of knowledge, expertise and skill to mainstream Section 75 duties. | | |
| Action Measure | Description | |
| We will work with service users, carers and representative | , | |
| organisations to ensure Trust websites are accessible, user friendly and easy to navigate. | Better communication with service users, carers and the public on access to our websites information. | |
| Progress Year 2 - Completed for this reporting period A regional HSC IT project is ongoing aimed at reviewing and relaunching Trust websites to include dynamic function for all device platforms. Work is also underway to review Trust intranets and improve the design, layout and accessibility. Trust staff have access to Read and Write software to enhance accessibility. | | |
| | | |
| is also underway to review Trust intranets and improve the des | | |
| is also underway to review Trust intranets and improve the desenhance accessibility. Action Measure We will work in partnership with LGBT representative | ign, layout and accessibility. Trust staff have access to Read and Write software to | |
| is also underway to review Trust intranets and improve the desenhance accessibility. Action Measure We will work in partnership with LGBT representative organisations to develop guidance for health and social | ign, layout and accessibility. Trust staff have access to Read and Write software to Description | |
| is also underway to review Trust intranets and improve the desenhance accessibility. Action Measure We will work in partnership with LGBT representative | ign, layout and accessibility. Trust staff have access to Read and Write software to Description Consistent up to date staff guidance developed in partnership with LGBT | |

users and carers.

Progress Year 2 - Completed for this reporting period

Initial meetings have taken place with Stonewall and S75 Equality Leads to discuss 'Diversity Champion' status. Arising out of piloted training in the Belfast Trust a commitment has been gained to co-produce written guidance for staff on how to provide a responsive and sensitive service for people who are LGB and T. This guidance will be utilised across the HSC to further extend best practice.

Action Measure

Description

We will work in partnership with Black and Minority Ethnic (BME) groups and groups representing BME older people to develop guidance for health and social care staff on meeting the needs of older people in BME communities and ensure access to services.

 Staff guidance co-produced with BME communities and representative organisations.

- Raised profile of needs of BME older people.
- Increased awareness among staff of the needs of BME older people.
- Improved access to services for BME older people.

Progress Year 2 – Completed for this reporting period

The Equality Leads have been liaising with the organisers of the NICON Conference and the ECNI to facilitate working and learning from with the BAME Network England. These include discussions with the Patient User Tsar and Director of Inclusion. This meeting will facilitate joint learning of systems, approaches and key learning opportunities for both HSC in NI and the BAME Network. This initiative was planned to take place in Year 2 but due to the COVID-19 crisis was postponed until the end of 2020. Action will be carried forward and reported on in Year 3.

Action Measure

Description

We will work in partnership with older people's groups, including the Pensioner's Parliament, to develop guidance for HSC staff on meeting the needs of older people.

- Staff guidance co-produced with groups representing older people.
- Raised profile of needs of older people in the delivery of services.
- Increased awareness among staff of the needs of older people.
- Improved communication and access to services for older people.

Progress Year 2 – completed for this reporting period

Key developments include a prototype for a new integrated care system which is based on partnership at all levels and embeds and values coproduction as integral part of this system. This new system has a focus on improving local population health outcomes, including the health outcomes of older people. It embodies an anticipatory care model in nursing homes looking at dementia pathways and the involvement of a user group of older people. This initiative is currently being tested in Northern area to be rolled out regionally.

Other developments, which have come about through quality improvement initiatives, to improve meaningful personalised activity for people living with dementia in nursing or residential homes include:- a series of interventions such as 'All about Me' posters in client's bedrooms, another was co-production of activity boxes specific to the individual to allow carers, family or staff to engage meaningfully with older persons.

There has also been significant in-roads into the development of a regional HSC delirium pathway so that people with delirium receive the right care in the right place at the right time. Resultant outcomes have been the production of a Delirium Pathway policy, a Care Pathway and associated Guidance developed to assist in the coordination of care and to improve how patients, over the age of 18 (as per NICE guidance) are managed during a delirium episode aimed primarily at improving their care and minimising adverse outcomes. The pathway sets out the steps that should be taken to recognise, diagnose and manage delirium for any patient over the age of 18 (in the community as well as in the acute

setting) including when to refer for specialist management and to identify issues for discharge and follow up. It will help staff utilise evidence-based practice to prevent, treat and manage delirium.

Action Measure

We will hold an annual event to showcase best practice in equality and diversity within the health and social care.

• An annual Equality and Diversity event delivered.
• Health and social care viewed as a sector that promotes equality and diversity.
• Improved awareness of equality and diversity best practice models and shared across health and social care and beyond.

Progress Year 2 – completed for this reporting period

The annual showcase best practice event 'Supporting Carers in the Workplace' was held on Thursday, 20 February 2020 in Mossley Mill, Newtownabbey. It was attended by over 70 Health and Social Care employees who are currently working whilst caring for a family member or friend.

This event was supported by Carers NI and Employers for Carers. The programme included learning how to manage caring responsibilities alongside working and how to build techniques that can help. The event provided everyone with the opportunity to share their stories and provide feedback on supports that would be beneficial to staff. This will contribute to the development of guidance and training for managers on how they can support working carers.

Section 3 – Supporting our Staff

The following actions help to promote equality of opportunity for our staff and support them to understand their responsibilities in valuing differences and advancing equality of opportunity to ensure an inclusive and welcoming environment.

| Action Measure | Description |
|--|---|
| We will ensure compliance with any new legislation governing gender pay reporting and address any inequalities identified. | Pay structure that ensures fairness and equity in pay and reward arrangements in line with any new legislation. |

Progress Year 2 - Completed for this reporting period

Legislation has yet to be enacted by the NI Assembly.

In the interim period a Position Paper setting out the key requirements of this new legislation has been shared with the Human Resources Directors Forum.

During the current reporting period representatives from the Equality Commission for NI and HSC Finance were invited to a workshop hosted by the HSC Regional Employment Equality Network to explore with the Commission the level of detail and calculations required for reporting purposes. It was agreed that one Trust would undertake some modelling in line with legislative requirements. The NHSCT was identified as a pilot site. Learning to be shared with other HSC Trusts in preparation for legislation coming on stream now that the NI Assembly is up and running.

| Action Measure | D | escription escription |
|---|---|---|
| We will work in collaboration with relevant stakeholders to | • | Scope in year 1 opportunities and availability for our employability schemes. |
| extend the remit of our Employability Schemes to enhance | • | Employability scheme available to other marginalised S75 groups. |
| employment opportunities for marginalised S75 groups. | • | Improved employment opportunities for marginalised S75 groups. |
| | • | Access to employment is improved for marginalised S75 groups. |

Progress Year 2 - Ongoing Rollover Year 3

All HSC Trusts are actively exploring ways to encourage the participation of persons with a disability in the workplace. Examples include experiential job placements, Job Shadowing, the Workable Programme leading to substantive employment opportunities within Trusts, career events and targeted recruitment. HSC Trusts have forged closer links with the disability sector including USEL to further promote meaningful opportunities for disabled persons to participate in the workplace.

The Southern Trust has set up a small working group to explore opportunities under the 'Workable' NI programme to provide an opportunity for the first cohort of persons with a disability to participate in a 14 week pilot Employability Programme leading to permanent part time employment upon successful completion. The group has agreed the following actions:

- > Commence in an incremental way with a small number of trainees
- > Identification of possible trainees who may be eligible for entry onto a supported employment scheme.
- > Open up discussion with Southern Regional College/further education colleges about the possibility of developing a14 week modular training programme.
- > Secure staff side involvement in process.
- > Explore potential for service user advocate/ carers rep for this initiative at the outset co-production/co-design.
- > Explore opportunities within support services for the first cohort of trainees

The working group met twice during the current reporting period. The Equality Commission for NI were invited to participate in the group discussion. The group benefited from the Commission's input and in particular their advice on permissible positive action measures open to employers in seeking to increase the participation of persons with disabilities in employment.

Due to Covid-19 pressures and the priority to maintain essential service provision progress has been affected. The group plan to drive forward this work stream as soon as business activities resume and Trust working groups are given the go ahead to reconvene.

| Action Measure | Description |
|--|--|
| We will revise Equality, Human Rights and Disability | Up to date guidelines in place for Non-Executive Directors. |
| guidelines for our Non-Executive Trust Board member | Increased awareness among Non-Executive Directors of statutory |
| | compliance and responsibilities. |

Progress Year 2 – Completed for this reporting period

This Guidance has been developed and updated in conjunction with by ECNI. It has now been finalised and designed to complement existing resources and is moving to print ready stage.

Podcast has been written for respective HSC Trust Chairs/Non-Executive Directors.

| Action Measure | Description |
|---|---|
| We will review our harmonious working environment | Consistent regional approach to ensuring all health and social care |
| advice in light of any new findings and recommendations | environments are welcoming to everyone. |
| from the work conducted by the Commission on Flags, | |
| Identity, Culture and Traditions. | |
| Progress Vear 2 — Completed for this reporting period | |

Progress Year 2 – Completed for this reporting period

The new regional policy is now finalised and waiting endorsement by Regional TU colleagues. The new policy is entitled Equality, Diversity and Inclusion and carries forward the values and principles in the former HSC Trusts' Equal Opportunity Policy. The policy has been updated to take account of developments within the sphere of equality, human rights, disability and good relations duties.

This policy is concerned with the promotion of equality and the prevention of unlawful discrimination.

In addition, the former Joint Declaration of Protection Policy Statement has been replaced by a Harmonious Working Environment Statement included as an addendum to this new regional Equality, Diversity and Inclusion Policy for ease of access. In this statement Management, Trade Unions and Staff Organisations representing employees of HSC Trusts jointly agree a number of key principles to support a harmonious working environment: excerpt. 'We Declare that we shall work together to ensure that our workplaces are harmonious and inclusive, where individual differences are valued and respected in line with the commitments and values of the organisation'.

At this time, there have been no recommendations published by the Commission on Flags, Identity, Culture and Traditions.

| Action Measure | Description |
|---|--|
| We will launch our new E-Learning Module and Equality and Diversity Staff Training Manual | 20 minute E-Learning Training Programme for staff and managers and Equality and Diversity Staff Training Manual launched and available for all health and social care staff. |
| | Marketing strategy to increase uptake of training across all Trusts. Improved access to training for staff who do not have access to a computer through provision of the Staff Training Manual. Improved uptake of equality training, each Trust to set targets. |

Progress Year 2 - Completed for this reporting period

HSC Trusts continue with the deployment of the Regional Making a Difference, Equality, Good Relations and Human Rights eLearning training. Please refer to the main body of this year's report for the latest uptake figures. This programme is mandatory for all HSC staff.

A review of this programme was undertaken, during the current reporting report, and a number of amendments have been recommended to keep abreast of legislative developments e.g. legalisation of same sex marriage as well as the inclusion of HSC Trust values on the landing page of the programme etc.

Actions Completed in Year 2 12 Actions Ongoing Rollover to Year 3 4 Actions to Commence 0

Disability Action Plan Regional Actions 2018 – 2023

Progress Report Year 2 - 2019-2020

Section 1 – Promoting positive actions and increased participation through training, awareness and resources

Disabled people have told us that promoting well-informed social attitudes to disability is central to securing the right to equality for all disabled people. We are committed to providing training and resources to support our staff in the implementation of our disability duties.

Actions to promote positive attitudes towards disabled people

| We will co-design and deliver bespoke disability equality training for frontline staff in partnership with disabled people. Consistent staff training and awareness raising, co-designed and delivered, where appropriate, across health and social care. Co-designed training programme in each Trust that includes specific guidance on communication on disability and autism. Increased staff awareness on disability equality and how to promote positive attitudes and participation in public life. Disability equality training that will reflect all disabilities (including hidden, autism, sensory) and will challenge negative stereotypes / attitudes about disabled people. | Action Measure | Description |
|---|---|---|
| | training for frontline staff in partnership with disabled | where appropriate, across health and social care. Co-designed training programme in each Trust that includes specific guidance on communication on disability and autism. Increased staff awareness on disability equality and how to promote positive attitudes and participation in public life. Disability equality training that will reflect all disabilities (including hidden, autism, sensory) and will challenge negative stereotypes / attitudes about |

Progress Year 2 – Completed for this reporting period

The Making A Difference E-Learning mandatory training is the main training resource which all staff are required to complete. This incorporates disability awareness training and scenario based learning.

In addition, HSC Trusts have revised the Staff Disability Etiquette Booklet which includes important information on Autism. This resource is aimed at raising staff awareness.

Nearing completion is a new regional Staff Information Booklet entitled: 'Staff Guidance – Autism in the Workplace'. This booklet aims to increase staffs' understand and appreciation of Autism and how to provide practical support in the workplace.

| Action Measure | Description |
|--|---|
| We will work with the consortium of mental health organisations and the ECNI to ensure health and social care is signed up to the Mental Health Charter. | Workplace that welcomes and supports staff with a mental health issue. Development of best practice models that ensure services are accessible to people with a mental health issue. Availability of long-term sustainable information and training support that will help managers to identify and offer help and support to staff with a mental health issue. |

Progress Year 2 - Completed for this reporting period

All HSC Trusts have now signed up to the Mental Health Charter in collaboration with the Equality Commission for NI. The Charter commitments are currently being mainstreamed in the outworking of HSC Trusts respective Health & Well-Being Strategies.

HSC Trusts continuously promotes the mental health and wellbeing of staff and notably during the outbreak of Covid 19, many psychological resources were disseminated and much more focused attention was given to mental health and wellbeing and resilience. It is clear, from 'Lessons Learning from Covid-19' that this will be a priority going forward in supporting staffs' mental health.

| Action Measure | Description |
|--|---|
| We will continue to support the implementation of the Regional Physical and Sensory Disability Strategy. | Promotion of regional sensory awareness e-learning programme. Improve awareness among staff on how to ensure people with sensory impairment have access to information, services and supports. |

Progress Year 2 - Completed for this reporting period

The Regional Service Group (RSG) is a forum for engagement and collaborative working focused on services for people with sensory loss. It includes Health and Social Care service representatives, community and voluntary sector organisations, and Service Users. The purpose of the RSG is to consolidate and build upon service improvements made for people with sensory disabilities under the *Physical and Sensory Disability Strategy and Action Plan 2012-18*.

The overarching objectives of the *Physical and Sensory Disability Strategy* continue to apply to the work of the RSG. They include:

- To support disabled people to better exercise their rights, choices and life opportunities;
- To support the continuing development of an inclusive and effective range of high quality health and social care services; and
- To develop a more integrated approach to the planning and management of services within and across government departments, the HSC and the independent community and voluntary sector.

A work plan has been drawn up covering the period December 2019-2020 for the 4 following Task and Finish Groups: Sight Loss Services Framework, Hearing Loss Services Framework, Tinnitus, Sign Language in Care Settings Sight Loss Services Framework. Other worksteams will include: the approach to service user involvement, palliative and end of life care and regional awareness raising as well as accessible information provision.

Actions to encourage participation by disabled people in public life

| Action Measure | Description |
|--|---|
| We will develop for staff a welcome pack with information about accessibility such as: | Accessibility welcome pack available for all disabled service users to improve access to services. Improved service user and carer experience. Resource available for staff to support them to meet the needs of disabled service users and carers. |

Progress Year 2 - Completed for this reporting period

Ongoing work continues to produce a digital Welcome Pack which will provide front line staff (Health and Well Being Centres) with practical advice and guidance about inclusive and accessible communication. It was initially planned to have this in hard copy but subsequently decided it should be available digitally so that it is readily accessible and for ease of updating when new information emerges. Being led by the Belfast Trust – this resource will be shared across the region in the interest of extending best practice.

| Action Measure | Description |
|---|---|
| We will work with relevant organisations to adopt a communication standard in line with the Accessible Communication Standard in England to ensure information is accessible for all disabled people including those with autism and those with communication disability. | Establishment of a consistent communication standard across all Trusts. Improved communication with service users and carers. Improved experience for people using our services. Improved accessibility to information and services. |

Progress Year 2 - Completed for this reporting period

A Regional Accessible Communication group has been established. Membership includes HSC Trusts, Disability Action, RNIB, Action on Hearing Loss, RNIB and Mencap.

