



Public Authority Statutory Equality and Good Relations Duties

Annual Progress Report 2018-19

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Documents published relating to our Equality Scheme can be found at:
<http://www.southerntrust.hscni.net/about/Publications.htm>

Signature:



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 2018 and March 2019.

PART A - Section 75 of the Northern Ireland Act 1998 and Equality Scheme

Section 1: Equality and good relations outcomes, impacts and good practice

- 1 In 2018-19, 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.

Welcome to this the 12th Annual Progress Report prepared by the Southern Health and Social Care Trust's Equality Assurance Unit, the purpose of which is to demonstrate how the Trust has fulfilled its:

- Equality and Good Relations Duties under Section 75 of the Northern Ireland Act 1998 (together with the commitments in its approved Equality Scheme) and its Disability Duties as set out in Section 49A of the Disability Discrimination Order (DDO):

Equality and Good Relations Duties

Section 75 of the NI Act 1998 requires Public Authorities including Health and Social Care (HSC) Trusts, when carrying out their functions relating to NI, to have due regard to the need to promote equality of opportunity between nine categories of persons, namely: between persons of different religious belief, political opinion, racial group, age, marital status or sexual orientation; between men and women generally; between persons with a disability and persons without; and between persons with dependants and persons without.

Trusts must also have regard to the desirability of promoting good relations between persons of different religious belief, political opinion or racial group.

The Trust must also ensure the effective and timely discharge of the commitments in its approved Equality Scheme.

Disability Duties

The Disability Duties aim to promote positive attitudes toward persons with a disability and to encourage the participation of disabled persons in public life.

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 not intended to be an exhaustive account of all progress made.

This report stands alongside a range of other Trust reports. For example, the 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 etc. Copies of these reports can be obtained by contacting the Trust's Equality Assurance Unit in the first instance.

Equality and Disability Action Plans

The implementation of the Trust's Equality and Disability Action Plans are central to the implementation of the Trust's statutory equality and disability duties as are the tools of equality screening and equality impact assessments. (See Appendix 1 of this year's report for a progress update on the Trust's Equality & Disability Action Plans.)

The overarching aim of these statutory duties is to place equality, good relations, human rights and the disability duties at the heart of public policy decision making both as a service provider, an employer and a procurer of goods, facilities and services.

Review Meeting

The Equality Commission for NI is the responsible organisation for the enforcement of the Section 75 Equality and Disability Duties. The Commission is also responsible for ensuring compliance with anti-discrimination legislation and the promotion of equality of opportunity and good relations.

A review meeting took place during the year under review (i.e. 21 February 2019) with the Head of the Equality Unit and a Senior Representative from the Commission – Kevin Oakes. The Commission praised the Trust's Equality Unit for the wide range of equality work being taken forward in furthering the Trust's equality and disability obligations. The Commission also noted the high quality of the Equality Screenings completed.

Examples of Key Policy Developments during the year under review include:

Promoting Equality in Employment

1.1 Regional Recruitment & Selection Framework (R&S) – Promoting Equality in Employment

The above Framework has been developed through the collective efforts of key stakeholders from across HSC. Its usage will support the provision of clear, consistent and transparent recruitment within HSC for all non-medical appointments.

The Framework went live on 1 November 2018 and replaced the Trust's previous Recruitment & Selection Procedures with immediate effect.

The new Framework is accessible via the Resourcing SharePoint site at [HSC Recruitment & Selection Framework October 2018](#). Supporting guides for

managers on the various stages of the recruitment and selection process are also available.

To hear more about the process from Noeleen McCreanor, Chair of the Regional Strategic Resourcing Innovation Forum click the following link:- <https://vimeo.com/297754548/571d3221e1>

1.2 Recruitment & Selection Training requirements

In conjunction with the Framework, a newly designed recruitment and selection eLearning package has been developed.

Upon completion of this eLearning package, staff will then undertake face to face recruitment and selection skills training.

For staff who have already undertaken recruitment and selection training, the eLearning package should be completed at least once every three years as a means of refresher learning. There is no requirement for staff who are already trained to complete the new eLearning package until such time as they are due to complete refresher training.

The updated recruitment and selection eLearning package for new and refresher training is accessible via the following link <http://www.hslearning.com/>

From Monday 29 October 2018 the Recruitment & Selection regional eLearning module replaced the previous Full and Refresher R&S modules.

In addition, an information support guide has been produced to support applicants in understanding the Recruitment and Selection process within HSC. Amongst other things the guide includes important points to note; an explanation of who we are; our values; the benefits of working in the HSC; what is the purpose of the application form along with useful advice and tips when completing and submitting the application form.

1.3 Review of the Trust's Equal Opportunity Policy

A review of the Trust's Equal Opportunity Policy took place during the current reporting period. The new policy is entitled Equality, Diversity and Inclusion and carries forward the values and principles in the former 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. However, the existence of the law cannot itself ensure that any policy of non-discrimination will work effectively. The Trust recognises that this will only be achieved if management and staff at all levels examine critically their attitudes to people and ensure that no trace of discrimination is allowed to affect their judgement.

Para 2.1 of the Trust's Equality, Diversity and Inclusion Policy refers.

1.4 Assessment of Fair Participation amongst the SHSCT workforce - Article 55 Tri-annual Review

In the 2017/18 annual progress report the Trust reported on emergent workforce trends and the extent to which fair participation is being afforded between the two main communities within its workforce. Copies of this report can be obtained from the Trust's Equality Unit. Analysis revealed that there was an increase of **1.4%** in favour of Roman Catholics, in the overall workforce composition, when comparison is drawn with staff employed as at 1 January 2013 and 1 January 2016. This finding was 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 26 – 'A Summary of NI Monitored Workforce Returns' when the Roman Catholic community share of health sector jobs stood at 51.9%.

In response to the detailed analysis and assessment of fair participation the Trust subsequently received confirmation, from the Equality Commission, that its Review was fully compliant with the Fair Employment and Treatment (NI) Order 1998.

The Trust's next tri-annual review is due for completion end December 2019. The full report will be available in January 2020. The table below shows the preliminary analysis of the community background composition of the Trust as at 1 January 2019 along with the Southern Area Census 2011. The workforce composition is largely reflective of the local Census figures:

COMMUNITY BACKGROUND	SOUTHERN TRUST STAFF	PERCENTAGE OF P & RC	SOUTHERN AREA CENSUS 2011
Protestant	5,872	[38.4%]	[42.0%]
Roman Catholic	9,438	[61.6%]	[58.0%]
Non-Determined	927		
TOTAL	16,237*	100%	

NB: * Total includes multiple job holders

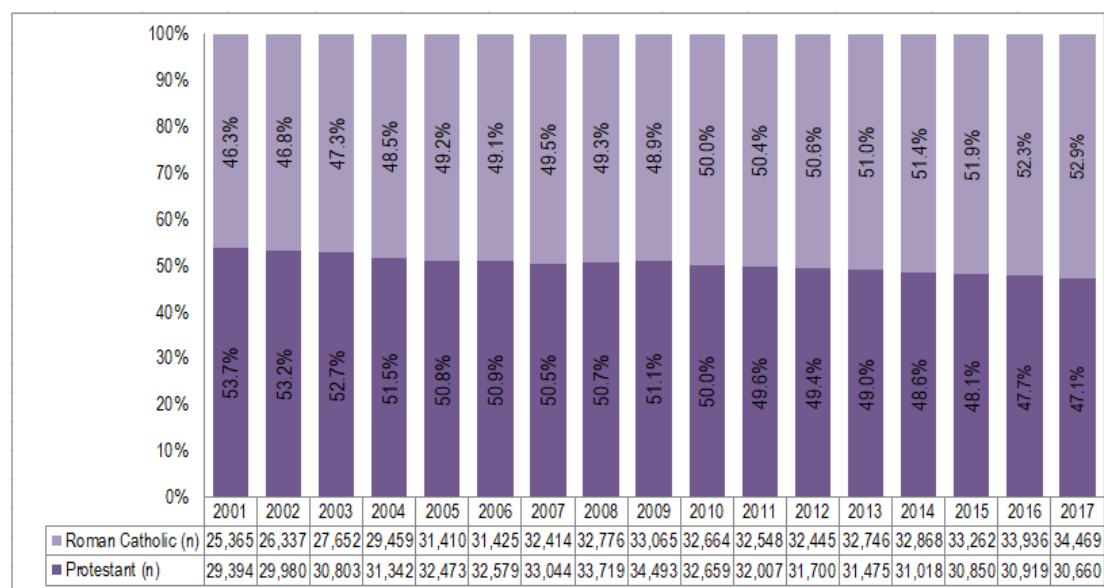
Latest figures, released in February 2019 from the ECNI Monitoring Report No.28, showed that in 2017 the Roman Catholic community share **[52.9%]** of **health sector employment** continued to increase, continuing the trend observed since 2011 of a greater share of members of the Roman Catholic community in the health sector – see page 6.

While members of the Protestant community continued to comprise the majority of the **public sector workforce**, the share of public sector employees from the Roman Catholic community continued to increase. Those from the Roman Catholic community comprised more than half of all applicants and appointees.

Since 2012, the share of applicants from the Roman Catholic community has exceeded that of those from the Protestant community.

During the period 2008-2017, the share of leavers from members of the Roman Catholic community and members of the Protestant community fluctuated, and thus no observable trend can be identified by community background.

Health Sector Workforce All Employees [%] by Community Background 2001-2017



Source: ECNI Annual Summary of Fair Employment Monitoring Returns, 2017, No 28.

1.5 Annual Fair Employment Monitoring Return

The Trust submitted its statutory 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 and appointees, promotees and leavers for the year ending 31 December 2018.

If you are interested in obtaining a copy of this year's monitoring return please contact the Equality Assurance Unit.

Southern Trust Applicant and Appointee figures for 2018 Fair Employment Monitoring Return (based on the criteria stipulated by the ECNI)

Community Background	Applicants	Appointees
Protestant	1,281 [36.9%]	643 [37.1%]
Roman Catholic	2,191 [63.1%]	1,091 [62.9%]
Non Determined	405	175
Total	3,877 [100%]	1,909 [100%]

1.6 Employability Scheme – Positive Action Making it Work

Across UK only 6% of adults with a learning disability are in paid employment yet two thirds would like to work (Mencap). More than 20% of the population in NI report a long-standing health problem or disability and 40% of households have at least one person with a disability?

During the year under review, the Southern Trust 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 agreed the following actions:

- Commence in an incremental way with a small number of trainees (to begin with).
- 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 14 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.

1.7 Job Shadow Day

Job Shadow Day took place on 25 April 2018 and gave adults with a disability an opportunity to explore their career interests within a health and social care setting.

Job Shadow Day was developed by the Irish Association of Supported Employment and was originally launched in 2008. It aims to bring together people with disabilities, employers and Supported Employment organisations to raise awareness and highlight the positive contribution disabled people make to the workforce.

12 service users took up the opportunity to Job Shadow employees across horticultural placements, support with arts and crafts in day care settings, domestic and administration support to gain valuable work experience. A coffee morning was organised for Friday 27 April in the Seagoe Parish Centre, Portadown to present certificates to the 12 participants.

Northern Ireland Union of Supported Employment (NIUSE) commended the Southern Trust for a very successful Job Shadow Day. Plans are ongoing to widen employment opportunities for persons with a disability within the Trust in partnership with Trust training partners and NIUSE – 1.6 above refers.

Pictured right Trust Staff with Edith Dunlop of NIUSE



As of 13 December 2018 the Trust had 292 employees who had self-declared that they have a disability working across all job families. Most were employed in Nursing and Midwifery (99), followed by Social Services (69), Admin and Clerical (53), Professional and Technical (32), Medical and Dental (23), Support Services (14) and the remainder in Estates. This equates to 2.3% of the workforce.

The prevalence of disability is generally under-reported and it is likely that the Trust is employing more staff who have a disability and who choose not to declare. To encourage staff to declare that they have a disability and to seek support the Equality Unit has developed a range of tools and resources for both management and employees. One such resource is an information leaflet entitled 'Should I Disclosure to my Employer that I have a Disability'. The leaflet sets out the benefits of disclosure for an employee and the protections to be derived from the Disability Discrimination Act 1995.

1.8 Disability Action Plan Placements

During the year under review there were 5 disability placements sought and 5 placement catered for in the areas of portering, laboratory, catering and admin.

1.9 International Day of Persons with Disabilities – Local Service Users

Our FIT 4 U2 service users recently enjoyed a celebratory team building event on the occasion of International Day of Persons with Disabilities.

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

The event was a great opportunity for Fit 4 U2 members to come together, have fun and try some new activities. Those attending particularly enjoyed being entertained by the choirs from Lisnally Special School, Armagh and Armagh Men's Shed and were delighted with the special performance from the musical "Grease" by service users from adult day opportunities. It was a very uplifting way to mark the **United Nations International Day of Persons with Disabilities**.



FIT 4 U2 aims to empower adults with learning disabilities to improve their health and wellbeing through participation in a range of day time physical activity and sports. Activities are adapted to suit the needs of participants and promote positive physical, mental and social health benefits. It operates in Leisure Centres in the Trust area, including Armagh, Dungannon, Craigavon, Banbridge and Newry. It is funded by the Public Health Agency and led by the Southern Trust in partnership with other organisations.

1.10 International Day of People with Disabilities – Regional Event

The Trust took part in a Regional event to celebrate International Day of People with Disabilities. *People living with disabilities, their families and carers working in partnership with local voluntary and health and social care organisations make a valuable contribution in ensuring inclusiveness and equality in society.* That was the key message from the event held on 3 December 2018 at the Long Gallery, Parliament Buildings, Stormont, to mark International Day of People with Disabilities.

Opening the event, Kellie Armstrong, MLA said, *“I am delighted, on behalf of the All Party Groups on Disability and Visual Impairment, to welcome you to celebrate the work of the Physical and Sensory Disability Strategy on this day observed to recognise the achievements of people living with disabilities across the world. This year’s theme is empowering persons with disability and ensuring inclusiveness and equality. It is my privilege to hear the stories of individuals and organisations here today who do just that on a daily basis”.*

The regional event, organised by Disability Action, in partnership with the Health and Social Care Board and the Department of Health, showcased many initiatives developed and implemented through the Physical and Sensory Disability Strategy for NI. It also recognised the valuable contribution and involvement of local people with disabilities - who reflected on their experiences of working throughout the implementation of the Strategy.

The Trust’s Sensory Team had a stand at this event. Susan Matson, social worker from the Trust’s sensory disability team presented her research on the effectiveness of *cognitive behaviour therapy (CBT) in the management of Tinnitus*. The research was well received by the many staff and members of the public who wished to hear more about CBT and the findings emanating from Susan’s research.

The research findings have been shared with the Board and the other 4 HSC Trusts sensory leads.

The outcome of the CBT pilot showed a significant improvement (average 36%)

in the lives of those who took part in the study. This was achieved by reassuring individuals that Tinnitus does not represent catastrophic harm, or bodily injury, and that Tinnitus can be managed. This helped reduce stress and improve sleep.

The result of the pilot, combined with the contribution of the sensory team's expertise, showed that the addition of providing CBT can reduce:

- a patient's dependence on medication;
- can have a positive impact on patient's quality of life; and
- provide a strategy/care pathway for living with the condition.

It also evidenced that the role of a CBT therapist is a valuable resource for Tinnitus patients within the Sensory Disability Services in the SHSCT.

Patient comment. *"This is the first time in years that something has made a difference in coping with Tinnitus. I have been on medication for many years but it hasn't made any difference."*

1.11 Looked After Children Awards Ceremony

An awards event took place, during the year under review, to celebrate the successes of young people who live in care in the Southern Trust in Brownlow House, Lurgan. The event was hosted by the Southern Trust in partnership with The Fostering Network.

Approximately 95 young people over the age of twelve years old in foster and residential care were nominated by their social workers and received awards for a wide range of achievements, including educational, training, sporting and life skills achievements.



Opening the awards ceremony, Mr Colm McCafferty, Southern Trust Assistant Director of Corporate Parenting said: *"We know the many challenges that young people can face, so it is important to celebrate when they overcome these challenges and achieve success."*

"As parents we are proud when our children do well, and as corporate parents for the children in our care - we in the Southern Trust are extremely proud of their achievements and want to celebrate them."

Kathleen Toner Director of Fostering Network commented: *"The Fostering Network is delighted to join with the Trust to celebrate with all the young people who have worked hard during the past year to achieve success in a range of activities. Well done to everyone."*

Mr Paul Morgan, Southern Trust Director of Children and Young People's Services also highlighted the achievements of all the young people attending the event: *"The young people here today have taken their future into their own hands, they've excelled in areas of their individual interests and have gained*

knowledge and skills that will help them in the future.”

“This celebration event is one of the most important in the Trust’s calendar and continues to grow every year. We really want to thank everyone involved and who have played a key part in the Awards ceremony.”

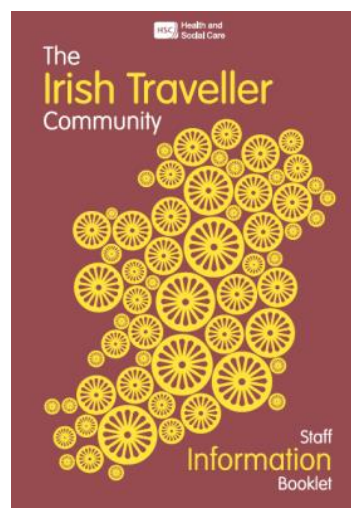
Promoting Inclusivity in the Workplace

1.12 Irish Traveller Information Booklet

The Irish Traveller staff Information booklet was co-produced with input from Health and Social Care staff with experience of working alongside the Traveller Community. The Trust wishes to thank all those who provided their valuable input in finalising this staff information booklet.

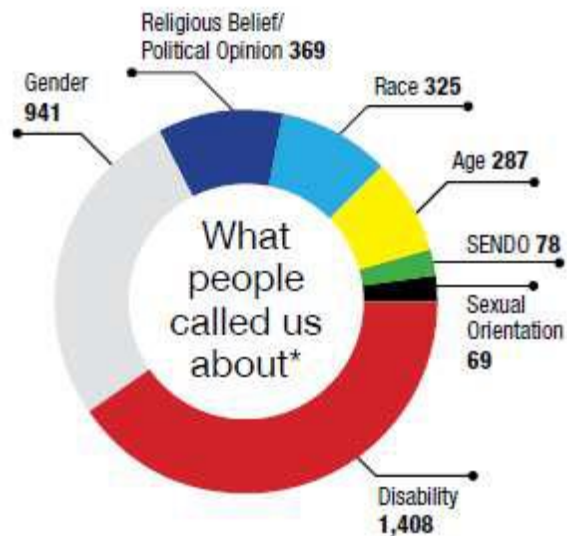
The booklet provides an insight to the Irish Traveller community, way of life - culture and identity, Traveller health, factors Influencing Traveller health, loss and bereavement along with practical advice for staff. A list of useful contacts and established Traveller Networks are also included.

