Southern Health and Social Care Trust
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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 Guidance Notes' (on Intranet) 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

Phasing out of the Newry and Mourne Good Neighbour service.

The proposal is to amend the existing contract with the Confederation of Community Groups (CCG) Newry and Mourne to allow the Good Neighbour befriending service to be closed to new referrals and gradually phased out. CCG will grow the Good Morning service to support increased referrals, ensuring wider reach for the support service to older people across the Newry and Mourne locality area. This will be supported by an increased pool of volunteers and increased promotion of the service.

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

Revised proposal. The current contract includes Good Neighbour services for 70 individuals, although the current number of clients requesting the service has dropped and sits currently at just 30 users.

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

- To recognise and respond to changing demand for Good Neighbour services – statistical report shows this is less popular and take-up following referral has declined.
- To increase capacity to deliver the Good Morning service to a greater number of clients across the locality area
- To enable the service to be extended to more people in rural settings

- To provide a safe, effective and efficient support service to older people in their own homes
- To continue to provide support to isolated older people in their own homes, in the manner in which they feel most comfortable (telephone service rather than home visits)

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

Older people

Those with a disability

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

The Trust

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

The Good Neighbour service has previously absorbed a significant amount of CCG staff time, restricting focus on promoting and developing the Good Morning service. By refocusing staff resource, we will be able to increase the pool of volunteers and support an increased number of older people going forward. CCG has secured further investment in their IT infrastructure to support this growth.

The trend in terms of low take up of the Good Neighbour service indicates that Trust funds can therefore be diverted to supporting growth of the Good Morning phone service, for which there is higher demand and positive referral outcomes.

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

- Confederation of Community Groups – as the existing contract holder, they

will be asked to change their model of service promotion and deliver to an increased number of clients, through an increased volunteer base. CCG have the infrastructure in place to increase their delivery of the Good Morning service.

- Existing service users – existing Good Neighbour service users will continue to be supported as the service will close to new referrals only.
- New service users – Whilst the Good Neighbour service will not be offered, increased number of older housebound individuals in the N&M area can access the Good Morning telephone service and this support can be put in place quickly.
- Trust staff teams (espec. ICT) – staff will no longer be able to refer to the Good Neighbour service as a form of support.

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

Transforming Your Care 2011 (focus on prevention and tackling inequalities; providing the right care in the right place at the right time; and promoting independence and personalisation of care) Making Life Better 2012-2023, DHSSPS (especially the Theme 2 Equipped throughout life and Theme 5 Empowering communities); Health and Wellbeing 2026: Delivering Together (building capacity in communities and support for social prescribing)

(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 - staff are not affected by this proposal

Section 75 Group	*Make up of Staff Affected*	*Percentage*
Gender	Female Male	
Religion	Protestant Roman Catholic Not Known/Other	
Political Opinion	Broadly Unionist Broadly Nationalist Other Do Not Wish To Answer/Not Known	
Age	16-24 25-34 35-44 45-54 55-64 65+	
Marital Status	Single Married/Civil Partnership Other/Not Known	
Caring Responsibility	Caring for a Child/Children/Dependant Older Person/Person(s) With a Disability None Not Known	
Disability	Yes No Not Known	
Ethnicity	Bangladeshi Black African Black Caribbean Black Other Chinese Filipino Indian Irish Traveller Mixed Ethnic Pakistani White Not Known	
Sexual Orientation ***towards:***	Opposite Sex Same Sex Same and Opposite Sex Do Not Wish To Answer/Not Known	

