Southern Health and Social Care Trust
Quality Care - for you, with you

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

Pressure Ulcer Prevention and Management Policy

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

Revised updated from a previous version

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

The main objective of the policy is to ensure that the Southern HSC Trust has appropriate preventative strategies, interventions and monitoring of pressure ulceration within all clinical areas and that staff know how to access information, guidance and education in relation to the Prevention and Management of Pressure Ulceration.

Outline actions which must be taken to provide consistent, high quality, evidence based practice in relation to the assessment, prevention and management of pressure ulcers for each individual patient with or at risk of developing pressure ulcers throughout the SHSCT. Facilitate the early identification of patients who are at an increased risk of developing pressure damage and implement timely preventative measures.

Inform and educate health care professionals in Pressure Ulcer risk assessment, prevention and management strategies.

Reduce the incidence of avoidable pressure ulceration within the SHSC Trust.

Have robust governance arrangements to support the ongoing monitoring of acquired and admitted with pressure damage, ensuring investigations are carried out, escalated and learning shared in timely and appropriate manner.

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

All Section 75 categories within the Southern Trust area should potentially benefit from this policy.

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

Trust holds ownership of policy

(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?)

No

(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.)

Impact directed to improving safety and quality issues on care delivery within and throughout entire Southern Trust area from neonatal to elderly care lifespan regardless of age, gender, sexual orientation, disability, ethnicity or religion by all health care professionals in relation to pressure ulcer prevention and management within both hospital and community based settings.

- ☐ Patients
- ☐ Senior Nursing Assistants
- ☐ Registered Nurses
- ☐ Allied Health Practitioners
- ☐ Medical Teams
- ☐ Adult Protection /Safeguarding Team
- ☐ Department Sisters / Nurses in Charge/Managers (or designates)
- ☐ Assistant Service Managers/Team Managers
- ☐ Tissue Viability Nurse Team
- ☐ Safety Assurance Team Directorate Representative
- ☐ Divisional Nurses and Governance Leads

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

Pressure ulcer forms a key quality indicator at Public Health Agency/ Health Department level and figures are submitted by Trust to them on regular basis.

National Pressure Ulcer Advisory Panel / European Pressure Ulcer Advisory Panel / Pan Pacific Pressure Injury Alliance

National Institute for Health and Clinical Excellence (NICE) Guidelines on Pressure Ulcers

Acute/Community Guidelines for the selection of pressure relieving equipment

(2) Available evidence

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

2.1 Staff Affected by this Policy/Proposal - Composition of Southern Trust Workforce
This policy is clinical in nature in terms that it is guidance for health care staff and does not have any adverse impact on equality or human rights for staff or service users (patients)

Section 75 Group	*Southern Trust Workforce Profile as at 1 January 2021*	*Percentage*
Gender	Female Male	**85.1%** **14.9%**
Religion	Protestant Roman Catholic Neither	**35.6%** **56.7%** **7.7%**
Political Opinion	Broadly Unionist Broadly Nationalist Other Do Not Wish To Answer/Not Known	**9.7%** **10.1%** **7.8%** **72.4%**
Age	16-24 25-34 35-44 45-54 55-64 65+	**6.5%** **25.0%** **25.3%** **21.8%** **18.4%** **3.0%**
Marital Status	Single Married Not Known	**31.6%** **59.1%** **9.3%**
Dependent Status	Caring for a Child/Children / Dependant Older Person / Person With a Disability None Not Known	 **19.0%** **31.1%** **49.9%**
Disability	Yes No Not Known	**2.5%** **78.7%** **18.8%**
Ethnicity	Bangladeshi Black African Black Caribbean Black Other Chinese Filipino Indian Irish Traveller Mixed Ethnic Pakistani White Not Known	**0.02%** **0.21%** **0.02%** **0.02%** **0.1%** **0.4%** **0.72%** **0.02%** **0.12%** **0.15%** **80.1%** **18.1%**
Sexual Orientation ***towards:***	Opposite Sex Same Sex Same and Opposite Sex Do Not Wish To Answer/Not Known	**57.3%** **1.0%** **0.1%** **41.6%**

2.2 Patients / Clients Affected - Southern Trust's Area Population Profile – Census 2011

This policy is clinical in nature in terms that it is guidance for health care staff and does not have any adverse impact on equality or human rights for staff or service users (patients)

Section 75 Group	*Trust's Area Population Profile (Population of 358,034)*	*Percentage*
Gender	Female Male	**50.36** **49.64**
Religion	Protestant Roman Catholic Other	**39.15** **56.69** **4.16**
Political Opinion	Not collected	
Age	0-15 16-24 25-44 45-64 65-84 85+	**22.73** **12.25** **28.45** **23.40** **11.69** **1.48**
Marital Status (aged 16+ years)	Single Married/Civil Partnership Other	**34.99** **50.24** **14.77**
Dependent Status	Caring for a Child/Children/Dependant Older Person/Person(s) With a Disability	**11.34% of usually resident population provide unpaid care**
Disability	Yes No	**19.64** **80.36**
Ethnicity	Asian Other Bangladeshi Black African Black Caribbean Black Other Chinese Indian Irish Traveller Mixed Ethnic Group Other Pakistani White	**0.20** **0.01** **0.11** **0.01** **0.10** **0.22** **0.17** **0.15** **0.29** **0.16** **0.07** **98.51**
Sexual Orientation	Estimated 6-10% of persons identify as lesbian, gay, bisexual – *Source: 2012 report by Disability Action & Rainbow Project*	

(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	This policy is clinical in nature in terms that it is guidance for health care staff and does not have any adverse impact on equality or human rights for staff or service users (patients)	This policy is clinical in nature in terms that it is guidance for health care staff and does not have any adverse impact on equality or human rights for staff or service users (patients)
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.

Group of Tissue Viability Nurses (TVN) and Dermatology staff devised policy; then shared with Nursing Governance department who sent to all Leads and department managers including AHP's with feedback sent to TVN originator to incorporate/ revise or discount as part of final version.

Already being implemented by Tissue Viability Teams and Senior management of all divisions

within Trust.

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

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

This policy is clinical in nature in terms that it is guidance for health care staff and does not have any adverse impact on equality or human rights for staff or service users (patients) and can be screened out at this stage.

It is the assumption, based on person centred care, that any information provided to patients will be provided in accessible/alternative formats as required. Accessible formats can include, for example, information in easy to read formats or audio formats when the patient has a learning disability or is visually impaired. If a patient does not speak English as a first language the information will be translated or an interpreter / sign language interpreter provided as appropriate.

(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?

This policy should be reviewed every 3- 5 years in line with similar clinical policies/governance arrangements to ensure kept up to date and in line with current evidence and clinical guidance related to pressure ulcer management and prevention.

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Date: 10/6/21

HOS approval sign and date

Policy/proposal screened by: 23/06/2021

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.