The Southern Trust led on the production of this booklet - click [here](#) to view. The resource is being used as a reference guide across the region.



1.13 Disability Tool Kit

Disability discrimination remains the most reported form of discrimination to the Equality Commission. The Commission saw the highest number of enquiries to its discrimination advice line in five years – 3,454 in total. Of these, 43% were enquires about disability discrimination, by far the largest category.



* Figures include complaints of more than one type of discrimination

A small regional working group worked steadfastly, during the year under review, to produce a number of practical resources to further promote the effective application of the Disability Discrimination Act in the workplace. The Tool Kit aims to promote greater understanding and staff awareness of the Disability Duties.

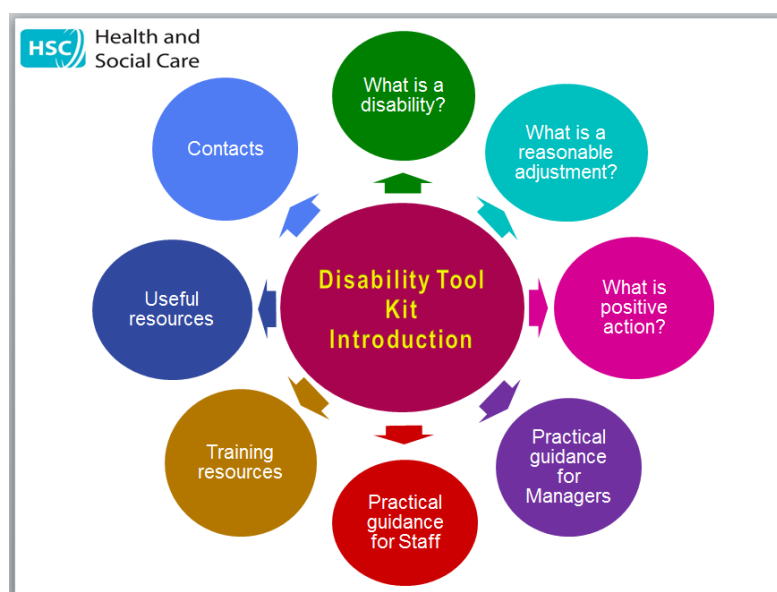
These draft resources draw upon the Equality Commission for NI's Disability Code of Practice – 'Disability and Occupation', case law, best practice together with practical working experience.

In addition to the interactive Tool Kit for staff and managers other resources developed include:

- Regional Disability Equality Policy
- Regional Staff Disability Etiquette Booklet
- Regional Staff information leaflet 'Should I disclose to my Employer that I have a Disability'.

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 DDA 1995.

Disability Tool Kit



The resources were informed with input from the Disability Sector, managers and staff across HSC as well as Equality Leads.

1.14 Belfast Pride Saturday 3 August 2019 – Promoting Inclusive Workplaces - ‘RightsNow’ was the theme this year for Belfast Pride



Belfast Pride festival is one of the biggest festivals in Belfast in a celebration of the LGBT+ community. Every year it has grown from strength to strength. Over 100 events were scheduled over two weeks which included music, comedy, debate, drama, art, health and wellbeing. The parade is the biggest cross community parade in the city, the main event in the LGBT+ calendar and one of the key events in the Belfast Pride festival. It is a protest and a celebration, a call for equality, a stand for solidarity and a celebration of the lives of LGBT+ people in Belfast and is about LGBT+ messages and expressing support for LGBT+ people.

As in previous years, the HSC LGBT Staff Forum took part in the Belfast and Newry Pride parades. The Pride parade offers an opportunity for staff to stand alongside LGBT colleagues to continue to promote an inclusive society. As in previous years the Trust showed its support with promotional stands providing advice and information.

The festival was an opportunity to promote visibility and equality for all.

For more information on the HSC LGBT Staff Forum go to

www.lgbtstaff.hscni.net

https://twitter.com/LGBT_StaffForum

The HSC LGBT Staff Forum was established in September 2011 following representation from Trade Unions about increasing support for the health and wellbeing of LGBT staff in health and social care and with the aim of encouraging more open, inclusive and diverse workplaces.

The Forum is open to any member of staff working within a HSC Trust or regional HSC organisation, including agency staff and interns. It is also open to full time students who are on placement in HSC environments. It is facilitated by the Public Health Agency on behalf of the wider health and social care service. In 2014 a website was developed, to enable information sharing, promote good practice and to reduce the isolation of LGBT staff.

David Sterling tweeted on taking up post as head of the NI Civil Service: *Delighted that #myfirstTweet as Head of the NI Civil Service is from @BelfastPride.* As an employer to 23,000 people, the NICS respects and values diversity and is committed to delivering an inclusive workplace for all our people.

1.15 Gender Identity and Expression Policy

To support the implementation of the Gender Identity and Expression Employment Policy, a regional task and finish group was established with membership drawn from HR, Equality, Pensions and Payroll from across the HSC with the aim of producing a series of practical 'checklists' for HR staff, managers and individual employees.

Across the region HR departments were asked to identify a named contact for gender identity issues and to set up a dedicated email address with access restricted to this contact. Sarah Moore, HR Employee Relations Department has been identified as the named HR contact for Southern Trust staff to seek advice and information.

To aid with the effective application of this new policy the Task and Finish Group brought the following supplementary guidance to fruition during the current reporting period 2018/19:

- [Gender Identity HR staff Guidance](#)
- [Gender Identity Individual Guidance](#)
- [Gender Identity Line Manager Guidance](#)
- [Gender Identity Recruitment and Selection Guidance](#)

The Task and Finish Group will continue to review the outworking of the Policy and Guidance drawing on operational experience.

Promoting Good Relations in the Workplace

1.16 Good and Harmonious Working Environment

The Trust is committed to promoting a good and harmonious working environment for all staff free from discrimination, intimidation, bullying and harassment. This commitment is reflected in the Trust's Equality, Diversity and Inclusion Policy and Management and Trade Union Joint Declaration of Protection.

During the year under review a position paper was tabled at the HR Directors' Forum (i.e. September 2018) and received the full endorsement of all HR Directors across the HSC sector permitting the display of all 3 poppies (i.e. the red, white and shamrock poppy) in the workplace when worn with decorum, respect and at the appropriate time.

A copy of the paper is available on SharePoint – Human Resources - Equality Section.

1.17 Regional Policy for Dealing with Conflict, Bullying and Harassment in the Workplace

This regional policy was adopted by the Trust during the current reporting period. The draft policy was subjected to widespread consultation and has been endorsed by both management and Trade Unions.

This new regional policy replaces the former Working Well Together Policy and Harassment at Work Procedure. At the time of completing this year's annual progress report a plan was being drawn up to ensure the effective communication of the policy across the Trust. In keeping with the commitments in the Trust's Equality Scheme this regional policy was subjected to equality screening.

Promoting Gender Equality

1.18 Work Life Balance (WLB) – Uptake – Creating an Equal Playing Field

It still remains a fact that the responsibilities for caring for children have a greater impact on the lives and employment prospects of women than on men. Even when women have found work, family circumstances can still place limitations on women's prospects when they are in employment. A number of cases supported by the Equality Commission for NI have involved women whose employers have not been prepared to agree more flexible working arrangements.

Michael Wardlow, Chief Commissioner, ECNI

With an 86% female workforce the Trust continues to promote a wide range of WLB options to enable employees to reconcile their work life balance

commitments. During 2018-19 there were 1,003 WLB applications received with an 88.8% approval rate - Term Time working proving the most popular. Managing WLB requests fairly is a key theme incorporated into the new eLearning programme for managers 'Making a Difference'.

Our family friendly practices and innovative approach to supporting our employees has been recognised by the Equality Commission for NI – in the Advancing Diversity NI Women in Business Awards.

The HSC Workforce Strategy 2026 has committed to developing a regional Work Life Balance suite of policies drawing upon best practice across the region. The Trust currently offers a wide range of schemes to employees (which extend beyond the statutory minimum) and looks forward to working alongside other HSC organisations in sharing and extending best practice.

1.19 Changes to Child Care Voucher Scheme

From April 2017 the Government began their roll out of the Tax Free Child Care Scheme which sees child care costs being subsidised by up to £2,000 per year for each child. The Tax Free Child Care Scheme will eventually replace the current Child Care Voucher Scheme. There are approximately 375 applications per month from Trust staff to avail of the child care voucher scheme.

Child Care Voucher (CCV) Scheme - 01.04.18 - 31.03.19		
Month	New Participants to CCV	Total No of staff who received CCV
Apr-18	8	363
May-18	12	370
Jun-18	13	371
Jul-18	11	362
Aug-18	14	358
Sep-18	33	388
Oct-18	4	383
Nov-18	1	374
Dec-18	0	366
Jan-19	3	370
Feb-19	6	364
Mar-19	2	359

1.20 Supporting our staff who care for Dependents

There are likely to be around 220,000 people in Northern Ireland with some form of caring role. The majority of carers lie within the 35–64 age band, with one third (33%) aged 35–49, and a further (31%) aged 50–64. There are also a significant number of young carers (those aged under 18).

Carers in NI Census 2011

With the extension of the working age many of our staff care for aging parents and relatives in addition to younger children. Carers themselves are getting older as evidenced in the aging demographic.

Throughout November 2018 and in various locations - the Trust ran a series of one hour sessions for staff who are carers.

The sessions were aimed at staff who are unsure if they are a carer, staff who care regularly or staff who intend to provide a substantial amount of care for a friend or relation who is in need of help because they are ill, frail, or have a disability. Staff were encouraged to come along, to find out more and to pick up some free resources.

By attending the sessions staff were better informed about what support is available to them as carers. The talks were facilitated by the Trust's Carers Coordinator.

Promoting the Health and Wellbeing of Staff

1.21 Launch of Staff Health and Wellbeing Strategy and Website

The Trust's Staff Health and Wellbeing Strategy and U-Matter website www.u-matter.org.uk was launched on 23 April 2018 in Dromantine. Shane Devlin, the Trust's Chief Executive opened the event. He spoke about the importance of staff health and wellbeing and gave his commitment on behalf of the Trust's Senior Management Team and Trust Board to supporting the implementation of the strategy recognising the importance of senior managers as good role models.



Members of the Workplace Health and Wellbeing Steering Group

1.22 Trust signs up to Mental Charter and Every Customer Counts Charters – 31 January 2019



All six Health and Social Care Trusts including the NI Ambulance Service signed up to the Mental Health Charter on 31 January 2019. Pictured above and centre, along with Trust staff, is Evelyn Collins, Chief Executive of the Equality Commission for NI. Pictured below are representatives from all 6 HSC Trusts who attended the signing along with Evelyn Collins.



The Charter is modelled on the knowledge that everyone in the workplace has a responsibility to create an environment that promotes wellbeing and to look after their mental health. The Charter is framed around the following 5 key commitments:

1. To create an open and inclusive workplace culture which displays respect for those with mental ill health
2. To promote equality of opportunity and challenge discrimination in the workplace
3. To promote equality of opportunity in recruitment and selection for those with mental ill health
4. To identify and provide sources of information and support regarding mental ill health
5. To adopt Every Customer Counts recommendations – working toward taking positive steps to make services accessible to people with mental

ill health

HSC Trusts in signing up to the Charters, have made a voluntary commitment to work to improve the working lives of any of their employees who are experiencing mental ill health and to consider what steps they can take to help people with a disability access their services more easily.

Speaking at the event, Dr Evelyn Collins CBE said: *“It is most encouraging that all six Trusts have committed themselves to the principles and objectives of both these charters which can make a real difference to the lives of people facing difficulties. We welcome their commitment and hope it will encourage other organisations across the public sector to follow suit.”*

“By signing up to the Mental Health Charter the Trusts are showing their commitment to helping employees who may be going through a difficult time. Mental ill health can take many forms and its impact can be devastating – particularly if a person feels that their problems are not treated seriously or sensitively. It is good that large public employers are subscribing to this initiative. It takes strong leadership in any organisation to create an open workplace culture in which these issues can be openly discussed and where prompt and effective support is available for staff who need it.”

“Every Customer Counts prompts organisations to think about how they offer their services – and to do so from the perspective of someone with a disability. It can help them to identify changes that are needed – some may involve commitments of time and resources while others can be quite simple adjustments or changes which can be implemented quickly. Ultimately, the key issue is that the changes should enable people with a disability to access their services more easily and benefit more from them” Dr Collins concluded.

Barney McNeaney, Director of Mental Health and Disability Services, Southern HSC Trust said: *“By signing up to the Mental Health Charter and Every Customer Counts HSC Trusts are making a public statement to further the commitments in both Charters. We will use today’s launch and signing as a further impetus and a catalyst to continue with the excellent examples of work currently underway across our organisations and to seize opportunities to do more.*

As HSC Trusts we are actively seeking to promote healthy workplaces for all our employees through our Health and Wellbeing Strategies and to foster a culture where all staff feel valued, supported and listened to. It is our duty to ensure that all of our services and facilities are accessible, responsive and inclusive for all people who have a disability so that they can fully avail of them” Barney concluded.

1.23 Financial Wellbeing Workshops for Staff

One of the examples cited at the launch of the Mental Health Charter by way of exemplary practice was the provision of financial wellbeing workshops for staff. As a result of an online survey to discern what issues were important to staff

these workshops are now being rolled out across the Trust.

Difficulties with finances can have an adverse impact on staffs' mental wellbeing brought on by stress and anxieties.

1.24 HSC Staff Health and Wellbeing Charter

During the year under review, the Trust also signed off on a broader HSC Staff Health and Wellbeing Charter – the content of which is pictured below:

MAKING LIFE BETTER at work

Staff Health and Wellbeing Charter

Staff are the most valuable asset of any organisation and there is a strong association between wellbeing, resilience and engagement with staff and service users, each of which impacts on organisational performance. Cultivating a workforce that is healthy and well is central to enabling Health and Social Care and Northern Ireland Fire and Rescue Service staff to deliver high quality public services. In order to promote a culture of care for patients, carers and the public we must create a culture of care, health and wellbeing for all our staff.

Supporting healthier workplaces is a key component in the delivery of the draft Programme for Government and in Making Life Better, the strategic framework for public health in Northern Ireland. In Health and Wellbeing 2026: Delivering Together, the former Health Minister outlined the opportunity for HSC to become exemplars of good practice in supporting staff health and wellbeing. The Health and Social Care Workforce Strategy 2026, Delivering for Our People, aspires that by 2021, HSC will be a fulfilling and rewarding place to work, and that our staff will feel valued and supported. In addition the HSC Collective Leadership Strategy 2017 promotes the need for development of a culture of collective leadership, which enables staff to flourish and take pride and joy in their work.

This Charter has been developed in consultation with representatives from Health and Social Care and Northern Ireland Fire and Rescue Services organisations across Northern Ireland. The Charter sets out best practice commitments relating to the workplace culture, leadership, communication and services that all influence the health and wellbeing of staff, and therefore the health of the

This Workplace Health and Wellbeing Charter is a statement of intent, showing the commitment of HSC and NIFRS organisations to protecting and improving the health and wellbeing of their employees.

Name of Organisation

_____ we commit to:

1. Demonstrate senior leadership in creating a supportive workplace culture, environments, policies and practices that protect, promote and improve the health and wellbeing of all staff;
2. Engage with managers and staff across the organisation to build collective leadership for developing and implementing a Health and Wellbeing Strategy for the organisation;
3. Work in partnership with staff and Trade Union representatives to develop, deliver and monitor an annual action plan of activities and opportunities for staff to improve their health and wellbeing;
4. Provide Occupational Health and Wellbeing services and workplace practices that help staff remain resilient, healthy and well;
5. Positively support staff living and working with health conditions, injury, disability or neurodiversity* as appropriate to remain in work;
6. Provide policies and practices that value all staff and adequately support the needs of our ageing workforce.

* Neurodiversity includes those with Dyslexia, Dyspraxia, ADHD, Autistic Spectrum and others.

Signature Chief Executive

Director Human Resources

1.25 The Menopause: An Awareness Guide

*The average age of onset of **menopausal** transition is 47.5 years. The menopause is not necessarily a stressful time but it normally occurs during midlife when one may be dealing with other life challenges, such as parents' ill-health or bereavement, adolescent children, children leaving home (or not leaving home), and work demands.*

Women's Health.gov

When drafting HSC Trusts regional Equality Action Plans Trade Union colleagues echoed management's call for more information and support for staff around the menopause. Paul Oakes, Manager of the Advisory Services Team, Equality Commission for

NI writing on the subject of the menopause said: *“Many equality issues in the workplace come quickly to the Commission’s attention because people affected by them contact us with complaints. Sometimes, however, it is the other way round. Even though it is not a common cause of complaint to the Commission, the second most discussed issue by employers at the Commission’s seminars last year was the impact of the menopause as an equality issue in the workplace. Issues arising from the menopause can sometimes have an effect on women’s ability to do their job effectively – and employers’ reaction to this can cause problems.*

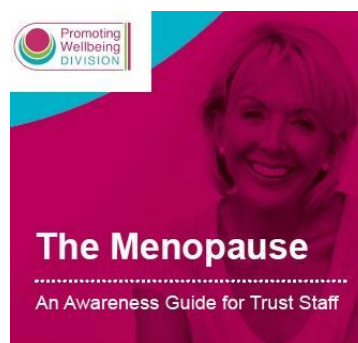
Paul continued: *Employers also need to bear in mind that there may be legal implications if employers do not engage effectively with any of their employees affected by menopause.*

In a more recent case, Davies -v- Scottish Courts & Tribunal Service in May 2018, an employee’s menopausal symptoms were deemed to be a disability for the purposes of the Disability Discrimination Act. So, when dealing with employees who have menopausal symptoms, employers should consider whether the employee is disabled as a result of those symptoms. And, if they conclude that they are, then they should consider what reasonable adjustments they might be able to make for them.

Employers should recognise that menopause can be a very significant issue for many women and may impact on their ability to work effectively. They also need to acknowledge that this may have legal implications for them as employers.

An important step would be to ensure that menopause is considered as part of the employer’s wider occupation health awareness campaign and strategy – to make sure that those affected by menopause feel comfortable in raising it as a workplace equality issue”, Paul concluded.

During the year under review two new Menopause Information Leaflets and a Menopause Information Tool Kit were developed by the Trust as part of its drive to improve staff health and wellbeing and to further promote equality in the workplace.



Age Profile of Trust’s Female Workforce - 86.6% of Total Workforce

Age Band	Number of Females	Percentage
18-39	4874	44.2
40-59	5105	46.2
60+	1059	9.6
	11038	100

1.26 Breast Cancer Family History

Women in the Southern Trust area with a family history of breast cancer, which includes staff as service users, can now benefit from a lifestyle programme to help them reduce the risks of developing the disease. Family history is one of a number of factors which can increase one's chances of developing breast cancer.

