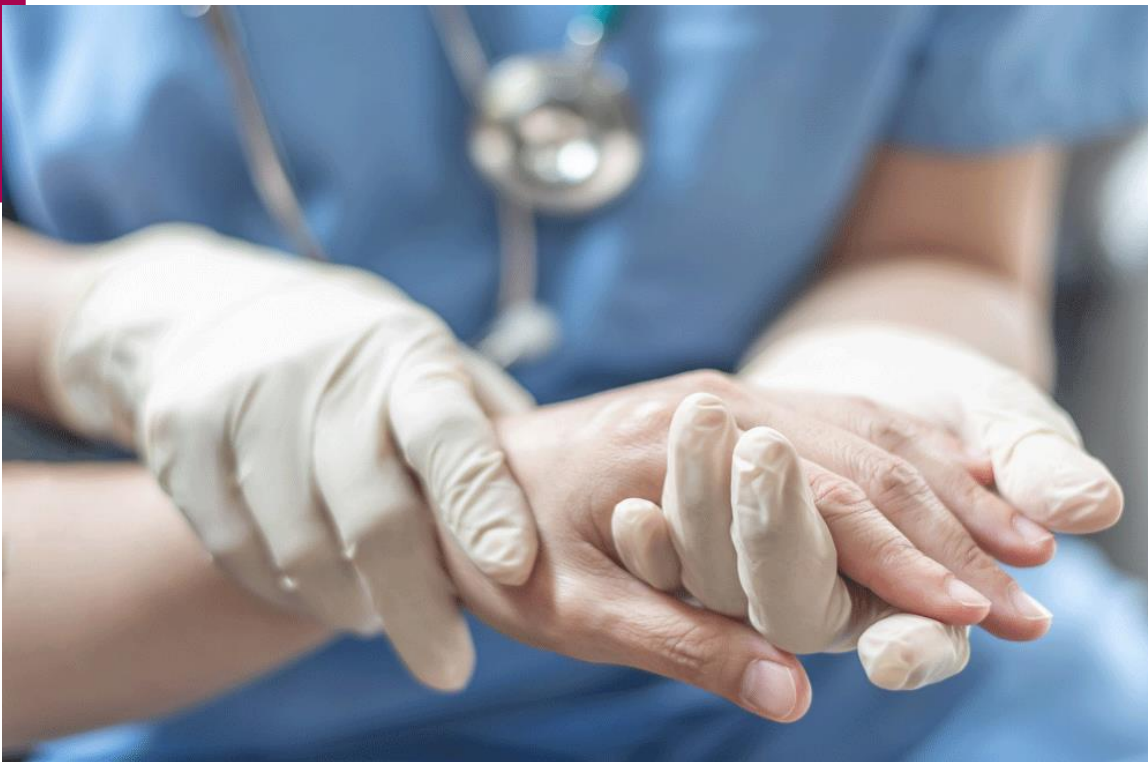




Southern Health
and Social Care Trust

Quality Care - for you, with you

PROVISION OF EMERGENCY GENERAL SURGERY IN SOUTHERN HEALTH AND SOCIAL CARE TRUST EQUALITY IMPACT DOCUMENT



Future provision of Emergency General Surgery

**This document is available on request in alternative
formats, see page 7 for contact details**

An Equality Impact Assessment

**This EQIA should be read in conjunction with the Trust's accompanying
consultation document**

Consultation from 27 January 2023 until 21 April 2023

This document can be made available on request in alternative formats.

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1.0 Introduction

This Equality Impact Assessment (EQIA) has been prepared by the Southern Health and Social Care Trust (SHSCT) to assess the impact of the proposed future provision of Emergency General Surgery (EGS) within the Southern Trust.

An EQIA is an in-depth analysis of a proposal to determine the extent of the impact on equality of opportunity for the 9 equality categories under Section 75 of the Northern Ireland Act 1998. This EQIA has been made available as part of a formal consultation and the Trust welcomes your views.

This EQIA should be read in conjunction with the Trust's accompanying consultation document: 'Future Provision of Emergency General Surgery within Southern Health and Social Care Trust'.

The consultation period will last for a period of 12 weeks. The closing date for submission of comments is Friday 21 April 2023.

Copies of all our documents are available on our website:

<https://southerntrust.hscni.net/involving-you/consultations/>

2.0 Statutory Context Section 75 NI Act 1998

Section 75 of the Northern Ireland Act 1998 requires the Trust, when carrying out its work, 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.

The Trust must also have regard to the desirability of promoting good relations between persons of different religious belief, political opinion or racial group. The Trust's Equality Scheme (Approved by the Equality Commission for Northern Ireland in September 2011 and revised in June 2018) sets out its management arrangements for ensuring its statutory equality duties, as described above, are implemented effectively and on time.

The Trust has given a commitment in its Equality Scheme to apply the tool of equality screening to all new and revised policies/proposals as an integral part of the development process and where necessary and appropriate to subject new policies/proposals to an equality impact assessment (EQIA). The primary function of an (EQIA) is to determine the extent of any differential impact of a policy/proposal upon the 9 Section 75 categories and to determine if the differential impact is an adverse impact. An EQIA can assist in decision-making and improve policy making by adding to the evidence base available.

Human Rights

The Trust is committed to the promotion of human rights in all aspects of its work. The Human Rights Act gives effect in UK law to the European Convention on Human Rights and requires legislation to be interpreted so far as is possible in a way which is compatible with the Convention Rights. It is unlawful for a public authority to act incompatibly with the Convention Rights. The Trust will make sure that respect for human rights is at the core of its day to day work and is reflected in its decision making process. In so doing, the Trust is mindful of the impact of this proposal in relation to Article 2 and Article 8 rights.

Disability Duties

The Trust when carrying out its function must have due regard to the need to:

- Promote positive attitudes toward disabled people; and
- Encourage participation of disabled people in public life

(The Disability Duties)

The Trust will ensure that the disability duties are reflected in the decision making process around the proposal for the future of Emergency General Surgery in Daisy Hill Hospital.

EQIA Process

In keeping with the commitments in its Equality Scheme the Trust carried out an initial equality screening in relation to this proposal. The screening outcome was to progress to a full EQIA. A copy of the equality screening, this EQIA and a consultation report are available on the Trust's website <https://southerntrust.hscni.net/involving-you/consultations/>

Amongst the considerations listed by the Equality Commission for NI in **favour** of conducting an EQIA are:

- The policy is significant in terms of its strategic importance;
- Further assessment offers a valuable way to examine the evidence and develop recommendations in respect of a policy proposal about which there are concerns amongst affected individuals and representatives.