The purpose of the Group is to guide the development and implementation of a communication standard in line with the Accessible Information Standard in England for the provision of appropriate communications support and personalised accessible information to disabled people by health and social care organisations. It has been agreed that a round table discussion should be convened to explore how this information standard could be taken forward across HSC Northern Ireland – drawing down from those with experience of taking this initiative forward in England and Scotland.

Section 2 – Supporting full participation of disabled people by improving accessibility

We have done much work over the years in enhancing the accessibility of health and social care services but disabled people continue to tell us that barriers to full accessibility remain. We are committed to working with disabled people on the initiatives listed below to improve accessibility for and participation of disabled people when accessing our buildings, information and services.

Actions to promote positive attitudes towards disabled people

| Action Measure | Description |
|--|---|
| We will work with disabled people to make sure we are ready for the introduction of new legislation including: Mental Capacity Age Discrimination (Goods/Facilities/Services) | Actions plans available to ensure readiness for forthcoming legislation |

Progress Year 2 - Completed for this reporting period

The Mental Capacity Act (NI) 2016 ('the Act') is a piece of legislation which, when fully implemented, will bring together mental capacity and mental health law for those aged 16 years and over within a single piece of legislation. The Deprivation of Liberty Safeguards as set out in the Mental Capacity Act (Northern Ireland) 2016 (MCA) became law on 2nd December 2019 - following an extension by the Department of Health. The Act provides a statutory framework for people who lack capacity to make a decision and people who now have capacity but wish to make preparations for a time in the future when they lack capacity. Where a person who lacks capacity is being deprived of their liberty, the Deprivation of Liberty Safeguards must be applied.

This new law states that by December 2020, the Trust must make sure that everyone who is currently deprived of their liberty has been reviewed and safeguards have been put in place by a special Trust Panel known as a Trust Authorisation Panel which can authorise a 'deprivation of liberty'. There are different levels of training – according to people's role within the Trust and under the legislation– much of this is mandatory. Simulation training was convened for practitioners to help them understand the complexities and intricacies of the legislation and its implementation. A Mental Capacity Implementation Team has been established along with appointment of Short Term Detention authorisers and coordination of Authorisation Panels. Much of the work has been led regionally to coordinate implementation and ensure consistency of approach across the region. Regular regional meetings are convened with the Department of Health and Trusts. Regular newsletters are produced to ensure there is a high level of awareness.

| Action Measure | Description |
|---|---|
| We will review how we communicate with and seek feedback from disabled people (staff and service users) | Introduction of new methods of seeking feedback and communication identified such as Citizen Space. |
| resultation in an area proprie (etail and control accord) | Todair do Gillear Opacor |

| about health and social care and develop guidance to |
|--|
| ensure effective engagement in the future |

- Use of all available media (including social media) considered.
- Guidance available for staff to ensure effective engagement with disabled people.
- Improved development of policy and practice by drawing on wide range of views and experiences.

The Regional Initiative 'Care Opinion' – platform facilitates real time feedback from service users and their families. Easy Read formats are available.

HSC Trusts have used CitizenSpace successfully in the past when engaging with S75 groups including the disability sector on the development of their current Equality and Disability Action Plans.

HSC Trusts are committed to the principles of the <u>Co-Production-Guide.pdf</u>. HSC Trusts, other Arms-Length Bodies and the DOH are the only public bodies in Northern Ireland which have a statutory duty to involve and consult its stakeholders, therefore the guide augments and builds on the requirements set out in the current PPI Policy. The goal is to support transformational change through a co-productive approach and promote the opportunity for all sections of the Northern Ireland community to partner with health and social care staff in improving health and social care outcomes. This guide illustrates the commitment to a system that partners and organises health and wellbeing with people, for people, and by people. HSC Trusts PPI Annual Reports provide further detail.

Actions to encourage participation by disabled people in public life

| Action Measure | Description |
|---|---|
| We will work with representative groups to develop an accessibility checklist to ensure that health and social care facilities are considered accessible spaces for all. Progress Year 2 – Completed for this reporting period | Accessibility checklist for health and social care facilities developed in partnership with ECNI and voluntary and community sector. Health and social care facilities accessible for service users and carers. Information from checklist to support prioritisation of programme of accessibility works. Resource developed to promote best practice in the built environment including autism friendly spaces. Promotion of best practice when working with colleagues on modernisation projects or new builds. Guidance available on autism friendly spaces. Promote principles of autism friendly spaces and services. |
| Using an adapted version of the ECNI accessibility audit tool it | is hoped that a range of changes will be implemented and developed. using an |
| 'Access Checklist' to ensure physical environments are more a | ccessible. Learning will be shared across the Trust and regionally. |
| 'Access Checklist' to ensure physical environments are more a Action Measure | ccessible. Learning will be shared across the Trust and regionally. Description |

Progress Year 2 – Ongoing Rollover year 3

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 public consultation supported the recommendation that the Business Services Organisation would be commissioned to supply Regional Communication Support Services (RCSS) for deaf and hard of hearing people who need to access to health and social care across Northern Ireland. The RCSS service development has been driven by the need to improve the accessibility, quality and safety of current communication support to service users as intended by RQIA in its

Recommendation in 2011. The RCSS Service Delivery Model has been developed based on the recommendations from the review of communication support in 2016. Over the reporting period a number of meetings have been held with sign language service users and a range of organisations and individuals across all HSC Trust areas, providing an opportunity to discuss the service model. Work on developing the model continues.

| Action Measure | Description |
|--|--|
| We will join the Equality Commission's 'Every Customer Counts' initiative to try and ensure that services and the physical environment are accessible. | Public commitment to 'Every Customer Counts' and formal sign up by all Trusts being a campaign signatory. Health and social care services accessible and open to all potential service users and carers. Raised awareness of three good practice guides to illustrate reasonable adjustments which have been made by various service providers in a range of sectors. |

Progress Year 2 – Completed for this reporting period

Every Customer Counts is an initiative developed by the Equality Commission to help organisations to make their services more accessible and inclusive to all our service users, patients, visitors and carers. The aims are closely linked to HSC Trusts regional values.

A regional workshop was held during the year under review. Attendees included Section 75 Equality Leads, a representative from AccessAble UK and Estates officers from each HSC Trust. The Equality Commission for NI have developed a <u>self-audit tool</u> which the sub-group agreed could be used to evaluate how accessible services are. The sub- group has had its initial meeting and are in consensus that it would be more appropriate and feasible to undertake this audit in a number of key areas in the first instance and then mainstream and roll out good practice across other sites on an incremental basis.

Estates officers agreed to work collaboratively and in collaboration with AccessAble UK to identity a few pilot sites where work could commence on the introduction of Accessibility Guides to provide ease of access for patients, clients, visitors and staff.

Section 3 – Supporting full participation of disabled people in our workforce

We know that there continues to be gaps between the proportion of disabled people employed in health and social care compared with non-disabled people. We are committed to ensuring that disabled people are afforded equality of opportunity in respect of entering and continuing employment in health and social care. We will work in partnership with disabled people to make sure our employment policies and practices and working environments are as inclusive and accessible as possible. Please note the nature of the actions detailed below will relate directly to participation by disabled people in public life.

| Action Measure | Description |
|---|--|
| We will work in partnership with Recruitment Shared Services to promote a review of recruitment and selection processes to promote equality and ensure any barriers that may discourage a disabled person from applying are identified and mitigated action as appropriate. | Barriers to recruitment and selection process improved. Best practice model developed in relation to online recruitment. Increased applications from people with a disability. |

Progress Year 2 – Completed for this reporting period

The Health and Social Care Workforce Strategy 2026: Delivering for Our People sets out ambitious goals for a workforce that will match the requirements of a transformed health and social care system. It also addresses the need to tackle serious challenges with supply, recruitment and retention of staff. The Strategy document includes a very detailed look at the workforce issues and challenges facing health and social care in Northern Ireland.

Theme 1 in the Strategy is about Attracting, Recruiting and Retaining and includes the commitment to set up and roll out a regional HSC careers service to help ensure a good supply of people in the future; to inform and excite people on the range of jobs and professions and to publicise health and social care as a career option.

Trusts have been working collaboratively to improve access for those seeking employment with the Trusts. Examples include:

- Improvements in website accessibility providing greater ease of access for job applicants.
- Production of a series of recruitment How to Guides.
- Outreach measures regional and local career events to promote the HSC as an employer of choice.

The deployment of the Regional Disability Tool Kit is soon to commence starting with the Human Resources Directorate. The tool kit will be rolled out to other service managers. This resource was informed with input from the Disability Sector, ECNI, managers and staff across HSC as well as Equality practitioners. The Tool Kit provides very practical advice for both managers and staff when managing disability in the work place and will be used across the region as a resource to aid best practice and understanding of the out workings of the Disability Discrimination Act 1995. The

Equality Commission's recently revised 'Outreach/Positive Action Measures for Employers' will be included within the HSC Disability Tool Kit as soon as it is updated, launched and available.

| Action Measure | Description |
|--|---|
| We will work with staff, schools and disability | Development of our work placements and employability programmes. |
| organisations to promote health and social care as a | Improved awareness of the Trust as a disability friendly employer through |
| disability friendly employer. | increased work placements and promotion at careers conventions. |

Progress Year 2 – Completed for this reporting period

HSC Trusts continue to work with the Disability Sector to promote itself as an Equal Opportunity Employer. Within the body of the Annual Progress report, there is further detail about Positive Action measures aimed at encouraging the participation of persons with a disability in employment, volunteering, job experience.

The Southern Trust hosted a very successful Careers Fair on 6 November 2019 in Newry Leisure Centre. The careers event was promoted in conjunction with the Newry, Mourne & Down District Council. Schools and colleges from across the Newry and Mourne area were invited to attend. A wide variety of HSC careers across all Directorates and specialities were show cased focusing particularly on careers which are currently difficult to attract to. The event was interactive and participative and provided local school age students with a real and meaningful insight into the careers available in HSC.

| Action Measure | Description |
|--|--|
| We will review opportunities for staff to disclose their disability. | Staff encouraged to declare that they have a disability. Promotion of the benefits of disclosure and importance of monitoring. Increased awareness of the importance of staff keeping personal equality monitoring records up to date (via HRPTS). Increased staff disclosure and staff supported. Robust equality monitoring statistics to ensure meaningful analysis to support decision making and benchmark workforce profile. |

Progress Year 2 – Completed for this reporting period

A staff information booklet entitled 'Should I Disclose to My Employer that I have a Disability' has now been produced setting out the benefits of disclosure. Whilst disclosure is voluntary there are clear benefits for an employee in being open and transparent about their disability status. Firstly, it enables an employer, in this instance HSC Trusts, to provide for timely and practical implementation of reasonable adjustment in the workplace for new or existing employees with a disability. This is particularly important where there are health and safety considerations. This staff information booklet draws on best practice advice provided by Disability Action.

| Action Measure | Description |
|--|--|
| We will work in partnership with disabled people and | Promotion of revised best practice guidance on employing persons with a |
| Occupational Health Services to ensure that disabled people are supported to continue in employment. | disability. Development and delivery of bespoke equality and human rights training to |
| | Occupational Health staff. |
| | Awareness campaign to highlight the benefits of referral to Occupational |

| Health - for staff and for managers. |
|--|
| Improved support for disabled staff. |
| More robust reasonable adjustment process. |

The new Disability Tool Kit includes a complete section on Reasonable Adjustments in the Workplace to ensure managers fully understand their legal responsibilities under the Disability Discrimination Act 1995.

The deployment of the tool kit will be underpinned by bespoke training for managers to ensure compliance and importantly the provision of timely reasonable adjustment for new and existing employees with a disability.

| Action Measure | D | escription |
|---|---|---|
| We will develop guidance on supporting people with | • | Co-designed guidance produced which will raise awareness among staff of |
| autism in employment in partnership with representative | | reasonable adjustments for people with autism. |

organisations.reasonable adjustments for people with autism.Promotion of guidance across health and social care.

Progress Year 2 – Completed for this reporting period

A regional Staff information Booklet is almost completed and will be adopted by HSC Trusts. This resource provides practical advice for managers and staff re managing Autism in the Workplace.

| Actions Completed in Year 2 | 14 | Actions Ongoing Rollover to Year 3 | 1 | Actions to Commence | 0 |
|-----------------------------|----|------------------------------------|---|---------------------|---|
|-----------------------------|----|------------------------------------|---|---------------------|---|



Quality Care - for you, with you

Progress Update Local Equality and Disability Action Plans Year 2

Equality Action Plan Local Actions 2018 – 2023

Progress Report Year 2 - 2019-2020

Section 1 – Ensuring the effective discharge of our Section 75 Equality Duties

We want to ensure that the focus is on outcomes for people within the nine Section 75 equality categories and to make a positive difference for them. The following actions are therefore aimed at simplifying the process.

| Action Measure | Description |
|---|---|
| Development of a Regional Toolkit We will develop and launch a new Screening and Equality Impact Assessment (EQIA) Toolkit to guide our staff through the process and ensure the effective discharge of our Section 75 duties. The Toolkit will be disseminated locally to our staff by a variety of means: ➤ The Equality section on staff Intranet. ➤ Internal Trust communications e.g. Southern-i − the Trust's Corporate staff newsletter, Equality in Action newsletter. ➤ Other appropriate channels of communication with staff e.g. team meetings. ➤ Staff training. ➤ Mainstreaming into the Trust's Continuous Improvement Projects. | Toolkit to be used as an integral part of the policy development process. Increased staff awareness of Section 75 processes. The Toolkit will be available for all Trust staff including those responsible for policy development and decision making to ensure robust screenings and EQIAs are completed which takes into account the needs and experiences of Section 75 groups. Ease of mainstreaming the Section 75 equality duties into Trust policy, practice, procedures, decision making processes and the design and delivery of our services. Consistency across the HSC with all HSC Trusts using the same Toolkit which in turn facilitates mainstreaming of the Section 75 equality duties into regional and local work streams. |

Progress Year 2 - Completed for this reporting period

The second draft of the toolkit has been completed. Following a few modifications the toolkit will soon be ready for dissemination. A sub-group has been established to review the Equality Screening Master Class training materials in line with the new Equality Screening Toolkit. Next steps will be to roll out refresher training for policy authors and decision makers, across the Trust, to ensure equality, human rights and the disability duties are considered as an integral part of the policy development/decision making.

| considered as an integral part of the policy development decision making. | | | |
|---|---|--|--|
| Action Measure | Description | | |
| throughout the Trust We will review the Trust's PPI Strategic Action Plan. We will update the Trust's Consultation Scheme in line with regional guidance and ensure that the Section 75 equality duties are an integral part of this scheme. We will update the Trust's PPI Toolkit for staff to facilitate the mainstreaming of PPI and Section 75 equality duties throughout the Trust's Directorates and functions. We will promote the uptake of the PPI Awareness E-Learning training module and deliver face to face training to teams. | Development and implementation of Corporate and Directorate PPI Action Plans. Production of annual reports to reflect progress against the regional PPI standards. Cohesion between PPI and Section 75 equality duties. Revised Consultation Scheme which reflects regional guidance and incorporates Section 75 equality duties. Toolkit available for all staff to facilitate the mainstreaming of PPI and Section 75 equality duties. Completion of PPI Awareness E-Learning module by staff. | | |

We will provide PPI support to Directorate teams on request. We will support the development of the PPI panel. We will monitor PPI through the Patient & Client Experience (PCE) Committee (Sub-Committee Trust Board).

We will work with regional partners Department of Health, Public Health Agency, Regional PPI Forum, Patient Client Experience through the Patient Client Experience Committee to streamline PPI, Co-production and PCE and maximise links with complaints and quality improvement.