The Southern Trust is the only one in Northern Ireland to offer the health and wellbeing programme for women with a family history in addition to an annual state-of-the-art 3D digital mammogram.



The programme takes place in a workshop format, where women come together, meet staff and pick up tips on how they can help to reduce their risks through improving a range of lifestyle factors like diet, exercise and alcohol consumption.

Feedback from participants who have attended the workshops has been very positive with one woman commenting: *“A great incentive to stay healthy with a group of like-minded people.”*

1.27 Tackle Poverty Together – International Women’s Day

To celebrate International Women’s Day 2019 the Trust’s Sexual Health Promotion Team launched a campaign to tackle period poverty. Together with the Trust’s Sexual Health Team, the Southern Regional College, South West College, Dungannon and Futureproof Inc Ltd provided access to free sanitary products across the Southern Trust helping end period poverty together.



1.28 Men's Health Week - TAKE 5 Photo Competition

The Trust through its Staff Health and Wellbeing Steering Group ran a Photo Competition for male staff as part of men’s health week 11th-17th June 2018. The starting point for this year’s conversation was about improving the health of males. Males were asked to answer the question: *‘What’s your small step going to be?’* If the answer was *‘I don’t know’*, as part of celebrating men’s health week, men were encouraged to think about doing something that would make a positive difference to their overall health as well as the health of the men they have contact and influence with.

National and Regional Recognition – Best Practice Awards

1.29 ELD Team Shortlisted for Two Regional Awards

During the year under review, the Trust's HR - Education, Learning & Development team were shortlisted for awards in two categories at the regional Healthcare People Management Association (HPMA) NI Awards Ceremony which took place at the Hilton Hotel, Templepatrick on 22 March 2018:

The new online, interactive **Corporate Welcome** for all new staff to the Southern Trust was shortlisted for the **Award for Innovation in HR**. This award recognises outstanding, cutting edge, creative initiatives which have demonstrated improved practice. The new online, interactive Welcome includes a video podcast setting out the Trust's commitment to Equality of Opportunity and a Good and Harmonious Working Environment for All staff regardless of difference. It sets out the business case for promoting diversity in the workplace and encourages staff to reflect on their own values and behaviours to ensure they are in keeping with the principles laid down in the Trust's Equality, Diversity and Inclusion Policy. [Head of Equality Podcast](#)

Louise Rainey (Learning & Development Administrator) was shortlisted for the NI HPMA **Rising Star Award** which recognises HR staff who are shining examples within the profession by demonstrating their initiative, enthusiasm, commitment and leadership.



Pictured at the HPMA NI Awards are: (left to right) Louise Rainey, Vivienne Toal (Director of HROD) and Jillian Spence (HR Manager, OD)

1.30 National Recognition for Trust Learning Disability Service

The Trust scooped four top prizes at the National Learning Disabilities & Autism Awards.

The Awards celebrate excellence in the support for people with learning disabilities and aims to pay tribute to those who excel in providing quality care. There were a total of 16 categories available for an award.

This is the first year the awards have been organised in Northern Ireland. Congratulating Southern Trust winners; Acting Director of Mental Health and Disability Services, Carmel Harney said:

“It is such an outstanding achievement and a true reflection of our Learning Disability Services that so many Southern Trust staff have been acknowledged at the first ever National Learning Disabilities & Autism Awards. We have a dedicated and highly compassionate team who do extraordinary work in partnership with our service users to support them to live as independently as they can to reach their full potential. I sincerely congratulate all of the award winners and indeed all of our learning disability staff for receiving such well-deserved recognition.”

Pictured right with their awards are: Jennifer Stone, Support Worker at Shanlieve, Kilkeel, Denis Maguire, Southern Trust Forensic Learning Disability Services, Marita Higgins, Learning Disability Nurse in Windsor Day Centre, Newry, Joanne Kelly, Support Worker picking up the Award for the Trust Day Opportunities Team.



1.31 ‘Making a Difference’ eLearning modules and training manual for staff

Deployment Plan ‘Making A Difference’ eLearning Modules

As previously reported, the launch of the ‘Making a Difference’ regional eLearning training modules for staff took place on 6 November 2017. A Deployment Plan has since been drawn up and endorsed by SMT. The Plan is actively being rolled out across the Trust.

This training is now mandatory for all staff and has been added to the mandatory training matrix so that Line Managers can actively follow this up with their staff in terms of uptake and compliance.

Regular progress reports are generated by the Trust’s Equality Assurance Unit to facilitate effective targeting and to encourage completion.

NIMDTA (Northern Ireland Medical and Dental Training Agency) confirmed that they were very impressed with the ‘Making a Difference’ modules and will recognise them as a suitable equivalent for Equality and Diversity for doctors GMC Trainer Recognition status.

1.32 EU Exit – Day 1 – Trust Delivery Planning

The Permanent Secretary for Health wrote to CEs seeking nominations from all HSC Arms-Length Bodies to participate in a regional work stream to ascertain the impact on the HSC family of organisations as a consequence of the UK's planned exit from the EU on 29 March 2019.

The DoH and its Arms-Length Bodies (ALBs) were required to develop Business Continuity Plans by 30 June 2018 to ensure business as usual following Day 1 EU Exit and in the longer term whilst ensuring no/minimal disruption to services.

All ALBs were tasked with actively scoping the potential impact on their functions against a 'no deal' scenario. (A 'no deal' scenario meaning no formal agreement being reached during the negotiations between the UK and EU). The Trust's CE submitted a statement of assurance on 4 July 2018 confirming that the Trust had actively scoped the impact of a 'No Deal' scenario and highlighted any issues over and above those already identified by the DoH.

From December 2018 contingency planning arrangements were stepped up in earnest, by the DoH, for a 'No Deal' Brexit. ALBs were also directed to align their Brexit Delivery Planning activity with normal business continuity arrangements.

Risks to the delivery of health were highlighted in a number of areas:

- Workforce
- Medication
- Supplies of goods & services
- Cross border emergency preparedness.

Two strands of activity were identified in terms of Brexit preparedness:

- **Preventative** - things we can do now and should be doing now – completion by Mid-February 2019
- **Mitigation** - mid February onwards, EU Exit 29 March and beyond.

Various work streams were established within the Health sector to plan for and mitigate the impact of a 'No Deal' EU Exit.

A comprehensive presentation was delivered to the Trust Board on 24 January 2019 to provide assurances that the Trust has been and will continue to work with the Department for Health and all other HSC ALBS to ensure no/minimal disruption to services.

Parallel emergency planning arrangements were also put in place with the Head of the NI Civil Service as the senior responsible officer. ALBs were called to participate in testing arrangements in the run up to EU Exit and beyond.

A further presentation was delivered to the Trust Board on 28 March 2019. The

overriding message was one of reassurance to both staff and patients, see extract below Global email 13 March 2019 refers:

As 29 March approaches the Trust would like to provide an assurance to all our staff in relation to our continuity planning ahead of the EU Exit process. Over the last 12 months, work has been ongoing, both regionally and locally, to make preparations in advance of 29 March 2019 - UK EU Exit. We do not therefore anticipate any immediate impact on day-to-day provision of HSC services. The safety of people receiving health and social care remains our top priority.

Correspondence dated 16 April 2019 from the Permanent Secretary and HSC Chief Executive sent to all ALB Chief Executives acknowledged that the UK Government had been granted a further extension of Article 50 to 31 October 2019. Further, it was acknowledged ... *If the Withdrawal Agreement is ratified by both sides before 31 October 2019, the UK will leave the EU earlier and in that case it would leave with a deal.*

As a consequence the Department indicated to all ALBS that it would **not** be enacting the 'no deal' contingency plans, currently in place. ALBs were asked to make the necessary changes to their respective plans as a consequence.

Further, the Permanent Secretary and HSC CE acknowledged that "*the excellent work already undertaken had not been wasted and asked that his personal thanks be extended to everyone who have worked so hard, and with such commitment and energy to ensure preparedness*".

Over the ensuing weeks and alongside colleagues in the UK the DoH will be considering the EU Exit work programme and re-planning for the revised October date. Until a deal is agreed and ratified there remains a risk of a no deal exit. As such the DoH will carefully review how best to prepare for this scenario and in so doing will of course continue to work closely with colleagues across the HSC system. The DoH have given a commitment to share further guidance at the earliest opportunity.

NB: Whilst the UK remains in the EU it will continue to have the rights and obligations of a Member State.

1.33 EU Settlement Scheme – HSC Pilot

EU citizens make a huge contribution to the health and social care sector. As part of the Home Office EU Settlement Scheme EU citizens are being encouraged by the Government to remain after the UK leaves the EU. To do so they will need to apply to the EU Settlement Scheme.

In advance of the UK's planned exit from the EU on 29 March 2019, the UK government has committed to protect the rights of EU citizens and their family members currently living in the UK. This includes the right to live here, work here and access public services such as healthcare and benefits. To retain

these rights after 31 December 2020, EU citizens must apply for UK

immigration status under the EU Settlement Scheme.

HSC Trusts took part in the pilot phase of the EU Settlement Scheme, the purpose of which was to test the on-line application process before full deployment of the Scheme on 30 March 2019.

In the interest of staff retention and attraction HSC Trusts agreed to pay the £65 registration fee for eligible applicants to the scheme during the pilot phase. The then Prime Minister subsequently announced (on 21 January 2019) that there will be **no fee** charged for registration on this scheme when the scheme is fully deployed.

At the time of completing this year's annual progress report a global email was issued to all staff along with a desk top display (on personal computers) highlighting the 'Go Live' date of the EU Settlement Scheme which opened for applications on 30 March 2019. In addition, information was targeted toward staff groups who are eligible to apply and in collaboration with TU colleagues e.g. Medical staff (inc Locums), Nursing staff, Support Services staff.

Information was also shared with local BME Groups and the NIHSC Interpreting Service to further highlight and promote awareness of the scheme.

All eligible employers will be able to register up until **31st Dec 2020** to have their rights protected. Further, HSC Trusts were asked to identify vulnerable individuals within the Health Care System e.g. Looked after Children, adults with learning disability from EU countries et al who may need further assistance with the registration process.

CITIZENS STAY INFORMED

If you are an EU citizen, you and your family members will be able to
to
apply to the **EU Settlement Scheme** to continue living in the UK
after

31st December 2020.



The EU Settlement Scheme fully opened on **30 March 2019**. You will be able to apply until **31st Dec 2020** and your rights will remain unchanged until then.

Go to gov.uk/eu-settled-status for more information.

1.34 CAWT - Brexit

CAWT (Co-operation and Working Together) also provided input to Brexit planning and debates from a variety of sources including political parties, government departments, academic institutions and government inquiries. For example, in January, CAWT, at the request of the House of Lords EU Home Affairs Sub-Committee, provided both oral and written evidence to inform the 'Inquiry into Brexit and Reciprocal Healthcare.' CAWT experience of practical cross border healthcare has informed the debate in relation to the potential impacts of Brexit on health and social care.

Examples of Key Service Developments during the year under review:

1.35 Transformation Programme

In October 2016, a 10 year approach to transforming health and social care was launched, "Health and Wellbeing 2026: Delivering Together". This ambitious plan was the response to the report produced by an Expert Panel led by Professor Bengoa tasked with considering the best configuration of Health and Social Care Services in Northern Ireland. A programme of work is underway to deliver the ambition set out in 'Delivering Together'. This work places a strong emphasis on ensuring the user's voice is heard, as they play a key role in developing and implementing new services and care pathways.

Two key groups are in place to provide strategic oversight to this work – the Transformation Advisory Board and the Transformation Implementation Group:

- The **Transformation Advisory Board (TAB)** acts in an advisory capacity to oversee the direction of reform. Members of the Board have been drawn from the field of independent experts, unions and user representatives.
- The **Transformation Implementation Group** ([TIG Terms of Reference](#)) leads the design, development and implementation of the Transformation Programme. The Transformation Implementation Group is chaired by the Department of Health Permanent Secretary, and includes leaders and clinicians from across the Department and the Health and Social Care system. Transformation of health and social care services is a long term goal. Delivering Together provides the HSC with a clear roadmap to take forward the work of transformation.

"Establishing regional centres of excellence is a central pillar of our transformation programme for health and social care".

Department of Health Permanent Secretary Richard Pengelly

Examples of reviews currently underway during the current reporting period include: Reshaping Stroke Care, Breast Assessment Services and later in 2019 a health summit is planned on a review of the future shape of urgent and emergency care in NI. Urgent and emergency care includes care provided at hospital Emergency Departments (previously called Casualty or A&E) as well as

GP Out-of-hours services and Minor Injury Units. See **Arrangements for consulting** question 11 of this report for further information.

Section 75 Equality Duties

In keeping with the Section 75 Equality Duties all HSC organisations are required to ensure they discharge their S75 Equality Duties in informing this programme of work.

Rural Needs Assessment

Public authorities are also required to have due regard to the social and economic needs of people living in rural areas when carrying out their activities and to provide a mechanism for ensuring greater transparency in relation to the needs of rural communities. Likewise rural assessments should inform the out working of the transformation programme.

Annual Monitoring Return 2018/19

A request was received from Department of Agriculture and Rural Affairs (DAERA) on 9 April 2019 for the submission of the Trust's first Annual Monitoring Return under the Rural Needs Act (Northern Ireland) 2016 for the 2018/19 monitoring period.

Under section 3(1) of the Act, a public authority must, in such a manner as may be directed by DAERA:

- Compile information on the exercise of its function under section 1 of the Act;
- Include that information in the public authority's own annual report;
- Send a copy of that information to DAERA.

NB: Section 1(1) of the Act places a statutory duty on a public authority to have due regard to rural needs when:

- Developing a policy, strategy or plan;
- Adopting a policy, strategy or plan;
- Implementing a policy, strategy or plan;
- Revising a policy, strategy or plan;
- Designing a public service and
- Delivery a public service.

The first monitoring return was due for submission by **14 September 2019** and was compiled by the Trust's Performance and Reform Directorate.

1.36 Care Home Transformation Proposals

The Southern Trust and the Public Health Agency are working with local care homes to help *improve the experience of people* living in care homes.

Local care home managers have participated in a workshop hosted by the Trust in order to share best practice in enhancing the quality and safety of care for

residents.

The Department of Health has identified [Transformation Funding](#) to help improve the quality, safety and experience of people living in care homes across Northern Ireland.

A number of proposals are being developed to support care homes and Trusts in the provision of care for residents including; education and training, recruitment and retention of staff, reducing unnecessary hospital admissions for residents and enhancing care home support teams.

Director of Older People and Primary Care for the Southern Health and Social Care Trust, Melanie McClements explains: *“We aim to support as many people as possible to live independently, for as long as possible in their own homes. However we do recognise that as people live longer with more complex needs, there is a need for high quality nursing and residential home places to provide extra support for those people with the most complex needs.*



“Our local care homes provide excellent care to some of our most vulnerable people and we are delighted to work together with them to help address the challenges we face and improve the overall quality of life for our care home population into the future.”

1.37 Department of Health Investment to Sustain Daisy Hill Hospital

A ROADMAP for the future of Daisy Hill Hospital’s Emergency Department is now a reality - thanks to a meaningful partnership between the local community, workforce and the health and social care system. The Department of Health confirmed details of an investment package as part of a long term plan to sustain and bolster urgent and emergency care at the Newry hospital.

Last year, the Southern Trust highlighted difficulties in maintaining a safe and sustainable Emergency Department service at Daisy Hill, due to difficulties in staffing a viable consultant rota. This led to the establishment of the Daisy Hill Hospital Pathfinder Group as a mechanism for engagement with the local workforce and community to develop a viable response to the situation. The Pathfinder Group’s work has led to the investment package confirmed by the DoH. The Trust complied with its S75 Equality duties in the outworking of this project in that the project was subjected to equality screening and public consultation. The views of a wide range of stakeholders were taken into account in relation to the decision making process.

1.38 Major Works at Daisy Hill Hospital

The new Direct Assessment Unit at Daisy Hill Hospital opened on Monday 4

February 2019.

Located in the former General Outpatients Department in the main building, the Direct Assessment Unit was one of the proposals agreed through the Daisy Hill Pathfinder Project to help sustain and develop unscheduled care services for the population of Newry and Mourne.

Services in the new Unit began in a phased way, initially with the Day Clinical Centre, the Older People's Assessment Unit and the Clinical Decision Unit. In March 2019 the Ambulatory team commenced taking referrals for suitable patients directly from GPs and the NI Ambulance Service.

The Department of Health's Chief Medical Officer Dr Michael McBride and Deputy Secretary Jackie Johnston visited Daisy Hill Hospital before Christmas to see progress on the new Direct Assessment Unit and hear how the Trust's Pathfinder Implementation plans were progressing.



Promoting a Human Rights Based Approach to Health and Social Care

1.39 New Bereavement Suite for Babies – Daisy Hill Hospital

Staff working in the Trust's gynecology, early pregnancy clinics, maternity and neonatal services are very aware of the intense emotions and distress of parents and families who grieve for the loss of a baby in any circumstance. Every effort is made by staff to make the experience as supported as possible. As well as providing clinical care and emotional support, staff in these areas also work hard to ensure that parents have the **privacy** they need at such a difficult time to mourn their loss. To that end a new bereavement suite was opened within the maternity unit at Daisy Hill Hospital, the 'Willow Suite'. Another suite is also being created in Craigavon Area Hospital. Such developments further the Trust's obligations in terms of promoting a human rights based approach to health and social care provision.

1.40 Makeover for Intensive Care Family Room, Craigavon Area Hospital

The Family Room at Craigavon Hospital's Intensive Care Unit has undergone a

major makeover thanks to a local family. The new look Family Room now includes bespoke recliner chairs, a sofa bed, tea and coffee making facilities and a fridge. It also has a shower room next door which can be used by relatives.



The Intensive Care Unit treats the most acutely ill patients from across the whole Southern Trust area and understandably relatives want to stay here as much as they can during this time.

The new room offers a little haven for families to take some time out while still **being close to their loved one.**

Furnishings and accessories were chosen to create a beautiful home-from-home environment, which will hopefully bring some comfort during such difficult circumstances. Such developments further Article 8 Rights under the Human Rights Act for those in need of our services.

1.41 New Sensory Room for Daisy Hill Children's Ward

Thanks to the generosity of a local family, a new sensory room has opened in The Daisy Children and Young People's Unit. 'Harvey's Haven' was the dream of Bessbrook woman Clare McCabe, following the sad loss of her little boy Harvey. Family and friends worked tirelessly raising £23,000 to create the beautiful room, **complete with the latest in sound and light interactive equipment.**

Paying tribute to Clare and family, Dr Ahmed Khan, Associate Medical Director for Children and Young People's Services for the Southern Trust said: *"We sincerely thank the McCabe family who have gone to so much effort to help other families following their own tragic loss. Being in hospital is particularly difficult for children and young people and indeed stressful for the whole family. Harvey's Haven is a place where families can now find some peace and tranquility and which offers children some distraction during their time in hospital."*



1.42 Intellectual Disability CAMHS – New Sensory Clinical Room

The Chief Executive visited the ID (Intellectual Disability) CAMHS Team in February and was given a tour of their building which featured the new sensory clinical room and interactive projector.