The Trust believes it is appropriate in this instance to conduct a full EQIA in order to fully assess the equality and human rights implications of this proposal. In so doing the Trust has adhered to the ECNI guidelines in conducting this EQIA. This EQIA relates to stages 1 to 5. Stages 6 and 7 will be completed at the end of the consultative process.

Key Stages of the EQIA

Key Stage	Description
1	Defining the aims of the Policy
2	Consideration of available data and research
3	Assessment of impacts
4	Consideration of measures that might mitigate any adverse impact and alternative policies which might better achieve the promotion of equality of opportunity
5	Consultation
6	Decision/recommendation by the Public Authority and publication of report on Results of Equality Impact Assessment
7	Monitoring for adverse impact in the future and publication of the results of such monitoring

In keeping with the commitment in its Equality Scheme***in making any decision with respect to this proposal, the Trust will take into account any assessment and consultation carried out in relation to this proposal.***

Consultation

This EQIA and accompanying consultation document are available as part of a 12 week formal Consultation process commencing **27 January 2023 until 21 April 2023**.

The Trust is committed to consulting as widely as possible with all interested persons on this proposal as well as targeting the consultation at those directly affected. This included Trade Unions, Consultant Surgeons, Communications, Strategic Planning and Performance Group, service users and staff. A mix of virtual engagement sessions and face to face meetings took place with all specialities, medical directorate and nursing staff, NIAS and Service User Reference Group.

The Trust recognises the importance of consultation and is committed to carrying out consultation in accordance with the principles contained in its Equality Scheme together with its arrangements detailed in its PPI Strategic Action Plan.

How to Get Involved?

This EQIA and accompanying consultation document contains a lot of information. A consultation questionnaire has been developed to help you provide a response to the Trust in respect of this EQIA. You do not have to use this questionnaire but it may help – see Appendix 1.

Your views are very important to us and we welcome your comments in a variety of means e.g. using the questionnaire, by writing to us, emailing, telephoning (This list is not intended to be exhaustive).

All enquiries regarding this EQIA should be directed to:

Mrs Cathy Lavery
Head of Equality, Diversity & Inclusion
Southern Health and Social Care Trust
c/o Corporate Planning Administration Office
The Brackens
Craigavon Area Hospital
68 Lurgan Road
Portadown
Co Armagh
BT63 5QQ
Tel: 02837564819

Email: consultations@southerntrust.hscni.net

Alternative Formats

This document and the Trust's Equality Scheme can be made available on request in alternative formats.

3.0 Background to the Proposal

Why do we need to change?

The Southern Health and Social Care Trust (the Trust) is committed to providing Emergency General Surgery services to the population it serves, which are based on the best available evidence and quality standards, and which will deliver the best possible outcomes for our patients.

The Trust must also carefully plan how to meet growing need and ensure best use is made of all our available resources to provide services which are sustainable and of a high quality. Our General Surgical Team is proud of the care that they provide to our patients, however acknowledge that to ensure the best possible outcomes, services need to adapt and develop to meet new regional guidelines and changing population needs.

The Trust's General Surgery Team has been significantly challenged to provide a service across the two hospitals in our Acute Hospital network, which are Daisy Hill Hospital and Craigavon Area Hospital. The challenges are due to workforce deficits, particularly in relation to the ability to secure appropriately trained and qualified general surgeons.

In addition to this in June 2021, the Minister for Health commissioned a Review of General Surgery in Northern Ireland in response to challenges in the delivery of safe and sustainable services. It was recognised that there are variations in delivery of services and waiting times across the region and difficulties in maintaining 24/7 rotas for emergency general surgery across multiple sites due to staffing shortages. Actions and standards for Emergency General Surgery were published by the Department of Health in June 2022 and all Trusts will be guided by these standards when reviewing current services and deciding on how best to provide a safe, secure and effective emergency surgery service.

The Trust, similar to the rest of the region, has been impacted by the lack of availability of new general surgeons and consequently a lack of recruitment to vacant surgical posts. This alongside the need to change to create a sustainable service that delivers the best possible outcomes for our patients was highlighted to the Trust's Senior Management team, initially in September 2020 and subsequently brought to Trust Board in November 2021. Following discussion it was agreed that a review of the service be taken forward to consider potential options. It was recognised any proposed changes to service provision would require a formal public consultation. A project structure was put in place to take forward a planned process however, due to a resignation of a further consultant General Surgeon, which reduced the staffing complement in Daisy Hill Hospital to an unsustainable level, the Trust had to implement contingency arrangements since 28th February 2022.

This contingency arrangement was implemented to ensure patient safety was maintained for all patients accessing emergency general surgery services in the Southern area. Within this document the contingency model will be referred to as current service provision.

Proposed Service Model

The purpose of this document is to formally consider the potential equality impacts with regards to the proposed preferred model for the future provision of Emergency General Surgery. The Trust proposes to provide Emergency General Surgery Services on the Craigavon Area Hospital Site 24 hours per day 7 days per week. This is in keeping with the current service model with a number of enhancements to enable the Trust to meet Regional Standards as set out by the Department of Health.

The proposed service model will deliver the following:

- The service will be delivered by an adequately staffed and experienced consultant-led emergency surgical team which will provide a safe and high quality emergency surgical service for the population we serve.
- The Craigavon Area Hospital site will allow critically ill surgical patients (including post-operative emergency patients) to have access to a fully functioning intensive care unit with both level 3 (ICU) and level 2 (HDU) intensive care beds (*Critical Care Network Northern Ireland Registered*).
- The Emergency General Surgery service will have better access to all sub speciality medical and surgical services on the Craigavon Area Hospital site to seek guidance and advice.
- This option will provide access, for emergency surgical patients, to the full range of diagnostic services (radiology and laboratory), 24 hours per day 7 days per week, and timely access to MRI and ultrasound
- The Emergency Department services at both Craigavon Area Hospital and Daisy Hill Hospital will be maintained and supported. Both Emergency Departments will continue to have access to surgical advice and support.
- Patients transferred from Daisy Hill Hospital Emergency Department for surgical assessment/admission will have direct access to the Emergency Surgical service at Craigavon Area Hospital using specialist surgical referral pathways.
- Consolidating the emergency general surgery service on the Craigavon Area Hospital site will ensure appropriate levels of surgical staff can support a sustainable surgical consultant service rota. This will also reduce reliance on locum staff.
- The Trust has modelled the number of surgical inpatient beds required to provide the surgical service of the preferred option in this consultation. The modelling has confirmed that this can be achieved on the Craigavon Area Hospital site.
- A strengthened Emergency General Surgical Service on the Craigavon Hospital Site with an appropriately staffed consultant-led surgical team with access to all surgical

specialties offers greater opportunities for training of surgical trainees further enhancing surgical training in Southern Trust.