- On-going PPI to Directorates teams.
- Progress measured via PPI annual progress reports.

Progress Year 2 – Completed for this reporting period

In partnership with the Trust's Service User and Carer PPI Panel we have:

- Reviewed the Trust's PPI Strategic Action Plan (2010) developed a review report and a new PPI Framework "*Involving for Improvement*". This together with the PCE framework feeds into the Trust's new Quality Strategy 2017 2021.
- The PHA has undertaken to update, refine and agreed a Template for Consultation Scheme to ensure that the Section 75 equality duties are an integral part of this scheme.
- The Trust's PPI Toolkit for staff to facilitate the mainstreaming of PPI and Section 75 equality duties throughout the Trust's Directorates and functions has been updated and a dissemination plan in place to ensure Service teams have access to same. Although Teams are allocated a hard copy of the 'PPI Toolkit', a PDF format can be accessed via the Trust's website, Intranet and SharePoint locations.
- The Toolkit has also been made available on SharePoint.
- PPI continues to be monitored through the Patient & Client Experience (PCE) Committee (Sub-Committee Trust Board).
- On-going participation in the PHA's annual performance management reviews and provided up-dates on progress against the recommendation of the PHA's PPI Monitoring Reports.
- Worked with regional partners Department of Health, Public Health Agency, Regional PPI Forum, Patient Client Experience through the Patient Client Experience Committee to streamline PPI, Co-production and PCE and maximise links with complaints and quality improvement. A joint action plan will be developed for PCE and PPI to demonstrate involvement and equality.
- Annual reports demonstrating evidence of compliance with PPI responsibilities and the work undertaken to address challenges in this area.

In addition, the PPI team has:

- Promoted the uptake of the PPI Awareness E-Learning training module and delivered face to face training to teams.
- The PPI team has also developed a 3 Step PPI training programme to ensure consistency in training for all Trust staff and service users.
- The content of the training has been aligned to the Regional Engage & Involve Overview module "Introduction to PPI and Co-production" and a training schedule has been implemented.
 - > Step 1 (Involve & Engage E-Learning Module) is an introduction to PPI, Co-production and User Involvement.
 - > Step 2 (Involve & Engage Training) consists of a 'co-delivered' training tool for staff to support user involvement, facilitation skills, increased PPI activity and measuring impact.
 - > Step 3 (Involve & Engage Team Talk) comprises of training which supports Teams to undertake and embed PPI practices and promote their understanding of PPI and Co-production approaches.
- Increased the number of staff completing PPI training and a database to provide accurate figure of staff trained.

- Provided PPI support to Directorate teams on request.
- Supported the further development of the PPI Panel; training has been procured from the Leadership Centre to upskill and support development.
- Funding for the bank of B5 service user and carer consultants came to an end March 2020. The value of these post will be measured to demonstrate value and efficacy of role
- The £90k non-recurrent resource to improve our PPI network infrastructure and allocated this through a small grants programme for service teams to promote/advance Personal & Public Involvement (PPI) –involvement, partnership and co-production approaches including the development of Trust based Citizen Hubs 31 applications received (MHD =12, CYP = 9, OPPC =7, Acute =3) a draft small grants report is available upon request.
- Work has been ongoing to develop a Patient Client Experience Improvement Strategy for the Trust, engaging PPI, Patient Client Experience, Equality, Quality Improvement and Complaints and Compliments departments. A workshop to commence the development of this strategy took place in January 2020.
- Shared case studies on a range of PPI activity across programmes of care for publication on the ENGAGE website, currently trying to develop other ways to evidence and share good practice.

| Action Measure | Description |
|--|--|
| Engagement with Stakeholders | Guidance on effective engagement in place for all Trust staff that links |
| We will roll out regional good practice guidance on effective | PPI best practice with the Section 75 equality duties and related |
| engagement and consultation. | Department of Health Guidance. |
| | Consistent approach used across health and social care on effective |
| We will include the use of new assisted technology such as Citizen | engagement. |
| Space to engage meaningfully and effectively with stakeholders. | More effective and timely engagement with stakeholders. |

The Trust's PPI Toolkit is a principle sort of reference for all HSC staff in facilitating effective engagement. This Toolkit has been recently updated. Trust Equality Leads fed into this review process to ensure read across between the Trust's Consultation Scheme, PPI Toolkit and the Trust's Equality Scheme and related circular guidance from the DoH e.g. 'Change of Use and Withdrawal of Services'. PPI training continues to be proactively rolled out across the Trust.

| Action Measure | Description |
|--|--|
| Promotion of the Role and Function of the Equality Unit We will continue to raise awareness of the role and function of the Trust's Equality Unit to ensure that staff, Trade Unions and Section 75 groups are aware of available expertise, advice and support. | Local communication strategy in place to proactively promote the Trust's corporate commitment to its equality duties as set out in its Equality Scheme. Increased awareness amongst staff, Trade Unions and Section 75 groups as to the role and function of the Trust's Equality Unit. Equality in Action Newsletter widely disseminated through established Trust Networks as well as external Section 75 networks to promote the role, function and activities of the Unit to include themed coverage on specific topics of interest. We will participate and promote the work of the Unit through annual best practice show case events and also proactively via new and established Section 75 networks. |

The Equality in Action Newsletter continues to provide a valuable source of information for the Trust Board and Trust Staff on the key achievements of the Equality Unit. This year's Newsletter provides a summary of some our key achievements for the reporting period 2019-2020.

This is supplemented throughout the year with specific and timely new items in the Trust's Southern-i (Staff Newsletter) and important messages on computer desktop. The Trust's new on-line App, which was under development at the time of completing this year's Annual Progress Report, will also be a further conduit to get out important and timely information to staff on equality matters et al.

The Unit continues to build and expand its SharePoint site to provide an extensive source of information on Equality, Good Relations and Human Rights, e.g. practical tool kits, current policy and guidance together with Management and Staff Information Booklets. A number of new resources were added to SharePoint during the year under review, examples include: a Brexit tile with a range of information including information on the EU Settlement Scheme – rights and entitlements; Disability Tool Kit, Disability Etiquette Booklet, Staff information Leaflet entitled 'Should I Disclose to my Employer that I have a Disability; soon to be added 'Managing Autism in the Workplace' which contains practical and useful information for managers and staff with Autism. Subject to regional Trade Union endorsement a new Disability Equality Policy, a newly revised Equality, Diversity and Inclusion Policy and Trust Board Guidelines - outlining the Trust's statutory obligations as they relate to S75 equality duties, Human Rights considerations, PPI and relevant Departmental Guidelines as well as established principles derived from case law et al.

| Action Measure | Description |
|--|---|
| Implementing the Age Discrimination Regulations We will work with Department of Health and other relevant stakeholders to ensure the local implementation of the Age Discrimination Regulations into the sphere of Goods, Facilities and Services provision. | The Trust will participate in the planning and organisation of a regional event to raise awareness of potential implications of the new Age Discrimination legislation and the implications for health and social care provision. Better understanding amongst staff re the implications of the new legislation. |

Progress Year 2 – Ongoing Rollover Year 3

This legislation has yet to be enacted by the local Assembly – progress has since been hindered by Covid-19 planning.

Covid-19 did however bring to the fore the need for this legislation to be enacted especially in regard to the management of older persons in Care Home settings. The NI Human Rights Commissioner recent call for this legislation to be brought forward by the NI Assembly.

| Action Measure | Description |
|--|---|
| Quality/Continuous Improvement Projects We will work with the Trust's Continuous Improvement Team to mainstream our Section 75 equality duties, disability duties and human rights obligations in our: ➤ Continuous Improvement projects/work streams and our ➤ Quality Leader Programmes - undertaken by both our staff and service users. | Provide all participants undertaking Quality Improvement projects with access to the 'Equality, Good Relations & Human Rights –Training manual for staff', 'Making Communication Accessible for All' – a guide for HSC staff and the Equality Commission's 'Every Customer Counts' publication. Presentation to participants on equality, diversity, human rights and Section 75 obligations. Provide specific training to participants to ensure the Section 75 equality duties are adhered to including the completion of equality screenings and, where appropriate, EQIAs as part of informing their project initiation |

| obligations. • Greater awareness of | on the role and function of the Trust's Equality Unitervice users undertaking continuous improvement |
|--------------------------------------|--|
|--------------------------------------|--|

Section 75 considerations continue to be mainstreamed with the Trust's Continuous Improvement work streams.

The launch of the newly developed Equality Screening Tool Kit and associated Equality Screening workshops will further facilitate the mainstreaming of the Section 75 equality duties. This training is currently under review in line with the revised regional screening toolkit.

This will provide for greater consistency across HSC organisations when rolled out.

| Action Measure | Description |
|--|--|
| Roll out of the Level 3 Award in Quality Improvements We will support the roll out of the Level 3 Award in Quality Improvements to include service users, carers and community and voluntary sector organisations in the Southern Trust area. NB: New initiative being offered for the first time by the Trust to service users, carers and community and voluntary organisations. | Roll out of the Level 3 Award in Quality Improvements to service users, carers and community and voluntary organisations. Development of knowledge and skills and involvement of service users, carers, voluntary and community organisations (Section 75 groups) in quality improvement activities and Section 75 obligations. Supports the Trust's Corporate Social Responsibility policy by empowering local citizens to participate in an accredited training programme aimed at bringing about quality improvements in service provision. |

Progress Year 2 - Completed for this reporting period

Three new cohorts commenced:

- 1. Autism Services 6 young people with autism working on personal projects. Their aim is to gain skills that will help with employment in the future.
- 2. SHSCT PPI 2 service users, South Eastern Trust PPI Lead, Belfast Trust PPI Lead, SHSCT PPI Lead and 3 SHSCT PPI staff co-produced project to create regional SCOPE programme to support service users and carers to become involved in co-production.
- 3. Supported Living 3 support staff co-producing improvements to living areas with tenants.

| or experies ziring to support stain of producing improvements to irring areas than tenants. | | |
|--|---|--|
| Action Measure | Description | |
| Staff Training – Screening and Equality Impact Assessments (EQIA) We will review our staff training to ensure best practice is followed when screening and conducting EQIAs. | Up-to-date training programme available for all our policy makers to ensure best practice is followed when screening and conducting EQIAs. Revised training programme rolled out across the Trust over the life span of this Plan. Staff appropriately skilled to undertake equality screenings and EQIAs. Compliance with Section 75 equality duties. | |
| | | |

Progress Year 2 – Ongoing Rollover Year 3

A regional sub-group was set up during the year under review to develop a new training programme to underpin and support the roll out of the new Equality Screening Toolkit for policy/ decision makers. At the time of writing progress in this regard was slowed down due to Trust's response to

| Covid-19 (resulting in many business as usual activities being paused to support essentially service delivery). Section 75 Equality Leads will pick this up moving forward as business activities resume post Covid-19. | | | |
|--|---|--|--|
| Action Measure | Description | | |
| Procurement Guidelines We will review our procurement processes and develop guidance to ensure that the Section 75 duties and effective engagement are embedded into service specification development and tendering processes. | New guidance for Trust staff who are involved in procurement. Raised staff awareness of Section 75 good practice when developing service specifications and tendering. Evidence that Section 75 duties are embedded in procurement processes. | | |
| Progress Year 2 – Completed for this reporting period A newly drafted flowchart has been developed. This is to be shared with relevant colleagues e.g. Finance and Procurement for informed comments and discussion with a view to integrating into procurement training. | | | |

Section 2 - Promoting Equality in our Services

The following actions have been developed in response to what we have heard and are aimed at providing welcoming, person-centred and accessible services for everyone.

| Action Measure | Description |
|---|---|
| Access to Cook It programme for BME, Traveller population and people with a learning disability | We will continue to promote the BME Cook It recipes to all facilitators to promote cultural awareness and encourage uptake of the programme across BME and Traveller groups. We will continue to train and support 'I Can Cook It' facilitators to deliver the programme to adults with a learning disability. |

Progress Year 2 – Completed for this reporting period

Cook it! continues to be widely accessed by groups across Southern Trust area. The Facilitator training continues to focus on cultural appropriate messages, dietary patterns and food traditions of minority ethnic groups. Trained facilitators can access one to one sessions on the BME module when needed and are supported with programme delivery to those groups. 43 x 6 week Cook it! programmes have been delivered in 2019/20.

15 new I can Cook it! facilitators were trained in 2019-'20. 12 eight week I can Cook it! programmes were delivered across the southern area for adults with a learning disability.

14 new facilitators were trained on the updated Food Values programme in 2019-'20 and 8 programmes were delivered.

| Action Measure | Description |
|------------------------|--|
| Traveller Action Group | Complete a review of progress to date and agree priorities for improving Traveller health and wellbeing. Key priorities identified through both the regional Traveller Health and Wellbeing Forum and the Trust's local Traveller Action Group. Signposting and provision of information to ensure Travellers are aware of available services, referral pathways to improve their health and wellbeing. Traveller development further embedded. Further development of the Health Champion and Health Trainer programme. Creation of employment and volunteering opportunities for Travellers within the Trust and partner organisations. |

Progress Year 2 – Completed for this reporting period

- Completed a review of progress to date and agree priorities for improving Traveller health and wellbeing.
- Identified key priorities through both the Regional Traveller health & Wellbeing Forum and Trust's local Traveller Action Group.
- Commissioned and supported local Traveller Support Groups to signpost and provide information to ensure Travellers are aware of services available and referral pathways to improve their health and wellbeing.

- Further embedded Traveller development through its Traveller Health & Wellbeing training programme.
- Pregnancy information booklet for Travellers "Our Pregnancy Journey" published and circulated. Second updated edition.
- Information leaflet on risk of Melanotan injections and nasal spray published and widely circulated.
- Volunteering opportunities developed through partnership working with Volunteer Now.
- CHC continued to link in with Traveller women's groups in their local areas and while they do not want the responsibility or commitment to deliver programmes, are happy to bring the relevant messages home and share with wider family circle.
- CHC's and CHT's are regularly informed of all training programmes.
- Within the various Traveller women's groups and Traveller men's groups TCDO continues to encourage participants to take home to their family messages, information and resources discussed. Due to the relationship with the groups a number of previously taboo topics were able to be discussed; breast, cervical and bowel screening and checks; domestic violence; the importance of looking after your mental health
- The current model for sharing health and wellbeing information, activities, engaging with external facilitators works best and is rolled out to Traveller women, young women, men and youth groups across the Southern Trust areas.

| Traveller trement, yearing trement, ment and yearing earlies are estation. | |
|--|--|
| Action Measure | Description |
| Carers Rights and Entitlements We will work with the current Carers Support Provider to ensure | Increased awareness of carers' rights and entitlements amongst Section 75 groups. |
| delivery of contracted services to meet needs of carers. | Increased awareness amongst our staff, who are carers, as to their statutory rights and entitlements and supports. |

The Trust continues to develop and implement its Carer Support Framework and action plan and monitor progress through its Carers Reference Group and Governance Committee.

Social work teams across programmes of care each have a Carer's Champion to ensure that all relevant information on carers is shared across all teams. The champions continue to meet quarterly following on from the Trust Carers Reference Group Quarterly meetings.

- Teams are continuing to use the Qlik View app to monitor the number of carers assessments offered within teams.
- Carers awareness events were held in the three Trust localities in February 2020 for staff members who are also carers, these events advised staff of their rights as carers, support services and organisations available to them. Relaxation therapies were also offered each day.
- A pilot of The Carers Conversation Wheel took place in the Physical Disability Teams with very positive feedback received from carers and staff, the pilot has now been extended to the Addictions Service.
- All Carers resources have been updated and circulated. The resources include: Support Services and Resources for Carers; Support Groups Directory; Carers Assessment Guidance for Staff; Carers Register Leaflet; Carers Needs and Support Plan Leaflet.
- Carers Useful Contacts List has been up-dated for 2019/2020 and added to the Support Services and Resources Booklet for Carers.
- Carers continued to be involved in the design, development and implementation of new services and the evaluation of existing services.
- Carer's awareness training for all Trust staff developed and available currently as a presentation delivered to teams, or can be downloaded from SharePoint. Online training is currently being explored.
- Short Breaks pilot programme is complete and specialist child minding scheme is running six Specialist child minders now on registered.
- Carers Trust NI, CAUSE, Alzheimer's Society, Action Mental Health ADAPT contracted community providers for carers support across the Trust.
- Carers continue to be a standing item on team meeting agendas.