2.2 Composition of Southern Trust Workforce

Section 75 Group	*Southern Trust Workforce Profile as at 1 January 2019*	*Percentage*
Gender	Female Male	**85.6** **14.4**
Religion	Protestant Roman Catholic Neither	**37.0** **57.1** **5.9**
Political Opinion	Broadly Unionist Broadly Nationalist Other Do Not Wish To Answer/Not Known	**9.5** **9.6** **7.6** **73.4**
Age	16-24 25-34 35-44 45-54 55-64 65+	**5.1** **25.8** **24.6** **23.3** **18.3** **2.9**
Marital Status	Single Married Not Known	**29.3** **62.3** **8.4**
Dependent Status	Caring for a Child/Children / Dependant Older Person / Person With a Disability None Not Known	**22.2** **27.8** **50.0**
Disability	Yes No Not Known	**2.3** **78.3** **19.4**
Ethnicity	Bangladeshi Black African Black Caribbean Black Other Chinese Filipino Indian Irish Traveller Mixed Ethnic Pakistani White Not Known	**0** **0.09** **0.02** **0.03** **0.12** **0.24** **0.64** **0.03** **0.1** **0.1** **80.4** **18.2**
Sexual Orientation ***towards:***	Opposite Sex Same Sex Same and Opposite Sex Do Not Wish To Answer/Not Known	**52.9** **0.9** **0.1** **46.1**

2.3 Patients / Clients Affected

(complete as far as possible with information available to you)

Section 75 Group	*Make up of Patients/Clients Affected*	*Percentage Good Morning Service*	*Percentage Good Neighbour Service*
Gender	Female Male	**75%** **25%**	**86%** **14%**
Religion	Protestant Roman Catholic Other	**NMDDC figures** **24%** **72%**	
Political Opinion	Not collected	Not collected	
Age	45-64 65-84 85+	**9%** **45%** **46%**	**0%** **90%** **10%**
Marital Status	Single Married/Civil Partnership Other/Not Known	Not collected	
Caring Responsibility	Caring for a Child/Children/Dependant Older Person/Person(s) With a Disability None Not Known	Not collected but a separate service exists to support Carers (Good Day Good Carer)	
Disability	Yes No Not Known	Not collected, but majority housebound	
Ethnicity	Bangladeshi Black African Black Caribbean Black Other Chinese Filipino Indian Irish Traveller Mixed Ethnic Pakistani White Not Known	Not collected although the Trust acknowledges that it does have a growing minority ethnic community throughout its catchment area as evidenced in the uptake of the NI HSC Interpreting Service and NI Census 2011	
Sexual Orientation ***towards:***	Do Not Wish To Answer/Not Known	Not collected	

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Breakdown of service and referral sources to the Good Morning & Good Neighbour services 2018/19 including a breakdown in

Good Neighbour referrals have a much lower success rate due to a number of reasons. The service can be difficult to explain over the phone and convince the user of the value of the service. It may also seem overwhelming to someone in a potentially vulnerable position or state of mind. In addition, the user may not be appropriate for the service in the first place, and the referral agent may not have physically met the user. Due to its unobtrusive nature, Good Morning referral tends to have a better placement rate.

Trust Team / Service Requested	Integrated Care Teams	Community OT	COPD	mPower	Physical Disability	Sensory Disability	Outcome of referrals
Good Morning **Total = 19**	X 15	X 0	X 1	X 1	X1	X 1	• 16 placed with the GM service • 1 user pending due to his / her current situation • 2 users declined the offer of the service
Good Neighbour **Total = 15**	X 13	X 1	X 0	X0	X1	X 0	• 2 users placed with the GN service • 6 users placed with the GM service as this was more suitable • 3 users pending with the GN due to his / her situation • 4 users declined the offer of the service

(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	There will be no adverse impact on staff	
Age		With increasing years, individuals can become socially isolated, particularly where mobility is affected through health issues.
Religion		
Political Opinion		
Marital Status		
Dependent Status		
Disability		Healthy life expectancy in in NI is 59.1 years for men and 60.9 years for women. With increased health issues, many older people have decreased mobility and can become housebound, isolated and reliant on carers. This service breaks down the social isolation, provides a listening ear and links to other services where issues or risks are identified.
Ethnicity		The communication needs of persons who do not speak English as a first language will be provided for through the provision of interpreting/written

Section 75 Category	Details of Needs, Experiences and Priorities	
	Staff	Service Users
		translation services in the interest of providing accessible services.
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.