- The presence of an enhanced Emergency Surgical Service for the Southern Trust area at Craigavon Area Hospital will be attractive to new staff and thus will support recruitment and retention of all members of the surgical team and the wider supporting clinical services.
- Further development of policies and protocols in line with regional standards.

The public Consultation will commence on 27 January 2023 and will finish on 21 April 2023.

This Equality Impact Assessment assesses the impact of the Trust's proposed service changes to achieve the Trust's vision for a safe and sustainable provision of Emergency General Surgery Services. The outcome from the equality screening was to progress to a full Equality Impact Assessment (EQIA). The Trust is committed to its legal duties and fundamental principles under Section 75 of the Northern Ireland Act 1998. The Trust intends to fully engage and consult on this proposal and the future of safe and sustainable emergency care provision.

In keeping with the commitment in its Equality Scheme the Trust in making any final decision(s) will take into account any assessment and consultation carried out in relation to its plans for change.

Identification of Groups Affected by this

The Trust has identified the following groups likely to be affected by this proposal:

- Surgical Staff/Theatre staff
- SHSCT population;
- GPs;
- Other Trusts
- NIAS
- Daisy Hill Pathfinder Group
- Wider SHSCT staff
- Voluntary/ Independent Sector
- RQIA
- Patient Client Council
- PSNI
- Local Councils
- Local media
- Local Politicians
- Staff Side/ Trade Unions
- Minister for Health,
- DOH / HSCB / PHA

Involving You

We are committed to improving the way we provide services for people and we need you to help us to do this. We believe that the people who use the service, their families, relatives, visitors, carers and communities and the staff who deliver the service are best placed to tell us what the new service should look like and we are keen to involve these groups specifically in the process.

4.0 Consideration of Available Data and Research Data Sources

In keeping with the Equality Commission (NI) Guide to the Statutory Duties and EQIA Guidelines, quantitative and qualitative data was drawn from a number of sources to inform this EQIA. In conducting this EQIA, the Trust took into account data and research findings from the following sources:

- ◆ Northern Ireland Action Plan for Surgical Recovery 10 steps not 10 years
- ◆ Delivering Together strategy 2026
- ◆ New Decade, New Approach (January 2020)
- ◆ The Right Time, The Right Place (The Donaldson Report), January 2015
- ◆ DoH regional covid-19 pandemic surge planning strategic framework (1 Sept 20)
- ◆ HSC Framework for Supporting the Well-being Needs of our HSC staff during Covid-19
- ◆ Bengoa – Systems, Not Structures – Changing Health and Social Care – October 2016
- ◆ Health and Wellbeing 2026 - Delivering Together Vision for Health and Social care – 26 October 2026
- ◆ Transforming Your Care – A Review of Health and Social Care in NI December 2011
- ◆ Systems, Not Structures – Changing Health and Social Care (Bengoa Report – October 2016)
- ◆ SHSCT Corporate Plan 2022-23
- ◆ Section 75 of the NI Act 1998 – A Guide for Public Authorities
- ◆ Trust's Equality Scheme – approved 2011
- ◆ Trust People Management Framework 2014-2017
- ◆ Trust Management of Change Framework – vehicle to manage and effect changes at it relates to Trust staff
- ◆ Trust Consultation Scheme Section 19 and 20 of the Reform Act (NI) 2009 – places a statutory requirement on the Trust to involve and consult the public about proposals and decisions in the planning, commissioning and delivery of HSC services
- ◆ Human Rights Act 1998
- ◆ Care Principles for the UN Principles for Older People
- ◆ Other International HR Instruments/Treaties
- ◆ NI Human Rights Commission – Human Rights Inquiry Emergency Health Care
- ◆ Trust's Equality, Diversity and Inclusion Policy
- ◆ Trust's Recruitment and Selection Policy/Procedures
- ◆ Trust Work Life Balance Policy
- ◆ Trust's Disability Action Plan and Guidelines for Managers on Reasonable Adjustment in the Workplace
- ◆ European Working Time Directive
- ◆ My Day, My Way – Patient Client Council 2011

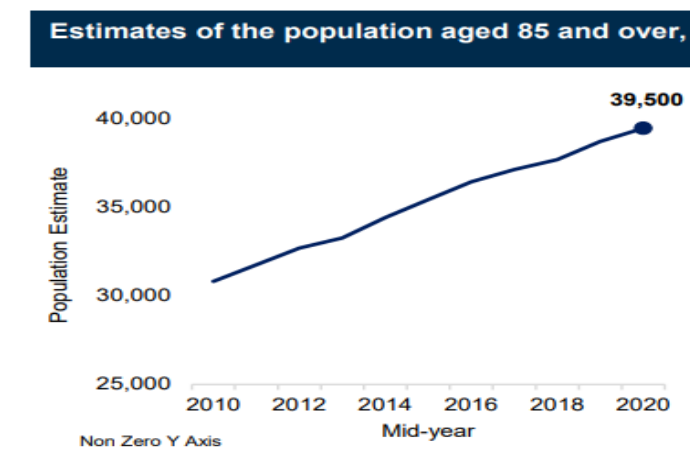
- ◆ SHSCT Approved Equality Scheme
- ◆ Health and Social Care Workforce Strategy 2026
- ◆ Quality 2020: A 10 Year Strategy to Protect and Improve Quality in Health and Social Care in Northern Ireland
- ◆ DHSS – Change or Withdrawal of Services; Revised Guidance on Roles & Responsibilities – DHSSPSNI- 24th November 2014
- ◆ Making Life Better 2012–2023 is the ten year public health strategic framework
- ◆ Regional Transport Strategy
- ◆ Delivering Care
- ◆ Northern Ireland Statistics & Research Agency (NISRA) population statistics

The list is not intended to be exhaustive.