- Connection made with British Deaf Association regarding best methods of communication with deaf carers.
- A scoring tool has now been identified by the HSC board as a regional initiative. SHSCT has lead on a region-wide working group to examine the implications of a scoring tool to help assess for and allocate short breaks for carers. The draft in partnership with all five Trusts and has been sent to HSC Board for consideration.
- Acorns for Autism Charity works with parents/carers, meeting on a bi-monthly basis. Parents/carers forum meeting is held on the 1st Wed each month. This is jointly led by parents and clinicians and is drop in service questions and answers.
- The Learning Disability Carers forum Facebook page is continuing to increase in numbers with approximately 300 members following the Facebook page which shares information. The Trust is also developing its e-mail database so that can share information for carers of Adult Learning Disability in a more timely manner.

• Teams continuing to make use of the Trust SharePoint for information and training.

| Action Measure | Description |
|---|---|
| Health and Wellbeing for people with disabilities Targeted programme for people with disabilities. | Implementation of the Fit 4 U project, engaging 160 service users with physical/sensory disabilities and 100 people with a learning disability in physical activity sessions in local leisure services. Implementation of a Health and Wellbeing improvement plan for learning disability services within SHSCT. |

Progress Year 2 – Completed for this reporting period

The Southern Trust Fit 4 U Project has continued to work in partnership with local Councils and Everybody Active coaches to deliver a range of physical activity and sports opportunities for adults with disabilities at local Leisure Centres across the Southern Trust area. This has included adults with physical/sensory disabilities (Fit 4 U) and adults with learning disabilities (Fit 4 U 2).

From April 19 - March 20

Fit 4 U (physical/sensory disability) and Fit 4 U 2 (learning disability) has provided weekly physical activity sessions in 5 leisure centres across the SHSCT, in Armagh, Dungannon, Craigavon, Banbridge and Newry:

- A total of **194 physical activity sessions** were facilitated for adults with physical/sensory disabilities. This consisted of 20 leisure centre based programmes, 5 walking groups, 35 monthly competitions, 1 special Olympic themed event and 1 pilot programme at Kilkeel Leisure Centre.
- A total of **181 individuals** with **physical/sensory disabilities** participated, including 59 new individuals.
- A total of **207 physical activity sessions** were facilitated for adults with learning disabilities. This consisted of 20 leisure centre based programmes, 5 walking groups, 2 Day Care programmes, 1 special Olympic themed event and 1 pilot programme at Kilkeel Leisure Centre.
- A total of **249 individuals** with **learning disabilities** participated, including 92 new individuals.
- Overall, 11 volunteers supported delivery. 5 volunteers supported Fit 4 U (physical/sensory disability) and 6 volunteers supported Fit 4 U 2 (learning disability).
- Fit 4 U staff, volunteers and coaches participated in a range of training, to build capacity in delivering and engaging participation among people with disabilities. This has included Autism Awareness, Walking Football, Epilepsy Awareness, Emergency First Aid, Safeguarding Vulnerable Adults, Disability Awareness, Signs & Symbols Makaton Training, Mental Health First Aid, MAPA Personal Safety, Archery Instructor and Boccia Leader Training. Overall, 34 participants trained.

| Action Measure | Description |
|---|---|
| Social Interaction Group This group comprises of Asian, Arabic, Irish and refugees. It aims to relieve segregation and social isolation and to promote community wellbeing for both young and older residents living in the Armagh Banbridge and Craigavon (ABC) Council areas. | Further development of the Social Interaction Group to include committee skills and capacity building and training. Work with the ABC Council's Good Relations and Community Development staff to facilitate planning days for this group. Provide support in identifying key priorities and a tailored action plan aimed at tackling inequalities. |

Progress Year 2 – Ongoing Rollover Year 3

There was an initial health and wellbeing/tackling inequalities focus of the group. In year 1 funding was secured for a health fair, the CD worker also provided information on Charity Commission requirements and was working with the Committee to ensure good corporate Governance to meet CC regulations.

ABC Council Good Relations and Community Development Worker continued to work in Partnership with the group seeking to agree a new action plan; focus of plan appeared to be in relation to intercultural events. Committee agreed to move their action plan out a number of months. This will be picked up later in the year.

| Action Measure | Description |
|---|--|
| 10,000 voices, Patient Experience- Section 75 Engagement Plan We will work with the 10,000 voices facilitator to ensure that patient stories and patient experiences are captured from hard to reach Section 75 equality groups e.g. BME and Travellers and LGBT communities. | Questionnaires translated into different languages and disseminated via the NI Health and Social Care Interpreting Service to ethnic minority groups. Ease of completion by ethnic minority groups. |
| N | |

Progress Year 2 – Ongoing Rollover Year 3

10,000 More Voices

A Trust engagement plan is developed for each 10,000 voices regional survey to encompass the Section 75 groups. 10,000 More Voices Surveys live 2019/2020:

- Experience of engaging Mental Health Service service user survey
- Experience of working in Mental Health Services staff survey
- Experience of living with Swallowing Difficulties
- Experience of Children's Audiology services
- Experience of living in a care home
- The carer experience engaging intermediate care/re-ablement services.

New Regional Online Service User Feedback Care Opinion – Launch Date 1 April 2020 (postponed due to Covid 19)

Preparation Work underway within SHSCT from September 2019 with appointment of Care Opinion Facilitator in September 2019.

Care Opinion is an independent non-profit feedback platform for health and social care. Care Opinion will provide access to their managed and moderated service that they provide for health and social care services in other UK jurisdictions. Care Opinion is used by all health boards in Scotland and integrates with NHS UK which provides a feedback service in England. Care Opinion Ireland provides the same service for health and social care provision in a number of services in Ireland.

Health and social care stories are captured on a website which presents stories, both good and bad, along across HSCNI services, for all programmes of care. Stories can shared online, using a written hard copy or through a Freephone number. A whole system approach is being adopted for Northern Ireland, embracing HSCNI, independent sector which interfaces with HSC and commissioned services in Community & Voluntary Sector. Care Opinion will publish feedback and responses from the service providers on its website where both the individual providing the feedback and the wider public can see the outcome. Responding to the feedback in an open and transparent manner supports a shift in culture and builds upon relationship based care. Responses should be person centred and engage with the experience, either good or bad, to reinforce to the patient their story has been heard. As part of the commitment to responding, responses to stories relating HSCNI will be within 3 days of receiving the feedback.

At SHSCT Implementation Group we have explored the use of Care Opinion in different languages including the translation facility. The Project Lead identified that the top 10 SHSCT languages were included on the website, only exception is Tetum.

Top ten languages used in SHSCT are as follows:

- Polish
- Lithuanian
- Portuguese
- Tetum
- Bulgarian
- Romanian
- Arabic
- Latvian
- Russian
- Slovak

We are considering an approach for service users who speak Tetum, possibly use an interpreter. This will be followed up during 2020/21 to see how best to engage the Tetum community with Care Opinion.

| best to origage the rotal rotal community with early opinion | |
|--|---|
| Action Measure | Description |
| 'What Matters to You' Campaign | Roll out of 'What Matters to You' campaign to encourage patients, |
| We will support the roll out of a number of experience/engagement | service users, carers and our staff to share what matters to them. |
| initiatives including the 'What Matters to You' campaign. | Support meaningful conversations between those who provide health |
| | and social care and the people, families and carers who receive it. |
| NB: The Trust is one of the first in NI to join the campaign which | Campaign to be rolled out to all acute settings – Daisy Hill, Craigavon |
| originated in Scotland. | and Lurgan hospital sites. |
| | |

Progress Year 2 - Completed for this reporting period

CYPS held their WMTY Sharing Event on 7 June 2019 in Dromantine Conference Centre – 167 delegates attended.

Feedback from previous years was shared with delegates.

Service users and carers presented and shared their experiences.

Presentations included Senior Safety Walks, Welcome Packs for Unplanned Attendance to Paediatric Ward, Discharge Leaflet Project, CYP Newsletter, Development of Paediatric Epilepsy Service, Staff Safety Survey.

| There were several breakout sessions for staff and service users including Human Factors, Coaching and Quality Improvement. | |
|--|--|
| Action Measure | Description |
| Traveller Women Engagement Project We will work with the Traveller Health Training Co-ordinator on a range of projects e.g. the '10,000 More Voices', skin cancer awareness campaign and the 'Aware Emotional Health and Wellbeing Traveller Programme'. | Engage with Travellers to capture their experience using the 10,000 voices questionnaire in targeted setting using assertive community development approach. Empower Travellers to have their voice heard as part of the patient client experience initiative. Information gleaned on experience will inform the co-production of the Traveller staff booklet and the Multi-Cultural and Beliefs Handbook. |

Linked in with Traveller Community Development Officer about new online feedback Care Opinion. The Development Officer welcomed this and felt that this community will access this through their mobile phone. Once system goes live regionally awareness sessions are planned on Care Opinion with this group within SHSCT.

| Action Measure | Description |
|--|---|
| Annual Best Practice Show Case Event We will participate in an annual event to showcase best practice in equality and diversity within health and social care. | Host an annual Equality and Diversity event. Health and social care seen as a sector that promotes equality and diversity. Improved awareness of equality and diversity and best practice models. Best practice in equality and diversity shared across health and social care and beyond. |

Progress Year 2 - Completed for this reporting period

The second annual showcase best practice event 'Supporting Carers in the Workplace' was held on Thursday, 20 February 2020 in Mossley Mill, Newtownabbey. It was attended by over 70 Health and Social Care employees who are currently working whilst caring for a family member or friend.

This event was supported by Carers NI and Employers for Carers. The programme included learning how to manage caring responsibilities alongside working and how to build techniques that can help. The event provided everyone with the opportunity to share their stories and provide feedback on supports that would be beneficial to staff. This will contribute to the development of guidance and training for managers on how they can support working carers.

| can support working carere. | |
|---|--|
| Action Measure | Description |
| Access and Information Further development of the 'Access and Information Service' to include those aged 18+. | Improved access to services and information provision for a wider range of age groups. Smoother and seamless experience, on the part of service users, across all Trust services. |
| | Aiding staff to track the patient and inform discharge planning. |

Progress Year 2 – Completed for this reporting period

Development of Community Frailty Clinic in 2 GP Practices with cohort of patients over 75 years of age to reduce impact of repeat visits to GP's
and reduce presentation at ED by providing a wraparound service with DN, OT & A&I in a single appointment community based setting working
in partnership with these stakeholders.

- Enhanced services for over 65's in relation to Parkinson's and Community Physiotherapy.
- Increased connectivity with usage of social media platforms e.g. Facebook, Twitter to promote A&I services and encourage staff and public alike to 'make the call'.
- Ongoing PPI activity via service user survey of the experience/service received when contacting A&I. This enables the service to be monitored and regularly reviewed and adapted to maintain safe high quality service provision.
- A&I staff present in the 'control room' of CAH to support hospital staff with speeding up discharge and utilising CV sector provider s/asset map developed and held in team as part of step down planning as appropriate to individual need/circumstance.
- Progression and agreement of a new professional social work oversight and operational support structure to be embedded within the Access and Information service to achieve the following overarching outcomes:
 - > Provide a more efficient and timely response to Service Users, Carers and Professionals when referring into Social Work in Integrated Care Teams (ICTs), Primary Care Division via Access and Information.
 - > Reduce the volume of referrals and activity for the current Core team social workers in all 7 Integrated Care Teams and in turn the activity for the Band 7 Social Work Professional Leads.
 - Increase the likelihood of more preventative work being undertaken with Service Users and Carers if referrals and needs are responded to in a more timely manner by working in an integrated and collaborative way with Access and Information Officers; such as being able to utilise the wealth of knowledge/resources available from the Access and Information Officers and team.
 - > Further enhance learning and development for Access and Information Officers and, provide a more consistent response to Social Work criteria for access to the service.

| Action Measure | Description |
|---|---|
| Access to Information in Alternative Formats | Establish a section on the Trust's website of available Easy Read |
| We will have a dedicated section on our Trust's website for materials | material for ease of access. |
| in Easy Read. | Ease of access to an expanding range of information. |

- 1. The Accessible Information Strategy Group have updated the SharePoint tile and added resources to include more templates, a photo bank and a section for virtual tours which is at present being developed.
- 2. We are currently working on how best to put these resources onto the Trust website.

| Action Measure | Description |
|--|--|
| Cancer Information for BME Groups We will engage with Macmillan to ensure core cancer information is accessible to people within ethnic minority groups. | Translate core cancer information literature to make this accessible to cancer patients from BME communities. Increased access to cancer information amongst ethnic minority communities. |

Progress Year 2 - Completed for this reporting period

The Macmillan Health & Wellbeing Service has progressed the development of the translated version of the core information pack given to patients on diagnosis of cancer. The pack is available in the top 5 languages of the Trust.

A cancer service signposting tool is also being translated in the top 5 languages used in the Southern Trust area. This tool has been further developed to include community and voluntary organisations that support BME groups across the Southern Trust.

Section 3 - Supporting our Staff

The following actions help to promote equality of opportunity for our staff and support them to understand their responsibilities in valuing differences and advancing equality of opportunity to ensure an inclusive and welcoming environment.

| Action Measure | Description | | | |
|--|---|--|--|--|
| Gender Identity and Expression Policy We will work with regional colleagues and representative organisations to ensure the local implementation of the Regional Gender Identity and Expression Policy. | Policy in place that promotes an inclusive workplace for transgender and non-binary people. Transgender and non-binary people feel comfortable to express their gender identity and can fulfil their full potential and fully contribute to the workplace. Establishment of a regional Task and Finish Group to ensure the sensitive implementation of this policy. Promotion of best practice across all health and social care organisations. Raised awareness among staff that discrimination against transgender and non-binary people is not acceptable. | | | |

Progress Year 2 – Completed for this reporting period

The policy continues to be implemented across all HSC organisations. No material changes have been made to the policy in light of operational experience. The policy will be reviewed at least once every 3 years in line with the default policy review period and sooner where necessary in light of case management/case law developments.

| Action Measure | Description |
|--|---|
| Employment Opportunities for Marginalised Groups We will work in collaboration with the Equality Commission for NI and relevant stakeholders to extend the remit of our current Employability Scheme to enhance employment opportunities for other marginalised Section 75 groups. | Liaise with the Equality Commission to explore the feasibility of extending the Employability Scheme to other marginalised Section 75 groups. Access to employment is improved for marginalised Section 75 groups. |

Progress Year 2 – Ongoing Rollover Year 3

The working group met twice during the current reporting period. The Equality Commission for NI were asked to participate in the group discussion. The group benefited from the Commission's input and in particular their advice on positive action measure open to employers in seeking to increase the participation of persons with disabilities in employment.