1.43 Emergency Care at Craigavon Area Hospital

A £1million project is underway at Craigavon Area Hospital to enhance emergency care and help reduce overnight stays in the hospital.

The new Ambulatory Emergency Care Unit will provide **easy access** to diagnostic tests for some conditions (and review by hospital consultants) in **one place**. The aim is to provide a **better overall experience for patients**. A range of services will be accommodated in this new facility. Planning is underway for the development of respiratory access services which fall in phase one of this service development.

Anita Carroll, Acting Director of Acute Services, said: *“Traditionally patients would come to hospital, often via the Emergency Department and be admitted to a ward for further tests or investigation. However, we have done a lot of work in recent years to develop a range of alternatives to hospital admission as there is a lot of evidence that people get better faster in their own homes, in familiar surroundings. Having this new unit at the front door of the hospital and close to the Emergency Department means we can improve patient flow and our patients will receive the right care in the right place at the right time”.*

Tackling Health Inequalities

1.44 EU investment in community-based health and well-being hubs - 10,000 people to be supported to improve their health

A four year, €5.01 million EU INTERREG funded cross-border project has been launched in Co. Antrim. The CAWT Community Health Sync (CoH-Sync) Project secured the EU funding for the development of a network of Locality Health and Well-being Hubs in the border region of the Republic of Ireland, Northern Ireland and SW Scotland. **These community-based and locally run**

Hubs will support individuals and groups to become more active in improving their own health and well-being by making better use of existing resources and facilities in their local areas.

The EU funding allocation has been secured by the Co-operation and Working Together (CAWT) Health and Social Care Partnership. This Partnership comprises the HSE, the Southern Health and Social Care Trust, the Western Health and Social Care Trust, the Public Health Agency and the Health and Social Care Board. NHS Dumfries and Galloway is also a CoH-Sync project partner.

The CoH-Sync Project will encourage people living in disadvantaged areas and in more rural outlying areas to sign up to a health and well-being plan and receive support from a health facilitator. The CoH-Sync project will focus on helping people to improve their health in the risk factor areas of physical activity, nutrition, smoking, alcohol consumption and mental health resilience. Such risk factors are known to be associated with the development of long term conditions or chronic illnesses such as heart disease, stroke, cancer, type 2 diabetes, obesity, and arthritis for example.

There are a total of 8 Hubs: 3 in the Rep of Ireland, 3 in Northern Ireland and 2 in Scotland. The Hub locations are Letterkenny/North Donegal; Ballyshannon/South Donegal; Co. Cavan/Co. Monaghan; Derry / Strabane; Enniskillen/West Fermanagh; Armagh/Dungannon; Dumfries, Scotland and Stranraer, Scotland.

Welcoming the project Gina McIntyre, CEO of the Special EU Programmes Body said: *“This project will empower citizens, on both sides of the border, to manage their own health and social care needs. In doing so it will deliver upon some of the key outputs of the EU’s INTERREG VA Programme which is investing millions of euros in cross-border health projects that will positively transform the lives of tens of thousands of citizens and their families. I am delighted to see that the project includes early intervention health plans to help people take charge of their own physical well-being on a long-term basis.”*

Chief Medical Officer for Northern Ireland, Dr Michael McBride commented: *“This EU funded health and well-being initiative is timely as within all the three regions where the project is being implemented, there is a strong focus on helping people to stay well for longer. This project will also contribute to reducing health inequalities and will provide valuable knowledge about what works in supporting people to improve and protect their own health.”*



Pictured above at the Armagh and Dungannon CoH-Sync Hub launch are (Back row/left to right): Liam Jackson, CoH Sync Hub Lead, Connected Health; Shane Devlin, Chief Executive Officer, Southern Trust; Gerard Rocks, Assistant Director for Promoting Well-being, Southern Trust and Dougie Adams, Chief Executive Officer, Connected Health. Front row: Brigid McGinty, Project Manager, CAWT cross border health

1.45 Multiple Adverse Childhood Experience Project

The Multiple Adverse Childhood Experience (MACE) - Breaking the Cycle focuses on children within the age ranges of 0-3 years and 11-13 years. The main objectives of the project are to develop an appropriate Adverse Childhood Experience (ACE) awareness questionnaire and tools to identify children most at risk and identify appropriate targeted interventions. Five cross border community networks of excellence will be established to deliver the interventions required and training will be delivered to a broad range of groups/staff regarding the use of the tools and delivery of interventions.

- Five cross border community networks**
1. Derry / Letterkenny
 2. Strabane & Omagh / West Donegal
 3. Fermanagh / Sligo & Leitrim
 4. Portadown & Armagh / Monaghan & Cavan
 5. Banbridge & Newry / Dundalk & Drogheda

1.46 Trust launches summer scheme for children with complex healthcare needs

The Southern Trust launched a new summer scheme service (2018) for children with disabilities who have complex healthcare needs. The week-long schemes were held in the Education Authority Special Schools of Ceara (Lurgan), Rathore (Newry) and Sperrinview (Dungannon) in partnership with 'Nana G's Day-Care'.

Southern Trust Operational Manager for Short Breaks, Mark Irwin said: *“I am delighted to be a part of this unique summer scheme for children with complex healthcare needs.*

“These children are often excluded from mainstream services due to their specific needs and have limited opportunities to engage in many activities so this scheme was a way of trying to address that inequity.



“The scheme not only provides children with the opportunity to mix with their peers and make new friendships, it is stimulating, fun and gives their parents/carers a much needed break to ‘recharge their batteries’.”

Locality Head of Specialist Child Health and Disability Services for the Trust, Lesley Waugh said: *“We are delighted with the success of the summer scheme. To date we have received some great feedback which will help us when planning future programmes.”*

“I would also like to thank all of the staff involved as everyone has gone over and above their duties to make this happen and it is a

great example of collaborative working between different agencies and disciplines.”

The summer scheme is funded and coordinated by the Southern Health and Social Care Trust’s Children’s Disability Services.

1.47 Mixed Gender Accommodation

The Regional Improvement Project, which included Southern Trust representatives, undertook a thematic review in relation to Mixed Gender Accommodation from September 2018 to March 2019.

During October 2018, members of the Southern Trust Nursing Governance Team undertook a local audit to also look at Mixed Gender Accommodation. The audit reviewed the previous RQIA Audit undertaken in 2012. The same 4 wards were audited again and a report was presented to the Patient and Client Experience Steering Group in November 2018.

The findings confirmed staff commitment to upholding the separation of male and female patients. There were no patients nursed in mixed sex bays on the day of audit. The limitations of the estates within some Trust wards however necessitate males and females sharing toilet and washing facilities, signage stated either “Male/Female” or “Toilet” “Shower”.

With the exception of the stipulated exemptions all breaches of this mixed gender accommodation policy must be reported via the Trusts Incident Management System-DATIX. There have been no breaches reported (2016-2018). The 2018 audit has given an assurance that the reason there are no DATIX entries is that breaches to same sex sleeping accommodation are not happening, rather than not being reported.

The Commissioning Plan Direction for 2016/2017 stated that:

“By March 2017, all patients in adult inpatient areas should be cared for in same gender accommodation, except in cases when that would not be appropriate for reasons of clinical need (or alternatively timely access to treatment)”.

“Where patients are cared for in mixed gender accommodation, all Trusts must have policies in place to ensure that patients' privacy and dignity are protected.”

The Commissioning Plan 2016-2017 and CNO guidance transcribed below for ease of reference further states that :

“The overriding principle is that all patients in adult inpatient areas should be cared for in same gender accommodation except where it is in the overall best interests of the patient or reflects their personal choice”.

Same and mixed gender accommodation respectively is defined as follows:

- Same gender accommodation: Men and women have separate sleeping areas, toilets and washing facilities.
- Mixed gender accommodation: Men and women have to share one or more of the following: sleeping accommodation, toilets and washing facilities.

The Trust welcomes the development of a Regional Gender Accommodation Policy. In the interim the Southern Trust Policy on Mixed Sex Accommodation (2011) has been reviewed and subjected to equality screening in line with Section 75 of the Northern Ireland Act (1998) and in fulfilment of the commitments in the Trust's Equality Scheme. Locally Patient Client involvement will be crucial to co- produce optimal person-centred responses to the awaited Draft Regional Policy.

The Trust is committed to respecting the 9 equality strands when deciding upon patient placement. All patients must be treated courteously and have their dignity, modesty and privacy respected regardless of placement - in line with FREDA Human Rights values.

1.48 Southern Trust Signs Declaration for Older People

The Southern Trust and Local Adult Safeguarding Partnership (LASP) signed an International Declaration on 15 June 2018 to mark World Elder Abuse Day.

Research suggests that over 500,000 older people are abused in the UK each year. The International Network for the Prevention of Elder Abuse aims to increase society's ability to recognize and respond to the mistreatment of older people in any setting, so that the latter years of life are free from abuse, neglect or exploitation.



Melanie McClements, Acting Director of Older People and Primary Care Services, Southern Trust said: *“Abuse against older people must not be tolerated, minimised or hidden. Abuse can take many forms and is often perpetrated by someone in a position of trust. If you have*

any concerns about someone you know it is important that you share these with our staff. Working together can keep people safer in our community.”

Abuse can be physical or sexual, emotional, verbal or financial. Neglect is also a form of abuse - for example by not providing the adult with food, shelter, medication, or care. Abuse of older adults most often occurs within the family, however abusers can also include friends, neighbours, paid care providers, landlords or any individual in a position of power, trust, or authority.

1.49 Hospital at Home for Older People in Newry and Mourne

The Trust's Acute Care at Home service is now available to older people in the Newry and Mourne area. As the first Consultant Geriatrician Led service of its kind in Northern Ireland, the team aims to respond to referrals from GPs, NI Ambulance Service and local hospitals within just a few hours. The service has been expanding across the Southern Trust area since it was originally set up as a pilot in 2014, preventing around 4050 admissions and supporting earlier discharge for over 1400 people.



1.50 mPower Project

The new EU INTERREG VA funded project called mPower, being led by NHS24 in Scotland, will be rolled out across seven deployment sites within Northern Ireland, the border counties of the Republic and the west of Scotland. Within the Southern Trust area, the Newry City and South Armagh localities have been identified to operate this new service.

This project aims to support older people over 65 years of age living with long-term conditions or chronic illnesses to live well, safely and independently in their own homes. The project will support people to manage their health and access local support and community networks, with a particular focus on how to tackle loneliness and social isolation.

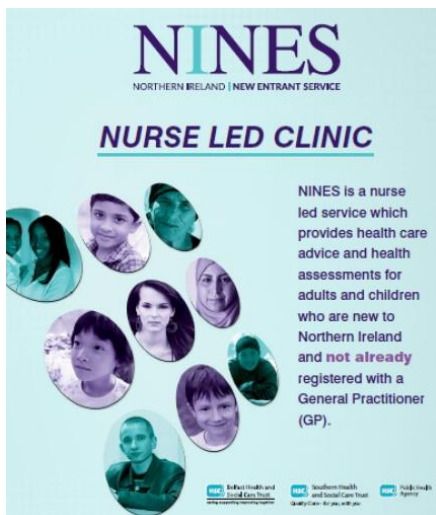


Community Navigators and Technical Implementation Leads are being recruited to support the roll out of mPower. Staff will be linked to Primary Care Practices to assist people over the age of 65 to develop well-being plans connecting them to activities within their communities as well as, where appropriate, linking people to Digital Health interventions to support improved self-management of Long Term Conditions. These will include integrated home and mobile monitoring solutions, digital health and well-being Apps and video enabled care solutions.

1.51 NI New Entrants Scheme (NINES) – Support for the Migrant Population – Promoting Access to Services

The Southern Trust’s Northern Ireland New Entrants Service (NINES) provides healthcare support to the migrant population. Aimed at helping people who enter the area from other (non UK) countries, NINES offers nurse-led health care advice and initial health assessments for adults and children not already registered with a GP.

Funded through the Southern Local Commissioning Group and developed in partnership with the Public Health Agency (PHA), NINES is the first point of contact to the health service for new migrants, asylum seekers and refugees, offering health promotion advice and information on how to register with a GP and how to access other services they may need.



The Southern area has the largest migrant population in Northern Ireland. Through NINES the Trust offers an introduction to health and social care for people new to the country, ensuring they get an initial health check and explaining how our system works. Each client gets their own personal health record and is referred onward to appropriate services that they may need.

The service continues to work closely with the NI Interpreting Services and BME groups to overcome any cultural or language barriers and has appointed a Bilingual Health Care Assistant to the team. NINES also work with the community and voluntary sectors and local employers to raise awareness and encourage new migrants to avail of the service.

Staff who come in contact with anyone from the migrant population are encouraged to raise awareness of the Trust's NI New Entrants Service. Email: nines@southerntrust.hscni.net

Please see below for an update on NINES activity report:

NINES is seeing an increasing number of referrals for health assessments for clients that require GP registration and for the first time the Trust has a waiting list for clients needing an appointment.

2017/18 198 referrals 198 offered appts – 180 Health Assessments completed.

2018/19 843 referrals 723 offered appts – 659 Health Assessments completed. 120 awaiting Health Assessment.

The Health Protection Nurse Specialist, attended a Health Promotion event in Moy Park in March and was able to refer 74 clients into NINES who were not registered with a GP. The company have since referred a further 3 clients. There are plans to replicate this outreach service in the other large factories in Dungannon to promote NINES and to refer new clients for health assessment.

GP registration continues to be a challenge in the Dungannon area but this hopefully has now been resolved with a new process. All new clients seeking registration are sent to BSO and they are allocated a GP by them which has sped up the process of the clients being allocated a GP and receiving a H&C number.

The Health Protection Nurse Specialist continues to promote NINES within the Trust and recently attended the medical Clinical ward manager's meeting for CAH and DHH and hopes to do the same for the surgical wards.

10,000 more voices questionnaire resulted in 26 responses from June 18 to February 19. [The results are very positive about the NINES service.](#)

The Bi-lingual Healthcare Worker left her post in February and the plan is to fill this post in the next few months.

The Public Health Nurse for BME Communities also continues to see an increasing number of BME families who are [new entrants](#) into Primary Schools.

In 2018 there were 253 referrals and so far this year they have seen 41, with more anticipated once the school nurses complete their nurse reviews in schools. The families, particularly from the Roma communities of Bulgaria and Romania have complex needs and are requiring more intensive visits and follow up. NINES has strong links with the Intercultural Project in Portadown and the Roma Interagency group as well the Education Authority EWO.

1.52 Vulnerable Persons Relocation Scheme – Syrian Refugees

During Refugee Week 2018 Northern Ireland welcomed its 1,000th Syrian refugee as part of the Syrian VPR Scheme.

The Head of the Civil Service David Sterling praised the humanitarian effort. He said “*the combined efforts from the public, community and voluntary sectors had provided sanctuary, support and the chance of a new life in Northern Ireland for families fleeing the war torn region*”.

Background and Context

In September 2015, the UK Government announced a significant expansion of the Vulnerable Persons Relocation (VPR) scheme and committed to resettle up to 20,000 Syrian Refugees over the course of the current UK Parliament. The scheme is aimed at resettling displaced refugees who are currently living in camps in countries neighbouring Syria, principally Turkey, Jordan and Lebanon. The VPR scheme identifies a number of groups as being particularly vulnerable and who will be given priority for settlement in the UK. Although these might change in the future, the current priority groups are refugees who:

- have medical needs;
- have survived violence and torture;
- are women at risk;
- are children in a situation that makes them particularly vulnerable;
- have legal or physical protection needs;
- do not have local integration prospects; or
- are elderly in a situation that makes them particularly vulnerable

1.53 International Children’s Day

The Trust took part in a healthy living event to celebrate International Children’s Day in Newtownhamilton Community Centre on 8 June 2018.

The event had a particular emphasis on [promoting community engagement with the Bulgarian Roma Community in the town](#). Over 150 people attended the event.

A health needs assessment was carried out with members of the community by the Southern Trust. This identified some priorities from members of BME groups including the need for mental health support with specific reference to young men. Translated materials e.g. dental care was also distributed at the event.

1.54 Trust Traveller Action Group

A copy of the progress report can be obtained by contacting the Trust’s Equality Assurance Unit in the first instance.

Promoting Equality of Access to Services – High Quality Safe Services

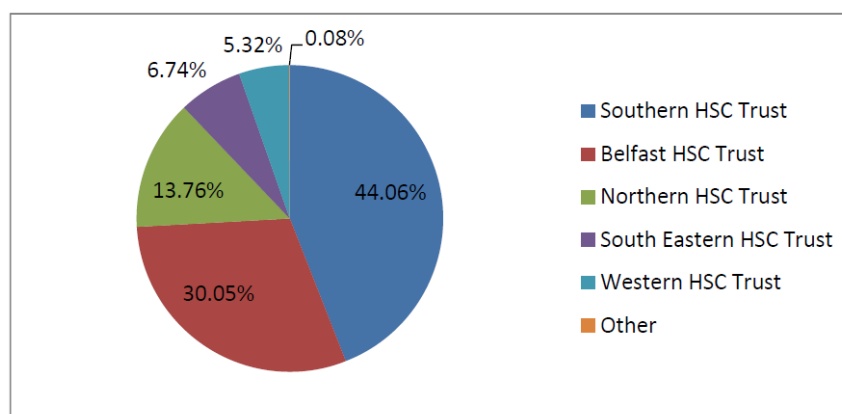
1.55 Regional Interpreting Service – NI HSC Interpreting Service

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.

NI HSC Interpreting Service Report 1 April 2018 to 31 March 2019

HSC Trust Area	Total Number of Requests Received	Cancellations	Non provisions	Out of Hours
Southern HSC Trust	57289	6613	827	697
Belfast HSC Trust	39072	4771	743	609
Northern HSC Trust	17888	2392	294	231
South Eastern HSC Trust	8761	1071	176	135
Western HSC Trust	6914	937	168	79
Other	101	39	1	0
TOTAL	130025	15823	2209	1751

% of Requests per HSC Trust



Southern Trust interpreter requests for the year April 17 to March 18 were 47.27%. The current year i.e. April 18 to March 19 down by 3.21%.

NB: Overall HSC requests for face to face interpreting continues to rise – up 15,643 from 2017/18. See also page 79 for further information.