Profile of Southern Health and Social Care Trust Resident Population - 2011 Census

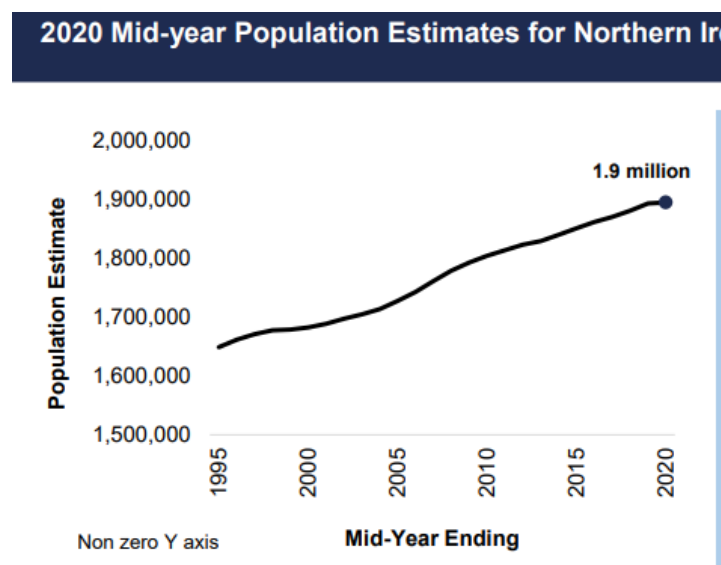
Section 75 Group	Southern Trust's Area	Trust's Area Population of 358,034) Percentage	Make up of Newry and Mourne DCA Population
Gender	Female	50.36	50.26
	Male	49.64	49.74
Religion	Protestant	39.15	18.00
	Roman Catholic	56.69	79.36
	Other	4.16	2.64
Political Opinion	Not collected		
Age	0-15	22.73	23.64
	16-24	12.25	12.50
	25-44	28.45	28.37
	45-64	23.40	23.17
	65-84	11.69	10.97
	85+	1.48	1.35
Marital Status (aged 16+ years)	Single	34.99	36.92
	Married/Civil Partnership	50.24	48.80
	Other	14.77	14.28
Dependent Status	Caring for a Child/Children/Dependant Older Person/Person(s) With a Disability	11.34% of usually resident population provide unpaid care	11.37% of usually resident population provide unpaid care
Disability	Yes	19.64	19.41
	No	80.36	80.59
Ethnicity	Asian Other	0.20	0.09
	Bangladeshi	0.01	0.01
	Black African	0.11	0.05
	Black Caribbean	0.01	0.01
	Black Other	0.10	0.03
	Chinese	0.22	0.16
	Indian	0.17	0.14
	Irish Traveller	0.15	0.16
	Mixed Ethnic Group	0.29	0.19
	Other	0.16	0.10
	Pakistani	0.07	0.04
	White	98.51	99.01
Sexual Orientation	Estimated 6-10% of persons identify as lesbian, gay, bisexual – <i>Source: 2012 report by Disability Action & Rainbow Project</i>		

Tables below are taken from NISRA 2020 Mid-year Population Estimates

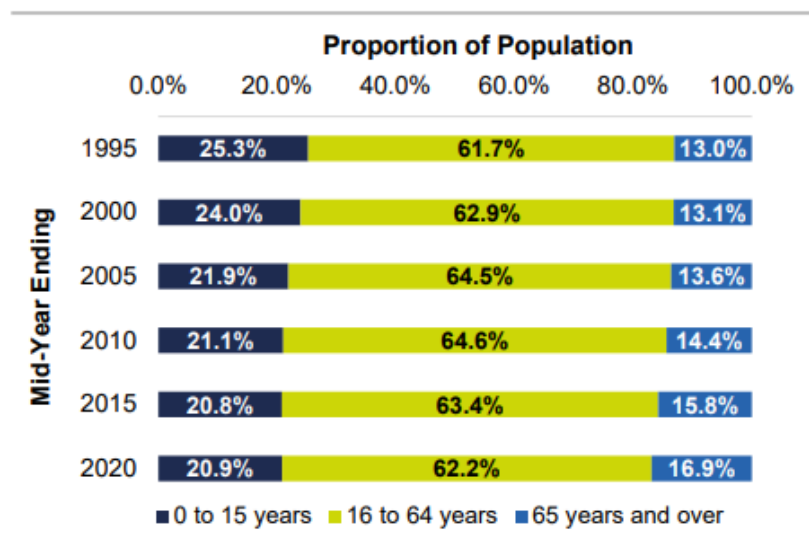


The number of people aged 85 and over in Northern Ireland was estimated to be 39,500 in mid-2020, an increase of 700 people (1.9 per cent) since mid-2019. Over the decade, the population aged 85 and over grew by 8,700 people (28.1 per cent).

([2020 estimates of the population aged 85 and over - statistical bulletin \(nisra.gov.uk\)](https://www.nisra.gov.uk/statistics/2020-estimates-of-the-population-aged-85-and-over))



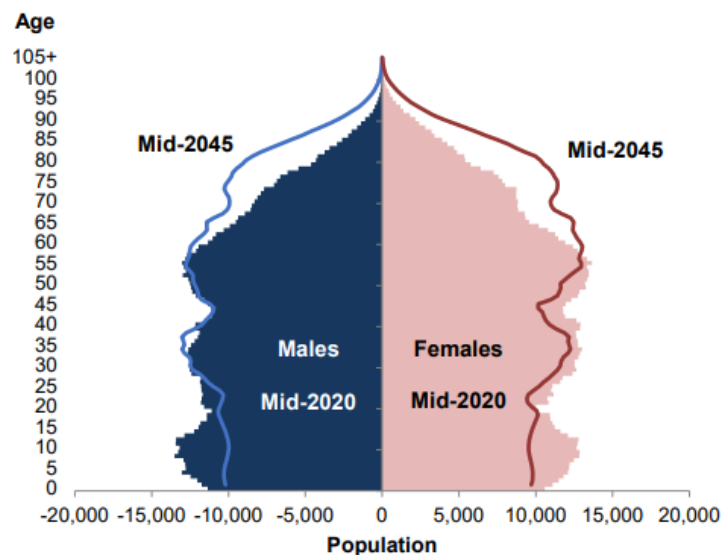
Northern Ireland's population (30 June 2020) was 1,895,500. The population increased by 1,800 people or 0.1 per cent between mid-2019 and mid-2020. The graph shows the trend from 1995- 2020.