The Director of MHD was to seek inclusion of the Disability employment scheme within the Trust's planning agenda and within the Corporate balanced score card as a key corporate planning objective, but due to Covid-19 pressures and the priority to maintain essential service provision progress of this activity has been affected.

| Action Measure | Description | | |
|--|--|--|--|
| Promoting Staff Health and Wellbeing We will revise and launch our staff health and wellbeing strategy and action plan. We will use the recently established Health and Wellbeing Information Hub/Centre in Craigavon Hospital as a means to: > further engage with our staff to disseminate information to support our staff in managing their own health and wellbeing e.g. mental health awareness, cancer awareness and the | The Trust staff Health and Wellbeing Steering Group will revise the strategy and implement an annual action plan. Utilisation of the Health and Wellbeing Information Hub/Centre to disseminate and promote health and wellbeing information and initiatives available for our staff. | | |
| range of Trust led programmes available for staff e.g. mindfulness, take 5 steps to wellbeing, relax and rewind, cycle to work, etc. > target the specific health needs of staff e.g. men's health week. | Work with the local carers co-ordinators to ensure that our staff who are carers are supported in the workplace. Improved health outcomes for staff. | | |

- A Health and Wellbeing Room has been opened in Daisy Hill Hospital for visitors, service users and staff attending the hospital to access health and wellbeing information and services.
- Promoting Wellbeing staff, acute staff and voluntary sector providers use the room to promote awareness of health issues and signpost people to appropriate services. The Stop Smoking Service, PPI team and Community Advice Service are currently offering their services on a weekly basis. Staff blood pressure clinics have also used the HWB Hub and HWB room.
- A Promoting Wellbeing Resource Wall Holder has been erected outside of the HWB room so that resources can be accessed if the room is being used. The HWB Room also continues to be well utilised by community and voluntary staff including Alzheimer's Society, Arthritis Care, and Orchard Women After Stroke Group. Staff also continue to run their campaigns and initiatives from the Hub in Craigavon.

| Action Measure | Description |
|---|---|
| Staff as Service Users | Improvements in service provision as a result of listening and learning |
| We will support our staff to seek out quality improvements to our | from the experiences of our staff as service users. |
| services by actively encouraging them to partake in the '10,000 | Services more accessible by Section 75 equality groups. |
| More Voices' campaign. | |

Progress Year 2 – Completed for this reporting period

- 10,000 More Voices continues to be actively promoted throughout the Trust through:
- SHSCT Facebook, Twitter, all Trust digital screens, Trust Event, engagement with staff etc.
- Production of a quarterly Patient Client Experience Newsletter for staff to update staff on current 10,000 More Voices projects and outcomes
 to date. Three newsletters were produced 2019 to 2020 (Sept 2019, Nov 2019 and Feb 2020).
- Experience of working in Mental Health Services staff survey. Staff Engagement Plan put in place to promote survey within SHSCT. Survey included also in UMatter.

| Action Measure | Description |
|-----------------|-------------|
| Action medicale | Description |

Staff Training on Equality and Diversity

We will launch our newly commissioned eLearning Modules and Equality and Diversity Staff Training Manual.

- 30 minute eLearning training programme available for staff and managers.
- Equality and Diversity Staff Training Manual available for all health and social care staff.
- Marketing strategy in place to increase uptake of training across the Trust.
- Actively target areas where staff uptake is low and proactively promote the uptake of same.
- Improved uptake of equality training.
- Informed staff attitudes and mind sets.
- Improved patient experience.

Progress Year 2 – Completed for this reporting period

The latest uptake figures can be found within the main body of the Trust's 2019/20 annual progress report. All face to face training sessions have been adversely affected by the Covid-19 pandemic due to social distancing requirements.

Dates had been secured to provide ongoing face to face to some hard to reach groups e.g. Trust Dom Care Staff but these had to be stood down in light of Covid-19.

Targeted outreach was also undertaken, during the current reporting period, whereby individual visitations were made to all Functional Support Services (FSS) managers across the Trust to provide them and their staff with a personal copy of the HSC Training Manual 'Equality, Good Relations and Human Rights – Making a Difference – Your Role and Responsibilities'. FSS managers made a commitment to run staff through a slide show presentation of 'Making a Difference' as an agreed substitute to completing the on-line version as these staff do not have ready access to personalised computers. Staff uptake details were to be returned to the Equality Unit for inclusion in ongoing reporting figures.

| Ī | Action Measure | Description | |
|---|---|---|--|
| | Guidance for our Non-Executive Trust Board Members We will revise the Trust's Equality, Human Rights and Disability | Up to date guidelines in place for Non-Executive Trust Board. Includes Redeast from Trust Chair and Chief Executive. | |
| | Guidelines for our Non-Executive Trust Board members. | Includes Podcast from Trust Chair and Chief Executive. Increased awareness among Non-Executive Trust Board members of statutory compliance and responsibilities. | |

Progress Year 2 – Completed for this reporting period

This Guidance has been developed and updated in conjunction with by ECNI. It has now been finalised and designed to complement existing resources and is moving to print ready stage.

Podcast has been written for respective HSC Trust Chairs/Non-Executive Directors.

| Action Measure | Description | |
|---|--|--|
| Gender Pay Gap Reporting We will ensure the Trust is fully compliant with any new legislation governing gender pay gap reporting. | Pay structure that ensures fairness and equity in pay and reward arrangements. | |

Legislation has yet to be enacted by the NI Assembly. In the interim period a Position Paper setting out the key requirements of this new legislation has been shared with the Human Resources Directors Forum.

During the current reporting period representatives from the Equality Commission for NI and HSC Finance representatives were invited to a workshop hosted by the HSC Regional Employment Equality Network to explore with the Commission the level of detail and calculations required for reporting purposes. It was agreed that one Trust would undertake some modelling in line with legislative requirements. The NHSCT was identified as a pilot site. Learning to be shared with other HSC Trusts in preparation for legislation coming on stream now that the NI Assembly is up and running.

| Action Measure | Description |
|---|---|
| Regional HSC Staff Survey We will work with Trade Union colleagues to ensure that issues raised in the staff survey are addressed/acted upon. | Staff survey Directorate Actions Plans in place to address issues arising from the staff survey. Progress reported via the Trust Senior Management Team and Trust Board. |

Progress Year 2 - Completed for this reporting period

The Trust Staff Survey organisational report was available late 2019. The results were then reviewed and presented and shared with Trust Board, directorates, Joint Negotiating Consultative Forum (JNCF) and made available on the Trust intranet for all staff.

Four key themes that came out of the staff survey included; communication and engagement, leadership, health and wellbeing and valuing and recognising our staff.

During 2019/20 staff were invited to and attended a number of engagement sessions - 'Coffee Conversations'. These were held across the Trust and were aimed at staff across all bands and professional groups focusing on the four themes. The invitation issued to staff included some of the high level results and key themes arising from the staff survey. The aim of these engagement sessions was to generate ideas from staff about how. by working together, we can continue to create 'a great place to work'. The sessions were designed:

- to share the staff survey results to start the conversation:
- to share initial thoughts on what the Trust needed to focus on going forward (the people priorities);
- to hear from staff on what would make a difference to them and their teams.

Feedback and ideas from the sessions will be collated and inform the development of the Trust's People Strategy and associated work plans to be taken forward into 2020/21.

| Action Measure | Description | | | |
|--|--|--|--|--|
| Equality in Action Newsletter We will re-launch the Trust's 'Equality in Action' newsletter and include specific features to raise awareness of the Equality, Diversity, Section 75 Equality Duties, the Disability Duties and Human Rights obligations. | Increase staff awareness. Compliance with best practice standards. Greater visibility of the Equality Unit and its role and function. Good staff relations. | | | |
| Progress Vear 2 - Completed for this reporting period | | | | |

The latest newsletter highlights key achievements during the reporting period 2019/20 and aims to raise awareness of the Section 75 Equality

| Duties, the Disability Duties and Human Rights obligations. For further | | | |
|--|---|--|--|
| Action Measure | Description | | |
| Review of the Trust's Workforce Composition We will progress any affirmative action/outreach measures necessary arising out of the Trust's latest Article 55 Review Report. | Fair participation in the workplace for both main communities as evidenced by the workforce/trends analysis. | | |
| Progress Year 2 – Completed for this reporting period The 4 th Article 55 Review has been fully completed in line with the Fai | ir Employment and Treatment (NI) Order 1998 requirements. | | |
| Action Measure | Description | | |
| Operational Manual We will develop an operational manual to ensure that all processes are documented to facilitate the timely completion of the Trust's statutory equality reporting requirements. | Operational manual in place. Good governance arrangements that ensures the timely completion of all statutory reporting requirements. Spread of knowledge and expertise. Standardisation of processes across the region. | | |
| Progress Year 2 – Completed for this reporting period As well as the step by step guide to completing the Fair Employment Review following the approval of a revised report template by the Equ procedures relevant to the reporting requirements. | Monitoring Return, the manual also covers the completion of the Article 55 ality Commission. Also included in the manual are other operational | | |
| Action Measure | Description | | |
| Good and Harmonious Working Environment for Staff We will implement any new harmonious working environment advice in light of any new findings and recommendations from the work conducted by the Equality Commission for NI on Flags, Identity, Culture and Traditions. | Consistent regional approach to ensuring all health and social care environments are welcoming to everyone. Readily accessible guidelines. | | |
| Progress Year 2 – Completed for this reporting period The Trust's Joint Declaration of Protection for staff was reviewed during regional Equality, Diversity and Inclusion Policy and reflects best practice. | ng the year under review. The revised statement is now appended to the new stice in the field of equality and good relations. | | |

| Actions Completed in Year 2 | 28 | Actions Ongoing Rollover to Year 3 | 5 | Actions to Commence | 0 | Ì |
|-----------------------------|----|------------------------------------|---|---------------------|---|---|
|-----------------------------|----|------------------------------------|---|---------------------|---|---|

Disability Action Plan Local Actions 2018 – 2023

Progress Report Year 2 - 2019-2020

Section 1: Promoting positive actions and increased participation through training, awareness and resources

| Action Measure | Description |
|---|---|
| Promoting positive attitudes toward Disabled People: Staff eLearning - We will actively promote the 2 new Discovering Diversity eLearning modules to encourage uptake by all staff and managers. | Production of activity reports to monitor the uptake of these modules by staff and managers across our service directorates and functional areas. Use of bench marking to effectively target and encourage consistent uptake across all our service directorates and functional areas. Increased staff awareness re disability duties. Progress monitored via the Trust's Section 75 Annual Progress Report. Mainstreaming of disability duties into the policy, practice, procedures, design and delivery of our services. Compliance with the disability duties. |

Ongoing deployment of the Making a Difference – Equality, Good Relations and Human Rights eLearning Programme. Directorates continue to be encouraged to ensure uptake of this mandatory training by all staff. Regular reports are being provided by the Equality Unit to each Directorate to encourage uptake. For the latest figures please see the main body of this year's report.

Target outreach was also under taken, during the current reporting period, whereby individual visitations were made to all Functional Support Services Managers (FSS) across the Trust to provide managers and their staff with a personal copy of the HSC Training manual ' Equality, Good Relations and Human Rights – Making a Difference – Your Role and Responsibilities'. FSS Managers made a commitment to run staff through a slide show presentation of 'Making a Difference' as an agreed substitute to completing the on-line version given that these staff do not have ready access to personalised computers. Staff uptake figures to be returned to the Equality Unit for inclusion in ongoing reporting figures.

| Action Measure | Description |
|--|--|
| Promoting positive attitudes toward Disabled People: Acquired Brain Injury Team – Client Centred Accredited Training - We will create a client centred accredited training initiative (and link with the Regulatory Quality Improvement Authority (RQIA) objectives) to educate third sector organisations, charities and nursing homes as well as other appropriate organisations in the: causes and consequences of acquired brain injury and ways to understand and respond to behaviour that is challenging. | Qualitative feedback from attendees. Feedback from service users. Review of number of referrals for challenging behaviour. |

Progress Year 2 - Ongoing Rollover Year 3

To date, this goal remains in progress. We have engaged with our service users who have participated in a training video programme (which we were able to secure funding for from the PPI initiative). We are currently in the process of creating our training video, however, this has been delayed and is envisaged it will be progressed in 2020/21.

| delayed and is envisaged it will be progressed in 2020/21. | | | | |
|---|--|--|--|--|
| Action Measure | Description | | | |
| Encouraging the participation of Disabled People in public life: | Improved networking between the Trust and disability sector and representative groups. | | | |
| Networking - We will proactively engage with the disability sector to forge stronger links with this sector. We will extend invitations to representatives from the disability sector and representative groups to attend the Health and Social Care Trusts' Regional Employment Equality Network to discuss relevant and topical disability related issues and to inform policy, practice and work streams. | Informed policy and practice i.e. mainstreaming the disability duties in existing, new and revised employment policy and practice and supporting guidance for managers. Celebrate best practice at annual show case events e.g. Continuous Improvement Events and Health and Social Care Equality Leads annual show case event. | | | |

Progress Year 2 – Ongoing Rollover Year 3

The Trust continues to build on existing arrangements with the Disability Sector and USEL in taking forward the 'WorkableNI' programme. The working group met twice during the current reporting period. The Equality Commission for NI were asked to participate in the group discussion. The group benefited from the Commission's input and in particular their advice on positive action measures open to employers in seeking to increase the participation of persons with disabilities in employment. The Trust will take forward the advice of the Commission in rolling out this work plan. Progress however was slowed down due to the Trust's response to the Covid-19 Pandemic and the need to support essential services across the Trust

| across the Trust. | |
|---|---|
| Action Measure | Description |
| Promoting positive attitudes toward Disabled People: Equality in Action – Newsletter - We will re-launch the Trust's Equality in Action newsletter. To include specific features on the Disability Duties; overview of Trust's Equality Policies; Work Placement Scheme and the importance of timely reasonable adjustments to increase disabled persons participation and retention in the workplace. | Increased staff awareness and understanding of the Disability Duties. Support for persons with a disability in the workplace. Greater participation and retention of persons with a disability in employment. Participation of persons with a disability in a greater range of job placements/experiential learning. |
| We will use internal methods of communication to raise staff awareness of the disability duties including raising awareness of national awareness days/weeks particularly in terms of hidden disabilities. Communication mediums include the Southern-i (corporate staff magazine), Trust's intranet, Executive Briefings, Team meetings, calendar and use of podcasts, etc. | |

The latest newsletter highlights key achievements during the reporting period 2019/20 and aims to raise awareness of the Disability Duties. For further details please refer to the full Section 75 Annual Progress Report.

| Action Measure | Description |
|--|--|
| Encouraging the participation of Disabled People in public life: Staff Welcome Pack – to include information about accessibility interpreting, auxiliary aids, alternative formats etc. We will proactively disseminate the regional welcome pack throughout the Trust utilising key contacts and forums e.g. Trust's Continuous Improvement Team and via project initiatives; user forums, internal communications with our staff. This will ensure information about accessibility is widely disseminated through the Trust. | Resources available for staff to support them in meeting the needs of service users with a disability and carers. Improved access to services. Improved service user and carer experience. |

Progress Year 2 – Completed for this reporting period

During the year under review the Accessible Information Strategy Group supported by the Adult Learning Disability Speech and Language Therapy Team have created a Tile on SharePoint for Accessible Information.

Accessible information is away of sharing information in a manner that everyone can understand. The term accessible information refers to all methods of sharing information which includes environmental cues and objects of reference through to photos, pictures, symbols and text.

The Accessible Information Tile has a section for resources specifically related to Covid – 19 alongside other useful resources. These resources have been designed to be used with people who have a Learning Disability. These resources can also be used with people who have communication difficulties; to support their communication.

The Southern Trust's Newry and Mourne Adult Learning Disability team have achieved 'Makaton Friendly Status. The award was presented to the team by the Makaton Charity in recognition of their efforts to promote Makaton and ensuring the locality team based at Drumcashel House, Newry is an inclusive, accessible communication friendly environment for all service users who have communication support needs and their families/carers.

Makaton is a language programme that gives everyone a helping hand to communicate and is proven to develop speech, language and communication skills. Makaton uses signs, symbols and speech to help people to communicate and reduce feelings of frustration and isolation.

| Action Measure | Description |
|--|---|
| Encouraging the participation of Disabled People in public life: | Enhanced support for staff to meet the needs of service users with a learning disability. |

Hospital Passport - We will develop a communication plan to support the local roll out of the regional Hospital Passport initiative for service users with a disability.

The Hospital Passport is a communication tool to help a person with a learning disability to communicate aspects of their health and social care abilities and needs. It provides information to help staff make 'reasonable adjustments' that may be required so that they can provide safe and effective care for people with a learning disability who are in contact with our hospitals.