Meeting with Confederation of Community Groups (service provider) to discuss issues around current contract and needs of service users. Statistics on 2018-19 referrals and service outcomes on previous page provide evidence of the service user views as the majority do not take up the Good Neighbour service. Statistics also showed that the Good Morning service was more popular with the oldest age bracket of 84+years, with 14 service users aged 95 years or older.

The proposal for service change developed from those discussions and is seen as a positive development by CCG in enabling growth of the overall support to combat social isolation.

Discussed with colleagues in Access & Information Service to ascertain demand for Good Neighbour service and unmet need for Good Morning service. Agreed that expansion of the GM service availability would be beneficial and recognised the issues with the GN service.

Discussed with SHSCT Integrated Care Team as the source of majority of referrals and gave feedback info on referral outcomes. The proposed change was discussed with the team. Whilst they initially raised concerns about the service being removed, when presented with the data on referrals they were disappointed that so few had resulted in take up of service. They agreed that if other options such as the Good Morning service and BRC supports were being made available, then it was not worth investing significant time and resource to generate such limited outcomes. They would focus referrals on the Good Morning service.

(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		Better reach to males as their take-up of the Good Morning service is higher than for the Good Neighbour service	Minor improvement to service reach for male service users
Age		New users unable to access service	Minor – numbers involved small and mitigating action in place
Religion			
Political Opinion			
Marital Status			
Dependent Status			
Disability		New users unable to access service	Minor – numbers involved small and mitigating action in place
Ethnicity			
Sexual Orientation			

(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	
Age	Expansion of GM service improves equality of opportunity as increased availability
Religion	
Political Opinion	
Marital Status	
Dependent Status	
Disability	Expansion of GM service improves equality of opportunity as increased availability
Ethnicity	
Sexual Orientation	

(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?	
Good relations category	***Please provide details***
Religious belief	
Political opinion	
Racial group	

(5) Consideration of Disability Duties

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

The volunteer roles with the Good Morning service are highly inclusive and have been carried out by a number of individuals with disability (including sight & physical disability). With increased capacity to support volunteers, this aspect of the work can be further developed and provides very positive opportunities for people with disabilities to participate, with positive attitudes towards them strengthened.

(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			Neutral
Article 3 – Right to freedom from torture, inhuman or degrading treatment or punishment			Neutral
Article 4 – Right to freedom from slavery, servitude & forced or compulsory labour			Neutral
Article 5 – Right to liberty & security of person			Neutral
Article 6 – Right to a fair & public trial within a reasonable time			Neutral
Article 7 – Right to freedom from retrospective criminal law & no punishment without law			Neutral
Article 8 – Right to respect for private & family life, home and correspondence.			Neutral
Article 9 – Right to freedom of thought, conscience & religion			Neutral
Article 10 – Right to freedom of expression			Neutral
Article 11 – Right to freedom of assembly & association			Neutral
Article 12 – Right to marry & found a family			Neutral
Article 14 – Prohibition of discrimination in the enjoyment of the convention rights			Neutral
1st protocol Article 1 – Right to a peaceful enjoyment of possessions & protection of property			Neutral
1st protocol Article 2 – Right of access to education			Neutral

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.

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

(7) Screening Decision

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

Major impact		**EQIA Required?** ***(Delete as appropriate)***	
		Yes	**No**

Minor impact	x	Mitigation Required	Alternative Policy Required
		Yes	**No**

No impact		**Screened Out**

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

Minor impact because numbers involved are very small and statistics show that the Good Morning service is preferred by new service users. Mitigating actions will include retaining the service for existing service users, so they are not negatively affected.

(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

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(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?
Monitored through normal contract management and KPIs to ensure effective communication of the support options available to a wider audience and awareness of service changes. Received referrals to the GN service will be tracked to confirm with GM service has met need.

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