By mid-2020, one in six people in Northern Ireland were aged 65 and over. The proportion of the population aged 65 or more has increased from 13.0 per cent in mid-1995 to 16.9 per cent in mid-2020. In contrast, the proportion of the population aged 0 to 15 years has decreased from 25.3 per cent in mid-1995 to 20.9 per cent in mid-2020.

([2020 Mid-year Population Estimates - summary infographic \(nisra.gov.uk\)](https://www.nisra.gov.uk/2020-mid-year-population-estimates-summary-infographic))

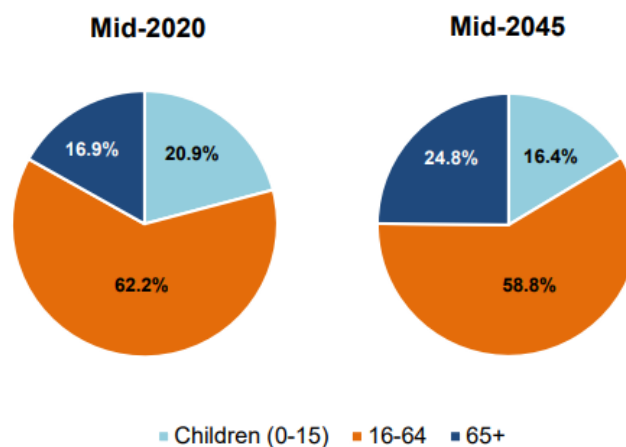
Figure 5: Estimated and projected population by age and sex, mid-2020 and mid-2045



As well as a projected growth in the overall numbers of people in Northern Ireland over the 25 year projection period, the age structure of the population is also projected to change. Figure 5, a population pyramid, is an illustrative way of showing that the age profile of both males and females is projected to get older. By mid-2045, it is evident that the population around the older ages (65 and over) is projected to increase significantly. By mid-2027, the number of people aged 65 and over is projected to overtake the number of children.

The number of children (aged 0- 15) is projected to decrease by 19.8 per cent (78,200 people) from 395,800 in mid-2020 to 317,600 in mid-2045. Similarly, it is projected that number of people aged 16-64 will decrease from 1,179,700 to 1,139,400 people (3.4 per cent) by mid2045. In contrast, the number of people aged 65 and over is projected to increase from 319,900 to 481,500, (50.5 per cent) over the next 25 years. As a result of this increase, by mid2027, the number of people aged 65 and over will outnumber children in Northern Ireland.

Figure 7: Estimated and projected proportion of population by age, mid-2020 and mid-2045



By mid-2045, almost 1 in 4 people in Northern Ireland are projected to be aged 65 and over. The proportion of children is projected to decrease from 20.9 per cent in mid-2020 to 16.4 per cent in mid-2045. Similarly, the proportion of people aged 16 to 64 is projected to decrease between 2020 and 2045, from 62.2 per cent to 58.8 per cent. Conversely, the proportion of people aged 65 and over is projected to increase from 16.9 per cent to 24.8 per cent over the next 25 years

([2020-based interim population projections - statistical bulletin \(nisra.gov.uk\)](https://www.nisra.gov.uk/statistics/population-projections-2020-based-interim-population-projections-statistical-bulletin))

5.0 Assessment of Impact on Current Service Users by Section 75 Equality Groups

Good Relations

Due consideration has been given to the need to promote good relations between the three groups covered by Section 75(2) i.e. on the grounds of religious belief, racial group and political opinion. The Trust will ensure that its engagement arrangements are meaningful and inclusive and that any consultation and assessment, carried out in respect of these proposals, is taken into account in making any final decision regarding the future provision of Emergency General Surgery services.

The key findings from the tables shown on the previous pages are described below.

Political Opinion – Whilst not collected, proxy information such as religious affiliation is generally accepted as providing a reliable indication of a person's political opinion as are council voting patterns. The Trust has examined the breakdown of seats held within each of the Local Government Districts as follows: -

Breakdown of Councillors Seats May 2022

Party	Banbridge & Craigavon (Upper Bann Seats)	Mid Ulster (Mid Ulster + South Tyrone Seats)	Newry & Armagh (Newry and Armagh Seats)
DUP	2	2	1
UUP	1	1	0
SDLP	0	1	1
Sinn Fein	1	6	3
Independent	0	0	0
Alliance	1	0	0
Green	0	0	0
UKIP	0	0	0
Aontu	0	0	0

All of the Trusts services provide a welcoming environment where people from differing community backgrounds are cared for together and necessary arrangements are made for patients to practice their religious beliefs. There is no evidence to suggest that this proposal will have any adverse impact on the grounds of political opinion.

Dependency Status – Carers NI estimate that there are currently 220,000 carers in Northern Ireland (a substantial increase from the DHSSPS figure of 185,000 quoted in 2006). There is no evidence to suggest that this proposal will have any adverse impacts. The Trust is committed to monitoring for any adverse impacts.

Sexual Orientation – Whilst no direct information is gathered on sexual orientation, population trends estimate that 6-10% of the population are from the gay, lesbian, bisexual or 'trans' (transsexual, transgendered and transvestites) (LGBT) community. There is no information to suggest that the Trust's proposal will have an adverse impact on the grounds of current service users and population.

Gender - The gender profile of the local population users is as noted in the table above - Male 49.6% and Female 50.4%. There is no evidence to suggest that this proposal will have any adverse impact on the grounds of gender. The Trust is committed to monitoring for any adverse impact in relation to this proposal.

Religion – The tables shows the religious composition of the population of the local government district areas. The proposed service model will impact upon both main communities living in the Southern Trust area.

All service users will be treated with dignity and respect and communicated in a way that is sensitive to their needs and in line with the patient and client standards which are aimed at improving the patient experience.

Religious Composition of Population by Local Government District Area (LGD) – 2011 Census

LGD Area	Religious Composition (%)		
	Protestant	Catholic	Other
Armagh	(48.00) [49.81]	(48.36) [50.19]	(3.64)
Banbridge	(62.02) [65.95]	(32.02) [34.05]	(5.96)
Craigavon	(48.04) [51.12]	(45.94) [48.88]	(6.02)
Dungannon	(33.03) [34.01]	(64.12) [65.99]	(2.85)
Newry and Mourne	(17.99) [18.48]	(79.37) [81.52]	(2.64)

Note: Percentages shown within the square brackets refer to Protestant and Catholic figures only and exclude the figures for ‘other’. The above table highlights the local variations in religious composition across the local government district areas.