- Improved experience for people with a learning disability when accessing hospital services.
- Improved communication between staff and service users with a learning disability
- The Trust will support the roll out of the initiative in conjunction with the specialist lead for promoting wellbeing (acute).

Progress Year 2 - Completed for this reporting period

- Treat Me Well campaign Over 200 staff signed up as Mencap LD champions
- Communication Booklets and Guides purchased (PPI funding)
- Co-production of a Digital Resource to raise awareness of the hospital passport which has been adopted as a regional resource and used within universities
- TILII "Pop Up" sessions across CAH site
- New accessible information tile on SharePoint where easy read templates and resources are held Covid-19 tile also developed
- Makaton Training for acute radiology staff
- LD Community Staff and Carer rep sits attend the Acute Standards & Guidance Professional Leads forum SHSCT breast screening staff involved in regional pilot project to improve access to breast screening services for women with a learning disability. Staff, Service User and Carer Survey. Some progress so far:
- 3 x GP Pilot Sites
- Breast Screening Unit Open Sessions for users and carers
- WRDA Screening Awareness Session for Carers
- Learning Disability Awareness Training for Screening Team
- Engagement with women with Learning Disability
- Easy read appointment letter developed and also adopted regionally
- Flow Chart for Breast Screening women with Learning Disability developed and will be adopted as regional pathway.

Action Measure Promoting positive attitudes toward Disabled People: Equality Commission for NI - Mental Health Charter - We will work with the consortium of mental health organisations and the Equality Commission to ensure the Trust is signed up to the Mental Health Charter. Description Charter commitments: • We will create an open and inclusive workplace culture which displays respect for those with mental ill health. • We will promote equality of opportunity and challenge discrimination in the workplace. • We will promote equality of opportunity in recruitment and selection for

| those | with | mental | ill | health. |
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- We will identify and provide sources of information and support regarding mental ill health.
- We will promote the Equality Commission's 'Every Customer Counts' initiative - improved accessibility for service users and staff.

The Trust continues to implement the 5 Pillars contained within the Mental Health Charter via its Health and Wellbeing Strategy and UMatter Initiatives - *in seeking to create an open and inclusive workplace culture which displays respect for staff with mental ill health*. This was especially visible during the year under review when faced with the challenges of Covid-19 and related social distancing and isolation measures to prevent the spread of the virus. For example, the Trust established various helps lines for staff to support them through the current pandemic and provided a range of services, via the Trust's Clinical Psychologist and Occupational Health Department, to support staff members and teams during these unprecedented times. Helpful information and resources were also made readily available.

Action Measure

Promoting positive attitudes toward Disabled People

Recovery & Wellness College -

We will continue to engage all stakeholders:

- People with lived experience
- Service users
- Carers/supporters
- Providers including Community & Voluntary sector organisations and local communities in the further development of the Recovery College.
- Co-delivery of accredited peer training programme for service users.

The college will continue to provide a dynamic environment which:

- Breaks down barriers
- Challenges stigma
- Addresses cultural attitudes
- Creates conditions for change and transformation of individuals and services.

The college will continue to create roles for people with lived experience and others who have an interest in co-production through:

Description

- Disseminate DVD and training materials that have been co-produced with service users and people with lived experience.
- Recruit peer trainers to co-produce and co deliver courses and programmes of training with the extended multi-disciplinary team, carers groups and partner organisations
- Seek to extend the Recovery College model into other service areas by reducing the age for access to 16 years old.
- Co-produce and co-design a local Recovery newsletter.
- Monitoring the number of those who have completed the training programme in relation to the number who are becoming actively involved in the College/ peer support roles/ volunteering roles/ involvement in working groups.

- By delivering an accredited co-production training programme twice yearly to all stakeholders
- Through reflective supervision processes that support recovery focused

- Offering opportunities for Level I and Level II WRAP
- Contracted roles for Peer Educators/Trainers (paid)
- Sessional contracts for those with lived experience (paid & voluntary)
- · Volunteer roles within the college
- Volunteer Support roles for course attendance
- Co-production of Job Descriptions for lived experience

The college will remain rooted in the values and principles of Coproduction through involvement and engagement of people with lived experience to build capacity, skill and develop expertise:

- Interface with Mental Health Forum to support and utilise Capacity Building Programme for all service users.
- This also has potential to support service users to engage more meaningfully with the college in co-production and co-delivery.
- Co-produce all courses with equal weighting.
- Co-produce a yearly prospectus.
- Co-produce all term timetables.
- Engage all stakeholders in all Recovery Agenda activity.

• Ensure accessibility and opportunity for mental health education in border and rural communities within the Southern Trust.

- practice
- Monitor number of people who have completed both stages of programme
- Monitor number of people coming through for co-production of courses
- Monitor number of service users with capacity and ability to be actively involved in ImROC agenda working groups.
- Recovery Coordinator to attend and feed into working groups that support the Recovery/ ImROC agenda both locally and regionally.
- Appropriate and meaningful engagement and involvement of lived experience in recovery/ ImROC workstreams.
- A balance of Peers including those on Trust contracts and sessional/ volunteer staff on working groups including Towards Zero Suicide (TZS), IMROC Steering Group (suspended), Transforming the Workforce (suspended) and the Recovery College Regional Working Group.
- Co-chairing opportunities on UCSIG and Recovery College Steering Group.
- Monitor number of lived experience people who attend working groups and meetings.
- Monitoring number of courses delivered.
- Ensure a balance of lived experience and clinical experience on coproduction and co-delivery of all programmes.
- By assessing all output through statistical analysis with graphical reporting.
- By reviewing evaluations and feedback on course delivery.
- By ensuring that all courses are delivered in venues (either Trust or external) that conform to disability access regulations with a health and safety risk assessment carried out on the venue prior to course delivery (relating to both physical and mental disability).
- Continue to work with Innovation Recovery Project (CAWT) to deliver programmes of education and learning to all stakeholders. Monitor uptake and outcomes.

The success of the Recovery & Wellness College is rooted in co-production and co-delivery of all courses and educational programmes. All the College programmes and workshops are strengths / wellness focused and can support anyone to explore what works for them in a supportive peer environment. Programmes / workshops and courses are focused on better mental health and emotional and physical wellbeing for everyone, not just for people who experience poor mental/ physical health or have mental health challenges and diagnoses; we all are entitled to good mental health and emotional wellbeing. This is reflected in the principles and ethos of the Recovery & Wellness College.

The College team is made up of a cohort of staff - B7 Coordinator, Acting B5 WTE Lead Peer Trainer, B4 PT Peer Trainer, B3 Team Secretary, 1 PT Lived Experience Volunteer. The college continues to engage staff and people with lived experience of MH issues and conditions for coproduction and co-delivery.

The Recovery Co-ordinator has recently designed new JDs for posts - B5 permanent Lead Peer Trainer and B4 Lead Recovery College Administrator. JDs currently waiting on AFC sign off.

All course delivery materials are co-produced by people with clinical expertise and lived experience service users third sector partners.

Peer Trainers are mentored by the Lead Peer Trainer with any development opportunities acted upon.

A learning development plan for Trainers is in place in conjunction with the Mental Health Form – Capacity Building Programme.

The co-ordinator continues to signpost people to the MHF for engagement and involvement.

The College is developing an OCN Co-Production and Co-Facilitation Course for all Trainers (both lived experience and clinical staff).

WRAP Level II for WRAP course facilitators is mandatory and opportunities are provided for lived experience to become facilitators. The Recovery College Prospectus for 2019/2020 is in circulation having been emailed to internal and external stakeholders. The bi-annual Recovery College Newsletter, contributed to by all five Recovery Colleges in Northern Ireland with service users playing a central role in identifying relevant content and writing features and articles, is distributed to all internal and external stakeholders.

A due diligent registration process conforming to the latest General Data Protection Regulations is in use.

All Recovery College activity is evaluated by statistical analysis with graphical reporting and examination of feedback received through course evaluations. This feedback includes student perspectives on accessibility and suitability for all.

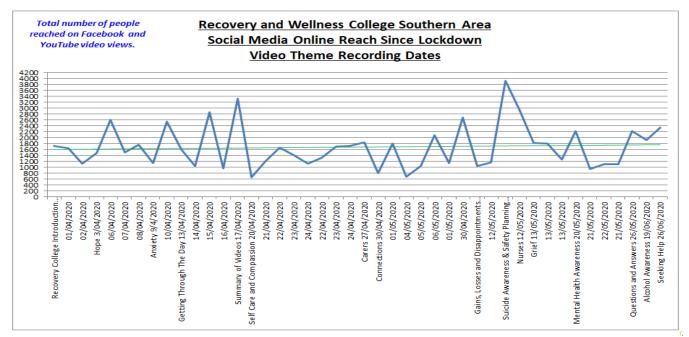
The lockdown caused by Covid-19 meant face to face course delivery suspension from end March 2020 to end August 2020. The Recovery College compensated for this suspension by playing a key role in corporate projects as directed by the Director of HR, Medical Director, Psychology Department, Promoting Wellbeing Team and Mental Health Services: All work was and continues to be fully co-produced, honouring the perspectives and experiences of service users and staff equally:

• Wellbeing Corporate Messages including the recording of Trust themed videos through co-production

- Positive Mental Health Messages Community Wide
- Positive Mental Health Message Bluestone
- Psychology Staff Support and Self Care Sessions.

These projects have enabled the Recovery College to reach everyone who is online on our registrant distribution list and everyone who is not on line on this list via a postal pack detailing all the themes covered by email and social media. This has ensured that no discrimination has taken place against anyone with any disability, be it mental or physical, in our information reach during the lockdown.

The Graphical Analysis of Social Media Reach by Theme below shows the Recovery College's reach during the lockdown:



The Recovery & Wellness College Southern Area co-produced Facebook page is updated daily with messages responded to as and when required. The total number of people reached on this page from the start of lockdown to date is ~77,300. People are still engaging with posts from March 2020 onwards. The Recovery College thus ensures that all registrants and the wider Facebook community are reached with their posts, including those self-isolating and those unable to leave their house without support.

All the Recovery College social media output is on the Libraries NI website.

The Recovery College currently co-produces and co-delivers 19 courses with several new courses in co-production. Several community and voluntary organisations have expressed an interest in co-producing courses with the Recovery College:

- Women's Aid
- GP Federation
- Mourne Matters
- Children and Young People's Strategic Partnership (Locality Planning)

Locality Planning have expressed particular interest in networking with the Recovery College in schools and colleges.

The Mental Health Care Pathway course comprises of co-produced workshops co-delivered to staff, service users and carers across the Southern Trust in partnership with the Clinical Education Centre. To date 452 staff have attended this workshop. The next Mental Health Care Pathway is scheduled for 2nd October, 2020 with the workshops postponed due to lockdown being re-arranged as soon as possible.

Timetables for each semester are co-produced in conjunction with external venue availability and accessibility. All venues continue to be assessed for disability access and health and safety conformation.

The Recovery Coordinator and Lead Peer Trainer continue to attend and feed into working groups that support the Recovery/ ImROC agenda both locally and regionally.

| locally and regionally. | |
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| Action Measure | Description |
| Encouraging the participation of Disabled People in public life: Establish an Easy Read Data Base of Accessible Information- We will produce an increasing range of materials in easy read format for persons with a learning disability. | Data base of easy read information established. Information more readily available across the Trust to be accessible by members of the public and staff. Equality Unit to maintain a log of information produced. Some examples of resources produced - Prostrate, Menopause, AA and Smoke Free Policy, Take 5 Steps to Wellbeing. Resources in the pipeline include information on bowel screening. |
| | |

Progress Year 2 – Completed for this reporting period

- The accessible information tile on SharePoint has been updated to include a wider variety of sections. The sections are as follows: accessible information database, tips on making information accessible, checklists, templates, useful websites, photo bank, virtual tours, training, news, Makaton sign of the week, how to contact us and the 5 good communication standards.
- A variety of templates have been uploaded for staff to create their own pieces of accessible information to support the checklist.
- We have created a photo bank and will continue to add to this. As yet we have not uploaded the virtual tours but hope to add our first one soon
 which will be of Woodlawn House respite facility.

Aims:

- Continue to develop the range of templates and accessible information
- To continue to develop the photo bank and virtual tours on SharePoint
- To develop a training package for staff wishing to create accessible information

• To transfer information as appropriate to the Trust website.

This will be measured by auditing the information on SharePoint and by collecting data on number of staff completing training.

| Action Measure | Description |
|--|---|
| Encouraging the participation of Disabled People in public life: Day Time Opportunities – Brokerage Scheme – We will promote a greater range of day time opportunities for people with a disability. The range of day time 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. | Establishment of a Brokerage Scheme that provides a wider range of person centred day time opportunities across the Southern Trust locality. Extended range of options/choice for supporting people with disabilities to participate as active members within their communities. |
| 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. | |

Progress Year 2 - Ongoing Rollover Year 3

As above, the Day Time Opportunities Brokerage Scheme was not progressed as a feasible option for the delivery of community based activities for adults with disabilities. Community providers were engaged in early market soundings to test interest in the model but this exercise proved there was insufficient interest in the Brokerage model.

The disability day services review has been ongoing since October 2017 which has been exploring the most appropriate options for developing community based day services. Plans to move to public consultation (subject to SMT approval) on recommendations unfolding from the Review were disrupted in mid-march 2020 when day services were temporarily stood down to address urgent COVID planning requirements within the Trust.

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| Action Measure | Description |
| Encouraging the participation of Disabled People in public life: | Weekly programme of physical activity available to people with a physical disability at 5 locations across the Trust. |
| Roll out of Fit 4 U Programme - Delivery of Fit 4 U physical activity programme to people with a physical disability. | |
| Progress Year 2 – Completed for this reporting period | |

The Southern Trust Fit 4 U Project has continued to work in partnership with local Councils and Everybody Active coaches to deliver a range of physical activity and sports opportunities for adults with disabilities at local Leisure Centres across the Southern Trust area.

Fit 4 U (Physical/Sensory Disability)

From April 19 - March 20

Fit 4 U has provided weekly physical activity sessions in 5 leisure centres across the SHSCT, in Armagh, Dungannon, Craigavon, Banbridge and Newry.

- A total of **194 physical activity sessions** were facilitated for adults with physical/sensory disabilities.
- This consisted of 20 leisure centre based programmes, 5 walking groups, 35 monthly competitions, 1 special Olympic themed event and 1 pilot programme at Kilkeel Leisure Centre.
- A total of 181 individuals with physical/sensory disabilities participated.
- A total of **59 new individuals** participated this year.
- **5 volunteers** supported Fit 4 U (physical/sensory disability)
- Fit 4 U staff, volunteers and coaches have participated in a range of training, to build capacity in delivering and engaging participation among people with disabilities. This has included Autism Awareness, Walking Football, Epilepsy Awareness, Emergency First Aid, Safeguarding Vulnerable Adults, Disability Awareness, Signs & Symbols Makaton Training, Mental Health First Aid, MAPA Personal Safety, Archery Instructor and Boccia Leader Training. Overall, 34 participants trained.

| and booking board Training. Everall, or participante trained. | |
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| Action Measure | Description |
| Encouraging the participation of Disabled People in public life: | Weekly programme of physical activity available to people with a learning disability. |
| Fit 4 U2 - Extension of the project to include Fit 4 U2 to provide | |
| leisure and sporting opportunities for people with a learning disability. | |
| December 1 Value 0 | |

Progress Year 2 - Completed for this reporting period

The Southern Trust Fit 4 U2 Project has continued to work in partnership with local Councils, volunteers and Everybody Active 2020 coaches to deliver a range of physical activity and sports opportunities for adults with learning disabilities (Fit 4 U2):

From April 19 - March 20

Fit 4 U 2 has provided weekly physical activity sessions in 5 leisure centres across the SHSCT, in Armagh, Dungannon, Craigavon, Banbridge and Newry.

