

Equality, Good Relations and Human Rights Screening Template

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

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

(1) Information about the Policy/Proposal

(1.1) Name of the policy/proposal

Adherence to Clinical Nursing / Midwifery Procedures

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

Existing (Reviewed)

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

This policy has been developed to ensure that all registered nurses and midwives are aware of their responsibilities and apply best clinical practice as recommended in the Royal Marsden Hospital Manual of Clinical Nursing Procedures, 10th edition (2020). In addition, registered nurses and midwives must take account of other nationally and regionally agreed guidance on clinical procedures, e.g., newborn blood spot screening guidance or guidance on the administration of vaccines

The Trust will support nurses and midwives by:-

- Providing access to up to date online version of the Royal Marsden Hospital Manual of Clinical Nursing Procedures, (currently 10th edition, 2020).**
- Providing access to online and paper-based copies of nationally and regionally agreed guidance to support adherence to clinical procedures;**
- Providing necessary training / update in relation to clinical procedures;**

The Trust will ensure that nurses and midwives are supported in delivering safe and effective care to patients/clients through the adherence to clinical procedures set out in the Royal Marsden Hospital Manual of Clinical Nursing Procedures, 10th edition, (2020).

Where clinical procedures are being carried out which are not included in Royal Marsden 10th edition manual, e.g., those undertaken in community, oncology or specialist nursing/midwifery practice, these should be set out in writing with clinical

practice supported by available best evidence and / or research.

This policy applies to all registered nursing and midwifery staff and appropriately trained and supervised non-registered staff employed by the Southern Health and Social Care Trust.

When a clinical procedure is delegated to a non-registrant the registered practitioner remains accountable for the appropriateness of the delegated task and for providing the appropriate level of supervision in order to ensure competency to carry out the delegated task (NMC, 2018). Registered practitioners should adhere to the guidance on delegation of care provided by the Nursing and Midwifery Council (2018) and NIPEC (2019) Deciding to Delegate: A Decision Support Framework for Nursing and Midwifery.

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

It is a purely clinical or technical nature and has no relevance or impact (actual / potential) in terms of equality of opportunity, disability duties, good relations and human rights.

It aims to standardise practice and / or achieve best practice based on current evidence.

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

SHSCT

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

N/A

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

This policy applies to all registered nursing and midwifery staff and appropriately trained and supervised non-registered staff employed by the Southern Health and Social Care Trust.

When a clinical procedure is delegated to a non-registrant the registered practitioner remains accountable for the appropriateness of the delegated task and for providing the appropriate level of supervision in order to ensure competency to carry out the delegated task (NMC, 2018).

Registered practitioners should adhere to the guidance on delegation of care provided by the Nursing and Midwifery Council (2018) and NIPEC (2019) Deciding to Delegate: A Decision Support Framework for Nursing and Midwifery.

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

Royal Marsden Hospital Manual of Clinical Nursing Procedures, 10th edition (2020).

Nursing and Midwifery Council (2018), *The Code - Professional standards of practice and behaviour for nurses, midwives and nursing associates.*

NIPEC (2019) Deciding to Delegate: A Decision Support Framework for Nursing and Midwifery.

In addition, registered nurses and midwives must take account of other nationally and regionally agreed guidance on clinical procedures, e.g., new born blood spot screening guidance or guidance on the administration of vaccines.

(2) Available evidence

Evidence to help inform the screening process may take many forms. What evidence/information (both qualitative and quantitative) have you gathered to inform this policy? *NB: Specify the details for each of the Section 75 categories for any staff affected, the Trust Workforce, any patients/clients affected and the Trust general population in the following tables **if appropriate**.*

2.1 Staff Affected by this Policy/Proposal / Composition of Southern Trust Workforce

Section 75 Group	Southern Trust Workforce Profile as at 1 January 2024	Percentage
Gender	Female	85.1%
	Male	14.9%
Religion	Protestant	34.2%
	Roman Catholic	56.2%
	Neither	9.6%
Political Opinion	Broadly Unionist	9.1%
	Broadly Nationalist	9.8%
	Other	7.6%
	Do Not Wish To Answer/Not Known	73.6%
Age	16-24	8.1%
	25-34	23.3%
	35-44	27.2%
	45-54	20.6%
	55-64	17.2%
	65+	3.7%
Marital Status	Single	32.5%
	Married	55.8%
	Not Known	11.7%
Dependent Status	Caring for a Child/Children / Dependant Older Person / Person With a Disability	15.3%
	None	31.2%
	Not Known	53.5%
Disability	Yes	2.5%
	No	73.9%
	Not Known	23.6%
Ethnicity	Bangladeshi	0.01%
	Black African	0.36%
	Black Caribbean	0.01%
	Black Other	0.03%
	Chinese	0.09%
	Filipino	0.54%
	Indian	1.16%
	Irish Traveller	0.02%
	Mixed Ethnic	0.2%
	Pakistani	0.15%
	White	74.29%
	Not Known	23.15%
Sexual Orientation towards:	Opposite Sex	57.2%
	Same Sex	1.1%
	Same and Opposite Sex	0.3%
	Do Not Wish To Answer/Not Known	41.4%

