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

Equality, Good Relations and Human Rights Screening Template

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

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

(1) Information about the Policy/Proposal

(1.1) Name of the policy/proposal

The Management of Nurse Led Clinics for Patients with Renal Stone Disease

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

New

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

The purpose of this policy is to set a minimum standard for a Urology Clinical Nurse Specialist (CNS) to provide a clinical service for urology stone patients.

It takes account of the current statutory and legal requirements including best practice guidelines and should be read in conjunction with these policies as listed within this document.

The establishment and continuance of a nurse-led stone service aims to improve cost effectiveness and efficiency as it will gradually reduce the time spent by senior clinicians on following up on all stones patients as is currently. This creates more efficiency within the service as senior clinicians can focus their time more on dealing with complex stone patients.

Through implementation of this policy the Trust aims to ensure:

- Robust governance arrangements are available to support the ongoing development, maintenance and review of Urology CNS led services at directorate and service level
- Patient experience will be improved through reduction of delays in the assessment and treatment process thus managing capacity and demand more effectively.
- Excellence in care is promoted and delivered using evidence based guidance to underpin practice.
- Stones assessment and review follows agreed protocols which can promote audit and benchmarking assessments.

Objectives of this Policy

The objectives of this guideline are to improve and maintain standards of clinical practice and quality of care by:

- Providing evidence based guidance for establishing and maintaining a nurse-led clinic for the assessment of patients with stable stone disease.

- Provision of a framework which practitioners undertaking the clinic can utilise to develop knowledge and expertise alongside.
- Criteria is agreed and outlined for those patients who are suitable for CNS follow up.
- Identification of competencies needed to undertake clinic and any other support required to achieve same.
- Promotion of audit of the service.
- Outlines the pathway into the service and the management of patients; as well as the trigger points which necessitate consultant/ MDT input.
- To aid the development of local guidelines for stone patient management.
- The patient will remain under the care of a named Consultant Urologist identified at the time of triage.

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

All individuals covered by Section 75 would be expected to benefit from this policy. This guideline will benefit all users of the service and specifically those within the disability category.

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

Southern Health and Social Care Trust Policy- implemented by managers and staff.

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

The Coronavirus Pandemic could lead to delays in the implementation of the proposed policy and service step-downs.

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

Internal stakeholders include Urology Clinical Nurse Specialists who run the clinic; Consultant Urologists who refer into the clinic. This also includes booking and staff in supportive roles.

External stakeholders: Service users and their families.

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

- NICE (2019). Renal and ureteric stones: assessment and management [NG 118]. https://www.nice.org.uk/guidance/ng118
- EAU (2021) EAU Guidelines on Urolithiasis. (EAU Guidelines. Edn. presented at the EAU Annual Congress Milan 2021. ISBN 978-94-92671-13-4.) https://uroweb.org/wp-content/uploads/EAU-Guidelines-on-Urolithiasis-2021-V2-1.pdf
- Trusts Approved Equality Scheme
- Section 75 of the Northern Ireland Act
- UN Principles for Older People
- Department of Health, Social Services and Public Safety: Safeguarding Vulnerable Adults, Regional Adult Protection Policy and Procedural Guidance
- Disability Discrimination Act (1995)
- Human Rights Act (1998)
- Health and Safety Legislation [Duty of Care]
- PPE Guidelines
- Coronavirus Act 2020
- Information Governance Policy (2018)

(2) Available evidence

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

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

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

2.2 Southern Trust's Area Population Profile – Census 2011

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

(3) Needs, experiences and priorities

(3.1) Taking into account the information above what are the different needs, experiences and priorities of each of the Section 75 categories and for both service users and staff.

Section 75 Category	***Details of Needs, Experiences and Priorities***	
	Staff	***Service Users***
Gender	This is a clinical policy and will in the main affect service users. It is not envisaged by implementing such guidelines that there will be a negative effect on the staff delivering the service.	Patients of all genders will be able to avail of this service.
Age	This is a clinical policy and will in the main affect service users. It is not envisaged by implementing such guidelines that there will be a negative effect on the staff delivering the service.	Adults/ Patients over the age of 18 will be supported by this service. Under 18's will continue to be managed by consultant urology team/ paediatric team.
Religion	This is a clinical policy and will in the main affect service users. It is not envisaged by implementing such guidelines that there will be a negative effect on the staff delivering the service.	These guidelines have been written to meet the needs of all service users regardless of religious background.
Political Opinion	This is a clinical policy and will in the main affect service users. It is not envisaged by implementing such guidelines that there will be a negative effect on the staff delivering the service.	These guidelines have been written to meet the needs of all service users regardless of political opinion.
Marital Status	This is a clinical policy and will in the main affect service users. It is not envisaged by implementing such guidelines that there will be a negative effect on the staff delivering the service.	These guidelines have been written to meet the needs of all service users regardless of martial status.
Dependent Status	This is a clinical policy and will in the main affect service users. It is not envisaged by implementing such guidelines that there will be a negative effect on the staff delivering the service.	These guidelines have been written to meet the needs of all service users regardless of dependency status.
Disability	This is a clinical policy and will in the main affect service users. It is not envisaged by implementing such guidelines that there will be a negative effect on the staff delivering the service.	These guidelines have been written to meet the needs of all service users regardless of disability. Efforts will be made on an individual basis to ensure all patients get the most out of each appointment taking account of their specific needs.
Ethnicity	This is a clinical policy and will in the main affect service users. It is not envisaged by implementing such guidelines that there will be a negative effect on the staff delivering the service.	These guidelines have been written to meet the needs of all service users regardless of ethnicity.
Sexual Orientation	This is a clinical policy and will in the main affect service users. It is not envisaged by implementing such guidelines that there will be a negative	These guidelines have been written to meet the needs of all service users regardless of sexual orientation.