- A total of **207 physical activity sessions** were facilitated for adults with learning disabilities.
- This consisted of 20 leisure centre based programmes, 5 walking groups, 2 Day Care programmes, 1 special Olympic themed event and 1 pilot programme at Kilkeel Leisure Centre.
- A total of 249 individuals with learning disabilities participated.
- A total of **92 new individuals** participated this year.
- 6 volunteers supported delivery of Fit 4 U 2 (learning disability).
- As above, Fit 4 U staff, volunteers and coaches have participated in a range of training.
- Our FIT 4 U2 service users recently participated in a team building event on International Day of Persons with Disabilities. The day promoted

awareness and understanding of people with disabilities and encourages support for their dignity, rights and wellbeing and the event brought together service users from Adult Day Opportunities, Learning Disability and the FIT 4 U2 service.

| Action Measure | Description |
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| Encouraging the participation of Disabled People in public life: | Increased awareness among service users on what to expect when attending annual reviews. |
| Health and Wellbeing (HWB) Review available in Easy Read — We will develop easy read resources on 'What is an Annual HWB Review/Assessment'. This will include information on personal health and wellbeing plans and annual health checks. | Development and distribution of resources. Service user and carer involvement in completing annual reviews/assessments. |

Progress Year 2 – Completed for this reporting period

Health and Wellbeing Co-ordinator for Learning Disability Band 4 post established. Post holder in post since January 2019. Any adult with a learning disability who is at risk of obesity, heart disease or diabetes after their annual health review is referred to the HWB co-ordinator who completes a health and wellbeing plan in partnership with the user/carer. Person centred plan and programme then developed to reduce risks as above.

A huge range of easy read resources developed and uploaded onto Accessible Information Tile on SharePoint.

| Action Measure | Description |
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| Encouraging the participation of Disabled People in public life: Roll out of Health and Wellbeing Plans and Designation of Health Care Facilitators - The Trust's Health Care Facilitators will actively promote the uptake of annual health checks for adults with a learning disability. | Targeting and promotional use of recently launched DVD to encourage uptake of annual health checks. Greater uptake of annual health checks by service users and carers. Better health outcomes on the back of health and wellbeing plans. Increase participation of GPs across the SHSCT - each GP practice to have identified named health care facilitator. GP practices to identify and invite adults with a mild learning disability for health screening. |

Progress Year 2 – Completed for this reporting period

Health Care Facilitators (HCF) follow up on adults with a learning disability who did not attend (DNA) when invited for their annual health check (AHC) by contacting them and using the DVD link to encourage uptake or to make another appointment via the practice manager.

A Health and Wellbeing Co-ordinator (LD HWBco) has been appointed to the HCF Team within the 2019/20 year period. He is based within selected day centres facilitating Health Education and Physical Activity Groups on a weekly basis. LD HWBco uses the group activity to promote attendance at the annual health checks by showing the DVD. He has also undertaken a pilot programme within six day centres targeting adults with a learning disability with BMIs over 28 and who are at risk of heart disease and diabetes type 2 by facilitating weekly group talks and physical activities (Step by Step programme). The data shows these targeted interventions to be successful given feedback from service users and carers, collectively 3.2 stone has been lost among 28 service users. 50 Health and Wellbeing plans have been issued to service users throughout this programme to encourage better health outcomes in terms of healthy eating and increased physical activity levels.

Approximately 1150 health checks have been completed in 2019/20 by GPs and HCFs. This is an under estimation as figures have not been collated from the GP practices who see patients without HCF input. These figures can be obtained via the GMS Enhanced Services Claims but to date they are not available given the Covid-19 crisis. However, each of the 1150 adults with learning disability seen by HCF during the AHC received a Health Action Plan to take away with them to highlight areas that require focus to maintain or improve health during the coming year along with easy read information about their specific health condition and sign posting to the smoking cessation service where necessary. The Hospital Passport document is also distributed during the clinic.

HCF have worked closely with the Accessible Information Strategy Group to develop easy read information on a number of health conditions specific to the patients we have completed AHC with. Easy read information includes promotion of healthy eating and exercise (given obesity rates and heart disease) and the dangers of smoking and alcohol and more recently about diseases such as Covid-19. This information is stored on the SHSCT SharePoint tile under Accessible Information and Covid-19 and is available to all staff within the SHSCT including staff within Acute Care to use when working with adults with learning disability in the hospital or home setting.

Each GP practice has a named HCF allocated to them throughout the SHSCT (however a post is vacant in the Craigavon and Banbridge area). HCF complete practice visits annually June-August to update practice registers for adults with learning disability, including adults with a mild learning disability and those known to the GP but do not get a service from the SHSCT. During these visits HCF arrange AHC clinic dates and follow up on issues particularly with patients who did not attend their appointment to ensure reasonable adjustments are made for future appointments.

In 2019/20 HCF worked closely with the PHA and PWB departments to improve access to breast screening services for women with learning disability. A Regional Pilot Project with the SHSCT Breast Screening Service was undertaken. This was a successful project and progress includes:

- 3 x GP Pilot Sties
- Breast Screening Unit Open Sessions for users and carers
- WRDA Screening Awareness Session for Carers
- Learning Disability Awareness Training for Screening Team
- Engagement with women with Learning Disability
- Easy read appointment letter developed and also adopted regionally
- Flow Chart for Breast Screening women with Learning Disability developed and will be adopted as regional pathway.

| Action Measure | Description |
|---|---|
| Promoting positive attitudes toward Disabled People: Children and Young People with an intellectual disability - We will work with our colleagues in mainstream services to improve access to all aspects of healthcare for our children and young people with an intellectual disability, equal to that of their peers. | We will participate in training sessions with colleagues from mainstream services to help clinician's best meet the needs of children and young people with an intellectual disability. We will work in partnership with colleagues in mainstream settings to help them to make reasonable adjustments to meet the presenting healthcare needs of the children and young people. We will highlight this fact to fellow clinician's, social care staff and |

| We will highlight that 40% of children and young people with an |
|---|
| intellectual disability will experience significant psychiatric disorder, |
| compared with less than 10% of those without an intellectual |
| disability. |
| • |

commissioners through participation in local, regional and national groups such as Bamford, Children and Young Peoples Strategic Partnership (CYPSP) the regional Child and Adolescent Mental Health service (CAMHs) task force, and by participating in and presenting at conferences. We will also respond to consultations and participate in reviews of services.

 We will work with community and voluntary agencies and educational services.

Progress Year 2 - Completed for this reporting period

- IDCAMHS continue working with colleagues providing Consultation and Therapeutic Planning Meetings offered on a monthly and fortnightly basis.
- IDCAMHS continue to progress a variety of pathways including interface with acute in patient Paediatric Ward.
- Awareness of intellectual disability and mental health included in IDCAMHS Parent Programmes.
- IDCAMHS participate in All Ireland IDCAMHS Network, as well as CAMHS Patient Safety Meetings, CAIDPN Child and Adolescent Intellectual Disability Psychiatry Network, Institute for Health Improvement Conference, SHSCT Quality and Safety Conference, and the ECHO Project.
- IDCAMHS continually work in partnership across services on case by case basis.
- IDCAMHS continue working with CVS, Contact, and Action Mental Health (Health Me being adapted for children and young people with intellectual disability) and Flare, and schools (Rathore).
- Adjustment to new ways of working have been adopted in light of COVID19 and IDCAMHS.

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| Action Measure | Description | |
| Encouraging the participation of Disabled People in public life: | Providing experiential opportunities for persons with a disability to participate in public life. | |
| Bespoke Training - Trust Board - We will work collaboratively with members of our Trust Board to: | Increased awareness of the disability duties. | |
| consider a disability champion. | | |
| create work shadowing opportunities. | | |
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Progress Year 2 - Ongoing Rollover Year 3

Roll forward for consideration in Year 3 – Covid-19 has impacted on a range of activities and work streams in order to support essential services including this action measure.

| Action Measure | Description |
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| Promoting positive attitudes toward Disabled People: Regional Physical and Sensory Disability Strategy - We will continue to support the implementation of the Regional Physical and Sensory Disability Strategy recommendations. | Provision of communication support: We 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. We will support the Business Services Organisation in the development of this new service. |

| • | We will disseminate promotional literature and information to raise staff and service user's awareness of these arrangements for communication support. |
|---|---|
| • | We will inform service users of the new arrangements. |
| • | We will provide training to ensure staff are aware of these |
| | arrangements e.g. Working Well with Interpreters Training. |
| • | We will monitor the uptake of these provisions. |

Progress Year 2 - Completed for this reporting period

The Trust continues to support the work of the Regional Service Group (RSG) which is a forum for engagement and collaborative working focused on services for people with sensory loss. It includes Health and Social Care service representatives, community and voluntary sector organisations, and Service Users. The purpose of the RSG is to consolidate and build upon service improvements made for people with sensory disabilities under the *Physical and Sensory Disability Strategy and Action Plan 2012-18*.

The overarching objectives of the *Physical and Sensory Disability Strategy* continue to apply to the work of the RSG. They include:

- To support disabled people to better exercise their rights, choices and life opportunities;
- To support the continuing development of an inclusive and effective range of high quality health and social care services; and
- To develop a more integrated approach to the planning and management of services within and across government departments, the HSC and the independent community and voluntary sector.

A work plan has been drawn up covering the period December 2019-2020 for the 4 following Task and Finish Groups: Sight Loss Services Framework, Hearing Loss Services Framework, Tinnitus, Sign Language in Care Settings Sight Loss Services Framework. Other worksteams will include: the approach to service user involvement, palliative and end of life care and regional awareness raising as well as accessible information provision.

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| Action Measure | Description |
| Encouraging the participation of Disabled People in public life: Promote Physical Activity for People with a Learning Disability We will promote uptake of walking for people with a learning disability. | Facilitate a step challenge for service users with a learning disability. Service users will be more active and motivated to participate in physical activity. Steps/days will be tracked. |
| | |

Progress Year 2 – Completed for this reporting period

Step by Step challenge facilitated through the HWB Co-ordinator with guidance from Physical Activity Co-ordinator. Step by Step booklets provided with pedometers in day centres and day opportunities.

The LD HWB Co-ordinator developed a bespoke Health Promotion Programme and delivered it over a 10-week period from Oct-Dec 2019. This programme was developed in conjunction with the results of the service user's annual health check. Those identified as at risk with a high BMI where then referred to LD HWB Co-ordinator and a personal health and wellbeing action plan developed.

Section 2: Supporting full participation of people with a disability by improving accessibility

| Action Measure | Description |
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| Encouraging the participation of Disabled People in public life: | We will develop a plan and undertake actions as appropriate. Actions to include: |
| 'Every Customer Counts' Initiative - We will join and promote the | Develop an Assistance Dogs policy. |
| Equality Commission's 'Every Customer Counts' initiative to try and | Review the provision and processes of alternative formats. |
| ensure that services and the physical environment are accessible. | Ensure information regarding venue accessibility is included in event literature. |
| Campaign to be promoted by utilising key contacts throughout the Trust, e.g. the Trust's Continuous Improvement Programme(s); by mainstreaming accessibility requirements into reasonable adjustment | On-going monitoring of the provision and use of accessible car parking for service users with a disability via the Trust's Traffic Management Policy. |
| training for our managers. We will seek to ensure this initiative is featured in any new service development and as part of the project management of same. | Show case improvements at the Trust's annual Continuous Improvement event and the Health and Social Care Equality Leads Best Practice event – i.e. tangible examples of good practice in promoting accessible services. |

The Assistance Dogs Policy is near completion, having benefitted from advice and support from Guide Dogs NI and the Trust's Sensory Team.

The Trust continues to seek out improvement in its Traffic Management Policy and to seek to further enhance accessible car parking provision for persons with a disability (as well as the management of same to safeguard against inappropriate parking).

The Trust also continues to make strides to improve its range of accessible information for staff and service users with various communication needs as well as seeking out improvements in the physical fabric of its building, signage and wayfinding. For examples please refer to this year's annual progress report. Please also note reference above to the creation of an EASYREAD tile for posting information in an accessible format.

| annual progress report. Please also note reference above to the creation of an EASTREAD tile for posting information in an accessible format. | |
|---|-----------------------------------|
| Action Measure | Description |
| Encouraging the participation of Disabled People in public life: | Enhanced service user experience. |
| | Ease of way finding. |
| Improvement in Signage and Way Finding - We will work with | , , |
| colleagues in our Estates department to explore opportunities for | |
| improving way finding and signage around Trust premises. | |
| Drawness Veer 2 Organism Bellever Veer 2 | • |

Progress Year 2 – Ongoing Rollover Year 3

Examples of improving way finding and signage can be found in this year's annual progress report. One such example includes how the Trust, through working with people with sensory difficulties, has helped to improve access to the new Outpatients Department at Daisy Hill. Outpatients moved to Bernish House last October to make way for the new Direct Assessment Unit in the main building.

Some of the external changes include; some additional car parking spaces, tactile paving, new zebra crossings, improved signage, safety railings, kerbing and road markings. Inside the Bernish House building: signage has been improved including new much clearer pictorial images to distinguish male and female toilets; sliding glass has been installed at reception; subtitles are now on TVs in waiting areas; staff are wearing vellow name hadges: and a new 'deaf card' system has been introduced to make staff more aware of nations with hearing needs

| yellow harrie badges, and a new deal card system has been introduc | ed to make stail more aware or patients with hearing needs. |
|--|---|
| Action Measure | Description |
| Encouraging the participation of Disabled People in public life: | Enhanced service user experience. |
| Accessible Communication - We will promote the mainstreaming of regional guidance 'Making Communication Accessible for All' throughout the Trust. | More accessible service provision. |
| We will disseminate this resource and seek to mainstream best practice in our Continuous Improvement Projects as well as tapping into developmental opportunities for staff to raise awareness and promote the practical use of this resource. | |
| Progress Year 2 - Completed for this reporting period | |

Progress Year 2 – Completed for this reporting period

- 1. The Accessible Information Strategy Group had plans to launch the site at the start of April by having a workshop for staff to attend to demonstrate how to use the tile effectively but his had to be postponed.
- 2. A range of templates have been developed to support the checklist and are on the accessible information SharePoint tile.
- 3. In response to Covid-19 we were able to add a section on our tile solely for Covid-19 and put all accessible information onto this section so that staff had a central point to go to access relevant accessible information for service users.

| 4. The Accessible Information Strategy Group is developing a training | g package for staff who wish to create their own accessible information. |
|--|--|
| Action Measure | Description |
| Encouraging the participation of Disabled People in public life: | Trust wide working group established to implement the recommendations from the Regional Quality Improvement Authority (DOM) increasing. |
| Brain Injury Team – Improved Pathways – We will create a new pathway for individuals who have suffered a concussion (i.e. mild | (RQIA) inspection.Group to include staff from the Trust's Community Acquired Brain |
| traumatic brain injury). | Injury Team, Emergency Care, Medical and Surgical and Children's services. |
| | Hold consultation with service users for new pathway for feedback. |
| | Provide training on concussion to ED staff. |
| | Written information provided for service users affected by concussion on what to expect in a range of languages. |
| | Outcomes: |
| | Defined pathway established for patients with a brain injury. |
| | Policies and Protocol(s) in place to support defined pathways. |

| Progress Year 2 – Completed for this reporting period Goal achieved – concussion pathway embedded in ED and GP practic programme over the past two years. | Timely and responsive patient care. Self-report measures on quality of life indicators. Self-report measures of mood. Measure of number of re-attendances to ED (hope to see a reduction in re-admissions as the person feels 'held' and contained by further referral to our service). Qualitative feedback from service users. Qualitative feedback from referrers. |
|---|---|
| Action Measure | Description |
| Encouraging the participation of Disabled People in public life: Brain Injury Team – Goal Plans - We will develop and implement use of individualised personal goal plans. | Develop collaboration between client and ABIRT staff member as recommended by RQIA using Goal Attainment Scale model. |
| Progress Year 2 – Completed for this reporting period ABIRT continuing to use Goal attainment planning to collaboratively de | |
| Action Measure | Description |
| Children and Young People with an intellectual disability - All children and young people, including those with an intellectual disability can access child and adolescent mental health services (CAMHs) delivering evidence based interventions, equal to that of their peers and in a timely manner. Through a service improvement project looking at transition (children and young people with an intellectual disability from CAMHs to adult therapeutic services) we will develop seamless care pathways. Building upon the co-produced Participation Network: Children in Northern Ireland, we will work to: | All children, regardless of disability, can be referred to the CAMHs single point of entry where the referral is triaged and assessed on the basis of presenting need. Develop and expand this service further to ensure that all children and young people can access CAMH services steps 2-5, as recommended by Department of Health, on an equal basis. Children and young people with an intellectual disability and their parents will experience continuity of care at the point of transition into adult therapeutic services. |
| Establish a task group of parents to: develop a resource to support parents (including siblings) of newly diagnosed /referred children; to review time between assessment and treatment; to establish an out of hours / crisis intervention aspect; to review facilities and | In conjunction with parents and children and young people with an intellectual disability, we will task a member of staff within the service to take each action forward as part of our co-production work. We will set goals and a timeline so that we can measure our progress |

procedures in reception and to consider alternative means to appointment letters.