Top 20 Southern HSC Trust Languages - 1 April 2018-31 March 2019

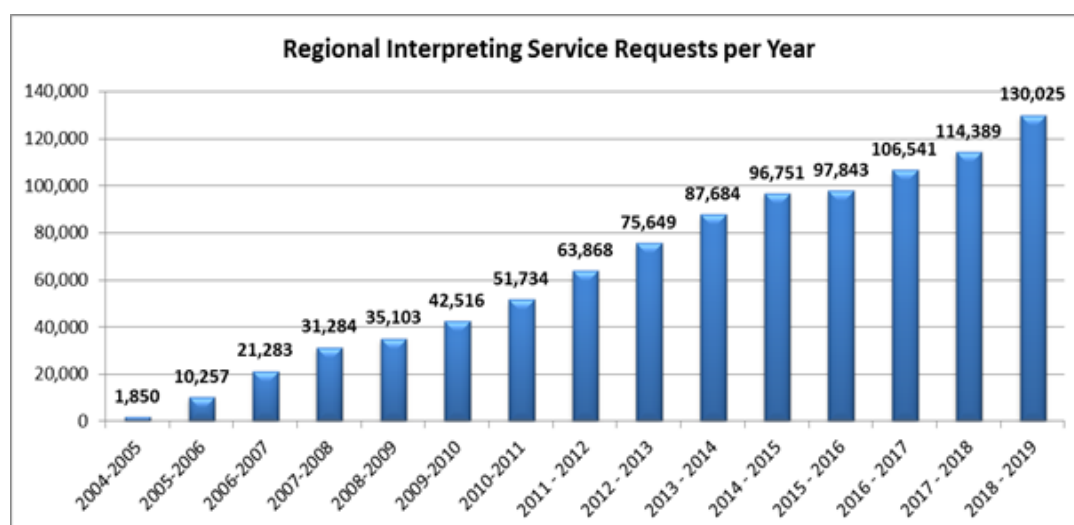
Polish	13909
Lithuanian	12361
Portuguese	6239
Tetum	6077
Bulgarian	6041
Romanian	3265
Arabic	2600
Russian	1437
Slovak	1281
Latvian	1183
Hungarian	731
Chinese - Mandarin	564
Chinese - Cantonese	481
Czech	269
Spanish	176
Urdu	116
Pashto Central	108
Bengali	68
Punjabi	63
Italian	52

1 Million Requests

The HSC Regional Interpreting Service (RIS) reached 1 million requests on 6 June 2019.

The RIS was first launched in 2004 to provide region-wide face to face interpreting services to the 5 HSC Trusts, Primary Care and other HSC providers in Northern Ireland.

The RIS in-house team now consists of 9 staff who process in the region of **2,500** requests per week – over **98%** of which are successfully fulfilled. The most requested RIS languages include Polish, Arabic, Lithuanian, Romanian, Portuguese, Bulgarian, Tetum, Slovak, Mandarin and Cantonese. RIS currently manages a central Register of **350** trained, self-employed, sessional Interpreters covering **35** different languages.



1.56 Regional Communication Support Services (RCSS) to the Deaf, Deafblind and Hard of Hearing

A Regional Communication Support Service (RCSS) Steering Group continues to take forward the recommendations of the Health and Social Care Board (HSCB) review of communication support services for people who are deaf or hard of hearing. Communication Support Services include:

1. British Sign Language (BSL) / Irish Sign Language (ISL) interpreting for those who use BSL/ISL as their first language;
2. Lip Speaking/Electronic note taking for people who are hard of hearing;
3. Specialist interpreting services for deafblind people.

As recommended a regional service (throughout NI) will be provided by the HSCB's Business Service Organisation (BSO). It is anticipated the regional service will be operational during 2019/20.

Valerie Watts, CE of the HSCB wrote to HSC Trust CEs on 11 June setting out the progress and direction for the provision of RCSS to the deaf, deafblind and hard of hearing.

She clarified that the proposed new service will change the way in which communication support for the deaf, the deafblind and hard of hearing people is booked for Health & Social Care (HSC). Going forward, HSC staff and practitioners will be required to book sign language interpreting and communication support services, on behalf of the patient or client, through an [enhanced Regional Communication Support Service provided through the BSO](#).

Plans are being progressed to implement the changes to the current communication support service by the end of the [2019/2020](#) financial year. In the interim HSC Trusts will continue to rely on the support from current service providers and where necessary extend their service provision until then.

The HSCB has been working and engaging with each of the HSC Trusts, the current interpreting service suppliers, the communication support professionals interpreters and the deaf, deafblind and hard of hearing communities in taking this work forward. This engagement will continue and increase in preparation for the transfer of communication support/ interpreting services to the new service supplier/model of service provision.

A Regional Advisory Group is in place made up of key stakeholders and most importantly service users representing the deaf and hard of hearing communities are core members of this group and other work streams relating to the work of the RCSS initiative.

It is the intention of the HSCB that the proposed new service and changes associated with it will enhance and improve the current arrangements.

Noteworthy is the work currently underway, in procuring a remote interpreting service akin to those in place in other parts of the UK, to include the development of:

- (i) an effective and accessible out of hours service within the new service model.
- (ii) A complaints process/feedback process. Work is ongoing to improve the complaints/feedback process which will allow the deaf, deafblind and hard of hearing communities to be able to raise concerns on service provision. Current HSC complaints processes limit these communities from making a complaint as they often do not allow for or fully consider the impact that the person's hearing loss or deafness has on their ability to access and make a complaint.

Awareness raising is clearly needed across the whole of HSC and the independent sector sub-contractors to ensure that staff are aware of the needs of deaf, deafblind and hard of hearing on how and when to utilise communication support services. To that end a communication sub-group has been established with membership comprising of HSC staff, communication support professionals, specialist voluntary groups and service users to develop and take forward an initiative to make key stakeholders aware of both the new service model and the communication needs of the deaf, deafblind and hard of hearing.

2 Please provide examples of outcomes and/or the impact of equality action plans/measures in 2018-19 *(or append the plan with progress/examples identified).*

See attached Appendix 1- Regional Equality And Disability Action Plan – which the Trust has actively contributed to.

3 Has the **application of the Equality Scheme** commitments resulted in any **changes** to policy, practice, procedures and/or service delivery areas during the 2018-19 reporting period? *(tick one box only)*

Yes

No (go to Q.4)

Not applicable
(go to Q.4)

Please provide any details and examples:

The application of the Trust's Equality Scheme, equality screening, equality

impact assessments and consultation processes have ensured that an equality lens has been brought to policy and service development as well as decision making, financial planning and procurement processes across the Trust.

For evidence please refer to the Trust's Quarterly Screening Outcome Reports which illustrate how the Section 75 equality duties have been mainstreamed into the decision making/policy development processes of the Trust – available on the Trust's website under 'About the Trust / Publications / Policy Screening Outcome Reports'.

The screening of policies often results in service leads thinking differently about their service having considered varying Section 75 perspectives. Service user involvement has been instrumental in this regard.

3a With regard to the change(s) made to policies, practices or procedures and/or service delivery areas, what **difference was made, or will be made, for individuals**, i.e. the impact on those according to Section 75 category?

For example:

- **New Arrangements for Procurement of Small Aids and Appliances** - a hybrid model is being considered having taken into account the views of patients, their families, carers and other stakeholder interests as a result of formal consultation/engagement/ Section 75 equality screening.
- **Audit of Mixed Gender Accommodation** - the Trust is committed to respecting the 9 equality strands when deciding upon patient placement. All patients must be treated courteously and have their dignity, modesty and privacy respected regardless of placement.
- **Daisy Hill Pathfinder Project** - A ROADMAP for the future of Daisy Hill Hospital's Emergency Department is now a reality - thanks to a meaningful partnership between the local community, workforce and the health and social care system. The Department of Health confirmed details of an investment package as part of a long term plan to sustain and bolster urgent and emergency care at the Newry hospital.
The Trust complied with its Section 75 equality duties in the outworking of this project in that the project was subjected to equality screening and public consultation. The views of a wide range of stakeholders were taken into account in relation to the decision making process.
- **Transformation Agenda** – Equality screenings are being conducted.

3b What aspect of the Equality Scheme prompted or led to the change(s)? *(tick all that apply)*

- As a result of the organisation's screening of a policy *(please give details)*:
See examples provided in 3a above. See also the Trust's policy screening outcome reports for the year ending 31 March 2019 – available on the

Trust's website under 'About the Trust / Publications / Policy Screening Outcome Reports'.

- As a result of what was identified through the EQIA and consultation exercise (*please give details*):

There were no EQIAs consulted upon during the current reporting period.

- 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: Progress on Equality Scheme commitments and action plans/measures

Arrangements for assessing compliance (Model Equality Scheme Chapter 2)

- 4 Were the Section 75 statutory duties integrated within job descriptions during the 2018-19 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:

- 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.
- 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.
- Equality Screening Master Classes.

5 Were the Section 75 statutory duties integrated within performance plans during the 2018-19 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 Head of Equality provides ongoing training, hosts workshops for policy leads/decision makers and provides ongoing advice and expertise in the area of Section 75, the disability duties and human rights obligations. The Head of Equality acts as a business partner - participating in discussions at an early stage of policy development and decision making processes. Please refer to staff training at question 24 of this report for further details.
- Section 75 Annual Progress Report is tabled each year and discussed at Trust Board ahead of formal approval.

6 In the 2018-19 reporting period were **objectives/ targets/ performance measures** relating to the Section 75 statutory duties **integrated** into corporate plans, strategic planning 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 2018-19 report
- Not applicable

Please provide any details and examples:

See response to 5 above.

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 and Disability action plans/measures

7 Within the 2018-19 reporting period, please indicate the **number** of:

*Actions completed: *Actions ongoing: *Actions to commence:

*Refers to action measures for Year 1.

Please provide any details and examples (*in addition to question 2*):

Please refer to Appendix 1 for progress update on Year 1 action measures for the Regional Equality and Disability Action Plans, which the Trust actively contributes to.

- 8 Please give details of changes or amendments made to the equality action plan/measures during the 2018-19 reporting period (*points not identified in an appended plan*):

None – See Appendix 1 for details of progress made with regards Year 1 action measures.

- 9 In reviewing progress on the equality action plan/action measures during the 2018-19 reporting period, the following have been identified: (*tick all that apply*)

- Continuing action(s), to progress to the next stage addressing the known inequality
- Action(s) to address the known inequality in a different way
- Action(s) to address newly identified inequalities/recently prioritised inequalities
- Measures to address a prioritised inequality have been completed.

Arrangements for consulting (Model Equality Scheme Chapter 3)

- 10 Following the initial notification of consultations, a targeted approach was taken – and consultation with those for whom the issue was of particular relevance: (tick one box only)

All the time Sometimes Never

- 11 Please provide any **details and examples of good practice** in consultation during the 2018-19 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:

The following examples, illustrated below, are intended to showcase good practice in consultation:

Student Volunteers Help With Patient Feedback

The Southern Health and Social Care Trust involved student volunteers from Portadown College to help gather feedback from patients at Craigavon Area Hospital. A number of Year 13 Students attended the hospital as part of their School Volunteering Project, interviewing patients in the Emergency Department, Outpatients, Discharge Lounge and Radiology. Mairéad Casey, Patient and Client Experience and 10,000 Voices Facilitator for the Southern Trust said:



“Through the 10,000 More Voices project, we are always trying to seek the views of those who use our services, to help us identify what works well and how we can improve the way we do things. We were delighted to team up with Portadown

College to help us with this work. Having the students on board, helped us to reach many more patients and the College are delighted with the experience this has given them of working in a healthcare environment.”

The feedback received will be used to inform future service development within the Trust.

Launch of HSC Co-Production Guide for NI - Connecting and Realising Value Through People

The Department of Health launched the Co-Production Guide for Northern Ireland, “Connecting and Realising Value Through People” on 31 August 2018.

This practical Guide to support the application of a Co-Production approach across the health and social care system was developed as part of the Department’s programme of work to transform health and social care provision as envisaged in “Delivering Together 2026”.

Developed [using a system wide partnership approach](#), the Guide provides underpinning principles for Co-Production, definitions of key terms and practical guidance to a range of stakeholders on the key steps to achieve effective Co-Production.

The guide has also been reflected in the Trust’s Personal and Public Involvement (PPI) Toolkit.

Co-Production Matters – Supporting Those active in Co-Production in Mental Health Services in the SHSCT

During the year under review the Mental Health Forum produced ‘Co-Production Matters’ a resource that supports the Capacity Building Programme of the Mental Health Forum in the Southern Trust for those working in partnership in the planning and provision of mental health services.



Examples of Regional Consultations

Reshaping Stroke Services

Northern Ireland must not and will not be left behind on stroke treatment, the Department of Health stressed at the launch of its consultation on reshaping stroke services in NI.

Stroke is one of the most devastating health crises anyone can face. It is a major health issue in Northern Ireland with around 2,800 people being admitted to hospital each year and 36,000 stroke survivors living in our communities. Stroke care is provided both in hospitals and the community but too often, and despite the best efforts of staff, the service is not as good as it could or should be. This document outlines the challenges within stroke services and seeks views on how those services should be reshaped to improve stroke care.

A public consultation on reshaping stroke services was launched, during the year under review, with plans to create specialised Hyperacute Stroke Units offering 24/7 access to faster diagnosis and cutting edge treatments. The central aim of the reforms is to significantly reduce disability and save more lives.

The Department of Health (DoH) lead on the full public consultation exercise which commenced on 26 March 2019 and extended to August 2019.

The consultation was made available on Citizen Space and on the DoH website for members of the public to consider and respond to. The consultation document was made available in Plain English and Aphasia Friendly. A questionnaire was also drawn up to facilitate consultees in preparing their considered responses.

The proposed new network of Hyperacute Stroke Units will ensure that patients have access to the best possible care in regional centres of excellence no matter where they live or what time they are admitted.

It will lead to increased use of the clot busting Thrombolysis. The reforms will also support greater access to Thrombectomy, the groundbreaking procedure that removes a clot from the brain. Thrombectomy is currently available at the RVH from Monday to Friday, over limited hours. The Hyperacute network model is essential to allow the expansion of Thrombectomy to a 24 hour, seven day a week service and to ensure that appropriate patients from across Northern Ireland can receive this life-changing treatment.

The public consultation offers six potential new models of care, with potential networks ranging from three Hyperacute Stroke Units to five.

Currently, there are eight acute hospitals routinely providing Thrombolysis to stroke patients.

Despite the dedication of HSC staff to provide high quality care within available resources, most of our hospitals currently struggle to consistently meet national

best practice standards of care for stroke patients.

Permanent Secretary Richard Pengelly said: *“We have an exciting opportunity to change services for the better, protecting many more people from the devastating consequences of stroke. We can’t secure these improvements without reshaping current provision. Our hospital stroke services are currently too thinly spread. Too many units are struggling to maintain sustainable quality care and staffing levels.*

“Establishing Hyperacute Stroke Units is vital to ensure we keep pace with advances in treatment and provide the best possible treatment. The principle of consolidating care is backed by stroke charities, expert research and the proven success of reforms introduced in London and Manchester.”

The consultation on Reshaping Stroke Care follows a pre-consultation by the Health & Social Care Board and Public Health Agency in 2017.

The consultation paper also outlined planned improvements in the treatment of Transient Ischemic Attack (TIA), also known as mini-stroke, as well as improvements to community-based stroke care.

The consultation also proposes extending the HEMS air ambulance service to coordinate with emergency road transport for patients with strokes and other conditions in remote rural areas to ensure they arrive at hospital for treatment as quickly as possible.

The six potential options that have been identified for the provision of specialist emergency stroke care in Hyperacute Stroke Unit (HASU) sites are:

- **Option A:** under this option, 5 HASUs would be located at the following sites: Altnagelvin Area Hospital, Antrim Area Hospital, [Craigavon Area Hospital](#), Royal Victoria Hospital and South West Acute Hospital. Acute Stroke Units (ASUs) would be co-located.
- **Option B:** under this option 4 HASUs would be located at the following sites: Altnagelvin Area Hospital, Antrim Area Hospital, [Craigavon Area Hospital](#) and Royal Victoria Hospital. Acute stroke units to be co-located, with consideration of a fifth ASU at the Ulster hospital.
- **Option C:** under this option, 4 HASUs would be located at Altnagelvin Area Hospital, [Craigavon Area Hospital](#), Royal Victoria Hospital and South West Acute Hospital. ASUs to be co-located, with consideration of a fifth ASU at the Ulster Hospital.
- **Option D:** under this option, 4 HASUs would be located at the following sites: Altnagelvin Area Hospital, Antrim Area Hospital, [Craigavon Area Hospital](#) and Royal Victoria Hospital with services removed from Antrim Area Hospital over time.
- **Option E:** under this option, 4 HASUs would be located at the following sites: Altnagelvin Area Hospital, [Craigavon Area Hospital](#), Royal Victoria Hospital and South West Acute Hospital, with services removed from the South West Acute

Hospital over time.

• **Option F:** under this option, 3 HASUs would be located at the following sites: Altnagelvin Area Hospital, [Craigavon Area Hospital](#) and Royal Victoria Hospital, with additional ASUs located at the Ulster Hospital and Antrim Area Hospital.

NB: The order of options noted above is not a ranking. At the consultative stage the Department of Health did not identify a preferred option.

In formulating the options outlined in the consultation document, the Health and Social Care Board (HSCB) extensively engaged during the pre-consultation phase with a broad range of stakeholders including local councils, professional bodies, stroke groups, unions and the voluntary and community sector. The HSCB facilitated a series of meetings, survivor and carer workshops and public workshops across Northern Ireland.

Once a preferred option is identified, further consideration will be given to examining in greater detail the needs of all affected stakeholders including staff; this will be captured in an Equality Impact Assessment (EQIA).

Consultees were encouraged to read and respond to the consultation to help shape the service into the future.

Public consultation on Breast Assessment proposals

The Department of Health published proposals for the future of breast assessment services in Northern Ireland on 25 March 2019.

The proposals involve services being consolidated on three hospital sites. Currently in Northern Ireland, breast assessment services for symptomatic referrals are provided by all [five](#) Health and Social Care Trusts (at Altnagelvin, Antrim, Craigavon, Belfast City and Ulster hospitals). Breast assessment following breast screening tests is provided by four Trusts, with Belfast Trust (Linenhall Street) covering the Belfast Trust and South Eastern Trust areas.

In the absence of change, waiting times for breast assessment are expected to worsen, with demand projected to increase in the years ahead.

A rapid review of breast surgery is also being initiated and will report by the end of the year i.e. 2019.

Breast assessment services provide a “one stop” outpatient clinic appointment for patients.

They include referrals for breast symptoms which may be suggestive of cancer – known as symptomatic referrals. Also covered are referrals from breast screening mammography tests that indicated the need for follow-up assessment.

The public consultation proposes three breast assessment locations: [Altnagelvin Hospital](#); [Antrim Area Hospital](#); and a greater Belfast location, likely to be the [Ulster Hospital](#).

The aim is to establish a model of care which will ensure high quality, safe, sustainable, accessible and timely services.

Richard Pengelly, Department of Health Permanent Secretary, said: *“We have listened carefully to patient voices and it is very clear that timely access to care is the overriding priority. The way breast assessment services are currently delivered is becoming increasingly fragile. Staffing challenges are an important factor behind these pressures and demand for care – including urgent referrals for suspected cancer - is increasing.*

“Sticking with the current model would mean ongoing and worsening vulnerability, with deteriorating waiting times for assessment. That would simply be unacceptable.