2.2 Patients / Clients Affected / Southern Trust's Area Population Profile – Census 2021

Section 75 Group	Trust's Area Population Profile (Population of 358,034)	Percentage
Gender	Female	50.2
	Male	49.8
Religion	Protestant	35.5
	Roman Catholic	57.0
	Other	7.5
Political Opinion	Not collected	
Age	0-15	22.5
	16-24	10.2
	25-44	26.5
	45-64	25.2
	65-84	13.8
	85+	1.8
Marital Status (aged 16+ years)	Single	28.1
	Married/Civil Partnership	37.7
	Other	34.2
Dependent Status	Caring for a dependent Child/Children	25.8% care for a dependent child/children
Disability	Yes	21.8
	No	78.2
Ethnicity	Asian Other	0.4
	Bangladeshi	0
	Black African	0.4
	Black Caribbean	0
	Black Other	0.4
	Chinese	0.3
	Filipino	0.1
	Indian	0.2
	Irish Traveller	0.3
	Mixed Ethnic Group	0.8
	Arab	0.1
	Roma	0.1
	Other	0.2
	Pakistani	0.1
	White	96.5
Sexual Orientation	Heterosexual	69.8
	LGBTQ+	1.1
	Not Stated	29.1

(3) Needs, experiences and priorities

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

Section 75 Category	Details of Needs, Experiences and Priorities	
	Staff	Service Users
Gender	<p>This policy is a purely clinical or technical in nature and has no relevance or impact (actual / potential) in terms of equality of opportunity, disability duties, good relations and human rights.</p> <p>It aims to standardise practice and / or achieve best practice based on current evidence.</p>	<p>This policy is a purely clinical or technical in nature and has no relevance or impact (actual / potential) in terms of equality of opportunity, disability duties, good relations and human rights.</p> <p>It aims to standardise practice and / or achieve best practice based on current evidence.</p>
Age		
Religion		
Political Opinion		
Marital Status		
Dependent Status		
Disability		
Ethnicity		
Sexual Orientation		

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

N/a

(4) Screening Questions

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

(4.1) What is the likely impact of equality of opportunity for those affected by this policy/proposal, for each of the Section 75 equality categories?			
Section 75 category	Details of policy/proposal impact		Level of impact? Minor/major/none
	Staff	Service Users	
Gender			None
Age			None
Religion			None
Political Opinion			None
Marital Status			None
Dependent Status			None
Disability			None
Ethnicity			None
Sexual Orientation			None

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

(4.3) To what extent is the policy/proposal likely to impact on good relations between people of different religious belief, political opinion or racial group? minor/major/none		
Good relations category	Details of policy/proposal impact	Level of impact Minor/major/none

Religious belief		None
Political opinion		None
Racial group		None

(4.4) Are there opportunities to better promote good relations between people of different religious belief, political opinion or racial group?	
<i>Good relations category</i>	<i>Please provide details</i>
Religious belief	N/a
Political opinion	N/a
Racial group	N/a

(5) Consideration of Disability Duties

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

(6) Consideration of Human Rights

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

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

Article	Positive impact	Negative impact = human right interfered with or restricted	Neutral impact
Article 2 – Right to life			X
Article 3 – Right to freedom from torture, inhuman or degrading treatment or punishment			X
Article 4 – Right to freedom from slavery, servitude & forced or compulsory labour			X
Article 5 – Right to liberty & security of person			X
Article 6 – Right to a fair & public trial within a reasonable time			X

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

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

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

N/A

(7) Screening Decision

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

Major impact		EQIA Required? <i>(Delete as appropriate)</i>	
		Yes	<u>No</u>
Minor impact		Mitigation Required	Alternative Policy Required
		Yes/No	Yes/No
No impact	X	Screened Out	

(7.2) Please give reasons for your decision and detail any mitigation or alternative policies considered.

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

Yes	
No	X

(8) Monitoring

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

Approved Lead Officer:



Grace Hamilton

**Assistant Director for Nursing, Patient Safety,
Quality and Experience**

Position:

Date:

13 December 2024

**Julianne Lee Head of Nursing, Patient Safety and
Quality of Care, SHSCT**

Policy/proposal screened by:

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