Both main communities will be affected by this proposal – but more so the Catholic community by virtue of the make-up of the local Newry, Mourne and Down District Council Area. The Trust is committed to monitoring for any adverse impact.

Racial Group – The Trust is mindful that there are increasing numbers of BME communities living in its geographical area. The Trust has reviewed the requests from service users in general, for interpreters from the Northern Ireland Health and Social Care Interpreting Services (NIHSCIS) over a twelve month period (1 April 2021 – 31 March 2022) which, gives an indication of minority ethnic users but, of course, will not capture those who are fluent in English or provide an interpreter from outside the (NIHSCIS). Requests for the top ten languages shows that Polish is the most requested at 8002, followed by Lithuanian at 6694, Bulgarian at 4973, Tetum at 4744 and Portuguese at 4572.

The Trust is committed to ensuring its services are accessible to all and provides an interpreting service to those who first language is not English.

Any specific cultural needs will be addressed in the proposed new service model. The proposed changes may impact upon some BME community groups in terms of further travel distances and journey times especially for service users who do not have access to a form of transport. The Trust will continue to work with users and representative groups to monitor impact and ensure that minority ethnic patients have access to Trust services. This will be particularly necessary in planning a communication strategy around this proposal so that BME and the wider population are aware of any changes in the future provision of Emergency General Surgery.

Disability – For both men and women the rate of disability increases with age. Women on average live longer than men therefore disability tends to be more common among women. It is estimated that between 17-21% of the NI population have a disability, affecting 37% of households compared to 40.57% households (Source 2011 Census) in the SHSCT. The prevalence of disability amongst adults varies significantly with age, ranging from a low of 5% amongst young adults aged 16-25 to 60% amongst those aged 75 and above. Those aged 85 and above, the prevalence of disability increases to almost 67%. Any proposal should consider the potential for differential impact on grounds of disability. The Trust is committed to monitoring for any future adverse impact in relation to this proposal.

Age - The Northern Ireland Assembly research paper - A demographic portrait of Northern Ireland: some implications for public policy – states that between 2011 – 2021 the number of persons aged 85+ is expected to increase by half (51.1%) to 47,900. By 2031, the 85+ population is projected to reach 75,800, or 3.8 % of the total population. The over 65 population is projected to increase from 63,688 to 80,521, indicating a growth of 26.4% over

the next 10 year period. With the aging population comes the prevalence of long term conditions.

Marital Status – There were no issues raised or evidence to suggest that there would be any adverse effect for current services users on the grounds of marital status. The Trust is committed to monitoring for any adverse impact.

6.0 Mitigation of Impact on Patients

This table gives an indication of the profile of patients against some of the Section 75 categories. The table shows the average percentage of non elective admissions to Craigavon Area Hospital and Daisy Hill Hospital from November 2021 to May 2022

Section 75 Group	Non elective admissions to Craigavon Area Hospital from November 2021 – May 2022	Average Percentage
Gender	Female	
	Male	
Religion	Protestant	21.3%
	Roman Catholic	39.4%
	Other	39.3%
Age	0-17	9.7%
	18-65	55.2%
	>65	35.1%
Marital Status	Married	43.2%
	Single	34.5%
	Widowed	8.7%
	Unknown	5.9%
	Divorced	4.2%
	Separated	2.0%
	Common Law	1.6%

Section 75 Group	Non elective admissions to Daisy Hill Hospital from November 2021 – May 2022	Average Percentage
Gender	Female	
	Male	
Religion	Protestant	12.2%
	Roman Catholic	58.9%
	Other	28.8%
Age	0-17	13%
	18-65	55.7%
	>65	31.3%
Marital Status	Married	39.3%
	Single	35.6%
	Widowed	15.4%
	Unknown	3.4%
	Divorced	3.4%

	Separated	2.5%
	Common Law	0.5%

The Trust wants to deliver the best outcomes for patients who require Emergency General Surgery by providing services that reflect the best evidence for Emergency General Surgery care. Our priority is to provide the best care possible through a service that meets quality standards.

This consultation paper explains the changes that we propose to seek to achieve this vision in our area including:

- Our current services in both Craigavon Area Hospital and Daisy Hill Hospital
- The latest medical evidence for Emergency General Surgery and why this means change for our current services
- What the proposed future service model is
- What will be better after the change

The Trust fully accepts its obligation to take necessary steps to consider policy alternatives and mitigation, as an integral part of the EQIA process, in order to address any potential differential impact on current service users.

7.0 Assessment of Impact on Current Staffing

The Trust utilised both quantitative and qualitative data when considering the equality implications of this proposal on the current workforce. Both types of data were regarded as equally relevant and included information drawn from the following sources: -

- The Trust's Human Resources Management System.
- The Trust's Equal Opportunities Monitoring System.
- Northern Ireland Statistics and Research Agency (NISRA).
- 2011 Census of Population (Northern Ireland)
- Article 55 Review Report
- ECNI Composite Report titles - Emerging Trends across 5 HSC Trusts
- ECNI Monitoring Report
- Previous engagement with relevant staff

Profile of Trust Staff

The table below show details the Profile of the Trust's total workforce by Section 75 groups as at January 2022 plus staff potentially affected by proposal:

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

Section 75 Group	Southern Trust Workforce Profile as at 1 January 2022	Percentage	Staff affected by proposal
Gender	Female	85.3%	69.9%
	Male	14.7%	30.1%
Religion	Protestant	34.9%	20.5%
	Roman Catholic	57.2%	59%
	Neither	7.9%	20.5%
Political Opinion	Broadly Unionist	9.1%	8.2%
	Broadly Nationalist	9.9%	12.3%
	Other	7.8%	6.9%
	Do Not Wish To Answer/Not Known	73.2%	72.6%
Age	16-24	8.7%	1.4%
	25-34	24.3%	16.4%
	35-44	25.3%	45.2%
	45-54	21.0%	15.1%
	55-64	17.5%	19.2%
	65+	3.2 %	2.7%
Marital Status	Single	33.2%	27.4%
	Married	56.9%	61.6%
	Not Known	9.9%	11%
Dependent Status	Caring for a Child/Children / Dependant		
	Older Person / Person With a Disability	17.1%	17.8%
	None	31.1%	31.5%
	Not Known	51.8%	50.7%
Disability	Yes	2.4%	1.4%
	No	76.3%	86.3%
	Not Known	21.3%	12.3%
Ethnicity	Bangladeshi	0.01%	0
	Black African	0.2%	0
	Black Caribbean	0.02%	0
	Black Other	0.02%	0
	Chinese	0.08%	0
	Filipino	0.4%	2.7%
	Indian	0.7%	2.7%
	Irish Traveller	0.02%	0
	Mixed Ethnic	0.2%	0
	Pakistani	0.1%	1.4%
	White	77.5%	76.7%
	Not Known	20.8%	16.4%
Sexual Orientation towards:	Opposite Sex	57.2%	58.9%
	Same Sex	1.0%	2.7%
	Same and Opposite Sex	0.2%	0
	Do Not Wish To Answer/Not Known	41.6%	38.4%

*It should be noted that the provision of equality information by staff is voluntary. All staff are encouraged to record their equality information at recruitment stage and to update it during employment. Disclose rates vary across the equality groups and should take into consideration when interpreting the data.

8.0 Assessment of Impact on Current Staff by Section 75 Equality Groups

Good Relations

Due consideration has been given to the need to promote good relations between the three groups covered by Section 75(2) i.e. on the grounds of religious belief, racial group and political opinion. The Trust will ensure that its engagement arrangements adhere to best practise principles governing consultation and are meaningful and inclusive of all staff affected and Trade Unions in line with the Trust's Management of Change Framework and Recognition Agreements. Staff will be kept fully informed throughout the consultative process and in any future recommendation arising from this consultation process.

With regards to the information provided in the tables on page 22 the assessment of impact identified potential for differential impact with regard to the following S75 categories: gender, age, disability and dependants by virtue of the makeup/profile of existing staff.

Gender – The gender profile for staff affected is predominately female i.e 69.9% Females and 30.1% Males which is reflective of the gender split to the overall workforce. Therefore any future provision of Emergency General Surgery should consider the potential for differential impact on females. The Trust is also mindful of the dependency/caring obligations associated with its female workforce see dependents below. The Trust will take seriously requests for flexible working in line with its Work Life Balance Policy to enable staff to reconcile their work and caring commitments.

Religion – As noted in table above the religious profile of staff affected is 20.5% Protestant and 59% Roman Catholic and 20.5% not known. The religion profile is reflective of overall workforce. Any proposed reconfiguration in the future provision of Emergency General Surgery has the potential to impact on both the two main communities. Having regard to the Management of Change Framework along with mitigating measures staff are not likely to be adversely impacted upon by this policy proposal with regards religion. The Trust is committed to monitoring for any adverse impact. The Trust promotes a harmonious working environment for all staff regardless of their religious background and actively supports the Equality Commission for NI's guidance on promoting a harmonious working. The Trust has also signed off on a Harmonious Working Environment Statement - Joint Declaration of Protection between Management and Trade Unions to prohibit displays and manifestations of material and behaviour likely to cause discord in the workplace.

Political Opinion - Whilst information on political opinion is sourced, it is voluntary and as such many staff choose not to declare their political opinion. Voting patterns and religion are a good proxy for political opinion. As with religion above, the Trust is committed to monitoring for any adverse impact.

Racial Group – The majority of existing staff are white i.e. 76.7%. There is no evidence to suggest that any future reconfiguration in the future provision of Emergency General Surgery would have an adverse effect for current staff on the grounds of race. The Trust is committed to promoting a harmonious working environment where all staff are treated with dignity and respect regardless of their ethnic background. The Trust is committed to monitoring for any adverse impact. The Trust will also be mindful of the language needs of staff who do not speak English as a first language vis a vis any engagement and communication plan.

Disability – Available figures indicate that a small number of staff have a disability i.e. 1.4%. The Trust is mindful that the prevalence of disability is generally underreported. The proposal will take into account the needs of staff with regard to any reasonable adjustments in line with the Trust's Management of Change Framework. The Trust is committed to monitoring for any future adverse impact and will honour its obligations with the regard to the Disability Discrimination Act 1995.

Age – The majority of current staff employed are within the 35-44 age group i.e. 45.2%. The Trust is committed to monitoring for any future adverse impact and will manage any staffing issues in line with the Trust's of Change Framework.

Marital Status – Staff potentially affected by the proposed service model that are married is 61.6% - this is a higher percentage when compared to the overall workforce composition i.e. 56.9%.. The Trust will take this into account when considering mitigation measures for staff directly affected - see correlation with 'gender' above and 'dependency status' below. The Trust's Work Life Balance Policy applies equally to men and women and same sex partners. Serious consideration will be given to all requests for flexible working in line with Trust Policy.

Dependency Status – The Trust is mindful of the caring obligations associated with existing staff in relation to this proposal and will take seriously all requests from staff affected regarding flexible working options in line with the Trust's Work Life Balance Policy.

Sexual Orientation – There is no evidence to suggest that the proposal will have an adverse impact on employees as a result of their sexual orientation. The Trust will continue to monitor for any potential adverse effects.

9.0 Mitigation of Impact on Current Staff

In order to manage and mitigate any potential differential impact on existing staff the Trust will adopt a project management approach. As part of this approach a project management group will include a Human Resources and Trade Union representative(s) so as to ensure robust, fair and agreed human resources processes are in place to manage any future staff changes. The Trust's Management of Change Framework is the main vehicle for effecting change within the Trust.

In association with the above framework, the Trust is committed to the following underpinning principles:

- Any future staff changes will be taken forward through a partnership approach in consultation and negotiation with trade unions.
- The principles of fairness, dignity and equity of treatment will be applied in the management of staff issues associated with any future organisational change processes. Steps will be taken to ensure that the implementation process in no way conflicts with the requirements of existing equality and anti-discrimination legislation. The Trust commits to ensuring that existing arrangements such as reasonable adjustments for individual staff or affirmative action programmes already entered into will be honoured.
- Sound HR processes will be in place and applied in order to retain valuable skills and experience within the Trust and to optimise effective service delivery. As such staff should give due consideration to offers of reasonable alternative employment within the Trust.
- HR processes will be applied with equity, consistency and transparency and will be mindful of the need to move quickly and to ensure that the quality of care delivered to residents is not compromised.
- Where notable change is to be effected all staff affected will be offered one to one meetings with a senior representative from Human Resources (with their Trade Union representative in attendance) to ascertain their preferred employment options and to establish any particular personal circumstances which may need to be taken into account e.g. caring responsibilities, access to transport, health/disability issues etc.
- Every effort will be made to ensure staff requiring redeployment remain as close as is reasonably possible to their current work base, taking account of work/life balance issues. If appropriate, excess travel expenses will be paid.
- Appropriate training and re-training opportunities will be provided to assist staff who move to new roles and assume new responsibilities. Particular attention will be given to the need to support older staff avail of all training opportunities.