“Consolidating care on three sites means we can provide durable and quality services, for the benefit of patients and staff.”

A centralised appointment booking system is also planned as part of the proposed reforms.

The future model of care will also include the establishment of a regional Breast Assessment Network to shape and support service provision for the population of Northern Ireland.

The proposals in the consultation document reflect the work of the Breast Assessment Project Board, led by the Health and Social Care Board (HSCB) and Public Health Agency (PHA) and comprising patient representatives and clinical and nursing leaders from across Health and Social Care.

Patient views were also sought through research work by the HSC Leadership Centre. It indicated that the length of time waiting for an assessment appointment was the most important priority.

In accordance with guidance produced by the Equality Commission for Northern Ireland and in keeping with Section 75 of the Northern Ireland Act 1998, the proposed options have been equality screened by the DoH and a preliminary decision has been taken that a full equality impact assessment is not required at this stage. The preliminary decision is subject to change following analysis of feedback received during the consultation.

Regional Learning Disability Review

The Health and Social Care Board has asked all Trusts to take part in a review of Adult Learning Disability Services across NI. The Review aims to find out if services are meeting current need and what needs to be changed for the future over the next 10 to 15 years. In the Southern Trust we have the highest proportion of Learning Disability Service users and the largest number of service users



living with carers compared to other Trusts. During the year under review a series of events were hosted for stakeholders to share their views on services and issues that need to be addressed for the future.

Review of Day Services for Adults with a Disability

The Trust has teamed up with Disability Action and is currently meeting with **staff, service users, carers and independent providers** to find out their views on current day services and any improvements which they think should be made in the future. The Trust along with a number of independent providers currently offer a range of day services for adults with learning and physical disabilities. These include Day Opportunities, for example, supported employment, training or leisure activities or a placement in a Day Centre.

Explaining the Review, Miceal Crilly, Assistant Director of Disability Services for the Southern Trust says: *“We want to support our service users to live as independently as possible as part of their own communities whilst at the same time providing them with the daily assistance they need to live life to the full.”*



“Whilst we have a number of day centres across the area, which offer care and support for people with more complex health and support needs, our more independent service users want to choose for themselves, how and where they spend their day through a wide range of day opportunities.”

“As we know there is a growing need for day services, we want to make sure that we can support everyone who needs our services into the future and so we are asking service users, carers and anyone interested in these services to share their views with us.”

The review is looking at:

- How people are assessed to find the right support to meet their needs.
- How suitable Trust buildings and facilities are for day services.
- The support services needed to provide day services.
- The staffing needed to provide day services.

Celebrating 25 Years of Partnership in Mental Health

During the year under review mental health staff and service users throughout the Southern area celebrated 25 years of working together.

The Mental Health Forum was set up in 1993 as a way of sharing the views of service users with service providers.

Now 25 years on, the Forum is the official voice of the ‘lived experience’ community

in improving services for people with mental health issues and their families.

The Recovery College, Wellmind Hubs and the introduction of Peer Support Workers are just a few of the many examples of Southern Trust services developed in partnership with the Mental Health Forum. On a day to day basis, the Forum also works in close partnership with the Southern Trust's Mental Health Divisional teams, contributing to key strategic projects such as Workforce Transformation and decision making, for example by participating on interview panels.



Paying tribute to the Mental Health Forum on this milestone, Acting Director of Mental Health and Disability Services for the Southern Health and Social Care Trust Carmel Harney said:

“Co-production between those who deliver services and those who use them is at the heart of the planning and delivery of services throughout the Southern Trust. For the past 25 years, the Mental Health Forum has been at the forefront in promoting this partnership ethos and has made a significant contribution in developing some of our most innovative services.”

“Personal recovery is also central to co-production in mental health services, and we are delighted that the Forum has given many people with lived experience and carers the chance to become more involved in making services the very best they can be for everyone.”

“I sincerely thank all of our partners in the Forum for their unwavering passion and commitment over the years and am absolutely confident that they will continue to lead the way in improving the lives of local people and communities.”

Manager of the Mental Health Forum, Karl Hughes, added: *“Today is not only a celebration of 25 years of achievement but is an endorsement of the value of partnership working. A shared vision for making services the very best they can be is our key driver and the inclusion of the lived experience voice and that of carers is absolutely vital to achieving a positive outcome.”*

The Mental Health Forum also provides advice, information and signposting for service users, carers, professionals and the general public about mental health services throughout the Trust area - for more information visit www.thementalhealthforum.co.uk

Peer Support: Listening to the Voice of the Carer

Over 40 delegates attended the Trust's Quality Improvement Network on 28 September 2018 in Dromantine Conference Centre, Newry. The subject of this Network was 'Peer Support: Listening to the Voice of the Carer'. Peer support can be defined as *“people with shared experiences, characteristics or circumstances supporting each other to improve health and wellbeing.”*

Feedback from the Network was extremely positive with attendees appreciating the

opportunity to engage with stakeholders and colleagues. Comments received included: *“very touching, definitely increased awareness of challenges, both physically and emotionally for families. Thank you for sharing”* and *“we should not be complacent - needs are always changing for staff and carer alike - regular review of what is going well and not so well should be undertaken”*.

A key quote from the speakers that resonated with the audience was that *“you cannot pour from an empty cup.”*

Patient and Public Involvement

A new ‘Communicating With Confidence’ leaflet was developed, during the year under review, by service users for distribution to future clients of the Acquired Brain Injury Rehabilitation Team. Based on their own experiences the service users generated information on common communication difficulties following brain injury, advice for brain injury survivors and their families and useful websites and apps.

Patient experience survey 2017

The Department of Health, working in conjunction with Health & Social Care Trusts, carried out an Inpatient Patient Experience Survey 2017 to gain a greater understanding of the aspects of care that are of most importance to patients, to act on patients’ feedback and to improve the quality of health and social care.



Patient Client Experience Newsletter

The 7th edition of the Trust’s Patient Client Experience newsletter was issued during the year under review. This newsletter focuses on patient, client and carer feedback and actions and initiatives to improve patient experience within the Southern HSC Trust.

New Online Service User Feedback Form

Due to an increase of Service User feedback electronically via email and social media an Online Service User Feedback form has been created for inclusion within the Service User Feedback section of the Trust Website.

‘Have Your Say’

The HSC Collective Leadership Strategy was launched on 18 October 2017. The strategy focuses on embedding a culture of high quality, continuously improving, compassionate care and support within health and social care in Northern Ireland. Conversations with our staff, patients, service users, carers and families during the development of the strategy highlighted a clear desire for a core set of values and behaviours for all of HSCNI.



A range of consultation methods were utilised to engage the views of stakeholders on a proposed set of values and behaviours and to encourage stakeholders to ‘*Have Your Say*’ and to provide feedback. Stakeholders included staff within the HSC family, service users, their carers and families and the wider population of NI.

An Interactive Brochure was utilised to provide more details on the communication and engagement exercise. The use of an online questionnaire was also utilised which could also be accessed using a QR code for mobile phone access.

10,000 More Voices Website

The Trust’s new 10,000 More Voices website went live during the current reporting period.



Great Guides for Service Users and Staff

Quality Improvement (QI) is about making Health and Social Care (HSC) services safe, effective, patient-centred, timely, efficient and *equitable*. Involving service users and carers is a key principle of quality improvement. During the year under review two 'Great' guides were produced for services users and staff to encourage participation. See extract below:

WHAT DO I NEED TO CONSIDER?	WHAT DO I NEED TO DO?
<p>G Getting involved What is this all about? Why me and what's my role? Why is my voice important? Who do I talk to if I have any further questions or issues?</p>	<ul style="list-style-type: none"> Find out about why your voice is important by visiting the Engage website. For more information about QI work and involvement opportunities check out - https://qiliasni.net/qi-community. At the start, ask for a named contact person. Link with him/her and ask for a description of the work/project and what is expected of you.
<p>R Reimbursement Will I get paid out-of-pocket expenses? How do I make a claim and who will help me with the process?</p>	<ul style="list-style-type: none"> You will be able to claim any out-of-pocket expenses. A claim form will be provided. Complete and return – ask for support if you need help with this. Keep a record of the claims you have submitted.
<p>E Expectations Am I clear about how much time I can commit and what my involvement will mean? What do I need to do to support my involvement? Are there rules for meetings? Will a buddy/mentor be appointed to provide support before, during and after meetings? How can I help the group get to know me better?</p>	<p>There are various opportunities with different time commitments – identify what suits you best. Share your specific support needs with your point-of-contact person. These may include:</p> <ul style="list-style-type: none"> Notice required to help you to plan to attend. Clear directions to meetings or event locations. Sharing the best way for you to receive information ie email or hard copy. Having the option to attend a meeting via telephone or video call. Ensuring the venue has disability access or is close to public transport routes. Ask for the meeting etiquette - this will include guidelines and expectations of all members. Ask for a support person or buddy/ mentor who will help with any work you have been asked to do and provide further information/explanation. If asked for personal information – be clear about the limits of its use and only agree to share what you are comfortable with.
<p>A Achievements Will my views be listened to, valued and respected as an 'expert by lived experience', and incorporated into the work? How will my involvement be shown to have had an impact and not appear tokenistic?</p>	<ul style="list-style-type: none"> Be clear about what you want to achieve by being involved. Consider if there are other or better ways for your concerns to be heard. Contribute to and shape the meeting agenda. Ask for regular feedback on your contribution and provide your own feedback on the work. Actively question, if and how, the service user and carer voice, has been shown to have made a difference to the work.
<p>T Training Will I be provided with an induction session and training?</p>	<ul style="list-style-type: none"> An induction to the work will be provided. Further training will be available – your contact person will help you to identify and access this. Check out further resources on Engage and HSCQI websites.

Remember it is okay to say "not now", or to recommend someone else.

Equality Commission for NI – Consultation on Draft revised Policy and Procedures for Complaints and Investigations under Paragraphs 10 and 11 of Schedule 9 of the Northern Ireland Act 1998 – March 2019.

The Head of the Equality Assurance Unit provided a considered response to the above consultation during the current reporting period on behalf of the Southern Trust.

12 In the 2018-19 reporting period, given the consultation methods offered, which consultation methods were most frequently used 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*): On-Line Citizenspace, mobile phone Apps, interactive brochure

Please provide any details or examples of the uptake of these methods of consultation in relation to the consultees' membership of particular Section 75 categories:

See response at question 11 for illustrations of the methods of consultation utilised by the Trust.

- 13** Were any awareness-raising activities for consultees undertaken, on the commitments in the Equality Scheme, during the 2018-19 reporting period? (*tick one box only*)

Yes No Not applicable

Please provide any details and examples:

PPI Awareness-Raising Activities

The Trust has had in place since 2008 a structure to drive and support PPI in accordance with DoH Guidance and regional standards to ensure that it delivers on its obligations under the Health and Social Care Reform Act (NI) 2009 which includes the production of a Consultation Scheme of which the Section 75 equality duties are an integral part.

The Trust's Director of Older People and Primary Care Services is the lead Director for PPI and has responsibility for the development of the Trust's PPI Strategy and application of practices across the Trust.

A non-Executive Director chairs the Patient Client Experience Committee, the purpose of which is to provide assurance to the Trust Board that the Trust's services, systems and processes provide effective measures of patient/client and community experience and involvement; and to identify opportunities for development to deliver on-going improvements.

The Assistant Director for Promoting Wellbeing leads the development and implementation of the Trust's Personal and Public Involvement (PPI) framework and action plan across Directorates and stakeholder organisations.

The Head of User Involvement and Community Development leads the coordination, development and delivery of the Trust's Community Development, User Involvement and Volunteer Development agendas across the Southern Trust area and is responsible for providing professional leadership and ensuring effective engagement within the Southern Trust area.

Practical steps undertaken to facilitate and support the involvement of service users, carers and the public (in particular marginalised/excluded Section 75 groups) in the planning, delivery and evaluation of services:

- Reviewed its PPI Strategic Action Plan
- Published the “Review of Strategy to Enhance PPI within the Trust”
- Published an updated PPI Framework “Involving for Improvement” which together with the new PCE Framework, feeds into the Trust’s new Quality Strategy 2017–2021
- Published a PPI Training Booklet to support staff to understand and incorporate PPI into their work practices
- Reviewed, updated and published an Advocacy Information Booklet for staff, service users, carers and other stakeholders
- Developed the annual corporate action plan with defined outcomes that is informed by compliance rates with PPI indicators, PHA PPI Monitoring Report and demonstrates the positive impact of PPI
- Developed annual Directorate action plans with defined outcomes that demonstrate positive impact of PPI at a service level for patients, service users and carers
- Produced an Annual Report on PPI demonstrating evidence of compliance with Trust’s PPI responsibility and work undertaken to address challenges in this area
- Reviewed and finalised the PPI Toolkit and 10 fact sheets
- Developed a PPI Cycle leaflet to explain the links between PCE, PPI, Co-Production and Quality Improvement
- Developed a central register of opportunities for involvement which is updated across all Directorates and readily accessible by the public
- Reviewed the PWB sections of the Trust website and SharePoint to ensure that they are more user-friendly and easier to navigate
- Raised the profile of the ‘Involving you’ section on the Trust home page to raise awareness of the opportunities for service users, carers to get involved in the Trust
- Amended the Trust’s Job Description template to include PPI responsibility for all levels of staff as standard
- Contributed to the DoH’s Co-production guide
- Roll out of the PHA PPI Awareness eLearning module and ongoing PPI Awareness training for Trust staff teams and Student Social Worker Induction programmes
- Provision of Practical Hints and Tips for Involving service users and carers training to Social Workers on the Advanced Social Work Award PPI module 21 February 2018 at QUB.

Other awareness raising activities include:

- Equality Scheme - What it means for staff booklet available for all SHSCT staff and service users - raising awareness of Section 75 equality duties.
- On-going support for established forums which represent the voice of the user and Section 75 equality groups e.g. Carers Forum, Mental Health Forum, Traveller Action Group, etc.
- Publication of quarterly screening outcome reports showing the outcome of equality screenings. In the interest of openness and transparency these are posted on the Trust's website for members of staff and the public to review.
- Public consultation and focus group discussions on key service

changes/developments - completion of equality screenings and EQIAs - publication of same along with consultation document setting out Section 75 obligations and how these duties have been taken into account.

- Use of standard screening clauses in policy and consultation documents as standard practice and public/outward facing documentation.
- Trust Board Report incorporates an update on the implementation of the Section 75 equality duties.
- The Trust's Section 75 Annual Progress Report is also utilised to raise awareness of Section 75 equality obligations and progress regarding implementation of same - this is available to all staff and service users via the Trust intranet and website.
- Souther-I is another medium

14 Was the consultation list reviewed during the 2018-19 reporting period? (tick one box only)

- Yes No Not applicable – no commitment to review

Arrangements for assessing and consulting on the likely impact of policies (Model Equality Scheme Chapter 4)

[[LINK 1](#) / [LINK 2](#) to web pages where screening templates and/or other reports associated with Equality Scheme commitments are published]

15 Please provide the number of policies screened during the year (as recorded in screening reports):

18

16 Please provide the **number of assessments** that were consulted upon during 2018-19:

1	Policy consultations conducted with screening assessment presented.
	Policy consultations conducted with an equality impact assessment (EQIA) presented.
	Consultations for an EQIA alone.

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 new Arrangement for Procurement and Distribution of Small Aids and Appliances.

18 Were any screening decisions (or equivalent initial assessments of relevance) reviewed following concerns raised by consultees? *(tick one box only)*

Yes No concerns were raised No Not applicable

Please provide any details and examples: proposed new arrangement for Procurement and Distribution of Small Aids and Appliances.

Arrangements 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 2018-19 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.

Arrangements for monitoring and publishing the results of monitoring (Model Equality Scheme Chapter 4)

20 From the Equality Scheme monitoring arrangements, was there an audit of existing information systems during the 2018-19 reporting period? *(tick one box only)*

Yes No, already taken place
 No, scheduled to take place at a later date Not applicable

Please provide any details:

21 In analysing monitoring information gathered, was any action taken to change/review any policies? *(tick one box only)*

Yes No Not applicable

Please provide any details and examples:

- NINES – service user monitoring enables staff to target their resources effectively. See under Key Policy Developments in Section 1 of this report for details.
- NIHSC 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.

22 Please provide any details or examples of where the monitoring of policies, during the 2018-19 reporting period, has shown changes to differential/adverse impacts previously assessed:

The HSCB Guide to the Ethnic Monitoring of Service Users in Health and Social Care in Northern.

The application of this Guide is intended to help HSC commissioners and providers to robustly capture critical patient/service user information on existing and emerging BME communities using HSC services. Most importantly, it is intended to help HSC organisations to identify any unmet need and to target their resources accordingly in order to thus tackle health inequalities experienced by BME communities.

NINES service user monitoring utilised to address unmet need – see under Key Policy Developments in Section 1 of this report for details.

NI HSC Interpreting Service data utilised to identify language trends and unmet need.

23 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:

Examples:

- The Ethnic Monitoring Project has helped to identify uptake of services and unmet need for BME communities.
- The Trust's Local Traveller Action Group and associated action plan and Regional Thematic Group for Travellers – chaired by the Public Health Agency.
- The Trust's NINES Service.
- The NI HSC Interpreting Service – language trends and needs.
- Staff Equal Opportunity Monitoring – scoping the implications of Brexit for cross border workers.
- Irish Traveller Staff Information Booklet – produced by Travellers to engender a greater understanding and appreciation of the Traveller community.
- Introduction of a standard list of 'religions' on HSC patient information systems in consultation with the Equality Commission for NI – Monitoring Guidelines.

- Update of the HSC Themed Audit of Inequalities.

Other IT Developments:

Creation of a single digital record moves a step closer – Encompass

The Encompass Programme will introduce a digital, integrated health and care record to Northern Ireland. It will mean a patient's health and care information will be available to those who need it in one digital record. Individuals will be able to securely access their information and interact with the system.

The Encompass Programme is a HSC wide initiative everyone involved in care will have secure, consistent access to the right information at the right place to better inform safer care that facilitates their health and wellbeing throughout their life. It is built on a digital platform that streamlines services and patient/client journeys and links information across primary, secondary, community and social care.

Design has started, and the procurement process for the Programme has been completed with the aim of beginning implementation in 2020. Service user involvement has helped to shape and inform the system design.



Benefits:

- improve the patient's/client's experience of care;
- improve the health of the population;
- achieve better value by reducing the per capita cost of health care;
- improve the work life of those who deliver care;
- enable communication between HSCNI staff and citizens with potential features such as messaging and videoconferencing, supporting new ways of working.

This initiative – part of the HSC transformation programme – has been given the go-ahead by the Department of Health to proceed to procurement. The system is due to go 'live' in summer 2021 starting in the South Eastern Trust before rolling out to the remaining Trusts by the end of 2023.