We will develop a joint CAMHs/Paediatric epilepsy clinic with our paediatric colleagues for children and young people with an intellectual disability.

We will work with community and voluntary sector organisations to co-produce a DVD with children and young people with an intellectual disability and their families/carers.

to achieving each action.

- Help identify barriers that are preventing access.
- Provision of joint Intellectual Disability CAMHs/Paediatric epilepsy clinic.
- Production of a DVD that has been co-produced with children and young people with an intellectual disability and their families/carers providing an opportunity to tell their story, their needs and the services they require.

Progress Year 2 - Completed for this reporting period

- Single Point of Entry of all referrals continues.
- Services expansion of S2 and S4. Step 2 group programme and service developments with groups / parents concluded in December and will be re-established on return of practitioner from maternity leave. There has been no further investment in services since last year to build further capacity in Step 2, nor investment in developing Step 4 provision.
- Point of transition work to date. Transition continues on a case by case basis, and cross service development has been progressing to point of draft pathway.
- Social Story of new patient assessment has been developed and commenced Feb 2020.
- No investment provided to establish an out of hours / crisis intervention or community intensive provision.
- Duty Call aid memoire completed.
- Adjustments to new ways of working have been adopted in light of COVID19 and IDCAMHS provision.

Section 3: Supporting full participation of and positive attitudes towards people with a disability in our workforce

| Action Measure | Description |
|--|--|
| Encouraging the participation of Disabled People in public life: | Seek to extend targeted employability programmes for vulnerable groups. |
| Participation and Employment Through our work placements and employability programmes we will work with staff, schools and disability organisations to promote health and social care as a disability friendly employer. | Improved awareness of the Trust as a disability friendly employer through increased work placements and promotion at careers conventions. We will aim to secure 10-15 placements for persons with a disability each year. |
| We will actively promote the Trust's Disability Placement Scheme by seeking to secure a range of meaningful placement opportunities across the Trust. | In going forward we will mainstream the commitment to increase opportunities for experiential learning across all service directorates and functional areas – as part of the Trust's corporate social responsibility. |
| We will highlight and promote successful case studies via our Equality in Action Newsletter. | Increased participation of persons with a disability in meaningful placement opportunities. Enhanced skills and experience for persons with a disability. Support in seeking long term employment both within the Trust and elsewhere. |

Job Shadow Day took place on 16 May 2019. The Day Opportunities Team organised work experience placements for 19 adults with disabilities across a number of Trust Departments including nursing, admin, portering, catering and domestic services.

Disability Placement Scheme - During the year under review there were 6 disability placements placed in the areas of catering, estates maintenance admin

| maintenance, admin. | |
|---|--|
| Action Measure | Description |
| Encouraging the participation of Disabled People in public life: We will provide a facility for job preparation for young people with Autism and those with learning disability to prepare them for open employment. | We will provide a facility for young people to practice their work skills to prepare them for open employment and to assist those transitioning from volunteering to permanent employment. We will seek to create more opportunities for work placements and apprenticeships throughout the Trust for young people with a learning disability and Autism. |
| Progress Year 2 – Completed for this reporting period | |

In addition to services above continuing to be provided, we have secured two permanent full time posts dedicated to adult services within the

Autism service.

- We have initiated a contract with Appleby Trust to provide supported employment to up to 20 adults with Autism in the Southern Trust.
- Within the ASD strategy we have dedicated one of the themes to employment for our young people and adults. The ASD strategy is cross departmental and all agencies are responsible for providing employment opportunities for our young people and adults.

Action Measure

Encouraging the participation of Disabled People in public life:

Retention of Staff with a Disability - We will work in partnership with our staff with a disability and our Occupational Health Service and Conditions Management team to ensure that people with a disability are supported to continue in employment.

Description

- Promotion of revised best practice guidance on employing persons with a disability.
- Development and delivery of bespoke equality and human rights training to Occupational Health staff.
- Awareness campaign to highlight the benefits of referral to Occupational Health - for staff and for managers.
- Improved support for staff with a disability.
- Robust process in place for recording reasonable adjustments in the workplace.

Progress Year 2 – Completed for this reporting period

The Trust's Occupational Health Department continue to offer advice and support to managers in ensuring the timely provision of reasonable adjustments in the workplace.

The Regional Disability Tool Kit and accompanying resources are now ready for deployment across the Trust having taken into account the views of a wide range of stakeholders. The Tool Kit and accompanying resources aim to raise both manager's and staff's awareness of the Disability Discrimination Act 1995 and in particular the reasonable adjustment duty to ensure compliance and adherence to best practice in the roll out of policy and practice across the Trust.

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Encouraging the participation of Disabled People in public life:

Staff Health and Wellbeing - We will continue to promote our staff's health and wellbeing.

We will link and align our Health and Wellbeing at Work Strategy and Action Plan to the Mental Health Charter.

We will continue to promote staff training opportunities to empower staff to become

Description

- Enhanced understanding amongst our staff on how to maintain good health and wellbeing.
- Greater participation of our staff in health and wellbeing initiatives.
- Enhanced awareness amongst our staff of mental health issues.
- Feedback from participants through the promoting wellbeing forms.
- Trust a signatory to the ECNI Mental Health Charter.
- Dissemination of information to staff via the Health and Wellbeing new Information Hub in Craigavon Hospital.

good custodians of their mental health through participation in e.g. Relax and Rewind, Mindfulness (focusing on self-care, Looking After Me (highlighting the importance of emotional wellbeing for staff members).

Progress Year 2 - Completed for this reporting period

Full structure now in place with Trust Steering Group and 3 x sub groups set up to take forward the work of the strategy, Terms of Reference developed and cross directorate membership being established, followed by action plans.

Mens health toolkit for staff developed:



SHSCT Mens Health Week Toolkit 2019.pc

Umatter website up and running.

Health Champions: A further 20 health champions signed up since 2018.

Events:

- 21 & 22 May. Events held with estates department in Newry and Portadown with approx. 200 staff attending. Health information stands and activities planned for staff including bp, arts, and complementary therapies.
- 11/6/19 Self care presentation given to 50 x consultants and house doctors in Oxford Island. Positive feedback.
- Delivering presentations at staff meetings and time out for teams events.
- Trust Quality Improvement Event (November) was very beneficial for promoting awareness of the Staff HWB Strategy, Umatter, Health Champions and Pledge.
- Carer's information sessions 3 x 1hr sessions held in November for staff. Attended by 30 staff. Information packs provided to staff.
- 10 year celebration event for staff in Bluestone Hospital 19 December provided support.
- An Introduction to Creative Journaling Workshop held on 23 January attended by 6 staff. Positive evaluation with staff seeing the benefits for themselves and for using with service users. Information packs provided.
- NI Consumer Council Information sessions organised for staff.
- Presented to Physiotherapy Assistants at their staff health and wellbeing day 24 September.
- Held Menopause Event on World Menopause Day 18 October in Ballybot House for staff input from physiotherapy re muscle and bladder issues affecting women at menopause. General health information stand provided. 30 staff availed of free complementary therapy sessions provided by Trust staff and a volunteer and staff attended 3 x taster sessions in mindfulness. Positive evaluation and feedback from staff.
- Supported Leadership Conference October organised by HR.

- Supported Mental Health Nurses event 29 November Creating a Caring Culture.
- Supported Social Work Professional Forum 13 December.
- 5 x Christmas Arts and Crafts Workshops for staff 2x Ballybot House (10/12/19), 2 x Navan Room (12/12/19), 1 x Seagoe Parish centre (17/12/19). 34 staff attended these sessions. Very positive evaluation and feedback from staff.
- Mindfulness sessions for staff 45 minute 6 x sessions in DHH (morning)
- Parenting Workshops Keeping Your Child Safe online 2 x workshops took place 24/10/19 (Moylinn House) and 7/11/19 (PWB Training Room). 24 staff attended the sessions.

World Cancer Day 4 Feb - 10 page booklet produced for staff.

Action Measure

Friday Focus Email - Established a Umatter email address for communicating with staff via the global email list. Regular fortnightly emails issued to staff.

Description

1x 6 week Cook it! programmes delivered to Trust Staff in C&B locality with 10 attending.

1x 6 week Cook it! programme delivered to Trust Staff in N&M locality with 10 attending.

| Action Measure | Description |
|--|--|
| Encouraging the participation of Disabled People in public life: | Development of a Transition Team to support service users with learning and physical disability. |
| Transition Services - Support for service users with complex needs in transition from children to adult services. | Improved experience of service users in transition pathways for children to adult services. |
| | Clearer pathways. |
| | Parallel development of an independent advocacy service in partnership with Disability Action. |
| Progress Year 2 – Ongoing Rollover Year 3 | |
| Please see link to the "Transition & Me" DVD https://youtu.be/D5UHW | ta6mGl |
| Action Measure | Description |
| Encouraging the participation of Disabled People in public life: | We will develop a DVD to promote understanding of ASD within the community. This will be developed with our parents, carers and |
| Supporting People with Autism Spectrum Disorder (ASD) - | young people through a model of co-production. |
| Support for service users with ASD. | Promote the 10 week multi-disciplinary programme for young people who have been recently diagnosed with ASD developed in partnership with young people. Description of the former's whom all value to the people of the former's whom all value to the people of the former's whom all value to the people of the people. |
| | Promote the 'networking forum' where all voluntary, statutory and third sector partners can work together and share resources for the benefit of all children and young people. |

Progress Year 2 - Completed for this reporting period

The ASD Forum meets on a quarterly basis which is based on the Autism Strategy and Action Plan and is cross departmental. This has ensured that both the Trust and various departments can develop and maintain links and everyone is responsible in encouraging participation of disabled people in public life.

We continue to deliver the Autism Awareness training to both staff and businesses in the local community. This training to date has been well received.

The ABC Council have passed a motion to become an Autism friendly borough. The ASD Co-ordinator and Operational Manager sit on this steering group to support this initiative.

| Action Measure | Description |
|--|---|
| Encouraging the participation of Disabled People in public life: Involvement of People with a Disability - We will review how we communicate with and seek feedback from local people with a disability (staff and service users) about health and social care and develop guidance to ensure effective engagement in the future. | Guidance available for staff to ensure effective engagement with people with a disability. Improved development of policy and practice by drawing on a wide range of views and experiences. Key drivers – Trust's Consultation Scheme, PPI Strategy, Personal and Public Involvement local directorate plans; PPI Toolkit, CD Action Plan, Volunteer Action Plan, 10,000 Voices Initiative. |

Progress Year 2 – Completed for this reporting period

Training

• PPI Training has been completed by all staff (1 hr session).

Examples of User Involvement Activities

- The community mapping groups access the local library in the mornings and staff carry out a varied range of programmes in the afternoon using a PPI approach. This has involved day opportunities staff working in partnership with service users in organising dance tutors to carry out programmes within the Dungannon area that is paid independently by the service user. Dungannon groups also took part in charity partnership with Barnardo's organised by Day Opportunities staff.
- G.O.L.D groups in both localities continue, however these are no longer just passive groups and involve individuals under the age of 40.
- G.O.L.D group in Dungannon is based at the library and continue with their set activities as per monthly planners agreed by staff and service users at weekly meetings.
- Newry G.O.L.D programme was not able to access local resources on regular basis due to the needs of the group. Staff set up indoor programmes and arranged for contracted services to carry out a health and wellbeing class paid for independently by service users themselves who also pay independently for use of the venues.
- Within Day Opportunities service, staff use a PPI platform with service users to shape programmes/activities around the needs of those who attend.
- PPI platform has been used to rename Day Opportunity Group names that will be included in future planning of service.

- This information is recorded and incorporated in monthly planners that are distributed to service user and carers for the forthcoming month of activities.
- Day Opportunities has a PPI champion and had been attending regional forum meetings no known programmes or funding has been obtained for Day Opportunities service from these meetings.

Hospital Passport - Learning disability within Acute Services

These are the numbers who have attended specific training for learning disability within acute services which included awareness of the hospital passport. Also included other forums where the passport has been promoted.

- 271 staff from Acute have participated in learning disability awareness training so far as part of the Trust's drive to promote Mencap's 'Treat Me Well' campaign aimed at improving the experience of people with a learning disability in hospitals. (This number also includes 114 acute staff who have completed the eLearning 'caring for someone with a learning disability in hospital setting'.)
- Over 200 staff have signed up as Mencap LD Champions.
- Short video co-produced to promote passport and has been adopted as a regional resource. Currently being used as part of the Regional eLearning 'caring for someone with a learning disability in hospital setting' and Year 1 medical student training in QUU and UU. Link to video: https://vimeo.com/323802613.

Patient Client Experience

- Out Patients Department Improvement work in Ramone CAH & Bernish House DHH, car park and footpaths in DHH linking with sensory and visual users.
- Yellow fleeces for volunteers visually impairment:
 Following feedback from sensory impaired and guide dog service user, the 'Here to Help' volunteers based in the foyer of both Daisy Hill and Craigavon Area Hospitals now wear bright yellow fleeces. Service user felt that the original dark navy fleeces were hard to distinguish in the busy foyers of our Hospitals. (Consistency with yellow name badges previously introduced as result of service user feedback.)
- Courtyard cabin CAH:
 - Day Opportunity clients involved in landscaping, producing planters & on-going development of exterior foliage.
- Walk through new Ambulatory Unit in CAH & signage at front entrance to CAH visually impairment:
 New signage on toilets and waiting area in Ambulatory Unit CAH, feedback from service users improved the colour, visibility and size of signage at CAH front entrance.
- Deaf Communication Card:
 Development of counter top information for staff and service users to promote the use of the Deaf Communication Card.
- LD Breast screening:
 In response to small numbers of females with LD accessing breast screening services, LD awareness training with breast screening staff & improve accessibility options for LD clients; view mobile breast screening unit in advance of appointment, double appointments allocated to allow sufficient time for assessment.
- Disabled member of SHSCT PPI Panel joined PCE Steering Group February 2020.

| Action Measure | Description |
|---|--|
| Encouraging the participation of Disabled People in public life: Speech and Language – Learning Disability - We will work with speech and language staff to further develop resources on choking prevention for people with a learning disability. | Pilot 'first aid' training programme on choking and CPR for Trust staff in day centres, residential centres and supported living where there is someone with a learning disability. Increased awareness of the early signs of choking. Appropriate 'first aid' response, administer suitable techniques. Staff will develop their own bespoke protocol to prevent and respond to choking incidents for people with a learning disability. |
| Progress Year 2 – Completed for this reporting period Training complete. Choking booklets and posters developed and shared with services. Uploaded onto SharePoint. | |

Actions Completed in Year 2

25

Actions Ongoing Rollover to Year 3

Actions to Commence

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