- All staff will be kept fully informed and supported during any future change management processes.

The Trust will ensure that qualitative and quantitative monitoring and data collection systems are in place to record all future decisions taken which affect the employment of groups and individuals.

The Trust values and respects its staff and will keep them informed at every stage of this consultative process.

10.0 Formal Consultation

The Trust intends to consult as widely as possible with all interested persons over a 12 week period commencing 27 January 2023 until 21 April 2023 on the proposed future provision of Emergency General Surgery within SHSCT and this accompanying EQIA. In doing so, it will conform with the guiding principles governing consultation contained in its Equality Scheme and the Commission Guide to the Statutory Equality Duties.

Targeted consultation will also include specific consultation meetings with staff and service users directly affected and a range of stakeholders.

To facilitate comments please complete the consultation questionnaire attached, further copies are available on the Trust's website at

<http://www.southerntrust.hscni.net/involving-you/consultations/>

however we will accept comments in any format.

All responses regarding this EQIA process should be directed to:

Mrs Cathy Lavery
Head of Equality, Diversity & Inclusion
Southern Health and Social Care Trust
c/o Corporate Planning Administration Office
The Brackens
Craigavon Area Hospital
68 Lurgan Road
Portadown
Co Armagh
BT63 5QQ
Tel: 02837564819

Email: consultations@southerntrust.hscni.net

11.0 Decision/Recommendation of Trust Board and Publication of Report on Results of this EQIA

This EQIA has been published in keeping with the commitments in the Trust's Equality Scheme.

In keeping with the commitment in its Equality Scheme (paragraph 3.2.11 refers).... in making any decision with respect to a policy adopted or proposed to be adopted, the Trust will take into account any assessment and consultation carried out in relation to the policy.

When the consultation process is concluded the submissions will be considered and submitted to the Trust Board prior to any recommendation/decision being made. A record of the consultation process i.e. Consultation Outcome Report and Decision of the Trust will be placed on the Trust's website <https://southerntrust.hscni.net/involving-you/consultations/>

The final EQIA will also be published and will be posted on the Trust's website.

12.0 Monitoring for Adverse Impact in the Future and Publication of the Result of such Monitoring

In keeping with the Equality Commission's guidelines, the Trust will put in place a monitoring strategy to monitor the impact of this proposal on the relevant groups and sub groups within the equality categories. The Trust will publish the results of this monitoring and include same in its annual progress report to the Equality Commission for NI.

If the monitoring and analysis of results show that the impact of this proposal results in greater adverse impact than predicted, or if opportunities arise which would allow for greater equality of opportunity to be promoted, the Trust will ensure that measures are taken to achieve better outcomes for the relevant equality groups.

APPENDIX 1



Southern Health and Social Care Trust

The Trust wishes to consult as widely as possible on the proposal.
Please use this consultation questionnaire to register your comments by
21 April 2023.

Question 1

What is your name? (If you wish to provide your name, we can forward a receipt of your response)

Click or tap here to enter text.

Question 2

What is your email address? (If you wish to provide your email address, we can forward a receipt of your response)

Click or tap here to enter text.

Question 3

I am responding as

An individual ☐

Member of staff ☐

On behalf of an organisation ☐

Please detail the organisation you are representing or are a member of:

Representing: Click or tap here to enter text.

Member of: Click or tap here to enter text.

Question 4

Do you agree with the reasons for change outlined in the document?

Yes ☐

No ☐

Please provide any further comments below:

[Click or tap here to enter text.](#)

Question 5

Do you agree with proposal to provide Emergency General Surgery Services on the Craigavon Area Hospital site 24 hours per day 7 days per week?

Yes ☐

No ☐

Please provide any further comments below:

[Click or tap here to enter text.](#)

Question 6

An Equality Impact Assessment is available on the Trust website. Do you agree with the outcome of this assessment?

Yes ☐

No ☐

Please provide any further comments below:

[Click or tap here to enter text.](#)

Question 7

A Rural Needs Impact Assessment is available on the Trust website. Do you agree with the outcome of this assessment?

Yes ☐

No ☐

Please provide any further comments below:

Click or tap here to enter text.

Question 8

Please provide any further comments below:

Click or tap here to enter text.

Please return your response to the following email address or by post to:

Cathrine Reid
Interim Director of Surgery and Elective Care, Integrated Maternity and Women's
Health, Cancer and Clinical Services
Southern Health and Social Care Trust
c/o Corporate Planning Administration Office
The Brackens
Craigavon Area Hospital
68 Lurgan Road
Portadown
Co Armagh
BT63 5QQ
Tel: 02837564819

Email: consultations@southerntrust.hscni.net

Thank you for taking the time to complete.

APPENDIX 2

Privacy, Confidentiality and Access to Consultation Responses

For this consultation, we may publish all responses except for those where the respondent indicates that they are an individual acting in a private capacity (e.g. a member of the public).

We will publish a summary of the consultation responses and, in some cases, the responses themselves but these will not contain any personal data. We will not publish the names or contact details of respondents, but may include the names of organisations responding.

For more information about what we do with personal data please see our consultation privacy notice, which can be accessed via: <https://southerntrust.hscni.net/involving-you/consultations/>

Your response, and all other responses to this consultation, may also be disclosed on request in accordance with the Freedom of Information Act 2000 (FOIA) and the Environmental Information Regulations 2004 (EIR); however all disclosures will be in line with the requirements of the Data Protection Act 2018 (DPA) and the UK General Data Protection Regulation.

If you want the information that you provide to be treated as confidential it would be helpful if you could explain to us why you regard the information you have provided as confidential, so that this may be considered if the Trust should receive a request for the information under FOIA or EIR.