Digital Care Forum

A new group, for frontline health and social care professionals interested in shaping future digital services, held its inaugural meeting on 17 October 2018 in Belfast. Around 150 staff from across HSC attended the Digital Care Forum's meeting.

The Digital Care Forum brings together a range of clinicians, including nurses,

doctors, allied health professionals, pharmacists and social workers, as part of the encompass programme.

The initiative aims to create a single digital record for everyone in Northern Ireland bringing together information currently sitting in a variety of places into one record as referred to above.

It will also introduce new tools for health and social care professionals such as electronic prescribing, a patient portal and data reporting analytics, which will help professionals better understand and improve population health.

The Encompass Programme's Clinical Director explained the need for the Digital Care Forum.

“The forum will act as a regional decision making and clinical leadership group, with members using their knowledge to make design decisions and configure clinical pathways alongside subject matter experts. It will be made up of front line, multidisciplinary clinical staff, who are committed to, supportive and convinced of the benefits of enabling transformation through encompass.”

Staff Training (Model Equality Scheme Chapter 5)

- 24** Please report on the activities from the training plan/programme (section 5.4 of the Model Equality Scheme) undertaken during 2018-19, 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.

The Trust has also invested heavily in an eLearning staff development system that enables staff to complete an increasing menu of training interventions in line with the Trust's Knowledge and Skills Framework (KSF).

Training resources are also kept continually under review to reflect any amendments/developments in the legislative framework and evolving case law.

There follows a summary of the main training and awareness raising interventions for HSC staff in support of the commitments in the Trust's Equality Scheme:

Awareness Raising

Trust Board and Senior Management Team

Specific guidelines for Trust Board members have been devised to highlight the importance of mainstreaming the Section 75 equality duties into the day to day business functions of the Trust, together with policy development, corporate and financial planning and decision making processes with a renewed emphasis on addressing inequalities and achieving fair outcomes for Section 75 categories.

The guidelines emphasise the importance of leadership and top-level commitment

to ensure the effective and timely mainstreaming of the Section 75 duties. This resource is to be updated to incorporate extracts from the newly released ECNI Guidance i.e. Section 75 Demonstrating Effective Leadership.

“Leadership and commitment provided at the highest levels in a public authority, by the Minister and Permanent Secretary or the Chair and Chief Executives are critical to the successful implementation and intended outcomes of the Section 75 duties. The roles of Management Boards and Senior Management Teams are also essential in ensuring that a meaningful and effective approach to implementing the Section 75 duties is adopted across the organisation.



A public authority must openly demonstrate its compliance with all the commitments in its Equality Scheme and that it is paying the appropriate level of regard to the need to promote equality of opportunity and the desirability of promoting good relations”. Evelyn Collins, CE Equality Commission for NI

In addition, Trust Board members and Senior Management Team (SMT) receive regular updates on the promotion of equality of opportunity and good relations duties along with a comprehensive overview of performance through the Trust’s Section 75 Annual Progress Report.

The Trust’s SMT and Trust Board also receive regular updates on equality screenings and EQIAs conducted on key service developments ahead of public consultation. The Trust’s SMT and Trust Board sign off on EQIAs before and after public consultation.

Joint Consultative Forum

One of the actions in HSC Trusts’ Regional Equality Action Plans is to set up a Joint Consultative Forum to facilitate partnership working with the Equality Commission for NI, Northern Ireland Human Rights Commission and the Community Relations Commission (CRC).

The inaugural meeting of this new Forum took place on 20 May 2019.



The Forum will facilitate ongoing communication and collaboration between the Commission and the CRC in order to optimise outcomes for Section 75 groups. Both Commissions and the CRC have also committed to promoting the partnership Forum through their social media channels to further raise the commitment, on the part of HSC Trusts, in ensuring the effective and timely discharge of their Section 75 Equality and Good Relations Duties.

Policy Screening and EQIA – Skills Training

The Trust's Head of Equality continues to deliver Section 75 Equality Screening and Equality Impact Assessment training to policy authors and decision makers within the Trust.

In addition, the Trust's Head of Equality provides on-going advice and support in the discharge of the Trust's statutory equality duties and acts as a business partner in support of each programme of care/service directorate.

In addition, screening and EQIA guidance along with worked examples is made available to staff to support them with equality screening and EQIA processes.

HSC Trust Equality Leads have committed in their Regional Equality Action Plan to develop a practical 'Tool Kit' to support managers in the application of the Section 75 Equality and Disability Duties.

Training materials will be reviewed accordingly and in line with the content of the Tool Kit.

Access to the Trust's Equality Scheme

In addition to having access to a copy of the Trust's approved Equality Scheme, the Trust has produced a user friendly information booklet for all staff entitled - 'Trust's Equality Scheme – What it means for Staff' available on the Intranet. The booklet provides a simple overview of the Section 75 Equality Duties and what it means to staff in their day to day work and was updated during the current reporting period.

Corporate Welcome

To ensure all new staff receive a timely and appropriate Corporate Induction, an interactive informative online publication was developed in 2017/18 (in consultation with representatives from each Directorate and Trade Union Side) which utilises technology to enhance learning.

The online Corporate Welcome helps ensure new employees develop a clear understanding of how the Trust works including its vision, values and priorities. This online resource is intended to equip staff to carry forward, into their workplace, enhanced knowledge of the services provided by the Trust as well as awareness of Trust policies.

The online Corporate Welcome which was first introduced on 1 November 2017 includes a video, recorded by the Trust's Head of the Equality, which emphasises the importance of equality of opportunity and directs staff to the business case for promoting equality and diversity in the workplace as well as the on-line 'Making A Difference' interactive eLearning programme. ["Head of Equality Podcast"](#)

The Corporate Welcome is available to all new staff to the Trust including staff on both permanent and temporary contracts and agency and bank staff. The Corporate Welcome is also extended to all trainees and those on placement schemes.

The online process is timelier with new starts able to complete the Corporate Welcome (or even part of it) as soon as possible after commencement, at a time that best suits the individual and the needs of their service. Furthermore, the online approach provides new starts with a resource they can go back and refer to as often as required.



In 2018/19, 442 new staff completed the online Corporate Welcome.

100% of staff have responded positively with feedback – no staff rated the publication as below average/poor.

Positive comments include: (see next page)

PART A

<i>The publication is well laid out, easy to read, bright, colourful and has a good balance of pictures to information. It shows the NHS in a very positive light and includes everything you need to know about the workplace.</i>	Physiotherapy Assistant
<i>It was very positive and welcoming. Portrayed the trust in an excellent light</i>	Neurology Specialty Doctor
<i>The videos were excellent and personable, making you feel welcomed into employment with HSC.</i>	Speech and Language Therapy Assistant
<i>I liked that the publication had a colourful and easy to follow layout. In addition to this, I appreciated the emphasis the publication placed on the Trust's Vision, Aims and Objectives.</i>	Day Care Support Worker
<i>Very accessible format. User friendly. Correct amount of information.</i>	Consultant Haematologist
<i>Very informative and straight to the point</i>	Generic Therapy Assistant
<i>Liked that it was online and I could come and go to it</i>	Community Navigator
<i>I liked that it was interactive and contained all relevant information in one place.</i>	Support Worker
<i>The way you could complete in sections / at your own pace. Colourful and interactive, plenty of alternative formats, not simply read read read. Links to other pages and forms etc was useful.</i>	Community Sector Training Co-Ordinator
<i>Useful links to policies that I initially found difficult to find on Trust net</i>	Advanced Clinical Specialist Physiotherapist
<i>It was a very professional well designed publication. It included all the key items needed as a new employee in the Trust. The videos were excellent.</i>	Deputy HR Director, Workforce And OD
<i>This is informative and conveys the vision and objectives of the Trust well. It portrays pride in what the Trust is about and a recognition of the importance of the key goal of safe, quality care and its value in the staff contributing to this goal. I have an understanding of my responsibilities in this process.</i>	Bereavement Co-Ordinator
<i>Felt like it was thoughtful and bespoke not a tickbox exercise</i>	CAMHS Nurse
<i>Clear and concise information. Efficient use of resources and easy to follow links.</i>	Physiotherapist
<i>I found the publication extremely informative, giving me an excellent insight into the various directorates and departments within SHSCT.</i>	Care Broker
<i>I felt the publication was very well laid put and easy to understand.</i>	Social Worker Case Manager
<i>I felt the Corporate Induction was extremely useful e.g. values/vision of the trust, signposting to services, policies</i>	Occupational Therapist
<i>The publication was extremely informative and very user friendly. Information was easily accessible and instructional videos helped to break up the usual monotony of just reading pages of information.</i>	Driver

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 September.

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. For example, the induction programme includes input from Travellers, Legal Services e.g. BSO and Law Centre etc.

The Southern Trust Social Services Workforce Development and Training Team ensure the implications 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's services.

To further promote transfer of learning from training courses to practice the Social Services Workforce Development and Training Team has introduced action planning at the end of each course which supports staff to identify learning areas and actions they will discuss with their line manager and apply within their work setting. The Action Plan also specifically requires staff to identify application of human rights within their practice.

Training Figures for Reporting Period

Name of Course	Date	Total Number Trained
Professional Induction for Social Work/Social Care Staff and Social Work Students (Equality and Human Rights session)	24/08/2018	36 (includes 30 SW students)
Capacity, Consent and Human Rights	10/10/2018	22
Capacity, Consent, Human Rights and Deprivation of Liberty	07/11/2018	26
Capacity, Consent and Human Rights	04/12/2018	22
Professional Induction for Social Work/Social Care Staff and Social Work Students (Equality and Human Rights session)	14/01/2019	70 (includes 50 SW students)
Positive Futures-Human Rights, Restrictive Practice & Capacity Training	26/02/2019	13
Positive Futures-Human Rights, Restrictive Practice & Capacity Training	05/03/2019	8

Making a Difference eLearning Modules

The official launch date of the new 'Making a Difference' regional eLearning modules took place within the Trust on 6 October 2017 – 'Go Live date'.

These 2 new regional interactive modules take approximately 30 minutes to complete and are scenario based introducing the concepts of equality, good relations and human rights.

During the year under review the Equality Unit continued with the deployment of the new eLearning modules across the Trust. These 2 new modules are now **mandatory** - Part 1 to be completed by all Staff, Parts 1 and 2 to be completed by Managers. The modules are designed by HSC staff for HSC staff.



This new regional resource sets out 'your rights, your roles and your responsibilities' and aims to increase awareness of how committed the Trust is to promoting equality of opportunity, good relations and human rights.

Staff Benefits of 'Making a Difference' eLearning:

- Helps you to Recognise, Respect and Respond to the different needs of people you come into contact with.
- Will enable you to feel more confident and knowledgeable in different situations while furthering personal development.
- The training covers Equality, Good Relations and Human Rights in a range of health care settings.
- The learning is transferable to the hospital ward, the workplace and when engaging with patients, service users and colleagues.
- The programme has been adopted by all organisations across HSC Northern Ireland - ensuring all staff have equality of access to a high quality eLearning programme framed around equality, human rights and good relations.
- The design of the modules is as much about 'Quality' as about 'Equality' – promoting high quality safe services.

Making a Difference – Equality, Good Relations and Human Rights – HSC Staff Training Manual

The training is also supported by a regional training manual, which acts as a useful aid/further resource for HSC staff ([manual](#)). This manual can also be found on SharePoint.

PART A

6	26/7/18	Gilford Community Centre	11	1 hour delivered by Louise
7	28/9/18	Bronte Room, Banbridge THC	17	2 hours delivered by Ray
8	4/10/18	Zest, Day Time Opportunities	10	1 hour delivered by Louise & Ray
9	11/10/18	Day Time Opportunities	10	1 hour delivered by Louise & A.Mallon
10	23/10/18	Win Business Park Newry	17	2 hours delivered by Louise & G.McAvoy
11	9/11/18	Trust Domiciliary Care Staff – STH	28	1 hour delivered by Pam
12	8/11/18	S. Nurse Tandragee Medical Centre	1	2 hours delivered by Pam
13	12/11/18	Men's Carers Group, Banbridge	6	1 hour delivered by Ray
14	28/11/18	Lislea Men's Shed	15	2 hours delivered by Louise & G.McAvoy
15	5/12/19	Fit 4 U Volunteer	1	1 hour delivered by Louise
16	12/2/19	Senior Citizen's Group	20	2 hours delivered by Pam
		Total	200	

Hearing Awareness Training Sessions

329 people received Hearing Awareness training in the reporting period 1 April 2018-31 March 2019.

Hearing Awareness Training Delivered from 01/04/2018 to 31/03/2019.				
Session	Date	Facility / Event	Number of Participants	Duration of Training
1	26/4/18	Win Business Park Newry	20	2 hours delivered by Alison
2	28/9/18	Bronte Room, Banbridge THC	17	2 hours delivered by Eilish
3	3/10/18	Positive ageing event Newry Sports Centre	100	4 hours delivered by Bernarde
4	22/10/18	Promoting Well Being Volunteers	10	2 hours delivered by Bernarde
5	23/10/18	Win Business Park Newry	17	2 hours delivered by Eilish and Bernarde
6	30/10/18	Health and Well Being Event Kilkeel	75	4 hours delivered by Bernarde
7	8/11/18	Children Community Nursing Staff	6	2 hours delivered by Bernarde
8	9/11/18	Trust Domiciliary Care Staff – STH	30	1 hour delivered by Russell
9	12/11/18	Men's Carers group, Banbridge	10	1 hour delivered by Bernarde
10	28/11/18	Lislea Men's Shed	15	Pending X2 hour being delivered by Louise

11	12/2/19	Senior Citizen's Group	20	2 hours delivered by Pam
12	30/1/19	Lisanally House Armagh Staff	9	2 hours delivered by Bernarde
		Total	329	

HIV Awareness Training for Staff

During 2018/19 - 3 HIV and STI awareness workshops were offered to all staff in Q3 and Q4 as part of World AIDS Day awareness. HIV, STI and Hepatitis awareness sessions have been organised for Occupational Health staff and School Nursing staff in April 2019.

Two information stands were facilitated in Craigavon hospital for staff and the public to raise awareness of HIV and AIDS as part of World Aids Day know your status national campaign.

1 staff member became a T4T trainer.

The sessions provide an opportunity to learn more about HIV, raise personal and professional awareness of testing and treatment.

It is important to share the learning with work colleagues, family and friends as it is through knowledge that fear is eliminated ensuring that those requiring health services are treated with dignity and respect.

Learning Disability Awareness Training

In September 2018, following the success of the drop in events, over 50 staff from Daisy Hill and Craigavon Area hospitals participated in a morning of learning disability awareness training as part of the Southern Trust's drive to promote Mencap's 'Treat Me Well' campaign. Nursing, 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, Mencap and the Public Health Agency shared their expertise with hospital colleagues; a service user and two carers gave their perspective of bringing an adult with a learning disability to hospital; and Speech and Language Therapists were on hand to teach some Makaton signs.

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* was developed and commenced implementation during the current reporting period to support the new **Regional Recruitment & Selection Framework** referred to at 1.1 of this year's report. The Framework has been developed through the collective efforts of key stakeholders from across the HSC.

During the reporting period April 2018 to March 2019 the following staff undertook on-line Selection and Recruitment Training in the SHSCT.

Module	No of Completions during April 2018-March 2019
R&S Regional eLearning Module*	327
R&S Full eLearning Module	139
R&S Refresher eLearning Module	144

Personal and Public Involvement Awareness

Personal and Public Involvement (PPI) training continues to be delivered across the Trust, at team meeting level and as part of core induction. An extensive range of PPI tools have been developed to support staff with the effective roll out of its PPI and Section 75 equality duties and to further enhance and develop the skills and confidence of staff. Service users and carers are involved in the design, delivery or evaluation of PPI training.

There follows summary details of the level of PPI related training delivered during the current reporting period:

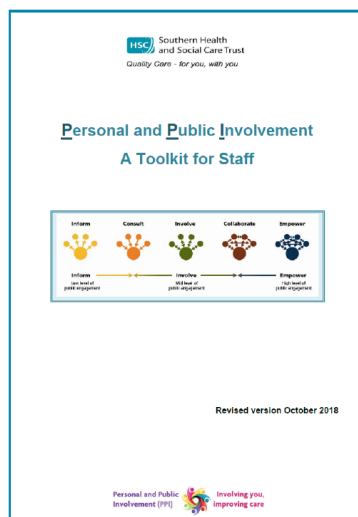
During 2018/19 a total of **700** staff **completed PPI Awareness E-Learning**

- A further **72 staff and 81 students** completed **face to face PPI Awareness** delivered to staff teams and at Student Social Work core induction
- A total of **9 staff** completed the PHA's **PPI Leading in Partnership** programme
- An additional **3** completed the HSCB's **Involving People** programme
- This brings the **overall total** of Trust staff now trained **in PPI awareness to 4,037** which is **more than a quarter of the work force**
- A further **309 staff completed** other training to support PPI including: The Patient Client Experience and Every Conversation Matters
- In addition **433 staff completed** other relevant training such as: Admin Development, Best Practice for Effective Meetings and a range of management and leadership programmes

Work has commenced on the co-design and delivery of a skills pathway for service users and carers. This is due to be piloted by autumn 2019.

Southern Trust's revised Personal and Public Involvement Toolkit

The Trust continues to build on the effective community development and strong Personal and Public Involvement (PPI) approaches that are already well established to support its quality improvement journey embracing 'co-production' as the pinnacle of the engagement and involvement process.



This PPI Toolkit aims to provide staff and managers with information and guidance to promote and enhance personal and public involvement within their area of service.

This replaces the Trust's PPI Toolkit (2010) which was very well received and has been used in the development of regional PPI training resources.

Quality Improvement eLearning

Improving quality is about making our services safe, effective, patient centred, timely, efficient and *equitable*. The aim of this eLearning module is to introduce the learner to concepts of Quality Improvement. The Introduction to Quality Improvement is a free, online resource available to all Southern Trust employees. It contains a number of downloadable resources and case studies to support our staff on their QI journey.

NI HSC Interpreting Service (NIHSCIS) – High Quality Safe Services

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, clients and staff to communicate when using services.

Interpreters are provided and funded regionally through the NI HSC Interpreting Service. Interpreters are professionally trained and adhere to the Business Services Organisation's Terms of Engagement which outline the Interpreters key roles and responsibilities when undertaking work through NIHSCIS.

Interpreters are bound by confidentiality and provide their services on a 24/7 basis.

Demand for Interpreting continues to increase on an annual basis with over 130,000 requests for Interpreters processed during 2018-19 and 98.3% of bookings successfully fulfilled. 57,289 (44.06%) of requests were from the Southern Trust area.