Section 75 Category	Details of Needs, Experiences and Priorities	
	Staff	Service Users
	effect on the staff delivering the service.	

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

This policy was reviewed by the Urology Stone Team including Speciality Doctors and Consultant Urologists. It was also shared with the wider clinical team via the Urology Department Business Meeting, Head of Service and Lead Nurse.

Service users are able to decline referral to the nurse led service without any detrimental impact upon their care.

(4) Screening Questions

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

(4.1) What is the likely impact of equality of opportunity for those affected by this policy/proposal, for each of the Section 75 equality categories?			
Section 75 category	***Details of policy/proposal impact***		***Level of impact? Minor/major/none***
	Staff	***Service Users***	
Gender	N/A- Will not affect any staff groups	This service will improve the care of all patients regardless of gender. It will allow more rapid follow up of patients than a consultant model can allow owing to long waiting lists.	Minor - Positive
Age	N/A- Will not affect any staff groups	This policy will benefit those over 18 only. This is due to the nursing staff providing the clinic being adult trained and paediatric patients being more complex thus requiring consultant level management.	Minor - Positive
Religion	N/A- Will not affect any staff groups	This service will improve the care of all patients regardless of religion.	Minor - Positive
Political Opinion	N/A- Will not affect any staff groups	This service will improve the care of all patients regardless of political opinion.	Minor - Positive
Marital Status	N/A- Will not affect any staff groups	This service will improve the care of all patients regardless of marital status.	Minor - Positive
Dependent Status	N/A- Will not affect any staff groups	This service will improve the care of all patients regardless of dependency status.	Minor - Positive
Disability	N/A- Will not affect any staff groups	This service will improve the care of all patients regardless of disability. Where required all efforts will be made to facilitate the most fulfilling experience for those with a known disability.	Minor - Positive
Ethnicity	N/A- Will not affect any staff groups	This service will improve the care of all patients regardless of ethnicity.	Minor - Positive
Sexual Orientation	N/A- Will not affect any staff groups	This service will improve the care of all patients regardless of sexual orientation.	Minor - Positive

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

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

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

(5) Consideration of Disability Duties

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

As part of audit and quality improvement, regular feedback will be sought from service users to ensure needs continue to be met.

The Trust is committed to ensuring it meets its obligations within the Disability Discrimination Act 1995 and the United Nations Convention on the Rights of People with Disabilities.

All patient feedback for this service will be collated to assess to identify any ways through which this aspect could be promoted better. Adaptations to provision of service to allow patient to engage better will be visited when required.

The Trust has a number of policies/ plans in place including a Disability Action Plan as well as staff training; aimed at encouraging disabled people participation in public life and promoting positive attitudes towards disabled people including staff with disabilities.

The Trust is committed to Equal Opportunities.

(6) Consideration of Human Rights

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

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

Article	Positive impact	Negative impact = human right interfered with or restricted	Neutral impact
Article 2 – Right to life			x
Article 3 – Right to freedom from torture, inhuman or degrading treatment or punishment			x
Article 4 – Right to freedom from slavery, servitude & forced or compulsory labour			x
Article 5 – Right to liberty & security of person			x
Article 6 – Right to a fair & public trial within a reasonable time			x
Article 7 – Right to freedom from retrospective criminal law & no punishment without law			x

Article	Positive impact	Negative impact = human right interfered with or restricted	Neutral impact
Article 8 – Right to respect for private & family life, home and correspondence.			x
Article 9 – Right to freedom of thought, conscience & religion			x
Article 10 – Right to freedom of expression			x
Article 11 – Right to freedom of assembly & association			x
Article 12 – Right to marry & found a family			x
Article 14 – Prohibition of discrimination in the enjoyment of the convention rights			x
1st protocol Article 1 – Right to a peaceful enjoyment of possessions & protection of property			x
1st protocol Article 2 – Right of access to education			x

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

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

Ongoing Human Rights Awareness Training and staff completion of 'Making a Difference'- Equality, Good Relations and Human Rights e-learning training. Considering human rights aspects as an integral part of the Trust's decision making processes and in this instance policy development, implementation and review.

As part of audit and quality improvement, regular feedback will be sought from service users to ensure needs continue to be met.

(7) Screening Decision

(7.1) Given the answers in Section 4 of this template, how would you categorise the impacts of this decision or policy/proposal?

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

Minor impact	X Positive	Mitigation Required	Alternative Policy Required
			No

No impact		**Screened Out**

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

This policy will have a positive impact upon all service users referred. It will allow a more timely review of patients presenting with stone disease.

As this service is delivered by a Urology CNS, service users may experience a reduction in waiting times for appointments as Consultant time will be released to review more complex cases.

(7.3) Do you consider the policy/proposal needs to be subjected to ongoing screening?

Yes	
No	x

(8) Monitoring

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

As part of audit and quality improvement, regular feedback will be sought from service users to ensure needs continue to be met.

Regular feedback and appraisal of same will allow time to reflect on any identified issues/ successes in regards to the above noted topics.

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Policy/proposal screened by:	**Jason Young**

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