- 18 OCN Level 4 Trained Interpreters registered in October 2018 to target priority languages including Arabic, Bulgarian, Farsi, Somali and Romanian.
- 19 OCN Level 4 Trained Arabic Interpreters registered in February 2019 to meet demand for Syrian Patients under the UK Government's Syrian Refugee Resettlement Scheme.

Professional Development Training for Interpreters

The NIHCIS organised the following training sessions for interpreters:

- 5 day Health Specific Conversion Course delivered in September 2018 and January 2019 for new Interpreters who completed the OCN Level 4 certificate, with other Agencies, but wanted to register with NIHCIS. The training included sessions delivered by HSC Practitioners from Mental Health, Gateway, Lifeline, Speech and Language Therapy and Women's Aid.

Training Resources

A number of in-house leaflets and documents have been produced to increase staff awareness of equality and diversity matters and to promote cultural competence e.g. Multi-Cultural and Beliefs Handbook, Cultural Diversity and Etiquette Booklet, Irish Traveller Information Booklet, Disability Etiquette Booklet, Making Communication Accessible for all, PPI Fact sheet on 'Working with Hard to Reach Groups', Carer and Stakeholder Reimbursement Guidelines and Procedures and PPI Toolkit to support staff in promoting inclusive user involvement. Some of the aforementioned resources were reviewed and updated during the current reporting period and are featured elsewhere in this Annual Progress Report.

During the year under review work was completed on the review of the Trust's Irish Traveller Information booklet for staff. The booklet aims to increase staff awareness of Traveller culture and enable staff to provide culturally sensitive services. The re-launch of this booklet is being picked up and utilised across the region.

As evidenced through this year's report, there are a range of initiatives which reflect and build upon the patient/client standards and underpin the Trust's core values which have been founded on the principles of equality and diversity i.e. treating people with dignity and respect, protecting their privacy, communicating in a manner that is sensitive to their needs, and showing professional and considerate behaviour toward patients, clients and staff at all times.

There are also a number of supporting policies/procedures/guidelines that relate to equality and diversity, namely the Trust's recently revised Equality, Diversity and Inclusion Policy and Regional Policy for Dealing with Conflict, Bullying and Harassment in the Workplace. Other examples include the Trust's Harmonious Working Environment Guidelines and Joint Declaration of Protection all of which are kept under review in line with Fair Employment and Treatment (NI) Order and evolving legislation and case law developments.

- 25 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:

Examples of Training Sessions that have worked well:

Training for Service Users

The Southern Trust is the first Trust in Northern Ireland to offer accredited quality improvement training for service users, carers, voluntary and community sector partners.

The OCN NI Level 3 Award in Quality Improvement has been designed to develop the knowledge and skills of anyone who would like to get involved in improving health and social care services.

Aldrina Magwood, Director of Performance and Reform for the Southern Trust explains: "*We hope that this new qualification helps to give more service users and community and voluntary representatives the confidence to work in partnership with our staff, to share their views and help us shape services.*"



Services Users and Voluntary Sector staff pictured with their Quality Improvement Award Level 3 Certificates.

Developing Mental Health Services

A new programme to help mental health service users and carers to get involved in shaping services is now available in the Southern Trust.

The programme and a toolkit of supporting materials were developed by Elaine Fogarty, Secretary of the Mental Health Forum and a service user herself.

It is the first of its kind in Northern Ireland specifically designed to build the skills and confidence of service users and carers who would like to share their lived experience to improve mental health services.

Elaine explains: *“Co-production between those who deliver services and those who use them is at the heart of the planning and delivery of mental health services throughout the Southern Trust.”*

“We are continually trying to recruit service users and carers to work with the Trust and share their expertise to help improve services, and appreciate that not everyone will feel they have the confidence or ability to participate in this way.”

“By offering structured support and mentoring, we hope that this programme helps to build the capability of more service users and carers to get involved making a meaningful difference whilst also supporting staff in developing their own co-production skills.”

“The experience of co-production helping to make an impact for other service users is one of the most rewarding outcomes emerging through my own personal Recovery so I would encourage anyone with lived or caring experience to get in touch to see how they too may be able to share their journey in a positive way.”



The Mental Health Forum was established in 1993 and is now the official voice of the Lived Experience community within the Southern area. The Forum provides advice, information and signposting for service users, carers, professionals and the general public about mental health services throughout the Trust.

New Dementia Care Technology for Gillis

Staff at the Gillis Memory Centre in Armagh have installed the very latest technology to help patients with dementia. Gillis Memory Centre is the dementia inpatient assessment unit for the Southern Trust based on the St Luke’s Hospital site.



The ‘Magic Table’ is an award-winning innovation, aimed at helping people in the later stages of dementia to be more active and responsive. Through a series of interactive games including gardening, fishing and popping balloons - players are encouraged to reach out and respond to the light which is projected on to a table.

“Our patients are getting really good physical and mental stimulation out of the games. The table is brilliant for triggering reminiscence, promoting social interaction and an overall sense of enjoyment.” ...Siobhan Donaghy, Head of the Southern Trust Memory Service.

Two local families, the Newports from Dungannon and the Boyds from Portadown raised over £7,000 for the Centre to buy the equipment, through a number of fundraising events including quizzes, raffles, a run and a cycle.

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

- 26 Please list **any examples** of where monitoring during 2018-19, across all functions, has resulted in action and improvement in relation **to access to information and services**:

Example of improvements in Access to Information and Services include:

New electronic letters improving patient discharge

Craigavon and Daisy Hill Hospitals have introduced a new electronic way to send important patient information to GPs much more quickly.

The Southern Trust was the first in Northern Ireland to introduce an electronic system to improve safety and timeliness of discharging patients from its acute hospitals. The system has now been developed further, to generate immediate patient discharge letters which are sent directly to GPs.

Mark Toal, Head of Technology Innovation for the Southern Trust explains how this is a huge benefit for administration: *“Our administrative team creates over 25,000 patient information letters each month including outpatient clinic appointments, results or detailed discharge letters which are sent to GPs. Previously these had to be posted, which was time consuming, could lead to delays in GPs receiving results and there was always a risk of letters getting lost in the post.*

“The new system now transfers the discharge information immediately to the GP, significantly reducing time delays, providing a full delivery trail and reducing printing costs.”

The electronic discharge letter is also a real improvement in terms of patient safety as Rose McCullagh Southern Trust Associate Medical Director for Primary Care says:

“Since it was originally introduced, the E discharge system has continually been improving the accuracy and quality of information that GPs receive. The automatic discharge letter is another much welcome development in the interests of patient safety by improving the transfer of information between hospital and primary care.



“GPs are now aware of changes to medication or any follow up required for their patients in a more timely way so we can improve their ongoing care in the community. The medication section clearly outlines the prescription on discharge and any reasons for these changes. The electronic format greatly reduces the risk of error in interpreting

discharge information and it is now available as soon as the patient leaves hospital, helping to ensure that patients receive the best possible care.”

Patients also continue to receive a paper copy of the discharge letter for their own information but will be glad to know that they no longer will have to deliver a copy to their GP.

New Patient Monitoring System

The Trust has invested in a new patient monitoring system that helps to improve safety for the most acutely ill patients in hospital.

The new Patient Monitoring System has been installed in Craigavon Area Hospital's Intensive Care Unit (ICU) and within the Recovery Ward for High Dependency patients.

Gayle Hobson, Staff Nurse, ICU says "*The new information system allows a more holistic approach to patient care , it pulls together the information/input from the multidisciplinary team into one place and leads the way for safer and more efficient care of these patients.*"



Pictured are: Gayle Hobson and Julie Elliott, Staff Nurses who configured and rolled out the system in Craigavon ICU department with Martin Murphy – IT Project Manager; Dermot Hughes, Healthcare Informatics and Education Manager at Cardiac Services and Chris Clarke, Anaesthetics Consultant

Midwives develop resources to improve patient experience during hospital admission



Smoking Cessation Specialist Midwives Ursula Gaffney and Melissa Strain have completed a Quality Improvement project that aims to improve access to Nicotine Replacement Therapy (NRT), supporting patients who may require it during their hospital admission.

Dr Paul McMullan said: *“Transitioning from adolescence to adulthood is a huge step for anyone and we want to make sure that we prepare our young people as best we can.”*

Lurgan Deaf Club Creates Books for Visually Impaired Children

Members of Lurgan Deaf Club have created specially designed tactile books for local children who are visually impaired. The group wanted to use their time to produce something that would be of value to others.

The Southern Trust’s Sensory Disability Team identified three children who would benefit from the books and worked with their families to understand the children’s interests.



Artist Jill McKeown then worked with the Deaf Club members to produce three bespoke books, one for each child. Jill said: *“I found this a very interesting project to work on as we had to consider all aspects of communication. As we were working specifically to meet the needs of three individual children we really wanted their experience to be special and are delighted with the feedback we received. It was lovely to hear the books have given the children such a positive experience.”*

Eleanor Girvan mum of Nessa said: *“The different textures and colours and shine really stimulated Nessa and she really enjoyed the book.”*

Ben Sterritt’s mum Ann added: *“The book is amazing and a lot of work has gone into it. Ben loves it – he loves feeling the shapes and texture and enjoys when I read it to him.”*

Meadbh Bustard, mother of Cara commented: *“Cara loved the sensory aspect of the book touching and feeling it. She loves balloons and numbers and as the book was designed especially with her in mind she really enjoyed it.”*

Pat McAteer, Specialist Services Manager at the Southern Trust, says: *“We have a very active Deaf Club who work together to raise awareness of the needs of and reduce isolation amongst the deaf community. Because of their own communication challenges, our deaf club members have great empathy for this group of visually impaired children and we sincerely thank them for their thoughtfulness in creating such beautiful interactive books which are bringing great enjoyment.”*

The project was funded by the ‘The Northern Ireland Executive Social Investment Fund (SIF) Southern Zone ‘Work It’ training and employment programme.’

Learning Disability Week ‘Treat me well’ Campaign

‘Treat me well’ is Mencap’s new campaign to transform how the NHS treats people with a learning disability in hospital.

To raise awareness of Learning Disability Week 2018 (18–24 June) the Trust’s [Accessible Information Strategy Group](#) co-ordinated a number of campaigns along with Learning Disability community staff, Promoting Wellbeing and service users. During the week three friendly hospital drop-in events were organised across the Trust area in Daisy Hill Hospital, South Tyrone Hospital and Craigavon Area Hospital.

Physical Disability Information Day

The Trust’s Craigavon & Banbridge Physical Disability Team hosted an information day for people with physical disabilities and for people who would like to support them. The event at the Jethro Centre in Lurgan was well attended and provided information on support, activities available in the local area and tips on how to avoid feeling isolated and lonely.



Improving Information for Mental Health Service Users



A new series of *information leaflets* are now available to help people using mental health services in the Southern Trust area. The Trust, in collaboration with our service users, has been at the forefront in Northern Ireland for co-producing such information. The set of **14 leaflets** aims to offer mental health service users help and support in a user friendly way.

The leaflets cover many of the wide range of services available including community addictions, eating disorders, inpatient services, supported living, home treatment and recovery.

The information was developed in response to feedback from service users as Carmel Harney, Interim Director of Mental Health and Disability Services for the Southern Trust explains: “*We are continually trying to improve our services and are delighted to team up with our Mental Health Forum to improve the information we have available to service users.*”

“Effective communication and offering the right information at the right time can have a huge influence on a person’s wellbeing and recovery, so we are delighted to now have such a comprehensive set of leaflets to complement the expertise and support offered by our staff.

“I would like to thank all of our teams and service users who have put so much effort into producing this high quality resource and hope that we will be able to develop it to include more service areas in the future.”

The Mental Health Forum is the official voice of service users in the Southern area, working closely with the Trust to improve mental health services.

The information leaflets will be available to service users when they are referred to services. They are also available from www.thementalhealthforum.co.uk

A Welcome Guide - CAMHS

The Health and Social Care Board and the Public Health Agency this week launched “Working Together: A Pathway for Children and Young People through CAMHS”, a care pathway for children and young people coming to Child and Adolescent Mental Health Services (CAMHS) in Northern Ireland.

The regional CAMHS Pathway is accompanied by “Welcome to Child and Adolescent Mental Health Services: A Guide for You” which gives children and young people and their families or other carers information about CAMHS.

The Welcome Guide is written by, and for, young people who have personal experience of using CAMHS services. A big thank you was extended to the young people who worked with the health and social care professionals for their much valued contribution to the production and design of the CAMHS resources.

Host of the event, Naomi Lloyd, CAMHS Youth Adviser, said: *“Today’s event is a great example of co-production. Working Together offers detailed information about Child and Adolescent Mental Health Services including the values and principles of CAMHS and the steps of care to expect. Ultimately it highlights the importance of young people and their families working together with professionals to help young people get better.*

“I was personally involved in the development of the Welcome Guide and could draw on my experience of CAMHS to explain what is helpful to young people and to ensure that the language used is young people friendly. The involvement of young people and CAMHS youth advisers like myself, with personal experience of CAMHS, ensures we help get the message across that getting treatment or care for a mental illness is not anything to be ashamed of. Whilst recovery is tough, there is hope for a better future free from the illness, if you keep fighting the illness and listen to the people who want to help you.”

The Working Together Pathway for Children and Young People through CAMHS outlines what should be expected when referred for treatment. It provides a summary of clinical advice for all sectors of the service derived from evidence

based practice. It also includes information about accessing support before, during and after treatment.

Chris Matthews, Department of Health, welcomed the publication of the CAMHS pathway, saying: *“Today’s launch marks a significant milestone in the journey of CAMHS. I am especially delighted to be able to launch the pathway alongside the young people here today who were instrumental in its development and design. The rationale and core purpose for the pathway is to support better integrated working and seamless care based on need. The engagement of young people with lived experience and their families, in the design of CAMHS through co-production, maintains a strong emphasis on ensuring children, young people and their families are fully involved in all decisions about their care and treatment and can make informed choices.”*

Cecil Worthington, Director of Social Care and Children at the Board said: *“Our approach to co-production is about working with people in new ways. We recognise that this involves finding ways to involve people in having a say in the planning of our services and in how they should run. This approach is a challenging one and one that takes us on a shared journey to make co-production real. The development of this pathway and guide demonstrates our commitment to working together to improve young people’s experience of care. Through engagement from the outset we underline the importance of personalisation of support and ensure that we stay centred on the impact and benefits of our services for children, young people and their families.”*

Contributors from the Southern Trust ID CAMHS Team pictured at the regional launch



Hello my name is Day



Tuesday 23 July was international ‘hellomynameis’ day! Health and social care staff took the opportunity to remind themselves of the importance of doing their best to ensure that patients and clients always have a positive experience in their care <https://hellomynameis.org.uk/>

New Relatives’ Room for Daisy Hill

Thanks to generosity from the Friends of Daisy Hill Hospital, a new relatives’ room has been opened on the fifth floor.

The Meadows Room, which is on the Medical floor of the hospital, offers a comfortable, private space for staff to discuss a diagnosis with carers or for families who have been bereaved.

The Friends of Daisy Hill Hospital have been fundraising for 58 years and during this time have donated thousands of pounds towards improvements and equipment throughout the hospital.

Welcoming the opening of the new room, Kay Carroll, Head of Service for Medicine for the Southern Health and Social Care Trust said: *“We aim to support families as best we can when discussing a prognosis or sharing news that their loved one has passed away.”*

“The Meadows Room now offers a private space for families to take some time out, away from the clinical environment of the ward.”

“We sincerely thank the Friends of Daisy Hill for helping us to create such a lovely, tranquil environment. The comfortable furniture, beautiful artwork and great view, will offer a welcome escape during a difficult time.”

“On behalf of all our staff throughout the Trust, we would like to pay tribute to the Friends for their tireless commitment to improving the experience of patients and families during their time at Daisy Hill.”



Health and Wellbeing Room

A new Health and Wellbeing Room was opened off the main corridor beside the Direct Assessment Unit, Daisy Hill Hospital where patients, visitors and staff can drop in for a range of information and advice.

Polish Delegation Visit Kilkeel Primary Care Centre

Michelle Farrell, Facility Co-ordinator at Kilkeel Primary Care Centre was delighted to welcome the Polish Foreign Minister Mr Pawel Majewski to the centre along with Honorary Polish Consul Mr Jerome Mullen. They met with one of the Polish GPs Dr Jadcak with some of his ***Polish patients and staff to hear about living and working in the area.***



HSC Recruitment website updated – Job Search More Accessible



After listening to feedback from users, a regional group of senior HSC Recruitment Managers has worked with the Business Services Organisation to improve the HSC recruitment website. The process of searching for job opportunities in HSC is more **user friendly and fully accessible to all users on desktop, tablet and mobile devices**. Social media buttons have been added so job advertisements can easily be shared with friends, families and colleagues.

As part of this update the website has changed to [Jobs.hscni.net](https://jobs.hscni.net) and anyone going to www.HSCRecruit.com will be automatically redirected to this new address.

Parking Enforcement

Parking enforcement to protect drop off zones, disabled spaces and emergency access has now been in place at Craigavon and Daisy Hill Hospitals for a number of months.

A licensed car parking contractor 'The Parking Enforcement Agency' regularly patrols Craigavon and Daisy Hill sites and issues Parking Charge Notices to drivers parked inappropriately.

Enforcement aims to deter people from parking inappropriately, help to improve congestion and provide a safer, more accessible environment for everyone, including persons with a **disability**.

Written Translations

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

- Patient Information Leaflet for Moviprep Sachets (a bowel cleanser) in Polish, Lithuanian and Portuguese.
- Patient Information Leaflet for Dental Pain Relief in Arabic, Lithuanian and Polish.
- Patient Information Leaflet on Blood Transfusions translated into top 10 languages.
- Patient Information pack on epilepsy.

Complaints (Model Equality Scheme Chapter 8)

27 How many complaints **in relation to the Equality Scheme** have been received during 2018-19

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:

Minor changes were made to the Trust's Equality Scheme to reflect organisational change, staffing numbers and population profile. No material changes were made to the Scheme. The proposed changes were discussed with the Equality Commission and it was agreed that the changes did not necessitate formal consultation.

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)*

- Implementation of the Trust's Equality Action Plan covering the period 2018-2023 – Year 2 action measures along with actions rolled over from year 1.
- Implementation of the Trust's Disability Action Plan covering the period 2018-2023 – Year 2 action measures along with actions rolled over from year 1.
- 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 new '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
- Finalisation of new Equality Screening and associated Guidelines Tool Kit for managers.
- Review of Section 75 training materials in association with above.

PART A

- Collaboration with DoH and all ALBs in Brexit planning, monitoring and review arrangements.
- 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 establish 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 (2018-19) reporting period? *(please tick any that apply)*

- Employment
- Goods, facilities and services
- Legislative changes
- Organisational changes/ new functions
- Nothing specific, more of the same
- Other (please state):

Age GFS legislation is awaited and will extend protection from age discrimination into the sphere of Goods, Facilities and Services provision. Gender Pay Gap Reporting exploratory work - legislation not yet enacted due the lack of a local Assembly.

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.